

MID-MARKET (FIRSTRX)

## Prescription Drug Guide

Accord™ Formulary

### Introduction

The Prescription Drug Guide contains covered drugs for a broad range of diseases. It is organized into broad categories by Therapeutic Class. Generally, generic drugs are shown in lower-case *italic* type, and brand drugs are shown in capital letters. Consider asking your provider to prescribe generic (p or np) and preferred (P) products, if appropriate.

### Specialty Drugs

Specialty medications are often used to treat rare or complex chronic conditions, possibly require high-touch patient care, might need administration by a healthcare professional, can have special handling requirements, and/or could have limited access via select specialty pharmacies.

### 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, weight loss or infertility.

### Coverage Review

If your provider determines that you need a drug that is not covered by the formulary or has prerequisites for coverage, you or your prescriber may initiate the coverage review process using the online tool at [primetherapeutics.com](https://primetherapeutics.com) or by calling the Customer Service number on the back of your card any time, 24 hours a day, 7 days a week.

### Notice

The purpose of the drug list is to provide a guide to coverage. Decisions about the need for a prescription drug and dosage of a prescription drug must be made solely by you and your physician in accordance with the patient/physician relationship.

The drug list, also known as a formulary, is regularly updated. This list is subject to change. Please refer to [primetherapeutics.com](https://primetherapeutics.com) for the current version.

TIER		DESCRIPTION
p	Preferred Generics	
np	Generics	
P	Preferred Brands	
NP	Non-Preferred Brands	
TYPE		DESCRIPTION
QL	Quantity Limit	There is a limit to the maximum amount of this drug that can be dispensed over a period of time.
ST	Step Therapy	You may be required to first try certain drugs to treat your medical condition before you move to this drug option.
C	Custom	This drug has unique restrictions as indicated.
S	Specialty Drug	Specialty medications are often used to treat rare or complex chronic conditions, possibly require high-touch patient care, might need administration by a healthcare professional, can have special handling requirements, and/or could have limited access.
HSA	HSA Preventive Drug	This drug may be covered at zero or low cost before the deductible is satisfied depending on your specific plan. Not all strengths and dosages will be covered.
ACA	ACA Preventive Drug	The Affordable Care Act (ACA) requires certain preventive generic products to be covered at zero dollar copay. This does not include plans that are grandfathered.
PA	PA Applies	Your provider will need to submit a prior authorization request which must be approved before you can receive coverage for this drug.
QPD	Quantity Per Day	There is a limit to the amount of this drug that is covered per day.

## LIST OF COVERED PRESCRIPTION MEDICATIONS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ALPHA-ADRENERGIC BLOCKING AGENT(SYMPATH)		
NON-SEL.ALPHA-ADRENERGIC BLOCKING AGENTS		
DIBENZYLINE	NP	HSA
<i>dihydroergotamine 1 mg/ml amp</i>	np	ST QPD 0.858 per day
<i>dihydroergotamine 4 mg/ml spry</i>	np	PA QPD 0.286 per day
ERGOMAR	NP	ST QPD 0.715 per day
<i>ergotamine-caffeine</i>	NP	ST QPD 1.429 per day
MIGERGOT	NP	ST QPD 0.667 per day
MIGRANAL	NP	PA QPD 0.286 per day
<i>phenoxybenzamine hcl</i>	np	HSA
TRUDHESA	NP	PA QPD 0.429 per day
SELECTIVE ALPHA-1-ADRENERGIC BLOCK.AGENT		
<i>alfuzosin hcl er</i>	p	QPD 1.0 per day
FLOMAX	NP	QPD 2 per day
RAPAFLO	NP	QPD 1 per day
<i>silodosin</i>	np	QPD 1.0 per day
<i>tamsulosin hcl</i>	p	QPD 2.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
UROXATRAL	NP	QPD 1 per day
ANALGESICS AND ANTIPYRETICS		
NON-OPIOID ANALGESICS		
BUPAP	np	QPD 6 per day
<i>butalbital-acetaminophen 50-300</i>	np	QPD 6.0 per day
<i>butalbital-acetaminophen 50-325</i>	np	QPD 6.0 per day
TENCON	P	QPD 6 per day
OPIOID AGONISTS (28:08)		
<i>acetamin-caff-dihydrocodeine</i>	NP	QPD 10 per day
<i>acetaminophen-codeine (acetamin-codein 300-30 mg/12.5, acetaminop-codeine 120-12 mg/5)</i>	p	QPD 90.0 per day
<i>acetaminophen-cod #4 tablet</i>	np	QPD 6.0 per day
<i>acetaminophen-codeine (#2 tablet, #3 tablet)</i>	p	QPD 12.0 per day
ACTIQ	NP	PA QPD 4 per day
APADAZ	NP	QPD 12 per day
<i>asa-butalb-caffeine-codeine</i>	np	QPD 6 per day
ASCOMP WITH CODEINE	np	QPD 6 per day
<i>benzhydrocodone-acetaminophen</i>	NP	QPD 12 per day
<i>butalb-acetaminoph-caff-codein</i>	np	QPD 6 per day
<i>butalbital compound-codeine</i>	np	QPD 6 per day
<i>codeine sulfate (15 mg tablet, 60 mg tablet)</i>	NP	QPD 6 per day
<i>codeine sulfate 30 mg tablet</i>	np	QPD 6 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>codeine sulfate 30 mg tablet (west-ward/hikma)</i>	NP	QPD 6 per day
CONZIP (100 MG CAPSULE, 200 MG CAPSULE, 300 MG CAPSULE)	NP	PA QPD 1 per day
DILAUDID 5 MG/5 ML ORAL LIQUID	NP	QPD 48 per day
DILAUDID (2 MG TABLET, 4 MG TABLET, 8 MG TABLET)	NP	QPD 6 per day
DISKETS	np	QPD 3 per day
ENDOCET 10-325 MG TABLET	np	QPD 6 per day
ENDOCET 2.5-325 MG TABLET	np	QPD 12 per day
ENDOCET 5-325 MG TABLET	p	QPD 12 per day
ENDOCET 7.5-325 MG TABLET	np	QPD 8 per day
<i>fentanyl</i>	np	PA QPD 0.5 per day
<i>fentanyl citrate (cit 1,200 mcg, cit 1,600 mcg, citrate 200 mcg, citrate 400 mcg, citrate 600 mcg, citrate 800 mcg)</i>	np	PA QPD 4 per day
<i>fentanyl citrate (100 mcg tb, 200 mcg tb, 400 mcg tb, 600 mcg tb, 800 mcg tb)</i>	NP	PA QPD 4 per day
FENTORA	NP	PA QPD 4 per day
FIORICET WITH CODEINE	NP	QPD 6 per day
<i>hydrocodone bitartrate er (er 10 mg capsule, er 15 mg capsule, er 20 mg capsule, er 30 mg capsule, er 40 mg capsule, er 50 mg capsule)</i>	NP	PA QPD 2 per day
<i>hydrocodone bitartrate er (er 20 mg tablet, er 30 mg tablet, er 40 mg tablet, er 60 mg tablet, er 80 mg tablet, er 100 mg tablet, er 120 mg tablet)</i>	np	PA QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>hydrocodone-acetamin 10-325/15 (stroviv)</i>	NP	QPD 90 per day
<i>hydrocodone-acetaminophen (2.5-108/5, 5-217/10)</i>	np	QPD 90 per day
<i>hydrocodone-acetaminophen (hydrocodone-acetamin 10-325/15, hydrocodone-acetamin 7.5-325/15)</i>	np	QPD 90.0 per day
<i>hydrocodone-acetamin 2.5-325</i>	np	QPD 8.0 per day
<i>hydrocodone-acetamin 5-300 mg</i>	p	QPD 8 per day
<i>hydrocodone-acetamin 5-325 mg</i>	p	QPD 8.0 per day
<i>hydrocodone-acetaminophen (7.5-300, 10-300 mg)</i>	np	QPD 6 per day
<i>hydrocodone-acetaminophen (7.5-325, 10-325 mg)</i>	p	QPD 6.0 per day
<i>hydrocodone-ibuprofen 5-200 mg</i>	P	QPD 5 per day
<i>hydrocodone-ibuprofen 7.5-200</i>	np	QPD 5 per day
<i>hydrocodone-ibuprofen 10-200 (ndc: 53746011701)</i>	P	QPD 5 per day
<i>hydromorphone er</i>	np	PA QPD 1 per day
<i>hydromorphone hcl (1 mg/ml solution, 5 mg/5 ml soln)</i>	np	QPD 48 per day
<i>hydromorphone 8 mg tablet</i>	np	QPD 6 per day
<i>hydromorphone hcl (2 mg tablet, 4 mg tablet)</i>	p	QPD 6 per day
HYSINGLA ER	NP	PA QPD 1 per day
<i>levorphanol 3 mg tablet (ndc: 00527323737)</i>	np	QPD 4 per day
<i>levorphanol 2 mg tablet</i>	np	QPD 4 per day
<i>levorphanol 3 mg tablet</i>	np	QPD 4.0 per day
<i>methadone 10 mg/5 ml solution</i>	NP	QPD 15 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>methadone 5 mg/5 ml solution</i>	NP	QPD 30 per day
<i>methadone hcl 10 mg tablet</i>	np	QPD 3.0 per day
<i>methadone hcl 5 mg tablet</i>	p	QPD 3 per day
<i>methadone hcl (10 mg/ml oral conc, 40 mg tablet dispr)</i>	np	QPD 3 per day
METHADONE INTENSOL	np	QPD 3 per day
METHADOSE 10 MG/ML ORAL CONC	NP	QPD 3 per day
METHADOSE 40 MG TABLET DISPR	np	QPD 3 per day
<i>morphine sulf 20 mg/5 ml soln (west-ward/hikma)</i>	P	QPD 45 per day
<i>morphine sulf 10 mg/5 ml cup</i>	NP	QPD 90 per day
<i>morphine sulf 10 mg/5 ml soln</i>	NP	QPD 90.0 per day
<i>morphine sulf 100 mg/5 ml conc</i>	np	QPD 9.0 per day
<i>morphine sulf 20 mg/5 ml soln</i>	np	QPD 45.0 per day
<i>morphine sulfate ir 15 mg tab</i>	p	QPD 12.0 per day
<i>morphine sulfate ir 30 mg tab</i>	np	QPD 6.0 per day
<i>morphine sulfate er (er 10 mg cap, er 20 mg cap, er 50 mg cap, er 80 mg cap, er 100 mg cap)</i>	NP	PA QPD 2 per day
<i>morphine sulfate er (er 30 mg cap, er 45 mg cap, er 60 mg cap, er 75 mg cap, er 90 mg cap, er 120 mg cap)</i>	NP	PA QPD 1 per day
<i>morphine sulf er 15 mg tablet</i>	p	PA QPD 3 per day
<i>morphine sulfate er (er 30 mg tablet, er 60 mg tablet, er 100 mg tablet, er 200 mg tablet)</i>	np	PA QPD 3 per day
<i>morphine sulfate ir 15 mg tab (west-ward/hikma)</i>	NP	QPD 12 per day
<i>morphine sulfate ir 30 mg tab (west-ward/hikma)</i>	NP	QPD 6 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MS CONTIN	NP	PA QPD 3 per day
NALOCET	NP	QPD 12 per day
NUCYNTA	NP	QPD 6 per day
NUCYNTA ER	P	PA QPD 2 per day
OXAYDO	NP	QPD 6 per day
<i>oxycodone hcl (ir) 5 mg cap</i>	np	QPD 12 per day
<i>oxycodone hcl 100 mg/5 ml conc</i>	np	QPD 9.0 per day
<i>oxycodone hcl 5 mg/5 ml cup</i>	np	QPD 180 per day
<i>oxycodone hcl 5 mg/5 ml soln</i>	np	QPD 180.0 per day
<i>oxycodone hcl (15 mg tab, 20 mg tab, 30 mg tab)</i>	np	QPD 6.0 per day
<i>oxycodone hcl (ir) 10 mg tab</i>	p	QPD 6.0 per day
<i>oxycodone hcl (ir) 5 mg tablet</i>	p	QPD 12.0 per day
<i>oxycodone hcl (15 mg tablet, 30 mg tablet)</i>	NP	QPD 6.0 per day
<i>oxycodone hcl 5 mg tablet</i>	NP	QPD 12.0 per day
<i>oxycodone hcl er (er 10 mg tablet, er 20 mg tablet)</i>	NP	PA QPD 2 per day
<i>oxycodone hcl er 40 mg tablet</i>	NP	PA QPD 2 per day
<i>oxycodone hcl er 80 mg tablet</i>	NP	PA QPD 4 per day
<i>oxycodone-acetaminoph 10-300/5</i>	NP	QPD 30 per day
<i>oxycodone-acetaminophn 5-325/5</i>	NP	QPD 60 per day



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>oxycodon-acetaminophen 7.5-300</i>	NP	QPD 8 per day
<i>oxycodone-acetaminophen (oxycodone-acetaminophen 5-300, oxycodone-acetaminophn 2.5-300)</i>	NP	QPD 12 per day
<i>oxycodone-acetaminophen 10-300</i>	NP	QPD 6 per day
<i>oxycodone-acetaminophen 10-325</i>	np	QPD 6.0 per day
<i>oxycodone-acetaminophen 5-325</i>	p	QPD 12.0 per day
<i>oxycodone-acetaminophn 2.5-325</i>	np	QPD 12 per day
<i>oxycodone-acetaminophn 7.5-325</i>	np	QPD 8.0 per day
OXYCONTIN (ER 10 MG TABLET, ER 15 MG TABLET, ER 20 MG TABLET, ER 30 MG TABLET, ER 40 MG TABLET)	NP	PA QPD 2 per day
OXYCONTIN (ER 60 MG TABLET, ER 80 MG TABLET)	NP	PA QPD 4 per day
<i>oxymorphone hcl</i>	np	QPD 6 per day
<i>oxymorphone hcl er</i>	NP	PA QPD 2 per day
PERCOCET (2.5-325 MG TABLET, 5-325 MG TABLET)	NP	QPD 12 per day
PERCOCET 10-325 MG TABLET	NP	QPD 6 per day
PERCOCET 7.5-325 MG TABLET	NP	QPD 8 per day
PROLATE 10 MG-300 MG/5 ML SOLN	NP	QPD 30 per day
PROLATE 10-300 MG TABLET	NP	QPD 6 per day
PROLATE 5-300 MG TABLET	NP	QPD 12 per day
PROLATE 7.5-300 MG TABLET	NP	QPD 8 per day
QDOLO	NP	QPD 80 per day
ROXICODONE	NP	QPD 6 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ROXYBOND (15 MG TABLET, 30 MG TABLET)	NP	QPD 6 per day
ROXYBOND 5 MG TABLET	NP	QPD 12 per day
SEGLENTIS	NP	QPD 4 per day
<i>tramadol hcl (5 mg/ml solution, 25 mg/5 ml cup)</i>	NP	QPD 80 per day
<i>tramadol hcl 100 mg tablet</i>	np	QPD 4.0 per day
<i>tramadol hcl 25 mg tablet</i>	NP	QPD 8.0 per day
<i>tramadol hcl 50 mg tablet</i>	p	QPD 8.0 per day
<i>tramadol hcl 75 mg tablet</i>	NP	QPD 5.0 per day
<i>tramadol hcl er (er 100 mg tablet, er 200 mg tablet, er 300 mg tablet)</i>	np	PA QPD 1 per day
<i>tramadol hcl er (er 100 mg tablet, er 200 mg tablet, er 300 mg tablet, hcl er 100 mg capsule, hcl er 200 mg capsule, hcl er 300 mg capsule)</i>	NP	PA QPD 1 per day
<i>tramadol hcl-acetaminophen</i>	p	QPD 8 per day
TREZIX	NP	QPD 10 per day
XTAMPZA ER (ER 9 MG CAPSULE, ER 13.5 MG CAPSULE, ER 18 MG CAPSULE, ER 27 MG CAPSULE)	P	PA QPD 2 per day
XTAMPZA ER 36 MG CAPSULE	P	PA QPD 8 per day
<b>OPIOID PARTIAL AGONISTS</b>		
BELBUCA	NP	PA QPD 2 per day
<i>buprenorphine</i>	np	PA QPD 0.143 per day
<i>buprenorphine hcl (2 mg tablet, 8 mg tablet)</i>	np	QL MAX 6 / 90 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>buprenorphine-nalox 2-0.5mg fm</i>	np	QPD 4 per day
<i>buprenorphine-nalox 4-1mg film</i>	np	QPD 2 per day
<i>buprenorphine-naloxone (8-2mg film, 12-3mg film)</i>	np	QPD 2.0 per day
<i>buprenorphine-nalox 2-0.5mg tb</i>	np	QPD 4.0 per day
<i>buprenorphine-nalox 8-2 mg tab</i>	np	QPD 3.0 per day
<i>butorphanol 10 mg/ml spray</i>	np	QPD 0.25 per day
BUTRANS	NP	PA QPD 0.143 per day
SUBOXONE (4 MG-1 MG FILM, 8 MG-2 MG FILM, 12 MG-3 MG FILM)	NP	QPD 2 per day
SUBOXONE 2 MG-0.5 MG SL FILM	NP	QPD 4 per day
ZUBSOLV (0.7-0.18 MG TABLET, 2.9-0.71 MG TABLET, 5.7-1.4 MG TABLET)	NP	QPD 1 per day
ZUBSOLV 1.4-0.36 MG TABLET SL	NP	QPD 3 per day
ZUBSOLV 11.4-2.9 MG TABLET SL	NP	QPD 1.0 per day
ZUBSOLV 8.6-2.1 MG TABLET SL	NP	QPD 2 per day
<b>ANOREXIGENIC AGENTS</b>		
<b>AMPHETAMINE DERIVATIVES</b>		
ADIPEX-P (37.5 MG CAPSULE, 37.5 MG TABLET)	NP	HSA PA QPD 1 per day
LOMAIRA	NP	HSA PA QPD 3 per day
<i>phentermine 37.5 mg capsule</i>	p	HSA PA QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>phentermine hcl (15 mg capsule, 30 mg capsule, 37.5 mg tablet)</i>	p	HSA PA QPD 1.0 per day
ANOREXIGENICS;RESPIRATORY,CNS STIMULANTS		
AMPHETAMINES		
ADDERALL (5 MG TABLET, 7.5 MG TABLET, 10 MG TABLET, 12.5 MG TABLET, 15 MG TABLET, 30 MG TABLET)	NP	QPD 2 per day
ADDERALL 20 MG TABLET	NP	QPD 3 per day
ADDERALL XR	NP	QPD 1 per day
ADZENYS XR-ODT (3.1 MG TABLET, 6.3 MG TABLET)	NP	QPD 2 per day
ADZENYS XR-ODT (9.4 MG TABLET, 12.5 MG TABLET, 15.7 MG TABLET, 18.8 MG TABLET)	NP	QPD 1 per day
<i>amphetamine sulfate 10 mg tab</i>	np	QPD 6 per day
<i>amphetamine sulfate 5 mg tab</i>	np	QPD 3 per day
DESOXYN	NP	QPD 5 per day
DEXEDRINE	NP	QPD 4 per day
<i>dextroamphetamine 5 mg/5 ml</i>	np	QPD 60 per day
<i>dextroamphetamine 10 mg tab</i>	np	QPD 6 per day
<i>dextroamphetamine 30 mg tab</i>	np	QPD 2.0 per day
<i>dextroamphetamine 5 mg tab</i>	np	QPD 3 per day
<i>dextroamphetamine sulfate (2.5 mg tab, 7.5 mg tab, 15 mg tab, 20 mg tab)</i>	np	QPD 3.0 per day
<i>dextroamphetamine er 5 mg cap</i>	np	QPD 3 per day
<i>dextroamphetamine sulfate er (er 10 mg cap, er 15 mg cap)</i>	np	QPD 4 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>dextroamphetamine-amphet er (dextroamp-amphet er 5 mg cap, dextroamp-amphet er 10 mg cap, dextroamp-amphet er 15 mg cap, dextroamp-amphet er 20 mg cap, dextroamp-amphet er 25 mg cap, dextroamp-amphet er 30 mg cap, dextroamph-amphet er 12.5mg cp, dextroamph-amphet er 25 mg cap, dextroamph-amphet er 37.5mg cp, dextroamph-amphet er 50 mg cap)</i>	np	QPD 1.0 per day
<i>dextroamp-amphetamin 20 mg tab</i>	np	QPD 3.0 per day
<i>dextroamp-amphetamine 5 mg tab</i>	p	QPD 2.0 per day
<i>dextroamphetamine-amphetamine (dextroamp-amphetam 7.5 mg tab, dextroamp-amphetam 12.5 mg tab, dextroamp-amphetamin 10 mg tab, dextroamp-amphetamin 15 mg tab, dextroamp-amphetamin 30 mg tab)</i>	np	QPD 2.0 per day
DYANAVAL XR 2.5 MG/ML SUSP	NP	QPD 8 per day
DYANAVAL XR (5 MG TABLET, 10 MG TABLET, 15 MG TABLET, 20 MG TABLET)	NP	QPD 1 per day
EVEKEO 10 MG TABLET	NP	QPD 6 per day
EVEKEO 5 MG TABLET	NP	QPD 3 per day
EVEKEO ODT	NP	QPD 2 per day
<i>lisdexamfetamine dimesylate (10 mg capsule, 10 mg tb chew, 20 mg capsule, 20 mg tb chew, 30 mg capsule, 30 mg tb chew, 40 mg capsule, 40 mg tb chew, 50 mg capsule, 50 mg tb chew, 60 mg capsule, 60 mg tb chew, 70 mg capsule)</i>	np	QPD 1.0 per day
<i>methamphetamine hcl</i>	np	QPD 5 per day
MYDAYIS	NP	QPD 1 per day
PROCENTRA	np	QPD 60 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VYVANSE (10 MG CAPSULE, 10 MG CHEWABLE TABLET, 20 MG CAPSULE, 20 MG CHEWABLE TABLET, 30 MG CAPSULE, 30 MG CHEWABLE TABLET, 40 MG CAPSULE, 40 MG CHEWABLE TABLET, 50 MG CAPSULE, 50 MG CHEWABLE TABLET, 60 MG CAPSULE, 60 MG CHEWABLE TABLET, 70 MG CAPSULE)	NP	QPD 1 per day
XELSTRYM	NP	QPD 1 per day
ZENZEDI (2.5 MG TABLET, 5 MG TABLET, 7.5 MG TABLET, 15 MG TABLET, 20 MG TABLET)	np	QPD 3 per day
ZENZEDI 10 MG TABLET	np	QPD 6 per day
ZENZEDI 30 MG TABLET	np	QPD 2 per day
<b>ANOREXIGENIC AGENTS</b>		
CONTRACE	NP	HSA PA QPD 4 per day
QSYMIA	NP	HSA PA QPD 1 per day
<b>RESPIRATORY AND CNS STIMULANTS</b>		
APTENSIO XR	NP	QPD 1 per day
<i>atomoxetine hcl (10 mg capsule, 18 mg capsule, 25 mg capsule, 40 mg capsule)</i>	np	QPD 2 per day
<i>atomoxetine hcl (60 mg capsule, 80 mg capsule, 100 mg capsule)</i>	np	QPD 1 per day
AZSTARYS	P	QPD 1 per day
<i>caffeine cit 60 mg/3 ml oral</i>	np	
CONCERTA (ER 18 MG TABLET, ER 27 MG TABLET, ER 54 MG TABLET)	NP	QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CONCERTA ER 36 MG TABLET	NP	QPD 2 per day
COTEMPLA XR-ODT (17.3 MG TABLET, 25.9 MG TABLET)	NP	QPD 2 per day
COTEMPLA XR-ODT 8.6 MG TABLET	NP	QPD 1 per day
DAYTRANA	NP	QPD 1 per day
<i>dexmethylphenidate 10 mg tab</i>	np	QPD 2.0 per day
<i>dexmethylphenidate 2.5 mg tab</i>	p	QPD 2 per day
<i>dexmethylphenidate 5 mg tab</i>	p	QPD 2.0 per day
<i>dexmethylphenidate hcl er</i>	np	QPD 1 per day
FOCALIN (2.5 MG TABLET, 10 MG TABLET)	NP	QPD 2.0 per day
FOCALIN 5 MG TABLET	NP	QPD 2 per day
FOCALIN XR (30 MG CAPSULE, 35 MG CAPSULE)	NP	QPD 1 per day
FOCALIN XR (5 MG CAPSULE, 10 MG CAPSULE, 15 MG CAPSULE, 20 MG CAPSULE, 25 MG CAPSULE, 40 MG CAPSULE)	NP	QPD 1.0 per day
JORNAY PM	NP	QPD 1 per day
METADATE CD	NP	QPD 1.0 per day
METHYLIN 10 MG/5 ML SOLUTION	NP	QPD 30 per day
METHYLIN 5 MG/5 ML SOLUTION	NP	QPD 15 per day
<i>methylphenidate</i>	np	QPD 1.0 per day
<i>methylphenidate er (er 10 mg cap, er 15 mg cap, er 18 mg tab, er 20 mg cap, er 27 mg tab, er 30 mg cap, er 40 mg cap, er 50 mg cap, er 54 mg tab, er 60 mg cap)</i>	np	QPD 1 per day
<i>methylphenidate er (er 45 mg tab, er 63 mg tab)</i>	NP	QPD 1 per day
<i>methylphenidate er 36 mg tab</i>	np	QPD 2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>methylphenidate er 72 mg tab</i>	np	QPD 1.0 per day
<i>methylphenidate er (er 10 mg tab, er 20 mg tab)</i>	np	QPD 3 per day
<i>methylphenidate er (la)</i>	np	QPD 1.0 per day
<i>methylphenidate er 18 mg tab (kremers/lannett)</i>	NP	QPD 1.0 per day
<i>methylphenidate er 27 mg tab (mallinckrodt and kremers/lannett)</i>	np	QPD 1.0 per day
<i>methylphenidate er 36 mg tab (mallinckrodt and kremers/lannett)</i>	np	QPD 2.0 per day
<i>methylphenidate er 54 mg tab (mallinckrodt and kremers/lannett)</i>	np	QPD 1.0 per day
<i>methylphenidate 10 mg/5 ml sol</i>	np	QPD 30 per day
<i>methylphenidate 5 mg/5 ml soln</i>	np	QPD 15 per day
<i>methylphenidate 10 mg chew tab</i>	np	QPD 6 per day
<i>methylphenidate hcl (2.5 mg chew tb, 5 mg chew tab)</i>	np	QPD 3 per day
<i>methylphenidate 20 mg tablet</i>	np	QPD 3.0 per day
<i>methylphenidate hcl (5 mg tablet, 10 mg tablet)</i>	p	QPD 3.0 per day
<i>methylphenidate hcl cd</i>	np	QPD 1 per day
<i>methylphenidate hcl er (cd)</i>	np	QPD 1 per day
QELBREE ER 100 MG CAPSULE	NP	QPD 1.0 per day
QELBREE ER 150 MG CAPSULE	NP	QPD 2 per day
QELBREE ER 200 MG CAPSULE	NP	QPD 3.0 per day
QUILLICHEW ER (ER 20 MG CHEW TAB, ER 40 MG CHEW TAB)	NP	QPD 1 per day
QUILLICHEW ER 30 MG CHEW TAB	NP	QPD 2 per day



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
QUILLIVANT XR	NP	QPD 12 per day
RELEXXII (ER 18 MG TABLET, ER 27 MG TABLET, ER 54 MG TABLET)	NP	QPD 1.0 per day
RELEXXII (ER 45 MG TABLET, ER 63 MG TABLET, ER 72 MG TABLET)	NP	QPD 1 per day
RELEXXII ER 36 MG TABLET	NP	QPD 2.0 per day
RITALIN (10 MG TABLET, 20 MG TABLET)	NP	QPD 3.0 per day
RITALIN 5 MG TABLET	NP	QPD 3 per day
RITALIN LA	NP	QPD 1 per day
STRATTERA (10 MG CAPSULE, 18 MG CAPSULE, 25 MG CAPSULE, 40 MG CAPSULE)	NP	QPD 2 per day
STRATTERA (60 MG CAPSULE, 80 MG CAPSULE, 100 MG CAPSULE)	NP	QPD 1 per day
<b>WAKEFULNESS-PROMOTING AGENTS</b>		
<i>armodafinil (150 mg tablet, 200 mg tablet, 250 mg tablet)</i>	np	
<i>armodafinil 50 mg tablet</i>	p	
LUMRYZ	NP	S PA QPD 1.0 per day
LUMRYZ STARTER PACK	NP	QL max 28 / 180 days S PA
<i>modafinil</i>	np	
NUVIGIL	NP	
PROVIGIL	NP	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>sodium oxybate</i>	NP	S PA QPD 18.0 per day
SUNOSI	P	PA QPD 1 per day
WAKIX	NP	S PA QPD 2 per day
XYREM	NP	S PA QPD 18 per day
XYWAV	NP	S PA QPD 18 per day
ANTI-INFECTIVE AGENTS		
ANTHELMINTICS		
<i>albendazole</i>	np	
BILTRICIDE	NP	
EMVERM	NP	
<i>ivermectin 3 mg tablet</i>	np	
<i>praziquantel</i>	np	
STROMEKTOL	NP	
URINARY ANTI-INFECTIVES		
<i>fosfomycin tromethamine</i>	np	
HIPREX	NP	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MACROBID	NP	
MACRODANTIN	NP	
<i>methenamine hippurate</i>	np	
<i>nitrofurantoin (25 mg cap, 50 mg cap)</i>	np	
<i>nitrofurantoin mcr 100 mg cap</i>	p	
<i>nitrofurantoin 25 mg/5 ml susp</i>	np	PA
<i>nitrofurantoin 50 mg/5 ml susp</i>	NP	PA
<i>nitrofurantoin mono-macro</i>	p	
PRIMSOL	NP	
<i>trimethoprim</i>	np	
<i>trimethoprim 100 mg tablet (mayne)</i>	NP	
ANTI-INFECTIVES (EENT)		
ANTI-INFECTIVES, MISCELLANEOUS (52:04)		
<i>acetic acid 2% ear solution</i>	np	
<i>hydrocortisone-acetic acid</i>	np	
XDEMVY	NP	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div style="margin-right: 5px;">max 10 / 50 days</div> </div> <div style="background-color: #556b2f; color: white; padding: 2px 5px; margin-top: 2px;">ST</div>
ANTIBACTERIALS (52:04)		
AK-POLY-BAC	p	
AZASITE	NP	
<i>bacitracin 500 unit/gm ophth</i>	P	
<i>bacitracin-polymyxin</i>	p	
BESIVANCE	NP	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CETRAXAL	NP	
CILOXAN	P	
CIPRODEX	NP	
<i>ciprofloxacin 0.2% otic soln</i>	np	
<i>ciprofloxacin 0.3% eye drop</i>	p	
<i>ciprofloxacin hcl-fluocinolone</i>	NP	
<i>ciprofloxacin-dexamethasone</i>	np	
CORTISPORIN-TC	NP	
<i>doxycycline hyclate 20 mg tab</i>	p	
ERY	P	ST
ERYGEL	NP	ST
<i>erythromycin 0.5% eye ointment</i>	p	HSA ACA
<i>erythromycin (gel, solution)</i>	np	
<i>gatifloxacin</i>	np	
<i>gentamicin 0.3% eye drop</i>	p	
<i>levofloxacin 1.5% eye drops</i>	NP	
MAXITROL (DROPS, OINTMENT)	NP	
<i>moxifloxacin 0.5% eye drops</i>	np	
<i>moxifloxacin 0.5% eye drp-visc</i>	NP	
<i>moxifloxacin hcl</i>	np	
NEO-POLYCIN	np	
NEO-POLYCIN HC	np	
<i>neomycin-bacitracin-poly-hc</i>	np	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>neomycin-bacitracin-polymyxin</i>	np	
<i>neomycin-polymyxin-dexameth (neomyc-polym-dexamet ointm, neomyc-polym-dexameth drop)</i>	p	
<i>neomycin-polymyxin-gramicidin</i>	P	
<i>neomycin-poly-hc eye drops</i>	NP	
<i>neomycin-polymyxin-hc ear susp</i>	np	
<i>neomycin-polymyxin-hydrocort</i>	np	
OCUFLOX	NP	
<i>ofloxacin 0.3% ear drops</i>	np	
<i>ofloxacin 0.3% eye drops</i>	p	
OTOVEL	NP	
POLYCIN	p	
<i>polymyxin b sul-trimethoprim</i>	p	
<i>sulfacetamide 10% eye drops</i>	np	
<i>sulfacetamide 10% eye ointment</i>	NP	
<i>sulfacetamide-prednisolone</i>	P	
TOBRADEX (DROPS, OINTMENT)	NP	
TOBRADEX ST	NP	
<i>tobramycin 0.3% eye drop</i>	p	
<i>tobramycin-dexamethasone</i>	np	
TOBREX	NP	
VIGAMOX	NP	
ZYLET	P	
ZYMAXID	NP	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>ANTIFUNGALS (EENT)</b>		
NATACYN	P	
<b>ANTIVIRALS (EENT)</b>		
<i>trifluridine</i>	P	
ZIRGAN	NP	
<b>ASTRINGENTS (52:04)</b>		
<i>chlorhexidine gluconate (15 ml cup, rinse)</i>	p	
PERIDEX	NP	
PERIOGARD	p	
<b>ANTI-INFECTIVES (SKIN, MUCOUS MEMBRANE)</b>		
<b>ANTIBACTERIALS (84:04)</b>		
ACANYA	NP	ST
ACZONE (5% GEL, 7.5% GEL PUMP)	NP	ST
ALTABAX	NP	
AMZEEQ	NP	ST
<i>azelaic acid</i>	np	
AZELEX	NP	ST
BENZAMYCIN	NP	ST
CENTANY	NP	
<i>clindamycin phos-benzoyl perox (pero 1.2-2.5%, perox 1.2-5%)</i>	np	
<i>clindamyc-bnz perox 1.2-3.75%</i>	np	
<i>clindamycin-benzoyl peroxide (clindamycin-benzoyl 1-5%, clindamycin-bnz 1-5% pmp)</i>	np	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>dapsone (5% gel, 7.5% gel pump)</i>	np	
<i>doxycycline ir-dr</i>	NP	PA
<i>erythromycin-benzoyl peroxide</i>	np	
FINACEA (FOAM, GEL)	NP	ST
<i>gentamicin sulfate (cream, ointment)</i>	np	
<i>mafenide acetate</i>	NP	
METROCREAM	NP	ST
METROGEL	NP	ST
METROLOTION	NP	ST
<i>metronidazole (0.75% cream, 0.75% lotion, top 1% gel pump, topical 0.75% gl, topical 1% gel)</i>	np	
<i>mupirocin 2% cream</i>	np	
<i>mupirocin 2% ointment</i>	p	
NEO-SYNALAR 0.5%-0.025% CREAM	NP	
NEUAC GEL	np	
NORITATE	NP	ST
ONEXTON GEL PUMP	NP	ST
ORACEA	P	PA
ROSDAN (CREAM, GEL)	np	
SULFAMYLON 8.5% CREAM	NP	
<i>tetracycline hcl (250 mg capsule, 500 mg capsule)</i>	np	
<i>tetracycline hcl (250 mg tablet, 500 mg tablet)</i>	NP	PA
XEPI	NP	
ZILXI	NP	ST

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>ANTIVIRALS (SKIN AND MUCOUS MEMBRANE)</b>		
<i>acyclovir 5% cream</i>	np	
<i>acyclovir 5% ointment</i>	np	
DENAVIR	NP	
<i>penciclovir</i>	np	
ZOVIRAX 5% CREAM	NP	
ZOVIRAX 5% OINTMENT	NP	
<b>ASTRINGENTS, ANTI-INFECTIVE</b>		
<i>selenium sulfide 2.5% lotion</i>	p	
SILVADENE	NP	
<i>silver sulfadiazine</i>	p	
SSD	p	
<b>LOCAL ANTI-INFECTIVES, MISCELLANEOUS</b>		
KLARON	NP	ST
<i>sulfacetamide sodium (sod top susp, sodium lotn)</i>	np	
<b>SCABICIDES AND PEDICULICIDES</b>		
CROTAN	NP	
ELIMITE	NP	
<i>lindane</i>	NP	
<i>malathion</i>	np	
NATROBA	NP	
OVIDE	NP	
<i>permethrin</i>	np	



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>spinosad</i>	NP	
ANTI-INFLAMMATORY AGENTS (EENT)		
CORTICOSTEROIDS (EENT)		
ALREX	NP	
BECONASE AQ	NP	QPD 1.667 per day
DERMOTIC	NP	
<i>difluprednate</i>	np	
DUREZOL	NP	
EYSUVIS	NP	<div style="background-color: #6a3d9a; color: white; padding: 2px;">QL</div> <div style="background-color: #8b572a; color: white; padding: 2px;">PA</div> MAX 16.6 / 90 DAYS
FLAC OTIC OIL	np	
FLAREX	NP	
<i>flunisolide</i>	np	QPD 2.5 per day
<i>fluocinolone acetonide oil</i>	np	
<i>fluorometholone</i>	np	
<i>fluticasone prop 50 mcg spray</i>	p	QPD 0.534 per day
FML	NP	
FML FORTE	NP	
INVELTYS	NP	
LOTEMAX (EYE DROPS, OPHTHALMIC GEL)	NP	
LOTEMAX 0.5% EYE OINTMENT	P	
LOTEMAX SM	P	
<i>loteprednol etabonate (etabonate 0.2% drp, 0.5% ophthalmc gel, etabonate 0.5% drp)</i>	np	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>mometasone furoate 50 mcg spray</i>	np	QPD 1.134 per day
PRED FORTE	NP	
PRED MILD	NP	
<i>prednisolone ac 1% eye drop</i>	np	
<i>prednisolone sod 1% eye drop</i>	NP	
QNASL	NP	QPD 0.354 per day
QNASL CHILDREN	NP	QPD 0.227 per day
XHANCE	NP	PA QPD 1.067 per day
<b>EENT NONSTEROIDAL ANTI-INFLAM. AGENTS</b>		
ACULAR	NP	
ACULAR LS	NP	
ACUVAIL	NP	
<i>bromfenac sodium</i>	np	
BROMSITE	NP	
<i>diclofenac 0.1% eye drops</i>	p	
ILEVRO	NP	
<i>ketorolac 0.4% ophth solution</i>	np	
<i>ketorolac 0.5% ophth solution</i>	p	
NEVANAC	NP	
PROLENSA	NP	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>ANTI-INFLAMMATORY AGENTS (RESPIRATORY)</b>		
<b>INTERLEUKIN ANTAGONISTS</b>		
ARCALYST	NP	S PA QPD 0.286 per day
FASENRA PEN	P	QL MAX 1 / 56 DAYS S PA
NUCALA (100 MG/ML AUTO-INJECTOR, 100 MG/ML SYRINGE)	P	S PA QPD 0.108 per day
NUCALA 40 MG/0.4 ML SYRINGE	P	S PA QPD 0.015 per day
TEZSPIRE 210 MG/1.91 ML PEN	P	S PA QPD 0.069 per day
<b>LEUKOTRIENE MODIFIERS</b>		
ACCOLATE	NP	HSA
<i>montelukast sod 4 mg granules</i>	np	HSA
<i>montelukast sodium (4 mg tab chew, 5 mg tab chew, 10 mg tablet)</i>	p	HSA
SINGULAIR (4 MG GRANULES, 4 MG TABLET CHEW, 5 MG TABLET CHEW, 10 MG TABLET)	NP	HSA
<i>zafirlukast</i>	np	HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>zileuton er</i>	np	
ZYFLO	NP	
MAST-CELL STABILIZERS		
<i>cromolyn 20 mg/2 ml neb soln</i>	np	HSA
<i>cromolyn 100 mg/5 ml oral conc</i>	np	
GASTROCROM	NP	
ANTI-INFLAMMATORY AGENTS (SKIN, MUCOUS)		
ADRENERGIC AGONISTS		
<i>brimonidine 0.33% gel pump</i>	np	
MIRVASO	NP	
RHOFADE	NP	
ANTI-INFLAMMATORY AGENTS, MISC (SKIN)		
WINLEVI	NP	
CORTICOSTEROIDS (SKIN, MUCOUS MEMBRANE)		
ALA-CORT	p	
ALA-SCALP	NP	
<i>alclometasone dipropionate (dipr oint, dipro crm)</i>	np	
<i>amcinonide (cream, ointment)</i>	NP	
ANALPRAM HC (1% CREAM, 2.5%-1% LOTION)	NP	
ANUCORT-HC	np	
ANUSOL-HC 2.5% CREAM	NP	
ANUSOL-HC 25 MG SUPPOSITORY	np	
APEXICON E	NP	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BESER	np	
<i>betamethasone dp aug 0.05% crm</i>	p	
<i>betamethasone dp aug 0.05% gel</i>	P	
<i>betamethasone diprop augmented (lot, oin)</i>	np	
<i>betamethasone dipropionate (crm, lot, oint)</i>	np	
<i>betamethasone valerate (va 0.1% cream, va 0.1% lotion, valer 0.1% ointm, valer 0.12% foam)</i>	np	
BRYHALI	NP	
CAPEX SHAMPOO	NP	
<i>clobetasol emollient (emollient crm, emollnt foam)</i>	np	
<i>clobetasol emulsion</i>	np	
<i>clobetasol 0.025% cream</i>	NP	
<i>clobetasol propionate (cream, gel, ointment, prop foam, prop spray, shampoo, solution, topical lotn)</i>	np	
CLOBEX (SHAMPOO, SPRAY, TOPICAL LOTION)	NP	
<i>clocortolone pivalate</i>	np	
CLODAN 0.05% SHAMPOO	np	
CLODERM	NP	
CORDRAN 0.05% LOTION	NP	
CORDRAN (0.025% CREAM, 0.05% CREAM, 0.05% OINTMENT, 4 MCG/SQ CM TAPE LARGE)	NP	
CORTENEMA	NP	
CORTIFOAM	P	
DERMA-SMOOTH-FS (BODY OIL, SCALP OIL)	NP	
<i>desonide 0.05% gel</i>	NP	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>desonide (cream, lotion, ointment)</i>	np	
DESOWEN	NP	
<i>desoximetasone (0.05% cream, 0.05% gel, 0.05% ointment, 0.25% cream, 0.25% ointment, 0.25% spray)</i>	np	
DESRX	np	
<i>diflorasone 0.05% cream</i>	NP	
<i>diflorasone 0.05% ointment</i>	np	
DIPROLENE	NP	
<i>fluocinolone acetonide (0.01% body oil, 0.01% cream, 0.01% scalp oil, 0.01% solution, 0.025% cream, 0.025% ointment)</i>	np	
<i>fluocinonide (0.05% cream, 0.05% gel, 0.05% ointment, 0.05% solution, 0.1% cream)</i>	np	
<i>fluocinonide-e</i>	np	
<i>flurandrenolide (cream, ointment)</i>	np	
<i>flurandrenolide 0.05% lotion</i>	np	
<i>fluticasone prop 0.05% cream</i>	p	
<i>fluticasone prop 0.05% lotion</i>	NP	
<i>fluticasone prop 0.005% oint</i>	np	
<i>halcinonide (cream, solution)</i>	np	
<i>halobetasol propionate (cream, ointmnt)</i>	np	
<i>halobetasol prop 0.05% foam</i>	np	
HALOG (CREAM, OINTMENT, SOLUTION)	NP	
HEMMOREX-HC 25 MG SUPPOSITORY	np	
<i>hydrocortisone 100 mg/60 ml</i>	np	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>hydrocortisone 2% lotion</i>	NP	
<i>hydrocortisone 2.5% lotion</i>	NP	
<i>hydrocortisone (cream, ointment)</i>	p	
<i>hydrocortisone (cream, ointment)</i>	p	
<i>hydrocortisone 2.5% cream (ndc: 62559043130)</i>	np	
<i>hydrocortisone ac 25 mg supp</i>	np	
<i>hydrocortisone butyr 0.1% lotn</i>	np	
<i>hydrocortisone butyrate (hydrocort buty lipo cream, hydrocortisone butyr oint)</i>	np	
<i>hydrocortisone butyrate (hydrocort buty lipid crm, hydrocortisone buty cream, hydrocortisone butyr soln)</i>	NP	
<i>hydrocortisone valerate (cream, ointmt)</i>	np	
<i>hydrocort-pramoxine 1%-1% crm</i>	NP	
IMPEKLO	NP	
IMPOYZ	NP	
KENALOG	NP	
KOURZEQ	np	
LEXETTE	NP	
LOCOID	NP	
LOCOID LIPOCREAM	NP	
LUXIQ	NP	
<i>mometasone furoate (cream, soln)</i>	np	
<i>mometasone furoate 0.1% oint</i>	p	
<i>nystatin-triamcinolone (cream, ointm)</i>	np	
OLUX	NP	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OLUX-E	NP	
ORALONE	np	
PANDEL	NP	
<i>prednicarbate (cream, ointment)</i>	NP	
PROCTO-MED HC	np	
PROCTOCORT 1% CREAM	np	
PROCTOFOAM-HC	NP	
PROCTOSOL-HC	np	
PROCTOZONE-HC	np	
SERNIVO	NP	
SYNALAR (0.01% SOLUTION, 0.025% CREAM, 0.025% OINTMENT)	NP	
TEMOVATE	NP	
TEXACORT	NP	
TOPICORT (0.05% CREAM, 0.05% GEL, 0.05% OINTMENT, 0.25% CREAM, 0.25% OINTMENT, 0.25% SPRAY)	NP	
TOVET EMOLLIENT	np	
<i>triamcinolone 0.05% ointment</i>	np	
<i>triamcinolone acetonide (0.025% cream, 0.025% oint, 0.1% cream, 0.1% ointment, 0.5% cream, 0.5% ointment)</i>	p	
<i>triamcinolone acetonide (0.025% lotion, 0.1% lotion, 0.1% paste, 0.147 mg/g spray)</i>	np	
TRIANEX	np	
TRIDERM	p	
TRIDESILON	NP	



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRITOCIN	np	
ULTRAVATE	NP	
VANOS	NP	
VERDESO	NP	
IMMUNOMODULATORY AGENTS (84:06)		
ADBRY	P	S PA QPD 0.143 per day
ADBRY AUTOINJECTOR	P	S PA QPD 0.143 per day
BIMZELX 160 MG/ML SYRINGE	NP	QL max 2 / 56 days S PA
BIMZELX 160 MG/ML AUTOINJECTOR	NP	QL max 2 / 56 days S PA
ELIDEL	NP	ST
HYFTOR	NP	QL MAX 70 / 84 DAYS S PA
<i>pimecrolimus</i>	np	ST
PROTOPIC	NP	ST
SILIQ	NP	S PA QPD 0.108 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SKYRIZI 150 MG/ML SYRINGE	P	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-bottom: 2px;">QL</div> <div style="background-color: #d62728; color: white; padding: 2px 5px; margin-bottom: 2px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px;">PA</div> </div> MAX 1 / 84 DAYS
SKYRIZI 180 MG/1.2 ML ON-BODY	P	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-bottom: 2px;">QL</div> <div style="background-color: #d62728; color: white; padding: 2px 5px; margin-bottom: 2px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px;">PA</div> </div> MAX 1.2 / 56 DAYS
SKYRIZI 360 MG/2.4 ML ON-BODY	P	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-bottom: 2px;">QL</div> <div style="background-color: #d62728; color: white; padding: 2px 5px; margin-bottom: 2px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px;">PA</div> </div> MAX 2.4 / 56 DAYS
SKYRIZI PEN	P	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-bottom: 2px;">QL</div> <div style="background-color: #d62728; color: white; padding: 2px 5px; margin-bottom: 2px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px;">PA</div> </div> MAX 1 / 84 DAYS
SPEVIGO 150 MG/ML SYRINGE	NP	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #d62728; color: white; padding: 2px 5px; margin-bottom: 2px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px; margin-bottom: 2px;">PA</div> <div style="background-color: #1f77b4; color: white; padding: 2px 5px;">QPD</div> </div> 0.072 per day
<i>tacrolimus (0.03% ointment, 0.1% ointment)</i>	np	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #556b2f; color: white; padding: 2px 5px;">ST</div> </div>
TREMFYA (100 MG/ML INJECTOR, 100 MG/ML SYRINGE)	P	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-bottom: 2px;">QL</div> <div style="background-color: #d62728; color: white; padding: 2px 5px; margin-bottom: 2px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px;">PA</div> </div> MAX 1 / 56 DAYS
TREMFYA 200 MG/2 ML SYRINGE	P	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #d62728; color: white; padding: 2px 5px; margin-bottom: 2px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px; margin-bottom: 2px;">PA</div> <div style="background-color: #1f77b4; color: white; padding: 2px 5px;">QPD</div> </div> 0.072 per day
TREMFYA PEN	P	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #d62728; color: white; padding: 2px 5px; margin-bottom: 2px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px; margin-bottom: 2px;">PA</div> <div style="background-color: #1f77b4; color: white; padding: 2px 5px;">QPD</div> </div> 0.072 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>JANUS KINASE INHIBITORS (84:06)</b>		
CIBINQO	P	S PA QPD 1 per day
LITFULO	NP	S PA QPD 1.0 per day
OPZELURA	NP	S PA QPD 2 per day
SOTYKTU	P	S PA QPD 1 per day
<b>NONSTEROIDAL ANTI-INFLAMMAT.AGENTS(SKIN)</b>		
<i>diclofenac sodium 3% gel</i>	np	PA
<b>PHOSPHODIESTERASE-4 INHIBITORS (84:06)</b>		
EUCRISA	NP	ST
ZORYVE 0.3% CREAM	NP	PA
<b>ANTIANEMIA DRUGS</b>		
<b>IRON PREPARATIONS</b>		
ACCRUFER	NP	PA QPD 2 per day
<i>ferrous sulfate (15 mg iron/ml drp, 44 mg iron/5ml lq, 220 mg/5 ml elix, 220 mg/5 ml liq)</i>	p	ACA
<i>ferrous sulf 300 mg/5 ml cup</i>	np	ACA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>infant-toddler iron</i>	p	ACA
IRONUP	NP	ACA
NEONATAL FE	NP	HSA
NOVAFERRUM 15 MG/ML DROPS	NP	ACA
PEDIA IRON	p	ACA
PEDIATRIC FE-VITE	p	ACA
<i>pediatric iron</i>	p	ACA
WEE CARE	p	ACA
<b>ANTIARRHYTHMIC AGENTS</b>		
<b>CLASS IA ANTIARRHYTHMICS</b>		
<i>disopyramide phosphate</i>	np	HSA
NORPACE	NP	HSA
NORPACE CR	NP	HSA
<i>quinidine gluconate</i>	np	HSA
<i>quinidine sulfate</i>	P	HSA
<b>CLASS IB ANTIARRHYTHMICS</b>		
<i>mexiletine hcl</i>	np	HSA
<b>CLASS IC ANTIARRHYTHMICS</b>		
<i>flecainide acetate (100 mg tab, 150 mg tab)</i>	np	HSA
<i>flecainide acetate 50 mg tab</i>	p	HSA
<i>propafenone hcl (225 mg tab, 300 mg tab)</i>	np	HSA
<i>propafenone hcl 150 mg tablet</i>	p	HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>propafenone hcl er</i>	np	HSA
RYTHMOL SR	NP	HSA
CLASS III ANTIARRHYTHMICS		
<i>amiodarone hcl (100 mg tablet, 400 mg tablet)</i>	np	HSA
<i>amiodarone hcl 200 mg tablet</i>	p	HSA
<i>dofetilide</i>	np	S HSA
MULTAQ	P	HSA
PACERONE (100 MG TABLET, 400 MG TABLET)	np	HSA
PACERONE 200 MG TABLET	p	HSA
TIKOSYN	NP	S HSA
CLASS IV ANTIARRHYTHMICS		
CALAN SR	NP	HSA
CARDIZEM	NP	HSA
CARDIZEM CD	NP	HSA
CARDIZEM LA	NP	HSA
CARTIA XT	p	HSA
DILT XR 120 MG CAPSULE	p	HSA
DILT-XR (180 MG CAPSULE, 240 MG CAPSULE)	np	HSA
<i>diltiazem 12hr er</i>	np	HSA
<i>diltiazem 24hr er (24hr er 120 mg cap, 24hr er 180 mg cap)</i>	p	HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>diltiazem 24hr er (24hr er 240 mg cap, 24hr er 300 mg cap, 24hr er 360 mg cap, 24hr er 420 mg cap)</i>	np	HSA
<i>diltiazem 24h er(cd) 360 mg cp</i>	np	HSA
<i>diltiazem 24hr er (cd) (24h 120 mg cp, 24h 180 mg cp, 24h 240 mg cp, 24h 300 mg cp)</i>	p	HSA
<i>diltiazem 24hr er (la)</i>	np	HSA
<i>diltiazem 24h er(xr) 120 mg cp</i>	p	HSA
<i>diltiazem 24hr er (xr) (24h 180 mg cp, 24h 240 mg cp)</i>	np	HSA
<i>diltiazem 90 mg tablet</i>	np	HSA
<i>diltiazem hcl (30 mg tablet, 60 mg tablet, 120 mg tablet)</i>	p	HSA
MATZIM LA	np	HSA
TAZTIA XT (120 MG CAPSULE, 180 MG CAPSULE)	p	HSA
TAZTIA XT (240 MG CAPSULE, 300 MG CAPSULE, 360 MG CAPSULE)	np	HSA
TIADYLT ER (ER 120 MG CAPSULE, ER 180 MG CAPSULE)	p	HSA
TIADYLT ER (ER 240 MG CAPSULE, ER 300 MG CAPSULE, ER 360 MG CAPSULE, ER 420 MG CAPSULE)	np	HSA
TIAZAC	NP	HSA
<i>verapamil er (er 120 mg capsule, er 180 mg capsule, er 240 mg capsule)</i>	np	HSA
<i>verapamil er (er 120 mg tablet, er 180 mg tablet, er 240 mg tablet)</i>	p	HSA
<i>verapamil er pm</i>	NP	HSA
<i>verapamil hcl (40 mg tablet, 80 mg tablet, 120 mg tablet)</i>	p	HSA
<i>verapamil sr (sr 120 mg capsule, sr 180 mg capsule, sr 240 mg capsule)</i>	np	HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>verapamil sr 360 mg capsule</i>	NP	HSA
VERELAN PM	NP	HSA
ANTIBACTERIALS (08:12)		
AMINOGLYCOSIDE ANTIBIOTICS		
ARIKAYCE	NP	S PA QPD 8.4 per day
BETHKIS	NP	QL max 56 days / fill S
KITABIS PAK	NP	QL max 56 days / fill S
<i>neomycin sulfate</i>	p	
TOBI	NP	QL max 56 days / fill S
TOBI PODHALER	NP	QL max 56 days / fill S
<i>tobramycin (300 mg/4 ml, 300 mg/5 ml)</i>	np	QL max 56 days / fill S
<i>tobramycin pak 300 mg/5 ml</i>	NP	QL max 56 days / fill S
QUINOLONE ANTIBIOTICS		
BAXDELA 450 MG TABLET	NP	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CIPRO 10% SUSPENSION	P	
CIPRO (5% SUSPENSION, 250 MG TABLET, 500 MG TABLET)	NP	
CIPRO HC	P	
<i>ciprofloxacin</i>	np	
<i>ciprofloxacin hcl (250 mg tab, 500 mg tab, 750 mg tab)</i>	p	
<i>ciprofloxacin hcl 100 mg tab</i>	P	
<i>levofloxacin 25 mg/ml solution</i>	np	
<i>levofloxacin (250 mg tablet, 500 mg tablet, 750 mg tablet)</i>	p	
<i>ofloxacin 300 mg tablet</i>	NP	
<i>ofloxacin 400 mg tablet</i>	np	
<b>SULFONAMIDE ANTIBIOTICS (SYSTEMIC)</b>		
AZULFIDINE (500 MG TABLET, ENTAB 500 MG)	NP	
BACTRIM	NP	
BACTRIM DS	NP	
<i>sulfadiazine</i>	np	
<i>sulfamethoxazole-trimethoprim (20 ml cup, ds tablet, ss tablet, susp)</i>	p	
<i>sulfasalazine</i>	p	
<i>sulfasalazine dr</i>	np	
SULFATRIM	p	
<b>TETRACYCLINE ANTIBIOTICS</b>		
ACTICLATE 150 MG TABLET	NP	PA
ACTICLATE 75 MG TABLET	NP	PA



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AVIDOXY	p	
<i>bismuth-metronidazole-tetracyc</i>	np	
COREMINO	np	PA
<i>demeclocycline hcl</i>	np	
DORYX	NP	PA
DORYX MPC	NP	PA
<i>doxycycline hyclate (50 mg cap, 100 mg cap, 100 mg tab)</i>	p	
<i>doxycycline hyclate (50 mg tablet, hyclate 150 mg tab)</i>	np	
<i>doxycycline hyclate 75 mg tab</i>	np	
<i>doxycycline hyc dr 80 mg tab</i>	NP	PA
<i>doxycycline hyclate (dr 50 mg tab, dr 200 mg tab)</i>	np	PA
<i>doxycycline hyclate (dr 75 mg tab, dr 100 mg tab, dr 150 mg tab)</i>	np	PA
<i>doxycycline mono 75 mg capsule</i>	np	
<i>doxycycline monohydrate (25 mg/5 ml susp, mono 75 mg tablet, mono 150 mg cap, mono 150 mg tablet)</i>	np	
<i>doxycycline monohydrate (50 mg cap, 50 mg tablet, 100 mg cap, 100 mg tablet)</i>	p	
LYMEPAK	p	
<i>minocycline er (er 45 mg capsule, er 90 mg capsule, er 135 mg capsule)</i>	NP	PA
<i>minocycline er (er 105 mg tablet, er 135 mg tablet)</i>	NP	PA
<i>minocycline 50 mg capsule</i>	p	
<i>minocycline hcl (hcl 50 mg tablet, 75 mg capsule, hcl 75 mg tablet, 100 mg capsule, hcl 100 mg tablet)</i>	np	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>minocycline hcl er</i>	np	PA
MINOLIRA ER	NP	PA
MONDOXYNE NL 100 MG CAPSULE	p	
MONDOXYNE NL 75 MG CAPSULE	np	
PYLERA	NP	
SOLODYN	NP	PA
TARGADOX	np	
VIBRAMYCIN	NP	PA
XIMINO	NP	PA
ANTIBACTERIALS, MISCELLANEOUS		
GLYCOPEPTIDE ANTIBIOTICS		
FIRVANQ	NP	
VANCOCIN HCL	NP	
<i>vancomycin hcl (25 mg/ml oral soln, 50 mg/ml oral soln, hcl 125 mg capsule, 250 mg/5ml oral sol, hcl 250 mg capsule)</i>	np	
LINCOMYCIN ANTIBIOTICS		
CLEOCIN (2% CREAM, 100 MG OVULE)	NP	
CLEOCIN HCL	NP	
CLEOCIN PEDIATRIC	NP	
CLEOCIN T	NP	ST
CLINDACIN	np	
CLINDACIN ETZ 1% PLEDGET	np	
CLINDACIN P	np	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CLINDAGEL	NP	ST
<i>clindamycin (pediatric)</i>	np	
<i>clindamycin hcl</i>	p	
<i>clindamycin phos-tretinoin</i>	np	
<i>clindamycin phosphate 1% foam</i>	np	
<i>clindamycin phosphate (ph 1% gel, ph 1% solution, phos 1% pledget, phosp 1% lotion, phosphate 1% gel, 2% vaginal cream)</i>	np	
CLINDESSE	NP	
EVOCLIN	NP	ST
VELTIN	NP	ST
XACIATO	NP	
ZIANA	NP	ST
<b>OXAZOLIDINONE ANTIBIOTICS</b>		
<i>linezolid 100 mg/5 ml susp</i>	np	PA
<i>linezolid 600 mg tablet</i>	np	
SIVEXTRO 200 MG TABLET	P	
ZYVOX 100 MG/5 ML SUSPENSION	NP	PA
ZYVOX 600 MG TABLET	NP	
<b>PLEUROMUTILINS</b>		
XENLETA 600 MG TABLET	NP	S
<b>RIFAMYCIN ANTIBIOTICS</b>		
AEMCOLO	NP	
XIFAXAN 200 MG TABLET	NP	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XIFAXAN 550 MG TABLET	P	
ANTICHOLINERGIC AGENTS		
ANTIMUSCARINICS/ANTISPASMODICS		
ANORO ELLIPTA	P	HSA QPD 2 per day
ATROVENT HFA	P	HSA QPD 0.86 per day
BEVESPI AEROSPHERE	NP	HSA QPD 0.357 per day
COMBIVENT RESPIMAT	P	HSA QPD 0.267 per day
CUVPOSA	NP	PA QPD 45.0 per day
DARTISLA	NP	PA QPD 4.0 per day
<i>dicyclomine hcl (10 mg capsule, 20 mg tablet)</i>	p	
<i>dicyclomine 10 mg/5 ml soln</i>	np	
DUAKLIR PRESSAIR	NP	HSA QPD 0.034 per day
GLYCATE	NP	
<i>glycopyrrolate 1 mg/5 ml soln</i>	np	PA QPD 45.0 per day
<i>glycopyrrolate 1 mg tablet</i>	p	
<i>glycopyrrolate 1.5 mg tablet</i>	NP	
<i>glycopyrrolate 2 mg tablet</i>	np	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INCRUSE ELLIPTA	P	HSA QPD 1 per day
<i>ipratropium br 0.02% soln</i>	p	HSA
<i>ipratropium-albuterol</i>	np	HSA
LONHALA MAGNAIR REFILL	NP	HSA
LONHALA MAGNAIR STARTER	NP	HSA
<i>methscopolamine bromide</i>	np	
ROBINUL	NP	
ROBINUL FORTE	NP	
<i>scopolamine</i>	np	
SPIRIVA HANDIHALER	np	HSA QPD 1 per day
SPIRIVA RESPIMAT	P	HSA QPD 0.134 per day
STIOLTO RESPIMAT INHALER (60)	P	HSA QPD 0.134 per day
TRANSDERM-SCOP	NP	
TRELEGY ELLIPTA	P	HSA QPD 2 per day
TUDORZA PRESSAIR	NP	HSA QPD 0.034 per day
YUPELRI	NP	HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>ANTICOAGULANTS</b>		
<b>COUMARIN DERIVATIVES</b>		
JANTOVEN	P	HSA
<i>warfarin sodium</i>	P	HSA
<b>DIRECT FACTOR XA INHIBITORS</b>		
ELIQUIS DVT-PE TREAT START 5MG	P	<span style="background-color: #6a3d9a; color: white; padding: 2px;">QL</span> MAX 74 / 180 DAYS <span style="background-color: #004a87; color: white; padding: 2px;">HSA</span>
ELIQUIS 2.5 MG TABLET	P	<span style="background-color: #004a87; color: white; padding: 2px;">HSA</span> <span style="background-color: #0070c0; color: white; padding: 2px;">QPD</span> 2 per day
ELIQUIS 5 MG TABLET	P	<span style="background-color: #004a87; color: white; padding: 2px;">HSA</span> <span style="background-color: #0070c0; color: white; padding: 2px;">QPD</span> 2.467 per day
SAVAYSA	NP	<span style="background-color: #004a87; color: white; padding: 2px;">HSA</span> <span style="background-color: #0070c0; color: white; padding: 2px;">QPD</span> 1 per day
XARELTO 1 MG/ML SUSPENSION	P	<span style="background-color: #004a87; color: white; padding: 2px;">HSA</span> <span style="background-color: #0070c0; color: white; padding: 2px;">QPD</span> 20.667 per day
XARELTO DVT-PE TREAT START 30D	P	<span style="background-color: #004a87; color: white; padding: 2px;">HSA</span> <span style="background-color: #0070c0; color: white; padding: 2px;">QPD</span> 1.7 per day
XARELTO (2.5 MG TABLET, 15 MG TABLET)	P	<span style="background-color: #004a87; color: white; padding: 2px;">HSA</span> <span style="background-color: #0070c0; color: white; padding: 2px;">QPD</span> 2 per day
XARELTO 10 MG TABLET	P	<span style="background-color: #004a87; color: white; padding: 2px;">HSA</span> <span style="background-color: #0070c0; color: white; padding: 2px;">QPD</span> 1 per day
XARELTO 20 MG TABLET	P	<span style="background-color: #004a87; color: white; padding: 2px;">HSA</span> <span style="background-color: #0070c0; color: white; padding: 2px;">QPD</span> 1.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>DIRECT THROMBIN INHIBITORS</b>		
<i>dabigatran etexilate (75 mg cap, 150 mg cp)</i>	np	HSA QPD 2.0 per day
<i>dabigatran etexilate 110 mg cp</i>	np	HSA QPD 4.0 per day
PRADAXA (75 MG CAPSULE, 150 MG CAPSULE)	NP	HSA QPD 2 per day
PRADAXA (20 MG PELLETT PACK, 150 MG PELLETT PACK)	NP	HSA QPD 2 per day
PRADAXA (30 MG PELLETT PACK, 40 MG PELLETT PACK, 50 MG PELLETT PACK, 110 MG CAPSULE, 110 MG PELLETT PACK)	NP	HSA QPD 4 per day
<b>HEPARINS</b>		
<i>enoxaparin 30 mg/0.3 ml syr</i>	np	QL MAX 9 / 90 DAYS S HSA
<i>enoxaparin 40 mg/0.4 ml syr</i>	np	QL MAX 12 / 90 DAYS S HSA
<i>enoxaparin 60 mg/0.6 ml syr</i>	np	QL MAX 18 / 90 DAYS S HSA
<i>enoxaparin sodium (80 mg/0.8 ml syr, 120 mg/0.8 ml syr)</i>	np	QL MAX 24 / 90 DAYS S HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>enoxaparin sodium (100 mg/ml syringe, 150 mg/ml syringe, 300 mg/3 ml vial)</i>	np	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-bottom: 5px;">MAX 30 / 90 DAYS</div> <div style="background-color: #e31a1c; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #003366; color: white; padding: 2px 5px; border-radius: 3px;">HSA</div> </div>
FRAGMIN (2,500 UNIT/0.2 ML SYR, 5,000 UNIT/0.2 ML SYR)	NP	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-bottom: 5px;">MAX 6 / 90 DAYS</div> <div style="background-color: #e31a1c; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #003366; color: white; padding: 2px 5px; border-radius: 3px;">HSA</div> </div>
FRAGMIN 10,000 UNIT/ML SYRINGE	NP	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-bottom: 5px;">MAX 30 / 90 DAYS</div> <div style="background-color: #e31a1c; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #003366; color: white; padding: 2px 5px; border-radius: 3px;">HSA</div> </div>
FRAGMIN 12,500 UNIT/0.5 ML SYR	NP	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-bottom: 5px;">MAX 15 / 90 DAYS</div> <div style="background-color: #e31a1c; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #003366; color: white; padding: 2px 5px; border-radius: 3px;">HSA</div> </div>
FRAGMIN 15,000 UNIT/0.6 ML SYR	NP	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-bottom: 5px;">MAX 18 / 90 DAYS</div> <div style="background-color: #e31a1c; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #003366; color: white; padding: 2px 5px; border-radius: 3px;">HSA</div> </div>
FRAGMIN 18,000 UNIT/0.72 ML	NP	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-bottom: 5px;">MAX 21.6 / 90 DAYS</div> <div style="background-color: #e31a1c; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #003366; color: white; padding: 2px 5px; border-radius: 3px;">HSA</div> </div>
FRAGMIN 7,500 UNIT/0.3 ML SYR	NP	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-bottom: 5px;">MAX 9 / 90 DAYS</div> <div style="background-color: #e31a1c; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #003366; color: white; padding: 2px 5px; border-radius: 3px;">HSA</div> </div>
FRAGMIN 10,000 UNIT/4 ML VIAL	NP	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-bottom: 5px;">max 120 / 90 days</div> <div style="background-color: #e31a1c; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #003366; color: white; padding: 2px 5px; border-radius: 3px;">HSA</div> </div>



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FRAGMIN 95,000 UNIT/3.8 ML VL	NP	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-left: 5px;">MAX 38 / 90 DAYS</div> </div> <div style="background-color: #e31a1c; color: white; padding: 2px 5px; border-radius: 3px; margin-top: 2px;">S</div> <div style="background-color: #003366; color: white; padding: 2px 5px; border-radius: 3px; margin-top: 2px;">HSA</div>
<i>heparin sod 5,000 unit/ml syrg (west-ward/hikma)</i>	NP	<div style="background-color: #003366; color: white; padding: 2px 5px; border-radius: 3px;">HSA</div>
<i>heparin sodium (5,000 unit/ml carpuct, sod 5,000 unit/0.5 ml, sod 5,000 unit/ml syrg, sod 5,000 unit/ml vial, 50,000 unit/10 ml vial)</i>	np	<div style="background-color: #003366; color: white; padding: 2px 5px; border-radius: 3px;">HSA</div>
<i>heparin sodium (sod 1,000 unit/ml vial, 2,000 unit/2 ml vial, 10,000 unit/10 ml vial, sod 10,000 unit/ml vl, sod 20,000 unit/ml vl, 30,000 unit/30 ml vial, 40,000 unit/4 ml vial, 50,000 unit/5 ml vial)</i>	np	
LOVENOX (100 MG/ML SYRINGE, 150 MG/ML SYRINGE, 300 MG/3 ML VIAL)	NP	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-left: 5px;">MAX 30 / 90 DAYS</div> </div> <div style="background-color: #e31a1c; color: white; padding: 2px 5px; border-radius: 3px; margin-top: 2px;">S</div> <div style="background-color: #003366; color: white; padding: 2px 5px; border-radius: 3px; margin-top: 2px;">HSA</div>
LOVENOX (80 MG/0.8 ML SYRINGE, 120 MG/0.8 ML SYRINGE)	NP	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-left: 5px;">MAX 24 / 90 DAYS</div> </div> <div style="background-color: #e31a1c; color: white; padding: 2px 5px; border-radius: 3px; margin-top: 2px;">S</div> <div style="background-color: #003366; color: white; padding: 2px 5px; border-radius: 3px; margin-top: 2px;">HSA</div>
LOVENOX 30 MG/0.3 ML SYRINGE	NP	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-left: 5px;">MAX 9 / 90 DAYS</div> </div> <div style="background-color: #e31a1c; color: white; padding: 2px 5px; border-radius: 3px; margin-top: 2px;">S</div> <div style="background-color: #003366; color: white; padding: 2px 5px; border-radius: 3px; margin-top: 2px;">HSA</div>
LOVENOX 40 MG/0.4 ML SYRINGE	NP	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-left: 5px;">MAX 12 / 90 DAYS</div> </div> <div style="background-color: #e31a1c; color: white; padding: 2px 5px; border-radius: 3px; margin-top: 2px;">S</div> <div style="background-color: #003366; color: white; padding: 2px 5px; border-radius: 3px; margin-top: 2px;">HSA</div>
LOVENOX 60 MG/0.6 ML SYRINGE	NP	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-left: 5px;">MAX 18 / 90 DAYS</div> </div> <div style="background-color: #e31a1c; color: white; padding: 2px 5px; border-radius: 3px; margin-top: 2px;">S</div> <div style="background-color: #003366; color: white; padding: 2px 5px; border-radius: 3px; margin-top: 2px;">HSA</div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INDIRECT FACTOR XA INHIBITORS		
ARIXTRA 10 MG/0.8 ML SYRINGE	NP	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 10px; border-radius: 5px;">QL</div> <div style="margin: 2px 0;">MAX 24 / 90 DAYS</div> <div style="background-color: #e31a1c; color: white; padding: 2px 10px; border-radius: 5px;">S</div> <div style="background-color: #003366; color: white; padding: 2px 10px; border-radius: 5px;">HSA</div> </div>
ARIXTRA 2.5 MG/0.5 ML SYRINGE	NP	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 10px; border-radius: 5px;">QL</div> <div style="margin: 2px 0;">MAX 15 / 90 DAYS</div> <div style="background-color: #e31a1c; color: white; padding: 2px 10px; border-radius: 5px;">S</div> <div style="background-color: #003366; color: white; padding: 2px 10px; border-radius: 5px;">HSA</div> </div>
ARIXTRA 5 MG/0.4 ML SYRINGE	NP	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 10px; border-radius: 5px;">QL</div> <div style="margin: 2px 0;">MAX 12 / 90 DAYS</div> <div style="background-color: #e31a1c; color: white; padding: 2px 10px; border-radius: 5px;">S</div> <div style="background-color: #003366; color: white; padding: 2px 10px; border-radius: 5px;">HSA</div> </div>
ARIXTRA 7.5 MG/0.6 ML SYRINGE	NP	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 10px; border-radius: 5px;">QL</div> <div style="margin: 2px 0;">MAX 18 / 90 DAYS</div> <div style="background-color: #e31a1c; color: white; padding: 2px 10px; border-radius: 5px;">S</div> <div style="background-color: #003366; color: white; padding: 2px 10px; border-radius: 5px;">HSA</div> </div>
<i>fondaparinux 10 mg/0.8 ml syr</i>	np	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 10px; border-radius: 5px;">QL</div> <div style="margin: 2px 0;">MAX 24 / 90 DAYS</div> <div style="background-color: #e31a1c; color: white; padding: 2px 10px; border-radius: 5px;">S</div> <div style="background-color: #003366; color: white; padding: 2px 10px; border-radius: 5px;">HSA</div> </div>
<i>fondaparinux 2.5 mg/0.5 ml syr</i>	np	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 10px; border-radius: 5px;">QL</div> <div style="margin: 2px 0;">MAX 15 / 90 DAYS</div> <div style="background-color: #e31a1c; color: white; padding: 2px 10px; border-radius: 5px;">S</div> <div style="background-color: #003366; color: white; padding: 2px 10px; border-radius: 5px;">HSA</div> </div>
<i>fondaparinux 5 mg/0.4 ml syr</i>	np	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 10px; border-radius: 5px;">QL</div> <div style="margin: 2px 0;">MAX 12 / 90 DAYS</div> <div style="background-color: #e31a1c; color: white; padding: 2px 10px; border-radius: 5px;">S</div> <div style="background-color: #003366; color: white; padding: 2px 10px; border-radius: 5px;">HSA</div> </div>
<i>fondaparinux 7.5 mg/0.6 ml syr</i>	np	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 10px; border-radius: 5px;">QL</div> <div style="margin: 2px 0;">MAX 18 / 90 DAYS</div> <div style="background-color: #e31a1c; color: white; padding: 2px 10px; border-radius: 5px;">S</div> <div style="background-color: #003366; color: white; padding: 2px 10px; border-radius: 5px;">HSA</div> </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTICONVULSANTS		
ANTICONVULSANTS, MISCELLANEOUS		
BRIVIACT (10 MG TABLET, 10 MG/ML ORAL SOLN, 25 MG TABLET, 50 MG TABLET, 75 MG TABLET, 100 MG TABLET)	NP	
<i>carbamazepine (100 mg tab chew, 100 mg/5 ml susp, 200 mg tablet, 200 mg/10 ml cup)</i>	np	
<i>carbamazepine 200 mg tab chew</i>	NP	
<i>carbamazepine er (er 100 mg cap, er 100 mg tablet, er 200 mg cap, er 200 mg tablet, er 300 mg cap, er 400 mg tablet)</i>	np	
CARBATROL	NP	
ELEPSIA XR	NP	
EPIDIOLEX	P	S PA
EPITOL	np	
EPRONTIA	NP	
EQUETRO	NP	
<i>felbamate (400 mg tablet, 600 mg tablet, 600 mg/5 ml susp, 600 mg/5 ml susp cup)</i>	np	
FELBATOL (400 MG TABLET, 600 MG TABLET, 600 MG/5 ML SUSP)	NP	
FINTEPLA	NP	S PA QPD 12 per day
FYCOMPA (0.5 MG/ML ORAL SUSP, 2 MG TABLET, 4 MG TABLET, 6 MG TABLET, 8 MG TABLET, 10 MG TABLET, 12 MG TABLET)	NP	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KEPPRA (100 MG/ML ORAL SOLN, 250 MG TABLET, 500 MG TABLET, 750 MG TABLET, 1,000 MG TABLET)	NP	
KEPPRA XR	NP	
LAMICTAL (5 MG DISPER TABLET, 25 MG DISPER TABLET, 25 MG TABLET, 100 MG TABLET, 150 MG TABLET, 200 MG TABLET)	NP	
LAMICTAL (BLUE)	NP	
LAMICTAL (GREEN)	NP	
LAMICTAL (ORANGE)	NP	
LAMICTAL ODT	NP	
LAMICTAL ODT (BLUE)	NP	
LAMICTAL ODT (GREEN)	NP	
LAMICTAL ODT (ORANGE)	NP	
LAMICTAL XR	NP	
LAMICTAL XR (BLUE)	NP	
LAMICTAL XR (GREEN)	NP	
LAMICTAL XR (ORANGE)	NP	
<i>lamotrigine (25 mg tablet, 100 mg tablet, 150 mg tablet, 200 mg tablet)</i>	p	
<i>lamotrigine (5 mg disper tablet, 25 mg disper tab)</i>	np	
<i>lamotrigine (blue)</i>	np	
<i>lamotrigine (green)</i>	np	
<i>lamotrigine (orange)</i>	np	
<i>lamotrigine er</i>	np	
<i>lamotrigine odt</i>	np	
<i>lamotrigine odt (blue)</i>	np	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>lamotrigine odt (green)</i>	np	
<i>lamotrigine odt (orange)</i>	np	
<i>levetiracetam (100 mg/ml soln, 500 mg/5 ml cup, 750 mg tablet, 1,000 mg tablet, 1,000mg/10ml cup)</i>	np	
<i>levetiracetam (250 mg tablet, 500 mg tablet)</i>	p	
<i>levetiracetam er</i>	np	
QUDEXY XR (25 MG CAPSULE, 50 MG CAPSULE, 100 MG CAPSULE, 150 MG CAPSULE)	NP	PA QPD 1 per day
QUDEXY XR 200 MG CAPSULE	NP	PA QPD 2 per day
ROWEEPRA	p	
SPRITAM	NP	
SUBVENITE	p	
SUBVENITE (BLUE)	np	
SUBVENITE (GREEN)	np	
SUBVENITE (ORANGE)	np	
TEGRETOL (100 MG/5 ML SUSP, 200 MG TABLET)	NP	
TEGRETOL XR	NP	
TOPAMAX (15 MG SPRINKLE CAP, 25 MG SPRINKLE CAP, 25 MG TABLET, 50 MG TABLET, 100 MG TABLET, 200 MG TABLET)	NP	
<i>topiramate (15 mg cap, 25 mg cap)</i>	np	
<i>topiramate 50 mg sprinkle cap</i>	NP	
<i>topiramate (25 mg tablet, 50 mg tablet, 100 mg tablet, 200 mg tablet)</i>	p	
<i>topiramate er (er 200 mg capsule, er 200mg sprink cap)</i>	np	PA QPD 2.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>topiramate er (er 25 mg capsule, er 25mg sprinkl cap, er 50 mg capsule, er 50mg sprinkl cap, er 100 mg capsule, er 100mg sprink cap)</i>	np	PA QPD 1.0 per day
<i>topiramate er 150mg sprink cap</i>	np	PA QPD 1 per day
TROKENDI XR (25 MG CAPSULE, 50 MG CAPSULE, 100 MG CAPSULE)	NP	PA QPD 1 per day
TROKENDI XR 200 MG CAPSULE	NP	PA QPD 2 per day
<b>BARBITURATES (ANTICONVULSANTS)</b>		
MYSOLINE	NP	
<i>primidone 125 mg tablet</i>	NP	
<i>primidone 250 mg tablet</i>	np	
<i>primidone 50 mg tablet</i>	p	
<b>BENZODIAZEPINES (ANTICONVULSANTS)</b>		
<i>clobazam 2.5 mg/ml suspension</i>	np	S
<i>clobazam (10 mg tablet, 20 mg tablet)</i>	np	
<i>clonazepam (0.5 mg tablet, 1 mg tablet, 2 mg tablet)</i>	p	
<i>clonazepam (0.125 mg dis tab, 0.125 mg odt, 0.25 mg odt, 0.5 mg dis tablet, 0.5 mg odt, 1 mg dis tablet, 1 mg odt, 2 mg odt)</i>	np	
KLONOPIN	NP	
ONFI 2.5 MG/ML SUSPENSION	NP	S
ONFI (10 MG TABLET, 20 MG TABLET)	NP	
SYMPAZAN	NP	S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>GABA-MEDIATED ANTICONVULSANTS</b>		
DEPAKOTE	NP	
DEPAKOTE ER	NP	
DEPAKOTE SPRINKLE	NP	
DIACOMIT (250 MG CAPSULE, 250 MG POWDER PACKET, 500 MG CAPSULE, 500 MG POWDER PACKET)	NP	S
<i>divalproex dr 125 mg cap sprnk</i>	np	
<i>divalproex sodium (dr 125 mg tab, dr 250 mg tab, dr 500 mg tab)</i>	p	
<i>divalproex sodium er</i>	np	
<i>gabapentin (100 mg capsule, 300 mg capsule, 400 mg capsule, 600 mg tablet, 800 mg tablet)</i>	p	
<i>gabapentin (250 mg/5 ml soln, 300 mg/6ml soln cup)</i>	np	
<i>gabapentin er 300 mg tablet</i>	np	ST QPD 1.0 per day
<i>gabapentin er 600 mg tablet</i>	np	ST QPD 3.0 per day
GABARONE	NP	
GABITRIL	NP	
GRALISE (ER 450 MG TABLET, ER 750 MG TABLET)	NP	ST QPD 1.0 per day
GRALISE ER 300 MG TABLET	NP	ST QPD 1 per day
GRALISE ER 600 MG TABLET	NP	ST QPD 3 per day
GRALISE ER 900 MG TABLET	NP	ST QPD 2.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HORIZANT	NP	ST QPD 2 per day
LYRICA (225 MG CAPSULE, 300 MG CAPSULE)	NP	ST QPD 2 per day
LYRICA (25 MG CAPSULE, 50 MG CAPSULE, 150 MG CAPSULE)	NP	ST QPD 3.0 per day
LYRICA (75 MG CAPSULE, 100 MG CAPSULE, 200 MG CAPSULE)	NP	ST QPD 3 per day
LYRICA 20 MG/ML ORAL SOLUTION	NP	ST QPD 30.0 per day
LYRICA CR (CR 82.5 MG TABLET, CR 165 MG TABLET)	NP	ST QPD 1.0 per day
LYRICA CR 330 MG TABLET	NP	ST QPD 2.0 per day
NEURONTIN (100 MG CAPSULE, 250 MG/5 ML SOLUTION, 300 MG CAPSULE, 400 MG CAPSULE, 600 MG TABLET, 800 MG TABLET)	NP	
<i>pregabalin (225 mg capsule, 300 mg capsule)</i>	p	QPD 2.0 per day
<i>pregabalin (25 mg capsule, 50 mg capsule, 75 mg capsule, 100 mg capsule, 150 mg capsule, 200 mg capsule)</i>	p	QPD 3.0 per day
<i>pregabalin 20 mg/ml solution</i>	np	QPD 30 per day
<i>pregabalin er (er 82.5 mg tablet, er 165 mg tablet)</i>	np	ST QPD 1 per day
<i>pregabalin er 330 mg tablet</i>	np	ST QPD 2 per day
SABRIL (500 MG POWDER PACKET, 500 MG TABLET)	NP	S



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>tiagabine hcl</i>	np	
<i>valproic acid (250 mg capsule, 250 mg/5 ml cup, 250 mg/5 ml soln, 500 mg/10 ml cup)</i>	np	
<i>vigabatrin (500 mg powder packet, 500 mg tablet)</i>	np	S
VIGADRONE (500 MG POWDER PACKET, 500 MG TABLET)	np	S
VIGPODER	np	S
ZTALMY	NP	S
<b>HYDANTOINS</b>		
DILANTIN (30 MG CAPSULE, 100 MG CAPSULE)	P	
DILANTIN 50 MG INFATAB	NP	
DILANTIN-125	P	
PHENYTEK	np	
<i>phenytoin (50 mg infatab chew, 50 mg tablet chew, 100 mg/4 ml susp cup, 125 mg/5 ml susp)</i>	np	
<i>phenytoin sodium extended</i>	np	
<b>ION CHANNEL INHIBITION AGENTS</b>		
APTIOM	P	
BANZEL (40 MG/ML SUSPENSION, 200 MG TABLET, 400 MG TABLET)	NP	
<i>lacosamide (10 mg/ml solution, 50 mg tablet, 50 mg/5 ml cup, 100 mg tablet, 100 mg/10 ml cup, 150 mg tablet, 150 mg/15 ml cup, 200 mg tablet, 200 mg/20 ml cup)</i>	np	
MOTPOLY XR	NP	
<i>oxcarbazepine (300 mg tablet, 300 mg/5 ml cup, 300 mg/5 ml susp, 600 mg tablet)</i>	np	
<i>oxcarbazepine 150 mg tablet</i>	p	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>oxcarbazepine er</i>	np	
OXTELLAR XR	NP	
<i>rufinamide (40 mg/ml suspension, 200 mg tablet, 400 mg tablet)</i>	np	
TRILEPTAL (150 MG TABLET, 300 MG TABLET, 300 MG/5 ML SUSP, 600 MG TABLET)	NP	
VIMPAT (10 MG/ML SOLUTION, 50 MG TABLET, 100 MG TABLET, 150 MG TABLET, 200 MG TABLET)	NP	
XCOPRI (12.5-25 MG TITRATION PK, 25 MG TABLET, 50 MG TABLET, 50-100 MG TITRATION PAK, 100 MG TABLET, 150 MG TABLET, 150-200 MG TITRATION PK, 200 MG TABLET, 250 MG DAILY DOSE PACK, 350 MG DAILY DOSE PACK)	NP	
ZONEGRAN	NP	
ZONISADE	NP	
<i>zonisamide (25 mg capsule, 50 mg capsule)</i>	p	
<i>zonisamide 100 mg capsule</i>	np	
<b>SUCCINIMIDES</b>		
CELONTIN	NP	
<i>ethosuximide (250 mg capsule, 250 mg/5 ml soln)</i>	np	
<i>methsuximide</i>	np	
ZARONTIN (250 MG CAPSULE, 250 MG/5 ML SOLUTION)	NP	
<b>ANTIDEPRESSANTS</b>		
<b>ANTIDEPRESSANTS, MISCELLANEOUS</b>		
APLENZIN	NP	ST QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AUVELITY	NP	ST QPD 2.0 per day
<i>bupropion hcl 100 mg tablet</i>	p	QPD 4.0 per day
<i>bupropion hcl 75 mg tablet</i>	p	QPD 2.0 per day
<i>bupropion hcl sr</i>	p	QPD 2.0 per day
<i>bupropion hcl sr 150 mg tablet (ndc: 00591354360)</i>	np	C [ACA] Quantity Limits May Apply HSA ACA
<i>bupropion hcl sr 150 mg tablet (ndc: 00591354376)</i>	np	C [ACA] Quantity Limits May Apply HSA ACA
<i>bupropion hcl sr 150 mg tablet (ndc: 42806041360)</i>	np	C [ACA] Quantity Limits May Apply HSA ACA
<i>bupropion hcl sr 150 mg tablet (ndc: 43598086360)</i>	np	C [ACA] Quantity Limits May Apply HSA ACA
<i>bupropion hcl xl 450 mg tablet</i>	NP	ST QPD 1.0 per day
<i>bupropion xl (150 mg tablet, 300 mg tablet)</i>	p	QPD 1.0 per day
FORFIVO XL	NP	ST QPD 1.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
WELLBUTRIN SR	NP	ST QPD 2 per day
WELLBUTRIN XL	NP	ST QPD 1 per day
ZURZUVAE (20 MG CAPSULE, 25 MG CAPSULE)	P	QL max 28 / 365 days S
ZURZUVAE 30 MG CAPSULE	P	QL max 14 / 365 days S
<b>MONOAMINE OXIDASE INHIBITORS</b>		
MARPLAN	NP	
NARDIL	NP	
PARNATE	NP	
<i>phenelzine sulfate 15 mg tab (greenstone)</i>	P	
<i>tranylcypromine sulfate</i>	np	
<b>SEL.SEROTONIN,NOREPI REUPTAKE INHIBITOR</b>		
CYMBALTA	NP	ST QPD 2 per day
<i>desvenlafaxine er</i>	NP	ST QPD 1 per day
<i>desvenlafaxine succinate er</i>	np	QPD 1.0 per day
DRIZALMA SPRINKLE	NP	ST QPD 2 per day
<i>duloxetine hcl (dr 20 mg cap, dr 30 mg cap, dr 60 mg cap)</i>	p	QPD 2.0 per day
<i>duloxetine hcl dr 40 mg cap</i>	np	QPD 3.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EFFEXOR XR (37.5 MG CAPSULE, 150 MG CAPSULE)	NP	ST QPD 1.0 per day
EFFEXOR XR 75 MG CAPSULE	NP	ST QPD 3.0 per day
FETZIMA 20-40 MG TITRATION PAK	NP	QL MAX 28 / 180 DAYS ST
FETZIMA (ER 20 MG CAPSULE, ER 40 MG CAPSULE, ER 80 MG CAPSULE, ER 120 MG CAPSULE)	NP	ST QPD 1 per day
PRISTIQ	NP	ST QPD 1 per day
<i>venlafaxine besylate er</i>	NP	ST QPD 1 per day
<i>venlafaxine hcl</i>	p	QPD 3 per day
<i>venlafaxine hcl er (er 37.5 mg cap, er 150 mg cap)</i>	p	QPD 1.0 per day
<i>venlafaxine hcl er 75 mg cap</i>	p	QPD 3.0 per day
<i>venlafaxine hcl er (er 37.5 mg tab, er 150 mg tab, er 225 mg tab)</i>	np	QPD 1.0 per day
<i>venlafaxine hcl er 75 mg tab</i>	np	QPD 3.0 per day
<b>SELECTIVE-SEROTONIN REUPTAKE INHIBITORS</b>		
CELEXA	NP	ST HSA QPD 1 per day
<i>citalopram hbr 30 mg capsule</i>	NP	ST HSA QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>citalopram hbr 10 mg/5 ml soln</i>	np	HSA QPD 20 per day
<i>citalopram hbr (10 mg tablet, 20 mg tablet, 40 mg tablet)</i>	p	HSA QPD 1.0 per day
<i>escitalopram oxalate 5 mg/5 ml</i>	np	HSA QPD 20.0 per day
<i>escitalopram oxalate (5 mg tablet, 10 mg tablet, 20 mg tablet)</i>	p	HSA QPD 1.0 per day
<i>fluoxetine dr</i>	NP	ST HSA QPD 0.143 per day
<i>fluoxetine hcl 10 mg capsule</i>	p	HSA QPD 1.0 per day
<i>fluoxetine hcl 20 mg capsule</i>	p	HSA QPD 4.0 per day
<i>fluoxetine hcl 40 mg capsule</i>	p	HSA QPD 2.0 per day
<i>fluoxetine 20 mg/5 ml soln cup</i>	np	HSA QPD 20 per day
<i>fluoxetine 20 mg/5 ml solution</i>	np	HSA QPD 20.0 per day
<i>fluoxetine hcl 10 mg tablet</i>	p	HSA QPD 1 per day
<i>fluoxetine hcl 20 mg tablet</i>	np	HSA QPD 4 per day
<i>fluoxetine hcl 60 mg tablet</i>	np	HSA QPD 1.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>fluoxetine hcl 10 mg tablet (pmdd)</i>	NP	HSA QPD 1.0 per day
<i>fluoxetine hcl 20 mg tablet (pmdd)</i>	NP	HSA QPD 4.0 per day
<i>fluoxetine hcl 60 mg tablet (almatica)</i>	NP	ST HSA QPD 1 per day
<i>fluvoxamine maleate 100 mg tab</i>	np	QPD 3.0 per day
<i>fluvoxamine maleate 25 mg tab</i>	p	QPD 1.0 per day
<i>fluvoxamine maleate 50 mg tab</i>	np	QPD 1.0 per day
<i>fluvoxamine maleate er</i>	np	QPD 2.0 per day
LEXAPRO	NP	ST HSA QPD 1 per day
<i>olanzapine-fluoxetine hcl</i>	np	
<i>paroxetine cr (cr 25 mg tablet, cr 37.5 mg tablet)</i>	np	HSA QPD 2 per day
<i>paroxetine cr 12.5 mg tablet</i>	np	HSA QPD 1 per day
<i>paroxetine er (er 25 mg tablet, er 37.5 mg tablet)</i>	np	HSA QPD 2 per day
<i>paroxetine er 12.5 mg tablet</i>	np	HSA QPD 1 per day
<i>paroxetine hcl 10 mg/5 ml susp</i>	np	HSA QPD 30 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>paroxetine hcl (10 mg tablet, 20 mg tablet, 40 mg tablet)</i>	p	HSA QPD 1.0 per day
<i>paroxetine hcl 30 mg tablet</i>	p	HSA QPD 2.0 per day
<i>paroxetine mesylate</i>	np	
PAXIL 10 MG/5 ML SUSPENSION	NP	ST HSA QPD 30 per day
PAXIL (10 MG TABLET, 20 MG TABLET, 40 MG TABLET)	NP	ST HSA QPD 1 per day
PAXIL 30 MG TABLET	NP	ST HSA QPD 2 per day
PAXIL CR (CR 25 MG TABLET, CR 37.5 MG TABLET)	NP	ST HSA QPD 2 per day
PAXIL CR 12.5 MG TABLET	NP	ST HSA QPD 1 per day
PEXEVA (10 MG TABLET, 20 MG TABLET)	NP	ST HSA QPD 1 per day
PEXEVA 30 MG TABLET	NP	ST HSA QPD 2 per day
PROZAC 10 MG PULVULE	NP	ST HSA QPD 1 per day



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PROZAC 20 MG PULVULE	NP	ST HSA QPD 4 per day
PROZAC 40 MG PULVULE	NP	ST HSA QPD 2 per day
<i>sertraline hcl (150 mg capsule, 200 mg capsule)</i>	NP	ST HSA QPD 1 per day
<i>sertraline 20 mg/ml oral conc</i>	np	HSA QPD 10 per day
<i>sertraline hcl (25 mg tablet, 50 mg tablet)</i>	p	HSA QPD 1.0 per day
<i>sertraline hcl 100 mg tablet</i>	p	HSA QPD 2.0 per day
SYMBYAX	NP	
ZOLOFT 20 MG/ML ORAL CONC	NP	ST HSA QPD 10.0 per day
ZOLOFT 100 MG TABLET	NP	ST HSA QPD 2.0 per day
ZOLOFT 25 MG TABLET	NP	ST HSA QPD 1.0 per day
ZOLOFT 50 MG TABLET	NP	ST HSA QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>SEROTONIN MODULATORS</b>		
<i>mirtazapine (15 mg tablet, 30 mg tablet, 45 mg tablet)</i>	p	QPD 1.0 per day
<i>mirtazapine 7.5 mg tablet</i>	np	QPD 1.0 per day
<i>mirtazapine (15 mg odt, 30 mg odt, 45 mg odt)</i>	np	QPD 1 per day
REMERON (15 MG SOLTAB, 15 MG TABLET, 30 MG SOLTAB, 30 MG TABLET, 45 MG SOLTAB)	NP	ST QPD 1 per day
<i>trazodone 300 mg tablet</i>	np	
<i>trazodone hcl (50 mg tablet, 100 mg tablet, 150 mg tablet)</i>	p	
TRINTELLIX	NP	ST QPD 1 per day
VIIBRYD 10-20 MG STARTER PACK	NP	QL MAX 30 / 180 DAYS ST
VIIBRYD (10 MG TABLET, 20 MG TABLET, 40 MG TABLET)	NP	ST QPD 1 per day
<i>vilazodone hcl</i>	np	QPD 1.0 per day
<b>TRICYCLICS, OTHER NOREPI-RU INHIBITORS</b>		
<i>amitriptyline hcl (10 mg tab, 25 mg tab, 50 mg tab, 75 mg tab, 100 mg tab)</i>	p	
<i>amitriptyline hcl 150 mg tab</i>	np	
ANAFRANIL	NP	
<i>chlordiazepoxide-amitriptyline</i>	NP	
<i>clomipramine hcl</i>	np	
<i>desipramine hcl</i>	np	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>doxepin hcl (50 mg capsule, 75 mg capsule, 100 mg capsule, 150 mg capsule)</i>	np	
<i>doxepin hcl (10 mg capsule, 10 mg/ml oral conc, 25 mg capsule)</i>	p	
<i>doxepin hcl (3 mg tablet, 6 mg tablet)</i>	np	QPD 1.0 per day
<i>imipramine hcl</i>	p	
<i>imipramine pamoate</i>	np	
NORPRAMIN	NP	
<i>nortriptyline hcl (10 mg cap, 25 mg cap, 50 mg cap, 75 mg cap)</i>	p	
<i>nortriptyline 10 mg/5 ml soln</i>	np	
PAMELOR	NP	
<i>perphenazine-amitriptyline</i>	NP	
<i>protriptyline hcl</i>	np	
SILENOR	NP	ST QPD 1 per day
<i>trimipramine maleate</i>	np	
<b>ANTIDIABETIC AGENTS</b>		
<b>ALPHA-GLUCOSIDASE INHIBITORS</b>		
<i>acarbose</i>	np	HSA
<i>miglitol</i>	np	HSA
<i>miglitol 100 mg tablet (westminster)</i>	NP	HSA
<i>miglitol 25 mg tablet (westminster)</i>	NP	HSA
<i>miglitol 50 mg tablet (westminster)</i>	NP	HSA
PRECOSE	NP	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>AMYLINOMIMETICS</b>		
SYMLINPEN 120	NP	HSA
SYMLINPEN 60	NP	HSA
<b>ANTIDIABETIC AGENTS, MISCELLANEOUS</b>		
KORLYM	NP	S PA QPD 4 per day
<i>mifepristone 300 mg tablet</i>	np	S PA QPD 4.0 per day
<b>BIGUANIDES</b>		
GLUMETZA ER 1,000 MG TABLET	NP	ST HSA QPD 2 per day
GLUMETZA ER 500 MG TABLET	NP	ST HSA QPD 3 per day
<i>metformin er 1,000 mg gastr-tb</i>	np	ST HSA QPD 2.0 per day
<i>metformin er 500 mg gastrc-tb</i>	np	ST HSA QPD 3.0 per day
<i>metformin er 1,000 mg osm-tab</i>	np	ST HSA QPD 2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>metformin er 500 mg osmotic tb</i>	np	ST HSA QPD 3 per day
<i>metformin hcl 500 mg/5 ml soln</i>	np	HSA PA QPD 26.0 per day
<i>metformin hcl (500 mg tablet, 850 mg tablet, 1,000 mg tablet)</i>	p	HSA
<i>metformin hcl (625 mg tablet, 750 mg tablet)</i>	NP	HSA
<i>metformin hcl er 500 mg tablet</i>	p	HSA QPD 4.0 per day
<i>metformin hcl er 750 mg tablet</i>	p	HSA QPD 2.0 per day
RIOMET	NP	HSA PA QPD 26.0 per day
<b>DIPEPTIDYL PEPTIDASE-4(DPP-4) INHIBITORS</b>		
<i>alogliptin</i>	NP	ST HSA QPD 1 per day
<i>alogliptin-metformin</i>	NP	ST HSA QPD 2 per day
<i>alogliptin-pioglitazone</i>	NP	ST HSA QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
JANUMET	P	HSA QPD 2 per day
JANUMET XR (50-500 MG TABLET, 100-1,000 MG TABLET)	P	HSA QPD 1 per day
JANUMET XR 50-1,000 MG TABLET	P	HSA QPD 2 per day
JANUVIA	P	HSA QPD 1 per day
JENTADUETO	NP	ST HSA QPD 2 per day
JENTADUETO XR 2.5 MG-1,000 MG	NP	ST HSA QPD 2 per day
JENTADUETO XR 5 MG-1,000 MG TB	NP	ST HSA QPD 1 per day
KAZANO	NP	ST HSA QPD 2 per day
KOMBIGLYZE XR (5-1,000 MG TAB, 5-500 MG TABLET)	NP	ST HSA QPD 1 per day
KOMBIGLYZE XR 2.5-1,000 MG TAB	NP	ST HSA QPD 2 per day
NESINA	NP	ST HSA QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ONGLYZA	NP	ST HSA QPD 1 per day
OSENI	NP	ST HSA QPD 1 per day
<i>saxagliptin hcl</i>	np	HSA QPD 1.0 per day
<i>saxagliptin-metformin er (saxagliptin-metformin er 5-500, saxagliptin-metformin er 5-1000)</i>	np	HSA QPD 1.0 per day
<i>saxagliptin-metformin er 2.5-1000</i>	np	HSA QPD 2.0 per day
<i>sitagliptin</i>	NP	ST HSA QPD 1.0 per day
<i>sitagliptin-metformin</i>	NP	ST HSA QPD 2.0 per day
TRADJENTA	NP	ST HSA QPD 1 per day
ZITUVIO	NP	ST HSA QPD 1.0 per day
INCRETIN MIMETICS		
BYDUREON BCISE	NP	HSA PA QPD 0.122 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BYETTA 10 MCG DOSE PEN INJ	NP	HSA PA QPD 0.08 per day
BYETTA 5 MCG DOSE PEN INJ	NP	HSA PA QPD 0.04 per day
<i>exenatide 10 mcg dose pen inj</i>	np	HSA PA QPD 0.08 per day
<i>exenatide 5 mcg dose pen inj</i>	np	HSA PA QPD 0.04 per day
<i>liraglutide (2-pak 18 mg/3 ml, 3-pak 18 mg/3 ml)</i>	np	HSA PA QPD 0.3 per day
MOUNJARO (5 MG/0.5 ML PEN, 7.5 MG/0.5 ML PEN, 10 MG/0.5 ML PEN, 12.5 MG/0.5 ML PEN, 15 MG/0.5 ML PEN)	P	HSA PA QPD 0.072 per day
MOUNJARO 2.5 MG/0.5 ML PEN	P	QL max 2 / 180 days HSA PA
OZEMPIC	P	HSA PA QPD 0.108 per day
RYBELSUS (4 MG TABLET, 9 MG TABLET)	P	HSA PA QPD 1.0 per day



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RYBELSUS (7 MG TABLET, 14 MG TABLET)	P	HSA PA QPD 1 per day
RYBELSUS 1.5 MG TABLET	P	QL max 30 / 180 days HSA PA
RYBELSUS 3 MG TABLET	P	QL MAX 30 / 180 DAYS HSA PA
SAXENDA	P	HSA PA QPD 0.5 per day
TRULICITY	P	HSA PA QPD 0.072 per day
VICTOZA 2-PAK	NP	HSA PA QPD 0.3 per day
VICTOZA 3-PAK	NP	HSA PA QPD 0.3 per day
WEGOVY (0.25 MG/0.5 ML PEN, 0.5 MG/0.5 ML PEN, 1 MG/0.5 ML PEN)	P	QL MAX 4 / 180 DAYS HSA PA
WEGOVY (1.7 MG/0.75 ML PEN, 2.4 MG/0.75 ML PEN)	P	HSA PA QPD 0.108 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZEPBOUND (5 MG/0.5 ML PEN, 7.5 MG/0.5 ML PEN, 10 MG/0.5 ML PEN, 12.5 MG/0.5 ML PEN, 15 MG/0.5 ML PEN)	P	HSA PA QPD 0.072 per day
ZEPBOUND 2.5 MG/0.5 ML PEN	P	QL max 2 / 180 days HSA PA
<b>MEGLITINIDES</b>		
<i>nateglinide</i>	np	HSA
<i>repaglinide</i>	np	HSA
<b>SODIUM-GLUC COTRANSPORT 2 (SGLT2) INHIB</b>		
BRENZAVVY	NP	ST HSA QPD 1.0 per day
<i>dapagliflozin</i>	NP	HSA QPD 1.0 per day
<i>dapagliflozin-metfo er 10-1000</i>	NP	HSA QPD 1.0 per day
<i>dapagliflozin-metfor er 5-1000</i>	NP	HSA QPD 2.0 per day
FARXIGA	P	HSA QPD 1.0 per day
GLYXAMBI	P	HSA QPD 1 per day
INPEFA	NP	ST QPD 1.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INVOKAMET	NP	ST HSA QPD 2 per day
INVOKAMET XR	NP	ST HSA QPD 2 per day
INVOKANA	NP	ST HSA QPD 1 per day
JARDIANCE	P	HSA QPD 1 per day
QTERN	NP	ST HSA QPD 1 per day
SEGLUROMET (2.5-1,000 MG TABLET, 7.5-1,000 MG TABLET, 7.5-500 MG TABLET)	NP	ST HSA QPD 2 per day
SEGLUROMET 2.5-500 MG TABLET	NP	ST HSA QPD 4 per day
STEGLATRO 15 MG TABLET	NP	ST HSA QPD 1 per day
STEGLATRO 5 MG TABLET	NP	ST HSA QPD 2 per day
STEGLUJAN	NP	ST HSA QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SYNJARDY	P	HSA QPD 2 per day
SYNJARDY XR (5-1,000 MG TABLET, 10-1,000 MG TABLET, 12.5-1,000 MG TAB)	P	HSA QPD 2 per day
SYNJARDY XR 25-1,000 MG TABLET	P	HSA QPD 1 per day
TRIJARDY XR (10-5-1,000 MG TAB, 25-5-1,000 MG TAB)	P	HSA QPD 1 per day
TRIJARDY XR (5-2.5-1,000 MG TAB, 12.5-2.5-1,000 MG)	P	HSA QPD 2 per day
XIGDUO XR (2.5 MG TAB, 5 MG TABLET)	P	HSA QPD 2 per day
XIGDUO XR (5 MG-500 MG TABLET, 10 MG-1,000 MG TAB, 10 MG-500 MG TABLET)	P	HSA QPD 1 per day
<b>SULFONYLUREAS</b>		
AMARYL	NP	HSA
<i>glimepiride (1 mg tablet, 2 mg tablet, 4 mg tablet)</i>	p	HSA
<i>glimepiride 3 mg tablet</i>	NP	HSA
<i>glipizide (5 mg tablet, 10 mg tablet)</i>	p	HSA
<i>glipizide 2.5 mg tablet</i>	NP	HSA
<i>glipizide er</i>	p	HSA
<i>glipizide xl</i>	p	HSA
<i>glipizide-metformin</i>	np	HSA
GLUCOTROL XL	NP	HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>glyburide</i>	p	HSA
<i>glyburide micronized</i>	NP	HSA
<i>glyburide-metformin hcl</i>	p	HSA
GLYNASE	NP	HSA
THIAZOLIDINEDIONES		
ACTOPLUS MET	NP	HSA
ACTOS	NP	HSA
DUETACT	NP	HSA
<i>pioglitazone hcl</i>	p	HSA
<i>pioglitazone-glimepiride</i>	np	HSA
<i>pioglitazone-metformin</i>	np	HSA
ANTIDOTE THERAPEUTICS		
ALCOHOL DETERRENTS (91:02)		
<i>acamprosate calcium</i>	np	
<i>disulfiram</i>	np	
ANTIDOTES (91:04)		
ACETAMINOPHEN ANTIDOTE		
<i>acetylcysteine (10% vial, 20% vial)</i>	np	HSA
CHEMOTHERAPY ANTIDOTES/PROTECTANTS		
ELMIRON	NP	
<i>leucovorin calcium (5 mg tab, 10 mg tab, 15 mg tab, 25 mg tab)</i>	np	
<i>mesna 400 mg tablet</i>	np	S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MESNEX 400 MG TABLET	P	S
FLUOROPYRIMIDINE ANTIDOTE		
VISTOGARD	NP	S
XURIDEN	NP	S
ANTIEMETICS		
5-HT3 RECEPTOR ANTAGONISTS		
ANZEMET	NP	QPD 0.234 per day
<i>granisetron hcl 1 mg tablet</i>	np	QPD 0.467 per day
<i>ondansetron hcl (4 mg/5 ml soln cup, 4 mg/5 ml solution)</i>	p	QPD 3.334 per day
<i>ondansetron hcl (4 mg tablet, 8 mg tablet)</i>	p	QL max 21 / 30 days
<i>ondansetron odt (odt 4 mg tablet, odt 8 mg tablet)</i>	p	QL max 21 / 30 days
<i>ondansetron odt 16 mg tablet</i>	NP	QPD 0.034 per day
SANCUSO	NP	QPD 0.067 per day
ANTIHISTAMINES (GI DRUGS)		
ANTIVERT 25 MG CHEWABLE TABLET	NP	
ANTIVERT 50 MG TABLET	NP	
BONJESTA	NP	PA QPD 2 per day
COMPRO	np	
DICLEGIS	NP	PA QPD 4 per day
<i>doxylamine succ-pyridoxine hcl</i>	np	PA QPD 4.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>meclizine 50 mg tablet</i>	NP	
<i>meclizine hcl (12.5 mg tablet, 25 mg tablet)</i>	p	
<i>prochlorperazine</i>	np	
<i>prochlorperazine maleate</i>	p	
<i>trimethobenzamide hcl</i>	p	
<b>NEUROKININ-1 RECEPTOR ANTAGONISTS</b>		
AKYNZEO 300-0.5 MG CAPSULE	NP	QPD 0.067 per day
<i>aprepitant 125-80-80 mg pack</i>	np	QPD 0.2 per day
<i>aprepitant 125 mg capsule</i>	np	QPD 0.067 per day
<i>aprepitant 40 mg capsule</i>	np	
<i>aprepitant 80 mg capsule</i>	np	QPD 0.134 per day
EMEND TRIPACK	NP	QPD 0.2 per day
EMEND 80 MG CAPSULE	NP	QPD 0.134 per day
EMEND 125 MG POWDER PACKET	P	QPD 0.2 per day
VARUBI	NP	S QPD 0.134 per day
<b>ANTIFUNGAL (SYSTEMIC)</b>		
<b>ANTIFUNGALS, MISCELLANEOUS</b>		
FULVICIN P-G	NP	
<i>griseofulvin (125 mg/5 ml susp, micro 500 mg tab)</i>	np	
<i>griseofulvin ultra 165 mg tab</i>	NP	
<i>griseofulvin ultramicrosize (125 mg tab, 250 mg tab)</i>	np	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>AZOLE ANTIFUNGALS</b>		
CRESEMBA (74.5 MG CAPSULE, 186 MG CAPSULE)	NP	
DIFLUCAN (10 MG/ML SUSPENSION, 40 MG/ML SUSPENSION, 100 MG TABLET, 150 MG TABLET, 200 MG TABLET)	NP	
<i>fluconazole (10 mg/ml susp, 40 mg/ml susp)</i>	np	
<i>fluconazole (50 mg tablet, 100 mg tablet, 150 mg tablet, 200 mg tablet)</i>	p	
<i>itraconazole (10 mg/ml solution, 100 mg capsule, 100 mg/10 ml cup)</i>	np	
NOXAFIL (40 MG/ML SUSPENSION, DR 100 MG TABLET)	NP	
NOXAFIL 300 MG POWDERMIX SUSP	P	
<i>posaconazole (dr 100 mg tablet, 200 mg/5 ml susp)</i>	np	
SPORANOX (10 MG/ML SOLUTION, 100 MG CAPSULE)	NP	
TOLSURA	NP	S
VFEND 40 MG/ML SUSPENSION	NP	S
VFEND (50 MG TABLET, 200 MG TABLET)	NP	
VIVJOA	NP	
<i>voriconazole 40 mg/ml susp</i>	np	S
<i>voriconazole (50 mg tablet, 200 mg tablet)</i>	np	
<b>PYRIMIDINE ANTIFUNGALS</b>		
ANCOBON	NP	
<i>flucytosine</i>	np	
<b>TRITERPENOIDS</b>		
BREXAFEMME	NP	



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIFUNGALS (SKIN AND MUCOUS MEMBRANE)		
ALLYLAMINES (SKIN AND MUCOUS MEMBRANE)		
<i>naftifine hcl 1% cream</i>	NP	
<i>naftifine hcl 2% cream</i>	np	
<i>naftifine hcl 2% gel</i>	np	
NAFTIN	NP	
<i>terbinafine hcl</i>	p	
AZOLES (SKIN AND MUCOUS MEMBRANE)		
<i>clotrimazole 1% topical cream</i>	p	
<i>clotrimazole 1% solution</i>	np	
<i>clotrimazole (10 mg lozenge, 10 mg troche)</i>	np	
<i>clotrimazole-betamethasone crm</i>	p	
<i>clotrimazole-betamethasone lot</i>	np	
<i>econazole nitrate</i>	np	
ECOZA	NP	
ERTACZO	NP	
EXELDERM (CREAM, SOLUTION)	NP	
EXTINA	NP	
GYNAZOLE 1	NP	
JUBLIA	NP	
<i>ketoconazole 2% foam</i>	np	
<i>ketoconazole 2% shampoo</i>	p	
<i>ketoconazole (2% cream, 200 mg tablet)</i>	np	
KETODAN 2% FOAM	np	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>luliconazole</i>	NP	
LUZU	NP	
<i>miconazole 3 200 mg vag supp</i>	NP	
<i>miconazole-zinc oxide-petroltm</i>	NP	
ORAVIG	NP	
<i>oxiconazole nitrate</i>	np	
OXISTAT	NP	
<i>sulconazole nitrate (cream, soln)</i>	NP	
<i>terconazole (0.4% cream, 0.8% cream, 80 mg suppository)</i>	np	
VUSION	NP	
XOLEGEL	NP	
BENZYLAMINES (SKIN AND MUCOUS MEMBRANE)		
MENTAX	NP	
HYDROXYPYRIDONES (SKIN, MUCOUS MEMBRANE)		
CICLODAN 8% SOLUTION	np	
<i>ciclopirox (0.77% cream, 0.77% gel, 0.77% topical susp, 1% shampoo, 8% solution)</i>	np	
LOPROX (0.77% CREAM, 0.77% TOPICAL SUSP, 1% SHAMPOO)	NP	
OXABOROLES		
KERYDIN	NP	
<i>tavaborole</i>	np	
POLYENES (SKIN AND MUCOUS MEMBRANE)		
KLAYESTA	np	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NYAMYC	np	
<i>nystatin (100,000 unit/gm cream, 100,000 unit/gm oint, 100,000 unit/ml susp, 500,000 unit/5 ml cup)</i>	p	
<i>nystatin (100,000 unit/gm powd, 500,000 unit oral tab)</i>	np	
NYSTOP	np	
<b>ANTIGLAUCOMA AGENTS</b>		
<b>ALPHA-ADRENERGIC AGONISTS (EENT)</b>		
ALPHAGAN P	NP	
<i>apraclonidine hcl</i>	NP	
<i>brimonidine 0.2% eye drop</i>	p	
<i>brimonidine tartrate (0.1% drop, 0.15% drp)</i>	np	
<i>brimonidine tartrate-timolol</i>	np	
COMBIGAN	NP	
IOPIDINE	NP	
<b>ANTIGLAUCOMA AGENTS, MISCELLANEOUS</b>		
MITOSOL	NP	
<b>BETA-ADRENERGIC BLOCKING AGENTS (EENT)</b>		
<i>betaxolol hcl 0.5% eye drop (sandoz)</i>	NP	
BETIMOL	NP	
BETOPTIC S	NP	
<i>carteolol hcl</i>	P	
COSOPT	NP	
COSOPT PF	NP	
<i>dorzolamide-timolol 2%-0.5%</i>	np	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>dorzolamide-timolol eye drops</i>	p	
ISTALOL	NP	
<i>levobunolol hcl</i>	P	
<i>timolol</i>	np	
<i>timolol maleate (0.25% gel-solution, 0.5% eye drop, 0.5% gel-solution, 0.5% gfs gel-solution, maleate 0.5% eye drop)</i>	np	
<i>timolol maleate (0.25% drop, 0.5% drops)</i>	p	
<i>timolol maleate 0.25% eye drop/pf</i>	np	
TIMOPTIC	NP	
TIMOPTIC OCUDOSE	NP	
TIMOPTIC-XE	NP	
<b>CARBONIC ANHYDRASE INHIBITORS (EENT)</b>		
<i>acetazolamide 125 mg tablet</i>	p	
<i>acetazolamide 250 mg tablet</i>	np	
<i>acetazolamide er</i>	np	
AZOPT	NP	
<i>brinzolamide</i>	np	
<i>dorzolamide hcl</i>	p	
<i>methazolamide</i>	np	
SIMBRINZA	P	
<b>MIOTICS</b>		
<i>pilocarpine hcl (1% drops, 2% drops, 4% drops)</i>	np	
VUITY	NP	QPD 0.167 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>PROSTAGLANDIN ANALOGS</b>		
<i>bimatoprost 0.03% eye drops</i>	np	QL max 2.5 per 30 days
IYUZEH	NP	QPD 1.0 per day
<i>latanoprost</i>	p	QL max 2.5 per 30 days
LUMIGAN	P	QL max 2.5 per 30 days
<i>tafluprost</i>	np	QPD 1.0 per day
TRAVATAN Z	NP	QL max 2.5 per 30 days
<i>travoprost</i>	np	QL max 2.5 per 30 days
VYZULTA	NP	QL max 2.5 per 30 days
XALATAN	NP	QL max 2.5 per 30 days
XELPROS	NP	QPD 0.084 per day
ZIOPTAN	NP	QPD 1 per day
<b>RHO KINASE INHIBITORS</b>		
RHOPRESSA	NP	QL max 2.5 per 30 days
ROCKLATAN	NP	QL max 2.5 per 30 days
<b>ANTIHEMORRHAGIC AGENTS</b>		
<b>HEMOSTATICS</b>		
ADVATE	P	S PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ADYNOVATE (200-400 UNIT VIAL, 401-800 UNIT VIAL, 801-1,250 UNIT VIAL, 1,251-2,500 UNIT VL)	NP	S PA
ADYNOVATE (750 UNIT VIAL, 1,500 UNIT VIAL, 3,000 UNIT VIAL)	NP	S PA
AFSTYLA (250 UNIT VIAL, 500 UNIT VIAL, 1,000 UNIT VIAL, 2,000 UNIT VIAL, 2,500 UNIT RANGE VIAL, 3,000 UNIT VIAL)	P	S PA
AFSTYLA 1,500 UNIT RANGE VIAL	P	S PA
ALPHANATE	NP	S PA
ALPHANINE SD	NP	S PA
ALPROLIX	NP	S PA
ALTUVIIIIO	P	S PA
AMICAR (0.25 GRAM/ML ORAL SOLN, 500 MG TABLET, 1,000 MG TABLET)	NP	
<i>aminocaproic acid (0.25 gram/ml, 500 mg tab, 1,000 mg tab)</i>	np	
BENEFIX	P	S PA
COAGADEX	P	S
CORIFACT	P	S
ELOCTATE	P	S PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ESPEROCT (500 UNIT VIAL, 1,000 UNIT VIAL, 1,500 UNIT VIAL, 2,000 UNIT VIAL, 3,000 UNIT VIAL)	P	S PA
ESPEROCT 4,000 UNIT VIAL	P	S PA
FEIBA	P	S
FIBRYGA	NP	S
HEMLIBRA (12 MG/0.4 ML VIAL, 300 MG/2 ML VIAL)	NP	S PA QPD 0.143 per day
HEMLIBRA (30 MG/ML VIAL, 60 MG/0.4 ML VIAL, 105 MG/0.7 ML VIAL, 150 MG/ML VIAL)	NP	S PA QPD 0.143 per day
HEMOFIL M	NP	S PA
HUMATE-P	P	S PA
IDELVION	NP	S PA
IXINITY	NP	S PA
JIVI	P	S PA
KOATE (250 UNIT VIAL, 500 UNIT VIAL)	NP	S PA
KOATE 1,000 UNIT VIAL	NP	S PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KOGENATE FS	P	S PA
KOVALTRY	P	S PA
NOVOEIGHT	P	S PA
NOVOSEVEN RT	P	S PA
NUWIQ	NP	S PA
OBIZUR	P	S
PROFILNINE	NP	S PA
REBINYN	NP	S PA
RECOMBINATE	NP	S PA
RIASTAP	NP	S
RIXUBIS	NP	S PA
SEVENFACT (1 MG VIAL, 5 MG VIAL)	NP	S PA
SEVENFACT 2 MG VIAL	NP	S PA
<i>tranexamic acid 650 mg tablet</i>	np	



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRETTEN	P	S
VONVENDI	P	S PA
WILATE	NP	S PA
XYNTHA (250 UNIT KIT, 500 UNIT KIT, 1,000 UNIT KIT, 2,000 UNIT KIT)	NP	S PA
XYNTHA 2,000 UNIT VIAL	NP	S PA
XYNTHA SOLOFUSE (250 UNIT KIT, 500 UNIT KIT, 1,000 UNIT KIT, 2,000 UNIT KIT, 3,000 UNIT KIT)	NP	S PA
XYNTHA SOLOFUSE (250 UNIT SYR, 500 UNIT SYR, 1,000 UNIT SYR, 2,000 UNIT SYR, 3,000 UNIT SYR)	NP	S PA
<b>ANTIHISTAMINE DRUGS</b>		
<b>FIRST GENERATION ANTIHISTAMINES</b>		
<i>carbinoxamine 4 mg/5 ml liquid</i>	NP	
<i>carbinoxamine maleate 4 mg tab</i>	np	
<i>carbinoxamine maleate 6 mg tab</i>	NP	
<i>carbinoxamine maleate er</i>	NP	
KARBINAL ER	NP	
RYVENT	NP	
<b>SECOND GENERATION ANTIHISTAMINES</b>		
<i>cetirizine hcl (1 mg/ml soln, 1 mg/ml syrup)</i>	p	
CLARINEX	NP	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CLARINEX-D 12 HOUR	NP	
<i>desloratadine 5 mg tablet</i>	p	
<i>desloratadine (2.5 mg odt, 5 mg odt)</i>	P	
<i>levocetirizine 2.5 mg/5 ml sol</i>	np	
<i>levocetirizine 5 mg tablet</i>	p	
ANTIHYPOLYCEMIC AGENTS		
ANTIHYPOLYCEMIC AGENTS, MISCELLANEOUS		
<i>diazoxide</i>	np	
PROGLYCEM	NP	
GLYCOGENOLYTIC AGENTS		
BAQSIMI	P	HSA
GLUCAGEN 1 MG HYPOKIT	NP	HSA
GLUCAGON 1 MG EMERGENCY KIT (AMPHASTAR)	np	HSA
GLUCAGON 1 MG EMERGENCY KIT (FRESENIUS)	P	HSA
GLUCAGON 1 MG EMERGENCY KIT (LILLY)	NP	HSA
GLUCAGON 1 MG EMERGENCY KIT	np	HSA
GVOKE	P	HSA
GVOKE HYPOPEN 1-PACK	P	HSA
GVOKE HYPOPEN 2-PACK	P	HSA
GVOKE PFS 1-PACK SYRINGE	P	HSA
GVOKE PFS 2-PACK SYRINGE	P	HSA
ZEGALOGUE AUTOINJECTOR	P	HSA
ZEGALOGUE SYRINGE	P	HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>ANTILIPEMIC AGENTS</b>		
<b>ACL INHIBITORS</b>		
NEXLETOL	P	HSA PA QPD 1 per day
NEXLIZET	P	HSA PA QPD 1 per day
<b>ANTILIPEMIC AGENTS, MISCELLANEOUS</b>		
<i>niacin 500 mg tablet</i>	NP	HSA
<i>niacin er</i>	np	HSA
NIACOR	NP	HSA
<b>BILE ACID SEQUESTRANTS</b>		
<i>cholestyramine (packet, powder)</i>	np	HSA
<i>cholestyramine light (packet, powder)</i>	np	HSA
<i>colesevelam hcl (hcl 3.75 g packet, 625 mg tablet)</i>	np	HSA
COLESTID (1 GM TABLET, FLAVORED GRANULES, GRANULES, GRANULES PACKET)	NP	HSA
<i>colestipol hcl (1 gm tablet, granules, granules packet)</i>	np	HSA
PREVALITE (PACKET, POWDER)	np	HSA
QUESTRAN (PACKET, POWDER)	NP	HSA
QUESTRAN LIGHT	NP	HSA
WELCHOL (3.75G PACKET, 625 MG TABLET)	NP	HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>CHOLESTEROL ABSORPTION INHIBITORS</b>		
<i>ezetimibe</i>	p	HSA
<i>ezetimibe-atorvastatin calcium</i>	NP	ST HSA QPD 1 per day
<i>ezetimibe-simvastatin</i>	np	HSA QPD 1 per day
<i>rosuvastatin-ezetimibe</i>	NP	ST HSA QPD 1 per day
ROSZET	NP	ST HSA QPD 1 per day
VYTORIN	NP	ST HSA QPD 1 per day
ZETIA	NP	HSA
<b>FIBRIC ACID DERIVATIVES</b>		
<i>fenofibrate (43 mg capsule, 130 mg capsule)</i>	np	HSA
<i>fenofibrate (50 mg capsule, 150 mg capsule)</i>	NP	HSA
<i>fenofibrate 90 mg capsule</i>	NP	HSA
<i>fenofibrate (40 mg tablet, 120 mg tablet)</i>	np	HSA
<i>fenofibrate (48 mg tablet, 54 mg tablet, 67 mg capsule, 134 mg capsule, 145 mg tablet, 160 mg tablet, 200 mg capsule)</i>	p	HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>fenofibric acid dr 135 mg cap</i>	np	HSA
<i>fenofibric acid dr 45 mg cap</i>	p	HSA
<i>fenofibric acid (35 mg tablet, 105 mg tablet)</i>	NP	HSA
FENOGLIDE	NP	HSA
FIBRICOR	NP	HSA
<i>gemfibrozil</i>	p	HSA
LIPOFEN	NP	HSA
LOPID	NP	HSA
TRICOR	NP	HSA
TRILIPIX	NP	HSA
<b>HMG-COA REDUCTASE INHIBITORS</b>		
ALTOPREV	NP	ST HSA QPD 1 per day
<i>amlodipine-atorvastatin</i>	np	HSA
ATORVALIQ	NP	ST HSA QPD 20 per day
<i>atorvastatin 40 mg tablet</i>	p	HSA QPD 1.5 per day
<i>atorvastatin 80 mg tablet</i>	p	HSA QPD 1.0 per day
<i>atorvastatin calcium (10 mg tablet, 20 mg tablet)</i>	p	C [ACA] Age Edits Apply: 40-75 years HSA ACA QPD 1.5 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CADUET	NP	HSA
CRESTOR (5 MG TABLET, 10 MG TABLET, 20 MG TABLET)	NP	ST
		HSA QPD 1.5 per day
CRESTOR 40 MG TABLET	NP	ST
		HSA QPD 1 per day
EZALLOR SPRINKLE	NP	ST
		HSA QPD 1 per day
FLOLIPID 20 MG/5 ML ORAL SUSP	NP	ST
		HSA QPD 5 per day
FLOLIPID 40 MG/5 ML ORAL SUSP	NP	ST
		HSA QPD 10 per day
<i>fluvastatin er</i>	np	HSA QPD 1 per day
<i>fluvastatin sodium</i>	np	HSA QPD 2 per day
LESCOL XL	NP	ST
		HSA QPD 1.0 per day
LIPITOR (10 MG TABLET, 20 MG TABLET, 40 MG TABLET)	NP	ST
		HSA QPD 1.5 per day
LIPITOR 80 MG TABLET	NP	ST
		HSA QPD 1.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LIVALO (1 MG TABLET, 2 MG TABLET)	NP	<p>ST</p> <p>HSA</p> <p>QPD 1.5 per day</p>
LIVALO 4 MG TABLET	NP	<p>ST</p> <p>HSA</p> <p>QPD 1 per day</p>
<i>lovastatin</i>	p	<p>C [ACA] Age Edits Apply: 40-75 years</p> <p>HSA</p> <p>ACA</p> <p>QPD 2 per day</p>
<i>pitavastatin 4 mg tablet</i>	np	<p>HSA</p> <p>QPD 1.0 per day</p>
<i>pitavastatin calcium (1 mg tablet, 2 mg tablet)</i>	np	<p>HSA</p> <p>QPD 1.5 per day</p>
<i>pravastatin sodium (10 mg tab, 20 mg tab, 40 mg tab)</i>	p	<p>C [ACA] Age Edits Apply: 40-75 years</p> <p>HSA</p> <p>ACA</p> <p>QPD 1.5 per day</p>
<i>pravastatin sodium 80 mg tab</i>	p	<p>C [ACA] Age Edits Apply: 40-75 years</p> <p>HSA</p> <p>ACA</p> <p>QPD 1.0 per day</p>
<i>rosuvastatin calcium (5 mg tab, 10 mg tab, 20 mg tab)</i>	p	<p>C [ACA] Age Edits Apply: 40-75 years</p> <p>HSA</p> <p>ACA</p> <p>QPD 1.5 per day</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>rosuvastatin calcium 40 mg tab</i>	p	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #333; color: white; padding: 5px; margin-bottom: 5px;">C</div> <div style="font-size: 0.8em; margin-bottom: 5px;">[ACA] Age Edits Apply: 40-75 years</div> <div style="background-color: #003366; color: white; padding: 5px; margin-bottom: 5px;">HSA</div> <div style="background-color: #0099cc; color: white; padding: 5px; margin-bottom: 5px;">ACA</div> <div style="background-color: #0066b3; color: white; padding: 5px; margin-bottom: 5px;">QPD</div> <div style="margin-top: 5px;">1.0 per day</div> </div>
<i>simvastatin (5 mg tablet, 10 mg tablet, 40 mg tablet)</i>	p	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #333; color: white; padding: 5px; margin-bottom: 5px;">C</div> <div style="font-size: 0.8em; margin-bottom: 5px;">[ACA] Age Edits Apply: 40-75 years</div> <div style="background-color: #003366; color: white; padding: 5px; margin-bottom: 5px;">HSA</div> <div style="background-color: #0099cc; color: white; padding: 5px; margin-bottom: 5px;">ACA</div> <div style="background-color: #0066b3; color: white; padding: 5px; margin-bottom: 5px;">QPD</div> <div style="margin-top: 5px;">1.5 per day</div> </div>
<i>simvastatin 20 mg tablet</i>	p	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #333; color: white; padding: 5px; margin-bottom: 5px;">C</div> <div style="font-size: 0.8em; margin-bottom: 5px;">[ACA] Age Edits Apply: 40-75 years</div> <div style="background-color: #003366; color: white; padding: 5px; margin-bottom: 5px;">HSA</div> <div style="background-color: #0099cc; color: white; padding: 5px; margin-bottom: 5px;">ACA</div> <div style="background-color: #0066b3; color: white; padding: 5px; margin-bottom: 5px;">QPD</div> <div style="margin-top: 5px;">2 per day</div> </div>
<i>simvastatin 80 mg tablet</i>	p	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #003366; color: white; padding: 5px; margin-bottom: 5px;">HSA</div> <div style="background-color: #0066b3; color: white; padding: 5px; margin-bottom: 5px;">QPD</div> <div style="margin-top: 5px;">1 per day</div> </div>
ZOCOR (10 MG TABLET, 40 MG TABLET)	NP	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #666; color: white; padding: 5px; margin-bottom: 5px;">ST</div> <div style="background-color: #003366; color: white; padding: 5px; margin-bottom: 5px;">HSA</div> <div style="background-color: #0066b3; color: white; padding: 5px; margin-bottom: 5px;">QPD</div> <div style="margin-top: 5px;">1.5 per day</div> </div>
ZOCOR 20 MG TABLET	NP	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #666; color: white; padding: 5px; margin-bottom: 5px;">ST</div> <div style="background-color: #003366; color: white; padding: 5px; margin-bottom: 5px;">HSA</div> <div style="background-color: #0066b3; color: white; padding: 5px; margin-bottom: 5px;">QPD</div> <div style="margin-top: 5px;">2 per day</div> </div>
ZYPITAMAG 2 MG TABLET	NP	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #666; color: white; padding: 5px; margin-bottom: 5px;">ST</div> <div style="background-color: #003366; color: white; padding: 5px; margin-bottom: 5px;">HSA</div> <div style="background-color: #0066b3; color: white; padding: 5px; margin-bottom: 5px;">QPD</div> <div style="margin-top: 5px;">1.5 per day</div> </div>
ZYPITAMAG 4 MG TABLET	NP	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #666; color: white; padding: 5px; margin-bottom: 5px;">ST</div> <div style="background-color: #003366; color: white; padding: 5px; margin-bottom: 5px;">HSA</div> <div style="background-color: #0066b3; color: white; padding: 5px; margin-bottom: 5px;">QPD</div> <div style="margin-top: 5px;">1 per day</div> </div>



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>MTP PROTEIN INHIBITORS</b>		
JUXTAPID (20 MG CAPSULE, 30 MG CAPSULE)	NP	S PA QPD 2.0 per day
JUXTAPID (5 MG CAPSULE, 10 MG CAPSULE)	NP	S PA QPD 1.0 per day
<b>OMEGA-3-MEDIATED ANTILIPEMICS</b>		
<i>icosapent ethyl 0.5 gm capsule</i>	np	HSA PA QPD 8.0 per day
<i>icosapent ethyl 1 gram capsule</i>	np	HSA PA QPD 4.0 per day
<i>icosapent ethyl 500 mg capsule</i>	np	HSA PA QPD 8 per day
LOVAZA	NP	HSA
<i>omega-3 acid ethyl esters</i>	np	HSA
VASCEPA 0.5 GM CAPSULE	NP	HSA PA QPD 8 per day
VASCEPA 1 GM CAPSULE	NP	HSA PA QPD 4 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>PCSK9 INHIBITORS</b>		
PRALUENT PEN	NP	S HSA PA QPD 0.072 per day
REPATHA PUSHTRONEX	P	S HSA PA QPD 0.25 per day
REPATHA SURECLICK	P	S HSA PA QPD 0.215 per day
REPATHA SYRINGE	P	S HSA PA QPD 0.215 per day
<b>ANTIMETABOLITES, IMMUNOSUPPRESS THERAPY</b>		
<b>ANTIMETABOLITES, IMMUNOSUPP THERAPY MISC</b>		
AZASAN	np	HSA
<i>azathioprine</i>	np	HSA
CELLCEPT (200 MG/ML ORAL SUSP, 250 MG CAPSULE, 500 MG TABLET)	NP	S HSA
IMURAN	NP	HSA
<i>mycophenolate mofetil (200 mg/ml susp, 250 mg capsule, 500 mg tablet)</i>	np	S HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>mycophenolic acid</i>	np	S HSA
MYFORTIC	NP	S HSA
MYHIBBIN	P	S HSA
ANTIMIGRAINE AGENTS CALCITONIN GENE-RELATED PEPTIDE ANTAG.		
AIMOVIG AUTOINJECTOR	P	PA QPD 0.036 per day
AJOVY AUTOINJECTOR	P	QL MAX 4.5 / 84 DAYS PA
AJOVY SYRINGE	P	QL MAX 4.5 / 84 DAYS PA
EMGALITY PEN	P	PA QPD 0.036 per day
EMGALITY 120 MG/ML SYRINGE	P	PA QPD 0.036 per day
EMGALITY SYRINGE (100 MG/ML SYR(1 OF 3), 300 MG (100 MG X3SYR))	P	QL MAX 9 / 180 DAYS PA
NURTEC ODT	P	PA QPD 0.534 per day
QULIPTA	P	PA QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
UBRELVY	P	PA QPD 0.534 per day
ZAVZPRET	NP	PA QPD 0.267 per day
SELECTIVE SEROTONIN AGONISTS		
<i>almotriptan malate</i>	np	ST QPD 0.4 per day
<i>eletriptan hbr</i>	np	QPD 0.4 per day
FROVA	NP	ST QPD 0.6 per day
<i>frovatriptan succinate</i>	np	ST QPD 0.6 per day
IMITREX (4 MG/0.5 ML, 6 MG/0.5 ML)	NP	ST QPD 0.2 per day
IMITREX (4 MG/0.5 ML PEN, 6 MG/0.5 ML PEN)	NP	ST QPD 0.2 per day
IMITREX (5 MG NASAL SPRAY, 20 MG NASAL SPRAY)	NP	ST QPD 0.4 per day
IMITREX (25 MG TABLET, 50 MG TABLET, 100 MG TABLET)	NP	ST QPD 0.6 per day
IMITREX 6 MG/0.5 ML VIAL	NP	ST QPD 0.167 per day
MAXALT	NP	ST QPD 0.6 per day
MAXALT MLT	NP	ST QPD 0.6 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>naratriptan hcl</i>	np	QPD 0.6 per day
ONZETRA XSAIL	NP	ST QPD 1.067 per day
RELPAK	NP	ST QPD 0.4 per day
REYVOW	P	QL max 8 / 30 days PA
<i>rizatriptan (5 mg odt, 5 mg tablet, 10 mg odt, 10 mg tablet)</i>	p	QPD 0.6 per day
<i>sumatriptan</i>	np	QPD 0.4 per day
<i>sumatriptan succ-naproxen sod</i>	np	ST QPD 0.6 per day
<i>sumatriptan succinate (4 mg/0.5 ml cart, 6 mg/0.5 ml cart)</i>	NP	ST QPD 0.2 per day
<i>sumatriptan succinate (4 mg/0.5 ml inject, 6 mg/0.5ml autoinj)</i>	np	QPD 0.2 per day
<i>sumatriptan 6 mg/0.5 ml syrng</i>	NP	QPD 0.2 per day
<i>sumatriptan succinate (25 mg tablet, 50 mg tablet, 100 mg tablet)</i>	p	QPD 0.6 per day
<i>sumatriptan 6 mg/0.5 ml vial</i>	np	QPD 0.167 per day
TOSYMRA	NP	ST QPD 0.6 per day
TREXIMET	NP	ST QPD 0.6 per day
ZEMBRACE SYMTOUCH	NP	ST QPD 0.4 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>zolmitriptan 2.5mg nasal spray</i>	NP	ST QPD 0.4 per day
<i>zolmitriptan 5 mg nasal spray</i>	np	ST QPD 0.4 per day
<i>zolmitriptan (2.5 mg tablet, 5 mg tablet)</i>	np	QPD 0.4 per day
<i>zolmitriptan odt</i>	np	QPD 0.4 per day
ZOMIG 5 MG NASAL SPRAY	NP	ST QPD 0.4 per day
ZOMIG (2.5 MG NASAL SPRAY, 2.5 MG TABLET, 5 MG TABLET)	NP	ST QPD 0.4 per day
ANTIMYCOBACTERIALS		
ANTILEPROSY AGENTS		
<i>dapsone (25 mg tablet, 100 mg tablet)</i>	np	
ANTITUBERCULOSIS AGENTS		
<i>cycloserine</i>	np	
<i>ethambutol hcl 100 mg tablet</i>	p	
<i>ethambutol hcl 400 mg tablet</i>	np	
<i>isoniazid (50 mg/5 ml solution, 100 mg tablet)</i>	np	
<i>isoniazid 300 mg tablet</i>	p	
MYAMBUTOL	NP	
MYCOBUTIN	NP	
PASER	NP	
<i>pretomanid</i>	NP	
PRIFTIN	P	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>pyrazinamide</i>	np	
<i>rifabutin</i>	np	
<i>rifampin (150 mg capsule, 300 mg capsule)</i>	np	
SIRTURO	NP	S
TRECTOR	NP	
<b>ANTINEOPLASTIC AGENTS</b>		
<i>abiraterone acetate 250 mg tab</i>	np	S PA QPD 4.0 per day
<i>abiraterone acetate 500 mg tab</i>	np	S PA QPD 2.0 per day
ABIRTEGA	np	S PA QPD 4.0 per day
AFINITOR	NP	S PA QPD 1 per day
AFINITOR DISPERZ (2 MG TABLET, 5 MG TABLET)	NP	S PA QPD 2 per day
AFINITOR DISPERZ 3 MG TABLET	NP	S PA QPD 3 per day
AKEEGA	NP	S PA QPD 2.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ALECENSA	P	S PA QPD 8 per day
ALKERAN 2 MG TABLET	NP	
ALUNBRIG 90 MG-180 MG TAB PACK	P	QL MAX 30 / 180 DAYS S PA
ALUNBRIG 180 MG TABLET	P	S PA QPD 1 per day
ALUNBRIG 30 MG TABLET	P	S PA QPD 4 per day
ALUNBRIG 90 MG TABLET	P	S PA QPD 1 per day
<i>anastrozole</i>	p	C [ACA] Age Edits Apply: 35+ years ACA
ARIMIDEX	NP	C [ACA] Age Edits Apply: 35+ years ACA
AROMASIN	NP	
AUGTYRO 160 MG CAPSULE	NP	S PA QPD 2.0 per day



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AUGTYRO 40 MG CAPSULE	NP	S PA QPD 8.0 per day
AYVAKIT	P	S PA QPD 1 per day
BALVERSA 3 MG TABLET	NP	S PA QPD 3 per day
BALVERSA 4 MG TABLET	NP	S PA QPD 2 per day
BALVERSA 5 MG TABLET	NP	S PA QPD 1 per day
BESREMI	NP	S PA QPD 0.072 per day
<i>bexarotene 75 mg capsule</i>	np	S PA
<i>bicalutamide</i>	p	
BOSULIF 100 MG CAPSULE	P	S PA QPD 5.0 per day
BOSULIF 50 MG CAPSULE	P	S PA QPD 1.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BOSULIF (400 MG TABLET, 500 MG TABLET)	P	S PA QPD 1 per day
BOSULIF 100 MG TABLET	P	S PA QPD 3 per day
BRAFTOVI	NP	S PA QPD 6 per day
BRUKINSA	P	S PA QPD 4 per day
CABOMETYX	P	S PA QPD 1.0 per day
CALQUENCE	P	S PA QPD 2 per day
<i>capecitabine</i>	np	S PA
CAPRELSA 100 MG TABLET	P	S PA QPD 2 per day
CAPRELSA 300 MG TABLET	P	S PA QPD 1 per day
CASODEX	NP	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COMETRIQ 100 MG DAILY-DOSE PK	P	S PA QPD 2 per day
COMETRIQ 140 MG DAILY-DOSE PK	P	S PA QPD 4 per day
COMETRIQ 60 MG DAILY-DOSE PACK	P	S PA QPD 3 per day
COPIKTRA	NP	S PA QPD 2 per day
COTELLIC	P	S PA QPD 2.25 per day
<i>cyclophosphamide (25 mg capsule, 25 mg tablet, 50 mg tablet)</i>	NP	
<i>cyclophosphamide 50 mg capsule</i>	np	
<i>cyclophosphamide 50 mg capsule (west-ward/hikma)</i>	NP	
<i>dasatinib (50 mg tablet, 70 mg tablet, 80 mg tablet, 100 mg tablet, 140 mg tablet)</i>	np	S PA QPD 1.0 per day
<i>dasatinib 20 mg tablet</i>	np	S PA QPD 3.0 per day
DAURISMO 100 MG TABLET	NP	S PA QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DAURISMO 25 MG TABLET	NP	S PA QPD 2 per day
DROXIA	NP	
EMCYT	P	S
ERIVEDGE	P	S PA QPD 1 per day
ERLEADA 240 MG TABLET	P	S PA QPD 1 per day
ERLEADA 60 MG TABLET	P	S PA QPD 4 per day
<i>erlotinib hcl (100 mg tablet, 150 mg tablet)</i>	np	S PA QPD 1.0 per day
<i>erlotinib hcl 25 mg tablet</i>	np	S PA QPD 2.0 per day
<i>etoposide 50 mg capsule</i>	P	S
EULEXIN	NP	
<i>everolimus (0.25 mg tablet, 0.5 mg tablet, 0.75 mg tablet, 1 mg tablet)</i>	np	S HSA
<i>everolimus (2.5 mg tablet, 5 mg tablet, 7.5 mg tablet, 10 mg tablet)</i>	np	S PA QPD 1.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>everolimus (2 mg tab susp, 5 mg tab susp)</i>	np	S PA QPD 2.0 per day
<i>everolimus 3 mg tab for susp</i>	np	S PA QPD 3.0 per day
<i>exemestane</i>	np	
FEMARA	NP	
FOTIVDA	NP	S PA QPD 0.75 per day
FRUZAQLA 1 MG CAPSULE	NP	S PA QPD 3.0 per day
FRUZAQLA 5 MG CAPSULE	NP	S PA QPD 0.75 per day
GAVRETO	NP	S PA QPD 4.0 per day
<i>gefitinib</i>	np	S PA QPD 1.0 per day
GILOTRIF	P	S PA QPD 1 per day
GLEEVEC 100 MG TABLET	NP	S PA QPD 3 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GLEEVEC 400 MG TABLET	NP	S PA QPD 2.0 per day
GLEOSTINE	P	QL max 42 days / fill S
HYCAMTIN (0.25 MG CAPSULE, 1 MG CAPSULE)	P	S PA
HYDREA	NP	
<i>hydroxyurea</i>	np	
IBRANCE (75 MG CAPSULE, 75 MG TABLET, 100 MG CAPSULE, 100 MG TABLET, 125 MG CAPSULE, 125 MG TABLET)	P	S PA QPD 0.75 per day
ICLUSIG	P	S PA QPD 1 per day
IDHIFA	NP	S PA QPD 1 per day
<i>imatinib mesylate 100 mg tab</i>	np	S PA QPD 3.0 per day
<i>imatinib mesylate 400 mg tab</i>	np	S PA QPD 2.0 per day
IMBRUVICA 140 MG CAPSULE	P	S PA QPD 3 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
IMBRUVICA 70 MG/ML SUSPENSION	P	S PA QPD 7.2 per day
IMBRUVICA (70 MG CAPSULE, 140 MG TABLET, 280 MG TABLET, 420 MG TABLET, 560 MG TABLET)	P	S PA QPD 1 per day
INLYTA 1 MG TABLET	P	S PA QPD 6 per day
INLYTA 5 MG TABLET	P	S PA QPD 4 per day
INQOVI	NP	QL max 5 / 28 days S PA
INREBIC	NP	S PA QPD 4 per day
IRESSA	NP	S PA QPD 1 per day
IWILFIN	NP	S PA QPD 8.0 per day
JAKAFI	P	S PA QPD 2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
JAYPIRCA 100 MG TABLET	NP	S PA QPD 2 per day
JAYPIRCA 50 MG TABLET	NP	S PA QPD 1 per day
JYLAMVO	NP	PA QPD 6.429 per day
KISQALI 200 MG DAILY DOSE	P	S PA QPD 0.75 per day
KISQALI 400 MG DAILY DOSE	P	S PA QPD 1.5 per day
KISQALI 600 MG DAILY DOSE	P	S PA QPD 2.25 per day
KISQALI FEMARA 200 MG CO-PACK	P	S PA QPD 1.75 per day
KISQALI FEMARA 400 MG CO-PACK	P	S PA QPD 2.5 per day
KISQALI FEMARA 600 MG CO-PACK	P	S PA QPD 3.25 per day
KOSELUGO 10 MG CAPSULE	NP	S PA QPD 8 per day



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KOSELUGO 25 MG CAPSULE	NP	S PA QPD 4 per day
KRAZATI	NP	S PA QPD 6 per day
<i>lapatinib</i>	np	S PA QPD 6.0 per day
<i>lenalidomide (15 mg capsule, 20 mg capsule, 25 mg capsule)</i>	np	S PA QPD 0.75 per day
<i>lenalidomide (2.5 mg capsule, 5 mg capsule, 10 mg capsule)</i>	np	S PA QPD 1.0 per day
LENVIMA (12 MG DAILY, 18 MG DAILY, 24 MG DAILY)	P	S PA QPD 3 per day
LENVIMA (4 MG CAPSULE, 10 MG DAILY DOSE)	P	S PA QPD 1 per day
LENVIMA (8 MG DAILY, 14 MG DAILY, 20 MG DAILY)	P	S PA QPD 2 per day
<i>letrozole</i>	p	
LEUKERAN	P	S
LONSURF 15 MG-6.14 MG TABLET	P	S PA QPD 2.143 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LONSURF 20 MG-8.19 MG TABLET	P	S PA QPD 2.858 per day
LORBRENA 100 MG TABLET	NP	S PA QPD 1 per day
LORBRENA 25 MG TABLET	NP	S PA QPD 3.0 per day
LUMAKRAS 120 MG TABLET	NP	S PA QPD 8.0 per day
LUMAKRAS 240 MG TABLET	NP	S PA QPD 4.0 per day
LUMAKRAS 320 MG TABLET	NP	S PA QPD 3 per day
LYNPARZA	P	S PA QPD 4 per day
LYSODREN	P	S PA
LYTGOBI 12 MG DOSE (3X 4MG TB)	NP	S PA QPD 3 per day
LYTGOBI 16 MG DOSE (4X 4MG TB)	NP	S PA QPD 4 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LYTGOBI 20 MG DOSE (5X 4MG TB)	NP	S PA QPD 5 per day
MATULANE	P	S PA
MEKINIST 0.05 MG/ML SOLUTION	P	S PA QPD 41.8 per day
MEKINIST 0.5 MG TABLET	P	S PA QPD 3 per day
MEKINIST 2 MG TABLET	P	S PA QPD 1 per day
MEKTOVI	NP	S PA QPD 6 per day
<i>melphalan</i>	P	
<i>mercaptopurine 20 mg/ml suspen</i>	np	S
<i>mercaptopurine 50 mg tablet</i>	np	
<i>methotrexate (2.5 mg tablet, 50 mg/2 ml vial)</i>	p	
<i>methotrexate 1 gm vial</i>	np	
<i>methotrexate 250 mg/10 ml vial (ndc: 63323012310)</i>	P	
<i>methotrexate 1 gram/40 ml vial</i>	np	
<i>methotrexate sodium (25 mg/ml vial, 250 mg/10 ml vial)</i>	p	
MYLERAN	P	S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NERLYNX	NP	S PA QPD 6 per day
NEXAVAR	NP	S PA QPD 4.0 per day
NILANDRON	NP	S
<i>nilutamide</i>	np	S
NINLARO	P	S PA QPD 0.108 per day
NUBEQA	P	S PA QPD 4 per day
ODOMZO	P	S PA QPD 1 per day
OGSIVEO (100 MG TABLET, 150 MG TABLET)	NP	S PA QPD 2.0 per day
OGSIVEO 50 MG TABLET	NP	S PA QPD 6.0 per day
OJEMDA 25 MG/ML ORAL SUSP	NP	S PA QPD 3.43 per day
OJEMDA (100 MG TAB (400MG), 100 MG TAB (500MG), 100 MG TAB (600MG))	NP	S PA QPD 0.858 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OJJAARA	NP	S PA QPD 1.0 per day
ONUREG	NP	S PA QPD 0.5 per day
ORSERDU 345 MG TABLET	NP	S PA QPD 1 per day
ORSERDU 86 MG TABLET	NP	S PA QPD 3 per day
OTREXUP	P	ST
<i>pazopanib hcl</i>	np	S PA QPD 4.0 per day
PEMAZYRE	NP	S PA QPD 0.667 per day
PIQRAY (250 MG DAILY PACK, 300 MG DAILY PACK)	P	S PA QPD 2 per day
PIQRAY 200 MG DAILY DOSE PACK	P	S PA QPD 1 per day
POMALYST	P	S PA QPD 0.75 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PURIXAN	P	S
QINLOCK	NP	S PA QPD 3 per day
RASUVO	NP	ST
RETEVMO 40 MG CAPSULE	P	S PA QPD 6 per day
RETEVMO 80 MG CAPSULE	P	S PA QPD 4 per day
RETEVMO (80 MG TABLET, 120 MG TABLET, 160 MG TABLET)	P	S PA QPD 2.0 per day
RETEVMO 40 MG TABLET	P	S PA QPD 3.0 per day
REVLIMID (15 MG CAPSULE, 20 MG CAPSULE, 25 MG CAPSULE)	P	S PA QPD 0.75 per day
REVLIMID (2.5 MG CAPSULE, 5 MG CAPSULE, 10 MG CAPSULE)	P	S PA QPD 1 per day
REZLIDHIA	NP	S PA QPD 2 per day
ROZLYTREK 100 MG CAPSULE	P	S PA QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ROZLYTREK 200 MG CAPSULE	P	S PA QPD 3 per day
ROZLYTREK 50 MG PELLETT PACKET	P	S PA QPD 12.0 per day
RUBRACA	P	S PA QPD 4.0 per day
RYDAPT	P	S PA QPD 8 per day
SCEMBLIX 100 MG TABLET	NP	S PA QPD 4.0 per day
SCEMBLIX 20 MG TABLET	NP	S PA QPD 2 per day
SCEMBLIX 40 MG TABLET	NP	S PA QPD 8.0 per day
SIKLOS	NP	S
<i>sorafenib</i>	np	S PA QPD 4.0 per day
SPRYCEL (50 MG TABLET, 70 MG TABLET, 80 MG TABLET, 100 MG TABLET, 140 MG TABLET)	P	S PA QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SPRYCEL 20 MG TABLET	P	S PA QPD 3 per day
STIVARGA	P	S PA QPD 3 per day
<i>sunitinib malate (25 mg capsule, 37.5 mg cap, 50 mg capsule)</i>	np	S PA QPD 1.0 per day
<i>sunitinib malate 12.5 mg cap</i>	np	S PA QPD 3.0 per day
SUTENT (25 MG CAPSULE, 37.5 MG CAPSULE, 50 MG CAPSULE)	NP	S PA QPD 1 per day
SUTENT 12.5 MG CAPSULE	NP	S PA QPD 3 per day
SYNRIBO	P	S
TABLOID	P	S
TABRECTA	P	S PA QPD 4 per day
TAFINLAR (50 MG CAPSULE, 75 MG CAPSULE)	P	S PA QPD 4 per day
TAFINLAR 10 MG TABLET FOR SUSP	P	S PA QPD 30.0 per day



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TAGRISSO	P	S PA QPD 1 per day
TALZENNA (0.1 MG CAPSULE, 0.1 MG SOFTGEL, 0.35 MG CAPSULE, 0.35 MG SOFTGEL, 0.5 MG SOFTGEL, 0.75 MG SOFTGEL, 1 MG SOFTGEL)	P	S PA QPD 1.0 per day
TALZENNA (0.5 MG CAPSULE, 0.75 MG CAPSULE, 1 MG CAPSULE)	P	S PA QPD 1 per day
TALZENNA 0.25 MG CAPSULE	P	S PA QPD 3 per day
TALZENNA 0.25 MG SOFTGEL	P	S PA QPD 3.0 per day
TARCEVA (100 MG TABLET, 150 MG TABLET)	NP	S PA QPD 1 per day
TARCEVA 25 MG TABLET	NP	S PA QPD 2 per day
TARGRETIN 75 MG CAPSULE	NP	S PA
TASIGNA	P	S PA QPD 4 per day
TAZVERIK	NP	S PA QPD 8 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>temozolomide</i>	np	S PA
TEPMETKO	NP	S PA QPD 2 per day
TIBSOVO	P	S PA QPD 2 per day
TORPENZ	np	S PA QPD 1.0 per day
<i>tretinoin 10 mg capsule</i>	np	S PA
TREXALL	NP	
TRUQAP	NP	S PA QPD 2.286 per day
TRUSELTIQ (50 MG DAILY PK, 125 MG DAILY PK)	NP	S PA QPD 1.5 per day
TRUSELTIQ 100 MG DAILY DOSE PK	NP	S PA QPD 0.75 per day
TRUSELTIQ 75 MG DAILY DOSE PK	NP	S PA QPD 2.25 per day
TUKYSA 150 MG TABLET	NP	S PA QPD 4 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TUKYSA 50 MG TABLET	NP	S PA QPD 10 per day
TURALIO	NP	S PA QPD 4 per day
TYKERB	NP	S PA QPD 6 per day
VANFLYTA 17.7 MG TABLET	NP	S PA QPD 1.0 per day
VANFLYTA 26.5 MG TABLET	NP	S PA QPD 2.0 per day
VENCLEXTA (10 MG TAB (10MG X 2), 10 MG TABLET)	P	S PA QPD 2 per day
VENCLEXTA 100 MG TABLET	P	S PA QPD 6 per day
VENCLEXTA 50 MG TABLET	P	S PA QPD 1 per day
VENCLEXTA STARTING PACK	P	QL MAX 42 / 180 DAYS S PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VERZENIO	P	S PA QPD 2 per day
VITRAKVI 100 MG CAPSULE	P	S PA QPD 2 per day
VITRAKVI 25 MG CAPSULE	P	S PA QPD 6 per day
VITRAKVI 20 MG/ML SOLUTION	P	S PA QPD 10 per day
VIZIMPRO	NP	S PA QPD 1 per day
VONJO	NP	S PA QPD 4 per day
VOTRIENT	NP	S PA QPD 4 per day
WELIREG	NP	S PA QPD 3 per day
XALKORI (200 MG CAPSULE, 250 MG CAPSULE)	P	S PA QPD 4 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XALKORI (20 MG PELLETT, 50 MG PELLETT)	P	S PA QPD 4.0 per day
XALKORI 150 MG PELLETT	P	S PA QPD 6.0 per day
XATMEP	NP	PA
XELODA	NP	S PA
XOSPATA	NP	S PA QPD 3 per day
XPOVIO (40 MG TWICE, 80 MG ONCE, 100 MG ONCE)	NP	S PA QPD 0.286 per day
XPOVIO 40 MG ONCE WEEKLY DOSE	NP	S PA QPD 0.572 per day
XPOVIO 60 MG ONCE WEEKLY DOSE	NP	S PA QPD 0.143 per day
XPOVIO 60 MG TWICE WEEKLY DOSE	NP	S PA QPD 0.858 per day
XPOVIO 80 MG TWICE WEEKLY DOSE	NP	S PA QPD 1.143 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XTANDI (40 MG CAPSULE, 40 MG TABLET)	P	S PA QPD 4 per day
XTANDI 80 MG TABLET	P	S PA QPD 2 per day
YONSA	P	S PA QPD 4.0 per day
ZEJULA 100 MG CAPSULE	P	S PA QPD 3 per day
ZEJULA (100 MG TABLET, 200 MG TABLET, 300 MG TABLET)	P	S PA QPD 1.0 per day
ZELBORAF	P	S PA QPD 8 per day
ZOLINZA	P	S PA QPD 4 per day
ZORTRESS	NP	S HSA
ZYDELIG	P	S PA QPD 2 per day
ZYKADIA	P	S PA QPD 3 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZYTIGA 250 MG TABLET	NP	S PA QPD 4 per day
ZYTIGA 500 MG TABLET	NP	S PA QPD 2 per day
ANTIPARKINSONIAN AGENTS (CNS)		
ADAMANTANES (CNS)		
<i>amantadine (50 mg/5 ml solution, 100 mg capsule, 100 mg tablet, 100 mg/10 ml cup)</i>	np	
GOCOVRI ER 137 MG CAPSULE	NP	S PA QPD 2 per day
GOCOVRI ER 68.5 MG CAPSULE	NP	S PA QPD 1 per day
OSMOLEX ER (ER 129 MG TABLET, ER 193 MG TABLET, ER 258 MG TABLET)	NP	S PA QPD 1 per day
OSMOLEX ER 322 MG DAILY DOSE	NP	S PA QPD 2 per day
ADENOSINE A2A RECEPTOR ANTAGONISTS		
NOURIANZ	NP	S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>ANTICHOLINERGIC AGENTS (CNS)</b>		
<i>benztropine mesylate (0.5 mg tab, 1 mg tablet, 2 mg tablet)</i>	p	
<i>trihexyphenidyl 2 mg/5 ml soln</i>	P	
<i>trihexyphenidyl hcl (2 mg tablet, 5 mg tablet)</i>	p	
<b>CATECHOL-O-METHYLTRANSFERASE(COMT)INHIB.</b>		
COMTAN	NP	
<i>entacapone</i>	np	
ONGENTYS	NP	
TASMAR	NP	
<i>tolcapone</i>	np	
<b>DOPAMINE PRECURSORS</b>		
<i>carbidopa-levodopa (25-100 tab, 25-250 tab)</i>	np	
<i>carbidopa-levodopa 10-100 tab</i>	p	
<i>carbidopa-levodopa (10-100 mg odt, 25-100 mg odt, 25-250 mg odt)</i>	P	
<i>carbidopa-levodopa 150 mg-enta (mylan)</i>	P	
<i>carbidopa-levodopa 50 mg-enta (mylan)</i>	P	
<i>carbidopa-levodopa 75 mg-enta (mylan)</i>	P	
<i>carbidopa-levodopa er</i>	np	
<i>carbidopa-levodopa-entacapone</i>	np	
DHIVY	NP	
DUOPA	NP	S
INBRIJA	P	S



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RYTARY	NP	
SINEMET 10-100	NP	
SINEMET 25-100	NP	
STALEVO 100	NP	
STALEVO 125	NP	
STALEVO 150	NP	
STALEVO 200	NP	
STALEVO 50	NP	
STALEVO 75	NP	
<b>MONOAMINE OXIDASE B INHIBITORS</b>		
AZILECT	NP	
EMSAM	NP	
<i>rasagiline mesylate</i>	np	
<i>selegiline hcl (5 mg capsule, 5 mg tablet)</i>	np	
XADAGO	NP	
ZELAPAR	NP	
<b>ANTIPROTOZOALS</b>		
<b>AMEBICIDES</b>		
HUMATIN	P	
<i>paromomycin sulfate</i>	p	
<b>ANTIMALARIALS</b>		
ARAKODA	NP	
<i>atovaquone-proguanil hcl</i>	np	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>chloroquine phosphate</i>	np	
COARTEM	P	
DARAPRIM	NP	S
<i>hydroxychloroquine 100 mg tab</i>	p	
<i>hydroxychloroquine sulfate (200 mg tab, 300 mg tab, 400 mg tab)</i>	np	
KRINTAFEL	NP	
MALARONE	NP	
<i>mefloquine hcl</i>	np	
PLAQUENIL	NP	
<i>primaquine</i>	np	
<i>primaquine 26.3 mg tablet (sanofi)</i>	NP	
<i>pyrimethamine</i>	np	S
QUALAQUIN	NP	
<i>quinine sulfate</i>	np	
SOVUNA	NP	
<b>ANTIPROTOZOALS, CRYPTOSPORIDIOSIS</b>		
ALINIA 100 MG/5 ML SUSPENSION	P	QL MAX 300 / 90 DAYS
ALINIA 500 MG TABLET	NP	QL MAX 12 / 90 DAYS
<i>nitazoxanide</i>	np	QL MAX 12 / 90 DAYS
<b>ANTIPROTOZOALS, MISCELLANEOUS</b>		
LAMPIT	NP	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIPROTOZOALS, P JIROVECII PNEUMONIA		
<i>atovaquone</i>	np	
MEPRON	NP	
NEBUPENT	NP	
<i>pentamidine 300 mg inhal powdr</i>	np	
ANTIPROTOZOALS,NITROIMIDAZOLE-DERIVATIVE		
SOLOSEC	P	
<i>tinidazole</i>	np	
ANTIPROTOZOALS,NITROIMIDAZOLE-DERIVATIVE NITROIMIDAZOLE DERIVATIVE, ANTI-LEISHMAL		
IMPAVIDO	P	S
NITROIMIDAZOLE DERIVATIVE, TRYPANOCIDAL		
<i>benznidazole</i>	P	
NITROIMIDAZOLE DERIVATIVES, MISC		
FLAGYL	NP	
LIKMEZ	NP	PA QPD 40.0 per day
<i>metronidazole (vaginal 0.75% gl, 375 mg capsule)</i>	np	
<i>metronidazole (250 mg tablet, 500 mg tablet)</i>	p	
<i>metronidazole 125 mg tablet</i>	NP	
NUVESSA	NP	
VANDAZOLE	P	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>ANTIPSYCHOTIC AGENTS</b>		
<b>ATYPICAL ANTIPSYCHOTICS</b>		
ABILIFY	NP	ST QPD 1 per day
ABILIFY MYCITE (2 MG KIT, 5 MG KIT, 10 MG KIT, 15 MG KIT, 20 MG KIT, 30 MG KIT)	NP	ST QPD 1 per day
ABILIFY MYCITE (2 MG KIT, 5 MG KIT, 10 MG KIT, 15 MG KIT, 20 MG KIT, 30 MG KIT)	NP	ST QPD 1 per day
<i>aripiprazole 1 mg/ml solution</i>	np	QPD 30.0 per day
<i>aripiprazole (2 mg tablet, 5 mg tablet, 10 mg tablet, 15 mg tablet)</i>	p	QPD 1.0 per day
<i>aripiprazole (20 mg tablet, 30 mg tablet)</i>	np	QPD 1.0 per day
<i>aripiprazole odt</i>	np	QPD 2 per day
<i>asenapine maleate</i>	np	QPD 2 per day
CAPLYTA	NP	ST QPD 1 per day
<i>clozapine 100 mg tablet</i>	np	QPD 9 per day
<i>clozapine 200 mg tablet</i>	np	QPD 4 per day
<i>clozapine 25 mg tablet</i>	p	QPD 3 per day
<i>clozapine 50 mg tablet</i>	np	QPD 3 per day
<i>clozapine odt 100 mg tablet</i>	np	QPD 3 per day
<i>clozapine odt 12.5 mg tablet</i>	NP	ST QPD 3 per day
<i>clozapine odt 150 mg tablet</i>	np	QPD 6.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>clozapine odt 200 mg tablet</i>	np	QPD 4.0 per day
<i>clozapine odt 25 mg tablet</i>	np	QPD 9 per day
CLOZARIL (25 MG TABLET, 50 MG TABLET)	NP	ST QPD 3 per day
CLOZARIL 100 MG TABLET	NP	ST QPD 9 per day
CLOZARIL 200 MG TABLET	NP	ST QPD 4 per day
FANAPT TITRATION PACK	NP	QL MAX 8 / 180 DAYS ST
FANAPT (1 MG TABLET, 2 MG TABLET, 4 MG TABLET, 6 MG TABLET, 8 MG TABLET, 10 MG TABLET, 12 MG TABLET)	NP	ST QPD 2 per day
GEODON (20 MG CAPSULE, 60 MG CAPSULE, 80 MG CAPSULE)	NP	ST QPD 2 per day
GEODON 40 MG CAPSULE	NP	ST QPD 2.0 per day
INVEGA (ER 1.5 MG TABLET, ER 3 MG TABLET, ER 9 MG TABLET)	NP	ST QPD 1 per day
INVEGA ER 6 MG TABLET	NP	ST QPD 2 per day
LATUDA (20 MG TABLET, 40 MG TABLET, 60 MG TABLET, 120 MG TABLET)	NP	ST QPD 1 per day
LATUDA 80 MG TABLET	NP	ST QPD 2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>lurasidone hcl (20 mg tablet, 40 mg tablet, 60 mg tablet, 120 mg tablet)</i>	np	QPD 1.0 per day
<i>lurasidone hcl 80 mg tablet</i>	np	QPD 2.0 per day
LYBALVI	NP	ST QPD 1.0 per day
NUPLAZID (10 MG TABLET, 34 MG CAPSULE)	NP	S PA QPD 1 per day
<i>olanzapine (2.5 mg tablet, 5 mg tablet, 7.5 mg tablet, 10 mg tablet, 15 mg tablet)</i>	p	QPD 1.0 per day
<i>olanzapine 20 mg tablet</i>	np	QPD 1.0 per day
<i>olanzapine odt</i>	np	QPD 1 per day
<i>paliperidone er (er 1.5 mg tablet, er 3 mg tablet, er 9 mg tablet)</i>	np	QPD 1.0 per day
<i>paliperidone er 6 mg tablet</i>	np	QPD 2.0 per day
<i>quetiapine 150 mg tablet</i>	NP	ST QPD 1 per day
<i>quetiapine fumarate (25 mg tab, 50 mg tab, 100 mg tab, 200 mg tab)</i>	p	QPD 3.0 per day
<i>quetiapine fumarate (300 mg tab, 400 mg tab)</i>	p	QPD 2.0 per day
<i>quetiapine er 150 mg tablet</i>	p	QPD 1.0 per day
<i>quetiapine er 200 mg tablet</i>	np	QPD 1.0 per day
<i>quetiapine er 50 mg tablet</i>	p	QPD 2.0 per day
<i>quetiapine fumarate er (er 300 mg tablet, er 400 mg tablet)</i>	np	QPD 2.0 per day
REXULTI (0.25 MG TABLET, 0.5 MG TABLET, 1 MG TABLET, 2 MG TABLET, 3 MG TABLET, 4 MG TABLET)	P	QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RISPERDAL 1 MG/ML SOLUTION	NP	ST QPD 16 per day
RISPERDAL (0.5 MG TABLET, 1 MG TABLET, 2 MG TABLET, 3 MG TABLET)	NP	ST QPD 2 per day
RISPERDAL 4 MG TABLET	NP	ST QPD 4 per day
<i>risperidone 1 mg/ml solution</i>	np	QPD 16 per day
<i>risperidone (0.25 mg tablet, 0.5 mg tablet, 1 mg tablet, 2 mg tablet, 3 mg tablet)</i>	p	QPD 2.0 per day
<i>risperidone 4 mg tablet</i>	p	QPD 4.0 per day
<i>risperidone 0.25 mg odt</i>	P	ST QPD 2 per day
<i>risperidone 4 mg odt</i>	np	QPD 4 per day
<i>risperidone odt (0.5 mg odt, 1 mg odt, 2 mg odt, 3 mg odt)</i>	np	QPD 2 per day
SAPHRIS	NP	ST QPD 2 per day
SECUADO	NP	ST QPD 1 per day
SEROQUEL (25 MG TABLET, 50 MG TABLET, 100 MG TABLET, 200 MG TABLET)	NP	ST QPD 3 per day
SEROQUEL (300 MG TABLET, 400 MG TABLET)	NP	ST QPD 2 per day
SEROQUEL XR (150 MG TABLET, 200 MG TABLET)	NP	ST QPD 1 per day
SEROQUEL XR (50 MG TABLET, 300 MG TABLET, 400 MG TABLET)	NP	ST QPD 2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VERSACLOZ	NP	ST QPD 18 per day
VRAYLAR 1.5 MG-3 MG PACK	P	QL MAX 7 / 180 DAYS
VRAYLAR (1.5 MG CAPSULE, 3 MG CAPSULE, 4.5 MG CAPSULE, 6 MG CAPSULE)	P	QPD 1 per day
<i>ziprasidone hcl</i>	np	QPD 2.0 per day
ZYPREXA (2.5 MG TABLET, 5 MG TABLET, 7.5 MG TABLET, 10 MG TABLET, 15 MG TABLET)	NP	ST QPD 1 per day
ZYPREXA 20 MG TABLET	NP	ST QPD 1.0 per day
ZYPREXA ZYDIS	NP	ST QPD 1 per day
<b>BUTYROPHENONES</b>		
<i>haloperidol (0.5 mg tablet, 1 mg tablet)</i>	p	
<i>haloperidol (2 mg tablet, 5 mg tablet, 10 mg tablet, 20 mg tablet)</i>	np	
<i>haloperidol lactate (2 mg/ml conc, 10 mg/5 ml cup)</i>	np	
<b>DIBENZOXAPINES</b>		
<i>loxapine</i>	np	
<b>DIHYDROINDOLONES</b>		
<i>molindone hcl</i>	NP	
<b>DIPHENYLBUTYLPERIDINES</b>		
<i>pimozide</i>	P	



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>PHENOTHIAZINES</b>		
<i>chlorpromazine hcl (30 mg/ml conc, 100 mg/ml conc)</i>	NP	
<i>chlorpromazine hcl (10 mg tablet, 25 mg tablet, 50 mg tablet, 100 mg tablet, 200 mg tablet)</i>	np	
<i>fluphenazine hcl (2.5 mg/5 ml elix, 5 mg/ml conc)</i>	P	
<i>fluphenazine hcl (1 mg tablet, 2.5 mg tablet, 5 mg tablet, 10 mg tablet)</i>	np	
<i>perphenazine</i>	np	
<i>trifluoperazine hcl</i>	np	
<b>THIOXANTHENES</b>		
<i>thiothixene</i>	np	
<b>ANTIRETROVIRALS</b>		
<b>ANTIRETROVIRALS, MISCELLANEOUS</b>		
TYBOST	NP	S QPD 1 per day
<b>HIV ENTRY AND FUSION INHIBITORS</b>		
FUZEON	NP	S QPD 2 per day
<i>maraviroc 150 mg tablet</i>	np	S QPD 2.0 per day
<i>maraviroc 300 mg tablet</i>	np	S QPD 4.0 per day
RUKOBIA	NP	S QPD 2 per day
SELZENTRY 20 MG/ML ORAL SOLN	NP	S QPD 61.334 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SELZENTRY (75 MG TABLET, 150 MG TABLET)	NP	S QPD 2 per day
SELZENTRY 25 MG TABLET	NP	S QPD 8 per day
SELZENTRY 300 MG TABLET	NP	S QPD 4 per day
HIV INTEGRASE INHIBITOR ANTIRETROVIRALS		
BIKTARVY	P	S QPD 1 per day
DOVATO	P	S QPD 1.0 per day
ISENTRESS (25 MG TABLET CHEW, 100 MG TABLET CHEW)	P	S QPD 6 per day
ISENTRESS (100 MG POWDER PACKET, 400 MG TABLET)	P	S QPD 2 per day
ISENTRESS HD	P	S QPD 2 per day
JULUCA	P	S QPD 1 per day
TIVICAY (25 MG TABLET, 50 MG TABLET)	P	S QPD 2 per day
TIVICAY 10 MG TABLET	P	S QPD 8 per day
TIVICAY PD	P	S QPD 12 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HIV NONNUCLEOSIDE REV.TRANScriP. INHIB.		
DELSTRIGO	P	S QPD 1 per day
EDURANT	NP	S QPD 1 per day
<i>efavirenz 200 mg capsule</i>	P	S QPD 2 per day
<i>efavirenz 50 mg capsule</i>	P	S QPD 3 per day
<i>efavirenz 600 mg tablet</i>	np	S QPD 1 per day
<i>efavirenz-lamivu-tenofovir disoproxil fumarate</i>	np	S QPD 1 per day
<i>etravirine</i>	np	S QPD 2 per day
INTELENCE (100 MG TABLET, 200 MG TABLET)	NP	S QPD 2 per day
INTELENCE 25 MG TABLET	P	S QPD 4 per day
<i>nevirapine 50 mg/5 ml susp</i>	P	S QPD 40 per day
<i>nevirapine 200 mg tablet</i>	p	S QPD 2 per day
<i>nevirapine er 100 mg tablet</i>	P	S QPD 3 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>nevirapine er 400 mg tablet</i>	np	S QPD 1 per day
PIFELTRO	NP	S QPD 1 per day
SUSTIVA 200 MG CAPSULE	NP	S QPD 2 per day
SUSTIVA 50 MG CAPSULE	NP	S QPD 3 per day
SYMFI	NP	S QPD 1 per day
SYMFI LO	NP	S QPD 1 per day
<b>HIV NUCLEOSIDE, NUCLEOTIDE RT INHIBITORS</b>		
<i>abacavir 20 mg/ml solution</i>	np	S QPD 32 per day
<i>abacavir 300 mg tablet</i>	np	S QPD 2 per day
<i>abacavir-lamivudine</i>	np	S QPD 1 per day
ATRIPLA	NP	S QPD 1.0 per day
CIMDUO	P	S QPD 1 per day
COMBIVIR	NP	S QPD 2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COMPLERA	NP	S QPD 1 per day
DESCOVY 120-15 MG TABLET	P	S QPD 1 per day
DESCOVY 200-25 MG TABLET	P	C [ACA] Preventive use only S ACA QPD 1 per day
<i>didanosine</i>	P	S
<i>efavirenz-emtric-tenofovir disoproxil fumarate</i>	np	S QPD 1 per day
<i>emtricitabine</i>	np	S QPD 1.0 per day
<i>emtricitabine-tenofovir disoproxil fumarate (100-150mg, 133-200mg, 167-250mg)</i>	np	S QPD 1 per day
<i>emtricitabine-tenofovir disoproxil fumarate 200-300mg</i>	np	C [ACA] Preventive Use Only S ACA QPD 1.0 per day
EMTRIVA 200 MG CAPSULE	NP	S QPD 1 per day
EMTRIVA 10 MG/ML SOLUTION	NP	S QPD 24.286 per day
EPIVIR 10 MG/ML ORAL SOLUTION	NP	S QPD 32 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EPIVIR 150 MG TABLET	NP	S QPD 2 per day
EPIVIR 300 MG TABLET	NP	S QPD 1 per day
EPIVIR HBV 25 MG/5 ML SOLN	P	S
EPIVIR HBV 100 MG TABLET	NP	S
EPZICOM	NP	S QPD 1 per day
GENVOYA	P	S QPD 1 per day
<i>lamivudine 10 mg/ml oral soln</i>	np	S QPD 32.0 per day
<i>lamivudine 150 mg tablet</i>	np	S QPD 2 per day
<i>lamivudine 300 mg tablet</i>	np	S QPD 1 per day
<i>lamivudine hbv</i>	np	S
<i>lamivudine-zidovudine</i>	np	S QPD 2 per day
ODEFSEY	P	S QPD 1 per day
RETROVIR 100 MG CAPSULE	NP	S QPD 6 per day
RETROVIR 10 MG/ML SYRUP	NP	S QPD 64 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>stavudine</i>	np	S QPD 2.0 per day
STRIBILD	NP	S QPD 1 per day
TEMIXYS	P	S QPD 1 per day
<i>tenofovir disoproxil fumarate</i>	np	S QPD 1 per day
TRIUMEQ	P	S QPD 1 per day
TRIUMEQ PD	P	S QPD 6 per day
TRIZIVIR	NP	S QPD 2 per day
TRUVADA	NP	S QPD 1 per day
VIREAD POWDER	P	S QPD 8 per day
VIREAD (150 MG TABLET, 200 MG TABLET, 250 MG TABLET)	P	S QPD 1 per day
VIREAD 300 MG TABLET	NP	S QPD 1 per day
ZIAGEN 20 MG/ML SOLUTION	NP	S QPD 32 per day
ZIAGEN 300 MG TABLET	NP	S QPD 2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>zidovudine 100 mg capsule</i>	np	S QPD 6 per day
<i>zidovudine 50 mg/5 ml syrup</i>	np	S QPD 64 per day
<i>zidovudine 300 mg tablet</i>	np	S QPD 2 per day
HIV PROTEASE INHIBITOR ANTIRETROVIRALS		
APTIVUS	NP	S QPD 4 per day
<i>atazanavir sulfate (150 mg cap, 300 mg cap)</i>	np	S QPD 1 per day
<i>atazanavir sulfate 200 mg cap</i>	np	S QPD 2 per day
<i>darunavir 600 mg tablet</i>	np	S QPD 2.0 per day
<i>darunavir 800 mg tablet</i>	np	S QPD 1.0 per day
EVOTAZ	P	S QPD 1 per day
<i>fosamprenavir calcium</i>	np	S QPD 4 per day
KALETRA 80 MG-20 MG/ML SOLN	NP	S QPD 16 per day
KALETRA 100-25 MG TABLET	NP	S QPD 6.0 per day



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KALETRA 200-50 MG TABLET	NP	S QPD 4.0 per day
LEXIVA 50 MG/ML SUSPENSION	NP	S QPD 60 per day
LEXIVA 700 MG TABLET	NP	S QPD 4 per day
<i>lopinavir-ritonavir 80-20mg/ml</i>	np	S QPD 16 per day
<i>lopinavir-ritonavir 100-25mg tb</i>	np	S QPD 6 per day
<i>lopinavir-ritonavir 200-50mg tb</i>	np	S QPD 4 per day
NORVIR 100 MG POWDER PACKET	P	S QPD 12 per day
NORVIR (100 MG SOFTGEL CAP, 100 MG TABLET)	NP	S QPD 12.0 per day
PREZCOBIX	P	S QPD 1 per day
PREZISTA 100 MG/ML SUSPENSION	P	S QPD 13.334 per day
PREZISTA 150 MG TABLET	P	S QPD 6 per day
PREZISTA 600 MG TABLET	NP	S QPD 2 per day
PREZISTA 75 MG TABLET	P	S QPD 10 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PREZISTA 800 MG TABLET	NP	S QPD 1 per day
REYATAZ 200 MG CAPSULE	NP	S QPD 2 per day
REYATAZ 300 MG CAPSULE	NP	S QPD 1 per day
REYATAZ 50 MG POWDER PACKET	NP	S QPD 8 per day
<i>ritonavir</i>	np	S QPD 12 per day
SYM TUZA	P	S QPD 1.0 per day
VIRACEPT 250 MG TABLET	NP	S QPD 9 per day
VIRACEPT 625 MG TABLET	NP	S QPD 4 per day
ANTITHROMBOTIC AGENTS		
PLATELET-AGGREGATION INHIBITORS		
BRILINTA	P	HSA
<i>cilostazol</i>	p	HSA
<i>clopidogrel 75 mg tablet</i>	p	HSA
<i>dipyridamole (25 mg tablet, 50 mg tablet, 75 mg tablet)</i>	np	HSA
EFFIENT	NP	HSA
PLAVIX	NP	HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>prasugrel hcl</i>	np	HSA
ZONTIVITY	NP	HSA
PLATELET-REDUCING AGENTS		
AGRYLIN	NP	HSA
<i>anagrelide hcl</i>	np	HSA
VON WILLEBRAND FACTOR-RELATED ANTITHROMB		
CABLIVI 11 MG KIT	NP	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div style="margin-right: 5px;">MAX 58 / 365 DAYS</div> </div> <div style="background-color: #c00000; color: white; padding: 2px 5px; margin-top: 2px;">S</div>
CABLIVI 11 MG VIAL	NP	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div style="margin-right: 5px;">max 58 / 365 days</div> </div> <div style="background-color: #c00000; color: white; padding: 2px 5px; margin-top: 2px;">S</div>
ANTITOXINS, IMMUNE GLOB, TOXOIDS, VACCINES ALLERGENIC EXTRACTS (THERAPEUTIC)		
GRASTEK	NP	<div style="display: flex; align-items: center;"> <div style="background-color: #8b4513; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> <div style="margin-right: 5px;">1 per day</div> </div> <div style="background-color: #0070c0; color: white; padding: 2px 5px; margin-top: 2px;">QPD</div>
ODACTRA	NP	<div style="display: flex; align-items: center;"> <div style="background-color: #8b4513; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> <div style="margin-right: 5px;">1 per day</div> </div> <div style="background-color: #0070c0; color: white; padding: 2px 5px; margin-top: 2px;">QPD</div>
ORALAIR 300 IR SUBLINGUAL TAB	NP	<div style="background-color: #c00000; color: white; padding: 2px 5px; margin-bottom: 2px;">S</div> <div style="display: flex; align-items: center;"> <div style="background-color: #8b4513; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> <div style="margin-right: 5px;">1 per day</div> </div> <div style="background-color: #0070c0; color: white; padding: 2px 5px; margin-top: 2px;">QPD</div>
PALFORZIA (3 MG 1), 12 MG 3))	NP	<div style="background-color: #c00000; color: white; padding: 2px 5px; margin-bottom: 2px;">S</div> <div style="display: flex; align-items: center;"> <div style="background-color: #8b4513; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> <div style="margin-right: 5px;">3 per day</div> </div> <div style="background-color: #0070c0; color: white; padding: 2px 5px; margin-top: 2px;">QPD</div>
PALFORZIA (40 MG 5), 120 MG 7), 200 MG 9))	NP	<div style="background-color: #c00000; color: white; padding: 2px 5px; margin-bottom: 2px;">S</div> <div style="display: flex; align-items: center;"> <div style="background-color: #8b4513; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> <div style="margin-right: 5px;">2 per day</div> </div> <div style="background-color: #0070c0; color: white; padding: 2px 5px; margin-top: 2px;">QPD</div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PALFORZIA (80 MG 6), 160 MG 8))	NP	S PA QPD 4 per day
PALFORZIA 20 MG (LEVEL 4)	NP	S PA QPD 1 per day
PALFORZIA 240 MG (LEVEL 10)	NP	S PA QPD 4.0 per day
PALFORZIA 6 MG (LEVEL 2)	NP	S PA QPD 6 per day
PALFORZIA INITIAL (1-3 YRS)	NP	QL max 7 / 180 days S PA
PALFORZIA INITIAL (4-17 YRS)	NP	QL MAX 13 / 180 DAYS S PA
PALFORZIA (300 MG (LEVEL 11), 300 MG (MAINTENANCE))	NP	S PA QPD 1.0 per day
RAGWITEK	NP	PA QPD 1 per day
<b>TOXOIDS</b>		
ADACEL TDAP (SYRINGE, VIAL)	P	HSA ACA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BOOSTRIX TDAP (SYRINGE, VIAL)	P	HSA ACA
DAPTACEL DTAP	P	HSA ACA
INFANRIX DTAP	P	HSA ACA
<i>tdvax</i>	P	HSA ACA
TENIVAC (SYRINGE, VIAL)	P	HSA ACA
VAXELIS (SYRINGE, VIAL)	P	HSA ACA
<b>VACCINES</b>		
ABRYSVO	P	HSA ACA
ACTHIB	P	HSA ACA
AFLURIA QUAD 2022-2023	P	HSA
AFLURIA QUAD 2022-23 (3YR UP)	P	HSA
AFLURIA QUAD 2023-2024	P	HSA
AFLURIA QUAD 2023-24 (3YR UP)	P	HSA
AFLURIA TRIV 2024-25 (3YR UP)	P	HSA ACA
AFLURIA TRIVALENT 2024-25	P	HSA ACA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AREXVY	P	HSA ACA
AREXVY ADJUVANT COMPONENT	P	HSA ACA
AREXVY ANTIGEN COMPONENT	P	HSA ACA
BEXSERO	P	HSA ACA
CAPVAXIVE	P	HSA ACA
COMIRNATY 2023-2024 (2023-24(12Y SYRG, 2023-24(12Y VIAL)	P	HSA
COMIRNATY 2024-2025	P	HSA ACA
ENGERIX-B ADULT (20 MCG/ML SYRN, 20 MCG/ML VIAL)	P	HSA ACA
ENGERIX-B PEDIATRIC-ADOLESCENT	P	HSA ACA
FLUAD QUAD 2022-2023	P	HSA
FLUAD QUAD 2023-2024	P	HSA
FLUAD TRIVALENT 2024-2025	P	HSA ACA
FLUARIX QUAD 2022-2023	P	HSA
FLUARIX QUAD 2023-2024	P	HSA
FLUARIX TRIVALENT 2024-2025	P	HSA ACA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FLUBLOK QUAD 2022-2023	P	HSA
FLUBLOK QUAD 2023-2024	P	HSA
FLUBLOK TRIVALENT 2024-2025	P	HSA ACA
FLUCELVAX QUAD 2022-2023 (2022-2023 SYR, 2022-2023 VIAL)	P	HSA
FLUCELVAX QUAD 2023-2024 (2023-2024 SYR, 2023-2024 VIAL)	P	HSA
FLUCELVAX TRIVALENT 2024-2025 (2024-2025 SYR, 2024-2025 VL)	P	HSA ACA
FLULAVAL QUAD 2022-2023	P	HSA
FLULAVAL QUAD 2023-2024	P	HSA
FLULAVAL TRIVALENT 2024-2025	P	HSA ACA
FLUMIST QUAD 2022-2023	P	HSA
FLUMIST QUAD 2023-2024	P	HSA
FLUMIST TRIVALENT 2024-2025	P	HSA ACA
FLUZONE HIGH-DOSE QUAD 2022-23	P	HSA
FLUZONE HIGH-DOSE QUAD 2023-24	P	HSA
FLUZONE HIGH-DOSE TRIV 2024-25	P	HSA ACA
FLUZONE QUAD 2022-2023 (2022-2023 SYRINGE, 2022-2023 VIAL)	P	HSA
FLUZONE QUAD 2023-2024 (2023-2024 SYRINGE, 2023-2024 VIAL)	P	HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FLUZONE QUAD SOUTHERN HEM 2024 (HEM2024 SYR, HEM 2024 VL)	P	HSA ACA
FLUZONE TRIVALENT 2024-2025 (2024-25 SYRG, 2024-25 VIAL)	P	HSA ACA
GARDASIL 9 (9 SYRINGE, 9 VIAL)	P	C HSA ACA [ACA] Age Edits Apply: Up to 45 years
HAVRIX	P	HSA ACA
HEPLISAV-B	P	HSA ACA
HIBERIX	P	HSA ACA
IMOVAX RABIES VACCINE	P	
IPOL VIAL	P	HSA ACA
JYNNEOS	P	HSA ACA
JYNNEOS (NATIONAL STOCKPILE)	P	HSA ACA
KINRIX	P	HSA ACA
M-M-R II VACCINE	P	HSA ACA
MENQUADFI	P	HSA ACA



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MENVEO A-C-Y-W-135-DIP (1 VIAL-A-C-Y-W-135-DIP, A-C-Y-W KIT (2 VIALS))	P	HSA ACA
MODERNA COVID 23-24(6M-11Y)EUA	P	HSA
MODERNA COVID 24-25(6M-11Y)EUA	P	HSA ACA
MRESVIA	P	HSA ACA
NOVAVAX COVID 2023-2024 (EUA)	P	HSA
NOVAVAX COVID 2024-2025 (EUA)	P	HSA ACA
PEDIARIX	P	HSA ACA
PEDVAXHIB	P	HSA ACA
PENBRAYA	P	HSA ACA
PENTACEL	P	HSA ACA
PFIZER COVID 2023-24(5-11Y)EUA	P	HSA
PFIZER COVID 2023-24(6M-4Y)EUA	P	HSA
PFIZER COVID 2024-25(5-11Y)EUA	P	HSA ACA
PFIZER COVID 2024-25(6M-4Y)EUA	P	HSA ACA
PNEUMOVAX 23 (23 SYRINGE, 23 VIAL)	P	HSA ACA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PREHEVBRIO	P	HSA
PREVNAR 20	P	HSA ACA
PRIORIX	P	HSA ACA
PROQUAD	P	HSA ACA
QUADRACEL DTAP-IPV (SYRINGE, VIAL)	P	HSA ACA
RABAVERT	P	
RECOMBIVAX HB (5 MCG/0.5 ML SYR, 5 MCG/0.5 ML VL, 10 MCG/ML SYR, 10 MCG/ML VIAL, 40 MCG/ML VIAL)	P	HSA ACA
ROTARIX (ORAL SYRINGE, SUSPENSION)	P	HSA ACA
ROTATEQ	P	HSA ACA
SHINGRIX	P	C [ACA] Age Edits Apply: 50+ years HSA ACA
SPIKEVAX 2023-2024 (2023-24 SYRG, 2023-24 VIAL)	P	HSA
SPIKEVAX 2024-2025	P	HSA ACA
TRUMENBA	P	HSA ACA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TWINRIX	P	HSA ACA
VAQTA (25 UNITS/0.5 ML SYRINGE, 25 UNITS/0.5 ML VIAL, 50 UNITS/ML SYRINGE, 50 UNITS/ML VIAL)	P	HSA ACA
VARIVAX VACCINE	P	HSA ACA
VAXNEUVANCE	P	HSA ACA
VIVOTIF	NP	
ANTIULCER AGENTS AND ACID SUPPRESSANTS		
ANTIULCER AGENTS AND ACID SUPPRESS.,MISC		
TALICIA	NP	
HISTAMINE H2-ANTAGONISTS		
<i>cimetidine (300 mg/5 ml cup, 300 mg/5 ml soln, 400 mg/6.67 ml cup)</i>	np	PA QPD 40.0 per day
<i>cimetidine (300 mg tablet, 400 mg tablet, 800 mg tablet)</i>	np	
<i>cimetidine 200 mg tablet</i>	p	
<i>cimetidine 300 mg/5 ml soln (ndc: 00121064908)</i>	P	PA QPD 40.0 per day
<i>cimetidine 300 mg/5 ml soln (ndc: 00121064940)</i>	P	PA QPD 40.0 per day
<i>famotidine 40 mg/5 ml susp</i>	np	PA QPD 80.0 per day
<i>famotidine 20 mg tablet</i>	p	
<i>famotidine 40 mg tablet</i>	p	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>nizatidine 150 mg capsule</i>	np	
<i>nizatidine 300 mg capsule</i>	NP	
PEPCID	NP	
<b>POTASSIUM-COMPETITIVE ACID BLOCKERS</b>		
VOQUEZNA	NP	ST QPD 1.0 per day
VOQUEZNA DUAL PAK	NP	
VOQUEZNA TRIPLE PAK	NP	
<b>PROSTAGLANDINS</b>		
CYTOTEC	NP	
<i>misoprostol</i>	p	
<b>PROTECTANTS</b>		
CARAFATE 1 GM/10 ML SUSP	NP	PA QPD 40.0 per day
CARAFATE 1 GM TABLET	NP	
<i>sucralfate (1 gm/10 ml susp, 1 gm/10 ml susp cup)</i>	np	PA QPD 40.0 per day
<i>sucralfate 1 gm tablet</i>	np	
<b>PROTON-PUMP INHIBITORS</b>		
ACIPHEX	NP	ST QPD 2.0 per day
ACIPHEX SPRINKLE	NP	ST QPD 1 per day
DEXILANT	NP	ST QPD 2.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>dexlansoprazole dr</i>	np	QPD 2.0 per day
<i>esomeprazole magnesium (dr 20 mg cap, dr 40 mg cap)</i>	p	QPD 2.0 per day
<i>esomeprazole magnesium (dr 10 mg packet, dr 20 mg packet, dr 40 mg packet)</i>	np	QPD 2.0 per day
<i>esomeprazole magnesium (dr 2.5 mg packet, dr 5 mg packet)</i>	np	QPD 1.0 per day
KONVOMEF	NP	ST QPD 20.0 per day
<i>lansoprazol-amoxicil-clarithro</i>	NP	
<i>lansoprazole (dr 15 mg capsule, dr 15 mg odt, dr 30 mg odt)</i>	np	QPD 2.0 per day
<i>lansoprazole dr 30 mg capsule</i>	p	QPD 2.0 per day
NEXIUM (DR 10 MG PACKET, DR 20 MG CAPSULE, DR 20 MG PACKET, DR 40 MG CAPSULE, DR 40 MG PACKET)	NP	ST QPD 2.0 per day
NEXIUM (DR 2.5 MG PACKET, DR 5 MG PACKET)	P	ST QPD 1 per day
OMECLAMOX-PAK	NP	
<i>omeprazole (dr 10 mg capsule, dr 20 mg capsule, dr 40 mg capsule)</i>	p	QPD 2.0 per day
<i>omeprazole-sodium bicarbonate (20-1, 100 cap, 20-1, 680 pkt, 40-1, 100 cap, 40-1, 680 pkt)</i>	np	QPD 2.0 per day
<i>pantoprazole dr 40 mg susp pkt</i>	np	QPD 2.0 per day
<i>pantoprazole sodium (dr 20 mg tab, dr 40 mg tab)</i>	p	QPD 2.0 per day
PREVACID (DR 15 MG SOLUTAB, DR 30 MG CAPSULE, DR 30 MG SOLUTAB)	NP	ST QPD 2.0 per day
PRILOSEC DR 10 MG SUSPENSION	NP	ST QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PRILOSEC DR 2.5 MG SUSPENSION	NP	ST QPD 2 per day
PROTONIX (DR 20 MG TABLET, 40 MG SUSPENSION, DR 40 MG TABLET)	NP	ST QPD 2.0 per day
<i>rabeprazole dr 10 mg sprnkl cp</i>	NP	ST QPD 1 per day
<i>rabeprazole sod dr 20 mg tab</i>	p	QPD 2.0 per day
ZEGERID (20 MG CAPSULE, 40 MG CAPSULE)	NP	ST QPD 2.0 per day
ZEGERID (20 MG PACKET, 40 MG PACKET)	NP	ST QPD 2.0 per day
ANTIVIRALS (SYSTEMIC) ANTIRETROVIRALS		
SUNLENCA 4- 300 MG TABLET	NP	QL MAX 4 / 365 DAYS S
SUNLENCA 5- 300 MG TABLET	NP	QL MAX 5 / 365 DAYS S
CMV ANTIVIRALS		
LIVTENCITY	NP	S QPD 4 per day
PREVYMIS (20 MG PELLETT PACKET, 120 MG PELLETT PACKET)	NP	S QPD 4.0 per day
PREVYMIS (240 MG TABLET, 480 MG TABLET)	NP	QL max 200 / 365 days S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>CORONAVIRUS (COVID-19)</b>		
PAXLOVID 150-100 MG DOSE PACK	P	QL max 20 / 30 days
PAXLOVID 300-100 MG DOSE PACK	P	QL max 30 / 30 days
<b>ENDONUCLEASE INHIBITORS</b>		
XOFLUZA (40 MG TABLET, 80 MG TABLET)	NP	QL MAX 2 / 120 DAYS
<b>INTERFERON ANTIVIRALS</b>		
PEGASYS (180 MCG/0.5 ML SYRINGE, 180 MCG/ML VIAL)	P	S PA
<b>NEURAMINIDASE INHIBITOR ANTIVIRALS</b>		
<i>oseltamivir phos 30 mg capsule</i>	np	QL MAX 40 / 120 DAYS
<i>oseltamivir phosphate (45 mg capsule, 75 mg capsule)</i>	np	QL MAX 20 / 120 DAYS
<i>oseltamivir 6 mg/ml suspension</i>	np	QL MAX 300 / 120 DAYS
RELENZA	NP	QL MAX 40 / 120 DAYS
TAMIFLU (45 MG CAPSULE, 75 MG CAPSULE)	NP	QL MAX 20 / 120 DAYS
TAMIFLU 30 MG CAPSULE	NP	QL MAX 40 / 120 DAYS
TAMIFLU 6 MG/ML SUSPENSION	NP	QL MAX 300 / 120 DAYS
<b>NUCLEOSIDE AND NUCLEOTIDE ANTIVIRALS</b>		
<i>acyclovir 200 mg/5 ml susp</i>	np	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>acyclovir (200 mg capsule, 400 mg tablet, 800 mg tablet)</i>	p	
<i>adefovir dipivoxil</i>	np	S
BARACLUDE 0.05 MG/ML SOLUTION	P	S
BARACLUDE (0.5 MG TABLET, 1 MG TABLET)	NP	S
<i>entecavir</i>	np	S
<i>famciclovir</i>	np	
HEPSERA	NP	S
LAGEVRIO (EUA)	P	QL max 40 / 30 days
<i>ribavirin (200 mg capsule, 200 mg tablet)</i>	P	S
SITAVIG	NP	
<i>valacyclovir hcl 1 gram tablet</i>	np	
<i>valacyclovir hcl 500 mg tablet</i>	p	
VALCYTE (50 MG/ML SOLUTION, 450 MG TABLET)	NP	
<i>valganciclovir hcl (hcl 50 mg/ml, 450 mg tablet)</i>	np	
VALTREX	NP	
VEMLIDY	P	S
VIRAZOLE	NP	
XERESE	NP	
ZOVIRAX 200 MG/5 ML SUSP	NP	
ANXIOLYTICS, SEDATIVES AND HYPNOTICS		
ANXIOLYTICS, SEDATIVES, AND HYPNOTICS, MISC		
<i>hydroxyzine hcl (10 mg/5 ml soln, 10 mg/5 ml syrup)</i>	np	
<i>hydroxyzine hcl (10 mg tablet, 25 mg tablet, 50 mg tablet)</i>	p	



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>hydroxyzine pam 100 mg cap</i>	P	
<i>hydroxyzine pamoate (25 mg cap, 50 mg cap)</i>	p	
VISTARIL	NP	
<b>BARBITURATES (ANXIOLYTIC, SEDATIVE/HYP)</b>		
<i>butalbital-acetaminophen-caffe</i>	np	QPD 6.0 per day
ESGIC 50-325-40 MG CAPSULE	np	QPD 6 per day
ESGIC 50-325-40 MG TABLET	NP	QPD 6 per day
FIORICET	NP	QPD 6 per day
<i>phenobarbital (20 mg/5 ml cup, 20 mg/5 ml elix, 20 mg/5 ml soln, 30 mg/7.5 ml cup, 32.4 mg tablet, 60 mg/15 ml cup, 64.8 mg tablet, 97.2 mg tablet)</i>	np	
<i>phenobarbital (15 mg tablet, 16.2 mg tablet, 30 mg tablet, 60 mg tablet, 100 mg tablet)</i>	p	
ZEBUTAL	np	QPD 6 per day
<b>BENZODIAZEPINES (ANXIOLYTIC, SEDATIVE/HYP)</b>		
<i>alprazolam</i>	p	
<i>alprazolam er</i>	p	
ALPRAZOLAM INTENSOL	NP	
<i>alprazolam odt</i>	np	
<i>alprazolam xr</i>	p	
ATIVAN (0.5 MG TABLET, 1 MG TABLET, 2 MG TABLET)	NP	
<i>chlordiazepoxide hcl</i>	p	
<i>clorazepate dipotassium</i>	np	
DIASTAT	P	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DIASTAT ACUDIAL	NP	
<i>diazepam (5 mg/ml oral conc, 10 mg rectal gel syrg, 10mg rectal gel (2pk), 20 mg rectal gel syrg, 20mg rectal gel (2pk), 25 mg/5 ml oral conc)</i>	np	
<i>diazepam 2.5mg rectal gel(2pk)</i>	NP	
<i>diazepam (2 mg tablet, 5 mg tablet, 5 mg/5 ml solution, 10 mg tablet)</i>	p	
DORAL	NP	
<i>estazolam</i>	np	
<i>flurazepam hcl</i>	NP	
LIBERVANT	NP	
<i>lorazepam 2 mg/ml oral concent</i>	np	
<i>lorazepam (0.5 mg tablet, 1 mg tablet, 2 mg tablet)</i>	p	
LORAZEPAM INTENSOL	np	
LOREEV XR	NP	
NAYZILAM	NP	QPD 0.334 per day
<i>oxazepam</i>	np	
<i>quazepam</i>	NP	
RESTORIL	NP	
<i>temazepam (15 mg capsule, 30 mg capsule)</i>	p	
<i>temazepam (7.5 mg capsule, 22.5 mg capsule)</i>	np	
VALIUM	NP	
VALTOCO	NP	QPD 0.334 per day
XANAX	NP	
XANAX XR	NP	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>MELATONIN RECEPTOR AGONISTS</b>		
HETLIOZ	NP	S PA QPD 1 per day
HETLIOZ LQ	NP	S PA QPD 5.267 per day
<i>ramelteon</i>	np	QPD 1.0 per day
ROZEREM	NP	ST QPD 1 per day
<i>tasimelteon</i>	np	S PA QPD 1.0 per day
<b>NON-BENZODIAZEPINE ANXIOLYTICS</b>		
<i>buspirone hcl</i>	p	
<b>NON-BENZODIAZEPINE HYPNOTICS</b>		
AMBIEN	NP	ST QPD 1.0 per day
AMBIEN CR	NP	ST QPD 1.0 per day
EDLUAR	NP	ST QPD 1 per day
<i>eszopiclone</i>	p	QPD 1.0 per day
LUNESTA	NP	ST QPD 1.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>zaleplon</i>	p	QPD 1.0 per day
<i>zolpidem tartrate 7.5 mg cap</i>	NP	ST QPD 1.0 per day
<i>zolpidem tartrate (5 mg tablet, 10 mg tablet)</i>	p	QPD 1.0 per day
<i>zolpidem tartrate (1.75 mg tab, 3.5 mg tablet)</i>	NP	ST QPD 1 per day
<i>zolpidem tartrate er</i>	p	QPD 1.0 per day
ZOLPIMIST	NP	ST QPD 0.257 per day
OREXIN RECEPTOR ANTAGONISTS		
BELSOMRA	P	ST QPD 1 per day
DAYVIGO	NP	ST QPD 1 per day
QUVIVIQ	NP	ST QPD 1 per day
AUTONOMIC DRUGS		
PARASYMPATHOMIMETIC (CHOLINERGIC AGENTS)		
ADLARITY	NP	PA QPD 0.143 per day
ARICEPT	NP	
<i>bethanechol chloride</i>	np	
<i>cevimeline hcl</i>	np	
<i>donepezil hcl (5 mg tablet, 10 mg tablet)</i>	p	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>donepezil hcl 23 mg tablet</i>	np	
<i>donepezil hcl odt</i>	p	
EVOXAC	NP	
EXELON	NP	
FIRDAPSE	NP	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">S</div> <div style="margin-right: 10px;">PA</div> <div style="margin-right: 10px;">QPD</div> <div>10.0 per day</div> </div>
<i>galantamine er</i>	np	
<i>galantamine hbr</i>	np	
<i>galantamine hydrobromide</i>	P	
MESTINON (60 MG TABLET, 60 MG/5 ML SOLUTION, 180 MG TIMESPAN)	NP	
<i>pilocarpine hcl (5 mg tablet, 7.5 mg tablet)</i>	np	
<i>pyridostigmine br 30 mg tablet</i>	NP	
<i>pyridostigmine bromide (60 mg/5 ml soln, br 60 mg tablet)</i>	np	
<i>pyridostigmine bromide er</i>	np	
RAZADYNE ER	NP	
<i>rivastigmine (1.5 mg capsule, 3 mg capsule, 4.5 mg capsule, 4.6 mg/24hr patch, 6 mg capsule, 9.5 mg/24hr patch, 13.3 mg/24hr ptch)</i>	np	
SALAGEN	NP	
<b>SMOKING CESSATION AGENTS</b>		
CHANTIX (0.5 MG TABLET, 1 MG CONT MONTH BOX, 1 MG TABLET, STARTING MONTH BOX)	P	
<i>nicotine gum</i>	np	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">C</div> <div style="margin-right: 10px;">HSA</div> <div style="margin-right: 10px;">ACA</div> <div>[ACA] Quantity Limits May Apply</div> </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<p><i>nicotine lozenge (2 mg lozenge, 2 mg mini lozenge, cvs 2 mg lozenge, cvs 2 mg mini lozenge, eq 2 mg lozenge, ft 2 mg lozenge, ft 2 mg mini lozenge, gnp 2 mg lozenge, gnp 2 mg mini lozenge, gs 2 mg lozenge, 4 mg lozenge, 4 mg mini lozenge, cvs 4 mg lozenge, cvs 4 mg mini lozenge, eq 2 mg mini lozenge, eq 4 mg lozenge, ft 4 mg lozenge, ft 4 mg mini lozenge, gnp 4 mg lozenge, gnp 4 mg mini lozenge, gs 2 mg mini lozenge, gs 4 mg lozenge, gs 4 mg mini lozenge, hm 2 mg lozenge, hm 2 mg mini lozenge, hm 4 mg lozenge, hm 4 mg mini lozenge, kro 2 mg lozenge, kro 2 mg mini lozenge, kro 4 mg lozenge, kro 4 mg mini lozenge, ra 2 mg lozenge, ra 2 mg mini lozenge, ra 4 mg lozenge, ra 4 mg mini lozenge, sm 2 mg lozenge, sm 4 mg lozenge, sw 2 mg lozenge, sw 4 mg lozenge)</i></p>	<p>np</p>	<p>C [ACA] Quantity Limits May Apply</p> <p>HSA</p> <p>ACA</p>
<p><i>nicotine transdermal system</i></p>	<p>NP</p>	<p>C [ACA] Quantity Limits May Apply</p> <p>HSA</p> <p>ACA</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>nicotine patch (7 mg/24hr patch, cvs 7 mg/24hr patch, eq 7 mg/24hr patch, gnp 7 mg/24hr patch, hm 7 mg/24hr patch, kro 7 mg/24hr patch, sm 7 mg/24hr patch, 14 mg/24hr patch, cvs 14 mg/24hr patch, ft 7 mg/24hr patch, gnp 14 mg/24hr patch, kro 14 mg/24hr patch, ra 7 mg/24hr patch, sm 14 mg/24hr patch, 21 mg/24hr patch, cvs 21 mg/24hr patch, eq 14 mg/24hr patch, eq 21 mg/24hr patch, ft 14 mg/24hr patch, ft 21 mg/24hr patch, gnp 21 mg/24hr patch, hm 14 mg/24hr patch, hm 21 mg/24hr patch, kro 21 mg/24hr patch, ra 14 mg/24hr patch, ra 21 mg/24hr patch, sm 21 mg/24hr patch)</i>	np	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #333; color: white; padding: 5px; margin-bottom: 5px;">C</div> <div style="background-color: #003366; color: white; padding: 5px; margin-bottom: 5px;">HSA</div> <div style="background-color: #0099cc; color: white; padding: 5px;">ACA</div> </div> [ACA] Quantity Limits May Apply
NICOTROL	P	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #333; color: white; padding: 5px; margin-bottom: 5px;">C</div> <div style="background-color: #003366; color: white; padding: 5px; margin-bottom: 5px;">HSA</div> <div style="background-color: #0099cc; color: white; padding: 5px;">ACA</div> </div> [ACA] Quantity Limits May Apply
NICOTROL NS	P	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #333; color: white; padding: 5px; margin-bottom: 5px;">C</div> <div style="background-color: #003366; color: white; padding: 5px; margin-bottom: 5px;">HSA</div> <div style="background-color: #0099cc; color: white; padding: 5px;">ACA</div> </div> [ACA] Quantity Limits May Apply
QUIT 2 (2 MG CHEWING GUM, 2 MG LOZENGE)	np	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #333; color: white; padding: 5px; margin-bottom: 5px;">C</div> <div style="background-color: #003366; color: white; padding: 5px; margin-bottom: 5px;">HSA</div> <div style="background-color: #0099cc; color: white; padding: 5px;">ACA</div> </div> [ACA] Quantity Limits May Apply
QUIT 4 (4 MG CHEWING GUM, 4 MG LOZENGE)	np	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #333; color: white; padding: 5px; margin-bottom: 5px;">C</div> <div style="background-color: #003366; color: white; padding: 5px; margin-bottom: 5px;">HSA</div> <div style="background-color: #0099cc; color: white; padding: 5px;">ACA</div> </div> [ACA] Quantity Limits May Apply
STOP SMOKING AID	np	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #333; color: white; padding: 5px; margin-bottom: 5px;">C</div> <div style="background-color: #003366; color: white; padding: 5px; margin-bottom: 5px;">HSA</div> <div style="background-color: #0099cc; color: white; padding: 5px;">ACA</div> </div> [ACA] Quantity Limits May Apply

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>varenicline tartrate (0.5 mg tablet, 1 mg cont month bx, 1 mg tablet, starting month box)</i>	np	<div style="background-color: #333; color: white; padding: 2px; display: inline-block;">C</div> [ACA] Quantity Limits May Apply <div style="background-color: #003366; color: white; padding: 2px; display: inline-block;">HSA</div> <div style="background-color: #0099cc; color: white; padding: 2px; display: inline-block;">ACA</div>
<b>BETA-3-ADRENERGIC AGONISTS</b>		
<b>SELECTIVE BETA-3-ADRENERGIC AGONISTS</b>		
GEMTESA	NP	<div style="background-color: #666; color: white; padding: 2px; display: inline-block;">ST</div> <div style="background-color: #0066b3; color: white; padding: 2px; display: inline-block;">QPD</div> 1 per day
<i>mirabegron er</i>	np	<div style="background-color: #0066b3; color: white; padding: 2px; display: inline-block;">QPD</div> 1.0 per day
MYRBETRIQ ER 8 MG/ML SUSP	NP	<div style="background-color: #666; color: white; padding: 2px; display: inline-block;">ST</div> <div style="background-color: #0066b3; color: white; padding: 2px; display: inline-block;">QPD</div> 10.715 per day
MYRBETRIQ (ER 25 MG TABLET, ER 50 MG TABLET)	NP	<div style="background-color: #666; color: white; padding: 2px; display: inline-block;">ST</div> <div style="background-color: #0066b3; color: white; padding: 2px; display: inline-block;">QPD</div> 1 per day
<b>BETA-ADRENERGIC AGONISTS</b>		
<b>SELECTIVE BETA-2-ADRENERGIC AGONISTS</b>		
ADVAIR DISKUS	NP	<div style="background-color: #666; color: white; padding: 2px; display: inline-block;">ST</div> <div style="background-color: #003366; color: white; padding: 2px; display: inline-block;">HSA</div> <div style="background-color: #0066b3; color: white; padding: 2px; display: inline-block;">QPD</div> 2 per day
ADVAIR HFA	P	<div style="background-color: #003366; color: white; padding: 2px; display: inline-block;">HSA</div> <div style="background-color: #0066b3; color: white; padding: 2px; display: inline-block;">QPD</div> 0.4 per day
AIRDUO DIGIHALER	NP	<div style="background-color: #003366; color: white; padding: 2px; display: inline-block;">HSA</div> <div style="background-color: #0066b3; color: white; padding: 2px; display: inline-block;">QPD</div> 0.034 per day
AIRDUO RESPICLICK	NP	<div style="background-color: #003366; color: white; padding: 2px; display: inline-block;">HSA</div> <div style="background-color: #804020; color: white; padding: 2px; display: inline-block;">PA</div> <div style="background-color: #0066b3; color: white; padding: 2px; display: inline-block;">QPD</div> 0.034 per day



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AIRSUPRA	P	HSA QPD 1.07 per day
<i>albuterol hfa 90 mcg inhaler (prasco)</i>	NP	ST HSA QPD 1.2 per day
<i>albuterol sulfate (sul 2.5 mg/3 ml soln, sulf 2 mg/5 ml syrup)</i>	p	HSA
<i>albuterol sulfate (er 4 mg tab, er 8 mg tab)</i>	NP	
<i>albuterol sulfate (sul 0.63 mg/3 ml sol, sul 1.25 mg/3 ml sol, sulfate 2 mg tab, 2.5 mg/0.5 ml sol, sulfate 4 mg tab)</i>	np	HSA
<i>albuterol sulfate hfa</i>	np	HSA QPD 1.2 per day
<i>arformoterol tartrate</i>	np	HSA
BREO ELLIPTA (100-25 MCG, 200-25 MCG)	P	HSA QPD 2 per day
BREO ELLIPTA 50-25 MCG INHALER	P	HSA QPD 2.0 per day
BROVANA	NP	HSA
DULERA	P	HSA QPD 1.3 per day
<i>fluticasone-salmeterol (55-14, 113-14, 232-14)</i>	P	HSA QPD 0.034 per day
<i>fluticasone-salmeterol (100-50, 250-50)</i>	np	HSA QPD 2 per day
<i>fluticasone-salmeterol 500-50</i>	np	HSA QPD 2.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>fluticasone-salmeterol 115-21 (ndc: 66993008796)</i>	NP	HSA QPD 0.4 per day
<i>fluticasone-salmeterol 230-21 (ndc: 66993008896)</i>	NP	HSA QPD 0.4 per day
<i>fluticasone-salmeterol 45-21 (ndc: 66993008696)</i>	NP	HSA QPD 0.4 per day
<i>fluticasone-vilanterol</i>	NP	HSA QPD 2 per day
<i>formoterol fumarate</i>	np	HSA
<i>levalbuterol concentrate</i>	np	HSA
<i>levalbuterol hcl</i>	np	HSA
<i>levalbuterol tartrate hfa</i>	NP	HSA QPD 1 per day
PERFOROMIST	NP	HSA
PROAIR DIGIHALER	NP	ST HSA QPD 0.067 per day
PROAIR RESPICLICK	NP	ST HSA QPD 0.067 per day
PROVENTIL HFA	NP	ST HSA QPD 1.2 per day
SEREVENT DISKUS	P	HSA QPD 2 per day
STRIVERDI RESPIMAT	NP	HSA QPD 0.134 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SYMBICORT	np	HSA QPD 1.03 per day
<i>terbutaline sulfate (2.5 mg tab, 5 mg tab)</i>	np	HSA
VENTOLIN HFA	P	HSA QPD 1.2 per day
WIXELA INHUB	np	HSA QPD 2 per day
XOPENEX HFA	NP	HSA QPD 1.0 per day
<b>BLOOD DERIVATIVES</b>		
GLASSIA	NP	S
<b>BLOOD FORMATION, COAGULATION, THROMBOSIS BLOOD FORM.,COAG,THROMBOSIS AGENTS MISC.</b>		
OXBRYTA (300 MG TABLET, 300 MG TABLET FOR SUSP, 500 MG TABLET)	NP	S PA QPD 3 per day
PYRUKYND (20-5 MG PACK, 50-20 MG PACK)	NP	QL MAX 14 / 365 DAYS S PA
PYRUKYND (20 MG PACK, 50 MG PACK)	NP	S PA QPD 2 per day
PYRUKYND (5 MG TABLET, 20 MG TABLET, 50 MG TABLET)	NP	S PA QPD 2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PYRUKYND 5 MG TAPER PACK	NP	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #d62728; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> MAX 7 / 365 DAYS
TAVALISSE	NP	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #d62728; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #1f77b4; color: white; padding: 2px 5px; border-radius: 3px;">QPD</div> </div> 2 per day
<b>HEMATOPOIETIC AGENTS</b>		
ALVAIZ (36 MG TABLET, 54 MG TABLET)	NP	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #d62728; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #1f77b4; color: white; padding: 2px 5px; border-radius: 3px;">QPD</div> </div> 2.0 per day
ALVAIZ (9 MG TABLET, 18 MG TABLET)	NP	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #d62728; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #1f77b4; color: white; padding: 2px 5px; border-radius: 3px;">QPD</div> </div> 1.0 per day
ARANESP (10 MCG/0.4 ML SYRINGE, 25 MCG/0.42 ML SYRINGE, 25 MCG/ML VIAL, 40 MCG/0.4 ML SYRINGE, 40 MCG/ML VIAL, 60 MCG/0.3 ML SYRINGE, 60 MCG/ML VIAL, 100 MCG/0.5 ML SYRINGE, 100 MCG/ML VIAL, 150 MCG/0.3 ML SYRINGE, 200 MCG/0.4 ML SYRINGE, 200 MCG/ML VIAL, 300 MCG/0.6 ML SYRINGE, 500 MCG/1 ML SYRINGE)	P	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #d62728; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
DOPTELET ((10 TAB 20 MG TAB, (15 TAB 20 MG TAB)	NP	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #d62728; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #1f77b4; color: white; padding: 2px 5px; border-radius: 3px;">QPD</div> </div> 2.0 per day
DOPTELET (30 TAB PK) 20 MG TAB	NP	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #d62728; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #1f77b4; color: white; padding: 2px 5px; border-radius: 3px;">QPD</div> </div> 2 per day
EPOGEN	NP	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #d62728; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FULPHILA	P	S PA
FYLNETRA	NP	S PA
GRANIX (300 MCG/0.5 ML SAFE SYR, 300 MCG/0.5 ML SYRINGE, 300 MCG/ML VIAL, 480 MCG/0.8 ML SAFE SYR, 480 MCG/0.8 ML SYRINGE, 480 MCG/1.6 ML VIAL)	NP	S PA
LEUKINE	NP	S PA
MIRCERA (120 MCG/0.3 ML SYRINGE, 200 MCG/0.3 ML SYRINGE)	NP	S PA
MIRCERA (30 MCG/0.3 ML SYRINGE, 50 MCG/0.3 ML SYRINGE, 75 MCG/0.3 ML SYRINGE, 100 MCG/0.3 ML SYRINGE, 150 MCG/0.3 ML SYRINGE)	NP	S PA
MULPLETA	NP	S PA QPD 1 per day
NEULASTA	NP	S PA
NEULASTA ONPRO	NP	S PA
NEUPOGEN (300 MCG/0.5 ML SYR, 300 MCG/ML VIAL, 480 MCG/0.8 ML SYR, 480 MCG/1.6 ML VIAL)	NP	S PA
NIVESTYM (300 MCG/0.5 ML SYRING, 300 MCG/ML VIAL, 480 MCG/0.8 ML SYRING, 480 MCG/1.6 ML VIAL)	P	S PA
NYVEPRIA	P	S PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PROCRIT	NP	S PA
PROMACTA (12.5 MG SUSPEN PACKET, 12.5 MG TABLET, 25 MG SUSPENSION PCKT, 25 MG TABLET)	NP	S PA QPD 1 per day
PROMACTA (50 MG TABLET, 75 MG TABLET)	NP	S PA QPD 2 per day
RELEUKO (300 MCG/0.5 ML SYRINGE, 300 MCG/ML VIAL, 480 MCG/0.8 ML SYRINGE, 480 MCG/1.6 ML VIAL)	NP	S PA
RETACRIT	P	S PA
STIMUFEND	NP	S PA
UDENYCA	NP	S PA
UDENYCA AUTOINJECTOR	NP	S PA
UDENYCA ONBODY	NP	S PA
XOLREMDI	NP	S PA QPD 4.0 per day
ZARXIO	P	S PA
ZIEXTENZO	NP	S PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HEMORRHEOLOGIC AGENTS		
<i>pentoxifylline</i>	np	
BRONCHODILATORS		
ANTICHOLINERGIC AGENTS (RESPIR. TRACT)		
BREZTRI AEROSPHERE	P	HSA QPD 0.357 per day
CALCINEURIN INHIBITORS (90:28)		
CALCINEURIN INHIBITORS, MISC (90:28)		
ASTAGRAF XL	NP	S HSA
<i>cyclosporine (25 mg capsule, 100 mg capsule)</i>	np	S HSA
<i>cyclosporine modified (25 mg, 50 mg, 100 mg, 100mg/ml)</i>	np	S HSA
ENVARUSUS XR	NP	S HSA
GENGRAF (25 MG CAPSULE, 100 MG CAPSULE, 100 MG/ML SOLUTION)	np	S HSA
NEORAL (25 MG GELATIN CAPSULE, 100 MG GELATIN CAPSULE, 100 MG/ML SOLUTION)	NP	S HSA
PROGRAF (0.2 MG GRANULE PACKET, 0.5 MG CAPSULE, 1 MG CAPSULE, 1 MG GRANULE PACKET, 5 MG CAPSULE)	NP	S HSA
SANDIMMUNE (25 MG CAPSULE, 100 MG CAPSULE, 100 MG/ML SOLN)	NP	S HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>tacrolimus (0.5 mg capsule, 1 mg capsule, 5 mg capsule)</i>	np	S HSA
<i>tacrolimus xl</i>	NP	S HSA
<b>CALCIUM-CHANNEL BLOCKING AGENTS</b>		
<b>DIHYDROPYRIDINES</b>		
<i>amlodipine besylate</i>	p	HSA
<i>amlodipine besylate-benazepril</i>	p	HSA
<i>amlodipine-olmesartan</i>	np	HSA
<i>amlodipine-valsartan</i>	np	HSA
<i>amlodipine-valsartan-hctz</i>	np	HSA
AZOR	NP	HSA
CONJUPRI	NP	HSA
CONSENSI	NP	PA QPD 1 per day
EXFORGE	NP	HSA
EXFORGE HCT	NP	HSA
<i>felodipine er</i>	p	HSA
<i>isradipine</i>	np	HSA
KATERZIA	NP	HSA PA QPD 10.0 per day
<i>levamlodipine maleate</i>	NP	HSA
LOTREL	NP	HSA



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>nifedipine hcl (20 mg capsule, 30 mg capsule)</i>	np	HSA
<i>nifedipine</i>	np	HSA
<i>nifedipine er</i>	p	HSA
<i>nimodipine 30 mg capsule</i>	np	
<i>nimodipine 60 mg/20 ml soln</i>	NP	PA QPD 120.0 per day
<i>nisoldipine (er 20 mg tablet, er 25.5 mg tablet, er 30 mg tablet, er 40 mg tablet)</i>	NP	HSA
<i>nisoldipine (er 8.5 mg tablet, er 17 mg tablet, er 34 mg tablet)</i>	np	HSA
NORLIOVA	NP	HSA PA QPD 1.0 per day
NORVASC	NP	HSA
NYMALIZE (30 MG/5 ML ORAL SYRNG, 60 MG/10 ML ORAL SYRN, 60 MG/10 ML SOLUTION)	NP	PA QPD 60.0 per day
PROCARDIA XL	NP	HSA
SULAR	NP	HSA
CARDIAC DRUGS		
CARDIAC DRUGS, MISCELLANEOUS		
ASPRUZYO SPRINKLE	NP	HSA PA QPD 2.0 per day
CAMZYOS	NP	S PA QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>ranolazine er</i>	np	HSA
VYNDAMAX	P	S PA QPD 1 per day
VYNDAQEL	P	S PA QPD 4 per day
<b>CARDIOTONIC AGENTS</b>		
CORLANOR 5 MG/5 ML ORAL SOLN	P	PA QPD 20 per day
CORLANOR (5 MG TABLET, 7.5 MG TABLET)	NP	PA QPD 2 per day
DIGITEK	p	HSA
<i>digoxin 0.05 mg/ml solution</i>	np	HSA PA
<i>digoxin (0.125 mg tablet, 0.25 mg tablet, 125 mcg tablet, 250 mcg tablet)</i>	p	HSA
<i>digoxin 62.5 mcg tablet</i>	np	HSA
<i>digoxin 0.05 mg/ml solution (west-ward/hikma)</i>	NP	HSA PA
<i>ivabradine hcl</i>	np	PA QPD 2.0 per day
LANOXIN (62.5 MCG TABLET, 125 MCG TABLET, 250 MCG TABLET)	NP	HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>CARDIOVASCULAR DRUGS</b>		
<b>ALPHA-ADRENERGIC BLOCKING AGENTS</b>		
CARDURA (1 MG TABLET, 2 MG TABLET, 4 MG TABLET)	NP	HSA QPD 1 per day
CARDURA 8 MG TABLET	NP	HSA QPD 2 per day
CARDURA XL	NP	QPD 1.0 per day
<i>doxazosin mesylate (1 mg tab, 2 mg tab, 4 mg tab)</i>	p	HSA QPD 1.0 per day
<i>doxazosin mesylate 8 mg tab</i>	p	HSA QPD 2.0 per day
MINIPRESS	NP	HSA
<i>prazosin 5 mg capsule</i>	np	HSA
<i>prazosin hcl (1 mg capsule, 2 mg capsule)</i>	p	HSA
<i>terazosin 10 mg capsule</i>	p	HSA QPD 2.0 per day
<i>terazosin hcl (1 mg capsule, 2 mg capsule, 5 mg capsule)</i>	p	HSA QPD 1.0 per day
<b>BETA-ADRENERGIC BLOCKING AGENTS</b>		
<i>acebutolol hcl</i>	np	HSA
<i>atenolol</i>	p	HSA
<i>atenolol-chlorthalidone 100-25</i>	np	HSA
<i>atenolol-chlorthalidone 50-25</i>	p	HSA
BETAPACE (80 MG TABLET, 120 MG TABLET, 160 MG TABLET)	NP	HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BETAPACE AF	NP	HSA
<i>betaxolol hcl (10 mg tablet, 20 mg tablet)</i>	np	HSA
<i>bisoprolol fumarate 10 mg tab</i>	np	HSA
<i>bisoprolol fumarate 5 mg tab</i>	p	HSA
<i>bisoprolol-hydrochlorothiazide</i>	p	HSA
BYSTOLIC	NP	HSA
<i>carvedilol</i>	p	HSA
<i>carvedilol er</i>	np	HSA
COREG	NP	HSA
COREG CR	NP	HSA
CORGARD	NP	HSA
HEMANGEOL	NP	S
INDERAL LA	NP	HSA
INDERAL XL	NP	HSA
INNOPRAN XL	NP	HSA
KAPSPARGO SPRINKLE	NP	HSA
<i>labetalol hcl (200 mg tablet, 300 mg tablet)</i>	np	HSA
<i>labetalol hcl 100 mg tablet</i>	p	HSA
<i>labetalol hcl 400 mg tablet</i>	NP	HSA
LOPRESSOR	NP	HSA
<i>metoprolol succinate</i>	p	HSA
<i>metoprolol tartrate (25 mg tab, 37.5 mg tb, 50 mg tab, 75 mg tab, 100 mg tab)</i>	p	HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>metoprolol-hydrochlorothiazide</i>	np	HSA
<i>nadolol</i>	np	HSA
<i>nebivolol hcl</i>	p	HSA
<i>pindolol</i>	np	HSA
<i>propranolol 20 mg/5 ml soln</i>	p	HSA
		PA
		QPD 160.0 per day
<i>propranolol 40 mg/5 ml soln</i>	P	HSA
		PA
		QPD 80.0 per day
<i>propranolol 60 mg tablet</i>	np	HSA
<i>propranolol hcl (10 mg tablet, 20 mg tablet, 40 mg tablet, 80 mg tablet)</i>	p	HSA
<i>propranolol hcl er (er 120 mg capsule, er 160 mg capsule)</i>	np	HSA
<i>propranolol hcl er (er 60 mg capsule, er 80 mg capsule)</i>	p	HSA
<i>propranolol-hydrochlorothiazid</i>	P	
SORINE (160 MG TABLET, 240 MG TABLET)	np	HSA
SORINE (80 MG TABLET, 120 MG TABLET)	p	HSA
<i>sotalol (160 mg tablet, 240 mg tablet)</i>	np	HSA
<i>sotalol (80 mg tablet, 120 mg tablet)</i>	p	HSA
SOTALOL AF (80 MG TABLET, 120 MG TABLET)	p	HSA
SOTALOL AF 160 MG TABLET	np	HSA
SOTYLIZE	NP	HSA
		PA
		QPD 64.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TENORETIC 100	NP	HSA
TENORETIC 50	NP	HSA
TENORMIN	NP	HSA
<i>timolol maleate (5 mg tablet, 10 mg tablet, 20 mg tablet)</i>	np	HSA
TOPROL XL	NP	HSA
ZIAC	NP	HSA
<b>CARDIOVASCULAR DRUGS, NSAID ANTI-INFL</b>		
<i>colchicine (0.6 mg capsule, 0.6 mg tablet)</i>	np	
COLCRYS	NP	
GLOPERBA	NP	
LODOCO	NP	
MITIGARE	NP	
<b>CENTRAL ALPHA-AGONISTS</b>		
CATAPRES-TTS 1	NP	HSA
CATAPRES-TTS 2	NP	HSA
CATAPRES-TTS 3	NP	HSA
<i>clonidine</i>	np	HSA
<i>clonidine hcl (0.1 mg tablet, 0.2 mg tablet, 0.3 mg tablet)</i>	p	HSA
<i>clonidine hcl er 0.1 mg tablet</i>	np	QPD 4.0 per day
<i>clonidine hcl er 0.17 mg tab</i>	NP	HSA
<i>guanfacine hcl</i>	np	HSA
<i>guanfacine hcl er</i>	p	QPD 1.0 per day
INTUNIV	NP	QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KAPVAY	NP	QPD 4 per day
<i>methyl dopa</i>	P	HSA
<i>methyl dopa-hydrochlorothiazide</i>	NP	
NEXICLON XR	NP	HSA
CENTRAL NERVOUS SYSTEM AGENTS		
AMYOTROPHIC LATERAL SCLEROSIS(ALS) AGENT		
EXSERVAN	NP	PA QPD 2.0 per day
RADICAVA ORS 105 MG/5 ML SUSP	NP	S PA QPD 1.786 per day
RADICAVA ORS STARTER KIT SUSP	NP	QL MAX 70 / 180 DAYS S PA
RILUTEK	NP	
<i>riluzole</i>	np	
TIGLUTIK	NP	PA QPD 20.0 per day
ANTIMANIC AGENTS		
<i>lithium carbonate (150 mg cap, 300 mg cap, 300 mg tab, 600 mg cap)</i>	p	
<i>lithium carbonate 150 mg cap (west-ward/hikma)</i>	P	
<i>lithium carbonate 300 mg cap (west-ward/hikma)</i>	NP	
<i>lithium carbonate 600 mg cap (west-ward/hikma)</i>	NP	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>lithium carbonate er</i>	p	
<i>lithium 8 meq/5 ml solution</i>	np	
LITHOBID	NP	
CENTRAL NERVOUS SYSTEM AGENTS, MISC.		
ADDYI	NP	PA QPD 1 per day
<i>carbidopa</i>	np	
DAYBUE	NP	S PA QPD 120 per day
LODOSYN	NP	
<i>memantine hcl 2 mg/ml solution</i>	np	PA QPD 10.0 per day
<i>memantine 5-10 mg titration pk</i>	np	
<i>memantine hcl (5 mg tablet, 10 mg tablet)</i>	p	
<i>memantine hcl er</i>	np	
<i>memantine hcl-donepezil hcl er</i>	np	
NAMENDA 5-10 MG TITRATION PK	NP	
NAMENDA 10 MG TABLET	NP	
NAMENDA XR TITRATION PACK	NP	
NAMENDA XR (7 MG CAPSULE, 14 MG CAPSULE, 21 MG CAPSULE, 28 MG CAPSULE)	NP	
NAMZARIC TITRATION PACK	NP	
NAMZARIC (7 MG CAPSULE, 14 MG CAPSULE, 21 MG CAPSULE, 28 MG CAPSULE)	NP	



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NUEDEXTA	NP	PA QPD 2.0 per day
VEOZAH	NP	PA QPD 1.0 per day
VYLEESI	NP	S PA QPD 0.06 per day
<b>FIBROMYALGIA AGENTS</b>		
SAVELLA TITRATION PACK	P	QL MAX 55 / 180 DAYS ST
SAVELLA (12.5 MG TABLET, 25 MG TABLET, 50 MG TABLET, 100 MG TABLET)	P	ST QPD 2 per day
<b>OPIOID ANTAGONISTS (28:10)</b>		
KLOXXADO	P	
<i>naloxone hcl (0.4 mg/ml carpject, 0.4 mg/ml syringe)</i>	P	
<i>naloxone 4 mg/10 ml vial</i>	p	
<i>naloxone hcl (0.4 mg/ml vial, 2 mg/2 ml syringe, hcl 4 mg nasal spray)</i>	np	
<i>naltrexone hcl</i>	np	
NARCAN	NP	
OPVEE	P	
REXTOVY	P	
ZIMHI	NP	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VESICULAR MONOAMINE TRANSPORT2 INHIBITOR		
AUSTEDO (9 MG TABLET, 12 MG TABLET)	NP	S PA QPD 4 per day
AUSTEDO 6 MG TABLET	NP	S PA QPD 2 per day
AUSTEDO XR (6 MG TABLET, 12 MG TABLET, 18 MG TABLET, 30 MG TABLET, 36 MG TABLET, 42 MG TABLET, 48 MG TABLET)	NP	S PA QPD 1.0 per day
AUSTEDO XR 24 MG TABLET	NP	S PA QPD 2.0 per day
AUSTEDO XR TITR KT(6-12-24 MG)	NP	QL max 42 / 180 days S PA
AUSTEDO XR TITR(12-18-24-30MG)	NP	QL max 28 / 180 days S PA
INGREZZA	NP	S PA QPD 1 per day
INGREZZA INITIATION PK(TARDIV)	NP	QL MAX 28 / 180 DAYS S PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INGREZZA SPRINKLE	NP	S PA QPD 1.0 per day
<i>tetrabenazine 12.5 mg tablet</i>	np	S PA QPD 8.0 per day
<i>tetrabenazine 25 mg tablet</i>	np	S PA QPD 4.0 per day
XENAZINE 12.5 MG TABLET	NP	S PA QPD 8 per day
XENAZINE 25 MG TABLET	NP	S PA QPD 4 per day
<b>CEPHALOSPORIN ANTIBIOTICS</b>		
<b>1ST GENERATION CEPHALOSPORIN ANTIBIOTICS</b>		
<i>cefadroxil 500 mg capsule</i>	p	
<i>cefadroxil (250 mg/5 ml susp, 500 mg/5 ml susp)</i>	np	
<i>cefadroxil 1 gm tablet</i>	P	
<i>cephalexin (250 mg capsule, 500 mg capsule)</i>	p	
<i>cephalexin (125 mg/5 ml susp, 250 mg tablet, 250 mg/5 ml susp, 500 mg tablet, 750 mg capsule)</i>	np	
<b>2ND GENERATION CEPHALOSPORIN ANTIBIOTICS</b>		
<i>cefactor (250 mg capsule, 500 mg capsule)</i>	P	
<i>cefactor (125 mg/5 ml susp, 250 mg/5 ml susp, 375 mg/5 ml suspen)</i>	NP	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>cefaclor er</i>	NP	
<i>cefprozil (125 mg/5 ml susp, 250 mg/5 ml susp, 500 mg tablet)</i>	np	
<i>cefprozil 250 mg tablet</i>	p	
<i>cefuroxime</i>	p	
<b>3RD GENERATION CEPHALOSPORIN ANTIBIOTICS</b>		
<i>cefdinir 300 mg capsule</i>	p	
<i>cefdinir (125 mg/5 ml susp, 250 mg/5 ml susp)</i>	np	
<i>cefixime (100 mg/5 ml susp, 200 mg/5 ml susp, 400 mg capsule)</i>	np	
<i>cefpodoxime proxetil (50 mg/5 ml susp, 100 mg tablet, 100 mg/5 ml susp, 200 mg tablet)</i>	np	
<b>COMPLEMENT INHIBITORS (92:32)</b>		
<b>BRADYKININ RECEPTOR ANTAGONISTS</b>		
FIRAZYR	NP	S PA QPD 0.6 per day
<i>icatibant</i>	np	S PA QPD 0.6 per day
SAJAZIR	np	S PA QPD 0.6 per day
<b>COMPLEMENT INHIBITORS</b>		
VOYDEYA	NP	S PA QPD 6.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>CONSTIPATION THERAPY</b>		
<b>CHLORIDE CHANNEL ACTIVATORS</b>		
AMITIZA 24 MCG CAPSULE	NP	PA QPD 2.0 per day
AMITIZA 8 MCG CAPSULE	NP	PA QPD 4.0 per day
<i>lubiprostone 24 mcg capsule</i>	np	PA QPD 2.0 per day
<i>lubiprostone 8 mcg capsule</i>	np	PA QPD 4.0 per day
<b>GUANYLATE CYCLASE C (GCC) RECEPT AGONIST</b>		
LINZESS	NP	PA QPD 1 per day
TRULANCE	P	PA QPD 1 per day
<b>OPIOID ANTAGONISTS (56:18)</b>		
MOVANTIK	P	PA QPD 1.0 per day
RELISTOR 12 MG/0.6 ML SYRINGE	NP	PA QPD 0.6 per day
RELISTOR 8 MG/0.4 ML SYRINGE	NP	PA QPD 0.4 per day
RELISTOR 150 MG TABLET	NP	PA QPD 3 per day
RELISTOR 12 MG/0.6 ML VIAL	NP	PA QPD 1.2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SYMPROIC	P	PA QPD 1 per day
CYSTIC FIBROSIS (CFTR) MODULATORS CYSTIC FIBROSIS (CFTR) CORRECTORS		
ORKAMBI (75-94 MG GRANULE PKT, 100-125 MG GRANULE PKT, 150-188 MG GRANULE PKT)	NP	S PA QPD 2 per day
ORKAMBI (100 MG TABLET, 200 MG TABLET)	NP	S PA QPD 4 per day
SYMDEKO	P	S PA QPD 2 per day
TRIKAFTA (80-40-60MG/59.5MG PKT, 100-50-75 MG/75MG PKT)	P	S PA QPD 2.0 per day
TRIKAFTA (50-25-37.5 MG/75 MG, 100-50-75 MG/150 MG)	P	S PA QPD 3 per day
CYSTIC FIBROSIS (CFTR) POTENTIATORS		
KALYDECO (25 MG GRANULES PACKET, 50 MG GRANULES PACKET, 75 MG GRANULES PACKET, 150 MG TABLET)	P	S PA QPD 2 per day
KALYDECO (5.8 MG GRANULES PKT, 13.4 MG GRANULES PKT)	P	S PA QPD 2.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DENTAL AGENTS		
NUTRITIONAL SUPPLEMENTS		
CLINPRO 5000	p	C [ACA] Age Edits Apply: Up to 16 years HSA ACA
DENTA 5000 PLUS	p	C [ACA] Age Edits Apply: Up to 16 years HSA ACA
DENTA 5000 PLUS SENSITIVE	P	C [ACA] Age Edits Apply: Up to 16 years HSA ACA
DENTAGEL	p	C [ACA] Age Edits Apply: Up to 16 years HSA ACA
<i>fluoride</i>	p	C [ACA] Age Edits Apply: Up to 16 years HSA ACA
FLUORIDEX	p	C [ACA] Age Edits Apply: Up to 16 years HSA ACA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FLUORIDEX SENSITIVITY RELIEF	P	C [ACA] Age Edits Apply: Up to 16 years HSA ACA
FLUORIMAX 5000	p	C [ACA] Age Edits Apply: Up to 16 years HSA ACA
FLUORIMAX 5000 1.1% TOOTHPASTE (NDC: 57511050301)	P	C [ACA] Age Edits Apply: Up to 16 years HSA ACA
FRAICHE 5000	p	C [ACA] Age Edits Apply: Up to 16 years HSA ACA
FRAICHE 5000 KIDS PLUS	NP	C [ACA] Age Edits Apply: Up to 16 years HSA ACA
FRAICHE 5000 PREVI	NP	C [ACA] Age Edits Apply: Up to 16 years HSA ACA
FRAICHE 5000 SENSITIVE	NP	C [ACA] Age Edits Apply: Up to 16 years HSA ACA



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
JUST RIGHT 5000	p	C [ACA] Age Edits Apply: Up to 16 years HSA ACA
PERIOMED	np	C [ACA] Age Edits Apply: Up to 16 years HSA ACA
PREVIDENT (0.2% RINSE, 1.1% GEL, 5000 BOOSTER PLUS, DENTAL RINSE)	NP	C [ACA] Age Edits Apply: Up to 16 years HSA ACA
PREVIDENT 5000 DRY MOUTH	NP	C [ACA] Age Edits Apply: Up to 16 years HSA ACA
PREVIDENT 5000 ENAMEL PROTECT	P	C [ACA] Age Edits Apply: Up to 16 years HSA ACA
PREVIDENT 5000 ORTHO DEFENSE	NP	C [ACA] Age Edits Apply: Up to 16 years HSA ACA
PREVIDENT 5000 PLUS	NP	C [ACA] Age Edits Apply: Up to 16 years HSA ACA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PREVIDENT 5000 SENSITIVE	P	<div data-bbox="1114 247 1247 344">C</div> <div data-bbox="1255 254 1463 352">[ACA] Age Edits Apply: Up to 16 years</div> <div data-bbox="1114 352 1247 401">HSA</div> <div data-bbox="1114 401 1247 449">ACA</div>
PREVIDENT KIDS	NP	<div data-bbox="1114 464 1247 560">C</div> <div data-bbox="1255 470 1463 569">[ACA] Age Edits Apply: Up to 16 years</div> <div data-bbox="1114 560 1247 609">HSA</div> <div data-bbox="1114 609 1247 657">ACA</div>
SF	p	<div data-bbox="1114 680 1247 777">C</div> <div data-bbox="1255 686 1463 785">[ACA] Age Edits Apply: Up to 16 years</div> <div data-bbox="1114 777 1247 825">HSA</div> <div data-bbox="1114 825 1247 873">ACA</div>
SF 5000 PLUS	p	<div data-bbox="1114 896 1247 993">C</div> <div data-bbox="1255 903 1463 1001">[ACA] Age Edits Apply: Up to 16 years</div> <div data-bbox="1114 993 1247 1041">HSA</div> <div data-bbox="1114 1041 1247 1089">ACA</div>
<i>sodium fluoride (0.2% rinse, 0.25 (0.55) mg, 0.5 mg(1.1 mg), 0.5 mg/ml drop, 1 mg (2.2 mg), 1.1% cream, 1.1% gel, 5000 ppm cream, 5000 ppm paste)</i>	p	<div data-bbox="1114 1113 1247 1209">C</div> <div data-bbox="1255 1119 1463 1218">[ACA] Age Edits Apply: Up to 16 years</div> <div data-bbox="1114 1209 1247 1257">HSA</div> <div data-bbox="1114 1257 1247 1306">ACA</div>
SODIUM FLUORIDE 5000 DRY MOUTH	p	<div data-bbox="1114 1329 1247 1425">C</div> <div data-bbox="1255 1335 1463 1434">[ACA] Age Edits Apply: Up to 16 years</div> <div data-bbox="1114 1425 1247 1474">HSA</div> <div data-bbox="1114 1474 1247 1522">ACA</div>
SODIUM FLUORIDE 5000 PLUS	p	<div data-bbox="1114 1545 1247 1642">C</div> <div data-bbox="1255 1551 1463 1650">[ACA] Age Edits Apply: Up to 16 years</div> <div data-bbox="1114 1642 1247 1690">HSA</div> <div data-bbox="1114 1690 1247 1738">ACA</div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>sodium fluoride enamel protect</i>	p	C [ACA] Age Edits Apply: Up to 16 years HSA ACA
<i>sodium fluoride sensitive</i>	p	C [ACA] Age Edits Apply: Up to 16 years HSA ACA
<i>sodium fluoride-potassium nitr</i>	p	C [ACA] Age Edits Apply: Up to 16 years HSA ACA
<b>DEPIGMENTING AND PIGMENTING AGENTS</b>		
<b>PIGMENTING AGENTS</b>		
<i>methoxsalen</i>	NP	
<b>DEVICES</b>		
<i>advin covid-19 ag home test</i>	NP	
<i>advocate syringes (ins 0.3 ml 30gx5/16", ins 0.3 ml 31gx5/16", ins 0.5 ml 30gx5/16", ins 0.5 ml 31gx5/16", ins 1 ml 31gx5/16", ins syr 0.3ml 29gx1/2, ins syr 0.5ml 29gx1/2, ins syr 1 ml 29gx1/2", ins syr 1 ml 30gx5/16)</i>	P	HSA
<i>aerochamber mechanical vent</i>	P	HSA
<i>aerochamber mini</i>	P	HSA
<i>aerochamber mv</i>	P	HSA
<i>aerochamber plus flow-vu (, large, med, small)</i>	P	HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>aerochamber z-stat plus (plus large, plus w-flow, plus-med, plus-small)</i>	P	HSA
<i>aerovent plus</i>	P	HSA
<i>allergist tray</i>	P	
<i>allergist tray syr-detach ndl</i>	P	
<i>allergist tray syr-perm needle</i>	P	
<i>allergy syringe</i>	P	
<i>assure haemolance plus blade</i>	P	HSA
<i>assure id insulin safety (syr 0.5ml 31gx15/64", syr 1 ml 31gx15/64")</i>	P	HSA
<i>bd veritor at-home covid19 tst</i>	NP	
<i>binaxnow covd ag card home tst</i>	NP	
<i>binaxnow covid-19 ag self test</i>	NP	
<i>blunt needle (bd needle 18gx1-1/2", needle)</i>	P	
<i>breathrite</i>	P	HSA
<i>carepoint luer lock syring-ndl (syr 3 ml 20g 1.5", syr 3 ml 21g 1", syr 3 ml 21g 1.5", syr 3 ml 22g 1", syr 3 ml 22g 38mm, syr 3 ml 23g 1", syr 3 ml 23g 1.5", syr 3 ml 25g 1", syr 3 ml 25g 5/8")</i>	P	
<i>carepoint luer lock syringe</i>	P	
<i>carepoint luer slip syring-ndl</i>	P	
<i>carepoint luer slip syringe</i>	P	
<i>carepoint precision ndl 21g 1"</i>	P	
<i>carepoint safety luer lock syr</i>	P	
<i>carestart covid-19 ag home tst</i>	NP	
<i>caretouch luer lock</i>	P	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>caretouch luer lock syringe (luer 1 ml syr, luer 3 ml syr, luer 5 ml syr)</i>	P	
<i>caretouch luer slip syringe (luer 1 ml syrn, luer 3 ml syrn, luer 5 ml syr, luer 10 ml syr)</i>	P	
<i>celltrion diatrust cov-19 home</i>	NP	
<i>clever choice holding chamber (chamber-lrg, chamber-med, chamber-sm)</i>	P	HSA
<i>clinitest covid-19 home test</i>	NP	
<i>compact space chamber (chamber, chamber-lrg mask, chamber-med mask, chamber-sm mask)</i>	P	HSA
<i>contour solution</i>	P	HSA
<i>contour next control solution (1 sol, 2 sol)</i>	P	HSA
<i>cordx covid-19 ag home test</i>	NP	
<i>covid-19 at-home test (eua)</i>	NP	
<i>davol irrigation syringe</i>	P	
<i>dexcom g6 receiver</i>	P	QL MAX 1 / 365 DAYS ST HSA
<i>dexcom g6 sensor</i>	P	ST HSA QPD 0.1 per day
<i>dexcom g6 transmitter</i>	P	QL MAX 1 / 90 DAYS ST HSA
<i>dexcom g7 receiver</i>	P	QL MAX 1 / 365 DAYS ST HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>dexcom g7 sensor</i>	P	ST HSA QPD 0.1 per day
<i>dropsafe sicura safety needle</i>	P	
<i>easivent (holding chamber, mask-large, mask-medium, mask-small)</i>	P	HSA
<i>easy glide catheter tip syring</i>	P	
<i>easy glide luer lock syringe (luer 1 ml syr, luer 3 ml syr, luer 10 ml syr, luer 60 ml syr)</i>	P	
<i>easy glide luer slip tb syring</i>	P	
<i>easy touch (syr 0.3 ml, syr 0.5 ml, syr 1 ml)</i>	P	HSA
<i>easy touch (syr 1 ml 25gx5/8", syr 3 ml 22gx1-1/2", syr 3 ml 25gx5/8", syringe 1 ml 25gx1", syringe 3 ml 20gx1", syringe 3 ml 21gx1", syringe 3 ml 22gx1", syringe 3 ml 23gx1", syringe 3 ml 25gx1")</i>	P	
<i>easy touch fliplock insulin</i>	P	HSA
<i>easy touch fliplock needle</i>	P	
<i>easy touch fliplock needles</i>	P	
<i>easy touch fliplock syringe (fliplk 5 ml 25gx5/8, fliplk 10ml 18gx1.5, fliplock 3 ml 19gx1, fliplock 3 ml 22gx1, fliplock 3 ml 23gx1, fliplock 3 ml 25gx1, fliplock 5 ml 25gx1, fliplok 3ml 19gx1.5, fliplok 3ml 22gx1.5, fliplok 3ml 23gx1.5, fliplok 3ml 25gx5/8, fliplok 10 ml 18gx1)</i>	P	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>easy touch fliplock syringes (fliplk 5 ml 20gx1.5, fliplk 5 ml 21gx1.5, fliplk 5 ml 22gx1.5, fliplk 10ml 20gx1.5, fliplk 10ml 21gx1.5, fliplk 10ml 22gx1.5, fliplock 1 ml 25gx1, fliplock 3 ml 18gx1, fliplock 3 ml 20gx1, fliplock 3 ml 21gx1, fliplock 5 ml 18gx1, fliplock 5 ml 20gx1, fliplock 5 ml 21gx1, fliplock 10ml 21gx1, fliplok 1ml 26gx3/8, fliplok 1ml 27gx0.5, fliplok 3ml 18gx1.5, fliplok 3ml 20gx1.5, fliplok 3ml 21gx1.5, fliplok 10 ml 20gx1, fliplok 10 ml 25gx1)</i>	P	
<i>easy touch fluringe</i>	P	
<i>easy touch fluringe fliplock (fluring 1ml 25gx5/8, fluringe 1 ml 25gx1)</i>	P	
<i>easy touch fluringe flu tray</i>	P	
<i>easy touch insulin safety (0.5 ml syr 29gx1/2", 0.5 ml syr 30gx5/16, 1 ml syr 29gx1/2", 1 ml syr 30gx1/2")</i>	P	HSA
<i>easy touch luer lock syringe (luer 1 ml syr, luer 3 ml syr, luer 5 ml syr, luer 10 ml syr, luer 20 ml syr, luer 60 ml syr)</i>	P	
<i>easy touch sheathlock insulin</i>	P	HSA
<i>easy touch sheathlock syrg-ndl (3 ml 21gx1", 3 ml 21gx1.5, 3 ml 22gx1", 3 ml 22gx1.5, 3 ml 23gx1", 3 ml 25gx1", 3 ml 25gx5/8, 5 ml 21gx1.5, 5 ml 22gx1.5, 5 ml 25gx1", 10 ml 25gx1", 10ml 21gx1.5, 10ml 22gx1.5)</i>	P	
<i>easy touch sheathlock syringe (3 ml syr, 10ml syr)</i>	P	
<i>easy touch syr allergy tray</i>	P	
<i>easy touch tuberculin fliplock</i>	P	
<i>easy touch tuberculin sheathlk</i>	P	
<i>easy touch uni-slip (3 ml syr, 5 ml syr, 10 ml syr)</i>	P	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>easypoint needle (needle 18g x 1", needle 18g x 1-1/2", needle 20g x 1", needle 20g x 1-1/2", needle 21g x 1", needle 21g x 1-1/2", needle 22g x 1", needle 22g x 1-1/2", needle 23g x 1", needle 25g 1.5", needle 25g 16mm, needle 25g x 1", needle 25g x 5/8")</i>	P	
<i>eclipse luer-lok syringe (luer-lok syr 1 ml, luer-lok syr 3 ml, syrng 3 ml 23g 40mm)</i>	P	
<i>eclipse needle (needle 18g 40mm, needle 21gx1", needle 23g 25mm, needle 23gx1", needle 25g 16mm, needle 25g 25mm, needle 25g 40mm, needle 25gx1", needle 25gx1.5", needle 30g 13mm, needles 21gx1.5")</i>	P	
<i>bd eclipse 30gx1/2" syringe</i>	P	HSA
<i>eclipse syringe (syringe 3 ml 21gx1", syringe 3 ml 25gx1")</i>	P	
<i>eclipse syringe-needle</i>	P	
<i>ellume covid-19 home test</i>	NP	
<i>exel huber</i>	P	
<i>exel huber needle</i>	P	
<i>exel mti drawing needle</i>	P	
<i>exel syringe (3 ml syrn 27g x 1 1/4", syringe 3 ml, syringe 5 ml, syringe 10 ml, syringe 20 ml, syringe 20gx1" 3 ml, syringe 20gx1-1/2" 3 ml, syringe 21gx1" 3 ml, syringe 21gx1-1/2" 3 ml, syringe 22gx1" 3 ml, syringe 22gx1-1/2" 3 ml, syringe 22gx3/4" 3 ml, syringe 23gx1" 3 ml, syringe 25gx1" 3 ml, syringe 30 ml, syringe 50 ml)</i>	P	
<i>exel tb with needle</i>	P	
<i>exel tuberculin syringe</i>	P	
<i>fastep covid-19 ag home test</i>	NP	
<i>filter aspirator needle</i>	P	
<i>filter needle (bd needle, needle, needle 5 micron, needle 19gx1-1/2")</i>	P	



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>flexichamber</i>	P	HSA
<i>flexichamber mask</i>	P	HSA
<i>flow-eze</i>	P	
<i>flowflex covid-19 ag home test</i>	NP	
<i>freestyle libre 14 day reader</i>	P	<ul style="list-style-type: none"> <li>QL MAX 1 / 365 DAYS</li> <li>ST</li> <li>HSA</li> </ul>
<i>freestyle libre 14 day sensor</i>	P	<ul style="list-style-type: none"> <li>ST</li> <li>HSA</li> <li>QPD 0.072 per day</li> </ul>
<i>freestyle libre 2 plus sensor</i>	P	<ul style="list-style-type: none"> <li>ST</li> <li>HSA</li> <li>QPD 0.072 per day</li> </ul>
<i>freestyle libre 2 reader</i>	P	<ul style="list-style-type: none"> <li>QL MAX 1 / 365 DAYS</li> <li>ST</li> <li>HSA</li> </ul>
<i>freestyle libre 2 sensor</i>	P	<ul style="list-style-type: none"> <li>ST</li> <li>HSA</li> <li>QPD 0.072 per day</li> </ul>
<i>freestyle libre 3 plus sensor</i>	P	<ul style="list-style-type: none"> <li>ST</li> <li>HSA</li> <li>QPD 0.072 per day</li> </ul>
<i>freestyle libre 3 reader</i>	P	<ul style="list-style-type: none"> <li>QL max 1 / 365 days</li> <li>ST</li> <li>HSA</li> </ul>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>freestyle libre 3 sensor</i>	P	ST HSA QPD 0.072 per day
<i>freestyle precision (0.5 ml 30gx5/16, 0.5 ml 31gx5/16, 1 ml 30gx5/16", 1 ml 31gx5/16")</i>	P	
<i>genabio covid-19 rapid at-home</i>	NP	
<i>genteel vacuum lancing device</i>	P	HSA
<i>gojji lancet-glucose test strp</i>	NP	ST HSA QPD 6.8 per day
<i>gotoknow covid-19 ag home test</i>	NP	
<i>hypodermic needle</i>	P	
<i>ihealth covid-19 ag home test</i>	NP	
<i>indicaid covid-19 ag home test</i>	NP	
<i>insulin syringe (0.3 ml, 0.5 ml, 1 ml)</i>	P	HSA
<i>insulin syringe u-500</i>	P	HSA
<i>integra needle</i>	P	
<i>integra syringe (syr 3 ml 21gx1 1/2", syr 3 ml 25gx5/8", syringe 3 ml 21gx1", syringe 3 ml 23gx1", syringe 3 ml 25gx1")</i>	P	
<i>inteliswab covid-19 home test</i>	NP	
<i>interlink syringe</i>	P	
<i>lancets</i>	P	HSA
<i>lancing device</i>	P	HSA
<i>lancing device/lancets kit</i>	P	HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>lifeshield blunt cannula</i>	P	
<i>lite touch (syr 0.3 ml, 0.5 ml syr, syr 0.5 ml, 1 ml syr, syr 1 ml)</i>	P	HSA
<i>luer lock syringe</i>	P	
<i>luer slip tip syringe tray</i>	P	
<i>luer-lok syringe (syringe 1 ml, syringe 3 ml, syringe 5 ml, syringe 20 ml)</i>	P	
<i>luer-lok syringe-needle</i>	P	
<i>luer-lok tip syringe</i>	P	
<i>luerslip syringe</i>	P	
<i>luminopia</i>	NP	
<i>magellan insulin safety syrng (syr 0.3 ml, syr 0.5 ml, syringe 1 ml)</i>	P	HSA
<i>magellan safety needle (ndl 18g 1-1/2", needle 25g 1")</i>	P	
<i>magellan safety syringe</i>	P	
<i>magellan tb safety syringe</i>	P	
<i>magellan tuberculin syringe</i>	P	
<i>maxi-comfort (ins 0.5 ml 28g, ins 1 ml 28gx1/2")</i>	P	HSA
<i>medlance plus special blade</i>	P	HSA
<i>microchamber</i>	P	HSA
<i>microspacer</i>	P	HSA
<i>microtainer lancets</i>	P	HSA
<i>monoject (3 ml syringe 25gx1", syringe 35 ml, syringe 140 ml)</i>	P	
<i>monoject 0.5 ml syrn 28gx1/2"</i>	P	HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>monoject allergy tray-needle</i>	P	
<i>monoject control syringe</i>	P	
<i>monoject filter needle</i>	P	
<i>monoject insulin safety syring</i>	P	HSA
<i>monoject luer lock tb syringe</i>	P	
<i>monoject magellan (syringe, syringe 1 ml, syringe 3 ml)</i>	P	
<i>monoject pharmacy tray</i>	P	
<i>monoject syringe</i>	P	
<i>monoject syringe pharmacy tray</i>	P	
<i>monoject tb</i>	P	
<i>monoject tb safety syringe</i>	P	
<i>monoject tb syringe (monoject 1 ml tb syrn 25x5/8", monoject tb 1 ml syrn 26x3/8", monoject tb 1 ml syrn 27gx1/2, monoject tb safety syrn 1 ml, monoject tb syrn 25gx5/8", monoject tb syrn 26gx3/8", monoject tb syrn 27gx1/2", monoject tuberculin syr 1 ml, tuberculin syringes)</i>	P	
<i>monoject tuberculin syringe</i>	P	
<i>needle (eclipse needle 18gx1 1/2", needle 18gx1 1/2", needle 23gx1 1/2", needle 23gx1")</i>	P	
<i>needles</i>	P	
<i>nokor admix needle</i>	P	
<i>bd nokor needle 18gx1"</i>	P	
<i>norm-ject syringe (syringe 10 ml, syringe 20 ml)</i>	P	
<i>norm-ject tuberkulin syringe</i>	P	
<i>novopen echo</i>	P	HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>ohc covid-19 antigen home test</i>	NP	
<i>omnipod 5 (g6/libre 2 plus)</i>	P	HSA PA QPD 1.0 per day
<i>omnipod 5 dexg7g6 intro(gen 5)</i>	P	QL MAX 1 / 720 DAYS HSA PA
<i>omnipod 5 dexg7g6 pods (gen 5)</i>	P	HSA PA QPD 1.0 per day
<i>omnipod 5 g6-g7 intro kt(gen5)</i>	P	QL max 1 / 720 days HSA PA
<i>omnipod 5 g6-g7 pods (gen 5)</i>	P	HSA PA QPD 1.0 per day
<i>omnipod 5 intro(g6/libre2plus)</i>	P	QL max 1 / 720 days HSA PA
<i>omnipod dash intro kit (gen 4)</i>	P	QL MAX 1 / 720 DAYS HSA PA
<i>omnipod dash pods (gen 4)</i>	P	HSA PA QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>on-go covid-19 ag at home test</i>	NP	
<i>onetouch ultra control soln</i>	P	HSA
<i>onetouch verio high cntrl soln</i>	P	HSA
<i>onetouch verio mid cntrl soln</i>	P	HSA
<i>optichamber diamond (vhc, w-lrg mask, w-med mask, w-sml mask)</i>	P	HSA
<i>panda mask</i>	P	HSA
<i>pediatric panda mask</i>	P	HSA
<i>pen needles, diabetic</i>	P	HSA
<i>perfect point safety needle</i>	P	
<i>pilot covid-19 at-home test</i>	NP	
<i>pocket chamber</i>	P	HSA
<i>pogo automatic test cartridge</i>	NP	ST HSA QPD 6.667 per day
<i>poly hub needle</i>	P	
<i>precisionglide</i>	P	
<i>precisionglide needle</i>	P	
<i>pro comfort spacer with mask (spacer-adult, spacer-child, spacer-infant)</i>	P	HSA
<i>procare spacer with adult mask</i>	P	HSA
<i>procare spacer with child mask</i>	P	HSA
<i>prochamber</i>	P	HSA
<i>pure comfort spacer with mask</i>	P	HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>quickvue at-home covid-19 test</i>	NP	
<i>rapid sars-cov-2 ag home test</i>	NP	
<i>regular bevel needles (18gx1", 18gx1.5", 20gx1", 20gx1.5", 23gx0.75", 25gx0.625", 25gx1.5", 26gx0.5", 27gx0.5")</i>	P	
<i>riteflo</i>	P	HSA
<i>safetyglide allergy syringe</i>	P	
<i>safetyglide needle (needle, needle 18gx1.5", needle 21gx1", needle 21gx1.5", needle 23g 40mm, needle 25gx1", needle 27gx5/8")</i>	P	
<i>bd safetyglide syringe 27gx5/8</i>	P	HSA
<i>safetyglide syringe (safetyglide 3 ml syringe, syringe-safety glide)</i>	P	
<i>safetyglide tb syringe (tb 1 ml syr, tb 1ml 27g 10mm, tuberculin syr)</i>	P	
<i>short bevel needles</i>	P	
<i>slip-tip syringe</i>	P	
<i>space chamber</i>	P	HSA
<i>space chamber-large mask</i>	P	HSA
<i>space chamber-medium mask</i>	P	HSA
<i>space chamber-small mask</i>	P	HSA
<i>specialty use needles</i>	P	
<i>speedyswab covid-19 home test</i>	NP	
<i>sure comfort (0.3 ml syringe, 0.5 ml syringe, 1 ml syringe, 3/10 ml syringe)</i>	P	HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>syringe (bd 3 ml syringe, bd 10 ml control syringe, bd 10 ml syringe, bd 10 ml syringe bulk, bd 20 ml syringe, bd luer-lok 5 ml syringe, bd slip tip 5 ml syringe, bd syringe 3 ml, bd syringe 30 ml, syringe 35 ml)</i>	P	
<i>syringe bulk</i>	P	
<i>syringe luer-lok</i>	P	
<i>syringe luer-lok sterile</i>	P	
<i>syringe slip tip (syringe 10 ml, syringe 50 ml)</i>	P	
<i>syringe with needle</i>	P	
<i>syringe with needle disp</i>	P	
<i>syringe without needle (syringe 12ml, pharm tray pk, syringe 20ml, pharm tray pk, syringe 35ml, pharm tray pk, syringe 60ml, pharm tray pk, syringe w-o ndl 20 ml-non-strl, syringe w-o ndl 35 ml-non-strl, syringe w-o needle 60 ml, syringe w-o needle 140 ml)</i>	P	
<i>syringe-precisionglide needle</i>	P	
<i>tb syringe</i>	P	
<i>td gold level 2 control sol</i>	NP	ST HSA QPD 6.8 per day
<i>thin wall needles</i>	P	
<i>toomey syringe</i>	P	
<i>topcare ultra comfort</i>	P	HSA
<i>transfer needle</i>	P	



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>true comfort pro ins syringe (cmfrt 0.5ml 30g 5/16", cmfrt 0.5ml 31g 5/16", cmfrt 0.5ml 32g 5/16", comfort 1 ml 30g 1/2", comfort 1ml 30g 5/16", comfort 1ml 31g 5/16", comfort 1ml 32g 5/16", comfrt 0.5ml 30g 1/2")</i>	P	HSA
<i>true comfort safe insulin syrg (comfort 0.5 ml 30g 1/2", comfort 0.5ml 30g 5/16", comfort 0.5ml 31g 5/16", comfort sfty 1ml 30g 1/2", comfrt sfty 1ml 30g 5/16", comfrt sfty 1ml 31g 5/16", comfrt sfty 1ml 32g 5/16")</i>	P	HSA
<i>tuberculin slip-tip syringe</i>	P	
<i>tuberculin syringe (bd tb syringe 25gx5/8", bd tb syringe 26gx3/8", bd tb syringe 27gx1/2", bd tb syringe 27gx1/2", bd tuberculin 1 ml syringe, tuberculin syringe)</i>	P	
<i>tuberculin syringe-needle</i>	P	
<i>twinpak dual cannula</i>	P	
<i>ulticare (ins 0.3 ml 30gx1/2", ins 0.5 ml 30gx1/2", ins syr 1 ml 30gx1/2", syr 0.3 ml 30gx1/2", syr 0.3 ml 31gx5/16", syr 0.5 ml 30gx1/2", syr 0.5 ml 31gx5/16", syr 1 ml 31gx5/16", syringe 1 ml 30gx1/2")</i>	P	HSA
<i>ulticare (tb 1 ml 25gx1", tb 1ml 25gx5/8)</i>	P	
<i>ulticare low dead space syring (syr 1 ml 22g 1.5", syr 3 ml 22gx1.5")</i>	P	
<i>ulticare safety syringe (3 ml 21gx1-1/2, 3 ml 22gx1", 3 ml 22gx1-1/2, 3 ml 23gx1", 3 ml 25gx1", 3 ml 25gx5/8", syringe 3 ml)</i>	P	
<i>ulticare tb safety syringe</i>	P	
<i>ultiguard safepack-insulin syr (safe0.3ml 30g 12.7mm, safe0.5ml 30g 12.7mm, safe 1ml 30g 12.7mm, safepack 1ml 31g 8mm, safepk 0.3ml 31g 8mm, safepk 0.5ml 31g 8mm)</i>	P	HSA
<i>ultra comfort (cft 0.3 ml 29gx1/2" (1/2), gnp c 0.3ml 29gx1/2" (1/2))</i>	P	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>ultra comfort (drug mart ultra comfort syr, gnp ult cmfrt 0.5 ml 29gx1/2", gnp ultr cmfrt 0.5 ml 28gx1/2", gnp ultr comfort 1 ml 29gx1/2", gnp ultra comfort 0.5 ml syr, gnp ultra comfort 1 ml syringe, gnp ultra comfort 3/10 ml syr, gnp ultra comfrt 1 ml 28gx1/2", ultra comfort 0.3 ml 29gx1/2", ultra comfort 0.3 ml syringe, ultra comfort 0.5 ml 29gx1/2", ultra comfort 0.5 ml syringe, ultra comfort 1 ml 28gx1/2", ultra comfort 1 ml 29gx1/2", ultra comfort 1 ml 30gx5/16", ultra comfort 1 ml syringe)</i>	P	HSA
<i>ultra-thin ii (ins 0.3 ml 30g, ins 0.3 ml 31g, ins 0.5 ml 29g, ins 0.5 ml 30g, ins 0.5 ml 31g, 1 ml 31gx5/16", ins syr 1 ml 29g, ins syr 1 ml 30g)</i>	P	HSA
<i>vanishpoint (0.5 ml 30gx1/2" sy, u-100 29x1/2 syr)</i>	P	HSA
<i>vanishpoint (1 ml tb syr 25x5/8, 1 ml tb syr 27x1/2, syringe 1 ml 25x1", 3 ml 21gx1" syringe, 3 ml 22gx1.5" syrg, 20gx1" 3 ml syringe, 21gx1" 5 ml syringe, 21gx1.5" 3 ml syr, 22gx1" 3 ml syr, 22gx1-1/2" 5 ml sy, 23gx1" 3 ml syringe, 23gx1-1/2 3 ml syr, 25gx1" 3 ml syringe, 25gx5/8" 3 ml syr)</i>	P	
<i>vanishpoint syr 3 ml 25g 38mm</i>	P	HSA
<i>vanishpoint syringe (5 ml 21gx1-1/2", 10 ml 21gx1-1/2")</i>	P	
<i>vortex (adult mask, holding chamber)</i>	P	HSA
<i>vortex vhc frog mask</i>	P	HSA
<i>vortex vhc ladybug mask</i>	P	HSA
<i>vortex vhc pediatric mask</i>	P	HSA
<i>yale needles</i>	P	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>DIAGNOSTIC AGENTS</b>		
<b>ADRENOCORTICAL INSUFFICIENCY</b>		
ACTHAR	NP	S PA
ACTHAR SELFJECT	NP	S PA
CORTROPHIN GEL 400 UNIT/5 ML	NP	S PA
CORTROPHIN GEL 80 UNIT/ML VIAL	NP	S PA
<b>DIABETES MELLITUS</b>		
<i>accu-chek aviva plus</i>	NP	ST HSA QPD 6.8 per day
<i>accu-chek guide test strip</i>	NP	ST HSA QPD 6.8 per day
<i>accu-chek smartview test strip</i>	NP	ST HSA QPD 6.8 per day
<i>accutrend glucose test strip</i>	NP	ST HSA QPD 6.8 per day
<i>advanced glucose test strip</i>	NP	ST HSA QPD 6.8 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>advanced glucose test strips</i>	NP	ST HSA QPD 6.8 per day
<i>advocate redi-code test strip</i>	NP	ST HSA QPD 6.8 per day
<i>advocate redi-code+</i>	NP	ST HSA QPD 6.8 per day
<i>advocate test strip</i>	NP	ST HSA QPD 6.8 per day
<i>agamatrix amp test strips</i>	NP	ST HSA QPD 6.8 per day
<i>assure 4 test strips</i>	NP	ST HSA QPD 6.8 per day
<i>assure platinum test strips</i>	NP	ST HSA QPD 6.8 per day
<i>assure platinum test strip</i>	NP	ST HSA QPD 6.8 per day
<i>assure prism multi test strips</i>	NP	ST HSA QPD 6.8 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>blood glucose test strip</i>	NP	ST HSA QPD 6.8 per day
<i>blulink glucose test strip</i>	NP	ST HSA QPD 6.8 per day
<i>caresens n test strips</i>	NP	ST HSA QPD 6.8 per day
<i>caretouch test strip</i>	NP	ST HSA QPD 6.8 per day
<i>clever choice micro test strip</i>	NP	ST HSA QPD 6.8 per day
<i>clever choice pro test strip</i>	NP	ST HSA QPD 6.8 per day
<i>clever choice talk test strips</i>	NP	ST HSA QPD 6.8 per day
<i>clever choice test strips</i>	NP	ST HSA QPD 6.8 per day
<i>clever choice voice+ tst strip</i>	NP	ST HSA QPD 6.8 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>contour next test strip (ndc: 00193727735)</i>	P	HSA QPD 6.8 per day
<i>contour next test strip (ndc: 00193727870)</i>	P	HSA QPD 6.8 per day
<i>contour next test strip (ndc: 00193730850)</i>	P	HSA QPD 6.8 per day
<i>contour next test strip (ndc: 00193731025)</i>	P	HSA QPD 6.8 per day
<i>contour next test strip (ndc: 00193731150)</i>	P	HSA QPD 6.8 per day
<i>contour next test strip (ndc: 00193731221)</i>	P	HSA QPD 6.8 per day
<i>contour plus test strip</i>	P	HSA QPD 6.8 per day
<i>contour test strip</i>	P	HSA QPD 6.8 per day
<i>diatrue plus test strip</i>	NP	ST HSA QPD 6.8 per day
<i>easy plus ii test strip</i>	NP	ST HSA QPD 6.8 per day
<i>easy step glucose test strips</i>	NP	ST HSA QPD 6.8 per day
<i>easy talk glucose test strip</i>	NP	ST HSA QPD 6.8 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>easy talk plus ii test strip</i>	NP	ST HSA QPD 6.8 per day
<i>easy touch blulink test strip</i>	NP	ST HSA QPD 6.8 per day
<i>easy touch test strip</i>	NP	ST HSA QPD 6.8 per day
<i>easy trak glucose test strip</i>	NP	ST HSA QPD 6.8 per day
<i>easy trak ii test strip</i>	NP	ST HSA QPD 6.8 per day
<i>easygluco test strips</i>	NP	ST HSA QPD 6.8 per day
<i>easymax glucose test strips</i>	NP	ST HSA QPD 6.8 per day
<i>easymax 15 glucose test strip</i>	NP	ST HSA QPD 6.8 per day
<i>element compact test strips</i>	NP	ST HSA QPD 6.8 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>element test strips</i>	NP	ST HSA QPD 6.8 per day
<i>embrace (, glucose)</i>	NP	ST HSA QPD 6.8 per day
<i>embrace evo test strips</i>	NP	ST HSA QPD 6.8 per day
<i>embrace pro test strip</i>	NP	ST HSA QPD 6.8 per day
<i>embrace talk test strip</i>	NP	ST HSA QPD 6.8 per day
<i>embrace wave glucose test strip</i>	NP	ST HSA QPD 6.8 per day
<i>evencare glucose test strips</i>	NP	ST HSA QPD 6.8 per day
<i>evencare g2 test strip</i>	NP	ST QPD 6.8 per day
<i>evencare g3 test strip</i>	NP	ST QPD 6.8 per day
<i>evencare mini glucose test strip</i>	NP	ST QPD 6.8 per day



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>evencare proview test strip</i>	NP	ST QPD 6.8 per day
<i>evolution test strips</i>	NP	ST HSA QPD 6.8 per day
<i>fora 6 connect glucose strip</i>	NP	ST HSA QPD 6.8 per day
<i>fora 6conn-gtel-tn'g adv strip</i>	NP	ST HSA QPD 6.8 per day
<i>fora d15g</i>	NP	ST HSA QPD 6.8 per day
<i>fora d20 glucose test strips</i>	NP	ST HSA QPD 6.8 per day
<i>fora d40-g31 test strips</i>	NP	ST HSA QPD 6.8 per day
<i>fora g20 glucose test strips</i>	NP	ST HSA QPD 6.8 per day
<i>fora g30-premium v10 test strp</i>	NP	ST HSA QPD 6.8 per day
<i>fora gd50 test strips</i>	NP	ST HSA QPD 6.8 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>fora gtel glucose test strip</i>	NP	ST HSA QPD 6.8 per day
<i>fora test strip</i>	NP	ST HSA QPD 6.8 per day
<i>fora tn'g advan pro test strip</i>	NP	ST HSA QPD 6.8 per day
<i>fora tn'g voice test strips</i>	NP	ST HSA QPD 6.8 per day
<i>fora v10 glucose test strip</i>	NP	ST HSA QPD 6.8 per day
<i>fora v10-v12-d10-d20 strips</i>	NP	ST HSA QPD 6.8 per day
<i>fora v12 glucose test strip</i>	NP	ST HSA QPD 6.8 per day
<i>fora v20 glucose test strips</i>	NP	ST HSA QPD 6.8 per day
<i>fora v30a glucose test strip</i>	NP	ST HSA QPD 6.8 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>foracare gd20 test strips</i>	NP	ST HSA QPD 6.8 per day
<i>foracare gd40</i>	NP	ST HSA QPD 6.8 per day
<i>fortiscare g1 test strip</i>	NP	ST HSA QPD 6.8 per day
<i>fortiscare glucose test strips</i>	NP	ST HSA QPD 6.8 per day
<i>freestyle insulinx test strip</i>	NP	ST HSA QPD 6.8 per day
<i>freestyle insulinx test strips</i>	NP	ST HSA QPD 6.8 per day
<i>freestyle lite test strip</i>	NP	ST HSA QPD 6.8 per day
<i>freestyle precision neo</i>	NP	ST HSA QPD 6.8 per day
<i>freestyle test strips</i>	NP	ST HSA QPD 6.8 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>ge100 blood glucose test strip</i>	NP	ST HSA QPD 6.8 per day
<i>ge333 blood glucose test strip</i>	NP	ST HSA QPD 6.8 per day
<i>gluco navii glucose test strip</i>	NP	ST HSA QPD 6.8 per day
<i>glucocard 01 sensor plus</i>	NP	ST HSA QPD 6.8 per day
<i>glucocard expression test strip</i>	NP	ST HSA QPD 6.8 per day
<i>glucocard shine test strips</i>	NP	ST HSA QPD 6.8 per day
<i>glucocard vital test strips</i>	NP	ST HSA QPD 6.8 per day
<i>glucocard vital sensor</i>	NP	ST HSA QPD 6.8 per day
<i>glucocom glucose</i>	NP	ST HSA QPD 6.8 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>glucose test strip</i>	NP	ST HSA QPD 6.8 per day
<i>goji blood glucose test strip</i>	NP	ST HSA QPD 6.8 per day
<i>harmony glucose test strip</i>	NP	ST QPD 6.8 per day
<i>healthpro glucose test strips</i>	NP	ST HSA QPD 6.8 per day
<i>iglucose test strip</i>	NP	ST HSA QPD 6.8 per day
<i>ihealth glucose test strip</i>	NP	ST HSA QPD 6.8 per day
<i>infinity test strips</i>	NP	ST HSA QPD 6.8 per day
<i>infinity voice test strip</i>	NP	ST HSA QPD 6.8 per day
<i>micro</i>	NP	ST HSA QPD 6.8 per day
<i>microdot test strips</i>	NP	ST HSA QPD 6.8 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>microdot xtra</i>	NP	ST HSA QPD 6.8 per day
<i>myglucohealth test strips</i>	NP	ST HSA QPD 6.8 per day
<i>neutek 2tek test strips</i>	NP	ST HSA QPD 6.8 per day
<i>nova max glucose test strips</i>	NP	ST HSA QPD 6.8 per day
<i>on call express test strip</i>	NP	ST HSA QPD 6.8 per day
<i>onetouch ultra test strip</i>	P	HSA QPD 6.8 per day
<i>onetouch verio test strip</i>	P	HSA QPD 6.8 per day
<i>optium</i>	NP	ST QPD 6.8 per day
<i>optium ez</i>	NP	ST HSA QPD 6.8 per day
<i>pharmacist choice test strips</i>	NP	ST HSA QPD 6.8 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>pip blood glucose test strip</i>	NP	ST HSA QPD 6.8 per day
<i>platinum test strip</i>	NP	ST HSA QPD 6.8 per day
<i>precision pcx</i>	NP	ST QPD 6.8 per day
<i>precision pcx plus</i>	NP	ST QPD 6.8 per day
<i>precision point of care</i>	NP	ST QPD 6.8 per day
<i>precision q-i-d</i>	NP	ST QPD 6.8 per day
<i>precision xtra test strips</i>	NP	ST HSA QPD 6.8 per day
<i>premier test strip</i>	NP	ST HSA QPD 6.8 per day
<i>premium blood glucose test</i>	NP	ST HSA QPD 6.8 per day
<i>premium v10 glucose test strip</i>	NP	ST HSA QPD 6.8 per day
<i>pro voice v8-v9 test strip</i>	NP	ST HSA QPD 6.8 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>prodigy no coding</i>	NP	ST HSA QPD 6.8 per day
<i>quintet glucose test strips</i>	NP	ST HSA QPD 6.8 per day
<i>quintet ac glucose test strips</i>	NP	ST HSA QPD 6.8 per day
<i>refuah plus test strips</i>	NP	ST HSA QPD 6.8 per day
<i>reliion confirm-micro</i>	NP	ST HSA QPD 6.8 per day
<i>reliion prime test strips</i>	NP	ST HSA QPD 6.8 per day
<i>rightest gs100 test strip</i>	NP	ST HSA QPD 6.8 per day
<i>rightest gs300 test strip</i>	NP	ST HSA QPD 6.8 per day
<i>rightest gs550 test strip</i>	NP	ST HSA QPD 6.8 per day



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>rightest gt333 test strip</i>	NP	ST HSA QPD 6.8 per day
<i>smart sense test strips</i>	NP	ST HSA QPD 6.8 per day
<i>smartest test</i>	NP	ST HSA QPD 6.8 per day
<i>solus v2 test strips</i>	NP	ST HSA QPD 6.8 per day
<i>sure-test easyplus mini strip</i>	NP	ST QPD 6.8 per day
<i>telcare test strips</i>	NP	ST HSA QPD 6.8 per day
<i>test n'go glucose test strip</i>	NP	ST HSA QPD 6.8 per day
<i>test strips</i>	NP	ST HSA QPD 6.8 per day
<i>true metrix glucose test strip</i>	NP	ST HSA QPD 6.8 per day
<i>truetest test strips</i>	NP	ST HSA QPD 6.8 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>truetrack test strip</i>	NP	ST HSA QPD 6.8 per day
<i>relion ultima test strips</i>	NP	ST HSA QPD 6.8 per day
<i>unistrip1</i>	NP	ST HSA QPD 6.8 per day
<i>vivaguard ino test strip</i>	NP	ST HSA QPD 6.8 per day
<i>wavesense jazz</i>	NP	ST HSA QPD 6.8 per day
<i>wavesense presto test strips</i>	NP	ST HSA QPD 6.8 per day
<b>PHEOCHROMOCYTOMA</b>		
DEMSEER	NP	HSA
<i>metyrosine</i>	np	HSA
<b>DISEASE-MODIFYING ANTIRHEUMATIC DRUGS</b>		
<b>DISEASE-MODIFYING ANTIRHEUMAT DRUGS MISC</b>		
ENTYVIO PEN	P	S PA QPD 0.049 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ORENCIA 125 MG/ML SYRINGE	NP	S PA QPD 0.143 per day
ORENCIA 50 MG/0.4 ML SYRINGE	NP	S PA QPD 0.058 per day
ORENCIA 87.5 MG/0.7 ML SYRINGE	NP	S PA QPD 0.1 per day
ORENCIA CLICKJECT	NP	S PA QPD 0.143 per day
IGG1 MONOCLONAL ANTIBODIES		
BENLYSTA (200 MG/ML AUTOINJECT, 200 MG/ML SYRINGE)	NP	S PA QPD 0.143 per day
MONOCARBOXYLIC ACID AMIDE AGENTS		
ARAVA	NP	
<i>leflunomide</i>	np	
T-CELL BLOCKERS (90:24)		
LUPKYNIS	NP	S PA QPD 6 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>DIURETICS</b>		
<b>LOOP DIURETICS (40:28)</b>		
<i>bumetanide (0.5 mg tablet, 1 mg tablet)</i>	p	HSA
<i>bumetanide 2 mg tablet</i>	np	HSA
EDECIN	NP	
<i>ethacrynic acid</i>	np	
FUROSCIX	NP	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #e31a1c; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8b5722; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> <div> <p>MAX 8 / 180 DAYS</p> </div> </div>
<i>furosemide 40 mg/5 ml soln</i>	NP	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <div style="background-color: #004a7c; color: white; padding: 2px 5px; border-radius: 3px;">HSA</div> <div style="background-color: #8b5722; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #0070c0; color: white; padding: 2px 5px; border-radius: 3px;">QPD</div> </div> <div> <p>75.0 per day</p> </div> </div>
<i>furosemide (10 mg/ml solution, 20 mg tablet, 40 mg tablet, 80 mg tablet)</i>	p	HSA
LASIX	NP	HSA
SOAANZ	NP	HSA
<i>torseamide</i>	p	HSA
<b>POTASSIUM-SPARING DIURETICS</b>		
<i>amiloride hcl</i>	p	HSA
<i>amiloride-hydrochlorothiazide</i>	p	HSA
DYRENIUM	NP	HSA
MAXZIDE	NP	HSA
MAXZIDE-25 MG	NP	HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>triamterene</i>	np	HSA
<i>triamterene-hydrochlorothiazid (37.5-25 mg cp, 37.5-25 mg tb, 75-50 mg tab)</i>	p	HSA
<b>THIAZIDE DIURETICS</b>		
DIURIL	NP	HSA PA QPD 40.0 per day
<i>hydrochlorothiazide (12.5 mg cp, 12.5 mg tb, 25 mg tab, 50 mg tab)</i>	p	HSA
<b>THIAZIDE-LIKE DIURETICS</b>		
<i>chlorthalidone</i>	p	HSA
<i>indapamide</i>	p	HSA
<i>metolazone</i>	np	HSA
THALITONE	NP	HSA
<b>VASOPRESSIN ANTAGONISTS</b>		
JYNARQUE 30 MG TABLET	NP	S PA QPD 1 per day
JYNARQUE (15 MG TABLET, 15 MG-15 MG TABLET, 30 MG-15 MG TABLET, 45 MG-15 MG TABLET, 60 MG-30 MG TABLET, 90 MG-30 MG TABLET)	NP	S PA QPD 2 per day
SAMSCA 15 MG TABLET	NP	QL MAX 30 / 365 DAYS S
SAMSCA 30 MG TABLET	NP	QL MAX 60 / 365 DAYS S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>tolvaptan 15 mg tablet</i>	np	<div style="background-color: #6a3d9a; color: white; padding: 2px;">QL</div> <div style="background-color: #d62728; color: white; padding: 2px;">S</div> MAX 30 / 365 DAYS
<i>tolvaptan 30 mg tablet</i>	np	<div style="background-color: #6a3d9a; color: white; padding: 2px;">QL</div> <div style="background-color: #d62728; color: white; padding: 2px;">S</div> MAX 60 / 365 DAYS
<i>tolvaptan 15 mg tablet (apotex)</i>	NP	<div style="background-color: #6a3d9a; color: white; padding: 2px;">QL</div> <div style="background-color: #d62728; color: white; padding: 2px;">S</div> MAX 30 / 365 DAYS
<b>DOPAMINE RECEPTOR AGONISTS</b>		
<b>ERGOT-DERIV. DOPAMINE RECEPTOR AGONISTS</b>		
<i>bromocriptine mesylate (2.5 mg tablet, 5 mg capsule)</i>	np	
<i>cabergoline</i>	np	
CYCLOSET	NP	<div style="background-color: #1f77b4; color: white; padding: 2px;">HSA</div>
PARLODEL (2.5 MG TABLET, 5 MG CAPSULE)	NP	
<b>NONERGOT-DERIV. DOPAMINE RECEPTOR AGONIST</b>		
APOKYN	NP	<div style="background-color: #d62728; color: white; padding: 2px;">S</div>
<i>apomorphine hcl</i>	np	<div style="background-color: #d62728; color: white; padding: 2px;">S</div>
KYNMOBI (10 MG FILM, 15 MG FILM, 20 MG FILM, 25 MG FILM, 30 MG FILM)	P	<div style="background-color: #d62728; color: white; padding: 2px;">S</div>
MIRAPEX ER	NP	
NEUPRO	NP	
<i>pramipexole dihydrochloride</i>	p	
<i>pramipexole er</i>	np	
<i>ropinirole er</i>	np	
<i>ropinirole hcl</i>	p	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ELECTROLYTIC, CALORIC, AND WATER BALANCE		
ACIDIFYING AGENTS		
K-PHOS NEUTRAL	NP	
K-PHOS NO.2	P	
K-PHOS ORIGINAL	NP	
PHOSPHA 250 NEUTRAL	np	
PHOSPHO-TRIN 250 NEUTRAL	np	
PHOSPHO-TRIN K500	np	
PHOSPHOROUS 250 MG TABLET	np	
WES-PHOS 250 NEUTRAL	np	
ALKALINIZING AGENTS		
CYTRA-2	np	
<i>potassium citrate er</i>	np	
<i>sodium citrate-citric acid</i>	np	
UROCIT-K	NP	
AMMONIA DETOXICANTS		
BUPHENYL (500 MG TABLET, POWDER)	NP	S PA
CARBAGLU	NP	S PA
<i>carglumic acid</i>	np	S PA
CONSTULOSE	np	
ENULOSE	p	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GENERLAC	p	
KRISTALOSE	NP	
<i>lactulose (10 gm packet, 20 gm packet)</i>	NP	
<i>lactulose (10 gm/15 ml soln cup, 10 gm/15 ml solution, 20 gm/30 ml soln cup, 20 gm/30 ml solution)</i>	np	
<i>lactulose 10 gm/15 ml solution (rising pharma)</i>	p	
LITHOSTAT	NP	
OLPRUVA	NP	S PA
PHEBURANE	NP	QL max 45 days / fill S PA
RAVICTI	NP	S PA
<i>sodium phenylbutyrate (500mg tb, powder)</i>	np	S PA
<b>CALORIC AGENTS</b>		
DOJOLVI	NP	S PA
<b>IRRIGATING SOLUTIONS</b>		
HYPER-SAL 7% VIAL	NP	
NEBUSAL 3% VIAL	p	
PULMOSAL	p	
<i>sodium chloride (3% vial, 7% vial)</i>	p	



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>REPLACEMENT PREPARATIONS</b>		
KLOR-CON	np	
KLOR-CON 10	p	
KLOR-CON 8	p	
KLOR-CON M10	p	
KLOR-CON M15	np	
KLOR-CON M20	p	
POKONZA	NP	
<i>potassium chloride (cl 10% (20 meq/15ml) cup, cl 10% (40 meq/30ml) cup, cl 20% (40 meq/15ml) cup, cl 10% (20 meq/15ml), cl 10% (40 meq/30ml), cl 20 meq packet, cl 20% (40 meq/15ml), cl er 15 meq tablet)</i>	np	
<i>potassium chloride (er 8 capsule, er 8 tablet, er 10 capsule, er 10 tablet, er 20 tablet)</i>	p	
<b>URICOSURIC AGENTS</b>		
<i>probenecid</i>	np	
<i>probenecid-colchicine</i>	np	
<b>EMOLLIENTS, DEMULGENTS, AND PROTECTANTS</b>		
<b>BASIC LOTIONS AND LINIMENTS</b>		
<i>ammonium lactate 12% lotion</i>	np	
<b>BASIC OINTMENTS AND PROTECTANTS</b>		
<i>ammonium lactate 12% cream</i>	np	
<i>calcipotriene (cream, ointment)</i>	np	
<i>calcipotriene (foam, solution)</i>	NP	
<i>calcipotriene-betamethasone (oint, susp)</i>	np	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DOVONEX	NP	
ENSTILAR	P	
<i>nitroglycerin 0.4% ointment</i>	np	
RECTIV	NP	
SANTYL	NP	
SORILUX	NP	
TACLONEX (0.005%-0.064% SUSPENS, OINTMENT)	NP	
VTAMA	NP	PA
WYNZORA	NP	
ENZYMES		
ENZYME COFACTORS/CHAPERONES		
		S
GALAFOLD	NP	PA
		QPD 0.5 per day
JAVYGTOR (100 MG POWDER PACKET, 100 MG TABLET, 500 MG POWDER PACKET)	np	S
		PA
KUVAN (100 MG POWDER PACKET, 100 MG TABLET, 500 MG POWDER PACKET)	NP	S
		PA
<i>nitisinone</i>	np	S
NITYR	P	S
ORFADIN (2 MG CAPSULE, 5 MG CAPSULE, 10 MG CAPSULE, 20 MG CAPSULE)	NP	S
ORFADIN 4 MG/ML SUSPENSION	P	S
<i>sapropterin dihydrochloride (100 mg powder pkt, 100 mg tablet, 500 mg powder pkt)</i>	np	S
		PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ENZYME INHIBITORS		
CERDELGA	P	S PA QPD 2 per day
<i>miglustat</i>	np	S PA QPD 3 per day
OPFOLDA	NP	S PA QPD 0.286 per day
VIJOICE 50 MG GRANULE PACKET	NP	S PA QPD 1.0 per day
VIJOICE (50 MG TABLET, 125 MG TABLET)	NP	S PA QPD 1 per day
VIJOICE 250 MG DAILY DOSE PACK	NP	S PA QPD 2.0 per day
YARGESA	np	S PA QPD 3.0 per day
ZAVESCA	NP	S PA QPD 3.0 per day
ZOKINVY	P	S PA QPD 4 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PALYNZIQ	NP	S PA
REVCIVI	P	S
STRENSIQ	P	S PA
SUCRAID 17,000 UNIT/2 ML SOLN	NP	S PA QPD 10.0 per day
SUCRAID 8,500 UNIT/ML SOLN	NP	S PA QPD 10 per day
ESTROGENS AND ANTIESTROGENS ESTROGEN AGONIST-ANTAGONISTS		
CLOMID	np	
<i>clomiphene citrate</i>	P	
EVISTA	NP	C [ACA] Age Edits Apply: 35+ years HSA ACA
FARESTON	NP	S
OSPHENA	NP	
<i>raloxifene hcl</i>	np	C [ACA] Age Edits Apply: 35+ years HSA ACA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SOLTAMOX	P	C [ACA] Age Edits Apply: 35+ years HSA ACA
<i>tamoxifen citrate</i>	p	C [ACA] Age Edits Apply: 35+ years HSA ACA
<i>toremifene citrate</i>	np	S
<b>ESTROGENS</b>		
ACTIVELLA	NP	HSA
AMABELZ	np	HSA
ANGELIQ	NP	
BIJUVA	NP	
CLIMARA	NP	HSA QPD 0.143 per day
CLIMARA PRO	P	HSA QPD 0.143 per day
COMBIPATCH	NP	QPD 0.286 per day
DELESTROGEN	NP	
DEPO-ESTRADIOL	NP	
DIVIGEL (0.25 MG GEL PACKET, 0.5 MG GEL PACKET, 0.75 MG GEL PACKET, 1 MG GEL PACKET)	NP	QPD 1 per day
DIVIGEL 1.25 MG GEL PACKET	NP	QPD 1.25 per day
DOTTI	np	HSA QPD 0.286 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DUAVEE	P	HSA
ELESTRIN	NP	QPD 0.867 per day
ESTRACE 0.01% CREAM	NP	QL MAX 255 / 365 DAYS
ESTRACE (0.5 MG TABLET, 1 MG TABLET, 2 MG TABLET)	NP	HSA
<i>estradiol 0.01% cream</i>	np	QL MAX 255 / 365 DAYS
<i>estradiol (0.06% 1.25g gel pump, 0.1% (1.25mg) gel pk)</i>	np	QPD 1.25 per day
<i>estradiol ((0.25mg) gel pk, (0.5mg) gel pkt, (0.75mg) gel pk, (1 mg) gel pkt)</i>	np	QPD 1.0 per day
<i>estradiol (0.5 mg tablet, 1 mg tablet, 2 mg tablet)</i>	p	HSA
<i>estradiol 10 mcg vaginal insrt</i>	np	
<i>estradiol (once weekly)</i>	np	HSA QPD 0.143 per day
<i>estradiol (twice weekly)</i>	np	HSA QPD 0.286 per day
<i>estradiol valerate</i>	np	
<i>estradiol-norethindrone acetat</i>	np	HSA
ESTRING	P	QL max 1 / 90 days
ESTROGEL	NP	QPD 1.25 per day
EVAMIST	NP	QL MAX 40.5 / 93 DAYS
FEMRING	NP	QL max 1 / 90 days
FYAVOLV	np	HSA
IMVEXXY (4 MCG PACK, 10 MCG PAK)	NP	QPD 0.286 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
IMVEXXY (4 MCG PACK, 10 MCG PACK)	NP	QL max 18 / 180 days
JINTELI	np	HSA
LYLLANA	np	HSA QPD 0.286 per day
MENEST	NP	
MENOSTAR	NP	HSA QPD 0.143 per day
MIMVEY	np	HSA
MINIVELLE	NP	HSA QPD 0.286 per day
<i>norethindron-ethinyl estradiol (norethin-eth 1 mg-5 mcg, norethind-eth 0.5-2.5)</i>	np	HSA
PREFEST	NP	HSA
PREMARIN VAGINAL CREAM-APPL	NP	
PREMARIN (0.3 MG TABLET, 0.45 MG TABLET, 0.625 MG TABLET, 0.9 MG TABLET, 1.25 MG TABLET)	P	HSA
PREMPHASE	P	HSA
PREMPRO	P	HSA
VAGIFEM	NP	
VIVELLE-DOT	NP	HSA QPD 0.286 per day
YUVAFEM	np	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EYE, EAR, NOSE AND THROAT (EENT) PREPS. ANTI-INFLAMMATORY AGENTS (EENT)		
CEQUA	NP	PA QPD 2 per day
<i>cyclosporine 0.05% eye emuls</i>	np	PA QPD 2.0 per day
MIEBO	NP	PA QPD 0.1 per day
OXERVATE	NP	QL MAX 56 / 56 DAYS S PA
RESTASIS	NP	PA QPD 2 per day
RESTASIS MULTIDOSE	NP	PA QPD 0.184 per day
VERKAZIA	NP	S PA QPD 4 per day
VEVYE	NP	PA QPD 0.067 per day
XIIDRA	NP	PA QPD 2.0 per day
ANTIALLERGIC AGENTS		
ALOMIDE	NP	
<i>azelastine hcl 0.05% drops</i>	p	



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>azelastine hcl (0.1% (137 mcg) sphy, 0.15% nasal spray)</i>	p	QPD 2 per day
<i>azelastine-fluticasone</i>	np	QPD 0.767 per day
<i>bepotastine besilate</i>	np	
BEPREVE	NP	
<i>cromolyn 4% eye drops</i>	P	
DYMISTA	NP	QPD 0.767 per day
<i>epinastine hcl</i>	np	
<i>olopatadine hcl (0.1% drops, 0.2% drop)</i>	p	
<i>olopatadine 665 mcg nasal sphy</i>	np	QPD 1.017 per day
PATANASE	NP	QPD 1.017 per day
RYALTRIS	NP	QPD 0.967 per day
ZERVIATE	NP	
EENT DRUGS, MISCELLANEOUS		
<i>ipratropium 0.03% spray</i>	np	QPD 2.0 per day
<i>ipratropium 0.06% spray</i>	np	QPD 1.5 per day
LACRISERT	NP	
TYRVAYA	NP	PA QPD 0.28 per day
LOCAL ANESTHETICS (EENT)		
<i>lidocaine hcl 4% solution</i>	np	PA QPD 5.0 per day
<i>lidocaine hcl viscous</i>	p	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>MACULAR DEGENERATION AGENTS</b>		
CYSTADROPS	NP	S
CYSTARAN	NP	S
<b>MYDRIATICS</b>		
<i>atropine 1% eye drops (alcon)</i>	NP	
<i>atropine 1% eye drops/pf</i>	NP	
<i>atropine 1% eye drops</i>	np	
CYCLOGYL	NP	
CYCLOMYDRIL	NP	
<i>cyclopentolate hcl</i>	p	
ISOPTO ATROPINE	NP	
<b>VASOCONSTRICTORS</b>		
UPNEEQ	NP	
<b>FIRST GENERATION ANTIHISTAMINES</b>		
<b>ETHANOLAMINE DERIVATIVES</b>		
<i>clemastine 0.5 mg/5 ml syrup</i>	np	
<i>clemastine fum 2.68 mg tablet</i>	NP	
DIPHEN (12.5 MG/5 ML ELIXIR, 12.5 MG/5 ML SOLUTION)	np	
<i>diphenhydramine hcl (12.5mg/5ml, 25 mg/10ml)</i>	NP	
<b>FIRST GEN. ANTIHIST. DERIVATIVES, MISC.</b>		
<i>cyproheptadine hcl (2 mg/5 ml soln, 2 mg/5 ml syrup, 4 mg tablet)</i>	p	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>PHENOTHIAZINE DERIVATIVES</b>		
<i>promethazine hcl (12.5 mg suppos, 25 mg suppository)</i>	np	
<i>promethazine hcl (6.25 mg/5 ml soln, 6.25 mg/5 ml syrp, 12.5 mg tablet, 25 mg tablet, 50 mg tablet)</i>	p	
<i>promethazine vc</i>	np	
<i>promethazine-phenylephrine hcl</i>	np	
PROMETHEGAN (12.5 MG SUPPOS, 25 MG SUPPOSITORY)	np	
PROMETHEGAN 50 MG SUPPOSITORY	P	
<b>PROPYLAMINE DERIVATIVES</b>		
<i>dexchlorpheniramine maleate</i>	NP	
RYCLORA	NP	
<b>GASTROINTESTINAL DRUGS</b>		
<b>ANTI-INFLAMMATORY AGENTS (GI DRUGS)</b>		
<i>alosetron hcl</i>	np	
APRISO	NP	
ASACOL HD	NP	
<i>balsalazide disodium</i>	np	
CANASA	NP	
COLAZAL	NP	
DELZICOL	NP	
DIPENTUM	NP	
LIALDA	NP	
LOTRONEX	NP	
<i>mesalamine (4 gm/60 ml enema, 800 mg dr tablet, 1,000 mg supp)</i>	np	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>mesalamine dr 1.2 gm tablet</i>	np	
<i>mesalamine dr</i>	np	
<i>mesalamine er (er 0.375 gram cap, er 500 mg capsule)</i>	np	
PENTASA	NP	
SFROWASA	NP	
<b>ANTIDIARRHEA AGENTS</b>		
<i>diphenoxylat-atrop 2.5-0.025/5</i>	P	
<i>diphenoxylate-atrop 2.5-0.025</i>	p	
LOMOTIL	NP	
<i>loperamide 2 mg capsule</i>	np	
MOTOFEN	NP	
MYTESI	NP	S
VIBERZI	P	
XERMELO	NP	S
<b>CATHARTICS AND LAXATIVES</b>		
CLENPIQ	NP	
GAVILYTE-C	P	
GAVILYTE-G	p	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #333; color: white; padding: 5px; margin-bottom: 5px;">C</div> <div style="font-size: 0.8em; margin-bottom: 5px;">[ACA] Age Edits Apply: 45-75 years</div> <div style="background-color: #003366; color: white; padding: 5px; margin-bottom: 5px;">HSA</div> <div style="background-color: #0099cc; color: white; padding: 5px;">ACA</div> </div>
GAVILYTE-N	np	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #333; color: white; padding: 5px; margin-bottom: 5px;">C</div> <div style="font-size: 0.8em; margin-bottom: 5px;">[ACA] Age Edits Apply: 45-75 years</div> <div style="background-color: #003366; color: white; padding: 5px; margin-bottom: 5px;">HSA</div> <div style="background-color: #0099cc; color: white; padding: 5px;">ACA</div> </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GOLYTELY	NP	
MOVIPREP	NP	
OSMOPREP	NP	
<i>peg 3350-electrolyte</i>	np	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #333; color: white; padding: 5px; margin-bottom: 5px;">C</div> <div style="font-size: 0.8em; margin-bottom: 5px;">[ACA] Age Edits Apply: 45-75 years</div> <div style="background-color: #003366; color: white; padding: 2px 5px; margin-bottom: 5px;">HSA</div> <div style="background-color: #0099cc; color: white; padding: 2px 5px;">ACA</div> </div>
<i>peg-3350 and electrolytes</i>	p	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #333; color: white; padding: 5px; margin-bottom: 5px;">C</div> <div style="font-size: 0.8em; margin-bottom: 5px;">[ACA] Age Edits Apply: 45-75 years</div> <div style="background-color: #003366; color: white; padding: 2px 5px; margin-bottom: 5px;">HSA</div> <div style="background-color: #0099cc; color: white; padding: 2px 5px;">ACA</div> </div>
<i>peg3350-sod sul-nacl-kcl-asb-c</i>	np	
PLENVU	NP	
<i>sod sulf-potass sulf-mag sulf</i>	np	
SUFLAVE	NP	
SUPREP	NP	
SUTAB	NP	
<b>CHOLELITHOLYTIC AGENTS</b>		
BYLVAY (200 MCG PELLETT, 400 MCG CAPSULE, 600 MCG PELLETT, 1,200 MCG CAPSULE)	NP	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #cc0000; color: white; padding: 2px 5px; margin-bottom: 5px;">S</div> <div style="background-color: #663300; color: white; padding: 2px 5px;">PA</div> </div>
CHENODAL	np	<div style="background-color: #cc0000; color: white; padding: 2px 5px;">S</div>
CHOLBAM	NP	<div style="background-color: #cc0000; color: white; padding: 2px 5px;">S</div>
CTEXTLI	NP	<div style="background-color: #cc0000; color: white; padding: 2px 5px;">S</div>
IQIRVO	NP	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #cc0000; color: white; padding: 2px 5px; margin-bottom: 5px;">S</div> <div style="background-color: #663300; color: white; padding: 2px 5px; margin-bottom: 5px;">PA</div> <div style="background-color: #0066cc; color: white; padding: 2px 5px;">QPD 1.0 per day</div> </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LIVMARLI 9.5 MG/ML ORAL SOLN	NP	S PA
OCALIVA	NP	S PA QPD 1 per day
RELTONE	NP	
URSO	NP	
URSO FORTE	NP	
<i>ursodiol (200 mg capsule, 400 mg capsule)</i>	NP	
<i>ursodiol (250 mg tablet, 300 mg capsule, 500 mg tablet)</i>	np	
<b>DIGESTANTS</b>		
CREON	P	
GATTEX (5 MG 30-VIAL KIT, 5 MG ONE-VIAL KIT)	NP	S PA
GATTEX 5 MG VIAL	NP	S PA
PANCREAZE	NP	ST
PERTZYE	NP	ST
VIOKACE	NP	ST
ZENPEP	P	
<b>GI DRUGS, MISCELLANEOUS</b>		
<i>dronabinol</i>	np	
IBSRELA	NP	PA QPD 2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MARINOL	NP	
<i>orlistat</i>	NP	HSA PA QPD 3 per day
SYNDROS	NP	PA
VOWST	NP	QL max 12 / 365 days S PA
XENICAL	NP	HSA PA QPD 3 per day
IMMUNOMODULATORY AGENTS (56:44)		
OMVOH 100 MG/ML SYRINGE	P	S PA QPD 0.072 per day
OMVOH 100 MG/ML PEN	P	S PA QPD 0.072 per day
VELSIPITY	NP	S PA QPD 1.0 per day
PROKINETIC AGENTS		
GIMOTI	NP	S
<i>metoclopramide hcl (5 mg/5 ml soln, 10 mg/10 ml sol)</i>	np	
<i>metoclopramide hcl (5 mg tablet, 10 mg tablet)</i>	p	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MOTEGRITY	NP	PA QPD 1 per day
<i>prucalopride</i>	np	PA QPD 1.0 per day
REGLAN	NP	
ZELNORM	NP	
GENITOURINARY SMOOTH MUSCLE RELAXANTS		
ANTIMUSCARINICS		
<i>darifenacin er</i>	np	QPD 1.0 per day
DETROL	NP	ST QPD 2.0 per day
DETROL LA	NP	ST QPD 1.0 per day
DITROPAN XL 10 MG TABLET	NP	ST QPD 2 per day
DITROPAN XL 5 MG TABLET	NP	ST QPD 1 per day
<i>fesoterodine fumarate er</i>	np	QPD 1.0 per day
GELNIQUE	NP	ST QPD 3.067 per day
<i>oxybutynin chloride (5 mg/5 ml solution, 5 mg/5 ml syrup)</i>	p	QPD 20 per day
<i>oxybutynin 2.5 mg tablet</i>	NP	ST QPD 3 per day
<i>oxybutynin 5 mg tablet</i>	p	QPD 4 per day



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>oxybutynin chloride er (er 10 mg tablet, er 15 mg tablet)</i>	p	QPD 2.0 per day
<i>oxybutynin cl er 5 mg tablet</i>	p	QPD 1.0 per day
OXYTROL	NP	ST QPD 0.286 per day
<i>solifenacin succinate</i>	p	QPD 1.0 per day
<i>tolterodine tartrate</i>	np	QPD 2 per day
<i>tolterodine tartrate er</i>	np	QPD 1.0 per day
TOVIAZ	NP	ST QPD 1 per day
<i>trospium chloride</i>	np	QPD 2.0 per day
<i>trospium chloride er</i>	np	QPD 1 per day
VESICARE	NP	ST QPD 1 per day
VESICARE LS	NP	ST QPD 10 per day
GOLD COMPOUNDS		
<i>auranofin</i>	NP	S
RIDAURA	NP	S
GONADOTROPINS AND ANTIGONADOTROPINS		
ANTIGONADTROPINS		
<i>cetorelix acetate</i>	np	S PA QPD 0.167 per day
CETROTIDE	NP	QL max 5 / 30 days S PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FYREMADEL	np	S PA QPD 0.084 per day
<i>ganirelix acet 250 mcg/0.5 ml (organon)</i>	NP	S PA QPD 0.084 per day
<i>ganirelix acetate</i>	NP	S PA QPD 0.084 per day
MYFEMBREE	P	PA QPD 1 per day
ORGOVYX	NP	S PA QPD 1 per day
ORIAHNN	P	PA QPD 2 per day
ORLISSA 150 MG TABLET	P	PA QPD 1 per day
ORLISSA 200 MG TABLET	P	PA QPD 2 per day
<b>GONADOTROPINS</b>		
CAMCEVI	NP	QL max 180 days / fill S
<i>chorionic gonad 10,000 unit v1</i>	NP	QL max 42 days / fill S PA QPD 0.067 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ELIGARD (22.5 MG SYRINGE B, 22.5 MG SYRINGE KIT)	P	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div style="margin-right: 5px;">max 90 days / fill</div> </div> <div style="background-color: #c00000; color: white; padding: 2px 5px; margin-top: 2px;">S</div>
ELIGARD (30 MG SYRINGE B, 30 MG SYRINGE KIT)	P	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div style="margin-right: 5px;">max 120 days / fill</div> </div> <div style="background-color: #c00000; color: white; padding: 2px 5px; margin-top: 2px;">S</div>
ELIGARD (45 MG SYRINGE B, 45 MG SYRINGE KIT)	P	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div style="margin-right: 5px;">max 180 days / fill</div> </div> <div style="background-color: #c00000; color: white; padding: 2px 5px; margin-top: 2px;">S</div>
ELIGARD (7.5 MG SYRINGE B, 7.5 MG SYRINGE KIT)	P	<div style="background-color: #c00000; color: white; padding: 2px 5px; margin-top: 2px;">S</div>
FOLLISTIM AQ (300 UNIT, 900 UNIT)	P	<div style="background-color: #c00000; color: white; padding: 2px 5px; margin-top: 2px;">S</div> <div style="background-color: #8b6914; color: white; padding: 2px 5px; margin-top: 2px;">PA</div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #0070c0; color: white; padding: 2px 5px; margin-right: 5px;">QPD</div> <div>0.18 per day</div> </div>
FOLLISTIM AQ 600 UNIT CARTRIDG	P	<div style="background-color: #c00000; color: white; padding: 2px 5px; margin-top: 2px;">S</div> <div style="background-color: #8b6914; color: white; padding: 2px 5px; margin-top: 2px;">PA</div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #0070c0; color: white; padding: 2px 5px; margin-right: 5px;">QPD</div> <div>0.192 per day</div> </div>
GONAL-F 1,050 UNITS VIAL	NP	<div style="background-color: #c00000; color: white; padding: 2px 5px; margin-top: 2px;">S</div> <div style="background-color: #8b6914; color: white; padding: 2px 5px; margin-top: 2px;">PA</div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #0070c0; color: white; padding: 2px 5px; margin-right: 5px;">QPD</div> <div>0.134 per day</div> </div>
GONAL-F 450 UNITS VIAL	NP	<div style="background-color: #c00000; color: white; padding: 2px 5px; margin-top: 2px;">S</div> <div style="background-color: #8b6914; color: white; padding: 2px 5px; margin-top: 2px;">PA</div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #0070c0; color: white; padding: 2px 5px; margin-right: 5px;">QPD</div> <div>0.334 per day</div> </div>
GONAL-F RFF	NP	<div style="background-color: #c00000; color: white; padding: 2px 5px; margin-top: 2px;">S</div> <div style="background-color: #8b6914; color: white; padding: 2px 5px; margin-top: 2px;">PA</div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #0070c0; color: white; padding: 2px 5px; margin-right: 5px;">QPD</div> <div>0.667 per day</div> </div>
GONAL-F RFF REDI-JECT	NP	<div style="background-color: #c00000; color: white; padding: 2px 5px; margin-top: 2px;">S</div> <div style="background-color: #8b6914; color: white; padding: 2px 5px; margin-top: 2px;">PA</div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #0070c0; color: white; padding: 2px 5px; margin-right: 5px;">QPD</div> <div>0.25 per day</div> </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>leuprolide 2wk 14 mg/2.8 ml kt</i>	np	S
<i>leuprolide 2wk 14 mg/2.8 ml vl</i>	np	S
<i>leuprolide depot</i>	P	QL max 84 days / fill S
LUPRON DEPOT (11.25 MG 3MO KIT, 22.5 MG 3MO KIT)	P	QL max 90 days / fill S
LUPRON DEPOT (3.75 MG KIT, 7.5 MG KIT)	P	S
LUPRON DEPOT 45 MG 6MO KIT	P	QL max 180 days / fill S
LUPRON DEPOT-4 MONTH KIT	P	QL max 120 days / fill S
LUPRON DEPOT-PED (7.5 MG KIT, 11.25 MG KIT, 15 MG KIT)	P	S
LUPRON DEPOT-PED (11.25 MG 3MO, 30 MG 3MO KIT)	P	QL max 90 days / fill S
LUPRON DEPOT-PED 45 MG 6MO KIT	P	QL max 180 days / fill S
MENOPUR	NP	S PA QPD 2 per day
NOVAREL	NP	S PA QPD 0.134 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OVIDREL	P	S PA QPD 0.034 per day
PREGNYL	P	QL max 42 days / fill S PA QPD 0.067 per day
SYNAREL	NP	S
HCV ANTIVIRALS		
HCV POLYMERASE INHIBITOR ANTIVIRALS		
EPCLUSA (150-37.5 MG PELLETT PKT, 200 MG-50 MG TABLET, 200-50 MG PELLETT PACK, 400 MG-100 MG TABLET)	P	S PA QPD 1 per day
HARVONI (33.75-150 MG PELLETT PK, 45-200 MG PELLETT PACKET, 45-200 MG TABLET, 90-400 MG TABLET)	P	S PA QPD 1 per day
<i>ledipasvir-sofosbuvir</i>	P	S PA QPD 1 per day
<i>sofosbuvir-velpatasvir</i>	P	S PA QPD 1 per day
SOVALDI (150 MG PELLETT PACKET, 200 MG PELLETT PACKET, 200 MG TABLET, 400 MG TABLET)	P	S PA QPD 1 per day
VOSEVI	P	S PA QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>HCV PROTEASE INHIBITOR ANTIVIRALS</b>		
MAVYRET 50-20 MG PELLET PACKET	P	S PA QPD 5 per day
MAVYRET 100-40 MG TABLET	P	S PA QPD 3 per day
<b>HCV REPLICATION COMPLEX INHIBITORS</b>		
ZEPATIER	NP	S PA QPD 1 per day
<b>HEAVY METAL ANTAGONISTS</b>		
CHEMET	P	S
CUPRIMINE	NP	ST S
CUVRIOR	NP	S
<i>deferasirox (90 mg granule pkt, 90 mg tablet, 125 mg tb for susp, 180 mg granule pkt, 180 mg tablet, 250 mg tb for susp, 360 mg granule pkt, 360 mg tablet, 500 mg tb for susp)</i>	np	S
<i>deferiprone</i>	np	S
<i>deferiprone (3 times a day)</i>	np	S
DEPEN	NP	ST S
EXJADE	NP	S
FERRIPROX (100 MG/ML SOLUTION, 500 MG TABLET)	NP	S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FERRIPROX (2 TIMES A DAY)	NP	S
FERRIPROX (3 TIMES A DAY)	NP	S
GALZIN	NP	
JADENU	NP	S
JADENU SPRINKLE	NP	S
<i>penicillamine 250 mg capsule</i>	np	ST S
<i>penicillamine 250 mg tablet</i>	np	S
SYPRINE	NP	S
<i>trientine hcl 250 mg capsule</i>	np	S
<i>trientine hcl 500 mg capsule</i>	NP	S
<b>HORMONES AND SYNTHETIC SUBSTITUTES</b>		
<b>ADRENALS</b>		
AGAMREE	NP	QL max 90 days / fill S PA QPD 10.0 per day
ALKINDI SPRINKLE	NP	
ALVESCO 160 MCG INHALER	NP	ST HSA QPD 0.407 per day
ALVESCO 80 MCG INHALER	NP	ST HSA QPD 0.204 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ARMONAIR DIGIHALER	NP	HSA QPD 0.034 per day
ARNUIITY ELLIPTA	P	HSA QPD 1 per day
ASMANEX (TWISTHALER 110 MCG #30, TWISTHALER 220 MCG #30, TWISTHALER 220 MCG #60, TWISTHALR 220 MCG #120)	P	HSA QPD 0.034 per day
ASMANEX HFA	P	HSA QPD 0.434 per day
<i>budesonide (0.25 mg/2 ml susp, 0.5 mg/2 ml susp, 1 mg/2 ml inh susp)</i>	np	HSA
<i>budesonide 2 mg rectal foam</i>	np	
<i>budesonide dr</i>	np	
<i>budesonide ec</i>	np	
<i>budesonide er</i>	np	
CORTEF	NP	
<i>cortisone acetate</i>	NP	
<i>deflazacort (22.75 mg/ml susp, 30 mg tablet, 36 mg tablet)</i>	np	S PA
<i>deflazacort 18 mg tablet</i>	np	S PA QPD 1.0 per day
<i>deflazacort 6 mg tablet</i>	np	S PA QPD 2.0 per day
DEXABLISS	NP	



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>dexamethasone 0.5 mg/5 ml elx</i>	np	
<i>dexamethasone 0.5 mg/5 ml liq</i>	P	
<i>dexamethasone (10 1.5 mg tb, 13 1.5 mg tb)</i>	NP	
<i>dexamethasone 6 day 1.5 mg tab</i>	np	
<i>dexamethasone (0.5 mg tablet, 0.75 mg tablet, 1 mg tablet, 1.5 mg tablet, 2 mg tablet, 4 mg tablet, 6 mg tablet)</i>	p	
DEXAMETHASONE INTENSOL	P	
<i>dexamethasone 0.1% eye drop</i>	P	
EMFLAZA (22.75 MG/ML ORAL SUSP, 30 MG TABLET, 36 MG TABLET)	NP	S PA
EMFLAZA 18 MG TABLET	NP	S PA QPD 1 per day
EMFLAZA 6 MG TABLET	NP	S PA QPD 2 per day
EOHILIA	NP	PA QPD 20.0 per day
FLOVENT 250 MCG DISKUS	NP	ST HSA QPD 8 per day
FLOVENT DISKUS (50 MCG, 100 MCG)	NP	ST HSA QPD 2 per day
FLOVENT HFA 110 MCG INHALER	NP	ST HSA QPD 0.4 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FLOVENT HFA 220 MCG INHALER	NP	ST HSA QPD 0.8 per day
FLOVENT HFA 44 MCG INHALER	NP	ST HSA QPD 0.354 per day
<i>fludrocortisone acetate</i>	p	
<i>fluticasone prop 250 mcg disk</i>	NP	ST HSA QPD 8.0 per day
<i>fluticasone propionate (50 mcg, 100mcg)</i>	NP	ST HSA QPD 2.0 per day
<i>fluticasone prop hfa 110 mcg</i>	NP	ST HSA QPD 0.4 per day
<i>fluticasone prop hfa 220 mcg</i>	NP	ST HSA QPD 0.8 per day
<i>fluticasone prop hfa 44 mcg</i>	NP	ST HSA QPD 0.354 per day
HEMADY	NP	
<i>hydrocortisone (5 mg tablet, 10 mg tablet, 20 mg tablet)</i>	np	
INTRAROSA	NP	
ISTURISA 1 MG TABLET	NP	S PA QPD 8 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ISTURISA 10 MG TABLET	NP	S PA QPD 6 per day
ISTURISA 5 MG TABLET	NP	S PA QPD 12 per day
MAXIDEX	NP	
MEDROL (2 MG TABLET, 4 MG DOSEPAK, 4 MG TABLET, 8 MG TABLET, 16 MG TABLET)	NP	
<i>methylprednisolone (4 mg dosepak, 4 mg tablet, 16 mg tab, 32 mg tab)</i>	p	
<i>methylprednisolone 8 mg tablet</i>	np	
MILLIPRED	np	
OMNARIS	NP	QPD 0.417 per day
ORAPRED ODT	NP	
ORTIKOS	NP	
PEDIAPRED	NP	
<i>prednisolone 15 mg/5 ml soln</i>	p	
<i>prednisolone 5 mg tablet</i>	np	
<i>prednisolone sodium phos odt</i>	np	
<i>prednisolone 15mg/5ml soln cup</i>	p	
<i>prednisolone sodium phosphate (10 mg/5 ml soln, 20 mg/5 ml soln)</i>	np	
<i>prednisolone sodium phosphate (5 mg/5 ml soln, sod ph 25 mg/5 ml)</i>	np	
<i>prednisolone sodium phosphate 15 mg/5ml solution</i>	p	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>prednisone 5 mg/5 ml solution</i>	P	
<i>prednisone (1 mg tablet, 2.5 mg tablet, 5 mg tab dose pack, 5 mg tablet, 10 mg tablet, 20 mg tablet, 50 mg tablet)</i>	p	
<i>prednisone 10 mg (21) tab dose pack</i>	p	
<i>prednisone 10 mg (48) tab dose pack</i>	np	
PREDNISONE INTENSOL	NP	
PULMICORT	NP	HSA
PULMICORT 180 MCG FLEXHALER	NP	HSA QPD 0.067 per day
PULMICORT 90 MCG FLEXHALER	NP	HSA QPD 0.034 per day
QVAR REDHALER 40 MCG	P	HSA QPD 0.354 per day
QVAR REDHALER 80 MCG	P	HSA QPD 0.707 per day
RAYOS	NP	PA
RECORLEV	NP	S PA QPD 8 per day
TAPERDEX (7 1.5 MG TAB PACK, 12 1.5 MG TABLET)	NP	
TAPERDEX 6 DAY 1.5 MG TABLET	np	
TARPEYO	NP	S PA QPD 4 per day
UCERIS (2 MG RECTAL FOAM, 9 MG ER TABLET)	NP	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZCORT	NP	
ZETONNA	NP	QPD 0.204 per day
<b>ANDROGENS</b>		
ANDROGEL (1% (25 MG/2.5 G) PKT, 1.62% GEL PUMP, 1.62%(2.5G) GEL PCKT)	NP	PA QPD 5 per day
ANDROGEL 1% (50 MG/5 G) PKT	NP	PA QPD 10 per day
ANDROGEL 1.62%(1.25G) GEL PCKT	NP	PA QPD 1.25 per day
<i>danazol</i>	np	PA
DEPO-TESTOSTERONE	np	PA QPD 0.358 per day
FORTESTA	NP	PA QPD 4 per day
JATENZO (158 MG CAPSULE, 198 MG CAPSULE)	NP	PA QPD 4 per day
JATENZO 237 MG CAPSULE	NP	PA QPD 2 per day
KYZATREX 100 MG CAPSULE	NP	PA QPD 2 per day
KYZATREX 150 MG CAPSULE	NP	PA QPD 4 per day
KYZATREX 200 MG CAPSULE	NP	PA QPD 4.0 per day
METHITEST	NP	PA QPD 20 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>methytestosterone</i>	np	PA QPD 20 per day
NATESTO	NP	PA QPD 0.732 per day
TESTIM	NP	PA QPD 10 per day
<i>testosterone (1% (25mg/2.5g) pk, 1.62% gel pump)</i>	np	PA QPD 5.0 per day
<i>testosterone 10 mg gel pump</i>	np	PA QPD 4 per day
<i>testosterone 12.5 mg/1.25 gram</i>	np	PA QPD 10.0 per day
<i>testosterone (1% (50 mg/5 g) pk, 50 mg/5 gram gel)</i>	np	PA QPD 10 per day
<i>testosterone 1.62% (2.5 g) pkt</i>	np	PA QPD 5 per day
<i>testosterone 1.62%(1.25 g) pkt</i>	np	PA QPD 1.25 per day
<i>testosterone 50 mg/5 gram pkt</i>	NP	PA QPD 10 per day
<i>testosterone 30 mg/1.5 ml pump</i>	np	PA QPD 6 per day
<i>testosterone 12.5 mg/1.25 gram (upsher smith)</i>	NP	PA QPD 10 per day
<i>testosterone 50 mg/5 gram gel (upsher smith)</i>	NP	PA QPD 10 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>testosterone cypionate (200 mg/ml, 1,000 mg/10ml, 2,000 mg/10ml)</i>	np	PA QPD 0.358 per day
<i>testosteron enan 1,000 mg/5 ml</i>	P	PA QPD 0.179 per day
<i>testosterone enan 200 mg/ml</i>	P	PA QPD 0.179 per day
TLANDO	NP	PA QPD 4.0 per day
UNDECATREX	NP	PA QPD 4.0 per day
VOGELXO (12.5 MG/1.25 PUMP, 50 MG/5 GEL, 50 MG/5 GEL PACKT)	NP	PA QPD 10 per day
XYOSTED	NP	PA QPD 0.072 per day
<b>CONTRACEPTIVES</b>		
AFIRMELLE	p	C [ACA] Quantity Limits May Apply HSA ACA
AFTERA	p	C [ACA] Quantity Limits May Apply HSA ACA
ALTAVERA	p	C [ACA] Quantity Limits May Apply HSA ACA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ALYACEN	p	<div data-bbox="1114 247 1247 348">C</div> <div data-bbox="1255 254 1455 352">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 352 1247 401">HSA</div> <div data-bbox="1114 401 1247 449">ACA</div>
AMETHIA	np	<div data-bbox="1114 464 1247 564">C</div> <div data-bbox="1255 470 1455 569">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 564 1247 613">HSA</div> <div data-bbox="1114 613 1247 661">ACA</div>
AMETHYST	np	<div data-bbox="1114 680 1247 781">C</div> <div data-bbox="1255 686 1455 785">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 781 1247 829">HSA</div> <div data-bbox="1114 829 1247 877">ACA</div>
ANNOVERA	NP	<div data-bbox="1114 896 1247 997">C</div> <div data-bbox="1255 903 1455 1001">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 997 1247 1045">HSA</div> <div data-bbox="1114 1045 1247 1094">ACA</div>
APRI	p	<div data-bbox="1114 1113 1247 1213">C</div> <div data-bbox="1255 1119 1455 1218">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1213 1247 1262">HSA</div> <div data-bbox="1114 1262 1247 1310">ACA</div>
ARANELLE	np	<div data-bbox="1114 1329 1247 1430">C</div> <div data-bbox="1255 1335 1455 1434">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1430 1247 1478">HSA</div> <div data-bbox="1114 1478 1247 1526">ACA</div>
ASHLYNA	np	<div data-bbox="1114 1545 1247 1646">C</div> <div data-bbox="1255 1551 1455 1650">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1646 1247 1694">HSA</div> <div data-bbox="1114 1694 1247 1743">ACA</div>



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AUBRA	p	<div data-bbox="1114 247 1247 348">C</div> <div data-bbox="1252 254 1455 352">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 359 1247 394">HSA</div> <div data-bbox="1114 401 1247 436">ACA</div>
AUBRA EQ	p	<div data-bbox="1114 464 1247 564">C</div> <div data-bbox="1252 470 1455 569">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 575 1247 611">HSA</div> <div data-bbox="1114 617 1247 653">ACA</div>
AUROVELA	p	<div data-bbox="1114 680 1247 781">C</div> <div data-bbox="1252 686 1455 785">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 791 1247 827">HSA</div> <div data-bbox="1114 833 1247 869">ACA</div>
AUROVELA 24 FE	p	<div data-bbox="1114 896 1247 997">C</div> <div data-bbox="1252 903 1455 1001">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1008 1247 1043">HSA</div> <div data-bbox="1114 1050 1247 1085">ACA</div>
AUROVELA FE	p	<div data-bbox="1114 1113 1247 1213">C</div> <div data-bbox="1252 1119 1455 1218">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1224 1247 1260">HSA</div> <div data-bbox="1114 1266 1247 1302">ACA</div>
AVIANE	p	<div data-bbox="1114 1329 1247 1430">C</div> <div data-bbox="1252 1335 1455 1434">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1440 1247 1476">HSA</div> <div data-bbox="1114 1482 1247 1518">ACA</div>
AYUNA	p	<div data-bbox="1114 1545 1247 1646">C</div> <div data-bbox="1252 1551 1455 1650">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1656 1247 1692">HSA</div> <div data-bbox="1114 1698 1247 1734">ACA</div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AZURETTE	p	<div data-bbox="1114 247 1247 348">C</div> <div data-bbox="1252 254 1455 352">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 352 1247 401">HSA</div> <div data-bbox="1114 401 1247 443">ACA</div>
BALCOLTRA	NP	<div data-bbox="1114 464 1247 564">C</div> <div data-bbox="1252 470 1455 569">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 564 1247 613">HSA</div> <div data-bbox="1114 613 1247 655">ACA</div>
BALZIVA	p	<div data-bbox="1114 680 1247 781">C</div> <div data-bbox="1252 686 1455 785">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 781 1247 829">HSA</div> <div data-bbox="1114 829 1247 871">ACA</div>
BEYAZ	NP	<div data-bbox="1114 896 1247 997">C</div> <div data-bbox="1252 903 1455 1001">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 997 1247 1045">HSA</div> <div data-bbox="1114 1045 1247 1087">ACA</div>
BLISOVI 24 FE	p	<div data-bbox="1114 1113 1247 1213">C</div> <div data-bbox="1252 1119 1455 1218">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1213 1247 1262">HSA</div> <div data-bbox="1114 1262 1247 1304">ACA</div>
BLISOVI FE	p	<div data-bbox="1114 1329 1247 1430">C</div> <div data-bbox="1252 1335 1455 1434">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1430 1247 1478">HSA</div> <div data-bbox="1114 1478 1247 1520">ACA</div>
BRIELLYN	p	<div data-bbox="1114 1545 1247 1646">C</div> <div data-bbox="1252 1551 1455 1650">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1646 1247 1694">HSA</div> <div data-bbox="1114 1694 1247 1736">ACA</div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CAMILA	p	<div data-bbox="1114 247 1247 348">C</div> <div data-bbox="1252 254 1455 352">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 359 1247 394">HSA</div> <div data-bbox="1114 401 1247 436">ACA</div>
CAMRESE	np	<div data-bbox="1114 464 1247 564">C</div> <div data-bbox="1252 470 1455 569">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 575 1247 611">HSA</div> <div data-bbox="1114 617 1247 653">ACA</div>
CAMRESE LO	p	<div data-bbox="1114 680 1247 781">C</div> <div data-bbox="1252 686 1455 785">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 791 1247 827">HSA</div> <div data-bbox="1114 833 1247 869">ACA</div>
CAZANT	np	<div data-bbox="1114 896 1247 997">C</div> <div data-bbox="1252 903 1455 1001">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1008 1247 1043">HSA</div> <div data-bbox="1114 1050 1247 1085">ACA</div>
CHARLOTTE 24 FE	np	<div data-bbox="1114 1113 1247 1213">C</div> <div data-bbox="1252 1119 1455 1218">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1224 1247 1260">HSA</div> <div data-bbox="1114 1266 1247 1302">ACA</div>
CHATEAL EQ	p	<div data-bbox="1114 1329 1247 1430">C</div> <div data-bbox="1252 1335 1455 1434">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1440 1247 1476">HSA</div> <div data-bbox="1114 1482 1247 1518">ACA</div>
CRYSSELLE	p	<div data-bbox="1114 1545 1247 1646">C</div> <div data-bbox="1252 1551 1455 1650">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1656 1247 1692">HSA</div> <div data-bbox="1114 1698 1247 1734">ACA</div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CURAE	p	<div data-bbox="1114 247 1247 348">C</div> <div data-bbox="1252 254 1455 352">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 352 1247 394">HSA</div> <div data-bbox="1114 394 1247 443">ACA</div>
CYRED	p	<div data-bbox="1114 464 1247 564">C</div> <div data-bbox="1252 470 1455 569">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 564 1247 606">HSA</div> <div data-bbox="1114 606 1247 655">ACA</div>
CYRED EQ	p	<div data-bbox="1114 680 1247 781">C</div> <div data-bbox="1252 686 1455 785">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 781 1247 823">HSA</div> <div data-bbox="1114 823 1247 871">ACA</div>
DASETТА	p	<div data-bbox="1114 896 1247 997">C</div> <div data-bbox="1252 903 1455 1001">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 997 1247 1039">HSA</div> <div data-bbox="1114 1039 1247 1087">ACA</div>
DAYSEE	np	<div data-bbox="1114 1113 1247 1213">C</div> <div data-bbox="1252 1119 1455 1218">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1213 1247 1255">HSA</div> <div data-bbox="1114 1255 1247 1304">ACA</div>
DEBLITANE	p	<div data-bbox="1114 1329 1247 1430">C</div> <div data-bbox="1252 1335 1455 1434">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1430 1247 1472">HSA</div> <div data-bbox="1114 1472 1247 1520">ACA</div>
<i>desogestr-eth estrad eth estra</i>	p	<div data-bbox="1114 1545 1247 1646">C</div> <div data-bbox="1252 1551 1455 1650">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1646 1247 1688">HSA</div> <div data-bbox="1114 1688 1247 1736">ACA</div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>desogestrel-ethinyl estradiol</i>	p	C [ACA] Quantity Limits May Apply HSA ACA
DOLISHALE	np	C [ACA] Quantity Limits May Apply HSA ACA
<i>drospirenone-eth estra-levomef</i>	np	C [ACA] Quantity Limits May Apply HSA ACA
<i>drospirenone-ethinyl estradiol</i>	p	C [ACA] Quantity Limits May Apply HSA ACA
ECONTRA EZ	p	C [ACA] Quantity Limits May Apply HSA ACA
ECONTRA ONE-STEP	p	C [ACA] Quantity Limits May Apply HSA ACA
ELINEST	p	C [ACA] Quantity Limits May Apply HSA ACA

PRODUCT DESCRIPTION		TIER	LIMITS & RESTRICTIONS
ELLA		P	C [ACA] Quantity Limits May Apply HSA ACA
EMZAHH		p	C [ACA] Quantity Limits May Apply HSA ACA
ENPRESSE		p	C [ACA] Quantity Limits May Apply HSA ACA
ENSKYCE		p	C [ACA] Quantity Limits May Apply HSA ACA
ERRIN		p	C [ACA] Quantity Limits May Apply HSA ACA
ESTARYLLA		p	C [ACA] Quantity Limits May Apply HSA ACA
<i>ethynodiol-eth estra 1mg-35mcg</i>		p	C [ACA] Quantity Limits May Apply HSA ACA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>ethynodiol-eth estra 1mg-50mcg</i>	np	<div data-bbox="1114 247 1247 344">C</div> <div data-bbox="1255 254 1455 352">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 352 1247 394">HSA</div> <div data-bbox="1114 394 1247 436">ACA</div>
FALMINA	p	<div data-bbox="1114 464 1247 560">C</div> <div data-bbox="1255 470 1455 569">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 569 1247 611">HSA</div> <div data-bbox="1114 611 1247 653">ACA</div>
FEIRZA	p	<div data-bbox="1114 680 1247 777">C</div> <div data-bbox="1255 686 1455 785">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 785 1247 827">HSA</div> <div data-bbox="1114 827 1247 869">ACA</div>
FINZALA	np	<div data-bbox="1114 896 1247 993">C</div> <div data-bbox="1255 903 1455 1001">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1001 1247 1043">HSA</div> <div data-bbox="1114 1043 1247 1085">ACA</div>
GEMMILY	np	<div data-bbox="1114 1113 1247 1209">C</div> <div data-bbox="1255 1119 1455 1218">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1218 1247 1260">HSA</div> <div data-bbox="1114 1260 1247 1302">ACA</div>
HAILEY	p	<div data-bbox="1114 1329 1247 1425">C</div> <div data-bbox="1255 1335 1455 1434">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1434 1247 1476">HSA</div> <div data-bbox="1114 1476 1247 1518">ACA</div>
HAILEY 24 FE	p	<div data-bbox="1114 1545 1247 1642">C</div> <div data-bbox="1255 1551 1455 1650">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1650 1247 1692">HSA</div> <div data-bbox="1114 1692 1247 1734">ACA</div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HAILEY FE	p	<div data-bbox="1114 247 1247 348">C</div> <div data-bbox="1252 254 1455 352">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 359 1247 394">HSA</div> <div data-bbox="1114 401 1247 436">ACA</div>
HEATHER	p	<div data-bbox="1114 464 1247 564">C</div> <div data-bbox="1252 470 1455 569">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 575 1247 611">HSA</div> <div data-bbox="1114 617 1247 653">ACA</div>
HER STYLE	p	<div data-bbox="1114 680 1247 781">C</div> <div data-bbox="1252 686 1455 785">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 791 1247 827">HSA</div> <div data-bbox="1114 833 1247 869">ACA</div>
ICLEVIA	p	<div data-bbox="1114 896 1247 997">C</div> <div data-bbox="1252 903 1455 1001">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1008 1247 1043">HSA</div> <div data-bbox="1114 1050 1247 1085">ACA</div>
INCASSIA	p	<div data-bbox="1114 1113 1247 1213">C</div> <div data-bbox="1252 1119 1455 1218">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1224 1247 1260">HSA</div> <div data-bbox="1114 1266 1247 1302">ACA</div>
ISIBLOOM	p	<div data-bbox="1114 1329 1247 1430">C</div> <div data-bbox="1252 1335 1455 1434">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1440 1247 1476">HSA</div> <div data-bbox="1114 1482 1247 1518">ACA</div>
JAIMIESS	np	<div data-bbox="1114 1545 1247 1646">C</div> <div data-bbox="1252 1551 1455 1650">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1656 1247 1692">HSA</div> <div data-bbox="1114 1698 1247 1734">ACA</div>



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
JASMIEL	p	<div data-bbox="1114 247 1247 348">C</div> <div data-bbox="1255 254 1455 352">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 352 1247 401">HSA</div> <div data-bbox="1114 401 1247 449">ACA</div>
JENCYCLA	p	<div data-bbox="1114 464 1247 564">C</div> <div data-bbox="1255 470 1455 569">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 564 1247 613">HSA</div> <div data-bbox="1114 613 1247 661">ACA</div>
JOLESSA	p	<div data-bbox="1114 680 1247 781">C</div> <div data-bbox="1255 686 1455 785">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 781 1247 829">HSA</div> <div data-bbox="1114 829 1247 877">ACA</div>
JOYEAUX	np	<div data-bbox="1114 896 1247 997">C</div> <div data-bbox="1255 903 1455 1001">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 997 1247 1045">HSA</div> <div data-bbox="1114 1045 1247 1094">ACA</div>
JULEBER	p	<div data-bbox="1114 1113 1247 1213">C</div> <div data-bbox="1255 1119 1455 1218">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1213 1247 1262">HSA</div> <div data-bbox="1114 1262 1247 1310">ACA</div>
JUNEL	p	<div data-bbox="1114 1329 1247 1430">C</div> <div data-bbox="1255 1335 1455 1434">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1430 1247 1478">HSA</div> <div data-bbox="1114 1478 1247 1526">ACA</div>
JUNEL FE	p	<div data-bbox="1114 1545 1247 1646">C</div> <div data-bbox="1255 1551 1455 1650">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1646 1247 1694">HSA</div> <div data-bbox="1114 1694 1247 1743">ACA</div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
JUNEL FE 24	p	<div data-bbox="1114 247 1247 348">C</div> <div data-bbox="1255 254 1455 352">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 359 1247 394">HSA</div> <div data-bbox="1114 401 1247 436">ACA</div>
KAITLIB FE	np	<div data-bbox="1114 464 1247 564">C</div> <div data-bbox="1255 470 1455 569">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 575 1247 611">HSA</div> <div data-bbox="1114 617 1247 653">ACA</div>
KALLIGA	p	<div data-bbox="1114 680 1247 781">C</div> <div data-bbox="1255 686 1455 785">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 791 1247 827">HSA</div> <div data-bbox="1114 833 1247 869">ACA</div>
KARIVA	p	<div data-bbox="1114 896 1247 997">C</div> <div data-bbox="1255 903 1455 1001">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1008 1247 1043">HSA</div> <div data-bbox="1114 1050 1247 1085">ACA</div>
KELNOR 1-35	p	<div data-bbox="1114 1113 1247 1213">C</div> <div data-bbox="1255 1119 1455 1218">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1224 1247 1260">HSA</div> <div data-bbox="1114 1266 1247 1302">ACA</div>
KELNOR 1-50	np	<div data-bbox="1114 1329 1247 1430">C</div> <div data-bbox="1255 1335 1455 1434">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1440 1247 1476">HSA</div> <div data-bbox="1114 1482 1247 1518">ACA</div>
KURVELO	p	<div data-bbox="1114 1545 1247 1646">C</div> <div data-bbox="1255 1551 1455 1650">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1656 1247 1692">HSA</div> <div data-bbox="1114 1698 1247 1734">ACA</div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LARIN	p	<div data-bbox="1114 247 1247 344">C</div> <div data-bbox="1252 254 1455 352">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 352 1247 394">HSA</div> <div data-bbox="1114 394 1247 443">ACA</div>
LARIN 24 FE	p	<div data-bbox="1114 464 1247 560">C</div> <div data-bbox="1252 470 1455 569">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 569 1247 611">HSA</div> <div data-bbox="1114 611 1247 659">ACA</div>
LARIN FE	p	<div data-bbox="1114 680 1247 777">C</div> <div data-bbox="1252 686 1455 785">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 785 1247 827">HSA</div> <div data-bbox="1114 827 1247 875">ACA</div>
LAYOLIS FE	np	<div data-bbox="1114 896 1247 993">C</div> <div data-bbox="1252 903 1455 1001">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1001 1247 1043">HSA</div> <div data-bbox="1114 1043 1247 1092">ACA</div>
LEENA	np	<div data-bbox="1114 1113 1247 1209">C</div> <div data-bbox="1252 1119 1455 1218">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1218 1247 1260">HSA</div> <div data-bbox="1114 1260 1247 1308">ACA</div>
LESSINA	p	<div data-bbox="1114 1329 1247 1425">C</div> <div data-bbox="1252 1335 1455 1434">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1434 1247 1476">HSA</div> <div data-bbox="1114 1476 1247 1524">ACA</div>
LEVONEST	p	<div data-bbox="1114 1545 1247 1642">C</div> <div data-bbox="1252 1551 1455 1650">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1650 1247 1692">HSA</div> <div data-bbox="1114 1692 1247 1740">ACA</div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>levonor-eth estrad 0.15-0.03 (28-day pack)</i>	p	C [ACA] Quantity Limits May Apply HSA ACA
<i>levonor-e estrad 0.1-0.02-0.01</i>	p	C [ACA] Quantity Limits May Apply HSA ACA
<i>levonorg-eth estrad eth estrad (levono-e estrad 0.15-0.03-0.01, levonorg 0.15mg-ee 20-25-30mcg)</i>	np	C [ACA] Quantity Limits May Apply HSA ACA
<i>levonorg-eth estrad-fe bisglyc</i>	np	C [ACA] Quantity Limits May Apply HSA ACA
<i>levonorgestrel</i>	p	C [ACA] Quantity Limits May Apply HSA ACA
<i>levonor-eth estra 0.09-0.02 mg</i>	np	C [ACA] Quantity Limits May Apply HSA ACA
<i>levonorgestrel-eth estradiol (0.1-0.02 mg, triphasic)</i>	p	C [ACA] Quantity Limits May Apply HSA ACA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>levonor-eth estrad 0.15-0.03</i>	p	<div data-bbox="1114 247 1247 344">C</div> <div data-bbox="1252 254 1455 352">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 352 1247 394">HSA</div> <div data-bbox="1114 394 1247 443">ACA</div>
LEVORA-28	p	<div data-bbox="1114 464 1247 560">C</div> <div data-bbox="1252 470 1455 569">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 569 1247 611">HSA</div> <div data-bbox="1114 611 1247 659">ACA</div>
LO LOESTRIN FE	P	<div data-bbox="1114 680 1247 777">C</div> <div data-bbox="1252 686 1455 785">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 785 1247 827">HSA</div> <div data-bbox="1114 827 1247 875">ACA</div>
LO-ZUMANDIMINE	p	<div data-bbox="1114 896 1247 993">C</div> <div data-bbox="1252 903 1455 1001">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1001 1247 1043">HSA</div> <div data-bbox="1114 1043 1247 1092">ACA</div>
LOESTRIN	p	<div data-bbox="1114 1113 1247 1209">C</div> <div data-bbox="1252 1119 1455 1218">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1218 1247 1260">HSA</div> <div data-bbox="1114 1260 1247 1308">ACA</div>
LOESTRIN FE	p	<div data-bbox="1114 1329 1247 1425">C</div> <div data-bbox="1252 1335 1455 1434">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1434 1247 1476">HSA</div> <div data-bbox="1114 1476 1247 1524">ACA</div>
LOJAIMIESS	p	<div data-bbox="1114 1545 1247 1642">C</div> <div data-bbox="1252 1551 1455 1650">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1650 1247 1692">HSA</div> <div data-bbox="1114 1692 1247 1740">ACA</div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LORYNA	p	<div data-bbox="1114 247 1247 348">C</div> <div data-bbox="1255 254 1455 352">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 352 1247 394">HSA</div> <div data-bbox="1114 394 1247 443">ACA</div>
LOSEASONIQUE	NP	<div data-bbox="1114 464 1247 564">C</div> <div data-bbox="1255 470 1455 569">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 564 1247 606">HSA</div> <div data-bbox="1114 606 1247 655">ACA</div>
LOW-OGESTREL	p	<div data-bbox="1114 680 1247 781">C</div> <div data-bbox="1255 686 1455 785">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 781 1247 823">HSA</div> <div data-bbox="1114 823 1247 871">ACA</div>
LUTERA	p	<div data-bbox="1114 896 1247 997">C</div> <div data-bbox="1255 903 1455 1001">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 997 1247 1039">HSA</div> <div data-bbox="1114 1039 1247 1087">ACA</div>
LYLEQ	p	<div data-bbox="1114 1113 1247 1213">C</div> <div data-bbox="1255 1119 1455 1218">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1213 1247 1255">HSA</div> <div data-bbox="1114 1255 1247 1304">ACA</div>
LYZA	p	<div data-bbox="1114 1329 1247 1430">C</div> <div data-bbox="1255 1335 1455 1434">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1430 1247 1472">HSA</div> <div data-bbox="1114 1472 1247 1520">ACA</div>
MARLISSA	p	<div data-bbox="1114 1545 1247 1646">C</div> <div data-bbox="1255 1551 1455 1650">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1646 1247 1688">HSA</div> <div data-bbox="1114 1688 1247 1736">ACA</div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MERZEE	np	<div data-bbox="1114 247 1247 348">C</div> <div data-bbox="1252 254 1455 352">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 352 1247 401">HSA</div> <div data-bbox="1114 401 1247 443">ACA</div>
MIBELAS 24 FE	np	<div data-bbox="1114 464 1247 564">C</div> <div data-bbox="1252 470 1455 569">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 564 1247 613">HSA</div> <div data-bbox="1114 613 1247 655">ACA</div>
MICROGESTIN	p	<div data-bbox="1114 680 1247 781">C</div> <div data-bbox="1252 686 1455 785">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 781 1247 829">HSA</div> <div data-bbox="1114 829 1247 871">ACA</div>
MICROGESTIN 24 FE	p	<div data-bbox="1114 896 1247 997">C</div> <div data-bbox="1252 903 1455 1001">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 997 1247 1045">HSA</div> <div data-bbox="1114 1045 1247 1087">ACA</div>
MICROGESTIN FE	p	<div data-bbox="1114 1113 1247 1213">C</div> <div data-bbox="1252 1119 1455 1218">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1213 1247 1262">HSA</div> <div data-bbox="1114 1262 1247 1304">ACA</div>
MILI	p	<div data-bbox="1114 1329 1247 1430">C</div> <div data-bbox="1252 1335 1455 1434">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1430 1247 1478">HSA</div> <div data-bbox="1114 1478 1247 1520">ACA</div>
MINASTRIN 24 FE	NP	<div data-bbox="1114 1545 1247 1646">C</div> <div data-bbox="1252 1551 1455 1650">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1646 1247 1694">HSA</div> <div data-bbox="1114 1694 1247 1736">ACA</div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MINZOYA	np	<div data-bbox="1114 247 1247 348">C</div> <div data-bbox="1252 254 1455 352">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 352 1247 401">HSA</div> <div data-bbox="1114 401 1247 443">ACA</div>
MIRCETTE	NP	<div data-bbox="1114 464 1247 564">C</div> <div data-bbox="1252 470 1455 569">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 564 1247 613">HSA</div> <div data-bbox="1114 613 1247 655">ACA</div>
MONO-LINYAH	p	<div data-bbox="1114 680 1247 781">C</div> <div data-bbox="1252 686 1455 785">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 781 1247 829">HSA</div> <div data-bbox="1114 829 1247 871">ACA</div>
MY CHOICE	p	<div data-bbox="1114 896 1247 997">C</div> <div data-bbox="1252 903 1455 1001">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 997 1247 1045">HSA</div> <div data-bbox="1114 1045 1247 1087">ACA</div>
MY WAY	p	<div data-bbox="1114 1113 1247 1213">C</div> <div data-bbox="1252 1119 1455 1218">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1213 1247 1262">HSA</div> <div data-bbox="1114 1262 1247 1304">ACA</div>
NATAZIA	NP	<div data-bbox="1114 1329 1247 1430">C</div> <div data-bbox="1252 1335 1455 1434">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1430 1247 1478">HSA</div> <div data-bbox="1114 1478 1247 1520">ACA</div>
NECON	np	<div data-bbox="1114 1545 1247 1646">C</div> <div data-bbox="1252 1551 1455 1650">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1646 1247 1694">HSA</div> <div data-bbox="1114 1694 1247 1736">ACA</div>



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NEW DAY	p	<div data-bbox="1114 247 1247 348">C</div> <div data-bbox="1252 254 1455 352">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 352 1247 401">HSA</div> <div data-bbox="1114 401 1247 443">ACA</div>
NEXTSTELLIS	NP	<div data-bbox="1114 464 1247 564">C</div> <div data-bbox="1252 470 1455 569">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 564 1247 613">HSA</div> <div data-bbox="1114 613 1247 655">ACA</div>
NIKKI	p	<div data-bbox="1114 680 1247 781">C</div> <div data-bbox="1252 686 1455 785">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 781 1247 829">HSA</div> <div data-bbox="1114 829 1247 871">ACA</div>
NORA-BE	p	<div data-bbox="1114 896 1247 997">C</div> <div data-bbox="1252 903 1455 1001">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 997 1247 1045">HSA</div> <div data-bbox="1114 1045 1247 1087">ACA</div>
<i>norelgestromin-eth estradiol</i>	np	<div data-bbox="1114 1113 1247 1213">C</div> <div data-bbox="1252 1119 1455 1218">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1213 1247 1262">HSA</div> <div data-bbox="1114 1262 1247 1304">ACA</div>
<i>norethin-eth estra-ferrous fum</i>	np	<div data-bbox="1114 1329 1247 1430">C</div> <div data-bbox="1252 1335 1455 1434">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1430 1247 1478">HSA</div> <div data-bbox="1114 1478 1247 1520">ACA</div>
<i>norethindron-ethinyl estradiol (norethin-ee 1.5-0.03 mg(21) tb, norethind-eth estrad 1-0.02 mg)</i>	p	<div data-bbox="1114 1545 1247 1646">C</div> <div data-bbox="1252 1551 1455 1650">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1646 1247 1694">HSA</div> <div data-bbox="1114 1694 1247 1736">ACA</div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>norethindrone</i>	p	C [ACA] Quantity Limits May Apply HSA ACA
<i>norethindrone-e.estradiol-iron (1 mg/20-30-35 mcg, 1-0.02(24)-75 cap, 1-0.02(24)-75 chw)</i>	np	C [ACA] Quantity Limits May Apply HSA ACA
<i>norethindrone-e.estradiol-iron (1-0.02(21)-75 tab, 1.5-0.03mg(21)-75)</i>	p	C [ACA] Quantity Limits May Apply HSA ACA
<i>norgestimate-ethinyl estradiol</i>	p	C [ACA] Quantity Limits May Apply HSA ACA
NORTREL (1-35 21 TABLET, 1-35 28 TABLET, 7-7-7-28 TABLET)	p	C [ACA] Quantity Limits May Apply HSA ACA
NORTREL 0.5-35-28 TABLET	np	C [ACA] Quantity Limits May Apply HSA ACA
NUVARING	np	C [ACA] Quantity Limits May Apply HSA ACA

PRODUCT DESCRIPTION		TIER	LIMITS & RESTRICTIONS
NYLIA		p	C [ACA] Quantity Limits May Apply HSA ACA
NYMYO		p	C [ACA] Quantity Limits May Apply HSA ACA
OCELLA		p	C [ACA] Quantity Limits May Apply HSA ACA
OPCICON ONE-STEP		p	C [ACA] Quantity Limits May Apply HSA ACA
OPTION 2		p	C [ACA] Quantity Limits May Apply HSA ACA
ORTHO-NOVUM		p	C [ACA] Quantity Limits May Apply HSA ACA
PHILITH		p	C [ACA] Quantity Limits May Apply HSA ACA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PIMTREA	p	<div data-bbox="1114 247 1247 348">C</div> <div data-bbox="1252 254 1455 352">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 352 1247 401">HSA</div> <div data-bbox="1114 401 1247 449">ACA</div>
PORTIA	p	<div data-bbox="1114 464 1247 564">C</div> <div data-bbox="1252 470 1455 569">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 564 1247 613">HSA</div> <div data-bbox="1114 613 1247 661">ACA</div>
QUARTETTE	NP	<div data-bbox="1114 680 1247 781">C</div> <div data-bbox="1252 686 1455 785">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 781 1247 829">HSA</div> <div data-bbox="1114 829 1247 877">ACA</div>
RECLIPSEN	p	<div data-bbox="1114 896 1247 997">C</div> <div data-bbox="1252 903 1455 1001">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 997 1247 1045">HSA</div> <div data-bbox="1114 1045 1247 1094">ACA</div>
RIVELSA	np	<div data-bbox="1114 1113 1247 1213">C</div> <div data-bbox="1252 1119 1455 1218">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1213 1247 1262">HSA</div> <div data-bbox="1114 1262 1247 1310">ACA</div>
SAFYRAL	NP	<div data-bbox="1114 1329 1247 1430">C</div> <div data-bbox="1252 1335 1455 1434">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1430 1247 1478">HSA</div> <div data-bbox="1114 1478 1247 1526">ACA</div>
SEASONIQUE	NP	<div data-bbox="1114 1545 1247 1646">C</div> <div data-bbox="1252 1551 1455 1650">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1646 1247 1694">HSA</div> <div data-bbox="1114 1694 1247 1743">ACA</div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SETLAKIN	p	<div data-bbox="1114 247 1247 348">C</div> <div data-bbox="1252 254 1455 352">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 359 1247 394">HSA</div> <div data-bbox="1114 401 1247 436">ACA</div>
SHAROBEL	p	<div data-bbox="1114 464 1247 564">C</div> <div data-bbox="1252 470 1455 569">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 575 1247 611">HSA</div> <div data-bbox="1114 617 1247 653">ACA</div>
SIMLIYA	p	<div data-bbox="1114 680 1247 781">C</div> <div data-bbox="1252 686 1455 785">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 791 1247 827">HSA</div> <div data-bbox="1114 833 1247 869">ACA</div>
SIMPESSE	np	<div data-bbox="1114 896 1247 997">C</div> <div data-bbox="1252 903 1455 1001">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1008 1247 1043">HSA</div> <div data-bbox="1114 1050 1247 1085">ACA</div>
SLYND	NP	<div data-bbox="1114 1113 1247 1213">C</div> <div data-bbox="1252 1119 1455 1218">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1224 1247 1260">HSA</div> <div data-bbox="1114 1266 1247 1302">ACA</div>
SPRINTEC	p	<div data-bbox="1114 1329 1247 1430">C</div> <div data-bbox="1252 1335 1455 1434">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1440 1247 1476">HSA</div> <div data-bbox="1114 1482 1247 1518">ACA</div>
SRONYX	p	<div data-bbox="1114 1545 1247 1646">C</div> <div data-bbox="1252 1551 1455 1650">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1656 1247 1692">HSA</div> <div data-bbox="1114 1698 1247 1734">ACA</div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SYEDA	p	<div data-bbox="1114 247 1247 344">C</div> <div data-bbox="1255 254 1455 352">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 352 1247 394">HSA</div> <div data-bbox="1114 394 1247 443">ACA</div>
TAKE ACTION	p	<div data-bbox="1114 464 1247 560">C</div> <div data-bbox="1255 470 1455 569">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 569 1247 611">HSA</div> <div data-bbox="1114 611 1247 659">ACA</div>
TARINA 24 FE	p	<div data-bbox="1114 680 1247 777">C</div> <div data-bbox="1255 686 1455 785">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 785 1247 827">HSA</div> <div data-bbox="1114 827 1247 875">ACA</div>
TARINA FE	p	<div data-bbox="1114 896 1247 993">C</div> <div data-bbox="1255 903 1455 1001">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1001 1247 1043">HSA</div> <div data-bbox="1114 1043 1247 1092">ACA</div>
TARINA FE 1-20 EQ	p	<div data-bbox="1114 1113 1247 1209">C</div> <div data-bbox="1255 1119 1455 1218">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1218 1247 1260">HSA</div> <div data-bbox="1114 1260 1247 1308">ACA</div>
TAYSOFY	np	<div data-bbox="1114 1329 1247 1425">C</div> <div data-bbox="1255 1335 1455 1434">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1434 1247 1476">HSA</div> <div data-bbox="1114 1476 1247 1524">ACA</div>
TAYTULLA	NP	<div data-bbox="1114 1545 1247 1642">C</div> <div data-bbox="1255 1551 1455 1650">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1650 1247 1692">HSA</div> <div data-bbox="1114 1692 1247 1740">ACA</div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TILIA FE	np	<div data-bbox="1114 247 1247 348">C</div> <div data-bbox="1252 254 1458 352">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 352 1247 401">HSA</div> <div data-bbox="1114 401 1247 449">ACA</div>
TRI-ESTARYLLA	p	<div data-bbox="1114 464 1247 564">C</div> <div data-bbox="1252 470 1458 569">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 564 1247 613">HSA</div> <div data-bbox="1114 613 1247 661">ACA</div>
TRI-LEGEST FE	np	<div data-bbox="1114 680 1247 781">C</div> <div data-bbox="1252 686 1458 785">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 781 1247 829">HSA</div> <div data-bbox="1114 829 1247 877">ACA</div>
TRI-LINYAH	p	<div data-bbox="1114 896 1247 997">C</div> <div data-bbox="1252 903 1458 1001">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 997 1247 1045">HSA</div> <div data-bbox="1114 1045 1247 1094">ACA</div>
TRI-LO-ESTARYLLA	p	<div data-bbox="1114 1113 1247 1213">C</div> <div data-bbox="1252 1119 1458 1218">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1213 1247 1262">HSA</div> <div data-bbox="1114 1262 1247 1310">ACA</div>
TRI-LO-MARZIA	p	<div data-bbox="1114 1329 1247 1430">C</div> <div data-bbox="1252 1335 1458 1434">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1430 1247 1478">HSA</div> <div data-bbox="1114 1478 1247 1526">ACA</div>
TRI-LO-MILI	p	<div data-bbox="1114 1545 1247 1646">C</div> <div data-bbox="1252 1551 1458 1650">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1646 1247 1694">HSA</div> <div data-bbox="1114 1694 1247 1743">ACA</div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRI-LO-SPRINTEC	p	<div data-bbox="1114 247 1247 344">C</div> <div data-bbox="1252 254 1455 352">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 352 1247 394">HSA</div> <div data-bbox="1114 394 1247 443">ACA</div>
TRI-MILI	p	<div data-bbox="1114 464 1247 560">C</div> <div data-bbox="1252 470 1455 569">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 569 1247 611">HSA</div> <div data-bbox="1114 611 1247 659">ACA</div>
TRI-NYMYO	p	<div data-bbox="1114 680 1247 777">C</div> <div data-bbox="1252 686 1455 785">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 785 1247 827">HSA</div> <div data-bbox="1114 827 1247 875">ACA</div>
TRI-SPRINTEC	p	<div data-bbox="1114 896 1247 993">C</div> <div data-bbox="1252 903 1455 1001">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1001 1247 1043">HSA</div> <div data-bbox="1114 1043 1247 1092">ACA</div>
TRI-VYLIBRA	p	<div data-bbox="1114 1113 1247 1209">C</div> <div data-bbox="1252 1119 1455 1218">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1218 1247 1260">HSA</div> <div data-bbox="1114 1260 1247 1308">ACA</div>
TRI-VYLIBRA LO	p	<div data-bbox="1114 1329 1247 1425">C</div> <div data-bbox="1252 1335 1455 1434">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1434 1247 1476">HSA</div> <div data-bbox="1114 1476 1247 1524">ACA</div>
TRIVORA-28	p	<div data-bbox="1114 1545 1247 1642">C</div> <div data-bbox="1252 1551 1455 1650">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1650 1247 1692">HSA</div> <div data-bbox="1114 1692 1247 1740">ACA</div>



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TULANA	p	<div data-bbox="1114 247 1247 348">C</div> <div data-bbox="1255 254 1455 352">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 352 1247 401">HSA</div> <div data-bbox="1114 401 1247 443">ACA</div>
TURQOZ	p	<div data-bbox="1114 464 1247 564">C</div> <div data-bbox="1255 470 1455 569">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 564 1247 613">HSA</div> <div data-bbox="1114 613 1247 655">ACA</div>
TWIRLA	NP	<div data-bbox="1114 680 1247 781">C</div> <div data-bbox="1255 686 1455 785">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 781 1247 829">HSA</div> <div data-bbox="1114 829 1247 871">ACA</div>
TYBLUME	P	<div data-bbox="1114 896 1247 997">C</div> <div data-bbox="1255 903 1455 1001">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 997 1247 1045">HSA</div> <div data-bbox="1114 1045 1247 1087">ACA</div>
TYDEMY	np	<div data-bbox="1114 1113 1247 1213">C</div> <div data-bbox="1255 1119 1455 1218">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1213 1247 1262">HSA</div> <div data-bbox="1114 1262 1247 1304">ACA</div>
VALTYA	np	<div data-bbox="1114 1329 1247 1430">C</div> <div data-bbox="1255 1335 1455 1434">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1430 1247 1478">HSA</div> <div data-bbox="1114 1478 1247 1520">ACA</div>
VELIVET	P	<div data-bbox="1114 1545 1247 1646">C</div> <div data-bbox="1255 1551 1455 1650">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1646 1247 1694">HSA</div> <div data-bbox="1114 1694 1247 1736">ACA</div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VESTURA	p	<div data-bbox="1114 247 1247 348">C</div> <div data-bbox="1252 254 1455 352">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 359 1247 394">HSA</div> <div data-bbox="1114 401 1247 436">ACA</div>
VIENVA	p	<div data-bbox="1114 464 1247 564">C</div> <div data-bbox="1252 470 1455 569">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 575 1247 611">HSA</div> <div data-bbox="1114 617 1247 653">ACA</div>
VIORELE	p	<div data-bbox="1114 680 1247 781">C</div> <div data-bbox="1252 686 1455 785">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 791 1247 827">HSA</div> <div data-bbox="1114 833 1247 869">ACA</div>
VOLNEA	p	<div data-bbox="1114 896 1247 997">C</div> <div data-bbox="1252 903 1455 1001">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1008 1247 1043">HSA</div> <div data-bbox="1114 1050 1247 1085">ACA</div>
VYFEMLA	p	<div data-bbox="1114 1113 1247 1213">C</div> <div data-bbox="1252 1119 1455 1218">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1224 1247 1260">HSA</div> <div data-bbox="1114 1266 1247 1302">ACA</div>
VYLIBRA	p	<div data-bbox="1114 1329 1247 1430">C</div> <div data-bbox="1252 1335 1455 1434">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1440 1247 1476">HSA</div> <div data-bbox="1114 1482 1247 1518">ACA</div>
WERA	np	<div data-bbox="1114 1545 1247 1646">C</div> <div data-bbox="1252 1551 1455 1650">[ACA] Quantity Limits May Apply</div> <div data-bbox="1114 1656 1247 1692">HSA</div> <div data-bbox="1114 1698 1247 1734">ACA</div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
WYMZYA FE	np	C [ACA] Quantity Limits May Apply HSA ACA
XARAH FE	np	C [ACA] Quantity Limits May Apply HSA ACA
XULANE	np	C [ACA] Quantity Limits May Apply HSA ACA
YASMIN 28	NP	C [ACA] Quantity Limits May Apply HSA ACA
YAZ	NP	C [ACA] Quantity Limits May Apply HSA ACA
ZAFEMY	np	C [ACA] Quantity Limits May Apply HSA ACA
ZARAH	p	C [ACA] Quantity Limits May Apply HSA ACA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZOVIA 1-35	p	C [ACA] Quantity Limits May Apply HSA ACA
ZUMANDIMINE	p	C [ACA] Quantity Limits May Apply HSA ACA
LEPTINS		
MYALEPT	NP	S PA
MELANOCORTIN RECEPTOR ANTAGONISTS		
IMCIVREE	NP	S PA QPD 0.334 per day
PITUITARY		
DDAVP (0.1 MG TABLET, 0.2 MG TABLET, 4 MCG/ML AMPUL, 40 MCG/10 ML VIAL)	NP	
<i>desmopressin acetate (0.01% solution, ac 4 mcg/ml ampul, ac 4 mcg/ml vial, acetate 0.1 mg tb, acetate 0.2 mg tb, 10 mcg/0.1 ml spr, 40 mcg/10 ml vial)</i>	np	
GENOTROPIN (MINIQUICK 0.2 MG, MINIQUICK 0.4 MG, MINIQUICK 0.6 MG, MINIQUICK 0.8 MG, MINIQUICK 1 MG, MINIQUICK 1.2 MG, MINIQUICK 1.4 MG, MINIQUICK 1.6 MG, MINIQUICK 1.8 MG, MINIQUICK 2 MG, 5 MG CARTRIDGE, 12 MG CARTRIDGE)	P	S PA
HUMATROPE (6 MG CARTRIDGE, 12 MG CARTRIDGE, 24 MG CARTRIDGE)	NP	S PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NGENLA	NP	S PA
NOCDURNA	NP	
NORDITROPIN FLEXPRO	NP	S PA
NUTROPIN AQ NUSPIN	NP	S PA
OMNITROPE (5 MG/1.5 ML CRTG, 5.8 MG VIAL, 10 MG/1.5 ML CRTG)	P	S PA
SAIZEN-SAIZENPREP	NP	S PA
SEROSTIM	NP	S PA
SKYTROFA	NP	S PA
SOGROYA	NP	S PA
ZOMACTON	NP	S PA
<b>PROGESTINS</b>		
AYGESTIN	NP	
CRINONE 4% GEL	NP	ST QPD 0.226 per day
CRINONE 8% GEL	NP	ST QPD 2.25 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DEPO-PROVERA 150 MG/ML SYRINGE	NP	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-bottom: 5px;">max 90 days / fill</div> <div style="background-color: #333; color: white; padding: 2px 5px; border-radius: 3px;">C</div> <div style="margin-bottom: 5px;">[ACA] Quantity Limits May Apply</div> <div style="background-color: #003366; color: white; padding: 2px 5px; border-radius: 3px;">HSA</div> <div style="background-color: #00a0e3; color: white; padding: 2px 5px; border-radius: 3px;">ACA</div> </div>
DEPO-PROVERA 150 MG/ML VIAL	NP	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #333; color: white; padding: 2px 5px; border-radius: 3px;">C</div> <div style="margin-bottom: 5px;">[ACA] Quantity Limits May Apply</div> <div style="background-color: #003366; color: white; padding: 2px 5px; border-radius: 3px;">HSA</div> <div style="background-color: #00a0e3; color: white; padding: 2px 5px; border-radius: 3px;">ACA</div> </div>
DEPO-SUBQ PROVERA 104	NP	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-bottom: 5px;">max 90 days / fill</div> <div style="background-color: #333; color: white; padding: 2px 5px; border-radius: 3px;">C</div> <div style="margin-bottom: 5px;">[ACA] Quantity Limits May Apply</div> <div style="background-color: #003366; color: white; padding: 2px 5px; border-radius: 3px;">HSA</div> <div style="background-color: #00a0e3; color: white; padding: 2px 5px; border-radius: 3px;">ACA</div> </div>
ENDOMETRIN	P	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #003366; color: white; padding: 2px 5px; border-radius: 3px;">QPD</div> <div style="margin-bottom: 5px;">3 per day</div> </div>
GALLIFREY	np	
<i>medroxyprogesterone 150 mg/ml</i>	p	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-bottom: 5px;">max 90 days / fill</div> <div style="background-color: #333; color: white; padding: 2px 5px; border-radius: 3px;">C</div> <div style="margin-bottom: 5px;">[ACA] Quantity Limits May Apply</div> <div style="background-color: #003366; color: white; padding: 2px 5px; border-radius: 3px;">HSA</div> <div style="background-color: #00a0e3; color: white; padding: 2px 5px; border-radius: 3px;">ACA</div> </div>
<i>medroxyprogesterone acetate (2.5 mg tab, 5 mg tab, 10 mg tab)</i>	p	
<i>megestrol 625 mg/5 ml susp</i>	NP	
<i>megestrol acetate (acet 40 mg/ml susp, 400 mg/10ml susp cup, acet 400 mg/10 ml)</i>	np	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>megestrol acetate (20 mg tablet, 40 mg tablet)</i>	p	
<i>norethindrone acetate</i>	np	
<i>progesterone 100 mg capsule</i>	p	
<i>progesterone 200 mg capsule</i>	np	
<i>progesterone 500 mg/10 ml vial</i>	np	
PROMETRIUM	NP	
PROVERA	NP	
IMMUNOMODULATORY AGENTS (90:00)		
COMPLEMENT INHIBITOR AGENTS (90:20)		
EMPAVELI	P	S PA QPD 5.715 per day
FABHALTA	P	S PA QPD 2.0 per day
TAVNEOS	NP	S PA QPD 6 per day
INSULINS		
INTERMEDIATE-ACTING INSULINS		
HUMULIN 70-30	P	HSA QPD 3.334 per day
HUMULIN 70/30 KWIKPEN	P	HSA QPD 3.334 per day
HUMULIN N	P	HSA QPD 3.334 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HUMULIN N KWIKPEN	P	HSA QPD 3.334 per day
NOVOLIN 70-30	P	HSA QPD 3.334 per day
NOVOLIN 70-30 FLEXPEN	P	HSA QPD 3.334 per day
NOVOLIN N	P	HSA QPD 3.334 per day
NOVOLIN N FLEXPEN	P	HSA QPD 3.334 per day
<b>LONG-ACTING INSULINS</b>		
BASAGLAR KWIKPEN U-100	NP	HSA QPD 3.334 per day
BASAGLAR TEMPO PEN U-100	NP	HSA QPD 3.334 per day
<i>insulin degludec</i>	NP	HSA PA QPD 3.334 per day
<i>insulin degludec pen (u-100)</i>	NP	HSA PA QPD 3.334 per day
<i>insulin degludec pen (u-200)</i>	NP	HSA PA QPD 3.334 per day
<i>insulin glargine</i>	NP	HSA PA QPD 3.334 per day



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>insulin glargine max solostar</i>	NP	HSA QPD 3.334 per day
<i>insulin glargine solostar u100</i>	NP	HSA PA QPD 3.334 per day
<i>insulin glargine solostar u300</i>	NP	HSA QPD 3.334 per day
<i>insulin glargine-yfgn (pen, vl)</i>	P	HSA QPD 3.334 per day
LANTUS	NP	HSA PA QPD 3.334 per day
LANTUS SOLOSTAR	NP	HSA PA QPD 3.334 per day
LEVEMIR	P	HSA QPD 3.334 per day
LEVEMIR FLEXPEN	P	HSA QPD 3.334 per day
REZVOGLAR KWIKPEN	NP	HSA PA QPD 3.334 per day
SEMGLEE (YFGN)	P	HSA QPD 3.334 per day
SEMGLEE (YFGN) PEN	P	HSA QPD 3.334 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SOLIQUA 100-33	P	ST HSA QPD 0.6 per day
TOUJEO MAX SOLOSTAR	P	HSA QPD 3.334 per day
TOUJEO SOLOSTAR	P	HSA QPD 3.334 per day
TRESIBA	P	HSA QPD 3.334 per day
TRESIBA FLEXTOUCH U-100	P	HSA QPD 3.334 per day
TRESIBA FLEXTOUCH U-200	P	HSA QPD 3.334 per day
XULTOPHY 100-3.6	P	ST HSA QPD 0.5 per day
<b>RAPID-ACTING INSULINS</b>		
ADMELOG	NP	HSA PA QPD 3.334 per day
ADMELOG SOLOSTAR	NP	HSA PA QPD 3.334 per day
AFREZZA (4 UNIT/8 UNIT/12 UNIT, 8 UNIT CARTRIDGE)	NP	HSA PA QPD 42 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AFREZZA 12 UNIT CARTRIDGE	NP	HSA PA QPD 30 per day
AFREZZA 4 UNIT CARTRIDGE	NP	HSA PA QPD 84 per day
AFREZZA 90-4 UNIT / 90-8 UNIT	NP	HSA PA QPD 60 per day
AFREZZA 90-8 UNIT / 90-12 UNIT	NP	HSA PA QPD 36 per day
APIDRA	NP	HSA PA QPD 3.334 per day
APIDRA SOLOSTAR	NP	HSA PA QPD 3.334 per day
FIASP	P	HSA QPD 3.334 per day
FIASP FLEXTOUCH	P	HSA QPD 3.334 per day
FIASP PENFILL	P	HSA QPD 3.334 per day
HUMALOG (100 UNIT/ML CARTRIDGE, 100 UNIT/ML VIAL)	P	HSA QPD 3.334 per day
HUMALOG JUNIOR KWIKPEN	P	HSA QPD 3.334 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HUMALOG KWIKPEN U-100	P	HSA QPD 3.334 per day
HUMALOG KWIKPEN U-200	P	HSA QPD 3.334 per day
HUMALOG MIX 50-50	P	HSA QPD 3.334 per day
HUMALOG MIX 50-50 KWIKPEN	P	HSA QPD 3.334 per day
HUMALOG MIX 75-25	P	HSA QPD 3.334 per day
HUMALOG MIX 75-25 KWIKPEN	P	HSA QPD 3.334 per day
HUMALOG TEMPO PEN U-100	P	HSA QPD 3.334 per day
<i>insulin aspart</i>	NP	HSA PA QPD 3.334 per day
<i>insulin aspart flexpen</i>	NP	HSA PA QPD 3.334 per day
<i>insulin aspart penfill</i>	NP	HSA PA QPD 3.334 per day
<i>insulin aspart prot mix 70-30 (mix70-30 pn, mix70-30 vl)</i>	NP	HSA PA QPD 3.334 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>insulin lispro</i>	NP	HSA PA QPD 3.334 per day
<i>insulin lispro junior kwikpen</i>	NP	HSA PA QPD 3.334 per day
<i>insulin lispro kwikpen u-100</i>	NP	HSA PA QPD 3.334 per day
<i>insulin lispro protamine mix</i>	NP	HSA PA QPD 3.334 per day
LYUMJEV	P	QL max 100 / 30 days HSA
LYUMJEV KWIKPEN U-100	P	QL max 100 / 30 days HSA
LYUMJEV KWIKPEN U-200	P	QL max 100 / 30 days HSA
LYUMJEV TEMPO PEN U-100	P	QL max 100 / 30 days HSA
NOVOLOG	P	HSA QPD 3.334 per day
NOVOLOG FLEXPEN	P	HSA QPD 3.334 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NOVOLOG MIX 70-30	P	HSA QPD 3.334 per day
NOVOLOG MIX 70-30 FLEXPEN	P	HSA QPD 3.334 per day
NOVOLOG PENFILL	P	HSA QPD 3.334 per day
<b>SHORT-ACTING INSULINS</b>		
HUMULIN R	P	HSA QPD 3.334 per day
HUMULIN R U-500	P	HSA QPD 3.334 per day
HUMULIN R U-500 KWIKPEN	P	HSA QPD 3.334 per day
NOVOLIN R	P	HSA QPD 3.334 per day
NOVOLIN R FLEXPEN	P	HSA QPD 3.334 per day
<b>INTERLEUKIN INHIBITOR AGENTS</b>		
<b>INTERLEUKIN INHIBITOR AGENTS, MISC</b>		
XOLAIR (75 MG/0.5 ML AUTOINJECT, 150 MG/ML AUTOINJECTOR, 300 MG/2 ML AUTOINJECT, 300 MG/2 ML SYRINGE)	P	S PA
XOLAIR (75 MG/0.5 ML SYRINGE, 150 MG/ML SYRINGE)	P	S PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INTERLEUKIN-MEDIATED AGENTS		
INTERLEUKIN-MEDIATED AGENTS, MISC		
ACTEMRA 162 MG/0.9 ML SYRINGE	NP	S PA QPD 0.129 per day
ACTEMRA ACTPEN	NP	S PA QPD 0.129 per day
COSENTYX (2 SYRINGES)	P	QL max 56 days / fill S PA QPD 0.072 per day
COSENTYX SENSOREADY (2 PENS)	P	QL max 56 days / fill S PA QPD 0.072 per day
COSENTYX SENSOREADY PEN	P	S PA QPD 0.036 per day
COSENTYX 150 MG/ML SYRINGE	P	S PA QPD 0.036 per day
COSENTYX 75 MG/0.5 ML SYRINGE	P	S PA QPD 0.018 per day
COSENTYX UNOREADY PEN	P	S PA QPD 0.072 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KEVZARA (150 MG/1.14 ML PEN INJ, 150 MG/1.14 ML SYRINGE, 200 MG/1.14 ML PEN INJ, 200 MG/1.14 ML SYRINGE)	NP	S PA QPD 0.082 per day
KINERET	NP	S PA QPD 0.67 per day
STELARA 90 MG/ML SYRINGE	P	QL MAX 1 / 56 DAYS S PA
STELARA (45 MG/0.5 ML SYRINGE, 45 MG/0.5 ML VIAL)	P	QL MAX 0.5 / 84 DAYS S PA
TALTZ AUTOINJECTOR	NP	S PA QPD 0.036 per day
TALTZ AUTOINJECTOR (2 PACK)	NP	S PA QPD 0.036 per day
TALTZ AUTOINJECTOR (3 PACK)	NP	S PA QPD 0.036 per day
TALTZ 20 MG/0.25 ML SYRINGE	NP	S PA QPD 0.009 per day
TALTZ 40 MG/0.5 ML SYRINGE	NP	S PA QPD 0.018 per day



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TALTZ 80 MG/ML SYRINGE	NP	S PA QPD 0.036 per day
TYENNE 162 MG/0.9 ML SYRINGE	P	S PA QPD 0.129 per day
TYENNE AUTOINJECTOR	P	S PA QPD 0.129 per day
ION-REMOVING AGENTS		
PHOSPHATE-REMOVING AGENTS		
AURYXIA	NP	
<i>calcium acetate (667 mg capsule, 667 mg gelcap, 667 mg tablet)</i>	np	
FOSRENOL (500 MG TABLET CHEW, 750 MG POWDER PACKET, 750 MG TABLET CHEW, 1,000 MG POWDER PACK, 1,000 MG TABLET CHEW)	NP	
<i>lanthanum carbonate</i>	np	
PHOSLYRA	NP	
RENAGEL	NP	
REVELA (0.8 GM POWDER PACKET, 2.4 GM POWDER PACKET, 800 MG TABLET)	NP	
<i>sevelamer carbonate (0.8 gm powder packet, 2.4 gm powder packet, carbonate 800 mg tab)</i>	np	
<i>sevelamer hcl</i>	np	
VELPHORO	P	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>POTASSIUM-REMOVING AGENTS</b>		
KIONEX	np	
LOKELMA	P	
<i>sodium polystyrene sulfonate</i>	np	
SPS (15 GM/60 ML SUSPENSION, 30 GM/120 ML ENEMA SUSP)	np	
VELTASSA	P	
<b>JANUS KINASE INHIBITORS (90:24)</b>		
<b>JANUS KINASE INHIBITORS, MISCELLANEOUS</b>		
OLUMIANT	NP	S PA QPD 1 per day
RINVOQ (ER 15 MG TABLET, ER 30 MG TABLET)	P	S PA QPD 1 per day
RINVOQ ER 45 MG TABLET	P	QL max 84 / 365 days S PA
RINVOQ LQ	P	S PA QPD 12.0 per day
XELJANZ 1 MG/ML SOLUTION	P	QL max 48 days / fill S PA QPD 8 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XELJANZ 10 MG TABLET	P	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #d62728; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> MAX 240 / 365 DAYS
XELJANZ 5 MG TABLET	P	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #d62728; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #1f77b4; color: white; padding: 2px 5px; border-radius: 3px;">QPD</div> </div> max 60 days / fill 2 per day
XELJANZ XR 11 MG TABLET	P	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #d62728; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #1f77b4; color: white; padding: 2px 5px; border-radius: 3px;">QPD</div> </div> 1 per day
XELJANZ XR 22 MG TABLET	P	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #d62728; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> MAX 120 / 365 DAYS
<b>KALLIKREIN-KININ SYSTEM INHIBITORS</b> <b>KALLIKREIN</b>		
ORLADEYO	NP	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #d62728; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #1f77b4; color: white; padding: 2px 5px; border-radius: 3px;">QPD</div> </div> 1 per day
TAKHZYRO 150 MG/ML SYRINGE	P	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #d62728; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #1f77b4; color: white; padding: 2px 5px; border-radius: 3px;">QPD</div> </div> 0.072 per day
TAKHZYRO (300 MG/2 ML SYRINGE, 300 MG/2 ML VIAL)	P	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #d62728; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #1f77b4; color: white; padding: 2px 5px; border-radius: 3px;">QPD</div> </div> 0.143 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>MACROLIDE ANTIBIOTICS</b>		
<b>ERYTHROMYCIN ANTIBIOTICS</b>		
E.E.S. 200	NP	
E.E.S. 400	np	
ERY-TAB	np	
ERYPED 200	NP	
ERYPED 400	NP	
ERYTHROCIN STEARATE	NP	
<i>erythromycin dr 250 mg cap</i>	NP	
<i>erythromycin (250 mg tablet, dr 250 mg tablet, dr 333 mg tablet, 500 mg tablet, dr 500 mg tablet)</i>	np	
<i>erythromycin ethylsuccinate (200 mg/5 ml susp, 400 mg/5 ml susp, es 400 mg tab)</i>	np	
<b>OTHER MACROLIDE ANTIBIOTICS</b>		
<i>azithromycin 1 gm pwd packet</i>	P	
<i>azithromycin (100 mg/5 ml susp, 600 mg tablet)</i>	np	
<i>azithromycin (200 mg/5 ml susp, 250 mg tablet, 500 mg tablet)</i>	p	
<i>clarithromycin (125 mg/5 ml sus, 250 mg/5 ml sus)</i>	P	
<i>clarithromycin (250 mg tablet, 500 mg tablet)</i>	np	
<i>clarithromycin er</i>	np	
DIFICID (40 MG/ML SUSPENSION, 200 MG TABLET)	P	
ZITHROMAX (1 GM POWDER PACKET, 100 MG/5 ML SUSP, 200 MG/5 ML SUSP, 250 MG TABLET, 250 MG Z-PAK TABLET, 500 MG TABLET)	NP	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZITHROMAX TRI-PAK	NP	
MINERALOCORTICOID (ALDOSTERONE) ANTAGNISTS		
STEROIDAL MINERALOCORTICOID RECEPTOR ANT		
ALDACTAZIDE	NP	HSA
ALDACTONE	NP	HSA
CAROSPIR	NP	HSA PA QPD 15.0 per day
<i>eplerenone</i>	np	HSA
INSPRA	NP	HSA
<i>spironolactone 25 mg/5 ml susp</i>	np	HSA PA QPD 15.0 per day
<i>spironolactone (25 mg tablet, 50 mg tablet, 100 mg tablet)</i>	p	HSA
<i>spironolactone-hctz</i>	np	HSA
MISC. BETA-LACTAM ANTIBIOTICS		
MONOBACTAM ANTIBIOTICS		
CAYSTON	NP	QL max 56 days / fill S
MISCELLANEOUS THERAPEUTIC AGENTS		
5-ALPHA-REDUCTASE INHIBITORS (92:04)		
AVODART	NP	QPD 1.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>dutasteride</i>	p	QPD 1.0 per day
<i>dutasteride-tamsulosin</i>	np	QPD 1.0 per day
ENTADFI	NP	QPD 1.0 per day
<i>finasteride 5 mg tablet</i>	p	QPD 1 per day
JALYN	NP	QPD 1 per day
PROSCAR	NP	QPD 1 per day
<b>ANTIGOUT AGENTS</b>		
<i>allopurinol (100 mg tablet, 300 mg tablet)</i>	p	
<i>allopurinol 200 mg tablet</i>	np	
<i>febuxostat</i>	np	
ULORIC	NP	
ZYLOPRIM	NP	
<b>ANTISENSE OLIGONUCLEOTIDES</b>		
TEGSEDI	NP	S PA QPD 0.215 per day
WAINUA	NP	S PA QPD 0.027 per day
<b>BONE RESORPTION INHIBITORS</b>		
ACTONEL	NP	HSA
<i>alendronate sod 70 mg/75 ml</i>	np	HSA
<i>alendronate sodium (10 mg tab, 35 mg tab, 70 mg tab)</i>	p	HSA
AELVIA	NP	HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BINOSTO	NP	HSA
BONIVA	NP	
FOSAMAX	NP	HSA
FOSAMAX PLUS D	NP	HSA
<i>ibandronate sodium 150 mg tab</i>	p	HSA
<i>risedronate sodium (5 mg tablet, 35 mg tab, 150 mg tab)</i>	np	HSA
<i>risedronate sodium 30 mg tab</i>	np	HSA
<i>risedronate sodium dr</i>	np	HSA
<b>CARBONIC ANHYDRASE INHIBITORS (MISC.)</b>		
<i>dichlorphenamide</i>	np	S
KEVEYIS	NP	S
ORMALVI	np	S
<b>CARIOSTATIC AGENTS</b>		
FLORIVA 0.25 MG/ML DROPS	NP	C [ACA] Age Edits Apply: Up to 16 years HSA ACA
<b>COMPLEMENT INHIBITORS (92:32)</b>		
BERINERT 500 UNIT KIT	NP	S PA QPD 0.334 per day
HAEGARDA 2,000 UNIT VIAL	P	S PA QPD 0.965 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HAEGARDA 3,000 UNIT VIAL	P	S PA QPD 0.643 per day
RUCONEST	NP	S PA QPD 0.267 per day
IMMUNOMODULATORY AGENTS		
ACTIMMUNE	P	S
JOENJA	NP	S PA QPD 2.0 per day
REDITREX	P	ST
THALOMID (150 MG CAPSULE, 200 MG CAPSULE)	P	S PA QPD 2 per day
THALOMID 100 MG CAPSULE	P	S PA QPD 4.0 per day
THALOMID 50 MG CAPSULE	P	S PA QPD 3.0 per day
OTHER MISCELLANEOUS THERAPEUTIC AGENTS		
<i>betaine anhydrous</i>	np	S
CARNITOR (1 GM/10 ML ORAL SOLN, 100 MG/ML ORAL SOLN, 330 MG TABLET)	NP	
CARNITOR SF	NP	



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CYSTADANE	NP	S
CYSTAGON	P	S
DUVYZAT	NP	S PA QPD 14.0 per day
ENDARI	NP	S PA
EVRYSDI 60 MG/80 ML(0.75MG/ML)	NP	S PA QPD 8 per day
EVRYSDI 5 MG TABLET	NP	S PA QPD 1.0 per day
l-glutamine 5 gram powder pkt	np	S PA
<i>levocarnitine (1 g/10 ml soln, 330 mg tablet)</i>	np	
<i>levocarnitine sf</i>	np	
NULIBRY	NP	S
PROCYSBI (DR 25 MG CAPSULE, DR 75 MG CAPSULE, DR 75 MG GRANULE PKT, DR 300 MG GRANULE PKT)	NP	S PA
REZUROCK	NP	S PA QPD 1 per day
RIVFLOZA (80 MG/0.5 ML VIAL, 160 MG/ML SYRINGE)	NP	S PA QPD 0.034 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RIVFLOZA 128 MG/0.8 ML SYRINGE	NP	S PA QPD 0.027 per day
SKYCLARYS	NP	S PA QPD 3 per day
SOHONOS	NP	S
THIOLA	NP	S
THIOLA EC	NP	S
<i>tiopronin (100 mg tablet, dr 100 mg tablet, dr 300 mg tablet)</i>	np	S
VENXXIVA	np	S
VOXZOGO	NP	S PA QPD 1 per day
XPHOZAH	NP	PA QPD 2.0 per day
PROTECTIVE AGENTS		
AMPYRA	NP	S PA QPD 2 per day
<i>dalfampridine er</i>	np	S PA QPD 2.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>MTOR INHIBITORS</b>		
<b>MTOR INHIBITORS, MISCELLANEOUS</b>		
RAPAMUNE (0.5 MG TABLET, 1 MG TABLET, 1 MG/ML ORAL SOLN, 2 MG TABLET)	NP	S HSA
<i>sirolimus 1 mg/ml oral soln</i>	np	S HSA
<i>sirolimus (0.5 mg tablet, 1 mg tablet, 1 mg/ml solution, 2 mg tablet)</i>	np	S HSA
<b>MULTIPLE SCLEROSIS AGENTS</b>		
<b>AMINO ACID POLYMERS</b>		
COPAXONE 20 MG/ML SYRINGE	NP	S PA QPD 1 per day
COPAXONE 40 MG/ML SYRINGE	NP	S PA QPD 0.429 per day
<i>glatiramer 20 mg/ml syringe</i>	np	S QPD 1 per day
<i>glatiramer 40 mg/ml syringe</i>	np	S QPD 0.429 per day
GLATOPA 20 MG/ML SYRINGE	np	S QPD 1 per day
GLATOPA 40 MG/ML SYRINGE	np	S QPD 0.429 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>ANTIMETABOLITES</b>		
AUBAGIO	NP	S PA QPD 1 per day
MAVENCLAD (10 MG 4 TABLET PK, 10 MG 8 TABLET PK)	P	QL MAX 8 / 301 DAYS S PA
MAVENCLAD 10 MG X 10 TABLET PK	P	QL MAX 20 / 301 DAYS S PA
MAVENCLAD 10 MG X 5 TABLET PK	P	QL MAX 10 / 301 DAYS S PA
MAVENCLAD 10 MG X 6 TABLET PK	P	QL MAX 12 / 301 DAYS S PA
MAVENCLAD 10 MG X 7 TABLET PK	P	QL MAX 14 / 301 DAYS S PA
MAVENCLAD 10 MG X 9 TABLET PK	P	QL MAX 9 / 301 DAYS S PA
<i>teriflunomide</i>	np	S QPD 1.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>FUMARATES</b>		
BAFIERTAM	NP	S PA QPD 4 per day
<i>dimethyl fumarate 30d start pk</i>	np	QL MAX 60 / 180 DAYS S
<i>dimethyl fumarate dr 120 mg cp</i>	np	QL MAX 56 / 180 DAYS S
<i>dimethyl fumarate dr 240 mg cp</i>	np	S QPD 2.0 per day
TECFIDERA DR 120 MG CAPSULE	NP	QL MAX 56 / 180 DAYS S PA
TECFIDERA DR 240 MG CAPSULE	NP	S PA QPD 2 per day
TECFIDERA STARTER PACK	NP	QL MAX 60 / 180 DAYS S PA
VUMERITY	P	S PA QPD 4 per day
<b>INTERFERONS</b>		
AVONEX (4 PACK)	P	S PA QPD 0.036 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AVONEX PEN (4 PACK)	P	S PA QPD 0.036 per day
BETASERON 0.3 MG KIT	P	S PA QPD 0.5 per day
EXTAVIA (0.3 MG KIT, 0.3 MG VIAL)	NP	S PA QPD 0.5 per day
PLEGRIDY 125 MCG/0.5 ML SYRINGE	P	S PA QPD 0.036 per day
PLEGRIDY SYRINGE STARTER PACK	P	QL MAX 1 / 180 DAYS S PA
PLEGRIDY 125 MCG/0.5 ML PEN	P	S PA QPD 0.036 per day
PLEGRIDY PEN INJ STARTER PACK	P	QL MAX 1 / 180 DAYS S PA
REBIF (22 MCG/0.5 ML SYRINGE, 44 MCG/0.5 ML SYRINGE)	P	S PA QPD 0.215 per day
REBIF TITRATION PACK	P	QL MAX 4.2 / 180 DAYS S PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
REBIF REBIDOSE (22 MCG/0.5 ML, 44 MCG/0.5 ML)	P	S PA QPD 0.215 per day
REBIF REBIDOSE TITRATION PACK	P	QL MAX 4.2 / 180 DAYS S PA
MONOCLONAL ANTIBODIES (90:04)		
KESIMPTA PEN	P	S PA QPD 0.015 per day
SPHINGOSINE 1-PHOSPHATE (S1P) AGENTS		
<i>fingolimod</i>	np	S QPD 1.0 per day
GILENYA	NP	S PA QPD 1 per day
MAYZENT 0.25MG START-1MG MAINT	P	QL MAX 7 / 180 DAYS S PA
MAYZENT 0.25MG START-2MG MAINT	P	QL MAX 12 / 180 DAYS S PA
MAYZENT (1 MG TABLET, 2 MG TABLET)	P	S PA QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MAYZENT 0.25 MG TABLET	P	S PA QPD 4 per day
PONVORY 14-DAY STARTER PACK	NP	QL MAX 14 / 180 DAYS S PA
PONVORY 20 MG TABLET	NP	S PA QPD 1.0 per day
TASCENSO ODT	NP	S PA QPD 1 per day
ZEPOSIA STARTER KIT (28-DAY)	P	QL max 28 / 180 days S PA
ZEPOSIA STARTER KIT (37-DAY)	P	QL MAX 37 / 180 DAYS S PA
ZEPOSIA STARTER PACK (7-DAY)	P	QL MAX 7 / 180 DAYS S PA
ZEPOSIA 0.92 MG CAPSULE	P	S PA QPD 1.0 per day



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MYASTHENIA GRAVIS AGENTS COMPLEMENT INHIBITORS (90:08)		
ZILBRYSQ	NP	S
NEUROMYELITIS OPTICA SPECTR DIS AGENTS MONOCLONAL ANTIBODIES (90:12)		
ENSPRYNG	NP	QL max 1 / 28 days S PA
NONHORMONAL CONTRACEPTIVES		
<i>aimsco</i>	NP	HSA ACA
<i>caya contoured</i>	NP	C [ACA] Quantity Limits May Apply HSA ACA
<i>durex avanti bare real feel</i>	NP	HSA ACA
<i>durex extra sensitive</i>	NP	HSA ACA
<i>durex tropical</i>	NP	HSA ACA
<i>fantasy</i>	NP	HSA ACA
<i>fc2 female condom</i>	NP	HSA ACA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>femcap</i>	NP	C [ACA] Quantity Limits May Apply HSA ACA
<i>kimono</i>	NP	HSA ACA
<i>kimono microthin (, large)</i>	NP	HSA ACA
<i>kimono microthin aqua lube</i>	NP	HSA ACA
<i>kimono textured</i>	NP	HSA ACA
<i>kimono thin</i>	NP	HSA ACA
<i>omniflex diaphragm</i>	NP	C [ACA] Quantity Limits May Apply HSA ACA
PHEXXI	NP	HSA ACA
<i>trojan enz</i>	NP	HSA ACA
<i>trojan magnum</i>	NP	HSA ACA
<i>trojan ultra ribbed</i>	NP	HSA ACA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>trojan ultra thin</i>	NP	HSA ACA
<i>trojan ultra thin-spermicidal</i>	NP	HSA ACA
<i>true cover</i>	NP	HSA ACA
<i>trustex</i>	NP	HSA ACA
<i>trustex condom</i>	NP	HSA ACA
<i>trustex latex condom</i>	NP	HSA ACA
<i>trustex-ria</i>	NP	HSA ACA
VCF (FILM, GEL)	NP	HSA ACA
<i>wide seal diaphragm</i>	NP	C [ACA] Quantity Limits May Apply HSA ACA
NONSTEROIDAL ANTI-INFLAMMATORY AGENTS		
CYCLOOXYGENASE-2 (COX-2) INHIBITORS		
CELEBREX	NP	ST
<i>celecoxib (50 mg capsule, 100 mg capsule, 200 mg capsule)</i>	p	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>celecoxib 400 mg capsule</i>	np	
ELYXYB	NP	PA QPD 0.96 per day
NONSTEROIDAL ANTI-INFLAMM. AGENTS, MISC		
DUEXIS	NP	PA QPD 3 per day
<i>ibuprofen-famotidine</i>	np	PA QPD 3.0 per day
TOLECTIN 600	NP	ST
<i>tolmetin sodium (400 mg cap, 600 mg tab)</i>	NP	ST
REVERSIBLE COX-1/COX-2 INHIBITORS		
ANAPROX DS	NP	ST
ARTHROTEC 50	NP	ST
ARTHROTEC 75	NP	ST
CAMBIA	NP	ST
COXANTO	NP	ST
DAYPRO	NP	ST
<i>diclofenac</i>	NP	ST
<i>diclofenac epolamine</i>	NP	
<i>diclofenac potassium (pot 25 mg tablet, pot 50 mg powdr pkt, potassium 25 mg cap)</i>	np	
<i>diclofenac pot 50 mg tablet</i>	np	
<i>diclofenac sodium 1% gel</i>	p	
<i>diclofenac 2% solution pump</i>	np	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>diclofenac sodium (1.5% topical soln, sod dr 25 mg tab, sod ec 25 mg tab)</i>	np	
<i>diclofenac sodium (dr 50 mg tab, dr 75 mg tab, ec 50 mg tab, ec 75 mg tab)</i>	p	
<i>diclofenac sodium er</i>	np	
<i>diclofenac sodium-misoprostol</i>	np	
<i>diflunisal</i>	np	
DOLOBID	NP	ST
EC-NAPROSYN	NP	ST
<i>ec-naproxen</i>	np	
<i>etodolac (200 mg capsule, 300 mg capsule, 400 mg tablet, 500 mg tablet)</i>	np	
<i>etodolac er</i>	np	
FELDENE	NP	ST
<i>fenoprofen 200 mg capsule</i>	NP	ST
<i>fenoprofen calcium (400 mg capsule, 600 mg tablet)</i>	np	
FENOPRON	NP	PA
FLECTOR	NP	
<i>flurbiprofen</i>	np	
<i>flurbiprofen sodium</i>	P	
IBU	p	
<i>ibuprofen 100 mg/5 ml susp</i>	p	
<i>ibuprofen (400 mg tablet, 600 mg tablet, 800 mg tablet)</i>	p	
INDOCIN 25 MG/5 ML SUSPENSION	NP	ST
INDOCIN 50 MG SUPPOSITORY	np	PA QPD 4.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>indomethacin (25 mg capsule, 50 mg capsule)</i>	p	
<i>indomethacin 25 mg/5 ml susp</i>	np	
<i>indomethacin 50 mg suppository</i>	np	PA QPD 4.0 per day
<i>indomethacin er</i>	p	
<i>ketoprofen (25 mg capsule, 50 mg capsule, 75 mg capsule, er 200 mg capsule)</i>	NP	ST
<i>ketorolac 15.75 mg nasal spray</i>	NP	QPD 1 per day
<i>ketorolac 10 mg tablet</i>	p	QPD 4.0 per day
KIPROFEN	NP	ST
LICART	NP	
LODINE	NP	ST
LOFENA	np	
<i>meclofenamate sodium</i>	NP	ST
<i>mefenamic acid</i>	np	
<i>meloxicam (5 mg capsule, 10 mg capsule)</i>	np	
<i>meloxicam 7.5 mg/5 ml susp</i>	NP	ST
<i>meloxicam (7.5 mg tablet, 15 mg tablet)</i>	p	
<i>nabumetone</i>	p	
NALFON (400 MG CAPSULE, 600 MG TABLET)	NP	ST
NAPRELAN	NP	ST
NAPROSYN (125 MG/5 ML SUSPEN, 500 MG TABLET)	NP	ST
<i>naproxen (125 mg/5 ml suspen, dr 375 mg tablet, dr 500 mg tablet)</i>	np	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>naproxen (250 mg tablet, 375 mg tablet, 500 mg kit, 500 mg tablet)</i>	p	
<i>naproxen sodium (275 mg tab, 550 mg tab)</i>	np	
<i>naproxen sodium cr</i>	np	
<i>naproxen sodium er</i>	np	
<i>naproxen-esomeprazole mag</i>	np	PA QPD 2.0 per day
<i>oxaprozin 300 mg capsule</i>	NP	ST
<i>oxaprozin (600 mg caplet, 600 mg tablet)</i>	np	
PENNSAID 2% PUMP	NP	
<i>piroxicam 10 mg capsule</i>	p	
<i>piroxicam 20 mg capsule</i>	np	
RELAFEN DS	NP	ST
SPRIX	NP	QPD 1 per day
<i>sulindac</i>	p	
TIVORBEX	NP	ST
VIMOVO	NP	PA QPD 2 per day
VIVLODEX	NP	ST
ZIPSOR	NP	ST
ZORVOLEX	NP	ST
<b>SALICYLATES</b>		
ADULT ASPIRIN REGIMEN	p	ACA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>aspirin (81 mg tablet, cvs 81 mg tab, eq 81 mg tab, eql 81 mg tab, ft 81 mg tab, gnp 81 mg tab, gs 81 mg tab, hm 81 mg tab, kro 81 mg tab, pub 81 mg tab, qc 81 mg tab, ra 81 mg tab)</i>	p	ACA
<i>aspirin ec (cvs ec 81 mg tablet, ec 81 mg tablet, eq ec 81 mg tablet, eql ec 81 mg tablet, ft ec 81 mg tablet, gnp ec 81 mg tablet, gs ec 81 mg tablet, hm ec 81 mg tablet, kro ec 81 mg tablet, qc ec 81 mg tablet, ra ec 81 mg tablet, sm ec 81 mg tablet)</i>	p	ACA
ASPIRIN REGIMEN	p	ACA
<i>aspirin-dipyridamole er</i>	np	HSA
<i>aspirin-omeprazole</i>	NP	PA QPD 1 per day
BAYER CHEWABLE ASPIRIN	p	ACA
<i>butalbital-aspirin-caffeine cp</i>	np	QPD 6.0 per day
<i>butalbital-aspirin-caffeine tb</i>	NP	QPD 6 per day
<i>children's aspirin</i>	p	ACA
DURLAZA	NP	
ECOTRIN EC 81 MG TABLET	p	ACA
LOW DOSE ASPIRIN EC	p	ACA
ST. JOSEPH ASPIRIN	p	ACA
ST. JOSEPH ASPIRIN EC	p	ACA
YOSPRALA	NP	PA QPD 1 per day
<b>OXYTOCICS</b>		
CERVIDIL	NP	



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>methylergonovine 0.2 mg tablet</i>	np	
PARATHYROID AND ANTIPARATHYROID AGENTS		
ANTIPARATHYROID AGENTS		
<i>calcitonin-salmon 200 unit spr</i>	np	HSA
<i>calcitonin-salmon 400 unit/2ml</i>	np	S
<i>cinacalcet hcl</i>	np	S PA
MIACALCIN	NP	S
SENSIPAR	NP	S PA
PARATHYROID AGENTS		
FORTEO	NP	S PA QPD 0.086 per day
NATPARA	NP	S
<i>teriparatide 600 mcg/2.4ml pen</i>	np	S PA QPD 0.086 per day
<i>teriparatide 620 mcg/2.48 ml</i>	NP	S PA QPD 0.089 per day
TYMLOS	P	S PA QPD 0.052 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>PENICILLIN ANTIBIOTICS</b>		
<b>AMINOPENICILLIN ANTIBIOTICS</b>		
<i>amoxicillin (125 mg/5 ml susp, 200 mg/5 ml susp, 250 mg capsule, 250 mg/5 ml susp, 400 mg/5 ml susp, 500 mg capsule, 500 mg tablet, 875 mg tablet)</i>	p	
<i>amoxicillin (125 mg tab chew, 250 mg tab chew)</i>	P	
<i>amoxicillin-clavulanate pot er</i>	P	
<i>amoxicillin-clavulanate potass (200-28.5 mg/5 ml sus, 400-57 mg/5 ml susp, 500-125 mg tablet, 875-125 mg tablet)</i>	p	
<i>amoxicillin-clavulanate potass (250-125 mg tablet, 250-62.5 mg/5 ml sus, 600-42.9 mg/5 ml sus)</i>	np	
<i>amoxicillin-clavulanate potass (200-28.5 mg tab chew, 400-57 mg tab chew)</i>	P	
<i>ampicillin trihydrate</i>	p	
AUGMENTIN 125-31.25 MG/5 ML	P	
AUGMENTIN (250-62.5 MG/5 ML, 500-125 TABLET)	NP	
AUGMENTIN ES-600	NP	
<b>NATURAL PENICILLIN ANTIBIOTICS</b>		
<i>penicillin v potassium (125 mg/5 ml soln, 250 mg/5 ml soln)</i>	P	
<i>penicillin v potassium (250 mg tablet, 500 mg tablet)</i>	p	
<b>PENICILLINASE-RESISTANT PENICILLINS</b>		
<i>dicloxacillin sodium</i>	np	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PHOSPHODIESTERASE-4 INHIBITORS (90:24)		
PHOSPHODIESTERASE-4 INHIBITORS, MISC		
OTEZLA 10-20 MG STARTER 28 DAY	P	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> max 55 / 180 days
OTEZLA 10-20-30MG START 28 DAY	P	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> MAX 55 / 180 DAYS
OTEZLA 20 MG TABLET	P	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #0070c0; color: white; padding: 2px 5px; border-radius: 3px;">QPD</div> </div> 2.0 per day
OTEZLA 30 MG TABLET	P	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #0070c0; color: white; padding: 2px 5px; border-radius: 3px;">QPD</div> </div> 2 per day
RENIN-ANGIOTENSIN-ALDOSTERONE SYS. INHIB		
ANGIOTENSIN II RECEPTOR ANTAGONIST/NEPROLYS		
ENTRESTO	P	
ENTRESTO SPRINKLE	P	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #0070c0; color: white; padding: 2px 5px; border-radius: 3px;">QPD</div> </div> 8.0 per day
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
ATACAND	NP	<div style="background-color: #003366; color: white; padding: 2px 5px; border-radius: 3px;">HSA</div>
ATACAND HCT	NP	<div style="background-color: #003366; color: white; padding: 2px 5px; border-radius: 3px;">HSA</div>
AVALIDE	NP	<div style="background-color: #003366; color: white; padding: 2px 5px; border-radius: 3px;">HSA</div>
AVAPRO	NP	<div style="background-color: #003366; color: white; padding: 2px 5px; border-radius: 3px;">HSA</div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BENICAR	NP	HSA
BENICAR HCT	NP	HSA
<i>candesartan cilexetil</i>	np	HSA
<i>candesartan-hydrochlorothiazid</i>	np	HSA
COZAAR	NP	HSA
DIOVAN	NP	HSA
DIOVAN HCT	NP	HSA
EDARBI	NP	HSA
EDARBYCLOR	NP	HSA
HYZAAR	NP	HSA
<i>irbesartan</i>	p	HSA
<i>irbesartan-hydrochlorothiazide</i>	p	HSA
<i>losartan potassium</i>	p	HSA
<i>losartan-hydrochlorothiazide</i>	p	HSA
MICARDIS	NP	HSA
MICARDIS HCT	NP	HSA
<i>olmesartan medoxomil</i>	p	HSA
<i>olmesartan-amlodipine-hctz</i>	np	HSA
<i>olmesartan-hydrochlorothiazide</i>	p	HSA
<i>telmisartan (40 mg tablet, 80 mg tablet)</i>	np	HSA
<i>telmisartan 20 mg tablet</i>	p	HSA
<i>telmisartan-amlodipine</i>	np	HSA
<i>telmisartan-amlodipine 40-10 (ndc: 00378107693)</i>	NP	HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>telmisartan-amlodipine 40-5 mg (ndc: 00378107593)</i>	NP	HSA
<i>telmisartan-amlodipine 80-10 (ndc: 00378107893)</i>	NP	HSA
<i>telmisartan-amlodipine 80-5 mg (ndc: 00378107793)</i>	NP	HSA
<i>telmisartan-hydrochlorothiazid</i>	np	HSA
TRIBENZOR	NP	HSA
<i>valsartan (4 mg/ml solution, 20 mg/5 ml solution)</i>	NP	HSA
<i>valsartan (40 mg tablet, 80 mg tablet, 160 mg tablet, 320 mg tablet)</i>	p	HSA
<i>valsartan-hydrochlorothiazide (160-25 mg tab, 320-12.5 mg tab, 320-25 mg tab)</i>	np	HSA
<i>valsartan-hydrochlorothiazide (80-12.5 mg tab, 160-12.5 mg tab)</i>	p	HSA
<b>ANGIOTENSIN-CONVERTING ENZYME INHIBITORS</b>		
ACCUPRIL	NP	HSA
ACCURETIC	NP	HSA
ALTACE	NP	HSA
<i>benazepril hcl</i>	p	HSA
<i>benazepril-hydrochlorothiazide</i>	np	HSA
<i>captopril</i>	np	HSA
<i>captopril-hydrochlorothiazide</i>	NP	HSA
<i>enalapril 1 mg/ml oral soln</i>	np	HSA PA QPD 40.0 per day
<i>enalapril maleate (2.5 mg tab, 5 mg tablet, 10 mg tab, 20 mg tab)</i>	p	HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>enalapril-hydrochlorothiazide</i>	p	HSA
EPANED	NP	HSA
		PA
		QPD 40.0 per day
<i>fosinopril sodium</i>	p	HSA
<i>fosinopril-hydrochlorothiazide</i>	np	HSA
<i>lisinopril</i>	p	HSA
<i>lisinopril-hydrochlorothiazide</i>	p	HSA
LOTENSIN	NP	HSA
LOTENSIN HCT	NP	HSA
<i>moexipril hcl</i>	np	HSA
<i>perindopril erbumine (2 mg tab, 4 mg tab)</i>	np	HSA
<i>perindopril erbumine 8 mg tab</i>	P	HSA
PRESTALIA	NP	HSA
QBRELIS	NP	HSA
		PA
		QPD 40.0 per day
<i>quinapril hcl</i>	p	HSA
<i>quinapril-hctz 20-12.5 mg tab (greenstone)</i>	np	HSA
<i>quinapril-hctz 20-25 mg tab (greenstone)</i>	np	HSA
<i>quinapril-hydrochlorothiazide</i>	np	HSA
<i>ramipril</i>	p	HSA
<i>trandolapril</i>	p	HSA
<i>trandolapril-verapamil er</i>	NP	HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VASERETIC	NP	HSA
VASOTEC	NP	HSA
ZESTORETIC	NP	HSA
ZESTRIL	NP	HSA
MINERALOCORTICOID (ALDOSTERONE) ANTAGNISTS		
KERENDIA	P	ST QPD 1 per day
RENIN INHIBITORS		
<i>aliskiren</i>	np	HSA
TEKTURNA	NP	HSA
TEKTURNA HCT (150-12.5 MG TAB, 300-12.5 MG TAB, 300-25 MG TABLET)	NP	HSA
TEKTURNA HCT 150-25 MG TABLET	NP	
RESPIRATORY TRACT AGENTS		
ANTIFIBROTIC AGENTS		
ESBRIET (267 MG CAPSULE, 267 MG TABLET)	NP	S PA QPD 6.0 per day
ESBRIET 801 MG TABLET	NP	S PA QPD 3 per day
OFEV	NP	S PA QPD 2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>pirfenidone (267 mg capsule, 267 mg tablet)</i>	np	S PA QPD 6.0 per day
<i>pirfenidone 534 mg tablet</i>	NP	QL MAX 21 / 180 DAYS S PA
<i>pirfenidone 801 mg tablet</i>	np	S PA QPD 3.0 per day
<b>ANTITUSSIVES</b>		
<i>benzonatate (100 mg capsule, perle 100 mg cap, 200 mg capsule)</i>	p	
<i>benzonatate 150 mg capsule</i>	np	
BROMFED DM	p	
<i>brompheniramine-pseudoephed-dm</i>	p	
HYCODAN (5 MG TABLET, 5 MG/5 ML CUP, 5 MG/5 ML SOLN)	NP	
<i>hydrocodone-chlorphen er susp (tris pharma)</i>	NP	
<i>hydrocodone-chlorpheniramne er</i>	np	
<i>hydrocodone-homatropine mbr (hydrocodone-homatrop 5 ml cup, hydrocodone-homatropine soln)</i>	p	
<i>hydrocodone-homatropine 5-1.5</i>	np	
HYDROMET	p	
<i>promethazine vc-codeine</i>	NP	
<i>promethazine-codeine</i>	p	
<i>promethazine-dm</i>	p	



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TUXARIN ER	NP	
TUZISTRA XR	NP	
MUCOLYTIC AGENTS		
PULMOZYME	P	S
PHOSPHODIESTERASE TYPE 4 INHIBITORS		
DALIRESP 250 MCG TABLET	NP	HSA
DALIRESP 500 MCG TABLET	NP	HSA
<i>roflumilast 250 mcg tablet</i>	np	HSA
<i>roflumilast 500 mcg tablet</i>	np	HSA
ZORYVE 0.3% FOAM	NP	PA
RESPIRATORY TRACT AGENTS, MISCELLANEOUS		
BRONCHITOL	NP	S
WINREVAIR (45 MG ONE-VIAL KIT, 45 MG TWO-VIAL KIT, 60 MG ONE-VIAL KIT)	NP	S PA QPD 0.048 per day
WINREVAIR (2 PACK)	NP	S PA QPD 0.048 per day
VASODILATING AGENTS (RESPIRATORY TRACT)		
ADEMPAS	NP	S PA QPD 3 per day
<i>ambrisentan</i>	np	S PA QPD 1.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>bosentan</i>	np	S PA QPD 2 per day
LETAIRIS	NP	S PA QPD 1 per day
OPSUMIT	P	S PA QPD 1 per day
OPSYNVI	NP	S PA QPD 1.0 per day
ORENITRAM ER	NP	S PA
ORENITRAM MONTH 1 TITRATION KT	NP	QL MAX 168 / 180 DAYS S PA
ORENITRAM MONTH 2 TITRATION KT	NP	QL MAX 336 / 180 DAYS S PA
ORENITRAM MONTH 3 TITRATION KT	NP	QL MAX 252 / 180 DAYS S PA
TADLIQ	NP	S PA QPD 10 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRACLEER (62.5 MG TABLET, 125 MG TABLET)	NP	S PA QPD 2 per day
TRACLEER 32 MG TABLET FOR SUSP	P	S PA QPD 4 per day
TYVASO	NP	S PA QPD 2.9 per day
TYVASO DPI (16 MCG CARTRIDGE, 32 MCG CARTRIDGE, 48 MCG CARTRIDGE, 64 MCG CARTRIDGE)	NP	S PA QPD 4 per day
TYVASO DPI 16-32 MCG TITR KIT	NP	QL MAX 196 / 180 DAYS S PA
TYVASO DPI 16-32-48 MCG TITRAT	NP	QL MAX 252 / 180 DAYS S PA
TYVASO DPI 32-48 MCG MAINT KIT	NP	S PA QPD 8 per day
TYVASO REFILL KIT	NP	S PA QPD 2.9 per day
TYVASO STARTER KIT	NP	QL MAX 81.2 / 180 DAYS S PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
UPTRAVI 200-800 TITRATION PACK	P	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-bottom: 2px;">QL</div> <div style="background-color: #d62728; color: white; padding: 2px 5px; margin-bottom: 2px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px;">PA</div> </div> MAX 200 / 180 DAYS
UPTRAVI (200 MCG TABLET, 400 MCG TABLET, 600 MCG TABLET, 800 MCG TABLET, 1,000 MCG TABLET, 1,200 MCG TABLET, 1,400 MCG TABLET, 1,600 MCG TABLET)	P	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #d62728; color: white; padding: 2px 5px; margin-bottom: 2px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px; margin-bottom: 2px;">PA</div> <div style="background-color: #1f77b4; color: white; padding: 2px 5px;">QPD</div> </div> 2 per day
<b>SKELETAL MUSCLE RELAXANTS</b>		
<b>CENTRALLY ACTING SKELETAL MUSCLE RELAXANT</b>		
AMRIX	NP	
<i>chlorzoxazone (250 mg tablet, 375 mg tablet, 750 mg tablet)</i>	np	
<i>chlorzoxazone 500 mg tablet</i>	np	
<i>cyclobenzaprine 7.5 mg tablet</i>	np	
<i>cyclobenzaprine hcl (5 mg tablet, 10 mg tablet)</i>	p	
<i>cyclobenzaprine hcl er</i>	np	
FEXMID	np	
LORZONE	np	
<i>metaxalone 400 mg tablet</i>	np	
<i>metaxalone 800 mg tablet</i>	np	
<i>methocarbamol (500 mg tablet, 750 mg tablet)</i>	p	
<i>methocarbamol 1,000 mg tablet</i>	NP	
TANLOR	NP	
<i>tizanidine hcl (2 mg capsule, 2 mg tablet, 4 mg tablet)</i>	p	
<i>tizanidine hcl (4 mg capsule, 6 mg capsule)</i>	np	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZANAFLEX (2 MG CAPSULE, 4 MG CAPSULE, 4 MG TABLET, 6 MG CAPSULE)	NP	
<b>DIRECT-ACTING SKELETAL MUSCLE RELAXANTS</b>		
DANTRIUM 25 MG CAPSULE	NP	
<i>dantrolene sodium (25 mg cap, 50 mg cap, 100 mg cap)</i>	np	
<b>GABA-DERIVATIVE SKELETAL MUSCLE RELAXANT</b>		
<i>baclofen 25 mg/5 ml suspension</i>	np	PA QPD 16.0 per day
<i>baclofen 10 mg/5 ml solution</i>	NP	PA QPD 40.0 per day
<i>baclofen 5 mg/5 ml solution</i>	np	PA QPD 80.0 per day
<i>baclofen (10 mg tablet, 20 mg tablet)</i>	p	
<i>baclofen (5 mg tablet, 15 mg tablet)</i>	np	
FLEQSUVY	NP	PA QPD 16 per day
LYVISPAH	NP	PA QPD 4.0 per day
OZOBAX	NP	PA QPD 80 per day
OZOBAX DS	NP	PA QPD 40.0 per day
<b>INDIRECT-ACTING SKELETAL MUSCLE RELAXANT</b>		
<i>orphenadrine citrate er</i>	np	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SKELETAL MUSCLE RELAXANTS, MISCELLANEOUS		
NORGESIC	np	
NORGESIC FORTE	NP	
<i>orphenadrine-aspirin-caffeine</i>	np	
ORPHENGESIC FORTE	np	
SKIN AND MUCOUS MEMBRANE AGENTS		
ANTIPROLIFERANTS		
<i>bexarotene 1% gel</i>	np	S PA
CARAC	P	PA
EFUDEX	NP	QL MAX 240 / 90 DAYS PA
FLUOROPLEX	P	PA
<i>fluorouracil 0.5% cream</i>	NP	PA
<i>fluorouracil 5% cream</i>	np	QL MAX 240 / 90 DAYS PA
<i>fluorouracil 2% topical soln</i>	P	
<i>fluorouracil 5% topical soln</i>	np	
<i>imiquimod (cream, cream pump)</i>	np	PA
<i>imiquimod 5% cream packet</i>	np	QL max 48 per 112 days
KLISYRI 1% (250 MG) OINT PKT	NP	QL MAX 5 / 90 DAYS PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KLISYRI 1% (350 MG) OINT PKT	NP	<div style="background-color: #6a3d9a; color: white; padding: 2px;">QL</div> <div style="background-color: #8b572a; color: white; padding: 2px;">PA</div> max 5 / 90 days
PANRETIN	NP	<div style="background-color: #c00000; color: white; padding: 2px;">S</div>
TARGRETIN 1% GEL	NP	<div style="background-color: #c00000; color: white; padding: 2px;">S</div> <div style="background-color: #8b572a; color: white; padding: 2px;">PA</div>
TOLAK	NP	<div style="background-color: #8b572a; color: white; padding: 2px;">PA</div>
VALCHLOR	P	<div style="background-color: #c00000; color: white; padding: 2px;">S</div>
ZYCLARA (2.5% CREAM PUMP, 3.75% CREAM, 3.75% CREAM PUMP)	NP	<div style="background-color: #8b572a; color: white; padding: 2px;">PA</div>
<b>ANTI PRURITICS AND LOCAL ANESTHETICS</b>		
DERMACINRX LIDOCAN	np	<div style="background-color: #8b572a; color: white; padding: 2px;">PA</div> <div style="background-color: #4169e1; color: white; padding: 2px;">QPD</div> 3.0 per day
<i>doxepin 5% cream</i>	np	<div style="background-color: #8b572a; color: white; padding: 2px;">PA</div> <div style="background-color: #4169e1; color: white; padding: 2px;">QPD</div> 1.5 per day
<i>lidocaine 5% patch</i>	np	<div style="background-color: #8b572a; color: white; padding: 2px;">PA</div> <div style="background-color: #4169e1; color: white; padding: 2px;">QPD</div> 3.0 per day
<i>lidocaine 5% ointment</i>	p	<div style="background-color: #8b572a; color: white; padding: 2px;">PA</div> <div style="background-color: #4169e1; color: white; padding: 2px;">QPD</div> 3.334 per day
<i>lidocaine-prilocaine</i>	p	<div style="background-color: #4169e1; color: white; padding: 2px;">QPD</div> 2.0 per day
<i>lidocaine-tetracaine</i>	NP	<div style="background-color: #8b572a; color: white; padding: 2px;">PA</div> <div style="background-color: #4169e1; color: white; padding: 2px;">QPD</div> 4 per day
LIDOCAN II	np	<div style="background-color: #8b572a; color: white; padding: 2px;">PA</div> <div style="background-color: #4169e1; color: white; padding: 2px;">QPD</div> 3.0 per day
LIDOCAN III	np	<div style="background-color: #8b572a; color: white; padding: 2px;">PA</div> <div style="background-color: #4169e1; color: white; padding: 2px;">QPD</div> 3.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LIDOCAN IV	np	PA QPD 3.0 per day
LIDOCAN V	np	PA QPD 3.0 per day
LIDODERM	NP	PA QPD 3.0 per day
PLIAGLIS	NP	PA QPD 4 per day
PRUDOXIN	NP	PA QPD 1.5 per day
ZONALON	NP	PA QPD 1.5 per day
ZTLIDO	NP	PA QPD 3 per day
<b>ASTRINGENTS (84:12)</b>		
OBREXZA	NP	PA QPD 1 per day
<b>CELL STIMULANTS AND PROLIFERANTS</b>		
ALTRENO	NP	ST
ATRALIN	NP	ST
AVITA (CREAM, GEL)	np	
REGRANEX	NP	
RETIN-A (0.01% GEL, 0.025% CREAM, 0.025% GEL, 0.05% CREAM, 0.1% CREAM)	NP	ST
RETIN-A MICRO	NP	ST



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RETIN-A MICRO PUMP (PUMP 0.04% GEL, PUMP 0.08% GEL, PUMP 0.1% GEL)	NP	ST
RETIN-A MICRO PUMP 0.06% GEL	NP	ST
<i>tretinoin (0.01% gel, 0.025% cream, 0.025% gel, 0.05% cream, 0.05% gel, 0.1% cream)</i>	np	
<i>tretinoin microsphere (gel 0.04% pump, gel 0.04% tube, gel 0.08% pump, gel 0.1% pump, gel 0.1% tube)</i>	np	
TWYNEO	NP	ST
<b>KERATOLYTIC AGENTS</b>		
ABSORICA (10 MG CAPSULE, 20 MG CAPSULE, 30 MG CAPSULE, 40 MG CAPSULE)	NP	
ABSORICA (25 MG CAPSULE, 35 MG CAPSULE)	NP	
ABSORICA LD	NP	
AC CUTANE	np	
<i>acitretin</i>	np	
<i>adapalene (0.1% cream, 0.3% gel, 0.3% gel pump)</i>	np	
<i>adapalene (solution, swab)</i>	NP	ST
AKLIEF	NP	ST
AMNESTEEM	np	
ARAZLO	NP	ST
CLARAVIS	np	
CONDYLOX	NP	
DIFFERIN 0.1% CREAM	NP	ST
DIFFERIN 0.3% GEL PUMP	NP	ST
DIFFERIN 0.1% LOTION	P	ST

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DUOBRII	NP	
FABIOR	NP	ST
<i>isotretinoin (10 mg capsule, 20 mg capsule, 30 mg capsule, 40 mg capsule)</i>	np	
<i>isotretinoin (25 mg capsule, 35 mg capsule)</i>	np	
<i>podofilox (gel, topical soln)</i>	np	
<i>podofilox 0.5% topical soln (padagis)</i>	P	
<i>tazarotene 0.1% foam</i>	NP	ST
<i>tazarotene (0.05% cream, 0.05% gel, 0.1% cream, 0.1% gel)</i>	np	
TAZORAC 0.05% CREAM	P	
TAZORAC (0.05% GEL, 0.1% CREAM, 0.1% GEL)	NP	ST
VEREGEN	NP	
ZENATANE	np	
SKIN AND MUCOUS MEMBRANE AGENTS, MISC.		
<i>adapalene-bnzyol perox 0.1-2.5%</i>	np	
<i>adapalene-bnzyol perox 0.3-2.5%</i>	np	
CABTREO	NP	ST
<i>calcitriol 3 mcg/g ointment</i>	NP	
DUPIXENT 200 MG/1.14 ML PEN	P	QL max 56 days / fill S PA QPD 0.082 per day
DUPIXENT 300 MG/2 ML PEN	P	QL max 56 days / fill S PA QPD 0.286 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DUPIXENT 100 MG/0.67 ML SYRING	P	S PA QPD 0.048 per day
DUPIXENT 200 MG/1.14 ML SYRING	P	QL max 56 days / fill S PA QPD 0.082 per day
DUPIXENT 300 MG/2 ML SYRINGE	P	QL max 56 days / fill S PA QPD 0.286 per day
EPIDUO	NP	ST
EPIDUO FORTE	NP	ST
EPSOLAY	NP	ST
FILSUEVZ	NP	S PA
SOOLANTRA	np	
VECTICAL	NP	
SMOOTH MUSCLE RELAXANTS		
RESPIRATORY SMOOTH MUSCLE RELAXANTS		
ELIXOPHYLLIN	np	HSA
THEO-24	NP	HSA
<i>theophylline</i>	np	HSA
<i>theophylline er (er 100 mg tablet, er 200 mg tablet)</i>	NP	HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>theophylline er (er 300 mg tablet, er 400 mg tablet, er 450 mg tablet, er 600 mg tablet)</i>	np	HSA
<b>SOMATOSTATIN AGONISTS AND ANTAGONISTS</b>		
<b>SOMATOSTATIN AGONISTS</b>		
MYCAPSSA	NP	S PA QPD 4 per day
<i>octreotide acetate (50 mcg/ml, 100 mcg/ml)</i>	np	S PA QPD 3 per day
<i>octreotide acetate (50 mcg/ml syr, 100 mcg/ml syr, 500 mcg/ml syr)</i>	P	S PA QPD 3.0 per day
<i>octreotide 1,000 mcg/ml vial</i>	np	S PA QPD 1 per day
<i>octreotide 5,000 mcg/5 ml vial</i>	np	S PA QPD 1.0 per day
<i>octreotide acetate (0.05 mg/ml vl, 200 mcg/ml vl)</i>	np	S PA QPD 3 per day
<i>octreotide acetate (100 mcg/ml vl, 500 mcg/ml vl)</i>	np	S PA QPD 3.0 per day
<i>octreotide acetate (acet 50 mcg/ml vial, acet 500 mcg/ml amp, 1,000 mcg/5 ml vial)</i>	np	S PA QPD 3.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SANDOSTATIN (0.05 MG/ML AMPUL, 0.1 MG/ML AMPUL)	NP	S PA QPD 3 per day
SANDOSTATIN 0.5 MG/ML AMPUL	NP	S PA QPD 3.0 per day
SIGNIFOR	NP	S
SOMATOTROPIN AGONISTS AND ANTAGONISTS		
SOMATOTROPIN AGONISTS		
INCRELEX	P	S
SOMATOTROPIN ANTAGONISTS		
SOMAVERT (15 MG VIAL, 20 MG VIAL, 25 MG VIAL, 30 MG VIAL)	NP	S PA QPD 1 per day
SOMAVERT 10 MG VIAL	NP	S PA QPD 1 per day
SYMPATHOMIMETIC (ADRENERGIC) AGENTS		
ALPHA- AND BETA-ADRENERGIC AGONISTS		
AUVI-Q	P	
<i>droxidopa (200 mg capsule, 300 mg capsule)</i>	np	S PA QPD 6.0 per day
<i>droxidopa 100 mg capsule</i>	np	S PA QPD 15.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>epinephrine (0.15 mg auto-inject, 0.3 mg auto-inject)</i>	np	
<i>epinephrine 0.3 mg auto-inject (amneal)</i>	NP	
EPIPEN	NP	
EPIPEN 2-PAK	NP	
EPIPEN JR 2-PAK	NP	
NORTHERA (200 MG CAPSULE, 300 MG CAPSULE)	NP	S PA QPD 6 per day
NORTHERA 100 MG CAPSULE	NP	S PA QPD 15 per day
ALPHA-ADRENERGIC AGONISTS		
<i>lofexidine hcl</i>	np	
LUCEMYRA	NP	
<i>midodrine hcl</i>	np	
TETRACYCLINE ANTIBIOTICS		
AMINOMETHYLCYCLINES		
NUZYRA 150 MG TABLET	NP	
SEYSARA	NP	PA
THYROID AND ANTITHYROID AGENTS		
ANTITHYROID AGENTS		
<i>methimazole</i>	p	
<i>propylthiouracil</i>	np	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>THYROID AGENTS</b>		
ADTHYZA (15 MG TABLET, 30 MG TABLET, 60 MG TABLET, 90 MG TABLET, 120 MG TABLET)	NP	
ADTHYZA (16.25 MG TABLET, 32.5 MG TABLET, 65 MG TABLET, 97.5 MG TABLET, 130 MG TABLET)	NP	
ARMOUR THYROID	NP	
CYTOMEL	NP	
ERMEZA	NP	
EUTHYROX	p	
LEVO-T	p	
<i>levothyroxine sodium (13 mcg capsule, 25 mcg capsule, 50 mcg capsule, 75 mcg capsule, 88 mcg capsule, 100 mcg capsule, 112 mcg capsule, 125 mcg capsule, 137 mcg capsule, 150 mcg capsule, 175 mcg capsule, 200 mcg capsule)</i>	NP	
<i>levothyroxine sodium (25 mcg tablet, 50 mcg tablet, 75 mcg tablet, 88 mcg tablet, 100 mcg tablet, 112 mcg tablet, 125 mcg tablet, 137 mcg tablet, 150 mcg tablet, 175 mcg tablet, 200 mcg tablet, 300 mcg tablet)</i>	p	
LEVOXYL	p	
<i>liothyronine sod 50 mcg tab</i>	np	
<i>liothyronine sodium (5 mcg tab, 25 mcg tab)</i>	p	
NIVA THYROID	NP	
NP THYROID	NP	
REZDIFFRA	NP	<div style="display: flex; align-items: center; gap: 10px;"> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #804000; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #0070c0; color: white; padding: 2px 5px; border-radius: 3px;">QPD</div> <span>1.0 per day</span> </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SYNTHROID	NP	
THYQUIDITY	NP	
<i>thyroid</i>	NP	
TIROSINT (13 MCG CAPSULE, 25 MCG CAPSULE, 50 MCG CAPSULE, 75 MCG CAPSULE, 88 MCG CAPSULE, 100 MCG CAPSULE, 112 MCG CAPSULE, 125 MCG CAPSULE, 137 MCG CAPSULE, 150 MCG CAPSULE, 175 MCG CAPSULE, 200 MCG CAPSULE)	NP	
TIROSINT (37.5 MCG CAPSULE, 44 MCG CAPSULE, 62.5 MCG CAPSULE)	NP	
TIROSINT-SOL	NP	
UNITHROID	p	
TUMOR NECROSIS FACTOR INHIBITORS		
TUMOR NECROSIS FACTOR INHIBITORS, MISC		
ABRILADA(CF)	NP	S PA QPD 0.072 per day
ABRILADA(CF) PEN	NP	S PA QPD 0.072 per day
ABRILADA(CF) PEN (2 PACK)	NP	S PA QPD 0.072 per day
<i>adalimumab-aacf(cf) pen (2 pk)</i>	NP	S PA QPD 0.036 per day
<i>adalimumab-aaty(cf) (2 pack)</i>	P	S PA QPD 0.036 per day



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>adalimumab-aaty(cf) (2 pk)</i>	P	S PA QPD 0.036 per day
<i>adalimumab-aaty(cf) autoinj(2)</i>	P	S PA QPD 0.036 per day
<i>adalimumab-aaty(cf) autoinject</i>	P	S PA QPD 0.072 per day
<i>adalimumab-adaz(cf) 40 mg syrg</i>	P	S PA QPD 0.029 per day
<i>adalimumab-adaz(cf) pen 40 mg</i>	P	S PA QPD 0.029 per day
<i>adalimumab-adbm(cf)</i>	NP	S PA QPD 0.072 per day
<i>adalimumab-adbm(cf) pen</i>	NP	S PA QPD 0.072 per day
<i>adalimumab-adbm(cf) pen crohns</i>	NP	QL max 6 / 180 days S PA
<i>adalimumab-adbm(cf) pen ps-uv</i>	NP	QL max 4 / 180 days S PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>adalimumab-adbm(cf)pen</i>	NP	S PA QPD 0.072 per day
<i>adalimumab-fkjp(cf)</i>	NP	S PA QPD 0.072 per day
<i>adalimumab-fkjp(cf) pen</i>	NP	S PA QPD 0.072 per day
<i>adalimumab-ryvk(cf)</i>	NP	S PA QPD 0.072 per day
<i>adalimumab-ryvk(cf) autoinject</i>	NP	S PA QPD 0.072 per day
AMJEVITA(CF) (10MG/0.2ML SYRING, 20MG/0.2ML SYRING)	NP	S PA QPD 0.015 per day
AMJEVITA(CF) (20MG/0.4ML SYRING, 40MG/0.4ML SYRING)	NP	S PA QPD 0.029 per day
AMJEVITA(CF) 40MG/0.8ML SYRING	NP	S PA QPD 0.058 per day
AMJEVITA(CF) 40MG/0.8ML AUTOIN (NDC STARTS WITH 72511)	NP	S PA QPD 0.058 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AMJEVITA(CF) 40MG/0.4ML AUTOIN	NP	S PA QPD 0.029 per day
AMJEVITA(CF) AUTOINJECTOR (40MG/0.8ML, 80MG/0.8ML)	NP	S PA QPD 0.058 per day
CIMZIA 200 MG/ML SYRINGE KIT	NP	S PA QPD 0.072 per day
CIMZIA 2X200 MG/ML(X3)START KT	NP	QL MAX 3 / 180 DAYS S PA
CIMZIA 2X200 MG/ML SYRINGE KIT	NP	S PA QPD 0.072 per day
CYLTEZO(CF)	NP	S PA QPD 0.072 per day
CYLTEZO(CF) PEN	NP	S PA QPD 0.072 per day
CYLTEZO(CF) PEN CROHN'S-UC-HS	NP	QL max 6 / 180 days S PA
CYLTEZO(CF) PEN PSORIASIS-UV	NP	QL max 4 / 180 days S PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ENBREL 25 MG/0.5 ML SYRINGE	P	S PA QPD 0.073 per day
ENBREL (25 MG/0.5 ML VIAL, 50 MG/ML SYRINGE)	P	S PA QPD 0.143 per day
ENBREL 25 MG KIT	P	S PA QPD 0.286 per day
ENBREL MINI	P	S PA QPD 0.143 per day
ENBREL SURECLICK	P	S PA QPD 0.143 per day
HADLIMA	P	S PA QPD 0.058 per day
HADLIMA PUSHTOUCH	P	S PA QPD 0.058 per day
HADLIMA(CF)	P	S PA QPD 0.029 per day
HADLIMA(CF) PUSHTOUCH	P	S PA QPD 0.029 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HULIO(CF)	NP	S PA QPD 0.072 per day
HULIO(CF) PEN	NP	S PA QPD 0.072 per day
HUMIRA	P	S PA QPD 0.072 per day
HUMIRA PEN	P	S PA QPD 0.072 per day
HUMIRA PEN CROHN'S-UC-HS	P	QL MAX 6 / 180 DAYS S PA
HUMIRA PEN PSOR-UVEITS-ADOL HS	P	QL MAX 4 / 180 DAYS S PA
HUMIRA(CF) (10 MG/0.1 ML SYRING, 20 MG/0.2 ML SYRING, 40 MG/0.4 ML SYRING)	P	S PA QPD 0.072 per day
HUMIRA(CF) (10 MG/0.1ML SYR, 20 MG/0.2ML SYR)	NP	S PA QPD 0.072 per day
HUMIRA(CF) 40 MG/0.4 ML SYRING (CORDAVIS)	NP	S PA QPD 0.072 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HUMIRA(CF) PEDI CROHN 80-40 MG	P	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8b4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> MAX 2 / 180 DAYS
HUMIRA(CF) PEDI CROHN 80MG/0.8	P	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8b4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> MAX 3 / 180 DAYS
HUMIRA(CF) PEN (PEN 40 MG/0.4 ML, PEN 80 MG/0.8 ML)	P	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8b4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #4169e1; color: white; padding: 2px 5px; border-radius: 3px;">QPD</div> </div> 0.072 per day
HUMIRA(CF) PEN 40 MG/0.4 ML (CORDAVIS)	NP	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8b4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #4169e1; color: white; padding: 2px 5px; border-radius: 3px;">QPD</div> </div> 0.072 per day
HUMIRA(CF) PEN 80 MG/0.8 ML (CORDAVIS)	NP	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8b4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #4169e1; color: white; padding: 2px 5px; border-radius: 3px;">QPD</div> </div> 0.072 per day
HUMIRA(CF) PEN CROHN'S-UC-HS	P	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8b4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> MAX 3 / 180 DAYS
HUMIRA(CF) PEN PEDIATRIC UC	P	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8b4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> MAX 4 / 180 DAYS
HUMIRA(CF) PEN PSOR-UV-ADOL HS	P	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8b4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> MAX 3 / 180 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HYRIMOZ	NP	S PA QPD 0.058 per day
HYRIMOZ PEN	NP	S PA QPD 0.058 per day
HYRIMOZ(CF) (20 MG/0.2 ML SYRNG, CDV 20MG/0.2ML SYR)	NP	S PA QPD 0.015 per day
HYRIMOZ(CF) (40 MG/0.4 ML SYRNG, CDV 40MG/0.4ML SYR)	NP	S PA QPD 0.029 per day
HYRIMOZ(CF) 10 MG/0.1 ML SYRNG	NP	S PA QPD 0.008 per day
HYRIMOZ(CF) PEDI CROHN 80 MG	NP	QL max 2.4 / 180 days S PA
HYRIMOZ(CF) PEDI CROHN 80-40MG	NP	QL max 1.2 / 180 days S PA
HYRIMOZ(CF) PEN (CDV PEN 40MG/0.4ML, PEN 40 MG/0.4 ML)	NP	S PA QPD 0.029 per day
HYRIMOZ(CF) PEN (CDV PEN 80MG/0.8ML, PEN 80 MG/0.8 ML)	NP	S PA QPD 0.058 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HYRIMOZ(CF) PEN CROHN-UC START	NP	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-bottom: 5px;">max 2.4 / 180 days</div> <div style="background-color: #d62728; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
HYRIMOZ(CF) PEN PSORIASIS	NP	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-bottom: 5px;">max 1.6 / 180 days</div> <div style="background-color: #d62728; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
IDACIO(CF) (2 PACK)	NP	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #d62728; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #1f77b4; color: white; padding: 2px 5px; border-radius: 3px;">QPD</div> <div style="margin-top: 5px;">0.036 per day</div> </div>
IDACIO(CF) PEN (2 PACK)	NP	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #d62728; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #1f77b4; color: white; padding: 2px 5px; border-radius: 3px;">QPD</div> <div style="margin-top: 5px;">0.036 per day</div> </div>
IDACIO(CF) PEN CROHN'S-UC(6PK)	NP	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-bottom: 5px;">max 3 / 180 days</div> <div style="background-color: #d62728; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
IDACIO(CF) PEN PSORIASIS (4PK)	NP	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-bottom: 5px;">max 2 / 180 days</div> <div style="background-color: #d62728; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
SIMLANDI(CF)	P	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #d62728; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #1f77b4; color: white; padding: 2px 5px; border-radius: 3px;">QPD</div> <div style="margin-top: 5px;">0.072 per day</div> </div>
SIMLANDI(CF) AI 40 MG/0.4 ML	P	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #d62728; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #1f77b4; color: white; padding: 2px 5px; border-radius: 3px;">QPD</div> <div style="margin-top: 5px;">0.072 per day</div> </div>
SIMPONI (100 MG/ML PEN INJECTOR, 100 MG/ML SYRINGE)	P	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #d62728; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div style="background-color: #8c564b; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #1f77b4; color: white; padding: 2px 5px; border-radius: 3px;">QPD</div> <div style="margin-top: 5px;">0.036 per day</div> </div>



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SIMPONI (50 MG/0.5 ML PEN INJEC, 50 MG/0.5 ML SYRINGE)	NP	S PA QPD 0.018 per day
YUFLYMA(CF) (2 PACK)	NP	S PA QPD 0.036 per day
YUFLYMA(CF) AI CROHN'S-UC-HS	NP	QL max 3 / 180 days S PA
YUFLYMA(CF) AUTOINJECT (2 PCK)	NP	S PA QPD 0.036 per day
YUFLYMA(CF) AUTOINJECTOR	NP	S PA QPD 0.072 per day
YUSIMRY(CF) PEN	NP	S PA QPD 0.058 per day
ZYMFENTRA	NP	S PA QPD 0.072 per day
ZYMFENTRA (2 PACK)	NP	S PA QPD 0.036 per day
ZYMFENTRA PEN (2 PACK)	NP	S PA QPD 0.036 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>VASODILATING AGENTS</b> <b>CGMP SYNTHESIS AGENT</b>		
VERQUVO	P	PA QPD 1 per day
<b>DIRECT VASODILATORS</b>		
BIDIL	NP	HSA
CAVERJECT (IMPULSE 10 MCG KIT, IMPULSE 10 MCG SYRNG, 20 MCG VIAL, IMPULSE 20 MCG KIT, IMPULSE 20 MCG SYRNG, 40 MCG VIAL)	NP	
EDEX	NP	
<i>hydralazine hcl (10 mg tablet, 25 mg tablet, 50 mg tablet, 100 mg tablet)</i>	p	HSA
<i>isosorbide dinit-hydralazine</i>	np	HSA
<i>minoxidil (2.5 mg tablet, 10 mg tablet)</i>	p	HSA
MUSE	NP	
<b>NITRATES AND NITRITES</b>		
GONITRO	NP	HSA
ISORDIL	NP	HSA
ISORDIL TITRADOSE	NP	HSA
<i>isosorbide dinitrate (5 mg tab, 10 mg tab, 20 mg tab, 30 mg tab)</i>	np	HSA
<i>isosorbide dinitrate 40 mg tab</i>	np	HSA
<i>isosorbide mononit 10 mg tab (ndc: 00228263111)</i>	np	HSA
<i>isosorbide mononit 20 mg tab (ndc: 00228262011)</i>	p	HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>isosorbide mononit 10 mg tab</i>	np	HSA
<i>isosorbide mononit 20 mg tab</i>	p	HSA
<i>isosorbide mononitrate er</i>	p	HSA
NITRO-BID	P	HSA
NITRO-DUR	NP	HSA
NITRO-TIME	NP	HSA
<i>nitroglycerin (0.3 mg tablet, 0.4 mg tablet)</i>	p	HSA
<i>nitroglycerin (0.6 mg tablet sl, 400 mcg spray)</i>	np	HSA
<i>nitroglycerin patch</i>	np	HSA
NITROLINGUAL	NP	HSA
NITROMIST	NP	HSA
NITROSTAT	NP	HSA
<b>PHOSPHODIESTERASE TYPE 5 INHIBITORS</b>		
<i>avanafil</i>	np	QPD 0.2 per day
CIALIS (10 MG TABLET, 20 MG TABLET)	NP	QPD 0.2 per day
CIALIS (2.5 MG TABLET, 5 MG TABLET)	NP	QPD 1 per day
<i>sildenafil citrate (25 mg tablet, 50 mg tablet, 100 mg tablet)</i>	p	QPD 0.2 per day
STENDRA	NP	QPD 0.2 per day
<i>tadalafil (2.5 mg tablet, 5 mg tablet)</i>	p	QPD 1.0 per day
<i>tadalafil 10 mg tablet</i>	p	QPD 0.2 per day
<i>tadalafil 20 mg tablet (ed/bph)</i>	p	QPD 0.2 per day
<i>vardeafil hcl (2.5 mg tablet, 5 mg tablet, 10 mg odt, 10 mg tablet, 20 mg tablet)</i>	np	QPD 0.2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VIAGRA	NP	QPD 0.2 per day
VASODILATING AGENTS, MISCELLANEOUS		
VECAMYL	NP	S
VASODILATING AGENTS (RESPIRATORY TRACT) ENDOTHELIN RECEPTOR ANTAGONISTS		
FILSPARI	NP	S PA QPD 1.0 per day
PHOSPHODIESTERASE-5 INHIBITORS (RESPIR)		
ADCIRCA	NP	S PA QPD 2 per day
ALYQ	np	S PA QPD 2.0 per day
LIQREV	NP	S PA QPD 8.14 per day
REVATIO 10 MG/ML ORAL SUSP	NP	S PA QPD 7.467 per day
REVATIO 20 MG TABLET	NP	S PA QPD 3 per day
<i>sildenafil 20 mg tablet (pah)</i>	np	S PA QPD 3.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>sildenafil 10 mg/ml oral susp</i>	np	S PA QPD 7.467 per day
<i>tadalafil 20 mg tablet (pah)</i>	np	S PA QPD 2.0 per day

PROSTACYCLIN & PROSTACYCLIN DERIVATIVES

VENTAVIS	NP	S PA QPD 9 per day
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VITAMINS  
MULTIVITAMIN PREPARATIONS

AZESCO	NP	HSA
C-NATE DHA	NP	HSA
CITRANATAL B-CALM	NP	HSA
CITRANATAL MEDLEY	NP	HSA
COMPLETE NATAL DHA	NP	HSA
COMPLETENATE	NP	HSA
CONCEPT DHA	NP	HSA
CONCEPT OB	NP	HSA
DERMACINRX PRENATRIX	NP	HSA
DERMACINRX PRENATRYL	NP	HSA
DERMACINRX PRETRATE	NP	HSA
DUET DHA 400	NP	HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DUET DHA BALANCED	NP	HSA
ELITE-OB	NP	HSA
ENBRACE HR	NP	HSA
FOLIVANE-OB	NP	HSA
KOSHER PRENATAL PLUS IRON	P	HSA
M-NATAL PLUS	NP	HSA
MULTI-MAC	NP	HSA
NATACHEW	NP	HSA
NATAL PNV	NP	HSA
NEEVODHA	NP	HSA
NEO-VITAL RX	NP	HSA
NEONATAL COMPLETE	NP	HSA
NEONATAL PLUS	NP	HSA
NEONATAL-DHA	NP	HSA
NESTABS	NP	HSA
NESTABS DHA	NP	HSA
NESTABS ONE	NP	HSA
NIVA-PLUS	NP	HSA
OB COMPLETE	NP	HSA
OB COMPLETE ONE	NP	HSA
OB COMPLETE PETITE	NP	HSA
OB COMPLETE PREMIER	NP	HSA
OB COMPLETE WITH DHA	NP	HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PNV TABS 20-1	NP	HSA
PNV-DHA	NP	HSA
PNV-OMEGA	NP	HSA
PNV-SELECT	NP	HSA
PREGEN DHA	NP	HSA
PREGENNA	NP	HSA
PRENA1 CHEW	NP	HSA
PRENA1 PEARL	NP	HSA
PRENA1 TRUE	NP	HSA
PRENATABS RX	P	HSA
<i>prenatal 19 chewable tablet</i>	P	HSA
<i>prenatal plus iron tablet</i>	P	
<i>prenatal plus vitamin-mineral</i>	NP	HSA
<i>prenatal plus-dha</i>	NP	HSA
<i>prenatal vitamin plus low iron</i>	P	HSA
<i>prenatal vitamin plus low iron (ndc: 39328010610)</i>	NP	HSA
<i>prenatal-u</i>	P	HSA
PRENATE AM	NP	HSA
PRENATE CHEWABLE	NP	HSA
PRENATE DHA	NP	HSA
PRENATE ELITE	NP	HSA
PRENATE ENHANCE	NP	HSA
PRENATE ESSENTIAL	NP	HSA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PRENATE MINI	NP	HSA
PRENATE PIXIE	NP	HSA
PRENATE RESTORE	NP	HSA
PRIMACARE	NP	HSA
PROVIDA OB	NP	HSA
SE-NATAL 19 (19 CHEWABLE TABLET, 19 TABLET)	P	HSA
SELECT-OB	NP	HSA
SELECT-OB + DHA	NP	HSA
TARON-C DHA	NP	HSA
THRIVITE RX	NP	HSA
TRICARE	NP	HSA
TRINATAL RX 1	NP	HSA
TRINATE	P	HSA
TRINAZ	NP	
TRISTART DHA	NP	HSA
VIRT-NATE DHA	NP	HSA
VIRT-PN DHA	NP	HSA
VITAFOL FE PLUS	NP	HSA
VITAFOL GUMMIES	NP	HSA
VITAFOL ULTRA	NP	HSA
VITAFOL-OB	NP	HSA
VITAFOL-OB+DHA	NP	HSA
VITAFOL-ONE	NP	HSA



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VITAMEDMD ONE RX	NP	HSA
VITAMEDMD REDICHEW RX	NP	HSA
VITAPEARL	NP	HSA
VITATRUE	NP	HSA
WESCAP-C DHA	NP	HSA
WESCAP-PN DHA	NP	HSA
WESNATAL DHA COMPLETE	NP	HSA
WESNATE DHA	NP	HSA
WESTAB PLUS	NP	HSA
WESTGEL DHA	NP	HSA
ZALVIT	NP	HSA
ZATEAN-PN DHA	NP	HSA
ZATEAN-PN PLUS	NP	
ZIPHEX	NP	HSA
<b>VITAMIN B COMPLEX</b>		
<i>cyanocobalamin</i>	np	
<i>cyanocobalamin injection</i>	p	
DODEX	p	
FA-8	p	ACA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>folic acid (0.4 mg tablet, 0.8 mg tablet, 400 mcg tablet, 800 mcg capsule, 800 mcg tablet, cvs 800 mcg tablet, ft 400 mcg tablet, ft 800 mcg tablet, gnp 400 mcg tablet, ra 0.4 mg tablet, ra 800 mcg tablet, sm 400 mcg tablet, sv 800 mcg tablet, true 667 mcg dfe tb, well 400 mcg tablet)</i>	p	ACA
<i>folic acid 1 mg tablet</i>	p	
<i>hydroxocobalamin</i>	NP	
NASCOBAL	NP	
<b>VITAMIN D</b>		
<i>calcitriol (0.5 mcg capsule, 1 mcg/ml solution)</i>	np	
<i>calcitriol 0.25 mcg capsule</i>	p	
<i>doxercalciferol (0.5 mcg cap, 1 mcg capsule, 2.5 mcg cap)</i>	np	S
DRISDOL	NP	
<i>paricalcitol (1 mcg capsule, 2 mcg capsule, 4 mcg capsule)</i>	np	S
RAYALDEE	NP	S
ROCALTROL (0.25 MCG CAPSULE, 0.5 MCG CAPSULE, 1 MCG/ML ORAL SOLN)	NP	
<i>vitamin d2 1.25mg(50,000 unit)</i>	p	
ZEMPLAR (1 MCG CAPSULE, 2 MCG CAPSULE)	NP	S
<b>VITAMIN K ACTIVITY</b>		
MEPHYTON	NP	
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