



2024 Michigan
Medicaid Formulary

Introduction

Meridian is pleased to provide an updated 2024 Medicaid Formulary as a reference and informational tool for providers, pharmacists, and patients. The purpose of the Meridian formulary is to help providers choose clinically fit and cost-effective products for their patients. This document has ~~for~~ about the drugs we cover in this plan.

Pharmacy and Therapeutics (P&T) Committee

Meridian uses the State of Michigan criteria for the formulary items to determine coverage. For items not on the list or formulary Meridian would depend on our internal P&T Committee made up of providers, pharmacists, and healthcare professionals. The clinical information within the formulary was derived from medical literature and is reviewed and approved by the P&T Committee.

Notice

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

Preface

The Meridian formulary is organized in sections. Each section includes therapeutic groups named by either drug class or disease state. Brand and common names are included as a reference to help in product recognition. Brand name drugs are capitalized (e.g., CONCERTA) and generic drugs are listed in lower-case italics (e.g., methylphenidate HCL).

Meridian will not cover prescription drugs that are prescribed for experimental, investigational, or non-FDA approved indications, dosages, or routes of administration.

Formulary Components

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

Generic Substitution

Meridian is a mandatory generic plan. Michigan Department of Health and Human Services (MDHHS) has mandated that some brand medications are to be covered over the generic medication. Generic medication will be dispensed when available.

Covered Medications without Authorization

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

Non-Covered Benefits

The following categories are not covered benefits: medications used for cosmetic purposes, to promote fertility, for sexual dysfunction, for experimental or investigational purposes, or medications that are not licensed for use in the United States.

Tier Descriptions

Tier Number	Tier Name	Tier Description
1	PDL Preferred	MDHHS preferred drug list (PDL) mandated coverage. Some products may require prior authorization, have quantity limitations, gender restrictions, step therapy, specialty restrictions, and/or age limitations.
2	PDL Non-Preferred	MDHHS PDL mandated coverage. Prior authorization required. In some cases will need the trial and failure of preferred agent(s). Some products may have quantity limitations, gender restrictions, step therapy, specialty restrictions, and/or age limitations.
3	Non-PDL	MDHHS mandated Non-PDL coverage. Prior authorization required. Some products may require prior authorization, have quantity limitations, gender restrictions, step therapy, specialty restrictions, and/or age limitations.
4	Supplemental	Additional products that Meridian covers for the benefit of its members. Some products may require prior authorization, have quantity limitations, gender restrictions, step therapy, specialty restrictions, and/or age limitations.

Prior Authorization

Drugs indicated with "PA" require prior authorization for coverage. Details of PA criteria are listed next to the drug name. Please call the Help Desk at **866-984-6462** or fax a completed prior authorization form to **877-355-8070**. All prior authorizations will be reviewed within 24 hours.

Step Therapy (ST)

Drugs with an "ST" need step therapy for coverage. The required step is listed next to the drug name.

Specialty Medications (SP)

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

Quantity Limits (QL)

Drugs with a "QL" have a set quantity limit imposed. These limits are based on FDA-recommended dosing guidelines. The quantity limit is listed next to the drug name. All medications have a maximum of 30 days per prescription.

Fill Limit (FL)

Drugs indicated with an "FL" have a set fill limit imposed. The fill limit is listed next to the drug name. These medications are limited to a number of fills in a set amount of time.

Day Supply Limit (DS)

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

Gender Restriction (GR)

Drugs indicated with a "GR" have a set gender restriction imposed. The gender restriction is listed next to the drug name. These medications are limited to either males or females.

Age Limit (AL)

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

Benefit Exception

The process for requesting non-formulary medication(s) requires covermyeds submission or faxing a completed Formulary Exception form indicating the request for an exception to the formulary. This request must include pertinent clinical documentation showing trial and failure of all formulary agents. It should also contain information showing the medication is the standard of care for the indication provided (peer-reviewed journal articles may be required). Please call the Help Desk at **866-984-6462**, fax completed Formulary Exception forms to **877-355-8070** or follow the covermyeds prior authorization process.

Pharmacy Benefit Management

Meridian utilizes Express Scripts to manage each member's pharmacy benefit. Express Scripts provides Meridian with a pharmacy network, pharmacy claims management services, and claims adjudication. This formulary is up to date through the date of publication. Please notify Meridian of any mistakes in the formulary. A copy of this formulary can be mailed upon request. The Help Desk can be contacted at **866-984-6462**.

Drug Name	Drug Tier	Requirements/Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders		
Amphetamines		
DYANAVEL XR TBCR OR 5 MG, 10 MG, 15 MG, 20 MG	CO	
XELSTRYM	CO	
Analeptics		
caffeine citrate SOLN OR	3	AL(Up to 1 yrs old); MP
Anorexiant Non-Amphetamine		
ADIPEX-P CAPS (phentermine hcl)	1	AL(At least 17 yrs old); PA
ADIPEX-P TABS (phentermine hcl)	1	AL(At least 17 yrs old); PA
benzphetamine hcl 50 MG	1	AL(At least 18 yrs old); PA
diethylpropion hcl TABS	1	AL(At least 18 yrs old); PA
diethylpropion hcl TB24	1	AL(At least 18 yrs old); PA
LOMAIRA TABS	1	AL(At least 17 yrs old); PA
PHENDIMETRAZINE TARTRATEER CP24	1	AL(At least 18 yrs old); PA
phendimetrazine tartrate TABS	1	AL(At least 18 yrs old); PA
phentermine hcl CAPS	1	AL(At least 17 yrs old); PA
phentermine hcl TABS	1	AL(At least 17 yrs old); PA
Anti-Obesity Agents		
IMCIVREE	CO	SP
orlistat	1	AL(At least 12 yrs old); PA
SAXENDA	1	AL(At least 12 yrs old); PA
WEGOBY	1	AL(At least 12 yrs old); PA
XENICAL (orlistat)	1	AL(At least 12 yrs old); PA

Drug Name	Drug Tier	Requirements/Limits
ZEPBOUND SOAJ	1	AL(At least 18 yrs old); PA
Attention-Deficit/Hyperactivity Disorder (ADHD) Agents		
clonidine hcl (adhd) TB12	CO	
KAPVAY TB12 (clonidine hcl (adhd))	CO	
ONYDA XR SUER	CO	
Stimulants - Misc.		
methylphenidate hcl TBCR	CO	
RELEXXII TBCR (methylphenidate hcl)	CO	
ALLERGENIC EXTRACTS/BIOLOGICALS MISC		
Allergenic Extracts		
PALFORZIA INITIAL DOSE ESCALATION CSPK	3	AL(At least 1 yrs old - Up to 17 yrs old); SP; PA
PALFORZIA LEVEL 10 CSPK	3	AL(At least 1 yrs old - Up to 17 yrs old); SP; PA
PALFORZIA LEVEL 11 (MAINTENANCE) PACK	3	AL(At least 1 yrs old - Up to 17 yrs old); SP; PA
PALFORZIA LEVEL 11 (TITRATION) PACK	3	AL(At least 1 yrs old - Up to 17 yrs old); SP; PA
PALFORZIA LEVEL 1 CSPK	3	AL(At least 1 yrs old - Up to 17 yrs old); SP; PA
PALFORZIA LEVEL 2 CSPK	3	AL(At least 1 yrs old - Up to 17 yrs old); SP; PA
PALFORZIA LEVEL 3 CSPK	3	AL(At least 1 yrs old - Up to 17 yrs old); SP; PA

Drug Name	Drug Tier	Requirements/Limits
PALFORZIA LEVEL 4 CSPK	3	AL(At least 1 yrs old - Up to 17 yrs old); SP; PA
PALFORZIA LEVEL 5 CSPK	3	AL(At least 1 yrs old - Up to 17 yrs old); SP; PA
PALFORZIA LEVEL 6 CSPK	3	AL(At least 1 yrs old - Up to 17 yrs old); SP; PA
PALFORZIA LEVEL 7 CSPK	3	AL(At least 1 yrs old - Up to 17 yrs old); SP; PA
PALFORZIA LEVEL 8 CSPK	3	AL(At least 1 yrs old - Up to 17 yrs old); SP; PA
PALFORZIA LEVEL 9 CSPK	3	AL(At least 1 yrs old - Up to 17 yrs old); SP; PA

ALTERNATIVE MEDICINES

Alternative Medicine - M's

<i>melatonin LIQD 1 MG/ML</i>	3	
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AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections

Aminoglycosides

BETHKIS NEBU (<i>tobramycin</i>)	1	SP
HUMATIN	3	
KITABIS PAK NEBU (<i>tobramycin</i>)	NF	SP
<i>neomycin sulfate TABS</i>	1	
TOBI PODHALER CAPS	1	SP
TOBI NEBU (<i>tobramycin</i>)	NF	SP
<i>tobramycin NEBU</i>	1	SP
<i>tobramycin NEBU</i>	2	SP

ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions

Drug Name	Drug Tier	Requirements/Limits
Antirheumatic - Enzyme Inhibitors		
OLUMIANT	2	SP
RINVOQ LQ SOLN	2	SP
RINVOQ TB24	2	SP
XELJANZ XR TB24	2	SP
XELJANZ SOLN	2	SP
XELJANZ TABS	2	SP
Anti-TNF-alpha - Monoclonal Antibodies		
ABRILADA 1-PEN KIT AJKT	2	SP
ABRILADA 2-PEN KIT AJKT	2	SP
ABRILADA PSKT	2	SP
ADALIMUMAB-AACF (2 PEN) AJKT	2	SP
ADALIMUMAB-AACF (2 SYRINGE) PSKT	2	SP
ADALIMUMAB-AACF STARTER PACK/CD/UC/HS (6 PEN) AJKT	2	SP
ADALIMUMAB-AACF STARTER PACK/PSORIASIS/UEVITIS (4 PEN) AJKT	2	SP
ADALIMUMAB-AATY 1-PEN KIT AJKT	2	SP
ADALIMUMAB-AATY 2-PEN KIT AJKT	2	SP
ADALIMUMAB-AATY 2-SYRINGE KIT PSKT	2	SP
ADALIMUMAB-ADAZ SOAJ	2	SP
ADALIMUMAB-ADAZ SOSY	2	SP
ADALIMUMAB-ADBM CROHNS/UC/HS STARTER AJKT	2	SP
ADALIMUMAB-ADBM PSORIASIS/UEVITIS STARTER AJKT	2	SP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ADALIMUMAB-ADBM STARTER PACKAGE FOR CROHNS DISEASE/UC/HS AJKT	2	SP	HUMIRA PEN-CD/UC/HS STARTER AJKT SC 40 MG/0.8ML, 80 MG/0.8ML	1	SP
ADALIMUMAB-ADBM STARTER PACKAGE FOR PSORIASIS/UVEITIS AJKT	2	SP	HUMIRA PEN-PEDIATRIC UC STARTER PACK AJKT SC 80 MG/0.8ML	1	SP
ADALIMUMAB-ADBM AJKT	2	SP	HUMIRA PEN-PS/UV STARTER AJKT SC 40 MG/0.8ML	1	SP
ADALIMUMAB-ADBM PSKT	2	SP	HUMIRA PSKT	1	SP
ADALIMUMAB-FKJP AJKT	2	SP	HYRIMOZ CROHN'S DISEASE AND ULCERATIVE COLITIS STARTER PACK SOAJ	2	SP
ADALIMUMAB-FKJP PSKT	2	SP	HYRIMOZ PEDIATRIC CROHNSDISEASE STARTER PACK SOSY	2	SP
AMJEVITA SOAJ 40 MG/0.8ML	2	AL(At least 2 yrs old); SP	HYRIMOZ PEDIATRIC CROHN'SDISEASE STARTER PACK SOSY	2	SP
AMJEVITA SOSY	2	AL(At least 2 yrs old); SP	HYRIMOZ PLAQUE PSORIASIS/UVEITIS STARTER PACK SOAJ	2	SP
CYLTEZO STARTER PACKAGE FOR CROHNS DISEASE/UC/HS AJKT	2	SP	HYRIMOZ PLAQUE PSORIASISSTARTER PACK SOAJ	2	SP
CYLTEZO STARTER PACKAGE FOR PSORIASIS/UVEITIS AJKT	2	SP	HYRIMOZ SENSOREADY PENS SOAJ	2	SP
CYLTEZO STARTER PACKAGE FOR PSORIASIS AJKT	2	SP	HYRIMOZ SOAJ	2	SP
CYLTEZO AJKT	2	SP	HYRIMOZ SOSY	2	SP
CYLTEZO PSKT	2	SP	IDACIO (2 PEN) AJKT	2	SP
HADLIMA PUSHTOUCH SOAJ	2	SP	IDACIO (2 SYRINGE) PSKT	2	SP
HADLIMA SOSY	2	SP	IDACIO STARTER PACKAGE FOR CROHNS DISEASE AJKT	2	SP
HULIO AJKT	2	SP	IDACIO STARTER PACKAGE FOR PLAQUE PSORIASIS AJKT	2	SP
HULIO PSKT	2	SP	SIMPONI ARIA SOLN	2	SP
HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT 80 MG/0.8ML	1	SP	SIMPONI SOAJ	2	SP
HUMIRA PEN AJKT SC 40 MG/0.4ML, 40 MG/0.8ML, 80 MG/0.8ML	1	SP	SIMPONI SOSY	2	SP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
YUFLYMA 1-PEN KIT AJKT	2	SP	CELEBREX 50 MG, 100 MG, 200 MG (<i>celecoxib</i>)	2	QL(2 ea daily)
YUFLYMA 2-PEN KIT AJKT	2	SP	<i>celecoxib</i> 400 MG	1	QL(1 ea daily)
YUFLYMA 2-SYRINGE KIT PSKT	2	SP	<i>celecoxib</i> 50 MG, 100 MG, 200 MG	1	QL(2 ea daily)
YUFLYMA CD/UC/HS STARTER AJKT	2	SP	CHILDRENS ADVIL SUSP 100 MG/5ML (<i>ibuprofen</i>)	1	RX/OTC
YUSIMRY SC 40 MG/0.8ML	2	SP	CHILDRENS MOTRIN SUSP 100 MG/5ML (<i>ibuprofen</i>)	1	RX/OTC
Interleukin-6 Receptor Inhibitors			DAYPRO TABS (<i>oxaprozin</i>)	2	
ACTEMRA ACTPEN SOAJ	2	SP	<i>diclofenac potassium</i> CAPS	2	
ACTEMRA SOSY	2	SP	<i>diclofenac potassium</i> TABS	2	
KEVZARA SOAJ	2	SP	<i>diclofenac sodium</i> TB24	2	
KEVZARA SOSY	2	SP	<i>diclofenac sodium</i> TBEC	1	
Nonsteroidal Anti-inflammatory Agents (NSAIDs)			<i>diclofenac w/ misoprostol</i> TBEC	2	
ADVIL DUAL ACTION/ACETAMINOPHEN TABS (<i>ibuprofen-acetaminophen</i>)	2		DUEXIS (<i>ibuprofen-famotidine</i>)	2	
ADVIL MIGRAINE CAPS (<i>ibuprofen</i>)	1		EC-NAPROSYN TBEC (<i>naproxen</i>)	2	
ADVIL CAPS (<i>ibuprofen</i>)	1		<i>etodolac</i> CAPS	2	
ADVIL TABS (<i>ibuprofen</i>)	1		<i>etodolac</i> TABS	2	
ALEVE ARTHRITIS TABS (<i>naproxen sodium</i>)	1		<i>etodolac</i> TB24	2	
ALEVE CAPS (<i>naproxen sodium</i>)	1		FELDENE CAPS (<i>piroxicam</i>)	2	
ALEVE TABS (<i>naproxen sodium</i>)	1		<i>fenoprofen calcium</i> CAPS 400 MG	2	
ANAPROX DS TABS (<i>naproxen sodium</i>)	2		<i>fenoprofen calcium</i> TABS	2	
ARTHROTEC 50 TBEC (<i>diclofenac w/ misoprostol</i>)	2		<i>flurbiprofen</i> TABS 100 MG	2	
ARTHROTEC 75 TBEC (<i>diclofenac w/ misoprostol</i>)	2		<i>ibuprofen-acetaminophen</i> TABS	2	
CELEBREX 400 MG (<i>celecoxib</i>)	2	QL(1 ea daily)	<i>ibuprofen</i> CAPS	1	
			<i>ibuprofen</i> CHEW	1	
			<i>ibuprofen-famotidine</i>	2	
			<i>ibuprofen</i> SUSP	1	
			<i>ibuprofen</i> TABS	1	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
INDOCIN SUSP (indomethacin)	2		<i>naproxen sodium TB24</i>	2	
<i>indomethacin CAPS 25 MG, 50 MG</i>	1		<i>naproxen-esomeprazole magnesium</i>	2	
<i>indomethacin CPCR</i>	2		<i>naproxen SUSP</i>	2	
<i>indomethacin SUSP</i>	2		<i>naproxen TABS</i>	1	
INFANTS ADVIL SUSP (ibuprofen)	1		<i>naproxen TBEC</i>	2	
<i>ketoprofen CAPS 50 MG</i>	2		<i>oxaprozin TABS</i>	2	
<i>ketoprofen CP24</i>	2		<i>piroxicam CAPS</i>	2	
KETOROLAC TROMETHAMINE SOLN NA 15.75 MG/SPRAY	2	QL(5 ea per fill retail)	RELAFEN DS	2	
<i>ketorolac tromethamine TABS</i>	1	QL(21 ea per fill retail)	SPRIX SOLN NA	2	QL(5 ea per fill retail)
LODINE TABS (<i>etodolac</i>)	2		<i>sulindac TABS</i>	1	
<i>meclofenamate sodium CAPS</i>	2		TOLECTIN 600 TABS	2	
<i>mefenamic acid CAPS</i>	2		<i>tolmetin sodium CAPS</i>	2	
<i>meloxicam CAPS</i>	2		<i>tolmetin sodium TABS 600 MG</i>	2	
<i>meloxicam TABS</i>	1		VIMOVO (<i>naproxen-esomeprazole magnesium</i>)	2	
MOTRIN CHILDRENS CHEW (<i>ibuprofen</i>)	1		ZIPSOR CAPS (<i>diclofenac potassium</i>)	2	
MOTRIN INFANTS DROPS SUSP (<i>ibuprofen</i>)	1		ZORVOLEX CAPS 18 MG	2	
<i>nabumetone</i>	1		Phosphodiesterase 4 (PDE4) Inhibitors		
NALFON CAPS (<i>fenoprofen calcium</i>)	2		OTEZLA TABS 30 MG	2	SP
NALFON TABS (<i>fenoprofen calcium</i>)	2		OTEZLA TBPK	2	SP
NAPRELAN TB24 (<i>naproxen sodium</i>)	2		Pyrimidine Synthesis Inhibitors		
NAPROSYN SUSP (<i>naproxen</i>)	2		ARAVA (<i>leflunomide</i>)	3	QL(1 ea daily)
NAPROSYN TABS 500 MG (<i>naproxen</i>)	1		<i>leflunomide</i>	3	QL(1 ea daily)
<i>naproxen sodium CAPS</i>	1		Selective Costimulation Modulators		
<i>naproxen sodium TABS 275 MG, 550 MG</i>	2		ORENCIA CLICKJECT SOAJ	2	SP
<i>naproxen sodium TABS 220 MG</i>	1		ORENCIA SOSY	2	SP
			Soluble Tumor Necrosis Factor Receptor Agents		
			ENBREL MINI SOCT	1	SP
			ENBREL SURECLICK SOAJ	1	SP
			ENBREL SOLN	1	SP
			ENBREL SOSY	1	SP

Drug Name	Drug Tier	Requirements/Limits
ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions		
Analgesic Combinations		
<i>butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG</i>	3	QL(12.3 ea daily); AL(At least 10 yrs old - Up to 64 yrs old)
<i>butalbital-acetaminophen TABS 50 MG-325 MG</i>	3	QL(12.3 ea daily); AL(At least 10 yrs old - Up to 64 yrs old)
<i>butalbital-aspirin-caffeine CAPS</i>	3	QL(4 ea daily); AL(Up to 64 yrs old)
ESGIC TABS (<i>butalbital-acetaminophen-caffeine</i>)	3	QL(12.3 ea daily); AL(At least 10 yrs old - Up to 64 yrs old)
Analgesics Other		
<i>acetaminophen CAPS 500 MG</i>	3	
<i>acetaminophen CHEW 80 MG</i>	3	
<i>acetaminophen LIQD 160 MG/5ML</i>	3	
<i>acetaminophen SOLN OR 160 MG/5ML, 325 MG/10.15ML, 650 MG/20.3ML</i>	3	
<i>acetaminophen SUPP 120 MG, 650 MG</i>	3	
ACETAMINOPHEN SUPP 650 MG	3	
<i>acetaminophen SUSP 80 MG/2.5ML, 160 MG/5ML, 650 MG/20.3ML</i>	3	
<i>acetaminophen TABS 325 MG, 500 MG</i>	3	
<i>acetaminophen TBCR</i>	3	
<i>acetaminophen TBDP 160 MG</i>	3	

Drug Name	Drug Tier	Requirements/Limits
FEVERALL JUNIOR STRENGTH SUPP	3	
TYLENOL 8 HOUR ARTHRITISPAIN TBCR (<i>acetaminophen</i>)	3	
TYLENOL 8 HOUR TBCR (<i>acetaminophen</i>)	3	
TYLENOL CHILDRENS PAIN +FEVER SUSP (<i>acetaminophen</i>)	3	
TYLENOL CHILDRENS SUSP (<i>acetaminophen</i>)	3	
TYLENOL EXTRA STRENGTH TABS (<i>acetaminophen</i>)	3	
TYLENOL FOR CHILDREN/ADULTS SUSP (<i>acetaminophen</i>)	3	
TYLENOL INFANTS PAIN+FEVER SUSP (<i>acetaminophen</i>)	3	
TYLENOL TABS (<i>acetaminophen</i>)	3	
Salicylates		
<i>aspirin buffered (cal carb-mag carb-mag oxide)</i>	3	AL(At least 40 yrs old - Up to 79 yrs old)
<i>aspirin CHEW</i>	3	QL(1 ea daily); MP
ASPIRIN SUPP 300 MG	3	
<i>aspirin TABS 325 MG</i>	3	QL(1 ea daily); AL(At least 40 yrs old - Up to 79 yrs old)
<i>aspirin TBEC 81 MG</i>	3	QL(1 ea daily); MP
<i>aspirin TBEC 325 MG</i>	3	QL(1 ea daily); AL(At least 40 yrs old - Up to 79 yrs old)
BUFFERIN (<i>aspirin buffered (cal carb-mag carb-mag oxide)</i>)	3	AL(At least 40 yrs old - Up to 79 yrs old)
<i>diflunisal TABS</i>	2	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
DOLOBID TABS 250 MG	2		<i>fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR</i>	1	QL(10 ea per fill retail)
ECOTRIN ARTHRITIS PAIN TBEC (<i>aspirin</i>)	3	QL(1 ea daily); AL(At least 40 yrs old - Up to 79 yrs old)	<i>fentanyl PT72 37.5 MCG/HR, 62.5 MCG/HR, 87.5 MCG/HR</i>	2	QL(10 ea per fill retail)
ECOTRIN REGULAR STRENGTH TBEC (<i>aspirin</i>)	3	QL(1 ea daily); AL(At least 40 yrs old - Up to 79 yrs old)	FENTORA TABS (<i>fentanyl citrate</i>)	2	QL(4 ea daily); AL(At least 18 yrs old)
ECOTRIN TBEC (<i>aspirin</i>)	3	QL(1 ea daily); AL(At least 40 yrs old - Up to 79 yrs old)	<i>hydrocodone bitartrate CP12</i>	2	
ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions			<i>hydrocodone bitartrate T24A</i>	2	
Opioid Agonists			<i>hydromorphone hcl LIQD</i>	1	QL(4 ml daily)
ACTIQ LPOP (<i>fentanyl citrate</i>)	2	QL(4 ea daily); AL(At least 18 yrs old)	HYDROMORPHONE HCL SUPP	2	
<i>codeine sulfate TABS 30 MG</i>	1	QL(6 ea daily); AL(At least 12 yrs old)	<i>hydromorphone hcl TABS 4 MG</i>	1	QL(135 ea per 30 day(s) retail; 135 ea per 30 days mail)
CODEINE SULFATE TABS	1	QL(6 ea daily); AL(At least 12 yrs old)	<i>hydromorphone hcl TABS 2 MG</i>	1	QL(6 ea daily)
CONZIP CP24 (<i>tramadol hcl</i>)	2	AL(At least 12 yrs old)	<i>hydromorphone hcl TABS 8 MG</i>	1	QL(67 ea per 30 day(s) retail; 67 ea per 30 days mail)
DILAUDID LIQD (<i>hydromorphone hcl</i>)	2	QL(4 ml daily)	<i>hydromorphone hcl TB24</i>	2	
DILAUDID TABS 2 MG (<i>hydromorphone hcl</i>)	2	QL(6 ea daily)	HYSINGLA ER T24A	2	
DILAUDID TABS 4 MG (<i>hydromorphone hcl</i>)	2	QL(135 ea per 30 day(s) retail; 135 ea per 30 days mail)	<i>levorphanol tartrate TABS</i>	2	
DILAUDID TABS 8 MG (<i>hydromorphone hcl</i>)	2	QL(67 ea per 30 day(s) retail; 67 ea per 30 days mail)	<i>meperidine hcl SOLN OR 50 MG/5ML</i>	2	QL(8 ml daily)
<i>fentanyl citrate LPOP</i>	2	QL(4 ea daily); AL(At least 18 yrs old)	<i>meperidine hcl TABS 50 MG</i>	2	QL(4 ea daily)
<i>fentanyl citrate TABS</i>	2	QL(4 ea daily); AL(At least 18 yrs old)	<i>methadone hcl CONC</i>	2	
			<i>methadone hcl SOLN OR</i>	2	
			<i>methadone hcl TABS</i>	2	
			<i>methadone hcl TBSO</i>	2	
			METHADOSE SUGAR-FREE CONC (<i>methadone hcl</i>)	2	
			METHADOSE CONC (<i>methadone hcl</i>)	2	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>morphine sulfate beads</i>	2		<i>oxycodone hcl TABS 30 MG</i>	2	QL(2 ea daily)
<i>morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG</i>	2		<i>oxycodone hcl TABS 5 MG, 10 MG, 15 MG</i>	1	QL(3 ea daily)
<i>morphine sulfate SOLN OR 20 MG/ML, 100 MG/5ML</i>	1	QL(4 ml daily)	<i>oxycodone hcl TABS 20 MG</i>	2	QL(3 ea daily)
<i>morphine sulfate SOLN OR 10 MG/5ML, 20 MG/5ML</i>	1	QL(8 ml daily)	OXYCONTIN T12A 30 MG	2	QL(2 ea daily)
<i>morphine sulfate SUPP</i>	1		OXYCONTIN T12A 80 MG	2	Limit: 22 tablets per 30 days; QL(0.74 ea daily)
<i>morphine sulfate TABS 15 MG</i>	1	QL(6 ea daily)	OXYCONTIN T12A 10 MG	2	QL(6 ea daily)
<i>morphine sulfate TABS 30 MG</i>	1	QL(3 ea daily)	OXYCONTIN T12A 40 MG	2	Limit: 45 tablets per 30 days; QL(1.5 ea daily)
<i>morphine sulfate TBCR</i>	1		OXYCONTIN T12A 60 MG	2	QL(1 ea daily)
MS CONTIN TBCR (<i>morphine sulfate</i>)	2		OXYCONTIN T12A 15 MG	2	QL(4 ea daily)
NUCYNTA ER TB12	2		OXYCONTIN T12A 20 MG	2	QL(3 ea daily)
NUCYNTA TABS	2		<i>oxymorphone hcl TABS 5 MG</i>	2	QL(4 ea daily)
OXAYDO TABS	2	QL(3 ea daily)	<i>oxymorphone hcl TABS 10 MG</i>	2	QL(3 ea daily)
<i>oxycodone hcl CAPS</i>	2	QL(3 ea daily)	<i>oxymorphone hcl TB12</i>	2	
<i>oxycodone hcl CONC 100 MG/5ML</i>	2	QL(3 ml daily)	QDOLO SOLN (<i>tramadol hcl</i>)	2	QL(80 ml daily); AL(At least 12 yrs old)
<i>oxycodone hcl SOLN</i>	1	QL(8 ml daily)	ROXICODONE TABS 15 MG (<i>oxycodone hcl</i>)	2	QL(3 ea daily)
<i>oxycodone hcl T12A 80 MG</i>	2	Limit: 22 tablets per 30 days; QL(0.74 ea daily)	ROXICODONE TABS 30 MG (<i>oxycodone hcl</i>)	2	QL(2 ea daily)
<i>oxycodone hcl T12A 10 MG</i>	2	QL(6 ea daily)	ROXYBOND TABA 5 MG	2	QL(3 ea daily)
<i>oxycodone hcl T12A 20 MG</i>	2	QL(3 ea daily)	ROXYBOND TABA 15 MG	2	QL(90 ea per 30 day(s) retail)
<i>oxycodone hcl T12A 40 MG</i>	2	Limit: 45 tablets per 30 days; QL(1.5 ea daily)	ROXYBOND TABA 30 MG	2	QL(60 ea per 30 day(s) retail)
<i>oxycodone hcl TABA</i>	2	QL(90 ea per 30 day(s) retail)	<i>tramadol hcl CP24 100 MG, 200 MG, 300 MG</i>	2	AL(At least 12 yrs old)
<i>oxycodone hcl TABA</i>	2	QL(60 ea per 30 day(s) retail)	<i>tramadol hcl SOLN</i>	2	QL(80 ml daily); AL(At least 12 yrs old)
<i>oxycodone hcl TABA</i>	2	QL(3 ea daily)			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>tramadol hcl TABS 50 MG, 100 MG</i>	1	AL(At least 12 yrs old)	<i>hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG, 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	1	
<i>tramadol hcl TB24</i>	1	AL(At least 12 yrs old)	<i>hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG, 7.5 MG-200 MG</i>	2	
TRAMADOL HYDROCHLORIDE SOLN (<i>tramadol hcl</i>)	2	QL(80 ml daily); AL(At least 12 yrs old)	NALOCET TABS	2	
XTAMPZA ER 9 MG, 13.5 MG, 18 MG, 27 MG	2	QL(2 ea daily)	OXYCODONE AND ACETAMINOPHEN TABS	2	
XTAMPZA ER 36 MG	2	QL(1.5 ea daily)	OXYCODONE HYDROCHLORIDE/ACETAMINOPHEN SOLN	2	
Opioid Combinations			<i>oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-2.5 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	1	
<i>acetaminophen w/ codeine SOLN</i>	1	AL(At least 12 yrs old)	OXYCODONE/ACETAMINOPHEN TABS	2	
<i>acetaminophen w/ codeine TABS 15 MG-300 MG, 30 MG-300 MG, 60 MG-300 MG</i>	1	AL(At least 12 yrs old)	PERCOCET TABS 325 MG-10 MG, 325 MG-2.5 MG, 325 MG-5 MG, 325 MG-7.5 MG (<i>oxycodone w/ acetaminophen</i>)	2	
<i>acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG</i>	2	AL(At least 12 yrs old)	PROLATE SOLN	2	
APADAZ	2		PROLATE TABS	2	
BENZHYDROCODONE/A CETAMINOPHEN	2		SEGLENTIS	2	QL(4 ea daily); AL(At least 12 yrs old)
<i>butalbital-acetaminophen-caffeine w/ codeine</i>	2	AL(At least 12 yrs old)	<i>tramadol-acetaminophen</i>	1	AL(At least 12 yrs old)
<i>butalbital-aspirin-caffeine w/cod</i>	2	AL(At least 12 yrs old)	ULTRACET (<i>tramadol-acetaminophen</i>)	2	AL(At least 12 yrs old)
FIORICET/CODEINE 30 MG-40 MG-50 MG-300 MG (<i>butalbital-acetaminophen-caffeine w/ codeine</i>)	2	AL(At least 12 yrs old)	Opioid Partial Agonists		
<i>hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML</i>	1		BELBUCA FILM	2	QL(2 ea daily)
			BRIXADI SOSY	CO	SP
			<i>buprenorphine hcl FILM 150 MCG, 300 MCG, 450 MCG, 600 MCG, 750 MCG, 900 MCG</i>	2	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>buprenorphine hcl-naloxone hcl dihydrate SUBL</i>	CO	
<i>buprenorphine PTWK</i>	2	Limit: 6 patches per 28 days; QL(0.215 ea daily)
<i>butorphanol tartrate NA 10 MG/ML</i>	2	QL(15 ml per 30 day(s) retail)
BUTRANS PTWK (<i>buprenorphine</i>)	1	Limit: 6 patches per 28 days; QL(0.215 ea daily)
<i>pentazocine w/ naloxone hcl</i>	2	
ZUBSOLV SUBL	CO	
ANDROGENS-ANABOLIC - Drugs to Regulate Hormones		
Androgens		
ANDRODERM PT24 2 MG/24HR, 4 MG/24HR	2	
ANDROGEL PUMP GEL TD 1.62 % (<i>testosterone</i>)	2	PA
ANDROGEL GEL TD 25 MG/2.5GM (<i>testosterone</i>)	2	
<i>danazol CAPS</i>	3	
FORTESTA GEL TD (<i>testosterone</i>)	2	
NATESTO GEL NA	2	
TESTIM GEL TD (<i>testosterone</i>)	2	
<i>testosterone cypionate SOLN IM</i>	3	
TESTOSTERONE CYPIONATE SOLN IJ 200 MG/ML	3	
<i>testosterone GEL TD 1.62 %</i>	1	PA
<i>testosterone GEL TD 1 %, 10 MG/ACT, 20.25 MG/1.25GM, 25 MG/2.5GM, 40.5 MG/2.5GM, 50 MG/5GM</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>testosterone SOLN</i>	2	
VOGELXO PUMP GEL TD (<i>testosterone</i>)	2	
VOGELXO GEL TD (<i>testosterone</i>)	2	
ANORECTAL AND RELATED PRODUCTS - Rectal Drugs to Treat Pain, Swelling and Itching		
Rectal Steroids		
ANUSOL-HC EX (<i>hydrocortisone (rectal)</i>)	3	
<i>hydrocortisone (rectal) EX 2.5 %</i>	3	
<i>hydrocortisone (rectal) EX 1 %</i>	2	RX/OTC
<i>hydrocortisone (rectal) EX 1 %</i>	1	RX/OTC
ANTACIDS		
Antacid Combinations		
<i>alum & mag hydrox-simethicone LIQD</i>	3	
<i>alum & mag hydrox-simethicone SUSP</i>	3	
<i>aluminum hydroxide-mag carb SUSP 358 MG/15ML-95 MG/15ML</i>	3	
GAVISCON SUSP (<i>aluminum hydroxide-mag carb</i>)	3	
HYVEE ADVANCED ANTACID MAXIMUM STRENGTH SUSP (<i>alum & mag hydrox-simethicone</i>)	3	
SM FOAMING ANTACID	4	
Antacids - Aluminum Salts		
ALUMINUM HYDROXIDE SUSP 320 MG/5ML	3	
Antacids - Bicarbonate		

Drug Name	Drug Tier	Requirements/ Limits
<i>sodium bicarbonate (antacid) TABS 325 MG, 650 MG</i>	3	
SODIUM BICARBONATE POWD	4	RX/OTC
Antacids - Calcium Salts		
<i>calcium carbonate (antacid) CHEW 500 MG, 750 MG, 1000 MG</i>	3	
<i>calcium carbonate (antacid) SUSP</i>	3	MP
CALCIUM CARBONATE SUSP	3	MP
TUMS CHEWY BITES CHEW (<i>calcium carbonate (antacid)</i>)	3	
TUMS E-X 750 CHEW (<i>calcium carbonate (antacid)</i>)	3	
TUMS EXTRA STRENGTH 750 CHEW (<i>calcium carbonate (antacid)</i>)	3	
TUMS LASTING EFFECTS CHEW (<i>calcium carbonate (antacid)</i>)	3	
TUMS SMOOTHIES CHEW (<i>calcium carbonate (antacid)</i>)	3	
TUMS ULTRA 1000 CHEW (<i>calcium carbonate (antacid)</i>)	3	
TUMS CHEW (<i>calcium carbonate (antacid)</i>)	3	
Antacids - Magnesium Salts		
<i>magnesium oxide TABS 420 MG</i>	3	MP
<i>magnesium oxide TABS 400 MG</i>	4	
ANTHELMINTICS - Drugs to Treat Worm Infections		

Drug Name	Drug Tier	Requirements/ Limits
Anthelmintics		
<i>albendazole</i>	4	
BENZNIDAZOLE	3	PA
<i>ivermectin</i>	3	QL(10 ea per 30 day(s) retail)
STROMEKTOL (<i>ivermectin</i>)	3	QL(10 ea per 30 day(s) retail)
ANTIANGINAL AGENTS - Drugs to Treat Chest Pain		
Antianginals-Other		
ASPRUZYO SPRINKLE PACK	3	QL(2 ea daily); AL(At least 18 yrs old); PA
RANEXA TB12 (<i>ranolazine</i>)	3	QL(2 ea daily); MP; PA
<i>ranolazine TB12</i>	3	QL(2 ea daily); MP; PA
Nitrates		
ISORDIL TITRADOSE TABS 5 MG (<i>isosorbide dinitrate</i>)	3	MP
<i>isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG</i>	3	MP
<i>isosorbide mononitrate TABS</i>	3	MP
<i>isosorbide mononitrate TB24</i>	3	QL(2 ea daily); MP
NITRO-BID OINT	3	MP
NITRO-DUR PT24 (<i>nitroglycerin</i>)	3	QL(1 ea daily); MP
<i>nitroglycerin PT24</i>	3	QL(1 ea daily); MP
<i>nitroglycerin SOLN TL 0.4 MG/SPRAY</i>	3	
<i>nitroglycerin SUBL</i>	3	MP
NITROLINGUAL SOLN TL (<i>nitroglycerin</i>)	3	
NITROSTAT SUBL (<i>nitroglycerin</i>)	3	MP
ANTIANSIETY AGENTS - Drugs to Treat Anxiety		

Drug Name	Drug Tier	Requirements/Limits
Antianxiety Agents - Misc.		
<i>hydroxyzine hcl SYRP</i>	1	
<i>hydroxyzine hcl TABS</i>	1	
<i>hydroxyzine pamoate CAPS</i>	1	
VISTARIL CAPS (<i>hydroxyzine pamoate</i>)	2	
Benzodiazepines		
LOREEV XR CS24	CO	
ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms		
Antiarrhythmics Type I-A		
<i>disopyramide phosphate CAPS</i>	3	AL(Up to 64 yrs old); MP
NORPACE CAPS (<i>disopyramide phosphate</i>)	3	AL(Up to 64 yrs old); MP
<i>quinidine sulfate TABS</i>	3	MP
Antiarrhythmics Type I-B		
<i>mexiletine hcl</i>	3	MP
Antiarrhythmics Type I-C		
<i>flecainide acetate</i>	3	MP
<i>propafenone hcl TABS</i>	3	MP
Antiarrhythmics Type III		
<i>amiodarone hcl TABS 100 MG</i>	3	QL(1 ea daily); MP
<i>amiodarone hcl TABS 200 MG, 400 MG</i>	3	MP
<i>dofetilide</i>	1	SP
TIKOSYN (<i>dofetilide</i>)	2	SP
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions		
Antiasthmatic - Monoclonal Antibodies		
FASENRA PEN SOAJ	1	AL(At least 6 yrs old); SP; PA

Drug Name	Drug Tier	Requirements/Limits
NUCALA SOAJ	2	AL(At least 6 yrs old); SP; MP
NUCALA SOLR	2	AL(At least 6 yrs old); SP
NUCALA SOSY 100 MG/ML	2	AL(At least 6 yrs old); SP; MP
NUCALA SOSY 40 MG/0.4ML	2	SP; MP
TEZSPIRE SOAJ	2	AL(At least 12 yrs old); SP
TEZSPIRE SOSY	2	AL(At least 12 yrs old); SP
XOLAIR SOAJ	1	AL(At least 6 yrs old); SP; PA
XOLAIR SOSY	1	AL(At least 6 yrs old); SP; PA
Bronchodilators - Anticholinergics		
ATROVENT HFA	1	QL(0.9 gm daily); MP
INCRUSE ELLIPTA	1	QL(21 ea per 90 day(s) retail); MP
INCRUSE ELLIPTA	1	QL(90 ea per 90 day(s) retail); MP
<i>ipratropium bromide SOLN 0.02 %</i>	1	MP
LONHALA MAGNAIR REFILL KIT SOLN	2	MP
LONHALA MAGNAIR STARTER KIT SOLN	2	MP
SPIRIVA HANDIHALER CAPS (<i>tiotropium bromide monohydrate</i>)	1	QL(1 ea daily); MP
SPIRIVA RESPIMAT AERS	1	QL(0.16 gm daily); MP
<i>tiotropium bromide monohydrate CAPS</i>	2	QL(1 ea daily); MP
TUDORZA PRESSAIR	2	MP
YUPELRI	2	MP
Leukotriene Modulators		

Drug Name	Drug Tier	Requirements/Limits
ACCOLATE (<i>zafirlukast</i>)	2	MP
<i>montelukast sodium CHEW 5 MG</i>	1	AL(Up to 14 yrs old); MP
<i>montelukast sodium CHEW 4 MG</i>	1	AL(Up to 5 yrs old); MP
<i>montelukast sodium PACK</i>	2	AL(Up to 5 yrs old); MP
<i>montelukast sodium TABS</i>	1	MP
SINGULAIR CHEW 5 MG (<i>montelukast sodium</i>)	2	AL(Up to 14 yrs old); MP
SINGULAIR CHEW 4 MG (<i>montelukast sodium</i>)	2	AL(Up to 5 yrs old); MP
SINGULAIR PACK (<i>montelukast sodium</i>)	2	AL(Up to 5 yrs old); MP
SINGULAIR TABS (<i>montelukast sodium</i>)	2	MP
<i>zafirlukast</i>	2	MP
<i>zileuton TB12</i>	2	MP
ZYFLO TABS	2	MP
Selective Phosphodiesterase 4 (PDE4) Inhibitors		
DALIRESP (<i>roflumilast</i>)	NF	MP; PA
<i>roflumilast</i>	1	MP; PA
Steroid Inhalants		
ALVESCO	1	
ARMONAIR DIGIHALER	2	
ARNUITY ELLIPTA	1	
ASMANEX HFA AERO	2	QL(0.55 gm daily); MP
ASMANEX TWISTHALER 120 METERED DOSES AEPB	1	QL(1 ea per 30 day(s) retail)
ASMANEX TWISTHALER 14 METERED DOSES AEPB	1	QL(1 ea per 30 day(s) retail)
ASMANEX TWISTHALER 30 METERED DOSES AEPB 220 MCG/INH	1	QL(1 ea per 30 day(s) retail)

Drug Name	Drug Tier	Requirements/Limits
ASMANEX TWISTHALER 30 METERED DOSES AEPB 110 MCG/INH	1	QL(1 ea per 30 day(s) retail); AL(Up to 11 yrs old)
ASMANEX TWISTHALER 60 METERED DOSES AEPB	1	QL(1 ea per 30 day(s) retail)
<i>budesonide (inhalation) SUSP</i>	1	QL(4 ml daily)
FLOVENT DISKUS AEPB (<i>fluticasone propionate (inhalation)</i>)	2	
FLOVENT HFA 220 MCG/ACT (<i>fluticasone propionate hfa</i>)	1	QL(0.9 gm daily); MP
FLOVENT HFA 44 MCG/ACT (<i>fluticasone propionate hfa</i>)	1	QL(0.45 gm daily); MP
FLOVENT HFA 110 MCG/ACT (<i>fluticasone propionate hfa</i>)	1	QL(0.5 gm daily); MP
<i>fluticasone propionate (inhalation) AEPB</i>	2	
<i>fluticasone propionate hfa 110 MCG/ACT</i>	1	QL(0.5 gm daily); MP
<i>fluticasone propionate hfa 44 MCG/ACT</i>	1	QL(0.45 gm daily); MP
<i>fluticasone propionate hfa 220 MCG/ACT</i>	1	QL(0.9 gm daily); MP
PULMICORT FLEXHALER AEPB 90 MCG/ACT	1	QL(0.04 ea daily); MP
PULMICORT FLEXHALER AEPB 180 MCG/ACT	1	QL(0.07 ea daily); MP
PULMICORT SUSP (<i>budesonide (inhalation)</i>)	2	QL(4 ml daily)
QVAR REDHALER	1	
Sympathomimetics		
ADVAIR DISKUS AEPB (<i>fluticasone-salmeterol</i>)	1	QL(2.5 ea daily); MP
ADVAIR HFA AERO (<i>fluticasone-salmeterol</i>)	1	QL(0.5 gm daily); MP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
AIRDUO DIGIHALER 113/14	2	QL(0.04 ea daily); MP	BREZTRI AEROSPHERE	2	QL(32.1 gm per 90 day(s) retail); MP
AIRDUO DIGIHALER 232/14	2	QL(0.04 ea daily); MP	BREZTRI AEROSPHERE	2	QL(17.7 gm per 90 day(s) retail); MP
AIRDUO DIGIHALER 55/14	2	QL(0.04 ea daily); MP	BROVANA (<i>arformoterol tartrate</i>)	2	MP
AIRDUO RESPICLICK 113/14 AEPB (<i>fluticasone-salmeterol</i>)	2	QL(0.04 ea daily); MP	<i>budesonide-formoterol fumarate dihydrate</i>	2	QL(0.7 gm daily); MP
AIRDUO RESPICLICK 232/14 AEPB (<i>fluticasone-salmeterol</i>)	2	QL(0.04 ea daily); MP	COMBIVENT RESPIMAT AERS	1	QL(20 gm per 90 day(s) retail); MP
AIRDUO RESPICLICK 55/14 AEPB	2	QL(0.04 ea daily); MP	DUAKLIR PRESSAIR	2	MP
AIRSUPRA	2	QL(0.72 gm daily); MP	DULERA	1	QL(0.9 gm daily); MP
AIRSUPRA	2	QL(0.4 gm daily); MP	<i>fluticasone furoate-vilanterol</i>	2	QL(2.5 ea daily); MP
<i>albuterol sulfate AERS</i>	2	QL(0.6 gm daily); MP	<i>fluticasone-salmeterol AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT</i>	1	QL(2.5 ea daily); MP
<i>albuterol sulfate AERS</i>	2	QL(0.5 gm daily); MP	<i>fluticasone-salmeterol AEPB 113 MCG/ACT-14 MCG/ACT, 232 MCG/ACT-14 MCG/ACT, 55 MCG/ACT-14 MCG/ACT</i>	2	QL(0.04 ea daily); MP
<i>albuterol sulfate AERS</i>	2	QL(1.3 gm daily); MP	<i>fluticasone-salmeterol AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT</i>	2	QL(2.5 ea daily); MP
<i>albuterol sulfate NEBU 0.083 %, 0.5 %, 0.63 MG/3ML, 1.25 MG/3ML, 2.5 MG/0.5ML</i>	1	MP	<i>fluticasone-salmeterol AERO</i>	2	QL(0.5 gm daily); MP
ALBUTEROL SULFATE NEBU	1	MP	<i>formoterol fumarate NEBU</i>	2	MP
ANORO ELLIPTA	1	QL(180 ea per 90 day(s) retail)	<i>ipratropium-albuterol SOLN</i>	1	MP
ANORO ELLIPTA	1	QL(42 ea per 90 day(s) retail)	<i>levalbuterol hcl</i>	2	MP
<i>arformoterol tartrate</i>	2	MP	<i>levalbuterol tartrate</i>	2	QL(1 gm daily); MP
BEVESPI AEROSPHERE	1	QL(32.1 gm per 90 day(s) retail); MP			
BREO ELLIPTA 50 MCG/INH-25 MCG/INH	2	QL(180 ea per 90 day(s) retail); MP			
BREO ELLIPTA	2	QL(2.5 ea daily); MP			
BREO ELLIPTA (<i>fluticasone furoate-vilanterol</i>)	2	QL(2.5 ea daily); MP			

Drug Name	Drug Tier	Requirements/Limits
PERFOROMIST NEBU (formoterol fumarate)	2	MP
PROAIR DIGIHALER	2	QL(0.04 ea daily); MP
PROAIR RESPICLICK AEPB	2	QL(0.04 ea daily); MP
PROVENTIL HFA AERS (albuterol sulfate)	1	QL(0.5 gm daily); MP
SEREVENT DISKUS	1	QL(2.5 ea daily); MP
STIOLTO RESPIMAT	1	QL(12 gm per 90 day(s) retail); MP
STRIVERDI RESPIMAT	2	MP
SYMBICORT 160 MCG/ACT-4.5 MCG/ACT (budesonide-formoterol fumarate dihydrate)	1	QL(0.45 gm daily); MP
SYMBICORT 80 MCG/ACT-4.5 MCG/ACT (budesonide-formoterol fumarate dihydrate)	1	QL(0.5 gm daily); MP
SYMBICORT (budesonide-formoterol fumarate dihydrate)	1	QL(0.7 gm daily); MP
terbutaline sulfate TABS	3	MP
TRELEGY ELLIPTA	1	QL(180 ea per 90 day(s) retail); MP
TRELEGY ELLIPTA	1	QL(84 ea per 90 day(s) retail); MP
VENTOLIN HFA AERS (albuterol sulfate)	1	QL(1.3 gm daily); MP
VENTOLIN HFA AERS (albuterol sulfate)	1	QL(0.55 gm daily); MP
XOPENEX (levalbuterol hcl)	2	MP
XOPENEX CONCENTRATE (levalbuterol hcl)	2	MP
XOPENEX HFA (levalbuterol tartrate)	1	QL(1 gm daily); MP
Xanthines		

Drug Name	Drug Tier	Requirements/Limits
theophylline ELIX	3	
theophylline SOLN	3	MP
theophylline TB12 300 MG, 450 MG	3	MP
ANTICOAGULANTS - Blood Thinners		
Coumarin Anticoagulants		
warfarin sodium TABS	1	MP
Direct Factor Xa Inhibitors		
ELIQUIS STARTER PACK TBPK	1	QL(74 ea per 30 day(s) retail)
ELIQUIS TABS 5 MG	1	QL(218 ea per 102 day(s) retail); MP
ELIQUIS TABS 2.5 MG	1	QL(2 ea daily); MP
SAVAYSA	2	MP
XARELTO STARTER PACK TBPK	1	QL(51 ea per 30 day(s) retail)
XARELTO SUSR	1	QL(20 ml daily); MP
XARELTO TABS 15 MG	1	QL(102 ea per 102 day(s) retail); MP
XARELTO TABS 20 MG	1	QL(42 ea per 34 day(s) retail); MP
XARELTO TABS 10 MG	1	QL(1 ea daily); MP
XARELTO TABS 2.5 MG	1	QL(2 ea daily); MP
Heparins And Heparinoid-Like Agents		
ARIXTRA (fondaparinux sodium)	2	SP; MP
enoxaparin sodium SOLN IJ 300 MG/3ML	1	SP; MP
enoxaparin sodium SOSY	1	SP; MP
fondaparinux sodium	2	SP; MP
FRAGMIN SOLN 10000 UNIT/4ML, 95000 UNIT/3.8ML	2	SP; MP
FRAGMIN SOSY	2	SP; MP

Drug Name	Drug Tier	Requirements/Limits
<i>heparin sodium (porcine) lock flush 10 UNIT/ML</i>	4	MP
<i>heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML</i>	3	MP
LOVENOX SOLN IJ 300 MG/3ML (<i>enoxaparin sodium</i>)	2	SP; MP
LOVENOX SOSY (<i>enoxaparin sodium</i>)	2	SP; MP
Thrombin Inhibitors		
<i>dabigatran etexilate mesylate CAPS 75 MG, 150 MG</i>	2	QL(2 ea daily); MP
<i>dabigatran etexilate mesylate CAPS 110 MG</i>	2	QL(4 ea daily); MP
PRADAXA CAPS 110 MG (<i>dabigatran etexilate mesylate</i>)	1	QL(4 ea daily); MP
PRADAXA CAPS 75 MG, 150 MG (<i>dabigatran etexilate mesylate</i>)	1	QL(2 ea daily); MP
PRADAXA PACK	2	AL(Up to 11 yrs old); MP
ANTICONVULSANTS - Drugs to Treat Seizures		
Anticonvulsants - Benzodiazepines		
LIBERVANT FILM	CO	
Anticonvulsants - Misc.		
LEVETIRACETAM/SODIUM CHLORIDE	CO	
MOTPOLY XR CP24	CO	
<i>primidone</i>	CO	
ZONISADE SUSP	CO	
ZTALMY	CO	SP
Carbamates		
XCOPRI TABS	CO	SP
GABA Modulators		
VIGAFYDE SOLN	CO	SP
ANTIDEPRESSANTS - Drugs to Treat Depression		

Drug Name	Drug Tier	Requirements/Limits
Antidepressant Combinations		
AUVELITY	CO	
GABA Receptor Modulator - Neuroactive Steroid		
ZULRESSO	CO	
ZURZUVAE	CO	SP
Selective Serotonin Reuptake Inhibitors (SSRIs)		
CITALOPRAM HYDROBROMIDE CAPS	CO	
Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)		
VENLAFAXINE BESYLATE ER	CO	
ANTIDIABETICS - Drugs to Regulate Blood Sugar		
Alpha-Glucosidase Inhibitors		
<i>acarbose</i>	1	MP
<i>miglitol</i>	1	MP
Antidiabetic - Amylin Analogs		
SYMLINPEN 120 SOPN	1	MP
SYMLINPEN 60 SOPN	1	MP
Antidiabetic Combinations		
ACTOPLUS MET TABS 850 MG-15 MG (<i>pioglitazone hcl-metformin hcl</i>)	2	MP
<i>alogliptin-metformin hcl</i>	2	MP
<i>alogliptin-pioglitazone 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG</i>	2	MP
<i>dapagliflozin propanediol-metformin hcl</i>	2	MP
DUETACT (<i>pioglitazone hcl-glimepiride</i>)	2	MP
<i>glipizide-metformin hcl</i>	2	MP
<i>glyburide-metformin</i>	1	MP
GLYXAMBI	2	MP

Drug Name	Drug Tier	Requirements/Limits
INVOKAMET XR TB24	2	MP
INVOKAMET TABS	1	MP
JANUMET XR TB24	1	MP
JANUMET TABS	1	QL(2 ea daily); MP
JENTADUETO XR TB24	2	MP
JENTADUETO TABS	1	MP
KAZANO (<i>alogliptin-metformin hcl</i>)	2	MP
KOMBIGLYZE XR (<i>saxagliptin-metformin hcl</i>)	2	MP
OSENI 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG (<i>alogliptin-pioglitazone</i>)	2	MP
<i>pioglitazone hcl-glimepiride</i>	2	MP
<i>pioglitazone hcl-metformin hcl TABS</i>	2	MP
QTERN	2	MP
<i>saxagliptin-metformin hcl</i>	2	MP
SEGLUROMET	2	MP
SOLIQUA 100/33	2	QL(0.6 ml daily); MP
STEGLUJAN	2	MP
SYNJARDY XR TB24	2	MP
SYNJARDY TABS	1	MP
TRIJARDY XR	2	MP
XIGDUO XR (<i>dapagliflozin propanediol-metformin hcl</i>)	1	MP
XIGDUO XR	1	MP
XULTOPHY 100/3.6	2	QL(0.5 ml daily); MP
Biguanides		
GLUMETZA TB24 (<i>metformin hcl</i>)	2	MP
<i>metformin hcl SOLN</i>	2	MP
<i>metformin hcl TABS</i>	1	MP
<i>metformin hcl TB24 500 MG, 750 MG</i>	1	MP

Drug Name	Drug Tier	Requirements/Limits
<i>metformin hcl TB24 500 MG, 1000 MG</i>	2	MP
RIOMET SOLN (<i>metformin hcl</i>)	2	MP
Diabetic Other		
BAQSIMI ONE PACK POWD	1	QL(0.067 ea daily); MP
BAQSIMI TWO PACK POWD	1	QL(0.067 ea daily); MP
<i>diazoxide</i>	2	MP
GLUCAGEN HYPOKIT	1	MP
<i>glucagon (rdna)</i>	1	MP
GLUCAGON EMERGENCY KIT (<i>glucagon (rdna)</i>)	1	MP
GLUCAGON EMERGENCY KIT FOR LOW BLOOD SUGAR	2	MP
GVOKE HYPOPEN 1-PACK SOAJ 1 MG/0.2ML	1	QL(0.4 ml per 30 day(s) retail; 1 ml per 90 days mail)
GVOKE HYPOPEN 1-PACK SOAJ 0.5 MG/0.1ML	1	QL(0.2 ml per 30 day(s) retail; 1 ml per 90 days mail)
GVOKE HYPOPEN 2-PACK SOAJ 1 MG/0.2ML	1	QL(0.4 ml per 30 day(s) retail; 1 ml per 90 days mail)
GVOKE HYPOPEN 2-PACK SOAJ 0.5 MG/0.1ML	1	QL(0.2 ml per 30 day(s) retail; 1 ml per 90 days mail)
GVOKE KIT SOLN	2	QL(0.4 ml per 30 day(s) retail)
GVOKE PFS SOSY 0.5 MG/0.1ML	2	QL(0.2 ml per 30 day(s) retail; 1 ml per 90 days mail)
GVOKE PFS SOSY 1 MG/0.2ML	2	QL(0.4 ml per 30 day(s) retail; 1 ml per 90 days mail)

Drug Name	Drug Tier	Requirements/ Limits
PROGLYCEM (<i>diazoxide</i>)	1	MP
ZEGALOGUE SOAJ	1	
ZEGALOGUE SOSY	1	
Dipeptidyl Peptidase-4 (DPP-4) Inhibitors		
<i>alogliptin benzoate</i>	2	MP
JANUVIA	1	QL(2 ea daily); MP
NESINA (<i>alogliptin benzoate</i>)	2	MP
ONGLYZA (<i>saxagliptin hcl</i>)	2	MP
<i>saxagliptin hcl</i>	2	MP
SITAGLIPTIN	2	MP
TRADJENTA	1	MP
ZITUVIO	2	MP
Incretin Mimetic Agents		
BYDUREON BCISE AUIJ	2	QL(0.122 ml daily); MP
BYETTA SOPN 10 MCG/0.04ML	1	QL(0.08 ml daily); MP
BYETTA SOPN 5 MCG/0.02ML	1	QL(0.04 ml daily); MP
<i>liraglutide</i>	2	QL(0.2 ml daily); MP
MOUNJARO SC 2.5 MG/0.5ML, 5 MG/0.5ML, 7.5 MG/0.5ML, 10 MG/0.5ML, 12.5 MG/0.5ML, 15 MG/0.5ML	2	QL(0.072 ml daily); MP
OZEMPIC SOPN	2	QL(0.11 ml daily); MP
RYBELSUS TABS	2	QL(1 ea daily); MP
TRULICITY SC 0.75 MG/0.5ML, 1.5 MG/0.5ML, 3 MG/0.5ML, 4.5 MG/0.5ML	1	QL(0.072 ml daily); MP
VICTOZA (<i>liraglutide</i>)	1	QL(0.2 ml daily); MP
VICTOZA (<i>liraglutide</i>)	1	QL(0.3 ml daily); MP
Insulin		

Drug Name	Drug Tier	Requirements/ Limits
ADMELOG SOLOSTAR SOPN	2	QL(3 ml daily); MP
ADMELOG SOLN IJ	2	QL(3 ml daily); MP
AFREZZA POWD 4 UNIT, 8 UNIT, 12 UNIT	2	QL(6 ea daily); MP
APIDRA SOLOSTAR SOPN	1	QL(3 ml daily); MP
APIDRA SOLN	1	QL(3 ml daily); MP
BASAGLAR KWIKPEN SOPN	2	QL(3 ml daily); MP
BASAGLAR TEMPO PEN SOPN	2	QL(3 ml daily); MP
FIASP FLEXTOUCH SOPN	2	QL(3 ml daily); MP
FIASP PENFILL SOCT	2	QL(3 ml daily); MP
FIASP PUMPCART SOCT	2	QL(3 ml daily); MP
FIASP SOLN	2	QL(3 ml daily); MP
HUMALOG JUNIOR KWIKPEN SOPN	1	QL(3 ml daily); MP
HUMALOG KWIKPEN SOPN 200 UNIT/ML	2	QL(3 ml daily); MP
HUMALOG KWIKPEN SOPN 100 UNIT/ML	1	QL(3 ml daily); MP
HUMALOG MIX 50/50 KWIKPEN SUPN	1	QL(3 ml daily); MP
HUMALOG MIX 50/50 SUSP	1	QL(3 ml daily); MP
HUMALOG MIX 75/25 KWIKPEN SUPN	1	QL(3 ml daily); MP
HUMALOG MIX 75/25 SUSP	1	QL(3 ml daily); MP
HUMALOG TEMPO PEN SOPN	1	QL(3 ml daily); MP
HUMALOG SOCT	1	QL(3 ml daily); MP
HUMALOG SOLN IJ	1	QL(3 ml daily); MP
HUMULIN 70/30 KWIKPEN SUPN	1	QL(3 ml daily); MP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
HUMULIN 70/30 SUSP	1	QL(3 ml daily); MP	INSULIN LISPRO PROTAMINE/INSULIN LISPRO KWIKPEN SUPN	2	QL(3 ml daily); MP
HUMULIN N KWIKPEN SUPN	2	QL(3 ml daily); MP	INSULIN LISPRO SOLN IJ	1	QL(3 ml daily); MP
HUMULIN N SUSP	1	QL(3 ml daily); MP	LANTUS SOLOSTAR SOPN	1	QL(3 ml daily); MP
HUMULIN R U-500 (CONCENTRATED) SOLN SC	1	QL(3 ml daily); MP	LANTUS SOLN	1	QL(3 ml daily); MP
HUMULIN R U-500 KWIKPEN SOPN SC	1	QL(3 ml daily); MP	LEVEMIR FLEXPEN SOPN	1	QL(3 ml daily); MP
HUMULIN R SOLN IJ	1	QL(3 ml daily); MP	LEVEMIR FLEXTOUCH SOPN	1	QL(3 ml daily); MP
INSULIN ASPART FLEXPEN SOPN	1	QL(90 ml per fill retail); MP	LEVEMIR SOLN	1	QL(3 ml daily); MP
INSULIN ASPART PENFILL SOCT	2	QL(3 ml daily); MP	LYUMJEV KWIKPEN SOPN	2	QL(3 ml daily); MP
INSULIN ASPART PROTAMINE/INSULIN ASPART FLEXPEN SUPN	1	QL(90 ml per fill retail); MP	LYUMJEV TEMPO PEN SOPN	2	QL(3 ml daily); MP
INSULIN ASPART PROTAMINE/INSULIN ASPART SUSP	1	QL(3 ml daily)	LYUMJEV SOLN	2	QL(3 ml daily); MP
INSULIN ASPART SOLN IJ	1	QL(90 ml per fill retail); MP	NOVOLIN 70/30 FLEXPEN RELION SUPN	2	QL(3 ml daily); MP
INSULIN DEGLUDEC FLEXTOUCH SOPN	2	QL(3 ml daily); MP	NOVOLIN 70/30 FLEXPEN SUPN	2	QL(3 ml daily); MP
INSULIN DEGLUDEC SOLN	2	QL(3 ml daily); MP	NOVOLIN 70/30 RELION SUSP	2	QL(3 ml daily); MP
INSULIN GLARGINE MAX SOLOSTAR SOPN	2	QL(3 ml daily); MP	NOVOLIN 70/30 SUSP	2	QL(3 ml daily); MP
INSULIN GLARGINE SOLOSTAR SOPN	2	QL(3 ml daily); MP	NOVOLIN N FLEXPEN RELION SUPN	1	QL(3 ml daily); MP
INSULIN GLARGINE SOLN	2	QL(3 ml daily); MP	NOVOLIN N FLEXPEN SUPN	1	QL(3 ml daily); MP
INSULIN GLARGINE-YFGN SOLN	2	QL(3 ml daily); MP	NOVOLIN N RELION SUSP	1	QL(3 ml daily); MP
INSULIN GLARGINE-YFGN SOPN	2	QL(3 ml daily); MP	NOVOLIN N SUSP	1	QL(3 ml daily); MP
INSULIN LISPRO JUNIOR KWIKPEN SOPN	1	QL(3 ml daily); MP	NOVOLIN R FLEXPEN RELION SOPN IJ	1	QL(3 ml daily); MP
INSULIN LISPRO KWIKPEN SOPN	1	QL(3 ml daily); MP	NOVOLIN R FLEXPEN SOPN IJ	1	QL(3 ml daily); MP
			NOVOLIN R RELION SOLN IJ	1	QL(3 ml daily); MP

Drug Name	Drug Tier	Requirements/Limits
NOVOLIN R SOLN IJ	1	QL(3 ml daily); MP
NOVOLOG FLEXPEN RELION SOPN	2	QL(90 ml per fill retail); MP
NOVOLOG FLEXPEN SOPN	2	QL(90 ml per fill retail); MP
NOVOLOG MIX 70/30 PREFILLED FLEXPEN RELION SUPN	2	QL(90 ml per fill retail); MP
NOVOLOG MIX 70/30 PREFILLED FLEXPEN SUPN	2	QL(90 ml per fill retail); MP
NOVOLOG MIX 70/30 RELION SUSP	2	QL(3 ml daily); MP
NOVOLOG MIX 70/30 SUSP	2	QL(3 ml daily); MP
NOVOLOG PENFILL SOCT	1	QL(3 ml daily); MP
NOVOLOG RELION SOLN IJ	2	QL(90 ml per fill retail); MP
NOVOLOG SOLN IJ	2	QL(90 ml per fill retail); MP
REZVOGLAR KWIKPEN	2	QL(90 ml per fill retail); MP
SEMGLEE SOLN	2	QL(3 ml daily); MP
SEMGLEE SOPN	2	QL(3 ml daily); MP
TOUJEO MAX SOLOSTAR SOPN	2	QL(3 ml daily); MP
TOUJEO SOLOSTAR SOPN	2	QL(3 ml daily); MP
TRESIBA FLEXTOUCH SOPN	2	QL(3 ml daily); MP
TRESIBA SOLN	2	QL(3 ml daily); MP
Insulin Sensitizing Agents		
ACTOS (<i>pioglitazone hcl</i>)	2	MP
<i>pioglitazone hcl</i>	1	MP
Meglitinide Analogues		
<i>nateglinide</i>	1	MP
<i>repaglinide</i>	1	MP

Drug Name	Drug Tier	Requirements/Limits
Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors		
<i>dapagliflozin propanediol</i>	2	MP
FARXIGA (<i>dapagliflozin propanediol</i>)	1	MP
FARXIGA	1	MP
INVOKANA	1	MP
JARDIANCE	1	MP
STEGLATRO	2	MP
Sulfonylureas		
AMARYL (<i>glimepiride</i>)	2	MP
<i>glimepiride 1 MG, 2 MG, 4 MG</i>	1	MP
<i>glipizide TABS 5 MG, 10 MG</i>	1	MP
<i>glipizide TB24</i>	1	MP
GLUCOTROL XL TB24 (<i>glipizide</i>)	2	MP
<i>glyburide micronized 1.5 MG, 3 MG, 6 MG</i>	1	MP
<i>glyburide TABS</i>	1	MP
GLYNASE (<i>glyburide micronized</i>)	2	MP
ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea		
Antidiarrheal/Probiotic Agents - Misc.		
<i>bismuth subsalicylate CHEW 262 MG</i>	3	
<i>bismuth subsalicylate SUSP 262 MG/15ML, 525 MG/15ML, 525 MG/30ML, 1050 MG/30ML</i>	3	
<i>bismuth subsalicylate TABS</i>	3	
CULTURELLE IMMUNITY SUPPORT FORMULA CAPS (<i>lactobacillus rhamnosus (gg)</i>)	3	

Drug Name	Drug Tier	Requirements/Limits
CULTURELLE PRO-WELL CAPS (<i>lactobacillus rhamnosus</i> (gg))	3	
CULTURELLE CAPS (<i>lactobacillus rhamnosus</i> (gg))	NF	
CULTURELLE CAPS (<i>lactobacillus rhamnosus</i> (gg))	3	
<i>lactobacillus rhamnosus</i> (gg) CAPS 50 MG	3	
PEPTO BISMOL TABS (<i>bismuth subsalicylate</i>)	3	
PEPTO-BISMOL MAX STRENGTH SUSP (<i>bismuth subsalicylate</i>)	3	
PEPTO-BISMOL TO-GO CHEW (<i>bismuth subsalicylate</i>)	3	
PEPTO-BISMOL CHEW (<i>bismuth subsalicylate</i>)	3	
PEPTO-BISMOL SUSP (<i>bismuth subsalicylate</i>)	3	
Antidiarrheal/Probiotic Combinations		
CULTURELLE HEALTH & WELLNESS CAPS	3	
Antiperistaltic Agents		
<i>diphenoxylate w/ atropine</i> LIQD	1	
<i>diphenoxylate w/ atropine</i> TABS	1	
IMODIUM A-D CAPS (<i>loperamide hcl</i>)	1	RX/OTC
IMODIUM A-D SOLN (<i>loperamide hcl</i>)	3	
IMODIUM A-D TABS (<i>loperamide hcl</i>)	NF	
LOMOTIL TABS (<i>diphenoxylate w/ atropine</i>)	NF	
<i>loperamide hcl</i> CAPS	1	RX/OTC

Drug Name	Drug Tier	Requirements/Limits
<i>loperamide hcl</i> SOLN 1 MG/7.5ML	3	
<i>loperamide hcl</i> SUSP	3	
<i>loperamide hcl</i> TABS	1	
LOPERAMIDE HYDROCHLORIDE SUSP	3	
ANTIDOTES AND SPECIFIC ANTAGONISTS		
Antidotes - Chelating Agents		
CHEMET	3	
Opioid Antagonists		
KLOXXADO LIQD	3	QL(6 ea per 90 day(s) retail)
<i>naloxone hcl</i> LIQD	3	QL(6 ea per 90 day(s) retail); RX/OTC
<i>naloxone hcl</i> SOCT	3	QL(6 ml per 90 day(s) retail)
<i>naloxone hcl</i> SOLN 0.4 MG/ML, 4 MG/10ML	3	QL(6 ml per 90 day(s) retail)
<i>naloxone hcl</i> SOSY 2 MG/2ML	3	QL(6 ml per 90 day(s) retail)
NARCAN LIQD (<i>naloxone hcl</i>)	3	QL(6 ea per 90 day(s) retail); RX/OTC
OPVEE NA	3	QL(6 ea per 90 day(s) retail)
REXTOVY LIQD	3	QL(6 ea per 90 day(s) retail; 6 ea per 90 days mail)
ZIMHI SOSY	3	QL(3 ml per 90 day(s) retail)
ANTIEMETICS - Drugs to Treat Nausea and Vomiting		
5-HT3 Receptor Antagonists		
ANZEMET TABS 50 MG	2	QL(10 ea per fill retail)
<i>granisetron hcl</i> TABS	1	QL(60 ea per 30 day(s) retail; 60 ea per 30 days mail)
<i>ondansetron hcl</i> SOLN OR 4 MG/5ML	1	QL(75 ml per fill retail)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>ondansetron hcl TABS 4 MG, 8 MG</i>	1	QL(60 ea per 30 day(s) retail; 60 ea per 30 days mail)	<i>aprepitant CAPS</i>	2	QL(3 ea per fill retail); AL(At least 12 yrs old)
<i>ondansetron TBDP 16 MG</i>	2	QL(30 ea per 30 day(s) retail; 30 ea per 30 days mail)	<i>aprepitant MISC</i>	2	QL(3 ea per fill retail); AL(At least 12 yrs old)
<i>ondansetron TBDP 4 MG, 8 MG</i>	1	QL(60 ea per 30 day(s) retail; 60 ea per 30 days mail)	EMEND TRIPACK CAPS (<i>aprepitant</i>)	2	QL(3 ea per fill retail); AL(At least 12 yrs old)
SANCUSO PTCH	2	Limit: 6 patches per 30 days; QL(0.2 ea daily); SP	EMEND CAPS 80 MG (<i>aprepitant</i>)	2	QL(2 ea per fill retail); AL(At least 12 yrs old)
Antiemetics - Anticholinergic			EMEND SUSR	2	AL(At least 12 yrs old)
ANTIVERT CHEW (<i>meclizine hcl</i>)	3	RX/OTC	VARUBI TBPK	2	QL(2 ea per 7 day(s) retail)
<i>dimenhydrinate TABS</i>	3		ANTIFUNGALS - Drugs to Treat Fungal Infections		
DRAMAMINE TABS (<i>dimenhydrinate</i>)	3		Antifungal - Glucan Synthesis Inhibitors		
<i>meclizine hcl CHEW</i>	3	RX/OTC	BREXAFEMME	2	QL(4 ea per fill retail)
<i>meclizine hcl TABS 12.5 MG, 25 MG</i>	3	RX/OTC	Antifungals		
<i>trimethobenzamide hcl CAPS</i>	4		ANCOBON (<i>flucytosine</i>)	2	
Antiemetics - Miscellaneous			<i>flucytosine</i>	2	
AKYNZEO	2	QL(1 ea per fill retail); SP	<i>griseofulvin microsize SUSP</i>	1	
<i>dronabinol CAPS</i>	3	PA	<i>griseofulvin microsize TABS</i>	2	
MARINOL CAPS (<i>dronabinol</i>)	3	PA	<i>griseofulvin ultramicrosize</i>	2	
Substance P/Neurokinin 1 (NK1) Receptor Antagonists			<i>nystatin TABS</i>	1	
<i>aprepitant CAPS 80 MG</i>	1	QL(2 ea per fill retail); AL(At least 12 yrs old)	<i>terbinafine hcl TABS</i>	1	QL(84 ea per fill retail)
<i>aprepitant CAPS 40 MG, 125 MG</i>	1	QL(1 ea per fill retail); AL(At least 12 yrs old)	Imidazole-Related Antifungals		
			CRESEMBA CAPS OR 186 MG	2	
			DIFLUCAN SUSR (<i>fluconazole</i>)	2	
			DIFLUCAN TABS 150 MG (<i>fluconazole</i>)	2	QL(2 ea per fill retail)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
DIFLUCAN TABS 100 MG, 200 MG (<i>fluconazole</i>)	2		BENADRYL ALLERGY ULTRATABS TABS (<i>diphenhydramine hcl</i>)	3	AL(Up to 64 yrs old)
<i>fluconazole SUSR</i>	1		BENADRYL ALLERGY CAPS (<i>diphenhydramine hcl</i>)	3	AL(Up to 64 yrs old)
<i>fluconazole TABS 50 MG, 100 MG, 200 MG</i>	1		BENADRYL ALLERGY TABS (<i>diphenhydramine hcl</i>)	3	AL(Up to 64 yrs old)
<i>fluconazole TABS 150 MG</i>	1	QL(2 ea per fill retail)	<i>carbinoxamine maleate SOLN</i>	3	
<i>itraconazole CAPS</i>	2	QL(84 ea per fill retail)	<i>carbinoxamine maleate TABS 4 MG</i>	3	
<i>itraconazole SOLN</i>	2	QL(840 ml per fill retail)	<i>clemastine fumarate TABS 1.34 MG</i>	3	
<i>ketoconazole</i>	1		DAYHIST ALLERGY 12 HOUR RELIEF TABS	3	
NOXAFIL PACK	2		<i>diphenhydramine hcl CAPS</i>	3	AL(Up to 64 yrs old)
NOXAFIL SUSP (<i>posaconazole</i>)	2		<i>diphenhydramine hcl ELIX 12.5 MG/5ML</i>	3	
NOXAFIL TBEC (<i>posaconazole</i>)	2		<i>diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML</i>	3	
<i>posaconazole SUSP</i>	2		<i>diphenhydramine hcl SOLN 50 MG/ML</i>	3	AL(Up to 64 yrs old)
<i>posaconazole TBEC</i>	2		<i>diphenhydramine hcl TABS 25 MG</i>	3	AL(Up to 64 yrs old)
SPORANOX CAPS (<i>itraconazole</i>)	2	QL(84 ea per fill retail)	Antihistamines - Non-Sedating		
SPORANOX SOLN (<i>itraconazole</i>)	2	QL(840 ml per fill retail)	ALLEGRA ALLERGY CHILDRENS SUSP (<i>fexofenadine hcl</i>)	1	
TOLSURA CAPS	2		ALLEGRA ALLERGY TABS (<i>fexofenadine hcl</i>)	1	
VFEND SUSP (<i>voriconazole</i>)	2		<i>cetirizine hcl CAPS</i>	2	
VFEND TABS (<i>voriconazole</i>)	2		<i>cetirizine hcl CHEW</i>	2	
VIVJOA	2	QL(18 ea per fill retail)	<i>cetirizine hcl SOLN OR</i>	1	QL(10 ml daily); RX/OTC
<i>voriconazole SUSR</i>	2		<i>cetirizine hcl SYRP OR</i>	1	QL(10 ml daily); RX/OTC
<i>voriconazole TABS</i>	2		<i>cetirizine hcl TABS 5 MG</i>	1	
ANTIHISTAMINES - Drugs to Treat Allergies			<i>cetirizine hcl TABS 10 MG</i>	1	QL(1 ea daily)
Antihistamines - Alkylamines					
<i>chlorpheniramine maleate TABS</i>	3				
Antihistamines - Ethanolamines					
BENADRYL ALLERGY CHILDRENS LIQD (<i>diphenhydramine hcl</i>)	3				

Drug Name	Drug Tier	Requirements/Limits
CLARINEX TABS (<i>desloratadine</i>)	2	
CLARITIN ALLERGY CHILDRENS SOLN (<i>loratadine</i>)	1	QL(10 ml daily)
CLARITIN CHILDRENS CHEW (<i>loratadine</i>)	1	
CLARITIN CHEW (<i>loratadine</i>)	1	
CLARITIN SOLN (<i>loratadine</i>)	1	QL(10 ml daily)
CLARITIN TABS (<i>loratadine</i>)	1	QL(1 ea daily)
<i>desloratadine</i> TABS	2	
<i>desloratadine</i> TBDP 2.5 MG	2	AL(Up to 11 yrs old)
<i>desloratadine</i> TBDP 5 MG	2	
<i>fexofenadine hcl</i> SUSP	1	
<i>fexofenadine hcl</i> TABS 60 MG, 180 MG	1	
<i>levocetirizine dihydrochloride</i> SOLN	2	RX/OTC
<i>levocetirizine dihydrochloride</i> TABS	1	RX/OTC
<i>loratadine</i> CHEW	1	
<i>loratadine</i> SOLN	1	QL(10 ml daily)
<i>loratadine</i> TABS	1	QL(1 ea daily)
XYZAL ALLERGY 24HR CHILDRENS SOLN (<i>levocetirizine dihydrochloride</i>)	2	RX/OTC
XYZAL ALLERGY 24HR TABS (<i>levocetirizine dihydrochloride</i>)	1	RX/OTC
ZYRTEC ALLERGY CAPS (<i>cetirizine hcl</i>)	2	
ZYRTEC ALLERGY TABS (<i>cetirizine hcl</i>)	1	QL(1 ea daily)
ZYRTEC CHILDRENS ALLERGY CHEW 10 MG (<i>cetirizine hcl</i>)	2	

Drug Name	Drug Tier	Requirements/Limits
ZYRTEC CHILDRENS ALLERGY SOLN OR (<i>cetirizine hcl</i>)	2	QL(10 ml daily); RX/OTC
ZYRTEC CHEW 10 MG (<i>cetirizine hcl</i>)	2	
Antihistamines - Phenothiazines		
<i>promethazine hcl</i> SOLN OR 6.25 MG/5ML	3	AL(At least 2 yrs old - Up to 64 yrs old)
<i>promethazine hcl</i> SUPP 50 MG	3	QL(2 ea daily); AL(At least 2 yrs old - Up to 64 yrs old)
<i>promethazine hcl</i> SUPP 12.5 MG, 25 MG	3	QL(4 ea daily); AL(At least 2 yrs old - Up to 64 yrs old)
<i>promethazine hcl</i> TABS	3	AL(At least 2 yrs old - Up to 64 yrs old)
Antihistamines - Piperidines		
<i>cyproheptadine hcl</i> SYRP	3	AL(Up to 64 yrs old)
<i>cyproheptadine hcl</i> TABS	3	AL(Up to 64 yrs old)
ANTIHYPERTENSIVES - Drugs to Treat High Cholesterol		
Adenosine Triphosphate-Citrate Lyase (ACL) Inhibitors		
NEXLETOL	2	AL(At least 18 yrs old)
Antihyperlipidemics - Combinations		
<i>ezetimibe-simvastatin</i>	2	QL(1 ea daily)
NEXLIZET	2	AL(At least 18 yrs old)
VYTORIN (<i>ezetimibe-simvastatin</i>)	2	QL(1 ea daily)
Antihyperlipidemics - Misc.		
<i>icosapent ethyl</i>	2	
LOVAZA (<i>omega-3-acid ethyl esters</i>)	2	
<i>omega-3-acid ethyl esters</i>	2	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
VASCEPA (<i>icosapent ethyl</i>)	2		<i>fenofibrate micronized 30 MG, 43 MG, 90 MG, 130 MG</i>	2	
Bile Acid Sequestrants			<i>fenofibrate CAPS</i>	2	
<i>cholestyramine light PACK</i>	1	MP	<i>fenofibrate TABS 40 MG, 120 MG</i>	2	
<i>cholestyramine light POWD</i>	1	MP	<i>fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG</i>	1	
<i>cholestyramine PACK</i>	1	MP	FENOFIBRATE TABS	1	
<i>cholestyramine POWD</i>	1	MP	<i>fenofibric acid</i>	2	
<i>colesevelam hcl PACK</i>	2	MP	FENOGLIDE TABS (<i>fenofibrate</i>)	2	
<i>colesevelam hcl TABS</i>	2	MP	FIBRICOR (<i>fenofibric acid</i>)	2	
COLESTID FLAVORED GRAN (<i>colestipol hcl</i>)	2	MP	<i>gemfibrozil TABS</i>	1	
COLESTID FLAVORED PACK (<i>colestipol hcl</i>)	2	MP	LIPOFEN CAPS (<i>fenofibrate</i>)	2	
COLESTID GRAN (<i>colestipol hcl</i>)	2	MP	LOPID TABS (<i>gemfibrozil</i>)	2	
COLESTID PACK (<i>colestipol hcl</i>)	2	MP	TRICOR TABS (<i>fenofibrate</i>)	2	
COLESTID TABS (<i>colestipol hcl</i>)	2	MP	TRILIPIX (<i>choline fenofibrate</i>)	2	
<i>colestipol hcl GRAN</i>	2	MP	HMG CoA Reductase Inhibitors		
<i>colestipol hcl PACK</i>	2	MP	ALTOPREV TB24 20 MG, 40 MG, 60 MG	2	QL(1 ea daily); MP
<i>colestipol hcl TABS</i>	1	MP	ATORVALIQ SUSP	2	QL(20 ml daily); MP
QUESTRAN LIGHT POWD (<i>cholestyramine light</i>)	2	MP	<i>atorvastatin calcium TABS</i>	1	QL(1 ea daily); MP
QUESTRAN PACK (<i>cholestyramine</i>)	2	MP	CRESTOR TABS (<i>rosuvastatin calcium</i>)	2	QL(1 ea daily); MP
QUESTRAN POWD (<i>cholestyramine</i>)	2	MP	EZALLOR SPRINKLE CPSP	2	QL(1 ea daily); MP
WELCHOL PACK (<i>colesevelam hcl</i>)	2	MP	<i>fluvastatin sodium CAPS</i>	2	QL(1 ea daily); MP
WELCHOL TABS (<i>colesevelam hcl</i>)	2	MP	<i>fluvastatin sodium TB24</i>	2	QL(1 ea daily); MP
Fibric Acid Derivatives			LESCOL XL TB24 (<i>fluvastatin sodium</i>)	2	QL(1 ea daily); MP
<i>choline fenofibrate</i>	2		LIPITOR TABS (<i>atorvastatin calcium</i>)	2	QL(1 ea daily); MP
<i>fenofibrate micronized 67 MG, 134 MG, 200 MG</i>	1				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
LIVALO (<i>pitavastatin calcium</i>)	2	QL(1 ea daily); MP	ACCUPRIL (<i>quinapril hcl</i>)	2	MP
<i>lovastatin TABS</i>	1	QL(1 ea daily); MP	ALTACE CAPS 1.25 MG, 2.5 MG, 5 MG, 10 MG (<i>ramipril</i>)	2	MP
<i>pitavastatin calcium</i>	2	QL(1 ea daily); MP	<i>benazepril hcl</i>	1	MP
<i>pravastatin sodium</i>	1	QL(1 ea daily); MP	<i>captopril</i>	2	MP
<i>rosuvastatin calcium TABS</i>	1	QL(1 ea daily); MP	<i>enalapril maleate SOLN</i>	2	MP
<i>simvastatin TABS</i>	1	QL(1 ea daily); MP	<i>enalapril maleate TABS</i>	1	MP
ZOCOR TABS 10 MG, 20 MG, 40 MG (<i>simvastatin</i>)	2	QL(1 ea daily); MP	EPANED SOLN (<i>enalapril maleate</i>)	2	MP
ZYPITAMAG 2 MG, 4 MG	2	QL(1 ea daily); MP	<i>fosinopril sodium</i>	2	MP
Intestinal Cholesterol Absorption Inhibitors			<i>lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG</i>	1	MP
<i>ezetimibe</i>	1		LOTENSIN 10 MG, 20 MG, 40 MG (<i>benazepril hcl</i>)	2	MP
ZETIA (<i>ezetimibe</i>)	2		<i>moexipril hcl</i>	2	MP
Nicotinic Acid Derivatives			<i>perindopril erbumine</i>	2	MP
<i>niacin (antihyperlipidemic) TBCR</i>	2		QBRELIS SOLN	2	MP
NIASPAN TBCR 1000 MG (<i>niacin (antihyperlipidemic)</i>)	2		<i>quinapril hcl</i>	2	MP
Proprotein Convertase Subtilisin/Kexin Type 9 Inhibitors			<i>ramipril CAPS</i>	1	MP
PRALUENT SOAJ	1	QL(2 ml per 28 day(s) retail); SP; PA	<i>trandolapril</i>	2	MP
REPATHA PUSHTRONEX SYSTEM SOCT	1	QL(7 ml per 28 day(s) retail); SP; PA	VASOTEC TABS (<i>enalapril maleate</i>)	2	MP
REPATHA SURECLICK SOAJ	1	QL(2 ml per 28 day(s) retail); SP; PA	ZESTRIL TABS (<i>lisinopril</i>)	2	MP
REPATHA SOSY	1	QL(2 ml per 28 day(s) retail); SP; PA	Angiotensin II Receptor Antagonists		
ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure			ATACAND (<i>candesartan cilexetil</i>)	2	MP
ACE Inhibitors			AVAPRO (<i>irbesartan</i>)	2	MP
			BENICAR (<i>olmesartan medoxomil</i>)	2	MP
			<i>candesartan cilexetil</i>	2	MP
			COZAAR (<i>losartan potassium</i>)	2	MP
			DIOVAN TABS (<i>valsartan</i>)	2	MP
			EDARBI	2	MP
			<i>irbesartan</i>	2	MP
			<i>losartan potassium</i>	1	MP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MICARDIS (<i>telmisartan</i>)	2	MP	ATACAND HCT (<i>candesartan cilexetil-hydrochlorothiazide</i>)	2	MP
<i>olmesartan medoxomil</i>	1	MP	<i>atenolol & chlorthalidone</i>	1	MP
<i>telmisartan</i>	2	MP	AVALIDE (<i>irbesartan-hydrochlorothiazide</i>)	2	MP
<i>valsartan SOLN</i>	2	MP	AZOR (<i>amlodipine besylate-olmesartan medoxomil</i>)	2	MP
<i>valsartan TABS</i>	1	MP	<i>benazepril & hydrochlorothiazide</i>	1	MP
Antiadrenergic Antihypertensives			BENICAR HCT (<i>olmesartan medoxomil-hydrochlorothiazide</i>)	2	MP
CARDURA (<i>doxazosin mesylate</i>)	2	MP	<i>bisoprolol & hydrochlorothiazide</i>	1	MP
CATAPRES-TTS-1 (<i>clonidine</i>)	1	QL(0.143 ea daily); MP	<i>candesartan cilexetil-hydrochlorothiazide</i>	2	MP
CATAPRES-TTS-2 (<i>clonidine</i>)	1	QL(0.143 ea daily); MP	<i>captopril & hydrochlorothiazide</i>	2	MP
CATAPRES-TTS-3 (<i>clonidine</i>)	1	QL(0.143 ea daily); MP	DIOVAN HCT (<i>valsartan-hydrochlorothiazide</i>)	2	MP
<i>clonidine OR 0.17 MG</i>	1	MP	EDARBYCLOR	2	MP
<i>clonidine</i>	1	QL(0.143 ea daily); MP	<i>enalapril maleate & hydrochlorothiazide</i>	1	MP
<i>clonidine hcl TABS</i>	1	MP	EXFORGE (<i>amlodipine besylate-valsartan</i>)	2	MP
<i>doxazosin mesylate</i>	1	MP	EXFORGE HCT (<i>amlodipine-valsartan-hydrochlorothiazide</i>)	2	MP
<i>guanfacine hcl</i>	1	MP	<i>fosinopril sodium & hydrochlorothiazide</i>	2	MP
<i>methyldopa TABS</i>	1	MP	HYZAAR (<i>losartan potassium & hydrochlorothiazide</i>)	2	MP
MINIPRESS CAPS (<i>prazosin hcl</i>)	2	MP	<i>irbesartan-hydrochlorothiazide</i>	2	MP
NEXICLON XR OR (<i>clonidine</i>)	1	MP	<i>lisinopril & hydrochlorothiazide</i>	1	MP
<i>prazosin hcl CAPS</i>	1	MP	<i>losartan potassium & hydrochlorothiazide</i>	1	MP
<i>terazosin hcl</i>	1	MP	Antihypertensive Combinations		
Antihypertensive Combinations			ACCURETIC (<i>quinapril-hydrochlorothiazide</i>)	2	MP
<i>amlodipine besylate-benazepril hcl</i>	1	MP	<i>amlodipine besylate-olmesartan medoxomil</i>	1	MP
<i>amlodipine besylate-olmesartan medoxomil</i>	1	MP	<i>amlodipine besylate-valsartan</i>	1	MP
<i>amlodipine besylate-valsartan</i>	1	MP	<i>amlodipine-valsartan-hydrochlorothiazide</i>	1	MP

Drug Name	Drug Tier	Requirements/Limits
LOTENSIN HCT 12.5 MG-10 MG, 12.5 MG-20 MG, 25 MG-20 MG (<i>benazepril & hydrochlorothiazide</i>)	2	MP
LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (<i>amlodipine besylate-benazepril hcl</i>)	2	MP
<i>metoprolol & hydrochlorothiazide TABS</i>	2	MP
MICARDIS HCT (<i>telmisartan-hydrochlorothiazide</i>)	2	MP
<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>	2	MP
<i>olmesartan medoxomil-hydrochlorothiazide</i>	1	MP
<i>quinapril-hydrochlorothiazide</i>	2	MP
TEKTURNA HCT 12.5 MG-150 MG, 12.5 MG-300 MG, 25 MG-300 MG	2	MP
<i>telmisartan-amlodipine</i>	2	MP
<i>telmisartan-hydrochlorothiazide</i>	2	MP
TENORETIC 100 (<i>atenolol & chlorthalidone</i>)	2	MP
TENORETIC 50 (<i>atenolol & chlorthalidone</i>)	2	MP
<i>trandolapril-verapamil hcl</i>	2	MP
TRIBENZOR (<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>)	2	MP
<i>valsartan-hydrochlorothiazide</i>	1	MP
VASERETIC 25 MG-10 MG (<i>enalapril maleate & hydrochlorothiazide</i>)	2	MP
ZESTORETIC (<i>lisinopril & hydrochlorothiazide</i>)	2	MP
ZIAC (<i>bisoprolol & hydrochlorothiazide</i>)	2	MP

Drug Name	Drug Tier	Requirements/Limits
Direct Renin Inhibitors		
<i>aliskiren fumarate</i>	2	MP
TEKTURNA (<i>aliskiren fumarate</i>)	2	MP
Vasodilators		
<i>hydralazine hcl SOLN</i>	3	MP
<i>hydralazine hcl TABS 100 MG</i>	3	QL(3 ea daily); MP
<i>hydralazine hcl TABS 10 MG, 25 MG, 50 MG</i>	3	QL(4 ea daily); MP
<i>minoxidil 2.5 MG, 10 MG</i>	3	MP
ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections		
Anti-infective Agents - Misc.		
AEMCOLO	2	QL(12 ea per fill retail); AL(At least 18 yrs old)
FLAGYL CAPS (<i>metronidazole</i>)	2	
LIKMEZ SUSP	2	QL(400 ml per 10 day(s) retail; 400 ml per 10 days mail)
<i>metronidazole CAPS</i>	2	
<i>metronidazole TABS</i>	1	
<i>tinidazole</i>	1	
<i>trimethoprim TABS</i>	3	
XIFAXAN 550 MG	2	AL(At least 18 yrs old)
XIFAXAN 200 MG	2	QL(9 ea per fill retail); AL(At least 12 yrs old)
Anti-infective Misc. - Combinations		
BACTRIM DS TABS (<i>sulfamethoxazole-trimethoprim</i>)	3	
BACTRIM TABS (<i>sulfamethoxazole-trimethoprim</i>)	3	

Drug Name	Drug Tier	Requirements/Limits
<i>sulfamethoxazole-trimethoprim SUSP</i>	3	
<i>sulfamethoxazole-trimethoprim TABS</i>	3	
Antiprotozoal Agents		
ALINIA TABS (<i>nitazoxanide</i>)	2	QL(6 ea per 30 day(s) retail)
<i>atovaquone</i>	3	
MEPRON (<i>atovaquone</i>)	3	
<i>nitazoxanide TABS</i>	2	QL(6 ea per 30 day(s) retail)
Glycopeptides		
FIRVANQ SOLR OR (<i>vancomycin hcl</i>)	2	
VANCOGIN CAPS (<i>vancomycin hcl</i>)	2	
<i>vancomycin hcl CAPS</i>	1	
<i>vancomycin hcl SOLR IV 1 GM, 5 GM, 10 GM, 500 MG, 750 MG, 1000 MG</i>	3	
<i>vancomycin hcl SOLR OR 25 MG/ML, 50 MG/ML, 250 MG/5ML</i>	1	
VANCOMYCIN HYDROCHLORIDE SOLR IV 1 GM, 5 GM, 10 GM, 500 MG, 750 MG	3	
Leprostatics		
<i>dapsone</i>	3	
Lincosamides		
CLEOCIN (<i>clindamycin hcl</i>)	3	
CLEOCIN PEDIATRIC GRANULES (<i>clindamycin palmitate hydrochloride</i>)	3	AL(Up to 12 yrs old)
<i>clindamycin hcl</i>	3	
<i>clindamycin palmitate hydrochloride</i>	3	AL(Up to 12 yrs old)
Monobactams		
CAYSTON	1	SP

Drug Name	Drug Tier	Requirements/Limits
Oxazolidinones		
<i>linezolid SUSR</i>	2	
<i>linezolid TABS</i>	1	QL(28 ea per fill retail)
SIVEXTRO TABS	2	QL(14 ea per fill retail)
ZYVOX SUSR (<i>linezolid</i>)	2	
ZYVOX TABS (<i>linezolid</i>)	2	QL(28 ea per fill retail)
Urinary Anti-infectives		
HIPREX (<i>methenamine hippurate</i>)	3	
MACROBID (<i>nitrofurantoin monohyd macro</i>)	3	QL(20 ea per 10 day(s) retail); AL(Up to 64 yrs old)
MACRODANTIN 50 MG, 100 MG (<i>nitrofurantoin macrocrystal</i>)	3	QL(2 ea daily); AL(Up to 64 yrs old)
<i>methenamine hippurate</i>	3	
<i>methenamine mandelate 0.5 GM, 1 GM</i>	3	
<i>nitrofurantoin macrocrystal 50 MG, 100 MG</i>	3	QL(2 ea daily); AL(Up to 64 yrs old)
<i>nitrofurantoin monohyd macro</i>	3	QL(20 ea per 10 day(s) retail); AL(Up to 64 yrs old)
ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)		
Antimalarials		
<i>chloroquine phosphate TABS</i>	3	MP
DARAPRIM (<i>pyrimethamine</i>)	3	MP; PA
<i>hydroxychloroquine sulfate</i>	3	

Drug Name	Drug Tier	Requirements/Limits
KRINTAFEL	3	1 max fill(s) per 365 day(s) retail; 1 max fill(s) per 365 day(s) mail; AL(At least 16 yrs old); MP; PA
<i>mefloquine hcl</i>	3	MP; PA
PLAQUENIL (<i>hydroxychloroquine sulfate</i>)	3	MP
<i>primaquine phosphate TABS</i>	3	MP
PRIMAQUINE PHOSPHATE TABS (<i>primaquine phosphate</i>)	3	MP
<i>pyrimethamine</i>	3	MP; PA
SOVUNA	3	
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
Antimyasthenic/Cholinergic Agents		
MESTINON TABS (<i>pyridostigmine bromide</i>)	3	
<i>pyridostigmine bromide TABS 60 MG</i>	3	
ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)		
Antimycobacterial Agents		
<i>cycloserine</i>	3	MP
<i>ethambutol hcl TABS</i>	3	MP
<i>isoniazid SYRP</i>	3	AL(Up to 12 yrs old); MP
<i>isoniazid TABS</i>	3	MP
MYAMBUTOL TABS 400 MG (<i>ethambutol hcl</i>)	3	MP
MYCOBUTIN (<i>rifabutin</i>)	3	MP
PRETOMANID	3	MP; PA
PRIFTIN	3	QL(0.86 ea daily); MP
<i>pyrazinamide</i>	3	MP
<i>rifabutin</i>	3	MP

Drug Name	Drug Tier	Requirements/Limits
<i>rifampin CAPS</i>	3	MP
SIRTURO	3	PA
TRECATOR	3	MP
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer		
Alkylating Agents		
ALKERAN (<i>melphalan</i>)	3	
<i>cyclophosphamide CAPS</i>	3	
CYCLOPHOSPHAMIDE TABS	3	
LEUKERAN	3	
<i>melphalan</i>	3	
MYLERAN TABS	3	SP
<i>oxaliplatin SOLN 50 MG/10ML, 100 MG/20ML</i>	3	SP
<i>oxaliplatin SOLR</i>	3	SP
TEMODAR CAPS 250 MG (<i>temozolomide</i>)	3	SP
<i>temozolomide CAPS</i>	3	SP
Antimetabolites		
ALIMTA SOLR (<i>pemetrexed disodium</i>)	3	SP
ARRANON (<i>nelarabine</i>)	3	SP
<i>azacitidine SUSR</i>	3	SP
<i>capecitabine</i>	3	SP
<i>cladribine 10 MG/10ML</i>	3	SP
<i>clofarabine</i>	3	SP
CLOLAR (<i>clofarabine</i>)	3	SP
<i>cytarabine SOLN</i>	3	SP
<i>decitabine</i>	3	SP
<i>floxuridine</i>	3	SP
<i>fludarabine phosphate SOLN</i>	3	SP
FLUDARABINE PHOSPHATE SOLN	3	SP
<i>fludarabine phosphate SOLR</i>	3	SP
<i>fluorouracil</i>	3	SP

Drug Name	Drug Tier	Requirements/Limits
FOLOTYN	3	SP
<i>gemcitabine hcl SOLN</i>	3	SP
<i>gemcitabine hcl SOLR</i>	3	SP
GEMCITABINE HYDROCHLORIDE SOLN (<i>gemcitabine hcl</i>)	3	SP
JYLAMVO SOLN	3	
<i>mercaptopurine TABS</i>	3	SP
<i>methotrexate sodium SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML</i>	3	SP
<i>methotrexate sodium SOLR</i>	3	SP
<i>methotrexate sodium TABS 2.5 MG</i>	3	
<i>nelarabine</i>	3	SP
ONUREG TABS	3	SP
<i>pemetrexed disodium SOLR 100 MG, 500 MG</i>	3	SP
<i>pralatrexate</i>	3	SP
PURIXAN SUSP	3	SP
TABLOID	3	
TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	3	
VIDAZA SUSR (<i>azacitidine</i>)	3	SP
XATMEP SOLN	3	
XELODA (<i>capecitabine</i>)	3	SP
Antineoplastic - Angiogenesis Inhibitors		
CYRAMZA	3	
FRUZAQLA	CO	SP
Antineoplastic - Antibodies		
ARZERRA	3	SP
BLINCYTO	3	SP
GAZYVA	3	SP
KEYTRUDA	3	SP
LOQTORZI	3	SP

Drug Name	Drug Tier	Requirements/Limits
OPDIVO 40 MG/4ML, 100 MG/10ML	3	SP
RIABNI	3	SP
RITUXAN	3	SP
TECENTRIQ	1	SP
YERVOY	3	
Antineoplastic - BCL-2 Inhibitors		
VENCLEXTA STARTING PACK TBPK	3	SP
VENCLEXTA TABS	3	SP
Antineoplastic - EGFR Inhibitors		
LAZCLUZE	CO	SP
Antineoplastic - Hedgehog Pathway Inhibitors		
DAURISMO	3	SP
ERIVEDGE	3	SP
ODOMZO	3	SP
Antineoplastic - Hormonal and Related Agents		
<i>abiraterone acetate</i>	3	SP
AKEEGA	3	SP
<i>anastrozole</i>	3	
ARIMIDEX (<i>anastrozole</i>)	3	
AROMASIN (<i>exemestane</i>)	3	
<i>bicalutamide</i>	3	
CAMCEVI	3	SP
CASODEX (<i>bicalutamide</i>)	3	
ELIGARD SC	3	SP
EMCYT	3	SP
ERLEADA	3	SP
EULEXIN	3	
<i>exemestane</i>	3	
FARESTON (<i>toremifene citrate</i>)	3	SP
FEMARA (<i>letrozole</i>)	3	
<i>flutamide</i>	3	

Drug Name	Drug Tier	Requirements/Limits
<i>hydroxyprogesterone caproate (antineoplastic)</i>	1	SP
<i>letrozole</i>	3	
LEUPROLIDE ACETATE INJ	3	SP
<i>leuprolide acetate KIT IJ 1 MG/0.2ML</i>	3	SP
LUPRON DEPOT (1-MONTH) KIT IM 7.5 MG	3	SP
LUPRON DEPOT (3-MONTH) KIT IM 22.5 MG	3	SP
LUPRON DEPOT (4-MONTH) IM	3	SP
LUPRON DEPOT (6-MONTH) IM	3	SP
LYSODREN	3	SP
<i>megestrol acetate SUSP</i>	1	
<i>megestrol acetate TABS</i>	3	
NILANDRON (<i>nilutamide</i>)	3	SP
<i>nilutamide</i>	3	SP
NUBEQA	3	SP
ORGOVYX	3	SP
ORSERDU	3	SP
SOLTAMOX SOLN	3	
<i>tamoxifen citrate TABS</i>	3	
<i>toremifene citrate</i>	3	SP
TRELSTAR MIXJECT	3	SP
XTANDI CAPS	3	SP
XTANDI TABS	3	SP
YONSA	3	SP
ZYTIGA (<i>abiraterone acetate</i>)	3	SP
Antineoplastic - Immunomodulators		
POMALYST	3	SP
Antineoplastic - XPO1 Inhibitors		
XPOVIO	3	SP
XPOVIO 60 MG TWICE WEEKLY	3	SP

Drug Name	Drug Tier	Requirements/Limits
XPOVIO 80 MG TWICE WEEKLY	3	SP
Antineoplastic Combinations		
INQOVI	3	SP
KISQALI FEMARA 200 DOSE	3	SP
KISQALI FEMARA 400 DOSE	3	SP
KISQALI FEMARA 600 DOSE	3	SP
LONSURF	3	SP
Antineoplastic Enzyme Inhibitors		
AFINITOR DISPERZ TBSO (<i>everolimus</i>)	3	SP
AFINITOR TABS (<i>everolimus</i>)	3	SP
ALUNBRIG TABS	CO	SP
ALUNBRIG TBPk	CO	SP
AUGTYRO	CO	SP
BORTEZOMIB SOLN	CO	SP
BORTEZOMIB SOLR IV 3.5 MG	CO	SP
BOSULIF CAPS	CO	SP
BRAFTOVI 75 MG	3	SP
CALQUENCE	CO	SP
CAPRELSA	CO	SP
<i>everolimus TABS</i>	3	SP
<i>everolimus TBSO</i>	3	SP
IDHIFA	3	SP
IMBRUVICA SUSP	CO	SP
JAKAFI	3	SP
JAYPIRCA	CO	SP
KRAZATI	3	SP
LUMAKRAS	3	SP
LYTGOBI	CO	SP
MEKINIST SOLR	CO	SP
OGSIVEO	CO	SP
OJJAARA	CO	SP

Drug Name	Drug Tier	Requirements/Limits
RETEVMO TABS	CO	SP
REZLIDHIA	3	SP
ROZLYTREK PACK	CO	SP
RUBRACA	CO	SP
RYTELO	CO	SP
SCEMBLIX	CO	SP
TAFINLAR TBSO	CO	SP
TALZENNA	CO	SP
TAZVERIK	3	SP
TIBSOVO	3	SP
TRUQAP	CO	SP
TRUQAP OR 160 MG, 200 MG	CO	
TURALIO	CO	SP
VANFLYTA	CO	SP
VORANIGO	3	SP
XALKORI CPSP	CO	SP
ZEJULA CAPS	CO	SP
ZEJULA TABS	CO	SP
ZOLINZA	3	SP
Antineoplastics Misc.		
BESREMI	3	
<i>bexarotene</i>	3	SP
HYDREA (<i>hydroxyurea</i>)	3	MP
<i>hydroxyurea</i>	3	MP
INTRON A SOLR 10000000 UNIT	3	
MATULANE	3	SP
NIPENT	3	SP
TARGRETIN (<i>bexarotene</i>)	3	SP
<i>tretinoin (chemotherapy)</i>	3	SP
Chemotherapy Rescue/Antidote/Protective Agents		
COSELA	CO	SP
IWILFIN	CO	SP
<i>leucovorin calcium TABS</i>	3	
MESNEX TABS	3	SP

Drug Name	Drug Tier	Requirements/Limits
Mitotic Inhibitors		
<i>etoposide CAPS</i>	3	SP
Topoisomerase I Inhibitors		
HYCAMTIN CAPS	3	SP
ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease		
Antiparkinson Adjunctive Therapy		
<i>carbidopa</i>	2	MP
LODOSYN (<i>carbidopa</i>)	2	MP
NOURIANZ	2	MP
Antiparkinson COMT Inhibitors		
COMTAN (<i>entacapone</i>)	2	MP
<i>entacapone</i>	1	MP
ONGENTYS	2	MP
TASMAR (<i>tolcapone</i>)	2	MP
<i>tolcapone</i>	2	MP
Antiparkinson Dopaminergics		
<i>amantadine hcl CAPS</i>	1	MP
<i>amantadine hcl SOLN</i>	1	MP
<i>amantadine hcl TABS</i>	2	MP
<i>bromocriptine mesylate CAPS</i>	2	MP
<i>bromocriptine mesylate TABS 2.5 MG</i>	2	MP
<i>carbidopa-levodopa-entacapone</i>	2	MP
<i>carbidopa-levodopa TABS</i>	1	MP
<i>carbidopa-levodopa TBCR</i>	1	MP
<i>carbidopa-levodopa TBDP</i>	2	MP
DHIVY TABS	2	MP
DUOPA SUSP	2	MP
GOCOVRI CP24	2	SP; MP
INBRIJA CAPS	2	MP
KYNMOBI TITRATION KIT KIT	2	MP

Drug Name	Drug Tier	Requirements/Limits
KYNMOBI FILM	2	SP; MP
MIRAPEX ER TB24 (pramipexole dihydrochloride)	2	MP
NEUPRO	2	QL(1 ea daily); MP
OSMOLEX ER T4PK	2	MP
OSMOLEX ER TB24 129 MG, 193 MG	2	MP
PARLODEL CAPS (bromocriptine mesylate)	2	MP
PARLODEL TABS (bromocriptine mesylate)	2	MP
pramipexole dihydrochloride TABS	1	MP
pramipexole dihydrochloride TB24	2	MP
ropinirole hydrochloride TABS	1	MP
ropinirole hydrochloride TB24	2	MP
RYTARY CPR	2	MP
SINEMET TABS 100 MG-10 MG, 100 MG-25 MG (carbidopa-levodopa)	2	MP
STALEVO 100 (carbidopa-levodopa-entacapone)	2	MP
STALEVO 125 (carbidopa-levodopa-entacapone)	2	MP
STALEVO 150 (carbidopa-levodopa-entacapone)	2	MP
STALEVO 200 (carbidopa-levodopa-entacapone)	2	MP
STALEVO 50 (carbidopa-levodopa-entacapone)	2	MP
STALEVO 75 (carbidopa-levodopa-entacapone)	2	MP
Antiparkinson Monoamine Oxidase Inhibitors		

Drug Name	Drug Tier	Requirements/Limits
AZILECT (rasagiline mesylate)	2	AL(At least 18 yrs old); MP; PA
rasagiline mesylate	1	AL(At least 18 yrs old); MP; PA
selegiline hcl CAPS	2	MP
selegiline hcl TABS	2	MP
XADAGO	2	MP
ZELAPAR TBDP	2	MP
ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders		
Antimanic Agents		
lithium	CO	
Antipsychotics - Misc.		
CAPLYTA	CO	
Benzisoxazoles		
RYKINDO SRER	CO	
UZEDY SUSY	CO	
Dibenzapines		
quetiapine fumarate TABS	CO	
Phenothiazines		
prochlorperazine	3	QL(2 ea daily)
prochlorperazine maleate TABS	3	QL(4 ea daily)
Quinolinone Derivatives		
ABILIFY ASIMTUFII PRSY	CO	MP
ABILIFY MYCITE MAINTENANCE KIT	CO	SP
ABILIFY MYCITE STARTER KIT	CO	SP
ANTIVIRALS - Drugs to Treat Viral Infections		
Antiretrovirals		
DESCOVY	CO	SP
PREZISTA SUSP	CO	SP
SUNLENCA SOLN	CO	SP

Drug Name	Drug Tier	Requirements/Limits
SUNLENCA TBPK	CO	SP
Antiviral Combinations		
PAXLOVID 100 MG-150 MG	3	
CMV Agents		
LIVTENCITY	3	SP; PA
PREVYMIS TABS	3	QL(1 ea daily); AL(At least 18 yrs old); SP; PA
VALCYTE TABS (<i>valganciclovir hcl</i>)	3	QL(2 ea daily)
<i>valganciclovir hcl</i> TABS	3	QL(2 ea daily)
Hepatitis Agents		
<i>adefovir dipivoxil</i>	3	QL(1 ea daily); SP; MP
BARACLUDE TABS (<i>entecavir</i>)	3	QL(1 ea daily); SP; MP
<i>entecavir</i> TABS	3	QL(1 ea daily); SP; MP
EPIVIR HBV TABS (<i>lamivudine (hbv)</i>)	3	QL(1 ea daily); SP; MP
<i>lamivudine (hbv)</i> TABS	3	QL(1 ea daily); SP; MP
VEMLIDY	3	QL(1 ea daily); AL(At least 6 yrs old); SP; MP; PA
Herpes Agents		
<i>acyclovir</i> CAPS	1	MP
<i>acyclovir</i> SUSP	1	MP
<i>acyclovir</i> TABS OR	1	MP
<i>famciclovir</i>	1	MP
SITAVIG TABS BU	2	MP
<i>valacyclovir hcl</i>	1	MP
VALTREX (<i>valacyclovir hcl</i>)	2	MP
ZOVIRAX SUSP (<i>acyclovir</i>)	2	MP
Influenza Agents		

Drug Name	Drug Tier	Requirements/Limits
<i>oseltamivir phosphate</i> CAPS	1	QL(14 ea per fill retail)
<i>oseltamivir phosphate</i> SUSR	1	QL(120 ml per fill retail)
RELENZA DISKHALER	1	
<i>rimantadine hydrochloride</i> TABS	1	
TAMIFLU CAPS (<i>oseltamivir phosphate</i>)	2	QL(14 ea per fill retail)
TAMIFLU SUSR (<i>oseltamivir phosphate</i>)	2	QL(120 ml per fill retail)
XOFLUZA 40 MG, 80 MG	1	MP
BETA BLOCKERS - Drugs to Treat High Blood Pressure		
Alpha-Beta Blockers		
<i>carvedilol</i>	1	MP
<i>carvedilol phosphate</i>	1	MP
COREG (<i>carvedilol</i>)	2	MP
COREG CR (<i>carvedilol phosphate</i>)	2	MP
<i>labetalol hcl</i> TABS	1	MP
Beta Blockers Cardio-Selective		
<i>acebutolol hcl</i> CAPS	2	MP
<i>atenolol</i> TABS	1	MP
<i>betaxolol hcl</i>	2	MP
<i>bisoprolol fumarate</i>	2	MP
BYSTOLIC (<i>nebivolol hcl</i>)	1	MP
KAPSPARGO SPRINKLE CS24	2	MP
LOPRESSOR TABS (<i>metoprolol tartrate</i>)	2	MP
<i>metoprolol succinate</i> TB24	1	MP
<i>metoprolol tartrate</i> TABS	1	MP
<i>nebivolol hcl</i>	1	MP
TENORMIN TABS (<i>atenolol</i>)	2	MP
TOPROL XL TB24 (<i>metoprolol succinate</i>)	2	MP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Beta Blockers Non-Selective			CONJUPRI (levamlodipine maleate)	2	MP
BETAPACE AF (sotalol hcl (afib/af))	2	MP	diltiazem hcl coated beads CP24	1	MP
BETAPACE TABS 80 MG, 120 MG, 160 MG (sotalol hcl)	2	MP	diltiazem hcl extended release beads	1	MP
CORGARD TABS 20 MG, 40 MG, 80 MG (nadolol)	2	MP	diltiazem hcl extended release beads	2	MP
HEMANGEOL SOLN OR	2	SP; MP	diltiazem hcl CP12	1	MP
INDERAL LA CP24 (propranolol hcl)	2	MP	diltiazem hcl CP24	1	MP
INDERAL XL	2	MP	diltiazem hcl TABS	1	MP
INNOPRAN XL	2	MP	diltiazem hcl TB24	2	MP
nadolol TABS 20 MG, 40 MG, 80 MG	2	MP	felodipine	2	MP
pindolol TABS	2	MP	isradipine CAPS	2	MP
propranolol hcl CP24	1	MP	KATERZIA	2	AL(At least 6 yrs old); MP
propranolol hcl SOLN OR 20 MG/5ML, 40 MG/5ML	1	MP	levamlodipine maleate	2	MP
propranolol hcl TABS	1	MP	nicardipine hcl CAPS	2	MP
sotalol hcl (afib/af)	1	MP	nifedipine CAPS	1	MP
sotalol hcl TABS	1	MP	nifedipine TB24	1	MP
SOTYLIZE SOLN OR	2	MP	nimodipine CAPS	3	QL(252 ea per 365 day(s) retail)
timolol maleate TABS	2	MP	nisoldipine	2	MP
CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure			NORLIQVA SOLN	2	AL(At least 6 yrs old); MP
Calcium Channel Blockers			NORVASC TABS (amlodipine besylate)	2	MP
amlodipine besylate TABS	1	MP	PROCARDIA XL TB24 (nifedipine)	2	MP
CALAN SR TBCR 120 MG, 180 MG (verapamil hcl)	2	MP	SULAR 8.5 MG, 17 MG, 34 MG (nisoldipine)	2	MP
CARDIZEM CD CP24 (diltiazem hcl coated beads)	2	MP	TIAZAC (diltiazem hcl extended release beads)	2	MP
CARDIZEM LA TB24 (diltiazem hcl)	2	MP	verapamil hcl CP24	2	MP
CARDIZEM TABS 30 MG, 60 MG, 120 MG (diltiazem hcl)	2	MP	verapamil hcl TABS	1	MP
			verapamil hcl TBCR	1	MP
			VERAPAMIL HYDROCHLORIDE ER CP24 (verapamil hcl)	2	MP

Drug Name	Drug Tier	Requirements/Limits
VERELAN PM CP24 (<i>verapamil hcl</i>)	2	MP
VERELAN CP24 (<i>verapamil hcl</i>)	2	MP
CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm		
Cardiac Glycosides		
<i>digoxin</i> TABS 0.125 MG, 0.25 MG, 125 MCG, 250 MCG	3	MP
LANOXIN TABS 125 MCG, 250 MCG (<i>digoxin</i>)	3	MP
CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions		
Cardiac Myosin Inhibitors		
CAMZYOS	3	QL(1 ea daily); AL(At least 18 yrs old); SP; PA
Cardiovascular Agents Misc. - Combinations		
<i>amlodipine besylate-atorvastatin calcium</i>	2	QL(1 ea daily); MP
CADUET 10 MG-10 MG, 10 MG-20 MG, 10 MG-40 MG, 10 MG-80 MG, 5 MG-10 MG, 5 MG-20 MG, 5 MG-40 MG, 5 MG-80 MG (<i>amlodipine besylate-atorvastatin calcium</i>)	2	QL(1 ea daily); MP
ENTRESTO TABS	1	QL(2 ea daily); MP
Cardiovascular Sodium-Glucose Co-Transporter 2 Inhibitors		
INPEFA	2	MP
Prostaglandin Vasodilators		
ORENITRAM TITRATION KIT MONTH 1 TEPK	2	SP
ORENITRAM TITRATION KIT MONTH 2 TEPK	2	SP

Drug Name	Drug Tier	Requirements/Limits
ORENITRAM TITRATION KIT MONTH 3 TEPK	2	SP
ORENITRAM TBCR	2	SP; MP
TYVASO DPI INSTITUTIONALKIT POWD	2	SP; MP
TYVASO DPI MAINTENANCE KIT POWD	2	SP; MP
TYVASO DPI TITRATION KIT POWD	2	SP; MP
TYVASO REFILL KIT SOLN IN	1	SP; MP; PA
TYVASO STARTER KIT SOLN IN	1	SP; MP; PA
TYVASO SOLN IN	1	SP; MP; PA
VENTAVIS	1	SP; MP; PA
Pulmonary Hypertension - Endothelin Receptor Antagonists		
<i>ambrisentan</i>	1	SP; MP; PA
<i>bosentan</i> TABS	2	SP; MP; PA
LETAIRIS (<i>ambrisentan</i>)	2	SP; MP; PA
OPSUMIT	1	SP; MP; PA
TRACLEER TABS (<i>bosentan</i>)	1	SP; MP; PA
TRACLEER TBSO	2	SP; MP
Pulmonary Hypertension - Phosphodiesterase Inhibitors		
ADCIRCA TABS (<i>tadalafil pulmonary hypertension</i>)	2	SP; MP; PA
LIQREV SUSP	2	SP
REVATIO SUSR (<i>sildenafil citrate pulmonary hypertension</i>)	2	SP; MP; PA
REVATIO TABS (<i>sildenafil citrate pulmonary hypertension</i>)	2	SP; MP; PA
<i>sildenafil citrate pulmonary hypertension</i> SUSR	1	SP; MP; PA

Drug Name	Drug Tier	Requirements/Limits
<i>sildenafil citrate (pulmonary hypertension) TABS</i>	1	SP; MP; PA
<i>tadalafil (pulmonary hypertension) TABS</i>	1	SP; MP; PA
TADLIQ SUSP	2	AL(At least 18 yrs old); SP
Pulmonary Hypertension - Prostacyclin Receptor Agonist		
UPTRAVI TITRATION PACK TBPK	1	SP; MP; PA
UPTRAVI TABS	1	SP; MP; PA
Pulmonary Hypertension - Sol Guanylate Cyclase Stimulator		
ADEMPAS	2	SP; MP
Vasoactive Soluble Guanylate Cyclase Stimulator (sGC)		
VERQUVO	3	AL(At least 18 yrs old); MP; PA
CEPHALOSPORINS - Drugs to Treat Bacterial Infections		
Cephalosporins - 1st Generation		
<i>cefadroxil CAPS</i>	1	QL(28 ea per fill retail)
<i>cefadroxil SUSR</i>	1	
<i>cefadroxil TABS</i>	2	QL(28 ea per fill retail)
<i>cephalexin CAPS</i>	1	
<i>cephalexin SUSR</i>	1	
<i>cephalexin TABS</i>	1	
Cephalosporins - 2nd Generation		
CEFACTOR ER TB12	2	QL(42 ea per fill retail)
<i>cefaclor CAPS</i>	2	QL(42 ea per fill retail)
<i>cefaclor SUSR 125 MG/5ML, 250 MG/5ML, 375 MG/5ML</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>cefprozil SUSR</i>	1	
<i>cefprozil TABS</i>	1	QL(28 ea per fill retail)
<i>cefuroxime axetil TABS</i>	1	QL(42 ea per fill retail)
Cephalosporins - 3rd Generation		
<i>cefdinir CAPS</i>	1	QL(28 ea per fill retail)
<i>cefdinir SUSR</i>	1	
<i>cefixime CAPS</i>	1	
<i>cefixime SUSR</i>	2	
<i>cefpodoxime proxetil SUSR</i>	2	
<i>cefpodoxime proxetil TABS</i>	2	QL(28 ea per fill retail)
CHEMICALS		
Bulk Chemicals - C's		
CITRULLINE(L)	4	RX/OTC
CREATINE MONOHYDRATE	4	RX/OTC
L-CITRULLINE	4	RX/OTC
Bulk Chemicals - O's		
L-ORNITHINE HYDROCHLORIDE	4	RX/OTC
ORNITHINE HYDROCHLORIDE	4	RX/OTC
Bulk Chemicals - S's		
NICE PURE BAKING SODA	4	RX/OTC
Solids		
CO-ENZYME Q 10	4	RX/OTC
COENZYME Q10	4	RX/OTC
UBIDECARENONE	4	RX/OTC
CONTRACEPTIVES - Drugs to Prevent Pregnancy		
Combination Contraceptives - Oral		
<i>desogestrel & ethinyl estradiol</i>	3	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>desogestrel-ethinyl estradiol (biphasic)</i>	3		<i>norgestimate-ethinyl estradiol</i>	3	
<i>desogestrel-ethinyl estradiol (triphasic)</i>	3		<i>norgestimate-ethinyl estradiol (triphasic)</i>	3	
<i>drospirenone-ethinyl estradiol 0.02 MG-3 MG</i>	1		<i>norgestrel & ethinyl estradiol 30 MCG-0.3 MG</i>	3	
<i>drospirenone-ethinyl estradiol 0.03 MG-3 MG</i>	3		YASMIN 28 (<i>drospirenone-ethinyl estradiol</i>)	3	
<i>ethynodiol diacet & eth estrad</i>	3		YAZ (<i>drospirenone-ethinyl estradiol</i>)	2	
GENERESS FE (<i>norethindrone & ethinyl estradiol-fe</i>)	3		Combination Contraceptives - Transdermal		
<i>levonorgestrel & eth estradiol TABS</i>	3		<i>norelgestromin-ethinyl estradiol</i>	3	
<i>levonorgestrel-eth estradiol (triphasic)</i>	3		Combination Contraceptives - Vaginal		
<i>levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG</i>	3		<i>etonogestrel-ethinyl estradiol</i>	3	QL(0.036 ea daily)
<i>levonorgestrel-ethinyl estradiol (continuous)</i>	3		NUVARING (<i>etonogestrel-ethinyl estradiol</i>)	3	QL(0.036 ea daily)
MINASTRIN 24 FE CHEW (<i>norethin acet & estrad-fe</i>)	3		Emergency Contraceptives		
MIRCETTE (<i>desogestrel-ethinyl estradiol (biphasic)</i>)	3		ELLA	3	
<i>norethin acet & estrad-fe CHEW</i>	3		<i>levonorgestrel (emergency oc) 1.5 MG</i>	3	
<i>norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG</i>	3		PLAN B ONE-STEP (<i>levonorgestrel (emergency oc)</i>)	3	
<i>norethindrone & eth estradiol</i>	3		Progestin Contraceptives - Injectable		
<i>norethindrone & ethinyl estradiol-fe</i>	3		DEPO-PROVERA CONTRACEPTIVE SUSP IM (<i>medroxyprogesterone acetate (contraceptive)</i>)	3	
<i>norethindrone acet & eth estra TABS</i>	3		<i>medroxyprogesterone acetate (contraceptive) SUSP IM</i>	3	
<i>norethindrone acetate-ethinyl estradiol-fe</i>	3		Progestin Contraceptives - Oral		
<i>norethindrone-eth estradiol (triphasic)</i>	3		<i>norethindrone (contraceptive)</i>	3	
			OPILL	3	
CORTICOSTEROIDS - Steroid Hormone Drugs to					

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Treat Systemic Swelling Conditions			KENALOG-10 SUSP	3	
Glucocorticosteroids			KENALOG-40 SUSP (triamcinolone acetonide)	3	
AGAMREE	3	SP	MEDROL DOSEPAK TBPK (methylprednisolone)	3	
ALKINDI SPRINKLE CPSP	3		MEDROL TABS	3	
<i>budesonide CPEP</i>	3	PA	MEDROL TABS (methylprednisolone)	3	
<i>budesonide TB24</i>	2		<i>methylprednisolone acetate SUSP</i>	3	
CORTEF TABS (hydrocortisone)	3		METHYLPREDNISOLON E ACETATE SUSP 40 MG/ML, 80 MG/ML	3	
<i>deflazacort SUSP</i>	3		<i>methylprednisolone sod succ 40 MG, 125 MG, 500 MG, 1000 MG</i>	3	
<i>deflazacort TABS</i>	3		<i>methylprednisolone TABS</i>	3	
DEPO-MEDROL SUSP	3		<i>methylprednisolone TBPK</i>	3	
DEPO-MEDROL SUSP (methylprednisolone acetate)	3		ORAPRED ODT TBDP (prednisolone sodium phosphate)	3	
DEXAMETHASONE INTENSOL CONC	3		PEDIAPRED SOLN (prednisolone sodium phosphate)	3	
<i>dexamethasone sodium phosphate SOLN IJ</i>	3		<i>prednisolone sodium phosphate SOLN</i>	3	
DEXAMETHASONE SODIUM PHOSPHATE SOLN IJ	3		<i>prednisolone sodium phosphate TBDP</i>	3	
<i>dexamethasone sodium phosphate SOSY IJ</i>	3		<i>prednisolone SOLN</i>	3	
<i>dexamethasone ELIX</i>	3		<i>prednisolone TABS</i>	3	
<i>dexamethasone SOLN</i>	3		PREDNISONE INTENSOL CONC	3	
<i>dexamethasone TABS</i>	3		<i>prednisone SOLN</i>	3	
<i>dexamethasone TBPK</i>	3		<i>prednisone TABS</i>	3	
EMFLAZA SUSP (deflazacort)	3		<i>prednisone TBPK</i>	3	
EMFLAZA TABS (deflazacort)	3		RAYOS TBEC	3	
EOHILIA SUSP	3	QL(20 ml daily); AL(At least 11 yrs old); PA	SOLU-CORTEF	3	
HEMADY TABS	3		SOLU-MEDROL	3	
<i>hydrocortisone sod succinate 100 MG</i>	3				
<i>hydrocortisone TABS</i>	3				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SOLU-MEDROL (methylprednisolone sod succ)	3		<i>promethazine & phenylephrine SYRP</i>	4	
<i>triamcinolone acetonide SUSP 40 MG/ML, 200 MG/5ML, 400 MG/10ML</i>	3		PROMETHAZINE HYDROCHLORIDE/DEXTROMETHORPHAN HYDROBROMIDE SYRP (promethazine-dm)	NF	
TRIAMCINOLONE ACETONIDE SUSP 40 MG/ML	3		<i>promethazine w/codeine SOLN</i>	4	
UCERIS TB24 (budesonide)	2		<i>promethazine w/codeine SYRP</i>	4	
Mineralocorticoids			<i>promethazine-dm SYRP</i>	4	
<i>fludrocortisone acetate TABS</i>	3	MP	<i>promethazine-phenylephrine-codeine</i>	4	
COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms			<i>pseudoephedrine-guaifenesin TB12 600 MG-60 MG</i>	4	
Cough/Cold/Allergy Combinations			VICKS NYQUIL COLD & FLU NIGHTTIME RELIEF LIQD (dextromethorphan-doxylamine-acetaminophen)	NF	
<i>dextromethorphan-doxylamine-acetaminophen LIQD</i>	4		VICKS NYQUIL COLD & FLU LIQD (dextromethorphan-doxylamine-acetaminophen)	NF	
<i>dextromethorphan-guaifenesin LIQD 100 MG/5ML-10 MG/5ML, 150 MG/7.5ML-15 MG/7.5ML, 200 MG/10ML-20 MG/10ML</i>	4		VICKS NYQUIL HBP COLD & FLU LIQD (dextromethorphan-doxylamine-acetaminophen)	NF	
<i>dextromethorphan-guaifenesin SYRP 100 MG/5ML-10 MG/5ML, 100 MG/5ML-100 MG/5ML-10 MG/5ML-10 MG/5ML, 200 MG/10ML-20 MG/10ML</i>	4		Expectorants		
<i>dextromethorphan-phenylephrine-acetaminophen LIQD</i>	3		GERI-TUSSIN SYRP	4	
<i>guaifenesin-codeine SOLN</i>	4		<i>guaifenesin LIQD</i>	4	
<i>guaifenesin-codeine SYRP</i>	4		<i>guaifenesin SYRP</i>	4	
MUCINEX D TB12 (pseudoephedrine-guaifenesin)	NF		<i>guaifenesin TABS 200 MG</i>	4	
Misc. Respiratory Inhalants			HYPERSAL NEBU	3	
			HYPERSAL NEBU (sodium chloride (inhalant))	3	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
NEBUSAL NEBU	3		<i>benzoyl peroxide LIQD 5 %, 10 %</i>	3	
<i>sodium chloride (inhalant) NEBU 0.9 %, 3 %, 7 %</i>	3		CABTREO	2	
Mucolytics			<i>clindamycin phosphate (topical) SOLN</i>	3	
<i>acetylcysteine SOLN</i>	3		<i>clindamycin phosphate (topical) SWAB</i>	3	
DERMATOLOGICALS - Drugs to Treat Skin Conditions			<i>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>	1	
Acne Products			<i>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>	2	
ABSORICA 10 MG, 20 MG, 30 MG, 40 MG (<i>isotretinoin</i>)	3	QL(2 ea daily); PA	<i>clindamycin phosphate-benzoyl peroxide GEL 2.5 %-1.2 %, 5 %-1 %</i>	1	
ABSORICA 10 MG, 20 MG, 30 MG, 40 MG (<i>isotretinoin</i>)	NF		<i>clindamycin phosphate-benzoyl peroxide GEL 3.75 %-1.2 %</i>	2	
ACANYA GEL (<i>clindamycin phosphate-benzoyl peroxide</i>)	2		DIFFERIN DAILY DEEP CLEANSER LIQD (<i>benzoyl peroxide</i>)	3	RX/OTC
<i>adapalene-benzoyl peroxide GEL 2.5 %-0.1 %</i>	3	QL(45 gm per 30 day(s) retail); AL(Up to 30 yrs old)	DIFFERIN GEL 0.3 % (<i>adapalene</i>)	3	QL(45 gm per 30 day(s) retail); AL(Up to 30 yrs old)
<i>adapalene GEL 0.1 %</i>	3	QL(45 gm per 30 day(s) retail); RX/OTC	DIFFERIN GEL 0.1 % (<i>adapalene</i>)	3	QL(45 gm per 30 day(s) retail); RX/OTC
<i>adapalene GEL 0.3 %</i>	3	QL(45 gm per 30 day(s) retail); AL(Up to 30 yrs old)	EPIDUO GEL (<i>adapalene-benzoyl peroxide</i>)	3	QL(45 gm per 30 day(s) retail); AL(Up to 30 yrs old)
BENZAC AC WASH LIQD 5 % (<i>benzoyl peroxide</i>)	3	RX/OTC	<i>erythromycin (acne aid) SOLN</i>	3	
BENZAMYCIN GEL (<i>benzoyl peroxide-erythromycin</i>)	3		<i>isotretinoin 10 MG, 20 MG, 30 MG, 40 MG</i>	3	QL(2 ea daily); PA
<i>benzoyl peroxide CREA 10 %</i>	3		NEUAC KIT	2	
<i>benzoyl peroxide-erythromycin GEL</i>	3		ONEXTON GEL	2	
<i>benzoyl peroxide FOAM 10 %</i>	3		RETIN-A CREA 0.025 %, 0.05 % (<i>tretinoin</i>)	3	QL(20 gm per 30 day(s) retail); AL(Up to 30 yrs old)
<i>benzoyl peroxide GEL 5 %</i>	3		<i>sulfacetamide sodium w/ sulfur LIQD 10 %-5 %</i>	3	
<i>benzoyl peroxide GEL 10 %</i>	3	QL(114 gm per 30 day(s) retail)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>tretinoin CREA 0.025 %, 0.05 %</i>	3	QL(20 gm per 30 day(s) retail); AL(Up to 30 yrs old)	<i>clotrimazole (topical) SOLN</i>	1	RX/OTC
Antibiotics - Topical			<i>clotrimazole w/ betamethasone CREA</i>	1	
<i>bacitracin (topical) OINT</i>	3		<i>clotrimazole w/ betamethasone LOTN</i>	2	
<i>bacitracin zinc OINT</i>	3		<i>econazole nitrate CREA</i>	2	
CENTANY AT KIT	2		ERTACZO	2	
CENTANY OINT	2		EXELDERM CREA (<i>sulconazole nitrate</i>)	2	
<i>gentamicin sulfate (topical) CREA</i>	3		EXTINA FOAM (<i>ketoconazole (topical)</i>)	2	
<i>gentamicin sulfate (topical) OINT</i>	3		JUBLIA	2	AL(At least 6 yrs old)
<i>mupirocin calcium (topical)</i>	2		KERYDIN (<i>tavaborole</i>)	2	AL(At least 6 yrs old)
<i>mupirocin OINT</i>	1		<i>ketoconazole (topical) CREA</i>	1	
<i>neomycin-bacitracin-polymyxin OINT</i>	3		<i>ketoconazole (topical) FOAM</i>	2	
NEOSPORIN ORIGINAL OINT (<i>neomycin-bacitracin-polymyxin</i>)	3		<i>ketoconazole (topical) SHAM 2 %</i>	1	
XEPI	2	QL(60 gm per 30 day(s) retail)	KETODAN KIT	2	
Antifungals - Topical			LAMISIL AT JOCK ITCH CREA (<i>terbinafine hcl (topical)</i>)	3	
ALOE VESTA ANTIFUNGAL OINT (<i>miconazole nitrate (topical)</i>)	2		LAMISIL AT CREA (<i>terbinafine hcl (topical)</i>)	3	
<i>butenafine hcl</i>	2	RX/OTC	LOPROX	2	
<i>ciclopirox olamine CREA</i>	1		LOPROX KIT	2	
<i>ciclopirox olamine SUSP</i>	2		LOPROX SHAMPOO SHAM (<i>ciclopirox</i>)	2	
<i>ciclopirox GEL</i>	2		LOPROX CREA (<i>ciclopirox olamine</i>)	2	
<i>ciclopirox KIT</i>	2		LOPROX SUSP (<i>ciclopirox olamine</i>)	2	
<i>ciclopirox SHAM</i>	2		LOTRIMIN AF JOCK ITCH CREA (<i>clotrimazole (topical)</i>)	NF	RX/OTC
<i>ciclopirox SOLN</i>	1		LOTRIMIN AF JOCK ITCH CREA (<i>clotrimazole (topical)</i>)	2	RX/OTC
<i>clotrimazole (topical) CREA</i>	1	RX/OTC			
<i>clotrimazole (topical) CREA</i>	2	RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
LOTRIMIN AF CREA (clotrimazole (topical))	NF	RX/OTC	TINACTIN CREA (tolnaftate)	2	
LOTRIMIN AF CREA (clotrimazole (topical))	2	RX/OTC	tolnaftate CREA	1	
LOTRIMIN ULTRA (butenafine hcl)	2	RX/OTC	tolnaftate POWD EX	1	
luliconazole	2		VUSION (miconazole-zinc oxide-white petrolatum)	2	
LUZU (luliconazole)	2		Anti-inflammatory Agents - Topical		
MENTAX	2	RX/OTC	diclofenac epolamine PTCH EX	2	QL(2 ea daily)
MICATIN CREA (miconazole nitrate (topical))	1		diclofenac sodium (topical) GEL EX	1	RX/OTC
miconazole nitrate (topical) CREA	1		diclofenac sodium (topical) SOLN EX 1.5 %	1	
miconazole nitrate (topical) OINT	2		diclofenac sodium (topical) SOLN EX 2 %	2	
miconazole-zinc oxide-white petrolatum	2		FLECTOR PTCH EX (diclofenac epolamine)	2	QL(2 ea daily)
naftifine hcl CREA	2		LICART PT24	2	Limit: 15 patches per 30 days; QL(0.5 ea daily)
naftifine hcl GEL 2 %	2		PENNSAID SOLN EX	2	
NAFTIN GEL (naftifine hcl)	2		VOLTAREN ARTHRITIS PAIN GEL EX (diclofenac sodium (topical))	2	RX/OTC
NAFTIN GEL	2		Antineoplastic or Premalignant Lesion Agents - Topical		
nystatin (topical) CREA	1		bexarotene (topical)	3	SP
nystatin (topical) OINT	1		CARAC CREA	3	SP
nystatin (topical) POWD EX	1		diclofenac sodium (actinic keratoses) EX	3	
nystatin-triamcinolone CREA	1		EFUDEX CREA (fluorouracil (topical))	3	SP
nystatin-triamcinolone OINT	1		fluorouracil (topical) CREA	3	SP
oxiconazole nitrate CREA	2		fluorouracil (topical) SOLN	3	SP
OXISTAT CREA (oxiconazole nitrate)	2		TARGRETIN (bexarotene (topical))	3	SP
OXISTAT LOTN	2		VALCHLOR	3	SP
sulconazole nitrate CREA	2				
tavaborole	2	AL(At least 6 yrs old)			
terbinafine hcl (topical) CREA	3				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Antipsoriatics			TAZORAC GEL (<i>tazarotene</i>)	3	AL(Up to 20 yrs old); PA
<i>acitretin 10 MG, 25 MG</i>	3	QL(2 ea daily); PA	TREMFYA SOAJ	2	SP
<i>acitretin 17.5 MG</i>	3	PA	TREMFYA SOSY 100 MG/ML	2	SP
BIMZELX SOAJ	2	AL(At least 18 yrs old); SP	VECTICAL (<i>calcitriol (topical)</i>)	3	QL(4 gm daily); AL(At least 2 yrs old); PA
BIMZELX SOSY	2	AL(At least 18 yrs old); SP	VTAMA	2	AL(At least 18 yrs old)
<i>calcipotriene CREA</i>	3	QL(4 gm daily); AL(At least 2 yrs old); PA	Antiseborrheic Products		
<i>calcipotriene OINT</i>	3	QL(4 gm daily); AL(At least 2 yrs old); PA	<i>selenium sulfide LOTN 2.5 %</i>	3	
<i>calcipotriene SOLN</i>	3	QL(2 ml daily); AL(At least 2 yrs old); PA	ZORYVE	3	AL(At least 9 yrs old); PA
<i>calcitriol (topical)</i>	3	QL(4 gm daily); AL(At least 2 yrs old); PA	Antivirals - Topical		
COSENTYX SENSOREADY PEN SOAJ	1	SP	ABREVA (<i>docosanol</i>)	3	MP
COSENTYX UNOREADY SOAJ	1	SP	<i>acyclovir topical CREA</i>	1	MP
COSENTYX SOSY	1	SP	<i>acyclovir topical OINT</i>	1	MP
ILUMYA	2	SP	DENAVIR (<i>penciclovir</i>)	1	MP
SILIQ	2	SP	<i>docosanol</i>	3	MP
SKYRIZI PEN SOAJ	2	SP	<i>penciclovir</i>	2	MP
SKYRIZI PSKT	2	SP	XERESE	2	MP
SKYRIZI SOSY	2	SP	ZOVIRAX CREA (<i>acyclovir topical</i>)	2	MP
SOTYKTU	2	QL(1 ea daily); AL(At least 18 yrs old); SP	ZOVIRAX OINT (<i>acyclovir topical</i>)	2	MP
STELARA SOSY	2	SP	Burn Products		
TALTZ SOAJ	2	SP	SILVADENE (<i>silver sulfadiazine</i>)	3	
TALTZ SOSY 80 MG/ML	2	SP	<i>silver sulfadiazine</i>	3	
<i>tazarotene CREA 0.1 %</i>	3	AL(Up to 20 yrs old); PA	Corticosteroids - Topical		
<i>tazarotene GEL</i>	3	AL(Up to 20 yrs old); PA	<i>alclometasone dipropionate CREA</i>	2	
TAZORAC CREA 0.1 % (<i>tazarotene</i>)	3	AL(Up to 20 yrs old); PA	<i>alclometasone dipropionate OINT</i>	2	
			<i>amcinonide LOTN</i>	2	
			APEXICON E CREA	2	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>betamethasone dipropionate (topical) CREA</i>	1		<i>clobetasol propionate LOTN</i>	2	
<i>betamethasone dipropionate (topical) LOTN</i>	1		<i>clobetasol propionate OINT 0.05 %</i>	1	
<i>betamethasone dipropionate (topical) OINT</i>	1		<i>clobetasol propionate SHAM</i>	2	
<i>betamethasone dipropionate augmented CREA</i>	2		<i>clobetasol propionate SOLN 0.05 %</i>	1	
<i>betamethasone dipropionate augmented GEL 0.05 %</i>	2		CLOBEX LIQD (<i>clobetasol propionate</i>)	2	
<i>betamethasone dipropionate augmented LOTN</i>	2		CLOBEX LOTN 0.05 % (<i>clobetasol propionate</i>)	2	
<i>betamethasone dipropionate augmented OINT</i>	2		CLOBEX SHAM (<i>clobetasol propionate</i>)	2	
<i>betamethasone valerate CREA</i>	1		<i>clocortolone pivalate</i>	2	
<i>betamethasone valerate FOAM</i>	2		CLODAN KIT	2	
<i>betamethasone valerate LOTN</i>	1		CLODERM (<i>clocortolone pivalate</i>)	2	
<i>betamethasone valerate OINT</i>	1		CORDRAN OINT	2	
BRYHALI LOTN	2		DERMA-SMOOTH/FS BODY OIL (<i>fluocinolone acetonide</i>)	2	
<i>clobetasol propionate emollient base 0.05 %</i>	2		DERMA-SMOOTH/FS SCALP OIL (<i>fluocinolone acetonide</i>)	2	
<i>clobetasol propionate emulsion</i>	2		<i>desonide CREA</i>	2	
<i>clobetasol propionate CREA 0.05 %</i>	1		<i>desonide GEL</i>	2	
<i>clobetasol propionate FOAM</i>	2		<i>desonide LOTN</i>	2	
<i>clobetasol propionate GEL 0.05 %</i>	2		<i>desonide OINT</i>	2	
<i>clobetasol propionate LIQD</i>	2		DESOWEN CREA (<i>desonide</i>)	2	
			<i>desoximetasone CREA</i>	2	
			<i>desoximetasone GEL</i>	2	
			<i>desoximetasone LIQD</i>	2	
			<i>desoximetasone OINT</i>	2	
			<i>diflorasone diacetate CREA</i>	2	
			<i>diflorasone diacetate OINT</i>	2	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
DIPROLENE OINT (betamethasone dipropionate augmented)	2		hydrocortisone (topical) LOTN 2.5 %	1	
fluocinolone acetonide CREA	2		hydrocortisone (topical) OINT 1 %, 2.5 %	1	RX/OTC
fluocinolone acetonide OIL	2		hydrocortisone (topical) SOLN 1 %	2	
fluocinolone acetonide OINT	2		hydrocortisone acetate (topical) CREA 1 %	1	
fluocinolone acetonide SOLN	2		hydrocortisone acetate (topical) OINT	1	
fluocinonide emulsified base	2		hydrocortisone butyrate hydrophilic lipo base	2	
fluocinonide CREA	2		hydrocortisone butyrate CREA	2	
fluocinonide GEL	2		hydrocortisone butyrate LOTN	2	
fluocinonide OINT	2		hydrocortisone butyrate OINT	2	
fluocinonide SOLN	2		hydrocortisone butyrate SOLN	2	
flurandrenolide CREA	2		hydrocortisone valerate CREA	2	
flurandrenolide LOTN	2		hydrocortisone valerate OINT	2	
fluticasone propionate CREA 0.05 %	1		HYDROCORTISONE CREA	1	
fluticasone propionate LOTN	2		IMPEKLO LOTN	2	
fluticasone propionate OINT	1		KENALOG AERS (triamcinolone acetonide (topical))	2	
halcinonide CREA	2		LEXETTE FOAM (halobetasol propionate)	2	
halobetasol propionate CREA	1		LOCOID LIPOCREAM	2	
halobetasol propionate FOAM	2		LOCOID LOTN (hydrocortisone butyrate)	2	
halobetasol propionate OINT	1		LUXIQ FOAM (betamethasone valerate)	2	
HALOG CREA (halcinonide)	2		mometasone furoate CREA	3	
HALOG OINT	2		mometasone furoate OINT	1	
HALOG SOLN	2				
HYDROCORT LOTION COMPLETEKIT THPK	2				
hydrocortisone (topical) CREA	1	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>mometasone furoate SOLN</i>	1		TRIDESILON CREA 0.05 % (<i>desonide</i>)	2	
OLUX-E (<i>clobetasol propionate emulsion</i>)	2		ULTRAVATE LOTN	2	
OLUX FOAM (<i>clobetasol propionate</i>)	2		VANICREAM HC MAXIMUM STRENGTH CREA	2	
PANDEL	2		VANOS CREA (<i>fluocinonide</i>)	2	
<i>prednicarbate OINT</i>	2		Eczema Agents		
SERNIVO EMUL	2		ADBRY SOAJ	1	QL(4 ml per 28 day(s) retail; 4 ml per 28 days mail); SP; PA
SYNALAR CREAM KIT	2		ADBRY SOSY	1	QL(4 ml per 28 day(s) retail); SP; PA
SYNALAR OINTMENT KIT	2		CIBINQO	2	AL(At least 12 yrs old); SP
SYNALAR TS	2		DUPIXENT SOAJ SC 200 MG/1.14ML, 300 MG/2ML	1	AL(At least 2 yrs old); SP; PA
SYNALAR CREA (<i>fluocinolone acetonide</i>)	2		DUPIXENT SOSY	1	SP; PA
SYNALAR OINT (<i>fluocinolone acetonide</i>)	2		OPZELURA	2	QL(240 gm per 30 day(s) retail); AL(At least 12 yrs old); SP
SYNALAR SOLN (<i>fluocinolone acetonide</i>)	2		Emollients		
TEXACORT SOLN 2.5 %	2		<i>lactic acid (ammonium lactate) CREA</i>	3	RX/OTC
TOPICORT CREA (<i>desoximetasone</i>)	2		<i>lactic acid (ammonium lactate) LOTN 12 %</i>	3	RX/OTC
TOPICORT GEL (<i>desoximetasone</i>)	2		Hair Growth Agents		
TOPICORT LIQD (<i>desoximetasone</i>)	2		LITFULO	3	QL(1 ea daily); AL(At least 12 yrs old); SP; PA
TOPICORT OINT (<i>desoximetasone</i>)	2		Immunomodulating Agents - Topical		
TOVET KIT	2		<i>imiquimod 5 %</i>	3	
<i>triamcinolone acetonide (topical) AERS</i>	2		Immunosuppressive Agents - Topical		
<i>triamcinolone acetonide (topical) CREA</i>	1				
<i>triamcinolone acetonide (topical) LOTN</i>	1				
<i>triamcinolone acetonide (topical) OINT</i>	1				
<i>triamcinolone acetonide (topical) OINT 0.05 %</i>	2				
<i>triamcinolone acetonide-dimethicone-silicone</i>	2				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ELIDEL (<i>pimecrolimus</i>)	1	QL(30 gm per 30 day(s) retail); AL(At least 2 yrs old); PA	BASIS FACIAL MOISTURIZER CREA	4	
			BASIS OVERNIGHT CREA	4	
HYFTOR	3	AL(At least 6 yrs old); PA	DRYSOL SOLN	4	
<i>pimecrolimus</i>	1	QL(30 gm per 30 day(s) retail); AL(At least 2 yrs old); PA	EUCERIN ORIGINAL HEALING CREA (<i>skin protectants, misc.</i>)	NF	
<i>tacrolimus (topical) OINT 0.1 %</i>	2	QL(30 gm per 30 day(s) retail); AL(At least 16 yrs old)	HYDROCERIN CREA	4	
<i>tacrolimus (topical) OINT 0.03 %</i>	2	QL(30 gm per 30 day(s) retail); AL(At least 2 yrs old)	SENSI-CARE MOISTURIZING CREA	4	
Keratolytic/Antimitotic/Vesicant Agents			<i>skin protectants, misc. CREA</i>	4	
<i>podofilox SOLN</i>	3		SORBIDON HYDRATE CREA	4	
Local Anesthetics - Topical			Phosphodiesterase 4 (PDE4) Inhibitors - Topical		
<i>lidocaine hcl CREA 3 %</i>	3	QL(85 gm per 30 day(s) retail)	EUCRISA	1	QL(100 gm per 30 day(s) retail); PA
<i>lidocaine hcl GEL 2 %</i>	3		ZORYVE	3	AL(At least 6 yrs old); PA
<i>lidocaine hcl PRSY</i>	3		Rosacea Agents		
<i>lidocaine OINT</i>	3	QL(100 gm per 30 day(s) retail)	METROCREAM CREA (<i>metronidazole (topical)</i>)	3	
<i>lidocaine-prilocaine CREA</i>	3	QL(1 gm daily)	<i>metronidazole (topical) CREA</i>	3	
<i>lidocaine PTCH 5 %</i>	3	PA	<i>metronidazole (topical) GEL 0.75 %</i>	3	
<i>lidocaine PTCH 4 %</i>	3	QL(30 ea per 30 day(s) retail)	Scabicides & Pediculicides		
LIDOCARE ARM/NECK/LEG PTCH (<i>lidocaine</i>)	3	QL(30 ea per 30 day(s) retail)	<i>ivermectin (pediculicide)</i>	1	
LIDOCARE BACK/SHOULDER PTCH (<i>lidocaine</i>)	3	QL(30 ea per 30 day(s) retail)	<i>malathion</i>	3	QL(1.97 ml daily); AL(At least 2 yrs old)
LIDODERM PTCH (<i>lidocaine</i>)	3	PA	NATROBA (<i>spinosad</i>)	3	QL(240 ml per 180 day(s) retail; 240 ml per 180 days mail)
LIDOZO	3	QL(1 ea daily)	NIX CREME RINSE LIQD EX (<i>permethrin</i>)	3	QL(59 ml per 30 day(s) retail)
Misc. Topical			OVIDE (<i>malathion</i>)	3	QL(1.97 ml daily); AL(At least 2 yrs old)

Drug Name	Drug Tier	Requirements/Limits
<i>permethrin CREA</i>	3	QL(2 gm daily)
<i>permethrin LIQD EX</i>	3	QL(59 ml per 30 day(s) retail)
<i>pyrethrins-piperonyl butoxide LIQD 4 %-0.33 %</i>	3	QL(236 ml per 30 day(s) retail)
<i>pyrethrins-piperonyl butoxide SHAM 4 %-0.33 %-0.33 %, 4 %-0.33 %</i>	3	QL(236 ml per 30 day(s) retail)
RID ESSENTIAL LICE ELIMINATION KIT KIT EX	3	QL(236 ea per 30 day(s) retail)
SKLICE (<i>ivermectin (pediculicide)</i>)	2	
<i>spinosad</i>	3	QL(240 ml per 180 day(s) retail; 240 ml per 180 days mail)
Tar Products		
<i>coal tar extract SHAM 0.5 %</i>	4	
DHS TAR GEL SHAM (<i>coal tar extract</i>)	NF	
DHS TAR SHAM (<i>coal tar extract</i>)	NF	
NEUTROGENA T/GEL SHAM 0.5 % (<i>coal tar extract</i>)	NF	
DIAGNOSTIC PRODUCTS		
Diagnostic Tests		
ONETOUCH VERIO TEST STRIPS STRP	4	QL(250 ea per 30 day(s) retail); RX/OTC
DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS		
Dietary Management Products		
ELFOLATE PLUS TABS	3	
FOLBIC	3	MP
FOLTANX TABS	3	
L-METHYL-B6-B12 TABS	3	
NIVA-FOL	3	MP

Drug Name	Drug Tier	Requirements/Limits
WESTAB MAX	3	MP
DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes		
Digestive Enzymes		
CREON CPEP	1	MP; PA
PERTZYE CPEP	2	MP
VIOKACE TABS	2	MP
ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT-10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 252600 UNIT-189600 UNIT-60000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT	1	MP; PA
DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure		
Carbonic Anhydrase Inhibitors		
<i>acetazolamide CP12</i>	3	QL(2 ea daily); MP
<i>acetazolamide TABS</i>	3	QL(4 ea daily); MP
Diuretic Combinations		
ALDACTAZIDE (<i>spironolactone & hydrochlorothiazide</i>)	3	QL(3 ea daily); MP
<i>amiloride & hydrochlorothiazide</i>	3	QL(2 ea daily); MP
MAXZIDE-25 TABS (<i>triamterene & hydrochlorothiazide</i>)	3	MP
MAXZIDE TABS (<i>triamterene & hydrochlorothiazide</i>)	3	MP
<i>spironolactone & hydrochlorothiazide</i>	3	QL(3 ea daily); MP

Drug Name	Drug Tier	Requirements/Limits
<i>triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG</i>	3	MP
<i>triamterene & hydrochlorothiazide TABS</i>	3	MP
Loop Diuretics		
FUROSCIX CTKT	3	QL(8 ea per 30 day(s) retail); AL(At least 18 yrs old); PA
<i>furosemide SOLN OR 10 MG/ML, 40 MG/5ML</i>	3	AL(Up to 12 yrs old); MP
<i>furosemide TABS 80 MG, 80 MG</i>	3	QL(4 ea daily); MP
<i>furosemide TABS 20 MG</i>	3	QL(16 ea daily); MP
<i>furosemide TABS 40 MG</i>	3	QL(8 ea daily); MP
LASIX TABS 20 MG (<i>furosemide</i>)	3	QL(16 ea daily); MP
LASIX TABS 40 MG (<i>furosemide</i>)	3	QL(8 ea daily); MP
LASIX TABS 80 MG (<i>furosemide</i>)	3	QL(4 ea daily); MP
SOANZ TABS 20 MG	3	QL(4 ea daily); MP
<i>torseamide TABS 5 MG, 100 MG</i>	3	QL(2 ea daily); MP
<i>torseamide TABS 10 MG, 20 MG</i>	3	QL(4 ea daily); MP
Potassium Sparing Diuretics		
ALDACTONE TABS 25 MG, 100 MG (<i>spironolactone</i>)	3	QL(4 ea daily); MP
ALDACTONE TABS 50 MG (<i>spironolactone</i>)	2	QL(4 ea daily); MP
<i>amiloride hcl TABS</i>	3	QL(1 ea daily); MP
<i>spironolactone TABS 25 MG, 100 MG</i>	3	QL(4 ea daily); MP
<i>spironolactone TABS 50 MG</i>	1	QL(4 ea daily); MP
Thiazides and Thiazide-Like Diuretics		

Drug Name	Drug Tier	Requirements/Limits
<i>chlorthalidone 25 MG, 50 MG</i>	3	QL(4 ea daily); MP
DIURIL SUSP	3	AL(Up to 12 yrs old); MP
<i>hydrochlorothiazide CAPS</i>	3	MP
<i>hydrochlorothiazide TABS</i>	3	MP
<i>indapamide TABS 1.25 MG, 2.5 MG</i>	3	QL(1 ea daily); MP
<i>metolazone</i>	3	QL(2 ea daily); MP
ENDOCRINE AND METABOLIC AGENTS - MISC.		
- Drugs to Treat Bone Disease and Regulate Hormones		
Bone Density Regulators		
ACTONEL TABS 150 MG (<i>risedronate sodium</i>)	2	
ACTONEL TABS 35 MG (<i>risedronate sodium</i>)	2	Limit: 4 tablets per 28 days; QL(0.143 ea daily)
<i>alendronate sodium SOLN</i>	2	
<i>alendronate sodium TABS 5 MG, 10 MG</i>	1	
<i>alendronate sodium TABS 35 MG, 70 MG</i>	1	4 tablets per 28 days; QL(0.15 ea daily)
AELVIA TBEF (<i>risedronate sodium</i>)	2	Limit: 4 tablets per 28 days; QL(0.134 ea daily)
BINOSTO TBEF	2	
<i>calcitonin (salmon) NA</i>	1	SP
FORTEO SOPN (<i>teriparatide</i>)	2	SP
FOSAMAX PLUS D	2	4 tablets per 28 days; QL(0.15 ea daily)
FOSAMAX TABS 70 MG (<i>alendronate sodium</i>)	2	4 tablets per 28 days; QL(0.15 ea daily)
<i>ibandronate sodium SOLN</i>	2	SP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>ibandronate sodium TABS</i>	2	Limit: 1 tablet per 28 days; QL(0.04 ea daily); SP	NUTROPIN AQ NUSPIN 5 SOPN	2	SP
<i>risedronate sodium TABS 35 MG</i>	2	Limit: 4 tablets per 28 days; QL(0.143 ea daily)	OMNITROPE SOCT	2	SP
<i>risedronate sodium TABS 5 MG, 30 MG, 150 MG</i>	2		OMNITROPE SOLR SC	2	SP
<i>risedronate sodium TBEC</i>	2	Limit: 4 tablets per 28 days; QL(0.134 ea daily)	SAIZEN IJ	2	SP
<i>teriparatide SOPN</i>	2	SP	SAIZENPREP RECONSTITUTIONKIT IJ	2	SP
TERIPARATIDE SOPN	2	SP	SEROSTIM SC 4 MG, 5 MG, 6 MG	2	SP
TYMLOS	2	SP	SKYTROFA	2	SP
Corticotropin			SOGROYA	2	QL(2 ml per 28 day(s) retail); SP
ACTHAR GEL AUIJ	CO	SP	ZOMACTON SOLR SC	2	SP
GnRH/LHRH Antagonists			Hormone Receptor Modulators		
ORLISSA 200 MG	1	QL(56 ea per 28 day(s) retail); AL(At least 18 yrs old); PA	EVISTA (<i>raloxifene hcl</i>)	2	
ORLISSA 150 MG	1	QL(28 ea per 28 day(s) retail); AL(At least 18 yrs old); PA	<i>raloxifene hcl</i>	1	
Growth Hormones			Metabolic Modifiers		
GENOTROPIN MINIQUICK PRSY	1	SP; PA	<i>calcitriol CAPS</i>	3	QL(4 ea daily); MP
GENOTROPIN CART SC	1	SP; PA	<i>calcitriol SOLN OR</i>	3	AL(Up to 12 yrs old); MP
HUMATROPE CART IJ	2	SP	<i>cinacalcet hcl 90 MG</i>	3	QL(4 ea daily); SP; PA
NGENLA	2	SP	<i>cinacalcet hcl 30 MG, 60 MG</i>	3	QL(2 ea daily); SP; PA
NORDITROPIN FLEXPRO SOPN	1	SP; PA	<i>doxercalciferol CAPS</i>	4	SP
NUTROPIN AQ NUSPIN 10 SOPN	2	SP	<i>doxercalciferol SOLN</i>	4	
NUTROPIN AQ NUSPIN 20 SOPN	2	SP	ELFABRIO	CO	SP
			HECTOROL SOLN (<i>doxercalciferol</i>)	NF	
			LAMZEDE	CO	SP
			OLPRUVA THPK	CO	SP
			OPFOLDA	CO	SP
			<i>paricalcitol CAPS</i>	4	SP
			<i>paricalcitol SOLN</i>	4	
			PHEBURANE PLLT	CO	SP
			ROCALTROL CAPS (<i>calcitriol</i>)	3	QL(4 ea daily); MP

Drug Name	Drug Tier	Requirements/Limits
ROCALTROL SOLN OR (<i>calcitriol</i>)	3	AL(Up to 12 yrs old); MP
SENSIPAR 30 MG, 60 MG (<i>cinacalcet hcl</i>)	3	QL(2 ea daily); SP; PA
SENSIPAR 90 MG (<i>cinacalcet hcl</i>)	3	QL(4 ea daily); SP; PA
STRENSIQ	CO	SP; MP
XPHOZAH	2	MP
ZEMPLAR CAPS 1 MCG, 2 MCG (<i>paricalcitol</i>)	NF	SP
ZEMPLAR SOLN (<i>paricalcitol</i>)	NF	
Mineralocorticoid Receptor Antagonists		
KERENDIA	3	QL(1 ea daily); AL(At least 18 yrs old); PA
Natriuretic Peptides		
VOXZOGO	CO	SP
Posterior Pituitary Hormones		
DDAVP TABS 0.1 MG (<i>desmopressin acetate</i>)	3	QL(6 ea daily)
DDAVP TABS 0.2 MG (<i>desmopressin acetate</i>)	2	QL(6 ea daily)
<i>desmopressin acetate spray</i>	3	PA
<i>desmopressin acetate spray refrigerated</i>	3	PA
DESMOPRESSIN ACETATE SOLN NA	3	
<i>desmopressin acetate TABS 0.2 MG</i>	1	QL(6 ea daily)
<i>desmopressin acetate TABS 0.1 MG</i>	3	QL(6 ea daily)
Prolactin Inhibitors		
<i>cabergoline</i>	3	
Somatostatic Agents		
<i>octreotide acetate SOLN</i>	3	SP; PA

Drug Name	Drug Tier	Requirements/Limits
SANDOSTATIN SOLN 50 MCG/ML, 100 MCG/ML (<i>octreotide acetate</i>)	3	SP; PA
Vasopressin Receptor Antagonists		
JYNARQUE TABS	3	QL(2 ea daily); AL(At least 18 yrs old); SP; PA
JYNARQUE TBPB	3	QL(2 ea daily); AL(At least 18 yrs old); SP; PA
SAMSCA TABS (<i>tolvaptan</i>)	3	QL(2 ea daily); AL(At least 18 yrs old); SP; PA
<i>tolvaptan TABS</i>	3	QL(2 ea daily); AL(At least 18 yrs old); SP; PA
ESTROGENS - Hormone Replacement/Modifying Drugs		
Estrogen Combinations		
ACTIVEVELLA TABS 1 MG-0.5 MG (<i>estradiol & norethindrone acetate</i>)	3	AL(Up to 64 yrs old); MP
<i>esterified estrogens & methyltestosterone 1.25 MG-0.625 MG</i>	4	MP
<i>estradiol & norethindrone acetate TABS</i>	3	AL(Up to 64 yrs old); MP
MYFEMBREE	1	QL(28 ea per 28 day(s) retail); AL(At least 18 yrs old); PA
<i>norethindrone acetate-ethinyl estradiol 0.5 MG-2.5 MCG</i>	3	QL(1 ea daily); AL(Up to 64 yrs old); MP
<i>norethindrone acetate-ethinyl estradiol 1 MG-5 MCG</i>	3	AL(Up to 64 yrs old); MP

Drug Name	Drug Tier	Requirements/Limits
ORIAHNN	1	QL(56 ea per 28 day(s) retail); AL(At least 18 yrs old); PA
PREMPHASE	3	QL(1 ea daily); AL(Up to 64 yrs old); MP
PREMPRO	3	QL(1 ea daily); AL(Up to 64 yrs old); MP
Estrogens		
ALORA PTTW 0.025 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR	3	QL(0.29 ea daily); AL(Up to 64 yrs old); MP
CLIMARA PTWK (estradiol)	3	QL(0.143 ea daily); AL(Up to 64 yrs old); MP
DELESTROGEN (estradiol valerate)	3	MP
ESTRACE TABS 0.5 MG, 2 MG (estradiol)	3	AL(Up to 64 yrs old); MP
ESTRACE TABS 1 MG (estradiol)	2	AL(Up to 64 yrs old)
estradiol valerate	3	MP
estradiol PTTW	3	QL(0.29 ea daily); AL(Up to 64 yrs old); MP
estradiol PTWK	3	QL(0.143 ea daily); AL(Up to 64 yrs old); MP
estradiol TABS 1 MG	1	AL(Up to 64 yrs old)
estradiol TABS 0.5 MG, 2 MG	3	AL(Up to 64 yrs old); MP
MENEST	3	AL(Up to 64 yrs old)
MINIVELLE PTTW (estradiol)	3	QL(0.29 ea daily); AL(Up to 64 yrs old); MP
PREMARIN TABS	3	QL(1 ea daily); AL(Up to 64 yrs old); MP
VIVELLE-DOT PTTW (estradiol)	3	QL(0.29 ea daily); AL(Up to 64 yrs old); MP
FLUOROQUINOLONES - Drugs to Treat Bacterial		

Drug Name	Drug Tier	Requirements/Limits
Infections		
Fluoroquinolones		
BAXDELA TABS	2	
ciprofloxacin hcl TABS	1	QL(42 ea per fill retail)
ciprofloxacin SUSR 5 GM/100ML, 500 MG/5ML	1	
CIPRO SUSR	1	
CIPRO TABS 250 MG, 500 MG (ciprofloxacin hcl)	2	QL(42 ea per fill retail)
levofloxacin SOLN OR	1	
levofloxacin TABS 750 MG	1	QL(28 ea per fill retail)
levofloxacin TABS 250 MG, 500 MG	1	QL(14 ea per fill retail)
moxifloxacin hcl TABS	2	QL(14 ea per fill retail)
ofloxacin 300 MG, 400 MG	2	
GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs		
5-HT4 Receptor Agonists		
MOTEGRITY	2	
Agents for Chronic Idiopathic Constipation (CIC)		
TRULANCE	2	
Antiflatulents		
GAS-X EXTRA STRENGTH CHEW (simethicone)	3	
MYLICON INFANTS GAS RELIEF DYE FREE SUSP (simethicone)	3	
MYLICON INFANTS GAS RELIEF SUSP (simethicone)	3	
simethicone CHEW	3	
simethicone LIQD OR 20 MG/0.3ML	3	
simethicone SUSP	3	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Gallstone Solubilizing Agents			AZULFIDINE EN-TABS TBEC (<i>sulfasalazine</i>)	2	
RELTONE CAPS	2	MP	AZULFIDINE TABS (<i>sulfasalazine</i>)	2	
URSO 250 TABS (<i>ursodiol</i>)	2	MP	<i>balsalazide disodium</i> CAPS	2	
URSO FORTE TABS (<i>ursodiol</i>)	2	MP	CIMZIA STARTER KIT PSKT	2	SP
<i>ursodiol</i> CAPS	1	MP	CIMZIA KIT	2	SP
URSODIOL CAPS	2	MP	CIMZIA PSKT	2	SP
<i>ursodiol</i> TABS	1	MP	COLAZAL CAPS (<i>balsalazide disodium</i>)	2	
Gastrointestinal Antiallergy Agents			DELZICOL CPDR (<i>mesalamine</i>)	2	
<i>cromolyn sodium</i> (<i>mastocytosis</i>)	3		DIPENTUM	2	
GASTROCROM (<i>cromolyn sodium</i> (<i>mastocytosis</i>))	3		ENTYVIO PEN SOAJ SC 108 MG/0.68ML	2	SP
Gastrointestinal Chloride Channel Activators			ENTYVIO SOLR	2	SP
AMITIZA (<i>lubiprostone</i>)	2		LIALDA TBEC (<i>mesalamine</i>)	2	
<i>lubiprostone</i>	1		<i>mesalamine</i> CP24	2	
Gastrointestinal Stimulants			<i>mesalamine</i> CPR	2	
<i>metoclopramide hcl</i> SOLN OR 5 MG/5ML, 10 MG/10ML	3		<i>mesalamine</i> CPDR	2	
<i>metoclopramide hcl</i> TABS 10 MG	1		<i>mesalamine</i> ENEM	3	
<i>metoclopramide hcl</i> TABS 5 MG	3		<i>mesalamine</i> TBEC 1.2 GM	1	
REGLAN TABS 10 MG (<i>metoclopramide hcl</i>)	2		<i>mesalamine</i> TBEC 800 MG	2	
REGLAN TABS 5 MG (<i>metoclopramide hcl</i>)	3		OMVOH SOAJ	2	AL (At least 18 yrs old); SP
Ileal Bile Acid Transporter (IBAT) Inhibitors			PENTASA CPR	2	
LIVMARLI	CO	SP	PENTASA CPR (<i>mesalamine</i>)	2	
Inflammatory Bowel Agents			SFROWASA ENEM	3	
APRISO CP24 (<i>mesalamine</i>)	1		SKYRIZI SOCT 360 MG/2.4ML	2	SP; PA
ASACOL HD TBEC (<i>mesalamine</i>)	2		SKYRIZI SOCT 180 MG/1.2ML	2	SP
			STELARA 130 MG/26ML	2	SP
			<i>sulfasalazine</i> TABS	1	
			<i>sulfasalazine</i> TBEC	1	

Drug Name	Drug Tier	Requirements/Limits
VELSIPIITY	2	AL(At least 18 yrs old); SP
Intestinal Acidifiers		
<i>lactulose (encephalopathy)</i>	3	
<i>lactulose (encephalopathy)</i>	CO	
Irritable Bowel Syndrome (IBS) Agents		
<i>alosetron hcl</i>	2	
IBSRELA	2	QL(2 ea daily); AL(At least 18 yrs old)
LINZESS	1	
LOTRONEX (<i>alosetron hcl</i>)	2	
VIBERZI	2	QL(2 ea daily)
Peripheral Opioid Receptor Antagonists		
MOVANTIK	2	
RELISTOR SOLN	2	
RELISTOR TABS	2	
SYMPROIC	2	
Phosphate Binder Agents		
AURYXIA	2	MP
<i>calcium acetate (phosphate binder) CAPS</i>	1	MP; PA
<i>calcium acetate (phosphate binder) TABS</i>	1	MP; PA; RX/OTC
FOSRENOL CHEW (<i>lanthanum carbonate</i>)	2	MP
FOSRENOL PACK	2	MP
<i>lanthanum carbonate CHEW</i>	2	MP
RENAGEL (<i>sevelamer hcl</i>)	2	MP
RENVELA PACK (<i>sevelamer carbonate</i>)	2	MP
RENVELA TABS (<i>sevelamer carbonate</i>)	2	MP; PA

Drug Name	Drug Tier	Requirements/Limits
<i>sevelamer carbonate PACK</i>	2	MP
<i>sevelamer carbonate TABS</i>	1	MP; PA
<i>sevelamer hcl</i>	2	MP
VELPHORO	2	MP
GENITOURINARY AGENTS - MISCELLANEOUS - Miscellaneous Drugs to Treat Reproductive Organs and Urinary System		
Acidifiers		
K-PHOS NO 2	3	
Alkalinizers		
<i>potassium citrate (alkalinizer) TBCR</i>	3	
<i>potassium citrate-citric acid SOLN</i>	3	RX/OTC
<i>sodium citrate & citric acid</i>	3	RX/OTC
UROCIT-K 10 TBCR (<i>potassium citrate (alkalinizer)</i>)	3	
UROCIT-K 15 TBCR (<i>potassium citrate (alkalinizer)</i>)	3	
UROCIT-K 5 TBCR (<i>potassium citrate (alkalinizer)</i>)	3	
Cystinosis Agents		
CYSTAGON CAPS	CO	SP
PROCYSBI CPDR	CO	SP
PROCYSBI PACK	CO	SP
Genitourinary Irrigants		
<i>sodium chloride (gu irrigant) 0.9 %</i>	4	
Hyperoxaluria Agents		
RIVFLOZA SOLN	CO	SP
RIVFLOZA SOSY	CO	SP
Interstitial Cystitis Agents		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ELMIRON CAPS	3	PA	GLOPERBA SOLN OR	2	
Prostatic Hypertrophy Agents			MITIGARE CAPS (<i>colchicine</i>)	2	
<i>alfuzosin hcl</i>	1		ULORIC (<i>febuxostat</i>)	2	
AVODART (<i>dutasteride</i>)	2		ZYLOPRIM 300 MG (<i>allopurinol</i>)	1	
CARDURA XL	2	MP	ZYLOPRIM 100 MG (<i>allopurinol</i>)	2	
<i>dutasteride</i>	1		Uricosurics		
<i>dutasteride-tamsulosin hcl</i>	2		<i>probenecid</i>	1	
ENTADFI	2		HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders		
<i>finasteride</i>	1		Antihemophilic Products		
FLOMAX (<i>tamsulosin hcl</i>)	2		ALTUVIIIIO 250 UNIT, 500 UNIT, 1000 UNIT, 2000 UNIT, 3000 UNIT, 4000 UNIT	CO	SP
JALYN (<i>dutasteride-tamsulosin hcl</i>)	2		COAGADEX	CO	SP
PROSCAR (<i>finasteride</i>)	2		HEMLIBRA	CO	SP
RAPAFLO (<i>silodosin</i>)	2		NUWIQ KIT	CO	SP
<i>silodosin</i>	2		NUWIQ SOLR	CO	SP
<i>tamsulosin hcl</i>	1		REBINYN	CO	SP
UROXATRAL (<i>alfuzosin hcl</i>)	1		Complement Inhibitors		
Urinary Analgesics			EMPAVELI	CO	SP
<i>phenazopyridine hcl TABS 100 MG, 100 MG</i>	3		ENJAYMO	CO	SP
<i>phenazopyridine hcl TABS 200 MG</i>	1		FABHALTA	CO	SP
PYRIDIDIUM TABS 100 MG (<i>phenazopyridine hcl</i>)	3		SOLIRIS	CO	SP
PYRIDIDIUM TABS 200 MG (<i>phenazopyridine hcl</i>)	2		TAVNEOS	CO	SP
GOUT AGENTS - Drugs to Treat Gout			ULTOMIRIS	CO	SP
Gout Agent Combinations			VEOPOZ	CO	SP
<i>colchicine w/ probenecid</i>	1		ZILBRYSQ	CO	SP
Gout Agents			Hematorheologic Agents		
<i>allopurinol</i>	1		<i>pentoxifylline</i>	3	MP
<i>colchicine CAPS</i>	2		Plasma Kallikrein Inhibitors		
<i>colchicine TABS</i>	1		TAKHZYRO SOSY	CO	SP
COLCRYS TABS (<i>colchicine</i>)	2		Plasma Proteins		
<i>febuxostat</i>	2				

Drug Name	Drug Tier	Requirements/Limits
RYPLAZIM	CO	
Platelet Aggregation Inhibitors		
AGRYLIN 0.5 MG (<i>anagrelide hcl</i>)	3	
<i>anagrelide hcl</i>	3	
<i>aspirin-dipyridamole</i>	2	MP
BRILINTA	1	MP
<i>cilostazol</i>	3	QL(2 ea daily); MP
<i>clopidogrel bisulfate 300 MG</i>	1	QL(2 ea per 30 day(s) retail)
<i>clopidogrel bisulfate 75 MG</i>	1	QL(1 ea daily); MP
<i>dipyridamole</i>	2	MP
EFFIENT (<i>prasugrel hcl</i>)	2	AL(Up to 75 yrs old); MP
PLAVIX 75 MG (<i>clopidogrel bisulfate</i>)	2	QL(1 ea daily); MP
<i>prasugrel hcl</i>	1	AL(Up to 75 yrs old); MP
Pyruvate Kinase Activators		
PYRUKYND TAPER PACK TBPB	CO	SP
PYRUKYND TABS	CO	SP
HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders		
Agents for Sickle Cell Disease		
DROXIA CAPS	3	MP
ENDARI (<i>glutamine sickle cell</i>)	2	QL(180 ea per 30 day(s) retail; 180 ea per 30 days mail); AL(At least 5 yrs old); PA
<i>glutamine (sickle cell)</i>	1	QL(180 ea per 30 day(s) retail; 180 ea per 30 days mail); AL(At least 5 yrs old); PA
LYFGENIA	CO	SP

Drug Name	Drug Tier	Requirements/Limits
OXBRYTA TABS 300 MG	3	QL(3 ea daily); AL(At least 4 yrs old); SP; PA
OXBRYTA TABS 500 MG	3	QL(3 ea daily); AL(At least 12 yrs old); SP; PA
OXBRYTA TBSO	3	QL(3 ea daily); AL(At least 4 yrs old); SP; PA
SIKLOS TABS	3	AL(At least 2 yrs old - Up to 14 yrs old); MP
Cobalamins		
<i>cyanocobalamin SOLN IJ 1000 MCG/ML</i>	3	MP
Folic Acid/Folates		
<i>folic acid TABS 400 MCG</i>	3	QL(1 ea daily); MP
<i>folic acid TABS 1 MG, 800 MCG</i>	3	MP
Hematopoietic Gene Therapy		
ZYNTEGLO	CO	SP
Hematopoietic Growth Factors		
ARANESP ALBUMIN FREE SOLN 25 MCG/ML, 40 MCG/ML, 60 MCG/ML, 100 MCG/ML, 200 MCG/ML	1	SP; PA
ARANESP ALBUMIN FREE SOSY	1	SP; PA
EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	1	SP; PA
FULPHILA	2	QL(0.6 ml per 14 day(s) retail); SP
FYLNETRA	2	QL(0.6 ml per 14 day(s) retail); SP
GRANIX SOLN	2	SP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
GRANIX SOSY	2	SP	FERREX 150 FORTE PLUS	4	MP
JESDUVROQ	2	AL(At least 18 yrs old); SP	FERREX 150 PLUS 50 MG-50 MG-50 MG-50 MG-150 MG-150 MG	4	MP
LEUKINE SOLR IJ	2	SP	FERREX 28 MISC	4	MP
NEULASTA ONPRO KIT PSKT	2	QL(0.6 ml per 14 day(s) retail); SP	FOLGARD RX TABS	3	AL(Up to 12 yrs old); MP
NEULASTA SOSY	2	QL(0.6 ml per 14 day(s) retail); SP	<i>folic acid-vitamin b6-vitamin b12 TABS 10 MG-800 MCG-115 MCG, 25 MG-2.5 MG-1 MG</i>	3	MP; RX/OTC
NEUPOGEN SOLN	1	SP	<i>folic acid-vitamin b6-vitamin b12 TABS 25 MG-2.2 MG-1 MG</i>	3	AL(Up to 12 yrs old); MP
NEUPOGEN SOSY	1	SP	FOLITAB 500	4	MP
NIVESTYM SOLN	2	SP	FOLTABS 800 TABS	3	MP
NIVESTYM SOSY	2	SP	HEMATRON-AF	4	MP
NYVEPRIA	1	QL(0.6 ml per 14 day(s) retail); SP	HEMATRON-AF (<i>iron-docusate-b12-folic acid-vit c-vit e-copper-biotin</i>)	NF	MP; RX/OTC
PROCRIT	2	SP	HEMAX	4	MP
PROCRIT	2	SP	ICAR-C (<i>iron-vitamin c</i>)	NF	MP
RELEUKO SOLN	2	SP	ICAR-C PLUS TABS (<i>iron-vitamin c-vitamin b12-folic acid</i>)	3	AL(Up to 12 yrs old); MP; RX/OTC
RELEUKO SOSY	2	SP	<i>iron polysaccharide complex-vit b12-folic acid CAPS</i>	4	MP; RX/OTC
RETACRIT	1	SP; PA	<i>iron-docusate-b12-folic acid-vit c-vit e-copper-biotin</i>	4	MP; RX/OTC
STIMUFEND	2	QL(0.6 ml per 14 day(s) retail); SP	<i>iron-vitamin c</i>	4	MP
UDENYCA ONBODY SOSY	2	QL(0.6 ml per 14 day(s) retail; 1 ml per 14 days mail); SP	<i>iron-vitamin c-vitamin b12-folic acid TABS</i>	3	AL(Up to 12 yrs old); MP; RX/OTC
UDENYCA SOAJ	2	QL(0.6 ml per 14 day(s) retail); SP	MULTIGEN	4	MP
UDENYCA SOSY	2	QL(0.6 ml per 14 day(s) retail); SP	NEPHRON FA	3	
ZARXIO	2	QL(45 ml per 30 day(s) retail); SP	Iron		
ZIEXTENZO	2	QL(0.6 ml per 14 day(s) retail); SP	FEOSOL TABS (<i>ferrous sulfate dried</i>)	3	MP
Hematopoietic Mixtures					
BIFERA	4	MP			
FEOSOL BIFERA	4	MP			

Drug Name	Drug Tier	Requirements/Limits
FER-IN-SOL SOLN (ferrous sulfate)	3	AL(Up to 12 yrs old); MP
ferrous gluconate TABS 27 MG, 240 MG, 324 MG	3	MP
FERROUS GLUCONATE TABS 324 MG	3	MP
ferrous sulfate dried TABS 200 MG	3	MP
ferrous sulfate dried TBCR 45 MG	3	MP
ferrous sulfate SOLN	3	AL(Up to 12 yrs old); MP
ferrous sulfate TABS 65 MG, 325 MG	3	MP
ferrous sulfate TBEC	3	MP
FERROUS SULFATE TBEC (ferrous sulfate)	3	MP
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
Barbiturate Hypnotics		
SEZABY SOLR	CO	
Non-Barbiturate Hypnotics		
IGALMI FILM	CO	SP
midazolam hcl SOLN IJ 25 MG/5ML, 50 MG/10ML	3	QL(5 ml per 30 day(s) retail)
midazolam hcl SOLN IJ 5 MG/ML, 10 MG/2ML	3	QL(4 ml per 30 day(s) retail)
ZOLPIDEM TARTRATE CAPS	CO	
Orexin Receptor Antagonists		
QUVIVIQ	CO	
LAXATIVES - Bowel Treatment Drugs		
Bulk Laxatives		
HYDROCIL INSTANT POWD (psyllium)	3	
METAMUCIL 4 IN 1 FIBER POWD (psyllium)	3	

Drug Name	Drug Tier	Requirements/Limits
METAMUCIL FREE & NATURAL POWD (psyllium)	3	
METAMUCIL ORIGINAL TEXTURE POWD (psyllium)	2	
METAMUCIL POWD (psyllium)	2	
psyllium POWD 25 %, 28.3 %, 43 %, 51.7 %, 58.6 %, 95 %	3	
Laxative Combinations		
GOLYTELY SOLR (peg 3350-kcl-sod bicarb-sod chloride-sod sulfate)	3	
peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR	3	
peg 3350-potassium chloride-sod bicarbonate-sod chloride	3	
sennosides-docusate sodium TABS	3	
SENOKOT S TABS (sennosides-docusate sodium)	3	
sodium sulfate-potassium sulfate-magnesium sulfate	1	1 package(s) per 30 day(s) retail
SUPREP BOWEL PREP KIT (sodium sulfate-potassium sulfate-magnesium sulfate)	2	1 package(s) per 30 day(s) retail
Laxatives - Miscellaneous		
lactulose SOLN	3	
MIRALAX POWD (polyethylene glycol 3350)	3	
polyethylene glycol 3350 POWD	3	
Lubricant Laxatives		
FLEET OIL ENEM (mineral oil)	3	

Drug Name	Drug Tier	Requirements/ Limits
<i>mineral oil ENEM</i>	3	
Saline Laxatives		
FLEET ENEMA ENEM (<i>sodium phosphates</i>)	3	
FLEET PEDIATRIC ENEM (<i>sodium phosphates</i>)	3	
FLEET SALINE ENEMA EXTRAVOLUME ENEM (<i>sodium phosphates</i>)	3	
<i>magnesium citrate</i>	3	
<i>magnesium hydroxide SUSP 7.75 %, 400 MG/5ML, 1200 MG/15ML, 2400 MG/30ML</i>	3	
<i>magnesium oxide (laxative)</i>	3	MP
PHILLIPS (<i>magnesium oxide (laxative)</i>)	3	MP
<i>sodium phosphates ENEM</i>	3	
Stimulant Laxatives		
<i>bisacodyl SUPP</i>	3	
<i>bisacodyl TBEC</i>	3	
DULCOLAX PINK LAXATIVE TBEC (<i>bisacodyl</i>)	3	
DULCOLAX SUPP (<i>bisacodyl</i>)	3	
DULCOLAX TBEC (<i>bisacodyl</i>)	3	
<i>sennosides CAPS</i>	3	
<i>sennosides LIQD</i>	3	
<i>sennosides SYRP 8.8 MG/5ML</i>	3	
<i>sennosides TABS 8.6 MG, 15 MG, 17.2 MG, 25 MG</i>	3	
SENOKOT TABS (<i>sennosides</i>)	3	
Surfactant Laxatives		

Drug Name	Drug Tier	Requirements/ Limits
<i>benzocaine-docusate sodium ENEM</i>	3	
COLACE CLEAR CAPS (<i>docusate sodium</i>)	3	
COLACE CAPS 100 MG (<i>docusate sodium</i>)	3	
<i>docusate calcium</i>	3	
<i>docusate sodium CAPS</i>	3	
<i>docusate sodium ENEM 283 MG/5ML</i>	3	
<i>docusate sodium LIQD 50 MG/5ML, 100 MG/10ML</i>	3	
<i>docusate sodium TABS</i>	3	
MACROLIDES - Drugs to Treat Bacterial Infections		
Azithromycin		
<i>azithromycin PACK</i>	1	QL(2 ea per fill retail)
<i>azithromycin SUSR</i>	1	
<i>azithromycin TABS 250 MG</i>	1	
<i>azithromycin TABS 500 MG</i>	1	QL(3 ea per fill retail)
<i>azithromycin TABS 600 MG</i>	1	QL(12 ea per fill retail)
ZITHROMAX TRI-PAK TABS (<i>azithromycin</i>)	2	QL(3 ea per fill retail)
ZITHROMAX Z-PAK TABS (<i>azithromycin</i>)	2	
ZITHROMAX PACK (<i>azithromycin</i>)	2	QL(2 ea per fill retail)
ZITHROMAX SUSR (<i>azithromycin</i>)	2	
ZITHROMAX TABS 250 MG (<i>azithromycin</i>)	2	
ZITHROMAX TABS 500 MG (<i>azithromycin</i>)	2	QL(3 ea per fill retail)
Clarithromycin		
<i>clarithromycin SUSR</i>	1	
<i>clarithromycin TABS</i>	1	QL(28 ea per fill retail)
<i>clarithromycin TB24</i>	2	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Erythromycins			DUREX REALFEEL NON-LATEX	3	QL(36 ea per 30 day(s) retail)
E.E.S. GRANULES SUSR (erythromycin ethylsuccinate)	2		DUREX TROPICAL MISC	3	QL(36 ea per 30 day(s) retail)
ERYPED 200 SUSR (erythromycin ethylsuccinate)	2		FANTASY LUBRICATED/SPERMICI DE MISC	3	QL(36 ea per 30 day(s) retail)
ERYPED 400 SUSR (erythromycin ethylsuccinate)	2		FANTASY LUBRICATED MISC	3	QL(36 ea per 30 day(s) retail)
erythromycin base CPEP	2		FC2 FEMALE CONDOM	3	QL(36 ea per 30 day(s) retail)
erythromycin base TABS	2		FEMCAP DEVI	3	
erythromycin base TBEC	2		KAMELEON LUBRICATED MISC	3	QL(36 ea per 30 day(s) retail)
erythromycin ethylsuccinate SUSR 200 MG/5ML	1		KIMONO COLORS DEVI	3	QL(36 ea per 30 day(s) retail)
erythromycin ethylsuccinate SUSR 400 MG/5ML	2		KIMONO LUBRICATED MISC	3	QL(36 ea per 30 day(s) retail)
erythromycin ethylsuccinate TABS	2		KIMONO MAXX/LARGE FLARE MISC	3	QL(36 ea per 30 day(s) retail)
erythromycin ethylsuccinate TABS	1		KIMONO MICRO THIN PLUS SPERMICIDE LUBRICATED MISC	3	QL(36 ea per 30 day(s) retail)
erythromycin stearate TABS 250 MG	1		KIMONO MICRO THIN MISC	3	QL(36 ea per 30 day(s) retail)
Fidaxomicin			KIMONO PLUS SPERMICIDE LUBRICATED MISC	3	QL(36 ea per 30 day(s) retail)
DIFICID SUSR	1		KIMONO PLUS SPERMICIDE/LUBRICATED MISC	3	QL(36 ea per 30 day(s) retail)
DIFICID TABS	1		MEDICAL DEVICES AND SUPPLIES		
Contraceptives			KIMONO PS LUBRICATED MISC	3	QL(36 ea per 30 day(s) retail)
AIMSCO LUBRICATED MISC	3	QL(36 ea per 30 day(s) retail)	KIMONO PS PLUS SPERMICIDE/LUBRICATED MISC	3	QL(36 ea per 30 day(s) retail)
CAYA DPRH	3		KIMONO SENSATION LUBRICATED MISC	3	QL(36 ea per 30 day(s) retail)
CONDOMS	3	QL(36 ea per 30 day(s) retail)	KIMONO SENSATION PLUS SPERMICIDE LUBRICATED MISC	3	QL(36 ea per 30 day(s) retail)
DUREX EXTRA SENSITIVE THIN DEVI	3	QL(36 ea per 30 day(s) retail)	KIMONO SPECIAL DEVI	3	QL(36 ea per 30 day(s) retail)
DUREX EXTRA SENSITIVE THIN MISC	3	QL(36 ea per 30 day(s) retail)			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
K-Y ME & YOU EXTRA LUBRICATED DEVI	3	QL(36 ea per 30 day(s) retail)	TRUSTEX LUBRICATED/SPERMICI DE EXTRA STRENGTH MISC	3	QL(36 ea per 30 day(s) retail)
K-Y ME & YOU INTENSE DEVI	3	QL(36 ea per 30 day(s) retail)	TRUSTEX LUBRICATED/SPERMICI DE MISC	3	QL(36 ea per 30 day(s) retail)
MAXX LUBRICATED MISC	3	QL(36 ea per 30 day(s) retail)	TRUSTEX LUBRICATED MISC	3	QL(36 ea per 30 day(s) retail)
MAXX PLUS SPERMICIDE LUBRICATED MISC	3	QL(36 ea per 30 day(s) retail)	TRUSTEX NATURAL CONDOMS +LUBE/LUBRICATED MISC	3	QL(36 ea per 30 day(s) retail)
REALITY LATEX CONDOMS/LUBRICATED MISC	3	QL(36 ea per 30 day(s) retail)	TRUSTEX NON-LUBRICATED MISC	3	QL(36 ea per 30 day(s) retail)
REALITY LATEX/ULTRA TEXTURED DEVI	3	QL(36 ea per 30 day(s) retail)	TRUSTEX WITH NONOXYNOL-9/RIBBED/STUDED MISC	3	QL(36 ea per 30 day(s) retail)
REALITY LATEX/ULTRA THIN DEVI	3	QL(36 ea per 30 day(s) retail)	TRUSTEX/RIA LUBRICATED SPERMICIDE MISC	3	QL(36 ea per 30 day(s) retail)
TROJAN MAGNUM MISC	3	QL(36 ea per 30 day(s) retail)	TRUSTEX/RIA LUBRICATED/SPERMICI DE MISC	3	QL(36 ea per 30 day(s) retail)
TROJAN ULTRA THIN LUBRICATED MISC	3	QL(36 ea per 30 day(s) retail)	TRUSTEX/RIA LUBRICATED MISC	3	QL(36 ea per 30 day(s) retail)
TROJAN ULTRA THIN/SPERMICIDAL LUBRICANT MISC	3	QL(36 ea per 30 day(s) retail)	TRUSTEX/RIA NON-LUBRICATED MISC	3	QL(36 ea per 30 day(s) retail)
TROJAN-ENZ LUBRICATED MISC	3	QL(36 ea per 30 day(s) retail)	WIDE-SEAL SILICONE DIAPHRAGM KIT 60	3	
TROJAN-ENZ W/SPERMICIDAL MISC	3	QL(36 ea per 30 day(s) retail)	WIDE-SEAL SILICONE DIAPHRAGM KIT 65	3	
TRUE COVER DEVI	3	QL(36 ea per 30 day(s) retail)	WIDE-SEAL SILICONE DIAPHRAGM KIT 70	3	
TRUSTEX COLOR CONDOMS + LUBE MISC	3	QL(36 ea per 30 day(s) retail)	WIDE-SEAL SILICONE DIAPHRAGM KIT 75	3	
TRUSTEX LUBRICATED EXTRALARGE MISC	3	QL(36 ea per 30 day(s) retail)	WIDE-SEAL SILICONE DIAPHRAGM KIT 80	3	
TRUSTEX LUBRICATED EXTRASTRENGTH MISC	3	QL(36 ea per 30 day(s) retail)	WIDE-SEAL SILICONE DIAPHRAGM KIT 85	3	
TRUSTEX LUBRICATED/RIBBED/STUDED MISC	3	QL(36 ea per 30 day(s) retail)	WIDE-SEAL SILICONE DIAPHRAGM KIT 90	3	
TRUSTEX LUBRICATED/SPERMICI DE EXTRA LARGE MISC	3	QL(36 ea per 30 day(s) retail)			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
WIDE-SEAL SILICONE DIAPHRAGM KIT 95	3		ACTI-LANCE UNIVERSAL SAFETY LANCETS 23G	4	RX/OTC
Diabetic Supplies			ADJUSTABLE LANCING DEVICE MISC	4	
1ST TIER UNILET COMFORTOUCH LANCETS 28G	4	RX/OTC	ADVANCE MICRO-DRAW CONTROL LEVEL 1-2 LIQD	3	
1ST TIER UNILET COMFORTOUCH LANCETS 30G	4	RX/OTC	ADVANCE MICRO-DRAW NORMAL CONTROL LIQD	3	
ACCU-CHEK AVIVA SOLN	3		ADVANCED MOBILE LANCET 30G	4	RX/OTC
ACCU-CHEK FASTCLIX LANCETDEVICE KIT KIT	4		ADVOCATE CONTROL SOLUTIONHIGH LIQD	3	
ACCU-CHEK FASTCLIX LANCETS	4	RX/OTC	ADVOCATE LANCETS	4	RX/OTC
ACCU-CHEK GUIDE CONTROL LEVEL1/LEVEL2 LIQD	3		ADVOCATE LANCETS 30G	4	RX/OTC
ACCU-CHEK MULTICLIX LANCET DEVICE KIT KIT	4		ADVOCATE LANCING DEVICE MISC	4	
ACCU-CHEK SAFE-T-PRO LANCETS	4	RX/OTC	ADVOCATE RAPID-SAFE LANCING DEVICE MISC	4	
ACCU-CHEK SAFE-T-PRO PLUSLANCETS	4	RX/OTC	ADVOCATE REDI-CODE+ CONTROL SOLUTION HIGH SOLN	3	
ACCU-CHEK SMARTVIEW CONTROL LIQD	3		ADVOCATE REDI-CODE+ CONTROL SOLUTION LOW SOLN	4	QL(1 ea per 30 day(s) retail)
ACCU-CHEK SOFTCLIX LANCETDEVICE KIT KIT	4		ADVOCATE SAFETY LANCETS	4	RX/OTC
ACCU-CHEK SOFTCLIX LANCETS	4	RX/OTC	ADVOCATE SAFETY LANCETS 26G	4	RX/OTC
ACCUTREND GLUCOSE CONTROL SOLN	3		AGAMATRIX CONTROL HIGH SOLN	3	
ACTI-LANCE LANCETS 28G	4	RX/OTC	AGAMATRIX CONTROL NORMAL& HIGH SOLN	3	
ACTI-LANCE LITE SAFETY LANCETS 28G	4	RX/OTC	AGAMATRIX CONTROL SOLUTION LEVEL 2 SOLN	3	
ACTI-LANCE SPECIAL SAFETY LANCETS 17G	4	RX/OTC	AGAMATRIX CONTROL SOLUTION LEVEL 4 SOLN	3	
ACTI-LANCE SPECIAL SAFETYLANCETS 17G	4	RX/OTC	AGAMATRIX ULTRA-THIN LANCETS 33G	4	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
AIMSCO TWIST LANCETS 32G	4	RX/OTC	AUTOLET II CLINISAFE KIT	4	
AIMSCO TWIST LANCETS 33G	4	RX/OTC	AUTOLET IMPRESSION LANCING DEVICE MISC	4	
AMBI-TRAY MISC	4	RX/OTC	AUTOLET LANCING DEVICE MISC	4	
AQUALANCE LANCETS ULTRA THIN 30G	4	RX/OTC	AUTOLET LITE CLINISAFE KIT	4	
ASSURE 3 CONTROL LEVEL 1/2 LIQD	3		AUTOLET LITE STARTER PACK KIT	4	
ASSURE 4 CONTROL LEVEL 1/2 LIQD	3		AUTOLET MINI MISC	4	
ASSURE COMFORT LANCETS ULTRA THIN 28G	4	RX/OTC	AUTOLET PLATFORMS MISC	4	
ASSURE DOSE NORMAL/HIGH CONTROL SOLN	3		AUTOLET PLUS MISC	4	
ASSURE II CONTROL LEVEL 1/2 LIQD	3		BD MICROTAINER LANCETS	4	RX/OTC
ASSURE II CONTROL LEVEL 1 LIQD	3		BIGFOOT UNITY PEN CAP FOR ADMELOG MISC	4	RX/OTC
ASSURE LANCE LANCETS	4	RX/OTC	BIGFOOT UNITY PEN CAP FOR APIDRA MISC	4	RX/OTC
ASSURE LANCE LANCETS 21G	4	RX/OTC	BIGFOOT UNITY PEN CAP FOR ASPART MISC	4	RX/OTC
ASSURE LANCE PLUS SAFETYLANCETS 25G	4	RX/OTC	BIGFOOT UNITY PEN CAP FOR BASAGLAR MISC	4	RX/OTC
ASSURE LANCE PLUS SAFETYLANCETS 30G	4	RX/OTC	BIGFOOT UNITY PEN CAP FOR FIASP MISC	4	RX/OTC
ASSURE LANCE SAFETY LANCET 28G	4	RX/OTC	BIGFOOT UNITY PEN CAP FOR HUMALOG MISC	4	RX/OTC
ASSURE PRISM CONTROL LEVEL 1/2 SOLN	3		BIGFOOT UNITY PEN CAP FOR LANTUS MISC	4	RX/OTC
ASSURE PRO CONTROL LEVEL 1/2 LIQD	3		BIGFOOT UNITY PEN CAP FOR LISPRO MISC	4	RX/OTC
AURORA LANCET SUPER THIN 30G	4	RX/OTC	BIGFOOT UNITY PEN CAP FOR LYUMJEV MISC	4	RX/OTC
AURORA LANCET THIN 23G	4	RX/OTC	BIGFOOT UNITY PEN CAP FOR NOVLOG MISC	4	RX/OTC
AUTO-LANCET MINI MISC	4				
AUTO-LANCET MISC	4				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
BIGFOOT UNITY PEN CAP FOR TOUJEO MAX MISC	4	RX/OTC	CHOSEN LANCING DEVICE MISC	4	
BIGFOOT UNITY PEN CAP FOR TOUJEO MISC	4	RX/OTC	CHOSEN SAFETY LANCETS 28G	4	RX/OTC
BIGFOOT UNITY PEN CAP FOR TRESIBA MISC	4	RX/OTC	CLEANLET LANCETS 28G	4	RX/OTC
BLULINK CONTROL SOLUTION/HIGH & LOW LIQD	3		CLEVER CHEK LANCETS ULTRATHIN	4	RX/OTC
CARDIOCOM LANCING DEVICE MISC	4		CLEVER CHEK LANCETS ULTRATHIN 30G	4	RX/OTC
CAREONE ADVANCED LANCINGDEVICE MISC	4		CLEVER CHOICE COMFORT EZLANCETS 21G	4	RX/OTC
CAREONE LANCET SUPER THIN/30G	4	RX/OTC	CLEVER CHOICE COMFORT EZLANCETS 23G	4	RX/OTC
CAREONE LANCET THIN	4	RX/OTC	CLEVER CHOICE COMFORT EZLANCETS 28G	4	RX/OTC
CARESENS CONTROL A SOLUTION SOLN	3		CLEVER CHOICE GLUCOSE CONTROL HIGH LIQD	3	
CARESENS CONTROL SOLUTION A/B SOLN	3		COAGUCHEK LANCETS	4	RX/OTC
CARESENS LANCETS	4	RX/OTC	COMFORT ASSURED LANCETS MICRO THIN 33G	4	RX/OTC
CARETOUCH CONTROL SOLUTION LEVEL 2 LIQD	3		COMFORT ASSURED LANCETS SUPER THIN 28G	4	RX/OTC
CARETOUCH LANCING DEVICEWITH EJECTOR MISC	4		COMFORT LANCETS	4	RX/OTC
CARETOUCH SAFETY LANCETS/26G	4	RX/OTC	COMFORT TOUCH LANCETS ULTRA THIN 31G	4	RX/OTC
CARETOUCH SAFETY LANCETS/28G	4	RX/OTC	COMFORT TOUCH PLUS SAFETY LANCETS PRESSURE ACTIVATED 28G	4	RX/OTC
CARETOUCH SAFETY LANCETS/30G	4	RX/OTC	COMFORT TOUCH PLUS SAFETY LANCETS PRESSURE ACTIVATED 30G	4	RX/OTC
CARETOUCH TWIST LANCETS 28G	4	RX/OTC	COMFORT TOUCH TWIST LANCETS 30G	4	RX/OTC
CARETOUCH TWIST LANCETS 30G	4	RX/OTC			
CARETOUCH TWIST LANCETS 33G	4	RX/OTC			
CARETOUCH TWIST LANCETS MULTI COLOR/30G	4	RX/OTC			
CHOSEN LANCETS 30G	4	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CONTOUR HIGH CONTROL LIQD	3		DROPLET LANCETS ULTRA THIN 30G	4	RX/OTC
COOL CONTROL SOLUTION A SOLN	3		DROPLET LANCING DEVICE MISC	4	
COOL CONTROL SOLUTION B SOLN	3		DROPLET PERSONAL LANCETS30G	4	RX/OTC
CVS LANCETS 21G	4	RX/OTC	DRUG MART ADJUSTABLE LANCING DEVICE MISC	4	
CVS LANCETS MICRO THIN 33G	4	RX/OTC	DRUG MART LANCETS THIN	4	RX/OTC
CVS LANCETS MICRO-THIN 33G	4	RX/OTC	DRUG MART ON-THE-GO LANCETS GENTLE 30G	4	RX/OTC
CVS LANCETS ORIGINAL	4	RX/OTC	DRUG MART UNILET LANCETSSUPER THIN 30G	4	RX/OTC
CVS LANCETS THIN 26G	4	RX/OTC	DRUG MART UNILET LANCETSULTRA THIN 28G	4	RX/OTC
CVS LANCETS ULTRA THIN 30G	4	RX/OTC	DRUG MART UNILET MICRO THIN LANCETS 33G	4	RX/OTC
CVS LANCETS ULTRA-THIN 30G	4	RX/OTC	DUO-CARE CONTROL SOLUTION LIQD	3	
CVS LANCING DEVICE MISC	4		EASY COMFORT LANCETS	4	RX/OTC
CVS ULTRA THIN LANCETS	4	RX/OTC	EASY COMFORT LANCETS 30G/PULL TOP	4	RX/OTC
DEXCOM G6 RECEIVER	4	PA	EASY COMFORT LANCETS 30G/THIN TOP	4	RX/OTC
DEXCOM G6 SENSOR	4	PA	EASY COMFORT LANCETS TWIST TOP	4	RX/OTC
DEXCOM G6 TRANSMITTER	4	PA	EASY MINI EJECT LANCING DEVICE MISC	4	
DEXCOM G7 RECEIVER	4	PA	EASY MINI LANCING DEVICE MISC	4	
DEXCOM G7 SENSOR	4	PA	EASY PLUS II CONTROL SOLUTION HIGH SOLN	3	
DIATHRIVE GLUCOSE CONTROL SOLUTION LIQD	3		EASY STEP CONTROL SOLUTION HIGH SOLN	3	
DIATHRIVE LANCETS	4	RX/OTC	EASY TALK CONTROL SOLUTION HIGH SOLN	3	
DIATHRIVE LANCETS ULTRA THIN 30G	4	RX/OTC			
DIATHRIVE LANCING DEVICE MISC	4				
DIATRUE GLUCOSE CONTROL SOLUTION LEVEL 3 SOLN	3				
DROPLET GENTEEL LANCING DEVICE MISC	4				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
EASY TALK PLUS II CONTROLHIGH SOLN	3		EASY TOUCH LANCETS 33G/TWIST	4	RX/OTC
EASY TOUCH CONTROL SOLUTION/HIGH & LOW SOLN	3		EASY TOUCH LANCING DEVICE/EJECTOR MISC	4	
EASY TOUCH INSULIN SYRINGE BARRELS LUER LOCK/1ML MISC	4	RX/OTC	EASY TOUCH SAFETY LANCETS21G/PRESSURE ACTIVATED	4	RX/OTC
EASY TOUCH LANCETS 21G/PRESSURE ACTIVATED	4	RX/OTC	EASY TOUCH SAFETY LANCETS23G/PRESSURE ACTIVATED	4	RX/OTC
EASY TOUCH LANCETS 23G/PRESSURE ACTIVATED	4	RX/OTC	EASY TOUCH SAFETY LANCETS26G/BUTTON ACTIVATED	4	RX/OTC
EASY TOUCH LANCETS 26G/PRESSURE ACTIVATED	4	RX/OTC	EASY TOUCH SAFETY LANCETS26G/PRESSURE ACTIVATED	4	RX/OTC
EASY TOUCH LANCETS 26G/PULL-TOP	4	RX/OTC	EASY TOUCH SAFETY LANCETS28G/BUTTON ACTIVATED	4	RX/OTC
EASY TOUCH LANCETS 28G/PRESSURE ACTIVATED	4	RX/OTC	EASY TOUCH SAFETY LANCETS28G/PRESSURE ACTIVATED	4	RX/OTC
EASY TOUCH LANCETS 28G/PULL-TOP	4	RX/OTC	EASY TRAK GLUCOSE CONTROL SOLUTION HIGH SOLN	3	
EASY TOUCH LANCETS 28G/TWIST	4	RX/OTC	EASYMAX 15 GLUCOSE CONTROL SOLUTION/LEVEL 2/LEVEL 3 LIQD	3	
EASY TOUCH LANCETS 30G/BUTTON-ACTIVATED	4	RX/OTC	EASYMAX 15 LEVEL 2 GLUCOSE CONTROL SOLUTION SOLN	3	
EASY TOUCH LANCETS 30G/PRESSURE ACTIVATED	4	RX/OTC	EASYMAX GLUCOSE CONTROL SOLUTION/NORMAL-HIGH LIQD	3	
EASY TOUCH LANCETS 30G/PULL-TOP	4	RX/OTC	ELEMENT COMPACT CONTROL SOLUTION LEVEL 2 SOLN	3	
EASY TOUCH LANCETS 30G/TWIST	4	RX/OTC	ELEMENT COMPACT CONTROL SOLUTION LEVEL 3 SOLN	3	
EASY TOUCH LANCETS 32G/PRESSURE ACTIVATED	4	RX/OTC	ELEMENT HIGH CONTROL LIQD	3	
EASY TOUCH LANCETS 32G/PULL-TOP	4	RX/OTC			
EASY TOUCH LANCETS 32G/TWIST	4	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
EMBRACE GLUCOSE CONTROL SOLUTION HIGH LIQD	3		E-Z JECT LANCETS COLOR	4	RX/OTC
EMBRACE LANCETS ULTRA THIN 30G	4	RX/OTC	E-Z JECT LANCETS SUPER THIN 30G	4	RX/OTC
EMBRACE LANCING DEVICE WITH EJECTOR MISC	4		E-Z JECT LANCETS THIN 26G	4	RX/OTC
EMBRACE PRESSURE ACTIVATED SAFETY LANCET/21G	4	RX/OTC	E-ZJECT LANCETS MICRO-THIN 33G	4	RX/OTC
EMBRACE PRESSURE ACTIVATED SAFETY LANCET/28G	4	RX/OTC	EZ-LETS LANCETS 21G	4	RX/OTC
EMBRACE PRO GLUCOSE CONTROL SOLUTION LIQD	3		EZ-LETS LANCETS 26G SUPER-SOFT	4	RX/OTC
EMBRACE TALK GLUCOSE CONTROL SOLUTION HIGH SOLN	3		EZ-LETS LANCETS 28G ULTRA-SOFT	4	RX/OTC
ENLITE GLUCOSE SENSOR	4	PA	EZ-LETS LANCETS 30G	4	RX/OTC
EQL COLOR LANCETS 21G	4	RX/OTC	FIFTY50 SAFETY SEAL LANCETS 30G	4	RX/OTC
EQL COLOR LANCETS MICRO THIN 33G	4	RX/OTC	FIFTY50 SAFETY SEAL LANCETS 32G	4	RX/OTC
EQL SUPER THIN LANCETS 30G	4	RX/OTC	FIFTY50 UNILET LANCETS 33G	4	RX/OTC
EQL THIN LANCETS 26G	4	RX/OTC	FINE 30	4	RX/OTC
EVERSENSE 365 SENSOR/HOLDER	4	PA	FINGERSTIX LANCETS	4	RX/OTC
EVERSENSE 365 SMART TRANSMITTER	4	PA	FORA CONTROL SOLUTION HIGH SOLN	3	
EVERSENSE E3 SENSOR/HOLDER	4	PA	FORA LANCETS	4	RX/OTC
EVERSENSE E3 SMART TRANSMITTER	4	PA	FORA LANCING DEVICE/CLEARCAP MISC	4	
EVERSENSE SENSOR/HOLDER	4	PA	FORA LANCING DEVICE MISC	4	
EVERSENSE SMART TRANSMITTER	4	PA	FORACARE GDH CONTROL SOLUTION HIGH SOLN	3	
E-Z JECT LANCETS	4	RX/OTC	FORTISCARE CONTROL SOLUTIONS HIGH SOLN	3	
E-Z JECT LANCETS 21G	4	RX/OTC	FREDS PHARMACY AUTOLET LANCING DEVICE MISC	4	
			FREDS PHARMACY UNILET LANCETS SUPER THIN 30G	4	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
FREDS PHARMACY UNILET LANCETS ULTRA THIN 28G	4	RX/OTC	GENTEEL CONTACT TIPS/BLUE MISC	4	
FREESTYLE CONTROL SOLUTION HIGH/LOW LIQD	3		GENTEEL CONTACT TIPS/CLEAR MISC	4	
FREESTYLE CONTROL SOLUTION LIQD	3		GENTEEL CONTACT TIPS/GREEN MISC	4	
FREESTYLE LANCETS	4	RX/OTC	GENTEEL CONTACT TIPS/ORANGE MISC	4	
FREESTYLE LIBRE 14 DAY/READER/FLASH MONITORING SYSTEM	4	PA	GENTEEL CONTACT TIPS/RAINBOW MISC	4	
FREESTYLE LIBRE 14 DAY/SENSOR/FLASH MONITORING SYSTEM	4	PA	GENTEEL CONTACT TIPS/VIOLET MISC	4	
FREESTYLE LIBRE 2 PLUS/SENOSR/FLASH GLUCOSE MONITOR SYSTEM	4	PA	GENTEEL CONTACT TIPS/YELLOW MISC	4	
FREESTYLE LIBRE 2/READER/FLASH GLUCOSE MONITORING SYSTEM	4	PA	GENTEEL LANCING KIT/BUTTERFLY BLUE KIT	4	
FREESTYLE LIBRE 2/SENSOR/FLASH GLUCOSE MONITORING SYSTEM	4	PA	GENTEEL NOZZLES MISC	4	
FREESTYLE LIBRE 3 PLUS/SENSOR/GLUCOSE MONITORING SYSTEM	4	PA	GENTEEL PLUS LANCING DEVICE/BUFF BLACK MISC	4	
FREESTYLE LIBRE 3/READER/GLUCOSE MONITORING SYSTEM	4	PA	GENTEEL PLUS LANCING DEVICE/BUTTERFLY BLUE MISC	4	
FREESTYLE LIBRE 3/SENSOR/GLUCOSE MONITORING SYSTEM	4	PA	GENTEEL PLUS LANCING DEVICE/PLAYFUL PURPLE MISC	4	
FREESTYLE LIBRE/READER/FLASH MONITORING SYSTEM	4	PA	GENTEEL PLUS LANCING DEVICE/PRINCESS PINK MISC	4	
FREESTYLE UNISTICK II LANCETS	4	RX/OTC	GENTEEL PLUS LANCING DEVICE/WILLOWY WHITE MISC	4	
GENTEEL BUTTERFLY TOUCH LANCETS	4	RX/OTC	GENTLE-LET GP LANCETS	4	RX/OTC
			GENTLE-LET LANCETS GENERAL PURPOSE STYLE/FINE POINT	4	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
GENTLE-LET LANCETS GENERAL PURPOSE STYLE/MEDIUM POINT	4	RX/OTC	GNP EASY TOUCH CONTROL SOLUTION HIGH/LOW SOLN	3	
GENTLE-LET LANCETS SAFETY STYLE/FINE POINT	4	RX/OTC	GNP LANCETS 21G	4	RX/OTC
GENTLE-LET LANCETS SAFETY STYLE/MEDIUM POINT	4	RX/OTC	GNP LANCETS THIN 26G	4	RX/OTC
GENTLE-LET PLATFORMS 2.4MM MISC	4		GNP LANCING SYSTEM DEVICE MISC	4	
GENTLE-LET PLATFORMS 3.0MM MISC	4		GNP STERILE LANCETS 28G	4	RX/OTC
GLOBAL INJECT EASE LANCETS 28G	4	RX/OTC	GNP STERILE LANCETS 30G	4	RX/OTC
GLOBAL INJECT EASE LANCETS 30G	4	RX/OTC	GNP STERILE LANCETS 33G	4	RX/OTC
GLOBAL LANCING DEVICE MISC	4		GOJJI LANCING DEVICE/CLEAR CAP MISC	4	
GLUCOCARD 01 CONTROL SOLUTION NORMAL/HIGH LIQD	3		GOJJI STERILE LANCETS 30G	4	RX/OTC
GLUCOCARD EXPRESSION CONTROL SOLUTION LEVEL 1 SOLN	3		GOODSENSE COLOR LANCETS MICRO-THIN 33G UNIVERSAL	4	RX/OTC
GLUCOCARD SHINE CONTROL SOLUTION LEVEL 1 SOLN	3		GOODSENSE LANCETS MICRO-THIN 33G	4	RX/OTC
GLUCOCOM HIGH CONTROL LIQD	3		GOODSENSE LANCETS MICRO-THIN 33G UNIVERSAL	4	RX/OTC
GLUCOCOM LANCETS 28G	4	RX/OTC	GOODSENSE LANCETS ULTRA-THIN 26G UNIVERSAL	4	RX/OTC
GLUCOCOM LANCETS 30G	4	RX/OTC	GOODSENSE LANCETS ULTRA-THIN 30G	4	RX/OTC
GLUCOCOM LANCETS 33G	4	RX/OTC	GOODSENSE LANCETS ULTRA-THIN 30G UNIVERSAL	4	RX/OTC
GLUCOSE CONTROL SOLUTION SOLN	3		GOODSENSE LANCING DEVICE MISC	4	
GNP EASY TOUCH CONTROL SOLUTION HIGH & LOW LIQD	3		GUARDIAN 4 GLUCOSE SENSOR	4	PA
			GUARDIAN 4 TRANSMITTER KIT	4	PA
			GUARDIAN CONNECT TRANSMITTER	4	PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
GUARDIAN CONNECT TRANSMITTER KIT	4	PA	H-E-B INCONTROL LANCETS SUPER THIN 30G	4	RX/OTC
GUARDIAN LINK 3 TRANSMITTER KIT	4	PA	H-E-B INCONTROL LANCETS ULTRA THIN 28G	4	RX/OTC
GUARDIAN REAL-TIME CHARGER REPLACEMENT MISC	4	PA; RX/OTC	HYPOLANCE AST LANCING KIT KIT	4	
GUARDIAN REAL-TIME REPLACEMENT MONITOR PEDIATRIC	4	PA	HY-VEE LANCETS	4	RX/OTC
GUARDIAN REAL-TIME TEST PLUG REPLACEMENT MISC	4	PA; RX/OTC	HY-VEE THIN LANCETS	4	RX/OTC
GUARDIAN SENSOR (3)	4	PA	IHEALTH CONTROL SOLUTION LIQD	3	
GUARDIAN SENSOR 3	4	PA	IHEALTH LANCING DEVICE MISC	4	
HAEMOLANCE	4	RX/OTC	IN TOUCH GLUCOSE CONTROL SOLUTION SOLN	3	
HAEMOLANCE LOW FLOW LANCETS	4	RX/OTC	IN TOUCH LANCING DEVICE MISC	4	
HAEMOLANCE PLUS	4	RX/OTC	IN TOUCH STERILE LANCETS 30G	4	RX/OTC
HAEMOLANCE PLUS HIGH FLOW	4	RX/OTC	INFINITY CONTROL SOLUTION HIGH SOLN	3	
HAEMOLANCE PLUS LOW FLOW	4	RX/OTC	INSUL-CAP MISC	4	RX/OTC
HAEMOLANCE PLUS MAX FLOW	4	RX/OTC	INSUL-EZE MISC	4	RX/OTC
HAEMOLANCE PLUS PEDIATRIC FLOW	4	RX/OTC	KINNEY LANCETS	4	RX/OTC
HEALTH CARE LANCING DEVICE MISC	4		KINNEY THIN LANCETS	4	RX/OTC
HEALTHY ACCENTS AUTOLET IMPRESSION LANCING DEVICE MISC	4		KROGER AUTOLET LANCING DEVICE MISC	4	
HEALTHY ACCENTS UNILET LANCETS SUPER THIN 30G	4	RX/OTC	KROGER HEALTHPRO GLUCOSE CONTROL SOLUTION/HIGH/LOW LIQD	3	
H-E-B INCONTROL ADVANCED LANCING DEVICE MISC	4		KROGER HEALTHPRO TWIST LANCETS/26G	4	RX/OTC
H-E-B INCONTROL LANCETS MICRO THIN 33G	4	RX/OTC	KROGER LANCETS	4	RX/OTC
			KROGER LANCETS 21G	4	RX/OTC
			KROGER LANCETS MICRO THIN 33G	4	RX/OTC
			KROGER LANCETS SUPER THIN	4	RX/OTC
			KROGER LANCETS THIN	4	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
KROGER LANCETS THIN 26G	4	RX/OTC	LIBERTY MINI LANCING DEVICE MISC	4	
KROGER LANCETS ULTRATHIN30G	4	RX/OTC	LITE TOUCH LANCETS	4	RX/OTC
KROGER LANCING DEVICE MISC	4		LITE TOUCH LANCING PEN MISC	4	
LANCET DEVICE ADJUSTABLE MISC	4		LITETOUCH LANCETS MICRO THIN 33G	4	RX/OTC
LANCET DEVICE WITH EJECTOR MISC	4		LIVE BETTER ADVANCED LANCING DEVICE MISC	4	
LANCET TRANSPORTER CASE MISC	4		LIVE BETTER LANCET SUPERTHIN 30G	4	RX/OTC
LANCETS	4	RX/OTC	LIVE BETTER LANCET ULTRATHIN 28G	4	RX/OTC
LANCETS 30G	4	RX/OTC	LONGS LANCETS STANDARD	4	RX/OTC
LANCETS 30G TWIST TOP	4	RX/OTC	LONGS LANCETS THIN	4	RX/OTC
LANCETS 30G/TWIST TOP	4	RX/OTC	LONGS LANCETS ULTRA THIN	4	RX/OTC
LANCETS 33G EXTRA FINE	4	RX/OTC	MEDICHOICE PRE-SET SAFETY LANCET DUAL USE	4	RX/OTC
LANCETS 33G UNIVERSAL DESIGN	4	RX/OTC	MEDICHOICE PRE-SET SAFETY LANCET LOW FLOW	4	RX/OTC
LANCETS MICRO THIN 33G	4	RX/OTC	MEDICHOICE PRE-SET SAFETY LANCET MEDIUM FLOW	4	RX/OTC
LANCETS SUPER THIN 28G	4	RX/OTC	MEDICHOICE PRE-SET SAFETY LANCET MODERATE FLOW	4	RX/OTC
LANCETS THIN	4	RX/OTC	MEDICHOICE SAFETY LANCETEXTRA	4	RX/OTC
LANCETS ULTRA THIN	4	RX/OTC	MEDICHOICE SAFETY LANCETNORMAL	4	RX/OTC
LANCETS ULTRA THIN 30G	4	RX/OTC	MEDISENSE GLUCOSE KETONECONTROL SOLUTION 1-NORMAL LIQD	3	
LANCING DEVICE MISC	4		MEDISENSE HIGH/MID/LOW CONTROL SOLUTION LIQD	3	
LANZO MISC	4				
LEADER ADVANCED LANCING DEVICE MISC	4				
LIBERTY CONTROL SOLUTION HIGH SOLN	3				
LIBERTY GLUCOSE CONTROL MID SOLN	3				
LIBERTY MEDICAL LANCETS 30G	4	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MEDLANCE PLUS EXTRA LANCETS 21G	4	RX/OTC	MINI LANCING DEVICE MISC	4	
MEDLANCE PLUS LANCETS	4	RX/OTC	MINILINK REAL-TIME TRANSMITTER	4	PA
MEDLANCE PLUS LANCETS LITE 25G	4	RX/OTC	MINIMED 630G GUARDIAN PRESS STARTER TRANSMITTER KIT	4	PA
MEDLANCE PLUS LITE LANCETS 25G	4	RX/OTC	MM LANCING DEVICE MISC	4	
MEDLANCE PLUS SPECIAL LANCETS 0.8MM	4	RX/OTC	MM TWIST LANCETS	4	RX/OTC
MEDLANCE PLUS SUPERLITE 30G	4	RX/OTC	MONOLET LANCETS	4	RX/OTC
MEDLANCE PLUS SUPERLITE 30G/COMFORT MAX	4	RX/OTC	MONOLET OPD LANCETS	4	RX/OTC
MEDLANCE PLUS UNIVERSAL LANCETS 21G	4	RX/OTC	MONOLETTOR SAFETY LANCETS	4	RX/OTC
MEDLANCE PLUS/LITE 25G	4	RX/OTC	MPD SAFETY LANCET 21G/1.8MM	4	RX/OTC
MEDLANCE/EXTRA	4	RX/OTC	MPD SAFETY LANCET 28G/1.8MM	4	RX/OTC
MEDLANCE/LITE	4	RX/OTC	MPD SAFETY LANCET 30G/1.8MM	4	RX/OTC
MEDLANCE/UNIVERSAL	4	RX/OTC	MPD SAFETY LANCETS 23G/1.8MM	4	RX/OTC
MEIJER COLOR LANCETS UNIVERSAL 33G	4	RX/OTC	MULTI-LANCET DEVICE 2 KIT	4	
MEIJER LANCETS	4	RX/OTC	MULTI-LANCET DEVICE MISC	4	
MEIJER LANCETS THIN	4	RX/OTC	MYGLUCOHEALTH CONTROL LOW/NORMAL/HIGH SOLN	3	
MEIJER LANCETS UNIVERSAL21G	4	RX/OTC	MYGLUCOHEALTH MGH SOFTLANCE LANCETS 30G	4	RX/OTC
MEIJER LANCETS UNIVERSAL30G	4	RX/OTC	NEUTEK 2TEK CONTROL SOLUTIONS SOLN	3	
MEIJER LANCETS UNIVERSAL33G	4	RX/OTC	NOVA MAX PLUS GLU/KET CONTROL SOLUTION-MID LIQD	3	
MEIJER SUPER THIN LANCETS	4	RX/OTC	NOVA SAFETY LANCETS 23G	4	RX/OTC
MICRODOT CONTROL SOLUTIONHIGH/LOW SOLN	3				
MICROLET LANCETS	4	RX/OTC			
MICROLET NEXT MISC	4				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
NOVA SAFETY LANCETS 28G	4	RX/OTC	ONETOUCH VERIO LEVEL 3 CONTROL SOLUTION LIQD	3	
NOVA SUREFLEX LANCETS	4	RX/OTC	ONETOUCH VERIO LEVEL 4 CONTROL SOLUTION LIQD	3	
NOVA SUREFLEX LANCING DEVICE MISC	4		OVAL TAPE MISC	4	PA; RX/OTC
OMNIPOD 5 DEXCOM G7G6 INTRO KIT (GEN 5) KIT	4	PA	PARADIGM REAL-TIME TRANSMITTER	4	PA
OMNIPOD 5 DEXCOM G7G6 PODS (GEN 5) MISC	4	PA	PC LANCETS SUPER THIN 30G	4	RX/OTC
OMNIPOD 5 LIBRE2 PLUS G6 KIT	4	PA	PERFECT LANCETS 30G	4	RX/OTC
OMNIPOD 5 LIBRE2 PLUS G6PODS MISC	4	PA	PERFECT POINT SAFETY LANCETS/28G	4	RX/OTC
OMNIPOD DASH PODS (GEN 4) MISC	4	PA	PERFECT POINT SAFETY LANCETS/30G	4	RX/OTC
ONETOUCH DELICA PLUS LANCETS EXTRA FINE 33G	4	RX/OTC	PERFECT PRESSURE ACTIVATED SAFETY LANCETS 28G	4	RX/OTC
ONETOUCH DELICA PLUS LANCETS FINE 30G	4	RX/OTC	PHARMACIST CHOICE SELECTLANCETS/ULTRA THIN	4	RX/OTC
ONETOUCH DELICA PLUS LANCING DEVICE MISC	4		PHARMACIST CHOICE ULTRA THIN LANCETS	4	RX/OTC
ONETOUCH DELICA SAFETY LANCING DEVICE	4	RX/OTC	PHARMACIST CHOICE ULTRA THIN LANCETS 28G	4	RX/OTC
ONETOUCH DELICA SAFETY LANCING DEVICE 30G	4	RX/OTC	PHARMACIST CHOICE ULTRA THIN LANCETS 30G	4	RX/OTC
ONETOUCH ULTRA CONTROL SOLUTION LIQD	3		PHARMACIST CHOICE ULTRA THIN LANCETS 31G	4	RX/OTC
ONETOUCH ULTRA CONTROL LIQD	3		PHARMACIST CHOICE ULTRA THIN LANCETS 33G	4	RX/OTC
ONETOUCH ULTRASOFT 2 LANCETS FINE 30G	4	RX/OTC	PHARMACY COUNTER LANCETS	4	RX/OTC
ONETOUCH ULTRASOFT LANCETS	4	RX/OTC	PIP GLUCOSE CONTROL SOLUTION LIQD	3	
			PIP LANCETS/28G	4	RX/OTC
			PIP LANCETS/30G	4	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
POCKETCHEM EZ CONTROL LEVEL 1 SOLN	3		PSS SELECT SAFETY LANCETS	4	RX/OTC
PRECISION GLUCOSE KETONECONTROL SOLUTION 1-LOW, 1-HIGH LIQD	3		PURE COMFORT LANCETS 30G	4	RX/OTC
PRECISION THINS GP LANCET	4	RX/OTC	PX ADVANCED LANCING DEVICE MISC	4	
PREFERRED PLUS LANCETS COLORED 21G	4	RX/OTC	PX LANCET AUTO INJECTOR MISC	4	
PREFERRED PLUS LANCETS SUPER THIN 30G	4	RX/OTC	PX LANCETS MICROTHIN 33G	4	RX/OTC
PREFERRED PLUS LANCETS THIN 26G	4	RX/OTC	PX LANCETS ULTRA THIN	4	RX/OTC
PRO COMFORT LANCETS 30G	4	RX/OTC	PX LANCETS ULTRA THIN 28G	4	RX/OTC
PRO COMFORT LANCETS 31G	4	RX/OTC	QC ADVANCED LANCING DEVICE MISC	4	
PRO COMFORT SAFETY LANCETS 30G PRESSURE ACTIVATED	4	RX/OTC	QC LANCETS SUPER THIN	4	RX/OTC
PRODIGY CONTROL SOLUTIONHIGH SOLN	3		QC LANCETS ULTRA THIN	4	RX/OTC
PRODIGY CONTROL SOLUTIONLOW SOLN	4	QL(1 ea per 30 day(s) retail)	QC UNILET LANCETS 28G/ULTRA THIN	4	RX/OTC
PRODIGY COUNT-A-DOSE MISC	4	RX/OTC	QC UNILET LANCETS 33G/MICRO THIN	4	RX/OTC
PRODIGY LANCING DEVICE MISC	4		QUICKTEK CONTROL SOLUTION LIQD	3	
PRODIGY PRESSURE ACTIVATED SAFETY LANCETS	4	RX/OTC	QUINTET GLUCOSE CONTROL/HIGH/NORMAL SOLN	3	
PRODIGY SAFETY LANCETS	4	RX/OTC	RA E-ZJECT LANCETS 28G	4	RX/OTC
PRODIGY TWIST TOP LANCETS	4	RX/OTC	RA E-ZJECT LANCETS THIN 26G	4	RX/OTC
PSS SELECT GP LANCETS	4	RX/OTC	RA E-ZJECT LANCETS THIN 28G	4	RX/OTC
PSS SELECT PLATFORMS MISC	4		RA E-ZJECT LANCETS ULTRATHIN 30G	4	RX/OTC
			READYLANCE SAFETY LANCETS/21G/2.2MM	4	RX/OTC
			READYLANCE SAFETY LANCETS/23G/1.8MM	4	RX/OTC
			READYLANCE SAFETY LANCETS/26G/1.8MM	4	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
READYLANCE SAFETY LANCETS/28G/1.8MM	4	RX/OTC	RIGHTEST GL300 LANCETS	4	RX/OTC
READYLANCE SAFETY LANCETS/30G/1.6MM	4	RX/OTC	SAFE-T-LANCE LOW FLOW 25G	4	RX/OTC
REALITY LANCETS	4	RX/OTC	SAFE-T-LANCE NORMAL FLOW21G	4	RX/OTC
REALITY TRIGGER LANCETS	4	RX/OTC	SAFE-T-LANCE PLUS SAFETYLANCET HIGH FLOW	4	RX/OTC
REFUAH PLUS GLUCOSE CONTROL SOLUTION SOLN	3		SAFE-T-LANCE PLUS SAFETYLANCET LOW FLOW	4	RX/OTC
RELION 2-IN-1 LANCET DEVICES 30G	4	RX/OTC	SAFE-T-LANCE PLUS SAFETYLANCET NORMAL FLOW	4	RX/OTC
RELION 2-IN-1 LANCING DEVICE 25G	4	RX/OTC	SAFETY LANCET 30G/PRESSURE ACTIVATED	4	RX/OTC
RELION 2-IN-1 LANCING DEVICE 30G	4	RX/OTC	SAFETY LANCETS	4	RX/OTC
RELION LANCETS MICRO-THIN33G	4	RX/OTC	SAFETY LANCETS 21G	4	RX/OTC
RELION LANCETS THIN 26G	4	RX/OTC	SAFETY LANCETS 23G	4	RX/OTC
RELION LANCETS ULTRA-THIN30G	4	RX/OTC	SAFETY LANCETS 28G	4	RX/OTC
RELION LANCING DEVICE KIT	4		SAFETY LANCETS/PRESSURE ACTIVATED/28G	4	RX/OTC
RELION LANCING DEVICE MISC	4		SAPS HEALTH CARE TWIST TOP LANCETS	4	RX/OTC
RELION ULTRA THIN LANCETS/30G	4	RX/OTC	SAPS HEALTH PLUS TWIST TOP LANCETS 30G	4	RX/OTC
RELION ULTRA THIN LANCETS30G	4	RX/OTC	SAPS HEALTH TWIST TOP LANCETS 30G	4	RX/OTC
RELION ULTRA THIN PLUS LANCETS 32G	4	RX/OTC	SAPSCARE TWIST TOP LANCETS 30G	4	RX/OTC
RELION ULTRA THIN PLUS LANCETS 33G	4	RX/OTC	SB LANCETS THIN	4	RX/OTC
REXALL LANCETS ULTRA THIN	4	RX/OTC	SB LANCETS ULTRA THIN	4	RX/OTC
RIGHTEST GC300 HIGH CONTROL LIQD	3		SELECT-LITE DEVICE/LANCETS KIT	4	
RIGHTEST GD500 LANCING DEVICE MISC	4		SELECT-LITE LANCING DEVICE MISC	4	
RIGHTEST GD-L500 ALTERNATE SITE ADAPTER MISC	4		SHOPKO AUTOLET LANCING DEVICE MISC	4	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SHOPKO ON-THE-GO COMFORTLANCETS 30G	4	RX/OTC	SOLUS V2 TWIST LANCETS 30G	4	RX/OTC
SHOPKO UNILET LANCETS SUPER THIN 30G	4	RX/OTC	STERILANCE TL	4	RX/OTC
SHOPKO UNILET LANCETS ULTRA THIN 28G	4	RX/OTC	SUPER THIN LANCETS	4	RX/OTC
SIMPLE DIAGNOSTICS LANCING DEVICE MISC	4		SUPREME II HIGH/LOW CONTROL SOLUTION LIQD	3	
SINGLE-LET	4	RX/OTC	SURE COMFORT LANCETS 18G	4	RX/OTC
SM MICRO THIN LANCETS 33G	4	RX/OTC	SURE COMFORT LANCETS 21G	4	RX/OTC
SM TRUEDRAW LANCING DEVICE MISC	4		SURE COMFORT LANCETS 23G	4	RX/OTC
SMART DIABETES VANTAGE LANCING DEVICE MISC	4		SURE COMFORT LANCETS 28G	4	RX/OTC
SMART SENSE COLOR LANCETS UNIVERSAL 33G	4	RX/OTC	SURE COMFORT LANCETS 30G	4	RX/OTC
SMART SENSE STANDARD LANCETS UNIVERSAL 21G	4	RX/OTC	SURE COMFORT LANCING PEN MISC	4	
SMART SENSE SUPER THIN LANCETS UNIVERSAL 30G	4	RX/OTC	SURELITE LANCETS	4	RX/OTC
SMART SENSE THIN LANCETSUNIVERSAL 26G	4	RX/OTC	TECHLITE AST LANCETS	4	RX/OTC
SMARTEST CONTROL SOLUTIONMEDIUM SOLN	3		TECHLITE LANCETS	4	RX/OTC
SMARTEST LANCETS 28G	4	RX/OTC	TECHLITE LANCETS 26G	4	RX/OTC
SOF-SENSOR	4	PA	TGT LANCET MICRO THIN 33G	4	RX/OTC
SOLUS V2 CONTROL HIGH SOLN	3		TGT LANCET THIN 26G	4	RX/OTC
SOLUS V2 LANCING DEVICE MISC	4		TGT LANCET ULTRA THIN 30G	4	RX/OTC
SOLUS V2 PRESSURE ACTIVATED SAFETY LANCETS 28G	4	RX/OTC	TGT LANCING DEVICE MISC	4	
			THINLETS GP LANCETS	4	RX/OTC
			TODAYS HEALTH ADVANCED LANCING DEVICE MISC	4	
			TODAYS HEALTH SUPER THINLANCETS 30G	4	RX/OTC
			TODAYS HEALTH ULTRA THINLANCETS 28G	4	RX/OTC
			TOPCARE LANCETS MICRO-THIN 33G	4	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TRAVEL LANCETS 30G	4	RX/OTC	ULTILET SAFETY LANCETS 21G X 2.2MM	4	RX/OTC
TRAVEL LANCETS ADVANCED 28G	4	RX/OTC	ULTILET SAFETY LANCETS 23G	4	RX/OTC
TRUE COMFORT SAFETY LANCETS/30G	4	RX/OTC	ULTRA THIN LANCETS 31G	4	RX/OTC
TRUE COMFORT TWIST TOP LANCETS 30G	4	RX/OTC	ULTRA-CARE LANCETS 30G	4	RX/OTC
TRUE METRIX CONTROL SOLUTION LEVEL 3 SOLN	3		ULTRA-THIN II AUTO LANCET	4	RX/OTC
TRUECONTROL GLUCOSE CONTROL LEVEL 0 LIQD	3		ULTRA-THIN II LANCETS 28G	4	RX/OTC
TRUECONTROL GLUCOSE CONTROL LEVEL 1 LIQD	3		ULTRA-THIN II LANCETS 30G	4	RX/OTC
TRUEDRAW LANCING DEVICE MISC	4		UNILET COMFORTOUCH LANCET	4	RX/OTC
TRUEPLUS LANCETS 26G	4	RX/OTC	UNILET EXCELITE	4	RX/OTC
TRUEPLUS LANCETS 28G	4	RX/OTC	UNILET EXCELITE II	4	RX/OTC
TRUEPLUS LANCETS 28G SUPER THIN	4	RX/OTC	UNILET G.P. LANCET	4	RX/OTC
TRUEPLUS LANCETS 30G	4	RX/OTC	UNILET G.P. SUPERLITE LANCET	4	RX/OTC
TRUEPLUS LANCETS 30G ULTRA THIN	4	RX/OTC	UNILET GP 28 ULTRA THIN	4	RX/OTC
TRUEPLUS LANCETS 30G	4	RX/OTC	UNILET LANCET	4	RX/OTC
TRUEPLUS LANCETS 33G	4	RX/OTC	UNILET LANCETS MICRO-THIN33G	4	RX/OTC
TRUEPLUS LANCETS 33G MICRO THIN	4	RX/OTC	UNILET LANCETS SUPER-THIN30G	4	RX/OTC
TRUEPLUS SAFETY LANCETS 28G	4	RX/OTC	UNILET LANCETS ULTRA-THIN 28G	4	RX/OTC
TWIST TOP LANCETS 30G	4	RX/OTC	UNILET SUPERLITE LANCET	4	RX/OTC
ULTI-LANCE AUTOMATIC/ CLEAR TIP MISC	4		UNISTIK 1	4	RX/OTC
ULTILET CLASSIC LANCETS	4	RX/OTC	UNISTIK 2	4	RX/OTC
ULTILET LANCETS	4	RX/OTC	UNISTIK 2 COMFORT	4	RX/OTC
ULTILET LANCETS 33G	4	RX/OTC	UNISTIK 2 EXTRA	4	RX/OTC
			UNISTIK 2 NEONATAL	4	RX/OTC
			UNISTIK 2 NORMAL	4	RX/OTC
			UNISTIK 2 SUPER	4	RX/OTC
			UNISTIK 3	4	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
UNISTIK 3 COMFORT	4	RX/OTC	VALUE PLUS LANCETS SUPERTHIN 30G	4	RX/OTC
UNISTIK 3 EXTRA	4	RX/OTC	VALUE PLUS LANCETS THIN 26G	4	RX/OTC
UNISTIK 3 EXTRA SINGLE USE SAFETY LANCETS/21G	4	RX/OTC	VALUE PLUS LANCING DEVICE MISC	4	
UNISTIK 3 GENTLE	4	RX/OTC	VALUMARK LANCET SUPER THIN 30G	4	RX/OTC
UNISTIK 3 NEONATAL	4	RX/OTC	VALUMARK LANCET ULTRA THIN 28G	4	RX/OTC
UNISTIK 3 NORMAL	4	RX/OTC	VERASENS GLUCOSE CONTROLLEVEL 1 LIQD	3	
UNISTIK CZT COMFORT	4	RX/OTC	VERIFINE SAFETY LANCET MINI 21G X 2.4MM	4	RX/OTC
UNISTIK CZT NORMAL	4	RX/OTC	VERIFINE SAFETY LANCET MINI 23G X 1.8MM	4	RX/OTC
UNISTIK NORMAL	4	RX/OTC	VERIFINE SAFETY LANCET MINI 28G X 1.8MM	4	RX/OTC
UNISTIK PRO SAFETY LANCET 21G	4	RX/OTC	VERIFINE SAFETY LANCET MINI 30G X 1.8MM	4	RX/OTC
UNISTIK PRO SAFETY LANCET 25G	4	RX/OTC	VERIFINE UNIVERSAL LANCETS 28G	4	RX/OTC
UNISTIK PRO SAFETY LANCET 28G	4	RX/OTC	VERIFINE UNIVERSAL LANCETS 30G	4	RX/OTC
UNISTIK SAFETY LANCETS 28G	4	RX/OTC	VERIFINE UNIVERSAL LANCETS 33G	4	RX/OTC
UNISTIK SAFETY LANCETS 30G	4	RX/OTC	VIDA MIA AUTOLET LANCINGDEVICE MISC	4	
UNISTIK TOUCH SAFETY LANCETS 21G	4	RX/OTC	VIDA MIA UNILET LANCETS SUPER THIN 30G	4	RX/OTC
UNISTIK TOUCH SAFETY LANCETS 23G	4	RX/OTC	VIDA MIA UNILET LANCETS ULTRA THIN 28G	4	RX/OTC
UNISTIK TOUCH SAFETY LANCETS 28G	4	RX/OTC	VIVAGUARD INO CONTROL SOLUTION LIQD	3	
UNISTIK TOUCH SAFETY LANCETS 30G	4	RX/OTC	VIVAGUARD LANCETS	4	RX/OTC
UNISTRIP CONTROL SOLUTIONHIGH SOLN	3				
UNIVERSAL 1 LANCETS THIN26G	4	RX/OTC			
UNIVERSAL 1 LANCETS ULTRA THIN 30G	4	RX/OTC			
UNIVERSAL 1 LANCETS/33G/MICRO-THIN	4	RX/OTC			
VALUE PLUS LANCETS STANDARD 21G	4	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
VIVAGUARD LANCETS 30G	4	RX/OTC	CARETOUCH ALCOHOL PREP PADS	4	RX/OTC
VIVAGUARD LANCING DEVICE MISC	4		COMFORT TOUCH ALCOHOL PREP PADS	4	RX/OTC
VIVAGUARD SAFETY LANCETS/28G	4	RX/OTC	CURITY ALCOHOL PREPS/MEDIUM 2 PLY	4	RX/OTC
VIVAGUARD SAFETY LANCETS28G	4	RX/OTC	CVS ALCOHOL PREP PADS	4	RX/OTC
VIVI CAP1 MISC	4	RX/OTC	CVS PREP PADS	4	RX/OTC
VIVI CAP MISC	4	RX/OTC	DROPSAFE ALCOHOL PREP PADS	4	RX/OTC
WALGREENS ADVANCED TRAVELLANCETS 28G	4	RX/OTC	EASY COMFORT ALCOHOL PADS	4	RX/OTC
WALGREENS COMFORT ASSURED LANCETS MICRO THIN/33G	4	RX/OTC	EASY TOUCH ALCOHOL PREP PADS/MEDIUM	4	RX/OTC
WALGREENS COMFORT ASSURED LANCETS SUPER THIN/28G	4	RX/OTC	EQL ALCOHOL SWABS	4	RX/OTC
WALGREENS LANCETS	4	RX/OTC	FIFTY50 ALCOHOL PREP PADS	4	RX/OTC
WALGREENS THIN LANCETS	4	RX/OTC	GLOBAL ALCOHOL PREP EASEPADS	4	RX/OTC
WALGREENS ULTRA THIN LANCETS	4	RX/OTC	GNP ALCOHOL SWABS	4	RX/OTC
ZEV RX TWIST TOP LANCETS 30G	4	RX/OTC	H-E-B INCONTROL ALCOHOL PADS	4	RX/OTC
Misc. Devices			HM STERILE ALCOHOL PREP PADS	4	RX/OTC
ADVOCATE ALCOHOL PREP PADS	4	RX/OTC	MEIJER ALCOHOL SWABS EXTRA-THICK	4	RX/OTC
ALCOH-GLOVE CONTOURED WIPE	4	RX/OTC	PHARMACIST CHOICE ALCOHOL PRED PADS	4	RX/OTC
ALCOHOL PADS	4	RX/OTC	PHARMACIST CHOICE ALCOHOL PREP PADS	4	RX/OTC
ALCOHOL PREP PAD	4	RX/OTC	PRO COMFORT ALCOHOL PADS	4	RX/OTC
ALCOHOL PREP PADS	4	RX/OTC	PURE COMFORT ALCOHOL PREPPADS	4	RX/OTC
ALCOHOL PREPS	4	RX/OTC	QC ALCOHOL SWABS	4	RX/OTC
ALCOHOL SWABS	4	RX/OTC	RA ALCOHOL SWABS	4	RX/OTC
ALCOHOL SWABSTICKS	4	RX/OTC	REALITY SWABS	4	RX/OTC
AUM ALCOHOL PREP PADS	4	RX/OTC	RELION ALCOHOL SWABS	4	RX/OTC
BD SWABS SINGLE USE	4	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SAPS CARE ALCOHOL PREP PADS	4	RX/OTC	1ST TIER UNIFINE PENTIPS32GX6MM	4	
SAPS HEALTH ALCOHOL PREPPADS	4	RX/OTC	1ST TIER UNIFINE PENTIPS33GX4MM	4	
SAPS HEALTH CARE ALCOHOLPREP PADS	4	RX/OTC	1ST TIER UNIFINE PENTIPSPLUS 31GX8MM	4	RX/OTC
SB ALCOHOL PREP PADS	4	RX/OTC	1ST TIER UNIFINE PENTIPSPLUS 32GX4MM	4	RX/OTC
SM ALCOHOL PREP PADS	4	RX/OTC	1ST TIER UNIFINE PENTIPSPLUS 33GX4MM	4	
SURE COMFORT ALCOHOL PREP PADS	4	RX/OTC	1ST TIER UNIFINE PENTIPSPLUS/MINI/31G X5MM	4	RX/OTC
TRUE COMFORT ALCOHOL PREP PADS	4	RX/OTC	1ST TIER UNIFINE PENTIPSPLUS/ORIGINAL /29GX12MM	4	RX/OTC
TRUE COMFORT PRO ALCOHOLPREP PADS	4	RX/OTC	1ST TIER UNIFINE PENTIPSPLUS/ULTRA SHORT/31GX6MM	4	RX/OTC
ULTICARE ALCOHOL SWABS	4	RX/OTC	ABOUTTIME PEN NEEDLE 32GX 5/32"	4	RX/OTC
ULTILET ALCOHOL SWABS	4	RX/OTC	ABOUTTIME PEN NEEDLES 30GX 5/16"	4	
ULTRA-CARE ALCOHOL PREP PADS	4	RX/OTC	ABOUTTIME PEN NEEDLES 31G X 3/16"	4	RX/OTC
WEBCOL ALCOHOL PREP LARGE 1 PLY	4	RX/OTC	ABOUTTIME PEN NEEDLES 31G X 5/16"	4	RX/OTC
WEBCOL ALCOHOL PREP LARGE 2 PLY	4	RX/OTC	ADVOCATE INSULIN PEN NEEDLE/32GX4MM	4	RX/OTC
WEBCOL ALCOHOL PREP MEDIUM 2 PLY	4	RX/OTC	ADVOCATE INSULIN PEN NEEDLES	4	
ZEV RX STERILE ALCOHOL PREP PADS	4	RX/OTC	ADVOCATE INSULIN PEN NEEDLES 29GX12.7MM	4	
Parenteral Therapy Supplies			ADVOCATE INSULIN PEN NEEDLES 31GX5MM	4	RX/OTC
1ST TIER UNIFINE PENTIPS/MINI/31GX5MM	4	RX/OTC	ADVOCATE INSULIN PEN NEEDLES 31GX8MM	4	RX/OTC
1ST TIER UNIFINE PENTIPS29GX12MM	4	RX/OTC	ADVOCATE INSULIN SYRINGE/U-100/0.3ML/29GX1/2"	4	RX/OTC
1ST TIER UNIFINE PENTIPS31GX6MM	4	RX/OTC			
1ST TIER UNIFINE PENTIPS31GX8MM	4	RX/OTC			
1ST TIER UNIFINE PENTIPS32GX4MM	4	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ADVOCATE INSULIN SYRINGE/U-100/0.3ML/30GX5/16"	4	RX/OTC	AUM INSULIN SAFETY PEN NEEDLE/31GX5MM	4	RX/OTC
ADVOCATE INSULIN SYRINGE/U-100/0.3ML/31GX5/16"	4	RX/OTC	AUM MINI INSULIN PEN NEEDLE/32GX4MM	4	RX/OTC
ADVOCATE INSULIN SYRINGE/U-100/0.5ML/29GX1/2"	4	RX/OTC	AUM MINI INSULIN PEN NEEDLE/32GX5MM	4	RX/OTC
ADVOCATE INSULIN SYRINGE/U-100/0.5ML/30GX5/16"	4	RX/OTC	AUM MINI INSULIN PEN NEEDLE/32GX6MM	4	
ADVOCATE INSULIN SYRINGE/U-100/0.5ML/31GX5/16"	4	RX/OTC	AUM MINI INSULIN PEN NEEDLE/32GX8MM	4	
ADVOCATE INSULIN SYRINGE/U-100/1ML/29GX1/2"	4	RX/OTC	AUM MINI INSULIN PEN NEEDLE/33GX4MM	4	
ADVOCATE INSULIN SYRINGE/U-100/1ML/30GX5/16"	4	RX/OTC	AUM PEN NEEDLE/32GX4MM	4	RX/OTC
ADVOCATE INSULIN SYRINGE/U-100/1ML/31GX5/16"	4	RX/OTC	AUM PEN NEEDLE/32GX5MM	4	RX/OTC
AQ INSULIN SYRINGE/0.5ML/30G X 5/16"	4	RX/OTC	AUM PEN NEEDLE/32GX6MM	4	
AQ INSULIN SYRINGE/1ML/29G X 1/2"	4	RX/OTC	AUM PEN NEEDLE/33GX4MM	4	
AQ INSULIN SYRINGE/1ML/31G X 5/16"	4	RX/OTC	AUM READYGARD DUO SAFETYPEN NEEDLE/32GX4MM/DUAL AUTO PROTEC	4	RX/OTC
AQINJECT PEN NEEDLE/31G X 3/16"	4	RX/OTC	AUM SAFETY PEN NEEDLE/31G X 4MM	4	
AQINJECT PEN NEEDLE/32G X 5/32"	4	RX/OTC	AUM SAFETY PEN NEEDLE/31G X 5MM	4	RX/OTC
ASSURE ID DUO PRO SAFETYPEN NEEDLES 31G X 5MM	4	RX/OTC	AURORA PEN NEEDLES 29GX12MM	4	RX/OTC
ASSURE ID SAFETY PEN NEEDLES 30G X 5/16"	4		AURORA PEN NEEDLES 31G X6MM	4	RX/OTC
AUM INSULIN SAFETY PEN NEEDLE/31GX4MM	4		AURORA PEN NEEDLES 31G X8MM	4	RX/OTC
			AURORA UNIFINE PENTIPS/32GX5/32"	4	RX/OTC
			AURORA UNIFINE PENTIPS/MINI/31GX3/16"	4	RX/OTC
			BD LO-DOSE INSULIN SYRINGE MICROFINE IV/0.5ML/28G X 1/2"	4	RX/OTC
			BD INSULIN SYRINGE LUER-LOK/U-100/1ML	4	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
BD INSULIN SYRINGE MICROFINE IV/U-100/0.5ML/28G X 1/2"	4	RX/OTC	BD INSULIN SYRINGE ULTRAFINE/0.5ML/30G X 1/2"	4	
BD INSULIN SYRINGE MICROFINE IV/U-100/1ML/27G X 5/8"	4		B-D INSULIN SYRINGE ULTRAFINE/0.5ML/30G X 1/2"	4	
BD INSULIN SYRINGE MICROFINE IV/U-100/1ML/28G X 1/2"	4	RX/OTC	BD INSULIN SYRINGE ULTRA-FINE/0.5ML/30G X 12.7MM	4	
BD INSULIN SYRINGE MICROFINE/U-100/1ML/27G X 5/8"	4		BD INSULIN SYRINGE ULTRAFINE/0.5ML/31G X 5/16"	4	RX/OTC
BD INSULIN SYRINGE MICROFINE/U-100/1ML/28G X 1/2"	4	RX/OTC	BD INSULIN SYRINGE ULTRA-FINE/0.5ML/31G X 8MM	4	RX/OTC
BD INSULIN SYRINGE SAFETYGLIDE/1ML/29G X 1/2"	4	RX/OTC	BD INSULIN SYRINGE ULTRA-FINE/1/2 UNIT/0.3ML/31G X 8MM	4	RX/OTC
BD INSULIN SYRINGE ULTRAFINE HALF-UNIT/0.3ML/31G X 5/16"	4	RX/OTC	BD INSULIN SYRINGE ULTRAFINE/1ML/30G X 1/2"	4	RX/OTC
B-D INSULIN SYRINGE ULTRAFINE II/0.3ML/31G X 5/16"	4	RX/OTC	BD INSULIN SYRINGE ULTRA-FINE/1ML/30G X 12.7MM	4	RX/OTC
B-D INSULIN SYRINGE ULTRAFINE II/0.5ML/31G X 5/16"	4	RX/OTC	BD INSULIN SYRINGE ULTRA-FINE/1ML/31G X 8MM	4	RX/OTC
B-D INSULIN SYRINGE ULTRAFINE II/1ML/31G X 5/16"	4	RX/OTC	BD INSULIN SYRINGE ULTRAFINE/U-100/0.3ML/29G X 1/2"	4	RX/OTC
BD INSULIN SYRINGE ULTRAFINE/0.3ML/30G X 1/2"	4		BD INSULIN SYRINGE ULTRAFINE/U-100/0.5ML/29G X 1/2"	4	RX/OTC
B-D INSULIN SYRINGE ULTRAFINE/0.3ML/30G X 1/2"	4		BD INSULIN SYRINGE ULTRAFINE/U-100/1ML/31G X 5/16"	4	RX/OTC
BD INSULIN SYRINGE ULTRA-FINE/0.3ML/30G X 12.7MM	4		BD INSULIN SYRINGE/0.3ML/29G X 12.7MM	4	RX/OTC
BD INSULIN SYRINGE ULTRAFINE/0.3ML/31G X 5/16"	4	RX/OTC	BD INSULIN SYRINGE/0.5ML/29G X 12.7MM	4	RX/OTC
BD INSULIN SYRINGE ULTRA-FINE/0.3ML/31G X 8MM	4	RX/OTC	BD INSULIN SYRINGE/1ML/27G X 12.7MM	4	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
BD INSULIN SYRINGE/1ML/29G X 12.7MM	4	RX/OTC	BD SAFETY-GLIDE INSULIN SYRINGE/0.5ML/29G X 1/2"	4	RX/OTC
BD INSULIN SYRINGE/U-100/1ML/27G X 1/2"	4	RX/OTC	BD SAFETYGLIDE INSULIN SYRINGE/0.5ML/31G X 15/64"	4	RX/OTC
BD PEN NEEDLE/MICRO/ULTRA-FINE/32G X 6MM	4		BD SAFETYGLIDE INSULIN SYRINGE/0.5ML/30G X 5/16"	4	RX/OTC
BD PEN NEEDLE/MINI/ULTRA-FINE/31G X 5MM	4	RX/OTC	BD VEO INSULIN SYRINGE ULTRA-FINE/0.3ML/31G X 6MM	4	RX/OTC
BD PEN NEEDLE/NANO 2ND GEN/32G X 4MM	4	RX/OTC	BD VEO INSULIN SYRINGE ULTRA-FINE/0.5ML/31G X 6MM	4	RX/OTC
BD PEN NEEDLE/NANO 2ND GEN/32G X 5/32"	4	RX/OTC	BD VEO INSULIN SYRINGE ULTRA-FINE/1/2 UNIT/0.3ML/31G X 6MM	4	RX/OTC
BD PEN NEEDLE/NANO/ULTRA-FINE/32G X 4MM	4	RX/OTC	BD VEO INSULIN SYRINGE ULTRA-FINE/U-100/0.3ML/31G X 15/64"	4	RX/OTC
BD PEN NEEDLE/ORIGINAL/ULTRA-FINE/29G X 12.7MM	4		BD VEO INSULIN SYRINGE ULTRA-FINE/U-100/0.5ML/31G X 15/64"	4	RX/OTC
BD PEN NEEDLE/SHORT/ULTRA-FINE/31G X 8MM	4	RX/OTC	CAREFINE PEN NEEDLE 32GX4MM	4	RX/OTC
BD SAFETYGLIDE 1ML 27GX5/8"	4		CAREFINE PEN NEEDLES 29GX1/2"	4	RX/OTC
BD SAFETYGLIDE INSULIN SYRINGE/0.3ML/29G X 1/2"	4	RX/OTC	CAREFINE PEN NEEDLES 30GX5/16"	4	
BD SAFETYGLIDE INSULIN SYRINGE/0.3ML/31G X 15/64"	4	RX/OTC	CAREFINE PEN NEEDLES 31GX6MM	4	RX/OTC
BD SAFETYGLIDE INSULIN SYRINGE/0.3ML/31G X 5/16"	4	RX/OTC	CAREFINE PEN NEEDLES 31GX8MM	4	RX/OTC
BD SAFETYGLIDE INSULIN SYRINGE/0.5ML/29G X 1/2"	4	RX/OTC	CAREFINE PEN NEEDLES 32GX5MM	4	RX/OTC
			CAREFINE PEN NEEDLES 32GX6MM	4	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CAREONE INSULIN SYRINGES/0.3ML/30G X 1/2"	4		CAREONE UNIFINE PENTIPS PLUS PEN NEEDLES/33G X 5/32"	4	
CAREONE INSULIN SYRINGES/0.3ML/31G X 5/16"	4	RX/OTC	CARETOUCH INSULIN SYRINGE/0.3ML/31GX5/16"	4	RX/OTC
CAREONE INSULIN SYRINGES/0.5ML/30G X 1/2"	4		CARETOUCH INSULIN SYRINGE/0.5ML/31GX5/16"	4	RX/OTC
CAREONE INSULIN SYRINGES/0.5ML/31G X 5/16"	4	RX/OTC	CARETOUCH INSULIN SYRINGE/1ML/30GX5/16"	4	RX/OTC
CAREONE INSULIN SYRINGES/1ML/30G X 1/2"	4	RX/OTC	CARETOUCH INSULIN SYRINGE/1ML/31GX5/16"	4	RX/OTC
CAREONE INSULIN SYRINGES/1ML/31GX5/16"	4	RX/OTC	CARETOUCH INSULIN SYRINGE0.5ML/30GX5/16"	4	RX/OTC
CAREONE UNIFINE PENTIPS 29GX12MM	4	RX/OTC	CARETOUCH PEN NEEDLE 29GX1/2"	4	RX/OTC
CAREONE UNIFINE PENTIPS 31GX5MM	4	RX/OTC	CARETOUCH PEN NEEDLE 33GX5/32"	4	
CAREONE UNIFINE PENTIPS 31GX6MM	4	RX/OTC	CARETOUCH PEN NEEDLES 31G X 6 MM	4	RX/OTC
CAREONE UNIFINE PENTIPS 31GX8MM	4	RX/OTC	CARETOUCH PEN NEEDLES 31GX 5MM	4	RX/OTC
CAREONE UNIFINE PENTIPS PEN NEEDLES 32GX4MM	4	RX/OTC	CARETOUCH PEN NEEDLES 31GX 8MM	4	RX/OTC
CAREONE UNIFINE PENTIPS PLUS PEN NEEDLES 29GX12MM	4	RX/OTC	CARETOUCH PEN NEEDLES 32GX 4MM	4	RX/OTC
CAREONE UNIFINE PENTIPS PLUS PEN NEEDLES 31GX5MM	4	RX/OTC	CARETOUCH PEN NEEDLES 32GX 5MM	4	RX/OTC
CAREONE UNIFINE PENTIPS PLUS PEN NEEDLES 31GX6MM	4	RX/OTC	CLEVER CHOICE COMFORT EZINSULIN PEN NEEDLES 31GX8MM	4	RX/OTC
CAREONE UNIFINE PENTIPS PLUS PEN NEEDLES 31GX8MM	4	RX/OTC	CLEVER CHOICE COMFORT EZINSULIN PEN NEEDLES 33GX4MM	4	
CAREONE UNIFINE PENTIPS PLUS PEN NEEDLES 32GX4MM	4	RX/OTC	CLEVER CHOICE COMFORT EZINSULIN SYINGE/0.3ML/31G X 15/64"	4	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.5ML/31G X 15/64"	4	RX/OTC	CLEVER CHOICE COMFORT EZINSULIN SYRINGE/1ML/28G X 1/2"	4	RX/OTC
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.3ML/29G X 1/2"	4	RX/OTC	CLEVER CHOICE COMFORT EZINSULIN SYRINGE/1ML/29G X 1/2"	4	RX/OTC
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.3ML/30G X 1/2"	4		CLEVER CHOICE COMFORT EZINSULIN SYRINGE/1ML/30G X 5/16"	4	RX/OTC
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.3ML/30G X 5/16"	4	RX/OTC	CLEVER CHOICE COMFORT EZINSULIN SYRINGE/U-100/1ML/31GX5/16"	4	RX/OTC
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.3ML/31G X 5/16"	4	RX/OTC	CLEVER CHOICE COMFORT EZPEN NEEDLES 29GX12MM	4	RX/OTC
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.5ML/28G X 1/2"	4	RX/OTC	CLEVER CHOICE COMFORT EZPEN NEEDLES 31GX5MM	4	RX/OTC
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.5ML/29G X 1/2"	4	RX/OTC	CLEVER CHOICE COMFORT EZPEN NEEDLES 31GX6MM	4	RX/OTC
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.5ML/30G X 1/2"	4		CLEVER CHOICE COMFORT EZPEN NEEDLES 31GX8MM	4	RX/OTC
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.5ML/30G X 1/2"	4		CLEVER CHOICE COMFORT EZPEN NEEDLES 32GX4MM	4	RX/OTC
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.5ML/30G X 5/16"	4	RX/OTC	CLEVER CHOICE COMFORT EZPEN NEEDLES 32GX5MM	4	RX/OTC
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.5ML/31G X 5/16"	4	RX/OTC	CLEVER CHOICE COMFORT EZPEN NEEDLES 32GX6MM	4	
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/1.0ML/30G X 1/2"	4	RX/OTC	CLEVER CHOICE COMFORT EZPEN NEEDLES 32GX8MM	4	
			CLEVER CHOICE COMFORT EZPEN NEEDLES 33GX4MM	4	
			CLICKFINE PEN NEEDLE 32GX5/32"	4	RX/OTC
			CLICKFINE PEN NEEDLE UNIVERSAL/31GX1/4"	4	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CLICKFINE PEN NEEDLE UNIVERSAL/31GX5/16"	4	RX/OTC	COMFORT TOUCH PEN NEEDLES/31G X 4MM	4	
CLICKFINE PEN NEEDLES 31G X 1/4"	4	RX/OTC	COMFORT TOUCH PEN NEEDLES/31G X 5MM	4	RX/OTC
CLICKFINE PEN NEEDLES 31G X 3/16"	4	RX/OTC	COMFORT TOUCH PEN NEEDLES/31G X 6 MM	4	RX/OTC
CLICKFINE PEN NEEDLES 31G X 5/16"	4	RX/OTC	COMFORT TOUCH PEN NEEDLES/31G X 8 MM	4	RX/OTC
CLICKFINE PEN NEEDLES 31G X 8MM	4	RX/OTC	COMFORT TOUCH PEN NEEDLES/32G X 4MM	4	RX/OTC
CLICKFINE PEN NEEDLES 32G X 5/32"	4	RX/OTC	COMFORT TOUCH PEN NEEDLES/32G X 5MM	4	RX/OTC
CLICKFINE PEN NEEDLES/31GX1/4"	4	RX/OTC	COMFORT TOUCH PEN NEEDLES/32G X 6MM	4	
CLICKFINE UNIVERSAL PEN NEEDLES 31GX5/16"	4	RX/OTC	COMFORT TOUCH PEN NEEDLES/32G X 8MM	4	
COMFORT ASSIST INSULIN SYRINGE/0.3ML/31G X 5/16"	4	RX/OTC	COMFORT TOUCH PEN NEEDLES/33G X 5/32"	4	
COMFORT EZ INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	4	RX/OTC	DIATHRIVE PEN NEEDLE/31 G X 6MM	4	RX/OTC
COMFORT EZ INSULIN SYRINGE/U-100/1ML/31G X 5/16"	4	RX/OTC	DIATHRIVE PEN NEEDLE/31 GX 8MM	4	RX/OTC
COMFORT EZ MICRO/32G X 4MM	4	RX/OTC	DIATHRIVE PEN NEEDLE/31GX 5MM	4	RX/OTC
COMFORT EZ PRO SAFETY PEN NEEDLES 30G X 8MM	4		DIATHRIVE PEN NEEDLE/32GX 4MM	4	RX/OTC
COMFORT EZ PRO SAFETY PEN NEEDLES 31G X 4MM	4		DROPLET INSULIN SYRINGE 0.3ML/29G X 1/2"	4	RX/OTC
COMFORT EZ PRO SAFETY PEN NEEDLES 31G X 5MM	4	RX/OTC	DROPLET INSULIN SYRINGE 0.5ML/29G X 1/2"	4	RX/OTC
COMFORT EZ SHORT/31G X 8MM	4	RX/OTC	DROPLET INSULIN SYRINGE 1ML/29G X 1/2"	4	RX/OTC
COMFORT EZ/31G X 5MM	4	RX/OTC	DROPLET INSULIN SYRINGE U-100/0.3/31G X 5/16"	4	RX/OTC
COMFORT EZ/31G X 6MM	4	RX/OTC	DROPLET INSULIN SYRINGE U-100/0.3ML/30G X 1/2"	4	
			DROPLET INSULIN SYRINGE U-100/0.3ML/30G X 5/16"	4	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
DROPLET INSULIN SYRINGE U-100/0.3ML/31G X 15/64"	4	RX/OTC	DROPLET PEN NEEDLES 29G X1/2"	4	RX/OTC
DROPLET INSULIN SYRINGE U-100/0.5ML/30G X 1/2"	4		DROPLET PEN NEEDLES 29GX10MM	4	
DROPLET INSULIN SYRINGE U-100/0.5ML/30G X 15/64"	4		DROPLET PEN NEEDLES 29GX12MM	4	RX/OTC
DROPLET INSULIN SYRINGE U-100/0.5ML/30G X 5/16"	4	RX/OTC	DROPLET PEN NEEDLES 30G X 5/16"	4	
DROPLET INSULIN SYRINGE U-100/0.5ML/31G X 5/16"	4	RX/OTC	DROPLET PEN NEEDLES 31G X3/16"	4	RX/OTC
DROPLET INSULIN SYRINGE U-100/1ML/30G X 1/2"	4	RX/OTC	DROPLET PEN NEEDLES 31G X5/16"	4	RX/OTC
DROPLET INSULIN SYRINGE U-100/1ML/30G X 5/16"	4	RX/OTC	DROPLET PEN NEEDLES 31GX5MM	4	RX/OTC
DROPLET INSULIN SYRINGE U-100/1ML/31G X 5/16"	4	RX/OTC	DROPLET PEN NEEDLES 31GX6MM	4	RX/OTC
DROPLET INSULIN SYRINGE/U-100/0.3ML/31G X 15/64"	4	RX/OTC	DROPLET PEN NEEDLES 31GX8MM	4	RX/OTC
DROPLET INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	4	RX/OTC	DROPLET PEN NEEDLES 32G X 1/4"	4	
DROPLET INSULIN SYRINGE/U-100/0.5ML/30G X 1/2"	4		DROPLET PEN NEEDLES 32G X 3/16"	4	RX/OTC
DROPLET INSULIN SYRINGE/U-100/0.5ML/31G X 15/64"	4	RX/OTC	DROPLET PEN NEEDLES 32G X 5/16"	4	
DROPLET INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	4	RX/OTC	DROPLET PEN NEEDLES 32G X 5/32"	4	RX/OTC
DROPLET INSULIN SYRINGE/U-100/1ML/30G X 1/2"	4		DROPLET PEN NEEDLES 32GX4MM	4	RX/OTC
DROPLET INSULIN SYRINGE/U-100/1ML/31G X 15/64"	4	RX/OTC	DROPLET PEN NEEDLES 32GX5MM	4	RX/OTC
DROPLET INSULIN SYRINGE/U-100/1ML/31G X 5/16"	4	RX/OTC	DROPLET PEN NEEDLES 32GX6MM	4	
DROPLET INSULIN SYRINGE/U-100/1ML/30G X 1/2"	4	RX/OTC	DROPLET PEN NEEDLES 32GX8MM	4	
DROPLET INSULIN SYRINGE/U-100/1ML/31G X 5/16"	4	RX/OTC	DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 29GX12.5MM 1ML	4	RX/OTC
			DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 31GX6MM 0.3ML	4	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 31GX6MM 0.5ML	4	RX/OTC	EASY COMFORT INSULIN SYRINGE/0.5ML/31G X 5/16"	4	RX/OTC
DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 31GX8MM 0.3ML	4	RX/OTC	EASY COMFORT INSULIN SYRINGE/1ML/30G X 5/16"	4	RX/OTC
DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 31GX8MM 0.5ML	4	RX/OTC	EASY COMFORT INSULIN SYRINGE/1ML/31G X 5/16"	4	RX/OTC
DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 31GX8MM 1ML	4	RX/OTC	EASY COMFORT INSULIN SYRINGE/U-100/0.5ML/30G X 1/2"	4	
DROPSAFE SAFETY PEN NEEDLE/31GX5MM	4	RX/OTC	EASY COMFORT INSULIN SYRINGE/U-100/1ML/30G X 1/2"	4	RX/OTC
DROPSAFE SAFETY PEN NEEDLES/31G X 5/16"	4	RX/OTC	EASY COMFORT PEN NEEDLES31GX1/4"	4	RX/OTC
DROPSAFE SAFETY PEN NEEDLES/31G X 1/4"	4	RX/OTC	EASY COMFORT PEN NEEDLES31GX3/16"	4	RX/OTC
DRUG MART UNIFINE PENTIPS 31GX5MM	4	RX/OTC	EASY COMFORT PEN NEEDLES31GX5/16"	4	RX/OTC
DRUG MART UNIFINE PENTIPS29G X 12MM	4	RX/OTC	EASY COMFORT PEN NEEDLES32GX5/32"	4	RX/OTC
DRUG MART UNIFINE PENTIPS31GX6MM	4	RX/OTC	EASY COMFORT PEN NEEDLES33G X 4MM	4	
DRUG MART UNIFINE PENTIPS31GX8MM	4	RX/OTC	EASY COMFORT SAFETY PEN NEEDLES 31GX5MM	4	RX/OTC
DRUG MART UNIFINE PENTIPS32GX4MM	4	RX/OTC	EASY COMFORT SAFETY PEN NEEDLES 31GX6MM	4	RX/OTC
DRUG MART UNIFINE PENTIPSPLUS 32GX4MM	4	RX/OTC	EASY COMFORT SAFETY PEN NEEDLES 32GX4MM	4	RX/OTC
EASY COMFORT INSULIN SYRINGE/0.3ML/31G X 5/16"	4	RX/OTC	EASY GLIDE PEN NEEDLES 33G X 5/32"	4	
EASY COMFORT INSULIN SYRINGE/0.5ML/30G X 5/16"	4	RX/OTC	EASY TOUCH 32GX5MM	4	RX/OTC
			EASY TOUCH 32GX6MM	4	
			EASY TOUCH FLIPLOCK SAFETY INSULIN SYRINGE 1ML/29GX1/2"	4	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
EASY TOUCH FLIPLOCK SAFETY INSULIN SYRINGE 1ML/30GX1/2"	4	RX/OTC	EASY TOUCH INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	4	RX/OTC
EASY TOUCH FLIPLOCK SAFETY INSULIN SYRINGE 1ML/30GX5/16"	4	RX/OTC	EASY TOUCH INSULIN SYRINGE/U-100/0.5ML/30G X 1/2"	4	
EASY TOUCH FLIPLOCK SAFETY INSULIN SYRINGE 1ML/31GX5/16"	4	RX/OTC	EASY TOUCH INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	4	RX/OTC
EASY TOUCH INSULIN SYRINGE/0.3ML/30G X 5/16"	4	RX/OTC	EASY TOUCH INSULIN SYRINGE/U-100/1ML/27G X 1/2"	4	RX/OTC
EASY TOUCH INSULIN SYRINGE/0.3ML/31G X 5/16"	4	RX/OTC	EASY TOUCH INSULIN SYRINGE/U-100/1ML/27G X 5/8"	4	
EASY TOUCH INSULIN SYRINGE/0.5ML/29G X 1/2"	4	RX/OTC	EASY TOUCH INSULIN SYRINGE/U-100/1ML/28G X 1/2"	4	RX/OTC
EASY TOUCH INSULIN SYRINGE/0.5ML/30G X 5/16"	4	RX/OTC	EASY TOUCH INSULIN SYRINGE/U-100/1ML/29G X 1/2"	4	RX/OTC
EASY TOUCH INSULIN SYRINGE/1ML/30G X 5/16"	4	RX/OTC	EASY TOUCH INSULIN SYRINGE/U-100/1ML/30G X 1/2"	4	RX/OTC
EASY TOUCH INSULIN SYRINGE/SAFETY/U-100/0.5ML/29G X 1/2"	4	RX/OTC	EASY TOUCH INSULIN SYRINGE/U-100/1ML/31G X 5/16"	4	RX/OTC
EASY TOUCH INSULIN SYRINGE/SAFETY/U-100/0.5ML/30G X 5/16"	4	RX/OTC	EASY TOUCH PEN NEEDLE 30G X 5/16"	4	
EASY TOUCH INSULIN SYRINGE/SAFETY/U-100/1ML/29G X 1/2"	4	RX/OTC	EASY TOUCH PEN NEEDLES 29GX1/2"	4	RX/OTC
EASY TOUCH INSULIN SYRINGE/SAFETY/U-100/1ML/30G X 1/2"	4	RX/OTC	EASY TOUCH PEN NEEDLES 31GX1/4"	4	RX/OTC
EASY TOUCH INSULIN SYRINGE/SAFETY/U-100/1ML/30G X 1/2"	4	RX/OTC	EASY TOUCH PEN NEEDLES 31GX5/16"	4	RX/OTC
EASY TOUCH INSULIN SYRINGE/U-100/0.3ML/30G X 1/2"	4		EASY TOUCH PEN NEEDLES 32GX1/4"	4	
EASY TOUCH INSULIN SYRINGE/U-100/0.5ML/27G X 1/2"	4	RX/OTC	EASY TOUCH PEN NEEDLES 32GX3/16"	4	RX/OTC
EASY TOUCH INSULIN SYRINGE/U-100/0.5ML/28G X 1/2"	4	RX/OTC	EASY TOUCH PEN NEEDLES 32GX5/32"	4	RX/OTC
			EASY TOUCH PEN NEEDLES/31G X 3/16"	4	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
EASY TOUCH SAFETY PEN NEEDLES/30G X 5/16"	4		EQL INSULIN SYRINGE/0.5ML/30G X 5/16"	4	RX/OTC
EASY TOUCH SHEATHLOCK SAFETY INSULIN SYRINGE 1ML/29GX1/2"	4	RX/OTC	EQL INSULIN SYRINGE/0.5ML/31G X 5/16"	4	RX/OTC
EASY TOUCH SHEATHLOCK SAFETY INSULIN SYRINGE 1ML/30GX5/16"	4	RX/OTC	EQL INSULIN SYRINGE/1ML/29G X 1/2"	4	RX/OTC
EASY TOUCH SHEATHLOCK SAFETY INSULIN SYRINGE 1ML/31GX5/16"	4	RX/OTC	EQL INSULIN SYRINGE/1ML/30G X 5/16"	4	RX/OTC
EASY TOUCH SHEATHLOCK SAFETY SYRINGE 1ML/30GX1/2"	4	RX/OTC	EQL INSULIN SYRINGE/1ML/31G X 5/16"	4	RX/OTC
EMBRACE PEN NEEDLES/29G X 12MM	4	RX/OTC	EXCEL COMFORT POINT INSULIN PEN NEEDLES 31G X 4MM	4	
EMBRACE PEN NEEDLES/30G X 8MM	4		EXEL COMFORT POINT INSULIN PEN NEEDLES 29G X 12MM	4	RX/OTC
EMBRACE PEN NEEDLES/31G X 5MM	4	RX/OTC	EXEL COMFORT POINT INSULIN PEN NEEDLES 31G X 6MM	4	RX/OTC
EMBRACE PEN NEEDLES/31G X 6MM	4	RX/OTC	EXEL COMFORT POINT INSULIN PEN NEEDLES 31G X 8MM	4	RX/OTC
EMBRACE PEN NEEDLES/31G X 8MM	4	RX/OTC	EXEL COMFORT POINT INSULIN SYRINGE/0.3ML/29G X 1/2"	4	RX/OTC
EMBRACE PEN NEEDLES/32G X 4MM	4	RX/OTC	EXEL COMFORT POINT INSULIN SYRINGE/0.3ML/30G X 5/16"	4	RX/OTC
EQL INSULIN SYRINGE/0.3ML/29G X 1/2"	4	RX/OTC	EXEL COMFORT POINT INSULIN SYRINGE/0.5ML/28G X 1/2"	4	RX/OTC
EQL INSULIN SYRINGE/0.3ML/30G X 5/16"	4	RX/OTC	EXEL COMFORT POINT INSULIN SYRINGE/0.5ML/29G X 1/2"	4	RX/OTC
EQL INSULIN SYRINGE/0.3ML/31G X 5/16"	4	RX/OTC			
EQL INSULIN SYRINGE/0.5ML/29G X 1/2"	4	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
EXEL COMFORT POINT INSULIN SYRINGE/0.5ML/30G X 5/16"	4	RX/OTC	FREDS PHARMACY UNIFINE PENTIPS PLUS 31GX8MM	4	RX/OTC
EXEL COMFORT POINT INSULIN SYRINGE/1ML/28G X 1/2"	4	RX/OTC	GLOBAL EASE INJECT PEN NEEDLES 29GX12MM	4	RX/OTC
EXEL COMFORT POINT INSULIN SYRINGE/1ML/29G X 1/2"	4	RX/OTC	GLOBAL EASE INJECT PEN NEEDLES 31GX8MM	4	RX/OTC
EXEL COMFORT POINT INSULIN SYRINGE/1ML/30G X 5/16"	4	RX/OTC	GLOBAL EASE INJECT PEN NEEDLES 32GX4MM	4	RX/OTC
FIFTY50 PEN NEEDLES 31G X3/16" (5MM)	4	RX/OTC	GLOBAL EASE INJECT PEN NEEDLES 31GX5MM	4	RX/OTC
FIFTY50 PEN NEEDLES 31G X5/16" (8MM)	4	RX/OTC	GLOBAL EASY GLIDE INSULIN SYRINGE/0.3ML/31G X 15/64"	4	RX/OTC
FIFTY50 PEN NEEDLES 31GX5MM	4	RX/OTC	GLOBAL EASY GLIDE INSULIN SYRINGE/0.5ML/31G X 15/64"	4	RX/OTC
FIFTY50 PEN NEEDLES/31GX8MM	4	RX/OTC	GLOBAL EASY GLIDE INSULINSYRINGE/U-100/0.3ML/31G X 5/16"	4	RX/OTC
FIFTY50 PEN NEEDLES/32GX4MM	4	RX/OTC	GLOBAL EASY GLIDE PEN NEEDLES 32GX4MM	4	RX/OTC
FIFTY50 PEN NEEDLES/32GX6MM	4		GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.3ML/29G X 1/2"	4	RX/OTC
FIFTY50 SUPERIOR COMFORTINSULIN SYRINGE/0.3ML/31G X 5/16"	4	RX/OTC	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.3ML/30G X 1/2"	4	RX/OTC
FIFTY50 SUPERIOR COMFORTINSULIN SYRINGE/0.5ML/31G X 5/16"	4	RX/OTC	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.3ML/30G X 5/16"	4	RX/OTC
FIFTY50 SUPERIOR COMFORTINSULIN SYRINGE/1ML/31G X 5/16"	4	RX/OTC	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	4	RX/OTC
FREDS PHARMACY UNIFINE PENTIPS PEN NEEDLES 32GX4MM	4	RX/OTC	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/28G X 1/2"	4	RX/OTC
FREDS PHARMACY UNIFINE PENTIPS PLUS 31GX5MM	4	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	4	RX/OTC	GLUCOPRO INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	4	RX/OTC
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/30G X 1/2"	4		GLUCOPRO INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	4	RX/OTC
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	4	RX/OTC	GLUCOPRO INSULIN SYRINGE/U-100/1ML/30G X 1/2"	4	RX/OTC
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	4	RX/OTC	GLUCOPRO INSULIN SYRINGE/U-100/1ML/30G X 5/16"	4	RX/OTC
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/28G X 1/2"	4	RX/OTC	GLUCOPRO INSULIN SYRINGE/U-100/1ML/31G X 5/16"	4	RX/OTC
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/29G X 1/2"	4	RX/OTC	GNP CLICKFINE UNIVERSAL PEN NEEDLES 31GX1/4"	4	RX/OTC
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/30G X 1/2"	4	RX/OTC	GNP CLICKFINE UNIVERSAL PEN NEEDLES 31GX5/16"	4	RX/OTC
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/30G X 5/16"	4	RX/OTC	GNP INSULIN SYRINGE/0.3ML/29G X 1/2"	4	RX/OTC
GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/31G X 5/16"	4	RX/OTC	GNP INSULIN SYRINGE/0.3ML/30G X 5/16"	4	RX/OTC
GLOBAL INSULIN SYRINGE/U-100/0.3ML/30G X 1/2"	4		GNP INSULIN SYRINGE/0.3ML/31G X 5/16"	4	RX/OTC
GLOBAL INSULIN SYRINGES/U-100/0.3ML/30GX5/16"	4	RX/OTC	GNP INSULIN SYRINGE/0.5ML/28G X 1/2"	4	RX/OTC
GLUCOPRO INSULIN SYRINGE/U-100/0.3ML/30G X 1/2"	4		GNP INSULIN SYRINGE/0.5ML/29G X 1/2"	4	RX/OTC
GLUCOPRO INSULIN SYRINGE/U-100/0.3ML/30G X 5/16"	4	RX/OTC	GNP INSULIN SYRINGE/0.5ML/30G X 5/16"	4	RX/OTC
GLUCOPRO INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	4	RX/OTC	GNP INSULIN SYRINGE/0.5ML/31G X 5/16"	4	RX/OTC
GLUCOPRO INSULIN SYRINGE/U-100/0.5ML/30G X 1/2"	4		GNP INSULIN SYRINGE/1ML/29G X 1/2"	4	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
GNP INSULIN SYRINGE/1ML/30G X 5/16"	4	RX/OTC	GNP ULTRA COMFORT INSULIN SYRINGE/1ML/28G X 1/2"	4	RX/OTC
GNP INSULIN SYRINGE/1ML/31G X 5/16"	4	RX/OTC	GOODSENSE CLICKFINE SAFETY PEN NEEDLE/31G X 3/16"	4	RX/OTC
GNP INSULIN SYRINGES/0.3ML/30GX5/16"	4	RX/OTC	GOODSENSE PEN NEEDLE/PENFINE CLASSIC/31G X 3/16"	4	RX/OTC
GNP INSULIN SYRINGES/1/2ML/29GX1/2"	4	RX/OTC	GOODSENSE PEN NEEDLE/PENFINE CLASSIC/31G X 5/16"	4	RX/OTC
GNP INSULIN SYRINGES/1ML/28GX1/2"	4	RX/OTC	GOODSENSE PEN NEEDLE/PENFINE CLASSIC/32G X 1/4"	4	
GNP INSULIN SYRINGES/1ML/29GX1/2"	4	RX/OTC	GOODSENSE PEN NEEDLE/PENFINE CLASSIC/32G X 5/32"	4	RX/OTC
GNP INSULIN SYRINGES/1ML/30GX5/16"	4	RX/OTC	HEALTHWISE INSULIN SYRINGE/U-100/0.3ML/30G X 5/16"	4	RX/OTC
GNP INSULIN SYRINGES/3ML/31GX5/16"	4	RX/OTC	HEALTHWISE INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	4	RX/OTC
GNP ULTICARE PEN NEEDLES/31GX5/16"	4	RX/OTC	HEALTHWISE INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	4	RX/OTC
GNP ULTICARE PEN NEEDLES/32GX 5/32"	4	RX/OTC	HEALTHWISE INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	4	RX/OTC
GNP ULTICARE PEN NEEDLES/32GX1/4"	4		HEALTHWISE INSULIN SYRINGE/U-100/1ML/30G X 5/16"	4	RX/OTC
GNP ULTICARE PEN NEEDLES31G X 5MM	4	RX/OTC	HEALTHWISE INSULIN SYRINGE/U-100/1ML/31G X 5/16"	4	RX/OTC
GNP ULTIGUARD SAFEPACK/MICRO PEN NEEDLE/32GX4MM	4	RX/OTC	HEALTHWISE MICRON PEN NEEDLES/32G X 5/32"	4	RX/OTC
GNP ULTIGUARD SAFEPACK/MINI PEN NEEDLE/31GX5MM	4	RX/OTC	HEALTHWISE MINI PEN NEEDLES 31GX6MM	4	RX/OTC
GNP ULTIGUARD SAFEPACK/MINI PEN NEEDLE/32GX6MM	4		HEALTHWISE PEN NEEDLES 29GX12MM	4	RX/OTC
GNP ULTIGUARD SAFEPACK/SHORT PEN NEEDLE/31GX8MM	4	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
HEALTHWISE SHORT PEN NEEDLES 31GX8MM	4	RX/OTC	H-E-B IN CONTROL UNIFINEPENTIPS PLUS 31GX5/16"	4	RX/OTC
HEALTHWISE SHORT PEN NEEDLES/31G X 3/16"	4	RX/OTC	H-E-B IN CONTROL UNIFINEPENTIPS PLUS 31GX5MM	4	RX/OTC
HEALTHWISE SHORT PEN NEEDLES/31G X 5/16"	4	RX/OTC	H-E-B IN CONTROL UNIFINEPENTIPS PLUS 32GX4MM	4	RX/OTC
HEALTHWISE UNIFINE PENTIPS PEN NEEDLES 32GX4MM	4	RX/OTC	H-E-B IN CONTROL UNIFINEPENTIPS PLUS 32GX5/32"	4	RX/OTC
HEALTHY ACCENTS UNIFINE PENTIPS PEN NEEDLES 29GX12MM	4	RX/OTC	H-E-B IN CONTROL UNIFINEPENTIPS PLUS 33GX5/32"	4	
HEALTHY ACCENTS UNIFINE PENTIPS PEN NEEDLES 31GX5MM	4	RX/OTC	H-E-B INCONTROL PEN NEEDLES 29GX12MM	4	RX/OTC
HEALTHY ACCENTS UNIFINE PENTIPS PEN NEEDLES 31GX6MM	4	RX/OTC	HM ULTICARE INSULIN SYRINGE/1ML/30G X 1/2"	4	RX/OTC
HEALTHY ACCENTS UNIFINE PENTIPS PEN NEEDLES 31GX8MM	4	RX/OTC	HM ULTICARE INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	4	RX/OTC
HEALTHY ACCENTS UNIFINE PENTIPS PEN NEEDLES 32GX4MM	4	RX/OTC	HM ULTICARE MINI PEN NEEDLES/31G X 5MM (3/16")	4	RX/OTC
H-E-B IN CONTROL PEN NEEDLE 31GX3/16"	4	RX/OTC	HM ULTICARE SHORT PEN NEEDLES 31GX8MM	4	RX/OTC
H-E-B IN CONTROL PEN NEEDLES 31GX5MM	4	RX/OTC	INCONTROL ULTICARE MINI PEN NEEDLES/31G X 6MM	4	RX/OTC
H-E-B IN CONTROL PEN NEEDLES 31GX6MM	4	RX/OTC	INCONTROL ULTICARE MINI PEN NEEDLES/31GX8MM	4	RX/OTC
H-E-B IN CONTROL PEN NEEDLES 31GX8MM	4	RX/OTC	INCONTROL ULTICARE MINI PEN NEEDLES/32G X 4MM	4	RX/OTC
H-E-B IN CONTROL PEN NEEDLES/NANO/32GX4 MM	4	RX/OTC	INSULIN SYRINGE/0.3ML/30G X 5/16"	4	RX/OTC
H-E-B IN CONTROL UNIFINEPENTIPS PLUS 31GX1/4"	4	RX/OTC	INSULIN SYRINGE/0.3ML/31G X 5/16"	4	RX/OTC
H-E-B IN CONTROL UNIFINEPENTIPS PLUS 31GX3/16"	4	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
INSULIN SYRINGE/0.5ML/27G X 1/2"	4	RX/OTC	INSULIN SYRINGE/U-100/0.3ML/29G X 1/2"	4	RX/OTC
INSULIN SYRINGE/0.5ML/28G X 1/2"	4	RX/OTC	INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	4	RX/OTC
INSULIN SYRINGE/0.5ML/30G X 5/16"	4	RX/OTC	INSULIN SYRINGE/U-100/1ML/29G X 1/2"	4	RX/OTC
INSULIN SYRINGE/0.5ML/31G X 5/16"	4	RX/OTC	INSULIN SYRINGE/U-100/1ML/30G X 5/16"	4	RX/OTC
INSULIN SYRINGE/1ML/28G X 1/2"	4	RX/OTC	INSULIN SYRINGE/U-100/1ML/31G X 5/16"	4	RX/OTC
INSULIN SYRINGE/1ML/29G X 1/2"	4	RX/OTC	INSULIN SYRINGES 0.3ML/31G X 1/4"	4	
INSULIN SYRINGE/1ML/30G X 5/16"	4	RX/OTC	INSULIN SYRINGES/U-100/0.5ML/27GX1/2"	4	RX/OTC
INSULIN SYRINGE/NEEDLE 0.3ML/30G X 5/16"	4	RX/OTC	INSULIN SYRINGES/U-100/0.5ML/28GX1/2"	4	RX/OTC
INSULIN SYRINGE/NEEDLE 0.3ML/31G X 5/16"	4	RX/OTC	INSULIN SYRINGES/U-100/0.5ML/29GX1/2"	4	RX/OTC
INSULIN SYRINGE/NEEDLE 0.5ML/29G X 1/2"	4	RX/OTC	INSULIN SYRINGES/U-100/0.5ML/30GX5/16"	4	RX/OTC
INSULIN SYRINGE/NEEDLE 0.5ML/30G X 5/16"	4	RX/OTC	INSULIN SYRINGES/U-100/0.5ML/31GX5/16"	4	RX/OTC
INSULIN SYRINGE/NEEDLE 0.5ML/31G X 5/16"	4	RX/OTC	INSULIN SYRINGES/U-100/1ML/27GX1/2"	4	RX/OTC
INSULIN SYRINGE/NEEDLE 1ML/29G X 1/2"	4	RX/OTC	INSULIN SYRINGES/U-100/1ML/28GX1/2"	4	RX/OTC
INSULIN SYRINGE/NEEDLE 1ML/30G X 5/16"	4	RX/OTC	INSULIN SYRINGES/U-100/1ML/29GX1/2"	4	RX/OTC
INSULIN SYRINGE/NEEDLE 1ML/31G X 5/16"	4	RX/OTC	INSULIN SYRINGES/U-100/1ML/30GX1/2"	4	RX/OTC
			INSULIN SYRINGES/U-100/1ML/31GX5/16"	4	RX/OTC
			INSUPEN 29G X 12MM	4	RX/OTC
			INSUPEN 31G X 5MM	4	RX/OTC
			INSUPEN 31G X 8MM	4	RX/OTC
			INSUPEN 32G X 4MM	4	RX/OTC
			INSUPEN 33GX4MM	4	
			INSUPEN PEN NEEDLES 32G X4MM	4	RX/OTC
			INSUPEN SENSITIVE 32GX6MM	4	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
INSUPEN SENSITIVE 32GX8MM	4		KROGER INSULIN SYRINGE/0.5ML/30G X 5/16"	4	RX/OTC
INSUPEN ULTRAFIN 30GX8MM	4		KROGER INSULIN SYRINGE/0.5ML/31G X 5/16"	4	RX/OTC
INSUPEN ULTRAFIN 31GX6MM	4	RX/OTC	KROGER INSULIN SYRINGE/1ML/29G X 1/2"	4	RX/OTC
INSUPEN ULTRAFIN 31GX8MM	4	RX/OTC	KROGER INSULIN SYRINGE/1ML/30G X 5/16"	4	RX/OTC
KINRAY INSULIN SYRINGE PREFERRED PLUS/0.3ML/31G X 5/16"	4	RX/OTC	KROGER INSULIN SYRINGE/1ML/31G X 5/16"	4	RX/OTC
KINRAY INSULIN SYRINGE PREFERRED PLUS/0.5ML/31G X 5/16"	4	RX/OTC	KROGER PEN NEEDLES 29G X12MM	4	RX/OTC
KINRAY INSULIN SYRINGE PREFERRED PLUS/1ML/31G X 5/16"	4	RX/OTC	KROGER PEN NEEDLES 31G X8MM	4	RX/OTC
KINRAY INSULIN SYRINGE/0.5ML/29G X 1/2"	4	RX/OTC	KROGER PEN NEEDLES 31GX1/4"	4	RX/OTC
KMART VALU PLUS INSULIN SYRINGE/0.5ML/29G	4		KROGER PEN NEEDLES/31G X1/4"	4	RX/OTC
KMART VALU PLUS INSULIN SYRINGE/0.5ML/30G	4		KROGER PEN NEEDLES/31G X3/16"	4	RX/OTC
KMART VALU PLUS INSULIN SYRINGE/1ML/29G	4	RX/OTC	KROGER PEN NEEDLES/31G X5/16"	4	RX/OTC
KMART VALU PLUS INSULIN SYRINGE/1ML/30G	4	RX/OTC	KROGER PEN NEEDLES/32G X5/32"	4	RX/OTC
KROGER INSULIN SYRINGE/0.3ML/29G X 1/2"	4	RX/OTC	KROGER PEN NEEDLES/33G X5/32"	4	
KROGER INSULIN SYRINGE/0.3ML/30G X 5/16"	4	RX/OTC	LEADER INSULIN SYRINGE/0.3ML/29G X 1/2"	4	RX/OTC
KROGER INSULIN SYRINGE/0.3ML/31G X 5/16"	4	RX/OTC	LEADER INSULIN SYRINGE/0.3ML/30G X 5/16"	4	RX/OTC
KROGER INSULIN SYRINGE/0.5ML/29G X 1/2"	4	RX/OTC	LEADER INSULIN SYRINGE/0.3ML/31G X 5/16"	4	RX/OTC
			LEADER INSULIN SYRINGE/0.5ML/28G X 1/2"	4	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
LEADER INSULIN SYRINGE/0.5ML/29G X 1/2"	4	RX/OTC	LITETOUCH INSULIN SYRINGE/0.3ML/31G X 5/16"	4	RX/OTC
LEADER INSULIN SYRINGE/0.5ML/30G X 5/16"	4	RX/OTC	LITETOUCH INSULIN SYRINGE/0.5ML/30G X 5/16"	4	RX/OTC
LEADER INSULIN SYRINGE/0.5ML/31G X 5/16"	4	RX/OTC	LITETOUCH INSULIN SYRINGE/0.5ML/31G X 5/16"	4	RX/OTC
LEADER INSULIN SYRINGE/1ML/28G X 1/2"	4	RX/OTC	LITETOUCH INSULIN SYRINGE/1ML/30G X 5/16"	4	RX/OTC
LEADER INSULIN SYRINGE/1ML/29G X 1/2"	4	RX/OTC	LITETOUCH INSULIN SYRINGE/U-100/0.3ML/30G X 5/16"	4	RX/OTC
LEADER INSULIN SYRINGE/1ML/30G X 5/16"	4	RX/OTC	LITETOUCH INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	4	RX/OTC
LEADER INSULIN SYRINGE/1ML/31G X 5/16"	4	RX/OTC	LITETOUCH INSULIN SYRINGE/U-100/0.5ML/28G X 1/2"	4	RX/OTC
LEADER UNIFINE PENTIPS PLUS/MINI/31GX3/16"	4	RX/OTC	LITETOUCH INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	4	RX/OTC
LEADER UNIFINE PENTIPS PLUS/SHORT/31GX5/16"	4	RX/OTC	LITETOUCH INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	4	RX/OTC
LEADER UNIFINE PENTIPS/MINI/31GX3/16"	4	RX/OTC	LITETOUCH INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	4	RX/OTC
LEADER UNIFINE PENTIPS/NANO/32GX5/32"	4	RX/OTC	LITETOUCH INSULIN SYRINGE/U-100/1ML/28G X 1/2"	4	RX/OTC
LEADER UNIFINE PENTIPS/PLUS/32GX5/32"	4	RX/OTC	LITETOUCH INSULIN SYRINGE/U-100/1ML/29G X 1/2"	4	RX/OTC
LITETOUCH INSULIN PEN NEEDLES/32G X 4MM/MINI	4	RX/OTC	LITETOUCH INSULIN SYRINGE/U-100/1ML/30G X 5/16"	4	RX/OTC
LITETOUCH INSULIN SYRINGE/0.3ML/29G X 1/2"	4	RX/OTC	LITETOUCH INSULIN SYRINGE/U-100/1ML/31G X 5/16"	4	RX/OTC
LITETOUCH INSULIN SYRINGE/0.3ML/30G X 5/16"	4	RX/OTC	LITETOUCH PEN NEEDLES 29GX12.7MM	4	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
LITETOUCH PEN NEEDLES 31G X 6MM	4	RX/OTC	MARATHON MEDICAL PENTIPS32GX4MM	4	RX/OTC
LITETOUCH PEN NEEDLES 31G X 6MM/ULTRA SHORT	4	RX/OTC	MAXICOMFORT II PEN NEEDLES/31G X 1/4"	4	RX/OTC
LITETOUCH PEN NEEDLES 31GX8MM SHORT	4	RX/OTC	MAXI-COMFORT INSULIN SYRINGE/U-100/0.5ML/28GX1/2"	4	RX/OTC
LITETOUCH PEN NEEDLES/31G X 3/16"	4	RX/OTC	MAXI-COMFORT INSULIN SYRINGE/U-100/1ML/28GX1/2"	4	RX/OTC
LITETOUCH PEN NEEDLES/31G X 5MM/MINI	4	RX/OTC	MAXICOMFORT INSULIN SYRINGES 27G X 1/2"	4	RX/OTC
LITETOUCH PEN NEEDLES/31G X 8MM/SHORT	4	RX/OTC	MEDIC INSULIN SYRINGE/0.3ML/30G X 5/16"	4	RX/OTC
LONGS INSULIN SYRINGE/0.5ML/31G X 5/16"	4	RX/OTC	MEDIC INSULIN SYRINGE/0.5ML/30G X 5/16"	4	RX/OTC
MAGELLAN INSULIN SAFETY SYRINGE/U-100/0.3ML/29G X 1/2"	4	RX/OTC	MEDICINE SHOPPE PEN NEEDLES 29G X 12MM	4	RX/OTC
MAGELLAN INSULIN SAFETY SYRINGE/U-100/0.3ML/30G X 5/16"	4	RX/OTC	MEDICINE SHOPPE PEN NEEDLES 31G X 6MM	4	RX/OTC
MAGELLAN INSULIN SAFETY SYRINGE/U-100/0.5ML/29G X 1/2"	4	RX/OTC	MEDICINE SHOPPE PEN NEEDLES 31G X 8MM	4	RX/OTC
MAGELLAN INSULIN SAFETY SYRINGE/U-100/0.5ML/30G X 5/16"	4	RX/OTC	MEIJER PEN NEEDLES 29G X12MM	4	RX/OTC
MAGELLAN INSULIN SAFETY SYRINGE/U-100/1ML/29G X 1/2"	4	RX/OTC	MEIJER PEN NEEDLES 31G X6MM	4	RX/OTC
MAGELLAN INSULIN SAFETY SYRINGE/U-100/1ML/30G X 5/16"	4	RX/OTC	MEIJER PEN NEEDLES 31G X8MM	4	RX/OTC
MARATHON MEDICAL PENTIPS29GX12MM	4	RX/OTC	MICRODOT PEN NEEDLE/31G X 6 MM	4	RX/OTC
MARATHON MEDICAL PENTIPS31GX5MM	4	RX/OTC	MICRODOT PEN NEEDLE/32G X 4 MM	4	RX/OTC
MARATHON MEDICAL PENTIPS31GX8MM	4	RX/OTC	MICRODOT PEN NEEDLE/33G X 4 MM	4	RX/OTC
			MM INSULIN SYRINGE/U-100/0.3ML/30G X 5/16"	4	RX/OTC
			MM INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	4	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MM INSULIN SYRINGE/U-100/1/2ML/30G X 5/16"	4	RX/OTC	MONOJECT INSULIN SYRINGE/SAFETY/PERM NEEDLE/0.3ML/29GX1/2"	4	RX/OTC
MM INSULIN SYRINGE/U-100/1/2ML/31G X 5/16"	4	RX/OTC	MONOJECT INSULIN SYRINGE/SAFETY/PERM NEEDLE/0.5ML/29G X 1/2"	4	RX/OTC
MM INSULIN SYRINGE/U-100/1ML/30G X 5/16"	4	RX/OTC	MONOJECT INSULIN SYRINGE/SAFETY/PERM NEEDLE/1ML/29G X 1/2"	4	RX/OTC
MM INSULIN SYRINGE/U-100/1ML/31G X 5/16"	4	RX/OTC	MONOJECT INSULIN SYRINGE/SOFTPACK/1ML/27G X 1/2"	4	RX/OTC
MM PEN NEEDLES 31G X 1/4"	4	RX/OTC	MONOJECT INSULIN SYRINGE/SOFTPACK/U-100/0.5ML/28G X 1/2"	4	RX/OTC
MM PEN NEEDLES 31G X 3/16"	4	RX/OTC	MONOJECT INSULIN SYRINGE/U-100/0.3ML/30G X 5/16"	4	RX/OTC
MM PEN NEEDLES 31G X 5/16"	4	RX/OTC	MONOJECT INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	4	RX/OTC
MM PEN NEEDLES 32G X 5/32"	4	RX/OTC	MONOJECT INSULIN SYRINGE/U-100/1ML/28G X 1/2"	4	RX/OTC
MONOJECT INSULIN SYRINGE/1ML	4	RX/OTC	MONOJECT INSULIN SYRINGE/U-100/1ML/30G X 5/16"	4	RX/OTC
MONOJECT INSULIN SYRINGE/1ML/31G X 5/16"	4	RX/OTC	MONOJECT INSULIN SYRINGE/REGULAR LUER TIP/SOFTPACK/1ML	4	RX/OTC
MONOJECT INSULIN SYRINGE/DETACH NEEDLE/1ML/25G X 5/8"	4	RX/OTC	MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.3ML/29G X 1/2"	4	RX/OTC
MONOJECT INSULIN SYRINGE/DETACH NEEDLE/1ML/27G X 1/2"	4	RX/OTC	MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.3ML/30G X 5/16"	4	RX/OTC
MONOJECT INSULIN SYRINGE/PERM NEEDLE/1ML/28G X 1/2"	4	RX/OTC	MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.3ML/31G X 5/16"	4	RX/OTC
MONOJECT INSULIN SYRINGE/PERM NEEDLE/U-100/0.5ML/28G X 1/2"	4	RX/OTC			
MONOJECT INSULIN SYRINGE/SAFETY/PERM NEEDLE/0.3ML/29G X 1/2"	4	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.5ML/28G X 1/2"	4	RX/OTC	PC UNIFINE PENTIPS 31G X8MM SHORT	4	RX/OTC
MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.5ML/29G X 1/2"	4	RX/OTC	PEN NEEDLES	4	
MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.5ML/30G X 5/16"	4	RX/OTC	PEN NEEDLES 29GX12MM	4	RX/OTC
MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.5ML/31G X 5/16"	4	RX/OTC	PEN NEEDLES 30GX8MM	4	
MONOJECT ULTRA COMFORT INSULIN SYRINGE/1ML/28G X 1/2"	4	RX/OTC	PEN NEEDLES 31G X 3/16"	4	RX/OTC
MONOJECT ULTRA COMFORT INSULIN SYRINGE/1ML/29G X 1/2"	4	RX/OTC	PEN NEEDLES 31G X 5MM	4	RX/OTC
MS INSULIN SYRINGE/0.3ML/31G X 5/16"	4	RX/OTC	PEN NEEDLES 31G X 6MM	4	RX/OTC
MS INSULIN SYRINGE/0.5ML/31G X 5/16"	4	RX/OTC	PEN NEEDLES 31G X 8MM	4	RX/OTC
MS INSULIN SYRINGE/1ML/31G X 5/16"	4	RX/OTC	PEN NEEDLES 31GX5/16"	4	RX/OTC
NOVOFINE AUTOCOVER PEN NEEDLE 30G X 8MM	4		PEN NEEDLES 31GX5MM	4	RX/OTC
NOVOFINE PEN NEEDLE 32G X 6MM	4		PEN NEEDLES 31GX6MM (1/4")	4	RX/OTC
NOVOFINE PLUS PEN NEEDLE 32G X 4MM	4	RX/OTC	PEN NEEDLES 31GX8MM	4	RX/OTC
PC UNIFINE PENTIPS 29G X 1/2"	4	RX/OTC	PEN NEEDLES 31GX8MM (5/16")	4	RX/OTC
PC UNIFINE PENTIPS 31G X 5MM MINI	4	RX/OTC	PEN NEEDLES 32G X 4MM	4	RX/OTC
PC UNIFINE PENTIPS 31G X 6MM ULTRA SHORT	4	RX/OTC	PEN NEEDLES 32G X 5MM	4	RX/OTC
			PEN NEEDLES 32G X 6MM	4	
			PEN NEEDLES 32GX4MM	4	RX/OTC
			PEN NEEDLES 33G X 5/32"	4	
			PEN NEEDLES/29G X 1/2"	4	RX/OTC
			PEN NEEDLES/31G X 1/4"	4	RX/OTC
			PEN NEEDLES/31G X 3/16"	4	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PEN NEEDLES/31G X 5/16"	4	RX/OTC	PREFERRED PLUS INSULIN SYRINGE/U-100/1ML/29G X 1/2"	4	RX/OTC
PEN NEEDLES/31G X 6MM	4	RX/OTC	PREFERRED PLUS INSULIN SYRINGE/U-100/1ML/30G X 5/16"	4	RX/OTC
PEN NEEDLES/32G X 5/32"	4	RX/OTC	PREFERRED PLUS UNIFINE PENTIPS 29G X 12MM	4	RX/OTC
PENTIPS 29G X 12MM	4	RX/OTC	PREFERRED PLUS UNIFINE PENTIPS 31G X 6MM ULTRA SHORT	4	RX/OTC
PENTIPS 29GX12MM	4	RX/OTC	PREFERRED PLUS UNIFINE PENTIPS 31G X 8MM SHORT	4	RX/OTC
PENTIPS 31G X 5MM	4	RX/OTC	PREFERRED PLUS UNIFINE PENTIPS 32GX4MM	4	RX/OTC
PENTIPS 31G X 8MM	4	RX/OTC	PREFERRED PLUS UNIFINE PENTIPS/MINI/31GX5MM	4	RX/OTC
PENTIPS 31GX5MM	4	RX/OTC	PREVENT DROPSAFE SAFETY PEN NEEDLES 31GX1/4"	4	RX/OTC
PENTIPS 31GX6MM	4	RX/OTC	PREVENT DROPSAFE SAFETY PEN NEEDLES 31GX5/16"	4	RX/OTC
PENTIPS 31GX8MM	4	RX/OTC	PREVENT SAFETY PEN NEEDLES 31GX1/4"	4	RX/OTC
PENTIPS 32G X 4MM	4	RX/OTC	PREVENT SAFETY PEN NEEDLES 31GX5/16"	4	RX/OTC
PENTIPS 32GX4MM	4	RX/OTC	PRO COMFORT INSULIN SYRINGES/0.5ML/30G X 1/2"	4	RX/OTC
PENTIPS 32GX6MM	4		PRO COMFORT INSULIN SYRINGES/0.5ML/30G X 5/16"	4	RX/OTC
PIP PEN NEEDLES 31G X 5MM	4	RX/OTC	PRO COMFORT INSULIN SYRINGES/0.5ML/29G X 1/2"	4	RX/OTC
PIP PEN NEEDLES 32G X 4MM	4	RX/OTC	PRO COMFORT INSULIN SYRINGES/0.5ML/31G X 5/16"	4	RX/OTC
PRECISION SURE-DOSE INSULIN SYRINGE/0.3ML/30G X 5/16"	4	RX/OTC	PRO COMFORT INSULIN SYRINGES/1ML/30G X 1/2"	4	RX/OTC
PREFERRED PLUS INSULIN SYRINGE/U-100/0.3ML/29G X 1/2"	4	RX/OTC			
PREFERRED PLUS INSULIN SYRINGE/U-100/0.3ML/30G X 5/16"	4	RX/OTC			
PREFERRED PLUS INSULIN SYRINGE/U-100/0.5ML/28G X 1/2"	4	RX/OTC			
PREFERRED PLUS INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	4	RX/OTC			
PREFERRED PLUS INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	4	RX/OTC			
PREFERRED PLUS INSULIN SYRINGE/U-100/1ML/28G X 1/2"	4	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PRO COMFORT INSULIN SYRINGES/1ML/30G X 5/16"	4	RX/OTC	PX MINI PEN NEEDLES 31GX5MM	4	RX/OTC
PRO COMFORT INSULIN SYRINGES/1ML/31G X 5/16"	4	RX/OTC	PX PEN NEEDLE 29GX12MM	4	RX/OTC
PRO COMFORT PEN NEEDLES/31G X 8MM	4	RX/OTC	PX PEN NEEDLE 31GX8MM	4	RX/OTC
PRO COMFORT PEN NEEDLES/32G X 4MM	4	RX/OTC	PX SHORTLENGTH PEN NEEDLES/31GX8MM	4	RX/OTC
PRO COMFORT PEN NEEDLES/32G X 5MM	4	RX/OTC	QC PEN NEEDLES 29G X 12MM	4	RX/OTC
PRO COMFORT PEN NEEDLES/32G X 6MM	4		QC PEN NEEDLES 31G X 6MM	4	RX/OTC
PRODIGY INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	4	RX/OTC	QC PEN NEEDLES 31G X 8MM	4	RX/OTC
PRODIGY INSULIN SYRINGE/1/2ML/31G X 5/16"	4	RX/OTC	QC UNIFINE PENTIPS 32GX4MM	4	RX/OTC
PRODIGY INSULIN SYRINGE/1ML/28G X 1/2"	4	RX/OTC	RA INSULIN SYRINGE/0.5ML/29G X 1/2"	4	RX/OTC
PURE COMFORT PEN NEEDLE 32G X6MM	4		RA INSULIN SYRINGE/1ML/29G X 1/2"	4	RX/OTC
PURE COMFORT PEN NEEDLE 32G X8MM	4		RA INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	4	RX/OTC
PURE COMFORT PEN NEEDLE/32G X 5MM	4	RX/OTC	RA INSULIN SYRINGE/U-100/1 ML/30G X 5/16"	4	RX/OTC
PURE COMFORT PEN NEEDLE/32G X4MM	4	RX/OTC	RA PEN NEEDLES 31G X 5MM3/16"	4	RX/OTC
PURE COMFORT SAFETY PEN NEEDLE 31G X 5MM	4	RX/OTC	RA PEN NEEDLES 31G X 8MM5/16"	4	RX/OTC
PURE COMFORT SAFETY PEN NEEDLE 31G X 6MM	4	RX/OTC	RAYA SURE PEN NEEDLE 29GX 12MM	4	RX/OTC
PURE COMFORT SAFETY PEN NEEDLE 32G X 4MM	4	RX/OTC	RAYA SURE PEN NEEDLE 31GX 4MM	4	
PX EXTRA SHORT PEN NEEDLES 31GX6MM	4	RX/OTC	RAYA SURE PEN NEEDLE 31GX 5MM	4	RX/OTC
PX INSULIN SYRINGE/U-100/0.5ML/30G X 1/2"	4		RAYA SURE PEN NEEDLE 31GX 6MM	4	RX/OTC
			RAYA SURE PEN NEEDLE 31GX 8MM	4	RX/OTC
			REALITY INSULIN SYRINGE/U-100/0.5ML/28G X 1/2"	4	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
REALITY INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	4	RX/OTC	RELION PEN NEEDLES 32G X5/32"	4	RX/OTC
REALITY INSULIN SYRINGE/U-100/1ML/28G X 1/2"	4	RX/OTC	RELION PEN NEEDLES 32GX4MM	4	RX/OTC
REALITY INSULIN SYRINGE/U-100/1ML/29G X 1/2"	4	RX/OTC	RELION PEN NEEDLES/31G X1/4"	4	RX/OTC
RELION INSULIN SYRINGE 0.5ML/31G X 15/64"	4	RX/OTC	RELION SHORT PEN NEEDLES31GX8MM	4	RX/OTC
RELION INSULIN SYRINGE/U-100/0.3ML/31G X 15/64"	4	RX/OTC	SAFETY PEN NEEDLES/30G X5/16"	4	
RELION INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	4	RX/OTC	SB INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	4	RX/OTC
RELION INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	4	RX/OTC	SB INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	4	RX/OTC
RELION INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	4	RX/OTC	SB INSULIN SYRINGE/U-100/1ML/29G X 1/2"	4	RX/OTC
RELION INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	4	RX/OTC	SB INSULIN SYRINGE/U-100/1ML/30G X 5/16"	4	RX/OTC
RELION INSULIN SYRINGE/U-100/1ML/29G X 1/2"	4	RX/OTC	SB INSULIN SYRINGE/U-100/1ML/31G X 5/16"	4	RX/OTC
RELION INSULIN SYRINGE/U-100/1ML/31G X 5/16"	4	RX/OTC	SECURESAFE SAFETY INSULIN SYRINGES/U-100/0.5ML/29GX1/2"	4	RX/OTC
RELION MINI PEN NEEDLES 31GX6MM	4	RX/OTC	SECURESAFE SAFETY INSULIN SYRINGES/U-100/1ML/29GX1/2"	4	RX/OTC
RELION PEN NEEDLES 29GX12MM	4	RX/OTC	SECURESAFE SAFETY PEN NEEDLES/30G X 5/16"	4	
RELION PEN NEEDLES 31G X6MM	4	RX/OTC	SHOPKO UNIFINE PENTIPS PEN NEEDLES/MICRO/32GX4 MM	4	RX/OTC
RELION PEN NEEDLES 31G X8MM	4	RX/OTC	SHOPKO UNIFINE PENTIPS PEN NEEDLES/MINI/31GX5M M	4	RX/OTC
RELION PEN NEEDLES 31GX5/16"	4	RX/OTC	SHOPKO UNIFINE PENTIPS PEN NEEDLES/ORIGINAL/29G X12MM	4	RX/OTC
RELION PEN NEEDLES 31GX6MM	4	RX/OTC			
RELION PEN NEEDLES 31GX8MM	4	RX/OTC			
RELION PEN NEEDLES 32G X4MM	4	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SHOPKO UNIFINE PENTIPS PEN NEEDLES/SHORT/31GX8MM	4	RX/OTC	SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/28G X 1/2"	4	RX/OTC
SHOPKO UNIFINE PENTIPS PLUS PEN NEEDLES/MICRO/REMOVR/32GX4MM	4	RX/OTC	SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	4	RX/OTC
SHOPKO UNIFINE PENTIPS PLUS PEN NEEDLES/MINI/REMOVE R/31GX5MM	4	RX/OTC	SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/30G X 1/2"	4	
SHOPKO UNIFINE PENTIPS PLUS PEN NEEDLES/REMOVER/29GX12MM	4	RX/OTC	SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	4	RX/OTC
SHOPKO UNIFINE PENTIPS PLUS PEN NEEDLES/SHORT/REMOVR/31GX8MM	4	RX/OTC	SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/31G X 5/16	4	RX/OTC
SURE COMFORT AUTOKEEPER SAFETY PEN NEEDLES 31GX1/4"	4	RX/OTC	SURE COMFORT INSULIN SYRINGE/U-100/1ML/28G X 1/2"	4	RX/OTC
SURE COMFORT AUTOKEEPER SAFETY PEN NEEDLES 32GX5/32"	4	RX/OTC	SURE COMFORT INSULIN SYRINGE/U-100/1ML/29G X 1/2"	4	RX/OTC
SURE COMFORT INSULIN SYRINGE/U-100/0.3ML/29G X 1/2"	4	RX/OTC	SURE COMFORT INSULIN SYRINGE/U-100/1ML/30G X 1/2"	4	RX/OTC
SURE COMFORT INSULIN SYRINGE/U-100/0.3ML/30G X 1/2"	4		SURE COMFORT INSULIN SYRINGE/U-100/1ML/30G X 5/16"	4	RX/OTC
SURE COMFORT INSULIN SYRINGE/U-100/0.3ML/30G X 5/16"	4	RX/OTC	SURE COMFORT INSULIN SYRINGE/U-100/1ML/31G X 5/16"	4	RX/OTC
SURE COMFORT INSULIN SYRINGE/U-100/0.3ML/31G X 5/16	4	RX/OTC	SURE COMFORT PEN NEEDLES29GX1/2" 12.7MM	4	
SURE COMFORT INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	4	RX/OTC	SURE COMFORT PEN NEEDLES30GX5/16" SHORT	4	
SURE COMFORT INSULIN SYRINGE/U-100/0.3ML/31GX1/4"	4		SURE COMFORT PEN NEEDLES31GX3/16" (5MM)	4	RX/OTC
			SURE COMFORT PEN NEEDLES31GX5/16" (8MM)	4	RX/OTC
			SURE COMFORT PEN NEEDLES32GX5/32"	4	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SURE COMFORT PEN NEEDLES32GX5/32" (4MM)	4	RX/OTC	TECHLITE PLUS PEN NEEDLES32G X 4MM	4	RX/OTC
SURE COMFORT PEN NEEDLES32GX6MM	4		TODAYS HEALTH MINI PEN NEEDLES 31G X 1/4"	4	RX/OTC
TECHLITE INSULIN SYRINGEU-100/0.3ML/30G X 5/16"	4	RX/OTC	TODAYS HEALTH ORIGINAL PEN NEEDLES 29G X 1/2"	4	RX/OTC
TECHLITE INSULIN SYRINGEU-100/0.3ML/31G X 15/64"	4	RX/OTC	TODAYS HEALTH SHORT PEN NEEDLES 31G X 5/16"	4	RX/OTC
TECHLITE INSULIN SYRINGEU-100/0.3ML/31G X 5/16"	4	RX/OTC	TOPCARE CLICKFINE UNIVERSAL PEN NEEDLES 31GX1/4"	4	RX/OTC
TECHLITE INSULIN SYRINGEU-100/0.5ML/30G X 1/2"	4		TOPCARE CLICKFINE UNIVERSAL PEN NEEDLES 31GX5/16"	4	RX/OTC
TECHLITE INSULIN SYRINGEU-100/0.5ML/30G X 5/16"	4	RX/OTC	TOPCARE ULTRA COMFORT INSULIN SYRINGE/0.3ML/30G X 5/16"	4	RX/OTC
TECHLITE INSULIN SYRINGEU-100/0.5ML/31G X 15/64"	4	RX/OTC	TOPCARE ULTRA COMFORT INSULIN SYRINGE/0.3ML/31G X 5/16"	4	RX/OTC
TECHLITE INSULIN SYRINGEU-100/0.5ML/31G X 5/16"	4	RX/OTC	TOPCARE ULTRA COMFORT INSULIN SYRINGE/0.5ML/30G X 5/16"	4	RX/OTC
TECHLITE INSULIN SYRINGEU-100/1ML/29G X 1/2"	4	RX/OTC	TOPCARE ULTRA COMFORT INSULIN SYRINGE/0.5ML/31G X 5/16"	4	RX/OTC
TECHLITE INSULIN SYRINGEU-100/1ML/30G X 1/2"	4	RX/OTC	TOPCARE ULTRA COMFORT INSULIN SYRINGE/1ML/30G X 5/16"	4	RX/OTC
TECHLITE INSULIN SYRINGEU-100/1ML/31G X 5/16"	4	RX/OTC	TOPCARE ULTRA COMFORT INSULIN SYRINGE/1ML/31G X 5/16"	4	RX/OTC
TECHLITE PEN NEEDLES 29GX 12 MM	4	RX/OTC	TOPCARE ULTRA COMFORT INSULIN SYRINGE/U-100/0.3ML/29G X 1/2"	4	RX/OTC
TECHLITE PEN NEEDLES 31GX 5MM	4	RX/OTC			
TECHLITE PEN NEEDLES/31GX 8MM	4	RX/OTC			
TECHLITE PEN NEEDLES/32GX 6MM	4				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
TOPCARE ULTRA COMFORT INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	4	RX/OTC	TRUE COMFORT PRO PEN NEEDLES 31G X 6MM	4	RX/OTC
TOPCARE ULTRA COMFORT INSULIN SYRINGE/U-100/1ML/29G X 1/2"	4	RX/OTC	TRUE COMFORT PRO PEN NEEDLES 31G X 8MM	4	RX/OTC
TRUE COMFORT INSULIN SYRINGE/0.5ML/31G X 5/16"	4	RX/OTC	TRUE COMFORT PRO PEN NEEDLES 32G X 4MM	4	RX/OTC
TRUE COMFORT INSULIN SYRINGE/1ML/31G X 5/16"	4	RX/OTC	TRUE COMFORT PRO PEN NEEDLES 32G X 5MM	4	RX/OTC
TRUE COMFORT PEN NEEDLES31G X 5MM	4	RX/OTC	TRUE COMFORT PRO PEN NEEDLES 32G X 6MM	4	
TRUE COMFORT PEN NEEDLES31G X 6MM	4	RX/OTC	TRUE COMFORT PRO PEN NEEDLES 33G X 4MM	4	
TRUE COMFORT PEN NEEDLES32G X 4MM	4	RX/OTC	TRUE COMFORT SAFETY INSULIN SYRINGE/0.5ML/30G X 5/16"	4	RX/OTC
TRUE COMFORT PRO INSULINSYRINGE/0.5ML/30G X 5/16"	4	RX/OTC	TRUE COMFORT SAFETY INSULIN SYRINGE/0.5ML/31G X 5/16"	4	RX/OTC
TRUE COMFORT PRO INSULINSYRINGE/0.5ML/31G X 5/16"	4	RX/OTC	TRUE COMFORT SAFETY INSULIN SYRINGE/1ML/30G X 5/16"	4	RX/OTC
TRUE COMFORT PRO INSULINSYRINGE/1ML/30G X 5/16"	4	RX/OTC	TRUE COMFORT SAFETY INSULIN SYRINGE/1ML/31G X 5/16"	4	RX/OTC
TRUE COMFORT PRO INSULINSYRINGE/1ML/31G X 5/16"	4	RX/OTC	TRUE COMFORT SAFETY INSULIN SYRINGE/U-100/0.5ML/30G X 1/2"	4	
TRUE COMFORT PRO INSULINSYRINGE/U-100/0.5ML/30G X 1/2"	4		TRUE COMFORT SAFETY INSULIN SYRINGE/U-100/1ML/30G X 1/2"	4	RX/OTC
TRUE COMFORT PRO INSULINSYRINGE/U-100/1ML/30G X 1/2"	4	RX/OTC	TRUE COMFORT SAFETY INSULIN SYRINGE/U-100/1ML/30G X 1/2"	4	RX/OTC
TRUE COMFORT PRO PEN NEEDLES 31G X 5MM	4	RX/OTC	TRUE COMFORT SAFETY PEN NEEDLES 31G X 5MM	4	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
TRUE COMFORT SAFETY PEN NEEDLES 31G X 6MM	4	RX/OTC	TRUEPLUS INSULIN SYRINGE/U-100/1ML/29G X 1/2"	4	RX/OTC
TRUE COMFORT SAFETY PEN NEEDLES 32G X 4MM	4	RX/OTC	TRUEPLUS INSULIN SYRINGE/U-100/1ML/30G X 5/16"	4	RX/OTC
TRUEPLUS 5-BEVEL PEN NEEDLES 29GX12.7MM	4		TRUEPLUS INSULIN SYRINGE/U-100/1ML/31G X 5/16"	4	RX/OTC
TRUEPLUS 5-BEVEL PEN NEEDLES 31GX5MM	4	RX/OTC	TRUEPLUS PEN NEEDLES 29GX12MM	4	RX/OTC
TRUEPLUS 5-BEVEL PEN NEEDLES 31GX6MM	4	RX/OTC	TRUEPLUS PEN NEEDLES 31GX5MM	4	RX/OTC
TRUEPLUS 5-BEVEL PEN NEEDLES 31GX8MM	4	RX/OTC	TRUEPLUS PEN NEEDLES 31GX6MM	4	RX/OTC
TRUEPLUS 5-BEVEL PEN NEEDLES 32GX4MM	4	RX/OTC	TRUEPLUS PEN NEEDLES 31GX8MM	4	RX/OTC
TRUEPLUS INSULIN SYRINGE/U-100/0.3ML/29G X 1/2"	4	RX/OTC	TRUEPLUS PEN NEEDLES 32GX4MM	4	RX/OTC
TRUEPLUS INSULIN SYRINGE/U-100/0.3ML/30G X 5/16"	4	RX/OTC	ULTICARE INSULIN SAFETY SYRINGE/0.5ML/29G X 1/2"	4	RX/OTC
TRUEPLUS INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	4	RX/OTC	ULTICARE INSULIN SAFETY SYRINGE/1ML/29G X 1/2"	4	RX/OTC
TRUEPLUS INSULIN SYRINGE/U-100/0.5ML/28G X 1/2"	4	RX/OTC	ULTICARE INSULIN SYRINGE/0.3ML/29G X 1/2"	4	RX/OTC
TRUEPLUS INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	4	RX/OTC	ULTICARE INSULIN SYRINGE/0.3ML/30G X 1/2"	4	
TRUEPLUS INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	4	RX/OTC	ULTICARE INSULIN SYRINGE/0.3ML/30G X 5/16"	4	RX/OTC
TRUEPLUS INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	4	RX/OTC	ULTICARE INSULIN SYRINGE/0.5ML/28G X 1/2"	4	RX/OTC
TRUEPLUS INSULIN SYRINGE/U-100/1ML/28G X 1/2"	4	RX/OTC	ULTICARE INSULIN SYRINGE/0.5ML/29G X 1/2"	4	RX/OTC
			ULTICARE INSULIN SYRINGE/0.5ML/30G X 1/2"	4	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ULTICARE INSULIN SYRINGE/0.5ML/30G X 5/16"	4	RX/OTC	ULTICARE INSULIN SYRINGE/U-100/1ML/30G X 1/2"	4	RX/OTC
ULTICARE INSULIN SYRINGE/1ML/28G X 1/2"	4	RX/OTC	ULTICARE INSULIN SYRINGE/U-100/1ML/31G X 5/16"	4	RX/OTC
ULTICARE INSULIN SYRINGE/1ML/29G X 1/2"	4	RX/OTC	ULTICARE INSULIN SYRINGEULTRAFINE U-100/0.3ML/31G X 5/16"	4	RX/OTC
ULTICARE INSULIN SYRINGE/1ML/30G X 1/2"	4	RX/OTC	ULTICARE INSULIN SYRINGEULTRAFINE U-100/0.5ML/31G X 5/16"	4	RX/OTC
ULTICARE INSULIN SYRINGE/1ML/30G X 5/16"	4	RX/OTC	ULTICARE INSULIN SYRINGEULTRAFINE U-100/1ML/31G X 5/16"	4	RX/OTC
ULTICARE INSULIN SYRINGE/SHORT/0.3ML/30G X 5/16"	4	RX/OTC	ULTICARE MICRO PEN NEEDLES 31G X 8MM	4	RX/OTC
ULTICARE INSULIN SYRINGE/SHORT/0.3ML/31G X 5/16"	4	RX/OTC	ULTICARE MICRO PEN NEEDLES 32G X 4MM	4	RX/OTC
ULTICARE INSULIN SYRINGE/SHORT/0.5ML/30G X 5/16"	4	RX/OTC	ULTICARE MICRO PEN NEEDLES/31G X 1/4"	4	RX/OTC
ULTICARE INSULIN SYRINGE/SHORT/0.5ML/31G X 5/16"	4	RX/OTC	ULTICARE MICRO PEN NEEDLES/31G X 5/16"	4	RX/OTC
ULTICARE INSULIN SYRINGE/SHORT/1ML/30G X 5/16"	4	RX/OTC	ULTICARE MICRO PEN NEEDLES/32G X 4MM	4	RX/OTC
ULTICARE INSULIN SYRINGE/SHORT/1ML/31G X 5/16"	4	RX/OTC	ULTICARE MICRO PEN NEEDLES/32G X 5/32"	4	RX/OTC
ULTICARE INSULIN SYRINGE/U-100/0.3ML/30G X 1/2"	4		ULTICARE MINI PEN NEEDLES 31GX6MM	4	RX/OTC
ULTICARE INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	4	RX/OTC	ULTICARE MINI PEN NEEDLES ULTI-FINE IV	4	RX/OTC
ULTICARE INSULIN SYRINGE/U-100/0.5ML/30G X 1/2"	4		ULTICARE MINI PEN NEEDLES/31G X 6MM	4	RX/OTC
ULTICARE INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	4	RX/OTC	ULTICARE MINI PEN NEEDLES/32G X 1/4"	4	
			ULTICARE MINI PEN NEEDLES31GX6MM	4	RX/OTC
			ULTICARE ORIGINAL PEN NEEDLES ULTI-FINE	4	
			ULTICARE PEN NEEDLES 31GX 5MM/MINI	4	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ULTICARE PEN NEEDLES/29GX 12.7MM	4		ULTIGUARD SAFEPACK INSULIN SYRINGE/0.3ML/31G X 5/16"/SHARPS	4	RX/OTC
ULTICARE SHORT PEN NEEDLES 31GX8MM	4	RX/OTC	ULTIGUARD SAFEPACK INSULIN SYRINGE/0.5ML/30G X 1/2"/SHARPS C	4	
ULTICARE SHORT PEN NEEDLES ULTI-FINE IV	4	RX/OTC	ULTIGUARD SAFEPACK MINI PEN NEEDLE/31G X 3/16"/SHARPS CONTAI	4	RX/OTC
ULTICARE SHORT PEN NEEDLES/31G X 8MM	4	RX/OTC	ULTIGUARD SAFEPACK PEN NEEDLE/29G X 1/2"/SHARPS CONTAINER	4	
ULTICARE SHORT SAFETY PEN NEEDLES 30G X 5/16"	4		ULTIGUARD SAFEPACK/MICROPEN NEEDLE/32G X 4 MM	4	RX/OTC
ULTICARE TUBERCULIN SAFETY SYRINGES/1ML/27G X 5/8"	4		ULTIGUARD SAFEPACK/MICROPEN NEEDLE/32G X 4MM/SHARPS CONTAIN	4	RX/OTC
ULTICARE U-100 INSULIN SYRINGES/0.3ML/31G X 1/4"	4		ULTIGUARD SAFEPACK/MICROPEN NEEDLE/32G X 5/32"	4	RX/OTC
ULTICARE U-100 INSULIN SYRINGES/0.3ML/31G X 1/4"	4		ULTIGUARD SAFEPACK/MICROPEN NEEDLE/32G X 5/32"/SHARPS CONTA	4	RX/OTC
ULTICARE U-100 INSULIN SYRINGES/HALF UNIT/0.3ML/31G X 1/4"	4		ULTIGUARD SAFEPACK/MINI PEN NEEDLE/31G X 1/4"/SHARPS CONTAIN	4	RX/OTC
ULTIGUARD SAFEPACK INSULIN SYRINGE 0.3ML/30G X 1/2"/SHARPS C	4		ULTIGUARD SAFEPACK/MINI PEN NEEDLE/31G X 3/16"/SHARPS CONTAI	4	RX/OTC
ULTIGUARD SAFEPACK INSULIN SYRINGE 1/2ML 30G X 1/2"/SHARPS C	4		ULTIGUARD SAFEPACK/MINI PEN NEEDLE/31G X 6MM/SHARPS CONTAIN	4	RX/OTC
ULTIGUARD SAFEPACK INSULIN SYRINGE 1ML 30G X 1/2"/SHARPS CON	4	RX/OTC	ULTIGUARD SAFEPACK/MINI PEN NEEDLE/32G X 1/4"/SHARPS CONTAIN	4	
ULTIGUARD SAFEPACK INSULIN SYRINGE 1ML 31G X 5/16"/SHARPS CO	4	RX/OTC			
ULTIGUARD SAFEPACK INSULIN SYRINGE/0.3ML/30G X 1/2"/SHARPS C	4				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ULTIGUARD SAFEPACK/SHORTPEN NEEDLE/31G X 5/16"/SHARPS CONTA	4	RX/OTC	ULTRA FLO INSULIN PEN NEEDLE 33GX4MM	4	
ULTIGUARD SAFEPACK/SHORTPEN NEEDLE/31G X 8MM/SHARPS CONTAIN	4	RX/OTC	ULTRA FLO INSULIN PEN NEEDLES	4	RX/OTC
ULTIGUARD SAFEPACK/SYRINGE/NEEDLE/31G X 5/16"/SHARPS CONTAIN	4	RX/OTC	ULTRA FLO INSULIN PEN NEELE 31GX8MM	4	RX/OTC
ULTIGUARD SAFEPACK/TINY PEN NEEDLE/32G X 4MM/SHARPS CONTAIN	4	RX/OTC	ULTRA FLO INSULIN SYRINGE 0.3ML/29G X 1/2"	4	RX/OTC
ULTIGUARD SAFEPACK/TINY PEN NEEDLE/32G X 6MM/SHARPS CONTAIN	4	RX/OTC	ULTRA FLO INSULIN SYRINGE 0.3ML/30GX1/2"	4	
ULTILET PEN NEEDLE 29GX12.7MM	4		ULTRA FLO INSULIN SYRINGE 0.3ML/30GX5/16"	4	RX/OTC
ULTILET PEN NEEDLE 31GX5MM	4	RX/OTC	ULTRA FLO INSULIN SYRINGE 0.3ML/31GX5/16"	4	RX/OTC
ULTILET PEN NEEDLE 31GX8MM	4	RX/OTC	ULTRA FLO INSULIN SYRINGE 0.5ML/29GX1/2"	4	RX/OTC
ULTILET PEN NEEDLE 32GX4MM	4	RX/OTC	ULTRA FLO INSULIN SYRINGE 0.5ML/29GX1/2"	4	
ULTILET PEN NEEDLE 32GX4MM/SHORT	4	RX/OTC	ULTRA FLO INSULIN SYRINGE 0.5ML/30GX1/2"	4	
ULTILET SHORT PEN NEEDLES 31GX5/16"	4	RX/OTC	ULTRA FLO INSULIN SYRINGE 0.5ML/30GX5/16"	4	RX/OTC
ULTILET SHORT PEN NEEDLES31GX3/16"	4	RX/OTC	ULTRA FLO INSULIN SYRINGE 0.5ML/31GX5/16"	4	RX/OTC
ULTRA COMFORT INSULIN SYRINGE/U-100/0.3ML/30G X 5/16"	4	RX/OTC	ULTRA FLO INSULIN SYRINGE 1/2 UNIT/0.3ML/30GX1/2"	4	
ULTRA FLO INSULIN PEN NEEDLE 31GX5MM	4	RX/OTC	ULTRA FLO INSULIN SYRINGE 1/2 UNIT/0.3ML/30GX5/16"	4	RX/OTC
ULTRA FLO INSULIN PEN NEEDLE 32GX4MM	4	RX/OTC	ULTRA FLO INSULIN SYRINGE 1/2 UNIT/0.3ML/31GX5/16"	4	RX/OTC
			ULTRA FLO INSULIN SYRINGE 1M/29GX1/2"	4	RX/OTC
			ULTRA FLO INSULIN SYRINGE 1ML/30GX1/2"	4	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ULTRA FLO INSULIN SYRINGE 1ML/30GX5/16"	4	RX/OTC	ULTRA-THIN II INSULIN SYRINGE SHORT/U-100/0.3ML/30GX5/16"	4	RX/OTC
ULTRA FLO INSULIN SYRINGE 1ML/31GX5/16"	4	RX/OTC	ULTRA-THIN II INSULIN SYRINGE SHORT/U-100/0.3ML/31GX5/16"	4	RX/OTC
ULTRA THIN PEN NEEDLES 32G X 4MM	4	RX/OTC	ULTRA-THIN II INSULIN SYRINGE SHORT/U-100/0.5ML/30GX5/16"	4	RX/OTC
ULTRACARE INSULIN SYRINGE/U-100/0.3ML/30G X 5/16"	4	RX/OTC	ULTRA-THIN II INSULIN SYRINGE SHORT/U-100/0.5ML/31GX5/16"	4	RX/OTC
ULTRACARE INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	4	RX/OTC	ULTRA-THIN II INSULIN SYRINGE SHORT/U-100/1ML/30GX5/16"	4	RX/OTC
ULTRACARE INSULIN SYRINGE/U-100/0.5ML/30G X 1/2"	4		ULTRA-THIN II INSULIN SYRINGE SHORT/U-100/1ML/31GX5/16"	4	RX/OTC
ULTRACARE INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	4	RX/OTC	ULTRA-THIN II INSULIN SYRINGE/U-100/0.5ML/29GX1/2"	4	RX/OTC
ULTRACARE INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	4	RX/OTC	ULTRA-THIN II INSULIN SYRINGE/U-100/1ML/29GX1/2"	4	RX/OTC
ULTRACARE INSULIN SYRINGE/U-100/1ML/30G X 1/2"	4	RX/OTC	ULTRA-THIN II MINI PEN NEEDLES/31GX3/16"	4	RX/OTC
ULTRACARE INSULIN SYRINGE/U-100/1ML/30G X 5/16"	4	RX/OTC	ULTRA-THIN II PEN NEEDLES 29GX1/2"	4	
ULTRACARE INSULIN SYRINGE/U-100/1ML/31G X 5/16"	4	RX/OTC	ULTRA-THIN II PEN NEEDLES/SHORT/31GX5/16"	4	RX/OTC
ULTRACARE PEN NEEDLES/31G X 1/4"	4	RX/OTC	UNIFINE PEN NEEDLE/32G X4MM	4	RX/OTC
ULTRACARE PEN NEEDLES/31G X 3/16"	4	RX/OTC	UNIFINE PENTIPS 29GX12MM	4	RX/OTC
ULTRACARE PEN NEEDLES/31G X 5/16"	4	RX/OTC	UNIFINE PENTIPS 31G X 3/16"	4	RX/OTC
ULTRACARE PEN NEEDLES/32G X 1/14"	4		UNIFINE PENTIPS 31GX5MM	4	RX/OTC
ULTRACARE PEN NEEDLES/32G X 3/16"	4	RX/OTC	UNIFINE PENTIPS 31GX6MM	4	RX/OTC
ULTRACARE PEN NEEDLES/32G X 5/32"	4	RX/OTC	UNIFINE PENTIPS 31GX8MM	4	RX/OTC
ULTRACARE PEN NEEDLES/33G X 5/32"	4				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
UNIFINE PENTIPS 32GX4MM	4	RX/OTC	UNIFINE ULTRA PEN NEEDLE/32GX4MM	4	RX/OTC
UNIFINE PENTIPS 32GX6MM	4		VALUE HEALTH INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	4	RX/OTC
UNIFINE PENTIPS 33GX4MM	4		VALUE HEALTH INSULIN SYRINGE/U-100/1ML/29G X 1/2"	4	RX/OTC
UNIFINE PENTIPS PLUS 29GX12MM	4	RX/OTC	VALUMARK PEN NEEDLES 29GX12MM	4	RX/OTC
UNIFINE PENTIPS PLUS 31GX5MM	4	RX/OTC	VALUMARK PEN NEEDLES 31GX 6MM	4	RX/OTC
UNIFINE PENTIPS PLUS 31GX6MM	4	RX/OTC	VALUMARK PEN NEEDLES 31GX 8MM	4	RX/OTC
UNIFINE PENTIPS PLUS 31GX8MM	4	RX/OTC	VANISHPOINT INSULIN SYRINGE/0.5ML/30G X 1/2"	4	
UNIFINE PENTIPS PLUS 32GX4MM	4	RX/OTC	VANISHPOINT INSULIN SYRINGE/0.5ML/30G X 5/16"	4	RX/OTC
UNIFINE PENTIPS PLUS 33GX 5/32"	4		VANISHPOINT INSULIN SYRINGE/1ML/29G X 1/2"	4	RX/OTC
UNIFINE PENTIPS PLUS 33GX4MM	4		VANISHPOINT INSULIN SYRINGE/1ML/30G X 5/16"	4	RX/OTC
UNIFINE PROTECT SAFETY PEN NEEDLE 30G X 8MM	4		VERIFINE INSULIN PEN NEEDLE 29G X 12MM	4	RX/OTC
UNIFINE PROTECT SAFETY PEN NEEDLE 32G X 4MM	4	RX/OTC	VERIFINE INSULIN PEN NEEDLE 31G X 5MM	4	RX/OTC
UNIFINE SAFECONTROL PEN NEEDLE 31GX5MM	4	RX/OTC	VERIFINE INSULIN PEN NEEDLE 31G X 8MM	4	RX/OTC
UNIFINE SAFECONTROL PEN NEEDLE 31GX6MM	4	RX/OTC	VERIFINE INSULIN PEN NEEDLE 32G X 4MM	4	RX/OTC
UNIFINE SAFECONTROL PEN NEEDLE 31GX8MM	4	RX/OTC	VERIFINE INSULIN PEN NEEDLE 32G X 6MM	4	
UNIFINE SAFECONTROL PEN NEEDLE 32GX4MM	4	RX/OTC	VERIFINE INSULIN SYRINGE/0.3ML/31G X 8MM	4	RX/OTC
UNIFINE SAFECONTROL PEN NEEDLE/30G X 5/16"	4		VERIFINE INSULIN SYRINGE/0.5ML/29G X 12MM	4	RX/OTC
UNIFINE ULTRA PEN NEEDLE/31GX5MM	4	RX/OTC	VERIFINE INSULIN SYRINGE/0.5ML/31G X 8MM	4	RX/OTC
UNIFINE ULTRA PEN NEEDLE/31GX6MM	4	RX/OTC			
UNIFINE ULTRA PEN NEEDLE/31GX8MM	4	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
VERIFINE INSULIN SYRINGE/1ML/29G X 12MM	4	RX/OTC	WEGMANS UNIFINE PENTIPS PLUS 32GX4MM	4	RX/OTC
VERIFINE INSULIN SYRINGE/1ML/31G X 8MM	4	RX/OTC	WEGMANS UNIFINE PENTIPS PLUS/MINI/31GX5MM	4	RX/OTC
VERIFINE INSULIN SYRINGE0.3ML/31G X 8MM	4	RX/OTC	WEGMANS UNIFINE PENTIPS PLUS/SHORT/31GX8MM	4	RX/OTC
VERIFINE INSULIN SYRINGE0.5ML/29G X 12MM	4	RX/OTC	WEGMANS UNIFINE PENTIPS PLUS/ULTRA SHORT/31GX6MM	4	RX/OTC
VERIFINE INSULIN SYRINGE0.5ML/31G X 8MM	4	RX/OTC	ZEV RX INSULIN SYRINGE/0.5ML/30G X 1/2"	4	
VERIFINE INSULIN SYRINGE1ML/29G X 12MM	4	RX/OTC	ZEV RX INSULIN SYRINGE/0.5ML/30G X 5/16"	4	RX/OTC
VERIFINE INSULIN SYRINGE1ML/31G X 8MM	4	RX/OTC	ZEV RX INSULIN SYRINGE/1ML/30G X 1/2"	4	RX/OTC
VERIFINE PLUS INSULIN PEN NEEDLE 31G X 5MM	4	RX/OTC	ZEV RX INSULIN SYRINGE/1ML/30G X 5/16"	4	RX/OTC
VERIFINE PLUS INSULIN PEN NEEDLE 31G X 8MM	4	RX/OTC	ZEV RX PEN NEEDLES 31G X 5MM	4	RX/OTC
VERIFINE PLUS INSULIN PEN NEEDLES 32G X 4MM	4	RX/OTC	ZEV RX PEN NEEDLES 31G X 6MM	4	RX/OTC
VERIFINE PLUS PEN NEEDLE/32G X 4MM	4	RX/OTC	ZEV RX PEN NEEDLES 31G X 8MM	4	RX/OTC
VIDA MIA UNIFINE PENTIPS32GX4MM	4	RX/OTC	ZEV RX PEN NEEDLES 32G X 4MM	4	RX/OTC
VIDA MIA UNIFINE PENTIPSMINI 31GX6MM	4	RX/OTC	Respiratory Aids		
VIDA MIA UNIFINE PENTIPSORIGINAL 29GX12MM	4	RX/OTC	ACTEEV PROTECT FACE MASK	3	4 max fill(s) per 365 day(s) retail; RX/OTC
VIDA MIA UNIPFINE PENTIPSSHORT 31GX8MM	4	RX/OTC	BREATHE COMFORT PROTECTIVE SHIELD	3	4 max fill(s) per 365 day(s) retail; RX/OTC
VP INSULIN SYRINGE/U-100/0.3ML/29G X 1/2"	4	RX/OTC	CLEVER CHOICE DISPOSABLEFACE MASK/MEDICAL GRADE	3	4 max fill(s) per 365 day(s) retail; RX/OTC
			CLEVER CHOICE DISPOSABLEMASK/NON-MEDICAL	3	4 max fill(s) per 365 day(s) retail; RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CLEVER CHOICE FACE MASK	3	4 max fill(s) per 365 day(s) retail; RX/OTC	MASK PEDIATRIC SIZE 1"	3	4 max fill(s) per 365 day(s) retail; RX/OTC
CVS MEDICAL FACE MASKS/EAR LOOP	3	4 max fill(s) per 365 day(s) retail; RX/OTC	N95 FACE MASK	3	4 max fill(s) per 365 day(s) retail; RX/OTC
CVS PROCEDURAL MASK	3	4 max fill(s) per 365 day(s) retail; RX/OTC	N95 PARTICULATE RESPIRATOR FACE MASK	3	4 max fill(s) per 365 day(s) retail; RX/OTC
DISPOSABLE FACE MASK	3	4 max fill(s) per 365 day(s) retail; RX/OTC	NEXCARE ALL PURPOSE MASK	3	4 max fill(s) per 365 day(s) retail; RX/OTC
DISPOSABLE FACE MASK 3-PLY	3	4 max fill(s) per 365 day(s) retail; RX/OTC	NEXCARE EARLOOP MASK	3	4 max fill(s) per 365 day(s) retail; RX/OTC
EAR-LOOP MASK SMALL	3	4 max fill(s) per 365 day(s) retail; RX/OTC	PEDIATRIC MEDIUM MASK	3	4 max fill(s) per 365 day(s) retail; RX/OTC
EASY FLOW KN 95 MASK	3	4 max fill(s) per 365 day(s) retail; RX/OTC	PEDIATRIC SMALL MASK	3	4 max fill(s) per 365 day(s) retail; RX/OTC
FACE MASK EARLOOP-STYLE	3	4 max fill(s) per 365 day(s) retail; RX/OTC	SAFE-SENSE EARLOOP FACE MASK	3	4 max fill(s) per 365 day(s) retail; RX/OTC
FACE MASK RESPIRATOR N-100 PARTICULATE W/EXHALATION VALVE	3	4 max fill(s) per 365 day(s) retail; RX/OTC	SHIELD-SECURE FULL FACE SHIELD	3	4 max fill(s) per 365 day(s) retail; RX/OTC
FACE MASK RESPIRATOR R-95 PARTICULATE	3	4 max fill(s) per 365 day(s) retail; RX/OTC	SURGICAL DISPOSABLE FACEMASK 3-PLY	3	4 max fill(s) per 365 day(s) retail; RX/OTC
FACE MASK SURGICAL/DISPOSABLE	3	4 max fill(s) per 365 day(s) retail; RX/OTC	SURGICAL FACE MASK/NIOSHN95	3	4 max fill(s) per 365 day(s) retail; RX/OTC
FACE MASK/3 PLY/EAR LOOP	3	4 max fill(s) per 365 day(s) retail; RX/OTC	Respiratory Therapy Supplies		
FACE MASKS 3 LAYER NON-MEDICAL	3	4 max fill(s) per 365 day(s) retail; RX/OTC	ACE AEROSOL CLOUD ENHANCER MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
J & J GERM FILTER MASK	3	4 max fill(s) per 365 day(s) retail; RX/OTC	ACTIVITY POUCH MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
KN95 DISPOSABLE MASK FORCIVIL USE	3	4 max fill(s) per 365 day(s) retail; RX/OTC	ADAPTER PED DISPOSABLE MOUTHPIECE MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
KN95 MEDICAL PROTECTIVE FACE MASK	3	4 max fill(s) per 365 day(s) retail; RX/OTC	ADULT AEROSOL MASK MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ADULT DISPOSABLE MOUTHPIECE MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	AEROCHAMBER PLUS FLOW-VU/INTERMEDIATE MASK DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
ADULT MASK LARGE MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	AEROCHAMBER PLUS FLOW-VU/LARGE MASK DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
ADULT MASK DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	AEROCHAMBER PLUS FLOW-VU/LARGE MASK MISC	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
AEROBIKA DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	AEROCHAMBER PLUS FLOW-VU/MASK MISC	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
AEROCHAMBER HOLDING CHAMBER DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	AEROCHAMBER PLUS FLOW-VU/MEDIUM MASK DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
AEROCHAMBER MINI AEROSOLCHAMBER DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	AEROCHAMBER PLUS FLOW-VU/MEDIUM MASK MISC	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
AEROCHAMBER MV MISC	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	AEROCHAMBER PLUS FLOW-VU/SMALL MASK DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
AEROCHAMBER PLUS FLOW VU MISC	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	AEROCHAMBER PLUS FLOW-VU/SMALL MASK MISC	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
AEROCHAMBER PLUS FLOW VUMOUTHPIECE DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC			

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AEROCHAMBER PLUS FLOW-VU MISC	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	AEROECLIPSE MASK MEDIUM MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
AEROCHAMBER Z-STAT PLUS VALVED HOLDING CHAMBER W/FLOW VU MISC	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	AEROECLIPSE MASK SMALL MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
AEROCHAMBER Z-STAT PLUS/FLOWSIGNAL MISC	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	AEROTRACH PLUS MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
AEROCHAMBER Z-STAT PLUS/LARGE MASK MISC	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	AEROVENT PLUS HOLDING CHAMBER/COLLAPSIBLE DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
AEROCHAMBER Z-STAT PLUS/MEDIUM MASK MISC	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	AIRS PEDIATRIC AEROSOL MASK MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
AEROCHAMBER Z-STAT PLUS/SMALL MASK MISC	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	AIRZONE PEAK FLOW METER	3	QL(4 ea per 365 day(s) retail); RX/OTC
AEROCHAMBER/FLOWSIGNAL MISC	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	ALL FLOW 1000 PFT FILTER DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
AEROECLIPSE EZ TWIST TUBING MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	ALL FLOW 1000 PULMONARY FUNCTION FILTER MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
AEROECLIPSE MASK LARGE MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	ALL FLOW 2000 PFT FILTER DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
			ALL FLOW 3000 PFT FILTER DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
			ALL FLOW 4000 PFT FILTER DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ALL FLOW 5000 PFT FILTER DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	BREATHE EASE/LARGE MASK DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
ALL FLOW 6000 PFT FILTER DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	BREATHE EASE/MEDIUM MASK DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
ALL FLOW 7000 PFT FILTER DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	BREATHE EASE/SMALL MASK DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
ASSESS PEAK FLOW METER FULL RANGE	3	QL(4 ea per 365 day(s) retail); RX/OTC	BREATHERITE VALVED MDI CHAMBER/COLLAPSIBLE DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
ASSESS PEAK FLOW METER LOW RANGE	3	QL(4 ea per 365 day(s) retail); RX/OTC	BREATHERITE VALVED MDI CHAMBER/RIGID DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
BREATHE COMFORT ANTI-STATIC VALVED HOLDING CHAMBER/ADULT DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	BUBBLES THE FISH II PEDIATRIC MASK/PVC MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
BREATHE COMFORT ANTI-STATIC VALVED HOLDING CHAMBER/CHILD DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	CARETOUCH 2 CPAP HOSE HANGER MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
BREATHE EASE NEBULIZER MASK/CHILD MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	CARETOUCH CPAP & BIPAP HOSE/6FT MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
BREATHE EASE NEBULIZER MASK/INFANT MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	CARETOUCH CPAP MASK WIPES MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
BREATHE EASE PEAK FLOW METER	3	QL(4 ea per 365 day(s) retail); RX/OTC	CARETOUCH CPAP NEUTRALIZING PRE-WASH MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
			CARETOUCH CPAP TUBE CLEANING BRUSH MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CARETOUCH UNIVERSAL CPAPFILTERS MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	COMPACT SPACE CHAMBER/ANTI-STATIC/LARGE MASK DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
CLEVER CHOICE ANTI-STATICVALVED HOLDING CHAMBER/ADULT LARGE DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	COMPACT SPACE CHAMBER/ANTI-STATIC/MEDIUM MASK DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
CLEVER CHOICE ANTI-STATICVALVED HOLDING CHAMBER/MEDIUM/3 YEA DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	COMPACT SPACE CHAMBER/ANTI-STATIC/SMALL MASK DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
CLEVER CHOICE ANTI-STATICVALVED HOLDING CHAMBER/MEDIUM DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	COMPACT SPACE CHAMBER/ANTI-STATIC DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
CLEVER CHOICE ANTI-STATICVALVED HOLDING CHAMBER/SMALL INFANT DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	DISPOSABLE MOUTHPIECE FULL RANGE MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
CLEVER CHOICE ANTI-STATICVALVED HOLDING CHAMBER/SMALL DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	DISPOSABLE MOUTHPIECE LOWRANGE/PEDIATRIC MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
CLEVER CHOICE PEAK FLOW METER	3	QL(4 ea per 365 day(s) retail); RX/OTC	DISPOSABLE MOUTHPIECE/LOW RANGE MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
CO MONITOR REPLACEMENT TPIECES MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	DISPOSABLE MOUTHPIECE/UNIVERSAL RANGE MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
CO MONITOR DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	DISPOSABLE PAPER MOUTHPIECE MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
			EASIVENT/MASK-LARGE MISC	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
EASIVENT/MASK-MEDIUM MISC	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	EASY FLOW BLACK/WHITE DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
EASIVENT/MASK-SMALL MISC	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	EASY FLOW BLACK/YELLOW DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
EASIVENT MISC	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	EASY FLOW HEPA FILTER MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
EASY FLOW 300 MM HOSE MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	EASY FLOW WHITE/BLUE DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
EASY FLOW 400 MM HOSE MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	EASY FLOW WHITE/GREEN DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
EASY FLOW AIR NOZZLE MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	EASY FLOW WHITE/PINK DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
EASY FLOW BLACK/BLUE DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	EASY FLOW WHITE/WHITE DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
EASY FLOW BLACK/ORANGE DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	EASY FLOW WHITE/YELLOW DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
EASY FLOW BLACK/RED DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	EBASE CONTROLLER KIT MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
EQ SPACE CHAMBER ANTI-STATIC/LARGE MASK DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	FULL KIT NEBULIZER SET MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
EQ SPACE CHAMBER ANTI-STATIC/MEDIUM MASK DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	IN-CHECK DIAL INSPIRATORYFLOW TRAINER DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
EQ SPACE CHAMBER ANTI-STATIC/SMALL MASK DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	IN-CHECK INSPIRATORY FLOWMETER/NASAL WITH MASK DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
EQ SPACE CHAMBER ANTI-STATIC DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	IN-CHECK INSPIRATORY FLOWMETER/ORAL DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
EXPIRATORY MOUTHPIECE MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	INNOSPIRE REPLACEMENT FILTER MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
FILTER AIR PP MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	INSPIREASE DRUG DELIVERYSYSTEM MISC	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
FLEXICHAMBER ADULT MASK/SMALL	3	4 max fill(s) per 365 day(s) retail; RX/OTC	KOKO PEAK PRO REPLACEMENTPLASTIC MOUTHPIECE MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
FLEXICHAMBER CHILD MASK/LARGE	3	4 max fill(s) per 365 day(s) retail; RX/OTC	LITETOUCH MASK LARGE MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
FLEXICHAMBER CHILD MASK/SMALL	3	4 max fill(s) per 365 day(s) retail; RX/OTC	LITETOUCH MASK MEDIUM MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
FLEXICHAMBER DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	LITETOUCH MASK SMALL MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
FLYP HYPERSONIQ CARTRIDGE MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	LUNG PERFORMANCE PEAK FLOW METER	3	QL(4 ea per 365 day(s) retail); RX/OTC
			MASK VORTEX/CHILD/FROG	3	4 max fill(s) per 365 day(s) retail; RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MASK VORTEX/TODDLER/LAD YBUG	3	4 max fill(s) per 365 day(s) retail; RX/OTC	NEBULIZER MASK CHILD MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
MICROCHAMBER DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	NOSE CLIP MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
MICROCHAMBER MISC	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	OMBRA COMPRESSOR AIR FILTERS MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
MICROLIFE DIGITAL PEAK FLOW METER	3	QL(4 ea per 365 day(s) retail); RX/OTC	OMBRA TABLE TOP COMPRESSOR DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
MICROSPACER MISC	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	ONE FLOW FVC MONITORING SPIROMETER DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
MINI WRIGHT AFS PEAK FLOWMETER LOW RANGE	3	QL(4 ea per 365 day(s) retail); RX/OTC	ONE FLOW TESTER TUBE MOUTHPIECE MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
MINI WRIGHT PEAK FLOW METER	3	QL(4 ea per 365 day(s) retail); RX/OTC	ONE-WAY VALVED EXPIRATORY MOUTHPIECE/DISPOSABLE MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
MINI WRIGHT PEAK FLOW METER STANDARD RANGE	3	QL(4 ea per 365 day(s) retail); RX/OTC	ONE-WAY VALVED INSPIRATORY MOUTHPIECE/DISPOSABLE MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
MINIELITE FILTER REPLACEMENTS MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	OPTICHAMBER DIAMOND/LARGEFACE MASK DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
NEBULIZER AIR TUBE/PLUGS MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	OPTICHAMBER DIAMOND/MEDIUM FACE MASK MISC	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
NEBULIZER CUP/TUBING DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	OPTICHAMBER DIAMOND/SMALLFACE MASK MISC	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
NEBULIZER MASK ADULT MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC			

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OPTICHAMBER DIAMOND DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	PARI MASK SET MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
			PARI SMARTMASK BABY/ELBOW MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
OPTICHAMBER DIAMOND MISC	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	PARI SOFT PLASTIC ADULT MASK MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
			PARI SOFT PLASTIC PEDIATRIC MASK MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
PANDA MASK LARGE	3	4 max fill(s) per 365 day(s) retail; RX/OTC	PARI TREK S COMBO PACK DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
PANDA MASK MEDIUM	3	4 max fill(s) per 365 day(s) retail; RX/OTC			
PANDA MASK SMALL	3	4 max fill(s) per 365 day(s) retail; RX/OTC	PARI VORTEX ADULT MASK	3	4 max fill(s) per 365 day(s) retail; RX/OTC
PARI ALTERA NEBULIZER HANDSET MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	PEAK A-I-R FLOW METER	3	QL(4 ea per 365 day(s) retail); RX/OTC
PARI BABY CONVERSION KITSIZE 1 MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	PEAK AIR PEAK FLOW METERADULT/PEDIATRIC	3	QL(4 ea per 365 day(s) retail); RX/OTC
PARI BABY CONVERSION KITSIZE 2 MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	PEDIATRIC DISPOSABLE MOUTPIECE MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
PARI BABY CONVERSION KITSIZE 3 MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	PEDIATRIC MOUTHPIECE/DISPOSABLE MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
PARI BUBBLES PEDIATRIC AEROSOL MASK MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	PEDIATRIC PANDA MASK	3	4 max fill(s) per 365 day(s) retail; RX/OTC
PARI ERAPID NEBULIZER HANDSET MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	PERSONAL BEST FULL RANGE	3	QL(4 ea per 365 day(s) retail); RX/OTC
PARI EXPIRATORY FILTER VALVE SET DEVI	3	4 max fill(s) per 365 day(s) retail; RX/OTC	PFLEX MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
PARI MANUAL INTERRUPTER DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	PHARMACIST CHOICE NEBULIZER/CPAP/INHALER CHAMBER MASK WIPES MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
			PIKO 1 ELECTRONIC	3	QL(4 ea per 365 day(s) retail); RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PILLOW MASK/ADULT MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	PROCARE SPACER CHAMBER W/ADULT MASK DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
PILLOW MASK/CHILD MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	PROCARE SPACER CHAMBER W/CHILD MASK DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
PILLOW MASK/PEDIATRIC MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	PROCHAMBER VALVED HOLDINGCHAMBER DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
POCKET CHAMBER DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	PRONEB ULTRA FILTER SET MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
POCKET PEAK FLOW METER	3	QL(4 ea per 365 day(s) retail); RX/OTC	PURE COMFORT 3-BALL BREATH EXERCISER DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
POCKET SPACER DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	PURE COMFORT INHALER SPACER CHAMBER ADULT DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
POCKETPEAK PEAK FLOW METER LOW RANGE	3	QL(4 ea per 365 day(s) retail); RX/OTC	PURE COMFORT PEAK FLOW METER ADULT	3	QL(4 ea per 365 day(s) retail); RX/OTC
POCKETPEAK PEAK FLOW METER/UNIVERSAL RANGE 50-720 LPM	3	QL(4 ea per 365 day(s) retail); RX/OTC	PURE COMFORT PEAK FLOW METER CHILD	3	QL(4 ea per 365 day(s) retail); RX/OTC
PRO COMFORT INHALER SPACER CHAMBER ADULT MISC	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	QUAKE DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
PRO COMFORT INHALER SPACER CHAMBER CHILD MISC	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	REPLACEMENT AIR FILTER MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
PRO COMFORT INHALER SPACER CHAMBER INFANT DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
REPLACEMENT FILTERS MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	SILICONE MASK FOR BREATHERITE CHAMBER/PEDIATRIC MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
REUSABLE COMFORTSEAL MASK/LARGE/AEROECLIPSE MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	SILICONE MASK FOR BREATHRITE CHAMBER/ADULT MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
REUSABLE COMFORTSEAL MASK/MEDIUM/AEROECLIPSE MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	SOOTHENEB NBL 100 CHILD MASK MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
REUSABLE COMFORTSEAL MASK/SMALL/AEROECLIPSE MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	SOOTHENEB NBL 100 MEDICATION CUP MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
RITFLO DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC	SOOTHENEB NBL 100 MESH CAP MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
SAMI THE SEAL REPLACEMENTFILTERS MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	SOOTHENEB NBL100 ADULT MASK MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
SIDESTREAM ADULT FACE MASK MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	SPIRO PD DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
SIDESTREAM PEDIATRIC FACEMASK/SAMI THE SEAL MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	STRIVE DUAL ZONE PEAK FLOW METER	3	QL(4 ea per 365 day(s) retail); RX/OTC
SIDESTREAM PEDIATRIC FACEMASK/TUCKER THE TURTLE MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	THRESHOLD IMT MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
SIDESTREAM PEDIATRIC FACEMASK MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	THRESHOLD PEP DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
SIDESTREAM PLUS ADULT FACE MASK MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	TRUZONE PEAK FLOW METER	3	QL(4 ea per 365 day(s) retail); RX/OTC
SILICONE MASK FOR BREATHERITE CHAMBER/ADULT MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	TUBING/WING TIP MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
SILICONE MASK FOR BREATHERITE CHAMBER/INFANT MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC	ULTRA NEB NEBULIZER ACCESSORIES KIT MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC

Drug Name	Drug Tier	Requirements/Limits
VERSAPAP/UNIVERSAL TUBING DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
VERSAPAP DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
VORTEX HOLDING CHAMBER/MASK/CHILD S/FROG DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
VORTEX HOLDING CHAMBER/MASK/TODDLER/LADY BUG DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
VORTEX VALVED HOLDING CHAMBER DEVI	3	QL(4 ea per 365 day(s) retail); 4 max fill(s) per 365 day(s) retail; RX/OTC
WINDMILL TRAINER MISC	3	4 max fill(s) per 365 day(s) retail; RX/OTC
MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches		
Calcitonin Gene-Related Peptide (CGRP) Receptor Antag		
AIMOVIG 140 MG/ML	1	QL(0.034 ml daily); AL(At least 18 yrs old); MP; PA
AIMOVIG 70 MG/ML	1	QL(0.067 ml daily); AL(At least 18 yrs old); MP; PA

Drug Name	Drug Tier	Requirements/Limits
AJOVY SOAJ	2	QL(0.05 ml daily); AL(At least 18 yrs old); MP
AJOVY SOSY	2	QL(0.05 ml daily); AL(At least 18 yrs old); MP
EMGALITY SOAJ	1	QL(0.034 ml daily); AL(At least 18 yrs old); MP; PA
EMGALITY SOSY 100 MG/ML	1	QL(0.1 ml daily); AL(At least 18 yrs old); MP; PA
EMGALITY SOSY 120 MG/ML	1	QL(0.034 ml daily); AL(At least 18 yrs old); MP; PA
NURTEC	1	QL(0.6 ea daily); AL(At least 18 yrs old); MP; PA
QULIPTA	2	QL(1 ea daily); AL(At least 18 yrs old); MP
UBRELVY	2	QL(16 ea per 30 day(s) retail); AL(At least 18 yrs old)
ZAVZPRET	2	QL(0.27 ea daily); AL(At least 18 yrs old)
Migraine Combinations		
<i>sumatriptan-naproxen sodium</i>	2	
TREXIMET (<i>sumatriptan-naproxen sodium</i>)	2	
Migraine Products - NSAIDs		
ELYXYB	2	QL(0.47 ml daily); AL(At least 18 yrs old)
Serotonin Agonists		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>almotriptan malate</i>	2	QL(9 ea per fill retail)	ZEMBRACE SYMTOUCH SOAJ	2	
<i>eletriptan hydrobromide</i>	2	QL(12 ea per fill retail)	<i>zolmitriptan SOLN</i>	2	
FROVA (<i>frovatriptan succinate</i>)	2	QL(18 ea per fill retail)	<i>zolmitriptan TABS</i>	2	QL(12 ea per fill retail)
<i>frovatriptan succinate</i>	2	QL(18 ea per fill retail)	<i>zolmitriptan TBDP 2.5 MG</i>	2	QL(12 ea per fill retail)
IMITREX 5 MG/ACT, 20 MG/ACT (<i>sumatriptan</i>)	1	QL(6 ea per fill retail)	ZOMIG SOLN	2	
IMITREX STATDOSE REFILL SOCT (<i>sumatriptan succinate</i>)	2	QL(4 ml per fill retail)	ZOMIG SOLN (<i>zolmitriptan</i>)	2	
IMITREX STATDOSE SYSTEM SOAJ (<i>sumatriptan succinate</i>)	2	QL(4 ml per fill retail)	ZOMIG TABS 2.5 MG, 5 MG (<i>zolmitriptan</i>)	2	QL(12 ea per fill retail)
IMITREX TABS (<i>sumatriptan succinate</i>)	2	QL(18 ea per fill retail)	MINERALS & ELECTROLYTES		
MAXALT-MLT TBDP 10 MG (<i>rizatriptan benzoate</i>)	2	QL(18 ea per fill retail)	Calcium		
MAXALT TABS 10 MG (<i>rizatriptan benzoate</i>)	2	QL(18 ea per fill retail)	CALCIUM 600+D HIGH POTENCY TABS	3	MP
<i>naratriptan hcl</i>	2	QL(9 ea per fill retail)	CALCIUM CARBONATE EXTRA LIGHT POWD XX	4	RX/OTC
RELPAX (<i>eletriptan hydrobromide</i>)	2	QL(12 ea per fill retail)	CALCIUM CARBONATE HEAVY POWD XX	4	RX/OTC
REYVOW	2	QL(8 ea per 30 day(s) retail); AL(At least 18 yrs old)	CALCIUM CARBONATE LIGHT POWD XX	4	RX/OTC
<i>rizatriptan benzoate TABS</i>	1	QL(18 ea per fill retail)	<i>calcium carbonate-cholecalciferol TABS</i>	3	
<i>rizatriptan benzoate TBDP</i>	1	QL(18 ea per fill retail)	CALCIUM CARBONATE POWD XX	4	RX/OTC
<i>sumatriptan</i>	1	QL(6 ea per fill retail)	<i>calcium carbonate TABS 500 MG, 600 MG, 1250 MG, 1500 MG</i>	3	
<i>sumatriptan succinate SOAJ</i>	1	QL(4 ml per fill retail)	<i>calcium carbonate-vitamin d w/ minerals TABS</i>	4	MP
<i>sumatriptan succinate SOCT</i>	1	QL(4 ml per fill retail)	<i>calcium carbonate-vitamin d TABS 125 UNIT-250 MG, 250 MG-125 UNIT, 600 MG-200 UNIT</i>	3	MP
<i>sumatriptan succinate SOLN 6 MG/0.5ML</i>	1	QL(2 ml per fill retail)	<i>calcium citrate TABS 200 MG</i>	3	MP
<i>sumatriptan succinate TABS</i>	1	QL(18 ea per fill retail)	CALCIUM CITRATE TABS 250 MG	3	
TOSYMRA	2	QL(6 ea per fill retail)			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>calcium citrate-vitamin d TABS 200 UNIT-315 MG, 250 UNIT-315 MG, 5 MCG-315 MG, 6.25 MCG-315 MG</i>	3	MP	HYDRALYTE SOLN	3	MP
<i>calcium gluconate SOLN</i>	3		KINDERLYTE PREMAX SOLN	3	MP
CALCIUM GLUCONATE SOLN (<i>calcium gluconate</i>)	3		KINDERLYTE SOLN	3	MP
CALCIUM PHOSPHATE DIBASIC	4		<i>oral electrolytes SOLN</i>	3	MP
CALCIUM PHOSPHATE DIBASICDIHYDRATE	4		ORALYTE SOLN	3	MP
<i>calcium TABS</i>	3		PEDIALYTE ADVANCED CARE SOLN (<i>oral electrolytes</i>)	3	MP
CALTRATE 600+D3 TABS (<i>calcium carbonate-cholecalciferol</i>)	3	MP	PEDIALYTE FREEZER POPS SOLN (<i>oral electrolytes</i>)	3	MP
CALTRATE BONE HEALTH TABS (<i>calcium carbonate-cholecalciferol</i>)	3	MP	PEDIALYTE IMMUNE SUPPORT SOLN	3	MP
CITRACAL + D3 MAXIMUM TABS (<i>calcium citrate-vitamin d</i>)	3	MP	PEDIALYTE SINGLES SOLN (<i>oral electrolytes</i>)	3	MP
<i>oyster shell</i>	3	MP	PEDIALYTE SOLN (<i>oral electrolytes</i>)	3	MP
OYSTER SHELL CALCIUM/D TABS	3	MP	TRUELYTE SOLN	3	MP
Electrolyte Mixtures			Fluoride		
BIOLYTE SOLN	3	MP	<i>sodium fluoride CHEW 0.25 MG, 0.5 MG, 1 MG, 2.2 MG</i>	3	AL(Up to 16 yrs old)
CERALYTE 70 SOLN	3	MP	<i>sodium fluoride SOLN 0.5 MG/ML</i>	3	AL(Up to 16 yrs old); RX/OTC
CERASPORT EX1 SOLN	3	MP	SOLUVITA SOLN	3	AL(Up to 16 yrs old); RX/OTC
CERASPORT SOLN	3	MP	Magnesium		
ENFAMIL ENFALYTE SOLN	3	MP	BEELITH	3	MP
EQUALYTE SOLN (<i>oral electrolytes</i>)	3	MP	<i>magnesium chloride SOLN</i>	3	MP
FT ELECTROLYTE SOLUTION SOLN	3	MP	MAGNESIUM CITRATE TABS 100 MG	3	
GOODSENSE ELECTROLYTE ADVANTAGE CARE SOLN	3	MP	<i>magnesium gluconate TABS 27.5 MG</i>	3	
HYDRALYTE FREEZER POPS SOLN	3	MP	<i>magnesium oxide (mg supplement) TABS 241.5 MG, 400 MG, 500 MG</i>	3	MP
			MAGNESIUM OXIDE TABS	3	
			<i>magnesium sulfate IV</i>	3	MP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MAGNESIUM SULFATE IV (<i>magnesium sulfate</i>)	3	MP	CVS CALCIUM CITRATE+D3 TABS	4	MP
MAGNESIUM SULFATE IJ 50 %	3	MP	FEM-CAL CITRATE TABS	4	MP
MAGNESIUM SULFATE IN D5W (<i>magnesium sulfate in dextrose</i>)	3	MP	MULTI MEGA MINERALS TABS	4	MP
<i>magnesium sulfate in dextrose</i>	3	MP	<i>multiple minerals w/ vitamins TABS</i>	4	MP
<i>magnesium TABS 100 MG</i>	3		MULTISOURCE CALCIUM MAGNESIUM & D FORMULA TABS	4	MP
MAGOX 400 TABS (<i>magnesium oxide (mg supplement)</i>)	NF		PROSTEON TABS	4	MP
NU-MAG	3	MP	THERACAL D2000 TABS	4	MP
SLOW-MAG	3	MP	THERACAL D4000 TABS	4	MP
SLOWMAG MG MUSCLE/HEART	3	MP	THERACAL RAPID REPLETION TABS	4	MP
Mineral Combinations			Phosphate		
ADVANCED CALCIUM/VITAMIND/MAGNESIUM TABS	4	MP	GLYCOPHOS	3	MP
BONE DENSITY BUILDER TABS	4	MP	K-PHOS TABS (<i>potassium phosphate monobasic</i>)	3	
CALCIUM 600+D3 PLUS MINERALS TABS	4	MP	PHOS-NAK POWDER CONCENTRATE PACK (<i>potassium & sodium phosphates</i>)	NF	
CALCIUM/MAGNESIUM/ZINC/D3 TABS	4	MP	PHOS-NAK POWDER CONCENTRATE PACK (<i>potassium & sodium phosphates</i>)	1	
CALCIUM/MAGNESIUM/ZINC/VITAMIN D3 TABS	4	MP	<i>potassium & sodium phosphates PACK</i>	1	
CALCIUM/MAGNESIUM/ZINC TABS 200 UNIT-333 MG-133 MG-5 MG	4	MP	<i>potassium phosphate monobasic TABS</i>	3	
CAL-MAG-ZINC-D3 TABS	4	MP	<i>potassium phosphates 236 MG/ML-224 MG/ML</i>	3	MP
CAL-MAG-ZINC-D TABS	4	MP	POTASSIUM PHOSPHATES 236 MG/ML-224 MG/ML (<i>potassium phosphates</i>)	3	MP
CITRACAL MAXIMUM PLUS TABS	4	MP	<i>sodium phosphates (sodium phosphate dibasic & monobasic) 142 MG/ML-276 MG/ML, 710 MG/5ML-1380 MG/5ML</i>	3	MP
CVS CALCIUM CITRATE+D3 W/MAGNESIUM TABS	4	MP			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Potassium			CELLCEPT SUSR (<i>mycophenolate mofetil</i>)	3	SP
K-TAB TBCR 10 MEQ, 20 MEQ (<i>potassium chloride</i>)	3		CELLCEPT TABS (<i>mycophenolate mofetil</i>)	3	SP
<i>potassium bicarbonate TBEF</i>	3	MP	<i>cyclosporine modified (for microemulsion) CAPS</i>	3	SP
<i>potassium chloride microencapsulated crystals er 10 MEQ, 20 MEQ</i>	3	MP	<i>cyclosporine modified (for microemulsion) SOLN</i>	3	SP
<i>potassium chloride CPCR</i>	3	MP	<i>cyclosporine CAPS</i>	3	SP
<i>potassium chloride TBCR</i>	3		<i>cyclosporine SOLN IV 50 MG/ML</i>	3	SP
Sodium			ENSPRYNG	3	AL (At least 18 yrs old); SP; PA
<i>sodium chloride SOLN IV 0.9 %</i>	4	MP	ENVARBUS XR TB24	3	SP
SODIUM CHLORIDE SOLN IV 0.9 %	4	MP	<i>everolimus (immunosuppressant)</i>	3	SP
<i>sodium chloride TABS</i>	3		IMURAN TABS (<i>azathioprine</i>)	3	SP
Zinc			<i>mycophenolate mofetil hcl</i>	3	SP
ORAZINC TABS	3		<i>mycophenolate mofetil CAPS</i>	3	SP
<i>zinc gluconate TABS 100 MG</i>	3		<i>mycophenolate mofetil SUSR</i>	3	SP
<i>zinc sulfate CAPS</i>	4		<i>mycophenolate mofetil TABS</i>	3	SP
<i>zinc sulfate TABS</i>	3		<i>mycophenolate sodium</i>	3	SP
MISCELLANEOUS THERAPEUTIC CLASSES					
Immunomodulators					
<i>lenalidomide</i>	3	SP	MYFORTIC (<i>mycophenolate sodium</i>)	3	SP
REVLIMID	3	SP	NEORAL CAPS (<i>cyclosporine modified (for microemulsion)</i>)	3	SP
REZUROCK	3	SP	NEORAL SOLN (<i>cyclosporine modified (for microemulsion)</i>)	3	SP
THALOMID	3		NULOJIX	3	SP
Immunosuppressive Agents					
ASTAGRAF XL CP24	3	SP	PROGRAF CAPS (<i>tacrolimus</i>)	3	SP
<i>azathioprine TABS</i>	3	SP	PROGRAF PACK	3	SP
CELLCEPT INTRAVENOUS (<i>mycophenolate mofetil hcl</i>)	3	SP	PROGRAF SOLN	3	SP
CELLCEPT CAPS (<i>mycophenolate mofetil</i>)	3	SP	RAPAMUNE SOLN (<i>sirolimus</i>)	3	SP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
RAPAMUNE TABS (<i>sirolimus</i>)	3	SP	DENTA 5000 PLUS SENSITIVE GEL 1.1 %-5 %	3	
SANDIMMUNE CAPS (<i>cyclosporine</i>)	3	SP	FLUORIDEX SENSITIVITY RELIEF/SLS FREE GEL 1.1 %-5 %	3	
SANDIMMUNE SOLN IV 50 MG/ML	3	SP	FLUORIDEX SENSITIVITY RELIEF GEL 1.1 %-5 %	3	
<i>sirolimus</i> SOLN	3	SP	FLUORIMAX 5000 SENSITIVE GEL 1.1 %-5 %	3	
<i>sirolimus</i> TABS	3	SP	PREVIDENT 5000 DRY MOUTH GEL (<i>sodium fluoride (dental)</i>)	3	
<i>tacrolimus</i> CAPS	3	SP	PREVIDENT 5000 ENAMEL PROTECT GEL 1.1 %-5 %	3	
ZORTRESS (<i>everolimus (immunosuppressant)</i>)	3	SP	PREVIDENT 5000 PLUS CREA (<i>sodium fluoride (dental)</i>)	3	
PIK3CA-Related Overgrowth Spectrum (PROS) Agents			PREVIDENT 5000 SENSITIVE GEL 1.1 %-5 %	3	
VIJOICE PACK	CO	SP	PREVIDENT 5000 FLUORIDE GEL (<i>sodium fluoride (dental)</i>)	3	
VIJOICE TBPk	CO	SP	<i>sodium fluoride (dental)</i> CREA	3	
Potassium Removing Agents			<i>sodium fluoride (dental)</i> GEL	3	
<i>sodium polystyrene sulfonate</i> POWD	3	MP	<i>sodium fluoride-potassium nitrate</i> GEL	3	
<i>sodium polystyrene sulfonate</i> SUSP CO 15 GM/60ML	3	MP	Steroids - Mouth/Throat/Dental		
MOUTH/THROAT/DENTAL AGENTS			<i>triamcinolone acetonide (mouth)</i>	3	QL(5 gm per 30 day(s) retail)
Anesthetics Topical Oral			Throat Products - Misc.		
<i>lidocaine hcl (mouth-throat)</i> 2 %	3		<i>pilocarpine hcl (oral)</i>	3	
Anti-infectives - Throat			SALAGEN (<i>pilocarpine hcl (oral)</i>)	3	
<i>clotrimazole</i>	1		MULTIVITAMINS		
NYSTATIN (<i>nystatin (mouth-throat)</i>)	1				
<i>nystatin (mouth-throat)</i>	1				
ORAVIG	2				
Antiseptics - Mouth/Throat					
<i>chlorhexidine gluconate (mouth-throat)</i>	3				
PERIDEX (<i>chlorhexidine gluconate (mouth-throat)</i>)	3				
Dental Products					

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
B-Complex Vitamins			ONE-A-DAY WOMENS FORMULA TABS (multiple vitamins w/ calcium)	3	
<i>b-complex vitamins SOLN 2 MG/ML-100 MG/ML-2 MG/ML-100 MG/ML-2 MG/ML</i>	3	MP	SM ONE DAILY ESSENTIAL TABS	3	
<i>b-complex vitamins TABS</i>	3	MP	Multiple Vitamins w/ Iron		
B-COMPLEX SOLN 2 MG/ML-100 MG/ML-2 MG/ML-100 MG/ML-2 MG/ML	3	MP	<i>multiple vitamins w/ iron TABS</i>	3	MP
VITAMIN B COMPLEX/HYDROXOCOBALAMIN SOLN 2 MG/ML-100 MG/ML-2 MG/ML-100 MG/ML-1 MG/ML-2 MG/ML	3	MP	TAB-A-VITE MULTIVITAMIN/IRON AND BETA-CAROTENE TABS	3	MP
B-Complex w/ Folic Acid			Multiple Vitamins w/ Minerals		
<i>b-complex w/ c & folic acid CAPS</i>	3	MP; RX/OTC	ABC COMPLETE ADULT TABS	3	MP; RX/OTC
<i>b-complex w/ c & folic acid TABS</i>	3	MP	ABC COMPLETE MENS TABS	3	MP; RX/OTC
<i>b-complex w/ folic acid TABS</i>	3	MP	ABC COMPLETE SENIOR 50+ TABS	3	MP; RX/OTC
<i>b-complex w/biotin & folic acid TABS</i>	3	MP	ABC COMPLETE SENIOR MEN'S50+ TABS	3	MP; RX/OTC
DIALYVITE 3000	3	MP	ABC COMPLETE SENIOR WOMENS 50+ TABS	3	MP; RX/OTC
DIALYVITE 5000	3	MP	ABC COMPLETE WOMENS TABS	3	MP; RX/OTC
DIALYVITE 800 PLUS D WAFR	3	MP	ACTIVNUTRIENTS PERFORMANCE CAPS	3	RX/OTC
DIALYVITE 800/ZINC	3	MP	ACTIVNUTRIENTS W/O IRON CAPS	3	RX/OTC
DIALYVITE 800/ZINC 15	3	MP	ACTIVNUTRIENTS CAPS	3	RX/OTC
DIALYVITE/ZINC	3	MP	ADEK GUMMIES PLUS ZN CHEW	3	MP
NEPHPLEX RX	3	MP	ADULT ONE DAILY GUMMIES CHEW	3	MP
SM B-COMPLEX/VITAMIN C TABS	3	MP; RX/OTC	ADVANCED DIABETIC MULTIVITAMIN FORMULA TABS	3	MP; RX/OTC
VITAL-D RX	3	MP	AIRBORNE ELDERBERRY CHEW	3	MP
Multiple Vitamins w/ Calcium			AIRBORNE KIDS CHEW	3	MP
<i>multiple vitamins w/ calcium TABS</i>	3				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
AIRBORNE+GOOD REST CHEW	3	MP	ALIVE MULTI-VITAMIN CHEW	3	MP
AIRBORNE+PROBIOTIC CHEW	3	MP	ALIVE ONCE DAILY WOMENS ULTRA POTENCY TABS	3	MP; RX/OTC
AIRBORNE CHEW	3	MP	ALIVE ULTRA POTENCY ADULT TABS	3	MP; RX/OTC
ALGAE BASED CALCIUM TABS	3	MP; RX/OTC	ALIVE ULTRA POTENCY WOMENS 50+ TABS	3	MP; RX/OTC
ALIVE ADULT PREMIUM GUMMY CHEW	3	MP	ALIVE WOMENS 50+ COMPLETEMULTIVITAMIN TABS	3	MP; RX/OTC
ALIVE CALCIUM BONE SUPPORT MAX ABSORPTION TABS	3	MP; RX/OTC	ALIVE WOMENS 50+ GUMMY MULTIVITAMIN CHEW	3	MP
ALIVE DAILY ENERGY TABS	3	MP; RX/OTC	ALIVE WOMENS 50+ CHEW	3	MP
ALIVE DIABETIC MULTIVITAMIN TABS	3	MP; RX/OTC	ALIVE WOMENS ENERGY TABS	3	MP; RX/OTC
ALIVE ENERGY 50+ TABS	3	MP; RX/OTC	ALIVE WOMENS GUMMY MULTIVITAMIN CHEW	3	MP
ALIVE EVERYDAY IMMUNE HEALTH CAPS	3	RX/OTC	ALPHA BETIC TABS	3	MP; RX/OTC
ALIVE GARDEN GOODNES MENS TABS	3	MP; RX/OTC	ANTIOXIDANT FORMULA TABS	3	MP; RX/OTC
ALIVE GARDEN GOODNES WOMENS TABS	3	MP; RX/OTC	APETIBEX CAPS	3	RX/OTC
ALIVE HAIR, SKIN & NAILS CAPS	3	RX/OTC	APPE-CURB CAPS	3	RX/OTC
ALIVE HAIR, SKIN & NAILS CHEW	3	MP	AZO HORMONAL HEALTH CYCLE CARE & COMFORT TABS	3	MP; RX/OTC
ALIVE MENS 50+ MULTIVITAMAMIN GUMMY CHEW	3	MP	AZO HORMONAL HEALTH HAPPY CYCLE TABS	3	MP; RX/OTC
ALIVE MENS 50+ ULTRA TABS	3	MP; RX/OTC	BACMIN TABS	3	MP; RX/OTC
ALIVE MENS 50+ TABS	3	MP; RX/OTC	BARIATRIC FUSION CHEW	3	MP
ALIVE MENS COMPLETE MAX POTENCY TABS	3	MP; RX/OTC	BARIATRIC MULTIVITAMINS IRON FREE CAPS	3	RX/OTC
ALIVE MENS COMPLETE MULTIVITAMIN TABS	3	MP; RX/OTC	BARIATRIC MULTIVITAMINS/IRON CAPS	3	RX/OTC
ALIVE MENS GUMMY MULTIVITAMIN CHEW	3	MP			
ALIVE MENS ULTRA TABS	3	MP; RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
BARIATRIC MULTIVITAMINS/IRON CHEW	3	MP	CENTRUM ADULTS TABS <i>(multiple vitamins w/ minerals)</i>	3	MP; RX/OTC
BASIC AM TABS	3	MP; RX/OTC	CENTRUM CARDIO TABS	3	MP; RX/OTC
BASIC PM TABS	3	MP; RX/OTC	CENTRUM FLAVOR BURST ADULT CHEW	3	MP
BIO-35 GLUTEN-FREE CAPS	3	RX/OTC	CENTRUM FLAVOR BURST CHEW	3	MP
BIO-35 IRON FREE CAPS	3	RX/OTC	CENTRUM FRESH/FRUITY ADULTS 50+ CHEW	3	MP
BIOCAL CAPS	3	RX/OTC	CENTRUM FRESH/FRUITY ADULTS CHEW	3	MP
BONEUP 3 PER DAY CAPS	3	RX/OTC	CENTRUM MEN TABS	3	MP; RX/OTC
BONEUP VEGETARIAN TABS	3	MP; RX/OTC	CENTRUM MINIS ADULTS 50+ TABS	3	MP; RX/OTC
BONEUP CAPS	3	RX/OTC	CENTRUM MINIS MEN 50+ TABS	3	MP; RX/OTC
BOOSTNOW IMMUNE SUPPORT CAPS	3	RX/OTC	CENTRUM MINIS WOMEN 50+ TABS	3	MP; RX/OTC
CAL-DAY 1000 TABS	3	MP; RX/OTC	CENTRUM MINIS WOMEN IMMUNE SUPPORT TABS	3	MP; RX/OTC
CELEBRATE MULTI-COMplete18 CAPS	3	RX/OTC	CENTRUM MULTIGUMMIES MULTI +OMEGA 3 CHEW	3	MP
CELEBRATE MULTI-COMplete18 CHEW	3	MP	CENTRUM SILVER 50+MEN TABS <i>(multiple vitamins w/ minerals)</i>	3	MP; RX/OTC
CELEBRATE MULTI-COMplete36 CAPS	3	RX/OTC	CENTRUM SILVER 50+WOMEN TABS <i>(multiple vitamins w/ minerals)</i>	3	MP; RX/OTC
CELEBRATE MULTI-COMplete36 CHEW	3	MP	CENTRUM SILVER ADULT 50+ TABS <i>(multiple vitamins w/ minerals)</i>	3	MP; RX/OTC
CELEBRATE MULTI-COMplete45 CAPS	3	RX/OTC	CENTRUM SILVER ADULTS 50+ TABS <i>(multiple vitamins w/ minerals)</i>	3	MP; RX/OTC
CELEBRATE MULTI-COMplete45 CHEW	3	MP			
CELEBRATE MULTI-COMplete60 CAPS	3	RX/OTC			
CELEBRATE MULTI-COMplete60 CHEW	3	MP			
CENTRAVITES 50 PLUS TABS	3	MP; RX/OTC			
CENTRAVITES ADULTS TABS	3	MP; RX/OTC			
CENTRUM ADULT MULTIGUMMIES CHEW	3	MP			
CENTRUM ADULTS 50+ MULTIGUMMIES CHEW	3	MP			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CENTRUM SILVER ULTRA WOMENS TABS	3	MP; RX/OTC	CVS AIRSHIELD IMMUNITY SUPPORT CHEW	3	MP
CENTRUM SILVER WOMEN 50+ TABS <i>(multiple vitamins w/ minerals)</i>	3	MP; RX/OTC	CVS DAILY MULTIVITAMIN/MINERAL MENS TABS	3	MP; RX/OTC
CENTRUM SILVER CHEW	3	MP	CVS EYE HEALTH ADULT 50+ CAPS	3	RX/OTC
CENTRUM SILVER TABS <i>(multiple vitamins w/ minerals)</i>	3	MP; RX/OTC	CVS IMMUNE SUPPORT CAPS	3	RX/OTC
CENTRUM SPECIALIST HEART TABS	3	MP; RX/OTC	CVS ONE DAILY MENS 50+ ADVANCED TABS	3	MP; RX/OTC
CENTRUM SPECIALIST IMMUNE SUPPORT TABS	3	MP; RX/OTC	CVS ONE DAILY WOMENS 50+ADVANCED TABS	3	MP; RX/OTC
CENTRUM SPECIALIST VISION TABS	3	MP; RX/OTC	CVS SPECTRAVITE ADULT 50+ CHEW	3	MP
CENTRUM ULTRA WOMENS TABS	3	MP; RX/OTC	CVS SPECTRAVITE ADULT 50+ TABS	3	MP; RX/OTC
CENTRUM VITAMINTS CHEW	3	MP	CVS SPECTRAVITE ADULTS TABS	3	MP; RX/OTC
CENTRUM WOMEN TABS <i>(multiple vitamins w/ minerals)</i>	3	MP; RX/OTC	CVS SPECTRAVITE ULTRA MEN50+ TABS	3	MP; RX/OTC
CERTAVITE SENIOR/ANTIOXIDANT NUTRIENTS TABS	3	MP; RX/OTC	CVS SPECTRAVITE ULTRA MENS HEALTH TABS	3	MP; RX/OTC
CERTAVITE SENIOR TABS	3	MP; RX/OTC	CVS SPECTRAVITE ULTRA WOMEN TABS	3	MP; RX/OTC
CERTAVITE/ANTIOXIDANTS TABS	3	MP; RX/OTC	CVS SPECTRAVITE WOMEN CHEW	3	MP
CHOICEFUL MULTIVITAMIN CAPS	3	RX/OTC	CVS VISION HEALTH CAPS	3	RX/OTC
CHOICEFUL MULTIVITAMIN CHEW	3	MP	DAYAVITE TABS	3	MP; RX/OTC
CITRACAL +D3 MAXIMUM PLUS TABS	3	MP; RX/OTC	DECUBI-VITE CAPS	3	RX/OTC
CULTURELLE PROBIOTICS + MULTIVITAMIN CHEW	3	MP	DEKAS BARIATRIC CHEW	3	MP
CVS ADULT 50+ EYE HEALTH CAPS	3	RX/OTC	DEKAS PLUS OCEAN CAPS	3	RX/OTC
			DEKAS PLUS CAPS	3	RX/OTC
			DEKAS PLUS CHEW	3	MP
			DERMACINRX MULTITAM TABS	3	MP; RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
DERMACINRX RIBOTIN-E TABS	3	MP; RX/OTC	EQL CENTURY MENS TABS	3	MP; RX/OTC
DERMACINRX ZINTREXYL-C TABS	3	MP; RX/OTC	EQL CENTURY WOMENS TABS	3	MP; RX/OTC
DERMAVITE TABS	3	MP; RX/OTC	EQL ONE DAILY ADULT GUMMIES CHEW	3	MP
DEXATRAN CAPS	3	RX/OTC	EQL ONE DAILY MENS TABS	3	MP; RX/OTC
DIALYVITE SUPREME D TABS	3	MP; RX/OTC	ESTROVEN MENOPAUSE SUPPLEMENT TABS	3	MP; RX/OTC
DIATROL TABS	3	MP; RX/OTC	EYE HEALTH/LUTEIN TABS	3	MP; RX/OTC
EMERGEN-C APPLE CIDER VINEGAR GUMMIES CHEW	3	MP	EYE HEALTH CAPS	3	RX/OTC
EMERGEN-C ASHWAGANDHA GUMMIES CHEW	3	MP	EYE MULTIVITAMIN/LUTEIN CAPS	3	RX/OTC
EMERGEN-C ELDERBERRY GUMMIES CHEW	3	MP	EYE MULTIVITAMIN/SODIUM TABS	3	MP; RX/OTC
EMERGEN-C IMMUNE PLUS/VITAMIN D CHEW	3	MP	EYE MULTIVITAMIN CAPS	3	RX/OTC
EMERGEN-C IMMUNE+ GUMMIES CHEW	3	MP	FITNESS TABS FOR MEN AM/PM/LYCOPENE TABS	3	MP; RX/OTC
EMERGEN-C TURMERIC & GINGER GUMMIES CHEW	3	MP	FITNESS TABS FOR WOMEN AM/PM/LYCOPENE TABS	3	MP; RX/OTC
EMERGEN-C VITAMIN C CHEW	3	MP	FLORRAVITE TABS	3	MP; RX/OTC
EQ COMPLETE MULTIVITAMINADULTS UNDER 50 TABS	3	MP; RX/OTC	FOLAGENT DHA CAPS	3	RX/OTC
EQ MULTIVITAMINS ADULT GUMMY CHEW	3	MP	FOLAMAX TABS	3	MP; RX/OTC
EQ ONE DAILY MENS 50+ TABS	3	MP; RX/OTC	FOLAMED DHA CAPS	3	RX/OTC
EQ ONE DAILY MENS HEALTH TABS	3	MP; RX/OTC	FOLAPRIME TABS	3	MP; RX/OTC
EQ ONE DAILY WOMENS 50+ TABS	3	MP; RX/OTC	FOLIFLEX TABS	3	MP; RX/OTC
EQ ONE DAILY WOMENS HEALTH TABS	3	MP; RX/OTC	FOLITIN-Z TABS	3	MP; RX/OTC
EQL CENTURY MATURE ADULTS50+ TABS	3	MP; RX/OTC	FREEDAVITE TABS	3	MP; RX/OTC
			FT CENTURY ADULTS TABS	3	MP; RX/OTC
			FT HAIR SKIN & NAILS EXTRA STRENGTH TABS	3	MP; RX/OTC

Drug Name	Drug Tier	Requirements/Limits
FT IMMUNE SUPPORT CHEW	3	MP
GENADEK STEP 1 CAPS	3	RX/OTC
GENADEK STEP 2 CAPS	3	RX/OTC
GERI-FREEDA SENIOR FORMULA TABS	3	MP; RX/OTC
GNP CENTURY ADULT TABS	3	MP; RX/OTC
GNP THERAPEUTIC-M TABS	3	MP; RX/OTC
HAIR SKIN & NAILS ADVANCED FORMULA TABS	3	MP; RX/OTC
HAIR SKIN & NAILS TABS	3	MP; RX/OTC
HAIR/SKIN/NAI LS CAPS	3	RX/OTC
HEAD CARE PROACTIVE HEALTH TABS	3	MP; RX/OTC
HEALTHY EYES SUPERVISION2 CAPS	3	RX/OTC
HIGH POTENCY MULTIVITAMIN/BETA-CAROTENE TABS	3	MP; RX/OTC
HIGH POTENCY MULTIVITAMIN/FOLIC ACID TABS	3	MP; RX/OTC
HM COMPLETE MEN TABS	3	MP; RX/OTC
HM HAIR/SKIN/NAI LS TABS	3	MP; RX/OTC
HYLAZINC TABS	3	MP; RX/OTC
ICAPS AREDS FORMULA TABS	3	MP; RX/OTC
IMMUNE ESSENTIALS DAILY CAPS	3	RX/OTC
IMMUNE SUPPORT CHEW	3	MP
KEYFOLIC TABS	3	MP; RX/OTC
KEYLOSA TABS	3	MP; RX/OTC

Drug Name	Drug Tier	Requirements/Limits
K-PAX IMMUNE SUPPORT FORMULA PROFESSIONAL STRENGTH TABS	3	MP; RX/OTC
LIVER DETOX TABS	3	MP; RX/OTC
LUTEIN PLUS/ZEAXANTHIN TABS	3	MP; RX/OTC
MEDI TAB TABS	3	MP; RX/OTC
MEGA MULTI FOR MEN TABS	3	MP; RX/OTC
MEGA MULTI FOR WOMEN TABS	3	MP; RX/OTC
MEGAVITE FRUITS & VEGGIES TABS	3	MP; RX/OTC
MENATROL CAPS	3	RX/OTC
MENS 50+ ADVANCED CAPS	3	RX/OTC
MENS 50+ MULTI VITAMIN & MINERAL FORMULA TABS	3	MP; RX/OTC
MENS 50+ MULTIVITAMIN TABS	3	MP; RX/OTC
MENS MULTI VITAMIN & MINERAL FORMULA TABS	3	MP; RX/OTC
MENS MULTIVITAMIN CHEW	3	MP
MENS MULTIVITAMIN TABS	3	MP; RX/OTC
MOOD FOOD ES CAPS	3	RX/OTC
MOOD FOOD CAPS	3	RX/OTC
MULTIA CAPS	3	RX/OTC
MULTI-BETIC DIABETES TABS	3	MP; RX/OTC
<i>multiple vitamins w/ minerals CAPS</i>	3	RX/OTC
<i>multiple vitamins w/ minerals CHEW</i>	3	MP
<i>multiple vitamins w/ minerals TABS</i>	3	MP; RX/OTC
MULTITOL-M TABS	3	MP; RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MULTIVITAMIN ADULTS TABS	3	MP; RX/OTC	NUTRICAP TABS	3	MP; RX/OTC
MULTIVITAMIN MEN TABS	3	MP; RX/OTC	OCULAR VITAMINS TABS	3	MP; RX/OTC
MULTI-VITAMIN MONOCAPS TABS	3	MP; RX/OTC	OCUVEL CAPS 250 MG-0.5 MG-5 MG-1 MG-40 MG-1 MG-200 UNIT	3	RX/OTC
MULTIVITAMIN WOMEN TABS	3	MP; RX/OTC	OCUVITE ADULT 50+ CAPS	3	RX/OTC
MULTIVITAMIN/ZINC STRESSFORMULA TABS	3	MP; RX/OTC	OCUVITE ADULT FORMULA CAPS	3	RX/OTC
MULTIVITAMIN TABS	3	MP; RX/OTC	OCUVITE LUTEIN CAPS	3	RX/OTC
MVW COMPLETE FORMULATION CAPS	3	RX/OTC	ONCOVITE TABS	3	MP; RX/OTC
MVW COMPLETE FORMULATIOND3000 CAPS	3	RX/OTC	ONE A DAY ENERGY TABS	3	MP; RX/OTC
MVW COMPLETE FORMULATIOND500 CAPS	3	RX/OTC	ONE A DAY IMMUNITY DEFENSE TEENS MULTI + CHEW	3	MP
MVW COMPLETE FORMULATIONMINIS CAPS	3	RX/OTC	ONE A DAY MENS 50+ TABS	3	MP; RX/OTC
MVW HI-D ADEK GUMMIES CHEW	3	MP	ONE A DAY MENS VITACRAVES MULTI GUMMIES CHEW	3	MP
MVW MODULATOR FORMULATION MINIS CAPS	3	RX/OTC	ONE A DAY MENS VITACRAVES CHEW	3	MP
MVW MODULATOR FORMULATION CAPS	3	RX/OTC	ONE A DAY TRIPLE IMMUNE SUPPORT ADULT TABS	3	MP; RX/OTC
MVW ORANGE CHEWABLES CHEW	3	MP	ONE A DAY WOMENS 50+ ADVANCED CHEW	3	MP
NAT-RUL THERAVITE-M/HIGHPOTENCY TABS	3	MP; RX/OTC	ONE A DAY WOMENS 50+ TABS	3	MP; RX/OTC
NATRUL-VITES TABS	3	MP; RX/OTC	ONE DAILY MENS 50+ MULTIVITAMIN TABS	3	MP; RX/OTC
NEOVITE TABS	3	MP; RX/OTC	ONE DAILY MENS FORMULA W/O IRON TABS	3	MP; RX/OTC
NICADAN ZX TABS	3	MP; RX/OTC	ONE DAILY WOMENS TABS	3	MP; RX/OTC
NICADAN TABS	3	MP; RX/OTC	ONE DIALY MULTIVITAMIN WOMENS TABS	3	MP; RX/OTC
NICAZEL FORTE TABS	3	MP; RX/OTC	ONE-A-DAY ENERGY TABS	3	MP; RX/OTC
NICAZEL TABS	3	MP; RX/OTC			
NO IRON MULTIPLE VITAMIN/MINERALS TABS	3	MP; RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ONE-A-DAY FOR HER VITACRAVES TEEN MULTI GUMMIES CHEW	3	MP	ONE-A-DAY VITACRAVES CHEW	3	MP
ONE-A-DAY FOR HIM/VITACRAVES TEEN MULTI GUMMIES CHEW	3	MP	ONE-A-DAY WEIGHT SMART ADVANCED TABS (<i>multiple vitamins w/ minerals</i>)	3	MP; RX/OTC
ONE-A-DAY MENOPAUSE FORMULA TABS	3	MP; RX/OTC	ONE-A-DAY WOMENS 50+ ADVANTAGE TABS (<i>multiple vitamins w/ minerals</i>)	3	MP; RX/OTC
ONE-A-DAY MENS 50+ ADVANTAGE TABS	3	MP; RX/OTC	ONE-A-DAY WOMENS 50+ HEALTHY ADVANTAGE TABS (<i>multiple vitamins w/ minerals</i>)	3	MP; RX/OTC
ONE-A-DAY MENS 50+ TABS	3	MP; RX/OTC	ONE-A-DAY WOMENS 50+ TABS	3	MP; RX/OTC
ONE-A-DAY MENS HEALTH FORMULA TABS	3	MP; RX/OTC	ONE-A-DAY WOMENS ACTIVE MIND & BODY TABS (<i>multiple vitamins w/ minerals</i>)	3	MP; RX/OTC
ONE-A-DAY MENS PRO EDGE TABS	3	MP; RX/OTC	ONE-A-DAY WOMENS PETITES TABS (<i>multiple vitamins w/ minerals</i>)	3	MP; RX/OTC
ONE-A-DAY MENS VITACRAVES GUMMIES CHEW	3	MP	ONE-A-DAY WOMENS PLUS HEALTHY SKIN SUPPORT TABS (<i>multiple vitamins w/ minerals</i>)	3	MP; RX/OTC
ONE-A-DAY MENS TABS	3	MP; RX/OTC	ONE-A-DAY WOMENS VITACRAVES GUMMIES CHEW	3	MP
ONE-A-DAY PROACTIVE 65+ TABS	3	MP; RX/OTC	ONE-A-DAY WOMENS VITACRAVES GUMMIES/IMMUNITY SUPPORT CHEW	3	MP; RX/OTC
ONE-A-DAY TEEN ADVANTAGEFOR HIM TABS	3	MP; RX/OTC	ONE-DAILY MULTI CAPS CAPS	3	RX/OTC
ONE-A-DAY VITACRAVES ADULT CHEW	3	MP	ONEVITE TABS	3	MP; RX/OTC
ONE-A-DAY VITACRAVES GUMMIES/IMMUNITY SUPPORT CHEW	3	MP	OPTIFAST POST BARIATRIC CHEW	3	MP
ONE-A-DAY VITACRAVES SOURGUMMIES CHEW	3	MP	OPTIMUM AIRVITES CHEW	3	MP
ONE-A-DAY VITACRAVES WOMENS GUMMIES CHEW	3	MP	OPTISOURCE POST BARIATRIC SURGERY CHEW	3	MP
ONE-A-DAY VITACRAVES WOMENS MULTI CHEW	3	MP			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
OPTIVITE P.M.T. TABS <i>(multiple vitamins w/ minerals)</i>	3	MP; RX/OTC	PROTECT CARDIO AF CAPS	3	RX/OTC
OPURITY/BYPASS OPTIMIZED CHEW	3	MP	PROTECT PLUS SO CAPS	3	RX/OTC
OPURITY TABS	3	MP; RX/OTC	PROTEGRA CAPS	3	RX/OTC
OSTEOPRIME PLUS/CALCIUM & MAGNESIUM TABS	3	MP; RX/OTC	PROVIT TABS	3	MP; RX/OTC
PARVLEX TABS	3	MP; RX/OTC	QC MULTI-VITE TABS	3	MP; RX/OTC
PHYTOMULTI TABS	3	MP; RX/OTC	QC OCUHEALTH VISION SUPPORT 2 CAPS	3	RX/OTC
PRESCRIPTION SUPPORT MULTIVITAMIN CAPS 100 MG-400 MCG-2.5 MG-5 MG-4.25 MG-5 MG-25 MG-75 MG-250 UNIT-15 UNIT-50 MG-100 MCG-7.5 MG-50 MG-5000 UNIT-500 MCG	3	RX/OTC	QUIN B STRONG TABS	3	MP; RX/OTC
PRESERVISION AREDS 2 + MULTI VITAMIN CAPS	3	RX/OTC	QUINTABS-M TABS	3	MP; RX/OTC
PRESERVISION AREDS 2 CAPS	3	RX/OTC	RA CENTRAL-VITE TABS	3	MP; RX/OTC
PRESERVISION AREDS 2 CHEW	3	MP	RAYAVIT TABS	3	MP; RX/OTC
PRESERVISION AREDS CAPS	3	RX/OTC	REMEDIENT CAPS	3	RX/OTC
PRESERVISION AREDS TABS	3	MP; RX/OTC	RENAPLEX-D TABS	3	MP; RX/OTC
PRESERVISION/LUTEIN CAPS	3	RX/OTC	SENTRY SENIOR MENS 50+ TABS	3	MP; RX/OTC
PROBIOTICS + BARIATRIC MULTIVITAMIN CAPS	3	RX/OTC	SENTRY SENIOR/LUTEIN TABS	3	MP; RX/OTC
PRO-CAL TABS	3	MP; RX/OTC	SENTRY TABS	3	MP; RX/OTC
PROCERV HP TABS	3	MP; RX/OTC	SIDEROL TABS	3	MP; RX/OTC
PROFOLA TABS	3	MP; RX/OTC	SKIN HAIR & NAILS ADVANCED BEAUTY CAPS	3	RX/OTC
PRORENAL+D/OMEGA-3 CAPS	3	RX/OTC	SM ONE DAILY MENS TABS	3	MP; RX/OTC
PRORENAL+D TABS	3	MP; RX/OTC	SM ONE DAILY WOMENS TABS	3	MP; RX/OTC
			SOLO TABS	3	MP; RX/OTC
			SPECTRAVITE TABS	3	MP; RX/OTC
			STROVITE FORTE TABS <i>(multiple vitamins w/ minerals)</i>	3	MP; RX/OTC
			STROVITE ONE TABS	3	MP; RX/OTC
			SUPER ANTIOXIDANT CAPS	3	RX/OTC
			SUPER D/ZINC/SELENIUM/COPPER TABS	3	MP; RX/OTC
			SUPERIOR MENS MULTI TABS	3	MP; RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SUPERIOR WOMENS MULTI TABS	3	MP; RX/OTC	VISION OPTIMIZER CAPS	3	RX/OTC
SUPPORT-500 CAPS	3	RX/OTC	VISTA ADVANCED AREDS2 FORMULA CAPS	3	RX/OTC
SYSTANE ICAPS AREDS2 CHEW	3	MP	VISTA ADVANCED DRY EYE FORMULA CAPS	3	RX/OTC
SYSTANE ICAPS AREDS2 TABS	3	MP; RX/OTC	VITABEX PLUS CAPS	3	RX/OTC
THERA M PLUS TABS	3	MP; RX/OTC	VITABEX CAPS	3	RX/OTC
THERABETIC MULTI-VITAMIN TABS	3	MP; RX/OTC	VITACHEW ADULT MULTI VITAMIN CHEW	3	MP
THERAGRAN-M ADVANCED 50 PLUS TABS	3	MP; RX/OTC	VITAJoy MULTI GUMMIIES ADULT CHEW	3	MP
THERAGRAN-M ADVANCED TABS	3	MP; RX/OTC	VITAROCA PLUS TABS (multiple vitamins w/ minerals)	3	MP; RX/OTC
THERAGRAN-M PREMIER 50 PLUS TABS	3	MP; RX/OTC	VITASANA TABS	3	MP; RX/OTC
THERAGRAN-M PREMIER TABS	3	MP; RX/OTC	VITEYES CLASSIC ADVANCED CAPS	3	RX/OTC
THERAGRAN-M TABS	3	MP; RX/OTC	VITEYES CLASSIC MACULAR SUPPORT CAPS	3	RX/OTC
THERAMILL FORTE CAPS	3	RX/OTC	VITEYES CLASSIC MULTIVITAMIN TABS	3	MP; RX/OTC
THERA-M TABS	3	MP; RX/OTC	VITEYES CLASSIC MULTIVITAMIN TABS	3	MP; RX/OTC
THERANATAL LACTATION ONE CAPS	3	RX/OTC	VITEYES CLASSIC/OMEGA-3 CAPS	3	RX/OTC
THERA-TABS M TABS	3	MP; RX/OTC	VITEYES CLASSIC+OMEGA-3 CAPS	3	RX/OTC
THERA-VITE MAX-M TABS	3	MP; RX/OTC	VITEYES CLASSIC CAPS	3	RX/OTC
THEREMS-M TABS	3	MP; RX/OTC	VITEYES OPTIC NERVE SUPPORT TABS	3	MP; RX/OTC
T-VITES TABS	3	MP; RX/OTC	VITRAMYN TABS	3	MP; RX/OTC
UDAMIN SP TABS 12.5 MG-1000 MCG-250 MCG-2.5 MG-17 MG-7.5 MG-100 MCG-75 UNIT-320 MG	3	MP; RX/OTC	VITRANOL FE TABS	3	MP; RX/OTC
ULTRA BONEUP TABS	3	MP; RX/OTC	VITRANOL TABS	3	MP; RX/OTC
VENEXA FE TABS	3	MP; RX/OTC	VITREXATE FE TABS	3	MP; RX/OTC
VENEXA TABS	3	MP; RX/OTC	VITREXATE TABS	3	MP; RX/OTC
VENTRIXYL FE TABS	3	MP; RX/OTC	VITREXYL/IRON TABS	3	MP; RX/OTC
VENTRIXYL TABS	3	MP; RX/OTC			
VISION HEALTH CAPS	3	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits
VITREXYL TABS	3	MP; RX/OTC
WAL-BORN VITAMIN C CHEW	3	MP
WELLFOLA TABS	3	MP; RX/OTC
WOMENS 50+ MULTI VITAMIN& MINERAL FORMULA TABS	3	MP; RX/OTC
WOMENS 50+ MULTIVITAMIN TABS	3	MP; RX/OTC
WOMENS MULTI GUMMIES CHEW	3	MP
WOMENS MULTI VITAMIN & MINERAL FORMULA TABS	3	MP; RX/OTC
WOMENS MULTIVITAMIN + COLLAGEN GUMMIES CHEW	3	MP
YELETS TEENAGE FORMULA TABS	3	MP; RX/OTC
YOUR LIFE MULTI ADULT GUMMIES CHEW	3	MP
YUMVS MULTI ZERO CHEW	3	MP
YUMVS ZERO DIABETIC MULTIVITAMIN CHEW	3	MP
Multivitamins		
ALTRIXA TABS	3	MP; RX/OTC
AMLADEX TABS	3	MP; RX/OTC
DEKAS ESSENTIAL CAPS	3	RX/OTC
DEKAS ESSENTIAL LIQD	3	
ESTROFACTORS TABS	3	MP; RX/OTC
FOLCYTEINE TABS	3	MP; RX/OTC
GENICIN VITA-Q TABS	3	MP; RX/OTC
HIGH POTENCY MULTIVITAMIN TABS	3	MP; RX/OTC
MULTI VITAMIN/D-3 TABS	3	MP; RX/OTC
MULTI VITAMIN TABS	3	MP; RX/OTC
<i>multiple vitamin TABS</i>	3	MP; RX/OTC

Drug Name	Drug Tier	Requirements/Limits
MULTIVITAMIN ADULT TABS	3	MP; RX/OTC
NEOMULTIVITE TABS	3	MP; RX/OTC
OMNICAP TABS	3	MP; RX/OTC
ONE DAILY ESSENTIALS TABS	3	MP; RX/OTC
ONE DAILY ESSENTIAL TABS	3	MP; RX/OTC
ONE VITE DAILY MULTIVITAMIN TABS	3	MP; RX/OTC
ONE-A-DAY ESSENTIAL TABS (<i>multiple vitamin</i>)	3	MP; RX/OTC
ONE-A-DAY MENS TABS (<i>multiple vitamin</i>)	3	MP; RX/OTC
QUINTABS TABS	3	MP; RX/OTC
STRESS FORMULA W/ZINC FOREENERGY TABS	3	MP; RX/OTC
THERA TABS	3	MP; RX/OTC
THEREMS MULTIVITAMIN TABS	3	MP; RX/OTC
TM-DAILY VITE TABS	3	MP; RX/OTC
TRUE MULTIVITAMIN TABS	3	MP; RX/OTC
VITAZYME TABS	3	MP; RX/OTC
ZE-PLUS CAPS (<i>multiple vitamin</i>)	NF	RX/OTC
Ped Multi Vitamins w/FI & FE		
<i>ped multivitamins w/fl & iron SOLN</i>	3	QL(2 ml daily); AL(Up to 12 yrs old); MP; RX/OTC
Ped Multiple Vitamins w/ Minerals		
ACTIVNUTRIENTS CHEWABLE CHEW	3	
ACTIVNUTRIENTS CHEW	3	
ALIVE GUMMIES FOR CHILDREN CHEW	3	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ALIVE MULTI-VITAMIN CHILDRENS CHEWABLE CHEW	3		FLINTSTONES GUMMIES/IMMUNITY SUPPORT/EXTRA C CHEW	3	
CENTRUM FLAVOR BURST KIDS CHEW	3		FLINTSTONES GUMMIES CHEW	3	
CENTRUM KIDS CHEW	3		FLINTSTONES SOUR GUMMIES CHEW	3	
CHILDRENS GUMMIES CHEW	3		FLINTSTONES TODDLER/TASTISMOUTH CHEW	3	
CVS GUMMY DINOS CHILDRENS CHEW	3		FLINTSTONES/IMMUNITY SUPPORT CHEW	3	
CVS GUMMY DINOS CHEW	3		GNP MULTI CHILDRENS CHEW	3	
CVS GUMMY MULTIVITAMIN KIDS CHEW	3		GUMMI BEAR MULTIVITAMIN/MINERAL CHEW	3	
DEKAS PLUS LIQD	3	RX/OTC	JUST 4 KIDZ MULTIVITAMIN+PROBIOTIC CHEW	3	
EMERGEN-C KIDZ GUMMIES CHEW	3		MULTIVITAMIN GUMMIES CHILDRENS CHEW	3	
EMERGEN-C KIDZ IMMUNE+ GUMMIES CHEW	3		MVW COMPLETE FORMULATION CHEW	3	
EQ MULTIVITAMIN GUMMIES CHILDRENS CHEW	3		MVW COMPLETE FORMULATIOND3000 CHEW	3	
EQ MULTIVITAMINS CHILDRENS GUMMY CHEW	3		MVW COMPLETE FORMULATIOND5000 CHEW	3	
EQL GUMMIES CHILDRENS CHEW	3		MVW COMPLETE FORMULATIONPEDIATRIC SOLN	3	MP
FLINTSTONES + EXTRA IRON CHEW	3		NANOVM 1-3 YEARS POWD	3	
FLINTSTONES COMPLETE/CALCIUM & VITAMIN D CHEW	3		NANOVM 4-8 YEARS POWD	3	
FLINTSTONES COMPLETE CHEW	3		NANOVM 9-18 YEARS POWD	3	
FLINTSTONES GUMMIES COMPLETE CHEW	3		NANOVM T/F POWD	3	
FLINTSTONES GUMMIES PLUSBONE BUILDING SUPPORT CHEW	3		ONE-A-DAY/JOLLY RANCHER CHEW	3	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SMARTY PANTS KIDS COMPLETE AND FIBER CHEW	3		MULTIVITAMIN + FLUORIDE CHEW 60 MG-1.05 MG-0.3 MG-1.05 MG-400 UNIT-4.5 MCG-1.2 MG-13.5 MG-2500 UNIT-0.25 MG-15 UNIT, 60 MG-1.05 MG-0.3 MG-1.05 MG-400 UNIT-4.5 MCG-1.2 MG-13.5 MG-2500 UNIT-0.5 MG-15 UNIT	3	QL(1 ea daily); AL(Up to 12 yrs old); MP; RX/OTC
SPONGEBOB SQUAREPANTS GUMMIES CHEW	3		MULTIVITAMIN WITH FLUORIDE CHEW 60 MG-0.3 MG-1.05 MG-13.5 MG-1.05 MG-1.2 MG-10 MCG-6.75 MG-750 MCG-4.5 MCG-1 MG, 60 MG-0.3 MG-1.05 MG-13.5 MG-1.05 MG-4.5 MCG-1.2 MG-2500 UNIT-400 UNIT-15 UNIT-1 MG	3	AL(Up to 12 yrs old); MP; RX/OTC
VITACHEW MULTIPLE VITAMIN CHILDRENS CHEW	3		MULTIVITAMIN WITH FLUORIDE CHEW	3	QL(1 ea daily); AL(Up to 12 yrs old); MP; RX/OTC
VITALETS CHILDRENS CHEW	3		MULTIVITAMIN WITH FLUORIDE SOLN	3	QL(2 ml daily); AL(Up to 12 yrs old); MP; RX/OTC
YUMVSKIDS MULTI ZERO CHEW	3		MULTI-VIT-FLOR CHEW 60 MG-1 MG-10 MG-1 MG-1.2 MG-10 MCG-10 MG-0.25 MG-600 MCG-4.5 MCG-230 MCG, 60 MG-1 MG-10 MG-1 MG-1.2 MG-10 MCG-10 MG-0.5 MG-600 MCG-4.5 MCG-230 MCG	3	QL(1 ea daily); AL(Up to 12 yrs old); MP; RX/OTC
ZOO FRIENDS MULTI GUMMIES CHEW	3		MULTI-VIT-FLOR CHEW 60 MG-1 MG-10 MG-1 MG-1.2 MG-10 MCG-10 MG-1 MG-600 MCG-4.5 MCG-230 MCG	3	AL(Up to 12 yrs old); MP; RX/OTC
Ped MV w/ Fluoride			<i>pediatric multivitamins w/fl CHEW</i>	3	QL(1 ea daily); AL(Up to 12 yrs old); MP; RX/OTC
FLORAFOL PEDIATRIC CHEW 70 MG-1 MG-12 MG-1.15 MG-1 MG-12 MCG-11.5 MG-700 MCG-3.5 MCG-1 MG-250 MCG	3	AL(Up to 12 yrs old); MP; RX/OTC			
FLORAFOL PEDIATRIC CHEW 70 MG-1 MG-12 MG-1.15 MG-1 MG-12 MCG-11.5 MG-700 MCG-3.5 MCG-0.5 MG-250 MCG	3	QL(1 ea daily); AL(Up to 12 yrs old); MP; RX/OTC			
FLORIVA PLUS SOLN	3	QL(2 ml daily); AL(Up to 12 yrs old); MP; RX/OTC			
MULTIVITAMIN + FLUORIDE CHEW 60 MG-1.05 MG-0.3 MG-1.05 MG-400 UNIT-4.5 MCG-1.2 MG-13.5 MG-2500 UNIT-1 MG-15 UNIT	3	AL(Up to 12 yrs old); MP; RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>pediatric multivitamins w/fl CHEW</i>	3	AL(Up to 12 yrs old); MP; RX/OTC	VITAMINS A/C/D/FLUORIDE SOLN	3	QL(2 ml daily); AL(Up to 12 yrs old); MP; RX/OTC
<i>pediatric multivitamins w/fl SOLN</i>	3	QL(2 ml daily); AL(Up to 12 yrs old); MP; RX/OTC	Pediatric Vitamins		
<i>pediatric vitamins acd w/ fluoride SOLN</i>	3	QL(2 ml daily); AL(Up to 12 yrs old); MP; RX/OTC	TRI-VI-SOL A/C/D	3	MP
POLY-VI-FLOR CHEW 400 UNIT-15 UNIT-1 MG-200 MCG, 60 MG-1 MG-10 MG-1 MG-1.2 MG-10 MCG-10 MG-600 MCG-4.5 MCG-1 MG-200 MCG	3	AL(Up to 12 yrs old); MP; RX/OTC	VITAMIN A/C/D INFANT	3	MP
POLY-VI-FLOR CHEW	3	QL(1 ea daily); AL(Up to 12 yrs old); MP; RX/OTC	VITAMIN A/C/D INFANT/TODDLER	3	MP
QUFLORA PEDIATRIC CHEW 60 MG-1.5 MG-100 MCG-1.2 MG-400 UNIT-4 MCG-1.3 MG-5 MG-1200 UNIT-15 MG-1 MG-15 UNIT-1 MG-108 MCG	3	AL(Up to 12 yrs old); MP; RX/OTC	Prenatal Vitamins		
QUFLORA PEDIATRIC CHEW 60 MG-1.5 MG-100 MCG-1.2 MG-400 UNIT-4 MCG-1.3 MG-5 MG-1200 UNIT-15 MG-0.25 MG-15 UNIT-1 MG-108 MCG, 60 MG-1.5 MG-100 MCG-1.2 MG-400 UNIT-4 MCG-1.3 MG-5 MG-1200 UNIT-15 MG-0.5 MG-15 UNIT-1 MG-108 MCG	3	QL(1 ea daily); AL(Up to 12 yrs old); MP; RX/OTC	CLASSIC PRENATAL TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); MP
QUFLORA PEDIATRIC SOLN	3	QL(2 ml daily); AL(Up to 12 yrs old); MP; RX/OTC	COMPLETENATE CHEW	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); MP
SOLUVITA SOLN	3	QL(2 ml daily); AL(Up to 12 yrs old); MP; RX/OTC	CO-NATAL FA TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); MP; RX/OTC
			EQL PRENATAL FORMULA TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); MP
			GNP PRENATAL TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); MP
			KP PRENATAL MULTIVITAMINS TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); MP
			MASONATAL TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); MP
			M-NATAL PLUS TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
NEONATAL COMPLETE TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); RX/OTC	PRENATAL MULTIVITAMIN TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); MP
NEONATAL PLUS TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); RX/OTC	PRENATAL PLUS VITAMIN AND MINERAL TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); RX/OTC
NESTABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); MP	PRENATAL PLUS TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); RX/OTC
NIVA-PLUS TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); RX/OTC	<i>prenatal vit w/ ferrous fumarate-folic acid CHEW</i>	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); MP
ONE VITE WOMENS PRENATAL VITAMIN PLUS TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); RX/OTC	<i>prenatal vit w/ iron carbonyl-folic acid TABS 120 MG-3 MG-30 MCG-1 MG-400 UNIT-8 MCG-3 MG-20 MG-7 MG-3 MG-100 MG-15 MG-3 MG-4000 UNIT-200 MG-150 MCG-30 UNIT-29 MG</i>	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); MP; RX/OTC
PRENATABS FA TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); MP; RX/OTC	PRENATAL VITAMIN & MINERAL TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); MP
PRENATAL 19 CHEW	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); MP	PRENATAL VITAMIN/IRON TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); MP
PRENATAL 19 TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); MP; RX/OTC	PRENATAL VITAMINS PLUS LOW IRON TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); RX/OTC
PRENATAL AND IRON TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); RX/OTC	PRENATAL VITAMINS TABS 120 MG-2.6 MG-800 MCG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG-4000 UNIT-30 UNIT	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); MP
PRENATAL FORTE TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PRENATAL TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); RX/OTC	TRICARE TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); RX/OTC
PRENATVITE RX TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); RX/OTC	TRINATAL RX 1 TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); MP
PX PRENATAL MULTIVITAMINS TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); MP	VITATHELY/GINGER TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); RX/OTC
QC PRENATAL TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); MP	WESTAB PLUS TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); RX/OTC
RA PRENATAL FORMULA/FOLICACID TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); MP	Specialty Vitamins Products		
RA PRENATAL TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); MP	MG PLUS PROTEIN TABS	3	RX/OTC
SE-NATAL 19 CHEW	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); MP	Vitamins w/ Lipotropics		
SE-NATAL 19 TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); MP; RX/OTC	ACTIFLOVIT EAR HEALTH TABS	3	MP
SM PRENATAL VITAMINS TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); MP	LIPOTRIAD TABS (vitamins w/ lipotropics)	3	MP
THERANATAL CORE NUTRITION TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); RX/OTC	vitamins w/ lipotropics TABS	3	MP
THRIVITE RX TABS	3	QL(1 ea daily); AL(At least 12 yrs old - Up to 55 yrs old); MP; RX/OTC	MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms		
			Central Muscle Relaxants		
			AMRIX CP24 (cyclobenzaprine hcl)	2	
			baclofen SOLN OR 5 MG/5ML	1	PA
			baclofen SUSP	2	
			baclofen TABS	1	
			chlorzoxazone TABS	2	
			cyclobenzaprine hcl CP24	2	
			cyclobenzaprine hcl TABS 7.5 MG	2	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>cyclobenzaprine hcl TABS</i>	1		DYMISTA SUSP (<i>azelastine hcl-fluticasone propionate</i>)	2	
FLEQSUVY SUSP (<i>baclofen</i>)	2		RYALTRIS	2	
LYVISPAH PACK	2		Nasal Agents - Misc.		
<i>metaxalone</i>	2		FT SALINE NASAL SPRAY SOLN	3	
<i>methocarbamol TABS 500 MG, 750 MG</i>	1		LITTLE REMEDIES SALINE SPRAY/DROPS SOLN	3	
<i>methocarbamol TABS 1000 MG</i>	2		OCEAN NASAL SPRAY SOLN (<i>saline</i>)	3	
METHOCARBAMOL TABS	2		<i>saline SOLN</i>	3	
<i>orphenadrine citrate TB12</i>	1		Nasal Antiallergy		
OZOBAX SOLN OR (<i>baclofen</i>)	1	PA	<i>azelastine hcl</i>	1	RX/OTC
<i>tizanidine hcl CAPS</i>	2		<i>cromolyn sodium (nasal) 5.2 MG/ACT</i>	3	
<i>tizanidine hcl TABS</i>	1		NASALCROM (<i>cromolyn sodium (nasal)</i>)	3	
ZANAFLEX CAPS (<i>tizanidine hcl</i>)	2		<i>olopatadine hcl (nasal)</i>	2	
ZANAFLEX TABS 4 MG (<i>tizanidine hcl</i>)	2		PATANASE (<i>olopatadine hcl (nasal)</i>)	2	
Direct Muscle Relaxants			Nasal Anticholinergics		
DANTRIUM CAPS 25 MG (<i>dantrolene sodium</i>)	2		<i>ipratropium bromide (nasal)</i>	1	
<i>dantrolene sodium CAPS</i>	2		Nasal Steroids		
Fibrodysplasia Ossificans Progressiva (FOP) Agents			BECONASE AQ	2	
SOHONOS	CO	SP	<i>budesonide (nasal)</i>	2	
Muscle Relaxant Combinations			FLONASE ALLERGY RELIEF CHILDRENS SUSP (<i>fluticasone propionate (nasal)</i>)	2	RX/OTC
NORGESIC FORTE (<i>orphenadrine w/ aspirin & caff</i>)	2		FLONASE ALLERGY RELIEF SUSP (<i>fluticasone propionate (nasal)</i>)	2	RX/OTC
<i>orphenadrine w/ aspirin & caff</i>	2		FLONASE ALLERGY RELIEF SUSP (<i>fluticasone propionate (nasal)</i>)	NF	RX/OTC
NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus					
Nasal Agent Combinations					
<i>azelastine hcl-fluticasone propionate SUSP</i>	2				

Drug Name	Drug Tier	Requirements/Limits
<i>flunisolide (nasal) 0.025 %</i>	2	
<i>fluticasone propionate (nasal) SUSP</i>	1	RX/OTC
<i>fluticasone propionate (nasal) SUSP</i>	2	RX/OTC
<i>mometasone furoate (nasal) SUSP</i>	2	RX/OTC
NASACORT ALLERGY 24HR AERO (<i>triamcinolone acetonide (nasal)</i>)	2	QL(16.9 ml per 30 day(s) retail)
NASONEX 24HR SUSP (<i>mometasone furoate (nasal)</i>)	2	RX/OTC
OMNARIS SUSP	2	
QNASL	2	
QNASL CHILDRENS	2	
<i>triamcinolone acetonide (nasal) AERO</i>	2	QL(16.9 ml per 30 day(s) retail)
XHANCE EXHU	2	
ZETONNA AERS	2	
NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles		
ALS Agents		
EXSERVAN FILM	3	AL(At least 18 yrs old); PA
RELYVRIO	3	QL(60 ea per 30 day(s) retail); AL(At least 18 yrs old); SP; PA
RILUTEK TABS (<i>riluzole</i>)	3	
<i>riluzole TABS</i>	3	
TEGLUTIK SUSP	3	AL(At least 18 yrs old); PA
TIGLUTIK SUSP	3	AL(At least 18 yrs old); PA
Friedrich's Ataxia Agents		
SKYCLARYS	CO	SP
Rett Syndrome Agents		
DAYBUE	CO	SP

Drug Name	Drug Tier	Requirements/Limits
Spinal Muscular Atrophy Agents (SMA)		
EVRYSDI	CO	SP; MP
SPINRAZA	CO	SP; MP
NUTRIENTS		
Misc. Nutritional Substances		
<i>omega-3 fatty acids CAPS</i>	3	
<i>omega-3 fatty acids CPDR</i>	3	
Proteins		
L-ORNITHINE POWD	4	
OPHTHALMIC AGENTS - Drugs to Treat the Eye		
Artificial Tears and Lubricants		
<i>artificial tear solution</i>	3	
BION TEARS	3	
<i>carboxymethylcellulose sodium (ophth) GEL</i>	3	
<i>carboxymethylcellulose sodium (ophth) SOLN 0.5 %</i>	3	
<i>dextran 70-hypromellose 0.3 %-0.1 %</i>	3	
GENTEAL TEARS MODERATE PF (<i>dextran 70-hypromellose</i>)	3	
GENTEAL TEARS MODERATEPF (<i>dextran 70-hypromellose</i>)	3	
GENTEAL TEARS SEVERE DAY/NIGHT GEL	3	
<i>polyethylene glycol-propylene glycol (ophth) GEL</i>	3	
<i>polyethylene glycol-propylene glycol (ophth) SOLN 0.3 %-0.4 %</i>	3	
<i>polyvinyl alcohol 1.4 %</i>	3	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>polyvinyl alcohol-povidone (ophth) 0.5 %-0.6 %, 5 MG/ML-6 MG/ML</i>	3		COSOPT PF (<i>dorzolamide hcl-timolol maleate</i>)	2	
REFRESH LIQUIGEL GEL (<i>carboxymethylcellulose sodium (ophth)</i>)	3		DORZOLAMIDE HCL/TIMOLOL MALEATE	2	
REFRESH PLUS SOLN (<i>carboxymethylcellulose sodium (ophth)</i>)	NF		<i>dorzolamide hcl-timolol maleate</i>	2	
REFRESH PLUS SOLN (<i>carboxymethylcellulose sodium (ophth)</i>)	3		<i>dorzolamide hcl-timolol maleate</i>	1	
REFRESH TEARS SOLN (<i>carboxymethylcellulose sodium (ophth)</i>)	3		ISTALOL SOLN (<i>timolol maleate (ophth)</i>)	2	
SYSTANE GEL GEL	3		<i>levobunolol hcl 0.5 %</i>	2	
SYSTANE ULTRA SOLN (<i>polyethylene glycol-propylene glycol (ophth)</i>)	3		<i>timolol maleate (ophth) SOLG</i>	1	
SYSTANE ULTRA SOLN (<i>polyethylene glycol-propylene glycol (ophth)</i>)	NF		<i>timolol maleate (ophth) SOLN</i>	1	
SYSTANE SOLN (<i>polyethylene glycol-propylene glycol (ophth)</i>)	3		<i>timolol maleate (ophth) SOLN</i>	2	
THERATEARS GEL (<i>carboxymethylcellulose sodium (ophth)</i>)	3		TIMOPTIC OCUDOSE SOLN (<i>timolol maleate (ophth)</i>)	2	
<i>white petrolatum-mineral oil</i>	3		TIMOPTIC SOLN (<i>timolol maleate (ophth)</i>)	2	
Beta-blockers - Ophthalmic			TIMOPTIC-XE SOLG (<i>timolol maleate (ophth)</i>)	2	
<i>betaxolol hcl (ophth) SOLN</i>	2		Cholinergic Agonists		
BETIMOL	2		TYRVAYA	2	QL(8.4 ml per 30 day(s) retail)
BETOPTIC-S SUSP	1		Cycloplegic Mydriatics		
<i>brimonidine tartrate-timolol maleate</i>	2		<i>atropine sulfate (ophthalmic) OINT</i>	3	
<i>carteolol hcl (ophth)</i>	1		<i>atropine sulfate (ophthalmic) SOLN</i>	3	
COMBIGAN (<i>brimonidine tartrate-timolol maleate</i>)	1		ATROPINE SULFATE SOLN 1 %	3	
COSOPT (<i>dorzolamide hcl-timolol maleate</i>)	2		CYCLOGYL (<i>cyclopentolate hcl</i>)	3	
			CYCLOGYL	3	
			<i>cyclopentolate hcl 1 %, 2 %</i>	3	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ISOPTO ATROPINE SOLN	3		levofloxacin (ophth) 0.5 %	2	
MYDRIACYL SOLN (tropicamide)	3		moxifloxacin hcl (ophth) SOLN OP	2	
phenylephrine hcl (mydriatic) SOLN 2.5 %	3		moxifloxacin hcl (ophth) SOLN OP	1	
tropicamide SOLN	3		neomycin-bacitracin zn-polymyxin	3	
Miotics			neomycin-polymyxin-gramicidin	3	
PHOSPHOLINE IODIDE	3		OCUFLOX (ofloxacin (ophth))	2	
pilocarpine hcl SOLN 1 %, 2 %, 4 %	3		ofloxacin (ophth)	1	
Ophthalmic Adrenergic Agents			polymyxin b-trimethoprim	3	
ALPHAGAN P (brimonidine tartrate)	2		sulfacetamide sodium (ophth) OINT	3	
apraclonidine hcl	1		sulfacetamide sodium (ophth) SOLN	3	
brimonidine tartrate 0.2 %	1		tobramycin (ophth) SOLN	3	
brimonidine tartrate 0.1 %, 0.15 %	2		trifluridine	4	
IOPIDINE	2		VIGAMOX SOLN OP (moxifloxacin hcl (ophth))	2	
SIMBRINZA	1		ZYMAXID (gatifloxacin (ophth))	2	
Ophthalmic Anti-infectives			Ophthalmic Decongestants		
AZASITE	2		naphazoline w/ pheniramine 0.3 %-0.025 %	3	
BACIGUENT	3		NAPHCON-A (naphazoline w/ pheniramine)	3	
bacitracin (ophthalmic)	3		Ophthalmic Immunomodulators		
bacitracin-polymyxin b (ophth)	3		CEQUA SOLN	2	QL(60 ea per 30 day(s) retail)
BESIVANCE	2		cyclosporine (ophth) EMUL	2	QL(60 ea per 30 day(s) retail)
CILOXAN OINT	2		KLARITY-C DROPS EMUL	2	QL(4 ml daily); AL(At least 4 yrs old)
ciprofloxacin hcl (ophth) SOLN	1		RESTASIS MULTIDOSE EMUL	1	QL(5.5 ml per 30 day(s) retail)
ERYTHROMYCIN	1				
erythromycin (ophth)	1				
gatifloxacin (ophth)	2				
gentamicin sulfate (ophth) OINT	3				
gentamicin sulfate (ophth) SOLN	3				
KLARITY-A	2				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
RESTASIS EMUL (cyclosporine (ophth))	1	QL(60 ea per 30 day(s) retail)	fluorometholone (ophth) SUSP	3	QL(15 ml per 30 day(s) retail)
VERKAZIA EMUL	2	QL(4 ea daily); AL(At least 4 yrs old)	FML LIQUIFILM SUSP (fluorometholone (ophth))	3	QL(15 ml per 30 day(s) retail)
VEVYE SOLN	2	QL(2 ml per 30 day(s) retail; 2 ml per 30 days mail); AL(At least 18 yrs old)	loteprednol etabonate SUSP 0.2 %	2	
Ophthalmic Integrin Antagonists			MAXITROL OINT (neomycin-polymy-dexameth)	3	
XIIDRA	1	QL(60 ea per 30 day(s) retail)	MAXITROL SUSP (neomycin-polymy-dexameth)	3	
Ophthalmic Kinase Inhibitors			neomycin-polymy-dexameth OINT	3	
RHOPRESSA	1		neomycin-polymy-dexameth SUSP	3	
ROCKLATAN	1		PRED FORTE (prednisolone acetate (ophth))	3	
Ophthalmic Local Anesthetics			prednisolone acetate (ophth)	3	
ALCAINE (proparacaine hcl)	3		PREDNISOLONE ACETATE P-F	3	
proparacaine hcl	3		PREDNISOLONE SODIUM PHOSPHATE	3	
Ophthalmic Nerve Growth Factors			sulfacetamide sod-prednisolone SOLN	3	
OXERVATE	3	QL(28 ml per 28 day(s) retail); 4 max fill(s) per 365 day(s) retail; 56 day(s) max supply per 365 day(s) retail; AL(At least 2 yrs old); SP; PA	TOBRADEX SUSP (tobramycin-dexamethasone)	3	
Ophthalmic Steroids			tobramycin-dexamethasone SUSP	3	
ALREX SUSP (loteprednol etabonate)	2		Ophthalmics - Misc.		
bacitracin-poly-neomycin-hc	3		ACULAR (ketorolac tromethamine (ophth))	2	
dexamethasone sodium phosphate (ophth)	3		ACULAR LS (ketorolac tromethamine (ophth))	2	
EYSUVIS SUSP	2	QL(8.3 ml per 14 day(s) retail)	ACUVAIL	2	
			ALOCRIAL	2	
			ALOMIDE	2	
			azelastine hcl (ophth)	1	
			AZOPT (brinzolamide)	1	

Drug Name	Drug Tier	Requirements/Limits
<i>bepotastine besilate</i>	2	
BEPREVE (<i>bepotastine besilate</i>)	2	
<i>brinzolamide</i>	2	
<i>bromfenac sodium (ophth)</i>	2	
BROMSITE (<i>bromfenac sodium (ophth)</i>)	2	
<i>cromolyn sodium (ophth)</i>	1	
<i>diclofenac sodium (ophth)</i>	1	
<i>dorzolamide hcl</i>	1	
DORZOLAMIDE HCL	2	
<i>epinastine hcl (ophth)</i>	2	
<i>flurbiprofen sodium</i>	1	
ILEVRO	2	
<i>ketorolac tromethamine (ophth) 0.5 %</i>	1	
<i>ketorolac tromethamine (ophth) 0.4 %</i>	2	
<i>ketotifen fumarate (ophth) 0.035 %</i>	1	
LASTACAFT	2	
MIEBO	2	QL(0.1 ml daily); AL(At least 18 yrs old)
MURO 128 OINT (<i>sodium chloride hypertonic</i>)	NF	
MURO 128 OINT (<i>sodium chloride hypertonic</i>)	3	
MURO 128 SOLN (<i>sodium chloride hypertonic</i>)	NF	
NEVANAC	2	
<i>olopatadine hcl</i>	1	RX/OTC
PATADAY (<i>olopatadine hcl</i>)	2	RX/OTC
PATADAY EXTRA STRENGTH	2	
PROLENSA (<i>bromfenac sodium (ophth)</i>)	2	

Drug Name	Drug Tier	Requirements/Limits
<i>sodium chloride hypertonic OINT</i>	3	
<i>sodium chloride hypertonic SOLN</i>	3	
TRUSOPT (<i>dorzolamide hcl</i>)	2	
ZADITOR 0.035 % (<i>ketotifen fumarate (ophth)</i>)	1	
ZERVIATE	2	
Prostaglandins - Ophthalmic		
<i>bimatoprost SOLN</i>	2	
IYUZEH SOLN	2	
<i>latanoprost SOLN</i>	1	
LATANOPROST SOLN	2	
LUMIGAN SOLN 0.01 %	2	
<i>tafluprost</i>	2	
TRAVATAN Z SOLN (<i>travoprost</i>)	2	
<i>travoprost SOLN</i>	2	
VYZULTA	2	
XALATAN SOLN (<i>latanoprost</i>)	2	
XELPROS EMUL	2	
ZIOPTAN (<i>tafluprost</i>)	2	
OTIC AGENTS - Drugs to Treat the Ear		
Otic Agents - Miscellaneous		
<i>acetic acid (otic)</i>	3	
Otic Anti-infectives		
CETRAXAL (<i>ciprofloxacin hcl (otic)</i>)	2	
<i>ciprofloxacin hcl (otic)</i>	2	
<i>ofloxacin (otic)</i>	1	
Otic Combinations		
CIPRO HC	2	
CIPRODEX (<i>ciprofloxacin-dexamethasone</i>)	1	

Drug Name	Drug Tier	Requirements/Limits
<i>ciprofloxacin-dexamethasone</i>	1	
<i>ciprofloxacin-fluocinolone acetonide</i>	2	
<i>neomycin-polymyxin-hc (otic) SOLN</i>	3	
<i>neomycin-polymyxin-hc (otic) SUSP</i>	1	
OTOVEL (<i>ciprofloxacin-fluocinolone acetonide</i>)	2	
Otic Steroids		
<i>hydrocortisone w/acetic acid</i>	3	
OXYTOCICS - Drugs to Prevent/Control Uterine Bleeding		
Oxytocics		
<i>methylergonovine maleate TABS</i>	3	QL(28 ea per 180 day(s) retail); AL(At least 12 yrs old)
PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System		
Monoclonal Antibodies		
BEYFORTUS	3	SP; MP; PA
SYNAGIS SOLN	3	SP; MP; PA
PENICILLINS - Drugs to Treat Bacterial Infections		
Aminopenicillins		
<i>amoxicillin CAPS</i>	3	MP
<i>amoxicillin CHEW 125 MG, 250 MG</i>	3	MP
<i>amoxicillin SUSR</i>	3	MP
AMOXICILLIN SUSR (<i>amoxicillin</i>)	3	MP
<i>amoxicillin TABS</i>	3	MP
<i>ampicillin CAPS 500 MG</i>	3	
Natural Penicillins		

Drug Name	Drug Tier	Requirements/Limits
<i>penicillin v potassium SOLR</i>	3	MP
<i>penicillin v potassium TABS</i>	3	MP
Penicillin Combinations		
<i>amoxicillin & pot clavulanate CHEW</i>	3	
<i>amoxicillin & pot clavulanate SUSR</i>	3	
<i>amoxicillin & pot clavulanate TABS</i>	3	
AUGMENTIN ES-600 SUSR (<i>amoxicillin & pot clavulanate</i>)	3	
AUGMENTIN TABS 125 MG-500 MG (<i>amoxicillin & pot clavulanate</i>)	3	
Penicillinase-Resistant Penicillins		
<i>dicloxacillin sodium</i>	3	
PHARMACEUTICAL ADJUVANTS		
Liquid Vehicles		
FLAVOR BLEND SUSP	4	RX/OTC
FLAVOR PLUS LIQD	4	RX/OTC
FLAVOR SWEET-SF SYRP	4	RX/OTC
FLAVOR SWEET SYRP	4	RX/OTC
FREEDOM PEG TROCHE BASE POWD	4	
GRAPE SYRUP SYRP	4	RX/OTC
MX-SOL BLEND SF SUSP	4	RX/OTC
MX-SOL BLEND SUSP	4	RX/OTC
MX-SOL SF SYRP	4	RX/OTC
MX-SOL SUSPEND SUSP	4	RX/OTC
MX-SOL SYRP	4	RX/OTC
ORA-BLEND SF SUSP	4	RX/OTC
ORA-BLEND SUSP	4	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ORAL MIX FLAVORED SUSPENDING VEHICLE SUSP	4	RX/OTC	SYRSPEND SF LIQD	4	RX/OTC
ORAL MIX SF SUSP	4	RX/OTC	SYRUP VEHICLE SF SYRP	4	RX/OTC
ORAL SUSPEND LIQD	4	RX/OTC	SYRUP VEHICLE SYRP	4	RX/OTC
ORAL SYRUP FLAVORED VEHICLE SYRP	4	RX/OTC	TROCHE BASE NS POWD	4	
ORAL SYRUP SF SYRP	4	RX/OTC	TROCHE BASE POWD	4	
ORAPENN SD ANHYDROUS SWEETENED LIQD	4	RX/OTC	UNISPEND ANHYDROUS SWEETENED SUSP	4	RX/OTC
ORAPENN SD ANHYDROUS UNSWEETENED LIQD	4	RX/OTC	UNISPEND ANHYDROUS UNSWEETENED SUSP	4	RX/OTC
ORA-PLUS LIQD	4	RX/OTC	VERSAFREE SYRP	4	RX/OTC
ORA-SWEET SF SYRP 10 %-9 %	4	RX/OTC	VERSAPLUS SYRP	4	RX/OTC
ORA-SWEET SYRP 4 %-5 %-54 %	4	RX/OTC	Pharmaceutical Excipients		
PCCA CUSTOM TROCHE BASE POWD	4		SODIUM BENZOATE	4	RX/OTC
PCCA POLYGLYCOL TROCHE POWD	4		Semi Solid Vehicles		
PCCA SWEET-SF SYRP	4	RX/OTC	1ST BASE	4	RX/OTC
PCCA SYRUP VEHICLE SYRP	4	RX/OTC	ALPAWASH	4	RX/OTC
PCCA-PLUS SUSP	4	RX/OTC	ALTADERM CREAM BASE	4	RX/OTC
SOSWEET SYRP	4	RX/OTC	ANHYDROUS BASE OINT	4	
SUSPENDIT ANHYDROUS SUSP	4	RX/OTC	ARBEM H-COSMETIC	4	RX/OTC
SUSPENDRX WITH BITTER-BLOC/SWEETENED SUSP	4	RX/OTC	ARBEM LIOPEN	4	RX/OTC
SUSPENDRX WITH BITTER-BLOC/UNSWEETENED SUSP	4	RX/OTC	ATREVIS HYDROGEL	4	RX/OTC
SUSPENSION VEHICLE SUSP	4	RX/OTC	AUXIPRO VANISHING CREAM	4	RX/OTC
SYRPALTA SYRP 83 %	4	RX/OTC	AZ CREAM	4	RX/OTC
			BABY SKIN PROTECTANT	3	RX/OTC
			BASE PCCA CLARIFYING	4	RX/OTC
			BASE W301	4	RX/OTC
			CHRYSADERM DAY	4	RX/OTC
			CHRYSADERM NIGHT	4	RX/OTC
			CLEODERM	4	RX/OTC
			CREAM BASE	4	RX/OTC
			CREAM CONCENTRATE	4	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CUTIS PLUS	4	RX/OTC	NOURILITE	4	RX/OTC
DAILY MOISTURIZER	3	RX/OTC	NOURIVAN ANTIOX CREAM BASE	4	RX/OTC
DURABASE	4	RX/OTC	OMNIBASE	4	RX/OTC
DURABASE ADVANCED	4	RX/OTC	PCCA ALADERM BASE	4	RX/OTC
EMOLIVAN	4	RX/OTC	PCCA ANHYDROUS BASE OINT	4	
EMOLLIENT CREAM	4	RX/OTC	PCCA ANHYDROUS LIPODERM BASE	4	RX/OTC
EMOLLIENT CREAM BASE	4	RX/OTC	PCCA BASE 7542	4	RX/OTC
FAGRON LS PLUS	4	RX/OTC	PCCA BIOPEPTIDE BASE	4	RX/OTC
FAGRON NATURAL CREAM	4	RX/OTC	PCCA CANNIDEX 2.0 CUSTOMBASE	4	RX/OTC
FAGRON SUPREME CREAM	4	RX/OTC	PCCA CANNIDEX CUSTOM BASE	4	RX/OTC
FATTIBASE	4	RX/OTC	PCCA COSMETIC HRT BASE	4	RX/OTC
FITALITE	4	RX/OTC	PCCA EMOLLIENT CREAM BASE	4	RX/OTC
FLEX BASE	4	RX/OTC	PCCA HYDRABASE SB CUSTOMBASE	4	RX/OTC
FREEDOM ADAPTADERM	4	RX/OTC	PCCA LIPODERM BASE	4	RX/OTC
FREEDOM DERMA SERUM	4	RX/OTC	PCCA LIPODERM CUSTOM BASE	4	RX/OTC
FREEDOM DERMA-D	4	RX/OTC	PCCA MVC BASE	4	RX/OTC
FREEDOM DERMA-N	4	RX/OTC	PCCA NATACREAM	4	RX/OTC
HYDROUS EMULSIFIED BASE	4	RX/OTC	PCCA POLYPEG BASE	4	RX/OTC
LIP BALM BASE	4	RX/OTC	PCCA PRACASIL TM-PLUS BASE	4	RX/OTC
LIPO CREAM BASE	4	RX/OTC	PCCA VANISHING CREAM LIGHT	4	RX/OTC
LIPOCREAM BASE	4	RX/OTC	PCCA VANISHING CREAM/LOTION BASE	4	RX/OTC
LIOPEN ABSORPTION ENHANCING BASE	4	RX/OTC	PCCA VANPEN BASE	4	RX/OTC
LIOPEN ULTRA BASE	4	RX/OTC	PCCA WAV CUSTOM BASE	4	RX/OTC
LIPOSOMAL HEAVY	4	RX/OTC	PEG	4	RX/OTC
LIPOSOMAL REGULAR	4	RX/OTC	PEG OINTMENT BASE	4	RX/OTC
MEDIDERM	4	RX/OTC	PENCREAM	4	RX/OTC
MICRODERM BASE	4	RX/OTC			
MICROSOME BASE	4	RX/OTC			
MULTIBASE	4	RX/OTC			
MULTI-PHASIC PENETRATINGCOMPOUND BASE	4	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PENDERM	4	RX/OTC	VANIBASE	4	RX/OTC
PENSOMAL CREAM	4	RX/OTC	VANISHING CREAM	4	RX/OTC
PETROLATUM	3	RX/OTC	VANISHING CREAM BOTANICALBASE	4	RX/OTC
PETROLEUM JELLY	3	RX/OTC	VANISH-PEN	4	RX/OTC
PETROLEUM JELLYBABY	3	RX/OTC	VERSAPRO	4	RX/OTC
PFCB	4	RX/OTC	VERSATILE CREAM BASE	4	RX/OTC
PHARMABASE ANTIOXIDANT	4	RX/OTC	VERSATILE RICH CREAM BASE	4	RX/OTC
PHARMABASE COSMETIC	4	RX/OTC	VERSIGEL	4	RX/OTC
PHARMABASE COSMETIC NATURAL	4	RX/OTC	VP DERMABASE	4	RX/OTC
PHARMABASE HEAVY	4	RX/OTC	WOUND CARE CREAM	4	RX/OTC
PHARMABASE LIGHT	4	RX/OTC	XCEL 100	4	RX/OTC
PHARMABASE VAGINAL MOISTURIZING	4	RX/OTC	XEMATOP BASE	4	RX/OTC
PHYTOBASE	4	RX/OTC	YELLOW PETROLATUM	3	RX/OTC
POLYETHYLENE GLYCOL BLEND	4	RX/OTC	ZOE SCRIPTS IDEALBASE	4	RX/OTC
P-SILOXAN DS	4	RX/OTC	PROGESTINS - Hormone Replacement/Modifying Drugs		
RA PETROLEUM JELLY	3	RX/OTC	Progestins		
SA3 DERM	4	RX/OTC	AYGESTIN TABS (<i>norethindrone acetate</i>)	2	MP
SALT DURABLE CREAM	4	RX/OTC	<i>medroxyprogesterone acetate 2.5 MG, 5 MG, 10 MG</i>	1	MP
SALT STABLE LS ADVANCED	4	RX/OTC	<i>megestrol acetate (appetite)</i>	2	
SALTSTABLE LO	4	RX/OTC	<i>norethindrone acetate TABS</i>	1	MP
SANARE ADVANCED SCAR THERAPY	4	RX/OTC	<i>progesterone CAPS</i>	1	MP
SANARE SCAR THERAPY	4	RX/OTC	<i>progesterone OIL</i>	2	MP
SCAR CARE CREAM	4	RX/OTC	PROMETRIUM CAPS (<i>progesterone</i>)	2	MP
SILPROTEX PLUS	4	RX/OTC	PROVERA (<i>medroxyprogesterone acetate</i>)	2	MP
SKIN PROTECTANT PETROLATUM	3	RX/OTC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and		
SKYY DERM	4	RX/OTC			
TERODERM	4	RX/OTC			
TERODERM-PLUS	4	RX/OTC			
U-BASE	4	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits
Emotional Conditions		
Agents for Chemical Dependency		
<i>lofexidine hcl</i>	1	
LUCEMYRA (<i>lofexidine hcl</i>)	1	
Anti-Cataplectic Agents		
SODIUM OXYBATE SOLN	3	QL(18 ml daily); AL(At least 7 yrs old); SP; PA
XYWAV	3	QL(18 ml daily); AL(At least 7 yrs old); SP; PA
Antidementia Agents		
ADLARITY PTWK	3	PA
ARICEPT TABS (<i>donepezil hydrochloride</i>)	2	
<i>donepezil hydrochloride TABS 23 MG</i>	2	
<i>donepezil hydrochloride TABS 5 MG, 10 MG</i>	1	
<i>donepezil hydrochloride TBDP</i>	1	
EXELON (<i>rivastigmine</i>)	1	
<i>galantamine hydrobromide CP24</i>	2	
<i>galantamine hydrobromide SOLN</i>	2	
<i>galantamine hydrobromide TABS</i>	1	
<i>memantine hcl CP24</i>	2	
<i>memantine hcl SOLN</i>	1	
<i>memantine hcl TABS</i>	1	
NAMENDA TITRATION PAK TABS (<i>memantine hcl</i>)	2	
NAMENDA XR CP24 (<i>memantine hcl</i>)	2	
NAMENDA TABS (<i>memantine hcl</i>)	2	

Drug Name	Drug Tier	Requirements/Limits
NAMZARIC C4PK	2	
NAMZARIC CP24	2	
RAZADYNE ER CP24 (<i>galantamine hydrobromide</i>)	2	
<i>rivastigmine</i>	2	
<i>rivastigmine tartrate CAPS</i>	1	
Fibromyalgia Agents		
SAVELLA TITRATION PACK MISC	1	
SAVELLA TABS	1	
Movement Disorder Drug Therapy		
AUSTEDO XR PATIENT TITRATION KIT TEPK	3	AL(At least 18 yrs old); SP; PA
AUSTEDO XR TB24	3	AL(At least 18 yrs old); SP; PA
AUSTEDO TABS	3	AL(At least 18 yrs old); SP; PA
INGREZZA CAPS	3	AL(At least 18 yrs old); SP; PA
INGREZZA CPPK	3	AL(At least 18 yrs old); SP; PA
Multiple Sclerosis Agents		
AMPYRA (<i>dalfampridine</i>)	3	QL(2 ea daily); AL(At least 18 yrs old - Up to 70 yrs old); SP; PA
AUBAGIO (<i>teriflunomide</i>)	2	SP
AVONEX PEN AJKT	1	SP
AVONEX PSKT	1	QL(4 ml per fill retail); SP
BAFIERTAM	2	QL(4 ea daily); SP
BETASERON KIT	1	SP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
COPAXONE SOSY 20 MG/ML (<i>glatiramer acetate</i>)	1	SP	REBIF SOSY 44 MCG/0.5ML	2	QL(7.5 ml per 30 day(s) retail); SP
COPAXONE SOSY 40 MG/ML (<i>glatiramer acetate</i>)	2	SP	TASCENSO ODT 0.25 MG	2	AL(At least 10 yrs old - Up to 17 yrs old); SP
<i>dalfampridine</i>	3	QL(2 ea daily); AL(At least 18 yrs old - Up to 70 yrs old); SP; PA	TASCENSO ODT 0.5 MG	2	AL(At least 10 yrs old - Up to 18 yrs old); SP
<i>dimethyl fumarate CDPK</i>	1	SP	TECFIDERA STARTER PACK CDPK (<i>dimethyl fumarate</i>)	2	SP
<i>dimethyl fumarate CPDR</i>	1	SP	TECFIDERA CPDR (<i>dimethyl fumarate</i>)	2	SP
EXTAVIA KIT	2	SP	<i>teriflunomide</i>	1	SP
<i> fingolimod hcl</i>	1	SP	VUMERITY	2	SP
GILENYA	2	SP	ZEPOSIA 7-DAY STARTER PACK CPPK	2	SP
<i>glatiramer acetate SOSY</i>	2	SP	ZEPOSIA STARTER KIT CPPK	2	SP
KESIMPTA	2	SP	ZEPOSIA CAPS	2	SP
MAVENCLAD	2	SP	Postherpetic Neuralgia (PHN)/Neuropathic Pain Agents		
MAYZENT STARTER PACK TBPK	2	SP	<i>gabapentin (once-daily) TABS</i>	1	
MAYZENT TABS	2	SP	GRALISE TABS	1	
PLEGRIDY STARTER PACK SOAJ SC	2	SP	GRALISE TABS (<i>gabapentin (once-daily)</i>)	1	
PLEGRIDY STARTER PACK SOSY SC	2	SP	Restless Leg Syndrome (RLS) Agents		
PLEGRIDY SOAJ SC 125 MCG/0.5ML	2	SP	HORIZANT	1	
PLEGRIDY SOSY IM	2	SP	Smoking Deterrents		
PONVORY 14-DAY STARTER PACK TBPK	2	AL(At least 18 yrs old - Up to 55 yrs old); SP	APO-VARENICLINE TABS	3	QL(2 ea daily; 60 ea per fill retail); 6 max fill(s) per 365 day(s) retail
PONVORY TABS	2	AL(At least 18 yrs old - Up to 55 yrs old); SP	<i>bupropion hcl (smoking deterrent)</i>	3	QL(2 ea daily)
REBIF REBIDOSE TITRATIONPACK SOAJ	2	SP	NICODERM CQ PT24 TD (<i>nicotine</i>)	3	QL(1 ea daily)
REBIF REBIDOSE SOAJ	2	SP	NICORETTE MINI LOZG (<i>nicotine polacrilex</i>)	3	QL(20 ea daily)
REBIF TITRATION PACK SOSY	2	SP			
REBIF SOSY 22 MCG/0.5ML	2	SP			

Drug Name	Drug Tier	Requirements/Limits
NICORETTE STARTER KIT GUM 2 MG (<i>nicotine polacrilex</i>)	3	QL(30 ea daily)
NICORETTE STARTER KIT GUM 4 MG (<i>nicotine polacrilex</i>)	3	QL(24 ea daily)
NICORETTE GUM 4 MG (<i>nicotine polacrilex</i>)	3	QL(24 ea daily)
NICORETTE GUM 2 MG (<i>nicotine polacrilex</i>)	3	QL(30 ea daily)
NICORETTE LOZG (<i>nicotine polacrilex</i>)	3	QL(20 ea daily)
<i>nicotine polacrilex GUM 2 MG</i>	3	QL(30 ea daily)
<i>nicotine polacrilex GUM 4 MG</i>	3	QL(24 ea daily)
<i>nicotine polacrilex LOZG</i>	3	QL(20 ea daily)
NICOTINE TRANSDERMAL SYSTEM KIT	3	QL(1 ea daily)
<i>nicotine MISC XX</i>	3	QL(1 ea daily)
<i>nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR</i>	3	QL(1 ea daily)
NICOTROL INHALER INHA	3	QL(168 ea per 30 day(s) retail)
NICOTROL NS SOLN	3	QL(40 ml per 30 day(s) retail)
<i>varenicline tartrate TABS</i>	3	QL(2 ea daily; 60 ea per fill retail); 6 max fill(s) per 365 day(s) retail
<i>varenicline tartrate TBPk</i>	1	QL(2 ea daily); 6 max fill(s) per 365 day(s) retail
RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions		
Cystic Fibrosis Agents		
BRONCHITOL	3	QL(20 ea daily); AL(At least 18 yrs old); PA

Drug Name	Drug Tier	Requirements/Limits
BRONCHITOL TOLERANCE TEST	3	QL(20 ea daily); AL(At least 18 yrs old); PA
KALYDECO PACK	CO	SP
ORKAMBI PACK	CO	SP
PULMOZYME	3	SP; PA
TRIKAFTA THPK	CO	SP
TETRACYCLINES - Drugs to Treat Bacterial Infections		
Tetracyclines		
<i>doxycycline (monohydrate) CAPS 50 MG, 100 MG</i>	3	
<i>doxycycline (monohydrate) SUSR</i>	3	
<i>doxycycline (monohydrate) TABS 50 MG, 100 MG</i>	3	
<i>doxycycline hyclate CAPS</i>	3	
<i>doxycycline hyclate TABS 20 MG, 100 MG</i>	3	
<i>minocycline hcl CAPS</i>	3	
VIBRAMYCIN CAPS (<i>doxycycline hyclate</i>)	3	
VIBRAMYCIN SUSR (<i>doxycycline (monohydrate)</i>)	3	
THYROID AGENTS - Drugs to Regulate Thyroid Hormones		
Antithyroid Agents		
<i>methimazole TABS</i>	3	MP
<i>propylthiouracil</i>	3	MP
Thyroid Hormones		
ADTHYZA TABS	3	MP
ARMOUR THYROID TABS	3	MP
CYTOMEL TABS (<i>liothyronine sodium</i>)	3	MP

Drug Name	Drug Tier	Requirements/Limits
ERMEZA SOLN OR	3	
<i>levothyroxine sodium</i> CAPS 13 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG, 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG	3	
<i>levothyroxine sodium</i> SOLR IV	3	
LEVOTHYROXINE SODIUM SOLR IV (<i>levothyroxine sodium</i>)	3	
<i>levothyroxine sodium</i> TABS	3	MP
<i>liothyronine sodium</i> SOLN	2	
<i>liothyronine sodium</i> TABS	3	MP
NIVA THYROID TABS	3	MP
NP THYROID 120 TABS	3	MP
NP THYROID 15 TABS	3	MP
NP THYROID 30 TABS	3	MP
NP THYROID 60 TABS	3	MP
NP THYROID 90 TABS	3	MP
SYNTHROID TABS (<i>levothyroxine sodium</i>)	3	MP
THYQUIDITY SOLN OR	3	
THYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	3	MP
TIROSINT CAPS 13 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG, 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG (<i>levothyroxine sodium</i>)	3	
TIROSINT CAPS 13 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG, 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG	3	

Drug Name	Drug Tier	Requirements/Limits
TIROSINT-SOL SOLN OR 13 MCG/ML, 25 MCG/ML, 50 MCG/ML, 75 MCG/ML, 88 MCG/ML, 100 MCG/ML, 112 MCG/ML, 125 MCG/ML, 137 MCG/ML, 150 MCG/ML, 175 MCG/ML, 200 MCG/ML	3	
TRIOSTAT SOLN (<i>liothyronine sodium</i>)	2	
TOXOIDS		
Toxoid Combinations		
ADACEL SUSP	4	
BOOSTRIX SUSP	4	
BOOSTRIX SUSY	4	
DAPTACEL	4	
DIPHThERIA/TETANUS TOXOIDS ADSORBED PEDIATRIC SUSP	4	
INFANRIX	4	
KINRIX SUSY	4	
PEDIARIX SUSY	4	
PENTACEL	4	
QUADRACEL SUSP	4	
QUADRACEL SUSY	4	
TDVAX SUSP	4	
TENIVAC INJ	4	
TETANUS/DIPHThERIA TOXOIDS-ADSORBED ADULT SUSP	4	
VAXELIS SUSP	4	
VAXELIS SUSY	4	
ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions		
Antispasmodics		
ANASPAZ TBDP (<i>hyoscyamine sulfate</i>)	3	AL(Up to 64 yrs old)
CUVPOSA SOLN OR (<i>glycopyrrolate</i>)	3	AL(Up to 12 yrs old)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>dicyclomine hcl CAPS</i>	3	AL(Up to 64 yrs old)	PEPCID AC TABS (<i>famotidine</i>)	3	
<i>dicyclomine hcl SOLN OR</i>	3	AL(Up to 64 yrs old)	PEPCID TABS (<i>famotidine</i>)	3	RX/OTC
<i>dicyclomine hcl TABS</i>	3	AL(Up to 64 yrs old)	TAGAMET HB 200 TABS (<i>cimetidine</i>)	3	RX/OTC
<i>glycopyrrolate SOLN OR 1 MG/5ML</i>	3	AL(Up to 12 yrs old)	TAGAMET HB TABS (<i>cimetidine</i>)	3	RX/OTC
<i>glycopyrrolate TABS 1 MG, 2 MG</i>	3		Misc. Anti-Ulcer		
<i>hyoscyamine sulfate ELIX</i>	3	AL(Up to 64 yrs old)	CARAFATE TABS (<i>sucralfate</i>)	3	QL(4 ea daily)
<i>hyoscyamine sulfate SOLN OR 0.125 MG/ML</i>	3	AL(Up to 64 yrs old)	<i>sucralfate TABS</i>	3	QL(4 ea daily)
<i>hyoscyamine sulfate SUBL 0.125 MG</i>	3	AL(Up to 64 yrs old)	Proton Pump Inhibitors		
<i>hyoscyamine sulfate TABS 0.125 MG</i>	3	AL(Up to 64 yrs old)	ACIPHEX TBEC (<i>rabeprazole sodium</i>)	2	
<i>hyoscyamine sulfate TB12 0.375 MG</i>	3	AL(Up to 64 yrs old)	DEXILANT (<i>dexlansoprazole</i>)	2	
<i>hyoscyamine sulfate TBDP 0.125 MG</i>	3	AL(Up to 64 yrs old)	<i>dexlansoprazole</i>	2	
LEVBIID TB12 (<i>hyoscyamine sulfate</i>)	3	AL(Up to 64 yrs old)	<i>esomeprazole magnesium CPDR 40 MG</i>	2	
LEVSIN/SL SUBL (<i>hyoscyamine sulfate</i>)	3	AL(Up to 64 yrs old)	<i>esomeprazole magnesium CPDR 20 MG</i>	2	QL(2 ea daily); RX/OTC
LEVSIN TABS (<i>hyoscyamine sulfate</i>)	3	AL(Up to 64 yrs old)	<i>esomeprazole magnesium PACK</i>	2	QL(2 ea daily)
ROBINUL FORTE TABS (<i>glycopyrrolate</i>)	3		<i>esomeprazole magnesium TBEC</i>	2	
ROBINUL TABS (<i>glycopyrrolate</i>)	3		<i>lansoprazole CPDR 15 MG</i>	2	QL(1 ea daily); RX/OTC
H-2 Antagonists			<i>lansoprazole CPDR 30 MG</i>	2	
<i>cimetidine hcl OR 300 MG/5ML</i>	3		<i>lansoprazole TBDD</i>	2	RX/OTC
<i>cimetidine TABS</i>	3	RX/OTC	NEXIUM 24HR CLEAR MINIS CPDR (<i>esomeprazole magnesium</i>)	2	QL(2 ea daily); RX/OTC
<i>famotidine SUSR</i>	3	AL(Up to 6 yrs old)	NEXIUM 24HR CPDR (<i>esomeprazole magnesium</i>)	2	QL(2 ea daily); RX/OTC
<i>famotidine TABS</i>	3		NEXIUM 24HR TBEC (<i>esomeprazole magnesium</i>)	2	
PEPCID AC MAXIMUM STRENGTH TABS (<i>famotidine</i>)	3	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits
NEXIUM CPDR 40 MG (esomeprazole magnesium)	2	
NEXIUM CPDR 20 MG (esomeprazole magnesium)	2	QL(2 ea daily); RX/OTC
NEXIUM PACK (esomeprazole magnesium)	1	QL(2 ea daily)
NEXIUM PACK omeprazole magnesium CPDR	1	QL(2 ea daily)
omeprazole magnesium TBEC	2	QL(2 ea daily)
omeprazole CPDR 20 MG	2	
omeprazole CPDR 10 MG, 40 MG	1	QL(2 ea daily)
omeprazole TBDD	2	
omeprazole TBEC	2	QL(2 ea daily)
pantoprazole sodium PACK	2	QL(2 ea daily)
pantoprazole sodium TBEC	1	QL(2 ea daily)
PREVACID 24HR CPDR (lansoprazole)	2	QL(1 ea daily); RX/OTC
PREVACID SOLUTAB TBDD (lansoprazole)	2	RX/OTC
PREVACID CPDR 30 MG (lansoprazole)	2	
PRILOSEC OTC TBEC (omeprazole magnesium)	2	
PRILOSEC PACK	2	
PROTONIX PACK (pantoprazole sodium)	1	QL(2 ea daily)
PROTONIX TBEC (pantoprazole sodium)	1	QL(2 ea daily)
RABEPRAZOLE SODIUM DR SPRINKLE CPSP	2	
rabeprazole sodium TBEC	2	
VOQUEZNA	3	QL(1 ea daily); AL(At least 18 yrs old); PA

Drug Name	Drug Tier	Requirements/Limits
Ulcer Drugs - Prostaglandins		
CYTOTEC (misoprostol)	3	QL(4 ea daily)
misoprostol	3	QL(4 ea daily)
Ulcer Therapy Combinations		
amoxicillin-clarithromycin w/ lansoprazole THPK	2	QL(224 ea per fill retail)
bismuth subcitrate potassium-metronidazole- tetracycline	2	
KONVOMEPEP SUSR	2	
OMECLAMOXY-PAK	2	
omeprazole-sodium bicarbonate CAPS	2	RX/OTC
omeprazole-sodium bicarbonate PACK	2	
PYLERA (bismuth subcitrate potassium- metronidazole- tetracycline)	1	
TALICIA	2	
VOQUEZNA DUAL PAK	2	
VOQUEZNA TRIPLE PAK	2	
ZEGERID CAPS (omeprazole-sodium bicarbonate)	2	RX/OTC
ZEGERID PACK (omeprazole-sodium bicarbonate)	2	
URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms		
Urinary Antispasmodic - Antimuscarinics (Anticholinergic)		
darifenacin hydrobromide	2	
DETROL LA CP24 (tolterodine tartrate)	2	
DETROL TABS (tolterodine tartrate)	2	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
DITROPAN XL TB24 5 MG, 10 MG (<i>oxybutynin chloride</i>)	2		BCG VACCINE	4	
<i>fesoterodine fumarate</i>	1	MP	BEXSERO	4	
GELNIQUE GEL 10 %	2		BIOTHRAX	4	
<i>oxybutynin chloride SOLN</i>	1		CAPVAXIVE	4	
<i>oxybutynin chloride TABS</i>	1		HIBERIX SOLR IJ	4	
<i>oxybutynin chloride TB24</i>	1		MENACTRA	4	
OXYTROL FOR WOMEN PTTW	3	RX/OTC	MENQUADFI	4	
OXYTROL PTTW	2	RX/OTC	MENVEO SOLN	4	
<i>solifenacin succinate TABS</i>	1		MENVEO SOLR	4	
<i>tolterodine tartrate CP24</i>	2		PEDVAX HIB SUSP	4	
<i>tolterodine tartrate TABS</i>	2		PENBRAYA	4	
TOVIAZ (<i>fesoterodine fumarate</i>)	2	MP	PNEUMOVAX 23 IJ 25 MCG/0.5ML	4	
<i>trospium chloride CP24</i>	2		PNEUMOVAX 23/1 DOSE IJ 25 MCG/0.5ML	4	
<i>trospium chloride TABS</i>	2		PREVNAR 13	4	
VESICARE LS SUSP	2		PREVNAR 20	4	
VESICARE TABS (<i>solifenacin succinate</i>)	2		TRUMENBA	4	
Urinary Antispasmodics - Beta-3 Adrenergic Agonists			TYPHIM VI SOLN	4	
GEMTESA	2		TYPHIM VI SOSY	4	
<i>mirabegron TB24</i>	2		VAXCHORA	4	
MYRBETRIQ SRER	2		VAXNEUVANCE	4	
MYRBETRIQ TB24	2		VIVOTIF	4	
MYRBETRIQ TB24 (<i>mirabegron</i>)	2		Viral Vaccines		
Urinary Antispasmodics - Cholinergic Agonists			ABRYSVO	4	
<i>bethanechol chloride</i>	3	QL(4 ea daily)	ACAM2000	4	
Urinary Antispasmodics - Direct Muscle Relaxants			AFLURIA 2024-2025 SUSP	4	
<i>flavoxate hcl</i>	2		AFLURIA 2024-2025 SUSY	4	
VACCINES			AFLURIA QUADRIVALENT 2022-2023 SUSP	4	
Bacterial Vaccines			AFLURIA QUADRIVALENT 2022-2023 SUSY	4	
ACTHIB SOLR IM	4		AFLURIA QUADRIVALENT 2023-2024 SUSP	4	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
AFLURIA QUADRIVALENT 2023-2024 SUSY	4		FLUBLOK QUADRIVALENT 2023-2024	4	
AREXVY	4	AL(At least 60 yrs old)	FLUCELVAX 2024-2025 SUSP	4	
AUDENZ EMUL IM	4		FLUCELVAX 2024-2025 SUSY	4	
AUDENZ PRSY IM	4		FLUCELVAX QUADRIVALENT 2022-2023 SUSP	4	
COMIRNATY 2023-24 SUSP	4		FLUCELVAX QUADRIVALENT 2022-2023 SUSY	4	
COMIRNATY 2023-24 SUSY	4		FLUCELVAX QUADRIVALENT 2023-2024 SUSP	4	
COMIRNATY 2024-25 SUSY	4		FLUCELVAX QUADRIVALENT 2023-2024 SUSY	4	
COMIRNATY SUSP	4		FLULAVAL 2024-2025 SUSY	4	
DENGVAXIA	4		FLULAVAL QUADRIVALENT 2022-2023 SUSY	4	
ENGERIX-B SUSP 20 MCG/ML	4	3 max fill(s) per 999 day(s) retail	FLULAVAL QUADRIVALENT 2023-2024 SUSY	4	
ENGERIX-B SUSY	4	3 max fill(s) per 999 day(s) retail	FLUMIST QUADRIVALENT	4	
ERVEBO	4		FLUZONE 2024-2025 SUSP	4	
FLUAD 2024-2025	4	QL(1 ml per fill retail); 1 max fill(s) per 180 day(s) retail	FLUZONE 2024-2025 SUSY	4	
FLUAD QUADRIVALENT 2022-2023	4		FLUZONE HIGH-DOSE 2024-2025 SUSY	4	QL(0.5 ml per fill retail); 1 max fill(s) per 180 day(s) retail
FLUAD QUADRIVALENT 2023-2024	4		FLUZONE HIGH-DOSE PF 2022-2023	4	
FLUARIX 2024-2025 SUSY	4		FLUZONE HIGH-DOSE PF 2023-2024	4	
FLUARIX QUADRIVALENT 2022-2023 SUSY	4		FLUZONE QUADRIVALENT 2022-2023 SUSP	4	
FLUARIX QUADRIVALENT 2023-2024 SUSY	4				
FLUBLOK 2024-2025 SOSY	4				
FLUBLOK QUADRIVALENT 2022-2023	4				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
FLUZONE QUADRIVALENT 2022-2023 SUSY	4		MODERNA COVID-19 VACCINE SUSP	4	
FLUZONE QUADRIVALENT 2023-2024 SUSP	4		MRESVIA	4	
FLUZONE QUADRIVALENT 2023-2024 SUSY	4		NOVAVAX COVID-19 VACCINE/2023-24 SUSP	4	
GARDASIL 9 SUSP	4	3 max fill(s) per 999 day(s) retail; AL(Up to 45 yrs old)	NOVAVAX COVID-19 VACCINE/2024-25 SUSY	4	
GARDASIL 9 SUSY	4	3 max fill(s) per 999 day(s) retail; AL(Up to 45 yrs old)	NOVAVAX COVID-19 VACCINE SUSP	4	
HAVRIX	4		PFIZER-BIONTECH COVID-19VACCINE/5-11Y/2023-24 SUSP	4	
HEPLISAV-B SOSY	4	3 max fill(s) per 999 day(s) retail	PFIZER-BIONTECH COVID-19VACCINE/5-11Y/2024-25 SUSP	4	
IMOVAX RABIES (H.D.C.V.) SUSR	4		PFIZER-BIONTECH COVID-19VACCINE/5-11Y SUSP	4	
IPOL INACTIVATED IPV	4		PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y/2023-24 SUSP	4	
IXCHIQ	4		PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y/2024-25 SUSP	4	
IXIARO	4		PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y SUSP	4	
JANSSEN COVID-19 VACCINE	4		PFIZER-BIONTECH COVID-19VACCINE/ADULT RTU SUSP	4	
JYNNEOS	4		PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/5-11Y	4	
M-M-R II SOLR	4		PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/6M-4Y	4	
MODERNA COVID-19 VACCINE/6MO-11Y/2023-24 SUSP	4		PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/B A.4/BA.5	4	
MODERNA COVID-19 VACCINE/6MO-11Y/2024-25 SUSY	4				
MODERNA COVID-19 VACCINE/BIVALENT/6M O-5Y	4				
MODERNA COVID-19 VACCINE/BIVALENT/BA.4/BA.5	4				
MODERNA COVID-19 VACCINE6MO-5Y SUSP	4				

Drug Name	Drug Tier	Requirements/Limits
PFIZER-BIONTECH COVID-19VACCINE SUSP	4	
PREHEVBRIO	4	3 max fill(s) per 999 day(s) retail
PRIORIX SUSR	4	
PROQUAD SUSR	4	
RABAVERT	4	
RECOMBIVAX HB SUSP	4	3 max fill(s) per 999 day(s) retail
RECOMBIVAX HB SUSY	4	3 max fill(s) per 999 day(s) retail
ROTARIX SUSP	4	
ROTARIX SUSR	4	
ROTATEQ SOLN	4	
SANOFI COVID-19 VACCINE/ANTIGEN COMPONENT	4	
SHINGRIX	4	2 max fill(s) per 999 day(s) retail; AL(At least 50 yrs old)
SPIKEVAX COVID-19 VACCINE/2023-24 SUSP	4	
SPIKEVAX COVID-19 VACCINE/2023-24 SUSY	4	
SPIKEVAX COVID-19 VACCINE/2024-25 SUSY	4	
SPIKEVAX COVID-19 VACCINE SUSP	4	
STAMARIL SUSR	4	
TICOVAC	4	
TWINRIX SUSY	4	
VAQTA	4	
VARIVAX SUSR IJ 1350 PFU/0.5ML	4	2 max fill(s) per 999 day(s) retail
YF-VAX INJ	4	

VAGINAL AND RELATED PRODUCTS

Drug Name	Drug Tier	Requirements/Limits
Vaginal Anti-infectives		
CLEOCIN CREA (<i>clindamycin phosphate vaginal</i>)	2	
CLEOCIN SUPP <i>clindamycin phosphate vaginal CREA</i>	1	
CLINDESSE <i>clotrimazole vaginal CREA</i>	3	
<i>metronidazole vaginal</i>	1	
<i>miconazole nitrate vaginal CREA 2 %</i>	3	
<i>miconazole nitrate vaginal KIT</i>	3	
<i>miconazole nitrate vaginal SUPP 100 MG</i>	3	
MONISTAT 3 COMBINATION PACK KIT (<i>miconazole nitrate vaginal</i>)	3	
MONISTAT 7 COMBINATION PACK KIT	3	
MONISTAT 7 SIMPLY CURE CREA (<i>miconazole nitrate vaginal</i>)	3	
NUVESSA	1	
<i>terconazole vaginal CREA</i>	3	
VANDAZOLE	2	
XACIATO GEL	2	AL(At least 12 yrs old)
Vaginal Anti-inflammatory Agents		
<i>hydrocortisone acetate vaginal</i>	1	
<i>hydrocortisone vaginal</i>	1	
<i>hydrocortisone vaginal</i>	2	
MONISTAT CARE INSTANT ITCH RELIEF MAXIMUM STRENGTH (<i>hydrocortisone vaginal</i>)	1	
Vaginal Contraceptive - pH Modulators		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PHEXXI	3	QL(180 gm per 30 day(s) retail)	<i>cholecalciferol LIQD OR 10 MCG/ML, 400 UNIT/ML</i>	3	MP
Vaginal Estrogens			<i>cholecalciferol TABS 1.25 MG, 10 MCG, 25 MCG, 50 MCG, 125 MCG, 400 UNIT, 1000 UNIT, 1250 MCG, 2000 UNIT, 5000 UNIT, 50000 UNIT</i>	3	
ESTRACE CREA (<i>estradiol vaginal</i>)	3	QL(1.42 gm daily); MP	DRISDOL CAPS (<i>ergocalciferol</i>)	3	MP
<i>estradiol vaginal CREA</i>	3	QL(1.42 gm daily); MP	D-VI-SOL LIQD OR (<i>cholecalciferol</i>)	3	MP
<i>estradiol vaginal TABS</i>	3	MP	<i>ergocalciferol CAPS</i>	3	MP
VAGIFEM TABS (<i>estradiol vaginal</i>)	3	MP	<i>ergocalciferol SOLN OR</i>	3	
Vaginal Progestins			MEPHYTON TABS (<i>phytonadione</i>)	3	QL(3 ea per 30 day(s) retail); 3 day(s) max supply per 30 day(s) retail
CRINONE GEL	2	MP	<i>phytonadione TABS 5 MG</i>	3	QL(3 ea per 30 day(s) retail); 3 day(s) max supply per 30 day(s) retail
VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions					
Anaphylaxis Therapy Agents					
AUVI-Q SOAJ	2	QL(4 ea per fill retail)	<i>vitamin a CAPS 3 MG, 3000 MCG, 10000 UNIT</i>	4	
<i>epinephrine (anaphylaxis) SOAJ 0.3 MG/0.3ML</i>	2	QL(4 ea per fill retail)	VITAMIN D3 TABS (<i>cholecalciferol</i>)	3	
<i>epinephrine (anaphylaxis) SOAJ</i>	1	QL(4 ea per fill retail)	<i>vitamin e CAPS 90 MG, 180 MG, 200 UNIT, 268 MG, 400 UNIT, 450 MG, 1000 UNIT</i>	3	
EPIPEN 2-PAK SOAJ (<i>epinephrine (anaphylaxis)</i>)	1	QL(4 ea per fill retail)	VITAMIN E CAPS 200 UNIT	3	
EPIPEN-JR 2-PAK SOAJ (<i>epinephrine (anaphylaxis)</i>)	1	QL(4 ea per fill retail)	<i>vitamin e SOLN</i>	3	MP
SYMJEPI SOSY	2		VITAMIN E TABS 100 UNIT	3	
Vasopressors					
<i>midodrine hcl</i>	3	QL(3 ea daily)	Water Soluble Vitamins		
VITAMINS					
Oil Soluble Vitamins					
<i>beta carotene CAPS 7500 MCG, 25000 UNIT</i>	3		<i>ascorbic acid TABS 500 MG</i>	3	
<i>cholecalciferol CAPS 1.25 MG, 1.25 MG, 25 MCG, 50 MCG, 125 MCG, 1000 UNIT, 2000 UNIT, 5000 UNIT, 50000 UNIT</i>	3	MP	<i>biotin TABS 5 MG, 5000 MCG</i>	3	MP
			ENDUR-AMIDE TBCR	1	

Drug Name	Drug Tier	Requirements/ Limits
NIACIN TR CPCR	1	
NIACIN TR TBCR	1	
<i>niacinamide TABS 500 MG</i>	3	MP
<i>niacinamide TABS 100 MG</i>	1	
<i>niacinamide TBCR</i>	1	
<i>niacin CPCR 500 MG</i>	1	
<i>niacin TABS 50 MG, 250 MG, 500 MG</i>	1	
<i>niacin TABS 100 MG</i>	3	
<i>niacin TBCR 500 MG, 750 MG</i>	1	
<i>pyridoxine hcl TABS 100 MG</i>	4	MP
<i>pyridoxine hcl TABS 25 MG</i>	4	QL(2 ea daily); MP
<i>pyridoxine hcl TABS 50 MG</i>	4	QL(4 ea daily); MP
SLO-NIACIN TBCR 500 MG (<i>niacin</i>)	1	
<i>thiamine mononitrate TABS 100 MG</i>	4	QL(1 ea daily); MP

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1ST TIER UNIFINE PENTIPS29GX12MM	82	ABC COMPLETE SENIOR WOMENS 50+ TABS	133	ACCU-CHEK GUIDE CONTROL LEVEL1/LEVEL2 LIQD	64
1ST TIER UNIFINE PENTIPS31GX6MM	82	ABC COMPLETE WOMENS TABS 133		ACCU-CHEK MULTICLIX LANCET DEVICE KIT KIT	64
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AEROCHAMBER PLUS FLOW-VU MISC	118	AEROECLIPSE MASK SMALL MISC	118	AIMOVIG 140 MG/ML	127
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AEROCHAMBER PLUS FLOW- VU/SMALL MASK DEVI	117	AFLURIA QUADRIVALENT 2022- 2023 SUSP	165	AIRBORNE KIDS CHEW	133
AEROCHAMBER PLUS FLOW- VU/SMALL MASK MISC	117	AFLURIA QUADRIVALENT 2022- 2023 SUSY	165	AIRBORNE+GOOD REST CHEW 134	
AEROCHAMBER Z-STAT PLUS VALVED HOLDING CHAMBER W/FLOW VU MISC	118	AFLURIA QUADRIVALENT 2023- 2024 SUSP	165	AIRBORNE+PROBIOTIC CHEW	134
AEROCHAMBER Z-STAT PLUS/FLOWSIGNAL MISC	118	AFLURIA QUADRIVALENT 2023- 2024 SUSY	166	AIRDUO DIGIHALER 113/14	14
AEROCHAMBER Z-STAT PLUS/LARGE MASK MISC	118	AFREZZA POWD 4 UNIT, 8 UNIT, 12 UNIT	18	AIRDUO DIGIHALER 232/14	14
AEROCHAMBER Z-STAT PLUS/MEDIUM MASK MISC	118	AGAMATRIX CONTROL HIGH SOLN	64	AIRDUO DIGIHALER 55/14	14
AEROCHAMBER Z-STAT PLUS/SMALL MASK MISC	118	AGAMATRIX CONTROL NORMAL& HIGH SOLN	64	AIRDUO RESPICLICK 113/14 AEPB (fluticasone-salmeterol)	14
AEROCHAMBER/FLOWSIGNAL MISC	118	AGAMATRIX CONTROL SOLUTION LEVEL 2 SOLN	64	AIRDUO RESPICLICK 232/14 AEPB (fluticasone-salmeterol)	14
		AGAMATRIX CONTROL SOLUTION LEVEL 4 SOLN	64	AIRDUO RESPICLICK 55/14 AEPB 14	
		AGAMATRIX ULTRA-THIN		AIRS PEDIATRIC AEROSOL MASK MISC	118
				AIRSUPRA	14
				AIRZONE PEAK FLOW METER	118
				AJOVY SOAJ	127
				AJOVY SOSY	127
				AKEEGA	31
				AKYNZEO	22

albendazole	11	ALGAE BASED CALCIUM TABS	134	MULTIVITAMIN CHEW	134
albuterol sulfate AERS	14	ALIMTA SOLR (pemetrexed disodium)	30	ALIVE MENS ULTRA TABS	134
albuterol sulfate NEBU 0.083 %, 0.5 %, 0.63 MG/3ML, 1.25 MG/3ML, 2.5 MG/0.5ML	14	ALINIA TABS (nitazoxanide)	29	ALIVE MULTI-VITAMIN CHEW ..	134
ALBUTEROL SULFATE NEBU	14	aliskiren fumarate	28	ALIVE MULTI-VITAMIN CHILDRENS CHEWABLE CHEW	144
ALCAINE (propracaine hcl)	153	ALIVE ADULT PREMIUM GUMMY CHEW	134	ALIVE ONCE DAILY WOMENS ULTRA POTENCY TABS	134
alclometasone dipropionate CREA	45	ALIVE CALCIUM BONE SUPPORT MAX ABSORPTION TABS	134	ALIVE ULTRA POTENCY ADULT TABS	134
alclometasone dipropionate OINT	45	ALIVE DAILY ENERGY TABS ...	134	ALIVE ULTRA POTENCY WOMENS 50+ TABS	134
ALCOH-GLOVE CONTOURED WIPE	81	ALIVE DIABETIC MULTIVITAMIN TABS	134	ALIVE WOMENS 50+ CHEW	134
ALCOHOL PADS	81	ALIVE ENERGY 50+ TABS	134	ALIVE WOMENS 50+ COMPLETEMULTIVITAMIN TABS	134
ALCOHOL PREP PAD	81	ALIVE EVERYDAY IMMUNE HEALTH CAPS	134	ALIVE WOMENS 50+ GUMMY MULTIVITAMIN CHEW	134
ALCOHOL PREP PADS	81	ALIVE GARDEN GOODNES MENS TABS	134	ALIVE WOMENS ENERGY TABS	134
ALCOHOL PREPS	81	ALIVE GARDEN GOODNES WOMENS TABS	134	ALIVE WOMENS GUMMY MULTIVITAMIN CHEW	134
ALCOHOL SWABS	81	ALIVE GUMMIES FOR CHILDREN CHEW	143	ALKERAN (melphalan)	30
ALCOHOL SWABSTICKS	81	ALIVE HAIR, SKIN & NAILS CAPS	134	ALKINDI SPRINKLE CPSP	40
ALDACTAZIDE (spironolactone & hydrochlorothiazide)	50	ALIVE HAIR, SKIN & NAILS CHEW	134	ALL FLOW 1000 PFT FILTER DEVI .	118
ALDACTONE TABS 25 MG, 100 MG (spironolactone)	51	ALIVE MENS 50+ MULTIVITAMAMIN GUMMY CHEW .	134	ALL FLOW 1000 PULMONARY FUNCTION FILTER MISC	118
ALDACTONE TABS 50 MG (spironolactone)	51	ALIVE MENS 50+ TABS	134	ALL FLOW 2000 PFT FILTER DEVI .	118
alendronate sodium SOLN	51	ALIVE MENS 50+ ULTRA TABS .	134	ALL FLOW 3000 PFT FILTER DEVI .	118
alendronate sodium TABS 35 MG, 70 MG	51	ALIVE MENS COMPLETE MAX POTENCY TABS	134	ALL FLOW 4000 PFT FILTER DEVI .	118
alendronate sodium TABS 5 MG, 10 MG	51	ALIVE MENS COMPLETE MULTIVITAMIN TABS	134	ALL FLOW 5000 PFT FILTER DEVI .	119
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ALEVE TABS (naproxen sodium) ...	4				
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allopurinol57	aluminum hydroxide-mag carb SUSP 358 MG/15ML-95 MG/15ML10	amoxicillin & pot clavulanate CHEW . 155
almotriptan malate128	ALUNBRIG TABS32	amoxicillin & pot clavulanate SUSR 155
ALOCRIL153	ALUNBRIG TBPK32	amoxicillin & pot clavulanate TABS 155
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alogliptin benzoate18	amantadine hcl CAPS 33	amoxicillin CHEW 125 MG, 250 MG . 155
alogliptin-metformin hcl16	amantadine hcl SOLN 33	AMOXICILLIN SUSR (amoxicillin) 155
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	AMLADDEX TABS143	
	amlodipine besylate TABS36	
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MG/24HR	10	AQINJECT PEN NEEDLE/31G X 3/16"	83	ascorbic acid TABS 500 MG	169
ANDROGEL GEL TD 25 MG/2.5GM (testosterone)	10	AQINJECT PEN NEEDLE/32G X 5/32"	83	ASMANEX HFA AERO	13
ANDROGEL PUMP GEL TD 1.62 % (testosterone)	10	AQUALANCE LANCETS ULTRA THIN 30G	65	ASMANEX TWISTHALER 120 METERED DOSES AEPB	13
ANHYDROUS BASE OINT	156	ARANESP ALBUMIN FREE SOLN 25 MCG/ML, 40 MCG/ML, 60 MCG/ML, 100 MCG/ML, 200 MCG/ML	58	ASMANEX TWISTHALER 14 METERED DOSES AEPB	13
ANORO ELLIPTA	14	ARANESP ALBUMIN FREE SOSY 58		ASMANEX TWISTHALER 30 METERED DOSES AEPB 110 MCG/INH	13
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ANUSOL-HC EX (hydrocortisone (rectal))	10	ARBEM LIOPEN	156	aspirin buffered (cal carb-mag carb- mag oxide)	6
ANZEMET TABS 50 MG	21	AREXVY	166	aspirin CHEW	6
APADAZ	9	arformoterol tartrate	14	ASPIRIN SUPP 300 MG	6
APETIBEX CAPS	134	ARICEPT TABS (donepezil hydrochloride)	159	aspirin TABS 325 MG	6
APEXICON E CREA	45	ARIMIDEX (anastrozole)	31	aspirin TBEC 325 MG	6
APIDRA SOLN	18	ARIXTRA (fondaparinux sodium) .	15	aspirin TBEC 81 MG	6
APIDRA SOLOSTAR SOPN	18	ARMONAIR DIGIHALER	13	aspirin-dipyridamole	58
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APPE-CURB CAPS	134	ARNUITY ELLIPTA	13	ASSESS PEAK FLOW METER FULL RANGE	119
apraclonidine hcl	152	AROMASIN (exemestane)	31	ASSESS PEAK FLOW METER LOW RANGE	119
aprepitant CAPS 40 MG, 125 MG .	22	ARRANON (nelarabine)	30	ASSURE 3 CONTROL LEVEL 1/2 LIQD	65
aprepitant CAPS 80 MG	22	ARTHROTEC 50 TBEC (diclofenac w/ misoprostol)	4	ASSURE 4 CONTROL LEVEL 1/2 LIQD	65
aprepitant CAPS	22	ARTHROTEC 75 TBEC (diclofenac w/ misoprostol)	4	ASSURE COMFORT LANCETS ULTRA THIN 28G	65
aprepitant MISC	22	artificial tear solution	150	ASSURE DOSE NORMAL/HIGH CONTROL SOLN	65
APRISO CP24 (mesalamine)	55	ARZERRA	31		
AQ INSULIN SYRINGE/0.5ML/30G X 5/16"	83	ASACOL HD TBEC (mesalamine) .	55		
AQ INSULIN SYRINGE/1ML/29G X 1/2"	83				
AQ INSULIN SYRINGE/1ML/31G X 5/16"	83				

ASSURE ID DUO PRO SAFETY PEN NEEDLES 31G X 5MM83	atropine sulfate (ophthalmic) SOLN 151	NEEDLE/32GX4MM/DUAL AUTO PROTEC83
ASSURE ID SAFETY PEN NEEDLES 30G X 5/16"83	ATROPINE SULFATE SOLN 1 % 151	AUM SAFETY PEN NEEDLE/31G X 4MM83
ASSURE II CONTROL LEVEL 1 LIQD65	ATROVENT HFA12	AUM SAFETY PEN NEEDLE/31G X 5MM83
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ASSURE LANCE PLUS SAFETYLANCETS 30G65	AUGMENTIN TABS 125 MG-500 MG (amoxicillin & pot clavulanate)155	AURORA PEN NEEDLES 31G X8MM83
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ASSURE PRISM CONTROL LEVEL 1/2 SOLN65	AUM ALCOHOL PREP PADS81	AURORA UNIFINE PENTIPS/MINI/31GX3/16"83
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AUTOLET PLATFORMS MISC	65	AZOR (amlodipine besylate-olmesartan medoxomil)	27	BASAGLAR KWIKPEN SOPN	18
AUTOLET PLUS MISC	65	AZULFIDINE EN-TABS TBEC (sulfasalazine)	55	BASAGLAR TEMPO PEN SOPN ..	18
AUVELITY	16	AZULFIDINE TABS (sulfasalazine) 55		BASE PCCA CLARIFYING	156
AUVI-Q SOAJ	169	BABY SKIN PROTECTANT	156	BASE W301	156
AUXIPRO VANISHING CREAM ..	156	BACIGUENT	152	BASIC AM TABS	135
AVALIDE (irbesartan-hydrochlorothiazide)	27	bacitracin (ophthalmic)	152	BASIC PM TABS	135
AVAPRO (irbesartan)	26	bacitracin (topical) OINT	43	BASIS FACIAL MOISTURIZER CREA	49
AVODART (dutasteride)	57	bacitracin zinc OINT	43	BASIS OVERNIGHT CREA	49
AVONEX PEN AJKT	159	bacitracin-polymyxin b (ophth) ..	152	BAXDELA TABS	54
AVONEX PSKT	159	bacitracin-poly-neomycin-hc	153	BCG VACCINE	165
AYGESTIN TABS (norethindrone acetate)	158	baclofen SOLN OR 5 MG/5ML ..	148	B-COMPLEX SOLN 2 MG/ML-100 MG/ML-2 MG/ML-100 MG/ML-2 MG/ML	133
AZ CREAM	156	baclofen SUSP	148	b-complex vitamins SOLN 2 MG/ML-100 MG/ML-2 MG/ML-100 MG/ML-2 MG/ML	133
azacitidine SUSR	30	baclofen TABS	148	b-complex vitamins TABS	133
AZASITE	152	BACMIN TABS	134	b-complex w/ c & folic acid CAPS 133	
azathioprine TABS	131	BACTRIM DS TABS (sulfamethoxazole-trimethoprim) ..	28	b-complex w/ c & folic acid TABS 133	
azelastine hcl (ophth)	153	BACTRIM TABS (sulfamethoxazole-trimethoprim)	28	b-complex w/ folic acid TABS	133
azelastine hcl	149	BAFIERTAM	159	b-complex w/biotin & folic acid TABS 133	
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azithromycin SUSR	61	BARACLUDE TABS (entecavir) ...	35	BD INSULIN SYRINGE LUER-LOK/U-100/1ML	83
azithromycin TABS 250 MG	61	BARIATRIC FUSION CHEW	134	BD INSULIN SYRINGE MICROFINE IV/U-100/0.5ML/28G X 1/2"	84
azithromycin TABS 500 MG	61	BARIATRIC MULTIVITAMINS IRON FREE CAPS	134	BD INSULIN SYRINGE MICROFINE IV/U-100/1ML/27G X 5/8"	84
azithromycin TABS 600 MG	61	BARIATRIC MULTIVITAMINS/IRON CAPS	134		
AZO HORMONAL HEALTH CYCLE CARE & COMFORT TABS	134				
AZO HORMONAL HEALTH HAPPY CYCLE TABS	134				

BD INSULIN SYRINGE MICROFINE IV/U-100/1ML/28G X 1/2"	84	FINE/0.5ML/31G X 8MM	84	GEN/32G X 5/32"	85
BD INSULIN SYRINGE MICROFINE/U-100/1ML/27G X 5/8"	84	BD INSULIN SYRINGE ULTRA- FINE/1/2 UNIT/0.3ML/31G X 8MM	84	BD PEN NEEDLE/NANO/ULTRA- FINE/32G X 4MM	85
BD INSULIN SYRINGE MICROFINE/U-100/1ML/28G X 1/2"	84	BD INSULIN SYRINGE ULTRAFINE/1ML/30G X 1/2"	84	BD PEN NEEDLE/ORIGINAL/ULTRA- FINE/29G X 12.7MM	85
BD INSULIN SYRINGE SAFETYGLIDE/1ML/29G X 1/2" ..	84	BD INSULIN SYRINGE ULTRA- FINE/1ML/30G X 12.7MM	84	BD PEN NEEDLE/SHORT/ULTRA- FINE/31G X 8MM	85
BD INSULIN SYRINGE ULTRAFINE HALF-UNIT/0.3ML/31G X 5/16" ..	84	BD INSULIN SYRINGE ULTRA- FINE/1ML/31G X 8MM	84	BD SAFETYGLIDE 1ML 27GX5/8"	85
B-D INSULIN SYRINGE ULTRAFINE II/0.3ML/31G X 5/16"	84	BD INSULIN SYRINGE ULTRAFINE/U-100/0.3ML/29G X 1/2"	84	BD SAFETYGLIDE INSULIN SYRINGE/0.3ML/29G X 1/2"	85
B-D INSULIN SYRINGE ULTRAFINE II/0.5ML/31G X 5/16"	84	BD INSULIN SYRINGE ULTRAFINE/U-100/0.5ML/29G X 1/2"	84	BD SAFETYGLIDE INSULIN SYRINGE/0.3ML/31G X 15/64" ...	85
B-D INSULIN SYRINGE ULTRAFINE II/1ML/31G X 5/16"	84	BD INSULIN SYRINGE ULTRAFINE/U-100/1ML/31G X 5/16"	84	BD SAFETYGLIDE INSULIN SYRINGE/0.3ML/31G X 5/16"	85
BD INSULIN SYRINGE ULTRAFINE/0.3ML/30G X 1/2" ...	84	BD INSULIN SYRINGE ULTRAFINE/U-100/1ML/31G X 5/16"	84	BD SAFETYGLIDE INSULIN SYRINGE/0.5ML/29G X 1/2"	85
B-D INSULIN SYRINGE ULTRAFINE/0.3ML/30G X 1/2" ...	84	BD INSULIN SYRINGE/0.3ML/29G X 12.7MM	84	BD SAFETY-GLIDE INSULIN SYRINGE/0.5ML/29G X 1/2"	85
BD INSULIN SYRINGE ULTRA- FINE/0.3ML/30G X 12.7MM	84	BD INSULIN SYRINGE/0.5ML/29G X 12.7MM	84	BD SAFETYGLIDE INSULIN SYRINGE/0.5ML/31G X 15/64" ...	85
BD INSULIN SYRINGE ULTRAFINE/0.3ML/31G X 5/16" ..	84	BD INSULIN SYRINGE/1ML/27G X 12.7MM	84	BD SAFETYGLIDE INSULIN SYSYRINGE/0.5ML/30G X 5/16" .	85
BD INSULIN SYRINGE ULTRA- FINE/0.3ML/31G X 8MM	84	BD INSULIN SYRINGE/1ML/29G X 12.7MM	85	BD SWABS SINGLE USE	81
BD INSULIN SYRINGE ULTRAFINE/0.5ML/30G X 1/2" ...	84	BD INSULIN SYRINGE/U- 100/1ML/27G X 1/2"	85	BD VEO INSULIN SYRINGE ULTRA- FINE/0.3ML/31G X 6MM	85
B-D INSULIN SYRINGE ULTRAFINE/0.5ML/30G X 1/2" ...	84	BD MICROTAINER LANCETS ...	65	BD VEO INSULIN SYRINGE ULTRA- FINE/0.5ML/31G X 6MM	85
BD INSULIN SYRINGE ULTRA- FINE/0.5ML/30G X 12.7MM	84	BD PEN NEEDLE/MICRO/ULTRA- FINE/32G X 6MM	85	BD VEO INSULIN SYRINGE ULTRA- FINE/1/2 UNIT/0.3ML/31G X 6MM	85
BD INSULIN SYRINGE ULTRAFINE/0.5ML/31G X 5/16" ..	84	BD PEN NEEDLE/MINI/ULTRA- FINE/31G X 5MM	85	BD VEO INSULIN SYRINGE ULTRA- FINE/U-100/0.3ML/31G X 15/64" .	85
BD INSULIN SYRINGE ULTRA- FINE/0.5ML/31G X 5/16" ..	84	BD PEN NEEDLE/NANO 2ND GEN/32G X 4MM	85	BD VEO INSULIN SYRINGE ULTR- FINE/U-100/0.5ML/31G X 15/64" .	85
BD INSULIN SYRINGE ULTRA-		BD PEN NEEDLE/NANO 2ND			

BECONASE AQ	149	bepotastine besilate	154	BETIMOL	151
BEELITH	129	BEPREVE (bepotastine besilate)		BETOPTIC-S SUSP	151
BELBUCA FILM	9	154		BEVESPI AEROSPHERE	14
BENADRYL ALLERGY CAPS		BESIVANCE	152	bexarotene (topical)	44
(diphenhydramine hcl)	23	BESREMI	33	bexarotene	33
BENADRYL ALLERGY CHILDRENS		beta carotene CAPS 7500 MCG,		BEXSERO	165
LIQD (diphenhydramine hcl)	23	25000 UNIT	169	BEYFORTUS	155
BENADRYL ALLERGY TABS		betamethasone dipropionate (topical)		bicalutamide	31
(diphenhydramine hcl)	23	CREA	46	BIFERA	59
BENADRYL ALLERGY ULTRATABS		betamethasone dipropionate (topical)		BIGFOOT UNITY PEN CAP FOR	
TABS (diphenhydramine hcl)	23	LOTN	46	ADMELOG MISC	65
benazepril & hydrochlorothiazide	27	betamethasone dipropionate (topical)		BIGFOOT UNITY PEN CAP FOR	
benazepril hcl	26	OINT	46	APIDRA MISC	65
BENICAR (olmesartan medoxomil)		betamethasone dipropionate		BIGFOOT UNITY PEN CAP FOR	
26		augmented CREA	46	ASPART MISC	65
BENICAR HCT (olmesartan		betamethasone dipropionate		BIGFOOT UNITY PEN CAP FOR	
medoxomil-hydrochlorothiazide) ..	27	augmented GEL 0.05 %	46	BASAGLAR MISC	65
BENZAC AC WASH LIQD 5 %		betamethasone dipropionate		BIGFOOT UNITY PEN CAP FOR	
(benzoyl peroxide)	42	augmented LOTN	46	FIASP MISC	65
BENZAMYCIN GEL (benzoyl		betamethasone dipropionate		BIGFOOT UNITY PEN CAP FOR	
peroxide-erythromycin)	42	augmented OINT	46	HUMALOG MISC	65
BENZHYDROCODONE/ACETAMIN		betamethasone valerate CREA ...	46	BIGFOOT UNITY PEN CAP FOR	
OPHEN	9	betamethasone valerate FOAM ...	46	LANTUS MISC	65
BENZNIDAZOLE	11	betamethasone valerate LOTN ...	46	BIGFOOT UNITY PEN CAP FOR	
benzocaine-docusate sodium ENEM		betamethasone valerate OINT	46	LISPRO MISC	65
61		BETAPACE AF (sotalol hcl (afib/af))		BIGFOOT UNITY PEN CAP FOR	
benzoyl peroxide CREA 10 %	42	.....	36	LYUMJEV MISC	65
benzoyl peroxide FOAM 10 %	42	BETAPACE TABS 80 MG, 120 MG,		BIGFOOT UNITY PEN CAP FOR	
benzoyl peroxide GEL 10 %	42	160 MG (sotalol hcl)	36	NOVOLOG MISC	65
benzoyl peroxide GEL 5 %	42	BETASERON KIT	159	BIGFOOT UNITY PEN CAP FOR	
benzoyl peroxide LIQD 5 %, 10 %	42	betaxolol hcl (ophth) SOLN	151	TOUJEO MAX MISC	66
benzoyl peroxide-erythromycin GEL		betaxolol hcl	35	BIGFOOT UNITY PEN CAP FOR	
42		bethanechol chloride	165	TOUJEO MISC	66
benzphetamine hcl 50 MG	1	BETHKIS NEBU (tobramycin)	2	BIGFOOT UNITY PEN CAP FOR	

TRESIBA MISC	66	BONEUP VEGETARIAN TABS ..	135	vilanterol)	14
bimatoprost SOLN	154	BOOSTNOW IMMUNE SUPPORT		BREO ELLIPTA	14
BIMZELX SOAJ	45	CAPS	135	BREO ELLIPTA 50 MCG/INH-25	
BIMZELX SOSY	45	BOOSTRIX SUSP	162	MCG/INH	14
BINOSTO TBEF	51	BOOSTRIX SUSY	162	BREXAFEMME	22
BIO-35 GLUTEN-FREE CAPS ...	135	BORTEZOMIB SOLN	32	BREZTRI AEROSPHERE	14
BIO-35 IRON FREE CAPS	135	BORTEZOMIB SOLR IV 3.5 MG ..	32	BRILINTA	58
BIOCAL CAPS	135	bosentan TABS	37	brimonidine tartrate 0.1 %, 0.15 %	
BIOLYTE SOLN	129	BOSULIF CAPS	32	152	
BION TEARS	150	BRAFTOVI 75 MG	32	brimonidine tartrate 0.2 %	152
BIOTHRAX	165	BREATHE COMFORT ANTI-STATIC		brimonidine tartrate-timolol maleate .	
biotin TABS 5 MG, 5000 MCG ...	169	VALVED HOLDING		151	
bisacodyl SUPP	61	CHAMBER/ADULT DEVI	119	brinzolamide	154
bisacodyl TBEC	61	BREATHE COMFORT ANTI-STATIC		BRIXADI SOSY	9
bismuth subcitrate potassium-		VALVED HOLDING		bromfenac sodium (ophth)	154
metronidazole-tetracycline	164	CHAMBER/CHILD DEVI	119	bromocriptine mesylate CAPS	33
bismuth subsalicylate CHEW 262 MG		BREATHE COMFORT		bromocriptine mesylate TABS 2.5	
.....	20	PROTECTIVE SHIELD	115	MG	33
bismuth subsalicylate SUSP 262		BREATHE EASE NEBULIZER		BROMSITE (bromfenac sodium	
MG/15ML, 525 MG/15ML, 525		MASK/CHILD MISC	119	(ophth))	154
MG/30ML, 527 MG/30ML, 1050		BREATHE EASE NEBULIZER		BRONCHITOL	161
MG/30ML	20	MASK/INFANT MISC	119	BRONCHITOL TOLERANCE TEST .	
bismuth subsalicylate TABS	20	BREATHE EASE PEAK FLOW		161	
bisoprolol & hydrochlorothiazide ..	27	METER	119	BROVANA (arformoterol tartrate) .14	
bisoprolol fumarate	35	BREATHE EASE/LARGE MASK		BRYHALI LOTN	46
BLINCYTO	31	DEVI	119	BUBBLES THE FISH II PEDIATRIC	
BLULINK CONTROL		BREATHE EASE/MEDIUM MASK		MASK/PVC MISC	119
SOLUTION/HIGH & LOW LIQD ...	66	DEVI	119	budesonide (inhalation) SUSP	13
BONE DENSITY BUILDER TABS		BREATHE EASE/SMALL MASK		budesonide (nasal)	149
130		DEVI	119	budesonide CPEP	40
BONEUP 3 PER DAY CAPS	135	BREATHERITE VALVED MDI		budesonide TB24	40
BONEUP CAPS	135	CHAMBER/COLLAPSIBLE DEVI	119	budesonide-formoterol fumarate	
		BREATHERITE VALVED MDI		dihydrate	14
		CHAMBER/RIGID DEVI	119		
		BREO ELLIPTA (fluticasone furoate-			

BUFFERIN (aspirin buffered (cal carb-mag carb-mag oxide))	CALAN SR TBCR 120 MG, 180 MG (verapamil hcl)	125 UNIT-250 MG, 250 MG-125 UNIT, 600 MG-200 UNIT
buprenorphine hcl FILM 150 MCG, 300 MCG, 450 MCG, 600 MCG, 750 MCG, 900 MCG	calcipotriene CREA calcipotriene OINT calcipotriene SOLN	calcium carbonate-vitamin d w/ minerals TABS calcium citrate TABS 200 MG
buprenorphine hcl-naloxone hcl dihydrate SUBL	calcitonin (salmon) NA	CALCIUM CITRATE TABS 250 MG 128
buprenorphine PTWK	calcitriol (topical)	calcium citrate-vitamin d TABS 200 UNIT-315 MG, 250 UNIT-315 MG, 5 MCG-315 MG, 6.25 MCG-315 MG 129
bupropion hcl (smoking deterrent) 160	calcitriol CAPS calcitriol SOLN OR	CALCIUM GLUCONATE SOLN (calcium gluconate)
butalbital-acetaminophen TABS 50 MG-325 MG	CALCIUM 600+D HIGH POTENCY TABS	calcium gluconate SOLN
butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG	CALCIUM 600+D3 PLUS MINERALS TABS	CALCIUM PHOSPHATE DIBASIC 129
butalbital-acetaminophen-caffeine w/ codeine	calcium acetate (phosphate binder) CAPS	CALCIUM PHOSPHATE DIBASICDIHYDRATE
butalbital-aspirin-caffeine CAPS	calcium acetate (phosphate binder) TABS	calcium TABS
butalbital-aspirin-caffeine w/cod	calcium carbonate (antacid) CHEW 500 MG, 750 MG, 1000 MG	CALCIUM/MAGNESIUM/ZINC TABS 200 UNIT-333 MG-133 MG-5 MG 130
butenafine hcl	calcium carbonate (antacid) SUSP	CALCIUM/MAGNESIUM/ZINC/D3 TABS
butorphanol tartrate NA 10 MG/ML 10	CALCIUM CARBONATE EXTRA LIGHT POWD XX	CALCIUM/MAGNESIUM/ZINC/VITA MIN D3 TABS
BUTRANS PTWK (buprenorphine) 10	CALCIUM CARBONATE HEAVY POWD XX	CAL-DAY 1000 TABS
BYDUREON BCISE AUIJ	CALCIUM CARBONATE LIGHT POWD XX	CAL-MAG-ZINC-D TABS
BYETTA SOPN 10 MCG/0.04ML	CALCIUM CARBONATE POWD XX	CAL-MAG-ZINC-D3 TABS
BYETTA SOPN 5 MCG/0.02ML	CALCIUM CARBONATE SUSP	CALQUENCE
BYSTOLIC (nebivolol hcl)	calcium carbonate TABS 500 MG, 600 MG, 1250 MG, 1500 MG	CALTRATE 600+D3 TABS (calcium carbonate-cholecalciferol)
cabergoline	calcium carbonate-cholecalciferol TABS	CALTRATE BONE HEALTH TABS (calcium carbonate-cholecalciferol)
CABTREO	calcium carbonate-vitamin d TABS	
CADUET 10 MG-10 MG, 10 MG-20 MG, 10 MG-40 MG, 10 MG-80 MG, 5 MG-10 MG, 5 MG-20 MG, 5 MG-40 MG, 5 MG-80 MG (amlodipine besylate-atorvastatin calcium)		
caffeine citrate SOLN OR		

CAMCEVI	31	CARDURA (doxazosin mesylate) .27	CAREONE UNIFINE PENTIPS 31GX5MM	86	
CAMZYOS	37	CARDURA XL	57	CAREONE UNIFINE PENTIPS 31GX6MM	86
candesartan cilexetil	26	CAREFINE PEN NEEDLE 32GX4MM	85	CAREONE UNIFINE PENTIPS 31GX8MM	86
candesartan cilexetil- hydrochlorothiazide	27	CAREFINE PEN NEEDLES 29GX1/2"	85	CAREONE UNIFINE PENTIPS PEN NEEDLES 32GX4MM	86
capecitabine	30	CAREFINE PEN NEEDLES 30GX5/16"	85	CAREONE UNIFINE PENTIPS PLUS PEN NEEDLES 29GX12MM	86
CAPLYTA	34	CAREFINE PEN NEEDLES 31GX6MM	85	CAREONE UNIFINE PENTIPS PLUS PEN NEEDLES 31GX5MM	86
CAPRELSA	32	CAREFINE PEN NEEDLES 31GX8MM	85	CAREONE UNIFINE PENTIPS PLUS PEN NEEDLES 31GX6MM	86
captopril & hydrochlorothiazide ...	27	CAREFINE PEN NEEDLES 32GX5MM	85	CAREONE UNIFINE PENTIPS PLUS PEN NEEDLES 31GX8MM	86
captopril	26	CAREFINE PEN NEEDLES 32GX6MM	85	CAREONE UNIFINE PENTIPS PLUS PEN NEEDLES 32GX4MM	86
CAPVAXIVE	165	CAREONE ADVANCED LANCINGDEVICE MISC	66	CAREONE UNIFINE PENTIPS PLUS PEN NEEDLES/33G X 5/32"	86
CARAC CREA	44	CAREONE INSULIN SYRINGES/0.3ML/30G X 1/2" ...	86	CARESENS CONTROL A SOLUTION SOLN	66
CARAFATE TABS (sucralfate) ...	163	CAREONE INSULIN SYRINGES/0.3ML/31G X 5/16" ...	86	CARESENS CONTROL SOLUTION A/B SOLN	66
carbidopa	33	CAREONE INSULIN SYRINGES/0.5ML/30G X 1/2" ...	86	CARESENS LANCETS	66
carbidopa-levodopa TABS	33	CAREONE INSULIN SYRINGES/0.5ML/31G X 5/16" ...	86	CARETOUCH 2 CPAP HOSE HANGER MISC	119
carbidopa-levodopa TBCR	33	CAREONE LANCET SUPER THIN/30G	66	CARETOUCH ALCOHOL PREP PADS	81
carbidopa-levodopa TBDP	33	CAREONE LANCET THIN	66	CARETOUCH CONTROL SOLUTION LEVEL 2 LIQD	66
carbidopa-levodopa-entacapone ...	33	CAREONE UNIFINE PENTIPS 29GX12MM	86	CARETOUCH CPAP & BIPAP HOSE/6FT MISC	119
carbinoxamine maleate SOLN ...	23			CARETOUCH CPAP MASK WIPES MISC	119
carbinoxamine maleate TABS 4 MG . 23				CARETOUCH CPAP	
carboxymethylcellulose sodium (ophth) GEL	150				
carboxymethylcellulose sodium (ophth) SOLN 0.5 %	150				
CARDIOCOM LANCING DEVICE MISC	66				
CARDIZEM CD CP24 (diltiazem hcl coated beads)	36				
CARDIZEM LA TB24 (diltiazem hcl) 36					
CARDIZEM TABS 30 MG, 60 MG, 120 MG (diltiazem hcl)	36				

NEUTRALIZING PRE-WASH MISC 119	CARETOUCH TWIST LANCETS 28G .....66	cefprozil SUSR .....38
CARETOUCH CPAP TUBE CLEANING BRUSH MISC .....119	CARETOUCH TWIST LANCETS 30G .....66	cefprozil TABS .....38
CARETOUCH INSULIN SYRINGE/0.3ML/31GX5/16" .....86	CARETOUCH TWIST LANCETS 33G .....66	cefuroxime axetil TABS .....38
CARETOUCH INSULIN SYRINGE/0.5ML/31GX5/16" .....86	CARETOUCH TWIST LANCETS MULTI COLOR/30G .....66	CELEBRATE MULTI-COMPLETE18 CAPS .....135
CARETOUCH INSULIN SYRINGE/1ML/30GX5/16" .....86	CARETOUCH UNIVERSAL CPAPFILTERS MISC .....120	CELEBRATE MULTI-COMPLETE18 CHEW .....135
CARETOUCH INSULIN SYRINGE/1ML/31GX5/16" .....86	carteolol hcl (ophth) .....151	CELEBRATE MULTI-COMPLETE36 CAPS .....135
CARETOUCH INSULIN SYRINGE0.5ML/30GX5/16" .....86	carvedilol .....35	CELEBRATE MULTI-COMPLETE36 CHEW .....135
CARETOUCH LANCING DEVICewith EJECTOR MISC ...66	carvedilol phosphate .....35	CELEBRATE MULTI-COMPLETE45 CAPS .....135
CARETOUCH PEN NEEDLE 29GX1/2" .....86	CASODEX (bicalutamide) .....31	CELEBRATE MULTI-COMPLETE45 CHEW .....135
CARETOUCH PEN NEEDLE 33GX5/32" .....86	CATAPRES-TTS-1 (clonidine) ...27	CELEBRATE MULTI-COMPLETE60 CAPS .....135
CARETOUCH PEN NEEDLES 31G X 6 MM .....86	CATAPRES-TTS-2 (clonidine) ...27	CELEBRATE MULTI-COMPLETE60 CHEW .....135
CARETOUCH PEN NEEDLES 31GX 5MM .....86	CATAPRES-TTS-3 (clonidine) ...27	CELEBREX 400 MG (celecoxib) ...4
CARETOUCH PEN NEEDLES 31GX 8MM .....86	CAYA DPRH .....62	CELEBREX 50 MG, 100 MG, 200 MG (celecoxib) .....4
CARETOUCH PEN NEEDLES 32GX 4MM .....86	CAYSTON .....29	celecoxib 400 MG .....4
CARETOUCH PEN NEEDLES 32GX 5MM .....86	cefaclor CAPS .....38	celecoxib 50 MG, 100 MG, 200 MG 4
CARETOUCH SAFETY LANCETS/26G .....66	CEFACLOR ER TB12 .....38	CELLCEPT CAPS (mycophenolate mofetil) .....131
CARETOUCH SAFETY LANCETS/28G .....66	cefaclor SUSR 125 MG/5ML, 250 MG/5ML, 375 MG/5ML .....38	CELLCEPT INTRAVENOUS (mycophenolate mofetil hcl) .....131
CARETOUCH SAFETY LANCETS/30G .....66	cefadroxil CAPS .....38	CELLCEPT SUSR (mycophenolate mofetil) .....131
	cefadroxil SUSR .....38	CELLCEPT TABS (mycophenolate mofetil) .....131
	cefadroxil TABS .....38	CENTANY AT KIT .....43
	cefdinir CAPS .....38	CENTANY OINT .....43
	cefdinir SUSR .....38	
	cefixime CAPS .....38	
	cefixime SUSR .....38	
	cefpodoxime proxetil SUSR .....38	
	cefpodoxime proxetil TABS .....38	

CENTRAVITES 50 PLUS TABS .	135	CERTAVITE SENIOR/ANTIOXIDANT NUTRIENTS TABS	136
CENTRAVITES ADULTS TABS ..	135	CERTAVITE/ANTIOXIDANTS TABS .	136
CENTRUM ADULT MULTIGUMMIES CHEW	135	cetirizine hcl CAPS	23
CENTRUM ADULTS 50+ MULTIGUMMIES CHEW	135	cetirizine hcl CHEW	23
CENTRUM ADULTS TABS (multiple vitamins w/ minerals)	135	cetirizine hcl SOLN OR	23
CENTRUM CARDIO TABS	135	cetirizine hcl SYRP OR	23
CENTRUM FLAVOR BURST ADULT CHEW	135	cetirizine hcl TABS 10 MG	23
CENTRUM FLAVOR BURST CHEW	135	cetirizine hcl TABS 5 MG	23
CENTRUM FLAVOR BURST KIDS CHEW	144	CETRAXAL (ciprofloxacin hcl (otic)) .	154
CENTRUM FRESH/FRUITY ADULTS 50+ CHEW	135	CHEMET	21
CENTRUM FRESH/FRUITY ADULTS CHEW	135	CHILDRENS ADVIL SUSP 100 MG/5ML (ibuprofen)	4
CENTRUM KIDS CHEW	144	CHILDRENS GUMMIES CHEW .	144
CENTRUM MEN TABS	135	CHILDRENS MOTRIN SUSP 100 MG/5ML (ibuprofen)	4
CENTRUM MINIS ADULTS 50+ TABs	135	chlorhexidine gluconate (mouth- throat)	132
CENTRUM MINIS MEN 50+ TABS	135	chloroquine phosphate TABS	29
CENTRUM MINIS WOMEN 50+ TABs	135	chlorpheniramine maleate TABS ..	23
CENTRUM MINIS WOMEN IMMUNE SUPPORT TABS	135	chlorthalidone 25 MG, 50 MG	51
CENTRUM MULTIGUMMIES MULTI +OMEGA 3 CHEW	135	chlorzoxazone TABS	148
CENTRUM SILVER 50+MEN TABS (multiple vitamins w/ minerals) ...	135	CHOICEFUL MULTIVITAMIN CAPS .	136
CENTRUM SILVER 50+WOMEN TABs (multiple vitamins w/ minerals)	135	CHOICEFUL MULTIVITAMIN CHEW	136
CENTRUM SILVER ADULT 50+ TABs (multiple vitamins w/ minerals)	135	cholecalciferol CAPS 1.25 MG, 1.25 MG, 25 MCG, 50 MCG, 125 MCG, 1000 UNIT, 2000 UNIT, 5000 UNIT, 50000 UNIT	169
CENTRUM SILVER ADULTS 50+ TABs (multiple vitamins w/ minerals)	135	cholecalciferol LIQD OR 10 MCG/ML,	
CENTRUM SILVER CHEW	136		
CENTRUM SILVER TABS (multiple vitamins w/ minerals)	136		
CENTRUM SILVER ULTRA WOMENS TABS	136		
CENTRUM SILVER WOMEN 50+ TABs (multiple vitamins w/ minerals)	136		
CENTRUM SPECIALIST HEART TABs	136		
CENTRUM SPECIALIST IMMUNE SUPPORT TABS	136		
CENTRUM SPECIALIST VISION TABs	136		
CENTRUM ULTRA WOMENS TABS	136		
CENTRUM VITAMINTS CHEW ..	136		
CENTRUM WOMEN TABS (multiple vitamins w/ minerals)	136		
cephalexin CAPS	38		
cephalexin SUSR	38		
cephalexin TABS	38		
CEQUA SOLN	152		
CERALYTE 70 SOLN	129		
CERASPORT EX1 SOLN	129		
CERASPORT SOLN	129		
CERTAVITE SENIOR TABS	136		

400 UNIT/ML	169	cinacalcet hcl 30 MG, 60 MG	52	CLARITIN CHEW (loratadine)	24
cholecalciferol TABS 1.25 MG, 10 MCG, 25 MCG, 50 MCG, 125 MCG, 400 UNIT, 1000 UNIT, 1250 MCG, 2000 UNIT, 5000 UNIT, 50000 UNIT .	169	cinacalcet hcl 90 MG	52	CLARITIN CHILDRENS CHEW (loratadine)	24
cholestyramine light PACK	25	CIPRO HC	154	CLARITIN SOLN (loratadine)	24
cholestyramine light POWD	25	CIPRO SUSR	54	CLARITIN TABS (loratadine)	24
cholestyramine PACK	25	CIPRO TABS 250 MG, 500 MG (ciprofloxacin hcl)	54	CLASSIC PRENATAL TABS	146
cholestyramine POWD	25	CIPRODEX (ciprofloxacin-dexamethasone)	154	CLEANLET LANCETS 28G	66
choline fenofibrate	25	ciprofloxacin hcl (ophth) SOLN ...	152	clemastine fumarate TABS 1.34 MG .	23
CHOSEN LANCETS 30G	66	ciprofloxacin hcl (otic)	154	CLEOCIN (clindamycin hcl)	29
CHOSEN LANCING DEVICE MISC 66		ciprofloxacin hcl TABS	54	CLEOCIN CREA (clindamycin phosphate vaginal)	168
CHOSEN SAFETY LANCETS 28G 66		ciprofloxacin SUSR 5 GM/100ML, 500 MG/5ML	54	CLEOCIN PEDIATRIC GRANULES (clindamycin palmitate hydrochloride)	29
CHRYSADERM DAY	156	ciprofloxacin-dexamethasone	155	CLEOCIN SUPP	168
CHRYSADERM NIGHT	156	ciprofloxacin-fluocinolone acetoneide .	155	CLEODERM	156
CIBINQO	48	CITALOPRAM HYDROBROMIDE CAPS	16	CLEVER CHEK LANCETS ULTRATHIN	66
ciclopirox GEL	43	CITRACAL + D3 MAXIMUM TABS (calcium citrate-vitamin d)	129	CLEVER CHEK LANCETS ULTRATHIN 30G	66
ciclopirox KIT	43	CITRACAL +D3 MAXIMUM PLUS TABS	136	CLEVER CHOICE ANTI-STATICVALVED HOLDING CHAMBER/ADULT LARGE DEVI	120
ciclopirox olamine CREA	43	CITRACAL MAXIMUM PLUS TABS 130		CLEVER CHOICE ANTI-STATICVALVED HOLDING CHAMBER/MEDIUM DEVI	120
ciclopirox olamine SUSP	43	CITRACAL PLUS TABS	130	CLEVER CHOICE ANTI-STATICVALVED HOLDING CHAMBER/SMALL DEVI	120
ciclopirox SHAM	43	CITRULLINE(L)	38	CLEVER CHOICE ANTI-STATICVALVED HOLDING CHAMBER/3 YEA DEVI	120
ciclopirox SOLN	43	cladribine 10 MG/10ML	30	CLEVER CHOICE ANTI-STATICVALVED HOLDING CHAMBER/MEDIUM/3 YEA DEVI	120
cilostazol	58	CLARINEX TABS (desloratadine) .	24	CLEVER CHOICE ANTI-STATICVALVED HOLDING CHAMBER/SMALL DEVI	120
CILOXAN OINT	152	clarithromycin SUSR	61	CLEVER CHOICE ANTI-STATICVALVED HOLDING CHAMBER/SMALL DEVI	120
cimetidine hcl OR 300 MG/5ML ..	163	clarithromycin TABS	61	CLEVER CHOICE ANTI-STATICVALVED HOLDING CHAMBER/SMALL DEVI	120
cimetidine TABS	163	clarithromycin TB24	61	CLEVER CHOICE ANTI-STATICVALVED HOLDING CHAMBER/SMALL DEVI	120
CIMZIA KIT	55	CLARITIN ALLERGY CHILDRENS SOLN (loratadine)	24		
CIMZIA PSKT	55				
CIMZIA STARTER KIT PSKT	55				

STATICVALVED HOLDING CHAMBER/SMALL INFANT DEVI 120	CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.5ML/31G X 5/16" .....87	CLEVER CHOICE COMFORT EZPEN NEEDLES 32GX8MM ....87
CLEVER CHOICE COMFORT EZINSULIN PEN NEEDLES 31GX8MM .....86	CLEVER CHOICE COMFORT EZINSULIN SYRINGE/1.0ML/30G X 1/2" .....87	CLEVER CHOICE COMFORT EZPEN NEEDLES 33GX4MM ....87
CLEVER CHOICE COMFORT EZINSULIN PEN NEEDLES 33GX4MM .....86	CLEVER CHOICE COMFORT EZINSULIN SYRINGE/1ML/28G X 1/2" .....87	CLEVER CHOICE DISPOSABLEFACE MASK/MEDICAL GRADE .....115
CLEVER CHOICE COMFORT EZINSULIN SYINGE/0.3ML/31G X 15/64" .....86	CLEVER CHOICE COMFORT EZINSULIN SYRINGE/1ML/29G X 1/2" .....87	CLEVER CHOICE DISPOSABLEMASK/NON-MEDICAL.....115
CLEVER CHOICE COMFORT EZINSULIN SYINGE/0.5ML/31G X 15/64" .....87	CLEVER CHOICE COMFORT EZINSULIN SYRINGE/1ML/30G X 5/16" .....87	CLEVER CHOICE FACE MASK .116
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.3ML/29G X 1/2" .....87	CLEVER CHOICE COMFORT EZINSULIN SYRINGE/1ML/30G X 5/16" .....87	CLEVER CHOICE GLUCOSE CONTROL HIGH LIQD .....66
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.3ML/30G X 1/2" .....87	CLEVER CHOICE COMFORT EZINSULIN SYRINGE/U- 100/1ML/31GX5/16" .....87	CLEVER CHOICE PEAK FLOW METER .....120
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.3ML/30G X 5/16" .....87	CLEVER CHOICE COMFORT EZLANCETS 21G .....66	CLICKFINE PEN NEEDLE 32GX5/32" .....87
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.3ML/30G X 5/16" .....87	CLEVER CHOICE COMFORT EZLANCETS 23G .....66	CLICKFINE PEN NEEDLE UNIVERSAL/31GX1/4" .....87
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.3ML/31G X 5/16" .....87	CLEVER CHOICE COMFORT EZLANCETS 28G .....66	CLICKFINE PEN NEEDLE UNIVERSAL/31GX5/16" .....88
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.5ML/28G X 1/2" .....87	CLEVER CHOICE COMFORT EZPEN NEEDLES 29GX12MM ...87	CLICKFINE PEN NEEDLES 31G X 1/4" .....88
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.5ML/29G X 1/2" .....87	CLEVER CHOICE COMFORT EZPEN NEEDLES 31GX5MM ....87	CLICKFINE PEN NEEDLES 31G X 3/16" .....88
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.5ML/30G X 1/2" .....87	CLEVER CHOICE COMFORT EZPEN NEEDLES 31GX6MM ....87	CLICKFINE PEN NEEDLES 31G X 5/16" .....88
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.5ML/30G X 1/2" .....87	CLEVER CHOICE COMFORT EZPEN NEEDLES 32GX4MM ....87	CLICKFINE PEN NEEDLES 31G X 8MM .....88
CLEVER CHOICE COMFORT EZINSULIN SYRINGE/0.5ML/30G X 5/16" .....87	CLEVER CHOICE COMFORT EZPEN NEEDLES 32GX5MM ....87	CLICKFINE PEN NEEDLES 32G X 5/32" .....88
	CLEVER CHOICE COMFORT EZPEN NEEDLES 32GX6MM ....87	CLICKFINE PEN NEEDLES/31GX1/4" .....88
		CLICKFINE UNIVERSAL PEN NEEDLES 31GX5/16" .....88
		CLIMARA PTWK (estradiol) .....54

clindamycin hcl	29	CLOBEX SHAM (clobetasol propionate)	46	COLACE CAPS 100 MG (docusate sodium)	61
clindamycin palmitate hydrochloride .	29	clocortolone pivalate	46	COLACE CLEAR CAPS (docusate sodium)	61
clindamycin phosphate (topical) SOLN	42	CLODAN KIT	46	COLAZAL CAPS (balsalazide disodium)	55
clindamycin phosphate (topical) SWAB	42	CLODERM (clocortolone pivalate) 46		colchicine CAPS	57
clindamycin phosphate vaginal CREA	168	clofarabine	30	colchicine TABS	57
clindamycin phosphate-benzoyl peroxide (refrigerate)	42	CLOLAR (clofarabine)	30	colchicine w/ probenecid	57
clindamycin phosphate-benzoyl peroxide GEL 2.5 %-1.2 %, 5 %-1 % .	42	clonidine	27	COLCRYS TABS (colchicine)	57
clindamycin phosphate-benzoyl peroxide GEL 3.75 %-1.2 %	42	clonidine hcl (adhd) TB12	1	colesevelam hcl PACK	25
CLINDESSE	168	clonidine hcl TABS	27	colesevelam hcl TABS	25
clobetasol propionate CREA 0.05 % .	46	clonidine OR 0.17 MG	27	COLESTID FLAVORED GRAN (colestipol hcl)	25
clobetasol propionate emollient base 0.05 %	46	clopidogrel bisulfate 300 MG	58	COLESTID FLAVORED PACK (colestipol hcl)	25
clobetasol propionate emulsion ...	46	clopidogrel bisulfate 75 MG	58	COLESTID GRAN (colestipol hcl) .	25
clobetasol propionate FOAM	46	clotrimazole (topical) CREA	43	COLESTID PACK (colestipol hcl) .	25
clobetasol propionate GEL 0.05 %	46	clotrimazole (topical) SOLN	43	COLESTID TABS (colestipol hcl) .	25
clobetasol propionate LIQD	46	clotrimazole	132	colestipol hcl GRAN	25
clobetasol propionate LOTN	46	clotrimazole vaginal CREA	168	colestipol hcl PACK	25
clobetasol propionate OINT 0.05 %	46	clotrimazole w/ betamethasone CREA	43	colestipol hcl TABS	25
clobetasol propionate SHAM	46	clotrimazole w/ betamethasone LOTN	43	COMBIGAN (brimonidine tartrate-timolol maleate)	151
clobetasol propionate SOLN 0.05 % .	46	CO MONITOR DEVI	120	COMBIVENT RESPIMAT AERS ..	14
CLOBEX LIQD (clobetasol propionate)	46	CO MONITOR REPLACEMENT TPIECES MISC	120	COMFORT ASSIST INSULIN SYRINGE/0.3ML/31G X 5/16"	88
CLOBEX LOTN 0.05 % (clobetasol propionate)	46	COAGADDEX	57	COMFORT ASSURED LANCETS MICRO THIN 33G	66
		COAGUCHEK LANCETS	66	COMFORT ASSURED LANCETS SUPER THIN 28G	66
		coal tar extract SHAM 0.5 %	50	COMFORT EZ INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	88
		codeine sulfate TABS 30 MG	7		
		CODEINE SULFATE TABS	7		
		CO-ENZYME Q 10	38		
		COENZYME Q10	38		

COMFORT EZ INSULIN SYRINGE/U-100/1ML/31G X 5/16" 88	COMFORT TOUCH PEN NEEDLES/33G X 5/32" 88	SOLN .....67
COMFORT EZ MICRO/32G X 4MM 88	COMFORT TOUCH PLUS SAFETY LANCETS PRESSURE ACTIVATED 28G .....66	COOL CONTROL SOLUTION B SOLN .....67
COMFORT EZ PRO SAFETY PEN NEEDLES 30G X 8MM .....88	COMFORT TOUCH PLUS SAFETY LANCETS PRESSURE ACTIVATED 30G .....66	COPAXONE SOSY 20 MG/ML (glatiramer acetate) .....160
COMFORT EZ PRO SAFETY PEN NEEDLES 31G X 4MM .....88	COMFORT TOUCH TWIST LANCETS 30G .....66	COPAXONE SOSY 40 MG/ML (glatiramer acetate) .....160
COMFORT EZ PRO SAFETY PEN NEEDLES 31G X 5MM .....88	COMIRNATY 2023-24 SUSP 166	CORDRAN OINT 46
COMFORT EZ SHORT/31G X 8MM 88	COMIRNATY 2023-24 SUSY 166	COREG (carvedilol) .....35
COMFORT EZ/31G X 5MM .....88	COMIRNATY 2024-25 SUSY 166	COREG CR (carvedilol phosphate) 35
COMFORT EZ/31G X 6MM .....88	COMIRNATY SUSP .....166	CORGARD TABS 20 MG, 40 MG, 80 MG (nadolol) 36
COMFORT LANCETS 66	COMPACT SPACE CHAMBER/ANTI-STATIC DEVI ..120	CORTEF TABS (hydrocortisone) ..40
COMFORT TOUCH ALCOHOL PREP PADS .....81	COMPACT SPACE CHAMBER/ANTI-STATIC/LARGE MASK DEVI .....120	COSELA .....33
COMFORT TOUCH LANCETS ULTRA THIN 31G .....66	COMPACT SPACE CHAMBER/ANTI-STATIC/MEDIUM MASK DEVI .....120	COSENTYX SENSOREADY PEN SOAJ .....45
COMFORT TOUCH PEN NEEDLES/31G X 4MM .....88	COMPACT SPACE CHAMBER/ANTI-STATIC/SMALL MASK DEVI .....120	COSENTYX SOSY 45
COMFORT TOUCH PEN NEEDLES/31G X 5MM .....88	COMPLETENATE CHEW .....146	COSENTYX UNOREADY SOAJ .. 45
COMFORT TOUCH PEN NEEDLES/31G X 6 MM .....88	COMTAN (entacapone) .....33	COSOPT (dorzolamide hcl-timolol maleate) 151
COMFORT TOUCH PEN NEEDLES/31G X 8 MM .....88	CO-NATAL FA TABS .....146	COSOPT PF (dorzolamide hcl- timolol maleate) .....151
COMFORT TOUCH PEN NEEDLES/32G X 4MM .....88	CONDOMS .....62	COZAAR (losartan potassium) ....26
COMFORT TOUCH PEN NEEDLES/32G X 5MM .....88	CONJUPRI (levamlodipine maleate) 36	CREAM BASE 156
COMFORT TOUCH PEN NEEDLES/32G X 6MM .....88	CONTOUR HIGH CONTROL LIQD 67	CREAM CONCENTRATE 156
COMFORT TOUCH PEN NEEDLES/32G X 8MM .....88	CONZIP CP24 (tramadol hcl) .....7	CREATINE MONOHYDRATE 38
	COOL CONTROL SOLUTION A	CREON CPEP .....50
		CRESEMBA CAPS OR 186 MG ...22
		CRESTOR TABS (rosuvastatin calcium) 25
		CRINONE GEL 169
		cromolyn sodium (mastocytosis) ..55

cromolyn sodium (nasal) 5.2 MG/ACT	149	CVS GUMMY MULTIVITAMIN KIDS CHEW	144	CVS SPECTRAVITE WOMEN CHEW	136
cromolyn sodium (ophth)	154	CVS IMMUNE SUPPORT CAPS	136	CVS ULTRA THIN LANCETS	67
CULTURELLE CAPS (lactobacillus rhamnosus (gg))	21	CVS LANCETS 21G	67	CVS VISION HEALTH CAPS	136
CULTURELLE HEALTH & WELLNESS CAPS	21	CVS LANCETS MICRO THIN 33G 67		cyanocobalamin SOLN IJ 1000 MCG/ML	58
CULTURELLE IMMUNITY SUPPORT FORMULA CAPS (lactobacillus rhamnosus (gg))	20	CVS LANCETS MICRO-THIN 33G 67		cyclobenzaprine hcl CP24	148
CULTURELLE PROBIOTICS + MULTIVITAMIN CHEW	136	CVS LANCETS ORIGINAL	67	cyclobenzaprine hcl TABS 7.5 MG 148	
CULTURELLE PRO-WELL CAPS (lactobacillus rhamnosus (gg))	21	CVS LANCETS THIN 26G	67	cyclobenzaprine hcl TABS	149
CURITY ALCOHOL PREPS/MEDIUM 2 PLY	81	CVS LANCETS ULTRA THIN 30G 67		CYCLOGYL (cyclopentolate hcl) 151 CYCLOGYL	151
CUTIS PLUS	157	CVS LANCETS ULTRA-THIN 30G 67		cyclopentolate hcl 1 %, 2 %	151
CUVPOSA SOLN OR (glycopyrrolate)	162	CVS LANCING DEVICE MISC	67	cyclophosphamide CAPS	30
CVS ADULT 50+ EYE HEALTH CAPS	136	CVS MEDICAL FACE MASKS/EAR LOOP	116	CYCLOPHOSPHAMIDE TABS	30
CVS AIRSHIELD IMMUNITY SUPPORT CHEW	136	CVS ONE DAILY MENS 50+ ADVANCED TABS	136	cycloserine	30
CVS ALCOHOL PREP PADS	81	CVS ONE DAILY WOMENS 50+ADVANCED TABS	136	cyclosporine (ophth) EMUL	152
CVS CALCIUM CITRATE+D3 TABS . 130		CVS PREP PADS	81	cyclosporine CAPS	131
CVS CALCIUM CITRATE+D3 W/MAGNESIUM TABS	130	CVS PROCEDURAL MASK	116	cyclosporine modified (for microemulsion) CAPS	131
CVS DAILY MULTIVITAMIN/MINERAL MENS TABS	136	CVS SPECTRAVITE ADULT 50+ CHEW	136	cyclosporine modified (for microemulsion) SOLN	131
CVS EYE HEALTH ADULT 50+ CAPS	136	CVS SPECTRAVITE ADULT 50+ TABS	136	cyclosporine SOLN IV 50 MG/ML	131
CVS GUMMY DINOS CHEW	144	CVS SPECTRAVITE ADULTS TABS 136		CYLTEZO AJKT	3
CVS GUMMY DINOS CHILDRENS CHEW	144	CVS SPECTRAVITE ULTRA MEN50+ TABS	136	CYLTEZO PSKT	3
		CVS SPECTRAVITE ULTRA MENS HEALTH TABS	136	CYLTEZO STARTER PACKAGE FOR CROHNS DISEASE/UC/HS AJKT	3
		CVS SPECTRAVITE ULTRA WOMEN TABS	136	CYLTEZO STARTER PACKAGE FOR PSORIASIS AJKT	3
				CYLTEZO STARTER PACKAGE FOR PSORIASIS/UVEITIS AJKT ...	3
				cyproheptadine hcl SYRP	24

cyproheptadine hcl TABS	24	(desmopressin acetate)	53	.....	137
CYRAMZA	31	DDAVP TABS 0.2 MG		DERMA-SMOOTH/FS BODY OIL	
CYSTAGON CAPS	56	(desmopressin acetate)	53	(fluocinolone acetonide)	46
cytarabine SOLN	30	decitabine	30	DERMA-SMOOTH/FS SCALP OIL	
CYTOMEL TABS (liothyronine		DECUBI-VITE CAPS	136	(fluocinolone acetonide)	46
sodium)	161	deflazacort SUSP	40	DERMAVITE TABS	137
CYTOTEC (misoprostol)	164	deflazacort TABS	40	DESCOVY	34
dabigatran etexilate mesylate CAPS		DEKAS BARIATRIC CHEW	136	desloratadine TABS	24
110 MG	16	DEKAS ESSENTIAL CAPS	143	desloratadine TBDP 2.5 MG	24
dabigatran etexilate mesylate CAPS		DEKAS ESSENTIAL LIQD	143	desloratadine TBDP 5 MG	24
75 MG, 150 MG	16	DEKAS PLUS CAPS	136	DESMOPRESSIN ACETATE SOLN	
DAILY MOISTURIZER	157	DEKAS PLUS CHEW	136	NA	53
dalfampridine	160	DEKAS PLUS LIQD	144	desmopressin acetate spray	53
DALIRESP (roflumilast)	13	DEKAS PLUS OCEAN CAPS	136	desmopressin acetate spray	
danazol CAPS	10	DELESTROGEN (estradiol valerate)		refrigerated	53
DANTRIUM CAPS 25 MG		54		desmopressin acetate TABS 0.1 MG	
(dantrolene sodium)	149	DELZICOL CPDR (mesalamine) ..	55	53	
dantrolene sodium CAPS	149	DENAVIR (penciclovir)	45	desmopressin acetate TABS 0.2 MG	
dapagliflozin propanediol	20	DENGAXIA	166	53	
dapagliflozin propanediol-metformin		DENTA 5000 PLUS SENSITIVE GEL		desogestrel & ethinyl estradiol	38
hcl	16	1.1 %-5 %	132	desogestrel-ethinyl estradiol	
dapsone	29	DEPO-MEDROL SUSP		(biphasic)	39
DAPTACEL	162	(methylprednisolone acetate)	40	desogestrel-ethinyl estradiol	
DARAPRIM (pyrimethamine)	29	DEPO-MEDROL SUSP	40	(triphasic)	39
darifenacin hydrobromide	164	DEPO-PROVERA		desonide CREA	46
DAURISMO	31	CONTRACEPTIVE SUSP IM		desonide GEL	46
DAYAVITE TABS	136	(medroxyprogesterone acetate		desonide LOTN	46
DAYBUE	150	(contraceptive))	39	desonide OINT	46
DAYHIST ALLERGY 12 HOUR		DERMACINRX MULTITAM TABS		DESOWEN CREA (desonide)	46
RELIEF TABS	23	136		desoximetasone CREA	46
DAYPRO TABS (oxaprozin)	4	DERMACINRX RIBOTIN-E TABS		desoximetasone GEL	46
DDAVP TABS 0.1 MG		137		desoximetasone LIQD	46
		DERMACINRX ZINTREXYL-C TABS		desoximetasone OINT	46

DETROL LA CP24 (tolterodine tartrate)	164	dextromethorphan-guaifenesin SYRP 100 MG/5ML-10 MG/5ML, 100 MG/5ML-100 MG/5ML-10 MG/5ML-10 MG/5ML, 200 MG/10ML-20 MG/10ML	41	DIATRUE GLUCOSE CONTROL SOLUTION LEVEL 3 SOLN	67
DETROL TABS (tolterodine tartrate) . 164		dextromethorphan-phenylephrine-acetaminophen LIQD	41	diazoxide	17
dexamethasone ELIX	40	DHIVY TABS	33	diclofenac epolamine PTCH EX ...	44
DEXAMETHASONE INTENSOL CONC	40	DHS TAR GEL SHAM (coal tar extract)	50	diclofenac potassium CAPS	4
dexamethasone sodium phosphate (ophth)	153	DHS TAR SHAM (coal tar extract) .	50	diclofenac potassium TABS	4
dexamethasone sodium phosphate SOLN IJ	40	DIALYVITE 3000	133	diclofenac sodium (actinic keratoses) EX	44
DEXAMETHASONE SODIUM PHOSPHATE SOLN IJ	40	DIALYVITE 5000	133	diclofenac sodium (ophth)	154
dexamethasone sodium phosphate SOSY IJ	40	DIALYVITE 800 PLUS D WAFR .	133	diclofenac sodium (topical) GEL EX 44	
dexamethasone SOLN	40	DIALYVITE 800/ZINC	133	diclofenac sodium (topical) SOLN EX 1.5 %	44
dexamethasone TABS	40	DIALYVITE 800/ZINC 15	133	diclofenac sodium (topical) SOLN EX 2 %	44
dexamethasone TBPk	40	DIALYVITE SUPREME D TABS .	137	diclofenac sodium TB24	4
DEXATLAN CAPS	137	DIALYVITE/ZINC	133	diclofenac sodium TBEC	4
DEXCOM G6 RECEIVER	67	DIATHRIVE GLUCOSE CONTROL SOLUTION LIQD	67	diclofenac w/ misoprostol TBEC	4
DEXCOM G6 SENSOR	67	DIATHRIVE LANCETS	67	dicloxacillin sodium	155
DEXCOM G6 TRANSMITTER	67	DIATHRIVE LANCETS ULTRA THIN 30G	67	dicyclomine hcl CAPS	163
DEXCOM G7 RECEIVER	67	DIATHRIVE LANCING DEVICE MISC	67	dicyclomine hcl SOLN OR	163
DEXCOM G7 SENSOR	67	DIATHRIVE PEN NEEDLE/31 G X 6MM	88	dicyclomine hcl TABS	163
DEXILANT (dexlansoprazole) ...	163	DIATHRIVE PEN NEEDLE/31 GX 8MM	88	diethylpropion hcl TABS	1
dexlansoprazole	163	DIATHRIVE PEN NEEDLE/31GX 5MM	88	diethylpropion hcl TB24	1
dextran 70-hypromellose 0.3 %-0.1 %	150	DIATHRIVE PEN NEEDLE/32GX 4MM	88	DIFFERIN DAILY DEEP CLEANSER LIQD (benzoyl peroxide)	42
dextromethorphan-doxylamine-acetaminophen LIQD	41	DIATROL TABS	137	DIFFERIN GEL 0.1 % (adapalene) 42	
dextromethorphan-guaifenesin LIQD 100 MG/5ML-10 MG/5ML, 150 MG/7.5ML-15 MG/7.5ML, 200 MG/10ML-20 MG/10ML	41			DIFFERIN GEL 0.3 % (adapalene) 42	
				DIFICID SUSR	62
				DIFICID TABS	62
				diflorasone diacetate CREA	46

diflorasone diacetate OINT	46	MG/5ML	23	docusate sodium CAPS	61
DIFLUCAN SUSR (fluconazole)	22	diphenhydramine hcl LIQD 12.5		docusate sodium ENEM 283	
DIFLUCAN TABS 100 MG, 200 MG		MG/5ML, 25 MG/10ML, 50 MG/20ML		MG/5ML	61
(fluconazole)	23		23	docusate sodium LIQD 50 MG/5ML,	
DIFLUCAN TABS 150 MG		diphenhydramine hcl SOLN 50		100 MG/10ML	61
(fluconazole)	22	MG/ML	23	docusate sodium TABS	61
diflunisal TABS	6	diphenhydramine hcl TABS 25 MG		dofetilide	12
		23		DOLOBID TABS 250 MG	7
digoxin TABS 0.125 MG, 0.25 MG,		diphenoxylate w/ atropine LIQD	21	donepezil hydrochloride TABS 23	
125 MCG, 250 MCG	37			MG	159
DILAUDID LIQD (hydromorphone		diphenoxylate w/ atropine TABS	21	donepezil hydrochloride TABS 5 MG,	
hcl)	7			10 MG	159
DILAUDID TABS 2 MG		DIPHTHERIA/TETANUS TOXOIDS		donepezil hydrochloride TBDP	159
(hydromorphone hcl)	7	ADSORBED PEDIATRIC SUSP	162	dorzolamide hcl	154
DILAUDID TABS 4 MG		DIPROLENE OINT (betamethasone		DORZOLAMIDE HCL	154
(hydromorphone hcl)	7	dipropionate augmented)	47	DORZOLAMIDE HCL/TIMOLOL	
DILAUDID TABS 8 MG		dipyridamole	58	MALEATE	151
(hydromorphone hcl)	7	disopyramide phosphate CAPS	12	dorzolamide hcl-timolol maleate	151
diltiazem hcl coated beads CP24	36	DISPOSABLE FACE MASK	116	doxazosin mesylate	27
diltiazem hcl CP12	36	DISPOSABLE FACE MASK 3-PLY		doxercalciferol CAPS	52
diltiazem hcl CP24	36	116		doxercalciferol SOLN	52
diltiazem hcl extended release beads		DISPOSABLE MOUTHPIECE FULL		doxycycline (monohydrate) CAPS 50	
	36	RANGE MISC	120	MG, 100 MG	161
diltiazem hcl TABS	36	DISPOSABLE MOUTHPIECE		doxycycline (monohydrate) SUSR	
diltiazem hcl TB24	36	LOWRANGE/PEDIATRIC MISC	120	161	
dimenhydrinate TABS	22	DISPOSABLE MOUTHPIECE/LOW		doxycycline hyclate CAPS	161
dimethyl fumarate CDPK	160	RANGE MISC	120	doxycycline hyclate TABS 20 MG,	
dimethyl fumarate CPDR	160	DISPOSABLE		100 MG	161
DIOVAN HCT (valsartan-		MOUTHPIECE/UNIVERSAL RANGE		doxycycline hyclate TABS 20 MG,	
hydrochlorothiazide)	27	MISC	120	100 MG	161
DIOVAN TABS (valsartan)	26	DISPOSABLE PAPER		doxycycline hyclate TABS 20 MG,	
DIPENTUM	55	MOUTHPIECE MISC	120	100 MG	161
diphenhydramine hcl CAPS	23	DITROPAN XL TB24 5 MG, 10 MG		DRAMAMINE TABS	
diphenhydramine hcl ELIX 12.5		(oxybutynin chloride)	165	(dimenhydrinate)	22
		DIURIL SUSP	51	DRISDOL CAPS (ergocalciferol)	169
		docosanol	45		
		docusate calcium	61		

dronabinol CAPS	22	100/0.5ML/30G X 1/2"	89	5/16"	89
DROPLET GENTEEL LANCING DEVICE MISC	67	DROPLET INSULIN SYRINGE/U- 100/0.5ML/31G X 15/64"	89	DROPLET PEN NEEDLES 32G X 5/32"	89
DROPLET INSULIN SYRINGE 0.3ML/29G X 1/2"	88	DROPLET INSULIN SYRINGE/U- 100/0.5ML/31G X 5/16"	89	DROPLET PEN NEEDLES 32GX4MM	89
DROPLET INSULIN SYRINGE 0.5ML/29G X 1/2"	88	DROPLET INSULIN SYRINGE/U- 100/1ML/30G X 1/2"	89	DROPLET PEN NEEDLES 32GX5MM	89
DROPLET INSULIN SYRINGE 1ML/29G X 1/2"	88	DROPLET INSULIN SYRINGE/U- 100/1ML/31G X 5/16"	89	DROPLET PEN NEEDLES 32GX6MM	89
DROPLET INSULIN SYRINGE U- 100/0.3/31G X 5/16"	88	DROPLET LANCETS ULTRA THIN 30G	67	DROPLET PEN NEEDLES 32GX8MM	89
DROPLET INSULIN SYRINGE U- 100/0.3ML/30G X 1/2"	88	DROPLET LANCING DEVICE MISC 67		DROPLET PERSONAL LANCETS30G	67
DROPLET INSULIN SYRINGE U- 100/0.3ML/30G X 5/16"	88	DROPLET PEN NEEDLES 29G X1/2"	89	DROPSAFE ALCOHOL PREP PADS	81
DROPLET INSULIN SYRINGE U- 100/0.3ML/31G X 15/64"	89	DROPLET PEN NEEDLES 29GX10MM	89	DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 29GX12.5MM 1ML	89
DROPLET INSULIN SYRINGE U- 100/0.5ML/30G X 1/2"	89	DROPLET PEN NEEDLES 29GX12MM	89	DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 31GX6MM 0.3ML	89
DROPLET INSULIN SYRINGE U- 100/0.5ML/30G X 15/64"	89	DROPLET PEN NEEDLES 30G X 5/16"	89	DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 31GX6MM 0.5ML	90
DROPLET INSULIN SYRINGE U- 100/0.5ML/30G X 5/16"	89	DROPLET PEN NEEDLES 31G X3/16"	89	DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 31GX8MM 0.3ML	90
DROPLET INSULIN SYRINGE U- 100/0.5ML/31G X 5/16"	89	DROPLET PEN NEEDLES 31G X5/16"	89	DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 31GX8MM 0.5ML	90
DROPLET INSULIN SYRINGE U- 100/1ML/30G X 1/2"	89	DROPLET PEN NEEDLES 31GX5MM	89	DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 31GX8MM 0.5ML	90
DROPLET INSULIN SYRINGE U- 100/1ML/30G X 5/16"	89	DROPLET PEN NEEDLES 31GX6MM	89	DROPSAFE INSULIN SAFETY SYRINGE/FIXED NEEDLE 31GX8MM 1ML	90
DROPLET INSULIN SYRINGE U- 100/1ML/31G X 5/16"	89	DROPLET PEN NEEDLES 31GX8MM	89	DROPSAFE SAFETY PEN NEEDLE/31GX5MM	90
DROPLET INSULIN SYRINGE/U- 100/0.3ML/31G X 15/64"	89	DROPLET PEN NEEDLES 32G X 1/4"	89	DROPSAFE SAFETY PEN NEEDLES/31G X 5/16"	90
DROPLET INSULIN SYRINGE/U- 100/0.3ML/31G X 5/16"	89	DROPLET PEN NEEDLES 32G X 3/16"	89		
DROPLET INSULIN SYRINGE/U-		DROPLET PEN NEEDLES 32G X			

DROPSAFE SAFTEY PEN NEEDLES/31G X 1/4"	90	DULCOLAX PINK LAXATIVE TBEC (bisacodyl)	61	EASIVENT/MASK-SMALL MISC	.121
drosiprenone-ethinyl estradiol 0.02 MG-3 MG	39	DULCOLAX SUPP (bisacodyl)	61	EASY COMFORT ALCOHOL PADS	81
drosiprenone-ethinyl estradiol 0.03 MG-3 MG	39	DULCOLAX TBEC (bisacodyl)	61	EASY COMFORT INSULIN SYRINGE/0.3ML/31G X 5/16"	90
DROXIA CAPS	58	DULERA	14	EASY COMFORT INSULIN SYRINGE/0.5ML/30G X 5/16"	90
DRUG MART ADJUSTABLE LANCING DEVICE MISC	67	DUO-CARE CONTROL SOLUTION LIQD	67	EASY COMFORT INSULIN SYRINGE/0.5ML/30G X 5/16"	90
DRUG MART LANCETS THIN	67	DUOPA SUSP	33	EASY COMFORT INSULIN SYRINGE/0.5ML/31G X 5/16"	90
DRUG MART ON-THE-GO LANCETS GENTLE 30G	67	DUPIXENT SOAJ SC 200 MG/1.14ML, 300 MG/2ML	48	EASY COMFORT INSULIN SYRINGE/1ML/30G X 5/16"	90
DRUG MART UNIFINE PENTIPS 31GX5MM	90	DUPIXENT SOSY	48	EASY COMFORT INSULIN SYRINGE/1ML/31G X 5/16"	90
DRUG MART UNIFINE PENTIPS29G X 12MM	90	DURABASE	157	EASY COMFORT INSULIN SYRINGE/U-100/0.5ML/30G X 1/2" .	90
DRUG MART UNIFINE PENTIPS31GX6MM	90	DURABASE ADVANCED	157	EASY COMFORT INSULIN SYRINGE/U-100/1ML/30G X 1/2" 90	
DRUG MART UNIFINE PENTIPS31GX8MM	90	DUREX EXTRA SENSITIVE THIN DEVI	62	EASY COMFORT INSULIN SYRINGE/U-100/1ML/30G X 1/2" 90	
DRUG MART UNIFINE PENTIPS32GX4MM	90	DUREX EXTRA SENSITIVE THIN MISC	62	EASY COMFORT LANCETS	67
DRUG MART UNIFINE PENTIPSPLUS 32GX4MM	90	DUREX REALFEEL NON-LATEX	62	EASY COMFORT LANCETS 30G/PULL TOP	67
DRUG MART UNILET LANCETSSUPER THIN 30G	67	DUREX TROPICAL MISC	62	EASY COMFORT LANCETS 30G/THIN TOP	67
DRUG MART UNILET LANCETSULTRA THIN 28G	67	dutasteride	57	EASY COMFORT LANCETS 30G/THIN TOP	67
DRUG MART UNILET MICRO THIN LANCETS 33G	67	dutasteride-tamsulosin hcl	57	EASY COMFORT LANCETS TOP	67
DRYSOL SOLN	49	D-VI-SOL LIQD OR (cholecalciferol) .	169	EASY COMFORT PEN NEEDLES31GX1/4"	90
DUAKLIR PRESSAIR	14	DYANAVEL XR TBCR OR 5 MG, 10 MG, 15 MG, 20 MG	1	EASY COMFORT PEN NEEDLES31GX3/16"	90
DUETACT (pioglitazone hcl- glimepiride)	16	DYMISTA SUSP (azelastine hcl- fluticasone propionate)	149	EASY COMFORT PEN NEEDLES31GX5/16"	90
DUEXIS (ibuprofen-famotidine)	4	E.E.S. GRANULES SUSR (erythromycin ethylsuccinate)	62	EASY COMFORT PEN NEEDLES32GX5/32"	90
		EAR-LOOP MASK SMALL	116	EASY COMFORT PEN NEEDLES33G X 4MM	90
		EASIVENT MISC	121		
		EASIVENT/MASK-LARGE MISC	.120		
		EASIVENT/MASK-MEDIUM MISC			

EASY COMFORT SAFETY PEN NEEDLES 31GX5MM .....90	EASY MINI EJECT LANCING DEVICE MISC 67	EASY TOUCH INSULIN SYRINGE/0.5ML/29G X 1/2" .....91
EASY COMFORT SAFETY PEN NEEDLES 31GX6MM .....90	EASY MINI LANCING DEVICE MISC.....67	EASY TOUCH INSULIN SYRINGE/0.5ML/30G X 5/16" 91
EASY COMFORT SAFETY PEN NEEDLES 32GX4MM .....90	EASY PLUS II CONTROL SOLUTION HIGH SOLN .....67	EASY TOUCH INSULIN SYRINGE/1ML/30G X 5/16" 91
EASY FLOW 300 MM HOSE MISC 121	EASY STEP CONTROL SOLUTION HIGH SOLN .....67	EASY TOUCH INSULIN SYRINGE/SAFETY/U- 100/0.5ML/29G X 1/2" .....91
EASY FLOW 400 MM HOSE MISC 121	EASY TALK CONTROL SOLUTION HIGH SOLN .....67	EASY TOUCH INSULIN SYRINGE/SAFETY/U- 100/0.5ML/30G X 5/16" 91
EASY FLOW AIR NOZZLE MISC 121	EASY TALK PLUS II CONTROLHIGH SOLN .....68	EASY TOUCH INSULIN SYRINGE/SAFETY/U-100/1ML/29G X 1/2" .....91
EASY FLOW BLACK/BLUE DEVI 121	EASY TOUCH 32GX5MM 90	EASY TOUCH INSULIN SYRINGE/SAFETY/U-100/1ML/30G X 1/2" .....91
EASY FLOW BLACK/ORANGE DEVI.....121	EASY TOUCH 32GX6MM 90	EASY TOUCH INSULIN SYRINGE/SAFETY/U-100/1ML/29G X 1/2" .....91
EASY FLOW BLACK/RED DEVI .121	EASY TOUCH ALCOHOL PREP PADS/MEDIUM 81	EASY TOUCH INSULIN SYRINGE/SAFETY/U-100/1ML/30G X 1/2" .....91
EASY FLOW BLACK/WHITE DEVI 121	EASY TOUCH CONTROL SOLUTION/HIGH & LOW SOLN ..68	EASY TOUCH INSULIN SYRINGE/U-100/0.3ML/30G X 1/2" . 91
EASY FLOW BLACK/YELLOW DEVI.....121	EASY TOUCH FLIPLOCK SAFETY INSULIN SYRINGE 1ML/29GX1/2" 90	EASY TOUCH INSULIN SYRINGE/U-100/0.5ML/27G X 1/2" . 91
EASY FLOW HEPA FILTER MISC 121	EASY TOUCH FLIPLOCK SAFETY INSULIN SYRINGE 1ML/30GX1/2" 91	EASY TOUCH INSULIN SYRINGE/U-100/0.5ML/28G X 1/2" . 91
EASY FLOW KN 95 MASK .....116	EASY TOUCH FLIPLOCK SAFETY INSULIN SYRINGE 1ML/30GX5/16" 91	EASY TOUCH INSULIN SYRINGE/U-100/0.5ML/29G X 1/2" . 91
EASY FLOW WHITE/BLUE DEVI 121	EASY TOUCH FLIPLOCK SAFETY INSULIN SYRINGE 1ML/31GX5/16" 91	EASY TOUCH INSULIN SYRINGE/U-100/0.5ML/30G X 1/2" . 91
EASY FLOW WHITE/GREEN DEVI 121	EASY TOUCH INSULIN SYRINGE BARRELS LUER LOCK/1ML MISC 68	EASY TOUCH INSULIN SYRINGE/U-100/0.5ML/31G X 5/16" .....91
EASY FLOW WHITE/PINK DEVI .121	EASY TOUCH INSULIN SYRINGE/0.3ML/30G X 5/16" 91	EASY TOUCH INSULIN SYRINGE/U-100/1ML/27G X 1/2" 91
EASY FLOW WHITE/WHITE DEVI 121	EASY TOUCH INSULIN SYRINGE/0.3ML/31G X 5/16" 91	
EASY FLOW WHITE/YELLOW DEVI 121		
EASY GLIDE PEN NEEDLES 33G X 5/32" .....90		

EASY TOUCH INSULIN SYRINGE/U-100/1ML/27G X 5/8" 91	EASY TOUCH LANCETS 32G/TWIST .....68	EASY TOUCH SAFETY LANCETS28G/PRESSURE ACTIVATED .....68
EASY TOUCH INSULIN SYRINGE/U-100/1ML/28G X 1/2" 91	EASY TOUCH LANCETS 33G/TWIST .....68	EASY TOUCH SAFETY PEN NEEDLES/30G X 5/16" 92
EASY TOUCH INSULIN SYRINGE/U-100/1ML/29G X 1/2" 91	EASY TOUCH LANCING DEVICE/EJECTOR MISC 68	EASY TOUCH SHEATHLOCK SAFETY INSULIN SYRINGE 1ML/29GX1/2" .....92
EASY TOUCH INSULIN SYRINGE/U-100/1ML/30G X 1/2" 91	EASY TOUCH PEN NEEDLE 30G X 5/16" .....91	EASY TOUCH SHEATHLOCK SAFETY INSULIN SYRINGE 1ML/30GX5/16" 92
EASY TOUCH INSULIN SYRINGE/U-100/1ML/31G X 5/16" 91	EASY TOUCH PEN NEEDLES 29GX1/2" .....91	EASY TOUCH SHEATHLOCK SAFETY INSULIN SYRINGE 1ML/31GX5/16" 92
EASY TOUCH LANCETS 21G/PRESSURE ACTIVATED ....68	EASY TOUCH PEN NEEDLES 31GX1/4" .....91	EASY TOUCH SHEATHLOCK SAFETY INSULIN SYRINGE 1ML/31GX5/16" 92
EASY TOUCH LANCETS 23G/PRESSURE ACTIVATED ....68	EASY TOUCH PEN NEEDLES 31GX5/16" .....91	EASY TOUCH SHEATHLOCK SAFETY SYRINGE 1ML/30GX1/2" 92
EASY TOUCH LANCETS 26G/PRESSURE ACTIVATED ....68	EASY TOUCH PEN NEEDLES 32GX1/4" .....91	EASY TRAK GLUCOSE CONTROLSOLUTION HIGH SOLN 68
EASY TOUCH LANCETS 26G/PULL- TOP .....68	EASY TOUCH PEN NEEDLES 32GX3/16" .....91	EASYMAX 15 GLUCOSE CONTROL SOLUTION/LEVEL 2/LEVEL 3 LIQD . 68
EASY TOUCH LANCETS 28G/PRESSURE ACTIVATED ....68	EASY TOUCH PEN NEEDLES 32GX5/32" .....91	EASYMAX 15 LEVEL 2 GLUCOSE CONTROL SOLUTION SOLN .....68
EASY TOUCH LANCETS 28G/PULL- TOP .....68	EASY TOUCH PEN NEEDLES/31G X 3/16" .....91	EASYMAX GLUCOSE CONTROL SOLUTION/NORMAL-HIGH LIQD 68
EASY TOUCH LANCETS 28G/TWIST .....68	EASY TOUCH SAFETY LANCETS21G/PRESSURE ACTIVATED .....68	EBASE CONTROLLER KIT MISC 121
EASY TOUCH LANCETS 30G/BUTTON-ACTIVATED .....68	EASY TOUCH SAFETY LANCETS23G/PRESSURE ACTIVATED .....68	EC-NAPROSYN TBEC (naproxen) .4
EASY TOUCH LANCETS 30G/PRESSURE ACTIVATED ....68	EASY TOUCH SAFETY LANCETS26G/BUTTON ACTIVATED .....68	econazole nitrate CREA 43
EASY TOUCH LANCETS 30G/PULL- TOP .....68	EASY TOUCH SAFETY LANCETS26G/PRESSURE ACTIVATED .....68	ECOTRIN ARTHRITIS PAIN TBEC (aspirin) .....7
EASY TOUCH LANCETS 30G/TWIST .....68	EASY TOUCH SAFETY LANCETS28G/BUTTON ACTIVATED .....68	ECOTRIN REGULAR STRENGTH TBEC (aspirin) .....7
EASY TOUCH LANCETS 32G/PRESSURE ACTIVATED ....68	EASY TOUCH SAFETY LANCETS28G/BUTTON ACTIVATED .....68	ECOTRIN TBEC (aspirin) .....7
EASY TOUCH LANCETS 32G/PULL- TOP .....68		EDARBI 26

EDARBYCLOR	27	6MM	92	EMERGEN-C VITAMIN C CHEW 137
EFFIENT (prasugrel hcl)	58	EMBRACE PEN NEEDLES/31G X 8MM	92	EMFLAZA SUSP (deflazacort)
EFUDEX CREA (fluorouracil (topical))	44	EMBRACE PEN NEEDLES/32G X 4MM	92	EMFLAZA TABS (deflazacort)
ELEMENT COMPACT CONTROL SOLUTION LEVEL 2 SOLN	68	EMBRACE PRESSURE ACTIVATED SAFETY LANCET/21G	69	EMGALITY SOAJ
ELEMENT COMPACT CONTROL SOLUTION LEVEL 3 SOLN	68	EMBRACE PRESSURE ACTIVATED SAFETY LANCET/28G	69	EMGALITY SOSY 100 MG/ML ...
ELEMENT HIGH CONTROL LIQD	68	EMBRACE PRO GLUCOSE CONTROL SOLUTION LIQD	69	EMGALITY SOSY 120 MG/ML ...
eletriptan hydrobromide	128	EMBRACE TALK GLUCOSE CONTROL SOLUTION HIGH SOLN . 69		EMOLIVAN
ELFABRIO	52	EMCMT	31	EMOLLIENT CREAM
ELFOLATE PLUS TABS	50	EMEND CAPS 80 MG (aprepitant)	22	EMOLLIENT CREAM BASE
ELIDEL (pimecrolimus)	49	EMEND SUSR	22	EMPAVELI
ELIGARD SC	31	EMEND TRIPACK CAPS (aprepitant)	22	enalapril maleate & hydrochlorothiazide
ELIQUIS STARTER PACK TBPK .	15	EMERGEN-C APPLE CIDER VINEGAR GUMMIES CHEW	137	enalapril maleate SOLN
ELIQUIS TABS 2.5 MG	15	EMERGEN-C ASHWAGANDHA GUMMIES CHEW	137	enalapril maleate TABS
ELIQUIS TABS 5 MG	15	EMERGEN-C ELDERBERRY GUMMIES CHEW	137	ENBREL MINI SOCT
ELLA	39	EMERGEN-C IMMUNE PLUS/VITAMIN D CHEW	137	ENBREL SOLN
ELMIRON CAPS	57	EMERGEN-C IMMUNE+ GUMMIES CHEW	137	ENBREL SOSY
ELYXYB	127	EMERGEN-C KIDZ GUMMIES CHEW	144	ENBREL SURECLICK SOAJ
EMBRACE GLUCOSE CONTROL SOLUTION HIGH LIQD	69	EMERGEN-C KIDZ IMMUNE+ GUMMIES CHEW	144	ENDARI (glutamine (sickle cell)) ..
EMBRACE LANCETS ULTRA THIN 30G	69	EMERGEN-C TURMERIC & GINGER GUMMIES CHEW	137	ENDUR-AMIDE TBCR
EMBRACE LANCING DEVICE WITH EJECTOR MISC	69			ENFAMIL ENFALYTE SOLN
EMBRACE PEN NEEDLES/29G X 12MM	92			ENGERIX-B SUSP 20 MCG/ML .
EMBRACE PEN NEEDLES/30G X 8MM	92			ENGERIX-B SUSY
EMBRACE PEN NEEDLES/31G X 5MM	92			ENJAYMO
EMBRACE PEN NEEDLES/31G X				ENLITE GLUCOSE SENSOR
				enoxaparin sodium SOLN IJ 300 MG/3ML
				enoxaparin sodium SOSY
				ENSPRYNG
				entacapone

ENTADFI	57	137	X 5/16"	92
entecavir TABS	35	EQ ONE DAILY MENS HEALTH TABS	EQ INSULIN SYRINGE/0.5ML/31G X 5/16"	137 92
ENTRESTO TABS	37	EQ ONE DAILY WOMENS 50+ TABS	EQ INSULIN SYRINGE/1ML/29G X 1/2"	137 92
ENTYVIO PEN SOAJ SC 108 MG/0.68ML	55	EQ ONE DAILY WOMENS HEALTH TABS	EQ INSULIN SYRINGE/1ML/30G X 5/16"	137 92
ENTYVIO SOLR	55	EQ SPACE CHAMBER ANTI- STATIC DEVI	EQ INSULIN SYRINGE/1ML/31G X 5/16"	122 92
ENVARBUS XR TB24	131	EQ SPACE CHAMBER ANTI- STATIC/LARGE MASK DEVI	EQ ONE DAILY ADULT GUMMIES CHEW	122 137
EOHILIA SUSP	40	EQ SPACE CHAMBER ANTI- STATIC/MEDIUM MASK DEVI ..	EQ ONE DAILY MENS TABS ...	122 137
EPANED SOLN (enalapril maleate) 26		EQ SPACE CHAMBER ANTI- STATIC/SMALL MASK DEVI	EQ PRENATAL FORMULA TABS 146	122 146
EPIDUO GEL (adapalene-benzoyl peroxide)	42	EQ SPACE CHAMBER ANTI- STATIC/SMALL MASK DEVI	EQ SUPER THIN LANCETS 30G 69	122 69
epinastine hcl (ophth)	154	EQ ALCOHOL SWABS	EQ THIN LANCETS 26G	81 69
epinephrine (anaphylaxis) SOAJ 0.3 MG/0.3ML	169	EQ CENTURY MATURE ADULTS50+ TABS	EQUALYTE SOLN (oral electrolytes) 129	137 129
epinephrine (anaphylaxis) SOAJ .169		EQ CENTURY MENS TABS	ergocalciferol CAPS	137 169
EPIPEN 2-PAK SOAJ (epinephrine (anaphylaxis))	169	EQ CENTURY WOMENS TABS 137	ergocalciferol SOLN OR	169 169
EPIPEN-JR 2-PAK SOAJ (epinephrine (anaphylaxis))	169	EQ COLOR LANCETS 21G	ERIVEDGE	169 31
EPIVIR HBV TABS (lamivudine (hbv))	35	EQ COLOR LANCETS MICRO THIN 33G	ERLEADA	35 69 31
EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	58	EQ GUMMIES CHILDRENS CHEW	ERMEZA SOLN OR	58 144 162
EQ COMPLETE MULTIVITAMINADULTS UNDER 50 TABS	137	EQ INSULIN SYRINGE/0.3ML/29G X 1/2"	ERTACZO	137 92
EQ MULTIVITAMIN GUMMIES CHILDRENS CHEW	144	EQ INSULIN SYRINGE/0.3ML/30G X 5/16"	ERVEBO	144 92 166
EQ MULTIVITAMINS ADULT GUMMY CHEW	137	EQ INSULIN SYRINGE/0.3ML/31G X 5/16"	ERYPED 200 SUSR (erythromycin ethylsuccinate)	137 92 62
EQ MULTIVITAMINS CHILDRENS GUMMY CHEW	144	EQ INSULIN SYRINGE/0.5ML/29G X 1/2"	ERYPED 400 SUSR (erythromycin ethylsuccinate)	144 92 62
EQ ONE DAILY MENS 50+ TABS		EQ INSULIN SYRINGE/0.5ML/30G	erythromycin (acne aid) SOLN	152 152

erythromycin base CPEP	62	estradiol valerate	54	EXCEL COMFORT POINT INSULIN PEN NEEDLES 31G X 4MM	92
erythromycin base TABS	62	ESTROFACTORS TABS	143	EXCEL COMFORT POINT INSULIN PEN NEEDLES 29G X 12MM	92
erythromycin base TBEC	62	ESTROVEN MENOPAUSE SUPPLEMENT TABS	137	EXCEL COMFORT POINT INSULIN PEN NEEDLES 31G X 6MM	92
erythromycin ethylsuccinate SUSR 200 MG/5ML	62	ethambutol hcl TABS	30	EXCEL COMFORT POINT INSULIN PEN NEEDLES 31G X 8MM	92
erythromycin ethylsuccinate SUSR 400 MG/5ML	62	ethynodiol diacet & eth estrad	39	EXCEL COMFORT POINT INSULIN PEN NEEDLES 31G X 1/2"	92
erythromycin ethylsuccinate TABS 62		etodolac CAPS	4	EXCEL COMFORT POINT INSULIN PEN NEEDLES 31G X 1/2"	92
erythromycin stearate TABS 250 MG 62		etodolac TABS	4	EXCEL COMFORT POINT INSULIN SYRINGE/0.3ML/29G X 1/2"	92
ESGIC TABS (butalbital- acetaminophen-caffeine)	6	etodolac TB24	4	EXCEL COMFORT POINT INSULIN SYRINGE/0.3ML/30G X 5/16"	92
esomeprazole magnesium CPDR 20 MG	163	etonogestrel-ethinyl estradiol	39	EXCEL COMFORT POINT INSULIN SYRINGE/0.5ML/28G X 1/2"	92
esomeprazole magnesium CPDR 40 MG	163	etoposide CAPS	33	EXCEL COMFORT POINT INSULIN SYRINGE/0.5ML/29G X 1/2"	92
esomeprazole magnesium PACK 163		EUCERIN ORIGINAL HEALING CREA (skin protectants, misc.)	49	EXCEL COMFORT POINT INSULIN SYRINGE/0.5ML/30G X 5/16"	93
esomeprazole magnesium TBEC 163		EUCRISA	49	EXCEL COMFORT POINT INSULIN SYRINGE/1ML/28G X 1/2"	93
esterified estrogens & methyltestosterone 1.25 MG-0.625 MG	53	EULEXIN	31	EXCEL COMFORT POINT INSULIN SYRINGE/1ML/29G X 1/2"	93
ESTRACE CREA (estradiol vaginal) . 169		everolimus (immunosuppressant) 131		EXCEL COMFORT POINT INSULIN SYRINGE/1ML/30G X 5/16"	93
ESTRACE TABS 0.5 MG, 2 MG (estradiol)	54	everolimus TABS	32	EXCEL COMFORT POINT INSULIN SYRINGE/1ML/30G X 5/16"	93
ESTRACE TABS 1 MG (estradiol) .54		everolimus TBSO	32	EXCEL COMFORT POINT INSULIN TRANSMITTER	69
estradiol & norethindrone acetate TABs	53	EVERSENSE 365 SENSOR/HOLDER	69	EXELDERM CREA (sulconazole nitrate)	43
estradiol PTTW	54	EVERSENSE 365 SMART TRANSMITTER	69	EXELON (rivastigmine)	159
estradiol PTWK	54	EVERSENSE E3 SENSOR/HOLDER	69	exemestane	31
estradiol TABS 0.5 MG, 2 MG	54	EVERSENSE E3 SMART TRANSMITTER	69	EXFORGE (amlodipine besylate- valsartan)	27
estradiol TABS 1 MG	54	EVERSENSE SENSOR/HOLDER 69		EXFORGE HCT (amlodipine- valsartan-hydrochlorothiazide)	27
estradiol vaginal CREA	169	EVERSENSE SMART TRANSMITTER	69	EXPIRATORY MOUTHPIECE MISC . 122	
estradiol vaginal TABS	169	EVISTA (raloxifene hcl)	52	EXSERVAN FILM	150
		EVRYSDI	150		

EXTAVIA KIT	160	FACE MASK RESPIRATOR R-95 PARTICULATE	116	MG, 90 MG, 130 MG	25
EXTINA FOAM (ketoconazole (topical))	43	FACE MASK SURGICAL/DISPOSABLE	116	fenofibrate micronized 67 MG, 134 MG, 200 MG	25
EYE HEALTH CAPS	137	FACE MASK/3 PLY/EAR LOOP	116	fenofibrate TABS 40 MG, 120 MG	25
EYE HEALTH/LUTEIN TABS	137	FACE MASKS 3 LAYER NON- MEDICAL	116	fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG	25
EYE MULTIVITAMIN CAPS	137	FAGRON LS PLUS	157	FENOFIBRATE TABS	25
EYE MULTIVITAMIN/LUTEIN CAPS	137	FAGRON NATURAL CREAM	157	fenofibric acid	25
EYE MULTIVITAMIN/SODIUM TABS	137	FAGRON SUPREME CREAM	157	FENOGLIDE TABS (fenofibrate)	25
EYSUVIS SUSP	153	famciclovir	35	fenoprofen calcium CAPS 400 MG	4
E-Z JECT LANCETS	69	famotidine SUSR	163	fenoprofen calcium TABS	4
E-Z JECT LANCETS 21G	69	famotidine TABS	163	fentanyl citrate LPOP	7
E-Z JECT LANCETS COLOR	69	FANTASY LUBRICATED MISC	62	fentanyl citrate TABS	7
E-Z JECT LANCETS SUPER THIN 30G	69	FANTASY LUBRICATED/SPERMICIDE MISC 62		fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR	7
E-Z JECT LANCETS THIN 26G	69	FARESTON (toremifene citrate)	31	fentanyl PT72 37.5 MCG/HR, 62.5 MCG/HR, 87.5 MCG/HR	7
EZALLOR SPRINKLE CPSP	25	FARXIGA (dapagliflozin propanediol)	20	FENTORA TABS (fentanyl citrate)	7
ezetimibe	26	FARXIGA	20	FEOSOL BIFERA	59
ezetimibe-simvastatin	24	FARXIGA	20	FEOSOL TABS (ferrous sulfate dried)	59
E-ZJECT LANCETS MICRO-THIN 33G	69	FASENRA PEN SOAJ	12	FER-IN-SOL SOLN (ferrous sulfate)	60
EZ-LETS LANCETS 21G	69	FATTIBASE	157	FERREX 150 FORTE PLUS	59
EZ-LETS LANCETS 26G SUPER- SOFT	69	FC2 FEMALE CONDOM	62	FERREX 150 PLUS 50 MG-50 MG- 50 MG-50 MG-150 MG-150 MG	59
EZ-LETS LANCETS 28G ULTRA- SOFT	69	febuxostat	57	FERREX 28 MISC	59
EZ-LETS LANCETS 30G	69	FELDENE CAPS (piroxicam)	4	ferrous gluconate TABS 27 MG, 240 MG, 324 MG	60
FABHALTA	57	felodipine	36	FERROUS GLUCONATE TABS 324 MG	60
FACE MASK EARLOOP-STYLE	116	FEMARA (letrozole)	31	ferrous sulfate dried TABS 200 MG 60	
FACE MASK RESPIRATOR N-100 PARTICULATE W/EXHALATION VALVE	116	FEM-CAL CITRATE TABS	130		
		FEMCAP DEVI	62		
		fenofibrate CAPS	25		
		fenofibrate micronized 30 MG, 43			

ferrous sulfate dried TBCR 45 MG 60	32G	69	FLECTOR PTCH EX (diclofenac epolamine)	44
ferrous sulfate SOLN	FIFTY50 SUPERIOR COMFORTINSULIN SYRINGE/0.3ML/31G X 5/16"	93	FLEET ENEMA ENEM (sodium phosphates)	61
ferrous sulfate TABS 65 MG, 325 MG.....60	FIFTY50 SUPERIOR COMFORTINSULIN SYRINGE/0.5ML/31G X 5/16"	93	FLEET OIL ENEM (mineral oil)	60
FERROUS SULFATE TBEC (ferrous sulfate)	FIFTY50 SUPERIOR COMFORTINSULIN SYRINGE/1ML/31G X 5/16"	93	FLEET PEDIATRIC ENEM (sodium phosphates)	61
ferrous sulfate TBEC	FIFTY50 UNILET LANCETS	69	FLEET SALINE ENEMA EXTRAVOLUME ENEM (sodium phosphates)	61
fesoterodine fumarate	FILTER AIR PP MISC	122	FLEQSUUVY SUSP (baclofen)	149
FEVERALL JUNIOR STRENGTH SUPP	finasteride	57	FLEX BASE	157
fexofenadine hcl SUSP	FINE 30	69	FLEXICHAMBER ADULT MASK/SMALL	122
fexofenadine hcl TABS 60 MG, 180 MG	FINGERSTIX LANCETS	69	FLEXICHAMBER CHILD MASK/LARGE	122
FIASP FLEXTOUCH SOPN	fingolimod hcl	160	FLEXICHAMBER CHILD MASK/SMALL	122
FIASP PENFILL SOCT	FIORICET/CODEINE 30 MG-40 MG- 50 MG-300 MG (butalbital- acetaminophen-caffeine w/ codeine)	9	FLEXICHAMBER DEVI	122
FIASP PUMPCART SOCT	FIRVANQ SOLR OR (vancomycin hcl)	29	FLINTSTONES + EXTRA IRON CHEW	144
FIASP SOLN	FITALITE	157	FLINTSTONES COMPLETE CHEW	144
FIBRICOR (fenofibric acid)	FITNESS TABS FOR MEN AM/PM/LYCOPENE TABS	137	FLINTSTONES COMPLETE/CALCIUM & VITAMIN D CHEW	144
FIFTY50 ALCOHOL PREP PADS	FITNESS TABS FOR WOMEN AM/PM/LYCOPENE TABS	137	FLINTSTONES GUMMIES CHEW	144
FIFTY50 PEN NEEDLES 31G X3/16" (5MM)	FLAGYL CAPS (metronidazole)	28	FLINTSTONES GUMMIES COMPLETE CHEW	144
FIFTY50 PEN NEEDLES 31G X5/16" (8MM)	FLAVOR BLEND SUSP	155	FLINTSTONES GUMMIES PLUSBONE BUILDING SUPPORT CHEW	144
FIFTY50 PEN NEEDLES 31GX5MM.....93	FLAVOR PLUS LIQD	155	FLINTSTONES GUMMIES GUMMIES/IMMUNITY SUPPORT/EXTRA C CHEW	144
FIFTY50 PEN NEEDLES/31GX8MM.....93	FLAVOR SWEET SYRP	155		
FIFTY50 PEN NEEDLES/32GX4MM.....93	FLAVOR SWEET-SF SYRP	155		
FIFTY50 PEN NEEDLES/32GX6MM.....93	flavoxate hcl	165		
FIFTY50 SAFETY SEAL LANCETS 30G	flecainide acetate	12		
FIFTY50 SAFETY SEAL LANCETS				

FLINTSTONES SOUR GUMMIES CHEW	144	FLUARIX 2024-2025 SUSY	166	FLULAVAL QUADRIVALENT 2023-2024 SUSY	166
FLINTSTONES TODDLER/TASTISMOOTH CHEW 144		FLUARIX QUADRIVALENT 2022-2023 SUSY	166	FLUMIST QUADRIVALENT	166
FLINTSTONES/IMMUNITY SUPPORT CHEW	144	FLUARIX QUADRIVALENT 2023-2024 SUSY	166	flunisolide (nasal) 0.025 %	150
FLOMAX (tamsulosin hcl)	57	FLUBLOK 2024-2025 SOSY	166	fluocinolone acetonide CREA	47
FLOMASE ALLERGY RELIEF CHILDRENS SUSP (fluticasone propionate (nasal))	149	FLUBLOK QUADRIVALENT 2022-2023	166	fluocinolone acetonide OIL	47
FLOMASE ALLERGY RELIEF SUSP (fluticasone propionate (nasal)) ..	149	FLUBLOK QUADRIVALENT 2023-2024	166	fluocinolone acetonide OINT	47
FLORAFOL PEDIATRIC CHEW 70 MG-1 MG-12 MG-1.15 MG-1 MG-12 MCG-11.5 MG-700 MCG-3.5 MCG-0.5 MG-250 MCG	145	FLUCELVAX 2024-2025 SUSP ..	166	fluocinolone acetonide SOLN	47
FLORAFOL PEDIATRIC CHEW 70 MG-1 MG-12 MG-1.15 MG-1 MG-12 MCG-11.5 MG-700 MCG-3.5 MCG-1 MG-250 MCG	145	FLUCELVAX 2024-2025 SUSY ..	166	fluocinonide CREA	47
FLORIVA PLUS SOLN	145	FLUCELVAX QUADRIVALENT 2022-2023 SUSP	166	fluocinonide emulsified base	47
FLORRAVITE TABS	137	FLUCELVAX QUADRIVALENT 2022-2023 SUSY	166	fluocinonide GEL	47
FLOVENT DISKUS AEPB (fluticasone propionate (inhalation)) 13		FLUCELVAX QUADRIVALENT 2023-2024 SUSP	166	fluocinonide OINT	47
FLOVENT HFA 110 MCG/ACT (fluticasone propionate hfa)	13	FLUCELVAX QUADRIVALENT 2023-2024 SUSY	166	fluocinonide SOLN	47
FLOVENT HFA 220 MCG/ACT (fluticasone propionate hfa)	13	fluconazole SUSR	23	FLUORIDEX SENSITIVITY RELIEF GEL 1.1 %-5 %	132
FLOVENT HFA 44 MCG/ACT (fluticasone propionate hfa)	13	fluconazole TABS 150 MG	23	FLUORIDEX SENSITIVITY RELIEF/SLS FREE GEL 1.1 %-5 % 132	
floxuridine	30	fluconazole TABS 50 MG, 100 MG, 200 MG	23	FLUORIMAX 5000 SENSITIVE GEL 1.1 %-5 %	132
FLUAD 2024-2025	166	flucytosine	22	fluorometholone (ophth) SUSP ...	153
FLUAD QUADRIVALENT 2022-2023	166	fludarabine phosphate SOLN	30	fluorouracil (topical) CREA	44
FLUAD QUADRIVALENT 2023-2024 ..		FLUDARABINE PHOSPHATE SOLN	30	fluorouracil (topical) SOLN	44
		fludarabine phosphate SOLR	30	fluorouracil	30
		fludrocortisone acetate TABS	41	flurandrenolide CREA	47
		FLULAVAL 2024-2025 SUSY	166	flurandrenolide LOTN	47
		FLULAVAL QUADRIVALENT 2022-2023 SUSY	166	flurbiprofen sodium	154
				flurbiprofen TABS 100 MG	4
				flutamide	31
				fluticasone furoate-vilanterol	14
				fluticasone propionate (inhalation) AEPB	13

fluticasone propionate (nasal) SUSP . 150	FLUZONE QUADRIVALENT 2023- 2024 SUSP 167	FORA LANCING DEVICE/CLEARCAP MISC 69
fluticasone propionate CREA 0.05 % 47	FLUZONE QUADRIVALENT 2023- 2024 SUSY 167	FORACARE GDH CONTROL SOLUTION HIGH SOLN 69
fluticasone propionate hfa 110 MCG/ACT 13	FLYP HYPERSONIQ CARTRIDGE MISC 122	formoterol fumarate NEBU 14
fluticasone propionate hfa 220 MCG/ACT 13	FML LIQUIFILM SUSP (fluorometholone (ophth)) 153	FORTEO SOPN (teriparatide) 51
fluticasone propionate hfa 44 MCG/ACT 13	FOLAGENT DHA CAPS 137	FORTESTA GEL TD (testosterone) 10
fluticasone propionate LOTN 47	FOLAMAX TABS 137	FORTISCARE CONTROL SOLUTIONS HIGH SOLN 69
fluticasone propionate OINT 47	FOLAMED DHA CAPS 137	FOSAMAX PLUS D 51
fluticasone-salmeterol AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT 14	FOLAPRIME TABS 137	FOSAMAX TABS 70 MG (alendronate sodium) 51
fluticasone-salmeterol AEPB 113 MCG/ACT-14 MCG/ACT, 232 MCG/ACT-14 MCG/ACT, 55 MCG/ACT-14 MCG/ACT 14	FOLBIC 50	fosinopril sodium & hydrochlorothiazide 27
fluticasone-salmeterol AERO 14	FOLCYTEINE TABS 143	fosinopril sodium 26
fluvastatin sodium CAPS 25	FOLGARD RX TABS 59	FOSRENOL CHEW (lanthanum carbonate) 56
fluvastatin sodium TB24 25	folic acid TABS 1 MG, 800 MCG .. 58	FOSRENOL PACK 56
FLUZONE 2024-2025 SUSP 166	folic acid TABS 400 MCG 58	FRAGMIN SOLN 10000 UNIT/4ML, 95000 UNIT/3.8ML 15
FLUZONE 2024-2025 SUSY 166	folic acid-vitamin b6-vitamin b12 TABS 10 MG-800 MCG-115 MCG, 25 MG-2.5 MG-1 MG 59	FRAGMIN SOSY 15
FLUZONE HIGH-DOSE 2024-2025 SUSY 166	folic acid-vitamin b6-vitamin b12 TABS 25 MG-2.2 MG-1 MG 59	FREDS PHARMACY AUTOLET LANCING DEVICE MISC 69
FLUZONE HIGH-DOSE PF 2022- 2023 166	FOLIFLEX TABS 137	FREDS PHARMACY UNIFINE PENTIPS PEN NEEDLES 32GX4MM 93
FLUZONE HIGH-DOSE PF 2023- 2024 166	FOLITAB 500 59	FREDS PHARMACY UNIFINE PENTIPS PLUS 31GX5MM 93
FLUZONE QUADRIVALENT 2022- 2023 SUSP 166	FOLITIN-Z TABS 137	FREDS PHARMACY UNIFINE PENTIPS PLUS 31GX8MM 93
FLUZONE QUADRIVALENT 2022- 2023 SUSY 167	FOLOTYN 31	FREDS PHARMACY UNILET LANCETS SUPER THIN 30G 69
	FOLTABS 800 TABS 59	FREDS PHARMACY UNILET LANCETS ULTRA THIN 28G 70
	FOLTANX TABS 50	
	fondaparinux sodium 15	
	FORA CONTROL SOLUTION HIGH SOLN 69	
	FORA LANCETS 69	
	FORA LANCING DEVICE MISC .. 69	

FREEDAVITE TABS	137	LIBRE/READER/FLASH MONITORING SYSTEM	70	(mastocytosis)	55
FREEDOM ADAPTADERM	157	FREESTYLE UNISTICK II LANCETS	70	GAS-X EXTRA STRENGTH CHEW (simethicone)	54
FREEDOM DERMA SERUM	157	FROVA (frovatriptan succinate) .	128	gatifloxacin (ophth)	152
FREEDOM DERMA-D	157	frovatriptan succinate	128	GAVISCON SUSP (aluminum hydroxide-mag carb)	10
FREEDOM DERMA-N	157	FRUZAQLA	31	GAZYVA	31
FREEDOM PEG TROCHE BASE POWD	155	FT CENTURY ADULTS TABS ...	137	GELNIQUE GEL 10 %	165
FREESTYLE CONTROL SOLUTION HIGH/LOW LIQD	70	FT ELECTROLYTE SOLUTION SOLN	129	gemcitabine hcl SOLN	31
FREESTYLE CONTROL SOLUTION LIQD	70	FT HAIR SKIN & NAILS EXTRA STRENGTH TABS	137	gemcitabine hcl SOLR	31
FREESTYLE LANCETS	70	FT IMMUNE SUPPORT CHEW ..	138	GEMCITABINE HYDROCHLORIDE SOLN (gemcitabine hcl)	31
FREESTYLE LIBRE 14 DAY/READER/FLASH MONITORING SYSTEM	70	FT SALINE NASAL SPRAY SOLN	149	gemfibrozil TABS	25
FREESTYLE LIBRE 14 DAY/SENSOR/FLASH MONITORING SYSTEM	70	FULL KIT NEBULIZER SET MISC	122	GEMTESA	165
FREESTYLE LIBRE 2 PLUS/SENOSR/FLASH GLUCOSE MONITOR SYSTEM	70	FULPHILA	58	GENADEK STEP 1 CAPS	138
FREESTYLE LIBRE 2/READER/FLASH GLUCOSE MONITORING SYSTEM	70	FUROSCIX CTKT	51	GENADEK STEP 2 CAPS	138
FREESTYLE LIBRE 2/SENSOR/FLASH GLUCOSE MONITORING SYSTEM	70	furosemide SOLN OR 10 MG/ML, 40 MG/5ML	51	GENERESS FE (norethindrone & ethinyl estradiol-fe)	39
FREESTYLE LIBRE 3 PLUS/SENSOR/GLUCOSE MONITORING SYSTEM	70	furosemide TABS 20 MG	51	GENICIN VITA-Q TABS	143
FREESTYLE LIBRE 3/READER/GLUCOSE MONITORING SYSTEM	70	furosemide TABS 40 MG	51	GENOTROPIN CART SC	52
FREESTYLE LIBRE 3/SENSOR/GLUCOSE MONITORING SYSTEM	70	furosemide TABS 80 MG, 80 MG .	51	GENOTROPIN MINIQUICK PRSY	52
FREESTYLE		FYLNETRA	58	gentamicin sulfate (ophth) OINT .	152
		gabapentin (once-daily) TABS ...	160	gentamicin sulfate (ophth) SOLN .	152
		galantamine hydrobromide CP24	159	gentamicin sulfate (topical) CREA .	43
		galantamine hydrobromide SOLN	159	gentamicin sulfate (topical) OINT ..	43
		galantamine hydrobromide TABS	159	GENTEAL TEARS MODERATE PF (dextran 70-hypromellose)	150
		GARDASIL 9 SUSP	167	GENTEAL TEARS MODERATEPF (dextran 70-hypromellose)	150
		GARDASIL 9 SUSY	167	GENTEAL TEARS SEVERE DAY/NIGHT GEL	150
		GASTROCROM (cromolyn sodium		GENTEEL BUTTERFLY TOUCH LANCETS	70

GENTEEL CONTACT TIPS/BLUE MISC 70	GENTLE-LET LANCETS SAFETY STYLE/MEDIUM POINT 71	SYRINGE/U-100/0.3ML/29G X 1/2" . 93
GENTEEL CONTACT TIPS/CLEAR MISC 70	GENTLE-LET PLATFORMS 2.4MM MISC 71	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.3ML/30G X 1/2" . 93
GENTEEL CONTACT TIPS/GREEN MISC 70	GENTLE-LET PLATFORMS 3.0MM MISC 71	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.3ML/30G X 5/16" .....93
GENTEEL CONTACT TIPS/ORANGE MISC 70	GERI-FREEDA SENIOR FORMULA TABS .....138	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.3ML/31G X 5/16" .....93
GENTEEL CONTACT TIPS/RAINBOW MISC 70	GERI-TUSSIN SYRP 41	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/28G X 1/2" . 94
GENTEEL CONTACT TIPS/VIOLET MISC 70	GILENYA .....160	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/29G X 1/2" . 94
GENTEEL CONTACT TIPS/YELLOW MISC 70	glatiramer acetate SOSY 160	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/30G X 1/2" . 94
GENTEEL LANCING KIT/BUTTERFLY BLUE KIT 70	glimepiride 1 MG, 2 MG, 4 MG 20	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/0.5ML/31G X 5/16" .....94
GENTEEL NOZZLES MISC 70	glipizide TABS 5 MG, 10 MG 20	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/28G X 1/2" 94
GENTEEL PLUS LANCING DEVICE/BUFF BLACK MISC .....70	glipizide TB24 20	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/29G X 1/2" 94
GENTEEL PLUS LANCING DEVICE/BUTTERFLY BLUE MISC 70	glipizide-metformin hcl 16	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/30G X 1/2" 94
GENTEEL PLUS LANCING DEVICE/PLAYFUL PURPLE MISC 70	GLOBAL ALCOHOL PREP EASEPADS 81	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/31G X 5/16" .....94
GENTEEL PLUS LANCING DEVICE/PRINCESS PINK MISC ..70	GLOBAL EASE INJECT PEN NEEDLES 29GX12MM 93	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/28G X 1/2" 94
GENTEEL PLUS LANCING DEVICE/WILLOWY WHITE MISC .70	GLOBAL EASE INJECT PEN NEEDLES 31GX8MM 93	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/29G X 1/2" 94
GENTLE-LET GP LANCETS 70	GLOBAL EASE INJECT PEN NEEDLES 31GX5MM 93	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/30G X 1/2" 94
GENTLE-LET LANCETS GENERAL PURPOSE STYLE/FINE POINT ..70	GLOBAL EASY GLIDE INSULIN SYRINGE/0.3ML/31G X 15/64" ... 93	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/30G X 5/16" 94
GENTLE-LET LANCETS GENERAL PURPOSE STYLE/MEDIUM POINT 71	GLOBAL EASY GLIDE INSULIN SYRINGE/0.5ML/31G X 15/64" ... 93	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/31G X 5/16" 94
GENTLE-LET LANCETS SAFETY STYLE/FINE POINT .....71	GLOBAL EASY GLIDE INSULINSYRINGE/U-100/0.3ML/31G X 5/16" 93	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/31G X 5/16" 94
	GLOBAL EASY GLIDE PEN NEEDLES 32GX4MM 93	GLOBAL INJECT EASE INSULIN SYRINGE/U-100/1ML/30G X 1/2" 94
	GLOBAL INJECT EASE INSULIN	

GLOBAL INJECT EASE LANCETS 28G .....71	GLUCOPRO INSULIN SYRINGE/U- 100/0.5ML/30G X 1/2" .....94	GNP EASY TOUCH CONTROL SOLUTION HIGH & LOW LIQD ... 71
GLOBAL INJECT EASE LANCETS 30G .....71	GLUCOPRO INSULIN SYRINGE/U- 100/0.5ML/30G X 5/16" 94	GNP EASY TOUCH CONTROL SOLUTION HIGH/LOW SOLN ....71
GLOBAL INSULIN SYRINGE/U- 100/0.3ML/30G X 1/2" .....94	GLUCOPRO INSULIN SYRINGE/U- 100/0.5ML/31G X 5/16" 94	GNP INSULIN SYRINGE/0.3ML/29G X 1/2" .....94
GLOBAL INSULIN SYRINGES/U- 100/0.3ML/30GX5/16" .....94	GLUCOPRO INSULIN SYRINGE/U- 100/1ML/30G X 1/2" .....94	GNP INSULIN SYRINGE/0.3ML/30G X 5/16" .....94
GLOBAL LANCING DEVICE MISC 71	GLUCOPRO INSULIN SYRINGE/U- 100/1ML/30G X 5/16" 94	GNP INSULIN SYRINGE/0.3ML/31G X 5/16" .....94
GLOPERBA SOLN OR .....57	GLUCOPRO INSULIN SYRINGE/U- 100/1ML/31G X 5/16" 94	GNP INSULIN SYRINGE/0.5ML/28G X 1/2" .....94
GLUCAGEN HYPOKIT .....17	GLUCOSE CONTROL SOLUTION SOLN .....71	GNP INSULIN SYRINGE/0.5ML/29G X 1/2" .....94
glucagon (rdna) .....17	GLUCOTROL XL TB24 (glipizide) .20	GNP INSULIN SYRINGE/0.5ML/30G X 5/16" .....94
GLUCAGON EMERGENCY KIT (glucagon (rdna)) .....17	GLUMETZA TB24 (metformin hcl) .17	GNP INSULIN SYRINGE/0.5ML/31G X 5/16" .....94
GLUCAGON EMERGENCY KIT FOR LOW BLOOD SUGAR .....17	glutamine (sickle cell) 58	GNP INSULIN SYRINGE/1ML/29G X 1/2" 94
GLUCOCARD 01 CONTROL SOLUTION NORMAL/HIGH LIQD .71	glyburide micronized 1.5 MG, 3 MG, 6 MG 20	GNP INSULIN SYRINGE/1ML/30G X 5/16" .....95
GLUCOCARD EXPRESSION CONTROL SOLUTION LEVEL 1 SOLN .....71	glyburide TABS 20	GNP INSULIN SYRINGE/1ML/31G X 5/16" .....95
GLUCOCARD SHINE CONTROL SOLUTION LEVEL 1 SOLN 71	glyburide-metformin 16	GNP INSULIN SYRINGES/0.3ML/30GX5/16" ....95
GLUCOCOM HIGH CONTROL LIQD.....71	GLYCOPHOS .....130	GNP INSULIN SYRINGES/1/2ML/29GX1/2" 95
GLUCOCOM LANCETS 28G .....71	glycopyrrolate SOLN OR 1 MG/5ML . 163	GNP INSULIN SYRINGES/1ML/28GX1/2" 95
GLUCOCOM LANCETS 30G .....71	glycopyrrolate TABS 1 MG, 2 MG 163	GNP INSULIN SYRINGES/1ML/29GX1/2" 95
GLUCOCOM LANCETS 33G .....71	GLYNASE (glyburide micronized) 20	GNP INSULIN SYRINGES/1ML/29GX1/2" 95
GLUCOPRO INSULIN SYRINGE/U- 100/0.3ML/30G X 1/2" .....94	GLYXAMBI 16	GNP INSULIN SYRINGES/1ML/30GX5/16" .....95
GLUCOPRO INSULIN SYRINGE/U- 100/0.3ML/30G X 5/16" .....94	GNP ALCOHOL SWABS .....81	GNP INSULIN SYRINGES/1ML/29GX1/2" 95
GLUCOPRO INSULIN SYRINGE/U- 100/0.3ML/31G X 5/16" .....94	GNP CENTURY ADULT TABS ...138	GNP INSULIN SYRINGES/1ML/30GX5/16" .....95
GLUCOPRO INSULIN SYRINGE/U- 100/0.3ML/31G X 5/16" .....94	GNP CLICKFINE UNIVERSAL PEN NEEDLES 31GX1/4" 94	GNP INSULIN SYRINGES/3ML/31GX5/16" .....95

GNP LANCETS 21G	71	GOLYTELY SOLR (peg 3350-kcl-sod bicarb-sod chloride-sod sulfate) ...	60	GRANIX SOSY	59
GNP LANCETS THIN 26G	71	GOODSENSE CLICKFINE SAFETY PEN NEEDLE/31G X 3/16"	95	GRAPE SYRUP SYRP	155
GNP LANCING SYSTEM DEVICE MISC	71	GOODSENSE COLOR LANCETS MICRO-THIN 33G UNIVERSAL ..	71	griseofulvin microsize SUSP	22
GNP MULTI CHILDRENS CHEW 144		GOODSENSE ELECTROLYTE ADVANTAGE CARE SOLN	129	griseofulvin microsize TABS	22
GNP PRENATAL TABS	146	GOODSENSE LANCETS MICRO-THIN 33G	71	griseofulvin ultramicrosize	22
GNP STERILE LANCETS 28G ...	71	GOODSENSE LANCETS MICRO-THIN 33G UNIVERSAL	71	guaifenesin LIQD	41
GNP STERILE LANCETS 30G ...	71	GOODSENSE LANCETS MICRO-THIN 33G UNIVERSAL	71	guaifenesin SYRP	41
GNP STERILE LANCETS 33G ...	71	GOODSENSE LANCETS ULTRA-THIN 26G UNIVERSAL	71	guaifenesin TABS 200 MG	41
GNP THERAPEUTIC-M TABS ...	138	GOODSENSE LANCETS ULTRA-THIN 30G	71	guaifenesin-codeine SOLN	41
GNP ULTICARE PEN NEEDLES/31GX5/16"	95	GOODSENSE LANCETS ULTRA-THIN 30G UNIVERSAL	71	guaifenesin-codeine SYRP	41
GNP ULTICARE PEN NEEDLES/32GX 5/32"	95	GOODSENSE LANCING DEVICE MISC	71	guanfacine hcl	27
GNP ULTICARE PEN NEEDLES/32GX1/4"	95	GOODSENSE PEN NEEDLE/PENFINE CLASSIC/31G X 3/16"	95	GUARDIAN 4 GLUCOSE SENSOR .	71
GNP ULTICARE PEN NEEDLES31G X 5MM	95	GOODSENSE PEN NEEDLE/PENFINE CLASSIC/31G X 5/16"	95	GUARDIAN 4 TRANSMITTER KIT	71
GNP ULTIGUARD SAFEPACK/MICRO PEN NEEDLE/32GX4MM	95	GOODSENSE PEN NEEDLE/PENFINE CLASSIC/32G X 1/4"	95	GUARDIAN CONNECT TRANSMITTER	71
GNP ULTIGUARD SAFEPACK/MINI PEN NEEDLE/31GX5MM	95	GOODSENSE PEN NEEDLE/PENFINE CLASSIC/32G X 5/32"	95	GUARDIAN CONNECT TRANSMITTER KIT	72
GNP ULTIGUARD SAFEPACK/MINI PEN NEEDLE/32GX6MM	95	GRALISE TABS (gabapentin (once-daily))	160	GUARDIAN LINK 3 TRANSMITTER KIT	72
GNP ULTIGUARD SAFEPACK/SHORT PEN NEEDLE/31GX8MM	95	GRALISE TABS	160	GUARDIAN REAL-TIME CHARGER REPLACEMENT MISC	72
GNP ULTRA COMFORT INSULIN SYRINGE/1ML/28G X 1/2"	95	granisetron hcl TABS	21	GUARDIAN REAL-TIME REPLACEMENT MONITOR PEDIATRIC	72
GOCOVRI CP24	33	GRANIX SOLN	58	GUARDIAN REAL-TIME TEST PLUG REPLACEMENT MISC	72
GOJJI LANCING DEVICE/CLEAR CAP MISC	71			GUARDIAN SENSOR (3)	72
GOJJI STERILE LANCETS 30G ..	71			GUARDIAN SENSOR 3	72

0.5 MG/0.1ML	17	HALOG CREA (halcinonide)	47	NEEDLES/31G X 5/16"	96
GVOKE HYOPEN 1-PACK SOAJ 1 MG/0.2ML	17	HALOG OINT	47	HEALTHWISE UNIFINE PENTIPS PEN NEEDLES 32GX4MM	96
GVOKE HYOPEN 2-PACK SOAJ 0.5 MG/0.1ML	17	HALOG SOLN	47	HEALTHY ACCENTS AUTOLET IMPRESSION LANCING DEVICE MISC	72
GVOKE HYOPEN 2-PACK SOAJ 1 MG/0.2ML	17	HAVRIX	167	HEALTHY ACCENTS UNIFINE PENTIPS PEN NEEDLES 29GX12MM	96
GVOKE KIT SOLN	17	HEAD CARE PROACTIVE HEALTH TABS	138	HEALTHY ACCENTS UNIFINE PENTIPS PEN NEEDLES 31GX5MM	96
GVOKE PFS SOSY 0.5 MG/0.1ML 17		HEALTH CARE LANCING DEVICE MISC	72	HEALTHY ACCENTS UNIFINE PENTIPS PEN NEEDLES 31GX6MM	96
GVOKE PFS SOSY 1 MG/0.2ML ..	17	HEALTHWISE INSULIN SYRINGE/U-100/0.3ML/30G X 5/16"	95	HEALTHY ACCENTS UNIFINE PENTIPS PEN NEEDLES 31GX8MM	96
HADLIMA PUSHTOUCH SOAJ	3	HEALTHWISE INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	95	HEALTHY ACCENTS UNIFINE PENTIPS PEN NEEDLES 31GX8MM	96
HADLIMA SOSY	3	HEALTHWISE INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	95	HEALTHY ACCENTS UNIFINE PENTIPS PEN NEEDLES 32GX4MM	96
HAEMOLANCE	72	HEALTHWISE INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	95	HEALTHY ACCENTS UNILET LANCETS SUPER THIN 30G	72
HAEMOLANCE LOW FLOW LANCETS	72	HEALTHWISE INSULIN SYRINGE/U-100/1ML/30G X 5/16" 95		HEALTHY EYES SUPERVISION2 CAPS	138
HAEMOLANCE PLUS	72	HEALTHWISE INSULIN SYRINGE/U-100/1ML/31G X 5/16" 95		H-E-B IN CONTROL PEN NEEDLE 31GX3/16"	96
HAEMOLANCE PLUS HIGH FLOW . 72		HEALTHWISE MICRON PEN NEEDLES/32G X 5/32"	95	H-E-B IN CONTROL PEN NEEDLES 31GX5MM	96
HAEMOLANCE PLUS LOW FLOW . 72		HEALTHWISE MINI PEN NEEDLES 31GX6MM	95	H-E-B IN CONTROL PEN NEEDLES 31GX6MM	96
HAEMOLANCE PLUS MAX FLOW 72		HEALTHWISE PEN NEEDLES 29GX12MM	95	H-E-B IN CONTROL PEN NEEDLES 31GX8MM	96
HAEMOLANCE PLUS PEDIATRIC FLOW	72	HEALTHWISE SHORT PEN NEEDLES 31GX8MM	96	H-E-B IN CONTROL NEEDLES/NANO/32GX4MM	96
HAIR SKIN & NAILS ADVANCED FORMULA TABS	138	HEALTHWISE SHORT PEN NEEDLES/31G X 3/16"	96	H-E-B IN CONTROL UNIFINEPENTIPS PLUS 31GX1/4" . 96	
HAIR SKIN & NAILS TABS	138	HEALTHWISE SHORT PEN			
HAIR/SKIN/NAIIS CAPS	138				
halcinonide CREA	47				
halobetasol propionate CREA	47				
halobetasol propionate FOAM	47				
halobetasol propionate OINT	47				

H-E-B IN CONTROL UNIFINEPENTIPS PLUS 31GX3/16" .....96	HEMATRON-AF .....59 HEMAX .....59 HEMLIBRA .....57	HUMALOG JUNIOR KWIKPEN SOPN .....18 HUMALOG KWIKPEN SOPN 100 UNIT/ML .....18
H-E-B IN CONTROL UNIFINEPENTIPS PLUS 31GX5/16" .....96	heparin sodium (porcine) lock flush 10 UNIT/ML .....16	HUMALOG KWIKPEN SOPN 200 UNIT/ML .....18
H-E-B IN CONTROL UNIFINEPENTIPS PLUS 31GX5MM.....96	heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML ...16	HUMALOG MIX 50/50 KWIKPEN SUPN .....18
H-E-B IN CONTROL UNIFINEPENTIPS PLUS 32GX4MM.....96	HEPLISAV-B SOSY .....167	HUMALOG MIX 50/50 SUSP .....18
H-E-B IN CONTROL UNIFINEPENTIPS PLUS 32GX5/32" .....96	HIBERIX SOLR IJ .....165	HUMALOG MIX 75/25 KWIKPEN SUPN .....18
H-E-B IN CONTROL UNIFINEPENTIPS PLUS 33GX5/32" .....96	HIGH POTENCY MULTIVITAMIN TABS .....143	HUMALOG MIX 75/25 SUSP .....18
H-E-B INCONTROL ADVANCEDLANCING DEVICE MISC .....72	HIGH POTENCY MULTIVITAMIN/BETA-CAROTENE TABS .....138	HUMALOG SOCT .....18 HUMALOG SOLN IJ .....18
H-E-B INCONTROL ALCOHOL PADS .....81	HIGH POTENCY MULTIVITAMIN/FOLIC ACID TABS 138	HUMALOG TEMPO PEN SOPN ..18
H-E-B INCONTROL LANCETS MICRO THIN 33G .....72	HIPREX (methenamine hippurate) 29	HUMATIN .....2
H-E-B INCONTROL LANCETS SUPER THIN 30G .....72	HM COMPLETE MEN TABS .....138	HUMATROPE CART IJ .....52
H-E-B INCONTROL LANCETS ULTRA THIN 28G .....72	HM HAIR/SKIN/NAILS TABS .....138	HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT 80 MG/0.8ML .....3
H-E-B INCONTROL PEN NEEDLES 29GX12MM .....96	HM STERILE ALCOHOL PREP PADS .....81	HUMIRA PEN AJKT SC 40 MG/0.4ML, 40 MG/0.8ML, 80 MG/0.8ML .....3
HECTOROL SOLN (doxercalciferol) . 52	HM ULTICARE INSULIN SYRINGE/1ML/30G X 1/2" .....96	HUMIRA PEN-CD/UC/HS STARTER AJKT SC 40 MG/0.8ML, 80 MG/0.8ML .....3
HEMADY TABS .....40	HM ULTICARE INSULIN SYRINGE/U-100/0.3ML/31G X 5/16" .....96	HUMIRA PEN-PEDIATRIC UC STARTER PACK AJKT SC 80 MG/0.8ML .....3
HEMANGEOL SOLN OR .....36	HM ULTICARE MINI PEN NEEDLES/31G X 5MM (3/16") ...96	HUMIRA PEN-PS/UV STARTER AJKT SC 40 MG/0.8ML .....3
HEMATRON-AF (iron-docusate-b12- folic acid-vit c-vit e-copper-biotin) .59	HM ULTICARE SHORT PEN NEEDLES 31GX8MM .....96	HUMIRA PSKT .....3
	HORIZANT .....160	HUMULIN 70/30 KWIKPEN SUPN 18
	HULIO AJKT .....3	HUMULIN 70/30 SUSP .....19
	HULIO PSKT .....3	HUMULIN N KWIKPEN SUPN ....19

HUMULIN N SUSP	19	hydrocortisone (rectal) EX 1 %	10	hydromorphone hcl TABS 8 MG	7
HUMULIN R SOLN IJ	19	hydrocortisone (rectal) EX 2.5 % ..	10	hydromorphone hcl TB24	7
HUMULIN R U-500 (CONCENTRATED) SOLN SC	19	hydrocortisone (topical) CREA	47	HYDROUS EMULSIFIED BASE	157
HUMULIN R U-500 KWIKPEN SOPN SC	19	hydrocortisone (topical) LOTN 2.5 % .	47	hydroxychloroquine sulfate	29
HYCAMTIN CAPS	33	hydrocortisone (topical) OINT 1 %, 2.5 %	47	hydroxyprogesterone caproate (antineoplastic)	32
hydralazine hcl SOLN	28	hydrocortisone (topical) SOLN 1 %	47	hydroxyurea	33
hydralazine hcl TABS 10 MG, 25 MG, 50 MG	28	hydrocortisone acetate (topical) CREA 1 %	47	hydroxyzine hcl SYRP	12
hydralazine hcl TABS 100 MG	28	hydrocortisone acetate (topical) OINT	47	hydroxyzine hcl TABS	12
HYDRALYTE FREEZER POPS SOLN	129	hydrocortisone acetate vaginal ..	168	HYFTOR	49
HYDRALYTE SOLN	129	hydrocortisone butyrate CREA	47	HYLAZINC TABS	138
HYDREA (hydroxyurea)	33	hydrocortisone butyrate hydrophilic lipo base	47	hyoscyamine sulfate ELIX	163
HYDROCERIN CREA	49	hydrocortisone butyrate LOTN	47	hyoscyamine sulfate SOLN OR 0.125 MG/ML	163
hydrochlorothiazide CAPS	51	hydrocortisone butyrate OINT	47	hyoscyamine sulfate SUBL 0.125 MG	163
hydrochlorothiazide TABS	51	hydrocortisone butyrate SOLN	47	hyoscyamine sulfate TABS 0.125 MG	163
HYDROCIL INSTANT POWD (psyllium)	60	HYDROCORTISONE CREA	47	hyoscyamine sulfate TB12 0.375 MG 163	
hydrocodone bitartrate CP12	7	hydrocortisone sod succinate 100 MG	40	hyoscyamine sulfate TDBP 0.125 MG	163
hydrocodone bitartrate T24A	7	hydrocortisone TABS	40	HYPERSAL NEBU (sodium chloride (inhalant))	41
hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML	9	hydrocortisone vaginal	168	HYPERSAL NEBU	41
hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG, 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG	9	hydrocortisone valerate CREA	47	HYPOLANCE AST LANCING KIT KIT	72
hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG, 7.5 MG-200 MG .	9	hydrocortisone valerate OINT	47	HYRIMOZ CROHN'S DISEASE AND ULCERATIVE COLITIS STARTER PACK SOAJ	3
HYDROCORT LOTION COMPLETEKIT THPK	47	hydrocortisone w/acetic acid	155	HYRIMOZ PEDIATRIC CROHNSDISEASE STARTER PACK SOSY	3
		hydromorphone hcl LIQD	7		
		HYDROMORPHONE HCL SUPP ...	7		
		hydromorphone hcl TABS 2 MG	7		
		hydromorphone hcl TABS 4 MG	7		

HYRIMOZ PEDIATRIC CROHN'S DISEASE STARTER PACK SOSY	3	vitamin b12-folic acid)	59	IMODIUM A-D TABS (loperamide hcl)	21
HYRIMOZ PLAQUE PSORIASIS/UVEITIS STARTER PACK SOAJ	3	icosapent ethyl	24	IMOVAX RABIES (H.D.C.V.) SUSR 167	
HYRIMOZ PLAQUE PSORIASIS STARTER PACK SOAJ	3	IDACIO (2 PEN) AJKT	3	IMPEKLO LOTN	47
HYRIMOZ PLAQUE PSORIASIS STARTER PACK SOAJ . 3		IDACIO (2 SYRINGE) PSKT	3	IMURAN TABS (azathioprine)	131
HYRIMOZ SENSOREADY PENS SOAJ	3	IDACIO STARTER PACKAGE FOR CROHNS DISEASE AJKT	3	IN TOUCH GLUCOSE CONTROL SOLUTION SOLN	72
HYRIMOZ SOAJ	3	IDACIO STARTER PACKAGE FOR PLAQUE PSORIASIS AJKT	3	IN TOUCH LANCING DEVICE MISC 72	
HYRIMOZ SOSY	3	IDHIFA	32	IN TOUCH STERILE LANCETS 30G 72	
HYSINGLA ER T24A	7	IGALMI FILM	60	INBRIJA CAPS	33
HYVEE ADVANCED ANTACID MAXIMUM STRENGTH SUSP (alum & mag hydrox-simethicone)	10	IHEALTH CONTROL SOLUTION LIQD	72	IN-CHECK DIAL INSPIRATORY FLOW TRAINER DEVI	122
HY-VEE LANCETS	72	IHEALTH LANCING DEVICE MISC 72		IN-CHECK INSPIRATORY FLOWMETER/NASAL WITH MASK DEVI	122
HY-VEE THIN LANCETS	72	ILEVRO	154	IN-CHECK INSPIRATORY FLOWMETER/ORAL DEVI	122
HYZAAR (losartan potassium & hydrochlorothiazide)	27	ILUMYA	45	INCONTROL ULTICARE MINI PEN NEEDLES/31G X 6MM	96
ibandronate sodium SOLN	51	IMBRUVICA SUSP	32	INCONTROL ULTICARE MINI PEN NEEDLES/31GX8MM	96
ibandronate sodium TABS	52	IMCIVREE	1	INCONTROL ULTICARE MINI PEN NEEDLES/32G X 4MM	96
IBSRELA	56	imiquimod 5 %	48	INCRUSE ELLIPTA	12
ibuprofen CAPS	4	IMITREX 5 MG/ACT, 20 MG/ACT (sumatriptan)	128	indapamide TABS 1.25 MG, 2.5 MG .	51
ibuprofen CHEW	4	IMITREX STATDOSE REFILL SOCT (sumatriptan succinate)	128	INDERAL LA CP24 (propranolol hcl) .	36
ibuprofen SUSP	4	IMITREX STATDOSE SYSTEM SOAJ (sumatriptan succinate)	128	INDERAL XL	36
ibuprofen TABS	4	IMITREX TABS (sumatriptan succinate)	128	INDOCIN SUSP (indomethacin)	5
ibuprofen-acetaminophen TABS	4	IMMUNE ESSENTIALS DAILY CAPS	138	indomethacin CAPS 25 MG, 50 MG 5	
ibuprofen-famotidine	4	IMMUNE SUPPORT CHEW	138		
ICAPS AREDS FORMULA TABS 138		IMODIUM A-D CAPS (loperamide hcl)	21		
ICAR-C (iron-vitamin c)	59	IMODIUM A-D SOLN (loperamide hcl)	21		
ICAR-C PLUS TABS (iron-vitamin c-					

indomethacin CPCR	5	INSULIN GLARGINE SOLOSTAR SOPN	19	INSULIN SYRINGE/NEEDLE 0.5ML/29G X 1/2"	97
indomethacin SUSP	5	INSULIN GLARGINE-YFGN SOLN 19		INSULIN SYRINGE/NEEDLE 0.5ML/30G X 5/16"	97
INFANRIX	162	INSULIN GLARGINE-YFGN SOPN 19		INSULIN SYRINGE/NEEDLE 0.5ML/31G X 5/16"	97
INFANTS ADVIL SUSP (ibuprofen) .5		INSULIN LISPRO JUNIOR KWIKPEN SOPN	19	INSULIN SYRINGE/NEEDLE 1ML/29G X 1/2"	97
INFINITY CONTROL SOLUTION HIGH SOLN	72	INSULIN LISPRO PROTAMINE/INSULIN LISPRO KWIKPEN SUPN	19	INSULIN SYRINGE/NEEDLE 1ML/30G X 5/16"	97
INGREZZA CAPS	159	INSULIN LISPRO SOLN IJ	19	INSULIN SYRINGE/U- 100/0.3ML/29G X 1/2"	97
INGREZZA CPPK	159	INSULIN SYRINGE/0.3ML/30G X 5/16"	96	INSULIN SYRINGE/U- 100/0.5ML/29G X 1/2"	97
INNOPRAN XL	36	INSULIN SYRINGE/0.3ML/31G X 5/16"	96	INSULIN SYRINGE/U-100/1ML/29G X 1/2"	97
INNOSPIRE REPLACEMENT FILTER MISC	122	INSULIN SYRINGE/0.5ML/27G X 1/2"	97	INSULIN SYRINGE/U-100/1ML/30G X 5/16"	97
INPEFA	37	INSULIN SYRINGE/0.5ML/28G X 1/2"	97	INSULIN SYRINGE/U-100/1ML/31G X 5/16"	97
INQOVI	32	INSULIN SYRINGE/0.5ML/30G X 5/16"	97	INSULIN SYRINGES 0.3ML/31G X 1/4"	97
INSPIREASE DRUG DELIVERYSYSTEM MISC	122	INSULIN SYRINGE/0.5ML/31G X 5/16"	97	INSULIN SYRINGES/U- 100/0.5ML/27GX1/2"	97
INSUL-CAP MISC	72	INSULIN SYRINGE/1ML/28G X 1/2" 97		INSULIN SYRINGES/U- 100/0.5ML/28GX1/2"	97
INSUL-EZE MISC	72	INSULIN SYRINGE/1ML/29G X 1/2" 97		INSULIN SYRINGES/U- 100/0.5ML/29GX1/2"	97
INSULIN ASPART FLEXPEN SOPN . 19		INSULIN SYRINGE/1ML/30G X 5/16" .....97		INSULIN SYRINGES/U- 100/0.5ML/30GX5/16"	97
INSULIN ASPART PENFILL SOCT 19		INSULIN SYRINGE/NEEDLE 0.3ML/30G X 5/16"	97	INSULIN SYRINGES/U- 100/0.5ML/31GX5/16"	97
INSULIN ASPART PROTAMINE/INSULIN ASPART FLEXPEN SUPN	19	INSULIN SYRINGE/NEEDLE 0.3ML/31G X 5/16"	97	INSULIN SYRINGES/U- 100/1ML/27GX1/2"	97
INSULIN ASPART PROTAMINE/INSULIN ASPART SUSP	19				
INSULIN ASPART SOLN IJ	19				
INSULIN DEGLUDEC FLEXTOUCH SOPN	19				
INSULIN DEGLUDEC SOLN	19				
INSULIN GLARGINE MAX SOLOSTAR SOPN	19				
INSULIN GLARGINE SOLN	19				

INSULIN SYRINGES/U- 100/1ML/28GX1/2"	97	folic acid CAPS	59	JANSSEN COVID-19 VACCINE	167
INSULIN SYRINGES/U- 100/1ML/29GX1/2"	97	iron-docusate-b12-folic acid-vit c-vit e-copper-biotin	59	JANUMET TABS	17
INSULIN SYRINGES/U- 100/1ML/30GX1/2"	97	iron-vitamin c	59	JANUMET XR TB24	17
INSULIN SYRINGES/U- 100/1ML/31GX5/16"	97	iron-vitamin c-vitamin b12-folic acid TABS	59	JANUVIA	18
INSUPEN 29G X 12MM	97	isoniazid SYRP	30	JARDIANCE	20
INSUPEN 31G X 5MM	97	isoniazid TABS	30	JAYPIRCA	32
INSUPEN 31G X 8MM	97	ISOPTO ATROPINE SOLN	152	JENTADUETO TABS	17
INSUPEN 32G X 4MM	97	ISORDIL TITRADOSE TABS 5 MG (isosorbide dinitrate)	11	JENTADUETO XR TB24	17
INSUPEN 33GX4MM	97	isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG	11	JESDUVROQ	59
INSUPEN PEN NEEDLES 32G X4MM	97	isosorbide mononitrate TABS	11	JUBLIA	43
INSUPEN SENSITIVE 32GX6MM	97	isosorbide mononitrate TB24	11	JUST 4 KIDZ MULTIVITAMIN+PROBIOTIC CHEW	144
INSUPEN SENSITIVE 32GX8MM	98	isotretinoin 10 MG, 20 MG, 30 MG, 40 MG	42	JYLAMVO SOLN	31
INSUPEN ULTRAFIN 30GX8MM	98	isradipine CAPS	36	JYNARQUE TABS	53
INSUPEN ULTRAFIN 31GX6MM	98	ISTALOL SOLN (timolol maleate (ophth))	151	JYNARQUE TBPK	53
INSUPEN ULTRAFIN 31GX8MM	98	itraconazole CAPS	23	JYNNEOS	167
INTRON A SOLR 10000000 UNIT	33	itraconazole SOLN	23	KALYDECO PACK	161
INVOKAMET TABS	17	ivermectin (pediculicide)	49	KAMELEON LUBRICATED MISC	62
INVOKAMET XR TB24	17	ivermectin	11	KAPSPARGO SPRINKLE CS24 ..	35
INVOKANA	20	IWILFIN	33	KAPVAY TB12 (clonidine hcl (adhd)) 1	
IOPIDINE	152	IXCHIQ	167	KATERZIA	36
IPOL INACTIVATED IPV	167	IXIARO	167	KAZANO (alogliptin-metformin hcl) 17	
ipratropium bromide (nasal)	149	IYUZEH SOLN	154	KENALOG AERS (triamcinolone acetonide (topical))	47
ipratropium bromide SOLN 0.02 %	12	J & J GERM FILTER MASK	116	KENALOG-10 SUSP	40
ipratropium-albuterol SOLN	14	JAKAFI	32	KENALOG-40 SUSP (triamcinolone acetonide)	40
irbesartan	26	JALYN (dutasteride-tamsulosin hcl) . 57		KERENDIA	53
irbesartan-hydrochlorothiazide	27			KERYDIN (tavaborole)	43
iron polysaccharide complex-vit b12-					

KESIMPTA	160	SPERMICIDE/LUBRICATED MISC 62	KLOXXADO LIQD	21
ketoconazole (topical) CREA	43	KIMONO PS LUBRICATED MISC	KMART VALU PLUS INSULIN SYRINGE/0.5ML/29G	98
ketoconazole (topical) FOAM	43	62	KMART VALU PLUS INSULIN SYRINGE/0.5ML/30G	98
ketoconazole (topical) SHAM 2 %	.43	KIMONO PS PLUS SPERMICIDE/LUBRICATED MISC	KMART VALU PLUS INSULIN SYRINGE/1ML/29G	98
ketoconazole	23	62	KMART VALU PLUS INSULIN SYRINGE/1ML/30G	98
KETODAN KIT	43	KIMONO SENSATION LUBRICATED MISC	KMART VALU PLUS INSULIN SYRINGE/1ML/30G	98
ketoprofen CAPS 50 MG	5	62	KN95 DISPOSABLE MASK FORCIVIL USE	116
ketoprofen CP24	5	KIMONO SENSATION PLUS SPERMICIDE LUBRICATED MISC	KN95 MEDICAL PROTECTIVE FACE MASK	116
ketorolac tromethamine (ophth) 0.4 %	154	62	KOKO PEAK PRO REPLACEMENT PLASTIC MOUTHPIECE MISC	122
ketorolac tromethamine (ophth) 0.5 %	154	KIMONO SPECIAL DEVI	KOMBIGLYZE XR (saxagliptin- metformin hcl)	17
KETOROLAC TROMETHAMINE SOLN NA 15.75 MG/SPRAY	5	KINDERLYTE PREMAX SOLN ..	KONVOMEPEP SUSR	164
ketorolac tromethamine TABS	5	129	KP PRENATAL MULTIVITAMINS TABS	146
ketotifen fumarate (ophth) 0.035 % 154		KINDERLYTE SOLN	K-PAX IMMUNE SUPPORT FORMULA PROFESSIONAL STRENGTH TABS	138
KEVZARA SOAJ	4	129	K-PHOS NO 2	56
KEVZARA SOSY	4	KINNEY LANCETS	K-PHOS TABS (potassium phosphate monobasic)	130
KEYFOLIC TABS	138	72	KRAZATI	32
KEYLOSA TABS	138	KINNEY THIN LANCETS	KRINTAFEL	30
KEYTRUDA	31	72	KROGER AUTOLET LANCING DEVICE MISC	72
KIMONO COLORS DEVI	62	KINRAY INSULIN SYRINGE PREFERRED PLUS/0.3ML/31G X 5/16"	KROGER HEALTHPRO GLUCOSE CONTROL SOLUTION/HIGH/LOW LIQD	72
KIMONO LUBRICATED MISC	62	98	KROGER HEALTHPRO TWIST LANCETS/26G	72
KIMONO MAXX/LARGE FLARE MISC	62	KINRAY INSULIN SYRINGE PREFERRED PLUS/0.5ML/31G X 5/16"		
KIMONO MICRO THIN MISC	62	98		
KIMONO MICRO THIN PLUS SPERMICIDE LUBRICATED MISC 62		KINRAY INSULIN SYRINGE PREFERRED PLUS/1ML/31G X 5/16"		
KIMONO PLUS SPERMICIDE LUBRICATED MISC	62	98		
KIMONO PLUS		KINRAX SUSY		

KROGER INSULIN SYRINGE/0.3ML/29G X 1/2"	98	MISC	73
KROGER INSULIN SYRINGE/0.3ML/30G X 5/16"	98	KROGER PEN NEEDLES/31G X1/4" LANCET DEVICE WITH EJECTOR MISC	73
KROGER INSULIN SYRINGE/0.3ML/31G X 5/16"	98	KROGER PEN NEEDLES/31G X3/16"	98
KROGER INSULIN SYRINGE/0.5ML/29G X 1/2"	98	KROGER PEN NEEDLES/31G X5/16"	98
KROGER INSULIN SYRINGE/0.5ML/30G X 5/16"	98	KROGER PEN NEEDLES/32G X5/32"	98
KROGER INSULIN SYRINGE/0.5ML/31G X 5/16"	98	KROGER PEN NEEDLES/33G X5/32"	98
KROGER INSULIN SYRINGE/1ML/29G X 1/2"	98	K-TAB TBCR 10 MEQ, 20 MEQ (potassium chloride)	131
KROGER INSULIN SYRINGE/1ML/30G X 5/16"	98	K-Y ME & YOU EXTRA LUBRICATED DEVI	63
KROGER INSULIN SYRINGE/1ML/31G X 5/16"	98	K-Y ME & YOU INTENSE DEVI	63
KROGER LANCETS	72	KYNMOBI FILM	34
KROGER LANCETS 21G	72	KYNMOBI TITRATION KIT KIT	33
KROGER LANCETS MICRO THIN33G	72	labetalol hcl TABS	35
KROGER LANCETS SUPER THIN 72	72	lactic acid (ammonium lactate) CREA	48
KROGER LANCETS THIN	72	lactic acid (ammonium lactate) LOTN 12 %	48
KROGER LANCETS THIN 26G	73	lactobacillus rhamnosus (gg) CAPS 50 MG	21
KROGER LANCETS ULTRATHIN30G	73	lactulose (encephalopathy)	56
KROGER LANCING DEVICE MISC 73	73	lactulose SOLN	60
KROGER PEN NEEDLES 29G X12MM	98	LAMISIL AT CREA (terbinafine hcl (topical))	43
KROGER PEN NEEDLES 31G X8MM	98	LAMISIL AT JOCK ITCH CREA (terbinafine hcl (topical))	43
KROGER PEN NEEDLES 31GX1/4" LANCET DEVICE ADJUSTABLE	98	lamivudine (hbv) TABS	35
		LAMZEDE	52
		LANCET DEVICE WITH EJECTOR MISC	73
		LANCET TRANSPORTER CASE MISC	73
		LANCETS	73
		LANCETS 30G	73
		LANCETS 30G TWIST TOP	73
		LANCETS 30G/TWIST TOP	73
		LANCETS 33G EXTRA FINE	73
		LANCETS 33G UNIVERSAL DESIGN	73
		LANCETS MICRO THIN 33G	73
		LANCETS SUPER THIN 28G	73
		LANCETS THIN	73
		LANCETS ULTRA THIN	73
		LANCETS ULTRA THIN 30G	73
		LANCING DEVICE MISC	73
		LANOXIN TABS 125 MCG, 250 MCG (digoxin)	37
		lansoprazole CPDR 15 MG	163
		lansoprazole CPDR 30 MG	163
		lansoprazole TBDD	163
		lanthanum carbonate CHEW	56
		LANTUS SOLN	19
		LANTUS SOLOSTAR SOPN	19
		LANZO MISC	73
		LASIX TABS 20 MG (furosemide)	51
		LASIX TABS 40 MG (furosemide)	51
		LASIX TABS 80 MG (furosemide)	51
		LASTACAFT	154

latanoprost SOLN .....154	PENTIPS/NANO/32GX5/32" .....99	levofloxacin TABS 250 MG, 500 MG . 54
LATANOPROST SOLN .....154	LEADER UNIFINE PENTIPS/PLUS/32GX5/32" .....99	levofloxacin TABS 750 MG 54
LAZCLUZE .....31	leflunomide .....5	levonorgestrel & eth estradiol TABS 39
L-CITRULLINE .....38	lenalidomide .....131	levonorgestrel (emergency oc) 1.5 MG 39
LEADER ADVANCED LANCING DEVICE MISC 73	LESCOL XL TB24 (fluvastatin sodium) .....25	levonorgestrel-eth estradiol (triphasic) .....39
LEADER INSULIN SYRINGE/0.3ML/29G X 1/2" .....98	LETAIRIS (ambrisentan) .....37	levonorgestrel-ethinyl estradiol (91- day) 0.03 MG-0.15 MG 39
LEADER INSULIN SYRINGE/0.3ML/30G X 5/16" ....98	letrozole .....32	levonorgestrel-ethinyl estradiol (continuous) 39
LEADER INSULIN SYRINGE/0.3ML/31G X 5/16" ....98	leucovorin calcium TABS 33	levorphanol tartrate TABS .....7
LEADER INSULIN SYRINGE/0.5ML/28G X 1/2" .....98	LEUKERAN .....30	levothyroxine sodium CAPS 13 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG, 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG .....162
LEADER INSULIN SYRINGE/0.5ML/29G X 1/2" .....99	LEUKINE SOLR IJ .....59	LEVOTHYROXINE SODIUM SOLR IV (levothyroxine sodium) 162
LEADER INSULIN SYRINGE/0.5ML/30G X 5/16" ....99	LEUPROLIDE ACETATE INJ .....32	levothyroxine sodium SOLR IV ...162
LEADER INSULIN SYRINGE/0.5ML/31G X 5/16" ....99	leuprolide acetate KIT IJ 1 MG/0.2ML.....32	levothyroxine sodium TABS .....162
LEADER INSULIN SYRINGE/1ML/28G X 1/2" .....99	levamloprolol hcl 14	LEVSIN TABS (hyoscyamine sulfate) .....163
LEADER INSULIN SYRINGE/1ML/29G X 1/2" .....99	levamloprolol tartrate .....14	LEVSIN/SL SUBL (hyoscyamine sulfate) .....163
LEADER INSULIN SYRINGE/1ML/30G X 5/16" .....99	levamlodipine maleate 36	LEXETTE FOAM (halobetasol propionate) .....47
LEADER INSULIN SYRINGE/1ML/31G X 5/16" .....99	LEVBID TB12 (hyoscyamine sulfate) 163	LIALDA TBEC (mesalamine) 55
LEADER UNIFINE PENTIPS PLUS/MINI/31GX3/16" .....99	LEVEMIR FLEXPEN SOPN 19	LIBERTY CONTROL SOLUTION HIGH SOLN .....73
LEADER UNIFINE PENTIPS PLUS/SHORT/31GX5/16" .....99	LEVEMIR FLEXTOUCH SOPN ....19	LIBERTY GLUCOSE CONTROL MID SOLN .....73
LEADER UNIFINE PENTIPS/MINI/31GX3/16" .....99	LEVEMIR SOLN 19	LIBERTY MEDICAL LANCETS 30G . 73
LEADER UNIFINE	LEVETIRACETAM/SODIUM CHLORIDE .....16	
	levobunolol hcl 0.5 %151	
	levocetirizine dihydrochloride SOLN 24	
	levocetirizine dihydrochloride TABS 24	
	levofloxacin (ophth) 0.5 %152	
	levofloxacin SOLN OR .....54	

LIBERTY MINI LANCING DEVICE MISC	73	LIOPEN ULTRA BASE	157	LITETOUCH INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	99
LIBERVANT FILM	16	LIPOSOMAL HEAVY	157	LITETOUCH INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	99
LICART PT24	44	LIPOSOMAL REGULAR	157	LITETOUCH INSULIN SYRINGE/U-100/1ML/28G X 1/2"	99
lidocaine hcl (mouth-throat) 2 % ..	132	LIPOTRIAD TABS (vitamins w/ lipotropics)	148	LITETOUCH INSULIN SYRINGE/U-100/1ML/29G X 1/2"	99
lidocaine hcl CREA 3 %	49	LIQREV SUSP	37	LITETOUCH INSULIN SYRINGE/U-100/1ML/30G X 5/16"	99
lidocaine hcl GEL 2 %	49	liraglutide	18	LITETOUCH INSULIN SYRINGE/U-100/1ML/31G X 5/16"	99
lidocaine hcl PRSY	49	lisinopril & hydrochlorothiazide ...	27	LITETOUCH LANCETS MICRO THIN 33G	73
lidocaine OINT	49	lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG	26	LITETOUCH MASK LARGE MISC 122	
lidocaine PTCH 4 %	49	LITE TOUCH LANCETS	73	LITETOUCH MASK MEDIUM MISC . 122	
lidocaine PTCH 5 %	49	LITE TOUCH LANCING PEN MISC 73		LITETOUCH MASK SMALL MISC 122	
lidocaine-prilocaine CREA	49	LITETOUCH INSULIN PEN NEEDLES/32G X 4MM/MINI	99	LITETOUCH PEN NEEDLES 29GX12.7MM	99
LIDOCARE ARM/NECK/LEG PTCH (lidocaine)	49	LITETOUCH INSULIN SYRINGE/0.3ML/29G X 1/2"	99	LITETOUCH PEN NEEDLES 31G X 6MM	100
LIDOCARE BACK/SHOULDER PTCH (lidocaine)	49	LITETOUCH INSULIN SYRINGE/0.3ML/30G X 5/16"	99	LITETOUCH PEN NEEDLES 31G X 6MM/ULTRA SHORT	100
LIDODERM PTCH (lidocaine)	49	LITETOUCH INSULIN SYRINGE/0.5ML/30G X 5/16"	99	LITETOUCH PEN NEEDLES 31GX8MM SHORT	100
LIDOZO	49	LITETOUCH INSULIN SYRINGE/0.5ML/31G X 5/16"	99	LITETOUCH PEN NEEDLES/31G X 3/16"	100
LIKMEZ SUSP	28	LITETOUCH INSULIN SYRINGE/0.5ML/31G X 5/16"	99	LITETOUCH PEN NEEDLES/31G X 5MM/MINI	100
linezolid SUSR	29	LITETOUCH INSULIN SYRINGE/1ML/30G X 5/16"	99	LITETOUCH PEN NEEDLES/31G X 8MM/SHORT	100
linezolid TABS	29	LITETOUCH INSULIN SYRINGE/U-100/0.5ML/28G X 1/2"	99	LITFULO	48
LINZESS	56	LITETOUCH INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	99	lithium	34
liothyronine sodium SOLN	162				
liothyronine sodium TABS	162				
LIP BALM BASE	157				
LIPITOR TABS (atorvastatin calcium)	25				
LIPO CREAM BASE	157				
LIPOCREAM BASE	157				
LIPOFEN CAPS (fenofibrate)	25				
LIOPEN ABSORPTION ENHANCING BASE	157				

LITTLE REMEDIES SALINE SPRAY/DROPS SOLN	149	loperamide hcl SOLN 1 MG/7.5ML	21	LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (amlodipine besylate-benazepril hcl) .	28
LIVALO (pitavastatin calcium)	26	loperamide hcl SUSP	21	LOTRIMIN AF CREA (clotrimazole (topical))	44
LIVE BETTER ADVANCED LANCING DEVICE MISC	73	loperamide hcl TABS	21	LOTRIMIN AF JOCK ITCH CREA (clotrimazole (topical))	43
LIVE BETTER LANCET SUPERTHIN 30G	73	LOPERAMIDE HYDROCHLORIDE SUSP	21	LOTRIMIN ULTRA (butenafine hcl)	44
LIVE BETTER LANCET ULTRATHIN 28G	73	LOPID TABS (gemfibrozil)	25	LOTRONEX (alosetron hcl)	56
LIVER DETOX TABS	138	LOPRESSOR TABS (metoprolol tartrate)	35	lovastatin TABS	26
LIVMARLI	55	LOPROX	43	LOVAZA (omega-3-acid ethyl esters)	24
LIVTENCITY	35	LOPROX CREA (ciclopirox olamine) .	43	LOVENOX SOLN IJ 300 MG/3ML (enoxaparin sodium)	16
L-METHYL-B6-B12 TABS	50	LOPROX KIT	43	LOVENOX SOSY (enoxaparin sodium)	16
LOCOID LIPOCREAM	47	LOPROX SHAMPOO SHAM (ciclopirox)	43	lubiprostone	55
LOCOID LOTN (hydrocortisone butyrate)	47	LOPROX SUSP (ciclopirox olamine) .	43	LUCEMYRA (lofexidine hcl)	159
LODINE TABS (etodolac)	5	LOQTORZI	31	luliconazole	44
LODOSYN (carbidopa)	33	loratadine CHEW	24	LUMAKRAS	32
lofexidine hcl	159	loratadine SOLN	24	LUMIGAN SOLN 0.01 %	154
LOMAIRA TABS	1	loratadine TABS	24	LUNG PERFORMANCE PEAK FLOW METER	122
LOMOTIL TABS (diphenoxylate w/ atropine)	21	LOREEV XR CS24	12	LUPRON DEPOT (1-MONTH) KIT IM 7.5 MG	32
LONGS INSULIN SYRINGE/0.5ML/31G X 5/16" ...	100	L-ORNITHINE HYDROCHLORIDE	38	LUPRON DEPOT (3-MONTH) KIT IM 22.5 MG	32
LONGS LANCETS STANDARD ..	73	L-ORNITHINE POWD	150	LUPRON DEPOT (4-MONTH) IM .	32
LONGS LANCETS THIN	73	losartan potassium & hydrochlorothiazide	27	LUPRON DEPOT (6-MONTH) IM .	32
LONGS LANCETS ULTRA THIN .	73	losartan potassium	26	LUTEIN PLUS/ZEAXANTHIN TABS .	138
LONHALA MAGNAIR REFILL KIT SOLN	12	LOTENSIN 10 MG, 20 MG, 40 MG (benazepril hcl)	26	LUXIQ FOAM (betamethasone valerate)	47
LONHALA MAGNAIR STARTER KIT SOLN	12	LOTENSIN HCT 12.5 MG-10 MG, 12.5 MG-20 MG, 25 MG-20 MG (benazepril & hydrochlorothiazide)	28		
LONSURF	32	loteprednol etabonate SUSP 0.2 %	153		
loperamide hcl CAPS	21				

LUZU (luliconazole)	44	MG	129	VORTEX/TODDLER/LADYBUG	123
LYFGENIA	58	magnesium hydroxide SUSP 7.75 %, 400 MG/5ML, 1200 MG/15ML, 2400 MG/30ML	61	MASONATAL TABS	146
LYSODREN	32	magnesium oxide (laxative)	61	MATULANE	33
LYTGOBI	32	magnesium oxide (mg supplement) TABS 241.5 MG, 400 MG, 500 MG	129	MAVENCLAD	160
LYUMJEV KWIKPEN SOPN	19	magnesium oxide TABS 400 MG	11	MAXALT TABS 10 MG (rizatriptan benzoate)	128
LYUMJEV SOLN	19	magnesium oxide TABS 420 MG	11	MAXALT-MLT TBDP 10 MG (rizatriptan benzoate)	128
LYUMJEV TEMPO PEN SOPN ...	19	MAGNESIUM OXIDE TABS	129	MAXALCOMFORT II PEN NEEDLES/31G X 1/4"	100
LYVISPAH PACK	149	MAGNESIUM SULFATE IJ 50 %	130	MAXI-COMFORT INSULIN SYRINGE/U-100/0.5ML/28GX1/2"	100
MACROBID (nitrofurantoin monohyd macro)	29	MAGNESIUM SULFATE IN D5W (magnesium sulfate in dextrose)	130	MAXI-COMFORT INSULIN SYRINGE/U-100/1ML/28GX1/2"	100
MACRODANTIN 50 MG, 100 MG (nitrofurantoin macrocrystal)	29	magnesium sulfate in dextrose	130	MAXICOMFORT INSULIN SYRINGES 27G X 1/2"	100
MAGELLAN INSULIN SAFETY SYRINGE/U-100/0.3ML/29G X 1/2"	100	MAGNESIUM SULFATE IV (magnesium sulfate)	130	MAXITROL OINT (neomycin-polymy-dexameth)	153
MAGELLAN INSULIN SAFETY SYRINGE/U-100/0.3ML/30G X 5/16"	100	magnesium sulfate IV	129	MAXITROL SUSP (neomycin-polymy-dexameth)	153
MAGELLAN INSULIN SAFETY SYRINGE/U-100/0.5ML/29G X 1/2"	100	magnesium TABS 100 MG	130	MAXX LUBRICATED MISC	63
MAGELLAN INSULIN SAFETY SYRINGE/U-100/0.5ML/30G X 5/16"	100	MAGOX 400 TABS (magnesium oxide (mg supplement))	130	MAXX PLUS SPERMICIDE LUBRICATED MISC	63
MAGELLAN INSULIN SAFETY SYRINGE/U-100/0.5ML/30G X 5/16"	100	malathion	49	MAXZIDE TABS (triamterene & hydrochlorothiazide)	50
MAGELLAN INSULIN SAFETY SYRINGE/U-100/1ML/29G X 1/2"	100	MARATHON MEDICAL PENTIPS29GX12MM	100	MAXZIDE-25 TABS (triamterene & hydrochlorothiazide)	50
MAGELLAN INSULIN SAFETY SYRINGE/U-100/1ML/30G X 5/16"	100	MARATHON MEDICAL PENTIPS31GX5MM	100	MAYZENT STARTER PACK TBPK	160
magnesium chloride SOLN	129	MARATHON MEDICAL PENTIPS31GX8MM	100	MAYZENT TABS	160
magnesium citrate	61	MARATHON MEDICAL PENTIPS32GX4MM	100	meclizine hcl CHEW	22
MAGNESIUM CITRATE TABS 100 MG	129	MARINOL CAPS (dronabinol)	22	meclizine hcl TABS 12.5 MG, 25 MG	22
magnesium gluconate TABS 27.5		MASK PEDIATRIC SIZE 1"	116	meclofenamate sodium CAPS	5
		MASK VORTEX/CHILD/FROG	122		
		MASK			

MEDI TAB TABS	138	MEDLANCE PLUS SPECIAL LANCETS 0.8MM	74	UNIVERSAL 33G	74
MEDIC INSULIN SYRINGE/0.3ML/30G X 5/16" ...	100	MEDLANCE PLUS SUPERLITE 30G	74	MEIJER LANCETS	74
MEDIC INSULIN SYRINGE/0.5ML/30G X 5/16" ...	100	MEDLANCE PLUS SUPERLITE 30G/COMFORT MAX	74	MEIJER LANCETS THIN	74
MEDICHOICE PRE-SET SAFETY LANCET DUAL USE	73	MEDLANCE PLUS SUPERLITE 30G/COMFORT MAX	74	MEIJER LANCETS UNIVERSAL21G	74
MEDICHOICE PRE-SET SAFETY LANCET LOW FLOW	73	MEDLANCE PLUS UNIVERSAL LANCETS 21G	74	MEIJER LANCETS UNIVERSAL30G	74
MEDICHOICE PRE-SET SAFETY LANCET MEDIUM FLOW	73	MEDLANCE PLUS/LITE 25G	74	MEIJER LANCETS UNIVERSAL33G	74
MEDICHOICE PRE-SET SAFETY LANCET MODERATE FLOW	73	MEDLANCE/EXTRA	74	MEIJER PEN NEEDLES 29G X12MM	100
MEDICHOICE SAFETY LANCETEXTRA	73	MEDLANCE/LITE	74	MEIJER PEN NEEDLES 31G X6MM	100
MEDICHOICE SAFETY LANCETNORMAL	73	MEDLANCE/UNIVERSAL	74	MEIJER PEN NEEDLES 31G X8MM	100
MEDICINE SHOPPE PEN NEEDLES 29G X 12MM	100	MEDROL DOSEPAK TBPK (methylprednisolone)	40	MEIJER SUPER THIN LANCETS	74
MEDICINE SHOPPE PEN NEEDLES 31G X 6MM	100	MEDROL TABS (methylprednisolone)	40	MEKINIST SOLR	32
MEDICINE SHOPPE PEN NEEDLES 31G X 8MM	100	MEDROL TABS	40	melatonin LIQD 1 MG/ML	2
MEDIDERM	157	medroxyprogesterone acetate (contraceptive) SUSP IM	39	meloxicam CAPS	5
MEDISENSE GLUCOSE KETONECONTROL SOLUTION 1- NORMAL LIQD	73	medroxyprogesterone acetate 2.5 MG, 5 MG, 10 MG	158	meloxicam TABS	5
MEDISENSE HIGH/MID/LOW CONTROL SOLUTION LIQD	73	mefenamic acid CAPS	5	melphalan	30
MEDLANCE PLUS EXTRA LANCETS 21G	74	mefloquine hcl	30	memantine hcl CP24	159
MEDLANCE PLUS LANCETS	74	MEGA MULTI FOR MEN TABS ..	138	memantine hcl SOLN	159
MEDLANCE PLUS LANCETS LITE 25G	74	MEGA MULTI FOR WOMEN TABS 138		memantine hcl TABS	159
MEDLANCE PLUS LITE LANCETS 25G	74	MEGAVITE FRUITS & VEGGIES TABS	138	MENACTRA	165
		megestrol acetate (appetite)	158	MENATROL CAPS	138
		megestrol acetate SUSP	32	MENEST	54
		megestrol acetate TABS	32	MENQUADFI	165
		MEIJER ALCOHOL SWABS EXTRA- THICK	81	MENS 50+ ADVANCED CAPS ...	138
		MEIJER COLOR LANCETS		MENS 50+ MULTI VITAMIN &MINERAL FORMULA TABS	138
				MENS 50+ MULTIVITAMIN TABS 138	

MENS MULTI VITAMIN & MINERAL FORMULA TABS	138	metformin hcl TABS	17	methylprednisolone sod succ 40 MG, 125 MG, 500 MG, 1000 MG	40
MENS MULTIVITAMIN CHEW ...	138	metformin hcl TB24 500 MG, 1000 MG	17	methylprednisolone TABS	40
MENS MULTIVITAMIN TABS	138	metformin hcl TB24 500 MG, 750 MG	17	methylprednisolone TBPK	40
MENTAX	44	methadone hcl CONC	7	metoclopramide hcl SOLN OR 5 MG/5ML, 10 MG/10ML	55
MENVEO SOLN	165	methadone hcl SOLN OR	7	metoclopramide hcl TABS 10 MG ..	55
MENVEO SOLR	165	methadone hcl TABS	7	metoclopramide hcl TABS 5 MG ..	55
meperidine hcl SOLN OR 50 MG/5ML	7	methadone hcl TBSO	7	metolazone	51
meperidine hcl TABS 50 MG	7	METHADOSE CONC (methadone hcl)	7	metoprolol & hydrochlorothiazide TABS	28
MEPHYTON TABS (phytonadione) 169		METHADOSE SUGAR-FREE CONC (methadone hcl)	7	metoprolol succinate TB24	35
MEPRON (atovaquone)	29	methenamine hippurate	29	metoprolol tartrate TABS	35
mercaptapurine TABS	31	methenamine mandelate 0.5 GM, 1 GM	29	METROCREAM CREA (metronidazole (topical))	49
mesalamine CP24	55	methimazole TABS	161	metronidazole (topical) CREA	49
mesalamine CPCR	55	methocarbamol TABS 1000 MG .	149	metronidazole (topical) GEL 0.75 %	49
mesalamine CPDR	55	methocarbamol TABS 500 MG, 750 MG	149	metronidazole CAPS	28
mesalamine ENEM	55	METHOCARBAMOL TABS	149	metronidazole TABS	28
mesalamine TBEC 1.2 GM	55	methotrexate sodium SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML	31	metronidazole vaginal	168
mesalamine TBEC 800 MG	55	methotrexate sodium SOLR	31	mexiletine hcl	12
MESNEX TABS	33	methotrexate sodium TABS 2.5 MG 31		MG PLUS PROTEIN TABS	148
MESTINON TABS (pyridostigmine bromide)	30	methylphenidate hcl TBCR	1	MICARDIS (telmisartan)	27
METAMUCIL 4 IN 1 FIBER POWD (psyllium)	60	METHYLPREDNISOLONE ACETATE SUSP 40 MG/ML, 80 MG/ML	40	MICARDIS HCT (telmisartan-hydrochlorothiazide)	28
METAMUCIL FREE & NATURAL POWD (psyllium)	60	methylprednisolone acetate SUSP 40		MICATIN CREA (miconazole nitrate (topical))	44
METAMUCIL ORIGINAL TEXTURE POWD (psyllium)	60			miconazole nitrate (topical) CREA .	44
METAMUCIL POWD (psyllium) ...	60			miconazole nitrate (topical) OINT .	44
metaxalone	149			miconazole nitrate vaginal CREA 2 %	168
metformin hcl SOLN	17			.....	168
				miconazole nitrate vaginal KIT ...	168

miconazole nitrate vaginal SUPP 100 MG	168	MINI WRIGHT PEAK FLOW METER	123	MM LANCING DEVICE MISC	74
miconazole-zinc oxide-white petrolatum	44	MINI WRIGHT PEAK FLOW METER STANDARD RANGE	123	MM PEN NEEDLES 31G X 1/4" ..	101
MICROCHAMBER DEVI	123	MINIELITE FILTER REPLACEMENTS MISC	123	MM PEN NEEDLES 31G X 3/16" 101	
MICROCHAMBER MISC	123	MINILINK REAL-TIME TRANSMITTER	74	MM PEN NEEDLES 31G X 5/16" 101	
MICRODERM BASE	157	MINIMED 630G GUARDIAN PRESS STARTER TRANSMITTER KIT ..	74	MM PEN NEEDLES 32G X 5/32" 101	
MICRODOT CONTROL SOLUTIONHIGH/LOW SOLN	74	MINIPRESS CAPS (prazosin hcl) ..	27	MM TWIST LANCETS	74
MICRODOT PEN NEEDLE/31G X 6 MM	100	MINIVELLE PTTW (estradiol)	54	M-M-R II SOLR	167
MICRODOT PEN NEEDLE/32G X 4 MM	100	minocycline hcl CAPS	161	M-NATAL PLUS TABS	146
MICRODOT PEN NEEDLE/33G X 4 MM	100	minoxidil 2.5 MG, 10 MG	28	MODERNA COVID-19 VACCINE SUSP	167
MICROLET LANCETS	74	mirabegron TB24	165	MODERNA COVID-19 VACCINE/6MO-11Y/2023-24 SUSP .	167
MICROLET NEXT MISC	74	MIRALAX POWD (polyethylene glycol 3350)	60	MODERNA COVID-19 VACCINE/6MO-11Y/2024-25 SUSY .	167
MICROLIFE DIGITAL PEAK FLOW METER	123	MIRAPEX ER TB24 (pramipexole dihydrochloride)	34	MODERNA COVID-19 VACCINE/BIVALENT/6MO-5Y ..	167
MICROSOME BASE	157	MIRCETTE (desogestrel-ethinyl estradiol (biphasic))	39	MODERNA COVID-19 VACCINE/BIVALENT/BA.4/BA.5	167
MICROSPACER MISC	123	misoprostol	164	MODERNA COVID-19 VACCINE6MO-5Y SUSP	167
midazolam hcl SOLN IJ 25 MG/5ML, 50 MG/10ML	60	MITIGARE CAPS (colchicine)	57	moexipril hcl	26
midazolam hcl SOLN IJ 5 MG/ML, 10 MG/2ML	60	MM INSULIN SYRINGE/U-100/0.3ML/30G X 5/16"	100	mometasone furoate (nasal) SUSP	150
midodrine hcl	169	MM INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	100	mometasone furoate CREA	47
MIEBO	154	MM INSULIN SYRINGE/U-100/1/2ML/30G X 5/16"	101	mometasone furoate OINT	47
miglitol	16	MM INSULIN SYRINGE/U-100/1/2ML/31G X 5/16"	101	mometasone furoate SOLN	48
MINASTRIN 24 FE CHEW (norethin acet & estrad-fe)	39	MM INSULIN SYRINGE/U-100/1ML/30G X 5/16"	101	MONISTAT 3 COMBINATION PACK KIT (miconazole nitrate vaginal) ..	168
mineral oil ENEM	61	MM INSULIN SYRINGE/U-100/1ML/31G X 5/16"	101	MONISTAT 7 COMBINATION PACK KIT	168

MONISTAT 7 SIMPLY CURE CREA (miconazole nitrate vaginal)	168	MONOJECT INSULIN SYRINGE/U- 100/0.3ML/30G X 5/16"	101	MONOLET LANCETS	74
MONISTAT CARE INSTANT ITCH RELIEF MAXIMUM STRENGTH (hydrocortisone vaginal)	168	MONOJECT INSULIN SYRINGE/U- 100/0.5ML/30G X 5/16"	101	MONOLET OPD LANCETS	74
MONOJECT INSULIN SYRINGE/1ML	101	MONOJECT INSULIN SYRINGE/U- 100/1ML/28G X 1/2"	101	MONOLETTOR SAFETY LANCETS 74	
MONOJECT INSULIN SYRINGE/1ML/31G X 5/16"	101	MONOJECT INSULIN SYRINGE/U- 100/1ML/30G X 5/16"	101	montelukast sodium CHEW 4 MG .	13
MONOJECT INSULIN SYRINGE/DETACH NEEDLE/1ML/25G X 5/8"	101	MONOJECT INSULIN SYRINGE/REGULAR LUER TIP/SOFTPACK/1ML	101	montelukast sodium CHEW 5 MG .	13
MONOJECT INSULIN SYRINGE/DETACH NEEDLE/1ML/27G X 1/2"	101	MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.3ML/29G X 1/2"	101	montelukast sodium PACK	13
MONOJECT INSULIN SYRINGE/PERM NEEDLE/1ML/28G X 1/2"	101	MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.3ML/30G X 5/16"	101	montelukast sodium TABS	13
MONOJECT INSULIN SYRINGE/PERM NEEDLE/U- 100/0.5ML/28G X 1/2"	101	MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.3ML/31G X 5/16"	101	MOOD FOOD CAPS	138
MONOJECT INSULIN SYRINGE/SAFETY/PERM NEEDLE/0.3ML/29G X 1/2"	101	MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.5ML/28G X 1/2"	102	MOOD FOOD ES CAPS	138
MONOJECT INSULIN SYRINGE/SAFETY/PERM NEEDLE/0.3ML/29GX1/2"	101	MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.5ML/29G X 1/2"	102	morphine sulfate beads	8
MONOJECT INSULIN SYRINGE/SAFETY/PERM NEEDLE/0.5ML/29G X 1/2"	101	MONOJECT ULTRA COMFORT INSULIN SYRINGE/0.5ML/30G X 5/16"	102	morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG	8
MONOJECT INSULIN SYRINGE/SAFETY/PERM NEEDLE/1ML/29G X 1/2"	101	MONOJECT ULTRA COMFORT INSULIN SYRINGE/1ML/28G X 1/2" 102		morphine sulfate SOLN OR 10 MG/5ML, 20 MG/5ML	8
MONOJECT INSULIN SYRINGE/SOFTPACK/1ML/27G X 1/2"	101	MONOJECT ULTRA COMFORT INSULIN SYRINGE/1ML/29G X 1/2" 102		morphine sulfate SOLN OR 20 MG/ML, 100 MG/5ML	8
MONOJECT INSULIN SYRINGE/SOFTPACK/U- 100/0.5ML/28G X 1/2"	101			morphine sulfate SUPP	8
				morphine sulfate TABS 15 MG	8
				morphine sulfate TABS 30 MG	8
				morphine sulfate TBCR	8
				MOTTEGRITY	54
				MOTPOLY XR CP24	16
				MOTRIN CHILDRENS CHEW (ibuprofen)	5
				MOTRIN INFANTS DROPS SUSP (ibuprofen)	5
				MOUNJARO SC 2.5 MG/0.5ML, 5 MG/0.5ML, 7.5 MG/0.5ML, 10 MG/0.5ML, 12.5 MG/0.5ML, 15 MG/0.5ML	18
				MOVANTIK	56

moxifloxacin hcl (ophth) SOLN OP 152	multiple minerals w/ vitamins TABS 130	MG-1.05 MG-1.2 MG-10 MCG-6.75 MG-750 MCG-4.5 MCG-1 MG, 60 MG-0.3 MG-1.05 MG-13.5 MG-1.05 MG-4.5 MCG-1.2 MG-2500 UNIT- 400 UNIT-15 UNIT-1 MG145
moxifloxacin hcl TABS54	multiple vitamin TABS 143	MULTIVITAMIN WITH FLUORIDE CHEW145
MPD SAFETY LANCET 21G/1.8MM 74	multiple vitamins w/ calcium TABS 133	MULTIVITAMIN WITH FLUORIDE SOLN 145
MPD SAFETY LANCET 28G/1.8MM 74	multiple vitamins w/ iron TABS ... 133	MULTIVITAMIN WOMEN TABS . 139
MPD SAFETY LANCET 30G/1.8MM 74	multiple vitamins w/ minerals CAPS 138	MULTIVITAMIN/ZINC STRESSFORMULA TABS 139
MPD SAFETY LANCETS 23G/1.8MM74	multiple vitamins w/ minerals CHEW . 138	MULTI-VIT-FLOR CHEW 60 MG-1 MG-10 MG-1 MG-1.2 MG-10 MCG- 10 MG-0.25 MG-600 MCG-4.5 MCG- 230 MCG, 60 MG-1 MG-10 MG-1 MG-1.2 MG-10 MCG-10 MG-0.5 MG- 600 MCG-4.5 MCG-230 MCG145
MRESVIA 167	multiple vitamins w/ minerals TABS 138	MULTI-VIT-FLOR CHEW 60 MG-1 MG-10 MG-1 MG-1.2 MG-10 MCG- 10 MG-0.25 MG-600 MCG-4.5 MCG- 230 MCG, 60 MG-1 MG-10 MG-1 MG-1.2 MG-10 MCG-10 MG-0.5 MG- 600 MCG-4.5 MCG-230 MCG145
MS CONTIN TBCR (morphine sulfate)8	MULTISOURCE CALCIUM MAGNESIUM & D FORMULA TABS . 130	MULTI-VIT-FLOR CHEW 60 MG-1 MG-10 MG-1 MG-1.2 MG-10 MCG- 10 MG-1 MG-600 MCG-4.5 MCG- 230 MCG145
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MX-SOL SF SYRP155	N95 PARTICULATE RESPIRATOR FACE MASK116	NAPHCN-A (naphazoline w/ pheniramine)152
MX-SOL SUSPEND SUSP155	nabumetone 5	NAPRELAN TB24 (naproxen sodium)5
MX-SOL SYRP 155	nadolol TABS 20 MG, 40 MG, 80 MG36	NAPROSYN SUSP (naproxen) 5
MYAMBUTOL TABS 400 MG (ethambutol hcl)30	naftifine hcl CREA 44	NAPROSYN TABS 500 MG (naproxen)5
MYCOBUTIN (rifabutin)30	naftifine hcl GEL 2 % 44	naproxen sodium CAPS5
mycophenolate mofetil CAPS 131	NAFTIN GEL (naftifine hcl) 44	naproxen sodium TABS 220 MG ... 5
mycophenolate mofetil hcl 131	NAFTIN GEL44	naproxen sodium TABS 275 MG, 550 MG5
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mycophenolate mofetil TABS131	NALFON TABS (fenoprofen calcium) 5	naproxen SUSP 5
mycophenolate sodium 131	NALOCET TABS9	naproxen TABS 5
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MYFEMBREE53	naloxone hcl SOCT21	naproxen-esomeprazole magnesium5
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NOVOFINE AUTOCOVER PEN NEEDLE 30G X 8MM	102	NOVOLOG SOLN IJ	20	nystatin (mouth-throat)	132
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NOVOFINE PLUS PEN NEEDLE32G X 4MM	102	NOXAFIL SUSP (posaconazole) ..	23	nystatin (topical) OINT	44
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NOVOLIN 70/30 FLEXPEN SUPN	19	NP THYROID 120 TABS	162	nystatin TABS	22
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NOVOLIN N FLEXPEN RELION SUPN	19	NP THYROID 60 TABS	162	NYVEPRIA	59
NOVOLIN N FLEXPEN SUPN	19	NP THYROID 90 TABS	162	OCEAN NASAL SPRAY SOLN (saline)	149
NOVOLIN N RELION SUSP	19	NUBEQA	32	octreotide acetate SOLN	53
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NOVOLIN R RELION SOLN IJ	19	NUCALA SOSY 40 MG/0.4ML	12	OCUVITE ADULT 50+ CAPS	139
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NOVOLOG FLEXPEN RELION SOPN	20	NUCYNTA TABS	8	OCUVITE LUTEIN CAPS	139
NOVOLOG FLEXPEN SOPN	20	NULOJIX	131	ODOMZO	31
NOVOLOG MIX 70/30 PREFILLED FLEXPEN RELION SUPN	20	NU-MAG	130	ofloxacin (ophth)	152
NOVOLOG MIX 70/30 PREFILLED FLEXPEN SUPN	20	NURTEC	127	ofloxacin (otic)	154
NOVOLOG MIX 70/30 RELION SUSP	20	NUTRICAP TABS	139	ofloxacin 300 MG, 400 MG	54
NOVOLOG MIX 70/30 SUSP	20	NUTROPIN AQ NUSPIN 10 SOPN 52		OGSIVEO	32
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olopatadine hcl (nasal)	149	OMNIPOD 5 DEXCOM G7G6 PODS (GEN 5) MISC	75	ONE DAILY MENS 50+ MULTIVITAMIN TABS	139
olopatadine hcl	154	OMNIPOD 5 LIBRE2 PLUS G6 KIT 75		ONE DAILY MENS FORMULA W/O IRON TABS	139
OLPRUVA THPK	52	OMNIPOD 5 LIBRE2 PLUS G6PODS MISC	75	ONE DAILY WOMENS TABS	139
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OLUX-E (clobetasol propionate emulsion)	48	OMNITROPE SOLR SC	52	ONE FLOW TESTER TUBE MOUTHPIECE MISC	123
OMBRA COMPRESSOR AIR FILTERS MISC	123	OMVOH SOAJ	55	ONE VITE DAILY MULTIVITAMIN TABS	143
OMBRA TABLE TOP COMPRESSOR DEVI	123	ONCOVITE TABS	139	ONE VITE WOMENS PRENATALVITAMIN PLUS TABS	147
OMECLAMOX-PAK	164	ondansetron hcl SOLN OR 4 MG/5ML	21	ONE-A-DAY ENERGY TABS	139
omega-3 fatty acids CAPS	150	ondansetron hcl TABS 4 MG, 8 MG 22		ONE-A-DAY ESSENTIAL TABS (multiple vitamin)	143
omega-3 fatty acids CPDR	150	ondansetron TBDP 16 MG	22	ONE-A-DAY FOR HER VITACRAVES TEEN MULTI GUMMIES CHEW	140
omega-3-acid ethyl esters	24	ondansetron TBDP 4 MG, 8 MG ..	22	ONE-A-DAY FOR HIM/VITACRAVES TEEN MULTI GUMMIES CHEW .	140
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omeprazole CPDR 20 MG	164	ONE A DAY IMMUNITY DEFENSE TEENS MULTI + CHEW	139	ONE-A-DAY MENS 50+ ADVANTAGE TABS	140
omeprazole magnesium CPDR ..	164	ONE A DAY MENS 50+ TABS ...	139	ONE-A-DAY MENS 50+ TABS ...	140
omeprazole magnesium TBEC ...	164	ONE A DAY MENS VITACRAVES CHEW	139	ONE-A-DAY MENS HEALTH FORMULA TABS	140
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omeprazole TBEC	164	ONE A DAY TRIPLE IMMUNE SUPPORT ADULT TABS	139	ONE-A-DAY MENS TABS (multiple vitamin)	143
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omeprazole-sodium bicarbonate PACK	164	ONE A DAY WOMENS 50+ TABS 139			
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OMNICAP TABS	143				
OMNIPOD 5 DEXCOM G7G6 INTRO					

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ONE-A-DAY MENS VITACRAVES GUMMIES CHEW 140	ONE-A-DAY WOMENS PLUS HEALTHY SKIN SUPPORT TABS (multiple vitamins w/ minerals) ... 140	ONE-WAY VALVED EXPIRATORYMOUTHPIECE/DISPO SABLE MISC 123
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ONE-A-DAY VITACRAVES SOURGUMMIES CHEW 140	ONETOUCH DELICA PLUS LANCETS FINE 30G75	ONYDA XR SUER1
ONE-A-DAY VITACRAVES WOMENS GUMMIES CHEW 140	ONETOUCH DELICA PLUS LANCING DEVICE MISC75	OPDIVO 40 MG/4ML, 100 MG/10ML 31
ONE-A-DAY VITACRAVES WOMENS MULTI CHEW140	ONETOUCH DELICA SAFETY LANCING DEVICE75	OPFOLDA52
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ONE-A-DAY WOMENS 50+ TABS 140	ONETOUCH ULTRASOFT 2 LANCETS FINE 30G75	OPTICHAMBER DIAMOND MISC 124
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	ONETOUCH VERIO LEVEL 4 CONTROL SOLUTION LIQD75	OPTICHAMBER DIAMOND/SMALLFACE MASK MISC123
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		OPTIMUM AIRVITES CHEW140
		OPTISOURCE POST BARIATRIC SURGERY CHEW140
		OPTIVITE P.M.T. TABS (multiple

vitamins w/ minerals)	141	ORENITRAM TITRATION KIT	MG/20ML	30	
OPURITY TABS	141	MONTH 1 TEPK	37	oxaliplatin SOLR	30
OPURITY/BYPASS OPTIMIZED		ORENITRAM TITRATION KIT		oxaprozin TABS	5
CHEW	141	MONTH 2 TEPK	37	OXAYDO TABS	8
OPVEE NA	21	ORENITRAM TITRATION KIT		OXBRYTA TABS 300 MG	58
OPZELURA	48	MONTH 3 TEPK	37	OXBRYTA TABS 500 MG	58
ORA-BLEND SF SUSP	155	ORGOVYX	32	OXBRYTA TBSO	58
ORA-BLEND SUSP	155	ORIAHNN	54	OXERVATE	153
oral electrolytes SOLN	129	ORLISSA 150 MG	52	oxiconazole nitrate CREA	44
ORAL MIX FLAVORED		ORLISSA 200 MG	52	OXISTAT CREA (oxiconazole nitrate)	
SUSPENDING VEHICLE SUSP .	156	ORKAMBI PACK	161	.....	44
ORAL MIX SF SUSP	156	orlistat	1	OXISTAT LOTN	44
ORAL SUSPEND LIQD	156	ORNITHINE HYDROCHLORIDE .	38	oxybutynin chloride SOLN	165
ORAL SYRUP FLAVORED VEHICLE		orphenadrine citrate TB12	149	oxybutynin chloride TABS	165
SYRP	156	orphenadrine w/ aspirin & caff .	149	oxybutynin chloride TB24	165
ORAL SYRUP SF SYRP	156	ORSERDU	32	OXYCODONE AND	
ORALYTE SOLN	129	oseltamivir phosphate CAPS	35	ACETAMINOPHEN TABS	9
ORAPENN SD ANHYDROUS		oseltamivir phosphate SUSR	35	oxycodone hcl CAPS	8
SWEETENED LIQD	156	OSENI 15 MG-25 MG, 30 MG-12.5		oxycodone hcl CONC 100 MG/5ML	8
ORAPENN SD ANHYDROUS		MG, 30 MG-25 MG, 45 MG-25 MG		oxycodone hcl SOLN	8
UNSWEETENED LIQD	156	(alogliptin-pioglitazone)	17	oxycodone hcl T12A 10 MG	8
ORA-PLUS LIQD	156	OSMOLEX ER T4PK	34	oxycodone hcl T12A 20 MG	8
ORAPRED ODT TBDP (prednisolone		OSMOLEX ER TB24 129 MG, 193		oxycodone hcl T12A 40 MG	8
sodium phosphate)	40	MG	34	oxycodone hcl T12A 80 MG	8
ORA-SWEET SF SYRP 10 %-9 %		OSTEOPRIME PLUS/CALCIUM &		oxycodone hcl TABA	8
156		MAGNESIUM TABS	141	oxycodone hcl TABS 20 MG	8
ORA-SWEET SYRP 4 %-5 %-54 %		OTEZLA TABS 30 MG	5	oxycodone hcl TABS 30 MG	8
156		OTEZLA TBPK	5	oxycodone hcl TABS 5 MG, 10 MG,	
ORAVIG	132	OTOVEL (ciprofloxacin-fluocinolone		15 MG	8
ORAZINC TABS	131	acetamide)	155	OXYCODONE	
ORENCIA CLICKJECT SOAJ	5	OVAL TAPE MISC	75	HYDROCHLORIDE/ACETAMINOPH	
ORENCIA SOSY	5	OVIDE (malathion)	49	EN SOLN	9
ORENITRAM TBCR	37	oxaliplatin SOLN 50 MG/10ML, 100			

oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-2.5 MG, 325 MG-5 MG, 325 MG-7.5 MG	9	PALFORZIA LEVEL 4 CSPK	2	PARI SOFT PLASTIC ADULT MASK MISC	124
OXYCODONE/ACETAMINOPHEN TABs	9	PALFORZIA LEVEL 5 CSPK	2	PARI SOFT PLASTIC PEDIATRIC MASK MISC	124
OXYCONTIN T12A 10 MG	8	PALFORZIA LEVEL 6 CSPK	2	PARI TREK S COMBO PACK DEVI .	124
OXYCONTIN T12A 15 MG	8	PALFORZIA LEVEL 7 CSPK	2	PARI VORTEX ADULT MASK ...	124
OXYCONTIN T12A 20 MG	8	PALFORZIA LEVEL 8 CSPK	2	paricalcitol CAPS	52
OXYCONTIN T12A 30 MG	8	PALFORZIA LEVEL 9 CSPK	2	paricalcitol SOLN	52
OXYCONTIN T12A 40 MG	8	PANDA MASK LARGE	124	PARLODEL CAPS (bromocriptine mesylate)	34
OXYCONTIN T12A 60 MG	8	PANDA MASK MEDIUM	124	PARLODEL TABS (bromocriptine mesylate)	34
OXYCONTIN T12A 80 MG	8	PANDA MASK SMALL	124	PARVLEX TABS	141
oxymorphone hcl TABS 10 MG	8	PANDEL	48	PATADAY (olopatadine hcl)	154
oxymorphone hcl TABS 5 MG	8	pantoprazole sodium PACK	164	PATADAY EXTRA STRENGTH .	154
oxymorphone hcl TB12	8	pantoprazole sodium TBEC	164	PATANASE (olopatadine hcl (nasal))	149
OXYTROL FOR WOMEN PTTW .	165	PARADIGM REAL-TIME TRANSMITTER	75	PAXLOVID 100 MG-150 MG	35
OXYTROL PTTW	165	PARI ALTERA NEBULIZER HANDSET MISC	124	PC LANCETS SUPER THIN 30G .	75
oyster shell	129	PARI BABY CONVERSION KITSIZE 1 MISC	124	PC UNIFINE PENTIPS 29G X1/2"	102
OYSTER SHELL CALCIUM/D TABS .	129	PARI BABY CONVERSION KITSIZE 2 MISC	124	PC UNIFINE PENTIPS 31G X5MM MINI	102
OZEMPIC SOPN	18	PARI BABY CONVERSION KITSIZE 3 MISC	124	PC UNIFINE PENTIPS 31G X6MM ULTRA SHORT	102
OZOBAX SOLN OR (baclofen) ...	149	PARI BUBBLES PEDIATRIC AEROSOL MASK MISC	124	PC UNIFINE PENTIPS 31G X8MM SHORT	102
PALFORZIA INITIAL DOSE ESCALATION CSPK	1	PARI ERAPID NEBULIZER HANDSET MISC	124	PCCA ALADERM BASE	157
PALFORZIA LEVEL 1 CSPK	1	PARI EXPIRATORY FILTER VALVE SET DEVI	124	PCCA ANHYDROUS BASE OINT	157
PALFORZIA LEVEL 10 CSPK	1	PARI MANUAL INTERRUPTER DEVI	124	PCCA ANHYDROUS LIPODERM BASE	157
PALFORZIA LEVEL 11 (MAINTENANCE) PACK	1	PARI MASK SET MISC	124	PCCA BASE 7542	157
PALFORZIA LEVEL 11 (TITRATION) PACK	1	PARI SMARTMASK BABY/ELBOW MISC	124		
PALFORZIA LEVEL 2 CSPK	1				
PALFORZIA LEVEL 3 CSPK	1				

PCCA BIOPEPTIDE BASE	157	ped multivitamins w/fl & iron SOLN 143	bicarbonate-sod chloride	60	
PCCA CANNIDEX 2.0 CUSTOMBASE	157	PEDIALYTE ADVANCED CARE SOLN (oral electrolytes)	129	PEG OINTMENT BASE	157
PCCA CANNIDEX CUSTOM BASE . 157		PEDIALYTE FREEZER POPS SOLN (oral electrolytes)	129	pemetrexed disodium SOLR 100 MG, 500 MG	31
PCCA COSMETIC HRT BASE ..	157	PEDIALYTE IMMUNE SUPPORT SOLN	129	PEN NEEDLES	102
PCCA CUSTOM TROCHE BASE POWD	156	PEDIALYTE SINGLES SOLN (oral electrolytes)	129	PEN NEEDLES 29GX12MM	102
PCCA EMOLLIENT CREAM BASE 157		PEDIALYTE SOLN (oral electrolytes)	129	PEN NEEDLES 30GX8MM	102
PCCA HYDRABASE SB CUSTOMBASE	157	PEDIAPRED SOLN (prednisolone sodium phosphate)	40	PEN NEEDLES 31G X 3/16"	102
PCCA LIPODERM BASE	157	PEDIARIX SUSY	162	PEN NEEDLES 31G X 5MM	102
PCCA LIPODERM CUSTOM BASE . 157		PEDIATRIC DISPOSABLE MOUTPIECE MISC	124	PEN NEEDLES 31G X 6MM	102
PCCA MVC BASE	157	PEDIATRIC MEDIUM MASK	116	PEN NEEDLES 31G X 8MM	102
PCCA NATACREAM	157	PEDIATRIC MOUTHPIECE/DISPOSABLE MISC .	124	PEN NEEDLES 31GX5/16"	102
PCCA POLYGLYCOL TROCHE POWD	156	pediatric multivitamins w/fl CHEW 145		PEN NEEDLES 31GX6MM (1/4") 102	
PCCA POLYPEG BASE	157	pediatric multivitamins w/fl CHEW 146		PEN NEEDLES 31GX8MM (5/16") 102	
PCCA PRACASIL TM-PLUS BASE . 157		pediatric multivitamins w/fl SOLN	146	PEN NEEDLES 31GX8MM	102
PCCA SWEET-SF SYRP	156	PEDIATRIC PANDA MASK	124	PEN NEEDLES 31GX8MM	102
PCCA SYRUP VEHICLE SYRP ..	156	PEDIATRIC SMALL MASK	116	PEN NEEDLES 32G X 4MM	102
PCCA VANISHING CREAM LIGHT . 157		pediatric vitamins acd w/ fluoride SOLN	146	PEN NEEDLES 32G X 5MM	102
PCCA VANISHING CREAM/LOTION BASE	157	PEDVAX HIB SUSP	165	PEN NEEDLES 32G X 6MM	102
PCCA VANPEN BASE	157	PEG	157	PEN NEEDLES 32GX4MM	102
PCCA WAV CUSTOM BASE	157	peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR	60	PEN NEEDLES 32GX8MM	102
PCCA-PLUS SUSP	156	peg 3350-potassium chloride-sod		PEN NEEDLES 33G X 5/32"	102
PEAK A-I-R FLOW METER	124			PEN NEEDLES/29G X 1/2"	102
PEAK AIR PEAK FLOW METERADULT/PEDIATRIC	124			PEN NEEDLES/31G X 1/4"	102
				PEN NEEDLES/31G X 3/16"	102
				PEN NEEDLES/31G X 5/16"	103
				PEN NEEDLES/31G X 6MM	103
				PEN NEEDLES/32G X 5/32"	103
				PENBRAYA	165
				penciclovir	45

PENCREAM	157	PEPTO-BISMOL SUSP (bismuth subsalicylate)	21	PFIZER-BIONTECH COVID-19VACCINE/5-11Y/2024-25 SUSP	167
PENDERM	158	PEPTO-BISMOL TO-GO CHEW (bismuth subsalicylate)	21	PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y SUSP	167
penicillin v potassium SOLR	155	PERCOCET TABS 325 MG-10 MG, 325 MG-2.5 MG, 325 MG-5 MG, 325 MG-7.5 MG (oxycodone w/ acetaminophen)	9	PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y/2023-24 SUSP	167
penicillin v potassium TABS	155	PERFECT LANCETS 30G	75	PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y/2024-25 SUSP	167
PENNSAID SOLN EX	44	PERFECT POINT SAFETY LANCETS/28G	75	PFIZER-BIONTECH COVID-19VACCINE/ADULT RTU SUSP	.167
PENSOMAL CREAM	158	PERFECT POINT SAFETY LANCETS/30G	75	PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/5-11Y ..	167
PENTACEL	162	PERFECT PRESSURE ACTIVATED SAFETY LANCETS 28G	75	PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/6M-4Y	.167
PENTASA CPCR (mesalamine) ...	55	PERFOROMIST NEBU (formoterol fumarate)	15	PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/BA.4/BA.5	167
PENTASA CPCR	55	PERIDEX (chlorhexidine gluconate (mouth-throat))	132	PFLEX MISC	124
pentazocine w/ naloxone hcl	10	perindopril erbumine	26	PHARMABASE ANTIOXIDANT	.158
PENTIPS 29G X 12MM	103	permethrin CREA	50	PHARMABASE COSMETIC	158
PENTIPS 29GX12MM	103	permethrin LIQD EX	50	PHARMABASE COSMETIC NATURAL	158
PENTIPS 31G X 5MM	103	PERSONAL BEST FULL RANGE	124	PHARMABASE HEAVY	158
PENTIPS 31G X 8MM	103	PERTZYE CPEP	50	PHARMABASE LIGHT	158
PENTIPS 31GX5MM	103	PETROLATUM	158	PHARMABASE VAGINAL MOISTURIZING	158
PENTIPS 31GX6MM	103	PETROLEUM JELLY	158	PHARMACIST CHOICE ALCOHOL PRED PADS	81
PENTIPS 31GX8MM	103	PETROLEUM JELLYBABY	158	PHARMACIST CHOICE ALCOHOLPREP PADS	81
PENTIPS 32G X 4MM	103	PFCB	158	PHARMACIST CHOICE NEBULIZER/CPAP/INHALER	
PENTIPS 32GX4MM	103	PFIZER-BIONTECH COVID-19VACCINE SUSP	168		
PENTIPS 32GX6MM	103	PFIZER-BIONTECH COVID-19VACCINE/5-11Y SUSP	167		
pentoxifylline	57	PFIZER-BIONTECH COVID-19VACCINE/5-11Y/2023-24 SUSP			
PEPCID AC MAXIMUM STRENGTH TABS (famotidine)	163				
PEPCID AC TABS (famotidine) ..	163				
PEPCID TABS (famotidine)	163				
PEPTO BISMOL TABS (bismuth subsalicylate)	21				
PEPTO-BISMOL CHEW (bismuth subsalicylate)	21				
PEPTO-BISMOL MAX STRENGTH SUSP (bismuth subsalicylate)	21				

CHAMBER MASK WIPES MISC .124	PHYTOMULTI TABS 141	MCG/0.5ML 160
PHARMACIST CHOICE SELECTLANCETS/ULTRA THIN .75	phytonadione TABS 5 MG .....169	PLEGRIDY SOSY IM .....160
PHARMACIST CHOICE ULTRA THIN LANCETS .....75	PIKO 1 ELECTRONIC 124	PLEGRIDY STARTER PACK SOAJ SC .....160
PHARMACIST CHOICE ULTRA THIN LANCETS 28G .....75	PILLOW MASK/ADULT MISC ....125	PLEGRIDY STARTER PACK SOSY SC .....160
PHARMACIST CHOICE ULTRA THIN LANCETS 30G .....75	PILLOW MASK/CHILD MISC 125	PNEUMOVAX 23 IJ 25 MCG/0.5ML . 165
PHARMACIST CHOICE ULTRA THIN LANCETS 31G .....75	PILLOW MASK/PEDIATRIC MISC 125	PNEUMOVAX 23/1 DOSE IJ 25 MCG/0.5ML .....165
PHARMACIST CHOICE ULTRA THIN LANCETS 33G .....75	pilocarpine hcl (oral) 132	POCKET CHAMBER DEVI .....125
PHARMACY COUNTER LANCETS . 75	pilocarpine hcl SOLN 1 %, 2 %, 4 % . 152	POCKET PEAK FLOW METER . 125
PHEBURANE PLLT .....52	pimecrolimus 49	POCKET SPACER DEVI .....125
phenazopyridine hcl TABS 100 MG, 100 MG .....57	pindolol TABS .....36	POCKETCHEM EZ CONTROL LEVEL 1 SOLN 76
phenazopyridine hcl TABS 200 MG 57	pioglitazone hcl .....20	POCKETPEAK PEAK FLOW METER LOW RANGE 125
phendimetrazine tartrate TABS 1	pioglitazone hcl-glimepiride 17	POCKETPEAK PEAK FLOW METER/UNIVERSAL RANGE 50-720 LPM 125
PHENDIMETRAZINE TARTRATEER CP24 .....1	pioglitazone hcl-metformin hcl TABS . 17	podofilox SOLN 49
phentermine hcl CAPS 1	PIP GLUCOSE CONTROL SOLUTION LIQD .....75	polyethylene glycol 3350 POWD .. 60
phentermine hcl TABS 1	PIP LANCETS/28G .....75	POLYETHYLENE GLYCOL BLEND . 158
phenylephrine hcl (mydriatic) SOLN 2.5 %152	PIP LANCETS/30G .....75	polyethylene glycol-propylene glycol (ophth) GEL .....150
PHEXXI 169	PIP PEN NEEDLES 31G X 5MM 103	polyethylene glycol-propylene glycol (ophth) SOLN 0.3 %-0.4 % 150
PHILLIPS (magnesium oxide (laxative)) .....61	PIP PEN NEEDLES 32G X 4MM 103	polymyxin b-trimethoprim 152
PHOS-NAK POWDER CONCENTRATE PACK (potassium & sodium phosphates) .....130	piroxicam CAPS .....5	POLY-VI-FLOR CHEW 400 UNIT-15 UNIT-1 MG-200 MCG, 60 MG-1 MG- 10 MG-1 MG-1.2 MG-10 MCG-10 MG-600 MCG-4.5 MCG-1 MG-200 MCG 146
PHOSPHOLINE IODIDE .....152	pitavastatin calcium 26	POLY-VI-FLOR CHEW .....146
PHYTOBASE 158	PLAN B ONE-STEP (levonorgestrel (emergency oc)) .....39	
	PLAQUENIL (hydroxychloroquine sulfate) 30	
	PLAVIX 75 MG (clopidogrel bisulfate) .....58	
	PLEGRIDY SOAJ SC 125	

polyvinyl alcohol 1.4 %	150	pramipexole dihydrochloride TABS 34	SYRINGE/U-100/0.3ML/30G X 5/16"	103
polyvinyl alcohol-povidone (ophth) 0.5 %-0.6 %, 5 MG/ML-6 MG/ML	151	pramipexole dihydrochloride TB24	PREFERRED PLUS INSULIN SYRINGE/U-100/0.5ML/28G X 1/2" .	103
POMALYST	32	prasugrel hcl	103	
PONVORY 14-DAY STARTER PACK TBPK	160	pravastatin sodium	PREFERRED PLUS INSULIN SYRINGE/U-100/0.5ML/29G X 1/2" .	103
PONVORY TABS	160	prazosin hcl CAPS	103	
posaconazole SUSP	23	PRECISION GLUCOSE KETONECONTROL SOLUTION 1- LOW, 1-HIGH LIQD	PREFERRED PLUS INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	103
posaconazole TBEC	23	PRECISION SURE-DOSE INSULIN SYRINGE/0.3ML/30G X 5/16" ...	PREFERRED PLUS INSULIN SYRINGE/U-100/1ML/28G X 1/2" 103	
potassium & sodium phosphates PACK	130	PRECISION THINS GP LANCET .	103	
potassium bicarbonate TBEF	131	PRED FORTE (prednisolone acetate (ophth))	PREFERRED PLUS INSULIN SYRINGE/U-100/1ML/29G X 1/2" 103	
potassium chloride CPCR	131	prednicarbate OINT	103	
potassium chloride microencapsulated crystals er 10 MEQ, 20 MEQ	131	prednisolone acetate (ophth)	PREFERRED PLUS INSULIN SYRINGE/U-100/1ML/30G X 5/16" 103	
potassium chloride TBCR	131	PREDNISOLONE ACETATE P-F 153	PREFERRED PLUS LANCETS COLORED 21G	76
potassium citrate (alkalinizer) TBCR . 56		PREDNISOLONE SODIUM PHOSPHATE	153	
potassium citrate-citric acid SOLN .	56	prednisolone sodium phosphate SOLN	40	
potassium phosphate monobasic TABs	130	prednisolone sodium phosphate TBDP	40	
POTASSIUM PHOSPHATES 236 MG/ML-224 MG/ML (potassium phosphates)	130	prednisolone SOLN	40	
potassium phosphates 236 MG/ML- 224 MG/ML	130	prednisolone TABS	40	
PRADAXA CAPS 110 MG (dabigatran etexilate mesylate)	16	PREDNISONE INTENSOL CONC	40	
PRADAXA CAPS 75 MG, 150 MG (dabigatran etexilate mesylate)	16	prednisone SOLN	40	
PRADAXA PACK	16	prednisone TABS	40	
pralatrexate	31	prednisone TBPK	40	
PRALUENT SOAJ	26	PREFERRED PLUS INSULIN SYRINGE/U-100/0.3ML/29G X 1/2" .	103	
		PREFERRED PLUS INSULIN PENTIPS 29G X 12MM	103	
		PREFERRED PLUS UNIFINE PENTIPS 31G X 6MM ULTRA SHORT	103	
		PREFERRED PLUS UNIFINE PENTIPS 31G X 8MM SHORT ..	103	
		PREFERRED PLUS UNIFINE PENTIPS 32GX4MM	103	
		PREFERRED PLUS UNIFINE PENTIPS/MINI/31GX5MM	103	
		PREFERRED PLUS INSULIN PREHEVBRIO	168	

PREMARIN TABS	54	MULTIVITAMIN CAPS 100 MG-400	1.1 %-5 %	132
PREMPHASE	54	MCG-2.5 MG-5 MG-4.25 MG-5 MG-	PREVIDENT FLUORIDE GEL	
PREMPRO	54	25 MG-75 MG-250 UNIT-15 UNIT-50	(sodium fluoride (dental))	132
PRENATABS FA TABS	147	MG-100 MCG-7.5 MG-50 MG-5000	PREVNAR 13	165
PRENATAL 19 CHEW	147	UNIT-500 MCG	141	
PRENATAL 19 TABS	147	PRESERVISION AREDS 2 + MULTI	PREVNAR 20	165
PRENATAL AND IRON TABS ...	147	VITAMIN CAPS	PREVYMIS TABS	35
PRENATAL FORTE TABS	147	141	PREZISTA SUSP	34
PRENATAL MULTIVITAMIN TABS	147	PRESERVISION AREDS 2 CAPS	PRIFTIN	30
147		141	PRILOSEC OTC TBEC (omeprazole	
PRENATAL PLUS TABS	147	PRESERVISION AREDS CAPS .	magnesium)	164
147		141	PRILOSEC PACK	164
PRENATAL PLUS VITAMIN		PRESERVISION AREDS TABS .	141	
ANDMINERAL TABS	147	141	PRESERVISION/LUTEIN CAPS .	141
PRENATAL TABS	148	PRETOMANID	30	
prenatal vit w/ ferrous fumarate-folic		30	PRIMAQUINE PHOSPHATE TABS	
acid CHEW	147	PREVACID 24HR CPDR	(primaquine phosphate)	30
147		(lansoprazole)	primaquine phosphate TABS	30
prenatal vit w/ iron carbonyl-folic acid		164	primidone	16
TABS 120 MG-3 MG-30 MCG-1 MG-		164	PRIORIX SUSR	168
400 UNIT-8 MCG-3 MG-20 MG-7		164	PRO COMFORT ALCOHOL PADS	
MG-3 MG-100 MG-15 MG-3 MG-		164	81	
4000 UNIT-200 MG-150 MCG-30		164	PRO COMFORT INHALER SPACER	
UNIT-29 MG	147	164	CHAMBER ADULT MISC	125
PRENATAL VITAMIN & MINERAL		164	PRO COMFORT INHALER SPACER	
TABS	147	164	CHAMBER CHILD MISC	125
147		164	PRO COMFORT INHALER SPACER	
PRENATAL VITAMIN/IRON TABS		164	CHAMBER INFANT DEVI	125
147		164	PRO COMFORT INSULIN	
PRENATAL VITAMINS PLUS LOW		164	SYRINGES/0.5ML/30G X 1/2" ...	103
IRON TABS	147	164	PRO COMFORT INSULIN	
147		164	SYRINGES/0.5ML/30G X 5/16" .	103
PRENATAL VITAMINS TABS 120		164	PRO COMFORT INSULIN	
MG-2.6 MG-800 MCG-400 UNIT-8		164	SYRINGES/0.5ML/31G X 5/16" .	103
MCG-1.7 MG-20 MG-28 MG-200		164	PRO COMFORT INSULIN	
MG-1.8 MG-25 MG-4000 UNIT-30		164	SYRINGES/1ML/30G X 1/2"	103
UNIT	147	164	PRO COMFORT INSULIN	
147		164	SYRINGES/1ML/30G X 5/16" ...	104
PRENATVITE RX TABS	148	164		
148		164		
PRESCRIPTION SUPPORT		164		

PRO COMFORT INSULIN SYRINGES/1ML/31G X 5/16" ...	104	PRODIGY CONTROL SOLUTIONHIGH SOLN	76	promethazine hcl SUPP 12.5 MG, 25 MG	24
PRO COMFORT LANCETS 30G .	76	PRODIGY CONTROL SOLUTIONLOW SOLN	76	promethazine hcl SUPP 50 MG ...	24
PRO COMFORT LANCETS 31G .	76	PRODIGY COUNT-A-DOSE MISC 76		promethazine hcl TABS	24
PRO COMFORT PEN NEEDLES/31G X 8MM	104	PRODIGY INSULIN SYRINGE/U-100/0.3ML/31G X 5/16"	104	PROMETHAZINE HYDROCHLORIDE/DEXTROMETHORPHAN HYDROBROMIDE SYRP (promethazine-dm)	41
PRO COMFORT PEN NEEDLES/32G X 4MM	104	PRODIGY INSULIN SYRINGE/1/2ML/31G X 5/16" ...	104	promethazine w/codeine SOLN ...	41
PRO COMFORT PEN NEEDLES/32G X 5MM	104	PRODIGY INSULIN SYRINGE/1ML/28G X 1/2"	104	promethazine w/codeine SYRP ...	41
PRO COMFORT PEN NEEDLES/32G X 6MM	104	PRODIGY LANCING DEVICE MISC . 76		promethazine-dm SYRP	41
PRO COMFORT SAFETY LANCETS 30G PRESSURE ACTIVATED ...	76	PRODIGY PRESSURE ACTIVATED SAFETY LANCETS	76	promethazine-phenylephrine-codeine	41
PROAIR DIGIHALER	15	PRODIGY SAFETY LANCETS ...	76	PROMETRIUM CAPS (progesterone)	158
PROAIR RESPICLICK AEPB	15	PRODIGY TWIST TOP LANCETS 76		PRONEB ULTRA FILTER SET MISC	125
probenecid	57	PROFOLA TABS	141	propafenone hcl TABS	12
PROBIOTICS + BARIATRIC MULTIVITAMIN CAPS	141	progesterone CAPS	158	proparacaine hcl	153
PRO-CAL TABS	141	progesterone OIL	158	propranolol hcl CP24	36
PROCARDIA XL TB24 (nifedipine) 36		PROGLYCEM (diazoxide)	18	propranolol hcl SOLN OR 20 MG/5ML, 40 MG/5ML	36
PROCARE SPACER CHAMBER W/ADULT MASK DEVI	125	PROGRAF CAPS (tacrolimus) ...	131	propranolol hcl TABS	36
PROCARE SPACER CHAMBER W/CHILD MASK DEVI	125	PROGRAF PACK	131	propylthiouracil	161
PROCERV HP TABS	141	PROGRAF SOLN	131	PROQUAD SUSR	168
PROCHAMBER VALVED HOLDINGCHAMBER DEVI	125	PROLATE SOLN	9	PRORENAL+D TABS	141
prochlorperazine	34	PROLATE TABS	9	PRORENAL+D/OMEGA-3 CAPS	141
prochlorperazine maleate TABS ...	34	PROLENSA (bromfenac sodium (ophth))	154	PROSCAR (finasteride)	57
PROCRIPT	59	promethazine & phenylephrine SYRP	41	PROSTEON TABS	130
PROCYSBI CPDR	56	promethazine hcl SOLN OR 6.25 MG/5ML	24	PROTECT CARDIO AF CAPS ...	141
PROCYSBI PACK	56			PROTECT PLUS SO CAPS	141
				PROTEGRA CAPS	141
				PROTONIX PACK (pantoprazole	

sodium) 164	METER ADULT 125	PX SHORTLENGTH PEN NEEDLES/31GX8MM 104
PROTONIX TBEC (pantoprazole sodium) 164	PURE COMFORT PEAK FLOW METER CHILD 125	PYLERA (bismuth subcitrate potassium-metronidazole- tetracycline) 164
PROVENTIL HFA AERS (albuterol sulfate) 15	PURE COMFORT PEN NEEDLE 32G X6MM 104	pyrazinamide 30
PROVERA (medroxyprogesterone acetate) 158	PURE COMFORT PEN NEEDLE 32G X8MM 104	pyrethrins-piperonyl butoxide LIQD 4 %-0.33 % 50
PROVIT TABS 141	PURE COMFORT PEN NEEDLE/32G X 5MM 104	pyrethrins-piperonyl butoxide SHAM 4 %-0.3 %-0.33 %, 4 %-0.33 % 50
pseudoephedrine-guaifenesin TB12 600 MG-60 MG 41	PURE COMFORT PEN NEEDLE/32G X4MM 104	PYRIDIDIUM TABS 100 MG (phenazopyridine hcl) 57
P-SILOXAN DS 158	PURE COMFORT SAFETY PEN NEEDLE 31G X 5MM 104	PYRIDIDIUM TABS 200 MG (phenazopyridine hcl) 57
PSS SELECT GP LANCETS 76	PURE COMFORT SAFETY PEN NEEDLE 31G X 6MM 104	pyridostigmine bromide TABS 60 MG 30
PSS SELECT PLATFORMS MISC 76	PURE COMFORT SAFETY PEN NEEDLE 32G X 4MM 104	pyridoxine hcl TABS 100 MG 170
PSS SELECT SAFETY LANCETS 76	PURIXAN SUSP 31	pyridoxine hcl TABS 25 MG 170
psyllium POWD 25 %, 28.3 %, 43 %, 51.7 %, 58.6 %, 95 % 60	PX ADVANCED LANCING DEVICE MISC 76	pyridoxine hcl TABS 50 MG 170
PULMICORT FLEXHALER AEPB 180 MCG/ACT 13	PX EXTRA SHORT PEN NEEDLES 31GX6MM 104	pyrimethamine 30
PULMICORT FLEXHALER AEPB 90 MCG/ACT 13	PX INSULIN SYRINGE/U- 100/0.5ML/30G X 1/2" 104	PYRUKYND TABS 58
PULMICORT SUSP (budesonide (inhalation)) 13	PX LANCET AUTO INJECTOR MISC 76	PYRUKYND TAPER PACK TBPK .58
PULMOZYME 161	PX LANCETS MICROTHIN 33G .. 76	QBRELIS SOLN 26
PURE COMFORT 3-BALL BREATH EXERCISER DEVI 125	PX LANCETS ULTRA THIN 76	QC ADVANCED LANCING DEVICE MISC 76
PURE COMFORT ALCOHOL PREPPADS 81	PX LANCETS ULTRA THIN 28G .. 76	QC ALCOHOL SWABS 81
PURE COMFORT INHALER SPACER CHAMBER ADULT DEVI 125	PX MINI PEN NEEDLES 31GX5MM 104	QC LANCETS SUPER THIN 76
PURE COMFORT LANCETS 30G 76	PX PEN NEEDLE 29GX12MM .. 104	QC LANCETS ULTRA THIN 76
PURE COMFORT PEAK FLOW	PX PEN NEEDLE 31GX8MM 104	QC MULTI-VITE TABS 141
	PX PRENATAL MULTIVITAMINS TABS 148	QC OCUHEALTH VISION SUPPORT 2 CAPS 141
		QC PEN NEEDLES 29G X 12MM 104
		QC PEN NEEDLES 31G X 6MM 104

QC PEN NEEDLES 31G X 8MM	104	QUICKTEK CONTROL SOLUTION LIQD	76	RA PETROLEUM JELLY	158
QC PRENATAL TABS	148	QUIN B STRONG TABS	141	RA PRENATAL FORMULA/FOLICACID TABS	148
QC UNIFINE PENTIPS 32GX4MM	104	quinapril hcl	26	RA PRENATAL TABS	148
QC UNILET LANCETS 28G/ULTRA THIN	76	quinapril-hydrochlorothiazide	28	RABAVERT	168
QC UNILET LANCETS 33G/MICRO THIN	76	quinidine sulfate TABS	12	RABEPRAZOLE SODIUM DR SPRINKLE CPSP	164
QDOLO SOLN (tramadol hcl)	8	QUINTABS TABS	143	rabeprazole sodium TBEC	164
QNASL	150	QUINTABS-M TABS	141	raloxifene hcl	52
QNASL CHILDRENS	150	QUINTET GLUCOSE CONTROL/HIGH/NORMAL SOLN	76	ramipril CAPS	26
QTERN	17	QULIPTA	127	RANEXA TB12 (ranolazine)	11
QUADRACEL SUSP	162	QUVIVIQ	60	ranolazine TB12	11
QUADRACEL SUSY	162	QVAR REDIHALER	13	RAPAFLO (silodosin)	57
QUAKE DEVI	125	RA ALCOHOL SWABS	81	RAPAMUNE SOLN (sirolimus)	131
QUESTRAN LIGHT POWD (cholestyramine light)	25	RA CENTRAL-VITE TABS	141	RAPAMUNE TABS (sirolimus)	132
QUESTRAN PACK (cholestyramine)	25	RA E-ZJECT LANCETS 28G	76	rasagiline mesylate	34
QUESTRAN POWD (cholestyramine)	25	RA E-ZJECT LANCETS THIN 26G	76	RAYA SURE PEN NEEDLE 29GX 12MM	104
quetiapine fumarate TABS	34	RA E-ZJECT LANCETS THIN 28G	76	RAYA SURE PEN NEEDLE 31GX 4MM	104
QUFLORA PEDIATRIC CHEW 60 MG-1.5 MG-100 MCG-1.2 MG-400 UNIT-4 MCG-1.3 MG-5 MG-1200 UNIT-15 MG-0.25 MG-15 UNIT-1 MG-108 MCG, 60 MG-1.5 MG-100 MCG-1.2 MG-400 UNIT-4 MCG-1.3 MG-5 MG-1200 UNIT-15 MG-0.5 MG-15 UNIT-1 MG-108 MCG	146	RA E-ZJECT LANCETS ULTRATHIN 30G	76	RAYA SURE PEN NEEDLE 31GX 5MM	104
QUFLORA PEDIATRIC CHEW 60 MG-1.5 MG-100 MCG-1.2 MG-400 UNIT-4 MCG-1.3 MG-5 MG-1200 UNIT-15 MG-1 MG-15 UNIT-1 MG-108 MCG	146	RA INSULIN SYRINGE/0.5ML/29G X 1/2"	104	RAYA SURE PEN NEEDLE 31GX 6MM	104
QUFLORA PEDIATRIC SOLN	146	RA INSULIN SYRINGE/1ML/29G X 1/2"	104	RAYA SURE PEN NEEDLE 31GX 8MM	104
		RA INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	104	RAYAVIT TABS	141
		RA INSULIN SYRINGE/U-100/1 ML/30G X 5/16"	104	RAYOS TBEC	40
		RA PEN NEEDLES 31G X 5MM3/16"	104	RAZADYNE ER CP24 (galantamine hydrobromide)	159
		RA PEN NEEDLES 31G X 8MM5/16"	104	READYLANCE SAFETY LANCETS/21G/2.2MM	76
				READYLANCE SAFETY	

LANCETS/23G/1.8MM	76	(carboxymethylcellulose sodium (ophth))	151	RELION INSULIN SYRINGE/U- 100/0.5ML/31G X 5/16"	105
READYLANCE SAFETY LANCETS/26G/1.8MM	76	REFRESH PLUS SOLN (carboxymethylcellulose sodium (ophth))	151	RELION INSULIN SYRINGE/U- 100/1ML/31G X 5/16"	105
READYLANCE SAFETY LANCETS/28G/1.8MM	77	REFRESH TEARS SOLN (carboxymethylcellulose sodium (ophth))	151	RELION LANCETS MICRO- THIN33G	77
READYLANCE SAFETY LANCETS/30G/1.6MM	77	REFUAH PLUS GLUCOSE CONTROL SOLUTION SOLN	77	RELION LANCETS THIN 26G	77
REALITY INSULIN SYRINGE/U- 100/0.5ML/28G X 1/2"	104	REGLAN TABS 10 MG (metoclopramide hcl)	55	RELION LANCETS ULTRA- THIN30G	77
REALITY INSULIN SYRINGE/U- 100/0.5ML/29G X 1/2"	105	REGLAN TABS 5 MG (metoclopramide hcl)	55	RELION LANCING DEVICE KIT	77
REALITY INSULIN SYRINGE/U- 100/1ML/28G X 1/2"	105	RELAFEN DS	5	RELION LANCING DEVICE MISC	77
REALITY INSULIN SYRINGE/U- 100/1ML/29G X 1/2"	105	RELENZA DISKHALER	35	RELION MINI PEN NEEDLES 31GX6MM	105
REALITY LANCETS	77	RELEUKO SOLN	59	RELION PEN NEEDLES 29GX12MM	105
REALITY LATEX CONDOMS/LUBRICATED MISC	63	RELEUKO SOSY	59	RELION PEN NEEDLES 31G X6MM	105
REALITY LATEX/ULTRA TEXTURED DEVI	63	RELEXXII TBCR (methylphenidate hcl)	1	RELION PEN NEEDLES 31G X8MM	105
REALITY LATEX/ULTRA THIN DEVI 63		RELION 2-IN-1 LANCET DEVICES 30G	77	RELION PEN NEEDLES 31GX5/16" 105	
REALITY SWABS	81	RELION 2-IN-1 LANCING DEVICE 25G	77	RELION PEN NEEDLES 31GX6MM 105	
REALITY TRIGGER LANCETS	77	RELION 2-IN-1 LANCING DEVICE 30G	77	RELION PEN NEEDLES 31GX8MM 105	
REBIF REBIDOSE SOAJ	160	RELION ALCOHOL SWABS	81	RELION PEN NEEDLES 32G X4MM	105
REBIF REBIDOSE TITRATIONPACK SOAJ	160	RELION INSULIN SYRINGE 0.5ML/31G X 15/64"	105	RELION PEN NEEDLES 32G X5/32"	105
REBIF SOSY 22 MCG/0.5ML	160	RELION INSULIN SYRINGE/U- 100/0.3ML/31G X 15/64"	105	RELION PEN NEEDLES 32GX4MM 105	
REBIF SOSY 44 MCG/0.5ML	160	RELION INSULIN SYRINGE/U- 100/0.3ML/31G X 5/16"	105	RELION PEN NEEDLES/31G X1/4" . 105	
REBIF TITRATION PACK SOSY	160	RELION INSULIN SYRINGE/U- 100/0.5ML/29G X 1/2"	105	RELION SHORT PEN NEEDLES31GX8MM	105
REBINYN	57				
RECOMBIVAX HB SUSP	168				
RECOMBIVAX HB SUSY	168				
REFRESH LIQUIGEL GEL					

RELION ULTRA THIN LANCETS/30G	77	RETEVMO TABS	33	SITE ADAPTER MISC	77
RELION ULTRA THIN LANCETS30G	77	RETIN-A CREA 0.025 %, 0.05 % (tretinoin)	42	RIGHTEST GL300 LANCETS	77
RELION ULTRA THIN PLUS LANCETS 32G	77	REUSABLE COMFORTSEAL MASK/LARGE/AEROECLIPSE MISC	126	RILUTEK TABS (riluzole)	150
RELION ULTRA THIN PLUS LANCETS 33G	77	REUSABLE COMFORTSEAL MASK/MEDIUM/AEROECLIPSE MISC	126	riluzole TABS	150
RELISTOR SOLN	56	REUSABLE COMFORTSEAL MASK/SMALL/AEROECLIPSE MISC	126	rimantadine hydrochloride TABS ..	35
RELISTOR TABS	56	REVATIO SUSR (sildenafil citrate (pulmonary hypertension))	37	RINVOQ LQ SOLN	2
RELPAK (eletriptan hydrobromide) 128		REVATIO TABS (sildenafil citrate (pulmonary hypertension))	37	RINVOQ TB24	2
RELTONE CAPS	55	REVLIMID	131	RIOMET SOLN (metformin hcl)	17
RELYVRIO	150	REXALL LANCETS ULTRA THIN	77	risedronate sodium TABS 35 MG .	52
REMEDIENT CAPS	141	REXTOVY LIQD	21	risedronate sodium TABS 5 MG, 30 MG, 150 MG	52
RENAGEL (sevelamer hcl)	56	REYVOW	128	risedronate sodium TBEC	52
RENAPLEX-D TABS	141	REZLIDHIA	33	RITEFLO DEVI	126
REVELA PACK (sevelamer carbonate)	56	REZUROCK	131	RITUXAN	31
REVELA TABS (sevelamer carbonate)	56	REZVOGLAR KWIKPEN	20	rivastigmine	159
repaglinide	20	RHOPRESSA	153	rivastigmine tartrate CAPS	159
REPATHA PUSHTRONEX SYSTEM SOCT	26	RIABNI	31	RIVFLOZA SOLN	56
REPATHA SOSY	26	RID ESSENTIAL LICE ELIMINATION KIT KIT EX	50	RIVFLOZA SOSY	56
REPATHA SURECLICK SOAJ	26	rifabutin	30	rizatriptan benzoate TABS	128
REPLACEMENT AIR FILTER MISC . 125		rifampin CAPS	30	rizatriptan benzoate TBDP	128
REPLACEMENT FILTERS MISC	126	RIGHTEST GC300 HIGH CONTROL LIQD	77	ROBINUL FORTE TABS (glycopyrrolate)	163
RESTASIS EMUL (cyclosporine (ophth))	153	RIGHTEST GD500 LANCING DEVICE MISC	77	ROBINUL TABS (glycopyrrolate) .	163
RESTASIS MULTIDOSE EMUL ..	152	RIGHTEST GD-L500 ALTERNATE		ROCALTROL CAPS (calcitriol)	52
RETACRIT	59			ROCALTROL SOLN OR (calcitriol) 53	
				ROCKLATAN	153
				roflumilast	13
				ropinirole hydrochloride TABS	34
				ropinirole hydrochloride TB24	34
				rosuvastatin calcium TABS	26

ROTARIX SUSP	168	ACTIVATED	77	SAPS CARE ALCOHOL PREP PADS	82
ROTARIX SUSR	168	SAFETY LANCETS	77	SAPS HEALTH ALCOHOL PREPPADS	82
ROTATEQ SOLN	168	SAFETY LANCETS 21G	77	SAPS HEALTH CARE ALCOHOLPREP PADS	82
ROXICODONE TABS 15 MG (oxycodone hcl)	8	SAFETY LANCETS 23G	77	SAPS HEALTH CARE ALCOHOLPREP PADS	82
ROXICODONE TABS 30 MG (oxycodone hcl)	8	SAFETY LANCETS 28G	77	SAPS HEALTH CARE TWIST TOP LANCETS	77
ROXYBOND TABA 15 MG	8	SAFETY LANCETS/PRESSURE ACTIVATED/28G	77	SAPS HEALTH PLUS TWIST TOP LANCETS 30G	77
ROXYBOND TABA 30 MG	8	SAFETY PEN NEEDLES/30G X5/16"	105	SAPS HEALTH TWIST TOP LANCETS 30G	77
ROXYBOND TABA 5 MG	8	SAIZEN IJ	52	SAPS HEALTH TWIST TOP LANCETS 30G	77
ROZLYTREK PACK	33	SAIZENPREP RECONSTITUTIONKIT IJ	52	SAPSCARE TWIST TOP LANCETS 30G	77
RUBRACA	33	SALAGEN (pilocarpine hcl (oral)) 132		SAVAYSA	15
RYALTRIS	149	saline SOLN	149	SAVELLA TABS	159
RYBELSUS TABS	18	SALT DURABLE CREAM	158	SAVELLA TITRATION PACK MISC 159	
RYKINDO SRER	34	SALT STABLE LS ADVANCED .	158	saxagliptin hcl	18
RYPLAZIM	58	SALTSTABLE LO	158	saxagliptin-metformin hcl	17
RYTARY CPCR	34	SAMI THE SEAL		SAXENDA	1
RYTELO	33	REPLACEMENTFILTERS MISC .	126	SB ALCOHOL PREP PADS	82
SA3 DERM	158	SAMSCA TABS (tolvaptan)	53	SB INSULIN SYRINGE/U- 100/0.5ML/29G X 1/2"	105
SAFE-SENSE EARLOOP FACE MASK	116	SANARE ADVANCED SCAR THERAPY	158	SB INSULIN SYRINGE/U- 100/0.5ML/30G X 5/16"	105
SAFE-T-LANCE LOW FLOW 25G 77		SANARE SCAR THERAPY	158	SB INSULIN SYRINGE/U- 100/1ML/29G X 1/2"	105
SAFE-T-LANCE NORMAL FLOW21G	77	SANCUSO PTCH	22	SB INSULIN SYRINGE/U- 100/1ML/30G X 5/16"	105
SAFE-T-LANCE PLUS SAFETYLANCET HIGH FLOW ...	77	SANDIMMUNE CAPS (cyclosporine) 132		SB INSULIN SYRINGE/U- 100/1ML/31G X 5/16"	105
SAFE-T-LANCE PLUS SAFETYLANCET LOW FLOW ...	77	SANDIMMUNE SOLN IV 50 MG/ML . 132		SB LANCETS THIN	77
SAFE-T-LANCE PLUS SAFETYLANCET NORMAL FLOW 77		SANDOSTATIN SOLN 50 MCG/ML, 100 MCG/ML (octreotide acetate) .	53	SB LANCETS ULTRA THIN	77
SAFETY LANCET 30G/PRESSURE	168	SANOFI COVID-19 VACCINE/ANTIGEN COMPONENT .	168		

SCAR CARE CREAM	158	SENSI-CARE MOISTURIZING CREA	49	NEEDLES/SHORT/31GX8MM ..	106
SCEMBLIX	33	SENSIPAR 30 MG, 60 MG (cinacalcet hcl)	53	SHOPKO UNIFINE PENTIPS PLUS PEN	
SECURESAFE SAFETY INSULIN SYRINGES/U-100/0.5ML/29GX1/2" . 105		SENSIPAR 90 MG (cinacalcet hcl)	53	NEEDLES/MICRO/REMOVR/32GX4 MM	106
SECURESAFE SAFETY INSULIN SYRINGES/U-100/1ML/29GX1/2" 105		SENTRY SENIOR MENS 50+ TABS . 141		SHOPKO UNIFINE PENTIPS PLUS PEN	
SECURESAFE SAFETY PEN NEEDLES/30G X 5/16"	105	SENTRY SENIOR/LUTEIN TABS 141		NEEDLES/MINI/REMOVER/31GX5M M	106
SEGLENTIS	9	SENTRY TABS	141	SHOPKO UNIFINE PENTIPS PLUS PEN	
SEGLUROMET	17	SEREVENT DISKUS	15	NEEDLES/REMOVER/29GX12MM . 106	
SELECT-LITE DEVICE/LANCETS KIT	77	SERNIVO EMUL	48	SHOPKO UNIFINE PENTIPS PLUS PEN	
SELECT-LITE LANCING DEVICE MISC	77	SEROSTIM SC 4 MG, 5 MG, 6 MG 52		NEEDLES/SHORT/REMOVR/31GX8 MM	106
selegiline hcl CAPS	34	sevelamer carbonate PACK	56	SHOPKO UNILET LANCETS SUPER THIN 30G	78
selegiline hcl TABS	34	sevelamer carbonate TABS	56	SHOPKO UNILET LANCETS ULTRA THIN 28G	78
selenium sulfide LOTN 2.5 %	45	sevelamer hcl	56	SIDEROL TABS	141
SEMGLEE SOLN	20	SEZABY SOLR	60	SIDESTREAM ADULT FACE MASK MISC	126
SEMGLEE SOPN	20	SFROWASA ENEM	55	SIDESTREAM PEDIATRIC FACEMASK MISC	126
SE-NATAL 19 CHEW	148	SHIELD-SECURE FULL FACE SHIELD	116	SIDESTREAM PEDIATRIC FACEMASK/SAMI THE SEAL MISC . 126	
SE-NATAL 19 TABS	148	SHINGRIX	168	SIDESTREAM PEDIATRIC FACEMASK/TUCKER THE TURTLE MISC	126
sennosides CAPS	61	SHOPKO AUTOLET LANCING DEVICE MISC	77	SIDESTREAM PLUS ADULT FACE MASK MISC	126
sennosides LIQD	61	SHOPKO ON-THE-GO COMFORTLANCETS 30G	78	SIKLOS TABS	58
sennosides SYRP 8.8 MG/5ML	61	SHOPKO UNIFINE PENTIPS PEN NEEDLES/MICRO/32GX4MM ...	105	sildenafil citrate (pulmonary hypertension) SUSR	37
sennosides TABS 8.6 MG, 15 MG, 17.2 MG, 25 MG	61	SHOPKO UNIFINE PENTIPS PEN NEEDLES/MINI/31GX5MM	105	sildenafil citrate (pulmonary	
sennosides-docusate sodium TABS 60		SHOPKO UNIFINE PENTIPS PEN NEEDLES/ORIGINAL/29GX12MM 105			
SENOKOT S TABS (sennosides- docusate sodium)	60	SHOPKO UNIFINE PENTIPS PEN			
SENOKOT TABS (sennosides)	61				

hypertension) TABS	38	(montelukast sodium)	13	SM ALCOHOL PREP PADS	82
SILICONE MASK FOR BREATHERITE CHAMBER/ADULT MISC	126	SINGULAIR CHEW 5 MG (montelukast sodium)	13	SM B-COMPLEX/VITAMIN C TABS .	133
SILICONE MASK FOR BREATHERITE CHAMBER/INFANT MISC	126	SINGULAIR PACK (montelukast sodium)	13	SM FOAMING ANTACID	10
SILICONE MASK FOR BREATHERITE CHAMBER/PEDIATRIC MISC ...	126	SINGULAIR TABS (montelukast sodium)	13	SM MICRO THIN LANCETS 33G .	78
SILICONE MASK FOR BREATHRITE CHAMBER/ADULT MISC	126	sirolimus SOLN	132	SM ONE DAILY ESSENTIAL TABS	133
SILIQ	45	sirolimus TABS	132	SM ONE DAILY MENS TABS	141
silodosin	57	SIRTURO	30	SM ONE DAILY WOMENS TABS	141
SILPROTEX PLUS	158	SITAGLIPTIN	18	SM PRENATAL VITAMINS TABS	148
SILVADENE (silver sulfadiazine) .	45	SITAVIG TABS BU	35	SM TRUEDRAW LANCING DEVICE	MISC
silver sulfadiazine	45	SIVEXTRO TABS	29	SMART DIABETES VANTAGE LANCING DEVICE MISC	78
SIMBRINZA	152	SKIN HAIR & NAILS ADVANCED BEAUTY CAPS	141	SMART SENSE COLOR LANCETS UNIVERSAL 33G	78
simethicone CHEW	54	SKIN PROTECTANT PETROLATUM	158	SMART SENSE STANDARD LANCETS UNIVERSAL 21G	78
simethicone LIQD OR 20 MG/0.3ML .	54	skin protectants, misc. CREA	49	SMART SENSE SUPER THIN LANCETS UNIVERSAL 30G	78
simethicone SUSP	54	SKYLICE (ivermectin (pediculicide))	50	SMART SENSE THIN LANCETSUNIVERSAL 26G	78
SIMPLE DIAGNOSTICS LANCING DEVICE MISC	78	SKYCLARYS	150	SMARTEST CONTROL SOLUTIONMEDIUM SOLN	78
SIMPONI ARIA SOLN	3	SKYRIZI PEN SOAJ	45	SMARTEST LANCETS 28G	78
SIMPONI SOAJ	3	SKYRIZI PSKT	45	SMARTY PANTS KIDS COMPLETE AND FIBER CHEW	145
SIMPONI SOSY	3	SKYRIZI SOCT 180 MG/1.2ML ...	55	SOAANZ TABS 20 MG	51
simvastatin TABS	26	SKYRIZI SOCT 360 MG/2.4ML ...	55	SODIUM BENZOATE	156
SINEMET TABS 100 MG-10 MG, 100 MG-25 MG (carbidopa-levodopa)	34	SKYRIZI SOSY	45	sodium bicarbonate (antacid) TABS	325 MG, 650 MG
SINGLE-LET	78	SKYTROFA	52	11	
SINGULAIR CHEW 4 MG		SKYY DERM	158	SODIUM BICARBONATE POWD .	11
		SLO-NIACIN TBCR 500 MG (niacin) .	170		
		SLOW-MAG	130		
		SLOWMAG MG MUSCLE/HEART	130		

sodium chloride (gu irrigant) 0.9 %	56	solifenacin succinate TABS	165	SOVUNA	30
sodium chloride (inhalant) NEBU 0.9 %, 3 %, 7 %	42	SOLQUA 100/33	17	SPECTRAVITE TABS	141
sodium chloride hypertonic OINT	154	SOLIRIS	57	SPIKEVAX COVID-19 VACCINE SUSP	168
sodium chloride hypertonic SOLN	154	SOLO TABS	141	SPIKEVAX COVID-19 VACCINE/2023-24 SUSP	168
sodium chloride SOLN IV 0.9 %	131	SOLTAMOX SOLN	32	SPIKEVAX COVID-19 VACCINE/2023-24 SUSY	168
SODIUM CHLORIDE SOLN IV 0.9 %	131	SOLU-CORTEF	40	SPIKEVAX COVID-19 VACCINE/2024-25 SUSY	168
sodium chloride TABS	131	SOLU-MEDROL (methylprednisolone sod succ)	41	SPIKEVAX COVID-19 VACCINE/2024-25 SUSY	168
sodium citrate & citric acid	56	SOLU-MEDROL	40	spinosad	50
sodium fluoride (dental) CREA	132	SOLUS V2 CONTROL HIGH SOLN	78	SPINRAZA	150
sodium fluoride (dental) GEL	132	SOLUS V2 LANCING DEVICE MISC	78	SPIRIVA HANDIHALER CAPS (tiotropium bromide monohydrate)	12
sodium fluoride CHEW 0.25 MG, 0.5 MG, 1 MG, 2.2 MG	129	SOLUS V2 PRESSURE ACTIVATED SAFETY LANCETS 28G	78	SPIRIVA RESPIMAT AERS	12
sodium fluoride SOLN 0.5 MG/ML	129	SOLUS V2 TWIST LANCETS 30G	78	SPIRO PD DEVI	126
sodium fluoride-potassium nitrate GEL	132	SOLUVITA SOLN	129	spironolactone & hydrochlorothiazide	50
SODIUM OXYBATE SOLN	159	SOLUVITA SOLN	146	spironolactone TABS 25 MG, 100 MG	51
sodium phosphates (sodium phosphate dibasic & monobasic)	142	SOOTHENEB NBL 100 CHILD MASK MISC	126	spironolactone TABS 50 MG	51
MG/ML-276 MG/ML, 710 MG/5ML- 1380 MG/5ML	130	SOOTHENEB NBL 100 MEDICATION CUP MISC	126	SPONGEBOB SQUAREPANTS GUMMIES CHEW	145
sodium phosphates ENEM	61	SOOTHENEB NBL 100 MESH CAP MISC	126	SPORANOX CAPS (itraconazole)	23
sodium polystyrene sulfonate POWD	132	SOOTHENEB NBL100 ADULT MASK MISC	126	SPORANOX SOLN (itraconazole)	23
sodium polystyrene sulfonate SUSP CO 15 GM/60ML	132	SORBIDON HYDRATE CREA	49	SPRIX SOLN NA	5
sodium sulfate-potassium sulfate- magnesium sulfate	60	SOSWEET SYRP	156	STALEVO 100 (carbidopa-levodopa- entacapone)	34
SOF-SENSOR	78	sotalol hcl (afib/af)	36	STALEVO 125 (carbidopa-levodopa- entacapone)	34
SOGROYA	52	sotalol hcl TABS	36	STALEVO 150 (carbidopa-levodopa- entacapone)	34
SOHONOS	149	SOTYKTU	45	STALEVO 200 (carbidopa-levodopa- entacapone)	34
		SOTYLIZE SOLN OR	36		

STALEVO 50 (carbidopa-levodopa-entacapone)	34	SOLN	153	SURE COMFORT AUTOKEEPER SAFETY PEN NEEDLES 31GX1/4" .	106
STALEVO 75 (carbidopa-levodopa-entacapone)	34	sulfamethoxazole-trimethoprim SUSP	29	SURE COMFORT AUTOKEEPER SAFETY PEN NEEDLES 32GX5/32"	106
STAMARIL SUSR	168	sulfamethoxazole-trimethoprim TABS	29	SURE COMFORT INSULIN SYRINGE/U-100/0.3ML/29G X 1/2" .	106
STEGLATRO	20	sulfasalazine TABS	55	SURE COMFORT INSULIN SYRINGE/U-100/0.3ML/30G X 1/2" .	106
STEGLUJAN	17	sulfasalazine TBEC	55	SURE COMFORT INSULIN SYRINGE/U-100/0.3ML/30G X 5/16"	106
STELARA 130 MG/26ML	55	sulindac TABS	5	SURE COMFORT INSULIN SYRINGE/U-100/0.3ML/31G X 5/16 .	106
STELARA SOSY	45	sumatriptan	128	SURE COMFORT INSULIN SYRINGE/U-100/0.3ML/28G X 1/2" .	106
STERILANCE TL	78	sumatriptan succinate SOAJ	128	SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/29G X 1/2" .	106
STIMUFEND	59	sumatriptan succinate SOCT	128	SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/29G X 1/2" .	106
STIOLTO RESPIMAT	15	sumatriptan succinate SOLN 6 MG/0.5ML	128	SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/30G X 1/2" .	106
STRENSIQ	53	sumatriptan succinate TABS	128	SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	106
STRESS FORMULA W/ZINC FORENERGY TABS	143	sumatriptan succinate TABS	128	SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/31G X 5/16 .	106
STRIVE DUAL ZONE PEAK FLOW METER	126	sumatriptan-naproxen sodium ...	127	SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	106
STRIVERDI RESPIMAT	15	SUNLENCA SOLN	34	SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/31G X 5/16"	106
STROMECTOL (ivermectin)	11	SUNLENCA TBPK	35	SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/31GX1/4" .	106
STROVITE FORTE TABS (multiple vitamins w/ minerals)	141	SUPER ANTIOXIDANT CAPS ...	141	SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/28G X 1/2" .	106
STROVITE ONE TABS	141	SUPER D/ZINC/SELENIUM/COPPER TABS .	141	SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/29G X 1/2" .	106
sucralfate TABS	163	SUPER THIN LANCETS	78	SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/29G X 1/2" .	106
SULAR 8.5 MG, 17 MG, 34 MG (nisoldipine)	36	SUPERIOR MENS MULTI TABS .	141	SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/30G X 1/2" .	106
sulconazole nitrate CREA	44	SUPERIOR WOMENS MULTI TABS	142	SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	106
sulfacetamide sodium (ophth) OINT 152		SUPPORT-500 CAPS	142	SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	106
sulfacetamide sodium (ophth) SOLN . 152		SUPREME II HIGH/LOW CONTROL SOLUTION LIQD	78	SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/30G X 5/16"	106
sulfacetamide sodium w/ sulfur LIQD 10 %-5 %	42	SUPREP BOWEL PREP KIT (sodium sulfate-potassium sulfate-magnesium sulfate)	60	SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/31G X 5/16 .	106
sulfacetamide sod-prednisolone		SURE COMFORT ALCOHOL PREP PADS	82	SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/31G X 5/16 .	106

SURE COMFORT INSULIN SYRINGE/U-100/1ML/28G X 1/2" 106	SURE COMFORT PEN NEEDLES32GX5/32" 106	SYNALAR SOLN (fluocinolone acetoneide) 48
SURE COMFORT INSULIN SYRINGE/U-100/1ML/29G X 1/2" 106	SURE COMFORT PEN NEEDLES32GX6MM 107	SYNALAR TS 48
SURE COMFORT INSULIN SYRINGE/U-100/1ML/30G X 1/2" 106	SURELITE LANCETS 78	SYNJARDY TABS 17
SURE COMFORT INSULIN SYRINGE/U-100/1ML/30G X 5/16" 106	SURGICAL DISPOSABLE FACEMASK 3-PLY 116	SYNJARDY XR TB24 17
SURE COMFORT INSULIN SYRINGE/U-100/1ML/30G X 5/16" 106	SURGICAL FACE MASK/NIOSH95 116	SYNTHROID TABS (levothyroxine sodium) 162
SURE COMFORT LANCETS 18G 78	SUSPENDIT ANHYDROUS SUSP 156	SYRPALTA SYRP 83 % 156
SURE COMFORT LANCETS 21G 78	SUSPENDRX WITH BITTER- BLOC/SWEETENED SUSP 156	SYRSPEND SF LIQD 156
SURE COMFORT LANCETS 23G 78	SUSPENDRX WITH BITTER- BLOC/UNSWEETENED SUSP .. 156	SYRUP VEHICLE SF SYRP 156
SURE COMFORT LANCETS 28G 78	SUSPENSION VEHICLE SUSP .. 156	SYRUP VEHICLE SYRP 156
SURE COMFORT LANCETS 30G 78	SYMBICORT (budesonide- formoterol fumarate dihydrate) 15	SYSTANE GEL GEL 151
SURE COMFORT LANCING PEN MISC 78	SYMBICORT 160 MCG/ACT-4.5 MCG/ACT (budesonide-formoterol fumarate dihydrate) 15	SYSTANE ICAPS AREDS2 CHEW 142
SURE COMFORT PEN NEEDLES29GX1/2" 12.7MM 106	SYMBICORT 80 MCG/ACT-4.5 MCG/ACT (budesonide-formoterol fumarate dihydrate) 15	SYSTANE ICAPS AREDS2 TABS 142
SURE COMFORT PEN NEEDLES30GX5/16" SHORT ... 106	SYMJEPI SOSY 169	SYSTANE SOLN (polyethylene glycol-propylene glycol (ophth)) .. 151
SURE COMFORT PEN NEEDLES31GX3/16" (5MM) 106	SYMLINPEN 120 SOPN 16	SYSTANE ULTRA SOLN (polyethylene glycol-propylene glycol (ophth)) 151
SURE COMFORT PEN NEEDLES31GX5/16" (8MM) 106	SYMLINPEN 60 SOPN 16	TAB-A-VITE MULTIVITAMIN/IRON AND BETA-CAROTENE TABS .. 133
SURE COMFORT PEN NEEDLES32GX5/32" (4MM) 107	SYMPROIC 56	TABLOID 31
	SYNAGIS SOLN 155	tacrolimus (topical) OINT 0.03 % .. 49
	SYNALAR CREA (fluocinolone acetoneide) 48	tacrolimus (topical) OINT 0.1 % ... 49
	SYNALAR CREAM KIT 48	tacrolimus CAPS 132
	SYNALAR OINT (fluocinolone acetoneide) 48	tadalafil (pulmonary hypertension) TABS 38
	SYNALAR OINTMENT KIT 48	TADLIQ SUSP 38
		TAFINLAR TBSO 33
		tafluprost 154
		TAGAMET HB 200 TABS

(cimetidine)	163	TECFIDERA STARTER PACK CDPK (dimethyl fumarate)	160	TEGLUTIK SUSP	150
TAGAMET HB TABS (cimetidine) 163		TECHLITE AST LANCETS	78	TEKTURNA (aliskiren fumarate) ..	28
TAKHZYRO SOSY	57	TECHLITE INSULIN SYRINGEU-100/0.3ML/30G X 5/16"	107	TEKTURNA HCT 12.5 MG-150 MG, 12.5 MG-300 MG, 25 MG-300 MG	28
TALICIA	164	TECHLITE INSULIN SYRINGEU-100/0.3ML/31G X 15/64"	107	telmisartan	27
TALTZ SOAJ	45	TECHLITE INSULIN SYRINGEU-100/0.3ML/31G X 5/16"	107	telmisartan-amlodipine	28
TALTZ SOSY 80 MG/ML	45	TECHLITE INSULIN SYRINGEU-100/0.5ML/30G X 1/2"	107	telmisartan-hydrochlorothiazide ..	28
TALZENNA	33	TECHLITE INSULIN SYRINGEU-100/0.5ML/30G X 5/16"	107	TEMODAR CAPS 250 MG (temozolomide)	30
TAMIFLU CAPS (oseltamivir phosphate)	35	TECHLITE INSULIN SYRINGEU-100/0.5ML/31G X 15/64"	107	temozolomide CAPS	30
TAMIFLU SUSR (oseltamivir phosphate)	35	TECHLITE INSULIN SYRINGEU-100/1ML/29G X 1/2"	107	TENIVAC INJ	162
tamoxifen citrate TABS	32	TECHLITE INSULIN SYRINGEU-100/1ML/30G X 1/2"	107	TENORETIC 100 (atenolol & chlorthalidone)	28
tamsulosin hcl	57	TECHLITE INSULIN SYRINGEU-100/1ML/31G X 5/16"	107	TENORETIC 50 (atenolol & chlorthalidone)	28
TARGRETIN (bexarotene (topical)) 44		TECHLITE INSULIN SYRINGEU-100/1ML/29G X 1/2"	107	TENORMIN TABS (atenolol)	35
TARGRETIN (bexarotene)	33	TECHLITE INSULIN SYRINGEU-100/1ML/30G X 1/2"	107	terazosin hcl	27
TASCENSO ODT 0.25 MG	160	TECHLITE INSULIN SYRINGEU-100/1ML/31G X 5/16"	107	terbinafine hcl (topical) CREA	44
TASCENSO ODT 0.5 MG	160	TECHLITE LANCETS	78	terbinafine hcl TABS	22
TASMAR (tolcapone)	33	TECHLITE LANCETS 26G	78	terbutaline sulfate TABS	15
tavorole	44	TECHLITE PEN NEEDLES 29GX 12 MM	107	terconazole vaginal CREA	168
TAVNEOS	57	TECHLITE PEN NEEDLES 31GX 5MM	107	teriflunomide	160
tazarotene CREA 0.1 %	45	TECHLITE PEN NEEDLES/31GX 8MM	107	teriparatide SOPN	52
tazarotene GEL	45	TECHLITE PEN NEEDLES/32GX 6MM	107	TERIPARATIDE SOPN	52
TAZORAC CREA 0.1 % (tazarotene) 45		TECHLITE PLUS PEN NEEDLES32G X 4MM	107	TERODERM	158
TAZORAC GEL (tazarotene)	45			TERODERM-PLUS	158
TAZVERIK	33			TESTIM GEL TD (testosterone) ...	10
TDVAX SUSP	162			TESTOSTERONE CYPIONATE SOLN IJ 200 MG/ML	10
TECENTRIQ	31			testosterone cypionate SOLN IM ..	10
TECFIDERA CPDR (dimethyl fumarate)	160			testosterone GEL TD 1 %, 10 MG/ACT, 20.25 MG/1.25GM, 25	

tobramycin-dexamethasone SUSP 153	INSULIN SYRINGE/0.3ML/31G X 5/16"107	TOUJEO MAX SOLOSTAR SOPN 20
TODAYS HEALTH ADVANCED LANCING DEVICE MISC78	TOPCARE ULTRA COMFORT INSULIN SYRINGE/0.5ML/30G X 5/16"107	TOUJEO SOLOSTAR SOPN20
TODAYS HEALTH MINI PEN NEEDLES 31G X 1/4" 107	TOPCARE ULTRA COMFORT INSULIN SYRINGE/0.5ML/31G X 5/16"107	TOVET KIT48
TODAYS HEALTH ORIGINAL PEN NEEDLES 29G X 1/2" 107	TOPCARE ULTRA COMFORT INSULIN SYRINGE/1ML/30G X 5/16"107	TOVIAZ (fesoterodine fumarate) 165
TODAYS HEALTH SHORT PEN NEEDLES 31G X 5/16"107	TOPCARE ULTRA COMFORT INSULIN SYRINGE/1ML/31G X 5/16"107	TRACLEER TABS (bosentan)37
TODAYS HEALTH SUPER THINLANCETS 30G 78	TOPCARE ULTRA COMFORT INSULIN SYRINGE/1ML/29G X 1/2" 107	TRACLEER TBSO37
TODAYS HEALTH ULTRA THINLANCETS 28G 78	TOPCARE ULTRA COMFORT INSULIN SYRINGE/U- 100/0.3ML/29G X 1/2" 107	TRADJENTA 18
tolcapone33	TOPCARE ULTRA COMFORT INSULIN SYRINGE/U- 100/0.5ML/29G X 1/2" 108	tramadol hcl CP24 100 MG, 200 MG, 300 MG8
TOLECTIN 600 TABS5	TOPCARE ULTRA COMFORT INSULIN SYRINGE/U- 100/0.5ML/29G X 1/2" 108	tramadol hcl SOLN8
tolmetin sodium CAPS5	TOPCARE ULTRA COMFORT INSULIN SYRINGE/U-100/1ML/29G X 1/2"108	tramadol hcl TABS 50 MG, 100 MG 9
tolmetin sodium TABS 600 MG5	TOPCARE ULTRA COMFORT INSULIN SYRINGE/U-100/1ML/29G X 1/2"108	tramadol hcl TB249
tolnaftate CREA44	TOPICORT CREA (desoximetasone)48	TRAMADOL HYDROCHLORIDE SOLN (tramadol hcl) 9
tolnaftate POWD EX44	TOPICORT GEL (desoximetasone) 48	tramadol-acetaminophen9
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	UNISTIK SAFETY LANCETS 30G 80	

valacyclovir hcl	35	vancomycin hcl CAPS	29	VASERETIC 25 MG-10 MG (enalapril maleate & hydrochlorothiazide)	28
VALCHLOR	44	vancomycin hcl SOLR IV 1 GM, 5 GM, 10 GM, 500 MG, 750 MG, 1000 MG	29	VASOTEC TABS (enalapril maleate)	26
VALCYTE TABS (valganciclovir hcl)	35	vancomycin hcl SOLR OR 25 MG/ML, 50 MG/ML, 250 MG/5ML	29	VAXCHORA	165
valganciclovir hcl TABS	35	VANCOMYCIN HYDROCHLORIDE SOLR IV 1 GM, 5 GM, 10 GM, 500 MG, 750 MG	29	VAXELIS SUSP	162
valsartan SOLN	27	VANDAZOLE	168	VAXELIS SUSY	162
valsartan TABS	27	VANFLYTA	33	VAXNEUVANCE	165
valsartan-hydrochlorothiazide	28	VANIBASE	158	VECTICAL (calcitriol (topical))	45
VALTREX (valacyclovir hcl)	35	VANICREAM HC MAXIMUM STRENGTH CREA	48	VELPHORO	56
VALUE HEALTH INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	114	VANISHING CREAM	158	VELSIPITY	56
VALUE HEALTH INSULIN SYRINGE/U-100/1ML/29G X 1/2"	114	VANISHING CREAM BOTANICALBASE	158	VEMLIDY	35
VALUE PLUS LANCETS STANDARD 21G	80	VANISH-PEN	158	VENCLEXTA STARTING PACK TBPK	31
VALUE PLUS LANCETS SUPERTHIN 30G	80	VANISHPOINT INSULIN SYRINGE/0.5ML/30G X 1/2"	114	VENCLEXTA TABS	31
VALUE PLUS LANCETS THIN 26G	80	VANISHPOINT INSULIN SYRINGE/0.5ML/30G X 5/16"	114	VENEXA FE TABS	142
VALUE PLUS LANCING DEVICE MISC	80	VANISHPOINT INSULIN SYRINGE/1ML/29G X 1/2"	114	VENEXA TABS	142
VALUMARK LANCET SUPER THIN 30G	80	VANISHPOINT INSULIN SYRINGE/1ML/30G X 5/16"	114	VENLAFAXINE BESYLATE ER	16
VALUMARK LANCET ULTRA THIN 28G	80	VANOS CREA (fluocinonide)	48	VENTAVIS	37
VALUMARK PEN NEEDLES 29GX12MM	114	VAQTA	168	VENTOLIN HFA AERS (albuterol sulfate)	15
VALUMARK PEN NEEDLES 31GX 6MM	114	varenicline tartrate TABS	161	VENTRIXYL FE TABS	142
VALUMARK PEN NEEDLES 31GX 8MM	114	varenicline tartrate TBPK	161	VENTRIXYL TABS	142
VANOCOCIN CAPS (vancomycin hcl)	29	VARIVAX SUSR IJ 1350 PFU/0.5ML	168	VEOPOZ	57
		VARUBI TBPK	22	verapamil hcl CP24	36
		VASCEPA (icosapent ethyl)	25	verapamil hcl TABS	36
				verapamil hcl TBCR	36
				VERAPAMIL HYDROCHLORIDE ER CP24 (verapamil hcl)	36
				VERASENS GLUCOSE CONTROLLEVEL 1 LIQD	80
				VERELAN CP24 (verapamil hcl)	37

VERELAN PM CP24 (verapamil hcl) . 37	VERIFINE PLUS INSULIN PEN NEEDLES 32G X 4MM 115	VFEND SUSR (voriconazole) 23
VERIFINE INSULIN PEN NEEDLE 29G X 12MM 114	VERIFINE PLUS PEN NEEDLE/32G X 4MM 115	VFEND TABS (voriconazole) 23
VERIFINE INSULIN PEN NEEDLE 31G X 5MM 114	VERIFINE SAFETY LANCET MINI 21G X 2.4MM 80	VIBERZI 56
VERIFINE INSULIN PEN NEEDLE 31G X 8MM 114	VERIFINE SAFETY LANCET MINI 23G X 1.8MM 80	VIBRAMYCIN CAPS (doxycycline hyclate) 161
VERIFINE INSULIN PEN NEEDLE 32G X 4MM 114	VERIFINE SAFETY LANCET MINI 28G X 1.8MM 80	VIBRAMYCIN SUSR (doxycycline (monohydrate)) 161
VERIFINE INSULIN PEN NEEDLE 32G X 6MM 114	VERIFINE SAFETY LANCET MINI 30G X 1.8MM 80	VICKS NYQUIL COLD & FLU LIQD (dextromethorphan-doxylamine- acetaminophen) 41
VERIFINE INSULIN SYRINGE/0.3ML/31G X 8MM ... 114	VERIFINE UNIVERSAL LANCETS 28G 80	VICKS NYQUIL COLD & FLU NIGHTTIME RELIEF LIQD (dextromethorphan-doxylamine- acetaminophen) 41
VERIFINE INSULIN SYRINGE/0.5ML/29G X 12MM ... 114	VERIFINE UNIVERSAL LANCETS 30G 80	VICKS NYQUIL HBP COLD & FLU LIQD (dextromethorphan- doxylamine-acetaminophen) 41
VERIFINE INSULIN SYRINGE/0.5ML/31G X 8MM ... 114	VERIFINE UNIVERSAL LANCETS 33G 80	VICTOZA (liraglutide) 18
VERIFINE INSULIN SYRINGE/1ML/29G X 12MM 115	VERKAZIA EMUL 153	VIDA MIA AUTOLET LANCINGDEVICE MISC 80
VERIFINE INSULIN SYRINGE/1ML/31G X 8MM 115	VERQUVO 38	VIDA MIA UNIFINE PENTIPS32GX4MM 115
VERIFINE INSULIN SYRINGE0.3ML/31G X 8MM 115	VERSAFREE SYRP 156	VIDA MIA UNIFINE PENTIPSMINI 31GX6MM 115
VERIFINE INSULIN SYRINGE0.5ML/29G X 12MM ... 115	VERSAPAP DEVI 127	VIDA MIA UNIFINE PENTIPSORIGINAL 29GX12MM 115
VERIFINE INSULIN SYRINGE0.5ML/31G X 8MM 115	VERSAPAP/UNIVERSAL TUBING DEVI 127	VIDA MIA UNILET LANCETS SUPER THIN 30G 80
VERIFINE INSULIN SYRINGE1ML/29G X 12MM 115	VERSAPLUS SYRP 156	VIDA MIA UNILET LANCETS ULTRA THIN 28G 80
VERIFINE INSULIN SYRINGE1ML/31G X 8MM 115	VERSAPRO 158	VIDA MIA UNIPFINE PENTIPSSHORT 31GX8MM 115
VERIFINE PLUS INSULIN PEN NEEDLE 31G X 5MM 115	VERSATILE CREAM BASE 158	VIDAZA SUSR (azacitidine) 31
VERIFINE PLUS INSULIN PEN NEEDLE 31G X 8MM 115	VERSATILE RICH CREAM BASE 158	VIGAFYDE SOLN 16
	VERSIGEL 158	VIGAMOX SOLN OP (moxifloxacin
	VESICARE LS SUSP 165	
	VESICARE TABS (solifenacin succinate) 165	
	VEVYE SOLN 153	

hcl (ophth)	152	VITAMIN D3 TABS (cholecalciferol)	VITREXATE FE TABS	142
VIJOICE PACK	132	169	VITREXATE TABS	142
VIJOICE TBPK	132	VITAMIN E CAPS 200 UNIT	VITREXYL TABS	143
VIMOVO (naproxen-esomeprazole		vitamin e CAPS 90 MG, 180 MG, 200	VITREXYL/IRON TABS	142
magnesium)	5	UNIT, 268 MG, 400 UNIT, 450 MG,	VIVAGUARD INO CONTROL	
VIOKACE TABS	50	1000 UNIT	SOLUTION LIQD	80
VISION HEALTH CAPS	142	vitamin e SOLN	VIVAGUARD LANCETS	80
VISION OPTIMIZER CAPS	142	169	VIVAGUARD LANCETS 30G	81
VISTA ADVANCED AREDS2		VITAMIN E TABS 100 UNIT	VIVAGUARD LANCING DEVICE	
FORMULA CAPS	142	169	MISC	81
VISTA ADVANCED DRY EYE		VITAMINS A/C/D/FLUORIDE SOLN .	VIVAGUARD SAFETY	
FORMULA CAPS	142	146	LANCETS/28G	81
VISTARIL CAPS (hydroxyzine		vitamins w/ lipotropics TABS	VIVAGUARD SAFETY	
pamoate)	12	148	LANCETS28G	81
VITABEX CAPS	142	VITAROCA PLUS TABS (multiple	VIVELLE-DOT PTTW (estradiol) ..	54
VITABEX PLUS CAPS	142	vitamins w/ minerals)	VIVI CAP MISC	81
VITACHEW ADULT MULTI VITAMIN		142	VIVI CAP1 MISC	81
CHEW	142	VITASANA TABS	VIVJOA	23
VITACHEW MULTIPLE		VITATHELY/GINGER TABS	VIVOTIF	165
VITAMINCHILDRENS CHEW	145	148	VOGELXO GEL TD (testosterone) 10	
VITAJOY MULTI GUMMIIES ADULT		VITAZYME TABS	VOGELXO PUMP GEL TD	
CHEW	142	143	(testosterone)	10
VITAL-D RX	133	VITEYES CLASSIC ADVANCED	VOLTAREN ARTHRITIS PAIN GEL	
VITALETS CHILDRENS CHEW ..	145	CAPS	EX (diclofenac sodium (topical)) ..	44
vitamin a CAPS 3 MG, 3000 MCG,		VITEYES CLASSIC CAPS	VOQUEZNA	164
10000 UNIT	169	142	VOQUEZNA DUAL PAK	164
VITAMIN A/C/D INFANT	146	VITEYES CLASSIC MACULAR	VOQUEZNA TRIPLE PAK	164
VITAMIN A/C/D INFANT/TODDLER .		SUPPORT CAPS	VORANIGO	33
146		142	voriconazole SUSR	23
VITAMIN B		VITEYES CLASSIC MULTIVITAMIN	voriconazole TABS	23
COMPLEX/HYDROXOCOBALAMIN		TABS	VORTEX HOLDING	
SOLN 2 MG/ML-100 MG/ML-2		142	CHAMBER/MASK/CHILDS/FROG	
MG/ML-100 MG/ML-1 MG/ML-2		VITRAMYN TABS	DEVI	127
MG/ML	133	142		
		VITRANOL FE TABS		
		142		
		VITRANOL TABS		
		142		

VORTEX HOLDING CHAMBER/MASK/TODDLER/LADY BUG DEVI 127	WEGMANS UNIFINE PENTIPS PLUS 32GX4MM .....115	WOMENS 50+ MULTI VITAMIN& MINERAL FORMULA TABS .....143
VORTEX VALVED HOLDING CHAMBER DEVI 127	WEGMANS UNIFINE PENTIPS PLUS/MINI/31GX5MM .....115	WOMENS 50+ MULTIVITAMIN TABS .....143
VOXZOGO 53	WEGMANS UNIFINE PENTIPS PLUS/SHORT/31GX8MM 115	WOMENS MULTI GUMMIES CHEW 143
VP DERMABASE .....158	WEGMANS UNIFINE PENTIPS PLUS/ULTRA SHORT/31GX6MM 115	WOMENS MULTI VITAMIN & MINERAL FORMULA TABS .....143
VP INSULIN SYRINGE/U- 100/0.3ML/29G X 1/2" 115	WEGOVI .....1	WOMENS MULTIVITAMIN + COLLAGEN GUMMIES CHEW .. 143
VTAMA .....45	WELCHOL PACK (colesevelam hcl) . 25	WOUND CARE CREAM .....158
VUMERITY .....160	WELCHOL TABS (colesevelam hcl) . 25	XACIATO GEL .....168
VUSION (miconazole-zinc oxide- white petrolatum) .....44	WELLFOLA TABS .....143	XADAGO .....34
VYTORIN (ezetimibe-simvastatin) 24	WESTAB MAX .....50	XALATAN SOLN (latanoprost) ... 154
VYZULTA 154	WESTAB PLUS TABS .....148	XALKORI CPSP .....33
WAL-BORN VITAMIN C CHEW ..143	white petrolatum-mineral oil 151	XARELTO STARTER PACK TBPK 15
WALGREENS ADVANCED TRAVELLANCETS 28G .....81	WIDE-SEAL SILICONE DIAPHRAGM KIT 60 .....63	XARELTO SUSR .....15
WALGREENS COMFORT ASSUREDLANCETS MICRO THIN/33G .....81	WIDE-SEAL SILICONE DIAPHRAGM KIT 65 .....63	XARELTO TABS 10 MG .....15
WALGREENS COMFORT ASSUREDLANCETS SUPER THIN/28G .....81	WIDE-SEAL SILICONE DIAPHRAGM KIT 70 .....63	XARELTO TABS 15 MG .....15
WALGREENS LANCETS .....81	WIDE-SEAL SILICONE DIAPHRAGM KIT 75 .....63	XARELTO TABS 2.5 MG .....15
WALGREENS THIN LANCETS ..81	WIDE-SEAL SILICONE DIAPHRAGM KIT 80 .....63	XARELTO TABS 20 MG .....15
WALGREENS ULTRA THIN LANCETS .....81	WIDE-SEAL SILICONE DIAPHRAGM KIT 85 .....63	XATMEP SOLN .....31
warfarin sodium TABS .....15	WIDE-SEAL SILICONE DIAPHRAGM KIT 90 .....63	XCEL 100 .....158
WEBCOL ALCOHOL PREP LARGE 1 PLY .....82	WIDE-SEAL SILICONE DIAPHRAGM KIT 95 .....64	XCOPRI TABS .....16
WEBCOL ALCOHOL PREP LARGE 2 PLY .....82	WINDMILL TRAINER MISC .....127	XELJANZ SOLN .....2
WEBCOL ALCOHOL PREP MEDIUM 2 PLY .....82		XELJANZ TABS .....2
		XELJANZ XR TB24 .....2
		XELODA (capecitabine) .....31
		XELPROS EMUL .....154
		XELSTRYM .....1
		XEMATOP BASE .....158

XENICAL (orlistat)	1	CHILDRENS SOLN (levocetirizine hcl)	149
XEPI	43	dihydrochloride)	24
XERESE	45	XYZAL ALLERGY 24HR TABS (levocetirizine dihydrochloride)	24
XHANCE EXHU	150	YASMIN 28 (drospirenone-ethinyl estradiol)	39
XIFAXAN 200 MG	28	YAZ (drospirenone-ethinyl estradiol) 39	
XIFAXAN 550 MG	28	YELETS TEENAGE FORMULA TABS	143
XIGDUO XR (dapagliflozin propanediol-metformin hcl)	17	YELLOW PETROLATUM	158
XIGDUO XR	17	YERVOY	31
XIIDRA	153	YF-VAX INJ	168
XOFLUZA 40 MG, 80 MG	35	YONSA	32
XOLAIR SOAJ	12	YOUR LIFE MULTI ADULT GUMMIES CHEW	143
XOLAIR SOSY	12	YUFLYMA 1-PEN KIT AJKT	4
XOPENEX (levalbuterol hcl)	15	YUFLYMA 2-PEN KIT AJKT	4
XOPENEX CONCENTRATE (levalbuterol hcl)	15	YUFLYMA 2-SYRINGE KIT PSKT ..	4
XOPENEX HFA (levalbuterol tartrate)	15	YUFLYMA CD/UC/HS STARTER AJKT	4
XPHOZAH	53	YUMVS MULTI ZERO CHEW	143
XPOVIO	32	YUMVS ZERO DIABETIC MULTIVITAMIN CHEW	143
XPOVIO 60 MG TWICE WEEKLY 32		YUMVSKIDS MULTI ZERO CHEW 145	
XPOVIO 80 MG TWICE WEEKLY 32		YUPELRI	12
XTAMPZA ER 36 MG	9	YUSIMRY SC 40 MG/0.8ML	4
XTAMPZA ER 9 MG, 13.5 MG, 18 MG, 27 MG	9	ZADITOR 0.035 % (ketotifen fumarate (ophth))	154
XTANDI CAPS	32	zafirlukast	13
XTANDI TABS	32	ZANAFLEX CAPS (tizanidine hcl) 149	
XULTOPHY 100/3.6	17	ZANAFLEX TABS 4 MG (tizanidine	
XYWAV	159		
XYZAL ALLERGY 24HR		ZEGALOGUE SOAJ	18
		ZEGALOGUE SOSY	18
		ZEGERID CAPS (omeprazole-sodium bicarbonate)	164
		ZEGERID PACK (omeprazole-sodium bicarbonate)	164
		ZEJULA CAPS	33
		ZEJULA TABS	33
		ZELAPAR TBDP	34
		ZEMBRACE SYMTOUCH SOAJ .128	
		ZEMPLAR CAPS 1 MCG, 2 MCG (paricalcitol)	53
		ZEMPLAR SOLN (paricalcitol)	53
		ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT-10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 252600 UNIT-189600 UNIT-60000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT	50
		ZEPBOUND SOAJ	1
		ZE-PLUS CAPS (multiple vitamin) 143	
		ZEPOSIA 7-DAY STARTER PACK CPPK	160
		ZEPOSIA CAPS	160
		ZEPOSIA STARTER KIT CPPK ..	160
		ZERVIAE	154
		ZESTORETIC (lisinopril &	

hydrochlorothiazide) 28	ZIPSOR CAPS (diclofenac potassium) .....5	ZORYVE 45
ZESTRIL TABS (lisinopril) 26	ZITHROMAX PACK (azithromycin) 61	ZORYVE 49
ZETIA (ezetimibe) 26	ZITHROMAX SUSR (azithromycin) 61	ZOVIRAX CREA (acyclovir topical) 45
ZETONNA AERS 150	ZITHROMAX TABS 250 MG (azithromycin) .....61	ZOVIRAX OINT (acyclovir topical) .45
ZEV RX INSULIN SYRINGE/0.5ML/30G X 1/2" 115	ZITHROMAX TABS 500 MG (azithromycin) .....61	ZOVIRAX SUSP (acyclovir) 35
ZEV RX INSULIN SYRINGE/0.5ML/30G X 5/16" ... 115	ZITHROMAX TRI-PAK TABS (azithromycin) .....61	ZTALMY 16
ZEV RX INSULIN SYRINGE/1ML/30G X 1/2" 115	ZITHROMAX Z-PAK TABS (azithromycin) .....61	ZUBSOLV SUBL 10
ZEV RX INSULIN SYRINGE/1ML/30G X 5/16" 115	ZITUVIO 18	ZULRESSO 16
ZEV RX PEN NEEDLES 31G X 5MM .....115	ZOCOR TABS 10 MG, 20 MG, 40 MG (simvastatin) .....26	ZURZUVAE 16
ZEV RX PEN NEEDLES 31G X 6MM .....115	ZOE SCRIPTS IDEALBASE 158	ZYFLO TABS 13
ZEV RX PEN NEEDLES 31G X 8MM .....115	ZOLINZA 33	ZYLOPRIM 100 MG (allopurinol) .. 57
ZEV RX PEN NEEDLES 32G X 4MM .....115	zolmitriptan SOLN 128	ZYLOPRIM 300 MG (allopurinol) .. 57
ZEV RX STERILE ALCOHOL PREP PADS .....82	zolmitriptan TABS 128	ZYMAXID (gatifloxacin (ophth)) ..152
ZEV RX TWIST TOP LANCETS 30G 81	zolmitriptan TBDP 2.5 MG .....128	ZYNTEGLO 58
ZIAC (bisoprolol & hydrochlorothiazide) 28	ZOLPIDEM TARTRATE CAPS ... 60	ZYPITAMAG 2 MG, 4 MG 26
ZIEXTENZO 59	ZOMACTON SOLR SC 52	ZYRTEC ALLERGY CAPS (cetirizine hcl) 24
ZILBRYSQ 57	ZOMIG SOLN 128	ZYRTEC ALLERGY TABS (cetirizine hcl) 24
zileuton TB12 13	ZOMIG TABS 2.5 MG, 5 MG (zolmitriptan) .....128	ZYRTEC CHEW 10 MG (cetirizine hcl) 24
ZIMHI SOSY 21	ZONISADE SUSP 16	ZYRTEC CHILDRENS ALLERGY CHEW 10 MG (cetirizine hcl) 24
zinc gluconate TABS 100 MG 131	ZOO FRIENDS MULTI GUMMIES CHEW .....145	ZYRTEC CHILDRENS ALLERGY SOLN OR (cetirizine hcl) 24
zinc sulfate CAPS 131	ZORTRESS (everolimus (immunosuppressant)) .....132	ZYTIGA (abiraterone acetate) 32
zinc sulfate TABS .....131	ZORVOLEX CAPS 18 MG 5	ZYVOX SUSR (linezolid) 29
ZIOPTAN (tafluprost) 154		ZYVOX TABS (linezolid) 29