



BlueCross BlueShield of Illinois  
BlueCross BlueShield of Montana  
BlueCross BlueShield of New Mexico  
BlueCross BlueShield of Oklahoma  
BlueCross BlueShield of Texas

Divisions of Health Care Service Corporation, a Mutual Legal Reserve Company, an independent licensee of the Blue Cross and Blue Shield Association.

# Multi-Tier Basic Drug List

October 2020

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

The drug list is regularly updated. You can view the most up-to-date list, or the specialty drug list, at [MyPrime.com](http://MyPrime.com).

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## Introduction

Blue Cross and Blue Shield is pleased to present the 2020 Drug List. This is a list of preferred drugs which includes brand drugs and a partial listing of generic drugs. **Members are encouraged to show this list to their physicians and pharmacists. Physicians are encouraged to prescribe drugs on this list, when right for the member. However, decisions regarding therapy and treatment are always between members and their physician.**

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

## How drugs are selected

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

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

## How member payment is determined

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

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

## How to use this list

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

Example: **atorvastatin** (Lipitor)

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

Example: NOVOLOG – Insulin aspart inj 100 unit/ml

### Drugs used to treat multiple conditions

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

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

## Generic drugs

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

There are two types of generic drugs:

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

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

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

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

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

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

### **Consider talking to your doctor about generic drugs**

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

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

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

## Coverage considerations

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

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

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

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

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

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

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

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

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

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

## Specialty drugs

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

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

## AllianceRx Walgreens Prime

Through AllianceRx Walgreens Prime, members can have covered specialty medications delivered directly to them or their doctor's office. When you receive specialty medications through AllianceRx Walgreens Prime, you also receive at no additional charge the following services:

- Coordination of coverage between you, your doctor and your health plan
- Educational materials about your particular condition and information about managing potential medication side effects
- Syringes, sharps containers and other supplies with every shipment for self-injectables
- 24/7/365 phone access to a pharmacist for urgent medication issues

To order through AllianceRx Walgreens Prime:

- Have your doctor call 877-627-6337 or e-prescribe your prescription to AllianceRx Walgreens Prime. Your doctor can find e-prescribing information at [www.alliancerxwp.com](http://www.alliancerxwp.com).
- If you have an existing prescription for a covered specialty medication, you can call 877-627-6337 to transfer your prescription.
- A coordinator will contact you to arrange delivery of your medication.
- The prescription can be shipped directly to you or your prescribing doctor's office. Each package is individually marked for each member. Refrigerated drugs are shipped in temperature-controlled packaging.

If you have questions, please contact AllianceRx Walgreens Prime at 877-627-6337, visit [www.alliancerxwp.com](http://www.alliancerxwp.com), or call the number on your ID card.

\* Blue Cross and Blue Shield of Illinois (BCBSIL), Blue Cross and Blue Shield of Montana (BCBSMT), Blue Cross and Blue Shield of New Mexico (BCBSNM), Blue Cross and Blue Shield of Oklahoma (BCBSOK), and Blue Cross and Blue Shield of Texas (BCBCTX) are Divisions of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association. BCBSIL, BCBSMT, BCBSNM, BCBSOK, and BCBCTX contract with Prime Therapeutics to provide pharmacy benefit management and related other services. BCBSIL, BCBSMT, BCBSNM, BCBSOK, and BCBCTX, as well as several independent Blue Cross and Blue Shield Plans, have an ownership interest in Prime Therapeutics LLC.

## Abbreviation key

<b>aer</b>	..... aerosol	<b>nebu</b>	..... nebulizer
<b>cap</b>	..... capsules	<b>odt</b>	..... orally disintegrating tabs
<b>chew</b>	..... chewable	<b>oint</b>	..... ointment
<b>conc</b>	..... concentrate	<b>ophth</b>	..... ophthalmic
<b>cr</b>	..... controlled release	<b>osm</b>	..... osmotic release
<b>dr</b>	..... delayed release	<b>pack</b>	..... packets
<b>ec</b>	..... enteric coated	<b>powd</b>	..... powder
<b>equiv</b>	..... equivalent	<b>pttw</b>	..... twice-weekly patch
<b>er</b>	..... extended release	<b>sl</b>	..... sublingual
<b>gm</b>	..... gram	<b>soln</b>	..... solution
<b>inhal</b>	..... inhaler	<b>suppos</b>	..... suppositories
<b>inj</b>	..... injection	<b>susp</b>	..... suspension
<b>liqd</b>	..... liquid	<b>tab</b>	..... tablets
<b>mg</b>	..... milligram	<b>td</b>	..... transdermal
<b>ml</b>	..... milliliter	<b>w/</b>	..... with

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
<b>ANTI-INFECTIVE AGENTS</b>									
<b>PENICILLINS</b>									
amoxicillin (trihydrate) cap 250 mg					doxycycline hyclate tab 100 mg				
amoxicillin (trihydrate) cap 500 mg					doxycycline monohydrate cap 50 mg				
amoxicillin (trihydrate) for susp 125 mg/5ml					doxycycline monohydrate cap 100 mg (Monodox)				
amoxicillin (trihydrate) for susp 200 mg/5ml					minocycline hcl cap 50 mg (Minocin)				
amoxicillin (trihydrate) for susp 250 mg/5ml					<b>FLUOROQUINOLONES</b>				
amoxicillin (trihydrate) for susp 400 mg/5ml					ciprofloxacin hcl tab 250 mg (base equiv) (Cipro)				
amoxicillin (trihydrate) tab 500 mg					ciprofloxacin hcl tab 500 mg (base equiv) (Cipro)				
amoxicillin (trihydrate) tab 875 mg					ciprofloxacin hcl tab 750 mg (base equiv)				
amoxicillin & k clavulanate for susp 200-28.5 mg/5ml					levofloxacin tab 250 mg (Levaquin)				
amoxicillin & k clavulanate tab 500-125 mg (Augmentin)					levofloxacin tab 500 mg (Levaquin)				
amoxicillin & k clavulanate tab 875-125 mg (Augmentin)					levofloxacin tab 750 mg (Levaquin)				
penicillin v potassium tab 250 mg					<b>AMINOGLYCOSIDES</b>				
penicillin v potassium tab 500 mg					neomycin sulfate tab 500 mg				
<b>CEPHALOSPORINS</b>									
cefadroxil cap 500 mg					PAROMOMYCIN SULFATE - paromomycin sulfate cap 250 mg				
cefdinir cap 300 mg					<b>SULFONAMIDES</b>				
cephalexin cap 250 mg (Keflex)					SULFADIAZINE - sulfadiazine tab 500 mg				
cephalexin cap 500 mg (Keflex)					<b>ANTIMYCOBACTERIAL AGENTS</b>				
<b>MACROLIDES</b>									
AZITHROMYCIN - azithromycin powd pack for susp 1 gm					isoniazid tab 300 mg				
azithromycin tab 250 mg (Zithromax)			•		PRIFTIN - rifapentine tab 150 mg				
azithromycin tab 500 mg (Zithromax)			•		<b>ANTIFUNGALS</b>				
<b>TETRACYCLINES</b>									
doxycycline hyclate cap 100 mg (Vibramycin)					fluconazole tab 50 mg (Diflucan)				
					fluconazole tab 100 mg (Diflucan)				
					fluconazole tab 150 mg (Diflucan)				
					fluconazole tab 200 mg (Diflucan)				
					NOXAFILE - posaconazole susp 40 mg/ml		•		
					terbinafine hcl tab 250 mg (Lamisil)				
<b>ANTIVIRALS</b>									

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
<b>acyclovir cap 200 mg</b> (Zovirax)					ISENTRESS - raltegravir potassium tab 400 mg (base equiv)			•	
<b>acyclovir tab 400 mg</b> (Zovirax)					ISENTRESS - raltegravir potassium chew tab 25 mg (base equiv)			•	
<b>acyclovir tab 800 mg</b> (Zovirax)				•	ISENTRESS - raltegravir potassium chew tab 100 mg (base equiv)			•	
ATRIPLA - efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg					ISENTRESS HD - raltegravir potassium tab 600 mg (base equiv)			•	
BARACLUDE - entecavir oral soln 0.05 mg/ml					JULUCA - dolutegravir sodium-rilpivirine hcl tab 50-25 mg (base eq)			•	
BIKTARVY - bictegravir-emtricitabine-tenofovir af tab 50-200-25 mg			•		KALETRA - lopinavir-ritonavir tab 100-25 mg			•	
CIMDUO - lamivudine-tenofovir disoproxil fumarate tab 300-300 mg			•		KALETRA - lopinavir-ritonavir tab 200-50 mg			•	
DELSTRIGO - doravirine-lamivudine-tenofovir df tab 100-300-300 mg			•		MAVYRET - glecaprevir-pibrentasvir tab 100-40 mg		•	•	•
DESCOVY - emtricitabine-tenofovir alafenamide fumarate tab 200-25 mg			•		<b>nevirapine tab 200 mg</b> (Viramune)			•	
DOVATO - dolutegravir sodium-lamivudine tab 50-300 mg (base eq)			•		NORVIR - ritonavir oral soln 80 mg/ml			•	
EPCLUSA - sofosbuvir-velpatasvir tab 400-100 mg	•	•	•		NORVIR - ritonavir powder packet 100 mg			•	
<b>famciclovir tab 125 mg</b> (Famvir)					ODEFSEY - emtricitabine-rilpivirine-tenofovir af tab 200-25-25 mg			•	
GENVOYA - elvitegrav-cobic-emtricitab-tenofov af tab 150-150-200-10 mg			•		PEGASYS - peginterferon alfa-2a inj 180 mcg/ml		•	•	
HARVONI - ledipasvir-sofosbuvir tab 45-200 mg	•	•	•		PEGASYS - peginterferon alfa-2a inj 180 mcg/0.5ml		•	•	
HARVONI - ledipasvir-sofosbuvir tab 90-400 mg	•	•	•		PEGASYS PROCLICK - peginterferon alfa-2a inj 180 mcg/0.5ml		•	•	
HARVONI - ledipasvir-sofosbuvir pellet pack 33.75-150 mg	•	•	•		PREZISTA - darunavir ethanolate susp 100 mg/ml (base equiv)			•	
HARVONI - ledipasvir-sofosbuvir pellet pack 45-200 mg	•	•	•		PREZISTA - darunavir ethanolate tab 75 mg (base equiv)			•	
INTELENCE - etravirine tab 25 mg			•		PREZISTA - darunavir ethanolate tab 150 mg (base equiv)			•	
INTELENCE - etravirine tab 100 mg			•		PREZISTA - darunavir ethanolate tab 600 mg (base equiv)			•	
INTELENCE - etravirine tab 200 mg			•						
ISENTRESS - raltegravir potassium packet for susp 100 mg (base equiv)			•						

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
PREZISTA - darunavir ethanolate tab 800 mg (base equiv)			•		VIREAD - tenofovir disoproxil fumarate tab 250 mg			•	
SOVALDI - sofosbuvir tab 200 mg	•	•	•		VOSEVI - sofosbuvir-velpatasvir-voxilaprevir tab 400-100-100 mg	•	•	•	
SOVALDI - sofosbuvir tab 400 mg	•	•	•		<b>ANTIMALARIALS</b>				
SOVALDI - sofosbuvir pellet pack 150 mg	•	•	•		DARAPRIM - pyrimethamine tab 25 mg		•	•	
SOVALDI - sofosbuvir pellet pack 200 mg	•	•	•		MEFLOQUINE HCL - mefloquine hcl tab 250 mg				
SYMFI - efavirenz-lamivudine-tenofovir df tab 600-300-300 mg			•		<b>ANTHELMINTICS</b>				
SYMFI LO - efavirenz-lamivudine-tenofovir df tab 400-300-300 mg			•		BENZNIDAZOLE - benznidazole tab 12.5 mg				
TEMIXYS - lamivudine-tenofovir disoproxil fumarate tab 300-300 mg			•		BENZNIDAZOLE - benznidazole tab 100 mg				
TIVICAY - dolutegravir sodium tab 10 mg (base equiv)			•		<b>ANTI-INFECTIVE AGENTS - MISC.</b>				
TIVICAY - dolutegravir sodium tab 25 mg (base equiv)			•		ALINIA - nitazoxanide tab 500 mg			•	
TIVICAY - dolutegravir sodium tab 50 mg (base equiv)			•		ALINIA - nitazoxanide for susp 100 mg/5ml			•	
TRUVADA - emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg			•		<b>clindamycin hcl cap 150 mg</b> (Cleocin)				
TRUVADA - emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg			•		<b>clindamycin hcl cap 300 mg</b> (Cleocin)				
TRUVADA - emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg			•		IMPAVIDO - miltefosine cap 50 mg				
TRUVADA - emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg			•		<b>metronidazole tab 250 mg</b> (Flagyl)				
<b>valacyclovir hcl tab 500 mg</b> (Valtrex)					<b>metronidazole tab 500 mg</b> (Flagyl)				
<b>valacyclovir hcl tab 1 gm</b> (Valtrex)					SIVEXTRO - tedizolid phosphate tab 200 mg		•		
VIREAD - tenofovir disoproxil fumarate oral powder 40 mg/gm			•		<b>sulfamethoxazole-trimethoprim tab 400-80 mg</b> (Bactrim)				
VIREAD - tenofovir disoproxil fumarate tab 150 mg			•		<b>sulfamethoxazole-trimethoprim tab 800-160 mg</b> (Bactrim ds)				
VIREAD - tenofovir disoproxil fumarate tab 200 mg			•		<b>trimethoprim tab 100 mg</b>				
					XIFAXAN - rifaximin tab 550 mg			•	
					<b>ANTINEOPLASTIC AGENTS</b>				
					<b>ANTINEOPLASTICS</b>				
					ACTIMMUNE - interferon gamma-1b inj 100 mcg/0.5ml (2000000 unit/0.5ml)	•			
					AFINITOR - everolimus tab 10 mg	•	•	•	

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
<b>anastrozole tab 1 mg</b> (Arimidex)					KISQALI FEMARA 600 DOSE - ribociclib 600 mg dose (200 mg tab) & letrozole 2.5 mg tbpk	•	•	•	
AYVAKIT - avapritinib tab 100 mg	•	•	•		<b>letrozole tab 2.5 mg</b> (Femara)				
AYVAKIT - avapritinib tab 200 mg	•	•	•		LEUCOVORIN CALCIUM - leucovorin calcium tab 10 mg				
AYVAKIT - avapritinib tab 300 mg	•	•	•		LEUCOVORIN CALCIUM - leucovorin calcium tab 15 mg				
<b>bicalutamide tab 50 mg</b> (Casodex)	•				LEUKERAN - chlorambucil tab 2 mg	•			
CABOMETYX - cabozantinib s-malate tab 20 mg (base equivalent)	•	•	•		LYNPARZA - olaparib tab 100 mg	•	•	•	
CABOMETYX - cabozantinib s-malate tab 40 mg (base equivalent)	•	•	•		LYNPARZA - olaparib tab 150 mg	•	•	•	
CABOMETYX - cabozantinib s-malate tab 60 mg (base equivalent)	•	•	•		<b>megestrol acetate tab 20 mg</b>				
COTELLIC - cobimetinib fumarate tab 20 mg (base equivalent)	•	•	•		<b>megestrol acetate tab 40 mg</b>				
EMCYT - estramustine phosphate sodium cap 140 mg	•				MEKINIST - trametinib dimethyl sulfoxide tab 0.5 mg (base equivalent)	•	•	•	
ERIVEDGE - vismodegib cap 150 mg	•	•	•		MEKINIST - trametinib dimethyl sulfoxide tab 2 mg (base equivalent)	•	•	•	
ERLEADA - apalutamide tab 60 mg	•	•	•		MESNEX - mesna tab 400 mg				
IBRANCE - palbociclib cap 75 mg	•	•	•		MYLERAN - busulfan tab 2 mg	•			
IBRANCE - palbociclib cap 100 mg	•	•	•		NEXAVAR - sorafenib tosylate tab 200 mg (base equivalent)	•	•	•	
IBRANCE - palbociclib cap 125 mg	•	•	•		NUBEQA - darolutamide tab 300 mg	•	•	•	
IBRANCE - palbociclib tab 75 mg	•	•	•		PIQRAY 200MG DAILY DOSE - alpelisib tab therapy pack 200 mg daily dose	•	•	•	
IBRANCE - palbociclib tab 100 mg	•	•	•		PIQRAY 250MG DAILY DOSE - alpelisib tab pack 250 mg daily dose (200 mg & 50 mg tabs)	•	•	•	
IBRANCE - palbociclib tab 125 mg	•	•	•		PIQRAY 300MG DAILY DOSE - alpelisib tab pack 300 mg daily dose (2x150 mg tab)	•	•	•	
KISQALI - ribociclib succinate tab pack 200 mg daily dose	•	•	•		PURIXAN - mercaptopurine susp 2000 mg/100ml (20 mg/ml)	•			
KISQALI - ribociclib succinate tab pack 400 mg daily dose (200 mg tab)	•	•	•		ROZLYTREK - entrectinib cap 100 mg	•	•	•	
KISQALI - ribociclib succinate tab pack 600 mg daily dose (200 mg tab)	•	•	•		ROZLYTREK - entrectinib cap 200 mg	•	•	•	
KISQALI FEMARA 200 DOSE - ribociclib 200 mg dose (200 mg tab) & letrozole 2.5 mg tbpk	•	•	•						
KISQALI FEMARA 400 DOSE - ribociclib 400 mg dose (200 mg tab) & letrozole 2.5 mg tbpk	•	•	•						

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
RUBRACA - rucaparib camsylate tab 200 mg (base equivalent)	•	•	•		TREXALL - methotrexate sodium tab 5 mg (base equiv)				
RUBRACA - rucaparib camsylate tab 250 mg (base equivalent)	•	•	•		TREXALL - methotrexate sodium tab 7.5 mg (base equiv)				
RUBRACA - rucaparib camsylate tab 300 mg (base equivalent)	•	•	•		TREXALL - methotrexate sodium tab 10 mg (base equiv)				
RYDAPT - midostaurin cap 25 mg	•	•	•		TREXALL - methotrexate sodium tab 15 mg (base equiv)				
SPRYCEL - dasatinib tab 20 mg	•	•	•		VENCLEXTA - venetoclax tab 10 mg	•	•	•	
SPRYCEL - dasatinib tab 50 mg	•	•	•		VENCLEXTA - venetoclax tab 50 mg	•	•	•	
SPRYCEL - dasatinib tab 70 mg	•	•	•		VENCLEXTA - venetoclax tab 100 mg	•	•	•	
SPRYCEL - dasatinib tab 80 mg	•	•	•		VENCLEXTA STARTING PACK - venetoclax tab therapy starter pack 10 & 50 & 100 mg	•	•	•	
SPRYCEL - dasatinib tab 100 mg	•	•	•		VERZENIO - abemaciclib tab 50 mg	•	•	•	
SPRYCEL - dasatinib tab 140 mg	•	•	•		VERZENIO - abemaciclib tab 100 mg	•	•	•	
SUTENT - sunitinib malate cap 12.5 mg (base equivalent)	•	•	•		VERZENIO - abemaciclib tab 150 mg	•	•	•	
SUTENT - sunitinib malate cap 25 mg (base equivalent)	•	•	•		VERZENIO - abemaciclib tab 200 mg	•	•	•	
SUTENT - sunitinib malate cap 37.5 mg (base equivalent)	•	•	•		VITRAKVI - larotrectinib sulfate oral soln 20 mg/ml (base equivalent)	•	•	•	
SUTENT - sunitinib malate cap 50 mg (base equivalent)	•	•	•		VITRAKVI - larotrectinib sulfate cap 25 mg (base equivalent)	•	•	•	
TABLOID - thioguanine tab 40 mg	•				VITRAKVI - larotrectinib sulfate cap 100 mg (base equivalent)	•	•	•	
TAFINLAR - dabrafenib mesylate cap 50 mg (base equivalent)	•	•	•		VOTRIENT - pazopanib hcl tab 200 mg (base equiv)	•	•	•	
TAFINLAR - dabrafenib mesylate cap 75 mg (base equivalent)	•	•	•		XALKORI - crizotinib cap 200 mg	•	•	•	
TALZENNA - talazoparib tosylate cap 0.25 mg (base equivalent)	•	•	•		XALKORI - crizotinib cap 250 mg	•	•	•	
TALZENNA - talazoparib tosylate cap 1 mg (base equivalent)	•	•	•		XTANDI - enzalutamide cap 40 mg	•	•	•	
TASIGNA - nilotinib hcl cap 50 mg (base equivalent)	•	•	•		YONSA - abiraterone acetate tab 125 mg	•	•	•	
TASIGNA - nilotinib hcl cap 150 mg (base equivalent)	•	•	•		ZELBORAF - vemurafenib tab 240 mg	•	•	•	
TASIGNA - nilotinib hcl cap 200 mg (base equivalent)	•	•	•		ZYTIGA - abiraterone acetate tab 500 mg	•	•	•	

**ENDOCRINE AND METABOLIC DRUGS****CORTICOSTEROIDS**

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
CORTISONE ACETATE - cortisone acetate tab 25 mg					DIVIGEL - estradiol td gel 0.75 mg/0.75gm (0.1%)				
DEXAMETHASONE - dexamethasone soln 0.5 mg/5ml					DIVIGEL - estradiol td gel 1 mg/gm (0.1%)				
<b>dexamethasone tab 0.5 mg</b>					DIVIGEL - estradiol td gel 1.25 mg/1.25gm (0.1%)				
<b>dexamethasone tab 0.75 mg</b>					DUAVEE - conjugated estrogens-bazedoxifene tab 0.45-20 mg				
<b>dexamethasone tab 1.5 mg</b>					<b>estradiol tab 0.5 mg</b> (Estrace)				
<b>dexamethasone tab 4 mg</b>					<b>estradiol tab 1 mg</b> (Estrace)				
<b>dexamethasone tab 6 mg</b>					<b>estradiol tab 2 mg</b> (Estrace)				
<b>fludrocortisone acetate tab 0.1 mg</b>					PREMARIN - estrogens, conjugated tab 0.3 mg				
<b>methylprednisolone tab therapy pack 4 mg (21) (Medrol dosepak)</b>					PREMARIN - estrogens, conjugated tab 0.45 mg				
<b>methylprednisolone tab 16 mg (Medrol)</b>					PREMARIN - estrogens, conjugated tab 0.625 mg				
<b>methylprednisolone tab 32 mg (Medrol)</b>					PREMARIN - estrogens, conjugated tab 0.9 mg				
<b>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)</b>					PREMARIN - estrogens, conjugated tab 1.25 mg				
PREDNISONE - prednisone oral soln 5 mg/5ml					PREMPHASE - conj est 0.625(14)/conj est-medroxypro ac tab 0.625-5mg(14)				
PREDNISONE INTENSOL - prednisone conc 5 mg/ml					PREMPRO - conjugated estrogen-medroxyprogester acetate tab 0.3-1.5 mg				
<b>prednisone tab 1 mg</b>					PREMPRO - conjugated estrogen-medroxyprogester acetate tab 0.45-1.5 mg				
<b>prednisone tab 2.5 mg</b>					PREMPRO - conjugated estrogen-medroxyprogester acetate tab 0.625-2.5 mg				
<b>prednisone tab 5 mg</b>					PREMPRO - conjugated estrogen-medroxyprogester acetate tab 0.625-5 mg				
<b>prednisone tab 10 mg</b>					<b>CONTRACEPTIVES</b>				
<b>prednisone tab 20 mg</b>									
<b>ESTROGENS</b>									
COMBIPATCH - estradiol-norethindrone ace td pttw 0.05-0.14 mg/day									
COMBIPATCH - estradiol-norethindrone ace td pttw 0.05-0.25 mg/day									
DIVIGEL - estradiol td gel 0.25 mg/0.25gm (0.1%)									
DIVIGEL - estradiol td gel 0.5 mg/0.5gm (0.1%)									

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
<b>desogestrel &amp; ethinyl estradiol tab 0.15 mg-30 mcg (Desogen)</b>			•						
ELLA - ulipristal acetate tab 30 mg			•						
<b>levonorgestrel &amp; ethinyl estradiol tab 0.1 mg-20 mcg</b>			•						
<b>levonorgestrel &amp; ethinyl estradiol tab 0.15 mg-30 mcg</b>			•						
<b>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</b>			•						
<b>norethindrone &amp; ethinyl estradiol tab 1 mg-35 mcg (Norinyl 1+35)</b>			•						
<b>norethindrone ace &amp; ethinyl estradiol tab 1 mg-20 mcg (Loestrin 1/20-21)</b>			•						
<b>norethindrone ace &amp; ethinyl estradiol-fe tab 1 mg-20 mcg (Loestrin fe 1/20)</b>			•						
<b>norethindrone ace &amp; ethinyl estradiol-fe tab 1.5 mg-30 mcg (Loestrin fe 1.5/30)</b>			•						
<b>norethindrone tab 0.35 mg (Nor-qd)</b>			•						
<b>norgestimate &amp; ethinyl estradiol tab 0.25 mg-35 mcg (Ortho-cyclen)</b>			•						
<b>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg (Ortho tri-cyclen lo)</b>			•						
<b>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg (Ortho tri-cyclen)</b>			•						
NUVARING - etonogestrel-ethinyl estradiol va ring 0.120-0.015 mg/24hr			•						
<b>PROGESTINS</b>									
<b>medroxyprogesterone acetate tab 2.5 mg (Provera)</b>									
<b>medroxyprogesterone acetate tab 5 mg (Provera)</b>									
<b>medroxyprogesterone acetate tab 10 mg (Provera)</b>									
<b>ANTIDIABETICS</b>									
BAQSIMI ONE PACK - glucagon nasal powder 3 mg/dose									
BAQSIMI TWO PACK - glucagon nasal powder 3 mg/dose									
<b>glimepiride tab 1 mg (Amaryl)</b>									
<b>glimepiride tab 2 mg (Amaryl)</b>									
<b>glimepiride tab 4 mg (Amaryl)</b>									
<b>glipizide tab er 24hr 2.5 mg (Glucotrol xl)</b>									
<b>glipizide tab er 24hr 5 mg (Glucotrol xl)</b>									
<b>glipizide tab er 24hr 10 mg (Glucotrol xl)</b>									
<b>glipizide tab 5 mg (Glucotrol)</b>									
<b>glipizide tab 10 mg (Glucotrol)</b>									
GLUCAGON EMERGENCY KIT - glucagon (rdna) for inj kit 1 mg									
GLUCAGON EMERGENCY KIT FO - glucagon hcl for inj 1 mg									
<b>glyburide micronized tab 1.5 mg (Glynase)</b>									
<b>glyburide micronized tab 3 mg (Glynase)</b>									
<b>glyburide micronized tab 6 mg (Glynase)</b>									
<b>glyburide tab 1.25 mg</b>									
<b>glyburide tab 2.5 mg</b>									
<b>glyburide tab 5 mg</b>									
<b>glyburide-metformin tab 1.25-250 mg (Glucovance)</b>									
<b>glyburide-metformin tab 2.5-500 mg (Glucovance)</b>									
<b>glyburide-metformin tab 5-500 mg (Glucovance)</b>									

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
GLYXAMBI - empagliflozin-linagliptin tab 10-5 mg			•		INVOKANA - canagliflozin tab 300 mg			•	
GLYXAMBI - empagliflozin-linagliptin tab 25-5 mg			•		JANUMET - sitagliptin-metformin hcl tab 50-500 mg			•	
GVOKE HYPOOPEN 1-PACK - glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml					JANUMET - sitagliptin-metformin hcl tab 50-1000 mg			•	
GVOKE HYPOOPEN 1-PACK - glucagon subcutaneous solution auto-injector 1 mg/0.2ml					JANUMET XR - sitagliptin-metformin hcl tab er 24hr 50-500 mg			•	
GVOKE HYPOOPEN 2-PACK - glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml					JANUMET XR - sitagliptin-metformin hcl tab er 24hr 50-1000 mg			•	
GVOKE HYPOOPEN 2-PACK - glucagon subcutaneous solution auto-injector 1 mg/0.2ml					JANUVIA - sitagliptin phosphate tab 25 mg (base equiv)			•	
GVOKE PFS - glucagon subcutaneous soln pref syringe 0.5 mg/0.1ml					JANUVIA - sitagliptin phosphate tab 50 mg (base equiv)			•	
GVOKE PFS - glucagon subcutaneous soln pref syringe 1 mg/0.2ml					JANUVIA - sitagliptin phosphate tab 100 mg (base equiv)			•	
INVOKAMET - canagliflozin-metformin hcl tab 50-500 mg			•		JARDIANCE - empagliflozin tab 10 mg			•	
INVOKAMET - canagliflozin-metformin hcl tab 50-1000 mg			•		JARDIANCE - empagliflozin tab 25 mg			•	
INVOKAMET - canagliflozin-metformin hcl tab 150-500 mg			•		KOMBIGLYZE XR - saxagliptin-metformin hcl tab er 24hr 2.5-1000 mg			•	
INVOKAMET - canagliflozin-metformin hcl tab 150-1000 mg			•		KOMBIGLYZE XR - saxagliptin-metformin hcl tab er 24hr 5-500 mg			•	
INVOKAMET XR - canagliflozin-metformin hcl tab er 24hr 50-500 mg			•		KOMBIGLYZE XR - saxagliptin-metformin hcl tab er 24hr 5-1000 mg			•	
INVOKAMET XR - canagliflozin-metformin hcl tab er 24hr 50-1000 mg			•		<b>metformin hcl tab er 24hr 500 mg</b> (Glucophage xr)				
INVOKAMET XR - canagliflozin-metformin hcl tab er 24hr 150-500 mg			•		<b>metformin hcl tab er 24hr 750 mg</b> (Glucophage xr)				
INVOKAMET XR - canagliflozin-metformin hcl tab er 24hr 150-1000 mg			•		<b>metformin hcl tab 500 mg</b> (Glucophage)				
INVOKANA - canagliflozin tab 100 mg			•		<b>metformin hcl tab 850 mg</b> (Glucophage)				
					<b>metformin hcl tab 1000 mg</b> (Glucophage)				

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
ONGLYZA - saxagliptin hcl tab 2.5 mg (base equiv)			•		SYNJARDY XR - empagliflozin-metformin hcl tab er 24hr 25-1000 mg			•	
ONGLYZA - saxagliptin hcl tab 5 mg (base equiv)			•		TRULICITY - dulaglutide soln pen-injector 0.75 mg/0.5ml			•	•
OZEMPIC - semaglutide soln pen-inj 0.25 or 0.5 mg/dose (2 mg/1.5ml)			•	•	TRULICITY - dulaglutide soln pen-injector 1.5 mg/0.5ml			•	•
OZEMPIC - semaglutide soln pen-inj 1 mg/dose (2 mg/1.5ml)			•	•	VICTOZA - liraglutide soln pen-injector 18 mg/3ml (6 mg/ml)			•	•
<b>pioglitazone hcl tab 15 mg (base equiv) (Actos)</b>					XULTOPHY 100/3.6 - insulin degludec-liraglutide sol pen-inj 100-3.6 unit-mg/ml			•	•
<b>pioglitazone hcl tab 30 mg (base equiv) (Actos)</b>					<b>Rapid-Acting Insulins</b>				
<b>pioglitazone hcl tab 45 mg (base equiv) (Actos)</b>					FIASP - insulin aspart (with niacinamide) inj 100 unit/ml			•	
PROGLYCEM - diazoxide susp 50 mg/ml					FIASP FLEXTOUCH - insulin aspart (with niacinamide) sol pen-inj 100 unit/ml			•	
RYBELSUS - semaglutide tab 3 mg			•	•	FIASP PENFILL - insulin aspart (with niacinamide) soln cartridge 100 unit/ml			•	
RYBELSUS - semaglutide tab 7 mg			•	•	INSULIN ASPART - insulin aspart inj 100 unit/ml			•	
RYBELSUS - semaglutide tab 14 mg			•	•	INSULIN ASPART FLEXPEN - insulin aspart soln pen-injector 100 unit/ml			•	
SOLIQUA 100/33 - insulin glargine-lixisenatide sol pen-inj 100-33 unit-mcg/ml			•	•	INSULIN ASPART PENFILL - insulin aspart soln cartridge 100 unit/ml			•	
SYNJARDY - empagliflozin-metformin hcl tab 5-500 mg			•		NOVOLOG - insulin aspart inj 100 unit/ml			•	
SYNJARDY - empagliflozin-metformin hcl tab 5-1000 mg			•		NOVOLOG FLEXPEN - insulin aspart soln pen-injector 100 unit/ml			•	
SYNJARDY - empagliflozin-metformin hcl tab 12.5-500 mg			•		NOVOLOG PENFILL - insulin aspart soln cartridge 100 unit/ml			•	
SYNJARDY - empagliflozin-metformin hcl tab 12.5-1000 mg			•		<b>Short-Acting Insulins</b>				
SYNJARDY XR - empagliflozin-metformin hcl tab er 24hr 5-1000 mg			•		HUMULIN R U-500 (CONCENTR - insulin regular (human) inj 500 unit/ml			•	
SYNJARDY XR - empagliflozin-metformin hcl tab er 24hr 10-1000 mg			•		HUMULIN R U-500 KWIKPEN - insulin regular (human) soln pen-injector 500 unit/ml			•	
SYNJARDY XR - empagliflozin-metformin hcl tab er 24hr 12.5-1000 mg			•						

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
NOVOLIN R - insulin regular (human) inj 100 unit/ml			•		TOUJEO MAX SOLOSTAR - insulin glargine soln pen-injector 300 unit/ml (2 unit dial)			•	
NOVOLIN R FLEXPEN - insulin regular (human) soln pen-injector 100 unit/ml			•		TOUJEO SOLOSTAR - insulin glargine soln pen-injector 300 unit/ml (1 unit dial)			•	
<b>Intermediate-Acting Insulins</b>									
INSULIN ASPART PROTAMINE/ - insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30)			•		TRESIBA - insulin degludec inj 100 unit/ml			•	
INSULIN ASPART PROTAMINE/ - insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)			•		TRESIBA FLEXTOUCH - insulin degludec soln pen-injector 100 unit/ml			•	
NOVOLIN N - insulin nph (human) (isophane) inj 100 unit/ml			•		TRESIBA FLEXTOUCH - insulin degludec soln pen-injector 200 unit/ml			•	
NOVOLIN N FLEXPEN - insulin nph (human) (isophane) susp pen-injector 100 unit/ml			•		<b>THYROID AGENTS</b>				
NOVOLIN 70/30 - insulin nph isophane & regular human inj 100 unit/ml (70-30)			•		<b>levothyroxine sodium tab 25 mcg</b> (Synthroid)				
NOVOLIN 70/30 FLEXPEN - insulin nph & regular susp pen-inj 100 unit/ml (70-30)			•		<b>levothyroxine sodium tab 50 mcg</b> (Synthroid)				
NOVOLOG MIX 70/30 - insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)			•		<b>levothyroxine sodium tab 75 mcg</b> (Synthroid)				
NOVOLOG MIX 70/30 PREFILL - insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30)			•		<b>levothyroxine sodium tab 88 mcg</b> (Synthroid)				
<b>Basal Insulins</b>									
LANTUS - insulin glargine inj 100 unit/ml			•		<b>levothyroxine sodium tab 100 mcg</b> (Synthroid)				
LANTUS SOLOSTAR - insulin glargine soln pen-injector 100 unit/ml			•		<b>levothyroxine sodium tab 112 mcg</b> (Synthroid)				
LEVEMIR - insulin detemir inj 100 unit/ml			•		<b>levothyroxine sodium tab 125 mcg</b> (Synthroid)				
LEVEMIR FLEXTOUCH - insulin detemir soln pen-injector 100 unit/ml			•		<b>levothyroxine sodium tab 137 mcg</b> (Synthroid)				
					<b>levothyroxine sodium tab 150 mcg</b> (Synthroid)				
					<b>levothyroxine sodium tab 175 mcg</b> (Synthroid)				
					<b>levothyroxine sodium tab 200 mcg</b> (Synthroid)				
					<b>methimazole tab 5 mg</b> (Tapazole)				

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
<b>methimazole tab 10 mg</b> (Tapazole)					<b>NORDITROPIN FLEXPRO - somatropin inj 30 mg/3ml</b>	•	•		
<b>thyroid tab 15 mg (1/4 grain)</b> (Armour thyroid)					<b>ORFADIN - nitisinone cap 20 mg</b>	•			
<b>thyroid tab 30 mg (1/2 grain)</b> (Armour thyroid)					<b>ORFADIN - nitisinone susp 4 mg/ml</b>	•			
<b>thyroid tab 60 mg (1 grain)</b> (Armour thyroid)					<b>ORILISSA - elagolix sodium tab 150 mg (base equiv)</b>		•	•	
<b>ENDOCRINE and METABOLIC AGENTS - MISC.</b>					<b>ORILISSA - elagolix sodium tab 200 mg (base equiv)</b>		•	•	
<b>alendronate sodium tab 10 mg</b>			•		<b>REVCOVI - elapegademase-lvlr im soln 2.4 mg/1.5ml (1.6 mg/ml)</b>				
<b>alendronate sodium tab 35 mg</b>			•		<b>STIMATE - desmopressin acetate nasal soln 1.5 mg/ml</b>				
<b>alendronate sodium tab 70 mg (Fosamax)</b>			•		<b>STRENSIQ - asfotase alfa subcutaneous inj 18 mg/0.45ml</b>	•	•		
<b>calcitriol cap 0.25 mcg</b> (Rocaltrol)					<b>STRENSIQ - asfotase alfa subcutaneous inj 28 mg/0.7ml</b>	•	•		
<b>CLOMIPHENE CITRATE</b> - clomiphene citrate tab 50 mg					<b>STRENSIQ - asfotase alfa subcutaneous inj 40 mg/ml</b>	•	•		
<b>CYSTADANE</b> - betaine powder for oral solution					<b>STRENSIQ - asfotase alfa subcutaneous inj 80 mg/0.8ml</b>	•	•		
<b>FOLLISTIM AQ</b> - follitropin beta inj 300 unit/0.36ml	•		•		<b>TYMLOS - abaloparatide subcutaneous soln pen-injector 3120 mcg/1.56ml</b>	•	•	•	
<b>FOLLISTIM AQ</b> - follitropin beta inj 600 unit/0.72ml	•		•						
<b>FOLLISTIM AQ</b> - follitropin beta inj 900 unit/1.08ml	•		•						
<b>ibandronate sodium tab 150 mg (base equivalent)</b> (Boniva)			•						
<b>INCRELEX</b> - mecasermin inj 40 mg/4ml (10 mg/ml)	•								
<b>NITYR</b> - nitisinone tab 2 mg		•							
<b>NITYR</b> - nitisinone tab 5 mg	•								
<b>NITYR</b> - nitisinone tab 10 mg	•								
<b>NORDITROPIN FLEXPRO</b> - somatropin inj 5 mg/1.5ml	•	•							
<b>NORDITROPIN FLEXPRO</b> - somatropin inj 10 mg/1.5ml	•	•							
<b>NORDITROPIN FLEXPRO</b> - somatropin inj 15 mg/1.5ml	•	•							
<b>CARDIOVASCULAR AGENTS</b>									
<b>ANTIANGINAL AGENTS</b>									
<b>isosorbide mononitrate tab er 24hr 30 mg</b>									
<b>isosorbide mononitrate tab er 24hr 60 mg</b>									
<b>isosorbide mononitrate tab 10 mg</b>									
<b>isosorbide mononitrate tab 20 mg</b>									
<b>nitroglycerin td patch 24hr 0.2 mg/hr (Nitro-dur)</b>									
<b>BETA BLOCKERS</b>									
<b>acebutolol hcl cap 200 mg</b> (Sectral)									
<b>acebutolol hcl cap 400 mg</b> (Sectral)									
<b>atenolol tab 25 mg</b> (Tenormin)									

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
<b>atenolol tab 50 mg</b> (Tenormin)					<b>sotalol hcl tab 160 mg</b> (Betapace)				
<b>atenolol tab 100 mg</b> (Tenormin)					<b>sotalol hcl tab 240 mg</b>				
<b>bisoprolol fumarate tab 5 mg</b> (Zebeta)					<b>CALCIUM CHANNEL BLOCKERS</b>				
<b>carvedilol tab 3.125 mg</b> (Coreg)					<b>amlodipine besylate tab 2.5 mg (base equivalent)</b> (Norvasc)				
<b>carvedilol tab 6.25 mg</b> (Coreg)					<b>amlodipine besylate tab 5 mg (base equivalent)</b> (Norvasc)				
<b>carvedilol tab 12.5 mg</b> (Coreg)					<b>amlodipine besylate tab 10 mg (base equivalent)</b> (Norvasc)				
<b>carvedilol tab 25 mg</b> (Coreg)					<b>diltiazem hcl coated beads cap er 24hr 120 mg</b> (Cardizem cd)				
INNOPRAN XL - propranolol hcl sustained-release beads cap er 24hr 80 mg					<b>diltiazem hcl coated beads cap er 24hr 180 mg</b> (Cardizem cd)				
INNOPRAN XL - propranolol hcl sustained-release beads cap er 24hr 120 mg					<b>diltiazem hcl coated beads cap er 24hr 240 mg</b> (Cardizem cd)				
<b>labetalol hcl tab 100 mg</b> (Trandate)					<b>diltiazem hcl extended release beads cap er 24hr 120 mg</b> (Tiazac)				
<b>metoprolol succinate tab er 24hr 25 mg (tartrate equiv)</b> (Toprol xl)					<b>diltiazem hcl tab 30 mg</b> (Cardizem)				
<b>metoprolol succinate tab er 24hr 50 mg (tartrate equiv)</b> (Toprol xl)					<b>diltiazem hcl tab 60 mg</b> (Cardizem)				
<b>metoprolol tartrate tab 25 mg</b>					<b>felodipine tab er 24hr 2.5 mg</b>				
<b>metoprolol tartrate tab 50 mg</b> (Lopressor)					<b>felodipine tab er 24hr 5 mg</b>				
<b>metoprolol tartrate tab 100 mg</b> (Lopressor)					<b>felodipine tab er 24hr 10 mg</b>				
PROPRANOLOL HCL - propranolol hcl oral soln 20 mg/5ml					<b>nifedipine tab er 24hr 30 mg</b> (Adalat cc)				
PROPRANOLOL HCL - propranolol hcl oral soln 40 mg/5ml	•	•			<b>nifedipine tab er 24hr osmotic release 30 mg</b> (Procardia xl)				
<b>propranolol hcl tab 10 mg</b>					<b>nifedipine tab er 24hr osmotic release 60 mg</b> (Procardia xl)				
<b>propranolol hcl tab 20 mg</b>					<b>verapamil hcl tab er 120 mg</b> (Calan sr)				
<b>sotalol hcl (afib/afl) tab 80 mg</b> (Betapace af)					<b>verapamil hcl tab er 180 mg</b> (Calan sr)				
<b>sotalol hcl (afib/afl) tab 160 mg</b> (Betapace af)					<b>verapamil hcl tab er 240 mg</b> (Calan sr)				
<b>sotalol hcl tab 80 mg</b> (Betapace)					<b>verapamil hcl tab 40 mg</b>				
<b>sotalol hcl tab 120 mg</b> (Betapace)					<b>verapamil hcl tab 80 mg</b> (Calan)				

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
<b>verapamil hcl tab 120 mg (Calan)</b>					<b>bisoprolol &amp; hydrochlorothiazide tab 10-6.25 mg (Ziac)</b>				
<b>ANTIARRHYTHMICS</b>									
<b>amiodarone hcl tab 200 mg (Cordarone)</b>					<b>clonidine hcl tab 0.1 mg (Catapres)</b>				
MULTAQ - dronedarone hcl tab 400 mg (base equivalent)					<b>clonidine hcl tab 0.2 mg (Catapres)</b>				
<b>ANTIHYPERTENSIVES</b>									
<b>amlodipine besylate-benazepril hcl cap 2.5-10 mg (Lotrel)</b>					<b>clonidine hcl tab 0.3 mg (Catapres)</b>				
<b>amlodipine besylate-benazepril hcl cap 5-10 mg (Lotrel)</b>					<b>doxazosin mesylate tab 1 mg (Cardura)</b>				
<b>amlodipine besylate-benazepril hcl cap 5-20 mg (Lotrel)</b>					<b>doxazosin mesylate tab 2 mg (Cardura)</b>				
<b>amlodipine besylate-benazepril hcl cap 5-40 mg (Lotrel)</b>					<b>doxazosin mesylate tab 4 mg (Cardura)</b>				
<b>amlodipine besylate-benazepril hcl cap 10-20 mg (Lotrel)</b>					<b>doxazosin mesylate tab 8 mg (Cardura)</b>				
<b>amlodipine besylate-benazepril hcl cap 10-40 mg (Lotrel)</b>					<b>enalapril maleate &amp; hydrochlorothiazide tab 5-12.5 mg</b>				
<b>amlodipine besylate-valsartan tab 5-160 mg (Exforge)</b>					<b>enalapril maleate &amp; hydrochlorothiazide tab 10-25 mg (Vaseretic)</b>				
<b>amlodipine besylate-valsartan tab 5-320 mg (Exforge)</b>					<b>enalapril maleate tab 2.5 mg (Vasotec)</b>				
<b>amlodipine besylate-valsartan tab 10-160 mg (Exforge)</b>					<b>enalapril maleate tab 5 mg (Vasotec)</b>				
<b>atenolol &amp; chlorthalidone tab 50-25 mg (Tenoretic 50)</b>					<b>enalapril maleate tab 10 mg (Vasotec)</b>				
<b>benazepril hcl tab 5 mg</b>					<b>enalapril maleate tab 20 mg (Vasotec)</b>				
<b>benazepril hcl tab 10 mg (Lotensin)</b>					<b>fosinopril sodium tab 10 mg</b>				
<b>benazepril hcl tab 20 mg (Lotensin)</b>					<b>fosinopril sodium tab 20 mg</b>				
<b>benazepril hcl tab 40 mg (Lotensin)</b>					<b>fosinopril sodium tab 40 mg</b>				
<b>bisoprolol &amp; hydrochlorothiazide tab 2.5-6.25 mg (Ziac)</b>					<b>guanfacine hcl tab 1 mg (Tenex)</b>				
<b>bisoprolol &amp; hydrochlorothiazide tab 5-6.25 mg (Ziac)</b>					<b>guanfacine hcl tab 2 mg (Tenex)</b>				
					<b>hydralazine hcl tab 10 mg</b>				
					<b>hydralazine hcl tab 25 mg</b>				
					<b>hydralazine hcl tab 50 mg</b>				
					<b>hydralazine hcl tab 100 mg</b>				
					<b>irbesartan tab 75 mg (Avapro)</b>				
					<b>irbesartan tab 150 mg (Avapro)</b>				
					<b>irbesartan tab 300 mg (Avapro)</b>				

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
irbesartan-hydrochlorothiazide tab 150-12.5 mg (Avalide)					perindopril erbumine tab 4 mg (Aceon)				
irbesartan-hydrochlorothiazide tab 300-12.5 mg (Avalide)					quinapril hcl tab 5 mg (Accupril)				
lisinopril & hydrochlorothiazide tab 10-12.5 mg (Zestoretic)					quinapril hcl tab 10 mg (Accupril)				
lisinopril & hydrochlorothiazide tab 20-12.5 mg (Zestoretic)					quinapril hcl tab 20 mg (Accupril)				
lisinopril & hydrochlorothiazide tab 20-25 mg (Zestoretic)					quinapril hcl tab 40 mg (Accupril)				
lisinopril tab 2.5 mg (Zestril)					ramipril cap 1.25 mg (Altace)				
lisinopril tab 5 mg (Prinivil)					ramipril cap 2.5 mg (Altace)				
lisinopril tab 10 mg (Prinivil)					ramipril cap 5 mg (Altace)				
lisinopril tab 20 mg (Prinivil)					ramipril cap 10 mg (Altace)				
lisinopril tab 30 mg (Zestril)					terazosin hcl cap 1 mg (base equivalent)				
lisinopril tab 40 mg (Zestril)					terazosin hcl cap 2 mg (base equivalent)				
losartan potassium & hydrochlorothiazide tab 50-12.5 mg (Hyzaar)					terazosin hcl cap 5 mg (base equivalent)				
losartan potassium & hydrochlorothiazide tab 100-12.5 mg (Hyzaar)					terazosin hcl cap 10 mg (base equivalent)				
losartan potassium & hydrochlorothiazide tab 100-25 mg (Hyzaar)					trandolapril tab 1 mg (Mavik)				
losartan potassium tab 25 mg (Cozaar)					trandolapril tab 2 mg (Mavik)				
losartan potassium tab 50 mg (Cozaar)					trandolapril tab 4 mg (Mavik)				
losartan potassium tab 100 mg (Cozaar)					valsartan tab 40 mg (Diovan)				
methyldopa tab 250 mg					valsartan tab 80 mg (Diovan)				
minoxidil tab 2.5 mg					valsartan tab 160 mg (Diovan)				
minoxidil tab 10 mg					valsartan tab 320 mg (Diovan)				
perindopril erbumine tab 2 mg					valsartan-hydrochlorothiazide tab 80-12.5 mg (Diovan hct)				
					valsartan-hydrochlorothiazide tab 160-12.5 mg (Diovan hct)				
					valsartan-hydrochlorothiazide tab 160-25 mg (Diovan hct)				
					valsartan-hydrochlorothiazide tab 320-12.5 mg (Diovan hct)				
					valsartan-hydrochlorothiazide tab 320-25 mg (Diovan hct)				

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
<b>DIURETICS</b>									
amiloride & hydrochlorothiazide tab 5-50 mg					atorvastatin calcium tab 10 mg (base equivalent) (Lipitor)				
furosemide oral soln 10 mg/ml					atorvastatin calcium tab 20 mg (base equivalent) (Lipitor)				
furosemide tab 20 mg (Lasix)					atorvastatin calcium tab 40 mg (base equivalent) (Lipitor)				
furosemide tab 40 mg (Lasix)					atorvastatin calcium tab 80 mg (base equivalent) (Lipitor)				
furosemide tab 80 mg (Lasix)					fenofibrate tab 48 mg (Tricor)		•		
hydrochlorothiazide cap 12.5 mg (Microzide)					fenofibrate tab 54 mg (Lofibra)		•		
hydrochlorothiazide tab 12.5 mg					fenofibrate tab 145 mg (Tricor)		•		
hydrochlorothiazide tab 25 mg					fenofibrate tab 160 mg (Lofibra)		•		
hydrochlorothiazide tab 50 mg					gemfibrozil tab 600 mg (Lopid)		•		
indapamide tab 1.25 mg					lovastatin tab 10 mg				
indapamide tab 2.5 mg					lovastatin tab 20 mg				
spironolactone tab 25 mg (Aldactone)					lovastatin tab 40 mg (Mevacor)				
spironolactone tab 50 mg (Aldactone)					NEXLETOL - bempedoic acid tab 180 mg				
spironolactone tab 100 mg (Aldactone)					pravastatin sodium tab 10 mg				
torsemide tab 5 mg (Demadex)					pravastatin sodium tab 20 mg (Pravachol)				
torsemide tab 10 mg (Demadex)					pravastatin sodium tab 40 mg (Pravachol)				
torsemide tab 20 mg (Demadex)					pravastatin sodium tab 80 mg (Pravachol)				
torsemide tab 100 mg (Demadex)					REPATHA - evolocumab subcutaneous soln prefilled syringe 140 mg/ml		•	•	
triamterene & hydrochlorothiazide cap 37.5-25 mg (Dyazide)					REPATHA PUSHTRONEX SYSTEM - evolocumab subcutaneous soln cartridge/infusor 420 mg/3.5ml		•	•	
triamterene & hydrochlorothiazide tab 37.5-25 mg (Maxzide-25)					REPATHA SURECLICK - evolocumab subcutaneous soln auto-injector 140 mg/ml		•	•	
triamterene & hydrochlorothiazide tab 75-50 mg (Maxzide)					rosuvastatin calcium tab 5 mg (Crestor)				
<b>VASOPRESSORS</b>									
SYMJEPI - epinephrine soln prefilled syringe 0.15 mg/0.3ml (1:2000)									
SYMJEPI - epinephrine solution prefilled syringe 0.3 mg/0.3ml (1:1000)									
<b>ANTIHYPERLIPIDEMICS</b>									

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
<b>rosuvastatin calcium tab 10 mg (Crestor)</b>								
<b>rosuvastatin calcium tab 20 mg (Crestor)</b>								
<b>rosuvastatin calcium tab 40 mg (Crestor)</b>								
<b>simvastatin tab 5 mg (Zocor)</b>								
<b>simvastatin tab 10 mg (Zocor)</b>								
<b>simvastatin tab 20 mg (Zocor)</b>								
<b>simvastatin tab 40 mg (Zocor)</b>								
<b>simvastatin tab 80 mg (Zocor)</b>								
<b>CARDIOVASCULAR AGENTS - MISC.</b>								
ENTRESTO - sacubitril-valsartan tab 24-26 mg								
ENTRESTO - sacubitril-valsartan tab 49-51 mg								
ENTRESTO - sacubitril-valsartan tab 97-103 mg								
OPSUMIT - macitentan tab 10 mg	•	•	•					
TRACLEER - bosentan tab for oral susp 32 mg	•	•	•					
UPTRAVI - selexipag tab therapy pack 200 mcg (140) & 800 mcg (60)	•	•	•					
UPTRAVI - selexipag tab 200 mcg	•	•	•					
UPTRAVI - selexipag tab 400 mcg	•	•	•					
UPTRAVI - selexipag tab 600 mcg	•	•	•					
UPTRAVI - selexipag tab 800 mcg	•	•	•					
UPTRAVI - selexipag tab 1000 mcg	•	•	•					
UPTRAVI - selexipag tab 1200 mcg	•	•	•					
UPTRAVI - selexipag tab 1400 mcg	•	•	•					
UPTRAVI - selexipag tab 1600 mcg	•	•	•					
VYNDAMAX - tafamidis cap 61 mg	•	•	•					
VYNDAQEL - tafamidis meglumine (cardiac) cap 20 mg	•	•	•					
<b>RESPIRATORY AGENTS</b>								
<b>ANTIHISTAMINES</b>								
<b>promethazine hcl syrup 6.25 mg/5ml</b>								
<b>promethazine hcl tab 12.5 mg</b>								
<b>promethazine hcl tab 25 mg</b>								
<b>promethazine hcl tab 50 mg</b>								
<b>NASAL AGENTS - SYSTEMIC and TOPICAL</b>								
<b>azelastine hcl nasal spray 0.1% (137 mcg/spray)</b>						•		
<b>fluticasone propionate nasal susp 50 mcg/act</b>						•		
<b>COUGH/COLD/ALLERGY</b>								
<b>benzonatate cap 100 mg (Tessalon perles)</b>								
<b>benzonatate cap 200 mg</b>								
<b>hydrocodone w/ homatropine syrup 5-1.5 mg/5ml</b>						•		
<b>hydrocodone w/ homatropine tab 5-1.5 mg</b>						•		
<b>promethazine w/ codeine syrup 6.25-10 mg/5ml</b>						•		
<b>ANTIASTHMATIC and BRONCHODILATOR AGENTS</b>								
<b>ADVAIR DISKUS - fluticasone-salmeterol aer powder ba 100-50 mcg/dose</b>							•	
<b>ADVAIR DISKUS - fluticasone-salmeterol aer powder ba 250-50 mcg/dose</b>							•	
<b>ADVAIR DISKUS - fluticasone-salmeterol aer powder ba 500-50 mcg/dose</b>							•	
<b>ADVAIR HFA - fluticasone-salmeterol inhal aerosol 45-21 mcg/act</b>							•	
<b>ADVAIR HFA - fluticasone-salmeterol inhal aerosol 115-21 mcg/act</b>							•	
<b>ADVAIR HFA - fluticasone-salmeterol inhal aerosol 230-21 mcg/act</b>							•	

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
<b>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)</b>			•		<b>COMBIVENT RESPIMAT - ipratropium-albuterol inhal aerosol soln 20-100 mcg/act</b>			•	
<b>albuterol sulfate syrup 2 mg/5ml</b>					<b>DULERA - mometasone furoate-formoterol fumarate aerosol 50-5 mcg/act</b>			•	
ANORO ELLIPTA - umeclidinium-vilanterol aero powd ba 62.5-25 mcg/inh			•		<b>DULERA - mometasone furoate-formoterol fumarate aerosol 100-5 mcg/act</b>			•	
ARNUITY ELLIPTA - fluticasone furoate aerosol powder breath activ 50 mcg/act			•		<b>DULERA - mometasone furoate-formoterol fumarate aerosol 200-5 mcg/act</b>			•	
ARNUITY ELLIPTA - fluticasone furoate aerosol powder breath activ 100 mcg/act			•		<b>FLOVENT DISKUS - fluticasone propionate aer pow ba 50 mcg/blister</b>			•	
ARNUITY ELLIPTA - fluticasone furoate aerosol powder breath activ 200 mcg/act			•		<b>FLOVENT DISKUS - fluticasone propionate aer pow ba 100 mcg/blister</b>			•	
ASMANEX HFA - mometasone furoate inhal aerosol suspension 50 mcg/act			•		<b>FLOVENT DISKUS - fluticasone propionate aer pow ba 250 mcg/blister</b>			•	
ASMANEX HFA - mometasone furoate inhal aerosol suspension 100 mcg/act			•		<b>FLOVENT HFA - fluticasone propionate hfa inhal aero 44 mcg/act (50 valve)</b>			•	
ASMANEX HFA - mometasone furoate inhal aerosol suspension 200 mcg/act			•		<b>FLOVENT HFA - fluticasone propionate hfa inhal aer 110 mcg/act (125 valve)</b>			•	
ASMANEX TWISTHALER 120 ME - mometasone furoate inhal powd 220 mcg/inh (breath activated)			•		<b>FLOVENT HFA - fluticasone propionate hfa inhal aer 220 mcg/act (250 valve)</b>			•	
ASMANEX TWISTHALER 30 MET - mometasone furoate inhal powd 110 mcg/inh (breath activated)			•		<b>FLUTICASONE PROPIONATE/SA - fluticasone-salmeterol aer powder ba 55-14 mcg/act</b>				
ASMANEX TWISTHALER 30 MET - mometasone furoate inhal powd 220 mcg/inh (breath activated)			•		<b>FLUTICASONE PROPIONATE/SA - fluticasone-salmeterol aer powder ba 113-14 mcg/act</b>				
ASMANEX TWISTHALER 60 MET - mometasone furoate inhal powd 220 mcg/inh (breath activated)			•		<b>FLUTICASONE PROPIONATE/SA - fluticasone-salmeterol aer powder ba 232-14 mcg/act</b>				
BREO ELLIPTA - fluticasone furoate-vilanterol aero powd ba 100-25 mcg/inh			•		<b>INCRUSE ELLIPTA - umeclidinium br aero powd breath act 62.5 mcg/inh (base eq)</b>			•	
BREO ELLIPTA - fluticasone furoate-vilanterol aero powd ba 200-25 mcg/inh			•						

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<b>ipratropium bromide inhal soln 0.02%</b>			•		<b>SYMBICORT - budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act</b>			•	
<b>montelukast sodium chew tab 4 mg (base equiv) (Singulair)</b>					<b>SYMBICORT - budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act</b>			•	
<b>montelukast sodium chew tab 5 mg (base equiv) (Singulair)</b>					<b>TRELEGY ELLIPTA - fluticasone-umeclidinium-vilanterol aepb 100-62.5-25 mcg/inh</b>			•	
<b>montelukast sodium tab 10 mg (base equiv) (Singulair)</b>					<b>VENTOLIN HFA - albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</b>			•	
PROAIR HFA - albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)			•		<b>RESPIRATORY AGENTS - MISC.</b>				
PROAIR RESPICLICK - albuterol sulfate aer pow ba 108 mcg/act (90 mcg base equiv)			•		KALYDECO - ivacaftor tab 150 mg		•	•	•
QVAR REDIHALER - beclomethasone diprop hfa breath act inh aer 40 mcg/act			•		KALYDECO - ivacaftor packet 25 mg		•	•	•
QVAR REDIHALER - beclomethasone diprop hfa breath act inh aer 80 mcg/act			•		KALYDECO - ivacaftor packet 50 mg		•	•	•
SEREVENT DISKUS - salmeterol xinafoate aer pow ba 50 mcg/dose (base equiv)			•		KALYDECO - ivacaftor packet 75 mg		•	•	•
SPIRIVA HANDIHALER - tiotropium bromide monohydrate inhal cap 18 mcg (base equiv)			•		PULMOZYME - dornase alfa inhal soln 1 mg/ml		•		
SPIRIVA RESPIMAT - tiotropium bromide monohydrate inhal aerosol 1.25 mcg/act			•		SYMDEKO - tezacaftor-ivacaftor 50-75 mg & ivacaftor 75 mg tab tbpk		•	•	•
SPIRIVA RESPIMAT - tiotropium bromide monohydrate inhal aerosol 2.5 mcg/act			•		SYMDEKO - tezacaftor-ivacaftor 100-150 mg & ivacaftor 150 mg tab tbpk		•	•	•
STIOLTO RESPIMAT - tiotropium br olodaterol inhal aero soln 2.5-2.5 mcg/act			•		TRIKAFTA - elexacaf-tezacaf-ivacaf 100-50-75 mg &ivacaftor 150 mg tbpk		•	•	•
STRIVERDI RESPIMAT - olodaterol hcl inhal aerosol soln 2.5 mcg/act (base equiv)			•		<b>GASTROINTESTINAL AGENTS</b>				
<b>LAXATIVES</b>					<b>peg 3350-kcl-sod bicarb-nacl for soln 420 gm (Nulytely/flavor pack)</b>				
					<b>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm (Golytely)</b>				
<b>ULCER DRUGS</b>					<b>dicyclomine hcl cap 10 mg (Bentyl)</b>				
					<b>dicyclomine hcl tab 20 mg (Bentyl)</b>				
					<b>famotidine tab 40 mg (Pepcid)</b>				
					<b>misoprostol tab 100 mcg (Cytotec)</b>				

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
<b>misoprostol tab 200 mcg (Cytotec)</b>					CREON - pancrelipase (lip-prot-amyl) dr cap 24000-76000-120000 unit				
NEXIUM - esomeprazole magnesium for delayed release susp pack 2.5 mg			•		CREON - pancrelipase (lip-prot-amyl) dr cap 36000-114000-180000 unit				
NEXIUM - esomeprazole magnesium for delayed release susp packet 5 mg			•		ZENPEP - pancrelipase (lip-prot-amyl) dr cap 3000-10000-14000 unit				
NEXIUM - esomeprazole magnesium for delayed release susp packet 10 mg			•		ZENPEP - pancrelipase (lip-prot-amyl) dr cap 5000-17000-24000 unit				
NEXIUM - esomeprazole magnesium for delayed release susp packet 20 mg			•		ZENPEP - pancrelipase (lip-prot-amyl) dr cap 10000-32000-42000 unit				
NEXIUM - esomeprazole magnesium for delayed release susp packet 40 mg			•		ZENPEP - pancrelipase (lip-prot-amyl) dr cap 15000-47000-63000 unit				
<b>omeprazole cap delayed release 10 mg (Prilosec)</b>			•		ZENPEP - pancrelipase (lip-prot-amyl) dr cap 20000-63000-84000 unit				
<b>omeprazole cap delayed release 20 mg (Prilosec)</b>			•		ZENPEP - pancrelipase (lip-prot-amyl) dr cap 25000-79000-105000 unit				
<b>omeprazole cap delayed release 40 mg (Prilosec)</b>			•		ZENPEP - pancrelipase (lip-prot-amyl) dr cap 40000-126000-168000 unit				
<b>pantoprazole sodium ec tab 20 mg (base equiv) (Protonix)</b>			•		<b>GASTROINTESTINAL AGENTS- MISC.</b>				
<b>pantoprazole sodium ec tab 40 mg (base equiv) (Protonix)</b>			•		CHENODAL - chenodiol tab 250 mg	•			
<b>ANTIEMETICS</b>					metoclopramide hcl tab 5 mg (base equivalent) (Reglan)				
EMEND - aprepitant for oral susp 125 mg (125 mg/5ml)			•		metoclopramide hcl tab 10 mg (base equivalent) (Reglan)				
<b>ondansetron hcl tab 4 mg (Zofran)</b>			•		SYMPROIC - naldemedine tosylate tab 0.2 mg (base equivalent)		•	•	
<b>ondansetron hcl tab 8 mg (Zofran)</b>			•		TRULANCE - plecanatide tab 3 mg		•	•	
<b>ondansetron orally disintegrating tab 4 mg (Zofran odt)</b>			•		VELPHORO - sucroferric oxyhydroxide chew tab 500 mg				•
<b>ondansetron orally disintegrating tab 8 mg (Zofran odt)</b>			•		VIBERZI - eluxadoline tab 75 mg				•
<b>DIGESTIVE AIDS</b>					VIBERZI - eluxadoline tab 100 mg				•
CREON - pancrelipase (lip-prot-amyl) dr cap 3000-9500-15000 unit					<b>GENITOURINARY AGENTS</b>				
CREON - pancrelipase (lip-prot-amyl) dr cap 6000-19000-30000 unit					<b>URINARY ANTI-INFECTIVES</b>				
CREON - pancrelipase (lip-prot-amyl) dr cap 12000-38000-60000 unit					<b>nitrofurantoin monohydrate macrocrystalline cap 100 mg (Macrobid)</b>				

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
<b>URINARY ANTISPASMODICS</b>									
oxybutynin chloride syrup 5 mg/5ml					DIAZEPAM - diazepam oral soln 1 mg/ml				
oxybutynin chloride tab er 24hr 10 mg (Ditropan xl)					diazepam tab 2 mg (Valium)				
<b>VAGINAL PRODUCTS</b>									
CRINONE - progesterone vaginal gel 4%			•		diazepam tab 5 mg (Valium)				
CRINONE - progesterone vaginal gel 8%			•		diazepam tab 10 mg (Valium)				
ESTRING - estradiol vaginal ring 2 mg (7.5 mcg/24hrs)					hydroxyzine hcl syrup 10 mg/5ml				
<b>GENITOURINARY AGENTS - MISC.</b>									
alfuzosin hcl tab er 24hr 10 mg (Uroxatral)					hydroxyzine hcl tab 10 mg				
CYSTAGON - cysteamine bitartrate cap 50 mg	•				hydroxyzine hcl tab 25 mg				
CYSTAGON - cysteamine bitartrate cap 150 mg	•				hydroxyzine hcl tab 50 mg				
dutasteride cap 0.5 mg (Avodart)					hydroxyzine pamoate cap 25 mg (Vistaril)				
finasteride tab 5 mg (Proscar)					hydroxyzine pamoate cap 50 mg (Vistaril)				
tamsulosin hcl cap 0.4 mg (Flomax)					lorazepam tab 0.5 mg (Ativan)		•		
<b>CENTRAL NERVOUS SYSTEM DRUGS</b>									
<b>ANTIANXIETY AGENTS</b>									
alprazolam tab er 24hr 0.5 mg (Xanax xr)					lorazepam tab 1 mg (Ativan)		•		
alprazolam tab 0.25 mg (Xanax)					lorazepam tab 2 mg (Ativan)		•		
alprazolam tab 0.5 mg (Xanax)					<b>ANTIDEPRESSANTS</b>				
alprazolam tab 1 mg (Xanax)					amitriptyline hcl tab 10 mg				
alprazolam tab 2 mg (Xanax)					amitriptyline hcl tab 25 mg				
buspirone hcl tab 5 mg					amitriptyline hcl tab 50 mg				
buspirone hcl tab 10 mg					bupropion hcl tab er 12hr 100 mg (Wellbutrin sr)				
buspirone hcl tab 15 mg					bupropion hcl tab er 12hr 150 mg (Wellbutrin sr)				
chlordiazepoxide hcl cap 5 mg					bupropion hcl tab er 12hr 200 mg (Wellbutrin sr)				
chlordiazepoxide hcl cap 10 mg					bupropion hcl tab er 24hr 150 mg (Wellbutrin xl)				
chlordiazepoxide hcl cap 25 mg					citalopram hydrobromide tab 10 mg (base equiv) (Celexa)				

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
<b>doxepin hcl conc 10 mg/ml</b>					<b>trazodone hcl tab 50 mg</b>				
<b>duloxetine hcl enteric coated pellets cap 20 mg (base eq) (Cymbalta)</b>			•		<b>trazodone hcl tab 100 mg</b>				
<b>duloxetine hcl enteric coated pellets cap 30 mg (base eq) (Cymbalta)</b>			•		<b>trazodone hcl tab 150 mg</b>				
<b>duloxetine hcl enteric coated pellets cap 60 mg (base eq) (Cymbalta)</b>			•		<b>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent) (Effexor xr)</b>				
<b>escitalopram oxalate tab 5 mg (base equiv) (Lexapro)</b>					<b>venlafaxine hcl cap er 24hr 75 mg (base equivalent) (Effexor xr)</b>				
<b>escitalopram oxalate tab 10 mg (base equiv) (Lexapro)</b>					<b>venlafaxine hcl cap er 24hr 150 mg (base equivalent) (Effexor xr)</b>				
<b>escitalopram oxalate tab 20 mg (base equiv) (Lexapro)</b>					<b>venlafaxine hcl tab 25 mg (base equivalent)</b>				
<b>fluoxetine hcl cap 10 mg (Prozac)</b>					<b>venlafaxine hcl tab 37.5 mg (base equivalent)</b>				
<b>fluoxetine hcl cap 20 mg (Prozac)</b>					<b>venlafaxine hcl tab 50 mg (base equivalent)</b>				
<b>fluoxetine hcl cap 40 mg (Prozac)</b>					<b>venlafaxine hcl tab 75 mg (base equivalent)</b>				
<b>fluoxetine hcl solution 20 mg/5ml</b>					<b>venlafaxine hcl tab 100 mg (base equivalent)</b>				
<b>imipramine hcl tab 10 mg (Tofranil)</b>					<b>ANTIPSYCHOTICS</b>				
<b>imipramine hcl tab 25 mg (Tofranil)</b>					<b>FLUPHENAZINE HCL - fluphenazine hcl oral conc 5 mg/ml</b>				
<b>imipramine hcl tab 50 mg (Tofranil)</b>					<b>FLUPHENAZINE HYDROCHLORID - fluphenazine hcl elixir 2.5 mg/5ml</b>				
<b>mirtazapine tab 15 mg (Remeron)</b>					<b>haloperidol tab 0.5 mg</b>				
<b>mirtazapine tab 30 mg (Remeron)</b>					<b>haloperidol tab 1 mg</b>				
<b>mirtazapine tab 45 mg (Remeron)</b>					<b>haloperidol tab 2 mg</b>				
<b>nortriptyline hcl cap 10 mg (Pamelor)</b>					<b>lithium carbonate cap 150 mg (Lithium carbonate)</b>				
<b>nortriptyline hcl cap 25 mg (Pamelor)</b>					<b>lithium carbonate cap 300 mg</b>				
<b>nortriptyline hcl cap 50 mg (Pamelor)</b>					<b>lithium carbonate cap 600 mg (Lithium carbonate)</b>				
<b>nortriptyline hcl cap 75 mg (Pamelor)</b>					<b>lithium carbonate tab 300 mg</b>				
<b>paroxetine hcl tab 10 mg (Paxil)</b>					<b>olanzapine tab 2.5 mg (Zyprexa)</b>		•		
<b>paroxetine hcl tab 20 mg (Paxil)</b>					<b>olanzapine tab 5 mg (Zyprexa)</b>		•		
<b>paroxetine hcl tab 30 mg (Paxil)</b>					<b>olanzapine tab 7.5 mg (Zyprexa)</b>		•		
<b>paroxetine hcl tab 40 mg (Paxil)</b>									
<b>sertraline hcl tab 25 mg (Zoloft)</b>									
<b>sertraline hcl tab 50 mg (Zoloft)</b>									
<b>sertraline hcl tab 100 mg (Zoloft)</b>									

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<b>olanzapine tab 10 mg (Zyprexa)</b>			•		<b>phenobarbital tab 60 mg</b>				
<b>olanzapine tab 15 mg (Zyprexa)</b>			•		<b>phenobarbital tab 100 mg</b>				
<b>olanzapine tab 20 mg (Zyprexa)</b>			•		<b>temazepam cap 15 mg (Restoril)</b>				
<b>prochlorperazine maleate tab 5 mg (base equivalent) (Compazine)</b>					<b>temazepam cap 30 mg (Restoril)</b>				
<b>prochlorperazine maleate tab 10 mg (base equivalent) (Compazine)</b>					<b>zaleplon cap 5 mg (Sonata)</b>			•	
<b>quetiapine fumarate tab 25 mg (Seroquel)</b>			•		<b>zaleplon cap 10 mg (Sonata)</b>			•	
<b>quetiapine fumarate tab 50 mg (Seroquel)</b>			•		<b>zolpidem tartrate tab 5 mg (Ambien)</b>			•	
<b>quetiapine fumarate tab 100 mg (Seroquel)</b>			•		<b>zolpidem tartrate tab 10 mg (Ambien)</b>			•	
<b>quetiapine fumarate tab 200 mg (Seroquel)</b>			•		<b>ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS</b>				
<b>quetiapine fumarate tab 300 mg (Seroquel)</b>			•		<b>phentermine hcl cap 15 mg</b>				
<b>quetiapine fumarate tab 400 mg (Seroquel)</b>			•		<b>phentermine hcl cap 30 mg</b>				
<b>risperidone tab 0.25 mg (Risperdal)</b>			•		<b>phentermine hcl cap 37.5 mg (Adipex-p)</b>				
<b>risperidone tab 0.5 mg (Risperdal)</b>			•		<b>phentermine hcl tab 37.5 mg (Adipex-p)</b>				
<b>risperidone tab 1 mg (Risperdal)</b>			•		<b>SUNOSI - solriamfetol hcl tab 75 mg (base equiv)</b>		•	•	
<b>risperidone tab 2 mg (Risperdal)</b>			•		<b>SUNOSI - solriamfetol hcl tab 150 mg (base equiv)</b>		•	•	
<b>risperidone tab 3 mg (Risperdal)</b>			•		<b>VYVANSE - lisdexamfetamine dimesylate cap 10 mg</b>			•	
<b>risperidone tab 4 mg (Risperdal)</b>			•		<b>VYVANSE - lisdexamfetamine dimesylate cap 20 mg</b>			•	
<b>HYPNOTICS</b>					<b>VYVANSE - lisdexamfetamine dimesylate cap 30 mg</b>			•	
<b>BELSOMRA - suvorexant tab 5 mg</b>			•	•	<b>VYVANSE - lisdexamfetamine dimesylate cap 40 mg</b>			•	
<b>BELSOMRA - suvorexant tab 10 mg</b>			•	•	<b>VYVANSE - lisdexamfetamine dimesylate cap 50 mg</b>			•	
<b>BELSOMRA - suvorexant tab 15 mg</b>			•	•	<b>VYVANSE - lisdexamfetamine dimesylate cap 60 mg</b>			•	
<b>BELSOMRA - suvorexant tab 20 mg</b>			•	•	<b>VYVANSE - lisdexamfetamine dimesylate cap 70 mg</b>			•	
<b>eszopiclone tab 1 mg (Lunesta)</b>			•		<b>VYVANSE - lisdexamfetamine dimesylate chew tab 10 mg</b>			•	
<b>eszopiclone tab 2 mg (Lunesta)</b>			•						
<b>eszopiclone tab 3 mg (Lunesta)</b>			•						
<b>phenobarbital tab 15 mg</b>									
<b>phenobarbital tab 30 mg</b>									

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VYVANSE - lisdexamfetamine dimesylate chew tab 20 mg			•		<b>donepezil hydrochloride tab 10 mg (Aricept)</b>				
VYVANSE - lisdexamfetamine dimesylate chew tab 30 mg			•		GILENYA - fingolimod hcl cap 0.5 mg (base equiv)		•	•	
VYVANSE - lisdexamfetamine dimesylate chew tab 40 mg			•		MAVENCLAD - cladribine tab therapy pack 10 mg (4 tabs)		•	•	
VYVANSE - lisdexamfetamine dimesylate chew tab 50 mg			•		MAVENCLAD - cladribine tab therapy pack 10 mg (5 tabs)		•	•	
VYVANSE - lisdexamfetamine dimesylate chew tab 60 mg			•		MAVENCLAD - cladribine tab therapy pack 10 mg (6 tabs)		•	•	
<b>PSYCHOTHERAPEUTIC and NEUROLOGICAL AGENTS - MISC.</b>					MAVENCLAD - cladribine tab therapy pack 10 mg (7 tabs)		•	•	
AUBAGIO - teriflunomide tab 7 mg	•		•		MAVENCLAD - cladribine tab therapy pack 10 mg (8 tabs)		•	•	
AUBAGIO - teriflunomide tab 14 mg	•		•		MAVENCLAD - cladribine tab therapy pack 10 mg (9 tabs)		•	•	
AVONEX - interferon beta-1a im prefilled syringe kit 30 mcg/0.5ml	•		•		MAVENCLAD - cladribine tab therapy pack 10 mg (10 tabs)		•	•	
AVONEX PEN - interferon beta-1a im auto-injector kit 30 mcg/0.5ml	•		•		MAYZENT - siponimod fumarate tab 0.25 mg (base equiv)		•	•	
BETASERON - interferon beta-1b for inj kit 0.3 mg	•		•		MAYZENT - siponimod fumarate tab 2 mg (base equiv)		•	•	
CHANTIX - varenicline tartrate tab 0.5 mg (base equiv)					<b>memantine hcl tab 5 mg (Namenda)</b>				
CHANTIX - varenicline tartrate tab 1 mg (base equiv)					<b>memantine hcl tab 10 mg (Namenda)</b>				
CHANTIX CONTINUING MONTH - varenicline tartrate tab 1 mg (base equiv)					NICOTROL INHALER - nicotine inhaler system 10 mg (4 mg delivered)				
COPAXONE - glatiramer acetate soln prefilled syringe 20 mg/ml	•		•		NICOTROL NS - nicotine nasal spray 10 mg/ml (0.5 mg/spray)				
COPAXONE - glatiramer acetate soln prefilled syringe 40 mg/ml	•		•		PLEGRIDY - peginterferon beta-1a soln pen-injector 125 mcg/0.5ml		•	•	
<b>donepezil hydrochloride orally disintegrating tab 5 mg</b>					PLEGRIDY - peginterferon beta-1a soln prefilled syringe 125 mcg/0.5ml		•	•	
<b>donepezil hydrochloride orally disintegrating tab 10 mg</b>					PLEGRIDY STARTER PACK - peginterferon beta-1a soln pen-inj 63 & 94 mcg/0.5ml pack		•	•	
<b>donepezil hydrochloride tab 5 mg (Aricept)</b>									

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PLEGRIDY STARTER PACK - peginterferon beta-1a soln pref syr 63 & 94 mcg/0.5ml pack	•		•		<b>aspirin tab delayed release 81 mg</b>				
REBIF - interferon beta-1a soln pref syr 22 mcg/0.5ml (12mu/ml)	•		•		<b>ANALGESICS - NARCOTIC</b>				
REBIF - interferon beta-1a soln pref syr 44 mcg/0.5ml (24mu/ml)	•		•		<b>acetaminophen w/ codeine soln 120-12 mg/5ml</b>	•			
REBIF REBIDOSE - interferon beta-1a soln auto-inj 22 mcg/0.5ml (12mu/ml)	•		•		<b>acetaminophen w/ codeine tab 300-15 mg (Tylenol/codeine)</b>	•			
REBIF REBIDOSE - interferon beta-1a soln auto-inj 44 mcg/0.5ml (24mu/ml)	•		•		<b>acetaminophen w/ codeine tab 300-30 mg (Tylenol/codeine #3)</b>	•			
REBIF REBIDOSE TITRATION - interferon beta-1a auto-inj 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml	•		•		<b>BELBUCA - buprenorphine hcl buccal film 75 mcg (base equivalent)</b>	•			
REBIF TITRATION PACK - interferon beta-1a pref syr 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml	•		•		<b>BELBUCA - buprenorphine hcl buccal film 150 mcg (base equivalent)</b>	•			
TECFIDERA - dimethyl fumarate capsule delayed release 120 mg	•		•		<b>BELBUCA - buprenorphine hcl buccal film 300 mcg (base equivalent)</b>	•			
TECFIDERA - dimethyl fumarate capsule delayed release 240 mg	•		•		<b>BELBUCA - buprenorphine hcl buccal film 450 mcg (base equivalent)</b>	•			
TECFIDERA STARTER PACK - dimethyl fumarate capsule dr starter pack 120 mg & 240 mg	•		•		<b>BELBUCA - buprenorphine hcl buccal film 600 mcg (base equivalent)</b>	•			
VUMERITY - diroximel fumarate capsule dr starter bottle 231 mg	•		•		<b>BELBUCA - buprenorphine hcl buccal film 750 mcg (base equivalent)</b>	•			
VUMERITY - diroximel fumarate capsule delayed release 231 mg	•		•		<b>BELBUCA - buprenorphine hcl buccal film 900 mcg (base equivalent)</b>	•			
ZEPOSIA - ozanimod hcl cap 0.92 mg	•		•		<b>hydrocodone-acetaminophen tab 5-325 mg (Norco)</b>	•			
ZEPOSIA STARTER KIT - ozanimod cap pack 4 x 0.23 mg & 3 x 0.46 mg & 30 x 0.92 mg	•		•		<b>hydrocodone-acetaminophen tab 7.5-325 mg (Norco)</b>	•			
ZEPOSIA 7-DAY STARTER PAC - ozanimod cap pack 4 x 0.23 mg & 3 x 0.46 mg	•		•		<b>hydromorphone hcl tab 2 mg (Dilaudid)</b>	•			
<b>ANALGESICS AND ANESTHETICS</b>					<b>hydromorphone hcl tab 4 mg (Dilaudid)</b>	•			
<b>ANALGESICS - NON-NARCOTIC</b>					<b>methadone hcl tab 5 mg (Dolophine hcl)</b>	•			
aspirin chew tab 81 mg					<b>methadone hcl tab 10 mg (Dolophine)</b>	•			
					<b>morphine sulfate oral soln 10 mg/5ml</b>	•			
					<b>morphine sulfate tab er 15 mg (Ms contin)</b>	•	•		
					<b>oxycodone hcl tab 5 mg (Roxicodone)</b>	•			

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<b>oxycodone w/ acetaminophen tab 5-325 mg (Percocet)</b>		•			<b>flurbiprofen tab 50 mg</b>		•		
<b>tramadol hcl tab 50 mg (Ultram)</b>		•	•		HUMIRA - adalimumab prefilled syringe kit 10 mg/0.1ml		•	•	•
<b>tramadol-acetaminophen tab 37.5-325 mg (Ulacet)</b>		•			HUMIRA - adalimumab prefilled syringe kit 10 mg/0.2ml		•	•	•
XTAMPZA ER - oxycodone cap er 12hr abuse-deterrant 9 mg		•	•		HUMIRA - adalimumab prefilled syringe kit 20 mg/0.2ml		•	•	•
XTAMPZA ER - oxycodone cap er 12hr abuse-deterrant 13.5 mg		•	•		HUMIRA - adalimumab prefilled syringe kit 20 mg/0.4ml		•	•	•
XTAMPZA ER - oxycodone cap er 12hr abuse-deterrant 18 mg		•	•		HUMIRA - adalimumab prefilled syringe kit 40 mg/0.8ml		•	•	
XTAMPZA ER - oxycodone cap er 12hr abuse-deterrant 27 mg		•	•		HUMIRA - adalimumab prefilled syringe kit 40 mg/0.4ml		•	•	•
XTAMPZA ER - oxycodone cap er 12hr abuse-deterrant 36 mg		•	•		HUMIRA PEDIATRIC CROHNS D - adalimumab prefilled syringe kit 80 mg/0.8ml		•	•	•
<b>ANALGESICS - ANTI-INFLAMMATORY</b>					HUMIRA PEDIATRIC CROHNS D - adalimumab prefilled syringe kit 80 mg/0.8ml & 40 mg/0.4ml		•	•	•
ACTEMRA - tocilizumab subcutaneous soln prefilled syringe 162 mg/0.9ml	•	•	•		HUMIRA PEN - adalimumab pen-injector kit 40 mg/0.8ml		•	•	•
ACTEMRA ACTPEN - tocilizumab subcutaneous soln auto-injector 162 mg/0.9ml	•	•	•		HUMIRA PEN - adalimumab pen-injector kit 40 mg/0.4ml		•	•	•
<b>diclofenac sodium tab delayed release 50 mg</b>					HUMIRA PEN-CD/UC/HS START - adalimumab pen-injector kit 40 mg/0.8ml		•	•	•
<b>diclofenac sodium tab delayed release 75 mg</b>					HUMIRA PEN-CD/UC/HS START - adalimumab pen-injector kit 80 mg/0.8ml		•	•	•
ENBREL - etanercept for subcutaneous inj 25 mg	•	•	•		HUMIRA PEN-PS/UV STARTER - adalimumab pen-injector kit 40 mg/0.8ml		•	•	•
ENBREL - etanercept subcutaneous soln prefilled syringe 25 mg/0.5ml	•	•	•		HUMIRA PEN-PS/UV STARTER - adalimumab pen-injector kit 80 mg/0.8ml & 40 mg/0.4ml		•	•	•
ENBREL - etanercept subcutaneous soln prefilled syringe 50 mg/ml	•	•	•		<b>ibuprofen tab 400 mg</b>				
ENBREL MINI - etanercept subcutaneous solution cartridge 50 mg/ml	•	•	•		<b>ibuprofen tab 600 mg</b>				
ENBREL SURECLICK - etanercept subcutaneous solution auto-injector 50 mg/ml	•	•	•		<b>ibuprofen tab 800 mg</b>				

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<b>indomethacin cap 25 mg</b>					<b>AIMOVIG - erenumab-aooe</b> subcutaneous soln auto-injector 140 mg/ml		•	•	
<b>indomethacin cap 50 mg</b>					<b>EMGALITY - galcanezumab-gnlm</b> subcutaneous soln auto-injector 120 mg/ml		•	•	
<b>meloxicam tab 7.5 mg (Mobic)</b>					<b>EMGALITY - galcanezumab-gnlm</b> subcutaneous soln prefilled syr 100 mg/ml		•	•	
<b>meloxicam tab 15 mg (Mobic)</b>					<b>EMGALITY - galcanezumab-gnlm</b> subcutaneous soln prefilled syr 120 mg/ml		•	•	
<b>nabumetone tab 500 mg</b>					<b>MIGRALAN - dihydroergotamine mesylate nasal spray 4 mg/ml</b>		•		
<b>nabumetone tab 750 mg</b>					<b>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</b> (Maxalt-mlt)		•		
<b>naproxen tab ec 375 mg (Ec-naprosyn)</b>					<b>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</b> (Maxalt-mlt)		•		
<b>naproxen tab ec 500 mg (Ec-naprosyn)</b>					<b>rizatriptan benzoate tab 5 mg (base equivalent) (Maxalt)</b>		•		
<b>naproxen tab 250 mg (Naprosyn)</b>					<b>rizatriptan benzoate tab 10 mg (base equivalent) (Maxalt)</b>		•		
<b>naproxen tab 375 mg (Naprosyn)</b>					<b>sumatriptan succinate tab 25 mg (Imitrex)</b>		•		
<b>naproxen tab 500 mg (Naprosyn)</b>					<b>sumatriptan succinate tab 50 mg (Imitrex)</b>		•		
OTEZLA - apremilast tab starter therapy pack 10 mg & 20 mg & 30 mg	•	•	•		<b>sumatriptan succinate tab 100 mg (Imitrex)</b>		•		
OTEZLA - apremilast tab 30 mg	•	•	•		<b>GOUT AGENTS</b>				
RINVOQ - upadacitinib tab er 24hr 15 mg	•	•	•		<b>allopurinol tab 100 mg (Zyloprim)</b>				
SIMPONI - golimumab subcutaneous soln auto-injector 100 mg/ml	•	•	•		<b>allopurinol tab 300 mg (Zyloprim)</b>				
SIMPONI - golimumab subcutaneous soln prefilled syringe 100 mg/ml	•	•	•		<b>MITIGARE - colchicine cap 0.6 mg</b>				
<b>sulindac tab 150 mg</b>					<b>NEUROMUSCULAR DRUGS</b>				
<b>sulindac tab 200 mg</b>					<b>ANTICONVULSANTS</b>				
XELJANZ - tofacitinib citrate tab 5 mg (base equivalent)	•	•	•		<b>CELONTIN - methsuximide cap 300 mg</b>				
XELJANZ - tofacitinib citrate tab 10 mg (base equivalent)	•	•	•						
XELJANZ XR - tofacitinib citrate tab er 24hr 11 mg (base equivalent)	•	•	•						
XELJANZ XR - tofacitinib citrate tab er 24hr 22 mg (base equivalent)	•	•	•						
<b>MIGRAINE PRODUCTS</b>									
AIMOVIG - erenumab-aooe subcutaneous soln auto-injector 70 mg/ml		•	•						

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<b>clonazepam tab 0.5 mg</b> (Klonopin)					<b>topiramate tab 100 mg</b> (Topamax)				
<b>clonazepam tab 1 mg</b> (Klonopin)					<b>topiramate tab 200 mg</b> (Topamax)				
<b>clonazepam tab 2 mg</b> (Klonopin)					<b>zonisamide cap 50 mg</b>				
DASTAT ACUDIAL - diazepam rectal gel delivery system 10 mg					<b>ANTIPARKINSON AGENTS</b>				
DASTAT ACUDIAL - diazepam rectal gel delivery system 20 mg					<b>amantadine hcl syrup 50 mg/5ml</b>				
DASTAT PEDIATRIC - diazepam rectal gel delivery system 2.5 mg					<b>benztropine mesylate tab 0.5 mg</b>				
DILANTIN - phenytoin sodium extended cap 30 mg					<b>benztropine mesylate tab 1 mg</b>				
<b>divalproex sodium tab delayed release 125 mg</b> (Depakote)					<b>benztropine mesylate tab 2 mg</b>				
<b>divalproex sodium tab delayed release 250 mg</b> (Depakote)					<b>carbidopa &amp; levodopa tab 10-100 mg</b> (Sinemet)				
<b>divalproex sodium tab delayed release 500 mg</b> (Depakote)					<b>carbidopa &amp; levodopa tab 25-100 mg</b> (Sinemet)				
EPIDIOLEX - cannabidiol soln 100 mg/ml		•			<b>INBRIJA - levodopa inhal powder cap 42 mg</b>		•		
<b> gabapentin cap 100 mg</b> (Neurontin)					<b>pramipexole dihydrochloride tab 0.125 mg</b> (Mirapex)				
<b> gabapentin cap 300 mg</b> (Neurontin)					<b>pramipexole dihydrochloride tab 0.25 mg</b> (Mirapex)				
<b> gabapentin cap 400 mg</b> (Neurontin)					<b>pramipexole dihydrochloride tab 0.5 mg</b> (Mirapex)				
<b> gabapentin tab 600 mg</b> (Neurontin)					<b>pramipexole dihydrochloride tab 0.75 mg</b> (Mirapex)				
<b> gabapentin tab 800 mg</b> (Neurontin)					<b>pramipexole dihydrochloride tab 1 mg</b> (Mirapex)				
<b> lamotrigine tab 25 mg</b> (Lamictal)					<b>pramipexole dihydrochloride tab 1.5 mg</b> (Mirapex)				
<b> lamotrigine tab 100 mg</b> (Lamictal)					<b>ropinirole hydrochloride tab 0.25 mg</b> (Requip)				
<b> lamotrigine tab 150 mg</b> (Lamictal)					<b>ropinirole hydrochloride tab 0.5 mg</b> (Requip)				
<b> lamotrigine tab 200 mg</b> (Lamictal)					<b>ropinirole hydrochloride tab 1 mg</b> (Requip)				
<b> levetiracetam tab 250 mg</b> (Keppra)					<b>ropinirole hydrochloride tab 2 mg</b> (Requip)				
<b> levetiracetam tab 500 mg</b> (Keppra)					<b>ropinirole hydrochloride tab 3 mg</b> (Requip)				
<b> oxcarbazepine tab 150 mg</b> (Trileptal)									
<b> primidone tab 50 mg</b> (Mysoline)									
<b> primidone tab 250 mg</b> (Mysoline)									
<b> topiramate tab 25 mg</b> (Topamax)									
<b> topiramate tab 50 mg</b> (Topamax)									

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<b>ropinirole hydrochloride tab 4 mg (Requip)</b>					SE-NATAL 19 - prenatal vit w/ dss-fe fumarate-fa tab 29-1 mg				
<b>ropinirole hydrochloride tab 5 mg (Requip)</b>					<b>MINERALS and ELECTROLYTES</b>				
<b>trihexyphenidyl hcl tab 2 mg</b>					<b>potassium chloride microencapsulated crys er tab 10 meq</b>				
<b>trihexyphenidyl hcl tab 5 mg</b>					<b>potassium chloride microencapsulated crys er tab 20 meq</b>				
<b>MUSCULOSKELETAL THERAPY AGENTS</b>					<b>potassium chloride tab er 8 meq (600 mg)</b>				
<b>baclofen tab 10 mg</b>					<b>potassium chloride tab er 10 meq (K-tab)</b>				
<b>cyclobenzaprine hcl tab 5 mg</b>					<b>HEMATOLOGICAL AGENTS</b>				
<b>cyclobenzaprine hcl tab 10 mg</b>					<b>HEMATOPOIETIC AGENTS</b>				
<b>methocarbamol tab 500 mg (Robaxin)</b>					ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 10 mcg/0.4ml	•	•		
<b>methocarbamol tab 750 mg (Robaxin-750)</b>					ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 25 mcg/0.42ml	•	•		
<b>orphenadrine citrate tab er 12hr 100 mg</b>					ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 40 mcg/0.4ml	•	•		
<b>tizanidine hcl tab 2 mg (base equivalent)</b>			•		ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 60 mcg/0.3ml	•	•		
<b>tizanidine hcl tab 4 mg (base equivalent) (Zanaflex)</b>		•			ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 100 mcg/0.5ml	•	•		
<b>NUTRITIONAL PRODUCTS</b>									
<b>VITAMINS</b>									
<b>ergocalciferol cap 1.25 mg (50000 unit) (Drisdol)</b>					ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 150 mcg/0.3ml	•	•		
<b>MULTIVITAMINS</b>									
KOSHER PRENATAL PLUS IRON - prenatal vit w/ iron carbonyl-fa tab 30-1 mg					ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 200 mcg/0.4ml	•	•		
PRENATAL VITAMINS PLUS LO - prenatal vit w/ fe fumarate-fa tab 27-1 mg					ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 300 mcg/0.6ml	•	•		
PRENATAL 19 - prenatal vit w/ fe fumarate-fa chew tab 29-1 mg									
PRENATAL 19 - prenatal vit w/ dss-fe fumarate-fa tab 29-1 mg									
SE-NATAL 19 - prenatal vit w/ fe fumarate-fa chew tab 29-1 mg									

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 500 mcg/ml	•	•			GRANIX - tbo-filgrastim soln prefilled syringe 300 mcg/0.5ml	•			
ARANESP ALBUMIN FREE - darbepoetin alfa soln inj 25 mcg/ml	•	•			GRANIX - tbo-filgrastim soln prefilled syringe 480 mcg/0.8ml	•			
ARANESP ALBUMIN FREE - darbepoetin alfa soln inj 40 mcg/ml	•	•			GRANIX - tbo-filgrastim subcutaneous inj 300 mcg/ml	•			
ARANESP ALBUMIN FREE - darbepoetin alfa soln inj 60 mcg/ml	•	•			GRANIX - tbo-filgrastim subcutaneous inj 480 mcg/1.6ml (300 mcg/ml)	•			
ARANESP ALBUMIN FREE - darbepoetin alfa soln inj 100 mcg/ml	•	•			NEULASTA - pegfilgrastim soln prefilled syringe 6 mg/0.6ml	•			
ARANESP ALBUMIN FREE - darbepoetin alfa soln inj 200 mcg/ml	•	•			NEULASTA ONPRO KIT - pegfilgrastim soln prefilled syringe kit 6 mg/0.6ml	•			
ARANESP ALBUMIN FREE - darbepoetin alfa soln inj 300 mcg/ml	•	•			NEUPOGEN - filgrastim soln prefilled syringe 300 mcg/0.5ml	•			
<b>carbonyl iron susp 15 mg/1.25ml (elemental iron)</b>					NEUPOGEN - filgrastim soln prefilled syringe 480 mcg/0.8ml (600 mcg/ml)	•			
<b>cyanocobalamin inj 1000 mcg/ml</b>					NEUPOGEN - filgrastim inj 300 mcg/ml	•			
DROXIA - hydroxyurea cap 200 mg					NEUPOGEN - filgrastim inj 480 mcg/1.6ml (300 mcg/ml)	•			
DROXIA - hydroxyurea cap 300 mg					NIVESTYM - filgrastim-aafi soln prefilled syringe 300 mcg/0.5ml	•			
DROXIA - hydroxyurea cap 400 mg					NIVESTYM - filgrastim-aafi soln prefilled syringe 480 mcg/0.8ml	•			
EPOGEN - epoetin alfa inj 2000 unit/ml	•	•			NIVESTYM - filgrastim-aafi inj 300 mcg/ml	•			
EPOGEN - epoetin alfa inj 3000 unit/ml	•	•			NIVESTYM - filgrastim-aafi inj 480 mcg/1.6ml (300 mcg/ml)	•			
EPOGEN - epoetin alfa inj 4000 unit/ml	•	•			PROCRT - epoetin alfa inj 2000 unit/ml	•	•		
EPOGEN - epoetin alfa inj 10000 unit/ml	•	•			PROCRT - epoetin alfa inj 3000 unit/ml	•	•		
EPOGEN - epoetin alfa inj 20000 unit/ml	•	•			PROCRT - epoetin alfa inj 4000 unit/ml	•	•		
<b>ferrous sulfate elixir 220 mg/5ml (44 mg/5ml elemental fe)</b>					PROCRT - epoetin alfa inj 10000 unit/ml	•			
<b>ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe)</b>					PROCRT - epoetin alfa inj 20000 unit/ml	•	•		
<b>folic acid cap 0.8 mg</b>					PROCRT - epoetin alfa inj 40000 unit/ml	•	•		
<b>folic acid tab 400 mcg</b>									
<b>folic acid tab 800 mcg</b>									
<b>folic acid tab 1 mg</b>									
FULPHILA - pegfilgrastim-jmdb soln prefilled syringe 6 mg/0.6ml	•								

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
RETACRIT - epoetin alfa-epbx inj 2000 unit/ml	•	•			XARELTO - rivaroxaban tab 10 mg			•	
RETACRIT - epoetin alfa-epbx inj 3000 unit/ml	•	•			XARELTO - rivaroxaban tab 15 mg			•	
RETACRIT - epoetin alfa-epbx inj 4000 unit/ml	•	•			XARELTO - rivaroxaban tab 20 mg			•	
RETACRIT - epoetin alfa-epbx inj 10000 unit/ml	•	•			XARELTO STARTER PACK - rivaroxaban tab starter therapy pack 15 mg & 20 mg			•	
RETACRIT - epoetin alfa-epbx inj 40000 unit/ml	•	•			<b>HEMATOLOGICAL AGENTS - MISC.</b>				
UDENYCA - pegfilgrastim-cbqv soln prefilled syringe 6 mg/0.6ml		•			ADVATE - antihemophilic factor rahf-pfm for inj 250 unit	•			
ZARXIO - filgrastim-sndz soln prefilled syringe 300 mcg/0.5ml	•				ADVATE - antihemophilic factor rahf-pfm for inj 500 unit	•			
ZARXIO - filgrastim-sndz soln prefilled syringe 480 mcg/0.8ml	•				ADVATE - antihemophilic factor rahf-pfm for inj 1000 unit	•			
ZIEXTENZO - pegfilgrastim-bmez soln prefilled syringe 6 mg/0.6ml	•				ADVATE - antihemophilic factor rahf-pfm for inj 1500 unit	•			
<b>ANTICOAGULANTS</b>					ADVATE - antihemophilic factor rahf-pfm for inj 2000 unit	•			
ELIQUIS - apixaban tab 2.5 mg			•		ADVATE - antihemophilic factor rahf-pfm for inj 3000 unit	•			
ELIQUIS - apixaban tab 5 mg			•		ADVATE - antihemophilic factor rahf-pfm for inj 4000 unit	•			
ELIQUIS STARTER PACK - apixaban tab 5 mg			•		ADYNOVATE - antihemophilic factor recomb pegylated for inj 250 unit	•	•	•	
<b>warfarin sodium tab 1 mg</b> (Coumadin)					ADYNOVATE - antihemophilic factor recomb pegylated for inj 500 unit	•	•	•	
<b>warfarin sodium tab 2 mg</b> (Coumadin)					ADYNOVATE - antihemophilic factor recomb pegylated for inj 750 unit	•	•	•	
<b>warfarin sodium tab 2.5 mg</b> (Coumadin)					ADYNOVATE - antihemophilic factor recomb pegylated for inj 1000 unit	•	•	•	
<b>warfarin sodium tab 3 mg</b> (Coumadin)					ADYNOVATE - antihemophilic factor recomb pegylated for inj 1500 unit	•	•	•	
<b>warfarin sodium tab 4 mg</b> (Coumadin)					ADYNOVATE - antihemophilic factor recomb pegylated for inj 2000 unit	•	•	•	
<b>warfarin sodium tab 5 mg</b> (Coumadin)					ADYNOVATE - antihemophilic factor recomb pegylated for inj 3000 unit	•	•	•	
<b>warfarin sodium tab 6 mg</b> (Coumadin)					AFSTYLA - antihemophilic fact rcmb single chain for inj kit 250 unit	•	•	•	
<b>warfarin sodium tab 7.5 mg</b> (Coumadin)									
<b>warfarin sodium tab 10 mg</b> (Coumadin)									
XARELTO - rivaroxaban tab 2.5 mg			•						

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
AFSTYLA - antihemophilic fact rcmb single chain for inj kit 500 unit	•	•	•		ALPROLIX - coagulation factor ix (recomb) (rfixfc) for inj 1000 unit	•	•	•	
AFSTYLA - antihemophilic fact rcmb single chain for inj kit 1000 unit	•	•	•		ALPROLIX - coagulation factor ix (recomb) (rfixfc) for inj 2000 unit	•	•	•	
AFSTYLA - antihemophilic fact rcmb single chain for inj kit 1500 unit	•	•	•		ALPROLIX - coagulation factor ix (recomb) (rfixfc) for inj 3000 unit	•	•	•	
AFSTYLA - antihemophilic fact rcmb single chain for inj kit 2000 unit	•	•	•		ALPROLIX - coagulation factor ix (recomb) (rfixfc) for inj 4000 unit	•	•	•	
AFSTYLA - antihemophilic fact rcmb single chain for inj kit 2500 unit	•	•	•		BENEFIX - coagulation factor ix (recombinant) for inj kit 250 unit	•			
AFSTYLA - antihemophilic fact rcmb single chain for inj kit 3000 unit	•	•	•		BENEFIX - coagulation factor ix (recombinant) for inj kit 500 unit	•			
ALPHANATE/VON WILLEBRAND - antihemophilic factor/vwf (human) for inj 250 unit	•				BENEFIX - coagulation factor ix (recombinant) for inj kit 1000 unit	•			
ALPHANATE/VON WILLEBRAND - antihemophilic factor/vwf (human) for inj 500 unit	•				BENEFIX - coagulation factor ix (recombinant) for inj kit 2000 unit	•			
ALPHANATE/VON WILLEBRAND - antihemophilic factor/vwf (human) for inj 1000 unit	•				BENEFIX - coagulation factor ix (recombinant) for inj kit 3000 unit	•			
ALPHANATE/VON WILLEBRAND - antihemophilic factor/vwf (human) for inj 1500 unit	•				BRILINTA - ticagrelor tab 60 mg				
ALPHANATE/VON WILLEBRAND - antihemophilic factor/vwf (human) for inj 2000 unit	•				BRILINTA - ticagrelor tab 90 mg				
ALPHANINE SD - coagulation factor ix for inj 500 unit	•				cilostazol tab 50 mg (Pletal)				
ALPHANINE SD - coagulation factor ix for inj 1000 unit	•				cilostazol tab 100 mg (Pletal)				
ALPHANINE SD - coagulation factor ix for inj 1500 unit	•				clopidogrel bisulfate tab 75 mg (base equiv) (Plavix)				
ALPROLIX - coagulation factor ix (recomb) (rfixfc) for inj 250 unit	•	•	•		COAGADEX - coagulation factor x (human) for inj 250 unit	•			
ALPROLIX - coagulation factor ix (recomb) (rfixfc) for inj 500 unit	•	•	•		COAGADEX - coagulation factor x (human) for inj 500 unit	•			
					CORIFACT - factor xiii concentrate (human) for inj kit 1000-1600 unit	•			
					ELOCTATE - antihemophilic factor rcmb (bdd-rfviifc) for inj 250 unit	•	•	•	
					ELOCTATE - antihemophilic factor rcmb (bdd-rfviifc) for inj 500 unit	•	•	•	
					ELOCTATE - antihemophilic factor rcmb (bdd-rfviifc) for inj 750 unit	•	•	•	

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
ELOCTATE - antihemophilic factor rcmb (bdd-rfviifc) for inj 1000 unit	•	•	•		HUMATE-P - antihemophilic factor/vwf (human) for inj 250-600 unit	•			
ELOCTATE - antihemophilic factor rcmb (bdd-rfviifc) for inj 1500 unit	•	•	•		HUMATE-P - antihemophilic factor/vwf (human) for inj 500-1200 unit	•			
ELOCTATE - antihemophilic factor rcmb (bdd-rfviifc) for inj 2000 unit	•	•	•		HUMATE-P - antihemophilic factor/vwf (human) for inj 1000-2400 unit	•			
ELOCTATE - antihemophilic factor rcmb (bdd-rfviifc) for inj 3000 unit	•	•	•		IDELVION - coagulation factor ix (recomb) (rix-fp) for inj 250 unit	•	•	•	
ELOCTATE - antihemophilic factor rcmb (bdd-rfviifc) for inj 4000 unit	•	•	•		IDELVION - coagulation factor ix (recomb) (rix-fp) for inj 500 unit	•	•	•	
ELOCTATE - antihemophilic factor rcmb (bdd-rfviifc) for inj 5000 unit	•	•	•		IDELVION - coagulation factor ix (recomb) (rix-fp) for inj 1000 unit	•	•	•	
ELOCTATE - antihemophilic factor rcmb (bdd-rfviifc) for inj 6000 unit	•	•	•		IDELVION - coagulation factor ix (recomb) (rix-fp) for inj 2000 unit	•	•	•	
FEIBA - antiinhibitor coagulant complex for iv soln 500 unit	•				IDELVION - coagulation factor ix (recomb) (rix-fp) for inj 3500 unit	•	•	•	
FEIBA - antiinhibitor coagulant complex for iv soln 1000 unit	•				IXINITY - coagulation factor ix (recombinant) for inj 250 unit	•			
FEIBA - antiinhibitor coagulant complex for iv soln 2500 unit	•				IXINITY - coagulation factor ix (recombinant) for inj 500 unit	•			
HEMLIBRA - emicizumab-kxwh subcutaneous soln 30 mg/ml	•	•	•		IXINITY - coagulation factor ix (recombinant) for inj 1000 unit	•			
HEMLIBRA - emicizumab-kxwh subcutaneous soln 60 mg/0.4ml (150 mg/ml)	•	•	•		IXINITY - coagulation factor ix (recombinant) for inj 1500 unit	•			
HEMLIBRA - emicizumab-kxwh subcutaneous soln 105 mg/0.7ml (150 mg/ml)	•	•	•		IXINITY - coagulation factor ix (recombinant) for inj 2000 unit	•			
HEMLIBRA - emicizumab-kxwh subcutaneous soln 150 mg/ml	•	•	•		IXINITY - coagulation factor ix (recombinant) for inj 3000 unit	•			
HEMOFIL M - antihemophilic factor (human) for inj 250 unit	•				KOATE - antihemophilic factor (human) for inj 250 unit	•			
HEMOFIL M - antihemophilic factor (human) for inj 500 unit	•				KOATE - antihemophilic factor (human) for inj 500 unit	•			
HEMOFIL M - antihemophilic factor (human) for inj 1000 unit	•				KOATE - antihemophilic factor (human) for inj 1000 unit	•			
HEMOFIL M - antihemophilic factor (human) for inj 1700 unit	•				KOATE-DVI - antihemophilic factor (human) for inj 250 unit	•			

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
KOATE-DVI - antihemophilic factor (human) for inj 500 unit	•				NOVOEIGHT - antihemophilic fact rcmb (bd trunc-rfviii) for inj 3000 unit	•			
KOATE-DVI - antihemophilic factor (human) for inj 1000 unit	•				NOVOSEVEN RT - coagulation factor viia (recomb) for inj 1 mg (1000 mcg)	•			
KOGENATE FS - antihemophilic factor (recombinant) for inj kit 250 unit	•				NOVOSEVEN RT - coagulation factor viia (recomb) for inj 2 mg (2000 mcg)	•			
KOGENATE FS - antihemophilic factor (recombinant) for inj kit 500 unit	•				NOVOSEVEN RT - coagulation factor viia (recomb) for inj 5 mg (5000 mcg)	•			
KOGENATE FS - antihemophilic factor (recombinant) for inj kit 1000 unit	•				NOVOSEVEN RT - coagulation factor viia (recomb) for inj 8 mg (8000 mcg)	•			
KOGENATE FS - antihemophilic factor (recombinant) for inj kit 2000 unit	•				NUWIQ - antihemophilic factor rcmb (bdd-rfviii,sim) for inj 250 unit	•			
KOGENATE FS - antihemophilic factor (recombinant) for inj kit 3000 unit	•				NUWIQ - antihemophilic factor rcmb (bdd-rfviii,sim) for inj 500 unit	•			
KOVALTRY - antihemophilic factor rahf-pfm for inj 250 unit	•				NUWIQ - antihemophilic fact rcmb (bdd-rfviii,sim) for inj 1000 unit	•			
KOVALTRY - antihemophilic factor rahf-pfm for inj 500 unit	•				NUWIQ - antihemophilic fact rcmb (bdd-rfviii,sim) for inj 2000 unit	•			
KOVALTRY - antihemophilic factor rahf-pfm for inj 1000 unit	•				NUWIQ - antihemophilic fact rcmb (bdd-rfviii,sim) for inj 2500 unit	•			
KOVALTRY - antihemophilic factor rahf-pfm for inj 2000 unit	•				NUWIQ - antihemophilic fact rcmb (bdd-rfviii,sim) for inj 3000 unit	•			
KOVALTRY - antihemophilic factor rahf-pfm for inj 3000 unit	•				NUWIQ - antihemophilic fact rcmb (bdd-rfviii,sim) for inj 4000 unit	•			
MONONINE - coagulation factor ix for inj 1000 unit	•				NUWIQ - antihemophil fact rcmb (bdd-rfviii,sim) for inj kit 250 unit	•			
NOVOEIGHT - antihemophilic fact rcmb (bd trunc-rfviii) for inj 250 unit	•				NUWIQ - antihemophil fact rcmb (bdd-rfviii,sim) for inj kit 500 unit	•			
NOVOEIGHT - antihemophilic fact rcmb (bd trunc-rfviii) for inj 500 unit	•				NUWIQ - antihemophil fact rcmb(bdd-rfviii,sim) for inj kit 1000 unit	•			
NOVOEIGHT - antihemophilic fact rcmb (bd trunc-rfviii) for inj 1000 unit	•				NUWIQ - antihemophil fact rcmb(bdd-rfviii,sim) for inj kit 2000 unit	•			
NOVOEIGHT - antihemophilic fact rcmb (bd trunc-rfviii) for inj 1500 unit	•				NUWIQ - antihemophil fact rcmb(bdd-rfviii,sim) for inj kit 2500 unit	•			
NOVOEIGHT - antihemophilic fact rcmb (bd trunc-rfviii) for inj 2000 unit	•				NUWIQ - antihemophil fact rcmb(bdd-rfviii,sim) for inj kit 3000 unit	•			

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
NUWIQ - antihemophil fact rcmb(bdd-fviii,sim) for inj kit 4000 unit	•				RIXUBIS - coagulation factor ix (recombinant) for inj 2000 unit	•			
OBIZUR - antihemophilic factor (recomb porc) rpfviii for inj 500 unit	•				RIXUBIS - coagulation factor ix (recombinant) for inj 3000 unit	•			
PROFILNINE - factor ix complex for inj 500 unit	•				TRETTEN - coagulation factor xiii a-subunit for inj 2000-3125 unit	•			
PROFILNINE - factor ix complex for inj 1000 unit	•				VONVENDI - von willebrand factor (recombinant) for inj 650 unit	•			
PROFILNINE - factor ix complex for inj 1500 unit	•				VONVENDI - von willebrand factor (recombinant) for inj 1300 unit	•			
PROFILNINE SD - factor ix complex for inj 1000 unit	•				WILATE - antihemophilic factor/vwf (human) for inj 500-500 unit kit	•			
PROFILNINE SD - factor ix complex for inj 1500 unit	•				WILATE - antihemophilic factor/vwf (human) for inj 1000-1000 unit kit	•			
REBINYN - coagulation factor ix recomb glycopegylated for inj 500 unt	•	•	•		XYNTHA - antihemophilic factor recombinant paf for inj kit 250 unit	•			
REBINYN - coagulation factor ix recomb glycopegylated for inj 1000 unt	•	•	•		XYNTHA - antihemophilic factor recombinant paf for inj kit 500 unit	•			
REBINYN - coagulation factor ix recomb glycopegylated for inj 2000 unt	•	•	•		XYNTHA - antihemophilic factor recombinant paf for inj kit 1000 unit	•			
RECOMBINATE - antihemophilic factor (recombinant) for inj 220-400 unit	•				XYNTHA - antihemophilic factor recombinant paf for inj kit 2000 unit	•			
RECOMBINATE - antihemophilic factor (recombinant) for inj 401-800 unit	•				XYNTHA SOLOFUSE - antihemophilic factor recombinant paf for inj kit 250 unit	•			
RECOMBINATE - antihemophilic factor (recombinant) for inj 801-1240 unit	•				XYNTHA SOLOFUSE - antihemophilic factor recombinant paf for inj kit 500 unit	•			
RECOMBINATE - antihemophilic factor (recombinant) for inj 1241-1800 unit	•				XYNTHA SOLOFUSE - antihemophilic factor recombinant paf for inj kit 1000 unit	•			
RECOMBINATE - antihemophilic factor (recombinant) for inj 1801-2400 unit	•				XYNTHA SOLOFUSE - antihemophilic factor recombinant paf for inj kit 2000 unit	•			
RIXUBIS - coagulation factor ix (recombinant) for inj 250 unit	•				XYNTHA SOLOFUSE - antihemophilic factor recombinant paf for inj kit 3000 unit	•			
RIXUBIS - coagulation factor ix (recombinant) for inj 500 unit	•								
RIXUBIS - coagulation factor ix (recombinant) for inj 1000 unit	•								

**TOPICAL PRODUCTS**

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
<b>OPHTHALMIC AGENTS</b>									
ALPHAGAN P - brimonidine tartrate ophth soln 0.1%					neomycin-polymyxin-dexamethasone ophth susp 0.1% (Maxitrol)				
AZOPT - brinzolamide ophth susp 1%					PAZEO - olopatadine hcl ophth soln 0.7% (base equivalent)				
BACITRACIN - bacitracin ophth oint 500 unit/gm					polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1% (Polytrim)				
<b>bacitracin-polymyxin b ophth oint</b>					PREDNISOLONE ACETATE - prednisolone acetate ophth susp 1%				
<b>brimonidine tartrate ophth soln 0.2%</b>					PREDNISOLONE SODIUM PHOSP - prednisolone sodium phosphate ophth soln 1%				
<b>ciprofloxacin hcl ophth soln 0.3% (base equivalent) (Ciloxan)</b>					SIMBRINZA - brinzolamide-brimonidine tartrate ophth susp 1-0.2%				
<b>cromolyn sodium ophth soln 4%</b>					tetracaine hcl ophth soln 0.5%				
<b>cyclopentolate hcl ophth soln 1% (Cyclogyl)</b>					timolol maleate ophth soln 0.25% (Timoptic)				
<b>diclofenac sodium ophth soln 0.1%</b>					timolol maleate ophth soln 0.5% (Timoptic)				
<b>dorzolamide hcl ophth soln 2% (Trusopt)</b>					<b>tobramycin ophth soln 0.3% (Tobrex)</b>		•		
<b>erythromycin ophth oint 5 mg/gm</b>					TRIFLURIDINE - trifluridine ophth soln 1%				
<b>gentamicin sulfate ophth soln 0.3% (Garamycin)</b>					ZYLET - loteprednol etabonate-tobramycin ophth susp 0.5-0.3%				
<b>ketorolac tromethamine ophth soln 0.5% (Acular)</b>				•	<b>OTIC AGENTS</b>				
<b>latanoprost ophth soln 0.005% (Xalatan)</b>					CIPRODEX - ciprofloxacin-dexamethasone otic susp 0.3-0.1%				
LOTEMAX - loteprednol etabonate ophth oint 0.5%					<b>MOUTH/THROAT/DENTAL AGENTS</b>				
LOTEMAX - loteprednol etabonate ophth gel 0.5%					chlorhexidine gluconate soln 0.12% (Peridex)				
LOTEMAX SM - loteprednol etabonate ophth gel 0.38%					<b>lidocaine hcl viscous soln 2%</b>				
LUMIGAN - bimatoprost ophth soln 0.01%				•	<b>stannous fluoride conc 0.63%</b>				
NATACYN - natamycin ophth susp 5%				•	<b>DERMATOLOGICALS</b>				
<b>neomycin-polymyxin-dexamethasone ophth oint 0.1% (Maxitrol)</b>					CARAC - fluorouracil cream 0.5%	•	•	•	
					COSENTYX - secukinumab subcutaneous soln prefilled syringe 150 mg/ml	•	•	•	

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy	Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
COSENTYX - secukinumab subcutaneous pref syr 150 mg/ml (300 mg dose)	•	•	•		TREMFYA - guselkumab soln prefilled syringe 100 mg/ml	•	•	•	
COSENTYX SENSOREADY PEN - secukinumab subcutaneous soln auto-injector 150 mg/ml	•	•	•		<b>triamcinolone acetonide cream 0.025%</b>				
COSENTYX SENSOREADY PEN - secukinumab subcutaneous auto-inj 150 mg/ml (300 mg dose)	•	•	•		<b>triamcinolone acetonide cream 0.1%</b>				
FINACEA - azelaic acid foam 15%					<b>triamcinolone acetonide cream 0.5%</b>				
FLUOROPLEX - fluorouracil cream 1%		•	•		<b>triamcinolone acetonide oint 0.025%</b>				
<b>hydrocortisone cream 2.5%</b>					<b>triamcinolone acetonide oint 0.1%</b>				
<b>hydrocortisone oint 2.5%</b>					<b>triamcinolone acetonide oint 0.5%</b>				
<b>ketoconazole shampoo 2% (Nizoral)</b>					VALCHLOR - mechlorethamine hcl gel 0.016% (base equivalent)	•			
<b>mometasone furoate oint 0.1% (Elocon)</b>			•		ZYCLARA - imiquimod cream 3.75%	•	•		
<b>mupirocin oint 2% (Bactroban)</b>					ZYCLARA PUMP - imiquimod cream 2.5%	•	•		
<b>nystatin cream 100000 unit/gm</b>					ZYCLARA PUMP - imiquimod cream 3.75%	•	•		
<b>nystatin oint 100000 unit/gm</b>					<b>MISCELLANEOUS PRODUCTS</b>				
<b>selenium sulfide lotion 2.5%</b>					<b>ANTIDOTES</b>				
<b>silver sulfadiazine cream 1% (Silvadene)</b>					CHEMET - succimer cap 100 mg				
SKYRIZI - risankizumab-rzaa sol prefilled syringe 2 x 75 mg/0.83ml kit	•	•	•		JADENU - deferasirox tab 180 mg	•			
SOOLANTRA - ivermectin cream 1%					NARCAN - naloxone hcl nasal spray 4 mg/0.1ml				
STELARA - ustekinumab inj 45 mg/0.5ml	•	•	•		<b>DIAGNOSTIC PRODUCTS</b>				
STELARA - ustekinumab soln prefilled syringe 45 mg/0.5ml	•	•	•		INSULIN PEN NEEDLES – VARIOUS			•	
STELARA - ustekinumab soln prefilled syringe 90 mg/ml	•	•	•		INSULIN SYRINGES – VARIOUS			•	
TAZORAC - tazarotene cream 0.05%					LANCETS – VARIOUS				
TAZORAC - tazarotene gel 0.05%					TEST STRIPS – CONTOUR, CONTOUR NEXT			•	•
TAZORAC - tazarotene gel 0.1%					<b>MEDICAL DEVICES</b>				
TREMFYA - guselkumab soln pen- injector 100 mg/ml	•	•	•		BREATHERITE - spacer/aerosol-holding chambers - device				

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
CELLCEPT - mycophenolate mofetil tab 500 mg				
LOKELMA - sodium zirconium cyclosilicate for susp packet 5 gm				
LOKELMA - sodium zirconium cyclosilicate for susp packet 10 gm				
PROGRAF - tacrolimus cap 0.5 mg				
PROGRAF - tacrolimus cap 1 mg				
PROGRAF - tacrolimus cap 5 mg				
PROGRAF - tacrolimus packet for susp 0.2 mg				
PROGRAF - tacrolimus packet for susp 1 mg				
RAPAMUNE - sirolimus oral soln 1 mg/ml				
REVLIMID - lenalidomide caps 2.5 mg	•	•	•	
REVLIMID - lenalidomide cap 5 mg	•	•	•	
REVLIMID - lenalidomide cap 10 mg	•	•	•	
REVLIMID - lenalidomide cap 15 mg	•	•	•	
REVLIMID - lenalidomide cap 20 mg	•	•	•	
REVLIMID - lenalidomide cap 25 mg	•	•	•	
THALOMID - thalidomide cap 50 mg	•	•	•	
THALOMID - thalidomide cap 100 mg	•	•	•	
THALOMID - thalidomide cap 150 mg	•	•	•	
THALOMID - thalidomide cap 200 mg	•	•	•	
VELTASSA - patiromer sorbitex calcium for susp packet 8.4 gm (base eq)				
VELTASSA - patiromer sorbitex calcium for susp packet 16.8 gm (base eq)				
VELTASSA - patiromer sorbitex calcium for susp packet 25.2 gm (base eq)				
ZORTRESS - everolimus tab 0.25 mg				
ZORTRESS - everolimus tab 0.5 mg				
ZORTRESS - everolimus tab 0.75 mg				
ZORTRESS - everolimus tab 1 mg				

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<b>desogestrel &amp; ethinyl estradiol tab 0.15 mg-30 mcg (Desogen).....</b>	7	<b>doxazosin mesylate tab 1 mg (Cardura).....</b>	13
DEXAMETHASONE- dexamethasone soln 0.5 mg/5ml.....	6	<b>doxazosin mesylate tab 2 mg (Cardura).....</b>	13
dexamethasone tab 0.5 mg.....	6	<b>doxazosin mesylate tab 4 mg (Cardura).....</b>	13
dexamethasone tab 0.75 mg.....	6	<b>doxazosin mesylate tab 8 mg (Cardura).....</b>	13
dexamethasone tab 1.5 mg.....	6	<b>doxepin hcl cap 10 mg.....</b>	20
dexamethasone tab 4 mg.....	6	<b>doxepin hcl conc 10 mg/ml.....</b>	21
dexamethasone tab 6 mg.....	6	<b>doxycycline hyclate cap 100 mg (Vibramycin).....</b>	1
DIASTAT ACUDIAL- diazepam rectal gel delivery system 10 mg.....	27	<b>doxycycline hyclate tab 100 mg.....</b>	1
DIASTAT ACUDIAL- diazepam rectal gel delivery system 20 mg.....	27	<b>doxycycline monohydrate cap 50 mg.....</b>	1
DIASTAT PEDIATRIC- diazepam rectal gel delivery system 2.5 mg.....	27	<b>doxycycline monohydrate cap 100 mg (Monodox).....</b>	1
DAZEPAM- diazepam oral soln 1 mg/ml.....	20	DROXIA- hydroxyurea cap 200 mg.....	29
<b>diazepam tab 2 mg (Valium).....</b>	20	DROXIA- hydroxyurea cap 300 mg.....	29
<b>diazepam tab 5 mg (Valium).....</b>	20	DROXIA- hydroxyurea cap 400 mg.....	29
<b>diazepam tab 10 mg (Valium).....</b>	20	DUAVEE- conjugated estrogens-bazedoxifene tab 0.45-20 mg.....	6
<b>diclofenac sodium ophth soln 0.1%.....</b>	35	DULEREA- mometasone furoate-formoterol fumarate aerosol 50-5 mcg/act.....	17
<b>diclofenac sodium tab delayed release 50 mg.....</b>	25	DULEREA- mometasone furoate-formoterol fumarate aerosol 100-5 mcg/act.....	17
<b>diclofenac sodium tab delayed release 75 mg.....</b>	25	DULEREA- mometasone furoate-formoterol fumarate aerosol 200-5 mcg/act.....	17
<b>dicyclomine hcl cap 10 mg (Bentyl).....</b>	18	<b>duloxetine hcl enteric coated pellets cap 20 mg (base eq) (Cymbalta).....</b>	21
<b>dicyclomine hcl tab 20 mg (Bentyl).....</b>	18	<b>duloxetine hcl enteric coated pellets cap 30 mg (base eq) (Cymbalta).....</b>	21
DILANTIN- phenytoin sodium extended cap 30 mg.....	27	<b>duloxetine hcl enteric coated pellets cap 60 mg (base eq) (Cymbalta).....</b>	21
<b>diltiazem hcl coated beads cap er 24hr 120 mg (Cardizem cd).....</b>	12	<b>dutasteride cap 0.5 mg (Avodart).....</b>	20
<b>diltiazem hcl coated beads cap er 24hr 180 mg (Cardizem cd).....</b>	12	<b>E</b>	
<b>diltiazem hcl coated beads cap er 24hr 240 mg (Cardizem cd).....</b>	12	ELIQUIS- apixaban tab 2.5 mg.....	30
<b>diltiazem hcl extended release beads cap er 24hr 120 mg (Tiazac).....</b>	12		

ELIQUIS- apixaban tab 5 mg.....	30	EPIDIOLEX- cannabidiol soln 100 mg/ml.....	27
ELIQUIS STARTER PACK- apixaban tab 5 mg.....	30	EPOGEN- epoetin alfa inj 2000 unit/ml.....	29
ELLA- ulipristal acetate tab 30 mg.....	7	EPOGEN- epoetin alfa inj 3000 unit/ml.....	29
ELOCTATE- antihemophilic factor rcmb (bdd-rfviifc) for inj 250 unit.....	31	EPOGEN- epoetin alfa inj 4000 unit/ml.....	29
ELOCTATE- antihemophilic factor rcmb (bdd-rfviifc) for inj 500 unit.....	31	EPOGEN- epoetin alfa inj 10000 unit/ml.....	29
ELOCTATE- antihemophilic factor rcmb (bdd-rfviifc) for inj 750 unit.....	31	EPOGEN- epoetin alfa inj 20000 unit/ml.....	29
ELOCTATE- antihemophilic factor rcmb (bdd-rfviifc) for inj 1000 unit.....	32	<b>ergocalciferol cap 1.25 mg (50000 unit) (Drisdol).....</b>	28
ELOCTATE- antihemophilic factor rcmb (bdd-rfviifc) for inj 1500 unit.....	32	ERIVEDGE- vismodegib cap 150 mg.....	4
ELOCTATE- antihemophilic factor rcmb (bdd-rfviifc) for inj 2000 unit.....	32	ERLEADA- apalutamide tab 60 mg.....	4
ELOCTATE- antihemophilic factor rcmb (bdd-rfviifc) for inj 3000 unit.....	32	<b>erythromycin ophth oint 5 mg/gm.....</b>	35
ELOCTATE- antihemophilic factor rcmb (bdd-rfviifc) for inj 4000 unit.....	32	<b>escitalopram oxalate tab 5 mg (base equiv) (Lexapro).....</b>	21
ELOCTATE- antihemophilic factor rcmb (bdd-rfviifc) for inj 5000 unit.....	32	<b>escitalopram oxalate tab 10 mg (base equiv) (Lexapro).....</b>	21
ELOCTATE- antihemophilic factor rcmb (bdd-rfviifc) for inj 6000 unit.....	32	<b>escitalopram oxalate tab 20 mg (base equiv) (Lexapro).....</b>	21
EMCYT- estramustine phosphate sodium cap 140 mg.....	4	<b>estradiol tab 0.5 mg (Estrace).....</b>	6
EMEND- aprepitant for oral susp 125 mg (125 mg/5ml).....	19	<b>estradiol tab 1 mg (Estrace).....</b>	6
EMGALITY- galcanezumab-gnlm subcutaneous soln auto- injector 120 mg/ml.....	26	<b>estradiol tab 2 mg (Estrace).....</b>	6
EMGALITY- galcanezumab-gnlm subcutaneous soln prefilled syr 100 mg/ml.....	26	<b>ESTRING- estradiol vaginal ring 2 mg (7.5 mcg/24hrs).....</b>	20
EMGALITY- galcanezumab-gnlm subcutaneous soln prefilled syr 120 mg/ml.....	26	<b>eszopiclone tab 1 mg (Lunesta).....</b>	22
<b>enalapril maleate &amp; hydrochlorothiazide tab 5-12.5 mg.....</b>	13	<b>eszopiclone tab 2 mg (Lunesta).....</b>	22
<b>enalapril maleate &amp; hydrochlorothiazide tab 10-25 mg (Vaseretic).....</b>	13	<b>eszopiclone tab 3 mg (Lunesta).....</b>	22
<b>enalapril maleate tab 2.5 mg (Vasotec).....</b>	13		
<b>enalapril maleate tab 5 mg (Vasotec).....</b>	13		
<b>enalapril maleate tab 10 mg (Vasotec).....</b>	13		
<b>enalapril maleate tab 20 mg (Vasotec).....</b>	13		
ENBREL- etanercept for subcutaneous inj 25 mg.....	25	<b>felodipine tab er 24hr 2.5 mg.....</b>	12
ENBREL- etanercept subcutaneous soln prefilled syringe 25 mg/0.5ml.....	25	<b>felodipine tab er 24hr 5 mg.....</b>	12
ENBREL- etanercept subcutaneous soln prefilled syringe 50 mg/ml.....	25	<b>felodipine tab er 24hr 10 mg.....</b>	12
ENBREL MINI- etanercept subcutaneous solution cartridge 50 mg/ml.....	25	<b>fenofibrate tab 54 mg (Lofibra).....</b>	15
ENBREL SURECLICK- etanercept subcutaneous solution auto-injector 50 mg/ml.....	25	<b>fenofibrate tab 160 mg (Lofibra).....</b>	15
ENTRESTO- sacubitril-valsartan tab 24-26 mg.....	16	<b>fenofibrate tab 48 mg (Tricor).....</b>	15
ENTRESTO- sacubitril-valsartan tab 49-51 mg.....	16	<b>fenofibrate tab 145 mg (Tricor).....</b>	15
ENTRESTO- sacubitril-valsartan tab 97-103 mg.....	16	<b>ferrous sulfate elixir 220 mg/5ml (44 mg/5ml elemental fe).....</b>	29
EPCLUSA- sofosbuvir-velpatasvir tab 400-100 mg.....	2	<b>ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe).....</b>	29
		<b>FIASP FLEXTOUCH- insulin aspart (with niacinamide) sol pen-inj 100 unit/ml.....</b>	9
		<b>FIASP- insulin aspart (with niacinamide) inj 100 unit/ml.....</b>	9
		<b>FIASP PENFILL- insulin aspart (with niacinamide) soln cartridge 100 unit/ml.....</b>	9
		<b>FINACEA- azelaic acid foam 15%.....</b>	36
		<b>finasteride tab 5 mg (Proscar).....</b>	20

FLOVENT DISKUS- fluticasone propionate aer pow ba 50 mcg/blister.....	17	gabapentin cap 300 mg (Neurontin).....	27
FLOVENT DISKUS- fluticasone propionate aer pow ba 100 mcg/blister.....	17	gabapentin cap 400 mg (Neurontin).....	27
FLOVENT DISKUS- fluticasone propionate aer pow ba 250 mcg/blister.....	17	gabapentin tab 600 mg (Neurontin).....	27
FLOVENT HFA- fluticasone propionate hfa inhal aer 110 mcg/act (125 valve).....	17	gabapentin tab 800 mg (Neurontin).....	27
FLOVENT HFA- fluticasone propionate hfa inhal aer 220 mcg/act (250 valve).....	17	gemfibrozil tab 600 mg (Lopid).....	15
FLOVENT HFA- fluticasone propionate hfa inhal aero 44 mcg/act (50 valve).....	17	gentamicin sulfate ophth soln 0.3% (Garamycin).....	35
fluconazole tab 50 mg (Diflucan).....	1	GENVOYA- elvitegrav-cobic-emtricitab-tenofovir af tab 150-150-200-10 mg.....	2
fluconazole tab 100 mg (Diflucan).....	1	GILENYA- fingolimod hcl cap 0.5 mg (base equiv).....	23
fluconazole tab 150 mg (Diflucan).....	1	glimepiride tab 1 mg (Amaryl).....	7
fluconazole tab 200 mg (Diflucan).....	1	glimepiride tab 2 mg (Amaryl).....	7
fludrocortisone acetate tab 0.1 mg.....	6	glimepiride tab 4 mg (Amaryl).....	7
FLUOROPLEX- fluorouracil cream 1%.....	36	glipizide tab er 24hr 2.5 mg (Glucotrol xl).....	7
fluoxetine hcl cap 10 mg (Prozac).....	21	glipizide tab er 24hr 5 mg (Glucotrol xl).....	7
fluoxetine hcl cap 20 mg (Prozac).....	21	glipizide tab er 24hr 10 mg (Glucotrol xl).....	7
fluoxetine hcl cap 40 mg (Prozac).....	21	glipizide tab 5 mg (Glucotrol).....	7
fluoxetine hcl solution 20 mg/5ml.....	21	glipizide tab 10 mg (Glucotrol).....	7
FLUPHENAZINE HCL- fluphenazine hcl oral conc 5 mg/ml.....	21	GLUCAGON EMERGENCY KIT FO- glucagon hcl for inj 1 mg.....	7
FLUPHENAZINE HYDROCHLORID- fluphenazine hcl elixir 2.5 mg/5ml.....	21	GLUCAGON EMERGENCY KIT- glucagon (rdna) for inj kit 1 mg.....	7
flurbiprofen tab 50 mg.....	25	glyburide-metformin tab 1.25-250 mg (Glucovance).....	7
FLUTICASONE PROPIONATE/SA- fluticasone-salmeterol aer powder ba 55-14 mcg/act.....	17	glyburide-metformin tab 2.5-500 mg (Glucovance).....	7
FLUTICASONE PROPIONATE/SA- fluticasone-salmeterol aer powder ba 113-14 mcg/act.....	17	glyburide-metformin tab 5-500 mg (Glucovance).....	7
FLUTICASONE PROPIONATE/SA- fluticasone-salmeterol aer powder ba 232-14 mcg/act.....	17	glyburide micronized tab 1.5 mg (Glynase).....	7
fluticasone propionate nasal susp 50 mcg/act.....	16	glyburide micronized tab 3 mg (Glynase).....	7
folic acid cap 0.8 mg.....	29	glyburide micronized tab 6 mg (Glynase).....	7
folic acid tab 400 mcg.....	29	glyburide tab 1.25 mg.....	7
folic acid tab 800 mcg.....	29	glyburide tab 2.5 mg.....	7
folic acid tab 1 mg.....	29	glyburide tab 5 mg.....	7
FOLLISTIM AQ- follitropin beta inj 300 unit/0.36ml.....	11	GLYXAMBI- empagliflozin-linagliptin tab 10-5 mg.....	8
FOLLISTIM AQ- follitropin beta inj 600 unit/0.72ml.....	11	GLYXAMBI- empagliflozin-linagliptin tab 25-5 mg.....	8
FOLLISTIM AQ- follitropin beta inj 900 unit/1.08ml.....	11	GRANIX- tbo-filgrastim soln prefilled syringe 300 mcg/0.5ml.....	29
fosinopril sodium tab 10 mg.....	13	GRANIX- tbo-filgrastim soln prefilled syringe 480 mcg/0.8ml.....	29
fosinopril sodium tab 20 mg.....	13	GRANIX- tbo-filgrastim subcutaneous inj 300 mcg/ml.....	29
fosinopril sodium tab 40 mg.....	13	GRANIX- tbo-filgrastim subcutaneous inj 480 mcg/1.6ml (300 mcg/ml).....	29
FULPHILA- pegfilgrastim-jmdb soln prefilled syringe 6 mg/0.6ml.....	29	guanfacine hcl tab 1 mg (Tenex).....	13
furosemide oral soln 10 mg/ml.....	15	guanfacine hcl tab 2 mg (Tenex).....	13
furosemide tab 20 mg (Lasix).....	15	GVOKE HYPOOPEN 1-PACK- glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml.....	8
furosemide tab 40 mg (Lasix).....	15	GVOKE HYPOOPEN 1-PACK- glucagon subcutaneous solution auto-injector 1 mg/0.2ml.....	8
furosemide tab 80 mg (Lasix).....	15	GVOKE HYPOOPEN 2-PACK- glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml.....	8
<b>G</b>		GVOKE HYPOOPEN 2-PACK- glucagon subcutaneous solution auto-injector 1 mg/0.2ml.....	8
<b>gabapentin cap 100 mg (Neurontin).....</b>	<b>27</b>	GVOKE PFS- glucagon subcutaneous soln pref syringe 0.5 mg/0.1ml.....	8
		GVOKE PFS- glucagon subcutaneous soln pref syringe 1 mg/0.2ml.....	8

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<b>haloperidol tab 0.5 mg.....</b>	<b>21</b>
<b>haloperidol tab 1 mg.....</b>	<b>21</b>
<b>haloperidol tab 2 mg.....</b>	<b>21</b>
HARVONI- ledipasvir-sofosbuvir pellet pack 33.75-150 mg.....	2
HARVONI- ledipasvir-sofosbuvir pellet pack 45-200 mg.....	2
HARVONI- ledipasvir-sofosbuvir tab 45-200 mg.....	2
HARVONI- ledipasvir-sofosbuvir tab 90-400 mg.....	2
HEMLIBRA- emicizumab-kxwh subcutaneous soln 30 mg/ml.....	32
HEMLIBRA- emicizumab-kxwh subcutaneous soln 150 mg/ml.....	32
HEMLIBRA- emicizumab-kxwh subcutaneous soln 60 mg/0.4ml (150 mg/ml).....	32
HEMLIBRA- emicizumab-kxwh subcutaneous soln 105 mg/0.7ml (150 mg/ml).....	32
HEMOFIL M- antihemophilic factor (human) for inj 250 unit.....	32
HEMOFIL M- antihemophilic factor (human) for inj 500 unit.....	32
HEMOFIL M- antihemophilic factor (human) for inj 1000 unit.....	32
HEMOFIL M- antihemophilic factor (human) for inj 1700 unit.....	32
HUMATE-P- antihemophilic factor/vwf (human) for inj 250-600 unit.....	32
HUMATE-P- antihemophilic factor/vwf (human) for inj 500-1200 unit.....	32
HUMATE-P- antihemophilic factor/vwf (human) for inj 1000-2400 unit.....	32
HUMIRA- adalimumab prefilled syringe kit 10 mg/0.1ml.....	25
HUMIRA- adalimumab prefilled syringe kit 10 mg/0.2ml.....	25
HUMIRA- adalimumab prefilled syringe kit 20 mg/0.2ml.....	25
HUMIRA- adalimumab prefilled syringe kit 20 mg/0.4ml.....	25
HUMIRA- adalimumab prefilled syringe kit 40 mg/0.8ml.....	25
HUMIRA- adalimumab prefilled syringe kit 40 mg/0.4ml.....	25
HUMIRA PEDIATRIC CROHNS D- adalimumab prefilled syringe kit 80 mg/0.8ml.....	25
HUMIRA PEDIATRIC CROHNS D- adalimumab prefilled syringe kit 80 mg/0.8ml & 40 mg/0.4ml.....	25
HUMIRA PEN- adalimumab pen-injector kit 40 mg/0.8ml.....	25
HUMIRA PEN- adalimumab pen-injector kit 40 mg/0.4ml.....	25

HUMIRA PEN-CD/UC/HS START- adalimumab pen-injector kit 40 mg/0.8ml.....	25
HUMIRA PEN-CD/UC/HS START- adalimumab pen-injector kit 80 mg/0.8ml.....	25
HUMIRA PEN-PS/UV STARTER- adalimumab pen-injector kit 40 mg/0.8ml.....	25
HUMIRA PEN-PS/UV STARTER- adalimumab pen-injector kit 80 mg/0.8ml & 40 mg/0.4ml.....	25
HUMULIN R U-500 (CONCENTR- insulin regular (human) inj 500 unit/ml).....	9
HUMULIN R U-500 KWIKPEN- insulin regular (human) soln pen-injector 500 unit/ml).....	9
<b>hydralazine hcl tab 10 mg.....</b>	<b>13</b>
<b>hydralazine hcl tab 25 mg.....</b>	<b>13</b>
<b>hydralazine hcl tab 50 mg.....</b>	<b>13</b>
<b>hydralazine hcl tab 100 mg.....</b>	<b>13</b>
<b>hydrochlorothiazide cap 12.5 mg (Microzide).....</b>	<b>15</b>
<b>hydrochlorothiazide tab 12.5 mg.....</b>	<b>15</b>
<b>hydrochlorothiazide tab 25 mg.....</b>	<b>15</b>
<b>hydrochlorothiazide tab 50 mg.....</b>	<b>15</b>
<b>hydrocodone-acetaminophen tab 7.5-325 mg (Norco).....</b>	<b>24</b>
<b>hydrocodone-acetaminophen tab 5-325 mg (Norco).....</b>	<b>24</b>
<b>hydrocodone w/ homatropine syrup 5-1.5 mg/5ml.....</b>	<b>16</b>
<b>hydrocodone w/ homatropine tab 5-1.5 mg.....</b>	<b>16</b>
<b>hydrocortisone cream 2.5%.....</b>	<b>36</b>
<b>hydrocortisone oint 2.5%.....</b>	<b>36</b>
<b>hydromorphone hcl tab 2 mg (Dilaudid).....</b>	<b>24</b>
<b>hydromorphone hcl tab 4 mg (Dilaudid).....</b>	<b>24</b>
<b>hydroxyzine hcl syrup 10 mg/5ml.....</b>	<b>20</b>
<b>hydroxyzine hcl tab 10 mg.....</b>	<b>20</b>
<b>hydroxyzine hcl tab 25 mg.....</b>	<b>20</b>
<b>hydroxyzine hcl tab 50 mg.....</b>	<b>20</b>
<b>hydroxyzine pamoate cap 25 mg (Vistaril).....</b>	<b>20</b>
<b>hydroxyzine pamoate cap 50 mg (Vistaril).....</b>	<b>20</b>
<b>I</b>	
<b>ibandronate sodium tab 150 mg (base equivalent) (Boniva).....</b>	<b>11</b>
IBRANCE- palbociclib cap 75 mg.....	4
IBRANCE- palbociclib cap 100 mg.....	4
IBRANCE- palbociclib cap 125 mg.....	4
IBRANCE- palbociclib tab 75 mg.....	4
IBRANCE- palbociclib tab 100 mg.....	4
IBRANCE- palbociclib tab 125 mg.....	4
<b>ibuprofen tab 400 mg.....</b>	<b>25</b>
<b>ibuprofen tab 600 mg.....</b>	<b>25</b>
<b>ibuprofen tab 800 mg.....</b>	<b>25</b>
IDELVION- coagulation factor ix (recomb) (rix-fp) for inj 250 unit.....	32
IDELVION- coagulation factor ix (recomb) (rix-fp) for inj 500 unit.....	32

IDEVION- coagulation factor ix (recomb) (rix-fp) for inj 1000 unit.....	32	INVOKANA- canagliflozin tab 300 mg.....	8
IDEVION- coagulation factor ix (recomb) (rix-fp) for inj 2000 unit.....	32	ipratropium bromide inhal soln 0.02%.....	18
IDEVION- coagulation factor ix (recomb) (rix-fp) for inj 3500 unit.....	32	irbesartan-hydrochlorothiazide tab 150-12.5 mg (Avalide).....	14
imipramine hcl tab 10 mg (Tofranil).....	21	irbesartan-hydrochlorothiazide tab 300-12.5 mg (Avalide).....	14
imipramine hcl tab 25 mg (Tofranil).....	21	irbesartan tab 75 mg (Avapro).....	13
imipramine hcl tab 50 mg (Tofranil).....	21	irbesartan tab 150 mg (Avapro).....	13
IMPAVIDO- miltefosine cap 50 mg.....	3	irbesartan tab 300 mg (Avapro).....	13
INBRIJA- levodopa inhal powder cap 42 mg.....	27	ISENTRESS HD- raltegravir potassium tab 600 mg (base equiv).....	2
INCRELEX- mecasermin inj 40 mg/4ml (10 mg/ml).....	11	ISENTRESS- raltegravir potassium chew tab 25 mg (base equiv).....	2
INCRUSE ELLIPTA- umeclidinium br aero powd breath act 62.5 mcg/inh (base eq).....	17	ISENTRESS- raltegravir potassium chew tab 100 mg (base equiv).....	2
indapamide tab 1.25 mg.....	15	ISENTRESS- raltegravir potassium packet for susp 100 mg (base equiv).....	2
indapamide tab 2.5 mg.....	15	ISENTRESS- raltegravir potassium tab 400 mg (base equiv).....	2
indomethacin cap 25 mg.....	26	isoniazid tab 300 mg.....	1
indomethacin cap 50 mg.....	26	isosorbide mononitrate tab er 24hr 30 mg.....	11
INNOPRAN XL- propranolol hcl sustained-release beads cap er 24hr 80 mg.....	12	isosorbide mononitrate tab er 24hr 60 mg.....	11
INNOPRAN XL- propranolol hcl sustained-release beads cap er 24hr 120 mg.....	12	isosorbide mononitrate tab 10 mg.....	11
INSULIN ASPART FLEXPEN- insulin aspart soln pen- injector 100 unit/ml.....	9	isosorbide mononitrate tab 20 mg.....	11
INSULIN ASPART- insulin aspart inj 100 unit/ml.....	9	IXINITY- coagulation factor ix (recombinant) for inj 250 unit.....	32
INSULIN ASPART PENFILL- insulin aspart soln cartridge 100 unit/ml.....	9	IXINITY- coagulation factor ix (recombinant) for inj 500 unit.....	32
INSULIN ASPART PROTAMINE/- insulin aspart prot & aspart (human) inj 100 unit/ml (70-30).....	10	IXINITY- coagulation factor ix (recombinant) for inj 1000 unit.....	32
INSULIN ASPART PROTAMINE/- insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30).....	10	IXINITY- coagulation factor ix (recombinant) for inj 1500 unit.....	32
INSULIN PEN NEEDLES – VARIOUS.....	36	IXINITY- coagulation factor ix (recombinant) for inj 2000 unit.....	32
INSULIN SYRINGES – VARIOUS.....	36	IXINITY- coagulation factor ix (recombinant) for inj 3000 unit.....	32
INTELENCE- etravirine tab 25 mg.....	2	J	
INTELENCE- etravirine tab 100 mg.....	2	JADENU- deferasirox tab 180 mg.....	36
INTELENCE- etravirine tab 200 mg.....	2	JANUMET- sitagliptin-metformin hcl tab 50-500 mg.....	8
INVOKAMET- canagliflozin-metformin hcl tab 50-500 mg.....	8	JANUMET- sitagliptin-metformin hcl tab 50-1000 mg.....	8
INVOKAMET- canagliflozin-metformin hcl tab 150-500 mg.....	8	JANUMET XR- sitagliptin-metformin hcl tab er 24hr 50-500 mg.....	8
INVOKAMET- canagliflozin-metformin hcl tab 50-1000 mg.....	8	JANUMET XR- sitagliptin-metformin hcl tab er 24hr 50-1000 mg.....	8
INVOKAMET XR- canagliflozin-metformin hcl tab er 24hr 50-500 mg.....	8	JANUMET XR- sitagliptin-metformin hcl tab er 24hr 100-1000 mg.....	8
INVOKAMET XR- canagliflozin-metformin hcl tab er 24hr 50-1000 mg.....	8	JANUVIA- sitagliptin phosphate tab 25 mg (base equiv)....	8
INVOKAMET XR- canagliflozin-metformin hcl tab er 24hr 150-500 mg.....	8	JANUVIA- sitagliptin phosphate tab 50 mg (base equiv)....	8
INVOKAMET XR- canagliflozin-metformin hcl tab er 24hr 150-1000 mg.....	8	JANUVIA- sitagliptin phosphate tab 100 mg (base equiv).....	8
INVOKANA- canagliflozin tab 100 mg.....	8	JARDIANCE- empagliflozin tab 10 mg.....	8
		JARDIANCE- empagliflozin tab 25 mg.....	8

JULUCA- dolutegravir sodium-rilpivirine hcl tab 50-25 mg (base eq).....	2	KOVALTRY- antihemophilic factor raha-f-pfm for inj 250 unit.....	33
<b>K</b>		KOVALTRY- antihemophilic factor raha-f-pfm for inj 500 unit.....	33
KALETRA- lopinavir-ritonavir tab 100-25 mg.....	2	KOVALTRY- antihemophilic factor raha-f-pfm for inj 1000 unit.....	33
KALETRA- lopinavir-ritonavir tab 200-50 mg.....	2	KOVALTRY- antihemophilic factor raha-f-pfm for inj 2000 unit.....	33
KALYDECO- ivacaftor packet 25 mg.....	18	KOVALTRY- antihemophilic factor raha-f-pfm for inj 3000 unit.....	33
KALYDECO- ivacaftor packet 50 mg.....	18		
KALYDECO- ivacaftor packet 75 mg.....	18		
KALYDECO- ivacaftor tab 150 mg.....	18		
<b>ketoconazole shampoo 2% (Nizoral)</b> .....	36		
<b>ketorolac tromethamine ophth soln 0.5% (Acular)</b> .....	35		
KISQALI FEMARA 200 DOSE- ribociclib 200 mg dose (200 mg tab) & letrozole 2.5 mg tbpk.....	4	<b>L</b>	
KISQALI FEMARA 400 DOSE- ribociclib 400 mg dose (200 mg tab) & letrozole 2.5 mg tbpk.....	4	labetalol hcl tab 100 mg (Trandate).....	12
KISQALI FEMARA 600 DOSE- ribociclib 600 mg dose (200 mg tab) & letrozole 2.5 mg tbpk.....	4	lamotrigine tab 25 mg (Lamictal).....	27
KISQALI- ribociclib succinate tab pack 200 mg daily dose.....	4	lamotrigine tab 100 mg (Lamictal).....	27
KISQALI- ribociclib succinate tab pack 400 mg daily dose (200 mg tab).....	4	lamotrigine tab 150 mg (Lamictal).....	27
KISQALI- ribociclib succinate tab pack 600 mg daily dose (200 mg tab).....	4	lamotrigine tab 200 mg (Lamictal).....	27
KOATE- antihemophilic factor (human) for inj 250 unit.....	32	LANCETS – VARIOUS.....	36
KOATE- antihemophilic factor (human) for inj 500 unit.....	32	LANTUS- insulin glargine inj 100 unit/ml.....	10
KOATE- antihemophilic factor (human) for inj 1000 unit.....	32	LANTUS SOLOSTAR- insulin glargine soln pen-injector 100 unit/ml.....	10
KOATE-DVI- antihemophilic factor (human) for inj 250 unit.....	32	latanoprost ophth soln 0.005% (Xalatan).....	35
KOATE-DVI- antihemophilic factor (human) for inj 500 unit.....	33	letrozole tab 2.5 mg (Femara).....	4
KOATE-DVI- antihemophilic factor (human) for inj 1000 unit.....	33	LEUCOVORIN CALCIUM- leucovorin calcium tab 10 mg.....	4
KOGENATE FS- antihemophilic factor (recombinant) for inj kit 250 unit.....	33	LEUCOVORIN CALCIUM- leucovorin calcium tab 15 mg.....	4
KOGENATE FS- antihemophilic factor (recombinant) for inj kit 500 unit.....	33	LEUKERAN- chlorambucil tab 2 mg.....	4
KOGENATE FS- antihemophilic factor (recombinant) for inj kit 1000 unit.....	33	LEVEMIR FLEXTOUCH- insulin detemir soln pen-injector 100 unit/ml.....	10
KOGENATE FS- antihemophilic factor (recombinant) for inj kit 2000 unit.....	33	LEVEMIR- insulin detemir inj 100 unit/ml.....	10
KOGENATE FS- antihemophilic factor (recombinant) for inj kit 3000 unit.....	33	levetiracetam tab 250 mg (Kepra).....	27
KOMBIGLYZE XR- saxagliptin-metformin hcl tab er 24hr 2.5-1000 mg.....	8	levetiracetam tab 500 mg (Kepra).....	27
KOMBIGLYZE XR- saxagliptin-metformin hcl tab er 24hr 5-500 mg.....	8	levofloxacin tab 250 mg (Levaquin).....	1
KOMBIGLYZE XR- saxagliptin-metformin hcl tab er 24hr 5-1000 mg.....	8	levofloxacin tab 500 mg (Levaquin).....	1
KOSHER PRENATAL PLUS IRON- prenatal vit w/ iron carbonyl-fa tab 30-1 mg.....	28	levofloxacin tab 750 mg (Levaquin).....	1
		levonorgestrel & ethynodiol dihydrogesterone tab 0.1 mg-20 mcg.....	7
		levonorgestrel & ethynodiol dihydrogesterone tab 0.15 mg-30 mcg.....	7
		levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg.....	7
		levothyroxine sodium tab 25 mcg (Synthroid).....	10
		levothyroxine sodium tab 50 mcg (Synthroid).....	10
		levothyroxine sodium tab 75 mcg (Synthroid).....	10
		levothyroxine sodium tab 88 mcg (Synthroid).....	10
		levothyroxine sodium tab 100 mcg (Synthroid).....	10
		levothyroxine sodium tab 112 mcg (Synthroid).....	10
		levothyroxine sodium tab 125 mcg (Synthroid).....	10
		levothyroxine sodium tab 137 mcg (Synthroid).....	10
		levothyroxine sodium tab 150 mcg (Synthroid).....	10
		levothyroxine sodium tab 175 mcg (Synthroid).....	10
		levothyroxine sodium tab 200 mcg (Synthroid).....	10

<b>lidocaine hcl viscous soln 2%.....</b>	<b>35</b>	<b>MAVENCLAD- cladribine tab therapy pack 10 mg (8 tabs).....</b>	<b>23</b>
<b>lisinopril &amp; hydrochlorothiazide tab 10-12.5 mg (Zestoretic).....</b>	<b>14</b>	<b>MAVENCLAD- cladribine tab therapy pack 10 mg (9 tabs).....</b>	<b>23</b>
<b>lisinopril &amp; hydrochlorothiazide tab 20-12.5 mg (Zestoretic).....</b>	<b>14</b>	<b>MAVENCLAD- cladribine tab therapy pack 10 mg (10 tabs).....</b>	<b>23</b>
<b>lisinopril &amp; hydrochlorothiazide tab 20-25 mg (Zestoretic).....</b>	<b>14</b>	<b>MAVYRET- glecaprevir-pibrentasvir tab 100-40 mg.....</b>	<b>2</b>
<b>lisinopril tab 5 mg (Prinivil).....</b>	<b>14</b>	<b>MAYZENT- siponimod fumarate tab 0.25 mg (base equiv).....</b>	<b>23</b>
<b>lisinopril tab 10 mg (Prinivil).....</b>	<b>14</b>	<b>MAYZENT- siponimod fumarate tab 2 mg (base equiv).....</b>	<b>23</b>
<b>lisinopril tab 20 mg (Prinivil).....</b>	<b>14</b>	<b>medroxyprogesterone acetate tab 2.5 mg (Provera).....</b>	<b>7</b>
<b>lisinopril tab 2.5 mg (Zestril).....</b>	<b>14</b>	<b>medroxyprogesterone acetate tab 5 mg (Provera).....</b>	<b>7</b>
<b>lisinopril tab 30 mg (Zestril).....</b>	<b>14</b>	<b>medroxyprogesterone acetate tab 10 mg (Provera).....</b>	<b>7</b>
<b>lisinopril tab 40 mg (Zestril).....</b>	<b>14</b>	<b>MEFLOQUINE HCL- mefloquine hcl tab 250 mg.....</b>	<b>3</b>
<b>lithium carbonate cap 300 mg.....</b>	<b>21</b>	<b>megestrol acetate tab 20 mg.....</b>	<b>4</b>
<b>lithium carbonate cap 150 mg (Lithium carbonate).....</b>	<b>21</b>	<b>megestrol acetate tab 40 mg.....</b>	<b>4</b>
<b>lithium carbonate cap 600 mg (Lithium carbonate).....</b>	<b>21</b>	<b>MEKINIST- trametinib dimethyl sulfoxide tab 0.5 mg (base equivalent).....</b>	<b>4</b>
<b>lithium carbonate tab 300 mg.....</b>	<b>21</b>	<b>MEKINIST- trametinib dimethyl sulfoxide tab 2 mg (base equivalent).....</b>	<b>4</b>
<b>LOKELMA- sodium zirconium cyclosilicate for susp packet 5 gm.....</b>	<b>37</b>	<b>meloxicam tab 7.5 mg (Mobic).....</b>	<b>26</b>
<b>LOKELMA- sodium zirconium cyclosilicate for susp packet 10 gm.....</b>	<b>37</b>	<b>meloxicam tab 15 mg (Mobic).....</b>	<b>26</b>
<b>lorazepam tab 0.5 mg (Ativan).....</b>	<b>20</b>	<b>memantine hcl tab 5 mg (Namenda).....</b>	<b>23</b>
<b>lorazepam tab 1 mg (Ativan).....</b>	<b>20</b>	<b>memantine hcl tab 10 mg (Namenda).....</b>	<b>23</b>
<b>lorazepam tab 2 mg (Ativan).....</b>	<b>20</b>	<b>MESNEX- mesna tab 400 mg.....</b>	<b>4</b>
<b>losartan potassium &amp; hydrochlorothiazide tab 50-12.5 mg (Hyzaar).....</b>	<b>14</b>	<b>metformin hcl tab er 24hr 500 mg (Glucophage xr).....</b>	<b>8</b>
<b>losartan potassium &amp; hydrochlorothiazide tab 100-12.5 mg (Hyzaar).....</b>	<b>14</b>	<b>metformin hcl tab er 24hr 750 mg (Glucophage xr).....</b>	<b>8</b>
<b>losartan potassium &amp; hydrochlorothiazide tab 100-25 mg (Hyzaar).....</b>	<b>14</b>	<b>metformin hcl tab 500 mg (Glucophage).....</b>	<b>8</b>
<b>losartan potassium tab 25 mg (Cozaar).....</b>	<b>14</b>	<b>metformin hcl tab 850 mg (Glucophage).....</b>	<b>8</b>
<b>losartan potassium tab 50 mg (Cozaar).....</b>	<b>14</b>	<b>metformin hcl tab 1000 mg (Glucophage).....</b>	<b>8</b>
<b>losartan potassium tab 100 mg (Cozaar).....</b>	<b>14</b>	<b>methadone hcl tab 10 mg (Dolophine).....</b>	<b>24</b>
<b>LOTEMAX- loteprednol etabonate ophth gel 0.5%.....</b>	<b>35</b>	<b>methadone hcl tab 5 mg (Dolophine hcl).....</b>	<b>24</b>
<b>LOTEMAX- loteprednol etabonate ophth oint 0.5%.....</b>	<b>35</b>	<b>methimazole tab 5 mg (Tapazole).....</b>	<b>10</b>
<b>LOTEMAX SM- loteprednol etabonate ophth gel 0.38%.....</b>	<b>35</b>	<b>methimazole tab 10 mg (Tapazole).....</b>	<b>11</b>
<b>lovastatin tab 10 mg.....</b>	<b>15</b>	<b>methocarbamol tab 750 mg (Robaxin-750).....</b>	<b>28</b>
<b>lovastatin tab 20 mg.....</b>	<b>15</b>	<b>methocarbamol tab 500 mg (Robaxin).....</b>	<b>28</b>
<b>lovastatin tab 40 mg (Mevacor).....</b>	<b>15</b>	<b>methyldopa tab 250 mg.....</b>	<b>14</b>
<b>LUMIGAN- bimatoprost ophth soln 0.01%.....</b>	<b>35</b>	<b>methylprednisolone tab 16 mg (Medrol).....</b>	<b>6</b>
<b>LYNPARZA- olaparib tab 100 mg.....</b>	<b>4</b>	<b>methylprednisolone tab 32 mg (Medrol).....</b>	<b>6</b>
<b>LYNPARZA- olaparib tab 150 mg.....</b>	<b>4</b>	<b>methylprednisolone tab therapy pack 4 mg (21 (Medrol dosepak).....</b>	<b>6</b>
<b>M</b>		<b>metoclopramide hcl tab 5 mg (base equivalent) (Reglan).....</b>	<b>19</b>
<b>MAVENCLAD- cladribine tab therapy pack 10 mg (4 tabs).....</b>	<b>23</b>	<b>metoclopramide hcl tab 10 mg (base equivalent) (Reglan).....</b>	<b>19</b>
<b>MAVENCLAD- cladribine tab therapy pack 10 mg (5 tabs).....</b>	<b>23</b>	<b>metoprolol succinate tab er 24hr 25 mg (tartrate equiv) (Toprol xl).....</b>	<b>12</b>
<b>MAVENCLAD- cladribine tab therapy pack 10 mg (6 tabs).....</b>	<b>23</b>	<b>metoprolol succinate tab er 24hr 50 mg (tartrate equiv) (Toprol xl).....</b>	<b>12</b>
<b>MAVENCLAD- cladribine tab therapy pack 10 mg (7 tabs).....</b>	<b>23</b>	<b>metoprolol tartrate tab 25 mg.....</b>	<b>12</b>
		<b>metoprolol tartrate tab 50 mg (Lopressor).....</b>	<b>12</b>
		<b>metoprolol tartrate tab 100 mg (Lopressor).....</b>	<b>12</b>

<b>metronidazole tab 250 mg (Flagyl).....</b>	<b>3</b>	NEUPOGEN- filgrastim soln prefilled syringe 480 mcg/0.8ml (600 mcg/ml).....	<b>29</b>
<b>metronidazole tab 500 mg (Flagyl).....</b>	<b>3</b>	<b>nevirapine tab 200 mg (Viramune).....</b>	<b>2</b>
MIGRAL- dihydroergotamine mesylate nasal spray 4 mg/ml.....	26	NEXAVAR- sorafenib tosylate tab 200 mg (base equivalent).....	4
<b>minocycline hcl cap 50 mg (Minocin).....</b>	<b>1</b>	NEXIUM- esomeprazole magnesium for delayed release susp packet 5 mg.....	19
<b>minoxidil tab 2.5 mg.....</b>	<b>14</b>	NEXIUM- esomeprazole magnesium for delayed release susp packet 10 mg.....	19
<b>minoxidil tab 10 mg.....</b>	<b>14</b>	NEXIUM- esomeprazole magnesium for delayed release susp packet 20 mg.....	19
<b>mirtazapine tab 15 mg (Remeron).....</b>	<b>21</b>	NEXIUM- esomeprazole magnesium for delayed release susp packet 40 mg.....	19
<b>mirtazapine tab 30 mg (Remeron).....</b>	<b>21</b>	NEXIUM- esomeprazole magnesium for delayed release susp pack 2.5 mg.....	19
<b>mirtazapine tab 45 mg (Remeron).....</b>	<b>21</b>	NEXLETOL- bempedoic acid tab 180 mg.....	15
<b>misoprostol tab 100 mcg (Cytotec).....</b>	<b>18</b>	NICOTROL INHALER- nicotine inhaler system 10 mg (4 mg delivered).....	23
<b>misoprostol tab 200 mcg (Cytotec).....</b>	<b>19</b>	NICOTROL NS- nicotine nasal spray 10 mg/ml (0.5 mg/ spray).....	23
MITIGARE- colchicine cap 0.6 mg.....	26	<b>nifedipine tab er 24hr 30 mg (Adalat cc).....</b>	<b>12</b>
<b>mometasone furoate oint 0.1% (Elocon).....</b>	<b>36</b>	<b>nifedipine tab er 24hr osmotic release 30 mg (Procardia xl).....</b>	<b>12</b>
MONONINE- coagulation factor ix for inj 1000 unit.....	33	<b>nifedipine tab er 24hr osmotic release 60 mg (Procardia xl).....</b>	<b>12</b>
<b>montelukast sodium chew tab 4 mg (base equiv) (Singulair).....</b>	<b>18</b>	<b>nitrofurantoin monohydrate macrocrystalline cap 100 mg (Macrobid).....</b>	<b>19</b>
<b>montelukast sodium chew tab 5 mg (base equiv) (Singulair).....</b>	<b>18</b>	<b>nitroglycerin td patch 24hr 0.2 mg/hr (Nitro-dur).....</b>	<b>11</b>
<b>montelukast sodium tab 10 mg (base equiv) (Singulair).....</b>	<b>18</b>	NITYR- nitisinone tab 2 mg.....	11
<b>morphine sulfate oral soln 10 mg/5ml.....</b>	<b>24</b>	NITYR- nitisinone tab 5 mg.....	11
<b>morphine sulfate tab er 15 mg (Ms contin).....</b>	<b>24</b>	NITYR- nitisinone tab 10 mg.....	11
MULTAQ- dronedarone hcl tab 400 mg (base equivalent).....	13	NIVESTYM- filgrastim-aafi inj 300 mcg/ml.....	29
<b>mupirocin oint 2% (Bactroban).....</b>	<b>36</b>	NIVESTYM- filgrastim-aafi inj 480 mcg/1.6ml (300 mcg/ ml).....	29
MYLERAN- busulfan tab 2 mg.....	4	NIVESTYM- filgrastim-aafi soln prefilled syringe 300 mcg/0.5ml.....	29
<b>N</b>		NIVESTYM- filgrastim-aafi soln prefilled syringe 480 mcg/0.8ml.....	29
<b>nabumetone tab 500 mg.....</b>	<b>26</b>	NORDITROPIN FLEXPRESS- somatropin inj 5 mg/1.5ml.....	11
<b>nabumetone tab 750 mg.....</b>	<b>26</b>	NORDITROPIN FLEXPRESS- somatropin inj 10 mg/1.5ml.....	11
<b>naproxen tab ec 375 mg (Ec-naprosyn).....</b>	<b>26</b>	NORDITROPIN FLEXPRESS- somatropin inj 15 mg/1.5ml.....	11
<b>naproxen tab ec 500 mg (Ec-naprosyn).....</b>	<b>26</b>	NORDITROPIN FLEXPRESS- somatropin inj 30 mg/3ml.....	11
<b>naproxen tab 250 mg (Naprosyn).....</b>	<b>26</b>	<b>norethindrone &amp; ethinyl estradiol tab 1 mg-35 mcg (Norinyl 1+35).....</b>	<b>7</b>
<b>naproxen tab 375 mg (Naprosyn).....</b>	<b>26</b>	<b>norethindrone ace &amp; ethinyl estradiol-fe tab 1 mg-20 mcg (Loestrin fe 1/20).....</b>	<b>7</b>
<b>naproxen tab 500 mg (Naprosyn).....</b>	<b>26</b>	<b>norethindrone ace &amp; ethinyl estradiol-fe tab 1.5 mg-30 mcg (Loestrin fe 1.5/30).....</b>	<b>7</b>
NARCAN- naloxone hcl nasal spray 4 mg/0.1ml.....	36	<b>norethindrone ace &amp; ethinyl estradiol tab 1 mg-20 mcg (Loestrin 1/20-21).....</b>	<b>7</b>
NATACYN- natamycin ophth susp 5%.....	35	<b>norethindrone tab 0.35 mg (Nor-qd).....</b>	<b>7</b>
<b>neomycin-polymyxin-dexamethasone ophth oint 0.1% (Maxitrol).....</b>	<b>35</b>		
<b>neomycin-polymyxin-dexamethasone ophth susp 0.1% (Maxitrol).....</b>	<b>35</b>		
<b>neomycin sulfate tab 500 mg.....</b>	<b>1</b>		
NEULASTA ONPRO KIT- pegfilgrastim soln prefilled syringe kit 6 mg/0.6ml.....	29		
NEULASTA- pegfilgrastim soln prefilled syringe 6 mg/0.6ml.....	29		
NEUPOGEN- filgrastim inj 300 mcg/ml.....	29		
NEUPOGEN- filgrastim inj 480 mcg/1.6ml (300 mcg/ml).....	29		
NEUPOGEN- filgrastim soln prefilled syringe 300 mcg/0.5ml.....	29		

<b>norgestimate &amp; ethinyl estradiol tab 0.25 mg-35 mcg (Ortho-cyclen).....</b>	<b>7</b>	NUBEQA- darolutamide tab 300 mg.....	<b>4</b>
<b>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg (Ortho tri-cyclen).....</b>	<b>7</b>	NUVARING- etonogestrel-ethinyl estradiol va ring 0.120-0.015 mg/24hr.....	<b>7</b>
<b>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg (Ortho tri-cyclen lo).....</b>	<b>7</b>	NUWIQ- antihemophil fact rcmb(bdd-rfviii,sim) for inj kit 1000 unit.....	<b>33</b>
<b>nortriptyline hcl cap 10 mg (Pamelor).....</b>	<b>21</b>	NUWIQ- antihemophil fact rcmb(bdd-rfviii,sim) for inj kit 2000 unit.....	<b>33</b>
<b>nortriptyline hcl cap 25 mg (Pamelor).....</b>	<b>21</b>	NUWIQ- antihemophil fact rcmb(bdd-rfviii,sim) for inj kit 2500 unit.....	<b>33</b>
<b>nortriptyline hcl cap 50 mg (Pamelor).....</b>	<b>21</b>	NUWIQ- antihemophil fact rcmb(bdd-rfviii,sim) for inj kit 3000 unit.....	<b>33</b>
<b>nortriptyline hcl cap 75 mg (Pamelor).....</b>	<b>21</b>	NUWIQ- antihemophil fact rcmb(bdd-rfviii,sim) for inj kit 4000 unit.....	<b>34</b>
NORVIR- ritonavir oral soln 80 mg/ml.....	2	NUWIQ- antihemophil fact rcmb (bdd-rfviii,sim) for inj kit 250 unit.....	<b>33</b>
NORVIR- ritonavir powder packet 100 mg.....	2	NUWIQ- antihemophil fact rcmb (bdd-rfviii,sim) for inj kit 500 unit.....	<b>33</b>
NOVOEIGHT- antihemophilic fact rcmb (bd trunc-rfviii) for inj 250 unit.....	33	NUWIQ- antihemophilic factor rcmb (bdd-rfviii,sim) for inj 250 unit.....	<b>33</b>
NOVOEIGHT- antihemophilic fact rcmb (bd trunc-rfviii) for inj 500 unit.....	33	NUWIQ- antihemophilic factor rcmb (bdd-rfviii,sim) for inj 500 unit.....	<b>33</b>
NOVOEIGHT- antihemophilic fact rcmb (bd trunc-rfviii) for inj 1000 unit.....	33	NUWIQ- antihemophilic factor rcmb (bdd-rfviii,sim) for inj 1000 unit.....	<b>33</b>
NOVOEIGHT- antihemophilic fact rcmb (bd trunc-rfviii) for inj 1500 unit.....	33	NUWIQ- antihemophilic factor rcmb (bdd-rfviii,sim) for inj 2000 unit.....	<b>33</b>
NOVOEIGHT- antihemophilic fact rcmb (bd trunc-rfviii) for inj 2000 unit.....	33	NUWIQ- antihemophilic factor rcmb (bdd-rfviii,sim) for inj 2500 unit.....	<b>33</b>
NOVOEIGHT- antihemophilic fact rcmb (bd trunc-rfviii) for inj 3000 unit.....	33	NUWIQ- antihemophilic factor rcmb (bdd-rfviii,sim) for inj 3000 unit.....	<b>33</b>
NOVOLIN 70/30 FLEXPEN- insulin nph & regular susp pen-inj 100 unit/ml (70-30).....	10	NUWIQ- antihemophilic factor rcmb (bdd-rfviii,sim) for inj 3500 unit.....	<b>33</b>
NOVOLIN 70/30- insulin nph isophane & regular human inj 100 unit/ml (70-30).....	10	NUWIQ- antihemophilic factor rcmb (bdd-rfviii,sim) for inj 4000 unit.....	<b>33</b>
NOVOLIN N FLEXPEN- insulin nph (human) (isophane) susp pen-injector 100 unit/ml.....	10	NUWIQ- antihemophilic factor rcmb (bdd-rfviii,sim) for inj 4500 unit.....	<b>33</b>
NOVOLIN N- insulin nph (human) (isophane) inj 100 unit/ml.....	10	NUWIQ- antihemophilic factor rcmb (bdd-rfviii,sim) for inj 5000 unit.....	<b>33</b>
NOVOLIN R FLEXPEN- insulin regular (human) soln pen-injector 100 unit/ml.....	10	NUWIQ- antihemophilic factor rcmb (bdd-rfviii,sim) for inj 5500 unit.....	<b>33</b>
NOVOLIN R- insulin regular (human) inj 100 unit/ml.....	10	NUWIQ- antihemophilic factor rcmb (bdd-rfviii,sim) for inj 6000 unit.....	<b>33</b>
NOVOLOG FLEXPEN- insulin aspart soln pen-injector 100 unit/ml.....	9	NUWIQ- antihemophilic factor rcmb (bdd-rfviii,sim) for inj 6500 unit.....	<b>33</b>
NOVOLOG- insulin aspart inj 100 unit/ml.....	9	NUWIQ- antihemophilic factor rcmb (bdd-rfviii,sim) for inj 7000 unit.....	<b>33</b>
NOVOLOG MIX 70/30- insulin aspart prot & aspart (human) inj 100 unit/ml (70-30).....	10	O	
NOVOLOG MIX 70/30 PREFILL- insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30).....	10	OBIZUR- antihemophilic factor (recomb porc) rpfviii for inj 500 unit.....	<b>34</b>
NOVOLOG PENFILL- insulin aspart soln cartridge 100 unit/ml.....	9	ODEFSEY- emtricitabine-rilpivirine-tenofovir af tab 200-25-25 mg.....	<b>2</b>
NOVOSEVEN RT- coagulation factor viia (recomb) for inj 1 mg (1000 mcg).....	33	olanzapine tab 2.5 mg (Zyprexa).....	<b>21</b>
NOVOSEVEN RT- coagulation factor viia (recomb) for inj 2 mg (2000 mcg).....	33	olanzapine tab 5 mg (Zyprexa).....	<b>21</b>
NOVOSEVEN RT- coagulation factor viia (recomb) for inj 5 mg (5000 mcg).....	33	olanzapine tab 7.5 mg (Zyprexa).....	<b>21</b>
NOVOSEVEN RT- coagulation factor viia (recomb) for inj 8 mg (8000 mcg).....	33	olanzapine tab 10 mg (Zyprexa).....	<b>22</b>
NOXAFIL- posaconazole susp 40 mg/ml.....	1	olanzapine tab 15 mg (Zyprexa).....	<b>22</b>
		olanzapine tab 20 mg (Zyprexa).....	<b>22</b>
		omeprazole cap delayed release 10 mg (Prilosec).....	<b>19</b>
		omeprazole cap delayed release 20 mg (Prilosec).....	<b>19</b>
		omeprazole cap delayed release 40 mg (Prilosec).....	<b>19</b>
		ondansetron hcl tab 4 mg (Zofran).....	<b>19</b>
		ondansetron hcl tab 8 mg (Zofran).....	<b>19</b>
		ondansetron orally disintegrating tab 4 mg (Zofran odt).....	<b>19</b>

<b>ondansetron orally disintegrating tab 8 mg (Zofran odt)</b>	19	<b>phenobarbital tab 100 mg</b>	22
ONGLYZA- saxagliptin hcl tab 2.5 mg (base equiv)	9	phentermine hcl cap 15 mg	22
ONGLYZA- saxagliptin hcl tab 5 mg (base equiv)	9	phentermine hcl cap 30 mg	22
OPSUMIT- macitentan tab 10 mg	16	phentermine hcl cap 37.5 mg (Adipex-p)	22
ORFADIN- nitisinone cap 20 mg	11	phentermine hcl tab 37.5 mg (Adipex-p)	22
ORFADIN- nitisinone susp 4 mg/ml	11	pioglitazone hcl tab 15 mg (base equiv) (Actos)	9
ORILISSA- elagolix sodium tab 150 mg (base equiv)	11	pioglitazone hcl tab 30 mg (base equiv) (Actos)	9
ORILISSA- elagolix sodium tab 200 mg (base equiv)	11	pioglitazone hcl tab 45 mg (base equiv) (Actos)	9
<b>orphenadrine citrate tab er 12hr 100 mg</b>	28	PIQRAY 250MG DAILY DOSE- alpelisib tab pack 250 mg daily dose (200 mg & 50 mg tabs)	4
OTEZLA- apremilast tab 30 mg	26	PIQRAY 300MG DAILY DOSE- alpelisib tab pack 300 mg daily dose (2x150 mg tab)	4
OTEZLA- apremilast tab starter therapy pack 10 mg & 20 mg & 30 mg	26	PIQRAY 200MG DAILY DOSE- alpelisib tab therapy pack 200 mg daily dose	4
<b>oxcarbazepine tab 150 mg (Trileptal)</b>	27	PLEGRIDY- peginterferon beta-1a soln pen-injector 125 mcg/0.5ml	23
<b>oxybutynin chloride syrup 5 mg/5ml</b>	20	PLEGRIDY- peginterferon beta-1a soln prefilled syringe 125 mcg/0.5ml	23
<b>oxybutynin chloride tab er 24hr 10 mg (Ditropan xl)</b>	20	PLEGRIDY STARTER PACK- peginterferon beta-1a soln pen-inj 63 & 94 mcg/0.5ml pack	23
<b>oxycodone hcl tab 5 mg (Roxicodone)</b>	24	PLEGRIDY STARTER PACK- peginterferon beta-1a soln pref syr 63 & 94 mcg/0.5ml pack	24
<b>oxycodone w/ acetaminophen tab 5-325 mg (Percocet)</b>	25	<b>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1% (Polytrim)</b>	35
OZEMPIC- semaglutide soln pen-inj 1 mg/dose (2 mg/1.5ml)	9	<b>potassium chloride microencapsulated crys er tab 10 meq</b>	28
OZEMPIC- semaglutide soln pen-inj 0.25 or 0.5 mg/dose (2 mg/1.5ml)	9	<b>potassium chloride microencapsulated crys er tab 20 meq</b>	28
<b>P</b>		<b>potassium chloride tab er 10 meq (K-tab)</b>	28
<b>pantoprazole sodium ec tab 20 mg (base equiv) (Protonix)</b>	19	<b>potassium chloride tab er 8 meq (600 mg)</b>	28
<b>pantoprazole sodium ec tab 40 mg (base equiv) (Protonix)</b>	19	<b>pramipexole dihydrochloride tab 0.125 mg (Mirapex)</b>	27
PAROMOMYCIN SULFATE- paromomycin sulfate cap 250 mg	1	<b>pramipexole dihydrochloride tab 0.25 mg (Mirapex)</b>	27
paroxetine hcl tab 10 mg (Paxil)	21	<b>pramipexole dihydrochloride tab 0.5 mg (Mirapex)</b>	27
paroxetine hcl tab 20 mg (Paxil)	21	<b>pramipexole dihydrochloride tab 0.75 mg (Mirapex)</b>	27
paroxetine hcl tab 30 mg (Paxil)	21	<b>pramipexole dihydrochloride tab 1 mg (Mirapex)</b>	27
paroxetine hcl tab 40 mg (Paxil)	21	<b>pravastatin sodium tab 1.5 mg (Mirapex)</b>	27
PAZEO- olopatadine hcl ophth soln 0.7% (base equivalent)	35	<b>pravastatin sodium tab 10 mg</b>	15
PEGASYS- peginterferon alfa-2a inj 180 mcg/ml	2	<b>pravastatin sodium tab 20 mg (Pravachol)</b>	15
PEGASYS- peginterferon alfa-2a inj 180 mcg/0.5ml	2	<b>pravastatin sodium tab 40 mg (Pravachol)</b>	15
PEGASYS PROCLICK- peginterferon alfa-2a inj 180 mcg/0.5ml	2	<b>pravastatin sodium tab 80 mg (Pravachol)</b>	15
<b>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm (Golytely)</b>	18	<b>PREDNISOLONE ACETATE- prednisolone acetate ophth susp 1%</b>	35
<b>peg 3350-kcl-sod bicarb-nacl for soln 420 gm (Nulytely/flavor pack)</b>	18	<b>PREDNISOLONE SODIUM PHOSP- prednisolone sodium phosphate ophth soln 1%</b>	35
penicillin v potassium tab 250 mg	1	<b>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)</b>	6
penicillin v potassium tab 500 mg	1	<b>PREDNISONE INTENSOL- prednisone conc 5 mg/ml</b>	6
perindopril erbumine tab 2 mg	14	<b>PREDNISONE- prednisone oral soln 5 mg/5ml</b>	6
perindopril erbumine tab 4 mg (Aceon)	14	<b>prednisone tab 1 mg</b>	6
phenobarbital tab 15 mg	22	<b>prednisone tab 2.5 mg</b>	6
phenobarbital tab 30 mg	22		
phenobarbital tab 60 mg	22		

<b>prednisone tab 5 mg.....</b>	<b>6</b>	<b>PROFILNINE- factor ix complex for inj 1500 unit.....</b>	<b>34</b>
<b>prednisone tab 10 mg.....</b>	<b>6</b>	<b>PROFILNINE SD- factor ix complex for inj 1000 unit.....</b>	<b>34</b>
<b>prednisone tab 20 mg.....</b>	<b>6</b>	<b>PROFILNINE SD- factor ix complex for inj 1500 unit.....</b>	<b>34</b>
PREMARIN- estrogens, conjugated tab 0.3 mg.....	6	PROGLYCEM- diazoxide susp 50 mg/ml.....	9
PREMARIN- estrogens, conjugated tab 0.45 mg.....	6	PROGRAF- tacrolimus cap 0.5 mg.....	37
PREMARIN- estrogens, conjugated tab 0.625 mg.....	6	PROGRAF- tacrolimus cap 1 mg.....	37
PREMARIN- estrogens, conjugated tab 0.9 mg.....	6	PROGRAF- tacrolimus cap 5 mg.....	37
PREMARIN- estrogens, conjugated tab 1.25 mg.....	6	PROGRAF- tacrolimus packet for susp 0.2 mg.....	37
PREMPHASE- conj est 0.625(14)/conj est-medroxypro ac tab 0.625-5mg(14).....	6	PROGRAF- tacrolimus packet for susp 1 mg.....	37
PREMPRO- conjugated estrogen-medroxyprogesterone acetate tab 0.3-1.5 mg.....	6	<b>promethazine hcl syrup 6.25 mg/5ml.....</b>	<b>16</b>
PREMPRO- conjugated estrogen-medroxyprogesterone acetate tab 0.45-1.5 mg.....	6	<b>promethazine hcl tab 12.5 mg.....</b>	<b>16</b>
PREMPRO- conjugated estrogen-medroxyprogesterone acetate tab 0.625-2.5 mg.....	6	<b>promethazine hcl tab 25 mg.....</b>	<b>16</b>
PREMPRO- conjugated estrogen-medroxyprogesterone acetate tab 0.625-5 mg.....	6	<b>promethazine hcl tab 50 mg.....</b>	<b>16</b>
PRENATAL 19- prenatal vit w/ dss-fe fumarate-fa tab 29-1 mg.....	28	<b>promethazine w/ codeine syrup 6.25-10 mg/5ml.....</b>	<b>16</b>
PRENATAL 19- prenatal vit w/ fe fumarate-fa chew tab 29-1 mg.....	28	PROPRANOLOL HCL- propranolol hcl oral soln 20 mg/5ml.....	12
PRENATAL VITAMINS PLUS LO- prenatal vit w/ fe fumarate-fa tab 27-1 mg.....	28	PROPRANOLOL HCL- propranolol hcl oral soln 40 mg/5ml.....	12
PREZISTA- darunavir ethanolate susp 100 mg/ml (base equiv).....	2	<b>propranolol hcl tab 10 mg.....</b>	<b>12</b>
PREZISTA- darunavir ethanolate tab 75 mg (base equiv).....	2	<b>propranolol hcl tab 20 mg.....</b>	<b>12</b>
PREZISTA- darunavir ethanolate tab 150 mg (base equiv).....	2	PULMOZYME- dornase alfa inhal soln 1 mg/ml.....	18
PREZISTA- darunavir ethanolate tab 600 mg (base equiv).....	2	PURIXAN- mercaptopurine susp 2000 mg/100ml (20 mg/ ml).....	4
PREZISTA- darunavir ethanolate tab 800 mg (base equiv).....	3		
PRIFTIN- rifapentine tab 150 mg.....	1	<b>Q</b>	
<b>primidone tab 50 mg (Mysoline).....</b>	<b>27</b>	<b>quetiapine fumarate tab 25 mg (Seroquel).....</b>	<b>22</b>
<b>primidone tab 250 mg (Mysoline).....</b>	<b>27</b>	<b>quetiapine fumarate tab 50 mg (Seroquel).....</b>	<b>22</b>
PROAIR HFA- albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv).....	18	<b>quetiapine fumarate tab 100 mg (Seroquel).....</b>	<b>22</b>
PROAIR RESPICLICK- albuterol sulfate aer pow ba 108 mcg/act (90 mcg base equiv).....	18	<b>quetiapine fumarate tab 200 mg (Seroquel).....</b>	<b>22</b>
<b>procchlorperazine maleate tab 5 mg (base equivalent) (Compazine).....</b>	<b>22</b>	<b>quetiapine fumarate tab 300 mg (Seroquel).....</b>	<b>22</b>
<b>procchlorperazine maleate tab 10 mg (base equivalent) (Compazine).....</b>	<b>22</b>	<b>quetiapine fumarate tab 400 mg (Seroquel).....</b>	<b>22</b>
PROCIT- epoetin alfa inj 2000 unit/ml.....	29	quinapril hcl tab 5 mg (Accupril).....	14
PROCIT- epoetin alfa inj 3000 unit/ml.....	29	quinapril hcl tab 10 mg (Accupril).....	14
PROCIT- epoetin alfa inj 4000 unit/ml.....	29	quinapril hcl tab 20 mg (Accupril).....	14
PROCIT- epoetin alfa inj 10000 unit/ml.....	29	quinapril hcl tab 40 mg (Accupril).....	14
PROCIT- epoetin alfa inj 20000 unit/ml.....	29	QVAR REDIHALER- beclomethasone diprop hfa breath act inh aer 40 mcg/act.....	18
PROCIT- epoetin alfa inj 40000 unit/ml.....	29	QVAR REDIHALER- beclomethasone diprop hfa breath act inh aer 80 mcg/act.....	18
PROFILNINE- factor ix complex for inj 500 unit.....	34		
PROFILNINE- factor ix complex for inj 1000 unit.....	34	<b>R</b>	
		<b>ramipril cap 1.25 mg (Altace).....</b>	<b>14</b>
		<b>ramipril cap 2.5 mg (Altace).....</b>	<b>14</b>
		<b>ramipril cap 5 mg (Altace).....</b>	<b>14</b>
		<b>ramipril cap 10 mg (Altace).....</b>	<b>14</b>
		RAPAMUNE- sirolimus oral soln 1 mg/ml.....	37
		REBIF- interferon beta-1a soln pref syr 22 mcg/0.5ml (12mu/ml).....	24
		REBIF- interferon beta-1a soln pref syr 44 mcg/0.5ml (24mu/ml).....	24
		REBIF REBIDOSE- interferon beta-1a soln auto-inj 22 mcg/0.5ml (12mu/ml).....	24

REBIF REBIDOSE- interferon beta-1a soln auto-inj 44 mcg/0.5ml (24mu/ml).....	24
REBIF REBIDOSE TITRATION- interferon beta-1a auto-inj 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml.....	24
REBIF TITRATION PACK- interferon beta-1a pref syr 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml.....	24
REBINYN- coagulation factor ix recomb glycopegylated for inj 500 unt.....	34
REBINYN- coagulation factor ix recomb glycopegylated for inj 1000 unt.....	34
REBINYN- coagulation factor ix recomb glycopegylated for inj 2000 unt.....	34
RECOMBINATE- antihemophilic factor (recombinant) for inj 220-400 unit.....	34
RECOMBINATE- antihemophilic factor (recombinant) for inj 401-800 unit.....	34
RECOMBINATE- antihemophilic factor (recombinant) for inj 801-1240 unit.....	34
RECOMBINATE- antihemophilic factor (recombinant) for inj 1241-1800 unit.....	34
RECOMBINATE- antihemophilic factor (recombinant) for inj 1801-2400 unit.....	34
REPATHA- evolocumab subcutaneous soln prefilled syringe 140 mg/ml.....	15
REPATHA PUSHTRONEX SYSTEM- evolocumab subcutaneous soln cartridge/infusor 420 mg/3.5ml.....	15
REPATHA SURECLICK- evolocumab subcutaneous soln auto-injector 140 mg/ml.....	15
RETACRIT- epoetin alfa-epbx inj 2000 unit/ml.....	30
RETACRIT- epoetin alfa-epbx inj 3000 unit/ml.....	30
RETACRIT- epoetin alfa-epbx inj 4000 unit/ml.....	30
RETACRIT- epoetin alfa-epbx inj 10000 unit/ml.....	30
RETACRIT- epoetin alfa-epbx inj 40000 unit/ml.....	30
REVCOVI- elapogadimase-lvrl im soln 2.4 mg/1.5ml (1.6 mg/ml).....	11
REVLIMID- lenalidomide cap 5 mg.....	37
REVLIMID- lenalidomide cap 10 mg.....	37
REVLIMID- lenalidomide cap 15 mg.....	37
REVLIMID- lenalidomide cap 20 mg.....	37
REVLIMID- lenalidomide cap 25 mg.....	37
REVLIMID- lenalidomide caps 2.5 mg.....	37
RINVOQ- upadacitinib tab er 24hr 15 mg.....	26
risperidone tab 0.25 mg (Risperdal).....	22
risperidone tab 0.5 mg (Risperdal).....	22
risperidone tab 1 mg (Risperdal).....	22
risperidone tab 2 mg (Risperdal).....	22
risperidone tab 3 mg (Risperdal).....	22
risperidone tab 4 mg (Risperdal).....	22
RIXUBIS- coagulation factor ix (recombinant) for inj 250 unit.....	34
RIXUBIS- coagulation factor ix (recombinant) for inj 500 unit.....	34
RIXUBIS- coagulation factor ix (recombinant) for inj 1000 unit.....	34
RIXUBIS- coagulation factor ix (recombinant) for inj 2000 unit.....	34
RIXUBIS- coagulation factor ix (recombinant) for inj 3000 unit.....	34
<b>rizatriptan benzoate oral disintegrating tab 5 mg (base eq) (Maxalt-mlt)</b> .....	26
<b>rizatriptan benzoate oral disintegrating tab 10 mg (base eq) (Maxalt-mlt)</b> .....	26
<b>rizatriptan benzoate tab 5 mg (base equivalent) (Maxalt)</b> .....	26
<b>rizatriptan benzoate tab 10 mg (base equivalent) (Maxalt)</b> .....	26
ropinirole hydrochloride tab 0.25 mg (Requip).....	27
ropinirole hydrochloride tab 0.5 mg (Requip).....	27
ropinirole hydrochloride tab 1 mg (Requip).....	27
ropinirole hydrochloride tab 2 mg (Requip).....	27
ropinirole hydrochloride tab 3 mg (Requip).....	27
ropinirole hydrochloride tab 4 mg (Requip).....	28
ropinirole hydrochloride tab 5 mg (Requip).....	28
rosuvastatin calcium tab 5 mg (Crestor).....	15
rosuvastatin calcium tab 10 mg (Crestor).....	16
rosuvastatin calcium tab 20 mg (Crestor).....	16
<b>rosuvastatin calcium tab 40 mg (Crestor)</b> .....	16
ROZLYTREK- entrectinib cap 100 mg.....	4
ROZLYTREK- entrectinib cap 200 mg.....	4
RUBRACA- rucaparib camsylate tab 200 mg (base equivalent).....	5
RUBRACA- rucaparib camsylate tab 250 mg (base equivalent).....	5
RUBRACA- rucaparib camsylate tab 300 mg (base equivalent).....	5
RYBELSUS- semaglutide tab 3 mg.....	9
RYBELSUS- semaglutide tab 7 mg.....	9
RYBELSUS- semaglutide tab 14 mg.....	9
RYDAPT- midostaurin cap 25 mg.....	5
<b>S</b>	
<b>selenium sulfide lotion 2.5%</b> .....	36
SE-NATAL 19- prenatal vit w/ dss-fe fumarate-fa tab 29-1 mg.....	28
SE-NATAL 19- prenatal vit w/ fe fumarate-fa chew tab 29-1 mg.....	28
SEREVENT DISKUS- salmeterol xinafoate aer pow ba 50 mcg/dose (base equiv).....	18
sertraline hcl tab 25 mg (Zoloft).....	21
sertraline hcl tab 50 mg (Zoloft).....	21
sertraline hcl tab 100 mg (Zoloft).....	21
<b>silver sulfadiazine cream 1% (Silvadene)</b> .....	36
SIMBRINZA- brinzolamide-brimonidine tartrate ophth susp 1-0.2%.....	35

SIMPONI- golimumab subcutaneous soln auto-injector 100 mg/ml.....	26	STRENSIQ- asfotase alfa subcutaneous inj 28 mg/0.7ml.....	11
SIMPONI- golimumab subcutaneous soln prefilled syringe 100 mg/ml.....	26	STRENSIQ- asfotase alfa subcutaneous inj 40 mg/ml.....	11
<b>simvastatin tab 5 mg (Zocor)</b> .....	<b>16</b>	STRENSIQ- asfotase alfa subcutaneous inj 80 mg/0.8ml.....	11
<b>simvastatin tab 10 mg (Zocor)</b> .....	<b>16</b>	STRIVERDI RESPIMAT- olodaterol hcl inhal aerosol soln 2.5 mcg/act (base equiv).....	18
<b>simvastatin tab 20 mg (Zocor)</b> .....	<b>16</b>	SULFADIAZINE- sulfadiazine tab 500 mg.....	1
<b>simvastatin tab 40 mg (Zocor)</b> .....	<b>16</b>	<b>sulfamethoxazole-trimethoprim tab 400-80 mg (Bactrim)</b> .....	<b>3</b>
<b>simvastatin tab 80 mg (Zocor)</b> .....	<b>16</b>	<b>sulfamethoxazole-trimethoprim tab 800-160 mg (Bactrim ds)</b> .....	<b>3</b>
SIVEXTRO- tedizolid phosphate tab 200 mg.....	3	<b>sulindac tab 150 mg</b> .....	<b>26</b>
SKYRIZI- risankizumab-rzaa sol prefilled syringe 2 x 75 mg/0.83ml kit.....	36	<b>sulindac tab 200 mg</b> .....	<b>26</b>
SOLIQUA 100/33- insulin glargine-lixiseotide sol pen-inj 100-33 unit-mcg/ml.....	9	<b>sumatriptan succinate tab 25 mg (Imitrex)</b> .....	<b>26</b>
SOOLANTRA- ivermectin cream 1%.....	36	<b>sumatriptan succinate tab 50 mg (Imitrex)</b> .....	<b>26</b>
<b>sotalol hcl (afib/afl) tab 80 mg (Betapace af)</b> .....	<b>12</b>	<b>sumatriptan succinate tab 100 mg (Imitrex)</b> .....	<b>26</b>
<b>sotalol hcl (afib/afl) tab 160 mg (Betapace af)</b> .....	<b>12</b>	SUNOSI- solriamfetol hcl tab 75 mg (base equiv).....	22
<b>sotalol hcl tab 240 mg</b> .....	<b>12</b>	SUNOSI- solriamfetol hcl tab 150 mg (base equiv).....	22
<b>sotalol hcl tab 80 mg (Betapace)</b> .....	<b>12</b>	SUTENT- sunitinib malate cap 12.5 mg (base equivalent).....	5
<b>sotalol hcl tab 120 mg (Betapace)</b> .....	<b>12</b>	SUTENT- sunitinib malate cap 25 mg (base equivalent).....	5
<b>sotalol hcl tab 160 mg (Betapace)</b> .....	<b>12</b>	SUTENT- sunitinib malate cap 37.5 mg (base equivalent).....	5
SOVALDI- sofosbuvir pellet pack 150 mg.....	3	SUTENT- sunitinib malate cap 50 mg (base equivalent).....	5
SOVALDI- sofosbuvir pellet pack 200 mg.....	3	SYMBICORT- budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act.....	18
SOVALDI- sofosbuvir tab 200 mg.....	3	SYMBICORT- budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act.....	18
SOVALDI- sofosbuvir tab 400 mg.....	3	SYMDEKO- tezacaftor-ivacaftor 50-75 mg & ivacaftor 75 mg tab tbpk.....	18
SPIRIVA HANDIHALER- tiotropium bromide monohydrate inhal cap 18 mcg (base equiv).....	18	SYMDEKO- tezacaftor-ivacaftor 100-150 mg & ivacaftor 150 mg tab tbpk.....	18
SPIRIVA RESPIMAT- tiotropium bromide monohydrate inhal aerosol 1.25 mcg/act.....	18	SYMFI- efavirenz-lamivudine-tenofovir df tab 600-300-300 mg.....	3
SPIRIVA RESPIMAT- tiotropium bromide monohydrate inhal aerosol 2.5 mcg/act.....	18	SYMFI LO- efavirenz-lamivudine-tenofovir df tab 400-300-300 mg.....	3
<b>spironolactone tab 25 mg (Aldactone)</b> .....	<b>15</b>	SYMJEPI- epinephrine soln prefilled syringe 0.15 mg/0.3ml (1:2000).....	15
<b>spironolactone tab 50 mg (Aldactone)</b> .....	<b>15</b>	SYMJEPI- epinephrine solution prefilled syringe 0.3 mg/0.3ml (1:1000).....	15
<b>spironolactone tab 100 mg (Aldactone)</b> .....	<b>15</b>	SYMPROIC- naldemedine tosylate tab 0.2 mg (base equivalent).....	19
SPRYCEL- dasatinib tab 20 mg.....	5	SYNJARDY- empagliflozin-metformin hcl tab 12.5-1000 mg.....	9
SPRYCEL- dasatinib tab 50 mg.....	5	SYNJARDY- empagliflozin-metformin hcl tab 12.5-500 mg.....	9
SPRYCEL- dasatinib tab 70 mg.....	5	SYNJARDY- empagliflozin-metformin hcl tab 5-500 mg.....	9
SPRYCEL- dasatinib tab 80 mg.....	5	SYNJARDY- empagliflozin-metformin hcl tab 5-1000 mg.....	9
SPRYCEL- dasatinib tab 100 mg.....	5	SYNJARDY XR- empagliflozin-metformin hcl tab er 24hr 5-1000 mg.....	9
SPRYCEL- dasatinib tab 140 mg.....	5		
<b>stannous fluoride conc 0.63%</b> .....	<b>35</b>		
STELARA- ustekinumab inj 45 mg/0.5ml.....	36		
STELARA- ustekinumab soln prefilled syringe 45 mg/0.5ml.....	36		
STELARA- ustekinumab soln prefilled syringe 90 mg/ ml.....	36		
STIMATE- desmopressin acetate nasal soln 1.5 mg/ ml.....	11		
STIOLTO RESPIMAT- tiotropium br-olodaterol inhal aero soln 2.5-2.5 mcg/act.....	18		
STRENSIQ- asfotase alfa subcutaneous inj 18 mg/0.45ml.....	11		

SYNJARDY XR- empagliflozin-metformin hcl tab er 24hr 10-1000 mg.....	9	tizanidine hcl tab 2 mg (base equivalent).....	28
SYNJARDY XR- empagliflozin-metformin hcl tab er 24hr 12.5-1000 mg.....	9	tizanidine hcl tab 4 mg (base equivalent) (Zanaflex).....	28
SYNJARDY XR- empagliflozin-metformin hcl tab er 24hr 25-1000 mg.....	9	tobramycin ophth soln 0.3% (Tobrex).....	35
<b>T</b>		topiramate tab 25 mg (Topamax).....	27
TABLOID- thioguanine tab 40 mg.....	5	topiramate tab 50 mg (Topamax).....	27
TAFINLAR- dabrafenib mesylate cap 50 mg (base equivalent).....	5	topiramate tab 100 mg (Topamax).....	27
TAFINLAR- dabrafenib mesylate cap 75 mg (base equivalent).....	5	topiramate tab 200 mg (Topamax).....	27
TALZENNA- talazoparib tosylate cap 0.25 mg (base equivalent).....	5	torsemide tab 5 mg (Demadex).....	15
TALZENNA- talazoparib tosylate cap 1 mg (base equivalent).....	5	torsemide tab 10 mg (Demadex).....	15
<b>tamsulosin hcl cap 0.4 mg (Flomax)</b> .....	20	torsemide tab 20 mg (Demadex).....	15
TASIGNA- nilotinib hcl cap 50 mg (base equivalent).....	5	torsemide tab 100 mg (Demadex).....	15
TASIGNA- nilotinib hcl cap 150 mg (base equivalent).....	5	TOUJEO MAX SOLOSTAR- insulin glargine soln pen- injector 300 unit/ml (2 unit dial).....	10
TASIGNA- nilotinib hcl cap 200 mg (base equivalent).....	5	TOUJEO SOLOSTAR- insulin glargine soln pen-injector 300 unit/ml (1 unit dial).....	10
TAZORAC- tazarotene cream 0.05%.....	36	TRACLEER- bosentan tab for oral susp 32 mg.....	16
TAZORAC- tazarotene gel 0.05%.....	36	tramadol-acetaminophen tab 37.5-325 mg (Ultracet).....	25
TAZORAC- tazarotene gel 0.1%.....	36	tramadol hcl tab 50 mg (Ultram).....	25
TECFIDERA- dimethyl fumarate capsule delayed release 120 mg.....	24	trandolapril tab 1 mg (Mavik).....	14
TECFIDERA- dimethyl fumarate capsule delayed release 240 mg.....	24	trandolapril tab 2 mg (Mavik).....	14
TECFIDERA STARTER PACK- dimethyl fumarate capsule dr starter pack 120 mg & 240 mg.....	24	trandolapril tab 4 mg (Mavik).....	14
<b>temazepam cap 15 mg (Restoril)</b> .....	22	trazodone hcl tab 50 mg.....	21
<b>temazepam cap 30 mg (Restoril)</b> .....	22	trazodone hcl tab 100 mg.....	21
TEMIXYS- lamivudine-tenofovir disoproxil fumarate tab 300-300 mg.....	3	trazodone hcl tab 150 mg.....	21
<b>terazosin hcl cap 1 mg (base equivalent)</b> .....	14	TRELEGY ELLIPTA- fluticasone-umeclidinium-vilanterol aepb 100-62.5-25 mcg/inh.....	18
<b>terazosin hcl cap 2 mg (base equivalent)</b> .....	14	TREMFYA- guselkumab soln pen-injector 100 mg/ml.....	36
<b>terazosin hcl cap 5 mg (base equivalent)</b> .....	14	TREMFYA- guselkumab soln prefilled syringe 100 mg/ ml.....	36
<b>terazosin hcl cap 10 mg (base equivalent)</b> .....	14	TRESIBA FLEXTOUCH- insulin degludec soln pen-injector 100 unit/ml.....	10
<b>terbinafine hcl tab 250 mg (Lamisil)</b> .....	1	TRESIBA FLEXTOUCH- insulin degludec soln pen-injector 200 unit/ml.....	10
TEST STRIPS – CONTOUR, CONTOUR NEXT.....	36	TRESIBA- insulin degludec inj 100 unit/ml.....	10
<b>tetracaine hcl ophth soln 0.5%</b> .....	35	TRETTEN- coagulation factor xiii a-subunit for inj 2000-3125 unit.....	34
THALOMID- thalidomide cap 50 mg.....	37	TREXALL- methotrexate sodium tab 5 mg (base equiv).....	5
THALOMID- thalidomide cap 100 mg.....	37	TREXALL- methotrexate sodium tab 7.5 mg (base equiv).....	5
THALOMID- thalidomide cap 150 mg.....	37	TREXALL- methotrexate sodium tab 10 mg (base equiv).....	5
THALOMID- thalidomide cap 200 mg.....	37	TREXALL- methotrexate sodium tab 15 mg (base equiv).....	5
thyroid tab 15 mg (1/4 grain) (Armour thyroid).....	11	triamcinolone acetonide cream 0.025%.....	36
thyroid tab 30 mg (1/2 grain) (Armour thyroid).....	11	triamcinolone acetonide cream 0.1%.....	36
thyroid tab 60 mg (1 grain) (Armour thyroid).....	11	triamcinolone acetonide cream 0.5%.....	36
<b>timolol maleate ophth soln 0.25% (Timoptic)</b> .....	35	triamcinolone acetonide oint 0.025%.....	36
<b>timolol maleate ophth soln 0.5% (Timoptic)</b> .....	35	triamcinolone acetonide oint 0.1%.....	36
TIVICAY- dolutegravir sodium tab 10 mg (base equiv).....	3	triamcinolone acetonide oint 0.5%.....	36
TIVICAY- dolutegravir sodium tab 25 mg (base equiv).....	3	triamterene & hydrochlorothiazide cap 37.5-25 mg (Dyazide).....	15
TIVICAY- dolutegravir sodium tab 50 mg (base equiv).....	3		

<b>triamterene &amp; hydrochlorothiazide tab 37.5-25 mg (Maxzide-25).....</b>	<b>15</b>	<b>valsartan-hydrochlorothiazide tab 320-25 mg (Diovan hct).....</b>	<b>14</b>
<b>triamterene &amp; hydrochlorothiazide tab 75-50 mg (Maxzide).....</b>	<b>15</b>	<b>valsartan tab 40 mg (Diovan).....</b>	<b>14</b>
TRIFLURIDINE- trifluridine ophth soln 1%.....	35	<b>valsartan tab 80 mg (Diovan).....</b>	<b>14</b>
<b>trihexyphenidyl hcl tab 2 mg.....</b>	<b>28</b>	<b>valsartan tab 160 mg (Diovan).....</b>	<b>14</b>
<b>trihexyphenidyl hcl tab 5 mg.....</b>	<b>28</b>	<b>valsartan tab 320 mg (Diovan).....</b>	<b>14</b>
TRIKAFTA- elexacaft-tezacaft-ivacaft 100-50-75 mg &ivacaftor 150 mg tbpk.....	18	VELPHORO- sucroferric oxyhydroxide chew tab 500 mg.....	19
<b>trimethoprim tab 100 mg.....</b>	<b>3</b>	VELTASSA- patiromer sorbitex calcium for susp packet 8.4 gm (base eq).....	37
TRULANCE- plecanatide tab 3 mg.....	19	VELTASSA- patiromer sorbitex calcium for susp packet 16.8 gm (base eq).....	37
TRULICITY- dulaglutide soln pen-injector 0.75 mg/0.5ml.....	9	VELTASSA- patiromer sorbitex calcium for susp packet 25.2 gm (base eq).....	37
TRULICITY- dulaglutide soln pen-injector 1.5 mg/0.5ml.....	9	VENCLEXTA STARTING PACK- venetoclax tab therapy starter pack 10 & 50 & 100 mg.....	5
TRUVADA- emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg.....	3	VENCLEXTA- venetoclax tab 10 mg.....	5
TRUVADA- emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg.....	3	VENCLEXTA- venetoclax tab 50 mg.....	5
TRUVADA- emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg.....	3	VENCLEXTA- venetoclax tab 100 mg.....	5
TRUVADA- emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg.....	3	<b>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent) (Effexor xr).....</b>	<b>21</b>
TYMLOS- abaloparatide subcutaneous soln pen-injector 3120 mcg/1.56ml.....	11	<b>venlafaxine hcl cap er 24hr 75 mg (base equivalent) (Effexor xr).....</b>	<b>21</b>
<b>U</b>		<b>venlafaxine hcl cap er 24hr 150 mg (base equivalent) (Effexor xr).....</b>	<b>21</b>
UDENYCA- pegfilgrastim-cbqv soln prefilled syringe 6 mg/0.6ml.....	30	<b>venlafaxine hcl tab 25 mg (base equivalent).....</b>	<b>21</b>
UPTRAVI- selexipag tab 200 mcg.....	16	<b>venlafaxine hcl tab 37.5 mg (base equivalent).....</b>	<b>21</b>
UPTRAVI- selexipag tab 400 mcg.....	16	<b>venlafaxine hcl tab 50 mg (base equivalent).....</b>	<b>21</b>
UPTRAVI- selexipag tab 600 mcg.....	16	<b>venlafaxine hcl tab 75 mg (base equivalent).....</b>	<b>21</b>
UPTRAVI- selexipag tab 800 mcg.....	16	<b>venlafaxine hcl tab 100 mg (base equivalent).....</b>	<b>21</b>
UPTRAVI- selexipag tab 1000 mcg.....	16	VENTOLIN HFA- albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv).....	18
UPTRAVI- selexipag tab 1200 mcg.....	16	<b>verapamil hcl tab er 120 mg (Calan sr).....</b>	<b>12</b>
UPTRAVI- selexipag tab 1400 mcg.....	16	<b>verapamil hcl tab er 180 mg (Calan sr).....</b>	<b>12</b>
UPTRAVI- selexipag tab 1600 mcg.....	16	<b>verapamil hcl tab er 240 mg (Calan sr).....</b>	<b>12</b>
UPTRAVI- selexipag tab therapy pack 200 mcg (140) & 800 mcg (60).....	16	<b>verapamil hcl tab 40 mg.....</b>	<b>12</b>
<b>V</b>		<b>verapamil hcl tab 80 mg (Calan).....</b>	<b>12</b>
<b>valacyclovir hcl tab 1 gm (Valtrex).....</b>	<b>3</b>	<b>verapamil hcl tab 120 mg (Calan).....</b>	<b>13</b>
<b>valacyclovir hcl tab 500 mg (Valtrex).....</b>	<b>3</b>	VERZENIO- abemaciclib tab 50 mg.....	5
VALCHLOR- mechlorethamine hcl gel 0.016% (base equivalent).....	36	VERZENIO- abemaciclib tab 100 mg.....	5
<b>valsartan-hydrochlorothiazide tab 80-12.5 mg (Diovan hct).....</b>	<b>14</b>	VERZENIO- abemaciclib tab 150 mg.....	5
<b>valsartan-hydrochlorothiazide tab 160-12.5 mg (Diovan hct).....</b>	<b>14</b>	VERZENIO- abemaciclib tab 200 mg.....	5
<b>valsartan-hydrochlorothiazide tab 160-25 mg (Diovan hct).....</b>	<b>14</b>	VIBERZI- eluxadoline tab 75 mg.....	19
<b>valsartan-hydrochlorothiazide tab 320-12.5 mg (Diovan hct).....</b>	<b>14</b>	VIBERZI- eluxadoline tab 100 mg.....	19
		VICTOZA- liraglutide soln pen-injector 18 mg/3ml (6 mg/ml).....	9
		VIREAD- tenofovir disoproxil fumarate oral powder 40 mg/gm.....	3
		VIREAD- tenofovir disoproxil fumarate tab 150 mg.....	3
		VIREAD- tenofovir disoproxil fumarate tab 200 mg.....	3
		VIREAD- tenofovir disoproxil fumarate tab 250 mg.....	3
		VITRAKVI- larotrectinib sulfate cap 25 mg (base equivalent).....	5

VITRAKVI- larotrectinib sulfate cap 100 mg (base equivalent).....	5
VITRAKVI- larotrectinib sulfate oral soln 20 mg/ml (base equivalent).....	5
VONVENDI- von willebrand factor (recombinant) for inj 650 unit.....	34
VONVENDI- von willebrand factor (recombinant) for inj 1300 unit.....	34
VOSEVI- sofosbuvir-velpatasvir-voxilaprevir tab 400-100-100 mg.....	3
VOTRIENT- pazopanib hcl tab 200 mg (base equiv).....	5
VUMERITY- diroximel fumarate capsule delayed release 231 mg.....	24
VUMERITY- diroximel fumarate capsule dr starter bottle 231 mg.....	24
VYNDAMAX- tafamidis cap 61 mg.....	16
VYNDAQEL- tafamidis meglumine (cardiac) cap 20 mg.....	16
VYVANSE- lisdexamfetamine dimesylate cap 10 mg.....	22
VYVANSE- lisdexamfetamine dimesylate cap 20 mg.....	22
VYVANSE- lisdexamfetamine dimesylate cap 30 mg.....	22
VYVANSE- lisdexamfetamine dimesylate cap 40 mg.....	22
VYVANSE- lisdexamfetamine dimesylate cap 50 mg.....	22
VYVANSE- lisdexamfetamine dimesylate cap 60 mg.....	22
VYVANSE- lisdexamfetamine dimesylate cap 70 mg.....	22
VYVANSE- lisdexamfetamine dimesylate chew tab 10 mg.....	22
VYVANSE- lisdexamfetamine dimesylate chew tab 20 mg.....	23
VYVANSE- lisdexamfetamine dimesylate chew tab 30 mg.....	23
VYVANSE- lisdexamfetamine dimesylate chew tab 40 mg.....	23
VYVANSE- lisdexamfetamine dimesylate chew tab 50 mg.....	23
VYVANSE- lisdexamfetamine dimesylate chew tab 60 mg.....	23
<b>W</b>	
warfarin sodium tab 1 mg (Coumadin).....	30
warfarin sodium tab 2 mg (Coumadin).....	30
warfarin sodium tab 2.5 mg (Coumadin).....	30
warfarin sodium tab 3 mg (Coumadin).....	30
warfarin sodium tab 4 mg (Coumadin).....	30
warfarin sodium tab 5 mg (Coumadin).....	30
warfarin sodium tab 6 mg (Coumadin).....	30
warfarin sodium tab 7.5 mg (Coumadin).....	30
warfarin sodium tab 10 mg (Coumadin).....	30
WILATE- antihemophilic factor/vwf (human) for inj 500-500 unit kit.....	34
WILATE- antihemophilic factor/vwf (human) for inj 1000-1000 unit kit.....	34

**X**

XALKORI- crizotinib cap 200 mg.....	5
XALKORI- crizotinib cap 250 mg.....	5
XARELTO- rivaroxaban tab 2.5 mg.....	30
XARELTO- rivaroxaban tab 10 mg.....	30
XARELTO- rivaroxaban tab 15 mg.....	30
XARELTO- rivaroxaban tab 20 mg.....	30
XARELTO STARTER PACK- rivaroxaban tab starter therapy pack 15 mg & 20 mg.....	30
XELJANZ- tofacitinib citrate tab 5 mg (base equivalent).....	26
XELJANZ- tofacitinib citrate tab 10 mg (base equivalent).....	26
XELJANZ XR- tofacitinib citrate tab er 24hr 11 mg (base equivalent).....	26
XELJANZ XR- tofacitinib citrate tab er 24hr 22 mg (base equivalent).....	26
XIFAXAN- rifaximin tab 550 mg.....	3
XTAMPZA ER- oxycodone cap er 12hr abuse-deterring 9 mg.....	25
XTAMPZA ER- oxycodone cap er 12hr abuse-deterring 13.5 mg.....	25
XTAMPZA ER- oxycodone cap er 12hr abuse-deterring 18 mg.....	25
XTAMPZA ER- oxycodone cap er 12hr abuse-deterring 27 mg.....	25
XTAMPZA ER- oxycodone cap er 12hr abuse-deterring 36 mg.....	25
XTANDI- enzalutamide cap 40 mg.....	5
XULTOPHY 100/3.6- insulin degludec-liraglutide sol pen-inj 100-3.6 unit-mg/ml.....	9
XYNTHA- antihemophilic factor recombinant paf for inj kit 250 unit.....	34
XYNTHA- antihemophilic factor recombinant paf for inj kit 500 unit.....	34
XYNTHA- antihemophilic factor recombinant paf for inj kit 1000 unit.....	34
XYNTHA- antihemophilic factor recombinant paf for inj kit 2000 unit.....	34
XYNTHA SOLOFUSE- antihemophilic factor recombinant paf for inj kit 250 unit.....	34
XYNTHA SOLOFUSE- antihemophilic factor recombinant paf for inj kit 500 unit.....	34
XYNTHA SOLOFUSE- antihemophilic factor recombinant paf for inj kit 1000 unit.....	34
XYNTHA SOLOFUSE- antihemophilic factor recombinant paf for inj kit 2000 unit.....	34
XYNTHA SOLOFUSE- antihemophilic factor recombinant paf for inj kit 3000 unit.....	34
<b>Y</b>	
YONSA- abiraterone acetate tab 125 mg.....	5

**Z**

<b>zaleplon cap 5 mg (Sonata).....</b>	<b>22</b>
<b>zaleplon cap 10 mg (Sonata).....</b>	<b>22</b>
ZARXIO- filgrastim-sndz soln prefilled syringe 300 mcg/0.5ml.....	30
ZARXIO- filgrastim-sndz soln prefilled syringe 480 mcg/0.8ml.....	30
ZELBORAF- vemurafenib tab 240 mg.....	5
ZENPEP- pancrelipase (lip-prot-amyl) dr cap 3000-10000-14000 unit.....	19
ZENPEP- pancrelipase (lip-prot-amyl) dr cap 5000-17000-24000 unit.....	19
ZENPEP- pancrelipase (lip-prot-amyl) dr cap 10000-32000-42000 unit.....	19
ZENPEP- pancrelipase (lip-prot-amyl) dr cap 15000-47000-63000 unit.....	19
ZENPEP- pancrelipase (lip-prot-amyl) dr cap 20000-63000-84000 unit.....	19
ZENPEP- pancrelipase (lip-prot-amyl) dr cap 25000-79000-105000 unit.....	19
ZENPEP- pancrelipase (lip-prot-amyl) dr cap 40000-126000-168000 unit.....	19
ZEPOSIA 7-DAY STARTER PAC- ozanimod cap pack 4 x 0.23 mg & 3 x 0.46 mg.....	24
ZEPOSIA- ozanimod hcl cap 0.92 mg.....	24
ZEPOSIA STARTER KIT- ozanimod cap pack 4 x 0.23 mg & 3 x 0.46 mg & 30 x 0.92 mg.....	24
ZIEXTENZO- pegfilgrastim-bmez soln prefilled syringe 6 mg/0.6ml.....	30
<b>zolpidem tartrate tab 5 mg (Ambien).....</b>	<b>22</b>
<b>zolpidem tartrate tab 10 mg (Ambien).....</b>	<b>22</b>
<b>zonisamide cap 50 mg.....</b>	<b>27</b>
ZORTRESS- everolimus tab 0.25 mg.....	37
ZORTRESS- everolimus tab 0.5 mg.....	37
ZORTRESS- everolimus tab 0.75 mg.....	37
ZORTRESS- everolimus tab 1 mg.....	37
ZYCLARA- imiquimod cream 3.75%.....	36
ZYCLARA PUMP- imiquimod cream 2.5%.....	36
ZYCLARA PUMP- imiquimod cream 3.75%.....	36
ZYLET- loteprednol etabonate-tobramycin ophth susp 0.5-0.3%.....	35
ZYTIGA- abiraterone acetate tab 500 mg.....	5