



*Blue Cross Complete of Michigan LLC is an independent licensee  
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# Preferred Drug List

## Effective May 1, 2024

The Preferred Drug List is a list of medicines that are covered by your pharmacy benefit. The list includes prescription and non-prescription medicines. In addition to this list, you can use our online search tool. You'll also find the Preferred Drug List on our website at **[mibluecrosscomplete.com](https://mibluecrosscomplete.com)**. This is an easy-to-use summary of the medicines we cover.

If you have questions, please contact Blue Cross Complete of Michigan's Pharmacy Services at **1-888-288-3231**. You can call this number from 8:30 a.m. until 6 p.m., Monday through Friday.

Encl: Nondiscrimination Notice and Language Services

WEB-011Rev042524

Blue Cross Complete participates in the Michigan Common Formulary

**CURRENT AS OF 5/1/2024**

<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
<b>Antihistamine Drugs</b>		
<b>Antihistamine Drugs</b>		
promethazine hcl oral tablet 25 mg	F	AL
<b>Ethanolamine Derivatives</b>		
aler-cap	F	OTC; AL
ALKA-SELTZER PLUS ALLERGY	Carve-out	OTC
allergy childrens oral liquid	F	OTC
allergy relief childrens oral liquid	F	OTC
allergy relief oral capsule 25 mg	F	OTC; AL
allergy relief oral liquid	F	OTC
allergy relief oral tablet 25 mg	F	OTC
aurodryl allergy childrens	F	OTC
BANOPHEN ORAL CAPSULE 50 MG	F	OTC
BANOPHEN ORAL LIQUID	F	OTC
BANOPHEN ORAL TABLET	F	OTC
BENADRYL ALLERGY CHILDRENS ORAL LIQUID	F	OTC
BENADRYL ALLERGY ORAL TABLET	F	OTC
BENADRYL ALLERGY ULTRATABS	F	OTC
carbinoxamine maleate oral solution	F	
carbinoxamine maleate oral tablet 4 mg	F	
clemastine fumarate oral syrup	F	
complete allergy relief	F	OTC
compoz	Carve-out	OTC
cvs allergy relief adult	F	OTC
cvs allergy relief childrens oral liquid	F	OTC
cvs allergy relief oral capsule 25 mg	F	OTC; AL
cvs allergy relief oral liquid	F	OTC

AL = Age Limit                      F = Formulary product                      NP = Formulary; PDL Non-Preferred; PA required  
P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

State Carve Out = Carve-out medications must be billed to Medicaid Fee For Service. For billing assistance call the Magellan Clinical Call Center at 877-864-9014.

<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
cvs allergy relief oral tablet 25 mg	F	OTC
cvs childrens allergy	F	OTC
cvs sleep aid nighttime	Carve-out	OTC
cvs sleep aid oral tablet 25 mg	Carve-out	OTC
cvs sleep-aid (doxylamine)	Carve-out	OTC
cvs sleep-aid nighttime oral capsule	Carve-out	OTC
cvs ultra sleep	Carve-out	OTC
DAYHIST ALLERGY 12 HOUR RELIEF	F	OTC
diphen oral tablet	F	OTC
diphenhydramine hcl (sleep) oral tablet 50 mg	Carve-out	OTC
diphenhydramine hcl childrens	F	OTC
diphenhydramine hcl injection	F	AL
diphenhydramine hcl oral capsule	F	AL
diphenhydramine hcl oral liquid 12.5 mg/5ml	F	OTC
diphenhydramine hcl oral tablet 25 mg	Carve-out	OTC; AL
eq allergy relief childrens oral liquid	F	OTC
eq nighttime sleep aid max st	Carve-out	OTC
eql allergy relief oral tablet 25 mg	F	OTC
eql nighttime sleep aid	Carve-out	OTC
eql sleep aid	Carve-out	OTC
ft nighttime sleep aid	Carve-out	OTC
ft sleep aid (doxylamine)	Carve-out	OTC
ft sleep-aid maximum strength	Carve-out	OTC
geri-dryl oral liquid	F	OTC
gnp allergy antihistamine	F	OTC
gnp allergy childrens	F	OTC
gnp allergy relief max st	F	OTC
gnp allergy relief oral capsule	F	OTC; AL
gnp allergy relief oral tablet 25 mg	F	OTC
gnp childrens allergy	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
gnp nighttime sleep aid	Carve-out	OTC
gnp nighttime sleep-aid max st	Carve-out	OTC
gnp sleep aid	Carve-out	OTC
gnp sleep aid nighttime	Carve-out	OTC
gnp sleep time	Carve-out	OTC
goodsense sleeptime	Carve-out	OTC
h-e-b childrens allergy	F	OTC
hm allergy relief childrens	F	OTC
hm nighttime sleep aid oral tablet	Carve-out	OTC
hm sleep aid	Carve-out	OTC
hm z-sleep oral liquid	Carve-out	OTC
KINDERMED KIDS ALLERGY	F	OTC
kls sleep aid	Carve-out	OTC
liquid allergy relief	F	OTC
m-dryl	F	OTC
NARAMIN	F	OTC
night time sleep aid	Carve-out	OTC
nighttime sleep aid oral tablet 25 mg	Carve-out	OTC
NYTOL	Carve-out	OTC
NYTOL MAXIMUM STRENGTH	Carve-out	OTC
NYTOL QUICKCAPS	Carve-out	OTC
ormir	Carve-out	OTC
PEDIACARE CHILDRENS ALLERGY	F	OTC
pharbedryl oral capsule 25 mg	F	OTC; AL
px allergy oral capsule	F	OTC; AL
px allergy oral liquid	F	OTC
px allergy oral tablet	F	OTC
PX DAYHIST ALLERGY	F	OTC
qc allergy childrens	F	OTC
qc rest simply	Carve-out	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
qc sleep aid max st	Carve-out	OTC
ra allergy medication oral liquid	F	OTC
ra allergy oral liquid	F	OTC
ra allergy relief childrens oral liquid	F	OTC
ra allergy relief oral capsule 25 mg	F	OTC; AL
ra complete allergy	F	OTC
RA DIPHEDRYL ALLERGY	F	OTC
ra night sleep aid	Carve-out	OTC
ra nighttime sleep aid oral tablet	Carve-out	OTC
ra sleep aid (diphenhydramine)	Carve-out	OTC
ra sleep aid oral capsule	Carve-out	OTC
ra sleep aid oral tablet	Carve-out	OTC
ra sleep-aid nighttime	Carve-out	OTC
sb allergy medicine oral liquid	F	OTC
sb allergy medicine oral tablet	Carve-out	OTC
sb sleep	Carve-out	OTC
siladryl allergy	F	OTC
SIMPLY SLEEP	Carve-out	OTC
sleep aid (diphenhydramine)	Carve-out	OTC
sleep aid (doxylamine)	Carve-out	OTC
sleep aid oral capsule 25 mg	Carve-out	OTC
sleep aid oral liquid	Carve-out	OTC
sleep aid oral tablet	Carve-out	OTC
sleep ii	Carve-out	OTC
sleep tabs oral tablet 25 mg	Carve-out	OTC
sleep-aid	Carve-out	OTC
sleep-tabs	Carve-out	OTC
sm allergy relief childrens	F	OTC
sm allergy relief oral liquid	F	OTC
sm allergy relief oral tablet 1.34 mg	F	OTC

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sm nighttime sleep aid	Carve-out	OTC
sm sleep aid	Carve-out	OTC
sm sleep aid maximum strength	Carve-out	OTC
sm z-sleep	Carve-out	OTC
SOMINEX	Carve-out	OTC
SOMINEX MAX ST	Carve-out	OTC
SOMINEX NIGHTTIME SLEEP-AID	Carve-out	OTC
tgt sleep aid max strength	Carve-out	OTC
total allergy	F	OTC
TOTAL ALLERGY MEDICINE	F	OTC
UNISOM SLEEPGELS	Carve-out	OTC
UNISOM SLEEPMELTS	Carve-out	OTC
UNISOM SLEEPMINIS	Carve-out	OTC
UNISOM SLEEPTABS	Carve-out	OTC
WAL-DRYL ALLERGY CHILDRENS	F	OTC
WAL-DRYL ALLERGY ORAL LIQUID	F	OTC
WAL-SLEEP Z	Carve-out	OTC
wal-som	Carve-out	OTC
wal-som maximum strength	Carve-out	OTC
ZZZQUIL	Carve-out	OTC
<b>First Gen. Antihist. Derivatives, Misc.</b>		
cyproheptadine hcl oral	F	AL
<b>First Generation Antihistamines</b>		
aler-cap	F	OTC; AL
ALKA-SELTZER PLUS ALLERGY	Carve-out	OTC
aller-chlor oral tablet	F	OTC
allergy childrens oral liquid	F	OTC
allergy oral tablet 4 mg	F	OTC
allergy relief childrens oral liquid	F	OTC
allergy relief oral capsule 25 mg	F	OTC; AL

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allergy relief oral liquid	F	OTC
allergy relief oral tablet 25 mg, 4 mg	F	OTC
aurodryl allergy childrens	F	OTC
BANOPHEN ORAL CAPSULE 50 MG	F	OTC
BANOPHEN ORAL LIQUID	F	OTC
BANOPHEN ORAL TABLET	F	OTC
BENADRYL ALLERGY CHILDRENS ORAL LIQUID	F	OTC
BENADRYL ALLERGY ORAL TABLET	F	OTC
BENADRYL ALLERGY ULTRATABS	F	OTC
carbinoxamine maleate oral solution	F	
carbinoxamine maleate oral tablet 4 mg	F	
chlorhist	F	OTC
chlorpheniramine maleate oral	F	OTC
CHLOR-TRIMETON ORAL TABLET	F	OTC
clemastine fumarate oral syrup	F	
complete allergy relief	F	OTC
compoz	Carve-out	OTC
cvs allergy relief adult	F	OTC
cvs allergy relief childrens oral liquid	F	OTC
cvs allergy relief oral capsule 25 mg	F	OTC; AL
cvs allergy relief oral liquid	F	OTC
cvs allergy relief oral tablet 25 mg, 4 mg	F	OTC
cvs childrens allergy	F	OTC
cvs sleep aid nighttime	Carve-out	OTC
cvs sleep aid oral tablet 25 mg	Carve-out	OTC
cvs sleep-aid (doxylamine)	Carve-out	OTC
cvs sleep-aid nighttime oral capsule	Carve-out	OTC
cvs ultra sleep	Carve-out	OTC
cyproheptadine hcl oral	F	AL

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DAYHIST ALLERGY 12 HOUR RELIEF	F	OTC
dimenhydrinate oral tablet 50 mg	F	OTC
diphen oral tablet	F	OTC
diphenhydramine hcl (sleep) oral tablet 50 mg	Carve-out	OTC
diphenhydramine hcl childrens	F	OTC
diphenhydramine hcl injection	F	AL
diphenhydramine hcl oral capsule	F	AL
diphenhydramine hcl oral liquid 12.5 mg/5ml	F	OTC
diphenhydramine hcl oral tablet 25 mg	Carve-out	OTC; AL
eq allergy relief childrens oral liquid	F	OTC
eq chlortabs	F	OTC
eq nighttime sleep aid max st	Carve-out	OTC
eql allergy relief oral tablet 25 mg	F	OTC
eql nighttime sleep aid	Carve-out	OTC
eql sleep aid	Carve-out	OTC
ft nighttime sleep aid	Carve-out	OTC
ft sleep aid (doxylamine)	Carve-out	OTC
ft sleep-aid maximum strength	Carve-out	OTC
geri-dryl oral liquid	F	OTC
gnp allergy antihistamine	F	OTC
gnp allergy childrens	F	OTC
gnp allergy relief max st	F	OTC
gnp allergy relief oral capsule	F	OTC; AL
gnp allergy relief oral tablet 25 mg, 4 mg	F	OTC
gnp childrens allergy	F	OTC
gnp nighttime sleep aid	Carve-out	OTC
gnp nighttime sleep-aid max st	Carve-out	OTC
gnp sleep aid	Carve-out	OTC
gnp sleep aid nighttime	Carve-out	OTC
gnp sleep time	Carve-out	OTC

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goodsense sleeptime	Carve-out	OTC
h-e-b childrens allergy	F	OTC
hm allergy relief childrens	F	OTC
hm allergy relief oral tablet 4 mg	F	OTC
hm nightttime sleep aid oral tablet	Carve-out	OTC
hm sleep aid	Carve-out	OTC
hm z-sleep oral liquid	Carve-out	OTC
hydroxyzine hcl oral syrup	P	
hydroxyzine hcl oral tablet	P	
hydroxyzine pamoate oral	P	
KINDERMED KIDS ALLERGY	F	OTC
kls sleep aid	Carve-out	OTC
liquid allergy relief	F	OTC
m-dryl	F	OTC
meclizine hcl oral tablet 12.5 mg, 25 mg	F	
meclizine hcl oral tablet chewable	F	
NARAMIN	F	OTC
night time sleep aid	Carve-out	OTC
nighttime sleep aid oral tablet 25 mg	Carve-out	OTC
NYTOL	Carve-out	OTC
NYTOL MAXIMUM STRENGTH	Carve-out	OTC
NYTOL QUICKCAPS	Carve-out	OTC
ormir	Carve-out	OTC
PEDIACARE CHILDRENS ALLERGY	F	OTC
pharbechlor	F	OTC
pharbedryl oral capsule 25 mg	F	OTC; AL
promethazine hcl oral	F	AL
promethazine hcl rectal suppository 12.5 mg, 25 mg	F	QL; AL
px allergy oral capsule	F	OTC; AL

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
px allergy oral liquid	F	OTC
px allergy oral tablet	F	OTC
PX DAYHIST ALLERGY	F	OTC
qc allergy childrens	F	OTC
qc chlor-pheniramine	F	OTC
qc rest simply	Carve-out	OTC
qc sleep aid max st	Carve-out	OTC
ra allergy medication oral liquid	F	OTC
ra allergy oral liquid	F	OTC
ra allergy relief childrens oral liquid	F	OTC
ra allergy relief oral capsule 25 mg	F	OTC; AL
ra allergy relief oral tablet 4 mg	F	OTC
ra chlorpheniramine maleate	F	OTC
ra complete allergy	F	OTC
RA DIPHEDRYL ALLERGY	F	OTC
ra night sleep aid	Carve-out	OTC
ra nighttime sleep aid oral tablet	Carve-out	OTC
ra sleep aid (diphenhydramine)	Carve-out	OTC
ra sleep aid oral capsule	Carve-out	OTC
ra sleep aid oral tablet	Carve-out	OTC
ra sleep-aid nighttime	Carve-out	OTC
sb allergy medicine oral liquid	F	OTC
sb allergy medicine oral tablet	Carve-out	OTC
sb chlorpheniramine	F	OTC
sb sleep	Carve-out	OTC
siladryl allergy	F	OTC
SIMPLY SLEEP	Carve-out	OTC
sleep aid (diphenhydramine)	Carve-out	OTC
sleep aid (doxylamine)	Carve-out	OTC
sleep aid oral capsule 25 mg	Carve-out	OTC

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sleep aid oral liquid	Carve-out	OTC
sleep aid oral tablet	Carve-out	OTC
sleep ii	Carve-out	OTC
sleep tabs oral tablet 25 mg	Carve-out	OTC
sleep-aid	Carve-out	OTC
sleep-tabs	Carve-out	OTC
sm allergy 4 hour	F	OTC
sm allergy relief childrens	F	OTC
sm allergy relief oral liquid	F	OTC
sm allergy relief oral tablet 1.34 mg	F	OTC
sm nighttime sleep aid	Carve-out	OTC
sm sleep aid	Carve-out	OTC
sm sleep aid maximum strength	Carve-out	OTC
sm z-sleep	Carve-out	OTC
SOMINEX	Carve-out	OTC
SOMINEX MAX ST	Carve-out	OTC
SOMINEX NIGHTTIME SLEEP-AID	Carve-out	OTC
tgt sleep aid max strength	Carve-out	OTC
total allergy	F	OTC
TOTAL ALLERGY MEDICINE	F	OTC
UNISOM SLEEPGELS	Carve-out	OTC
UNISOM SLEEPMELTS	Carve-out	OTC
UNISOM SLEEPMINIS	Carve-out	OTC
UNISOM SLEEPTABS	Carve-out	OTC
VISTARIL	NP	PA
WAL-DRYL ALLERGY CHILDRENS	F	OTC
WAL-DRYL ALLERGY ORAL LIQUID	F	OTC
WAL-FINATE	F	OTC
WAL-SLEEP Z	Carve-out	OTC
wal-som	Carve-out	OTC

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wal-som maximum strength	Carve-out	OTC
ZZZQUIL	Carve-out	OTC
<b>Other Antihistamines</b>		
acid reducer oral tablet 10 mg	F	OTC
ALAWAY	P	OTC
ALAWAY CHILDRENS ALLERGY	P	OTC
cimetidine 200	F	OTC
cimetidine hcl oral	F	
cimetidine oral	F	
cvs olopatadine hcl	P	OTC
eq acid reducer oral tablet 10 mg	F	OTC
eq famotidine max st	F	OTC
eye allergy itch relief	P	OTC
eye allergy itch/redness rel	P	OTC
eye itch relief	P	OTC
famotidine maximum strength	F	OTC
famotidine oral suspension reconstituted	F	QL; AL
famotidine oral tablet 10 mg	F	OTC
famotidine oral tablet 20 mg, 40 mg	F	
famotidine orig st	F	OTC
gnp olopatadine hcl	P	OTC
heartburn relief oral tablet 10 mg	F	OTC
hm famotidine	F	OTC
hydroxyzine hcl oral syrup	P	
hydroxyzine hcl oral tablet	P	
hydroxyzine pamoate oral	P	
ketotifen fumarate ophthalmic	P	OTC
kp ketotifen fumarate	P	OTC
LASTACAFT	NP	PA
olopatadine hcl nasal	NP	PA

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olopatadine hcl ophthalmic	P	
PATADAY	NP	PA; OTC
PATANASE	NP	PA
px acid reducer max st oral tablet 20 mg	F	OTC
px acid reducer oral tablet 10 mg	F	OTC
qc olopatadine hcl	P	OTC
ra acid reducer max st oral tablet 20 mg	F	OTC
ra acid reducer oral tablet 10 mg	F	OTC
RYALTRIS	NP	PA
sm acid reducer max st oral tablet 20 mg	F	OTC
sm eye itch relief	P	OTC
VISTARIL	NP	PA
ZADITOR OPHTHALMIC SOLUTION 0.035 %	NP	PA; OTC
<b>Phenothiazine Derivatives</b>		
promethazine hcl oral	F	AL
promethazine hcl rectal suppository 12.5 mg, 25 mg	F	QL; AL
<b>Propylamine Derivatives</b>		
aller-chlor oral tablet	F	OTC
allergy oral tablet 4 mg	F	OTC
allergy relief oral tablet 4 mg	F	OTC
chlorhist	F	OTC
chlorpheniramine maleate oral	F	OTC
CHLOR-TRIMETON ORAL TABLET	F	OTC
cvs allergy relief oral tablet 4 mg	F	OTC
eq chlortabs	F	OTC
gnp allergy relief oral tablet 4 mg	F	OTC
hm allergy relief oral tablet 4 mg	F	OTC
pharbechlor	F	OTC
qc chlor-pheniramine	F	OTC

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
ra allergy relief oral tablet 4 mg	F	OTC
ra chlorpheniramine maleate	F	OTC
sb chlorpheniramine	F	OTC
sm allergy 4 hour	F	OTC
WAL-FINATE	F	OTC
<b>Second Generation Antihistamines</b>		
12hr allergy relief	P	OTC
24hr allergy relief	P	OTC
all-day allergy childrens	P	OTC
aller-ease oral tablet 60 mg	P	OTC
allergy (cetirizine)	P	OTC
allergy 24hour indoor/outdoor	P	OTC
allergy 24-hr	P	OTC
allergy childrens oral suspension	P	OTC
allergy childrens oral syrup	P	OTC
allergy rel child (loratadine)	P	OTC
allergy relief (cetirizine) oral capsule	NP	PA; OTC
allergy relief (cetirizine) oral tablet	P	OTC
allergy relief (loratadine) oral tablet	P	OTC
allergy relief 24-hr	P	OTC
allergy relief cetirizine	P	OTC
allergy relief childrens oral solution 1 mg/ml	P	OTC
allergy relief oral tablet 10 mg, 180 mg, 5 mg, 60 mg	P	OTC
allergy relief/indoor/outdoor oral tablet 10 mg	P	OTC
ALOMIDE	NP	PA
cetirizine hcl allergy child	P	
cetirizine hcl childrens alrly oral solution	P	OTC
cetirizine hcl childrens oral solution 5 mg/5ml	NP	PA; OTC
cetirizine hcl childrens oral tablet chewable	NP	PA; OTC

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cetirizine hcl oral solution 1 mg/ml	P	
cetirizine hcl oral tablet	P	OTC
cetirizine hcl oral tablet chewable	NP	PA; OTC
childrens 24 hour allergy	P	OTC
childrens loratadine oral solution	P	OTC
CLARINEX ORAL TABLET	NP	PA
CLARITIN REDITABS ORAL TABLET DISPERSIBLE 10 MG	P	OTC
cvs allergy childrens oral syrup	P	OTC
cvs allergy relief childrens oral solution	P	OTC
cvs allergy relief childrens oral suspension	P	OTC
cvs allergy relief oral tablet 10 mg, 180 mg, 5 mg	P	OTC
cvs allergy relief(cetirizine)	P	OTC
cvs indoor/outdoor allergy rlf oral tablet	P	OTC
desloratadine oral tablet	NP	PA
desloratadine oral tablet dispersible 2.5 mg	NP	PA; AL
desloratadine oral tablet dispersible 5 mg	NP	PA
eq allergy childrens oral syrup	P	OTC
eq allergy relief (cetirizine)	P	OTC
eq allergy relief childrens oral solution	P	OTC
eq allergy relief oral tablet 10 mg, 180 mg	P	OTC
eql all day allergy	P	OTC
eql aller-ease	P	OTC
eql allergy relief oral tablet 10 mg, 180 mg	P	OTC
fexofenadine hcl oral tablet 180 mg, 60 mg	P	OTC
gnp all day allergy childrens oral solution	P	OTC
gnp all day allergy relief	NP	PA; OTC
gnp allergy relief 24 hr	P	OTC
gnp loratadine	P	OTC
gnp loratadine childrens oral solution	P	OTC

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
gnp loratadine childrens oral tablet chewable	P	OTC
goodsense all day allergy	P	OTC
goodsense aller-ease	P	OTC
goodsense allergy relief oral tablet 10 mg	P	OTC
hm all day allergy	P	OTC
hm all day allergy childrens	P	OTC
hm allergy relief (cetirizine)	P	OTC
hm allergy relief oral tablet 180 mg, 60 mg	P	OTC
hm cetirizine hcl	P	OTC
hm cetirizine hcl childrens	P	OTC
hm fexofenadine hcl	P	OTC
hm loratadine	P	OTC
KLS ALLER-TEC CHILDRENS ORAL SOLUTION 5 MG/5ML	P	OTC
levocetirizine dihydrochloride oral solution	NP	PA
levocetirizine dihydrochloride oral tablet	P	
loradamed	P	OTC
loratadine childrens oral solution	P	OTC
loratadine childrens oral syrup	P	OTC
loratadine oral tablet	P	OTC
loratadine oral tablet dispersible 10 mg	P	OTC
mm cetirizine hcl	P	OTC
mm fexofenadine hcl	P	OTC
px allergy relief cetirizine	P	OTC
px allergy relief loratadine	P	OTC
px allergy relief oral tablet	P	OTC
px childrens allergy	P	OTC
qc all day allergy	P	OTC
qc allergy relief oral tablet 180 mg	P	OTC
qc childrens allergy	P	OTC

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
qc fexofenadine hydrochloride	P	OTC
qc loratadine allergy relief	P	OTC
ra allergy relief (cetirizine)	P	OTC
ra allergy relief (loratadine)	P	OTC
ra allergy relief childrens oral solution 5 mg/5ml	P	OTC
ra allergy relief oral capsule 10 mg	NP	PA; OTC
ra allergy relief oral tablet 180 mg	P	OTC
sb allergy oral tablet	P	OTC
sb loratadine oral tablet	P	OTC
sm all day allergy childrens oral solution 5 mg/5ml	P	OTC
sm all day allergy relief	P	OTC
sm allergy childrens oral solution	P	OTC
sm allergy relief oral tablet 60 mg	P	OTC
sm childrens loratadine oral syrup	P	OTC
sm fexofenadine hcl	P	OTC
sm loratadine oral solution	P	OTC
sm loratadine oral syrup	P	OTC
WAL-FEX ALLERGY	P	OTC
WAL-ITIN CHILDRENS	P	OTC
WAL-ITIN ORAL SYRUP	P	OTC
WAL-ZYR ALL DAY ALLERGY CHILD	P	OTC
WAL-ZYR ALLERGY CHILDRENS	P	OTC
WAL-ZYR CHILDRENS ORAL SOLUTION	P	OTC
WAL-ZYR CHILDRENS ORAL TABLET CHEWABLE 10 MG	NP	PA; OTC
WAL-ZYR ORAL CAPSULE	NP	PA; OTC
WAL-ZYR ORAL TABLET	P	OTC
XYZAL ALLERGY 24HR CHILDRENS	NP	PA; OTC

### **Anti-Infective Agents**

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PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
<b>1St Generation Cephalosporin Antibiotics</b>		
cefadroxil oral capsule	P	QL
cefadroxil oral suspension reconstituted	P	
cefadroxil oral tablet	NP	PA; QL
cephalexin	P	
<b>2Nd Generation Cephalosporin Antibiotics</b>		
cefaclor er	NP	PA; QL
cefaclor oral capsule	NP	PA; QL
cefaclor oral suspension reconstituted	NP	PA
cefprozil oral suspension reconstituted	P	
cefprozil oral tablet	P	QL
cefuroxime axetil oral tablet	P	QL
<b>3Rd Generation Cephalosporin Antibiotics</b>		
cefdinir oral capsule	P	QL
cefdinir oral suspension reconstituted	P	
cefixime oral capsule	P	
cefixime oral suspension reconstituted	NP	PA
cefpodoxime proxetil oral suspension reconstituted	NP	PA
cefpodoxime proxetil oral tablet	NP	PA; QL
<b>Adamantane Antivirals</b>		
amantadine hcl oral capsule	P	102 day supply allowed
amantadine hcl oral solution	P	102 day supply allowed
amantadine hcl oral tablet	NP	PA; 102 day supply allowed
GOCOVRI	NP	PA; Specialty Drug; 102 day supply allowed
OSMOLEX ER ORAL TABLET EXTENDED RELEASE 24 HOUR 129 MG, 193 MG	NP	PA; 102 day supply allowed

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
rimantadine hcl	P	
<b>Allylamine Antifungals</b>		
terbinafine hcl oral	P	QL
<b>Amebicides</b>		
FLAGYL ORAL CAPSULE	NP	PA
HUMATIN	F	
LIKMEZ	NP	PA; QL
metronidazole oral capsule	NP	PA
metronidazole oral tablet	P	
metronidazole vaginal	P	
NUVESSA	P	
paromomycin sulfate oral	F	
VANDAZOLE	NP	PA
<b>Aminoglycoside Antibiotics</b>		
BETHKIS	P	Specialty Drug
HUMATIN	F	
KITABIS PAK	P	Specialty Drug
neomycin sulfate oral	P	
paromomycin sulfate oral	F	
TOBI	NP	PA; Specialty Drug
TOBI PODHALER	P	Specialty Drug
tobramycin inhalation nebulization solution 300 mg/4ml	NP	PA
tobramycin inhalation nebulization solution 300 mg/5ml	P	Specialty Drug
<b>Aminopenicillin Antibiotics</b>		
amoxicill-clarithro-lansopraz oral therapy pack	NP	PA; QL
amoxicillin oral capsule	F	102 day supply allowed
amoxicillin oral suspension reconstituted	F	102 day supply allowed
amoxicillin oral tablet	F	102 day supply allowed

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
amoxicillin oral tablet chewable 125 mg, 250 mg	F	102 day supply allowed
amoxicillin-pot clavulanate oral	F	
ampicillin oral capsule 500 mg	F	
OMECLAMOX-PAK	NP	PA
<b>Anthelmintics</b>		
ivermectin oral	F	QL
<b>Antifungals, Miscellaneous</b>		
BREXAFEMME	NP	PA; QL
griseofulvin microsize oral suspension	P	
griseofulvin microsize oral tablet	NP	PA
griseofulvin ultramicrosize	NP	PA
<b>Anti-Infectives (Systemic), Misc.</b>		
bis subcit-metronid-tetracyc	NP	PA
bismuth/metronidaz/tetracyclin	NP	PA
PYLERA	P	
<b>Antimalarials</b>		
chloroquine phosphate oral	F	QL
doxycycline hyclate oral capsule	F	
doxycycline hyclate oral tablet 100 mg	F	
doxycycline monohydrate oral capsule 100 mg, 50 mg	F	
doxycycline monohydrate oral suspension reconstituted	F	
doxycycline monohydrate oral tablet 100 mg, 50 mg	F	
hydroxychloroquine sulfate oral tablet 200 mg	F	
KRINTAFEL	F	PA; QL; AL
LYMEPAK	F	
mefloquine hcl	F	PA; QL
minocycline hcl oral capsule	F	

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
MONDOXYNE NL ORAL CAPSULE 100 MG	F	
primaquine phosphate oral tablet 26.3 (15 base) mg	F	
pyrimethamine oral	F	PA; QL
quinidine sulfate oral	F	
<b>Antimycobacterials, Miscellaneous</b>		
dapsone oral	F	
<b>Antiprotozoals, Miscellaneous</b>		
atovaquone oral	F	
benznidazole	F	PA
bis subcit-metronid-tetracyc	NP	PA
bismuth/metronidaz/tetracyclin	NP	PA
dapsone oral	F	
FLAGYL ORAL CAPSULE	NP	PA
LIKMEZ	NP	PA; QL
metronidazole oral capsule	NP	PA
metronidazole oral tablet	P	
nitazoxanide oral	NP	PA; QL
PYLERA	P	
sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml	F	
sulfamethoxazole-trimethoprim oral tablet	F	
SULFATRIM PEDIATRIC	F	
tinidazole oral	P	
<b>Antiretrovirals, Miscellaneous</b>		
SUNLENCA	Carve-out	
<b>Antituberculosis Agents</b>		
CIPRO ORAL SUSPENSION RECONSTITUTED	P	
CIPRO ORAL TABLET 250 MG	NP	PA; QL

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
CIPRO ORAL TABLET 500 MG	NP	PA
ciprofloxacin hcl oral	P	QL
ciprofloxacin oral	P	
clarithromycin er	NP	PA
clarithromycin oral suspension reconstituted	P	
clarithromycin oral tablet	P	QL
cycloserine oral	F	QL
ethambutol hcl oral	F	
isoniazid oral syrup	F	AL
isoniazid oral tablet	F	
levofloxacin oral solution	P	
levofloxacin oral tablet	P	QL
moxifloxacin hcl oral	NP	PA; QL
pretomanid	F	PA
PRIFTIN	F	QL
pyrazinamide oral	F	
rifabutin	F	
rifampin oral	F	
SIRTURO	F	PA
TRECTOR	F	
<b>Antivirals, Miscellaneous</b>		
LIVTENCITY	F	PA
PAXLOVID (150/100)	F	Specialty Drug
PAXLOVID (300/100)	F	Specialty Drug
XOFLUZA (40 MG DOSE) ORAL TABLET THERAPY PACK 1 X 40 MG	P	
XOFLUZA (80 MG DOSE) ORAL TABLET THERAPY PACK 1 X 80 MG	P	
<b>Azole Antifungals</b>		
CRESEMBA ORAL CAPSULE 186 MG	NP	PA

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
DIFLUCAN ORAL SUSPENSION RECONSTITUTED	NP	PA
DIFLUCAN ORAL TABLET 100 MG, 200 MG	NP	PA
DIFLUCAN ORAL TABLET 150 MG	NP	PA; QL
fluconazole oral suspension reconstituted	P	
fluconazole oral tablet 100 mg, 200 mg, 50 mg	P	
fluconazole oral tablet 150 mg	P	QL
itraconazole oral	NP	PA; QL
ketoconazole oral	P	
NOXAFIL ORAL	NP	PA
posaconazole oral tablet delayed release	NP	PA
SPORANOX	NP	PA; QL
tolsura	NP	PA
VFEND	NP	PA
VIVJOA	NP	PA; QL
voriconazole oral	NP	PA
<b>Erythromycin Antibiotics</b>		
E.E.S. 400 ORAL TABLET	NP	PA
E.E.S. GRANULES	NP	PA
ERYPED 200	NP	PA
ERYPED 400	NP	PA
ERY-TAB	NP	PA
ERYTHROCIN STEARATE ORAL TABLET 250 MG	P	
erythromycin base oral capsule delayed release particles	NP	PA
erythromycin base oral tablet	NP	PA
erythromycin base oral tablet delayed release 250 mg, 500 mg	NP	PA
erythromycin ethylsuccinate oral suspension reconstituted 200 mg/5ml	P	

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
erythromycin ethylsuccinate oral suspension reconstituted 400 mg/5ml	NP	PA
erythromycin ethylsuccinate oral tablet	P	
erythromycin oral	NP	PA
<b>Glycopeptide Antibiotics</b>		
FIRVANQ	P	
VANCOGIN	NP	PA
vancomycin hcl intravenous solution reconstituted 1 gm, 10 gm, 5 gm, 500 mg, 750 mg	F	
vancomycin hcl oral capsule	P	
vancomycin hcl oral solution reconstituted 25 mg/ml, 250 mg/5ml	NP	PA
<b>Hcv Polymerase Inhibitor Antivirals</b>		
EPCLUSA	Carve-out	
HARVONI	Carve-out	
ledipasvir-sofosbuvir	Carve-out	
sofosbuvir-velpatasvir	Carve-out	
SOVALDI ORAL TABLET	Carve-out	
VIEKIRA PAK	Carve-out	
VOSEVI	Carve-out	
<b>Hcv Protease Inhibitor Antivirals</b>		
MAVYRET	Carve-out	
VIEKIRA PAK	Carve-out	
VOSEVI	Carve-out	
ZEPATIER	Carve-out	
<b>Hcv Replication Complex Inhibitors</b>		
DAKLINZA ORAL TABLET 30 MG, 60 MG	Carve-out	
EPCLUSA	Carve-out	
HARVONI	Carve-out	
ledipasvir-sofosbuvir	Carve-out	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
MAVYRET	Carve-out	
sofosbuvir-velpatasvir	Carve-out	
VIEKIRA PAK	Carve-out	
VOSEVI	Carve-out	
ZEPATIER	Carve-out	
<b>Hiv Capsid Inhibitors</b>		
SUNLENCA	Carve-out	
<b>Hiv Entry And Fusion Inhibitors</b>		
FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED	Carve-out	
maraviroc oral tablet 300 mg	Carve-out	
RUKOBIA	Carve-out	
SELZENTRY ORAL TABLET 150 MG, 300 MG	Carve-out	
TROGARZO	Carve-out	
<b>Hiv Integrase Inhibitor Antiretrovirals</b>		
BIKTARVY ORAL TABLET 50-200-25 MG	Carve-out	
CABENUVA	Carve-out	Specialty Drug
DOVATO	Carve-out	
ISENTRESS	Carve-out	
JULUCA	Carve-out	
STRIBILD	Carve-out	
TIVICAY ORAL TABLET 50 MG	Carve-out	
TIVICAY PD	Carve-out	
TRIUMEQ	Carve-out	
VOCABRIA	Carve-out	
<b>Hiv Nucleoside Rev. Transcrip. Inhib.</b>		
ATRIPLA	Carve-out	
BIKTARVY ORAL TABLET 50-200-25 MG	Carve-out	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
CABENUVA	Carve-out	Specialty Drug
COMPLERA	Carve-out	
DELSTRIGO	Carve-out	
EDURANT	Carve-out	
efavirenz oral capsule 200 mg	Carve-out	
etravirine	Carve-out	
INTELENCE	Carve-out	
JULUCA	Carve-out	
methocarbamol oral tablet 500 mg	P	
nevirapine	Carve-out	
nevirapine er	Carve-out	
PIFELTRO	Carve-out	
RESCRIPTOR ORAL TABLET 200 MG	Carve-out	
SUSTIVA	Carve-out	
VIRAMUNE ORAL SUSPENSION	Carve-out	
VIRAMUNE XR ORAL TABLET EXTENDED RELEASE 24 HOUR 400 MG	Carve-out	
<b>Hiv Nucleoside, Nucleotide Rt Inhibitors</b>		
abacavir sulfate	Carve-out	
abacavir sulfate-lamivudine	Carve-out	
abacavir-lamivudine-zidovudine	Carve-out	
ATRIPLA	Carve-out	
BIKTARVY ORAL TABLET 50-200-25 MG	Carve-out	
COMBIVIR	Carve-out	
COMPLERA	Carve-out	
DELSTRIGO	Carve-out	
didanosine oral capsule delayed release 200 mg, 250 mg, 400 mg	Carve-out	
DOVATO	Carve-out	
emtricitabine-tenofovir df oral tablet 200-300 mg	Carve-out	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
EMTRIVA	Carve-out	
EPIVIR	Carve-out	
EPZICOM	Carve-out	
lamivudine oral solution	Carve-out	
lamivudine oral tablet 100 mg	F	Specialty Drug; QL
lamivudine oral tablet 150 mg, 300 mg	Carve-out	
lamivudine-zidovudine	Carve-out	
RETROVIR INTRAVENOUS	Carve-out	
RETROVIR ORAL CAPSULE	Carve-out	
RETROVIR ORAL SYRUP	Carve-out	
stavudine oral capsule	Carve-out	
STRIBILD	Carve-out	
SYMTUZA	Carve-out	
tenofovir disoproxil fumarate	Carve-out	
TRIUMEQ	Carve-out	
TRIZIVIR	Carve-out	
TRUVADA ORAL TABLET 200-300 MG	Carve-out	
VIDEX	Carve-out	
VIDEX EC	Carve-out	
VIREAD	Carve-out	
ZIAGEN	Carve-out	
zidovudine	Carve-out	
<b>Hiv Protease Inhibitor Antiretrovirals</b>		
APTIVUS	Carve-out	
atazanavir sulfate	Carve-out	
CRIXIVAN ORAL CAPSULE 200 MG, 400 MG	Carve-out	
EVOTAZ	Carve-out	
fosamprenavir calcium	Carve-out	
INVIRASE ORAL TABLET	Carve-out	
KALETRA ORAL SOLUTION	Carve-out	

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
KALETRA ORAL TABLET	Carve-out	
LEXIVA	Carve-out	
lopinavir-ritonavir oral solution	Carve-out	
lopinavir-ritonavir oral tablet 200-50 mg	Carve-out	
NORVIR ORAL PACKET	Carve-out	
NORVIR ORAL SOLUTION	Carve-out	
NORVIR ORAL TABLET	Carve-out	
PREZCOBIX	Carve-out	
PREZISTA ORAL SUSPENSION	Carve-out	
PREZISTA ORAL TABLET 150 MG, 600 MG, 75 MG, 800 MG	Carve-out	
REYATAZ ORAL CAPSULE 150 MG, 200 MG, 300 MG	Carve-out	
REYATAZ ORAL PACKET	Carve-out	
ritonavir	Carve-out	
SYMTUZA	Carve-out	
VIRACEPT ORAL TABLET	Carve-out	
<b>Interferon Antivirals</b>		
BESREMI	F	
INTRON-A INJECTION SOLUTION RECONSTITUTED 50000000 UNIT	F	
PEGASYS PROCLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 180 MCG/0.5ML	Carve-out	
PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/ML	Carve-out	
PEGASYS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Carve-out	
PEGINTRON SUBCUTANEOUS KIT 50 MCG/0.5ML	Carve-out	
<b>Lincomycin Antibiotics</b>		
clindamycin hcl oral	F	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
clindamycin palmitate hcl	F	AL
<b>Monobactam Antibiotics</b>		
CAYSTON	P	Specialty Drug
<b>Monoclonal Antibody Antivirals</b>		
BEYFORTUS	F	PA; Specialty Drug
REGEN-COV INJECTION SOLUTION 1332 & 1332 MG/11.1ML, 600-600 MG/10ML	F	
SYNAGIS	F	PA; Specialty Drug
<b>Natural Penicillin Antibiotics</b>		
penicillin v potassium	F	102 day supply allowed
<b>Neuraminidase Inhibitor Antivirals</b>		
oseltamivir phosphate oral capsule 30 mg	P	102 day supply allowed; QL
oseltamivir phosphate oral capsule 45 mg, 75 mg	P	QL
oseltamivir phosphate oral suspension reconstituted	P	QL
RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED 5 MG/ACT	P	QL
TAMIFLU ORAL CAPSULE	NP	PA; QL
TAMIFLU ORAL SUSPENSION RECONSTITUTED 6 MG/ML	NP	PA; QL
<b>Nucleoside And Nucleotide Antivirals</b>		
acyclovir oral	P	102 day supply allowed
adefovir dipivoxil	F	Specialty Drug; QL
entecavir	F	Specialty Drug; QL
famciclovir oral	P	102 day supply allowed
LAGEVRIO	F	
MODERIBA (1200 MG PACK)	Carve-out	
MODERIBA ORAL TABLET 200 MG	Carve-out	
REBETOL ORAL SOLUTION	Carve-out	
RIBASPHERE ORAL CAPSULE	Carve-out	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
RIBASPHERE ORAL TABLET 600 MG	Carve-out	
RIBASPHERE RIBAPAK (1000 PACK)	Carve-out	
ribavirin oral capsule	Carve-out	
ribavirin oral tablet 200 mg	Carve-out	
SITAVIG	NP	PA; 102 day supply allowed
valacyclovir hcl oral	P	102 day supply allowed
valganciclovir hcl oral tablet	F	QL
VALTREX	NP	PA; 102 day supply allowed
VEMLIDY	F	PA; Specialty Drug; QL; AL
ZOVIRAX ORAL SUSPENSION	NP	PA; 102 day supply allowed
<b>Other Macrolide Antibiotics</b>		
amoxicill-clarithro-lansopraz oral therapy pack	NP	PA; QL
azithromycin oral packet	P	QL
azithromycin oral suspension reconstituted	P	
azithromycin oral tablet 250 mg	P	
azithromycin oral tablet 500 mg, 600 mg	P	QL
clarithromycin er	NP	PA
clarithromycin oral suspension reconstituted	P	
clarithromycin oral tablet	P	QL
DIFICID	P	
OMECLAMOX-PAK	NP	PA
ZITHROMAX ORAL PACKET	NP	PA; QL
ZITHROMAX ORAL SUSPENSION RECONSTITUTED	NP	PA
ZITHROMAX ORAL TABLET 250 MG	NP	PA
ZITHROMAX ORAL TABLET 500 MG	NP	PA; QL
ZITHROMAX TRI-PAK	NP	PA; QL
ZITHROMAX Z-PAK	NP	PA
<b>Oxazolidinone Antibiotics</b>		
linezolid oral suspension reconstituted	NP	PA

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
linezolid oral tablet	P	QL
SIVEXTRO ORAL	NP	PA; QL
ZYVOX ORAL SUSPENSION RECONSTITUTED	NP	PA
ZYVOX ORAL TABLET	NP	PA; QL
<b>Penicillinase-Resistant Penicillins</b>		
dicloxacillin sodium	F	
<b>Polyene Antifungals</b>		
nystatin mouth/throat	P	
nystatin oral tablet	P	
<b>Pyrimidine Antifungals</b>		
ANCOBON	NP	PA
flucytosine oral	NP	PA
<b>Quinolone Antibiotics</b>		
BAXDELA ORAL	NP	PA
CIPRO ORAL SUSPENSION RECONSTITUTED	P	
CIPRO ORAL TABLET 250 MG	NP	PA; QL
CIPRO ORAL TABLET 500 MG	NP	PA
ciprofloxacin hcl oral	P	QL
ciprofloxacin oral	P	
levofloxacin oral solution	P	
levofloxacin oral tablet	P	QL
moxifloxacin hcl oral	NP	PA; QL
ofloxacin oral tablet 300 mg, 400 mg	NP	PA
<b>Rifamycin Antibiotics</b>		
AEMCOLO	NP	PA; QL; AL
PRIFTIN	F	QL
rifabutin	F	
rifampin oral	F	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
XIFAXAN ORAL TABLET 200 MG	NP	PA; QL; AL
XIFAXAN ORAL TABLET 550 MG	NP	PA; AL
<b>Sulfonamide Antibiotics (Systemic)</b>		
AZULFIDINE	NP	PA
AZULFIDINE EN-TABS	NP	PA
sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml	F	
sulfamethoxazole-trimethoprim oral tablet	F	
sulfasalazine oral	P	
SULFATRIM PEDIATRIC	F	
<b>Tetracycline Antibiotics</b>		
bis subcit-metronid-tetracyc	NP	PA
bismuth/metronidaz/tetracyclin	NP	PA
doxycycline hyclate oral capsule	F	
doxycycline hyclate oral tablet 100 mg	F	
doxycycline hyclate oral tablet 20 mg	F	QL
doxycycline monohydrate oral capsule 100 mg, 50 mg	F	
doxycycline monohydrate oral suspension reconstituted	F	
doxycycline monohydrate oral tablet 100 mg, 50 mg	F	
LYMEPAK	F	
minocycline hcl oral capsule	F	
MONDOXYNE NL ORAL CAPSULE 100 MG	F	
PYLERA	P	
<b>Urinary Anti-Infectives</b>		
methenamine hippurate	F	
methenamine mandelate oral	F	
nitrofurantoin macrocrystal oral capsule 100 mg, 50 mg	F	QL; AL

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
nitrofurantoin monohyd macro	F	QL; AL
sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml	F	
sulfamethoxazole-trimethoprim oral tablet	F	
SULFATRIM PEDIATRIC	F	
trimethoprim oral	F	

### Antineoplastic Agents

#### Antineoplastic Agents

abiraterone acetate	F	Specialty Drug
ADRUCIL INTRAVENOUS SOLUTION 2.5 GM/50ML	F	Specialty Drug
ADRUCIL INTRAVENOUS SOLUTION 5 GM/100ML, 500 MG/10ML	F	
AFINITOR	F	Specialty Drug
AFINITOR DISPERZ	F	Specialty Drug
AKEEGA	F	Specialty Drug
ALECENSA	Carve-out	
ALIMTA	F	Specialty Drug
ALIQOPA	Carve-out	
ALKERAN ORAL	F	
ALUNBRIG	Carve-out	
anastrozole oral	F	
ARIMIDEX	F	
AROMASIN	F	
ARRANON	F	Specialty Drug
ARZERRA	F	Specialty Drug
AUGTYRO	Carve-out	
AYVAKIT	Carve-out	
azacitidine	F	Specialty Drug
BALVERSA	Carve-out	
BESREMI	F	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
bexarotene oral	F	Specialty Drug
bicalutamide	F	
BLINCYTO	F	Specialty Drug
bortezomib injection solution reconstituted	Carve-out	
bortezomib intravenous	Carve-out	
BOSULIF	Carve-out	
BRAFTOVI ORAL CAPSULE 75 MG	F	Specialty Drug
BRUKINSA	Carve-out	
CABOMETYX	Carve-out	
CALQUENCE	Carve-out	
CAMCEVI	F	
capecitabine	F	Specialty Drug
CAPRELSA	Carve-out	
CASODEX	F	
cladribine intravenous solution 10 mg/10ml	F	Specialty Drug
clofarabine	F	Specialty Drug
CLOLAR	F	Specialty Drug
COMETRIQ (100 MG DAILY DOSE) ORAL KIT 80 & 20 MG	Carve-out	
COMETRIQ (140 MG DAILY DOSE) ORAL KIT 3 X 20 MG & 80 MG	Carve-out	
COMETRIQ (60 MG DAILY DOSE)	Carve-out	
COPIKTRA	Carve-out	
COTELLIC	Carve-out	
cyclophosphamide oral	F	
CYRAMZA	F	
cytarabine (pf)	F	Specialty Drug
cytarabine injection solution	F	Specialty Drug
DACOGEN	F	Specialty Drug
DAURISMO	F	Specialty Drug
decitabine	F	Specialty Drug

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
DROXIA	F	102 day supply allowed
ELIGARD	F	Specialty Drug
ELOXATIN INTRAVENOUS SOLUTION 100 MG/20ML, 50 MG/10ML	F	
EMCYT	F	Specialty Drug
ERIVEDGE	F	Specialty Drug
ERLEADA ORAL TABLET 60 MG	F	Specialty Drug
erlotinib hcl	Carve-out	
etoposide oral	F	Specialty Drug
EULEXIN	F	
everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	F	Specialty Drug
everolimus oral tablet soluble	F	Specialty Drug
exemestane	F	
EXKIVITY	Carve-out	
FARESTON	F	
FEMARA	F	
floxuridine injection	F	Specialty Drug
FLUDARA	F	
fludarabine phosphate intravenous solution 25 mg/ml	F	
fludarabine phosphate intravenous solution 50 mg/2ml	F	Specialty Drug
fludarabine phosphate intravenous solution reconstituted	F	Specialty Drug
fluorouracil intravenous	F	Specialty Drug
flutamide	F	
FOLOTYN	F	Specialty Drug
FOTIVDA	Carve-out	
FRUZAQLA	Carve-out	
FUDR	F	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
GAVRETO	Carve-out	
GAZYVA	F	Specialty Drug
gefitinib	Carve-out	
gemcitabine hcl intravenous solution 1 gm/26.3ml, 2 gm/52.6ml, 200 mg/5.26ml	F	Specialty Drug
gemcitabine hcl intravenous solution reconstituted	F	Specialty Drug
GEMZAR	F	
GILOTRIF	Carve-out	
GLEEVEC	Carve-out	
HYCAMTIN ORAL	F	Specialty Drug
HYDREA	F	102 day supply allowed
hydroxyprogesterone caproate intramuscular solution	F	Specialty Drug
hydroxyurea oral	F	102 day supply allowed
IBRANCE	Carve-out	
ICLUSIG	Carve-out	
IDHIFA	F	Specialty Drug
imatinib mesylate	Carve-out	
IMBRUVICA	Carve-out	
INLYTA	Carve-out	
INQOVI	F	Specialty Drug
INREBIC	Carve-out	
INTRON-A INJECTION SOLUTION RECONSTITUTED 50000000 UNIT	F	
IRESSA	Carve-out	
IWILFIN	Carve-out	
JAKAFI	F	Specialty Drug
JAYPIRCA	Carve-out	
JYLAMVO	F	Specialty Drug
KEYTRUDA INTRAVENOUS SOLUTION	F	Specialty Drug
KISQALI (200 MG DOSE)	Carve-out	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
KISQALI (400 MG DOSE)	Carve-out	
KISQALI (600 MG DOSE)	Carve-out	
KISQALI FEMARA (200 MG DOSE)	F	
KISQALI FEMARA (400 MG DOSE)	F	
KISQALI FEMARA (600 MG DOSE)	F	
KOSELUGO	Carve-out	
KRAZATI	F	Specialty Drug
KYPROLIS	Carve-out	
lapatinib ditosylate	Carve-out	
lenalidomide oral capsule 10 mg, 15 mg, 25 mg, 5 mg	F	Specialty Drug
lenalidomide oral capsule 2.5 mg, 20 mg	F	
LENVIMA (10 MG DAILY DOSE)	Carve-out	
LENVIMA (12 MG DAILY DOSE)	Carve-out	
LENVIMA (14 MG DAILY DOSE)	Carve-out	
LENVIMA (18 MG DAILY DOSE)	Carve-out	
LENVIMA (20 MG DAILY DOSE)	Carve-out	
LENVIMA (24 MG DAILY DOSE)	Carve-out	
LENVIMA (4 MG DAILY DOSE)	Carve-out	
LENVIMA (8 MG DAILY DOSE)	Carve-out	
letrozole oral	F	
LEUKERAN	F	
leuprolide acetate (3 month)	F	
leuprolide acetate injection	F	Specialty Drug
LONSURF	F	Specialty Drug
LOQTORZI	F	Specialty Drug
LORBRENA	Carve-out	
LUMAKRAS ORAL TABLET 120 MG	F	Specialty Drug
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT 7.5 MG	F	Specialty Drug

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT 22.5 MG	F	Specialty Drug
LUPRON DEPOT (4-MONTH)	F	Specialty Drug
LUPRON DEPOT (6-MONTH)	F	Specialty Drug
LUPRON INJECTION	F	
LYNPARZA ORAL TABLET	Carve-out	
LYSODREN	F	Specialty Drug
LYTGOBI (12 MG DAILY DOSE)	Carve-out	
LYTGOBI (16 MG DAILY DOSE)	Carve-out	
LYTGOBI (20 MG DAILY DOSE)	Carve-out	
MATULANE	F	Specialty Drug
megestrol acetate oral suspension 40 mg/ml, 400 mg/10ml	P	
megestrol acetate oral suspension 625 mg/5ml	NP	PA
megestrol acetate oral tablet	F	
MEKINIST	Carve-out	
MEKTOVI	Carve-out	
melphalan	F	
mercaptopurine oral	F	Specialty Drug
methotrexate oral	F	
methotrexate sodium (pf) injection solution 1 gm/40ml, 200 mg/8ml, 250 mg/10ml	F	
methotrexate sodium (pf) injection solution 50 mg/2ml	F	Specialty Drug
methotrexate sodium injection solution 1000 mg/40ml, 25 mg/ml	F	
methotrexate sodium injection solution 250 mg/10ml, 50 mg/2ml	F	Specialty Drug
methotrexate sodium injection solution reconstituted	F	Specialty Drug
methotrexate sodium oral	F	
MYLERAN	F	Specialty Drug

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
nelarabine	F	Specialty Drug
NERLYNX	Carve-out	
NEXAVAR	Carve-out	
NILANDRON	F	Specialty Drug
nilutamide	F	Specialty Drug
NINLARO	Carve-out	
NIPENT	F	Specialty Drug
NUBEQA	F	Specialty Drug
ODOMZO	F	Specialty Drug
OGSIVEO	Carve-out	
OJJAARA	Carve-out	
ONUREG	F	Specialty Drug
OPDIVO INTRAVENOUS SOLUTION 100 MG/10ML, 40 MG/4ML	F	Specialty Drug
ORGOVYX	F	Specialty Drug
ORSERDU	F	Specialty Drug
oxaliplatin intravenous solution 100 mg/20ml, 50 mg/10ml	F	Specialty Drug
oxaliplatin intravenous solution reconstituted	F	Specialty Drug
pazopanib hcl	Carve-out	
PEMAZYRE	Carve-out	
pemetrexed disodium intravenous solution reconstituted 100 mg, 500 mg	F	
pentostatin	F	
PIQRAY (200 MG DAILY DOSE)	Carve-out	
PIQRAY (250 MG DAILY DOSE)	Carve-out	
PIQRAY (300 MG DAILY DOSE)	Carve-out	
POMALYST	F	Specialty Drug
pralatrexate	F	
PURINETHOL	F	
PURIXAN	F	Specialty Drug

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
QINLOCK	Carve-out	
RETEVMO	Carve-out	
REVLIMID	F	Specialty Drug
REZLIDHIA	F	
RIABNI	F	Specialty Drug
RITUXAN INTRAVENOUS SOLUTION 100 MG/10ML	F	Specialty Drug
ROZLYTREK	Carve-out	
RUBRACA	Carve-out	
RYDAPT	Carve-out	
SCEMBLIX	Carve-out	
SIKLOS	F	102 day supply allowed; AL
SOLTAMOX	F	
sorafenib tosylate	Carve-out	
SPRYCEL	Carve-out	
STIVARGA	Carve-out	
sunitinib malate	Carve-out	
SUTENT	Carve-out	
TABLOID	F	
TABRECTA	Carve-out	
TAFINLAR	Carve-out	
TAGRISSO	Carve-out	
TALZENNA	Carve-out	
tamoxifen citrate oral	F	
TARCEVA	Carve-out	
TARGRETIN ORAL	F	Specialty Drug
TASIGNA	Carve-out	
TAZVERIK	F	Specialty Drug
TEMODAR ORAL CAPSULE 100 MG, 140 MG, 180 MG, 20 MG, 5 MG	F	
TEMODAR ORAL CAPSULE 250 MG	F	Specialty Drug

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
temozolomide	F	Specialty Drug
TEPMETKO	Carve-out	
TIBSOVO	F	Specialty Drug
toremifene citrate	F	
TRELSTAR	F	
TRELSTAR MIXJECT	F	
tretinoin oral	F	Specialty Drug
TREXALL	F	
TRUQAP	Carve-out	
TRUSELTIQ (100MG DAILY DOSE)	Carve-out	
TRUSELTIQ (125MG DAILY DOSE)	Carve-out	
TRUSELTIQ (50MG DAILY DOSE)	Carve-out	
TRUSELTIQ (75MG DAILY DOSE)	Carve-out	
TUKYSA	Carve-out	
TURALIO	Carve-out	
TYKERB	Carve-out	
UKONIQ	Carve-out	
VANFLYTA	Carve-out	
VELCADE INJECTION	Carve-out	
VENCLEXTA	F	Specialty Drug
VENCLEXTA STARTING PACK	F	Specialty Drug
VERZENIO	Carve-out	
VESANOID	F	
VIDAZA	F	Specialty Drug
VITRAKVI	Carve-out	
VIZIMPRO	Carve-out	
VONJO	Carve-out	
VOTRIENT	Carve-out	
WELIREG	Carve-out	
XALKORI	Carve-out	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
XATMEP	F	
XELODA	F	Specialty Drug
XOSPATA	Carve-out	
XPOVIO (100 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 20 MG	F	
XPOVIO (100 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 50 MG	F	Specialty Drug
XPOVIO (40 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 40 MG	F	Specialty Drug
XPOVIO (40 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK 40 MG	F	Specialty Drug
XPOVIO (60 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 20 MG	F	
XPOVIO (60 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 60 MG	F	Specialty Drug
XPOVIO (60 MG TWICE WEEKLY)	F	Specialty Drug
XPOVIO (80 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 20 MG	F	
XPOVIO (80 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 40 MG	F	Specialty Drug
XPOVIO (80 MG TWICE WEEKLY)	F	Specialty Drug
XTANDI	F	Specialty Drug
YERVOY	F	
YONSA	F	Specialty Drug
ZEJULA	Carve-out	
ZELBORAF	Carve-out	
ZOLINZA	F	Specialty Drug
ZYDELIG	Carve-out	
ZYKADIA	Carve-out	
ZYTIGA	F	Specialty Drug

**Antitoxins, Immune Glob, Toxoids, Vaccines**

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
<b>Allergenic Extracts (Therapeutic)</b>		
PALFORZIA (12 MG DAILY DOSE)	F	PA; Specialty Drug; AL
PALFORZIA (120 MG DAILY DOSE)	F	PA; Specialty Drug; AL
PALFORZIA (160 MG DAILY DOSE)	F	PA; Specialty Drug; AL
PALFORZIA (20 MG DAILY DOSE)	F	PA; Specialty Drug; AL
PALFORZIA (200 MG DAILY DOSE)	F	PA; Specialty Drug; AL
PALFORZIA (240 MG DAILY DOSE)	F	PA; Specialty Drug; AL
PALFORZIA (3 MG DAILY DOSE)	F	PA; Specialty Drug; AL
PALFORZIA (300 MG MAINTENANCE)	F	PA; Specialty Drug; AL
PALFORZIA (300 MG TITRATION)	F	PA; Specialty Drug; AL
PALFORZIA (40 MG DAILY DOSE)	F	PA; Specialty Drug; AL
PALFORZIA (6 MG DAILY DOSE)	F	PA; Specialty Drug; AL
PALFORZIA (80 MG DAILY DOSE)	F	PA; Specialty Drug; AL
PALFORZIA INITIAL ESCALATION	F	PA; Specialty Drug; AL
<b>Toxoids</b>		
ADACEL INTRAMUSCULAR SUSPENSION 5-2-15.5 LF-MCG/0.5	F	QL; AL
BOOSTRIX INTRAMUSCULAR SUSPENSION 5-2.5-18.5 LF-MCG/0.5	F	QL; AL
BOOSTRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	F	QL; AL
<b>Vaccines</b>		
ABRYSVO	F	QL; AL
ADACEL INTRAMUSCULAR SUSPENSION 5-2-15.5 LF-MCG/0.5	F	QL; AL
AFLURIA QUADRIVALENT INTRAMUSCULAR SUSPENSION	F	QL; AL
AFLURIA QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	F	QL; AL
AREXVY	F	QL; AL

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
BEXSERO	F	QL; AL
BOOSTRIX INTRAMUSCULAR SUSPENSION 5-2.5-18.5 LF-MCG/0.5	F	QL; AL
BOOSTRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	F	QL; AL
COMIRNATY	F	QL; AL
ENGERIX-B INJECTION SUSPENSION 20 MCG/ML	F	QL; AL
ENGERIX-B INJECTION SUSPENSION PREFILLED SYRINGE 10 MCG/0.5ML, 20 MCG/ML	F	QL; AL
FLUAD QUADRIVALENT	F	QL; AL
FLUARIX QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	F	QL; AL
FLUBLOK QUADRIVALENT	F	QL; AL
FLUCELVAX QUADRIVALENT	F	QL; AL
FLULAVAL QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	F	QL; AL
FLUMIST QUADRIVALENT	F	QL; AL
FLUZONE HIGH-DOSE QUADRIVALENT	F	QL; AL
FLUZONE QUADRIVALENT INTRAMUSCULAR SUSPENSION	F	QL; AL
FLUZONE QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	F	QL; AL
GARDASIL 9	F	QL; AL
HAVRIX INTRAMUSCULAR SUSPENSION 1440 EL U/ML, 720 EL U/0.5ML	F	QL; AL
HEPLISAV-B INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	F	QL; AL
janssen covid-19 vaccine	F	

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MENACTRA INTRAMUSCULAR SOLUTION	F	QL; AL
MENVEO	F	QL; AL
M-M-R II INJECTION	F	QL; AL
moderna covid-19 bival 6m-5y	F	AL
moderna covid-19 bival booster	F	AL
moderna covid-19 bivalent	F	AL
MODERNA COVID-19 VAC 6M-11Y	F	QL; AL
novavax covid-19 vaccine	F	QL; AL
pfizer covid-19 bival 6mo-4yr	F	AL
pfizer covid-19 vac bival 5-11	F	AL
pfizer covid-19 vac bivalent	F	AL
PFIZER COVID-19 VAC-TRIS 5-11Y INTRAMUSCULAR SUSPENSION 10 MCG/0.3ML	F	QL; AL
pfizer covid-19 vac-tris 6m-4y intramuscular suspension 3 mcg/0.3ml	F	QL; AL
PNEUMOVAX 23	F	QL; AL
PREHEVBRIO	F	QL; AL
PREVNAR 13	F	PA; QL; AL
PREVNAR 20	F	QL; AL
RECOMBIVAX HB INJECTION SUSPENSION 10 MCG/ML, 40 MCG/ML, 5 MCG/0.5ML	F	QL; AL
RECOMBIVAX HB INJECTION SUSPENSION PREFILLED SYRINGE	F	QL; AL
SHINGRIX INTRAMUSCULAR SUSPENSION RECONSTITUTED 50 MCG/0.5ML	F	QL; AL
SPIKEVAX	F	QL; AL
SPIKEVAX COVID-19 VACCINE	F	AL
TRUMENBA	F	QL; AL
TYPHIM VI INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	F	PA; QL; AL

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
VAQTA INTRAMUSCULAR SUSPENSION 25 UNIT/0.5ML, 50 UNIT/ML	F	QL; AL
VAXNEUVANCE	F	QL; AL
VIVOTIF	F	PA; QL; AL
<b>Autonomic Drugs</b>		
<b>Alpha- And Beta-Adrenergic Agonists</b>		
AUVI-Q INJECTION SOLUTION AUTO-INJECTOR	NP	PA; QL
epinephrine injection solution auto-injector 0.15 mg/0.15ml	NP	PA; QL
epinephrine injection solution auto-injector 0.15 mg/0.3ml, 0.3 mg/0.3ml	P	QL
EPIPEN 2-PAK INJECTION SOLUTION AUTO-INJECTOR	P	QL
EPIPEN JR 2-PAK INJECTION SOLUTION AUTO-INJECTOR	P	QL
SYMJEPI	NP	PA
<b>Alpha-Adrenergic Agonists</b>		
CATAPRES	P	102 day supply allowed
CATAPRES-TTS-1	P	102 day supply allowed; QL
CATAPRES-TTS-2	P	102 day supply allowed; QL
CATAPRES-TTS-3	P	102 day supply allowed; QL
clonidine	P	102 day supply allowed; QL
clonidine hcl er oral tablet extended release 12 hour	Carve-out	
clonidine hcl er oral tablet extended release 24 hour	P	
clonidine hcl oral	P	102 day supply allowed
dexmedetomidine hcl	Carve-out	
dexmedetomidine hcl in nacl intravenous solution 200 mcg/50ml, 200-0.9 mcg/50ml-%, 400 mcg/100ml, 80 mcg/20ml	Carve-out	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
dexmedetomidine hcl in nacl intravenous solution prefilled syringe 20-0.9 mcg/5ml-%	Carve-out	
dexmedetomidine hcl-dextrose	Carve-out	
IGALMI	Carve-out	
KAPVAY ORAL TABLET EXTENDED RELEASE 12 HOUR	Carve-out	
LUCEMYRA	P	
methyldopa oral	P	102 day supply allowed
midodrine hcl	F	QL
NEXICLON XR ORAL TABLET EXTENDED RELEASE 24 HOUR	P	102 day supply allowed
PRECEDEX INTRAVENOUS SOLUTION 1000 MCG/250ML, 200 MCG/2ML, 200 MCG/50ML, 400 MCG/100ML, 80 MCG/20ML	Carve-out	
<b>Antimuscarinics/Antispasmodics</b>		
ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5-25 MCG/ACT	P	102 day supply allowed; QL
ATROVENT HFA	P	102 day supply allowed; QL
BEVESPI AEROSPHERE	P	102 day supply allowed; QL
BREZTRI AEROSPHERE	NP	PA; 102 day supply allowed; QL
COMBIVENT RESPIMAT	P	102 day supply allowed; QL
dicyclomine hcl oral	F	AL
diphenoxylate-atropine oral liquid	P	
diphenoxylate-atropine oral tablet 2.5-0.025 mg	P	
DUAKLIR PRESSAIR	NP	PA
glycopyrrolate oral solution	F	AL
glycopyrrolate oral tablet 1 mg, 2 mg	F	
hyoscyamine sulfate er oral tablet extended release 12 hour	F	AL
hyoscyamine sulfate oral	F	AL
hyoscyamine sulfate sl	F	AL

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
hyoscyamine sulfate sublingual	F	AL
INCRUSE ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5 MCG/ACT	P	102 day supply allowed; QL
ipratropium bromide inhalation	P	102 day supply allowed
ipratropium bromide nasal	P	
ipratropium-albuterol	P	102 day supply allowed
LONHALA MAGNAIR REFILL KIT	NP	PA; 102 day supply allowed
LONHALA MAGNAIR STARTER KIT	NP	PA; 102 day supply allowed
oscimin sr	F	AL
scopolamine	F	PA
SPIRIVA HANDIHALER	P	102 day supply allowed; QL
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 1.25 MCG/ACT, 2.5 MCG/ACT	P	102 day supply allowed; QL
STIOLTO RESPIMAT INHALATION AEROSOL SOLUTION 2.5-2.5 MCG/ACT	P	102 day supply allowed; QL
tiotropium bromide monohydrate	NP	PA; 102 day supply allowed; QL
TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-62.5-25 MCG/ACT, 200-62.5-25 MCG/ACT	P	102 day supply allowed; QL
TUDORZA PRESSAIR INHALATION AEROSOL POWDER BREATH ACTIVATED 400 MCG/ACT	NP	PA; 102 day supply allowed
YUPELRI	NP	PA
<b>Antiparkinsonian Agents</b>		
aler-cap	F	OTC; AL
ALKA-SELTZER PLUS ALLERGY	Carve-out	OTC
allergy childrens oral liquid	F	OTC
allergy relief childrens oral liquid	F	OTC
allergy relief oral capsule 25 mg	F	OTC; AL
allergy relief oral liquid	F	OTC

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
allergy relief oral tablet 25 mg	F	OTC
aurodryl allergy childrens	F	OTC
BANOPHEN ORAL CAPSULE 50 MG	F	OTC
BANOPHEN ORAL LIQUID	F	OTC
BANOPHEN ORAL TABLET	F	OTC
BENADRYL ALLERGY CHILDRENS ORAL LIQUID	F	OTC
BENADRYL ALLERGY ORAL TABLET	F	OTC
BENADRYL ALLERGY ULTRATABS	F	OTC
benztropine mesylate injection	Carve-out	
benztropine mesylate oral	Carve-out	
COGENTIN	Carve-out	
complete allergy relief	F	OTC
compoz	Carve-out	OTC
cvs allergy relief adult	F	OTC
cvs allergy relief childrens oral liquid	F	OTC
cvs allergy relief oral capsule 25 mg	F	OTC; AL
cvs allergy relief oral liquid	F	OTC
cvs allergy relief oral tablet 25 mg	F	OTC
cvs childrens allergy	F	OTC
cvs sleep aid nighttime	Carve-out	OTC
cvs sleep aid oral tablet 25 mg	Carve-out	OTC
cvs sleep-aid nighttime oral capsule	Carve-out	OTC
diphen oral tablet	F	OTC
diphenhydramine hcl (sleep) oral tablet 50 mg	Carve-out	OTC
diphenhydramine hcl childrens	F	OTC
diphenhydramine hcl injection	F	AL
diphenhydramine hcl oral capsule	F	AL
diphenhydramine hcl oral liquid 12.5 mg/5ml	F	OTC
diphenhydramine hcl oral tablet 25 mg	Carve-out	OTC; AL

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
eq allergy relief childrens oral liquid	F	OTC
eq nighttime sleep aid max st	Carve-out	OTC
eq allergy relief oral tablet 25 mg	F	OTC
eq nighttime sleep aid	Carve-out	OTC
eq sleep aid oral capsule	Carve-out	OTC
eq sleep aid oral liquid	Carve-out	OTC
ft nighttime sleep aid	Carve-out	OTC
ft sleep-aid maximum strength	Carve-out	OTC
geri-dryl oral liquid	F	OTC
gnp allergy antihistamine	F	OTC
gnp allergy childrens	F	OTC
gnp allergy relief max st	F	OTC
gnp allergy relief oral capsule	F	OTC; AL
gnp allergy relief oral tablet 25 mg	F	OTC
gnp childrens allergy	F	OTC
gnp nighttime sleep aid	Carve-out	OTC
gnp nighttime sleep-aid max st	Carve-out	OTC
gnp sleep aid nighttime	Carve-out	OTC
gnp sleep aid oral liquid	Carve-out	OTC
gnp sleep time	Carve-out	OTC
goodsense sleeptime	Carve-out	OTC
h-e-b childrens allergy	F	OTC
hm allergy relief childrens	F	OTC
hm nighttime sleep aid oral tablet	Carve-out	OTC
hm z-sleep oral liquid	Carve-out	OTC
KINDERMED KIDS ALLERGY	F	OTC
liquid allergy relief	F	OTC
m-dryl	F	OTC
NARAMIN	F	OTC
night time sleep aid	Carve-out	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
nighttime sleep aid oral tablet 25 mg	Carve-out	OTC
NYTOL	Carve-out	OTC
NYTOL MAXIMUM STRENGTH	Carve-out	OTC
NYTOL QUICKCAPS	Carve-out	OTC
ormir	Carve-out	OTC
PEDIACARE CHILDRENS ALLERGY	F	OTC
pharbedryl oral capsule 25 mg	F	OTC; AL
px allergy oral capsule	F	OTC; AL
px allergy oral liquid	F	OTC
px allergy oral tablet	F	OTC
qc allergy childrens	F	OTC
qc rest simply	Carve-out	OTC
qc sleep aid max st	Carve-out	OTC
ra allergy medication oral liquid	F	OTC
ra allergy oral liquid	F	OTC
ra allergy relief childrens oral liquid	F	OTC
ra allergy relief oral capsule 25 mg	F	OTC; AL
ra complete allergy	F	OTC
RA DIPHEDRYL ALLERGY	F	OTC
ra nighttime sleep aid oral tablet	Carve-out	OTC
ra sleep aid (diphenhydramine)	Carve-out	OTC
ra sleep aid oral capsule	Carve-out	OTC
ra sleep-aid nighttime	Carve-out	OTC
sb allergy medicine oral liquid	F	OTC
sb allergy medicine oral tablet	Carve-out	OTC
sb sleep	Carve-out	OTC
siladryl allergy	F	OTC
SIMPLY SLEEP	Carve-out	OTC
sleep aid (diphenhydramine)	Carve-out	OTC
sleep aid oral capsule 25 mg	Carve-out	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
sleep aid oral liquid	Carve-out	OTC
sleep ii	Carve-out	OTC
sleep tabs oral tablet 25 mg	Carve-out	OTC
sleep-aid oral capsule	Carve-out	OTC
sleep-tabs	Carve-out	OTC
sm allergy relief childrens	F	OTC
sm allergy relief oral liquid	F	OTC
sm nighttime sleep aid	Carve-out	OTC
sm sleep aid maximum strength	Carve-out	OTC
sm z-sleep	Carve-out	OTC
SOMINEX	Carve-out	OTC
SOMINEX MAX ST	Carve-out	OTC
SOMINEX NIGHTTIME SLEEP-AID	Carve-out	OTC
tgt sleep aid max strength	Carve-out	OTC
total allergy	F	OTC
TOTAL ALLERGY MEDICINE	F	OTC
trihexyphenidyl hcl	Carve-out	
UNISOM SLEEPGELS	Carve-out	OTC
UNISOM SLEEPMELTS	Carve-out	OTC
UNISOM SLEEPMINIS	Carve-out	OTC
WAL-DRYL ALLERGY CHILDRENS	F	OTC
WAL-DRYL ALLERGY ORAL LIQUID	F	OTC
WAL-SLEEP Z	Carve-out	OTC
wal-som maximum strength	Carve-out	OTC
wal-som oral tablet dispersible	Carve-out	OTC
ZZZQUIL	Carve-out	OTC
<b>Autonomic Drugs, Miscellaneous</b>		
CHANTIX CONTINUING MONTH PAK	F	QL
CHANTIX STARTING MONTH PAK ORAL TABLET THERAPY PACK	F	QL

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
cvs nicotine mouth/throat gum	F	OTC; QL
cvs nicotine mouth/throat lozenge	F	OTC
cvs nicotine polacrilex mouth/throat gum	F	OTC; QL
cvs nicotine polacrilex mouth/throat lozenge 2 mg	F	OTC
cvs nicotine polacrilex mouth/throat lozenge 4 mg	F	OTC; QL
cvs nicotine transdermal	F	OTC; QL
eq nicotine mouth/throat lozenge	F	OTC; QL
eq nicotine polacrilex mouth/throat gum	F	OTC; QL
eq nicotine polacrilex mouth/throat lozenge 2 mg	F	OTC; QL
eq nicotine polacrilex mouth/throat lozenge 4 mg	F	OTC
eq nicotine step 3	F	OTC; QL
eq nicotine transdermal patch 24 hour 14 mg/24hr, 21 mg/24hr	F	OTC; QL
eq nicotine polacrilex mouth/throat lozenge	F	OTC; QL
gnp nicotine	F	OTC; QL
gnp nicotine mini	F	OTC; QL
gnp nicotine polacrilex	F	OTC; QL
goodsense nicotine mouth/throat gum	F	OTC; QL
goodsense nicotine mouth/throat lozenge 2 mg	F	OTC
goodsense nicotine mouth/throat lozenge 4 mg	F	OTC; QL
hm nicotine	F	OTC; QL
hm nicotine polacrilex	F	OTC; QL
NICORETTE MOUTH/THROAT GUM 4 MG	F	OTC; QL
NICORETTE STARTER KIT MOUTH/THROAT GUM 4 MG	F	OTC; QL
nicotine mini	F	OTC; QL
nicotine polacrilex mini	F	OTC
nicotine polacrilex mouth/throat gum 4 mg	F	OTC; QL
nicotine polacrilex mouth/throat lozenge	F	OTC; QL
nicotine step 1	F	OTC; QL
nicotine step 2	F	OTC; QL

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nicotine step 3	F	OTC; QL
nicotine transdermal kit	F	OTC; QL
nicotine transdermal patch 24 hour 14 mg/24hr, 7 mg/24hr	F	OTC; QL
NICOTROL	F	QL
NICOTROL NS	F	QL
qc nicotine transdermal system	F	OTC; QL
ra mini nicotine	F	OTC; QL
ra nicotine gum mouth/throat gum 2 mg, 4 mg	F	OTC; QL
ra nicotine mouth/throat	F	OTC; QL
ra nicotine polacrilex mouth/throat lozenge	F	OTC; QL
ra nicotine transdermal patch 24 hour 21 mg/24hr	F	OTC; QL
sm nicotine mouth/throat lozenge	F	OTC; QL
sm nicotine polacrilex	F	OTC; QL
sm nicotine transdermal patch 24 hour 14 mg/24hr, 21 mg/24hr	F	OTC; QL
varenicline tartrate (starter)	F	QL
varenicline tartrate oral tablet	F	QL
varenicline tartrate oral tablet therapy pack	F	QL
<b>Centrally Acting Skeletal Muscle Relaxant</b>		
AMRIX	NP	PA
chlorzoxazone oral	NP	PA
cyclobenzaprine hcl er	NP	PA
cyclobenzaprine hcl oral	P	
FEXMID	NP	PA
LORZONE	NP	PA
metaxalone	NP	PA
methocarbamol oral tablet 500 mg, 750 mg	P	
tizanidine hcl oral capsule	NP	PA
tizanidine hcl oral tablet	P	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
ZANAFLEX	NP	PA
<b>Direct-Acting Skeletal Muscle Relaxants</b>		
DANTRIUM ORAL CAPSULE 25 MG, 50 MG	NP	PA
dantrolene sodium oral	NP	PA
<b>Gaba-Derivative Skeletal Muscle Relaxant</b>		
baclofen oral solution 5 mg/5ml	P-PA	PA
baclofen oral suspension	NP	PA
baclofen oral tablet	P	
FLEQSUVY	NP	PA
LYVISPAH	NP	PA
<b>Indirect-Acting Skeletal Muscle Relaxant</b>		
NORGESIC	NP	PA
norgesic forte	NP	PA
orphenadrine citrate er	P	
orphenadrine-aspirin-caffeine oral tablet 25-385-30 mg	NP	PA
<b>Non-Sel. Beta-Adrenergic Blocking Agents</b>		
BETAPACE AF	NP	PA; 102 day supply allowed
BETAPACE ORAL TABLET 120 MG, 160 MG, 80 MG	NP	PA; 102 day supply allowed
BYSTOLIC	P	102 day supply allowed
carvedilol	P	102 day supply allowed
carvedilol phosphate er	P	102 day supply allowed
COREG	NP	PA; 102 day supply allowed
COREG CR	NP	PA; 102 day supply allowed
CORGARD	NP	PA; 102 day supply allowed
HEMANGEOL	NP	PA; Specialty Drug; 102 day supply allowed

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INDERAL LA	NP	PA; 102 day supply allowed
INDERAL XL	NP	PA; 102 day supply allowed
INNOPRAN XL	NP	PA; 102 day supply allowed
labetalol hcl oral	P	102 day supply allowed
nadolol oral tablet 20 mg, 40 mg, 80 mg	NP	PA; 102 day supply allowed
nebivolol hcl	P	102 day supply allowed
pindolol	NP	PA; 102 day supply allowed
propranolol hcl er	P	102 day supply allowed
propranolol hcl oral	P	102 day supply allowed
SORINE	P	102 day supply allowed
sotalol hcl (af)	P	102 day supply allowed
sotalol hcl oral	P	102 day supply allowed
SOTYLIZE	NP	PA; 102 day supply allowed
timolol maleate oral	NP	PA; 102 day supply allowed
<b>Non-Sel.Alpha-1-Adrenergic Blocking Agts</b>		
CARDURA	NP	PA; 102 day supply allowed
CARDURA XL	NP	PA; 102 day supply allowed
doxazosin mesylate oral	P	102 day supply allowed
MINIPRESS	NP	PA; 102 day supply allowed
prazosin hcl oral	P	102 day supply allowed
terazosin hcl oral	P	102 day supply allowed
<b>Parasympathomimetic (Cholinergic Agents)</b>		
ADLARITY	NP	PA
ARICEPT	NP	PA
bethanechol chloride oral	F	QL
donepezil hcl oral tablet 10 mg, 5 mg	P	
donepezil hcl oral tablet 23 mg	NP	PA
donepezil hcl oral tablet dispersible	P	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
EXELON TRANSDERMAL	P	
FIRDAPSE	Carve-out	
galantamine hydrobromide er	NP	PA
galantamine hydrobromide oral solution	NP	PA
galantamine hydrobromide oral tablet	P	
NAMZARIC	NP	PA
pilocarpine hcl oral	F	
pyridostigmine bromide oral tablet 60 mg	F	
rivastigmine	NP	PA
rivastigmine tartrate	P	
<b>Selective Alpha-1-Adrenergic Block.Agent</b>		
alfuzosin hcl er	P	
carvedilol	P	102 day supply allowed
carvedilol phosphate er	P	102 day supply allowed
COREG	NP	PA; 102 day supply allowed
COREG CR	NP	PA; 102 day supply allowed
dutasteride-tamsulosin hcl	NP	PA
FLOMAX	NP	PA
labetalol hcl oral	P	102 day supply allowed
RAPAFLO	NP	PA
silodosin	NP	PA
tamsulosin hcl	P	
<b>Selective Beta-2-Adrenergic Agonists</b>		
ADVAIR DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100-50 MCG/ACT, 250-50 MCG/ACT, 500-50 MCG/ACT	P	102 day supply allowed; QL
ADVAIR HFA	P	102 day supply allowed; QL
AIRDUO DIGIHALER	NP	PA; 102 day supply allowed; QL
AIRDUO RESPICLICK 113/14	NP	PA; 102 day supply allowed; QL

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
AIRDUO RESPICLICK 232/14	NP	PA; 102 day supply allowed; QL
AIRDUO RESPICLICK 55/14	NP	PA; 102 day supply allowed; QL
AIRSUPRA	NP	PA; 102 day supply allowed; QL
albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act	NP	PA; 102 day supply allowed; QL
albuterol sulfate inhalation nebulization solution (5 mg/ml) 0.5%, 0.63 mg/3ml, 2.5 mg/0.5ml	P	102 day supply allowed
albuterol sulfate inhalation nebulization solution 1.25 mg/3ml	P	
ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5-25 MCG/ACT	P	102 day supply allowed; QL
arformoterol tartrate	NP	PA
BEVESPI AEROSPHERE	P	102 day supply allowed; QL
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-25 MCG/ACT, 200-25 MCG/ACT, 50-25 MCG/INH	NP	PA; 102 day supply allowed; QL
BREYNA	NP	PA; 102 day supply allowed; QL
BREZTRI AEROSPHERE	NP	PA; 102 day supply allowed; QL
BROVANA	NP	PA; 102 day supply allowed
budesonide-formoterol fumarate	NP	PA; 102 day supply allowed; QL
COMBIVENT RESPIMAT	P	102 day supply allowed; QL
DUAKLIR PRESSAIR	NP	PA
DULERA	P	102 day supply allowed; QL
fluticasone furoate-vilanterol inhalation aerosol powder breath activated 100-25 mcg/act, 200-25 mcg/act	NP	PA; 102 day supply allowed; QL
fluticasone-salmeterol inhalation aerosol	P	102 day supply allowed; QL
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	P	102 day supply allowed; QL

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
fluticasone-salmeterol inhalation aerosol powder breath activated 113-14 mcg/act, 232-14 mcg/act, 55-14 mcg/act	NP	PA; 102 day supply allowed; QL
formoterol fumarate inhalation	NP	PA; 102 day supply allowed
ipratropium-albuterol	P	102 day supply allowed
levalbuterol hcl inhalation nebulization solution 0.31 mg/3ml, 0.63 mg/3ml, 1.25 mg/0.5ml, 1.25 mg/3ml	NP	PA; 102 day supply allowed
levalbuterol tartrate	NP	PA; 102 day supply allowed; QL
PERFOROMIST	NP	PA; 102 day supply allowed
PROAIR DIGIHALER INHALATION AEROSOL POWDER BREATH ACTIVATED 108 (90 BASE) MCG/ACT	NP	PA; 102 day supply allowed; QL
PROAIR RESPICLICK	NP	PA; 102 day supply allowed; QL
PROVENTIL HFA	P	102 day supply allowed; QL
SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 50 MCG/ACT	P	102 day supply allowed; QL
STIOLTO RESPIMAT INHALATION AEROSOL SOLUTION 2.5-2.5 MCG/ACT	P	102 day supply allowed; QL
STRIVERDI RESPIMAT	NP	PA; 102 day supply allowed
SYMBICORT	P	102 day supply allowed; QL
terbutaline sulfate oral	F	
TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-62.5-25 MCG/ACT, 200-62.5-25 MCG/ACT	P	102 day supply allowed; QL
VENTOLIN HFA	P	102 day supply allowed; QL
WIXELA INHUB INHALATION AEROSOL POWDER BREATH ACTIVATED 100-50 MCG/ACT, 250-50 MCG/ACT, 500-50 MCG/ACT	P	102 day supply allowed; QL
XOPENEX	NP	PA; 102 day supply allowed
XOPENEX CONCENTRATE	NP	PA; 102 day supply allowed

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
XOPENEX HFA	P	102 day supply allowed; QL
<b>Selective Beta-Adrenergic Blocking Agent</b>		
acebutolol hcl oral	NP	PA; 102 day supply allowed
atenolol oral	P	102 day supply allowed
betaxolol hcl oral	NP	PA; 102 day supply allowed
bisoprolol fumarate oral	NP	PA; 102 day supply allowed
KAPSPARGO SPRINKLE	NP	PA; 102 day supply allowed
LOPRESSOR ORAL	NP	PA; 102 day supply allowed
metoprolol succinate er	P	102 day supply allowed
metoprolol tartrate oral	P	102 day supply allowed
TENORMIN	NP	PA; 102 day supply allowed
TOPROL XL	NP	PA; 102 day supply allowed
<b>Skeletal Muscle Relaxants, Miscellaneous</b>		
NORGESIC	NP	PA
norgesic forte	NP	PA
orphenadrine citrate er	P	
orphenadrine-aspirin-caffeine oral tablet 25-385-30 mg	NP	PA
<b>Smoking Cessation Agents</b>		
bupropion hcl er (smoking det)	F	QL
CHANTIX CONTINUING MONTH PAK	F	QL
CHANTIX STARTING MONTH PAK ORAL TABLET THERAPY PACK	F	QL
cvs nicotine mouth/throat gum	F	OTC; QL
cvs nicotine mouth/throat lozenge	F	OTC
cvs nicotine polacrilex mouth/throat gum	F	OTC; QL
cvs nicotine polacrilex mouth/throat lozenge 2 mg	F	OTC
cvs nicotine polacrilex mouth/throat lozenge 4 mg	F	OTC; QL

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
cvs nicotine transdermal	F	OTC; QL
eq nicotine mouth/throat lozenge	F	OTC; QL
eq nicotine polacrilex mouth/throat gum	F	OTC; QL
eq nicotine polacrilex mouth/throat lozenge 2 mg	F	OTC; QL
eq nicotine polacrilex mouth/throat lozenge 4 mg	F	OTC
eq nicotine step 3	F	OTC; QL
eq nicotine transdermal patch 24 hour 14 mg/24hr, 21 mg/24hr	F	OTC; QL
eq nicotine polacrilex mouth/throat lozenge	F	OTC; QL
gnp nicotine	F	OTC; QL
gnp nicotine mini	F	OTC; QL
gnp nicotine polacrilex	F	OTC; QL
goodsense nicotine mouth/throat gum	F	OTC; QL
goodsense nicotine mouth/throat lozenge 2 mg	F	OTC
goodsense nicotine mouth/throat lozenge 4 mg	F	OTC; QL
hm nicotine	F	OTC; QL
hm nicotine polacrilex	F	OTC; QL
NICORETTE MOUTH/THROAT GUM 4 MG	F	OTC; QL
NICORETTE STARTER KIT MOUTH/THROAT GUM 4 MG	F	OTC; QL
nicotine mini	F	OTC; QL
nicotine polacrilex mini	F	OTC
nicotine polacrilex mouth/throat gum 4 mg	F	OTC; QL
nicotine polacrilex mouth/throat lozenge	F	OTC; QL
nicotine step 1	F	OTC; QL
nicotine step 2	F	OTC; QL
nicotine step 3	F	OTC; QL
nicotine transdermal kit	F	OTC; QL
nicotine transdermal patch 24 hour 14 mg/24hr, 7 mg/24hr	F	OTC; QL
NICOTROL	F	QL

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
NICOTROL NS	F	QL
qc nicotine transdermal system	F	OTC; QL
ra mini nicotine	F	OTC; QL
ra nicotine gum mouth/throat gum 2 mg, 4 mg	F	OTC; QL
ra nicotine mouth/throat	F	OTC; QL
ra nicotine polacrilex mouth/throat lozenge	F	OTC; QL
ra nicotine transdermal patch 24 hour 21 mg/24hr	F	OTC; QL
sm nicotine mouth/throat lozenge	F	OTC; QL
sm nicotine polacrilex	F	OTC; QL
sm nicotine transdermal patch 24 hour 14 mg/24hr, 21 mg/24hr	F	OTC; QL
varenicline tartrate (starter)	F	QL
varenicline tartrate oral tablet	F	QL
varenicline tartrate oral tablet therapy pack	F	QL

### **Blood Derivatives**

### **Blood Derivatives**

ALBUKED 25	Carve-out	
ALBUKED 5	Carve-out	
albumin human	Carve-out	
ALBUMINAR-25	Carve-out	
ALBUMINEX	Carve-out	
albumin-zlb	Carve-out	
alburx	Carve-out	
ALBUTEIN	Carve-out	
FLEXBUMIN	Carve-out	
HUMAN ALBUMIN GRIFOLS	Carve-out	
kedbumin	Carve-out	
OCTAPLAS BLOOD GROUP A	Carve-out	
OCTAPLAS BLOOD GROUP AB	Carve-out	
OCTAPLAS BLOOD GROUP B	Carve-out	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
OCTAPLAS BLOOD GROUP O	Carve-out	
PANHEMATIN INTRAVENOUS SOLUTION RECONSTITUTED 350 MG	Carve-out	
PLASBUMIN-25	Carve-out	
PLASBUMIN-5	Carve-out	
PLASMANATE	Carve-out	
RYPLAZIM	Carve-out	
<b>Blood Formation, Coagulation, Thrombosis</b>		
<b>Antianemia Drugs</b>		
ARANESP (ALBUMIN FREE) INJECTION SOLUTION 100 MCG/ML, 200 MCG/ML, 25 MCG/ML, 40 MCG/ML, 60 MCG/ML	P-PA	PA; Specialty Drug
ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE	P-PA	PA; Specialty Drug
EPOGEN INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML	P-PA	PA; Specialty Drug
JESDUVROQ	NP	PA; AL
PROCRIT	NP	PA; Specialty Drug
RETACRIT INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 40000 UNIT/ML	P-PA	PA; Specialty Drug
<b>Anticoagulants, Miscellaneous</b>		
ARIXTRA	NP	PA; Specialty Drug; 102 day supply allowed
ATRYN	Carve-out	
CEPROTIN	Carve-out	
fondaparinux sodium	NP	PA; Specialty Drug; 102 day supply allowed
THROMBATE III	Carve-out	

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
<b>Blood Form.,Coag,Thrombosis Agents Misc.</b>		
ENJAYMO	Carve-out	
OXBRYTA ORAL TABLET 300 MG	F	PA; QL; AL
OXBRYTA ORAL TABLET 500 MG	F	PA; Specialty Drug; QL; AL
OXBRYTA ORAL TABLET SOLUBLE	F	PA; Specialty Drug; QL; AL
PYRUKYND	Carve-out	
PYRUKYND TAPER PACK	Carve-out	
<b>Coumarin Derivatives</b>		
JANTOVEN	P	102 day supply allowed
warfarin sodium oral	P	102 day supply allowed
<b>Direct Factor Xa Inhibitors</b>		
ELIQUIS	P	102 day supply allowed; QL
ELIQUIS DVT/PE STARTER PACK ORAL TABLET THERAPY PACK	P	QL
SAVAYSA	NP	PA; 102 day supply allowed
XARELTO	P	102 day supply allowed; QL
XARELTO STARTER PACK	P	QL
<b>Direct Thrombin Inhibitors</b>		
dabigatran etexilate mesylate oral capsule 150 mg, 75 mg	NP	PA; 102 day supply allowed; QL
PRADAXA ORAL CAPSULE	P	102 day supply allowed; QL
PRADAXA ORAL PACKET	NP	PA; 102 day supply allowed; AL
<b>Hematopoietic Agents</b>		
ARANESP (ALBUMIN FREE) INJECTION SOLUTION 100 MCG/ML, 200 MCG/ML, 25 MCG/ML, 40 MCG/ML, 60 MCG/ML	P-PA	PA; Specialty Drug
ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE	P-PA	PA; Specialty Drug

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
EPOGEN INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML	P-PA	PA; Specialty Drug
FULPHILA	NP	PA; Specialty Drug; QL
FYLNETRA	NP	PA; Specialty Drug; QL
GRANIX	NP	PA; Specialty Drug
JESDUVROQ	NP	PA; AL
LEUKINE INJECTION SOLUTION RECONSTITUTED	NP	PA; Specialty Drug
NEULASTA ONPRO	NP	PA; Specialty Drug; QL
NEULASTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	NP	PA; Specialty Drug; QL
NEUPOGEN INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6ML	P	Specialty Drug
NEUPOGEN INJECTION SOLUTION PREFILLED SYRINGE	P	Specialty Drug
NIVESTYM	NP	PA; Specialty Drug
NYVEPRIA	P	Specialty Drug; QL
PROCRT	NP	PA; Specialty Drug
RELEUKO INJECTION SOLUTION 300 MCG/ML	NP	PA; Specialty Drug
releuko injection solution 480 mcg/1.6ml	NP	PA; Specialty Drug
releuko subcutaneous	NP	PA; Specialty Drug
RETACRIT INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 40000 UNIT/ML	P-PA	PA; Specialty Drug
STIMUFEND	F	PA; Specialty Drug; QL
UDENYCA	NP	PA; Specialty Drug; QL
UDENYCA ONBODY	NP	PA; Specialty Drug; QL
ZARXIO	NP	PA; Specialty Drug; QL
ZIEXTENZO	NP	PA; Specialty Drug; QL

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PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
<b>Hemorrhologic Agents</b>		
pentoxifylline er	F	
<b>Hemostatics</b>		
ADVATE	Carve-out	
adynovate	Carve-out	
AFSTYLA	Carve-out	
ALPHANATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT	Carve-out	
ALPHANATE/VWF COMPLEX/HUMAN	Carve-out	
ALPHANINE SD	Carve-out	
ALPROLIX	Carve-out	
ALTUVIIIIO INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT	Carve-out	
AMICAR ORAL SOLUTION	Carve-out	
AMICAR ORAL TABLET	Carve-out	
aminocaproic acid intravenous	Carve-out	
aminocaproic acid oral solution	Carve-out	
aminocaproic acid oral tablet	Carve-out	
BALFAXAR	Carve-out	
BENEFIX INTRAVENOUS KIT	Carve-out	
COAGADEX	Carve-out	
CORIFACT	Carve-out	
CYKLOKAPRON INTRAVENOUS SOLUTION 1000 MG/10ML	Carve-out	
desmopressin ace spray refrig	F	PA
desmopressin acetate oral	F	QL
desmopressin acetate spray	F	PA
ELOCTATE	Carve-out	
ESPEROCT	Carve-out	

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
FEIBA INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2500 UNIT, 500 UNIT	Carve-out	
FIBRYGA	Carve-out	
HELIXATE FS INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 3000 UNIT, 500 UNIT	Carve-out	
HEMLIBRA	Carve-out	
HEMOFIL M INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1700 UNIT, 250 UNIT, 500 UNIT	Carve-out	
HUMATE-P INTRAVENOUS SOLUTION RECONSTITUTED 1000-2400 UNIT, 250-600 UNIT, 500-1200 UNIT	Carve-out	
IDELVION	Carve-out	
IXINITY	Carve-out	
JIVI	Carve-out	
KCENTRA	Carve-out	
KOATE	Carve-out	
KOATE-DVI	Carve-out	
KOGENATE FS	Carve-out	
KOVALTRY	Carve-out	
LYSTEDA	Carve-out	
MONONINE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT	Carve-out	
NOVOEIGHT	Carve-out	
NOVOSEVEN RT	Carve-out	
NUWIQ	Carve-out	
obizur	Carve-out	
PROFILNINE	Carve-out	
REBINYN	Carve-out	
RECOMBINATE	Carve-out	
RIASTAP	Carve-out	

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
rixubis	Carve-out	
ROCTAVIAN	Carve-out	
SEVENFACT	Carve-out	
tranexamic acid intravenous solution 1000 mg/10ml	Carve-out	
tranexamic acid oral	Carve-out	
tranexamic acid-nacl	Carve-out	
TRETTEN	Carve-out	
VONVENDI	Carve-out	
WILATE INTRAVENOUS KIT	Carve-out	
XYNTHA INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT	Carve-out	
XYNTHA SOLOFUSE	Carve-out	
<b>Heparins</b>		
enoxaparin sodium injection solution 300 mg/3ml	P	Specialty Drug; 102 day supply allowed
enoxaparin sodium injection solution prefilled syringe	P	Specialty Drug; 102 day supply allowed
FRAGMIN SUBCUTANEOUS SOLUTION 10000 UNIT/4ML, 95000 UNIT/3.8ML	NP	PA; Specialty Drug; 102 day supply allowed
FRAGMIN SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	NP	PA; Specialty Drug; 102 day supply allowed
heparin sodium (porcine) injection solution 10000 unit/ml, 5000 unit/ml	F	
LOVENOX INJECTION	NP	PA; Specialty Drug; 102 day supply allowed
<b>Iron Preparations</b>		
BPROTECTED PEDIA IRON	F	OTC
classic prenatal	F	OTC; QL; AL
completenate	F	QL; AL
cvs iron oral tablet 240 (27 fe) mg, 325 (65 fe) mg	F	OTC
daily vitamin formula+iron	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
FE C PLUS	F	AL
FEOSOL ORAL TABLET 200 (65 FE) MG	F	OTC
FERATE ORAL TABLET 240 (27 FE) MG	F	OTC
FERGON	F	OTC
FER-IN-SOL	F	OTC
FEROSUL ORAL TABLET	F	OTC
ferrous gluconate oral tablet 240 (27 fe) mg, 324 (37.5 fe) mg, 324 (38 fe) mg	F	OTC
ferrous sulfate oral elixir	F	OTC; AL
ferrous sulfate oral liquid	F	OTC; AL
ferrous sulfate oral solution 220 (44 fe) mg/5ml, 300 (60 fe) mg/5ml, 300 mg/6.8ml, 75 (15 fe) mg/ml	F	OTC; AL
ferrous sulfate oral syrup	F	OTC; AL
ferrous sulfate oral tablet 325 (65 fe) mg	F	OTC
ferrous sulfate oral tablet delayed release	F	OTC
fe-vite iron	F	OTC
gnp iron oral tablet 200 (65 fe) mg	F	OTC
gnp iron oral tablet extended release	F	OTC
gnp one daily plus iron	F	OTC
iron (ferrous sulfate) oral solution	F	OTC
iron 100 plus	F	OTC; AL
iron 27	F	OTC
iron high-potency oral tablet	F	OTC
iron infant & toddler	F	OTC
iron infant/toddler	F	OTC
iron oral tablet 325 (65 fe) mg	F	OTC
iron supplement childrens	F	OTC; AL
iron supplement oral elixir	F	OTC; AL
iron supplement oral solution 220 (44 fe) mg/5ml	F	OTC; AL
kp ferrous sulfate	F	OTC

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
m-natal plus	F	QL; AL
multi-vit/iron/fluoride	F	OTC; QL; AL
multi-vitamin/fluoride/iron	F	QL; AL
NEPHRON FA	F	
NESTABS	F	QL; AL
NIVA-PLUS	F	QL; AL
one daily multivitamin/iron	F	OTC
pc pediatric iron drops	F	OTC
pnv tabs 29-1	F	QL; AL
PRENATABS RX	F	OTC; QL; AL
prenatal 19 oral tablet	F	OTC; QL; AL
prenatal oral tablet 27-1 mg	F	QL; AL
prenatal oral tablet 28-0.8 mg	F	OTC; QL; AL
prenatal plus	F	QL; AL
prenatal vitamin and mineral	F	OTC; QL; AL
prenatal vitamin plus low iron	F	QL; AL
prenatal vitamins oral tablet 28-0.8 mg	F	OTC; QL; AL
preplus	F	QL; AL
pretab	F	QL; AL
qc prenatal	F	OTC; QL; AL
ra iron oral tablet 325 (65 fe) mg	F	OTC
ra slow release iron oral tablet extended release 45 mg	F	OTC
se-natal 19 oral tablet	F	QL; AL
slow release iron oral tablet extended release 45 mg	F	OTC
sm iron oral tablet 325 (65 fe) mg	F	OTC
sm prenatal vitamins	F	OTC; QL; AL
tab-a-vite/iron	F	OTC
TAB-A-VITE/IRON/BETA CAROTENE	F	OTC
thrivite rx	F	QL; AL

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
TRICARE	F	QL; AL
trinatal rx 1	F	QL; AL
VINATE ONE	F	QL; AL
westab plus	F	QL; AL
<b>Liver And Stomach Preparations</b>		
cyanocobalamin injection solution 1000 mcg/ml	F	
DODEX	F	
<b>Platelet-Aggregation Inhibitors</b>		
adult aspirin regimen	F	OTC; QL
aspirin 81	F	OTC; QL
aspirin adult low dose	F	OTC; QL
aspirin adult low strength oral tablet delayed release	F	OTC; QL
aspirin buf(cacarb-mgcarb-mgo)	F	OTC; AL
aspirin childrens	F	OTC; QL
aspirin ec low dose	F	OTC; QL
aspirin ec low strength	F	OTC; QL
aspirin low dose oral tablet chewable	F	OTC; QL
aspirin low dose oral tablet delayed release	F	OTC; QL
aspirin low strength	F	OTC; QL
aspirin oral tablet 325 mg	F	OTC; QL; AL
aspirin oral tablet chewable	F	OTC; QL
aspirin oral tablet delayed release 325 mg	F	OTC; QL; AL
aspirin oral tablet delayed release 81 mg	F	OTC; QL
aspirin rectal suppository 300 mg, 600 mg	F	OTC
aspirin regimen	F	OTC; QL
aspirin-dipyridamole er	NP	PA; 102 day supply allowed
BAYER ASPIRIN EC LOW DOSE	F	OTC; QL
BAYER ASPIRIN ORAL TABLET	F	OTC; QL; AL

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
BAYER ASPIRIN ORAL TABLET DELAYED RELEASE	F	OTC; QL; AL
BAYER LOW DOSE	F	OTC; QL
BRILINTA	P	102 day supply allowed
BUFFERIN	F	OTC; AL
childrens aspirin	F	OTC; QL
cilostazol	F	QL
clopidogrel bisulfate oral	P	102 day supply allowed; QL
cvs aspirin adult low dose	F	OTC; QL
cvs aspirin ec oral tablet delayed release 81 mg	F	OTC; QL
cvs aspirin low dose	F	OTC; QL
cvs aspirin low strength oral tablet delayed release	F	OTC; QL
cvs aspirin oral tablet 325 mg	F	OTC; QL; AL
cvs genuine aspirin	F	OTC; QL; AL
dipyridamole oral	NP	PA; 102 day supply allowed
ECOTRIN LOW STRENGTH	F	OTC; QL
EFFIENT	NP	PA; 102 day supply allowed; AL
eq aspirin adult low dose	F	OTC; QL
eq aspirin low dose oral tablet chewable	F	OTC; QL
eq aspirin oral tablet	F	OTC; QL; AL
eql aspirin low dose	F	OTC; QL
gnp aspirin low dose	F	OTC; QL
goodsense aspirin adult low st	F	OTC; QL
goodsense aspirin adults	F	OTC; QL; AL
goodsense aspirin oral tablet	F	OTC; QL; AL
goodsense aspirin oral tablet chewable	F	OTC; QL
goodsense aspirin oral tablet delayed release	F	OTC; QL; AL
hm adult aspirin	F	OTC; QL; AL
hm aspirin ec	F	OTC; QL; AL
hm aspirin ec low dose	F	OTC; QL

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
hm aspirin oral tablet	F	OTC; QL; AL
hm aspirin oral tablet chewable	F	OTC; QL
hm aspirin oral tablet delayed release	F	OTC; QL; AL
kp aspirin	F	OTC; QL
MEDI-FIRST ASPIRIN	F	OTC; QL; AL
MEDIQUE ASPIRIN	F	OTC; QL; AL
PLAVIX ORAL TABLET 75 MG	NP	PA; 102 day supply allowed; QL
prasugrel hcl	P	102 day supply allowed; AL
px aspirin oral tablet	F	OTC; QL; AL
px aspirin oral tablet chewable	F	OTC; QL
qc aspirin	F	OTC; QL; AL
qc aspirin low dose	F	OTC; QL
qc enteric aspirin	F	OTC; QL; AL
ra aspirin adult low dose	F	OTC; QL
ra aspirin adult low strength oral tablet chewable	F	OTC; QL
ra aspirin childrens	F	OTC; QL
ra aspirin ec oral tablet delayed release 325 mg	F	OTC; QL; AL
ra aspirin ec oral tablet delayed release 81 mg	F	OTC; QL
ra aspirin oral tablet 325 mg	F	OTC; QL; AL
sb aspirin adult low strength	F	OTC; QL
sb aspirin oral tablet	F	OTC; QL; AL
sb childrens aspirin	F	OTC; QL
sb low dose asa ec	F	OTC; QL
sm aspirin	F	OTC; QL; AL
sm aspirin adult low strength	F	OTC; QL
sm aspirin low dose	F	OTC; QL
sm childrens aspirin	F	OTC; QL
ST JOSEPH LOW DOSE	F	OTC; QL
tri-buffered aspirin oral tablet 325 mg	F	OTC; AL
<b>Platelet-Reducing Agents</b>		

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PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
anagrelide hcl	F	
<b>Thrombolytic Agents</b>		
adult aspirin regimen	F	OTC; QL
aspirin 81	F	OTC; QL
aspirin adult low dose	F	OTC; QL
aspirin adult low strength oral tablet delayed release	F	OTC; QL
aspirin buf(cacarb-mgcarb-mgo)	F	OTC; AL
aspirin childrens	F	OTC; QL
aspirin ec low dose	F	OTC; QL
aspirin ec low strength	F	OTC; QL
aspirin low dose oral tablet chewable	F	OTC; QL
aspirin low dose oral tablet delayed release	F	OTC; QL
aspirin low strength	F	OTC; QL
aspirin oral tablet 325 mg	F	OTC; QL; AL
aspirin oral tablet chewable	F	OTC; QL
aspirin oral tablet delayed release 325 mg	F	OTC; QL; AL
aspirin oral tablet delayed release 81 mg	F	OTC; QL
aspirin rectal suppository 300 mg, 600 mg	F	OTC
aspirin regimen	F	OTC; QL
BAYER ASPIRIN EC LOW DOSE	F	OTC; QL
BAYER ASPIRIN ORAL TABLET	F	OTC; QL; AL
BAYER ASPIRIN ORAL TABLET DELAYED RELEASE	F	OTC; QL; AL
BAYER LOW DOSE	F	OTC; QL
BUFFERIN	F	OTC; AL
childrens aspirin	F	OTC; QL
cvs aspirin adult low dose	F	OTC; QL
cvs aspirin ec oral tablet delayed release 81 mg	F	OTC; QL
cvs aspirin low dose	F	OTC; QL

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
cvs aspirin low strength oral tablet delayed release	F	OTC; QL
cvs aspirin oral tablet 325 mg	F	OTC; QL; AL
cvs genuine aspirin	F	OTC; QL; AL
ECOTRIN LOW STRENGTH	F	OTC; QL
eq aspirin adult low dose	F	OTC; QL
eq aspirin low dose oral tablet chewable	F	OTC; QL
eq aspirin oral tablet	F	OTC; QL; AL
eql aspirin low dose	F	OTC; QL
gnp aspirin low dose	F	OTC; QL
goodsense aspirin adult low st	F	OTC; QL
goodsense aspirin adults	F	OTC; QL; AL
goodsense aspirin oral tablet	F	OTC; QL; AL
goodsense aspirin oral tablet chewable	F	OTC; QL
goodsense aspirin oral tablet delayed release	F	OTC; QL; AL
hm adult aspirin	F	OTC; QL; AL
hm aspirin ec	F	OTC; QL; AL
hm aspirin ec low dose	F	OTC; QL
hm aspirin oral tablet	F	OTC; QL; AL
hm aspirin oral tablet chewable	F	OTC; QL
hm aspirin oral tablet delayed release	F	OTC; QL; AL
kp aspirin	F	OTC; QL
MEDI-FIRST ASPIRIN	F	OTC; QL; AL
MEDIQUE ASPIRIN	F	OTC; QL; AL
px aspirin oral tablet	F	OTC; QL; AL
px aspirin oral tablet chewable	F	OTC; QL
qc aspirin	F	OTC; QL; AL
qc aspirin low dose	F	OTC; QL
qc enteric aspirin	F	OTC; QL; AL
ra aspirin adult low dose	F	OTC; QL

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
ra aspirin adult low strength oral tablet chewable	F	OTC; QL
ra aspirin childrens	F	OTC; QL
ra aspirin ec oral tablet delayed release 325 mg	F	OTC; QL; AL
ra aspirin ec oral tablet delayed release 81 mg	F	OTC; QL
ra aspirin oral tablet 325 mg	F	OTC; QL; AL
sb aspirin adult low strength	F	OTC; QL
sb aspirin oral tablet	F	OTC; QL; AL
sb childrens aspirin	F	OTC; QL
sb low dose asa ec	F	OTC; QL
sm aspirin	F	OTC; QL; AL
sm aspirin adult low strength	F	OTC; QL
sm aspirin low dose	F	OTC; QL
sm childrens aspirin	F	OTC; QL
ST JOSEPH LOW DOSE	F	OTC; QL
tri-buffered aspirin oral tablet 325 mg	F	OTC; AL

## **Cardiovascular Drugs**

### **Alpha-Adrenergic Blocking Agents**

CARDURA	NP	PA; 102 day supply allowed
CARDURA XL	NP	PA; 102 day supply allowed
carvedilol	P	102 day supply allowed
carvedilol phosphate er	P	102 day supply allowed
COREG	NP	PA; 102 day supply allowed
COREG CR	NP	PA; 102 day supply allowed
doxazosin mesylate oral	P	102 day supply allowed
labetalol hcl oral	P	102 day supply allowed
MINIPRESS	NP	PA; 102 day supply allowed
prazosin hcl oral	P	102 day supply allowed
terazosin hcl oral	P	102 day supply allowed

### **Alpha-Adrenergic Blocking Agt.(Hypoten)**

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
CARDURA	NP	PA; 102 day supply allowed
CARDURA XL	NP	PA; 102 day supply allowed
carvedilol	P	102 day supply allowed
carvedilol phosphate er	P	102 day supply allowed
COREG	NP	PA; 102 day supply allowed
COREG CR	NP	PA; 102 day supply allowed
doxazosin mesylate oral	P	102 day supply allowed
labetalol hcl oral	P	102 day supply allowed
MINIPRESS	NP	PA; 102 day supply allowed
prazosin hcl oral	P	102 day supply allowed
terazosin hcl oral	P	102 day supply allowed
<b>Angiotensin Ii Receptor Antagon.(Hypotn)</b>		
ATACAND	NP	PA; 102 day supply allowed
AVAPRO	NP	PA; 102 day supply allowed
BENICAR	NP	PA; 102 day supply allowed
candesartan cilexetil	NP	PA; 102 day supply allowed
COZAAR	NP	PA; 102 day supply allowed
DIOVAN	NP	PA; 102 day supply allowed
EDARBI	NP	PA; 102 day supply allowed
irbesartan	NP	PA; 102 day supply allowed
losartan potassium oral	P	102 day supply allowed
MICARDIS	NP	PA; 102 day supply allowed
olmesartan medoxomil oral	P	102 day supply allowed
telmisartan	NP	PA; 102 day supply allowed
valsartan oral solution	NP	PA; 102 day supply allowed
valsartan oral tablet	P	102 day supply allowed
<b>Angiotensin Ii Receptor Antagonists</b>		
amlodipine besylate-valsartan	P	102 day supply allowed
amlodipine-olmesartan	P	102 day supply allowed

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
amlodipine-valsartan-hctz	P	102 day supply allowed
ATACAND	NP	PA; 102 day supply allowed
ATACAND HCT	NP	PA; 102 day supply allowed
AVALIDE ORAL TABLET 150-12.5 MG, 300-12.5 MG	NP	PA; 102 day supply allowed
AVAPRO	NP	PA; 102 day supply allowed
AZOR	NP	PA; 102 day supply allowed
BENICAR	NP	PA; 102 day supply allowed
BENICAR HCT	NP	PA; 102 day supply allowed
candesartan cilexetil	NP	PA; 102 day supply allowed
candesartan cilexetil-hctz	NP	PA; 102 day supply allowed
COZAAR	NP	PA; 102 day supply allowed
DIOVAN	NP	PA; 102 day supply allowed
DIOVAN HCT	NP	PA; 102 day supply allowed
EDARBI	NP	PA; 102 day supply allowed
EDARBYCLOR	NP	PA; 102 day supply allowed
ENTRESTO	P	102 day supply allowed; QL
EXFORGE	NP	PA; 102 day supply allowed
EXFORGE HCT	NP	PA; 102 day supply allowed
HYZAAR	NP	PA; 102 day supply allowed
irbesartan	NP	PA; 102 day supply allowed
irbesartan-hydrochlorothiazide	NP	PA; 102 day supply allowed
losartan potassium oral	P	102 day supply allowed
losartan potassium-hctz	P	102 day supply allowed
MICARDIS	NP	PA; 102 day supply allowed
MICARDIS HCT	NP	PA; 102 day supply allowed
olmesartan medoxomil oral	P	102 day supply allowed
olmesartan medoxomil-hctz	P	102 day supply allowed
olmesartan-amlodipine-hctz	NP	PA; 102 day supply allowed
telmisartan	NP	PA; 102 day supply allowed

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PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
telmisartan-amlodipine	NP	PA; 102 day supply allowed
telmisartan-hctz	NP	PA; 102 day supply allowed
TRIBENZOR	NP	PA; 102 day supply allowed
valsartan oral solution	NP	PA; 102 day supply allowed
valsartan oral tablet	P	102 day supply allowed
valsartan-hydrochlorothiazide	P	102 day supply allowed
<b>Angiotensin-Convert.Enzyme Inhib(Hypotn)</b>		
ACCUPRIL	NP	PA; 102 day supply allowed
ALTACE ORAL CAPSULE	NP	PA; 102 day supply allowed
benazepril hcl oral	P	102 day supply allowed
captopril oral	NP	PA; 102 day supply allowed
enalapril maleate oral solution	NP	PA; 102 day supply allowed
enalapril maleate oral tablet	P	102 day supply allowed
EPANED ORAL SOLUTION	NP	PA; 102 day supply allowed
fosinopril sodium	NP	PA; 102 day supply allowed
lisinopril oral	P	102 day supply allowed
LOTENSIN ORAL TABLET 10 MG, 20 MG, 40 MG	NP	PA; 102 day supply allowed
moexipril hcl	NP	PA; 102 day supply allowed
perindopril erbumine	NP	PA; 102 day supply allowed
quinapril hcl	NP	PA; 102 day supply allowed
ramipril	P	102 day supply allowed
trandolapril	NP	PA; 102 day supply allowed
VASOTEC	NP	PA; 102 day supply allowed
ZESTRIL	NP	PA; 102 day supply allowed
<b>Angiotensin-Converting Enzyme Inhibitors</b>		
ACCUPRIL	NP	PA; 102 day supply allowed
ACCURETIC	NP	PA; 102 day supply allowed

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
ALTACE ORAL CAPSULE	NP	PA; 102 day supply allowed
amlodipine besy-benazepril hcl	P	102 day supply allowed
benazepril hcl oral	P	102 day supply allowed
benazepril-hydrochlorothiazide	P	102 day supply allowed
captopril oral	NP	PA; 102 day supply allowed
captopril-hydrochlorothiazide	NP	PA; 102 day supply allowed
enalapril maleate oral solution	NP	PA; 102 day supply allowed
enalapril maleate oral tablet	P	102 day supply allowed
enalapril-hydrochlorothiazide	P	102 day supply allowed
EPANED ORAL SOLUTION	NP	PA; 102 day supply allowed
fosinopril sodium	NP	PA; 102 day supply allowed
fosinopril sodium-hctz	NP	PA; 102 day supply allowed
lisinopril oral	P	102 day supply allowed
lisinopril-hydrochlorothiazide	P	102 day supply allowed
LOTENSIN HCT ORAL TABLET 10-12.5 MG, 20-12.5 MG, 20-25 MG	NP	PA; 102 day supply allowed
LOTENSIN ORAL TABLET 10 MG, 20 MG, 40 MG	NP	PA; 102 day supply allowed
LOTREL ORAL CAPSULE 10-20 MG, 10-40 MG, 5-10 MG, 5-20 MG	NP	PA; 102 day supply allowed
moexipril hcl	NP	PA; 102 day supply allowed
perindopril erbumine	NP	PA; 102 day supply allowed
QBRELIS	NP	PA; 102 day supply allowed
quinapril hcl	NP	PA; 102 day supply allowed
quinapril-hydrochlorothiazide	NP	PA; 102 day supply allowed
ramipril	P	102 day supply allowed
trandolapril	NP	PA; 102 day supply allowed
trandolapril-verapamil hcl er	NP	PA; 102 day supply allowed
VASERETIC	NP	PA; 102 day supply allowed
VASOTEC	NP	PA; 102 day supply allowed
ZESTORETIC	NP	PA; 102 day supply allowed

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
ZESTRIL	NP	PA; 102 day supply allowed
<b>Antiarrhythmics, Miscellaneous</b>		
digoxin oral tablet 125 mcg, 250 mcg	F	
magnesium sulfate injection solution 50 %	F	
<b>Antilipemic Agents, Miscellaneous</b>		
icosapent ethyl	NP	PA
LOVAZA	NP	PA
NEXLETOL	NP	PA; AL
NEXLIZET	NP	PA; AL
niacin er (antihyperlipidemic)	NP	PA
omega-3-acid ethyl esters	NP	PA
VASCEPA	NP	PA
<b>Beta-Adrenergic Blocking Agents</b>		
acebutolol hcl oral	NP	PA; 102 day supply allowed
atenolol oral	P	102 day supply allowed
atenolol-chlorthalidone	P	102 day supply allowed
BETAPACE AF	NP	PA; 102 day supply allowed
BETAPACE ORAL TABLET 120 MG, 160 MG, 80 MG	NP	PA; 102 day supply allowed
betaxolol hcl oral	NP	PA; 102 day supply allowed
bisoprolol fumarate oral	NP	PA; 102 day supply allowed
bisoprolol-hydrochlorothiazide	P	102 day supply allowed
BYSTOLIC	P	102 day supply allowed
carvedilol	P	102 day supply allowed
carvedilol phosphate er	P	102 day supply allowed
COREG	NP	PA; 102 day supply allowed
COREG CR	NP	PA; 102 day supply allowed
CORGARD	NP	PA; 102 day supply allowed
HEMANGEOL	NP	PA; Specialty Drug; 102 day supply allowed

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
INDERAL LA	NP	PA; 102 day supply allowed
INDERAL XL	NP	PA; 102 day supply allowed
INNOPRAN XL	NP	PA; 102 day supply allowed
KAPSPARGO SPRINKLE	NP	PA; 102 day supply allowed
labetalol hcl oral	P	102 day supply allowed
LOPRESSOR ORAL	NP	PA; 102 day supply allowed
metoprolol succinate er	P	102 day supply allowed
metoprolol tartrate oral	P	102 day supply allowed
metoprolol-hydrochlorothiazide	NP	PA; 102 day supply allowed
nadolol oral tablet 20 mg, 40 mg, 80 mg	NP	PA; 102 day supply allowed
nebivolol hcl	P	102 day supply allowed
pindolol	NP	PA; 102 day supply allowed
propranolol hcl er	P	102 day supply allowed
propranolol hcl oral	P	102 day supply allowed
propranolol-hctz	NP	PA; 102 day supply allowed
SORINE	P	102 day supply allowed
sotalol hcl (af)	P	102 day supply allowed
sotalol hcl oral	P	102 day supply allowed
SOTYLIZE	NP	PA; 102 day supply allowed
TENORETIC 100	NP	PA; 102 day supply allowed
TENORETIC 50	NP	PA; 102 day supply allowed
TENORMIN	NP	PA; 102 day supply allowed
timolol maleate oral	NP	PA; 102 day supply allowed
TOPROL XL	NP	PA; 102 day supply allowed
ZIAC	NP	PA; 102 day supply allowed
<b>Beta-Adrenergic Blocking Agt.(Hypoten)</b>		
acebutolol hcl oral	NP	PA; 102 day supply allowed
atenolol oral	P	102 day supply allowed
BETAPACE AF	NP	PA; 102 day supply allowed

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
BETAPACE ORAL TABLET 120 MG, 160 MG, 80 MG	NP	PA; 102 day supply allowed
betaxolol hcl oral	NP	PA; 102 day supply allowed
bisoprolol fumarate oral	NP	PA; 102 day supply allowed
carvedilol	P	102 day supply allowed
carvedilol phosphate er	P	102 day supply allowed
COREG	NP	PA; 102 day supply allowed
COREG CR	NP	PA; 102 day supply allowed
CORGARD	NP	PA; 102 day supply allowed
HEMANGEOL	NP	PA; Specialty Drug; 102 day supply allowed
INDERAL LA	NP	PA; 102 day supply allowed
INDERAL XL	NP	PA; 102 day supply allowed
INNOPRAN XL	NP	PA; 102 day supply allowed
KAPSPARGO SPRINKLE	NP	PA; 102 day supply allowed
labetalol hcl oral	P	102 day supply allowed
LOPRESSOR ORAL	NP	PA; 102 day supply allowed
metoprolol succinate er	P	102 day supply allowed
metoprolol tartrate oral	P	102 day supply allowed
nadolol oral tablet 20 mg, 40 mg, 80 mg	NP	PA; 102 day supply allowed
pindolol	NP	PA; 102 day supply allowed
propranolol hcl er	P	102 day supply allowed
propranolol hcl oral	P	102 day supply allowed
SORINE	P	102 day supply allowed
sotalol hcl (af)	P	102 day supply allowed
sotalol hcl oral	P	102 day supply allowed
SOTYLIZE	NP	PA; 102 day supply allowed
TENORMIN	NP	PA; 102 day supply allowed
timolol maleate oral	NP	PA; 102 day supply allowed
TOPROL XL	NP	PA; 102 day supply allowed

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
<b>Bile Acid Sequestrants</b>		
cholestyramine light	P	102 day supply allowed
cholestyramine oral	P	102 day supply allowed
colesevelam hcl	NP	PA; 102 day supply allowed
COLESTID	NP	PA; 102 day supply allowed
COLESTID FLAVORED	NP	PA; 102 day supply allowed
colestipol hcl oral granules	NP	PA; 102 day supply allowed
colestipol hcl oral packet	NP	PA; 102 day supply allowed
colestipol hcl oral tablet	P	102 day supply allowed
PREVALITE	P	102 day supply allowed
QUESTRAN	NP	PA; 102 day supply allowed
QUESTRAN LIGHT ORAL POWDER	NP	PA; 102 day supply allowed
WELCHOL	NP	PA; 102 day supply allowed
<b>Calcium-Channel Block.Agt,Misc(Hypoten)</b>		
CARDIZEM CD	NP	PA; 102 day supply allowed
CARDIZEM LA	NP	PA; 102 day supply allowed
CARDIZEM ORAL TABLET 120 MG, 30 MG, 60 MG	NP	PA; 102 day supply allowed
CARTIA XT	P	102 day supply allowed
diltiazem hcl er beads	P	102 day supply allowed
diltiazem hcl er coated beads oral capsule extended release 24 hour	P	102 day supply allowed
diltiazem hcl er oral capsule extended release 12 hour	P	102 day supply allowed
diltiazem hcl er oral capsule extended release 24 hour 120 mg, 240 mg	P	
diltiazem hcl er oral tablet extended release 24 hour 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	NP	PA; 102 day supply allowed
diltiazem hcl oral	P	102 day supply allowed
dilt-xr	P	102 day supply allowed

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
MATZIM LA	NP	PA; 102 day supply allowed
TAZTIA XT	P	102 day supply allowed
TIADYLT ER	NP	PA; 102 day supply allowed
TIAZAC	NP	PA; 102 day supply allowed
verapamil hcl er oral capsule extended release 24 hour	NP	PA; 102 day supply allowed
verapamil hcl er oral tablet extended release 120 mg, 180 mg, 240 mg	P	102 day supply allowed
verapamil hcl oral	P	102 day supply allowed
VERELAN PM	NP	PA; 102 day supply allowed
<b>Calcium-Channel Blocking Agents, Misc.</b>		
CARDIZEM CD	NP	PA; 102 day supply allowed
CARDIZEM LA	NP	PA; 102 day supply allowed
CARDIZEM ORAL TABLET 120 MG, 30 MG, 60 MG	NP	PA; 102 day supply allowed
CARTIA XT	P	102 day supply allowed
diltiazem hcl er beads	P	102 day supply allowed
diltiazem hcl er coated beads oral capsule extended release 24 hour	P	102 day supply allowed
diltiazem hcl er oral capsule extended release 12 hour	P	102 day supply allowed
diltiazem hcl er oral capsule extended release 24 hour 120 mg, 240 mg	P	
diltiazem hcl er oral tablet extended release 24 hour 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	NP	PA; 102 day supply allowed
diltiazem hcl oral	P	102 day supply allowed
dilt-xr	P	102 day supply allowed
MATZIM LA	NP	PA; 102 day supply allowed
TAZTIA XT	P	102 day supply allowed
TIADYLT ER	NP	PA; 102 day supply allowed
TIAZAC	NP	PA; 102 day supply allowed

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
trandolapril-verapamil hcl er	NP	PA; 102 day supply allowed
verapamil hcl er oral capsule extended release 24 hour	NP	PA; 102 day supply allowed
verapamil hcl er oral tablet extended release 120 mg, 180 mg, 240 mg	P	102 day supply allowed
verapamil hcl oral	P	102 day supply allowed
VERELAN PM	NP	PA; 102 day supply allowed
<b>Carbonic Anhydrase Inhibitors(Hypoten)</b>		
acetazolamide er	F	QL
acetazolamide oral	F	QL
<b>Cardiac Drugs, Miscellaneous</b>		
ASPRUZYO SPRINKLE	F	PA; QL; AL
CAMZYOS	F	PA; QL; AL
CORLANOR ORAL SOLUTION	F	PA
CORLANOR ORAL TABLET	F	PA; Specialty Drug
ranolazine er	F	PA; QL
<b>Cardiotonic Agents</b>		
digoxin oral tablet 125 mcg, 250 mcg	F	
<b>Central Alpha-Agonists</b>		
CATAPRES	P	102 day supply allowed
CATAPRES-TTS-1	P	102 day supply allowed; QL
CATAPRES-TTS-2	P	102 day supply allowed; QL
CATAPRES-TTS-3	P	102 day supply allowed; QL
clonidine	P	102 day supply allowed; QL
clonidine hcl er oral tablet extended release 12 hour	Carve-out	
clonidine hcl er oral tablet extended release 24 hour	P	
clonidine hcl oral	P	102 day supply allowed
guanfacine hcl oral	P	102 day supply allowed

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
KAPVAY ORAL TABLET EXTENDED RELEASE 12 HOUR	Carve-out	
methyldopa oral	P	102 day supply allowed
methyldopa-hydrochlorothiazide	NP	PA; 102 day supply allowed
NEXICLON XR ORAL TABLET EXTENDED RELEASE 24 HOUR	P	102 day supply allowed
TENEX	P	102 day supply allowed
<b>Cholesterol Absorption Inhibitors</b>		
ezetimibe	P	
ezetimibe-simvastatin	NP	PA; QL
NEXLIZET	NP	PA; AL
VYTORIN	NP	PA; QL
ZETIA	NP	PA
<b>Class Ia Antiarrhythmics</b>		
disopyramide phosphate oral	F	AL
quinidine sulfate oral	F	
<b>Class Ib Antiarrhythmics</b>		
DILANTIN	Carve-out	
DILANTIN INFATABS	Carve-out	
mexiletine hcl oral	F	
PHENYTEK	Carve-out	
PHENYTOIN INFATABS	Carve-out	
phenytoin oral	Carve-out	
phenytoin sodium extended	Carve-out	
phenytoin sodium injection	Carve-out	
<b>Class Ic Antiarrhythmics</b>		
flecainide acetate	F	
propafenone hcl	F	
<b>Class Ii Antiarrhythmics</b>		
acebutolol hcl oral	NP	PA; 102 day supply allowed

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
atenolol oral	P	102 day supply allowed
BETAPACE AF	NP	PA; 102 day supply allowed
BETAPACE ORAL TABLET 120 MG, 160 MG, 80 MG	NP	PA; 102 day supply allowed
betaxolol hcl oral	NP	PA; 102 day supply allowed
bisoprolol fumarate oral	NP	PA; 102 day supply allowed
carvedilol	P	102 day supply allowed
carvedilol phosphate er	P	102 day supply allowed
COREG	NP	PA; 102 day supply allowed
COREG CR	NP	PA; 102 day supply allowed
HEMANGEOL	NP	PA; Specialty Drug; 102 day supply allowed
INDERAL LA	NP	PA; 102 day supply allowed
INDERAL XL	NP	PA; 102 day supply allowed
INNOPRAN XL	NP	PA; 102 day supply allowed
KAPSPARGO SPRINKLE	NP	PA; 102 day supply allowed
labetalol hcl oral	P	102 day supply allowed
LOPRESSOR ORAL	NP	PA; 102 day supply allowed
metoprolol succinate er	P	102 day supply allowed
metoprolol tartrate oral	P	102 day supply allowed
pindolol	NP	PA; 102 day supply allowed
propranolol hcl er	P	102 day supply allowed
propranolol hcl oral	P	102 day supply allowed
SORINE	P	102 day supply allowed
sotalol hcl (af)	P	102 day supply allowed
sotalol hcl oral	P	102 day supply allowed
SOTYLIZE	NP	PA; 102 day supply allowed
TENORMIN	NP	PA; 102 day supply allowed
timolol maleate oral	NP	PA; 102 day supply allowed
TOPROL XL	NP	PA; 102 day supply allowed

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
<b>Class Iii Antiarrhythmics</b>		
amiodarone hcl oral tablet 100 mg	F	QL
amiodarone hcl oral tablet 200 mg, 400 mg	F	
BETAPACE AF	NP	PA; 102 day supply allowed
BETAPACE ORAL TABLET 120 MG, 160 MG, 80 MG	NP	PA; 102 day supply allowed
dofetilide	F	Specialty Drug
PACERONE ORAL TABLET 200 MG	F	
SORINE	P	102 day supply allowed
sotalol hcl (af)	P	102 day supply allowed
sotalol hcl oral	P	102 day supply allowed
SOTYLIZE	NP	PA; 102 day supply allowed
<b>Class Iv Antiarrhythmics</b>		
CARDIZEM CD	NP	PA; 102 day supply allowed
CARDIZEM LA	NP	PA; 102 day supply allowed
CARDIZEM ORAL TABLET 120 MG, 30 MG, 60 MG	NP	PA; 102 day supply allowed
CARTIA XT	P	102 day supply allowed
diltiazem hcl er beads	P	102 day supply allowed
diltiazem hcl er coated beads oral capsule extended release 24 hour	P	102 day supply allowed
diltiazem hcl er oral capsule extended release 12 hour	P	102 day supply allowed
diltiazem hcl er oral capsule extended release 24 hour 120 mg, 240 mg	P	
diltiazem hcl er oral tablet extended release 24 hour 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	NP	PA; 102 day supply allowed
diltiazem hcl oral	P	102 day supply allowed
dilt-xr	P	102 day supply allowed
MATZIM LA	NP	PA; 102 day supply allowed
TAZTIA XT	P	102 day supply allowed

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
TIADYL ER	NP	PA; 102 day supply allowed
TIAZAC	NP	PA; 102 day supply allowed
verapamil hcl er oral capsule extended release 24 hour	NP	PA; 102 day supply allowed
verapamil hcl er oral tablet extended release 120 mg, 180 mg, 240 mg	P	102 day supply allowed
verapamil hcl oral	P	102 day supply allowed
VERELAN PM	NP	PA; 102 day supply allowed
<b>Dihydropyridines</b>		
amlodipine besy-benazepril hcl	P	102 day supply allowed
amlodipine besylate oral	P	102 day supply allowed
amlodipine besylate-valsartan	P	102 day supply allowed
amlodipine-atorvastatin	NP	PA; 102 day supply allowed; QL
amlodipine-olmesartan	P	102 day supply allowed
amlodipine-valsartan-hctz	P	102 day supply allowed
AZOR	NP	PA; 102 day supply allowed
CADUET ORAL TABLET 10-10 MG, 10-20 MG, 10-40 MG, 10-80 MG, 5-10 MG, 5-20 MG, 5-40 MG, 5-80 MG	NP	PA; 102 day supply allowed; QL
EXFORGE	NP	PA; 102 day supply allowed
EXFORGE HCT	NP	PA; 102 day supply allowed
felodipine er	NP	PA; 102 day supply allowed
isradipine	NP	PA; 102 day supply allowed
KATERZIA	NP	PA; 102 day supply allowed; AL
levamlodipine maleate	NP	PA; 102 day supply allowed
LOTREL ORAL CAPSULE 10-20 MG, 10-40 MG, 5-10 MG, 5-20 MG	NP	PA; 102 day supply allowed
nicardipine hcl oral	NP	PA; 102 day supply allowed
nifedipine er	P	102 day supply allowed
nifedipine er osmotic release	P	102 day supply allowed
nifedipine oral	P	102 day supply allowed

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
nimodipine oral	F	QL
nisoldipine er	NP	PA; 102 day supply allowed
NORLIQVA	NP	PA; 102 day supply allowed; AL
NORVASC	NP	PA; 102 day supply allowed
olmesartan-amlodipine-hctz	NP	PA; 102 day supply allowed
PROCARDIA XL	NP	PA; 102 day supply allowed
SULAR ORAL TABLET EXTENDED RELEASE 24 HOUR 17 MG, 34 MG, 8.5 MG	NP	PA; 102 day supply allowed
telmisartan-amlodipine	NP	PA; 102 day supply allowed
TRIBENZOR	NP	PA; 102 day supply allowed
<b>Dihydropyridines (Antihypertensive)</b>		
amlodipine besylate oral	P	102 day supply allowed
felodipine er	NP	PA; 102 day supply allowed
isradipine	NP	PA; 102 day supply allowed
KATERZIA	NP	PA; 102 day supply allowed; AL
levamlodipine maleate	NP	PA; 102 day supply allowed
nicardipine hcl oral	NP	PA; 102 day supply allowed
nifedipine er	P	102 day supply allowed
nifedipine er osmotic release	P	102 day supply allowed
nifedipine oral	P	102 day supply allowed
nimodipine oral	F	QL
nisoldipine er	NP	PA; 102 day supply allowed
NORLIQVA	NP	PA; 102 day supply allowed; AL
NORVASC	NP	PA; 102 day supply allowed
PROCARDIA XL	NP	PA; 102 day supply allowed
SULAR ORAL TABLET EXTENDED RELEASE 24 HOUR 17 MG, 34 MG, 8.5 MG	NP	PA; 102 day supply allowed
<b>Direct Vasodilators</b>		
hydralazine hcl injection	F	
hydralazine hcl oral	F	QL

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
minoxidil oral	F	
<b>Diuretics, Miscellaneous (Hypotensive)</b>		
theophylline er oral tablet extended release 12 hour 300 mg, 450 mg	F	
theophylline er oral tablet extended release 24 hour 400 mg	F	
theophylline oral	F	
<b>Fibric Acid Derivatives</b>		
ANTARA ORAL CAPSULE 30 MG, 90 MG	NP	PA
fenofibrate micronized oral capsule 130 mg, 30 mg, 43 mg, 90 mg	NP	PA
fenofibrate micronized oral capsule 134 mg, 200 mg, 67 mg	P	
fenofibrate oral capsule 134 mg, 200 mg, 67 mg	P	
fenofibrate oral capsule 150 mg, 50 mg	NP	PA
fenofibrate oral tablet 120 mg, 40 mg	NP	PA
fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg	P	
fenofibric acid oral capsule delayed release	NP	PA
fenofibric acid oral tablet 105 mg	NP	PA
FENOGLIDE	NP	PA
FIBRICOR	NP	PA
gemfibrozil oral	P	
LIPOFEN	NP	PA
LOPID	NP	PA
TRICOR	NP	PA
TRILIPIX	NP	PA
<b>Hmg-Coa Reductase Inhibitors</b>		
ALTOPREV	NP	PA; QL
amlodipine-atorvastatin	NP	PA; 102 day supply allowed; QL
ATORVALIQ	NP	PA; QL

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
atorvastatin calcium oral	P	QL
CADUET ORAL TABLET 10-10 MG, 10-20 MG, 10-40 MG, 10-80 MG, 5-10 MG, 5-20 MG, 5-40 MG, 5-80 MG	NP	PA; 102 day supply allowed; QL
CRESTOR	NP	PA; QL
EZALLOR SPRINKLE	NP	PA; QL
ezetimibe-simvastatin	NP	PA; QL
fluvastatin sodium	NP	PA; QL
fluvastatin sodium er	NP	PA; QL
LESCOL XL	NP	PA; QL
LIPITOR	NP	PA; QL
LIVALO	NP	PA; QL
lovastatin oral	P	QL
pitavastatin calcium	NP	PA; QL
pravastatin sodium	P	QL
rosuvastatin calcium	P	QL
simvastatin oral tablet	P	QL
VYTORIN	NP	PA; QL
ZOCOR ORAL TABLET 10 MG, 20 MG, 40 MG, 80 MG	NP	PA; QL
ZYPITAMAG ORAL TABLET 2 MG, 4 MG	NP	PA; QL
<b>Loop Diuretics (Hypotensive Agents)</b>		
furosemide oral solution 10 mg/ml, 8 mg/ml	F	AL
furosemide oral tablet	F	
torseamide oral	F	
<b>Mineralocorticoid (Aldosterone) Antagnts</b>		
KERENDIA	F	PA; QL; AL
spironolactone oral tablet	F	
spironolactone-hctz	F	

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
<b>Mineralocorticoid(Aldoster.)Antag(Hypot)</b>		
spironolactone oral tablet	F	
<b>Nitrates And Nitrites</b>		
isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	F	
isosorbide mononitrate	F	
isosorbide mononitrate er	F	QL
NITRO-BID	F	
nitroglycerin sublingual	F	
nitroglycerin transdermal patch 24 hour	F	QL
nitroglycerin translingual solution	F	ST
NITRO-TIME ORAL CAPSULE EXTENDED RELEASE 9 MG	F	
<b>Pcsk9 Inhibitors</b>		
PRALUENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML	P-PA	PA; QL
PRALUENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR 75 MG/ML	P-PA	PA; Specialty Drug; QL
REPATHA	P-PA	PA; Specialty Drug; QL
REPATHA PUSHTRONEX SYSTEM	P-PA	PA; Specialty Drug; QL
REPATHA SURECLICK	P-PA	PA; Specialty Drug; QL
<b>Phosphodiesterase Type 5 Inhibitors</b>		
ADCIRCA	NP	PA; Specialty Drug; 102 day supply allowed
ALYQ	P-PA	PA; Specialty Drug; 102 day supply allowed
cilostazol	F	QL
ENTADFI	NP	PA
LIQREV	NP	PA; Specialty Drug

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
REVATIO ORAL	NP	PA; Specialty Drug; 102 day supply allowed
sildenafil citrate oral suspension reconstituted	P-PA	PA; Specialty Drug; 102 day supply allowed
sildenafil citrate oral tablet 20 mg	P-PA	PA; Specialty Drug; 102 day supply allowed
tadalafil (pah)	P-PA	PA; Specialty Drug; 102 day supply allowed
TADLIQ	NP	PA; Specialty Drug; AL
<b>Potassium-Sparing Diuretics (Hypoten)</b>		
amiloride hcl oral	F	
spironolactone oral tablet	F	
<b>Renin Inhibitors</b>		
aliskiren fumarate	NP	PA; 102 day supply allowed
TEKTURNA	NP	PA; 102 day supply allowed
TEKTURNA HCT	NP	PA; 102 day supply allowed
<b>Renin-Angioten.-Aldost. Sys. Inhib, Misc</b>		
ENTRESTO	P	102 day supply allowed; QL
<b>Sodium-Gluc (Sgl) Cotransporter Inhib</b>		
INPEFA ORAL TABLET 200 MG	NP	PA; 102 day supply allowed
INPEFA ORAL TABLET 400 MG	NP	PA; 102 day supply allowed
<b>Steroidal Mineralocorticoid Receptor Ant</b>		
spironolactone oral tablet	F	
spironolactone-hctz	F	
<b>Thiazide Diuretics(Hypotensive Agents)</b>		
DIURIL	F	AL
hydrochlorothiazide oral	F	

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
<b>Thiazide-Like Diuretics(Hypotensive Agt)</b>		
chlorthalidone oral tablet 25 mg, 50 mg	F	
indapamide oral	F	
metolazone	F	
<b>Vasodilating Agents, Miscellaneous</b>		
ambrisentan	P-PA	PA; Specialty Drug; 102 day supply allowed
amlodipine besylate oral	P	102 day supply allowed
bosentan	NP	PA; Specialty Drug; 102 day supply allowed
CARDIZEM CD	NP	PA; 102 day supply allowed
CARDIZEM LA	NP	PA; 102 day supply allowed
CARDIZEM ORAL TABLET 120 MG, 30 MG, 60 MG	NP	PA; 102 day supply allowed
CARTIA XT	P	102 day supply allowed
CORLANOR ORAL SOLUTION	F	PA
CORLANOR ORAL TABLET	F	PA; Specialty Drug
diltiazem hcl er beads	P	102 day supply allowed
diltiazem hcl er coated beads oral capsule extended release 24 hour	P	102 day supply allowed
diltiazem hcl er oral capsule extended release 12 hour	P	102 day supply allowed
diltiazem hcl er oral capsule extended release 24 hour 120 mg, 240 mg	P	
diltiazem hcl er oral tablet extended release 24 hour 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	NP	PA; 102 day supply allowed
diltiazem hcl oral	P	102 day supply allowed
dilt-xr	P	102 day supply allowed
dipyridamole oral	NP	PA; 102 day supply allowed
eql niacin flush free	F	OTC
KATERZIA	NP	PA; 102 day supply allowed; AL

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
LETAIRIS	NP	PA; Specialty Drug; 102 day supply allowed
levamlodipine maleate	NP	PA; 102 day supply allowed
MATZIM LA	NP	PA; 102 day supply allowed
niacin flush free oral capsule 500 mg	F	OTC
NIACIN FLUSH-FREE EX ST	F	OTC
nicardipine hcl oral	NP	PA; 102 day supply allowed
nifedipine er	P	102 day supply allowed
nifedipine er osmotic release	P	102 day supply allowed
nifedipine oral	P	102 day supply allowed
nimodipine oral	F	QL
NORLIQVA	NP	PA; 102 day supply allowed; AL
NORVASC	NP	PA; 102 day supply allowed
OPSUMIT	P-PA	PA; Specialty Drug; 102 day supply allowed
ORENITRAM	NP	PA; Specialty Drug; 102 day supply allowed
ORENITRAM MONTH 1	NP	PA; Specialty Drug
ORENITRAM MONTH 2	NP	PA; Specialty Drug
ORENITRAM MONTH 3	NP	PA; Specialty Drug
PROCARDIA XL	NP	PA; 102 day supply allowed
qc niacin oral capsule	F	OTC
TAZTIA XT	P	102 day supply allowed
TIADYLT ER	NP	PA; 102 day supply allowed
TIAZAC	NP	PA; 102 day supply allowed
TRACLEER ORAL TABLET	P-PA	PA; Specialty Drug; 102 day supply allowed
TRACLEER ORAL TABLET SOLUBLE	NP	PA; Specialty Drug; 102 day supply allowed
TYVASO	P-PA	PA; Specialty Drug; 102 day supply allowed

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
TYVASO DPI MAINTENANCE KIT	NP	PA; Specialty Drug; 102 day supply allowed
TYVASO DPI TITRATION KIT	NP	PA; Specialty Drug; 102 day supply allowed
TYVASO REFILL	P-PA	PA; Specialty Drug; 102 day supply allowed
TYVASO STARTER	P-PA	PA; Specialty Drug; 102 day supply allowed
VENTAVIS	P-PA	PA; Specialty Drug; 102 day supply allowed
verapamil hcl er oral capsule extended release 24 hour	NP	PA; 102 day supply allowed
verapamil hcl er oral tablet extended release 120 mg, 180 mg, 240 mg	P	102 day supply allowed
verapamil hcl oral	P	102 day supply allowed
VERELAN PM	NP	PA; 102 day supply allowed
VERQUVO	F	PA; QL; AL

### **Cellular And Gene Therapy**

#### **Gene Therapy**

ELEVIDYS 10.0-10.4 KG	Carve-out	
ELEVIDYS 10.5-11.4 KG	Carve-out	
ELEVIDYS 11.5-12.4 KG	Carve-out	
ELEVIDYS 12.5-13.4 KG	Carve-out	
ELEVIDYS 13.5-14.4 KG	Carve-out	
ELEVIDYS 14.5-15.4 KG	Carve-out	
ELEVIDYS 15.5-16.4 KG	Carve-out	
ELEVIDYS 16.5-17.4 KG	Carve-out	
ELEVIDYS 17.5-18.4 KG	Carve-out	
ELEVIDYS 18.5-19.4 KG	Carve-out	
ELEVIDYS 19.5-20.4 KG	Carve-out	
ELEVIDYS 20.5-21.4 KG	Carve-out	

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
ELEVIDYS 21.5-22.4 KG	Carve-out	
ELEVIDYS 22.5-23.4 KG	Carve-out	
ELEVIDYS 23.5-24.4 KG	Carve-out	
ELEVIDYS 24.5-25.4 KG	Carve-out	
ELEVIDYS 25.5-26.4 KG	Carve-out	
ELEVIDYS 26.5-27.4 KG	Carve-out	
ELEVIDYS 27.5-28.4 KG	Carve-out	
ELEVIDYS 28.5-29.4 KG	Carve-out	
ELEVIDYS 29.5-30.4 KG	Carve-out	
ELEVIDYS 30.5-31.4 KG	Carve-out	
ELEVIDYS 31.5-32.4 KG	Carve-out	
ELEVIDYS 32.5-33.4 KG	Carve-out	
ELEVIDYS 33.5-34.4 KG	Carve-out	
ELEVIDYS 34.5-35.4 KG	Carve-out	
ELEVIDYS 35.5-36.4 KG	Carve-out	
ELEVIDYS 36.5-37.4 KG	Carve-out	
ELEVIDYS 37.5-38.4 KG	Carve-out	
ELEVIDYS 38.5-39.4 KG	Carve-out	
ELEVIDYS 39.5-40.4 KG	Carve-out	
ELEVIDYS 40.5-41.4 KG	Carve-out	
ELEVIDYS 41.5-42.4 KG	Carve-out	
ELEVIDYS 42.5-43.4 KG	Carve-out	
ELEVIDYS 43.5-44.4 KG	Carve-out	
ELEVIDYS 44.5-45.4 KG	Carve-out	
ELEVIDYS 45.5-46.4 KG	Carve-out	
ELEVIDYS 46.5-47.4 KG	Carve-out	
ELEVIDYS 47.5-48.4 KG	Carve-out	
ELEVIDYS 48.5-49.4 KG	Carve-out	
ELEVIDYS 49.5-50.4 KG	Carve-out	
ELEVIDYS 50.5-51.4 KG	Carve-out	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
ELEVIDYS 51.5-52.4 KG	Carve-out	
ELEVIDYS 52.5-53.4 KG	Carve-out	
ELEVIDYS 53.5-54.4 KG	Carve-out	
ELEVIDYS 54.5-55.4 KG	Carve-out	
ELEVIDYS 55.5-56.4 KG	Carve-out	
ELEVIDYS 56.5-57.4 KG	Carve-out	
ELEVIDYS 57.5-58.4 KG	Carve-out	
ELEVIDYS 58.5-59.4 KG	Carve-out	
ELEVIDYS 59.5-60.4 KG	Carve-out	
ELEVIDYS 60.5-61.4 KG	Carve-out	
ELEVIDYS 61.5-62.4 KG	Carve-out	
ELEVIDYS 62.5-63.4 KG	Carve-out	
ELEVIDYS 63.5-64.4 KG	Carve-out	
ELEVIDYS 64.5-65.4 KG	Carve-out	
ELEVIDYS 65.5-66.4 KG	Carve-out	
ELEVIDYS 66.5-67.4 KG	Carve-out	
ELEVIDYS 67.5-68.4 KG	Carve-out	
ELEVIDYS 68.5-69.4 KG	Carve-out	
ELEVIDYS 69.5 KG PLUS	Carve-out	
ROCTAVIAN	Carve-out	
ZYNTEGLO	Carve-out	
<b>Central Nervous System Agents</b>		
<b>Adamantanes (Cns)</b>		
amantadine hcl oral capsule	P	102 day supply allowed
amantadine hcl oral solution	P	102 day supply allowed
amantadine hcl oral tablet	NP	PA; 102 day supply allowed
GOCOVRI	NP	PA; Specialty Drug; 102 day supply allowed
OSMOLEX ER ORAL TABLET EXTENDED RELEASE 24 HOUR 129 MG, 193 MG	NP	PA; 102 day supply allowed

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
<b>Amphetamine Derivatives</b>		
ADIPEX-P	P-PA	PA; AL
diethylpropion hcl er	P-PA	PA; AL
diethylpropion hcl oral	P-PA	PA; AL
LOMAIRA	P-PA	PA; AL
phendimetrazine tartrate	P-PA	PA; AL
phendimetrazine tartrate er	P-PA	PA; AL
phentermine hcl oral	P-PA	PA; AL
<b>Amphetamines</b>		
ADDERALL	Carve-out	
ADDERALL XR	Carve-out	
ADZENYS ER	Carve-out	
ADZENYS XR-ODT	Carve-out	
amphetamine er	Carve-out	
amphetamine sulfate	Carve-out	
amphetamine-dextroamphet er	Carve-out	
amphetamine-dextroamphetamine	Carve-out	
amphet-dextroamphet 3-bead er	Carve-out	
benzphetamine hcl oral tablet 50 mg	P-PA	PA; AL
DESOXYN	Carve-out	
DEXEDRINE ORAL CAPSULE EXTENDED RELEASE 24 HOUR	Carve-out	
dextroamphetamine sulfate er	Carve-out	
dextroamphetamine sulfate oral	Carve-out	
DYANAVEL XR	Carve-out	
EVEKEO	Carve-out	
EVEKEO ODT	Carve-out	
lisdexamfetamine dimesylate	Carve-out	
methamphetamine hcl	Carve-out	
MYDAYIS	Carve-out	

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
PROCENTRA	Carve-out	
VYVANSE	Carve-out	
XELSTRYM	Carve-out	
ZENZEDI	Carve-out	
<b>Analgesics And Antipyretics, Misc.</b>		
8 hr arthritis pain relief	F	OTC
8hr muscle aches & pain	F	OTC
acetaminophen 8 hour oral tablet extended release	F	OTC
acetaminophen childrens oral suspension 160 mg/5ml	F	OTC
acetaminophen extra strength oral tablet	F	OTC
acetaminophen infants	F	OTC
acetaminophen junior strength	F	OTC
acetaminophen oral liquid	F	OTC
acetaminophen oral solution 160 mg/5ml, 325 mg/10.15ml, 650 mg/20.3ml	F	OTC
acetaminophen oral suspension 160 mg/5ml	F	OTC
acetaminophen oral tablet 325 mg	F	OTC
acetaminophen rectal suppository 120 mg, 650 mg	F	OTC
acetaminophen-codeine oral solution	P	AL
acetaminophen-codeine oral tablet 300-15 mg, 300-30 mg, 300-60 mg	P	AL
ADVIL DUAL ACTION	NP	PA; OTC
apap-caff-dihydrocodeine oral capsule	NP	PA; AL
apap-caff-dihydrocodeine oral tablet 325-30-16 mg	NP	PA; AL
APHEN	F	OTC
arthritis pain reliever oral	F	OTC
BAC	F	QL; AL
betatemp childrens	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
butalbital-acetaminophen oral tablet 50-325 mg	F	QL; AL
butalbital-apap-caff-cod	NP	PA; AL
butalbital-apap-caffeine oral tablet 50-325-40 mg	F	QL; AL
childrens acetaminophen oral suspension 160 mg/5ml	F	OTC
childrens apap	F	OTC
childrens non-aspirin oral tablet chewable	F	OTC
childrens silapap	F	OTC
cvs 8hr arthritis pain relief	F	OTC
cvs 8hr muscle aches & pain	F	OTC
cvs acetaminophen ex st oral tablet	F	OTC
cvs acetaminophen oral tablet	F	OTC
cvs arthritis pain relief oral	F	OTC
cvs pain & fever childrens	F	OTC
cvs pain relief extra strength	F	OTC
cvs pain relief oral tablet	F	OTC
ENDOCET ORAL TABLET 10-325 MG, 2.5-325 MG, 5-325 MG, 7.5-325 MG	P	
eq 8hr arthritis pain relief	F	OTC
eq acetaminophen oral tablet 500 mg	F	OTC
eq pain & fever childrens oral suspension	F	OTC
eq pain & fever infants	F	OTC
eq pain reliever	F	OTC
eq pain reliever ex st oral tablet	F	OTC
eq acetaminophen childrens	F	OTC
eq acetaminophen ex st	F	OTC
ESGIC ORAL TABLET	F	QL; AL
FEVERALL ADULTS	F	OTC
FEVERALL CHILDRENS	F	OTC
FEVERALL JUNIOR STRENGTH	F	OTC

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
FIORICET/CODEINE ORAL CAPSULE 50-300-40-30 MG	NP	PA; AL
GABACAIN	Carve-out	
GABAPAL COMBINATION THERAPY PACK 100 & 3.88 MG & %	Carve-out	
gabapentin oral capsule	Carve-out	
gabapentin oral solution	Carve-out	
gabapentin oral tablet 600 mg, 800 mg	Carve-out	
gnp 8 hour arthritis relief	F	OTC
gnp 8 hour pain reliever	F	OTC
gnp acetaminophen ex st oral tablet	F	OTC
gnp acetaminophen oral tablet	F	OTC
gnp children's pain & fever	F	OTC
gnp infants pain/fever	F	OTC
gnp pain & fever childrens oral suspension 160 mg/5ml	F	OTC
gnp pain & fever infants	F	OTC
goodsense arthritis pain oral	F	OTC
goodsense pain & fever child	F	OTC
goodsense pain & fever infants	F	OTC
goodsense pain relief extra st	F	OTC
goodsense pain relief oral tablet	F	OTC
GRALISE ORAL TABLET	NP	PA; QL
HEALTHY MAMA SHAKE THAT ACHE	F	OTC
hm pain & fever childrens	F	OTC
hm pain & fever infants	F	OTC
hm pain relief	F	OTC
hm pain relief extra strength	F	OTC
hm pain relieve child dye-free	F	OTC
hm pain reliever	F	OTC
hm pain reliever childrens	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
hm pain reliever infants	F	OTC
hydrocodone-acetaminophen oral solution 2.5-108 mg/5ml, 5-217 mg/10ml, 7.5-325 mg/15ml	P	
hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg, 5-300 mg, 5-325 mg, 7.5-300 mg, 7.5-325 mg	P	
ILARIS SUBCUTANEOUS SOLUTION	Carve-out	
infants pain & fever	F	OTC
kls acetaminophen ex st	F	OTC
LIDOTIN	Carve-out	
LIPRITIN	Carve-out	
LIPRITIN II COMBINATION THERAPY PACK 100 MG	Carve-out	
liquid acetaminophen	F	OTC
LITTLE REMEDIES FOR FEVER ORAL LIQUID	F	OTC
LORTAB ORAL ELIXIR 10-300 MG/15ML	NP	PA
LYRICA CR	Carve-out	
mapap arthritis pain	F	OTC
MAPAP CHILDRENS ORAL TABLET CHEWABLE 80 MG	F	OTC
mapap oral capsule	F	OTC
mapap oral tablet chewable	F	OTC
MM ACETAMINOPHEN EX STR	F	OTC
m-pap	F	OTC
NEURONTIN	Carve-out	
non-aspirin childrens oral suspension	F	OTC
non-aspirin extra strength oral tablet	F	OTC
non-aspirin oral tablet	F	OTC
non-aspirin pain relief	F	OTC
oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	P	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
pain & fever infants	F	OTC
pain relief regular strength	F	OTC
pain reliever extra strength oral tablet 500 mg	F	OTC
pain reliever oral tablet 325 mg	F	OTC
pain reliever/fever reducer	F	OTC
PENTICAN	Carve-out	
PERCOCET ORAL TABLET 10-325 MG, 2.5-325 MG, 5-325 MG, 7.5-325 MG	NP	PA
PHARBETOL EXTRA STRENGTH	F	OTC
PHARBETOL ORAL TABLET 325 MG	F	OTC
pregabalin er	Carve-out	
px arthritis pain relief	F	OTC
px childrens pain relief	F	OTC
px pain relief extra strength	F	OTC
qc acetaminophen 8 hours	F	OTC
qc acetaminophen infants	F	OTC
qc arthritis pain relief	F	OTC
qc non-aspirin childrens oral suspension	F	OTC
qc non-aspirin extra strength	F	OTC
qc pain relief childrens	F	OTC
qc pain relief extra strength oral tablet 500 mg	F	OTC
qc pain relief infants	F	OTC
qc pain relief oral tablet	F	OTC
ra acetaminophen ex st	F	OTC
ra acetaminophen oral tablet	F	OTC
ra arthritis pain relief oral	F	OTC
ra fever reducer/pain reliever	F	OTC
ra pain relief acetaminophen	F	OTC
sb non-aspirin extra strength	F	OTC
sb non-aspirin oral tablet	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
sb pain reliever ex st	F	OTC
sm 8 hour pain relief	F	OTC
sm arthritis pain reliever	F	OTC
sm pain & fever childrens	F	OTC
sm pain & fever infants	F	OTC
sm pain relief oral	F	OTC
sm pain reliever childrens	F	OTC
sm pain reliever ex st oral tablet	F	OTC
sm pain reliever ex st oral tablet extended release	F	OTC
TENCON ORAL TABLET 50-325 MG	F	QL; AL
tramadol-acetaminophen	P	AL
TYLENOL 8 HOUR	F	OTC
TYLENOL CHILDRENS ORAL SUSPENSION	F	OTC
TYLENOL EXTRA STRENGTH ORAL TABLET	F	OTC
ULTRACET	NP	PA; AL
<b>Anorexigenic Agents, Miscellaneous</b>		
IMCIVREE	Carve-out	
ZEPBOUND	P-PA	PA; AL
<b>Anticholinergic Agents (Cns)</b>		
aler-cap	F	OTC; AL
ALKA-SELTZER PLUS ALLERGY	Carve-out	OTC
allergy childrens oral liquid	F	OTC
allergy relief childrens oral liquid	F	OTC
allergy relief oral capsule 25 mg	F	OTC; AL
allergy relief oral liquid	F	OTC
allergy relief oral tablet 25 mg	F	OTC
aurodryl allergy childrens	F	OTC
BANOPHEN ORAL CAPSULE 50 MG	F	OTC
BANOPHEN ORAL LIQUID	F	OTC

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
BANOPHEN ORAL TABLET	F	OTC
BENADRYL ALLERGY CHILDRENS ORAL LIQUID	F	OTC
BENADRYL ALLERGY ORAL TABLET	F	OTC
BENADRYL ALLERGY ULTRATABS	F	OTC
benztropine mesylate injection	Carve-out	
benztropine mesylate oral	Carve-out	
COGENTIN	Carve-out	
complete allergy relief	F	OTC
compoz	Carve-out	OTC
cvs allergy relief adult	F	OTC
cvs allergy relief childrens oral liquid	F	OTC
cvs allergy relief oral capsule 25 mg	F	OTC; AL
cvs allergy relief oral liquid	F	OTC
cvs allergy relief oral tablet 25 mg	F	OTC
cvs childrens allergy	F	OTC
cvs sleep aid nighttime	Carve-out	OTC
cvs sleep aid oral tablet 25 mg	Carve-out	OTC
cvs sleep-aid nighttime oral capsule	Carve-out	OTC
diphen oral tablet	F	OTC
diphenhydramine hcl (sleep) oral tablet 50 mg	Carve-out	OTC
diphenhydramine hcl childrens	F	OTC
diphenhydramine hcl injection	F	AL
diphenhydramine hcl oral capsule	F	AL
diphenhydramine hcl oral liquid 12.5 mg/5ml	F	OTC
diphenhydramine hcl oral tablet 25 mg	Carve-out	OTC; AL
eq allergy relief childrens oral liquid	F	OTC
eq nighttime sleep aid max st	Carve-out	OTC
eql allergy relief oral tablet 25 mg	F	OTC
eql nighttime sleep aid	Carve-out	OTC

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
eql sleep aid oral capsule	Carve-out	OTC
eql sleep aid oral liquid	Carve-out	OTC
ft nighttime sleep aid	Carve-out	OTC
ft sleep-aid maximum strength	Carve-out	OTC
geri-dryl oral liquid	F	OTC
gnp allergy antihistamine	F	OTC
gnp allergy childrens	F	OTC
gnp allergy relief max st	F	OTC
gnp allergy relief oral capsule	F	OTC; AL
gnp allergy relief oral tablet 25 mg	F	OTC
gnp childrens allergy	F	OTC
gnp nighttime sleep aid	Carve-out	OTC
gnp nighttime sleep-aid max st	Carve-out	OTC
gnp sleep aid nighttime	Carve-out	OTC
gnp sleep aid oral liquid	Carve-out	OTC
gnp sleep time	Carve-out	OTC
goodsense sleeptime	Carve-out	OTC
h-e-b childrens allergy	F	OTC
hm allergy relief childrens	F	OTC
hm nighttime sleep aid oral tablet	Carve-out	OTC
hm z-sleep oral liquid	Carve-out	OTC
KINDERMED KIDS ALLERGY	F	OTC
liquid allergy relief	F	OTC
m-dryl	F	OTC
NARAMIN	F	OTC
night time sleep aid	Carve-out	OTC
nighttime sleep aid oral tablet 25 mg	Carve-out	OTC
NYTOL	Carve-out	OTC
NYTOL MAXIMUM STRENGTH	Carve-out	OTC
NYTOL QUICKCAPS	Carve-out	OTC

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
ormir	Carve-out	OTC
orphenadrine citrate er	P	
PEDIACARE CHILDRENS ALLERGY	F	OTC
pharbedryl oral capsule 25 mg	F	OTC; AL
px allergy oral capsule	F	OTC; AL
px allergy oral liquid	F	OTC
px allergy oral tablet	F	OTC
qc allergy childrens	F	OTC
qc rest simply	Carve-out	OTC
qc sleep aid max st	Carve-out	OTC
ra allergy medication oral liquid	F	OTC
ra allergy oral liquid	F	OTC
ra allergy relief childrens oral liquid	F	OTC
ra allergy relief oral capsule 25 mg	F	OTC; AL
ra complete allergy	F	OTC
RA DIPHEDRYL ALLERGY	F	OTC
ra nighttime sleep aid oral tablet	Carve-out	OTC
ra sleep aid (diphenhydramine)	Carve-out	OTC
ra sleep aid oral capsule	Carve-out	OTC
ra sleep-aid nighttime	Carve-out	OTC
sb allergy medicine oral liquid	F	OTC
sb allergy medicine oral tablet	Carve-out	OTC
sb sleep	Carve-out	OTC
siladryl allergy	F	OTC
SIMPLY SLEEP	Carve-out	OTC
sleep aid (diphenhydramine)	Carve-out	OTC
sleep aid oral capsule 25 mg	Carve-out	OTC
sleep aid oral liquid	Carve-out	OTC
sleep ii	Carve-out	OTC
sleep tabs oral tablet 25 mg	Carve-out	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
sleep-aid oral capsule	Carve-out	OTC
sleep-tabs	Carve-out	OTC
sm allergy relief childrens	F	OTC
sm allergy relief oral liquid	F	OTC
sm nighttime sleep aid	Carve-out	OTC
sm sleep aid maximum strength	Carve-out	OTC
sm z-sleep	Carve-out	OTC
SOMINEX	Carve-out	OTC
SOMINEX MAX ST	Carve-out	OTC
SOMINEX NIGHTTIME SLEEP-AID	Carve-out	OTC
tgt sleep aid max strength	Carve-out	OTC
total allergy	F	OTC
TOTAL ALLERGY MEDICINE	F	OTC
trihexyphenidyl hcl	Carve-out	
UNISOM SLEEPGELS	Carve-out	OTC
UNISOM SLEEPMELTS	Carve-out	OTC
UNISOM SLEEPMINIS	Carve-out	OTC
WAL-DRYL ALLERGY CHILDRENS	F	OTC
WAL-DRYL ALLERGY ORAL LIQUID	F	OTC
WAL-SLEEP Z	Carve-out	OTC
wal-som maximum strength	Carve-out	OTC
wal-som oral tablet dispersible	Carve-out	OTC
ZZZQUIL	Carve-out	OTC
<b>Anticonvulsants, Miscellaneous</b>		
acetazolamide er	F	QL
acetazolamide oral	F	QL
APTIOM	Carve-out	
BANZEL	Carve-out	
BRIVIACT	Carve-out	
carbamazepine er	Carve-out	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
carbamazepine oral	Carve-out	
CARBATROL	Carve-out	
DEPACON	Carve-out	
DEPAKOTE	Carve-out	
DEPAKOTE ER	Carve-out	
DEPAKOTE SPRINKLES ORAL CAPSULE DELAYED RELEASE SPRINKLE	Carve-out	
DIACOMIT	Carve-out	
divalproex sodium er oral tablet extended release 24 hour	Carve-out	
divalproex sodium oral capsule delayed release sprinkle	Carve-out	
divalproex sodium oral tablet delayed release	Carve-out	
ELEPSIA XR	Carve-out	
EPIDIOLEX	Carve-out	
EPITOL	Carve-out	
EPRONTIA	Carve-out	
EQUETRO	Carve-out	
felbamate	Carve-out	
FELBATOL	Carve-out	
FINTEPLA	Carve-out	
FYCOMPA	Carve-out	
GABACAINE	Carve-out	
GABAPAL COMBINATION THERAPY PACK 100 & 3.88 MG & %	Carve-out	
gabapentin oral capsule	Carve-out	
gabapentin oral solution	Carve-out	
gabapentin oral tablet 600 mg, 800 mg	Carve-out	
GABITRIL	Carve-out	
GRALISE ORAL TABLET	NP	PA; QL

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
HORIZANT ORAL TABLET EXTENDED RELEASE	NP	PA; QL
KEPPRA	Carve-out	
KEPPRA XR	Carve-out	
lacosamide	Carve-out	
LAMICTAL ODT	Carve-out	
LAMICTAL ORAL TABLET	Carve-out	
LAMICTAL ORAL TABLET CHEWABLE 25 MG, 5 MG	Carve-out	
LAMICTAL STARTER	Carve-out	
LAMICTAL XR	Carve-out	
lamotrigine er	Carve-out	
lamotrigine oral kit 21 x 25 mg & 7 x 50 mg, 25 & 50 & 100 mg, 42 x 50 mg & 14x100 mg	Carve-out	
lamotrigine oral tablet	Carve-out	
lamotrigine oral tablet chewable	Carve-out	
lamotrigine oral tablet dispersible	Carve-out	
lamotrigine starter kit-blue	Carve-out	
lamotrigine starter kit-green	Carve-out	
lamotrigine starter kit-orange	Carve-out	
levetiracetam er	Carve-out	
levetiracetam in nacl	Carve-out	
levetiracetam intravenous	Carve-out	
levetiracetam oral	Carve-out	
LIDOTIN	Carve-out	
LIPRITIN	Carve-out	
LIPRITIN II COMBINATION THERAPY PACK 100 MG	Carve-out	
LYRICA	Carve-out	
magnesium sulfate injection solution 50 %	F	
MOTPOLY XR	Carve-out	

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
NEURONTIN	Carve-out	
oxcarbazepine	Carve-out	
OXTELLAR XR	Carve-out	
PENTICAN	Carve-out	
pregabalin oral	Carve-out	
QUDEXY XR	Carve-out	
ROWEEPRA	Carve-out	
ROWEEPRA XR	Carve-out	
rufinamide	Carve-out	
SABRIL	Carve-out	
SPRITAM	Carve-out	
SUBVENITE	Carve-out	
SUBVENITE STARTER KIT-BLUE	Carve-out	
SUBVENITE STARTER KIT-GREEN	Carve-out	
SUBVENITE STARTER KIT-ORANGE	Carve-out	
TEGRETOL ORAL SUSPENSION	Carve-out	
TEGRETOL ORAL TABLET	Carve-out	
TEGRETOL-XR	Carve-out	
tiagabine hcl	Carve-out	
TOPAMAX	Carve-out	
TOPAMAX SPRINKLE	Carve-out	
topiramate er	Carve-out	
topiramate oral	Carve-out	
TRILEPTAL	Carve-out	
TROKENDI XR	Carve-out	
valproate sodium intravenous solution 100 mg/ml, 500 mg/5ml	Carve-out	
valproic acid oral capsule	Carve-out	
valproic acid oral solution	Carve-out	
vigabatrin	Carve-out	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
VIGADRONE	Carve-out	
VIGPODER	Carve-out	
VIMPAT	Carve-out	
XCOPRI	Carve-out	
XCOPRI (250 MG DAILY DOSE)	Carve-out	
XCOPRI (350 MG DAILY DOSE)	Carve-out	
ZONEGRAN	Carve-out	
ZONISADE	Carve-out	
zonisamide oral	Carve-out	
ZTALMY	Carve-out	
<b>Antidepressants, Miscellaneous</b>		
APLENZIN	Carve-out	
AUVELITY	Carve-out	
bupropion hcl er (smoking det)	F	QL
bupropion hcl er (sr)	Carve-out	
bupropion hcl er (xl)	Carve-out	
bupropion hcl oral	Carve-out	
FORFIVO XL	Carve-out	
mirtazapine oral	Carve-out	
REMERON ORAL TABLET 15 MG, 30 MG	Carve-out	
REMERON SOLTAB	Carve-out	
SPRAVATO (56 MG DOSE)	Carve-out	
SPRAVATO (84 MG DOSE)	Carve-out	
WELLBUTRIN SR	Carve-out	
WELLBUTRIN XL	Carve-out	
ZULRESSO	Carve-out	
ZURZUVAE	Carve-out	
<b>Antimanic Agents</b>		
ABILIFY ASIMTUFII	Carve-out	Specialty Drug

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
ABILIFY MAINTENA INTRAMUSCULAR PREFILLED SYRINGE	Carve-out	
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	Carve-out	
ABILIFY MYCITE	Carve-out	
ABILIFY MYCITE MAINTENANCE KIT ORAL TABLET THERAPY PACK	Carve-out	
ABILIFY MYCITE STARTER KIT ORAL TABLET THERAPY PACK	Carve-out	
ABILIFY ORAL TABLET	Carve-out	
aripiprazole	Carve-out	
ARISTADA	Carve-out	
ARISTADA INITIO	Carve-out	
asenapine maleate	Carve-out	
carbamazepine er	Carve-out	
carbamazepine oral	Carve-out	
CARBATROL	Carve-out	
DEPACON	Carve-out	
DEPAKOTE	Carve-out	
DEPAKOTE ER	Carve-out	
DEPAKOTE SPRINKLES ORAL CAPSULE DELAYED RELEASE SPRINKLE	Carve-out	
divalproex sodium er oral tablet extended release 24 hour	Carve-out	
divalproex sodium oral capsule delayed release sprinkle	Carve-out	
divalproex sodium oral tablet delayed release	Carve-out	
EPITOL	Carve-out	
EQUETRO	Carve-out	
GEODON	Carve-out	
LAMICTAL ODT	Carve-out	
LAMICTAL ORAL TABLET	Carve-out	

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
LAMICTAL ORAL TABLET CHEWABLE 25 MG, 5 MG	Carve-out	
LAMICTAL STARTER	Carve-out	
LAMICTAL XR	Carve-out	
lamotrigine er	Carve-out	
lamotrigine oral kit 21 x 25 mg & 7 x 50 mg, 25 & 50 & 100 mg, 42 x 50 mg & 14x100 mg	Carve-out	
lamotrigine oral tablet	Carve-out	
lamotrigine oral tablet chewable	Carve-out	
lamotrigine oral tablet dispersible	Carve-out	
lamotrigine starter kit-blue	Carve-out	
lamotrigine starter kit-green	Carve-out	
lamotrigine starter kit-orange	Carve-out	
lithium	Carve-out	
lithium carbonate er	Carve-out	
lithium carbonate oral	Carve-out	
LITHOBID	Carve-out	
olanzapine	Carve-out	
PERSERIS	Carve-out	
quetiapine fumarate	Carve-out	
quetiapine fumarate er	Carve-out	
RISPERDAL	Carve-out	
RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	Carve-out	
risperidone	Carve-out	
risperidone microspheres er	Carve-out	
RISPERIDONE M-TAB ORAL TABLET DISPERSIBLE 2 MG	Carve-out	
RYKINDO	Carve-out	
SAPHRIS	Carve-out	
SECUADO	Carve-out	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
SEROQUEL	Carve-out	
SEROQUEL XR	Carve-out	
SUBVENITE	Carve-out	
SUBVENITE STARTER KIT-BLUE	Carve-out	
SUBVENITE STARTER KIT-GREEN	Carve-out	
SUBVENITE STARTER KIT-ORANGE	Carve-out	
TEGRETOL ORAL SUSPENSION	Carve-out	
TEGRETOL ORAL TABLET	Carve-out	
TEGRETOL-XR	Carve-out	
valproate sodium intravenous solution 100 mg/ml, 500 mg/5ml	Carve-out	
valproic acid oral capsule	Carve-out	
valproic acid oral solution	Carve-out	
ziprasidone hcl	Carve-out	
ziprasidone mesylate	Carve-out	
ZYPREXA	Carve-out	
ZYPREXA RELPREVV	Carve-out	
ZYPREXA ZYDIS	Carve-out	
<b>Antimigraine Agents, Miscellaneous</b>		
8 hr arthritis pain relief	F	OTC
8hr muscle aches & pain	F	OTC
acetaminophen 8 hour oral tablet extended release	F	OTC
acetaminophen childrens oral suspension 160 mg/5ml	F	OTC
acetaminophen extra strength oral tablet	F	OTC
acetaminophen infants	F	OTC
acetaminophen junior strength	F	OTC
acetaminophen oral liquid	F	OTC
acetaminophen oral solution 160 mg/5ml, 325 mg/10.15ml, 650 mg/20.3ml	F	OTC
acetaminophen oral suspension 160 mg/5ml	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
acetaminophen oral tablet 325 mg	F	OTC
acetaminophen rectal suppository 120 mg, 650 mg	F	OTC
adult aspirin regimen	F	OTC; QL
ADVIL JUNIOR STRENGTH	P	OTC
ADVIL MIGRAINE	P	OTC
ADVIL ORAL TABLET	P	OTC
all day pain relief	P	OTC
all day relief	P	OTC
ANAPROX DS	NP	PA
APHEN	F	OTC
arthritis pain reliever oral	F	OTC
aspirin 81	F	OTC; QL
aspirin adult low dose	F	OTC; QL
aspirin adult low strength oral tablet delayed release	F	OTC; QL
aspirin buf(cacarb-mgcarb-mgo)	F	OTC; AL
aspirin childrens	F	OTC; QL
aspirin ec low dose	F	OTC; QL
aspirin ec low strength	F	OTC; QL
aspirin low dose oral tablet chewable	F	OTC; QL
aspirin low dose oral tablet delayed release	F	OTC; QL
aspirin low strength	F	OTC; QL
aspirin oral tablet 325 mg	F	OTC; QL; AL
aspirin oral tablet chewable	F	OTC; QL
aspirin oral tablet delayed release 325 mg	F	OTC; QL; AL
aspirin oral tablet delayed release 81 mg	F	OTC; QL
aspirin rectal suppository 300 mg, 600 mg	F	OTC
aspirin regimen	F	OTC; QL
BAYER ASPIRIN EC LOW DOSE	F	OTC; QL
BAYER ASPIRIN ORAL TABLET	F	OTC; QL; AL

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
BAYER ASPIRIN ORAL TABLET DELAYED RELEASE	F	OTC; QL; AL
BAYER LOW DOSE	F	OTC; QL
betatemp childrens	F	OTC
BUFFERIN	F	OTC; AL
butorphanol tartrate nasal	NP	PA; QL
caffeine citrate oral solution 60 mg/3ml	F	AL
childrens acetaminophen oral suspension 160 mg/5ml	F	OTC
childrens apap	F	OTC
childrens aspirin	F	OTC; QL
childrens ibuprofen oral suspension 100 mg/5ml, 200 mg/10ml	P	OTC
childrens non-aspirin oral tablet chewable	F	OTC
childrens silapap	F	OTC
cvs 8hr arthritis pain relief	F	OTC
cvs 8hr muscle aches & pain	F	OTC
cvs acetaminophen ex st oral tablet	F	OTC
cvs acetaminophen oral tablet	F	OTC
cvs all day pain relief	P	OTC
cvs arthritis pain relief oral	F	OTC
cvs aspirin adult low dose	F	OTC; QL
cvs aspirin ec oral tablet delayed release 81 mg	F	OTC; QL
cvs aspirin low dose	F	OTC; QL
cvs aspirin low strength oral tablet delayed release	F	OTC; QL
cvs aspirin oral tablet 325 mg	F	OTC; QL; AL
cvs genuine aspirin	F	OTC; QL; AL
cvs ibuprofen	P	OTC
cvs ibuprofen childrens oral suspension 100 mg/5ml	P	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
cvs naproxen sodium	P	OTC
cvs pain & fever childrens	F	OTC
cvs pain relief extra strength	F	OTC
cvs pain relief oral tablet	F	OTC
DEPACON	Carve-out	
DEPAKOTE	Carve-out	
DEPAKOTE ER	Carve-out	
DEPAKOTE SPRINKLES ORAL CAPSULE DELAYED RELEASE SPRINKLE	Carve-out	
divalproex sodium er oral tablet extended release 24 hour	Carve-out	
divalproex sodium oral capsule delayed release sprinkle	Carve-out	
divalproex sodium oral tablet delayed release	Carve-out	
ec-naproxen	NP	PA
ECOTRIN LOW STRENGTH	F	OTC; QL
ELYXYB	NP	PA; QL; AL
EPRONTIA	Carve-out	
eq 8hr arthritis pain relief	F	OTC
eq acetaminophen oral tablet 500 mg	F	OTC
eq aspirin adult low dose	F	OTC; QL
eq aspirin low dose oral tablet chewable	F	OTC; QL
eq aspirin oral tablet	F	OTC; QL; AL
eq ibuprofen childrens	P	OTC
eq ibuprofen junior	P	OTC
eq ibuprofen oral tablet	P	OTC
eq pain & fever childrens oral suspension	F	OTC
eq pain & fever infants	F	OTC
eq pain reliever	F	OTC
eq pain reliever ex st oral tablet	F	OTC
eq acetaminophen childrens	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
eql acetaminophen ex st	F	OTC
eql aspirin low dose	F	OTC; QL
eql childrens ibuprofen	P	OTC
eql ibuprofen	P	OTC
eql ibuprofen infants	P	OTC
eql ibuprofen junior strength	P	OTC
FEVERALL ADULTS	F	OTC
FEVERALL CHILDRENS	F	OTC
FEVERALL JUNIOR STRENGTH	F	OTC
gnp 8 hour arthritis relief	F	OTC
gnp 8 hour pain reliever	F	OTC
gnp acetaminophen ex st oral tablet	F	OTC
gnp acetaminophen oral tablet	F	OTC
gnp aspirin low dose	F	OTC; QL
gnp childrens ibuprofen	P	OTC
gnp children's pain & fever	F	OTC
gnp ibuprofen childrens	P	OTC
gnp ibuprofen infants	P	OTC
gnp ibuprofen junior strength	P	OTC
gnp infants pain/fever	F	OTC
gnp naproxen sodium oral tablet	P	OTC
gnp pain & fever childrens oral suspension 160 mg/5ml	F	OTC
gnp pain & fever infants	F	OTC
goodsense arthritis pain oral	F	OTC
goodsense aspirin adult low st	F	OTC; QL
goodsense aspirin adults	F	OTC; QL; AL
goodsense aspirin oral tablet	F	OTC; QL; AL
goodsense aspirin oral tablet chewable	F	OTC; QL
goodsense aspirin oral tablet delayed release	F	OTC; QL; AL

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
goodsense ibuprofen	P	OTC
goodsense ibuprofen childrens oral suspension	P	OTC
goodsense ibuprofen infants	P	OTC
goodsense naproxen sodium	P	OTC
goodsense pain & fever child	F	OTC
goodsense pain & fever infants	F	OTC
goodsense pain relief extra st	F	OTC
goodsense pain relief oral tablet	F	OTC
HEALTHY MAMA SHAKE THAT ACHE	F	OTC
HEMANGEOL	NP	PA; Specialty Drug; 102 day supply allowed
hm adult aspirin	F	OTC; QL; AL
hm aspirin ec	F	OTC; QL; AL
hm aspirin ec low dose	F	OTC; QL
hm aspirin oral tablet	F	OTC; QL; AL
hm aspirin oral tablet chewable	F	OTC; QL
hm aspirin oral tablet delayed release	F	OTC; QL; AL
hm ibuprofen childrens	P	OTC
hm ibuprofen ib	P	OTC
hm ibuprofen infants	P	OTC
hm ibuprofen oral capsule	P	OTC
hm ibuprofen oral tablet	P	OTC
hm naproxen sodium	P	OTC
hm pain & fever childrens	F	OTC
hm pain & fever infants	F	OTC
hm pain relief	F	OTC
hm pain relief extra strength	F	OTC
hm pain relieve child dye-free	F	OTC
hm pain reliever	F	OTC
hm pain reliever childrens	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
hm pain reliever infants	F	OTC
IBU	P	
ibu-200	P	OTC
ibuprofen infants	P	OTC
ibuprofen junior strength oral tablet chewable	P	OTC
ibuprofen oral capsule	P	OTC
ibuprofen oral suspension	P	
ibuprofen oral tablet 200 mg	P	OTC
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	P	
INDERAL LA	NP	PA; 102 day supply allowed
INDERAL XL	NP	PA; 102 day supply allowed
INFANTS ADVIL	P	OTC
infants ibuprofen	P	OTC
infants pain & fever	F	OTC
INNOPRAN XL	NP	PA; 102 day supply allowed
ketoprofen er	NP	PA
ketoprofen oral capsule 50 mg, 75 mg	NP	PA
kls acetaminophen ex st	F	OTC
kls ibuprofen	P	OTC
kp aspirin	F	OTC; QL
liquid acetaminophen	F	OTC
LITTLE REMEDIES FOR FEVER ORAL LIQUID	F	OTC
mapap arthritis pain	F	OTC
MAPAP CHILDRENS ORAL TABLET CHEWABLE 80 MG	F	OTC
mapap oral capsule	F	OTC
mapap oral tablet chewable	F	OTC
MEDI-FIRST ASPIRIN	F	OTC; QL; AL
MEDI-FIRST IBUPROFEN	P	OTC
MEDIPROXEN	P	OTC

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
MEDIQUE ASPIRIN	F	OTC; QL; AL
meijer ibuprofen	P	OTC
MM ACETAMINOPHEN EX STR	F	OTC
MOTRIN IB ORAL CAPSULE	P	OTC
m-pap	F	OTC
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 375 MG, 500 MG, 750 MG	NP	PA
NAPROSYN ORAL SUSPENSION	NP	PA
naproxen oral suspension	NP	PA
naproxen oral tablet	P	
naproxen oral tablet delayed release	NP	PA
naproxen sodium er	NP	PA
naproxen sodium oral capsule	P	OTC
naproxen sodium oral tablet 220 mg	P	OTC
naproxen sodium oral tablet 275 mg, 550 mg	NP	PA
non-aspirin childrens oral suspension	F	OTC
non-aspirin extra strength oral tablet	F	OTC
non-aspirin oral tablet	F	OTC
non-aspirin pain relief	F	OTC
pain & fever infants	F	OTC
pain relief regular strength	F	OTC
pain reliever extra strength oral tablet 500 mg	F	OTC
pain reliever oral tablet 325 mg	F	OTC
pain reliever/fever reducer	F	OTC
PHARBETOL EXTRA STRENGTH	F	OTC
PHARBETOL ORAL TABLET 325 MG	F	OTC
propranolol hcl er	P	102 day supply allowed
propranolol hcl oral	P	102 day supply allowed
px all day relief	P	OTC
px arthritis pain relief	F	OTC

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px aspirin oral tablet	F	OTC; QL; AL
px aspirin oral tablet chewable	F	OTC; QL
px childrens pain relief	F	OTC
px childrens profen ib	P	OTC
px ibuprofen	P	OTC
px ibuprofen junior strength	P	OTC
px infants profen ib	P	OTC
px pain relief extra strength	F	OTC
qc acetaminophen 8 hours	F	OTC
qc acetaminophen infants	F	OTC
qc arthritis pain relief	F	OTC
qc aspirin	F	OTC; QL; AL
qc aspirin low dose	F	OTC; QL
qc childrens ibuprofen	P	OTC
qc enteric aspirin	F	OTC; QL; AL
qc ibuprofen ib	P	OTC
qc ibuprofen oral tablet	P	OTC
qc naproxen sodium oral tablet	P	OTC
qc non-aspirin childrens oral suspension	F	OTC
qc non-aspirin extra strength	F	OTC
qc pain relief childrens	F	OTC
qc pain relief extra strength oral tablet 500 mg	F	OTC
qc pain relief infants	F	OTC
qc pain relief oral tablet	F	OTC
ra acetaminophen ex st	F	OTC
ra acetaminophen oral tablet	F	OTC
ra arthritis pain relief oral	F	OTC
ra aspirin adult low dose	F	OTC; QL
ra aspirin adult low strength oral tablet chewable	F	OTC; QL
ra aspirin childrens	F	OTC; QL

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
ra aspirin ec oral tablet delayed release 325 mg	F	OTC; QL; AL
ra aspirin ec oral tablet delayed release 81 mg	F	OTC; QL
ra aspirin oral tablet 325 mg	F	OTC; QL; AL
ra fever reducer/pain reliever	F	OTC
ra ibuprofen childrens	P	OTC
ra ibuprofen infants	P	OTC
ra ibuprofen junior strength	P	OTC
ra ibuprofen oral tablet	P	OTC
ra pain relief acetaminophen	F	OTC
ra pain relief ibuprofen	P	OTC
sb aspirin adult low strength	F	OTC; QL
sb aspirin oral tablet	F	OTC; QL; AL
sb childrens aspirin	F	OTC; QL
sb ibuprofen	P	OTC
sb low dose asa ec	F	OTC; QL
sb naproxen sodium	P	OTC
sb non-aspirin extra strength	F	OTC
sb non-aspirin oral tablet	F	OTC
sb pain reliever ex st	F	OTC
sm 8 hour pain relief	F	OTC
sm arthritis pain reliever	F	OTC
sm aspirin	F	OTC; QL; AL
sm aspirin adult low strength	F	OTC; QL
sm aspirin low dose	F	OTC; QL
sm childrens aspirin	F	OTC; QL
sm childrens ibuprofen	P	OTC
sm ibuprofen	P	OTC
sm ibuprofen ib	P	OTC
sm ibuprofen ib childrens	P	OTC
sm ibuprofen jr	P	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
sm infants ibuprofen	P	OTC
sm naproxen sodium oral tablet	P	OTC
sm pain & fever childrens	F	OTC
sm pain & fever infants	F	OTC
sm pain relief oral	F	OTC
sm pain reliever childrens	F	OTC
sm pain reliever ex st oral tablet	F	OTC
sm pain reliever ex st oral tablet extended release	F	OTC
ST JOSEPH LOW DOSE	F	OTC; QL
timolol maleate oral	NP	PA; 102 day supply allowed
TOPAMAX	Carve-out	
TOPAMAX SPRINKLE	Carve-out	
topiramate er oral capsule extended release 24 hour	Carve-out	
topiramate oral	Carve-out	
tri-buffered aspirin oral tablet 325 mg	F	OTC; AL
TROKENDI XR	Carve-out	
TYLENOL 8 HOUR	F	OTC
TYLENOL CHILDRENS ORAL SUSPENSION	F	OTC
TYLENOL EXTRA STRENGTH ORAL TABLET	F	OTC
valproate sodium intravenous solution 100 mg/ml, 500 mg/5ml	Carve-out	
valproic acid oral capsule	Carve-out	
valproic acid oral solution	Carve-out	
WAL-PROFEN ORAL CAPSULE	P	OTC
<b>Antipsychotics, Miscellaneous</b>		
ADASUVE	Carve-out	
loxapine succinate oral	Carve-out	
molindone hcl	Carve-out	
pimozide	Carve-out	

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
<b>Anxiolytics,Sedatives,And Hypnotics,Misc</b>		
aler-cap	F	OTC; AL
ALKA-SELTZER PLUS ALLERGY	Carve-out	OTC
allergy childrens oral liquid	F	OTC
allergy relief childrens oral liquid	F	OTC
allergy relief oral capsule 25 mg	F	OTC; AL
allergy relief oral liquid	F	OTC
allergy relief oral tablet 25 mg	F	OTC
AMBIEN	Carve-out	
AMBIEN CR	Carve-out	
aurodryl allergy childrens	F	OTC
BANOPHEN ORAL CAPSULE 50 MG	F	OTC
BANOPHEN ORAL LIQUID	F	OTC
BANOPHEN ORAL TABLET	F	OTC
BELSOMRA	Carve-out	
BENADRYL ALLERGY CHILDRENS ORAL LIQUID	F	OTC
BENADRYL ALLERGY ORAL TABLET	F	OTC
BENADRYL ALLERGY ULTRATABS	F	OTC
bupirone hcl oral	Carve-out	
complete allergy relief	F	OTC
compoz	Carve-out	OTC
cvs allergy relief adult	F	OTC
cvs allergy relief childrens oral liquid	F	OTC
cvs allergy relief oral capsule 25 mg	F	OTC; AL
cvs allergy relief oral liquid	F	OTC
cvs allergy relief oral tablet 25 mg	F	OTC
cvs childrens allergy	F	OTC
cvs sleep aid nighttime	Carve-out	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
cvs sleep aid oral tablet 25 mg	Carve-out	OTC
cvs sleep-aid (doxylamine)	Carve-out	OTC
cvs sleep-aid nighttime oral capsule	Carve-out	OTC
cvs ultra sleep	Carve-out	OTC
DAYVIGO	Carve-out	
dexmedetomidine hcl	Carve-out	
dexmedetomidine hcl in nacl intravenous solution 200 mcg/50ml, 200-0.9 mcg/50ml-%, 400 mcg/100ml, 80 mcg/20ml	Carve-out	
dexmedetomidine hcl in nacl intravenous solution prefilled syringe 20-0.9 mcg/5ml-%	Carve-out	
dexmedetomidine hcl-dextrose	Carve-out	
diphen oral tablet	F	OTC
diphenhydramine hcl (sleep) oral tablet 50 mg	Carve-out	OTC
diphenhydramine hcl childrens	F	OTC
diphenhydramine hcl injection	F	AL
diphenhydramine hcl oral capsule	F	AL
diphenhydramine hcl oral liquid 12.5 mg/5ml	F	OTC
diphenhydramine hcl oral tablet 25 mg	Carve-out	OTC; AL
droperidol injection	Carve-out	
EDLUAR	Carve-out	
eq allergy relief childrens oral liquid	F	OTC
eq nighttime sleep aid max st	Carve-out	OTC
eql allergy relief oral tablet 25 mg	F	OTC
eql nighttime sleep aid	Carve-out	OTC
eql sleep aid	Carve-out	OTC
eszopiclone	Carve-out	
ft nighttime sleep aid	Carve-out	OTC
ft sleep aid (doxylamine)	Carve-out	OTC
ft sleep-aid maximum strength	Carve-out	OTC
geri-dryl oral liquid	F	OTC

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
gnp allergy antihistamine	F	OTC
gnp allergy childrens	F	OTC
gnp allergy relief max st	F	OTC
gnp allergy relief oral capsule	F	OTC; AL
gnp allergy relief oral tablet 25 mg	F	OTC
gnp childrens allergy	F	OTC
gnp nighttime sleep aid	Carve-out	OTC
gnp nighttime sleep-aid max st	Carve-out	OTC
gnp sleep aid	Carve-out	OTC
gnp sleep aid nighttime	Carve-out	OTC
gnp sleep time	Carve-out	OTC
goodsense sleeptime	Carve-out	OTC
h-e-b childrens allergy	F	OTC
HETLIOZ	Carve-out	
HETLIOZ LQ	Carve-out	
hm allergy relief childrens	F	OTC
hm nighttime sleep aid oral tablet	Carve-out	OTC
hm sleep aid	Carve-out	OTC
hm z-sleep oral liquid	Carve-out	OTC
hydroxyzine hcl oral syrup	P	
hydroxyzine hcl oral tablet	P	
hydroxyzine pamoate oral	P	
IGALMI	Carve-out	
INTERMEZZO SUBLINGUAL TABLET SUBLINGUAL 1.75 MG	Carve-out	
KINDERMED KIDS ALLERGY	F	OTC
kls sleep aid	Carve-out	OTC
liquid allergy relief	F	OTC
l-tryptophan oral	Carve-out	OTC
LUNESTA	Carve-out	

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
m-dryl	F	OTC
meprobamate	Carve-out	
NARAMIN	F	OTC
night time sleep aid	Carve-out	OTC
nighttime sleep aid oral tablet 25 mg	Carve-out	OTC
NYTOL	Carve-out	OTC
NYTOL MAXIMUM STRENGTH	Carve-out	OTC
NYTOL QUICKCAPS	Carve-out	OTC
ormir	Carve-out	OTC
PEDIACARE CHILDRENS ALLERGY	F	OTC
pharbedryl oral capsule 25 mg	F	OTC; AL
PRECEDEX INTRAVENOUS SOLUTION 1000 MCG/250ML, 200 MCG/2ML, 200 MCG/50ML, 400 MCG/100ML, 80 MCG/20ML	Carve-out	
promethazine hcl oral	F	AL
promethazine hcl rectal suppository 12.5 mg, 25 mg	F	QL; AL
px allergy oral capsule	F	OTC; AL
px allergy oral liquid	F	OTC
px allergy oral tablet	F	OTC
qc allergy childrens	F	OTC
qc rest simply	Carve-out	OTC
qc sleep aid max st	Carve-out	OTC
ra allergy medication oral liquid	F	OTC
ra allergy oral liquid	F	OTC
ra allergy relief childrens oral liquid	F	OTC
ra allergy relief oral capsule 25 mg	F	OTC; AL
ra complete allergy	F	OTC
RA DIPHEDRYL ALLERGY	F	OTC
ra night sleep aid	Carve-out	OTC
ra nighttime sleep aid oral tablet	Carve-out	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
ra sleep aid (diphenhydramine)	Carve-out	OTC
ra sleep aid oral capsule	Carve-out	OTC
ra sleep aid oral tablet	Carve-out	OTC
ra sleep-aid nighttime	Carve-out	OTC
ramelteon	Carve-out	
ROZEREM	Carve-out	
sb allergy medicine oral liquid	F	OTC
sb allergy medicine oral tablet	Carve-out	OTC
sb sleep	Carve-out	OTC
siladryl allergy	F	OTC
SIMPLY SLEEP	Carve-out	OTC
sleep aid (diphenhydramine)	Carve-out	OTC
sleep aid (doxylamine)	Carve-out	OTC
sleep aid oral capsule 25 mg	Carve-out	OTC
sleep aid oral liquid	Carve-out	OTC
sleep aid oral tablet	Carve-out	OTC
sleep ii	Carve-out	OTC
sleep tabs oral tablet 25 mg	Carve-out	OTC
sleep-aid	Carve-out	OTC
sleep-tabs	Carve-out	OTC
sm allergy relief childrens	F	OTC
sm allergy relief oral liquid	F	OTC
sm nighttime sleep aid	Carve-out	OTC
sm sleep aid	Carve-out	OTC
sm sleep aid maximum strength	Carve-out	OTC
sm z-sleep	Carve-out	OTC
SOMINEX	Carve-out	OTC
SOMINEX MAX ST	Carve-out	OTC
SOMINEX NIGHTTIME SLEEP-AID	Carve-out	OTC
tasimelteon	Carve-out	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
tgt sleep aid max strength	Carve-out	OTC
total allergy	F	OTC
TOTAL ALLERGY MEDICINE	F	OTC
UNISOM SLEEPGELS	Carve-out	OTC
UNISOM SLEEPMELTS	Carve-out	OTC
UNISOM SLEEPMINIS	Carve-out	OTC
UNISOM SLEEPTABS	Carve-out	OTC
VISTARIL	NP	PA
WAL-DRYL ALLERGY CHILDRENS	F	OTC
WAL-DRYL ALLERGY ORAL LIQUID	F	OTC
WAL-SLEEP Z	Carve-out	OTC
wal-som	Carve-out	OTC
wal-som maximum strength	Carve-out	OTC
zaleplon	Carve-out	
zolpidem tartrate	Carve-out	
zolpidem tartrate er	Carve-out	
ZOLPIMIST	Carve-out	
ZZZQUIL	Carve-out	OTC
<b>Atypical Antipsychotics</b>		
ABILIFY ASIMTUFII	Carve-out	Specialty Drug
ABILIFY MAINTENA INTRAMUSCULAR PREFILLED SYRINGE	Carve-out	
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	Carve-out	
ABILIFY MYCITE	Carve-out	
ABILIFY MYCITE MAINTENANCE KIT ORAL TABLET THERAPY PACK	Carve-out	
ABILIFY MYCITE STARTER KIT ORAL TABLET THERAPY PACK	Carve-out	
ABILIFY ORAL TABLET	Carve-out	
aripiprazole	Carve-out	

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
ARISTADA	Carve-out	
ARISTADA INITIO	Carve-out	
asenapine maleate	Carve-out	
CAPLYTA	Carve-out	
clozapine	Carve-out	
CLOZARIL	Carve-out	
FANAPT	Carve-out	
FANAPT TITRATION PACK	Carve-out	
FAZACLO ORAL TABLET DISPERSIBLE 100 MG, 12.5 MG, 150 MG, 200 MG	Carve-out	
GEODON	Carve-out	
INVEGA	Carve-out	
INVEGA HAFYERA	Carve-out	
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Carve-out	
INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 273 MG/0.88ML, 410 MG/1.32ML, 546 MG/1.75ML, 819 MG/2.63ML	Carve-out	
LATUDA	Carve-out	
lurasidone hcl	Carve-out	
LYBALVI	Carve-out	
NUPLAZID ORAL CAPSULE	Carve-out	
NUPLAZID ORAL TABLET 10 MG	Carve-out	
olanzapine	Carve-out	
olanzapine-fluoxetine hcl	Carve-out	
paliperidone er	Carve-out	
PERSERIS	Carve-out	
quetiapine fumarate	Carve-out	
quetiapine fumarate er	Carve-out	
REXULTI	Carve-out	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
RISPERDAL	Carve-out	
RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	Carve-out	
risperidone	Carve-out	
risperidone microspheres er	Carve-out	
RISPERIDONE M-TAB ORAL TABLET DISPERSIBLE 2 MG	Carve-out	
RYKINDO	Carve-out	
SAPHRIS	Carve-out	
SECUADO	Carve-out	
SEROQUEL	Carve-out	
SEROQUEL XR	Carve-out	
SYMBYAX ORAL CAPSULE 12-50 MG, 3-25 MG, 6-25 MG, 6-50 MG	Carve-out	
UZEDY	Carve-out	Specialty Drug
VERSACLOZ	Carve-out	
VRAYLAR	Carve-out	
ziprasidone hcl	Carve-out	
ziprasidone mesylate	Carve-out	
ZYPREXA	Carve-out	
ZYPREXA RELPREVV	Carve-out	
ZYPREXA ZYDIS	Carve-out	
<b>Barbiturates (Anticonvulsants)</b>		
MYSOLINE	Carve-out	
phenobarbital oral	Carve-out	
phenobarbital sodium injection	Carve-out	
primidone oral	Carve-out	
SEZABY	Carve-out	
<b>Barbiturates (Anxiolytic, Sedative/Hyp)</b>		
AMYTAL SODIUM	Carve-out	
ASCOMP-CODEINE	NP	PA; AL

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
BAC	F	QL; AL
butalbital-acetaminophen oral tablet 50-325 mg	F	QL; AL
butalbital-apap-caff-cod	NP	PA; AL
butalbital-apap-caffeine oral tablet 50-325-40 mg	F	QL; AL
butalbital-asa-caff-codeine	NP	PA; AL
butalbital-aspirin-caffeine oral capsule	F	AL
BUTISOL SODIUM ORAL TABLET 30 MG	Carve-out	
ESGIC ORAL TABLET	F	QL; AL
FIORICET/CODEINE ORAL CAPSULE 50-300-40-30 MG	NP	PA; AL
NEMBUTAL	Carve-out	
pentobarbital sodium injection	Carve-out	
phenobarbital oral	Carve-out	
phenobarbital sodium injection	Carve-out	
SECONAL	Carve-out	
SEZABY	Carve-out	
TENCON ORAL TABLET 50-325 MG	F	QL; AL
<b>Benzodiazepines (Anticonvulsants)</b>		
ATIVAN	Carve-out	
clobazam	Carve-out	
clonazepam oral	Carve-out	
clorazepate dipotassium	Carve-out	
DIASTAT ACUDIAL	Carve-out	
DIASTAT PEDIATRIC	Carve-out	
diazepam injection	Carve-out	
DIAZEPAM INTENSOL	Carve-out	
diazepam intramuscular solution auto-injector	Carve-out	
diazepam oral concentrate	Carve-out	
diazepam oral solution 5 mg/5ml	Carve-out	
diazepam oral tablet	Carve-out	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
diazepam rectal	Carve-out	
KLONOPIN	Carve-out	
lorazepam injection	Carve-out	
LORAZEPAM INTENSOL	Carve-out	
lorazepam oral	Carve-out	
LOREEV XR	Carve-out	
NAYZILAM	Carve-out	
ONFI ORAL SUSPENSION	Carve-out	
ONFI ORAL TABLET 10 MG, 20 MG	Carve-out	
SYMPAZAN	Carve-out	
TRANXENE-T ORAL TABLET 7.5 MG	Carve-out	
VALIUM	Carve-out	
VALTOCO 10 MG DOSE	Carve-out	
VALTOCO 15 MG DOSE	Carve-out	
VALTOCO 20 MG DOSE	Carve-out	
VALTOCO 5 MG DOSE	Carve-out	
<b>Benzodiazepines (Anxiolytic,Sedativ/Hyp)</b>		
alprazolam er	Carve-out	
ALPRAZOLAM INTENSOL	Carve-out	
alprazolam oral	Carve-out	
alprazolam xr	Carve-out	
ATIVAN	Carve-out	
chlordiazepoxide hcl	Carve-out	
chlordiazepoxide-amitriptyline	Carve-out	
clobazam	Carve-out	
clonazepam oral	Carve-out	
clorazepate dipotassium	Carve-out	
DIASTAT ACUDIAL	Carve-out	
DIASTAT PEDIATRIC	Carve-out	

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
diazepam injection	Carve-out	
DIAZEPAM INTENSOL	Carve-out	
diazepam intramuscular solution auto-injector	Carve-out	
diazepam oral concentrate	Carve-out	
diazepam oral solution 5 mg/5ml	Carve-out	
diazepam oral tablet	Carve-out	
diazepam rectal	Carve-out	
DORAL	Carve-out	
estazolam	Carve-out	
flurazepam hcl	Carve-out	
HALCION	Carve-out	
KLONOPIN	Carve-out	
lorazepam injection	Carve-out	
LORAZEPAM INTENSOL	Carve-out	
lorazepam oral	Carve-out	
LOREEV XR	Carve-out	
midazolam hcl (pf) injection solution 10 mg/2ml	F	QL
midazolam hcl injection solution 10 mg/2ml, 25 mg/5ml, 5 mg/ml, 50 mg/10ml	F	QL
midazolam hcl oral	Carve-out	
midazolam-ketamine-ondansetron sublingual	Carve-out	
mko melt dose pack sublingual	Carve-out	
ONFI ORAL SUSPENSION	Carve-out	
ONFI ORAL TABLET 10 MG, 20 MG	Carve-out	
oxazepam	Carve-out	
quazepam	Carve-out	
RESTORIL	Carve-out	
SYMPAZAN	Carve-out	
temazepam	Carve-out	
TRANXENE-T ORAL TABLET 7.5 MG	Carve-out	

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
triazolam	Carve-out	
VALIUM	Carve-out	
XANAX	Carve-out	
XANAX XR	Carve-out	
<b>Butyrophenones</b>		
HALDOL	Carve-out	
HALDOL DECANOATE	Carve-out	
haloperidol decanoate intramuscular solution 100 mg/ml, 50 mg/ml	Carve-out	
haloperidol lactate injection solution 5 mg/ml	Carve-out	
haloperidol lactate oral	Carve-out	
haloperidol oral	Carve-out	
<b>Calcitonin Gene-Related Peptide Antag.</b>		
AIMOVIG	P-PA	PA; 102 day supply allowed; QL; AL
AJOVY	P-PA	PA; 102 day supply allowed; QL; AL
EMGALITY	P-PA	PA; 102 day supply allowed; QL; AL
EMGALITY (300 MG DOSE)	P-PA	PA; 102 day supply allowed; QL; AL
NURTEC	P-PA	PA; 102 day supply allowed; QL; AL
QULIPTA	NP	PA; 102 day supply allowed; QL; AL
UBRELVY	NP	PA; QL; AL
ZAVZPRET	NP	PA; QL; AL
<b>Catechol-O-Methyltransferase(Comt)Inhib.</b>		

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
carbidopa-levodopa-entacapone oral tablet 12.5-50-200 mg, 18.75-75-200 mg, 25-100-200 mg, 31.25-125-200 mg, 37.5-150-200 mg, 50-200-200 mg	NP	PA; 102 day supply allowed
COMTAN	NP	PA; 102 day supply allowed
entacapone	P	102 day supply allowed
ONGENTYS	NP	PA; 102 day supply allowed
STALEVO 100	NP	PA; 102 day supply allowed
STALEVO 125	NP	PA; 102 day supply allowed
STALEVO 150	NP	PA; 102 day supply allowed
STALEVO 200	NP	PA; 102 day supply allowed
STALEVO 50	NP	PA; 102 day supply allowed
STALEVO 75	NP	PA; 102 day supply allowed
TASMAR ORAL TABLET 100 MG	NP	PA; 102 day supply allowed
tolcapone	NP	PA; 102 day supply allowed
<b>Central Nervous System Agents, Misc.</b>		
acamprosate calcium	Carve-out	
atomoxetine hcl	Carve-out	
DAYBUE	Carve-out	Specialty Drug
EXSERVAN	F	PA; AL
guanfacine hcl er	Carve-out	
guanfacine hcl oral	P	102 day supply allowed
INTUNIV	Carve-out	
memantine hcl er	NP	PA
memantine hcl oral	P	
NAMENDA ORAL TABLET	NP	PA
NAMENDA TITRATION PAK	NP	PA
NAMENDA XR	NP	PA
NAMENDA XR TITRATION PACK	NP	PA
NAMZARIC	NP	PA
NOURIANZ	NP	PA; 102 day supply allowed

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
QELBREE	Carve-out	
RELYVRIO	F	PA; QL; AL
riluzole	F	
sodium oxybate	F	PA; QL; AL
STRATTERA	Carve-out	
TENEX	P	102 day supply allowed
TIGLUTIK	F	PA; AL
XYWAV	F	PA; Specialty Drug; QL; AL
<b>Cyclooxygenase-2 (Cox-2) Inhibitors</b>		
CELEBREX	NP	PA; QL
celecoxib oral	P	QL
ELYXYB	NP	PA; QL; AL
SEGLENTIS	NP	PA; QL; AL
<b>Dopamine Precursors</b>		
carbidopa oral	NP	PA; 102 day supply allowed
carbidopa-levodopa er oral tablet extended release 25-100 mg, 50-200 mg	P	102 day supply allowed
carbidopa-levodopa oral tablet	P	102 day supply allowed
carbidopa-levodopa oral tablet dispersible	NP	PA; 102 day supply allowed
carbidopa-levodopa-entacapone oral tablet 12.5-50-200 mg, 18.75-75-200 mg, 25-100-200 mg, 31.25-125-200 mg, 37.5-150-200 mg, 50-200-200 mg	NP	PA; 102 day supply allowed
DHIVY ORAL TABLET 25-100 MG	NP	PA; 102 day supply allowed
DUOPA ENTERAL	NP	PA; 102 day supply allowed
INBRIJA	NP	PA; 102 day supply allowed
LODOSYN	NP	PA; 102 day supply allowed
RYTARY	NP	PA; 102 day supply allowed
SINEMET ORAL TABLET 10-100 MG, 25-100 MG	NP	PA; 102 day supply allowed
STALEVO 100	NP	PA; 102 day supply allowed

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
STALEVO 125	NP	PA; 102 day supply allowed
STALEVO 150	NP	PA; 102 day supply allowed
STALEVO 200	NP	PA; 102 day supply allowed
STALEVO 50	NP	PA; 102 day supply allowed
STALEVO 75	NP	PA; 102 day supply allowed
<b>Ergot-Deriv. Dopamine Receptor Agonists</b>		
bromocriptine mesylate oral	NP	PA; 102 day supply allowed
cabergoline	F	
PARLODEL	NP	PA; 102 day supply allowed
<b>Fibromyalgia Agents</b>		
CYMBALTA	Carve-out	
duloxetine hcl oral	Carve-out	
LYRICA	Carve-out	
pregabalin oral	Carve-out	
SAVELLA	P	QL
SAVELLA TITRATION PACK	P	QL
<b>General Anesthetics, Miscellaneous</b>		
ketamine hcl sublingual	Carve-out	
midazolam-ketamine-ondansetron sublingual	Carve-out	
mko melt dose pack sublingual	Carve-out	
<b>Hydantoins</b>		
CEREBYX	Carve-out	
DILANTIN	Carve-out	
DILANTIN INFATABS	Carve-out	
fosphenytoin sodium	Carve-out	
PEGANONE	Carve-out	
PHENYTEK	Carve-out	
PHENYTOIN INFATABS	Carve-out	
phenytoin oral	Carve-out	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
phenytoin sodium extended	Carve-out	
phenytoin sodium injection	Carve-out	
<b>Monoamine Oxidase B Inhibitors</b>		
AZILECT	NP	PA; 102 day supply allowed; AL
EMSAM	Carve-out	
rasagiline mesylate oral	P-PA	PA; 102 day supply allowed; AL
selegiline hcl oral	NP	PA; 102 day supply allowed
XADAGO	NP	PA; 102 day supply allowed
ZELAPAR	NP	PA
<b>Monoamine Oxidase Inhibitors</b>		
AZILECT	NP	PA; 102 day supply allowed; AL
EMSAM	Carve-out	
MARPLAN	Carve-out	
NARDIL	Carve-out	
PARNATE	Carve-out	
phenelzine sulfate oral	Carve-out	
rasagiline mesylate oral	P-PA	PA; 102 day supply allowed; AL
selegiline hcl oral	NP	PA; 102 day supply allowed
tranylcypromine sulfate	Carve-out	
XADAGO	NP	PA; 102 day supply allowed
ZELAPAR	NP	PA
<b>Nonergot-Deriv.Dopamine Receptor Agonist</b>		
MIRAPEX ER	NP	PA; 102 day supply allowed
MIRAPEX ORAL TABLET 0.75 MG	P	
NEUPRO	NP	PA; 102 day supply allowed; QL
pramipexole dihydrochloride	P	102 day supply allowed
pramipexole dihydrochloride er oral tablet extended release 24 hour 0.375 mg, 0.75 mg, 1.5 mg, 2.25 mg, 3 mg, 3.75 mg	NP	PA; 102 day supply allowed

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
ropinirole hcl	P	102 day supply allowed
ropinirole hcl er	NP	PA; 102 day supply allowed
<b>Opiate Agonists</b>		
acetaminophen-codeine oral solution	P	AL
acetaminophen-codeine oral tablet 300-15 mg, 300-30 mg, 300-60 mg	P	AL
ACTIQ	NP	PA; QL
apap-caff-dihydrocodeine oral capsule	NP	PA; AL
apap-caff-dihydrocodeine oral tablet 325-30-16 mg	NP	PA; AL
ASCOMP-CODEINE	NP	PA; AL
butalbital-apap-caff-cod	NP	PA; AL
butalbital-asa-caff-codeine	NP	PA; AL
codeine sulfate oral tablet	P	QL; AL
CONZIP	NP	PA; AL
DILAUDID ORAL	NP	PA; QL
ENDOCET ORAL TABLET 10-325 MG, 2.5-325 MG, 5-325 MG, 7.5-325 MG	P	
fentanyl citrate buccal	NP	PA; QL
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr	P	QL
fentanyl transdermal patch 72 hour 37.5 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr	NP	PA
FENTORA BUCCAL TABLET 100 MCG, 200 MCG, 400 MCG, 600 MCG, 800 MCG	NP	PA; QL
FIORICET/CODEINE ORAL CAPSULE 50-300-40-30 MG	NP	PA; AL
hydrocodone bitartrate er oral capsule extended release 12 hour	NP	PA
hydrocodone bitartrate er oral tablet er 24 hour abuse-deterrent	NP	PA

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
hydrocodone-acetaminophen oral solution 2.5-108 mg/5ml, 5-217 mg/10ml, 7.5-325 mg/15ml	P	
hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg, 5-300 mg, 5-325 mg, 7.5-300 mg, 7.5-325 mg	P	
hydrocodone-ibuprofen oral tablet 10-200 mg, 5-200 mg, 7.5-200 mg	NP	PA
hydromorphone hcl er oral tablet extended release 24 hour	NP	PA
hydromorphone hcl oral	P	QL
hydromorphone hcl rectal	NP	PA
HYSINGLA ER	NP	PA
levorphanol tartrate oral	NP	PA
LORTAB ORAL ELIXIR 10-300 MG/15ML	NP	PA
meperidine hcl oral solution	NP	PA; QL
meperidine hcl oral tablet 50 mg	NP	PA; QL
METHADONE HCL INTENSOL	NP	PA
methadone hcl oral	NP	PA
METHADOSE ORAL CONCENTRATE 10 MG/ML	NP	PA
METHADOSE ORAL TABLET SOLUBLE	NP	PA
METHADOSE SUGAR-FREE	NP	PA
morphine sulfate (concentrate) oral solution 10 mg/0.5ml	P	
morphine sulfate (concentrate) oral solution 20 mg/ml	P	QL
morphine sulfate er beads	NP	PA
morphine sulfate er oral capsule extended release 24 hour	NP	PA
morphine sulfate er oral tablet extended release	P	
morphine sulfate oral	P	QL
morphine sulfate rectal	P	

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
MS CONTIN ORAL TABLET EXTENDED RELEASE	NP	PA
NUCYNTA	NP	PA
NUCYNTA ER	NP	PA
oxycodone hcl er oral tablet er 12 hour abuse-deterrent	NP	PA; QL
oxycodone hcl oral capsule	NP	PA; QL
oxycodone hcl oral concentrate 10 mg/0.5ml, 100 mg/5ml	NP	PA; QL
oxycodone hcl oral solution	P	QL
oxycodone hcl oral tablet 10 mg, 15 mg, 5 mg	P	QL
oxycodone hcl oral tablet 20 mg, 30 mg	NP	PA; QL
oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	P	
OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT	NP	PA; QL
oxymorphone hcl	NP	PA; QL
oxymorphone hcl er	NP	PA
PERCOCET ORAL TABLET 10-325 MG, 2.5-325 MG, 5-325 MG, 7.5-325 MG	NP	PA
QDOLO	NP	PA; QL; AL
ROXICODONE ORAL TABLET	NP	PA; QL
ROXYBOND	NP	PA; QL
SEGLENTIS	NP	PA; QL; AL
tramadol hcl (er biphasic) oral capsule extended release 24 hour 100 mg, 200 mg, 300 mg	NP	PA; AL
tramadol hcl (er biphasic) oral tablet extended release 24 hour	P	AL
tramadol hcl er	P	AL
tramadol hcl oral solution	NP	PA; QL; AL
tramadol hcl oral tablet 100 mg, 50 mg	P	AL
tramadol-acetaminophen	P	AL

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ULTRACET	NP	PA; AL
ULTRAM	NP	PA; AL
XTAMPZA ER	NP	PA; QL
<b>Opiate Antagonists</b>		
BUNAVAIL	Carve-out	
buprenorphine hcl-naloxone hcl	Carve-out	
KLOXXADO	F	QL
naloxone hcl injection solution 0.4 mg/ml, 4 mg/10ml	F	QL
naloxone hcl injection solution cartridge	F	QL
naloxone hcl injection solution prefilled syringe	F	QL
naloxone hcl nasal	F	QL
naltrexone hcl oral	Carve-out	
NARCAN	F	QL
OPVEE	F	QL
pentazocine-naloxone hcl	NP	PA
RELISTOR ORAL	NP	PA
RELISTOR SUBCUTANEOUS SOLUTION 12 MG/0.6ML, 8 MG/0.4ML	NP	PA
SUBOXONE SUBLINGUAL FILM	Carve-out	
VIVITROL	Carve-out	
ZIMHI	F	QL
ZUBSOLV	Carve-out	
<b>Opiate Partial Agonists</b>		
BELBUCA	NP	PA; QL
BRIXADI	Carve-out	Specialty Drug
BRIXADI (WEEKLY)	Carve-out	Specialty Drug
BUNAVAIL	Carve-out	
buprenorphine hcl buccal	NP	PA; QL
buprenorphine hcl sublingual	Carve-out	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
buprenorphine hcl-naloxone hcl	Carve-out	
buprenorphine transdermal	NP	PA; QL
butorphanol tartrate nasal	NP	PA; QL
BUTRANS	P	QL
pentazocine-naloxone hcl	NP	PA
SUBLOCADE	Carve-out	
SUBOXONE SUBLINGUAL FILM	Carve-out	
ZUBSOLV	Carve-out	
<b>Orexin Receptor Antagonists</b>		
BELSOMRA	Carve-out	
DAYVIGO	Carve-out	
QUVIVIQ	Carve-out	
<b>Other Nonsteroidal Anti-Inflam. Agents</b>		
ADVIL DUAL ACTION	NP	PA; OTC
ADVIL JUNIOR STRENGTH	P	OTC
ADVIL MIGRAINE	P	OTC
ADVIL ORAL TABLET	P	OTC
all day pain relief	P	OTC
all day relief	P	OTC
ANAPROX DS	NP	PA
ARTHROTEC ORAL TABLET DELAYED RELEASE	NP	PA
childrens ibuprofen oral suspension 100 mg/5ml, 200 mg/10ml	P	OTC
cvs all day pain relief	P	OTC
cvs ibuprofen	P	OTC
cvs ibuprofen childrens oral suspension 100 mg/5ml	P	OTC
cvs naproxen sodium	P	OTC
DAYPRO	NP	PA
diclofenac	NP	PA

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
diclofenac epolamine external	NP	PA; QL
diclofenac potassium oral capsule	NP	PA
diclofenac potassium oral tablet	NP	PA
diclofenac sodium er	NP	PA
diclofenac sodium oral tablet delayed release 25 mg, 50 mg	P	
diclofenac sodium oral tablet delayed release 75 mg	Carve-out	
diclofenac-misoprostol oral tablet delayed release	NP	PA
diflunisal oral	NP	PA
DUEXIS	NP	PA
ec-naproxen	NP	PA
eq ibuprofen childrens	P	OTC
eq ibuprofen junior	P	OTC
eq ibuprofen oral tablet	P	OTC
eq1 childrens ibuprofen	P	OTC
eq1 ibuprofen	P	OTC
eq1 ibuprofen infants	P	OTC
eq1 ibuprofen junior strength	P	OTC
etodolac er	NP	PA
etodolac oral	NP	PA
FELDENE	NP	PA
fenoprofen calcium oral capsule 400 mg	NP	PA
fenoprofen calcium oral tablet	NP	PA
FLECTOR EXTERNAL	NP	PA; QL
flurbiprofen oral tablet 100 mg	NP	PA
gnp childrens ibuprofen	P	OTC
gnp ibuprofen childrens	P	OTC
gnp ibuprofen infants	P	OTC
gnp ibuprofen junior strength	P	OTC
gnp naproxen sodium oral tablet	P	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
goodsense ibuprofen	P	OTC
goodsense ibuprofen childrens oral suspension	P	OTC
goodsense ibuprofen infants	P	OTC
goodsense naproxen sodium	P	OTC
hm ibuprofen childrens	P	OTC
hm ibuprofen ib	P	OTC
hm ibuprofen infants	P	OTC
hm ibuprofen oral capsule	P	OTC
hm ibuprofen oral tablet	P	OTC
hm naproxen sodium	P	OTC
hydrocodone-ibuprofen oral tablet 10-200 mg, 5-200 mg, 7.5-200 mg	NP	PA
IBU	P	
ibu-200	P	OTC
ibuprofen infants	P	OTC
ibuprofen junior strength oral tablet chewable	P	OTC
ibuprofen oral capsule	P	OTC
ibuprofen oral suspension	P	
ibuprofen oral tablet 200 mg	P	OTC
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	P	
ibuprofen-famotidine	NP	PA
INDOCIN RECTAL	NP	PA
indomethacin er	NP	PA
indomethacin oral capsule 25 mg, 50 mg	P	
indomethacin oral suspension	NP	PA
INFANTS ADVIL	P	OTC
infants ibuprofen	P	OTC
ketoprofen er	NP	PA
ketoprofen oral capsule 50 mg, 75 mg	NP	PA
ketorolac tromethamine nasal	NP	PA; QL

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ketorolac tromethamine oral	P	QL
kls ibuprofen	P	OTC
LICART EXTERNAL	NP	PA; QL
LODINE	NP	PA
LOFENA	NP	PA
meclofenamate sodium oral	NP	PA
MEDI-FIRST IBUPROFEN	P	OTC
MEDIPROXEN	P	OTC
mefenamic acid oral	NP	PA
meijer ibuprofen	P	OTC
meloxicam oral capsule	NP	PA
meloxicam oral tablet	P	
MOTRIN IB ORAL CAPSULE	P	OTC
nabumetone oral	P	
NALFON ORAL CAPSULE 400 MG	NP	PA
NALFON ORAL TABLET	NP	PA
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 375 MG, 500 MG, 750 MG	NP	PA
NAPROSYN ORAL SUSPENSION	NP	PA
naproxen oral suspension	NP	PA
naproxen oral tablet	P	
naproxen oral tablet delayed release	NP	PA
naproxen sodium er	NP	PA
naproxen sodium oral capsule	P	OTC
naproxen sodium oral tablet 220 mg	P	OTC
naproxen sodium oral tablet 275 mg, 550 mg	NP	PA
naproxen-esomeprazole mg	NP	PA
oxaprozin oral tablet	NP	PA
piroxicam oral	NP	PA
px all day relief	P	OTC

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px childrens profen ib	P	OTC
px ibuprofen	P	OTC
px ibuprofen junior strength	P	OTC
px infants profen ib	P	OTC
qc childrens ibuprofen	P	OTC
qc ibuprofen ib	P	OTC
qc ibuprofen oral tablet	P	OTC
qc naproxen sodium oral tablet	P	OTC
ra ibuprofen childrens	P	OTC
ra ibuprofen infants	P	OTC
ra ibuprofen junior strength	P	OTC
ra ibuprofen oral tablet	P	OTC
ra pain relief ibuprofen	P	OTC
RELAFEN DS	NP	PA
RELAFEN ORAL TABLET 750 MG	P	
sb ibuprofen	P	OTC
sb naproxen sodium	P	OTC
sm childrens ibuprofen	P	OTC
sm ibuprofen	P	OTC
sm ibuprofen ib	P	OTC
sm ibuprofen ib childrens	P	OTC
sm ibuprofen jr	P	OTC
sm infants ibuprofen	P	OTC
sm naproxen sodium oral tablet	P	OTC
sulindac oral	P	
sumatriptan-naproxen sodium	NP	PA
tolmetin sodium oral capsule	NP	PA
tolmetin sodium oral tablet 600 mg	NP	PA
VIMOVO	NP	PA
WAL-PROFEN ORAL CAPSULE	P	OTC

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
<b>Phenothiazines</b>		
chlorpromazine hcl injection	Carve-out	
chlorpromazine hcl oral	Carve-out	
fluphenazine decanoate injection	Carve-out	
fluphenazine hcl injection	Carve-out	
fluphenazine hcl oral	Carve-out	
perphenazine oral	Carve-out	
perphenazine-amitriptyline	Carve-out	
prochlorperazine	F	QL
prochlorperazine maleate oral	F	QL
thioridazine hcl oral	Carve-out	
trifluoperazine hcl oral	Carve-out	
<b>Respiratory And Cns Stimulants</b>		
ADHANSIA XR	Carve-out	
ammonia aromatic	Carve-out	OTC
ammonia inhalants	Carve-out	OTC
apap-caff-dihydrocodeine oral capsule	NP	PA; AL
apap-caff-dihydrocodeine oral tablet 325-30-16 mg	NP	PA; AL
APTENSIO XR	Carve-out	
ASCOMP-CODEINE	NP	PA; AL
AZSTARYS	Carve-out	
BAC	F	QL; AL
butalbital-apap-caff-cod	NP	PA; AL
butalbital-apap-caffeine oral tablet 50-325-40 mg	F	QL; AL
butalbital-asa-caff-codeine	NP	PA; AL
butalbital-aspirin-caffeine oral capsule	F	AL
caffeine citrate oral solution 60 mg/3ml	F	AL
CONCERTA	Carve-out	
COTEMPLA XR-ODT	Carve-out	

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
DAYTRANA	Carve-out	
dexmethylphenidate hcl	Carve-out	
dexmethylphenidate hcl er	Carve-out	
DOPRAM	Carve-out	
ESGIC ORAL TABLET	F	QL; AL
FIORICET/CODEINE ORAL CAPSULE 50-300-40-30 MG	NP	PA; AL
FOCALIN	Carve-out	
FOCALIN XR	Carve-out	
JORNAY PM	Carve-out	
METADATE CD	Carve-out	
METHYLIN ORAL SOLUTION	Carve-out	
methylphenidate	Carve-out	
methylphenidate hcl er	Carve-out	
methylphenidate hcl er (cd)	Carve-out	
methylphenidate hcl er (la)	Carve-out	
methylphenidate hcl er (osm)	Carve-out	
methylphenidate hcl er (xr)	Carve-out	
methylphenidate hcl oral	Carve-out	
NORGESIC	NP	PA
norgesic forte	NP	PA
orphenadrine-aspirin-caffeine oral tablet 25-385-30 mg	NP	PA
qc aromatic ammonia	Carve-out	OTC
QUILLICHEW ER	Carve-out	
QUILLIVANT XR ORAL SUSPENSION RECONSTITUTED ER	Carve-out	
RELEXXII	Carve-out	
RITALIN	Carve-out	

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 20 MG, 30 MG, 40 MG	Carve-out	
theophylline er oral tablet extended release 12 hour 300 mg, 450 mg	F	
theophylline er oral tablet extended release 24 hour 400 mg	F	
theophylline oral	F	
<b>Salicylates</b>		
adult aspirin regimen	F	OTC; QL
ASCOMP-CODEINE	NP	PA; AL
aspirin 81	F	OTC; QL
aspirin adult low dose	F	OTC; QL
aspirin adult low strength oral tablet delayed release	F	OTC; QL
aspirin buf(cacarb-mgcarb-mgo)	F	OTC; AL
aspirin childrens	F	OTC; QL
aspirin ec low dose	F	OTC; QL
aspirin ec low strength	F	OTC; QL
aspirin low dose oral tablet chewable	F	OTC; QL
aspirin low dose oral tablet delayed release	F	OTC; QL
aspirin low strength	F	OTC; QL
aspirin oral tablet 325 mg	F	OTC; QL; AL
aspirin oral tablet chewable	F	OTC; QL
aspirin oral tablet delayed release 325 mg	F	OTC; QL; AL
aspirin oral tablet delayed release 81 mg	F	OTC; QL
aspirin rectal suppository 300 mg, 600 mg	F	OTC
aspirin regimen	F	OTC; QL
aspirin-dipyridamole er	NP	PA; 102 day supply allowed
BAYER ASPIRIN EC LOW DOSE	F	OTC; QL
BAYER ASPIRIN ORAL TABLET	F	OTC; QL; AL

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
BAYER ASPIRIN ORAL TABLET DELAYED RELEASE	F	OTC; QL; AL
BAYER LOW DOSE	F	OTC; QL
BUFFERIN	F	OTC; AL
butalbital-asa-caff-codeine	NP	PA; AL
butalbital-aspirin-caffeine oral capsule	F	AL
childrens aspirin	F	OTC; QL
cvs aspirin adult low dose	F	OTC; QL
cvs aspirin ec oral tablet delayed release 81 mg	F	OTC; QL
cvs aspirin low dose	F	OTC; QL
cvs aspirin low strength oral tablet delayed release	F	OTC; QL
cvs aspirin oral tablet 325 mg	F	OTC; QL; AL
cvs genuine aspirin	F	OTC; QL; AL
ECOTRIN LOW STRENGTH	F	OTC; QL
eq aspirin adult low dose	F	OTC; QL
eq aspirin low dose oral tablet chewable	F	OTC; QL
eq aspirin oral tablet	F	OTC; QL; AL
eq aspirin low dose	F	OTC; QL
gnp aspirin low dose	F	OTC; QL
goodsense aspirin adult low st	F	OTC; QL
goodsense aspirin adults	F	OTC; QL; AL
goodsense aspirin oral tablet	F	OTC; QL; AL
goodsense aspirin oral tablet chewable	F	OTC; QL
goodsense aspirin oral tablet delayed release	F	OTC; QL; AL
hm adult aspirin	F	OTC; QL; AL
hm aspirin ec	F	OTC; QL; AL
hm aspirin ec low dose	F	OTC; QL
hm aspirin oral tablet	F	OTC; QL; AL
hm aspirin oral tablet chewable	F	OTC; QL
hm aspirin oral tablet delayed release	F	OTC; QL; AL

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
kp aspirin	F	OTC; QL
MEDI-FIRST ASPIRIN	F	OTC; QL; AL
MEDIQUE ASPIRIN	F	OTC; QL; AL
NORGESIC	NP	PA
norgesic forte	NP	PA
orphenadrine-aspirin-caffeine oral tablet 25-385-30 mg	NP	PA
px aspirin oral tablet	F	OTC; QL; AL
px aspirin oral tablet chewable	F	OTC; QL
qc aspirin	F	OTC; QL; AL
qc aspirin low dose	F	OTC; QL
qc enteric aspirin	F	OTC; QL; AL
ra aspirin adult low dose	F	OTC; QL
ra aspirin adult low strength oral tablet chewable	F	OTC; QL
ra aspirin childrens	F	OTC; QL
ra aspirin ec oral tablet delayed release 325 mg	F	OTC; QL; AL
ra aspirin ec oral tablet delayed release 81 mg	F	OTC; QL
ra aspirin oral tablet 325 mg	F	OTC; QL; AL
sb aspirin adult low strength	F	OTC; QL
sb aspirin oral tablet	F	OTC; QL; AL
sb childrens aspirin	F	OTC; QL
sb low dose asa ec	F	OTC; QL
sm aspirin	F	OTC; QL; AL
sm aspirin adult low strength	F	OTC; QL
sm aspirin low dose	F	OTC; QL
sm childrens aspirin	F	OTC; QL
ST JOSEPH LOW DOSE	F	OTC; QL
tri-buffered aspirin oral tablet 325 mg	F	OTC; AL
<b>Sel.Serotonin,Norepi Reuptake Inhibitor</b>		

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
CYMBALTA	Carve-out	
desvenlafaxine er	Carve-out	
desvenlafaxine succinate er	Carve-out	
DRIZALMA SPRINKLE	Carve-out	
duloxetine hcl oral	Carve-out	
DULOXICAININE	Carve-out	
EFFEXOR XR	Carve-out	
FETZIMA	Carve-out	
FETZIMA TITRATION	Carve-out	
KHEDEZLA	Carve-out	
PRISTIQ	Carve-out	
SAVELLA	P	QL
SAVELLA TITRATION PACK	P	QL
venlafaxine besylate er	Carve-out	
venlafaxine hcl	Carve-out	
venlafaxine hcl er	Carve-out	
<b>Selective Serotonin Agonists</b>		
almotriptan malate	NP	PA; QL
AMERGE	NP	PA; QL
eletriptan hydrobromide	NP	PA; QL
FROVA	NP	PA; QL
frovatriptan succinate	NP	PA; QL
IMITREX NASAL	P	QL
IMITREX ORAL	NP	PA; QL
IMITREX STATDOSE REFILL SUBCUTANEOUS SOLUTION CARTRIDGE	NP	PA; QL
IMITREX STATDOSE SYSTEM SUBCUTANEOUS SOLUTION AUTO- INJECTOR	NP	PA; QL
IMITREX SUBCUTANEOUS	NP	PA; QL
MAXALT ORAL TABLET 10 MG	NP	PA; QL

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
MAXALT-MLT ORAL TABLET DISPERSIBLE 10 MG	NP	PA; QL
naratriptan hcl	NP	PA; QL
RELPAX	NP	PA; QL
REYVOW	NP	PA; QL; AL
rizatriptan benzoate oral tablet	P	QL
rizatriptan benzoate oral tablet dispersible 10 mg	P	
sumatriptan nasal	NP	PA; QL
sumatriptan succinate oral	P	QL
sumatriptan succinate refill subcutaneous solution cartridge	P	QL
sumatriptan succinate subcutaneous solution 6 mg/0.5ml	P	QL
sumatriptan succinate subcutaneous solution auto-injector 4 mg/0.5ml, 6 mg/0.5ml	P	QL
sumatriptan-naproxen sodium	NP	PA
TOSYMRA	NP	PA; QL
ZEMBRACE SYMTOUCH	NP	PA
zolmitriptan nasal	NP	PA
zolmitriptan oral	NP	PA; QL
ZOMIG NASAL	NP	PA
ZOMIG ORAL	NP	PA; QL
<b>Selective-Serotonin Reuptake Inhibitors</b>		
BRISDELLE	Carve-out	
CELEXA ORAL TABLET	Carve-out	
citalopram hydrobromide	Carve-out	
escitalopram oxalate oral	Carve-out	
fluoxetine hcl (pmdd) oral tablet	Carve-out	
fluoxetine hcl oral	Carve-out	
fluvoxamine maleate	Carve-out	
fluvoxamine maleate er	Carve-out	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
LEXAPRO ORAL TABLET	Carve-out	
olanzapine-fluoxetine hcl	Carve-out	
paroxetine hcl	Carve-out	
paroxetine hcl er	Carve-out	
paroxetine mesylate	Carve-out	
PAXIL	Carve-out	
PAXIL CR	Carve-out	
PEXEVA	Carve-out	
PROZAC ORAL CAPSULE	Carve-out	
SARAFEM ORAL TABLET 10 MG, 20 MG	Carve-out	
sertraline hcl oral	Carve-out	
SYMBYAX ORAL CAPSULE 12-50 MG, 3-25 MG, 6-25 MG, 6-50 MG	Carve-out	
ZOLOFT	Carve-out	
<b>Serotonin Modulators</b>		
nefazodone hcl	Carve-out	
trazodone hcl oral	Carve-out	
TRINTELLIX	Carve-out	
VIIBRYD ORAL TABLET	Carve-out	
VIIBRYD STARTER PACK	Carve-out	
vilazodone hcl	Carve-out	
<b>Succinimides</b>		
CELONTIN	Carve-out	
ethosuximide oral	Carve-out	
methsuximide	Carve-out	
ZARONTIN	Carve-out	
<b>Thioxanthenes</b>		
thiothixene oral	Carve-out	
<b>Tricyclics, Other Norepi-Ru Inhibitors</b>		
amitriptyline hcl oral	Carve-out	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
amoxapine	Carve-out	
ANAFRANIL	Carve-out	
chlordiazepoxide-amitriptyline	Carve-out	
clomipramine hcl oral	Carve-out	
desipramine hcl oral	Carve-out	
doxepin hcl oral	Carve-out	
imipramine hcl oral	Carve-out	
imipramine pamoate	Carve-out	
maprotiline hcl	Carve-out	
NORPRAMIN ORAL TABLET 10 MG, 25 MG	Carve-out	
nortriptyline hcl oral	Carve-out	
PAMELOR ORAL CAPSULE	Carve-out	
perphenazine-amitriptyline	Carve-out	
protriptyline hcl	Carve-out	
SILENOR	Carve-out	
SURMONTIL	Carve-out	
TOFRANIL	Carve-out	
trimipramine maleate oral	Carve-out	
<b>Vesicular Monoamine Transport2 Inhibitor</b>		
AUSTEDO	F	PA; Specialty Drug; AL
AUSTEDO XR	F	PA; Specialty Drug; AL
INGREZZA	F	PA; Specialty Drug; AL
<b>Wakefulness-Promoting Agents</b>		
armodafinil	Carve-out	
diclofenac sodium oral tablet delayed release 75 mg	Carve-out	
modafinil oral	Carve-out	
NUVIGIL	Carve-out	
PROVIGIL	Carve-out	

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
SUNOSI	Carve-out	
WAKIX	Carve-out	
<b>Devices</b>		
<b>Devices</b>		
ACCU-CHEK AVIVA IN VITRO SOLUTION	F	OTC
ACCU-CHEK FASTCLIX LANCETS	F	OTC; QL
ACCU-CHEK GUIDE	F	OTC; QL
ACCU-CHEK GUIDE CONTROL	F	OTC
ACCU-CHEK GUIDE ME	F	OTC; QL
ACCU-CHEK SMARTVIEW CONTROL	F	OTC
ACCU-CHEK SOFTCLIX LANCET DEV KIT	F	OTC; QL
ACCU-CHEK SOFTCLIX LANCETS	F	OTC; QL
ACE AEROSOL CLOUD ENHANCER	F	QL
adult mask large	F	QL
AEROCHAMBER MINI CHAMBER	F	QL
AEROCHAMBER MV	F	QL
AEROCHAMBER PLUS FLO-VU	F	QL
AEROCHAMBER PLUS FLO-VU LARGE	F	QL
AEROCHAMBER PLUS FLO-VU MEDIUM	F	QL
AEROCHAMBER PLUS FLO-VU SMALL	F	QL
AEROCHAMBER PLUS FLO-VU W/MASK	F	QL
AEROCHAMBER PLUS FLOW VU	F	QL
AEROCHAMBER W/FLOWSIGNAL	F	QL
AEROCHAMBER Z-STAT PLUS	F	QL
AEROCHAMBER Z-STAT PLUS CHAMBR	F	QL
AEROCHAMBER Z-STAT PLUS/LARGE	F	QL
AEROCHAMBER Z-STAT PLUS/MEDIUM	F	QL
AEROCHAMBER Z-STAT PLUS/SMALL	F	QL
AEROTRACH PLUS	F	QL
AEROVENT PLUS	F	QL

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
AIRZONE PEAK FLOW METER	F	OTC; QL
alcohol prep	F	OTC; QL
alcohol swabs	F	OTC; QL
BD AUTOSHIELD DUO	F	OTC; QL
BD INSULIN SYRINGE U/F	F	OTC; QL
BD INSULIN SYRINGE U/F 1/2UNIT	F	OTC; QL
BD INSULIN SYRINGE U-500	F	QL
BD PEN NEEDLE MICRO U/F	F	OTC; QL
BD PEN NEEDLE MINI U/F	F	OTC; QL
BD PEN NEEDLE NANO 2ND GEN	F	OTC; QL
BD PEN NEEDLE NANO U/F	F	QL
BD PEN NEEDLE ORIGINAL U/F	F	OTC; QL
BD PEN NEEDLE SHORT U/F	F	OTC; QL
BD SWAB SINGLE USE REGULAR	F	OTC; QL
BD VEO INSULIN SYR U/F 1/2UNIT	F	OTC; QL
BD VEO INSULIN SYRINGE U/F	F	OTC; QL
blood pressure monitor	F	OTC; QL
blood pressure monitor device	F	OTC
blood pressure monitor/arm	F	OTC
BREATHERITE VALVED MDI CHAMBER	F	QL
CLEVER CHOICE BP MONITOR/ARM	F	OTC
CLEVER CHOICE HOLDING CHAMBER	F	QL
COMPACT SPACE CHAMBER	F	QL
COMPACT SPACE CHAMBER/LG MASK	F	QL
COMPACT SPACE CHAMBER/MED MASK	F	QL
COMPACT SPACE CHAMBER/SM MASK	F	QL
cvs alcohol prep pads	F	OTC; QL
cvs blood pressure monitor	F	OTC
cvs prep	F	OTC; QL
DEXCOM G6 RECEIVER	F	ST; QL

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
DEXCOM G6 SENSOR	F	ST; QL
DEXCOM G6 TRANSMITTER	F	ST; QL
DEXCOM G7 RECEIVER	F	ST; QL
DEXCOM G7 SENSOR	F	ST; QL
DIASCREEN 1K	F	OTC; QL
EASIVENT	F	QL
EASIVENT MASK LARGE	F	QL
EASIVENT MASK MEDIUM	F	QL
EASIVENT MASK SMALL	F	QL
EASY TOUCH ALCOHOL PREP MEDIUM	F	OTC; QL
eq space chamber anti-static	F	QL
eq space chamber anti-static l	F	QL
eq space chamber anti-static m	F	QL
eq space chamber anti-static s	F	QL
EVERSENSE SENSOR/HOLDER	F	PA; QL
EVERSENSE SMART TRANSMITTER	F	PA; QL
FLEXICHAMBER ADULT MASK/SMALL	F	QL
FLEXICHAMBER CHILD MASK/LARGE	F	QL
FLEXICHAMBER CHILD MASK/SMALL	F	QL
FORA P20 BP MONITOR SYSTEM	F	OTC
FREESTYLE LIBRE 14 DAY READER	F	ST; QL
FREESTYLE LIBRE 14 DAY SENSOR	F	ST; QL
FREESTYLE LIBRE 2 READER	F	ST; QL
FREESTYLE LIBRE 2 SENSOR	F	ST; QL
FREESTYLE LIBRE 3 SENSOR	F	ST; QL
FREESTYLE LIBRE READER	F	ST; QL
GABAPAL COMBINATION THERAPY PACK 100 & 3.88 MG & %	Carve-out	
gnp alcohol swabs pad 70 %	F	OTC; QL
health sense bp monitor	F	OTC

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
H-E-B INCONTROL BP MONITOR	F	OTC; QL
hm blood pressure monitor	F	OTC
hm sterile alcohol prep	F	OTC; QL
IN-CHECK INSPIRATORY FLOW MTR	F	QL
INSPIRACHAMBER/LARGE	F	QL
INSPIRACHAMBER/MEDIUM	F	QL
INSPIRACHAMBER/MOUTHPIECE	F	QL
INSPIRACHAMBER/SMALL	F	QL
groger blood pressure monitor	F	OTC
LIDOTIN	Carve-out	
LITETOUCH MASK LARGE	F	QL
LITETOUCH MASK MEDIUM	F	QL
LITETOUCH MASK SMALL	F	QL
MASK VORTEX/CHILD/FROG	F	OTC; QL
MASK VORTEX/TODDLER/LADYBUG	F	OTC; QL
MICROCHAMBER	F	QL
microlife bp monitor	F	OTC
microlife deluxe bp monitor device	F	OTC
MICROLIFE DIGITAL PEAK FLOW	F	OTC; QL
MICROSPACER	F	QL
MINI WRIGHT PEAK FLOW METER	F	OTC; QL
one-way valved expiratory	F	OTC; QL
one-way valved inspiratory	F	OTC; QL
OPTICHAMBER DIAMOND	F	QL
OPTICHAMBER DIAMOND-LG MASK	F	QL
OPTICHAMBER DIAMOND-MD MASK	F	QL
OPTICHAMBER DIAMOND-SM MASK	F	QL
PANDA MASK LARGE	F	OTC; QL
PANDA MASK MEDIUM	F	OTC; QL
PANDA MASK SMALL	F	OTC; QL

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
PARI VORTEX ADULT MASK	F	OTC; QL
PEAK AIR PEAK FLOW METER	F	OTC; QL
pediatric medium mask	F	OTC; QL
pediatric mouthpiece	F	OTC; QL
PEDIATRIC PANDA MASK	F	OTC; QL
pediatric small mask	F	OTC; QL
PERSONAL BEST FULL RANGE	F	OTC; QL
PIKO 1	F	OTC; QL
POCKET CHAMBER	F	QL
POCKET PEAK FLOW METER	F	OTC; QL
pro comfort spacer adult	F	OTC; QL
pro comfort spacer child	F	OTC; QL
PRO HEALTH MINI TALKING MONITR	F	OTC
procare spacer/adult mask	F	OTC; QL
procare spacer/child mask	F	OTC; QL
qc blood pressure monitor	F	OTC
ra alcohol swabs	F	OTC; QL
ra blood pressure cuff monitor	F	OTC
RITEFLO	F	QL
self-taking blood pressure kit	F	OTC; QL
SIDESTREAM PEDIATRIC FACE MASK	F	QL
silicone mask/infant	F	QL
silicone mask/pediatric	F	QL
sm alcohol prep	F	OTC; QL
sm blood pressure monitor	F	OTC
SURELIFE BP MONITOR/ARM	F	OTC; QL
SURELIFE BP MONITOR/WRIST	F	OTC; QL
talking sense bp monitor	F	OTC
triadime-80	NP	PA
triheal-80	NP	PA

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
TRIVIX	NP	PA
TRUZONE PEAK FLOW METER	F	QL
ULTICARE ALCOHOL SWABS	F	OTC; QL
VORTEX HOLD CHMBR/MASK/CHILD	F	QL
VORTEX HOLD CHMBR/MASK/TODDLER	F	QL
VORTEX VALVED HOLDING CHAMBER	F	QL
<b>Diagnostic Agents</b>		
<b>Adrenocortical Insufficiency</b>		
ACTHAR	Carve-out	
CORTROPHIN	Carve-out	
CORTROSYN	Carve-out	
cosyntropin injection	Carve-out	
<b>Cardiac Function</b>		
dipyridamole oral	NP	PA; 102 day supply allowed
<b>Diabetes Mellitus</b>		
ACCU-CHEK AVIVA PLUS IN VITRO	F	OTC; QL
ACCU-CHEK GUIDE IN VITRO	F	OTC; QL
ACCU-CHEK SMARTVIEW	F	OTC; QL
<b>Diagnostic Agents</b>		
advin covid-19 antigen test	F	OTC; QL
BD VERITOR HOME COVID-19 TEST	F	OTC; QL
BINAXNOW COVID-19 AG HOME TEST	F	OTC; QL
CARESTART COVID-19 HOME TEST	F	OTC; QL
CLINITEST RAPID COVID-19 TEST	F	OTC; QL
covid-19 at home antigen test	F	OTC
covid-19 at-home test	F	OTC; QL
CUE COVID-19 TEST	F	OTC; QL
DIATRUST COVID-19 HOME TEST	F	OTC; QL
ellume covid-19 home test	F	OTC; QL

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EVERLYWELL COVID-19 HOME TEST	F	OTC; QL
fastep covid-19 antigen test	F	OTC
FLOWFLEX COVID-19 AG HOME TEST	F	OTC; QL
GENABIO COVID-19 RAPID TEST	F	OTC
GOTOKNOW COVID-19 ANTIGEN RAPI	F	OTC; QL
IHEALTH COVID-19 RAPID TEST	F	OTC; QL
INDICAID COVID-19 RAPID TEST	F	OTC; QL
INTELISWAB COVID-19 RAPID TEST	F	OTC; QL
LUCIRA CHECK IT COVID-19 TEST	F	OTC; QL
ON/GO COVID-19 ANTIGEN TEST	F	OTC; QL
ON/GO ONE COVID-19 HOME TEST	F	OTC; QL
PILOT COVID-19 AT-HOME TEST	F	OTC; QL
PIXEL COVID-19 PCR HOME TEST	F	OTC; QL
QUICKVUE AT-HOME COVID-19 TEST	F	OTC; QL
SPEEDY SWAB COVID-19 ANTIGEN	F	OTC; QL
<b>Ketones</b>		
CHEMSTRIP K	F	OTC; QL
ketone test	F	OTC; QL
KETOSTIX	F	OTC; QL
RELION KETONE TEST	F	OTC; QL
<b>Pituitary Function</b>		
ACTHREL	Carve-out	
<b>Urine And Feces Contents</b>		
CVS KETONE CARE	F	OTC; QL
<b>Electrolytic, Caloric, And Water Balance</b>		
<b>Acidifying Agents</b>		
K-PHOS NO 2	F	
<b>Alkalinizing Agents</b>		

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potassium citrate er	F	
potassium citrate-citric acid oral solution	F	
sod citrate-citric acid oral solution 500-334 mg/5ml	F	
<b>Ammonia Detoxicants</b>		
AMMONUL	Carve-out	
BUPHENYL ORAL POWDER 3 GM/TSP	Carve-out	
BUPHENYL ORAL TABLET	Carve-out	
CARBAGLU ORAL TABLET SOLUBLE	Carve-out	
carglumic acid oral tablet soluble	Carve-out	
constulose	F	
enulose	Carve-out	
generlac	Carve-out	
lactulose encephalopathy	Carve-out	
lactulose oral solution 10 gm/15ml	F	
LITHOSTAT	Carve-out	
OLPRUVA (2 GM DOSE)	Carve-out	
OLPRUVA (3 GM DOSE)	Carve-out	
OLPRUVA (4 GM DOSE)	Carve-out	
OLPRUVA (5 GM DOSE)	Carve-out	
OLPRUVA (6 GM DOSE)	Carve-out	
OLPRUVA (6.67 GM DOSE)	Carve-out	
PHEBURANE	Carve-out	Specialty Drug
RAVICTI	Carve-out	
sod benz-sod phenylacet	Carve-out	
sodium phenylbutyrate oral powder 3 gm/tsp	Carve-out	
sodium phenylbutyrate oral tablet	Carve-out	
<b>Caloric Agents</b>		
CULTURELLE IBS COMPLETE	Carve-out	OTC
<b>Carbonic Anhydrase Inhibitors</b>		

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
acetazolamide er	F	QL
acetazolamide oral	F	QL
<b>Diuretics, Miscellaneous</b>		
theophylline er oral tablet extended release 12 hour 300 mg, 450 mg	F	
theophylline er oral tablet extended release 24 hour 400 mg	F	
theophylline oral	F	
<b>Loop Diuretics</b>		
furosemide oral solution 10 mg/ml, 8 mg/ml	F	AL
furosemide oral tablet	F	
torseamide oral	F	
<b>Phosphate-Removing Agents</b>		
AURYXIA	NP	PA; 102 day supply allowed
calcium acetate (phos binder)	P-PA	PA; 102 day supply allowed
calcium acetate oral tablet 667 mg	P-PA	PA
FOSRENOL ORAL PACKET	NP	PA; 102 day supply allowed
FOSRENOL ORAL TABLET CHEWABLE 1000 MG, 500 MG, 750 MG	NP	PA; 102 day supply allowed
lanthanum carbonate	NP	PA; 102 day supply allowed
RENVELA	NP	PA; 102 day supply allowed
sevelamer carbonate oral packet	NP	PA; 102 day supply allowed
sevelamer carbonate oral tablet	P-PA	PA; 102 day supply allowed
sevelamer hcl	NP	PA; 102 day supply allowed
VELPHORO	NP	PA; 102 day supply allowed
<b>Potassium-Removing Agents</b>		
sodium polystyrene sulfonate oral powder	F	
<b>Potassium-Sparing Diuretics</b>		
amiloride hcl oral	F	
amiloride-hydrochlorothiazide	F	

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spironolactone oral tablet	F	
triamterene-hctz oral capsule 37.5-25 mg	F	
triamterene-hctz oral tablet	F	
<b>Replacement Preparations</b>		
600+d3	F	OTC
a thru z advanced	F	OTC
a thru z select 50+ advanced	F	OTC
a thru z select 50+ mens	F	OTC
a thru z select advanced	F	OTC
a thru z select oral tablet	F	OTC
ADVANTAGE CARE ELECTROLYTE PED	F	OTC
AQUADEKS ORAL SOLUTION	F	OTC
BACMIN	F	
BEELITH	F	OTC
CALCITRATE ORAL TABLET 315-6.25 MG-MCG	F	OTC
calcium + vitamin d3 oral tablet 600-10 mg-mcg, 600-5 mg-mcg	F	OTC
calcium 500 + d oral tablet 500-5 mg-mcg	F	OTC
calcium 500 + d3 oral tablet 500-15 mg-mcg	F	OTC
calcium 500+d high potency oral tablet 500-10 mg-mcg	F	OTC
calcium 500+d oral tablet 500-10 mg-mcg, 500-5 mg-mcg	F	OTC
calcium 500+d3 oral tablet 500-10 mg-mcg, 500-5 mg-mcg	F	OTC
calcium 600	F	OTC
calcium 600 + d oral tablet 600-5 mg-mcg	F	OTC
calcium 600 +d high potency oral tablet 600-10 mg-mcg	F	OTC
calcium 600 high potency	F	OTC

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calcium 600/vitamin d oral tablet 600-10 mg-mcg	F	OTC
calcium 600/vitamin d3 oral tablet 600-20 mg-mcg	F	OTC
calcium 600+d high potency oral tablet 600-10 mg-mcg	F	OTC
calcium 600+d oral tablet 600-20 mg-mcg, 600-5 mg-mcg	F	OTC
calcium 600+d3 oral tablet 600-10 mg-mcg, 600-20 mg-mcg, 600-5 mg-mcg	F	OTC
calcium acetate (phos binder)	P-PA	PA; 102 day supply allowed
calcium acetate oral tablet 667 mg	P-PA	PA
calcium carb-cholecalciferol oral tablet 500-10 mg-mcg, 500-5 mg-mcg, 600-10 mg-mcg, 600-20 mg-mcg, 600-400 mg-unit	F	OTC
calcium carbonate oral tablet 1500 (600 ca) mg	F	OTC
calcium carbonate-vitamin d oral tablet 600-5 mg-mcg	F	OTC
calcium citrate oral tablet 250 mg, 950 (200 ca) mg	F	OTC
calcium citrate+d3	F	OTC
calcium citrate-vitamin d oral tablet 315-6.25 mg-mcg	F	OTC
calcium citrate-vitamin d3 oral tablet 315-6.25 mg-mcg	F	OTC
calcium gluconate intravenous solution	F	
calcium high potency oral tablet 1500 (600 ca) mg	F	OTC
calcium high potency/vitamin d oral tablet 600-5 mg-mcg	F	OTC
calcium plus vitamin d oral tablet	F	OTC
calcium plus vitamin d3 oral tablet 600-20 mg-mcg	F	OTC

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
calcium+d3 oral tablet 500-10 mg-mcg, 500-15 mg-mcg, 600-20 mg-mcg	F	OTC
calcium-vitamin d3 oral tablet 250-3.125 mg-mcg	F	OTC
CALTRATE 600+D3 ORAL TABLET 600-20 MG-MCG	F	OTC
CENTRUM ADULTS ORAL TABLET	F	OTC
CENTRUM SILVER 50+MEN	F	OTC
CENTRUM SILVER 50+WOMEN	F	OTC
CENTRUM SILVER ADULT 50+	F	OTC
CENTRUM SILVER ORAL TABLET	F	OTC
CENTRUM ULTRA WOMENS	F	OTC
CENTRUM WOMEN	F	OTC
CEROVITE SENIOR	F	OTC
CERTAVITE SENIOR	F	OTC
CERTAVITE SENIOR/ANTIOXIDANT	F	OTC
CERTAVITE/ANTIOXIDANTS ORAL TABLET	F	OTC
CITRACAL MAXIMUM	F	OTC
cvs calcium + d3 oral tablet	F	OTC
cvs calcium 600 & vitamin d3 oral tablet 600-20 mg-mcg	F	OTC
cvs calcium 600+d oral tablet 600-20 mg-mcg	F	OTC
cvs calcium oral tablet 600 mg	F	OTC
cvs magnesium oral tablet 500 mg	F	OTC
cvs one daily essential	F	OTC
cvs ped electrolyte freeze pop	F	OTC
cvs spectravite adult 50+ oral tablet	F	OTC
cvs spectravite adults	F	OTC
cvs spectravite advanced oral tablet	F	OTC
cvs spectravite men 50+	F	OTC
cvs spectravite ultra men 50+	F	OTC

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
cvs spectravite ultra mens	F	OTC
cvs spectravite ultra women	F	OTC
cvs spectravite women 50+	F	OTC
cvs spectravite women oral tablet	F	OTC
cvs spectravite womens senior	F	OTC
DEKAS PLUS	F	OTC
dexmedetomidine hcl in nacl intravenous solution 200 mcg/50ml, 200-0.9 mcg/50ml-%, 400 mcg/100ml, 80 mcg/20ml	Carve-out	
dexmedetomidine hcl in nacl intravenous solution prefilled syringe 20-0.9 mcg/5ml-%	Carve-out	
dexmedetomidine hcl-dextrose	Carve-out	
DIALYVITE 3000	F	
DIALYVITE 5000	F	
dialyvite 800/ultra d	F	OTC
DIALYVITE 800/ZINC	F	OTC
DIALYVITE 800-ZINC 15 ORAL TABLET 0.8 MG	F	OTC
DIALYVITE SUPREME D ORAL TABLET	F	
DIALYVITE/ZINC	F	
EFFER-K ORAL TABLET EFFERVESCENT 25 MEQ	F	
ENFAMIL ENFALYTE	F	OTC
eq calcium 500+d oral tablet 500-5 mg-mcg	F	OTC
eq calcium 600+d oral tablet 600-20 mg-mcg	F	OTC
eq calcium citrate+d	F	OTC
eq complete multivit adult 50+	F	OTC
eq complete multivitamin-adult	F	OTC
eql calcium/vitamin d oral tablet 600-10 mg-mcg	F	OTC
eql calcium/vitamin d3 oral tablet 600-20 mg-mcg	F	OTC
ESSENTIA	F	OTC

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glucosamine chondr 1500 complx	Carve-out	OTC
GLYCOPHOS	F	
gnp calcium 500 +d3 oral tablet 500-15 mg-mcg	F	OTC
gnp calcium 600 +d3 oral tablet 600-20 mg-mcg	F	OTC
gnp century adults 50+ senior	F	OTC
gnp century ultimate mens	F	OTC
gnp electrolyte solution	F	OTC
gnp mega multi for men	F	OTC
gnp mega multi for women	F	OTC
gnp one daily mens health 50+	F	OTC
gnp one daily mens/lycopene	F	OTC
gnp therapeutic-m	F	OTC
h-e-b oral electrolyte	F	OTC
high pot multivitamin/beta-car	F	OTC
high potency multivit/fa	F	OTC
hm complete women	F	OTC
hm pediatric electrolyte	F	OTC
HYDRALYTE ORAL SOLUTION	F	OTC
ICAPS MV	F	OTC
KINDERLYTE ORAL SOLUTION	F	OTC
KINDERLYTE PREMAX ORAL SOLUTION	F	OTC
KLOR-CON M10	F	
KLOR-CON M20	F	
KLOR-CON/EF	F	
kp adults 50+ daily formula	F	OTC
kp calcium 600+d oral tablet 600-20 mg-mcg	F	OTC
K-PHOS	F	
levetiracetam in nacl	Carve-out	
magnesium chloride injection	F	
magnesium oral tablet 200 mg	F	OTC

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
magnesium oxide -mg supplement oral tablet 500 mg	F	OTC
MAGNESIUM-OXIDE ORAL TABLET 400 (240 MG) MG	F	OTC
MEGA MULTI MEN ORAL TABLET	F	OTC
mgo oral tablet 400 (240 mg) mg	F	OTC
multi complete/iron	F	OTC
multivitamin adults 50+	F	OTC
multivitamin men 50+	F	OTC
multivitamin women	F	OTC
multivitamin women 50+	F	OTC
MVW COMPLETE FORMULATION	F	OTC
MVW COMPLETE FORMULATION D3000	F	OTC
MVW COMPLETE FORMULATION D5000 ORAL CAPSULE	F	OTC
MVW COMPLETE FORMULATION MINIS	F	OTC
NANOVM 1-3 YEARS ORAL POWDER	F	OTC
NANOVM 4-8 YEARS ORAL POWDER	F	OTC
NANOVM 9-18 YEARS	F	OTC
NANOVM T/F ORAL POWDER	F	OTC
NEPHPLEX RX	F	
NU-MAG	F	OTC
ONCOVITE	F	OTC
one daily for men 50+ advanced	F	OTC
one daily for men/lycopene	F	OTC
one daily mens health	F	OTC
ONE-A-DAY TEEN ADVANTAGE/HER	F	OTC
ONE-A-DAY TEEN ADVANTAGE/HIM	F	OTC
oral electrolytes	F	OTC
ORALYTE	F	OTC
ORALYTE FREEZER POPS	F	OTC

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
ORAZINC	F	OTC
OS-CAL CALCIUM + D3 ORAL TABLET 500-5 MG-MCG	F	OTC
OS-CAL EXTRA D3 ORAL TABLET 500-15 MG-MCG	F	OTC
OYSCO 500+D ORAL TABLET	F	OTC
oyster calcium	F	OTC
oyster shell calcium + d oral tablet 500-10 mg-mcg, 500-5 mg-mcg	F	OTC
oyster shell calcium + d3 oral tablet 500-10 mg-mcg	F	OTC
oyster shell calcium 250+d	F	OTC
oyster shell calcium oral tablet 500 mg	F	OTC
oyster shell calcium plus d oral tablet 500-5 mg-mcg	F	OTC
oyster shell calcium w/d oral tablet 500-5 mg-mcg	F	OTC
oyster shell calcium/d oral tablet 250-125 mg-unit, 500-10 mg-mcg, 500-5 mg-mcg	F	OTC
oyster shell calcium/d3 oral tablet 500-10 mg-mcg, 500-5 mg-mcg	F	OTC
oyster shell calcium/vit d3 oral tablet 250-3.125 mg-mcg, 500-5 mg-mcg	F	OTC
oyster shell calcium/vitamin d oral tablet 250-3.125 mg-mcg, 500-5 mg-mcg	F	OTC
ped electrolyte freeze pops	F	OTC
ped electrolyte freezer pops	F	OTC
PEDIALYTE ADVANCED CARE	F	OTC
PEDIALYTE FREEZER POPS	F	OTC
PEDIALYTE ORAL SOLUTION	F	OTC
PEDIALYTE SINGLES	F	OTC
pediatric electrolyte oral solution	F	OTC

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
pediatric electrolyte-zinc	F	OTC
phos-nak	F	OTC
phosphorus supplement	F	OTC
phosphorus w/sod & potassium	F	OTC
PHOSPHO-TRIN K500	F	
potassium chloride crys er oral tablet extended release 10 meq, 20 meq	F	
potassium chloride er oral capsule extended release	F	
potassium chloride er oral tablet extended release 10 meq, 20 meq, 8 meq	F	
potassium phosphates	F	
potassium phosphates(66 meq k)	F	
PRECEDEX INTRAVENOUS SOLUTION 1000 MCG/250ML, 200 MCG/50ML, 400 MCG/100ML, 80 MCG/20ML	Carve-out	
PRORENAL + D	F	OTC
PRORENAL + D W/ OMEGA-3	F	OTC
pure calcium carbonate oral tablet 1500 (600 ca) mg	F	OTC
qc mens daily multivitamin	F	OTC
ra calcium 600 oral tablet 1500 (600 ca) mg	F	OTC
ra calcium 600/vitamin d-3 oral tablet 600-10 mg-mcg	F	OTC
ra calcium cit plus vit d-3	F	OTC
RA CENTRAL-VITE	F	OTC
ra central-vite womens mature	F	OTC
ra pediatric electrolyte	F	OTC
senior tabs	F	OTC
sentry	F	OTC
sentry senior	F	OTC

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
SLOW-MAG ORAL TABLET DELAYED RELEASE	F	OTC
sm calcium 500/vitamin d3 oral tablet 500-10 mg-mcg	F	OTC
sm calcium citrate+/vit d3	F	OTC
sm calcium/vitamin d oral tablet 500-5 mg-mcg, 600-20 mg-mcg	F	OTC
sm calcium-vitamin d oral tablet 500-5 mg-mcg	F	OTC
sm complete	F	OTC
sm complete 50+	F	OTC
sm complete 50+ ultimate mens	F	OTC
sm complete 50+ ultimate women	F	OTC
sm complete senior formula	F	OTC
sm oyster shell calcium/vit d oral tablet 500-10 mg-mcg	F	OTC
sm oyster shell calcium/vit d3	F	OTC
sm pediatric electrolyte	F	OTC
sodium phosphates	F	
sodium-potassium-phosphorus	F	OTC
SPECTRAVITE	F	OTC
super calcium 600 + d 400 oral tablet 600-10 mg-mcg	F	OTC
super calcium 600 + d3 oral tablet 600-10 mg-mcg	F	OTC
super calcium oral tablet 1500 (600 ca) mg	F	OTC
super thera vite m	F	OTC
THERA M PLUS	F	OTC
thera-m	F	OTC
true magnesium oxide oral tablet 500 mg	F	OTC
v-c forte	F	
VIC-FORTE	F	
VITAL-D RX	F	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
YELETS TEENAGE FORMULA	F	OTC
zinc gluconate oral tablet 100 mg	F	OTC
zinc oral capsule 220 (50 zn) mg	F	OTC
zinc sulfate oral capsule 220 (50 zn) mg	F	OTC
zinc sulfate oral tablet 220 (50 zn) mg	F	OTC
zinc-220	F	OTC
<b>Thiazide Diuretics</b>		
ACCURETIC	NP	PA; 102 day supply allowed
amiloride-hydrochlorothiazide	F	
amlodipine-valsartan-hctz	P	102 day supply allowed
ATACAND HCT	NP	PA; 102 day supply allowed
AVALIDE ORAL TABLET 150-12.5 MG, 300-12.5 MG	NP	PA; 102 day supply allowed
benazepril-hydrochlorothiazide	P	102 day supply allowed
BENICAR HCT	NP	PA; 102 day supply allowed
bisoprolol-hydrochlorothiazide	P	102 day supply allowed
candesartan cilexetil-hctz	NP	PA; 102 day supply allowed
captopril-hydrochlorothiazide	NP	PA; 102 day supply allowed
DIOVAN HCT	NP	PA; 102 day supply allowed
DIURIL	F	AL
EDARBYCLOR	NP	PA; 102 day supply allowed
enalapril-hydrochlorothiazide	P	102 day supply allowed
EXFORGE HCT	NP	PA; 102 day supply allowed
fosinopril sodium-hctz	NP	PA; 102 day supply allowed
hydrochlorothiazide oral	F	
HYZAAR	NP	PA; 102 day supply allowed
irbesartan-hydrochlorothiazide	NP	PA; 102 day supply allowed
lisinopril-hydrochlorothiazide	P	102 day supply allowed
losartan potassium-hctz	P	102 day supply allowed

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
LOTENSIN HCT ORAL TABLET 10-12.5 MG, 20-12.5 MG, 20-25 MG	NP	PA; 102 day supply allowed
methyldopa-hydrochlorothiazide	NP	PA; 102 day supply allowed
metoprolol-hydrochlorothiazide	NP	PA; 102 day supply allowed
MICARDIS HCT	NP	PA; 102 day supply allowed
olmesartan medoxomil-hctz	P	102 day supply allowed
olmesartan-amlodipine-hctz	NP	PA; 102 day supply allowed
propranolol-hctz	NP	PA; 102 day supply allowed
quinapril-hydrochlorothiazide	NP	PA; 102 day supply allowed
spironolactone-hctz	F	
TEKTURNA HCT	NP	PA; 102 day supply allowed
telmisartan-hctz	NP	PA; 102 day supply allowed
triamterene-hctz oral capsule 37.5-25 mg	F	
triamterene-hctz oral tablet	F	
TRIBENZOR	NP	PA; 102 day supply allowed
valsartan-hydrochlorothiazide	P	102 day supply allowed
VASERETIC	NP	PA; 102 day supply allowed
ZESTORETIC	NP	PA; 102 day supply allowed
ZIAC	NP	PA; 102 day supply allowed
<b>Thiazide-Like Diuretics</b>		
atenolol-chlorthalidone	P	102 day supply allowed
chlorthalidone oral tablet 25 mg, 50 mg	F	
indapamide oral	F	
metolazone	F	
TENORETIC 100	NP	PA; 102 day supply allowed
TENORETIC 50	NP	PA; 102 day supply allowed
<b>Uricosuric Agents</b>		
colchicine-probenecid	P	
probenecid oral	P	
<b>Vasopressin Antagonists</b>		

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
JYNARQUE	F	PA; Specialty Drug; QL; AL
<b>Enzymes</b>		
<b>Enzymes</b>		
ADAGEN	Carve-out	
ALDURAZYME	Carve-out	
CEREZYME INTRAVENOUS SOLUTION RECONSTITUTED 400 UNIT	Carve-out	
CREON	P-PA	PA; 102 day supply allowed
ELAPRASE	Carve-out	
ELELYSO	Carve-out	
FABRAZYME	Carve-out	
LAMZEDE	Carve-out	
LUMIZYME	Carve-out	
MEPSEVII	Carve-out	
NAGLAZYME	Carve-out	
papaya oral tablet	Carve-out	OTC
PERTZYE	NP	PA; 102 day supply allowed
PULMOZYME INHALATION SOLUTION 2.5 MG/2.5ML	F	PA; Specialty Drug; QL
REVCOVI	Carve-out	
STRENSIQ	Carve-out	
SUCRAID	Carve-out	
VIMIZIM	Carve-out	
VIOKACE	NP	PA; 102 day supply allowed
VPRIV	Carve-out	
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 10000-32000 UNIT, 15000-47000 UNIT, 20000-63000 UNIT, 25000-79000 UNIT, 3000-10000 UNIT, 40000-126000 UNIT, 5000-24000 UNIT, 60000-189600 UNIT	P-PA	PA; 102 day supply allowed

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
<b>Eye, Ear, Nose And Throat (Eent) Preps.</b>		
<b>Alpha-Adrenergic Agonists (Eent)</b>		
ALPHAGAN P	NP	PA
brimonidine tartrate ophthalmic solution 0.1 %, 0.15 %	NP	PA
brimonidine tartrate ophthalmic solution 0.2 %	P	
brimonidine tartrate-timolol	NP	PA
COMBIGAN	P	
SIMBRINZA	P	
<b>Antiallergic Agents</b>		
ALAWAY	P	OTC
ALAWAY CHILDRENS ALLERGY	P	OTC
ALOCRIAL	NP	PA
ALOMIDE	NP	PA
azelastine hcl nasal	P	
azelastine hcl ophthalmic	P	
azelastine-fluticasone	NP	PA
bepotastine besilate	NP	PA
BEPREVE	NP	PA
cromolyn sodium nasal	F	OTC
cromolyn sodium ophthalmic	P	
cvs olopatadine hcl	P	OTC
DYMISTA	NP	PA
epinastine hcl	NP	PA
eye allergy itch relief	P	OTC
eye allergy itch/redness rel	P	OTC
eye allergy relief ophthalmic solution 0.025-0.3 %	F	OTC
eye itch relief	P	OTC
gnp olopatadine hcl	P	OTC

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
ketotifen fumarate ophthalmic	P	OTC
kp ketotifen fumarate	P	OTC
LASTACAFT	NP	PA
NAPHCON-A	F	OTC
NASALCROM	F	OTC
olopatadine hcl nasal	NP	PA
olopatadine hcl ophthalmic	P	
PATADAY	NP	PA; OTC
PATANASE	NP	PA
qc olopatadine hcl	P	OTC
RYALTRIS	NP	PA
sm eye itch relief	P	OTC
ZADITOR OPHTHALMIC SOLUTION 0.035 %	NP	PA; OTC
ZERVIATE	NP	PA
<b>Antibacterials (Eent)</b>		
AZASITE	NP	PA
bacitracin ophthalmic	F	
bacitracin-polymyxin b ophthalmic ointment 500-10000 unit/gm	F	
bacitra-neomycin-polymyxin-hc	F	
BESIVANCE	NP	PA
BETHKIS	P	Specialty Drug
CETRAXAL	NP	PA
CILOXAN	NP	PA
CIPRO HC	NP	PA
CIPRODEX	P	
ciprofloxacin hcl ophthalmic	P	
ciprofloxacin hcl otic	NP	PA
ciprofloxacin-dexamethasone	P	
ciprofloxacin-fluocinolone pf	NP	PA

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
erythromycin ophthalmic	P	
gatifloxacin ophthalmic	NP	PA
gentamicin sulfate ophthalmic solution	F	
KITABIS PAK	P	Specialty Drug
MOXEZA	NP	PA
moxifloxacin hcl (2x day)	NP	PA
moxifloxacin hcl ophthalmic solution	P	
neomycin sulfate oral	P	
neomycin-bacitracin zn-polymyx	F	
neomycin-polymyxin-dexameth	F	
neomycin-polymyxin-gramicidin ophthalmic solution 1.75-10000-.025	F	
neomycin-polymyxin-hc otic	F	
OCUFLOX	NP	PA
ofloxacin ophthalmic	P	
ofloxacin otic	P	
OTOVEL	NP	PA
polymyxin b-trimethoprim	F	
sulfacetamide sodium ophthalmic	F	
sulfacetamide-prednisolone ophthalmic solution	F	
TOBI	NP	PA; Specialty Drug
TOBI PODHALER	P	Specialty Drug
tobramycin inhalation nebulization solution 300 mg/4ml	NP	PA
tobramycin inhalation nebulization solution 300 mg/5ml	P	Specialty Drug
tobramycin ophthalmic	F	
tobramycin-dexamethasone	F	
VIGAMOX	NP	PA
ZYMAXID	NP	PA
<b>Beta-Adrenergic Blocking Agents (Eent)</b>		

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
betaxolol hcl ophthalmic	NP	PA
BETIMOL	NP	PA
BETOPTIC-S	P	
brimonidine tartrate-timolol	NP	PA
carteolol hcl	P	
COMBIGAN	P	
COSOPT	NP	PA
COSOPT PF OPHTHALMIC SOLUTION 2-0.5 %	NP	PA
dorzolamide hcl-timolol mal	P	
dorzolamide hcl-timolol mal pf ophthalmic solution 2-0.5 %	NP	PA
ISTALOL	NP	PA
levobunolol hcl ophthalmic solution 0.5 %	NP	PA
timolol maleate (once-daily)	NP	PA
TIMOLOL MALEATE OCUDOSE	NP	PA
timolol maleate ophthalmic	P	
timolol maleate pf	NP	PA
TIMOPTIC	NP	PA
TIMOPTIC OCUDOSE	NP	PA
TIMOPTIC-XE	NP	PA
<b>Carbonic Anhydrase Inhibitors (Eent)</b>		
acetazolamide er	F	QL
acetazolamide oral	F	QL
AZOPT	P	
brinzolamide	NP	PA
COSOPT	NP	PA
COSOPT PF OPHTHALMIC SOLUTION 2-0.5 %	NP	PA
dorzolamide hcl ophthalmic	P	
dorzolamide hcl-timolol mal	P	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
dorzolamide hcl-timolol mal pf ophthalmic solution 2-0.5 %	NP	PA
SIMBRINZA	P	
<b>Corticosteroids (Eent)</b>		
AIRSUPRA	NP	PA; 102 day supply allowed; QL
allergy relief nasal	NP	PA; OTC
ALREX	NP	PA
azelastine-fluticasone	NP	PA
bacitra-neomycin-polymyxin-hc	F	
BECONASE AQ	NP	PA
budesonide nasal	NP	PA; OTC
CIPRO HC	NP	PA
CIPRODEX	P	
ciprofloxacin-dexamethasone	P	
ciprofloxacin-fluocinolone pf	NP	PA
cvs budesonide	NP	PA; OTC
cvs nasal allergy spray	NP	PA; OTC
dexamethasone sodium phosphate ophthalmic	F	
DYMISTA	NP	PA
eq nasal allergy	NP	PA; OTC
EYSUVIS	NP	PA; QL
flunisolide nasal solution 25 mcg/act (0.025%)	NP	PA
fluorometholone ophthalmic	F	QL
fluticasone propionate nasal	P	
FML	F	QL
FML FORTE	F	QL
gnp 24 hour nasal allergy	NP	PA; OTC
gnp budesonide nasal spray	NP	PA; OTC
goodsense nasal allergy spray	NP	PA; OTC
hm 24 hour nasal allergy	NP	PA; OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
hm allergy relief nasal	NP	PA; OTC
hydrocortisone-acetic acid	F	
KLS ALLER-CORT	NP	PA; OTC
loteprednol etabonate ophthalmic suspension 0.2 %	NP	PA
mometasone furoate nasal	NP	PA
NASACORT ALLERGY 24HR CHILDREN	NP	PA; OTC
nasal allergy 24 hour	NP	PA; OTC
NASONEX 24HR	NP	PA; OTC
neomycin-polymyxin-dexameth	F	
neomycin-polymyxin-hc otic	F	
OMNARIS	NP	PA
OTOVEL	NP	PA
PRED MILD	F	QL
prednisolone acetate ophthalmic	F	
prednisolone sodium phosphate ophthalmic	F	
qc allergy relief nasal	NP	PA; OTC
QNASL	NP	PA
QNASL CHILDRENS	NP	PA
ra budesonide	NP	PA; OTC
ra nasal allergy	NP	PA; OTC
RYALTRIS	NP	PA
sm allergy relief nasal	NP	PA; OTC
sulfacetamide-prednisolone ophthalmic solution	F	
tobramycin-dexamethasone	F	
triamcinolone acetonide nasal aerosol	NP	PA; OTC
XHANCE	NP	PA
ZETONNA	NP	PA
<b>Eent Anti-Infectives, Miscellaneous</b>		

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
artificial tears ophthalmic solution 0.5-0.6 %, 5-6 mg/ml	F	OTC
chlorhexidine gluconate mouth/throat	F	
CLEAR EYES NATURAL TEARS	F	OTC
gnp artificial tears	F	OTC
PAROEX	F	
px artificial tears	F	OTC
STYE OPHTHALMIC SOLUTION	F	OTC
<b>Eent Anti-Inflammatory Agents, Misc.</b>		
CEQUA	NP	PA; QL
cyclosporine ophthalmic	NP	PA; QL
RESTASIS	P	QL
RESTASIS MULTIDOSE OPHTHALMIC EMULSION 0.05 %	P	QL
VERKAZIA	NP	PA; QL; AL
XIIDRA	P	QL
<b>Eent Drugs, Miscellaneous</b>		
acetic acid otic	F	
altamist spray	F	OTC
apraclonidine hcl	P	
artificial tears ophthalmic solution 0.5-0.6 %, 1.4 %, 5-6 mg/ml	F	OTC
artificial tears pf	F	OTC
carboxymethylcellulose sod pf	F	OTC
carboxymethylcellulose sodium ophthalmic gel	F	OTC
carboxymethylcellulose sodium ophthalmic solution 0.5 %	F	OTC
CLEAR EYES NATURAL TEARS	F	OTC
cromolyn sodium nasal	F	OTC
cromolyn sodium ophthalmic	P	
cromolyn sodium oral	F	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
cvs lubricant drops fast act	F	OTC
cvs lubricant drops long last	F	OTC
cvs lubricant eye drops (pf) ophthalmic solution 0.5 %	F	OTC
cvs natural tears pf	F	OTC
cvs saline nasal spray	F	OTC
cvs sod chloride hypertonicity	F	OTC
cvs sodium chloride	F	OTC
deep sea nasal spray	F	OTC
dry eye relief	F	OTC
eq restore plus lubricant eye	F	OTC
eq restore tears	F	OTC
eq saline nasal spray	F	OTC
eq saline nasal spray	F	OTC
eye drops ophthalmic solution 0.5 %	F	OTC
eye lubricant	F	OTC
GASTROCROM	F	
GENTEAL TEARS MODERATE PF	F	OTC
GENTEAL TEARS PF	F	OTC
GENTEAL TEARS SEVERE DAY/NIGHT	F	OTC
gnp artificial tears	F	OTC
gnp lubricating plus eye drops	F	OTC
gnp nasal moisturizing	F	OTC
goodsense lubricating eye drop	F	OTC
hm lubricating plus	F	OTC
hm lubricating tears	F	OTC
hm saline nasal spray	F	OTC
hydrocortisone-acetic acid	F	
IOPIDINE OPHTHALMIC SOLUTION 1 %	NP	PA
liquitears	F	OTC

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
LITTLE REMEDIES SALINE	F	OTC
lubricant eye	F	OTC
lubricant eye drops ophthalmic solution 0.4-0.3 % , 0.5 %	F	OTC
lubricant eye drops pf	F	OTC
lubricant eye nighttime	F	OTC
lubricant eye pm	F	OTC
lubricant pm	F	OTC
lubricating eye drops ophthalmic solution 0.4-0.3 %	F	OTC
lubricating plus eye drops	F	OTC
MIEBO	NP	PA; QL; AL
MURO 128 OPHTHALMIC OINTMENT	F	OTC
MURO 128 OPHTHALMIC SOLUTION 5 %	F	OTC
nasal moisturizing spray	F	OTC
NASALCROM	F	OTC
OCEAN NASAL SPRAY	F	OTC
OXERVATE	F	PA; Specialty Drug; QL; AL
polyvinyl alcohol ophthalmic	F	
px artificial tears	F	OTC
px saline nasal spray	F	OTC
ra lubricant eye drops ophthalmic solution 0.5 %	F	OTC
ra lubricant eye ophthalmic solution 0.4-0.3 %	F	OTC
REFRESH LACRI-LUBE	F	OTC
REFRESH LIQUIGEL OPHTHALMIC GEL	F	OTC
REFRESH P.M.	F	OTC
REFRESH PLUS	F	OTC
REFRESH TEARS	F	OTC
saline mist spray	F	OTC
saline nasal spray	F	OTC
sm artificial tears	F	OTC

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sm lubricant eye drops	F	OTC
sm lubricating plus	F	OTC
sm lubricating tears	F	OTC
sm nasal spray saline	F	OTC
sodium chloride (hypertonic) ophthalmic solution	F	OTC
STYE OPHTHALMIC SOLUTION	F	OTC
SYSTANE	F	OTC
SYSTANE ULTRA	F	OTC
TYRVAYA	NP	PA; QL
<b>Eent Nonsteroidal Anti-Inflam. Agents</b>		
ACULAR	NP	PA
ACULAR LS	NP	PA
ACUVAIL	NP	PA
bromfenac sodium (once-daily)	NP	PA
bromfenac sodium ophthalmic solution 0.07 %, 0.075 %	NP	PA
BROMSITE	NP	PA
diclofenac sodium ophthalmic	P	
flurbiprofen sodium	P	
ILEVRO	NP	PA
ketorolac tromethamine ophthalmic solution 0.4 %	NP	PA
ketorolac tromethamine ophthalmic solution 0.5 %	P	
NEVANAC	NP	PA
PROLENSA	NP	PA
<b>Local Anesthetics (Eent)</b>		
lidocaine viscous hcl	F	
proparacaine hcl ophthalmic	F	
<b>Miotics</b>		

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
PHOSPHOLINE IODIDE	F	
pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %	F	
<b>Mydriatics</b>		
atropine sulfate ophthalmic ointment	F	
atropine sulfate ophthalmic solution 1 %	F	
cyclopentolate hcl ophthalmic solution 1 %, 2 %	F	
phenylephrine hcl ophthalmic solution 2.5 %	F	
tropicamide ophthalmic	F	
<b>Prostaglandin Analogs</b>		
bimatoprost ophthalmic	NP	PA
IYUZEH	NP	PA
latanoprost ophthalmic	P	
LUMIGAN OPHTHALMIC SOLUTION 0.01 %	NP	PA
ROCKLATAN	P	
tafluprost (pf)	NP	PA
TRAVATAN Z	NP	PA
travoprost (bak free)	NP	PA
VYZULTA	NP	PA
XALATAN	NP	PA
XELPROS	NP	PA
ZIOPTAN OPHTHALMIC SOLUTION 0.0015 %	NP	PA
<b>Rho Kinase Inhibitors</b>		
RHOPRESSA	P	
ROCKLATAN	P	
<b>Vasoconstrictors</b>		
eye allergy relief ophthalmic solution 0.025-0.3 %	F	OTC
NAPHCN-A	F	OTC
phenylephrine hcl ophthalmic solution 2.5 %	F	

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
<b>Gastrointestinal Drugs</b>		
<b>5-Ht3 Receptor Antagonists</b>		
AKYNZEO ORAL	NP	PA; Specialty Drug; QL
granisetron hcl oral	P	QL
midazolam-ketamine-ondansetron sublingual	Carve-out	
mko melt dose pack sublingual	Carve-out	
ondansetron	P	QL
ondansetron hcl oral solution	P	QL
ondansetron hcl oral tablet 4 mg, 8 mg	P	QL
SANCUSO	NP	PA; Specialty Drug; QL
<b>Antacids And Adsorbents</b>		
ACID GONE ORAL SUSPENSION	F	OTC
ALMACONE DOUBLE STRENGTH	F	OTC
alum & mag hydroxide-simeth oral suspension 200-200-20 mg/5ml, 400-400-40 mg/5ml	F	OTC
alumina-magnesia-simethicone	F	OTC
aluminum hydroxide gel oral suspension 320 mg/5ml	F	OTC
aluminum-magnesium-simethicone	F	OTC
antacid advanced	F	OTC
antacid anti-gas max strength	F	OTC
antacid anti-gas reg strength	F	OTC
antacid calcium	F	OTC
antacid calcium rich	F	OTC
antacid extra strength oral tablet chewable 750 mg	F	OTC
ANTACID FLAVOR CHEWS	F	OTC
antacid liquid	F	OTC
antacid m	F	OTC
antacid maximum strength	F	OTC

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
antacid oral suspension 200-200-20 mg/5ml, 400-400-40 mg/10ml	F	OTC
antacid oral tablet chewable 500 mg, 750 mg	F	OTC
antacid plus anti-gas relief	F	OTC
antacid regular strength	F	OTC
antacid/antigas	F	OTC
antacid/anti-gas	F	OTC
aspirin buf(cacarb-mgcarb-mgo)	F	OTC; AL
bismatrol	F	OTC
bismatrol maximum strength	F	OTC
bismuth	F	OTC
bismuth subsalicylate oral suspension 525 mg/30ml	F	OTC
BUFFERIN	F	OTC; AL
calcium antacid	F	OTC
calcium antacid extra strength	F	OTC
calcium carbonate antacid oral suspension	F	OTC
calcium carbonate antacid oral tablet chewable 500 mg	F	OTC
calcium carbonate oral tablet chewable 500 mg	F	OTC
CAL-GEST ANTACID	F	OTC
comfort gel antacid & anti-gas	F	OTC
comfort gel antacid anti-gas oral suspension 400-400-40 mg/5ml	F	OTC
cvs antacid extra strength oral tablet chewable 750 mg	F	OTC
cvs antacid kids	F	OTC
cvs antacid maximum strength	F	OTC
cvs antacid plus antigas	F	OTC
cvs antacid ultra strength	F	OTC
cvs antacid/anti-gas	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
cvs anti-diarrheal oral suspension	F	OTC
CVS CHEWY NOT CHALKY FLAVOR	F	OTC
cvs omeprazole-sod bicarbonate	NP	PA; OTC
cvs smooth antacid extra st	F	OTC
cvs stomach relief max st	F	OTC
cvs stomach relief oral suspension 525 mg/15ml, 525 mg/30ml	F	OTC
cvs stomach relief oral tablet	F	OTC
cvs stomach relief oral tablet chewable	F	OTC
diarrhea	F	OTC
eq antacid maximum strength oral suspension	F	OTC
eq antacid oral tablet chewable	F	OTC
eq pink-bismuth	F	OTC
eq stomach relief oral suspension	F	OTC
eql antacid	F	OTC
eql antacid/anti-gas	F	OTC
eql stomach relief oral suspension 262 mg/15ml	F	OTC
eql stomach relief oral tablet chewable	F	OTC
GAVISCON ORAL SUSPENSION	F	OTC
geri-lanta maximum strength	F	OTC
geri-lanta oral suspension 200-200-20 mg/5ml	F	OTC
geri-mox	F	OTC
gnp antacid & anti-gas oral suspension	F	OTC
gnp antacid oral tablet chewable 500 mg	F	OTC
gnp antacid regular strength	F	OTC
gnp antacid ultra strength	F	OTC
gnp pink bismuth oral tablet	F	OTC
gnp pink bismuth oral tablet chewable	F	OTC
gnp stomach relief	F	OTC
gnp stomach relief ultra	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
goodsense advanced antacid	F	OTC
goodsense antacid & gas relief oral suspension 400-400-40 mg/5ml	F	OTC
goodsense antacid oral tablet chewable 500 mg, 750 mg	F	OTC
goodsense stomach relief oral suspension 525 mg/30ml	F	OTC
goodsense stomach relief oral tablet chewable	F	OTC
HEALTHY MAMA TAME THE FLAME	F	OTC
hm advanced antacid max st	F	OTC
hm antacid	F	OTC
hm antacid anti-gas ex st	F	OTC
hm antacid extra strength	F	OTC
hm antacid regular strength	F	OTC
hm calcium antacid ex st	F	OTC
hm stomach relief oral tablet chewable	F	OTC
hm stomach relief ultra	F	OTC
HYVEE ADVANCED ANTACID	F	OTC
KAOPECTATE EXTRA STRENGTH	F	OTC
KAOPECTATE ORAL TABLET	F	OTC
KONVOMEF	NP	PA
long lasting antacid	F	OTC
mag-al plus	F	OTC
mag-al plus xs	F	OTC
magnesium oxide (antacid) oral tablet	F	OTC
magnesium oxide oral tablet 400 mg, 420 mg	F	OTC
MAOX	F	OTC
meijer antacid oral suspension 400-400-40 mg/5ml	F	OTC
mintox maximum strength	F	OTC
MINTOX ORAL SUSPENSION	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
MYLANTA MAXIMUM STRENGTH	F	OTC
omeprazole-sodium bicarbonate	NP	PA
peptic relief oral tablet chewable	F	OTC
PEPTO-BISMOL MAX STRENGTH	F	OTC
PEPTO-BISMOL ORAL SUSPENSION 262 MG/15ML	F	OTC
PEPTO-BISMOL ORAL TABLET	F	OTC
PEPTO-BISMOL ORAL TABLET CHEWABLE	F	OTC
PEPTO-BISMOL TO-GO	F	OTC
px antacid extra strength	F	OTC
px antacid maximum strength	F	OTC
px antacid regular strength	F	OTC
px calcium antacid	F	OTC
px stomach relief	F	OTC
px stomach relief max st	F	OTC
qc antacid	F	OTC
qc antacid extra strength	F	OTC
qc antacid/anti-gas oral suspension 200-200-20 mg/5ml, 400-400-40 mg/5ml	F	OTC
qc diarrhea relief	F	OTC
qc pink bismuth oral tablet chewable	F	OTC
qc stomach relief oral tablet chewable	F	OTC
ra antacid	F	OTC
ra antacid/anti-gas	F	OTC
ra antacid/anti-gas max st	F	OTC
ra antacid/gas relief max st	F	OTC
ra stomach relief oral suspension	F	OTC
sb antacid	F	OTC
sb antacid anti-gas	F	OTC
sb antacid extra strength	F	OTC
sm antacid	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
sm antacid advanced	F	OTC
sm antacid advanced max st	F	OTC
sm antacid anti-gas	F	OTC
sm antacid maximum strength	F	OTC
sm antacid/antigas	F	OTC
sm calcium antacid	F	OTC
sm calcium antacid ex st	F	OTC
sm stomach relief oral suspension 525 mg/30ml	F	OTC
sm stomach relief oral tablet	F	OTC
sm stomach relief oral tablet chewable	F	OTC
sodium bicarbonate oral tablet 325 mg, 650 mg	F	OTC
SOOTHE ORAL SUSPENSION 262 MG/15ML	F	OTC
SOOTHE ORAL TABLET	F	OTC
SOOTHE ORAL TABLET CHEWABLE	F	OTC
stomach relief extra strength	F	OTC
stomach relief oral suspension 525 mg/15ml	F	OTC
stomach relief oral tablet	F	OTC
stomach relief oral tablet chewable	F	OTC
stomach relief ultra	F	OTC
tri-buffered aspirin oral tablet 325 mg	F	OTC; AL
TUMS	F	OTC
TUMS CHEWY BITES	F	OTC
TUMS E-X 750	F	OTC
TUMS EXTRA STRENGTH 750	F	OTC
TUMS LASTING EFFECTS	F	OTC
TUMS SMOOTHIES	F	OTC
TUMS ULTRA 1000	F	OTC
ZEGERID	NP	PA
<b>Antidiarrhea Agents</b>		
anti-diarrheal oral tablet	P	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
bis subcit-metronid-tetracyc	NP	PA
bismatrol	F	OTC
bismatrol maximum strength	F	OTC
bismuth	F	OTC
bismuth subsalicylate oral suspension 525 mg/30ml	F	OTC
bismuth/metronidaz/tetracyclin	NP	PA
CULTURELLE HEALTH & WELLNESS	F	OTC
CULTURELLE HEALTH (INULIN)	F	OTC
CULTURELLE IMMUNITY SUPPORT	F	OTC
CULTURELLE ORAL CAPSULE	F	OTC
CULTURELLE PRO-WELL HEALTH	F	OTC
cvs anti-diarrheal oral suspension	F	OTC
cvs stomach relief max st	F	OTC
cvs stomach relief oral suspension 525 mg/15ml, 525 mg/30ml	F	OTC
cvs stomach relief oral tablet	F	OTC
cvs stomach relief oral tablet chewable	F	OTC
diarrhea	F	OTC
diphenoxylate-atropine oral liquid	P	
diphenoxylate-atropine oral tablet 2.5-0.025 mg	P	
eq anti-diarrheal oral capsule	P	OTC
eq loperamide hcl oral suspension	F	OTC
eq pink-bismuth	F	OTC
eq stomach relief oral suspension	F	OTC
eql stomach relief oral suspension 262 mg/15ml	F	OTC
eql stomach relief oral tablet chewable	F	OTC
gnp anti-diarrheal oral capsule	P	OTC
gnp pink bismuth oral tablet	F	OTC
gnp pink bismuth oral tablet chewable	F	OTC
gnp stomach relief	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
gnp stomach relief ultra	F	OTC
goodsense stomach relief oral suspension 525 mg/30ml	F	OTC
goodsense stomach relief oral tablet chewable	F	OTC
hm anti-diarrheal	P	OTC
hm stomach relief oral tablet chewable	F	OTC
hm stomach relief ultra	F	OTC
KAOPECTATE EXTRA STRENGTH	F	OTC
KAOPECTATE ORAL TABLET	F	OTC
loperamide hcl oral capsule	P	
loperamide hcl oral liquid 1 mg/7.5ml	P	OTC
loperamide hcl oral solution 1 mg/7.5ml	P	OTC
loperamide hcl oral suspension	P	OTC
peptic relief oral tablet chewable	F	OTC
PEPTO-BISMOL MAX STRENGTH	F	OTC
PEPTO-BISMOL ORAL SUSPENSION 262 MG/15ML	F	OTC
PEPTO-BISMOL ORAL TABLET	F	OTC
PEPTO-BISMOL ORAL TABLET CHEWABLE	F	OTC
PEPTO-BISMOL TO-GO	F	OTC
px stomach relief	F	OTC
px stomach relief max st	F	OTC
PYLERA	P	
qc anti-diarrheal	P	OTC
qc diarrhea relief	F	OTC
qc pink bismuth oral tablet chewable	F	OTC
qc stomach relief oral tablet chewable	F	OTC
ra allergy relief oral capsule 10 mg	NP	PA; OTC
ra anti-diarrheal oral tablet	F	OTC
ra loperamide hcl	F	OTC
ra stomach relief oral suspension	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
sm anti-diarrheal oral capsule	P	OTC
sm anti-diarrheal oral liquid 1 mg/7.5ml	P	OTC
sm anti-diarrheal oral solution	P	OTC
sm anti-diarrheal oral tablet	P	OTC
sm loperamide hcl	P	OTC
sm stomach relief oral suspension 525 mg/30ml	F	OTC
sm stomach relief oral tablet	F	OTC
sm stomach relief oral tablet chewable	F	OTC
SOOTHE ORAL SUSPENSION 262 MG/15ML	F	OTC
SOOTHE ORAL TABLET	F	OTC
SOOTHE ORAL TABLET CHEWABLE	F	OTC
stomach relief extra strength	F	OTC
stomach relief oral suspension 525 mg/15ml	F	OTC
stomach relief oral tablet	F	OTC
stomach relief oral tablet chewable	F	OTC
stomach relief ultra	F	OTC
<b>Antiemetics, Miscellaneous</b>		
dronabinol	F	PA
promethazine hcl oral	F	AL
promethazine hcl rectal suppository 12.5 mg, 25 mg	F	QL; AL
scopolamine	F	PA
<b>Antiflatulents</b>		
ALMACONE DOUBLE STRENGTH	F	OTC
alum & mag hydroxide-simeth oral suspension 200-200-20 mg/5ml, 400-400-40 mg/5ml	F	OTC
alumina-magnesia-simethicone	F	OTC
aluminum-magnesium-simethicone	F	OTC
antacid advanced	F	OTC
antacid anti-gas max strength	F	OTC

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
antacid anti-gas reg strength	F	OTC
antacid liquid	F	OTC
antacid m	F	OTC
antacid maximum strength	F	OTC
antacid oral suspension 200-200-20 mg/5ml, 400-400-40 mg/10ml	F	OTC
antacid plus anti-gas relief	F	OTC
antacid regular strength oral suspension	F	OTC
antacid/antigas	F	OTC
antacid/anti-gas	F	OTC
anti-gas oral capsule	Carve-out	OTC
BEANO MELTAWAYS ORAL TABLET DISPERSIBLE 450 UNIT	Carve-out	OTC
BEANO ORAL TABLET	Carve-out	OTC
BEANO TO GO	Carve-out	OTC
BEANO ULTRA 800	Carve-out	OTC
comfort gel antacid & anti-gas	F	OTC
comfort gel antacid anti-gas oral suspension 400-400-40 mg/5ml	F	OTC
cvs antacid plus antigas	F	OTC
cvs antacid/anti-gas	F	OTC
CVS BEANAID	Carve-out	OTC
cvs gas relief extra strength oral tablet chewable	F	OTC
cvs gas relief infants	F	OTC
cvs gas relief oral tablet chewable	F	OTC
cvs infants gas relief	F	OTC
drxchoice gas relief	F	OTC
eq antacid maximum strength oral suspension	F	OTC
eq gas relief extra strength oral tablet chewable	F	OTC
eq infants gas relief oral suspension 40 mg/0.6ml	F	OTC
eq1 antacid/anti-gas	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
eql infants gas relief	F	OTC
gas relief & prevention	Carve-out	OTC
gas relief drops infants	F	OTC
gas relief extra strength oral tablet chewable	F	OTC
gas relief infants oral suspension 20 mg/0.3ml	F	OTC
gas relief oral liquid	F	OTC
gas relief oral suspension	F	OTC
gas relief oral tablet chewable	F	OTC
GAS-X EXTRA STRENGTH ORAL TABLET CHEWABLE	F	OTC
GAS-X PREVENTION	Carve-out	OTC
geri-lanta maximum strength	F	OTC
geri-lanta oral suspension 200-200-20 mg/5ml	F	OTC
geri-mox	F	OTC
gnp antacid & anti-gas oral suspension	F	OTC
gnp antacid regular strength	F	OTC
gnp gas relief	F	OTC
gnp gas relief extra strength oral tablet chewable	F	OTC
gnp infant gas relief	F	OTC
goodsense advanced antacid	F	OTC
goodsense antacid & gas relief oral suspension 400-400-40 mg/5ml	F	OTC
hm advanced antacid max st	F	OTC
hm antacid anti-gas ex st	F	OTC
hm antacid oral suspension	F	OTC
hm gas relief infants drops	F	OTC
hm gas relief oral tablet chewable	F	OTC
HYVEE ADVANCED ANTACID	F	OTC
infants gas relief oral suspension 20 mg/0.3ml	F	OTC
infants simethicone oral suspension 20 mg/0.3ml	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
LITTLE REMEDIES FOR TUMMYS ORAL SUSPENSION	F	OTC
LITTLE REMEDIES GAS RELIEF	F	OTC
mag-al plus	F	OTC
mag-al plus xs	F	OTC
meijer antacid oral suspension 400-400-40 mg/5ml	F	OTC
mi-acid gas relief	F	OTC
mintox maximum strength	F	OTC
MINTOX ORAL SUSPENSION	F	OTC
MYLANTA MAXIMUM STRENGTH	F	OTC
MYLICON INFANTS GAS RELIEF	F	OTC
px antacid maximum strength oral suspension	F	OTC
px antacid regular strength	F	OTC
px gas relief infants	F	OTC
qc antacid oral suspension	F	OTC
qc antacid/anti-gas oral suspension 200-200-20 mg/5ml, 400-400-40 mg/5ml	F	OTC
qc gas relief extra strength oral tablet chewable	F	OTC
ra antacid/anti-gas	F	OTC
ra antacid/anti-gas max st	F	OTC
ra antacid/gas relief max st	F	OTC
ra gas relief extra strength oral tablet chewable	F	OTC
sb antacid anti-gas	F	OTC
simethicone drops infants oral suspension	F	OTC
simethicone oral tablet chewable	F	OTC
sm antacid advanced	F	OTC
sm antacid advanced max st	F	OTC
sm antacid anti-gas	F	OTC
sm antacid maximum strength	F	OTC
sm antacid oral suspension	F	OTC

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sm antacid/antigas	F	OTC
sm gas relief infants	F	OTC
sm gas relief infants drops	F	OTC
sm gas relief oral tablet chewable	F	OTC
<b>Antihistamines (Gi Drugs)</b>		
dimenhydrinate oral tablet 50 mg	F	OTC
meclizine hcl oral tablet 12.5 mg, 25 mg	F	
meclizine hcl oral tablet chewable	F	
prochlorperazine	F	QL
prochlorperazine maleate oral	F	QL
<b>Anti-Inflammatory Agents (Gi Drugs)</b>		
alosetron hcl	NP	PA
APRISO	P	
ASACOL HD	NP	PA
AZULFIDINE	NP	PA
AZULFIDINE EN-TABS	NP	PA
balsalazide disodium	NP	PA
COLAZAL	NP	PA
DELZICOL	NP	PA
DIPENTUM	NP	PA
LIALDA	P	
LOTRONEX	NP	PA
mesalamine er	NP	PA
mesalamine oral	NP	PA
mesalamine rectal enema	F	
PENTASA	NP	PA
sulfasalazine oral	P	
<b>Antiulcer Agents And Acid Suppress.,Misc</b>		
bis subcit-metronid-tetracyc	NP	PA

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bismuth/metronidaz/tetracyclin	NP	PA
PYLERA	P	
TALICIA	NP	PA
<b>Antiulcer Agents And Acid Suppressants</b>		
aluminum hydroxide gel oral suspension 320 mg/5ml	F	OTC
amoxicillin oral capsule	F	102 day supply allowed
amoxicillin oral suspension reconstituted	F	102 day supply allowed
amoxicillin oral tablet	F	102 day supply allowed
amoxicillin oral tablet chewable 125 mg, 250 mg	F	102 day supply allowed
antacid calcium	F	OTC
antacid calcium rich	F	OTC
antacid extra strength oral tablet chewable 750 mg	F	OTC
ANTACID FLAVOR CHEWS	F	OTC
antacid oral tablet chewable 500 mg, 750 mg	F	OTC
antacid regular strength oral tablet chewable	F	OTC
bismatrol	F	OTC
bismatrol maximum strength	F	OTC
bismuth	F	OTC
bismuth subsalicylate oral suspension 525 mg/30ml	F	OTC
calcium antacid	F	OTC
calcium antacid extra strength	F	OTC
calcium carbonate antacid oral suspension	F	OTC
calcium carbonate antacid oral tablet chewable 500 mg	F	OTC
calcium carbonate oral tablet chewable 500 mg	F	OTC
CAL-GEST ANTACID	F	OTC
clarithromycin er	NP	PA

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clarithromycin oral suspension reconstituted	P	
clarithromycin oral tablet	P	QL
cvs antacid extra strength oral tablet chewable 750 mg	F	OTC
cvs antacid kids	F	OTC
cvs antacid maximum strength	F	OTC
cvs antacid ultra strength	F	OTC
cvs anti-diarrheal oral suspension	F	OTC
CVS CHEWY NOT CHALKY FLAVOR	F	OTC
cvs smooth antacid extra st	F	OTC
cvs stomach relief max st	F	OTC
cvs stomach relief oral suspension 525 mg/15ml, 525 mg/30ml	F	OTC
cvs stomach relief oral tablet	F	OTC
cvs stomach relief oral tablet chewable	F	OTC
diarrhea	F	OTC
eq antacid oral tablet chewable	F	OTC
eq pink-bismuth	F	OTC
eq stomach relief oral suspension	F	OTC
eql antacid	F	OTC
eql stomach relief oral suspension 262 mg/15ml	F	OTC
eql stomach relief oral tablet chewable	F	OTC
FLAGYL ORAL CAPSULE	NP	PA
gnp antacid oral tablet chewable 500 mg	F	OTC
gnp antacid ultra strength	F	OTC
gnp pink bismuth oral tablet	F	OTC
gnp pink bismuth oral tablet chewable	F	OTC
gnp stomach relief	F	OTC
gnp stomach relief ultra	F	OTC
goodsense antacid oral tablet chewable 500 mg, 750 mg	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
goodsense stomach relief oral suspension 525 mg/30ml	F	OTC
goodsense stomach relief oral tablet chewable	F	OTC
HEALTHY MAMA TAME THE FLAME	F	OTC
hm antacid extra strength	F	OTC
hm antacid oral tablet chewable	F	OTC
hm antacid regular strength	F	OTC
hm calcium antacid ex st	F	OTC
hm stomach relief oral tablet chewable	F	OTC
hm stomach relief ultra	F	OTC
KAOPECTATE EXTRA STRENGTH	F	OTC
KAOPECTATE ORAL TABLET	F	OTC
LIKMEZ	NP	PA; QL
long lasting antacid	F	OTC
magnesium oxide (antacid) oral tablet	F	OTC
magnesium oxide oral tablet 400 mg, 420 mg	F	OTC
MAOX	F	OTC
metronidazole oral capsule	NP	PA
metronidazole oral tablet	P	
peptic relief oral tablet chewable	F	OTC
PEPTO-BISMOL MAX STRENGTH	F	OTC
PEPTO-BISMOL ORAL SUSPENSION 262 MG/15ML	F	OTC
PEPTO-BISMOL ORAL TABLET	F	OTC
PEPTO-BISMOL ORAL TABLET CHEWABLE	F	OTC
PEPTO-BISMOL TO-GO	F	OTC
px antacid extra strength	F	OTC
px antacid maximum strength oral tablet chewable	F	OTC
px calcium antacid	F	OTC
px stomach relief	F	OTC

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px stomach relief max st	F	OTC
qc antacid extra strength	F	OTC
qc antacid oral tablet chewable	F	OTC
qc diarrhea relief	F	OTC
qc pink bismuth oral tablet chewable	F	OTC
qc stomach relief oral tablet chewable	F	OTC
ra antacid	F	OTC
ra stomach relief oral suspension	F	OTC
sb antacid	F	OTC
sb antacid extra strength	F	OTC
sm antacid oral tablet chewable	F	OTC
sm calcium antacid	F	OTC
sm calcium antacid ex st	F	OTC
sm stomach relief oral suspension 525 mg/30ml	F	OTC
sm stomach relief oral tablet	F	OTC
sm stomach relief oral tablet chewable	F	OTC
sodium bicarbonate oral tablet 325 mg, 650 mg	F	OTC
SOOTHE ORAL SUSPENSION 262 MG/15ML	F	OTC
SOOTHE ORAL TABLET	F	OTC
SOOTHE ORAL TABLET CHEWABLE	F	OTC
stomach relief extra strength	F	OTC
stomach relief oral suspension 525 mg/15ml	F	OTC
stomach relief oral tablet	F	OTC
stomach relief oral tablet chewable	F	OTC
stomach relief ultra	F	OTC
TUMS	F	OTC
TUMS CHEWY BITES	F	OTC
TUMS E-X 750	F	OTC
TUMS EXTRA STRENGTH 750	F	OTC
TUMS LASTING EFFECTS	F	OTC

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TUMS SMOOTHIES	F	OTC
TUMS ULTRA 1000	F	OTC
<b>Cathartics And Laxatives</b>		
ACID GONE ORAL SUSPENSION	F	OTC
ALOPHEN	F	OTC
aspirin buf(cacarb-mgcarb-mgo)	F	OTC; AL
BEELITH	F	OTC
bisacodyl ec	F	
bisacodyl oral	F	OTC
bisacodyl rectal	F	OTC
BUFFERIN	F	OTC; AL
CITROMA	F	OTC
COLACE 2-IN-1	F	OTC
COLACE CLEAR	F	OTC
COLACE ORAL CAPSULE 100 MG	F	OTC
CORRECTOL	F	OTC
CULTURELLE HEALTH (INULIN)	F	OTC
cvs bisacodyl oral	F	OTC
cvs citrate of magnesia	F	OTC
cvs enema disposable rectal enema 7-19 gm/118ml	F	OTC
cvs enema ready-to-use	F	OTC
cvs gentle laxative	F	OTC
cvs gentle laxative womens	F	OTC
cvs laxative dietary supplemnt	F	OTC
cvs laxative pills max st	F	OTC
cvs magnesium citrate oral solution	F	OTC
cvs milk of magnesia	F	OTC
cvs mineral oil enema	F	OTC
cvs natural daily fiber oral powder 43 %, 48.57 %	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
CVS PURELAX ORAL POWDER	F	OTC
cvs stool softener oral capsule 100 mg, 250 mg, 50 mg	F	OTC
cvs stool softener/laxative	F	OTC
docqlace	F	OTC
DOCU LIQUID	F	OTC
docu oral liquid	F	OTC
docuprene	F	OTC
docusate calcium	F	OTC
docusate mini	F	OTC
docusate sodium oral capsule 100 mg	F	OTC
docusate sodium oral capsule 250 mg	F	
docusate sodium oral liquid 100 mg/10ml, 50 mg/5ml	F	OTC
docusate sodium oral tablet	F	OTC
DOCUSOL MINI	F	OTC
docuzen	F	OTC
DOK ORAL CAPSULE 100 MG	F	OTC
DOK ORAL TABLET	F	OTC
dss	F	OTC
DULCOLAX ORAL	F	OTC
DULCOLAX PINK LAXATIVE	F	OTC
DULCOLAX PINK STOOL SOFTENER	F	OTC
easy-lax	F	OTC
easy-lax plus	F	OTC
enema	F	OTC
enema disposable rectal	F	OTC
enema pediatric	F	OTC
enema ready-to-use	F	OTC
ENEMEEZ MINI	F	OTC
ENEMEEZ PLUS	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
EQ CLEARLAX	F	OTC
eq laxative maximum strength	F	OTC
eq magnesium citrate	F	OTC
eq natural laxative	F	OTC
eq natural vegetable laxative	F	OTC
eq stool softener/laxative	F	OTC
eq vegetable laxative	F	OTC
EQL CLEARLAX	F	OTC
eql fiber therapy oral powder 43 %, 48.57 %	F	OTC
eql gentle laxative	F	OTC
eql magnesium citrate	F	OTC
eql milk of magnesia oral suspension 1200 mg/15ml	F	OTC
eql ready-to-use enema	F	OTC
eql senna laxative	F	OTC
eql senna-s	F	OTC
eql stool softener/stimulant	F	OTC
EVAC-U-GEN ORAL TABLET	F	OTC
EX-LAX MAXIMUM STRENGTH	F	OTC
FLEET ENEMA	F	OTC
FLEET OIL	F	OTC
FLEET PEDIATRIC	F	OTC
gavilax oral powder	F	OTC
GAVILYTE-C	F	
GAVILYTE-G	F	
GAVILYTE-N WITH FLAVOR PACK	F	
GAVISCON ORAL SUSPENSION	F	OTC
gentle laxative	F	OTC
geri-kot	F	OTC
GLYCOLAX	F	OTC

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GNP BISA-LAX ORAL	F	OTC
GNP CLEARLAX ORAL POWDER	F	OTC
gnp enema rectal enema	F	OTC
gnp fiber	F	OTC
gnp gentle laxative oral	F	OTC
gnp magnesium citrate	F	OTC
gnp milk of magnesia	F	OTC
gnp natural fiber oral powder 48.57 %	F	OTC
gnp senna lax	F	OTC
gnp senna plus	F	OTC
gnp stool softener oral capsule 100 mg	F	OTC
gnp womens gentle laxative	F	OTC
goodsense bisacodyl ec	F	OTC
goodsense bisacodyl laxative	F	OTC
GOODSENSE CLEARLAX	F	OTC
goodsense milk of magnesia	F	OTC
goodsense senna laxative oral tablet 8.6 mg	F	OTC
goodsense stimulant laxative	F	OTC
HEALTHY MAMA MOVE IT ALONG	F	OTC
hm enema	F	OTC
hm enema mineral oil	F	OTC
hm gentle laxative	F	OTC
hm laxative oral	F	OTC
hm magnesium citrate	F	OTC
hm milk of magnesia	F	OTC
kp bisacodyl	F	OTC
kp senna	F	OTC
laxa basic oral capsule 100 mg	F	OTC
laxative oral tablet delayed release	F	OTC
laxative pills oral tablet 15 mg	F	OTC

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laxative regular strength	F	OTC
magnesium citrate oral solution 1.745 gm/30ml	F	OTC
METAMUCIL ORAL POWDER 48.57 %	F	OTC
milk of magnesia oral suspension 1200 mg/15ml, 2400 mg/30ml, 400 mg/5ml	F	OTC
na sulfate-k sulfate-mg sulf oral solution 17.5-3.13-1.6 gm/177ml	F	QL
natural fiber therapy oral powder 30 %	F	OTC
natural senna laxative oral tablet 8.6 mg	F	OTC
NEPHRON FA	F	
ONELAX	F	OTC
ONELAX MAGNESIUM CITRATE	F	OTC
ONELAX SENNA	F	OTC
peg 3350 oral powder	F	OTC
peg 3350-kcl-na bicarb-nacl	F	
peg-3350/electrolytes	F	
PERDIEM OVERNIGHT RELIEF	F	OTC
PHILLIPS ORAL TABLET	F	OTC
polyethylene glycol 3350 oral powder	F	
polyethylene glycol 3350 powder	F	
prenatal 19 oral tablet	F	OTC; QL; AL
PROMOLAXIN	F	OTC
psyldex	F	OTC
px docusate sodium	F	OTC
px laxative	F	OTC
px milk of magnesia	F	OTC
qc enema	F	OTC
qc gentle laxative rectal	F	OTC
qc magnesium citrate	F	OTC
qc milk of magnesia	F	OTC
qc natural vegetable laxative	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
qc natura-lax	F	OTC
qc stool softener oral capsule 100 mg	F	OTC
qc stool softener pls laxative oral tablet 8.6-50 mg	F	OTC
qc vegetable laxative	F	OTC
ra enema	F	OTC
ra laxative oral powder	F	OTC
ra laxative oral tablet delayed release	F	OTC
ra magnesium citrate	F	OTC
ra milk of magnesia oral suspension	F	OTC
ra p col-rite	F	OTC
ra womens laxative	F	OTC
sb fib lax orange oral powder 30 %	F	OTC
sb senna-lax	F	OTC
se-natal 19 oral tablet	F	QL; AL
senna oral capsule	F	OTC
senna oral liquid	F	OTC
senna oral syrup 8.8 mg/5ml	F	
senna plus oral tablet	F	OTC
senna-docusate sodium	F	OTC
senna-lax	F	OTC
senna-plus	F	OTC
senna-tabs	F	OTC
senna-time	F	OTC
senna-time s	F	OTC
senosides-docusate sodium	F	OTC
SEKOKOT	F	OTC
SEKOKOT EXTRA STRENGTH	F	OTC
SEKOKOT S	F	OTC
SM CLEARLAX	F	OTC
sm enema rectal enema 7-19 gm/118ml	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
sm gentle laxative	F	OTC
sm magnesium citrate	F	OTC
sm milk of magnesia oral suspension 1200 mg/15ml	F	OTC
sm mineral oil rectal	F	OTC
sm natural laxative/stool soft	F	OTC
sm senna-s	F	OTC
sm stool softener oral capsule 100 mg	F	OTC
sm stool softener oral tablet	F	OTC
sm stool softener/laxative	F	OTC
stimulant laxative oral tablet	F	OTC
stool softener laxative oral capsule	F	OTC
stool softener oral tablet	F	OTC
stool softener plus laxative	F	OTC
stool softener/laxative oral tablet	F	OTC
tri-buffered aspirin oral tablet 325 mg	F	OTC; AL
vegetable lax+stool softener	F	OTC
WAL-MUCIL ORAL POWDER 43 %, 48.57 %	F	OTC
womans laxative oral tablet delayed release	F	OTC
<b>Cholelitholytic Agents</b>		
RELTONE	NP	PA; 102 day supply allowed
URSO 250	NP	PA; 102 day supply allowed
URSO FORTE	NP	PA; 102 day supply allowed
ursodiol oral capsule 300 mg	P	102 day supply allowed
ursodiol oral capsule 400 mg	NP	PA
ursodiol oral tablet	P	102 day supply allowed
<b>Digestants</b>		
acidoll	Carve-out	OTC
ACIGEST	Carve-out	OTC
ACIGEST II	Carve-out	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
betaine hcl oral capsule 650-2-130 mg	Carve-out	OTC
CREON	P-PA	PA; 102 day supply allowed
cvs dairy relief	Carve-out	OTC
cvs dairy relief ex st	Carve-out	OTC
cvs dairy relief fast acting oral tablet	Carve-out	OTC
cvs lactase	Carve-out	OTC
cvs lactase enzyme ultra str	Carve-out	OTC
dairy digestive oral tablet 9000 unit	Carve-out	OTC
dairy digestive ultra	Carve-out	OTC
dairy relief	Carve-out	OTC
digest ii	Carve-out	OTC
digestive enzyme	Carve-out	OTC
digestive enzymes oral capsule	Carve-out	OTC
digestive enzymes oral tablet	Carve-out	OTC
enzymatic digestant	Carve-out	OTC
enzyme digest	Carve-out	OTC
eq dairy digestive fast acting	Carve-out	OTC
eql dairy digest fast acting	Carve-out	OTC
eql digestive enzymes	Carve-out	OTC
GASTRACID	Carve-out	OTC
gnp dairy relief	Carve-out	OTC
gnp fast acting dairy relief	Carve-out	OTC
kls fast acting lactase	Carve-out	OTC
LAC-DOSE	Carve-out	OTC
LACTAID FAST ACT	Carve-out	OTC
LACTAID ORAL TABLET	Carve-out	OTC
lactase	Carve-out	OTC
lactase enzyme	Carve-out	OTC
lactase fast acting	Carve-out	OTC
lactose fast acting relief	Carve-out	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
panplex 2-phase oral tablet delayed release	Carve-out	OTC
PERTZYE	NP	PA; 102 day supply allowed
px dairy digestive	Carve-out	OTC
ra dairy aid	Carve-out	OTC
ra dairy relief fast acting oral tablet chewable	Carve-out	OTC
sb dairy relief	Carve-out	OTC
sb lactase	Carve-out	OTC
sm ultra dairy digestive	Carve-out	OTC
surelac	Carve-out	OTC
tgt dairy digestive aid	Carve-out	OTC
VIKACE	NP	PA; 102 day supply allowed
XYMOZYME	Carve-out	OTC
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 10000-32000 UNIT, 15000-47000 UNIT, 20000-63000 UNIT, 25000-79000 UNIT, 3000-10000 UNIT, 40000-126000 UNIT, 5000-24000 UNIT, 60000-189600 UNIT	P-PA	PA; 102 day supply allowed
<b>Gi Drugs, Miscellaneous</b>		
ABRILADA (1 PEN)	NP	PA; Specialty Drug
ABRILADA (2 PEN)	NP	PA; Specialty Drug
ABRILADA (2 SYRINGE)	NP	PA; Specialty Drug
adalimumab-adaz	NP	PA; Specialty Drug
adalimumab-fkjp	NP	PA; Specialty Drug
AMITIZA	P	
AMJEVITA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.8ML	NP	PA
AMJEVITA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.8ML	NP	PA
AMJEVITA-PED 10KG TO <15KG	NP	PA
AMJEVITA-PED 15KG TO <30KG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/0.4ML	NP	PA

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
BYLVAY	Carve-out	
BYLVAY (PELLETS)	Carve-out	
CIMZIA (2 SYRINGE)	NP	PA; Specialty Drug
CIMZIA STARTER KIT SUBCUTANEOUS PREFILLED SYRINGE KIT	NP	PA; Specialty Drug
CIMZIA SUBCUTANEOUS KIT 2 X 200 MG	NP	PA; Specialty Drug
CIMZIA SUBCUTANEOUS PREFILLED SYRINGE KIT	NP	PA; Specialty Drug
CYLTEZO (2 SYRINGE)	NP	PA; Specialty Drug
ENTYVIO	NP	PA; Specialty Drug
HADLIMA	NP	PA; Specialty Drug
HADLIMA PUSHTOUCH	NP	PA; Specialty Drug
HULIO	NP	PA; Specialty Drug
HULIO (2 PEN)	NP	PA; Specialty Drug
HULIO (2 SYRINGE)	NP	PA; Specialty Drug
HUMIRA (2 PEN) SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.4ML	P	Specialty Drug
HUMIRA (2 PEN) SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML, 80 MG/0.8ML	P	
HUMIRA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.1ML, 20 MG/0.2ML, 40 MG/0.4ML, 40 MG/0.8ML	P	Specialty Drug
HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT	P	
HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.8ML	P	Specialty Drug
HUMIRA-CD/UC/HS STARTER	P	Specialty Drug
HUMIRA-PED<40KG CROHNS STARTER	P	Specialty Drug
HUMIRA-PED>=40KG CROHNS START	P	Specialty Drug
HUMIRA-PED>=40KG UC STARTER	P	
HUMIRA-PS/UV/ADOL HS STARTER	P	Specialty Drug
HUMIRA-PSORIASIS/UEVIT STARTER	P	Specialty Drug

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
HYRIMOZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.4ML, 80 MG/0.8ML	NP	PA; Specialty Drug
HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.1 ML, 20 MG/0.2ML, 40 MG/0.4ML	NP	PA; Specialty Drug
HYRIMOZ-CROHNS/UC STARTER	NP	PA; Specialty Drug
HYRIMOZ-PED<40KG CROHN STARTER	NP	PA; Specialty Drug
HYRIMOZ-PED>/=40KG CROHN START	NP	PA; Specialty Drug
HYRIMOZ-PLAQUE PSORIASIS START	NP	PA; Specialty Drug
IBSRELA	NP	PA; QL; AL
IDACIO (2 PEN)	NP	PA; Specialty Drug
IDACIO (2 SYRINGE)	NP	PA; Specialty Drug
IDACIO-CROHNS/UC STARTER	NP	PA; Specialty Drug
IDACIO-PSORIASIS STARTER	NP	PA; Specialty Drug
LINZESS	P	
LIVMARLI	Carve-out	
lubiprostone	NP	PA
MOTEGRITY	NP	PA
MOVANTIK	NP	PA
octreotide acetate injection solution 100 mcg/ml, 50 mcg/ml	F	PA
octreotide acetate injection solution 1000 mcg/ml, 200 mcg/ml	F	PA; Specialty Drug
orlistat oral	P-PA	PA; AL
RELISTOR ORAL	NP	PA
RELISTOR SUBCUTANEOUS SOLUTION 12 MG/0.6ML, 8 MG/0.4ML	NP	PA
SIMPONI ARIA	NP	PA; Specialty Drug
SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR	NP	PA; Specialty Drug

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SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	NP	PA; Specialty Drug
SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE	NP	PA; Specialty Drug
STELARA INTRAVENOUS	NP	PA; Specialty Drug
SYMPROIC	NP	PA
TRULANCE	NP	PA
VIBERZI	NP	PA; QL
XENICAL	P-PA	PA; AL
YUFLYMA (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML	NP	PA; Specialty Drug
YUFLYMA (2 PEN)	NP	PA; Specialty Drug
YUFLYMA (2 SYRINGE)	NP	PA; Specialty Drug
YUSIMRY	NP	PA; Specialty Drug
<b>Histamine H2-Antagonists</b>		
acid reducer oral tablet 10 mg	F	OTC
cimetidine 200	F	OTC
cimetidine hcl oral	F	
cimetidine oral	F	
DUEXIS	NP	PA
eq acid reducer oral tablet 10 mg	F	OTC
eq famotidine max st	F	OTC
famotidine maximum strength	F	OTC
famotidine oral suspension reconstituted	F	QL; AL
famotidine oral tablet 10 mg	F	OTC
famotidine oral tablet 20 mg, 40 mg	F	
famotidine orig st	F	OTC
heartburn relief oral tablet 10 mg	F	OTC
hm famotidine	F	OTC
ibuprofen-famotidine	NP	PA
px acid reducer max st oral tablet 20 mg	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
px acid reducer oral tablet 10 mg	F	OTC
ra acid reducer max st oral tablet 20 mg	F	OTC
ra acid reducer oral tablet 10 mg	F	OTC
sm acid reducer max st oral tablet 20 mg	F	OTC
<b>Immunomodulatory Agent</b>		
ENTYVIO	NP	PA; Specialty Drug
VELSIPITY	NP	PA; Specialty Drug; AL
<b>Lipotropic Agents</b>		
b complex formula 1 (lipotrop)	F	OTC
balanced b-50 complex	F	OTC
b-stress	F	OTC
complex b-100-inositol	F	OTC
<b>Neurokinin-1 Receptor Antagonists</b>		
AKYNZEO ORAL	NP	PA; Specialty Drug; QL
aprepitant oral	NP	PA; AL
aprepitant oral capsule 125 mg, 40 mg	NP	PA; QL; AL
aprepitant oral capsule 80 & 125 mg, 80 mg	NP	PA; AL
EMEND ORAL CAPSULE 80 MG	P	QL; AL
EMEND ORAL SUSPENSION RECONSTITUTED	NP	PA; AL
EMEND TRI-PACK	NP	PA; QL; AL
<b>Prokinetic Agents</b>		
metoclopramide hcl oral solution 10 mg/10ml, 5 mg/5ml	F	
metoclopramide hcl oral tablet	F	
<b>Prostaglandins</b>		
ARTHROTEC ORAL TABLET DELAYED RELEASE	NP	PA
diclofenac-misoprostol oral tablet delayed release	NP	PA
misoprostol oral	F	QL

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
<b>Protectants</b>		
sucralfate oral tablet	F	QL
<b>Proton-Pump Inhibitors</b>		
acid reducer oral capsule delayed release	NP	PA; OTC
ACIPHEX	NP	PA
amoxicill-clarithro-lansopraz oral therapy pack	NP	PA; QL
cvs esomeprazole magnesium	NP	PA; OTC
cvs lansoprazole oral tablet delayed release dispersible	NP	PA; OTC
cvs omeprazole magnesium	NP	PA; OTC
cvs omeprazole oral tablet delayed release	NP	PA; OTC
cvs omeprazole oral tablet delayed release dispersible	NP	PA; OTC
cvs omeprazole-sod bicarbonate	NP	PA; OTC
DEXILANT	NP	PA
dexlansoprazole	NP	PA
eq omeprazole	NP	PA; OTC
eq omeprazole magnesium	NP	PA; OTC
eq1 omeprazole	NP	PA; OTC
esomeprazole magnesium oral capsule delayed release	NP	PA
esomeprazole magnesium oral packet	NP	PA; QL
esomeprazole magnesium oral tablet delayed release	NP	PA; OTC
gnp omeprazole	NP	PA; OTC
GOODSENSE ESOMEPRAZOLE	NP	PA; OTC
goodsense lansoprazole oral capsule delayed release	NP	PA; OTC
hm esomeprazole magnesium dr	NP	PA; OTC
hm lansoprazole	NP	PA; OTC
hm omeprazole	NP	PA; OTC

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
kls esomeprazole magnesium	NP	PA; OTC
KONVOMEF	NP	PA
lansoprazole oral capsule delayed release	NP	PA
lansoprazole oral tablet delayed release dispersible	NP	PA
naproxen-esomeprazole mg	NP	PA
NEXIUM 24HR CLEAR MINIS	NP	PA; OTC
NEXIUM 24HR ORAL CAPSULE DELAYED RELEASE	NP	PA; OTC
NEXIUM ORAL CAPSULE DELAYED RELEASE	NP	PA
NEXIUM ORAL PACKET	P	QL
OMECLAMOX-PAK	NP	PA
omeprazole magnesium	NP	PA; OTC
omeprazole oral capsule delayed release	P	QL
omeprazole oral tablet delayed release	NP	PA; OTC
omeprazole oral tablet delayed release dispersible	NP	PA; OTC
omeprazole-sodium bicarbonate	NP	PA
pantoprazole sodium oral packet	NP	PA; QL
pantoprazole sodium oral tablet delayed release	P	QL
PREVACID	NP	PA
PREVACID 24HR	NP	PA; OTC
PREVACID SOLUTAB ORAL TABLET DELAYED RELEASE DISPERSIBLE	NP	PA
PRILOSEC ORAL PACKET	NP	PA
PROTONIX ORAL	P	QL
px omeprazole	NP	PA; OTC
qc esomeprazole magnesium	NP	PA; OTC
qc omeprazole magnesium	NP	PA; OTC
ra esomeprazole magnesium	NP	PA; OTC
ra omeprazole	NP	PA; OTC

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
rabeprazole sodium oral tablet delayed release	NP	PA
sm esomeprazole magnesium	NP	PA; OTC
sm lansoprazole	NP	PA; OTC
sm omeprazole	NP	PA; OTC
VIMOVO	NP	PA
ZEGERID	NP	PA
<b>Heavy Metal Antagonists</b>		
<b>Heavy Metal Antagonists</b>		
CHEMET	F	
<b>Hormones And Synthetic Substitutes</b>		
<b>Adrenals</b>		
ADVAIR DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100-50 MCG/ACT, 250-50 MCG/ACT, 500-50 MCG/ACT	P	102 day supply allowed; QL
ADVAIR HFA	P	102 day supply allowed; QL
A-HYDROCORT	F	
AIRDUO DIGIHALER	NP	PA; 102 day supply allowed; QL
AIRDUO RESPICLICK 113/14	NP	PA; 102 day supply allowed; QL
AIRDUO RESPICLICK 232/14	NP	PA; 102 day supply allowed; QL
AIRDUO RESPICLICK 55/14	NP	PA; 102 day supply allowed; QL
AIRSUPRA	NP	PA; 102 day supply allowed; QL
ALKINDI SPRINKLE	F	
allergy relief nasal	NP	PA; OTC
ALVESCO	P	
A-METHAPRED	F	
ARMONAIR DIGIHALER	NP	PA
ARNUITY ELLIPTA	NP	PA
ASMALPRED	F	
ASMALPRED PLUS	F	

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
ASMANEX (120 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/ACT	P	QL
ASMANEX (14 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/ACT	P	QL
ASMANEX (30 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 110 MCG/ACT	P	QL; AL
ASMANEX (30 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/ACT	P	QL
ASMANEX (60 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/ACT	P	QL
ASMANEX HFA	NP	PA; QL
BAYCADRON	F	
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-25 MCG/ACT, 200-25 MCG/ACT, 50-25 MCG/INH	NP	PA; 102 day supply allowed; QL
BREYNA	NP	PA; 102 day supply allowed; QL
BREZTRI AEROSPHERE	NP	PA; 102 day supply allowed; QL
budesonide er oral tablet extended release 24 hour	NP	PA
budesonide inhalation	P	QL
budesonide oral	F	PA
budesonide-formoterol fumarate	NP	PA; 102 day supply allowed; QL
CORTEF	F	
DECADRON	F	
deflazacort	F	Specialty Drug
DELTASONE	F	
DEPO-MEDROL	F	
DEXAMETHASONE INTENSOL	F	
dexamethasone oral	F	

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
dexamethasone sod phosphate pf	F	
dexamethasone sodium phosphate injection	F	
DEXPAK 10 DAY ORAL TABLET THERAPY PACK	F	
DEXPAK 13 DAY ORAL TABLET THERAPY PACK	F	
DEXPAK 6 DAY ORAL TABLET THERAPY PACK	F	
DULERA	P	102 day supply allowed; QL
EMFLAZA	F	Specialty Drug
FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/ACT, 250 MCG/ACT, 50 MCG/ACT	NP	PA
fludrocortisone acetate oral	F	
flunisolide nasal solution 25 mcg/act (0.025%)	NP	PA
fluticasone furoate-vilanterol inhalation aerosol powder breath activated 100-25 mcg/act, 200-25 mcg/act	NP	PA; 102 day supply allowed; QL
fluticasone propionate diskus	NP	PA
fluticasone propionate hfa inhalation aerosol 110 mcg/act, 220 mcg/act	P	102 day supply allowed; QL
fluticasone propionate hfa inhalation aerosol 44 mcg/act	P	PA; 102 day supply allowed; QL
fluticasone propionate nasal	P	
fluticasone-salmeterol inhalation aerosol	P	102 day supply allowed; QL
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	P	102 day supply allowed; QL
fluticasone-salmeterol inhalation aerosol powder breath activated 113-14 mcg/act, 232-14 mcg/act, 55-14 mcg/act	NP	PA; 102 day supply allowed; QL
HEMADY	F	
HIDEX 6-DAY	F	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
hm allergy relief nasal	NP	PA; OTC
hydrocortisone oral	F	
KENALOG INJECTION	F	
KENALOG-40	F	
LOCORT 7-DAY	F	
MEDROL	F	
methylprednisolone acetate injection suspension 40 mg/ml, 80 mg/ml	F	
methylprednisolone oral	F	
methylprednisolone sodium succ injection	F	
MILLIPRED	F	
MILLIPRED DP 12-DAY ORAL TABLET THERAPY PACK	F	
MILLIPRED DP ORAL TABLET THERAPY PACK	F	
mometasone furoate nasal	NP	PA
NASONEX 24HR	NP	PA; OTC
ORAPRED	F	
ORAPRED ODT	F	
PEDIAPRED	F	
prednisolone oral solution	F	
prednisolone oral syrup 15 mg/5ml	F	
prednisolone oral tablet	F	
prednisolone sodium phosphate oral solution 10 mg/5ml, 15 mg/5ml, 20 mg/5ml, 25 mg/5ml, 6.7 (5 base) mg/5ml	F	
prednisolone sodium phosphate oral tablet dispersible	F	
PREDNISON INTENSOL	F	
prednisone oral solution	F	
prednisone oral tablet	F	

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
prednisone oral tablet therapy pack 10 mg (21), 5 mg (21)	F	
prednisone oral tablet therapy pack 10 mg (48)	F	Specialty Drug
PRELONE	F	
PULMICORT	NP	PA; QL
PULMICORT FLEXHALER	NP	PA; 102 day supply allowed; QL
qc allergy relief nasal	NP	PA; OTC
QVAR REDHALER	NP	PA
RAYOS	F	
RYALTRIS	NP	PA
sm allergy relief nasal	NP	PA; OTC
SOLU-CORTEF	F	
SOLU-MEDROL	F	
SOLU-MEDROL (PF)	F	
SYMBICORT	P	102 day supply allowed; QL
TAPERDEX 12-DAY	F	
TAPERDEX 6-DAY	F	
TAPERDEX 7-DAY ORAL TABLET THERAPY PACK 1.5 MG (27)	F	
TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-62.5-25 MCG/ACT, 200-62.5-25 MCG/ACT	P	102 day supply allowed; QL
triamcinolone acetonide injection suspension 10 mg/ml, 40 mg/ml	F	
UCERIS ORAL	NP	PA
VERIPRED 20	F	
WIXELA INHUB INHALATION AEROSOL POWDER BREATH ACTIVATED 100-50 MCG/ACT, 250-50 MCG/ACT, 500-50 MCG/ACT	P	102 day supply allowed; QL
XHANCE	NP	PA
ZODEX 12-DAY	F	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
ZODEX 6-DAY	F	
ZONACORT 7 DAY	F	
<b>Alpha-Glucosidase Inhibitors</b>		
acarbose oral	P	102 day supply allowed
miglitol	P	102 day supply allowed
PRECOSE	NP	PA; 102 day supply allowed
<b>Amylinomimetics</b>		
SYMLINPEN 120 SUBCUTANEOUS SOLUTION PEN-INJECTOR	P	102 day supply allowed
SYMLINPEN 60 SUBCUTANEOUS SOLUTION PEN-INJECTOR	P	102 day supply allowed
<b>Androgens</b>		
ANDRODERM TRANSDERMAL PATCH 24 HOUR	NP	PA
ANDROGEL	NP	PA
ANDROGEL PUMP TRANSDERMAL GEL 20.25 MG/ACT (1.62%)	NP	PA
danazol oral	F	
FORTESTA	NP	PA
NATESTO	NP	PA
testosterone cypionate intramuscular solution 100 mg/ml, 200 mg/ml	F	
testosterone transdermal gel 1.62 %, 20.25 mg/act (1.62%)	P-PA	PA
testosterone transdermal gel 10 mg/act (2%), 12.5 mg/act (1%), 20.25 mg/1.25gm (1.62%), 25 mg/2.5gm (1%), 40.5 mg/2.5gm (1.62%), 50 mg/5gm (1%)	NP	PA
testosterone transdermal solution	NP	PA
VOGELXO PUMP	NP	PA
VOGELXO TRANSDERMAL GEL 50 MG/5GM (1%)	NP	PA

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
<b>Antidiabetic Agents, Miscellaneous</b>		
colesevelam hcl	NP	PA; 102 day supply allowed
WELCHOL	NP	PA; 102 day supply allowed
<b>Antiestrogens</b>		
anastrozole oral	F	
ARIMIDEX	F	
AROMASIN	F	
exemestane	F	
FEMARA	F	
KISQALI FEMARA (200 MG DOSE)	F	
KISQALI FEMARA (400 MG DOSE)	F	
KISQALI FEMARA (600 MG DOSE)	F	
letrozole oral	F	
<b>Antigonadotropins</b>		
MYFEMBREE	P	PA; QL; AL
ORGOVYX	F	Specialty Drug
ORIAHNN	P-PA	PA; QL; AL
ORILISSA	P-PA	PA; QL; AL
<b>Antihypoglycemic Agents, Miscellaneous</b>		
diazoxide oral	NP	PA
PROGLYCEM	P	
<b>Antiparathyroid Agents</b>		
calcitonin (salmon) nasal	P	Specialty Drug
cinacalcet hcl	F	PA; Specialty Drug; QL
<b>Antithyroid Agents</b>		
methimazole oral	F	
propylthiouracil oral	F	
TAPAZOLE	F	

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
<b>Biguanides</b>		
ACTOPLUS MET	NP	PA; 102 day supply allowed
alogliptin-metformin hcl	NP	PA; 102 day supply allowed
dapagliflozin pro-metformin er	NP	PA; 102 day supply allowed
glipizide-metformin hcl	NP	PA; 102 day supply allowed
GLUMETZA	NP	PA; 102 day supply allowed
glyburide-metformin	P	102 day supply allowed
INVOKAMET	P	102 day supply allowed
INVOKAMET XR	NP	PA; 102 day supply allowed
JANUMET	P	102 day supply allowed; QL
JANUMET XR	P	102 day supply allowed
JENTADUETO	P	102 day supply allowed
JENTADUETO XR	NP	PA; 102 day supply allowed
KAZANO	NP	PA; 102 day supply allowed
KOMBIGLYZE XR	NP	PA; 102 day supply allowed
metformin hcl er	P	102 day supply allowed
metformin hcl er (mod)	NP	PA; 102 day supply allowed
metformin hcl er (osm) oral tablet extended release 24 hour 1000 mg, 500 mg	NP	PA; 102 day supply allowed
metformin hcl oral solution	NP	PA; 102 day supply allowed
metformin hcl oral tablet	P	102 day supply allowed
pioglitazone hcl-metformin hcl	NP	PA; 102 day supply allowed
RIOMET	NP	PA; 102 day supply allowed
saxagliptin-metformin er	NP	PA; 102 Day Supply allowed
SEGLUROMET	NP	PA; 102 day supply allowed
SYNJARDY	P	102 day supply allowed
SYNJARDY XR	NP	PA
TRIJARDY XR	NP	PA
XIGDUO XR	P	102 day supply allowed
<b>Contraceptives</b>		

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
AFIRMELLE	F	102 day supply allowed
AFTERA	F	OTC
alyacen 1/35	F	12 month supply allowed
alyacen 7/7/7	F	12 month supply allowed
APRI	F	12 month supply allowed
ARANELLE	F	12 month supply allowed
AUBRA EQ	F	102 day supply allowed
AUROVELA 1.5/30	F	102 day supply allowed
AUROVELA 1/20	F	102 day supply allowed
AUROVELA FE 1.5/30	F	102 day supply allowed
AUROVELA FE 1/20	F	102 day supply allowed
AVIANE	F	12 month supply allowed
AYUNA	F	102 day supply allowed
AZURETTE	F	12 month supply allowed
BALZIVA	F	12 month supply allowed
BLISOVI 24 FE	F	12 month supply allowed
BLISOVI FE 1.5/30	F	12 month supply allowed
BLISOVI FE 1/20	F	12 month supply allowed
briellyn	F	12 month supply allowed
CAMILA	F	12 month supply allowed
CAZIAN	F	102 day supply allowed
CHARLOTTE 24 FE	F	102 day supply allowed
CHATEAL	F	102 day supply allowed
CHATEAL EQ	F	102 day supply allowed
CRYSSELLE-28	F	12 month supply allowed
CYCLAFEM 1/35	F	102 day supply allowed
CYCLAFEM 7/7/7	F	102 day supply allowed
CYRED	F	102 day supply allowed
CYRED EQ	F	102 day supply allowed
DASETTA 1/35	F	12 month supply allowed

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
DASETTA 7/7/7	F	12 month supply allowed
DEBLITANE	F	12 month supply allowed
desogestrel-ethinyl estradiol	F	12 month supply allowed
drospirenone-ethinyl estradiol	F	12 month supply allowed
ECONTRA EZ	F	12 month supply allowed; OTC
ELINEST	F	12 month supply allowed
ELLA	F	12 month supply allowed
ELURYNG	F	QL
EMOQUETTE	F	12 month supply allowed
ENPRESSE-28	F	12 month supply allowed
ENSKYCE ORAL TABLET 0.15-30 MG-MCG	F	12 month supply allowed
ERRIN	F	12 month supply allowed
ethynodiol diac-eth estradiol oral tablet 1-35 mg-mcg	F	102 day supply allowed
ethynodiol diac-eth estradiol oral tablet 1-50 mg-mcg	F	12 month supply allowed
etonogestrel-ethinyl estradiol	F	12 month supply allowed; QL
FALMINA	F	12 month supply allowed
FEMYNOR	F	102 day supply allowed
FINZALA	F	102 day supply allowed
HAILEY 1.5/30	F	102 day supply allowed
HAILEY FE 1.5/30	F	102 day supply allowed
HAILEY FE 1/20	F	102 day supply allowed
HALOETTE	F	QL
HEATHER	F	12 month supply allowed
ICLEVIA	F	102 day supply allowed
INCASSIA	F	102 day supply allowed
INTROVALE	F	12 month supply allowed
ISIBLOOM	F	12 month supply allowed
JASMIEL	F	102 day supply allowed
JENCYCLA	F	12 month supply allowed

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
JOLESSA	F	12 month supply allowed
JULEBER	F	12 month supply allowed
JUNEL 1.5/30	F	12 month supply allowed
JUNEL 1/20	F	12 month supply allowed
JUNEL FE 1.5/30	F	12 month supply allowed
JUNEL FE 1/20	F	12 month supply allowed
KALLIGA	F	102 day supply allowed
KARIVA	F	12 month supply allowed
KELNOR 1/35	F	12 month supply allowed
KELNOR 1/50	F	102 day supply allowed
KURVELO	F	12 month supply allowed
LARIN 1.5/30	F	12 month supply allowed
LARIN 1/20	F	12 month supply allowed
LARIN FE 1.5/30	F	12 month supply allowed
LARIN FE 1/20	F	12 month supply allowed
LARISSIA	F	12 month supply allowed
LEENA	F	12 month supply allowed
LESSINA	F	12 month supply allowed
LEVONEST	F	12 month supply allowed
levonorgest-eth estrad 91-day oral tablet 0.15-0.03 mg	F	12 month supply allowed
levonorgestrel oral tablet 1.5 mg	F	OTC
levonorgestrel-ethinyl estrad	F	12 month supply allowed
levonorg-eth estrad triphasic oral tablet 50-30/75-40/ 125-30 mcg	F	102 day supply allowed
LILLOW	F	12 month supply allowed
LORYNA	F	12 month supply allowed
LOW-OGESTREL	F	12 month supply allowed
LO-ZUMANDIMINE	F	102 day supply allowed
LUTERA	F	12 month supply allowed
LYLEQ	F	102 day supply allowed

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
LYZA	F	102 day supply allowed
marlissa	F	12 month supply allowed
medroxyprogesterone acetate intramuscular suspension	F	QL
medroxyprogesterone acetate intramuscular suspension prefilled syringe	F	102 day supply allowed; QL
MIBELAS 24 FE	F	12 month supply allowed
MICROGESTIN 1.5/30	F	12 month supply allowed
MICROGESTIN 1/20	F	12 month supply allowed
MICROGESTIN FE 1.5/30	F	12 month supply allowed
MICROGESTIN FE 1/20	F	12 month supply allowed
MILI	F	102 day supply allowed
MONO-LINYAH	F	12 month supply allowed
MY WAY	F	12 month supply allowed; OTC
NIKKI	F	12 month supply allowed
NORA-BE	F	12 month supply allowed
norethin ace-eth estrad-fe oral tablet 1.5-30 mg-mcg	F	102 day supply allowed
norethin ace-eth estrad-fe oral tablet 1-20 mg-mcg	F	12 month supply allowed
norethin ace-eth estrad-fe oral tablet chewable	F	102 day supply allowed
norethindrone acet-ethinyl est oral tablet 1.5-30 mg-mcg	F	102 day supply allowed
norethindrone acet-ethinyl est oral tablet 1-20 mg-mcg	F	12 month supply allowed
norethindrone oral	F	12 month supply allowed
norethindron-ethinyl estrad-fe	F	102 day supply allowed
norethin-eth estradiol-fe	F	12 month supply allowed
norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg	F	12 month supply allowed
norgestim-eth estrad triphasic	F	12 month supply allowed
NORLYDA	F	12 month supply allowed
NORTREL 0.5/35 (28)	F	12 month supply allowed

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PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
NORTREL 1/35 (28)	F	12 month supply allowed
NORTREL 7/7/7	F	12 month supply allowed
NYLIA 1/35	F	102 day supply allowed
NYLIA 7/7/7	F	102 day supply allowed
NYMYO	F	102 day supply allowed
OCELLA	F	12 month supply allowed
OPCICON ONE-STEP	F	12 month supply allowed; OTC
OPILL	F	12 month supply allowed; OTC
ORSYTHIA	F	102 day supply allowed
PHILITH	F	12 month supply allowed
PIMTREA	F	12 month supply allowed
PIRMELLA 1/35	F	12 month supply allowed
PIRMELLA 7/7/7	F	12 month supply allowed
PORTIA-28	F	12 month supply allowed
RECLIPSEN	F	12 month supply allowed
SETLAKIN	F	12 month supply allowed
SHAROBEL	F	12 month supply allowed
SIMLIYA	F	102 day supply allowed
SPRINTEC 28	F	12 month supply allowed
SRONYX	F	12 month supply allowed
TAKE ACTION	F	OTC
TARINA FE 1/20	F	12 month supply allowed
TARINA FE 1/20 EQ	F	102 day supply allowed
TILIA FE	F	12 month supply allowed
TRI FEMYNOR	F	12 month supply allowed
TRI-LEGEST FE	F	12 month supply allowed
TRI-LINYAH	F	12 month supply allowed
TRI-LO-ESTARYLLA	F	102 day supply allowed
TRI-LO-MARZIA	F	12 month supply allowed
TRI-LO-MILI	F	102 day supply allowed

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PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
TRI-LO-SPRINTEC	F	12 month supply allowed
TRI-MILI	F	102 day supply allowed
TRI-NYMYO	F	102 day supply allowed
TRI-SPRINTEC	F	12 month supply allowed
TRIVORA (28)	F	12 month supply allowed
TRI-VYLIBRA	F	102 day supply allowed
TRI-VYLIBRA LO	F	12 month supply allowed
TULANA	F	102 day supply allowed
VELIVET	F	12 month supply allowed
VESTURA	F	12 month supply allowed
viorele	F	12 month supply allowed
VOLNEA	F	102 day supply allowed
VYFEMLA	F	12 month supply allowed
VYLIBRA	F	102 day supply allowed
WERA	F	12 month supply allowed
WYMZYA FE	F	102 day supply allowed
XULANE	F	12 month supply allowed; QL
ZAFEMY	F	12 month supply allowed; QL
ZOVIA 1/35 (28)	F	102 day supply allowed
ZOVIA 1/35E (28)	F	12 month supply allowed
ZUMANDIMINE	F	102 day supply allowed
<b>Dipeptidyl Peptidase-4(Dpp-4) Inhibitors</b>		
alogliptin benzoate	NP	PA; 102 day supply allowed
alogliptin-metformin hcl	NP	PA; 102 day supply allowed
alogliptin-pioglitazone	NP	PA; 102 day supply allowed
GLYXAMBI ORAL TABLET 10-5 MG	NP	PA
GLYXAMBI ORAL TABLET 25-5 MG	NP	PA; 102 day supply allowed
JANUMET	P	102 day supply allowed; QL
JANUMET XR	P	102 day supply allowed

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
JANUVIA	P	102 day supply allowed; QL
JENTADUETO	P	102 day supply allowed
JENTADUETO XR	NP	PA; 102 day supply allowed
KAZANO	NP	PA; 102 day supply allowed
KOMBIGLYZE XR	NP	PA; 102 day supply allowed
NESINA	NP	PA; 102 day supply allowed
ONGLYZA	NP	PA; 102 day supply allowed
OSENI	NP	PA; 102 day supply allowed
QTERN	NP	PA; 102 day supply allowed
saxagliptin hcl	NP	PA; 102 Day Supply allowed
saxagliptin-metformin er	NP	PA; 102 Day Supply allowed
STEGLUJAN	NP	PA; 102 day supply allowed
TRADJENTA	P	102 day supply allowed
TRIJARDY XR	NP	PA
<b>Estrogen Agonist-Antagonists</b>		
EVISTA	NP	PA
FARESTON	F	
raloxifene hcl	P	
SOLTAMOX	F	
tamoxifen citrate oral	F	
toremifene citrate	F	
<b>Estrogens</b>		
AFIRMELLE	F	102 day supply allowed
alyacen 1/35	F	12 month supply allowed
alyacen 7/7/7	F	12 month supply allowed
APRI	F	12 month supply allowed
ARANELLE	F	12 month supply allowed
AUBRA EQ	F	102 day supply allowed
AUROVELA 1.5/30	F	102 day supply allowed
AUROVELA 1/20	F	102 day supply allowed

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
AUROVELA FE 1.5/30	F	102 day supply allowed
AUROVELA FE 1/20	F	102 day supply allowed
AVIANE	F	12 month supply allowed
AYUNA	F	102 day supply allowed
AZURETTE	F	12 month supply allowed
BALZIVA	F	12 month supply allowed
BLISOVI 24 FE	F	12 month supply allowed
BLISOVI FE 1.5/30	F	12 month supply allowed
BLISOVI FE 1/20	F	12 month supply allowed
briellyn	F	12 month supply allowed
CAZIAN	F	102 day supply allowed
CHARLOTTE 24 FE	F	102 day supply allowed
CHATEAL	F	102 day supply allowed
CHATEAL EQ	F	102 day supply allowed
CRYSSELLE-28	F	12 month supply allowed
CYCLAFEM 1/35	F	102 day supply allowed
CYCLAFEM 7/7/7	F	102 day supply allowed
CYRED	F	102 day supply allowed
CYRED EQ	F	102 day supply allowed
DASETTA 1/35	F	12 month supply allowed
DASETTA 7/7/7	F	12 month supply allowed
DELESTROGEN INTRAMUSCULAR OIL 10 MG/ML	F	
DELESTROGEN INTRAMUSCULAR OIL 20 MG/ML, 40 MG/ML	F	Specialty Drug
desogestrel-ethinyl estradiol	F	12 month supply allowed
DOTTI TRANSDERMAL PATCH TWICE WEEKLY 0.05 MG/24HR, 0.075 MG/24HR	F	QL; AL
drospirenone-ethinyl estradiol	F	12 month supply allowed
ELINEST	F	12 month supply allowed
ELURYNG	F	QL

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
EMOQUETTE	F	12 month supply allowed
ENPRESSE-28	F	12 month supply allowed
ENSKYCE ORAL TABLET 0.15-30 MG-MCG	F	12 month supply allowed
estradiol oral	F	AL
estradiol transdermal patch twice weekly	F	QL; AL
estradiol transdermal patch weekly	F	QL; AL
estradiol vaginal cream	F	QL
estradiol vaginal tablet	F	
estradiol valerate intramuscular oil 20 mg/ml, 40 mg/ml	F	102 day supply allowed
estradiol-norethindrone acet	F	AL
ethynodiol diac-eth estradiol oral tablet 1-35 mg-mcg	F	102 day supply allowed
ethynodiol diac-eth estradiol oral tablet 1-50 mg-mcg	F	12 month supply allowed
etonogestrel-ethinyl estradiol	F	12 month supply allowed; QL
FALMINA	F	12 month supply allowed
FEMYNOR	F	102 day supply allowed
FINZALA	F	102 day supply allowed
HAILEY 1.5/30	F	102 day supply allowed
HAILEY FE 1.5/30	F	102 day supply allowed
HAILEY FE 1/20	F	102 day supply allowed
HALOETTE	F	QL
ICLEVIA	F	102 day supply allowed
INTROVALE	F	12 month supply allowed
ISIBLOOM	F	12 month supply allowed
JASMIEL	F	102 day supply allowed
JINTELI	F	AL
JOLESSA	F	12 month supply allowed
JULEBER	F	12 month supply allowed
JUNEL 1.5/30	F	12 month supply allowed

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PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
JUNEL 1/20	F	12 month supply allowed
JUNEL FE 1.5/30	F	12 month supply allowed
JUNEL FE 1/20	F	12 month supply allowed
KALLIGA	F	102 day supply allowed
KARIVA	F	12 month supply allowed
KELNOR 1/35	F	12 month supply allowed
KELNOR 1/50	F	102 day supply allowed
KURVELO	F	12 month supply allowed
LARIN 1.5/30	F	12 month supply allowed
LARIN 1/20	F	12 month supply allowed
LARIN FE 1.5/30	F	12 month supply allowed
LARIN FE 1/20	F	12 month supply allowed
LARISSIA	F	12 month supply allowed
LEENA	F	12 month supply allowed
LESSINA	F	12 month supply allowed
LEVONEST	F	12 month supply allowed
levonorgest-eth estrad 91-day oral tablet 0.15-0.03 mg	F	12 month supply allowed
levonorgestrel-ethinyl estrad	F	12 month supply allowed
levonorg-eth estrad triphasic oral tablet 50-30/75-40/ 125-30 mcg	F	102 day supply allowed
LILLOW	F	12 month supply allowed
LORYNA	F	12 month supply allowed
LOW-OGESTREL	F	12 month supply allowed
LO-ZUMANDIMINE	F	102 day supply allowed
LUTERA	F	12 month supply allowed
LYLLANA TRANSDERMAL PATCH TWICE WEEKLY 0.075 MG/24HR	F	QL; AL
marlissa	F	12 month supply allowed
MENEST	F	AL
MIBELAS 24 FE	F	12 month supply allowed

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
MICROGESTIN 1.5/30	F	12 month supply allowed
MICROGESTIN 1/20	F	12 month supply allowed
MICROGESTIN FE 1.5/30	F	12 month supply allowed
MICROGESTIN FE 1/20	F	12 month supply allowed
MILI	F	102 day supply allowed
MONO-LINYAH	F	12 month supply allowed
MYFEMBREE	P	PA; QL; AL
NIKKI	F	12 month supply allowed
norethin ace-eth estrad-fe oral tablet 1.5-30 mg-mcg	F	102 day supply allowed
norethin ace-eth estrad-fe oral tablet 1-20 mg-mcg	F	12 month supply allowed
norethin ace-eth estrad-fe oral tablet chewable	F	102 day supply allowed
norethindrone acet-ethinyl est oral tablet 1.5-30 mg-mcg	F	102 day supply allowed
norethindrone acet-ethinyl est oral tablet 1-20 mg-mcg	F	12 month supply allowed
norethindrone-eth estradiol oral tablet 0.5-2.5 mg-mcg	F	QL; AL
norethindrone-eth estradiol oral tablet 1-5 mg-mcg	F	AL
norethindron-ethinyl estrad-fe	F	102 day supply allowed
norethin-eth estradiol-fe	F	12 month supply allowed
norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg	F	12 month supply allowed
norgestim-eth estrad triphasic	F	12 month supply allowed
NORTREL 0.5/35 (28)	F	12 month supply allowed
NORTREL 1/35 (28)	F	12 month supply allowed
NORTREL 7/7/7	F	12 month supply allowed
NYLIA 1/35	F	102 day supply allowed
NYLIA 7/7/7	F	102 day supply allowed
NYMYO	F	102 day supply allowed
OCELLA	F	12 month supply allowed

AL = Age Limit                      F = Formulary product                      NP = Formulary; PDL Non-Preferred; PA required  
P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
ORIAHNN	P-PA	PA; QL; AL
ORSYTHIA	F	102 day supply allowed
PHILITH	F	12 month supply allowed
PIMTREA	F	12 month supply allowed
PIRMELLA 1/35	F	12 month supply allowed
PIRMELLA 7/7/7	F	12 month supply allowed
PORTIA-28	F	12 month supply allowed
PREMARIN ORAL	F	QL; AL
PREMPHASE	F	QL; AL
PREMPRO	F	QL; AL
RECLIPSEN	F	12 month supply allowed
SETLAKIN	F	12 month supply allowed
SIMLIYA	F	102 day supply allowed
SPRINTEC 28	F	12 month supply allowed
SRONYX	F	12 month supply allowed
TARINA FE 1/20	F	12 month supply allowed
TARINA FE 1/20 EQ	F	102 day supply allowed
TILIA FE	F	12 month supply allowed
TRI FEMYNOR	F	12 month supply allowed
TRI-LEGEST FE	F	12 month supply allowed
TRI-LINYAH	F	12 month supply allowed
TRI-LO-ESTARYLLA	F	102 day supply allowed
TRI-LO-MARZIA	F	12 month supply allowed
TRI-LO-MILI	F	102 day supply allowed
TRI-LO-SPRINTEC	F	12 month supply allowed
TRI-MILI	F	102 day supply allowed
TRI-NYMYO	F	102 day supply allowed
TRI-SPRINTEC	F	12 month supply allowed
TRIVORA (28)	F	12 month supply allowed
TRI-VYLIBRA	F	102 day supply allowed

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
TRI-VYLIBRA LO	F	12 month supply allowed
VAGIFEM VAGINAL TABLET 10 MCG	F	
VELIVET	F	12 month supply allowed
VESTURA	F	12 month supply allowed
viorele	F	12 month supply allowed
VOLNEA	F	102 day supply allowed
VYFEMLA	F	12 month supply allowed
VYLIBRA	F	102 day supply allowed
WERA	F	12 month supply allowed
WYMZYA FE	F	102 day supply allowed
XULANE	F	12 month supply allowed; QL
YUVAFEM	F	
ZAFEMY	F	12 month supply allowed; QL
ZOVIA 1/35 (28)	F	102 day supply allowed
ZOVIA 1/35E (28)	F	12 month supply allowed
ZUMANDIMINE	F	102 day supply allowed
<b>Glycogenolytic Agents</b>		
BAQSIMI ONE PACK	P	QL
BAQSIMI TWO PACK	P	QL
GLUCAGEN HYPOKIT	P	
glucagon emergency injection kit	P	
glucagon emergency injection solution reconstituted	NP	PA
GVOKE HYPOPEN 1-PACK	P	QL
GVOKE HYPOPEN 2-PACK	P	QL
GVOKE KIT	NP	PA; QL
GVOKE PFS	NP	PA; QL
ZEGALOGUE	P	
<b>Gonadotropins</b>		
CAMCEVI	F	

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
ELIGARD	F	Specialty Drug
leuprolide acetate (3 month)	F	
leuprolide acetate injection	F	Specialty Drug
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT 7.5 MG	F	Specialty Drug
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT 22.5 MG	F	Specialty Drug
LUPRON DEPOT (4-MONTH)	F	Specialty Drug
LUPRON DEPOT (6-MONTH)	F	Specialty Drug
LUPRON INJECTION	F	
TRELSTAR	F	
TRELSTAR MIXJECT	F	
<b>Incretin Mimetics</b>		
BYDUREON BCISE	NP	PA; 102 day supply allowed; QL
BYETTA 10 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	P-PA	PA; 102 day supply allowed; QL
BYETTA 5 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	P-PA	PA; 102 day supply allowed; QL
MOUNJARO	NP	PA; 102 day supply allowed; QL
OZEMPIC (0.25 OR 0.5 MG/DOSE)	NP	PA; 102 day supply allowed; QL
OZEMPIC (1 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/1.5ML	NP	PA; 102 day supply allowed
OZEMPIC (1 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 4 MG/3ML	NP	PA; 102 day supply allowed; QL
OZEMPIC (2 MG/DOSE)	NP	PA; 102 day supply allowed; QL
RYBELSUS	NP	PA; 102 day supply allowed; QL
SAXENDA	P-PA	PA; AL
SOLIQUA	NP	PA; 102 day supply allowed; QL
TRULICITY	P-PA	PA; 102 day supply allowed; QL
VICTOZA SUBCUTANEOUS SOLUTION PEN-INJECTOR	P-PA	PA; 102 day supply allowed; QL
WEGOVY	P-PA	PA; AL

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
XULTOPHY	NP	PA; 102 day supply allowed; QL
ZEPBOUND	P-PA	PA; AL
<b>Intermediate-Acting Insulins</b>		
HUMULIN 70/30	P	102 day supply allowed; OTC; QL
HUMULIN 70/30 KWIKPEN SUBCUTANEOUS SUSPENSION PEN- INJECTOR	P	102 day supply allowed; OTC; QL
HUMULIN N	P	102 day supply allowed; OTC; QL
HUMULIN N KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	NP	PA; 102 day supply allowed; OTC; QL
NOVOLIN 70/30	NP	PA; 102 day supply allowed; OTC; QL
NOVOLIN 70/30 FLEXPEN	NP	PA; 102 day supply allowed; OTC; QL
NOVOLIN 70/30 FLEXPEN RELION	NP	PA; 102 day supply allowed; OTC
NOVOLIN 70/30 RELION	NP	PA; 102 day supply allowed; OTC
NOVOLIN N	P	102 day supply allowed; OTC; QL
NOVOLIN N FLEXPEN	P	102 day supply allowed; QL
NOVOLIN N FLEXPEN RELION	P	102 day supply allowed; OTC
NOVOLIN N RELION	P	102 day supply allowed; OTC
<b>Leptins</b>		
MYALEPT	Carve-out	
<b>Long-Acting Insulins</b>		
BASAGLAR KWIKPEN	NP	PA; 102 day supply allowed; QL
BASAGLAR TEMPO PEN	NP	PA; 102 day supply allowed; QL
insulin degludec	NP	PA; 102 day supply allowed; QL
insulin degludec flextouch	NP	PA; 102 day supply allowed; QL
insulin glargine	NP	PA; 102 day supply allowed; QL
insulin glargine max solostar	NP	PA; 102 day supply allowed; QL
insulin glargine solostar	NP	PA; 102 day supply allowed; QL
insulin glargine-yfqn	NP	PA; 102 day supply allowed; QL

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
LANTUS	P	102 day supply allowed; QL
LANTUS SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	P	102 day supply allowed; QL
LEVEMIR	P	102 day supply allowed; QL
LEVEMIR FLEXPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	P	102 day supply allowed; QL
LEVEMIR FLEXTOUCH	P	102 day supply allowed; QL
REZVOGLAR KWIKPEN	NP	PA
SEMGLEE	NP	PA; 102 day supply allowed
SEMGLEE (YFGN)	NP	PA; 102 day supply allowed; QL
SOLIQUA	NP	PA; 102 day supply allowed; QL
TOUJEO MAX SOLOSTAR	NP	PA; 102 day supply allowed; QL
TOUJEO SOLOSTAR	NP	PA; 102 day supply allowed; QL
TRESIBA	NP	PA; 102 day supply allowed; QL
TRESIBA FLEXTOUCH	NP	PA; 102 day supply allowed; QL
XULTOPHY	NP	PA; 102 day supply allowed; QL
<b>Meglitinides</b>		
nateglinide	P	102 day supply allowed
repaglinide	P	102 day supply allowed
<b>Melanocortin Receptor Antagonists</b>		
IMCIVREE	Carve-out	
<b>Parathyroid Agents</b>		
FORTEO SUBCUTANEOUS SOLUTION PEN-INJECTOR 600 MCG/2.4ML	NP	PA; Specialty Drug
teriparatide	NP	PA; Specialty Drug
teriparatide (recombinant)	NP	PA; Specialty Drug
TYMLOS	NP	PA; Specialty Drug
<b>Pituitary</b>		
ACTHAR	Carve-out	
CORTROPHIN	Carve-out	

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
desmopressin ace spray refrig	F	PA
desmopressin acetate oral	F	QL
desmopressin acetate spray	F	PA
GENOTROPIN MINIQUICK SUBCUTANEOUS PREFILLED SYRINGE	P-PA	PA; Specialty Drug
GENOTROPIN SUBCUTANEOUS CARTRIDGE	P-PA	PA; Specialty Drug
HUMATROPE INJECTION CARTRIDGE	NP	PA; Specialty Drug
NGENLA	NP	PA; Specialty Drug
NORDITROPIN FLEXPPO SUBCUTANEOUS SOLUTION PEN-INJECTOR	P-PA	PA; Specialty Drug
NUTROPIN AQ NUSPIN 10 SUBCUTANEOUS SOLUTION PEN-INJECTOR	NP	PA; Specialty Drug
NUTROPIN AQ NUSPIN 20 SUBCUTANEOUS SOLUTION PEN-INJECTOR	NP	PA; Specialty Drug
NUTROPIN AQ NUSPIN 5 SUBCUTANEOUS SOLUTION PEN-INJECTOR	NP	PA; Specialty Drug
OMNITROPE SUBCUTANEOUS SOLUTION CARTRIDGE	NP	PA; Specialty Drug
OMNITROPE SUBCUTANEOUS SOLUTION RECONSTITUTED	NP	PA; Specialty Drug
SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED 4 MG, 5 MG, 6 MG	NP	PA; Specialty Drug
SKYTROFA	NP	PA; Specialty Drug
SOGROYA	NP	PA; Specialty Drug; QL
ZOMACTON (FOR ZOMA-JET 10)	NP	PA
ZOMACTON SUBCUTANEOUS SOLUTION RECONSTITUTED 10 MG	NP	PA
ZOMACTON SUBCUTANEOUS SOLUTION RECONSTITUTED 5 MG	NP	PA; Specialty Drug
ZORBTIVE	NP	PA
<b>Progestins</b>		
AFIRMELLE	F	102 day supply allowed

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
AFTERA	F	OTC
alyacen 1/35	F	12 month supply allowed
alyacen 7/7/7	F	12 month supply allowed
APRI	F	12 month supply allowed
ARANELLE	F	12 month supply allowed
AUBRA EQ	F	102 day supply allowed
AUROVELA 1.5/30	F	102 day supply allowed
AUROVELA 1/20	F	102 day supply allowed
AUROVELA FE 1.5/30	F	102 day supply allowed
AUROVELA FE 1/20	F	102 day supply allowed
AVIANE	F	12 month supply allowed
AYGESTIN	NP	PA; 102 day supply allowed
AYUNA	F	102 day supply allowed
AZURETTE	F	12 month supply allowed
BALZIVA	F	12 month supply allowed
BLISOVI 24 FE	F	12 month supply allowed
BLISOVI FE 1.5/30	F	12 month supply allowed
BLISOVI FE 1/20	F	12 month supply allowed
briellyn	F	12 month supply allowed
CAMILA	F	12 month supply allowed
CAZIAN	F	102 day supply allowed
CHARLOTTE 24 FE	F	102 day supply allowed
CHATEAL	F	102 day supply allowed
CHATEAL EQ	F	102 day supply allowed
CRINONE VAGINAL GEL 4 %	NP	PA; 102 day supply allowed
CRINONE VAGINAL GEL 8 %	NP	PA
CRYSSELLE-28	F	12 month supply allowed
CYCLAFEM 1/35	F	102 day supply allowed
CYCLAFEM 7/7/7	F	102 day supply allowed
CYRED	F	102 day supply allowed

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
CYRED EQ	F	102 day supply allowed
DASETTA 1/35	F	12 month supply allowed
DASETTA 7/7/7	F	12 month supply allowed
DEBLITANE	F	12 month supply allowed
desogestrel-ethinyl estradiol	F	12 month supply allowed
drospirenone-ethinyl estradiol	F	12 month supply allowed
ECONTRA EZ	F	12 month supply allowed; OTC
ELINEST	F	12 month supply allowed
ELLA	F	12 month supply allowed
ELURYNG	F	QL
EMOQUETTE	F	12 month supply allowed
ENPRESSE-28	F	12 month supply allowed
ENSKYCE ORAL TABLET 0.15-30 MG-MCG	F	12 month supply allowed
ERRIN	F	12 month supply allowed
estradiol-norethindrone acet	F	AL
ethynodiol diac-eth estradiol oral tablet 1-35 mg-mcg	F	102 day supply allowed
ethynodiol diac-eth estradiol oral tablet 1-50 mg-mcg	F	12 month supply allowed
etonogestrel-ethinyl estradiol	F	12 month supply allowed; QL
FALMINA	F	12 month supply allowed
FEMYNOR	F	102 day supply allowed
FINZALA	F	102 day supply allowed
HAILEY 1.5/30	F	102 day supply allowed
HAILEY FE 1.5/30	F	102 day supply allowed
HAILEY FE 1/20	F	102 day supply allowed
HALOETTE	F	QL
HEATHER	F	12 month supply allowed
hydroxyprogesterone caproate intramuscular solution	F	Specialty Drug
ICLEVIA	F	102 day supply allowed

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
INCASSIA	F	102 day supply allowed
INTROVALE	F	12 month supply allowed
ISIBLOOM	F	12 month supply allowed
JASMIEL	F	102 day supply allowed
JENCYCLA	F	12 month supply allowed
JINTELI	F	AL
JOLESSA	F	12 month supply allowed
JULEBER	F	12 month supply allowed
JUNEL 1.5/30	F	12 month supply allowed
JUNEL 1/20	F	12 month supply allowed
JUNEL FE 1.5/30	F	12 month supply allowed
JUNEL FE 1/20	F	12 month supply allowed
KALLIGA	F	102 day supply allowed
KARIVA	F	12 month supply allowed
KELNOR 1/35	F	12 month supply allowed
KELNOR 1/50	F	102 day supply allowed
KURVELO	F	12 month supply allowed
LARIN 1.5/30	F	12 month supply allowed
LARIN 1/20	F	12 month supply allowed
LARIN FE 1.5/30	F	12 month supply allowed
LARIN FE 1/20	F	12 month supply allowed
LARISSIA	F	12 month supply allowed
LEENA	F	12 month supply allowed
LESSINA	F	12 month supply allowed
LEVONEST	F	12 month supply allowed
levonorgest-eth estrad 91-day oral tablet 0.15-0.03 mg	F	12 month supply allowed
levonorgestrel oral tablet 1.5 mg	F	OTC
levonorgestrel-ethinyl estrad	F	12 month supply allowed
levonorg-eth estrad triphasic oral tablet 50-30/75-40/ 125-30 mcg	F	102 day supply allowed

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PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
LILLOW	F	12 month supply allowed
LORYNA	F	12 month supply allowed
LOW-OGESTREL	F	12 month supply allowed
LO-ZUMANDIMINE	F	102 day supply allowed
LUTERA	F	12 month supply allowed
LYLEQ	F	102 day supply allowed
LYZA	F	102 day supply allowed
marlissa	F	12 month supply allowed
medroxyprogesterone acetate intramuscular suspension	F	QL
medroxyprogesterone acetate intramuscular suspension prefilled syringe	F	102 day supply allowed; QL
medroxyprogesterone acetate oral	P	102 day supply allowed
megestrol acetate oral suspension 40 mg/ml, 400 mg/10ml	P	
megestrol acetate oral suspension 625 mg/5ml	NP	PA
megestrol acetate oral tablet	F	
MIBELAS 24 FE	F	12 month supply allowed
MICROGESTIN 1.5/30	F	12 month supply allowed
MICROGESTIN 1/20	F	12 month supply allowed
MICROGESTIN FE 1.5/30	F	12 month supply allowed
MICROGESTIN FE 1/20	F	12 month supply allowed
MILI	F	102 day supply allowed
MONO-LINYAH	F	12 month supply allowed
MY WAY	F	12 month supply allowed; OTC
MYFEMBREE	P	PA; QL; AL
NIKKI	F	12 month supply allowed
NORA-BE	F	12 month supply allowed
norethin ace-eth estrad-fe oral tablet 1.5-30 mg-mcg	F	102 day supply allowed
norethin ace-eth estrad-fe oral tablet 1-20 mg-mcg	F	12 month supply allowed

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PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
norethin ace-eth estrad-fe oral tablet chewable	F	102 day supply allowed
norethindrone acetate oral	P	102 day supply allowed
norethindrone acet-ethinyl est oral tablet 1.5-30 mg-mcg	F	102 day supply allowed
norethindrone acet-ethinyl est oral tablet 1-20 mg-mcg	F	12 month supply allowed
norethindrone oral	F	12 month supply allowed
norethindrone-eth estradiol oral tablet 0.5-2.5 mg-mcg	F	QL; AL
norethindrone-eth estradiol oral tablet 1-5 mg-mcg	F	AL
norethindron-ethinyl estrad-fe	F	102 day supply allowed
norethin-eth estradiol-fe	F	12 month supply allowed
norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg	F	12 month supply allowed
norgestim-eth estrad triphasic	F	12 month supply allowed
NORLYDA	F	12 month supply allowed
NORTREL 0.5/35 (28)	F	12 month supply allowed
NORTREL 1/35 (28)	F	12 month supply allowed
NORTREL 7/7/7	F	12 month supply allowed
NYLIA 1/35	F	102 day supply allowed
NYLIA 7/7/7	F	102 day supply allowed
NYMYO	F	102 day supply allowed
OCELLA	F	12 month supply allowed
OPCICON ONE-STEP	F	12 month supply allowed; OTC
OPILL	F	12 month supply allowed; OTC
ORIAHNN	P-PA	PA; QL; AL
ORSYTHIA	F	102 day supply allowed
PHILITH	F	12 month supply allowed
PIMTREA	F	12 month supply allowed
PIRMELLA 1/35	F	12 month supply allowed

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
PIRMELLA 7/7/7	F	12 month supply allowed
PORTIA-28	F	12 month supply allowed
PREMPHASE	F	QL; AL
PREMPRO	F	QL; AL
progesterone intramuscular	NP	PA; 102 day supply allowed
progesterone oral	P	102 day supply allowed
PROMETRIUM	NP	PA; 102 day supply allowed
PROVERA	NP	PA; 102 day supply allowed
RECLIPSEN	F	12 month supply allowed
SETLAKIN	F	12 month supply allowed
SHAROBEL	F	12 month supply allowed
SIMLIYA	F	102 day supply allowed
SPRINTEC 28	F	12 month supply allowed
SRONYX	F	12 month supply allowed
TAKE ACTION	F	OTC
TARINA FE 1/20	F	12 month supply allowed
TARINA FE 1/20 EQ	F	102 day supply allowed
TILIA FE	F	12 month supply allowed
TRI FEMYNOR	F	12 month supply allowed
TRI-LEGEST FE	F	12 month supply allowed
TRI-LINYAH	F	12 month supply allowed
TRI-LO-ESTARYLLA	F	102 day supply allowed
TRI-LO-MARZIA	F	12 month supply allowed
TRI-LO-MILI	F	102 day supply allowed
TRI-LO-SPRINTEC	F	12 month supply allowed
TRI-MILI	F	102 day supply allowed
TRI-NYMYO	F	102 day supply allowed
TRI-SPRINTEC	F	12 month supply allowed
TRIVORA (28)	F	12 month supply allowed
TRI-VYLIBRA	F	102 day supply allowed

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
TRI-VYLIBRA LO	F	12 month supply allowed
TULANA	F	102 day supply allowed
VELIVET	F	12 month supply allowed
VESTURA	F	12 month supply allowed
viorele	F	12 month supply allowed
VOLNEA	F	102 day supply allowed
VYFEMLA	F	12 month supply allowed
VYLIBRA	F	102 day supply allowed
WERA	F	12 month supply allowed
WYMZYA FE	F	102 day supply allowed
XULANE	F	12 month supply allowed; QL
ZAFEMY	F	12 month supply allowed; QL
ZOVIA 1/35 (28)	F	102 day supply allowed
ZOVIA 1/35E (28)	F	12 month supply allowed
ZUMANDIMINE	F	102 day supply allowed
<b>Rapid-Acting Insulins</b>		
ADMELOG INJECTION	NP	PA; 102 day supply allowed; QL
ADMELOG SOLOSTAR	NP	PA; 102 day supply allowed; QL
AFREZZA INHALATION POWDER 12 UNIT, 8 UNIT, 90 X 8 UNIT & 90X12 UNIT	NP	PA
AFREZZA INHALATION POWDER 4 UNIT, 60X4 & 60X8 & 60X12 UNIT, 90 X 4 UNIT & 90X8 UNIT	NP	PA; 102 day supply allowed; QL
APIDRA	P	102 day supply allowed; QL
APIDRA SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	P	102 day supply allowed; QL
FIASP FLEXTOUCH	NP	PA; 102 day supply allowed; QL
FIASP INJECTION	NP	PA; 102 day supply allowed; QL
FIASP PENFILL	NP	PA; 102 day supply allowed; QL
FIASP PUMPCART	NP	PA; QL
HUMALOG INJECTION	P	102 day supply allowed; QL

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
HUMALOG JUNIOR KWIKPEN	P	102 day supply allowed; QL
HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML	P	102 day supply allowed; QL
HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 200 UNIT/ML	NP	PA; 102 day supply allowed; QL
HUMALOG MIX 50/50	P	102 day supply allowed; QL
HUMALOG MIX 50/50 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	P	102 day supply allowed; QL
HUMALOG MIX 75/25	P	102 day supply allowed; QL
HUMALOG MIX 75/25 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	P	102 day supply allowed; QL
HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE	P	102 day supply allowed; QL
HUMALOG TEMPO PEN	P	102 day supply allowed; QL
insulin asp prot & asp flexpen	P	102 day supply allowed; QL
insulin aspart flexpen	P	102 day supply allowed; QL
insulin aspart injection	P	102 day supply allowed; QL
insulin aspart penfill	NP	PA; 102 day supply allowed; QL
insulin aspart prot & aspart	P	102 day supply allowed; QL
insulin lispro (1 unit dial)	P	102 day supply allowed; QL
insulin lispro injection	P	102 day supply allowed; QL
insulin lispro junior kwikpen	P	102 day supply allowed; QL
insulin lispro prot & lispro	NP	PA; 102 day supply allowed; QL
LYUMJEV	NP	PA; 102 day supply allowed; QL
LYUMJEV KWIKPEN	NP	PA; 102 day supply allowed; QL
LYUMJEV TEMPO PEN	NP	PA; 102 day supply allowed; QL
NOVOLOG 70/30 FLEXPEN RELION	NP	PA
NOVOLOG FLEXPEN RELION	NP	PA
NOVOLOG FLEXPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	NP	PA; 102 day supply allowed; QL

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
NOVOLOG INJECTION	NP	PA; 102 day supply allowed; QL
NOVOLOG MIX 70/30	NP	PA; 102 day supply allowed; QL
NOVOLOG MIX 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN- INJECTOR	NP	PA; 102 day supply allowed
NOVOLOG MIX 70/30 RELION	NP	PA
NOVOLOG PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE	P	102 day supply allowed; QL
NOVOLOG RELION INJECTION	NP	PA
<b>Short-Acting Insulins</b>		
HUMULIN 70/30	P	102 day supply allowed; OTC; QL
HUMULIN 70/30 KWIKPEN SUBCUTANEOUS SUSPENSION PEN- INJECTOR	P	102 day supply allowed; OTC; QL
HUMULIN R	P	102 day supply allowed; OTC; QL
HUMULIN R U-500 (CONCENTRATED)	P	102 day supply allowed; QL
HUMULIN R U-500 KWIKPEN SUBCUTANEOUS SOLUTION PEN- INJECTOR	P	102 day supply allowed; QL
NOVOLIN 70/30	NP	PA; 102 day supply allowed; OTC; QL
NOVOLIN 70/30 FLEXPEN	NP	PA; 102 day supply allowed; OTC; QL
NOVOLIN 70/30 FLEXPEN RELION	NP	PA; 102 day supply allowed; OTC
NOVOLIN 70/30 RELION	NP	PA; 102 day supply allowed; OTC
NOVOLIN R	P	102 day supply allowed; OTC; QL
NOVOLIN R FLEXPEN	P	102 day supply allowed; OTC; QL
NOVOLIN R FLEXPEN RELION	P	102 day supply allowed; OTC
NOVOLIN R RELION	P	102 day supply allowed; OTC
<b>Sodium-Gluc Cotransport 2 (Sglt2) Inhib</b>		
dapagliflozin pro-metformin er	NP	PA; 102 day supply allowed

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
dapagliflozin propanediol	NP	PA; 102 Day Supply Allowed
FARXIGA	P	102 day supply allowed
GLYXAMBI ORAL TABLET 10-5 MG	NP	PA
GLYXAMBI ORAL TABLET 25-5 MG	NP	PA; 102 day supply allowed
INPEFA ORAL TABLET 200 MG	NP	PA; 102 day supply allowed
INPEFA ORAL TABLET 400 MG	NP	PA; 102 day supply allowed
INVOKAMET	P	102 day supply allowed
INVOKAMET XR	NP	PA; 102 day supply allowed
INVOKANA ORAL TABLET 100 MG	P	
INVOKANA ORAL TABLET 300 MG	P	102 day supply allowed
JARDIANCE	P	102 day supply allowed
QTERN	NP	PA; 102 day supply allowed
SEGLUROMET	NP	PA; 102 day supply allowed
STEGLATRO	NP	PA; 102 day supply allowed
STEGLUJAN	NP	PA; 102 day supply allowed
SYNJARDY	P	102 day supply allowed
SYNJARDY XR	NP	PA
TRIJARDY XR	NP	PA
XIGDUO XR	P	102 day supply allowed
<b>Somatostatin Agonists</b>		
octreotide acetate injection solution 100 mcg/ml, 50 mcg/ml	F	PA
octreotide acetate injection solution 1000 mcg/ml, 200 mcg/ml	F	PA; Specialty Drug
<b>Somatotropin Agonists</b>		
GENOTROPIN MINIQUICK SUBCUTANEOUS PREFILLED SYRINGE	P-PA	PA; Specialty Drug
GENOTROPIN SUBCUTANEOUS CARTRIDGE	P-PA	PA; Specialty Drug
HUMATROPE INJECTION CARTRIDGE	NP	PA; Specialty Drug

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
NORDITROPIN FLEXPOR SUBCUTANEOUS SOLUTION PEN-INJECTOR	P-PA	PA; Specialty Drug
NUTROPIN AQ NUSPIN 10 SUBCUTANEOUS SOLUTION PEN-INJECTOR	NP	PA; Specialty Drug
NUTROPIN AQ NUSPIN 20 SUBCUTANEOUS SOLUTION PEN-INJECTOR	NP	PA; Specialty Drug
NUTROPIN AQ NUSPIN 5 SUBCUTANEOUS SOLUTION PEN-INJECTOR	NP	PA; Specialty Drug
OMNITROPE SUBCUTANEOUS SOLUTION CARTRIDGE	NP	PA; Specialty Drug
OMNITROPE SUBCUTANEOUS SOLUTION RECONSTITUTED	NP	PA; Specialty Drug
SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED 4 MG, 5 MG, 6 MG	NP	PA; Specialty Drug
ZOMACTON (FOR ZOMA-JET 10)	NP	PA
ZOMACTON SUBCUTANEOUS SOLUTION RECONSTITUTED 10 MG	NP	PA
ZOMACTON SUBCUTANEOUS SOLUTION RECONSTITUTED 5 MG	NP	PA; Specialty Drug
ZORBTIVE	NP	PA
<b>Sulfonylureas</b>		
AMARYL	NP	PA; 102 day supply allowed
DUETACT	NP	PA; 102 day supply allowed
glimepiride	P	102 day supply allowed
glipizide er	P	102 day supply allowed
glipizide oral tablet 10 mg, 5 mg	P	102 day supply allowed
glipizide xl	P	102 day supply allowed
glipizide-metformin hcl	NP	PA; 102 day supply allowed
GLUCOTROL XL	NP	PA; 102 day supply allowed
glyburide micronized	P	102 day supply allowed
glyburide oral	P	102 day supply allowed
glyburide-metformin	P	102 day supply allowed

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
GLYNASE	NP	PA; 102 day supply allowed
pioglitazone hcl-glimepiride	NP	PA; 102 day supply allowed
<b>Thiazolidinediones</b>		
ACTOPLUS MET	NP	PA; 102 day supply allowed
ACTOS	NP	PA; 102 day supply allowed
alogliptin-pioglitazone	NP	PA; 102 day supply allowed
DUETACT	NP	PA; 102 day supply allowed
OSENI	NP	PA; 102 day supply allowed
pioglitazone hcl	P	102 day supply allowed
pioglitazone hcl-glimepiride	NP	PA; 102 day supply allowed
pioglitazone hcl-metformin hcl	NP	PA; 102 day supply allowed
<b>Thyroid Agents</b>		
ADTHYZA ORAL TABLET 130 MG, 16.25 MG, 32.5 MG, 65 MG, 97.5 MG	F	
ARMOUR THYROID	F	
CYTOMEL	F	
ERMEZA	F	
EUTHYROX	F	
LEVO-T	F	
levothyroxine sodium intravenous solution reconstituted	F	
levothyroxine sodium oral capsule 100 mcg, 112 mcg, 125 mcg, 13 mcg, 137 mcg, 150 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg	F	
levothyroxine sodium oral tablet	F	
LEVOXYL	F	
liothyronine sodium intravenous	F	
liothyronine sodium oral	F	
NATURE-THROID ORAL TABLET 130 MG, 16.25 MG, 32.5 MG, 65 MG, 97.5 MG	F	
NP THYROID	F	

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
SYNTHROID	F	
THYQUIDITY	F	
thyroid oral tablet 65 mg	F	
TIROSINT ORAL CAPSULE 100 MCG, 112 MCG, 125 MCG, 13 MCG, 137 MCG, 150 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG	F	
TIROSINT-SOL ORAL SOLUTION 100 MCG/ML, 112 MCG/ML, 125 MCG/ML, 13 MCG/ML, 137 MCG/ML, 150 MCG/ML, 175 MCG/ML, 200 MCG/ML, 25 MCG/ML, 50 MCG/ML, 75 MCG/ML, 88 MCG/ML	F	
TRIOSTAT	F	
UNITHROID	F	
WESTHROID ORAL TABLET 130 MG, 32.5 MG, 65 MG, 97.5 MG	F	
WP THYROID ORAL TABLET 130 MG, 16.25 MG, 32.5 MG, 65 MG, 97.5 MG	F	
<b>Miscellaneous Therapeutic Agents</b>		
<b>5-Alpha-Reductase Inhibitors</b>		
AVODART	NP	PA
dutasteride oral	P	
dutasteride-tamsulosin hcl	NP	PA
ENTADFI	NP	PA
finasteride oral tablet 5 mg	P	
PROSCAR	NP	PA
<b>Alcohol Deterrents</b>		
ANTABUSE	Carve-out	
disulfiram oral	Carve-out	
naltrexone hcl oral	Carve-out	
VIVITROL	Carve-out	
<b>Antidotes</b>		

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
acetylcysteine inhalation	F	
BAQSIMI ONE PACK	P	QL
BAQSIMI TWO PACK	P	QL
CHEMET	F	
FOSRENOL ORAL PACKET	NP	PA; 102 day supply allowed
FOSRENOL ORAL TABLET CHEWABLE 1000 MG, 500 MG, 750 MG	NP	PA; 102 day supply allowed
GLUCAGEN HYPOKIT	P	
glucagon emergency injection kit	P	
glucagon emergency injection solution reconstituted	NP	PA
GVOKE HYPOPEN 1-PACK	P	QL
GVOKE HYPOPEN 2-PACK	P	QL
GVOKE KIT	NP	PA; QL
GVOKE PFS	NP	PA; QL
lanthanum carbonate	NP	PA; 102 day supply allowed
leucovorin calcium oral	F	
magnesium sulfate injection solution 50 %	F	
naloxone hcl injection solution 0.4 mg/ml, 4 mg/10ml	F	QL
naloxone hcl injection solution cartridge	F	QL
naloxone hcl injection solution prefilled syringe	F	QL
naltrexone hcl oral	Carve-out	
phytonadione oral	F	QL
RENVELA	NP	PA; 102 day supply allowed
sevelamer carbonate oral packet	NP	PA; 102 day supply allowed
sevelamer carbonate oral tablet	P-PA	PA; 102 day supply allowed
sevelamer hcl	NP	PA; 102 day supply allowed
sodium polystyrene sulfonate oral powder	F	
VIVITROL	Carve-out	
ZEGALOGUE	P	

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
ZIMHI	F	QL
<b>Antigout Agents</b>		
all day pain relief	P	OTC
all day relief	P	OTC
allopurinol oral	P	
ANAPROX DS	NP	PA
colchicine oral capsule	NP	PA
colchicine oral tablet	P	
colchicine-probenecid	P	
COLCRYS	NP	PA
cvs all day pain relief	P	OTC
cvs naproxen sodium	P	OTC
ec-naproxen	NP	PA
febuxostat	NP	PA
GLOPERBA	NP	PA
gnp naproxen sodium oral tablet	P	OTC
goodsense naproxen sodium	P	OTC
hm naproxen sodium	P	OTC
INDOCIN RECTAL	NP	PA
indomethacin er	NP	PA
indomethacin oral capsule 25 mg, 50 mg	P	
indomethacin oral suspension	NP	PA
MEDIPROXEN	P	OTC
MITIGARE	NP	PA
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 375 MG, 500 MG, 750 MG	NP	PA
NAPROSYN ORAL SUSPENSION	NP	PA
naproxen oral suspension	NP	PA
naproxen oral tablet	P	
naproxen oral tablet delayed release	NP	PA

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
naproxen sodium er	NP	PA
naproxen sodium oral capsule	P	OTC
naproxen sodium oral tablet 220 mg	P	OTC
naproxen sodium oral tablet 275 mg, 550 mg	NP	PA
probenecid oral	P	
px all day relief	P	OTC
qc naproxen sodium oral tablet	P	OTC
sb naproxen sodium	P	OTC
sm naproxen sodium oral tablet	P	OTC
ULORIC	NP	PA
ZYLOPRIM	NP	PA
<b>Bone Anabolic Agents</b>		
FORTEO SUBCUTANEOUS SOLUTION PEN-INJECTOR 600 MCG/2.4ML	NP	PA; Specialty Drug
teriparatide	NP	PA; Specialty Drug
teriparatide (recombinant)	NP	PA; Specialty Drug
TYMLOS	NP	PA; Specialty Drug
<b>Bone Resorption Inhibitors</b>		
ACTONEL ORAL TABLET 150 MG	NP	PA
ACTONEL ORAL TABLET 35 MG	NP	PA; QL
alendronate sodium oral solution	NP	PA
alendronate sodium oral tablet 10 mg, 5 mg	P	
alendronate sodium oral tablet 35 mg, 70 mg	P	QL
ATEL VIA	NP	PA; QL
BONIVA INTRAVENOUS	NP	PA
BONIVA ORAL TABLET 150 MG	NP	PA; Specialty Drug; QL
calcitonin (salmon) nasal	P	Specialty Drug
DELESTROGEN INTRAMUSCULAR OIL 10 MG/ML	F	
DELESTROGEN INTRAMUSCULAR OIL 20 MG/ML, 40 MG/ML	F	Specialty Drug

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
DOTTI TRANSDERMAL PATCH TWICE WEEKLY 0.05 MG/24HR, 0.075 MG/24HR	F	QL; AL
estradiol oral	F	AL
estradiol transdermal patch twice weekly	F	QL; AL
estradiol transdermal patch weekly	F	QL; AL
estradiol vaginal cream	F	QL
estradiol vaginal tablet	F	
estradiol valerate intramuscular oil 20 mg/ml, 40 mg/ml	F	102 day supply allowed
EVISTA	NP	PA
FOSAMAX ORAL TABLET 70 MG	NP	PA; QL
FOSAMAX PLUS D	NP	PA; QL
ibandronate sodium intravenous solution 3 mg/3ml	NP	PA
ibandronate sodium oral	NP	PA; Specialty Drug; QL
LYLLANA TRANSDERMAL PATCH TWICE WEEKLY 0.075 MG/24HR	F	QL; AL
MENEST	F	AL
PREMARIN ORAL	F	QL; AL
raloxifene hcl	P	
risedronate sodium oral tablet 150 mg, 30 mg, 5 mg	NP	PA
risedronate sodium oral tablet 35 mg	NP	PA; QL
risedronate sodium oral tablet delayed release	NP	PA; QL
VAGIFEM VAGINAL TABLET 10 MCG	F	
YUVAFEM	F	
<b>Cariostatic Agents</b>		
adc/f (0.5mg/ml)	F	QL; AL
DENTA 5000 PLUS	F	
DENTAGEL	F	
multi-vit/iron/fluoride	F	OTC; QL; AL

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
multi-vitamin/fluoride oral solution	F	QL; AL
multivitamin/fluoride oral solution 0.5 mg/ml	F	OTC; QL; AL
multivitamin/fluoride oral tablet chewable 0.25 mg, 0.5 mg, 1 mg	F	QL; AL
multi-vitamin/fluoride/iron	F	QL; AL
sf	F	
sf 5000 plus	F	
sodium fluoride 5000 plus	F	
sodium fluoride 5000 ppm dental cream	F	
sodium fluoride 5000 ppm dental gel	F	
sodium fluoride dental cream	F	
sodium fluoride dental gel 1.1 %	F	
sodium fluoride oral solution 0.5 mg/ml	F	OTC; QL; AL
sodium fluoride oral solution 1.1 (0.5 f) mg/ml	F	QL; AL
sodium fluoride oral tablet chewable	F	QL; AL
tri-vitamin/fluoride oral solution 0.25 mg/ml	F	QL; AL
tri-vite/fluoride	F	QL; AL
vitamins acd-fluoride	F	QL; AL
<b>Complement Inhibitors</b>		
BERINERT	Carve-out	
CINRYZE	Carve-out	
EMPAVELI	Carve-out	
FABHALTA	Carve-out	
HAEGARDA	Carve-out	
RUCONEST	Carve-out	
SOLIRIS INTRAVENOUS SOLUTION 300 MG/30ML	Carve-out	
TAVNEOS	Carve-out	
ULTOMIRIS	Carve-out	
VEOPOZ	Carve-out	

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
ZILBRYSQ	Carve-out	
<b>Disease-Modifying Antirheumatic Agents</b>		
ABRILADA (1 PEN)	NP	PA; Specialty Drug
ABRILADA (2 PEN)	NP	PA; Specialty Drug
ABRILADA (2 SYRINGE)	NP	PA; Specialty Drug
ACTEMRA ACTPEN	NP	PA; Specialty Drug
ACTEMRA SUBCUTANEOUS	NP	PA; Specialty Drug
adalimumab-adaz	NP	PA; Specialty Drug
adalimumab-fkjp	NP	PA; Specialty Drug
AMJEVITA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.8ML	NP	PA
AMJEVITA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.8ML	NP	PA
AMJEVITA-PED 10KG TO <15KG	NP	PA
AMJEVITA-PED 15KG TO <30KG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/0.4ML	NP	PA
AZASAN	F	Specialty Drug
azathioprine oral	F	Specialty Drug
AZULFIDINE	NP	PA
AZULFIDINE EN-TABS	NP	PA
CIBINQO	NP	PA; AL
CIMZIA (2 SYRINGE)	NP	PA; Specialty Drug
CIMZIA STARTER KIT SUBCUTANEOUS PREFILLED SYRINGE KIT	NP	PA; Specialty Drug
CIMZIA SUBCUTANEOUS KIT 2 X 200 MG	NP	PA; Specialty Drug
CIMZIA SUBCUTANEOUS PREFILLED SYRINGE KIT	NP	PA; Specialty Drug
COSENTYX (300 MG DOSE)	P	Specialty Drug
COSENTYX SENSOREADY (300 MG)	P	Specialty Drug

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
COSENTYX SENSOREADY PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML	P	Specialty Drug
COSENTYX SUBCUTANEOUS	P	Specialty Drug
COSENTYX UNOREADY	P	Specialty Drug
cyclosporine intravenous	F	Specialty Drug
cyclosporine modified	F	Specialty Drug
cyclosporine oral capsule	F	Specialty Drug
cyclosporine oral solution	F	
CYLTEZO (2 PEN)	NP	PA; Specialty Drug
CYLTEZO (2 SYRINGE)	NP	PA; Specialty Drug
CYLTEZO-CD/UC/HS STARTER	NP	PA; Specialty Drug
CYLTEZO-PSORIASIS/UV STARTER	NP	PA; Specialty Drug
ENBREL MINI	P	Specialty Drug
ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5ML	P	Specialty Drug
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	P	Specialty Drug
ENBREL SUBCUTANEOUS SOLUTION RECONSTITUTED	P	Specialty Drug
ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	P	Specialty Drug
GENGRAF ORAL CAPSULE 100 MG, 25 MG	F	Specialty Drug
GENGRAF ORAL CAPSULE 50 MG	F	
GENGRAF ORAL SOLUTION	F	Specialty Drug
HADLIMA	NP	PA; Specialty Drug
HADLIMA PUSHTOUCH	NP	PA; Specialty Drug
HULIO	NP	PA; Specialty Drug
HULIO (2 PEN)	NP	PA; Specialty Drug
HULIO (2 SYRINGE)	NP	PA; Specialty Drug
HUMIRA (2 PEN) SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.4ML	P	Specialty Drug

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
HUMIRA (2 PEN) SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML, 80 MG/0.8ML	P	
HUMIRA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.1ML, 20 MG/0.2ML, 40 MG/0.4ML, 40 MG/0.8ML	P	Specialty Drug
HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT	P	
HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.8ML	P	Specialty Drug
HUMIRA-CD/UC/HS STARTER	P	Specialty Drug
HUMIRA-PED<40KG CROHNS STARTER	P	Specialty Drug
HUMIRA-PED>=40KG CROHNS START	P	Specialty Drug
HUMIRA-PED>=40KG UC STARTER	P	
HUMIRA-PS/UV/ADOL HS STARTER	P	Specialty Drug
HUMIRA-PSORIASIS/UEVIT STARTER	P	Specialty Drug
hydroxychloroquine sulfate oral tablet 200 mg	F	
HYRIMOZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.4ML, 80 MG/0.8ML	NP	PA; Specialty Drug
HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.1 ML, 20 MG/0.2ML, 40 MG/0.4ML	NP	PA; Specialty Drug
HYRIMOZ-CROHNS/UC STARTER	NP	PA; Specialty Drug
HYRIMOZ-PED<40KG CROHN STARTER	NP	PA; Specialty Drug
HYRIMOZ-PED>=40KG CROHN START	NP	PA; Specialty Drug
HYRIMOZ-PLAQUE PSORIASIS START	NP	PA; Specialty Drug
IDACIO (2 PEN)	NP	PA; Specialty Drug
IDACIO (2 SYRINGE)	NP	PA; Specialty Drug
IDACIO-CROHNS/UC STARTER	NP	PA; Specialty Drug
IDACIO-PSORIASIS STARTER	NP	PA; Specialty Drug
IMURAN	F	Specialty Drug
JYLAMVO	F	Specialty Drug

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
KEVZARA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	NP	PA
KEVZARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	NP	PA; Specialty Drug
KINERET SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Carve-out	
leflunomide oral	F	QL
methotrexate oral	F	
methotrexate sodium (pf) injection solution 1 gm/40ml, 200 mg/8ml, 250 mg/10ml	F	
methotrexate sodium (pf) injection solution 50 mg/2ml	F	Specialty Drug
methotrexate sodium injection solution 1000 mg/40ml, 25 mg/ml	F	
methotrexate sodium injection solution 250 mg/10ml, 50 mg/2ml	F	Specialty Drug
methotrexate sodium injection solution reconstituted	F	Specialty Drug
methotrexate sodium oral	F	
NEORAL	F	Specialty Drug
OLUMIANT ORAL TABLET 1 MG, 2 MG	NP	PA; Specialty Drug
OLUMIANT ORAL TABLET 4 MG	NP	PA
ORENCIA CLICKJECT	NP	PA; Specialty Drug
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	NP	PA; Specialty Drug
OTEZLA ORAL TABLET	NP	PA; Specialty Drug
OTEZLA ORAL TABLET THERAPY PACK	NP	PA; Specialty Drug
RIABNI	F	Specialty Drug
RINVOQ	NP	PA; Specialty Drug
SANDIMMUNE	F	Specialty Drug
SIMPONI ARIA	NP	PA; Specialty Drug

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR	NP	PA; Specialty Drug
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	NP	PA; Specialty Drug
sulfasalazine oral	P	
TREXALL	F	
XATMEP	F	
XELJANZ	NP	PA; Specialty Drug
XELJANZ XR	NP	PA; Specialty Drug
YUFLYMA (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML	NP	PA; Specialty Drug
YUFLYMA (2 PEN)	NP	PA; Specialty Drug
YUFLYMA (2 SYRINGE)	NP	PA; Specialty Drug
YUSIMRY	NP	PA; Specialty Drug
<b>Immunomodulatory Agents</b>		
ABRILADA (1 PEN)	NP	PA; Specialty Drug
ABRILADA (2 PEN)	NP	PA; Specialty Drug
ABRILADA (2 SYRINGE)	NP	PA; Specialty Drug
ACTEMRA ACTPEN	NP	PA; Specialty Drug
ACTEMRA SUBCUTANEOUS	NP	PA; Specialty Drug
adalimumab-adaz	NP	PA; Specialty Drug
adalimumab-fkjp	NP	PA; Specialty Drug
AMJEVITA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.8ML	NP	PA
AMJEVITA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.8ML	NP	PA
AMJEVITA-PED 10KG TO <15KG	NP	PA
AMJEVITA-PED 15KG TO <30KG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/0.4ML	NP	PA
AUBAGIO	NP	PA; Specialty Drug

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
AVONEX PEN INTRAMUSCULAR AUTO-INJECTOR KIT	P	Specialty Drug
AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT	P	Specialty Drug; QL
AZASAN	F	Specialty Drug
azathioprine oral	F	Specialty Drug
AZULFIDINE	NP	PA
AZULFIDINE EN-TABS	NP	PA
BAFIERTAM	NP	PA; Specialty Drug; QL
BESREMI	F	
BETASERON SUBCUTANEOUS KIT	P	Specialty Drug
CIMZIA (2 SYRINGE)	NP	PA; Specialty Drug
CIMZIA STARTER KIT SUBCUTANEOUS PREFILLED SYRINGE KIT	NP	PA; Specialty Drug
CIMZIA SUBCUTANEOUS KIT 2 X 200 MG	NP	PA; Specialty Drug
CIMZIA SUBCUTANEOUS PREFILLED SYRINGE KIT	NP	PA; Specialty Drug
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML	P	Specialty Drug
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/ML	NP	PA; Specialty Drug
cyclosporine intravenous	F	Specialty Drug
cyclosporine modified	F	Specialty Drug
cyclosporine oral capsule	F	Specialty Drug
cyclosporine oral solution	F	
CYLTEZO (2 SYRINGE)	NP	PA; Specialty Drug
dimethyl fumarate oral	P	Specialty Drug
dimethyl fumarate starter pack	P	Specialty Drug
ENBREL MINI	P	Specialty Drug
ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5ML	P	Specialty Drug

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PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	P	Specialty Drug
ENBREL SUBCUTANEOUS SOLUTION RECONSTITUTED	P	Specialty Drug
ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	P	Specialty Drug
ENSPRYNG	F	PA; Specialty Drug; QL; AL
EXTAVIA SUBCUTANEOUS KIT	NP	PA; Specialty Drug
fingolimod hcl	P	Specialty Drug
GENGRAF ORAL CAPSULE 100 MG, 25 MG	F	Specialty Drug
GENGRAF ORAL CAPSULE 50 MG	F	
GENGRAF ORAL SOLUTION	F	Specialty Drug
GILENYA ORAL CAPSULE 0.25 MG	NP	PA
GILENYA ORAL CAPSULE 0.5 MG	NP	PA; Specialty Drug
glatiramer acetate	NP	PA; Specialty Drug
GLATOPA	NP	PA; Specialty Drug
HADLIMA	NP	PA; Specialty Drug
HADLIMA PUSHTOUCH	NP	PA; Specialty Drug
HULIO	NP	PA; Specialty Drug
HULIO (2 PEN)	NP	PA; Specialty Drug
HULIO (2 SYRINGE)	NP	PA; Specialty Drug
HUMIRA (2 PEN) SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.4ML	P	Specialty Drug
HUMIRA (2 PEN) SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML, 80 MG/0.8ML	P	
HUMIRA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.1ML, 20 MG/0.2ML, 40 MG/0.4ML, 40 MG/0.8ML	P	Specialty Drug
HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT	P	
HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.8ML	P	Specialty Drug

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
HUMIRA-CD/UC/HS STARTER	P	Specialty Drug
HUMIRA-PED<40KG CROHNS STARTER	P	Specialty Drug
HUMIRA-PED>=40KG CROHNS START	P	Specialty Drug
HUMIRA-PED>=40KG UC STARTER	P	
HUMIRA-PS/UV/ADOL HS STARTER	P	Specialty Drug
HUMIRA-PSORIASIS/UEVIT STARTER	P	Specialty Drug
hydroxychloroquine sulfate oral tablet 200 mg	F	
HYRIMOZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.4ML, 80 MG/0.8ML	NP	PA; Specialty Drug
HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.1 ML, 20 MG/0.2ML, 40 MG/0.4ML	NP	PA; Specialty Drug
HYRIMOZ-CROHNS/UC STARTER	NP	PA; Specialty Drug
HYRIMOZ-PED<40KG CROHN STARTER	NP	PA; Specialty Drug
HYRIMOZ-PED>=40KG CROHN START	NP	PA; Specialty Drug
HYRIMOZ-PLAQUE PSORIASIS START	NP	PA; Specialty Drug
IDACIO (2 PEN)	NP	PA; Specialty Drug
IDACIO (2 SYRINGE)	NP	PA; Specialty Drug
IDACIO-CROHNS/UC STARTER	NP	PA; Specialty Drug
IDACIO-PSORIASIS STARTER	NP	PA; Specialty Drug
IMURAN	F	Specialty Drug
INTRON-A INJECTION SOLUTION RECONSTITUTED 50000000 UNIT	F	
JYLAMVO	F	Specialty Drug
KESIMPTA	NP	PA; Specialty Drug
KINERET SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Carve-out	
leflunomide oral	F	QL
lenalidomide oral capsule 10 mg, 15 mg, 25 mg, 5 mg	F	Specialty Drug
lenalidomide oral capsule 2.5 mg, 20 mg	F	

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
MAVENCLAD (10 TABS)	NP	PA
MAVENCLAD (4 TABS)	NP	PA
MAVENCLAD (5 TABS)	NP	PA
MAVENCLAD (6 TABS)	NP	PA
MAVENCLAD (7 TABS)	NP	PA
MAVENCLAD (8 TABS)	NP	PA
MAVENCLAD (9 TABS)	NP	PA
MAYZENT	NP	PA
MAYZENT STARTER PACK	NP	PA
methotrexate oral	F	
methotrexate sodium (pf) injection solution 1 gm/40ml, 200 mg/8ml, 250 mg/10ml	F	
methotrexate sodium (pf) injection solution 50 mg/2ml	F	Specialty Drug
methotrexate sodium injection solution 1000 mg/40ml, 25 mg/ml	F	
methotrexate sodium injection solution 250 mg/10ml, 50 mg/2ml	F	Specialty Drug
methotrexate sodium injection solution reconstituted	F	Specialty Drug
methotrexate sodium oral	F	
NEORAL	F	Specialty Drug
ORENCIA CLICKJECT	NP	PA; Specialty Drug
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	NP	PA; Specialty Drug
OTEZLA ORAL TABLET	NP	PA; Specialty Drug
OTEZLA ORAL TABLET THERAPY PACK	NP	PA; Specialty Drug
PLEGRIDY	NP	PA; Specialty Drug
PLEGRIDY STARTER PACK	NP	PA; Specialty Drug
POMALYST	F	Specialty Drug
PONVORY	NP	PA; AL
PONVORY STARTER PACK	NP	PA; AL

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
REBIF REBIDOSE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	NP	PA; Specialty Drug
REBIF REBIDOSE TITRATION PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	NP	PA; Specialty Drug
REBIF SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 22 MCG/0.5ML	NP	PA; Specialty Drug
REBIF SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 44 MCG/0.5ML	NP	PA; Specialty Drug; QL
REBIF TITRATION PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	NP	PA; Specialty Drug
REVLIMID	F	Specialty Drug
SANDIMMUNE	F	Specialty Drug
SIMPONI ARIA	NP	PA; Specialty Drug
SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR	NP	PA; Specialty Drug
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	NP	PA; Specialty Drug
sulfasalazine oral	P	
TASCENSO ODT	NP	PA; Specialty Drug; AL
TECFIDERA	NP	PA; Specialty Drug
teriflunomide	P	Specialty Drug
THALOMID	F	
TREXALL	F	
VELSIPITY	NP	PA; Specialty Drug; AL
VUMERITY	NP	PA
XATMEP	F	
YUFLYMA (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML	NP	PA; Specialty Drug
YUFLYMA (2 PEN)	NP	PA; Specialty Drug
YUFLYMA (2 SYRINGE)	NP	PA; Specialty Drug
YUSIMRY	NP	PA; Specialty Drug

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
ZEPOSIA	NP	PA
ZEPOSIA 7-DAY STARTER PACK	NP	PA
ZEPOSIA STARTER KIT ORAL CAPSULE THERAPY PACK 0.23MG & 0.46MG & 0.92MG	NP	PA
ZEPOSIA STARTER KIT ORAL CAPSULE THERAPY PACK 0.23MG & 0.46MG 0.92MG(21)	NP	PA; Specialty Drug
<b>Immunosuppressive Agents</b>		
ASTAGRAF XL	F	Specialty Drug
AZASAN	F	Specialty Drug
azathioprine oral	F	Specialty Drug
CELLCEPT	F	Specialty Drug
CELLCEPT INTRAVENOUS	F	Specialty Drug
cyclophosphamide oral	F	
cyclosporine intravenous	F	Specialty Drug
cyclosporine modified	F	Specialty Drug
cyclosporine oral capsule	F	Specialty Drug
cyclosporine oral solution	F	
ELIDEL	P-PA	PA; QL; AL
ENVARUSUS XR	F	Specialty Drug
everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	F	Specialty Drug
GENGRAF ORAL CAPSULE 100 MG, 25 MG	F	Specialty Drug
GENGRAF ORAL CAPSULE 50 MG	F	
GENGRAF ORAL SOLUTION	F	Specialty Drug
HECORIA	F	
HYFTOR	F	PA; AL
IMURAN	F	Specialty Drug
JYLAMVO	F	Specialty Drug
leflunomide oral	F	QL

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
MAVENCLAD (10 TABS)	NP	PA
MAVENCLAD (4 TABS)	NP	PA
MAVENCLAD (5 TABS)	NP	PA
MAVENCLAD (6 TABS)	NP	PA
MAVENCLAD (7 TABS)	NP	PA
MAVENCLAD (8 TABS)	NP	PA
MAVENCLAD (9 TABS)	NP	PA
mercaptopurine oral	F	Specialty Drug
methotrexate oral	F	
methotrexate sodium (pf) injection solution 1 gm/40ml, 200 mg/8ml, 250 mg/10ml	F	
methotrexate sodium (pf) injection solution 50 mg/2ml	F	Specialty Drug
methotrexate sodium injection solution 1000 mg/40ml, 25 mg/ml	F	
methotrexate sodium injection solution 250 mg/10ml, 50 mg/2ml	F	Specialty Drug
methotrexate sodium injection solution reconstituted	F	Specialty Drug
methotrexate sodium oral	F	
mycophenolate mofetil hel	F	Specialty Drug
mycophenolate mofetil intravenous	F	
mycophenolate mofetil oral	F	Specialty Drug
mycophenolate sodium	F	Specialty Drug
MYFORTIC	F	Specialty Drug
NEORAL	F	Specialty Drug
NULOJIX	F	Specialty Drug
pimecrolimus	P-PA	PA; QL; AL
PROGRAF	F	Specialty Drug
PROTOPIC EXTERNAL OINTMENT 0.03 %, 0.1 %	NP	PA; QL; AL
PURINETHOL	F	

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
PURIXAN	F	Specialty Drug
RAPAMUNE	F	Specialty Drug
SANDIMMUNE	F	Specialty Drug
sirolimus oral	F	Specialty Drug
tacrolimus external ointment 0.03 %, 0.1 %	NP	PA; QL; AL
tacrolimus oral	F	Specialty Drug
TREXALL	F	
XATMEP	F	
ZORTRESS	F	Specialty Drug
<b>Kallikrein Inhibitors</b>		
KALBITOR	Carve-out	
ORLADEYO	Carve-out	
TAKHZYRO	Carve-out	
<b>Kallikrein-Kinin System Inhibitors</b>		
BERINERT	Carve-out	
CINRYZE	Carve-out	
EMPAVELI	Carve-out	
HAEGARDA	Carve-out	
KALBITOR	Carve-out	
ORLADEYO	Carve-out	
RUCONEST	Carve-out	
SOLIRIS INTRAVENOUS SOLUTION 300 MG/30ML	Carve-out	
TAKHZYRO SUBCUTANEOUS SOLUTION	Carve-out	
TAVNEOS	Carve-out	
ULTOMIRIS	Carve-out	
<b>Other Miscellaneous Therapeutic Agents</b>		
AMVUTTRA	NP	PA
ARCALYST	Carve-out	

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PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
betaine	Carve-out	
CARNITOR	Carve-out	
CARNITOR SF	Carve-out	
CERDELGA	Carve-out	
cvs fish oil oral capsule 1000 mg	F	OTC
cvs fish oil oral capsule delayed release	F	OTC
cvs natural fish oil oral capsule 1000 mg	F	OTC
CYSTADANE	Carve-out	
CYSTAGON	Carve-out	
dalfampridine er	F	PA; Specialty Drug; QL; AL
ELMIRON	F	PA; QL
ENDARI	F	PA; QL; AL
enteric fish oil	F	OTC
eql fish oil oral capsule 1000 mg	F	OTC
EVOTAZ	Carve-out	
EVRYSDI	Carve-out	
FIRDAPSE	Carve-out	
fish oil concentrate oral capsule 1000 mg, 300 mg	F	OTC
fish oil omega-3	F	OTC
fish oil oral capsule 1000 mg	F	
fish oil oral capsule 500 mg	F	OTC
fish oil oral capsule delayed release 1000 mg	F	OTC
GALAFOLD	Carve-out	
glucosamine chondr 1500 complx	Carve-out	OTC
gnp fish oil oral capsule 1000 mg	F	OTC
gnp fish oil oral capsule delayed release 1000 mg	F	OTC
hm fish oil oral capsule 1200 mg	F	OTC
ILARIS SUBCUTANEOUS SOLUTION	Carve-out	
JAVYGTOR	Carve-out	
KUVAN ORAL PACKET	Carve-out	

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
KUVAN ORAL TABLET	Carve-out	
levocarnitine intravenous	Carve-out	
levocarnitine oral solution	Carve-out	
levocarnitine oral tablet	Carve-out	
levocarnitine sf	Carve-out	
LYDIA PINKHAM ORAL LIQUID	Carve-out	OTC
MAXIMUM EPA	F	OTC
melatonin oral liquid 1 mg/ml	F	OTC
miglustat	Carve-out	
movana	Carve-out	OTC
nitisinone	Carve-out	
NITYR	Carve-out	
omega 3 oral capsule 1000 mg	F	OTC
omega iii epa+dha	F	OTC
omega-3 fatty acids	F	OTC
omega-3 fish oil oral capsule 1000 mg, 1200 mg	F	OTC
omega-3 oral capsule 1000 mg	F	OTC
OPFOLDA	Carve-out	
ORFADIN	Carve-out	
PREZCOBIX	Carve-out	
PROCYSBI	Carve-out	
ra fish oil oral capsule 1000 mg	F	OTC
ra st johns wort oral tablet	Carve-out	OTC
REZUROCK	F	
sapropterin dihydrochloride oral packet	Carve-out	
sapropterin dihydrochloride oral tablet	Carve-out	
SKYCLARYS	Carve-out	Specialty Drug
sm fish oil oral capsule 1000 mg	F	OTC
sm fish oil oral capsule delayed release	F	OTC
sm omega-3 fish oil	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
sm st johns wort	Carve-out	OTC
SOHONOS	Carve-out	
st johns wort mood relaxer	Carve-out	OTC
st johns wort oral capsule 1000 mg, 150 mg, 300 mg	Carve-out	OTC
st johns wort oral tablet 300 mg	Carve-out	OTC
STRIBILD	Carve-out	
SYMTUZA	Carve-out	
TYBOST	Carve-out	
VIJOICE	Carve-out	
VOXZOGO	Carve-out	
ZARBEES SLEEP CHILD/MELATONIN ORAL LIQUID	F	OTC
ZAVESCA	Carve-out	
ZOKINVY	Carve-out	
<b>Protective Agents</b>		
MESNEX ORAL	F	Specialty Drug
<b>Nonhormonal Contraceptives</b>		
<b>Nonhormonal Contraceptives</b>		
aimsco lubricated	F	OTC; QL
CAYA	F	
FANTASY LUBRICATED	F	OTC; QL
FANTASY LUBRICATED/SPERMICIDE	F	OTC; QL
FC2 FEMALE CONDOM	F	OTC; QL
FEMCAP	F	
kimono	F	OTC; QL
kimono micro thin	F	OTC; QL
kimono micro thin plus	F	OTC; QL
kimono sensation	F	OTC; QL
kimono sensation plus	F	OTC; QL

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
maxx	F	OTC; QL
PHEXXI	F	QL
premium condoms lubricated	F	OTC; QL
TRUSTEX LUB/RIBBED/STUDED	F	OTC; QL
TRUSTEX LUB/SPERMICIDE EX ST	F	OTC; QL
TRUSTEX LUB/SPERMICIDE XL	F	OTC; QL
TRUSTEX LUBRICATED	F	OTC; QL
TRUSTEX LUBRICATED EX LARGE	F	OTC; QL
TRUSTEX LUBRICATED EXTRA ST	F	OTC; QL
TRUSTEX LUBRICATED/SPERMICIDE	F	OTC; QL
TRUSTEX NON-LUBRICATED	F	OTC; QL
TRUSTEX RIA LUB/SPERMICIDE	F	OTC; QL
TRUSTEX RIA LUBRICATED	F	OTC; QL
TRUSTEX RIA NON-LUBRICATED	F	OTC; QL
TRUSTEX-NONOXYNOL-9/RIB/STUD	F	OTC; QL
WIDE-SEAL DIAPHRAGM 60	F	
WIDE-SEAL DIAPHRAGM 65	F	
WIDE-SEAL DIAPHRAGM 70	F	
WIDE-SEAL DIAPHRAGM 75	F	
WIDE-SEAL DIAPHRAGM 80	F	
WIDE-SEAL DIAPHRAGM 85	F	
WIDE-SEAL DIAPHRAGM 90	F	
WIDE-SEAL DIAPHRAGM 95	F	
<b>Oxytocics</b>		
<b>Oxytocics</b>		
methylergonovine maleate oral	F	QL; AL
<b>Respiratory Tract Agents</b>		
<b>Alpha And Beta Adrenergic Agonist(Respr)</b>		

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
AUVI-Q INJECTION SOLUTION AUTO-INJECTOR	NP	PA; QL
epinephrine injection solution auto-injector 0.15 mg/0.15ml	NP	PA; QL
epinephrine injection solution auto-injector 0.15 mg/0.3ml, 0.3 mg/0.3ml	P	QL
EPIPEN 2-PAK INJECTION SOLUTION AUTO-INJECTOR	P	QL
EPIPEN JR 2-PAK INJECTION SOLUTION AUTO-INJECTOR	P	QL
SYMJEPI	NP	PA
<b>Anticholinergic Agents (Respir.Tract)</b>		
ATROVENT HFA	P	102 day supply allowed; QL
COMBIVENT RESPIMAT	P	102 day supply allowed; QL
ipratropium bromide inhalation	P	102 day supply allowed
ipratropium bromide nasal	P	
ipratropium-albuterol	P	102 day supply allowed
LONHALA MAGNAIR REFILL KIT	NP	PA; 102 day supply allowed
LONHALA MAGNAIR STARTER KIT	NP	PA; 102 day supply allowed
SPIRIVA HANDIHALER	P	102 day supply allowed; QL
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 1.25 MCG/ACT, 2.5 MCG/ACT	P	102 day supply allowed; QL
tiotropium bromide monohydrate	NP	PA; 102 day supply allowed; QL
<b>Anti-Inflammatory Agents (Respiratory)</b>		
NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	NP	PA; AL
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	NP	PA; AL
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.4ML	NP	PA; Specialty Drug; AL

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
<b>Antitussives</b>		
aler-cap	F	OTC; AL
ALKA-SELTZER PLUS ALLERGY	Carve-out	OTC
allergy childrens oral liquid	F	OTC
allergy relief childrens oral liquid	F	OTC
allergy relief oral capsule 25 mg	F	OTC; AL
allergy relief oral liquid	F	OTC
allergy relief oral tablet 25 mg	F	OTC
aurodryl allergy childrens	F	OTC
BANOPHEN ORAL CAPSULE 50 MG	F	OTC
BANOPHEN ORAL LIQUID	F	OTC
BANOPHEN ORAL TABLET	F	OTC
BENADRYL ALLERGY CHILDRENS ORAL LIQUID	F	OTC
BENADRYL ALLERGY ORAL TABLET	F	OTC
BENADRYL ALLERGY ULTRATABS	F	OTC
codeine sulfate oral tablet	P	QL; AL
complete allergy relief	F	OTC
compoz	Carve-out	OTC
cvs allergy relief adult	F	OTC
cvs allergy relief childrens oral liquid	F	OTC
cvs allergy relief oral capsule 25 mg	F	OTC; AL
cvs allergy relief oral liquid	F	OTC
cvs allergy relief oral tablet 25 mg	F	OTC
cvs childrens allergy	F	OTC
cvs sleep aid nighttime	Carve-out	OTC
cvs sleep aid oral tablet 25 mg	Carve-out	OTC
cvs sleep-aid nighttime oral capsule	Carve-out	OTC
diphen oral tablet	F	OTC
diphenhydramine hcl (sleep) oral tablet 50 mg	Carve-out	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
diphenhydramine hcl childrens	F	OTC
diphenhydramine hcl injection	F	AL
diphenhydramine hcl oral capsule	F	AL
diphenhydramine hcl oral liquid 12.5 mg/5ml	F	OTC
diphenhydramine hcl oral tablet 25 mg	Carve-out	OTC; AL
eq allergy relief childrens oral liquid	F	OTC
eq nighttime sleep aid max st	Carve-out	OTC
eql allergy relief oral tablet 25 mg	F	OTC
eql nighttime sleep aid	Carve-out	OTC
eql sleep aid oral capsule	Carve-out	OTC
eql sleep aid oral liquid	Carve-out	OTC
ft nighttime sleep aid	Carve-out	OTC
ft sleep-aid maximum strength	Carve-out	OTC
geri-dryl oral liquid	F	OTC
gnp allergy antihistamine	F	OTC
gnp allergy childrens	F	OTC
gnp allergy relief max st	F	OTC
gnp allergy relief oral capsule	F	OTC; AL
gnp allergy relief oral tablet 25 mg	F	OTC
gnp childrens allergy	F	OTC
gnp nighttime sleep aid	Carve-out	OTC
gnp nighttime sleep-aid max st	Carve-out	OTC
gnp sleep aid nighttime	Carve-out	OTC
gnp sleep aid oral liquid	Carve-out	OTC
gnp sleep time	Carve-out	OTC
goodsense sleeptime	Carve-out	OTC
h-e-b childrens allergy	F	OTC
hm allergy relief childrens	F	OTC
hm nighttime sleep aid oral tablet	Carve-out	OTC
hm z-sleep oral liquid	Carve-out	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
KINDERMED KIDS ALLERGY	F	OTC
liquid allergy relief	F	OTC
m-dryl	F	OTC
NARAMIN	F	OTC
night time sleep aid	Carve-out	OTC
nighttime sleep aid oral tablet 25 mg	Carve-out	OTC
NYTOL	Carve-out	OTC
NYTOL MAXIMUM STRENGTH	Carve-out	OTC
NYTOL QUICKCAPS	Carve-out	OTC
ormir	Carve-out	OTC
PEDIACARE CHILDRENS ALLERGY	F	OTC
pharbedryl oral capsule 25 mg	F	OTC; AL
px allergy oral capsule	F	OTC; AL
px allergy oral liquid	F	OTC
px allergy oral tablet	F	OTC
qc allergy childrens	F	OTC
qc rest simply	Carve-out	OTC
qc sleep aid max st	Carve-out	OTC
ra allergy medication oral liquid	F	OTC
ra allergy oral liquid	F	OTC
ra allergy relief childrens oral liquid	F	OTC
ra allergy relief oral capsule 25 mg	F	OTC; AL
ra complete allergy	F	OTC
RA DIPHEDRYL ALLERGY	F	OTC
ra nighttime sleep aid oral tablet	Carve-out	OTC
ra sleep aid (diphenhydramine)	Carve-out	OTC
ra sleep aid oral capsule	Carve-out	OTC
ra sleep-aid nighttime	Carve-out	OTC
sb allergy medicine oral liquid	F	OTC
sb allergy medicine oral tablet	Carve-out	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
sb sleep	Carve-out	OTC
siladryl allergy	F	OTC
SIMPLY SLEEP	Carve-out	OTC
sleep aid (diphenhydramine)	Carve-out	OTC
sleep aid oral capsule 25 mg	Carve-out	OTC
sleep aid oral liquid	Carve-out	OTC
sleep ii	Carve-out	OTC
sleep tabs oral tablet 25 mg	Carve-out	OTC
sleep-aid oral capsule	Carve-out	OTC
sleep-tabs	Carve-out	OTC
sm allergy relief childrens	F	OTC
sm allergy relief oral liquid	F	OTC
sm nighttime sleep aid	Carve-out	OTC
sm sleep aid maximum strength	Carve-out	OTC
sm z-sleep	Carve-out	OTC
SOMINEX	Carve-out	OTC
SOMINEX MAX ST	Carve-out	OTC
SOMINEX NIGHTTIME SLEEP-AID	Carve-out	OTC
tgt sleep aid max strength	Carve-out	OTC
total allergy	F	OTC
TOTAL ALLERGY MEDICINE	F	OTC
UNISOM SLEEPGELS	Carve-out	OTC
UNISOM SLEEPMELTS	Carve-out	OTC
UNISOM SLEEPMINIS	Carve-out	OTC
WAL-DRYL ALLERGY CHILDRENS	F	OTC
WAL-DRYL ALLERGY ORAL LIQUID	F	OTC
WAL-SLEEP Z	Carve-out	OTC
wal-som maximum strength	Carve-out	OTC
wal-som oral tablet dispersible	Carve-out	OTC
ZZZQUIL	Carve-out	OTC

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
<b>Cystic Fibrosis (Cftr) Correctors</b>		
ORKAMBI	Carve-out	
SYMDEKO	Carve-out	
TRIKAFTA	Carve-out	
<b>Cystic Fibrosis (Cftr) Potentiators</b>		
KALYDECO	Carve-out	
ORKAMBI	Carve-out	
SYMDEKO	Carve-out	
TRIKAFTA	Carve-out	
<b>Endothelin Receptor Antagonists</b>		
ambrisentan	P-PA	PA; Specialty Drug; 102 day supply allowed
bosentan	NP	PA; Specialty Drug; 102 day supply allowed
LETAIRIS	NP	PA; Specialty Drug; 102 day supply allowed
OPSUMIT	P-PA	PA; Specialty Drug; 102 day supply allowed
TRACLEER ORAL TABLET	P-PA	PA; Specialty Drug; 102 day supply allowed
TRACLEER ORAL TABLET SOLUBLE	NP	PA; Specialty Drug; 102 day supply allowed
<b>First Generation Antihist.(Respir Tract)</b>		
aler-cap	F	OTC; AL
ALKA-SELTZER PLUS ALLERGY	Carve-out	OTC
aller-chlor oral tablet	F	OTC
allergy childrens oral liquid	F	OTC
allergy oral tablet 4 mg	F	OTC
allergy relief childrens oral liquid	F	OTC
allergy relief oral capsule 25 mg	F	OTC; AL
allergy relief oral liquid	F	OTC

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
allergy relief oral tablet 25 mg, 4 mg	F	OTC
aurodryl allergy childrens	F	OTC
BANOPHEN ORAL CAPSULE 50 MG	F	OTC
BANOPHEN ORAL LIQUID	F	OTC
BANOPHEN ORAL TABLET	F	OTC
BENADRYL ALLERGY CHILDRENS ORAL LIQUID	F	OTC
BENADRYL ALLERGY ORAL TABLET	F	OTC
BENADRYL ALLERGY ULTRATABS	F	OTC
carbinoxamine maleate oral solution	F	
carbinoxamine maleate oral tablet 4 mg	F	
chlorhist	F	OTC
chlorpheniramine maleate oral	F	OTC
CHLOR-TRIMETON ORAL TABLET	F	OTC
clemastine fumarate oral syrup	F	
complete allergy relief	F	OTC
compoz	Carve-out	OTC
cvs allergy relief adult	F	OTC
cvs allergy relief childrens oral liquid	F	OTC
cvs allergy relief oral capsule 25 mg	F	OTC; AL
cvs allergy relief oral liquid	F	OTC
cvs allergy relief oral tablet 25 mg, 4 mg	F	OTC
cvs childrens allergy	F	OTC
cvs sleep aid nighttime	Carve-out	OTC
cvs sleep aid oral tablet 25 mg	Carve-out	OTC
cvs sleep-aid (doxylamine)	Carve-out	OTC
cvs sleep-aid nighttime oral capsule	Carve-out	OTC
cvs ultra sleep	Carve-out	OTC
cyproheptadine hcl oral	F	AL
DAYHIST ALLERGY 12 HOUR RELIEF	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
diphen oral tablet	F	OTC
diphenhydramine hcl (sleep) oral tablet 50 mg	Carve-out	OTC
diphenhydramine hcl childrens	F	OTC
diphenhydramine hcl injection	F	AL
diphenhydramine hcl oral capsule	F	AL
diphenhydramine hcl oral liquid 12.5 mg/5ml	F	OTC
diphenhydramine hcl oral tablet 25 mg	Carve-out	OTC; AL
eq allergy relief childrens oral liquid	F	OTC
eq chlortabs	F	OTC
eq nighttime sleep aid max st	Carve-out	OTC
eql allergy relief oral tablet 25 mg	F	OTC
eql nighttime sleep aid	Carve-out	OTC
eql sleep aid	Carve-out	OTC
ft nighttime sleep aid	Carve-out	OTC
ft sleep aid (doxylamine)	Carve-out	OTC
ft sleep-aid maximum strength	Carve-out	OTC
geri-dryl oral liquid	F	OTC
gnp allergy antihistamine	F	OTC
gnp allergy childrens	F	OTC
gnp allergy relief max st	F	OTC
gnp allergy relief oral capsule	F	OTC; AL
gnp allergy relief oral tablet 25 mg, 4 mg	F	OTC
gnp childrens allergy	F	OTC
gnp nighttime sleep aid	Carve-out	OTC
gnp nighttime sleep-aid max st	Carve-out	OTC
gnp sleep aid	Carve-out	OTC
gnp sleep aid nighttime	Carve-out	OTC
gnp sleep time	Carve-out	OTC
goodsense sleeptime	Carve-out	OTC
h-e-b childrens allergy	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
hm allergy relief childrens	F	OTC
hm allergy relief oral tablet 4 mg	F	OTC
hm nightttime sleep aid oral tablet	Carve-out	OTC
hm sleep aid	Carve-out	OTC
hm z-sleep oral liquid	Carve-out	OTC
KINDERMED KIDS ALLERGY	F	OTC
kls sleep aid	Carve-out	OTC
liquid allergy relief	F	OTC
m-dryl	F	OTC
NARAMIN	F	OTC
night time sleep aid	Carve-out	OTC
nighttime sleep aid oral tablet 25 mg	Carve-out	OTC
NYTOL	Carve-out	OTC
NYTOL MAXIMUM STRENGTH	Carve-out	OTC
NYTOL QUICKCAPS	Carve-out	OTC
ormir	Carve-out	OTC
PEDIACARE CHILDRENS ALLERGY	F	OTC
pharbechlor	F	OTC
pharbedryl oral capsule 25 mg	F	OTC; AL
promethazine hcl oral	F	AL
promethazine hcl rectal suppository 12.5 mg, 25 mg	F	QL; AL
px allergy oral capsule	F	OTC; AL
px allergy oral liquid	F	OTC
px allergy oral tablet	F	OTC
PX DAYHIST ALLERGY	F	OTC
qc allergy childrens	F	OTC
qc chlor-pheniramine	F	OTC
qc rest simply	Carve-out	OTC
qc sleep aid max st	Carve-out	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
ra allergy medication oral liquid	F	OTC
ra allergy oral liquid	F	OTC
ra allergy relief childrens oral liquid	F	OTC
ra allergy relief oral capsule 25 mg	F	OTC; AL
ra allergy relief oral tablet 4 mg	F	OTC
ra chlorpheniramine maleate	F	OTC
ra complete allergy	F	OTC
RA DIPHEDRYL ALLERGY	F	OTC
ra night sleep aid	Carve-out	OTC
ra nighttime sleep aid oral tablet	Carve-out	OTC
ra sleep aid (diphenhydramine)	Carve-out	OTC
ra sleep aid oral capsule	Carve-out	OTC
ra sleep aid oral tablet	Carve-out	OTC
ra sleep-aid nighttime	Carve-out	OTC
sb allergy medicine oral liquid	F	OTC
sb allergy medicine oral tablet	Carve-out	OTC
sb chlorpheniramine	F	OTC
sb sleep	Carve-out	OTC
siladryl allergy	F	OTC
SIMPLY SLEEP	Carve-out	OTC
sleep aid (diphenhydramine)	Carve-out	OTC
sleep aid (doxylamine)	Carve-out	OTC
sleep aid oral capsule 25 mg	Carve-out	OTC
sleep aid oral liquid	Carve-out	OTC
sleep aid oral tablet	Carve-out	OTC
sleep ii	Carve-out	OTC
sleep tabs oral tablet 25 mg	Carve-out	OTC
sleep-aid	Carve-out	OTC
sleep-tabs	Carve-out	OTC
sm allergy 4 hour	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
sm allergy relief childrens	F	OTC
sm allergy relief oral liquid	F	OTC
sm allergy relief oral tablet 1.34 mg	F	OTC
sm nighttime sleep aid	Carve-out	OTC
sm sleep aid	Carve-out	OTC
sm sleep aid maximum strength	Carve-out	OTC
sm z-sleep	Carve-out	OTC
SOMINEX	Carve-out	OTC
SOMINEX MAX ST	Carve-out	OTC
SOMINEX NIGHTTIME SLEEP-AID	Carve-out	OTC
tgt sleep aid max strength	Carve-out	OTC
total allergy	F	OTC
TOTAL ALLERGY MEDICINE	F	OTC
UNISOM SLEEPGELS	Carve-out	OTC
UNISOM SLEEPMELTS	Carve-out	OTC
UNISOM SLEEPMINIS	Carve-out	OTC
UNISOM SLEEPTABS	Carve-out	OTC
WAL-DRYL ALLERGY CHILDRENS	F	OTC
WAL-DRYL ALLERGY ORAL LIQUID	F	OTC
WAL-FINATE	F	OTC
WAL-SLEEP Z	Carve-out	OTC
wal-som	Carve-out	OTC
wal-som maximum strength	Carve-out	OTC
ZZZQUIL	Carve-out	OTC
<b>Interleukin Antagonists</b>		
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.67ML, 200 MG/1.14ML	P-PA	PA; Specialty Drug
FASENRA PEN	P-PA	PA; Specialty Drug; AL
<b>Leukotriene Modifiers</b>		

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
ACCOLATE	NP	PA; 102 day supply allowed
montelukast sodium oral packet	NP	PA; 102 day supply allowed; AL
montelukast sodium oral tablet	P	102 day supply allowed
montelukast sodium oral tablet chewable 4 mg, 5 mg	P	102 day supply allowed; AL
SINGULAIR ORAL PACKET	NP	PA; 102 day supply allowed; AL
SINGULAIR ORAL TABLET	NP	PA; 102 day supply allowed
SINGULAIR ORAL TABLET CHEWABLE 4 MG, 5 MG	NP	PA; 102 day supply allowed; AL
zafirlukast	NP	PA; 102 day supply allowed
zileuton er	NP	PA; 102 day supply allowed
ZYFLO	NP	PA; 102 day supply allowed
<b>Mast-Cell Stabilizers</b>		
ALOCRIIL	NP	PA
cromolyn sodium nasal	F	OTC
cromolyn sodium ophthalmic	P	
cromolyn sodium oral	F	
GASTROCROM	F	
NASALCROM	F	OTC
<b>Mucolytic Agents</b>		
acetylcysteine inhalation	F	
altamist spray	F	OTC
cvs saline nasal spray	F	OTC
deep sea nasal spray	F	OTC
eq saline nasal spray	F	OTC
eql saline nasal spray	F	OTC
gnp nasal moisturizing	F	OTC
hm saline nasal spray	F	OTC
HYPERSAL	F	
LITTLE REMEDIES SALINE	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
nasal moisturizing spray	F	OTC
NEBUSAL	F	
OCEAN NASAL SPRAY	F	OTC
PULMOSAL	F	
PULMOZYME INHALATION SOLUTION 2.5 MG/2.5ML	F	PA; Specialty Drug; QL
px saline nasal spray	F	OTC
saline mist spray	F	OTC
saline nasal spray	F	OTC
sm nasal spray saline	F	OTC
sodium chloride inhalation nebulization solution 0.9 %, 3 %, 7 %	F	
<b>Nasal Preparations (Steroids)</b>		
allergy relief nasal	NP	PA; OTC
azelastine-fluticasone	NP	PA
BECONASE AQ	NP	PA
budesonide nasal	NP	PA; OTC
cvs budesonide	NP	PA; OTC
cvs nasal allergy spray	NP	PA; OTC
DYMISTA	NP	PA
eq nasal allergy	NP	PA; OTC
flunisolide nasal solution 25 mcg/act (0.025%)	NP	PA
fluticasone propionate nasal	P	
gnp 24 hour nasal allergy	NP	PA; OTC
gnp budesonide nasal spray	NP	PA; OTC
goodsense nasal allergy spray	NP	PA; OTC
hm 24 hour nasal allergy	NP	PA; OTC
hm allergy relief nasal	NP	PA; OTC
KLS ALLER-CORT	NP	PA; OTC
mometasone furoate nasal	NP	PA

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
NASACORT ALLERGY 24HR CHILDREN	NP	PA; OTC
nasal allergy 24 hour	NP	PA; OTC
NASONEX 24HR	NP	PA; OTC
qc allergy relief nasal	NP	PA; OTC
QNASL	NP	PA
QNASL CHILDRENS	NP	PA
ra budesonide	NP	PA; OTC
ra nasal allergy	NP	PA; OTC
RYALTRIS	NP	PA
sm allergy relief nasal	NP	PA; OTC
triamcinolone acetone nasal aerosol	NP	PA; OTC
XHANCE	NP	PA
<b>Orally Inhaled Preparations (Steroids)</b>		
AIRSUPRA	NP	PA; 102 day supply allowed; QL
ARMONAIR DIGIHALER	NP	PA
ARNUITY ELLIPTA	NP	PA
budesonide inhalation	P	QL
FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/ACT, 250 MCG/ACT, 50 MCG/ACT	NP	PA
fluticasone propionate diskus	NP	PA
fluticasone propionate hfa inhalation aerosol 110 mcg/act, 220 mcg/act	P	102 day supply allowed; QL
fluticasone propionate hfa inhalation aerosol 44 mcg/act	P	PA; 102 day supply allowed; QL
PULMICORT	NP	PA; QL
PULMICORT FLEXHALER	NP	PA; 102 day supply allowed; QL
QVAR REDHALER	NP	PA
<b>Phosphodiesterase Type 4 Inhibitors</b>		
DALIRESP	NP	PA
roflumilast	P-PA	PA

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
<b>Phosphodiesterase-5 Inhibitors (Respir)</b>		
ADCIRCA	NP	PA; Specialty Drug; 102 day supply allowed
ALYQ	P-PA	PA; Specialty Drug; 102 day supply allowed
LIQREV	NP	PA; Specialty Drug
REVATIO ORAL	NP	PA; Specialty Drug; 102 day supply allowed
sildenafil citrate oral suspension reconstituted	P-PA	PA; Specialty Drug; 102 day supply allowed
sildenafil citrate oral tablet 20 mg	P-PA	PA; Specialty Drug; 102 day supply allowed
tadalafil (pah)	P-PA	PA; Specialty Drug; 102 day supply allowed
TADLIQ	NP	PA; Specialty Drug; AL
<b>Prostacyclin &amp; Prostacyclin Derivatives</b>		
ORENITRAM	NP	PA; Specialty Drug; 102 day supply allowed
ORENITRAM MONTH 1	NP	PA; Specialty Drug
ORENITRAM MONTH 2	NP	PA; Specialty Drug
ORENITRAM MONTH 3	NP	PA; Specialty Drug
TYVASO	P-PA	PA; Specialty Drug; 102 day supply allowed
TYVASO DPI MAINTENANCE KIT	NP	PA; Specialty Drug; 102 day supply allowed
TYVASO DPI TITRATION KIT	NP	PA; Specialty Drug; 102 day supply allowed
TYVASO REFILL	P-PA	PA; Specialty Drug; 102 day supply allowed
TYVASO STARTER	P-PA	PA; Specialty Drug; 102 day supply allowed
VENTAVIS	P-PA	PA; Specialty Drug; 102 day supply allowed

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
<b>Respiratory Tract Agents, Miscellaneous</b>		
BRONCHITOL	F	PA; QL; AL
BRONCHITOL TOLERANCE TEST	F	PA; QL; AL
TEZSPIRE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	NP	PA; Specialty Drug; AL
XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR	P-PA	PA; AL
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	P-PA	PA; AL
<b>Second Generation Antihist(Respir Tract)</b>		
12hr allergy relief	P	OTC
24hr allergy relief	P	OTC
all-day allergy childrens	P	OTC
aller-ease oral tablet 60 mg	P	OTC
allergy (cetirizine)	P	OTC
allergy 24hour indoor/outdoor	P	OTC
allergy 24-hr	P	OTC
allergy childrens oral suspension	P	OTC
allergy childrens oral syrup	P	OTC
allergy rel child (loratadine)	P	OTC
allergy relief (cetirizine) oral capsule	NP	PA; OTC
allergy relief (cetirizine) oral tablet	P	OTC
allergy relief (loratadine) oral tablet	P	OTC
allergy relief 24-hr	P	OTC
allergy relief cetirizine	P	OTC
allergy relief childrens oral solution 1 mg/ml	P	OTC
allergy relief oral tablet 10 mg, 180 mg, 60 mg	P	OTC
allergy relief/indoor/outdoor oral tablet 10 mg	P	OTC
azelastine hcl nasal	P	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
azelastine hcl ophthalmic	P	
azelastine-fluticasone	NP	PA
cetirizine hcl allergy child	P	
cetirizine hcl childrens alrgy oral solution	P	OTC
cetirizine hcl childrens oral solution 5 mg/5ml	NP	PA; OTC
cetirizine hcl childrens oral tablet chewable	NP	PA; OTC
cetirizine hcl oral solution 1 mg/ml	P	
cetirizine hcl oral tablet	P	OTC
cetirizine hcl oral tablet chewable	NP	PA; OTC
childrens 24 hour allergy	P	OTC
childrens loratadine oral solution	P	OTC
CLARINEX ORAL TABLET	NP	PA
CLARITIN REDITABS ORAL TABLET DISPERSIBLE 10 MG	P	OTC
cvs allergy childrens oral syrup	P	OTC
cvs allergy relief childrens oral solution	P	OTC
cvs allergy relief childrens oral suspension	P	OTC
cvs allergy relief oral tablet 10 mg, 180 mg	P	OTC
cvs allergy relief(cetirizine)	P	OTC
cvs indoor/outdoor allergy rlf oral tablet	P	OTC
desloratadine oral tablet	NP	PA
desloratadine oral tablet dispersible 2.5 mg	NP	PA; AL
desloratadine oral tablet dispersible 5 mg	NP	PA
DYMISTA	NP	PA
eq allergy childrens oral syrup	P	OTC
eq allergy relief (cetirizine)	P	OTC
eq allergy relief childrens oral solution	P	OTC
eq allergy relief oral tablet 10 mg, 180 mg	P	OTC
eq1 all day allergy	P	OTC
eq1 aller-ease	P	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
eql allergy relief oral tablet 10 mg, 180 mg	P	OTC
fexofenadine hcl oral tablet 180 mg, 60 mg	P	OTC
gnp all day allergy childrens oral solution	P	OTC
gnp all day allergy relief	NP	PA; OTC
gnp loratadine	P	OTC
gnp loratadine childrens oral solution	P	OTC
gnp loratadine childrens oral tablet chewable	P	OTC
goodsense all day allergy	P	OTC
goodsense aller-ease	P	OTC
goodsense allergy relief oral tablet 10 mg	P	OTC
hm all day allergy	P	OTC
hm all day allergy childrens	P	OTC
hm allergy relief (cetirizine)	P	OTC
hm allergy relief oral tablet 180 mg, 60 mg	P	OTC
hm cetirizine hcl	P	OTC
hm cetirizine hcl childrens	P	OTC
hm fexofenadine hcl	P	OTC
hm loratadine	P	OTC
KLS ALLER-TEC CHILDRENS ORAL SOLUTION 5 MG/5ML	P	OTC
loradamed	P	OTC
loratadine childrens oral solution	P	OTC
loratadine childrens oral syrup	P	OTC
loratadine oral tablet	P	OTC
loratadine oral tablet dispersible 10 mg	P	OTC
mm cetirizine hcl	P	OTC
mm fexofenadine hcl	P	OTC
px allergy relief cetirizine	P	OTC
px allergy relief loratadine	P	OTC
px allergy relief oral tablet	P	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
px childrens allergy	P	OTC
qc all day allergy	P	OTC
qc allergy relief oral tablet 180 mg	P	OTC
qc childrens allergy	P	OTC
qc fexofenadine hydrochloride	P	OTC
qc loratadine allergy relief	P	OTC
ra allergy relief (cetirizine)	P	OTC
ra allergy relief (loratadine)	P	OTC
ra allergy relief childrens oral solution 5 mg/5ml	P	OTC
ra allergy relief oral capsule 10 mg	NP	PA; OTC
ra allergy relief oral tablet 180 mg	P	OTC
sb allergy oral tablet	P	OTC
sb loratadine oral tablet	P	OTC
sm all day allergy childrens oral solution 5 mg/5ml	P	OTC
sm all day allergy relief	P	OTC
sm allergy childrens oral solution	P	OTC
sm allergy relief oral tablet 60 mg	P	OTC
sm childrens loratadine oral syrup	P	OTC
sm fexofenadine hcl	P	OTC
sm loratadine oral solution	P	OTC
sm loratadine oral syrup	P	OTC
WAL-FEX ALLERGY	P	OTC
WAL-ITIN CHILDRENS	P	OTC
WAL-ITIN ORAL SYRUP	P	OTC
WAL-ZYR ALL DAY ALLERGY CHILD	P	OTC
WAL-ZYR ALLERGY CHILDRENS	P	OTC
WAL-ZYR CHILDRENS ORAL SOLUTION	P	OTC
WAL-ZYR CHILDRENS ORAL TABLET CHEWABLE 10 MG	NP	PA; OTC
WAL-ZYR ORAL CAPSULE	NP	PA; OTC

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
WAL-ZYR ORAL TABLET	P	OTC
ZERVIATE	NP	PA
<b>Select.Beta-2-Adrenergic Agonist(Respir)</b>		
AIRSUPRA	NP	PA; 102 day supply allowed; QL
albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act	NP	PA; 102 day supply allowed; QL
albuterol sulfate inhalation nebulization solution (5 mg/ml) 0.5%, 0.63 mg/3ml, 2.5 mg/0.5ml	P	102 day supply allowed
albuterol sulfate inhalation nebulization solution 1.25 mg/3ml	P	
formoterol fumarate inhalation	NP	PA; 102 day supply allowed
levalbuterol hcl inhalation nebulization solution 0.31 mg/3ml, 0.63 mg/3ml, 1.25 mg/0.5ml, 1.25 mg/3ml	NP	PA; 102 day supply allowed
levalbuterol tartrate	NP	PA; 102 day supply allowed; QL
PERFOROMIST	NP	PA; 102 day supply allowed
PROAIR DIGIHALER INHALATION AEROSOL POWDER BREATH ACTIVATED 108 (90 BASE) MCG/ACT	NP	PA; 102 day supply allowed; QL
PROAIR RESPICLICK	NP	PA; 102 day supply allowed; QL
PROVENTIL HFA	P	102 day supply allowed; QL
SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 50 MCG/ACT	P	102 day supply allowed; QL
STRIVERDI RESPIMAT	NP	PA; 102 day supply allowed
terbutaline sulfate oral	F	
VENTOLIN HFA	P	102 day supply allowed; QL
XOPENEX	NP	PA; 102 day supply allowed
XOPENEX CONCENTRATE	NP	PA; 102 day supply allowed
XOPENEX HFA	P	102 day supply allowed; QL
<b>Vasodilating Agents (Respiratory Tract)</b>		

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
ADCIRCA	NP	PA; Specialty Drug; 102 day supply allowed
ADEMPAS	P-PA	PA; Specialty Drug; 102 day supply allowed
ALYQ	P-PA	PA; Specialty Drug; 102 day supply allowed
ambrisentan	P-PA	PA; Specialty Drug; 102 day supply allowed
bosentan	NP	PA; Specialty Drug; 102 day supply allowed
LETAIRIS	NP	PA; Specialty Drug; 102 day supply allowed
OPSUMIT	P-PA	PA; Specialty Drug; 102 day supply allowed
ORENITRAM	NP	PA; Specialty Drug; 102 day supply allowed
ORENITRAM MONTH 1	NP	PA; Specialty Drug
ORENITRAM MONTH 2	NP	PA; Specialty Drug
ORENITRAM MONTH 3	NP	PA; Specialty Drug
REVATIO ORAL	NP	PA; Specialty Drug; 102 day supply allowed
sildenafil citrate oral suspension reconstituted	P-PA	PA; Specialty Drug; 102 day supply allowed
sildenafil citrate oral tablet 20 mg	P-PA	PA; Specialty Drug; 102 day supply allowed
tadalafil (pah)	P-PA	PA; Specialty Drug; 102 day supply allowed
TADLIQ	NP	PA; Specialty Drug; AL
TRACLEER ORAL TABLET	P-PA	PA; Specialty Drug; 102 day supply allowed
TRACLEER ORAL TABLET SOLUBLE	NP	PA; Specialty Drug; 102 day supply allowed
TYVASO	P-PA	PA; Specialty Drug; 102 day supply allowed

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
TYVASO DPI MAINTENANCE KIT	NP	PA; Specialty Drug; 102 day supply allowed
TYVASO DPI TITRATION KIT	NP	PA; Specialty Drug; 102 day supply allowed
TYVASO REFILL	P-PA	PA; Specialty Drug; 102 day supply allowed
TYVASO STARTER	P-PA	PA; Specialty Drug; 102 day supply allowed
UPTRAVI ORAL	P-PA	PA; Specialty Drug; 102 day supply allowed
UPTRAVI TITRATION	P-PA	PA; Specialty Drug; 102 day supply allowed
VENTAVIS	P-PA	PA; Specialty Drug; 102 day supply allowed
<b>Vasodilating Agents, Misc</b>		
ADEMPAS	P-PA	PA; Specialty Drug; 102 day supply allowed
UPTRAVI ORAL	P-PA	PA; Specialty Drug; 102 day supply allowed
UPTRAVI TITRATION	P-PA	PA; Specialty Drug; 102 day supply allowed
<b>Xanthine Derivatives</b>		
theophylline er oral tablet extended release 12 hour 300 mg, 450 mg	F	
theophylline er oral tablet extended release 24 hour 400 mg	F	
theophylline oral	F	
<b>Skin And Mucous Membrane Agents</b>		
<b>Allylamines (Skin And Mucous Membrane)</b>		
athletes foot (terbinafine)	F	OTC
eq athletes foot (terbinafine)	F	OTC
eql athletes foot(terbinafine)	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
gnp terbinafine hydrochloride	F	OTC
naftifine hcl external cream	NP	PA
naftifine hcl external gel 1 %	NP	PA
NAFTIN EXTERNAL GEL	NP	PA
sm athletes foot external cream	F	OTC
terbinafine hcl external	F	OTC
<b>Antibacterials (Skin, Mucous Membrane)</b>		
ACANYA	NP	PA
bacitracin external	F	OTC
bacitracin zinc external	F	OTC
bacitracin zinc-aloe	F	OTC
BENZAACLIN WITH PUMP	NP	PA
benzoyl peroxide-erythromycin	F	
CENTANY	NP	PA
CENTANY AT	NP	PA
CLEOCIN VAGINAL CREAM	NP	PA
CLEOCIN VAGINAL SUPPOSITORY	P	
clindamycin phos-benzoyl perox external gel 1.2-3.75 %	NP	PA
clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-2.5 %, 1.2-5 %	P	
clindamycin phosphate external solution	F	QL
clindamycin phosphate external swab	F	
clindamycin phosphate vaginal	P	
CLINDESSE	P	
cvs bacitracin	F	OTC
cvs bacitracin zinc	F	OTC
eq bacitracin zinc	F	OTC
eq triple antibiotic	F	OTC
eql bacitracin zinc	F	OTC

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
eq1 first aid antibiotic external ointment 3.5-400-5000	F	OTC
erythromycin external solution	F	
first aid antibiotic external ointment 3.5-400-5000 mg-unit	F	OTC
gentamicin sulfate external	F	
gnp bacitracin zinc	F	OTC
gnp triple antibiotic external ointment	F	OTC
goodsense first aid antibiotic	F	OTC
hm bacitracin zinc	F	OTC
hm triple antibiotic	F	OTC
kp bacitracin zinc	F	OTC
medi-first triple antibiotic	F	OTC
metronidazole external cream	F	
metronidazole external gel 0.75 %	F	
metronidazole vaginal	P	
mupirocin calcium	NP	PA
mupirocin external	P	
neomycin sulfate oral	P	
NEUAC	NP	PA
NUVESSA	P	
ONEXTON	NP	PA
px triple	F	OTC
qc bacitracin	F	OTC
ra bacitracin zinc first aid	F	OTC
ra triple antibiotic external ointment	F	OTC
sm antibiotic	F	OTC
sm triple antibiotic external ointment 3.5-400-5000	F	OTC
sm triple antibiotic original	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
sulfacetamide sodium-sulfur external liquid 10-5 %	F	QL
triple antibiotic external ointment , 3.5-400-5000 , 5-400-5000 mg-unit	F	OTC
VANDAZOLE	NP	PA
XACIATO	NP	PA; AL
XEPI	NP	PA; QL
<b>Anti-Inflammatory Agents, Misc (Skin)</b>		
EUCRISA	P-PA	PA; QL; AL
VTAMA	F	PA; AL
<b>Antipruritics And Local Anesthetics</b>		
ASPERCREME LIDOCAINE EXTERNAL PATCH	F	OTC; QL
asperflex max st	F	OTC; QL
ASPERFLEX PAIN RELIEVING	F	OTC; QL
BLUE-EMU PAIN RELIEF DRY	F	OTC; QL
cvs pain relief external patch	F	OTC; QL
DULOXICAINE	Carve-out	
eq lidocaine pain relieving	F	OTC; QL
FIRST CARE PAIN RELIEF	F	OTC; QL
GABACAINE	Carve-out	
GABAPAL COMBINATION THERAPY PACK 100 & 3.88 MG & %	Carve-out	
GLYDO EXTERNAL PREFILLED SYRINGE	F	
gnp lidocaine pain relief	F	OTC; QL
hm lidocaine patch	F	OTC; QL
LIDO KING	F	OTC; QL
lidocaine external ointment 5 %	F	QL
lidocaine external patch 5 %	F	PA; QL
lidocaine hcl external cream 3 %	F	QL

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
lidocaine hcl urethral/mucosal external prefilled syringe	F	
lidocaine max st 24 hours	F	OTC; QL
lidocaine pain relief	F	OTC; QL
lidocaine pain relief max st external patch	F	OTC; QL
lidocaine pain relieving	F	OTC; QL
lidocaine-prilocaine external cream	F	QL
LIDOCARE ARM/NECK/LEG	F	OTC; QL
LIDOCARE BACK/SHOULDER	F	OTC; QL
LIDOFOR FLEXIPATCH	F	OTC; QL
lidoreal-30	F	OTC; QL
LIDOTIN	Carve-out	
lidozo	F	OTC; QL
LIPRITIN	Carve-out	
LIPRITIN II COMBINATION THERAPY PACK 100 MG	Carve-out	
PENTICAN	Carve-out	
phenazopyridine hcl oral tablet 100 mg, 200 mg	F	
SALONPAS PAIN RELIEVING	F	OTC; QL
<b>Antivirals (Skin And Mucous Membrane)</b>		
acyclovir external cream	NP	PA; 102 day supply allowed
acyclovir external ointment	P	102 day supply allowed
DENAVIR	P	102 day supply allowed
docosanol external	F	OTC
gnp docosanol	F	OTC
hm docosanol	F	OTC
penciclovir	NP	PA; 102 day supply allowed
XERESE	NP	PA; 102 day supply allowed
ZOVIRAX EXTERNAL CREAM	P	102 day supply allowed
ZOVIRAX EXTERNAL OINTMENT	NP	PA; 102 day supply allowed

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
<b>Astringents</b>		
miconazole-zinc oxide-petrolat	NP	PA
VUSION	NP	PA
<b>Azoles (Skin And Mucous Membrane)</b>		
3 day vaginal	F	OTC
antifungal (clotrimazole)	P	OTC
antifungal clotrimazole	P	OTC
anti-fungal external cream 1 %	P	OTC
antifungal external cream 2 %	P	OTC
athletes foot (clotrimazole)	P	OTC
baza antifungal	P	OTC
clotrimazole 3	F	OTC
clotrimazole af	P	OTC
clotrimazole anti-fungal	P	
clotrimazole athletes foot	P	OTC
clotrimazole external cream	P	
clotrimazole external solution	P	
clotrimazole mouth/throat troche	P	
clotrimazole vaginal cream 1 %	F	OTC
clotrimazole-7	F	OTC
clotrimazole-betamethasone external cream	P	
clotrimazole-betamethasone external lotion	NP	PA
cvs clotrimazole	P	OTC
cvs clotrimazole 3	F	OTC
cvs itch relief external cream 1 %	P	OTC
cvs miconazole 3 combo pack	F	OTC
cvs miconazole 3 combo-supp	F	OTC
cvs miconazole 7	F	OTC
cvs ringworm	P	OTC
econazole nitrate external	NP	PA

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
eq athletes foot external cream	P	OTC
eq jock itch	P	OTC
eq miconazole 7 day treatment	F	OTC
eq antifungal	P	OTC
eq miconazole 7	F	OTC
ERTACZO	NP	PA
EXELDERM	NP	PA
EXTINA	NP	PA
gnp athletes foot external cream	P	OTC
gnp clotrimazole 3	F	OTC
gnp miconazole 3	F	OTC
gnp miconazole 7	F	OTC
goodsense athletes foot	P	OTC
GYNE-LOTRIMIN 3	F	OTC
jock itch	P	OTC
jock itch relief	P	OTC
JUBLIA	NP	PA; AL
ketoconazole external cream	P	
ketoconazole external foam	NP	PA
ketoconazole external shampoo 2 %	P	
KETODAN	NP	PA
kp miconazole nitrate	P	OTC
LOTRIMIN AF EXTERNAL CREAM	NP	PA; OTC
luliconazole	NP	PA
LUZU	NP	PA
miconazole 3 applicator	F	OTC
miconazole 3 combo-supp	F	OTC
miconazole 7	F	OTC
miconazole antifungal	P	OTC
miconazole nitrate external cream	P	

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miconazole-zinc oxide-petrolat	NP	PA
MICOTRIN AC	P	OTC
MONISTAT 3 COMBINATION PACK VAGINAL KIT 200 & 2 MG-% (9GM)	F	OTC
MONISTAT 3 COMBO PACK APP	F	OTC
MYCOZYL AC	NP	PA; OTC
ORAVIG	NP	PA
oxiconazole nitrate	NP	PA
OXISTAT	NP	PA
px athletic foot	P	OTC
px miconazole 3-day combo	F	OTC
qc clotrimazole vaginal	F	OTC
qc miconazole 7 vaginal cream	F	OTC
ra athletes foot	P	OTC
ra clotrimazole	P	OTC
ra clotrimazole 7	F	OTC
ra jock itch	P	OTC
ra miconazole 3 combo pack	F	OTC
ra miconazole 7	F	OTC
sm 3-day vaginal	F	OTC
sm antifungal clotrimazole	P	OTC
sm antifungal miconazole	P	OTC
sm clotrimazole vaginal	F	OTC
sm miconazole 3	F	OTC
sm miconazole 3 applicator	F	OTC
sm miconazole 7	F	OTC
sulconazole nitrate	NP	PA
terconazole vaginal cream	F	
VUSION	NP	PA
<b>Basic Lotions And Liniments</b>		

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
ammonium lactate external	F	QL
<b>Basic Ointments And Protectants</b>		
BESER EXTERNAL KIT	NP	PA
CORTIZONE-10 INTENSIVE HEALING	P	OTC
CORTIZONE-10 PLUS	P	OTC
CORTIZONE-10/ALOE EXTERNAL CREAM	P	OTC
CORTIZONE-10/ALOE EXTERNAL LIQUID	NP	PA; OTC
gnp hydrocortisone/aloe	P	OTC
hm hydrocortisone plus	P	OTC
hm hydrocortisone-aloe max st	P	OTC
hydrocortisone external cream 0.5 %	P	OTC
hydrocortisone external cream 1 %	P	
hydrocortisone/aloe max str	P	OTC
NEUAC EXTERNAL KIT	NP	PA
qc anti-itch aloe	P	OTC
sm hydrocortisone plus	P	OTC
sm hydrocortisone-aloe max st	P	OTC
SYNALAR (CREAM)	NP	PA
SYNALAR (OINTMENT)	NP	PA
triadime-80	NP	PA
triheal-80	NP	PA
TRIVIX	NP	PA
<b>Benzylamines (Skin And Mucous Membrane)</b>		
butenafine hcl	NP	PA; OTC
cvs butenafine hcl	NP	PA; OTC
MENTAX	NP	PA
<b>Cell Stimulants And Proliferants</b>		
tretinoin external cream 0.025 %, 0.05 %	F	QL; AL

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
<b>Corticosteroids (Skin, Mucous Membrane)</b>		
alclometasone dipropionate	NP	PA
anti-itch maximum strength external cream 1 %	P	OTC
ANUSOL-HC EXTERNAL	F	
APEXICON E	NP	PA
AQUAPHOR ITCH RELIEF MAX STR	P	OTC
BESER	NP	PA
betamethasone dipropionate aug	NP	PA
betamethasone dipropionate external	P	
betamethasone valerate external cream	P	
betamethasone valerate external foam	NP	PA
betamethasone valerate external lotion	P	
betamethasone valerate external ointment	P	
BRYHALI	NP	PA
clobetasol prop emollient base	NP	PA
clobetasol propionate e	NP	PA
clobetasol propionate emulsion	NP	PA
clobetasol propionate external cream	P	
clobetasol propionate external foam	NP	PA
clobetasol propionate external gel	NP	PA
clobetasol propionate external liquid	NP	PA
clobetasol propionate external lotion	NP	PA
clobetasol propionate external ointment	P	
clobetasol propionate external shampoo	NP	PA
clobetasol propionate external solution	P	
CLOBEX EXTERNAL SHAMPOO	NP	PA
CLOBEX SPRAY	NP	PA
clocortolone pivalate	NP	PA
CLODAN	NP	PA

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
CLODERM	NP	PA
clotrimazole-betamethasone external cream	P	
clotrimazole-betamethasone external lotion	NP	PA
CORDRAN EXTERNAL OINTMENT	NP	PA
CORTIZONE-10 EXTERNAL OINTMENT	P	OTC
CORTIZONE-10 FEMININE ITCH	P	OTC
CORTIZONE-10 INTENSIVE HEALING	P	OTC
CORTIZONE-10 OVERNIGHT ITCH	P	OTC
CORTIZONE-10 PLUS	P	OTC
CORTIZONE-10/ALOE EXTERNAL CREAM	P	OTC
CORTIZONE-10/ALOE EXTERNAL LIQUID	NP	PA; OTC
cvs anti-itch maximum strength	P	OTC
cvs cortisone maximum strength external ointment	P	OTC
cvs hydrocortisone anti-itch external cream 1 %	P	OTC
DERMA-SMOOTH/FS BODY	NP	PA
DERMA-SMOOTH/FS SCALP	NP	PA
desonide external	NP	PA
desoximetasone external	NP	PA
DESRX	NP	PA
diflorasone diacetate external	NP	PA
DIPROLENE EXTERNAL OINTMENT	NP	PA
eq hydrocortisone	P	OTC
eql anti-itch intensive heal	P	OTC
eql anti-itch maximum strength	P	OTC
fluocinolone acetonide body	NP	PA
fluocinolone acetonide external	NP	PA
fluocinolone acetonide scalp	NP	PA
fluocinonide emulsified base	NP	PA
fluocinonide external	NP	PA

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flurandrenolide	NP	PA
fluticasone propionate external cream	P	
fluticasone propionate external lotion	NP	PA
fluticasone propionate external ointment	P	
gnp hydrocortisone external cream 0.5 %	P	OTC
gnp hydrocortisone max st	P	OTC
gnp hydrocortisone plus	P	OTC
gnp hydrocortisone/aloe	P	OTC
halcinonide	NP	PA
halobetasol propionate external cream	P	
halobetasol propionate external foam	NP	PA
halobetasol propionate external ointment	P	
HALOG	NP	PA
hm hydrocortisone plus	P	OTC
hm hydrocortisone-aloe max st	P	OTC
hydrocortisone (perianal) external cream 2.5 %	F	
hydrocortisone acetate external cream	P	OTC
hydrocortisone acetate external ointment 1 %	P	OTC
hydrocortisone anti-itch	P	OTC
hydrocortisone butyr lipo base	NP	PA
hydrocortisone butyrate external	NP	PA
hydrocortisone external cream 0.5 %	P	OTC
hydrocortisone external cream 1 %, 2.5 %	P	
hydrocortisone external lotion 2.5 %	P	
hydrocortisone external ointment 1 %, 2.5 %	P	
hydrocortisone max st	P	OTC
hydrocortisone max st/12 moist	P	OTC
hydrocortisone valerate	NP	PA
hydrocortisone/aloe max str	P	OTC
IMPEKLO	NP	PA

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
KENALOG EXTERNAL	NP	PA
kp hydrocortisone	P	OTC
kp hydrocortisone max st	P	OTC
LEXETTE	NP	PA
LOCOID EXTERNAL LOTION	NP	PA
LOCOID LIPOCREAM	NP	PA
MEDPURA HYDROCORTISONE	P	OTC
mometasone furoate external	P	
MONISTAT CARE INSTANT ITCH RLF	P	OTC
NOLIX	NP	PA
nystatin-triamcinolone	P	
OLUX	NP	PA
PANDEL	NP	PA
prednicarbate	NP	PA
PREPARATION H EXTERNAL CREAM 1 %	P	OTC
PROCTOCORT EXTERNAL	NP	PA
PROCTO-MED HC EXTERNAL	F	
PROCTOSOL HC EXTERNAL	F	
PROCTOZONE-HC EXTERNAL	F	
px hydrocream	P	OTC
qc anti-itch aloe	P	OTC
qc anti-itch intensive healing	P	OTC
ra anti-itch maximum strength	P	OTC
ra hydrocortisone plus 12	P	OTC
sb hydrocortisone	P	OTC
scalp relief maximum strength	NP	PA; OTC
SERNIVO	NP	PA
sm hydrocortisone external cream 1 %	P	OTC
sm hydrocortisone max st	P	OTC
sm hydrocortisone plus	P	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
sm hydrocortisone-aloe max st	P	OTC
SYNALAR	NP	PA
SYNALAR (CREAM)	NP	PA
SYNALAR (OINTMENT)	NP	PA
SYNALAR TS	NP	PA
TEMOVATE EXTERNAL OINTMENT	NP	PA
TEXACORT	NP	PA
TOPICORT EXTERNAL CREAM	NP	PA
TOPICORT EXTERNAL GEL	NP	PA
TOPICORT EXTERNAL OINTMENT	NP	PA
TOPICORT SPRAY	NP	PA
TOVET	NP	PA
triadime-80	NP	PA
triamcinolone acetonide external aerosol solution	NP	PA
triamcinolone acetonide external cream	P	
triamcinolone acetonide external lotion	P	
triamcinolone acetonide external ointment	P	
triamcinolone acetonide mouth/throat	F	QL
triamcinolone in absorbase	P	
TRIDERM EXTERNAL CREAM	P	
TRIDESILON	NP	PA
triheal-80	NP	PA
TRITOCIN	P	
TRIVIX	NP	PA
ULTRAVATE EXTERNAL LOTION	NP	PA
VANOS	NP	PA
XERESE	NP	PA; 102 day supply allowed
<b>Detergents</b>		
CLODAN EXTERNAL KIT	NP	PA

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
<b>Emollients, Demulcents, And Protectants</b>		
miconazole-zinc oxide-petrolat	NP	PA
VUSION	NP	PA
<b>Hydroxypyridones (Skin, Mucous Membrane)</b>		
CICLODAN EXTERNAL SOLUTION	NP	PA
ciclopirox external gel	NP	PA
ciclopirox external shampoo	NP	PA
ciclopirox external solution	P	
ciclopirox olamine external cream	P	
ciclopirox olamine external suspension	NP	PA
ciclopirox treatment	NP	PA
LOPROX EXTERNAL CREAM	NP	PA
LOPROX EXTERNAL KIT	NP	PA
LOPROX EXTERNAL SHAMPOO	NP	PA
LOPROX EXTERNAL SUSPENSION	NP	PA
<b>Immunomodulatory Agent(S)</b>		
ADBRY	P-PA	PA; QL
BIMZELX	NP	PA; AL
ELIDEL	P-PA	PA; QL; AL
HYFTOR	F	PA; AL
ILUMYA	NP	PA; Specialty Drug
pimecrolimus	P-PA	PA; QL; AL
PROTOPIC EXTERNAL OINTMENT 0.03 %, 0.1 %	NP	PA; QL; AL
SILIQ	NP	PA; Specialty Drug
SKYRIZI (150 MG DOSE)	NP	PA; Specialty Drug
SKYRIZI PEN	NP	PA; Specialty Drug

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	NP	PA; Specialty Drug
tacrolimus external ointment 0.03 %, 0.1 %	NP	PA; QL; AL
TREMFYA	NP	PA; Specialty Drug
<b>Keratolytic Agents</b>		
sulfacetamide sodium-sulfur external liquid 10-5 %	F	QL
<b>Local Anti-Infectives, Miscellaneous</b>		
ACANYA	NP	PA
acne medication 10 external gel	F	OTC; QL
acne treatment external gel	F	OTC; QL
acne-clear	F	OTC; QL
adapalene-benzoyl peroxide external gel 0.1-2.5 %	F	QL; AL
BENZAACLIN WITH PUMP	NP	PA
benzoyl peroxide external gel 10 %	F	QL
benzoyl peroxide external gel 5 %	F	OTC
benzoyl peroxide external liquid 10 %	F	OTC
benzoyl peroxide wash external liquid 10 %	F	
benzoyl peroxide wash external liquid 5 %	F	OTC
benzoyl peroxide-erythromycin	F	
bp gel external gel 10 %	F	OTC; QL
chlorhexidine gluconate mouth/throat	F	
CLEAN & CLEAR PERSA-GEL MAX ST	F	OTC; QL
clindamycin phos-benzoyl perox external gel 1.2-3.75 %	NP	PA
clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-2.5 %, 1.2-5 %	P	
cvs acne treatment external gel	F	OTC; QL
MEDPURA BENZOYL PEROXIDE EXTERNAL GEL 10 %	F	OTC; QL

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MEDPURA BENZOYL PEROXIDE EXTERNAL GEL 5 %	F	OTC
MEDPURA BENZOYL PEROXIDE EXTERNAL LIQUID	F	OTC
NEUAC	NP	PA
ONEXTON	NP	PA
PANOXYL FOAMING WASH	F	OTC
PAROEX	F	
selenium sulfide external lotion	F	
silver sulfadiazine external	F	
SSD	F	
SSD (SILVER SULFADIAZINE)	F	
<b>Nonsteroidal Anti-Inflammat.Agents(Skin)</b>		
arthritis pain reliever external	P	OTC
cvs diclofenac sodium	P	OTC
diclofenac sodium external gel 1 %	P	
diclofenac sodium external gel 3 %	F	
diclofenac sodium external solution 1.5 %	P	
diclofenac sodium external solution 2 %	NP	PA
diclofenac sodium transdermal gel 3 %	F	
eq arthritis pain external	P	OTC
gnp arthritis pain external	P	OTC
goodsense arthritis pain external	P	OTC
kls diclofenac sodium	P	OTC
PENNSAID EXTERNAL	NP	PA
qc diclofenac sodium	P	OTC
sm arthritis pain	P	OTC
SOLARAZE	F	
<b>Oxaboroles</b>		

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
KERYDIN	NP	PA; AL
tavaborole	NP	PA
<b>Polyenes (Skin And Mucous Membrane)</b>		
KLAYESTA	P	
NYAMYC	P	
nystatin external	P	
nystatin-triamcinolone	P	
NYSTOP	P	
<b>Scabicides And Pediculicides</b>		
cvs lice killing	F	OTC; QL
cvs lice treatment	F	OTC; QL
eql lice killing max st	F	OTC; QL
gnp lice treatment	F	OTC; QL
goodsense lice killing	F	OTC; QL
hm lice killing max st	F	OTC; QL
hm lice treatment external liquid	F	OTC; QL
lice killing	F	OTC; QL
lice killing maximum strength external shampoo	F	OTC; QL
lice treatment creme rinse	F	OTC; QL
lice treatment external liquid 1 %	F	OTC; QL
lice treatment external lotion	F	OTC; QL
lindane external shampoo	F	QL
malathion external	F	ST; QL
NIX CREME RINSE	F	OTC; QL
permethrin external cream	F	QL
ra lice maximum strength external shampoo	F	OTC; QL
RID EXTERNAL LIQUID	F	OTC; QL
RID LICE KILLING SHAMPOO	F	OTC; QL
sb lice killing max st	F	OTC; QL
sm lice killing	F	OTC; QL

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
sm lice treatment	F	OTC; QL
spinosad	F	ST; QL
<b>Skin And Mucous Membrane Agents, Misc.</b>		
acitretin	F	PA; QL
adapalene external gel 0.1 %	F	QL
adapalene external gel 0.3 %	F	QL; AL
adapalene-benzoyl peroxide external gel 0.1-2.5 %	F	QL; AL
ADBRY	P-PA	PA; QL
ALDARA	F	
AMNESTEEM	F	PA; QL
arthritis pain reliever external	P	OTC
bexarotene external	F	Specialty Drug
BIMZELX	NP	PA; AL
calcipotriene external cream	F	PA; AL
calcipotriene external ointment	F	PA; AL
calcipotriene external solution	F	PA; AL
calcitriol external	F	PA; AL
CARAC	F	Specialty Drug
CIBINQO	NP	PA; AL
CLARAVIS	F	PA; QL
COSENTYX (300 MG DOSE)	P	Specialty Drug
COSENTYX SENSOREADY (300 MG)	P	Specialty Drug
COSENTYX SENSOREADY PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML	P	Specialty Drug
COSENTYX SUBCUTANEOUS	P	Specialty Drug
COSENTYX UNOREADY	P	Specialty Drug
cvs diclofenac sodium	P	OTC
diclofenac sodium external gel 1 %	P	

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
diclofenac sodium external solution 1.5 %	P	
diclofenac sodium external solution 2 %	NP	PA
DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR	P-PA	PA; Specialty Drug; AL
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/2ML	P-PA	PA; Specialty Drug
EFUDEX EXTERNAL CREAM	F	Specialty Drug
EFUDEX EXTERNAL SOLUTION 5 %	F	
ELIDEL	P-PA	PA; QL; AL
eq arthritis pain external	P	OTC
fluorouracil external	F	Specialty Drug
GABAPAL COMBINATION THERAPY PACK 100 & 3.88 MG & %	Carve-out	
gnp arthritis pain external	P	OTC
goodsense arthritis pain external	P	OTC
HYFTOR	F	PA; AL
ILUMYA	NP	PA; Specialty Drug
imiquimod external cream 5 %	F	
isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg	F	PA; QL
KETODAN EXTERNAL KIT	NP	PA
kls diclofenac sodium	P	OTC
LIDOTIN	Carve-out	
LITFULO	F	PA; Specialty Drug; QL; AL
LOPROX EXTERNAL KIT	NP	PA
MYORISAN	F	PA; QL
OPZELURA	NP	PA; QL; AL
OTEZLA ORAL TABLET	NP	PA; Specialty Drug
OTEZLA ORAL TABLET THERAPY PACK	NP	PA; Specialty Drug
PENNSAID EXTERNAL	NP	PA
pimecrolimus	P-PA	PA; QL; AL

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
podofilox external solution	F	
PROTOPIC EXTERNAL OINTMENT 0.03 %, 0.1 %	NP	PA; QL; AL
qc diclofenac sodium	P	OTC
SILIQ	NP	PA; Specialty Drug
SKYRIZI (150 MG DOSE)	NP	PA; Specialty Drug
SKYRIZI PEN	NP	PA; Specialty Drug
SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	NP	PA; Specialty Drug
sm arthritis pain	P	OTC
SOTYKTU	NP	PA; Specialty Drug; QL; AL
STELARA SUBCUTANEOUS SOLUTION 45 MG/0.5ML	NP	PA; Specialty Drug
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	NP	PA; Specialty Drug
SYNALAR TS	NP	PA
tacrolimus external ointment 0.03 %, 0.1 %	NP	PA; QL; AL
TALTZ	NP	PA; Specialty Drug
TARGRETIN EXTERNAL	F	Specialty Drug
tazarotene external cream	F	PA
tazarotene external gel	F	PA
TREMFYA	NP	PA; Specialty Drug
VALCHLOR	F	Specialty Drug
VTAMA	F	PA; AL
ZENATANE ORAL CAPSULE 10 MG, 20 MG, 40 MG	F	PA; QL
ZORYVE EXTERNAL CREAM	F	PA; AL
ZORYVE EXTERNAL FOAM	F	AL
<b>Thiocarbamates(Skin And Mucous Membrane)</b>		
antifungal (tolnaftate)	P	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
anti-fungal external powder	P	OTC
gnp tolnaftate	P	OTC
qc tolnaftate	P	OTC
sm antifungal tolnaftate	P	OTC
tolnaftate external powder	P	OTC
<b>Smooth Muscle Relaxants</b>		
<b>Antimuscarinics</b>		
darifenacin hydrobromide er	NP	PA
DETROL	NP	PA
DETROL LA	NP	PA
DITROPAN XL ORAL TABLET EXTENDED RELEASE 24 HOUR 10 MG, 5 MG	NP	PA
fesoterodine fumarate er	NP	PA
flavoxate hcl	NP	PA
GELNIQUE TRANSDERMAL GEL 10 %	NP	PA
oxybutynin chloride er	P	
oxybutynin chloride oral	P	
OXYTROL	NP	PA
OXYTROL FOR WOMEN	F	OTC
solifenacin succinate	P	
tolterodine tartrate	NP	PA
tolterodine tartrate er	NP	PA
TOVIAZ	P	
tropium chloride	NP	PA
tropium chloride er	NP	PA
VESICARE	NP	PA
VESICARE LS	NP	PA
<b>Respiratory Smooth Muscle Relaxants</b>		
LIQREV	NP	PA; Specialty Drug

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
REVATIO ORAL	NP	PA; Specialty Drug; 102 day supply allowed
sildenafil citrate oral suspension reconstituted	P-PA	PA; Specialty Drug; 102 day supply allowed
sildenafil citrate oral tablet 20 mg	P-PA	PA; Specialty Drug; 102 day supply allowed
theophylline er oral tablet extended release 12 hour 300 mg, 450 mg	F	
theophylline er oral tablet extended release 24 hour 400 mg	F	
theophylline oral	F	
<b>Selective Beta-3-Adrenergic Agonists</b>		
GEMTESA	NP	PA
MYRBETRIQ	NP	PA
<b>Vitamins</b>		
<b>Multivitamin Preparations</b>		
a thru z advanced	F	OTC
a thru z select 50+ advanced	F	OTC
a thru z select 50+ mens	F	OTC
a thru z select advanced	F	OTC
a thru z select oral tablet	F	OTC
activite	F	
adc/f (0.5mg/ml)	F	QL; AL
AQUADEKS ORAL SOLUTION	F	OTC
b complex (folic acid)	F	OTC
b complex formula 1 (lipotrop)	F	OTC
b complex vitamins (w/ fa)	F	OTC
BACMIN	F	
balance b-50	F	OTC
balanced b-50 complex	F	OTC
b-complex (folic acid)	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
benfotiamine multi-b	F	OTC
b-stress	F	OTC
CENTRUM ADULTS ORAL TABLET	F	OTC
CENTRUM SILVER 50+MEN	F	OTC
CENTRUM SILVER 50+WOMEN	F	OTC
CENTRUM SILVER ADULT 50+	F	OTC
CENTRUM SILVER ORAL TABLET	F	OTC
CENTRUM ULTRA WOMENS	F	OTC
CENTRUM WOMEN	F	OTC
CEROVITE SENIOR	F	OTC
CERTAVITE SENIOR	F	OTC
CERTAVITE SENIOR/ANTIOXIDANT	F	OTC
CERTAVITE/ANTIOXIDANTS ORAL TABLET	F	OTC
classic prenatal	F	OTC; QL; AL
completenate	F	QL; AL
complex b-100-inositol	F	OTC
cvs one daily essential	F	OTC
cvs spectravite adult 50+ oral tablet	F	OTC
cvs spectravite adults	F	OTC
cvs spectravite advanced oral tablet	F	OTC
cvs spectravite men 50+	F	OTC
cvs spectravite ultra men 50+	F	OTC
cvs spectravite ultra mens	F	OTC
cvs spectravite ultra women	F	OTC
cvs spectravite women 50+	F	OTC
cvs spectravite women oral tablet	F	OTC
cvs spectravite womens senior	F	OTC
daily value multivitamin	F	OTC
daily vitamin formula+iron	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
daily vitamin oral tablet	F	OTC
daily vites	F	OTC
daily-vite	F	OTC
daily-vite multivitamin	F	OTC
dekas essential	F	OTC
DEKAS PLUS	F	OTC
DIALYVITE	F	
DIALYVITE 3000	F	
DIALYVITE 5000	F	
DIALYVITE 800 ORAL TABLET	F	OTC
DIALYVITE 800 PLUS D	F	OTC
dialyvite 800/ultra d	F	OTC
DIALYVITE 800/ZINC	F	OTC
DIALYVITE 800-ZINC 15 ORAL TABLET 0.8 MG	F	OTC
DIALYVITE SUPREME D ORAL TABLET	F	
DIALYVITE/ZINC	F	
eq complete multivit adult 50+	F	OTC
eq complete multivitamin-adult	F	OTC
eq1 b complex 50 oral tablet	F	OTC
ESSENTIA	F	OTC
folika-nc	F	OTC
full spectrum b/vitamin c	F	OTC
GENICIN VITA-S	F	
gnp century adults 50+ senior	F	OTC
gnp century ultimate mens	F	OTC
gnp essential one daily	F	OTC
gnp mega multi for men	F	OTC
gnp mega multi for women	F	OTC
gnp one daily mens health 50+	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
gnp one daily mens/lycopene	F	OTC
gnp one daily plus iron	F	OTC
gnp therapeutic-m	F	OTC
high pot multivitamin/beta-car	F	OTC
high potency multivit/fa	F	OTC
high potency multivitamin	F	OTC
hm complete women	F	OTC
ICAPS MV	F	OTC
kobee	F	OTC
kp adults 50+ daily formula	F	OTC
lorid	F	
MEGA MULTI MEN ORAL TABLET	F	OTC
m-natal plus	F	QL; AL
multi complete/iron	F	OTC
multi vitamin daily	F	OTC
multiple vitamins oral tablet	F	OTC
multi-vit/iron/fluoride	F	OTC; QL; AL
multivitamin adults 50+	F	OTC
multi-vitamin daily	F	OTC
multivitamin men 50+	F	OTC
multivitamin oral tablet	F	OTC
multivitamin women	F	OTC
multivitamin women 50+	F	OTC
multi-vitamin/fluoride oral solution	F	QL; AL
multivitamin/fluoride oral solution 0.5 mg/ml	F	OTC; QL; AL
multivitamin/fluoride oral tablet chewable 0.25 mg, 0.5 mg, 1 mg	F	QL; AL
multi-vitamin/fluoride/iron	F	QL; AL
multi-vitamins	F	OTC
MVW COMPLETE FORMULATION	F	OTC

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
MVW COMPLETE FORMULATION D3000	F	OTC
MVW COMPLETE FORMULATION D5000 ORAL CAPSULE	F	OTC
MVW COMPLETE FORMULATION MINIS	F	OTC
MYNEPHRON	F	
NANOVM 1-3 YEARS ORAL POWDER	F	OTC
NANOVM 4-8 YEARS ORAL POWDER	F	OTC
NANOVM 9-18 YEARS	F	OTC
NANOVM T/F ORAL POWDER	F	OTC
NEPHPLEX RX	F	
nephro vitamins	F	OTC
NEPHRONEX ORAL TABLET	F	
NEPHRO-VITE	F	OTC
NEPHRO-VITE RX	F	
NESTABS	F	QL; AL
NIVA-PLUS	F	QL; AL
once daily	F	OTC
ONCOVITE	F	OTC
one daily for men 50+ advanced	F	OTC
one daily for men/lycopene	F	OTC
one daily mens health	F	OTC
one daily multivitamin/iron	F	OTC
ONE-A-DAY ESSENTIAL	F	OTC
ONE-A-DAY TEEN ADVANTAGE/HER	F	OTC
ONE-A-DAY TEEN ADVANTAGE/HIM	F	OTC
one-daily multi vitamins	F	OTC
one-daily multi-vitamin oral tablet	F	OTC
pnv tabs 29-1	F	QL; AL
PRENATABS RX	F	OTC; QL; AL
prenatal 19 oral tablet	F	OTC; QL; AL

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
prenatal oral tablet 27-1 mg	F	QL; AL
prenatal oral tablet 28-0.8 mg	F	OTC; QL; AL
prenatal plus	F	QL; AL
prenatal vitamin and mineral	F	OTC; QL; AL
prenatal vitamin plus low iron	F	QL; AL
prenatal vitamins oral tablet 28-0.8 mg	F	OTC; QL; AL
preplus	F	QL; AL
pretab	F	QL; AL
PRORENAL + D	F	OTC
PRORENAL + D W/ OMEGA-3	F	OTC
qc mens daily multivitamin	F	OTC
qc prenatal	F	OTC; QL; AL
quintabs	F	OTC
ra balanced b-100	F	OTC
ra balanced b-50	F	OTC
RA CENTRAL-VITE	F	OTC
ra central-vite womens mature	F	OTC
RENAL ORAL CAPSULE	F	
renal vitamin	F	OTC
renal-vite	F	OTC
rena-vite	F	OTC
rena-vite rx	F	OTC
reno caps	F	
se-natal 19 oral tablet	F	QL; AL
senior tabs	F	OTC
sentry	F	OTC
sentry senior	F	OTC
sm b100 complex	F	OTC
sm b-complex	F	OTC
sm complete	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
sm complete 50+	F	OTC
sm complete 50+ ultimate mens	F	OTC
sm complete 50+ ultimate women	F	OTC
sm complete senior formula	F	OTC
sm multiple vitamins essential	F	OTC
sm prenatal vitamins	F	OTC; QL; AL
SPECTRAVITE	F	OTC
stress formula	F	OTC
SUPER QUINTS B-50	F	OTC
super thera vite m	F	OTC
TAB-A-VITE	F	OTC
TAB-A-VITE/BETA CAROTENE	F	OTC
tab-a-vite/iron	F	OTC
TAB-A-VITE/IRON/BETA CAROTENE	F	OTC
THERA	F	OTC
THERA M PLUS	F	OTC
thera-m	F	OTC
thera-tabs	F	OTC
THEREMS	F	OTC
thrivite rx	F	QL; AL
tm-vite rx	F	
TRICARE	F	QL; AL
trinatal rx 1	F	QL; AL
triphrocaps	F	
TRI-VI-SOL A/C/D	F	OTC
tri-vitamin/fluoride oral solution 0.25 mg/ml	F	QL; AL
tri-vite/fluoride	F	QL; AL
tronvite	F	
v-c forte	F	
VIC-FORTE	F	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
VINATE ONE	F	QL; AL
virt-caps	F	
VITAL-D RX	F	
vitamin a/c/d/ infant/toddler	F	OTC
vitamin a-c-d infant	F	OTC
vitamins acd-fluoride	F	QL; AL
vitasure	F	
vp-vite rx	F	
wescaps	F	
westab plus	F	QL; AL
west-vite w/folic acid	F	OTC
xvite	F	
YELETS TEENAGE FORMULA	F	OTC
<b>Vitamin A</b>		
a-caro-25	F	OTC
adc/f (0.5mg/ml)	F	QL; AL
beta carotene oral capsule 25000 unit	F	OTC
beta carotene provitamin a	F	OTC
cvs beta carotene oral capsule 15 mg	F	OTC
ra beta carotene	F	OTC
TRI-VI-SOL A/C/D	F	OTC
tri-vitamin/fluoride oral solution 0.25 mg/ml	F	QL; AL
tri-vite/fluoride	F	QL; AL
vitamin a oral capsule 3 mg (10000 ut)	F	OTC
vitamin a/c/d/ infant/toddler	F	OTC
vitamin a-beta carotene oral capsule	F	OTC
vitamin a-c-d infant	F	OTC
vitamins acd-fluoride	F	QL; AL
yl beta carotene	F	OTC
<b>Vitamin B Complex</b>		

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
activite	F	
b complex (folic acid)	F	OTC
b complex oral capsule	F	OTC
b complex vitamins (w/ fa)	F	OTC
balance b-50	F	OTC
b-complex (folic acid)	F	OTC
b-complex injection	F	
b-complex/b-12 oral	F	OTC
BEELITH	F	OTC
benfotiamine multi-b	F	OTC
biotin oral tablet 5 mg, 5000 mcg	F	OTC
classic prenatal	F	OTC; QL; AL
completenate	F	QL; AL
cvs folic acid oral tablet 800 mcg	F	OTC
cyanocobalamin injection solution 1000 mcg/ml	F	
DIALYVITE	F	
DIALYVITE 3000	F	
DIALYVITE 5000	F	
DIALYVITE 800 ORAL TABLET	F	OTC
DIALYVITE 800 PLUS D	F	OTC
DIALYVITE 800/ZINC	F	OTC
DIALYVITE 800-ZINC 15 ORAL TABLET 0.8 MG	F	OTC
DIALYVITE SUPREME D ORAL TABLET	F	
DIALYVITE/ZINC	F	
DODEX	F	
ENDUR-ACIN ORAL TABLET EXTENDED RELEASE 250 MG, 750 MG	F	OTC
ENDUR-ACIN ORAL TABLET EXTENDED RELEASE 500 MG	P	OTC

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
ENDUR-AMIDE ORAL TABLET EXTENDED RELEASE 500 MG	F	OTC
eql b complex 50 oral tablet	F	OTC
fabb	F	
FE C PLUS	F	AL
folate	F	OTC; QL
folbee	F	
FOLBIC	F	OTC
folic acid oral tablet 1 mg	F	
folic acid oral tablet 400 mcg	F	OTC; QL
folic acid oral tablet 800 mcg	F	OTC
folika-nc	F	OTC
FOLTABS 800	F	OTC
full spectrum b/vitamin c	F	OTC
GENICIN VITA-S	F	
gnp folic acid	F	OTC; QL
hm folic acid	F	OTC; QL
iron 100 plus	F	OTC; AL
kobee	F	OTC
kp folic acid	F	OTC
kp niacin	P	OTC
leucovorin calcium oral	F	
l-methylfolate-b6-b12 oral tablet 3-35-2 mg	F	
lorid	F	
m-natal plus	F	QL; AL
multivitamin/fluoride oral tablet chewable 0.25 mg, 0.5 mg, 1 mg	F	QL; AL
MYNEPHRON	F	
NEPHPLEX RX	F	
nephro vitamins	F	OTC
NEPHRON FA	F	

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
NEPHRONEX ORAL TABLET	F	
NEPHRO-VITE	F	OTC
NEPHRO-VITE RX	F	
NESTABS	F	QL; AL
niacin er oral capsule extended release 500 mg	P	102 day supply allowed; OTC
niacin er oral tablet extended release 1000 mg, 250 mg, 750 mg	F	OTC
niacin er oral tablet extended release 500 mg	P	102 day supply allowed; OTC
niacin oral tablet 100 mg, 500 mg	P	102 day supply allowed; OTC
niacin oral tablet 250 mg, 50 mg	F	OTC
niacinamide er	F	OTC
niacinamide oral tablet 500 mg	F	OTC
NIAVASC	P	OTC
NIAVASC 750	F	OTC
NIVA-FOL	F	OTC
NIVA-PLUS	F	QL; AL
plain niacin oral tablet 250 mg	F	OTC
pnv tabs 29-1	F	QL; AL
PRENATABS RX	F	OTC; QL; AL
prenatal 19 oral tablet	F	OTC; QL; AL
prenatal oral tablet 27-1 mg	F	QL; AL
prenatal oral tablet 28-0.8 mg	F	OTC; QL; AL
prenatal plus	F	QL; AL
prenatal vitamin and mineral	F	OTC; QL; AL
prenatal vitamin plus low iron	F	QL; AL
prenatal vitamins oral tablet 28-0.8 mg	F	OTC; QL; AL
preplus	F	QL; AL
pretab	F	QL; AL
px folic acid	F	OTC; QL
qc prenatal	F	OTC; QL; AL

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
ra balanced b-100	F	OTC
ra balanced b-50	F	OTC
ra b-complex	F	OTC
ra b-complex with b-12	F	OTC
ra folic acid oral tablet 400 mcg	F	OTC; QL
ra folic acid oral tablet 800 mcg	F	OTC
ra niacin oral tablet 100 mg	P	OTC
ra no flush niacin	F	102 day supply allowed; OTC
RENAL ORAL CAPSULE	F	
renal vitamin	F	OTC
renal-vite	F	OTC
rena-vite	F	OTC
rena-vite rx	F	OTC
reno caps	F	
se-natal 19 oral tablet	F	QL; AL
SLO-NIACIN ORAL TABLET EXTENDED RELEASE 250 MG, 750 MG	F	OTC
sm b100 complex	F	OTC
sm b-complex	F	OTC
sm biotin oral tablet	F	OTC
sm folic acid	F	OTC; QL
sm niacin cr	F	OTC
sm prenatal vitamins	F	OTC; QL; AL
super biotin oral tablet	F	OTC
SUPER QUINTS B-50	F	OTC
thrivite rx	F	QL; AL
tm-vite rx	F	
TRICARE	F	QL; AL
trinatal rx 1	F	QL; AL
triphrocaps	F	

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
tronvite	F	
VINATE ONE	F	QL; AL
virt-caps	F	
VIRT-GARD	F	
VITAL-D RX	F	
vitamin b complex 100	F	
vitamin b complex oral tablet	F	OTC
vitamin b-complex	F	OTC
vitamin b-complex 100	F	
vitasure	F	
vp-vite rx	F	
wescaps	F	
westab max	F	
westab mini	F	
westab one	F	
westab plus	F	QL; AL
west-vite w/folic acid	F	OTC
xvite	F	
yl folic acid	F	OTC; QL
<b>Vitamin C</b>		
activite	F	
adc/f (0.5mg/ml)	F	QL; AL
AQUADEKS ORAL SOLUTION	F	OTC
c 500 oral tablet	F	OTC
cvs vitamin c oral tablet 500 mg	F	OTC
DIALYVITE	F	
DIALYVITE 3000	F	
DIALYVITE 5000	F	
DIALYVITE 800 ORAL TABLET	F	OTC
DIALYVITE 800 PLUS D	F	OTC

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
DIALYVITE 800/ZINC	F	OTC
DIALYVITE 800-ZINC 15 ORAL TABLET 0.8 MG	F	OTC
DIALYVITE/ZINC	F	
FE C PLUS	F	AL
folika-nc	F	OTC
full spectrum b/vitamin c	F	OTC
GENICIN VITA-S	F	
glucosamine chondr 1500 complx	Carve-out	OTC
iron 100 plus	F	OTC; AL
lorid	F	
meijer c	F	OTC
MVW COMPLETE FORMULATION D3000 ORAL TABLET CHEWABLE	F	OTC
MVW COMPLETE FORMULATION ORAL SOLUTION	F	OTC
MVW COMPLETE FORMULATION ORAL TABLET CHEWABLE	F	OTC
MYNEPHRON	F	
NEPHPLEX RX	F	
nephro vitamins	F	OTC
NEPHRON FA	F	
NEPHRONEX ORAL TABLET	F	
NEPHRO-VITE	F	OTC
NEPHRO-VITE RX	F	
ra vitamin c oral tablet 500 mg	F	OTC
ra vitamin c/rose hips oral tablet 500 mg	F	OTC
RENAL ORAL CAPSULE	F	
renal vitamin	F	OTC
renal-vite	F	OTC
rena-vite	F	OTC

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
rena-vite rx	F	OTC
reno caps	F	
tm-vite rx	F	
triphrocaps	F	
TRI-VI-SOL A/C/D	F	OTC
tri-vitamin/fluoride oral solution 0.25 mg/ml	F	QL; AL
tri-vite/fluoride	F	QL; AL
tronvite	F	
virt-caps	F	
VITAL-D RX	F	
vitamin a/c/d/ infant/toddler	F	OTC
vitamin a-c-d infant	F	OTC
vitamins acd-fluoride	F	QL; AL
vitasure	F	
vp-vite rx	F	
wescaps	F	
west-vite w/folic acid	F	OTC
xvite	F	
<b>Vitamin D</b>		
600+d3	F	OTC
adc/f (0.5mg/ml)	F	QL; AL
aqueous vitamin d oral liquid 10 mcg/ml	F	OTC
BPROTECTED PEDIA D-VITE ORAL LIQUID 10 MCG/ML	F	OTC
CALCIDOL ORAL SOLUTION 200 MCG/ML	F	OTC
CALCITRATE ORAL TABLET 315-6.25 MG-MCG	F	OTC
calcitriol oral capsule	F	QL
calcitriol oral solution	F	AL
calcium + vitamin d3 oral tablet 600-10 mg-mcg, 600-5 mg-mcg	F	OTC

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
calcium 500 + d oral tablet 500-5 mg-mcg	F	OTC
calcium 500 + d3 oral tablet 500-15 mg-mcg	F	OTC
calcium 500+d high potency oral tablet 500-10 mg-mcg	F	OTC
calcium 500+d oral tablet 500-10 mg-mcg, 500-5 mg-mcg	F	OTC
calcium 500+d3 oral tablet 500-10 mg-mcg, 500-5 mg-mcg	F	OTC
calcium 600 + d oral tablet 600-5 mg-mcg	F	OTC
calcium 600 +d high potency oral tablet 600-10 mg-mcg	F	OTC
calcium 600/vitamin d oral tablet 600-10 mg-mcg	F	OTC
calcium 600/vitamin d3 oral tablet 600-20 mg-mcg	F	OTC
calcium 600+d high potency oral tablet 600-10 mg-mcg	F	OTC
calcium 600+d oral tablet 600-20 mg-mcg, 600-5 mg-mcg	F	OTC
calcium 600+d3 oral tablet 600-10 mg-mcg, 600-20 mg-mcg, 600-5 mg-mcg	F	OTC
calcium carb-cholecalciferol oral tablet 500-10 mg-mcg, 500-5 mg-mcg, 600-10 mg-mcg, 600-20 mg-mcg, 600-400 mg-unit	F	OTC
calcium carbonate-vitamin d oral tablet 600-5 mg-mcg	F	OTC
calcium citrate+d3	F	OTC
calcium citrate-vitamin d oral tablet 315-6.25 mg-mcg	F	OTC
calcium citrate-vitamin d3 oral tablet 315-6.25 mg-mcg	F	OTC
calcium high potency/vitamin d oral tablet 600-5 mg-mcg	F	OTC
calcium plus vitamin d oral tablet	F	OTC

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
calcium plus vitamin d3 oral tablet 600-20 mg-mcg	F	OTC
calcium+d3 oral tablet 500-10 mg-mcg, 500-15 mg-mcg, 600-20 mg-mcg	F	OTC
calcium-vitamin d3 oral tablet 250-3.125 mg-mcg	F	OTC
CALTRATE 600+D3 ORAL TABLET 600-20 MG-MCG	F	OTC
CITRACAL MAXIMUM	F	OTC
cvs calcium + d3 oral tablet	F	OTC
cvs calcium 600 & vitamin d3 oral tablet 600-20 mg-mcg	F	OTC
cvs calcium 600+d oral tablet 600-20 mg-mcg	F	OTC
cvs d3 oral capsule 10 mcg (400 unit), 25 mcg (1000 ut), 50 mcg (2000 ut)	F	OTC
d 1000 oral capsule	F	OTC
d 5000 oral capsule	F	OTC
d-1000 extra strength	F	OTC
d2000 ultra strength	F	OTC
d3 2000	F	OTC
d3 5000	F	OTC
d3 high potency oral capsule	F	OTC
d3 maximum strength oral capsule	F	OTC
d3 oral tablet	F	OTC
d3-1000	F	OTC
D3-50	F	OTC
d-5000	F	OTC
DECARA ORAL CAPSULE 1.25 MG (50000 UT)	F	OTC
DIALYVITE 800 PLUS D	F	OTC
DIALYVITE VITAMIN D 5000	F	OTC
DIALYVITE VITAMIN D3 MAX	F	OTC
D-VI-SOL ORAL LIQUID 10 MCG/ML	F	OTC

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
d-vite pediatric	F	OTC
eq calcium 500+d oral tablet 500-5 mg-mcg	F	OTC
eq calcium 600+d oral tablet 600-20 mg-mcg	F	OTC
eq calcium citrate+d	F	OTC
eql calcium/vitamin d oral tablet 600-10 mg-mcg	F	OTC
eql calcium/vitamin d3 oral tablet 600-20 mg-mcg	F	OTC
eql vitamin d3 oral capsule	F	OTC
ergocalciferol oral solution 200 mcg/ml	F	OTC
FOSAMAX PLUS D	NP	PA; QL
gnp calcium 500 +d3 oral tablet 500-15 mg-mcg	F	OTC
gnp calcium 600 +d3 oral tablet 600-20 mg-mcg	F	OTC
gnp d 1000	F	OTC
gnp vitamin d maximum strength	F	OTC
gnp vitamin d oral tablet 25 mcg (1000 ut)	F	OTC
gnp vitamin d super strength	F	OTC
gnp vitamin d3 extra strength	F	OTC
kp calcium 600+d oral tablet 600-20 mg-mcg	F	OTC
kp vitamin d3	F	OTC
natural vitamin d-3	F	OTC
OS-CAL CALCIUM + D3 ORAL TABLET 500-5 MG-MCG	F	OTC
OS-CAL EXTRA D3 ORAL TABLET 500-15 MG-MCG	F	OTC
OYSCO 500+D ORAL TABLET	F	OTC
oyster shell calcium + d oral tablet 500-10 mg-mcg, 500-5 mg-mcg	F	OTC
oyster shell calcium + d3 oral tablet 500-10 mg-mcg	F	OTC
oyster shell calcium 250+d	F	OTC
oyster shell calcium plus d oral tablet 500-5 mg-mcg	F	OTC

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
PA = Prior Authorization                      QL = Quantity Limit                      ST = Step Therapy

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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
oyster shell calcium w/d oral tablet 500-5 mg-mcg	F	OTC
oyster shell calcium/d oral tablet 250-125 mg-unit, 500-10 mg-mcg, 500-5 mg-mcg	F	OTC
oyster shell calcium/d3 oral tablet 500-10 mg-mcg, 500-5 mg-mcg	F	OTC
oyster shell calcium/vit d3 oral tablet 250-3.125 mg-mcg, 500-5 mg-mcg	F	OTC
oyster shell calcium/vitamin d oral tablet 250-3.125 mg-mcg, 500-5 mg-mcg	F	OTC
pharmacist choice d-vitamin	F	OTC
ra calcium 600/vitamin d-3 oral tablet 600-10 mg-mcg	F	OTC
ra calcium cit plus vit d-3	F	OTC
ra vitamin d-3	F	OTC
RADIANCE PLATINUM VITAMIN D3	F	OTC
sm calcium 500/vitamin d3 oral tablet 500-10 mg-mcg	F	OTC
sm calcium citrate+/vit d3	F	OTC
sm calcium/vitamin d oral tablet 500-5 mg-mcg, 600-20 mg-mcg	F	OTC
sm calcium-vitamin d oral tablet 500-5 mg-mcg	F	OTC
sm oyster shell calcium/vit d oral tablet 500-10 mg-mcg	F	OTC
sm oyster shell calcium/vit d3	F	OTC
sm vitamin d3 oral capsule 50 mcg, 50 mcg (2000 ut)	F	OTC
sm vitamin d3 oral tablet 25 mcg (1000 ut)	F	OTC
super calcium 600 + d 400 oral tablet 600-10 mg-mcg	F	OTC
super calcium 600 + d3 oral tablet 600-10 mg-mcg	F	OTC
THERA-D 2000	F	OTC

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P = Formulary; PDL Preferred                      P-PA = Formulary; PDL Preferred; PA required  
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<b>Prescriptions Drug Name</b>	<b>Tier Status</b>	<b>Coverage Requirements and Limits</b>
THERA-D RAPID REPLETION	F	OTC
TRI-VI-SOL A/C/D	F	OTC
tri-vitamin/fluoride oral solution 0.25 mg/ml	F	QL; AL
tri-vite/fluoride	F	QL; AL
VITAL-D RX	F	
vitamin a/c/d/ infant/toddler	F	OTC
vitamin a-c-d infant	F	OTC
vitamin d (cholecalciferol) oral capsule	F	OTC
vitamin d (cholecalciferol) oral tablet 25 mcg (1000 ut)	F	OTC
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	F	
vitamin d high potency	F	OTC
vitamin d infant oral liquid 10 mcg/ml	F	OTC
vitamin d oral capsule 50 mcg (2000 ut)	F	OTC
vitamin d oral liquid 10 mcg/ml	F	OTC
vitamin d oral tablet 25 mcg (1000 ut), 50 mcg (2000 ut)	F	OTC
VITAMIN D-1000 MAX ST	F	OTC
vitamin d3 maximum strength	F	OTC
vitamin d-3 oral capsule	F	OTC
vitamin d3 oral capsule 1.25 mg (50000 ut), 10 mcg (400 unit), 125 mcg (5000 ut), 50 mcg (2000 ut)	F	OTC
vitamin d3 oral liquid 10 mcg/ml	F	OTC
vitamin d3 oral tablet 10 mcg (400 unit), 125 mcg (5000 ut), 25 mcg, 25 mcg (1000 ut), 250 mcg (10000 ut), 50 mcg (2000 ut)	F	OTC
vitamin d3 super strength	F	OTC
vitamin d3 ultra strength	F	OTC
vitamins acd-fluoride	F	QL; AL
WEEKLY-D	F	OTC

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Prescriptions Drug Name	Tier Status	Coverage Requirements and Limits
<b>Vitamin E</b>		
aqueous vitamin e oral solution 15 mg/0.67ml	F	OTC
DIALYVITE 3000	F	
DIALYVITE 5000	F	
eql vitamin e oral capsule 400 unit	F	OTC
gnp vitamin e oral capsule 400 unit, 450 mg (1000 ut)	F	OTC
ra vitamin e oral capsule 268 mg (400 unit)	F	OTC
SOLUVITA E ORAL SOLUTION 15.8 MG/0.7ML	F	OTC
true vitamin e	F	OTC
vitamin e blend oral capsule 400 unit	F	OTC
vitamin e oral capsule 180 mg (400 unit), 268 mg (400 unit), 450 mg (1000 ut)	F	OTC
vitamin e oral solution 15 mg/0.67ml	F	OTC
vitamin e/d-alpha natural oral capsule 268 mg (400 unit)	F	OTC
vitamin supplement e-400 oral capsule 180 mg (400 unit)	F	OTC
<b>Vitamin K Activity</b>		
phytonadione oral	F	QL

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## BCC Formulary

<b>1</b>		
12hr allergy relief.....	13, 301	
<b>2</b>		
24hr allergy relief.....	13, 301	
<b>3</b>		
3 day vaginal .....	312	
<b>6</b>		
600+d3.....	171, 343	
<b>8</b>		
8 hr arthritis pain relief.	101, 117	
8hr muscle aches & pain .....	101, 117	
<b>A</b>		
a thru z advanced.....	171, 329	
a thru z select.....	171, 329	
a thru z select 50+ advanced	171, 329	
a thru z select 50+ mens	171, 329	
a thru z select advanced	171, 329	
abacavir sulfate.....	25	
abacavir sulfate-lamivudine ...	25	
abacavir-lamivudine-zidovudine .....	25	
ABILIFY .....	115, 133	
ABILIFY ASIMTUFII.	114, 133	
ABILIFY MAINTENA	115, 133	
ABILIFY MYCITE.....	115, 133	
ABILIFY MYCITE MAINTENANCE KIT ....	115, 133	
ABILIFY MYCITE STARTER KIT .....	115, 133	
abiraterone acetate.....	32	
ABRILADA (1 PEN)..	219, 269, 273	
ABRILADA (2 PEN)..	219, 269, 273	
ABRILADA (2 SYRINGE)	219, 269, 273	
ABRYSVO.....	42	
acamprosate calcium .....	140	
ACANYA.....	308, 322	
acarbose.....	231	
a-caro-25.....	336	
ACCOLATE.....	297	
ACCU-CHEK AVIVA.....	162	
ACCU-CHEK AVIVA PLUS .....	167	
ACCU-CHEK FASTCLIX LANCETS .....	162	
ACCU-CHEK GUIDE .	162, 167	
ACCU-CHEK GUIDE CONTROL .....	162	
ACCU-CHEK GUIDE ME ..	162	
ACCU-CHEK SMARTVIEW .....	167	
ACCU-CHEK SMARTVIEW CONTROL .....	162	
ACCU-CHEK SOFTCLIX LANCET DEV .....	162	
ACCU-CHEK SOFTCLIX LANCETS.....	162	
ACCUPRIL .....	78	
ACCURETIC .....	78, 180	
ACE AEROSOL CLOUD ENHANCER .....	162	
acebutolol hcl .....	59, 80, 81, 86	
acetaminophen.....	101, 117, 118	
acetaminophen 8 hour ..	101, 117	
acetaminophen childrens .....	101, 117	
acetaminophen extra strength .....	101, 117	
acetaminophen infants..	101, 117	
acetaminophen junior strength .....	101, 117	
acetaminophen-codeine	101, 144	
acetazolamide .	85, 110, 170, 186	
acetazolamide er....	85, 110, 170, 186	
acetic acid.....	189	
acetylcysteine .....	264, 297	
ACID GONE .....	194, 211	
acid reducer .....	11, 222, 224	
acidoll .....	217	
ACIGEST .....	217	
ACIGEST II .....	217	
ACIPHEX.....	224	
acitretin.....	325	
acne medication 10.....	322	
acne treatment.....	322	
acne-clear.....	322	
ACTEMRA .....	269, 273	
ACTEMRA ACTPEN..	269, 273	
ACTHAR.....	167, 249	
ACTHREL.....	168	
ACTIQ.....	144	
activite .....	329, 337, 341	
ACTONEL .....	266	
ACTOPLUS MET .....	233, 262	
ACTOS .....	262	
ACULAR.....	192	
ACULAR LS .....	192	
ACUVAIL .....	192	
acyclovir .....	28, 311	
ADACEL .....	42	
ADAGEN .....	182	
adalimumab-adaz..	219, 269, 273	
adalimumab-fkjp...219, 269, 273		
adapalene .....	325	
adapalene-benzoyl peroxide	322, 325	
ADASUVE.....	127	
ADBRY .....	321, 325	
adc/f (0.5mg/ml)..	267, 329, 336, 341, 343	
ADCIRCA .....	93, 300, 306	
ADDERALL.....	100	
ADDERALL XR.....	100	
adefovir dipivoxil .....	28	
ADEMPAS .....	306, 307	
ADHANSIA XR.....	153	
ADIPEX-P .....	100	
ADLARITY .....	55	
ADMELOG .....	257	
ADMELOG SOLOSTAR ...	257	
ADRUCIL .....	32	
ADTHYZA.....	262	
adult aspirin regimen .....	70, 73, 118, 155	
adult mask large.....	162	
ADVAIR DISKUS .....	56, 226	
ADVAIR HFA.....	56, 226	
ADVANTAGE CARE ELECTROLYTE PED ....	171	
ADVATE.....	65	
ADVIL.....	118, 148	
ADVIL DUAL ACTION ....	101, 148	
ADVIL JUNIOR STRENGTH .....	118, 148	
ADVIL MIGRAINE.....	118, 148	
advin covid-19 antigen test..	167	
adynovate.....	65	

ADZENYS ER.....	100	AIRSUPRA ...	57, 187, 226, 299, 305	allergy rel child (loratadine) ..	13, 301
ADZENYS XR-ODT .....	100	AIRZONE PEAK FLOW		allergy relief...1, 5, 6, 12, 13, 47,	48, 106, 128, 187, 226, 287,
AEMCOLO .....	30	METER .....	163	291, 292, 298, 301	
AEROCHAMBER MINI		AJOVY .....	139	allergy relief (cetirizine) .	13, 301
CHAMBER .....	162	AKEEGA.....	32	allergy relief (loratadine) 13, 301	
AEROCHAMBER MV .....	162	AKYNZEO.....	194, 223	allergy relief 24-hr .....	13, 301
AEROCHAMBER PLUS FLO-		ALAWAY .....	11, 183	allergy relief cetirizine....	13, 301
VU .....	162	ALAWAY CHILDRENS		allergy relief childrens...1, 5, 13,	47, 106, 128, 287, 291, 301
AEROCHAMBER PLUS FLO-		ALLERGY .....	11, 183	allergy relief/indoor/outdoor .	13, 301
VU LARGE.....	162	ALBUKED 25.....	61	allopurinol.....	265
AEROCHAMBER PLUS FLO-		ALBUKED 5.....	61	ALMACONE DOUBLE	
VU MEDIUM .....	162	albumin human .....	61	STRENGTH .....	194, 202
AEROCHAMBER PLUS FLO-		ALBUMINAR-25 .....	61	almotriptan malate .....	158
VU SMALL.....	162	ALBUMINEX.....	61	ALOCRIL.....	183, 297
AEROCHAMBER PLUS FLO-		albumin-zlb.....	61	alogliptin benzoate.....	239
VU W/MASK.....	162	alburx.....	61	alogliptin-metformin hcl.....	233, 239
AEROCHAMBER PLUS		ALBUTEIN.....	61	alogliptin-pioglitazone..	239, 262
FLOW VU.....	162	albuterol sulfate .....	57, 305	ALOMIDE.....	13, 183
AEROCHAMBER		albuterol sulfate hfa.....	57, 305	ALOPHEN .....	211
W/FLOWSIGNAL .....	162	alclometasone dipropionate..	316	aloksetron hcl.....	206
AEROCHAMBER Z-STAT		alcohol prep .....	163	ALPHAGAN P.....	183
PLUS .....	162	alcohol swabs .....	163	ALPHANATE .....	65
AEROCHAMBER Z-STAT		ALDARA .....	325	ALPHANATE/VWF	
PLUS CHAMBR.....	162	ALDURAZYME.....	182	COMPLEX/HUMAN.....	65
AEROCHAMBER Z-STAT		ALECENSA .....	32	ALPHANINE SD .....	65
PLUS/LARGE.....	162	alendronate sodium.....	266	alprazolam .....	137
AEROCHAMBER Z-STAT		aler-cap ..1, 5, 47, 106, 128, 287,	291	alprazolam er .....	137
PLUS/MEDIUM .....	162	alfuzosin hcl er .....	56	ALPRAZOLAM INTENSOL	
AEROCHAMBER Z-STAT		ALIMTA .....	32	.....	137
PLUS/SMALL .....	162	ALIQOPA .....	32	alprazolam xr .....	137
AEROTRACH PLUS.....	162	aliskiren fumarate .....	94	ALPROLIX .....	65
AEROVENT PLUS.....	162	ALKA-SELTZER PLUS		ALREX.....	187
AFINITOR .....	32	ALLERGY 1, 5, 47, 106, 128,	287, 291	ALTACE .....	78, 79
AFINITOR DISPERZ .....	32	ALKERAN.....	32	altamist spray .....	189, 297
AFIRMELLE .....	234, 240, 250	ALKINDI SPRINKLE .....	226	ALTOPREV .....	91
AFLURIA QUADRIVALENT		all day pain relief..	118, 148, 265	ALTUVIIIO.....	65
.....	42	all day relief.....	118, 148, 265	alum & mag hydroxide-simeth	
AFREZZA.....	257	all-day allergy childrens .	13, 301	.....	194, 202
AFSTYLA.....	65	aller-chlor .....	5, 12, 291	alumina-magnesia-simethicone	
AFTERA .....	234, 251	aller-ease.....	13, 301	.....	194, 202
A-HYDROCORT.....	226	allergy .....	5, 12, 291	aluminum hydroxide gel.....	194, 207
AIMOVIG .....	139	allergy (cetirizine) .....	13, 301	.....	207
aimsco lubricated.....	284	allergy 24hour indoor/outdoor		aluminum-magnesium-	
AIRDUO DIGIHALER..	56, 226	.....	13, 301	simethicone.....	194, 202
AIRDUO RESPICLICK 113/14		allergy 24-hr .....	13, 301	ALUNBRIG .....	32
.....	56, 226	allergy childrens .....	1, 5, 13, 47, 106, 128, 287, 291, 301		
AIRDUO RESPICLICK 232/14					
.....	57, 226				
AIRDUO RESPICLICK 55/14					
.....	57, 226				



ALVESCO .....	226	amphet-dextroamphet 3-bead er .....	100	apap-caff-dihydrocodeine....	101, 144, 153
alyacen 1/35.....	234, 240, 251	ampicillin.....	19	APEXICON E .....	316
alyacen 7/7/7 .....	234, 240, 251	AMRIX.....	53	APHEN.....	101, 118
ALYQ.....	93, 300, 306	AMVUTTRA .....	281	APIDRA .....	257
amantadine hcl.....	17, 99	AMYTAL SODIUM.....	135	APIDRA SOLOSTAR.....	257
AMARYL.....	261	ANAFRANIL.....	161	APLENZIN.....	114
AMBIEN .....	128	anagrelide hcl .....	73	apraclonidine hcl .....	189
AMBIEN CR.....	128	ANAPROX DS ....	118, 148, 265	aprepitant .....	223
ambrisentan .....	95, 291, 306	anastrozole.....	32, 232	APRI.....	234, 240, 251
AMERGE.....	158	ANCOBON .....	30	APRISO.....	206
A-METHAPRED .....	226	ANDRODERM .....	231	APTENSIO XR .....	153
AMICAR.....	65	ANDROGEL.....	231	APTIOM.....	110
amiloride hcl.....	94, 170	ANDROGEL PUMP.....	231	APTIVUS .....	26
amiloride-hydrochlorothiazide .....	170, 180	ANORO ELLIPTA.....	46, 57	AQUADEKS .....	171, 329, 341
aminocaproic acid .....	65	ANTABUSE.....	263	AQUAPHOR ITCH RELIEF MAX STR .....	316
amiodarone hcl .....	88	antacid .....	195, 203, 207	aqueous vitamin d.....	343
AMITIZA .....	219	antacid advanced .....	194, 202	aqueous vitamin e.....	349
amitriptyline hcl .....	160	antacid anti-gas max strength .....	194, 202	ARANELLE.....	234, 240, 251
AMJEVITA.....	219, 269, 273	antacid anti-gas reg strength	194, 203	ARANESP (ALBUMIN FREE) .....	62, 63
AMJEVITA-PED 10KG TO <15KG.....	219, 269, 273	antacid calcium.....	194, 207	ARCALYST .....	281
AMJEVITA-PED 15KG TO <30KG.....	219, 269, 273	antacid calcium rich.....	194, 207	AREXVY .....	42
amlodipine besy-benazepril hcl .....	79, 89	antacid extra strength....	194, 207	arformoterol tartrate.....	57
amlodipine besylate....	89, 90, 95	ANTACID FLAVOR CHEWS .....	194, 207	ARICEPT .....	55
amlodipine besylate-valsartan	76, 89	antacid liquid .....	194, 203	ARIMIDEX .....	32, 232
amlodipine-atorvastatin....	89, 91	antacid m .....	194, 203	aripiprazole.....	115, 133
amlodipine-olmesartan .....	76, 89	antacid maximum strength ..	194, 203	ARISTADA.....	115, 134
amlodipine-valsartan-hctz	77, 89, 180	antacid plus anti-gas relief..	195, 203	ARISTADA INITIO....	115, 134
ammonia aromatic .....	153	antacid regular strength	195, 203, 207	ARIXTRA .....	62
ammonia inhalants.....	153	antacid/antigas.....	195, 203	armodafinil .....	161
ammonium lactate .....	315	antacid/anti-gas.....	195	ARMONAIR DIGIHALER.	226, 299
AMMONUL.....	169	antacid/anti-gas.....	203	ARMOUR THYROID.....	262
AMNESTEEM.....	325	ANTARA .....	91	ARNUITY ELLIPTA...226, 299	
amoxapine .....	161	anti-diarrheal .....	199	AROMASIN.....	32, 232
amoxicill-clarithro-lansopraz	18, 29, 224	antifungal.....	312	ARRANON .....	32
amoxicillin.....	18, 19, 207	anti-fungal .....	312	arthritis pain reliever....	101, 118, 323, 325
amoxicillin-pot clavulanate ....	19	anti-fungal .....	328	ARTHROTEC .....	148, 223
amphetamine er .....	100	antifungal (clotrimazole).....	312	artificial tears .....	189
amphetamine sulfate.....	100	antifungal (tolnaftate).....	327	artificial tears pf.....	189
amphetamine-dextroamphet er .....	100	antifungal clotrimazole.....	312	ARZERRA .....	32
amphetamine- dextroamphetamine .....	100	anti-gas .....	203	ASACOL HD .....	206
		anti-itch maximum strength..	316	ASCOMP-CODEINE..	135, 144, 153, 155
		ANUSOL-HC.....	316	asenapine maleate.....	115, 134
				ASMALPRED.....	226
				ASMALPRED PLUS.....	226

ASMANEX (120 METERED DOSES).....	227	ATRYN .....	62	BAC .....	101, 136, 153
ASMANEX (14 METERED DOSES).....	227	AUBAGIO.....	273	bacitracin .....	184, 308
ASMANEX (30 METERED DOSES).....	227	AUBRA EQ.....	234, 240, 251	bacitracin zinc.....	308
ASMANEX (60 METERED DOSES).....	227	AUGTYRO .....	32	bacitracin zinc-aloe.....	308
ASMANEX HFA .....	227	aurodryl allergy childrens....	1, 6, 48, 106, 128, 287, 292	bacitracin-polymyxin b.....	184
ASPERCREME LIDOCAINE .....	310	AUROVELA 1.5/30....	234, 240, 251	bacitra-neomycin-polymyxin-hc .....	184, 187
asperflex max st.....	310	AUROVELA 1/20	234, 240, 251	baclofen .....	54
ASPERFLEX PAIN RELIEVING.....	310	AUROVELA FE 1.5/30 .....	234, 241, 251	BACMIN .....	171, 329
aspirin .....	70, 73, 118, 155	AUROVELA FE 1/20 .....	234, 241, 251	BAFIERTAM.....	274
aspirin 81 .....	70, 73, 118, 155	AURYXIA.....	170	balance b-50.....	329, 337
aspirin adult low dose.....	70, 73, 118, 155	AUSTEDO .....	161	balanced b-50 complex.....	223, 329
aspirin adult low strength	70, 73, 118, 155	AUSTEDO XR.....	161	BALFAXAR.....	65
aspirin buf(cacarb-mgcarb-mgo) .....	70, 73, 118, 155, 195, 211	AUVELITY.....	114	balsalazide disodium .....	206
aspirin childrens	70, 73, 118, 155	AUVI-Q.....	45, 286	BALVERSA .....	32
aspirin ec low dose ..	70, 73, 118, 155	AVALIDE .....	77, 180	BALZIVA.....	234, 241, 251
aspirin ec low strength.....	70, 73, 118, 155	AVAPRO.....	76, 77	BANOPHEN .1, 6, 48, 106, 107, 128, 287, 292	
aspirin low dose	70, 73, 118, 155	AVIANE.....	234, 241, 251	BANZEL .....	110
aspirin low strength .	70, 73, 118, 155	AVODART .....	263	BAQSIMI ONE PACK	246, 264
aspirin regimen.	70, 73, 118, 155	AVONEX PEN .....	274	BAQSIMI TWO PACK	246, 264
aspirin-dipyridamole er ..	70, 155	AVONEX PREFILLED .....	274	BASAGLAR KWIKPEN ....	248
ASPRUZYO SPRINKLE.....	85	AYGESTIN .....	251	BASAGLAR TEMPO PEN .	248
ASTAGRAF XL .....	279	AYUNA.....	234, 241, 251	BAXDELA .....	30
ATACAND .....	76, 77	AYVAKIT.....	32	BAYCADRON.....	227
ATACAND HCT .....	77, 180	azacitidine.....	32	BAYER ASPIRIN ....	70, 71, 73, 118, 119, 155, 156
atazanavir sulfate.....	26	AZASAN.....	269, 274, 279	BAYER ASPIRIN EC LOW DOSE.....	70, 73, 118, 155
ATELVIA.....	266	AZASITE .....	184	BAYER LOW DOSE.....	71, 73, 119, 156
atenolol .....	59, 80, 81, 87	azathioprine .....	269, 274, 279	baza antifungal.....	312
atenolol-chlorthalidone...	80, 181	azelastine hcl .....	183, 301, 302	b-complex .....	337
athletes foot (clotrimazole)...	312	azelastine-fluticasone ..	183, 187, 298, 302	b-complex (folic acid) ..	329, 337
athletes foot (terbinafine) .....	307	AZILECT .....	143	b-complex/b-12.....	337
ATIVAN.....	136, 137	azithromycin.....	29	BD AUTOSHIELD DUO....	163
atomoxetine hcl .....	140	AZOPT .....	186	BD INSULIN SYRINGE U/F .....	163
ATORVALIQ.....	91	AZOR .....	77, 89	BD INSULIN SYRINGE U/F 1/2UNIT .....	163
atorvastatin calcium.....	92	AZSTARYS .....	153	BD INSULIN SYRINGE U-500 .....	163
atovaquone .....	20	AZULFIDINE 31, 206, 269, 274		BD PEN NEEDLE MICRO U/F .....	163
ATRIPLA .....	24, 25	AZULFIDINE EN-TABS .....	31, 206, 269, 274	BD PEN NEEDLE MINI U/F .....	163
atropine sulfate .....	193	AZURETTE .....	234, 241, 251	BD PEN NEEDLE NANO 2ND GEN.....	163
ATROVENT HFA .....	46, 286	<b>B</b>		BD PEN NEEDLE NANO U/F .....	163
		b complex .....	337		
		b complex (folic acid)...	329, 337		
		b complex formula 1 (lipotrop) .....	223, 329		
		b complex vitamins (w/ fa)...	329, 337		

BD PEN NEEDLE ORIGINAL  
U/F..... 163

BD PEN NEEDLE SHORT U/F  
..... 163

BD SWAB SINGLE USE  
REGULAR..... 163

BD VEO INSULIN SYR U/F  
1/2UNIT ..... 163

BD VEO INSULIN SYRINGE  
U/F..... 163

BD VERITOR HOME COVID-  
19 TEST ..... 167

BEANO ..... 203

BEANO MELTAWAYS..... 203

BEANO TO GO ..... 203

BEANO ULTRA 800..... 203

BECONASE AQ..... 187, 298

BEELITH ..... 171, 211, 337

BELBUCA ..... 147

BELSOMRA ..... 128, 148

BENADRYL ALLERGY ... 1, 6,  
48, 107, 128, 287, 292

BENADRYL ALLERGY  
CHILDRENS ... 1, 6, 48, 107,  
128, 287, 292

BENADRYL ALLERGY  
ULTRATABS ... 1, 6, 48, 107,  
128, 287, 292

benazepril hcl ..... 78, 79

benazepril-hydrochlorothiazide  
..... 79, 180

BENEFIX ..... 65

benfotiamine multi-b .... 330, 337

BENICAR ..... 76, 77

BENICAR HCT ..... 77, 180

BENZAACLIN WITH PUMP  
..... 308, 322

benznidazole..... 20

benzoyl peroxide ..... 322

benzoyl peroxide wash ..... 322

benzoyl peroxide-erythromycin  
..... 308, 322

benzphetamine hcl..... 100

benztropine mesylate..... 48, 107

bepotastine besilate ..... 183

BEPREVE ..... 183

BERINERT ..... 268, 281

BESER ..... 315, 316

BESIVANCE ..... 184

BESREMI..... 27, 32, 274

beta carotene..... 336

beta carotene provitamin a ... 336

betaine ..... 282

betaine hcl..... 218

betamethasone dipropionate .316

betamethasone dipropionate aug  
..... 316

betamethasone valerate..... 316

BETAPACE ... 54, 80, 82, 87, 88

BETAPACE AF .. 54, 80, 81, 87,  
88

BETASERON ..... 274

betatemp childrens..... 101, 119

betaxolol hcl .59, 80, 82, 87, 186

bethanechol chloride..... 55

BETHKIS ..... 18, 184

BETIMOL ..... 186

BETOPTIC-S ..... 186

BEVESPI AEROSPHERE .... 46,  
57

bexarotene ..... 33, 325

BEXSERO..... 43

BEYFORTUS..... 28

bicalutamide ..... 33

BIKTARVY ..... 24, 25

bimatoprost..... 193

BIMZELX ..... 321, 325

BINAXNOW COVID-19 AG  
HOME TEST..... 167

biotin..... 337

bis subcit-metronid-tetracyc .. 19,  
20, 31, 200, 206

bisacodyl..... 211

bisacodyl ec ..... 211

bismatrol..... 195, 200, 207

bismatrol maximum strength  
..... 195, 200, 207

bismuth ..... 195, 200, 207

bismuth subsalicylate .. 195, 200,  
207

bismuth/metronidaz/tetracyclin  
..... 19, 20, 31, 200, 207

bisoprolol fumarate.... 59, 80, 82,  
87

bisoprolol-hydrochlorothiazide  
..... 80, 180

BLINCYTO..... 33

BLISOVI 24 FE.... 234, 241, 251

BLISOVI FE 1.5/30 .... 234, 241,  
251

BLISOVI FE 1/20.234, 241, 251

blood pressure monitor ..... 163

blood pressure monitor/arm.. 163

BLUE-EMU PAIN RELIEF  
DRY ..... 310

BONIVA..... 266

BOOSTRIX ..... 42, 43

bortezomib ..... 33

bosentan..... 95, 291, 306

BOSULIF ..... 33

bp gel ..... 322

BPROTECTED PEDIA D-  
VITE ..... 343

BPROTECTED PEDIA IRON  
..... 67

BRAFTOVI ..... 33

BREATHERITE VALVED  
MDI CHAMBER..... 163

BREO ELLIPTA ..... 57, 227

BREXAFEMME ..... 19

BREYNA..... 57, 227

BREZTRI AEROSPHERE... 46,  
57, 227

brIELlyn..... 234, 241, 251

BRILINTA ..... 71

brimonidine tartrate ..... 183

brimonidine tartrate-timolol 183,  
186

brinzolamide ..... 186

BRISDELLE..... 159

BRIVIACT ..... 110

BRIXADI ..... 147

BRIXADI (WEEKLY)..... 147

bromfenac sodium ..... 192

bromfenac sodium (once-daily)  
..... 192

bromocriptine mesylate ..... 142

BROMSITE ..... 192

BRONCHITOL ..... 301

BRONCHITOL TOLERANCE  
TEST..... 301

BROVANA ..... 57

BRUKINSA..... 33

BRYHALI ..... 316

b-stress..... 223, 330

budesonide .... 187, 227, 298, 299

budesonide er..... 227

budesonide-formoterol fumarate  
..... 57, 227

BUFFERIN.....	71, 73, 119, 156, 195, 211	calcium 500+d high potency	171, 344	CAPLYTA.....	134
BUNAVAIL .....	147	calcium 500+d3 .....	171, 344	CAPRELSA.....	33
BUPHENYL.....	169	calcium 600 .....	171	captopril.....	78, 79
buprenorphine.....	148	calcium 600 + d.....	171, 344	captopril-hydrochlorothiazide	79, 180
buprenorphine hcl.....	147	calcium 600 +d high potency .....	171, 344	CARAC .....	325
buprenorphine hcl-naloxone hcl .....	147, 148	calcium 600 high potency.....	171	CARBAGLU .....	169
bupropion hcl.....	114	calcium 600/vitamin d..	172, 344	carbamazepine .....	111, 115
bupropion hcl er (smoking det) .....	59, 114	calcium 600/vitamin d3	172, 344	carbamazepine er .....	110, 115
bupropion hcl er (sr).....	114	calcium 600+d .....	172, 344	CARBATROL.....	111, 115
bupropion hcl er (xl).....	114	calcium 600+d high potency	172, 344	carbidopa .....	141
buspiron hcl .....	128	calcium 600+d3 .....	172, 344	carbidopa-levodopa .....	141
butalbital-acetaminophen ....	102, 136	calcium acetate .....	170, 172	carbidopa-levodopa er .....	141
butalbital-apap-caff-cod .....	102, 136, 144, 153	calcium acetate (phos binder) .....	170, 172	carbidopa-levodopa-entacapone .....	140, 141
butalbital-apap-caffeine.....	102, 136, 153	calcium antacid.....	195, 207	carbinoxamine maleate.	1, 6, 292
butalbital-asa-caff-codeine ..	136, 144, 153, 156	calcium antacid extra strength .....	195, 207	carboxymethylcellulose sod pf .....	189
butalbital-aspirin-caffeine ...	136, 153, 156	calcium carb-cholecalciferol	172, 344	carboxymethylcellulose sodium .....	189
butenafine hcl .....	315	calcium carbonate .	172, 195, 207	CARDIZEM .....	83, 84, 88, 95
BUTISOL SODIUM .....	136	calcium carbonate antacid ...	195, 207	CARDIZEM CD...	83, 84, 88, 95
butorphanol tartrate .....	119, 148	calcium carbonate-vitamin d	172, 344	CARDIZEM LA...	83, 84, 88, 95
BUTRANS .....	148	calcium citrate .....	172	CARDURA.....	55, 75, 76
BYDUREON BCISE .....	247	calcium citrate+d3 .....	172, 344	CARDURA XL .....	55, 75, 76
BYETTA 10 MCG PEN .....	247	calcium citrate-vitamin d.....	172, 344	CARESTART COVID-19 HOME TEST.....	167
BYETTA 5 MCG PEN .....	247	calcium citrate-vitamin d3...	172, 344	carglumic acid .....	169
BYLVAY .....	220	calcium gluconate.....	172	CARNITOR.....	282
BYLVAY (PELLETS).....	220	calcium high potency.....	172	CARNITOR SF .....	282
BYSTOLIC .....	54, 80	calcium high potency/vitamin d .....	172, 344	carteolol hcl .....	186
<b>C</b>		calcium plus vitamin d .	172, 344	CARTIA XT.....	83, 84, 88, 95
c 500.....	341	calcium plus vitamin d3	172, 345	carvedilol .	54, 56, 75, 76, 80, 82, 87
CABENUVA.....	24, 25	calcium+d3 .....	173, 345	carvedilol phosphate er....	54, 56, 75, 76, 80, 82, 87
cabergoline .....	142	calcium-vitamin d3.....	173, 345	CASODEX .....	33
CABOMETYX.....	33	CAL-GEST ANTACID	195, 207	CATAPRES.....	45, 85
CADUET.....	89, 92	CALQUENCE.....	33	CATAPRES-TTS-1 .....	45, 85
caffeine citrate .....	119, 153	CALTRATE 600+D3...	173, 345	CATAPRES-TTS-2 .....	45, 85
CALCIDOL.....	343	CAMCEVI.....	33, 246	CATAPRES-TTS-3 .....	45, 85
calcipotriene .....	325	CAMILA .....	234, 251	CAYA.....	284
calcitonin (salmon).....	232, 266	CAMZYOS .....	85	CAYSTON .....	28
CALCITRATE .....	171, 343	candesartan cilexetil .....	76, 77	CAZIAN.....	234, 241, 251
calcitriol.....	325, 343	candesartan cilexetil-hctz	77, 180	cefaclor .....	17
calcium + vitamin d3....	171, 343	capecitabine .....	33	cefaclor er .....	17
calcium 500 + d.....	171, 344			cefadroxil.....	17
calcium 500 + d3 .....	171, 344			cefdinir.....	17
calcium 500+d.....	171, 344			cefixime .....	17
				cefpodoxime proxetil.....	17

cefprozil..... 17  
 cefuroxime axetil..... 17  
 CELEBREX ..... 141  
 celecoxib..... 141  
 CELEXA ..... 159  
 CELLCEPT .....279  
 CELLCEPT INTRAVENOUS  
 .....279  
 CELONTIN..... 160  
 CENTANY..... 308  
 CENTANY AT ..... 308  
 CENTRUM ADULTS.. 173, 330  
 CENTRUM SILVER ... 173, 330  
 CENTRUM SILVER 50+MEN  
 ..... 173, 330  
 CENTRUM SILVER  
 50+WOMEN ..... 173, 330  
 CENTRUM SILVER ADULT  
 50+..... 173, 330  
 CENTRUM ULTRA WOMENS  
 ..... 173, 330  
 CENTRUM WOMEN.. 173, 330  
 cephalixin..... 17  
 CEPROTIN ..... 62  
 CEQUA ..... 189  
 CERDELGA..... 282  
 CEREBYX ..... 142  
 CERZYME ..... 182  
 CEROVITE SENIOR... 173, 330  
 CERTAVITE SENIOR 173, 330  
 CERTAVITE  
 SENIOR/ANTIOXIDANT  
 ..... 173, 330  
 CERTAVITE/ANTIOXIDANT  
 S..... 173, 330  
 cetirizine hcl ..... 14, 302  
 cetirizine hcl allergy child..... 13,  
 302  
 cetirizine hcl childrens ... 13, 302  
 cetirizine hcl childrens alrgy . 13,  
 302  
 CETRAXAL..... 184  
 CHANTIX CONTINUING  
 MONTH PAK ..... 51, 59  
 CHANTIX STARTING  
 MONTH PAK ..... 51, 59  
 CHARLOTTE 24 FE ..234, 241,  
 251  
 CHATEAL .....234, 241, 251  
 CHATEAL EQ.....234, 241, 251  
 CHEMET.....226, 264  
 CHEMSTRIP K..... 168  
 childrens 24 hour allergy 14, 302  
 childrens acetaminophen ..... 102,  
 119  
 childrens apap..... 102, 119  
 childrens aspirin71, 73, 119, 156  
 childrens ibuprofen..... 119, 148  
 childrens loratadine ..... 14, 302  
 childrens non-aspirin .... 102, 119  
 childrens silapap ..... 102, 119  
 chlordiazepoxide hcl..... 137  
 chlordiazepoxide-amitriptyline  
 ..... 137, 161  
 chlorhexidine gluconate 189, 322  
 chlorhist..... 6, 12, 292  
 chloroquine phosphate..... 19  
 chlorpheniramine maleate .6, 12,  
 292  
 chlorpromazine hcl ..... 153  
 chlorthalidone..... 95, 181  
 CHLOR-TRIMETON 6, 12, 292  
 chlorzoxazone..... 53  
 cholestyramine.....83  
 cholestyramine light .....83  
 CIBINQO ..... 269, 325  
 CICLODAN .....321  
 ciclopirox..... 321  
 ciclopirox olamine ..... 321  
 ciclopirox treatment..... 321  
 cilostazol..... 71, 93  
 CILOXAN ..... 184  
 cimetidine ..... 11, 222  
 cimetidine 200 ..... 11, 222  
 cimetidine hcl ..... 11, 222  
 CIMZIA..... 220, 269, 274  
 CIMZIA (2 SYRINGE).....220,  
 269, 274  
 CIMZIA STARTER KIT ....220,  
 269, 274  
 cinacalcet hcl .....232  
 CINRYZE..... 268, 281  
 CIPRO ..... 20, 21, 30  
 CIPRO HC..... 184, 187  
 CIPRODEX..... 184, 187  
 ciprofloxacin..... 21, 30  
 ciprofloxacin hcl.....21, 30, 184  
 ciprofloxacin-dexamethasone  
 ..... 184, 187  
 ciprofloxacin-fluocinolone pf  
 ..... 184, 187  
 citalopram hydrobromide ..... 159  
 CITRACAL MAXIMUM ...173,  
 345  
 CITROMA.....211  
 cladribine .....33  
 CLARAVIS .....325  
 CLARINEX..... 14, 302  
 clarithromycin.....21, 29, 208  
 clarithromycin er .....21, 29, 207  
 CLARITIN REDITABS .14, 302  
 classic prenatal.....67, 330, 337  
 CLEAN & CLEAR PERSA-  
 GEL MAX ST .....322  
 CLEAR EYES NATURAL  
 TEARS ..... 189  
 clemastine fumarate.....1, 6, 292  
 CLEOCIN.....308  
 CLEVER CHOICE BP  
 MONITOR/ARM ..... 163  
 CLEVER CHOICE HOLDING  
 CHAMBER ..... 163  
 clindamycin hcl .....27  
 clindamycin palmitate hcl.....28  
 clindamycin phos-benzoyl perox  
 .....308, 322  
 clindamycin phosphate .....308  
 CLINDESSE.....308  
 CLINITEST RAPID COVID-19  
 TEST.....167  
 clobazam..... 136, 137  
 clobetasol prop emollient base  
 .....316  
 clobetasol propionate.....316  
 clobetasol propionate e.....316  
 clobetasol propionate emulsion  
 .....316  
 CLOBEX .....316  
 CLOBEX SPRAY .....316  
 clocortolone pivalate .....316  
 CLODAN .....316, 320  
 CLODERM.....317  
 clofarabine .....33  
 CLOLAR .....33  
 clomipramine hcl ..... 161  
 clonazepam..... 136, 137  
 clonidine .....45, 85  
 clonidine hcl .....45, 85  
 clonidine hcl er .....45, 85

clopidogrel bisulfate..... 71  
 clorazepate dipotassium 136, 137  
 clotrimazole..... 312  
 clotrimazole 3..... 312  
 clotrimazole af..... 312  
 clotrimazole anti-fungal ..... 312  
 clotrimazole athletes foot ..... 312  
 clotrimazole-7..... 312  
 clotrimazole-betamethasone 312,  
 317  
 clozapine..... 134  
 CLOZARIL ..... 134  
 COAGADDEX ..... 65  
 codeine sulfate..... 144, 287  
 COGENTIN ..... 48, 107  
 COLACE..... 211  
 COLACE 2-IN-1 ..... 211  
 COLACE CLEAR..... 211  
 COLAZAL ..... 206  
 colchicine ..... 265  
 colchicine-probenecid .. 181, 265  
 COLCRYS ..... 265  
 colesevelam hcl ..... 83, 232  
 COLESTID..... 83  
 COLESTID FLAVORED ..... 83  
 colestipol hcl ..... 83  
 COMBIGAN ..... 183, 186  
 COMBIVENT RESPIMAT ..46,  
 57, 286  
 COMBIVIR..... 25  
 COMETRIQ (100 MG DAILY  
 DOSE) ..... 33  
 COMETRIQ (140 MG DAILY  
 DOSE) ..... 33  
 COMETRIQ (60 MG DAILY  
 DOSE) ..... 33  
 comfort gel antacid & anti-gas  
 ..... 195, 203  
 comfort gel antacid anti-gas 195,  
 203  
 COMIRNATY..... 43  
 COMPACT SPACE  
 CHAMBER ..... 163  
 COMPACT SPACE  
 CHAMBER/LG MASK... 163  
 COMPACT SPACE  
 CHAMBER/MED MASK 163  
 COMPACT SPACE  
 CHAMBER/SM MASK... 163  
 COMPLERA ..... 25  
 complete allergy relief... 1, 6, 48,  
 107, 128, 287, 292  
 completenate..... 67, 330, 337  
 complex b-100-inositol.223, 330  
 compoz .. 1, 6, 48, 107, 128, 287,  
 292  
 COMTAN..... 140  
 CONCERTA ..... 153  
 constulose ..... 169  
 CONZIP..... 144  
 COPAXONE ..... 274  
 COPIKTRA ..... 33  
 CORDRAN ..... 317  
 COREG ... 54, 56, 75, 76, 80, 82,  
 87  
 COREG CR... 54, 56, 75, 76, 80,  
 82, 87  
 CORGARD ..... 54, 80, 82  
 CORIFACT ..... 65  
 CORLANOR..... 85, 95  
 CORRECTOL ..... 211  
 CORTEF..... 227  
 CORTIZONE-10..... 317  
 CORTIZONE-10 FEMININE  
 ITCH..... 317  
 CORTIZONE-10 INTENSIVE  
 HEALING ..... 315, 317  
 CORTIZONE-10 OVERNIGHT  
 ITCH..... 317  
 CORTIZONE-10 PLUS 315, 317  
 CORTIZONE-10/ALOE ..... 315,  
 317  
 CORTROPHIN ..... 167, 249  
 CORTROSYN..... 167  
 COSENTYX..... 270, 325  
 COSENTYX (300 MG DOSE)  
 ..... 269, 325  
 COSENTYX SENSOREADY  
 (300 MG)..... 269, 325  
 COSENTYX SENSOREADY  
 PEN ..... 270, 325  
 COSENTYX UNOREADY 270,  
 325  
 COSOPT..... 186  
 COSOPT PF ..... 186  
 cosyntropin ..... 167  
 COTELLIC..... 33  
 COTEMPLA XR-ODT ..... 153  
 covid-19 at home antigen test  
 ..... 167  
 covid-19 at-home test ..... 167  
 COZAAR..... 76, 77  
 CREON..... 182, 218  
 CRESEMBA..... 21  
 CRESTOR ..... 92  
 CRINONE ..... 251  
 CRIXIVAN..... 26  
 cromolyn sodium .. 183, 189, 297  
 CRYSELLE-28..... 234, 241, 251  
 CUE COVID-19 TEST..... 167  
 CULTURELLE ..... 200  
 CULTURELLE HEALTH &  
 WELLNESS ..... 200  
 CULTURELLE HEALTH  
 (INULIN)..... 200, 211  
 CULTURELLE IBS  
 COMPLETE ..... 169  
 CULTURELLE IMMUNITY  
 SUPPORT..... 200  
 CULTURELLE PRO-WELL  
 HEALTH ..... 200  
 cvs 8hr arthritis pain relief... 102,  
 119  
 cvs 8hr muscle aches & pain 102,  
 119  
 cvs acetaminophen..... 102, 119  
 cvs acetaminophen ex st ..... 102,  
 119  
 cvs acne treatment ..... 322  
 cvs alcohol prep pads..... 163  
 cvs all day pain relief... 119, 148,  
 265  
 cvs allergy childrens ..... 14, 302  
 cvs allergy relief .. 1, 2, 6, 12, 14,  
 48, 107, 128, 287, 292, 302  
 cvs allergy relief adult ... 1, 6, 48,  
 107, 128, 287, 292  
 cvs allergy relief childrens... 1, 6,  
 14, 48, 107, 128, 287, 292,  
 302  
 cvs allergy relief(cetirizine)... 14,  
 302  
 cvs antacid extra strength .... 195,  
 208  
 cvs antacid kids..... 195, 208  
 cvs antacid maximum strength  
 ..... 195, 208  
 cvs antacid plus antigas 195, 203  
 cvs antacid ultra strength ..... 195,  
 208

cvs antacid/anti-gas ..... 195, 203  
 cvs anti-diarrheal .. 196, 200, 208  
 cvs anti-itch maximum strength  
 ..... 317  
 cvs arthritis pain relief.. 102, 119  
 cvs aspirin..... 71, 74, 119, 156  
 cvs aspirin adult low dose 71, 73,  
 119, 156  
 cvs aspirin ec .... 71, 73, 119, 156  
 cvs aspirin low dose 71, 73, 119,  
 156  
 cvs aspirin low strength... 71, 74,  
 119, 156  
 cvs bacitracin..... 308  
 cvs bacitracin zinc ..... 308  
 CVS BEANAID ..... 203  
 cvs beta carotene ..... 336  
 cvs bisacodyl ..... 211  
 cvs blood pressure monitor .. 163  
 cvs budesonide ..... 187, 298  
 cvs butenafine hcl..... 315  
 cvs calcium..... 173  
 cvs calcium + d3..... 173, 345  
 cvs calcium 600 & vitamin d3  
 ..... 173, 345  
 cvs calcium 600+d..... 173, 345  
 CVS CHEWY NOT CHALKY  
 FLAVOR..... 196, 208  
 cvs childrens allergy..... 2, 6, 48,  
 107, 128, 287, 292  
 cvs citrate of magnesia ..... 211  
 cvs clotrimazole..... 312  
 cvs clotrimazole 3..... 312  
 cvs cortisone maximum strength  
 ..... 317  
 cvs d3..... 345  
 cvs dairy relief..... 218  
 cvs dairy relief ex st ..... 218  
 cvs dairy relief fast acting .... 218  
 cvs diclofenac sodium .. 323, 325  
 cvs enema disposable ..... 211  
 cvs enema ready-to-use ..... 211  
 cvs esomeprazole magnesium  
 ..... 224  
 cvs fish oil ..... 282  
 cvs folic acid..... 337  
 cvs gas relief..... 203  
 cvs gas relief extra strength.. 203  
 cvs gas relief infants..... 203  
 cvs gentle laxative ..... 211  
 cvs gentle laxative womens.. 211  
 cvs genuine aspirin .. 71, 74, 119,  
 156  
 cvs hydrocortisone anti-itch .317  
 cvs ibuprofen ..... 119, 148  
 cvs ibuprofen childrens 119, 148  
 cvs indoor/outdoor allergy rlf 14,  
 302  
 cvs infants gas relief..... 203  
 cvs iron ..... 67  
 cvs itch relief..... 312  
 CVS KETONE CARE..... 168  
 cvs lactase..... 218  
 cvs lactase enzyme ultra str.. 218  
 cvs lansoprazole ..... 224  
 cvs laxative dietary supplement  
 ..... 211  
 cvs laxative pills max st..... 211  
 cvs lice killing ..... 324  
 cvs lice treatment..... 324  
 cvs lubricant drops fast act... 190  
 cvs lubricant drops long last. 190  
 cvs lubricant eye drops (pf).. 190  
 cvs magnesium ..... 173  
 cvs magnesium citrate ..... 211  
 cvs miconazole 3 combo pack  
 ..... 312  
 cvs miconazole 3 combo-supp  
 ..... 312  
 cvs miconazole 7 ..... 312  
 cvs milk of magnesia..... 211  
 cvs mineral oil enema..... 211  
 cvs naproxen sodium... 120, 148,  
 265  
 cvs nasal allergy spray.. 187, 298  
 cvs natural daily fiber ..... 211  
 cvs natural fish oil ..... 282  
 cvs natural tears pf..... 190  
 cvs nicotine..... 52, 59, 60  
 cvs nicotine polacrilex..... 52, 59  
 cvs olopatadine hcl ..... 11, 183  
 cvs omeprazole ..... 224  
 cvs omeprazole magnesium.. 224  
 cvs omeprazole-sod bicarbonate  
 ..... 196, 224  
 cvs one daily essential .. 173, 330  
 cvs pain & fever childrens... 102,  
 120  
 cvs pain relief ..... 102, 120, 310  
 cvs pain relief extra strength 102,  
 120  
 cvs ped electrolyte freeze pop  
 ..... 173  
 cvs prep..... 163  
 CVS PURELAX..... 212  
 cvs ringworm ..... 312  
 cvs saline nasal spray.... 190, 297  
 cvs sleep aid... 2, 6, 48, 107, 129,  
 287, 292  
 cvs sleep aid nighttime .. 2, 6, 48,  
 107, 128, 287, 292  
 cvs sleep-aid (doxylamine).. 2, 6,  
 129, 292  
 cvs sleep-aid nighttime .. 2, 6, 48,  
 107, 129, 287, 292  
 cvs smooth antacid extra st.. 196,  
 208  
 cvs sod chloride hypertonicity  
 ..... 190  
 cvs sodium chloride..... 190  
 cvs spectravite adult 50+ ..... 173,  
 330  
 cvs spectravite adults.... 173, 330  
 cvs spectravite advanced ..... 173,  
 330  
 cvs spectravite men 50+ 173, 330  
 cvs spectravite ultra men 50+  
 ..... 173, 330  
 cvs spectravite ultra mens.... 174,  
 330  
 cvs spectravite ultra women 174,  
 330  
 cvs spectravite women.. 174, 330  
 cvs spectravite women 50+ . 174,  
 330  
 cvs spectravite womens senior  
 ..... 174, 330  
 cvs stomach relief. 196, 200, 208  
 cvs stomach relief max st .... 196,  
 200, 208  
 cvs stool softener ..... 212  
 cvs stool softener/laxative .... 212  
 cvs ultra sleep ..... 2, 6, 129, 292  
 cvs vitamin c..... 341  
 cyanocobalamin..... 70, 337  
 CYCLAFEM 1/35 234, 241, 251  
 CYCLAFEM 7/7/7 ..... 234, 241,  
 251  
 cyclobenzaprine hcl ..... 53

cyclobenzaprine hcl er.....	53	DAKLINZA .....	23	desmopressin acetate spray....	65, 250
cyclopentolate hcl.....	193	dalfampridine er .....	282	desogestrel-ethinyl estradiol	235, 241, 252
cyclophosphamide.....	33, 279	DALIRESP .....	299	desonide.....	317
cycloserine.....	21	danazol.....	231	desoximetasone.....	317
cyclosporine .	189, 270, 274, 279	DANTRIUM .....	54	DESOXYN.....	100
cyclosporine modified .	270, 274, 279	dantrolene sodium .....	54	DESRX.....	317
CYKLOKAPRON.....	65	dapagliflozin pro-metformin er .....	233, 259	desvenlafaxine er .....	158
CYLTEZO (2 PEN) .....	270	dapagliflozin propanediol.....	260	desvenlafaxine succinate er ..	158
CYLTEZO (2 SYRINGE)...	220, 270, 274	dapsone.....	20	DETROL .....	328
CYLTEZO-CD/UC/HS		darifenacin hydrobromide er	328	DETROL LA .....	328
STARTER .....	270	DASETTA 1/35....	234, 241, 252	dexamethasone .....	227
CYLTEZO-PSORIASIS/UV		DASETTA 7/7/7...	235, 241, 252	DEXAMETHASONE	
STARTER .....	270	DAURISMO.....	33	INTENSOL.....	227
CYMBALTA .....	142, 158	DAYBUE .....	140	dexamethasone sod phosphate pf .....	228
cyproheptadine hcl .....	5, 6, 292	DAYHIST ALLERGY 12		dexamethasone sodium	
CYRAMZA.....	33	HOUR RELIEF .....	2, 7, 292	phosphate.....	187, 228
CYRED .....	234, 241, 251	DAYPRO.....	148	DEXCOM G6 RECEIVER ..	163
CYRED EQ.....	234, 241, 252	DAYTRANA.....	154	DEXCOM G6 SENSOR.....	164
CYSTADANE.....	282	DAYVIGO .....	129, 148	DEXCOM G6 TRANSMITTER .....	164
CYSTAGON .....	282	DEBLITANE.....	235, 252	DEXCOM G7 RECEIVER ..	164
cytarabine .....	33	DECADRON.....	227	DEXCOM G7 SENSOR.....	164
cytarabine (pf) .....	33	DECARA.....	345	DEXEDRINE .....	100
CYTOMEL.....	262	decitabine.....	33	DEXILANT.....	224
<b>D</b>		deep sea nasal spray .....	190, 297	dexlansoprazole .....	224
d 1000.....	345	deflazacort .....	227	dexmedetomidine hcl.....	45, 129
d 5000.....	345	dekas essential .....	331	dexmedetomidine hcl in nacl.	45, 46, 129, 174
d-1000 extra strength.....	345	DEKAS PLUS.....	174, 331	dexmedetomidine hcl-dextrose .....	46, 129, 174
d2000 ultra strength.....	345	DELESTROGEN .....	241, 266	dexmethylphenidate hcl.....	154
d3.....	345	DELSTRIGO.....	25	dexmethylphenidate hcl er....	154
d3 2000.....	345	DELTASONE .....	227	DEXPAK 10 DAY .....	228
d3 5000.....	345	DELZICOL .....	206	DEXPAK 13 DAY .....	228
d3 high potency .....	345	DENAVIR.....	311	DEXPAK 6 DAY .....	228
d3 maximum strength.....	345	DENTA 5000 PLUS.....	267	dextroamphetamine sulfate...	100
d3-1000.....	345	DENTAGEL.....	267	.....	100
D3-50.....	345	DEPACON .....	111, 115, 120	DHIVY .....	141
d-5000.....	345	DEPAKOTE .....	111, 115, 120	DIACOMIT .....	111
dabigatran etexilate mesylate .	63	DEPAKOTE ER...	111, 115, 120	DIALYVITE.....	331, 337, 341
DACOGEN .....	33	DEPAKOTE SPRINKLES..	111, 115, 120	DIALYVITE 3000.....	174, 331, 337, 341, 349
daily value multivitamin.....	330	DEPO-MEDROL .....	227	DIALYVITE 5000.....	174, 331, 337, 341, 349
daily vitamin.....	331	DERMA-SMOOTH/FS		DIALYVITE 800..	331, 337, 341
daily vitamin formula+iron ...	67, 330	BODY.....	317		
daily vites .....	331	DERMA-SMOOTH/FS			
daily-vite.....	331	SCALP.....	317		
daily-vite multivitamin.....	331	desipramine hcl.....	161		
dairy digestive .....	218	desloratadine.....	14, 302		
dairy digestive ultra.....	218	desmopressin ace spray refig	65, 250		
dairy relief .....	218	250			
		desmopressin acetate .....	65, 250		



DIALYVITE 800 PLUS D..331, 337, 341, 345	diltiazem hcl er .....83, 84, 88, 95	dorzolamide hcl-timolol mal pf .....186, 187
dialyvite 800/ultra d ..... 174, 331	diltiazem hcl er beads 83, 84, 88, 95	DOTTI .....241, 267
DIALYVITE 800/ZINC..... 174, 331, 337, 342	diltiazem hcl er coated beads.83, 84, 88, 95	DOVATO .....24, 25
DIALYVITE 800-ZINC 15. 174, 331, 337, 342	dilt-xr .....83, 84, 88, 95	doxazosin mesylate.....55, 75, 76
DIALYVITE SUPREME D 174, 331, 337	dimenhydrinate .....7, 206	doxepin hcl .....161
DIALYVITE VITAMIN D 5000 .....345	dimethyl fumarate.....274	doxycycline hyclate .....19, 31
DIALYVITE VITAMIN D3 MAX.....345	dimethyl fumarate starter pack .....274	doxycycline monohydrate 19, 31
DIALYVITE/ZINC ..... 174, 331, 337, 342	DIOVAN .....76, 77	DRIZALMA SPRINKLE .....158
diarrhea..... 196, 200, 208	DIOVAN HCT .....77, 180	dronabinol .....202
DIASCREEN 1K..... 164	DIPENTUM .....206	droperidol .....129
DIASTAT ACUDIAL.. 136, 137	diphen .....2, 7, 48, 107, 129, 287, 293	drosiprenone-ethinyl estradiol .....235, 241, 252
DIASTAT PEDIATRIC ..... 136, 137	diphenhydramine hcl .....2, 7, 48, 107, 129, 288, 293	DROXIA.....34
DIATRUST COVID-19 HOME TEST ..... 167	diphenhydramine hcl (sleep)2, 7, 48, 107, 129, 287, 293	drxchoice gas relief.....203
diazepam..... 136, 137, 138	diphenhydramine hcl childrens2, 7, 48, 107, 129, 288, 293	dry eye relief.....190
DIAZEPAM INTENSOL.... 136, 138	diphenoxylate-atropine...46, 200	dss .....212
diazoxide .....232	DIPROLENE.....317	DUAKLIR PRESSAIR ...46, 57
diclofenac ..... 148	dipyridamole.....71, 95, 167	DUETACT .....261, 262
diclofenac epolamine..... 149	disopyramide phosphate .....86	DUEXIS .....149, 222
diclofenac potassium ..... 149	disulfiram.....263	DULCOLAX .....212
diclofenac sodium 149, 161, 192, 323, 325, 326	DITROPAN XL .....328	DULCOLAX PINK LAXATIVE.....212
diclofenac sodium er ..... 149	DIURIL .....94, 180	DULCOLAX PINK STOOL SOFTENER.....212
diclofenac-misoprostol. 149, 223	divalproex sodium 111, 115, 120	DULERA .....57, 228
dicloxacillin sodium .....30	divalproex sodium er ... 111, 115, 120	duloxetine hcl .....142, 158
dicyclomine hcl .....46	docosanol.....311	DULOXICAINE.....158, 310
didanosine.....25	docqlace.....212	DUOPA .....141
diethylpropion hcl ..... 100	docu .....212	DUPIXENT .....296, 326
diethylpropion hcl er ..... 100	DOCU LIQUID.....212	dutasteride.....263
DIFICID .....29	docuprene .....212	dutasteride-tamsulosin hcl .....56, 263
diflorasone diacetate.....317	docusate calcium .....212	D-VI-SOL.....345
DIFLUCAN.....22	docusate mini.....212	d-vite pediatric.....346
diflunisal..... 149	docusate sodium .....212	DYANAVEL XR .....100
digest ii .....218	DOCUSOL MINI.....212	DYMISTA ....183, 187, 298, 302
digestive enzyme .....218	docuzen.....212	<b>E</b>
digestive enzymes .....218	DODEX .....70, 337	E.E.S. 400 .....22
digoxin..... 80, 85	dofetilide.....88	E.E.S. GRANULES.....22
DILANTIN.....86, 142	DOK .....212	EASIVENT.....164
DILANTIN INFATABS 86, 142	donepezil hcl.....55	EASIVENT MASK LARGE 164
DILAUDID ..... 144	DOPRAM.....154	EASIVENT MASK MEDIUM .....164
diltiazem hcl .....83, 84, 88, 95	DORAL .....138	EASIVENT MASK SMALL164
	dorzolamide hcl .....186	EASY TOUCH ALCOHOL PREP MEDIUM.....164
	dorzolamide hcl-timolol mal 186	easy-lax.....212
		easy-lax plus .....212
		ec-naproxen .....120, 149, 265

econazole nitrate.....	312	ELEVIDYS 42.5-43.4 KG .....	98	EMSAM .....	143
ECONTRA EZ .....	235, 252	ELEVIDYS 43.5-44.4 KG .....	98	emtricitabine-tenofovir df.....	25
ECOTRIN LOW STRENGTH		ELEVIDYS 44.5-45.4 KG .....	98	EMTRIVA .....	26
.....	71, 74, 120, 156	ELEVIDYS 45.5-46.4 KG .....	98	enalapril maleate.....	78, 79
EDARBI.....	76, 77	ELEVIDYS 46.5-47.4 KG .....	98	enalapril-hydrochlorothiazide	79,
EDARBYCLOR.....	77, 180	ELEVIDYS 47.5-48.4 KG .....	98	180	
EDLUAR.....	129	ELEVIDYS 48.5-49.4 KG .....	98	ENBREL.....	270, 274, 275
EDURANT .....	25	ELEVIDYS 49.5-50.4 KG .....	98	ENBREL MINI .....	270, 274
efavirenz .....	25	ELEVIDYS 50.5-51.4 KG .....	98	ENBREL SURECLICK	270, 275
EFFER-K.....	174	ELEVIDYS 51.5-52.4 KG .....	99	ENDARI .....	282
EFFEXOR XR.....	158	ELEVIDYS 52.5-53.4 KG .....	99	ENDOCET .....	102, 144
EFFIENT .....	71	ELEVIDYS 53.5-54.4 KG .....	99	ENDUR-ACIN .....	337
EFUDEX .....	326	ELEVIDYS 54.5-55.4 KG .....	99	ENDUR-AMIDE.....	338
ELAPRASE.....	182	ELEVIDYS 55.5-56.4 KG .....	99	enema.....	212
ELELYSO .....	182	ELEVIDYS 56.5-57.4 KG .....	99	enema disposable.....	212
ELEPSIA XR .....	111	ELEVIDYS 57.5-58.4 KG .....	99	enema pediatric.....	212
eletriptan hydrobromide .....	158	ELEVIDYS 58.5-59.4 KG .....	99	enema ready-to-use.....	212
ELEVIDYS 10.0-10.4 KG .....	97	ELEVIDYS 59.5-60.4 KG .....	99	ENEMEEZ MINI .....	212
ELEVIDYS 10.5-11.4 KG .....	97	ELEVIDYS 60.5-61.4 KG .....	99	ENEMEEZ PLUS.....	212
ELEVIDYS 11.5-12.4 KG .....	97	ELEVIDYS 61.5-62.4 KG .....	99	ENFAMIL ENFALYTE.....	174
ELEVIDYS 12.5-13.4 KG .....	97	ELEVIDYS 62.5-63.4 KG .....	99	ENGERIX-B.....	43
ELEVIDYS 13.5-14.4 KG .....	97	ELEVIDYS 63.5-64.4 KG .....	99	ENJAYMO .....	63
ELEVIDYS 14.5-15.4 KG .....	97	ELEVIDYS 64.5-65.4 KG .....	99	enoxaparin sodium.....	67
ELEVIDYS 15.5-16.4 KG .....	97	ELEVIDYS 65.5-66.4 KG .....	99	ENPRESSE-28 .....	235, 242, 252
ELEVIDYS 16.5-17.4 KG .....	97	ELEVIDYS 66.5-67.4 KG .....	99	ENSKYCE.....	235, 242, 252
ELEVIDYS 17.5-18.4 KG .....	97	ELEVIDYS 67.5-68.4 KG .....	99	ENSPRYNG .....	275
ELEVIDYS 18.5-19.4 KG .....	97	ELEVIDYS 68.5-69.4 KG .....	99	entacapone .....	140
ELEVIDYS 19.5-20.4 KG .....	97	ELEVIDYS 69.5 KG PLUS...99		ENTADFI.....	93, 263
ELEVIDYS 20.5-21.4 KG .....	97	ELIDEL .....	279, 321, 326	entecavir .....	28
ELEVIDYS 21.5-22.4 KG .....	98	ELIGARD .....	34, 247	enteric fish oil .....	282
ELEVIDYS 22.5-23.4 KG .....	98	ELINEST.....	235, 241, 252	ENTRESTO.....	77, 94
ELEVIDYS 23.5-24.4 KG .....	98	ELIQUIS .....	63	ENTYVIO .....	220, 223
ELEVIDYS 24.5-25.4 KG .....	98	ELIQUIS DVT/PE STARTER		enulose.....	169
ELEVIDYS 25.5-26.4 KG .....	98	PACK .....	63	ENVARUSUS XR .....	279
ELEVIDYS 26.5-27.4 KG .....	98	ELLA.....	235, 252	enzymatic digestant .....	218
ELEVIDYS 27.5-28.4 KG .....	98	ellume covid-19 home test ...	167	enzyme digest .....	218
ELEVIDYS 28.5-29.4 KG .....	98	ELMIRON.....	282	EPANED .....	78, 79
ELEVIDYS 29.5-30.4 KG .....	98	ELOCTATE .....	65	EPCLUSA .....	23
ELEVIDYS 30.5-31.4 KG .....	98	ELOXATIN.....	34	EPIDIOLEX .....	111
ELEVIDYS 31.5-32.4 KG .....	98	ELURYNG.....	235, 241, 252	epinastine hcl .....	183
ELEVIDYS 32.5-33.4 KG .....	98	ELYXYB.....	120, 141	epinephrine .....	45, 286
ELEVIDYS 33.5-34.4 KG .....	98	EMCYT .....	34	EPIPEN 2-PAK .....	45, 286
ELEVIDYS 34.5-35.4 KG .....	98	EMEND.....	223	EPIPEN JR 2-PAK.....	45, 286
ELEVIDYS 35.5-36.4 KG .....	98	EMEND TRI-PACK .....	223	EPITOL .....	111, 115
ELEVIDYS 36.5-37.4 KG .....	98	EMFLAZA .....	228	EPIVIR .....	26
ELEVIDYS 37.5-38.4 KG .....	98	EMGALITY .....	139	EPOGEN .....	62, 64
ELEVIDYS 38.5-39.4 KG .....	98	EMGALITY (300 MG DOSE)		EPRONTIA .....	111, 120
ELEVIDYS 39.5-40.4 KG .....	98	.....	139	EPZICOM.....	26
ELEVIDYS 40.5-41.4 KG .....	98	EMOQUETTE.....	235, 242, 252	eq 8hr arthritis pain relief ....	102,
ELEVIDYS 41.5-42.4 KG .....	98	EMPAVELI.....	268, 281	120	

eq acetaminophen..... 102, 120  
 eq acid reducer ..... 11, 222  
 eq allergy childrens ..... 14, 302  
 eq allergy relief..... 14, 302  
 eq allergy relief (cetirizine) ... 14, 302  
 eq allergy relief childrens .... 2, 7, 14, 49, 107, 129, 288, 293, 302  
 eq antacid..... 196, 208  
 eq antacid maximum strength ..... 196, 203  
 eq anti-diarrheal..... 200  
 eq arthritis pain..... 323, 326  
 eq aspirin ..... 71, 74, 120, 156  
 eq aspirin adult low dose. 71, 74, 120, 156  
 eq aspirin low dose.. 71, 74, 120, 156  
 eq athletes foot ..... 313  
 eq athletes foot (terbinafine) 307  
 eq bacitracin zinc..... 308  
 eq calcium 500+d ..... 174, 346  
 eq calcium 600+d ..... 174, 346  
 eq calcium citrate+d ..... 174, 346  
 eq chlortabs ..... 7, 12, 293  
 EQ CLEARLAX ..... 213  
 eq complete multivit adult 50+ ..... 174, 331  
 eq complete multivitamin-adult ..... 174, 331  
 eq dairy digestive fast acting 218  
 eq famotidine max st ..... 11, 222  
 eq gas relief extra strength ... 203  
 eq hydrocortisone ..... 317  
 eq ibuprofen..... 120, 149  
 eq ibuprofen childrens.. 120, 149  
 eq ibuprofen junior ..... 120, 149  
 eq infants gas relief ..... 203  
 eq jock itch ..... 313  
 eq laxative maximum strength ..... 213  
 eq lidocaine pain relieving ... 310  
 eq loperamide hcl ..... 200  
 eq magnesium citrate..... 213  
 eq miconazole 7 day treatment ..... 313  
 eq nasal allergy ..... 187, 298  
 eq natural laxative ..... 213  
 eq natural vegetable laxative 213  
 eq nicotine ..... 52, 60  
 eq nicotine polacrilex ..... 52, 60  
 eq nicotine step 3 ..... 52, 60  
 eq nighttime sleep aid max st .. 2, 7, 49, 107, 129, 288, 293  
 eq omeprazole..... 224  
 eq omeprazole magnesium ... 224  
 eq pain & fever childrens .... 102, 120  
 eq pain & fever infants . 102, 120  
 eq pain reliever ..... 102, 120  
 eq pain reliever ex st..... 102, 120  
 eq pink-bismuth .... 196, 200, 208  
 eq restore plus lubricant eye. 190  
 eq restore tears ..... 190  
 eq saline nasal spray ..... 190, 297  
 eq space chamber anti-static. 164  
 eq space chamber anti-static l ..... 164  
 eq space chamber anti-static m ..... 164  
 eq space chamber anti-static s ..... 164  
 eq stomach relief .. 196, 200, 208  
 eq stool softener/laxative..... 213  
 eq triple antibiotic..... 308  
 eq vegetable laxative ..... 213  
 eql acetaminophen childrens 102, 120  
 eql acetaminophen ex st 102, 121  
 eql all day allergy ..... 14, 302  
 eql aller-ease..... 14, 302  
 eql allergy relief..... 2, 7, 14, 49, 107, 129, 288, 293, 303  
 eql antacid..... 196, 208  
 eql antacid/anti-gas..... 196, 203  
 eql antifungal..... 313  
 eql anti-itch intensive heal.... 317  
 eql anti-itch maximum strength ..... 317  
 eql aspirin low dose. 71, 74, 121, 156  
 eql athletes foot(terbinafine) 307  
 eql b complex 50 ..... 331, 338  
 eql bacitracin zinc..... 308  
 eql calcium/vitamin d ... 174, 346  
 eql calcium/vitamin d3 . 174, 346  
 eql childrens ibuprofen. 121, 149  
 EQL CLEARLAX..... 213  
 eql dairy digest fast acting.... 218  
 eql digestive enzymes..... 218  
 eql fiber therapy..... 213  
 eql first aid antibiotic..... 309  
 eql fish oil..... 282  
 eql gentle laxative..... 213  
 eql ibuprofen..... 121, 149  
 eql ibuprofen infants..... 121, 149  
 eql ibuprofen junior strength 121, 149  
 eql infants gas relief..... 204  
 eql lice killing max st ..... 324  
 eql magnesium citrate..... 213  
 eql miconazole 7..... 313  
 eql milk of magnesia ..... 213  
 eql niacin flush free ..... 95  
 eql nicotine polacrilex ..... 52, 60  
 eql nighttime sleep aid... 2, 7, 49, 107, 129, 288, 293  
 eql omeprazole..... 224  
 eql ready-to-use enema..... 213  
 eql saline nasal spray .... 190, 297  
 eql senna laxative ..... 213  
 eql senna-s ..... 213  
 eql sleep aid ... 2, 7, 49, 108, 129, 288, 293  
 eql stomach relief . 196, 200, 208  
 eql stool softener/stimulant... 213  
 eql vitamin d3 ..... 346  
 eql vitamin e ..... 349  
 EQUETRO ..... 111, 115  
 ergocalciferol..... 346  
 ERIVEDGE ..... 34  
 ERLEADA ..... 34  
 erlotinib hcl..... 34  
 ERMEZA..... 262  
 ERRIN ..... 235, 252  
 ERTACZO..... 313  
 ERYPED 200..... 22  
 ERYPED 400..... 22  
 ERY-TAB..... 22  
 ERYTHROCIN STEARATE. 22  
 erythromycin..... 23, 185, 309  
 erythromycin base ..... 22  
 erythromycin ethylsuccinate.. 22, 23  
 escitalopram oxalate ..... 159  
 ESGIC..... 102, 136, 154  
 esomeprazole magnesium..... 224  
 ESPEROCT ..... 65  
 ESSENTIA ..... 174, 331

estazolam.....	138	EYSUVIS .....	187	ferrous gluconate .....	68
estradiol .....	242, 267	EZALLOR SPRINKLE.....	92	ferrous sulfate .....	68
estradiol valerate .....	242, 267	ezetimibe .....	86	fesoterodine fumarate er .....	328
estradiol-norethindrone acet 242, 252		ezetimibe-simvastatin.....	86, 92	FETZIMA.....	158
eszopiclone .....	129	<b>F</b>		FETZIMA TITRATION .....	158
ethambutol hcl .....	21	fabb .....	338	FEVERALL ADULTS.102, 121	
ethosuximide .....	160	FABHALTA.....	268	FEVERALL CHILDRENS .102, 121	
ethynodiol diac-eth estradiol235, 242, 252		FABRAZYME .....	182	FEVERALL JUNIOR	
etodolac .....	149	FALMINA.....	235, 242, 252	STRENGTH .....	102, 121
etodolac er .....	149	famciclovir.....	28	fe-vite iron .....	68
etonogestrel-ethinyl estradiol .....	235, 242, 252	famotidine.....	11, 222	FEXMID.....	53
etoposide.....	34	famotidine maximum strength .....	11, 222	fexofenadine hcl .....	14, 303
etravirine.....	25	famotidine orig st.....	11, 222	FIASP .....	257
EUCRISA.....	310	FANAPT .....	134	FIASP FLEXTOUCH .....	257
EULEXIN.....	34	FANAPT TITRATION PACK .....	134	FIASP PENFILL .....	257
EUTHYROX.....	262	FANTASY LUBRICATED .284		FIASP PUMPCART.....	257
EVAC-U-GEN .....	213	FANTASY LUBRICATED/SPERMICID		FIBRICOR.....	91
EVEKEO.....	100	E.....	284	FIBRYGA.....	66
EVEKEO ODT.....	100	FARESTON .....	34, 240	finasteride .....	263
EVERLYWELL COVID-19 HOME TEST.....	168	FARXIGA .....	260	finngolimod hcl .....	275
everolimus .....	34, 279	FASENRA PEN .....	296	FINTEPLA .....	111
EVERSENSE		fastep covid-19 antigen test..	168	FINZALA.....	235, 242, 252
SENSOR/HOLDER.....	164	FAZACLO.....	134	FIORICET/CODEINE 103, 136, 144, 154	
EVERSENSE SMART		FC2 FEMALE CONDOM ...	284	FIRDAPSE .....	56, 282
TRANSMITTER.....	164	FE C PLUS.....	68, 338, 342	first aid antibiotic.....	309
EVISTA.....	240, 267	febuxostat .....	265	FIRST CARE PAIN RELIEF .....	310
EVOTAZ.....	26, 282	FEIBA .....	66	FIRVANQ .....	23
EVRYSDI.....	282	felbamate .....	111	fish oil.....	282
EXELDERM .....	313	FELBATOL.....	111	fish oil concentrate .....	282
EXELON.....	56	FELDENE .....	149	fish oil omega-3 .....	282
exemestane .....	34, 232	felodipine er.....	89, 90	FLAGYL .....	18, 20, 208
EXFORGE .....	77, 89	FEMARA .....	34, 232	flavoxate hcl .....	328
EXFORGE HCT .....	77, 89, 180	FEMCAP .....	284	flecainide acetate .....	86
EXKIVITY.....	34	FEMYNOR .....	235, 242, 252	FLECTOR .....	149
EX-LAX MAXIMUM		fenofibrate .....	91	FLEET ENEMA.....	213
STRENGTH.....	213	fenofibrate micronized .....	91	FLEET OIL .....	213
EXSERVAN.....	140	fenofibric acid.....	91	FLEET PEDIATRIC .....	213
EXTAVIA .....	275	FENOGLIDE.....	91	FLEQSUVY .....	54
EXTINA .....	313	fenopropfen calcium.....	149	FLEXBUMIN.....	61
eye allergy itch relief.....	11, 183	fenofibril .....	144	FLEXICHAMBER ADULT	
eye allergy itch/redness rel....	11, 183	fenofibril citrate.....	144	MASK/SMALL.....	164
eye allergy relief.....	183, 193	FENTORA.....	144	FLEXICHAMBER CHILD	
eye drops .....	190	FEOSOL.....	68	MASK/LARGE .....	164
eye itch relief.....	11, 183	FERATE.....	68	FLEXICHAMBER CHILD	
eye lubricant .....	190	FERGON.....	68	MASK/SMALL.....	164
		FER-IN-SOL .....	68	FLOMAX .....	56
		FEROSUL .....	68	FLOVENT DISKUS ....	228, 299

FLOWFLEX COVID-19 AG	FLUZONE HIGH-DOSE	ft sleep-aid maximum strength 2,
HOME TEST..... 168	QUADRIVALENT .....43	7, 49, 108, 129, 288, 293
floxuridine ..... 34	FLUZONE QUADRIVALENT	FUDR ..... 34
FLUAD QUADRIVALENT ..43	.....43	full spectrum b/vitamin c.....331,
FLUARIX QUADRIVALENT	FML.....187	338, 342
.....43	FML FORTE ..... 187	FULPHILA.....64
FLUBLOK QUADRIVALENT	FOCALIN.....154	furosemide .....92, 170
.....43	FOCALIN XR.....154	FUZEON .....24
FLUCELVAX	folate.....338	FYCOMPA.....111
QUADRIVALENT .....43	folbee.....338	FYLNETRA .....64
fluconazole .....22	FOLBIC.....338	<b>G</b>
flucytosine .....30	folic acid.....338	GABACAINE.....103, 111, 310
FLUDARA.....34	folika-nc.....331, 338, 342	GABAPAL ..103, 111, 164, 310,
fludarabine phosphate .....34	FOLOTYN .....34	326
fludrocortisone acetate .....228	FOLTABS 800 .....338	gabapentin.....103, 111
FLULAVAL	fondaparinux sodium.....62	GABITRIL .....111
QUADRIVALENT .....43	FORA P20 BP MONITOR	GALAFOLD.....282
FLUMIST QUADRIVALENT	SYSTEM .....164	galantamine hydrobromide .....56
.....43	FORFIVO XL .....114	galantamine hydrobromide er.56
flunisolide.....187, 228, 298	formoterol fumarate.....58, 305	GARDASIL 9.....43
fluocinolone acetonide .....317	FORTEO .....249, 266	gas relief .....204
fluocinolone acetonide body 317	FORTESTA.....231	gas relief & prevention .....204
fluocinolone acetonide scalp 317	FOSAMAX .....267	gas relief drops infants.....204
fluocinonide.....317	FOSAMAX PLUS D....267, 346	gas relief extra strength .....204
fluocinonide emulsified base 317	fosamprenavir calcium .....26	gas relief infants .....204
fluorometholone .....187	fosinopril sodium.....78, 79	GASTRACID .....218
fluorouracil.....34, 326	fosinopril sodium-hctz....79, 180	GASTROCROM .....190, 297
fluoxetine hcl.....159	fosphenytoin sodium .....142	GAS-X EXTRA STRENGTH
fluoxetine hcl (pmdd).....159	FOSRENOL .....170, 264	.....204
fluphenazine decanoate .....153	FOTIVDA .....34	GAS-X PREVENTION.....204
fluphenazine hcl .....153	FRAGMIN.....67	gatifloxacin.....185
flurandrenolide .....318	FREESTYLE LIBRE 14 DAY	gavilax .....213
flurazepam hcl .....138	READER.....164	GAVILYTE-C.....213
flurbiprofen.....149	FREESTYLE LIBRE 14 DAY	GAVILYTE-G.....213
flurbiprofen sodium.....192	SENSOR.....164	GAVILYTE-N WITH FLAVOR
flutamide.....34	FREESTYLE LIBRE 2	PACK .....213
fluticasone furoate-vilanterol 57,	READER.....164	GAVISCON .....196, 213
228	FREESTYLE LIBRE 2	GAVRETO .....35
fluticasone propionate .187, 228,	SENSOR.....164	GAZYVA .....35
298, 318	FREESTYLE LIBRE 3	gefitinib.....35
fluticasone propionate diskus	SENSOR.....164	GELNIQUE.....328
.....228, 299	FREESTYLE LIBRE READER	gemcitabine hcl.....35
fluticasone propionate hfa ...228,	.....164	gemfibrozil .....91
299	FROVA .....158	GEMTESA .....329
fluticasone-salmeterol .....57, 58,	frovatriptan succinate .....158	GEMZAR .....35
228	FRUZAQLA.....34	GENABIO COVID-19 RAPID
fluvastatin sodium .....92	ft nighttime sleep aid.....2, 7, 49,	TEST.....168
fluvastatin sodium er .....92	108, 129, 288, 293	generlac.....169
fluvoxamine maleate .....159	ft sleep aid (doxylamine).....2, 7,	GENGRAF .....270, 275, 279
fluvoxamine maleate er .....159	129, 293	GENICIN VITA-S331, 338, 342

GENOTROPIN ..... 250, 260  
 GENOTROPIN MINIQUICK  
 ..... 250, 260  
 gentamicin sulfate ..... 185, 309  
 GENTEAL TEARS  
 MODERATE PF ..... 190  
 GENTEAL TEARS PF ..... 190  
 GENTEAL TEARS SEVERE  
 DAY/NIGHT ..... 190  
 gentle laxative ..... 213  
 GEODON ..... 115, 134  
 geri-dryl. 2, 7, 49, 108, 129, 288,  
 293  
 geri-kot ..... 213  
 geri-lanta ..... 196, 204  
 geri-lanta maximum strength  
 ..... 196, 204  
 geri-mox ..... 196, 204  
 GILENYA ..... 275  
 GILOTRIF ..... 35  
 glatiramer acetate ..... 275  
 GLATOPA ..... 275  
 GLEEVEC ..... 35  
 glimepiride ..... 261  
 glipizide ..... 261  
 glipizide er ..... 261  
 glipizide xl ..... 261  
 glipizide-metformin hcl 233, 261  
 GLOPERBA ..... 265  
 GLUCAGEN HYPOKIT .... 246,  
 264  
 glucagon emergency ..... 246, 264  
 glucosamine chondr 1500  
 complx ..... 175, 282, 342  
 GLUCOTROL XL ..... 261  
 GLUMETZA ..... 233  
 glyburide ..... 261  
 glyburide micronized ..... 261  
 glyburide-metformin .... 233, 261  
 GLYCOLAX ..... 213  
 GLYCOPHOS ..... 175  
 glycopyrrolate ..... 46  
 GLYDO ..... 310  
 GLYNASE ..... 262  
 GLYXAMBI ..... 239, 260  
 gnp 24 hour nasal allergy .... 187,  
 298  
 gnp 8 hour arthritis relief ..... 103,  
 121  
 gnp 8 hour pain reliever 103, 121  
 gnp acetaminophen ..... 103, 121  
 gnp acetaminophen ex st ..... 103,  
 121  
 gnp alcohol swabs ..... 164  
 gnp all day allergy childrens . 14,  
 303  
 gnp all day allergy relief. 14, 303  
 gnp allergy antihistamine .... 2, 7,  
 49, 108, 130, 288, 293  
 gnp allergy childrens ..... 2, 7, 49,  
 108, 130, 288, 293  
 gnp allergy relief ..... 2, 7, 12, 49,  
 108, 130, 288, 293  
 gnp allergy relief 24 hr ..... 14  
 gnp allergy relief max st 2, 7, 49,  
 108, 130, 288, 293  
 gnp antacid ..... 196, 208  
 gnp antacid & anti-gas.. 196, 204  
 gnp antacid regular strength 196,  
 204  
 gnp antacid ultra strength .... 196,  
 208  
 gnp anti-diarrheal ..... 200  
 gnp arthritis pain ..... 323, 326  
 gnp artificial tears ..... 189, 190  
 gnp aspirin low dose 71, 74, 121,  
 156  
 gnp athletes foot ..... 313  
 gnp bacitracin zinc ..... 309  
 GNP BISA-LAX ..... 214  
 gnp budesonide nasal spray. 187,  
 298  
 gnp calcium 500 +d3 .... 175, 346  
 gnp calcium 600 +d3 .... 175, 346  
 gnp century adults 50+ senior  
 ..... 175, 331  
 gnp century ultimate mens .. 175,  
 331  
 gnp childrens allergy .... 2, 7, 49,  
 108, 130, 288, 293  
 gnp childrens ibuprofen 121, 149  
 gnp children's pain & fever . 103,  
 121  
 GNP CLEARLAX ..... 214  
 gnp clotrimazole 3 ..... 313  
 gnp d 1000 ..... 346  
 gnp dairy relief ..... 218  
 gnp docosanol ..... 311  
 gnp electrolyte solution ..... 175  
 gnp enema ..... 214  
 gnp essential one daily ..... 331  
 gnp fast acting dairy relief .... 218  
 gnp fiber ..... 214  
 gnp fish oil ..... 282  
 gnp folic acid ..... 338  
 gnp gas relief ..... 204  
 gnp gas relief extra strength . 204  
 gnp gentle laxative ..... 214  
 gnp hydrocortisone ..... 318  
 gnp hydrocortisone max st. .... 318  
 gnp hydrocortisone plus ..... 318  
 gnp hydrocortisone/aloe 315, 318  
 gnp ibuprofen childrens 121, 149  
 gnp ibuprofen infants .... 121, 149  
 gnp ibuprofen junior strength  
 ..... 121, 149  
 gnp infant gas relief ..... 204  
 gnp infants pain/fever ... 103, 121  
 gnp iron ..... 68  
 gnp lice treatment ..... 324  
 gnp lidocaine pain relief ..... 310  
 gnp loratadine ..... 14, 303  
 gnp loratadine childrens .. 14, 15,  
 303  
 gnp lubricating plus eye drops  
 ..... 190  
 gnp magnesium citrate ..... 214  
 gnp mega multi for men 175, 331  
 gnp mega multi for women. 175,  
 331  
 gnp miconazole 3 ..... 313  
 gnp miconazole 7 ..... 313  
 gnp milk of magnesia ..... 214  
 gnp naproxen sodium .. 121, 149,  
 265  
 gnp nasal moisturizing.. 190, 297  
 gnp natural fiber ..... 214  
 gnp nicotine ..... 52, 60  
 gnp nicotine mini ..... 52, 60  
 gnp nicotine polacrilex .... 52, 60  
 gnp nighttime sleep aid.. 3, 7, 49,  
 108, 130, 288, 293  
 gnp nighttime sleep-aid max st 3,  
 7, 49, 108, 130, 288, 293  
 gnp olopatadine hcl ..... 11, 183  
 gnp omeprazole ..... 224  
 gnp one daily mens health 50+  
 ..... 175, 331  
 gnp one daily mens/lycopene  
 ..... 175, 332

gnp one daily plus iron... 68, 332  
 gnp pain & fever childrens.. 103, 121  
 gnp pain & fever infants..... 103, 121  
 gnp pink bismuth.. 196, 200, 208  
 gnp senna lax..... 214  
 gnp senna plus ..... 214  
 gnp sleep aid.. 3, 7, 49, 108, 130, 288, 293  
 gnp sleep aid nighttime .3, 7, 49, 108, 130, 288, 293  
 gnp sleep time 3, 7, 49, 108, 130, 288, 293  
 gnp stomach relief 196, 200, 208  
 gnp stomach relief ultra..... 196, 201, 208  
 gnp stool softener ..... 214  
 gnp terbinafine hydrochloride ..... 308  
 gnp therapeutic-m..... 175, 332  
 gnp tolnaftate..... 328  
 gnp triple antibiotic ..... 309  
 gnp vitamin d..... 346  
 gnp vitamin d maximum strength..... 346  
 gnp vitamin d super strength 346  
 gnp vitamin d3 extra strength ..... 346  
 gnp vitamin e..... 349  
 gnp womens gentle laxative .214  
 GOCOVRI..... 17, 99  
 goodsense advanced antacid 197, 204  
 goodsense all day allergy 15, 303  
 goodsense aller-ease..... 15, 303  
 goodsense allergy relief.. 15, 303  
 goodsense antacid..... 197, 208  
 goodsense antacid & gas relief ..... 197, 204  
 goodsense arthritis pain..... 103, 121, 323, 326  
 goodsense aspirin .... 71, 74, 121, 156  
 goodsense aspirin adult low st ..... 71, 74, 121, 156  
 goodsense aspirin adults.. 71, 74, 121, 156  
 goodsense athletes foot..... 313  
 goodsense bisacodyl ec ..... 214

goodsense bisacodyl laxative 214  
 GOODSENSE CLEARLAX 214  
 GOODSENSE  
   ESOMEPRAZOLE ..... 224  
 goodsense first aid antibiotic 309  
 goodsense ibuprofen..... 122, 150  
 goodsense ibuprofen childrens ..... 122, 150  
 goodsense ibuprofen infants 122, 150  
 goodsense lansoprazole ..... 224  
 goodsense lice killing ..... 324  
 goodsense lubricating eye drop ..... 190  
 goodsense milk of magnesia. 214  
 goodsense naproxen sodium 122, 150, 265  
 goodsense nasal allergy spray ..... 187, 298  
 goodsense nicotine ..... 52, 60  
 goodsense pain & fever child ..... 103, 122  
 goodsense pain & fever infants ..... 103, 122  
 goodsense pain relief... 103, 122  
 goodsense pain relief extra st ..... 103, 122  
 goodsense senna laxative..... 214  
 goodsense sleeptime ..... 3, 8, 49, 108, 130, 288, 293  
 goodsense stimulant laxative 214  
 goodsense stomach relief..... 197, 201, 209  
 GOTOKNOW COVID-19  
   ANTIGEN RAPI ..... 168  
 GRALISE ..... 103, 111  
 granisetron hcl ..... 194  
 GRANIX ..... 64  
 griseofulvin microsize ..... 19  
 griseofulvin ultramicrosize..... 19  
 guanfacine hcl..... 85, 140  
 guanfacine hcl er ..... 140  
 GVOKE HYPOPEN 1-PACK ..... 246, 264  
 GVOKE HYPOPEN 2-PACK ..... 246, 264  
 GVOKE KIT ..... 246, 264  
 GVOKE PFS ..... 246, 264  
 GYNE-LOTRIMIN 3 ..... 313

**H**  
 HADLIMA ..... 220, 270, 275  
 HADLIMA PUSHTOUCH .220, 270, 275  
 HAEGARDA..... 268, 281  
 HAILEY 1.5/30 .... 235, 242, 252  
 HAILEY FE 1.5/30 .... 235, 242, 252  
 HAILEY FE 1/20 .235, 242, 252  
 halcinonide ..... 318  
 HALCION ..... 138  
 HALDOL..... 139  
 HALDOL DECANOATE ... 139  
 halobetasol propionate..... 318  
 HALOETTE ..... 235, 242, 252  
 HALOG ..... 318  
 haloperidol..... 139  
 haloperidol decanoate ..... 139  
 haloperidol lactate ..... 139  
 HARVONI..... 23  
 HAVRIX..... 43  
 health sense bp monitor ..... 164  
 HEALTHY MAMA MOVE IT ALONG ..... 214  
 HEALTHY MAMA SHAKE THAT ACHE..... 103, 122  
 HEALTHY MAMA TAME THE FLAME..... 197, 209  
 heartburn relief ..... 11, 222  
 HEATHER ..... 235, 252  
 h-e-b childrens allergy... 3, 8, 49, 108, 130, 288, 293  
 H-E-B INCONTROL BP MONITOR ..... 165  
 h-e-b oral electrolyte..... 175  
 HECORIA ..... 279  
 HELIXATE FS ..... 66  
 HEMADY..... 228  
 HEMANGEOL.... 54, 80, 82, 87, 122  
 HEMLIBRA ..... 66  
 HEMOFIL M..... 66  
 heparin sodium (porcine)..... 67  
 HEPLISAV-B..... 43  
 HETLIOZ ..... 130  
 HETLIOZ LQ..... 130  
 HIDEX 6-DAY..... 228  
 high pot multivitamin/beta-car ..... 175, 332  
 high potency multivit/fa 175, 332

high potency multivitamin ... 332  
 hm 24 hour nasal allergy ..... 187, 298  
 hm adult aspirin 71, 74, 122, 156  
 hm advanced antacid max st 197, 204  
 hm all day allergy ..... 15, 303  
 hm all day allergy childrens .. 15, 303  
 hm allergy relief .. 8, 12, 15, 188, 229, 294, 298, 303  
 hm allergy relief (cetirizine).. 15, 303  
 hm allergy relief childrens... 3, 8, 49, 108, 130, 288, 294  
 hm antacid ..... 197, 204, 209  
 hm antacid anti-gas ex st ..... 197, 204  
 hm antacid extra strength .... 197, 209  
 hm antacid regular strength . 197, 209  
 hm anti-diarrheal ..... 201  
 hm aspirin..... 72, 74, 122, 156  
 hm aspirin ec .... 71, 74, 122, 156  
 hm aspirin ec low dose .... 71, 74, 122, 156  
 hm bacitracin zinc ..... 309  
 hm blood pressure monitor... 165  
 hm calcium antacid ex st ..... 197, 209  
 hm cetirizine hcl ..... 15, 303  
 hm cetirizine hcl childrens .... 15, 303  
 hm complete women .... 175, 332  
 hm docosanol..... 311  
 hm enema ..... 214  
 hm enema mineral oil..... 214  
 hm esomeprazole magnesium dr ..... 224  
 hm famotidine ..... 11, 222  
 hm fexofenadine hcl ..... 15, 303  
 hm fish oil..... 282  
 hm folic acid..... 338  
 hm gas relief..... 204  
 hm gas relief infants drops ... 204  
 hm gentle laxative ..... 214  
 hm hydrocortisone plus 315, 318  
 hm hydrocortisone-aloe max st ..... 315, 318  
 hm ibuprofen ..... 122, 150  
 hm ibuprofen childrens. 122, 150  
 hm ibuprofen ib ..... 122, 150  
 hm ibuprofen infants .... 122, 150  
 hm lansoprazole..... 224  
 hm laxative ..... 214  
 hm lice killing max st ..... 324  
 hm lice treatment..... 324  
 hm lidocaine patch..... 310  
 hm loratadine..... 15, 303  
 hm lubricating plus..... 190  
 hm lubricating tears ..... 190  
 hm magnesium citrate ..... 214  
 hm milk of magnesia ..... 214  
 hm naproxen sodium ... 122, 150, 265  
 hm nicotine ..... 52, 60  
 hm nicotine polacrilex ..... 52, 60  
 hm nighttime sleep aid .. 3, 8, 49, 108, 130, 288, 294  
 hm omeprazole ..... 224  
 hm pain & fever childrens ... 103, 122  
 hm pain & fever infants 103, 122  
 hm pain relief..... 103, 122  
 hm pain relief extra strength 103, 122  
 hm pain relieve child dye-free ..... 103, 122  
 hm pain reliever..... 103, 122  
 hm pain reliever childrens ... 103, 122  
 hm pain reliever infants 104, 123  
 hm pediatric electrolyte ..... 175  
 hm saline nasal spray.... 190, 297  
 hm sleep aid..... 3, 8, 130, 294  
 hm sterile alcohol prep ..... 165  
 hm stomach relief. 197, 201, 209  
 hm stomach relief ultra 197, 201, 209  
 hm triple antibiotic ..... 309  
 hm z-sleep..... 3, 8, 49, 108, 130, 288, 294  
 HORIZANT..... 112  
 HULIO..... 220, 270, 275  
 HULIO (2 PEN) ... 220, 270, 275  
 HULIO (2 SYRINGE). 220, 270, 275  
 HUMALOG..... 257, 258  
 HUMALOG JUNIOR  
 KWIKPEN..... 258  
 HUMALOG KWIKPEN ..... 258  
 HUMALOG MIX 50/50..... 258  
 HUMALOG MIX 50/50  
 KWIKPEN..... 258  
 HUMALOG MIX 75/25..... 258  
 HUMALOG MIX 75/25  
 KWIKPEN..... 258  
 HUMALOG TEMPO PEN... 258  
 HUMAN ALBUMIN GRIFOLS ..... 61  
 HUMATE-P ..... 66  
 HUMATIN ..... 18  
 HUMATROPE ..... 250, 260  
 HUMIRA ..... 220, 271, 275  
 HUMIRA (2 PEN)..... 220, 270, 271, 275  
 HUMIRA (2 SYRINGE)..... 220, 271, 275  
 HUMIRA PEN ..... 220, 271, 275  
 HUMIRA-CD/UC/HS  
 STARTER ..... 220, 271, 276  
 HUMIRA-PED<40KG  
 CROHNS STARTER ..... 220, 271, 276  
 HUMIRA-PED>=40KG  
 CROHNS START ... 220, 271, 276  
 HUMIRA-PED>=40KG UC  
 STARTER ..... 220, 271, 276  
 HUMIRA-PS/UV/ADOL HS  
 STARTER ..... 220, 271, 276  
 HUMIRA-PSORIASIS/UVEIT  
 STARTER ..... 220, 271, 276  
 HUMULIN 70/30 ..... 248, 259  
 HUMULIN 70/30 KWIKPEN ..... 248, 259  
 HUMULIN N ..... 248  
 HUMULIN N KWIKPEN .... 248  
 HUMULIN R..... 259  
 HUMULIN R U-500  
 (CONCENTRATED) ..... 259  
 HUMULIN R U-500  
 KWIKPEN..... 259  
 HYCAMTIN..... 35  
 hydralazine hcl..... 90  
 HYDRALYTE..... 175  
 HYDREA ..... 35  
 hydrochlorothiazide..... 94, 180



hydrocodone bitartrate er ..... 144  
hydrocodone-acetaminophen  
..... 104, 145  
hydrocodone-ibuprofen 145, 150  
hydrocortisone..... 229, 315, 318  
hydrocortisone (perianal) ..... 318  
hydrocortisone acetate..... 318  
hydrocortisone anti-itch..... 318  
hydrocortisone butyr lipo base  
..... 318  
hydrocortisone butyrate..... 318  
hydrocortisone max st ..... 318  
hydrocortisone max st/12 moist  
..... 318  
hydrocortisone valerate ..... 318  
hydrocortisone/aloe max str 315,  
318  
hydrocortisone-acetic acid... 188,  
190  
hydromorphone hcl ..... 145  
hydromorphone hcl er ..... 145  
hydroxychloroquine sulfate... 19,  
271, 276  
hydroxyprogesterone caproate  
..... 35, 252  
hydroxyurea..... 35  
hydroxyzine hcl..... 8, 11, 130  
hydroxyzine pamoate . 8, 11, 130  
HYFTOR..... 279, 321, 326  
hyoscyamine sulfate ..... 46, 47  
hyoscyamine sulfate er ..... 46  
hyoscyamine sulfate sl ..... 46  
HYPERSAL ..... 297  
HYRIMOZ ..... 221, 271, 276  
HYRIMOZ-CROHNS/UC  
STARTER ..... 221, 271, 276  
HYRIMOZ-PED<40KG  
CROHN STARTER 221, 271,  
276  
HYRIMOZ-PED>=40KG  
CROHN START ..... 221, 271,  
276  
HYRIMOZ-PLAQUE  
PSORIASIS START 221, 271,  
276  
HYSINGLA ER ..... 145  
HYVEE ADVANCED  
ANTACID..... 197, 204  
HYZAAR ..... 77, 180

**I**  
ibandronate sodium ..... 267  
IBRANCE ..... 35  
IBSRELA ..... 221  
IBU ..... 123, 150  
ibu-200..... 123, 150  
ibuprofen ..... 123, 150  
ibuprofen infants..... 123, 150  
ibuprofen junior strength..... 123,  
150  
ibuprofen-famotidine.... 150, 222  
ICAPS MV ..... 175, 332  
ICLEVIA..... 235, 242, 252  
ICLUSIG ..... 35  
icosapent ethyl..... 80  
IDACIO (2 PEN).. 221, 271, 276  
IDACIO (2 SYRINGE)..... 221,  
271, 276  
IDACIO-CROHNS/UC  
STARTER ..... 221, 271, 276  
IDACIO-PSORIASIS  
STARTER ..... 221, 271, 276  
IDELVION..... 66  
IDHIFA ..... 35  
IGALMI..... 46, 130  
IHEALTH COVID-19 RAPID  
TEST ..... 168  
ILARIS ..... 104, 282  
ILEVRO ..... 192  
ILUMYA..... 321, 326  
imatinib mesylate ..... 35  
IMBRUVICA ..... 35  
IMCIVREE..... 106, 249  
imipramine hcl..... 161  
imipramine pamoate ..... 161  
imiquimod ..... 326  
IMITREX ..... 158  
IMITREX STATDOSE REFILL  
..... 158  
IMITREX STATDOSE  
SYSTEM ..... 158  
IMPEKLO ..... 318  
IMURAN..... 271, 276, 279  
INBRIJA..... 141  
INCASSIA..... 235, 253  
IN-CHECK INSPIRATORY  
FLOW MTR..... 165  
INCRUSE ELLIPTA..... 47  
indapamide ..... 95, 181

INDERAL LA ..... 55, 81, 82, 87,  
123  
INDERAL XL ..... 55, 81, 82, 87,  
123  
INDICAID COVID-19 RAPID  
TEST..... 168  
INDOCIN ..... 150, 265  
indomethacin ..... 150, 265  
indomethacin er ..... 150, 265  
INFANTS ADVIL..... 123, 150  
infants gas relief ..... 204  
infants ibuprofen..... 123, 150  
infants pain & fever ..... 104, 123  
infants simethicone..... 204  
INGREZZA ..... 161  
INLYTA ..... 35  
INNOPRAN XL .. 55, 81, 82, 87,  
123  
INPEFA ..... 94, 260  
INQOVI..... 35  
INREBIC ..... 35  
INSPIRACHAMBER/LARGE  
..... 165  
INSPIRACHAMBER/MEDIU  
M..... 165  
INSPIRACHAMBER/MOUTH  
PIECE..... 165  
INSPIRACHAMBER/SMALL  
..... 165  
insulin asp prot & asp flexpen  
..... 258  
insulin aspart..... 258  
insulin aspart flexpen..... 258  
insulin aspart penfill ..... 258  
insulin aspart prot & aspart... 258  
insulin degludec..... 248  
insulin degludec flextouch.... 248  
insulin glargine ..... 248  
insulin glargine max solostar 248  
insulin glargine solostar..... 248  
insulin glargine-yfgn ..... 248  
insulin lispro ..... 258  
insulin lispro (1 unit dial) ..... 258  
insulin lispro junior kwikpen 258  
insulin lispro prot & lispro ... 258  
INTELENCE ..... 25  
INTELISWAB COVID-19  
RAPID TEST..... 168  
INTERMEZZO..... 130  
INTRON-A..... 27, 35, 276

INTROVALE.....	235, 242, 253	JAYPIRCA.....	35	ketoprofen er.....	123, 150
INTUNIV.....	140	JENCYCLA.....	235, 253	ketorolac tromethamine.....	150, 151, 192
INVEGA.....	134	JENTADUETO.....	233, 240	KETOSTIX.....	168
INVEGA HAFYERA.....	134	JENTADUETO XR.....	233, 240	ketotifen fumarate.....	11, 184
INVEGA SUSTENNA.....	134	JESDUVROQ.....	62, 64	KEVZARA.....	272
INVEGA TRINZA.....	134	JINTELI.....	242, 253	KEYTRUDA.....	35
INVIRASE.....	26	JIVI.....	66	KHEDEZLA.....	158
INVOKAMET.....	233, 260	jock itch.....	313	kimono.....	284
INVOKAMET XR.....	233, 260	jock itch relief.....	313	kimono micro thin.....	284
INVOKANA.....	260	JOLESSA.....	236, 242, 253	kimono micro thin plus.....	284
IOPIDINE.....	190	JORNAY PM.....	154	kimono sensation.....	284
ipratropium bromide.....	47, 286	JUBLIA.....	313	kimono sensation plus.....	284
ipratropium-albuterol.....	47, 58, 286	JULEBER.....	236, 242, 253	KINDERLYTE.....	175
irbesartan.....	76, 77	JULUCA.....	24, 25	KINDERLYTE PREMAX... ..	175
irbesartan-hydrochlorothiazide.....	77, 180	JUNEL 1.5/30.....	236, 242, 253	KINDERMED KIDS ALLERGY 3, 8, 49, 108, 130, 289, 294	
IRESSA.....	35	JUNEL 1/20.....	236, 243, 253	KINERET.....	272, 276
iron.....	68	JUNEL FE 1.5/30.....	236, 243, 253	KISQALI (200 MG DOSE)....	35
iron (ferrous sulfate).....	68	JUNEL FE 1/20....	236, 243, 253	KISQALI (400 MG DOSE)....	36
iron 100 plus.....	68, 338, 342	JYLAMVO.....	35, 271, 276, 279	KISQALI (600 MG DOSE)....	36
iron 27.....	68	JYNARQUE.....	182	KISQALI FEMARA (200 MG DOSE).....	36, 232
iron high-potency.....	68	<b>K</b>		KISQALI FEMARA (400 MG DOSE).....	36, 232
iron infant & toddler.....	68	KALBITOR.....	281	KISQALI FEMARA (600 MG DOSE).....	36, 232
iron infant/toddler.....	68	KALETRA.....	26, 27	KITABIS PAK.....	18, 185
iron supplement.....	68	KALLIGA.....	236, 243, 253	KLAYESTA.....	324
iron supplement childrens.....	68	KALYDECO.....	291	KLONOPIN.....	137, 138
ISENTRESS.....	24	KAOPECTATE... ..	197, 201, 209	KLOR-CON M10.....	175
ISIBLOOM.....	235, 242, 253	KAOPECTATE EXTRA STRENGTH.....	197, 201, 209	KLOR-CON M20.....	175
isoniazid.....	21	KAPSPARGO SPRINKLE... ..	59, 81, 82, 87	KLOR-CON/EF.....	175
isosorbide dinitrate.....	93	KAPVAY.....	46, 86	KLOXXADO.....	147
isosorbide mononitrate.....	93	KARIVA.....	236, 243, 253	cls acetaminophen ex st	104, 123
isosorbide mononitrate er.....	93	KATERZIA.....	89, 90, 95	KLS ALLER-CORT.....	188, 298
isotretinoin.....	326	KAZANO.....	233, 240	KLS ALLER-TEC CHILDRENS.....	15, 303
isradipine.....	89, 90	KCENTRA.....	66	cls diclofenac sodium... ..	323, 326
ISTALOL.....	186	kedbumin.....	61	cls esomeprazole magnesium .....	225
itraconazole.....	22	KELNOR 1/35.....	236, 243, 253	cls fast acting lactase.....	218
ivermectin.....	19	KELNOR 1/50.....	236, 243, 253	cls ibuprofen.....	123, 151
IWILFIN.....	35	KENALOG.....	229, 319	cls sleep aid.....	3, 8, 130, 294
IXINITY.....	66	KENALOG-40.....	229	KOATE.....	66
IYUZEH.....	193	KEPPRA.....	112	KOATE-DVI.....	66
<b>J</b>		KEPPRA XR.....	112	kobee.....	332, 338
JAKAFI.....	35	KERENDIA.....	92	KOGENATE FS.....	66
janssen covid-19 vaccine.....	43	KERYDIN.....	324	KOMBIGLYZE XR.....	233, 240
JANTOVEN.....	63	KESIMPTA.....	276		
JANUMET.....	233, 239	ketamine hcl.....	142		
JANUMET XR.....	233, 239	ketoconazole.....	22, 313		
JANUVIA.....	240	KETODAN.....	313, 326		
JARDIANCE.....	260	ketone test.....	168		
JASMIEL.....	235, 242, 253	ketoprofen.....	123, 150		
JAVYGTOR.....	282				

KONVOMEP .....	197, 225	lamotrigine starter kit-blue ..	112, 116	LEUKINE.....	64
KOSELUGO .....	36	lamotrigine starter kit-green	112, 116	leuprolide acetate.....	36, 247
KOVALTRY .....	66	lamotrigine starter kit-orange	.....	leuprolide acetate (3 month) ..	36, 247
kp adults 50+ daily formula	175, 332	.....	112, 116	levabuterol hcl .....	58, 305
kp aspirin .....	72, 74, 123, 157	LAMZEDE .....	182	levabuterol tartrate.....	58, 305
kp bacitracin zinc .....	309	lansoprazole.....	225	levamlodipine maleate	89, 90, 96
kp bisacodyl.....	214	lanthanum carbonate.....	170, 264	LEVEMIR .....	249
kp calcium 600+d.....	175, 346	LANTUS .....	249	LEVEMIR FLEXPEN.....	249
kp ferrous sulfate .....	68	LANTUS SOLOSTAR.....	249	LEVEMIR FLEXTOUCH....	249
kp folic acid.....	338	lapatinib ditosylate .....	36	levetiracetam.....	112
kp hydrocortisone.....	319	LARIN 1.5/30.....	236, 243, 253	levetiracetam er .....	112
kp hydrocortisone max st .....	319	LARIN 1/20.....	236, 243, 253	levetiracetam in nacl.....	112, 175
kp ketotifen fumarate .....	11, 184	LARIN FE 1.5/30.	236, 243, 253	levobunolol hcl .....	186
kp miconazole nitrate .....	313	LARIN FE 1/20 .....	236, 243, 253	levocarnitine .....	283
kp niacin.....	338	LARISSIA.....	236, 243, 253	levocarnitine sf .....	283
kp senna.....	214	LASTACAFT .....	11, 184	levocetirizine dihydrochloride	15
kp vitamin d3.....	346	latanoprost .....	193	levofloxacin .....	21, 30
K-PHOS .....	175	LATUDA.....	134	LEVONEST .....	236, 243, 253
K-PHOS NO 2.....	168	laxa basic .....	214	levonorgest-eth estrad 91-day	.....
KRAZATI .....	36	laxative .....	214	.....	236, 243, 253
KRINTAFEL.....	19	laxative pills .....	214	levonorgestrel .....	236, 253
kruger blood pressure monitor	.....	laxative regular strength .....	215	levonorgestrel-ethinyl estrad	236, 243, 253
.....	165	ledipasvir-sofosbuvir .....	23	.....	236, 253
KURVELO.....	236, 243, 253	LEENA.....	236, 243, 253	levorphanol tartrate.....	145
KUVAN .....	282, 283	leflunomide.....	272, 276, 279	LEVO-T.....	262
KYPROLIS .....	36	lenalidomide .....	36, 276	levothyroxine sodium .....	262
<b>L</b>		LENVIMA (10 MG DAILY	DOSE) .....	LEVOXYL .....	262
labetalol hcl ...	55, 56, 75, 76, 81, 82, 87	LENVIMA (12 MG DAILY	DOSE) .....	LEXAPRO.....	160
LAC-DOSE .....	218	LENVIMA (14 MG DAILY	DOSE) .....	LEXETTE.....	319
lacosamide.....	112	LENVIMA (18 MG DAILY	DOSE) .....	LEXIVA .....	27
LACTAID .....	218	LENVIMA (20 MG DAILY	DOSE) .....	LIALDA .....	206
LACTAID FAST ACT.....	218	LENVIMA (24 MG DAILY	DOSE) .....	LICART .....	151
lactase .....	218	LENVIMA (4 MG DAILY	DOSE) .....	lice killing.....	324
lactase enzyme.....	218	LENVIMA (8 MG DAILY	DOSE) .....	lice killing maximum strength	.....
lactase fast acting .....	218	LESCOL XL.....	92	.....	324
lactose fast acting relief.....	218	LESSINA.....	236, 243, 253	lice treatment .....	324
lactulose.....	169	LETAIRIS .....	96, 291, 306	lice treatment creme rinse.....	324
lactulose encephalopathy.....	169	letrozole .....	36, 232	LIDO KING.....	310
LAGEVRIO .....	28	leucovorin calcium .....	264, 338	lidocaine .....	310
LAMICTAL .....	112, 115, 116	LEUKERAN .....	36	lidocaine hcl.....	310
LAMICTAL ODT .....	112, 115			lidocaine hcl urethral/mucosal	.....
LAMICTAL STARTER .....	112, 116			.....	311
LAMICTAL XR.....	112, 116			lidocaine max st 24 hours .....	311
lamivudine.....	26			lidocaine pain relief .....	311
lamivudine-zidovudine.....	26			lidocaine pain relief max st...	311
lamotrigine .....	112, 116			lidocaine pain relieving .....	311
lamotrigine er .....	112, 116			lidocaine viscous hcl.....	192

lidocaine-prilocaine.....	311	LIVMARLI .....	221	lubiprostone .....	221
LIDOCARE ARM/NECK/LEG		LIVTENCITY .....	21	lubricant eye .....	191
.....	311	l-methylfolate-b6-b12.....	338	lubricant eye drops .....	191
LIDOCARE		LOCOID.....	319	lubricant eye drops pf.....	191
BACK/SHOULDER .....	311	LOCOID LIPOCREAM.....	319	lubricant eye nighttime .....	191
LIDOFOR FLEXIPATCH.	311	LOCORT 7-DAY .....	229	lubricant eye pm .....	191
lidoreal-30 .....	311	LODINE .....	151	lubricant pm.....	191
LIDOTIN.....	104, 112, 165, 311,	LODOSYN.....	141	lubricating eye drops .....	191
326		LOFENA .....	151	lubricating plus eye drops.....	191
lidozo.....	311	LOMAIRA .....	100	LUCEMYRA.....	46
LIKMEZ.....	18, 20, 209	long lasting antacid.....	197, 209	LUCIRA CHECK IT COVID-	
LILLOW.....	236, 243, 254	LONHALA MAGNAIR		19 TEST.....	168
lindane .....	324	REFILL KIT.....	47, 286	luliconazole.....	313
linezolid.....	29, 30	LONHALA MAGNAIR		LUMAKRAS.....	36
LINZESS.....	221	STARTER KIT.....	47, 286	LUMIGAN .....	193
liothyronine sodium.....	262	LONSURF.....	36	LUMIZYME.....	182
LIPITOR.....	92	loperamide hcl .....	201	LUNESTA .....	130
LIPOFEN .....	91	LOPID .....	91	LUPRON .....	37, 247
LIPRITIN .....	104, 112, 311	lopinavir-ritonavir .....	27	LUPRON DEPOT (1-MONTH)	
LIPRITIN II.....	104, 112, 311	LOPRESSOR .....	59, 81, 82, 87	.....	36, 247
LIQREV .....	93, 300, 328	LOPROX.....	321, 326	LUPRON DEPOT (3-MONTH)	
liquid acetaminophen ...	104, 123	LOQTORZI.....	36	.....	37, 247
liquid allergy relief 3, 8, 49, 108,		loradamed .....	15, 303	LUPRON DEPOT (4-MONTH)	
130, 289, 294		loratadine .....	15, 303	.....	37, 247
liquitears .....	190	loratadine childrens .....	15, 303	LUPRON DEPOT (6-MONTH)	
lisdexamphetamine dimesylate	100	lorazepam .....	137, 138	.....	37, 247
lisinopril .....	78, 79	LORAZEPAM INTENSOL	137,	lurasidone hcl.....	134
lisinopril-hydrochlorothiazide		138		LUTERA .....	236, 243, 254
.....	79, 180	LORBRENA .....	36	LUZU .....	313
LITETOUCH MASK LARGE		LOREEV XR.....	137, 138	LYBALVI.....	134
.....	165	lorid .....	332, 338, 342	LYDIA PINKHAM.....	283
LITETOUCH MASK MEDIUM		LORTAB .....	104, 145	LYLEQ.....	236, 254
.....	165	LORYNA .....	236, 243, 254	LYLLANA .....	243, 267
LITETOUCH MASK SMALL		LORZONE .....	53	LYMEPAK.....	19, 31
.....	165	losartan potassium .....	76, 77	LYNPARZA.....	37
LITFULO .....	326	losartan potassium-hctz ..	77, 180	LYRICA .....	112, 142
lithium .....	116	LOTENSIN .....	78, 79	LYRICA CR.....	104
lithium carbonate.....	116	LOTENSIN HCT .....	79, 181	LYSODREN.....	37
lithium carbonate er.....	116	loteprednol etabonate .....	188	LYSTEDA.....	66
LITHOBID.....	116	LOTREL.....	79, 89	LYTGOBI (12 MG DAILY	
LITHOSTAT.....	169	LOTRIMIN AF .....	313	DOSE) .....	37
LITTLE REMEDIES FOR		LOTRONEX .....	206	LYTGOBI (16 MG DAILY	
FEVER .....	104, 123	lovastatin .....	92	DOSE) .....	37
LITTLE REMEDIES FOR		LOVAZA.....	80	LYTGOBI (20 MG DAILY	
TUMMYS .....	205	LOVENOX.....	67	DOSE) .....	37
LITTLE REMEDIES GAS		LOW-OGESTREL	236, 243, 254	LYUMJEV .....	258
RELIEF .....	205	loxapine succinate .....	127	LYUMJEV KWIKPEN .....	258
LITTLE REMEDIES SALINE		LO-ZUMANDIMINE .	236, 243,	LYUMJEV TEMPO PEN ...	258
.....	191, 297	254		LYVISPAH .....	54
LIVALO.....	92	l-tryptophan .....	130	LYZA .....	237, 254

<b>M</b>		
mag-al plus .....	197, 205	
mag-al plus xs.....	197, 205	
magnesium .....	175	
magnesium chloride .....	175	
magnesium citrate .....	215	
magnesium oxide.....	197, 209	
magnesium oxide (antacid) .	197, 209	
magnesium oxide -mg supplement .....	176	
magnesium sulfate..	80, 112, 264	
MAGNESIUM-OXIDE .....	176	
malathion.....	324	
MAOX.....	197, 209	
mapap .....	104, 123	
mapap arthritis pain.....	104, 123	
MAPAP CHILDRENS.	104, 123	
maprotiline hcl.....	161	
maraviroc.....	24	
marlissa.....	237, 243, 254	
MARPLAN .....	143	
<b>MASK</b>		
VORTEX/CHILD/FROG.	165	
<b>MASK</b>		
VORTEX/TODDLER/LADY BUG .....	165	
MATULANE .....	37	
MATZIM LA .....	84, 88, 96	
MAVENCLAD (10 TABS) 277, 280		
MAVENCLAD (4 TABS) ..	277, 280	
MAVENCLAD (5 TABS) ..	277, 280	
MAVENCLAD (6 TABS) ..	277, 280	
MAVENCLAD (7 TABS) ..	277, 280	
MAVENCLAD (8 TABS) ..	277, 280	
MAVENCLAD (9 TABS) ..	277, 280	
MAVYRET .....	23, 24	
MAXALT.....	158	
MAXALT-MLT .....	159	
MAXIMUM EPA.....	283	
maxx .....	285	
MAYZENT .....	277	
MAYZENT STARTER PACK .....	277	
m-dryl ....	3, 8, 49, 108, 131, 289, 294	
meclizine hcl.....	8, 206	
meclofenamate sodium.....	151	
MEDI-FIRST ASPIRIN ..	72, 74, 123, 157	
MEDI-FIRST IBUPROFEN	123, 151	
medi-first triple antibiotic.....	309	
MEDIPROXEN....	123, 151, 265	
MEDIQUE ASPIRIN .....	72, 74, 124, 157	
MEDPURA BENZOYL PEROXIDE .....	322, 323	
MEDPURA HYDROCORTISONE .....	319	
MEDROL .....	229	
medroxyprogesterone acetate .....	237, 254	
mefenamic acid.....	151	
mefloquine hcl.....	19	
MEGA MULTI MEN... 176, 332		
megestrol acetate .....	37, 254	
meijer antacid .....	197, 205	
meijer c .....	342	
meijer ibuprofen .....	124, 151	
MEKINIST .....	37	
MEKTOVI.....	37	
melatonin .....	283	
meloxicam .....	151	
melphalan .....	37	
memantine hcl .....	140	
memantine hcl er .....	140	
MENACTRA.....	44	
MENEST .....	243, 267	
MENTAX.....	315	
MENVEO.....	44	
meperidine hcl .....	145	
meprobamate .....	131	
MEPSEVII.....	182	
mercaptapurine .....	37, 280	
mesalamine .....	206	
mesalamine er.....	206	
MESNEX.....	284	
METADATE CD .....	154	
METAMUCIL.....	215	
metaxalone.....	53	
metformin hcl .....	233	
metformin hcl er .....	233	
metformin hcl er (mod) .....	233	
metformin hcl er (osm).....	233	
methadone hcl.....	145	
<b>METHADONE HCL</b>		
INTENSOL.....	145	
METHADOSE .....	145	
METHADOSE SUGAR-FREE .....	145	
methamphetamine hcl.....	100	
methenamine hippurate .....	31	
methenamine mandelate .....	31	
methimazole .....	232	
methocarbamol .....	25, 53	
methotrexate ...	37, 272, 277, 280	
methotrexate sodium .....	37, 272, 277, 280	
methotrexate sodium (pf) .....	37, 272, 277, 280	
methsuximide .....	160	
methyl dopa .....	46, 86	
methyl dopa-hydrochlorothiazide .....	86, 181	
methylergonovine maleate....	285	
<b>METHYLIN</b> .....	154	
methylphenidate .....	154	
methylphenidate hcl.....	154	
methylphenidate hcl er .....	154	
methylphenidate hcl er (cd) ..	154	
methylphenidate hcl er (la) ..	154	
methylphenidate hcl er (osm) .....	154	
methylphenidate hcl er (xr) ..	154	
methylprednisolone .....	229	
methylprednisolone acetate ..	229	
methylprednisolone sodium succ .....	229	
metoclopramide hcl .....	223	
metolazone.....	95, 181	
metoprolol succinate er....	59, 81, 82, 87	
metoprolol tartrate 59, 81, 82, 87		
metoprolol-hydrochlorothiazide .....	81, 181	
metronidazole ...	18, 20, 209, 309	
mexiletine hcl .....	86	
mgo .....	176	
mi-acid gas relief .....	205	
MIBELAS 24 FE..	237, 243, 254	
MICARDIS.....	76, 77	

MICARDIS HCT ..... 77, 181  
miconazole 3 applicator ..... 313  
miconazole 3 combo-supp.... 313  
miconazole 7 ..... 313  
miconazole antifungal ..... 313  
miconazole nitrate ..... 313  
miconazole-zinc oxide-petrolat  
..... 312, 314, 321  
MICOTRIN AC..... 314  
MICROCHAMBER..... 165  
MICROGESTIN 1.5/30 ..... 237,  
244, 254  
MICROGESTIN 1/20 .237, 244,  
254  
MICROGESTIN FE 1.5/30.237,  
244, 254  
MICROGESTIN FE 1/20.... 237,  
244, 254  
microlife bp monitor..... 165  
microlife deluxe bp monitor. 165  
MICROLIFE DIGITAL PEAK  
FLOW..... 165  
MICROSPACER..... 165  
midazolam hcl ..... 138  
midazolam hcl (pf) ..... 138  
midazolam-ketamine-  
ondansetron ..... 138, 142, 194  
midodrine hcl..... 46  
MIEBO ..... 191  
miglitol ..... 231  
miglustat ..... 283  
MILI ..... 237, 244, 254  
milk of magnesia ..... 215  
MILLIPRED..... 229  
MILLIPRED DP ..... 229  
MILLIPRED DP 12-DAY ... 229  
MINI WRIGHT PEAK FLOW  
METER ..... 165  
MINIPRESS ..... 55, 75, 76  
minocycline hcl ..... 19, 31  
minoxidil ..... 91  
MINTOX..... 197, 205  
mintox maximum strength .. 197,  
205  
MIRAPEX..... 143  
MIRAPEX ER..... 143  
mirtazapine ..... 114  
misoprostol ..... 223  
MITIGARE ..... 265  
mko melt dose pack..... 138, 142,  
194  
MM ACETAMINOPHEN EX  
STR..... 104, 124  
mm cetirizine hcl ..... 15, 303  
mm fexofenadine hcl ..... 15, 303  
M-M-R II..... 44  
m-natal plus ..... 69, 332, 338  
modafinil ..... 161  
MODERIBA..... 28  
MODERIBA (1200 MG PACK)  
..... 28  
moderna covid-19 bival 6m-5y  
..... 44  
moderna covid-19 bival booster  
..... 44  
moderna covid-19 bivalent.... 44  
MODERNA COVID-19 VAC  
6M-11Y ..... 44  
moexipril hcl..... 78, 79  
molindone hcl..... 127  
mometasone furoate .... 188, 229,  
298, 319  
MONDOXYNE NL ..... 20, 31  
MONISTAT 3  
COMBINATION PACK.. 314  
MONISTAT 3 COMBO PACK  
APP..... 314  
MONISTAT CARE INSTANT  
ITCH RLF ..... 319  
MONO-LINYAH .237, 244, 254  
MONONINE ..... 66  
montelukast sodium..... 297  
morphine sulfate ..... 145  
morphine sulfate (concentrate)  
..... 145  
morphine sulfate er..... 145  
morphine sulfate er beads.... 145  
MOTEGRITY ..... 221  
MOTPOLY XR..... 112  
MOTRIN IB ..... 124, 151  
MOUNJARO..... 247  
movana ..... 283  
MOVANTIK ..... 221  
MOXEZA ..... 185  
moxifloxacin hcl..... 21, 30, 185  
moxifloxacin hcl (2x day) .... 185  
m-pap..... 104, 124  
MS CONTIN ..... 146  
multi complete/iron ..... 176, 332  
multi vitamin daily ..... 332  
multiple vitamins ..... 332  
multi-vit/iron/fluoride.... 69, 267,  
332  
multivitamin ..... 332  
multivitamin adults 50+ 176, 332  
multi-vitamin daily ..... 332  
multivitamin men 50+ .. 176, 332  
multivitamin women.... 176, 332  
multivitamin women 50+ .... 176,  
332  
multivitamin/fluoride... 268, 332,  
338  
multi-vitamin/fluoride ..... 268  
multi-vitamin/fluoride ..... 332  
multi-vitamin/fluoride/iron.... 69,  
268, 332  
multi-vitamins..... 332  
mupirocin..... 309  
mupirocin calcium ..... 309  
MURO 128 ..... 191  
MVW COMPLETE  
FORMULATION.... 176, 332,  
342  
MVW COMPLETE  
FORMULATION D3000 176,  
333, 342  
MVW COMPLETE  
FORMULATION D5000 176,  
333  
MVW COMPLETE  
FORMULATION MINIS 176,  
333  
MY WAY ..... 237, 254  
MYALEPT ..... 248  
mycophenolate mofetil ..... 280  
mycophenolate mofetil hcl ... 280  
mycophenolate sodium..... 280  
MYCOZYL AC..... 314  
MYDAYIS ..... 100  
MYFEMBREE ..... 232, 244, 254  
MYFORTIC ..... 280  
MYLANTA MAXIMUM  
STRENGTH ..... 198, 205  
MYLERAN ..... 37  
MYLICON INFANTS GAS  
RELIEF..... 205  
MYNEPHRON..... 333, 338, 342  
MYORISAN..... 326  
MYRBETRIQ..... 329

MYSOLINE .....	135	NAYZILAM.....	137	NIACIN FLUSH-FREE EX ST	
<b>N</b>		nebivolol hcl.....	55, 81	.....	96
na sulfate-k sulfate-mg sulf..	215	NEBUSAL.....	298	niacinamide.....	339
nabumetone .....	151	nefazodone hcl.....	160	niacinamide er .....	339
nadolol.....	55, 81, 82	nelarabine .....	38	NIAVASC .....	339
naftifine hcl .....	308	NEMBUTAL.....	136	NIAVASC 750 .....	339
NAFTIN .....	308	neomycin sulfate.....	18, 185, 309	nicardipine hcl .....	89, 90, 96
NAGLAZYME.....	182	neomycin-bacitracin zn-		NICORETTE.....	52, 60
NALFON.....	151	polymyx.....	185	NICORETTE STARTER KIT	
naloxone hcl .....	147, 264	neomycin-polymyxin-dexameth		.....	52, 60
naltrexone hcl .....	147, 263, 264	.....	185, 188	nicotine .....	53, 60
NAMENDA .....	140	neomycin-polymyxin-		nicotine mini.....	52, 60
NAMENDA TITRATION PAK		gramicidin.....	185	nicotine polacrilex .....	52, 60
.....	140	neomycin-polymyxin-hc .....	185,	nicotine polacrilex mini....	52, 60
NAMENDA XR.....	140	188		nicotine step 1 .....	52, 60
NAMENDA XR TITRATION		NEORAL.....	272, 277, 280	nicotine step 2.....	52, 60
PACK.....	140	NEPHPLEX RX ..	176, 333, 338,	nicotine step 3.....	53, 60
NAMZARIC.....	56, 140	342		NICOTROL.....	53, 60
NANOVM 1-3 YEARS	176, 333	nephro vitamins ....	333, 338, 342	NICOTROL NS.....	53, 61
NANOVM 4-8 YEARS	176, 333	NEPHRON FA .....	69, 215, 338,	nifedipine.....	89, 90, 96
NANOVM 9-18 YEARS ....	176,	342		nifedipine er.....	89, 90, 96
333		NEPHRONEX.....	333, 339, 342	nifedipine er osmotic release .	89,
NANOVM T/F .....	176, 333	NEPHRO-VITE....	333, 339, 342	90, 96	
NAPHCAN-A .....	184, 193	NEPHRO-VITE RX....	333, 339,	night time sleep aid	3, 8, 49, 108,
NAPRELAN.....	124, 151, 265	342		131, 289, 294	
NAPROSYN .....	124, 151, 265	NERLYNX.....	38	nighttime sleep aid.	3, 8, 50, 108,
naproxen.....	124, 151, 265	NESINA .....	240	131, 289, 294	
naproxen sodium ..	124, 151, 266	NESTABS .....	69, 333, 339	NIKKI.....	237, 244, 254
naproxen sodium er .....	124, 151,	NEUAC .....	309, 315, 323	NILANDRON .....	38
266		NEULASTA .....	64	nilutamide.....	38
naproxen-esomeprazole mg.	151,	NEULASTA ONPRO .....	64	nimodipine.....	90, 96
225		NEUPOGEN .....	64	NINLARO .....	38
NARAMIN....	3, 8, 49, 108, 131,	NEUPRO .....	143	NIPENT .....	38
289, 294		NEURONTIN.....	104, 113	nisoldipine er .....	90
naratriptan hcl.....	159	NEVANAC .....	192	nitazoxanide.....	20
NARCAN.....	147	nevirapine .....	25	nitisinone .....	283
NARDIL.....	143	nevirapine er.....	25	NITRO-BID.....	93
NASACORT ALLERGY 24HR		NEXAVAR .....	38	nitrofurantoin macrocrystal ....	31
CHILDREN.....	188, 299	NEXICLON XR.....	46, 86	nitrofurantoin monohyd macro	
nasal allergy 24 hour ....	188, 299	NEXIUM.....	225	.....	32
nasal moisturizing spray.....	191,	NEXIUM 24HR .....	225	nitroglycerin .....	93
298		NEXIUM 24HR CLEAR		NITRO-TIME.....	93
NASALCROM....	184, 191, 297	MINIS.....	225	NITYR.....	283
NASONEX 24HR	188, 229, 299	NEXLETOL .....	80	NIVA-FOL .....	339
nateglinide .....	249	NEXLIZET.....	80, 86	NIVA-PLUS .....	69, 333, 339
NATESTO.....	231	NGENLA.....	250	NIVESTYM .....	64
natural fiber therapy .....	215	niacin .....	339	NIX CREME RINSE.....	324
natural senna laxative .....	215	niacin er .....	339	NOLIX.....	319
natural vitamin d-3 .....	346	niacin er (antihyperlipidemic)	80	non-aspirin.....	104, 124
NATURE-THROID .....	262	niacin flush free .....	96	non-aspirin childrens ....	104, 124

non-aspirin extra strength.... 104, 124	NOVOLIN R.....259	NYTOL QUICKCAPS..3, 8, 50, 108, 131, 289, 294
non-aspirin pain relief .. 104, 124	NOVOLIN R FLEXPEN.....259	NYVEPRIA .....64
NORA-BE .....237, 254	NOVOLIN R FLEXPEN RELION .....259	<b>O</b>
NORDITROPIN FLEXPRO .....250, 261	NOVOLIN R RELION .....259	obizur .....66
norethin ace-eth estrad-fe....237, 244, 254, 255	NOVOLOG .....259	OCEAN NASAL SPRAY ...191, 298
norethindrone .....237, 255	NOVOLOG 70/30 FLEXPEN RELION .....258	OCELLA .....238, 244, 255
norethindrone acetate .....255	NOVOLOG FLEXPEN.....258	OCTAPLAS BLOOD GROUP A .....61
norethindrone acet-ethinyl est .....237, 244, 255	NOVOLOG FLEXPEN RELION .....258	OCTAPLAS BLOOD GROUP AB.....61
norethindrone-eth estradiol .244, 255	NOVOLOG MIX 70/30 .....259	OCTAPLAS BLOOD GROUP B .....61
norethindron-ethinyl estrad-fe .....237, 244, 255	NOVOLOG MIX 70/30 FLEXPEN .....259	OCTAPLAS BLOOD GROUP O .....62
norethin-eth estradiol-fe .....237, 244, 255	NOVOLOG MIX 70/30 RELION .....259	octreotide acetate .....221, 260
NORGESIC.....54, 59, 154, 157	NOVOLOG PENFILL .....259	OCUFLOX .....185
norgesic forte....54, 59, 154, 157	NOVOLOG RELION.....259	ODOMZO.....38
norgestimate-eth estradiol ...237, 244, 255	NOVOSEVEN RT .....66	ofloxacin .....30, 185
norgestim-eth estrad triphasic .....237, 244, 255	NOXAFIL .....22	OGSIVEO.....38
NORLIQVA .....90, 96	NP THYROID .....262	OJJAARA.....38
NORLYDA .....237, 255	NUBEQA .....38	olanzapine.....116, 134
NORPRAMIN.....161	NUCALA .....286	olanzapine-fluoxetine hcl ....134, 160
NORTREL 0.5/35 (28)237, 244, 255	NUCYNTA .....146	olmesartan medoxomil ....76, 77
NORTREL 1/35 (28)...238, 244, 255	NUCYNTA ER .....146	olmesartan medoxomil-hctz ..77, 181
NORTREL 7/7/7 ..238, 244, 255	NULOJIX .....280	olmesartan-amlodipine-hctz ..77, 90, 181
nortriptyline hcl .....161	NU-MAG.....176	olopatadine hcl.....11, 12, 184
NORVASC.....90, 96	NUPLAZID.....134	OLPRUVA (2 GM DOSE)...169
NORVIR.....27	NURTEC .....139	OLPRUVA (3 GM DOSE)...169
NOURIANZ.....140	NUTROPIN AQ NUSPIN 10 .....250, 261	OLPRUVA (4 GM DOSE)...169
novavax covid-19 vaccine .....44	NUTROPIN AQ NUSPIN 20 .....250, 261	OLPRUVA (5 GM DOSE)...169
NOVOEIGHT .....66	NUTROPIN AQ NUSPIN 5250, 261	OLPRUVA (6 GM DOSE)...169
NOVOLIN 70/30.....248, 259	NUVESSA.....18, 309	OLPRUVA (6.67 GM DOSE) .....169
NOVOLIN 70/30 FLEXPEN .....248, 259	NUVIGIL .....161	OLUMIANT.....272
NOVOLIN 70/30 FLEXPEN RELION .....248, 259	NUWIQ .....66	OLUX.....319
NOVOLIN 70/30 RELION .248, 259	NYAMYC .....324	OMECLAMOX-PAK.....19, 29, 225
NOVOLIN N.....248	NYLIA 1/35 .....238, 244, 255	omega 3 .....283
NOVOLIN N FLEXPEN .....248	NYLIA 7/7/7 .....238, 244, 255	omega iii epa+dha .....283
NOVOLIN N FLEXPEN RELION .....248	NYMYO .....238, 244, 255	omega-3 .....283
NOVOLIN N RELION .....248	nystatin .....30, 324	omega-3 fatty acids.....283
	nystatin-triamcinolone..319, 324	omega-3 fish oil.....283
	NYSTOP .....324	omega-3-acid ethyl esters .....80
	NYTOL .3, 8, 50, 108, 131, 289, 294	omeprazole .....225
	NYTOL MAXIMUM STRENGTH .....3, 8, 50, 108, 131, 289, 294	omeprazole magnesium .....225



omeprazole-sodium bicarbonate ..... 198, 225	OPVEE ..... 147	oxiconazole nitrate.....314
OMNARIS ..... 188	OPZELURA ..... 326	OXISTAT ..... 314
OMNITROPE..... 250, 261	oral electrolytes ..... 176	OXTELLAR XR ..... 113
ON/GO COVID-19 ANTIGEN TEST ..... 168	ORALYTE ..... 176	oxybutynin chloride.....328
ON/GO ONE COVID-19 HOME TEST..... 168	ORALYTE FREEZER POPS ..... 176	oxybutynin chloride er.....328
once daily ..... 333	ORAPRED ..... 229	oxycodone hcl..... 146
ONCOVITE ..... 176, 333	ORAPRED ODT ..... 229	oxycodone hcl er..... 146
ondansetron ..... 194	ORAVIG ..... 314	oxycodone-acetaminophen .. 104, 146
ondansetron hcl ..... 194	ORAZINC ..... 177	OXYCONTIN ..... 146
one daily for men 50+ advanced ..... 176, 333	ORENCIA ..... 272, 277	oxymorphone hcl ..... 146
one daily for men/lycopene . 176, 333	ORENCIA CLICKJECT ..... 272, 277	oxymorphone hcl er ..... 146
one daily mens health... 176, 333	ORENITRAM ..... 96, 300, 306	OXYTROL ..... 328
one daily multivitamin/iron... 69, 333	ORENITRAM MONTH 1..... 96, 300, 306	OXYTROL FOR WOMEN..328
ONE-A-DAY ESSENTIAL . 333	ORENITRAM MONTH 2..... 96, 300, 306	OYSCO 500+D ..... 177, 346
ONE-A-DAY TEEN ADVANTAGE/HER 176, 333	ORENITRAM MONTH 3..... 96, 300, 306	oyster calcium..... 177
ONE-A-DAY TEEN ADVANTAGE/HIM 176, 333	ORFADIN ..... 283	oyster shell calcium ..... 177
one-daily multi vitamins..... 333	ORGOVYX..... 38, 232	oyster shell calcium + d 177, 346
one-daily multi-vitamin..... 333	ORIAHNN..... 232, 245, 255	oyster shell calcium + d3 ..... 177, 346
ONELAX ..... 215	ORLISSA ..... 232	oyster shell calcium 250+d.. 177, 346
ONELAX MAGNESIUM CITRATE ..... 215	ORKAMBI ..... 291	oyster shell calcium plus d .. 177, 346
ONELAX SENNA ..... 215	ORLADEYO ..... 281	oyster shell calcium w/d ..... 177, 347
one-way valved expiratory ... 165	orlistat..... 221	oyster shell calcium/d... 177, 347
one-way valved inspiratory .. 165	ormir ..... 3, 8, 50, 109, 131, 289, 294	oyster shell calcium/d3 . 177, 347
ONEXTON..... 309, 323	orphenadrine citrate er..... 54, 59, 109	oyster shell calcium/vit d3... 177, 347
ONFI..... 137, 138	orphenadrine-aspirin-caffeine 54, 59, 154, 157	oyster shell calcium/vitamin d ..... 177, 347
ONGENTYS ..... 140	ORSERDU ..... 38	OZEMPIC (0.25 OR 0.5 MG/DOSE)..... 247
ONGLYZA..... 240	ORSYTHIA..... 238, 245, 255	OZEMPIC (1 MG/DOSE).... 247
ONUREG ..... 38	OS-CAL CALCIUM + D3 .. 177, 346	OZEMPIC (2 MG/DOSE).... 247
OPCICON ONE-STEP 238, 255	OS-CAL EXTRA D3 ... 177, 346	<b>P</b>
OPDIVO..... 38	oscimin sr ..... 47	PACERONE ..... 88
OPFOLDA ..... 283	oseltamivir phosphate..... 28	pain & fever infants ..... 105, 124
OPILL..... 238, 255	OSENI ..... 240, 262	pain relief regular strength... 105, 124
OPSUMIT ..... 96, 291, 306	OSMOLEX ER ..... 17, 99	pain reliever ..... 105, 124
OPTICHAMBER DIAMOND ..... 165	OTEZLA ..... 272, 277, 326	pain reliever extra strength .. 105, 124
OPTICHAMBER DIAMOND- LG MASK ..... 165	OTOVEL..... 185, 188	pain reliever/fever reducer... 105, 124
OPTICHAMBER DIAMOND- MD MASK..... 165	oxaliplatin..... 38	PALFORZIA (12 MG DAILY DOSE) ..... 42
OPTICHAMBER DIAMOND- SM MASK..... 165	oxaprozin..... 151	PALFORZIA (120 MG DAILY DOSE) ..... 42
	oxazepam..... 138	
	OXBRYTA..... 63	
	oxcarbazepine..... 113	
	OXERVATE ..... 191	

PALFORZIA (160 MG DAILY DOSE).....	42	pc pediatric iron drops.....	69	PERFOROMIST.....	58, 305
PALFORZIA (20 MG DAILY DOSE).....	42	PEAK AIR PEAK FLOW METER.....	166	perindopril erbumine.....	78, 79
PALFORZIA (200 MG DAILY DOSE).....	42	ped electrolyte freeze pops...	177	permethrin.....	324
PALFORZIA (240 MG DAILY DOSE).....	42	ped electrolyte freezer pops..	177	perphenazine.....	153
PALFORZIA (3 MG DAILY DOSE).....	42	PEDIACARE CHILDRENS ALLERGY 3, 8, 50, 109, 131, 289, 294		perphenazine-amitriptyline..	153, 161
PALFORZIA (300 MG MAINTENANCE).....	42	PEDIALYTE.....	177	PERSERIS.....	116, 134
PALFORZIA (300 MG TITRATION).....	42	PEDIALYTE ADVANCED CARE.....	177	PERSONAL BEST FULL RANGE.....	166
PALFORZIA (40 MG DAILY DOSE).....	42	PEDIALYTE FREEZER POPS.....	177	PERTZYE.....	182, 219
PALFORZIA (6 MG DAILY DOSE).....	42	PEDIALYTE SINGLES.....	177	PEXEVA.....	160
PALFORZIA (80 MG DAILY DOSE).....	42	PEDIAPRED.....	229	pfizer covid-19 bival 6mo-4yr	44
PALFORZIA INITIAL ESCALATION.....	42	pediatric electrolyte.....	177	pfizer covid-19 vac bival 5-11	44
paliperidone er.....	134	pediatric electrolyte-zinc.....	178	pfizer covid-19 vac bivalent...	44
PAMELOR.....	161	pediatric medium mask.....	166	PFIZER COVID-19 VAC-TRIS 5-11Y.....	44
PANDA MASK LARGE.....	165	pediatric mouthpiece.....	166	pfizer covid-19 vac-tris 6m-4y.....	44
PANDA MASK MEDIUM..	165	PEDIATRIC PANDA MASK.....	166	pharbechlor.....	8, 12, 294
PANDA MASK SMALL.....	165	pediatric small mask.....	166	pharbedryl.....	3, 8, 50, 109, 131, 289, 294
PANDEL.....	319	peg 3350.....	215	PHARBETOL.....	105, 124
PANHEMATIN.....	62	peg 3350-kcl-na bicarb-nacl.	215	PHARBETOL EXTRA STRENGTH.....	105, 124
PANOXYL FOAMING WASH.....	323	peg-3350/electrolytes.....	215	pharmacist choice d-vitamin.	347
panplex 2-phase.....	219	PEGANONE.....	142	PHEBURANE.....	169
pantoprazole sodium.....	225	PEGASYS.....	27	phenazopyridine hcl.....	311
papaya.....	182	PEGASYS PROCLICK.....	27	phendimetrazine tartrate.....	100
PARI VORTEX ADULT MASK.....	166	PEGINTRON.....	27	phendimetrazine tartrate er...	100
PARLODEL.....	142	PEMAZYRE.....	38	phenelzine sulfate.....	143
PARNATE.....	143	pemetrexed disodium.....	38	phenobarbital.....	135, 136
PAROEX.....	189, 323	penciclovir.....	311	phenobarbital sodium...	135, 136
paromomycin sulfate.....	18	penicillin v potassium.....	28	phentermine hcl.....	100
paroxetine hcl.....	160	PENNSAID.....	323, 326	PHENYLEPHRINE HCL.....	193
paroxetine hcl er.....	160	PENTASA.....	206	PHENYTEK.....	86, 142
paroxetine mesylate.....	160	pentazocine-naloxone hcl...	147, 148	phenytoin.....	86, 142
PATADAY.....	12, 184	PENTICAN.....	105, 113, 311	PHENYTOIN INFATABS...	86, 142
PATANASE.....	12, 184	pentobarbital sodium.....	136	phenytoin sodium.....	86, 143
PAXIL.....	160	pentostatin.....	38	phenytoin sodium extended...	86, 143
PAXIL CR.....	160	pentoxifylline er.....	65	PHEXXI.....	285
PAXLOVID (150/100).....	21	peptic relief.....	198, 201, 209	PHILITH.....	238, 245, 255
PAXLOVID (300/100).....	21	PEPTO-BISMOL .	198, 201, 209	PHILLIPS.....	215
pazopanib hcl.....	38	PEPTO-BISMOL MAX STRENGTH.....	198, 201, 209	phos-nak.....	178
		PEPTO-BISMOL TO-GO...	198, 201, 209	PHOSPHOLINE IODIDE...	193
		PERCOCET.....	105, 146	phosphorus supplement.....	178
		PERDIEM OVERNIGHT RELIEF.....	215	phosphorus w/sod & potassium.....	178
				PHOSPHO-TRIN K500.....	178

phytonadione .....	264, 349	potassium chloride er.....	178	PREVNAR 13 .....	44
PIFELTRO .....	25	potassium citrate er.....	169	PREVNAR 20 .....	44
PIKO 1.....	166	potassium citrate-citric acid..	169	PREZCOBIX.....	27, 283
pilocarpine hcl.....	56, 193	potassium phosphates.....	178	PREZISTA .....	27
PILOT COVID-19 AT-HOME TEST .....	168	potassium phosphates(66 meq k) .....	178	PRIFTIN.....	21, 30
pimecrolimus.....	280, 321, 326	PRADAXA.....	63	PRIOLOSEC .....	225
pimozide .....	127	pralatrexate .....	38	primaquine phosphate.....	20
PIMTREA .....	238, 245, 255	PRALUENT .....	93	primidone.....	135
pindolol.....	55, 81, 82, 87	pramipexole dihydrochloride	143	PRISTIQ.....	158
pioglitazone hcl .....	262	pramipexole dihydrochloride er .....	143	pro comfort spacer adult.....	166
pioglitazone hcl-glimepiride	262	prasugrel hcl .....	72	pro comfort spacer child.....	166
pioglitazone hcl-metformin hcl .....	233, 262	pravastatin sodium.....	92	PRO HEALTH MINI TALKING MONITR.....	166
PIQRAY (200 MG DAILY DOSE).....	38	prazosin hcl.....	55, 75, 76	PROAIR DIGIHALER...58, 305	
PIQRAY (250 MG DAILY DOSE).....	38	PRECEDEX .....	46, 131, 178	PROAIR RESPICLICK..58, 305	
PIQRAY (300 MG DAILY DOSE).....	38	PRECOSE .....	231	probenecid .....	181, 266
PIRMELLA 1/35..	238, 245, 255	PRED MILD.....	188	PROCARDIA XL.....	90, 96
PIRMELLA 7/7/7.	238, 245, 256	prednicarbate .....	319	procare spacer/adult mask ....	166
piroxicam.....	151	prednisolone .....	229	procare spacer/child mask ....	166
pitavastatin calcium.....	92	prednisolone acetate .....	188	PROCENTRA .....	101
PIXEL COVID-19 PCR HOME TEST .....	168	prednisolone sodium phosphate .....	188, 229	prochlorperazine .....	153, 206
plain niacin .....	339	prednisone .....	229, 230	prochlorperazine maleate.....	153, 206
PLASBUMIN-25 .....	62	PREDNISONE INTENSOL.	229	PROCRIT .....	62, 64
PLASBUMIN-5 .....	62	pregabalin .....	113, 142	PROCTOCORT.....	319
PLASMANATE.....	62	pregabalin er.....	105	PROCTO-MED HC.....	319
PLAVIX .....	72	PREHEVBRIO .....	44	PROCTOSOL HC .....	319
PLEGRIDY .....	277	PRELONE.....	230	PROCTOZONE-HC.....	319
PLEGRIDY STARTER PACK .....	277	PREMARIN .....	245, 267	PROCYSBI.....	283
PNEUMOVAX 23 .....	44	premium condoms lubricated	285	PROFILNINE.....	66
pnv tabs 29-1 .....	69, 333, 339	PREMPHASE .....	245, 256	progesterone .....	256
POCKET CHAMBER.....	166	PREMPRO .....	245, 256	PROGLYCEM .....	232
POCKET PEAK FLOW METER .....	166	PRENATABS RX ..69, 333, 339		PROGRAF.....	280
podofilox .....	327	prenatal .....	69, 334, 339	PROLENSA .....	192
polyethylene glycol 3350 .....	215	prenatal .....	69, 334, 339	promethazine hcl ...1, 8, 12, 131, 202, 294	
polymyxin b-trimethoprim ...	185	prenatal 19.....	69, 215, 333, 339	PROMETRIUM .....	256
polyvinyl alcohol.....	191	prenatal plus .....	69, 334, 339	PROMOLAXIN .....	215
POMALYST .....	38, 277	prenatal vitamin and mineral.	69, 334, 339	propafenone hcl .....	86
PONVORY.....	277	prenatal vitamin plus low iron .....	69, 334, 339	proparacaine hcl.....	192
PONVORY STARTER PACK .....	277	prenatal vitamins ....	69, 334, 339	propranolol hcl.....	55, 81, 82, 87, 124
PORTIA-28 .....	238, 245, 256	PREPARATION H.....	319	propranolol hcl er 55, 81, 82, 87, 124	
posaconazole .....	22	preplus .....	69, 334, 339	propranolol-hctz .....	81, 181
potassium chloride crys er....	178	pretab .....	69, 334, 339	propylthiouracil .....	232
		pretomanid.....	21	PRORENAL + D.....	178, 334
		PREVACID.....	225	PRORENAL + D W/ OMEGA- 3 .....	178, 334
		PREVACID 24HR .....	225	PROSCAR.....	263
		PREVACID SOLUTAB.....	225		
		PREVALITE .....	83		

PROTONIX.....225  
 PROTOPIC.....280, 321, 327  
 protriptyline hcl.....161  
 PROVENTIL HFA.....58, 305  
 PROVERA.....256  
 PROVIGIL.....161  
 PROZAC.....160  
 psyldex.....215  
 PULMICORT.....230, 299  
 PULMICORT FLEXHALER  
 .....230, 299  
 PULMOSAL.....298  
 PULMOZYME.....182, 298  
 pure calcium carbonate.....178  
 PURINETHOL.....38, 280  
 PURIXAN.....38, 281  
 px acid reducer.....12, 223  
 px acid reducer max st....12, 222  
 px all day relief.....124, 151, 266  
 px allergy...3, 8, 9, 50, 109, 131,  
 289, 294  
 px allergy relief.....15, 303  
 px allergy relief cetirizine ....15,  
 303  
 px allergy relief loratadine ....15,  
 303  
 px antacid extra strength .....198,  
 209  
 px antacid maximum strength  
 .....198, 205, 209  
 px antacid regular strength..198,  
 205  
 px arthritis pain relief...105, 124  
 px artificial tears.....189, 191  
 px aspirin.....72, 74, 125, 157  
 px athletic foot.....314  
 px calcium antacid.....198, 209  
 px childrens allergy.....15, 304  
 px childrens pain relief.105, 125  
 px childrens profen ib...125, 152  
 px dairy digestive.....219  
 PX DAYHIST ALLERGY..3, 9,  
 294  
 px docusate sodium.....215  
 px folic acid.....339  
 px gas relief infants.....205  
 px hydrocream.....319  
 px ibuprofen.....125, 152  
 px ibuprofen junior strength 125,  
 152  
 px infants profen ib.....125, 152  
 px laxative.....215  
 px miconazole 3-day combo.314  
 px milk of magnesia.....215  
 px omeprazole.....225  
 px pain relief extra strength.105,  
 125  
 px saline nasal spray.....191, 298  
 px stomach relief..198, 201, 209  
 px stomach relief max st.....198,  
 201, 210  
 px triple.....309  
 PYLERA ....19, 20, 31, 201, 207  
 pyrazinamide.....21  
 pyridostigmine bromide.....56  
 pyrimethamine.....20  
 PYRUKYND.....63  
 PYRUKYND TAPER PACK 63  
**Q**  
 QBRELIS.....79  
 qc acetaminophen 8 hours ...105,  
 125  
 qc acetaminophen infants ....105,  
 125  
 qc all day allergy.....15, 304  
 qc allergy childrens3, 9, 50, 109,  
 131, 289, 294  
 qc allergy relief.....15, 188, 230,  
 299, 304  
 qc antacid.....198, 205, 210  
 qc antacid extra strength.....198,  
 210  
 qc antacid/anti-gas.....198, 205  
 qc anti-diarrheal.....201  
 qc anti-itch aloe.....315, 319  
 qc anti-itch intensive healing319  
 qc aromatic ammonia.....154  
 qc arthritis pain relief...105, 125  
 qc aspirin.....72, 74, 125, 157  
 qc aspirin low dose..72, 74, 125,  
 157  
 qc bacitracin.....309  
 qc blood pressure monitor ....166  
 qc childrens allergy.....15, 304  
 qc childrens ibuprofen..125, 152  
 qc chlor-pheniramine..9, 12, 294  
 qc clotrimazole.....314  
 qc diarrhea relief...198, 201, 210  
 qc diclofenac sodium....323, 327  
 qc enema.....215  
 qc enteric aspirin.....72, 74, 125,  
 157  
 qc esomeprazole magnesium 225  
 qc fexofenadine hydrochloride  
 .....16, 304  
 qc gas relief extra strength....205  
 qc gentle laxative.....215  
 qc ibuprofen.....125, 152  
 qc ibuprofen ib.....125, 152  
 qc loratadine allergy relief.....16,  
 304  
 qc magnesium citrate.....215  
 qc mens daily multivitamin .178,  
 334  
 qc miconazole 7.....314  
 qc milk of magnesia.....215  
 qc naproxen sodium....125, 152,  
 266  
 qc natural vegetable laxative 215  
 qc natura-lax.....216  
 qc niacin.....96  
 qc nicotine transdermal system  
 .....53, 61  
 qc non-aspirin childrens105, 125  
 qc non-aspirin extra strength105,  
 125  
 qc olopatadine hcl.....12, 184  
 qc omeprazole magnesium ...225  
 qc pain relief.....105, 125  
 qc pain relief childrens .105, 125  
 qc pain relief extra strength .105,  
 125  
 qc pain relief infants .....105, 125  
 qc pink bismuth ....198, 201, 210  
 qc prenatal.....69, 334, 339  
 qc rest simply.3, 9, 50, 109, 131,  
 289, 294  
 qc sleep aid max st.4, 9, 50, 109,  
 131, 289, 294  
 qc stomach relief..198, 201, 210  
 qc stool softener.....216  
 qc stool softener pls laxative 216  
 qc tolnaftate.....328  
 qc vegetable laxative.....216  
 QDOLO.....146  
 QELBREE.....141  
 QINLOCK.....39  
 QNASL.....188, 299  
 QNASL CHILDRENS .188, 299  
 QTERN.....240, 260

quazepam..... 138  
 QUDEXY XR ..... 113  
 QUESTRAN..... 83  
 QUESTRAN LIGHT..... 83  
 quetiapine fumarate ..... 116, 134  
 quetiapine fumarate er.. 116, 134  
 QUICKVUE AT-HOME  
     COVID-19 TEST ..... 168  
 QUILLICHEW ER..... 154  
 QUILLIVANT XR..... 154  
 quinapril hcl..... 78, 79  
 quinapril-hydrochlorothiazide  
     ..... 79, 181  
 quinidine sulfate ..... 20, 86  
 quintabs ..... 334  
 QULIPTA..... 139  
 QUVIVIQ..... 148  
 QVAR REDIHALER... 230, 299  
**R**  
 ra acetaminophen..... 105, 125  
 ra acetaminophen ex st. 105, 125  
 ra acid reducer ..... 12, 223  
 ra acid reducer max st.... 12, 223  
 ra alcohol swabs ..... 166  
 ra allergy 4, 9, 50, 109, 131, 289,  
     295  
 ra allergy medication ..... 4, 9, 50,  
     109, 131, 289, 295  
 ra allergy relief .. 4, 9, 13, 16, 50,  
     109, 131, 201, 289, 295, 304  
 ra allergy relief (cetirizine).... 16,  
     304  
 ra allergy relief (loratadine)... 16,  
     304  
 ra allergy relief childrens..... 4, 9,  
     16, 50, 109, 131, 289, 295,  
     304  
 ra antacid ..... 198, 210  
 ra antacid/anti-gas ..... 198, 205  
 ra antacid/anti-gas max st.... 198,  
     205  
 ra antacid/gas relief max st.. 198,  
     205  
 ra anti-diarrheal ..... 201  
 ra anti-itch maximum strength  
     ..... 319  
 ra arthritis pain relief.... 105, 125  
 ra aspirin..... 72, 75, 126, 157  
 ra aspirin adult low dose.. 72, 74,  
     125, 157  
 ra aspirin adult low strength .. 72,  
     75, 125, 157  
 ra aspirin childrens .. 72, 75, 125,  
     157  
 ra aspirin ec ..... 72, 75, 126, 157  
 ra athletes foot ..... 314  
 ra bacitracin zinc first aid .... 309  
 ra balanced b-100 ..... 334, 340  
 ra balanced b-50 ..... 334, 340  
 ra b-complex..... 340  
 ra b-complex with b-12 ..... 340  
 ra beta carotene..... 336  
 ra blood pressure cuff monitor  
     ..... 166  
 ra budesonide..... 188, 299  
 ra calcium 600 ..... 178  
 ra calcium 600/vitamin d-3.. 178,  
     347  
 ra calcium cit plus vit d-3 .... 178,  
     347  
 RA CENTRAL-VITE... 178, 334  
 ra central-vite womens mature  
     ..... 178, 334  
 ra chlorpheniramine maleate ... 9,  
     13, 295  
 ra clotrimazole..... 314  
 ra clotrimazole 7..... 314  
 ra complete allergy 4, 9, 50, 109,  
     131, 289, 295  
 ra dairy aid..... 219  
 ra dairy relief fast acting..... 219  
 RA DIPHEDRYL ALLERGY 4,  
     9, 50, 109, 131, 289, 295  
 ra enema ..... 216  
 ra esomeprazole magnesium 225  
 ra fever reducer/pain reliever  
     ..... 105, 126  
 ra fish oil..... 283  
 ra folic acid..... 340  
 ra gas relief extra strength .... 205  
 ra hydrocortisone plus 12 ..... 319  
 ra ibuprofen ..... 126, 152  
 ra ibuprofen childrens... 126, 152  
 ra ibuprofen infants ..... 126, 152  
 ra ibuprofen junior strength. 126,  
     152  
 ra iron ..... 69  
 ra jock itch..... 314  
 ra laxative ..... 216  
 ra lice maximum strength..... 324  
 ra loperamide hcl ..... 201  
 ra lubricant eye ..... 191  
 ra lubricant eye drops ..... 191  
 ra magnesium citrate..... 216  
 ra miconazole 3 combo pack 314  
 ra miconazole 7..... 314  
 ra milk of magnesia ..... 216  
 ra mini nicotine..... 53, 61  
 ra nasal allergy..... 188, 299  
 ra niacin ..... 340  
 ra nicotine ..... 53, 61  
 ra nicotine gum ..... 53, 61  
 ra nicotine polacrilex ..... 53, 61  
 ra night sleep aid... 4, 9, 131, 295  
 ra nighttime sleep aid.... 4, 9, 50,  
     109, 131, 289, 295  
 ra no flush niacin ..... 340  
 ra omeprazole ..... 225  
 ra p col-rite ..... 216  
 ra pain relief acetaminophen 105,  
     126  
 ra pain relief ibuprofen . 126, 152  
 ra pediatric electrolyte ..... 178  
 ra sleep aid..... 4, 9, 50, 109, 132,  
     289, 295  
 ra sleep aid (diphenhydramine) 4,  
     9, 50, 109, 132, 289, 295  
 ra sleep-aid nighttime .... 4, 9, 50,  
     109, 132, 289, 295  
 ra slow release iron..... 69  
 ra st johns wort ..... 283  
 ra stomach relief ... 198, 201, 210  
 ra triple antibiotic ..... 309  
 ra vitamin c ..... 342  
 ra vitamin c/rose hips..... 342  
 ra vitamin d-3 ..... 347  
 ra vitamin e..... 349  
 ra womens laxative ..... 216  
 rabeprazole sodium..... 226  
 RADIANCE PLATINUM  
     VITAMIN D3 ..... 347  
 raloxifene hcl ..... 240, 267  
 ramelteon ..... 132  
 ramipril ..... 78, 79  
 ranolazine er ..... 85  
 RAPAFLOR ..... 56  
 RAPAMUNE..... 281  
 rasagiline mesylate ..... 143  
 RAVICTI..... 169  
 RAYOS..... 230

REBETOL.....	28	REVLIMID .....	39, 278	ROZEREM.....	132
REBIF.....	278	REXULTI.....	134	ROZLYTREK .....	39
REBIF REBIDOSE .....	278	REYATAZ .....	27	RUBRACA.....	39
REBIF REBIDOSE TITRATION PACK.....	278	REYVOW .....	159	RUCONEST.....	268, 281
REBIF TITRATION PACK.....	278	REZLIDHIA.....	39	rufinamide.....	113
REBINYN .....	66	REZUROCK .....	283	RUKOBIA.....	24
RECLIPSEN.....	238, 245, 256	REZVOGLAR KWIKPEN ..	249	RYALTRIS....	12, 184, 188, 230, 299
RECOMBINATE .....	66	RHOPRESSA .....	193	RYBELSUS.....	247
RECOMBIVAX HB .....	44	RIABNI .....	39, 272	RYDAPT .....	39
REFRESH LACRI-LUBE....	191	RIASTAP .....	66	RYKINDO.....	116, 135
REFRESH LIQUIGEL.....	191	RIBASPHERE .....	28, 29	RYPLAZIM.....	62
REFRESH P.M.....	191	RIBASPHERE RIBAPAK (1000 PACK).....	29	RYTARY .....	141
REFRESH PLUS.....	191	ribavirin .....	29	<b>S</b>	
REFRESH TEARS.....	191	RID .....	324	SABRIL .....	113
REGEN-COV.....	28	RID LICE KILLING SHAMPOO .....	324	saline mist spray .....	191, 298
RELAFEN.....	152	rifabutin .....	21, 30	saline nasal spray .....	191, 298
RELAFEN DS.....	152	rifampin .....	21, 30	SALONPAS PAIN RELIEVING.....	311
RELENZA DISKHALER.....	28	riluzole.....	141	SANCUSO .....	194
releuko.....	64	rimantadine hcl.....	18	SANDIMMUNE...272, 278, 281	
RELEUKO .....	64	RINVOQ .....	272	SAPHRIS.....	116, 135
RELEXXII .....	154	RIOMET.....	233	sapropterin dihydrochloride..	283
RELION KETONE TEST...	168	risedronate sodium .....	267	SARAFEM .....	160
RELISTOR.....	147, 221	RISPERDAL .....	116, 135	SAVAYSA .....	63
RELPAK .....	159	RISPERDAL CONSTA116, 135		SAVELLA.....	142, 158
RELTONE.....	217	risperidone.....	116, 135	SAVELLA TITRATION PACK .....	142, 158
RELYVRIO.....	141	risperidone microspheres er.116, 135		saxagliptin hcl.....	240
REMERON .....	114	RISPERIDONE M-TAB.....	116, 135	saxagliptin-metformin er .....	233, 240
REMERON SOLTAB.....	114	RITALIN .....	154	SAXENDA .....	247
RENAL.....	334, 340, 342	RITALIN LA.....	155	sb allergy .....	16, 304
renal vitamin.....	334, 340, 342	RITEFLO.....	166	sb allergy medicine 4, 9, 50, 109, 132, 289, 295	
renal-vite.....	334, 340, 342	ritonavir .....	27	sb antacid.....	198, 210
rena-vite.....	334, 340, 342	RITUXAN.....	39	sb antacid anti-gas .....	198, 205
rena-vite rx .....	334, 340, 343	rivastigmine.....	56	sb antacid extra strength .....	198, 210
reno caps.....	334, 340, 343	rivastigmine tartrate.....	56	sb aspirin.....	72, 75, 126, 157
REVELA .....	170, 264	rixubis.....	67	sb aspirin adult low strength..72, 75, 126, 157	
repaglinide.....	249	rizatriptan benzoate .....	159	sb childrens aspirin ..72, 75, 126, 157	
REPATHA .....	93	ROCKLATAN .....	193	sb chlorpheniramine ...9, 13, 295	
REPATHA PUSHTRONEX SYSTEM .....	93	ROCTAVIAN .....	67, 99	sb dairy relief.....	219
REPATHA SURECLICK .....	93	roflumilast .....	299	sb fib lax orange .....	216
RESCRIPTOR.....	25	ropinirole hcl .....	144	sb hydrocortisone.....	319
RESTASIS .....	189	ropinirole hcl er .....	144	sb ibuprofen .....	126, 152
RESTASIS MULTIDOSE ...	189	rosuvastatin calcium.....	92	sb lactase.....	219
RESTORIL.....	138	ROWEEPRA.....	113		
RETACRIT .....	62, 64	ROWEEPRA XR .....	113		
RETEVMO.....	39	ROXICODONE.....	146		
RETROVIR.....	26	ROXYBOND .....	146		
REVATIO .....	94, 300, 306, 329				
REVCIVI.....	182				

sb lice killing max st.....324  
 sb loratadine ..... 16, 304  
 sb low dose asa ec ...72, 75, 126,  
 157  
 sb naproxen sodium..... 126, 152,  
 266  
 sb non-aspirin ..... 105, 126  
 sb non-aspirin extra strength105,  
 126  
 sb pain reliever ex st..... 106, 126  
 sb senna-lax .....216  
 sb sleep ..4, 9, 50, 109, 132, 290,  
 295  
 scalp relief maximum strength  
 .....319  
 SCEMBLIX.....39  
 scopolamine.....47, 202  
 SECONAL ..... 136  
 SECUADO ..... 116, 135  
 SEGLENTIS..... 141, 146  
 SEGLUROMET ..... 233, 260  
 selegiline hcl..... 143  
 selenium sulfide..... 323  
 self-taking blood pressure .... 166  
 SELZENTRY .....24  
 SEMGLEE .....249  
 SEMGLEE (YFGN).....249  
 se-natal 19 .....69, 216, 334, 340  
 senior tabs..... 178, 334  
 senna.....216  
 senna plus .....216  
 senna-docusate sodium.....216  
 senna-lax.....216  
 senna-plus.....216  
 senna-tabs .....216  
 senna-time .....216  
 senna-time s.....216  
 sennosides-docusate sodium 216  
 SENOKOT .....216  
 SENOKOT EXTRA  
 STRENGTH.....216  
 SENOKOT S .....216  
 sentry ..... 178, 334  
 sentry senior ..... 178, 334  
 SEREVENT DISKUS ....58, 305  
 SERNIVO.....319  
 SEROQUEL ..... 117, 135  
 SEROQUEL XR ..... 117, 135  
 SEROSTIM .....250, 261  
 sertraline hcl ..... 160  
 SETLAKIN .....238, 245, 256  
 sevelamer carbonate .....170, 264  
 sevelamer hcl.....170, 264  
 SEVENFACT.....67  
 SEZABY ..... 135, 136  
 sf 268  
 sf 5000 plus .....268  
 SHAROBEL.....238, 256  
 SHINGRIX.....44  
 SIDESTREAM PEDIATRIC  
 FACE MASK ..... 166  
 SIKLOS .....39  
 siladryl allergy.....4, 9, 50, 109,  
 132, 290, 295  
 sildenafil citrate ....94, 300, 306,  
 329  
 SILENOR ..... 161  
 silicone mask/infant..... 166  
 silicone mask/pediatric ..... 166  
 SILIQ.....321, 327  
 silodosin.....56  
 silver sulfadiazine.....323  
 SIMBRINZA..... 183, 187  
 simethicone.....205  
 simethicone drops infants.....205  
 SIMLIYA .....238, 245, 256  
 SIMPLY SLEEP ...4, 9, 50, 109,  
 132, 290, 295  
 SIMPONI.....221, 222, 273, 278  
 SIMPONI ARIA...221, 272, 278  
 simvastatin.....92  
 SINEMET .....141  
 SINGULAIR .....297  
 sirolimus .....281  
 SIRTURO .....21  
 SITAVIG.....29  
 SIVEXTRO .....30  
 SKYCLARYS .....283  
 SKYRIZI .....222, 322, 327  
 SKYRIZI (150 MG DOSE).321,  
 327  
 SKYRIZI PEN.....321, 327  
 SKYTROFA .....250  
 sleep aid.....4, 9, 10, 50, 51, 109,  
 132, 290, 295  
 sleep aid (diphenhydramine)4, 9,  
 50, 109, 132, 290, 295  
 sleep aid (doxylamine) 4, 9, 132,  
 295  
 sleep ii..4, 10, 51, 109, 132, 290,  
 295  
 sleep tabs .....4, 10, 51, 109, 132,  
 290, 295  
 sleep-aid.....4, 10, 51, 110, 132,  
 290, 295  
 sleep-tabs .....4, 10, 51, 110, 132,  
 290, 295  
 SLO-NIACIN .....340  
 slow release iron .....69  
 SLOW-MAG .....179  
 sm 3-day vaginal.....314  
 sm 8 hour pain relief..... 106, 126  
 sm acid reducer max st ...12, 223  
 sm alcohol prep.....166  
 sm all day allergy childrens...16,  
 304  
 sm all day allergy relief..16, 304  
 sm allergy 4 hour .....10, 13, 295  
 sm allergy childrens..... 16, 304  
 sm allergy relief.....4, 10, 16, 51,  
 110, 132, 188, 230, 290, 296,  
 299, 304  
 sm allergy relief childrens .4, 10,  
 51, 110, 132, 290, 296  
 sm antacid.....198, 205, 210  
 sm antacid advanced.....199, 205  
 sm antacid advanced max st 199,  
 205  
 sm antacid anti-gas .....199, 205  
 sm antacid maximum strength  
 .....199, 205  
 sm antacid/antigas .....199, 206  
 sm antibiotic .....309  
 sm anti-diarrheal .....202  
 sm antifungal clotrimazole ...314  
 sm antifungal miconazole.....314  
 sm antifungal tolnaftate .....328  
 sm arthritis pain .....323, 327  
 sm arthritis pain reliever..... 106,  
 126  
 sm artificial tears .....191  
 sm aspirin.....72, 75, 126, 157  
 sm aspirin adult low strength.72,  
 75, 126, 157  
 sm aspirin low dose .72, 75, 126,  
 157  
 sm athletes foot.....308  
 sm b100 complex.....334, 340  
 sm b-complex .....334, 340

sm biotin.....	340	sm lice treatment .....	325	sm vitamin d3 .....	347
sm blood pressure monitor ...	166	sm loperamide hcl .....	202	sm z-sleep ....	5, 10, 51, 110, 132, 290, 296
sm calcium 500/vitamin d3 .	179, 347	sm loratadine .....	16, 304	sod benz-sod phenylacet.....	169
sm calcium antacid .....	199, 210	sm lubricant eye drops.....	192	sod citrate-citric acid .....	169
sm calcium antacid ex st.....	199, 210	sm lubricating plus .....	192	sodium bicarbonate.....	199, 210
sm calcium citrate+/vit d3 ...	179, 347	sm lubricating tears .....	192	sodium chloride .....	298
sm calcium/vitamin d ...	179, 347	sm magnesium citrate.....	217	sodium chloride (hypertonic)	192
sm calcium-vitamin d ...	179, 347	sm miconazole 3 .....	314	sodium fluoride.....	268
sm childrens aspirin.	72, 75, 126, 157	sm miconazole 3 applicator..	314	sodium fluoride 5000 plus ....	268
sm childrens ibuprofen .	126, 152	sm miconazole 7 .....	314	sodium fluoride 5000 ppm....	268
sm childrens loratadine...	16, 304	sm milk of magnesia.....	217	sodium oxybate.....	141
SM CLEARLAX.....	216	sm mineral oil.....	217	sodium phenylbutyrate .....	169
sm clotrimazole vaginal .....	314	sm multiple vitamins essential .....	335	sodium phosphates.....	179
sm complete.....	179, 334	sm naproxen sodium....	127, 152, 266	sodium polystyrene sulfonate .....	170, 264
sm complete 50+ .....	179, 335	sm nasal spray saline ....	192, 298	sodium-potassium-phosphorus .....	179
sm complete 50+ ultimate mens .....	179, 335	sm natural laxative/stool soft	217	sofosbuvir-velpatasvir .....	23, 24
sm complete 50+ ultimate women .....	179, 335	sm niacin cr .....	340	SOGROYA.....	250
sm complete senior formula	179, 335	sm nicotine .....	53, 61	SOHONOS .....	284
sm enema.....	216	sm nicotine polacrilex .....	53, 61	SOLARAZE .....	323
sm esomeprazole magnesium .....	226	sm nighttime sleep aid .	5, 10, 51, 110, 132, 290, 296	solifenacin succinate.....	328
sm eye itch relief .....	12, 184	sm omega-3 fish oil .....	283	SOLQUA.....	247, 249
sm fexofenadine hcl .....	16, 304	sm omeprazole.....	226	SOLIRIS .....	268, 281
sm fish oil .....	283	sm oyster shell calcium/vit d .....	179, 347	SOLTAMOX.....	39, 240
sm folic acid .....	340	sm oyster shell calcium/vit d3 .....	179, 347	SOLU-CORTEF.....	230
sm gas relief .....	206	sm pain & fever childrens ...	106, 127	SOLU-MEDROL .....	230
sm gas relief infants.....	206	sm pain & fever infants	106, 127	SOLU-MEDROL (PF) .....	230
sm gas relief infants drops....	206	sm pain relief.....	106, 127	SOLUVITA E.....	349
sm gentle laxative.....	217	sm pain reliever childrens....	106, 127	SOMINEX...5, 10, 51, 110, 132, 290, 296	
sm hydrocortisone .....	319	sm pain reliever ex st....	106, 127	SOMINEX MAX ST ...5, 10, 51, 110, 132, 290, 296	
sm hydrocortisone max st....	319	sm pediatric electrolyte .....	179	SOMINEX NIGHTTIME SLEEP-AID ....5, 10, 51, 110, 132, 290, 296	
sm hydrocortisone plus.	315, 319	sm prenatal vitamins.....	69, 335, 340	SOOTHE .....	199, 202, 210
sm hydrocortisone-aloe max st .....	315, 320	sm senna-s .....	217	sorafenib tosylate.....	39
sm ibuprofen.....	126, 152	sm sleep aid .....	5, 10, 132, 296	SORINE.....	55, 81, 82, 87, 88
sm ibuprofen ib.....	126, 152	sm sleep aid maximum strength ..5, 10, 51, 110, 132, 290, 296			
sm ibuprofen ib childrens....	126, 152	sm st johns wort.....	284	sotalol hcl.....	55, 81, 82, 87, 88
sm ibuprofen jr .....	126, 152	sm stomach relief..	199, 202, 210	sotalol hcl (af).55, 81, 82, 87, 88	
sm infants ibuprofen....	127, 152	sm stool softener.....	217	SOTYKTU .....	327
sm iron.....	69	sm stool softener/laxative....	217	SOTYLIZE.....	55, 81, 82, 87, 88
sm lansoprazole .....	226	sm triple antibiotic.....	309	SOVALDI.....	23
sm lice killing .....	324	sm triple antibiotic original ..	309	SPECTRAVITE .....	179, 335
		sm ultra dairy digestive .....	219	SPEEDY SWAB COVID-19 ANTIGEN .....	168
				SPIKEVAX .....	44



SPIKEVAX COVID-19  
VACCINE ..... 44  
spinosad..... 325  
SPIRIVA HANDIHALER .... 47,  
286  
SPIRIVA RESPIMAT.... 47, 286  
spironolactone .... 92, 93, 94, 171  
spironolactone-hctz .. 92, 94, 181  
SPORANOX ..... 22  
SPRAVATO (56 MG DOSE)  
..... 114  
SPRAVATO (84 MG DOSE)  
..... 114  
SPRINTEC 28 ..... 238, 245, 256  
SPRITAM..... 113  
SPRYCEL ..... 39  
SRONYX ..... 238, 245, 256  
SSD..... 323  
SSD (SILVER  
SULFADIAZINE)..... 323  
st johns wort ..... 284  
st johns wort mood relaxer ... 284  
ST JOSEPH LOW DOSE 72, 75,  
127, 157  
STALEVO 100..... 140, 141  
STALEVO 125..... 140, 142  
STALEVO 150..... 140, 142  
STALEVO 200..... 140, 142  
STALEVO 50..... 140, 142  
STALEVO 75..... 140, 142  
stavudine..... 26  
STEGLATRO..... 260  
STEGLUJAN ..... 240, 260  
STELARA ..... 222, 327  
STIMUFEND ..... 64  
stimulant laxative ..... 217  
STIOLTO RESPIMAT .... 47, 58  
STIVARGA..... 39  
stomach relief..... 199, 202, 210  
stomach relief extra strength 199,  
202, 210  
stomach relief ultra..... 199, 202,  
210  
stool softener ..... 217  
stool softener laxative..... 217  
stool softener plus laxative... 217  
stool softener/laxative ..... 217  
STRATTERA..... 141  
STRENSIQ..... 182  
stress formula ..... 335  
STRIBILD ..... 24, 26, 284  
STRIVERDI RESPIMAT .... 58,  
305  
STYE ..... 189, 192  
SUBLOCADE ..... 148  
SUBOXONE ..... 147, 148  
SUBVENITE..... 113, 117  
SUBVENITE STARTER KIT-  
BLUE..... 113, 117  
SUBVENITE STARTER KIT-  
GREEN..... 113, 117  
SUBVENITE STARTER KIT-  
ORANGE ..... 113, 117  
SUCRAID ..... 182  
sucralfate ..... 224  
SULAR..... 90  
sulconazole nitrate..... 314  
sulfacetamide sodium ..... 185  
sulfacetamide sodium-sulfur 310,  
322  
sulfacetamide-prednisolone. 185,  
188  
sulfamethoxazole-trimethoprim  
..... 20, 31, 32  
sulfasalazine ... 31, 206, 273, 278  
SULFATRIM PEDIATRIC .. 20,  
31, 32  
sulindac..... 152  
sumatriptan ..... 159  
sumatriptan succinate ..... 159  
sumatriptan succinate refill .. 159  
sumatriptan-naproxen sodium  
..... 152, 159  
sunitinib malate ..... 39  
SUNLENCA..... 20, 24  
SUNOSI..... 162  
super biotin ..... 340  
super calcium..... 179  
super calcium 600 + d 400 .. 179,  
347  
super calcium 600 + d3 179, 347  
SUPER QUINTS B-50. 335, 340  
super thera vite m ..... 179, 335  
surelac..... 219  
SURELIFE BP  
MONITOR/ARM ..... 166  
SURELIFE BP  
MONITOR/WRIST ..... 166  
SURMONTIL..... 161  
SUSTIVA ..... 25  
SUTENT ..... 39  
SYMBICORT ..... 58, 230  
SYMBYAX ..... 135, 160  
SYMDEKO ..... 291  
SYMJEPI ..... 45, 286  
SYMLINPEN 120 ..... 231  
SYMLINPEN 60 ..... 231  
SYMPAZAN ..... 137, 138  
SYMPROIC..... 222  
SYMTUZA..... 26, 27, 284  
SYNAGIS..... 28  
SYNALAR ..... 320  
SYNALAR (CREAM) . 315, 320  
SYNALAR (OINTMENT).. 315,  
320  
SYNALAR TS..... 320, 327  
SYNJARDY ..... 233, 260  
SYNJARDY XR..... 233, 260  
SYNTHROID ..... 263  
SYSTANE ..... 192  
SYSTANE ULTRA..... 192  
**T**  
TAB-A-VITE ..... 335  
TAB-A-VITE/BETA  
CAROTENE..... 335  
tab-a-vite/iron ..... 69, 335  
TAB-A-VITE/IRON/BETA  
CAROTENE..... 69, 335  
TABLOID..... 39  
TABRECTA ..... 39  
tacrolimus ..... 281, 322, 327  
tadalafil (pah)..... 94, 300, 306  
TADLIQ ..... 94, 300, 306  
TAFINLAR ..... 39  
tafluprost (pf)..... 193  
TAGRISSO..... 39  
TAKE ACTION ..... 238, 256  
TAKHZYRO ..... 281  
TALICIA ..... 207  
talking sense bp monitor..... 166  
TALTZ ..... 327  
TALZENNA..... 39  
TAMIFLU ..... 28  
tamoxifen citrate..... 39, 240  
tamsulosin hcl..... 56  
TAPAZOLE ..... 232  
TAPERDEX 12-DAY ..... 230  
TAPERDEX 6-DAY ..... 230  
TAPERDEX 7-DAY ..... 230  
TARCEVA ..... 39

TARGRETIN .....	39, 327	theophylline er .....	91, 155, 170, 307, 329	tolterodine tartrate .....	328
TARINA FE 1/20 .....	238, 245, 256	THERA.....	335	tolterodine tartrate er .....	328
TARINA FE 1/20 EQ .....	238, 245, 256	THERA M PLUS .....	179, 335	TOPAMAX .....	113, 127
TASCENSO ODT .....	278	THERA-D 2000 .....	347	TOPAMAX SPRINKLE .....	113, 127
TASIGNA .....	39	THERA-D RAPID REPLETION .....	348	TOPICORT.....	320
tasimelteon .....	132	thera-m.....	179, 335	TOPICORT SPRAY.....	320
TASMAR .....	140	thera-tabs .....	335	topiramate .....	113, 127
tavorole .....	324	THEREMS .....	335	topiramate er .....	113, 127
TAVNEOS .....	268, 281	thioridazine hcl .....	153	TOPROL XL .....	59, 81, 82, 87
tazarotene .....	327	thiothixene .....	160	toremifene citrate.....	40, 240
TAZTIA XT .....	84, 88, 96	thrivite rx .....	69, 335, 340	torsemide .....	92, 170
TAZVERIK.....	39	THROMBATE III .....	62	TOSYMRA.....	159
TECFIDERA.....	278	THYQUIDITY .....	263	total allergy .....	5, 10, 51, 110, 133, 290, 296
TEGRETOL .....	113, 117	thyroid .....	263	TOTAL ALLERGY MEDICINE.....	5, 10, 51, 110, 133, 290, 296
TEGRETOL-XR .....	113, 117	TIADYLT ER.....	84, 89, 96	TOUJEO MAX SOLOSTAR .....	249
TEKURNA .....	94	tiagabine hcl .....	113	TOUJEO SOLOSTAR .....	249
TEKURNA HCT .....	94, 181	TIAZAC .....	84, 89, 96	TOVET .....	320
telmisartan .....	76, 77	TIBSOVO.....	40	TOVIAZ .....	328
telmisartan-amlodipine.....	78, 90	TIGLUTIK .....	141	TRACLEER .....	96, 291, 306
telmisartan-hctz .....	78, 181	TILIA FE.....	238, 245, 256	TRADJENTA .....	240
temazepam.....	138	timolol maleate ....	55, 81, 82, 87, 127, 186	tramadol hcl .....	146
TEMODAR .....	39	timolol maleate (once-daily)	186	tramadol hcl (er biphasic).....	146
TEMOVATE.....	320	TIMOLOL MALEATE OCUDOSE .....	186	tramadol hcl er .....	146
temozolomide .....	40	timolol maleate pf.....	186	tramadol-acetaminophen .....	106, 146
TENCON.....	106, 136	TIMOPTIC .....	186	trandolapril .....	78, 79
TENEX.....	86, 141	TIMOPTIC OCUDOSE .....	186	trandolapril-verapamil hcl er .....	79, 85
tenofovir disoproxil fumarate.	26	TIMOPTIC-XE .....	186	tranexamic acid.....	67
TENORETIC 100.....	81, 181	tinidazole .....	20	tranexamic acid-nacl.....	67
TENORETIC 50.....	81, 181	tiotropium bromide monohydrate.....	47, 286	TRANXENE-T.....	137, 138
TENORMIN.....	59, 81, 82, 87	TIROSINT .....	263	tranylcyromine sulfate .....	143
TEPMETKO.....	40	TIROSINT-SOL .....	263	TRAVATAN Z.....	193
terazosin hcl.....	55, 75, 76	TIVICAY.....	24	travoprost (bak free) .....	193
terbinafine hcl.....	18, 308	TIVICAY PD .....	24	trazodone hcl .....	160
terbutaline sulfate .....	58, 305	tizanidine hcl .....	53	TRECATOR.....	21
terconazole .....	314	tm-vite rx .....	335, 340, 343	TRELEGY ELLIPTA.....	47, 58, 230
teriflunomide .....	278	TOBI.....	18, 185	TRELSTAR.....	40, 247
teriparatide.....	249, 266	TOBI PODHALER .....	18, 185	TRELSTAR MIXJECT .....	40, 247
teriparatide (recombinant) ...	249, 266	tobramycin.....	18, 185	TREMFYA.....	322, 327
testosterone.....	231	tobramycin-dexamethasone.	185, 188	TRESIBA .....	249
testosterone cypionate .....	231	TOFRANIL .....	161	TRESIBA FLEXTOUCH.....	249
TEXACORT.....	320	tolcapone .....	140	tretinoin.....	40, 315
TEZSPIRE.....	301	tolmetin sodium.....	152	TRETTEN .....	67
tgt dairy digestive aid .....	219	tolnaftate.....	328		
tgt sleep aid max strength..	5, 10, 51, 110, 133, 290, 296	tolsura .....	22		
THALOMID.....	278				

TREXALL.....	40, 273, 278, 281	TRI-VYLIBRA ....	239, 245, 256	TRUZONE PEAK FLOW	
TRI FEMYNOR...	238, 245, 256	TRI-VYLIBRA LO .....	239, 246,	METER.....	167
triadime-80 .....	166, 315, 320	257		TUDORZA PRESSAIR .....	47
triamcinolone acetoneide .....	188,	TRIZIVIR.....	26	TUKYSA.....	40
230, 299, 320		TROGARZO .....	24	TULANA.....	239, 257
triamcinolone in absorbbase... 320		TROKENDI XR.....	113, 127	TUMS.....	199, 210
triamterene-hctz.....	171, 181	tronvite.....	335, 341, 343	TUMS CHEWY BITES .....	199,
triazolam.....	139	tropicamide.....	193	210	
TRIBENZOR .....	78, 90, 181	trospium chloride.....	328	TUMS E-X 750 .....	199, 210
tri-buffered aspirin... 72, 75, 127,		trospium chloride er.....	328	TUMS EXTRA STRENGTH	
157, 199, 217		true magnesium oxide .....	179	750 .....	199, 210
TRICARE.....	70, 335, 340	true vitamin e.....	349	TUMS LASTING EFFECTS	
TRICOR .....	91	TRULANCE.....	222	.....	199, 210
TRIDERM.....	320	TRULICITY .....	247	TUMS SMOOTHIES ...	199, 211
TRIDESILON .....	320	TRUMENBA.....	44	TUMS ULTRA 1000....	199, 211
trifluoperazine hcl .....	153	TRUQAP .....	40	TURALIO.....	40
triheal-80 .....	166, 315, 320	TRUSELTIQ (100MG DAILY		TYBOST.....	284
trihexyphenidyl hcl.....	51, 110	DOSE) .....	40	TYKERB .....	40
TRIJARDY XR....	233, 240, 260	TRUSELTIQ (125MG DAILY		TYLENOL 8 HOUR ....	106, 127
TRIKAFTA .....	291	DOSE) .....	40	TYLENOL CHILDRENS ...	106,
TRI-LEGEST FE..	238, 245, 256	TRUSELTIQ (50MG DAILY		127	
TRILEPTAL.....	113	DOSE) .....	40	TYLENOL EXTRA	
TRI-LINYAH.....	238, 245, 256	TRUSELTIQ (75MG DAILY		STRENGTH .....	106, 127
TRILIPIX .....	91	DOSE) .....	40	TYMLOS.....	249, 266
TRI-LO-ESTARYLLA	238, 245,	TRUSTEX		TYPHIM VI.....	44
256		LUB/RIBBED/STUDED		TYRVAYA.....	192
TRI-LO-MARZIA	238, 245, 256	.....	285	TYVASO.....	96, 300, 306
TRI-LO-MILI.....	238, 245, 256	TRUSTEX LUB/SPERMICIDE		TYVASO DPI	
TRI-LO-SPRINTEC....	239, 245,	EX ST .....	285	MAINTENANCE KIT .....	97,
256		TRUSTEX LUB/SPERMICIDE		300, 307	
trimethoprim.....	32	XL.....	285	TYVASO DPI TITRATION	
TRI-MILI .....	239, 245, 256	TRUSTEX LUBRICATED..	285	KIT .....	97, 300, 307
trimipramine maleate.....	161	TRUSTEX LUBRICATED EX		TYVASO REFILL .97, 300, 307	
trinatal rx 1 .....	70, 335, 340	LARGE.....	285	TYVASO STARTER ....	97, 300,
TRINTELLIX.....	160	TRUSTEX LUBRICATED		307	
TRI-NYMYO .....	239, 245, 256	EXTRA ST .....	285	U	
TRIOSTAT.....	263	TRUSTEX		UBRELVY .....	139
triphrocaps.....	335, 340, 343	LUBRICATED/SPERMICID		UCERIS .....	230
triple antibiotic .....	310	E.....	285	UDENYCA.....	64
TRI-SPRINTEC ...	239, 245, 256	TRUSTEX NON-		UDENYCA ONBODY .....	64
TRITOCIN .....	320	LUBRICATED.....	285	UKONIQ .....	40
TRIUMEQ.....	24, 26	EXTRA ST .....	285	ULORIC .....	266
TRI-VI-SOL A/C/D ....	335, 336,	TRUSTEX		ULTICARE ALCOHOL	
343, 348		LUB/SPERMICIDE .....	285	SWABS .....	167
tri-vitamin/fluoride .....	268, 335,	TRUSTEX RIA LUBRICATED		ULTOMIRIS .....	268, 281
336, 343, 348		.....	285	ULTRACET .....	106, 147
tri-vite/fluoride ....	268, 335, 336,	TRUSTEX RIA NON-		ULTRAM .....	147
343, 348		LUBRICATED.....	285	ULTRAVATE .....	320
TRIVIX .....	167, 315, 320	TRUSTEX-NONOXYNOL-		UNISOM SLEEPGELS.....	5, 10,
TRIVORA (28) ....	239, 245, 256	9/RIB/STUD.....	285	51, 110, 133, 290, 296	
		TRUVADA .....	26		

UNISOM SLEEPMELTS .5, 10, 51, 110, 133, 290, 296	VENCLEXTA STARTING PACK .....40	VITAL-D RX .....179, 336, 341, 343, 348
UNISOM SLEEPMINIS ...5, 10, 51, 110, 133, 290, 296	venlafaxine besylate er ..... 158	vitamin a .....336
UNISOM SLEEPTABS ....5, 10, 133, 296	venlafaxine hcl ..... 158	vitamin a/c/d/ infant/toddler 336, 343, 348
UNITHROID.....263	venlafaxine hcl er ..... 158	vitamin a-beta carotene.....336
UPTRAVI.....307	VENTAVIS.....97, 300, 307	vitamin a-c-d infant .....336, 343, 348
UPTRAVI TITRATION .....307	VENTOLIN HFA.....58, 305	vitamin b complex .....341
URSO 250 .....217	VEOPOZ .....268	vitamin b complex 100 .....341
URSO FORTE.....217	verapamil hcl ..... 84, 85, 89, 97	vitamin b-complex.....341
ursodiol.....217	verapamil hcl er ...84, 85, 89, 97	vitamin d .....348
UZEDY ..... 135	VERELAN PM.....84, 85, 89, 97	vitamin d (cholecalciferol) ...348
<b>V</b>	VERIPRED 20 .....230	vitamin d (ergocalciferol).....348
VAGIFEM.....246, 267	VERKAZIA.....189	vitamin d high potency .....348
valacyclovir hcl .....29	VERQUVO .....97	vitamin d infant.....348
VALCHLOR .....327	VERSACLOZ .....135	VITAMIN D-1000 MAX ST348
valganciclovir hcl .....29	VERZENIO.....40	vitamin d3 .....348
VALIUM.....137, 139	VESANOID.....40	vitamin d-3.....348
valproate sodium ..113, 117, 127	VESICARE .....328	vitamin d3 maximum strength .....348
valproic acid .....113, 117, 127	VESICARE LS.....328	vitamin d3 super strength .....348
valsartan .....76, 78	VESTURA.....239, 246, 257	vitamin d3 ultra strength.....348
valsartan-hydrochlorothiazide .....78, 181	VFEND.....22	vitamin e .....349
VALTOCO 10 MG DOSE...137	VIBERZI .....222	vitamin e blend .....349
VALTOCO 15 MG DOSE...137	VIC-FORTE .....179, 335	vitamin e/d-alpha natural.....349
VALTOCO 20 MG DOSE...137	VICTOZA .....247	vitamin supplement e-400 ....349
VALTOCO 5 MG DOSE.....137	VIDAZA.....40	vitamins acd-fluoride...268, 336, 343, 348
VALTREX .....29	VIDEX.....26	vitasure .....336, 341, 343
VANOCOCIN.....23	VIDEX EC .....26	VITRAKVI.....40
vancomycin hcl .....23	VIEKIRA PAK.....23, 24	VIVITROL .....147, 263, 264
VANDAZOLE .....18, 310	vigabatrin.....113	VIVJOA.....22
VANFLYTA .....40	VIGADRONE .....114	VIVOTIF .....45
VANOS .....320	VIGAMOX.....185	VIZIMPRO.....40
VAQTA .....45	VIGOPDER.....114	VOCABRIA .....24
varenicline tartrate.....53, 61	VIIBRYD .....160	VOGELXO.....231
varenicline tartrate (starter) ...53, 61	VIIBRYD STARTER PACK .....160	VOGELXO PUMP .....231
VASCEPA.....80	VIJOICE .....284	VOLNEA.....239, 246, 257
VASERETIC.....79, 181	vilazodone hcl.....160	VONJO .....40
VASOTEC .....78, 79	VIMIZIM.....182	VONVENDI.....67
VAXNEUVANCE .....45	VIMOVO.....152, 226	voriconazole .....22
v-c forte .....179, 335	VIMPAT.....114	VORTEX HOLD CHMBR/MASK/CHILD..167
vegetable lax+stool softener.217	VINATE ONE.....70, 336, 341	VORTEX HOLD CHMBR/MASK/TODDLER .....167
VELCADE .....40	VIOKACE .....182, 219	VORTEX VALVED HOLDING CHAMBER .....167
VELIVET .....239, 246, 257	viorele.....239, 246, 257	
VELPHORO.....170	VIRACEPT .....27	
VELSIPITY .....223, 278	VIRAMUNE .....25	
VEMLIDY .....29	VIRAMUNE XR.....25	
VENCLEXTA.....40	VIREAD.....26	
	virt-caps .....336, 341, 343	
	VIRT-GARD .....341	
	VISTARIL.....10, 12, 133	

VOSEVI .....	23, 24	westab max .....	341	XEPI .....	310
VOTRIENT .....	40	westab mini.....	341	XERESE .....	311, 320
VOXZOGO .....	284	westab one .....	341	XHANCE .....	188, 230, 299
VPRIV .....	182	westab plus .....	70, 336, 341	XIFAXAN .....	31
vp-vite rx .....	336, 341, 343	WESTHROID .....	263	XIGDUO XR.....	233, 260
VRAYLAR.....	135	west-vite w/folic acid ..	336, 341, 343	XIIDRA .....	189
VTAMA .....	310, 327	WIDE-SEAL DIAPHRAGM 60		XOFLUZA (40 MG DOSE)...	21
VUMERITY.....	278	.....	285	XOFLUZA (80 MG DOSE)...	21
VUSION.....	312, 314, 321	WIDE-SEAL DIAPHRAGM 65		XOLAIR.....	301
VYFEMLA.....	239, 246, 257	.....	285	XOPENEX .....	58, 305
VYLIBRA .....	239, 246, 257	WIDE-SEAL DIAPHRAGM 70		XOPENEX CONCENTRATE	
VYTORIN.....	86, 92	.....	285	.....	58, 305
VYVANSE.....	101	WIDE-SEAL DIAPHRAGM 75		XOPENEX HFA .....	59, 305
VYZULTA.....	193	.....	285	XOSPATA.....	41
<b>W</b>		WIDE-SEAL DIAPHRAGM 80		XPOVIO (100 MG ONCE	
WAKIX .....	162	.....	285	WEEKLY).....	41
WAL-DRYL ALLERGY..	5, 10,	WIDE-SEAL DIAPHRAGM 85		XPOVIO (40 MG ONCE	
51, 110, 133, 290, 296		.....	285	WEEKLY).....	41
WAL-DRYL ALLERGY		WIDE-SEAL DIAPHRAGM 90		XPOVIO (40 MG TWICE	
CHILDRENS ..	5, 10, 51, 110,	.....	285	WEEKLY).....	41
133, 290, 296		WIDE-SEAL DIAPHRAGM 95		XPOVIO (60 MG ONCE	
WAL-FEX ALLERGY ..	16, 304	.....	285	WEEKLY).....	41
WAL-FINATE .....	10, 13, 296	WILATE.....	67	XPOVIO (60 MG TWICE	
WAL-ITIN .....	16, 304	WIXELA INHUB.....	58, 230	WEEKLY).....	41
WAL-ITIN CHILDRENS .....	16,	womans laxative .....	217	XPOVIO (80 MG ONCE	
304		WP THYROID .....	263	WEEKLY).....	41
WAL-MUCIL.....	217	WYMZYA FE.....	239, 246, 257	XPOVIO (80 MG TWICE	
WAL-PROFEN .....	127, 152	<b>X</b>		WEEKLY).....	41
WAL-SLEEP Z ...	5, 10, 51, 110,	XACIATO .....	310	XTAMPZA ER.....	147
133, 290, 296		XADAGO.....	143	XTANDI.....	41
wal-som5, 10, 51, 110, 133, 290,		XALATAN.....	193	XULANE.....	239, 246, 257
296		XALKORI .....	40	XULTOPHY.....	248, 249
wal-som maximum strength....	5,	XANAX.....	139	xvite .....	336, 341, 343
11, 51, 110, 133, 290, 296		XANAX XR .....	139	XYMOZYME.....	219
WAL-ZYR .....	16, 304, 305	XARELTO .....	63	XYNTHA .....	67
WAL-ZYR ALL DAY		XARELTO STARTER PACK		XYNTHA SOLOFUSE .....	67
ALLERGY CHILD....	16, 304	.....	63	XYWAV.....	141
WAL-ZYR ALLERGY		XATMEP.....	41, 273, 278, 281	XYZAL ALLERGY 24HR	
CHILDRENS .....	16, 304	XCOPRI .....	114	CHILDRENS.....	16
WAL-ZYR CHILDRENS .....	16,	XCOPRI (250 MG DAILY		<b>Y</b>	
304		DOSE) .....	114	YELETS TEENAGE	
warfarin sodium.....	63	XCOPRI (350 MG DAILY		FORMULA.....	180, 336
WEEKLY-D.....	348	DOSE) .....	114	YERVOY .....	41
WEGOVIY .....	247	XELJANZ .....	273	yl beta carotene.....	336
WELCHOL .....	83, 232	XELJANZ XR.....	273	yl folic acid.....	341
WELIREG.....	40	XELODA.....	41	YONSA .....	41
WELLBUTRIN SR.....	114	XELPROS .....	193	YUFLYMA (1 PEN) ...	222, 273,
WELLBUTRIN XL.....	114	XELSTRYM .....	101	278	
WERA .....	239, 246, 257	XENICAL .....	222	YUFLYMA (2 PEN) ...	222, 273,
wescaps.....	336, 341, 343			278	

YUFLYMA (2 SYRINGE) .222, 273, 278	ZESTORETIC .....79, 181	ZOMACTON (FOR ZOMA- JET 10) .....250, 261
YUPELRI.....47	ZESTRIL .....78, 80	ZOMIG .....159
YUSIMRY .....222, 273, 278	ZETIA .....86	ZONACORT 7 DAY .....231
YUVAFEM .....246, 267	ZETONNA .....188	ZONEGRAN .....114
<b>Z</b>	ZIAC.....81, 181	ZONISADE .....114
ZADITOR .....12, 184	ZIAGEN .....26	zonisamide.....114
ZAFEMY .....239, 246, 257	zidovudine .....26	ZORBTIVE .....250, 261
zafirlukast.....297	ZIEXTENZO.....64	ZORTRESS .....281
zaleplon .....133	ZILBRYSQ .....269	ZORYVE.....327
ZANAFLEX.....54	zileuton er .....297	ZOVIA 1/35 (28)..239, 246, 257
ZARBEES SLEEP	ZIMHI .....147, 265	ZOVIA 1/35E (28)239, 246, 257
CHILD/MELATONIN.....284	zinc .....180	ZOVIRAX .....29, 311
ZARONTIN .....160	zinc gluconate.....180	ZTALMY .....114
ZARXIO.....64	zinc sulfate.....180	ZUBSOLV.....147, 148
ZAVESCA .....284	zinc-220 .....180	ZULRESSO.....114
ZAVZPRET .....139	ZIOPTAN.....193	ZUMANDIMINE .239, 246, 257
ZEGALOGUE.....246, 264	ziprasidone hcl.....117, 135	ZURZUVAE.....114
ZEGERID.....199, 226	ziprasidone mesylate ....117, 135	ZYDELIG.....41
ZEJULA .....41	ZITHROMAX .....29	ZYFLO .....297
ZELAPAR.....143	ZITHROMAX TRI-PAK .....29	ZYKADIA.....41
ZELBORAF .....41	ZITHROMAX Z-PAK .....29	ZYLOPRIM.....266
ZEMBRACE SYMTOUCH.159	ZOCOR .....92	ZYMAXID .....185
ZENATANE.....327	ZODEX 12-DAY .....230	ZYNTEGLO.....99
ZENPEP .....182, 219	ZODEX 6-DAY .....231	ZYPITAMAG.....92
ZENZEDI.....101	ZOKINVY.....284	ZYPREXA.....117, 135
ZEPATIER.....23, 24	ZOLINZA.....41	ZYPREXA RELPREVV .....117, 135
ZEPBOUND.....106, 248	zolmitriptan .....159	ZYPREXA ZYDIS.....117, 135
ZEPOSIA .....279	ZOLOFT.....160	ZYTIGA .....41
ZEPOSIA 7-DAY STARTER	zolpidem tartrate.....133	ZYVOX.....30
PACK .....279	zolpidem tartrate er.....133	ZZZQUIL ....5, 11, 51, 110, 133, 290, 296
ZEPOSIA STARTER KIT ...279	ZOLPIMIST .....133	
ZERVIAE .....184, 305	ZOMACTON .....250, 261	



## Nondiscrimination Notice and Language Services

### Discrimination is against the law

Blue Cross Complete of Michigan complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. Blue Cross Complete of Michigan does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

Blue Cross Complete of Michigan:

- Provides free (no cost) aids and services to people with disabilities to communicate effectively with us, such as:
  - Qualified sign language interpreters
  - Information in other formats (large print, audio, accessible electronic formats)
- Provides free (no cost) language services to people whose primary language is not English, such as:
  - Qualified interpreters
  - Information written in other languages

If you need these services, contact Blue Cross Complete of Michigan Customer Service, 24 hours a day, 7 days a week at **1-800-228-8554** (TDD/TTY: **1-888-987-5832**).

If you believe that Blue Cross Complete of Michigan has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance with:

- **Blue Cross Complete of Michigan Member Grievances**  
P.O. Box 41789  
North Charleston, SC 29423  
**1-800-228-8554**  
(TDD/TTY: **1-888-987-5832**)
- If you need help filing a grievance, Blue Cross Complete of Michigan Customer Service is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, through the Office for Civil Rights Complaint Portal available at [ocrportal.hhs.gov/ocr/portal/lobby.jsf](https://ocrportal.hhs.gov/ocr/portal/lobby.jsf), by mail or phone at:

### U.S. Department of Health and Human Services

200 Independence Avenue, SW  
Room 509F, HHH Building  
Washington, D.C. 20201  
**1-800-368-1019**  
(TDD/TTY: **1-800-537-7697**)

Complaint forms are available at:  
[hhs.gov/ocr/office/file/index.html](https://hhs.gov/ocr/office/file/index.html).

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[mibluecrosscomplete.com](https://mibluecrosscomplete.com)

Blue Cross Complete of Michigan LLC is an independent licensee of the Blue Cross and Blue Shield Association.

## Multi-language interpreter services

**English:** ATTENTION: If you speak English, language assistance services, at no cost, are available to you.

Call **1-800-228-8554**  
(TTY: 1-888-987-5832).

**Spanish:** ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **1-800-228-8554** (TTY: 1-888-987-5832).

### Arabic:

ملحوظة: إذا كنت تتحدث اللغة العربية، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم **1-800-228-8554** (TTY: 1-888-987-5832).

**Chinese Mandarin:** 注意: 如果您说中文普通话/国语, 我们可为您提供免费语言援助服务。请致电: **1-800-228-8554** (TTY: 1-888-987-5832)。

**Chinese Cantonese:** 注意: 如果您使用粵語, 您可以免費獲得語言援助服務。請致電 **1-800-228-8554** (TTY: 1-888-987-5832)。

### Syriac:

ܩܘܪܝܢܐ: ܝܿܠܿܕܿܘܿܢܿܐ ܕܿܢܿܘܿܨܿܝܿܪܿܐ ܕܿܘܿܨܿܝܿܪܿܐ ܕܿܘܿܨܿܝܿܪܿܐ ܕܿܘܿܨܿܝܿܪܿܐ ܕܿܘܿܨܿܝܿܪܿܐ  
ܕܿܘܿܨܿܝܿܪܿܐ ܕܿܘܿܨܿܝܿܪܿܐ ܕܿܘܿܨܿܝܿܪܿܐ ܕܿܘܿܨܿܝܿܪܿܐ ܕܿܘܿܨܿܝܿܪܿܐ  
**1-800-228-8554** ܕܿܘܿܨܿܝܿܪܿܐ ܕܿܘܿܨܿܝܿܪܿܐ  
(TTY: 1-888-987-5832)

**Vietnamese:** CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số **1-800-228-8554** (TTY: 1-888-987-5832).

**Albanian:** VINI RE: Nëse flisni shqip, për ju ka në dispozicion shërbime të asistencës gjuhësore, pa pagesë. Telefononi në **1-800-228-8554** (TTY: 1-888-987-5832).

**Korean:** 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. **1-800-228-8554** (TTY: 1-888-987-5832) 번으로 전화해 주십시오.

**Bengali:** লক্ষ্য করুন: যদি আপনি বাংলায় কথা বলেন, তাহলে নিঃখরচায় ভাষা সহায়তা পেতে পারেন। **1-800-228-8554** (TTY: 1-888-987-5832) নম্বরে ফোন করুন।

**Polish:** UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer **1-800-228-8554** (TTY: 1-888-987-5832).

**German:** ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: **1-800-228-8554** (TTY: 1-888-987-5832).

**Italian:** ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero **1-800-228-8554** (TTY: 1-888-987-5832).

**Japanese:** 注意事項: 日本語を話される場合、無料の通訳サービスをご利用いただけます。 **1-800-228-8554** (TTY: 1-888-987-5832) まで、お電話にてご連絡ください。

**Russian:** ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните **1-800-228-8554** (TTY: 1-888-987-5832).

**Serbo-Croatian:** PAŽNJA: Ako govorište srpsko-hrvatski, usluge jezičke pomoći dostupne su vam besplatno. Nazovite **1-800-228-8554** (TTY: 1-888-987-5832).

**Tagalog:** PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa **1-800-228-8554** (TTY: 1-888-987-5832).

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