



Preferred Drug List

Introduction

Meridian Medicaid Plan (Meridian) is pleased to provide a preferred drug list (PDL) as a reference and tool for providers and pharmacists. The purpose of the Meridian PDL is to help providers choose clinically fit and cost-effective products for their patients. This document has facts about the drugs we cover in this plan.

The Meridian Utilization Management Committee (UMC)

The Meridian UMC comprises providers, pharmacists, and health professionals. The PDL contains clinical information that was sourced primarily from medical literature and is reviewed and approved by the UMC.

Notice

The information contained in this PDL is provided by Meridian for the convenience of medical providers. This PDL is not meant to be a substitute for the knowledge, expertise, skill, and judgment of the medical provider in their choice of prescription drugs. Meridian assumes no responsibility for the actions or omissions of any medical provider based upon reliance, in whole or in part, on the information contained herein. The medical provider should see the drug manufacturer's product literature or standard references for more detailed information.

Preface

The Meridian formulary is organized in sections. Each section includes therapeutic groups named by either drug class or disease state. Brand and common names are included as a reference to help in product recognition. Brand name drugs are capitalized (e.g., CONCERTA) and generic drugs are listed in lower-case italics (e.g., *methylphenidate HCL*). Meridian will not cover prescription drugs prescribed for experimental, investigational, or non-FDA-approved indications, dosages, or routes of administration. Other exclusions include fertility-enhancing drugs, anorexia, weight loss, or weight gain drugs, Durable Medical Equipment (DME) products and medical supplies (unless listed on the PDL), drugs and other agents used for cosmetic purposes or for hair growth, erectile dysfunction drugs prescribed to treat impotence, Drug Efficacy Study Implementation (DESI) and Identical, Related and Similar (IRS) drugs that are classified as ineffective, over-the-counter products (unless listed on the PDL), and drugs not included in the Medicaid Drug Rebate Program drug product data file (unless listed in the PDL).

PDL Components

The Meridian PDL contains medications covered without authorization, medications that must meet step therapy protocol, medications that need prior authorization, specialty medications, and medications quantity limits. Members will not be charged a co-pay for covered medications.

Generic Substitution

Meridian is a mandatory generic plan. The Illinois Department of Healthcare and Family Services (HFS) has mandated that some brand medications are covered in place of the generic medication. Generic medication will be dispensed when available.

Covered Medications without Authorization

Meridian covers many medications without requiring authorization. These medications include many prescription and over-the-counter medications (with a valid prescription).

Prior Authorization (PA)

Drugs indicated with “PA” need prior authorization for coverage. Please call the Pharmacy Help Desk at **855-580-1688** or fax a completed prior authorization form to **855-580-1695**. All prior authorization requests will be reviewed within 24 hours.

Please note: A prior authorization is **NOT** required on any anticonvulsant medications for members with a diagnosis of epilepsy or seizure disorder. Diagnosis code must be given at point of sale or within records.

Specialty Medications (SP)

All specialty medications noted as “SP” are to be filled at contracted, in-network specialty pharmacies.

Quantity Limits (QL)

Drugs with a “QL” have a set quantity limit imposed. These limits are based on FDA- recommended dosing guidelines. The quantity limit is listed next to the drug name.

Day Supply Limit (DS)

Drugs indicated with a “DS” have a set day supply limit imposed. The day supply limit is listed next to the drug name. These medications are limited to a certain day supply in a set amount of time.

Age Limit (AL)

Drugs indicated with an “AL” have a set age limit imposed. The age limit is listed next to the drug name. These medications are limited to a specific age range.

Benefit Exception

To request non-formulary medication(s), fax a completed prior authorization form asking for an exception to the formulary. This request needs to have relevant clinical documentation showing trial and failure of all formulary agents and relevant clinical information. It should also have information showing the medication is the standard of care for the indication provided (peer-reviewed journal articles may be required). Please call the Pharmacy Help Desk at 855-580-1688 or fax a completed prior authorization exception form to 855-580-1695.

Legend

P	Preferred Drug	Drug is preferred
NP	Non-Preferred	Drug is not preferred
AL	Age Limit	Drug is limited to specific ages

PA	Prior Authorization	Prior Authorization required before prescription can be filled
QL	Quantity Limit	There is a limit on the amount of drug covered per prescription, or within a specific time frame
SP	Specialty Drug	Products that must be dispensed by a specialty pharmacy
ST	Step Therapy	Requires trial and failure of one or more preferred products prior to coverage
RX/OTC	Both RX and OTC NDCs	Over the Counter (OTC) products eligible for coverage with a valid prescription written by a licensed physician/clinician
MP	Maintenance Product	Products used to treat long-term conditions or illnesses, available for a 90-Day (3-month) supply
NF	Non-formulary	Drug is not included on the formulary

The publication date of this preferred drug list appears at the bottom of all subsequent pages, and this list is accurate of that date. Please notify the Pharmacy Help Desk of any mistakes in the PDL. A copy of this PDL can be mailed upon request.

Contact Information

Pharmacy help desk: 855-580-1688

Prior authorization fax number: 855-580-1695

Email: pharmacy_IL@centene.com

Drug Name	Drug Tier	Requirements/Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders		
Amphetamines		
ADDERALL XR CP24 PO (Use amphetamine-dextroamphetamine)	NP	QL(1 EA daily)
ADDERALL TABS PO (Use amphetamine-dextroamphetamine)	NP	QL(3 EA daily)
ADZENYS XR-ODT TBED	NP	QL(3 EA daily)
amphetamine sulfate TABS PO	NP	QL(3 EA daily)
amphetamine-dextroamphetamine CP24 PO 5 MG, 10 MG, 15 MG, 20 MG, 25 MG, 30 MG	P	QL(1 EA daily)
amphetamine-dextroamphetamine CP24 PO 12.5 MG, 25 MG, 37.5 MG, 50 MG	NP	
amphetamine-dextroamphetamine TABS PO	P	QL(3 EA daily)
DESOXYN PO (Use methamphetamine hcl)	NP	QL(3 EA daily)
DEXEDRINE CP24 PO 10 MG, 15 MG (Use dextroamphetamine sulfate)	NP	QL(3 EA daily)
dextroamphetamine sulfate CP24 PO	NP	QL(3 EA daily)
dextroamphetamine sulfate SOLN PO	NP	QL(15 ML daily); MP
dextroamphetamine sulfate TABS PO	NP	QL(3 EA daily)
DYANAVEL XR SUER	P	QL(15 ML daily); PA
DYANAVEL XR TBCR	NP	
EVEKEO ODT TBDP	NP	QL(3 EA daily)
EVEKEO TABS PO (Use amphetamine sulfate)	NP	QL(3 EA daily)

Drug Name	Drug Tier	Requirements/Limits
lisdexamfetamine dimesylate CAPS PO	NP	QL(1 EA daily)
lisdexamfetamine dimesylate CHEW	NP	QL(1 EA daily)
methamphetamine hcl PO	NP	QL(3 EA daily)
MYDAYIS CP24 PO (Use amphetamine- dextroamphetamine)	NP	
VYVANSE CAPS PO	P	QL(1 EA daily)
VYVANSE CHEW	P	QL(1 EA daily)
XELSTRYM	NP	
Analeptics		
CAFCIT SOLN IV 60 MG/3ML (Use caffeine citrate)	NF	
CAFFEINE ANHYDROUS POWD	P	RX/OTC
caffeine citrate SOLN PO	P	
CAFFEINE CITRATE SOLN IV (Use caffeine citrate)	NF	
CAFFEINE POWD	P	RX/OTC
Attention-Deficit/Hyperactivity Disorder (ADHD) Agents		
atomoxetine hcl PO	NP	QL(1 EA daily); MP
clonidine hcl (adhd) TB12 PO	P	QL(4 EA daily); MP
guanfacine hcl (adhd) PO	P	QL(1 EA daily); MP
INTUNIV PO (Use guanfacine hcl (adhd))	NP	QL(1 EA daily); MP
QELBREE	NP	
STRATTERA PO (Use atomoxetine hcl)	P	QL(1 EA daily); MP
Dopamine and Norepinephrine Reuptake Inhibitors (DNRIs)		
SUNOSI PO 75 MG	NP	QL(2 EA daily)
SUNOSI PO 150 MG	NP	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Histamine H3-Receptor Antagonist/Inverse Agonists			METADATE CD CPR PO 40 MG (Use methylphenidate hcl)	NF	QL(1 EA daily)
WAKIX	NP	SP	METHYLIN SOLN PO (Use methylphenidate hcl)	NP	QL(15 ML daily); MP
Stimulants - Misc.			methylphenidate hcl CHEW PO	NP	QL(3 EA daily)
APTENSIO XR CP24 PO (Use methylphenidate hcl)	NP	QL(3 EA daily)	methylphenidate hcl CP24 PO 10 MG, 20 MG, 30 MG	NP	QL(2 EA daily)
armodafinil PO	NP		methylphenidate hcl CP24 PO 40 MG, 60 MG	NP	
AZSTARYS	NP		methylphenidate hcl CP24 PO	NP	QL(3 EA daily)
CONCERTA TBCR PO (Use methylphenidate hcl)	P	QL(1 EA daily)	methylphenidate hcl CPR PO 40 MG	NP	QL(1 EA daily)
COTEMPLA XR-ODT TBED 25.9 MG	NP	QL(2 EA daily)	methylphenidate hcl CPR PO 50 MG, 60 MG	NP	
COTEMPLA XR-ODT TBED 8.6 MG, 17.3 MG	NP	QL(3 EA daily)	methylphenidate hcl CPR PO 10 MG, 20 MG, 30 MG	NP	QL(2 EA daily)
DAYTRANA PTCH (Use methylphenidate)	P	QL(1 EA daily); PA	methylphenidate hcl SOLN PO	NP	QL(15 ML daily); MP
dexmethylphenidate hcl CP24 PO	NP	QL(1 EA daily)	methylphenidate hcl TABS PO 5 MG, 10 MG	P	QL(3 EA daily)
dexmethylphenidate hcl TABS PO	P	QL(3 EA daily)	methylphenidate hcl TABS PO 20 MG	P	QL(2 EA daily)
FOCALIN XR CP24 PO 15 MG, 20 MG, 40 MG (Use dexmethylphenidate hcl)	NF		methylphenidate hcl TB24 PO	NP	QL(1 EA daily)
FOCALIN XR CP24 PO (Use dexmethylphenidate hcl)	P	QL(1 EA daily)	methylphenidate hcl TBCR PO 45 MG, 63 MG, 72 MG	NP	
FOCALIN TABS PO (Use dexmethylphenidate hcl)	NP	QL(3 EA daily)	methylphenidate hcl TBCR PO 10 MG, 20 MG	P	QL(1 EA daily)
FOCALIN TABS PO 2.5 MG, 10 MG (Use dexmethylphenidate hcl)	NF		methylphenidate hcl TBCR PO 18 MG, 27 MG, 36 MG, 54 MG	NP	QL(1 EA daily)
JORNAY PM CP24 PO 20 MG, 40 MG	P	QL(2 EA daily); PA	methylphenidate PTCH	NP	QL(1 EA daily)
JORNAY PM CP24 PO 60 MG, 80 MG, 100 MG	P	PA	modafinil PO	P	QL(2 EA daily)
METADATE CD CPR PO 50 MG, 60 MG (Use methylphenidate hcl)	NF		NUVIGIL PO (Use armodafinil)	NP	
METADATE CD CPR PO 10 MG, 20 MG, 30 MG (Use methylphenidate hcl)	NF	QL(2 EA daily)	PROVIGIL PO (Use modafinil)	NP	QL(2 EA daily)

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Drug Name	Drug Tier	Requirements/Limits
QUILLICHEW ER CHER PO	NP	QL(2 EA daily)
QUILLIVANT XR SRER PO	NP	QL(15 ML daily)
RELEXXII TBCR PO 45 MG, 63 MG, 72 MG (Use methylphenidate hcl)	NP	
RELEXXII TBCR PO 18 MG, 27 MG, 36 MG, 54 MG	NP	QL(1 EA daily)
RELEXXII TBCR PO 45 MG, 63 MG, 72 MG	NP	
RITALIN LA CP24 PO 40 MG (Use methylphenidate hcl)	NP	
RITALIN LA CP24 PO 10 MG, 20 MG, 30 MG (Use methylphenidate hcl)	NP	QL(2 EA daily)
RITALIN TABS PO 5 MG, 10 MG (Use methylphenidate hcl)	NP	QL(3 EA daily)
RITALIN TABS PO 20 MG (Use methylphenidate hcl)	NP	QL(2 EA daily)
AMEBICIDES		
Amebicides		
SOLOSEC	NP	
AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections		
Aminoglycosides		
ARIKAYCE	NP	SP
BETHKIS NEBU (Use tobramycin)	NF	SP
BETHKIS NEBU (Use tobramycin)	NP	SP
KITABIS PAK NEBU (Use tobramycin)	P	QL(10 ML daily); SP
neomycin sulfate TABS PO	P	
TOBI PODHALER CAPS	NP	SP
TOBI NEBU (Use tobramycin)	NF	QL(10 ML daily); SP

Drug Name	Drug Tier	Requirements/Limits
TOBI NEBU (Use tobramycin)	NP	QL(10 ML daily); SP
tobramycin NEBU	NP	SP
tobramycin NEBU	NP	QL(10 ML daily); SP
ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions		
Antirheumatic - Enzyme Inhibitors		
OLUMIANT	NP	SP
RINVOQ TB24 PO	NP	SP
XELJANZ XR TB24 PO	P	SP; PA
XELJANZ SOLN	P	SP; MP; PA
XELJANZ SOLN	NP	SP; MP
XELJANZ TABS	P	SP; PA
Antirheumatic Antimetabolites		
OTREXUP SOAJ 10 MG/0.4ML, 12.5 MG/0.4ML, 15 MG/0.4ML, 17.5 MG/0.4ML, 20 MG/0.4ML, 22.5 MG/0.4ML, 25 MG/0.4ML	NP	SP; MP
RASUVO SOAJ 7.5 MG/0.15ML, 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 20 MG/0.4ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML	NP	SP; MP
Anti-TNF-alpha - Monoclonal Antibodies		
ABRILADA (1 PEN) AJKT	NP	SP
ABRILADA (2 PEN) AJKT	NP	SP
ABRILADA (2 SYRINGE) PSKT	NP	SP
ADALIMUMAB-AACF (2 PEN) AJKT	NP	SP
ADALIMUMAB-ADAZ SOAJ	NP	SP
ADALIMUMAB-ADAZ SOSY	NP	SP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ADALIMUMAB-ADBM (2 PEN) AJKT	NP	SP	HUMIRA-PED>=40KG CROHNS START PSKT	P	SP; PA
ADALIMUMAB-ADBM (2 SYRINGE) PSKT	NP	SP	HUMIRA-PED>=40KG UC STARTER AJKT	P	SP; PA
ADALIMUMAB-ADBM(CD/UC/HS STRT) AJKT	NP	SP	HUMIRA-PS/UV/ADOL HS STARTER AJKT	P	SP; PA
ADALIMUMAB-ADBM(PS/UV STARTER) AJKT	NP	SP	HUMIRA-PSORIASIS/UEIT STARTER AJKT	P	SP; PA
ADALIMUMAB-FKJP (2 PEN) AJKT	NP	SP	HYRIMOZ-CROHNS/UC STARTER SOAJ	NP	SP
ADALIMUMAB-FKJP (2 SYRINGE) PSKT	NP	SP	HYRIMOZ-PED<40KG CROHN STARTER SOSY	NP	SP
AMJEVITA-PED 10KG TO <15KG SOSY	NP	SP	HYRIMOZ-PED>=40KG CROHN START SOSY	NP	SP
AMJEVITA-PED 15KG TO <30KG SOSY	NP	SP	HYRIMOZ-PLAQ PSOR/UEIT START SOAJ	NP	SP
AMJEVITA SOAJ	NP	SP	HYRIMOZ SOAJ	NP	SP
AMJEVITA SOSY	NP	SP	HYRIMOZ SOSY	NP	SP
CYLTEZO (2 PEN) AJKT	NP	SP	IDACIO (2 PEN) AJKT	NP	SP
CYLTEZO (2 SYRINGE) PSKT	NP	SP	IDACIO (2 SYRINGE) PSKT	NP	SP
CYLTEZO-CD/UC/HS STARTER AJKT	NP	SP	IDACIO-CROHNS/UC STARTER AJKT	NP	SP
CYLTEZO-PSORIASIS/UV STARTER AJKT	NP	SP	IDACIO-PSORIASIS STARTER AJKT	NP	SP
HADLIMA PUSH TOUCH SOAJ	NP	SP	SIMPONI ARIA SOLN	NP	SP; MP
HADLIMA SOSY	NP	SP	SIMPONI SOAJ	NP	SP; MP
HULIO (2 PEN) AJKT	NP	SP	SIMPONI SOSY	NP	SP; MP
HULIO (2 SYRINGE) PSKT	NP	SP	YUFLYMA (1 PEN) AJKT	NP	SP
HUMIRA (2 PEN) AJKT	P	SP; PA	YUFLYMA (2 PEN) AJKT	NP	SP
HUMIRA (2 SYRINGE) PSKT	P	SP; PA	YUFLYMA (2 SYRINGE) PSKT 40 MG/0.4ML	NP	SP
HUMIRA-CD/UC/HS STARTER AJKT	P	SP; PA	YUFLYMA-CD/UC/HS STARTER AJKT	NP	SP
HUMIRA-PED<40KG CROHNS STARTER PSKT	P	SP; PA	YUSIMRY	NP	SP
			Gold Compounds		
			RIDAURA PO	NP	
			Interleukin-1 Blockers		

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ARCALYST	NP	SP	<i>diclofenac sodium TB24 PO</i>	P	QL(2 EA daily)
Interleukin-1 Receptor Antagonist (IL-1Ra)			<i>diclofenac sodium TBEC PO 75 MG</i>	P	QL(2 EA daily)
KINERET SOSY	NP	SP; MP	<i>diclofenac sodium TBEC PO 25 MG, 50 MG</i>	P	QL(4 EA daily)
Interleukin-1beta Blockers			<i>diclofenac w/ misoprostol TBEC PO</i>	NP	
ILARIS SOLN	NP	SP; MP	DUEXIS (Use <i>ibuprofen-famotidine</i>)	NP	MP
Interleukin-6 Receptor Inhibitors			<i>etodolac CAPS PO</i>	P	QL(4 EA daily); MP
ACTEMRA ACTPEN SOAJ	NP	SP; MP	<i>etodolac TABS PO 500 MG</i>	P	QL(2 EA daily); MP
ACTEMRA SOLN	NP	SP; MP	<i>etodolac TABS PO 400 MG</i>	P	QL(3 EA daily); MP
ACTEMRA SOSY	NP	SP; MP	<i>etodolac TB24 PO</i>	P	QL(1 EA daily); MP
KEVZARA SOAJ	NP	SP; MP	FELDENE CAPS PO (Use <i>piroxicam</i>)	NP	
KEVZARA SOSY	NP	SP; MP	<i>fenoprofen calcium CAPS PO 400 MG</i>	NP	
Nonsteroidal Anti-inflammatory Agents (NSAIDs)			<i>fenoprofen calcium TABS PO</i>	NP	
ADVIL TABS PO (Use <i>ibuprofen</i>)	NF		<i>flurbiprofen TABS PO 100 MG</i>	P	QL(3 EA daily)
ALEVE TABS PO (Use <i>naproxen sodium</i>)	NF		<i>ibuprofen-famotidine</i>	NP	MP
ARTHROTEC TBEC PO (Use <i>diclofenac w/ misoprostol</i>)	NP		<i>ibuprofen SUSP PO 40 MG/ML, 50 MG/1.25ML</i>	P	QL(80 ML daily)
CELEBREX PO 100 MG, 200 MG (Use <i>celecoxib</i>)	NF		<i>ibuprofen SUSP PO 100 MG/5ML</i>	NP	QL(160 ML daily); MP; RX/OTC
CELEBREX PO (Use <i>celecoxib</i>)	NP	MP	<i>ibuprofen SUSP PO 100 MG/5ML</i>	P	QL(160 ML daily); MP; RX/OTC
<i>celecoxib PO</i>	P	MP	<i>ibuprofen TABS PO 600 MG</i>	P	QL(5 EA daily)
CHILDRENS ADVIL SUSP PO 100 MG/5ML (Use <i>ibuprofen</i>)	NF	QL(160 ML daily); MP; RX/OTC	<i>ibuprofen TABS PO 400 MG</i>	P	QL(8 EA daily); MP
CHILDRENS MOTRIN SUSP PO 100 MG/5ML (Use <i>ibuprofen</i>)	NF	QL(160 ML daily); MP; RX/OTC	<i>ibuprofen TABS PO 800 MG</i>	P	QL(4 EA daily); MP
DAYPRO TABS PO (Use <i>oxaprozin</i>)	NP		<i>indomethacin CAPS PO 50 MG</i>	P	QL(4 EA daily)
<i>diclofenac potassium CAPS PO</i>	NP				
<i>diclofenac potassium TABS PO 50 MG</i>	P	QL(4 EA daily)			
<i>diclofenac potassium TABS PO 25 MG</i>	NP				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>indomethacin CAPS PO 25 MG</i>	P	QL(6 EA daily)	<i>naproxen TABS PO</i>	P	MP
<i>indomethacin CPR PO</i>	P	QL(2 EA daily)	<i>naproxen TBEC PO</i>	P	MP
<i>indomethacin SUPP PR</i>	P	QL(4 EA daily)	<i>naproxen TBEC PO</i>	P	MP
<i>indomethacin SUSP PO</i>	P		<i>oxaprozin TABS PO</i>	NP	
INFANTS ADVIL SUSP PO (Use <i>ibuprofen</i>)	NF	QL(80 ML daily)	<i>piroxicam CAPS PO</i>	NP	
<i>ketoprofen CP24 PO</i>	NP		RELAFEN DS PO	NP	
KETOROLAC TROMETHAMINE SOLN NA 15.75 MG/SPRAY	NP		<i>sulindac TABS PO</i>	P	QL(2 EA daily)
<i>ketorolac tromethamine TABS PO</i>	P		<i>tolmetin sodium CAPS PO</i>	NP	
<i>meclofenamate sodium CAPS PO</i>	NP		<i>tolmetin sodium TABS PO 600 MG</i>	NP	
<i>mefenamic acid CAPS PO</i>	NP		VIMOVO PO (Use <i>naproxen-esomeprazole magnesium</i>)	NP	MP
<i>meloxicam CAPS PO</i>	NP	MP	Phosphodiesterase 4 (PDE4) Inhibitors		
<i>meloxicam TABS PO</i>	P	MP	OTEZLA TABS PO 30 MG	NP	SP
<i>meloxicam TABS PO</i>	P	MP	OTEZLA TBPK PO	NP	SP
MOTRIN INFANTS DROPS SUSP PO (Use <i>ibuprofen</i>)	NF	QL(80 ML daily)	Pyrimidine Synthesis Inhibitors		
<i>nabumetone PO 750 MG</i>	P	QL(3 EA daily)	ARAVA PO (Use <i>leflunomide</i>)	NP	QL(1 EA daily)
<i>nabumetone PO 500 MG</i>	P	QL(4 EA daily)	<i>leflunomide PO</i>	P	QL(1 EA daily)
NALFON CAPS PO (Use <i>fenoprofen calcium</i>)	NP		Selective Costimulation Modulators		
NALFON TABS PO (Use <i>fenoprofen calcium</i>)	NP		ORENCIA CLICKJECT SOAJ	NP	SP; MP
NAPRELAN TB24 PO (Use <i>naproxen sodium</i>)	NP	MP	ORENCIA SOLR	NP	SP
NAPRELAN TB24 PO 500 MG (Use <i>naproxen sodium</i>)	NF	MP	ORENCIA SOSY	NP	SP; MP
<i>naproxen sodium TABS PO 275 MG, 550 MG</i>	P	MP	Soluble Tumor Necrosis Factor Receptor Agents		
<i>naproxen sodium TB24 PO</i>	NP	MP	ENBREL MINI SOCT	P	SP; MP; PA
<i>naproxen-esomeprazole magnesium PO</i>	NP	MP	ENBREL SURECLICK SOAJ	P	SP; MP; PA
<i>naproxen SUSP PO</i>	P	MP	ENBREL SOLN	P	SP; MP; PA
<i>naproxen SUSP PO</i>	P	MP	ENBREL SOSY	P	SP; MP; PA
			ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions		
			Analgesic Combinations		
			<i>aspirin-acetaminophen-caffeine TABS PO</i>	P	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>butalbital-acetaminophen-caffeine CAPS PO 40 MG-50 MG-300 MG</i>	P		<i>acetaminophen SUPP PR 120 MG</i>	P	QL(33 EA daily)
<i>butalbital-acetaminophen-caffeine CAPS PO 40 MG-50 MG-325 MG</i>	P	QL(6 EA daily)	<i>acetaminophen SUSP PO 160 MG/5ML, 650 MG/20.3ML</i>	P	QL(125 ML daily)
<i>butalbital-acetaminophen-caffeine TABS PO 40 MG-50 MG-325 MG</i>	P	QL(6 EA daily)	<i>acetaminophen TABS PO 500 MG</i>	P	QL(8 EA daily)
<i>butalbital-acetaminophen CAPS PO 50 MG-300 MG</i>	NP		<i>acetaminophen TABS PO 325 MG</i>	P	QL(13 EA daily)
<i>butalbital-acetaminophen TABS PO 50 MG-300 MG</i>	P		FEVERALL JUNIOR STRENGTH SUPP PR	P	QL(13 EA daily)
<i>butalbital-acetaminophen TABS PO 50 MG-325 MG</i>	P	QL(13 EA daily)	TYLENOL CHILDRENS PAIN + FEVER SUSP PO (Use <i>acetaminophen</i>)	NF	QL(125 ML daily)
<i>butalbital-aspirin-caffeine CAPS PO</i>	P	QL(6 EA daily)	TYLENOL CHILDRENS SUSP PO (Use <i>acetaminophen</i>)	NF	QL(125 ML daily)
ESGIC TABS PO (Use <i>butalbital-acetaminophen-caffeine</i>)	NP	QL(6 EA daily)	TYLENOL EXTRA STRENGTH TABS PO (Use <i>acetaminophen</i>)	NF	QL(8 EA daily)
EXCEDRIN EXTRA STRENGTH TABS PO (Use <i>aspirin-acetaminophen-caffeine</i>)	NF		TYLENOL FOR CHILDREN + ADULTS SUSP PO (Use <i>acetaminophen</i>)	NF	QL(125 ML daily)
EXCEDRIN MIGRAINE RELIEF TABS PO (Use <i>aspirin-acetaminophen-caffeine</i>)	NF		TYLENOL INFANTS PAIN+FEVER SUSP PO (Use <i>acetaminophen</i>)	NF	QL(125 ML daily)
EXCEDRIN MIGRAINE TABS PO (Use <i>aspirin-acetaminophen-caffeine</i>)	NF		TYLENOL TABS PO (Use <i>acetaminophen</i>)	NF	QL(13 EA daily)
FIORICET CAPS PO (Use <i>butalbital-acetaminophen-caffeine</i>)	NP		Salicylates		
Analgesics Other			<i>aspirin buffered (cal carb-mag carb-mag oxide) PO</i>	P	
<i>acetaminophen CHEW PO 80 MG</i>	P	QL(50 EA daily)	<i>aspirin CHEW PO</i>	P	
<i>acetaminophen LIQD PO 160 MG/5ML</i>	P	QL(125 ML daily)	ASPIRIN SUPP PR 300 MG	P	
<i>acetaminophen SOLN PO 160 MG/5ML, 325 MG/10.15ML, 650 MG/20.3ML</i>	P	QL(125 ML daily)	<i>aspirin TABS PO 325 MG</i>	P	
			<i>aspirin TBEC PO 81 MG, 325 MG</i>	P	
			BUFFERIN PO (Use <i>aspirin buffered (cal carb-mag carb-mag oxide)</i>)	NF	
			<i>diflunisal TABS PO</i>	P	QL(3 EA daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ECOTRIN ARTHRTIS PAIN TBEC PO (Use aspirin)	NF		hydrocodone bitartrate CP12 PO	NP	
ECOTRIN TBEC PO (Use aspirin)	NF		hydrocodone bitartrate T24A	NP	
salsalate PO	P		hydromorphone hcl LIQD PO	P	
ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions			HYDROMORPHONE HCL SUPP PR	P	
Opioid Agonists			hydromorphone hcl TABS PO 8 MG	P	
ACTIQ LPOP 200 MCG, 400 MCG, 600 MCG, 800 MCG, 1200 MCG (Use fentanyl citrate)	NP		hydromorphone hcl TABS PO 2 MG, 4 MG	P	QL(4 EA daily)
ACTIQ LPOP 1600 MCG (Use fentanyl citrate)	NF		hydromorphone hcl TB24 PO	NP	
codeine sulfate TABS PO 30 MG	P	QL(6 EA daily); AL(At least 18 yrs old)	HYSINGLA ER T24A	NP	
CODEINE SULFATE TABS PO	P	QL(6 EA daily); AL(At least 18 yrs old)	levorphanol tartrate TABS PO	NP	
CONZIP CP24 PO (Use tramadol hcl)	NP	QL(1 EA daily); AL(At least 18 yrs old)	meperidine hcl SOLN PO 50 MG/5ML	NP	
DILAUDID LIQD PO (Use hydromorphone hcl)	NP		meperidine hcl TABS PO 50 MG	NP	QL(6 EA daily)
DILAUDID TABS PO 2 MG, 4 MG (Use hydromorphone hcl)	NP	QL(4 EA daily)	methadone hcl CONC PO	NP	QL(8 ML daily)
DILAUDID TABS PO 8 MG (Use hydromorphone hcl)	NP		methadone hcl SOLN PO	NP	QL(8 ML daily)
fentanyl citrate LPOP	NP		methadone hcl TABS PO	NP	QL(4 EA daily)
fentanyl citrate TABS	NP		methadone hcl TBSO PO	NP	QL(4 EA daily)
fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR	NP	QL(0.34 EA daily)	METHADOSE SUGAR-FREE CONC PO (Use methadone hcl)	NP	QL(8 ML daily)
fentanyl PT72 37.5 MCG/HR, 62.5 MCG/HR, 87.5 MCG/HR	NP		METHADOSE CONC PO (Use methadone hcl)	NP	QL(8 ML daily)
FENTORA TABS (Use fentanyl citrate)	NP		morphine sulfate beads PO	NP	
			morphine sulfate CP24 PO 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG	NP	
			morphine sulfate SOLN PO 10 MG/5ML, 20 MG/5ML, 20 MG/ML, 100 MG/5ML	P	QL(8 ML daily)
			morphine sulfate SUPP PR	P	

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Updated December 1, 2024

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>morphine sulfate TABS PO</i>	P	QL(4 EA daily)	<i>tramadol hcl TABS PO 25 MG</i>	NP	AL(At least 18 yrs old)
<i>morphine sulfate TBCR PO</i>	P	QL(2 EA daily); PA	<i>tramadol hcl TB24 PO</i>	NP	QL(1 EA daily); AL(At least 18 yrs old)
MS CONTIN TBCR PO (Use <i>morphine sulfate</i>)	NP	QL(2 EA daily)	XTAMPZA ER	NP	
NUCYNTA ER TB12 PO	NP		Opioid Combinations		
NUCYNTA TABS PO	NP		<i>acetaminophen w/ codeine SOLN PO</i>	P	QL(167 ML daily); AL(At least 18 yrs old)
<i>oxycodone hcl CAPS PO</i>	P	QL(4 EA daily)	<i>acetaminophen w/ codeine TABS PO 15 MG-300 MG, 30 MG-300 MG, 60 MG-300 MG</i>	P	QL(14 EA daily); AL(At least 18 yrs old)
<i>oxycodone hcl CONC PO 100 MG/5ML</i>	P		<i>acetaminophen-caff-dihydrocod CAPS PO 30 MG-320.5 MG-16 MG</i>	NP	
<i>oxycodone hcl SOLN PO</i>	P		<i>butalbital-acetaminophen-caffeine w/ codeine PO</i>	NP	QL(6 EA daily); AL(At least 18 yrs old)
<i>oxycodone hcl T12A PO 10 MG, 20 MG, 40 MG, 80 MG</i>	NP		<i>butalbital-aspirin-caffeine w/cod PO</i>	P	QL(6 EA daily); AL(At least 18 yrs old)
<i>oxycodone hcl TABS PO 10 MG, 15 MG, 20 MG, 30 MG</i>	P		FIORICET/CODEINE PO 30 MG-40 MG-50 MG-300 MG (Use <i>butalbital-acetaminophen-caffeine w/ codeine</i>)	NP	QL(6 EA daily); AL(At least 18 yrs old)
<i>oxycodone hcl TABS PO 5 MG</i>	P	QL(4 EA daily)	<i>hydrocodone-acetaminophen SOLN PO 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML</i>	P	QL(240 ML per 30 day(s) retail)
OXYCONTIN T12A PO	NP		<i>hydrocodone-acetaminophen TABS PO 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG</i>	P	
<i>oxymorphone hcl TABS PO</i>	NP		<i>hydrocodone-acetaminophen TABS PO 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	P	QL(12 EA daily)
<i>oxymorphone hcl TB12 PO</i>	NP				
ROXICODONE TABS PO 15 MG, 30 MG (Use <i>oxycodone hcl</i>)	NP				
ROXYBOND TABA PO 5 MG, 15 MG, 30 MG	NP				
<i>tramadol hcl CP24 PO 100 MG, 200 MG, 300 MG</i>	NP	QL(1 EA daily); AL(At least 18 yrs old)			
<i>tramadol hcl SOLN</i>	NP				
TRAMADOL HCL SOLN (Use <i>tramadol hcl</i>)	NP				
<i>tramadol hcl TABS PO 50 MG</i>	P	QL(8 EA daily); AL(At least 18 yrs old)			
<i>tramadol hcl TABS PO 100 MG</i>	NP	QL(4 EA daily); AL(At least 18 yrs old)			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>hydrocodone-ibuprofen PO 10 MG-200 MG, 5 MG-200 MG, 7.5 MG-200 MG</i>	P		<i>buprenorphine hcl-naloxone hcl dihydrate SUBL</i>	P	MP
NALOCET TABS PO	NP		<i>buprenorphine hcl SUBL</i>	P	
<i>oxycodone w/ acetaminophen SOLN PO</i>	P		<i>buprenorphine PTWK</i>	NP	
<i>oxycodone w/ acetaminophen TABS PO 325 MG-10 MG, 325 MG-5 MG</i>	P	QL(13 EA daily)	<i>butorphanol tartrate NA 10 MG/ML</i>	NP	
<i>oxycodone w/ acetaminophen TABS PO 325 MG-2.5 MG, 325 MG-7.5 MG</i>	P	QL(12 EA daily)	BUTRANS PTWK (Use <i>buprenorphine</i>)	NP	
PERCOCET TABS PO 325 MG-2.5 MG, 325 MG-7.5 MG (Use <i>oxycodone w/ acetaminophen</i>)	NP	QL(12 EA daily)	<i>pentazocine w/ naloxone hcl PO</i>	NP	
PERCOCET TABS PO 325 MG-10 MG, 325 MG-5 MG (Use <i>oxycodone w/ acetaminophen</i>)	NP	QL(13 EA daily)	SUBLOCADE SOSY	P	SP
PROLATE SOLN PO	NP		SUBOXONE FILM SL (Use <i>buprenorphine hcl-naloxone hcl dihydrate</i>)	P	
PROLATE TABS PO	NP		ZUBSOLV SUBL	P	
SEGLENTIS	NP		ANDROGENS-ANABOLIC - Drugs to Regulate Hormones		
<i>tramadol-acetaminophen PO</i>	NP	QL(40 EA per fill retail); 1 max fill(s) per 30 day(s) retail; AL(At least 18 yrs old)	Androgens		
Opioid Partial Agonists			ANDRODERM PT24 2 MG/24HR, 4 MG/24HR	P	PA
BELBUCA FILM	NP		ANDROGEL PUMP GEL TD (Use <i>testosterone</i>)	NF	PA
BRIXADI (WEEKLY) SOSY	P	SP	ANDROGEL GEL TD 25 MG/2.5GM (Use <i>testosterone</i>)	NF	PA
BRIXADI SOSY 64 MG/0.18ML, 96 MG/0.27ML, 128 MG/0.36ML	P	SP	AVEED SOLN	P	SP; MP; PA
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL</i>	P	MP	<i>danazol CAPS PO</i>	P	
			FORTESTA GEL TD (Use <i>testosterone</i>)	NF	PA
			<i>methyltestosterone CAPS PO</i>	P	PA
			<i>methyltestosterone TABS</i>	P	PA
			TESTIM GEL TD (Use <i>testosterone</i>)	NF	PA
			<i>testosterone cypionate SOLN IM</i>	P	MP
			<i>testosterone enanthate SOLN IM</i>	P	
			<i>testosterone GEL TD</i>	P	PA

Drug Name	Drug Tier	Requirements/Limits
<i>testosterone SOLN</i>	P	MP; PA
VOGELXO PUMP GEL TD (Use <i>testosterone</i>)	NF	PA
VOGELXO GEL TD (Use <i>testosterone</i>)	NF	PA
XYOSTED SOAJ	P	MP; PA
ANORECTAL AND RELATED PRODUCTS - Rectal Drugs to Treat Pain, Swelling and Itching		
Intrarectal Steroids		
<i>budesonide (intrarectal)</i>	NP	
CORTENEMA PR (Use <i>hydrocortisone (intrarectal)</i>)	NP	
CORTIFOAM EX 10 %	NP	
<i>hydrocortisone (intrarectal) PR</i>	P	
UCERIS (Use <i>budesonide (intrarectal)</i>)	NP	
Rectal Combinations		
LIDOCAINE- HYDROCORTISONE ACE GEL PR	NP	
<i>lidocaine-hydrocortisone acetate (rectal) CREA EX</i>	NP	
<i>lidocaine-hydrocortisone acetate (rectal) KIT PR</i>	NP	
<i>phenylephrine in hard fat PR</i>	P	
PROCTOFOAM HC FOAM EX	NP	
Rectal Local Anesthetics		
<i>dibucaine (rectal) EX</i>	P	
NUPERCAINAL EX (Use <i>dibucaine (rectal)</i>)	NF	
Rectal Steroids		
ANUSOL-HC EX (Use <i>hydrocortisone (rectal)</i>)	NP	
<i>hydrocortisone (rectal) EX</i>	P	
Vasodilating Agents		

Drug Name	Drug Tier	Requirements/Limits
RECTIV PR (Use <i>nitroglycerin (intra-anal)</i>)	NP	
ANTACIDS		
Antacid Combinations		
<i>alum & mag hydrox-simethicone LIQD PO</i>	P	
<i>alum & mag hydrox-simethicone SUSP PO</i>	P	
<i>aluminum hydroxide-mag carb SUSP PO 358 MG/15ML-95 MG/15ML</i>	P	
ANTACID REGULAR STRENGTH SUSP PO (Use <i>alum & mag hydrox-simethicone</i>)	NF	
ANTACID/ANTIGAS SUSP PO (Use <i>alum & mag hydrox-simethicone</i>)	NF	
GAVISCON SUSP PO (Use <i>aluminum hydroxide-mag carb</i>)	NF	
HYVEE ADVANCED ANTACID SUSP PO (Use <i>alum & mag hydrox-simethicone</i>)	NF	
Antacids - Aluminum Salts		
ALUMINUM HYDROXIDE GEL SUSP PO	P	
Antacids - Bicarbonate		
<i>sodium bicarbonate (antacid) TABS PO 325 MG, 650 MG</i>	P	
Antacids - Calcium Salts		
<i>calcium carbonate (antacid) CHEW PO 500 MG, 750 MG, 1000 MG</i>	P	
<i>calcium carbonate (antacid) SUSP</i>	P	
CALCIUM CARBONATE ANTACID SUSP	P	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
TUMS CHEWY BITES CHEW PO (Use calcium carbonate (antacid))	NF		EMVERM CHEW PO	NP	
TUMS E-X 750 CHEW PO (Use calcium carbonate (antacid))	NF		<i>ivermectin PO</i>	NP	
TUMS EXTRA STRENGTH 750 CHEW PO (Use calcium carbonate (antacid))	NF		<i>praziquantel PO</i>	P	
TUMS LASTING EFFECTS CHEW PO (Use calcium carbonate (antacid))	NF		STROMECTOL PO (Use ivermectin)	NP	
TUMS SMOOTHIES CHEW PO (Use calcium carbonate (antacid))	NF		ANTIANGINAL AGENTS - Drugs to Treat Chest Pain		
TUMS SMOOTHIES CHEW PO (Use calcium carbonate (antacid))	NF		Antianginals-Other		
TUMS ULTRA 1000 CHEW PO (Use calcium carbonate (antacid))	NF		ASPRUZYO SPRINKLE PACK	NP	
TUMS ULTRA 1000 CHEW PO (Use calcium carbonate (antacid))	NF		RANEXA TB12 PO (Use ranolazine)	NP	MP
TUMS CHEW PO (Use calcium carbonate (antacid))	NF		<i>ranolazine TB12 PO</i>	NP	MP
TUMS CHEW PO (Use calcium carbonate (antacid))	NF		<i>ranolazine TB12 PO</i>	NP	MP
TUMS CHEW PO (Use calcium carbonate (antacid))	NF		Nitrates		
Antacids - Magnesium Salts			GONITRO PACK	NP	
<i>magnesium oxide TABS PO 400 MG</i>	P		ISORDIL TITRADOSE TABS PO (Use isosorbide dinitrate)	NP	MP
ANTHELMINTICS - Drugs to Treat Worm Infections			<i>isosorbide dinitrate TABS PO</i>	P	MP
Anthelmintics			<i>isosorbide mononitrate TABS PO</i>	P	QL(3 EA daily); MP
<i>albendazole PO</i>	NP		<i>isosorbide mononitrate TB24 PO</i>	P	QL(1 EA daily); MP
BENZNIDAZOLE	NP	SP	NITRO-BID OINT	P	
BILTRICIDE PO (Use praziquantel)	NP		NITRO-DUR PT24 (Use nitroglycerin)	NP	MP
			NITRO-DUR PT24	NP	
			<i>nitroglycerin PT24</i>	P	MP
			<i>nitroglycerin SOLN TL 0.4 MG/SPRAY</i>	NP	MP
			<i>nitroglycerin SUBL</i>	P	MP
			NITROLINGUAL SOLN TL (Use nitroglycerin)	NP	MP
			NITROSTAT SUBL 0.4 MG, 0.6 MG (Use nitroglycerin)	NF	MP

IL MHP Medicaid

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Drug Name	Drug Tier	Requirements/Limits
NITROSTAT SUBL 0.3 MG (Use nitroglycerin)	NF	
NITROSTAT SUBL (Use nitroglycerin)	NP	MP
ANTIANKXIETY AGENTS - Drugs to Treat Anxiety		
Antianxiety Agents - Misc.		
<i>bupirone hcl PO 10 MG</i>	P	QL(6 EA daily); MP
<i>bupirone hcl PO 5 MG, 7.5 MG, 30 MG</i>	P	QL(3 EA daily); MP
<i>bupirone hcl PO 15 MG</i>	P	QL(4 EA daily); MP
<i>hydroxyzine hcl SYRP PO</i>	P	
<i>hydroxyzine hcl TABS PO</i>	P	QL(8 EA daily)
<i>hydroxyzine pamoate CAPS PO 100 MG</i>	P	QL(4 EA daily)
<i>hydroxyzine pamoate CAPS PO 25 MG, 50 MG</i>	P	QL(8 EA daily)
<i>meprobamate PO</i>	NP	
VISTARIL CAPS PO 50 MG (Use hydroxyzine pamoate)	NF	QL(8 EA daily)
VISTARIL CAPS PO 25 MG (Use hydroxyzine pamoate)	NP	QL(8 EA daily)
Benzodiazepines		
ALPRAZOLAM INTENSOL CONC	P	QL(10 ML daily)
<i>alprazolam TABS PO 0.25 MG, 0.5 MG, 1 MG</i>	P	QL(4 EA daily)
<i>alprazolam TABS PO 2 MG</i>	P	QL(3 EA daily)
<i>alprazolam TB24 PO</i>	NP	
<i>alprazolam TBDP PO</i>	NP	
ATIVAN TABS PO (Use lorazepam)	NP	
<i>chlordiazepoxide hcl CAPS PO</i>	P	QL(4 EA daily)
<i>clorazepate dipotassium TABS PO 15 MG</i>	P	QL(6 EA daily)

Drug Name	Drug Tier	Requirements/Limits
<i>clorazepate dipotassium TABS PO 3.75 MG, 7.5 MG</i>	P	QL(3 EA daily)
<i>diazepam CONC</i>	P	
<i>diazepam SOLN PO 5 MG/5ML</i>	P	
<i>diazepam TABS PO</i>	P	
<i>lorazepam CONC PO</i>	P	
<i>lorazepam TABS PO</i>	P	
LOREEV XR CS24	NP	
<i>oxazepam CAPS PO</i>	P	QL(4 EA daily)
TRANXENE-T TABS PO (Use clorazepate dipotassium)	NF	QL(3 EA daily)
XANAX XR TB24 PO (Use alprazolam)	NP	
XANAX XR TB24 PO (Use alprazolam)	NF	
XANAX TABS PO 2 MG (Use alprazolam)	NP	QL(3 EA daily)
XANAX TABS PO 0.25 MG, 0.5 MG, 1 MG (Use alprazolam)	NP	QL(4 EA daily)
ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms		
Antiarrhythmics Type I-A		
<i>disopyramide phosphate CAPS PO</i>	P	MP
NORPACE CR CP12 PO	P	MP
NORPACE CAPS PO (Use disopyramide phosphate)	NP	MP
<i>quinidine gluconate TBCR PO</i>	P	MP
<i>quinidine sulfate TABS PO</i>	P	MP
Antiarrhythmics Type I-B		
<i>mexiletine hcl PO</i>	P	MP
Antiarrhythmics Type I-C		

Drug Name	Drug Tier	Requirements/Limits
<i>flecainide acetate PO</i>	P	MP
<i>flecainide acetate PO</i>	P	MP
<i>propafenone hcl CP12 PO</i>	NP	MP
<i>propafenone hcl TABS PO 150 MG</i>	P	QL(4 EA daily); MP
<i>propafenone hcl TABS PO 225 MG, 300 MG</i>	P	QL(3 EA daily); MP
RYTHMOL SR CP12 PO (Use <i>propafenone hcl</i>)	NP	MP
Antiarrhythmics Type III		
<i>amiodarone hcl TABS PO</i>	P	QL(4 EA daily); MP
<i>dofetilide PO</i>	P	MP
<i>dofetilide PO</i>	P	MP
MULTAQ PO	NP	
TIKOSYN PO (Use <i>dofetilide</i>)	NP	MP
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions		
Antiasthmatic - Monoclonal Antibodies		
CINQAIR	NP	SP; MP
FASENRA PEN SOAJ	P	SP; MP; PA
FASENRA SOSY 30 MG/ML	P	SP; MP; PA
NUCALA SOAJ	P	SP; MP; PA
NUCALA SOLR	P	SP; PA
NUCALA SOSY 40 MG/0.4ML	P	SP; PA
NUCALA SOSY 100 MG/ML	P	SP; MP; PA
TEZSPIRE SOAJ	NP	SP
TEZSPIRE SOSY	NP	SP; MP
XOLAIR SOLR	P	SP; PA
XOLAIR SOSY 75 MG/0.5ML, 150 MG/ML	P	SP; MP; PA
Anti-Inflammatory Agents		
<i>cromolyn sodium NEBU</i>	P	QL(8 ML daily); MP

Drug Name	Drug Tier	Requirements/Limits
Bronchodilators - Anticholinergics		
ATROVENT HFA	P	QL(0.516 GM daily); MP
INCRUSE ELLIPTA	P	MP
<i>ipratropium bromide SOLN 0.02 %</i>	P	MP
SPIRIVA HANDIHALER CAPS (Use <i>tiotropium bromide monohydrate</i>)	P	QL(1 EA daily); MP
SPIRIVA RESPIMAT AERS	P	QL(0.134 GM daily); MP
<i>tiotropium bromide monohydrate CAPS</i>	P	QL(1 EA daily); MP
TUDORZA PRESSAIR	NP	MP
YUPELRI	NP	MP
Leukotriene Modulators		
ACCOLATE PO 20 MG (Use <i>zafirlukast</i>)	NF	QL(2 EA daily); MP
ACCOLATE PO (Use <i>zafirlukast</i>)	NP	QL(2 EA daily); MP
<i>montelukast sodium CHEW PO</i>	P	QL(1 EA daily); MP
<i>montelukast sodium PACK PO</i>	P	QL(1 EA daily); MP
<i>montelukast sodium TABS PO</i>	P	QL(1 EA daily); MP
SINGULAIR CHEW PO (Use <i>montelukast sodium</i>)	NP	QL(1 EA daily); MP
SINGULAIR PACK PO (Use <i>montelukast sodium</i>)	NP	QL(1 EA daily); MP
SINGULAIR TABS PO (Use <i>montelukast sodium</i>)	NP	QL(1 EA daily); MP
<i>zafirlukast PO</i>	P	QL(2 EA daily); MP
<i>zileuton TB12 PO</i>	NP	MP
ZYFLO TABS PO	NP	MP
Selective Phosphodiesterase 4 (PDE4) Inhibitors		
DALIRESP PO (Use <i>roflumilast</i>)	NP	
<i>roflumilast PO</i>	NP	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Steroid Inhalants			<i>fluticasone propionate hfa 44 MCG/ACT</i>	P	QL(0.36 GM daily); MP
ALVESCO	NP	MP	<i>fluticasone propionate hfa 110 MCG/ACT, 220 MCG/ACT</i>	P	QL(0.4 GM daily); MP
ARMONAIR DIGIHALER	NP	QL(0.034 EA daily)	PULMICORT FLEXHALER AEPB	NP	QL(0.034 EA daily); MP
ARNUITY ELLIPTA	NP	QL(1 EA daily); MP	PULMICORT SUSP (<i>Use budesonide (inhalation)</i>)	NP	QL(4 ML daily); AL(Up to 7 yrs old); MP
ASMANEX (120 METERED DOSES) AEPB	P	MP	QVAR REDIHALER	NP	QL(0.36 GM daily); MP
ASMANEX (14 METERED DOSES) AEPB	P	MP	Sympathomimetics		
ASMANEX (30 METERED DOSES) AEPB	P	MP	ADVAIR DISKUS AEPB (<i>Use fluticasone-salmeterol</i>)	P	QL(2 EA daily); MP
ASMANEX (60 METERED DOSES) AEPB	P	MP	ADVAIR HFA AERO (<i>Use fluticasone-salmeterol</i>)	P	QL(0.4 GM daily); MP
ASMANEX HFA AERO 50 MCG/ACT	NP	QL(0.44 GM daily); MP	AIRDUO DIGIHALER	P	QL(0.034 EA daily)
ASMANEX HFA AERO 100 MCG/ACT, 200 MCG/ACT	NP	MP	AIRDUO RESPICLICK 113/14 AEPB (<i>Use fluticasone-salmeterol</i>)	P	QL(0.034 EA daily); MP
<i>budesonide (inhalation) SUSP</i>	P	QL(4 ML daily); AL(Up to 7 yrs old); MP	AIRDUO RESPICLICK 232/14 AEPB (<i>Use fluticasone-salmeterol</i>)	P	QL(0.034 EA daily); MP
FLOVENT DISKUS AEPB 100 MCG/ACT, 250 MCG/ACT (<i>Use fluticasone propionate (inhalation)</i>)	P	QL(2 EA daily); MP	AIRDUO RESPICLICK 55/14 AEPB (<i>Use fluticasone-salmeterol</i>)	P	QL(0.034 EA daily); MP
FLOVENT DISKUS AEPB 50 MCG/ACT (<i>Use fluticasone propionate (inhalation)</i>)	P	QL(2 EA daily); MP	AIRSUPRA	NP	
FLOVENT HFA 110 MCG/ACT, 220 MCG/ACT (<i>Use fluticasone propionate hfa</i>)	P	QL(0.4 GM daily); MP	<i>albuterol sulfate AERS</i>	P	QL(0.57 GM daily); 1 max fill(s) per 15 day(s) retail; MP
FLOVENT HFA 44 MCG/ACT (<i>Use fluticasone propionate hfa</i>)	P	QL(0.36 GM daily); MP	<i>albuterol sulfate AERS</i>	P	MP
<i>fluticasone propionate (inhalation) AEPB 100 MCG/ACT, 250 MCG/ACT</i>	NP	QL(2 EA daily); MP	<i>albuterol sulfate AERS</i>	P	QL(1.2 GM daily); 1 max fill(s) per 15 day(s) retail; MP
<i>fluticasone propionate (inhalation) AEPB 50 MCG/ACT</i>	NP	QL(2 EA daily); MP	<i>albuterol sulfate NEBU 0.63 MG/3ML, 1.25 MG/3ML, 2.5 MG/0.5ML</i>	P	MP

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P = Preferred Drug, NP = Non-Preferred, AL = Age Limit, PA = Prior Authorization QL = Quantity Limit, SP = Specialty Drug, ST = Step Therapy, RX/OTC = Both RX and OTC NDCs, MP = Maintenance Product, NF = Non-Formulary

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>albuterol sulfate NEBU 0.083 %</i>	P	QL(13 ML daily); MP	<i>formoterol fumarate NEBU</i>	NP	
<i>albuterol sulfate SYRP PO</i>	NP	MP	<i>ipratropium-albuterol SOLN</i>	P	MP
<i>albuterol sulfate TABS PO</i>	NP		<i>levalbuterol hcl</i>	NP	MP
ANORO ELLIPTA	P	QL(2 EA daily); MP	<i>levalbuterol tartrate</i>	NP	MP
<i>arformoterol tartrate</i>	NP		PERFORMIST NEBU (Use <i>formoterol fumarate</i>)	NP	
BEVESPI AEROSPHERE	NP	QL(0.36 GM daily); MP	PROAIR DIGIHALER	NP	
BREO ELLIPTA 50 MCG/INH-25 MCG/INH	NP		PROAIR HFA AERS (Use <i>albuterol sulfate</i>)	P	QL(0.57 GM daily); 1 max fill(s) per 15 day(s) retail; MP
BREO ELLIPTA (Use <i>fluticasone furoate-vilanterol</i>)	NP	QL(2 EA daily); MP	PROAIR RESPICLIK AEPB	NP	MP
BREZTRI AEROSPHERE	NP	MP	PROVENTIL HFA AERS (Use <i>albuterol sulfate</i>)	P	QL(0.45 GM daily); 1 max fill(s) per 15 day(s) retail; MP
BROVANA (Use <i>arformoterol tartrate</i>)	NP		SEREVENT DISKUS	P	QL(2 EA daily); MP
BROVANA (Use <i>arformoterol tartrate</i>)	NF		STIOLTO RESPIMAT	NP	MP
<i>budesonide-formoterol fumarate dihydrate</i>	NP	QL(22 GM per fill retail; 110 per fill mail); MP	STRIVERDI RESPIMAT	NP	MP
COMBIVENT RESPIMAT AERS	NP	MP	SYMBICORT 160 MCG/ACT-4.5 MCG/ACT (Use <i>budesonide-formoterol fumarate dihydrate</i>)	P	QL(18 GM per fill retail; 110 per fill mail); MP
DUAKLIR PRESSAIR	NP	MP	SYMBICORT (Use <i>budesonide-formoterol fumarate dihydrate</i>)	P	QL(31 GM per fill retail; 110 per fill mail); MP
DULERA	P	QL(0.44 GM daily); MP	SYMBICORT 80 MCG/ACT-4.5 MCG/ACT (Use <i>budesonide-formoterol fumarate dihydrate</i>)	P	QL(21 GM per fill retail; 110 per fill mail); MP
<i>fluticasone furoate-vilanterol</i>	NP	QL(2 EA daily); MP	<i>terbutaline sulfate TABS PO 2.5 MG</i>	P	QL(6 EA daily); MP
<i>fluticasone-salmeterol AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT</i>	NP	QL(2 EA daily); MP	<i>terbutaline sulfate TABS PO 5 MG</i>	P	QL(3 EA daily); MP
<i>fluticasone-salmeterol AEPB 113 MCG/ACT-14 MCG/ACT, 232 MCG/ACT-14 MCG/ACT, 55 MCG/ACT-14 MCG/ACT</i>	NP	QL(0.034 EA daily); MP	TRELEGY ELLIPTA	NP	QL(2 EA daily); MP
<i>fluticasone-salmeterol AERO</i>	NP	QL(0.4 GM daily); MP			

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VENTOLIN HFA AERS (Use albuterol sulfate)	NP	QL(0.54 GM daily); 1 max fill(s) per 15 day(s) retail; MP	ARIXTRA 5 MG/0.4ML (Use fondaparinux sodium)	NP	QL(16.8 ML per 365 day(s) retail); SP
VENTOLIN HFA AERS (Use albuterol sulfate)	NP	QL(1.2 GM daily); 1 max fill(s) per 15 day(s) retail; MP	ARIXTRA 10 MG/0.8ML (Use fondaparinux sodium)	NP	QL(33.6 ML per 365 day(s) retail); SP
XOPENEX HFA (Use levalbuterol tartrate)	NP	MP	enoxaparin sodium SOLN IJ 300 MG/3ML	P	QL(252 ML per 365 day(s) retail); SP
Xanthines			enoxaparin sodium SOSY 80 MG/0.8ML	P	QL(67.2 ML per 365 day(s) retail); SP
THEO-24 CP24 PO	P	MP	enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML	P	QL(84 ML per 365 day(s) retail); SP
theophylline ELIX PO	P		enoxaparin sodium SOSY 40 MG/0.4ML	P	QL(33.6 ML per 365 day(s) retail); SP
theophylline SOLN PO	P	MP	enoxaparin sodium SOSY 120 MG/0.8ML	P	QL(12 ML per fill retail; 67.2 ML per 365 day(s) retail); 21 day(s) max supply per 180 day(s) retail; SP
theophylline TB12 PO 300 MG, 450 MG	P	MP	enoxaparin sodium SOSY 60 MG/0.6ML	P	QL(9 ML per fill retail; 50.4 ML per 365 day(s) retail); 21 day(s) max supply per 180 day(s) retail; SP
theophylline TB12 PO 100 MG, 200 MG	P		enoxaparin sodium SOSY 30 MG/0.3ML	P	QL(25.2 ML per 365 day(s) retail); SP
theophylline TB24 PO	P	MP	fondaparinux sodium 10 MG/0.8ML	P	QL(33.6 ML per 365 day(s) retail); SP
ANTICOAGULANTS - Blood Thinners			fondaparinux sodium 2.5 MG/0.5ML	P	QL(21 ML per 365 day(s) retail); SP
Coumarin Anticoagulants			fondaparinux sodium 7.5 MG/0.6ML	P	QL(25.2 ML per 365 day(s) retail); SP
warfarin sodium TABS PO	P	MP	fondaparinux sodium 5 MG/0.4ML	P	QL(16.8 ML per 365 day(s) retail); SP
Direct Factor Xa Inhibitors					
ELIQUIS DVT/PE STARTER PACK TBPK	P	PA			
ELIQUIS TABS	P	PA			
SAVAYSA PO	NP				
XARELTO STARTER PACK TBPK	P	PA			
XARELTO SUSR	NP				
XARELTO TABS	P	PA			
Heparins And Heparinoid-Like Agents					
ARIXTRA 7.5 MG/0.6ML (Use fondaparinux sodium)	NP	QL(25.2 ML per 365 day(s) retail); SP			
ARIXTRA 2.5 MG/0.5ML (Use fondaparinux sodium)	NP	QL(21 ML per 365 day(s) retail); SP			

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FRAGMIN SOLN 10000 UNIT/4ML, 95000 UNIT/3.8ML	P	SP	<i>dabigatran etexilate mesylate CAPS PO 75 MG, 150 MG</i>	NP	
FRAGMIN SOSY	P	SP	PRADAXA CAPS PO (Use <i>dabigatran etexilate mesylate</i>)	NP	
HEPARIN SODIUM (PORCINE) PF SOLN IJ	P		PRADAXA PACK	NP	SP
<i>heparin sodium (porcine) SOLN IJ 1000 UNIT/ML, 5000 UNIT/0.5ML, 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML</i>	P		ANTICONVULSANTS - Drugs to Treat Seizures		
HEPARIN SODIUM (PORCINE) SOSY IJ	P		AMPA Glutamate Receptor Antagonists		
LOVENOX SOLN IJ 300 MG/3ML (Use <i>enoxaparin sodium</i>)	NP	QL(252 ML per 365 day(s) retail); SP	FYCOMPA SUSP	NP	MP
LOVENOX SOSY 60 MG/0.6ML (Use <i>enoxaparin sodium</i>)	NP	QL(9 ML per fill retail; 50.4 ML per 365 day(s) retail); 21 day(s) max supply per 180 day(s) retail; SP	FYCOMPA TABS	NP	
LOVENOX SOSY 120 MG/0.8ML (Use <i>enoxaparin sodium</i>)	NP	QL(12 ML per fill retail; 67.2 ML per 365 day(s) retail); 21 day(s) max supply per 180 day(s) retail; SP	Anticonvulsants - Benzodiazepines		
LOVENOX SOSY 80 MG/0.8ML (Use <i>enoxaparin sodium</i>)	NP	QL(67.2 ML per 365 day(s) retail); SP	<i>clobazam SUSP</i>	NP	QL(8 ML daily); MP
LOVENOX SOSY 100 MG/ML, 150 MG/ML (Use <i>enoxaparin sodium</i>)	NP	QL(84 ML per 365 day(s) retail); SP	<i>clobazam TABS PO</i>	NP	QL(2 EA daily)
LOVENOX SOSY 30 MG/0.3ML (Use <i>enoxaparin sodium</i>)	NP	QL(25.2 ML per 365 day(s) retail); SP	<i>clonazepam TABS PO</i>	P	
LOVENOX SOSY 40 MG/0.4ML (Use <i>enoxaparin sodium</i>)	NP	QL(33.6 ML per 365 day(s) retail); SP	<i>clonazepam TBDP PO</i>	NP	
Thrombin Inhibitors			DIASTAT ACUDIAL GEL PR 10 MG (Use <i>diazepam (anticonvulsant)</i>)	P	QL(0.067 EA daily); 4 max fill(s) per 365 day(s) retail
			DIASTAT ACUDIAL GEL PR 20 MG (Use <i>diazepam (anticonvulsant)</i>)	NF	QL(0.067 EA daily); 4 max fill(s) per 365 day(s) retail
			DIASTAT PEDIATRIC GEL PR (Use <i>diazepam (anticonvulsant)</i>)	NF	QL(0.067 EA daily); 4 max fill(s) per 365 day(s) retail
			<i>diazepam (anticonvulsant) GEL PR</i>	P	QL(0.067 EA daily); 4 max fill(s) per 365 day(s) retail
			KLONOPIN TABS PO (Use <i>clonazepam</i>)	NP	
			NAYZILAM	NP	QL(0.067 EA daily); 4 max fill(s) per 365 day(s) retail
			ONFI SUSP (Use <i>clobazam</i>)	NP	QL(8 ML daily); MP
			ONFI TABS PO (Use <i>clobazam</i>)	NP	QL(2 EA daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SYMPAZAN FILM	NP	QL(2 EA daily)	<i>gabapentin CAPS PO</i>	P	QL(9 EA daily); MP
VALTOCO 10 MG DOSE LIQD	NP		<i>gabapentin SOLN PO</i>	P	QL(75 ML daily); MP
VALTOCO 15 MG DOSE LQPK	NP		<i>gabapentin TABS PO 800 MG</i>	P	QL(4 EA daily); MP
VALTOCO 20 MG DOSE LQPK	NP		<i>gabapentin TABS PO 600 MG</i>	P	QL(6 EA daily); MP
VALTOCO 5 MG DOSE LIQD	NP		KEPPRA XR TB24 PO (<i>Use levetiracetam</i>)	NP	MP
Anticonvulsants - Misc.			KEPPRA SOLN PO 100 MG/ML (<i>Use levetiracetam</i>)	NP	MP
APTIOM	NP	QL(2 EA daily)	KEPPRA TABS PO 500 MG (<i>Use levetiracetam</i>)	NP	QL(6 EA daily); MP
BANZEL SUSP (<i>Use rufinamide</i>)	NP	QL(80 ML daily); SP; MP	KEPPRA TABS PO 1000 MG (<i>Use levetiracetam</i>)	NP	MP
BANZEL TABS PO 200 MG (<i>Use rufinamide</i>)	NP	QL(4 EA daily); SP; MP	KEPPRA TABS PO 250 MG, 750 MG (<i>Use levetiracetam</i>)	NP	QL(4 EA daily); MP
BANZEL TABS PO 400 MG (<i>Use rufinamide</i>)	NP	QL(8 EA daily); SP; MP	<i>lacosamide SOLN PO 10 MG/ML</i>	NP	MP
BRIVIACT SOLN PO 10 MG/ML	NP	QL(20 ML daily); SP; MP	<i>lacosamide TABS PO</i>	NP	QL(2 EA daily)
BRIVIACT TABS	NP	QL(2 EA daily); SP	LAMICTAL ODT KIT PO (<i>Use lamotrigine</i>)	NP	QL(1.17 EA daily); 1 max fill(s) per 365 day(s) retail
<i>carbamazepine CHEW PO 100 MG</i>	P	MP	LAMICTAL ODT KIT PO (<i>Use lamotrigine</i>)	NP	QL(0.94 EA daily); 1 max fill(s) per 365 day(s) retail
<i>carbamazepine CP12 PO</i>	NP	MP	LAMICTAL ODT KIT PO (<i>Use lamotrigine</i>)	NP	QL(1.87 EA daily); 1 max fill(s) per 365 day(s) retail
<i>carbamazepine SUSP PO 100 MG/5ML</i>	P	MP	LAMICTAL ODT TBDP PO (<i>Use lamotrigine</i>)	NP	MP
<i>carbamazepine SUSP PO 100 MG/5ML</i>	P	MP	LAMICTAL STARTER KIT PO 25 MG (<i>Use lamotrigine</i>)	NP	QL(1.17 EA daily); 1 max fill(s) per 365 day(s) retail
<i>carbamazepine TABS PO</i>	P	QL(8 EA daily); MP	LAMICTAL STARTER KIT PO (<i>Use lamotrigine</i>)	NP	QL(1.64 EA daily); 1 max fill(s) per 365 day(s) retail
<i>carbamazepine TB12 PO</i>	P	MP			
CARBATROL CP12 PO (<i>Use carbamazepine</i>)	NP	MP			
DIACOMIT CAPS	NP	SP			
DIACOMIT PACK	NP	SP			
ELEPSIA XR TB24 PO	NP				
EPIDIOLEX	NP	QL(20 ML daily); SP; MP			
EPRONTIA SOLN	NP	MP			
FINTEPLA	NP	SP; MP			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
LAMICTAL STARTER KIT PO (Use lamotrigine)	NP	QL(3.27 EA daily); 1 max fill(s) per 365 day(s) retail	levetiracetam TABS PO 1000 MG	P	MP
LAMICTAL XR KIT PO	NP	QL(0.94 EA daily); 1 max fill(s) per 365 day(s) retail	levetiracetam TABS PO 500 MG	P	QL(6 EA daily); MP
LAMICTAL XR KIT PO	NP	QL(1.17 EA daily); 1 max fill(s) per 365 day(s) retail	levetiracetam TABS PO 250 MG, 750 MG	P	QL(4 EA daily); MP
LAMICTAL XR TB24 PO (Use lamotrigine)	NP	QL(2 EA daily); MP	levetiracetam TABS PO 1000 MG	P	MP
LAMICTAL CHEW PO (Use lamotrigine)	NP	MP	levetiracetam TB24 PO	P	MP
LAMICTAL TABS PO (Use lamotrigine)	NP	MP	LYRICA CAPS PO (Use pregabalin)	NP	QL(2 EA daily); MP
lamotrigine CHEW PO	P	MP	LYRICA CAPS PO 25 MG, 50 MG, 150 MG (Use pregabalin)	NF	
lamotrigine KIT PO	NP	QL(1.64 EA daily); 1 max fill(s) per 365 day(s) retail	LYRICA SOLN (Use pregabalin)	NP	QL(30 ML daily); MP
lamotrigine KIT PO	NP	QL(3.27 EA daily); 1 max fill(s) per 365 day(s) retail	LYRICA SOLN (Use pregabalin)	NF	
lamotrigine KIT PO	NP	QL(1.87 EA daily); 1 max fill(s) per 365 day(s) retail	MOTPOLY XR CP24	NP	
lamotrigine KIT PO	NP	QL(0.94 EA daily); 1 max fill(s) per 365 day(s) retail	MYSOLINE PO (Use primidone)	NP	MP
lamotrigine KIT PO 25 MG	NP	QL(1.17 EA daily); 1 max fill(s) per 365 day(s) retail	NEURONTIN CAPS PO (Use gabapentin)	NP	QL(9 EA daily); MP
lamotrigine TABS PO	P	MP	NEURONTIN SOLN PO (Use gabapentin)	NP	QL(75 ML daily); MP
lamotrigine TABS PO	P	MP	NEURONTIN SOLN PO (Use gabapentin)	NF	QL(75 ML daily); MP
lamotrigine TB24 PO	NP	QL(2 EA daily); MP	NEURONTIN TABS PO 800 MG (Use gabapentin)	NP	QL(4 EA daily); MP
lamotrigine TBDP PO	NP	MP	NEURONTIN TABS PO 600 MG (Use gabapentin)	NP	QL(6 EA daily); MP
levetiracetam SOLN PO 100 MG/ML, 500 MG/5ML	P	MP	oxcarbazepine SUSP PO	P	QL(33.4 ML daily); MP
			oxcarbazepine TABS PO 600 MG	P	QL(4 EA daily); MP
			oxcarbazepine TABS PO 150 MG, 300 MG	P	QL(9 EA daily); MP
			OXTELLAR XR TB24 (Use oxcarbazepine)	NP	MP
			pregabalin CAPS PO	P	QL(2 EA daily); MP
			pregabalin SOLN	P	QL(30 ML daily); MP

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<i>primidone PO</i>	P		TRILEPTAL TABS PO 600 MG (<i>Use oxcarbazepine</i>)	NF	QL(4 EA daily); MP
<i>primidone PO 50 MG, 250 MG</i>	P	MP	TRILEPTAL TABS PO 150 MG, 300 MG (<i>Use oxcarbazepine</i>)	NP	QL(9 EA daily); MP
QUDEXY XR CS24 PO (<i>Use topiramate</i>)	NP	QL(1 EA daily); MP	TRILEPTAL TABS PO 600 MG (<i>Use oxcarbazepine</i>)	NP	QL(4 EA daily); MP
<i>rufinamide SUSP</i>	NP	QL(80 ML daily); SP; MP; SL	TRILEPTAL TABS PO 150 MG, 300 MG (<i>Use oxcarbazepine</i>)	NF	QL(9 EA daily); MP
<i>rufinamide TABS PO 200 MG</i>	NP	QL(4 EA daily); SP; MP	TROKENDI XR CP24 PO (<i>Use topiramate</i>)	NP	QL(1 EA daily); MP
<i>rufinamide TABS PO 400 MG</i>	NP	QL(8 EA daily); SP; MP	VIMPAT SOLN PO 10 MG/ML (<i>Use lacosamide</i>)	NP	MP
SPRITAM TB3D	NP	MP	VIMPAT TABS PO (<i>Use lacosamide</i>)	NP	QL(2 EA daily)
TEGRETOL SUSP PO (<i>Use carbamazepine</i>)	NP	MP	ZONISADE SUSP	NP	
TEGRETOL TABS PO (<i>Use carbamazepine</i>)	NP	QL(8 EA daily); MP	<i>zonisamide CAPS PO 25 MG, 50 MG</i>	P	QL(4 EA daily); MP
TEGRETOL-XR TB12 PO (<i>Use carbamazepine</i>)	NP	MP	<i>zonisamide CAPS PO 100 MG</i>	P	QL(6 EA daily); MP
TOPAMAX SPRINKLE CPSP PO (<i>Use topiramate</i>)	NP	MP	ZTALMY	NP	
TOPAMAX TABS PO 25 MG, 50 MG (<i>Use topiramate</i>)	NP	QL(6 EA daily); MP	Carbamates		
TOPAMAX TABS PO 200 MG (<i>Use topiramate</i>)	NP	QL(2 EA daily); MP	<i>felbamate SUSP</i>	NP	MP
TOPAMAX TABS PO 100 MG (<i>Use topiramate</i>)	NP	QL(4 EA daily); MP	<i>felbamate SUSP</i>	NP	MP
<i>topiramate CP24 PO</i>	NP	QL(1 EA daily); MP	<i>felbamate TABS PO</i>	NP	MP
<i>topiramate CPSP PO</i>	P	MP	<i>felbamate TABS PO</i>	NP	MP
<i>topiramate CS24 PO</i>	NP	QL(1 EA daily); MP	FELBATOL SUSP (<i>Use felbamate</i>)	NP	MP
<i>topiramate TABS PO 100 MG</i>	P	QL(4 EA daily); MP	FELBATOL TABS PO (<i>Use felbamate</i>)	NP	MP
<i>topiramate TABS PO 25 MG, 50 MG</i>	P	QL(6 EA daily); MP	XCOPRI (250 MG DAILY DOSE) TBPK	P	
<i>topiramate TABS PO 200 MG</i>	P	QL(2 EA daily); MP	XCOPRI (350 MG DAILY DOSE) TBPK	P	
TRILEPTAL SUSP PO (<i>Use oxcarbazepine</i>)	NP	QL(33.4 ML daily); MP	XCOPRI TABS 50 MG, 100 MG, 150 MG, 200 MG	P	
			XCOPRI TBPK	P	
			GABA Modulators		

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GABITRIL PO (<i>Use tiagabine hcl</i>)	NP	QL(4 EA daily); MP	Valproic Acid		
SABRIL PACK (<i>Use vigabatrin</i>)	NP	QL(6.1 EA daily); SP; MP	DEPAKOTE ER TB24 PO (<i>Use divalproex sodium</i>)	NP	MP
SABRIL TABS (<i>Use vigabatrin</i>)	NP	QL(6 EA daily); SP; MP	DEPAKOTE ER TB24 PO (<i>Use divalproex sodium</i>)	NF	MP
<i>tiagabine hcl PO</i>	NP	QL(4 EA daily); MP	DEPAKOTE SPRINKLES CSDR PO (<i>Use divalproex sodium</i>)	NP	MP
<i>vigabatrin PACK</i>	NP	QL(6.1 EA daily); SP; MP	DEPAKOTE TBEC PO (<i>Use divalproex sodium</i>)	NP	MP
<i>vigabatrin TABS</i>	NP	QL(6 EA daily); SP; MP	<i>divalproex sodium CSDR PO</i>	P	MP
Hydantoins			<i>divalproex sodium TB24 PO</i>	P	MP
DILANTIN PO	NP	MP	<i>divalproex sodium TB24 PO</i>	P	MP
DILANTIN PO (<i>Use phenytoin sodium extended</i>)	NP	MP	<i>divalproex sodium TBEC PO</i>	P	MP
DILANTIN INFATABS CHEW PO (<i>Use phenytoin</i>)	NP	MP	<i>valproate sodium SOLN PO 250 MG/5ML</i>	P	MP
DILANTIN-125 SUSP PO (<i>Use phenytoin</i>)	NF		<i>valproate sodium SOLN PO 250 MG/5ML</i>	P	MP
DILANTIN SUSP PO (<i>Use phenytoin</i>)	NP	MP	<i>valproic acid CAPS PO</i>	P	MP
<i>phenytoin sodium extended PO 100 MG, 200 MG, 300 MG</i>	P	MP	ANTIDEPRESSANTS - Drugs to Treat Depression		
<i>phenytoin CHEW PO</i>	P	MP	Alpha-2 Receptor Antagonists (Tetracyclics)		
<i>phenytoin CHEW PO</i>	P	MP	<i>mirtazapine TABS PO</i>	P	QL(1 EA daily); MP
<i>phenytoin SUSP PO</i>	P	MP	<i>mirtazapine TBDP PO</i>	P	QL(1 EA daily); MP
Succinimides			REMERON SOLTAB TBDP PO (<i>Use mirtazapine</i>)	NP	QL(1 EA daily); MP
CELONTIN (<i>Use methsuximide</i>)	NP		REMERON TABS PO 15 MG, 30 MG (<i>Use mirtazapine</i>)	NP	QL(1 EA daily); MP
<i>ethosuximide CAPS PO</i>	P	MP	Antidepressant Combinations		
<i>ethosuximide SOLN PO</i>	P	MP	AUVELITY	NP	
<i>ethosuximide SOLN PO</i>	P	MP	Antidepressants - Misc.		
<i>methsuximide</i>	NP		APLENZIN PO	NP	
ZARONTIN CAPS PO (<i>Use ethosuximide</i>)	NP	MP	<i>bupropion hcl TABS PO</i>	P	MP
ZARONTIN SOLN PO (<i>Use ethosuximide</i>)	NP	MP			

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<i>bupropion hcl TABS PO</i>	P	MP	CELEXA TABS PO 40 MG (Use <i>citalopram hydrobromide</i>)	NP	QL(1 EA daily); MP
<i>bupropion hcl TB12 PO</i>	P	QL(2 EA daily); MP	CITALOPRAM HYDROBROMIDE CAPS	NP	
<i>bupropion hcl TB24 PO 450 MG</i>	P	MP	<i>citalopram hydrobromide SOLN PO</i>	P	MP
<i>bupropion hcl TB24 PO 150 MG, 300 MG</i>	P	QL(1 EA daily); MP	<i>citalopram hydrobromide SOLN PO</i>	P	MP
FORFIVO XL TB24 PO (Use <i>bupropion hcl</i>)	NP	MP	<i>citalopram hydrobromide TABS PO 20 MG</i>	P	QL(2 EA daily); MP
FORFIVO XL TB24 PO (Use <i>bupropion hcl</i>)	NF		<i>citalopram hydrobromide TABS PO 40 MG</i>	P	QL(1 EA daily); MP
WELLBUTRIN SR TB12 PO (Use <i>bupropion hcl</i>)	NP	QL(2 EA daily); MP	<i>citalopram hydrobromide TABS PO 10 MG</i>	P	QL(4 EA daily); MP
WELLBUTRIN XL TB24 PO (Use <i>bupropion hcl</i>)	NP	QL(1 EA daily); MP	<i>escitalopram oxalate SOLN PO</i>	P	MP
GABA Receptor Modulator - Neuroactive Steroid			<i>escitalopram oxalate TABS PO 20 MG</i>	P	QL(1 EA daily); MP
ZURZUVAE	NP	SP	<i>escitalopram oxalate TABS PO 5 MG, 10 MG</i>	P	QL(1.5 EA daily); MP
Monoamine Oxidase Inhibitors (MAOIs)			<i>fluoxetine hcl CAPS PO 20 MG, 40 MG</i>	P	QL(2 EA daily); MP
EMSAM	NP		<i>fluoxetine hcl CAPS PO 10 MG</i>	P	QL(1 EA daily); MP
MARPLAN PO	NP		<i>fluoxetine hcl CPDR PO</i>	NP	MP
NARDIL PO (Use <i>phenelzine sulfate</i>)	NP	MP	<i>fluoxetine hcl SOLN PO</i>	P	MP
<i>phenelzine sulfate PO</i>	P	MP	<i>fluoxetine hcl SOLN PO</i>	P	MP
<i>tranylcypromine sulfate PO</i>	P	MP	<i>fluoxetine hcl TABS PO 20 MG</i>	P	QL(2 EA daily); MP
N-Methyl-D-aspartic acid (NMDA) Receptor Antagonists			<i>fluoxetine hcl TABS PO 60 MG</i>	P	MP
SPRAVATO (56 MG DOSE)	NP	SP; MP	<i>fluoxetine hcl TABS PO 10 MG</i>	P	QL(1 EA daily); MP
SPRAVATO (84 MG DOSE)	NP	SP; MP	FLUOXETINE HCL TABS PO (Use <i>fluoxetine hcl</i>)	P	MP
Selective Serotonin Reuptake Inhibitors (SSRIs)			<i>fluvoxamine maleate CP24 PO</i>	NP	MP
CELEXA TABS PO 10 MG (Use <i>citalopram hydrobromide</i>)	NP	QL(4 EA daily); MP	<i>fluvoxamine maleate TABS PO 100 MG</i>	P	QL(3 EA daily); MP
CELEXA TABS PO 20 MG (Use <i>citalopram hydrobromide</i>)	NP	QL(2 EA daily); MP	<i>fluvoxamine maleate TABS PO 25 MG, 50 MG</i>	P	QL(2 EA daily); MP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
LEXAPRO TABS PO 5 MG, 10 MG (Use escitalopram oxalate)	NP	QL(1.5 EA daily); MP	ZOLOFT TABS PO (Use sertraline hcl)	NP	QL(4 EA daily); MP
LEXAPRO TABS PO 20 MG (Use escitalopram oxalate)	NP	QL(1 EA daily); MP	ZOLOFT TABS PO 25 MG, 100 MG (Use sertraline hcl)	NF	
paroxetine hcl SUSP PO	P	MP	Serotonin Modulators		
paroxetine hcl TABS PO 20 MG	P	QL(3 EA daily); MP	nefazodone hcl PO	NP	MP
paroxetine hcl TABS PO 10 MG	P	QL(6 EA daily); MP	trazodone hcl TABS PO 150 MG	P	MP
paroxetine hcl TABS PO 30 MG, 40 MG	P	QL(2 EA daily); MP	trazodone hcl TABS PO 300 MG	P	QL(2 EA daily); MP
paroxetine hcl TB24 PO	NP	MP	trazodone hcl TABS PO 50 MG, 100 MG, 150 MG	P	MP
paroxetine hcl TB24 PO	NP	MP	TRINTELLIX PO	NP	
PAXIL CR TB24 PO (Use paroxetine hcl)	NP	MP	VIIBRYD TABS (Use vilazodone hcl)	NP	
PAXIL SUSP PO (Use paroxetine hcl)	NP	MP	vilazodone hcl TABS	NP	
PAXIL TABS PO 10 MG (Use paroxetine hcl)	NP	QL(6 EA daily); MP	Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)		
PAXIL TABS PO 20 MG (Use paroxetine hcl)	NP	QL(3 EA daily); MP	CYMBALTA CPEP PO (Use duloxetine hcl)	NP	QL(2 EA daily); MP
PAXIL TABS PO 30 MG, 40 MG (Use paroxetine hcl)	NP	QL(2 EA daily); MP	DESVENLAFAXINE ER PO	NP	MP
PEXEVA PO 10 MG, 20 MG, 30 MG	NP		desvenlafaxine succinate PO	NP	MP
PROZAC CAPS PO 10 MG (Use fluoxetine hcl)	NP	QL(1 EA daily); MP	desvenlafaxine succinate PO	NP	MP
PROZAC CAPS PO 20 MG, 40 MG (Use fluoxetine hcl)	NP	QL(2 EA daily); MP	DRIZALMA SPRINKLE CSDR	NP	MP
SERTRALINE HCL CAPS	NP	MP	duloxetine hcl CPEP PO	P	QL(2 EA daily); MP
sertraline hcl CONC PO	P	MP	EFFEXOR XR CP24 PO 37.5 MG, 150 MG (Use venlafaxine hcl)	NF	MP
sertraline hcl TABS PO	P	QL(4 EA daily); MP	EFFEXOR XR CP24 PO (Use venlafaxine hcl)	NP	MP
ZOLOFT CONC PO (Use sertraline hcl)	NP	MP	EFFEXOR XR CP24 PO (Use venlafaxine hcl)	NF	
ZOLOFT CONC PO (Use sertraline hcl)	NF		FETZIMA TITRATION C4PK	NP	
			FETZIMA CP24	NP	

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Drug Name	Drug Tier	Requirements/Limits
PRISTIQ PO (Use desvenlafaxine succinate)	NP	MP
PRISTIQ PO 50 MG (Use desvenlafaxine succinate)	NF	MP
VENLAFAXINE BESYLATE ER	P	
venlafaxine hcl CP24 PO	P	MP
venlafaxine hcl CP24 PO	P	MP
venlafaxine hcl TABS PO	P	QL(3 EA daily); MP
venlafaxine hcl TB24 PO	NP	QL(1 EA daily); MP
Tricyclic Agents		
amitriptyline hcl TABS PO	P	MP
amoxapine PO	NP	MP
amoxapine PO	NP	MP
ANAFRANIL PO (Use clomipramine hcl)	NP	MP
clomipramine hcl PO	P	MP
desipramine hcl TABS PO 10 MG, 50 MG, 75 MG, 100 MG, 150 MG	P	MP
desipramine hcl TABS PO 25 MG	P	QL(2 EA daily); MP
desipramine hcl TABS PO 10 MG, 50 MG, 75 MG, 100 MG, 150 MG	P	MP
doxepin hcl CAPS PO	P	MP
doxepin hcl CAPS PO	P	MP
doxepin hcl CONC PO	P	MP
imipramine hcl TABS PO	P	MP
imipramine hcl TABS PO	P	MP
imipramine pamoate PO	NP	MP
NORPRAMIN TABS PO 25 MG (Use desipramine hcl)	NP	QL(2 EA daily); MP
NORPRAMIN TABS PO 10 MG (Use desipramine hcl)	NP	MP
nortriptyline hcl CAPS PO	P	MP
nortriptyline hcl SOLN PO	P	MP

Drug Name	Drug Tier	Requirements/Limits
PAMELOR CAPS PO (Use nortriptyline hcl)	NP	MP
protriptyline hcl PO	P	MP
trimipramine maleate CAPS PO	NP	MP
trimipramine maleate CAPS PO	NP	MP
ANTIDIABETICS - Drugs to Regulate Blood Sugar		
Alpha-Glucosidase Inhibitors		
acarbose PO	P	QL(3 EA daily); MP
miglitol PO	P	QL(3 EA daily); MP
Antidiabetic - Amylin Analogs		
SYMLINPEN 120 SOPN	NP	MP
SYMLINPEN 60 SOPN	NP	MP
Antidiabetic Combinations		
ACTOPLUS MET TABS PO 850 MG-15 MG (Use pioglitazone hcl-metformin hcl)	NP	MP
ACTOPLUS MET TABS PO 500 MG-15 MG (Use pioglitazone hcl-metformin hcl)	NF	MP
alogliptin-metformin hcl	NP	QL(2 EA daily); MP
alogliptin-pioglitazone 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG	NP	QL(1 EA daily); MP
dapagliflozin propanediol-metformin hcl PO	NP	
DUETACT (Use pioglitazone hcl-glimepiride)	NP	MP
glipizide-metformin hcl PO 250 MG-2.5 MG, 500 MG-2.5 MG	P	QL(3 EA daily); MP
glipizide-metformin hcl PO 500 MG-5 MG	P	QL(4 EA daily); MP

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>glyburide-metformin PO 250 MG-1.25 MG, 500 MG-2.5 MG</i>	P	QL(3 EA daily); MP	XULTOPHY	NP	MP
<i>glyburide-metformin PO 500 MG-5 MG</i>	P	QL(4 EA daily); MP	Biguanides		
GLYXAMBI PO	NP		GLUMETZA TB24 PO (Use metformin hcl)	NP	MP
INVOKAMET XR TB24	NP		<i>metformin hcl SOLN PO</i>	NP	QL(3 ML daily); MP
INVOKAMET TABS	NP		<i>metformin hcl TABS PO 850 MG</i>	P	QL(3 EA daily); MP
JANUMET XR TB24 PO	NP	QL(2 EA daily)	<i>metformin hcl TABS PO 500 MG</i>	P	QL(5 EA daily); MP
JANUMET TABS PO	NP	QL(2 EA daily)	<i>metformin hcl TABS PO 1000 MG</i>	P	QL(2 EA daily); MP
JENTADUETO XR TB24	NP		<i>metformin hcl TABS PO 625 MG</i>	NP	
JENTADUETO TABS	NP		<i>metformin hcl TB24 PO 500 MG, 1000 MG</i>	NP	MP
KAZANO (Use alogliptin-metformin hcl)	NP	QL(2 EA daily); MP	<i>metformin hcl TB24 PO 500 MG, 1000 MG</i>	NP	MP
KOMBIGLYZE XR PO (Use saxagliptin-metformin hcl)	NP		<i>metformin hcl TB24 PO 750 MG</i>	P	QL(2 EA daily); MP
OSENI 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG (Use alogliptin-pioglitazone)	NP	QL(1 EA daily); MP	<i>metformin hcl TB24 PO 500 MG</i>	P	QL(4 EA daily); MP
OSENI 15 MG-12.5 MG, 45 MG-12.5 MG (Use alogliptin-pioglitazone)	NF	QL(1 EA daily); MP	RIOMET SOLN PO (Use metformin hcl)	NF	QL(3 ML daily); MP
<i>pioglitazone hcl-glimepiride</i>	NP	MP	Diabetic Other		
<i>pioglitazone hcl-metformin hcl TABS PO</i>	NP	MP	BAQSIMI ONE PACK POWD	P	
QTERN	NP		BAQSIMI TWO PACK POWD	P	
<i>saxagliptin-metformin hcl PO</i>	NP		CVS GLUCOSE PO	P	
SEGLUROMET	NP	QL(2 EA daily)	CVS SOFT GLUCOSE CHEW PO	P	
SOLIQUA	NP	MP	DEX4 PO	P	
STEGLUJAN	NP		DEX4 GLUCOSE PO	P	
SYNJARDY XR TB24	NP		DEX4 NATURALS PO	P	
SYNJARDY TABS	NP		DEX4 POUCH PACK PO	P	
TRIJARDY XR	NP		DEX4 QUICK DISSOLVE GLUCOSE CHEW PO	P	
XIGDUO XR PO (Use dapagliflozin propanediol-metformin hcl)	NP		<i>dextrose (diabetic use) GEL PO</i>	P	
XIGDUO XR PO	NP				

IL MHP Medicaid

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>diazoxide</i>	P	MP	LEADER GLUCOSE PO 6 MG-4 GM	P	
GLUCAGEN HYPOKIT	NP	QL(1 EA daily; 1 EA per fill retail); 1 max fill(s) per 180 day(s) retail	LEADER QUICK DISSOLVE GLUCOSE CHEW PO	P	
<i>glucagon (rdna)</i>	NP	QL(1 EA daily; 1 EA per fill retail); 1 max fill(s) per 180 day(s) retail	LONGS GLUCOSE PO	P	
GLUCAGON EMERGENCY	NP	QL(1 EA daily; 1 EA per fill retail); 1 max fill(s) per 180 day(s) retail	MEIJER GLUCOSE PO	P	
GLUCAGON EMERGENCY (Use <i>glucagon (rdna)</i>)	NF	QL(1 EA daily; 1 EA per fill retail); 1 max fill(s) per 180 day(s) retail	<i>mifepristone (hyperglycemia)</i>	NP	SP
GLUCO TO GO CHEW PO	P		PREFERRED PLUS GLUCOSE PO	P	
GLUCOSE PO	P		PROGLYCEM (Use <i>diazoxide</i>)	P	MP
GLUCOSE INSTANT ENERGY PO	P		PX GLUCOSE PO	P	
GNP GLUCOSE PO	P		RA GLUCOSE PO	P	
GNP QUICK DISSOLVE GLUCOSE CHEW PO	P		RELION GLUCOSE PO	P	
GOODSENSE GLUCOSE PO	P		SM GLUCOSE PO	P	
GVOKE HYPOPEN 1-PACK SOAJ	P	QL(3 ML daily)	SMART SENSE GLUCOSE PO	P	
GVOKE HYPOPEN 2-PACK SOAJ	P	QL(3 ML daily)	TGT GLUCOSE PO	P	
GVOKE KIT SOLN	P		TRUEPLUS GLUCOSE ON THE GO CHEW PO	P	
GVOKE PFS SOSY 1 MG/0.2ML	P	QL(0.2 ML per fill retail); 1 max fill(s) per 180 day(s) retail	TRUEPLUS GLUCOSE CHEW PO	P	
HY-VEE GLUCOSE PO	P		UP & UP GLUCOSE PO	P	
KORLYM (Use <i>mifepristone (hyperglycemia)</i>)	NP	SP	VALUE PLUS GLUCOSE PO	P	
KROGER GLUCOSE PO	P		WALGREENS GLUCOSE PO	P	
			ZEGALOGUE SOAJ	P	QL(0.6 ML per fill retail); 1 max fill(s) per 180 day(s) retail
			ZEGALOGUE SOSY	P	QL(0.6 ML per fill retail); 1 max fill(s) per 180 day(s) retail
			Dipeptidyl Peptidase-4 (DPP-4) Inhibitors		
			<i>alogliptin benzoate</i>	NP	QL(1 EA daily); MP
			JANUVIA PO	P	QL(1 EA daily); MP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
NESINA (Use alogliptin benzoate)	NP	QL(1 EA daily); MP	ADMELOG SOLN IJ	NP	QL(2 ML daily); MP
ONGLYZA PO (Use saxagliptin hcl)	NP		AFREZZA POWD 4 UNIT, 8 UNIT, 12 UNIT	NP	MP
saxagliptin hcl PO	NP		APIDRA SOLOSTAR SOPN	NP	MP
TRADJENTA	P	QL(1 EA daily); MP	APIDRA SOLN	NP	MP
ZITUVIO	NP		BASAGLAR KWIKPEN SOPN	NP	QL(2 ML daily); MP
Dopamine Receptor Agonists - Antidiabetic			FIASP FLEXTOUCH SOPN	NP	MP
CYCLOSET	NP	MP	FIASP PENFILL SOCT	NP	MP
Incretin Mimetic Agents			FIASP PUMPCART SOCT	NP	MP
BYDUREON BCISE AUIJ	NP	MP	FIASP SOLN	NP	MP
BYETTA 10 MCG PEN SOPN	NP	MP	HUMALOG JUNIOR KWIKPEN SOPN	P	MP
BYETTA 5 MCG PEN SOPN	NP	MP	HUMALOG KWIKPEN SOPN 100 UNIT/ML	P	QL(2 ML daily); MP
<i>liraglutide</i>	P	MP	HUMALOG KWIKPEN SOPN 200 UNIT/ML	P	MP
MOUNJARO	NP		HUMALOG MIX 50/50 KWIKPEN SUPN	P	MP
OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN	NP	MP	HUMALOG MIX 50/50 SUSP	P	QL(1 ML daily); MP
OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN	NP		HUMALOG MIX 75/25 KWIKPEN SUPN	P	MP
OZEMPIC (1 MG/DOSE) SOPN 4 MG/3ML	NP	MP	HUMALOG MIX 75/25 SUSP	P	QL(1 ML daily); MP
OZEMPIC (2 MG/DOSE) SOPN	NP		HUMALOG TEMPO PEN SOPN	NP	
RYBELSUS TABS PO 3 MG, 14 MG	P	PA	HUMALOG SOCT	P	MP
RYBELSUS TABS PO	P		HUMALOG SOLN IJ	P	QL(2 ML daily); MP
TRULICITY 1.5 MG/0.5ML, 3 MG/0.5ML, 4.5 MG/0.5ML	P	QL(0.072 ML daily); MP	HUMULIN 70/30 KWIKPEN SUPN	P	MP
TRULICITY 0.75 MG/0.5ML	P	QL(0.072 ML daily); MP	HUMULIN 70/30 SUSP	P	QL(1 ML daily); MP
VICTOZA (Use <i>liraglutide</i>)	P	QL(0.3 ML daily); MP	HUMULIN N KWIKPEN SUPN	P	MP
Insulin			HUMULIN N SUSP	P	QL(1 ML daily); MP
ADMELOG SOLOSTAR SOPN	NP	QL(2 ML daily); MP			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
HUMULIN R U-500 (CONCENTRATED) SOLN SC	P	MP	INSULIN LISPRO PROT & LISPRO SUPN	P	MP
HUMULIN R U-500 KWIKPEN SOPN SC	P	MP	INSULIN LISPRO SOLN IJ	P	QL(2 ML daily); MP
HUMULIN R SOLN IJ	P	QL(1 ML daily); MP	LANTUS SOLOSTAR SOPN	P	QL(2 ML daily); MP
INSULIN ASP PROT & ASP FLEXPEN SUPN	NP	MP	LANTUS SOLN	P	MP
INSULIN ASPART FLEXPEN SOPN	NP	MP	LEVEMIR FLEXPEN SOPN	P	MP
INSULIN ASPART PENFILL SOCT	NP	MP	LEVEMIR FLEXTOUCH SOPN	P	MP
INSULIN ASPART PROT & ASPART SUSP	NP	MP	LEVEMIR SOLN	P	MP
INSULIN ASPART SOLN IJ	NP	MP	LYUMJEV KWIKPEN SOPN	NP	MP
INSULIN DEGLUDEC FLEXTOUCH SOPN	NP	MP	LYUMJEV TEMPO PEN SOPN	NP	
INSULIN DEGLUDEC SOLN	NP	MP	LYUMJEV SOLN	NP	MP
INSULIN GLARGINE MAX SOLOSTAR SOPN	NP	MP	NOVOLIN 70/30 FLEXPEN RELION SUPN	NP	MP
INSULIN GLARGINE SOLOSTAR SOPN 100 UNIT/ML	NP	QL(2 ML daily); MP	NOVOLIN 70/30 FLEXPEN SUPN	NP	MP
INSULIN GLARGINE SOLOSTAR SOPN 300 UNIT/ML	NP	MP	NOVOLIN 70/30 RELION SUSP	NP	QL(1 ML daily); MP
INSULIN GLARGINE SOLN	NP	MP	NOVOLIN 70/30 SUSP	NP	QL(1 ML daily); MP
INSULIN GLARGINE-YFGN SOLN	NP	MP	NOVOLIN N FLEXPEN RELION SUPN	NP	MP
INSULIN GLARGINE-YFGN SOLN	NP	MP	NOVOLIN N FLEXPEN SUPN	NP	MP
INSULIN GLARGINE-YFGN SOPN	NP	MP	NOVOLIN N RELION SUSP	NP	QL(1 ML daily); MP
INSULIN GLARGINE-YFGN SOPN	NP	MP	NOVOLIN N SUSP	NP	QL(1 ML daily); MP
INSULIN GLARGINE-YFGN SOPN	NP	MP	NOVOLIN R FLEXPEN RELION SOPN IJ	NP	MP
INSULIN LISPRO (1 UNIT DIAL) SOPN	P	QL(2 ML daily); MP	NOVOLIN R FLEXPEN SOPN IJ	NP	MP
INSULIN LISPRO JUNIOR KWIKPEN SOPN	P	MP	NOVOLIN R RELION SOLN IJ	NP	QL(1 ML daily); MP
			NOVOLIN R SOLN IJ	NP	QL(1 ML daily); MP
			NOVOLOG 70/30 FLEXPEN RELION SUPN	NP	MP

IL MHP Medicaid

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
NOVOLOG FLEXPEN RELION SOPN	NP	MP	FARXIGA PO (<i>Use dapagliflozin propanediol</i>)	NF	QL(1 EA daily)
NOVOLOG FLEXPEN SOPN	NP	MP	FARXIGA PO (<i>Use dapagliflozin propanediol</i>)	P	QL(1 EA daily)
NOVOLOG MIX 70/30 FLEXPEN SUPN	NP	MP	INVOKANA	P	QL(1 EA daily); MP
NOVOLOG MIX 70/30 RELION SUSP	NP	MP	JARDIANCE PO	P	QL(1 EA daily); MP
NOVOLOG MIX 70/30 SUSP	NP	MP	STEGLATRO	NP	QL(1 EA daily)
NOVOLOG PENFILL SOCT	NP	MP	Sulfonylureas		
NOVOLOG RELION SOLN IJ	NP	MP	AMARYL PO 4 MG (<i>Use glimepiride</i>)	NF	QL(2 EA daily); MP
NOVOLOG SOLN IJ	NP	MP	AMARYL PO 1 MG, 2 MG (<i>Use glimepiride</i>)	NF	QL(4 EA daily); MP
REZVOGLAR KWIKPEN	NP		<i>glimepiride PO 4 MG</i>	P	QL(2 EA daily); MP
SEMGLEE (YFGN) SOLN	NP	MP	<i>glimepiride PO 1 MG, 2 MG</i>	P	QL(4 EA daily); MP
SEMGLEE (YFGN) SOPN	NP	MP	<i>glipizide TABS PO 5 MG, 10 MG</i>	P	MP
SEMGLEE (YFGN) SOPN	NP	MP	<i>glipizide TABS PO</i>	P	
TOUJEO MAX SOLOSTAR SOPN	NP	MP	<i>glipizide TB24 PO 10 MG</i>	P	QL(2 EA daily); MP
TOUJEO SOLOSTAR SOPN	NP	MP	<i>glipizide TB24 PO 2.5 MG, 5 MG</i>	P	QL(3 EA daily); MP
TRESIBA FLEXTOUCH SOPN	NP	MP	GLUCOTROL XL TB24 PO 10 MG (<i>Use glipizide</i>)	NP	QL(2 EA daily); MP
TRESIBA SOLN	NP	MP	GLUCOTROL XL TB24 PO 2.5 MG, 5 MG (<i>Use glipizide</i>)	NP	QL(3 EA daily); MP
Insulin Sensitizing Agents			<i>glyburide micronized PO 1.5 MG, 3 MG, 6 MG</i>	P	MP
ACTOS PO (<i>Use pioglitazone hcl</i>)	NP	QL(1 EA daily); MP	<i>glyburide TABS PO</i>	P	MP
<i>pioglitazone hcl PO</i>	P	QL(1 EA daily); MP	<i>glyburide TABS PO</i>	P	MP
Meglitinide Analogues			GLYNASE PO 3 MG (<i>Use glyburide micronized</i>)	NF	MP
<i>nateglinide PO</i>	P	QL(3 EA daily); MP	GLYNASE PO (<i>Use glyburide micronized</i>)	NP	MP
<i>repaglinide PO</i>	NP	MP	ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea		
Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors			Antidiarrheal/Probiotic Agents - Misc.		
<i>dapagliflozin propanediol PO</i>	NP	QL(1 EA daily)			

Drug Name	Drug Tier	Requirements/Limits
<i>bismuth subsalicylate CHEW PO 262 MG</i>	P	
<i>bismuth subsalicylate SUSP PO 262 MG/15ML, 525 MG/15ML, 525 MG/30ML, 527 MG/30ML, 1050 MG/30ML</i>	P	
<i>bismuth subsalicylate TABS PO</i>	P	
PEPTO-BISMOL MAX STRENGTH SUSP PO (Use <i>bismuth subsalicylate</i>)	NF	
PEPTO-BISMOL SUSP PO 262 MG/15ML (Use <i>bismuth subsalicylate</i>)	NF	
PEPTO-BISMOL TABS PO (Use <i>bismuth subsalicylate</i>)	NF	
Antiperistaltic Agents		
<i>diphenoxylate w/ atropine LIQD PO</i>	P	QL(3.94 ML daily)
<i>diphenoxylate w/ atropine TABS PO</i>	P	
IMODIUM A-D CAPS PO (Use <i>loperamide hcl</i>)	NF	RX/OTC
IMODIUM A-D TABS PO (Use <i>loperamide hcl</i>)	NF	
LOMOTIL TABS PO (Use <i>diphenoxylate w/ atropine</i>)	NF	
<i>loperamide hcl CAPS PO</i>	P	RX/OTC
<i>loperamide hcl TABS PO</i>	P	
ANTIDOTES AND SPECIFIC ANTAGONISTS		
Antidotes - Chelating Agents		
CHEMET PO	P	
<i>deferasirox PACK</i>	NP	SP
<i>deferasirox TABS PO</i>	NP	SP
<i>deferasirox TBSO</i>	NP	SP
<i>deferiprone TABS</i>	NP	SP
EXJADE TBSO (Use <i>deferasirox</i>)	NP	SP

Drug Name	Drug Tier	Requirements/Limits
FERRIPROX TWICE-A-DAY TABS	NP	SP
FERRIPROX SOLN	NP	SP
FERRIPROX TABS (Use <i>deferiprone</i>)	NP	SP
JADENU SPRINKLE PACK (Use <i>deferasirox</i>)	NP	SP
JADENU TABS PO (Use <i>deferasirox</i>)	NP	SP
Opioid Antagonists		
KLOXXADO LIQD	P	
NALMEFENE HCL IJ	P	
<i>naloxone hcl LIQD</i>	P	RX/OTC
<i>naloxone hcl SOCT</i>	P	
<i>naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML</i>	P	
<i>naloxone hcl SOSY 2 MG/2ML</i>	P	
<i>naltrexone hcl PO</i>	P	MP
NARCAN LIQD (Use <i>naloxone hcl</i>)	P	RX/OTC
OPVEE NA	P	
VIVITROL	P	SP
ZIMHI SOSY	P	
ANTIEMETICS - Drugs to Treat Nausea and Vomiting		
5-HT3 Receptor Antagonists		
ANZEMET TABS PO 50 MG	NP	
<i>granisetron hcl TABS PO</i>	NP	
<i>ondansetron hcl SOLN PO 4 MG/5ML</i>	P	
<i>ondansetron hcl TABS PO 4 MG, 8 MG</i>	P	QL(1 EA daily)
<i>ondansetron TBDP PO 4 MG, 8 MG</i>	P	QL(1 EA daily)
SANCUSO PTCH	NP	
Antiemetics - Anticholinergic		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ANTIVERT CHEW PO (Use meclizine hcl)	NP	RX/OTC	EMEND SUSR	NP	
ANTIVERT TABS PO 50 MG (Use meclizine hcl)	NP		ANTIFUNGALS - Drugs to Treat Fungal Infections		
<i>dimenhydrinate</i> TABS PO	P		Antifungal - Glucan Synthesis Inhibitors		
DRAMAMINE TABS PO (Use dimenhydrinate)	NF		BREXAFEMME	NP	
<i>meclizine hcl</i> TABS PO 12.5 MG, 25 MG, 50 MG	P	RX/OTC	Antifungals		
<i>scopolamine</i>	P		ANCOBON PO (Use <i>flucytosine</i>)	NP	
TRANSDERM-SCOP (Use <i>scopolamine</i>)	P		<i>flucytosine</i> PO	NP	
<i>trimethobenzamide hcl</i> CAPS PO	NP	QL(4 EA daily)	<i>griseofulvin microsize</i> SUSP PO	P	
Antiemetics - Miscellaneous			<i>griseofulvin microsize</i> TABS PO	P	
AKYNZEO PO	NP		<i>griseofulvin ultramicrosize</i> PO	P	
BONJESTA TBCR	NP		<i>nystatin</i> TABS PO	P	QL(6 EA daily)
DICLEGIS TBEC PO (Use <i>doxylamine-pyridoxine</i>)	NP		<i>terbinafine hcl</i> TABS PO	P	QL(1 EA daily)
<i>doxylamine-pyridoxine</i> TBEC PO	NP		Imidazole-Related Antifungals		
<i>dronabinol</i> CAPS PO	NP		CRESEMBA CAPS	NP	
EMETROL SOLN PO (Use <i>fructose-dextrose-phosphoric acid</i>)	NF		DIFLUCAN SUSR PO (Use <i>fluconazole</i>)	NP	
<i>fructose-dextrose-phosphoric acid</i> SOLN PO	P		DIFLUCAN TABS PO 50 MG, 150 MG (Use <i>fluconazole</i>)	NF	QL(1 EA daily)
MARINOL CAPS PO 5 MG, 10 MG (Use <i>dronabinol</i>)	NF		DIFLUCAN TABS PO 100 MG, 200 MG (Use <i>fluconazole</i>)	NP	QL(1 EA daily)
MARINOL CAPS PO 2.5 MG (Use <i>dronabinol</i>)	NP		<i>fluconazole</i> SUSR PO	P	
Substance P/Neurokinin 1 (NK1) Receptor Antagonists			<i>fluconazole</i> TABS PO	P	QL(1 EA daily)
<i>aprepitant</i> CAPS PO	P		<i>itraconazole</i> CAPS PO	P	QL(6 EA daily)
<i>aprepitant</i> MISC PO	P		<i>itraconazole</i> SOLN	NP	
EMEND TRI-PACK CAPS PO (Use <i>aprepitant</i>)	NP		<i>ketoconazole</i> PO	P	
EMEND CAPS PO 80 MG (Use <i>aprepitant</i>)	NP		NOXAFIL PACK	NP	
			NOXAFIL SUSP (Use <i>posaconazole</i>)	NP	
			NOXAFIL TBEC (Use <i>posaconazole</i>)	NP	
			<i>posaconazole</i> SUSP	NP	
			<i>posaconazole</i> TBEC	NP	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SPORANOX CAPS PO (Use itraconazole)	NP	QL(6 EA daily)	diphenhydramine hcl ELIX PO 12.5 MG/5ML	P	
SPORANOX SOLN (Use itraconazole)	NP		diphenhydramine hcl LIQD PO 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML	P	
TOLSURA CAPS PO	NP		diphenhydramine hcl SOLN 50 MG/ML	P	
VFEND SUSR PO (Use voriconazole)	NP		diphenhydramine hcl TABS PO 25 MG	P	AL(Up to 65 yrs old)
VFEND TABS PO (Use voriconazole)	NP		Antihistamines - Non-Sedating		
VIVJOA	NP		ALLEGRA ALLERGY TABS PO 60 MG (Use fexofenadine hcl)	NF	QL(2 EA daily)
voriconazole SUSR PO	NP		ALLEGRA ALLERGY TABS PO 180 MG (Use fexofenadine hcl)	NF	QL(1 EA daily)
voriconazole TABS PO	NP		cetirizine hcl CHEW PO 5 MG	P	
ANTIHISTAMINES - Drugs to Treat Allergies			cetirizine hcl SOLN PO	P	RX/OTC
Antihistamines - Alkylamines			cetirizine hcl SYRP PO	P	RX/OTC
chlorpheniramine maleate TABS PO	P		cetirizine hcl TABS PO	P	
CHLOR-TRIMETON TABS PO (Use chlorpheniramine maleate)	NF		CLARITIN ALLERGY CHILDRENS SOLN PO (Use loratadine)	NF	
Antihistamines - Ethanolamines			CLARITIN CHILDRENS CHEW PO (Use loratadine)	NF	
BENADRYL ALLERGY CHILDRENS LIQD PO (Use diphenhydramine hcl)	NF		CLARITIN REDITABS JUNIORS TBDP PO (Use loratadine)	NF	
BENADRYL ALLERGY ULTRATABS TABS PO (Use diphenhydramine hcl)	NF	AL(Up to 65 yrs old)	CLARITIN REDITABS TBDP PO (Use loratadine)	NF	
BENADRYL ALLERGY CAPS PO (Use diphenhydramine hcl)	NF	AL(Up to 65 yrs old)	CLARITIN REDITABS TBDP PO (Use loratadine)	NF	
BENADRYL ALLERGY TABS PO (Use diphenhydramine hcl)	NF	AL(Up to 65 yrs old)	CLARITIN CHEW PO (Use loratadine)	NF	
clemastine fumarate TABS PO 1.34 MG, 2.68 MG	P		CLARITIN SOLN PO (Use loratadine)	NF	
DAYHIST ALLERGY 12 HOUR RELIEF TABS PO	P		CLARITIN TABS PO (Use loratadine)	NF	
diphenhydramine hcl CAPS PO	P	AL(Up to 65 yrs old)			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>fexofenadine hcl TABS PO 60 MG</i>	P	QL(2 EA daily)	Antihyperlipidemics - Misc.		
<i>fexofenadine hcl TABS PO 180 MG</i>	P	QL(1 EA daily)	<i>icosapent ethyl 1 GM</i>	NP	MP
<i>loratadine CHEW PO</i>	P		<i>icosapent ethyl</i>	NP	
<i>loratadine SOLN PO</i>	P		LOVAZA PO (Use omega-3-acid ethyl esters)	NP	MP
<i>loratadine TABS PO</i>	P		<i>omega-3-acid ethyl esters PO</i>	NP	MP
<i>loratadine TBDP PO 10 MG</i>	P		<i>omega-3-acid ethyl esters PO</i>	NP	MP
ZYRTEC ALLERGY TABS PO (Use cetirizine hcl)	NF		VASCEPA 0.5 GM (Use icosapent ethyl)	NP	
ZYRTEC CHILDRENS ALLERGY CHEW PO (Use cetirizine hcl)	NF		VASCEPA 1 GM (Use icosapent ethyl)	NP	MP
ZYRTEC CHILDRENS ALLERGY SOLN PO (Use cetirizine hcl)	NF	RX/OTC	Bile Acid Sequestrants		
ZYRTEC CHEW PO 10 MG (Use cetirizine hcl)	NF		<i>cholestyramine light PACK PO</i>	P	MP
Antihistamines - Phenothiazines			<i>cholestyramine light PACK PO</i>	P	MP
<i>promethazine hcl SOLN PO 6.25 MG/5ML</i>	P		<i>cholestyramine light POWD PO</i>	P	MP
<i>promethazine hcl TABS PO</i>	P		<i>cholestyramine light POWD PO</i>	P	MP
Antihistamines - Piperidines			<i>cholestyramine PACK PO</i>	P	MP
<i>cyproheptadine hcl SYRP PO</i>	P		<i>cholestyramine POWD PO</i>	P	MP
<i>cyproheptadine hcl TABS PO</i>	P		<i>cholestyramine POWD PO</i>	P	MP
ANTIHYPERLIPIDEMICS - Drugs to Treat High Cholesterol			<i>colesevelam hcl PACK</i>	NP	MP
Adenosine Triphosphate-Citrate Lyase (ACL) Inhibitors			<i>colesevelam hcl TABS PO</i>	NP	MP
NEXLETOL	NP	QL(3 EA daily)	COLESTID FLAVORED GRAN PO (Use colestipol hcl)	NP	MP
Antihyperlipidemics - Combinations			COLESTID FLAVORED PACK PO (Use colestipol hcl)	NP	MP
<i>ezetimibe-simvastatin PO</i>	NP	MP	COLESTID GRAN PO (Use colestipol hcl)	NP	MP
NEXLIZET	NP		COLESTID PACK PO (Use colestipol hcl)	NP	MP
VYTORIN PO (Use ezetimibe-simvastatin)	NP	MP	COLESTID TABS PO (Use colestipol hcl)	NP	MP

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>colestipol hcl GRAN PO</i>	NP	MP	LIPOFEN CAPS PO (<i>Use fenofibrate</i>)	NP	MP
<i>colestipol hcl PACK PO</i>	NP	MP	LIPOFEN CAPS PO 50 MG (<i>Use fenofibrate</i>)	NF	MP
<i>colestipol hcl TABS PO</i>	NP	MP	LOPID TABS PO (<i>Use gemfibrozil</i>)	NP	QL(2 EA daily); MP
QUESTRAN LIGHT POWD PO (<i>Use cholestyramine light</i>)	NP	MP	TRICOR TABS PO (<i>Use fenofibrate</i>)	NP	MP
QUESTRAN PACK PO (<i>Use cholestyramine</i>)	NP	MP	TRILIPIX PO (<i>Use choline fenofibrate</i>)	NP	MP
QUESTRAN POWD PO (<i>Use cholestyramine</i>)	NP	MP	HMG CoA Reductase Inhibitors		
WELCHOL PACK (<i>Use colesevelam hcl</i>)	NP	MP	ALTOPREV TB24 PO 20 MG, 40 MG, 60 MG	NP	
WELCHOL TABS PO (<i>Use colesevelam hcl</i>)	NP	MP	ATORVALIQ SUSP	NP	
Fibric Acid Derivatives			<i>atorvastatin calcium TABS PO</i>	P	QL(1 EA daily); MP
ANTARA PO 90 MG (<i>Use fenofibrate micronized</i>)	NF	MP	CRESTOR TABS PO 5 MG, 10 MG, 40 MG (<i>Use rosuvastatin calcium</i>)	NF	QL(1 EA daily); MP
ANTARA PO 30 MG	NP	MP	CRESTOR TABS PO 20 MG (<i>Use rosuvastatin calcium</i>)	NP	QL(1 EA daily); MP
<i>choline fenofibrate PO</i>	P	MP	EZALLOR SPRINKLE CPSP	NP	
<i>fenofibrate micronized PO 30 MG, 43 MG, 90 MG, 130 MG</i>	P	MP	<i>fluvastatin sodium CAPS PO</i>	NP	MP
<i>fenofibrate micronized PO 67 MG</i>	P	QL(2 EA daily); MP	<i>fluvastatin sodium TB24 PO</i>	NP	MP
<i>fenofibrate micronized PO 134 MG, 200 MG</i>	P	QL(1 EA daily); MP	<i>fluvastatin sodium TB24 PO</i>	NP	MP
<i>fenofibrate CAPS PO</i>	P	MP	LESCOL XL TB24 PO (<i>Use fluvastatin sodium</i>)	NF	
<i>fenofibrate TABS PO 160 MG</i>	P	QL(1 EA daily); MP	LESCOL XL TB24 PO (<i>Use fluvastatin sodium</i>)	NP	MP
<i>fenofibrate TABS PO 54 MG</i>	P	QL(3 EA daily); MP	LIPITOR TABS PO (<i>Use atorvastatin calcium</i>)	NF	QL(1 EA daily); MP
<i>fenofibrate TABS PO 40 MG, 48 MG, 120 MG, 145 MG</i>	P	MP	LIPITOR TABS PO (<i>Use atorvastatin calcium</i>)	NP	QL(1 EA daily); MP
<i>fenofibrate TABS PO 48 MG, 145 MG</i>	P	MP	LIPITOR TABS PO (<i>Use atorvastatin calcium</i>)	NF	QL(1 EA daily)
<i>fenofibric acid PO</i>	NP	MP	LIVALO PO (<i>Use pitavastatin calcium</i>)	NP	
FENOGLIDE TABS PO (<i>Use fenofibrate</i>)	NP	MP			
<i>gemfibrozil TABS PO</i>	P	QL(2 EA daily); MP			

Drug Name	Drug Tier	Requirements/Limits
<i>lovastatin TABS PO</i>	P	QL(1 EA daily); MP
<i>pitavastatin calcium PO</i>	NP	
<i>pravastatin sodium PO</i>	P	QL(1 EA daily); MP
<i>rosuvastatin calcium TABS PO</i>	P	QL(1 EA daily); MP
<i>simvastatin TABS PO</i>	P	QL(1 EA daily); MP
ZOCOR TABS PO 10 MG, 20 MG, 40 MG (Use <i>simvastatin</i>)	NP	QL(1 EA daily); MP
ZYPITAMAG PO 2 MG, 4 MG	NP	
Intestinal Cholesterol Absorption Inhibitors		
<i>ezetimibe PO</i>	P	QL(1 EA daily); MP
ZETIA PO (Use <i>ezetimibe</i>)	NP	QL(1 EA daily); MP
Microsomal Triglyceride Transfer Protein (MTP) Inhibitors		
JUXTAPID PO 5 MG, 10 MG, 20 MG, 30 MG	NP	SP
Nicotinic Acid Derivatives		
<i>niacin (antihyperlipidemic) TBCR PO</i>	NP	MP
<i>niacin (antihyperlipidemic) TBCR PO 500 MG, 1000 MG</i>	NP	MP
Proprotein Convertase Subtilisin/Kexin Type 9 Inhibitors		
LEQVIO	NP	SP; MP
PRALUENT SOAJ	NP	SP; MP
REPATHA PUSHTRONEX SYSTEM SOCT	NP	SP; MP
REPATHA SURECLICK SOAJ	NP	SP; MP
REPATHA SOSY	NP	SP; MP
ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure		

Drug Name	Drug Tier	Requirements/Limits
ACE Inhibitors		
ACCUPRIL PO (Use <i>quinapril hcl</i>)	NP	QL(2 EA daily); MP
ALTACE CAPS PO 1.25 MG, 2.5 MG, 5 MG, 10 MG (Use <i>ramipril</i>)	NP	QL(2 EA daily); MP
<i>benazepril hcl PO</i>	P	QL(2 EA daily); MP
<i>captopril PO</i>	P	QL(3 EA daily); MP
<i>enalapril maleate SOLN</i>	NP	MP
<i>enalapril maleate TABS PO</i>	P	QL(2 EA daily); MP
EPANED SOLN (Use <i>enalapril maleate</i>)	NP	MP
<i>fosinopril sodium PO 20 MG, 40 MG</i>	P	QL(2 EA daily); MP
<i>fosinopril sodium PO 10 MG</i>	P	QL(1 EA daily); MP
<i>lisinopril TABS PO 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG</i>	P	QL(2 EA daily); MP
LOTENSIN PO 10 MG, 20 MG, 40 MG (Use <i>benazepril hcl</i>)	NP	QL(2 EA daily); MP
<i>moexipril hcl PO</i>	P	MP
<i>perindopril erbumine PO</i>	NP	MP
QBRELIS SOLN	NP	QL(5 ML daily); MP
<i>quinapril hcl PO</i>	P	QL(2 EA daily); MP
<i>ramipril CAPS PO</i>	P	QL(2 EA daily); MP
<i>trandolapril PO 1 MG, 2 MG</i>	P	QL(1 EA daily); MP
<i>trandolapril PO 4 MG</i>	P	QL(2 EA daily); MP
VASOTEC TABS PO (Use <i>enalapril maleate</i>)	NP	QL(2 EA daily); MP
ZESTRIL TABS PO (Use <i>lisinopril</i>)	NP	QL(2 EA daily); MP
Agents for Pheochromocytoma		

Drug Name	Drug Tier	Requirements/Limits
DEMSER PO (Use metyrosine)	P	SP
metyrosine PO	P	SP
phenoxybenzamine hcl PO	NP	
Angiotensin II Receptor Antagonists		
ATACAND PO (Use candesartan cilexetil)	NP	MP
AVAPRO PO (Use irbesartan)	NP	QL(1 EA daily); MP
BENICAR PO (Use olmesartan medoxomil)	NP	MP
candesartan cilexetil PO	NP	MP
COZAAR PO (Use losartan potassium)	NP	QL(2 EA daily); MP
DIOVAN TABS PO 320 MG (Use valsartan)	NP	QL(1 EA daily); MP
DIOVAN TABS PO 40 MG, 80 MG, 160 MG (Use valsartan)	NP	QL(2 EA daily); MP
EDARBI PO	NP	MP
irbesartan PO	P	QL(1 EA daily); MP
losartan potassium PO	P	QL(2 EA daily); MP
MICARDIS PO (Use telmisartan)	NP	MP
olmesartan medoxomil PO	NP	MP
olmesartan medoxomil PO	NP	MP
telmisartan PO	NP	MP
telmisartan PO	NP	MP
valsartan SOLN	P	
valsartan TABS PO 320 MG	P	QL(1 EA daily); MP
valsartan TABS PO 40 MG, 80 MG, 160 MG	P	QL(2 EA daily); MP
Antiadrenergic Antihypertensives		
CARDURA PO (Use doxazosin mesylate)	NF	MP

Drug Name	Drug Tier	Requirements/Limits
CARDURA PO (Use doxazosin mesylate)	NP	MP
clonidine hcl TABS PO	P	MP
clonidine hcl TABS PO	P	MP
clonidine PTWK	P	MP
clonidine TB24	NP	
doxazosin mesylate PO 4 MG	P	MP
doxazosin mesylate PO	P	MP
guanfacine hcl PO	P	MP
methyldopa TABS PO	P	MP
MINIPRESS CAPS PO (Use prazosin hcl)	NP	MP
prazosin hcl CAPS PO	P	MP
prazosin hcl CAPS PO	P	MP
terazosin hcl PO	P	MP
terazosin hcl PO	P	MP
Antihypertensive Combinations		
ACCURETIC PO 25 MG-20 MG (Use quinapril-hydrochlorothiazide)	NP	QL(2 EA daily); MP
ACCURETIC PO 12.5 MG-10 MG (Use quinapril-hydrochlorothiazide)	NP	QL(3 EA daily); MP
ACCURETIC PO 12.5 MG-20 MG (Use quinapril-hydrochlorothiazide)	NP	QL(4 EA daily); MP
amlodipine besylate-benazepril hcl PO 10 MG-2.5 MG, 10 MG-5 MG, 20 MG-5 MG	P	QL(2 EA daily); MP
amlodipine besylate-benazepril hcl PO 20 MG-10 MG, 40 MG-10 MG, 40 MG-5 MG	P	QL(1 EA daily); MP
amlodipine besylate-olmesartan medoxomil PO	NP	MP
amlodipine besylate-valsartan PO	NP	MP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>amlodipine-valsartan-hydrochlorothiazide PO</i>	NP	MP	<i>HYZAAR PO (Use losartan potassium & hydrochlorothiazide)</i>	NP	QL(2 EA daily); MP
<i>ATACAND HCT PO (Use candesartan cilexetil-hydrochlorothiazide)</i>	NP	MP	<i>irbesartan-hydrochlorothiazide PO</i>	P	QL(1 EA daily); MP
<i>atenolol & chlorthalidone PO</i>	P	MP	<i>lisinopril & hydrochlorothiazide PO</i>	P	QL(2 EA daily); MP
<i>AVALIDE PO (Use irbesartan-hydrochlorothiazide)</i>	NP	QL(1 EA daily); MP	<i>losartan potassium & hydrochlorothiazide PO</i>	P	QL(2 EA daily); MP
<i>AZOR PO (Use amlodipine besylate-olmesartan medoxomil)</i>	NP	MP	<i>LOTENSIN HCT PO 12.5 MG-10 MG, 12.5 MG-20 MG, 25 MG-20 MG (Use benazepril & hydrochlorothiazide)</i>	NP	MP
<i>benazepril & hydrochlorothiazide PO</i>	P	MP	<i>LOTREL PO 20 MG-10 MG, 40 MG-10 MG (Use amlodipine besylate-benazepril hcl)</i>	NP	QL(1 EA daily); MP
<i>BENICAR HCT PO (Use olmesartan medoxomil-hydrochlorothiazide)</i>	NP	MP	<i>LOTREL PO 10 MG-5 MG, 20 MG-5 MG (Use amlodipine besylate-benazepril hcl)</i>	NP	QL(2 EA daily); MP
<i>bisoprolol & hydrochlorothiazide PO</i>	P	MP	<i>metoprolol & hydrochlorothiazide TABS PO</i>	P	QL(2 EA daily); MP
<i>candesartan cilexetil-hydrochlorothiazide PO</i>	NP	MP	<i>MICARDIS HCT PO (Use telmisartan-hydrochlorothiazide)</i>	NP	MP
<i>candesartan cilexetil-hydrochlorothiazide PO</i>	NP	MP	<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide PO</i>	NP	MP
<i>captopril & hydrochlorothiazide PO</i>	P		<i>olmesartan medoxomil-hydrochlorothiazide PO</i>	NP	MP
<i>DIOVAN HCT PO (Use valsartan-hydrochlorothiazide)</i>	NP	QL(1 EA daily); MP	<i>quinapril-hydrochlorothiazide PO 12.5 MG-10 MG</i>	P	QL(3 EA daily); MP
<i>EDARBYCLOR PO</i>	NP		<i>quinapril-hydrochlorothiazide PO 12.5 MG-20 MG</i>	P	QL(4 EA daily); MP
<i>enalapril maleate & hydrochlorothiazide PO</i>	P	QL(2 EA daily); MP	<i>quinapril-hydrochlorothiazide PO 25 MG-20 MG</i>	P	QL(2 EA daily); MP
<i>EXFORGE PO (Use amlodipine besylate-valsartan)</i>	NP	MP	<i>TEKTURNA HCT PO 12.5 MG-300 MG, 25 MG-300 MG</i>	NP	
<i>EXFORGE HCT PO (Use amlodipine-valsartan-hydrochlorothiazide)</i>	NP	MP			
<i>fosinopril sodium & hydrochlorothiazide PO 12.5 MG-10 MG</i>	P	QL(2 EA daily); MP			
<i>fosinopril sodium & hydrochlorothiazide PO 12.5 MG-20 MG</i>	P	QL(4 EA daily); MP			

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Drug Name	Drug Tier	Requirements/Limits
<i>telmisartan-amlodipine PO</i>	NP	MP
<i>telmisartan-hydrochlorothiazide PO</i>	NP	MP
TENORETIC 100 PO (Use <i>atenolol & chlorthalidone</i>)	NF	
TENORETIC 100 PO (Use <i>atenolol & chlorthalidone</i>)	NP	MP
TENORETIC 50 PO (Use <i>atenolol & chlorthalidone</i>)	NF	
TENORETIC 50 PO (Use <i>atenolol & chlorthalidone</i>)	NP	MP
<i>trandolapril-verapamil hcl PO</i>	P	MP
TRIBENZOR PO (Use <i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>)	NP	MP
<i>valsartan-hydrochlorothiazide PO</i>	P	QL(1 EA daily); MP
VASERETIC PO 25 MG-10 MG (Use <i>enalapril maleate & hydrochlorothiazide</i>)	NP	QL(2 EA daily); MP
ZESTORETIC PO (Use <i>lisinopril & hydrochlorothiazide</i>)	NP	QL(2 EA daily); MP
ZIAC PO (Use <i>bisoprolol & hydrochlorothiazide</i>)	NP	MP
Direct Renin Inhibitors		
<i>aliskiren fumarate PO</i>	NP	MP
TEKTURNA PO (Use <i>aliskiren fumarate</i>)	NP	MP
Selective Aldosterone Receptor Antagonists (SARAs)		
<i>eplerenone PO</i>	NP	MP
INSPIRA PO (Use <i>eplerenone</i>)	NF	
INSPIRA PO (Use <i>eplerenone</i>)	NP	MP

Drug Name	Drug Tier	Requirements/Limits
INSPIRA PO (Use <i>eplerenone</i>)	NF	MP
Vasodilators		
<i>hydralazine hcl TABS PO</i>	P	MP
<i>hydralazine hcl TABS PO</i>	P	MP
<i>minoxidil PO 2.5 MG, 10 MG</i>	P	MP
ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections		
Anti-infective Agents - Misc.		
FLAGYL CAPS PO (Use <i>metronidazole</i>)	NP	
LIKMEZ SUSP	NP	
<i>metronidazole CAPS PO</i>	NP	
<i>metronidazole TABS PO</i>	P	
NEBUPENT IN (Use <i>pentamidine isethionate</i>)	P	
<i>pentamidine isethionate IN</i>	P	
<i>tinidazole PO</i>	NP	
<i>trimethoprim TABS PO</i>	P	
XIFAXAN PO	NP	
Anti-infective Misc. - Combinations		
BACTRIM DS TABS PO (Use <i>sulfamethoxazole-trimethoprim</i>)	NP	
BACTRIM TABS PO (Use <i>sulfamethoxazole-trimethoprim</i>)	NP	
<i>methenamine-hyoscamine-methylene blue-sodium phosphate TABS PO</i>	NP	
<i>methenamine-hyosc-methylene blue-benzoic acid-phenyl sal PO</i>	NP	
<i>methenamine-hyosc-methylene blue-sod phosph-phenyl sal CAPS PO</i>	NP	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>methenamine-hyosc-methylene blue-sod phosph-phenyl sal TABS PO 81.6 MG</i>	NP		CLEOCIN PO (<i>Use clindamycin palmitate hydrochloride</i>)	NP	QL(30 ML daily); 1 max fill(s) per 30 day(s) retail
<i>sulfamethoxazole-trimethoprim SUSP PO</i>	P		<i>clindamycin hcl PO</i>	P	
<i>sulfamethoxazole-trimethoprim TABS PO</i>	P		<i>clindamycin palmitate hydrochloride PO</i>	P	QL(30 ML daily); 1 max fill(s) per 30 day(s) retail
URIBEL PO	NP		Monobactams		
UROGESIC-BLUE TABS PO (<i>Use methenamine-hyoscamine-methylene blue-sodium phosphate</i>)	NP		CAYSTON	NP	SP
Antiprotozoal Agents			Oxazolidinones		
<i>atovaquone PO</i>	P		<i>linezolid SUSR</i>	NP	
LAMPIT	NP		<i>linezolid TABS PO</i>	NP	
MEPRON PO (<i>Use atovaquone</i>)	NP		SIVEXTRO TABS	NP	
<i>nitazoxanide TABS PO</i>	NP		ZYVOX SUSR (<i>Use linezolid</i>)	NP	
Glycopeptides			ZYVOX TABS PO (<i>Use linezolid</i>)	NP	
FIRVANQ SOLR PO (<i>Use vancomycin hcl</i>)	NP		Urinary Anti-infectives		
VANCOGIN CAPS PO 250 MG (<i>Use vancomycin hcl</i>)	NP	QL(8 EA daily)	<i>fosfomycin tromethamine</i>	P	
VANCOGIN CAPS PO 125 MG (<i>Use vancomycin hcl</i>)	NP	QL(4 EA daily)	HIPREX PO (<i>Use methenamine hippurate</i>)	NP	
<i>vancomycin hcl CAPS PO 250 MG</i>	P	QL(8 EA daily)	MACROBID PO (<i>Use nitrofurantoin monohyd macro</i>)	NP	
<i>vancomycin hcl CAPS PO 125 MG</i>	P	QL(4 EA daily)	MACRODANTIN PO (<i>Use nitrofurantoin macrocrystal</i>)	NP	
<i>vancomycin hcl SOLR PO 25 MG/ML, 50 MG/ML, 250 MG/5ML</i>	P		<i>methenamine hippurate PO</i>	P	
Leprostatics			<i>methenamine mandelate</i>	P	
<i>dapsone PO</i>	P		MONUROL (<i>Use fosfomycin tromethamine</i>)	NF	
Lincosamides			<i>nitrofurantoin PO 25 MG/5ML</i>	P	
CLEOCIN PO (<i>Use clindamycin hcl</i>)	NP		NITROFURANTOIN PO	P	
			<i>nitrofurantoin macrocrystal PO</i>	P	
			<i>nitrofurantoin monohyd macro PO</i>	P	

Drug Name	Drug Tier	Requirements/Limits
ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)		
Antimalarial Combinations		
<i>atovaquone-proguanil hcl PO</i>	P	
COARTEM	NP	
MALARONE PO (<i>Use atovaquone-proguanil hcl</i>)	NP	
Antimalarials		
<i>chloroquine phosphate TABS PO 250 MG</i>	P	QL(2 EA daily)
<i>chloroquine phosphate TABS PO 500 MG</i>	P	
DARAPRIM PO (<i>Use pyrimethamine</i>)	NP	SP
DARAPRIM PO (<i>Use pyrimethamine</i>)	NF	SP
<i>hydroxychloroquine sulfate PO</i>	P	
KRINTAFEL	NP	
<i>mefloquine hcl PO</i>	P	
<i>primaquine phosphate TABS PO</i>	P	
PRIMAQUINE PHOSPHATE TABS PO (<i>Use primaquine phosphate</i>)	P	
<i>pyrimethamine PO</i>	NP	SP
QUALAQUIN CAPS PO (<i>Use quinine sulfate</i>)	NP	
QUALAQUIN CAPS PO (<i>Use quinine sulfate</i>)	NF	
<i>quinine sulfate CAPS PO 324 MG</i>	NP	
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
Antimyasthenic/Cholinergic Agents		
FIRDAPSE	NP	SP

Drug Name	Drug Tier	Requirements/Limits
MESTINON SOLN PO (<i>Use pyridostigmine bromide</i>)	NP	MP
MESTINON TABS PO (<i>Use pyridostigmine bromide</i>)	NP	
MESTINON TBCR PO (<i>Use pyridostigmine bromide</i>)	NP	QL(2 EA daily)
<i>pyridostigmine bromide SOLN PO</i>	P	MP
<i>pyridostigmine bromide TABS PO</i>	P	
<i>pyridostigmine bromide TBCR PO</i>	P	QL(2 EA daily)
ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)		
Antimycobacterial Agents		
<i>cycloserine PO</i>	P	
<i>ethambutol hcl TABS PO</i>	P	
<i>isoniazid SYRP PO</i>	P	
<i>isoniazid TABS PO</i>	P	
MYAMBUTOL TABS PO 400 MG (<i>Use ethambutol hcl</i>)	NP	
MYCOBUTIN PO (<i>Use rifabutin</i>)	NP	
PRETOMANID	NP	QL(1 EA daily)
PRIFTIN PO	P	
<i>pyrazinamide PO</i>	P	
<i>rifabutin PO</i>	P	
<i>rifampin CAPS PO</i>	P	
SIRTURO	NP	
TRECTOR PO	P	
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer		
Alkylating Agents		
<i>cyclophosphamide CAPS</i>	P	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CYCLOPHOSPHAMIDE TABS PO	P		LENVIMA (12 MG DAILY DOSE)	NP	SP
LEUKERAN PO	P		LENVIMA (14 MG DAILY DOSE)	NP	SP
<i>melphalan PO</i>	P		LENVIMA (18 MG DAILY DOSE)	NP	SP
MYLERAN TABS PO	P		LENVIMA (20 MG DAILY DOSE)	NP	SP
TEMODAR CAPS PO 250 MG (Use temozolomide)	NF	QL(2 EA daily); SP	LENVIMA (24 MG DAILY DOSE)	NP	SP
<i>temozolomide CAPS PO 5 MG, 20 MG, 100 MG, 140 MG, 180 MG</i>	P	SP	LENVIMA (4 MG DAILY DOSE)	NP	SP
<i>temozolomide CAPS PO 180 MG, 250 MG</i>	P	QL(2 EA daily); SP	LENVIMA (8 MG DAILY DOSE)	NP	SP
Antimetabolites			Antineoplastic - Anti-HER2 Agents		
<i>capecitabine PO</i>	NP	SP	TUKYSA	NP	QL(3 EA daily); SP
JYLAMVO SOLN	NP	SP	Antineoplastic - BCL-2 Inhibitors		
<i>mercaptopurine TABS PO</i>	P		VENCLEXTA STARTING PACK TBPK	NP	SP
<i>methotrexate sodium SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML</i>	P		VENCLEXTA TABS	NP	SP
METHOTREXATE SODIUM SOLN 50 MG/2ML	P		Antineoplastic - EGFR Inhibitors		
<i>methotrexate sodium TABS PO 2.5 MG</i>	P		<i>erlotinib hcl</i>	P	SP
ONUREG TABS	NP	SP	EXKIVITY	NP	SP
PURIXAN SUSP	NP	MP	<i>gefitinib</i>	P	SP
TABLOID PO	P	SP	GILOTRIF	NP	SP
TREXALL TABS PO 5 MG, 7.5 MG, 10 MG, 15 MG	P		IRESSA (Use gefitinib)	P	SP
XATMEP SOLN	NP	MP	TAGRISO	NP	SP
XELODA PO (Use capecitabine)	NP	SP	TARCEVA (Use erlotinib hcl)	NP	SP
Antineoplastic - Angiogenesis Inhibitors			VIZIMPRO	NP	SP
FRUZAQLA	NP	SP	Antineoplastic - Hedgehog Pathway Inhibitors		
INLYTA	NP	SP	DAURISMO	NP	SP
LENVIMA (10 MG DAILY DOSE)	NP	SP	ERIVEDGE	P	SP
			ODOMZO PO	NP	SP
			Antineoplastic - Hormonal and Related Agents		
			<i>abiraterone acetate</i>	P	SP
			AKEEGA	NP	SP

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>anastrozole PO</i>	P	QL(1 EA daily); AL(At least 40 yrs old)	Antineoplastic - Immunomodulators		
ARIMIDEX PO (<i>Use anastrozole</i>)	NP	QL(1 EA daily); AL(At least 40 yrs old)	POMALYST	NP	SP
AROMASIN PO (<i>Use exemestane</i>)	NP	AL(At least 40 yrs old)	Antineoplastic - PDGFR-alpha Inhibitors		
<i>bicalutamide PO</i>	P	QL(3 EA daily)	AYVAKIT	NP	SP
CASODEX PO (<i>Use bicalutamide</i>)	NP	QL(3 EA daily)	Antineoplastic - XPO1 Inhibitors		
EMCYT PO	P	SP	XPOVIO (100 MG ONCE WEEKLY) PO 50 MG	NP	SP
ERLEADA	NP	SP	XPOVIO (40 MG ONCE WEEKLY) PO 40 MG	NP	SP
<i>exemestane PO</i>	P	AL(At least 40 yrs old)	XPOVIO (40 MG TWICE WEEKLY) PO 40 MG	NP	SP
FARESTON PO (<i>Use toremifene citrate</i>)	NP		XPOVIO (60 MG ONCE WEEKLY) PO 60 MG	NP	SP
FEMARA PO (<i>Use letrozole</i>)	NP	QL(1 EA daily); AL(At least 40 yrs old)	XPOVIO (60 MG TWICE WEEKLY) PO	NP	SP
<i>flutamide PO</i>	P		XPOVIO (80 MG ONCE WEEKLY) PO 40 MG	NP	SP
<i>letrozole PO</i>	P	QL(1 EA daily); AL(At least 40 yrs old)	XPOVIO (80 MG TWICE WEEKLY) PO	NP	SP
LYSODREN PO	P	SP	Antineoplastic Combinations		
<i>megestrol acetate SUSP PO</i>	P	MP	INQOVI	NP	SP
<i>megestrol acetate TABS PO</i>	P		KISQALI FEMARA (200 MG DOSE)	NP	SP
<i>nilutamide PO</i>	P		KISQALI FEMARA (400 MG DOSE)	NP	SP
NUBEQA	NP	SP	KISQALI FEMARA (600 MG DOSE)	NP	SP
ORGOVYX	NP	SP	LONSURF	NP	SP
ORSERDU	P	SP	Antineoplastic Enzyme Inhibitors		
SOLTAMOX SOLN PO	P	MP	AFINITOR DISPERZ TBSO (<i>Use everolimus</i>)	NP	SP
<i>tamoxifen citrate TABS PO</i>	P	QL(2 EA daily)	AFINITOR TABS (<i>Use everolimus</i>)	NP	SP
<i>toremifene citrate PO</i>	P		ALECENSA	NP	SP
XTANDI CAPS	NP	SP	ALUNBRIG TABS PO	NP	SP
XTANDI TABS	NP	SP	ALUNBRIG TBPk	NP	SP
YONSA	NP	SP	AUGTYRO PO 40 MG	NP	SP
ZYTIGA (<i>Use abiraterone acetate</i>)	NP	SP	BALVERSA	NP	SP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
BOSULIF CAPS	NP	SP	KOSELUGO	NP	QL(3 EA daily); SP
BOSULIF TABS	NP	SP	KRAZATI	NP	SP
BRAFTOVI PO 75 MG	NP	SP	<i>lapatinib ditosylate</i>	NP	SP
BRUKINSA	NP	SP	LORBRENA	NP	SP
CABOMETYX TABS PO	NP	SP	LUMAKRAS 120 MG, 320 MG	NP	SP
CALQUENCE	NP	SP	LYNPARZA TABS PO	NP	SP
CALQUENCE	NP	SP	LYTGOBI (12 MG DAILY DOSE)	NP	SP
CAPRELSA PO	P	SP	LYTGOBI (16 MG DAILY DOSE)	NP	SP
COMETRIQ (100 MG DAILY DOSE) KIT	NP	SP	LYTGOBI (20 MG DAILY DOSE)	NP	SP
COMETRIQ (140 MG DAILY DOSE) KIT	NP	SP	MEKINIST SOLR	NP	SP
COMETRIQ (60 MG DAILY DOSE) KIT	NP	SP	MEKINIST TABS PO	NP	SP
COPIKTRA PO	NP	SP	MEKTOVI	NP	SP
COTELLIC	NP	SP	NERLYNX	NP	SP
<i>everolimus TABS</i>	NP	SP	NEXAVAR PO (<i>Use sorafenib tosylate</i>)	NF	
<i>everolimus TBSO</i>	NP	SP	NEXAVAR PO (<i>Use sorafenib tosylate</i>)	P	SP
FOTIVDA	NP	SP	NINLARO	NP	SP
GAVRETO	NP	SP	OJJAARA	NP	SP
GLEEVEC PO (<i>Use imatinib mesylate</i>)	NP	SP	<i>pazopanib hcl</i>	P	SP
GLEEVEC PO 400 MG (<i>Use imatinib mesylate</i>)	NF		PEMAZYRE	NP	QL(3 EA daily); SP
IBRANCE CAPS	NP	SP	PIQRAY (200 MG DAILY DOSE)	NP	SP
IBRANCE TABS	NP	SP	PIQRAY (250 MG DAILY DOSE)	NP	SP
ICLUSIG PO	NP	SP	PIQRAY (300 MG DAILY DOSE)	NP	SP
IDHIFA	NP	SP	QINLOCK	NP	SP
<i>imatinib mesylate PO</i>	NP	SP	RETEVMO CAPS	NP	SP
IMBRUVICA CAPS	NP	SP	REZLIDHIA	NP	SP
IMBRUVICA SUSP	NP	SP	ROZLYTREK CAPS	NP	SP
IMBRUVICA TABS	NP	SP	ROZLYTREK PACK	NP	SP
INREBIC	NP	SP	RUBRACA	NP	SP
JAKAFI	P	SP	RYDAPT	NP	SP
JAYPIRCA	NP	SP			
KISQALI (200 MG DOSE)	NP	SP			
KISQALI (400 MG DOSE)	NP	SP			
KISQALI (600 MG DOSE)	NP	SP			

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Drug Name	Drug Tier	Requirements/Limits
SCEMBLIX 20 MG, 40 MG	NP	SP
<i>sorafenib tosylate PO</i>	P	SP
SPRYCEL (<i>Use dasatinib</i>)	NP	SP
STIVARGA	NP	SP
<i>sunitinib malate PO</i>	P	SP
SUTENT PO (<i>Use sunitinib malate</i>)	P	SP
TABRECTA	NP	QL(3 EA daily); SP
TAFINLAR CAPS PO	NP	SP
TAFINLAR TBSO	NP	SP
TALZENNA	NP	SP
TASIGNA	NP	SP
TAZVERIK	NP	SP
TEPMETKO	NP	SP
TIBSOVO	NP	SP
TRUQAP TABS	NP	SP
TURALIO PO 125 MG	NP	SP
TYKERB (<i>Use lapatinib ditosylate</i>)	NP	SP
VANFLYTA	NP	SP
VERZENIO	NP	SP
VITRAKVI CAPS PO	NP	SP
VITRAKVI SOLN	NP	SP; MP
VONJO	NP	SP
VOTRIENT (<i>Use pazopanib hcl</i>)	P	SP
VOTRIENT	P	SP
XALKORI CAPS	NP	SP
XALKORI CPSP	NP	SP
XOSPATA	NP	SP
ZEJULA CAPS PO	NP	SP
ZEJULA TABS	NP	SP
ZELBORAF PO	NP	SP
ZOLINZA	NP	SP
ZYDELIG	NP	SP
ZYKADIA TABS	NP	SP

Drug Name	Drug Tier	Requirements/Limits
Antineoplastics Misc.		
<i>bexarotene PO</i>	P	SP
HYDREA PO (<i>Use hydroxyurea</i>)	NP	
<i>hydroxyurea PO</i>	P	
MATULANE PO	P	SP
TARGRETIN PO (<i>Use bexarotene</i>)	NP	SP
<i>tretinoin (chemotherapy) PO</i>	P	SP
Chemotherapy Rescue/Antidote/Protective Agents		
IWILFIN	NP	SP
<i>leucovorin calcium TABS PO</i>	P	
MESNEX TABS PO	P	SP
Mitotic Inhibitors		
<i>etoposide CAPS PO</i>	P	SP
Topoisomerase I Inhibitors		
HYCAMTIN CAPS PO	P	SP
ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease		
Antiparkinson Adjunctive Therapy		
<i>carbidopa PO</i>	P	MP
LODOSYN PO (<i>Use carbidopa</i>)	NP	MP
NOURIANZ PO	NP	
Antiparkinson Anticholinergics		
<i>benztropine mesylate TABS PO</i>	P	MP
<i>benztropine mesylate TABS PO</i>	P	MP
<i>trihexyphenidyl hcl SOLN</i>	P	MP
<i>trihexyphenidyl hcl TABS PO</i>	P	MP
Antiparkinson COMT Inhibitors		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
COMTAN PO (<i>Use entacapone</i>)	NP	MP	NEUPRO	NP	
<i>entacapone PO</i>	P	MP	OSMOLEX ER TB24 129 MG, 193 MG	NP	MP
ONGENTYS	NP		PARLODEL CAPS PO (<i>Use bromocriptine mesylate</i>)	NP	MP
TASMAR PO (<i>Use tolcapone</i>)	NP	MP	PARLODEL TABS PO (<i>Use bromocriptine mesylate</i>)	NP	MP
<i>tolcapone PO</i>	NP	MP	<i>pramipexole dihydrochloride TABS PO</i>	P	QL(3 EA daily); MP
Antiparkinson Dopaminergics			<i>pramipexole dihydrochloride TB24 PO</i>	NP	MP
<i>amantadine hcl CAPS PO</i>	P	MP	<i>ropinirole hydrochloride TABS PO 5 MG</i>	P	QL(5 EA daily); MP
<i>amantadine hcl CAPS PO</i>	P	MP	<i>ropinirole hydrochloride TABS PO 0.25 MG, 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG</i>	P	QL(3 EA daily); MP
<i>amantadine hcl SOLN</i>	P	MP	<i>ropinirole hydrochloride TB24 PO</i>	NP	MP
<i>amantadine hcl SOLN</i>	P	MP	RYTARY CPCR PO	NP	MP
<i>amantadine hcl TABS PO</i>	P	MP	SINEMET TABS PO 100 MG-10 MG, 100 MG-25 MG (<i>Use carbidopa-levodopa</i>)	NP	MP
APOKYN SOCT	NP	SP; MP	STALEVO 100 PO (<i>Use carbidopa-levodopa-entacapone</i>)	NP	MP
<i>apomorphine hydrochloride SOCT</i>	NP	SP; MP	STALEVO 125 PO (<i>Use carbidopa-levodopa-entacapone</i>)	NP	MP
<i>bromocriptine mesylate CAPS PO</i>	P	MP	STALEVO 150 PO (<i>Use carbidopa-levodopa-entacapone</i>)	NP	MP
<i>bromocriptine mesylate TABS PO 2.5 MG</i>	P	MP	STALEVO 200 PO (<i>Use carbidopa-levodopa-entacapone</i>)	NP	MP
<i>carbidopa-levodopa-entacapone PO</i>	NP	MP	STALEVO 50 PO (<i>Use carbidopa-levodopa-entacapone</i>)	NP	MP
<i>carbidopa-levodopa TABS PO</i>	P	MP			
<i>carbidopa-levodopa TBCR PO</i>	P	MP			
<i>carbidopa-levodopa TBCR PO</i>	P	MP			
<i>carbidopa-levodopa TBDP PO</i>	NP	MP			
DHIVY TABS PO	NP	MP			
GOCOVRI CP24	NP	SP; MP			
INBRIJA CAPS	NP				
MIRAPEX ER TB24 PO 1.5 MG (<i>Use pramipexole dihydrochloride</i>)	NF	MP			
MIRAPEX ER TB24 PO 0.375 MG, 0.75 MG, 2.25 MG, 3 MG, 3.75 MG, 4.5 MG (<i>Use pramipexole dihydrochloride</i>)	NP	MP			

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Drug Name	Drug Tier	Requirements/Limits
STALEVO 75 PO (<i>Use carbidopa-levodopa-entacapone</i>)	NP	MP
Antiparkinson Monoamine Oxidase Inhibitors		
AZILECT PO (<i>Use rasagiline mesylate</i>)	NP	MP
<i>rasagiline mesylate PO</i>	NP	MP
<i>selegiline hcl CAPS PO</i>	P	MP
<i>selegiline hcl TABS PO</i>	P	MP
XADAGO	NP	
ZELAPAR TBDP	NP	MP
ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders		
Antimanic Agents		
<i>lithium PO</i>	P	MP
<i>lithium carbonate CAPS PO</i>	P	MP
<i>lithium carbonate TABS PO</i>	P	MP
<i>lithium carbonate TBCR PO</i>	P	MP
LITHOBID TBCR PO (<i>Use lithium carbonate</i>)	NP	MP
Antipsychotics - Misc.		
CAPLYTA 10.5 MG, 21 MG	NP	
CAPLYTA 42 MG	NP	QL(3 EA daily)
EQUETRO PO	NP	
GEODON PO 20 MG, 60 MG, 80 MG (<i>Use ziprasidone hcl</i>)	NF	QL(2 EA daily); MP
GEODON (<i>Use ziprasidone mesylate</i>)	NF	
GEODON (<i>Use ziprasidone mesylate</i>)	NP	
GEODON (<i>Use ziprasidone mesylate</i>)	NF	
GEODON PO (<i>Use ziprasidone hcl</i>)	NP	QL(2 EA daily); MP

Drug Name	Drug Tier	Requirements/Limits
LATUDA PO 40 MG, 80 MG (<i>Use lurasidone hcl</i>)	NF	AL(At least 8 yrs old)
LATUDA PO (<i>Use lurasidone hcl</i>)	NP	AL(At least 8 yrs old)
<i>lurasidone hcl PO</i>	P	AL(At least 8 yrs old)
NUPLAZID CAPS	NP	AL(At least 8 yrs old)
NUPLAZID TABS PO 10 MG	NP	AL(At least 8 yrs old)
VRAYLAR CAPS	NP	AL(At least 8 yrs old)
VRAYLAR CPPK	NP	AL(At least 8 yrs old)
<i>ziprasidone hcl PO</i>	P	QL(2 EA daily); MP
<i>ziprasidone mesylate</i>	NP	
Benzisoxazoles		
FANAPT PO	NP	QL(2 EA daily); AL(At least 8 yrs old)
FANAPT TITRATION PACK PO	NP	QL(0.27 EA daily); AL(At least 8 yrs old)
INVEGA PO 3 MG, 6 MG, 9 MG (<i>Use paliperidone</i>)	NP	AL(At least 8 yrs old); MP
INVEGA PO 1.5 MG (<i>Use paliperidone</i>)	NF	AL(At least 8 yrs old); MP
INVEGA HAFYERA	P	AL(At least 18 yrs old); SP; MP; PA
INVEGA SUSTENNA	P	AL(At least 18 yrs old); SP; MP; PA
INVEGA TRINZA	P	AL(At least 18 yrs old); SP; MP; PA
<i>paliperidone PO</i>	NP	AL(At least 8 yrs old); MP
<i>paliperidone PO</i>	NP	AL(At least 8 yrs old); MP
PERSERIS PRSY	P	AL(At least 8 yrs old); SP; MP; PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
RISPERDAL CONSTA 50 MG (Use risperidone microspheres)	NF	SP	clozapine TABS PO 100 MG	P	QL(9 EA daily); MP
RISPERDAL CONSTA (Use risperidone microspheres)	NP	SP	clozapine TABS PO 25 MG, 50 MG, 200 MG	P	QL(3 EA daily); MP
RISPERDAL SOLN PO (Use risperidone)	NP	MP	clozapine TBDP PO 150 MG, 200 MG	NP	AL(At least 8 yrs old); MP
RISPERDAL TABS PO 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG (Use risperidone)	NP	QL(4 EA daily); MP	clozapine TBDP PO	NP	AL(At least 8 yrs old); MP
risperidone microspheres	NP	SP	CLOZARIL TABS PO 50 MG, 200 MG (Use clozapine)	NF	QL(3 EA daily); MP
risperidone SOLN PO	P	MP	CLOZARIL TABS PO 100 MG (Use clozapine)	NP	QL(9 EA daily); MP
risperidone TABS PO	P	QL(4 EA daily); MP	CLOZARIL TABS PO 25 MG (Use clozapine)	NP	QL(3 EA daily); MP
risperidone TBDP PO	NP	MP	loxapine succinate PO	P	MP
RYKINDO SRER	NP	SP	olanzapine SOLR	NP	
UZEDY SUSY	P	AL(At least 18 yrs old); SP; PA	olanzapine TABS PO 2.5 MG, 5 MG	P	QL(4 EA daily); MP
Butyrophenones			olanzapine TABS PO 7.5 MG, 10 MG, 15 MG, 20 MG	P	QL(2 EA daily); MP
HALDOL DECANOATE (Use haloperidol decanoate)	NF		olanzapine TBDP PO 5 MG, 15 MG, 20 MG	P	MP
haloperidol decanoate	P		olanzapine TBDP PO 10 MG	P	AL(At least 8 yrs old); MP
haloperidol lactate CONC PO	P	MP	olanzapine TBDP PO 5 MG, 15 MG, 20 MG	P	MP
haloperidol TABS PO 2 MG, 5 MG, 20 MG	P	MP	olanzapine TBDP PO 10 MG	P	AL(At least 8 yrs old); MP
haloperidol TABS PO 0.5 MG, 1 MG, 10 MG	P	QL(3 EA daily); MP	quetiapine fumarate TABS PO 300 MG, 400 MG	P	QL(2 EA daily); MP
haloperidol TABS PO 2 MG, 5 MG	P	MP	quetiapine fumarate TABS PO 25 MG, 50 MG, 100 MG, 150 MG, 200 MG	P	QL(4 EA daily); MP
Dibenzapines			quetiapine fumarate TB24 PO 300 MG	P	QL(4 EA daily); MP
ADASUVE	NP		quetiapine fumarate TB24 PO 50 MG, 150 MG, 200 MG, 400 MG	P	QL(3 EA daily); MP
asenapine maleate 5 MG	NP	MP	SAPHRIS 5 MG (Use asenapine maleate)	NP	MP
asenapine maleate 2.5 MG	NP	AL(At least 8 yrs old); MP			
asenapine maleate 2.5 MG, 10 MG	NP	AL(At least 8 yrs old); MP			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SAPHRIS 2.5 MG, 10 MG (Use asenapine maleate)	NP	AL(At least 8 yrs old); MP	Phenothiazines		
SAPHRIS 5 MG (Use asenapine maleate)	NF	MP	chlorpromazine hcl CONC PO	P	MP
SAPHRIS 10 MG (Use asenapine maleate)	NF	AL(At least 8 yrs old); MP	chlorpromazine hcl TABS PO 10 MG, 25 MG, 50 MG, 200 MG	P	QL(4 EA daily); MP
SECUADO	NP	QL(1 EA daily)	chlorpromazine hcl TABS PO 100 MG	P	QL(5 EA daily); MP
SEROQUEL XR TB24 PO 300 MG (Use quetiapine fumarate)	NP	QL(4 EA daily); MP	fluphenazine hcl CONC PO	P	
SEROQUEL XR TB24 PO 50 MG, 150 MG, 200 MG, 400 MG (Use quetiapine fumarate)	NP	QL(3 EA daily); MP	fluphenazine hcl ELIX PO	P	MP
SEROQUEL TABS PO 300 MG, 400 MG (Use quetiapine fumarate)	NP	QL(2 EA daily); MP	fluphenazine hcl SOLN	P	
SEROQUEL TABS PO 25 MG, 50 MG, 100 MG, 200 MG (Use quetiapine fumarate)	NP	QL(4 EA daily); MP	fluphenazine hcl TABS PO	P	MP
VERSACLOZ SUSP PO	NP	AL(At least 8 yrs old); MP	perphenazine TABS PO	P	QL(4 EA daily); MP
ZYPREXA RELPREVV	NP	AL(At least 8 yrs old); SP	prochlorperazine PR	P	
ZYPREXA ZYDIS TBDP PO 10 MG (Use olanzapine)	NP	AL(At least 8 yrs old); MP	prochlorperazine maleate TABS PO	P	
ZYPREXA ZYDIS TBDP PO 5 MG, 15 MG, 20 MG (Use olanzapine)	NP	MP	thioridazine hcl PO 10 MG, 25 MG, 50 MG	P	QL(4 EA daily); MP
ZYPREXA SOLR (Use olanzapine)	NP	AL(At least 8 yrs old)	thioridazine hcl PO 100 MG	P	QL(8 EA daily); MP
ZYPREXA TABS PO 2.5 MG, 5 MG (Use olanzapine)	NP	QL(4 EA daily); MP	trifluoperazine hcl TABS PO	P	QL(3 EA daily); MP
ZYPREXA TABS PO 7.5 MG, 10 MG, 15 MG, 20 MG (Use olanzapine)	NP	QL(2 EA daily); MP	Quinolinone Derivatives		
ZYPREXA TABS PO 20 MG (Use olanzapine)	NF		ABILIFY ASIMTUFII PRSY	P	AL(At least 18 yrs old); SP; PA
Dihydroindolones			ABILIFY MAINTENA PRSY	P	AL(At least 18 yrs old); SP; MP; PA
molindone hcl PO 5 MG, 25 MG	NP	MP	ABILIFY MAINTENA SRER	P	AL(At least 18 yrs old); SP; MP; PA
			ABILIFY MYCITE MAINTENANCE KIT	NP	AL(At least 8 yrs old); SP
			ABILIFY MYCITE STARTER KIT	NP	AL(At least 8 yrs old); SP
			ABILIFY TABS PO (Use aripiprazole)	NP	QL(1 EA daily); AL(At least 6 yrs old); MP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>aripiprazole SOLN PO</i>	NP	QL(20 ML daily); AL(At least 6 yrs old); MP	<i>atazanavir sulfate CAPS PO 200 MG</i>	P	QL(2 EA daily); MP
<i>aripiprazole TABS PO</i>	P	QL(1 EA daily); AL(At least 6 yrs old); MP	<i>ATRIPLA PO (Use efavirenz-emtricitabine-tenofovir disoproxil fumarate)</i>	P	MP
<i>aripiprazole TBDP PO</i>	NP	AL(At least 8 yrs old); MP	BIKTARVY	P	QL(1 EA daily); MP
ARISTADA	P	AL(At least 8 yrs old); SP; MP; PA	CABENUVA	P	MP; PA
ARISTADA INITIO	P	AL(At least 8 yrs old); SP; PA	CIMDUO	NP	MP
REXULTI	NP	QL(1 EA daily); AL(At least 8 yrs old)	COMBIVIR PO (Use lamivudine-zidovudine)	NP	QL(2 EA daily); MP
Thioxanthenes			COMPLERA	P	QL(1 EA daily); MP
<i>thiothixene PO 10 MG</i>	P	QL(6 EA daily); MP	<i>darunavir TABS 600 MG</i>	P	QL(2 EA daily); MP
<i>thiothixene PO 1 MG, 2 MG, 5 MG</i>	P	QL(3 EA daily); MP	<i>darunavir TABS 800 MG</i>	P	QL(1 EA daily); MP
ANTISEPTICS & DISINFECTANTS			DELSTRIGO	P	QL(1 EA daily); MP
Iodine Antiseptics			DESCOVY	P	
BETADINE SOLN (Use povidone-iodine)	NF		DOVATO	P	QL(1 EA daily); MP
FIRST AID ANTISEPTIC OINT	P		EDURANT	P	MP
<i>povidone-iodine SOLN 10 %</i>	P		<i>efavirenz CAPS PO 50 MG</i>	P	QL(2 EA daily); MP
ANTIVIRALS - Drugs to Treat Viral Infections			<i>efavirenz CAPS PO 200 MG</i>	P	QL(1 EA daily); MP
Antiretrovirals			<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate PO</i>	P	QL(1 EA daily); MP
<i>abacavir sulfate-lamivudine PO</i>	P	MP	<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	NP	QL(1 EA daily); MP
<i>abacavir sulfate SOLN PO</i>	P	MP	<i>efavirenz TABS PO</i>	P	QL(1 EA daily); MP
<i>abacavir sulfate TABS PO</i>	P	QL(2 EA daily); MP	<i>emtricitabine CAPS PO</i>	P	QL(1 EA daily); MP
APRETUDE	P		<i>emtricitabine-tenofovir disoproxil fumarate PO</i>	P	MP
APRETUDE	NP		<i>emtricitabine-tenofovir disoproxil fumarate PO 200 MG-300 MG</i>	P	MP
APTIVUS CAPS	P	MP	EMTRIVA CAPS PO (Use emtricitabine)	P	QL(1 EA daily); MP
<i>atazanavir sulfate CAPS PO 150 MG, 300 MG</i>	P	QL(1 EA daily); MP			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
EMTRIVA SOLN	P	MP	KALETRA TABS PO 25 MG-100 MG (Use lopinavir-ritonavir)	NF	QL(4 EA daily)
EPIVIR SOLN PO (Use lamivudine)	NP	MP	KALETRA TABS PO 50 MG-200 MG (Use lopinavir-ritonavir)	P	QL(6 EA daily); MP
EPIVIR TABS PO 150 MG (Use lamivudine)	NP	QL(2 EA daily); MP	KALETRA TABS PO 50 MG-200 MG (Use lopinavir-ritonavir)	NF	QL(6 EA daily)
EPIVIR TABS PO 300 MG (Use lamivudine)	NP	QL(1 EA daily); MP	lamivudine SOLN PO	P	MP
EPZICOM PO (Use abacavir sulfate-lamivudine)	NP	MP	lamivudine TABS PO 300 MG	P	QL(1 EA daily); MP
etravirine PO 200 MG	P	QL(2 EA daily); MP	lamivudine TABS PO 150 MG	P	QL(2 EA daily); MP
etravirine PO 100 MG	P	QL(4 EA daily); MP	lamivudine-zidovudine PO	P	QL(2 EA daily); MP
EVOTAZ	NP	MP	LEXIVA SUSP PO	P	MP
fosamprenavir calcium TABS PO	P	QL(4 EA daily); MP	LEXIVA TABS PO (Use fosamprenavir calcium)	P	QL(4 EA daily); MP
FUZEON SOLR	NP	SP; MP	lopinavir-ritonavir SOLN PO	P	MP
GENVOYA	P	QL(1 EA daily); MP	lopinavir-ritonavir TABS PO 25 MG-100 MG	P	QL(4 EA daily); MP
INTELENCE PO	P	QL(4 EA daily); MP	lopinavir-ritonavir TABS PO 50 MG-200 MG	P	QL(6 EA daily); MP
INTELENCE PO 200 MG (Use etravirine)	P	QL(2 EA daily); MP	maraviroc TABS PO	NP	MP
INTELENCE PO (Use etravirine)	P	QL(4 EA daily); MP	nevirapine SUSP PO	P	QL(40 ML daily); MP
ISENTRESS HD TABS PO	P	QL(2 EA daily); MP	nevirapine TABS PO	P	QL(2 EA daily); MP
ISENTRESS CHEW 25 MG	P	QL(12 EA daily); MP	nevirapine TB24 PO 400 MG	P	QL(1 EA daily); MP
ISENTRESS CHEW 100 MG	P	QL(6 EA daily); MP	nevirapine TB24 PO 100 MG	P	QL(4 EA daily); MP
ISENTRESS PACK PO	P	QL(2 EA daily); MP	NORVIR PACK	P	MP
ISENTRESS TABS PO	P	QL(2 EA daily); MP	NORVIR TABS PO (Use ritonavir)	P	QL(12 EA daily); MP
JULUCA	NP	MP	ODEFSEY	P	QL(1 EA daily); MP
KALETRA SOLN PO (Use lopinavir-ritonavir)	NP	MP	PIFELTRO	NP	MP
KALETRA TABS PO 25 MG-100 MG (Use lopinavir-ritonavir)	P	QL(4 EA daily); MP	PREZCOBIX	NP	MP
			PREZISTA SUSP	P	MP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PREZISTA TABS 75 MG, 150 MG	P	MP	<i>tenofovir disoproxil fumarate</i> TABS PO	P	QL(1 EA daily); MP
PREZISTA TABS 800 MG (Use <i>darunavir</i>)	P	QL(1 EA daily); MP	TIVICAY PD TBSO	P	QL(6 EA daily); MP
PREZISTA TABS 600 MG (Use <i>darunavir</i>)	P	QL(2 EA daily); MP	TIVICAY TABS 10 MG	P	MP
RETROVIR CAPS PO (Use <i>zidovudine</i>)	NP	QL(6 EA daily); MP	TIVICAY TABS 25 MG, 50 MG	P	QL(2 EA daily); MP
RETROVIR SYRP PO (Use <i>zidovudine</i>)	NP	MP	TRIUMEQ PD TBSO	P	
REYATAZ CAPS PO 300 MG (Use <i>atazanavir sulfate</i>)	P	QL(1 EA daily); MP	TRIUMEQ TABS	P	MP
REYATAZ CAPS PO 200 MG (Use <i>atazanavir sulfate</i>)	P	QL(2 EA daily); MP	TRIZIVIR PO	NP	MP
REYATAZ PACK	P	QL(6 EA daily); MP	TROGARZO	P	SP; MP; PA
<i>ritonavir</i> TABS PO	P	QL(12 EA daily); MP	TRUVADA PO (Use <i>emtricitabine-tenofovir disoproxil fumarate</i>)	P	MP
RUKOBIA	NP	MP	TYBOST	NP	MP
SELZENTRY SOLN	NP	MP	VIRACEPT TABS PO 625 MG	P	QL(4 EA daily); MP
SELZENTRY TABS PO	NP	MP	VIRACEPT TABS PO 250 MG	P	QL(9 EA daily); MP
SELZENTRY TABS PO (Use <i>maraviroc</i>)	NP	MP	VIREAD POWD	P	MP
STRIBILD	NP	MP	VIREAD TABS PO	P	QL(1 EA daily); MP
SUNLENCA SOLN	P	SP; PA	VIREAD TABS PO (Use <i>tenofovir disoproxil fumarate</i>)	P	QL(1 EA daily); MP
SUNLENCA TBPk 300 MG	P	SP; PA	ZIAGEN SOLN PO (Use <i>abacavir sulfate</i>)	P	MP
SUSTIVA CAPS PO 50 MG (Use <i>efavirenz</i>)	NF	QL(2 EA daily); MP	ZIAGEN TABS PO (Use <i>abacavir sulfate</i>)	NP	QL(2 EA daily); MP
SUSTIVA CAPS PO 200 MG (Use <i>efavirenz</i>)	NF	QL(1 EA daily); MP	<i>zidovudine</i> CAPS PO	P	QL(6 EA daily); MP
SYMFI (Use <i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	P	QL(1 EA daily); MP	<i>zidovudine</i> SYRP PO	P	MP
SYMFI LO (Use <i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	P	QL(1 EA daily); MP	<i>zidovudine</i> TABS PO	P	QL(2 EA daily); MP
SYMTUZA	P	QL(1 EA daily); MP	Antiviral Combinations		
			PAXLOVID (150/100)	P	Maximum 5-day supply; AL(At least 12 yrs old)
			PAXLOVID (300/100)	P	Maximum 5-day supply; AL(At least 12 yrs old)

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CMV Agents			SOFOSBUVIR-VELPATASVIR TABS	P	QL(1 EA daily); SP
LIVTENCITY	P	SP; PA	SOVALDI PACK	NP	SP
PREVYMIS TABS	P	SP; PA	SOVALDI TABS	NP	SP
VALCYTE SOLR (Use valganciclovir hcl)	NP		VEMLIDY	NP	SP
VALCYTE TABS PO (Use valganciclovir hcl)	NP	QL(4 EA daily)	VOSEVI	NP	SP
valganciclovir hcl SOLR	NP		ZEPATIER	NP	SP
valganciclovir hcl TABS PO	P	QL(4 EA daily)	Herpes Agents		
Hepatitis Agents			acyclovir CAPS PO	P	
adefovir dipivoxil PO	NP		acyclovir SUSP PO	P	MP
BARACLUDE SOLN	NP	MP	acyclovir TABS PO	P	
BARACLUDE TABS PO (Use entecavir)	NP		famciclovir PO	NP	
entecavir TABS PO	P		SITAVIG TABS BU	NP	
EPCLUSA PACK	NP	SP	valacyclovir hcl PO 1 GM	P	
EPCLUSA TABS 100 MG-400 MG	NP	QL(1 EA daily); SP	valacyclovir hcl PO 500 MG	P	QL(2 EA daily)
EPCLUSA TABS 50 MG-200 MG	NP	SP	VALTREX PO 500 MG (Use valacyclovir hcl)	NP	QL(2 EA daily)
EPIVIR HBV SOLN	NP	MP	VALTREX PO 1 GM (Use valacyclovir hcl)	NP	
EPIVIR HBV TABS PO (Use lamivudine (hbv))	NP		ZOVIRAX SUSP PO (Use acyclovir)	NF	MP
HARVONI PACK	NP	SP	Influenza Agents		
HARVONI TABS	NP	SP	oseltamivir phosphate CAPS PO 45 MG, 75 MG	P	QL(20 EA per 30 day(s) retail); 1 max fill(s) per 180 day(s) retail
HARVONI TABS	NP	SP	oseltamivir phosphate CAPS PO 30 MG	P	QL(40 EA per 30 day(s) retail); 1 max fill(s) per 180 day(s) retail
lamivudine (hbv) TABS PO	NP		oseltamivir phosphate SUSP PO	P	QL(120 ML per fill retail; 120 ML per 10 day(s) retail); 1 max fill(s) per 180 day(s) retail; 10 day(s) max supply per 30 day(s) retail
LEDIPASVIR-SOFOSBUVIR TABS	NP	SP			
MAVYRET PACK	P	SP			
MAVYRET TABS PO	P	QL(3 EA daily); SP			
PEGASYS SOSY	NP	SP			
ribavirin (hepatitis c) CAPS PO	P	SP			
ribavirin (hepatitis c) TABS PO 200 MG	P	SP			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
RELENZA DISKHALER	P	10 day(s) max supply per 30 day(s) retail	COREG PO (<i>Use carvedilol</i>)	NF	MP
<i>rimantadine hydrochloride TABS PO</i>	NP		COREG CR PO (<i>Use carvedilol phosphate</i>)	NF	MP
TAMIFLU CAPS PO 45 MG, 75 MG (<i>Use oseltamivir phosphate</i>)	NP	QL(20 EA per 30 day(s) retail); 1 max fill(s) per 180 day(s) retail	COREG CR PO (<i>Use carvedilol phosphate</i>)	NP	MP
TAMIFLU CAPS PO 30 MG (<i>Use oseltamivir phosphate</i>)	NP	QL(40 EA per 30 day(s) retail); 1 max fill(s) per 180 day(s) retail	<i>labetalol hcl TABS PO 200 MG</i>	P	QL(6 EA daily); MP
TAMIFLU SUSR PO (<i>Use oseltamivir phosphate</i>)	NP	QL(120 ML per fill retail); 1 max fill(s) per 180 day(s) retail; 10 day(s) max supply per 30 day(s) retail	<i>labetalol hcl TABS PO 100 MG</i>	P	QL(3 EA daily); MP
XOFLUZA (40 MG DOSE) PO 40 MG	NP		<i>labetalol hcl TABS PO 300 MG</i>	P	QL(8 EA daily); MP
XOFLUZA (80 MG DOSE) PO 80 MG	NP		Beta Blockers Cardio-Selective		
Misc. Antivirals			<i>acebutolol hcl CAPS PO</i>	P	MP
LAGEVRIO	P	Maximum 5-day supply; AL(At least 18 yrs old)	<i>atenolol TABS PO</i>	P	MP
Respiratory Syncytial Virus (RSV) Agents			<i>atenolol TABS PO</i>	P	MP
<i>ribavirin</i>	P		<i>betaxolol hcl PO</i>	P	MP
VIRAZOLE (<i>Use ribavirin</i>)	NP		<i>bisoprolol fumarate PO</i>	P	MP
BETA BLOCKERS - Drugs to Treat High Blood Pressure			BYSTOLIC PO (<i>Use nebivolol hcl</i>)	NP	MP
Alpha-Beta Blockers			BYSTOLIC PO 2.5 MG, 5 MG, 20 MG (<i>Use nebivolol hcl</i>)	NF	MP
<i>carvedilol PO</i>	P	MP	KAPSPARGO SPRINKLE CS24	NP	MP
<i>carvedilol PO</i>	P	MP	LOPRESSOR TABS PO 100 MG (<i>Use metoprolol tartrate</i>)	NP	QL(4.5 EA daily); MP
<i>carvedilol phosphate PO</i>	NP	MP	LOPRESSOR TABS PO 50 MG (<i>Use metoprolol tartrate</i>)	NP	QL(4 EA daily); MP
COREG PO (<i>Use carvedilol</i>)	NP	MP	<i>metoprolol succinate TB24 PO</i>	P	QL(1 EA daily); MP
			<i>metoprolol tartrate TABS PO 100 MG</i>	P	QL(4.5 EA daily); MP
			<i>metoprolol tartrate TABS PO 37.5 MG, 75 MG</i>	P	MP
			<i>metoprolol tartrate TABS PO 25 MG, 50 MG</i>	P	QL(4 EA daily); MP
			<i>nebivolol hcl PO</i>	NP	MP
			<i>nebivolol hcl PO</i>	NP	MP

Drug Name	Drug Tier	Requirements/Limits
TENORMIN TABS PO (Use atenolol)	NP	MP
TOPROL XL TB24 PO (Use metoprolol succinate)	NP	QL(1 EA daily); MP
Beta Blockers Non-Selective		
BETAPACE AF PO (Use sotalol hcl (afib/af))	NP	MP
BETAPACE TABS PO 80 MG, 160 MG (Use sotalol hcl)	NP	QL(2 EA daily); MP
BETAPACE TABS PO 120 MG (Use sotalol hcl)	NP	QL(4 EA daily); MP
CORGARD TABS PO 20 MG, 40 MG (Use nadolol)	NP	QL(2 EA daily); MP
CORGARD TABS PO 80 MG (Use nadolol)	NF	QL(4 EA daily); MP
HEMANGEOL SOLN PO	P	AL(Up to 8 yrs old); SP; PA
INDERAL LA CP24 PO (Use propranolol hcl)	NP	MP
INDERAL LA CP24 PO (Use propranolol hcl)	NF	
INDERAL XL PO	NP	MP
INNOPRAN XL PO	NP	MP
nadolol TABS PO 20 MG, 40 MG	P	QL(2 EA daily); MP
nadolol TABS PO 80 MG	P	QL(4 EA daily); MP
pindolol TABS PO	P	MP
propranolol hcl CP24 PO	P	MP
propranolol hcl SOLN PO 20 MG/5ML, 40 MG/5ML	P	MP
propranolol hcl TABS PO	P	MP
sotalol hcl (afib/af) PO	NP	MP
sotalol hcl TABS PO 120 MG	P	QL(4 EA daily); MP
sotalol hcl TABS PO 240 MG	P	MP
sotalol hcl TABS PO 80 MG, 160 MG	P	QL(2 EA daily); MP
SOTYLIZE SOLN PO	NP	MP

Drug Name	Drug Tier	Requirements/Limits
timolol maleate TABS PO	P	MP
CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure		
Calcium Channel Blockers		
amlodipine besylate TABS PO	P	QL(1 EA daily); MP
CALAN SR TBCR PO (Use verapamil hcl)	NF	QL(1 EA daily); MP
CARDIZEM CD CP24 PO (Use diltiazem hcl coated beads)	NP	QL(1 EA daily); MP
CARDIZEM LA TB24 (Use diltiazem hcl)	NP	
CARDIZEM TABS PO 30 MG, 60 MG (Use diltiazem hcl)	NP	QL(4 EA daily); MP
CARDIZEM TABS PO 120 MG (Use diltiazem hcl)	NP	MP
diltiazem hcl coated beads CP24 PO	P	QL(1 EA daily); MP
diltiazem hcl extended release beads PO	P	QL(1 EA daily); MP
diltiazem hcl CP12 PO	P	QL(2 EA daily); MP
diltiazem hcl CP24 PO 180 MG, 240 MG	P	QL(1 EA daily); MP
diltiazem hcl CP24 PO 120 MG	P	MP
diltiazem hcl TABS PO 30 MG, 60 MG, 90 MG	P	QL(4 EA daily); MP
diltiazem hcl TABS PO 120 MG	P	MP
diltiazem hcl TB24	P	
felodipine PO	P	QL(1 EA daily); MP
isradipine CAPS PO	NP	MP
KATERZIA	NP	MP
levamlodipine maleate	NP	
nicardipine hcl CAPS PO	NP	MP
nicardipine hcl CAPS PO	NP	MP

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>nifedipine CAPS PO 20 MG</i>	P	QL(1 EA daily); MP	<i>digoxin SOLN PO 0.05 MG/ML</i>	P	MP
<i>nifedipine CAPS PO 10 MG</i>	P	QL(4 EA daily); MP	<i>digoxin TABS PO 62.5 MCG</i>	NP	
<i>nifedipine TB24 PO</i>	P	QL(1 EA daily); MP	<i>digoxin TABS PO 125 MCG, 250 MCG</i>	P	MP
<i>nimodipine CAPS PO</i>	P		CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions		
<i>nisoldipine PO</i>	NP	MP	Cardiac Myosin Inhibitors		
NORLIQVA SOLN	NP		CAMZYOS	NP	SP
NORVASC TABS PO (Use <i>amlodipine besylate</i>)	NP	QL(1 EA daily); MP	Cardiovascular Agents Misc. - Combinations		
NORVASC TABS PO (Use <i>amlodipine besylate</i>)	NF		<i>amlodipine besylate-atorvastatin calcium PO 10 MG-10 MG, 10 MG-20 MG, 10 MG-40 MG, 10 MG-80 MG, 2.5 MG-20 MG, 2.5 MG-40 MG, 5 MG-10 MG, 5 MG-20 MG, 5 MG-40 MG, 5 MG-80 MG</i>	NP	MP
NORVASC TABS PO 10 MG (Use <i>amlodipine besylate</i>)	NF	QL(1 EA daily)	<i>amlodipine besylate-atorvastatin calcium PO 10 MG-20 MG, 2.5 MG-10 MG, 5 MG-10 MG, 5 MG-20 MG, 5 MG-40 MG, 5 MG-80 MG</i>	NP	MP
NYMALIZE SOLN PO 6 MG/ML	NP	QL(8 ML daily)	BIDIL PO (Use <i>isosorbide dinitrate-hydralazine hcl</i>)	P	
PROCARDIA XL TB24 PO (Use <i>nifedipine</i>)	NP	QL(1 EA daily); MP	CADUET PO 10 MG-10 MG, 10 MG-20 MG, 10 MG-40 MG, 10 MG-80 MG, 5 MG-10 MG, 5 MG-20 MG, 5 MG-40 MG, 5 MG-80 MG (Use <i>amlodipine besylate-atorvastatin calcium</i>)	NF	MP
SULAR PO 8.5 MG, 17 MG, 34 MG (Use <i>nisoldipine</i>)	NP	MP	CADUET PO 10 MG-10 MG, 10 MG-20 MG, 10 MG-40 MG, 10 MG-80 MG, 5 MG-10 MG, 5 MG-20 MG, 5 MG-40 MG, 5 MG-80 MG (Use <i>amlodipine besylate-atorvastatin calcium</i>)	NP	MP
TIAZAC PO (Use <i>diltiazem hcl extended release beads</i>)	NP	QL(1 EA daily); MP	CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm		
VERAPAMIL HCL ER CP24 PO (Use <i>verapamil hcl</i>)	P	QL(1 EA daily); MP	Cardiac Glycosides		
<i>verapamil hcl CP24 PO</i>	P	QL(1 EA daily); MP			
<i>verapamil hcl TABS PO</i>	P	QL(3 EA daily); MP			
<i>verapamil hcl TBCR PO</i>	P	QL(1 EA daily); MP			
VERELAN PM CP24 PO (Use <i>verapamil hcl</i>)	NP	QL(1 EA daily); MP			
VERELAN CP24 PO (Use <i>verapamil hcl</i>)	NP	QL(1 EA daily); MP			

Drug Name	Drug Tier	Requirements/Limits
ENTRESTO TABS PO	P	
<i>isosorbide dinitrate-hydralazine hcl PO</i>	P	
Impotence Agents		
CIALIS PO 5 MG (<i>Use tadalafil</i>)	NP	
CIALIS PO 2.5 MG, 10 MG, 20 MG (<i>Use tadalafil</i>)	NF	
<i>tadalafil PO 5 MG</i>	NP	
Prostaglandin Vasodilators		
<i>epoprostenol sodium</i>	P	SP; PA
FLOLAN (<i>Use epoprostenol sodium</i>)	P	SP; PA
ORENITRAM MONTH 1 TEPK	NP	SP
ORENITRAM MONTH 2 TEPK	NP	SP
ORENITRAM MONTH 3 TEPK	NP	SP
ORENITRAM TBCR	NP	SP
REMODULIN SOLN IJ	NP	SP
<i>treprostinil SOLN IJ</i>	NP	SP
TYVASO DPI MAINTENANCE KIT POWD	NP	SP
TYVASO DPI TITRATION KIT POWD	NP	SP
TYVASO REFILL KIT SOLN IN	NP	SP; MP
TYVASO STARTER KIT SOLN IN	NP	SP; MP
TYVASO SOLN IN	NP	SP; MP
VELETRI (<i>Use epoprostenol sodium</i>)	NP	SP
VENTAVIS IN	NP	SP; MP
Pulmonary Hypertension - Endothelin Receptor Antagonists		
<i>ambrisentan PO</i>	NP	SP
<i>bosentan TABS</i>	NP	SP

Drug Name	Drug Tier	Requirements/Limits
LETAIRIS PO (<i>Use ambrisentan</i>)	P	SP; PA
OPSUMIT	NP	SP
TRACLEER TABS (<i>Use bosentan</i>)	P	SP; PA
TRACLEER TBSO	P	SP; PA
Pulmonary Hypertension - Phosphodiesterase Inhibitors		
ADCIRCA TABS PO (<i>Use tadalafil (pulmonary hypertension)</i>)	P	SP; PA
LIQREV SUSP	NP	SP
REVATIO SOLN (<i>Use sildenafil citrate (pulmonary hypertension)</i>)	NP	SP
REVATIO SUSR (<i>Use sildenafil citrate (pulmonary hypertension)</i>)	P	SP; PA
REVATIO TABS PO (<i>Use sildenafil citrate (pulmonary hypertension)</i>)	NP	SP
<i>sildenafil citrate (pulmonary hypertension) SOLN</i>	NP	SP
<i>sildenafil citrate (pulmonary hypertension) SUSR</i>	NP	SP
<i>sildenafil citrate (pulmonary hypertension) TABS PO</i>	P	SP; PA
<i>tadalafil (pulmonary hypertension) TABS PO</i>	P	SP; PA
TADLIQ SUSP	NP	SP
Pulmonary Hypertension - Prostacyclin Receptor Agonist		
UPTRAVI TITRATION TBPK	NP	SP
UPTRAVI SOLR	NP	SP
UPTRAVI TABS	NP	SP
Pulmonary Hypertension - Sol Guanylate Cyclase		

Drug Name	Drug Tier	Requirements/Limits
Stimulator		
ADEMPAS PO	NP	SP
Sinus Node Inhibitors		
CORLANOR SOLN	NP	MP
CORLANOR TABS PO (Use ivabradine hcl)	NP	
Transthyretin Stabilizers		
VYNDAMAX	NP	SP
VYNDAQEL	NP	SP
Vasoactive Soluble Guanylate Cyclase Stimulator (sGC)		
VERQUVO	P	PA
VERQUVO	NP	
CEPHALOSPORINS - Drugs to Treat Bacterial Infections		
Cephalosporins - 1st Generation		
<i>cefadroxil CAPS PO</i>	P	
<i>cefadroxil SUSR PO</i>	P	
<i>cefadroxil TABS PO</i>	P	
<i>cephalexin CAPS PO</i>	P	
<i>cephalexin SUSR PO</i>	P	
<i>cephalexin TABS PO</i>	P	
Cephalosporins - 2nd Generation		
CEFACTOR ER TB12 PO	NP	
<i>cefaclor CAPS PO</i>	P	
<i>cefaclor SUSR PO 125 MG/5ML, 375 MG/5ML</i>	P	
<i>cefprozil SUSR PO</i>	P	
<i>cefprozil TABS PO</i>	NP	
<i>cefuroxime axetil TABS PO 500 MG</i>	P	QL(56 EA per fill retail)
<i>cefuroxime axetil TABS PO 250 MG</i>	P	QL(20 EA per fill retail)
Cephalosporins - 3rd Generation		

Drug Name	Drug Tier	Requirements/Limits
<i>cefdinir CAPS PO</i>	P	QL(28 EA per fill retail)
<i>cefdinir SUSR PO</i>	P	
<i>cefixime CAPS PO</i>	P	QL(1 EA daily)
<i>cefixime SUSR PO</i>	NP	
<i>cefpodoxime proxetil SUSR PO</i>	NP	
<i>cefpodoxime proxetil TABS PO</i>	NP	
SUPRAX CAPS PO (Use <i>cefixime</i>)	NF	QL(1 EA daily)
SUPRAX CHEW PO 200 MG	NP	QL(1 EA daily)
SUPRAX CHEW PO 100 MG	NP	
SUPRAX SUSR PO 200 MG/5ML (Use <i>cefixime</i>)	NP	
CHEMICALS		
Bulk Chemicals - F's		
FLUPHENAZINE DECANOATE POWD	P	
Bulk Chemicals - L's		
LITHIUM CITRATE TETRAHYDRATE	P	
Bulk Chemicals - P's		
PENTOSAN POLYSULFATE SODIUM	P	PA
CONTRACEPTIVES - Drugs to Prevent Pregnancy		
Combination Contraceptives - Oral		
BALCOLTRA PO (Use <i>levonorgestrel-ethinyl estradiol-iron</i>)	P	AL(At least 10 yrs old - Up to 55 yrs old); MP
BEYAZ PO (Use <i>drospirenone-ethinyl estradiol-levomefolate calcium</i>)	P	AL(At least 10 yrs old - Up to 55 yrs old); MP
<i>desogestrel & ethinyl estradiol PO</i>	P	QL(1 EA daily); AL(At least 10 yrs old - Up to 55 yrs old); MP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>desogestrel-ethinyl estradiol (biphasic) PO</i>	P	QL(1 EA daily); AL(At least 10 yrs old - Up to 55 yrs old); MP	LOSEASONIQUE PO (Use <i>levonorgestrel-ethinyl estradiol (91-day)</i>)	P	QL(1 EA daily); AL(At least 10 yrs old - Up to 55 yrs old); MP
<i>desogestrel-ethinyl estradiol (triphasic) PO</i>	P	AL(At least 10 yrs old - Up to 55 yrs old); MP	MINASTRIN 24 FE CHEW PO (Use <i>norethin acet & estrad-fe</i>)	P	AL(At least 10 yrs old - Up to 55 yrs old); MP
<i>drospirenone-ethinyl estradiol PO 0.03 MG-3 MG</i>	P	QL(1 EA daily); MP	MIRCETTE PO (Use <i>desogestrel-ethinyl estradiol (biphasic)</i>)	P	QL(1 EA daily); AL(At least 10 yrs old - Up to 55 yrs old); MP
<i>drospirenone-ethinyl estradiol PO</i>	P	QL(1 EA daily); AL(At least 10 yrs old - Up to 55 yrs old); MP	NATAZIA	P	AL(At least 10 yrs old - Up to 55 yrs old); MP
<i>drospirenone-ethinyl estradiol-levomefolate calcium PO</i>	P	AL(At least 10 yrs old - Up to 55 yrs old); MP	NEXTSTELLIS	P	QL(1 EA daily); AL(At least 10 yrs old - Up to 55 yrs old); MP
<i>ethynodiol diacet & eth estrad PO</i>	P	QL(1 EA daily); AL(At least 10 yrs old - Up to 55 yrs old); MP	<i>norethin acet & estrad-fe CAPS</i>	P	QL(1 EA daily); MP
GENERESS FE PO (Use <i>norethindrone & ethinyl estradiol-fe</i>)	NF	QL(1 EA daily); AL(At least 10 yrs old - Up to 55 yrs old); MP	<i>norethin acet & estrad-fe CHEW PO</i>	P	MP
<i>levonorgestrel & eth estradiol TABS PO</i>	P	QL(1 EA daily); AL(At least 10 yrs old - Up to 55 yrs old); MP	<i>norethin acet & estrad-fe TABS PO 1.5 MG-30 MCG-75 MG</i>	P	QL(1 EA daily); MP
<i>levonorgestrel-eth estradiol (triphasic) PO</i>	P	QL(1 EA daily); AL(At least 10 yrs old - Up to 55 yrs old); MP	<i>norethin acet & estrad-fe TABS PO 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG</i>	P	QL(1 EA daily); AL(At least 10 yrs old - Up to 55 yrs old); MP
<i>levonorgestrel-ethinyl estradiol (91-day) PO 0.03 MG-0.15 MG</i>	P	QL(1 EA daily); AL(At least 10 yrs old - Up to 55 yrs old); MP	<i>norethindrone & eth estradiol PO</i>	P	QL(1 EA daily); AL(At least 10 yrs old - Up to 55 yrs old); MP
<i>levonorgestrel-ethinyl estradiol (91-day) PO</i>	P	AL(At least 10 yrs old - Up to 55 yrs old); MP	<i>norethindrone & ethinyl estradiol-fe PO</i>	P	QL(1 EA daily); AL(At least 10 yrs old - Up to 55 yrs old); MP
<i>levonorgestrel-ethinyl estradiol (continuous) PO</i>	P	QL(1 EA daily); MP	<i>norethindrone acet & eth estra TABS PO</i>	P	QL(1 EA daily); AL(At least 10 yrs old - Up to 55 yrs old); MP
<i>levonorgestrel-ethinyl estradiol-iron PO</i>	P	MP	<i>norethindrone acetate-ethinyl estradiol-fe PO</i>	P	QL(1 EA daily); MP
LO LOESTRIN FE TABS	P	AL(At least 10 yrs old - Up to 55 yrs old); MP	<i>norethindrone-eth estradiol (triphasic) PO</i>	P	QL(1 EA daily); AL(At least 10 yrs old - Up to 55 yrs old); MP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>norgestimate-ethinyl estradiol PO</i>	P	AL(At least 10 yrs old - Up to 55 yrs old); MP	ANNOVERA	P	QL(1 EA per 365 day(s) retail); AL(At least 10 yrs old - Up to 55 yrs old); MP
<i>norgestimate-ethinyl estradiol (triphasic) PO</i>	P	QL(1 EA daily); AL(At least 10 yrs old - Up to 55 yrs old); MP	<i>etonogestrel-ethinyl estradiol</i>	P	MP
<i>norgestrel & ethinyl estradiol PO 30 MCG-0.3 MG</i>	P	QL(1 EA daily); MP	NUVARING (<i>Use etonogestrel-ethinyl estradiol</i>)	P	AL(At least 10 yrs old - Up to 55 yrs old); MP
QUARTETTE PO (<i>Use levonorgestrel-ethinyl estradiol (91-day)</i>)	P	AL(At least 10 yrs old - Up to 55 yrs old); MP	Emergency Contraceptives		
SAFYRAL PO (<i>Use drospirenone-ethinyl estradiol-levomefolate calcium</i>)	P	AL(At least 10 yrs old - Up to 55 yrs old); MP	ELLA PO	P	QL(3 EA per fill retail); AL(At least 10 yrs old - Up to 55 yrs old)
SEASONIQUE PO (<i>Use levonorgestrel-ethinyl estradiol (91-day)</i>)	P	QL(1 EA daily); AL(At least 10 yrs old - Up to 55 yrs old); MP	<i>levonorgestrel (emergency oc) PO 1.5 MG</i>	P	QL(3 EA per fill retail)
TAYTULLA CAPS (<i>Use norethin acet & estrad-fe</i>)	P	QL(1 EA daily); AL(At least 10 yrs old - Up to 55 yrs old); MP	PLAN B ONE-STEP PO (<i>Use levonorgestrel (emergency oc)</i>)	NF	QL(3 EA per fill retail)
TYBLUME CHEW	P	AL(At least 10 yrs old - Up to 55 yrs old); MP	Progestin Contraceptives - Injectable		
YASMIN 28 PO (<i>Use drospirenone-ethinyl estradiol</i>)	P	QL(1 EA daily); AL(At least 10 yrs old - Up to 55 yrs old); MP	DEPO-PROVERA SUSP IM (<i>Use medroxyprogesterone acetate (contraceptive)</i>)	P	QL(0.012 ML daily); AL(At least 10 yrs old - Up to 55 yrs old); MP
YAZ PO (<i>Use drospirenone-ethinyl estradiol</i>)	P	QL(1 EA daily); AL(At least 10 yrs old - Up to 55 yrs old); MP	DEPO-PROVERA SUSY IM (<i>Use medroxyprogesterone acetate (contraceptive)</i>)	P	QL(0.012 ML daily); AL(At least 10 yrs old - Up to 55 yrs old); MP
Combination Contraceptives - Transdermal			DEPO-SUBQ PROVERA 104 SUSY SC	P	QL(1 ML per fill retail; 1 ML per 84 day(s) retail); AL(At least 10 yrs old - Up to 55 yrs old); MP
<i>norelgestromin-ethinyl estradiol</i>	P	AL(At least 10 yrs old - Up to 55 yrs old); MP	<i>medroxyprogesterone acetate (contraceptive) SUSP IM</i>	P	QL(0.012 ML daily); MP
TWIRLA	P	QL(1 EA daily); AL(At least 10 yrs old - Up to 55 yrs old); MP	Combination Contraceptives - Vaginal		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>medroxyprogesterone acetate (contraceptive) SUSY IM</i>	P	QL(0.012 ML daily); MP	<i>hydrocortisone TABS PO</i>	P	
Progestin Contraceptives - Oral			MEDROL TABS PO	NP	
<i>norethindrone (contraceptive) PO</i>	P	QL(1 EA daily); MP	MEDROL TABS PO (<i>Use methylprednisolone</i>)	NP	
OPILL PO	P	QL(1 EA daily); AL(At least 10 yrs old - Up to 55 yrs old); MP	MEDROL TBPK PO (<i>Use methylprednisolone</i>)	NP	
SLYND PO	P	AL(At least 10 yrs old - Up to 55 yrs old); MP	<i>methylprednisolone TABS PO</i>	P	
CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions			<i>methylprednisolone TBPK PO</i>	P	
Glucocorticosteroids			PEDIAPRED SOLN PO (<i>Use prednisolone sodium phosphate</i>)	NF	
AGAMREE	NP	SP	<i>prednisolone sodium phosphate SOLN PO</i>	P	
ALKINDI SPRINKLE CPSP	NP		<i>prednisolone sodium phosphate TBDP PO</i>	NP	
<i>budesonide CPEP PO</i>	NP		<i>prednisolone SOLN</i>	P	
<i>budesonide TB24 PO</i>	NP		<i>prednisolone TABS PO</i>	P	
CORTEF TABS PO (<i>Use hydrocortisone</i>)	NP		PREDNISON INTENSOL CONC	P	
CORTISONE ACETATE TABS PO	NP		<i>prednisone SOLN PO</i>	P	
<i>deflazacort SUSP PO</i>	NP	SP	<i>prednisone TABS PO</i>	P	
<i>deflazacort TABS PO</i>	NP	SP	<i>prednisone TBPK PO</i>	P	
DEXAMETHASONE INTENSOL CONC	P		RAYOS TBEC	NP	
<i>dexamethasone ELIX PO</i>	P		TARPEYO CPDR	NP	SP
<i>dexamethasone SOLN PO</i>	P		UCERIS TB24 PO (<i>Use budesonide</i>)	NP	
<i>dexamethasone TABS PO</i>	P		Mineralocorticoids		
<i>dexamethasone TBPK PO</i>	NP		<i>fludrocortisone acetate TABS PO</i>	P	
<i>dexamethasone TBPK PO</i>	P		COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms		
EMFLAZA SUSP PO (<i>Use deflazacort</i>)	NP	SP; MP	Antitussives		
EMFLAZA TABS PO (<i>Use deflazacort</i>)	NP	SP	<i>dextromethorphan hbr LIQD PO 15 MG/5ML</i>	P	
HEMADY TABS PO	NP		<i>dextromethorphan hbr SYRP PO 15 MG/5ML</i>	P	
			Cough/Cold/Allergy Combinations		

Drug Name	Drug Tier	Requirements/Limits
<i>dextromethorphan-guaifenesin LIQD PO 100 MG/5ML-10 MG/5ML, 150 MG/7.5ML-15 MG/7.5ML, 200 MG/10ML-20 MG/10ML, 200 MG/5ML-10 MG/5ML</i>	P	
<i>dextromethorphan-guaifenesin SYRP PO 100 MG/5ML-10 MG/5ML, 200 MG/10ML-20 MG/10ML</i>	P	
<i>guaifenesin-codeine SOLN PO</i>	P	
<i>guaifenesin-codeine SYRP PO</i>	P	
<i>promethazine-dm SYRP PO</i>	P	
<i>promethazine-phenylephrine-codeine PO</i>	P	
ROBITUSSIN COUGH+CHEST CONG DM LIQD PO (<i>Use dextromethorphan-guaifenesin</i>)	NF	
Expectorants		
GERI-TUSSIN SYRP PO	P	
<i>guaifenesin LIQD PO</i>	P	
<i>guaifenesin TABS PO 200 MG</i>	P	
DERMATOLOGICALS - Drugs to Treat Skin		
Conditions		
Acne Products		
ABSORICA PO (<i>Use isotretinoin</i>)	NP	AL(At least 12 yrs old)
ABSORICA LD	NP	AL(At least 10 yrs old)
ACANYA GEL (<i>Use clindamycin phosphate-benzoyl peroxide</i>)	NP	AL(At least 10 yrs old)
ACZONE 7.5 % (<i>Use dapsone (topical)</i>)	NF	AL(At least 10 yrs old)

Drug Name	Drug Tier	Requirements/Limits
<i>adapalene-benzoyl peroxide GEL</i>	NP	AL(At least 10 yrs old)
ADAPALENE-BENZOYL PEROXIDE PADS	NP	
<i>adapalene CREA</i>	NP	AL(At least 10 yrs old)
<i>adapalene GEL 0.3 %</i>	NP	AL(At least 10 yrs old)
ALTRENO LOTN	NP	AL(At least 10 yrs old)
ARAZLO LOTN	NP	AL(At least 10 yrs old - Up to 20 yrs old)
ATRALIN GEL (<i>Use tretinoin</i>)	NP	AL(At least 10 yrs old)
AVAR LS CLEANSER LIQD (<i>Use sulfacetamide sodium w/ sulfur</i>)	NF	
AVAR-E LS CREA (<i>Use sulfacetamide sodium w/ sulfur</i>)	NF	
BENZAC AC WASH LIQD 5 % (<i>Use benzoyl peroxide</i>)	NF	RX/OTC
BENZAMYCIN GEL (<i>Use benzoyl peroxide-erythromycin</i>)	NP	AL(At least 10 yrs old)
<i>benzoyl peroxide-erythromycin GEL</i>	P	AL(At least 10 yrs old)
<i>benzoyl peroxide GEL 5 %, 10 %</i>	P	
<i>benzoyl peroxide LIQD 10 %</i>	P	
CABTREO	NP	
CLEOCIN-T LOTN (<i>Use clindamycin phosphate (topical)</i>)	NP	AL(At least 10 yrs old)
CLINDACIN ETZ	NP	AL(At least 10 yrs old)
CLINDACIN PAC	NP	AL(At least 10 yrs old)
CLINDAGEL GEL (<i>Use clindamycin phosphate (topical)</i>)	NP	AL(At least 10 yrs old)

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>clindamycin phosphate (topical) FOAM</i>	NP	AL(At least 10 yrs old)	<i>isotretinoin PO</i>	NP	AL(At least 12 yrs old)
<i>clindamycin phosphate (topical) GEL</i>	P	AL(At least 10 yrs old)	KLARON (Use <i>sulfacetamide sodium (acne)</i>)	NP	AL(At least 10 yrs old)
<i>clindamycin phosphate (topical) LOTN</i>	P	AL(At least 10 yrs old)	NEUAC	NP	AL(At least 10 yrs old)
<i>clindamycin phosphate (topical) SOLN</i>	P	AL(At least 10 yrs old)	ONEXTON GEL (Use <i>clindamycin phosphate-benzoyl peroxide</i>)	NP	AL(At least 10 yrs old)
<i>clindamycin phosphate (topical) SWAB</i>	P	QL(2 EA daily); AL(At least 10 yrs old)	PANOXYL LIQD (Use <i>benzoyl peroxide</i>)	NF	
<i>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>	NP	AL(At least 10 yrs old)	RETIN-A MICRO (Use <i>tretinoin microsphere</i>)	NP	AL(At least 10 yrs old)
<i>clindamycin phosphate-benzoyl peroxide GEL</i>	NP	AL(At least 10 yrs old)	RETIN-A MICRO PUMP (Use <i>tretinoin microsphere</i>)	NP	AL(At least 10 yrs old)
<i>clindamycin phosphate-tretinoin</i>	NP	AL(At least 10 yrs old)	RETIN-A MICRO PUMP	NP	AL(At least 10 yrs old)
<i>dapsone (topical)</i>	NP	AL(At least 10 yrs old)	RETIN-A CREA (Use <i>tretinoin</i>)	NP	AL(At least 10 yrs old)
DIFFERIN CLEANSER LIQD (Use <i>benzoyl peroxide</i>)	NF	RX/OTC	RETIN-A GEL (Use <i>tretinoin</i>)	NP	AL(At least 10 yrs old)
DIFFERIN GEL 0.1 % (Use <i>adapalene</i>)	NF	RX/OTC	<i>sulfacetamide sodium (acne)</i>	NP	AL(At least 10 yrs old)
EPIDUO GEL (Use <i>adapalene-benzoyl peroxide</i>)	NF	AL(At least 10 yrs old)	<i>sulfacetamide sodium w/ sulfur CREA 10 %-2 %, 10 %-5 %</i>	NP	
ERYGEL GEL (Use <i>erythromycin (acne aid)</i>)	NP	AL(At least 10 yrs old)	<i>sulfacetamide sodium w/ sulfur EMUL 10 %-1 %</i>	NP	AL(At least 10 yrs old)
<i>erythromycin (acne aid) GEL</i>	P	AL(At least 10 yrs old)	<i>sulfacetamide sodium w/ sulfur FOAM</i>	NP	AL(At least 10 yrs old)
<i>erythromycin (acne aid) PADS</i>	NP	AL(At least 10 yrs old)	<i>sulfacetamide sodium w/ sulfur LIQD</i>	NP	
<i>erythromycin (acne aid) SOLN</i>	P	AL(At least 10 yrs old)	<i>sulfacetamide sodium w/ sulfur PADS 10 %-4 %</i>	NP	AL(At least 10 yrs old)
EVOCLIN FOAM (Use <i>clindamycin phosphate (topical)</i>)	NF	AL(At least 10 yrs old)	<i>sulfacetamide sodium w/ sulfur SUSP 8 %-4 %</i>	NP	
FABIOR FOAM	NP	AL(At least 10 yrs old - Up to 20 yrs old)	<i>sulfacetamide sodium-sulfur in urea vehicle EMUL 10 %-10 %-4 %</i>	NP	AL(At least 10 yrs old)
<i>isotretinoin PO 10 MG, 20 MG, 30 MG, 40 MG</i>	NP		SULFACETAMIDE-SULFUR IN UREA EMUL	NP	AL(At least 10 yrs old)
			SUMADAN	NP	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SUMADAN WASH LIQD (Use sulfacetamide sodium w/ sulfur)	NP		NEOSPORIN ORIGINAL OINT (Use neomycin-bacitracin-polymyxin)	NF	
SUMADAN XLT KIT	NP	AL(At least 10 yrs old)	NEO-SYNALAR	NP	
SUMAXIN CP	NP	AL(At least 10 yrs old)	NEO-SYNALAR	NP	
SUMAXIN PADS	NP	AL(At least 10 yrs old)	POLYSPORIN OINT 10000 UNIT/GM-500 UNIT/GM (Use bacitracin-polymyxin b)	NF	
TAZAROTENE FOAM	NP	AL(At least 10 yrs old - Up to 20 yrs old)	XEPI	NP	QL(8 GM daily)
<i>tretinoin microsphere</i>	NP	AL(At least 10 yrs old)	Antifungals - Topical		
<i>tretinoin CREA 0.025 %, 0.05 %, 0.1 %</i>	P	AL(At least 10 yrs old)	<i>ciclopirox olamine CREA</i>	NP	
<i>tretinoin GEL 0.01 %, 0.025 %, 0.05 %</i>	P	AL(At least 10 yrs old)	<i>ciclopirox olamine SUSP</i>	NP	
WINLEVI	NP		<i>ciclopirox GEL</i>	NP	
ZIANA (Use clindamycin phosphate-tretinoin)	NP	AL(At least 10 yrs old)	<i>ciclopirox KIT</i>	NP	
ZMA CLEAR SUSP	NP		<i>ciclopirox SHAM</i>	NP	
Agents for External Genital and Perianal Warts			<i>ciclopirox SOLN</i>	NP	
VEREGEN	NP		<i>clotrimazole (topical) CREA</i>	P	RX/OTC
Antibiotics - Topical			<i>clotrimazole (topical) SOLN</i>	NP	RX/OTC
<i>bacitracin (topical) OINT</i>	P		<i>clotrimazole w/ betamethasone CREA</i>	NP	
<i>bacitracin zinc OINT</i>	P		<i>clotrimazole w/ betamethasone LOTN</i>	NP	
<i>bacitracin-polymyxin b OINT</i>	P		<i>econazole nitrate CREA</i>	P	
CENTANY AT KIT	NP		ERTACZO	NP	
CENTANY OINT	NP	AL(Up to 20 yrs old)	EXTINA FOAM (Use ketoconazole (topical))	NF	
<i>gentamicin sulfate (topical) CREA</i>	P	QL(1 GM daily)	JUBLIA	NP	
<i>gentamicin sulfate (topical) OINT</i>	P		KERYDIN (Use tavaborole)	NF	
<i>mupirocin calcium (topical)</i>	NP	AL(Up to 20 yrs old)	<i>ketoconazole (topical) CREA</i>	P	
<i>mupirocin OINT</i>	P	AL(Up to 20 yrs old)	<i>ketoconazole (topical) FOAM</i>	NP	
<i>neomycin-bacitracin-polymyxin OINT</i>	P		<i>ketoconazole (topical) SHAM 2 %</i>	P	QL(4 ML daily)
			KETODAN	NP	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
LAMISIL AT JOCK ITCH CREA (Use terbinafine hcl (topical))	NF		oxiconazole nitrate CREA	NP	
LAMISIL AT CREA (Use terbinafine hcl (topical))	NF		OXISTAT CREA (Use oxiconazole nitrate)	NF	
LOPROX	NP		OXISTAT LOTN	NP	
LOPROX CREA (Use ciclopirox olamine)	NP		tavaborole	NP	
LOPROX SHAM (Use ciclopirox)	NF		terbinafine hcl (topical) CREA	P	
LOPROX SUSP (Use ciclopirox olamine)	NP		TINACTIN DEODORANT AERP (Use tolnaftate)	NF	
LOTRIMIN AF JOCK ITCH CREA (Use clotrimazole (topical))	NF	RX/OTC	TINACTIN JOCK ITCH AERP (Use tolnaftate)	NF	
LOTRIMIN AF JOCK ITCH CREA (Use clotrimazole (topical))	NF	RX/OTC	TINACTIN AERO (Use tolnaftate)	NF	
luliconazole	NP		TINACTIN AERP (Use tolnaftate)	NF	
LUZU (Use luliconazole)	NP		TINACTIN CREA (Use tolnaftate)	NF	
MICATIN CREA (Use miconazole nitrate (topical))	NF		tolnaftate AERO	P	
miconazole nitrate (topical) CREA	P		tolnaftate AERP	P	
miconazole-zinc oxide-white petrolatum	NP		tolnaftate CREA	P	
MYCOZYL HC LIQD	NP		tolnaftate SOLN	NP	RX/OTC
naftifine hcl CREA	NP		VUSION (Use miconazole-zinc oxide-white petrolatum)	NP	
naftifine hcl GEL 2 %	NP		Anti-inflammatory Agents - Topical		
NAFTIN GEL (Use naftifine hcl)	NP		diclofenac epolamine PTCH EX	NP	
NAFTIN GEL	NP		diclofenac sodium (topical) GEL EX	NP	RX/OTC
nystatin (topical) CREA	P		diclofenac sodium (topical) SOLN EX	NP	MP
nystatin (topical) OINT	P		FLECTOR PTCH EX (Use diclofenac epolamine)	NP	
nystatin (topical) POWD EX	P		LICART PT24	NP	
nystatin-triamcinolone CREA	NP		PENNSAID SOLN EX 2 % (Use diclofenac sodium (topical))	NP	
nystatin-triamcinolone OINT	NP		VOLTAREN ARTHRITIS PAIN GEL EX (Use diclofenac sodium (topical))	NF	RX/OTC

Drug Name	Drug Tier	Requirements/Limits
Antineoplastic or Premalignant Lesion Agents - Topical		
AMELUZ GEL	NP	
<i>bexarotene (topical)</i>	NP	SP
CARAC CREA	NP	
<i>diclofenac sodium (actinic keratoses) EX</i>	NP	
EFUDEX CREA (<i>Use fluorouracil (topical)</i>)	NP	
<i>fluorouracil (topical) CREA</i>	NP	
<i>fluorouracil (topical) SOLN</i>	NP	
LEVULAN KERASTICK SOLR	P	SP
TARGRETIN (<i>Use bexarotene (topical)</i>)	P	SP
VALCHLOR	NP	SP
Antipruritics - Topical		
<i>doxepin hcl (antipruritic)</i>	NP	
PRUDOXIN (<i>Use doxepin hcl (antipruritic)</i>)	NP	
ZONALON (<i>Use doxepin hcl (antipruritic)</i>)	NP	
Antipsoriatics		
<i>acitretin PO</i>	NP	
BIMZELX SOAJ	NP	SP
BIMZELX SOSY	NP	SP
<i>calcipotriene CREA</i>	P	
CALCIPOTRIENE FOAM	NP	
<i>calcipotriene OINT</i>	P	
<i>calcipotriene SOLN</i>	P	
<i>calcitriol (topical)</i>	NP	
COSENTYX (300 MG DOSE) SOSY	P	SP; MP; PA
COSENTYX SENSOREADY (300 MG) SOAJ	P	SP; MP; PA

Drug Name	Drug Tier	Requirements/Limits
COSENTYX SENSOREADY PEN SOAJ	P	SP; MP; PA
COSENTYX UNOREADY SOAJ	P	SP; PA
COSENTYX SOSY	P	SP; MP; PA
DOVONEX CREA (<i>Use calcipotriene</i>)	NF	
ILUMYA	NP	SP; MP
<i>methoxsalen rapid PO</i>	NP	
SILIQ	NP	SP; MP
SKYRIZI PEN SOAJ	NP	SP; MP
SKYRIZI SOSY	NP	SP; MP
SORILUX FOAM	NP	
SOTYKTU	NP	SP
STELARA SOLN 45 MG/0.5ML	NP	SP; MP
STELARA SOSY	NP	SP; MP
TALTZ SOAJ	NP	SP; MP
TALTZ SOSY 80 MG/ML	NP	SP; MP
<i>tazarotene CREA 0.1 %</i>	NP	
<i>tazarotene GEL</i>	NP	
TREMFYA SOAJ 100 MG/ML	NP	SP; MP
TREMFYA SOSY 100 MG/ML	NP	SP; MP
VTAMA	NP	
ZORYVE 0.3 %	NP	
Antiseborrheic Products		
OVACE PLUS WASH GEL (<i>Use sulfacetamide sodium</i>)	NF	
OVACE PLUS WASH LIQD (<i>Use sulfacetamide sodium</i>)	NF	
OVACE WASH LIQD (<i>Use sulfacetamide sodium</i>)	NF	
<i>selenium sulfide LOTN 2.5 %</i>	P	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>selenium sulfide SHAM 2.25 %</i>	NP		<i>alclometasone dipropionate OINT</i>	P	
SELSUN BLUE DAILY LOTN (<i>Use selenium sulfide</i>)	NF		APEXICON E CREA	NP	
SELSUN BLUE MEDICATED LOTN (<i>Use selenium sulfide</i>)	NF		<i>betamethasone dipropionate (topical) CREA</i>	NP	
SELSUN BLUE LOTN (<i>Use selenium sulfide</i>)	NF		<i>betamethasone dipropionate (topical) LOTN</i>	NP	
<i>sulfacetamide sodium GEL</i>	NP		<i>betamethasone dipropionate (topical) OINT</i>	NP	
<i>sulfacetamide sodium LIQD</i>	NP		<i>betamethasone dipropionate augmented CREA</i>	NP	
ZORYVE	NP		<i>betamethasone dipropionate augmented GEL 0.05 %</i>	NP	
Antivirals - Topical			<i>betamethasone dipropionate augmented LOTN</i>	NP	
<i>acyclovir topical CREA</i>	NP		<i>betamethasone dipropionate augmented OINT</i>	NP	
<i>acyclovir topical OINT</i>	NP		<i>betamethasone valerate CREA</i>	P	
DENAVIR (<i>Use penciclovir</i>)	NP		<i>betamethasone valerate FOAM</i>	NP	
<i>penciclovir</i>	NP		<i>betamethasone valerate LOTN</i>	P	
XERESE	NP		<i>betamethasone valerate OINT</i>	P	
ZOVIRAX CREA (<i>Use acyclovir topical</i>)	NP		BRYHALI LOTN	NP	
ZOVIRAX OINT (<i>Use acyclovir topical</i>)	NP		<i>calcipotriene-betamethasone dipropionate OINT</i>	NP	
Burn Products			<i>calcipotriene-betamethasone dipropionate SUSP</i>	NP	
<i>mafenide acetate PACK</i>	P		<i>clobetasol propionate emollient base 0.05 %</i>	P	
SILVADENE (<i>Use silver sulfadiazine</i>)	NP		<i>clobetasol propionate emulsion</i>	NP	
<i>silver sulfadiazine</i>	P				
SULFAMYLON CREA	P				
SULFAMYLON PACK 5 % (<i>Use mafenide acetate</i>)	NF				
Cauterizing Agents					
<i>silver nitrate SOLN</i>	NP				
Corticosteroids - Topical					
<i>alclometasone dipropionate CREA</i>	P				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>clobetasol propionate</i> CREA 0.05 %	P		<i>diflorasone diacetate</i> OINT	P	
<i>clobetasol propionate</i> FOAM	NP		DIPROLENE OINT (Use <i>betamethasone</i> <i>dipropionate augmented</i>)	NP	
<i>clobetasol propionate</i> GEL 0.05 %	P		DUOBRII	NP	
<i>clobetasol propionate</i> LIQD	NP		ENSTILAR FOAM	NP	
<i>clobetasol propionate</i> LOTN	NP		EPIFOAM FOAM	NP	
<i>clobetasol propionate</i> OINT 0.05 %	P		<i>fluocinolone acetonide</i> CREA	P	
<i>clobetasol propionate</i> SHAM	NP		<i>fluocinolone acetonide</i> OIL	P	
<i>clobetasol propionate</i> SOLN 0.05 %	P		<i>fluocinolone acetonide</i> OINT	P	
CLOBEX LOTN 0.05 % (Use <i>clobetasol</i> <i>propionate</i>)	NF		<i>fluocinolone acetonide</i> SOLN	P	
<i>clocortolone pivalate</i>	NP		<i>fluocinonide emulsified</i> <i>base</i>	P	
CLODAN	NP		<i>fluocinonide</i> CREA	P	
CLODERM (Use <i>clocortolone pivalate</i>)	NP		<i>fluocinonide</i> GEL	P	
DERMA-SMOOTH/FS BODY OIL (Use <i>fluocinolone acetonide</i>)	NP		<i>fluocinonide</i> OINT	P	
DERMA-SMOOTH/FS SCALP OIL (Use <i>fluocinolone acetonide</i>)	NP		<i>fluocinonide</i> SOLN	P	
<i>desonide</i> CREA	P		<i>flurandrenolide</i> CREA	NP	
<i>desonide</i> LOTN	NP		<i>flurandrenolide</i> LOTN	NP	
<i>desonide</i> OINT	P		<i>fluticasone propionate</i> CREA 0.05 %	P	
DESOWEN CREA (Use <i>desonide</i>)	NF		<i>fluticasone propionate</i> LOTN	NP	
<i>desoximetasone</i> CREA	NP		<i>fluticasone propionate</i> OINT	P	
<i>desoximetasone</i> GEL	NP		<i>halcinonide</i> CREA	NP	
<i>desoximetasone</i> LIQD	NP		<i>halobetasol propionate</i> CREA	P	
<i>desoximetasone</i> OINT	NP		<i>halobetasol propionate</i> FOAM	NP	
<i>diflorasone diacetate</i> CREA	P		<i>halobetasol propionate</i> OINT	P	
			HALOG CREA (Use <i>halcinonide</i>)	NP	
			HALOG OINT	NP	
			HALOG SOLN	NP	QL(3 ML daily)

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>hydrocortisone (topical) CREA 1 %, 2.5 %</i>	P	RX/OTC	OLUX-E (<i>Use clobetasol propionate emulsion</i>)	NF	
<i>hydrocortisone (topical) LOTN 2.5 %</i>	P		OLUX FOAM (<i>Use clobetasol propionate</i>)	NF	
<i>hydrocortisone (topical) OINT 1 %, 2.5 %</i>	P	RX/OTC	PANDEL	NP	
<i>hydrocortisone butyrate hydrophilic lipo base</i>	NP		<i>prednicarbate OINT</i>	NP	
<i>hydrocortisone butyrate CREA</i>	NP		RADIAURA CREA	NP	
<i>hydrocortisone butyrate LOTN</i>	NP		SYNALAR (CREAM)	NP	
<i>hydrocortisone butyrate OINT</i>	NP		SYNALAR (OINTMENT)	NP	
<i>hydrocortisone butyrate SOLN</i>	NP		SYNALAR TS	NP	
HYDROCORTISONE COMPLETE KIT THPK	NP		SYNALAR CREA (<i>Use fluocinolone acetonide</i>)	NP	
<i>hydrocortisone valerate CREA</i>	P	QL(1.5 GM daily)	SYNALAR OINT (<i>Use fluocinolone acetonide</i>)	NP	
<i>hydrocortisone valerate OINT</i>	P	QL(1.5 GM daily)	SYNALAR SOLN (<i>Use fluocinolone acetonide</i>)	NP	
HYDROXYM GEL	NP		TACLONEX OINT (<i>Use calcipotriene-betamethasone dipropionate</i>)	NP	
KENALOG AERS (<i>Use triamcinolone acetonide (topical)</i>)	NF		TACLONEX SUSP (<i>Use calcipotriene-betamethasone dipropionate</i>)	NP	
LEXETTE FOAM (<i>Use halobetasol propionate</i>)	NF		TEXACORT SOLN 2.5 %	NP	
LEXETTE FOAM (<i>Use halobetasol propionate</i>)	NP		TOPICORT SPRAY LIQD (<i>Use desoximetasone</i>)	NF	
LOCOID LIPOCREAM	NP		TOPICORT CREA 0.25 % (<i>Use desoximetasone</i>)	NP	
LOCOID LOTN (<i>Use hydrocortisone butyrate</i>)	NP		TOPICORT CREA 0.05 % (<i>Use desoximetasone</i>)	NF	
LUXIQ FOAM (<i>Use betamethasone valerate</i>)	NF		TOPICORT GEL (<i>Use desoximetasone</i>)	NP	
<i>mometasone furoate CREA</i>	P		TOPICORT OINT 0.05 % (<i>Use desoximetasone</i>)	NF	
<i>mometasone furoate OINT</i>	P		TOPICORT OINT (<i>Use desoximetasone</i>)	NF	
<i>mometasone furoate SOLN</i>	P		TOVET	NP	
			<i>triamcinolone acetonide (topical) AERS</i>	NP	
			<i>triamcinolone acetonide (topical) CREA</i>	P	

Drug Name	Drug Tier	Requirements/Limits
<i>triamcinolone acetonide (topical) LOTN</i>	P	
<i>triamcinolone acetonide (topical) OINT 0.05 %</i>	NP	
<i>triamcinolone acetonide (topical) OINT 0.1 %</i>	P	
<i>triamcinolone acetonide (topical) OINT 0.025 %, 0.1 %, 0.5 %</i>	P	
ULTRAVATE LOTN	NP	
VANOS CREA (Use <i>fluocinonide</i>)	NP	
Eczema Agents		
ADBRY SOSY	NP	SP; MP
CIBINQO	NP	SP
DUPIXENT SOAJ	NP	SP; MP
DUPIXENT SOAJ	P	SP; MP; PA
DUPIXENT SOSY 100 MG/0.67ML	NP	SP; MP
DUPIXENT SOSY	P	SP; MP; PA
OPZELURA	NP	
Emollient/Keratolytic Agents		
<i>urea CREA 39 %, 40 %, 41 %</i>	P	RX/OTC
UREA CREA	P	
<i>urea LOTN 40 %</i>	P	
Emollients		
<i>lactic acid (ammonium lactate) CREA</i>	NP	RX/OTC
<i>lactic acid (ammonium lactate) LOTN 12 %</i>	P	RX/OTC
Immunomodulating Agents - Topical		
<i>imiquimod 5 %</i>	P	AL(At least 10 yrs old)
<i>imiquimod 3.75 %</i>	NP	AL(At least 10 yrs old)
ZYCLARA (Use <i>imiquimod</i>)	NP	AL(At least 10 yrs old)

Drug Name	Drug Tier	Requirements/Limits
ZYCLARA PUMP (Use <i>imiquimod</i>)	NP	AL(At least 10 yrs old)
ZYCLARA PUMP	NP	AL(At least 10 yrs old)
Immunosuppressive Agents - Topical		
ELIDEL (Use <i>pimecrolimus</i>)	P	PA
HYFTOR	NP	
<i>pimecrolimus</i>	P	PA
PROTOPIC OINT 0.03 % (Use <i>tacrolimus (topical)</i>)	P	PA
PROTOPIC OINT 0.1 % (Use <i>tacrolimus (topical)</i>)	NP	
<i>tacrolimus (topical) OINT</i>	P	PA
Keratolytic/Antimitotic/Vesicant Agents		
BENSAL HP OINT	NP	RX/OTC
COMPOUND W FAST ACTING/CONSEAL GEL (Use <i>salicylic acid</i>)	NF	
CONDYLOX GEL (Use <i>podofilox</i>)	P	
PODOCON-25 SOLN	NP	
<i>podofilox GEL</i>	P	
<i>podofilox SOLN</i>	P	
SALICATE LIQD	NP	
<i>salicylic acid FOAM</i>	NP	
<i>salicylic acid GEL 6 %</i>	P	
<i>salicylic acid LIQD 27.5 %</i>	P	
SALICYLIC ACID OINT	P	RX/OTC
SALYCIM CREA	NP	
UREA-SALICYLIC ACID CREA	NP	
YCANTH SOLN	NP	
Local Anesthetics - Topical		
<i>capsaicin CREA 0.025 %</i>	P	QL(2 GM daily)
<i>capsaicin CREA 0.075 %</i>	P	
<i>lidocaine hcl CREA 4.12 %</i>	NP	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>lidocaine hcl CREA 3 %</i>	P		SENSI-CARE MOISTURIZING CREA	P	
<i>lidocaine hcl GEL 2.8 %</i>	NP	RX/OTC	<i>skin protectants, misc. CREA</i>	P	
<i>lidocaine hcl PRSY</i>	P	QL(0.67 ML daily)	THERASEAL HAND PROTECTION LOTN	P	
<i>lidocaine hcl SOLN</i>	P	QL(1.67 ML daily)	UNIVERSAL REMOVER WIPES MISC	P	
<i>lidocaine OINT</i>	P		<i>witch hazel (hamamelis virginiana) PADS</i>	P	
<i>lidocaine-prilocaine CREA</i>	NP		XERAC AC	NP	
<i>lidocaine-prilocaine KIT</i>	NP		Phosphodiesterase 4 (PDE4) Inhibitors - Topical		
<i>lidocaine PTCH 5 %</i>	P		EUCRISA	P	PA
LIDODERM PTCH (Use <i>lidocaine</i>)	NP		Rosacea Agents		
LIDOTRAL CREA	NP		<i>azelaic acid GEL</i>	NP	
LIDOTRAL-MENTHOL LIQD	NP		<i>brimonidine tartrate (topical)</i>	NP	
LIDOTRAN CREA	NP		<i>doxycycline (rosacea) PO</i>	NP	
QUTENZA	NP		FINACEA FOAM	NP	
QUTENZA (2 PATCH)	NP		FINACEA GEL (Use <i>azelaic acid</i>)	NP	
QUTENZA (4 PATCH)	NP		<i>ivermectin (rosacea)</i>	NP	
XYLIDERM	NP		METROLOTION LOTN (Use <i>metronidazole (topical)</i>)	NF	
ZTLIDO PTCH	NP		<i>metronidazole (topical) CREA</i>	P	QL(1.5 GM daily)
Misc. Topical			<i>metronidazole (topical) GEL</i>	P	
AVEENO BABY CALMING COMFORT LOTN (Use <i>dimethicone (topical)</i>)	NF		<i>metronidazole (topical) LOTN</i>	P	
AVEENO SKIN RELIEF LOTN (Use <i>dimethicone (topical)</i>)	NF		NORITATE CREA	NP	
BASIS FACIAL MOISTURIZER CREA	P		RHOFADE	NP	
CAVILON NO STING BARRIER FILM MISC	P		ROSADAN	NP	
EUCERIN ORIGINAL HEALING CREA (Use <i>skin protectants, misc.</i>)	NF		Scabicides & Pediculicides		
HYDROCERIN CREA	P		<i>crotamiton LOTN</i>	NP	
<i>isopropyl alcohol (skin cleanser) MISC</i>	P		ELIMITE CREA (Use <i>permethrin</i>)	NF	
NO-STING SKIN-PREP MISC	P		<i>lindane SHAM</i>	NP	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>malathion</i>	NP		ADVOCATE REDI-CODE STRP	NP	QL(4 EA daily); MP; RX/OTC
NATROBA (Use <i>spinosad</i>)	P	QL(4 ML daily)	ADVOCATE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
OVIDE (Use <i>malathion</i>)	NF		AGAMATRIX AMP TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
<i>permethrin CREA</i>	P	QL(2 GM daily)	AGAMATRIX JAZZ TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
<i>permethrin LIQD EX</i>	P		AGAMATRIX KEYNOTE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
<i>pyrethrins-piperonyl butoxide SHAM 4 %-0.33 %</i>	P		AGAMATRIX PRESTO TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
<i>spinosad</i>	NP	QL(4 ML daily)	ASSURE 3 TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
Tar Products			ASSURE 4 TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
<i>coal tar extract SHAM 0.5 %</i>	P		ASSURE II CHECK STRP	NP	QL(4 EA daily); MP; RX/OTC
DHS TAR GEL SHAM (Use <i>coal tar extract</i>)	NF		ASSURE II STRP	NP	QL(4 EA daily); MP; RX/OTC
DHS TAR SHAM (Use <i>coal tar extract</i>)	NF		ASSURE PLATINUM STRP	NP	QL(4 EA daily); MP; RX/OTC
IONIL-T SHAM (Use <i>coal tar extract</i>)	NF		ASSURE PRISM MULTI TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
NEUTROGENA T/GEL SHAM 0.5 % (Use <i>coal tar extract</i>)	NF		ASSURE PRO TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
Wound Care Products			BINAXNOW COVID-19 AG HOME TEST KIT	P	
VYJUVEK	NP		BIOTEL CARE TEST STRIPS STRP	NP	QL(4 EA daily); MP; RX/OTC
DIAGNOSTIC PRODUCTS			BLOOD GLUCOSE TEST STRIPS 333 STRP	NP	QL(4 EA daily); MP; RX/OTC
Diagnostic Tests			BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
ACCU-CHEK AVIVA PLUS STRP	NP	QL(4 EA daily); MP; RX/OTC	BLULINK GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
ACCU-CHEK GUIDE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	CAREONE BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
ACCU-CHEK SMARTVIEW STRP	NP	QL(4 EA daily); MP; RX/OTC	CARESENS N GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
ACCUTREND GLUCOSE STRP	NP	QL(4 EA daily); MP; RX/OTC	CARETOUCH TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
ADVANCE INTUITION TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	CHEMSTRIP 10 MD	P	
ADVANCE MICRO-DRAW TEST STRP	NP	QL(4 EA daily); MP; RX/OTC			
ADVOCATE REDI-CODE+ TEST STRP	NP	QL(4 EA daily); MP; RX/OTC			

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CHEMSTRIP 10/SG	P		DIASTIX REAGENT	P	
CHEMSTRIP 2 GP	P		DIATHRIVE BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
CHEMSTRIP 5 OB	P		DIATHRIVE GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
CHEMSTRIP 7	P		DIATHRIVE+ GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
CHEMSTRIP 9	P		DIATRUE PLUS TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
CHEMSTRIP K STRP	P		DUO-CARE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
CLEVER CHEK AUTO-CODE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	EASY PLUS II GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
CLEVER CHEK AUTO-CODE VOICE STRP	NP	QL(4 EA daily); MP; RX/OTC	EASY STEP TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
CLEVER CHEK TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	EASY TALK BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
CLEVER CHOICE AUTO-CODE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	EASY TALK PLUS II TEST STRIPS STRP	NP	QL(4 EA daily); MP; RX/OTC
CLEVER CHOICE MICRO TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	EASY TOUCH HEALTHPRO GLUCOSE STRP	NP	QL(4 EA daily); MP; RX/OTC
CLEVER CHOICE NO CODING STRP	NP	QL(4 EA daily); MP; RX/OTC	EASY TOUCH TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
CLEVER CHOICE TALK SYSTEM STRP	NP	QL(4 EA daily); MP; RX/OTC	EASY TRAK BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
CLINITEST RAPID COVID-19 TEST KIT	P		EASY TRAK II GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
CONTOUR NEXT TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	EASYGLUCO STRP	NP	QL(4 EA daily); MP; RX/OTC
CONTOUR TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	EASYMAX 15 TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
COOL BLOOD GLUCOSE TEST STRIPS STRP	NP	QL(4 EA daily); MP; RX/OTC	EASYMAX TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
COVID-19 AT-HOME TEST KIT	P		EASYPRO BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
COVID-19 OTC ANTIGEN 1-PACK KIT	P		EASYPRO PLUS STRP	NP	QL(4 EA daily); MP; RX/OTC
COVID-19 OTC ANTIGEN 2-PACK KIT	P		ELEMENT COMPACT TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
CVS ADVANCED GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	ELEMENT TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
CVS GLUCOSE METER TEST STRIPS STRP	NP	QL(4 EA daily); MP; RX/OTC	ELLUME COVID-19 HOME TEST KIT	P	
D-CARE BLOOD GLUCOSE STRP	NP	QL(4 EA daily); MP; RX/OTC			
DIASTIX	P				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
EMBRACE BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	FORA TN'G/TN'G VOICE STRP	NP	QL(4 EA daily); MP; RX/OTC
EMBRACE EVO BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	FORA V10 BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
EMBRACE PRO BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	FORA V12 BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
EMBRACE TALK BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	FORA V20 BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
EMBRACE WAVE BLOOD GLUCOSE STRP	NP	QL(4 EA daily); MP; RX/OTC	FORA V30A BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
EQ BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	FORACARE GD40 TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
EVOLUTION AUTOCODE STRP	NP	QL(4 EA daily); MP; RX/OTC	FORACARE PREMIUM V10 TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
FIFTY50 BLOOD GLUCOSE TEST 2.0 STRP	NP	QL(4 EA daily); MP; RX/OTC	FORACARE TEST N GO TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
FLOWFLEX COVID-19 AG HOME TEST KIT	P		FORTISCARE G1 TEST STRIP STRP	NP	QL(4 EA daily); MP; RX/OTC
FORA 6 CONNECT/GTEL TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	FORTISCARE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
FORA 6 CONNECT STRP	NP	QL(4 EA daily); MP; RX/OTC	FREESTYLE INSULINX TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
FORA BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	FREESTYLE LITE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
FORA D15G BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	FREESTYLE PRECISION NEO TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
FORA D20 BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	FREESTYLE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
FORA D40/G31 BLOOD GLUCOSE STRP	NP	QL(4 EA daily); MP; RX/OTC	GE100 BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
FORA G20 BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	GENULTIMATE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
FORA G30/PREM V10 BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	GHT TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
FORA GD20 TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	GLUCO PERFECT 3 TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
FORA GD50 BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	GLUCOCARD 01 SENSOR PLUS STRP	NP	QL(4 EA daily); MP; RX/OTC
FORA GTEL BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	GLUCOCARD EXPRESSION TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
FORA TN'G ADVANCE PRO STRP	NP	QL(4 EA daily); MP; RX/OTC	GLUCOCARD SHINE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
GLUCOCARD VITAL TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	KROGER BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
GLUCOCARD X-SENSOR STRP	NP	QL(4 EA daily); MP; RX/OTC	KROGER HEALTHPRO GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
GLUCOCOM TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	KROGER PREMIUM GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
GLUCONAVII BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	LIBERTY NEXT GENERATION TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
GLUCOSE METER TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	LIBERTY TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
GNP EASY TOUCH GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	LUCIRA CHECK IT COVID-19 TEST KIT	P	RX/OTC
GNP TRUE METRIX GLUCOSE STRIPS STRP	NP	QL(4 EA daily); MP; RX/OTC	LUCIRA COVID-19 ALL-IN-ONE KIT	P	RX/OTC
GNP TRUETRACK SMART SYSTEM STRP	NP	QL(4 EA daily); MP; RX/OTC	MEIJER BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
GNP TRUETRACK TEST STRIPS STRP	NP	QL(4 EA daily); MP; RX/OTC	MEIJER ESSENTIAL GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
GOJJI BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	MEIJER TRUETEST TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
GOJJI BLOOD TEST STRIP/LANCETS STRP	NP	QL(4 EA daily); MP; RX/OTC	MEIJER TRUETRACK TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
GOODSENSE BLOOD GLUCOSE STRP	NP	QL(4 EA daily); MP; RX/OTC	MICRODOT TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
HW EMBRACE PRO GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	MM EASY TOUCH GLUCOSE STRP	NP	QL(4 EA daily); MP; RX/OTC
HW EMBRACE TALK GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	MULTISTIX 10 SG	P	
IGLUCOSE TEST STRIPS STRP	NP	QL(4 EA daily); MP; RX/OTC	MYGLUCOHEALTH TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
IHEALTH COVID-19 RAPID TEST KIT	P		NEUTEK 2TEK TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
IN TOUCH BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	NOVA MAX GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
INFINITY BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	ON CALL EXPRESS BLOOD GLUCOSE STRP	NP	QL(4 EA daily); MP; RX/OTC
INFINITY VOICE STRP	NP	QL(4 EA daily); MP; RX/OTC	ON/GO COVID-19 ANTIGEN TEST KIT	P	
INTELISWAB COVID-19 RAPID TEST KIT	P		ONE DROP TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
KETONE TEST STRP	P		ONETOUCH ULTRA BLUE TEST STRP	P	QL(4 EA daily); MP; RX/OTC
KETOSTIX STRP	P				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ONETOUCH ULTRA TEST STRP	P	QL(4 EA daily); MP; RX/OTC	RELION KETONE TEST STRP	P	
ONETOUCH ULTRA STRP	P	QL(4 EA daily); MP; RX/OTC	RELION PREMIER TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
ONETOUCH VERIO STRP	P	QL(4 EA daily); MP; RX/OTC	RELION PRIME TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
ONETOUCH VERIO STRP	NP	QL(4 EA daily); MP; RX/OTC	RELION TRUE METRIX TEST STRIPS STRP	NP	QL(4 EA daily); MP; RX/OTC
OPTIUMEZ TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	RELION ULTIMA TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
PHARMACIST CHOICE AUTOCODE STRP	NP	QL(4 EA daily); MP; RX/OTC	REXALL BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
PHARMACIST CHOICE NO CODING STRP	NP	QL(4 EA daily); MP; RX/OTC	RIGHTEST GS100 BLOOD GLUCOSE STRP	NP	QL(4 EA daily); MP; RX/OTC
PIP BLOOD GLUCOSE TEST STRIP STRP	NP	QL(4 EA daily); MP; RX/OTC	RIGHTEST GS300 BLOOD GLUCOSE STRP	NP	QL(4 EA daily); MP; RX/OTC
POCKETCHEM EZ TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	RIGHTEST GS550 BLOOD GLUCOSE STRP	NP	QL(4 EA daily); MP; RX/OTC
PRECISION XTRA BLOOD GLUCOSE STRP	NP	QL(4 EA daily); MP; RX/OTC	RIGHTEST GT333 BLOOD GLUCOSE STRP	NP	QL(4 EA daily); MP; RX/OTC
PREMIUM BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	RIGHTEST GT333 GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
PRO VOICE V8/V9 GLUCOSE STRP	NP	QL(4 EA daily); MP; RX/OTC	SMART SENSE PREMIUM TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
PRODIGY NO CODING BLOOD GLUC STRP	NP	QL(4 EA daily); MP; RX/OTC	SMART SENSE VALUE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
PTS PANELS EGLU TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	SMARTTEST BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
QUICKTEK TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	SOLUS V2 TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
QUICKVUE AT-HOME COVID-19 TEST KIT	P		SUPREME TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
QUINTET AC BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	TGT BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
QUINTET BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	TRUE FOCUS BLOOD GLUCOSE STRIP STRP	NP	QL(4 EA daily); MP; RX/OTC
REFUAH PLUS BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	TRUE METRIX BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
RELION BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	TRUETEST TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
RELION CONFIRM/MICRO TEST STRP	NP	QL(4 EA daily); MP; RX/OTC	TRUETRACK TEST STRP	NP	QL(4 EA daily); MP; RX/OTC

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Drug Name	Drug Tier	Requirements/Limits
UNISTRIP1 GENERIC STRP	NP	QL(4 EA daily); MP; RX/OTC
VERASENS BLOOD GLUCOSE TEST STRP	NP	QL(4 EA daily); MP; RX/OTC
VIVAGUARD INO TEST STRIPS STRP	NP	QL(4 EA daily); MP; RX/OTC

DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes

Digestive Enzymes

CREON CPEP PO	P	
LACTAID FAST ACT TABS PO (Use lactase)	NF	
LACTAID TABS PO (Use lactase)	NF	
<i>lactase TABS PO 3000 UNIT</i>	P	
PERTZYE CPEP PO	NP	
VIOKACE TABS	NP	
ZENPEP CPEP PO 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT-10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 252600 UNIT-189600 UNIT-60000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT	P	

DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure

Carbonic Anhydrase Inhibitors

<i>acetazolamide CP12 PO</i>	P	QL(4 EA daily); MP
<i>acetazolamide TABS PO 250 MG</i>	P	QL(2 EA daily); MP
<i>acetazolamide TABS PO 125 MG</i>	P	MP
<i>dichlorphenamide PO</i>	NP	SP

Drug Name	Drug Tier	Requirements/Limits
KEVEYIS PO (Use dichlorphenamide)	NP	SP
<i>methazolamide TABS PO</i>	P	MP

Diuretic Combinations

<i>ALDACTAZIDE PO (Use spironolactone & hydrochlorothiazide)</i>	NF	MP
<i>amiloride & hydrochlorothiazide PO</i>	P	MP
<i>MAXZIDE-25 TABS PO (Use triamterene & hydrochlorothiazide)</i>	NP	QL(1 EA daily); MP
<i>MAXZIDE TABS PO (Use triamterene & hydrochlorothiazide)</i>	NP	QL(1 EA daily); MP
<i>spironolactone & hydrochlorothiazide PO</i>	P	MP
<i>triamterene & hydrochlorothiazide CAPS PO 25 MG-37.5 MG</i>	P	QL(1 EA daily); MP
<i>triamterene & hydrochlorothiazide TABS PO</i>	P	QL(1 EA daily); MP

Loop Diuretics

<i>bumetanide TABS PO</i>	P	MP
<i>bumetanide TABS PO</i>	P	MP
<i>BUMEX TABS PO 0.5 MG (Use bumetanide)</i>	NP	MP
<i>EDECIN PO (Use ethacrynic acid)</i>	NP	MP
<i>ethacrynic acid PO</i>	P	MP
<i>furosemide SOLN PO 8 MG/ML, 10 MG/ML</i>	P	MP
<i>furosemide TABS PO</i>	P	MP
<i>furosemide TABS PO</i>	P	MP
<i>LASIX TABS PO (Use furosemide)</i>	NP	MP
<i>torseamide TABS PO 20 MG</i>	P	MP
<i>torseamide TABS PO 5 MG, 10 MG, 100 MG</i>	P	QL(1 EA daily); MP

Drug Name	Drug Tier	Requirements/Limits
<i>toremide TABS PO 20 MG</i>	P	MP
Potassium Sparing Diuretics		
<i>ALDACTONE TABS PO (Use spironolactone)</i>	NP	MP
<i>amiloride hcl TABS PO</i>	P	QL(12 EA daily); MP
<i>CAROSPIR SUSP (Use spironolactone)</i>	NP	MP
<i>spironolactone SUSP</i>	NP	MP
<i>spironolactone TABS PO 50 MG, 100 MG</i>	P	MP
<i>spironolactone TABS PO</i>	P	MP
<i>triamterene CAPS PO</i>	P	MP
Thiazides and Thiazide-Like Diuretics		
<i>chlorthalidone PO 25 MG, 50 MG</i>	P	QL(4 EA daily); MP
<i>DIURIL SUSP PO</i>	P	MP
<i>hydrochlorothiazide CAPS PO</i>	P	MP
<i>hydrochlorothiazide TABS PO</i>	P	MP
<i>hydrochlorothiazide TABS PO</i>	P	MP
<i>indapamide TABS PO 1.25 MG, 2.5 MG</i>	P	MP
<i>indapamide TABS PO 1.25 MG, 2.5 MG</i>	P	MP
<i>metolazone PO</i>	P	MP
<i>metolazone PO</i>	P	MP
<i>THALITONE PO</i>	NP	
ENDOCRINE AND METABOLIC AGENTS - MISC.		
- Drugs to Treat Bone Disease and Regulate Hormones		
Adrenal Steroid Inhibitors		
<i>ISTURISA</i>	NP	QL(3 EA daily); SP
<i>RECORLEV</i>	NP	SP
Bone Density Regulators		

Drug Name	Drug Tier	Requirements/Limits
<i>ACTONEL TABS PO 35 MG, 150 MG (Use risedronate sodium)</i>	NP	MP
<i>alendronate sodium SOLN PO</i>	P	MP
<i>alendronate sodium TABS PO 35 MG, 70 MG</i>	P	QL(0.143 EA daily); MP
<i>alendronate sodium TABS PO 10 MG</i>	P	QL(1 EA daily); MP
<i>AELVIA TBEC PO (Use risedronate sodium)</i>	NP	MP
<i>BINOSTO TBEC PO</i>	NP	
<i>calcitonin (salmon) NA</i>	P	MP
<i>FOSAMAX PLUS D PO</i>	NP	
<i>FOSAMAX TABS PO 70 MG (Use alendronate sodium)</i>	NP	QL(0.143 EA daily); MP
<i>ibandronate sodium TABS PO</i>	NP	MP
<i>risedronate sodium TABS PO</i>	NP	
<i>risedronate sodium TBEC PO</i>	NP	MP
GnRH/LHRH Antagonists		
<i>ORILISSA</i>	P	SP; PA
Growth Hormone Releasing Hormones (GHRH)		
<i>EGRIFTA SV</i>	NP	SP
Growth Hormones		
<i>GENOTROPIN MINIQUICK PRSY</i>	P	SP; PA
<i>GENOTROPIN CART SC</i>	P	SP; PA
<i>HUMATROPE CART IJ</i>	NP	SP
<i>NGENLA</i>	NP	SP
<i>NORDITROPIN FLEXPROM SOPN</i>	NP	SP; MP
<i>NUTROPIN AQ NUSPIN 10 SOPN</i>	NP	SP; MP
<i>NUTROPIN AQ NUSPIN 20 SOPN</i>	NP	SP; MP

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
NUTROPIN AQ NUSPIN 5 SOPN	NP	SP; MP	<i>carglumic acid</i>	P	SP; PA
OMNITROPE SOCT	NP	SP; MP	CARNITOR SF SOLN PO (Use levocarnitine (metabolic modifiers))	NP	MP
OMNITROPE SOLR SC	NP	SP	CARNITOR SOLN PO 1 GM/10ML (Use levocarnitine (metabolic modifiers))	NP	MP
SAIZEN IJ	NP	SP	CARNITOR SOLN PO 1 GM/10ML (Use levocarnitine (metabolic modifiers))	NF	
SEROSTIM SC 4 MG, 5 MG, 6 MG	NP	SP	CARNITOR TABS PO (Use levocarnitine (metabolic modifiers))	NP	
SKYTROFA	NP	SP; MP	<i>cinacalcet hcl PO</i>	NP	SP
SOGROYA	NP	SP	CYSTADANE PO (Use <i>betaine</i>)	NP	SP
ZOMACTON SOLR SC	NP	SP	<i>doxercalciferol CAPS PO</i>	P	
Hormone Receptor Modulators			GALAFOLD	NP	SP
EVISTA PO (Use <i>raloxifene hcl</i>)	NP	MP	KUVAN PACK (Use <i>sapropterin dihydrochloride</i>)	NP	SP
EVISTA PO (Use <i>raloxifene hcl</i>)	NF	MP	KUVAN TABS (Use <i>sapropterin dihydrochloride</i>)	NP	SP
OSPHENA PO	NP		<i>levocarnitine (metabolic modifiers) SOLN PO 1 GM/10ML</i>	NP	MP
<i>raloxifene hcl PO</i>	NP	MP	<i>levocarnitine (metabolic modifiers) TABS PO</i>	NP	
<i>raloxifene hcl PO</i>	NP	MP	<i>nitisinone CAPS PO</i>	P	SP
Insulin-Like Growth Factors (Somatomedins)			NITYR TABS	NP	SP
INCRELEX	NP	SP	OLPRUVA (2 GM DOSE) THPK	NP	SP
LHRH/GnRH Agonist Analog Pituitary Suppressants			OLPRUVA (3 GM DOSE) THPK	NP	SP
SYNAREL	NP	SP	OLPRUVA (4 GM DOSE) THPK	NP	SP
Metabolic Modifiers			OLPRUVA (5 GM DOSE) THPK	NP	SP
<i>betaine PO</i>	NP	SP	OLPRUVA (6 GM DOSE) THPK	NP	SP
BUPHENYL POWD PO (Use <i>sodium phenylbutyrate</i>)	NP	SP			
BUPHENYL TABS PO (Use <i>sodium phenylbutyrate</i>)	NP	SP			
<i>calcitriol CAPS PO</i>	P				
<i>calcitriol CAPS PO</i>	P				
<i>calcitriol SOLN PO</i>	P	MP			
CARBAGLU (Use <i>carglumic acid</i>)	NP	SP			
<i>carglumic acid</i>	NP	SP			

Drug Name	Drug Tier	Requirements/Limits
OLPRUVA (6.67 GM DOSE) THPK	NP	SP
ORFADIN CAPS PO (Use nitisinone)	P	SP
ORFADIN SUSP	NP	SP; MP
paricalcitol CAPS PO	NP	
PHEBURANE PLLT	NP	
RAVICTI PO	NP	SP; MP
RAYALDEE	NP	
ROCALTROL CAPS PO (Use calcitriol)	NP	
ROCALTROL SOLN PO (Use calcitriol)	NP	MP
sapropterin dihydrochloride PACK	NP	SP
sapropterin dihydrochloride TABS	NP	SP
SENSIPAR PO (Use cinacalcet hcl)	NP	SP
sodium phenylbutyrate POWD PO	NP	SP
sodium phenylbutyrate TABS PO	NP	SP
ZEMPLAR CAPS PO 1 MCG, 2 MCG (Use paricalcitol)	NP	
Mineralocorticoid Receptor Antagonists		
KERENDIA PO	P	PA
Posterior Pituitary Hormones		
DDAVP TABS PO (Use desmopressin acetate)	NP	QL(6 EA daily); MP
desmopressin acetate spray	P	MP
desmopressin acetate spray refrigerated 0.01 %	P	MP
desmopressin acetate TABS PO	P	QL(6 EA daily); MP
NOCDURNA SUBL	NP	
Progesterone Receptor Antagonists		

Drug Name	Drug Tier	Requirements/Limits
MIFEPREX (Use mifepristone)	P	
mifepristone	P	
Prolactin Inhibitors		
cabergoline PO	P	
Somatostatic Agents		
LANREOTIDE ACETATE	NP	SP; MP
MYCAPSSA CPDR	NP	SP
octreotide acetate SOLN	NP	SP; MP
octreotide acetate SOSY	NP	SP; MP
SANDOSTATIN LAR DEPOT KIT (Use octreotide acetate)	NP	SP
SANDOSTATIN LAR DEPOT KIT	NP	SP
SANDOSTATIN SOLN 50 MCG/ML, 100 MCG/ML, 500 MCG/ML (Use octreotide acetate)	NP	SP; MP
SIGNIFOR	NP	SP; MP
SIGNIFOR LAR	NP	SP
SOMATULINE DEPOT	NP	SP; MP
Vasopressin Receptor Antagonists		
JYNARQUE TABS	NP	SP
JYNARQUE TBPK	NP	SP
SAMSCA TABS (Use tolvaptan)	NP	SP
tolvaptan TABS	NP	SP
ESTROGENS - Hormone Replacement/Modifying Drugs		
Estrogen Combinations		
ACTIVELLA TABS PO 1 MG-0.5 MG (Use estradiol & norethindrone acetate)	NP	QL(1 EA daily)
ANGELIQ	NP	
BIJUVA	NP	
CLIMARA PRO	NP	
COMBIPATCH PTTW	P	

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Updated December 1, 2024

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Drug Name	Drug Tier	Requirements/Limits
DUAVEE	NP	
<i>esterified estrogens & methyltestosterone PO</i>	P	
<i>estradiol & norethindrone acetate TABS PO</i>	P	QL(1 EA daily)
MYFEMBREE	P	PA
<i>norethindrone acetate-ethinyl estradiol PO</i>	NP	QL(1 EA daily)
ORIAHNN	P	PA
PREFEST PO	NP	
PREMPHASE PO	P	QL(1 EA daily)
PREMPRO PO	P	QL(1 EA daily)
Estrogens		
CLIMARA PTWK 0.025 MG/24HR, 0.0375 MG/24HR, 0.05 MG/24HR, 0.06 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR (Use estradiol)	NP	
DELESTROGEN (Use estradiol valerate)	NP	
DEPO-ESTRADIOL	NP	
DIVIGEL GEL (Use estradiol)	NP	
ELESTRIN GEL	NP	
ESTRACE TABS PO (Use estradiol)	NP	
<i>estradiol valerate</i>	NP	
<i>estradiol GEL</i>	NP	
<i>estradiol PTTW</i>	P	
<i>estradiol PTWK</i>	P	
<i>estradiol TABS PO</i>	P	
EVAMIST SOLN	NP	MP
MENEST PO	P	
MENOSTAR PTWK	NP	
MINIVELLE PTTW (Use estradiol)	NP	
PREMARIN TABS PO	P	QL(1 EA daily)
VIVELLE-DOT PTTW (Use estradiol)	NF	

Drug Name	Drug Tier	Requirements/Limits
VIVELLE-DOT PTTW (Use estradiol)	NF	
VIVELLE-DOT PTTW (Use estradiol)	NP	
FLUOROQUINOLONES - Drugs to Treat Bacterial Infections		
Fluoroquinolones		
BAXDELA TABS	NP	QL(28 EA per fill retail); 1 max fill(s) per 30 day(s) retail; AL(At least 16 yrs old)
<i>ciprofloxacin hcl TABS PO 250 MG, 500 MG, 750 MG</i>	P	
<i>ciprofloxacin hcl TABS PO 100 MG</i>	P	QL(6 EA per fill retail)
<i>ciprofloxacin SUSR PO</i>	P	
CIPRO SUSR PO	NP	
CIPRO TABS PO 250 MG, 500 MG (Use <i>ciprofloxacin hcl</i>)	NP	
<i>levofloxacin SOLN PO</i>	P	
<i>levofloxacin TABS PO</i>	P	QL(1 EA daily)
<i>moxifloxacin hcl TABS PO</i>	P	
<i>ofloxacin PO 300 MG, 400 MG</i>	NP	
GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs		
5-HT4 Receptor Agonists		
MOTEGRITY PO	NP	
Agents for Chronic Idiopathic Constipation (CIC)		
TRULANCE PO	NP	
Antiflatulents		
GAS-X EXTRA STRENGTH CHEW PO (Use <i>simethicone</i>)	NF	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MYLICON INFANTS GAS RELIEF SUSP PO (Use simethicone)	NF		metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML	P	
PHAZYME ULTRA STRENGTH CAPS PO (Use simethicone)	NF		metoclopramide hcl TABS PO	P	
simethicone CAPS PO 125 MG, 180 MG	P		REGLAN TABS PO (Use metoclopramide hcl)	NP	
simethicone CHEW PO	P		Inflammatory Bowel Agents		
simethicone SUSP PO	P		APRISO CP24 (Use mesalamine)	NP	
Bile Acid Synthesis Disorder Agents			ASACOL HD TBEC PO (Use mesalamine)	NF	
CHOLBAM	NP	SP	AVSOLA	NP	SP
Farnesoid X Receptor (FXR) Agonists			AZULFIDINE EN-TABS TBEC PO (Use sulfasalazine)	NP	
OCALIVA	NP	SP	AZULFIDINE TABS PO (Use sulfasalazine)	NF	
Gallstone Solubilizing Agents			AZULFIDINE TABS PO (Use sulfasalazine)	NP	
CHENODAL PO	NP	SP	balsalazide disodium CAPS PO	P	QL(9 EA daily)
RELTONE CAPS PO	NP		CANASA SUPP PR (Use mesalamine)	NP	QL(1 EA daily)
URSO 250 TABS PO (Use ursodiol)	NP		CIMZIA (2 SYRINGE) PSKT	P	SP; PA
URSO FORTE TABS PO (Use ursodiol)	NP		CIMZIA KIT	NP	SP
ursodiol CAPS PO	P	QL(3 EA daily)	CIMZIA-STARTER PSKT	P	SP; PA
ursodiol TABS PO	NP		COLAZAL CAPS PO (Use balsalazide disodium)	NP	QL(9 EA daily)
Gastrointestinal Antiallergy Agents			DELZICOL CPDR PO (Use mesalamine)	NP	
cromolyn sodium (mastocytosis) PO	P		DIPENTUM PO	NP	
GASTROCROM PO (Use cromolyn sodium (mastocytosis))	NP		ENTYVIO PEN SOAJ	NP	SP
Gastrointestinal Chloride Channel Activators			ENTYVIO SOLR	NP	SP
AMITIZA PO (Use lubiprostone)	NF		INFLECTRA SOLR	NP	SP
AMITIZA PO (Use lubiprostone)	NP		INFLIXIMAB	NP	SP
lubiprostone PO	NP		LIALDA TBEC PO (Use mesalamine)	NF	
Gastrointestinal Stimulants			LIALDA TBEC PO (Use mesalamine)	NP	
GIMOTI SOLN NA	NP	SP			

IL MHP Medicaid

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Drug Name	Drug Tier	Requirements/Limits
<i>mesalamine w/ cleanser PR</i>	NP	
<i>mesalamine CP24</i>	NP	
<i>mesalamine CPCR PO</i>	P	QL(8 EA daily)
<i>mesalamine CPDR PO</i>	NP	
<i>mesalamine ENEM PR</i>	P	
<i>mesalamine SUPP PR</i>	P	QL(1 EA daily)
<i>mesalamine TBEC PO</i>	NP	
OMVOH SOAJ	NP	SP
OMVOH SOLN	NP	SP
PENTASA CPCR PO (Use <i>mesalamine</i>)	P	QL(8 EA daily)
PENTASA CPCR PO	P	QL(8 EA daily)
REMICADE	NP	SP
RENFLXIS	NP	SP
ROWASA PR (Use <i>mesalamine w/ cleanser</i>)	NP	
SFROWASA ENEM PR	P	
SKYRIZI SOCT	NP	SP
SKYRIZI SOLN	NP	SP
STELARA 130 MG/26ML	NP	SP
<i>sulfasalazine TABS PO</i>	P	
<i>sulfasalazine TBEC PO</i>	P	
Intestinal Acidifiers		
<i>lactulose (encephalopathy) PO</i>	P	MP
Irritable Bowel Syndrome (IBS) Agents		
<i>alosetron hcl PO</i>	NP	
IBSRELA	NP	
LINZESS	NP	
LOTRONEX PO (Use <i>alosetron hcl</i>)	NP	
VIBERZI	NP	
Peripheral Opioid Receptor Antagonists		
<i>alvimopan PO</i>	NP	
ENTEREG PO (Use <i>alvimopan</i>)	NP	

Drug Name	Drug Tier	Requirements/Limits
MOVANTIK PO	NP	
RELISTOR SOLN	NP	
RELISTOR TABS	NP	
SYMPROIC PO	NP	
Phosphate Binder Agents		
AURYXIA	NP	
<i>calcium acetate (phosphate binder) CAPS PO</i>	P	
<i>calcium acetate (phosphate binder) TABS PO</i>	P	RX/OTC
FOSRENOL CHEW PO (Use <i>lanthanum carbonate</i>)	NP	
FOSRENOL PACK	P	
<i>lanthanum carbonate CHEW PO</i>	P	
PHOSLYRA SOLN	NP	MP
RENAGEL PO (Use <i>sevelamer hcl</i>)	NF	
RENVELA PACK (Use <i>sevelamer carbonate</i>)	NP	
RENVELA TABS PO (Use <i>sevelamer carbonate</i>)	NP	QL(8 EA daily)
<i>sevelamer carbonate PACK</i>	NP	
<i>sevelamer carbonate TABS PO</i>	P	QL(8 EA daily)
<i>sevelamer hcl PO</i>	P	
VELPHORO	NP	
Short Bowel Syndrome (SBS) Agents		
GATTEX	NP	SP
GENITOURINARY AGENTS - MISCELLANEOUS - Miscellaneous Drugs to Treat Reproductive Organs and Urinary System		
Acidifiers		
K-PHOS NO 2 PO	NP	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Alkalinizers			CARDURA XL	NP	MP
ORACIT PO	P		<i>dutasteride PO</i>	NP	MP
<i>pot & sod citrates w/citric ac SOLN PO</i>	NP		<i>dutasteride-tamsulosin hcl PO</i>	NP	MP
<i>potassium citrate (alkalinizer) TBCR PO</i>	NP		ENTADFI	NP	
<i>potassium citrate-citric acid PACK PO</i>	NP		<i>finasteride PO</i>	P	QL(1 EA daily); MP
<i>potassium citrate-citric acid SOLN PO</i>	NP	RX/OTC	FLOMAX PO (Use <i>tamsulosin hcl</i>)	NP	QL(2 EA daily); MP
<i>sodium citrate & citric acid PO</i>	P	RX/OTC	JALYN PO (Use <i>dutasteride-tamsulosin hcl</i>)	NP	MP
UROCIT-K 10 TBCR PO (Use <i>potassium citrate (alkalinizer)</i>)	NP		PROSCAR PO (Use <i>finasteride</i>)	NP	QL(1 EA daily); MP
UROCIT-K 15 TBCR PO (Use <i>potassium citrate (alkalinizer)</i>)	NP		RAPAFLO PO (Use <i>silodosin</i>)	NP	MP
UROCIT-K 5 TBCR PO (Use <i>potassium citrate (alkalinizer)</i>)	NP		RAPAFLO PO 8 MG (Use <i>silodosin</i>)	NF	MP
Cystinosis Agents			<i>silodosin PO</i>	NP	MP
CYSTAGON CAPS PO	P	SP	<i>tamsulosin hcl PO</i>	P	QL(2 EA daily); MP
PROCYSBI CPDR PO	NP	SP	Urinary Analgesics		
PROCYSBI PACK	NP	SP	<i>phenazopyridine hcl TABS PO 100 MG, 200 MG</i>	P	
Genitourinary Irrigants			PYRIDIUM TABS PO (Use <i>phenazopyridine hcl</i>)	NP	
<i>sodium chloride (gu irrigant) 0.9 %</i>	P		Urinary Stone Agents		
Interstitial Cystitis Agents			LITHOSTAT	NP	
ELMIRON CAPS PO	NP	QL(3 EA daily)	THIOLA EC TBEC (Use <i>tiopronin</i>)	NP	SP
Prostatic Hypertrophy Agents			THIOLA TABS (Use <i>tiopronin</i>)	NP	SP
<i>alfuzosin hcl PO</i>	P	MP	<i>tiopronin TABS</i>	NP	SP
<i>alfuzosin hcl PO</i>	P	MP	GOUT AGENTS - Drugs to Treat Gout		
AVODART PO (Use <i>dutasteride</i>)	NF	MP	Gout Agent Combinations		
AVODART PO (Use <i>dutasteride</i>)	NF	MP	<i>colchicine w/ probenecid PO</i>	P	MP
AVODART PO (Use <i>dutasteride</i>)	NP	MP	Gout Agents		
			<i>allopurinol PO</i>	P	

IL MHP Medicaid

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>allopurinol PO 100 MG, 300 MG</i>	P	MP	HEMLIBRA 300 MG/2ML	P	SP; PA
<i>colchicine CAPS</i>	NP	MP	HEMOFIL M SOLR 250 UNIT, 500 UNIT, 1000 UNIT, 1700 UNIT	P	SP; PA
<i>colchicine CAPS</i>	NP	MP	HUMATE-P SOLR	P	SP; PA
<i>colchicine TABS PO</i>	NP	MP	IDELVION	P	SP; PA
<i>colchicine TABS PO</i>	NP	MP	IXINITY SOLR	P	SP; PA
COLCRYS TABS PO (Use <i>colchicine</i>)	NP	MP	JIVI	P	SP; PA
<i>febuxostat</i>	NP	MP	KOATE-DVI SOLR 1000 UNIT	P	SP; PA
MITIGARE CAPS (Use <i>colchicine</i>)	NP	MP	KOATE SOLR	P	SP; PA
ULORIC (Use <i>febuxostat</i>)	NP	MP	KOGENATE FS KIT	P	SP; PA
ZYLOPRIM PO (Use <i>allopurinol</i>)	NF	MP	KOVALTRY	P	SP; PA
Uricosurics			NOVOEIGHT	P	SP; PA
<i>probenecid PO</i>	P	MP	NOVOSEVEN RT	P	SP; PA
HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders			NUWIQ KIT	P	SP; PA
Antihemophilic Products			NUWIQ SOLR	P	SP; PA
ADVATE	P	SP; PA	OBIZUR	P	SP; PA
ADYNOVATE	P	SP; PA	PROFILNINE	P	SP; PA
AFSTYLA 250 UNIT, 500 UNIT, 1000 UNIT, 1500 UNIT, 2000 UNIT, 2500 UNIT	P	SP; PA	REBINYN	P	SP; PA
ALPHANATE SOLR	P	SP; PA	RECOMBINATE SOLR	P	SP; PA
ALPHANINE SD 500 UNIT, 1000 UNIT, 1500 UNIT	P	SP; PA	RIXUBIS SOLR	P	SP; PA
ALPROLIX	P	SP; PA	SEVENFACT	P	SP; PA
BENEFIX KIT	P	SP; PA	TRETTEN	P	SP; PA
COAGADEX	P	SP; PA	VONVENDI	P	SP; PA
CORIFACT	P	SP; PA	WILATE KIT	P	SP; PA
ELOCTATE	P	SP; PA	XYNTHA	P	SP; PA
ESPEROCT	P	SP; PA	XYNTHA SOLOFUSE	P	SP; PA
FEIBA	P	SP; PA	Bradykinin B2 Receptor Antagonists		
HEMLIBRA 30 MG/ML, 60 MG/0.4ML, 105 MG/0.7ML, 150 MG/ML	P	SP; MP; PA	FIRAZYR SOSY (Use <i>icatibant acetate</i>)	NP	SP
			<i>icatibant acetate SOSY</i>	NP	SP
			Complement Inhibitors		
			BERINERT KIT	P	SP; PA
			CINRYZE SOLR IV	NP	SP
			EMPAVELI	NP	SP
			ENJAYMO	NP	SP

IL MHP Medicaid

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Drug Name	Drug Tier	Requirements/Limits
FABHALTA	NP	SP
HAEGARDA SOLR SC	NP	SP
RUCONEST	NP	SP
SOLIRIS	NP	SP
TAVNEOS	NP	SP
ULTOMIRIS	NP	SP
VEOPOZ	NP	SP
ZILBRYSQ	NP	SP
Hemataologic - Tyrosine Kinase Inhibitors		
TAVALISSE	NP	SP
Hematological Enzymes - Misc		
ADZYNMA	NP	SP
Hematorheologic Agents		
<i>pentoxifylline PO</i>	P	QL(3 EA daily)
Plasma Kallikrein Inhibitors		
KALBITOR	NP	SP
ORLADEYO	NP	SP
TAKHZYRO SOLN	NP	SP; MP
TAKHZYRO SOSY	NP	SP
Platelet Aggregation Inhibitors		
AGRYLIN PO 0.5 MG <i>(Use anagrelide hcl)</i>	NP	
<i>anagrelide hcl PO</i>	P	
<i>aspirin-dipyridamole PO</i>	P	
BRILINTA PO	P	QL(2 EA daily)
<i>cilostazol PO</i>	NP	
<i>clopidogrel bisulfate PO 300 MG</i>	P	
<i>clopidogrel bisulfate PO 75 MG</i>	P	QL(1 EA daily)
<i>dipyridamole PO</i>	P	
EFFIENT PO <i>(Use prasugrel hcl)</i>	NP	QL(1 EA daily)
PLAVIX PO 75 MG <i>(Use clopidogrel bisulfate)</i>	NP	QL(1 EA daily)
<i>prasugrel hcl PO</i>	NP	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/Limits
HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders		
Agents for Sickle Cell Disease		
ADAKVEO	NP	SP
DROXIA CAPS	P	
ENDARI <i>(Use glutamine (sickle cell))</i>	P	SP
<i>glutamine (sickle cell)</i>	NP	SP
OXBRYTA TABS	NP	SP
OXBRYTA TBSO	NP	SP
SIKLOS TABS	NP	
Cobalamins		
<i>cyanocobalamin SOLN IJ 1000 MCG/ML</i>	P	
NASCOBAL SOLN NA <i>(Use cyanocobalamin)</i>	NF	
Folic Acid/Folates		
<i>folic acid TABS PO 1 MG</i>	P	RX/OTC
Hematopoietic Growth Factors		
ARANESP (ALBUMIN FREE) SOLN	NP	SP; MP
ARANESP (ALBUMIN FREE) SOSY	NP	SP; MP
DOPTELET	NP	SP
EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	P	SP; MP; PA
FULPHILA	NP	SP
FYLNETRA	NP	SP
GRANIX SOLN	NP	SP
GRANIX SOSY	NP	SP
JESDUVROQ	NP	
LEUKINE SOLR IJ	P	QL(0.47 EA daily); SP
MIRCERA 120 MCG/0.3ML	NP	SP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MIRCERA 30 MCG/0.3ML, 50 MCG/0.3ML, 75 MCG/0.3ML, 100 MCG/0.3ML, 150 MCG/0.3ML, 200 MCG/0.3ML	NP	SP; MP	FEOSOL TABS PO (<i>Use ferrous sulfate dried</i>)	NF	
MULPLETA	NP	SP	FER-IN-SOL SOLN PO (<i>Use ferrous sulfate</i>)	NF	
NEULASTA ONPRO PSKT	NP	SP	FERROUS GLUCONATE TABS PO 324 MG	P	
NEULASTA SOSY	NP	SP	<i>ferrous sulfate dried</i> TABS PO	P	
NEUPOGEN SOLN 300 MCG/ML	P	QL(0.47 ML daily); SP	<i>ferrous sulfate SOLN PO 15 MG/ML, 300 MG/5ML, 15 MG/ML</i>	P	
NEUPOGEN SOLN 480 MCG/1.6ML	P	QL(0.75 ML daily); SP	<i>ferrous sulfate</i> TABS PO	P	
NEUPOGEN SOSY 480 MCG/0.8ML	P	QL(0.38 ML daily); SP	<i>ferrous sulfate</i> TBEC PO	P	
NEUPOGEN SOSY 300 MCG/0.5ML	P	QL(0.24 ML daily); SP	FERROUS SULFATE TBEC PO (<i>Use ferrous sulfate</i>)	P	
NIVESTYM SOLN	NP	SP	FERROUS SULFATE TBEC PO (<i>Use ferrous sulfate</i>)	NF	
NIVESTYM SOSY	NP	SP	<i>polysaccharide iron complex</i> CAPS PO	P	
NPLATE	NP	SP	HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
NYVEPRIA	NP	SP	Antihistamine Hypnotics		
PROCRIT	P	SP; MP; PA	<i>diphenhydramine hcl (sleep)</i> CAPS PO	P	
PROCRIT	P	SP; MP; PA	<i>diphenhydramine hcl (sleep)</i> TABS PO 25 MG	P	AL(Up to 65 yrs old)
PROMACTA PACK	NP	SP	UNISOM SLEEPGELS CAPS PO (<i>Use diphenhydramine hcl (sleep)</i>)	NF	
PROMACTA TABS PO	NP	SP	ZZZQUIL CAPS PO (<i>Use diphenhydramine hcl (sleep)</i>)	NF	
REBLOZYL	NP	SP	Barbiturate Hypnotics		
RELEUKO SOLN	NP	SP	<i>phenobarbital</i> ELIX PO	P	MP
RELEUKO SOSY	NP	SP	<i>phenobarbital</i> TABS PO	P	
RETACRIT	NP	SP; MP	Hypnotics - Tricyclic Agents		
ROLVEDON	NP	SP	<i>doxepin hcl (sleep)</i> PO	NP	
STIMUFEND	NP	SP			
UDENYCA ONBODY SOSY	NP	SP			
UDENYCA SOAJ	NP	SP			
UDENYCA SOSY	NP	SP			
ZARXIO	NP	SP			
ZIEXTENZO	NP	SP			
Iron					

Drug Name	Drug Tier	Requirements/Limits
Non-Barbiturate Hypnotics		
AMBIEN CR TBCR PO (Use zolpidem tartrate)	NP	QL(1 EA daily)
AMBIEN TABS PO (Use zolpidem tartrate)	NP	QL(1 EA daily)
DORAL PO (Use quazepam)	NP	
EDLUAR SUBL	NP	
estazolam PO	P	
eszopiclone PO	NP	
flurazepam hcl PO	NP	
HALCION PO 0.25 MG (Use triazolam)	NP	
LUNESTA PO (Use eszopiclone)	NF	
LUNESTA PO (Use eszopiclone)	NP	
midazolam hcl SYRP PO	NP	
quazepam PO	P	
RESTORIL PO (Use temazepam)	NP	
temazepam PO	P	
triazolam PO	P	
zaleplon PO	NP	QL(1 EA daily)
ZOLPIDEM TARTRATE CAPS	NP	
zolpidem tartrate SUBL	NP	
zolpidem tartrate TABS PO	P	QL(1 EA daily)
zolpidem tartrate TBCR PO	NP	QL(1 EA daily)
Orexin Receptor Antagonists		
BELSOMRA	NP	
DAYVIGO	NP	QL(3 EA daily)
QUVIVIQ	NP	
Selective Melatonin Receptor Agonists		
HETLIOZ LQ SUSP	NP	SP; MP

Drug Name	Drug Tier	Requirements/Limits
HETLIOZ CAPS (Use tasimelteon)	NP	SP
ramelteon PO	NP	
ROZEREM PO (Use ramelteon)	NP	
tasimelteon CAPS	NP	SP
LAXATIVES - Bowel Treatment Drugs		
Bulk Laxatives		
BENEFIBER FOR CHILDREN POWD PO (Use wheat dextrin)	NF	
BENEFIBER HEALTHY SHAPE POWD PO (Use wheat dextrin)	NF	
BENEFIBER POWD PO (Use wheat dextrin)	NF	
calcium polycarbophil TABS PO	P	
CITRUCEL POWD PO (Use methylcellulose (laxative))	NF	
CITRUCEL TABS PO (Use methylcellulose (laxative))	NF	
HYDROCIL POWD PO (Use psyllium)	NF	
KONSYL DAILY FIBER PACK PO 100 %	P	
KONSYL ORIGINAL DAILY FIBER PACK PO	P	
METAMUCIL POWD PO (Use psyllium)	NF	
methylcellulose (laxative) POWD PO	P	
methylcellulose (laxative) TABS PO	P	
psyllium CAPS PO 0.52 GM, 400 MG	P	
psyllium POWD PO 28.3 %, 43 %, 48.57 %, 58.6 %, 95 %	P	
wheat dextrin POWD PO	P	

IL MHP Medicaid

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Laxative Combinations			<i>magnesium hydroxide SUSP PO 7.75 %, 400 MG/5ML, 1200 MG/15ML</i>	P	
<i>peg 3350-potassium chloride-sod bicarbonate-sod chloride PO</i>	P		<i>sodium phosphates ENEM PR</i>	P	
<i>sennosides-docusate sodium TABS PO</i>	P		Stimulant Laxatives		
SENOKOT S TABS PO (Use <i>sennosides-docusate sodium</i>)	NF		<i>bisacodyl SUPP PR</i>	P	
Laxatives - Miscellaneous			<i>bisacodyl TBEC PO</i>	P	
GLYCERIN (ADULT) SUPP PR (Use <i>glycerin (laxative)</i>)	NF		DULCOLAX PINK LAXATIVE TBEC PO (Use <i>bisacodyl</i>)	NF	
<i>glycerin (laxative) SUPP PR 1 GM, 1.2 GM, 2 GM, 80.7 %</i>	P		DULCOLAX SUPP PR (Use <i>bisacodyl</i>)	NF	
MIRALAX MIX-IN PAX PACK PO (Use <i>polyethylene glycol 3350</i>)	NF		DULCOLAX TBEC PO (Use <i>bisacodyl</i>)	NF	
MIRALAX PACK PO (Use <i>polyethylene glycol 3350</i>)	NF		SENNALAX SYRP	P	
MIRALAX POWD PO (Use <i>polyethylene glycol 3350</i>)	NF		<i>sennosides TABS PO 8.6 MG, 15 MG</i>	P	
<i>polyethylene glycol 3350 PACK PO</i>	P		SENOKOT TABS PO (Use <i>sennosides</i>)	NF	
<i>polyethylene glycol 3350 POWD PO</i>	P		Surfactant Laxatives		
Saline Laxatives			COLACE CLEAR CAPS PO (Use <i>docusate sodium</i>)	NF	
FLEET ENEMA ENEM PR (Use <i>sodium phosphates</i>)	NF		COLACE CAPS PO 100 MG (Use <i>docusate sodium</i>)	NF	
FLEET ENEMA ENEM PR (Use <i>sodium phosphates</i>)	P		<i>docusate calcium PO</i>	P	
FLEET PEDIATRIC ENEM PR (Use <i>sodium phosphates</i>)	NF		<i>docusate sodium CAPS PO</i>	P	
FLEET SALINE ENEMA ENEM PR (Use <i>sodium phosphates</i>)	NF		<i>docusate sodium LIQD PO 50 MG/5ML, 100 MG/10ML</i>	P	
<i>magnesium citrate PO 1.745 GM/30ML</i>	P		DOCUSATE SODIUM SYRP PO	P	
			<i>docusate sodium TABS PO</i>	P	
			MACROLIDES - Drugs to Treat Bacterial Infections		
			Azithromycin		
			<i>azithromycin PACK PO</i>	P	QL(2 EA per fill retail)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>azithromycin SUSR PO</i>	P		ERYPED 400 SUSR PO (Use erythromycin ethylsuccinate)	P	
<i>azithromycin TABS PO 500 MG</i>	P	QL(3 EA per fill retail; 60 EA per 180 day(s) retail)	<i>erythromycin base CPEP PO</i>	P	
<i>azithromycin TABS PO 600 MG</i>	P	QL(30 EA per fill retail)	<i>erythromycin base TABS PO</i>	P	
<i>azithromycin TABS PO 250 MG</i>	P	QL(60 EA per 180 day(s) retail)	<i>erythromycin base TBEC PO</i>	P	
ZITHROMAX TRI-PAK TABS PO (Use <i>azithromycin</i>)	NP	QL(3 EA per fill retail; 60 EA per 180 day(s) retail)	<i>erythromycin ethylsuccinate SUSR PO</i>	P	
ZITHROMAX Z-PAK TABS PO (Use <i>azithromycin</i>)	NP	QL(60 EA per 180 day(s) retail)	<i>erythromycin ethylsuccinate TABS PO</i>	P	
ZITHROMAX PACK PO	P	QL(2 EA per fill retail)	<i>erythromycin stearate TABS PO 250 MG</i>	P	
ZITHROMAX SUSR PO (Use <i>azithromycin</i>)	NP		Fidaxomicin		
ZITHROMAX TABS PO 500 MG (Use <i>azithromycin</i>)	NF	QL(3 EA per fill retail; 60 EA per 180 day(s) retail)	DIFICID SUSR	P	
ZITHROMAX TABS PO 250 MG (Use <i>azithromycin</i>)	NP	QL(60 EA per 180 day(s) retail)	DIFICID TABS	P	
ZITHROMAX TABS PO 500 MG (Use <i>azithromycin</i>)	NP	QL(3 EA per fill retail; 60 EA per 180 day(s) retail)	MEDICAL DEVICES AND SUPPLIES		
ZITHROMAX TABS PO 250 MG (Use <i>azithromycin</i>)	NP	QL(60 EA per 180 day(s) retail)	Bandages-Dressings-Tape		
ZITHROMAX TABS PO 500 MG (Use <i>azithromycin</i>)	NP	QL(3 EA per fill retail; 60 EA per 180 day(s) retail)	AMD FOAM DRESSING TOPSHEET PADS	P	RX/OTC
Clarithromycin			AMD FOAM DRESSING PADS	P	RX/OTC
<i>clarithromycin SUSR PO</i>	P	QL(280 ML per fill retail)	BAND-AID GAUZE LARGE PADS	P	RX/OTC
<i>clarithromycin TABS PO</i>	P	QL(28 EA per fill retail)	BAND-AID TRU-ABSORB GAUZE PADS	P	RX/OTC
<i>clarithromycin TB24 PO</i>	P	QL(14 EA per fill retail)	BIOGUARD GAUZE SPONGES PADS	P	RX/OTC
Erythromycins			COPA ISLAND BORDERED FOAM PADS	P	RX/OTC
E.E.S. GRANULES SUSR PO (Use <i>erythromycin ethylsuccinate</i>)	P		COPA PLUS HYDROPHILIC FOAM PADS	P	RX/OTC
ERYPED 200 SUSR PO (Use <i>erythromycin ethylsuccinate</i>)	P		COVRSITE COVER DRESSING PADS	P	RX/OTC
			COVRSITE PLUS COMPOSITE DRESS PADS	P	RX/OTC

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CURITY ALL PURPOSE SPONGES PADS	P	RX/OTC	HM STERILE PADS PADS	P	RX/OTC
CURITY AMD ANTIMICROBIAL SPNGE PADS	P	RX/OTC	HYDROCELL ADHESIVE DRESSING PADS	P	RX/OTC
CURITY COVER SPONGE PADS	P	RX/OTC	HYDROCELL DRESSING PADS	P	RX/OTC
CURITY DRESSING SPONGES PADS	P	RX/OTC	J & J GAUZE SPONGES 12-PLY MISC	P	RX/OTC
CURITY GAUZE SPONGE PADS	P	RX/OTC	J & J GAUZE SPONGES 16-PLY MISC	P	RX/OTC
CURITY GAUZE PADS	P	RX/OTC	J & J GAUZE SPONGES 8-PLY MISC	P	RX/OTC
CURITY SPONGES PADS	P	RX/OTC	J & J GAUZE PADS	P	RX/OTC
CVS GAUZE PAD STERILE PADS	P	RX/OTC	KENDALL HYDROPHILIC FOAM DRESS PADS	P	RX/OTC
CVS GAUZE STERILE PADS	P	RX/OTC	KERLIX SPONGES PADS	P	RX/OTC
DERMACEA DRAIN SPONGES PADS	P	RX/OTC	MIRASORB SPONGES MISC	P	RX/OTC
DERMACEA GAUZE SPONGE PADS	P	RX/OTC	NU GAUZE 4PLY PADS	P	RX/OTC
DERMACEA IV DRAIN SPONGES PADS	P	RX/OTC	NU GAUZE GENERAL-USE SPONGES MISC	P	RX/OTC
DERMACEA NON-WOVEN SPONGES PADS	P	RX/OTC	POLYMEM NON-ADHESIVE PADS	P	RX/OTC
DERMACEA TYPE VII GAUZE PADS	P	RX/OTC	QC ALL PURPOSE DRESSINGS PADS	P	RX/OTC
DERMACEA X-RAY SPONGES PADS	P	RX/OTC	QC STERILE PADS PADS	P	RX/OTC
DRYMAX EXTRA PADS	P	RX/OTC	RA STERILE PADS	P	RX/OTC
EQ GAUZE PADS	P	RX/OTC	RAY-TEC X-RAY DETECTABLE SPNGE MISC	P	RX/OTC
EQL GAUZE PADS	P	RX/OTC	RESTORE FOAM DRESSING PADS	P	RX/OTC
EXCILON AMD DRAIN SPONGES PADS	P	RX/OTC	RESTORE ODOR ABSORBING DRESS PADS	P	RX/OTC
EXCILON AMD NON-WOVEN SPONGES PADS	P	RX/OTC	SILIGENTLE FOAM DRESSING PADS	P	RX/OTC
EXCILON DRAIN SPONGES PADS	P	RX/OTC	SM GAUZE PADS	P	RX/OTC
GAUZE DRESSING PADS	P	RX/OTC	SM STERILE PADS	P	RX/OTC
GAUZE PADS PADS	P	RX/OTC	SOF-WICK PADS	P	RX/OTC
			TEGADERM FOAM PADS	P	RX/OTC

IL MHP Medicaid

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
TOPPER DRESSING SPONGES MISC	P	RX/OTC	CLEVER CHOICE BP MONITOR/WRIST DEVI	P	QL(0.034 EA daily)
Blood Pressure Devices			CVS ADVANCED BP MONITOR DEVI	P	QL(0.034 EA daily)
3 SERIES BP MONITOR/WRIST DEVI	P	QL(0.034 EA daily)	CVS BLOOD PRESSURE MONITOR MISC	P	QL(0.034 EA daily)
ADVANCED ONE STEP BP MONITOR MISC	P	QL(0.034 EA daily)	CVS SERIES 100 BLOOD PRESSURE DEVI	P	QL(0.034 EA daily)
ADVOCATE ARM BPM DEVI	P	QL(0.034 EA daily)	CVS SERIES 400 BLOOD PRESSURE DEVI	P	QL(0.034 EA daily)
BLOOD PRESSURE KIT DEVI	P	QL(0.034 EA daily)	CVS SERIES 400W BLOOD PRESSURE DEVI	P	QL(0.034 EA daily)
BLOOD PRESSURE MON/AUTO/WRIST DEVI	P	QL(0.034 EA daily)	CVS SERIES 600 BLOOD PRESSURE DEVI	P	QL(0.034 EA daily)
BLOOD PRESSURE MONITOR 3 DEVI	P	QL(0.034 EA daily)	CVS SERIES 600W BLOOD PRESSURE DEVI	P	QL(0.034 EA daily)
BLOOD PRESSURE MONITOR AUTOMAT DEVI	P	QL(0.034 EA daily)	CVS SERIES 800 BLOOD PRESSURE DEVI	P	QL(0.034 EA daily)
BLOOD PRESSURE MONITOR/ARM DEVI	P	QL(0.034 EA daily)	EQ BP MONITOR WRIST DEVI	P	QL(0.034 EA daily)
BLOOD PRESSURE MONITOR/PRM ARM DEVI	P	QL(0.034 EA daily)	FORA P20 BP MONITOR SYSTEM DEVI	P	QL(0.034 EA daily)
BLOOD PRESSURE MONITOR/WRIST DEVI	P	QL(0.034 EA daily)	FORA TEST N' GO BP DEVI	P	QL(0.034 EA daily)
BLOOD PRESSURE MONITOR DEVI	P	QL(0.034 EA daily)	FT BLOOD PRESSURE SERIES 200 DEVI	P	QL(0.034 EA daily)
BLOOD PRESSURE MONITOR MISC	P	QL(0.034 EA daily)	FT BLOOD PRESSURE SERIES 600 DEVI	P	QL(0.034 EA daily)
BLOOD PRESSURE UNIT MISC	P	QL(0.034 EA daily)	GNP BLOOD PRESSURE MONITOR DEVI	P	QL(0.034 EA daily)
CARETOUCH BP ARM MONITOR DEVI	P	QL(0.034 EA daily)	HEALTH SENSE BP MONITOR DEVI	P	QL(0.034 EA daily)
CARETOUCH BP WRIST MONITOR DEVI	P	QL(0.034 EA daily)	HEALTHSMART BP MONITOR/WRIST DEVI	P	QL(0.034 EA daily)
CARETOUCH SLIM BP WRIST MONITO DEVI	P	QL(0.034 EA daily)	H-E-B INCONTROL BP MONITOR MISC	P	QL(0.034 EA daily)
CARETOUCH VERSA BP ARM MONITOR DEVI	P	QL(0.034 EA daily)	H-E-B INCONTROL DELUXE AUTO BP DEVI	P	QL(0.034 EA daily)
CLEVER CHOICE BP MONITOR/ARM DEVI	P	QL(0.034 EA daily)	H-E-B INCONTROL PREMIUM BP DEVI	P	QL(0.034 EA daily)
			HM BLOOD PRESSURE MONITOR DEVI	P	QL(0.034 EA daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
HM BLOOD PRESSURE SERIES 200 DEVI	P	QL(0.034 EA daily)	SM BLOOD PRESSURE MONITOR DEVI	P	QL(0.034 EA daily)
KROGER BLOOD PRESSURE MONITOR DEVI	P	QL(0.034 EA daily)	SM BLOOD PRESSURE MONITOR MISC	P	QL(0.034 EA daily)
MICROLIFE BP MONITOR DEVI	P	QL(0.034 EA daily)	SM BLOOD PRESSURE SERIES 200 DEVI	P	QL(0.034 EA daily)
MICROLIFE BPM6 PREMIUM MONITOR DEVI	P	QL(0.034 EA daily)	SM BLOOD PRESSURE SERIES 200W DEVI	P	QL(0.034 EA daily)
MICROLIFE DELUXE BP MONITOR DEVI	P	QL(0.034 EA daily)	SM BLOOD PRESSURE SERIES 600W DEVI	P	QL(0.034 EA daily)
MICROLIFE WRIST BP MONITOR DEVI	P	QL(0.034 EA daily)	SM BLOOD PRESSURE SERIES 800 DEVI	P	QL(0.034 EA daily)
OMRON 10 SERIES BP MONITOR DEVI	P	QL(0.034 EA daily)	SM WRIST CUFF BP MONITOR MISC	P	QL(0.034 EA daily)
OMRON 3 SERIES BP MONITOR DEVI	P	QL(0.034 EA daily)	SPHYGMOMANOMETER MISC	P	QL(0.034 EA daily)
OMRON 5 SERIES BP MONITOR DEVI	P	QL(0.034 EA daily)	SURELIFE BP MONITOR/ARM DEVI	P	QL(0.034 EA daily)
OMRON 7 SERIES BP MONITOR DEVI	P	QL(0.034 EA daily)	SURELIFE BP MONITOR/WRIST DEVI	P	QL(0.034 EA daily)
OMRON WRIST BP MONITOR DEVI	P	QL(0.034 EA daily)	TALKING SENSE BP MONITOR DEVI	P	QL(0.034 EA daily)
PRO HEALTH MINI TALKING MONITR DEVI	P	QL(0.034 EA daily)	TGT BLOOD PRESSURE MONITOR DEVI	P	QL(0.034 EA daily)
PRO HEALTH TRACK BP MONITOR DEVI	P	QL(0.034 EA daily)	TRUE HEALTH SENSE BP MONITOR DEVI	P	QL(0.034 EA daily)
PROCARE UPPER ARM BP MONITOR DEVI	P	QL(0.034 EA daily)	Contraceptives		
PROCARE WRIST BP MONITOR DEVI	P	QL(0.034 EA daily)	AIMSCO LUBRICATED MISC	P	
QC BLOOD PRESSURE MONITOR MISC	P	QL(0.034 EA daily)	DUREX EXTRA SENSITIVE THIN DEVI	P	
RA BLOOD PRESSURE CUFF MONITOR DEVI	P	QL(0.034 EA daily)	DUREX EXTRA SENSITIVE THIN MISC	P	
RA BLOOD PRESSURE CUFF MONITOR MISC	P	QL(0.034 EA daily)	DUREX TROPICAL MISC	P	
RELION BLOOD PRESSURE MONITOR DEVI	P	QL(0.034 EA daily)	FANTASY LUBRICATED/SPERMICI DE MISC	P	
RELION PREMIUM MONITOR DEVI	P	QL(0.034 EA daily)	FANTASY LUBRICATED MISC	P	
			KAMELEON LUBRICATED MISC	P	
			KIMONO COLORS DEVI	P	

IL MHP Medicaid

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
KIMONO MAXX-LARGE FLARE MISC	P		TRUSTEX LUB/RIBBED/STUDED MISC	P	
KIMONO MICRO THIN PLUS MISC	P		TRUSTEX LUB/SPERMICIDE EX ST MISC	P	
KIMONO MICRO THIN MISC	P		TRUSTEX LUB/SPERMICIDE XL MISC	P	
KIMONO PLUS MISC	P		TRUSTEX LUBRICATED EX LARGE MISC	P	
KIMONO PS PLUS MISC	P		TRUSTEX LUBRICATED EXTRA ST MISC	P	
KIMONO PS MISC	P		TRUSTEX LUBRICATED/SPERMICI DE MISC	P	
KIMONO SENSATION PLUS MISC	P		TRUSTEX LUBRICATED MISC	P	
KIMONO SENSATION MISC	P		TRUSTEX NATURAL CONDOMS + LUBE MISC	P	
KIMONO SPECIAL DEVI	P		TRUSTEX NON-LUBRICATED MISC	P	
KIMONO MISC	P		TRUSTEX RIA LUB/SPERMICIDE MISC	P	
K-Y ME & YOU EXTRA LUBRICATED DEVI	P		TRUSTEX RIA LUBRICATED MISC	P	
K-Y ME & YOU INTENSE DEVI	P		TRUSTEX RIA NON-LUBRICATED MISC	P	
MAXX PLUS MISC	P		TRUSTEX-NONOXYNOL-9/RIB/STUD MISC	P	
MAXX MISC	P		Diabetic Supplies		
REALITY LATEX CONDOMS MISC	P		1ST TIER UNILET COMFORTOUCH	P	QL(4.45 EA daily); MP; RX/OTC
REALITY LATEX/ULTRA TEXTURED DEVI	P		ACCU-CHEK AVIVA PLUS KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
REALITY LATEX/ULTRA THIN DEVI	P		ACCU-CHEK AVIVA SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
TROJAN ENZ MISC	P				
TROJAN MAGNUM MISC	P				
TROJAN ULTRA THIN/SPERMICIDAL MISC	P				
TROJAN ULTRA THIN MISC	P				
TROJAN-ENZ LUBRICATED MISC	P				
TROJAN-ENZ/SPERMICIDAL MISC	P				
TRUE COVER DEVI	P				
TRUSTEX COLOR CONDOMS + LUBE MISC	P				

IL MHP Medicaid

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ACCU-CHEK FASTCLIX LANCET KIT	P	QL(0.034 EA daily); 1 max fill(s) per 365 day(s) retail	ADVANCE INTUITION METER DEVI	NP	MP
ACCU-CHEK GUIDE CONTROL LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	ADVANCE INTUITION MONITOR KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
ACCU-CHEK GUIDE ME KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	ADVANCE MICRO-DRAW CONTROL LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
ACCU-CHEK GUIDE KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	ADVANCE MICRO-DRAW METER DEVI	NP	MP
ACCU-CHEK SAFE-T PRO LANCETS	P	QL(4.45 EA daily); MP; RX/OTC	ADVANCE MICRO-DRAW NORMAL LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
ACCU-CHEK SMARTVIEW CONTROL LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	ADVANCED MOBILE LANCET	P	QL(4.45 EA daily); MP; RX/OTC
ACCU-CHEK SOFTCLIX LANCET DEV KIT	P	QL(0.034 EA daily); 1 max fill(s) per 365 day(s) retail	ADVOCATE BLOOD GLUCOSE MONITOR DEVI	NP	MP
ACCU-CHEK SOFTCLIX LANCETS	P	QL(4.45 EA daily); MP; RX/OTC	ADVOCATE BLOOD GLUCOSE SYSTEM KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
ACCUTREND GLUCOSE CONTROL SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	ADVOCATE CONTROL SOLUTION LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
ACTI-LANCE LITE LANCETS 28G	P	QL(4.45 EA daily); MP; RX/OTC	ADVOCATE LANCETS	P	QL(4.45 EA daily); MP; RX/OTC
ACTI-LANCE SPECIAL LANCETS 17G	P	QL(4.45 EA daily); MP; RX/OTC	ADVOCATE LANCETS 30G	P	QL(4.45 EA daily); MP; RX/OTC
ACTI-LANCE UNIVERSAL 23G	P	QL(4.45 EA daily); MP; RX/OTC	ADVOCATE LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP
ADJUSTABLE LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP	ADVOCATE RAPID-SAFE LANCING MISC	P	1 max fill(s) per 365 day(s) retail; MP

IL MHP Medicaid

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ADVOCATE REDI-CODE+ CONTROL SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	ASSURE 3 CONTROL LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
ADVOCATE REDI-CODE+ DEVI	NP	MP	ASSURE 3 METER KIT	NP	1 max fill(s) per 365 day(s) retail
ADVOCATE REDI-CODE DEVI	NP	MP	ASSURE 4 CONTROL LEVEL 1 & 2 LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
ADVOCATE REDI-CODE KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	ASSURE 4 METER DEVI	NP	MP
AGAMATRIX AMP DEVI	NP	MP	ASSURE DOSE NORM/HIGH CONTROL SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
AGAMATRIX CONTROL LEVEL 2 SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	ASSURE HAEMOLANCE PLUS HIGH	P	QL(4.45 EA daily); MP; RX/OTC
AGAMATRIX CONTROL LEVEL 4 SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	ASSURE HAEMOLANCE PLUS LOW	P	QL(4.45 EA daily); MP; RX/OTC
AGAMATRIX CONTROL SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	ASSURE HAEMOLANCE PLUS MICRO	P	QL(4.45 EA daily); MP; RX/OTC
AGAMATRIX JAZZ WIRELESS 2 KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	ASSURE HAEMOLANCE PLUS NORMAL	P	QL(4.45 EA daily); MP; RX/OTC
AGAMATRIX PRESTO PRO METER DEVI	NP	MP	ASSURE HAEMOLANCE PLUS PED	P	QL(4.45 EA daily); MP; RX/OTC
AGAMATRIX PRESTO KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	ASSURE II CONTROL LEVEL 1 & 2 LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
AIMSCO TWIST LANCETS 32G	P	QL(4.45 EA daily); MP; RX/OTC	ASSURE II CONTROL LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
AMBI-TRAY MISC	P	RX/OTC			
AQUALANCE LANCETS 30G	P	QL(4.45 EA daily); MP; RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ASSURE LANCE LANCETS	P	QL(4.45 EA daily); MP; RX/OTC	AUTOLET MINI MISC	P	1 max fill(s) per 365 day(s) retail; MP
ASSURE LANCE PLUS SAFETY 30G	P	QL(4.45 EA daily); MP; RX/OTC	AUTOLET PLATFORMS MISC	P	MP
ASSURE LANCE SAFETY LANCET 28G	P	QL(4.45 EA daily); MP; RX/OTC	AUTOLET PLUS MISC	P	1 max fill(s) per 365 day(s) retail; MP
ASSURE PLATINUM METER DEVI	NP	MP	BD LANCET ULTRAFINE 30G	P	QL(4.45 EA daily); MP; RX/OTC
ASSURE PRISM CONTROL LEVEL 1&2 SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	BD LANCET ULTRAFINE 33G	P	QL(4.45 EA daily); MP; RX/OTC
ASSURE PRISM MULTI METER DEVI	NP	MP	BD LATITUDE DIABETES KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
ASSURE PRO BLOOD GLUCOSE METER DEVI	NP	MP	BD LOGIC BLOOD GLUCOSE MONITOR KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
ASSURE PRO CONTROL LEVEL 1 & 2 LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	BD MICROTAINER LANCETS	P	QL(4.45 EA daily); MP; RX/OTC
AUTO-LANCET MINI MISC	P	1 max fill(s) per 365 day(s) retail; MP	BIGFOOT UNITY PEN CAP/ADMELOG MISC	P	RX/OTC
AUTO-LANCET MISC	P	1 max fill(s) per 365 day(s) retail; MP	BIGFOOT UNITY PEN CAP/APIIDRA MISC	P	RX/OTC
AUTOLET II CLINISAFE KIT	P	QL(0.034 EA daily); 1 max fill(s) per 365 day(s) retail	BIGFOOT UNITY PEN CAP/ASPART MISC	P	RX/OTC
AUTOLET LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP	BIGFOOT UNITY PEN CAP/BASAGLAR MISC	P	RX/OTC
AUTOLET LITE CLINISAFE KIT	P	QL(0.034 EA daily); 1 max fill(s) per 365 day(s) retail	BIGFOOT UNITY PEN CAP/FIASP MISC	P	RX/OTC
AUTOLET LITE STARTER PACK KIT	P	QL(0.034 EA daily); 1 max fill(s) per 365 day(s) retail	BIGFOOT UNITY PEN CAP/HUMALOG MISC	P	RX/OTC
			BIGFOOT UNITY PEN CAP/LANTUS MISC	P	RX/OTC
			BIGFOOT UNITY PEN CAP/LISPRO MISC	P	RX/OTC
			BIGFOOT UNITY PEN CAP/LYUMJEV MISC	P	RX/OTC
			BIGFOOT UNITY PEN CAP/NOVOLOG MISC	P	RX/OTC
			BIGFOOT UNITY PEN CAP/TOUJEO M MISC	P	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
BIGFOOT UNITY PEN CAP/TOUJEO MISC	P	RX/OTC	CARESENS CONTROL SOLUTION A/B SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
BIGFOOT UNITY PEN CAP/TRESIBA MISC	P	RX/OTC	CARESENS LANCETS	P	QL(4.45 EA daily); MP; RX/OTC
BIGFOOT UNITY PROGRAM KIT	NP	RX/OTC	CARESENS N FELIZ BT DEVI	NP	MP
BIOTEL CARE BLOOD GLUCOSE SYST KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	CARESENS N FELIZ DEVI	NP	MP
BIOTEL CARE BLOOD GLUCOSE KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	CARESENS N GLUCOSE SYSTEM DEVI	NP	MP
BLOOD GLUCOSE MONITOR SYSTEM KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	CARESENS N VOICE SYSTEM DEVI	NP	MP
BLOOD GLUCOSE MONITORING 333 DEVI	NP	MP	CARETOUCH CONTROL SOL LEVEL 2 LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
BLOOD GLUCOSE SYSTEM PAK KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	CARETOUCH LANCING/EJECTOR MISC	P	1 max fill(s) per 365 day(s) retail; MP
BLULINK CONTROL HIGH & LOW LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	CARETOUCH MONITOR SYSTEM KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
BLULINK GLUCOSE MONITORING SYS DEVI	NP	MP	CARETOUCH SAFETY LANCETS	P	QL(4.45 EA daily); MP; RX/OTC
CARDIOCOM LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP	CARETOUCH SAFETY LANCETS 26G	P	QL(4.45 EA daily); MP; RX/OTC
CAREONE ADVANCED LANCING DEV MISC	P	1 max fill(s) per 365 day(s) retail; MP	CARETOUCH TWIST LANCETS 28G	P	QL(4.45 EA daily); MP; RX/OTC
CAREONE BLOOD GLUCOSE SYSTEM KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	CARETOUCH TWIST LANCETS 30G	P	QL(4.45 EA daily); MP; RX/OTC
CAREONE LANCET THIN 23G	P	QL(4.45 EA daily); MP; RX/OTC	CARETOUCH TWIST MC LANCETS 30G	P	QL(4.45 EA daily); MP; RX/OTC
CARESENS CONTROL A SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	CHOSEN LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CLEANLET LANCETS 28G	P	QL(4.45 EA daily); MP; RX/OTC	COMFORT TOUCH LANCETS 31G	P	QL(4.45 EA daily); MP; RX/OTC
CLEVER CHEK AUTO-CODE SYSTEM DEVI	NP	MP	COMFORT TOUCH PLUS LANCETS 30G	P	QL(4.45 EA daily); MP; RX/OTC
CLEVER CHEK AUTO-CODE VOICE DEVI	NP	QL(0.034 EA daily); MP	CONTOUR CONTROL LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
CLEVER CHEK AUTO-CODE VOICE DEVI	NP	MP	CONTOUR MONITOR DEVI	NP	MP
CLEVER CHEK LANCETS	P	QL(4.45 EA daily); MP; RX/OTC	CONTOUR NEXT CONTROL SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
CLEVER CHEK SYSTEM KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	CONTOUR NEXT EZ KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
CLEVER CHOICE AUTO-CODE SYSTEM DEVI	NP	MP	CONTOUR NEXT GEN MONITOR DEVI	NP	MP
CLEVER CHOICE COMFORT EZ	P	QL(4.45 EA daily); MP; RX/OTC	CONTOUR NEXT GEN MONITOR KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
CLEVER CHOICE GLUCOSE CONTROL LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	CONTOUR NEXT LINK KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
CLEVER CHOICE LANCETS 21G	P	QL(4.45 EA daily); MP; RX/OTC	CONTOUR NEXT MONITOR KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
CLEVER CHOICE LANCETS 28G	P	QL(4.45 EA daily); MP; RX/OTC	CONTOUR NEXT ONE DEVI	NP	MP
CLEVER CHOICE MICRO SYSTEM KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	CONTOUR NEXT ONE KIT	NP	1 max fill(s) per 365 day(s) retail
CLEVER CHOICE MINI SYSTEM DEVI	NP	MP	COOL CONTROL A SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
CLEVER CHOICE TALK SYSTEM DEVI	NP	MP			
COMFORT ASSURED LANCETS 28G	P	QL(4.45 EA daily); MP; RX/OTC			
COMFORT ASSURED LANCETS 33G	P	QL(4.45 EA daily); MP; RX/OTC			
COMFORT LANCETS	P	QL(4.45 EA daily); MP; RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
COOL CONTROL B SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	DIATHRIVE LANCET ULTRA THIN 30	P	QL(4.45 EA daily); MP; RX/OTC
COOL MONITOR KIT KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	DIATHRIVE LANCETS	P	QL(4.45 EA daily); MP; RX/OTC
COOL MONITOR DEVI	NP	MP	DIATHRIVE LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP
CVS BLOOD GLUCOSE METER KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	DIATHRIVE+ GLUCOSE MONITOR DEVI	NP	MP
CVS LANCETS MICRO THIN 33G	P	QL(4.45 EA daily); MP; RX/OTC	DIATRUE CONTROL LEVEL 1 SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
CVS LANCETS THIN 26G	P	QL(4.45 EA daily); MP; RX/OTC	DIATRUE CONTROL LEVEL 3 SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
CVS LANCETS ULTRA THIN 30G	P	QL(4.45 EA daily); MP; RX/OTC	DIATRUE PLUS BLOOD GLUCOSE DEVI	NP	MP
CVS LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP	DROPLET GENTEEL LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP
D-CARE GLUCOMETER KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	DROPLET LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP
DEXCOM G6 RECEIVER	P	MP; PA	DROPLET PERSONAL LANCETS 30G	P	QL(4.45 EA daily); MP; RX/OTC
DEXCOM G6 SENSOR	P	MP; PA	DRUG MART LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP
DEXCOM G6 TRANSMITTER	P	MP; PA	DRUG MART UNILET LANCETS 33G	P	QL(4.45 EA daily); MP; RX/OTC
DEXCOM G7 RECEIVER	P	MP; PA	DUO-CARE CONTROL SOLUTION LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
DEXCOM G7 SENSOR	P	MP; PA	EASY COMFORT LANCETS	P	QL(4.45 EA daily); MP; RX/OTC
DIABETES MONITOR DIGIT ADD-ON KIT	NP	RX/OTC			
DIABETES MONITOR DIGIT SOLN KIT	NP	RX/OTC			
DIATHRIVE BLOOD GLUCOSE METER DEVI	NP	MP			
DIATHRIVE GLUCOSE CONTROL SOLN LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
EASY MINI EJECT LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP	EASY TOUCH INSULIN BARRELS 1ML MISC	P	RX/OTC
EASY MINI LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP	EASY TOUCH LANCETS 26G	P	QL(4.45 EA daily); MP; RX/OTC
EASY PLUS II CONTROL SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	EASY TOUCH LANCETS 28G/TWIST	P	QL(4.45 EA daily); MP; RX/OTC
EASY PLUS II GLUCOSE SYSTEM DEVI	NP	MP	EASY TOUCH LANCETS 30G	P	QL(4.45 EA daily); MP; RX/OTC
EASY STEP CONTROL SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	EASY TOUCH LANCETS 32G	P	QL(4.45 EA daily); MP; RX/OTC
EASY STEP GLUCOSE MONITOR DEVI	NP	MP	EASY TOUCH LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP
EASY TALK BLOOD GLUCOSE SYSTEM DEVI	NP	MP	EASY TOUCH SAFETY LANCETS 21G	P	QL(4.45 EA daily); MP; RX/OTC
EASY TALK CONTROL SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	EASY TOUCH SAFETY LANCETS 23G	P	QL(4.45 EA daily); MP; RX/OTC
EASY TALK PLUS II CONTROL SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	EASY TOUCH SAFETY LANCETS 26G	P	QL(4.45 EA daily); MP; RX/OTC
EASY TOUCH CONTROL HIGH & LOW SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	EASY TOUCH SAFETY LANCETS 28G	P	QL(4.45 EA daily); MP; RX/OTC
EASY TOUCH GLUCOSE SYSTEM KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	EASY TRAK BLOOD GLUCOSE SYSTEM DEVI	NP	MP
EASY TOUCH HEALTHPRO GLUCOSE KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	EASY TRAK CONTROL SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
			EASY TRAK II BLOOD GLUCOSE SYS DEVI	NP	MP
			EASYGLUCO KIT	NP	1 max fill(s) per 365 day(s) retail
			EASYMAX 15 LEVEL 2 CONTROL SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
EASYMAX 15 LEVEL 2-3 CONTROL LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	ELEMENT CONTROL LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
EASYMAX CONTROL NORMAL/HIGH LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	ELEMENT PLUS DEVI	NP	QL(0.034 EA daily); MP
EASYMAX NG BLOOD GLUCOSE DEVI	NP	MP	EMBRACE BLOOD GLUCOSE MONITOR DEVI	NP	MP
EASYMAX NG BLOOD GLUCOSE KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	EMBRACE CONTROL SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
EASYMAX V BLOOD GLUCOSE DEVI	NP	MP	EMBRACE EVO CONTROL LEVEL 1 LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
EASYPRO BLOOD GLUCOSE MONITOR KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	EMBRACE EVO GLUCOSE MONITOR DEVI	NP	MP
EASYPRO PLUS KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	EMBRACE EVO GLUCOSE MONITORING KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
ELEMENT AUTOCODE SYSTEM KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	EMBRACE GLUCOSE CONTROL LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
ELEMENT COMPACT CONTROL 2 SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	EMBRACE LANCING DEVICE/EJECTOR MISC	P	1 max fill(s) per 365 day(s) retail; MP
ELEMENT COMPACT CONTROL 3 SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	EMBRACE PRESSURE ACTIVATED 21G	P	QL(4.45 EA daily); MP; RX/OTC
ELEMENT COMPACT GLUCOSE SYSTEM DEVI	NP	MP	EMBRACE PRO GLUCOSE CONTROL LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
ELEMENT COMPACT V GLUCOSE SYS DEVI	NP	MP	EMBRACE PRO GLUCOSE METER DEVI	NP	MP

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
EMBRACE TALK BLOOD GLUCOSE DEVI	NP	MP	E-Z JECT LANCETS 21G	P	QL(4.45 EA daily); MP; RX/OTC
EMBRACE TALK GLUCOSE CONTROL SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	E-Z JECT LANCETS THIN 26G	P	QL(4.45 EA daily); MP; RX/OTC
EMBRACE TALK MONITORING SYSTEM KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	EZ-LETS LANCETS 21G	P	QL(4.45 EA daily); MP; RX/OTC
EMBRACE WAVE BLOOD GLUCOSE DEVI	NP	MP	EZ-LETS LANCETS 28G	P	QL(4.45 EA daily); MP; RX/OTC
EMBRACE WAVE GLUCOSE METER DEVI	NP	MP	FIFTY50 GLUCOSE METER 2.0 KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
ENLITE GLUCOSE SENSOR	NP	MP	FIFTY50 SAFETY SEAL LANCETS	P	QL(4.45 EA daily); MP; RX/OTC
EQL COLOR LANCETS 21G	P	QL(4.45 EA daily); MP; RX/OTC	FORA CONTROL SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
EQL COLOR LANCETS MICRO 33G	P	QL(4.45 EA daily); MP; RX/OTC	FORA G20 BLOOD GLUCOSE SYSTEM KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
EQL THIN LANCETS 26G	P	QL(4.45 EA daily); MP; RX/OTC	FORA G30A BLOOD GLUCOSE SYSTEM DEVI	NP	MP
EVERSENSE E3 SENSOR/HOLDER	NP	MP	FORA GD20 BLOOD GLUCOSE SYSTEM DEVI	NP	MP
EVERSENSE E3 SMART TRANSMITTER	NP	MP	FORA GD50 BLOOD GLUCOSE SYSTEM DEVI	NP	MP
EVERSENSE SENSOR/HOLDER	NP	MP	FORA GTEL BLOOD GLUCOSE SYSTEM DEVI	NP	MP
EVERSENSE SMART TRANSMITTER	NP	MP	FORA LANCETS	P	QL(4.45 EA daily); MP; RX/OTC
EVOLUTION AUTOCODE DEVI	NP	QL(0.034 EA daily); MP	FORA LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP
E-Z JECT LANCET MICRO-THIN 33G	P	QL(4.45 EA daily); MP; RX/OTC	FORA PREMIUM V10 BLE SYSTEM DEVI	NP	MP
E-Z JECT LANCET SUPER THIN 30G	P	QL(4.45 EA daily); MP; RX/OTC	FORA TEST N' GO MONITOR DEVI	NP	MP
E-Z JECT LANCETS	P	QL(4.45 EA daily); MP; RX/OTC	FORA TN'G VOICE KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
FORA V10 BLOOD GLUCOSE SYSTEM DEVI	NP	QL(0.034 EA daily); MP	FREESTYLE CONTROL SOLUTION LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
FORA V10/V12/D10/D20 TEST KIT	NP	1 max fill(s) per 365 day(s) retail	FREESTYLE FREEDOM LITE KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
FORA V12 BLOOD GLUCOSE SYSTEM DEVI	NP	QL(0.034 EA daily); MP	FREESTYLE LIBRE 14 DAY READER	P	MP; PA
FORA V12 BLOOD GLUCOSE SYSTEM DEVI	NP	MP	FREESTYLE LIBRE 14 DAY SENSOR	P	MP; PA
FORA V20 BLOOD GLUCOSE SYSTEM DEVI	NP	QL(0.034 EA daily); MP	FREESTYLE LIBRE 2 READER	P	MP; PA
FORA V30A BLOOD GLUCOSE SYSTEM DEVI	NP	MP	FREESTYLE LIBRE 2 SENSOR	P	MP; PA
FORA V30A BLOOD GLUCOSE SYSTEM KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	FREESTYLE LIBRE 3 READER	P	MP; PA
FORACARE GD40 MONITOR DEVI	NP	MP	FREESTYLE LIBRE 3 SENSOR	P	MP; PA
FORACARE GDH CONTROL SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	FREESTYLE LIBRE READER	NP	MP
FORACARE PREMIUM V10 DEVI	NP	MP	FREESTYLE LITE DEVI	NP	QL(0.034 EA daily); MP
FORACARE TEST N GO MONITOR DEVI	NP	MP	FREESTYLE LITE KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
FORTISCARE CONTROL SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	FREESTYLE PRECISION NEO SYSTEM KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
FORTISCARE T1 GLUCOSE SYSTEM DEVI	NP	MP	GE100 BLOOD GLUCOSE SYSTEM DEVI	NP	MP
FREDS PHARMACY AUTOLET LANCING MISC	P	1 max fill(s) per 365 day(s) retail; MP	GE100 BLOOD GLUCOSE SYSTEM KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
FREDS PHARMACY UNILET LANC 30G	P	QL(4.45 EA daily); MP; RX/OTC	GENTEEL BUTTERFLY TOUCH LANCET	P	QL(4.45 EA daily); MP; RX/OTC
			GENTEEL CONTACT TIPS (BLUE) MISC	P	MP
			GENTEEL CONTACT TIPS (CLEAR) MISC	P	MP
			GENTEEL CONTACT TIPS (GREEN) MISC	P	MP

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GENTEEL CONTACT TIPS (ORANGE) MISC	P	MP	GLUCO PERFECT 3 METER DEVI	NP	MP
GENTEEL CONTACT TIPS (RAINBOW) MISC	P	MP	GLUCOCARD 01 BLOOD GLUCOSE DEVI	NP	MP
GENTEEL CONTACT TIPS (VIOLET) MISC	P	MP	GLUCOCARD 01 BLOOD GLUCOSE KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
GENTEEL CONTACT TIPS (YELLOW) MISC	P	MP	GLUCOCARD 01 CONTROL LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
GENTEEL LANCING KIT (BLUE) KIT	P	QL(0.034 EA daily); 1 max fill(s) per 365 day(s) retail	GLUCOCARD 01-MINI GLUCOSE KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
GENTEEL NOZZLES MISC	P	MP	GLUCOCARD EXPRESSION CONTROL SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
GENTEEL PLUS LANCING (BLACK) MISC	P	1 max fill(s) per 365 day(s) retail; MP	GLUCOCARD EXPRESSION MONITOR KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
GENTEEL PLUS LANCING (PURPLE) MISC	P	1 max fill(s) per 365 day(s) retail; MP	GLUCOCARD SHINE CONNEX KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
GENTEEL PLUS LANCING (WHITE) MISC	P	1 max fill(s) per 365 day(s) retail; MP	GLUCOCARD SHINE CONTROL SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
GENTEEL PLUS LANCING DEV(BLUE) MISC	P	1 max fill(s) per 365 day(s) retail; MP	GLUCOCARD SHINE EXPRESS KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
GENTEEL PLUS LANCING DEV(PINK) MISC	P	1 max fill(s) per 365 day(s) retail; MP	GLUCOCARD SHINE XL DEVI	NP	MP
GENTLE-LET GP LANCETS	P	QL(4.45 EA daily); MP; RX/OTC	GLUCOCARD SHINE DEVI	NP	MP
GENTLE-LET LANCETS	P	QL(4.45 EA daily); MP; RX/OTC	GLUCOCARD SHINE KIT	NP	QL(0.034 EA daily); 1 max fill(s) per 365 day(s) retail; RX/OTC
GENTLE-LET PLATFORMS MISC	P	MP			
GHT BLOOD GLUCOSE MONITOR KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC			
GLOBAL INJECT EASE LANCETS 30G	P	QL(4.45 EA daily); MP; RX/OTC			
GLOBAL LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
GLUCOCARD VITAL MONITOR KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	GNP LANCETS 21G	P	QL(4.45 EA daily); MP; RX/OTC
GLUCOCARD X-METER KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	GNP LANCETS THIN 26G	P	QL(4.45 EA daily); MP; RX/OTC
GLUCOCOM BLOOD GLUCOSE MONITOR DEVI	NP	MP	GNP LANCING SYSTEM DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP
GLUCOCOM CONTROL LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	GNP STERILE LANCETS 30G	P	QL(4.45 EA daily); MP; RX/OTC
GLUCOCOM LANCETS 28G	P	QL(4.45 EA daily); MP; RX/OTC	GNP TRUE METRIX AIR METER KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
GLUCOCOM LANCETS 33G	P	QL(4.45 EA daily); MP; RX/OTC	GNP TRUE METRIX GLUCOSE METER KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
GLUCOCOM MONITOR KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	GOJJI LANCING DEVICE/CLEAR CAP MISC	P	1 max fill(s) per 365 day(s) retail; MP
GLUCONAVII BLOOD GLUCOSE SYS KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	GOODSENSE BLOOD GLUCOSE KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
GLUCOSE CONTROL SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	GOODSENSE LANCETS 33G	P	QL(4.45 EA daily); MP; RX/OTC
GNP EASY TOUCH CONT HIGH/LOW LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	GOODSENSE LANCETS 33G UNIV	P	QL(4.45 EA daily); MP; RX/OTC
GNP EASY TOUCH CONT HIGH/LOW SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	GOODSENSE LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP
GNP EASY TOUCH GLUCOSE METER DEVI	NP	MP	GUARDIAN 4 GLUCOSE SENSOR	NP	MP
			GUARDIAN 4 TRANSMITTER	NP	MP
			GUARDIAN CONNECT TRANSMITTER	NP	MP
			GUARDIAN LINK 3 TRANSMITTER	NP	MP
			GUARDIAN REAL-TIME CHARGER MISC	NP	RX/OTC
			GUARDIAN REAL-TIME REPLACE PED	NP	MP
			GUARDIAN REAL-TIME TEST PLUG MISC	NP	RX/OTC

IL MHP Medicaid

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GUARDIAN SENSOR (3)	NP	MP	IGLUCOSE MONITORING SYSTEM KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
GUARDIAN SENSOR 3	NP	MP	IHEALTH CONTROL SOLUTION LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
HAEMOLANCE	P	QL(4.45 EA daily); MP; RX/OTC	IHEALTH LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP
HAEMOLANCE LOW FLOW LANCETS	P	QL(4.45 EA daily); MP; RX/OTC	IN TOUCH GLUCOSE CONTROL SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
HAEMOLANCE PLUS	P	QL(4.45 EA daily); MP; RX/OTC	IN TOUCH LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP
HAEMOLANCE PLUS LOW FLOW	P	QL(4.45 EA daily); MP; RX/OTC	IN TOUCH STERILE LANCETS 30G	P	QL(4.45 EA daily); MP; RX/OTC
HAEMOLANCE PLUS MAX FLOW	P	QL(4.45 EA daily); MP; RX/OTC	IN TOUCH DEVI	NP	MP
HEALTH CARE LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP	INFINITY BLOOD GLUCOSE SYSTEM KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
HEALTHPRO BLOOD GLUCOSE MONITO KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	INFINITY CONTROL SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
HEALTHY ACCENTS LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP	INFINITY VOICE KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
HEALTHY ACCENTS UNILET LANCETS	P	QL(4.45 EA daily); MP; RX/OTC	INSUL-CAP MISC	P	RX/OTC
H-E-B INCONTROL ADV LANCING MISC	P	1 max fill(s) per 365 day(s) retail; MP	INSUL-EZE MISC	P	RX/OTC
HM EMBRACE TALK SYSTEM KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	KINNEY LANCETS	P	QL(4.45 EA daily); MP; RX/OTC
HW EMBRACE PRO GLUCOSE METER DEVI	NP	MP	KROGER AUTOLET LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP
HW EMBRACE TALK BLOOD GLUCOSE DEVI	NP	MP	KROGER BLOOD GLUCOSE KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
HYPOLANCE AST LANCING KIT	P	QL(0.034 EA daily); 1 max fill(s) per 365 day(s) retail			
HY-VEE THIN LANCETS	P	QL(4.45 EA daily); MP; RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
KROGER HEALTHPRO CONTROL HI/LO LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	LANCETS SUPER THIN 28G	P	QL(4.45 EA daily); MP; RX/OTC
			LANCETS THIN	P	QL(4.45 EA daily); MP; RX/OTC
KROGER LANCETS	P	QL(4.45 EA daily); MP; RX/OTC	LANCETS ULTRA THIN	P	QL(4.45 EA daily); MP; RX/OTC
KROGER LANCETS 21G	P	QL(4.45 EA daily); MP; RX/OTC	LANCETS ULTRA THIN 30G	P	QL(4.45 EA daily); MP; RX/OTC
KROGER LANCETS MICRO THIN 33G	P	QL(4.45 EA daily); MP; RX/OTC	LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP
KROGER LANCETS THIN	P	QL(4.45 EA daily); MP; RX/OTC	LANZO MISC	P	1 max fill(s) per 365 day(s) retail; MP
KROGER LANCETS THIN 26G	P	QL(4.45 EA daily); MP; RX/OTC	LEADER ADVANCED LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP
KROGER LANCETS ULTRATHIN 30G	P	QL(4.45 EA daily); MP; RX/OTC	LIBERTY BLOOD GLUCOSE METER DEVI	NP	MP
KROGER LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP	LIBERTY GLUCOSE CONTROL MID SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
KROGER PREMIUM BLOOD GLUCOSE KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	LIBERTY GLUCOSE CONTROL SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
LANCET DEVICE WITH EJECTOR MISC	P	1 max fill(s) per 365 day(s) retail; MP	LIBERTY MEDICAL LANCETS	P	QL(4.45 EA daily); MP; RX/OTC
LANCET DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP	LIBERTY MINI LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP
LANCET TRANSPORTER CASE MISC	P	MP	LIBERTY NXT GENERATION MONITOR DEVI	NP	MP
LANCETS	P	QL(4.45 EA daily); MP; RX/OTC	LIFESCAN UNISTIK 2	P	QL(4.45 EA daily); MP; RX/OTC
LANCETS 30G	P	QL(4.45 EA daily); MP; RX/OTC			
LANCETS MICRO THIN 33G	P	QL(4.45 EA daily); MP; RX/OTC			

IL MHP Medicaid

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LIFESCAN UNISTIK II LANCETS	P	QL(4.45 EA daily); MP; RX/OTC	MEDLANCE PLUS EXTRA 21G	P	QL(4.45 EA daily); MP; RX/OTC
LITE TOUCH LANCETS	P	QL(4.45 EA daily); MP; RX/OTC	MEDLANCE PLUS LITE 25G	P	QL(4.45 EA daily); MP; RX/OTC
LITE TOUCH LANCING PEN MISC	P	1 max fill(s) per 365 day(s) retail; MP	MEDLANCE PLUS SPECIAL 0.8MM	P	QL(4.45 EA daily); MP; RX/OTC
LITETOUCH LANCETS	P	QL(4.45 EA daily); MP; RX/OTC	MEDLANCE PLUS SUPERLITE 30G	P	QL(4.45 EA daily); MP; RX/OTC
LIVE BETTER ADV LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP	MEDLANCE PLUS UNIVERSAL 21G	P	QL(4.45 EA daily); MP; RX/OTC
LIVE BETTER LANCET SUPER THIN	P	QL(4.45 EA daily); MP; RX/OTC	MEIJER BLOOD GLUCOSE KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
LIVE BETTER LANCET ULTRA THIN	P	QL(4.45 EA daily); MP; RX/OTC	MEIJER ESSENTIAL BLOOD GLUCOSE KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
LONGS LANCETS THIN	P	QL(4.45 EA daily); MP; RX/OTC	MEIJER LANCETS THIN	P	QL(4.45 EA daily); MP; RX/OTC
MEDICHOICE SAFETY LANCET	P	QL(4.45 EA daily); MP; RX/OTC	MEIJER LANCETS UNIVERSAL 30G	P	QL(4.45 EA daily); MP; RX/OTC
MEDICHOICE SAFETY LANCET NORM	P	QL(4.45 EA daily); MP; RX/OTC	MEIJER LANCETS UNIVERSAL 33G	P	QL(4.45 EA daily); MP; RX/OTC
MEDISENSE GLUCOSE KETONE CONTR LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	MEIJER PREMIUM BLOOD GLUCOSE KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
MEDISENSE HI/MID/LOW CONTROL LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	MEIJER TRUE2GO BLOOD GLUCOSE KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
MEDLANCE EXTRA 21G	P	QL(4.45 EA daily); MP; RX/OTC	MEIJER TRUERESULT GLUCOSE SYS KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
MEDLANCE LITE 25G	P	QL(4.45 EA daily); MP; RX/OTC	MEIJER TRUETRACK GLUCOSE SYS KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
			MICRODOT BLOOD GLUCOSE SYSTEM KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MICRODOT CONTROL HIGH/LOW SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	MYGLUCOHEALTH BLOOD GLUCOSE KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
MICROLET NEXT LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP	MYGLUCOHEALTH CONTROL SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
MINI LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP	NEUTEK 2TEK CONTROL SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
MINILINK REAL-TIME TRANSMITTER	NP	MP	NOVA MAX BLOOD GLUCOSE SYSTEM DEVI	NP	MP
MINIMED 630G GUARDIAN PRESS	NP	MP	NOVA MAX BLOOD GLUCOSE SYSTEM KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
MM BLOOD GLUCOSE SYSTEM KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	NOVA MAX PLUS GLU/KET CONTROL LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
MM EASY TOUCH GLUCOSE METER KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	NOVA SAFETY LANCETS 23G	P	QL(4.45 EA daily); MP; RX/OTC
MM LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP	NOVA SUREFLEX LANCETS	P	QL(4.45 EA daily); MP; RX/OTC
MM TWIST LANCETS	P	QL(4.45 EA daily); MP; RX/OTC	NOVA SUREFLEX LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP
MONOLET LANCETS	P	QL(4.45 EA daily); MP; RX/OTC	OMNIPOD 5 DEXG7G6 INTRO GEN 5 KIT	P	QL(1 EA per 365 day(s) retail); PA
MONOLET OPD LANCETS	P	QL(4.45 EA daily); MP; RX/OTC	OMNIPOD 5 DEXG7G6 PODS GEN 5 MISC	P	MP; PA
MPD SAFETY LANCET 21G	P	QL(4.45 EA daily); MP; RX/OTC	OMNIPOD 5 G7 INTRO (GEN 5) KIT	P	QL(1 EA per 365 day(s) retail); PA
MPD SAFETY LANCET 28G	P	QL(4.45 EA daily); MP; RX/OTC	OMNIPOD 5 G7 PODS (GEN 5) MISC	P	MP; PA
MULTI-LANCET DEVICE 2 KIT	P	QL(0.034 EA daily); 1 max fill(s) per 365 day(s) retail	OMNIPOD CLASSIC PDM (GEN 3) KIT	P	QL(1 EA per 365 day(s) retail); PA
MULTI-LANCET DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP			

IL MHP Medicaid

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OMNIPOD CLASSIC PODS (GEN 3) MISC	P	MP; PA	ONETOUCH DELICA SAFETY LANCING	P	QL(4.45 EA daily); 1 max fill(s) per 365 day(s) retail; MP; RX/OTC
OMNIPOD DASH INTRO (GEN 4) KIT	P	QL(1 EA per 365 day(s) retail); PA	ONETOUCH FINEPOINT LANCETS	P	QL(4.45 EA daily); MP; RX/OTC
OMNIPOD DASH PDM (GEN 4) KIT	P	QL(1 EA per 365 day(s) retail); PA	ONETOUCH SOLUTIONS STARTER KIT KIT	NP	MP
OMNIPOD DASH PODS (GEN 4) MISC	P	MP; PA	ONETOUCH SURESOFT LANCING DEV MISC	P	MP
OMNIPOD GO KIT 10 UNIT/24HR, 15 UNIT/24HR, 25 UNIT/24HR, 35 UNIT/24HR	NP		ONETOUCH ULTRA 2 KIT	P	1 max fill(s) per 365 day(s) retail; RX/OTC
OMNIPOD GO KIT 20 UNIT/24HR, 30 UNIT/24HR, 40 UNIT/24HR	NP	QL(1 EA per 365 day(s) retail)	ONETOUCH ULTRA CONTROL LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
ON CALL EXPRESS MONITORING SYS KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	ONETOUCH ULTRA MINI KIT	NP	1 max fill(s) per 365 day(s) retail; MP; RX/OTC
ONE DROP BLOOD GLUCOSE MONITOR KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	ONETOUCH ULTRA MINI KIT	P	1 max fill(s) per 365 day(s) retail; MP; RX/OTC
ONETOUCH CLUB LANCETS FINE PT	P	QL(4.45 EA daily); MP; RX/OTC	ONETOUCH ULTRASOFT 2 LANCETS	P	QL(4.45 EA daily); MP; RX/OTC
ONETOUCH DELICA LANCETS 30G	P	QL(4.45 EA daily); MP; RX/OTC	ONETOUCH ULTRASOFT LANCETS	P	QL(4.45 EA daily); MP; RX/OTC
ONETOUCH DELICA LANCETS 33G	P	QL(4.45 EA daily); MP; RX/OTC	ONETOUCH VERIO FLEX SYSTEM KIT	P	1 max fill(s) per 365 day(s) retail; RX/OTC
ONETOUCH DELICA LANCING DEV MISC	P	1 max fill(s) per 365 day(s) retail; MP	ONETOUCH VERIO REFLECT KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
ONETOUCH DELICA PLUS LANCET30G	P	QL(4.45 EA daily); MP; RX/OTC	ONETOUCH VERIO KIT	P	1 max fill(s) per 365 day(s) retail; MP; RX/OTC
ONETOUCH DELICA PLUS LANCET33G	P	QL(4.45 EA daily); MP; RX/OTC			
ONETOUCH DELICA PLUS LANCING MISC	P	1 max fill(s) per 365 day(s) retail; MP			

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ONETOUCH VERIO LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	POCKETCHEM EZ SYSTEM KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
OVAL TAPE MISC	NP	RX/OTC	POGO AUTOMATIC BLOOD GLUCOSE DEVI	NP	MP
PARADIGM REAL-TIME TRANSMITTER	NP	MP	PRECISION GLUCOSE KETONE CONTR LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
PC LANCETS SUPER THIN 30G	P	QL(4.45 EA daily); MP; RX/OTC	PRECISION XTRA-GLUCOSE/KETONE DEVI	NP	MP
PENLET II BLOOD SAMPLER KIT	P	QL(0.034 EA daily); 1 max fill(s) per 365 day(s) retail	PRECISION XTRA KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
PENLET II REPLACEMENT CAP MISC	P	MP	PREFERRED PLUS LANCETS COLORED	P	QL(4.45 EA daily); MP; RX/OTC
PERFECT LANCETS 30G	P	QL(4.45 EA daily); MP; RX/OTC	PRO COMFORT LANCETS 30G	P	QL(4.45 EA daily); MP; RX/OTC
PHARMACIST CHOICE AUTOCODE SYS KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	PRO COMFORT SAFETY LANCETS 30G	P	QL(4.45 EA daily); MP; RX/OTC
PHARMACIST CHOICE LANCETS	P	QL(4.45 EA daily); MP; RX/OTC	PRO VOICE V8 GLUCOSE SYSTEM DEVI	NP	MP
PHARMACIST CHOICE MINI SYSTEM DEVI	NP	MP	PRO VOICE V9 GLUCOSE SYSTEM DEVI	NP	MP
PIP BLOOD GLUCOSE MONITORING DEVI	NP	MP	PRODIGY AUTOCODE BLOOD GLUCOSE DEVI	NP	QL(0.034 EA daily); MP
PIP GLUCOSE CONTROL SOLUTION LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	PRODIGY AUTOCODE BLOOD GLUCOSE DEVI	NP	MP
PIP LANCETS 30G	P	QL(4.45 EA daily); MP; RX/OTC	PRODIGY AUTOCODE BLOOD GLUCOSE KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
POCKETCHEM EZ CONTROL SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	PRODIGY CONTROL SOLUTION SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
			PRODIGY COUNT-A-DOSE MISC	P	RX/OTC
			PRODIGY LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP

IL MHP Medicaid

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PRODIGY NO CODING BLOOD GLUC KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	QUINTET BLOOD GLUCOSE SYSTEM DEVI	NP	MP
PRODIGY POCKET BLOOD GLUCOSE KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	QUINTET CONTROL HIGH/NORMAL SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
PRODIGY TWIST TOP LANCETS 28G	P	QL(4.45 EA daily); MP; RX/OTC	RA E-ZJECT LANCETS THIN 28G	P	QL(4.45 EA daily); MP; RX/OTC
PRODIGY VOICE BLOOD GLUCOSE KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	RA E-ZJECT LANCETS ULTRA THIN	P	QL(4.45 EA daily); MP; RX/OTC
PSS SELECT PLATFORMS MISC	P	MP	REALYLANCE SAFETY LANCETS	P	QL(4.45 EA daily); MP; RX/OTC
PSS SELECT SAFETY LANCETS	P	QL(4.45 EA daily); MP; RX/OTC	REALITY LANCETS	P	QL(4.45 EA daily); MP; RX/OTC
PX ADVANCED LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP	REFUAH PLUS GLUCOSE CONTROL SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
PX LANCET AUTO INJECTOR MISC	P	1 max fill(s) per 365 day(s) retail; MP	REFUAH PLUS MONITORING SYSTEM KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
QC ADVANCED LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP	RELION ALL-IN-ONE	NP	QL(0.034 EA daily); 1 max fill(s) per 365 day(s) retail; MP
QC LANCETS SUPER THIN 30G	P	QL(4.45 EA daily); MP; RX/OTC	RELION CONFIRM GLUCOSE MONITOR KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
QC LANCETS ULTRA THIN	P	QL(4.45 EA daily); MP; RX/OTC	RELION LANCET DEVICES 30G	P	QL(4.45 EA daily); 1 max fill(s) per 365 day(s) retail; MP; RX/OTC
QC UNILET LANCETS 28G	P	QL(4.45 EA daily); MP; RX/OTC	RELION LANCETS	P	QL(4.45 EA daily); 1 max fill(s) per 365 day(s) retail; MP; RX/OTC
QUICKTEK CONTROL SOLUTION LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail			
QUICKTEK/METER KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC			
QUICKTEK KIT	NP	1 max fill(s) per 365 day(s) retail			
QUINTET AC BLOOD GLUCOSE DEVI	NP	MP			

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RELION LANCETS MICRO-THIN 33G	P	QL(4.45 EA daily); MP; RX/OTC	RIGHTEST ALTERNATE SITE ADAPT MISC	P	MP
RELION LANCETS THIN 26G	P	QL(4.45 EA daily); MP; RX/OTC	RIGHTEST GC300 CONTROL LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
RELION LANCETS ULTRA-THIN 30G	P	QL(4.45 EA daily); MP; RX/OTC	RIGHTEST GD500 LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP
RELION LANCING DEVICE KIT	P	QL(0.034 EA daily); 1 max fill(s) per 365 day(s) retail	RIGHTEST GM100 BLOOD GLUCOSE KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
RELION LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP	RIGHTEST GM300 BLOOD GLUCOSE KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
RELION MICRO KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	RIGHTEST GM550 BLOOD GLUCOSE KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
RELION PREMIER BLU MONITOR DEVI	NP	MP	RIGHTEST GT333 BLOOD GLUCOSE DEVI	NP	MP
RELION PREMIER CLASSIC DEVI	NP	MP	SAFE-T-LANCE	P	QL(4.45 EA daily); MP; RX/OTC
RELION PREMIER COMPACT SYSTEM KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	SAFE-T-LANCE PLUS	P	QL(4.45 EA daily); MP; RX/OTC
RELION PREMIER VOICE MONITOR DEVI	NP	MP	SAFETY LANCET 30G/PRESSURE ACT	P	QL(4.45 EA daily); MP; RX/OTC
RELION PRIME MONITOR DEVI	NP	MP	SAFETY LANCETS 21G	P	QL(4.45 EA daily); MP; RX/OTC
RELION TRUE MET AIR GLUC METER KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	SAFETY LANCETS 28G	P	QL(4.45 EA daily); MP; RX/OTC
RELION ULTIMA GLUCOSE SYSTEM KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	SAPS HEALTH TWIST TOP LANCETS	P	QL(4.45 EA daily); MP; RX/OTC
RELION ULTRA THIN LANCETS 30G	P	QL(4.45 EA daily); MP; RX/OTC	SAPS TWIST TOP LANCETS	P	QL(4.45 EA daily); MP; RX/OTC
RELION ULTRA THIN PLUS LANCETS	P	QL(4.45 EA daily); MP; RX/OTC	SAPSCARE TWIST TOP LANCETS	P	QL(4.45 EA daily); MP; RX/OTC
REXALL BLOOD GLUCOSE SYSTEM KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	SB LANCETS THIN	P	QL(4.45 EA daily); MP; RX/OTC
REXALL LANCETS ULTRA THIN 30G	P	QL(4.45 EA daily); MP; RX/OTC			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SB LANCETS ULTRA THIN	P	QL(4.45 EA daily); MP; RX/OTC	SMARTEST CONTROL MEDIUM SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
SELECT-LITE DEVICE/LANCETS KIT	P	QL(0.034 EA daily); 1 max fill(s) per 365 day(s) retail	SMARTEST EJECT STARTER KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
SELECT-LITE LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP	SMARTEST EJECT DEVI	NP	QL(0.034 EA daily); MP
SHOPKO AUTOLET LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP	SMARTEST PERSONA STARTER KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
SHOPKO ON-THE-GO LANCETS 30G	P	QL(4.45 EA daily); MP; RX/OTC	SMARTEST PRONTO STARTER KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
SHOPKO UNILET LANCETS 28G	P	QL(4.45 EA daily); MP; RX/OTC	SMARTEST PROTEGE STARTER KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
SIMPLE DIAGNOSTICS LANCING DEV MISC	P	1 max fill(s) per 365 day(s) retail; MP	SMARTEST PROTEGE DEVI	NP	QL(0.034 EA daily); MP
SINGLE-LET	P	QL(4.45 EA daily); MP; RX/OTC	SOLUS V2 BLOOD GLUCOSE SYSTEM DEVI	NP	MP
SM TRUEDRAW LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP	SOLUS V2 BLOOD GLUCOSE SYSTEM KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
SMART DIABETES VANTAGE LANCING MISC	P	1 max fill(s) per 365 day(s) retail; MP	SOLUS V2 CONTROL SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
SMART SENSE COLOR LANCETS 33G	P	QL(4.45 EA daily); MP; RX/OTC	SOLUS V2 LANCETS 28G	P	QL(4.45 EA daily); MP; RX/OTC
SMART SENSE PREMIUM SYSTEM KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	SOLUS V2 LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP
SMART SENSE STANDARD LANCETS	P	QL(4.45 EA daily); MP; RX/OTC	STERILANCE PA MISC	P	MP
SMART SENSE THIN LANCETS 26G	P	QL(4.45 EA daily); MP; RX/OTC	STERILANCE TL	P	QL(4.45 EA daily); MP; RX/OTC
SMART SENSE VALUE GLUCOSE SYS KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	SUPREME II HIGH/LOW CONTROL LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SURE COMFORT LANCETS 21G	P	QL(4.45 EA daily); MP; RX/OTC	TGT LANCET THIN 26G	P	QL(4.45 EA daily); MP; RX/OTC
SURE COMFORT LANCETS 30G	P	QL(4.45 EA daily); MP; RX/OTC	TGT LANCET ULTRA THIN 30G	P	QL(4.45 EA daily); MP; RX/OTC
SURE COMFORT LANCING PEN MISC	P	1 max fill(s) per 365 day(s) retail; MP	TGT LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP
SURELITE LANCETS	P	QL(4.45 EA daily); MP; RX/OTC	THINLETS GP LANCETS	P	QL(4.45 EA daily); MP; RX/OTC
SURESTEP GLUCOSE CONTROL SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	TODAYS HEALTH LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP
SURESTEP PRO HIGH GLUCOSE LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	TODAYS HEALTH THIN LANCETS 28G	P	QL(4.45 EA daily); MP; RX/OTC
SURESTEP PRO LOW GLUCOSE LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	TODAYS HEALTH THIN LANCETS 30G	P	QL(4.45 EA daily); MP; RX/OTC
TECHLITE LANCETS	P	QL(4.45 EA daily); MP; RX/OTC	TOPCARE LANCETS MICRO-THIN 33G	P	QL(4.45 EA daily); MP; RX/OTC
TECHLITE LANCETS 26G	P	QL(4.45 EA daily); MP; RX/OTC	TRAVEL LANCETS	P	QL(4.45 EA daily); MP; RX/OTC
TECHLITE LANCETS 30G	P	QL(4.45 EA daily); MP; RX/OTC	TRUE COMFORT SAFETY LANCETS	P	QL(4.45 EA daily); MP; RX/OTC
TEMPO REFILL KIT	NP	1 max fill(s) per 365 day(s) retail	TRUE COMFORT TWIST TOP LANCETS	P	QL(4.45 EA daily); MP; RX/OTC
TEMPO WELCOME KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	TRUE FOCUS BLOOD GLUCOSE METER DEVI	NP	MP
TGT BLOOD GLUCOSE MONITORING KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	TRUE METRIX AIR GLUCOSE METER DEVI	NP	MP
			TRUE METRIX AIR GLUCOSE METER KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
			TRUE METRIX GO GLUCOSE METER KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
			TRUE METRIX LEVEL 1 SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail

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TRUE METRIX LEVEL 3 SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	TRUETRACK SMART SYSTEM KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
TRUE METRIX METER DEVI	NP	MP	TWIST TOP LANCETS 30G	P	QL(4.45 EA daily); MP; RX/OTC
TRUE METRIX METER KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	ULTI-LANCE AUTOMATIC MISC	P	1 max fill(s) per 365 day(s) retail; MP
TRUECONTROL GLUCOSE CONT LEV 0 LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	ULTILET CLASSIC LANCETS	P	QL(4.45 EA daily); MP; RX/OTC
TRUECONTROL GLUCOSE CONT LEV 1 LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	ULTILET LANCETS	P	QL(4.45 EA daily); MP; RX/OTC
TRUEDRAW LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP	ULTILET SAFETY LANCETS	P	QL(4.45 EA daily); MP; RX/OTC
TRUEPLUS LANCETS 26G	P	QL(4.45 EA daily); MP; RX/OTC	ULTRA THIN LANCETS 31G	P	QL(4.45 EA daily); MP; RX/OTC
TRUEPLUS LANCETS 28G	P	QL(4.45 EA daily); MP; RX/OTC	ULTRA-CARE LANCETS 30G	P	QL(4.45 EA daily); MP; RX/OTC
TRUEPLUS LANCETS 30G	P	QL(4.45 EA daily); MP; RX/OTC	ULTRA-THIN II LANCETS	P	QL(4.45 EA daily); MP; RX/OTC
TRUEPLUS LANCETS 33G	P	QL(4.45 EA daily); MP; RX/OTC	UNILET COMFORTOUCH LANCET	P	QL(4.45 EA daily); MP; RX/OTC
TRUEPLUS SAFETY LANCETS 28G	P	QL(4.45 EA daily); MP; RX/OTC	UNILET EXCELITE	P	QL(4.45 EA daily); MP; RX/OTC
TRUERESULT BLOOD GLUCOSE KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	UNILET EXCELITE II	P	QL(4.45 EA daily); MP; RX/OTC
TRUETRACK BLOOD GLUCOSE DEVI	NP	MP	UNILET G.P. LANCET	P	QL(4.45 EA daily); MP; RX/OTC
TRUETRACK BLOOD GLUCOSE KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	UNILET G.P. SUPERLITE LANCET	P	QL(4.45 EA daily); MP; RX/OTC
			UNILET GP 28 ULTRA THIN	P	QL(4.45 EA daily); MP; RX/OTC
			UNILET LANCET	P	QL(4.45 EA daily); MP; RX/OTC

IL MHP Medicaid

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UNILET SUPERLITE LANCET	P	QL(4.45 EA daily); MP; RX/OTC	UNISTRIP CONTROL SOLN	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
UNILET SUPER-THIN 30G	P	QL(4.45 EA daily); MP; RX/OTC	UNIVERSAL 1 LANCETS ULTRA THIN	P	QL(4.45 EA daily); MP; RX/OTC
UNISTIK 1	P	MP; RX/OTC	VALUE PLUS LANCET STANDARD 21G	P	QL(4.45 EA daily); MP; RX/OTC
UNISTIK 2	P	MP; RX/OTC	VALUE PLUS LANCETS SUPER THIN	P	QL(4.45 EA daily); MP; RX/OTC
UNISTIK 2 COMFORT	P	MP; RX/OTC	VALUE PLUS LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP
UNISTIK 2 EXTRA	P	MP; RX/OTC	VALUMARK LANCET SUPER THIN 30G	P	QL(4.45 EA daily); MP; RX/OTC
UNISTIK 2 NEONATAL	P	MP; RX/OTC	VALUMARK LANCET ULTRA THIN 28G	P	QL(4.45 EA daily); MP; RX/OTC
UNISTIK 2 NORMAL	P	MP; RX/OTC	VERASENS BLOOD GLUCOSE METER DEVI	NP	MP
UNISTIK 2 SUPER	P	MP; RX/OTC	VERASENS BLOOD GLUCOSE SYSTEM KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC
UNISTIK 3	P	MP; RX/OTC	VERASENS GLUCOSE CONTROL LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
UNISTIK 3 COMFORT	P	MP; RX/OTC	VERIFINE SAFE LANCET MINI 23G	P	QL(4.45 EA daily); MP; RX/OTC
UNISTIK 3 EXTRA	P	MP; RX/OTC	VERIFINE SAFE LANCET MINI 30G	P	QL(4.45 EA daily); MP; RX/OTC
UNISTIK 3 GENTLE	P	QL(4.45 EA daily); MP; RX/OTC	VERIFINE UNIVERSAL LANCETS 30G	P	QL(4.45 EA daily); MP; RX/OTC
UNISTIK 3 NEONATAL	P	MP; RX/OTC	V-GO 20 KIT	NP	QL(1 EA per 365 day(s) retail)
UNISTIK 3 NORMAL	P	MP; RX/OTC			
UNISTIK CZT COMFORT	P	MP; RX/OTC			
UNISTIK CZT NORMAL	P	MP; RX/OTC			
UNISTIK NORMAL	P	MP; RX/OTC			
UNISTIK PRO SAFETY LANCET	P	QL(4.45 EA daily); MP; RX/OTC			
UNISTIK TOUCH SAFETY LANC 21G	P	QL(4.45 EA daily); MP; RX/OTC			
UNISTIK TOUCH SAFETY LANC 23G	P	QL(4.45 EA daily); MP; RX/OTC			
UNISTIK TOUCH SAFETY LANC 28G	P	QL(4.45 EA daily); MP; RX/OTC			
UNISTIK TOUCH SAFETY LANC 30G	P	QL(4.45 EA daily); MP; RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
V-GO 30 KIT	NP	QL(1 EA per 365 day(s) retail)	2-WAY FOLEY STABILIZATION DEV MISC	P	RX/OTC
V-GO 40 KIT	NP	QL(1 EA per 365 day(s) retail)	3-IN-1 BEDSIDE TOILET MISC	P	RX/OTC
VIDA MIA AUTOLET LANCING DEV MISC	P	1 max fill(s) per 365 day(s) retail; MP	ACU-LIFE CRUSHER/CONTAINER MISC	P	RX/OTC
VIVAGUARD INO CONTROL SOLUTION LIQD	P	QL(1 EA per fill retail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	ADAPTER CAP MISC	P	RX/OTC
VIVAGUARD INO GLUCOSE METER DEVI	NP	MP	ADD-VANTAGE ADDAPTOR CONNECTOR MISC	P	RX/OTC
VIVAGUARD INO SMART GLUC METER DEVI	NP	MP	ADJUST BATH/SHOWER SEAT/BACK MISC	P	RX/OTC
VIVAGUARD LANCETS	P	QL(4.45 EA daily); MP; RX/OTC	ADJUST BATH/SHOWER SEAT MISC	P	RX/OTC
VIVAGUARD LANCING DEVICE MISC	P	1 max fill(s) per 365 day(s) retail; MP	ADJUST FOLD CANE/YORK HANDLE MISC	P	RX/OTC
VIVI CAP1 MISC	P	RX/OTC	ADJUSTABLE ALUMINUM CANE 3/4" MISC	P	RX/OTC
VIVI CAP MISC	P	RX/OTC	ADJUSTABLE ALUMINUM CANE 5/8" MISC	P	RX/OTC
WALGREENS LANCETS	P	QL(4.45 EA daily); MP; RX/OTC	ADJUSTABLE ALUMINUM CANE 7/8" MISC	P	RX/OTC
WALGREENS LANCETS SUPER THIN	P	QL(4.45 EA daily); MP; RX/OTC	ADJUSTABLE ALUMINUM CANE MISC	P	RX/OTC
WALGREENS THIN LANCETS	P	QL(4.45 EA daily); MP; RX/OTC	ADJUSTABLE COMMODE 3-IN-1 MISC	P	RX/OTC
WALGREENS ULTRA THIN LANCETS	P	QL(4.45 EA daily); MP; RX/OTC	ADJUSTABLE FOLDING CANE MISC	P	RX/OTC
WAVESENSE AMP KIT	NP	1 max fill(s) per 365 day(s) retail; RX/OTC	ADULT PUSH BUTTON ALUM CRUTCH MISC	P	RX/OTC
Misc. Devices			ALCOHOL PREP	P	RX/OTC
14-COUNT WARMER MISC	P	RX/OTC	ALCOHOL PREP PADS	P	RX/OTC
			ALCOHOL SWABS	P	RX/OTC
			ALCOHOL SWABSTICK	P	RX/OTC
			ALEVE TENS REFILL PADS MISC	P	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ALL-BODY MASSAGE MISC	P	RX/OTC	AMEDA MYA JOY BREAST PUMP MISC	P	RX/OTC
ALPHAMOP FOAM REPLACEMENT PADS MISC	P	RX/OTC	AMEDA ONE-HAND BREAST PUMP MISC	P	RX/OTC
ALUMINUM BLANKET SUPPORT MISC	P	RX/OTC	AMEDA PLATINUM BREAST PUMP MISC	P	RX/OTC
ALUMINUM FLIP OFF SEALS 13MM MISC	P	RX/OTC	AMEDA PURELY YOURS BREAST PUMP MISC	P	RX/OTC
ALUMINUM FLIP OFF SEALS 20MM MISC	P	RX/OTC	AMEDA SILICONE TUBING MISC	P	RX/OTC
AMBER GLASS BOTTLE MISC	P	RX/OTC	AMEDA TUBING ADAPTER MISC	P	RX/OTC
AMBER GLASS VIALS 2ML/13MM MISC	P	RX/OTC	AMEDA VALVES MISC	P	RX/OTC
AMBER GLASS VIALS 2ML MISC	P	RX/OTC	AMIELLE RESTORE VAG EXERCISERS MISC	P	RX/OTC
AMBER GLASS VIALS 30ML/20MM MISC	P	RX/OTC	AMIELLE VAGINAL TRAINER MISC	P	RX/OTC
AMEDA ADAPTER CAP MISC	P	RX/OTC	ANGEL WING BLOOD COLLECT SET MISC	P	RX/OTC
AMEDA BREAST FLANGE INSERT MISC	P	RX/OTC	ANGEL WING LUER ADAPTER/HOLDER MISC	P	RX/OTC
AMEDA CUSTOMFIT BREAST FLANGE MISC	P	RX/OTC	ANGEL WING TRANSFER DEVICE MISC	P	RX/OTC
AMEDA DIAPHRAGMS MISC	P	RX/OTC	ANGEL WING TUBE HOLDER MISC	P	RX/OTC
AMEDA DUAL HYGIENIKIT SYSTEM MISC	P	RX/OTC	APNEASTRIP MISC	P	RX/OTC
AMEDA DUAL HYGIENIKIT W/ADAPT MISC	P	RX/OTC	AQUA FILTER HOLDERS MISC	P	RX/OTC
AMEDA ELITE BREAST PUMP MISC	P	RX/OTC	ARGYLE SARATOGA SUMP DRAIN MISC	P	RX/OTC
AMEDA FINESSE BREAST PUMP MISC	P	RX/OTC	ARGYLE TRACH TUBE HOLDER MISC	P	RX/OTC
AMEDA FLEXISHIELD MISC	P	RX/OTC	AUM ALCOHOL PREP PADS	P	RX/OTC
AMEDA MYA JOY BREAST PUMP/TOTE MISC	P	RX/OTC	AUTOCLAVE AIR FILTER MISC	P	RX/OTC
			AUTOCLAVE PAPER 36" X 36" MISC	P	RX/OTC
			AUTOCLAVE PRINTER PAPER MISC	P	RX/OTC
			BABY FRIDGE MISC	P	RX/OTC

IL MHP Medicaid

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BAMBOO CANE MISC	P	RX/OTC	BOTTLE AMBER GRADUATED 8OZ MISC	P	RX/OTC
BANDAGE SCISSORS MISC	P	RX/OTC	BOTTLE/WHITE 6OZ W/TWIST TOP MISC	P	RX/OTC
BARIATRIC ALUMINUM CANE MISC	P	RX/OTC	BOTTLETOP DISPENSER ADAPTER MISC	P	RX/OTC
BATH BENCH WITH BACK MISC	P	RX/OTC	BOTTLETOP DISPENSER MISC	P	RX/OTC
BATH/SHOWER SEAT MISC	P	RX/OTC	BREAST PUMP MISC	P	RX/OTC
BATHTUB SAFETY RAIL MISC	P	RX/OTC	BREATHE COMFORT NASAL ASPIRATO MISC	P	RX/OTC
BD SAFE CLIP NEEDLE CLIPPER MISC	P	RX/OTC	BREATHE COMFORT NASAL IRRIGAT MISC	P	RX/OTC
BD SAFE-CLIP BY MAIL MISC	P	RX/OTC	BREATHE EASE PULSE OXIMETER MISC	P	RX/OTC
BD SWAB SINGLE USE REGULAR	P	RX/OTC	BUBBLE POINT TESTER KIT/WIZARD MISC	P	RX/OTC
BED WEDGE MISC	P	RX/OTC	CANE FOR BLIND FOLDING MISC	P	RX/OTC
BEUTLICH PH TEST ROLL MISC	P	RX/OTC	CANE HOLDER MISC	P	RX/OTC
BI-FOCAL MAGNIFIER MISC	P	RX/OTC	CANE TIPS 3/4" MISC	P	RX/OTC
BLOOD COLLECTION TUBE HOLDER MISC	P	RX/OTC	CANE TIPS 7/8" MISC	P	RX/OTC
BLOOD PRESSURE SMART CARD MISC	P	RX/OTC	CANE TIPS FOR ALUM 3/4" MISC	P	RX/OTC
BMI DIGITAL SMART SCALE MISC	P	RX/OTC	CANE TIPS FOR WOOD 3/4" MISC	P	RX/OTC
BOTTLE 120ML/SPRAY/CLR PLASTIC MISC	P	RX/OTC	CANE TIPS FOR WOOD 5/8" MISC	P	RX/OTC
BOTTLE 2OZ/BLUE GLASS/DROPPER MISC	P	RX/OTC	CANE TIPS FOR WOOD 7/8" MISC	P	RX/OTC
BOTTLE 500ML/BOSTON ROUND/CAP MISC	P	RX/OTC	CANE TIPS MISC	P	RX/OTC
BOTTLE 8OZ/BOSTON ROUND/CAP MISC	P	RX/OTC	CANE WRIST STRAP MISC	P	RX/OTC
BOTTLE AMBER GLASS 33OZ MISC	P	RX/OTC	CANE/OFFSET HANDLE MISC	P	RX/OTC
BOTTLE AMBER GRADUATED 16OZ MISC	P	RX/OTC	CANE/T-HANDLE MISC	P	RX/OTC
			CANE MISC	P	RX/OTC
			CARETOUCH ALCOHOL PREP	P	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CARETOUCH PULSE OXIMETER MISC	P	RX/OTC	CLIP & STOR MISC	P	RX/OTC
CAREX COCCYX CUSHION MISC	P	RX/OTC	COLD SEAL BLISTER/LG 62 DOSE MISC	P	RX/OTC
CAREX ULTRA GRABBER 32" MISC	P	RX/OTC	COLD SEAL BLISTER/MD 28 DOSE MISC	P	RX/OTC
CAREX WHEELCHAIR MISC	P	RX/OTC	COLD SEAL BLISTER/MD 31 DOSE MISC	P	RX/OTC
CERVICAL PILLOW/COVER MISC	P	RX/OTC	COLD SEAL BLISTER/MD 90 DOSE MISC	P	RX/OTC
CERVICAL PILLOW MISC	P	RX/OTC	COLD SEAL BLISTER/SM 28 DOSE MISC	P	RX/OTC
CHEMO TRANSFER PIN MISC	P	RX/OTC	COLD SEAL BLISTER/SM 31 DOSE MISC	P	RX/OTC
CINIS PREEMIE HALO LARGE MISC	P	RX/OTC	COLD SEAL BLISTERS/LARGE MISC	P	RX/OTC
CINIS PREEMIE HALO MEDIUM MISC	P	RX/OTC	COMAR PRESS-IN BOTTLE ADAPTERS MISC	P	RX/OTC
CINIS PREEMIE HALO SMALL MISC	P	RX/OTC	COMFORT CURVE MASSAGE CUSHION MISC	P	RX/OTC
CLASSICS ROLLING WALKER MISC	P	RX/OTC	COMFORT FIT FLANGES LARGE MISC	P	RX/OTC
CLEANROOM TACKY MAT 18"X36" MISC	P	RX/OTC	COMFORT PERSONAL CLEANS CART MISC	P	RX/OTC
CLEAR GLASS VIAL 10ML MISC	P	RX/OTC	COMFORT PERSONAL MICROWAVE MISC	P	RX/OTC
CLEAR GLASS VIALS 2ML MISC	P	RX/OTC	COMFORT PERSONAL SHAMPOO CAP MISC	P	RX/OTC
CLEVER CHOICE BMI SCALE MISC	P	RX/OTC	COMFORT PERSONAL WARMER 14-CT MISC	P	RX/OTC
CLEVER CHOICE BREAST PUMP MISC	P	RX/OTC	COMFORT PERSONAL WARMER 28-CT MISC	P	RX/OTC
CLEVER CHOICE HEARING AMPLIFIE MISC	P	RX/OTC	COMMODOE 3-IN-1 MISC	P	RX/OTC
CLEVER CHOICE HYDROTHERAPY SYS MISC	P	RX/OTC	COMMODOE BEDSIDE/BACK MISC	P	RX/OTC
CLEVER CHOICE PULSE OXIMETER MISC	P	RX/OTC	COMMODOE BEDSIDE MISC	P	RX/OTC
CLINERE EARWAX CLEANERS MISC	P	RX/OTC	COMMODOE PAIL MISC	P	RX/OTC
CLINERE EARWAX REMOVER MISC	P	RX/OTC	COMMODOE SPLASH GUARD MISC	P	RX/OTC
			COMMODOE MISC	P	RX/OTC

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CONTOUR BACK CUSHION MISC	P	RX/OTC	CURITY ALCOHOL PREPS	P	RX/OTC
CONTOUR FITTED SHEETS MISC	P	RX/OTC	CURITY COTTON TIPPED APPLIC 6" MISC	P	
CONTOUR MATTRESS COVER MISC	P	RX/OTC	CURITY COTTON TIPPED APPLICATR MISC	P	
COTTON SWABS SWAB	P		CUSTOM-FLEX MISC	P	RX/OTC
COVERALL BOOTS/DISPOSABLE/UN IV MISC	P	RX/OTC	CVS ALCOHOL PREP PADS	P	RX/OTC
COVERALL W/HOOD/3XL MISC	P	RX/OTC	CVS ALKALINE BATTERIES SIZE AA MISC	P	RX/OTC
COVERALL W/HOOD/SMALL MISC	P	RX/OTC	CVS BABY SAFETY SWABS SWAB	P	
COVERALL W/HOOD/XL MISC	P	RX/OTC	CVS CANE MISC	P	RX/OTC
COVERALL W/HOOD/XXL MISC	P	RX/OTC	CVS COTTON SWABS SWAB	P	
COVERALLS ELAST BACK/WRST/ANKL MISC	P	RX/OTC	CVS CRUTCHES MISC	P	RX/OTC
CRUTCH ACCESSORY KIT MISC	P	RX/OTC	CVS DIABETIC ORGANIZER MISC	P	RX/OTC
CRUTCH HANDGRIPS MISC	P	RX/OTC	CVS EAR PLUGS MISC	P	RX/OTC
CRUTCH PILLOWS/ARM/HAND MISC	P	RX/OTC	CVS GEL GRIP FOLDING CANE MISC	P	RX/OTC
CRUTCH SET MISC	P	RX/OTC	CVS INFLATABLE VINYL CUSHION MISC	P	RX/OTC
CRUTCH TIPS MISC	P	RX/OTC	CVS PILL SPLITTER MISC	P	RX/OTC
CRUTCH UNDERARM PADS MISC	P	RX/OTC	CVS PLASTIC SWABS SWAB	P	
CRUTCHES-ALUMINUM MISC	P	RX/OTC	CVS PREP	P	RX/OTC
CRUTCH-MATE ADULT ARM MISC	P	RX/OTC	CVS PULSE OXIMETER MISC	P	RX/OTC
CRUTCH-MATE ADULT FOREARM MISC	P	RX/OTC	CVS QUAD CANE MISC	P	RX/OTC
CRUTCH-MATE ADULT HAND GRIP LG MISC	P	RX/OTC	CVS READY SET GO BATH BENCH MISC	P	RX/OTC
CRUTCH-MATE ADULT HAND GRIPS MISC	P	RX/OTC	CVS REUSABLE SHEET PROTECTOR MISC	P	RX/OTC
CRUTCH MISC	P	RX/OTC	CVS RUBBER CUSHION MISC	P	RX/OTC
			DEEP-TISSUE MISC	P	RX/OTC

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
DENTAL GUARD MISC	P	RX/OTC	DISPENSER MD PUMP BOTTLE 200ML MISC	P	RX/OTC
DENTEK PROF-FIT DENTAL GUARD MISC	P	RX/OTC	DISPENSER MD PUMP BOTTLE 240ML MISC	P	RX/OTC
DEODORANT TUBES 2.65OZ-CAPS MISC	P	RX/OTC	DISPENSER MD PUMP BOTTLE 30ML MISC	P	RX/OTC
DIAL-A-DOSE SYRINGE 15ML MISC	P	RX/OTC	DISPENSER MD PUMP BOTTLE 50ML MISC	P	RX/OTC
DIAL-A-DOSE SYRINGE 30ML MISC	P	RX/OTC	DISPENSER MD PUMP BOTTLE 80ML MISC	P	RX/OTC
DIAL-A-DOSE SYRINGE 60ML MISC	P	RX/OTC	DISPENSER MD SYRINGE 10ML MISC	P	RX/OTC
DIFFUSER ULTRA SONIC MISC	P	RX/OTC	DISPENSER MD SYRINGE 5ML MISC	P	RX/OTC
DIGITAL GLASS SCALE MISC	P	RX/OTC	DISPENSER MEGAPUMP AIRLESS MISC	P	RX/OTC
DIGITAL SCALE/BLUETOOTH MISC	P	RX/OTC	DISPENSER MEGAPUMP MEZZO RND MISC	P	RX/OTC
DINAMAP MONITOR PROBE COVERS MISC	P	RX/OTC	DISPENSER TIP CAP/PRECISED DOSE MISC	P	RX/OTC
DISP SINGLE HEAD STETHOSCOPE MISC	P	RX/OTC	DISPENSER/MD FOAMER MISC	P	RX/OTC
DISPENSER 50ML/FOAMER PUMP MISC	P	RX/OTC	DISPOSABLE BULB/VALVE MISC	P	RX/OTC
DISPENSER MD JAR 50ML MISC	P	RX/OTC	DIVERTER VALVE MISC	P	RX/OTC
DISPENSER MD PEN 6.5ML MISC	P	RX/OTC	DOPRTAINERS 10ML MISC	P	RX/OTC
DISPENSER MD PUMP 0.25ML MISC	P	RX/OTC	DOVER COMMODOE SPECIMEN COLLECT MISC	P	RX/OTC
DISPENSER MD PUMP 0.5ML MISC	P	RX/OTC	DOVER MIDSTREAM SPECIMEN CATCH MISC	P	RX/OTC
DISPENSER MD PUMP 1.0ML MISC	P	RX/OTC	DROPPER & SCREW CAP 4OZ MISC	P	RX/OTC
DISPENSER MD PUMP 1.5ML MISC	P	RX/OTC	DROPPING BOTTLE 30ML MISC	P	RX/OTC
DISPENSER MD PUMP BOTTLE 100ML MISC	P	RX/OTC	DROPSAFE ALCOHOL PREP	P	RX/OTC
DISPENSER MD PUMP BOTTLE 150ML MISC	P	RX/OTC	DROPTAINER TIP CAPS MISC	P	RX/OTC
DISPENSER MD PUMP BOTTLE 15ML MISC	P	RX/OTC			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
DROPTAINERS OPTHALMIC 15ML MISC	P	RX/OTC	ENDURANCE HD COMMODE MISC	P	RX/OTC
DROPTAINERS OPTHALMIC 3ML MISC	P	RX/OTC	ENTERALITE INFINITY POLE CLAMP MISC	P	RX/OTC
DROPTAINERS OPTHALMIC 7ML MISC	P	RX/OTC	EQ BATH & SHOWER SEAT/BACK MISC	P	RX/OTC
DUAL PADDLE FOLDING WALKER MISC	P	RX/OTC	EQ CRUTCHES MISC	P	RX/OTC
DUNLAP FOAM RING CUSHION MISC	P	RX/OTC	EQ FOLDING WALKER MISC	P	RX/OTC
DUNLAP INFLATABLE VINYL RING MISC	P	RX/OTC	EQ WHEELCHAIR FOLDING BLACK MISC	P	RX/OTC
EAR WAX REMOVAL/TRI-STREAM TIP MISC	P	RX/OTC	EQL ALCOHOL SWABS	P	RX/OTC
EARPLUGS MISC	P	RX/OTC	EQL COTTON SWABS SWAB	P	
EARPOPPER MIDDLE EAR INFLATION DEVI	P	RX/OTC	EQL EAR PLUGS/SILICONE MISC	P	RX/OTC
EASY FEED ELECTRIC BREAST PUMP MISC	P	RX/OTC	EQL MUSTACHE/BEARD SCISSORS MISC	P	RX/OTC
EASY TOUCH ALCOHOL PREP MEDIUM	P	RX/OTC	EQL SKIN CARE TOOL MISC	P	RX/OTC
ECO-SMARTFUNNEL 186ML MISC	P	RX/OTC	EVERYDAY PICK MISC	P	RX/OTC
EGG CRATE BED PAD MISC	P	RX/OTC	EXTENDABLE BEDSIDE RAIL MISC	P	RX/OTC
ELECTRODES 2"X2"/REUSABLE MISC	P	RX/OTC	EYE/EAR DROPPER MISC	P	RX/OTC
ELECTROTHERAPY PAIN RELIEF MISC	P	RX/OTC	E-Z LOCK RAISED TOILET SEAT MISC	P	RX/OTC
ELON PROFESSIONAL NAIL CARE MISC	P	RX/OTC	EZY DOSE ADULT-LOCK PILL CUT MISC	P	RX/OTC
ELONGATED TOILET SEAT ELEVATOR MISC	P	RX/OTC	EZY DOSE COLD SEAL CRD 28 DOSE MISC	P	RX/OTC
ELOSHIELD FACE SHIELD MISC	P	RX/OTC	EZY DOSE COLD SEAL CRD 62 DOSE MISC	P	RX/OTC
EMPTY VIAL 3ML MISC	P	RX/OTC	EZY DOSE COLD SEAL CRD 90 DOSE MISC	P	RX/OTC
ENDOSCOPIC DELIVERY SYSTEM MISC	P	RX/OTC	EZY DOSE CUT N CRUSH MISC	P	RX/OTC
ENDURANCE FOUR LEG SEAT CANE MISC	P	RX/OTC	EZY DOSE DELUXE PILL CUTTER MISC	P	RX/OTC
			EZY DOSE EZY CRUSH PILL CRUSH MISC	P	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
EZY DOSE MEDICINE CUPS MISC	P	RX/OTC	FLEX THERAPY MISC	P	RX/OTC
EZY DOSE PILL CUTTER ORIGINAL MISC	P	RX/OTC	FLIGHT EAR PLUGS MISC	P	RX/OTC
EZY DOSE PILL CUTTER MISC	P	RX/OTC	FOAM CHAIR CUSHION MISC	P	RX/OTC
FACE SHIELD FULL LENGTH/CLEAR MISC	P	RX/OTC	FOAM CRUTCH PAD MISC	P	RX/OTC
FACE SHIELD FULL LENGTH MISC	P	RX/OTC	FOAM CUSHION MISC	P	RX/OTC
FACE SHIELD MISC	P	RX/OTC	FOAM EAR PLUGS MISC	P	RX/OTC
FALL MAT MISC	P	RX/OTC	FOAM INVALID CUSHION MISC	P	RX/OTC
FASHION CANE/T-HANDLE MISC	P	RX/OTC	FOAM RING 2" MISC	P	RX/OTC
FETAL DOPPLER MISC	P	RX/OTC	FOIL WRAPPER 3" X 3" MISC	P	RX/OTC
FIFTY50 ALCOHOL PREP	P	RX/OTC	FOLDING CANE MISC	P	RX/OTC
FILTER 0.2 MICRON/25MM MISC	P	RX/OTC	FOLDING COMMODE MISC	P	RX/OTC
FILTER 0.2 MICRON/32MM MISC	P	RX/OTC	FOLDING PADDLE WALKER MISC	P	RX/OTC
FILTER 0.2 MICRON/47MM MISC	P	RX/OTC	FOLDING REACHER MISC	P	RX/OTC
FILTER 0.22 MICRON/73MM/1000ML MISC	P	RX/OTC	FOLDING SEAT CANE MISC	P	RX/OTC
FILTER ATTACHMENT MISC	P	RX/OTC	FOLDING WALKER/ADULT MISC	P	RX/OTC
FILTER FLUORODYNE/0.22 MICRON MISC	P	RX/OTC	FOLDING WALKER MISC	P	RX/OTC
FILTER/MILLEX-GP/50MM/CLEAR MISC	P	RX/OTC	FOLDING WALKING CANE MISC	P	RX/OTC
FLA ADJUST AIR ANKLE WALKER MISC	P	RX/OTC	FOOT MASSAGER MISC	P	RX/OTC
FLAORTHO WALKER MISC	P	RX/OTC	FORA GATEWAY MISC	P	RX/OTC
FLEX & GO FOLDING CANE MISC	P	RX/OTC	FORA GW9014 TELEHEALTH GATEWAY MISC	P	RX/OTC
FLEX SHIELD WITH EAR LOOPS MISC	P	RX/OTC	FORA TN'G SCALE 550 MISC	P	RX/OTC
FLEX SHIELD WITH TIE STRINGS MISC	P	RX/OTC	FREE SPIRIT KNEE/LEG WALKER MISC	P	RX/OTC
			FREESTYLE DOUBLE BREASTPUMP MISC	P	RX/OTC
			FT COMFORT FOAM EAR PLUGS MISC	P	RX/OTC

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FT COTTON SWABS SWAB	P		GNP PULSE OXIMETER MISC	P	RX/OTC
GETGO ROLLING WALKER MISC	P	RX/OTC	GNP REACHER 32" MISC	P	RX/OTC
GLASS BOTTLE 15ML MISC	P	RX/OTC	GNP TWEEZERS SLANT TIP MISC	P	RX/OTC
GLASS BOTTLE 30ML/BRUSH CAP MISC	P	RX/OTC	GOJJI WEIGHT SCALE MISC	P	RX/OTC
GLASS BOTTLE 30ML/PHENOLIC CAP MISC	P	RX/OTC	GRADUATED BOTTLE 2OZ MISC	P	RX/OTC
GLASS BOTTLE 30ML MISC	P	RX/OTC	GRADUATED BOTTLE 4OZ MISC	P	RX/OTC
GLASS BOTTLE 60ML MISC	P	RX/OTC	GROOVE ROLLING WALKER MISC	P	RX/OTC
GLASS SERUM BOTTLES 20ML MISC	P	RX/OTC	HAND HELD SHOWER SPRAY MISC	P	RX/OTC
GLASS SERUM BOTTLES 2ML MISC	P	RX/OTC	HARMONY BREASTPUMP MISC	P	RX/OTC
GLASS SERUM BOTTLES 30ML MISC	P	RX/OTC	HEAD COVERS 24" MISC	P	RX/OTC
GLASS SERUM BOTTLES 5ML MISC	P	RX/OTC	HEAD HALTER OVER DOOR TRACTION MISC	P	RX/OTC
GLASS VIAL 2ML MISC	P	RX/OTC	HEAD HALTER MISC	P	RX/OTC
GLASS VIAL AMBER 3ML MISC	P	RX/OTC	HEAD LICE COMB MISC	P	RX/OTC
GLOBAL ALCOHOL PREP EASE	P	RX/OTC	HEAT THERAPY MISC	P	RX/OTC
GNP ALCOHOL SWABS	P	RX/OTC	H-E-B INCONTROL ALCOHOL	P	RX/OTC
GNP ASSORTED COMBS MISC	P	RX/OTC	HEELBOOT LARGE MISC	P	RX/OTC
GNP COTTON SWABS SWAB	P		HEELBOOT LAUNDRY BAG MISC	P	RX/OTC
GNP DELUXE PULSE OXIMETER MISC	P	RX/OTC	HEELBOOT LINER LARGE MISC	P	RX/OTC
GNP DIGITAL WEIGHT SCALE MISC	P	RX/OTC	HEELBOOT LINER REGULAR MISC	P	RX/OTC
GNP NAIL CLIPPERS MISC	P	RX/OTC	HEELBOOT REGULAR MISC	P	RX/OTC
GNP POCKET TISSUE MISC	P	RX/OTC	HEELBOOT WALK PAD MISC	P	RX/OTC
			HIBICLENS FOOT PEDAL MISC	P	RX/OTC
			HIBICLENS HAND PUMP 16OZ MISC	P	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
HIBICLENS HAND PUMP 32OZ MISC	P	RX/OTC	ILLUSIONS C BREAST PROSTHESIS MISC	P	RX/OTC
HIBICLENS HAND PUMP GALLON MISC	P	RX/OTC	INDICATOR/BIOLOGICAL TEST KIT	P	RX/OTC
HIBICLENS HAND PUMP NON FOAM MISC	P	RX/OTC	INFLATABLE NECK REST MISC	P	RX/OTC
HIBICLENS PUMP ASSEMBLY MISC	P	RX/OTC	INHALATION VIAL CAP/BLUE MISC	P	RX/OTC
HIBICLENS WALL DISPENSER/FOOT MISC	P	RX/OTC	INHALATION VIAL CAP/GREEN MISC	P	RX/OTC
HIBICLENS WALL DISPENSER/HAND MISC	P	RX/OTC	INHALATION VIAL CAP/ORANGE MISC	P	RX/OTC
HM COMFORT FOAM EAR PLUGS MISC	P	RX/OTC	INHALATION VIAL CAP/RED MISC	P	RX/OTC
HM STERILE ALCOHOL PREP	P	RX/OTC	INHALATION VIAL CAP/WHITE MISC	P	RX/OTC
HOME STYLE BED RAILS MISC	P	RX/OTC	INHALATION VIAL CAP/YELLOW MISC	P	RX/OTC
HOT-COLD THERAPY MISC	P	RX/OTC	INHALATION VIAL W/ CAP/ORANGE MISC	P	RX/OTC
HURRICAINA DISPENSING CAP MISC	P	RX/OTC	INHALATION VIAL W/CAP/BLUE MISC	P	RX/OTC
HURRICAINA LIQUID DISPENSER MISC	P	RX/OTC	INHALATION VIAL W/CAP/GREEN MISC	P	RX/OTC
HURRICAINA SPR EXTENSION TUBES MISC	P	RX/OTC	INHALATION VIAL W/CAP/RED MISC	P	RX/OTC
HURRIPAK PERIO IRRIGATION TIPS MISC	P	RX/OTC	INHALATION VIAL W/CAP/WHITE MISC	P	RX/OTC
HURRIPAK PERIODONTAL ANESTHETI MISC	P	RX/OTC	INHALATION VIAL W/CAP/YELLOW MISC	P	RX/OTC
HURRYCANE FREEDOM EDITION CANE MISC	P	RX/OTC	INHALATION VIAL W/O CAP/AMBER MISC	P	RX/OTC
ICY DIAMOND TOTE CANVAS MISC	P	RX/OTC	INHALATION WORK STAT/50 HOLES MISC	P	RX/OTC
ICY DIAMOND TOTE NON LEATHER MISC	P	RX/OTC	ITOUCH SURE PELVIC EXERCISER MISC	P	RX/OTC
ICY HOT TENS THERAPY REFILL MISC	P	RX/OTC	J & J ANTISEPTIC WIPES MISC	P	RX/OTC
ILLUSIONS AA BREAST PROSTHESIS MISC	P	RX/OTC	J & J INSTANT COLD PACK MISC	P	RX/OTC
			J & J TOURNIQUET MISC	P	RX/OTC

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JAR/8OZ/WHITE LID MISC	P	RX/OTC	LANSINOH POSTPART WASH BOTTLE MISC	P	RX/OTC
JOHNSONS SAFETY SWABS SWAB	P		LANSINOH PUMP ADAPTERS MISC	P	RX/OTC
JOURNEY SERIES ROLLING WALKER MISC	P	RX/OTC	LANSINOH SMART PUMP TOTE BAGS MISC	P	RX/OTC
JUG AMBER GLASS 4L MISC	P	RX/OTC	LANSINOH SMARTPUMP 2.0 MISC	P	RX/OTC
KABOOTI ICE MISC	P	RX/OTC	LANSINOH SMARTPUMP MISC	P	RX/OTC
KABOOTI MISC	P	RX/OTC	LATCH ASSIST NIPPLE EVERTER MISC	P	RX/OTC
KANESON BREAST PUMP/NURSER MISC	P	RX/OTC	LITE'N UP 50 MISC	P	RX/OTC
KANGAROO RIGID CONTAINER MISC	P	RX/OTC	LITE'N UP 90 MISC	P	RX/OTC
KEGEL BALL TRAINER MISC	P	RX/OTC	LMA MAD NASAL MISC	P	RX/OTC
KEGEL FIT MISC	P	RX/OTC	LOS YANKAUER HOLDER MISC	P	RX/OTC
KEGEL TONER PELVIC TRAINER MISC	P	RX/OTC	LUER TIP CAP TRAY MISC	P	RX/OTC
LAB COAT-DISPOSABLE LARGE MISC	P	RX/OTC	LULLABY DBL ELECT BREAST PUMP MISC	P	RX/OTC
LAB COAT-DISPOSABLE MEDIUM MISC	P	RX/OTC	LUMBAR CUSHION MISC	P	RX/OTC
LAB COAT-DISPOSABLE SMALL MISC	P	RX/OTC	LUMBAR SUPPORT CUSHION MISC	P	RX/OTC
LAB COAT-DISPOSABLE XL MISC	P	RX/OTC	MAD NASAL ATOMIZATION DEVICE MISC	P	RX/OTC
LAB COAT-DISPOSABLE XXL MISC	P	RX/OTC	MAD NASAL MISC	P	RX/OTC
LAB COAT-DISPOSABLE MISC	P	RX/OTC	MAGNIFIER HANDS-FREE MISC	P	RX/OTC
LADYCARE MENOPAUSE MISC	P	RX/OTC	MASSAGER MISC	P	RX/OTC
LANSINOH BREASTFEEDING PILLOW MISC	P	RX/OTC	MATTRESS COVER MISC	P	RX/OTC
LANSINOH BREASTMILK COLLECTOR MISC	P	RX/OTC	MATTRESS PAD MISC	P	RX/OTC
LANSINOH EXTRA PUMPING SET MISC	P	RX/OTC	MAZERUSTAR MIXER/MIX CONTAINER MISC	P	RX/OTC
LANSINOH MANUAL BREAST PUMP MISC	P	RX/OTC	MEDELA DOUBLE BREAST PUMP MISC	P	RX/OTC
			MEDELA LACTINA DOUBLE PUMPING MISC	P	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MEDELA PUMP IN STYLE MISC	P	RX/OTC	MOIST-SURE REPLACEMENT COVER/L MISC	P	RX/OTC
MEDICINE DROPPER/CALIBRATED MISC	P	RX/OTC	MOIST-SURE REPLACEMENT COVER/M MISC	P	RX/OTC
MEDICINE DROPPER MISC	P	RX/OTC	MOIST-SURE REPLACEMENT COVER/P MISC	P	RX/OTC
MEDICINE SPOON MISC	P	RX/OTC	MOISTUREPLUS COVER LARGE MISC	P	RX/OTC
MEDI-COOLER MISC	P	RX/OTC	MOISTUREPLUS COVER/MEDIUM MISC	P	RX/OTC
MEDI-FRIDGE IIX MISC	P	RX/OTC	MOISTUREPLUS COVER/PETITE MISC	P	RX/OTC
MEDI-RDT BLISTER PACKS MISC	P	RX/OTC	MONOJECT BLOOD COLLECTION SET MISC	P	RX/OTC
MEIJER ALCOHOL SWABS	P	RX/OTC	MONOJECT BLOOD COLLECTION TUBE MISC	P	RX/OTC
METAL REACHER MISC	P	RX/OTC	MONOJECT BLOOD TUBE HOLDER MISC	P	RX/OTC
METERED NASAL SPRAY PUMP 15ML MISC	P	RX/OTC	MONOJECT LUER ADAPTER MISC	P	RX/OTC
MICROCLENS WALL MOUNT BRACKET MISC	P	RX/OTC	MONOJECT MULT-SAMP COLLECT SET MISC	P	RX/OTC
MINI DIFFUSER MISC	P	RX/OTC	MUCOSAL ATOMIZATION DEVICE MISC	P	RX/OTC
MINI MALLETT 3/4" PLASTIC MISC	P	RX/OTC	NAIL POLISH BOTTLE/BRUSH 15ML MISC	P	RX/OTC
MINI TRANSFER PIN MISC	P	RX/OTC	NAILIT MISC	P	RX/OTC
MIXER/MAZERUSTAR EMP JAR ADP MISC	P	RX/OTC	NASADOCK MISC	P	RX/OTC
MIXER/MAZERUSTAR KK-250S-300SS MISC	P	RX/OTC	NASAL SPRAY METERED PUMP MISC	P	RX/OTC
MIXER/MAZERUSTAR KK-300SS MISC	P	RX/OTC	NATURAL WOOD CANE MISC	P	RX/OTC
MIXER/MAZERUSTAR KK-400W MISC	P	RX/OTC	NATURAL WOOD WALKING STICK MISC	P	RX/OTC
MIXER/MAZERUSTAR MD PUMP ADP MISC	P	RX/OTC	NATURESPIRIT MISC	P	RX/OTC
MIXER/MAZERUSTAR/JAR ADP SET MISC	P	RX/OTC	NEXCARE COMFORT FOAM EAR PLUGS MISC	P	RX/OTC
MIXER/MAZERUSTAR/JAR MXING ADP MISC	P	RX/OTC			
MIXER/MAZERUSTAR/UNODOSE ADAPT MISC	P	RX/OTC			
MN8 MISC	P	RX/OTC			

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NEXCARE REUSABLE EAR PLUGS MISC	P	RX/OTC	OINTMENT TUBE/PLASTIC 6OZ MISC	P	RX/OTC
NG SECURE MISC	P	RX/OTC	OINTMENT TUBE/PLASTIC 8OZ MISC	P	RX/OTC
NIX ELECTRONIC LICE COMB MISC	P	RX/OTC	ONE OUNCE MEDICINE CUPS MISC	P	RX/OTC
NIX METAL TWO-SIDED COMB MISC	P	RX/OTC	ONE STEP AT A TIME FILTERS MISC	P	RX/OTC
NOURI AUTO MISC	P	RX/OTC	ONE-DAY-AT-A-TIME PLANNER MISC	P	RX/OTC
NOURI DUO MISC	P	RX/OTC	ORAL DOSE SYRINGE MISC	P	RX/OTC
NOVA BATH SEAT MISC	P	RX/OTC	ORAL ENDOTRACHEAL DEVICE MISC	P	RX/OTC
NOVA CUSHION GEL SEAT PAD MISC	P	RX/OTC	ORAL MEDICINE DROPPER MISC	P	RX/OTC
NOVA QUAD TIP-FOUR PRONGS MISC	P	RX/OTC	ORAL SYRINGE/BRUSH MISC	P	RX/OTC
NUASKIN FACIAL SCRUBBER MISC	P	RX/OTC	ORIG MCKENZIE CERVICAL ROLL MISC	P	RX/OTC
NUASKIN SKIN TAG REMOVER MISC	P	RX/OTC	O-RING CUSHION MISC	P	RX/OTC
NUASKIN VACUUM PRO MISC	P	RX/OTC	OSTEOBOOST BELT LARGE MISC	P	RX/OTC
NVZZLER PRO DOUBLE BREAST PUMP MISC	P	RX/OTC	OSTEOBOOST BELT MEDIUM MISC	P	RX/OTC
NVZZLER SINGLE BREAST PUMP MISC	P	RX/OTC	OSTEOBOOST BELT SMALL MISC	P	RX/OTC
OFFSET CANE MISC	P	RX/OTC	PEDAL EXERCISER MISC	P	RX/OTC
OINTMENT TUBE/METAL 1OZ MISC	P	RX/OTC	PELVIC MUSCLE TRAINER MISC	P	RX/OTC
OINTMENT TUBE/METAL 2OZ MISC	P	RX/OTC	PERSONALFIT FLEX CONNECTORS MISC	P	RX/OTC
OINTMENT TUBE/METAL 4OZ MISC	P	RX/OTC	PH ACCESSORIES STORAGE SOL MISC	P	RX/OTC
OINTMENT TUBE/OPHTH TIP 1/8OZ MISC	P	RX/OTC	PILL BOX 7 DAY MISC	P	RX/OTC
OINTMENT TUBE/PLASTIC 1OZ MISC	P	RX/OTC	PILL COUNTING TRAY/RIGHT HAND MISC	P	RX/OTC
OINTMENT TUBE/PLASTIC 2OZ MISC	P	RX/OTC	PILL CRUSHER MISC	P	RX/OTC
OINTMENT TUBE/PLASTIC 4OZ MISC	P	RX/OTC	PILL POUCH MISC	P	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PILL SPLITTER MISC	P	RX/OTC	PRECISION TISSUE GRINDER 50ML MISC	P	RX/OTC
PLASTIC BED PAN MISC	P	RX/OTC	PRECISION TISSUE GRINDER MISC	P	RX/OTC
PLASTIC BOTTLES 30ML MISC	P	RX/OTC	PRECISION URINE SPECIMEN SYS KIT	P	RX/OTC
PLASTIC BOTTLES 90ML MISC	P	RX/OTC	PRECISION URINE SPECIMEN SYS MISC	P	RX/OTC
PLASTIC ENEMA BOTTLE MISC	P	RX/OTC	PREMIUM PILL CRUSHER MISC	P	RX/OTC
PLASTIC JAR 6OZ MISC	P	RX/OTC	PRESS-IN BOTTLE ADAPTERS MISC	P	RX/OTC
PLASTIC SCOOP 1ML MISC	P	RX/OTC	PRO COMFORT FOOT BATH MISC	P	RX/OTC
PLATFORM WALKER ATTACHMENT MISC	P	RX/OTC	PRO COMFORT PULSE OXIMETER MISC	P	RX/OTC
PLATINUM REACHER 31" MISC	P	RX/OTC	PROTECTIVE SAFETY EYEWARE MISC	P	RX/OTC
POCKET MAGNIFIER MISC	P	RX/OTC	PROVATE 61MM MISC	P	RX/OTC
POCKET PRO+ REPLACEMENT SENSOR MISC	P	RX/OTC	PROVATE 67MM MISC	P	RX/OTC
POLYPROPYLENE CAP-LINER MISC	P	RX/OTC	PROVATE 73MM MISC	P	RX/OTC
POSIDYNE ELD FILTER/0.2UM MISC	P	RX/OTC	PROVATE 79MM MISC	P	RX/OTC
POSTURE SEAT MISC	P	RX/OTC	PROVATE 85MM MISC	P	RX/OTC
POWDER INSUFFLATOR-#4 CAPSULES MISC	P	RX/OTC	PROVATE 91MM MISC	P	RX/OTC
POWER ADAPTOR PUMP IN STYLE MISC	P	RX/OTC	PULSE OXIMETER DELUXE MISC	P	RX/OTC
PRECISION CATHETER URINE SYS KIT	P	RX/OTC	PULSE OXIMETER FOR FINGER MISC	P	RX/OTC
PRECISION MIDSTREAM KIT KIT	P	RX/OTC	PULSE OXIMETER MISC	P	RX/OTC
PRECISION SPECIMEN CONTAINER MISC	P	RX/OTC	PUMP IN STYLE ADVANCED MISC	P	RX/OTC
PRECISION SPUTUM COLLECTOR MISC	P	RX/OTC	PUMP IN STYLE/MAXFLOW TUBING MISC	P	RX/OTC
PRECISION STOOL COLLECTOR MISC	P	RX/OTC	PUMP IN STYLE/MAXFLOW MISC	P	RX/OTC
PRECISION TISSUE GRINDER 15ML MISC	P	RX/OTC	PURE COMFORT LEG COMP MASSAGER MISC	P	RX/OTC
			QC ALCOHOL SWABS	P	RX/OTC
			Q-TIPS/SINGLE-TIP APPLICATOR SWAB	P	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Q-TIPS/SINGLE-TIP SWAB	P		ROLLER WALKER MISC	P	RX/OTC
QUAD CANE TIPS MISC	P	RX/OTC	ROLLING WALKER/BURGUNDY MISC	P	RX/OTC
QUAD CANE/SMALL BASE MISC	P	RX/OTC	ROUND SHOWER STOOL MISC	P	RX/OTC
QUAD CANE MISC	P	RX/OTC	RUBBER BATH MAT MISC	P	RX/OTC
QUICK-FIT CRUTCHES MISC	P	RX/OTC	RUBBER INFLATABLE CUSHION MISC	P	RX/OTC
RA ALCOHOL SWABS	P	RX/OTC	RX LOCKING CAP MISC	P	RX/OTC
RA DELUXE PULSE OXIMETER MISC	P	RX/OTC	SAFE-SENSE BEARD NET MISC	P	RX/OTC
RA EXTRA COMFORT NIGHT PROTECT MISC	P	RX/OTC	SAFE-SENSE COVERALL BOOTS MISC	P	RX/OTC
RAISED TOILET SEAT/LOCK & ARMS MISC	P	RX/OTC	SAFE-SENSE COVERALL/HOOD/L MISC	P	RX/OTC
RAISED TOILET SEAT/LOCK MISC	P	RX/OTC	SAFE-SENSE COVERALL/HOOD/M MISC	P	RX/OTC
RAISED TOILET SEAT MISC	P	RX/OTC	SAFE-SENSE COVERALL/HOOD/S MISC	P	RX/OTC
REALITY SWABS	P	RX/OTC	SAFE-SENSE COVERALL/HOOD/XL MISC	P	RX/OTC
RECONSTITUBE MISC	P	RX/OTC	SAFE-SENSE HEAD COVER 21" MISC	P	RX/OTC
REFLECTIONS AA BREAST PROSTHES MISC	P	RX/OTC	SAFE-SENSE HEAD COVER CIRC 21" MISC	P	RX/OTC
REFLECTIONS C BREAST PROSTHES MISC	P	RX/OTC	SAFE-SENSE LAB COAT-LARGE MISC	P	RX/OTC
RELION ALCOHOL SWABS	P	RX/OTC	SAFE-SENSE LAB COAT-MEDIUM MISC	P	RX/OTC
RELION PULSE OXIMETER MISC	P	RX/OTC	SAFE-SENSE LAB COAT-SMALL MISC	P	RX/OTC
REPLACEMENT NECKBAND STRAPS MISC	P	RX/OTC	SAFE-SENSE LAB COAT-XLARGE MISC	P	RX/OTC
RIDVANTAGE LICE COMB MISC	P	RX/OTC	SAFE-SENSE SHOE COVER NON-SKID MISC	P	RX/OTC
RING CUSHION 14" MISC	P	RX/OTC	SB ALCOHOL PREP	P	RX/OTC
RING CUSHION 16" MISC	P	RX/OTC			
RING CUSHION 18" MISC	P	RX/OTC			
ROLLATOR ULTRA-LIGHT MISC	P	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SEAL-TIGHT CAST/BANDAGE MISC	P	RX/OTC	SLEEPRIGHT DENTAL GUARD MISC	P	RX/OTC
SEAL-TIGHT MID-ARM PROTECTOR MISC	P	RX/OTC	SLEEPRIGHT SPORT BREATHE AID MISC	P	RX/OTC
SERUM BOTTLE STOPPER 20MM MISC	P	RX/OTC	SLEEPRIGHT VAPOR INHALER MISC	P	RX/OTC
SERUM BOTTLE MISC	P	RX/OTC	SM ALCOHOL PREP	P	RX/OTC
SERUM BOTTLES 30ML/AMBER GLASS MISC	P	RX/OTC	SM COTTON SWABS SWAB	P	
SERUM BOTTLES 50ML/CLEAR GLASS MISC	P	RX/OTC	SM FOAM EAR PLUGS MISC	P	RX/OTC
SERUM BOTTLES/AMBER GLASS 20ML MISC	P	RX/OTC	SM WALKER/YOUTH MISC	P	RX/OTC
SETTLING PLATE SDA/29ML/100X15 MISC	P	RX/OTC	SNAP-ON CHLOROBUTYL STOPPER MISC	P	RX/OTC
SETTLING PLATE TSA/25ML/100X15 MISC	P	RX/OTC	SOFT HANDS COTTON GLOVE MISC	P	RX/OTC
SHAPERS LAYERED BREAST SHAPER MISC	P	RX/OTC	SOOTHIES COOLING GEL PADS MISC	P	RX/OTC
SHOWER-PAK MISC	P	RX/OTC	SOOTHIES GEL PADS MISC	P	RX/OTC
SIGNATURE PRO ELEC BREAST PUMP MISC	P	RX/OTC	SPLASH SHIELD FULL FACE MISC	P	RX/OTC
SILICONE EAR PLUGS FOR KIDS MISC	P	RX/OTC	SPLASH SHIELD SHORT FACE MISC	P	RX/OTC
SILICONE EAR PLUGS MISC	P	RX/OTC	SPLIT HANDGRIPS MISC	P	RX/OTC
SILICONE EARPLUGS CHILDRENS MISC	P	RX/OTC	SPRAY APPLICATOR KIT MISC	P	RX/OTC
SIMPLE WISHES PUMPING BRA MISC	P	RX/OTC	SPRAY BOTTLE/PLASTIC 120ML MISC	P	RX/OTC
SIMPLYGO BREAST PUMP MISC	P	RX/OTC	STANDARD CRUTCH TIP MISC	P	RX/OTC
SITZ BATH MISC	P	RX/OTC	STEEL ROLLING WALKER MISC	P	RX/OTC
SLEEPRIGHT BREATHE AID MISC	P	RX/OTC	STEP COUNTER MISC	P	RX/OTC
SLEEPRIGHT DENTAL GUARD DURA MISC	P	RX/OTC	STEP N REST II WALKER MISC	P	RX/OTC
SLEEPRIGHT DENTAL GUARD SLIM MISC	P	RX/OTC	STEP N REST WALKER MISC	P	RX/OTC

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
STETHOSCOPE DUAL HEAD MISC	P	RX/OTC	SURE COMFORT ALCOHOL PREP	P	RX/OTC
STETHOSCOPE SINGLE HEAD MISC	P	RX/OTC	SURELIFE CLEARWAVE II OXIMETER MISC	P	RX/OTC
STETHOSCOPE MISC	P	RX/OTC	SURELIFE CLEARWAVE OXIMETER MISC	P	RX/OTC
STIRRING ROD/GLASS 12X1/4" MISC	P	RX/OTC	SWIM EARPLUGS MISC	P	RX/OTC
STOCKING APPLICATOR PETITE MISC	P	RX/OTC	SWING MAXI HANDS-FREE PUMP MISC	P	RX/OTC
STOCKING APPLICATOR REGULAR MISC	P	RX/OTC	SYMPHONY DOUBLE PUMPING SYSTEM MISC	P	RX/OTC
STOP LICE EGG & NIT REMOVAL MISC	P	RX/OTC	SYRINGE DIAL-A-DOSE MISC	P	RX/OTC
STRAINER/STAINLESS STEEL/2.5" MISC	P	RX/OTC	TABLET CUTTER/CRUSHER MISC	P	RX/OTC
SUCTION GRAB BAR MISC	P	RX/OTC	TABLET CUTTER/DELUXE SAFETY MISC	P	RX/OTC
SUCTION TIPS MISC	P	RX/OTC	TABLET CUTTER/SAFETY SHIELD MISC	P	RX/OTC
SUPPOSITORY MOLD 2GM MISC	P	RX/OTC	TABLET CUTTER-CRUSHER MISC	P	RX/OTC
SUPPOSITORY MOLD/ALUMINUM 2 GM MISC	P	RX/OTC	TAKEAWAY ENVIRONMENTAL RETURN MISC	P	RX/OTC
SUPPOSITORY MOLDS 1.3 ML MISC	P	RX/OTC	TAP-N-CLICK SILICONE PAD MISC	P	RX/OTC
SUPPOSITORY MOLDS 2 CC/V-NOTCH MISC	P	RX/OTC	THE DOCTORS NIGHTGUARD MISC	P	RX/OTC
SUPPOSITORY MOLDS 2 ML MISC	P	RX/OTC	THE SIDE RESTER CUSHION MISC	P	RX/OTC
SUPPOSITORY MOLDS 2.25 ML MISC	P	RX/OTC	TIP RECTAL/VAG W/PERFORATIONS MISC	P	RX/OTC
SUPPOSITORY MOLDS 3 ML MISC	P	RX/OTC	TOILET SAFETY FRAME MISC	P	RX/OTC
SUPPOSITORY SHELL RACK MISC	P	RX/OTC	TOILET SEAT ELEVATOR MISC	P	RX/OTC
SUPPOSITORY SHELLS 2.0 ML MISC	P	RX/OTC	TOMMEE TIPPEE BREAST PUMP ADTP MISC	P	RX/OTC
SUPPOSITORY SHELLS 2.4ML MISC	P	RX/OTC			
SUPPOSITORY SHELLS SMALL 1.3ML MISC	P	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
TOMMEE TIPPEE BREAST PUMP MISC	P	RX/OTC	TOTAL COMFORT CHAIR CUSHION MISC	P	RX/OTC
TONGUE CLEANER/COMFORT CURVE MISC	P	RX/OTC	TOTAL COMFORT SEAT CUSHION MISC	P	RX/OTC
TONGUE DEPRESSORS MISC	P	RX/OTC	TRACTION FLOOR STAND MISC	P	RX/OTC
TOOTHETTE BITE BLOCK MISC	P	RX/OTC	TRACTION HEAD HALTER ROPE MISC	P	RX/OTC
TOPI-CLICK 1 PORT MISC	P	RX/OTC	TRACTION PELVIC BELT MISC	P	RX/OTC
TOPI-CLICK 140 MISC	P	RX/OTC	TRACTION WEIGHT BAG MISC	P	RX/OTC
TOPI-CLICK 3 PORT MISC	P	RX/OTC	TRANSFER BENCH MISC	P	RX/OTC
TOPI-CLICK APPLICATOR MICRO MISC	P	RX/OTC	TRANSFER BOARD MISC	P	RX/OTC
TOPI-CLICK APPLICATOR MISC	P	RX/OTC	TRANSFER PIN MISC	P	RX/OTC
TOPI-CLICK DOSE CHECK MISC	P	RX/OTC	TRANSPORT CHAIR MISC	P	RX/OTC
TOPI-CLICK MICRO ANGLED AA MISC	P	RX/OTC	TRAVEL POUCH MISC	P	RX/OTC
TOPI-CLICK MICRO PIN POINT AA MISC	P	RX/OTC	TRAVELER 3 WHEEL ROLL WALKER MISC	P	RX/OTC
TOPI-CLICK MICRO ROUNDED AA MISC	P	RX/OTC	TRIGGER RELEASE JUNIOR WALKER MISC	P	RX/OTC
TOPI-CLICK NOZZLE MISC	P	RX/OTC	TRI-GRIP BATHTUB RAIL MISC	P	RX/OTC
TOPI-CLICK PERL APPLICATOR 4ML MISC	P	RX/OTC	TRIO ROLLING WALKER MISC	P	RX/OTC
TOPI-CLICK PERL DOSE LOAD 35ML MISC	P	RX/OTC	TROCHE MOLD 30 CAVITY MISC	P	RX/OTC
TOPI-CLICK PERL VAGINAL DOSING MISC	P	RX/OTC	TRUE COMFORT FOLDING 2 WHEEL MISC	P	RX/OTC
TOPI-CLICK UV BLOCKING MISC	P	RX/OTC	TRUE COMFORT FOLDING WALKER MISC	P	RX/OTC
TOPI-CLICK VAGINAL APPLICATOR MISC	P	RX/OTC	TRUE COMFORT HEIGHT ADJ CANE MISC	P	RX/OTC
TOPI-CLICK VAGINAL DOSE LOADER MISC	P	RX/OTC	TRUE COMFORT PRO ALCOHOL PREP	P	RX/OTC
TOPI-CLICK VAGINAL DOSING MISC	P	RX/OTC	TRUE COMFORT QUAD ADJ CANE MISC	P	RX/OTC
			TUB TRANSFER BOARD MISC	P	RX/OTC

IL MHP Medicaid

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TWIN MEDICINE SPOON MISC	P	RX/OTC	UNGUATOR JAR 15/28 BLUE LID MISC	P	RX/OTC
TYVEK PROTECTIVE SLEEVES MISC	P	RX/OTC	UNGUATOR JAR 20/33 BLUE MISC	P	RX/OTC
ULTICARE ALCOHOL SWABS	P	RX/OTC	UNGUATOR JAR 20/33 RED LID MISC	P	RX/OTC
ULTILET ALCOHOL SWABS	P	RX/OTC	UNGUATOR JAR 20/33 WHITE MISC	P	RX/OTC
ULTRA CARE EAR WAX REMOVER MISC	P	RX/OTC	UNGUATOR JAR 200/280 BLUE LID MISC	P	RX/OTC
ULTRA COMFORT BODY MASSAGER MISC	P	RX/OTC	UNGUATOR JAR 200/280 GREEN LID MISC	P	RX/OTC
ULTRA FIT SMART BODY SCALE MISC	P	RX/OTC	UNGUATOR JAR 200/280 RED LID MISC	P	RX/OTC
ULTRA-CARE ALCOHOL PREP PADS	P	RX/OTC	UNGUATOR JAR 200/280 WHITE MISC	P	RX/OTC
UNGUATOR 100/200/57MM MISC	P	RX/OTC	UNGUATOR JAR 30/42 BLUE LID MISC	P	RX/OTC
UNGUATOR 15/20/30/36MM MISC	P	RX/OTC	UNGUATOR JAR 30/42 BLUE MISC	P	RX/OTC
UNGUATOR 50/43MM/DISP BLADES MISC	P	RX/OTC	UNGUATOR JAR 30/42 GREEN LID MISC	P	RX/OTC
UNGUATOR APPLICATOR 1"-SHORT MISC	P	RX/OTC	UNGUATOR JAR 30/42 RED LID MISC	P	RX/OTC
UNGUATOR APPLICATOR 2.5"-LONG MISC	P	RX/OTC	UNGUATOR JAR 30/42 TURQUOISE MISC	P	RX/OTC
UNGUATOR EXACTDOSE 0.5ML MISC	P	RX/OTC	UNGUATOR JAR 30/42 WHITE LID MISC	P	RX/OTC
UNGUATOR JAR 100/140 BLUE LID MISC	P	RX/OTC	UNGUATOR JAR 30/42 YELLOW MISC	P	RX/OTC
UNGUATOR JAR 100/140 RED LID MISC	P	RX/OTC	UNGUATOR JAR 50/70 BLUE LID MISC	P	RX/OTC
UNGUATOR JAR 15/20 BLUE LID MISC	P	RX/OTC	UNGUATOR JAR 50/70 BLUE MISC	P	RX/OTC
UNGUATOR JAR 15/20 GREEN LID MISC	P	RX/OTC	UNGUATOR JAR 50/70 GREEN LID MISC	P	RX/OTC
UNGUATOR JAR 15/20 RED LID MISC	P	RX/OTC	UNGUATOR JAR 50/70 PINK MISC	P	RX/OTC
			UNGUATOR JAR 50/70 RED LID MISC	P	RX/OTC
			UNGUATOR JAR 50/70 TURQUOISE MISC	P	RX/OTC

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
UNGUATOR JAR 50/70 WHITE LID MISC	P	RX/OTC	VERSAJET II PLUS 14MM MISC	P	RX/OTC
UNGUATOR JAR 50/70 YELLOW MISC	P	RX/OTC	VERSAJET II PLUS 8MM MISC	P	RX/OTC
UNGUATOR JAR AIRDYNAMIK MISC	P	RX/OTC	VIBE 6 MISC	P	RX/OTC
UNGUATOR JAR W/SPINDLE 300/390 MISC	P	RX/OTC	VIBRATING FOOT BATH MISC	P	RX/OTC
UNGUATOR JAR W/SPINDLE 500/600 MISC	P	RX/OTC	VIDA CELLULAR SCALE MISC	P	RX/OTC
UNGUATOR LID 1000ML MISC	P	RX/OTC	VINYL INFLATABLE CUSHION MISC	P	RX/OTC
UNGUATOR LID 500ML MISC	P	RX/OTC	VIRAGE CUSTOM BREAST PROSTHES MISC	P	RX/OTC
UNGUATOR VARIONOZZLE 1MM MISC	P	RX/OTC	VIVI EPI MISC	P	RX/OTC
UNGUATOR VARIONOZZLE 4MM MISC	P	RX/OTC	WALKER AUTO GLIDES MISC	P	RX/OTC
UNIVERSAL QUICK ADJUST CRUTCH MISC	P	RX/OTC	WALKER BASKET MISC	P	RX/OTC
UNIVERSAL TIPS MISC	P	RX/OTC	WALKER GLIDE WHEELS MISC	P	RX/OTC
UNIVERSAL WALKER ORGANIZER MISC	P	RX/OTC	WALKER SKI GLIDES MISC	P	RX/OTC
UNODOSE APPLICATOR MISC	P	RX/OTC	WALKER SWIVEL WHEELS MISC	P	RX/OTC
VAGINAL SUPPOSITORY APPLICATOR MISC	P	RX/OTC	WALKER TALL EXTENSION LEGS MISC	P	RX/OTC
VANISHPOINT BLOOD COLLECT SET MISC	P	RX/OTC	WALKER TIPS 1-1/8" MISC	P	RX/OTC
VANISHPOINT TUBE HOLDER MISC	P	RX/OTC	WALKER TIPS MISC	P	RX/OTC
VARITHENA ADMINISTRATION PACK MISC	P	RX/OTC	WALKER WHEELS MISC	P	RX/OTC
VERSAJET II EXACT 14MM MISC	P	RX/OTC	WALKER MISC	P	RX/OTC
VERSAJET II EXACT 8MM MISC	P	RX/OTC	WALL GRAB BAR MISC	P	RX/OTC
			WASH GLOVES PRE-MOISTENED MISC	P	RX/OTC
			WATERPROOF SHEETING MISC	P	RX/OTC
			WEBCOL ALCOHOL PREP LARGE	P	RX/OTC
			WEBCOL ALCOHOL PREP MEDIUM	P	RX/OTC
			WEIGH BOAT MISC	P	RX/OTC

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
WET-STOP 3 MISC	P	RX/OTC	ADVOCATE INSULIN SYRINGE	NP	MP; RX/OTC
WHEELCHAIR CUSHION MISC	P	RX/OTC	AQ INSULIN SYRINGE	NP	MP; RX/OTC
WHEELCHAIR INVALID RING MISC	P	RX/OTC	AQINJECT PEN NEEDLE	NP	MP; RX/OTC
WHEELCHAIR MISC	P	RX/OTC	ASSURE ID DUO PRO PEN NEEDLES	NP	MP; RX/OTC
WOODEN CANE 7/8" MISC	P	RX/OTC	ASSURE ID INSULIN SAFETY SYR	NP	MP; RX/OTC
WORK BELT MISC	P	RX/OTC	ASSURE ID PRO PEN NEEDLES	NP	MP; RX/OTC
WRIST BRACE MISC	P	RX/OTC	ASSURE ID SAFETY PEN NEEDLES	NP	MP
WRIST SLEEP SUPPORT MISC	P	RX/OTC	AUM INSULIN SAFETY PEN NEEDLE	NP	MP
YOUTH PUSH BUTTON ALUM CRUTCH MISC	P	RX/OTC	AUM MINI INSULIN PEN NEEDLE	NP	MP; RX/OTC
ZEVRX STERILE ALCOHOL PREP PAD	P	RX/OTC	AUM PEN NEEDLE	NP	MP; RX/OTC
ZEWA ELECTRODES MISC	P	RX/OTC	AUM READYGARD DUO PEN NEEDLE	NP	MP; RX/OTC
ZIPPERED MATTRESS COVER MISC	P	RX/OTC	AUM SAFETY PEN NEEDLE	NP	MP
ZOOM 20 ROLLING WALKER MISC	P	RX/OTC	AURORA PEN NEEDLES	NP	MP; RX/OTC
Oral Hygiene Products			AURORA UNIFINE PENTIPS	NP	MP; RX/OTC
ORAL SWAB PETITE SWAB	P		AUTOPEN DEVI	P	QL(0.34 EA daily; 1 EA per 365 day(s) retail); MP; RX/OTC
TOOTHETTE PLUS UNTREATED SWAB	P		BD AUTOSHIELD	NP	MP
TOOTHETTE SWABS UNTREATED SWAB	P		BD AUTOSHIELD DUO	NP	MP; RX/OTC
TOOTHETTE SWABS/DENTIFRICE SWAB	P		BD DISP NEEDLE	P	QL(3.34 EA daily); RX/OTC
Parenteral Therapy Supplies			BD DISP NEEDLES	P	QL(3.34 EA daily); RX/OTC
1ST TIER UNIFINE PENTIPS	NP	MP	BD ECLIPSE NEEDLE	P	QL(3.34 EA daily); RX/OTC
1ST TIER UNIFINE PENTIPS PLUS	NP	MP	BD HYPODERMIC NEEDLE	P	QL(3.34 EA daily); RX/OTC
ABOUTTIME PEN NEEDLE	NP	MP	BD INSULIN SYR ULTRAFINE II	NP	MP; RX/OTC
ADVOCATE INSULIN PEN NEEDLES	NP	MP	BD INSULIN SYRINGE	NP	MP; RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
BD INSULIN SYRINGE HALF-UNIT	NP	MP; RX/OTC	BD VEO INSULIN SYR U/F 1/2UNIT	NP	MP; RX/OTC
BD INSULIN SYRINGE MICROFINE	NP	MP; RX/OTC	BD VEO INSULIN SYRINGE U/F	NP	MP; RX/OTC
BD INSULIN SYRINGE U/F	NP	MP; RX/OTC	CAREFINE PEN NEEDLES	NP	MP; RX/OTC
BD INSULIN SYRINGE U/F 1/2UNIT	NP	MP; RX/OTC	CAREONE INSULIN SYRINGE	NP	MP
BD INSULIN SYRINGE ULTRAFINE	NP	MP	CAREONE UNIFINE PENTIPS	NP	MP; RX/OTC
BD INTEGRA NEEDLE	P	QL(3.34 EA daily); RX/OTC	CAREONE UNIFINE PENTIPS PLUS	NP	MP
BD LUER-LOK SYRINGE	P	QL(3.34 EA daily)	CAREPOINT POLY HUB NEEDLE	P	QL(3.34 EA daily); RX/OTC
BD PEN MINI MISC	P	QL(0.34 EA daily; 1 EA per 365 day(s) retail); MP; RX/OTC	CAREPOINT SAFETY 1ST NEEDLE	P	QL(3.34 EA daily); RX/OTC
BD PEN NEEDLE MICRO U/F	NP	MP	CAREPOINT SYRINGE LUER LOCK	P	QL(3.34 EA daily); RX/OTC
BD PEN NEEDLE MINI U/F	NP	MP; RX/OTC	CARETOUCH HYPODERMIC NEEDLE	P	QL(3.34 EA daily); RX/OTC
BD PEN NEEDLE NANO 2ND GEN	NP	MP; RX/OTC	CARETOUCH INSULIN SYRINGE	NP	MP; RX/OTC
BD PEN NEEDLE NANO U/F	NP	MP; RX/OTC	CARETOUCH PEN NEEDLES	NP	MP
BD PEN NEEDLE ORIGINAL U/F	NP	MP	CEQR SIMPLICITY 2U DEVI	P	QL(0.34 EA daily); RX/OTC
BD PEN NEEDLE SHORT U/F	NP	MP; RX/OTC	CLEVER CHOICE COMFORT EZ	NP	MP
BD PEN MISC	P	QL(0.34 EA daily; 1 EA per 365 day(s) retail); MP; RX/OTC	CLICKFINE PEN NEEDLES	NP	MP; RX/OTC
BD SAFETYGLIDE INSULIN SYRINGE	NP	MP; RX/OTC	COMFORT ASSIST INSULIN SYRINGE	NP	MP; RX/OTC
BD SAFETYGLIDE NEEDLE	P	QL(3.34 EA daily); RX/OTC	COMFORT EZ INSULIN SYRINGE	NP	MP; RX/OTC
BD SAFETYGLIDE SHIELDED NEEDLE	P	QL(3.34 EA daily); RX/OTC	COMFORT EZ MICRO PEN NEEDLES	NP	MP; RX/OTC
BD SAFETY-LOK INSULIN SYRINGE	NP	MP; RX/OTC	COMFORT EZ PEN NEEDLES	NP	MP; RX/OTC
			COMFORT EZ PRO PEN NEEDLES	NP	MP
			COMFORT EZ SHORT PEN NEEDLES	NP	MP; RX/OTC

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Updated December 1, 2024

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
COMFORT TOUCH INSULIN PEN NEED	NP	MP	EASY TOUCH SHEATHLOCK SYRINGE	NP	MP; RX/OTC
DIATHRIVE PEN NEEDLE	NP	MP; RX/OTC	EASYPOINT NEEDLE	P	QL(3.34 EA daily); RX/OTC
DROPLET INSULIN SYRINGE	NP	MP; RX/OTC	EMBRACE PEN NEEDLES	NP	MP; RX/OTC
DROPLET MICRON	NP	MP	EQL INSULIN SYRINGE	NP	MP; RX/OTC
DROPLET PEN NEEDLES	NP	MP; RX/OTC	EXEL COMFORT POINT INSULIN SYR	NP	MP; RX/OTC
DROPSAFE SAFETY PEN NEEDLES	NP	MP; RX/OTC	EXEL COMFORT POINT PEN NEEDLE	NP	MP
DROPSAFE SAFETY SYRINGE/NEEDLE	NP	MP; RX/OTC	FIFTY50 PEN NEEDLES	NP	MP; RX/OTC
DRUG MART UNIFINE PENTIPS	NP	MP; RX/OTC	FIFTY50 SUPERIOR COMFORT SYR	NP	MP; RX/OTC
DRUG MART UNIFINE PENTIPS PLUS	NP	MP; RX/OTC	FREDS PHARMACY UNIFINE PENTIP+	NP	MP; RX/OTC
EASY COMFORT INSULIN SYRINGE	NP		FREDS PHARMACY UNIFINE PENTIPS	NP	MP; RX/OTC
EASY COMFORT INSULIN SYRINGE	NP	MP; RX/OTC	GLOBAL EASE INJECT PEN NEEDLES	NP	MP; RX/OTC
EASY COMFORT PEN NEEDLES	NP	MP; RX/OTC	GLOBAL EASY GLIDE INSULIN SYR	NP	MP; RX/OTC
EASY GLIDE PEN NEEDLES	NP	MP	GLOBAL EASY GLIDE PEN NEEDLES	NP	MP; RX/OTC
EASY TOUCH FLIPLOCK INSULIN SY	NP	MP; RX/OTC	GLOBAL INJECT EASE INSULIN SYR	NP	MP; RX/OTC
EASY TOUCH FLIPLOCK NEEDLES	P	QL(3.34 EA daily); RX/OTC	GLOBAL INSULIN SYRINGES	NP	MP; RX/OTC
EASY TOUCH FLIPLOCK SAFETY SYR	P	QL(3.34 EA daily); RX/OTC	GLUCOPRO INSULIN SYRINGE	NP	MP; RX/OTC
EASY TOUCH HYPODERMIC NEEDLE	P	QL(3.34 EA daily); RX/OTC	GNP CLICKFINE PEN NEEDLES	NP	MP; RX/OTC
EASY TOUCH INSULIN SAFETY SYR	NP	MP; RX/OTC	GNP INSULIN SYRINGE	NP	MP; RX/OTC
EASY TOUCH INSULIN SYRINGE	NP	MP	GNP INSULIN SYRINGES	NP	MP; RX/OTC
EASY TOUCH PEN NEEDLES	NP	MP	GNP INSULIN SYRINGES 28GX1/2"	NP	MP; RX/OTC
EASY TOUCH SAFETY PEN NEEDLES	NP	MP	GNP INSULIN SYRINGES 29GX1/2"	NP	MP; RX/OTC
EASY TOUCH SAFETY SYRINGE	P	QL(3.34 EA daily); RX/OTC	GNP INSULIN SYRINGES 30GX5/16"	NP	MP; RX/OTC
			GNP INSULIN SYRINGES 31GX5/16"	NP	MP; RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
GNP ULTICARE PEN NEEDLES	NP	MP; RX/OTC	INPEN 100-BLUE-NOVOLOG-FIASP DEVI	P	QL(0.34 EA daily; 1 EA per 365 day(s) retail); MP; RX/OTC
GNP ULTIGUARD SAFEPACK NEEDLE	NP	MP; RX/OTC	INPEN 100-GREY-LILLY-HUMALOG DEVI	P	QL(0.34 EA daily; 1 EA per 365 day(s) retail); MP; RX/OTC
GNP ULTRA COM INSULIN SYRINGE	NP	MP; RX/OTC	INPEN 100-GREY-NOVOLOG-FIASP DEVI	P	QL(0.34 EA daily; 1 EA per 365 day(s) retail); MP; RX/OTC
GOODSENSE CLICKFINE PEN NEEDLE	NP	MP; RX/OTC	INPEN 100-PINK-LILLY-HUMALOG DEVI	P	QL(0.34 EA daily; 1 EA per 365 day(s) retail); MP; RX/OTC
GOODSENSE PEN NEEDLE PENFINE	NP	MP; RX/OTC	INPEN 100-PINK-NOVOLOG-FIASP DEVI	P	QL(0.34 EA daily; 1 EA per 365 day(s) retail); MP; RX/OTC
HEALTHWISE INSULIN SYR/NEEDLE	NP	MP; RX/OTC	INSULIN SYRINGE	NP	MP; RX/OTC
HEALTHWISE MICRON PEN NEEDLES	NP	MP; RX/OTC	INSULIN SYRINGE/NEEDLE	NP	MP; RX/OTC
HEALTHWISE MINI PEN NEEDLES	NP	MP; RX/OTC	INSULIN SYRINGE-NEEDLE U-100	NP	MP; RX/OTC
HEALTHWISE PEN NEEDLES	NP	MP; RX/OTC	INSUPEN PEN NEEDLES	NP	MP; RX/OTC
HEALTHWISE SHORT PEN NEEDLES	NP	MP; RX/OTC	INSUPEN SENSITIVE	NP	MP
HEALTHWISE UNIFINE PENTIPS	NP	MP; RX/OTC	INSUPEN ULTRAFIN	NP	MP
HEALTHY ACCENTS UNIFINE PENTIP	NP	MP; RX/OTC	KINRAY INSULIN SYRINGE	NP	MP; RX/OTC
H-E-B INCONTROL PEN NEEDLES	NP	MP; RX/OTC	KMART VALU INSULIN SYRINGE 29G	NP	MP
H-E-B INCONTROL UNIFINE PENTIP	NP	MP; RX/OTC	KMART VALU INSULIN SYRINGE 30G	NP	MP
HM ULTICARE INSULIN SYRINGE	NP	MP; RX/OTC	KROGER INSULIN SYRINGE	NP	MP; RX/OTC
HM ULTICARE MINI PEN NEEDLES	NP	MP; RX/OTC	KROGER PEN NEEDLES	NP	MP; RX/OTC
HM ULTICARE SHORT PEN NEEDLES	NP	MP; RX/OTC	LEADER INSULIN SYRINGE	NP	MP; RX/OTC
HYPODERMIC NEEDLE	P	QL(3.34 EA daily); RX/OTC			
INCONTROL ULTICARE PEN NEEDLES	NP	MP; RX/OTC			
INPEN 100-BLUE-LILLY-HUMALOG DEVI	P	QL(0.34 EA daily; 1 EA per 365 day(s) retail); MP; RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
LEADER UNIFINE PENTIPS	NP	MP; RX/OTC	MONOJECT ULTRA COMFORT SYRINGE	NP	MP; RX/OTC
LEADER UNIFINE PENTIPS PLUS	NP	MP; RX/OTC	MS INSULIN SYRINGE	NP	MP; RX/OTC
LITETOUCH INSULIN SYRINGE	NP	MP; RX/OTC	NOVOFINE AUTOCOVER PEN NEEDLE	NP	MP
LITETOUCH PEN NEEDLES	NP	MP; RX/OTC	NOVOFINE PEN NEEDLE	NP	MP
LONGS INSULIN SYRINGE	NP	MP; RX/OTC	NOVOFINE PLUS PEN NEEDLE	NP	MP; RX/OTC
MAGELLAN INSULIN SAFETY SYR	NP	MP; RX/OTC	NOVOPEN ECHO DEVI	P	QL(0.34 EA daily; 1 EA per 365 day(s) retail); MP; RX/OTC
MARATHON MEDICAL PENTIPS	NP	MP; RX/OTC	PC UNIFINE PENTIPS	NP	MP; RX/OTC
MAXICOMFORT II PEN NEEDLE	NP	MP; RX/OTC	PEN NEEDLES	NP	MP
MAXI-COMFORT INSULIN SYRINGE	NP	MP; RX/OTC	PEN NEEDLES 5/16"	NP	MP; RX/OTC
MAXI-COMFORT SAFETY PEN NEEDLE	NP	MP	PENTIPS	NP	MP; RX/OTC
MAXICOMFORT SYR 27G X 1/2"	NP	MP; RX/OTC	PENTIPS GENERIC PEN NEEDLES	NP	MP
MEDIC INSULIN SYRINGE	NP	MP; RX/OTC	PIP PEN NEEDLES 31G X 5MM	NP	MP; RX/OTC
MEDICINE SHOPPE PEN NEEDLES	NP	MP; RX/OTC	PIP PEN NEEDLES 32G X 4MM	NP	MP; RX/OTC
MEIJER PEN NEEDLES	NP	MP; RX/OTC	POLY HUB NEEDLE	P	QL(3.34 EA daily); RX/OTC
MICRODOT PEN NEEDLE	NP	MP; RX/OTC	PRECISION SURE-DOSE SYRINGE	NP	MP; RX/OTC
MM INSULIN SYRINGE/NEEDLE	NP	MP; RX/OTC	PREFERRED PLUS INSULIN SYRINGE	NP	MP; RX/OTC
MM PEN NEEDLES	NP	MP; RX/OTC	PREFERRED PLUS UNIFINE PENTIPS	NP	MP; RX/OTC
MONOJECT HYPODERMIC NEEDLE	P	QL(3.34 EA daily); RX/OTC	PREVENT DROPSAFE PEN NEEDLES	NP	MP; RX/OTC
MONOJECT INSULIN SYRINGE	NP	MP; RX/OTC	PREVENT SAFETY PEN NEEDLES	NP	MP; RX/OTC
MONOJECT MAGELLAN SAFETY NDL	P	QL(3.34 EA daily); RX/OTC	PRO COMFORT INSULIN SYRINGE	NP	MP; RX/OTC
MONOJECT MAGELLAN SYRINGE	P	QL(3.34 EA daily); RX/OTC	PRO COMFORT PEN NEEDLES	NP	MP; RX/OTC
MONOJECT SYRINGE	P	QL(3.34 EA daily); RX/OTC	PRODIGY INSULIN SYRINGE	NP	MP; RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PURE COMFORT PEN NEEDLE	NP	MP; RX/OTC	SURE COMFORT PEN NEEDLES	NP	MP; RX/OTC
PURE COMFORT SAFETY PEN NEEDLE	NP	MP; RX/OTC	SYRINGE	P	QL(3.34 EA daily); RX/OTC
PX EXTRA SHORT PEN NEEDLES	NP	MP; RX/OTC	SYRINGE LUER LOCK	P	QL(3.34 EA daily); RX/OTC
PX INSULIN SYRINGE	NP	MP	TECHLITE INSULIN SYRINGE	NP	MP; RX/OTC
PX MINI PEN NEEDLES	NP	MP; RX/OTC	TECHLITE PEN NEEDLES	NP	MP
PX PEN NEEDLE	NP	MP; RX/OTC	TECHLITE PLUS PEN NEEDLES	NP	MP; RX/OTC
PX SHORTLENGTH PEN NEEDLES	NP	MP; RX/OTC	TODAYS HEALTH MINI PEN NEEDLES	NP	MP; RX/OTC
QC PEN NEEDLES	NP	MP; RX/OTC	TODAYS HEALTH PEN NEEDLES	NP	MP; RX/OTC
QC UNIFINE PENTIPS	NP	MP; RX/OTC	TODAYS HEALTH SHORT PEN NEEDLE	NP	MP; RX/OTC
RA INSULIN SYRINGE	NP	MP; RX/OTC	TOPCARE CLICKFINE PEN NEEDLES	NP	MP; RX/OTC
RA PEN NEEDLES	NP	MP; RX/OTC	TOPCARE ULTRA COMFORT INS SYR	NP	MP; RX/OTC
RAYA SURE PEN NEEDLE	NP	MP; RX/OTC	TRUE COMFORT INSULIN SYRINGE	NP	MP; RX/OTC
REALITY INSULIN SYRINGE	NP	MP; RX/OTC	TRUE COMFORT PEN NEEDLES	NP	MP; RX/OTC
RELION INSULIN SYRINGE	NP	MP; RX/OTC	TRUE COMFORT PRO INSULIN SYR	NP	MP; RX/OTC
RELION MINI PEN NEEDLES	NP	MP; RX/OTC	TRUE COMFORT PRO PEN NEEDLES	NP	MP; RX/OTC
RELION PEN NEEDLES	NP	MP; RX/OTC	TRUEPLUS 5-BEVEL PEN NEEDLES	P	MP
RELION SHORT PEN NEEDLES	NP	MP; RX/OTC	TRUEPLUS INSULIN SYRINGE	P	MP; RX/OTC
SAFETY PEN NEEDLES	NP	MP; RX/OTC	TRUEPLUS PEN NEEDLES	P	MP; RX/OTC
SB INSULIN SYRINGE	NP	MP; RX/OTC	ULTICARE INSULIN SAFETY SYR	NP	MP; RX/OTC
SECURESAFE INSULIN SYRINGE	NP	MP; RX/OTC	ULTICARE INSULIN SYR 1/2 UNIT	NP	MP
SECURESAFE SAFETY PEN NEEDLES	NP	MP	ULTICARE INSULIN SYRINGE	NP	MP
SECURESAFE SYRINGE/NEEDLE	P	QL(3.34 EA daily); RX/OTC			
SHOPKO UNIFINE PENTIPS	NP	MP; RX/OTC			
SHOPKO UNIFINE PENTIPS PLUS	NP	MP; RX/OTC			
SURE COMFORT INSULIN SYRINGE	NP	MP			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ULTICARE MICRO PEN NEEDLES	NP	MP; RX/OTC	UNIFINE SAFECONTROL PEN NEEDLE	NP	MP; RX/OTC
ULTICARE MINI PEN NEEDLES	NP	MP; RX/OTC	UNIFINE ULTRA PEN NEEDLE	NP	MP; RX/OTC
ULTICARE PEN NEEDLES	NP	MP; RX/OTC	VALUE HEALTH INSULIN SYRINGE	NP	MP; RX/OTC
ULTICARE SHORT PEN NEEDLES	NP	MP	VALUMARK PEN NEEDLES	NP	MP; RX/OTC
ULTIGUARD SAFEPACK PEN NEEDLE	NP	MP; RX/OTC	VANISHPOINT INSULIN SYRINGE	NP	
ULTIGUARD SAFEPACK SYR/NEEDLE	NP	MP	VANISHPOINT INSULIN SYRINGE	NP	MP; RX/OTC
ULTILET PEN NEEDLE	NP	MP	VANISHPOINT SAFETY SYRINGE	P	QL(3.34 EA daily); RX/OTC
ULTRA COMFORT INSULIN SYRINGE	NP	MP; RX/OTC	VANISHPOINT SYRINGE	P	QL(3.34 EA daily); RX/OTC
ULTRA FLO INSULIN PEN NEEDLES	NP	MP; RX/OTC	VERIFINE INSULIN PEN NEEDLE	NP	MP; RX/OTC
ULTRA FLO INSULIN SYR 1/2 UNIT	NP	MP; RX/OTC	VERIFINE INSULIN SYRINGE	NP	MP; RX/OTC
ULTRA FLO INSULIN SYRINGE	NP	MP; RX/OTC	VERIFINE PLUS PEN NEEDLE	NP	MP; RX/OTC
ULTRA THIN PEN NEEDLES	NP	MP; RX/OTC	VIDA MIA UNIFINE PENTIPS	NP	MP; RX/OTC
ULTRACARE INSULIN SYRINGE	NP	MP; RX/OTC	VP INSULIN SYRINGE	NP	MP; RX/OTC
ULTRACARE PEN NEEDLES	NP	MP; RX/OTC	WEGMANS UNIFINE PENTIPS PLUS	NP	MP; RX/OTC
ULTRA-THIN II INS SYR SHORT	NP	MP; RX/OTC	ZEVRIX INSULIN SYRINGE	NP	MP; RX/OTC
ULTRA-THIN II INSULIN SYRINGE	NP	MP; RX/OTC	ZEVRIX PEN NEEDLES	NP	MP; RX/OTC
ULTRA-THIN II MINI PEN NEEDLE	NP	MP; RX/OTC	Respiratory Therapy Supplies		
ULTRA-THIN II PEN NEEDLE SHORT	NP	MP; RX/OTC	ACE AEROSOL CLOUD ENHANCER MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
ULTRA-THIN II PEN NEEDLES	NP	MP	ACTIVITY POUCH MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
UNIFINE PEN NEEDLES	NP	MP; RX/OTC			
UNIFINE PENTIPS	NP	MP; RX/OTC			
UNIFINE PENTIPS PLUS	NP	MP			
UNIFINE PROTECT PEN NEEDLE	NP	MP; RX/OTC			

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ADULT AEROSOL MASK MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	AEROCHAMBER PLUS FLO-VU LARGE MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
ADULT MASK LARGE MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	AEROCHAMBER PLUS FLO-VU MEDIUM DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
ADULT MASK DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	AEROCHAMBER PLUS FLO-VU MEDIUM MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
AEROBIKA DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	AEROCHAMBER PLUS FLO-VU SMALL DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
AEROCHAMBER HOLDING CHAMBER DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	AEROCHAMBER PLUS FLO-VU SMALL MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
AEROCHAMBER MINI CHAMBER DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	AEROCHAMBER PLUS FLO-VU W/MASK MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
AEROCHAMBER MV MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	AEROCHAMBER PLUS FLO-VU MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
AEROCHAMBER PLS FLOVU MTHPIECE DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	AEROCHAMBER PLUS FLOW VU MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
AEROCHAMBER PLUS FLO-VU INTERM DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	AEROCHAMBER W/FLOWSIGNAL MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
AEROCHAMBER PLUS FLO-VU LARGE DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	AEROCHAMBER Z-STAT PLUS CHAMBR MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC

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AEROCHAMBER Z-STAT PLUS/LARGE MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	AIRS PEDIATRIC AEROSOL MASK MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
AEROCHAMBER Z-STAT PLUS/MEDIUM MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	AIRZONE PEAK FLOW METER	P	QL(1 EA per fill retail); 1 max fill(s) per 365 day(s) retail; RX/OTC
AEROCHAMBER Z-STAT PLUS/SMALL MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	ALL FLOW 1000 PFT FILTER DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
AEROCHAMBER Z-STAT PLUS MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	ALL FLOW 1000 PFT FILTER MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
AEROECLIPSE EZ TWIST TUBING MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	ALL FLOW 2000 PFT FILTER DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
AEROECLIPSE MASK LARGE MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	ALL FLOW 3000 PFT FILTER DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
AEROECLIPSE MASK MEDIUM MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	ALL FLOW 4000 PFT FILTER DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
AEROECLIPSE MASK SMALL MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	ALL FLOW 5000 PFT FILTER DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
AEROTRACH PLUS MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	ALL FLOW 6000 PFT FILTER DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
AEROVENT PLUS DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	ALL FLOW 7000 PFT FILTER DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ASSESS PEAK FLOW METER	P	QL(1 EA per fill retail); 1 max fill(s) per 365 day(s) retail; RX/OTC	BUBBLES THE FISH II PEDI MASK MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
BREATHE COMFORT CHAMBER/ADULT DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	CARETOUCH 2 CPAP HOSE HANGER MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
BREATHE COMFORT CHAMBER/CHILD DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	CARETOUCH CPAP & BIPAP HOSE MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
BREATHE EASE LARGE DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	CARETOUCH CPAP MASK WIPES MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
BREATHE EASE MEDIUM DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	CARETOUCH CPAP PRE-WASH SOLN MISC	P	QL(1 ML per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
BREATHE EASE NEB MASK/CHILD MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	CARETOUCH CPAP TUBE BRUSH MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
BREATHE EASE NEB MASK/INFANT MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	CARETOUCH UNIVERSL CPAP FILTER MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
BREATHE EASE PEAK FLOW METER	P	QL(1 EA per fill retail); 1 max fill(s) per 365 day(s) retail; RX/OTC	CLEVER CHOICE HOLDING CHAMBER DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
BREATHE EASE SMALL DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	CLEVER CHOICE PEAK FLOW METER	P	QL(1 EA per fill retail); 1 max fill(s) per 365 day(s) retail; RX/OTC
BREATHERITE VALVED MDI CHAMBER DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	CO MONITOR REPLACEMENT PIECES MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC

IL MHP Medicaid

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CO MONITOR DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	EASY FLOW 400 MM HOSE MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
COMPACT SPACE CHAMBER/LG MASK DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	EASY FLOW AIR NOZZLE MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
COMPACT SPACE CHAMBER/MED MASK DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	EASY FLOW BLACK/BLUE DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
COMPACT SPACE CHAMBER/SM MASK DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	EASY FLOW BLACK/ORANGE DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
COMPACT SPACE CHAMBER DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	EASY FLOW BLACK/RED DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
EASIVENT MASK LARGE MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	EASY FLOW BLACK/WHITE DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
EASIVENT MASK MEDIUM MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	EASY FLOW BLACK/YELLOW DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
EASIVENT MASK SMALL MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	EASY FLOW HEPA FILTER MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
EASIVENT MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	EASY FLOW WHITE/BLUE DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
EASY FLOW 300 MM HOSE MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	EASY FLOW WHITE/GREEN DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC

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EASY FLOW WHITE/PINK DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	FLEXICHAMBER CHILD MASK/LARGE	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
EASY FLOW WHITE/WHITE DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	FLEXICHAMBER CHILD MASK/SMALL	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
EASY FLOW WHITE/YELLOW DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	FLEXICHAMBER DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
EBASE CONTROLLER KIT MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	FLYP HYPERSONIQ CARTRIDGE MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
EQ SPACE CHAMBER ANTI-STATIC L DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	FULL KIT NEBULIZER SET MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
EQ SPACE CHAMBER ANTI-STATIC M DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	HUDSON RCI AEROSOL MASK ADULT MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
EQ SPACE CHAMBER ANTI-STATIC S DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	IN-CHECK DIAL FLOW TRAINER DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
EQ SPACE CHAMBER ANTI-STATIC DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	IN-CHECK INSPIRATORY FLOW MTR DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
FILTER AIR PP MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	INNOSPIRE REPLACEMENT FILTER MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
FLEXICHAMBER ADULT MASK/SMALL	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	INSPIRACHAMBER/LARGE DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC

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INSPIRACHAMBER/MEDIUM DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	MICROCHAMBER DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
INSPIRACHAMBER/MOUTHPIECE DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	MICROCHAMBER MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
INSPIRACHAMBER/SMALL DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	MICROLIFE DIGITAL PEAK FLOW	P	QL(1 EA per fill retail); 1 max fill(s) per 365 day(s) retail; RX/OTC
INSPIREASE MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	MICROSPACER MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
LITETOUCH MASK LARGE MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	MINI WRIGHT PEAK FLOW METER	P	QL(1 EA per fill retail); 1 max fill(s) per 365 day(s) retail; RX/OTC
LITETOUCH MASK MEDIUM MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	MINIELITE FILTER REPLACEMENTS MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
LITETOUCH MASK SMALL MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	NEBULIZER AIR TUBE/PLUGS MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
LUNG PERFORM PEAK FLOW METER	P	QL(1 EA per fill retail); 1 max fill(s) per 365 day(s) retail; RX/OTC	NEBULIZER CUP/TUBING DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
MASK VORTEX/CHILD/FROG	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	NEBULIZER MASK ADULT/TUBING MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
MASK VORTEX/TODDLER/LADYBUG	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	NEBULIZER MASK ADULT MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC

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NEBULIZER MASK CHILD MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	PANDA MASK LARGE	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
NOSE CLIP MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	PANDA MASK MEDIUM	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
OMBRA COMPRESSOR AIR FILTERS MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	PANDA MASK SMALL	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
OMBRA TABLE TOP COMPRESSOR DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	PARI ALTERA NEBULIZER HANDSET MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
ONE FLOW SPIROMETER DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	PARI BABY CONVERSION KIT MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
OPTICHAMBER DIAMOND DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	PARI BUBBLES PEDIATRIC MASK MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
OPTICHAMBER DIAMOND-LG MASK DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	PARI ERAPID NEBULIZER HANDSET MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
OPTICHAMBER DIAMOND-MD MASK MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	PARI EXPIRATORY FILTER SET DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
OPTICHAMBER DIAMOND MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	PARI MANUAL INTERRUPTER DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
OPTICHAMBER DIAMOND-SM MASK MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	PARI MASK SET MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC

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PARI SMARTMASK BABY/ELBOW MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	PERSONAL BEST FULL RANGE	P	QL(1 EA per fill retail); 1 max fill(s) per 365 day(s) retail; RX/OTC
PARI SOFT PLASTIC ADULT MASK MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	PFLEX MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
PARI SOFT PLASTIC PED MASK MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	PHARMACIST CHOICE MASK WIPES MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
PARI TREK S COMBO PACK DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	PIKO 1	P	QL(1 EA per fill retail); 1 max fill(s) per 365 day(s) retail; RX/OTC
PARI VORTEX ADULT MASK	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	PILLOW MASK/ADULT MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
PEAK A-I-R FLOW METER	P	QL(1 EA per fill retail); 1 max fill(s) per 365 day(s) retail; RX/OTC	PILLOW MASK/CHILD MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
PEAK AIR PEAK FLOW METER	P	QL(1 EA per fill retail); 1 max fill(s) per 365 day(s) retail; RX/OTC	PILLOW MASK/PEDIATRIC MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
PEAK FLOW METER UNIVERSAL RANG	P	QL(1 EA per fill retail); 1 max fill(s) per 365 day(s) retail; RX/OTC	POCKET CHAMBER DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
PEDIATRIC MOUTHPIECE MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	POCKET PEAK FLOW METER	P	QL(1 EA per fill retail); 1 max fill(s) per 365 day(s) retail; RX/OTC
PEDIATRIC PANDA MASK	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	POCKET SPACER DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC

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POCKETPEAK PEAK FLOW METER	P	QL(1 EA per fill retail); 1 max fill(s) per 365 day(s) retail; RX/OTC	PURE COMFORT FLOW METER CHILD	P	QL(1 EA per fill retail); 1 max fill(s) per 365 day(s) retail; RX/OTC
PRO COMFORT SPACER ADULT MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	PURE COMFORT SPACER CHAMBER DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
PRO COMFORT SPACER CHILD MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	QUAKE DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
PRO COMFORT SPACER INFANT DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	REPLACEMENT AIR FILTER MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
PROCARE SPACER/ADULT MASK DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	REPLACEMENT FILTERS MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
PROCARE SPACER/CHILD MASK DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	REUSABLE COMFORTSEAL MASK-LRG MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
PROCHAMBER VHC DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	REUSABLE COMFORTSEAL MASK-MED MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
PRONEB ULTRA FILTER SET MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	REUSABLE COMFORTSEAL MASK-SML MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
PURE COMFORT 3-BALL BREATHE EX DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	RITEFLO DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
PURE COMFORT FLOW METER ADULT	P	QL(1 EA per fill retail); 1 max fill(s) per 365 day(s) retail; RX/OTC	SAMI THE SEAL FILTERS MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC

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SIDESTREAM ADULT FACE MASK MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	SPIRO PD DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
SIDESTREAM PEDIATRIC FACE MASK MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	STRIVE DUAL ZONE PEAK FLOW MTR	P	QL(1 EA per fill retail); 1 max fill(s) per 365 day(s) retail; RX/OTC
SIDESTREAM PLS ADULT FACE MASK MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	THRESHOLD IMT MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
SILICONE MASK/ADULT MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	THRESHOLD PEP DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
SILICONE MASK/INFANT MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	TRUZONE PEAK FLOW METER	P	QL(1 EA per fill retail); 1 max fill(s) per 365 day(s) retail; RX/OTC
SILICONE MASK/PEDIATRIC MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	TUBING/WING TIP MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
SOOTHENE NB 100 ADULT MASK MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	ULTRA NEB ACCESSORIES KIT MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
SOOTHENE NB 100 CHILD MASK MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	VERSAPAP W/UNIVERSAL TUBING DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
SOOTHENE NB 100 MED CUP MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	VERSAPAP DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC
SOOTHENE NB 100 MESH CAP MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	VORTEX HOLD CHMBR/MASK/CHILD DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
VORTEX HOLD CHMBR/MASK/TODDLER DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	<i>dihydroergotamine mesylate SOLN NA 4 MG/ML</i>	NP	
VORTEX VALVED HOLDING CHAMBER DEVI	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	MIGRANAL SOLN NA (Use <i>dihydroergotamine mesylate</i>)	NP	
WINDMILL TRAINER MISC	P	QL(1 EA per fill retail); 2 max fill(s) per 365 day(s) retail; RX/OTC	TRUDHESA	NP	
MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches			Migraine Products - NSAIDs		
Calcitonin Gene-Related Peptide (CGRP) Receptor Antag			<i>diclofenac potassium (migraine) PO</i>	NP	
AIMOVIG	P	SP; MP; PA	ELYXYB	NP	
AJOVY SOAJ	P	SP; MP; PA	Serotonin Agonists		
AJOVY SOSY	P	SP; MP; PA	<i>almotriptan malate PO</i>	NP	
EMGALITY (300 MG DOSE) SOSY	P	SP; PA	<i>eletriptan hydrobromide PO</i>	NP	
EMGALITY SOAJ	P	SP; MP; PA	FROVA PO (Use <i>frovatriptan succinate</i>)	NP	
EMGALITY SOSY	P	SP; MP; PA	<i>frovatriptan succinate PO</i>	NP	
NURTEC	P	QL(0.27 EA daily); PA	IMITREX 5 MG/ACT, 20 MG/ACT (Use <i>sumatriptan</i>)	NP	
QULIPTA	P	PA	IMITREX STATDOSE REFILL SOCT (Use <i>sumatriptan succinate</i>)	NP	
UBRELVY PO	P	QL(0.34 EA daily); PA	IMITREX STATDOSE SYSTEM SOAJ (Use <i>sumatriptan succinate</i>)	NP	
VYEPTI	NP	SP; MP	IMITREX TABS PO (Use <i>sumatriptan succinate</i>)	NP	QL(0.3 EA daily); 1 max fill(s) per 23 day(s) retail
ZAVZPRET	NP		MAXALT-MLT TBDP PO 10 MG (Use <i>rizatriptan benzoate</i>)	NP	
Migraine Combinations			MAXALT-MLT TBDP PO 10 MG (Use <i>rizatriptan benzoate</i>)	NF	
<i>ergotamine w/ caffeine SUPP PR</i>	P	QL(0.72 EA daily)	MAXALT TABS PO 10 MG (Use <i>rizatriptan benzoate</i>)	NF	
<i>sumatriptan-naproxen sodium PO</i>	NP		MAXALT TABS PO 10 MG (Use <i>rizatriptan benzoate</i>)	NF	
Migraine Products					

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MAXALT TABS PO 10 MG (Use rizatriptan benzoate)	NP		SODIUM ACETATE SOLN (Use sodium acetate)	NF	
<i>naratriptan hcl PO</i>	NP	QL(0.3 EA daily); 1 max fill(s) per 23 day(s) retail	Calcium		
RELPAK PO (Use <i>eletriptan hydrobromide</i>)	NP		<i>calcium carbonate-cholecalciferol TABS PO</i>	P	
RELPAK PO 40 MG (Use <i>eletriptan hydrobromide</i>)	NF		<i>calcium carbonate TABS PO 1500 MG, 600 MG, 600 MG</i>	P	
REYVOW	NP	QL(0.134 EA daily)	<i>calcium carbonate-vitamin d w/ minerals TABS PO</i>	P	
<i>rizatriptan benzoate TABS PO</i>	P		<i>calcium citrate TABS PO</i>	P	
<i>rizatriptan benzoate TBDP PO</i>	P		<i>calcium citrate-vitamin d TABS PO 250 UNIT-200 MG, 250 UNIT-315 MG, 6.25 MCG-200 MG, 6.25 MCG-315 MG</i>	P	
<i>sumatriptan</i>	P		<i>calcium gluconate SOLN</i>	P	PA
<i>sumatriptan succinate SOAJ</i>	P		CALCIUM GLUCONATE SOLN (Use <i>calcium gluconate</i>)	NF	PA
<i>sumatriptan succinate SOCT</i>	P		CALTRATE 600+D PLUS MINERALS TABS PO (Use <i>calcium carbonate-vitamin d w/ minerals</i>)	NF	
<i>sumatriptan succinate SOLN 6 MG/0.5ML</i>	P	QL(0.067 ML daily)	CITRACAL MAXIMUM TABS PO (Use <i>calcium citrate-vitamin d</i>)	NF	
<i>sumatriptan succinate TABS PO</i>	P	QL(0.3 EA daily); 1 max fill(s) per 23 day(s) retail	CITRACAL PETITES/VITAMIN D TABS PO (Use <i>calcium citrate-vitamin d</i>)	NF	
TOSYMRA	NP		<i>oyster shell PO</i>	P	
ZEMBRACE SYMTOUCH SOAJ	NP		OYSTER SHELL CALCIUM/D TABS PO 500 MG-200 UNIT	P	
<i>zolmitriptan SOLN</i>	NP		Electrolyte Mixtures		
<i>zolmitriptan TABS PO</i>	NP		BIOLYTE SOLN PO	P	
<i>zolmitriptan TBDP PO</i>	NP		CERASPORT EX1 SOLN PO	P	
ZOMIG SOLN (Use <i>zolmitriptan</i>)	NP		CERASPORT SOLN PO	P	
ZOMIG SOLN (Use <i>zolmitriptan</i>)	NF		DEXTROSE 5%/ELECTROLYTE #48	P	
ZOMIG TABS PO 2.5 MG, 5 MG (Use <i>zolmitriptan</i>)	NF				
MINERALS & ELECTROLYTES					
Bicarbonates					
<i>sodium acetate SOLN</i>	P				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>dextrose in lactated ringers</i>	P		PEDIALYTE SOLN PO (Use oral electrolytes)	P	
<i>dextrose w/ sodium chloride 0.45 %-2.5 %, 0.9 %-5 %, 10 %-0.45 %, 5 %-0.2 %, 5 %-0.225 %, 5 %-0.3 %, 5 %-0.33 %, 5 %-0.45 %, 5 %-0.9 %</i>	P		Fluoride		
DEXTROSE-SODIUM CHLORIDE (Use <i>dextrose w/ sodium chloride</i>)	NF		<i>sodium fluoride CHEW PO</i>	P	
ENFAMIL ENFALYTE SOLN PO	P		Magnesium		
EQUALYTE SOLN PO (Use oral electrolytes)	NF		MAG-200 TABS PO (Use <i>magnesium oxide (mg supplement)</i>)	NF	
FT ELECTROLYTE SOLN PO	P		<i>magnesium oxide (mg supplement) TABS PO</i>	P	
GOODSENSE ELECTROLYTE ADV CARE SOLN PO	P		<i>magnesium sulfate IJ 50 %</i>	P	
HYDRALYTE FREEZER POPS SOLN PO	P		MAGNESIUM SULFATE IJ 50 %	P	
HYDRALYTE SOLN PO	P		<i>magnesium TABS PO 250 MG</i>	P	
KINDERLYTE PREMAX SOLN PO	P		MAGOX 400 TABS PO (Use <i>magnesium oxide (mg supplement)</i>)	NF	
KINDERLYTE SOLN PO	P		Phosphate		
<i>oral electrolytes SOLN PO</i>	P		K-PHOS-NEUTRAL PO (Use <i>pot phosphate monobasic w/ sod phosphate dibasic & monobasic</i>)	NF	
PEDIALYTE ADVANCED CARE SOLN PO (Use <i>oral electrolytes</i>)	NF		PHOS-NAK PACK PO (Use <i>potassium & sodium phosphates</i>)	NF	
PEDIALYTE FREEZER POPS SOLN PO (Use <i>oral electrolytes</i>)	NF		<i>pot phosphate monobasic w/ sod phosphate dibasic & monobasic PO</i>	P	QL(8 EA daily)
PEDIALYTE IMMUNE SUPPORT SOLN PO	P		<i>potassium & sodium phosphates PACK PO</i>	P	
PEDIALYTE SINGLES SOLN PO (Use <i>oral electrolytes</i>)	NF		<i>potassium phosphates</i>	P	
PEDIALYTE SOLN PO (Use <i>oral electrolytes</i>)	NF		POTASSIUM PHOSPHATES (Use <i>potassium phosphates</i>)	NF	
PEDIALYTE SOLN PO (Use <i>oral electrolytes</i>)	NF		POTASSIUM PHOSPHATES(66 MEQ K) (Use <i>potassium phosphates</i>)	NF	

IL MHP Medicaid

Updated December 1, 2024

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<i>sodium phosphates (sodium phosphate dibasic & monobasic) 45 MMOLE/15ML</i>	P	PA	CUPRIMINE CAPS PO (Use penicillamine)	NP	QL(4 EA daily)
Potassium			CUVRIOR	NP	SP
K-TAB TBCR PO 10 MEQ, 20 MEQ (Use potassium chloride)	NF		DEPEN TITRATABS TABS PO (Use penicillamine)	P	QL(4 EA daily)
<i>potassium acetate SOLN 2 MEQ/ML</i>	P		<i>penicillamine CAPS PO</i>	P	QL(4 EA daily)
POTASSIUM ACETATE SOLN 2 MEQ/ML	P		<i>penicillamine TABS PO</i>	P	QL(4 EA daily)
<i>potassium chloride microencapsulated crystals er PO 10 MEQ, 20 MEQ</i>	P		SYPRINE PO (Use trientine hcl)	NP	SP
<i>potassium chloride SOLN PO 10 %, 10 %</i>	P		<i>trientine hcl PO</i>	P	SP
<i>potassium chloride SOLN IV 2 MEQ/ML</i>	P	PA	Immunomodulators		
<i>potassium chloride TBCR PO 8 MEQ, 10 MEQ</i>	P		JOENJA	NP	
Sodium			<i>lenalidomide PO</i>	NP	SP
<i>sodium chloride flush</i>	P		REVLIMID PO	NP	SP
SODIUM CHLORIDE FLUSH	P		REZUROCK	NP	SP
<i>sodium chloride SOLN IV 0.45 %, 0.9 %, 3 %, 5 %</i>	P		RYSTIGGO 280 MG/2ML	NP	SP
SODIUM CHLORIDE SOLN IV 0.9 %	P		THALOMID PO	NP	SP
SODIUM CHLORIDE SOLN PO (Use sodium chloride)	NF		VYVGART	NP	SP; MP
Zinc			VYVGART HYTRULO	NP	SP
<i>zinc sulfate SOLN 1 MG/ML</i>	P	PA	Immunosuppressive Agents		
ZINC SULFATE SOLN 1 MG/ML (Use zinc sulfate)	NF	PA	ASTAGRAF XL CP24	NP	
MISCELLANEOUS THERAPEUTIC CLASSES			<i>azathioprine TABS PO 50 MG</i>	P	MP
Chelating Agents			<i>azathioprine TABS PO 75 MG, 100 MG</i>	NP	
			CELLCEPT CAPS PO (Use mycophenolate mofetil)	NP	MP
			CELLCEPT SUSR (Use mycophenolate mofetil)	NP	MP
			CELLCEPT TABS PO (Use mycophenolate mofetil)	NP	MP
			<i>cyclosporine modified (for microemulsion) CAPS PO</i>	P	MP
			<i>cyclosporine modified (for microemulsion) SOLN PO</i>	P	MP
			<i>cyclosporine CAPS PO</i>	P	

Drug Name	Drug Tier	Requirements/Limits
ENVARUSUS XR TB24	NP	
<i>everolimus (immunosuppressant)</i>	NP	
IMURAN TABS PO (<i>Use azathioprine</i>)	NP	MP
LUPKYNIS	NP	SP
<i>mycophenolate mofetil CAPS PO</i>	P	MP
<i>mycophenolate mofetil SUSR</i>	P	MP
<i>mycophenolate mofetil TABS PO</i>	P	MP
<i>mycophenolate sodium PO</i>	P	MP
MYFORTIC PO (<i>Use mycophenolate sodium</i>)	NP	MP
NEORAL CAPS PO (<i>Use cyclosporine modified (for microemulsion)</i>)	NP	MP
NEORAL SOLN PO (<i>Use cyclosporine modified (for microemulsion)</i>)	NP	MP
PROGRAF CAPS PO (<i>Use tacrolimus</i>)	NP	MP
PROGRAF PACK	NP	
RAPAMUNE SOLN (<i>Use sirolimus</i>)	NP	MP
RAPAMUNE TABS PO (<i>Use sirolimus</i>)	NP	MP
SANDIMMUNE CAPS PO (<i>Use cyclosporine</i>)	NP	
SANDIMMUNE SOLN PO 100 MG/ML	P	MP
<i>sirolimus SOLN</i>	P	MP
<i>sirolimus TABS PO</i>	P	MP
<i>tacrolimus CAPS PO</i>	P	MP
ZORTRESS (<i>Use everolimus (immunosuppressant)</i>)	NP	
Potassium Removing Agents		
LOKELMA	NP	

Drug Name	Drug Tier	Requirements/Limits
<i>sodium polystyrene sulfonate POWD PO</i>	P	
<i>sodium polystyrene sulfonate SUSP CO 15 GM/60ML</i>	NP	
VELTASSA PO 8.4 GM, 16.8 GM, 25.2 GM	NP	
Systemic Lupus Erythematosus Agents		
BENLYSTA SOAJ	NP	SP; MP
BENLYSTA SOSY	NP	SP; MP
MOUTH/THROAT/DENTAL AGENTS		
Anesthetics Topical Oral		
<i>lidocaine hcl (mouth-throat) 4 %</i>	P	QL(1.67 ML daily)
<i>lidocaine hcl (mouth-throat) 2 %</i>	P	QL(6.67 ML daily)
Anti-infectives - Throat		
<i>clotrimazole</i>	P	
NYSTATIN (<i>Use nystatin (mouth-throat)</i>)	NF	
<i>nystatin (mouth-throat)</i>	P	
ORAVIG	NP	
Antiseptics - Mouth/Throat		
<i>chlorhexidine gluconate (mouth-throat)</i>	P	
PERIDEX (<i>Use chlorhexidine gluconate (mouth-throat)</i>)	NF	
Dental Products		
PREVIDENT 5000 DRY MOUTH GEL (<i>Use sodium fluoride (dental)</i>)	NF	MP
PREVIDENT 5000 KIDS PSTE DT (<i>Use sodium fluoride (dental)</i>)	NF	
PREVIDENT GEL (<i>Use sodium fluoride (dental)</i>)	NF	MP
<i>sodium fluoride (dental) CREA</i>	NP	

IL MHP Medicaid

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<i>sodium fluoride (dental) GEL</i>	NP	MP	<i>multiple vitamins w/ iron TABS PO</i>	P	
<i>sodium fluoride (dental) PSTE DT</i>	NP	MP	TAB-A-VITE/IRON/BETA CAROTENE TABS PO	P	
<i>sodium fluoride (dental) SOLN 0.2 %</i>	NP	MP	Multiple Vitamins w/ Minerals		
SODIUM FLUORIDE 5000 ENAMEL GEL	NP	MP	ABC COMPLETE SENIOR 50+ TABS PO	P	QL(1 EA daily); RX/OTC
SODIUM FLUORIDE 5000 SENSITIVE GEL	NP	MP	ABC COMPLETE SENIOR MENS 50+ TABS PO	P	QL(1 EA daily); RX/OTC
Steroids - Mouth/Throat/Dental			ADVANCED DIABETIC MULTIVITAMIN TABS PO	P	QL(1 EA daily); RX/OTC
<i>triamcinolone acetonide (mouth)</i>	P	QL(0.17 GM daily)	ALGAE BASED CALCIUM TABS PO	P	QL(1 EA daily); RX/OTC
Throat Products - Misc.			ALIVE ENERGY 50+ TABS PO	P	QL(1 EA daily); RX/OTC
AQUORAL SOLN	NP	RX/OTC	ALIVE MENS 50+ TABS PO	P	QL(1 EA daily); RX/OTC
<i>cevimeline hcl PO</i>	NP		ALIVE ONCE DAILY WOMENS TABS PO	P	QL(1 EA daily); RX/OTC
EVOXAC PO (<i>Use cevimeline hcl</i>)	NP		BASIC PM TABS PO	P	QL(1 EA daily); RX/OTC
<i>pilocarpine hcl (oral) PO 5 MG</i>	P	QL(6 EA daily)	CAL-DAY 1000 TABS PO	P	QL(1 EA daily); RX/OTC
<i>pilocarpine hcl (oral) PO 7.5 MG</i>	P		CENTRAVITES 50 PLUS TABS PO	P	QL(1 EA daily); RX/OTC
MULTIVITAMINS			CENTRAVITES ADULTS TABS PO	P	QL(1 EA daily); RX/OTC
B-Complex Vitamins			CENTRUM ADULTS TABS PO (<i>Use multiple vitamins w/ minerals</i>)	P	QL(1 EA daily); RX/OTC
<i>b-complex vitamins TABS PO</i>	P		CENTRUM ADULTS TABS PO (<i>Use multiple vitamins w/ minerals</i>)	NF	QL(1 EA daily); RX/OTC
B-Complex w/ C			CENTRUM CARDIO TABS PO	P	QL(1 EA daily); RX/OTC
<i>b complex w/ c TABS PO</i>	P		CENTRUM MEN TABS PO (<i>Use multiple vitamins w/ minerals</i>)	NF	QL(1 EA daily); RX/OTC
<i>b-complex w/ c & calcium PO</i>	P		CENTRUM MEN TABS PO	P	QL(1 EA daily); RX/OTC
<i>b-complex w/ c & e + zn PO</i>	P		CENTRUM MEN TABS PO (<i>Use multiple vitamins w/ minerals</i>)	P	QL(1 EA daily); RX/OTC
B-Complex w/ Folic Acid					
<i>b-complex w/ c & folic acid TABS PO 60 MG-10 MG-300 MCG-800 MCG-1.5 MG-6 MCG-10 MG-1.7 MG-20 MG, 0.8 MG</i>	P				
Multiple Vitamins w/ Iron					

IL MHP Medicaid

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CENTRUM MINIS WOMEN 50+ TABS PO	P	QL(1 EA daily); RX/OTC	CENTRUM ULTRA WOMENS TABS PO	P	QL(1 EA daily); RX/OTC
CENTRUM SILVER 50+MEN TABS PO <i>(Use multiple vitamins w/ minerals)</i>	NF	QL(1 EA daily); RX/OTC	CENTRUM WOMEN TABS PO <i>(Use multiple vitamins w/ minerals)</i>	P	QL(1 EA daily); RX/OTC
CENTRUM SILVER 50+MEN TABS PO <i>(Use multiple vitamins w/ minerals)</i>	P	QL(1 EA daily); RX/OTC	CERTAVITE SENIOR/ANTIOXIDANT TABS PO	P	QL(1 EA daily); RX/OTC
CENTRUM SILVER 50+WOMEN TABS PO <i>(Use multiple vitamins w/ minerals)</i>	NF	QL(1 EA daily); RX/OTC	CERTAVITE/ANTIOXIDANTS TABS PO	P	QL(1 EA daily); RX/OTC
CENTRUM SILVER ADULT 50+ TABS PO <i>(Use multiple vitamins w/ minerals)</i>	NF	QL(1 EA daily); RX/OTC	CVS ONE DAILY WOMENS 50+ ADV TABS PO	P	QL(1 EA daily); RX/OTC
CENTRUM SILVER ADULT 50+ TABS PO <i>(Use multiple vitamins w/ minerals)</i>	P	QL(1 EA daily); RX/OTC	CVS SPECTRAVITE ULTRA WOMEN TABS PO	P	QL(1 EA daily); RX/OTC
CENTRUM SILVER ULTRA WOMENS TABS PO	P	QL(1 EA daily); RX/OTC	DERMAVITE TABS PO	P	QL(1 EA daily); RX/OTC
CENTRUM SILVER WOMEN 50+ TABS PO <i>(Use multiple vitamins w/ minerals)</i>	P	QL(1 EA daily); RX/OTC	DIALYVITE SUPREME D TABS PO	P	QL(1 EA daily); RX/OTC
CENTRUM SILVER WOMEN 50+ TABS PO <i>(Use multiple vitamins w/ minerals)</i>	NF	QL(1 EA daily); RX/OTC	EQ ONE DAILY MENS HEALTH TABS PO	P	QL(1 EA daily); RX/OTC
CENTRUM SILVER TABS PO <i>(Use multiple vitamins w/ minerals)</i>	P	QL(1 EA daily); RX/OTC	EQ ONE DAILY WOMENS 50+ TABS PO	P	QL(1 EA daily); RX/OTC
CENTRUM SILVER TABS PO <i>(Use multiple vitamins w/ minerals)</i>	NF	QL(1 EA daily); RX/OTC	EQL CENTURY MATURE ADULTS 50+ TABS PO	P	QL(1 EA daily); RX/OTC
CENTRUM SPECIALIST HEART TABS PO	P	QL(1 EA daily); RX/OTC	EQL CENTURY WOMENS TABS PO	P	QL(1 EA daily); RX/OTC
CENTRUM SPECIALIST IMMUNE TABS PO	P	QL(1 EA daily); RX/OTC	EYE HEALTH + LUTEIN TABS PO	P	QL(1 EA daily); RX/OTC
CENTRUM SPECIALIST VISION TABS PO	P	QL(1 EA daily); RX/OTC	EYE MULTIVITAMIN/SODIUM TABS PO	P	QL(1 EA daily); RX/OTC
			FITNESS TABS FOR MEN AM/PM TABS PO	P	QL(1 EA daily); RX/OTC
			FOSFREE TABS PO <i>(Use multiple vitamins w/ minerals)</i>	NF	RX/OTC
			FOSFREE TABS PO <i>(Use multiple vitamins w/ minerals)</i>	P	RX/OTC
			FREEDAVITE TABS PO	P	QL(1 EA daily); RX/OTC

IL MHP Medicaid

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GERI-FREEDA SENIOR FORMULA TABS PO	P	QL(1 EA daily); RX/OTC	ONE DAILY MEN FORMULA W/O IRON TABS PO	P	QL(1 EA daily); RX/OTC
HIGH POT MULTIVITAMIN/BETA-CAR TABS PO	P	QL(1 EA daily); RX/OTC	ONE DAILY MULTIVITAMIN WOMEN TABS PO	P	QL(1 EA daily); RX/OTC
HM COMPLETE MEN TABS PO	P	QL(1 EA daily); RX/OTC	ONE DAILY WOMENS TABS PO	P	QL(1 EA daily); RX/OTC
LIVER DETOX TABS PO	P	QL(1 EA daily); RX/OTC	ONE-A-DAY ENERGY TABS PO	P	QL(1 EA daily); RX/OTC
LUTEIN-ZEAXANTHIN TABS PO 60 MG-5 MG-1 MG-15 MG-1 MG-750 MCG-20 MG	P	QL(1 EA daily); RX/OTC	ONE-A-DAY MENS (MINERALS) TABS PO	P	QL(1 EA daily); RX/OTC
MEGA MULTI FOR WOMEN TABS PO	P	QL(1 EA daily); RX/OTC	ONE-A-DAY MENS 50+ ADVANTAGE TABS PO	P	QL(1 EA daily); RX/OTC
MEGAVITE FRUITS & VEGGIES TABS PO	P	QL(1 EA daily); RX/OTC	ONE-A-DAY MENS 50+ TABS PO	P	QL(1 EA daily); RX/OTC
MEGAVITE GOLDEN YEARS 55+ TABS PO	P	RX/OTC	ONE-A-DAY MENS PRO EDGE TABS PO	P	QL(1 EA daily); RX/OTC
MENS 50+ MULTI VITAMIN/MIN TABS PO	P	QL(1 EA daily); RX/OTC	ONE-A-DAY TEEN ADVANTAGE/HIM TABS PO	P	QL(1 EA daily); RX/OTC
MENS 50+ MULTIVITAMIN TABS PO	P	QL(1 EA daily); RX/OTC	ONE-A-DAY WEIGHT SMART ADVANCE TABS PO (Use multiple vitamins w/ minerals)	P	QL(1 EA daily); RX/OTC
<i>multiple vitamins w/ minerals TABS PO</i>	P	RX/OTC	ONE-A-DAY WEIGHT SMART ADVANCE TABS PO (Use multiple vitamins w/ minerals)	NF	QL(1 EA daily); RX/OTC
<i>multiple vitamins w/ minerals TABS PO</i>	P	QL(1 EA daily); RX/OTC	ONE-A-DAY WOMENS 50 PLUS TABS PO (Use multiple vitamins w/ minerals)	P	QL(1 EA daily); RX/OTC
MULTIVITAMIN ADULT (MINERALS) TABS PO	P	QL(1 EA daily); RX/OTC	ONE-A-DAY WOMENS 50+ ADVANTAGE TABS PO (Use multiple vitamins w/ minerals)	NF	QL(1 EA daily); RX/OTC
MULTIVITAMIN MEN TABS PO	P	QL(1 EA daily); RX/OTC	ONE-A-DAY WOMENS 50+ ADVANTAGE TABS PO (Use multiple vitamins w/ minerals)	P	QL(1 EA daily); RX/OTC
MULTI-VITAMIN MONOCAPS TABS PO	P	QL(1 EA daily); RX/OTC	ONE-A-DAY WOMENS 50+ TABS PO	P	QL(1 EA daily); RX/OTC
MULTIVITAMIN/ZINC STRESS TABS PO	P	QL(1 EA daily); RX/OTC			
MULTIVITAMIN-MINERALS TABS PO	P	QL(1 EA daily); RX/OTC			
NATRUL-VITES TABS PO	P	QL(1 EA daily); RX/OTC			
OCULAR VITAMINS TABS PO	P	QL(1 EA daily); RX/OTC			
ONCOVITE TABS PO	P	QL(1 EA daily); RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ONE-A-DAY WOMENS HEALTHY SKIN TABS PO <i>(Use multiple vitamins w/ minerals)</i>	P	QL(1 EA daily); RX/OTC	SYSTANE ICAPS AREDS2 TABS PO	P	QL(1 EA daily); RX/OTC
ONE-A-DAY WOMENS MIND & BODY TABS PO <i>(Use multiple vitamins w/ minerals)</i>	P	QL(1 EA daily); RX/OTC	THERABETIC MULTI-VITAMIN TABS PO	P	QL(1 EA daily); RX/OTC
ONE-A-DAY WOMENS PETITES TABS PO <i>(Use multiple vitamins w/ minerals)</i>	P	QL(1 EA daily); RX/OTC	THERAGRAN-M ADVANCED 50 PLUS TABS PO	P	QL(1 EA daily); RX/OTC
OPTIVITE P.M.T. TABS PO <i>(Use multiple vitamins w/ minerals)</i>	P	QL(1 EA daily); RX/OTC	THERAGRAN-M PREMIER 50 PLUS TABS PO	P	QL(1 EA daily); RX/OTC
OSTEOPRIME PLUS TABS PO	P	QL(1 EA daily); RX/OTC	THERAGRAN-M PREMIER TABS PO	P	QL(1 EA daily); RX/OTC
PARVLEX TABS PO	P	QL(1 EA daily); RX/OTC	THERA-M TABS PO	P	QL(1 EA daily); RX/OTC
PRESERVISION AREDS TABS PO	P	QL(1 EA daily); RX/OTC	THERA-TABS M TABS PO	P	QL(1 EA daily); RX/OTC
PRO-CAL TABS PO	P	QL(1 EA daily); RX/OTC	THEREMS-M TABS PO	P	QL(1 EA daily); RX/OTC
PRORENAL + D TABS PO	P	QL(1 EA daily); RX/OTC	T-VITES TABS PO	P	QL(1 EA daily); RX/OTC
QC MULTI-VITE TABS PO	P	QL(1 EA daily); RX/OTC	ULTRA BONEUP TABS PO	P	QL(1 EA daily); RX/OTC
QUIN B STRONG TABS PO	P	QL(1 EA daily); RX/OTC	VITABASIC SENIOR TABS PO	P	QL(1 EA daily); RX/OTC
QUINTABS-M TABS PO	P	QL(1 EA daily); RX/OTC	VITAROCA PLUS TABS PO <i>(Use multiple vitamins w/ minerals)</i>	NF	QL(1 EA daily); RX/OTC
RA CENTRAL-VITE TABS PO	P	QL(1 EA daily); RX/OTC	VITAROCA PLUS TABS PO <i>(Use multiple vitamins w/ minerals)</i>	P	QL(1 EA daily); RX/OTC
SENTRY SENIOR/LUTEIN TABS PO	P	QL(1 EA daily); RX/OTC	VITASANA TABS PO	P	QL(1 EA daily); RX/OTC
SENTRY SENIOR TABS PO	P	RX/OTC	VITATRUM TABS PO	P	RX/OTC
SM ONE DAILY WOMENS TABS PO	P	QL(1 EA daily); RX/OTC	VITEYES CLASSIC MULTIVITAMIN TABS PO	P	QL(1 EA daily); RX/OTC
SOLO TABS PO	P	QL(1 EA daily); RX/OTC	VITRUM 50+ ADULT-MULTI TABS PO	P	RX/OTC
STROVITE FORTE TABS PO <i>(Use multiple vitamins w/ minerals)</i>	NF	QL(1 EA daily); RX/OTC	WOMENS 50+ MULTI VITAMIN/MIN TABS PO	P	QL(1 EA daily); RX/OTC
			YELETS TEENAGE FORMULA TABS PO	P	QL(1 EA daily); RX/OTC
			Multivitamins		
			ALTRIXA TABS PO	P	RX/OTC

IL MHP Medicaid

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ESTROFACTORS TABS PO	P	RX/OTC	MULTIVITAMIN/FLUORIDE CHEW PO	P	AL(Up to 10 yrs old); RX/OTC
FOLCYTEINE TABS PO	P	RX/OTC	MULTI-VIT-FLOR CHEW PO	P	AL(Up to 10 yrs old); RX/OTC
GENICIN VITA-Q TABS PO	P	RX/OTC	<i>pediatric multivitamins w/fl CHEW PO</i>	P	AL(Up to 10 yrs old); RX/OTC
HIGH POTENCY MULTIVITAMIN TABS PO	P	RX/OTC	POLY-VI-FLOR CHEW PO	P	AL(Up to 10 yrs old); RX/OTC
MULTI VITAMIN W/D-3 TABS PO	P	RX/OTC	QUFLORA PEDIATRIC CHEW PO	P	AL(Up to 10 yrs old); RX/OTC
MULTI VITAMIN TABS PO	P	RX/OTC	Ped MV w/ Iron		
<i>multiple vitamin TABS PO</i>	P	RX/OTC	MULTIVITAMINS PLUS IRON CHILD CHEW PO	P	
MULTIVITAMIN ADULT TABS PO	P	RX/OTC	<i>pediatric multiple vitamins w/ iron CHEW PO</i>	P	
MULTIVITAMIN TABS PO	P	RX/OTC	Pediatric Multiple Vitamins		
NEOMULTIVITE TABS PO	P	RX/OTC	ONE-A-DAY VITACRAVES+OMEGA-3 CHEW PO (<i>Use pediatric multiple vitamins</i>)	NF	
OMNICAP TABS PO	P	RX/OTC	<i>pediatric multiple vitamins CHEW PO</i>	P	
ONE DAILY ESSENTIALS TABS PO	P	RX/OTC	Prenatal Vitamins		
ONE DAILY ESSENTIAL TABS PO	P	RX/OTC	CITRANATAL 90 DHA PO 120 MG-20 MG-1 MG-3 MG-400 UNIT-3.4 MG-20 MG-50 MG-25 MG-2 MG-159 MG-90 MG-150 MCG-30 UNIT-0.75 MG-300 MG	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP
ONE VITE DAILY MULTIVITAMIN TABS PO	P	RX/OTC	CITRANATAL ASSURE PO	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP
ONE-A-DAY ESSENTIAL TABS PO (<i>Use multiple vitamin</i>)	P	RX/OTC	CITRANATAL B-CALM PO 120 MG-25 MG-1 MG-400 UNIT-120 MG-20 MG	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP
ONE-A-DAY MENS TABS PO (<i>Use multiple vitamin</i>)	P	RX/OTC	CITRANATAL BLOOM	NP	AL(At least 10 yrs old - Up to 55 yrs old)
QUINTABS TABS PO	P	RX/OTC	CITRANATAL HARMONY PO 25 MG-1 MG-400 UNIT-50 MG-104 MG-27 MG-30 UNIT-260 MG	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP
STRESS FORMULA/ZINC/ENERGY TABS PO	P	RX/OTC	CITRANATAL MEDLEY	NP	
THERA TABS PO	P	RX/OTC	Ped MV w/ Fluoride		
THEREMS TABS PO	P	RX/OTC	FLORAFOL PEDIATRIC CHEW PO	P	AL(Up to 10 yrs old); RX/OTC
TRUE MULTIVITAMIN TABS PO	P	RX/OTC	MULTIVITAMIN + FLUORIDE CHEW PO	P	AL(Up to 10 yrs old); RX/OTC

IL MHP Medicaid

Updated December 1, 2024

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
C-NATE DHA CAPS PO	NP	MP	PNV-OMEGA PO	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP
COMPLETE NATAL DHA PO	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP	PREMESISRX	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP
COMPLETENATE CHEW PO	P	QL(1 EA daily); MP	PRENAISSANCE PO	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP
DERMACINRX PRETRATE TABS PO	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP	PRENAISSANCE PLUS CAPS PO	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP
ENBRACE HR	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP	PRENATAL PLUS VITAMIN/MINERAL TABS PO	P	QL(1 EA daily); MP; RX/OTC
FOLIVANE-OB PO	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP	<i>prenatal vit w/ ferrous fumarate-l methylfolate-folic acid PO</i>	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP
M-NATAL PLUS TABS PO	P	QL(1 EA daily); MP; RX/OTC	<i>prenatal vit w/ iron carbonyl-folic acid TABS PO 120 MG-10 MG-1.25 MG-315 UNIT-15 MCG-3.4 MG-10 MG-1 MG-2 MG-15 MG-10 MG-20 UNIT-2100 UNIT-50 MG</i>	P	AL(At least 10 yrs old - Up to 55 yrs old); MP
MULTI-MAC PO	NP		<i>prenatal without a w/ ferrous fumarate-l methylfolate-fadha PO</i>	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP
NATAL PNV TABS PO	NP	AL(At least 10 yrs old)	PRENATAL TABS PO 120 MG-10 MG-1 MG-10 MCG-12 MCG-3 MG-20 MG-1200 MCG-27 MG-200 MG-1.84 MG-25 MG-2 MG-10 MG	P	QL(1 EA daily); MP; RX/OTC
NESTABS PO	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP	PRENATE	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP
NESTABS DHA PO	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP	PRENATE AM	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP
NESTABS ONE	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP	PRENATE DHA 90 MG-26 MG-400 MCG-400 UNIT-25 MCG-155 MG-50 MG-300 MG-40 UNIT-600 MCG-18 MG	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP
NIVA-PLUS TABS PO	P	QL(1 EA daily); MP; RX/OTC			
OB COMPLETE ONE PO	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP			
OB COMPLETE PETITE	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP			
OB COMPLETE PREMIER	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP			
OB COMPLETE/DHA	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP			
OB COMPLETE TABS PO	P	AL(At least 10 yrs old - Up to 55 yrs old); MP			
PNV-DHA+DOCUSATE PO	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP			

IL MHP Medicaid

Updated December 1, 2024

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PRENATE ELITE 75 MG-21 MG-330 MCG-400 MCG-600 UNIT-13 MCG-3.5 MG-21 MG-3 MG-155 MG-25 MG-15 MG-1.5 MG-2600 UNIT-150 MCG-40 UNIT-600 MCG-20 MG	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP	TARON-C DHA PO	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP
PRENATE ENHANCE PO	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP	THRIVITE RX TABS PO	P	QL(1 EA daily); MP; RX/OTC
PRENATE ESSENTIAL 90 MG-26 MG-280 MCG-400 MCG-220 UNIT-13 MCG-155 MG-50 MG-300 MG-150 MCG-10 UNIT-40 MG-600 MCG-18 MG	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP	TRICARE TABS PO	P	QL(1 EA daily); MP; RX/OTC
PRENATE MINI 60 MG-26 MG-280 MCG-400 MCG-1000 UNIT-13 MCG-80 MG-25 MG-350 MG-18 MG-150 MCG-10 UNIT-600 MCG-25 MG	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP	TRINATAL RX 1 TABS PO	P	QL(1 EA daily); MP
PRENATE PIXIE	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP	TRISTART DHA PO	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP
PRENATE RESTORE PO	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP	TRISTART FREE PO	NP	
PRENATRIX TABS PO	NP	QL(1 EA daily); MP; RX/OTC	TRISTART ONE PO	NP	
PRENATRYL TABS PO	NP	QL(1 EA daily); MP; RX/OTC	VINATE DHA RF	NP	MP
PRIMACARE PO	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP	VIRT-NATE DHA CAPS PO	NP	MP
RELNATE DHA CAPS PO	NP	MP	VIRT-PN DHA PO	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP
SELECT-OB+DHA MISC PO	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP	VITAFOL FE+	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP
SELECT-OB CHEW	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP	VITAFOL GUMMIES	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP
SE-NATAL 19 CHEW PO	P	QL(1 EA daily); MP	VITAFOL STRIPS	NP	
SE-NATAL 19 TABS PO	P	QL(1 EA daily); MP; RX/OTC	VITAFOL ULTRA	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP
			VITAFOL-NANO	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP
			VITAFOL-OB+DHA MISC PO	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP
			VITAFOL-OB TABS PO	P	AL(At least 10 yrs old - Up to 55 yrs old); MP
			VITAFOL-ONE CAPS PO	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP
			VITAMEDMD ONE RX/QUATREFOLIC PO	NP	
			VITAPEARL	NP	
			WESCAP-C DHA PO	NP	MP

Drug Name	Drug Tier	Requirements/Limits
WESCAP-PN DHA PO	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP
WESNATAL DHA COMPLETE PO	NP	MP
WESNATE DHA CAPS PO	NP	MP
WESTAB PLUS TABS PO	P	QL(1 EA daily); MP; RX/OTC
WESTGEL DHA PO	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP
ZATEAN-PN DHA PO	NP	AL(At least 10 yrs old - Up to 55 yrs old); MP
MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms		
Central Muscle Relaxants		
AMRIX CP24 PO (Use cyclobenzaprine hcl)	NP	
baclofen SOLN PO 5 MG/5ML, 10 MG/5ML	NP	
baclofen SUSP	P	
baclofen TABS PO 5 MG, 10 MG, 20 MG	P	
carisoprodol TABS PO	NP	
chlorzoxazone TABS PO	P	
cyclobenzaprine hcl CP24 PO	NP	
cyclobenzaprine hcl TABS PO 5 MG, 10 MG	P	QL(3 EA daily)
cyclobenzaprine hcl TABS PO 7.5 MG	P	QL(4 EA daily)
FLEQSUVY SUSP (Use baclofen)	NP	
LIORESAL SOLN IT (Use baclofen)	NF	SP
LYVISPAH PACK	NP	
metaxalone PO	NP	
methocarbamol TABS PO 500 MG, 750 MG	P	

Drug Name	Drug Tier	Requirements/Limits
orphenadrine citrate TB12 PO	P	
OZOBAX DS SOLN PO (Use baclofen)	NF	
SKELAXIN PO (Use metaxalone)	NF	
SOMA TABS PO (Use carisoprodol)	NP	
tizanidine hcl CAPS PO	NP	
tizanidine hcl TABS PO	P	
ZANAFLEX CAPS PO (Use tizanidine hcl)	NP	
ZANAFLEX TABS PO 4 MG (Use tizanidine hcl)	NP	
Direct Muscle Relaxants		
DANTRIUM CAPS PO 25 MG (Use dantrolene sodium)	NP	
dantrolene sodium CAPS PO	P	
Fibrodysplasia Ossificans Progressiva (FOP) Agents		
SOHONOS PO 1 MG, 1.5 MG, 2.5 MG, 10 MG	NP	SP
Muscle Relaxant Combinations		
NORGESIC FORTE PO (Use orphenadrine w/ aspirin & caff)	NP	
orphenadrine w/ aspirin & caff PO	P	
NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus		
Nasal Agent Combinations		
azelastine hcl-fluticasone propionate SUSP	NP	
DYMISTA SUSP (Use azelastine hcl-fluticasone propionate)	NP	
RYALTRIS	NP	

Drug Name	Drug Tier	Requirements/Limits
Nasal Agents - Misc.		
AYR SALINE NASAL DROPS SOLN	P	
FT SALINE NASAL SPRAY SOLN	P	
LITTLE REMEDIES SALINE SOLN	P	
OCEAN NASAL SPRAY SOLN (Use saline)	NF	
saline SOLN 0.65 %	P	
Nasal Antiallergy		
azelastine hcl 0.1 %, 0.15 %, 137 MCG/SPRAY	P	MP; RX/OTC
cromolyn sodium (nasal) 5.2 MG/ACT	P	
NASALCROM (Use cromolyn sodium (nasal))	NF	
olopatadine hcl (nasal)	P	
PATANASE (Use olopatadine hcl (nasal))	NF	
Nasal Anticholinergics		
ipratropium bromide (nasal) 0.03 %	NP	QL(1 ML daily); MP
ipratropium bromide (nasal) 0.06 %	NP	QL(0.5 ML daily)
Nasal Steroids		
BECONASE AQ	NP	MP
FLONASE ALLERGY RELIEF SUSP (Use fluticasone propionate (nasal))	NF	RX/OTC
flunisolide (nasal)	P	QL(0.84 ML daily); MP
fluticasone propionate (nasal) SUSP	P	QL(0.54 GM daily); MP; RX/OTC
mometasone furoate (nasal) SUSP	NP	MP; RX/OTC
NASONEX 24HR SUSP (Use mometasone furoate (nasal))	NF	MP; RX/OTC

Drug Name	Drug Tier	Requirements/Limits
OMNARIS SUSP	NP	MP
PROPEL MINI SDS IMPL	NP	
QNASL	NP	MP
QNASL CHILDRENS	NP	MP
SINUVA IMPL	NP	
XHANCE EXHU	NP	
ZETONNA AERS	NP	MP
Sympathomimetic Decongestants		
pseudoephedrine hcl TABS PO 30 MG	P	QL(8 EA daily)
pseudoephedrine hcl TABS PO 60 MG	P	QL(4 EA daily)
SUDAFED CHILDRENS LIQD PO	P	
SUDAFED SINUS CONGESTION TABS PO (Use pseudoephedrine hcl)	NF	QL(8 EA daily)
SUDAFED TABS PO (Use pseudoephedrine hcl)	NF	QL(8 EA daily)
NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles		
ALS Agents		
EXSERVAN FILM	NP	SP
RADICAVA ORS STARTER KIT SUSP	NP	SP
RADICAVA ORS SUSP	NP	SP
RELYVRIO	NP	SP
RILUTEK TABS PO (Use riluzole)	NP	
riluzole TABS PO	P	
TIGLUTIK SUSP	NP	SP; MP
Rett Syndrome Agents		
DAYBUE	NP	SP
NUTRIENTS		
Carbohydrates		

Drug Name	Drug Tier	Requirements/ Limits
<i>dextrose SOLN 10 %</i>	P	
DEXTROSE SOLN 20 %	P	
Lipids		
INTRALIPID 20 %	P	PA
NUTRILIPID	P	PA
OPHTHALMIC AGENTS - Drugs to Treat the Eye		
Artificial Tears and Lubricants		
<i>artificial tear solution</i>	P	
<i>dextran 70-hypromellose 0.3 %-0.1 %</i>	P	
GENTEAL TEARS MODERATE PF (<i>Use dextran 70-hypromellose</i>)	NF	
GENTEAL TEARS PF (<i>Use dextran 70-hypromellose</i>)	NF	
LACRISERT	P	
<i>polyvinyl alcohol 1.4 %</i>	P	
<i>polyvinyl alcohol-povidone (ophth) 0.5 %-0.6 %, 5 MG/ML-6 MG/ML</i>	P	
<i>white petrolatum-mineral oil</i>	P	
Beta-blockers - Ophthalmic		
<i>betaxolol hcl (ophth) SOLN</i>	P	MP
BETIMOL	NP	MP
BETOPTIC-S SUSP	NP	MP
<i>brimonidine tartrate-timolol maleate</i>	NP	MP
<i>carteolol hcl (ophth)</i>	P	MP
COMBIGAN (<i>Use brimonidine tartrate-timolol maleate</i>)	NP	MP
COSOPT (<i>Use dorzolamide hcl-timolol maleate</i>)	NP	MP
COSOPT PF (<i>Use dorzolamide hcl-timolol maleate</i>)	NP	MP

Drug Name	Drug Tier	Requirements/ Limits
<i>dorzolamide hcl-timolol maleate</i>	P	MP
<i>dorzolamide hcl-timolol maleate</i>	NP	MP
ISTALOL SOLN (<i>Use timolol maleate (ophth)</i>)	NP	MP
<i>levobunolol hcl 0.5 %</i>	P	MP
<i>timolol maleate (ophth) SOLG</i>	P	MP
<i>timolol maleate (ophth) SOLN</i>	NP	MP
<i>timolol maleate (ophth) SOLN</i>	P	MP
TIMOPTIC OCUDOSE SOLN (<i>Use timolol maleate (ophth)</i>)	NP	MP
TIMOPTIC OCUDOSE SOLN 0.25 % (<i>Use timolol maleate (ophth)</i>)	NF	
TIMOPTIC SOLN (<i>Use timolol maleate (ophth)</i>)	NP	MP
TIMOPTIC-XE SOLG (<i>Use timolol maleate (ophth)</i>)	NP	MP
Cycloplegic Mydriatics		
<i>atropine sulfate (ophthalmic) OINT</i>	P	
<i>atropine sulfate (ophthalmic) SOLN</i>	P	MP
ATROPINE SULFATE SOLN 1 %	P	MP
CYCLOGYL (<i>Use cyclopentolate hcl</i>)	NP	
CYCLOGYL	NP	
CYCLOMYDRIL	P	
<i>cyclopentolate hcl 1 %</i>	P	
MYDRIACYL SOLN (<i>Use tropicamide</i>)	NP	
<i>phenylephrine hcl (mydriatic) SOLN</i>	NP	
<i>tropicamide SOLN</i>	P	

IL MHP Medicaid

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Drug Name	Drug Tier	Requirements/Limits
Miotics		
PHOSPHOLINE IODIDE	NP	
<i>pilocarpine hcl SOLN 1 %, 2 %, 4 %</i>	P	MP
VUITY SOLN	NP	MP
Ophthalmic Adrenergic Agents		
ALPHAGAN P (<i>Use brimonidine tartrate</i>)	P	MP
<i>apraclonidine hcl</i>	NP	
<i>brimonidine tartrate</i>	P	MP
IOPIDINE	NP	
SIMBRINZA	NP	MP
Ophthalmic Anti-infectives		
AZASITE	NP	
<i>bacitracin (ophthalmic)</i>	P	
<i>bacitracin-polymyxin b (ophth)</i>	P	
BESIVANCE	NP	
BETADINE OPHTHALMIC PREP	NP	
CILOXAN OINT	P	
CILOXAN SOLN (<i>Use ciprofloxacin hcl (ophth)</i>)	NF	
<i>ciprofloxacin hcl (ophth) SOLN</i>	P	
ERYTHROMYCIN	P	
<i>erythromycin (ophth)</i>	P	
<i>gatifloxacin (ophth)</i>	NP	
<i>gentamicin sulfate (ophth) SOLN</i>	P	
<i>moxifloxacin hcl (ophth) SOLN OP</i>	NP	
NATACYN	NP	
<i>neomycin-bacitracin zn-polymyxin</i>	P	
<i>neomycin-polymyxin-gramicidin</i>	P	

Drug Name	Drug Tier	Requirements/Limits
OCUFLOX (<i>Use ofloxacin (ophth)</i>)	NP	
<i>ofloxacin (ophth)</i>	P	
<i>polymyxin b-trimethoprim</i>	P	
POLYTRIM (<i>Use polymyxin b-trimethoprim</i>)	NF	
<i>sulfacetamide sodium (ophth) OINT</i>	P	
<i>sulfacetamide sodium (ophth) SOLN</i>	P	
<i>tobramycin (ophth) SOLN</i>	P	
TOBREX OINT	P	
<i>trifluridine</i>	P	
VIGAMOX SOLN OP (<i>Use moxifloxacin hcl (ophth)</i>)	NF	
VIGAMOX SOLN OP (<i>Use moxifloxacin hcl (ophth)</i>)	NP	
XDEMVY	NP	
ZIRGAN GEL	P	
ZYMAXID (<i>Use gatifloxacin (ophth)</i>)	NP	
Ophthalmic Immunomodulators		
CEQUA SOLN	NP	MP
<i>cyclosporine (ophth) EMUL</i>	NP	MP
RESTASIS MULTIDOSE EMUL	NP	MP
RESTASIS EMUL (<i>Use cyclosporine (ophth)</i>)	NP	MP
VERKAZIA EMUL	NP	
VEVYE SOLN	NP	
Ophthalmic Integrin Antagonists		
XIIDRA	NP	MP
Ophthalmic Kinase Inhibitors		
RHOPRESSA	NP	MP
ROCKLATAN	NP	MP
Ophthalmic Local Anesthetics		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
AKTEN	NP		<i>loteprednol etabonate SUSP 0.5 %</i>	P	
ALCAINE (<i>Use proparacaine hcl</i>)	NP		MAXIDEX SUSP OP	P	QL(0.17 ML daily)
IHEEZO	NP	SP	MAXITROL OINT (<i>Use neomycin-polymy-dexameth</i>)	NP	
<i>proparacaine hcl</i>	NP		MAXITROL OINT (<i>Use neomycin-polymy-dexameth</i>)	NF	
<i>tetracaine hcl (ophth)</i>	NP		MAXITROL SUSP (<i>Use neomycin-polymy-dexameth</i>)	NF	
Ophthalmic Nerve Growth Factors			MAXITROL SUSP (<i>Use neomycin-polymy-dexameth</i>)	NP	
OXERVATE	NP	SP	<i>neomycin-polymy-dexameth OINT</i>	P	
Ophthalmic Steroids			<i>neomycin-polymy-dexameth SUSP</i>	P	
ALREX SUSP (<i>Use loteprednol etabonate</i>)	P		<i>neomycin-polymyxin-hc (ophth)</i>	P	
<i>bacitracin-poly-neomycin-hc</i>	P		PRED FORTE (<i>Use prednisolone acetate (ophth)</i>)	NP	
<i>dexamethasone sodium phosphate (ophth)</i>	P		PRED MILD	P	
DEXTENZA INST	NP	SP	<i>prednisolone acetate (ophth)</i>	P	
<i>difluprednate</i>	NP		PREDNISOLONE SODIUM PHOSPHATE	P	
DUREZOL (<i>Use difluprednate</i>)	NF		<i>sulfacetamide sod-prednisolone SOLN</i>	NP	
DUREZOL (<i>Use difluprednate</i>)	NP		TOBRADEX ST SUSP	NP	
EYSUVIS SUSP	NP		TOBRADEX OINT	NP	
FLAREX	P		TOBRADEX SUSP (<i>Use tobramycin-dexamethasone</i>)	NF	
<i>fluorometholone (ophth) SUSP</i>	P		TOBRADEX SUSP (<i>Use tobramycin-dexamethasone</i>)	NP	
FML FORTE SUSP	P		<i>tobramycin-dexamethasone SUSP</i>	P	
FML LIQUIFILM SUSP (<i>Use fluorometholone (ophth)</i>)	NP		ZYLET	NP	
INVELTYS SUSP	NP				
LOTEMAX SM GEL	NP				
LOTEMAX GEL (<i>Use loteprednol etabonate</i>)	NP				
LOTEMAX OINT	NP				
LOTEMAX SUSP (<i>Use loteprednol etabonate</i>)	NP				
<i>loteprednol etabonate GEL</i>	NP				

IL MHP Medicaid

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Ophthalmics - Misc.			MURO 128 OINT (<i>Use sodium chloride hypertonic</i>)	NF	
ACULAR (<i>Use ketorolac tromethamine (ophth)</i>)	NP		MURO 128 SOLN	P	
ACULAR LS (<i>Use ketorolac tromethamine (ophth)</i>)	NP		MURO 128 SOLN (<i>Use sodium chloride hypertonic</i>)	NF	
ACUVAIL	NP		NEVANAC	NP	
ALOMIDE	NP		<i>olopatadine hcl 0.1 %</i>	NP	RX/OTC
<i>azelastine hcl (ophth)</i>	P	QL(0.2 ML daily)	PATADAY (<i>Use olopatadine hcl</i>)	NF	RX/OTC
AZOPT (<i>Use brinzolamide</i>)	NP	MP	PROLENSA (<i>Use bromfenac sodium (ophth)</i>)	NP	
AZOPT (<i>Use brinzolamide</i>)	NF	MP	<i>sodium chloride hypertonic OINT</i>	P	
AZOPT (<i>Use brinzolamide</i>)	NF		<i>sodium chloride hypertonic SOLN</i>	P	
<i>bepotastine besilate</i>	NP		TRUSOPT (<i>Use dorzolamide hcl</i>)	NF	MP
BEPREVE (<i>Use bepotastine besilate</i>)	NP		ZERVIAE	NP	QL(3 EA daily)
<i>brinzolamide</i>	NP	MP	Prostaglandins - Ophthalmic		
<i>bromfenac sodium (ophth) 0.07 %, 0.09 %</i>	NP		<i>bimatoprost SOLN</i>	NP	MP
BROMSITE (<i>Use bromfenac sodium (ophth)</i>)	NP		IYUZEH SOLN	NP	
<i>cromolyn sodium (ophth)</i>	P		<i>latanoprost SOLN</i>	P	MP
CYSTADROPS	NP	SP; MP	LUMIGAN SOLN 0.01 %	NP	MP
CYSTARAN	NP	SP; MP	<i>tafluprost</i>	NP	MP
<i>diclofenac sodium (ophth)</i>	P		TRAVATAN Z SOLN (<i>Use travoprost</i>)	NP	MP
<i>dorzolamide hcl</i>	P	MP	TRAVATAN Z SOLN (<i>Use travoprost</i>)	NF	
<i>epinastine hcl (ophth)</i>	NP		<i>travoprost SOLN</i>	NP	MP
FLUORESCEIN SODIUM/BENOXINATE	NP		VYZULTA	NP	MP
<i>flurbiprofen sodium</i>	P		XALATAN SOLN (<i>Use latanoprost</i>)	NF	
GLOSTRIPS STRP 1 MG	NP		XALATAN SOLN (<i>Use latanoprost</i>)	NP	MP
ILEVRO	NP		XELPROS EMUL	NP	MP
<i>ketorolac tromethamine (ophth)</i>	P		ZIOPTAN (<i>Use tafluprost</i>)	NP	MP
			ZIOPTAN (<i>Use tafluprost</i>)	NF	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
OTIC AGENTS - Drugs to Treat the Ear			OTIC AGENTS - Drugs to Treat the Ear		
Otic Agents - Miscellaneous			Otic Agents - Miscellaneous		
<i>acetic acid (otic)</i>	P		MICRHOGAM ULTRA-FILTERED PLUS SOSY IM	P	QL(2 EA per 270 day(s) retail); SP
<i>carbamide peroxide (otic) 6.5 %</i>	P		RHOGAM ULTRA-FILTERED PLUS SOSY IM	P	QL(2 EA per 270 day(s) retail); SP
DEBROX 6.5 % (<i>Use carbamide peroxide (otic)</i>)	NF		RHOPHYLAC SOSY IJ	P	QL(4 ML per 270 day(s) retail); SP
Otic Anti-infectives			Otic Anti-infectives		
<i>ciprofloxacin hcl (otic)</i>	NP		WINRHO SDF SOLN 1500 UNIT/1.3ML	P	QL(2.6 ML per 270 day(s) retail); SP
<i>ofloxacin (otic)</i>	P		WINRHO SDF SOLN 15000 UNIT/13ML	P	QL(26 ML per 270 day(s) retail); SP
Otic Combinations			Otic Combinations		
CIPRODEX (<i>Use ciprofloxacin-dexamethasone</i>)	P		WINRHO SDF SOLN 5000 UNIT/4.4ML	P	QL(8.8 ML per 270 day(s) retail); SP
<i>ciprofloxacin-dexamethasone</i>	P		WINRHO SDF SOLN 2500 UNIT/2.2ML	P	QL(4.4 ML per 270 day(s) retail); SP
<i>ciprofloxacin-fluocinolone acetonide</i>	NP		PENICILLINS - Drugs to Treat Bacterial Infections		
CORTISPORIN-TC	NP		Aminopenicillins		
<i>neomycin-polymyxin-hc (otic) SOLN</i>	P		<i>amoxicillin CAPS PO</i>	P	
<i>neomycin-polymyxin-hc (otic) SUSP</i>	P		<i>amoxicillin CHEW PO 125 MG, 250 MG</i>	P	
Otic Steroids			<i>amoxicillin SUSR PO</i>	P	
DERMOTIC (<i>Use fluocinolone acetonide (otic)</i>)	NP		AMOXICILLIN SUSR PO (<i>Use amoxicillin</i>)	NF	
<i>fluocinolone acetonide (otic)</i>	NP		<i>amoxicillin TABS PO</i>	P	
<i>hydrocortisone w/acetic acid</i>	NP		<i>ampicillin CAPS PO 500 MG</i>	P	QL(4 EA daily)
PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System			Natural Penicillins		
Immune Serums			<i>penicillin v potassium SOLR PO</i>	P	
HYPERRHO S/D SOSY IM	P	QL(2 EA per 270 day(s) retail); SP	<i>penicillin v potassium TABS PO</i>	P	
			Penicillin Combinations		
			<i>amoxicillin & pot clavulanate CHEW PO</i>	P	QL(30 EA per fill retail)
			<i>amoxicillin & pot clavulanate SUSR PO</i>	P	

Drug Name	Drug Tier	Requirements/Limits
<i>amoxicillin & pot clavulanate TABS PO 125 MG-250 MG, 125 MG-875 MG</i>	P	QL(30 EA per fill retail)
<i>amoxicillin & pot clavulanate TABS PO 125 MG-500 MG</i>	P	QL(42 EA per fill retail)
<i>amoxicillin & pot clavulanate TB12 PO</i>	NP	
AUGMENTIN ES-600 SUSR PO (Use <i>amoxicillin & pot clavulanate</i>)	NP	
AUGMENTIN ES-600 SUSR PO (Use <i>amoxicillin & pot clavulanate</i>)	NF	
AUGMENTIN SUSR PO 31.25 MG/5ML-125 MG/5ML	P	
AUGMENTIN TABS PO 125 MG-500 MG (Use <i>amoxicillin & pot clavulanate</i>)	NF	QL(42 EA per fill retail)
Penicillinase-Resistant Penicillins		
<i>dicloxacillin sodium PO</i>	P	
PHARMACEUTICAL ADJUVANTS		
Liquid Vehicles		
STERILE WATER FOR INJECTION IJ	P	
<i>water for injection, sterile IJ</i>	P	
Pharmaceutical Excipients		
METHYLCELLULOSE POWD	P	RX/OTC
PROGESTINS - Hormone Replacement/Modifying Drugs		
Progestins		
AYGESTIN TABS PO (Use <i>norethindrone acetate</i>)	NP	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/Limits
<i>medroxyprogesterone acetate PO 2.5 MG, 5 MG, 10 MG</i>	P	
<i>megestrol acetate (appetite) PO</i>	NP	MP
<i>norethindrone acetate TABS PO</i>	NP	QL(1 EA daily)
<i>progesterone CAPS PO</i>	P	QL(2 EA daily)
<i>progesterone OIL</i>	P	QL(0.67 ML daily)
PROMETRIUM CAPS PO (Use <i>progesterone</i>)	NP	QL(2 EA daily)
PROMETRIUM CAPS PO 100 MG (Use <i>progesterone</i>)	NF	QL(2 EA daily)
PROVERA PO 5 MG, 10 MG (Use <i>medroxyprogesterone acetate</i>)	NP	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions		
Agents for Chemical Dependency		
<i>acamprosate calcium PO</i>	P	
<i>disulfiram PO</i>	P	
LUCEMYRA (Use <i>lofexidine hcl</i>)	P	
Anti-Cataplectic Agents		
SODIUM OXYBATE SOLN PO	NP	SP; MP
XYREM SOLN PO	NP	SP; MP
XYWAV	NP	SP; MP
Antidementia Agents		
ADLARITY PTWK	NP	
ADUHELM	NP	SP; MP
ARICEPT TABS PO 23 MG (Use <i>donepezil hydrochloride</i>)	NP	MP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ARICEPT TABS PO 5 MG, 10 MG (Use donepezil hydrochloride)	NP	QL(2 EA daily); MP	RAZADYNE ER CP24 PO (Use galantamine hydrobromide)	NF	QL(2 EA daily); MP
donepezil hydrochloride TABS PO 5 MG, 10 MG	P	QL(2 EA daily); MP	rivastigmine	NP	
donepezil hydrochloride TABS PO 23 MG	P	MP	rivastigmine tartrate CAPS PO	NP	QL(2 EA daily); MP
donepezil hydrochloride TBDP PO	P	MP	Combination Psychotherapeutics		
EXELON (Use rivastigmine)	NP		chlordiazepoxide-amitriptyline PO	P	
galantamine hydrobromide CP24 PO	NP	QL(2 EA daily); MP	LYBALVI	NP	
galantamine hydrobromide SOLN PO	NP	QL(2 ML daily); MP	olanzapine-fluoxetine hcl PO	NP	
galantamine hydrobromide TABS PO	NP	QL(2 EA daily); MP	perphenazine-amitriptyline PO	P	QL(4 EA daily)
LEQEMBI	NP	SP	SYMBYAX PO 25 MG-3 MG, 25 MG-6 MG (Use olanzapine-fluoxetine hcl)	NP	
memantine hcl CP24 PO	NP	MP	Fibromyalgia Agents		
memantine hcl SOLN PO 2 MG/ML	NP	MP	SAVELLA TITRATION PACK MISC	NP	
memantine hcl SOLN PO 2 MG/ML	NP	MP	SAVELLA TABS PO	NP	
memantine hcl TABS PO	NP		Movement Disorder Drug Therapy		
memantine hcl TABS PO	P	QL(2 EA daily); MP	AUSTEDO XR PATIENT TITRATION TEPK	P	SP; PA
NAMENDA TITRATION PAK TABS PO (Use memantine hcl)	NP		AUSTEDO XR TB24 6 MG, 12 MG, 24 MG	P	SP; PA
NAMENDA XR CP24 PO 7 MG, 14 MG, 28 MG (Use memantine hcl)	NF	MP	AUSTEDO TABS	P	SP; PA
NAMENDA XR CP24 PO 14 MG, 21 MG, 28 MG (Use memantine hcl)	NP	MP	INGREZZA CAPS	P	SP; PA
NAMENDA TABS PO 10 MG (Use memantine hcl)	NF	QL(2 EA daily); MP	INGREZZA CPPK	P	SP; PA
NAMENDA TABS PO (Use memantine hcl)	NP	QL(2 EA daily); MP	tetrabenazine PO	NP	SP
NAMZARIC C4PK	NP		XENAZINE PO (Use tetrabenazine)	NP	SP
NAMZARIC CP24	NP		Multiple Sclerosis Agents		
			AMPYRA (Use dalfampridine)	NP	SP
			AUBAGIO PO (Use teriflunomide)	NF	SP
			AUBAGIO PO (Use teriflunomide)	NP	SP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
AVONEX PEN AJKT	NP	SP	PLEGRIDY STARTER PACK SOAJ	NP	SP
AVONEX PREFILLED PSKT	NP	QL(0.034 EA daily); SP	PLEGRIDY STARTER PACK SOSY SC	NP	SP
BAFIERTAM	NP	SP	PLEGRIDY SOAJ	NP	SP; MP
BETASERON KIT	P	SP	PLEGRIDY SOSY IM	NP	SP; MP
BRIUMVI	NP	SP	PONVORY STARTER PACK TBPK	NP	SP
COPAXONE SOSY 40 MG/ML (Use <i>glatiramer acetate</i>)	NF	SP; MP	PONVORY TABS	NP	SP
COPAXONE SOSY (Use <i>glatiramer acetate</i>)	P	SP; MP	REBIF REBIDOSE TITRATION PACK SOAJ	P	SP
<i>dalfampridine</i>	NP	SP	REBIF REBIDOSE SOAJ	P	SP; MP
<i>dimethyl fumarate CDPK</i>	P	SP	REBIF TITRATION PACK SOSY	P	SP
<i>dimethyl fumarate CPDR</i>	P	QL(2 EA daily); SP	REBIF SOSY	P	SP; MP
EXTAVIA KIT	NP	SP	TASCENSO ODT	NP	SP
<i> fingolimod hcl PO</i>	NP	SP	TECFIDERA CDPK (Use <i>dimethyl fumarate</i>)	P	SP
GILENYA PO 0.25 MG	NP	SP	TECFIDERA CPDR (Use <i>dimethyl fumarate</i>)	P	QL(2 EA daily); SP
GILENYA PO (Use <i> fingolimod hcl</i>)	P	SP; PA	<i>teriflunomide PO</i>	NP	SP
<i>glatiramer acetate SOSY</i>	NP	SP; MP	TYSABRI	NP	SP; MP
KESIMPTA	NP	SP; MP	VUMERITY PO	NP	SP
LEMTRADA	NP	SP; MP	ZEPOSIA 7-DAY STARTER PACK CPPK	NP	SP
MAVENCLAD (10 TABS) PO	NP	SP	ZEPOSIA STARTER KIT CPPK	NP	SP
MAVENCLAD (4 TABS) PO	NP	SP	ZEPOSIA CAPS	NP	SP
MAVENCLAD (5 TABS) PO	NP	SP	Postherpetic Neuralgia (PHN)/Neuropathic Pain Agents		
MAVENCLAD (6 TABS) PO	NP	SP	<i>gabapentin (once-daily) TABS PO</i>	NP	
MAVENCLAD (7 TABS) PO	NP	SP	GRALISE TABS PO 450 MG, 750 MG, 900 MG	NP	
MAVENCLAD (8 TABS) PO	NP	SP	GRALISE TABS PO (Use <i>gabapentin (once-daily)</i>)	NP	
MAVENCLAD (9 TABS) PO	NP	SP	LYRICA CR (Use <i>pregabalin (once-daily)</i>)	NP	MP
MAYZENT STARTER PACK TBPK 0.25 MG	NP	SP	LYRICA CR (Use <i>pregabalin (once-daily)</i>)	NF	
MAYZENT TABS PO	NP	SP			
OCREVUS	NP	SP; MP			

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Drug Name	Drug Tier	Requirements/Limits
<i>pregabalin (once-daily)</i>	NP	MP
Premenstrual Dysphoric Disorder (PMDD) Agents		
<i>fluoxetine hcl (pmdd) TABS PO 10 MG</i>	NP	QL(1 EA daily); MP
<i>fluoxetine hcl (pmdd) TABS PO 20 MG</i>	NP	QL(2 EA daily)
Pseudobulbar Affect (PBA) Agents		
NUEDEXTA	NP	
Psychotherapeutic and Neurological Agents - Misc.		
<i>ergoloid mesylates TABS PO</i>	P	
<i>pimozide PO</i>	P	
Restless Leg Syndrome (RLS) Agents		
HORIZANT PO	NP	
Smoking Deterrents		
<i>bupropion hcl (smoking deterrent) PO</i>	P	QL(2 EA daily); 180 day(s) max supply per 365 day(s) retail
CHANTIX STARTING MONTH PAK TBPK (Use <i>varenicline tartrate</i>)	P	180 day(s) max supply per 365 day(s) retail
NICORETTE MINI LOZG 2 MG (Use <i>nicotine polacrilex</i>)	NF	QL(12 EA daily); 180 day(s) max supply per 365 day(s) retail
NICORETTE MINI LOZG 4 MG (Use <i>nicotine polacrilex</i>)	NF	
NICORETTE STARTER KIT GUM 2 MG (Use <i>nicotine polacrilex</i>)	NF	QL(11.2 EA daily); 180 day(s) max supply per 365 day(s) retail
NICORETTE GUM (Use <i>nicotine polacrilex</i>)	NF	QL(11.2 EA daily); 180 day(s) max supply per 365 day(s) retail

Drug Name	Drug Tier	Requirements/Limits
NICORETTE LOZG 2 MG (Use <i>nicotine polacrilex</i>)	NF	QL(12 EA daily); 180 day(s) max supply per 365 day(s) retail
<i>nicotine polacrilex GUM</i>	P	QL(11.2 EA daily); 180 day(s) max supply per 365 day(s) retail
<i>nicotine polacrilex LOZG</i>	P	QL(12 EA daily); 180 day(s) max supply per 365 day(s) retail
NICOTINE KIT	P	QL(56 EA per fill retail)
<i>nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR</i>	P	QL(1 EA daily); 180 day(s) max supply per 365 day(s) retail
NICOTROL NS SOLN	P	
NICOTROL INHA	P	
<i>varenicline tartrate TABS PO</i>	P	QL(2 EA daily); 180 day(s) max supply per 365 day(s) retail
<i>varenicline tartrate TBPK</i>	P	180 day(s) max supply per 365 day(s) retail
Transthyretin Amyloidosis Agents		
AMVUTTRA	NP	SP
TEGSEDI	NP	SP; MP
WAINUA	NP	SP
Vasomotor Symptom Agents		
<i>paroxetine mesylate (vasomotor) PO</i>	NP	
RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions		
Cystic Fibrosis Agents		
BRONCHITOL	NP	SP
BRONCHITOL TOLERANCE TEST	NP	SP

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
KALYDECO PACK	NP	SP	<i>doxycycline (monohydrate) CAPS PO</i>	P	
KALYDECO TABS	NP	SP	<i>doxycycline (monohydrate) SUSR PO</i>	P	
ORKAMBI PACK	NP	SP	<i>doxycycline (monohydrate) TABS PO</i>	P	
ORKAMBI TABS	NP	SP	<i>doxycycline hyclate CAPS PO</i>	P	
PULMOZYME	P	QL(2.5 ML daily); SP; MP	<i>doxycycline hyclate TABS PO</i>	P	
SYMDEKO	NP	SP	<i>doxycycline hyclate TBEC PO</i>	NP	
TRIKAFTA TBPK	NP	SP	<i>minocycline hcl CAPS PO</i>	P	
TRIKAFTA THPK	NP	SP	<i>minocycline hcl TABS PO</i>	P	
Pulmonary Fibrosis Agents			<i>minocycline hcl TB24 PO</i>	NP	
ESBRIET CAPS (<i>Use pirfenidone</i>)	NF	SP	MINOLIRA TB24 PO	NP	
ESBRIET CAPS (<i>Use pirfenidone</i>)	NP	SP	SOLODYN TB24 PO 55 MG, 65 MG, 80 MG, 105 MG, 115 MG (<i>Use minocycline hcl</i>)	NP	
ESBRIET TABS PO (<i>Use pirfenidone</i>)	NP	SP	<i>tetracycline hcl CAPS PO</i>	P	
OFEV	NP	SP	VIBRAMYCIN PO	P	
<i>pirfenidone CAPS</i>	NP	SP	VIBRAMYCIN CAPS PO (<i>Use doxycycline hyclate</i>)	NP	
<i>pirfenidone TABS PO</i>	NP	SP	VIBRAMYCIN SUSR PO (<i>Use doxycycline (monohydrate)</i>)	NF	
SULFONAMIDES - Drugs to Treat Bacterial Infections			THYROID AGENTS - Drugs to Regulate Thyroid Hormones		
Sulfonamides			Antithyroid Agents		
<i>sulfadiazine TABS PO</i>	P		<i>methimazole TABS PO</i>	P	MP
TETRACYCLINES - Drugs to Treat Bacterial Infections			<i>methimazole TABS PO</i>	P	MP
Aminomethylcyclines			<i>propylthiouracil PO</i>	P	MP
NUZYRA TABS PO	NP	QL(6 EA per 30 day(s) retail)	<i>propylthiouracil PO</i>	P	MP
Tetracyclines			Thyroid Hormones		
<i>demeclocycline hcl TABS PO 300 MG</i>	P	QL(2 EA daily)	ADTHYZA TABS PO 16.25 MG, 32.5 MG, 65 MG, 97.5 MG, 130 MG	P	
<i>demeclocycline hcl TABS PO 150 MG</i>	P	QL(4 EA daily)			
DORYX MPC TBEC PO	NP				
DORYX TBEC PO 50 MG, 80 MG, 200 MG (<i>Use doxycycline hyclate</i>)	NP				

Drug Name	Drug Tier	Requirements/Limits
ADTHYZA TABS PO 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	P	MP
ARMOUR THYROID TABS PO	P	MP
CYTOMEL TABS PO (Use liothyronine sodium)	NP	MP
ERMEZA SOLN PO	NP	
levothyroxine sodium CAPS PO	NP	MP
levothyroxine sodium TABS PO	P	MP
levothyroxine sodium TABS PO	P	MP
liothyronine sodium TABS PO	P	MP
NIVA THYROID TABS PO	P	MP
NP THYROID TABS PO	P	MP
SYNTHROID TABS PO (Use levothyroxine sodium)	NP	MP
THYQUIDITY SOLN PO	NP	MP
THYROID TABS PO 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	P	MP
TIROSINT CAPS PO 37.5 MCG, 44 MCG, 62.5 MCG	NP	
TIROSINT CAPS PO 13 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG, 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG (Use levothyroxine sodium)	NP	MP
TIROSINT-SOL SOLN PO	NP	MP
TOXOIDS		
Toxoid Combinations		
ADACEL SUSP	P	
BOOSTRIX SUSP	P	
BOOSTRIX SUSY	P	
DAPTACEL	P	

Drug Name	Drug Tier	Requirements/Limits
DIPHThERIA-TETANUS TOXOIDS DT SUSP	P	
INFANRIX	P	
KINRIX SUSY	P	
PEDIARIX SUSY	P	
PENTACEL	P	
QUADRACEL SUSP	P	
QUADRACEL SUSY	P	
TDVAX SUSP	P	
TENIVAC INJ	P	
TETANUS-DIPHThERIA TOXOIDS TD SUSP	P	
VAXELIS SUSP	P	
VAXELIS SUSY	P	
ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions		
Antispasmodics		
BELLADONNA ALKALOIDS-OPIUM PR	P	
BENTYL SOLN IM (Use dicyclomine hcl)	NF	
chlordiazepoxide hcl-clidinium bromide PO	NP	
CUVPOSA SOLN PO (Use glycopyrrolate)	NP	MP
DARTISLA ODT TBDP	NP	
dicyclomine hcl CAPS PO	P	
dicyclomine hcl SOLN PO	P	MP
dicyclomine hcl TABS PO	P	
GLYCATE TABS PO	NP	
glycopyrrolate SOLN PO 1 MG/5ML	P	MP
glycopyrrolate TABS PO 1 MG, 2 MG	P	QL(4 EA daily)
hyoscyamine sulfate ELIX PO	P	MP
hyoscyamine sulfate SOLN PO 0.125 MG/ML	P	MP

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>hyoscyamine sulfate</i> <i>SUBL 0.125 MG</i>	P		CARAFATE SUSP PO <i>(Use sucralfate)</i>	P	MP
<i>hyoscyamine sulfate</i> <i>TABS PO 0.125 MG</i>	P		CARAFATE TABS PO <i>(Use sucralfate)</i>	NP	QL(4 EA daily)
<i>hyoscyamine sulfate</i> <i>TB12 PO 0.375 MG</i>	P	QL(4 EA daily)	<i>sucralfate SUSP PO</i>	P	MP
<i>hyoscyamine sulfate</i> <i>TBDP PO 0.125 MG</i>	P		<i>sucralfate TABS PO</i>	P	QL(4 EA daily)
LEVSIN/SL SUBL <i>(Use hyoscyamine sulfate)</i>	NP		Proton Pump Inhibitors		
LEVSIN SOLN IJ 0.5 MG/ML <i>(Use hyoscyamine sulfate)</i>	NF		ACIPHEX TBEC PO <i>(Use rabeprazole sodium)</i>	NF	QL(1 EA daily); 6 max fill(s) per 365 day(s) retail
LEVSIN TABS PO <i>(Use hyoscyamine sulfate)</i>	NP		ACIPHEX TBEC PO <i>(Use rabeprazole sodium)</i>	NP	QL(1 EA daily); 6 max fill(s) per 365 day(s) retail
LIBRAX PO <i>(Use chlordiazepoxide hcl-clidinium bromide)</i>	NP		DEXILANT PO 30 MG <i>(Use dexlansoprazole)</i>	NP	QL(2 EA daily); 6 max fill(s) per 365 day(s) retail
<i>methscopolamine bromide</i> <i>PO</i>	NP		DEXILANT PO 60 MG <i>(Use dexlansoprazole)</i>	NP	QL(1 EA daily); 6 max fill(s) per 365 day(s) retail
ROBINUL-FORTE TABS PO <i>(Use glycopyrrolate)</i>	NP	QL(4 EA daily)	<i>dexlansoprazole PO 30 MG</i>	NP	QL(2 EA daily); 6 max fill(s) per 365 day(s) retail
ROBINUL TABS PO <i>(Use glycopyrrolate)</i>	NP	QL(4 EA daily)	<i>dexlansoprazole PO 60 MG</i>	NP	QL(1 EA daily); 6 max fill(s) per 365 day(s) retail
H-2 Antagonists			<i>esomeprazole magnesium</i> <i>CPDR PO</i>	NP	QL(1 EA daily); 6 max fill(s) per 365 day(s) retail; RX/OTC
<i>cimetidine</i> TABS PO	P	RX/OTC	<i>esomeprazole magnesium</i> <i>PACK</i>	NP	QL(1 EA daily); 6 max fill(s) per 365 day(s) retail
<i>famotidine</i> SUSR PO	P		FIRST PANTOPRAZOLE SUSP	NP	
<i>famotidine</i> TABS PO 20 MG, 40 MG	P	RX/OTC	<i>lansoprazole CPDR PO</i>	NP	QL(1 EA daily); 6 max fill(s) per 365 day(s) retail
<i>nizatidine</i> CAPS PO	P				
PEPCID AC MAXIMUM STRENGTH TABS PO <i>(Use famotidine)</i>	NF	RX/OTC			
PEPCID AC TABS PO <i>(Use famotidine)</i>	NF				
PEPCID TABS PO <i>(Use famotidine)</i>	NP	RX/OTC			
TAGAMET HB 200 TABS PO <i>(Use cimetidine)</i>	NF	RX/OTC			
Misc. Anti-Ulcer					

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>lansoprazole TBDD</i>	P	QL(2 EA daily); 6 max fill(s) per 365 day(s) retail; RX/OTC	PREVACID CPDR PO 30 MG (<i>Use lansoprazole</i>)	NP	QL(1 EA daily); 6 max fill(s) per 365 day(s) retail
NEXIUM 24HR CLEAR MINIS CPDR PO (<i>Use esomeprazole magnesium</i>)	NF	QL(1 EA daily); 6 max fill(s) per 365 day(s) retail; RX/OTC	PRILOSEC PACK PO	NP	QL(4 EA daily); 6 max fill(s) per 365 day(s) retail
NEXIUM 24HR CPDR PO (<i>Use esomeprazole magnesium</i>)	NF	QL(1 EA daily); 6 max fill(s) per 365 day(s) retail; RX/OTC	PROTONIX PACK (<i>Use pantoprazole sodium</i>)	NP	QL(4 EA daily); 6 max fill(s) per 365 day(s) retail
NEXIUM CPDR PO 40 MG (<i>Use esomeprazole magnesium</i>)	NF	QL(1 EA daily); 6 max fill(s) per 365 day(s) retail	PROTONIX TBEC PO (<i>Use pantoprazole sodium</i>)	NP	QL(2 EA daily); 6 max fill(s) per 365 day(s) retail
NEXIUM CPDR PO (<i>Use esomeprazole magnesium</i>)	NP	QL(1 EA daily); 6 max fill(s) per 365 day(s) retail; RX/OTC	<i>rabeprazole sodium TBEC PO</i>	NP	QL(1 EA daily); 6 max fill(s) per 365 day(s) retail
NEXIUM PACK (<i>Use esomeprazole magnesium</i>)	NP	QL(1 EA daily); 6 max fill(s) per 365 day(s) retail	Ulcer Drugs - Prostaglandins		
NEXIUM PACK	NP	QL(2 EA daily); 6 max fill(s) per 365 day(s) retail	CYTOTEC PO (<i>Use misoprostol</i>)	NP	
<i>omeprazole CPDR PO</i>	P	QL(2 EA daily); 6 max fill(s) per 365 day(s) retail	<i>misoprostol PO</i>	P	
<i>pantoprazole sodium PACK</i>	NP	QL(4 EA daily); 6 max fill(s) per 365 day(s) retail	Ulcer Therapy Combinations		
<i>pantoprazole sodium TBEC PO</i>	P	QL(2 EA daily); 6 max fill(s) per 365 day(s) retail	<i>amoxicillin-clarithromycin w/ lansoprazole THPK</i>	NP	
PREVACID 24HR CPDR PO (<i>Use lansoprazole</i>)	NF	QL(1 EA daily); 6 max fill(s) per 365 day(s) retail; RX/OTC	<i>bismuth subcitrate potassium-metronidazole- tetracycline PO</i>	NP	
PREVACID SOLUTAB TBDD (<i>Use lansoprazole</i>)	NP	QL(2 EA daily); 6 max fill(s) per 365 day(s) retail; RX/OTC	KONVOMEPEP SUSR	NP	
			<i>omeprazole-sodium bicarbonate CAPS PO</i>	NP	RX/OTC
			<i>omeprazole-sodium bicarbonate PACK PO</i>	NP	
			PYLERA PO (<i>Use bismuth subcitrate potassium-metronidazole- tetracycline</i>)	NP	
			PYLERA PO (<i>Use bismuth subcitrate potassium-metronidazole- tetracycline</i>)	NF	
			TALICIA	NP	QL(3 EA daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ZEGERID OTC CAPS PO (Use omeprazole-sodium bicarbonate)	NF	RX/OTC	<i>solifenacin succinate TABS PO</i>	P	MP
ZEGERID CAPS PO (Use omeprazole-sodium bicarbonate)	NP	RX/OTC	<i>tolterodine tartrate CP24 PO</i>	NP	MP
ZEGERID PACK PO (Use omeprazole-sodium bicarbonate)	NP		<i>tolterodine tartrate CP24 PO</i>	NP	MP
ZEGERID PACK PO 1680 MG-40 MG (Use omeprazole-sodium bicarbonate)	NF		<i>tolterodine tartrate TABS PO</i>	NP	MP
URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms			<i>tolterodine tartrate TABS PO 2 MG</i>	NP	MP
Urinary Antispasmodic - Antimuscarinics (Anticholinergic)			TOVIAZ (Use fesoterodine fumarate)	NP	
<i>darifenacin hydrobromide PO</i>	NP	MP	<i>tropium chloride CP24 PO</i>	NP	MP
DETROL LA CP24 PO 4 MG (Use tolterodine tartrate)	NF		<i>tropium chloride TABS PO</i>	NP	MP
DETROL LA CP24 PO (Use tolterodine tartrate)	NP	MP	<i>tropium chloride TABS PO</i>	NP	MP
DETROL TABS PO (Use tolterodine tartrate)	NF		VESICARE LS SUSP	NP	MP
DETROL TABS PO (Use tolterodine tartrate)	NP	MP	VESICARE TABS PO (Use solifenacin succinate)	NP	MP
DITROPAN XL TB24 PO 5 MG, 10 MG (Use oxybutynin chloride)	NF	QL(2 EA daily); MP	Urinary Antispasmodics - Beta-3 Adrenergic Agonists		
<i>fesoterodine fumarate</i>	NP		GEMTESA	NP	
GELNIQUE GEL 10 %	NP	MP	<i>mirabegron TB24 PO</i>	P	
<i>oxybutynin chloride SOLN</i>	P		MYRBETRIQ SRER	NP	
<i>oxybutynin chloride TABS PO 5 MG</i>	P	QL(4 EA daily); MP	MYRBETRIQ TB24 PO (Use mirabegron)	NP	
<i>oxybutynin chloride TABS PO 2.5 MG</i>	P		Urinary Antispasmodics - Cholinergic Agonists		
<i>oxybutynin chloride TB24 PO</i>	P	QL(2 EA daily); MP	<i>bethanechol chloride PO</i>	P	MP
OXYTROL PTTW	NP	RX/OTC	<i>bethanechol chloride PO</i>	P	MP
			Urinary Antispasmodics - Direct Muscle Relaxants		
			<i>flavoxate hcl PO</i>	NP	MP
			VACCINES		
			Bacterial Vaccines		
			ACTHIB SOLR IM	P	
			BCG VACCINE	P	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
BEXSERO	P		DENGVAXIA	P	
BIOTHRAX	P		ENGERIX-B SUSP 20 MCG/ML	P	3 max fill(s) per 999 day(s) retail
CAPVAXIVE	P		ENGERIX-B SUSY	P	3 max fill(s) per 999 day(s) retail
HIBERIX SOLR IJ	P		FLUAD	P	
MENACTRA	P		FLUAD QUADRIVALENT	P	
MENQUADFI	P		FLUARIX QUADRIVALENT SUSY	P	
MENVEO SOLN	P		FLUARIX SUSY	P	
MENVEO SOLR	P		FLUBLOK QUADRIVALENT	P	
PEDVAX HIB SUSP	P		FLUBLOK SOSY	P	
PENBRAYA	P		FLUCELVAX QUADRIVALENT SUSP	P	
PNEUMOVAX 23 SOLN	P		FLUCELVAX QUADRIVALENT SUSY	P	
PNEUMOVAX 23 SOSY	P		FLUCELVAX SUSP	P	
PREVNAR 13	P		FLUCELVAX SUSY	P	
PREVNAR 20	P		FLULAVAL QUADRIVALENT SUSY	P	
TRUMENBA	P		FLULAVAL SUSY	P	
TYPHIM VI SOLN	P		FLUMIST	P	
TYPHIM VI SOSY	P		FLUMIST QUADRIVALENT	P	
VAXCHORA	P		FLUZONE HIGH-DOSE QUADRIVALENT	P	
VAXNEUVANCE	P		FLUZONE HIGH-DOSE SUSY	P	
VIVOTIF PO	P		FLUZONE QUADRIVALENT SUSP	P	
Viral Vaccines			FLUZONE QUADRIVALENT SUSY	P	
ABRYSVO	P	AL(At least 60 yrs old)	FLUZONE SUSP	P	
ACAM2000	P		FLUZONE SUSY	P	
AFLURIA PRESERVATIVE FREE SUSY	P		GARDASIL 9 SUSP	P	3 max fill(s) per 999 day(s) retail; AL(Up to 45 yrs old)
AFLURIA QUADRIVALENT SUSP	P				
AFLURIA QUADRIVALENT SUSY 0.5 ML	P				
AFLURIA SUSP	P				
AREXVY	P	AL(At least 60 yrs old)			
AUDENZ EMUL	P				
AUDENZ PRSY	P				
COMIRNATY SUSP	P				
COMIRNATY SUSY	P				

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
GARDASIL 9 SUSY	P	3 max fill(s) per 999 day(s) retail; AL(Up to 45 yrs old)	PFIZER COVID-19 VAC-TRIS 5-11Y SUSP	P	
HAVRIX	P		PFIZER COVID-19 VAC-TRIS 6M-4Y SUSP	P	
HEPLISAV-B SOSY	P	3 max fill(s) per 999 day(s) retail	PFIZER COVID-19 VAC-TRIS 6M-4Y SUSP	P	
IMOVAX RABIES SUSR	P		PFIZER-BIONT COVID-19 VAC-TRIS SUSP	P	
IPOL	P		PFIZER-BIONTECH COVID-19 VACC SUSP	P	
IXIARO	P		PREHEVBRIO	P	3 max fill(s) per 999 day(s) retail
JANSSEN COVID-19 VACCINE	P		PRIORIX SUSR	P	
JYNNEOS	P		PROQUAD SUSR	P	
M-M-R II SOLR	P		RABAVERT	P	
MODERNA COVID-19 BIVAL 6M-5Y	P		RECOMBIVAX HB SUSP	P	3 max fill(s) per 999 day(s) retail
MODERNA COVID-19 BIVALENT	P		RECOMBIVAX HB SUSY	P	3 max fill(s) per 999 day(s) retail
MODERNA COVID-19 VAC (BOOSTER) SUSP	P		ROTARIX SUSP	P	
MODERNA COVID-19 VAC 6M-11Y SUSP	P		ROTARIX SUSR PO	P	
MODERNA COVID-19 VAC 6M-11Y SUSY	P		ROTATEQ SOLN PO	P	
MODERNA COVID-19 VACC 6M-5Y SUSP	P		SHINGRIX	P	2 max fill(s) per 999 day(s) retail
MODERNA COVID-19 VACCINE SUSP	P		SPIKEVAX COVID-19 VACCINE SUSP	P	
NOVAVAX COVID-19 VACCINE SUSP	P		SPIKEVAX SUSP	P	
NOVAVAX COVID-19 VACCINE SUSY	P		SPIKEVAX SUSY	P	
PFIZER COVID-19 BIVAL 6MO-4YR	P		STAMARIL SUSR	P	
PFIZER COVID-19 VAC BIVAL 5-11	P		TICOVAC	P	
PFIZER COVID-19 VAC BIVALENT	P		TWINRIX SUSY	P	
PFIZER COVID-19 VAC-TRIS 5-11Y SUSP	P		VAQTA	P	
			VARIVAX SUSR	P	2 max fill(s) per 999 day(s) retail
			YF-VAX INJ	P	
VAGINAL AND RELATED PRODUCTS					
Miscellaneous Vaginal Products					

Drug Name	Drug Tier	Requirements/Limits
INTRAROSA	NP	
TRIMO-SAN	NP	
Vaginal Anti-infectives		
CLEOCIN CREA (<i>Use clindamycin phosphate vaginal</i>)	NP	
CLEOCIN SUPP	P	
<i>clindamycin phosphate vaginal CREA</i>	P	
CLINDESSE	NP	
GYNAZOLE-1	NP	
<i>metronidazole vaginal</i>	P	
<i>miconazole nitrate vaginal SUPP 200 MG</i>	P	
NUVESSA	NP	
<i>terconazole vaginal CREA</i>	P	
<i>terconazole vaginal SUPP</i>	P	
VANDAZOLE	NP	
XACIATO GEL	NP	
Vaginal Contraceptive - pH Modulators		
PHEXXI	P	
Vaginal Estrogens		
ESTRACE CREA (<i>Use estradiol vaginal</i>)	NP	MP
<i>estradiol vaginal CREA</i>	P	MP
<i>estradiol vaginal TABS</i>	NP	MP
ESTRING RING 2 MG	NP	MP
ESTRING RING 7.5 MCG/24HR	NP	MP
FEMRING	NP	MP
IMVEXXY MAINTENANCE PACK INST	NP	MP
IMVEXXY STARTER PACK INST	NP	
PREMARIN	P	MP
VAGIFEM TABS (<i>Use estradiol vaginal</i>)	NP	MP

Drug Name	Drug Tier	Requirements/Limits
Vaginal Progestins		
CRINONE GEL	NP	QL(1.125 GM daily)
ENDOMETRIN INST	P	
VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions		
Anaphylaxis Therapy Agents		
AUVI-Q SOAJ 0.15 MG/0.15ML, 0.3 MG/0.3ML	P	QL(2 EA per fill retail); 1 max fill(s) per 180 day(s) retail
AUVI-Q SOAJ 0.1 MG/0.1ML	P	
<i>epinephrine (anaphylaxis) SOAJ</i>	P	QL(2 EA per fill retail); 1 max fill(s) per 180 day(s) retail
EPIPEN 2-PAK SOAJ (<i>Use epinephrine (anaphylaxis)</i>)	NP	QL(2 EA per fill retail); 1 max fill(s) per 180 day(s) retail
EPIPEN JR 2-PAK SOAJ (<i>Use epinephrine (anaphylaxis)</i>)	NP	QL(2 EA per fill retail); 1 max fill(s) per 180 day(s) retail
Neurogenic Orthostatic Hypotension (NOH) - Agents		
<i>droxidopa</i>	NP	SP
NORTHERA (<i>Use droxidopa</i>)	NP	SP
Vasopressors		
<i>midodrine hcl PO</i>	P	
VITAMINS		
Oil Soluble Vitamins		
<i>cholecalciferol LIQD PO 10 MCG/ML, 400 UNIT/ML</i>	P	
<i>cholecalciferol TABS PO 10 MCG, 1000 UNIT, 25 MCG, 400 UNIT, 25 MCG</i>	P	

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Drug Name	Drug Tier	Requirements/ Limits
DRISDOL CAPS PO (<i>Use ergocalciferol</i>)	NF	QL(0.143 EA daily)
D-VI-SOL LIQD PO (<i>Use cholecalciferol</i>)	NF	
<i>ergocalciferol CAPS PO</i>	P	QL(0.143 EA daily)
<i>vitamin a CAPS PO 10000 UNIT, 3 MG, 3000 MCG, 10000 UNIT</i>	P	
Water Soluble Vitamins		
<i>ascorbic acid CHEW PO 500 MG</i>	P	
<i>ascorbic acid TABS PO</i>	P	
NIACIN ER CPCR PO	P	MP
<i>niacin CPCR PO 250 MG</i>	P	
<i>niacin CPCR PO 500 MG</i>	P	MP
<i>niacin TABS PO 100 MG, 500 MG</i>	P	
<i>niacin TBCR PO 500 MG</i>	P	
<i>pyridoxine hcl TABS PO 25 MG, 100 MG</i>	P	
SLO-NIACIN TBCR PO 500 MG (<i>Use niacin</i>)	NF	
SLO-NIACIN TBCR PO 250 MG, 750 MG (<i>Use niacin</i>)	NF	
<i>thiamine hcl TABS PO 50 MG, 100 MG</i>	P	

INDEX

14-COUNT WARMER MISC	119	ABSORICA PO (Use isotretinoin) .	62	37	
1ST TIER UNIFINE PENTIPS ...	139	ACAM2000	184	ACCURETIC PO 25 MG-20 MG (Use quinapril-hydrochlorothiazide)	37
1ST TIER UNIFINE PENTIPS PLUS 139		acamprosate calcium PO	175	ACCUTREND GLUCOSE CONTROL SOLN	95
1ST TIER UNILET COMFORTOUCH	94	ACANYA GEL (Use clindamycin phosphate-benzoyl peroxide)	62	ACCUTREND GLUCOSE STRP ..	72
2-WAY FOLEY STABILIZATION DEV MISC	119	acarbose PO	25	ACE AEROSOL CLOUD ENHANCER MISC	145
3 SERIES BP MONITOR/WRIST DEVI	92	ACCOLATE PO (Use zafirlukast) ..	14	acebutolol hcl CAPS PO	54
3-IN-1 BEDSIDE TOILET MISC ..	119	ACCOLATE PO 20 MG (Use zafirlukast)	14	acetaminophen CHEW PO 80 MG ..	7
abacavir sulfate SOLN PO	50	ACCU-CHEK AVIVA PLUS KIT ...	94	acetaminophen LIQD PO 160 MG/5ML	7
abacavir sulfate TABS PO	50	ACCU-CHEK AVIVA PLUS STRP .	72	acetaminophen SOLN PO 160 MG/5ML, 325 MG/10.15ML, 650 MG/20.3ML	7
abacavir sulfate-lamivudine PO ...	50	ACCU-CHEK AVIVA SOLN	94	acetaminophen SUPP PR 120 MG ..	7
ABC COMPLETE SENIOR 50+ TABS PO	161	ACCU-CHEK FASTCLIX LANCET KIT	95	acetaminophen SUSP PO 160 MG/5ML, 650 MG/20.3ML	7
ABC COMPLETE SENIOR MENS 50+ TABS PO	161	ACCU-CHEK GUIDE CONTROL LIQD	95	acetaminophen TABS PO 325 MG ..	7
ABILIFY ASIMTUFII PRSY	49	ACCU-CHEK GUIDE KIT	95	acetaminophen TABS PO 500 MG ..	7
ABILIFY MAINTENA PRSY	49	ACCU-CHEK GUIDE ME KIT	95	acetaminophen TABS PO 500 MG ..	7
ABILIFY MAINTENA SRER	49	ACCU-CHEK GUIDE TEST STRP .	72	acetaminophen w/ codeine SOLN PO	9
ABILIFY MYCITE MAINTENANCE KIT	49	ACCU-CHEK SAFE-T PRO LANCETS	95	acetaminophen w/ codeine TABS PO 15 MG-300 MG, 30 MG-300 MG, 60 MG-300 MG	9
ABILIFY MYCITE STARTER KIT ..	49	ACCU-CHEK SMARTVIEW CONTROL LIQD	95	acetaminophen-caff-dihydrocod CAPS PO 30 MG-320.5 MG-16 MG 9	
ABILIFY TABS PO (Use aripiprazole)	49	ACCU-CHEK SMARTVIEW STRP .	72	acetazolamide CP12 PO	77
abiraterone acetate	42	ACCU-CHEK SOFTCLIX LANCET DEV KIT	95	acetazolamide TABS PO 125 MG ..	77
ABOUTTIME PEN NEEDLE	139	ACCU-CHEK SOFTCLIX LANCETS 95		acetazolamide TABS PO 250 MG ..	77
ABRILADA (1 PEN) AJKT	3	ACCUPRIL PO (Use quinapril hcl)	36	acetic acid (otic)	174
ABRILADA (2 PEN) AJKT	3	ACCURETIC PO 12.5 MG-10 MG (Use quinapril-hydrochlorothiazide) 37		ACIPHEX TBEC PO (Use rabeprazole sodium)	181
ABRILADA (2 SYRINGE) PSKT	3	ACCURETIC PO 12.5 MG-20 MG (Use quinapril-hydrochlorothiazide)		acitretin PO	66
ABRYSVO	184				
ABSORICA LD	62				

ACTEMRA ACTPEN SOAJ	5	acyclovir SUSP PO	53	(pulmonary hypertension))	57
ACTEMRA SOLN	5	acyclovir TABS PO	53	ADDERALL TABS PO (Use	
ACTEMRA SOSY	5	acyclovir topical CREA	67	amphetamine-dextroamphetamine) .	1
ACTHIB SOLR IM	183	acyclovir topical OINT	67	ADDERALL XR CP24 PO (Use	
ACTI-LANCE LITE LANCETS 28G		ACZONE 7.5 % (Use dapsone		amphetamine-dextroamphetamine) .	1
95		(topical))	62	ADD-VANTAGE ADDAPTOR	
ACTI-LANCE SPECIAL LANCETS		ADACEL SUSP	180	CONNECTOR MISC	119
17G	95	ADAKVEO	86	adefovir dipivoxil PO	53
ACTI-LANCE UNIVERSAL 23G ..	95	ADALIMUMAB-AACF (2 PEN) AJKT .		ADEMPAS PO	58
ACTIQ LPOP 1600 MCG (Use		3		ADJUST BATH/SHOWER SEAT	
fentanyl citrate)	8	ADALIMUMAB-ADAZ SOAJ	3	MISC	119
ACTIQ LPOP 200 MCG, 400 MCG,		ADALIMUMAB-ADAZ SOSY	3	ADJUST BATH/SHOWER	
600 MCG, 800 MCG, 1200 MCG		ADALIMUMAB-ADBM (2 PEN) AJKT .		SEAT/BACK MISC	119
(Use fentanyl citrate)	8	4		ADJUST FOLD CANE/YORK	
ACTIVELLA TABS PO 1 MG-0.5 MG		ADALIMUMAB-ADBM (2 SYRINGE)		HANDLE MISC	119
(Use estradiol & norethindrone		PSKT	4	ADJUSTABLE ALUMINUM CANE	
acetate)	80	ADALIMUMAB-ADBM(CD/UC/HS		3/4" MISC	119
ACTIVITY POUCH MISC	145	STRT) AJKT	4	ADJUSTABLE ALUMINUM CANE	
ACTONEL TABS PO 35 MG, 150		ADALIMUMAB-ADBM(PS/UV		5/8" MISC	119
MG (Use risedronate sodium)	78	STARTER) AJKT	4	ADJUSTABLE ALUMINUM CANE	
ACTOPLUS MET TABS PO 500 MG-		ADALIMUMAB-FKJP (2 PEN) AJKT .		7/8" MISC	119
15 MG (Use pioglitazone hcl-		4		ADJUSTABLE ALUMINUM CANE	
metformin hcl)	25	ADALIMUMAB-FKJP (2 SYRINGE)		MISC	119
ACTOPLUS MET TABS PO 850 MG-		PSKT	4	ADJUSTABLE COMMODE 3-IN-1	
15 MG (Use pioglitazone hcl-		adapalene CREA	62	MISC	119
metformin hcl)	25	adapalene GEL 0.3 %	62	ADJUSTABLE FOLDING CANE	
ACTOS PO (Use pioglitazone hcl)	30	adapalene-benzoyl peroxide GEL .	62	MISC	119
ACULAR (Use ketorolac		ADAPALENE-BENZOYL PEROXIDE		ADJUSTABLE LANCING DEVICE	
tromethamine (ophth))	173	PADS	62	MISC	95
ACULAR LS (Use ketorolac		ADAPTER CAP MISC	119	ADLARITY PTWK	175
tromethamine (ophth))	173	ADASUVE	48	ADMELOG SOLN IJ	28
ACU-LIFE CRUSHER/CONTAINER		ADBRY SOSY	70	ADMELOG SOLOSTAR SOPN ...	28
MISC	119	ADCIRCA TABS PO (Use tadalafil			
ACUVAIL	173			ADTHYZA TABS PO 15 MG, 30 MG,	
acyclovir CAPS PO	53			60 MG, 90 MG, 120 MG	180
				ADTHYZA TABS PO 16.25 MG, 32.5	

MG, 65 MG, 97.5 MG, 130 MG ...179	MONITOR DEVI 95	AEROCHAMBER PLS FLOVU MTHPIECE DEVI .....146
ADUHELM 175	ADVOCATE BLOOD GLUCOSE SYSTEM KIT .....95	AEROCHAMBER PLUS FLO-VU INTERM DEVI 146
ADULT AEROSOL MASK MISC .146	ADVOCATE CONTROL SOLUTION LIQD .....95	AEROCHAMBER PLUS FLO-VU LARGE DEVI 146
ADULT MASK DEVI .....146	ADVOCATE INSULIN PEN NEEDLES .....139	AEROCHAMBER PLUS FLO-VU LARGE MISC .....146
ADULT MASK LARGE MISC .....146	ADVOCATE INSULIN SYRINGE 139	AEROCHAMBER PLUS FLO-VU MEDIUM DEVI .....146
ADULT PUSH BUTTON ALUM CRUTCH MISC .....119	ADVOCATE LANCETS 95	AEROCHAMBER PLUS FLO-VU MEDIUM MISC 146
ADVAIR DISKUS AEPB (Use fluticasone-salmeterol) .....15	ADVOCATE LANCETS 30G .....95	AEROCHAMBER PLUS FLO-VU MISC .....146
ADVAIR HFA AERO (Use fluticasone-salmeterol) .....15	ADVOCATE LANCING DEVICE MISC .....95	AEROCHAMBER PLUS FLO-VU SMALL DEVI .....146
ADVANCE INTUITION METER DEVI.....95	ADVOCATE RAPID-SAFE LANCING MISC .....95	AEROCHAMBER PLUS FLO-VU SMALL MISC 146
ADVANCE INTUITION MONITOR KIT .....95	ADVOCATE REDI-CODE DEVI ...96	AEROCHAMBER PLUS FLO-VU W/MASK MISC 146
ADVANCE INTUITION TEST STRP . 72	ADVOCATE REDI-CODE KIT ....96	AEROCHAMBER PLUS FLOW VU MISC .....146
ADVANCE MICRO-DRAW CONTROL LIQD .....95	ADVOCATE REDI-CODE STRP ..72	AEROCHAMBER W/FLOWSIGNAL MISC .....146
ADVANCE MICRO-DRAW METER DEVI .....95	ADVOCATE REDI-CODE+ CONTROL SOLN .....96	AEROCHAMBER Z-STAT PLUS CHAMBR MISC .....146
ADVANCE MICRO-DRAW NORMAL LIQD .....95	ADVOCATE REDI-CODE+ DEVI ..96	AEROCHAMBER Z-STAT PLUS MISC .....147
ADVANCE MICRO-DRAW TEST STRP .....72	ADVOCATE REDI-CODE+ TEST STRP .....72	AEROCHAMBER Z-STAT PLUS/LARGE MISC .....147
ADVANCED DIABETIC MULTIVITAMIN TABS PO .....161	ADVOCATE TEST STRP .....72	AEROCHAMBER Z-STAT PLUS/MEDIUM MISC 147
ADVANCED MOBILE LANCET ...95	ADYNOVATE .....85	AEROCHAMBER Z-STAT PLUS/SMALL MISC 147
ADVANCED ONE STEP BP MONITOR MISC .....92	ADZENYS XR-ODT TBED .....1	AEROECLIPSE EZ TWIST TUBING MISC .....147
ADVATE .....85	ADZYNMA .....86	
ADVIL TABS PO (Use ibuprofen) ...5	AEROBIKA DEVI 146	
ADVOCATE ARM BPM DEVI .....92	AEROCHAMBER HOLDING CHAMBER DEVI 146	
ADVOCATE BLOOD GLUCOSE	AEROCHAMBER MINI CHAMBER DEVI 146	
	AEROCHAMBER MV MISC .....146	

AEROECLIPSE MASK LARGE MISC.....147	STRP .....72	MG/0.5ML .....15
AEROECLIPSE MASK MEDIUM MISC .....147	AGAMATRIX PRESTO KIT .....96	albuterol sulfate SYRP PO .....16
AEROECLIPSE MASK SMALL MISC.....147	AGAMATRIX PRESTO PRO METER DEVI .....96	albuterol sulfate TABS PO .....16
AEROTRACH PLUS MISC .....147	AGAMATRIX PRESTO TEST STRP . 72	ALCAINE (Use proparacaine hcl) 172
AEROVENT PLUS DEVI .....147	AGAMREE .....61	alclometasone dipropionate CREA 67
AFINITOR DISPERZ TBSO (Use everolimus) .....43	AGRYLIN PO 0.5 MG (Use anagrelide hcl) .....86	alclometasone dipropionate OINT .67
AFINITOR TABS (Use everolimus) 43	AIMOVIG .....156	ALCOHOL PREP .....119
AFLURIA PRESERVATIVE FREE SUSY .....184	AIMSCO LUBRICATED MISC ....93	ALCOHOL PREP PADS .....119
AFLURIA QUADRIVALENT SUSP 184	AIMSCO TWIST LANCETS 32G .96	ALCOHOL SWABS .....119
AFLURIA QUADRIVALENT SUSY 0.5 ML .....184	AIRDUO DIGIHALER .....15	ALCOHOL SWABSTICK .....119
AFLURIA SUSP .....184	AIRDUO RESPICLICK 113/14 AEPB (Use fluticasone-salmeterol) .....15	ALDACTAZIDE PO (Use spironolactone & hydrochlorothiazide) .....77
AFREZZA POWD 4 UNIT, 8 UNIT, 12 UNIT .....28	AIRDUO RESPICLICK 232/14 AEPB (Use fluticasone-salmeterol) .....15	ALDACTONE TABS PO (Use spironolactone) .....78
AFSTYLA 250 UNIT, 500 UNIT, 1000 UNIT, 1500 UNIT, 2000 UNIT, 2500 UNIT .....85	AIRDUO RESPICLICK 55/14 AEPB (Use fluticasone-salmeterol) .....15	ALECENSA .....43
AGAMATRIX AMP DEVI .....96	AIRS PEDIATRIC AEROSOL MASK MISC .....147	alendronate sodium SOLN PO ....78
AGAMATRIX AMP TEST STRP ...72	AIRSUPRA .....15	alendronate sodium TABS PO 10 MG.....78
AGAMATRIX CONTROL LEVEL 2 SOLN .....96	AIRZONE PEAK FLOW METER 147	alendronate sodium TABS PO 35 MG, 70 MG .....78
AGAMATRIX CONTROL LEVEL 4 SOLN .....96	AJOVY SOAJ .....156	ALEVE TABS PO (Use naproxen sodium) .....5
AGAMATRIX CONTROL SOLN ...96	AJOVY SOSY .....156	ALEVE TENS REFILL PADS MISC 119
AGAMATRIX JAZZ TEST STRP ..72	AKEEGA .....42	alfuzosin hcl PO .....84
AGAMATRIX JAZZ WIRELESS 2 KIT.....96	AKTEN .....172	ALGAE BASED CALCIUM TABS PO 161
AGAMATRIX KEYNOTE TEST	AKYNZEO PO .....32	aliskiren fumarate PO .....39
	albendazole PO .....12	ALIVE ENERGY 50+ TABS PO ..161
	albuterol sulfate AERS .....15	ALIVE MENS 50+ TABS PO .....161
	albuterol sulfate NEBU 0.083 % ...16	ALIVE ONCE DAILY WOMENS
	albuterol sulfate NEBU 0.63 MG/3ML, 1.25 MG/3ML, 2.5	

TABS PO	161	tartrate)	171	PO 358 MG/15ML-95 MG/15ML ...	11
ALKINDI SPRINKLE CPSP	61	ALPHAMOP FOAM REPLACEMENT		ALUNBRIG TABS PO	43
ALL FLOW 1000 PFT FILTER DEVI .	147	PADS MISC	120	ALUNBRIG TBPK	43
ALL FLOW 1000 PFT FILTER MISC .	147	ALPHANATE SOLR	85	ALVESCO	15
ALL FLOW 2000 PFT FILTER DEVI .	147	ALPHANINE SD 500 UNIT, 1000		alvimopan PO	83
ALL FLOW 3000 PFT FILTER DEVI .	147	UNIT, 1500 UNIT	85	amantadine hcl CAPS PO	46
ALL FLOW 4000 PFT FILTER DEVI .	147	ALPRAZOLAM INTENSOL CONC	13	amantadine hcl SOLN	46
ALL FLOW 5000 PFT FILTER DEVI .	147	alprazolam TABS PO 0.25 MG, 0.5		amantadine hcl TABS PO	46
ALL FLOW 6000 PFT FILTER DEVI .	147	MG, 1 MG	13	AMARYL PO 1 MG, 2 MG (Use	
ALL FLOW 7000 PFT FILTER DEVI .	147	alprazolam TABS PO 2 MG	13	glimepiride)	30
ALL-BODY MASSAGE MISC	120	alprazolam TB24 PO	13	AMARYL PO 4 MG (Use glimepiride)	30
ALLEGRA ALLERGY TABS PO 180		alprazolam TBDP PO	13	30	
MG (Use fexofenadine hcl)	33	ALPROLIX	85	AMBER GLASS BOTTLE MISC ..	120
ALLEGRA ALLERGY TABS PO 60		ALREX SUSP (Use loteprednol		AMBER GLASS VIALS 2ML MISC	120
MG (Use fexofenadine hcl)	33	etabonate)	172	AMBER GLASS VIALS 2ML/13MM	
allopurinol PO 100 MG, 300 MG ..	85	ALTACE CAPS PO 1.25 MG, 2.5		MISC	120
allopurinol PO	84	MG, 5 MG, 10 MG (Use ramipril) ..	36	AMBER GLASS VIALS 30ML/20MM	
almotriptan malate PO	156	ALTOPREV TB24 PO 20 MG, 40		MISC	120
alogliptin benzoate	27	MG, 60 MG	35	AMBIEN CR TBCR PO (Use	
alogliptin-metformin hcl	25	ALTRENO LOTN	62	zolpidem tartrate)	88
alogliptin-pioglitazone 15 MG-25 MG,		ALTRIXA TABS PO	164	AMBIEN TABS PO (Use zolpidem	
30 MG-12.5 MG, 30 MG-25 MG, 45		alum & mag hydrox-simethicone		tartrate)	88
MG-25 MG	25	LIQD PO	11	AMBI-TRAY MISC	96
ALOMIDE	173	alum & mag hydrox-simethicone		ambrisentan PO	57
alose tron hcl PO	83	SUSP PO	11	AMD FOAM DRESSING PADS ...	90
ALPHAGAN P (Use brimonidine		ALUMINUM BLANKET SUPPORT		AMD FOAM DRESSING TOPSHEET	
		MISC	120	PADS	90
		ALUMINUM FLIP OFF SEALS 13MM		AMEDA ADAPTER CAP MISC ...	120
		MISC	120	AMEDA BREAST FLANGE INSERT	
		ALUMINUM FLIP OFF SEALS 20MM		MISC	120
		MISC	120	AMEDA CUSTOMFIT BREAST	
		ALUMINUM HYDROXIDE GEL		FLANGE MISC	120
		SUSP PO	11		
		aluminum hydroxide-mag carb SUSP			

AMEDA DIAPHRAGMS MISC ... 120	amitriptyline hcl TABS PO 25	amoxicillin & pot clavulanate TABS PO 125 MG-500 MG 175
AMEDA DUAL HYGIENIKIT SYSTEM MISC 120	AMJEVITA SOAJ 4	amoxicillin & pot clavulanate TB12 PO 175
AMEDA DUAL HYGIENIKIT W/ADAPT MISC 120	AMJEVITA SOSY 4	amoxicillin CAPS PO 174
AMEDA ELITE BREAST PUMP MISC 120	AMJEVITA-PED 10KG TO <15KG SOSY 4	amoxicillin CHEW PO 125 MG, 250 MG 174
AMEDA FINESSE BREAST PUMP MISC 120	AMJEVITA-PED 15KG TO <30KG SOSY 4	AMOXICILLIN SUSR PO (Use amoxicillin) 174
AMEDA FLEXISHIELD MISC 120	amlodipine besylate TABS PO 55	amoxicillin SUSR PO 174
AMEDA MYA JOY BREAST PUMP MISC 120	amlodipine besylate-atorvastatin calcium PO 10 MG-10 MG, 10 MG- 20 MG, 10 MG-40 MG, 10 MG-80 MG, 2.5 MG-20 MG, 2.5 MG-40 MG, 5 MG-10 MG, 5 MG-20 MG, 5 MG-40 MG, 5 MG-80 MG 56	amoxicillin TABS PO 174
AMEDA MYA JOY BREAST PUMP/TOTE MISC 120	amlodipine besylate-atorvastatin calcium PO 10 MG-20 MG, 2.5 MG- 10 MG, 5 MG-10 MG, 5 MG-20 MG, 5 MG-40 MG, 5 MG-80 MG 56	amoxicillin-clarithromycin w/ lansoprazole THPK 182
AMEDA ONE-HAND BREAST PUMP MISC 120	amlodipine besylate-benazepril hcl PO 10 MG-2.5 MG, 10 MG-5 MG, 20 MG-5 MG 37	amphetamine sulfate TABS PO 1
AMEDA PLATINUM BREAST PUMP MISC 120	amlodipine besylate-benazepril hcl PO 20 MG-10 MG, 40 MG-10 MG, 40 MG-5 MG 37	amphetamine-dextroamphetamine CP24 PO 12.5 MG, 25 MG, 37.5 MG, 50 MG 1
AMEDA PURELY YOURS BREAST PUMP MISC 120	amlodipine besylate-olmesartan medoxomil PO 37	amphetamine-dextroamphetamine CP24 PO 5 MG, 10 MG, 15 MG, 20 MG, 25 MG, 30 MG 1
AMEDA SILICONE TUBING MISC 120	amlodipine besylate-valsartan PO .37	amphetamine-dextroamphetamine TABS PO 1
AMEDA TUBING ADAPTER MISC 120	amlodipine-valsartan- hydrochlorothiazide PO 38	ampicillin CAPS PO 500 MG 174
AMEDA VALVES MISC 120	amoxapine PO 25	AMPYRA (Use dalfampridine) ... 176
AMELUZ GEL 66	amoxicillin & pot clavulanate CHEW PO 174	AMRIX CP24 PO (Use cyclobenzaprine hcl) 168
AMIELLE RESTORE VAG EXERCISERS MISC 120	amoxicillin & pot clavulanate SUSR PO 174	AMVUTTRA 178
AMIELLE VAGINAL TRAINER MISC 120	amoxicillin & pot clavulanate TABS PO 125 MG-250 MG, 125 MG-875 MG 175	ANAFRANIL PO (Use clomipramine hcl) 25
amiloride & hydrochlorothiazide PO 77		anagrelide hcl PO 86
amiloride hcl TABS PO 78		anastrozole PO 43
amiodarone hcl TABS PO 14		ANCOBON PO (Use flucytosine) .. 32
AMITIZA PO (Use lubiprostone) ... 82		ANDRODERM PT24 2 MG/24HR, 4 MG/24HR 10

ANDROGEL GEL TD 25 MG/2.5GM (Use testosterone)	10	APNEASTRIP MISC	120	ARICEPT TABS PO 5 MG, 10 MG (Use donepezil hydrochloride)	176
ANDROGEL PUMP GEL TD (Use testosterone)	10	APOKYN SOCT	46	ARIKAYCE	3
ANGEL WING BLOOD COLLECT SET MISC	120	apomorphine hydrochloride SOCT	46	ARIMIDEX PO (Use anastrozole) .	43
ANGEL WING LUER ADAPTER/HOLDER MISC	120	apraclonidine hcl	171	aripiprazole SOLN PO	50
ANGEL WING TRANSFER DEVICE MISC	120	aprepitant CAPS PO	32	aripiprazole TABS PO	50
ANGEL WING TUBE HOLDER MISC	120	aprepitant MISC PO	32	aripiprazole TBDP PO	50
ANGELIQ	80	APRETUDE	50	ARISTADA	50
ANNOVERA	60	APRISO CP24 (Use mesalamine) .	82	ARISTADA INITIO	50
ANORO ELLIPTA	16	APTENSIO XR CP24 PO (Use methylphenidate hcl)	2	ARIXTRA 10 MG/0.8ML (Use fondaparinux sodium)	17
ANTACID REGULAR STRENGTH SUSP PO (Use alum & mag hydrox- simethicone)	11	APTIOM	19	ARIXTRA 2.5 MG/0.5ML (Use fondaparinux sodium)	17
ANTACID/ANTIGAS SUSP PO (Use alum & mag hydrox-simethicone) ..	11	APTIVUS CAPS	50	ARIXTRA 5 MG/0.4ML (Use fondaparinux sodium)	17
ANTARA PO 30 MG	35	AQ INSULIN SYRINGE	139	ARIXTRA 7.5 MG/0.6ML (Use fondaparinux sodium)	17
ANTARA PO 90 MG (Use fenofibrate micronized)	35	AQINJECT PEN NEEDLE	139	armodafinil PO	2
ANTIVERT CHEW PO (Use meclizine hcl)	32	AQUA FILTER HOLDERS MISC .	120	ARMONAIR DIGIHALER	15
ANTIVERT TABS PO 50 MG (Use meclizine hcl)	32	AQUALANCE LANCETS 30G	96	ARMOUR THYROID TABS PO ..	180
ANUSOL-HC EX (Use hydrocortisone (rectal))	11	AQUORAL SOLN	161	ARNUITY ELLIPTA	15
ANZEMET TABS PO 50 MG	31	ARANESP (ALBUMIN FREE) SOLN .	86	AROMASIN PO (Use exemestane)	43
APEXICON E CREA	67	ARANESP (ALBUMIN FREE) SOSY .	86	ARTHROTEC TBEC PO (Use diclofenac w/ misoprostol)	5
APIDRA SOLN	28	ARAVA PO (Use leflunomide)	6	artificial tear solution	170
APIDRA SOLOSTAR SOPN	28	ARAZLO LOTN	62	ASACOL HD TBEC PO (Use mesalamine)	82
APLENZIN PO	22	ARCALYST	5	ascorbic acid CHEW PO 500 MG	187
		AREXVY	184	ascorbic acid TABS PO	187
		arformoterol tartrate	16	asenapine maleate 2.5 MG, 10 MG	48
		ARGYLE SARATOGA SUMP DRAIN MISC	120	asenapine maleate 2.5 MG	48
		ARGYLE TRACH TUBE HOLDER MISC	120		
		ARICEPT TABS PO 23 MG (Use donepezil hydrochloride)	175		

asenapine maleate 5 MG	48	ASSURE HAEMOLANCE PLUS HIGH	96	ASSURE PRISM MULTI TEST STRP	72
ASMANEX (120 METERED DOSES) AEPB	15	ASSURE HAEMOLANCE PLUS LOW	96	ASSURE PRO BLOOD GLUCOSE METER DEVI	97
ASMANEX (14 METERED DOSES) AEPB	15	ASSURE HAEMOLANCE PLUS MICRO	96	ASSURE PRO CONTROL LEVEL 1 & 2 LIQD	97
ASMANEX (30 METERED DOSES) AEPB	15	ASSURE HAEMOLANCE PLUS NORMAL	96	ASSURE PRO TEST STRP	72
ASMANEX (60 METERED DOSES) AEPB	15	ASSURE HAEMOLANCE PLUS PED	96	ASTAGRAF XL CP24	159
ASMANEX HFA AERO 100 MCG/ACT, 200 MCG/ACT	15	ASSURE ID DUO PRO PEN NEEDLES	139	ATACAND HCT PO (Use candesartan cilexetil- hydrochlorothiazide)	38
ASMANEX HFA AERO 50 MCG/ACT	15	ASSURE ID INSULIN SAFETY SYR 139		ATACAND PO (Use candesartan cilexetil)	37
aspirin buffered (cal carb-mag carb- mag oxide) PO	7	ASSURE ID PRO PEN NEEDLES 139		atazanavir sulfate CAPS PO 150 MG, 300 MG	50
aspirin CHEW PO	7	ASSURE ID SAFETY PEN NEEDLES	139	atazanavir sulfate CAPS PO 200 MG 50	
ASPIRIN SUPP PR 300 MG	7	ASSURE II CHECK STRP	72	ATELVIA TBEC PO (Use risedronate sodium)	78
aspirin TABS PO 325 MG	7	ASSURE II CONTROL LEVEL 1 & 2 LIQD	96	atenolol & chlorthalidone PO	38
aspirin TBEC PO 81 MG, 325 MG ..	7	ASSURE II CONTROL LIQD	96	atenolol TABS PO	54
aspirin-acetaminophen-caffeine TABS PO	6	ASSURE II STRP	72	ATIVAN TABS PO (Use lorazepam) . 13	
aspirin-dipyridamole PO	86	ASSURE LANCE LANCETS	97	atomoxetine hcl PO	1
ASPRUZYO SPRINKLE PACK	12	ASSURE LANCE PLUS SAFETY 30G	97	ATORVALIQ SUSP	35
ASSESS PEAK FLOW METER .	148	ASSURE LANCE SAFETY LANCET 28G	97	atorvastatin calcium TABS PO	35
ASSURE 3 CONTROL LIQD	96	ASSURE PLATINUM METER DEVI 97		atovaquone PO	40
ASSURE 3 METER KIT	96	ASSURE PLATINUM STRP	72	atovaquone-proguanil hcl PO	41
ASSURE 3 TEST STRP	72	ASSURE PRISM CONTROL LEVEL 1&2 SOLN	97	ATRALIN GEL (Use tretinoin)	62
ASSURE 4 CONTROL LEVEL 1 & 2 LIQD	96	ASSURE PRISM MULTI METER DEVI	97	ATRIPLA PO (Use efavirenz- emtricitabine-tenofovir disoproxil fumarate)	50
ASSURE 4 METER DEVI	96			atropine sulfate (ophthalmic) OINT 170	
ASSURE 4 TEST STRP	72				
ASSURE DOSE NORM/HIGH CONTROL SOLN	96				

atropine sulfate (ophthalmic) SOLN 170	24 MG .....176	AVEENO SKIN RELIEF LOTN (Use dimethicone (topical)) .....71
ATROPINE SULFATE SOLN 1 % 170	AUTOCLAVE AIR FILTER MISC .120	AVODART PO (Use dutasteride) ..84
ATROVENT HFA .....14	AUTOCLAVE PAPER 36" X 36" MISC .....120	AVONEX PEN AJKT .....177
AUBAGIO PO (Use teriflunomide) 176	AUTOCLAVE PRINTER PAPER MISC .....120	AVONEX PREFILLED PSKT .....177
AUDENZ EMUL .....184	AUTO-LANCET MINI MISC .....97	AVSOLA .....82
AUDENZ PRSY .....184	AUTO-LANCET MISC .....97	AYGESTIN TABS PO (Use norethindrone acetate) .....175
AUGMENTIN ES-600 SUSR PO (Use amoxicillin & pot clavulanate) 175	AUTOLET II CLINISAFE KIT .....97	AYR SALINE NASAL DROPS SOLN 169
AUGMENTIN SUSR PO 31.25 MG/5ML-125 MG/5ML .....175	AUTOLET LANCING DEVICE MISC . 97	AYVAKIT .....43
AUGMENTIN TABS PO 125 MG-500 MG (Use amoxicillin & pot clavulanate) .....175	AUTOLET LITE CLINISAFE KIT ..97	AZASITE .....171
AUGTYRO PO 40 MG .....43	AUTOLET LITE STARTER PACK KIT .....97	azathioprine TABS PO 50 MG ...159
AUM ALCOHOL PREP PADS ...120	AUTOLET MINI MISC .....97	azathioprine TABS PO 75 MG, 100 MG .....159
AUM INSULIN SAFETY PEN NEEDLE .....139	AUTOLET PLATFORMS MISC ...97	azelaic acid GEL .....71
AUM MINI INSULIN PEN NEEDLE 139	AUTOLET PLUS MISC .....97	azelastine hcl (ophth) .....173
AUM PEN NEEDLE .....139	AUTOPEN DEVI .....139	azelastine hcl 0.1 %, 0.15 %, 137 MCG/SPRAY .....169
AUM READYGARD DUO PEN NEEDLE .....139	AUVELITY .....22	azelastine hcl-fluticasone propionate SUSP .....168
AUM SAFETY PEN NEEDLE ...139	AUVI-Q SOAJ 0.1 MG/0.1ML ....186	AZILECT PO (Use rasagiline mesylate) .....47
AURORA PEN NEEDLES .....139	AUVI-Q SOAJ 0.15 MG/0.15ML, 0.3 MG/0.3ML .....186	azithromycin PACK PO .....89
AURORA UNIFINE PENTIPS ...139	AVALIDE PO (Use irbesartan- hydrochlorothiazide) .....38	azithromycin SUSR PO .....90
AURYXIA .....83	AVAPRO PO (Use irbesartan) ....37	azithromycin TABS PO 250 MG ...90
AUSTEDO TABS .....176	AVAR LS CLEANSER LIQD (Use sulfacetamide sodium w/ sulfur) ...62	azithromycin TABS PO 500 MG ...90
AUSTEDO XR PATIENT TITRATION TEPK .....176	AVAR-E LS CREA (Use sulfacetamide sodium w/ sulfur) ...62	azithromycin TABS PO 600 MG ...90
AUSTEDO XR TB24 6 MG, 12 MG,	AVEED SOLN .....10	AZOPT (Use brinzolamide) .....173
	AVEENO BABY CALMING COMFORT LOTN (Use dimethicone (topical)) .....71	AZOR PO (Use amlodipine besylate- olmesartan medoxomil) .....38
		AZSTARYS .....2
		AZULFIDINE EN-TABS TBEC PO

(Use sulfasalazine) .....82	rufinamide) .....19	BD INSULIN SYR ULTRAFINE II 139
AZULFIDINE TABS PO (Use sulfasalazine) .....82	BANZEL TABS PO 400 MG (Use rufinamide) .....19	BD INSULIN SYRINGE .....139
b complex w/ c TABS PO .....161	BAQSIMI ONE PACK POWD .....26	BD INSULIN SYRINGE HALF-UNIT . 140
BABY FRIDGE MISC .....120	BAQSIMI TWO PACK POWD .....26	BD INSULIN SYRINGE MICROFINE.....140
bacitracin (ophthalmic) .....171	BARACLUDE SOLN .....53	BD INSULIN SYRINGE U/F .....140
bacitracin (topical) OINT .....64	BARACLUDE TABS PO (Use entecavir) .....53	BD INSULIN SYRINGE U/F 1/2UNIT.....140
bacitracin zinc OINT .....64	BARIATRIC ALUMINUM CANE MISC .....121	BD INSULIN SYRINGE ULTRAFINE.....140
bacitracin-polymyxin b (ophth) ...171	BASAGLAR KWIKPEN SOPN ....28	BD INTEGRA NEEDLE .....140
bacitracin-polymyxin b OINT .....64	BASIC PM TABS PO .....161	BD LANCET ULTRAFINE 30G ...97
bacitracin-poly-neomycin-hc .....172	BASIS FACIAL MOISTURIZER CREA .....71	BD LANCET ULTRAFINE 33G ...97
baclofen SOLN PO 5 MG/5ML, 10 MG/5ML .....168	BATH BENCH WITH BACK MISC 121	BD LATITUDE DIABETES KIT ....97
baclofen SUSP .....168	BATH/SHOWER SEAT MISC ...121	BD LOGIC BLOOD GLUCOSE MONITOR KIT .....97
baclofen TABS PO 5 MG, 10 MG, 20 MG .....168	BATHTUB SAFETY RAIL MISC .121	BD LUER-LOK SYRINGE .....140
BACTRIM DS TABS PO (Use sulfamethoxazole-trimethoprim) ...39	BAXDELA TABS .....81	BD MICROTAINER LANCETS ...97
BACTRIM TABS PO (Use sulfamethoxazole-trimethoprim) ...39	BCG VACCINE .....183	BD PEN MINI MISC .....140
BAFIERTAM .....177	b-complex vitamins TABS PO ....161	BD PEN MISC .....140
BALCOLTRA PO (Use levonorgestrel-ethinyl estradiol-iron) . 58	b-complex w/ c & calcium PO ....161	BD PEN NEEDLE MICRO U/F ..140
balsalazide disodium CAPS PO ...82	b-complex w/ c & e + zn PO .....161	BD PEN NEEDLE MINI U/F .....140
BALVERSA .....43	b-complex w/ c & folic acid TABS PO 60 MG-10 MG-300 MCG-800 MCG- 1.5 MG-6 MCG-10 MG-1.7 MG-20 MG, 0.8 MG .....161	BD PEN NEEDLE NANO 2ND GEN . 140
BAMBOO CANE MISC .....121	BD AUTOSHIELD .....139	BD PEN NEEDLE NANO U/F ...140
BANDAGE SCISSORS MISC ....121	BD AUTOSHIELD DUO .....139	BD PEN NEEDLE ORIGINAL U/F 140
BAND-AID GAUZE LARGE PADS 90	BD DISP NEEDLE .....139	BD PEN NEEDLE SHORT U/F ..140
BAND-AID TRU-ABSORB GAUZE PADS .....90	BD DISP NEEDLES .....139	BD SAFE CLIP NEEDLE CLIPPER MISC .....121
BANZEL SUSP (Use rufinamide) ..19	BD ECLIPSE NEEDLE .....139	BD SAFE-CLIP BY MAIL MISC ..121
BANZEL TABS PO 200 MG (Use	BD HYPODERMIC NEEDLE ....139	

BD SAFETYGLIDE INSULIN SYRINGE	140	POWD PO (Use wheat dextrin) ...	88	betamethasone dipropionate (topical) CREA	67
BD SAFETYGLIDE NEEDLE	140	BENEFIBER POWD PO (Use wheat dextrin)	88	betamethasone dipropionate (topical) LOTN	67
BD SAFETYGLIDE SHIELDED NEEDLE	140	BENEFIX KIT	85	betamethasone dipropionate (topical) OINT	67
BD SAFETY-LOK INSULIN SYRINGE	140	BENICAR HCT PO (Use olmesartan medoxomil-hydrochlorothiazide) ...	38	betamethasone dipropionate augmented CREA	67
BD SWAB SINGLE USE REGULAR 121		BENICAR PO (Use olmesartan medoxomil)	37	betamethasone dipropionate augmented GEL 0.05 %	67
BD VEO INSULIN SYR U/F 1/2UNIT	140	BENLYSTA SOAJ	160	betamethasone dipropionate augmented LOTN	67
BD VEO INSULIN SYRINGE U/F 140		BENLYSTA SOSY	160	betamethasone dipropionate augmented OINT	67
BECONASE AQ	169	BENSAL HP OINT	70	betamethasone valerate CREA ...	67
BED WEDGE MISC	121	BENTYL SOLN IM (Use dicyclomine hcl)	180	betamethasone valerate FOAM ...	67
BELBUCA FILM	10	BENZAC AC WASH LIQD 5 % (Use benzoyl peroxide)	62	betamethasone valerate LOTN	67
BELLADONNA ALKALOIDS-OPIUM PR	180	BENZAMYCIN GEL (Use benzoyl peroxide-erythromycin)	62	betamethasone valerate OINT	67
BELSOMRA	88	BENZNIDAZOLE	12	BETAPACE AF PO (Use sotalol hcl (afib/af))	55
BENADRYL ALLERGY CAPS PO (Use diphenhydramine hcl)	33	benzoyl peroxide GEL 5 %, 10 % ..	62	BETAPACE TABS PO 120 MG (Use sotalol hcl)	55
BENADRYL ALLERGY CHILDRENS LIQD PO (Use diphenhydramine hcl) 33		benzoyl peroxide LIQD 10 %	62	BETAPACE TABS PO 80 MG, 160 MG (Use sotalol hcl)	55
BENADRYL ALLERGY TABS PO (Use diphenhydramine hcl)	33	benzoyl peroxide-erythromycin GEL .	62	BETASERON KIT	177
BENADRYL ALLERGY ULTRATABS TABS PO (Use diphenhydramine hcl)	33	benztropine mesylate TABS PO ...	45	betaxolol hcl (ophth) SOLN	170
benazepril & hydrochlorothiazide PO 38		bepotastine besilate	173	betaxolol hcl PO	54
benazepril hcl PO	36	BEPREVE (Use bepotastine besilate)	173	bethanechol chloride PO	183
BENEFIBER FOR CHILDREN POWD PO (Use wheat dextrin) ...	88	BERINERT KIT	85	BETHKIS NEBU (Use tobramycin) .	3
BENEFIBER HEALTHY SHAPE		BESIVANCE	171	BETIMOL	170
		BETADINE OPHTHALMIC PREP 171		BETOPTIC-S SUSP	170
		BETADINE SOLN (Use povidone-iodine)	50	BEUTLICH PH TEST ROLL MISC 121	
		betaine PO	79	BEVESPI AEROSPHERE	16

bexarotene (topical)	66	CAP/TRESIBA MISC	98	38	
bexarotene PO	45	BIGFOOT UNITY PROGRAM KIT	98	bisoprolol fumarate PO	54
BEXSERO	184	BIJUVA	80	BLOOD COLLECTION TUBE HOLDER MISC	121
BEYAZ PO (Use drospirenone- ethinyl estradiol-levomefolate calcium)	58	BIKTARVY	50	BLOOD GLUCOSE MONITOR SYSTEM KIT	98
bicalutamide PO	43	BILTRICIDE PO (Use praziquantel) 12		BLOOD GLUCOSE MONITORING 333 DEVI	98
BIDIL PO (Use isosorbide dinitrate- hydralazine hcl)	56	bimatoprost SOLN	173	BLOOD GLUCOSE SYSTEM PAK KIT	98
BI-FOCAL MAGNIFIER MISC	121	BIMZELX SOAJ	66	BLOOD GLUCOSE TEST STRIPS 333 STRP	72
BIGFOOT UNITY PEN CAP/ADMELOG MISC	97	BIMZELX SOSY	66	BLOOD GLUCOSE TEST STRP ..	72
BIGFOOT UNITY PEN CAP/APIDRA MISC	97	BINAXNOW COVID-19 AG HOME TEST KIT	72	BLOOD PRESSURE KIT DEVI	92
BIGFOOT UNITY PEN CAP/ASPART MISC	97	BINOSTO TBEF PO	78	BLOOD PRESSURE MON/AUTO/WRIST DEVI	92
BIGFOOT UNITY PEN CAP/BASAGLAR MISC	97	BIOGUARD GAUZE SPONGES PADS	90	BLOOD PRESSURE MONITOR 3 DEVI	92
BIGFOOT UNITY PEN CAP/FIASP MISC	97	BIOLYTE SOLN PO	157	BLOOD PRESSURE MONITOR AUTOMAT DEVI	92
BIGFOOT UNITY PEN CAP/HUMALOG MISC	97	BIOTEL CARE BLOOD GLUCOSE KIT	98	BLOOD PRESSURE MONITOR DEVI	92
BIGFOOT UNITY PEN CAP/LANTUS MISC	97	BIOTEL CARE BLOOD GLUCOSE SYST KIT	98	BLOOD PRESSURE MONITOR MISC	92
BIGFOOT UNITY PEN CAP/LISPRO MISC	97	BIOTEL CARE TEST STRIPS STRP 72		BLOOD PRESSURE MONITOR/ARM DEVI	92
BIGFOOT UNITY PEN CAP/LYUMJEV MISC	97	BIOTHRAX	184	BLOOD PRESSURE MONITOR MONITOR/PRM ARM DEVI	92
BIGFOOT UNITY PEN CAP/NOVOLOG MISC	97	bisacodyl SUPP PR	89	BLOOD PRESSURE MONITOR/WRIST DEVI	92
BIGFOOT UNITY PEN CAP/TOUJEO M MISC	97	bisacodyl TBEC PO	89	BLOOD PRESSURE SMART CARD MISC	121
BIGFOOT UNITY PEN CAP/TOUJEO MISC	98	bismuth subcitrate potassium- metronidazole-tetracycline PO ...	182	BLOOD PRESSURE UNIT MISC ..	92
BIGFOOT UNITY PEN		bismuth subsalicylate CHEW PO 262 MG	31	BLULINK CONTROL HIGH & LOW LIQD	98
		bismuth subsalicylate SUSP PO 262 MG/15ML, 525 MG/15ML, 525 MG/30ML, 527 MG/30ML, 1050 MG/30ML	31		
		bismuth subsalicylate TABS PO ...	31		
		bisoprolol & hydrochlorothiazide PO .			

BLULINK GLUCOSE MONITORING SYS DEVI	98	CHAMBER/ADULT DEVI	148	BRIVIACT TABS	19
BLULINK GLUCOSE TEST STRP	72	BREATHE COMFORT CHAMBER/CHILD DEVI	148	BRIXADI (WEEKLY) SOSY	10
BMI DIGITAL SMART SCALE MISC	121	BREATHE COMFORT NASAL ASPIRATO MISC	121	BRIXADI SOSY 64 MG/0.18ML, 96 MG/0.27ML, 128 MG/0.36ML	10
BONJESTA TBCR	32	BREATHE COMFORT NASAL IRRIGAT MISC	121	bromfenac sodium (ophth) 0.07 %, 0.09 %	173
BOOSTRIX SUSP	180	BREATHE EASE LARGE DEVI ..	148	bromocriptine mesylate CAPS PO	.46
BOOSTRIX SUSY	180	BREATHE EASE MEDIUM DEVI	148	bromocriptine mesylate TABS PO 2.5 MG	46
bosentan TABS	57	BREATHE EASE NEB MASK/CHILD MISC	148	BROMSITE (Use bromfenac sodium (ophth))	173
BOSULIF CAPS	44	BREATHE EASE NEB MASK/INFANT MISC	148	BRONCHITOL	178
BOSULIF TABS	44	BREATHE EASE PEAK FLOW METER	148	BRONCHITOL TOLERANCE TEST	178
BOTTLE 120ML/SPRAY/CLR PLASTIC MISC	121	BREATHE EASE PULSE OXIMETER MISC	121	BROVANA (Use arformoterol tartrate)	16
BOTTLE 2OZ/BLUE GLASS/DROPPER MISC	121	BREATHE EASE SMALL DEVI ..	148	BRUKINSA	44
BOTTLE 500ML/BOSTON ROUND/CAP MISC	121	BREATHERRITE VALVED MDI CHAMBER DEVI	148	BRYHALI LOTN	67
BOTTLE 8OZ/BOSTON ROUND/CAP MISC	121	BREO ELLIPTA (Use fluticasone furoate-vilanterol)	16	BUBBLE POINT TESTER KIT/WIZARD MISC	121
BOTTLE AMBER GLASS 33OZ MISC	121	BREO ELLIPTA 50 MCG/INH-25 MCG/INH	16	BUBBLES THE FISH II PEDI MASK MISC	148
BOTTLE AMBER GRADUATED 16OZ MISC	121	BREXAFEMME	32	budesonide (inhalation) SUSP	15
BOTTLE AMBER GRADUATED 8OZ MISC	121	BREZTRI AEROSPHERE	16	budesonide (intrarectal)	11
BOTTLE/WHITE 6OZ W/TWIST TOP MISC	121	BRILINTA PO	86	budesonide CPEP PO	61
BOTTLETOP DISPENSER ADAPTER MISC	121	brimonidine tartrate (topical)	71	budesonide TB24 PO	61
BOTTLETOP DISPENSER MISC	121	brimonidine tartrate	171	budesonide-formoterol fumarate dihydrate	16
BRAFTOVI PO 75 MG	44	brimonidine tartrate-timolol maleate	170	BUFFERIN PO (Use aspirin buffered (cal carb-mag carb-mag oxide))	7
BREAST PUMP MISC	121	brinzolamide	173	bumetanide TABS PO	77
BREATHE COMFORT		BRIUMVI	177	BUMEX TABS PO 0.5 MG (Use bumetanide)	77
		BRIVIACT SOLN PO 10 MG/ML	19	BUPHENYL POWD PO (Use sodium	

phenylbutyrate) .....79	codeine PO .....9	calcipotriene OINT .....66
BUPHENYL TABS PO (Use sodium phenylbutyrate) .....79	butalbital-aspirin-caffeine CAPS PO 7	calcipotriene SOLN .....66
buprenorphine hcl SUBL .....10	butalbital-aspirin-caffeine w/cod PO 9	calcipotriene-betamethasone dipropionate OINT .....67
buprenorphine hcl-naloxone hcl dihydrate FILM SL .....10	butorphanol tartrate NA 10 MG/ML 10	calcipotriene-betamethasone dipropionate SUSP .....67
buprenorphine hcl-naloxone hcl dihydrate SUBL .....10	BUTRANS PTWK (Use buprenorphine) .....10	calcitonin (salmon) NA .....78
buprenorphine PTWK .....10	BYDUREON BCISE AUIJ .....28	calcitriol (topical) .....66
bupropion hcl (smoking deterrent) PO .....178	BYETTA 10 MCG PEN SOPN .....28	calcitriol CAPS PO .....79
bupropion hcl TABS PO .....22	BYETTA 5 MCG PEN SOPN .....28	calcitriol SOLN PO .....79
bupropion hcl TABS PO .....23	BYSTOLIC PO (Use nebivolol hcl) 54	calcium acetate (phosphate binder) CAPS PO .....83
bupropion hcl TB12 PO .....23	BYSTOLIC PO 2.5 MG, 5 MG, 20 MG (Use nebivolol hcl) .....54	calcium acetate (phosphate binder) TABS PO .....83
bupropion hcl TB24 PO 150 MG, 300 MG .....23	CABENUVA .....50	calcium carbonate (antacid) CHEW PO 500 MG, 750 MG, 1000 MG ...11
bupropion hcl TB24 PO 450 MG ...23	cabergoline PO .....80	calcium carbonate (antacid) SUSP 11
buspiron hcl PO 10 MG .....13	CABOMETYX TABS PO .....44	CALCIUM CARBONATE ANTACID SUSP .....11
buspiron hcl PO 15 MG .....13	CABTREO .....62	calcium carbonate TABS PO 1500 MG, 600 MG, 600 MG .....157
buspiron hcl PO 5 MG, 7.5 MG, 30 MG .....13	CADUET PO 10 MG-10 MG, 10 MG-20 MG, 10 MG-40 MG, 10 MG-80 MG, 5 MG-10 MG, 5 MG-20 MG, 5 MG-40 MG, 5 MG-80 MG (Use amlodipine besylate-atorvastatin calcium) .....56	calcium carbonate-cholecalciferol TABS PO .....157
butalbital-acetaminophen CAPS PO 50 MG-300 MG .....7	CAFCIT SOLN IV 60 MG/3ML (Use caffeine citrate) .....1	calcium carbonate-vitamin d w/ minerals TABS PO .....157
butalbital-acetaminophen TABS PO 50 MG-300 MG .....7	CAFFEINE ANHYDROUS POWD ..1	calcium citrate TABS PO .....157
butalbital-acetaminophen TABS PO 50 MG-325 MG .....7	CAFFEINE CITRATE SOLN IV (Use caffeine citrate) .....1	calcium citrate-vitamin d TABS PO 250 UNIT-200 MG, 250 UNIT-315 MG, 6.25 MCG-200 MG, 6.25 MCG-315 MG .....157
butalbital-acetaminophen-caffeine CAPS PO 40 MG-50 MG-300 MG ..7	caffeine citrate SOLN PO .....1	CALCIUM GLUCONATE SOLN (Use calcium gluconate) .....157
butalbital-acetaminophen-caffeine CAPS PO 40 MG-50 MG-325 MG ..7	CAFFEINE POWD .....1	calcium gluconate SOLN .....157
butalbital-acetaminophen-caffeine TABS PO 40 MG-50 MG-325 MG ...7	CALAN SR TBCR PO (Use verapamil hcl) .....55	calcium polycarbophil TABS PO ...88
butalbital-acetaminophen-caffeine w/	calcipotriene CREA .....66	
	CALCIPOTRIENE FOAM .....66	

CAL-DAY 1000 TABS PO	161	capsaicin CREA 0.025 %	70	hcl)	55
CALQUENCE	44	capsaicin CREA 0.075 %	70	CARDIZEM TABS PO 120 MG (Use diltiazem hcl)	55
CALTRATE 600+D PLUS MINERALS TABS PO (Use calcium carbonate-vitamin d w/ minerals) .	157	captopril & hydrochlorothiazide PO 38		CARDIZEM TABS PO 30 MG, 60 MG (Use diltiazem hcl)	55
CAMZYOS	56	captopril PO	36	CARDURA PO (Use doxazosin mesylate)	37
CANASA SUPP PR (Use mesalamine)	82	CAPVAXIVE	184	CARDURA XL	84
candesartan cilexetil PO	37	CARAC CREA	66	CAREFINE PEN NEEDLES	140
candesartan cilexetil- hydrochlorothiazide PO	38	CARAFATE SUSP PO (Use sucralfate)	181	CAREONE ADVANCED LANCING DEV MISC	98
CANE FOR BLIND FOLDING MISC .	121	CARAFATE TABS PO (Use sucralfate)	181	CAREONE BLOOD GLUCOSE SYSTEM KIT	98
CANE HOLDER MISC	121	CARBAGLU (Use carglumic acid) 79		CAREONE BLOOD GLUCOSE TEST STRP	72
CANE MISC	121	carbamazepine CHEW PO 100 MG 19		CAREONE INSULIN SYRINGE .	140
CANE TIPS 3/4" MISC	121	carbamazepine CP12 PO	19	CAREONE LANCET THIN 23G ..	98
CANE TIPS 7/8" MISC	121	carbamazepine SUSP PO 100 MG/5ML	19	CAREONE UNIFINE PENTIPS ..	140
CANE TIPS FOR ALUM 3/4" MISC 121		carbamazepine TABS PO	19	CAREONE UNIFINE PENTIPS PLUS	140
CANE TIPS FOR WOOD 3/4" MISC .	121	carbamazepine TB12 PO	19	CAREPOINT POLY HUB NEEDLE 140	
CANE TIPS FOR WOOD 5/8" MISC .	121	carbamide peroxide (otic) 6.5 % ..	174	CAREPOINT SAFETY 1ST NEEDLE	140
CANE TIPS FOR WOOD 7/8" MISC .	121	CARBATROL CP12 PO (Use carbamazepine)	19	CAREPOINT SYRINGE LUER LOCK	140
CANE TIPS MISC	121	carbidopa PO	45	CARESENS CONTROL A SOLN ..	98
CANE WRIST STRAP MISC	121	carbidopa-levodopa TABS PO	46	CARESENS CONTROL SOLUTION A/B SOLN	98
CANE/OFFSET HANDLE MISC ..	121	carbidopa-levodopa TBCR PO	46	CARESENS LANCETS	98
CANE/T-HANDLE MISC	121	carbidopa-levodopa TBDP PO	46	CARESENS N FELIZ BT DEVI	98
capecitabine PO	42	carbidopa-levodopa-entacapone PO .	46	CARESENS N FELIZ DEVI	98
CAPLYTA 10.5 MG, 21 MG	47	CARDIOCOM LANCING DEVICE MISC	98	CARESENS N GLUCOSE SYSTEM DEVI	98
CAPLYTA 42 MG	47	CARDIZEM CD CP24 PO (Use diltiazem hcl coated beads)	55		
CAPRELSA PO	44	CARDIZEM LA TB24 (Use diltiazem			

CARESENS N GLUCOSE TEST STRP	72	CARETOUCH SLIM BP WRIST MONITO DEVI	92	CAVILON NO STING BARRIER FILM MISC	71
CARESENS N VOICE SYSTEM DEVI	98	CARETOUCH TEST STRP	72	CAYSTON	40
CARETOUCH 2 CPAP HOSE HANGER MISC	148	CARETOUCH TWIST LANCETS 28G	98	cefaclor CAPS PO	58
CARETOUCH ALCOHOL PREP	121	CARETOUCH TWIST LANCETS 30G	98	CEFACLOR ER TB12 PO	58
CARETOUCH BP ARM MONITOR DEVI	92	CARETOUCH TWIST MC LANCETS 30G	98	cefaclor SUSR PO 125 MG/5ML, 375 MG/5ML	58
CARETOUCH BP WRIST MONITOR DEVI	92	CARETOUCH UNIVERSL CPAP FILTER MISC	148	cefadroxil CAPS PO	58
CARETOUCH CONTROL SOL LEVEL 2 LIQD	98	CARETOUCH VERSA BP ARM MONITOR DEVI	92	cefadroxil SUSR PO	58
CARETOUCH CPAP & BIPAP HOSE MISC	148	CAREX COCCYX CUSHION MISC 122		cefadroxil TABS PO	58
CARETOUCH CPAP MASK WIPES MISC	148	CAREX ULTRA GRABBER 32" MISC	122	cefdinir CAPS PO	58
CARETOUCH CPAP PRE-WASH SOLN MISC	148	CAREX WHEELCHAIR MISC	122	cefdinir SUSR PO	58
CARETOUCH CPAP TUBE BRUSH MISC	148	carglumic acid	79	cefixime CAPS PO	58
CARETOUCH HYPODERMIC NEEDLE	140	carisoprodol TABS PO	168	cefixime SUSR PO	58
CARETOUCH INSULIN SYRINGE 140		CARNITOR SF SOLN PO (Use levocarnitine (metabolic modifiers)) 79		cefpodoxime proxetil SUSR PO ...	58
CARETOUCH LANCING/EJECTOR MISC	98	CARNITOR SOLN PO 1 GM/10ML (Use levocarnitine (metabolic modifiers))	79	cefpodoxime proxetil TABS PO	58
CARETOUCH MONITOR SYSTEM KIT	98	CARNITOR TABS PO (Use levocarnitine (metabolic modifiers)) 79		cefprozil SUSR PO	58
CARETOUCH PEN NEEDLES ..	140	CAROSPIR SUSP (Use spironolactone)	78	cefprozil TABS PO	58
CARETOUCH PULSE OXIMETER MISC	122	carteolol hcl (ophth)	170	cefuroxime axetil TABS PO 250 MG .	58
CARETOUCH SAFETY LANCETS 98		carvedilol phosphate PO	54	cefuroxime axetil TABS PO 500 MG .	58
CARETOUCH SAFETY LANCETS 26G	98	carvedilol PO	54	CELEBREX PO (Use celecoxib)	5
		CASODEX PO (Use bicalutamide) 43		CELEBREX PO 100 MG, 200 MG (Use celecoxib)	5
				celecoxib PO	5
				CELEXA TABS PO 10 MG (Use citalopram hydrobromide)	23
				CELEXA TABS PO 20 MG (Use citalopram hydrobromide)	23
				CELEXA TABS PO 40 MG (Use citalopram hydrobromide)	23
				CELLCEPT CAPS PO (Use	

mycophenolate mofetil) .....159	CENTRUM SPECIALIST HEART TABS PO 162	CHEMO TRANSFER PIN MISC ..122
CELLCEPT SUSR (Use mycophenolate mofetil) .....159	CENTRUM SPECIALIST IMMUNE TABS PO 162	CHEMSTRIP 10 MD 72
CELLCEPT TABS PO (Use mycophenolate mofetil) .....159	CENTRUM SPECIALIST VISION TABS PO 162	CHEMSTRIP 10/SG .....73
CELONTIN (Use methsuximide) ..22	CENTRUM ULTRA WOMENS TABS PO 162	CHEMSTRIP 2 GP .....73
CENTANY AT KIT 64	CENTRUM WOMEN TABS PO (Use multiple vitamins w/ minerals) 162	CHEMSTRIP 5 OB 73
CENTANY OINT 64	cephalexin CAPS PO 58	CHEMSTRIP 7 73
CENTRAVITES 50 PLUS TABS PO . 161	cephalexin SUSR PO 58	CHEMSTRIP 9 73
CENTRAVITES ADULTS TABS PO 161	cephalexin TABS PO 58	CHEMSTRIP K STRP 73
CENTRUM ADULTS TABS PO (Use multiple vitamins w/ minerals) 161	CEQUA SOLN 171	CHENODAL PO 82
CENTRUM CARDIO TABS PO .. 161	CEQUR SIMPLICITY 2U DEVI ... 140	CHILDRENS ADVIL SUSP PO 100 MG/5ML (Use ibuprofen) .....5
CENTRUM MEN TABS PO (Use multiple vitamins w/ minerals) 161	CERASPORT EX1 SOLN PO 157	CHILDRENS MOTRIN SUSP PO 100 MG/5ML (Use ibuprofen) .....5
CENTRUM MEN TABS PO 161	CERASPORT SOLN PO 157	chlordiazepoxide hcl CAPS PO 13
CENTRUM MINIS WOMEN 50+ TABS PO 162	CERTAVITE SENIOR/ANTIOXIDANT TABS PO 162	chlordiazepoxide hcl-clidinium bromide PO 180
CENTRUM SILVER 50+MEN TABS PO (Use multiple vitamins w/ minerals) 162	CERTAVITE/ANTIOXIDANTS TABS PO 162	chlordiazepoxide-amitriptyline PO 176
CENTRUM SILVER 50+WOMEN TABS PO (Use multiple vitamins w/ minerals) 162	CERVICAL PILLOW MISC 122	chlorhexidine gluconate (mouth- throat) 160
CENTRUM SILVER ADULT 50+ TABS PO (Use multiple vitamins w/ minerals) 162	CERVICAL PILLOW/COVER MISC 122	chloroquine phosphate TABS PO 250 MG 41
CENTRUM SILVER TABS PO (Use multiple vitamins w/ minerals) 162	cetirizine hcl CHEW PO 5 MG 33	chloroquine phosphate TABS PO 500 MG 41
CENTRUM SILVER ULTRA WOMENS TABS PO 162	cetirizine hcl SOLN PO 33	chlorpheniramine maleate TABS PO . 33
CENTRUM SILVER WOMEN 50+ TABS PO (Use multiple vitamins w/ minerals) 162	cetirizine hcl SYRP PO 33	chlorpromazine hcl CONC PO 49
	cetirizine hcl TABS PO 33	chlorpromazine hcl TABS PO 10 MG, 25 MG, 50 MG, 200 MG 49
	cevimeline hcl PO 161	chlorpromazine hcl TABS PO 100 MG 49
	CHANTIX STARTING MONTH PAK TBPK (Use varenicline tartrate) .. 178	chlorthalidone PO 25 MG, 50 MG . 78
	CHEMET PO 31	CHLOR-TRIMETON TABS PO (Use chlorpheniramine maleate) 33

chlorzoxazone TABS PO	168	CIMZIA-STARTER PSKT	82	40 MG	23
CHOLBAM	82	cinacalcet hcl PO	79	CITRACAL MAXIMUM TABS PO (Use calcium citrate-vitamin d) ...	157
cholecalciferol LIQD PO 10 MCG/ML, 400 UNIT/ML	186	CINIS PREEMIE HALO LARGE MISC	122	CITRACAL PETITES/VITAMIN D TABS PO (Use calcium citrate- vitamin d)	157
cholecalciferol TABS PO 10 MCG, 1000 UNIT, 25 MCG, 400 UNIT, 25 MCG	186	CINIS PREEMIE HALO MEDIUM MISC	122	CITRANATAL 90 DHA PO 120 MG- 20 MG-1 MG-3 MG-400 UNIT-3.4 MG-20 MG-50 MG-25 MG-2 MG-159 MG-90 MG-150 MCG-30 UNIT-0.75 MG-300 MG	165
cholestyramine light PACK PO	34	CINIS PREEMIE HALO SMALL MISC	122	CITRANATAL ASSURE PO	165
cholestyramine light POWD PO ...	34	CINQAIR	14	CITRANATAL B-CALM PO 120 MG- 25 MG-1 MG-400 UNIT-120 MG-20 MG	165
cholestyramine PACK PO	34	CINRYZE SOLR IV	85	CITRANATAL BLOOM	165
cholestyramine POWD PO	34	CIPRO SUSR PO	81	CITRANATAL HARMONY PO 25 MG-1 MG-400 UNIT-50 MG-104 MG- 27 MG-30 UNIT-260 MG	165
choline fenofibrate PO	35	CIPRO TABS PO 250 MG, 500 MG (Use ciprofloxacin hcl)	81	CITRANATAL MEDLEY	165
CHOSEN LANCING DEVICE MISC 98		CIPRODEX (Use ciprofloxacin- dexamethasone)	174	CITRUCEL POWD PO (Use methylcellulose (laxative))	88
CIALIS PO 2.5 MG, 10 MG, 20 MG (Use tadalafil)	57	ciprofloxacin hcl (ophth) SOLN ...	171	CITRUCEL TABS PO (Use methylcellulose (laxative))	88
CIALIS PO 5 MG (Use tadalafil) ...	57	ciprofloxacin hcl (otic)	174	clarithromycin SUSR PO	90
CIBINQO	70	ciprofloxacin hcl TABS PO 100 MG 81		clarithromycin TABS PO	90
ciclopirox GEL	64	ciprofloxacin hcl TABS PO 250 MG, 500 MG, 750 MG	81	clarithromycin TB24 PO	90
ciclopirox KIT	64	ciprofloxacin SUSR PO	81	CLARITIN ALLERGY CHILDRENS SOLN PO (Use loratadine)	33
ciclopirox olamine CREA	64	ciprofloxacin-dexamethasone ...	174	CLARITIN CHEW PO (Use loratadine)	33
ciclopirox olamine SUSP	64	ciprofloxacin-fluocinolone acetonide . 174		CLARITIN CHILDRENS CHEW PO (Use loratadine)	33
ciclopirox SHAM	64	CITALOPRAM HYDROBROMIDE CAPS	23	CLARITIN REDITABS JUNIORS TBDP PO (Use loratadine)	33
ciclopirox SOLN	64	citalopram hydrobromide SOLN PO 23		CLARITIN REDITABS TBDP PO	
cilostazol PO	86	citalopram hydrobromide TABS PO 10 MG	23		
CILOXAN OINT	171	citalopram hydrobromide TABS PO 20 MG	23		
CILOXAN SOLN (Use ciprofloxacin hcl (ophth))	171	citalopram hydrobromide TABS PO			
CIMDUO	50				
cimetidine TABS PO	181				
CIMZIA (2 SYRINGE) PSKT	82				
CIMZIA KIT	82				

(Use loratadine) .....33	CLEVER CHEK TEST STRP .....73	STRP .....73
CLARITIN SOLN PO (Use loratadine) .....33	CLEVER CHOICE AUTO-CODE SYSTEM DEVI .....99	CLEVER CHOICE PEAK FLOW METER .....148
CLARITIN TABS PO (Use loratadine) .....33	CLEVER CHOICE AUTO-CODE TEST STRP .....73	CLEVER CHOICE PULSE OXIMETER MISC 122
CLASSICS ROLLING WALKER MISC .....122	CLEVER CHOICE BMI SCALE MISC.....122	CLEVER CHOICE TALK SYSTEM DEVI .....99
CLEANLET LANCETS 28G .....99	CLEVER CHOICE BP MONITOR/ARM DEVI .....92	CLEVER CHOICE TALK SYSTEM STRP .....73
CLEANROOM TACKY MAT 18"X36" MISC .....122	CLEVER CHOICE BP MONITOR/WRIST DEVI .....92	CLICKFINE PEN NEEDLES .....140
CLEAR GLASS VIAL 10ML MISC 122	CLEVER CHOICE BREAST PUMP MISC .....122	CLIMARA PRO .....80
CLEAR GLASS VIALS 2ML MISC 122	CLEVER CHOICE COMFORT EZ 140	CLIMARA PTWK 0.025 MG/24HR, 0.0375 MG/24HR, 0.05 MG/24HR, 0.06 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR (Use estradiol) .....81
clemastine fumarate TABS PO 1.34 MG, 2.68 MG .....33	CLEVER CHOICE COMFORT EZ 99	CLINDACIN ETZ .....62
CLEOCIN CREA (Use clindamycin phosphate vaginal) 186	CLEVER CHOICE GLUCOSE CONTROL LIQD .....99	CLINDACIN PAC .....62
CLEOCIN PO (Use clindamycin hcl) . 40	CLEVER CHOICE HEARING AMPLIFIE MISC .....122	CLINDAGEL GEL (Use clindamycin phosphate (topical)) .....62
CLEOCIN PO (Use clindamycin palmitate hydrochloride) .....40	CLEVER CHOICE HOLDING CHAMBER DEVI .....148	clindamycin hcl PO .....40
CLEOCIN SUPP .....186	CLEVER CHOICE HYDROTHERAPY SYS MISC ...122	clindamycin palmitate hydrochloride PO .....40
CLEOCIN-T LOTN (Use clindamycin phosphate (topical)) .....62	CLEVER CHOICE LANCETS 21G 99	clindamycin phosphate (topical) FOAM .....63
CLEVER CHEK AUTO-CODE SYSTEM DEVI .....99	CLEVER CHOICE LANCETS 28G 99	clindamycin phosphate (topical) GEL 63
CLEVER CHEK AUTO-CODE TEST STRP .....73	CLEVER CHOICE MICRO SYSTEM KIT .....99	clindamycin phosphate (topical) LOTN .....63
CLEVER CHEK AUTO-CODE VOICE DEVI .....99	CLEVER CHOICE MICRO TEST STRP .....73	clindamycin phosphate (topical) SOLN .....63
CLEVER CHEK AUTO-CODE VOICE STRP .....73	CLEVER CHOICE MINI SYSTEM DEVI .....99	clindamycin phosphate (topical) SWAB .....63
CLEVER CHEK LANCETS .....99	CLEVER CHOICE NO CODING	clindamycin phosphate vaginal CREA.....186
CLEVER CHEK SYSTEM KIT .....99		clindamycin phosphate-benzoyl

peroxide (refrigerate)	63	pivalate)	68	C-NATE DHA CAPS PO	166
clindamycin phosphate-benzoyl peroxide GEL	63	clomipramine hcl PO	25	CO MONITOR DEVI	149
clindamycin phosphate-tretinoin ..	63	clonazepam TABS PO	18	CO MONITOR REPLACEMENT PIECES MISC	148
CLINDESSE	186	clonazepam TBDP PO	18	COAGADDEX	85
CLINERE EARWAX CLEANERS MISC	122	clonidine hcl (adhd) TB12 PO	1	coal tar extract SHAM 0.5 %	72
CLINERE EARWAX REMOVER MISC	122	clonidine hcl TABS PO	37	COARTEM	41
CLINITEST RAPID COVID-19 TEST KIT	73	clonidine PTWK	37	codeine sulfate TABS PO 30 MG ...	8
CLIP & STOR MISC	122	clonidine TB24	37	CODEINE SULFATE TABS PO	8
clobazam SUSP	18	clopidogrel bisulfate PO 300 MG ..	86	COLACE CAPS PO 100 MG (Use docusate sodium)	89
clobazam TABS PO	18	clopidogrel bisulfate PO 75 MG ...	86	COLACE CLEAR CAPS PO (Use docusate sodium)	89
clobetasol propionate CREA 0.05 % . 68		clorazepate dipotassium TABS PO 15 MG	13	COLAZAL CAPS PO (Use balsalazide disodium)	82
clobetasol propionate emollient base 0.05 %	67	clorazepate dipotassium TABS PO 3.75 MG, 7.5 MG	13	colchicine CAPS	85
clobetasol propionate emulsion ...	67	clotrimazole (topical) CREA	64	colchicine TABS PO	85
clobetasol propionate FOAM	68	clotrimazole (topical) SOLN	64	colchicine w/ probenecid PO	84
clobetasol propionate GEL 0.05 %	68	clotrimazole	160	COLCRYS TABS PO (Use colchicine)	85
clobetasol propionate LIQD	68	clotrimazole w/ betamethasone CREA	64	COLD SEAL BLISTER/LG 62 DOSE MISC	122
clobetasol propionate LOTN	68	clotrimazole w/ betamethasone LOTN	64	COLD SEAL BLISTER/MD 28 DOSE MISC	122
clobetasol propionate OINT 0.05 % 68		clozapine TABS PO 100 MG	48	COLD SEAL BLISTER/MD 31 DOSE MISC	122
clobetasol propionate SHAM	68	clozapine TABS PO 25 MG, 50 MG, 200 MG	48	COLD SEAL BLISTER/MD 90 DOSE MISC	122
clobetasol propionate SOLN 0.05 % . 68		clozapine TBDP PO 150 MG, 200 MG	48	COLD SEAL BLISTER/SM 28 DOSE MISC	122
CLOBEX LOTN 0.05 % (Use clobetasol propionate)	68	clozapine TBDP PO	48	COLD SEAL BLISTER/SM 31 DOSE MISC	122
clocortolone pivalate	68	CLOZARIL TABS PO 100 MG (Use clozapine)	48	COLD SEAL BLISTERS/LARGE MISC	122
CLODAN	68	CLOZARIL TABS PO 25 MG (Use clozapine)	48		
CLODERM (Use clocortolone		CLOZARIL TABS PO 50 MG, 200 MG (Use clozapine)	48		

colesevelam hcl PACK	34	COMFORT CURVE MASSAGE	122	COMMODE MISC	122
colesevelam hcl TABS PO	34	CUSHION MISC	122	COMMODE PAIL MISC	122
COLESTID FLAVORED GRAN PO (Use colestipol hcl)	34	COMFORT EZ INSULIN SYRINGE . 140		COMMODE SPLASH GUARD MISC . 122	
COLESTID FLAVORED PACK PO (Use colestipol hcl)	34	COMFORT EZ MICRO PEN NEEDLES	140	COMPACT SPACE CHAMBER DEVI	149
COLESTID GRAN PO (Use colestipol hcl)	34	COMFORT EZ PRO PEN NEEDLES	140	COMPACT SPACE CHAMBER/LG MASK DEVI	149
COLESTID PACK PO (Use colestipol hcl)	34	COMFORT EZ SHORT PEN NEEDLES	140	COMPACT SPACE CHAMBER/MED MASK DEVI	149
COLESTID TABS PO (Use colestipol hcl)	34	COMFORT FIT FLANGES LARGE MISC	122	COMPACT SPACE CHAMBER/SM MASK DEVI	149
colestipol hcl GRAN PO	35	COMFORT LANCETS	99	COMPLERA	50
colestipol hcl PACK PO	35	COMFORT PERSONAL CLEANS CART MISC	122	COMPLETE NATAL DHA PO	166
colestipol hcl TABS PO	35	COMFORT PERSONAL MICROWAVE MISC	122	COMPLETENATE CHEW PO	166
COMAR PRESS-IN BOTTLE ADAPTERS MISC	122	COMFORT PERSONAL SHAMPOO CAP MISC	122	COMPOUND W FAST ACTING/CONSEAL GEL (Use salicylic acid)	70
COMBIGAN (Use brimonidine tartrate-timolol maleate)	170	COMFORT PERSONAL WARMER 14-CT MISC	122	COMTAN PO (Use entacapone) ..	46
COMBIPATCH PTTW	80	COMFORT PERSONAL WARMER 28-CT MISC	122	CONCERTA TBCR PO (Use methylphenidate hcl)	2
COMBIVENT RESPIMAT AERS ..	16	COMFORT TOUCH INSULIN PEN NEED	141	CONDYLOX GEL (Use podofilox) .	70
COMBIVIR PO (Use lamivudine- zidovudine)	50	COMFORT TOUCH LANCETS 31G . 99		CONTOUR BACK CUSHION MISC 123	
COMETRIQ (100 MG DAILY DOSE) KIT	44	COMFORT TOUCH PLUS LANCETS 30G	99	CONTOUR CONTROL LIQD	99
COMETRIQ (140 MG DAILY DOSE) KIT	44	COMIRNATY SUSP	184	CONTOUR FITTED SHEETS MISC . 123	
COMETRIQ (60 MG DAILY DOSE) KIT	44	COMIRNATY SUSY	184	CONTOUR MATTRESS COVER MISC	123
COMFORT ASSIST INSULIN SYRINGE	140	COMMODE 3-IN-1 MISC	122	CONTOUR MONITOR DEVI	99
COMFORT ASSURED LANCETS 28G	99	COMMODE BEDSIDE MISC	122	CONTOUR NEXT CONTROL SOLN . 99	
COMFORT ASSURED LANCETS 33G	99	COMMODE BEDSIDE/BACK MISC		CONTOUR NEXT EZ KIT	99

CONTOUR NEXT GEN MONITOR DEVI	99	CORIFACT	85	COVERALL W/HOOD/SMALL MISC .	123
CONTOUR NEXT GEN MONITOR KIT	99	CORLANOR SOLN	58	COVERALL W/HOOD/XL MISC ..	123
CONTOUR NEXT LINK KIT	99	CORLANOR TABS PO (Use ivabradine hcl)	58	COVERALL W/HOOD/XXL MISC	123
CONTOUR NEXT MONITOR KIT .	99	CORTEF TABS PO (Use hydrocortisone)	61	COVERALLS ELAST BACK/WRST/ANKL MISC	123
CONTOUR NEXT ONE DEVI	99	CORTENEMA PR (Use hydrocortisone (intrarectal))	11	COVID-19 AT-HOME TEST KIT ...	73
CONTOUR NEXT ONE KIT	99	CORTIFOAM EX 10 %	11	COVID-19 OTC ANTIGEN 1-PACK KIT	73
CONTOUR NEXT TEST STRP	73	CORTISONE ACETATE TABS PO	61	COVID-19 OTC ANTIGEN 2-PACK KIT	73
CONTOUR TEST STRP	73	CORTISPORIN-TC	174	COVRSITE COVER DRESSING PADS	90
CONZIP CP24 PO (Use tramadol hcl)	8	COSENTYX (300 MG DOSE) SOSY .	66	COVRSITE PLUS COMPOSITE DRESS PADS	90
COOL BLOOD GLUCOSE TEST STRIPS STRP	73	COSENTYX SENSOREADY (300 MG) SOAJ	66	COZAAR PO (Use losartan potassium)	37
COOL CONTROL A SOLN	99	COSENTYX SENSOREADY PEN SOAJ	66	CREON CPEP PO	77
COOL CONTROL B SOLN	100	COSENTYX SOSY	66	CRESEMBA CAPS	32
COOL MONITOR DEVI	100	COSENTYX UNOREADY SOAJ ..	66	CRESTOR TABS PO 20 MG (Use rosuvastatin calcium)	35
COOL MONITOR KIT KIT	100	COSOPT (Use dorzolamide hcl-timolol maleate)	170	CRESTOR TABS PO 5 MG, 10 MG, 40 MG (Use rosuvastatin calcium) .	35
COPA ISLAND BORDERED FOAM PADS	90	COSOPT PF (Use dorzolamide hcl-timolol maleate)	170	CRINONE GEL	186
COPA PLUS HYDROPHILIC FOAM PADS	90	COTELLIC	44	cromolyn sodium (mastocytosis) PO .	82
COPAXONE SOSY (Use glatiramer acetate)	177	COTEMPLA XR-ODT TBED 25.9 MG	2	cromolyn sodium (nasal) 5.2 MG/ACT	169
COPAXONE SOSY 40 MG/ML (Use glatiramer acetate)	177	COTEMPLA XR-ODT TBED 8.6 MG, 17.3 MG	2	cromolyn sodium (ophth)	173
COPIKTRA PO	44	COTTON SWABS SWAB	123	cromolyn sodium NEBU	14
COREG CR PO (Use carvedilol phosphate)	54	COVERALL		crotamiton LOTN	71
COREG PO (Use carvedilol)	54	BOOTS/DISPOSABLE/UNIV MISC	123	CRUTCH ACCESSORY KIT MISC	123
CORGARD TABS PO 20 MG, 40 MG (Use nadolol)	55	COVERALL W/HOOD/3XL MISC	123		
CORGARD TABS PO 80 MG (Use nadolol)	55				

CRUTCH HANDGRIPS MISC .....123	CUSTOM-FLEX MISC .....123	100
CRUTCH MISC .....123	CUVPOSA SOLN PO (Use glycopyrrolate) .....180	CVS LANCETS THIN 26G .....100
CRUTCH PILLOWS/ARM/HAND MISC .....123	CUVRIOR .....159	CVS LANCETS ULTRA THIN 30G 100
CRUTCH SET MISC .....123	CVS ADVANCED BP MONITOR DEVI .....92	CVS LANCING DEVICE MISC ...100
CRUTCH TIPS MISC .....123	CVS ADVANCED GLUCOSE TEST STRP .....73	CVS ONE DAILY WOMENS 50+ ADV TABS PO .....162
CRUTCH UNDERARM PADS MISC . 123	CVS ALCOHOL PREP PADS ... 123	CVS PILL SPLITTER MISC 123
CRUTCHES-ALUMINUM MISC ..123	CVS ALKALINE BATTERIES SIZE AA MISC .....123	CVS PLASTIC SWABS SWAB ...123
CRUTCH-MATE ADULT ARM MISC . 123	CVS BABY SAFETY SWABS SWAB 123	CVS PREP .....123
CRUTCH-MATE ADULT FOREARM MISC .....123	CVS BLOOD GLUCOSE METER KIT.....100	CVS PULSE OXIMETER MISC .. 123
CRUTCH-MATE ADULT HAND GRIP LG MISC 123	CVS BLOOD PRESSURE MONITOR MISC 92	CVS QUAD CANE MISC .....123
CRUTCH-MATE ADULT HAND GRIPS MISC .....123	CVS CANE MISC .....123	CVS READY SET GO BATH BENCH MISC .....123
CUPRIMINE CAPS PO (Use penicillamine) 159	CVS COTTON SWABS SWAB ...123	CVS REUSABLE SHEET PROTECTOR MISC .....123
CURITY ALCOHOL PREPS .....123	CVS CRUTCHES MISC .....123	CVS RUBBER CUSHION MISC . 123
CURITY ALL PURPOSE SPONGES PADS .....91	CVS DIABETIC ORGANIZER MISC . 123	CVS SERIES 100 BLOOD PRESSURE DEVI 92
CURITY AMD ANTIMICROBIAL SPNGE PADS 91	CVS EAR PLUGS MISC .....123	CVS SERIES 400 BLOOD PRESSURE DEVI 92
CURITY COTTON TIPPED APPLIC 6" MISC .....123	CVS GAUZE PAD STERILE PADS 91	CVS SERIES 400W BLOOD PRESSURE DEVI 92
CURITY COTTON TIPPED APPLICATR MISC .....123	CVS GAUZE STERILE PADS .....91	CVS SERIES 600 BLOOD PRESSURE DEVI 92
CURITY COVER SPONGE PADS .91	CVS GEL GRIP FOLDING CANE MISC .....123	CVS SERIES 600W BLOOD PRESSURE DEVI 92
CURITY DRESSING SPONGES PADS .....91	CVS GLUCOSE METER TEST STRIPS STRP 73	CVS SERIES 800 BLOOD PRESSURE DEVI 92
CURITY GAUZE PADS .....91	CVS GLUCOSE PO 26	CVS SOFT GLUCOSE CHEW PO 26
CURITY GAUZE SPONGE PADS .91	CVS INFLATABLE VINYL CUSHION MISC .....123	CVS SPECTRAVITE ULTRA WOMEN TABS PO 162
CURITY SPONGES PADS 91	CVS LANCETS MICRO THIN 33G	cyanocobalamin SOLN IJ 1000 MCG/ML 86

cyclobenzaprine hcl CP24 PO ....168	CYSTAGON CAPS PO 84	DAYVIGO 88
cyclobenzaprine hcl TABS PO 5 MG, 10 MG .....168	CYSTARAN .....173	D-CARE BLOOD GLUCOSE STRP 73
cyclobenzaprine hcl TABS PO 7.5 MG .....168	CYTOMEL TABS PO (Use liothyronine sodium) 180	D-CARE GLUCOMETER KIT 100
CYCLOGYL (Use cyclopentolate hcl) .....170	CYTOTEC PO (Use misoprostol) 182	DDAVP TABS PO (Use desmopressin acetate) 80
CYCLOGYL .....170	dabigatran etexilate mesylate CAPS PO 75 MG, 150 MG .....18	DEBROX 6.5 % (Use carbamide peroxide (otic)) .....174
CYCLOMYDRIL .....170	dalfampridine .....177	DEEP-TISSUE MISC .....123
cyclopentolate hcl 1 %170	DALIRESP PO (Use roflumilast) ...14	deferasirox PACK .....31
cyclophosphamide CAPS .....41	danazol CAPS PO 10	deferasirox TABS PO .....31
CYCLOPHOSPHAMIDE TABS PO 42	DANTRIUM CAPS PO 25 MG (Use dantrolene sodium) 168	deferasirox TBSO .....31
cycloserine PO .....41	dantrolene sodium CAPS PO 168	deferiprone TABS .....31
CYCLOSET .....28	dapagliflozin propanediol PO 30	deflazacort SUSP PO .....61
cyclosporine (ophth) EMUL .....171	dapagliflozin propanediol-metformin hcl PO .....25	deflazacort TABS PO .....61
cyclosporine CAPS PO .....159	dapsone (topical) .....63	DELESTROGEN (Use estradiol valerate) .....81
cyclosporine modified (for microemulsion) CAPS PO .....159	dapsone PO .....40	DELSTRIGO 50
cyclosporine modified (for microemulsion) SOLN PO .....159	DAPTACEL 180	DELZICOL CPDR PO (Use mesalamine) 82
CYLTEZO (2 PEN) AJKT 4	DARAPRIM PO (Use pyrimethamine) .....41	demeclocycline hcl TABS PO 150 MG .....179
CYLTEZO (2 SYRINGE) PSKT .....4	darifenacin hydrobromide PO 183	demeclocycline hcl TABS PO 300 MG .....179
CYLTEZO-CD/UC/HS STARTER AJKT .....4	DARTISLA ODT TBDP .....180	DEMSEER PO (Use metyrosine) ... 37
CYLTEZO-PSORIASIS/UV STARTER AJKT .....4	darunavir TABS 600 MG .....50	DENAVIR (Use penciclovir) .....67
CYMBALTA CPEP PO (Use duloxetine hcl) .....24	darunavir TABS 800 MG .....50	DENGVAXIA .....184
cyproheptadine hcl SYRP PO 34	DAURISMO .....42	DENTAL GUARD MISC .....124
cyproheptadine hcl TABS PO .....34	DAYBUE 169	DENTEK PROF-FIT DENTAL GUARD MISC 124
CYSTADANE PO (Use betaine) ...79	DAYHIST ALLERGY 12 HOUR RELIEF TABS PO .....33	DEODORANT TUBES 2.65OZ-CAPS MISC .....124
CYSTADROPS .....173	DAYPRO TABS PO (Use oxaprozin) . 5	DEPAKOTE ER TB24 PO (Use
	DAYTRANA PTCH (Use methylphenidate) .....2	

divalproex sodium) .....22	acetonide (otic) 174	DEX4 NATURALS PO .....26
DEPAKOTE SPRINKLES CSDR PO (Use divalproex sodium) .....22	DESCOVY 50	DEX4 PO .....26
DEPAKOTE TBEC PO (Use divalproex sodium) .....22	desipramine hcl TABS PO 10 MG, 50 MG, 75 MG, 100 MG, 150 MG ....25	DEX4 POUCH PACK PO .....26
DEPEN TITRATABS TABS PO (Use penicillamine) 159	desipramine hcl TABS PO 25 MG .25	DEX4 QUICK DISSOLVE GLUCOSE CHEW PO .....26
DEPO-ESTRADIOL .....81	desmopressin acetate spray 80	dexamethasone ELIX PO .....61
DEPO-PROVERA SUSP IM (Use medroxyprogesterone acetate (contraceptive)) 60	desmopressin acetate spray refrigerated 0.01 %80	DEXAMETHASONE INTENSOL CONC .....61
DEPO-PROVERA SUSY IM (Use medroxyprogesterone acetate (contraceptive)) 60	desmopressin acetate TABS PO .. 80	dexamethasone sodium phosphate (ophth) .....172
DEPO-SUBQ PROVERA 104 SUSY SC .....60	desogestrel & ethinyl estradiol PO .58	dexamethasone SOLN PO 61
DERMACEA DRAIN SPONGES PADS .....91	desogestrel-ethinyl estradiol (biphasic) PO .....59	dexamethasone TABS PO .....61
DERMACEA GAUZE SPONGE PADS .....91	desogestrel-ethinyl estradiol (triphasic) PO 59	dexamethasone TBPK PO .....61
DERMACEA IV DRAIN SPONGES PADS .....91	desonide CREA .....68	DEXCOM G6 RECEIVER .....100
DERMACEA NON-WOVEN SPONGES PADS .....91	desonide LOTN .....68	DEXCOM G6 SENSOR .....100
DERMACEA TYPE VII GAUZE PADS .....91	desonide OINT .....68	DEXCOM G6 TRANSMITTER ...100
DERMACEA X-RAY SPONGES PADS .....91	DESOWEN CREA (Use desonide) 68	DEXCOM G7 RECEIVER .....100
DERMACINRX PRETRATE TABS PO 166	desoximetasone CREA 68	DEXCOM G7 SENSOR .....100
DERMA-SMOOTH/FS BODY OIL (Use fluocinolone acetonide) 68	desoximetasone GEL 68	DEXEDRINE CP24 PO 10 MG, 15 MG (Use dextroamphetamine sulfate) 1
DERMA-SMOOTH/FS SCALP OIL (Use fluocinolone acetonide) 68	desoximetasone LIQD .....68	DEXILANT PO 30 MG (Use dexlansoprazole) 181
DERMAVITE TABS PO .....162	desoximetasone OINT .....68	DEXILANT PO 60 MG (Use dexlansoprazole) 181
DERMOTIC (Use fluocinolone	DESOXYN PO (Use methamphetamine hcl) .....1	dexlansoprazole PO 30 MG .....181
	DESVENLAFAXINE ER PO .....24	dexlansoprazole PO 60 MG .....181
	desvenlafaxine succinate PO .....24	dexmethylphenidate hcl CP24 PO ..2
	DETROL LA CP24 PO (Use tolterodine tartrate) 183	dexmethylphenidate hcl TABS PO ..2
	DETROL LA CP24 PO 4 MG (Use tolterodine tartrate) 183	DEXTENZA INST .....172
	DETROL TABS PO (Use tolterodine tartrate) 183	dextran 70-hypromellose 0.3 %-0.1 %170
	DEX4 GLUCOSE PO .....26	dextroamphetamine sulfate CP24 PO.

1	DIABETES MONITOR DIGIT SOLN KIT	100	DEVI	100
dextroamphetamine sulfate SOLN PO	1	DIACOMIT CAPS	19	DIATHRIVE+ GLUCOSE TEST STRP
dextroamphetamine sulfate TABS PO	1	DIACOMIT PACK	19	DIATRUE CONTROL LEVEL 1 SOLN
dextromethorphan hbr LIQD PO 15 MG/5ML	61	DIAL-A-DOSE SYRINGE 15ML MISC	124	DIATRUE CONTROL LEVEL 3 SOLN
dextromethorphan hbr SYRP PO 15 MG/5ML	61	DIAL-A-DOSE SYRINGE 30ML MISC	124	DIATRUE PLUS BLOOD GLUCOSE DEVI
dextromethorphan-guaifenesin LIQD PO 100 MG/5ML-10 MG/5ML, 150 MG/7.5ML-15 MG/7.5ML, 200 MG/10ML-20 MG/10ML, 200 MG/5ML-10 MG/5ML	62	DIAL-A-DOSE SYRINGE 60ML MISC	124	DIATRUE PLUS TEST STRP
dextromethorphan-guaifenesin SYRP PO 100 MG/5ML-10 MG/5ML, 200 MG/10ML-20 MG/10ML	62	DIALYVITE SUPREME D TABS PO . 162		diazepam (anticonvulsant) GEL PR 18
dextrose (diabetic use) GEL PO ...	26	DIASTAT ACUDIAL GEL PR 10 MG (Use diazepam (anticonvulsant)) ..	18	diazepam CONC
DEXTROSE 5%/ELECTROLYTE #48	157	DIASTAT ACUDIAL GEL PR 20 MG (Use diazepam (anticonvulsant)) ..	18	diazepam SOLN PO 5 MG/5ML ...
dextrose in lactated ringers	158	DIASTAT PEDIATRIC GEL PR (Use diazepam (anticonvulsant))	18	diazepam TABS PO
dextrose SOLN 10 %	170	DIASTIX	73	diazoxide
DEXTROSE SOLN 20 %	170	DIASTIX REAGENT	73	dibucaine (rectal) EX
dextrose w/ sodium chloride 0.45 %-2.5 %, 0.9 %-5 %, 10 %-0.45 %, 5 %-0.2 %, 5 %-0.225 %, 5 %-0.3 %, 5 %-0.33 %, 5 %-0.45 %, 5 %-0.9 % ..	158	DIATHRIVE BLOOD GLUCOSE METER DEVI	100	dichlorphenamide PO
DEXTROSE-SODIUM CHLORIDE (Use dextrose w/ sodium chloride) 158		DIATHRIVE BLOOD GLUCOSE TEST STRP	73	DICLEGIS TBEC PO (Use doxylamine-pyridoxine)
DHIVY TABS PO	46	DIATHRIVE GLUCOSE CONTROL SOLN LIQD	100	diclofenac epolamine PTCH EX ...
DHS TAR GEL SHAM (Use coal tar extract)	72	DIATHRIVE GLUCOSE TEST STRP 73		diclofenac potassium (migraine) PO 156
DHS TAR SHAM (Use coal tar extract)	72	DIATHRIVE LANCET ULTRA THIN 30	100	diclofenac potassium CAPS PO
DIABETES MONITOR DIGIT ADD-ON KIT	100	DIATHRIVE LANCETS	100	diclofenac potassium TABS PO 25 MG
		DIATHRIVE LANCING DEVICE MISC	100	diclofenac potassium TABS PO 50 MG
		DIATHRIVE PEN NEEDLE	141	diclofenac potassium TABS PO 50 MG
		DIATHRIVE+ GLUCOSE MONITOR		diclofenac sodium (actinic keratoses) EX
				diclofenac sodium (ophth)
				diclofenac sodium (topical) GEL EX 65
				diclofenac sodium (topical) SOLN EX.

65	digoxin TABS PO 125 MCG, 250 MCG	56	dimethyl fumarate CPDR	177
diclofenac sodium TB24 PO	5	digoxin TABS PO 62.5 MCG	56	DINAMAP MONITOR PROBE
diclofenac sodium TBEC PO 25 MG, 50 MG	5	dihydroergotamine mesylate SOLN NA 4 MG/ML	156	COVERS MISC
diclofenac sodium TBEC PO 75 MG .	5	DILANTIN INFATABS CHEW PO (Use phenytoin)	22	DIOVAN HCT PO (Use valsartan-hydrochlorothiazide)
diclofenac w/ misoprostol TBEC PO 5		DILANTIN PO (Use phenytoin sodium extended)	22	38
dicloxacillin sodium PO	175	DILANTIN PO	22	DIOVAN TABS PO 320 MG (Use valsartan)
dicyclomine hcl CAPS PO	180	DILANTIN SUSP PO (Use phenytoin)	22	37
dicyclomine hcl SOLN PO	180	DILANTIN-125 SUSP PO (Use phenytoin)	22	DIOVAN TABS PO 40 MG, 80 MG, 160 MG (Use valsartan)
dicyclomine hcl TABS PO	180	DILAUDID LIQD PO (Use hydromorphone hcl)	8	37
DIFFERIN CLEANSER LIQD (Use benzoyl peroxide)	63	DILAUDID TABS PO 2 MG, 4 MG (Use hydromorphone hcl)	8	DIPENTUM PO
DIFFERIN GEL 0.1 % (Use adapalene)	63	DILAUDID TABS PO 8 MG (Use hydromorphone hcl)	8	82
DIFFUSER ULTRA SONIC MISC 124		diltiazem hcl coated beads CP24 PO 55		diphenhydramine hcl (sleep) CAPS PO
DIFICID SUSR	90	diltiazem hcl CP12 PO	55	87
DIFICID TABS	90	diltiazem hcl CP24 PO 120 MG	55	diphenhydramine hcl (sleep) TABS PO 25 MG
diflorasone diacetate CREA	68	diltiazem hcl CP24 PO 180 MG, 240 MG	55	87
diflorasone diacetate OINT	68	diltiazem hcl extended release beads PO	55	diphenhydramine hcl CAPS PO ...
DIFLUCAN SUSR PO (Use fluconazole)	32	diltiazem hcl TABS PO 120 MG ...	55	33
DIFLUCAN TABS PO 100 MG, 200 MG (Use fluconazole)	32	diltiazem hcl TABS PO 30 MG, 60 MG, 90 MG	55	diphenhydramine hcl ELIX PO 12.5 MG/5ML
DIFLUCAN TABS PO 50 MG, 150 MG (Use fluconazole)	32	diltiazem hcl TB24	55	33
diflunisal TABS PO	7	dimenhydrinate TABS PO	32	diphenhydramine hcl LIQD PO 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML
difluprednate	172	dimethyl fumarate CDPK	177	33
DIGITAL GLASS SCALE MISC ..	124			diphenhydramine hcl SOLN 50 MG/ML
DIGITAL SCALE/BLUETOOTH MISC	124			33
digoxin SOLN PO 0.05 MG/ML	56			diphenoxylate w/ atropine LIQD PO 31
				diphenoxylate w/ atropine TABS PO . 31
				DIPHThERIA-TETANUS TOXOIDS DT SUSP
				180
				DIPROLENE OINT (Use betamethasone dipropionate augmented)
				68
				dipyridamole PO
				86
				disopyramide phosphate CAPS PO 13

DISP SINGLE HEAD	DISPENSER MEGAPUMP AIRLESS	DOPTELET	86
STETHOSCOPE MISC	MISC	DORAL PO (Use quazepam)	88
DISPENSER 50ML/FOAMER PUMP	DISPENSER MEGAPUMP MEZZO	DORYX MPC TBEC PO	179
MISC	RND MISC	DORYX TBEC PO 50 MG, 80 MG,	
DISPENSER MD JAR 50ML MISC	DISPENSER TIP	200 MG (Use doxycycline hyclate)	179
124	CAP/PRECISED DOSE MISC	dorzolamide hcl	173
DISPENSER MD PEN 6.5ML MISC	DISPENSER/MD FOAMER MISC	dorzolamide hcl-timolol maleate ..	170
124	124	DOVATO	50
DISPENSER MD PUMP 0.25ML	DISPOSABLE BULB/VALVE MISC	DOVER COMMODOE SPECIMEN	
MISC	124	COLLECT MISC	124
DISPENSER MD PUMP 0.5ML MISC	disulfiram PO	DOVER MIDSTREAM SPECIMEN	
.....	175	CATCH MISC	124
DISPENSER MD PUMP 1.0ML MISC	DITROPAN XL TB24 PO 5 MG, 10	DOVONEX CREA (Use calcipotriene)	
.....	MG (Use oxybutynin chloride) ....	.....	66
DISPENSER MD PUMP 1.5ML MISC	DIURIL SUSP PO	doxazosin mesylate PO 4 MG	37
.....	78	doxazosin mesylate PO	37
DISPENSER MD PUMP BOTTLE	divalproex sodium CSDR PO	doxepin hcl (antipruritic)	66
100ML MISC	22	doxepin hcl (sleep) PO	87
DISPENSER MD PUMP BOTTLE	divalproex sodium TB24 PO	doxepin hcl CAPS PO	25
150ML MISC	22	doxepin hcl CONC PO	25
DISPENSER MD PUMP BOTTLE	DIVERTER VALVE MISC	doxercalciferol CAPS PO	79
15ML MISC	124	doxycycline (monohydrate) CAPS PO	
DISPENSER MD PUMP BOTTLE	DIVIGEL GEL (Use estradiol) .....	.....	179
200ML MISC	81	doxycycline (monohydrate) SUSR	
DISPENSER MD PUMP BOTTLE	docusate calcium PO	PO	179
240ML MISC	89	doxycycline (monohydrate) TABS PO	
DISPENSER MD PUMP BOTTLE	docusate sodium CAPS PO .....	.....	179
30ML MISC	89	doxycycline (rosacea) PO	71
DISPENSER MD PUMP BOTTLE	docusate sodium LIQD PO 50	doxycycline hyclate CAPS PO ...	179
50ML MISC	MG/5ML, 100 MG/10ML .....	.....	179
DISPENSER MD PUMP BOTTLE	DOCUSATE SODIUM SYRP PO ..	doxycycline hyclate TABS PO	179
80ML MISC	89	doxycycline hyclate TBEC PO ...	179
DISPENSER MD SYRINGE 10ML	docusate sodium TABS PO	doxylamine-pyridoxine TBEC PO ..	32
MISC	89		
DISPENSER MD SYRINGE 5ML	dofetilide PO		
MISC	14		
	donepezil hydrochloride TABS PO 23		
	MG		
	176		
	donepezil hydrochloride TABS PO 5		
	MG, 10 MG		
	176		
	donepezil hydrochloride TBDP PO		
	176		
	DOPRTAINERS 10ML MISC		
	124		

DRAMAMINE TABS PO (Use dimenhydrinate)	32	drospirenone-ethinyl estradiol-levomefolate calcium PO	59	DUO-CARE CONTROL SOLUTION LIQD	100
DRISDOL CAPS PO (Use ergocalciferol)	187	DROXIA CAPS	86	DUO-CARE TEST STRP	73
DRIZALMA SPRINKLE CSDR	24	droxidopa	186	DUPIXENT SOAJ	70
dronabinol CAPS PO	32	DRUG MART LANCING DEVICE MISC	100	DUPIXENT SOSY 100 MG/0.67ML 70	
DROPLET GENTEEL LANCING DEVICE MISC	100	DRUG MART UNIFINE PENTIPS 141		DUPIXENT SOSY	70
DROPLET INSULIN SYRINGE ..	141	DRUG MART UNIFINE PENTIPS PLUS	141	DUREX EXTRA SENSITIVE THIN DEVI	93
DROPLET LANCING DEVICE MISC . 100		DRUG MART UNILET LANCETS 33G	100	DUREX EXTRA SENSITIVE THIN MISC	93
DROPLET MICRON	141	DRYMAX EXTRA PADS	91	DUREX TROPICAL MISC	93
DROPLET PEN NEEDLES	141	DUAKLIR PRESSAIR	16	DUREZOL (Use difluprednate) ..	172
DROPLET PERSONAL LANCETS 30G	100	DUAL PADDLE FOLDING WALKER MISC	125	dutasteride PO	84
DROPPER & SCREW CAP 4OZ MISC	124	DUAVEE	81	dutasteride-tamsulosin hcl PO	84
DROPPING BOTTLE 30ML MISC 124		DUETACT (Use pioglitazone hcl-glimepiride)	25	D-VI-SOL LIQD PO (Use cholecalciferol)	187
DROPSAFE ALCOHOL PREP ..	124	DUEXIS (Use ibuprofen-famotidine) . 5		DYANAVEL XR SUER	1
DROPSAFE SAFETY PEN NEEDLES	141	DULCOLAX PINK LAXATIVE TBEC PO (Use bisacodyl)	89	DYANAVEL XR TBCR	1
DROPSAFE SAFETY SYRINGE/NEEDLE	141	DULCOLAX SUPP PR (Use bisacodyl)	89	DYMISTA SUSP (Use azelastine hcl-fluticasone propionate)	168
DROPTAINER TIP CAPS MISC .	124	DULCOLAX TBEC PO (Use bisacodyl)	89	E.E.S. GRANULES SUSR PO (Use erythromycin ethylsuccinate)	90
DROPTAINERS OPHTHALMIC 15ML MISC	125	DULERA	16	EAR WAX REMOVAL/TRI-STREAM TIP MISC	125
DROPTAINERS OPHTHALMIC 3ML MISC	125	duloxetine hcl CPEP PO	24	EARPLUGS MISC	125
DROPTAINERS OPHTHALMIC 7ML MISC	125	DUNLAP FOAM RING CUSHION MISC	125	EARPOPPER MIDDLE EAR INFLATION DEVI	125
drospirenone-ethinyl estradiol PO 0.03 MG-3 MG	59	DUNLAP INFLATABLE VINYL RING MISC	125	EASIVENT MASK LARGE MISC .	149
drospirenone-ethinyl estradiol PO .59		DUOBRII	68	EASIVENT MASK MEDIUM MISC 149	
				EASIVENT MASK SMALL MISC .	149
				EASIVENT MISC	149

EASY COMFORT INSULIN SYRINGE	141	DEVICE MISC	101	EASY TOUCH HEALTHPRO GLUCOSE STRP	73
EASY COMFORT LANCETS	100	EASY MINI LANCING DEVICE MISC	101	EASY TOUCH HYPODERMIC NEEDLE	141
EASY COMFORT PEN NEEDLES	141	EASY PLUS II CONTROL SOLN	.101	EASY TOUCH INSULIN BARRELS 1ML MISC	101
EASY FEED ELECTRIC BREAST PUMP MISC	125	EASY PLUS II GLUCOSE SYSTEM DEVI	101	EASY TOUCH INSULIN SAFETY SYR	141
EASY FLOW 300 MM HOSE MISC	149	EASY PLUS II GLUCOSE TEST STRP	73	EASY TOUCH INSULIN SYRINGE	141
EASY FLOW 400 MM HOSE MISC	149	EASY STEP CONTROL SOLN ...	101	EASY TOUCH LANCETS 26G ..	101
EASY FLOW AIR NOZZLE MISC	149	EASY STEP GLUCOSE MONITOR DEVI	101	EASY TOUCH LANCETS 28G/TWIST	101
EASY FLOW BLACK/BLUE DEVI	149	EASY STEP TEST STRP	73	EASY TOUCH LANCETS 30G ..	101
EASY FLOW BLACK/ORANGE DEVI	149	EASY TALK BLOOD GLUCOSE SYSTEM DEVI	101	EASY TOUCH LANCETS 32G ..	101
EASY FLOW BLACK/RED DEVI	.149	EASY TALK BLOOD GLUCOSE TEST STRP	73	EASY TOUCH LANCING DEVICE MISC	101
EASY FLOW BLACK/WHITE DEVI	149	EASY TALK CONTROL SOLN ...	101	EASY TOUCH PEN NEEDLES ..	141
EASY FLOW BLACK/YELLOW DEVI	149	EASY TALK PLUS II CONTROL SOLN	101	EASY TOUCH SAFETY LANCETS 21G	101
EASY FLOW HEPA FILTER MISC	149	EASY TALK PLUS II TEST STRIPS STRP	73	EASY TOUCH SAFETY LANCETS 23G	101
EASY FLOW WHITE/BLUE DEVI	149	EASY TOUCH ALCOHOL PREP MEDIUM	125	EASY TOUCH SAFETY LANCETS 26G	101
EASY FLOW WHITE/GREEN DEVI	149	EASY TOUCH CONTROL HIGH & LOW SOLN	101	EASY TOUCH SAFETY LANCETS 28G	101
EASY FLOW WHITE/PINK DEVI	.150	EASY TOUCH FLIPLOCK INSULIN SY	141	EASY TOUCH SAFETY PEN NEEDLES	141
EASY FLOW WHITE/WHITE DEVI	150	EASY TOUCH FLIPLOCK NEEDLES	141	EASY TOUCH SAFETY SYRINGE	141
EASY FLOW WHITE/YELLOW DEVI	150	EASY TOUCH FLIPLOCK SAFETY SYR	141	EASY TOUCH SHEATHLOCK SYRINGE	141
EASY GLIDE PEN NEEDLES ...	141	EASY TOUCH GLUCOSE SYSTEM KIT	101	EASY TOUCH TEST STRP	73
EASY MINI EJECT LANCING		EASY TOUCH HEALTHPRO GLUCOSE KIT	101	EASY TRAK BLOOD GLUCOSE SYSTEM DEVI	101

EASY TRAK BLOOD GLUCOSE TEST STRP	73	ECOTRIN ARTHRTIS PAIN TBEC PO (Use aspirin)	8	ELEMENT COMPACT CONTROL 3 SOLN	102
EASY TRAK CONTROL SOLN ..	101	ECOTRIN TBEC PO (Use aspirin) ..	8	ELEMENT COMPACT GLUCOSE SYSTEM DEVI	102
EASY TRAK II BLOOD GLUCOSE SYS DEVI	101	EDARBI PO	37	ELEMENT COMPACT TEST STRP 73	
EASY TRAK II GLUCOSE TEST STRP	73	EDARBYCLOR PO	38	ELEMENT COMPACT V GLUCOSE SYS DEVI	102
EASYGLUCO KIT	101	EDECRIIN PO (Use ethacrynic acid) .	77	ELEMENT CONTROL LIQD	102
EASYGLUCO STRP	73	EDLUAR SUBL	88	ELEMENT PLUS DEVI	102
EASYMAX 15 LEVEL 2 CONTROL SOLN	101	EDURANT	50	ELEMENT TEST STRP	73
EASYMAX 15 LEVEL 2-3 CONTROL LIQD	102	efavirenz CAPS PO 200 MG	50	ELEPSIA XR TB24 PO	19
EASYMAX 15 TEST STRP	73	efavirenz CAPS PO 50 MG	50	ELESTRIN GEL	81
EASYMAX CONTROL NORMAL/HIGH LIQD	102	efavirenz TABS PO	50	eletriptan hydrobromide PO	156
EASYMAX NG BLOOD GLUCOSE DEVI	102	efavirenz-emtricitabine-tenofovir disoproxil fumarate PO	50	ELIDEL (Use pimecrolimus)	70
EASYMAX NG BLOOD GLUCOSE KIT	102	efavirenz-lamivudine-tenofovir disoproxil fumarate	50	ELIMITE CREA (Use permethrin) .	71
EASYMAX TEST STRP	73	EFFEXOR XR CP24 PO (Use venlafaxine hcl)	24	ELIQUIS DVT/PE STARTER PACK TBPK	17
EASYMAX V BLOOD GLUCOSE DEVI	102	EFFEXOR XR CP24 PO 37.5 MG, 150 MG (Use venlafaxine hcl)	24	ELIQUIS TABS	17
EASYPOINT NEEDLE	141	EFFIENT PO (Use prasugrel hcl) ..	86	ELLA PO	60
EASYPRO BLOOD GLUCOSE MONITOR KIT	102	EFUDEX CREA (Use fluorouracil (topical))	66	ELLUME COVID-19 HOME TEST KIT	73
EASYPRO BLOOD GLUCOSE TEST STRP	73	EGG CRATE BED PAD MISC ...	125	ELMIRON CAPS PO	84
EASYPRO PLUS KIT	102	EGRIFTA SV	78	ELOCTATE	85
EASYPRO PLUS STRP	73	ELECTRODES 2"X2"/REUSABLE MISC	125	ELON PROFESSIONAL NAIL CARE MISC	125
EBASE CONTROLLER KIT MISC 150		ELECTROTHERAPY PAIN RELIEF MISC	125	ELONGATED TOILET SEAT	
econazole nitrate CREA	64	ELEMENT AUTOCODE SYSTEM KIT	102	ELEVATOR MISC	125
ECO-SMARTFUNNEL 186ML MISC .		ELEMENT COMPACT CONTROL 2 SOLN	102	ELOSHIELD FACE SHIELD MISC 125	

EMBRACE BLOOD GLUCOSE TEST STRP	74	EMBRACE WAVE GLUCOSE METER DEVI	103	ENBRACE HR	166
EMBRACE CONTROL SOLN	102	EMCYT PO	43	ENBREL MINI SOCT	6
EMBRACE EVO BLOOD GLUCOSE TEST STRP	74	EMEND CAPS PO 80 MG (Use aprepitant)	32	ENBREL SOLN	6
EMBRACE EVO CONTROL LEVEL 1 LIQD	102	EMEND SUSR	32	ENBREL SOSY	6
EMBRACE EVO GLUCOSE MONITOR DEVI	102	EMEND TRI-PACK CAPS PO (Use aprepitant)	32	ENBREL SURECLICK SOAJ	6
EMBRACE EVO GLUCOSE MONITORING KIT	102	EMETROL SOLN PO (Use fructose- dextrose-phosphoric acid)	32	ENDARI (Use glutamine (sickle cell))	86
EMBRACE GLUCOSE CONTROL LIQD	102	EMFLAZA SUSP PO (Use deflazacort)	61	ENDOMETRIN INST	186
EMBRACE LANCING DEVICE/EJECTOR MISC	102	EMFLAZA TABS PO (Use deflazacort)	61	ENDOSCOPIC DELIVERY SYSTEM MISC	125
EMBRACE PEN NEEDLES	141	EMGALITY (300 MG DOSE) SOSY 156		ENDURANCE FOUR LEG SEAT CANE MISC	125
EMBRACE PRESSURE ACTIVATED 21G	102	EMGALITY SOAJ	156	ENDURANCE HD COMMODOE MISC	125
EMBRACE PRO GLUCOSE CONTROL LIQD	102	EMGALITY SOSY	156	ENFAMIL ENFALYTE SOLN PO .	158
EMBRACE PRO GLUCOSE METER DEVI	102	EMPAVELI	85	ENGERIX-B SUSP 20 MCG/ML .	184
EMBRACE PRO GLUCOSE TEST STRP	74	EMPTY VIAL 3ML MISC	125	ENGERIX-B SUSY	184
EMBRACE TALK BLOOD GLUCOSE DEVI	103	EMSAM	23	ENJAYMO	85
EMBRACE TALK GLUCOSE CONTROL SOLN	103	emtricitabine CAPS PO	50	ENLITE GLUCOSE SENSOR ...	103
EMBRACE TALK GLUCOSE TEST STRP	74	emtricitabine-tenofovir disoproxil fumarate PO 200 MG-300 MG	50	enoxaparin sodium SOLN IJ 300 MG/3ML	17
EMBRACE TALK MONITORING SYSTEM KIT	103	emtricitabine-tenofovir disoproxil fumarate PO	50	enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML	17
EMBRACE WAVE BLOOD GLUCOSE DEVI	103	EMTRIVA CAPS PO (Use emtricitabine)	50	enoxaparin sodium SOSY 120 MG/0.8ML	17
EMBRACE WAVE BLOOD GLUCOSE STRP	74	EMTRIVA SOLN	51	enoxaparin sodium SOSY 30 MG/0.3ML	17
		EMVERM CHEW PO	12	enoxaparin sodium SOSY 40 MG/0.4ML	17
		enalapril maleate & hydrochlorothiazide PO	38	enoxaparin sodium SOSY 60 MG/0.6ML	17
		enalapril maleate SOLN	36	enoxaparin sodium SOSY 80 MG/0.8ML	17
		enalapril maleate TABS PO	36	ENSTILAR FOAM	68

entacapone PO	46	lamivudine)	51	EQL CENTURY WOMENS TABS PO	162
ENTADFI	84	eplerenone PO	39	EQL COLOR LANCETS 21G	103
entecavir TABS PO	53	EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	86	EQL COLOR LANCETS MICRO 33G	103
ENTERALITE INFINITY POLE CLAMP MISC	125	epoprostenol sodium	57	EQL COTTON SWABS SWAB	125
ENTEREG PO (Use alvimopan)	83	EPRONTIA SOLN	19	EQL EAR PLUGS/SILICONE MISC	125
ENTRESTO TABS PO	57	EPZICOM PO (Use abacavir sulfate-lamivudine)	51	EQL GAUZE PADS	91
ENTYVIO PEN SOAJ	82	EQ BATH & SHOWER SEAT/BACK MISC	125	EQL INSULIN SYRINGE	141
ENTYVIO SOLR	82	EQ BLOOD GLUCOSE TEST STRP . 74		EQL MUSTACHE/BEARD SCISSORS MISC	125
ENVARBUS XR TB24	160	EQ BP MONITOR WRIST DEVI	92	EQL SKIN CARE TOOL MISC	125
EPANED SOLN (Use enalapril maleate)	36	EQ CRUTCHES MISC	125	EQL THIN LANCETS 26G	103
EPCLUSA PACK	53	EQ FOLDING WALKER MISC	125	EQUALYTE SOLN PO (Use oral electrolytes)	158
EPCLUSA TABS 100 MG-400 MG	53	EQ GAUZE PADS	91	EQUETRO PO	47
EPCLUSA TABS 50 MG-200 MG	53	EQ ONE DAILY MENS HEALTH TABS PO	162	ergocalciferol CAPS PO	187
EPIDIOLEX	19	EQ ONE DAILY WOMENS 50+ TABS PO	162	ergoloid mesylates TABS PO	178
EPIDUO GEL (Use adapalene-benzoyl peroxide)	63	EQ SPACE CHAMBER ANTI-STATIC DEVI	150	ergotamine w/ caffeine SUPP PR	156
EPIFOAM FOAM	68	EQ SPACE CHAMBER ANTI-STATIC L DEVI	150	ERIVEDGE	42
epinastine hcl (ophth)	173	EQ SPACE CHAMBER ANTI-STATIC M DEVI	150	ERLEADA	43
epinephrine (anaphylaxis) SOAJ	186	EQ SPACE CHAMBER ANTI-STATIC S DEVI	150	erlotinib hcl	42
EPIPEN 2-PAK SOAJ (Use epinephrine (anaphylaxis))	186	EQ WHEELCHAIR FOLDING BLACK MISC	125	ERMEZA SOLN PO	180
EPIPEN JR 2-PAK SOAJ (Use epinephrine (anaphylaxis))	186	EQL ALCOHOL SWABS	125	ERTACZO	64
EPIVIR HBV SOLN	53	EQL CENTURY MATURE ADULTS 50+ TABS PO	162	ERYGEL GEL (Use erythromycin (acne aid))	63
EPIVIR HBV TABS PO (Use lamivudine (hbv))	53			ERYPED 200 SUSR PO (Use erythromycin ethylsuccinate)	90
EPIVIR SOLN PO (Use lamivudine)	51			ERYPED 400 SUSR PO (Use erythromycin ethylsuccinate)	90
EPIVIR TABS PO 150 MG (Use lamivudine)	51			erythromycin (acne aid) GEL	63
EPIVIR TABS PO 300 MG (Use lamivudine)	51			erythromycin (acne aid) PADS	63

erythromycin (acne aid) SOLN	63	estradiol & norethindrone acetate TABS PO	81	EVEKEO ODT TBDP	1
erythromycin (ophth)	171	estradiol GEL	81	EVEKEO TABS PO (Use amphetamine sulfate)	1
ERYTHROMYCIN	171	estradiol PTTW	81	everolimus (immunosuppressant) 160	
erythromycin base CPEP PO	90	estradiol PTWK	81	everolimus TABS	44
erythromycin base TABS PO	90	estradiol TABS PO	81	everolimus TBSO	44
erythromycin base TBEC PO	90	estradiol vaginal CREA	186	EVERSENSE E3 SENSOR/HOLDER	103
erythromycin ethylsuccinate SUSR PO	90	estradiol vaginal TABS	186	EVERSENSE E3 SMART TRANSMITTER	103
erythromycin ethylsuccinate TABS PO	90	estradiol valerate	81	EVERSENSE SENSOR/HOLDER 103	
erythromycin stearate TABS PO 250 MG	90	ESTRING RING 2 MG	186	EVERSENSE SMART TRANSMITTER	103
ESBRIET CAPS (Use pirfenidone) 179		ESTRING RING 7.5 MCG/24HR	186	EVERSENSE SENSOR/HOLDER 103	
ESBRIET TABS PO (Use pirfenidone)	179	ESTROFACTORS TABS PO	165	EVERSENSE SMART TRANSMITTER	103
escitalopram oxalate SOLN PO	23	eszopiclone PO	88	EVERYDAY PICK MISC	125
escitalopram oxalate TABS PO 20 MG	23	ethacrynic acid PO	77	EVISTA PO (Use raloxifene hcl)	79
escitalopram oxalate TABS PO 5 MG, 10 MG	23	ethambutol hcl TABS PO	41	EVOCLIN FOAM (Use clindamycin phosphate (topical))	63
ESGIC TABS PO (Use butalbital- acetaminophen-caffeine)	7	ethosuximide CAPS PO	22	EVOLUTION AUTOCODE DEVI	103
esomeprazole magnesium CPDR PO	181	ethosuximide SOLN PO	22	EVOLUTION AUTOCODE STRP	74
esomeprazole magnesium PACK	181	ethynodiol diacet & eth estrad PO	59	EVOTAZ	51
ESPEROCT	85	etodolac CAPS PO	5	EVOXAC PO (Use cevimeline hcl) 161	
estazolam PO	88	etodolac TABS PO 400 MG	5	EXCEDRIN EXTRA STRENGTH TABS PO (Use aspirin- acetaminophen-caffeine)	7
esterified estrogens & methyltestosterone PO	81	etodolac TABS PO 500 MG	5	EXCEDRIN MIGRAINE RELIEF TABS PO (Use aspirin- acetaminophen-caffeine)	7
ESTRACE CREA (Use estradiol vaginal)	186	etodolac TB24 PO	5	EXCEDRIN MIGRAINE TABS PO (Use aspirin-acetaminophen-caffeine)	7
ESTRACE TABS PO (Use estradiol)	81	etonogestrel-ethinyl estradiol	60	EXCILON AMD DRAIN SPONGES PADS	91
		etoposide CAPS PO	45		
		etravirine PO 100 MG	51		
		etravirine PO 200 MG	51		
		EUCERIN ORIGINAL HEALING CREA (Use skin protectants, misc.) 71			
		EUCRISA	71		
		EVAMIST SOLN	81		

EXCILON AMD NON-WOVEN SPONGES PADS	91	E-Z JECT LANCETS 21G	103	FACE SHIELD MISC	126
EXCILON DRAIN SPONGES PADS .	91	E-Z JECT LANCETS THIN 26G .	103	FALL MAT MISC	126
EXEL COMFORT POINT INSULIN SYR	141	E-Z LOCK RAISED TOILET SEAT MISC	125	famciclovir PO	53
EXEL COMFORT POINT PEN NEEDLE	141	EZALLOR SPRINKLE CPSP	35	famotidine SUSR PO	181
EXELON (Use rivastigmine)	176	ezetimibe PO	36	famotidine TABS PO 20 MG, 40 MG .	181
exemestane PO	43	ezetimibe-simvastatin PO	34	FANAPT PO	47
EXFORGE HCT PO (Use amlodipine-valsartan-hydrochlorothiazide)	38	EZ-LETS LANCETS 21G	103	FANAPT TITRATION PACK PO ..	47
EXFORGE PO (Use amlodipine besylate-valsartan)	38	EZ-LETS LANCETS 28G	103	FANTASY LUBRICATED MISC ...	93
EXJADE TBSO (Use deferasirox) .	31	EZY DOSE ADULT-LOCK PILL CUT MISC	125	FANTASY LUBRICATED/SPERMICIDE MISC	93
EXKIVITY	42	EZY DOSE COLD SEAL CRD 28 DOSE MISC	125	FARESTON PO (Use toremifene citrate)	43
EXSERVAN FILM	169	EZY DOSE COLD SEAL CRD 62 DOSE MISC	125	FARXIGA PO (Use dapagliflozin propanediol)	30
EXTAVIA KIT	177	EZY DOSE COLD SEAL CRD 90 DOSE MISC	125	FASENRA PEN SOAJ	14
EXTENDABLE BEDSIDE RAIL MISC	125	EZY DOSE CUT N CRUSH MISC 125		FASENRA SOSY 30 MG/ML	14
EXTINA FOAM (Use ketoconazole (topical))	64	EZY DOSE DELUXE PILL CUTTER MISC	125	FASHION CANE/T-HANDLE MISC	126
EYE HEALTH + LUTEIN TABS PO	162	EZY DOSE EZY CRUSH PILL CRUSH MISC	125	febuxostat	85
EYE MULTIVITAMIN/SODIUM TABS PO	162	EZY DOSE EZY CRUSH PILL CRUSH MISC	125	FEIBA	85
EYE/EAR DROPPER MISC	125	EZY DOSE MEDICINE CUPS MISC .	126	felbamate SUSP	21
EYSUVIS SUSP	172	EZY DOSE MEDICINE CUPS MISC .	126	felbamate TABS PO	21
E-Z JECT LANCET MICRO-THIN 33G	103	EZY DOSE MEDICINE CUPS MISC .	126	FELBATOL SUSP (Use felbamate)	21
E-Z JECT LANCET SUPER THIN 30G	103	EZY DOSE PILL CUTTER MISC .	126	FELBATOL SUSP (Use felbamate)	21
E-Z JECT LANCETS	103	EZY DOSE PILL CUTTER ORIGINAL MISC	126	FELBATOL TABS PO (Use felbamate)	21
		FABHALTA	86	FELDENE CAPS PO (Use piroxicam)	5
		FABIOR FOAM	63	felodipine PO	55
		FACE SHIELD FULL LENGTH MISC	126	FEMARA PO (Use letrozole)	43
		FACE SHIELD FULL LENGTH/CLEAR MISC	126	FEMRING	186

fenofibrate CAPS PO	35	FERRIPROX TWICE-A-DAY TABS 31	SYR	141
fenofibrate micronized PO 134 MG, 200 MG	35	FERROUS GLUCONATE TABS PO 324 MG	FILTER 0.2 MICRON/25MM MISC 126	
fenofibrate micronized PO 30 MG, 43 MG, 90 MG, 130 MG	35	ferrous sulfate dried TABS PO	FILTER 0.2 MICRON/32MM MISC 126	
fenofibrate micronized PO 67 MG .	35	ferrous sulfate SOLN PO 15 MG/ML, 300 MG/5ML, 15 MG/ML	FILTER 0.2 MICRON/47MM MISC 126	
fenofibrate TABS PO 160 MG	35	ferrous sulfate TABS PO	FILTER 0.22 MICRON/73MM/1000ML MISC ..	126
fenofibrate TABS PO 40 MG, 48 MG, 120 MG, 145 MG	35	FERROUS SULFATE TBEC PO (Use ferrous sulfate)	FILTER AIR PP MISC	150
fenofibrate TABS PO 48 MG, 145 MG	35	ferrous sulfate TBEC PO	FILTER ATTACHMENT MISC ...	126
fenofibrate TABS PO 54 MG	35	fesoterodine fumarate	FILTER FLUORODYNE/0.22 MICRON MISC	126
fenofibric acid PO	35	FETAL DOPPLER MISC	FILTER/MILLEX-GP/50MM/CLEAR MISC	126
FENOGLIDE TABS PO (Use fenofibrate)	35	FETZIMA CP24	FINACEA FOAM	71
fenoprofen calcium CAPS PO 400 MG	5	FETZIMA TITRATION C4PK	FINACEA GEL (Use azelaic acid) .	71
fenoprofen calcium TABS PO	5	FEVERALL JUNIOR STRENGTH SUPP PR	finasteride PO	84
fenfentanyl citrate LPOP	8	fexofenadine hcl TABS PO 180 MG 34	fingolimod hcl PO	177
fenfentanyl citrate TABS	8	fexofenadine hcl TABS PO 60 MG	FINTEPLA	19
fenfentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR	8	FIASP FLEXTOUCH SOPN	FIORICET CAPS PO (Use butalbital- acetaminophen-caffeine)	7
fenfentanyl PT72 37.5 MCG/HR, 62.5 MCG/HR, 87.5 MCG/HR	8	FIASP PENFILL SOCT	FIORICET/CODEINE PO 30 MG-40 MG-50 MG-300 MG (Use butalbital- acetaminophen-caffeine w/ codeine) .	9
FENTORA TABS (Use fentanyl citrate)	8	FIASP PUMPCART SOCT	FIRAZYR SOSY (Use icatibant acetate)	85
FEOSOL TABS PO (Use ferrous sulfate dried)	87	FIASP SOLN	FIRDAPSE	41
FER-IN-SOL SOLN PO (Use ferrous sulfate)	87	FIFTY50 ALCOHOL PREP	FIRST AID ANTISEPTIC OINT	50
FERRIPROX SOLN	31	FIFTY50 GLUCOSE METER 2.0 KIT 103	FIRST PANTOPRAZOLE SUSP .	181
FERRIPROX TABS (Use deferiprone)	31	FIFTY50 GLUCOSE TEST 2.0 STRP	FIRVANQ SOLR PO (Use vancomycin hcl)	40
		FIFTY50 PEN NEEDLES	FITNESS TABS FOR MEN AM/PM	
		FIFTY50 SAFETY SEAL LANCETS . 103		
		FIFTY50 SUPERIOR COMFORT		

TABS PO	162	FLOLAN (Use epoprostenol sodium)	57	fluconazole SUSR PO	32
FLA ADJUST AIR ANKLE WALKER MISC	126	FLOMAX PO (Use tamsulosin hcl)	84	fluconazole TABS PO	32
FLAGYL CAPS PO (Use metronidazole)	39	FLONASE ALLERGY RELIEF SUSP (Use fluticasone propionate (nasal))	169	flucytosine PO	32
FLAORTHO WALKER MISC	126	FLORAFOL PEDIATRIC CHEW PO	165	fludrocortisone acetate TABS PO	61
FLAREX	172	FLOVENT DISKUS AEPB 100 MCG/ACT, 250 MCG/ACT (Use fluticasone propionate (inhalation))	15	FLULAVAL QUADRIVALENT SUSY	184
flavoxate hcl PO	183	FLOVENT DISKUS AEPB 50 MCG/ACT (Use fluticasone propionate (inhalation))	15	FLULAVAL SUSY	184
flecainide acetate PO	14	FLOVENT HFA 110 MCG/ACT, 220 MCG/ACT (Use fluticasone propionate hfa)	15	FLUMIST	184
FLECTOR PTCH EX (Use diclofenac epolamine)	65	FLOVENT HFA 44 MCG/ACT (Use fluticasone propionate hfa)	15	FLUMIST QUADRIVALENT	184
FLEET ENEMA ENEM PR (Use sodium phosphates)	89	FLOWFLEX COVID-19 AG HOME TEST KIT	74	flunisolide (nasal)	169
FLEET PEDIATRIC ENEM PR (Use sodium phosphates)	89	FLUAD	184	fluocinolone acetamide (otic)	174
FLEET SALINE ENEMA ENEM PR (Use sodium phosphates)	89	FLUAD QUADRIVALENT	184	fluocinolone acetamide CREA	68
FLEQSUVY SUSP (Use baclofen)	168	FLUARIX QUADRIVALENT SUSY	184	fluocinolone acetamide OIL	68
FLEX & GO FOLDING CANE MISC	126	FLUARIX SUSY	184	fluocinolone acetamide OINT	68
FLEX SHIELD WITH EAR LOOPS MISC	126	FLUBLOK QUADRIVALENT	184	fluocinolone acetamide SOLN	68
FLEX SHIELD WITH TIE STRINGS MISC	126	FLUBLOK SOSY	184	fluocinonide CREA	68
FLEX THERAPY MISC	126	FLUCELVAX QUADRIVALENT SUSP	184	fluocinonide emulsified base	68
FLEXICHAMBER ADULT MASK/SMALL	150	FLUCELVAX QUADRIVALENT SUSY	184	fluocinonide GEL	68
FLEXICHAMBER CHILD MASK/LARGE	150	FLUCELVAX SUSP	184	fluocinonide OINT	68
FLEXICHAMBER CHILD MASK/SMALL	150	FLUCELVAX SUSY	184	fluocinonide SOLN	68
FLEXICHAMBER DEVI	150	FLUORESCEIN SODIUM/BENOXINATE	173	FLUOROMETHOLONE (OPHTH) SUSP	172
FLIGHT EAR PLUGS MISC	126	FLUOXETINE HCL (PMDD) TABS PO 10 MG	178	FLUOROURACIL (TOPICAL) CREA	66
		FLUOXETINE HCL (PMDD) TABS PO 20 MG	178	FLUOROURACIL (TOPICAL) SOLN	66
		FLUOXETINE HCL CAPS PO 10 MG	23	FLUOXETINE HCL CAPS PO 20 MG, 40 MG	23

fluoxetine hcl CPDR PO	23	fluticasone propionate LOTN	68	FOAM CUSHION MISC	126
fluoxetine hcl SOLN PO	23	fluticasone propionate OINT	68	FOAM EAR PLUGS MISC	126
FLUOXETINE HCL TABS PO (Use fluoxetine hcl)	23	fluticasone-salmeterol AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT	16	FOAM INVALID CUSHION MISC	126
fluoxetine hcl TABS PO 10 MG	23	fluticasone-salmeterol AEPB 113 MCG/ACT-14 MCG/ACT, 232 MCG/ACT-14 MCG/ACT, 55 MCG/ACT-14 MCG/ACT	16	FOAM RING 2" MISC	126
fluoxetine hcl TABS PO 20 MG	23	fluticasone-salmeterol AERO	16	FOCALIN TABS PO (Use dexmethylphenidate hcl)	2
fluoxetine hcl TABS PO 60 MG	23	fluvastatin sodium CAPS PO	35	FOCALIN TABS PO 2.5 MG, 10 MG (Use dexmethylphenidate hcl)	2
FLUPHENAZINE DECANOATE POWD	58	fluvastatin sodium TB24 PO	35	FOCALIN XR CP24 PO (Use dexmethylphenidate hcl)	2
fluphenazine hcl CONC PO	49	fluvoxamine maleate CP24 PO	23	FOCALIN XR CP24 PO 15 MG, 20 MG, 40 MG (Use dexmethylphenidate hcl)	2
fluphenazine hcl ELIX PO	49	fluvoxamine maleate TABS PO 100 MG	23	FOIL WRAPPER 3" X 3" MISC ...	126
fluphenazine hcl SOLN	49	fluvoxamine maleate TABS PO 25 MG, 50 MG	23	FOLCYTEINE TABS PO	165
fluphenazine hcl TABS PO	49	FLUZONE HIGH-DOSE QUADRIVALENT	184	FOLDING CANE MISC	126
flurandrenolide CREA	68	FLUZONE HIGH-DOSE SUSY ...	184	FOLDING COMMODE MISC	126
flurandrenolide LOTN	68	FLUZONE QUADRIVALENT SUSP 184		FOLDING PADDLE WALKER MISC .	126
flurazepam hcl PO	88	FLUZONE QUADRIVALENT SUSY 184		FOLDING REACHER MISC	126
flurbiprofen sodium	173	FLUZONE SUSP	184	FOLDING SEAT CANE MISC	126
flurbiprofen TABS PO 100 MG	5	FLUZONE SUSY	184	FOLDING WALKER MISC	126
flutamide PO	43	FLYP HYPERSONIQ CARTRIDGE MISC	150	FOLDING WALKER/ADULT MISC	126
fluticasone furoate-vilanterol	16	FML FORTE SUSP	172	FOLDING WALKING CANE MISC	126
fluticasone propionate (inhalation) AEPB 100 MCG/ACT, 250 MCG/ACT	15	FML LIQUIFILM SUSP (Use fluorometholone (ophth))	172	folic acid TABS PO 1 MG	86
fluticasone propionate (inhalation) AEPB 50 MCG/ACT	15	FOAM CHAIR CUSHION MISC ..	126	FOLIVANE-OB PO	166
fluticasone propionate (nasal) SUSP . 169		FOAM CRUTCH PAD MISC	126	fondaparinux sodium 10 MG/0.8ML	17
fluticasone propionate CREA 0.05 % 68				fondaparinux sodium 2.5 MG/0.5ML .	17
fluticasone propionate hfa 110 MCG/ACT, 220 MCG/ACT	15			fondaparinux sodium 5 MG/0.4ML .	17
fluticasone propionate hfa 44 MCG/ACT	15				

fondaparinux sodium 7.5 MG/0.6ML . 17	FORA GW9014 TELEHEALTH GATEWAY MISC .....126	TEST STRP .....74
FOOT MASSAGER MISC .....126	FORA LANCETS .....103	FORACARE GD40 MONITOR DEVI . 104
FORA 6 CONNECT STRP .....74	FORA LANCING DEVICE MISC .103	FORACARE GD40 TEST STRP ...74
FORA 6 CONNECT/GTEL TEST STRP .....74	FORA P20 BP MONITOR SYSTEM DEVI .....92	FORACARE GDH CONTROL SOLN . 104
FORA BLOOD GLUCOSE TEST STRP .....74	FORA PREMIUM V10 BLE SYSTEM DEVI .....103	FORACARE PREMIUM V10 DEVI 104
FORA CONTROL SOLN .....103	FORA TEST N' GO BP DEVI .....92	FORACARE PREMIUM V10 TEST STRP .....74
FORA D15G BLOOD GLUCOSE TEST STRP .....74	FORA TEST N' GO MONITOR DEVI 103	FORACARE TEST N GO MONITOR DEVI .....104
FORA D20 BLOOD GLUCOSE TEST STRP .....74	FORA TN'G ADVANCE PRO STRP 74	FORACARE TEST N GO TEST STRP .....74
FORA D40/G31 BLOOD GLUCOSE STRP .....74	FORA TN'G SCALE 550 MISC ...126	FORFIVO XL TB24 PO (Use bupropion hcl) .....23
FORA G20 BLOOD GLUCOSE SYSTEM KIT .....103	FORA TN'G VOICE KIT .....103	formoterol fumarate NEBU .....16
FORA G20 BLOOD GLUCOSE TEST STRP .....74	FORA TN'G/TN'G VOICE STRP ...74	FORTESTA GEL TD (Use testosterone) .....10
FORA G30/PREM V10 GLUCOSE TEST STRP .....74	FORA V10 BLOOD GLUCOSE SYSTEM DEVI .....104	FORTISCARE CONTROL SOLN 104
FORA G30A BLOOD GLUCOSE SYSTEM DEVI .....103	FORA V10 BLOOD GLUCOSE TEST STRP .....74	FORTISCARE G1 TEST STRIP STRP .....74
FORA GATEWAY MISC .....126	FORA V10/V12/D10/D20 TEST KIT 104	FORTISCARE T1 GLUCOSE SYSTEM DEVI .....104
FORA GD20 BLOOD GLUCOSE SYSTEM DEVI .....103	FORA V12 BLOOD GLUCOSE SYSTEM DEVI .....104	FORTISCARE TEST STRP .....74
FORA GD20 TEST STRP .....74	FORA V12 BLOOD GLUCOSE TEST STRP .....74	FOSAMAX PLUS D PO .....78
FORA GD50 BLOOD GLUCOSE SYSTEM DEVI .....103	FORA V20 BLOOD GLUCOSE SYSTEM DEVI .....104	FOSAMAX TABS PO 70 MG (Use alendronate sodium) .....78
FORA GD50 BLOOD GLUCOSE TEST STRP .....74	FORA V20 BLOOD GLUCOSE TEST STRP .....74	fosamprenavir calcium TABS PO ..51
FORA GTEL BLOOD GLUCOSE SYSTEM DEVI .....103	FORA V30A BLOOD GLUCOSE SYSTEM DEVI .....104	fosfomycin tromethamine .....40
FORA GTEL BLOOD GLUCOSE TEST STRP .....74	FORA V30A BLOOD GLUCOSE SYSTEM KIT .....104	FOSFREE TABS PO (Use multiple vitamins w/ minerals) .....162
	FORA V30A BLOOD GLUCOSE	fosinopril sodium & hydrochlorothiazide PO 12.5 MG-10 MG .....38

fosinopril sodium & hydrochlorothiazide PO 12.5 MG-20 MG	38	SENSOR	104	furosemide SOLN PO 8 MG/ML, 10 MG/ML	77
fosinopril sodium PO 10 MG	36	FREESTYLE LIBRE 2 READER	104	furosemide TABS PO	77
fosinopril sodium PO 20 MG, 40 MG . 36		FREESTYLE LIBRE 2 SENSOR	104	FUZEON SOLR	51
FOSRENOL CHEW PO (Use lanthanum carbonate)	83	FREESTYLE LIBRE 3 READER	104	FYCOMPA SUSP	18
FOSRENOL PACK	83	FREESTYLE LIBRE 3 SENSOR	104	FYCOMPA TABS	18
FOTIVDA	44	FREESTYLE LIBRE READER	104	FYLNETRA	86
FRAGMIN SOLN 10000 UNIT/4ML, 95000 UNIT/3.8ML	18	FREESTYLE LITE DEVI	104	gabapentin (once-daily) TABS PO 177	
FRAGMIN SOSY	18	FREESTYLE LITE KIT	104	gabapentin CAPS PO	19
FREDS PHARMACY AUTOLET LANCING MISC	104	FREESTYLE LITE TEST STRP ...	74	gabapentin SOLN PO	19
FREDS PHARMACY UNIFINE PENTIP+	141	FREESTYLE PRECISION NEO SYSTEM KIT	104	gabapentin TABS PO 600 MG	19
FREDS PHARMACY UNIFINE PENTIPS	141	FREESTYLE PRECISION NEO TEST STRP	74	gabapentin TABS PO 800 MG	19
FREDS PHARMACY UNILET LANC 30G	104	FREESTYLE TEST STRP	74	GABITRIL PO (Use tiagabine hcl) .	22
FREE SPIRIT KNEE/LEG WALKER MISC	126	FROVA PO (Use frovatriptan succinate)	156	GALAFOLD	79
FREEDAVITE TABS PO	162	frovatriptan succinate PO	156	galantamine hydrobromide CP24 PO 176	
FREESTYLE CONTROL SOLUTION LIQD	104	fructose-dextrose-phosphoric acid SOLN PO	32	galantamine hydrobromide SOLN PO	176
FREESTYLE DOUBLE BREASTPUMP MISC	126	FRUZAQLA	42	galantamine hydrobromide TABS PO	176
FREESTYLE FREEDOM LITE KIT 104		FT BLOOD PRESSURE SERIES 200 DEVI	92	GARDASIL 9 SUSP	184
FREESTYLE INSULINX TEST STRP	74	FT BLOOD PRESSURE SERIES 600 DEVI	92	GARDASIL 9 SUSY	185
FREESTYLE LIBRE 14 DAY READER	104	FT COMFORT FOAM EAR PLUGS MISC	126	GASTROCROM PO (Use cromolyn sodium (mastocytosis))	82
FREESTYLE LIBRE 14 DAY		FT COTTON SWABS SWAB	127	GAS-X EXTRA STRENGTH CHEW PO (Use simethicone)	81
		FT ELECTROLYTE SOLN PO ...	158	gatifloxacin (ophth)	171
		FT SALINE NASAL SPRAY SOLN	169	GATTEX	83
		FULL KIT NEBULIZER SET MISC	150	GAUZE DRESSING PADS	91
		FULPHILA	86	GAUZE PADS PADS	91
				GAVISCON SUSP PO (Use aluminum hydroxide-mag carb)	11

GAVRETO	44	GENTEEL CONTACT TIPS (RAINBOW) MISC	105	127	GHT BLOOD GLUCOSE MONITOR KIT	105
GE100 BLOOD GLUCOSE SYSTEM DEVI	104	GENTEEL CONTACT TIPS (VIOLET) MISC	105		GHT TEST STRP	74
GE100 BLOOD GLUCOSE SYSTEM KIT	104	GENTEEL CONTACT TIPS (YELLOW) MISC	105		GILENYA PO (Use fingolimod hcl) 177	
GE100 BLOOD GLUCOSE TEST STRP	74	GENTEEL LANCING KIT (BLUE) KIT	105		GILENYA PO 0.25 MG	177
gefitinib	42	GENTEEL NOZZLES MISC	105		GILOTRIF	42
GELNIQUE GEL 10 %	183	GENTEEL PLUS LANCING (BLACK) MISC	105		GIMOTI SOLN NA	82
gemfibrozil TABS PO	35	GENTEEL PLUS LANCING (PURPLE) MISC	105		GLASS BOTTLE 15ML MISC	127
GEMTESA	183	GENTEEL PLUS LANCING (WHITE) MISC	105		GLASS BOTTLE 30ML MISC	127
GENERESS FE PO (Use norethindrone & ethinyl estradiol-fe) 59		GENTEEL PLUS LANCING DEV(BLUE) MISC	105		GLASS BOTTLE 30ML/BRUSH CAP MISC	127
GENICIN VITA-Q TABS PO	165	GENTEEL PLUS LANCING DEV(PINK) MISC	105		GLASS BOTTLE 30ML/PHENOLIC CAP MISC	127
GENOTROPIN CART SC	78	GENTLE-LET GP LANCETS	105		GLASS BOTTLE 60ML MISC	127
GENOTROPIN MINIQUICK PRSY	78	GENTLE-LET LANCETS	105		GLASS SERUM BOTTLES 20ML MISC	127
gentamicin sulfate (ophth) SOLN	.171	GENTLE-LET PLATFORMS MISC 105			GLASS SERUM BOTTLES 2ML MISC	127
gentamicin sulfate (topical) CREA	.64	GENULTIMATE TEST STRP	74		GLASS SERUM BOTTLES 30ML MISC	127
gentamicin sulfate (topical) OINT	.64	GENVOYA	51		GLASS SERUM BOTTLES 5ML MISC	127
GENTEAL TEARS MODERATE PF (Use dextran 70-hypromellose) ...	170	GEODON (Use ziprasidone mesylate)	47		GLASS VIAL 2ML MISC	127
GENTEAL TEARS PF (Use dextran 70-hypromellose)	170	GEODON PO (Use ziprasidone hcl) 47			GLASS VIAL AMBER 3ML MISC	127
GENTEEL BUTTERFLY TOUCH LANCET	104	GEODON PO 20 MG, 60 MG, 80 MG (Use ziprasidone hcl)	47		glatiramer acetate SOSY	177
GENTEEL CONTACT TIPS (BLUE) MISC	104	GERI-FREEDA SENIOR FORMULA TABS PO	163		GLEEVEC PO (Use imatinib mesylate)	44
GENTEEL CONTACT TIPS (CLEAR) MISC	104	GERI-TUSSIN SYRP PO	62		GLEEVEC PO 400 MG (Use imatinib mesylate)	44
GENTEEL CONTACT TIPS (GREEN) MISC	104	GETGO ROLLING WALKER MISC			glimepiride PO 1 MG, 2 MG	30
GENTEEL CONTACT TIPS (ORANGE) MISC	105				glimepiride PO 4 MG	30

glipizide TABS PO 5 MG, 10 MG ..30	GLUCOSE DEVI .....105	GLUCOCOM LANCETS 28G ....106
glipizide TABS PO .....30	GLUCOCARD 01 BLOOD GLUCOSE KIT .....105	GLUCOCOM LANCETS 33G ....106
glipizide TB24 PO 10 MG .....30	GLUCOCARD 01 CONTROL LIQD 105	GLUCOCOM MONITOR KIT .....106
glipizide TB24 PO 2.5 MG, 5 MG ..30	GLUCOCARD 01 SENSOR PLUS STRP .....74	GLUCOCOM TEST STRP .....75
glipizide-metformin hcl PO 250 MG- 2.5 MG, 500 MG-2.5 MG .....25	GLUCOCARD 01-MINI GLUCOSE KIT .....105	GLUCONAVII BLOOD GLUCOSE SYS KIT .....106
glipizide-metformin hcl PO 500 MG-5 MG .....25	GLUCOCARD EXPRESSION CONTROL SOLN .....105	GLUCONAVII BLOOD GLUCOSE TEST STRP .....75
GLOBAL ALCOHOL PREP EASE 127	GLUCOCARD EXPRESSION MONITOR KIT .....105	GLUCOPRO INSULIN SYRINGE 141
GLOBAL EASE INJECT PEN NEEDLES .....141	GLUCOCARD EXPRESSION TEST STRP .....74	GLUCOSE CONTROL SOLN ....106
GLOBAL EASY GLIDE INSULIN SYR .....141	GLUCOCARD SHINE CONNEX KIT . 105	GLUCOSE INSTANT ENERGY PO 27
GLOBAL EASY GLIDE PEN NEEDLES .....141	GLUCOCARD SHINE CONTROL SOLN .....105	GLUCOSE METER TEST STRP ..75
GLOBAL INJECT EASE INSULIN SYR .....141	GLUCOCARD SHINE DEVI .....105	GLUCOSE PO .....27
GLOBAL INJECT EASE LANCETS 30G .....105	GLUCOCARD SHINE EXPRESS KIT.....105	GLUCOTROL XL TB24 PO 10 MG (Use glipizide) .....30
GLOBAL INSULIN SYRINGES ..141	GLUCOCARD SHINE KIT .....105	GLUCOTROL XL TB24 PO 2.5 MG, 5 MG (Use glipizide) .....30
GLOBAL LANCING DEVICE MISC 105	GLUCOCARD SHINE TEST STRP 74	GLUMETZA TB24 PO (Use metformin hcl) .....26
GLOSTRIPS STRP 1 MG .....173	GLUCOCARD SHINE XL DEVI ..105	glutamine (sickle cell) .....86
GLUCAGEN HYPOKIT .....27	GLUCOCARD VITAL MONITOR KIT 106	glyburide micronized PO 1.5 MG, 3 MG, 6 MG .....30
glucagon (rdna) .....27	GLUCOCARD VITAL TEST STRP 75	glyburide TABS PO .....30
GLUCAGON EMERGENCY (Use glucagon (rdna)) .....27	GLUCOCARD X-METER KIT ....106	glyburide-metformin PO 250 MG-1.25 MG, 500 MG-2.5 MG .....26
GLUCAGON EMERGENCY .....27	GLUCOCARD X-SENSOR STRP .75	glyburide-metformin PO 500 MG-5 MG .....26
GLUCO PERFECT 3 METER DEVI 105	GLUCOCOM BLOOD GLUCOSE MONITOR DEVI .....106	GLYCATE TABS PO .....180
GLUCO PERFECT 3 TEST STRP .74	GLUCOCOM CONTROL LIQD ...106	GLYCERIN (ADULT) SUPP PR (Use glycerin (laxative)) .....89
GLUCO TO GO CHEW PO .....27		glycerin (laxative) SUPP PR 1 GM, 1.2 GM, 2 GM, 80.7 %89
GLUCOCARD 01 BLOOD		

glycopyrrolate SOLN PO 1 MG/5ML . 180	GNP INSULIN SYRINGES 30GX5/16" 141	GOJJI BLOOD GLUCOSE TEST STRP .....75
glycopyrrolate TABS PO 1 MG, 2 MG.....180	GNP INSULIN SYRINGES 31GX5/16" 141	GOJJI BLOOD TEST STRIP/LANCETS STRP .....75
GLYNASE PO (Use glyburide micronized) .....30	GNP LANCETS 21G .....106 GNP LANCETS THIN 26G 106	GOJJI LANCING DEVICE/CLEAR CAP MISC 106
GLYNASE PO 3 MG (Use glyburide micronized) .....30	GNP LANCING SYSTEM DEVICE MISC .....106	GOJJI WEIGHT SCALE MISC ... 127
GLYXAMBI PO .....26	GNP NAIL CLIPPERS MISC 127	GONITRO PACK .....12
GNP ALCOHOL SWABS 127	GNP POCKET TISSUE MISC ....127	GOODSENSE BLOOD GLUCOSE KIT 106
GNP ASSORTED COMBS MISC 127	GNP PULSE OXIMETER MISC ..127	GOODSENSE BLOOD GLUCOSE STRP .....75
GNP BLOOD PRESSURE MONITOR DEVI 92	GNP QUICK DISSOLVE GLUCOSE CHEW PO .....27	GOODSENSE CLICKFINE PEN NEEDLE .....142
GNP CLICKFINE PEN NEEDLES 141	GNP REACHER 32" MISC 127	GOODSENSE ELECTROLYTE ADV CARE SOLN PO .....158
GNP COTTON SWABS SWAB .. 127	GNP STERILE LANCETS 30G ..106	GOODSENSE GLUCOSE PO ....27
GNP DELUXE PULSE OXIMETER MISC .....127	GNP TRUE METRIX AIR METER KIT 106	GOODSENSE LANCETS 33G .. 106
GNP DIGITAL WEIGHT SCALE MISC .....127	GNP TRUE METRIX GLUCOSE METER KIT .....106	GOODSENSE LANCETS 33G UNIV.....106
GNP EASY TOUCH CONT HIGH/LOW LIQD 106	GNP TRUE METRIX GLUCOSE STRIPS STRP 75	GOODSENSE LANCING DEVICE MISC .....106
GNP EASY TOUCH CONT HIGH/LOW SOLN 106	GNP TRUETRACK SMART SYSTEM STRP .....75	GOODSENSE PEN NEEDLE PENFINE .....142
GNP EASY TOUCH GLUCOSE METER DEVI 106	GNP TRUETRACK TEST STRIPS STRP .....75	GRADUATED BOTTLE 2OZ MISC 127
GNP EASY TOUCH GLUCOSE TEST STRP .....75	GNP TWEEZERS SLANT TIP MISC . 127	GRADUATED BOTTLE 4OZ MISC 127
GNP GLUCOSE PO .....27	GNP ULTICARE PEN NEEDLES 142	GRALISE TABS PO (Use gabapentin (once-daily)) 177
GNP INSULIN SYRINGE 141	GNP ULTIGUARD SAFEPACK NEEDLE .....142	GRALISE TABS PO 450 MG, 750 MG, 900 MG .....177
GNP INSULIN SYRINGES 141	GNP ULTRA COM INSULIN SYRINGE 142	granisetron hcl TABS PO .....31
GNP INSULIN SYRINGES 28GX1/2" .....141	GOCOVRI CP24 .....46	GRANIX SOLN .....86
GNP INSULIN SYRINGES 29GX1/2" .....141		GRANIX SOSY 86

griseofulvin microsize SUSP PO ...32	HADLIMA PUSHTOUCH SOAJ 4	HARVONI PACK .....53
griseofulvin microsize TABS PO ...32	HADLIMA SOSY 4	HARVONI TABS .....53
griseofulvin ultramicrosize PO .....32	HAEGARDA SOLR SC 86	HAVRIX 185
GROOVE ROLLING WALKER MISC 127	HAEMOLANCE 107	HEAD COVERS 24" MISC 127
guaifenesin LIQD PO 62	HAEMOLANCE LOW FLOW LANCETS .....107	HEAD HALTER MISC 127
guaifenesin TABS PO 200 MG 62	HAEMOLANCE PLUS 107	HEAD HALTER OVER DOOR TRACTION MISC .....127
guaifenesin-codeine SOLN PO ....62	HAEMOLANCE PLUS LOW FLOW . 107	HEAD LICE COMB MISC 127
guaifenesin-codeine SYRP PO ....62	HAEMOLANCE PLUS MAX FLOW 107	HEALTH CARE LANCING DEVICE MISC .....107
guanfacine hcl (adhd) PO 1	halcinonide CREA 68	HEALTH SENSE BP MONITOR DEVI .....92
guanfacine hcl PO 37	HALCION PO 0.25 MG (Use triazolam) 88	HEALTHPRO BLOOD GLUCOSE MONITO KIT .....107
GUARDIAN 4 GLUCOSE SENSOR . 106	HALDOL DECANOATE (Use haloperidol decanoate) 48	HEALTHSMART BP MONITOR/WRIST DEVI .....92
GUARDIAN 4 TRANSMITTER .. 106	halobetasol propionate CREA 68	HEALTHWISE INSULIN SYR/NEEDLE .....142
GUARDIAN CONNECT TRANSMITTER .....106	halobetasol propionate FOAM 68	HEALTHWISE MICRON PEN NEEDLES .....142
GUARDIAN LINK 3 TRANSMITTER 106	halobetasol propionate OINT 68	HEALTHWISE MINI PEN NEEDLES.....142
GUARDIAN REAL-TIME CHARGER MISC .....106	HALOG CREA (Use halcinonide) .68	HEALTHWISE PEN NEEDLES ..142
GUARDIAN REAL-TIME REPLACE PED 106	HALOG OINT 68	HEALTHWISE SHORT PEN NEEDLES .....142
GUARDIAN REAL-TIME TEST PLUG MISC .....106	HALOG SOLN 68	HEALTHWISE UNIFINE PENTIPS 142
GUARDIAN SENSOR (3) .....107	haloperidol decanoate .....48	HEALTHY ACCENTS LANCING DEVICE MISC 107
GUARDIAN SENSOR 3 107	haloperidol lactate CONC PO 48	HEALTHY ACCENTS UNIFINE PENTIP .....142
GVOKE HYOPEN 1-PACK SOAJ 27	haloperidol TABS PO 0.5 MG, 1 MG, 10 MG .....48	HEALTHY ACCENTS UNILET LANCETS .....107
GVOKE HYOPEN 2-PACK SOAJ 27	haloperidol TABS PO 2 MG, 5 MG, 20 MG .....48	HEAT THERAPY MISC .....127
GVOKE KIT SOLN .....27	haloperidol TABS PO 2 MG, 5 MG 48	
GVOKE PFS SOSY 1 MG/0.2ML ..27	HAND HELD SHOWER SPRAY MISC .....127	
GNAZOLE-1 .....186	HARMONY BREASTPUMP MISC 127	

H-E-B INCONTROL ADV LANCING MISC	20000 UNIT/ML .....18	HM COMPLETE MEN TABS PO .163
H-E-B INCONTROL ALCOHOL .127	HEPARIN SODIUM (PORCINE) SOSY IJ	HM EMBRACE TALK SYSTEM KIT 107
H-E-B INCONTROL BP MONITOR MISC	HEPLISAV-B SOSY .....185	HM STERILE ALCOHOL PREP .128
H-E-B INCONTROL DELUXE AUTO BP DEVI	HETLIOZ CAPS (Use tasimelteon) 88	HM STERILE PADS PADS .....91
H-E-B INCONTROL PEN NEEDLES.....142	HETLIOZ LQ SUSP .....88	HM ULTICARE INSULIN SYRINGE . 142
H-E-B INCONTROL PREMIUM BP DEVI	HIBERIX SOLR IJ .....184	HM ULTICARE MINI PEN NEEDLES.....142
H-E-B INCONTROL UNIFINE PENTIP	HIBICLENS FOOT PEDAL MISC 127	HM ULTICARE SHORT PEN NEEDLES .....142
HEELBOOT LARGE MISC .....127	HIBICLENS HAND PUMP 16OZ MISC	HOME STYLE BED RAILS MISC 128
HEELBOOT LAUNDRY BAG MISC 127	HIBICLENS HAND PUMP 32OZ MISC	HORIZANT PO .....178
HEELBOOT LINER LARGE MISC 127	HIBICLENS HAND PUMP GALLON MISC	HOT-COLD THERAPY MISC 128
HEELBOOT LINER REGULAR MISC.....127	HIBICLENS HAND PUMP NON FOAM MISC	HUDSON RCI AEROSOL MASK ADULT MISC .....150
HEELBOOT REGULAR MISC ... 127	HIBICLENS PUMP ASSEMBLY MISC	HULIO (2 PEN) AJKT .....4
HEELBOOT WALK PAD MISC ...127	HIBICLENS WALL DISPENSER/FOOT MISC	HULIO (2 SYRINGE) PSKT .....4
HEMADY TABS PO .....61	HIBICLENS WALL DISPENSER/HAND MISC	HUMALOG JUNIOR KWIKPEN SOPN .....28
HEMANGEOL SOLN PO .....55	HIGH POT MULTIVITAMIN/BETA- CAR TABS PO .....163	HUMALOG KWIKPEN SOPN 100 UNIT/ML .....28
HEMLIBRA 30 MG/ML, 60 MG/0.4ML, 105 MG/0.7ML, 150 MG/ML	HIGH POTENCY MULTIVITAMIN TABS PO .....165	HUMALOG KWIKPEN SOPN 200 UNIT/ML .....28
HEMLIBRA 300 MG/2ML .....85	HIPREX PO (Use methenamine hippurate)	HUMALOG MIX 50/50 KWIKPEN SUPN .....28
HEMOPIL M SOLR 250 UNIT, 500 UNIT, 1000 UNIT, 1700 UNIT .....85	HM BLOOD PRESSURE MONITOR DEVI	HUMALOG MIX 50/50 SUSP .....28
HEPARIN SODIUM (PORCINE) PF SOLN IJ	HM BLOOD PRESSURE SERIES 200 DEVI	HUMALOG MIX 75/25 KWIKPEN SUPN .....28
heparin sodium (porcine) SOLN IJ 1000 UNIT/ML, 5000 UNIT/0.5ML, 5000 UNIT/ML, 10000 UNIT/ML,	HM COMFORT FOAM EAR PLUGS MISC	HUMALOG MIX 75/25 SUSP .....28
		HUMALOG SOCT .....28
		HUMALOG SOLN IJ .....28
		HUMALOG TEMPO PEN SOPN .. 28

HUMATE-P SOLR	85	ANESTHETI MISC	128	hydrocodone-acetaminophen TABS PO 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG	9
HUMATROPE CART IJ	78	HURRYCANE FREEDOM EDITION CANE MISC	128	hydrocodone-ibuprofen PO 10 MG- 200 MG, 5 MG-200 MG, 7.5 MG-200 MG	10
HUMIRA (2 PEN) AJKT	4	HW EMBRACE PRO GLUCOSE METER DEVI	107	hydrocortisone (intrarectal) PR	11
HUMIRA (2 SYRINGE) PSKT	4	HW EMBRACE PRO GLUCOSE TEST STRP	75	hydrocortisone (rectal) EX	11
HUMIRA-CD/UC/HS STARTER AJKT	4	HW EMBRACE TALK BLOOD GLUCOSE DEVI	107	hydrocortisone (topical) CREA 1 %, 2.5 %	69
HUMIRA-PED<40KG CROHNS STARTER PSKT	4	HW EMBRACE TALK GLUCOSE TEST STRP	75	hydrocortisone (topical) LOTN 2.5 % .	69
HUMIRA-PED>=40KG CROHNS START PSKT	4	HYCAMPIN CAPS PO	45	hydrocortisone (topical) OINT 1 %, 2.5 %	69
HUMIRA-PED>=40KG UC STARTER AJKT	4	hydralazine hcl TABS PO	39	hydrocortisone butyrate CREA	69
HUMIRA-PS/UV/ADOL HS STARTER AJKT	4	HYDRALYTE FREEZER POPS SOLN PO	158	hydrocortisone butyrate hydrophilic lipo base	69
HUMIRA-PSORIASIS/UVEIT STARTER AJKT	4	HYDRALYTE SOLN PO	158	hydrocortisone butyrate LOTN	69
HUMULIN 70/30 KWIKPEN SUPN	28	HYDREA PO (Use hydroxyurea) ..	45	hydrocortisone butyrate OINT	69
HUMULIN 70/30 SUSP	28	HYDROCELL ADHESIVE DRESSING PADS	91	hydrocortisone butyrate SOLN	69
HUMULIN N KWIKPEN SUPN	28	HYDROCELL DRESSING PADS ..	91	HYDROCORTISONE COMPLETE KIT THPK	69
HUMULIN N SUSP	28	HYDROCERIN CREA	71	hydrocortisone TABS PO	61
HUMULIN R SOLN IJ	29	hydrochlorothiazide CAPS PO	78	hydrocortisone valerate CREA	69
HUMULIN R U-500 (CONCENTRATED) SOLN SC	29	hydrochlorothiazide TABS PO	78	hydrocortisone valerate OINT	69
HUMULIN R U-500 KWIKPEN SOPN SC	29	HYDROCIL POWD PO (Use psyllium)	88	hydrocortisone w/acetic acid	174
HURRICAIN DISPENSING CAP MISC	128	hydrocodone bitartrate CP12 PO ...	8	hydromorphone hcl LIQD PO	8
HURRICAIN LIQUID DISPENSER MISC	128	hydrocodone bitartrate T24A	8	HYDROMORPHONE HCL SUPP PR	8
HURRICAIN SPR EXTENSION TUBES MISC	128	hydrocodone-acetaminophen SOLN PO 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML	9	hydromorphone hcl TABS PO 2 MG, 4 MG	8
HURRIPAK PERIO IRRIGATION TIPS MISC	128	hydrocodone-acetaminophen TABS PO 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG	9	hydromorphone hcl TABS PO 8 MG .	8
HURRIPAK PERIODONTAL				hydromorphone hcl TB24 PO	8

hydroxychloroquine sulfate PO	41	START SOAJ	4	IDACIO-CROHNS/UC STARTER	
HYDROXYM GEL	69	HYSINGLA ER T24A	8	AJKT	4
hydroxyurea PO	45	HYVEE ADVANCED ANTACID		IDACIO-PSORIASIS STARTER	
hydroxyzine hcl SYRP PO	13	SUSP PO (Use alum & mag hydrox- simethicone)	11	AJKT	4
hydroxyzine hcl TABS PO	13	HY-VEE GLUCOSE PO	27	IDELVION	85
hydroxyzine pamoate CAPS PO 100 MG	13	HY-VEE THIN LANCETS	107	IDHIFA	44
hydroxyzine pamoate CAPS PO 25 MG, 50 MG	13	HYZAAR PO (Use losartan potassium & hydrochlorothiazide)	38	IGLUCOSE MONITORING SYSTEM KIT	107
HYFTOR	70	ibandronate sodium TABS PO	78	IGLUCOSE TEST STRIPS STRP	75
hyoscyamine sulfate ELIX PO	180	IBRANCE CAPS	44	IHEALTH CONTROL SOLUTION LIQD	107
hyoscyamine sulfate SOLN PO 0.125 MG/ML	180	IBRANCE TABS	44	IHEALTH COVID-19 RAPID TEST KIT	75
hyoscyamine sulfate SUBL 0.125 MG	181	IBSRELA	83	IHEALTH LANCING DEVICE MISC	107
hyoscyamine sulfate TABS PO 0.125 MG	181	ibuprofen SUSP PO 100 MG/5ML	5	IHEEZO	172
hyoscyamine sulfate TB12 PO 0.375 MG	181	ibuprofen SUSP PO 40 MG/ML, 50 MG/1.25ML	5	ILARIS SOLN	5
hyoscyamine sulfate TBDP PO 0.125 MG	181	ibuprofen TABS PO 400 MG	5	ILEVRO	173
HYPERRHO S/D SOSY IM	174	ibuprofen TABS PO 600 MG	5	ILLUSIONS AA BREAST PROSTHESIS MISC	128
HYPODERMIC NEEDLE	142	ibuprofen TABS PO 800 MG	5	ILLUSIONS C BREAST PROSTHESIS MISC	128
HYPOLANCE AST LANCING KIT 107		ibuprofen-famotidine	5	ILUMYA	66
HYRIMOZ SOAJ	4	icatibant acetate SOSY	85	imatinib mesylate PO	44
HYRIMOZ SOSY	4	ICLUSIG PO	44	IMBRUVICA CAPS	44
HYRIMOZ-CROHNS/UC STARTER SOAJ	4	icosapent ethyl	34	IMBRUVICA SUSP	44
HYRIMOZ-PED<40KG CROHN STARTER SOSY	4	icosapent ethyl 1 GM	34	IMBRUVICA TABS	44
HYRIMOZ-PED>=40KG CROHN START SOSY	4	ICY DIAMOND TOTE CANVAS MISC	128	imipramine hcl TABS PO	25
HYRIMOZ-PLAQ PSOR/UEVIT		ICY DIAMOND TOTE NON LEATHER MISC	128	imipramine pamoate PO	25
		ICY HOT TENS THERAPY REFILL MISC	128	imiquimod 3.75 %	70
		IDACIO (2 PEN) AJKT	4	imiquimod 5 %	70
		IDACIO (2 SYRINGE) PSKT	4	IMITREX 5 MG/ACT, 20 MG/ACT (Use sumatriptan)	156

IMITREX STATDOSE REFILL SOCT (Use sumatriptan succinate) .....156	INCRUSE ELLIPTA 14	INHALATION VIAL CAP/ORANGE MISC .....128
IMITREX STATDOSE SYSTEM SOAJ (Use sumatriptan succinate) 156	indapamide TABS PO 1.25 MG, 2.5 MG 78	INHALATION VIAL CAP/RED MISC . 128
IMITREX TABS PO (Use sumatriptan succinate) 156	INDERAL LA CP24 PO (Use propranolol hcl) 55	INHALATION VIAL CAP/WHITE MISC .....128
IMODIUM A-D CAPS PO (Use loperamide hcl) .....31	INDERAL XL PO .....55	INHALATION VIAL CAP/YELLOW MISC .....128
IMODIUM A-D TABS PO (Use loperamide hcl) .....31	INDICATOR/BIOLOGICAL TEST KIT.....128	INHALATION VIAL W/ CAP/ORANGE MISC .....128
IMOVAX RABIES SUSR 185	indomethacin CAPS PO 25 MG ....6	INHALATION VIAL W/CAP/BLUE MISC .....128
IMURAN TABS PO (Use azathioprine) .....160	indomethacin CAPS PO 50 MG ....5	INHALATION VIAL W/CAP/GREEN MISC .....128
IMVEXXY MAINTENANCE PACK INST 186	indomethacin CPCR PO 6	INHALATION VIAL W/CAP/RED MISC .....128
IMVEXXY STARTER PACK INST 186	indomethacin SUPP PR .....6	INHALATION VIAL W/CAP/WHITE MISC .....128
IN TOUCH BLOOD GLUCOSE TEST STRP .....75	indomethacin SUSP PO .....6	INHALATION VIAL W/CAP/YELLOW MISC .....128
IN TOUCH DEVI .....107	INFANRIX .....180	INHALATION VIAL W/O CAP/AMBER MISC .....128
IN TOUCH GLUCOSE CONTROL SOLN 107	INFANTS ADVIL SUSP PO (Use ibuprofen) .....6	INHALATION WORK STAT/50 HOLES MISC .....128
IN TOUCH LANCING DEVICE MISC 107	INFINITY BLOOD GLUCOSE SYSTEM KIT 107	INLYTA .....42
IN TOUCH STERILE LANCETS 30G.....107	INFINITY BLOOD GLUCOSE TEST STRP .....75	INNOPRAN XL PO 55
INBRIJA CAPS .....46	INFINITY CONTROL SOLN .....107	INNOSPIRE REPLACEMENT FILTER MISC .....150
IN-CHECK DIAL FLOW TRAINER DEVI 150	INFINITY VOICE KIT .....107	INPEN 100-BLUE-LILLY-HUMALOG DEVI 142
IN-CHECK INSPIRATORY FLOW MTR DEVI 150	INFINITY VOICE STRP .....75	INPEN 100-BLUE-NOVOLOG-FIASP DEVI 142
INCONTROL ULTICARE PEN NEEDLES .....142	INFLATABLE NECK REST MISC 128	INPEN 100-GREY-LILLY-HUMALOG DEVI 142
INCRELEX 79	INFLECTRA SOLR 82	INPEN 100-GREY-NOVOLOG- FIASP DEVI .....142
	INFLIXIMAB .....82	
	INGREZZA CAPS 176	
	INGREZZA CPPK 176	
	INHALATION VIAL CAP/BLUE MISC.....128	
	INHALATION VIAL CAP/GREEN MISC .....128	

INPEN 100-PINK-LILLY-HUMALOG DEVI	142	SOPN 100 UNIT/ML	29	INVEGA PO 3 MG, 6 MG, 9 MG (Use paliperidone)	47
INPEN 100-PINK-NOVOLOG-FIASP DEVI	142	INSULIN GLARGINE SOLOSTAR SOPN 300 UNIT/ML	29	INVEGA SUSTENNA	47
INQOVI	43	INSULIN GLARGINE-YFGN SOLN 29		INVEGA TRINZA	47
INREBIC	44	INSULIN GLARGINE-YFGN SOPN 29		INVELTYS SUSP	172
INSPIRACHAMBER/LARGE DEVI 150		INSULIN LISPRO (1 UNIT DIAL) SOPN	29	INVOKAMET TABS	26
INSPIRACHAMBER/MEDIUM DEVI . 151		INSULIN LISPRO JUNIOR KWIKPEN SOPN	29	INVOKAMET XR TB24	26
INSPIRACHAMBER/MOUTHPIECE DEVI	151	INSULIN LISPRO PROT & LISPRO SUPN	29	INVOKANA	30
INSPIRACHAMBER/SMALL DEVI 151		INSULIN LISPRO SOLN IJ	29	IONIL-T SHAM (Use coal tar extract) 72	
INSPIREASE MISC	151	INSULIN SYRINGE	142	IOPIDINE	171
INSPRA PO (Use eplerenone)	39	INSULIN SYRINGE/NEEDLE ...	142	IPOL	185
INSUL-CAP MISC	107	INSULIN SYRINGE-NEEDLE U-100 142		ipratropium bromide (nasal) 0.03 % 169	
INSUL-EZE MISC	107	INSUPEN PEN NEEDLES	142	ipratropium bromide (nasal) 0.06 % 169	
INSULIN ASP PROT & ASP FLEXPEN SUPN	29	INSUPEN SENSITIVE	142	ipratropium bromide SOLN 0.02 % 14	
INSULIN ASPART FLEXPEN SOPN . 29		INSUPEN ULTRAFIN	142	ipratropium-albuterol SOLN	16
INSULIN ASPART PENFILL SOCT 29		INTELENCE PO (Use etravirine) ..	51	irbesartan PO	37
INSULIN ASPART PROT & ASPART SUSP	29	INTELENCE PO 200 MG (Use etravirine)	51	irbesartan-hydrochlorothiazide PO 38	
INSULIN ASPART SOLN IJ	29	INTELENCE PO	51	IRESSA (Use gefitinib)	42
INSULIN DEGLUDEC FLEXTOUCH SOPN	29	INTELISWAB COVID-19 RAPID TEST KIT	75	ISENTRESS CHEW 100 MG	51
INSULIN DEGLUDEC SOLN	29	INTRALIPID 20 %	170	ISENTRESS CHEW 25 MG	51
INSULIN GLARGINE MAX SOLOSTAR SOPN	29	INTRAROSA	186	ISENTRESS HD TABS PO	51
INSULIN GLARGINE SOLN	29	INTUNIV PO (Use guanfacine hcl (adhd))	1	ISENTRESS PACK PO	51
INSULIN GLARGINE SOLOSTAR		INVEGA HAFYERA	47	ISENTRESS TABS PO	51
		INVEGA PO 1.5 MG (Use paliperidone)	47	isoniazid SYRP PO	41
				isoniazid TABS PO	41
				isopropyl alcohol (skin cleanser) MISC	71
				ISORDIL TITRADOSE TABS PO (Use isosorbide dinitrate)	12

isosorbide dinitrate TABS PO .....12	JADENU SPRINKLE PACK (Use deferasirox) 31	JYNARQUE TABS .....80
isosorbide dinitrate-hydralazine hcl PO .....57	JADENU TABS PO (Use deferasirox) .....31	JYNARQUE TBPk .....80
isosorbide mononitrate TABS PO . 12	JAKAFI 44	JYNNEOS .....185
isosorbide mononitrate TB24 PO ..12	JALYN PO (Use dutasteride-tamsulosin hcl) .....84	KABOOTI ICE MISC .....129
isotretinoin PO 10 MG, 20 MG, 30 MG, 40 MG .....63	JANSSEN COVID-19 VACCINE .185	KABOOTI MISC 129
isotretinoin PO 63	JANUMET TABS PO .....26	KALBITOR .....86
isradipine CAPS PO 55	JANUMET XR TB24 PO .....26	KALETRA SOLN PO (Use lopinavir-ritonavir) .....51
ISTALOL SOLN (Use timolol maleate (ophth)) 170	JANUVIA PO .....27	KALETRA TABS PO 25 MG-100 MG (Use lopinavir-ritonavir) .....51
ISTURISA 78	JAR/8OZ/WHITE LID MISC 129	KALETRA TABS PO 50 MG-200 MG (Use lopinavir-ritonavir) .....51
ITOUCH SURE PELVIC EXERCISER MISC 128	JARDIANCE PO 30	KALYDECO PACK 179
itraconazole CAPS PO .....32	JAYPIRCA .....44	KALYDECO TABS .....179
itraconazole SOLN .....32	JENTADUETO TABS .....26	KAMELEON LUBRICATED MISC .93
ivermectin (rosacea) .....71	JENTADUETO XR TB24 .....26	KANESON BREAST PUMP/NURSER MISC 129
ivermectin PO .....12	JESDUVROQ .....86	KANGAROO RIGID CONTAINER MISC .....129
IWILFIN .....45	JIVI .....85	KAPSPARGO SPRINKLE CS24 ..54
IXIARO .....185	JOENJA .....159	KATERZIA .....55
IXINITY SOLR .....85	JOHNSONS SAFETY SWABS SWAB .....129	KAZANO (Use alogliptin-metformin hcl) .....26
IYUZEH SOLN .....173	JORNAY PM CP24 PO 20 MG, 40 MG .....2	KEGEL BALL TRAINER MISC ...129
J & J ANTISEPTIC WIPES MISC 128	JORNAY PM CP24 PO 60 MG, 80 MG, 100 MG .....2	KEGEL FIT MISC .....129
J & J GAUZE PADS .....91	JOURNEY SERIES ROLLING WALKER MISC .....129	KEGEL TONER PELVIC TRAINER MISC .....129
J & J GAUZE SPONGES 12-PLY MISC .....91	JUBLIA .....64	KENALOG AERS (Use triamcinolone acetonide (topical)) .....69
J & J GAUZE SPONGES 16-PLY MISC .....91	JUG AMBER GLASS 4L MISC ...129	KENDALL HYDROPHILIC FOAM DRESS PADS .....91
J & J GAUZE SPONGES 8-PLY MISC .....91	JULUCA .....51	KEPPRA SOLN PO 100 MG/ML (Use levetiracetam) .....19
J & J INSTANT COLD PACK MISC 128	JUXTAPID PO 5 MG, 10 MG, 20 MG, 30 MG .....36	
J & J TOURNIQUET MISC .....128	JYLAMVO SOLN .....42	

KEPPRA TABS PO 1000 MG (Use levetiracetam)	19	KIMONO MICRO THIN PLUS MISC . 94	KMART VALU INSULIN SYRINGE 29G	142
KEPPRA TABS PO 250 MG, 750 MG (Use levetiracetam)	19	KIMONO MISC	KMART VALU INSULIN SYRINGE 30G	142
KEPPRA TABS PO 500 MG (Use levetiracetam)	19	KIMONO PLUS MISC	KOATE SOLR	85
KEPPRA XR TB24 PO (Use levetiracetam)	19	KIMONO PS MISC	KOATE-DVI SOLR 1000 UNIT	85
KERENDIA PO	80	KIMONO PS PLUS MISC	KOGENATE FS KIT	85
KERLIX SPONGES PADS	91	KIMONO SENSATION MISC	KOMBIGLYZE XR PO (Use saxagliptin-metformin hcl)	26
KERYDIN (Use tavaborole)	64	KIMONO SENSATION PLUS MISC 94	KONSYL DAILY FIBER PACK PO 100 %	88
KESIMPTA	177	KIMONO SPECIAL DEVI	KONSYL ORIGINAL DAILY FIBER PACK PO	88
ketoconazole (topical) CREA	64	KINDERLYTE PREMAX SOLN PO 158	KONVOMEK SUSR	182
ketoconazole (topical) FOAM	64	KINDERLYTE SOLN PO	KORLYM (Use mifepristone (hyperglycemia))	27
ketoconazole (topical) SHAM 2 % .	64	KINERET SOSY	5	
ketoconazole PO	32	KINNEY LANCETS	107	
KETODAN	64	KINRAY INSULIN SYRINGE	142	
KETONE TEST STRP	75	KINRIX SUSY	180	
ketoprofen CP24 PO	6	KISQALI (200 MG DOSE)	44	
ketorolac tromethamine (ophth) .	173	KISQALI (400 MG DOSE)	44	
KETOROLAC TROMETHAMINE SOLN NA 15.75 MG/SPRAY	6	KISQALI (600 MG DOSE)	44	
ketorolac tromethamine TABS PO ..	6	KISQALI FEMARA (200 MG DOSE) . 43	K-KPHOS NO 2 PO	83
KETOSTIX STRP	75	KISQALI FEMARA (400 MG DOSE) . 43	K-KPHOS-NEUTRAL PO (Use pot phosphate monobasic w/ sod phosphate dibasic & monobasic) .	158
KEVEYIS PO (Use dichlorphenamide)	77	KISQALI FEMARA (600 MG DOSE) . 43	KRAZATI	44
KEVZARA SOAJ	5	KITABIS PAK NEBU (Use tobramycin)	3	
KEVZARA SOSY	5	KLARON (Use sulfacetamide sodium (acne))	63	
KIMONO COLORS DEVI	93	KLONOPIN TABS PO (Use clonazepam)	18	
KIMONO MAXX-LARGE FLARE MISC	94	KLOXXADO LIQD	31	
KIMONO MICRO THIN MISC	94			
			KROGER AUTOLET LANCING DEVICE MISC	107
			KROGER BLOOD GLUCOSE KIT 107	
			KROGER BLOOD GLUCOSE TEST STRP	75
			KROGER BLOOD PRESSURE MONITOR DEVI	93
			KROGER GLUCOSE PO	27
			KROGER HEALTHPRO CONTROL	

HI/LO LIQD	108	MISC	129	(Use lamotrigine)	19
KROGER HEALTHPRO GLUCOSE TEST STRP	75	LAB COAT-DISPOSABLE XL MISC . 129		LAMICTAL TABS PO (Use lamotrigine)	20
KROGER INSULIN SYRINGE ...	142	LAB COAT-DISPOSABLE XXL MISC	129	LAMICTAL XR KIT PO	20
KROGER LANCETS	108	labetalol hcl TABS PO 100 MG ...	54	LAMICTAL XR TB24 PO (Use lamotrigine)	20
KROGER LANCETS 21G	108	labetalol hcl TABS PO 200 MG ...	54	LAMISIL AT CREA (Use terbinafine hcl (topical))	65
KROGER LANCETS MICRO THIN 33G	108	labetalol hcl TABS PO 300 MG ...	54	LAMISIL AT JOCK ITCH CREA (Use terbinafine hcl (topical))	65
KROGER LANCETS THIN	108	lacosamide SOLN PO 10 MG/ML .	19	lamivudine (hbv) TABS PO	53
KROGER LANCETS THIN 26G .	108	lacosamide TABS PO	19	lamivudine SOLN PO	51
KROGER LANCETS ULTRATHIN 30G	108	LACRISERT	170	lamivudine TABS PO 150 MG	51
KROGER LANCING DEVICE MISC 108		LACTAID FAST ACT TABS PO (Use lactase)	77	lamivudine TABS PO 300 MG	51
KROGER PEN NEEDLES	142	LACTAID TABS PO (Use lactase) .	77	lamivudine-zidovudine PO	51
KROGER PREMIUM BLOOD GLUCOSE KIT	108	lactase TABS PO 3000 UNIT	77	lamotrigine CHEW PO	20
KROGER PREMIUM GLUCOSE TEST STRP	75	lactic acid (ammonium lactate) CREA	70	lamotrigine KIT PO 25 MG	20
K-TAB TBCR PO 10 MEQ, 20 MEQ (Use potassium chloride)	159	lactic acid (ammonium lactate) LOTN 12 %	70	lamotrigine KIT PO	20
KUVAN PACK (Use sapropterin dihydrochloride)	79	lactulose (encephalopathy) PO ...	83	lamotrigine TABS PO	20
KUVAN TABS (Use sapropterin dihydrochloride)	79	LADYCARE MENOPAUSE MISC 129		lamotrigine TB24 PO	20
K-Y ME & YOU EXTRA LUBRICATED DEVI	94	LAGEVRIO	54	lamotrigine TBDP PO	20
K-Y ME & YOU INTENSE DEVI ...	94	LAMICTAL CHEW PO (Use lamotrigine)	20	LAMPIT	40
LAB COAT-DISPOSABLE LARGE MISC	129	LAMICTAL ODT KIT PO (Use lamotrigine)	19	LANCET DEVICE MISC	108
LAB COAT-DISPOSABLE MEDIUM MISC	129	LAMICTAL ODT TBDP PO (Use lamotrigine)	19	LANCET DEVICE WITH EJECTOR MISC	108
LAB COAT-DISPOSABLE MISC .	129	LAMICTAL STARTER KIT PO (Use lamotrigine)	19	LANCET TRANSPORTER CASE MISC	108
LAB COAT-DISPOSABLE SMALL		LAMICTAL STARTER KIT PO (Use lamotrigine)	20	LANCETS	108
		LAMICTAL STARTER KIT PO 25 MG		LANCETS 30G	108
				LANCETS MICRO THIN 33G ...	108
				LANCETS SUPER THIN 28G ...	108
				LANCETS THIN	108

LANCETS ULTRA THIN	108	LATUDA PO (Use lurasidone hcl) .	47	leucovorin calcium TABS PO	45
LANCETS ULTRA THIN 30G	108	LATUDA PO 40 MG, 80 MG (Use		LEUKERAN PO	42
LANCING DEVICE MISC	108	lurasidone hcl)	47	LEUKINE SOLR IJ	86
LANREOTIDE ACETATE	80	LEADER ADVANCED LANCING		levabuterol hcl	16
LANSINOH BREASTFEEDING		DEVICE MISC	108	levabuterol tartrate	16
PILLOW MISC	129	LEADER GLUCOSE PO 6 MG-4 GM		levamlodipine maleate	55
LANSINOH BREASTMILK		27		LEVEMIR FLEXPEN SOPN	29
COLLECTOR MISC	129	LEADER INSULIN SYRINGE	142	LEVEMIR FLEXTOUCH SOPN ...	29
LANSINOH EXTRA PUMPING SET		LEADER QUICK DISSOLVE		LEVEMIR SOLN	29
MISC	129	GLUCOSE CHEW PO	27	levetiracetam SOLN PO 100 MG/ML,	
LANSINOH MANUAL BREAST		LEADER UNIFINE PENTIPS	143	500 MG/5ML	20
PUMP MISC	129	LEADER UNIFINE PENTIPS PLUS .		levetiracetam TABS PO 1000 MG .	20
LANSINOH POSTPART WASH		143		levetiracetam TABS PO 250 MG, 750	
BOTTLE MISC	129	LEDIPASVIR-SOFOSBUVIR TABS		MG	20
LANSINOH PUMP ADAPTERS		53		levetiracetam TABS PO 500 MG ..	20
MISC	129	leflunomide PO	6	levetiracetam TB24 PO	20
LANSINOH SMART PUMP TOTE		LEMTRADA	177	levobunolol hcl 0.5 %	170
BAGS MISC	129	lenalidomide PO	159	levocarnitine (metabolic modifiers)	
LANSINOH SMARTPUMP 2.0 MISC .		LENVIMA (10 MG DAILY DOSE) .	42	SOLN PO 1 GM/10ML	79
129		LENVIMA (12 MG DAILY DOSE) .	42	levocarnitine (metabolic modifiers)	
LANSINOH SMARTPUMP MISC .	129	LENVIMA (14 MG DAILY DOSE) .	42	TABS PO	79
lansoprazole CPDR PO	181	LENVIMA (18 MG DAILY DOSE) .	42	levofloxacin SOLN PO	81
lansoprazole TBDD	182	LENVIMA (20 MG DAILY DOSE) .	42	levofloxacin TABS PO	81
lanthanum carbonate CHEW PO ..	83	LENVIMA (24 MG DAILY DOSE) .	42	levonorgestrel & eth estradiol TABS	
LANTUS SOLN	29	LENVIMA (4 MG DAILY DOSE) ..	42	PO	59
LANTUS SOLOSTAR SOPN	29	LENVIMA (8 MG DAILY DOSE) ..	42	levonorgestrel (emergency oc) PO	
LANZO MISC	108	LEQEMBI	176	1.5 MG	60
lapatinib ditosylate	44	LEQVIO	36	levonorgestrel-eth estradiol	
LASIX TABS PO (Use furosemide)		LESCOL XL TB24 PO (Use		(triphasic) PO	59
77		fluvastatin sodium)	35	levonorgestrel-ethinyl estradiol (91-	
latanoprost SOLN	173	LETAIRIS PO (Use ambrisentan) .	57	day) PO 0.03 MG-0.15 MG	59
LATCH ASSIST NIPPLE EVERTER		letrozole PO	43	levonorgestrel-ethinyl estradiol (91-	
MISC	129			day) PO	59

levonorgestrel-ethinyl estradiol (continuous) PO	59	TEST STRP	75	lindane SHAM	71
levonorgestrel-ethinyl estradiol-iron PO	59	LIBERTY NXT GENERATION MONITOR DEVI	108	linezolid SUSR	40
levorphanol tartrate TABS PO	8	LIBERTY TEST STRP	75	linezolid TABS PO	40
levothyroxine sodium CAPS PO ..	180	LIBRAX PO (Use chlordiazepoxide hcl-clidinium bromide)	181	LINZESS	83
levothyroxine sodium TABS PO ..	180	LICART PT24	65	LIORESAL SOLN IT (Use baclofen) 168	
LEVSIN SOLN IJ 0.5 MG/ML (Use hyoscyamine sulfate)	181	lidocaine hcl (mouth-throat) 2 % ..	160	liothyronine sodium TABS PO	180
LEVSIN TABS PO (Use hyoscyamine sulfate)	181	lidocaine hcl (mouth-throat) 4 % ..	160	LIPITOR TABS PO (Use atorvastatin calcium)	35
LEVSIN/SL SUBL (Use hyoscyamine sulfate)	181	lidocaine hcl CREA 3 %	71	LIPOFEN CAPS PO (Use fenofibrate)	35
LEVULAN KERASTICK SOLR	66	lidocaine hcl CREA 4.12 %	70	LIPOFEN CAPS PO 50 MG (Use fenofibrate)	35
LEXAPRO TABS PO 20 MG (Use escitalopram oxalate)	24	lidocaine hcl GEL 2.8 %	71	LIQREV SUSP	57
LEXAPRO TABS PO 5 MG, 10 MG (Use escitalopram oxalate)	24	lidocaine hcl PRSY	71	liraglutide	28
LEXETTE FOAM (Use halobetasol propionate)	69	lidocaine hcl SOLN	71	lisdexamphetamine dimesylate CAPS PO	1
LEXIVA SUSP PO	51	lidocaine OINT	71	lisdexamphetamine dimesylate CHEW . 1	
LEXIVA TABS PO (Use fosamprenavir calcium)	51	lidocaine PTCH 5 %	71	lisinopril & hydrochlorothiazide PO	38
LIALDA TBEC PO (Use mesalamine)	82	LIDOCAINE-HYDROCORTISONE ACE GEL PR	11	lisinopril TABS PO 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG	36
LIBERTY BLOOD GLUCOSE METER DEVI	108	lidocaine-hydrocortisone acetate (rectal) CREA EX	11	LITE TOUCH LANCETS	109
LIBERTY GLUCOSE CONTROL MID SOLN	108	lidocaine-hydrocortisone acetate (rectal) KIT PR	11	LITE TOUCH LANCING PEN MISC 109	
LIBERTY GLUCOSE CONTROL SOLN	108	lidocaine-prilocaine CREA	71	LITE'N UP 50 MISC	129
LIBERTY MEDICAL LANCETS ..	108	lidocaine-prilocaine KIT	71	LITE'N UP 90 MISC	129
LIBERTY MINI LANCING DEVICE MISC	108	LIDODERM PTCH (Use lidocaine)	71	LITETOUCH INSULIN SYRINGE 143	
LIBERTY NEXT GENERATION		LIDOTRAL CREA	71	LITETOUCH LANCETS	109
		LIDOTRAL-MENTHOL LIQD	71	LITETOUCH MASK LARGE MISC 151	
		LIDOTRAN CREA	71	LITETOUCH MASK MEDIUM MISC . 151	
		LIFESCAN UNISTIK 2	108		
		LIFESCAN UNISTIK II LANCETS 109			
		LIKMEZ SUSP	39		

LITETOUCH MASK SMALL MISC 151	LONGS GLUCOSE PO .....27	losartan potassium & hydrochlorothiazide PO .....38
LITETOUCH PEN NEEDLES ....143	LONGS INSULIN SYRINGE .....143	losartan potassium PO .....37
lithium carbonate CAPS PO .....47	LONGS LANCETS THIN 109	LOSEASONIQUE PO (Use levonorgestrel-ethinyl estradiol (91- day)) .....59
lithium carbonate TABS PO .....47	LONSURF .....43	LOTEMAX GEL (Use loteprednol etabonate) 172
lithium carbonate TBCR PO .....47	loperamide hcl CAPS PO .....31	LOTEMAX OINT .....172
LITHIUM CITRATE TETRAHYDRATE .....58	loperamide hcl TABS PO 31	LOTEMAX SM GEL 172
lithium PO .....47	LOPID TABS PO (Use gemfibrozil) 35	LOTEMAX SUSP (Use loteprednol etabonate) 172
LITHOBID TBCR PO (Use lithium carbonate) .....47	lopinavir-ritonavir SOLN PO 51	LOTENSIN HCT PO 12.5 MG-10 MG, 12.5 MG-20 MG, 25 MG-20 MG (Use benazepril & hydrochlorothiazide) 38
LITHOSTAT .....84	lopinavir-ritonavir TABS PO 25 MG- 100 MG .....51	LOTENSIN PO 10 MG, 20 MG, 40 MG (Use benazepril hcl) .....36
LITTLE REMEDIES SALINE SOLN 169	lopinavir-ritonavir TABS PO 50 MG- 200 MG .....51	loteprednol etabonate GEL .....172
LIVALO PO (Use pitavastatin calcium) .....35	LOPRESSOR TABS PO 100 MG (Use metoprolol tartrate) .....54	loteprednol etabonate SUSP 0.5 % 172
LIVE BETTER ADV LANCING DEVICE MISC .....109	LOPRESSOR TABS PO 50 MG (Use metoprolol tartrate) .....54	LOTREL PO 10 MG-5 MG, 20 MG-5 MG (Use amlodipine besylate- benazepril hcl) 38
LIVE BETTER LANCET SUPER THIN .....109	LOPROX .....65	LOTREL PO 20 MG-10 MG, 40 MG- 10 MG (Use amlodipine besylate- benazepril hcl) 38
LIVE BETTER LANCET ULTRA THIN .....109	LOPROX CREA (Use ciclopirox olamine) .....65	LOTRIMIN AF JOCK ITCH CREA (Use clotrimazole (topical)) 65
LIVER DETOX TABS PO .....163	LOPROX SHAM (Use ciclopirox) ..65	LOTRONEX PO (Use alosetron hcl) . 83
LIVTENCITY .....53	LOPROX SUSP (Use ciclopirox olamine) .....65	lovastatin TABS PO .....36
LMA MAD NASAL MISC 129	loratadine CHEW PO 34	LOVAZA PO (Use omega-3-acid ethyl esters) .....34
LO LOESTRIN FE TABS 59	loratadine SOLN PO 34	LOVENOX SOLN IJ 300 MG/3ML (Use enoxaparin sodium) 18
LOCOID LIPOCREAM .....69	loratadine TABS PO 34	
LOCOID LOTN (Use hydrocortisone butyrate) .....69	loratadine TBDP PO 10 MG .....34	
LODOSYN PO (Use carbidopa) ...45	lorazepam CONC PO .....13	
LOKELMA .....160	lorazepam TABS PO .....13	
LOMOTIL TABS PO (Use diphenoxylate w/ atropine) .....31	LORBRENA .....44	
	LOREEV XR CS24 .....13	
	LOS YANKAUER HOLDER MISC 129	

LOVENOX SOSY 100 MG/ML, 150 MG/ML (Use enoxaparin sodium) .	18	MG-5 MG-1 MG-15 MG-1 MG-750 MCG-20 MG	163	MAGELLAN INSULIN SAFETY SYR	143
LOVENOX SOSY 120 MG/0.8ML (Use enoxaparin sodium)	18	LUXIQ FOAM (Use betamethasone valerate)	69	magnesium citrate PO 1.745 GM/30ML	89
LOVENOX SOSY 30 MG/0.3ML (Use enoxaparin sodium)	18	LUZU (Use luliconazole)	65	magnesium hydroxide SUSP PO 7.75 %, 400 MG/5ML, 1200 MG/15ML	89
LOVENOX SOSY 40 MG/0.4ML (Use enoxaparin sodium)	18	LYBALVI	176	magnesium oxide (mg supplement) TABS PO	158
LOVENOX SOSY 60 MG/0.6ML (Use enoxaparin sodium)	18	LYNPARZA TABS PO	44	magnesium oxide TABS PO 400 MG 12	
LOVENOX SOSY 80 MG/0.8ML (Use enoxaparin sodium)	18	LYRICA CAPS PO (Use pregabalin) . 20		magnesium sulfate IJ 50 %	158
loxapine succinate PO	48	LYRICA CAPS PO 25 MG, 50 MG, 150 MG (Use pregabalin)	20	MAGNESIUM SULFATE IJ 50 % .	158
lubiprostone PO	82	LYRICA CR (Use pregabalin (once-daily))	177	magnesium TABS PO 250 MG ...	158
LUCEMYRA (Use lofexidine hcl)	175	LYRICA SOLN (Use pregabalin) ..	20	MAGNIFIER HANDS-FREE MISC 129	
LUCIRA CHECK IT COVID-19 TEST KIT	75	LYSODREN PO	43	MAGOX 400 TABS PO (Use magnesium oxide (mg supplement)) .	158
LUCIRA COVID-19 ALL-IN-ONE KIT 75		LYTGOBI (12 MG DAILY DOSE) .	44	MALARONE PO (Use atovaquone-proguanil hcl)	41
LUER TIP CAP TRAY MISC	129	LYTGOBI (16 MG DAILY DOSE) .	44	malathion	72
luliconazole	65	LYTGOBI (20 MG DAILY DOSE) .	44	MARATHON MEDICAL PENTIPS 143	
LULLABY DBL ELECT BREAST PUMP MISC	129	LYUMJEV KWIKPEN SOPN	29	maraviroc TABS PO	51
LUMAKRAS 120 MG, 320 MG	44	LYUMJEV SOLN	29	MARINOL CAPS PO 2.5 MG (Use dronabinol)	32
LUMBAR CUSHION MISC	129	LYUMJEV TEMPO PEN SOPN ...	29	MARINOL CAPS PO 5 MG, 10 MG (Use dronabinol)	32
LUMBAR SUPPORT CUSHION MISC	129	LYVISPAH PACK	168	MARPLAN PO	23
LUMIGAN SOLN 0.01 %	173	MACROBID PO (Use nitrofurantoin monohyd macro)	40	MASK VORTEX/CHILD/FROG ..	151
LUNESTA PO (Use eszopiclone) ..	88	MACRODANTIN PO (Use nitrofurantoin macrocrystal)	40	MASK	
LUNG PERFORM PEAK FLOW METER	151	MAD NASAL ATOMIZATION DEVICE MISC	129	VORTEX/TODDLER/LADYBUG .	151
LUPKYNIS	160	MAD NASAL MISC	129	MASSAGER MISC	129
lurasidone hcl PO	47	mafenide acetate PACK	67	MATTRESS COVER MISC	129
LUTEIN-ZEAXANTHIN TABS PO 60		MAG-200 TABS PO (Use magnesium oxide (mg supplement)) .	158		

MATTRESS PAD MISC	129	triamterene & hydrochlorothiazide) 77	MEDISENSE HI/MID/LOW CONTROL LIQD	109
MATULANE PO	45	MAXZIDE-25 TABS PO (Use triamterene & hydrochlorothiazide) 77	MEDLANCE EXTRA 21G	109
MAVENCLAD (10 TABS) PO	177	MAYZENT STARTER PACK TBPK 0.25 MG	MEDLANCE LITE 25G	109
MAVENCLAD (4 TABS) PO	177	MAYZENT TABS PO	MEDLANCE PLUS EXTRA 21G .	109
MAVENCLAD (5 TABS) PO	177	MAZERUSTAR MIXER/MIX CONTAINER MISC	MEDLANCE PLUS LITE 25G	109
MAVENCLAD (6 TABS) PO	177	meclizine hcl TABS PO 12.5 MG, 25 MG, 50 MG	MEDLANCE PLUS SPECIAL 0.8MM	109
MAVENCLAD (7 TABS) PO	177	meclofenamate sodium CAPS PO .	MEDLANCE PLUS SUPERLITE 30G	109
MAVENCLAD (8 TABS) PO	177	MEDELA DOUBLE BREAST PUMP MISC	MEDLANCE PLUS UNIVERSAL 21G	109
MAVENCLAD (9 TABS) PO	177	MEDELA LACTINA DOUBLE PUMPING MISC	MEDROL TABS PO (Use methylprednisolone)	61
MAVYRET PACK	53	MEDELA PUMP IN STYLE MISC 130	MEDROL TABS PO	61
MAVYRET TABS PO	53	MEDIC INSULIN SYRINGE	MEDROL TBPK PO (Use methylprednisolone)	61
MAXALT TABS PO 10 MG (Use rizatriptan benzoate)	156	MEDICHOICE SAFETY LANCET 109	medroxyprogesterone acetate (contraceptive) SUSP IM	60
MAXALT TABS PO 10 MG (Use rizatriptan benzoate)	157	MEDICHOICE SAFETY LANCET NORM	medroxyprogesterone acetate (contraceptive) SUSY IM	61
MAXALT-MLT TBDP PO 10 MG (Use rizatriptan benzoate)	156	MEDICINE DROPPER MISC	medroxyprogesterone acetate PO 2.5 MG, 5 MG, 10 MG	175
MAXICOMFORT II PEN NEEDLE 143		MEDICINE DROPPER/CALIBRATED MISC	mefenamic acid CAPS PO	6
MAXI-COMFORT INSULIN SYRINGE	143	MEDICINE SHOPPE PEN NEEDLES	mefloquine hcl PO	41
MAXI-COMFORT SAFETY PEN NEEDLE	143	MEDI-COOLER MISC	MEGA MULTI FOR WOMEN TABS PO	163
MAXICOMFORT SYR 27G X 1/2" 143		MEDI-FRIDGE IIX MISC	MEGAVITE FRUITS & VEGGIES TABS PO	163
MAXIDEX SUSP OP	172	MEDI-RDT BLISTER PACKS MISC 130	MEGAVITE GOLDEN YEARS 55+ TABS PO	163
MAXITROL OINT (Use neomycin- polymy-dexameth)	172	MEDISENSE GLUCOSE KETONE CONTR LIQD	megestrol acetate (appetite) PO .	175
MAXITROL SUSP (Use neomycin- polymy-dexameth)	172		megestrol acetate SUSP PO	43
MAXX MISC	94		megestrol acetate TABS PO	43
MAXX PLUS MISC	94			
MAXZIDE TABS PO (Use				

MEIJER ALCOHOL SWABS .....130	memantine hcl SOLN PO 2 MG/ML 176	pyridostigmine bromide) 41
MEIJER BLOOD GLUCOSE KIT .109	memantine hcl TABS PO .....176	METADATE CD CPR PO 10 MG, 20 MG, 30 MG (Use methylphenidate hcl) .....2
MEIJER BLOOD GLUCOSE TEST STRP .....75	MENACTRA .....184	METADATE CD CPR PO 40 MG (Use methylphenidate hcl) 2
MEIJER ESSENTIAL BLOOD GLUCOSE KIT .....109	MENEST PO .....81	METADATE CD CPR PO 50 MG, 60 MG (Use methylphenidate hcl) .. 2
MEIJER ESSENTIAL GLUCOSE TEST STRP .....75	MENOSTAR PTWK .....81	METAL REACHER MISC 130
MEIJER GLUCOSE PO .....27	MENQUADFI .....184	METAMUCIL POWD PO (Use psyllium) .....88
MEIJER LANCETS THIN 109	MENS 50+ MULTI VITAMIN/MIN TABS PO 163	metaxalone PO 168
MEIJER LANCETS UNIVERSAL 30G.....109	MENS 50+ MULTIVITAMIN TABS PO 163	METERED NASAL SPRAY PUMP 15ML MISC 130
MEIJER LANCETS UNIVERSAL 33G.....109	MENVEO SOLN 184	metformin hcl SOLN PO .....26
MEIJER PEN NEEDLES .....143	MENVEO SOLR 184	metformin hcl TABS PO 1000 MG .26
MEIJER PREMIUM BLOOD GLUCOSE KIT .....109	meperidine hcl SOLN PO 50 MG/5ML 8	metformin hcl TABS PO 500 MG ..26
MEIJER TRUE2GO BLOOD GLUCOSE KIT .....109	meperidine hcl TABS PO 50 MG ...8	metformin hcl TABS PO 625 MG ..26
MEIJER TRUERESULT GLUCOSE SYS KIT .....109	meprobamate PO 13	metformin hcl TABS PO 850 MG ..26
MEIJER TRUETEST TEST STRP .75	MEPRON PO (Use atovaquone) ..40	metformin hcl TB24 PO 500 MG, 1000 MG 26
MEIJER TRUETRACK GLUCOSE SYS KIT .....109	mercaptapurine TABS PO .....42	metformin hcl TB24 PO 500 MG ..26
MEIJER TRUETRACK TEST STRP 75	mesalamine CP24 83	metformin hcl TB24 PO 750 MG ..26
MEKINIST SOLR .....44	mesalamine CPR PO 83	methadone hcl CONC PO .....8
MEKINIST TABS PO .....44	mesalamine CPDR PO 83	methadone hcl SOLN PO .....8
MEKTOVI .....44	mesalamine ENEM PR 83	methadone hcl TABS PO 8
meloxicam CAPS PO .....6	mesalamine SUPP PR .....83	methadone hcl TBSO PO .....8
meloxicam TABS PO .....6	mesalamine TBEC PO .....83	METHADOSE CONC PO (Use methadone hcl) .....8
melphalan PO .....42	mesalamine w/ cleanser PR 83	METHADOSE SUGAR-FREE CONC PO (Use methadone hcl) .....8
memantine hcl CP24 PO 176	MESNEX TABS PO .....45	methamphetamine hcl PO .....1
	MESTINON SOLN PO (Use pyridostigmine bromide) 41	methazolamide TABS PO .....77
	MESTINON TABS PO (Use pyridostigmine bromide) 41	
	MESTINON TBCR PO (Use	

methenamine hippurate PO	40	methylphenidate hcl CP24 PO 40 MG, 60 MG	2	metoprolol tartrate TABS PO 25 MG, 50 MG	54
methenamine mandelate	40	methylphenidate hcl CP24 PO	2	metoprolol tartrate TABS PO 37.5 MG, 75 MG	54
methenamine-hyoscamine-methylene blue-sodium phosphate TABS PO .	39	methylphenidate hcl CPCR PO 10 MG, 20 MG, 30 MG	2	METROLOTION LOTN (Use metronidazole (topical))	71
methenamine-hyosc-methylene blue- benzoic acid-phenyl sal PO	39	methylphenidate hcl CPCR PO 40 MG	2	metronidazole (topical) CREA	71
methenamine-hyosc-methylene blue- sod phos-phenyl sal CAPS PO	39	methylphenidate hcl CPCR PO 50 MG, 60 MG	2	metronidazole (topical) GEL	71
methenamine-hyosc-methylene blue- sod phos-phenyl sal TABS PO 81.6 MG	40	methylphenidate hcl SOLN PO	2	metronidazole (topical) LOTN	71
methimazole TABS PO	179	methylphenidate hcl TABS PO 20 MG	2	metronidazole CAPS PO	39
methocarbamol TABS PO 500 MG, 750 MG	168	methylphenidate hcl TABS PO 5 MG, 10 MG	2	metronidazole TABS PO	39
methotrexate sodium SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML	42	methylphenidate hcl TB24 PO	2	metronidazole vaginal	186
METHOTREXATE SODIUM SOLN 50 MG/2ML	42	methylphenidate hcl TBCR PO 10 MG, 20 MG	2	metyrosine PO	37
methotrexate sodium TABS PO 2.5 MG	42	methylphenidate hcl TBCR PO 18 MG, 27 MG, 36 MG, 54 MG	2	mexiletine hcl PO	13
methoxsalen rapid PO	66	methylphenidate hcl TBCR PO 45 MG, 63 MG, 72 MG	2	MICARDIS HCT PO (Use telmisartan-hydrochlorothiazide) ..	38
methscopolamine bromide PO ...	181	methylphenidate PTCH	2	MICARDIS PO (Use telmisartan) ..	37
methsuximide	22	methylprednisolone TABS PO	61	MICATIN CREA (Use miconazole nitrate (topical))	65
methylcellulose (laxative) POWD PO 88		methylprednisolone TBPk PO	61	miconazole nitrate (topical) CREA .	65
methylcellulose (laxative) TABS PO 88		methyltestosterone CAPS PO	10	miconazole nitrate vaginal SUPP 200 MG	186
METHYLCELLULOSE POWD ...	175	methyltestosterone TABS	10	miconazole-zinc oxide-white petrolatum	65
methyldopa TABS PO	37	metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML	82	MICRHOGAM ULTRA-FILTERED PLUS SOSY IM	174
METHYLIN SOLN PO (Use methylphenidate hcl)	2	metoclopramide hcl TABS PO	82	MICROCHAMBER DEVI	151
methylphenidate hcl CHEW PO	2	metolazone PO	78	MICROCHAMBER MISC	151
methylphenidate hcl CP24 PO 10 MG, 20 MG, 30 MG	2	metoprolol & hydrochlorothiazide TABS PO	38	MICROCLENS WALL MOUNT BRACKET MISC	130
		metoprolol succinate TB24 PO	54	MICRODOT BLOOD GLUCOSE SYSTEM KIT	109
		metoprolol tartrate TABS PO 100 MG.			

MICRODOT CONTROL HIGH/LOW SOLN	110	MINIELITE FILTER REPLACEMENTS MISC	151	mirtazapine TABS PO	22
MICRODOT PEN NEEDLE	143	MINILINK REAL-TIME TRANSMITTER	110	mirtazapine TBDP PO	22
MICRODOT TEST STRP	75	MINIMED 630G GUARDIAN PRESS	110	misoprostol PO	182
MICROLET NEXT LANCING DEVICE MISC	110	MINIPRESS CAPS PO (Use prazosin hcl)	37	MITIGARE CAPS (Use colchicine)	85
MICROLIFE BP MONITOR DEVI ..	93	MINIVELLE PTTW (Use estradiol)	81	MIXER/MAZERUSTAR EMP JAR ADP MISC	130
MICROLIFE BPM6 PREMIUM MONITOR DEVI	93	minocycline hcl CAPS PO	179	MIXER/MAZERUSTAR KK-250S-300SS MISC	130
MICROLIFE DELUXE BP MONITOR DEVI	93	minocycline hcl TABS PO	179	MIXER/MAZERUSTAR KK-300SS MISC	130
MICROLIFE DIGITAL PEAK FLOW	151	minocycline hcl TB24 PO	179	MIXER/MAZERUSTAR KK-400W MISC	130
MICROLIFE WRIST BP MONITOR DEVI	93	MINOLIRA TB24 PO	179	MIXER/MAZERUSTAR MD PUMP ADP MISC	130
MICROSPACER MISC	151	minoxidil PO 2.5 MG, 10 MG	39	MIXER/MAZERUSTAR/JAR ADP SET MISC	130
midazolam hcl SYRP PO	88	mirabegron TB24 PO	183	MIXER/MAZERUSTAR/JAR MXING ADP MISC	130
midodrine hcl PO	186	MIRALAX MIX-IN PAX PACK PO (Use polyethylene glycol 3350) ...	89	MIXER/MAZERUSTAR/UNODOSE ADAPT MISC	130
MIFEPREX (Use mifepristone) ...	80	MIRALAX PACK PO (Use polyethylene glycol 3350)	89	MM BLOOD GLUCOSE SYSTEM KIT	110
mifepristone (hyperglycemia)	27	MIRALAX POWD PO (Use polyethylene glycol 3350)	89	MM EASY TOUCH GLUCOSE METER KIT	110
mifepristone	80	MIRAPEX ER TB24 PO 0.375 MG, 0.75 MG, 2.25 MG, 3 MG, 3.75 MG, 4.5 MG (Use pramipexole dihydrochloride)	46	MM EASY TOUCH GLUCOSE STRP	75
miglitol PO	25	MIRAPEX ER TB24 PO 1.5 MG (Use pramipexole dihydrochloride)	46	MM INSULIN SYRINGE/NEEDLE	143
MIGRANAL SOLN NA (Use dihydroergotamine mesylate)	156	MIRASORB SPONGES MISC	91	MM LANCING DEVICE MISC	110
MINASTRIN 24 FE CHEW PO (Use norethin acet & estrad-fe)	59	MIRCERA 120 MCG/0.3ML	86	MM PEN NEEDLES	143
MINI DIFFUSER MISC	130	MIRCERA 30 MCG/0.3ML, 50 MCG/0.3ML, 75 MCG/0.3ML, 100 MCG/0.3ML, 150 MCG/0.3ML, 200 MCG/0.3ML	87	MM TWIST LANCETS	110
MINI LANCING DEVICE MISC ...	110	MIRCETTE PO (Use desogestrel-ethinyl estradiol (biphasic))	59	M-M-R II SOLR	185
MINI MALLET 3/4" PLASTIC MISC	130			MN8 MISC	130
MINI TRANSFER PIN MISC	130			M-NATAL PLUS TABS PO	166
MINI WRIGHT PEAK FLOW METER	151				

modafinil PO	2	SET MISC	130	morphine sulfate TABS PO	9
MODERNA COVID-19 BIVAL 6M-5Y	185	MONOJECT BLOOD COLLECTION TUBE MISC	130	morphine sulfate TBCR PO	9
MODERNA COVID-19 BIVALENT 185		MONOJECT BLOOD TUBE HOLDER MISC	130	MOTTEGRITY PO	81
MODERNA COVID-19 VAC (BOOSTER) SUSP	185	MONOJECT HYPODERMIC NEEDLE	143	MOTPOLY XR CP24	20
MODERNA COVID-19 VAC 6M-11Y SUSP	185	MONOJECT INSULIN SYRINGE 143		MOTRIN INFANTS DROPS SUSP PO (Use ibuprofen)	6
MODERNA COVID-19 VAC 6M-11Y SUSY	185	MONOJECT LUER ADAPTER MISC 130		MOUNJARO	28
MODERNA COVID-19 VACC 6M-5Y SUSP	185	MONOJECT MAGELLAN SAFETY NDL	143	MOVANTIK PO	83
MODERNA COVID-19 VACCINE SUSP	185	MONOJECT MAGELLAN SYRINGE 143		moxifloxacin hcl (ophth) SOLN OP 171	
moexipril hcl PO	36	MONOJECT MULT-SAMP COLLECT SET MISC	130	moxifloxacin hcl TABS PO	81
MOIST-SURE REPLACEMENT COVER/L MISC	130	MONOJECT SYRINGE	143	MPD SAFETY LANCET 21G	110
MOIST-SURE REPLACEMENT COVER/M MISC	130	MONOJECT ULTRA COMFORT SYRINGE	143	MPD SAFETY LANCET 28G	110
MOIST-SURE REPLACEMENT COVER/P MISC	130	MONOLET LANCETS	110	MS CONTIN TBCR PO (Use morphine sulfate)	9
MOISTUREPLUS COVER LARGE MISC	130	MONOLET OPD LANCETS	110	MS INSULIN SYRINGE	143
MOISTUREPLUS COVER/MEDIUM MISC	130	montelukast sodium CHEW PO ...	14	MUCOSAL ATOMIZATION DEVICE MISC	130
MOISTUREPLUS COVER/PETITE MISC	130	montelukast sodium PACK PO	14	MULPLETA	87
molindone hcl PO 5 MG, 25 MG ...	49	montelukast sodium TABS PO	14	MULTAQ PO	14
mometasone furoate (nasal) SUSP 169		MONUROL (Use fosfomycin tromethamine)	40	MULTI VITAMIN TABS PO	165
mometasone furoate CREA	69	morphine sulfate beads PO	8	MULTI VITAMIN W/D-3 TABS PO 165	
mometasone furoate OINT	69	morphine sulfate CP24 PO 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG	8	MULTI-LANCET DEVICE 2 KIT ..	110
mometasone furoate SOLN	69	morphine sulfate SOLN PO 10 MG/5ML, 20 MG/5ML, 20 MG/ML, 100 MG/5ML	8	MULTI-LANCET DEVICE MISC ..	110
MONOJECT BLOOD COLLECTION		morphine sulfate SUPP PR	8	MULTI-MAC PO	166

MULTIVITAMIN + FLUORIDE CHEW PO	165	MYCOZYL HC LIQD	65	NALFON TABS PO (Use fenoprofen calcium)	6
MULTIVITAMIN ADULT (MINERALS) TABS PO	163	MYDAYIS CP24 PO (Use amphetamine-dextroamphetamine) .	1	NALMEFENE HCL IJ	31
MULTIVITAMIN ADULT TABS PO 165		MYDRIACYL SOLN (Use tropicamide)	170	NALOCET TABS PO	10
MULTIVITAMIN MEN TABS PO .	163	MYFEMBREE	81	naloxone hcl LIQD	31
MULTI-VITAMIN MONOCAPS TABS PO	163	MYFORTIC PO (Use mycophenolate sodium)	160	naloxone hcl SOCT	31
MULTIVITAMIN TABS PO	165	MYGLUCOHEALTH BLOOD GLUCOSE KIT	110	naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML	31
MULTIVITAMIN/FLUORIDE CHEW PO	165	MYGLUCOHEALTH CONTROL SOLN	110	naloxone hcl SOSY 2 MG/2ML	31
MULTIVITAMIN/ZINC STRESS TABS PO	163	MYGLUCOHEALTH TEST STRP .	75	naltrexone hcl PO	31
MULTIVITAMIN-MINERALS TABS PO	163	MYLERAN TABS PO	42	NAMENDA TABS PO (Use memantine hcl)	176
MULTIVITAMINS PLUS IRON CHILD CHEW PO	165	MYLICON INFANTS GAS RELIEF SUSP PO (Use simethicone)	82	NAMENDA TABS PO 10 MG (Use memantine hcl)	176
MULTI-VIT-FLOR CHEW PO	165	MYRBETRIQ SRER	183	NAMENDA TITRATION PAK TABS PO (Use memantine hcl)	176
mupirocin calcium (topical)	64	MYRBETRIQ TB24 PO (Use mirabegron)	183	NAMENDA XR CP24 PO 14 MG, 21 MG, 28 MG (Use memantine hcl) 176	
mupirocin OINT	64	MYSOLINE PO (Use primidone) ..	20	NAMENDA XR CP24 PO 7 MG, 14 MG, 28 MG (Use memantine hcl) 176	
MURO 128 OINT (Use sodium chloride hypertonic)	173	nabumetone PO 500 MG	6	NAMZARIC C4PK	176
MURO 128 SOLN (Use sodium chloride hypertonic)	173	nabumetone PO 750 MG	6	NAMZARIC CP24	176
MURO 128 SOLN	173	nadolol TABS PO 20 MG, 40 MG .	55	NAPRELAN TB24 PO (Use naproxen sodium)	6
MYAMBUTOL TABS PO 400 MG (Use ethambutol hcl)	41	nadolol TABS PO 80 MG	55	NAPRELAN TB24 PO 500 MG (Use naproxen sodium)	6
MYCAPSSA CPDR	80	naftifine hcl CREA	65	naproxen sodium TABS PO 275 MG, 550 MG	6
MYCOBUTIN PO (Use rifabutin) ...	41	naftifine hcl GEL 2 %	65	naproxen sodium TB24 PO	6
mycophenolate mofetil CAPS PO	160	NAFTIN GEL (Use naftifine hcl) ...	65	naproxen SUSP PO	6
mycophenolate mofetil SUSR	160	NAFTIN GEL	65	naproxen TABS PO	6
mycophenolate mofetil TABS PO	160	NAIL POLISH BOTTLE/BRUSH 15ML MISC	130	naproxen TBEC PO	6
mycophenolate sodium PO	160	NAILIT MISC	130	NALFON CAPS PO (Use fenoprofen calcium)	6

naratriptan hcl PO	157	NEBULIZER MASK CHILD MISC 152	NESTABS PO	166
NARCAN LIQD (Use naloxone hcl) 31		NEBUPENT IN (Use pentamidine isethionate)	NEUAC	63
NARDIL PO (Use phenelzine sulfate)	23	nefazodone hcl PO	NEULASTA ONPRO PSKT	87
NASADOCK MISC	130	NEOMULTIVITE TABS PO	NEULASTA SOSY	87
NASAL SPRAY METERED PUMP MISC	130	neomycin sulfate TABS PO	NEUPOGEN SOLN 300 MCG/ML	87
NASALCROM (Use cromolyn sodium (nasal))	169	neomycin-bacitracin zn-polymyxin 171	NEUPOGEN SOLN 480 MCG/1.6ML	87
NASCOBAL SOLN NA (Use cyanocobalamin)	86	neomycin-bacitracin-polymyxin OINT 64	NEUPOGEN SOSY 300 MCG/0.5ML	87
NASONEX 24HR SUSP (Use mometasone furoate (nasal))	169	neomycin-polymy-dexameth OINT 172	NEUPOGEN SOSY 480 MCG/0.8ML	87
NATACYN	171	neomycin-polymy-dexameth SUSP 172	NEUPRO	46
NATAL PNV TABS PO	166	neomycin-polymyxin-gramicidin .	NEURONTIN CAPS PO (Use gabapentin)	20
NATAZIA	59	neomycin-polymyxin-hc (ophth) .	NEURONTIN SOLN PO (Use gabapentin)	20
nateglinide PO	30	neomycin-polymyxin-hc (otic) SOLN .	NEURONTIN TABS PO 600 MG (Use gabapentin)	20
NATROBA (Use spinosad)	72	174	NEURONTIN TABS PO 800 MG (Use gabapentin)	20
NATRUL-VITES TABS PO	163	neomycin-polymyxin-hc (otic) SUSP .	NEUTEK 2TEK CONTROL SOLN	110
NATURAL WOOD CANE MISC ..	130	174	NEUTEK 2TEK TEST STRP	75
NATURAL WOOD WALKING STICK MISC	130	NEORAL CAPS PO (Use cyclosporine modified (for microemulsion))	NEUTROGENA T/GEL SHAM 0.5 % (Use coal tar extract)	72
NATURESPIRIT MISC	130	NEORAL SOLN PO (Use cyclosporine modified (for microemulsion))	NEVANAC	173
NAYZILAM	18	160	nevirapine SUSP PO	51
nebivolol hcl PO	54	NEOSPORIN ORIGINAL OINT (Use neomycin-bacitracin-polymyxin) ...	nevirapine TABS PO	51
NEBULIZER AIR TUBE/PLUGS MISC	151	64	nevirapine TB24 PO 100 MG	51
NEBULIZER CUP/TUBING DEVI	151	NEO-SYNALAR	nevirapine TB24 PO 400 MG	51
NEBULIZER MASK ADULT MISC 151		NERLYNX	NEXAVAR PO (Use sorafenib tosylate)	44
NEBULIZER MASK ADULT/TUBING MISC	151	NESINA (Use alogliptin benzoate) 28	NEXCARE COMFORT FOAM EAR PLUGS MISC	130
		NESTABS DHA PO		
		NESTABS ONE		

NEXCARE REUSABLE EAR PLUGS MISC	131	NICORETTE MINI LOZG 2 MG (Use nicotine polacrilex)	178	MG/SPRAY	12
NEXIUM 24HR CLEAR MINIS CPDR PO (Use esomeprazole magnesium) .	182	NICORETTE MINI LOZG 4 MG (Use nicotine polacrilex)	178	nitroglycerin SUBL	12
NEXIUM 24HR CPDR PO (Use esomeprazole magnesium)	182	NICORETTE STARTER KIT GUM 2 MG (Use nicotine polacrilex)	178	NITROLINGUAL SOLN TL (Use nitroglycerin)	12
NEXIUM CPDR PO (Use esomeprazole magnesium)	182	NICOTINE KIT	178	NITROSTAT SUBL (Use nitroglycerin)	13
NEXIUM CPDR PO 40 MG (Use esomeprazole magnesium)	182	nicotine polacrilex GUM	178	NITROSTAT SUBL 0.3 MG (Use nitroglycerin)	13
NEXIUM PACK (Use esomeprazole magnesium)	182	nicotine polacrilex LOZG	178	NITROSTAT SUBL 0.4 MG, 0.6 MG (Use nitroglycerin)	12
NEXIUM PACK	182	nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR	178	NITYR TABS	79
NEXLETOL	34	NICOTROL INHA	178	NIVA THYROID TABS PO	180
NEXLIZET	34	NICOTROL NS SOLN	178	NIVA-PLUS TABS PO	166
NEXTSTELLIS	59	nifedipine CAPS PO 10 MG	56	NIVESTYM SOLN	87
NG SECURE MISC	131	nifedipine CAPS PO 20 MG	56	NIVESTYM SOSY	87
NGENLA	78	nifedipine TB24 PO	56	NIX ELECTRONIC LICE COMB MISC	131
niacin (antihyperlipidemic) TBCR PO 500 MG, 1000 MG	36	nilutamide PO	43	NIX METAL TWO-SIDED COMB MISC	131
niacin (antihyperlipidemic) TBCR PO 36		nimodipine CAPS PO	56	nizatidine CAPS PO	181
niacin CPCR PO 250 MG	187	NINLARO	44	NOC DURNA SUBL	80
niacin CPCR PO 500 MG	187	nisoldipine PO	56	NORDITROPIN FLEXPPO SOPN .	78
NIACIN ER CPCR PO	187	nitazoxanide TABS PO	40	norelgestromin-ethinyl estradiol ...	60
niacin TABS PO 100 MG, 500 MG	187	nitisinone CAPS PO	79	norethin acet & estrad-fe CAPS ...	59
niacin TBCR PO 500 MG	187	NITRO-BID OINT	12	norethin acet & estrad-fe CHEW PO .	59
nicardipine hcl CAPS PO	55	NITRO-DUR PT24 (Use nitroglycerin)	12	norethin acet & estrad-fe TABS PO 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG	59
NICORETTE GUM (Use nicotine polacrilex)	178	NITRO-DUR PT24	12	norethin acet & estrad-fe TABS PO 1.5 MG-30 MCG-75 MG	59
NICORETTE LOZG 2 MG (Use nicotine polacrilex)	178	nitrofurantoin macrocrystal PO ...	40	norethin acet & estrad-fe TABS PO .59	
		nitrofurantoin monohyd macro PO .	40	norethindrone & eth estradiol PO ..	59
		nitrofurantoin PO 25 MG/5ML	40	norethindrone & ethinyl estradiol-fe PO	59
		NITROFURANTOIN PO	40		
		nitroglycerin PT24	12		
		nitroglycerin SOLN TL 0.4			

norethindrone (contraceptive) PO . 61	NORVIR TABS PO (Use ritonavir) .51	SUPN 29
norethindrone acet & eth estra TABS PO .....59	NOSE CLIP MISC 152	NOVOLIN 70/30 FLEXPEN SUPN 29
norethindrone acetate TABS PO .175	NO-STING SKIN-PREP MISC .....71	NOVOLIN 70/30 RELION SUSP .. 29
norethindrone acetate-ethinyl estradiol PO .....81	NOURI AUTO MISC .....131	NOVOLIN 70/30 SUSP 29
norethindrone acetate-ethinyl estradiol-fe PO .....59	NOURI DUO MISC 131	NOVOLIN N FLEXPEN RELION SUPN 29
norethindrone-eth estradiol (triphasic) PO .....59	NOURIANZ PO 45	NOVOLIN N FLEXPEN SUPN .....29
NORGESIC FORTE PO (Use orphenadrine w/ aspirin & caff) ...168	NOVA BATH SEAT MISC .....131	NOVOLIN N RELION SUSP .....29
norgestimate-ethinyl estradiol (triphasic) PO 60	NOVA CUSHION GEL SEAT PAD MISC .....131	NOVOLIN N SUSP 29
norgestimate-ethinyl estradiol PO . 60	NOVA MAX BLOOD GLUCOSE SYSTEM DEVI .....110	NOVOLIN R FLEXPEN RELION SOPN IJ .....29
norgestrel & ethinyl estradiol PO 30	NOVA MAX BLOOD GLUCOSE SYSTEM KIT 110	NOVOLIN R FLEXPEN SOPN IJ ..29
MCG-0.3 MG .....60	NOVA MAX GLUCOSE TEST STRP . 75	NOVOLIN R RELION SOLN IJ 29
NORITATE CREA .....71	NOVA MAX PLUS GLU/KET CONTROL LIQD .....110	NOVOLIN R SOLN IJ .....29
NORLIQVA SOLN 56	NOVA QUAD TIP-FOUR PRONGS MISC .....131	NOVOLOG 70/30 FLEXPEN RELION SUPN 29
NORPACE CAPS PO (Use disopyramide phosphate) 13	NOVA SAFETY LANCETS 23G .110	NOVOLOG FLEXPEN RELION SOPN 30
NORPACE CR CP12 PO 13	NOVA SUREFLEX LANCETS ...110	NOVOLOG FLEXPEN SOPN 30
NORPRAMIN TABS PO 10 MG (Use desipramine hcl) 25	NOVA SUREFLEX LANCING DEVICE MISC .....110	NOVOLOG MIX 70/30 FLEXPEN SUPN 30
NORPRAMIN TABS PO 25 MG (Use desipramine hcl) 25	NOVAVAX COVID-19 VACCINE SUSP 185	NOVOLOG MIX 70/30 RELION SUSP 30
NORTHERA (Use droxidopa) ...186	NOVAVAX COVID-19 VACCINE SUSY 185	NOVOLOG MIX 70/30 SUSP .....30
nortriptyline hcl CAPS PO 25	NOVOEIGHT 85	NOVOLOG PENFILL SOCT .....30
nortriptyline hcl SOLN PO 25	NOVOFINE AUTOCOVER PEN NEEDLE .....143	NOVOLOG RELION SOLN IJ 30
NORVASC TABS PO (Use amlodipine besylate) .....56	NOVOFINE PEN NEEDLE 143	NOVOLOG SOLN IJ 30
NORVASC TABS PO 10 MG (Use amlodipine besylate) .....56	NOVOFINE PLUS PEN NEEDLE 143	NOVOPEN ECHO DEVI .....143
NORVIR PACK .....51	NOVOLIN 70/30 FLEXPEN RELION	NOVOSEVEN RT 85
		NOXAFIL PACK 32
		NOXAFIL SUSP (Use posaconazole) .....32

NOXAFIL TBEC (Use posaconazole) 32	NUVESSA .....186	octreotide acetate SOSY 80
NP THYROID TABS PO .....180	NUVIGIL PO (Use armodafinil) 2	OCUFLOX (Use ofloxacin (ophth)) 171
NPLATE .....87	NUWIQ KIT 85	OCULAR VITAMINS TABS PO .. 163
NU GAUZE 4PLY PADS .....91	NUWIQ SOLR .....85	ODEFSEY .....51
NU GAUZE GENERAL-USE SPONGES MISC .....91	NUZYRA TABS PO .....179	ODOMZO PO .....42
NUASKIN FACIAL SCRUBBER MISC .....131	NVZZLER PRO DOUBLE BREAST PUMP MISC 131	OFEV .....179
NUASKIN SKIN TAG REMOVER MISC .....131	NVZZLER SINGLE BREAST PUMP MISC .....131	OFFSET CANE MISC 131
NUASKIN VACUUM PRO MISC . 131	NYMALIZE SOLN PO 6 MG/ML ...56	ofloxacin (ophth) 171
NUBEQA .....43	NYSTATIN (Use nystatin (mouth- throat)) 160	ofloxacin (otic) .....174
NUCALA SOAJ 14	nystatin (mouth-throat) .....160	ofloxacin PO 300 MG, 400 MG ....81
NUCALA SOLR .....14	nystatin (topical) CREA .....65	OINTMENT TUBE/METAL 1OZ MISC .....131
NUCALA SOSY 100 MG/ML .....14	nystatin (topical) OINT .....65	OINTMENT TUBE/METAL 2OZ MISC .....131
NUCALA SOSY 40 MG/0.4ML .....14	nystatin (topical) POWD EX .....65	OINTMENT TUBE/METAL 4OZ MISC .....131
NUCYNTA ER TB12 PO .....9	nystatin TABS PO .....32	OINTMENT TUBE/OPHTH TIP 1/8OZ MISC 131
NUCYNTA TABS PO .....9	nystatin-triamcinolone CREA .....65	OINTMENT TUBE/PLASTIC 1OZ MISC .....131
NUEDEXTA 178	nystatin-triamcinolone OINT .....65	OINTMENT TUBE/PLASTIC 2OZ MISC .....131
NUPERCAINAL EX (Use dibucaine (rectal)) .....11	NYVEPRIA 87	OINTMENT TUBE/PLASTIC 4OZ MISC .....131
NUPLAZID CAPS .....47	OB COMPLETE ONE PO 166	OINTMENT TUBE/PLASTIC 6OZ MISC .....131
NUPLAZID TABS PO 10 MG .....47	OB COMPLETE PETITE 166	OINTMENT TUBE/PLASTIC 8OZ MISC .....131
NURTEC 156	OB COMPLETE PREMIER .....166	OJJAARA .....44
NUTRILIPID .....170	OB COMPLETE TABS PO .....166	olanzapine SOLR 48
NUTROPIN AQ NUSPIN 10 SOPN 78	OB COMPLETE/DHA .....166	olanzapine TABS PO 2.5 MG, 5 MG . 48
NUTROPIN AQ NUSPIN 20 SOPN 78	OBIZUR 85	olanzapine TABS PO 7.5 MG, 10
NUTROPIN AQ NUSPIN 5 SOPN .79	OCALIVA .....82	
NUVARING (Use etonogestrel- ethinyl estradiol) .....60	OCEAN NASAL SPRAY SOLN (Use saline) .....169	
	OCREVUS 177	
	octreotide acetate SOLN .....80	

MG, 15 MG, 20 MG	48	PACK PO	182	DEVI	93
olanzapine TBDP PO 10 MG	48	OMNARIS SUSP	169	OMRON WRIST BP MONITOR DEVI	93
olanzapine TBDP PO 5 MG, 15 MG,		OMNICAP TABS PO	165	.....
20 MG	48	OMNIPOD 5 DEXG7G6 INTRO GEN		OMVOH SOAJ	83
olanzapine-fluoxetine hcl PO	176	5 KIT	110	OMVOH SOLN	83
olmesartan medoxomil PO	37	OMNIPOD 5 DEXG7G6 PODS GEN		ON CALL EXPRESS BLOOD	
olmesartan medoxomil-amlodipine-		5 MISC	110	GLUCOSE STRP	75
hydrochlorothiazide PO	38	OMNIPOD 5 G7 INTRO (GEN 5) KIT		ON CALL EXPRESS MONITORING	
olmesartan medoxomil-		110		SYS KIT	111
hydrochlorothiazide PO	38	OMNIPOD 5 G7 PODS (GEN 5)		ON/GO COVID-19 ANTIGEN TEST	
olopatadine hcl (nasal)	169	MISC	110	KIT	75
olopatadine hcl 0.1 %	173	OMNIPOD CLASSIC PDM (GEN 3)		ONCOVITE TABS PO	163
OLPRUVA (2 GM DOSE) THPK ...	79	KIT	110	ondansetron hcl SOLN PO 4	
OLPRUVA (3 GM DOSE) THPK ...	79	OMNIPOD CLASSIC PODS (GEN 3)		MG/5ML	31
OLPRUVA (4 GM DOSE) THPK ...	79	MISC	111	ondansetron hcl TABS PO 4 MG, 8	
OLPRUVA (5 GM DOSE) THPK ...	79	OMNIPOD DASH INTRO (GEN 4)		MG	31
OLPRUVA (6 GM DOSE) THPK ...	79	KIT	111	ondansetron TBDP PO 4 MG, 8 MG .	
OLPRUVA (6.67 GM DOSE) THPK		OMNIPOD DASH PDM (GEN 4) KIT .		31	
80		111		ONE DAILY ESSENTIAL TABS PO	
OLUMIANT	3	OMNIPOD DASH PODS (GEN 4)		165	
OLUX FOAM (Use clobetasol		MISC	111	ONE DAILY ESSENTIALS TABS PO	
propionate)	69	OMNIPOD GO KIT 10 UNIT/24HR,		165	
OLUX-E (Use clobetasol propionate		15 UNIT/24HR, 25 UNIT/24HR, 35		ONE DAILY MEN FORMULA W/O	
emulsion)	69	UNIT/24HR	111	IRON TABS PO	163
OMBRA COMPRESSOR AIR		OMNIPOD GO KIT 20 UNIT/24HR,		ONE DAILY MULTIVITAMIN	
FILTERS MISC	152	30 UNIT/24HR, 40 UNIT/24HR ...	111	WOMEN TABS PO	163
OMBRA TABLE TOP		OMNITROPE SOCT	79	ONE DAILY WOMENS TABS PO	
COMPRESSOR DEVI	152	OMNITROPE SOLR SC	79	163	
omega-3-acid ethyl esters PO	34	OMRON 10 SERIES BP MONITOR		ONE DROP BLOOD GLUCOSE	
omeprazole CPDR PO	182	DEVI	93	MONITOR KIT	111
omeprazole-sodium bicarbonate		OMRON 3 SERIES BP MONITOR		ONE DROP TEST STRP	75
CAPS PO	182	DEVI	93	ONE FLOW SPIROMETER DEVI	
omeprazole-sodium bicarbonate		OMRON 5 SERIES BP MONITOR		152	
		DEVI	93	ONE OUNCE MEDICINE CUPS	
		OMRON 7 SERIES BP MONITOR		MISC	131

ONE STEP AT A TIME FILTERS MISC	131	BODY TABS PO (Use multiple vitamins w/ minerals)	164	ONETOUCH ULTRA TEST STRP	.76
ONE VITE DAILY MULTIVITAMIN TABS PO	165	ONE-A-DAY WOMENS PETITES TABS PO (Use multiple vitamins w/ minerals)	164	ONETOUCH ULTRASOFT 2 LANCETS	111
ONE-A-DAY ENERGY TABS PO	163	ONE-DAY-AT-A-TIME PLANNER MISC	131	ONETOUCH ULTRASOFT LANCETS	111
ONE-A-DAY ESSENTIAL TABS PO (Use multiple vitamin)	165	ONETOUCH CLUB LANCETS FINE PT	111	ONETOUCH VERIO FLEX SYSTEM KIT	111
ONE-A-DAY MENS (MINERALS) TABS PO	163	ONETOUCH DELICA LANCETS 30G	111	ONETOUCH VERIO KIT	111
ONE-A-DAY MENS 50+ ADVANTAGE TABS PO	163	ONETOUCH DELICA LANCETS 33G	111	ONETOUCH VERIO LIQD	112
ONE-A-DAY MENS 50+ TABS PO 163		ONETOUCH DELICA LANCING DEV MISC	111	ONETOUCH VERIO REFLECT KIT 111	
ONE-A-DAY MENS PRO EDGE TABS PO	163	ONETOUCH DELICA PLUS LANCET30G	111	ONETOUCH VERIO STRP	76
ONE-A-DAY MENS TABS PO (Use multiple vitamin)	165	ONETOUCH DELICA PLUS LANCET33G	111	ONEXTON GEL (Use clindamycin phosphate-benzoyl peroxide)	63
ONE-A-DAY TEEN ADVANTAGE/HIM TABS PO	163	ONETOUCH DELICA PLUS LANCING MISC	111	ONFI SUSP (Use clobazam)	18
ONE-A-DAY VITACRAVES+OMEGA-3 CHEW PO (Use pediatric multiple vitamins) .	165	ONETOUCH DELICA SAFETY LANCING	111	ONFI TABS PO (Use clobazam) ...	18
ONE-A-DAY WEIGHT SMART ADVANCE TABS PO (Use multiple vitamins w/ minerals)	163	ONETOUCH FINEPOINT LANCETS	111	ONGENTYS	46
ONE-A-DAY WOMENS 50 PLUS TABS PO (Use multiple vitamins w/ minerals)	163	ONETOUCH SOLUTIONS STARTER KIT KIT	111	ONGLYZA PO (Use saxagliptin hcl) 28	
ONE-A-DAY WOMENS 50+ ADVANTAGE TABS PO (Use multiple vitamins w/ minerals)	163	ONETOUCH SURESOFT LANCING DEV MISC	111	ONUREG TABS	42
ONE-A-DAY WOMENS 50+ TABS PO	163	ONETOUCH ULTRA 2 KIT	111	OPILL PO	61
ONE-A-DAY WOMENS HEALTHY SKIN TABS PO (Use multiple vitamins w/ minerals)	164	ONETOUCH ULTRA BLUE TEST STRP	75	OPSUMIT	57
ONE-A-DAY WOMENS MIND &		ONETOUCH ULTRA CONTROL LIQD	111	OPTICHAMBER DIAMOND DEVI 152	
		ONETOUCH ULTRA MINI KIT ...	111	OPTICHAMBER DIAMOND MISC 152	
		ONETOUCH ULTRA STRP	76	OPTICHAMBER DIAMOND-LG MASK DEVI	152
				OPTICHAMBER DIAMOND-MD MASK MISC	152
				OPTICHAMBER DIAMOND-SM MASK MISC	152
				OPTIUMEZ TEST STRP	76
				OPTIVITE P.M.T. TABS PO (Use	

multiple vitamins w/ minerals)	164	ORLADEYO	86	OVACE WASH LIQD (Use sulfacetamide sodium)	66
OPVEE NA	31	orphenadrine citrate TB12 PO	168	OVAL TAPE MISC	112
OPZELURA	70	orphenadrine w/ aspirin & caff PO 168		OVIDE (Use malathion)	72
ORACIT PO	84	ORSERDU	43	oxaprozin TABS PO	6
ORAL DOSE SYRINGE MISC ...	131	oseltamivir phosphate CAPS PO 30 MG	53	oxazepam CAPS PO	13
oral electrolytes SOLN PO	158	oseltamivir phosphate CAPS PO 45 MG, 75 MG	53	OXBRYTA TABS	86
ORAL ENDOTRACHEAL DEVICE MISC	131	oseltamivir phosphate SUSR PO ..	53	OXBRYTA TBSO	86
ORAL MEDICINE DROPPER MISC . 131		OSENI 15 MG-12.5 MG, 45 MG-12.5 MG (Use alogliptin-pioglitazone) ..	26	oxcarbazepine SUSP PO	20
ORAL SWAB PETITE SWAB	139	OSENI 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG (Use alogliptin-pioglitazone)	26	oxcarbazepine TABS PO 150 MG, 300 MG	20
ORAL SYRINGE/BRUSH MISC ..	131	OSMOLEX ER TB24 129 MG, 193 MG	46	oxcarbazepine TABS PO 600 MG .	20
ORAVIG	160	OSPHERA PO	79	OXERVATE	172
ORENCIA CLICKJECT SOAJ	6	OSTEOBOOST BELT LARGE MISC . 131		oxiconazole nitrate CREA	65
ORENCIA SOLR	6	OSTEOBOOST BELT MEDIUM MISC	131	OXISTAT CREA (Use oxiconazole nitrate)	65
ORENCIA SOSY	6	OSTEOBOOST BELT SMALL MISC . 131		OXISTAT LOTN	65
ORENITRAM MONTH 1 TEPK	57	OSTEOPRIME PLUS TABS PO .	164	OXTELLAR XR TB24 (Use oxcarbazepine)	20
ORENITRAM MONTH 2 TEPK	57	OTEZLA TABS PO 30 MG	6	oxybutynin chloride SOLN	183
ORENITRAM MONTH 3 TEPK	57	OTEZLA TBPK PO	6	oxybutynin chloride TABS PO 2.5 MG	183
ORENITRAM TBCR	57	OTREXUP SOAJ 10 MG/0.4ML, 12.5 MG/0.4ML, 15 MG/0.4ML, 17.5 MG/0.4ML, 20 MG/0.4ML, 22.5 MG/0.4ML, 25 MG/0.4ML	3	oxybutynin chloride TABS PO 5 MG . 183	
ORFADIN CAPS PO (Use nitisinone)	80	OVACE PLUS WASH GEL (Use sulfacetamide sodium)	66	oxybutynin chloride TB24 PO	183
ORFADIN SUSP	80	OVACE PLUS WASH LIQD (Use sulfacetamide sodium)	66	oxycodone hcl CAPS PO	9
ORGOVYX	43			oxycodone hcl CONC PO 100 MG/5ML	9
ORIAHNN	81			oxycodone hcl SOLN PO	9
ORIG MCKENZIE CERVICAL ROLL MISC	131			oxycodone hcl T12A PO 10 MG, 20 MG, 40 MG, 80 MG	9
ORLISSA	78			oxycodone hcl TABS PO 10 MG, 15 MG, 20 MG, 30 MG	9
O-RING CUSHION MISC	131				
ORKAMBI PACK	179				
ORKAMBI TABS	179				

oxycodone hcl TABS PO 5 MG .....9	PARADIGM REAL-TIME TRANSMITTER .....112	paroxetine mesylate (vasomotor) PO 178
oxycodone w/ acetaminophen SOLN PO .....10	PARI ALTERA NEBULIZER HANDSET MISC .....152	PARVLEX TABS PO .....164
oxycodone w/ acetaminophen TABS PO 325 MG-10 MG, 325 MG-5 MG 10	PARI BABY CONVERSION KIT MISC .....152	PATADAY (Use olopatadine hcl) 173
oxycodone w/ acetaminophen TABS PO 325 MG-2.5 MG, 325 MG-7.5 MG .....10	PARI BUBBLES PEDIATRIC MASK MISC .....152	PATANASE (Use olopatadine hcl (nasal)) .....169
OXYCONTIN T12A PO .....9	PARI ERAPID NEBULIZER HANDSET MISC .....152	PAXIL CR TB24 PO (Use paroxetine hcl) 24
oxymorphone hcl TABS PO .....9	PARI EXPIRATORY FILTER SET DEVI 152	PAXIL SUSP PO (Use paroxetine hcl) 24
oxymorphone hcl TB12 PO 9	PARI MANUAL INTERRUPTER DEVI 152	PAXIL TABS PO 10 MG (Use paroxetine hcl) 24
OXYTROL PTTW .....183	PARI MASK SET MISC .....152	PAXIL TABS PO 20 MG (Use paroxetine hcl) 24
OYSTER SHELL CALCIUM/D TABS PO 500 MG-200 UNIT .....157	PARI SMARTMASK BABY/ELBOW MISC .....153	PAXIL TABS PO 30 MG, 40 MG (Use paroxetine hcl) 24
oyster shell PO 157	PARI SOFT PLASTIC ADULT MASK MISC .....153	PAXLOVID (150/100) 52
OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN .....28	PARI SOFT PLASTIC PED MASK MISC .....153	PAXLOVID (300/100) 52
OZEMPIC (1 MG/DOSE) SOPN 4 MG/3ML .....28	PARI TREK S COMBO PACK DEVI . 153	pazopanib hcl 44
OZEMPIC (2 MG/DOSE) SOPN ...28	PARI VORTEX ADULT MASK ...153	PC LANCETS SUPER THIN 30G 112
OZOBAX DS SOLN PO (Use baclofen) .....168	paricalcitol CAPS PO 80	PC UNIFINE PENTIPS 143
paliperidone PO .....47	PARLODEL CAPS PO (Use bromocriptine mesylate) 46	PEAK A-I-R FLOW METER .....153
PAMELOR CAPS PO (Use nortriptyline hcl) .....25	PARLODEL TABS PO (Use bromocriptine mesylate) 46	PEAK AIR PEAK FLOW METER 153
PANDA MASK LARGE 152	paroxetine hcl SUSP PO 24	PEAK FLOW METER UNIVERSAL RANG 153
PANDA MASK MEDIUM .....152	paroxetine hcl TABS PO 10 MG ...24	PEDAL EXERCISER MISC 131
PANDA MASK SMALL .....152	paroxetine hcl TABS PO 20 MG ...24	PEDIALYTE ADVANCED CARE SOLN PO (Use oral electrolytes) .158
PANDEL .....69	paroxetine hcl TABS PO 30 MG, 40 MG 24	PEDIALYTE FREEZER POPS SOLN PO (Use oral electrolytes) 158
PANOXYL LIQD (Use benzoyl peroxide) .....63	paroxetine hcl TB24 PO 24	PEDIALYTE IMMUNE SUPPORT SOLN PO 158
pantoprazole sodium PACK 182		
pantoprazole sodium TBEC PO ..182		

PEDIALYTE SINGLES SOLN PO (Use oral electrolytes)	158	PENLET II REPLACEMENT CAP MISC	112	PERFECT LANCETS 30G	112
PEDIALYTE SOLN PO (Use oral electrolytes)	158	PENNSAID SOLN EX 2 % (Use diclofenac sodium (topical))	65	PERFOROMIST NEBU (Use formoterol fumarate)	16
PEDIAPRED SOLN PO (Use prednisolone sodium phosphate) ..	61	PENTACEL	180	PERIDEX (Use chlorhexidine gluconate (mouth-throat))	160
PEDIARIX SUSY	180	pentamidine isethionate IN	39	perindopril erbumine PO	36
PEDIATRIC MOUTHPIECE MISC 153		PENTASA CPCR PO (Use mesalamine)	83	permethrin CREA	72
pediatric multiple vitamins CHEW PO	165	PENTASA CPCR PO	83	permethrin LIQD EX	72
pediatric multiple vitamins w/ iron CHEW PO	165	pentazocine w/ naloxone hcl PO ..	10	perphenazine TABS PO	49
pediatric multivitamins w/fl CHEW PO	165	PENTIPS	143	perphenazine-amitriptyline PO ...	176
PEDIATRIC PANDA MASK	153	PENTIPS GENERIC PEN NEEDLES	143	PERSERIS PRSY	47
PEDVAX HIB SUSP	184	PENTOSAN POLYSULFATE SODIUM	58	PERSONAL BEST FULL RANGE 153	
peg 3350-potassium chloride-sod bicarbonate-sod chloride PO	89	pentoxifylline PO	86	PERSONALFIT FLEX CONNECTORS MISC	131
PEGASYS SOSY	53	PEPCID AC MAXIMUM STRENGTH TABS PO (Use famotidine)	181	PERTZYE CPEP PO	77
PELVIC MUSCLE TRAINER MISC 131		PEPCID AC TABS PO (Use famotidine)	181	PEXEVA PO 10 MG, 20 MG, 30 MG . 24	
PEMAZYRE	44	PEPCID TABS PO (Use famotidine) . 181		PFIZER COVID-19 BIVAL 6MO-4YR	185
PEN NEEDLES	143	PEPTO-BISMOL MAX STRENGTH SUSP PO (Use bismuth subsalicylate)	31	PFIZER COVID-19 VAC BIVAL 5-11	185
PEN NEEDLES 5/16"	143	PEPTO-BISMOL SUSP PO 262 MG/15ML (Use bismuth subsalicylate)	31	PFIZER COVID-19 VAC BIVALENT . 185	
PENBRAYA	184	PEPTO-BISMOL TABS PO (Use bismuth subsalicylate)	31	PFIZER COVID-19 VAC-TRIS 5-11Y SUSP	185
penciclovir	67	PERCOCET TABS PO 325 MG-10 MG, 325 MG-5 MG (Use oxycodone w/ acetaminophen)	10	PFIZER COVID-19 VAC-TRIS 6M-4Y SUSP	185
penicillamine CAPS PO	159	PERCOCET TABS PO 325 MG-2.5 MG, 325 MG-7.5 MG (Use oxycodone w/ acetaminophen)	10	PFIZER-BIONT COVID-19 VAC- TRIS SUSP	185
penicillamine TABS PO	159			PFIZER-BIONTECH COVID-19 VACC SUSP	185
penicillin v potassium SOLR PO .	174			PFLEX MISC	153
penicillin v potassium TABS PO ..	174			PH ACCESSORIES STORAGE SOL	

MISC	131	PHOSPHOLINE IODIDE	171	PIP PEN NEEDLES 32G X 4MM 143
PHARMACIST CHOICE AUTOCODE STRP	76	PIFELTRO	51	PIQRAY (200 MG DAILY DOSE) .44
PHARMACIST CHOICE AUTOCODE SYS KIT	112	PIKO 1	153	PIQRAY (250 MG DAILY DOSE) .44
PHARMACIST CHOICE LANCETS . 112		PILL BOX 7 DAY MISC	131	PIQRAY (300 MG DAILY DOSE) .44
PHARMACIST CHOICE MASK		PILL COUNTING TRAY/RIGHT HAND MISC	131	pirfenidone CAPS
WIPES MISC	153	PILL CRUSHER MISC	131	pirfenidone TABS PO
PHARMACIST CHOICE MINI SYSTEM DEVI	112	PILL POUCH MISC	131	piroxicam CAPS PO
PHARMACIST CHOICE NO CODING STRP	76	PILL SPLITTER MISC	132	pitavastatin calcium PO
PHAZYME ULTRA STRENGTH CAPS PO (Use simethicone)	82	PILLOW MASK/ADULT MISC	153	PLAN B ONE-STEP PO (Use levonorgestrel (emergency oc)) ...
PHEBURANE PLLT	80	PILLOW MASK/CHILD MISC	153	PLASTIC BED PAN MISC
phenazopyridine hcl TABS PO 100 MG, 200 MG	84	PILLOW MASK/PEDIATRIC MISC 153		PLASTIC BOTTLES 30ML MISC .132
phenelzine sulfate PO	23	Pilocarpine hcl (oral) PO 5 MG ...	161	PLASTIC BOTTLES 90ML MISC .132
phenobarbital ELIX PO	87	Pilocarpine hcl (oral) PO 7.5 MG .	161	PLASTIC ENEMA BOTTLE MISC 132
phenobarbital TABS PO	87	Pilocarpine hcl SOLN 1 %, 2 %, 4 % .	171	PLASTIC JAR 6OZ MISC
phenoxybenzamine hcl PO	37	pimecrolimus	70	PLASTIC SCOOP 1ML MISC
phenylephrine hcl (mydriatic) SOLN 170		pimozide PO	178	PLATFORM WALKER ATTACHMENT MISC
phenylephrine in hard fat PR	11	pindolol TABS PO	55	PLATINUM REACHER 31" MISC 132
phenytoin CHEW PO	22	pioglitazone hcl PO	30	PLAVIX PO 75 MG (Use clopidogrel bisulfate)
phenytoin sodium extended PO 100 MG, 200 MG, 300 MG	22	pioglitazone hcl-glimepiride	26	PLEGRIDY SOAJ
phenytoin SUSP PO	22	pioglitazone hcl-metformin hcl TABS PO	26	PLEGRIDY SOSY IM
PHEXXI	186	PIP BLOOD GLUCOSE MONITORING DEVI	112	PLEGRIDY STARTER PACK SOAJ . 177
PHOSLYRA SOLN	83	PIP BLOOD GLUCOSE TEST STRIP STRP	76	PLEGRIDY STARTER PACK SOSY SC
PHOS-NAK PACK PO (Use potassium & sodium phosphates) 158		PIP GLUCOSE CONTROL SOLUTION LIQD	112	PNEUMOVAX 23 SOLN
		PIP LANCETS 30G	112	PNEUMOVAX 23 SOSY
		PIP PEN NEEDLES 31G X 5MM 143		PNV-DHA+DOCUSATE PO

PNV-OMEGA PO	166	POLYTRIM (Use polymyxin b-trimethoprim)	171	potassium citrate (alkalinizer) TBCR PO	84
POCKET CHAMBER DEVI	153	POLY-VI-FLOR CHEW PO	165	potassium citrate-citric acid PACK PO	84
POCKET MAGNIFIER MISC	132	polyvinyl alcohol 1.4 %	170	potassium citrate-citric acid SOLN PO	84
POCKET PEAK FLOW METER	153	polyvinyl alcohol-povidone (ophth) 0.5 %-0.6 %, 5 MG/ML-6 MG/ML	170	POTASSIUM PHOSPHATES (Use potassium phosphates)	158
POCKET PRO+ REPLACEMENT SENSOR MISC	132	POMALYST	43	potassium phosphates	158
POCKET SPACER DEVI	153	PONVORY STARTER PACK TBP 177	177	POTASSIUM PHOSPHATES(66 MEQ K) (Use potassium phosphates)	158
POCKETCHEM EZ CONTROL SOLN	112	PONVORY TABS	177	povidone-iodine SOLN 10 %	50
POCKETCHEM EZ SYSTEM KIT 112	112	posaconazole SUSP	32	POWDER INSUFFLATOR-#4 CAPSULES MISC	132
POCKETCHEM EZ TEST STRP ..	76	posaconazole TBEC	32	POWER ADAPTOR PUMP IN STYLE MISC	132
POCKETPEAK PEAK FLOW METER	154	POSIDYNE ELD FILTER/0.2UM MISC	132	PRADAXA CAPS PO (Use dabigatran etexilate mesylate)	18
PODOCON-25 SOLN	70	POSTURE SEAT MISC	132	PRADAXA PACK	18
podofilox GEL	70	pot & sod citrates w/citric ac SOLN PO	84	PRALUENT SOAJ	36
podofilox SOLN	70	pot phosphate monobasic w/ sod phosphate dibasic & monobasic PO	158	pramipexole dihydrochloride TABS PO	46
POGO AUTOMATIC BLOOD GLUCOSE DEVI	112	potassium & sodium phosphates PACK PO	158	pramipexole dihydrochloride TB24 PO	46
POLY HUB NEEDLE	143	potassium acetate SOLN 2 MEQ/ML	159	prasugrel hcl PO	86
polyethylene glycol 3350 PACK PO	89	POTASSIUM ACETATE SOLN 2 MEQ/ML	159	pravastatin sodium PO	36
polyethylene glycol 3350 POWD PO ..	89	potassium chloride microencapsulated crystals er PO 10 MEQ, 20 MEQ	159	praziquantel PO	12
POLYMEM NON-ADHESIVE PADS ..	91	potassium chloride SOLN IV 2 MEQ/ML	159	prazosin hcl CAPS PO	37
polymyxin b-trimethoprim	171	potassium chloride SOLN PO 10 %, 10 %	159	PRECISION CATHETER URINE SYS KIT	132
POLYPROPYLENE CAP-LINER MISC	132	potassium chloride TBCR PO 8 MEQ, 10 MEQ	159	PRECISION GLUCOSE KETONE CONTR LIQD	112
polysaccharide iron complex CAPS PO	87			PRECISION MIDSTREAM KIT KIT	132
POLYSPORIN OINT 10000 UNIT/GM-500 UNIT/GM (Use bacitracin-polymyxin b)	64				

112	PROMETRIUM CAPS PO (Use progesterone)	175	PROVATE 73MM MISC	132	
PRODIGY INSULIN SYRINGE ..	143	PROMETRIUM CAPS PO 100 MG (Use progesterone)	175	PROVATE 79MM MISC	132
PRODIGY LANCING DEVICE MISC .	112	PRONEB ULTRA FILTER SET MISC	154	PROVATE 85MM MISC	132
PRODIGY NO CODING BLOOD GLUC KIT	113	propafenone hcl CP12 PO	14	PROVATE 91MM MISC	132
PRODIGY NO CODING BLOOD GLUC STRP	76	propafenone hcl TABS PO 150 MG 14		PROVENTIL HFA AERS (Use albuterol sulfate)	16
PRODIGY POCKET BLOOD GLUCOSE KIT	113	propafenone hcl TABS PO 225 MG, 300 MG	14	PROVERA PO 5 MG, 10 MG (Use medroxyprogesterone acetate) ...	175
PRODIGY TWIST TOP LANCETS 28G	113	propracetamol hcl	172	PROVIGIL PO (Use modafinil)	2
PRODIGY VOICE BLOOD GLUCOSE KIT	113	PROPEL MINI SDS IMPL	169	PROZAC CAPS PO 10 MG (Use fluoxetine hcl)	24
PROFILNINE	85	propranolol hcl CP24 PO	55	PROZAC CAPS PO 20 MG, 40 MG (Use fluoxetine hcl)	24
progesterone CAPS PO	175	propranolol hcl SOLN PO 20 MG/5ML, 40 MG/5ML	55	PRUDOXIN (Use doxepin hcl (antipruritic))	66
progesterone OIL	175	propranolol hcl TABS PO	55	pseudoephedrine hcl TABS PO 30 MG	169
PROGLYCEM (Use diazoxide) ...	27	propylthiouracil PO	179	pseudoephedrine hcl TABS PO 60 MG	169
PROGRAF CAPS PO (Use tacrolimus)	160	PROQUAD SUSR	185	PSS SELECT PLATFORMS MISC 113	
PROGRAF PACK	160	PRORENAL + D TABS PO	164	PSS SELECT SAFETY LANCETS 113	
PROLATE SOLN PO	10	PROSCAR PO (Use finasteride) ..	84	psyllium CAPS PO 0.52 GM, 400 MG	88
PROLATE TABS PO	10	PROTECTIVE SAFETY EYEWARE MISC	132	psyllium POWD PO 28.3 %, 43 %, 48.57 %, 58.6 %, 95 %	88
PROLENSA (Use bromfenac sodium (ophth))	173	PROTONIX PACK (Use pantoprazole sodium)	182	PTS PANELS EGLU TEST STRP .	76
PROMACTA PACK	87	PROTONIX TBEC PO (Use pantoprazole sodium)	182	PULMICORT FLEXHALER AEPB .	15
PROMACTA TABS PO	87	PROTOPIC OINT 0.03 % (Use tacrolimus (topical))	70	PULMICORT SUSP (Use budesonide (inhalation))	15
promethazine hcl SOLN PO 6.25 MG/5ML	34	PROTOPIC OINT 0.1 % (Use tacrolimus (topical))	70	PULMOZYME	179
promethazine hcl TABS PO	34	protriptyline hcl PO	25	PULSE OXIMETER DELUXE MISC 132	
promethazine-dm SYRP PO	62	PROVATE 61MM MISC	132		
promethazine-phenylephrine-codeine PO	62	PROVATE 67MM MISC	132		

PULSE OXIMETER FOR FINGER MISC	132	PYLERA PO (Use bismuth subcitrate potassium-metronidazole-tetracycline)	182	QNASL	169
PULSE OXIMETER MISC	132	pyrazinamide PO	41	QNASL CHILDRENS	169
PUMP IN STYLE ADVANCED MISC .	132	pyrethrins-piperonyl butoxide SHAM 4 %-0.33 %	72	QTERN	26
PUMP IN STYLE/MAXFLOW MISC	132	PYRIDIDIUM TABS PO (Use phenazopyridine hcl)	84	Q-TIPS/SINGLE-TIP APPLICATOR SWAB	132
PUMP IN STYLE/MAXFLOW TUBING MISC	132	pyridostigmine bromide SOLN PO .41	41	Q-TIPS/SINGLE-TIP SWAB	133
PURE COMFORT 3-BALL BREATHE EX DEVI	154	pyridostigmine bromide TABS PO .41	41	QUAD CANE MISC	133
PURE COMFORT FLOW METER ADULT	154	pyridostigmine bromide TBCR PO .41	41	QUAD CANE TIPS MISC	133
PURE COMFORT FLOW METER CHILD	154	pyridoxine hcl TABS PO 25 MG, 100 MG	187	QUAD CANE/SMALL BASE MISC	133
PURE COMFORT LEG COMP MASSAGER MISC	132	pyrimethamine PO	41	QUADRACEL SUSP	180
PURE COMFORT PEN NEEDLE	144	QBRELIS SOLN	36	QUADRACEL SUSY	180
PURE COMFORT SAFETY PEN NEEDLE	144	QC ADVANCED LANCING DEVICE MISC	113	QUAKE DEVI	154
PURE COMFORT SPACER CHAMBER DEVI	154	QC ALCOHOL SWABS	132	QUALAQUIN CAPS PO (Use quinine sulfate)	41
PURIXAN SUSP	42	QC ALL PURPOSE DRESSINGS PADS	91	QUARTETTE PO (Use levonorgestrel-ethinyl estradiol (91-day))	60
PX ADVANCED LANCING DEVICE MISC	113	QC BLOOD PRESSURE MONITOR MISC	93	quazepam PO	88
PX EXTRA SHORT PEN NEEDLES	144	QC LANCETS SUPER THIN 30G 113	113	QUDEXY XR CS24 PO (Use topiramate)	21
PX GLUCOSE PO	27	QC LANCETS ULTRA THIN	113	QUESTRAN LIGHT POWD PO (Use cholestyramine light)	35
PX INSULIN SYRINGE	144	QC MULTI-VITE TABS PO	164	QUESTRAN PACK PO (Use cholestyramine)	35
PX LANCET AUTO INJECTOR MISC	113	QC PEN NEEDLES	144	QUESTRAN POWD PO (Use cholestyramine)	35
PX MINI PEN NEEDLES	144	QC STERILE PADS PADS	91	quetiapine fumarate TABS PO 25 MG, 50 MG, 100 MG, 150 MG, 200 MG	48
PX PEN NEEDLE	144	QC UNIFINE PENTIPS	144	quetiapine fumarate TABS PO 300 MG, 400 MG	48
PX SHORTLENGTH PEN NEEDLES	144	QC UNILET LANCETS 28G	113	quetiapine fumarate TB24 PO 300 MG	48
		QELBREE	1		
		QINLOCK	44		

quetiapine fumarate TB24 PO 50 MG, 150 MG, 200 MG, 400 MG ... 48	QUINTET BLOOD GLUCOSE TEST STRP .....76	RADICAVA ORS SUSP 169
QUFLORA PEDIATRIC CHEW PO 165	QUINTET CONTROL HIGH/NORMAL SOLN 113	RAISED TOILET SEAT MISC ....133
QUICK-FIT CRUTCHES MISC ...133	QULIPTA .....156	RAISED TOILET SEAT/LOCK & ARMS MISC 133
QUICKTEK CONTROL SOLUTION LIQD 113	QUTENZA (2 PATCH) 71	RAISED TOILET SEAT/LOCK MISC . 133
QUICKTEK KIT .....113	QUTENZA (4 PATCH) 71	raloxifene hcl PO .....79
QUICKTEK TEST STRP .....76	QUTENZA .....71	ramelteon PO 88
QUICKTEK/METER KIT .....113	QUVIVIQ .....88	ramipril CAPS PO .....36
QUICKVUE AT-HOME COVID-19 TEST KIT .....76	QVAR REDIHALER 15	RANEXA TB12 PO (Use ranolazine) . 12
QUILLICHEW ER CHER PO .....3	RA ALCOHOL SWABS .....133	ranolazine TB12 PO 12
QUILLIVANT XR SRER PO .....3	RA BLOOD PRESSURE CUFF MONITOR DEVI 93	RAPAFLO PO (Use silodosin) .....84
QUIN B STRONG TABS PO 164	RA BLOOD PRESSURE CUFF MONITOR MISC .....93	RAPAFLO PO 8 MG (Use silodosin) . 84
quinapril hcl PO .....36	RA CENTRAL-VITE TABS PO ...164	RAPAMUNE SOLN (Use sirolimus) 160
quinapril-hydrochlorothiazide PO 12.5 MG-10 MG .....38	RA DELUXE PULSE OXIMETER MISC .....133	RAPAMUNE TABS PO (Use sirolimus) .....160
quinapril-hydrochlorothiazide PO 12.5 MG-20 MG .....38	RA EXTRA COMFORT NIGHT PROTECT MISC .....133	rasagiline mesylate PO 47
quinapril-hydrochlorothiazide PO 25 MG-20 MG 38	RA E-ZJECT LANCETS THIN 28G 113	RASUVO SOAJ 7.5 MG/0.15ML, 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 20 MG/0.4ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML .....3
quinidine gluconate TBCR PO .....13	RA E-ZJECT LANCETS ULTRA THIN .....113	RAVICTI PO 80
quinidine sulfate TABS PO 13	RA GLUCOSE PO .....27	RAYA SURE PEN NEEDLE .....144
quinine sulfate CAPS PO 324 MG .41	RA INSULIN SYRINGE .....144	RAYALDEE .....80
QUINTABS TABS PO 165	RA PEN NEEDLES .....144	RAYOS TBEC .....61
QUINTABS-M TABS PO 164	RA STERILE PADS .....91	RAY-TEC X-RAY DETECTABLE SPNGE MISC .....91
QUINTET AC BLOOD GLUCOSE DEVI 113	RABAVERT .....185	
QUINTET AC BLOOD GLUCOSE TEST STRP .....76	rabeprazole sodium TBEC PO ...182	
QUINTET BLOOD GLUCOSE SYSTEM DEVI .....113	RADIAURA CREA 69	RAZADYNE ER CP24 PO (Use galantamine hydrobromide) 176
	RADICAVA ORS STARTER KIT SUSP 169	READYLANCE SAFETY LANCETS .

113	SYSTEM KIT	113	RELION LANCING DEVICE KIT .	114
REALITY INSULIN SYRINGE ...	144	REGLAN TABS PO (Use metoclopramide hcl)	82	RELION LANCING DEVICE MISC 114
REALITY LANCETS	113	RELAFEN DS PO	6	RELION MICRO KIT
REALITY LATEX CONDOMS MISC .	94	RELENZA DISKHALER	54	RELION MINI PEN NEEDLES ...
REALITY LATEX/ULTRA TEXTURED DEVI	94	RELEUKO SOLN	87	RELION PEN NEEDLES
REALITY LATEX/ULTRA THIN DEVI	94	RELEUKO SOSY	87	RELION PREMIER BLU MONITOR DEVI
REALITY SWABS	133	RELEXXII TBCR PO 18 MG, 27 MG, 36 MG, 54 MG	3	RELION PREMIER CLASSIC DEVI 114
REBIF REBIDOSE SOAJ	177	RELEXXII TBCR PO 45 MG, 63 MG, 72 MG (Use methylphenidate hcl) ..	3	RELION PREMIER COMPACT SYSTEM KIT
REBIF REBIDOSE TITRATION PACK SOAJ	177	RELEXXII TBCR PO 45 MG, 63 MG, 72 MG	3	RELION PREMIER TEST STRP ..
REBIF SOSY	177	RELION ALCOHOL SWABS	133	RELION PREMIER VOICE MONITOR DEVI
REBIF TITRATION PACK SOSY .	177	RELION ALL-IN-ONE	113	RELION PREMIUM MONITOR DEVI 93
REBINYN	85	RELION BLOOD GLUCOSE TEST STRP	76	RELION PRIME MONITOR DEVI 114
REBLOZYL	87	RELION BLOOD PRESSURE MONITOR DEVI	93	RELION PRIME TEST STRP
RECOMBINATE SOLR	85	RELION CONFIRM GLUCOSE MONITOR KIT	113	RELION PULSE OXIMETER MISC 133
RECOMBIVAX HB SUSP	185	RELION CONFIRM/MICRO TEST STRP	76	RELION SHORT PEN NEEDLES 144
RECOMBIVAX HB SUSY	185	RELION GLUCOSE PO	27	RELION TRUE MET AIR GLUC METER KIT
RECONSTITUBE MISC	133	RELION INSULIN SYRINGE	144	RELION TRUE METRIX TEST STRIPS STRP
RECORLEV	78	RELION KETONE TEST STRP ...	76	RELION ULTIMA GLUCOSE SYSTEM KIT
RECTIV PR (Use nitroglycerin (intra-anal))	11	RELION LANCET DEVICES 30G 113		RELION ULTIMA TEST STRP
REFLECTIONS AA BREAST PROSTHES MISC	133	RELION LANCETS	113	RELION ULTRA THIN LANCETS 30G
REFLECTIONS C BREAST PROSTHES MISC	133	RELION LANCETS MICRO-THIN 33G	114	RELION ULTRA THIN PLUS LANCETS
REFUAH PLUS BLOOD GLUCOSE TEST STRP	76	RELION LANCETS THIN 26G ...	114	RELION ULTRA THIN PLUS LANCETS
REFUAH PLUS GLUCOSE CONTROL SOLN	113	RELION LANCETS ULTRA-THIN 30G	114	

RELISTOR SOLN	83	RESTASIS MULTIDOSE EMUL ..	171	REXALL BLOOD GLUCOSE TEST STRP	76
RELISTOR TABS	83	RESTORE FOAM DRESSING PADS	91	REXALL LANCETS ULTRA THIN 30G	114
RELNATE DHA CAPS PO	167	RESTORE ODOR ABSORBING DRESS PADS	91	REXULTI	50
RELPAK PO (Use eletriptan hydrobromide)	157	RESTORIL PO (Use temazepam) ..	88	REYATAZ CAPS PO 200 MG (Use atazanavir sulfate)	52
RELPAK PO 40 MG (Use eletriptan hydrobromide)	157	RETACRIT	87	REYATAZ CAPS PO 300 MG (Use atazanavir sulfate)	52
RELTONE CAPS PO	82	RETEVMO CAPS	44	REYATAZ PACK	52
RELYVRIO	169	RETIN-A CREA (Use tretinoin)	63	REYVOW	157
REMERON SOLTAB TBDP PO (Use mirtazapine)	22	RETIN-A GEL (Use tretinoin)	63	REZLIDHIA	44
REMERON TABS PO 15 MG, 30 MG (Use mirtazapine)	22	RETIN-A MICRO (Use tretinoin microsphere)	63	REZUROCK	159
REMICADE	83	RETIN-A MICRO PUMP (Use tretinoin microsphere)	63	REZVOGLAR KWIKPEN	30
REMODULIN SOLN IJ	57	RETIN-A MICRO PUMP	63	RHOFADE	71
RENAGEL PO (Use sevelamer hcl) 83		RETROVIR CAPS PO (Use zidovudine)	52	RHOGAM ULTRA-FILTERED PLUS SOSY IM	174
RENFLEXIS	83	RETROVIR SYRP PO (Use zidovudine)	52	RHOPHYLAC SOSY IJ	174
REVELA PACK (Use sevelamer carbonate)	83	REUSABLE COMFORTSEAL MASK-LRG MISC	154	RHOPRESSA	171
REVELA TABS PO (Use sevelamer carbonate)	83	REUSABLE COMFORTSEAL MASK-MED MISC	154	ribavirin (hepatitis c) CAPS PO	53
repaglinide PO	30	REUSABLE COMFORTSEAL MASK-SML MISC	154	ribavirin (hepatitis c) TABS PO 200 MG	53
REPATHA PUSHTRONEX SYSTEM SOCT	36	REVATIO SOLN (Use sildenafil citrate (pulmonary hypertension)) ..	57	ribavirin	54
REPATHA SOSY	36	REVATIO SUSR (Use sildenafil citrate (pulmonary hypertension)) ..	57	RIDAURA PO	4
REPATHA SURECLICK SOAJ	36	REVATIO TABS PO (Use sildenafil citrate (pulmonary hypertension)) ..	57	RIDVANTAGE LICE COMB MISC 133	
REPLACEMENT AIR FILTER MISC . 154		REVLIMID PO	159	rifabutin PO	41
REPLACEMENT FILTERS MISC 154		REXALL BLOOD GLUCOSE SYSTEM KIT	114	rifampin CAPS PO	41
REPLACEMENT NECKBAND STRAPS MISC	133			RIGHTEST ALTERNATE SITE ADAPT MISC	114
RESTASIS EMUL (Use cyclosporine (ophth))	171			RIGHTEST GC300 CONTROL LIQD 114	
				RIGHTEST GD500 LANCING	

DEVICE MISC	114	RISPERDAL CONSTA 50 MG (Use risperidone microspheres)	48	ROCALTROL CAPS PO (Use calcitriol)	80
RIGHTEST GM100 BLOOD GLUCOSE KIT	114	RISPERDAL SOLN PO (Use risperidone)	48	ROCALTROL SOLN PO (Use calcitriol)	80
RIGHTEST GM300 BLOOD GLUCOSE KIT	114	RISPERDAL TABS PO 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG (Use risperidone)	48	ROCKLATAN	171
RIGHTEST GM550 BLOOD GLUCOSE KIT	114	risperidone microspheres	48	roflumilast PO	14
RIGHTEST GS100 BLOOD GLUCOSE STRP	76	risperidone SOLN PO	48	ROLLATOR ULTRA-LIGHT MISC 133	
RIGHTEST GS300 BLOOD GLUCOSE STRP	76	risperidone TABS PO	48	ROLLER WALKER MISC	133
RIGHTEST GS550 BLOOD GLUCOSE STRP	76	risperidone TBDP PO	48	ROLLING WALKER/BURGUNDY MISC	133
RIGHTEST GT333 BLOOD GLUCOSE DEVI	114	RITALIN LA CP24 PO 10 MG, 20 MG, 30 MG (Use methylphenidate hcl)	3	ROLVEDON	87
RIGHTEST GT333 BLOOD GLUCOSE STRP	76	RITALIN LA CP24 PO 40 MG (Use methylphenidate hcl)	3	ropinirole hydrochloride TABS PO 0.25 MG, 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG	46
RIGHTEST GT333 GLUCOSE TEST STRP	76	RITALIN TABS PO 20 MG (Use methylphenidate hcl)	3	ropinirole hydrochloride TABS PO 5 MG	46
RILUTEK TABS PO (Use riluzole) 169		RITALIN TABS PO 5 MG, 10 MG (Use methylphenidate hcl)	3	ropinirole hydrochloride TB24 PO	46
riluzole TABS PO	169	RITEFLO DEVI	154	ROSDAN	71
rimantadine hydrochloride TABS PO . 54		ritonavir TABS PO	52	rosuvastatin calcium TABS PO	36
RING CUSHION 14" MISC	133	rivastigmine	176	ROTARIX SUSP	185
RING CUSHION 16" MISC	133	rivastigmine tartrate CAPS PO ...	176	ROTARIX SUSR PO	185
RING CUSHION 18" MISC	133	RIXUBIS SOLR	85	ROTATEQ SOLN PO	185
RINVOQ TB24 PO	3	rizatriptan benzoate TABS PO ...	157	ROUND SHOWER STOOL MISC 133	
RIOMET SOLN PO (Use metformin hcl)	26	rizatriptan benzoate TBDP PO ...	157	ROWASA PR (Use mesalamine w/ cleanser)	83
risedronate sodium TABS PO	78	ROBINUL TABS PO (Use glycopyrrolate)	181	ROXICODONE TABS PO 15 MG, 30 MG (Use oxycodone hcl)	9
risedronate sodium TBEC PO	78	ROBINUL-FORTE TABS PO (Use glycopyrrolate)	181	ROXYBOND TABA PO 5 MG, 15 MG, 30 MG	9
RISPERDAL CONSTA (Use risperidone microspheres)	48	ROBITUSSIN COUGH+CHEST CONG DM LIQD PO (Use dextromethorphan-guaifenesin) ...	62	ROZEREM PO (Use ramelteon) ...	88
				ROZLYTREK CAPS	44
				ROZLYTREK PACK	44

RUBBER BATH MAT MISC 133	COVERALL/HOOD/XL MISC .....133	SALYCIM CREA 70
RUBBER INFLATABLE CUSHION MISC .....133	SAFE-SENSE HEAD COVER 21" MISC .....133	SAMI THE SEAL FILTERS MISC 154
RUBRACA 44	SAFE-SENSE HEAD COVER CIRC 21" MISC .....133	SAMSCA TABS (Use tolvaptan) ... 80
RUCONEST .....86	SAFE-SENSE LAB COAT-LARGE MISC .....133	SANCUSO PTCH .....31
rufinamide SUSP .....21	SAFE-SENSE LAB COAT-MEDIUM MISC .....133	SANDIMMUNE CAPS PO (Use cyclosporine) .....160
rufinamide TABS PO 200 MG 21	SAFE-SENSE LAB COAT-SMALL MISC .....133	SANDIMMUNE SOLN PO 100 MG/ML .....160
rufinamide TABS PO 400 MG 21	SAFE-SENSE LAB COAT-XLARGE MISC .....133	SANDOSTATIN LAR DEPOT KIT (Use octreotide acetate) 80
RUKOBIA .....52	SAFE-SENSE SHOE COVER NON- SKID MISC .....133	SANDOSTATIN LAR DEPOT KIT .80
RX LOCKING CAP MISC 133	SAFE-T-LANCE .....114	SANDOSTATIN SOLN 50 MCG/ML, 100 MCG/ML, 500 MCG/ML (Use octreotide acetate) 80
RYALTRIS 168	SAFE-T-LANCE PLUS .....114	SAPHRIS 10 MG (Use asenapine maleate) 49
RYBELSUS TABS PO 3 MG, 14 MG . 28	SAFETY LANCET 30G/PRESSURE ACT 114	SAPHRIS 2.5 MG, 10 MG (Use asenapine maleate) 49
RYBELSUS TABS PO .....28	SAFETY LANCETS 21G .....114	SAPHRIS 5 MG (Use asenapine maleate) .....48
RYDAPT .....44	SAFETY LANCETS 28G .....114	SAPHRIS 5 MG (Use asenapine maleate) .....49
RYKINDO SRER .....48	SAFETY PEN NEEDLES .....144	sapropterin dihydrochloride PACK .80
RYSTIGGO 280 MG/2ML 159	SAFYRAL PO (Use drospirenone- ethinyl estradiol-levomefolate calcium) 60	sapropterin dihydrochloride TABS .80
RYTARY CPCR PO .....46	SAIZEN IJ .....79	SAPS HEALTH TWIST TOP LANCETS .....114
RYTHMOL SR CP12 PO (Use propafenone hcl) .....14	SALICATE LIQD 70	SAPS TWIST TOP LANCETS ...114
SABRIL PACK (Use vigabatrin) ... 22	salicylic acid FOAM 70	SAPSCARE TWIST TOP LANCETS 114
SABRIL TABS (Use vigabatrin) ...22	salicylic acid GEL 6 % 70	SAVAYSA PO .....17
SAFE-SENSE BEARD NET MISC 133	salicylic acid LIQD 27.5 %70	SAVELLA TABS PO .....176
SAFE-SENSE COVERALL BOOTS MISC .....133	SALICYLIC ACID OINT .....70	SAVELLA TITRATION PACK MISC 176
SAFE-SENSE COVERALL/HOOD/L MISC .....133	saline SOLN 0.65 %169	saxagliptin hcl PO .....28
SAFE-SENSE COVERALL/HOOD/M MISC .....133	salsalate PO .....8	
SAFE-SENSE COVERALL/HOOD/S MISC .....133		
SAFE-SENSE		

saxagliptin-metformin hcl PO	26	SELSUN BLUE DAILY LOTN (Use selenium sulfide)	67	SEROQUEL TABS PO 300 MG, 400 MG (Use quetiapine fumarate)	49
SB ALCOHOL PREP	133	SELSUN BLUE LOTN (Use selenium sulfide)	67	SEROQUEL XR TB24 PO 300 MG (Use quetiapine fumarate)	49
SB INSULIN SYRINGE	144	SELSUN BLUE MEDICATED LOTN (Use selenium sulfide)	67	SEROQUEL XR TB24 PO 50 MG, 150 MG, 200 MG, 400 MG (Use quetiapine fumarate)	49
SB LANCETS THIN	114	SELZENTRY SOLN	52	SEROSTIM SC 4 MG, 5 MG, 6 MG	79
SB LANCETS ULTRA THIN	115	SELZENTRY TABS PO (Use maraviroc)	52	SERTRALINE HCL CAPS	24
SCSEMBLIX 20 MG, 40 MG	45	SELZENTRY TABS PO	52	sertraline hcl CONC PO	24
scopolamine	32	SEMGLEE (YFGN) SOLN	30	sertraline hcl TABS PO	24
SEAL-TIGHT CAST/BANDAGE MISC	134	SEMGLEE (YFGN) SOPN	30	SERUM BOTTLE MISC	134
SEAL-TIGHT MID-ARM PROTECTOR MISC	134	SE-NATAL 19 CHEW PO	167	SERUM BOTTLE STOPPER 20MM MISC	134
SEASONIQUE PO (Use levonorgestrel-ethinyl estradiol (91-day))	60	SE-NATAL 19 TABS PO	167	SERUM BOTTLES 30ML/AMBER GLASS MISC	134
SECUADO	49	SENNA SYRP	89	SERUM BOTTLES 50ML/CLEAR GLASS MISC	134
SECURESAFE INSULIN SYRINGE	144	sennosides TABS PO 8.6 MG, 15 MG	89	SERUM BOTTLES/AMBER GLASS 20ML MISC	134
SECURESAFE SAFETY PEN NEEDLES	144	sennosides-docusate sodium TABS PO	89	SETTLING PLATE SDA/29ML/100X15 MISC	134
SECURESAFE SYRINGE/NEEDLE	144	SENOKOT S TABS PO (Use sennosides-docusate sodium)	89	SETTLING PLATE TSA/25ML/100X15 MISC	134
SEGLENTIS	10	SENOKOT TABS PO (Use sennosides)	89	sevelamer carbonate PACK	83
SEGLUROMET	26	SENSI-CARE MOISTURIZING CREA	71	sevelamer carbonate TABS PO	83
SELECT-LITE DEVICE/LANCETS KIT	115	SENSIPAR PO (Use cinacalcet hcl)	80	sevelamer hcl PO	83
SELECT-LITE LANCING DEVICE MISC	115	SENTRY SENIOR TABS PO	164	SEVENFACT	85
SELECT-OB CHEW	167	SENTRY SENIOR/LUTEIN TABS PO	164	SFROWASA ENEM PR	83
SELECT-OB+DHA MISC PO	167	SEREVENT DISKUS	16	SHAPERS LAYERED BREAST SHAPER MISC	134
selegiline hcl CAPS PO	47	SEROQUEL TABS PO 25 MG, 50 MG, 100 MG, 200 MG (Use quetiapine fumarate)	49	SHINGRIX	185
selegiline hcl TABS PO	47			SHOPKO AUTOLET LANCING	
selenium sulfide LOTN 2.5 %	66				
selenium sulfide SHAM 2.25 %	67				

DEVICE MISC	115	155	SINUVA IMPL	169
SHOPKO ON-THE-GO LANCETS		SILIGENTLE FOAM DRESSING	sirolimus SOLN	160
30G	115	PADS	sirolimus TABS PO	160
SHOPKO UNIFINE PENTIPS ...	144	SILIQ	SIRTURO	41
SHOPKO UNIFINE PENTIPS PLUS		silodosin PO	SITAVIG TABS BU	53
144		SILVADENE (Use silver	SITZ BATH MISC	134
SHOPKO UNILET LANCETS 28G		sulfadiazine)	SIVEXTRO TABS	40
115		silver nitrate SOLN	SKELAXIN PO (Use metaxalone)	
SHOWER-PAK MISC	134	silver sulfadiazine	168	
SIDESTREAM ADULT FACE MASK		SIMBRINZA	skin protectants, misc. CREA	71
MISC	155	simethicone CAPS PO 125 MG, 180	SKYRIZI PEN SOAJ	66
SIDESTREAM PEDIATRIC FACE		MG	SKYRIZI SOCT	83
MASK MISC	155	simethicone CHEW PO	SKYRIZI SOLN	83
SIDESTREAM PLS ADULT FACE		simethicone SUSP PO	SKYRIZI SOSY	66
MASK MISC	155	SIMPLE DIAGNOSTICS LANCING	SKYTROFA	79
SIGNATURE PRO ELEC BREAST		DEV MISC	SLEEPRIGHT BREATHE AID MISC .	
PUMP MISC	134	SIMPLE WISHES PUMPING BRA	134	
SIGNIFOR	80	MISC	SLEEPRIGHT DENTAL GUARD	
SIGNIFOR LAR	80	SIMPLYGO BREAST PUMP MISC	DURA MISC	134
SIKLOS TABS	86	134	SLEEPRIGHT DENTAL GUARD	
sildenafil citrate (pulmonary		SIMPONI ARIA SOLN	MISC	134
hypertension) SOLN	57	SIMPONI SOAJ	SLEEPRIGHT DENTAL GUARD	
sildenafil citrate (pulmonary		SIMPONI SOSY	SLIM MISC	134
hypertension) SUSR	57	simvastatin TABS PO	SLEEPRIGHT SPORT BREATHE	
sildenafil citrate (pulmonary		SINEMET TABS PO 100 MG-10 MG,	AID MISC	134
hypertension) TABS PO	57	100 MG-25 MG (Use carbidopa-	SLEEPRIGHT VAPOR INHALER	
SILICONE EAR PLUGS FOR KIDS		levodopa)	MISC	134
MISC	134	SINGLE-LET	SLO-NIACIN TBCR PO 250 MG, 750	
SILICONE EAR PLUGS MISC ...	134	115	MG (Use niacin)	187
SILICONE EARPLUGS CHILDRENS		SINGULAIR CHEW PO (Use	SLO-NIACIN TBCR PO 500 MG (Use	
MISC	134	montelukast sodium)	niacin)	187
SILICONE MASK/ADULT MISC ..	155	SINGULAIR PACK PO (Use	SLYND PO	61
SILICONE MASK/INFANT MISC .	155	montelukast sodium)	SM ALCOHOL PREP	134
SILICONE MASK/PEDIATRIC MISC .		SINGULAIR TABS PO (Use		
		montelukast sodium)		

SM BLOOD PRESSURE MONITOR DEVI .....93	SMART SENSE THIN LANCETS 26G .....115	SODIUM CHLORIDE SOLN IV 0.9 %159
SM BLOOD PRESSURE MONITOR MISC .....93	SMART SENSE VALUE GLUCOSE SYS KIT .....115	SODIUM CHLORIDE SOLN PO (Use sodium chloride) .....159
SM BLOOD PRESSURE SERIES 200 DEVI .....93	SMART SENSE VALUE TEST STRP.....76	sodium citrate & citric acid PO ....84
SM BLOOD PRESSURE SERIES 200W DEVI .....93	SMARTEST BLOOD GLUCOSE TEST STRP .....76	sodium fluoride (dental) CREA ...160
SM BLOOD PRESSURE SERIES 600W DEVI .....93	SMARTEST CONTROL MEDIUM SOLN .....115	sodium fluoride (dental) GEL .....161
SM BLOOD PRESSURE SERIES 800 DEVI .....93	SMARTEST EJECT DEVI .....115	sodium fluoride (dental) PSTE DT 161
SM COTTON SWABS SWAB ....134	SMARTEST EJECT STARTER KIT 115	sodium fluoride (dental) SOLN 0.2 % 161
SM FOAM EAR PLUGS MISC ...134	SMARTEST PERSONA STARTER KIT .....115	SODIUM FLUORIDE 5000 ENAMEL GEL .....161
SM GAUZE PADS .....91	SMARTEST PRONTO STARTER KIT .....115	SODIUM FLUORIDE 5000 SENSITIVE GEL .....161
SM GLUCOSE PO .....27	SMARTEST PROTEGE DEVI ....115	sodium fluoride CHEW PO .....158
SM ONE DAILY WOMENS TABS PO.....164	SMARTEST PROTEGE STARTER KIT .....115	SODIUM OXYBATE SOLN PO ...175
SM STERILE PADS .....91	SNAP-ON CHLOROBUTYL STOPPER MISC .....134	sodium phenylbutyrate POWD PO 80
SM TRUEDRAW LANCING DEVICE MISC .....115	SODIUM ACETATE SOLN (Use sodium acetate) .....157	sodium phenylbutyrate TABS PO .80
SM WALKER/YOUTH MISC .....134	sodium acetate SOLN .....157	sodium phosphates (sodium phosphate dibasic & monobasic) 45 MMOLE/15ML .....159
SM WRIST CUFF BP MONITOR MISC .....93	sodium bicarbonate (antacid) TABS PO 325 MG, 650 MG .....11	sodium phosphates ENEM PR ....89
SMART DIABETES VANTAGE LANCING MISC .....115	sodium chloride (gu irrigant) 0.9 % 84	sodium polystyrene sulfonate POWD PO .....160
SMART SENSE COLOR LANCETS 33G .....115	sodium chloride flush .....159	sodium polystyrene sulfonate SUSP CO 15 GM/60ML .....160
SMART SENSE GLUCOSE PO ...27	SODIUM CHLORIDE FLUSH ...159	SOFOSBUVIR-VELPATASVIR TABS.....53
SMART SENSE PREMIUM SYSTEM KIT .....115	sodium chloride hypertonic OINT 173	SOFT HANDS COTTON GLOVE MISC .....134
SMART SENSE PREMIUM TEST STRP .....76	sodium chloride hypertonic SOLN 173	SOF-WICK PADS .....91
SMART SENSE STANDARD LANCETS .....115	sodium chloride SOLN IV 0.45 %, 0.9 %, 3 %, 5 %159	SOGROYA .....79
		SOHONOS PO 1 MG, 1.5 MG, 2.5

MG, 10 MG	168	SORILUX FOAM	66	SPORANOX SOLN (Use itraconazole)	33
solifenacin succinate TABS PO ..	183	sotalol hcl (afib/afI) PO	55	SPRAVATO (56 MG DOSE)	23
SOLIQUA	26	sotalol hcl TABS PO 120 MG	55	SPRAVATO (84 MG DOSE)	23
SOLIRIS	86	sotalol hcl TABS PO 240 MG	55	SPRAY APPLICATOR KIT MISC	134
SOLO TABS PO	164	sotalol hcl TABS PO 80 MG, 160 MG	55	SPRAY BOTTLE/PLASTIC 120ML MISC	134
SOLODYN TB24 PO 55 MG, 65 MG, 80 MG, 105 MG, 115 MG (Use minocycline hcl)	179	SOTYKTU	66	SPRITAM TB3D	21
SOLOSEC	3	SOTYLIZE SOLN PO	55	SPRYCEL (Use dasatinib)	45
SOLTAMOX SOLN PO	43	SOVALDI PACK	53	STALEVO 100 PO (Use carbidopa- levodopa-entacapone)	46
SOLUS V2 BLOOD GLUCOSE SYSTEM DEVI	115	SOVALDI TABS	53	STALEVO 125 PO (Use carbidopa- levodopa-entacapone)	46
SOLUS V2 BLOOD GLUCOSE SYSTEM KIT	115	SPHYGMOMANOMETER MISC ..	93	STALEVO 150 PO (Use carbidopa- levodopa-entacapone)	46
SOLUS V2 CONTROL SOLN	115	SPIKEVAX COVID-19 VACCINE SUSP	185	STALEVO 200 PO (Use carbidopa- levodopa-entacapone)	46
SOLUS V2 LANCETS 28G	115	SPIKEVAX SUSP	185	STALEVO 50 PO (Use carbidopa- levodopa-entacapone)	46
SOLUS V2 LANCING DEVICE MISC 115		SPIKEVAX SUSY	185	STALEVO 75 PO (Use carbidopa- levodopa-entacapone)	47
SOLUS V2 TEST STRP	76	spinosad	72	STAMARIL SUSR	185
SOMA TABS PO (Use carisoprodol) . 168		SPIRIVA HANDIHALER CAPS (Use tiotropium bromide monohydrate) .	14	STANDARD CRUTCH TIP MISC	134
SOMATULINE DEPOT	80	SPIRIVA RESPIMAT AERS	14	STEEL ROLLING WALKER MISC 134	
SOOTHENEB NBL 100 ADULT MASK MISC	155	SPIRO PD DEVI	155	STEGLATRO	30
SOOTHENEB NBL 100 CHILD MASK MISC	155	spironolactone & hydrochlorothiazide PO	77	STEGLUJAN	26
SOOTHENEB NBL 100 MED CUP MISC	155	spironolactone SUSP	78	STELARA 130 MG/26ML	83
SOOTHENEB NBL 100 MESH CAP MISC	155	spironolactone TABS PO 50 MG, 100 MG	78	STELARA SOLN 45 MG/0.5ML ...	66
SOOTHIES COOLING GEL PADS MISC	134	spironolactone TABS PO	78	STELARA SOSY	66
SOOTHIES GEL PADS MISC	134	SPLASH SHIELD FULL FACE MISC 134		STEP COUNTER MISC	134
sorafenib tosylate PO	45	SPLASH SHIELD SHORT FACE MISC	134	STEP N REST II WALKER MISC	134
		SPLIT HANDGRIPS MISC	134	STEP N REST WALKER MISC ..	134
		SPORANOX CAPS PO (Use itraconazole)	33		

STERILANCE PA MISC	115	SUBLOCADE SOSY	10	8 %-4 %	63
STERILANCE TL	115	SUBOXONE FILM SL (Use		sulfacetamide sodium-sulfur in urea	
STERILE WATER FOR INJECTION		buprenorphine hcl-naloxone hcl		vehicle EMUL 10 %-10 %-4 %	63
IJ	175	dihydrate)	10	sulfacetamide sod-prednisolone	
STETHOSCOPE DUAL HEAD MISC		sucralfate SUSP PO	181	SOLN	172
135		sucralfate TABS PO	181	SULFACETAMIDE-SULFUR IN	
STETHOSCOPE MISC	135	SUCTION GRAB BAR MISC	135	UREA EMUL	63
STETHOSCOPE SINGLE HEAD		SUCTION TIPS MISC	135	sulfadiazine TABS PO	179
MISC	135	SUDAFED CHILDRENS LIQD PO		sulfamethoxazole-trimethoprim SUSP	
STIMUFEND	87	169		PO	40
STIOLTO RESPIMAT	16	SUDAFED SINUS CONGESTION		sulfamethoxazole-trimethoprim TABS	
STIRRING ROD/GLASS 12X1/4"		TABS PO (Use pseudoephedrine hcl)		PO	40
MISC	135	.....	169	SULFAMYLON CREA	67
STIVARGA	45	SUDAFED TABS PO (Use		SULFAMYLON PACK 5 % (Use	
STOCKING APPLICATOR PETITE		pseudoephedrine hcl)	169	mafenide acetate)	67
MISC	135	SULAR PO 8.5 MG, 17 MG, 34 MG		sulfasalazine TABS PO	83
STOCKING APPLICATOR		(Use nisoldipine)	56	sulfasalazine TBEC PO	83
REGULAR MISC	135	sulfacetamide sodium (acne)	63	sulindac TABS PO	6
STOP LICE EGG & NIT REMOVAL		sulfacetamide sodium (ophth) OINT		SUMADAN	63
MISC	135	171		SUMADAN WASH LIQD (Use	
STRAINER/STAINLESS STEEL/2.5"		sulfacetamide sodium (ophth) SOLN .		sulfacetamide sodium w/ sulfur) ...	64
MISC	135	171		SUMADAN XLT KIT	64
STRATTERA PO (Use atomoxetine		sulfacetamide sodium GEL	67	sumatriptan	157
hcl)	1	sulfacetamide sodium LIQD	67	sumatriptan succinate SOAJ	157
STRESS FORMULA/ZINC/ENERGY		sulfacetamide sodium w/ sulfur		sumatriptan succinate SOCT	157
TABS PO	165	CREA 10 %-2 %, 10 %-5 %	63	sumatriptan succinate SOLN 6	
STRIBILD	52	sulfacetamide sodium w/ sulfur		MG/0.5ML	157
STRIVE DUAL ZONE PEAK FLOW		EMUL 10 %-1 %	63	sumatriptan succinate TABS PO .	157
MTR	155	sulfacetamide sodium w/ sulfur		sumatriptan-naproxen sodium PO	
STRIVERDI RESPIMAT	16	FOAM	63	156	
STROMECTOL PO (Use ivermectin) .		sulfacetamide sodium w/ sulfur LIQD		SUMAXIN CP	64
12		63		SUMAXIN PADS	64
STROVITE FORTE TABS PO (Use		sulfacetamide sodium w/ sulfur PADS		sumatriptan malate PO	45
multiple vitamins w/ minerals)	164	10 %-4 %	63		
		sulfacetamide sodium w/ sulfur SUSP			

SUNLENCA SOLN	52	SURE COMFORT ALCOHOL PREP	135	SYMBICORT (Use budesonide-formoterol fumarate dihydrate)	16
SUNLENCA TBPK 300 MG	52	SURE COMFORT INSULIN SYRINGE	144	SYMBICORT 160 MCG/ACT-4.5 MCG/ACT (Use budesonide-formoterol fumarate dihydrate)	16
SUNOSI PO 150 MG	1	SURE COMFORT LANCETS 21G 116		SYMBICORT 80 MCG/ACT-4.5 MCG/ACT (Use budesonide-formoterol fumarate dihydrate)	16
SUNOSI PO 75 MG	1	SURE COMFORT LANCETS 30G 116		SYMBYAX PO 25 MG-3 MG, 25 MG-6 MG (Use olanzapine-fluoxetine hcl)	176
SUPPOSITORY MOLD 2GM MISC 135		SURE COMFORT LANCING PEN MISC	116	SYMDEKO	179
SUPPOSITORY MOLD/ALUMINUM 2 GM MISC	135	SURE COMFORT PEN NEEDLES 144		SYMFI (Use efavirenz-lamivudine-tenofovir disoproxil fumarate)	52
SUPPOSITORY MOLDS 1.3 ML MISC	135	SURELIFE BP MONITOR/ARM DEVI	93	SYMFI LO (Use efavirenz-lamivudine-tenofovir disoproxil fumarate)	52
SUPPOSITORY MOLDS 2 CC/V-NOTCH MISC	135	SURELIFE BP MONITOR/WRIST DEVI	93	SYMLINPEN 120 SOPN	25
SUPPOSITORY MOLDS 2 ML MISC 135		SURELIFE CLEARWAVE II OXIMETER MISC	135	SYMLINPEN 60 SOPN	25
SUPPOSITORY MOLDS 2.25 ML MISC	135	SURELIFE CLEARWAVE OXIMETER MISC	135	SYMPAZAN FILM	19
SUPPOSITORY MOLDS 3 ML MISC 135		SURELITE LANCETS	116	SYMPHONY DOUBLE PUMPING SYSTEM MISC	135
SUPPOSITORY SHELL RACK MISC	135	SURESTEP GLUCOSE CONTROL SOLN	116	SYMPROIC PO	83
SUPPOSITORY SHELLS 2.0 ML MISC	135	SURESTEP PRO HIGH GLUCOSE LIQD	116	SYMTUZA	52
SUPPOSITORY SHELLS 2.4ML MISC	135	SURESTEP PRO LOW GLUCOSE LIQD	116	SYNALAR (CREAM)	69
SUPPOSITORY SHELLS SMALL 1.3ML MISC	135	SUSTIVA CAPS PO 200 MG (Use efavirenz)	52	SYNALAR (OINTMENT)	69
SUPRAX CAPS PO (Use cefixime) 58		SUSTIVA CAPS PO 50 MG (Use efavirenz)	52	SYNALAR CREA (Use fluocinolone acetonide)	69
SUPRAX CHEW PO 100 MG	58	SUTENT PO (Use sunitinib malate) 45		SYNALAR OINT (Use fluocinolone acetonide)	69
SUPRAX CHEW PO 200 MG	58	SWIM EARPLUGS MISC	135	SYNALAR SOLN (Use fluocinolone acetonide)	69
SUPRAX SUSR PO 200 MG/5ML (Use cefixime)	58	SWING MAXI HANDS-FREE PUMP MISC	135	SYNALAR TS	69
SUPREME II HIGH/LOW CONTROL LIQD	115			SYNAREL	79
SUPREME TEST STRP	76			SYNJARDY TABS	26

SYNJARDY XR TB24	26	tafluprost	173	tasimelteon CAPS	88
SYNTHROID TABS PO (Use levothyroxine sodium)	180	TAGAMET HB 200 TABS PO (Use cimetidine)	181	TASMAR PO (Use tolcapone)	46
SYPRINE PO (Use trientine hcl) .	159	TAGRISSE	42	tavaborole	65
SYRINGE	144	TAKEAWAY ENVIRONMENTAL RETURN MISC	135	TAVALISSE	86
SYRINGE DIAL-A-DOSE MISC ..	135	TAKHZYRO SOLN	86	TAVNEOS	86
SYRINGE LUER LOCK	144	TAKHZYRO SOSY	86	TAYTULLA CAPS (Use norethin acet & estrad-fe)	60
SYSTANE ICAPS AREDS2 TABS PO	164	TALICIA	182	tazarotene CREA 0.1 %	66
TAB-A-VITE/IRON/BETA CAROTENE TABS PO	161	TALKING SENSE BP MONITOR DEVI	93	TAZAROTENE FOAM	64
TABLET CUTTER/CRUSHER MISC .	135	TALTZ SOAJ	66	tazarotene GEL	66
TABLET CUTTER/DELUXE SAFETY MISC	135	TALTZ SOSY 80 MG/ML	66	TAZVERIK	45
TABLET CUTTER/SAFETY SHIELD MISC	135	TALZENNA	45	TDVAX SUSP	180
TABLET CUTTER-CRUSHER MISC .	135	TAMIFLU CAPS PO 30 MG (Use oseltamivir phosphate)	54	TECFIDERA CDPK (Use dimethyl fumarate)	177
TABLOID PO	42	TAMIFLU CAPS PO 45 MG, 75 MG (Use oseltamivir phosphate)	54	TECFIDERA CPDR (Use dimethyl fumarate)	177
TABRECTA	45	TAMIFLU SUSR PO (Use oseltamivir phosphate)	54	TECHLITE INSULIN SYRINGE ..	144
TACLONEX OINT (Use calcipotriene- betamethasone dipropionate)	69	tamoxifen citrate TABS PO	43	TECHLITE LANCETS	116
TACLONEX SUSP (Use calcipotriene-betamethasone dipropionate)	69	tamsulosin hcl PO	84	TECHLITE LANCETS 26G	116
tacrolimus (topical) OINT	70	TAP-N-CLICK SILICONE PAD MISC 135		TECHLITE LANCETS 30G	116
tacrolimus CAPS PO	160	TARCEVA (Use erlotinib hcl)	42	TECHLITE PEN NEEDLES	144
tadalafil (pulmonary hypertension) TABS PO	57	TARGRETIN (Use bexarotene (topical))	66	TECHLITE PLUS PEN NEEDLES 144	
tadalafil PO 5 MG	57	TARGRETIN PO (Use bexarotene) 45		TEGADERM FOAM PADS	91
TADLIQ SUSP	57	TARON-C DHA PO	167	TEGRETOL SUSP PO (Use carbamazepine)	21
TAFINLAR CAPS PO	45	TARPEYO CPDR	61	TEGRETOL TABS PO (Use carbamazepine)	21
TAFINLAR TBSO	45	TASCENSO ODT	177	TEGSEDIL	178
		TASIGNA	45	TEKTURNA HCT PO 12.5 MG-300 MG, 25 MG-300 MG	38

TEKTURNA PO (Use aliskiren fumarate)	39	teriflunomide PO	177	theophylline ELIX PO	17
telmisartan PO	37	TESTIM GEL TD (Use testosterone) .	10	theophylline SOLN PO	17
telmisartan-amlodipine PO	39	testosterone cypionate SOLN IM ..	10	theophylline TB12 PO 100 MG, 200	MG
telmisartan-hydrochlorothiazide PO	39	testosterone enanthate SOLN IM ..	10	MG	17
temazepam PO	88	testosterone GEL TD	10	theophylline TB12 PO 300 MG, 450	MG
TEMODAR CAPS PO 250 MG (Use	42	testosterone SOLN	11	MG	17
temozolomide)	42	TETANUS-DIPHTHERIA TOXOIDS		theophylline TB24 PO	17
temozolomide CAPS PO 180 MG,	42	TD SUSP	180	THERA TABS PO	165
250 MG	42	tetrabenazine PO	176	THERABETIC MULTI-VITAMIN	
temozolomide CAPS PO 5 MG, 20	42	tetracaine hcl (ophth)	172	TABS PO	164
MG, 100 MG, 140 MG, 180 MG ...	42	tetracycline hcl CAPS PO	179	THERAGRAN-M ADVANCED 50	
TEMPO REFILL KIT	116	TEXACORT SOLN 2.5 %	69	PLUS TABS PO	164
TEMPO WELCOME KIT	116	TEZSPIRE SOAJ	14	THERAGRAN-M PREMIER 50 PLUS	
TENIVAC INJ	180	TEZSPIRE SOSY	14	TABS PO	164
tenofovir disoproxil fumarate TABS	52	TGT BLOOD GLUCOSE		THERAGRAN-M PREMIER TABS	
PO	52	MONITORING KIT	116	PO	164
TENORETIC 100 PO (Use atenolol &	39	TGT BLOOD GLUCOSE TEST		THERA-M TABS PO	164
chlorthalidone)	39	STRP	76	THERASEAL HAND PROTECTION	
TENORETIC 50 PO (Use atenolol &	39	TGT BLOOD PRESSURE MONITOR		LOTN	71
chlorthalidone)	39	DEVI	93	THERA-TABS M TABS PO	164
TENORMIN TABS PO (Use atenolol)	55	TGT GLUCOSE PO	27	THEREMS TABS PO	165
.....	55	TGT LANCET THIN 26G	116	THEREMS-M TABS PO	164
TEPMETKO	45	TGT LANCET ULTRA THIN 30G		thiamine hcl TABS PO 50 MG, 100	
terazosin hcl PO	37	116		MG	187
terbinafine hcl (topical) CREA	65	TGT LANCING DEVICE MISC ...	116	THINLETS GP LANCETS	116
terbinafine hcl TABS PO	32	THALITONE PO	78	THIOLA EC TBEC (Use tiopronin) .	84
terbutaline sulfate TABS PO 2.5 MG .	16	THALOMID PO	159	THIOLA TABS (Use tiopronin)	84
16		THE DOCTORS NIGHTGUARD		thioridazine hcl PO 10 MG, 25 MG,	
terbutaline sulfate TABS PO 5 MG	16	MISC	135	50 MG	49
terconazole vaginal CREA	186	THE SIDE RESTER CUSHION MISC		thioridazine hcl PO 100 MG	49
terconazole vaginal SUPP	186	.....	135	thiothixene PO 1 MG, 2 MG, 5 MG	50
		THEO-24 CP24 PO	17	50	
				THRESHOLD IMT MISC	155

THRESHOLD PEP DEVI	155	CAPS	14	NEEDLE	144
THRIVITE RX TABS PO	167	TIP RECTAL/VAG		TODAYS HEALTH THIN LANCETS	
THYQUIDITY SOLN PO	180	W/PERFORATIONS MISC	135	28G	116
THYROID TABS PO 15 MG, 30 MG,		TIROSINT CAPS PO 13 MCG, 25		TODAYS HEALTH THIN LANCETS	
60 MG, 90 MG, 120 MG	180	MCG, 50 MCG, 75 MCG, 88 MCG,		30G	116
tiagabine hcl PO	22	100 MCG, 112 MCG, 125 MCG, 137		TOILET SAFETY FRAME MISC .	135
TIAZAC PO (Use diltiazem hcl		MCG, 150 MCG, 175 MCG, 200		TOILET SEAT ELEVATOR MISC	
extended release beads)	56	MCG (Use levothyroxine sodium) 180		135	
TIBSOVO	45	TIROSINT CAPS PO 37.5 MCG, 44		tolcapone PO	46
TICOVAC	185	MCG, 62.5 MCG	180	tolmetin sodium CAPS PO	6
TIGLUTIK SUSP	169	TIROSINT-SOL SOLN PO	180	tolmetin sodium TABS PO 600 MG .	6
TIKOSYN PO (Use dofetilide)	14	TIVICAY PD TBSO	52	tolnaftate AERO	65
timolol maleate (ophth) SOLG	170	TIVICAY TABS 10 MG	52	tolnaftate AERP	65
timolol maleate (ophth) SOLN	170	TIVICAY TABS 25 MG, 50 MG	52	tolnaftate CREA	65
timolol maleate TABS PO	55	tizanidine hcl CAPS PO	168	tolnaftate SOLN	65
TIMOPTIC OCUDOSE SOLN (Use		tizanidine hcl TABS PO	168	TOLSURA CAPS PO	33
timolol maleate (ophth))	170	TOBI NEBU (Use tobramycin)	3	tolterodine tartrate CP24 PO	183
TIMOPTIC OCUDOSE SOLN 0.25 %		TOBI PODHALER CAPS	3	tolterodine tartrate TABS PO 2 MG	
(Use timolol maleate (ophth))	170	TOBRADEX OINT	172	183	
TIMOPTIC SOLN (Use timolol		TOBRADEX ST SUSP	172	tolterodine tartrate TABS PO	183
maleate (ophth))	170	TOBRADEX SUSP (Use tobramycin-		tolvaptan TABS	80
TIMOPTIC-XE SOLG (Use timolol		dexamethasone)	172	TOMMEE TIPPEE BREAST PUMP	
maleate (ophth))	170	tobramycin (ophth) SOLN	171	ADTP MISC	135
TINACTIN AERO (Use tolnaftate) .	65	tobramycin NEBU	3	TOMMEE TIPPEE BREAST PUMP	
TINACTIN AERP (Use tolnaftate) .	65	tobramycin-dexamethasone SUSP		MISC	136
TINACTIN CREA (Use tolnaftate) .	65	172		TONGUE CLEANER/COMFORT	
TINACTIN DEODORANT AERP (Use		TOBREX OINT	171	CURVE MISC	136
tolnaftate)	65	TODAYS HEALTH LANCING		TONGUE DEPRESSORS MISC .	136
TINACTIN JOCK ITCH AERP (Use		DEVICE MISC	116	TOOTHETTE BITE BLOCK MISC	
tolnaftate)	65	TODAYS HEALTH MINI PEN		136	
tinidazole PO	39	NEEDLES	144	TOOTHETTE PLUS UNTREATED	
tiopronin TABS	84	TODAYS HEALTH PEN NEEDLES .		SWAB	139
tiotropium bromide monohydrate		144		TOOTHETTE SWABS UNTREATED	
		TODAYS HEALTH SHORT PEN			

SWAB	139	TOPI-CLICK PERL DOSE LOAD 35ML MISC	136	toremifene citrate PO	43
TOOTHETTE SWABS/DENTIFRICE SWAB	139	TOPI-CLICK PERL VAGINAL DOSING MISC	136	torsemide TABS PO 20 MG	77
TOPAMAX SPRINKLE CPSP PO (Use topiramate)	21	TOPI-CLICK UV BLOCKING MISC 136		torsemide TABS PO 20 MG	78
TOPAMAX TABS PO 100 MG (Use topiramate)	21	TOPI-CLICK VAGINAL APPLICATOR MISC	136	torsemide TABS PO 5 MG, 10 MG, 100 MG	77
TOPAMAX TABS PO 200 MG (Use topiramate)	21	TOPI-CLICK VAGINAL DOSE LOADER MISC	136	TOSYMRA	157
TOPAMAX TABS PO 25 MG, 50 MG (Use topiramate)	21	TOPI-CLICK VAGINAL DOSING MISC	136	TOTAL COMFORT CHAIR CUSHION MISC	136
TOPCARE CLICKFINE PEN NEEDLES	144	TOPI-CORT CREA 0.05 % (Use desoximetasone)	69	TOTAL COMFORT SEAT CUSHION MISC	136
TOPCARE LANCETS MICRO-THIN 33G	116	TOPI-CORT CREA 0.25 % (Use desoximetasone)	69	TOUJEO MAX SOLOSTAR SOPN 30	
TOPCARE ULTRA COMFORT INS SYR	144	TOPI-CORT GEL (Use desoximetasone)	69	TOUJEO SOLOSTAR SOPN	30
TOPI-CLICK 1 PORT MISC	136	TOPI-CORT OINT (Use desoximetasone)	69	TOVET	69
TOPI-CLICK 140 MISC	136	TOPI-CORT OINT 0.05 % (Use desoximetasone)	69	TOVIAZ (Use fesoterodine fumarate)	183
TOPI-CLICK 3 PORT MISC	136	TOPI-CORT SPRAY LIQD (Use desoximetasone)	69	TRACLEER TABS (Use bosentan) 57	
TOPI-CLICK APPLICATOR MICRO MISC	136	topiramate CP24 PO	21	TRACLEER TBSO	57
TOPI-CLICK APPLICATOR MISC 136		topiramate CPSP PO	21	TRACTION FLOOR STAND MISC 136	
TOPI-CLICK DOSE CHECK MISC 136		topiramate CS24 PO	21	TRACTION HEAD HALTER ROPE MISC	136
TOPI-CLICK MICRO ANGLED AA MISC	136	topiramate TABS PO 100 MG	21	TRACTION PELVIC BELT MISC .	136
TOPI-CLICK MICRO PIN POINT AA MISC	136	topiramate TABS PO 200 MG	21	TRACTION WEIGHT BAG MISC .	136
TOPI-CLICK MICRO ROUNDED AA MISC	136	topiramate TABS PO 25 MG, 50 MG . 21		TRADJENTA	28
TOPI-CLICK NOZZLE MISC	136	TOPPER DRESSING SPONGES MISC	92	tramadol hcl CP24 PO 100 MG, 200 MG, 300 MG	9
TOPI-CLICK PERL APPLICATOR 4ML MISC	136	TOPROL XL TB24 PO (Use metoprolol succinate)	55	TRAMADOL HCL SOLN (Use tramadol hcl)	9
				tramadol hcl SOLN	9
				tramadol hcl TABS PO 100 MG	9
				tramadol hcl TABS PO 25 MG	9

tramadol hcl TABS PO 50 MG	9	TRESIBA SOLN	30	trientine hcl PO	159
tramadol hcl TB24 PO	9	tretinoin (chemotherapy) PO	45	trifluoperazine hcl TABS PO	49
tramadol-acetaminophen PO	10	tretinoin CREA 0.025 %, 0.05 %, 0.1 %	64	trifluridine	171
trandolapril PO 1 MG, 2 MG	36	tretinoin GEL 0.01 %, 0.025 %, 0.05 %	64	TRIGGER RELEASE JUNIOR WALKER MISC	136
trandolapril PO 4 MG	36	tretinoin microsphere	64	TRI-GRIP BATHTUB RAIL MISC	136
trandolapril-verapamil hcl PO	39	TRETEN	85	trihexyphenidyl hcl SOLN	45
TRANSDERM-SCOP (Use scopolamine)	32	TREXALL TABS PO 5 MG, 7.5 MG, 10 MG, 15 MG	42	trihexyphenidyl hcl TABS PO	45
TRANSFER BENCH MISC	136	triamcinolone acetonide (mouth)	161	TRIJARDY XR	26
TRANSFER BOARD MISC	136	triamcinolone acetonide (topical) AERS	69	TRIKAFTA TBPK	179
TRANSFER PIN MISC	136	triamcinolone acetonide (topical) CREA	69	TRIKAFTA THPK	179
TRANSPORT CHAIR MISC	136	triamcinolone acetonide (topical) LOTN	70	TRILEPTAL SUSP PO (Use oxcarbazepine)	21
TRANXENE-T TABS PO (Use clorazepate dipotassium)	13	triamcinolone acetonide (topical) OINT 0.025 %, 0.1 %, 0.5 %	70	TRILEPTAL TABS PO 150 MG, 300 MG (Use oxcarbazepine)	21
tranylcypromine sulfate PO	23	triamcinolone acetonide (topical) OINT 0.05 %	70	TRILEPTAL TABS PO 600 MG (Use oxcarbazepine)	21
TRAVATAN Z SOLN (Use travoprost)	173	triamcinolone acetonide (topical) OINT 0.1 %	70	TRILIPIX PO (Use choline fenofibrate)	35
TRAVEL LANCETS	116	triamterene & hydrochlorothiazide CAPS PO 25 MG-37.5 MG	77	trimethobenzamide hcl CAPS PO	32
TRAVEL POUCH MISC	136	triamterene & hydrochlorothiazide TABS PO	77	trimethoprim TABS PO	39
TRAVELER 3 WHEEL ROLL WALKER MISC	136	triamterene CAPS PO	78	trimipramine maleate CAPS PO	25
travoprost SOLN	173	triazolam PO	88	TRIMO-SAN	186
trazodone hcl TABS PO 150 MG	24	TRIBENZOR PO (Use olmesartan medoxomil-amlodipine- hydrochlorothiazide)	39	TRINATAL RX 1 TABS PO	167
trazodone hcl TABS PO 300 MG	24	TRICARE TABS PO	167	TRINTELLIX PO	24
trazodone hcl TABS PO 50 MG, 100 MG, 150 MG	24	TRICOR TABS PO (Use fenofibrate)	35	TRIO ROLLING WALKER MISC	136
TRECATOR PO	41			TRISTART DHA PO	167
TRELEGY ELLIPTA	16			TRISTART FREE PO	167
TREMFYA SOAJ 100 MG/ML	66			TRISTART ONE PO	167
TREMFYA SOSY 100 MG/ML	66			TRIUMEQ PD TBSO	52
treprostinil SOLN IJ	57			TRIUMEQ TABS	52
TRESIBA FLEXTOUCH SOPN	30			TRIZIVIR PO	52

TROCHE MOLD 30 CAVITY MISC 136	TRUE COMFORT QUAD ADJ CANE MISC .....136	27	TRUEPLUS GLUCOSE ON THE GO CHEW PO .....27
TROGARZO .....52	TRUE COMFORT SAFETY LANCETS .....116		TRUEPLUS INSULIN SYRINGE 144
TROJAN ENZ MISC .....94	TRUE COMFORT TWIST TOP LANCETS .....116		TRUEPLUS LANCETS 26G .....117
TROJAN MAGNUM MISC .....94	TRUE COVER DEVI .....94		TRUEPLUS LANCETS 28G .....117
TROJAN ULTRA THIN/SPERMICIDAL MISC .....94	TRUE FOCUS BLOOD GLUCOSE METER DEVI .....116		TRUEPLUS LANCETS 30G .....117
TROJAN-ENZ LUBRICATED MISC 94	TRUE FOCUS BLOOD GLUCOSE STRIP STRP .....76		TRUEPLUS LANCETS 33G .....117
TROJAN-ENZ/SPERMICIDAL MISC . 94	TRUE HEALTH SENSE BP MONITOR DEVI .....93		TRUEPLUS PEN NEEDLES .....144
TROKENDI XR CP24 PO (Use topiramate) .....21	TRUE METRIX AIR GLUCOSE METER DEVI .....116		TRUEPLUS SAFETY LANCETS 28G.....117
tropicamide SOLN .....170	TRUE METRIX AIR GLUCOSE METER KIT .....116		TRUERESULT BLOOD GLUCOSE KIT .....117
tropium chloride CP24 PO .....183	TRUE METRIX BLOOD GLUCOSE TEST STRP .....76		TRUETEST TEST STRP .....76
tropium chloride TABS PO .....183	TRUE METRIX GO GLUCOSE METER KIT .....116		TRUETRACK BLOOD GLUCOSE DEVI .....117
TRUDHESA .....156	TRUE METRIX LEVEL 1 SOLN ..116		TRUETRACK BLOOD GLUCOSE KIT .....117
TRUE COMFORT FOLDING 2 WHEEL MISC .....136	TRUE METRIX LEVEL 3 SOLN ..117		TRUETRACK SMART SYSTEM KIT . 117
TRUE COMFORT FOLDING WALKER MISC .....136	TRUE METRIX METER DEVI ....117		TRUETRACK TEST STRP .....76
TRUE COMFORT HEIGHT ADJ CANES MISC .....136	TRUE METRIX METER KIT .....117		TRULANCE PO .....81
TRUE COMFORT INSULIN SYRINGE .....144	TRUE MULTIVITAMIN TABS PO 165		TRULICITY 0.75 MG/0.5ML .....28
TRUE COMFORT PEN NEEDLES 144	TRUECONTROL GLUCOSE CONT LEV 0 LIQD .....117		TRULICITY 1.5 MG/0.5ML, 3 MG/0.5ML, 4.5 MG/0.5ML .....28
TRUE COMFORT PRO ALCOHOL PREP .....136	TRUECONTROL GLUCOSE CONT LEV 1 LIQD .....117		TRUMENBA .....184
TRUE COMFORT PRO INSULIN SYR .....144	TRUEDRAW LANCING DEVICE MISC .....117		TRUQAP TABS .....45
TRUE COMFORT PRO PEN NEEDLES .....144	TRUEPLUS 5-BEVEL PEN NEEDLES .....144		TRUSOPT (Use dorzolamide hcl) 173
	TRUEPLUS GLUCOSE CHEW PO		TRUSTEX COLOR CONDOMS + LUBE MISC .....94
			TRUSTEX LUB/RIBBED/STUDDED MISC .....94

TRUSTEX LUB/SPERMICIDE EX ST MISC	94	(Use calcium carbonate (antacid)) .12	TYLENOL TABS PO (Use acetaminophen)	7	
TRUSTEX LUB/SPERMICIDE XL MISC	94	TUMS E-X 750 CHEW PO (Use calcium carbonate (antacid))	12	TYPHIM VI SOLN	184
TRUSTEX LUBRICATED EX LARGE MISC	94	TUMS EXTRA STRENGTH 750 CHEW PO (Use calcium carbonate (antacid))	12	TYPHIM VI SOSY	184
TRUSTEX LUBRICATED EXTRA ST MISC	94	TUMS LASTING EFFECTS CHEW PO (Use calcium carbonate (antacid))	12	TYSABRI	177
TRUSTEX LUBRICATED MISC ...	94	TUMS SMOOTHIES CHEW PO (Use calcium carbonate (antacid))	12	TYVASO DPI MAINTENANCE KIT POWD	57
TRUSTEX LUBRICATED/SPERMICIDE MISC 94		TUMS ULTRA 1000 CHEW PO (Use calcium carbonate (antacid))	12	TYVASO DPI TITRATION KIT POWD	57
TRUSTEX NATURAL CONDOMS + LUBE MISC	94	TURALIO PO 125 MG	45	TYVASO REFILL KIT SOLN IN ...	57
TRUSTEX NON-LUBRICATED MISC	94	T-VITES TABS PO	164	TYVASO SOLN IN	57
TRUSTEX RIA LUB/SPERMICIDE MISC	94	TWIN MEDICINE SPOON MISC .	137	TYVASO STARTER KIT SOLN IN	57
TRUSTEX RIA LUBRICATED MISC .	94	TWINRIX SUSY	185	TYVEK PROTECTIVE SLEEVES MISC	137
TRUSTEX RIA NON-LUBRICATED MISC	94	TWIRLA	60	UBRELVY PO	156
TRUSTEX-NONOXYNOL- 9/RIB/STUD MISC	94	TWIST TOP LANCETS 30G	117	UCERIS (Use budesonide (intrarectal))	11
TRUVADA PO (Use emtricitabine- tenofovir disoproxil fumarate)	52	TYBLUME CHEW	60	UCERIS TB24 PO (Use budesonide) 61	
TRUZONE PEAK FLOW METER 155		TYBOST	52	UDENYCA ONBODY SOSY	87
TUB TRANSFER BOARD MISC .	136	TYKERB (Use lapatinib ditosylate) 45		UDENYCA SOAJ	87
TUBING/WING TIP MISC	155	TYLENOL CHILDRENS PAIN + FEVER SUSP PO (Use acetaminophen)	7	UDENYCA SOSY	87
TUDORZA PRESSAIR	14	TYLENOL CHILDRENS SUSP PO (Use acetaminophen)	7	ULORIC (Use febuxostat)	85
TUKYSA	42	TYLENOL EXTRA STRENGTH TABS PO (Use acetaminophen)	7	ULTICARE ALCOHOL SWABS .	137
TUMS CHEW PO (Use calcium carbonate (antacid))	12	TYLENOL FOR CHILDREN + ADULTS SUSP PO (Use acetaminophen)	7	ULTICARE INSULIN SAFETY SYR .	144
TUMS CHEWY BITES CHEW PO		TYLENOL INFANTS PAIN+FEVER SUSP PO (Use acetaminophen)	7	ULTICARE INSULIN SYR 1/2 UNIT .	144

ULTICARE PEN NEEDLES .....145	ULTRA-CARE ALCOHOL PREP PADS .....137	UNGUATOR JAR 15/20 GREEN LID MISC .....137
ULTICARE SHORT PEN NEEDLES 145	ULTRACARE INSULIN SYRINGE 145	UNGUATOR JAR 15/20 RED LID MISC .....137
ULTIGUARD SAFEPACK PEN NEEDLE .....145	ULTRA-CARE LANCETS 30G ...117	UNGUATOR JAR 15/28 BLUE LID MISC .....137
ULTIGUARD SAFEPACK SYR/NEEDLE .....145	ULTRACARE PEN NEEDLES ...145	UNGUATOR JAR 20/33 BLUE MISC 137
ULTI-LANCE AUTOMATIC MISC 117	ULTRA-THIN II INS SYR SHORT 145	UNGUATOR JAR 20/33 RED LID MISC .....137
ULTILET ALCOHOL SWABS ...137	ULTRA-THIN II INSULIN SYRINGE . 145	UNGUATOR JAR 20/33 WHITE MISC .....137
ULTILET CLASSIC LANCETS ...117	ULTRA-THIN II LANCETS .....117	UNGUATOR JAR 200/280 BLUE LID MISC .....137
ULTILET LANCETS .....117	ULTRA-THIN II MINI PEN NEEDLE . 145	UNGUATOR JAR 200/280 GREEN LID MISC .....137
ULTILET PEN NEEDLE 145	ULTRA-THIN II PEN NEEDLE SHORT .....145	UNGUATOR JAR 200/280 RED LID MISC .....137
ULTILET SAFETY LANCETS ... 117	ULTRA-THIN II PEN NEEDLES .145	UNGUATOR JAR 200/280 WHITE MISC .....137
ULTOMIRIS 86	ULTRAVATE LOTN .....70	UNGUATOR JAR 30/42 BLUE LID MISC .....137
ULTRA BONEUP TABS PO .....164	UNGUATOR 100/200/57MM MISC 137	UNGUATOR JAR 30/42 BLUE MISC 137
ULTRA CARE EAR WAX REMOVER MISC .....137	UNGUATOR 15/20/30/36MM MISC 137	UNGUATOR JAR 30/42 GREEN LID MISC .....137
ULTRA COMFORT BODY MASSAGER MISC 137	UNGUATOR 50/43MM/DISP BLADES MISC .....137	UNGUATOR JAR 30/42 RED LID MISC .....137
ULTRA COMFORT INSULIN SYRINGE 145	UNGUATOR APPLICATOR 1"- SHORT MISC .....137	UNGUATOR JAR 30/42 RED LID MISC .....137
ULTRA FIT SMART BODY SCALE MISC .....137	UNGUATOR APPLICATOR 2.5"- LONG MISC 137	UNGUATOR JAR 30/42 TURQUOISE MISC .....137
ULTRA FLO INSULIN PEN NEEDLES .....145	UNGUATOR EXACTDOSE 0.5ML MISC .....137	UNGUATOR JAR 30/42 WHITE LID MISC .....137
ULTRA FLO INSULIN SYR 1/2 UNIT.....145	UNGUATOR JAR 100/140 BLUE LID MISC .....137	UNGUATOR JAR 30/42 YELLOW MISC .....137
ULTRA FLO INSULIN SYRINGE 145	UNGUATOR JAR 100/140 RED LID MISC .....137	UNGUATOR JAR 50/70 BLUE LID MISC .....137
ULTRA NEB ACCESSORIES KIT MISC .....155	UNGUATOR JAR 15/20 BLUE LID MISC .....137	
ULTRA THIN LANCETS 31G ...117		
ULTRA THIN PEN NEEDLES ... 145		

UNGUATOR JAR 50/70 BLUE MISC 137	117	21G	118
UNGUATOR JAR 50/70 GREEN LID MISC	137	UNILET EXCELITE	117
UNGUATOR JAR 50/70 PINK MISC . 137		UNILET EXCELITE II	117
UNGUATOR JAR 50/70 RED LID MISC	137	UNILET G.P. LANCET	117
UNGUATOR JAR 50/70 TURQUOISE MISC	137	UNILET G.P. SUPERLITE LANCET . 117	
UNGUATOR JAR 50/70 WHITE LID MISC	138	UNILET GP 28 ULTRA THIN	117
UNGUATOR JAR 50/70 YELLOW MISC	138	UNILET LANCET	117
UNGUATOR JAR AIRDYNAMIK MISC	138	UNILET SUPERLITE LANCET ..	118
UNGUATOR JAR W/SPINDLE 300/390 MISC	138	UNILET SUPER-THIN 30G	118
UNGUATOR JAR W/SPINDLE 500/600 MISC	138	UNISOM SLEEPGELS CAPS PO (Use diphenhydramine hcl (sleep))	87
UNGUATOR LID 1000ML MISC .	138	UNISTIK 1	118
UNGUATOR LID 500ML MISC ...	138	UNISTIK 2	118
UNGUATOR VARIONOZZLE 1MM MISC	138	UNISTIK 2 COMFORT	118
UNGUATOR VARIONOZZLE 4MM MISC	138	UNISTIK 2 EXTRA	118
UNIFINE PEN NEEDLES	145	UNISTIK 2 NEONATAL	118
UNIFINE PENTIPS	145	UNISTIK 2 NORMAL	118
UNIFINE PENTIPS PLUS	145	UNISTIK 2 SUPER	118
UNIFINE PROTECT PEN NEEDLE . 145		UNISTIK 3	118
UNIFINE SAFECONTROL PEN NEEDLE	145	UNISTIK 3 COMFORT	118
UNIFINE ULTRA PEN NEEDLE .	145	UNISTIK 3 EXTRA	118
UNILET COMFORTOUCH LANCET		UNISTIK 3 GENTLE	118
		UNISTIK 3 NEONATAL	118
		UNISTIK 3 NORMAL	118
		UNISTIK CZT COMFORT	118
		UNISTIK CZT NORMAL	118
		UNISTIK NORMAL	118
		UNISTIK PRO SAFETY LANCET 118	
		UNISTIK TOUCH SAFETY LANC	
		UNISTIK TOUCH SAFETY LANC 23G	118
		UNISTIK TOUCH SAFETY LANC 28G	118
		UNISTIK TOUCH SAFETY LANC 30G	118
		UNISTRIP CONTROL SOLN	118
		UNISTRIP1 GENERIC STRP	77
		UNIVERSAL 1 LANCETS ULTRA THIN	118
		UNIVERSAL QUICK ADJUST CRUTCH MISC	138
		UNIVERSAL REMOVER WIPES MISC	71
		UNIVERSAL TIPS MISC	138
		UNIVERSAL WALKER ORGANIZER MISC	138
		UNODOSE APPLICATOR MISC .	138
		UP & UP GLUCOSE PO	27
		UPTRAVI SOLR	57
		UPTRAVI TABS	57
		UPTRAVI TITRATION TBPK	57
		urea CREA 39 %, 40 %, 41 %	70
		UREA CREA	70
		urea LOTN 40 %	70
		UREA-SALICYLIC ACID CREA ...	70
		URIBEL PO	40
		UROCIT-K 10 TBCR PO (Use potassium citrate (alkalinizer))	84
		UROCIT-K 15 TBCR PO (Use potassium citrate (alkalinizer))	84
		UROCIT-K 5 TBCR PO (Use	

potassium citrate (alkalinizer)	84	VALTOCO 15 MG DOSE LQPK	19	VANISHPOINT INSULIN SYRINGE	145
UROGESIC-BLUE TABS PO (Use methenamine-hyoscamine-methylene blue-sodium phosphate)	40	VALTOCO 20 MG DOSE LQPK	19	VANISHPOINT SAFETY SYRINGE	145
URSO 250 TABS PO (Use ursodiol)	82	VALTOCO 5 MG DOSE LIQD	19	VANISHPOINT SYRINGE	145
URSO FORTE TABS PO (Use ursodiol)	82	VALTRESX PO 1 GM (Use valacyclovir hcl)	53	VANISHPOINT TUBE HOLDER MISC	138
ursodiol CAPS PO	82	VALTRESX PO 500 MG (Use valacyclovir hcl)	53	VANOS CREA (Use fluocinonide)	70
ursodiol TABS PO	82	VALUE HEALTH INSULIN SYRINGE	145	VAQTA	185
UZEDY SUSY	48	VALUE PLUS GLUCOSE PO	27	varenicline tartrate TABS PO	178
VAGIFEM TABS (Use estradiol vaginal)	186	VALUE PLUS LANCET STANDARD 21G	118	varenicline tartrate TBPK	178
VAGINAL SUPPOSITORY APPLICATOR MISC	138	VALUE PLUS LANCETS SUPER THIN	118	VARITHENA ADMINISTRATION PACK MISC	138
valacyclovir hcl PO 1 GM	53	VALUE PLUS LANCING DEVICE MISC	118	VARIVAX SUSR	185
valacyclovir hcl PO 500 MG	53	VALUMARK LANCET SUPER THIN 30G	118	VASCEPA 0.5 GM (Use icosapent ethyl)	34
VALCHLOR	66	VALUMARK LANCET ULTRA THIN 28G	118	VASCEPA 1 GM (Use icosapent ethyl)	34
VALCYTE SOLR (Use valganciclovir hcl)	53	VALUMARK PEN NEEDLES	145	VASERETIC PO 25 MG-10 MG (Use enalapril maleate & hydrochlorothiazide)	39
VALCYTE TABS PO (Use valganciclovir hcl)	53	VANCOCIN CAPS PO 125 MG (Use vancomycin hcl)	40	VASOTEC TABS PO (Use enalapril maleate)	36
valganciclovir hcl SOLR	53	VANCOCIN CAPS PO 250 MG (Use vancomycin hcl)	40	VAXCHORA	184
valganciclovir hcl TABS PO	53	vancomycin hcl CAPS PO 125 MG 40		VAXELIS SUSP	180
valproate sodium SOLN PO 250 MG/5ML	22	vancomycin hcl CAPS PO 250 MG 40		VAXELIS SUSY	180
valproic acid CAPS PO	22	vancomycin hcl SOLR PO 25 MG/ML, 50 MG/ML, 250 MG/5ML	40	VAXNEUVANCE	184
valsartan SOLN	37	VANDAZOLE	186	VELETRI (Use epoprostenol sodium)	57
valsartan TABS PO 320 MG	37	VANFLYTA	45	VELPHORO	83
valsartan TABS PO 40 MG, 80 MG, 160 MG	37	VANISHPOINT BLOOD COLLECT SET MISC	138	VELTASSA PO 8.4 GM, 16.8 GM, 25.2 GM	160
valsartan-hydrochlorothiazide PO	39			VEMLIDY	53
VALTOCO 10 MG DOSE LIQD	19			VENCLEXTA STARTING PACK	

TBPK	42	.....	118	VIBRAMYCIN PO	179
VENCLEXTA TABS	42	VERIFINE SAFE LANCET MINI 30G	118	VIBRAMYCIN SUSR PO (Use doxycycline (monohydrate))	179
VENLAFAXINE BESYLATE ER ...	25	VERIFINE UNIVERSAL LANCETS 30G	118	VIBRATING FOOT BATH MISC .	138
venlafaxine hcl CP24 PO	25	VERKAZIA EMUL	171	VICTOZA (Use liraglutide)	28
venlafaxine hcl TABS PO	25	VERQUVO	58	VIDA CELLULAR SCALE MISC ..	138
venlafaxine hcl TB24 PO	25	VERSACLOZ SUSP PO	49	VIDA MIA AUTOLET LANCING DEV MISC	119
VENTAVIS IN	57	VERSAJET II EXACT 14MM MISC 138		VIDA MIA UNIFINE PENTIPS ...	145
VENTOLIN HFA AERS (Use albuterol sulfate)	17	VERSAJET II EXACT 8MM MISC 138		vigabatrin PACK	22
VEOPOZ	86	VERSAJET II PLUS 14MM MISC 138		vigabatrin TABS	22
verapamil hcl CP24 PO	56	VERSAJET II PLUS 8MM MISC .	138	VIGAMOX SOLN OP (Use moxifloxacin hcl (ophth))	171
VERAPAMIL HCL ER CP24 PO (Use verapamil hcl)	56	VERSAPAP DEVI	155	VIIBRYD TABS (Use vilazodone hcl) 24	
verapamil hcl TABS PO	56	VERSAPAP W/UNIVERSAL TUBING DEVI	155	vilazodone hcl TABS	24
verapamil hcl TBCR PO	56	VERZENIO	45	VIMOVO PO (Use naproxen-esomeprazole magnesium)	6
VERASENS BLOOD GLUCOSE METER DEVI	118	VESICARE LS SUSP	183	VIMPAT SOLN PO 10 MG/ML (Use lacosamide)	21
VERASENS BLOOD GLUCOSE SYSTEM KIT	118	VESICARE TABS PO (Use solifenacin succinate)	183	VIMPAT TABS PO (Use lacosamide) 21	
VERASENS BLOOD GLUCOSE TEST STRP	77	VEVYE SOLN	171	VINATE DHA RF	167
VERASENS GLUCOSE CONTROL LIQD	118	VFEND SUSR PO (Use voriconazole)	33	VINYL INFLATABLE CUSHION MISC	138
VEREGEN	64	VFEND TABS PO (Use voriconazole)	33	VIOKACE TABS	77
VERELAN CP24 PO (Use verapamil hcl)	56	V-GO 20 KIT	118	VIRACEPT TABS PO 250 MG	52
VERELAN PM CP24 PO (Use verapamil hcl)	56	V-GO 30 KIT	119	VIRACEPT TABS PO 625 MG	52
VERIFINE INSULIN PEN NEEDLE 145		V-GO 40 KIT	119	VIRAGE CUSTOM BREAST PROSTHES MISC	138
VERIFINE INSULIN SYRINGE ..	145	VIBE 6 MISC	138	VIRAZOLE (Use ribavirin)	54
VERIFINE PLUS PEN NEEDLE .	145	VIBERZI	83	VIREAD POWD	52
VERIFINE SAFE LANCET MINI 23G		VIBRAMYCIN CAPS PO (Use doxycycline hyclate)	179	VIREAD TABS PO (Use tenofovir	

disoproxil fumarate) .....52	VIVAGUARD INO CONTROL SOLUTION LIQD 119	CHMBR/MASK/TODDLER DEVI .156
VIREAD TABS PO .....52	VIVAGUARD INO GLUCOSE METER DEVI .....119	VORTEX VALVED HOLDING CHAMBER DEVI 156
VIRT-NATE DHA CAPS PO .....167	VIVAGUARD INO SMART GLUC METER DEVI .....119	VOSEVI 53
VIRT-PN DHA PO 167	VIVAGUARD INO TEST STRIPS STRP .....77	VOTRIENT (Use pazopanib hcl) ..45
VISTARIL CAPS PO 25 MG (Use hydroxyzine pamoate) 13	VIVAGUARD LANCETS .....119	VOTRIENT 45
VISTARIL CAPS PO 50 MG (Use hydroxyzine pamoate) 13	VIVAGUARD LANCING DEVICE MISC .....119	VP INSULIN SYRINGE .....145
VITABASIC SENIOR TABS PO ..164	VIVELLE-DOT PTTW (Use estradiol) 81	VRAYLAR CAPS 47
VITAFOL FE+ .....167	VIVI CAP MISC .....119	VRAYLAR CPPK 47
VITAFOL GUMMIES .....167	VIVI CAP1 MISC .....119	VTAMA 66
VITAFOL STRIPS .....167	VIVI EPI MISC .....138	VUITY SOLN 171
VITAFOL ULTRA 167	VIVITROL .....31	VUMERITY PO .....177
VITAFOL-NANO 167	VIVJOA .....33	VUSION (Use miconazole-zinc oxide-white petrolatum) .....65
VITAFOL-OB TABS PO 167	VIVOTIF PO .....184	VYEPTI .....156
VITAFOL-OB+DHA MISC PO ....167	VIZIMPRO .....42	VYJUVEK 72
VITAFOL-ONE CAPS PO 167	VOGELXO GEL TD (Use testosterone) .....11	VYNDAMAX .....58
VITAMEDMD ONE RX/QUATREFOLIC PO 167	VOGELXO PUMP GEL TD (Use testosterone) .....11	VYNDAQEL 58
vitamin a CAPS PO 10000 UNIT, 3 MG, 3000 MCG, 10000 UNIT 187	VOLTAREN ARTHRITIS PAIN GEL EX (Use diclofenac sodium (topical)) . 65	VYTORIN PO (Use ezetimibe-simvastatin) 34
VITAPEARL .....167	VONJO .....45	VYVANSE CAPS PO .....1
VITAROCA PLUS TABS PO (Use multiple vitamins w/ minerals) 164	VONVENDI .....85	VYVANSE CHEW .....1
VITASANA TABS PO .....164	voriconazole SUSR PO .....33	VYVGART .....159
VITATRUM TABS PO 164	voriconazole TABS PO 33	VYVGART HYTRULO 159
VITEYES CLASSIC MULTIVITAMIN TABS PO 164	VORTEX HOLD CHMBR/MASK/CHILD DEVI .....155	VYZULTA 173
VITRAKVI CAPS PO .....45	VORTEX HOLD	WAINUA .....178
VITRAKVI SOLN .....45		WAKIX .....2
VITRUM 50+ ADULT-MULTI TABS PO 164		WALGREENS GLUCOSE PO .....27
		WALGREENS LANCETS .....119
		WALGREENS LANCETS SUPER THIN .....119

WALGREENS THIN LANCETS . 119	WELCHOL TABS PO (Use colesevelam hcl) 35	WOMENS 50+ MULTI VITAMIN/MIN TABS PO 164
WALGREENS ULTRA THIN LANCETS 119	WELLBUTRIN SR TB12 PO (Use bupropion hcl) 23	WOODEN CANE 7/8" MISC 139
WALKER AUTO GLIDES MISC .. 138	WELLBUTRIN XL TB24 PO (Use bupropion hcl) 23	WORK BELT MISC 139
WALKER BASKET MISC 138	WESCAP-C DHA PO 167	WRIST BRACE MISC 139
WALKER GLIDE WHEELS MISC 138	WESCAP-PN DHA PO 168	WRIST SLEEP SUPPORT MISC 139
WALKER MISC 138	WESNATAL DHA COMPLETE PO 168	XACIATO GEL 186
WALKER SKI GLIDES MISC 138	WESNATE DHA CAPS PO 168	XADAGO 47
WALKER SWIVEL WHEELS MISC 138	WESTAB PLUS TABS PO 168	XALATAN SOLN (Use latanoprost) 173
WALKER TALL EXTENSION LEGS MISC 138	WESTGEL DHA PO 168	XALKORI CAPS 45
WALKER TIPS 1-1/8" MISC 138	WET-STOP 3 MISC 139	XALKORI CPSP 45
WALKER TIPS MISC 138	wheat dextrin POWD PO 88	XANAX TABS PO 0.25 MG, 0.5 MG, 1 MG (Use alprazolam) 13
WALKER WHEELS MISC 138	WHEELCHAIR CUSHION MISC . 139	XANAX TABS PO 2 MG (Use alprazolam) 13
WALL GRAB BAR MISC 138	WHEELCHAIR INVALID RING MISC 139	XANAX XR TB24 PO (Use alprazolam) 13
warfarin sodium TABS PO 17	WHEELCHAIR MISC 139	XARELTO STARTER PACK TBPK 17
WASH GLOVES PRE-MOISTENED MISC 138	white petrolatum-mineral oil 170	XARELTO SUSR 17
water for injection, sterile IJ 175	WILATE KIT 85	XARELTO TABS 17
WATERPROOF SHEETING MISC 138	WINDMILL TRAINER MISC 156	XATMEP SOLN 42
WAVESENSE AMP KIT 119	WINLEVI 64	XCOPRI (250 MG DAILY DOSE) TBPK 21
WEBCOL ALCOHOL PREP LARGE 138	WINRHO SDF SOLN 1500 UNIT/1.3ML 174	XCOPRI (350 MG DAILY DOSE) TBPK 21
WEBCOL ALCOHOL PREP MEDIUM 138	WINRHO SDF SOLN 15000 UNIT/13ML 174	XCOPRI TABS 50 MG, 100 MG, 150 MG, 200 MG 21
WEGMANS UNIFINE PENTIPS PLUS 145	WINRHO SDF SOLN 2500 UNIT/2.2ML 174	XCOPRI TBPK 21
WEIGH BOAT MISC 138	WINRHO SDF SOLN 5000 UNIT/4.4ML 174	XDEMVY 171
WELCHOL PACK (Use colesevelam hcl) 35	witch hazel (hamamelis virginiana) PADS 71	XELJANZ SOLN 3
		XELJANZ TABS 3

XELJANZ XR TB24 PO	3	XPOVIO (60 MG TWICE WEEKLY) PO	43	YUPELRI	14
XELODA PO (Use capecitabine) ..	42	XPOVIO (80 MG ONCE WEEKLY) PO 40 MG	43	YUSIMRY	4
XELPROS EMUL	173	XPOVIO (80 MG TWICE WEEKLY) PO	43	zafirlukast PO	14
XELSTRYM	1	XTAMPZA ER	9	zaleplon PO	88
XENAZINE PO (Use tetrabenazine) 176		XTANDI CAPS	43	ZANAFLEX CAPS PO (Use tizanidine hcl)	168
XEPI	64	XTANDI TABS	43	ZANAFLEX TABS PO 4 MG (Use tizanidine hcl)	168
XERAC AC	71	XULTOPHY	26	ZARONTIN CAPS PO (Use ethosuximide)	22
XERESE	67	XYLIDERM	71	ZARONTIN SOLN PO (Use ethosuximide)	22
XHANCE EXHU	169	XYNTHA	85	ZARXIO	87
XIFAXAN PO	39	XYNTHA SOLOFUSE	85	ZATEAN-PN DHA PO	168
XIGDUO XR PO (Use dapagliflozin propanediol-metformin hcl)	26	XYOSTED SOAJ	11	ZAVZPRET	156
XIGDUO XR PO	26	XYREM SOLN PO	175	ZEGALOGUE SOAJ	27
XIIDRA	171	XYWAV	175	ZEGALOGUE SOSY	27
XOFLUZA (40 MG DOSE) PO 40 MG	54	YASMIN 28 PO (Use drospirenone- ethinyl estradiol)	60	ZEGERID CAPS PO (Use omeprazole-sodium bicarbonate) 183	
XOFLUZA (80 MG DOSE) PO 80 MG	54	YAZ PO (Use drospirenone-ethinyl estradiol)	60	ZEGERID OTC CAPS PO (Use omeprazole-sodium bicarbonate) 183	
XOLAIR SOLR	14	YCANTH SOLN	70	ZEGERID PACK PO (Use omeprazole-sodium bicarbonate) 183	
XOLAIR SOSY 75 MG/0.5ML, 150 MG/ML	14	YELETS TEENAGE FORMULA TABS PO	164	ZEGERID PACK PO 1680 MG-40 MG (Use omeprazole-sodium bicarbonate)	183
XOPENEX HFA (Use levalbuterol tartrate)	17	YF-VAX INJ	185	ZEJULA CAPS PO	45
XOSPATA	45	YONSA	43	ZEJULA TABS	45
XPOVIO (100 MG ONCE WEEKLY) PO 50 MG	43	YOUTH PUSH BUTTON ALUM CRUTCH MISC	139	ZELAPAR TBDP	47
XPOVIO (40 MG ONCE WEEKLY) PO 40 MG	43	YUFLYMA (1 PEN) AJKT	4	ZELBORAF PO	45
XPOVIO (40 MG TWICE WEEKLY) PO 40 MG	43	YUFLYMA (2 PEN) AJKT	4	ZEMBRACE SYMTOUCH SOAJ .157	
XPOVIO (60 MG ONCE WEEKLY) PO 60 MG	43	YUFLYMA (2 SYRINGE) PSKT 40 MG/0.4ML	4	ZEMPLAR CAPS PO 1 MCG, 2 MCG (Use paricalcitol)	80
		YUFLYMA-CD/UC/HS STARTER AJKT	4		

ZENPEP CPEP PO 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT-10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 252600 UNIT-189600 UNIT-60000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT	.....77	zidovudine SYRP PO	..... 52	zolmitriptan TBDP PO	..... 157
ZEPATIER	.....53	zidovudine TABS PO	..... 52	ZOLOFT CONC PO (Use sertraline hcl)	..... 24
ZEPOSIA 7-DAY STARTER PACK CPPK	..... 177	ZIEXTENZO	..... 87	ZOLOFT TABS PO (Use sertraline hcl)	..... 24
ZEPOSIA CAPS	..... 177	ZILBRYSQ	.....86	ZOLOFT TABS PO 25 MG, 100 MG (Use sertraline hcl)	.....24
ZEPOSIA STARTER KIT CPPK	..177	zileuton TB12 PO	..... 14	ZOLPIDEM TARTRATE CAPS	....88
ZERVIATE	..... 173	ZIMHI SOSY	..... 31	zolpidem tartrate SUBL	..... 88
ZESTORETIC PO (Use lisinopril & hydrochlorothiazide)	..... 39	ZINC SULFATE SOLN 1 MG/ML (Use zinc sulfate)	..... 159	zolpidem tartrate TABS PO	.....88
ZESTRIL TABS PO (Use lisinopril)	36	zinc sulfate SOLN 1 MG/ML	.....159	zolpidem tartrate TBCR PO	..... 88
ZETIA PO (Use ezetimibe)	..... 36	ZIOPTAN (Use tafluprost)	..... 173	ZOMACTON SOLR SC	.....79
ZETONNA AERS	..... 169	ZIPPERED MATTRESS COVER MISC	.....139	ZOMIG SOLN (Use zolmitriptan)	.157
ZEVRX INSULIN SYRINGE	..... 145	ziprasidone hcl PO	.....47	ZOMIG TABS PO 2.5 MG, 5 MG (Use zolmitriptan)	.....157
ZEVRX PEN NEEDLES	..... 145	ziprasidone mesylate	.....47	ZONALON (Use doxepin hcl (antipruritic))	..... 66
ZEVRX STERILE ALCOHOL PREP PAD	..... 139	ZIRGAN GEL	..... 171	ZONISADE SUSP	..... 21
ZEWA ELECTRODES MISC	..... 139	ZITHROMAX PACK PO	..... 90	zonisamide CAPS PO 100 MG	....21
ZIAC PO (Use bisoprolol & hydrochlorothiazide)	..... 39	ZITHROMAX SUSR PO (Use azithromycin)	.....90	zonisamide CAPS PO 25 MG, 50 MG	.....21
ZIAGEN SOLN PO (Use abacavir sulfate)	..... 52	ZITHROMAX TABS PO 250 MG (Use azithromycin)	.....90	ZOOM 20 ROLLING WALKER MISC	139
ZIAGEN TABS PO (Use abacavir sulfate)	..... 52	ZITHROMAX TABS PO 500 MG (Use azithromycin)	.....90	ZORTRESS (Use everolimus (immunosuppressant))	.....160
ZIANA (Use clindamycin phosphate-tretinoin)	.....64	ZITHROMAX TRI-PAK TABS PO (Use azithromycin)	.....90	ZORYVE	..... 67
zidovudine CAPS PO	.....52	ZITHROMAX Z-PAK TABS PO (Use azithromycin)	.....90	ZORYVE 0.3 %	..... 66
		ZITUVIO	.....28	ZOVIRAX CREA (Use acyclovir topical)	..... 67
		ZMA CLEAR SUSP	..... 64	ZOVIRAX OINT (Use acyclovir topical)	..... 67
		ZOCOR TABS PO 10 MG, 20 MG, 40 MG (Use simvastatin)	..... 36	ZOVIRAX SUSP PO (Use acyclovir)	. 53
		ZOLINZA	..... 45	ZTALMY	.....21
		zolmitriptan SOLN	..... 157		
		zolmitriptan TABS PO	..... 157		

ZTLIDO PTCH	71	ZYRTEC CHILDRENS ALLERGY SOLN PO (Use cetirizine hcl)	34
ZUBSOLV SUBL	10	ZYTIGA (Use abiraterone acetate) 43	
ZURZUVAE	23	ZYVOX SUSR (Use linezolid)	40
ZYCLARA (Use imiquimod)	70	ZYVOX TABS PO (Use linezolid) ..	40
ZYCLARA PUMP (Use imiquimod) 70		ZZZQUIL CAPS PO (Use diphenhydramine hcl (sleep))	87
ZYCLARA PUMP	70		
ZYDELIG	45		
ZYFLO TABS PO	14		
ZYKADIA TABS	45		
ZYLET	172		
ZYLOPRIM PO (Use allopurinol) ..	85		
ZYMAXID (Use gatifloxacin (ophth)) . 171			
ZYPITAMAG PO 2 MG, 4 MG	36		
ZYPREXA RELPREVV	49		
ZYPREXA SOLR (Use olanzapine) 49			
ZYPREXA TABS PO 2.5 MG, 5 MG (Use olanzapine)	49		
ZYPREXA TABS PO 20 MG (Use olanzapine)	49		
ZYPREXA TABS PO 7.5 MG, 10 MG, 15 MG, 20 MG (Use olanzapine) ..	49		
ZYPREXA ZYDIS TBDP PO 10 MG (Use olanzapine)	49		
ZYPREXA ZYDIS TBDP PO 5 MG, 15 MG, 20 MG (Use olanzapine) ..	49		
ZYRTEC ALLERGY TABS PO (Use cetirizine hcl)	34		
ZYRTEC CHEW PO 10 MG (Use cetirizine hcl)	34		
ZYRTEC CHILDRENS ALLERGY CHEW PO (Use cetirizine hcl)	34		