

2024 COMPREHENSIVE FORMULARY

(List of Covered Drugs)

**CareFirst BlueCross BlueShield Community
Health Plan Maryland (CareFirst CHPMD)**

A HealthChoice Managed Care Organization

PLEASE READ: THIS DOCUMENT CONTAINS INFORMATION ABOUT THE DRUGS WE COVER IN THIS PLAN.

This formulary was updated on 07/01/2024. For more recent information or other questions, please contact CareFirst CHPMD at **1-800-730-8530**, for TTY users, 711- 8:00 AM to 5:00 PM Monday through Friday, or visit [CareFirstchpmd.com](https://www.CareFirstchpmd.com)

Table of Contents

INTRODUCTION	12
PREFACE	12
PRESCRIPTION COPAYMENT	12
PHARMACY AND THERAPEUTICS (P&T) COMMITTEE	13
GENERIC SUBSTITUTION	13
SPECIALTY PLAN DESIGN	14
PLAN DESIGN	14
AUTHORIZATIONS	15
FORMULARY CHANGES/UPDATES	15
OPIOIDS	15
BLOOD GLUCOSE METER TEST STRIPS, LANCETS, ALCOHOL SWABS	15
MEDICATIONS CARVED OUT TO MARYLAND DEPARTMENT OF HEALTH	16
NOTICE	16
PENICILLINS	17
NATURAL PENICILLINS.....	17
AMINOPENICILLINS	17
PENICILLINASE-RESISTANT PENICILLINS	17
PENICILLIN COMBINATIONS	17
CEPHALOSPORINS	17
CEPHALOSPORINS - 1ST GENERATION	17
CEPHALOSPORINS - 2ND GENERATION	18
CEPHALOSPORINS - 3RD GENERATION	18
CEPHALOSPORIN COMBINATIONS	18
MACROLIDES	18
ERYTHROMYCINS	18
AZITHROMYCIN	18
CLARITHROMYCIN	18
FIDAXOMICIN	19
TETRACYCLINES	19
TETRACYCLINES.....	19
FLUOROQUINOLONES	19
FLUOROQUINOLONES	19
AMINOGLYCOSIDES	19
AMINOGLYCOSIDES	19
ANTIMYCOBACTERIAL AGENTS	19
ANTIMYCOBACTERIAL AGENTS.....	19
ANTIFUNGALS	20
ANTIFUNGALS.....	20
IMIDAZOLE-RELATED ANTIFUNGALS	20
ANTIVIRALS	20
ANTIRETROVIRALS.....	20
CMV AGENTS.....	22
HEPATITIS AGENTS	22

HERPES AGENTS.....	22
INFLUENZA AGENTS.....	23
MISC. ANTIVIRALS.....	23
ANTIVIRAL COMBINATIONS.....	23
ANTIMALARIALS.....	23
ANTIMALARIALS.....	23
ANTIMALARIAL COMBINATIONS.....	23
ANTHELMINTICS.....	23
ANTHELMINTICS.....	23
ANTI-INFECTIVE AGENTS - MISC.....	23
ANTI-INFECTIVE AGENTS - MISC.....	23
LINCOSAMIDES.....	23
OXAZOLIDINONES.....	24
GLYCOPEPTIDES.....	24
LEPROSTATICS.....	24
ANTIPROTOZOAL AGENTS.....	24
URINARY ANTI-INFECTIVES.....	24
ANTI-INFECTIVE MISC. - COMBINATIONS.....	24
TOXOIDS.....	24
TOXOID COMBINATIONS.....	24
PASSIVE IMMUNIZING AND TREATMENT AGENTS.....	24
MONOCLONAL ANTIBODIES.....	24
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES.....	24
ALKYLATING AGENTS.....	24
ANTINEOPLASTIC - ANTI-HER2 AGENTS.....	25
ANTIMETABOLITES.....	25
ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS.....	25
ANTINEOPLASTIC - ANTIBODIES.....	25
ANTINEOPLASTIC - EGFR INHIBITORS.....	26
ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS.....	26
ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS.....	26
ANTINEOPLASTIC - BCL-2 INHIBITORS.....	26
MITOTIC INHIBITORS.....	27
ANTINEOPLASTIC ENZYME INHIBITORS.....	27
ANTINEOPLASTIC RADIOPHARMACEUTICALS.....	28
ANTINEOPLASTICS MISC.....	28
CHEMOTHERAPY RESCUE/ANTIDOTE/PROTECTIVE AGENTS.....	28
CORTICOSTEROIDS.....	29
GLUCOCORTICOSTEROIDS.....	29
MINERALOCORTICIDS.....	30
ANDROGENS-ANABOLIC.....	30
ANDROGENS.....	30
ESTROGENS.....	30
ESTROGENS.....	30

ESTROGEN COMBINATIONS	30
CONTRACEPTIVES.....	31
COPPER CONTRACEPTIVES - IUD	31
PROGESTIN CONTRACEPTIVES - ORAL	31
PROGESTIN CONTRACEPTIVES - INJECTABLE	31
PROGESTIN CONTRACEPTIVES - IUD	31
PROGESTIN CONTRACEPTIVES - IMPLANTS	31
EMERGENCY CONTRACEPTIVES.....	31
COMBINATION CONTRACEPTIVES - TRANSDERMAL	32
COMBINATION CONTRACEPTIVES - VAGINAL	32
COMBINATION CONTRACEPTIVES - ORAL.....	32
PROGESTINS	36
PROGESTINS.....	36
ANTIDIABETICS	36
INSULIN.....	36
INCRETIN MIMETIC AGENTS	36
SULFONYLUREAS.....	37
BIGUANIDES.....	37
MEGLITINIDE ANALOGUES	37
DIABETIC OTHER.....	37
ALPHA-GLUCOSIDASE INHIBITORS	38
DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS.....	38
INSULIN SENSITIZING AGENTS	38
SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS	38
ANTIDIABETIC COMBINATIONS.....	38
THYROID AGENTS	38
THYROID HORMONES.....	38
ANTITHYROID AGENTS	40
ENDOCRINE AND METABOLIC AGENTS - MISC.	40
BONE DENSITY REGULATORS.....	40
HORMONE RECEPTOR MODULATORS.....	40
LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS	40
GROWTH HORMONES.....	40
SOMATOSTATIC AGENTS	41
POSTERIOR PITUITARY HORMONES	41
CORTICOTROPIN.....	41
MINERALOCORTICOID RECEPTOR ANTAGONISTS	41
PROLACTIN INHIBITORS	42
VASOPRESSIN RECEPTOR ANTAGONISTS	42
METABOLIC MODIFIERS.....	42
CARDIOTONICS.....	42
CARDIAC GLYCOSIDES.....	42
ANTIANGINAL AGENTS.....	42
NITRATES	42

BETA BLOCKERS	43
BETA BLOCKERS NON-SELECTIVE.....	43
BETA BLOCKERS CARDIO-SELECTIVE.....	43
ALPHA-BETA BLOCKERS	44
CALCIUM CHANNEL BLOCKERS.....	44
CALCIUM CHANNEL BLOCKERS.....	44
ANTIARRHYTHMICS.....	46
ANTIARRHYTHMICS TYPE I-A	46
ANTIARRHYTHMICS TYPE I-C.....	46
ANTIARRHYTHMICS TYPE III	46
ANTIHYPERTENSIVES	46
ACE INHIBITORS	46
ANGIOTENSIN II RECEPTOR ANTAGONISTS	47
ANTIADRENERGIC ANTIHYPERTENSIVES.....	47
SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS).....	48
VASODILATORS	48
ANTIHYPERTENSIVE COMBINATIONS.....	48
DIURETICS.....	49
CARBONIC ANHYDRASE INHIBITORS.....	49
LOOP DIURETICS	49
POTASSIUM SPARING DIURETICS.....	50
THIAZIDES AND THIAZIDE-LIKE DIURETICS	50
DIURETIC COMBINATIONS	50
VASOPRESSORS.....	50
VASOPRESSORS	50
ANAPHYLAXIS THERAPY AGENTS	50
ANTIHYPERLIPIDEMICS.....	50
BILE ACID SEQUESTRANTS.....	50
FIBRIC ACID DERIVATIVES.....	51
INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS	51
PROPROTEIN CONVERTASE SUBTILISIN/KEXIN TYPE 9 INHIBITORS	51
HMG COA REDUCTASE INHIBITORS	51
NICOTINIC ACID DERIVATIVES.....	52
CARDIOVASCULAR AGENTS - MISC.	52
PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST.....	52
PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS.....	52
PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS	52
PROSTAGLANDIN VASODILATORS	52
CARDIAC MYOSIN INHIBITORS.....	53
SINUS NODE INHIBITORS	53
CARDIOVASCULAR AGENTS MISC. - COMBINATIONS.....	53
ANTIHISTAMINES.....	53
ANTIHISTAMINES - ALKYLAMINES	53
ANTIHISTAMINES - ETHANOLAMINES	54

ANTI-HISTAMINES - PHENOTHIAZINES	56
ANTI-HISTAMINES - PIPERIDINES	56
ANTI-HISTAMINES - NON-SEDATING	56
NASAL AGENTS - SYSTEMIC AND TOPICAL	58
SYMPATHOMIMETIC DECONGESTANTS	58
NASAL STEROIDS	60
NASAL ANTICHOLINERGICS	60
NASAL ANTIALLERGY	60
NASAL AGENTS - MISC.	60
COUGH/COLD/ALLERGY	61
ANTITUSSIVES	61
EXPECTORANTS	61
MISC. RESPIRATORY INHALANTS	63
COUGH/COLD/ALLERGY COMBINATIONS	63
ANTI-ASTHMATIC AND BRONCHODILATOR AGENTS	67
BRONCHODILATORS - ANTICHOLINERGICS	67
ANTI-INFLAMMATORY AGENTS	67
SYMPATHOMIMETICS	67
XANTHINES	68
STEROID INHALANTS	68
LEUKOTRIENE MODULATORS	68
ANTI-ASTHMATIC - MONOCLONAL ANTIBODIES	69
RESPIRATORY AGENTS - MISC.	69
ALPHA-PROTEINASE INHIBITOR (HUMAN)	69
CYSTIC FIBROSIS AGENTS	69
PULMONARY FIBROSIS AGENTS	70
LAXATIVES	70
STIMULANT LAXATIVES	70
BULK LAXATIVES	72
SURFACTANT LAXATIVES	74
LAXATIVES - MISCELLANEOUS	75
LAXATIVE COMBINATIONS	75
ANTI-DIARRHEAL/PROBIOTIC AGENTS	76
ANTI-PERISTALTIC AGENTS	76
ANTI-DIARRHEAL/PROBIOTIC AGENTS - MISC.	76
ANTI-DIARRHEAL/PROBIOTIC COMBINATIONS	79
ANTACIDS	79
ANTACIDS - CALCIUM SALTS	79
ANTACID COMBINATIONS	80
ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS	82
ANTISPASMODICS	82
H-2 ANTAGONISTS	83
ULCER DRUGS - PROSTAGLANDINS	83
PROTON PUMP INHIBITORS	84

MISC. ANTI-ULCER	84
ULCER THERAPY COMBINATIONS	85
ANTIEMETICS.....	85
ANTIEMETICS - ANTICHOLINERGIC	85
5-HT ₃ RECEPTOR ANTAGONISTS	85
SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS	85
ANTIEMETICS - MISCELLANEOUS	85
DIGESTIVE AIDS.....	86
DIGESTIVE ENZYMES	86
GASTROINTESTINAL AGENTS - MISC.....	86
GALLSTONE SOLUBILIZING AGENTS	86
ANTIFLATULENTS.....	86
GASTROINTESTINAL STIMULANTS	87
INTESTINAL ACIDIFIERS	87
GASTROINTESTINAL CHLORIDE CHANNEL ACTIVATORS.....	87
INFLAMMATORY BOWEL AGENTS	87
PHOSPHATE BINDER AGENTS	88
URINARY ANTISPASMODICS	88
URINARY ANTISPASMODIC - ANTIMUSCARINICS (ANTICHOLINERGIC).....	88
URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS	88
VAGINAL AND RELATED PRODUCTS	88
VAGINAL ANTI-INFECTIVES.....	88
VAGINAL ANTI-INFLAMMATORY AGENTS	89
SPERMICIDES	89
VAGINAL ESTROGENS	89
MISCELLANEOUS VAGINAL PRODUCTS	89
GENITOURINARY AGENTS - MISCELLANEOUS	89
ALKALINIZERS.....	89
URINARY ANALGESICS.....	89
PROSTATIC HYPERTROPHY AGENTS.....	90
ANTIPSYCHOTICS/ANTIMANIC AGENTS.....	90
PHENOTHIAZINES	90
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS	90
BARBITURATE HYPNOTICS	90
ANTI-HISTAMINE HYPNOTICS.....	90
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS.....	91
ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) AGENTS	91
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.....	91
ANTIDEMENTIA AGENTS.....	91
MOVEMENT DISORDER DRUG THERAPY	92
MULTIPLE SCLEROSIS AGENTS	92
ANTI-CATAPLECTIC AGENTS.....	93
FIBROMYALGIA AGENTS.....	93
PSEUDOBULBAR AFFECT (PBA) AGENTS.....	93

ANALGESICS - NONNARCOTIC	93
SALICYLATES	93
ANALGESICS OTHER.....	95
ANALGESICS - OPIOID	98
OPIOID AGONISTS	98
OPIOID COMBINATIONS.....	99
ANALGESICS - ANTI-INFLAMMATORY	99
NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS).....	99
ANTIRHEUMATIC ANTIMETABOLITES	102
ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES.....	102
PYRIMIDINE SYNTHESIS INHIBITORS.....	103
SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS.....	103
INTERLEUKIN-1BETA BLOCKERS.....	103
INTERLEUKIN-6 RECEPTOR INHIBITORS.....	103
ANTIRHEUMATIC - ENZYME INHIBITORS	103
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS	103
MIGRAINE PRODUCTS	103
SEROTONIN AGONISTS.....	103
CALCITONIN GENE-RELATED PEPTIDE (CGRP) RECEPTOR ANTAG.....	104
GOUT AGENTS	104
GOUT AGENTS.....	104
URICOSURICS	104
ANTICONVULSANTS	104
HYDANTOINS.....	104
SUCCINIMIDES	105
ANTICONVULSANTS - MISC.....	105
ANTIPARKINSON AND RELATED THERAPY AGENTS	105
ANTIPARKINSON COMT INHIBITORS.....	105
ANTIPARKINSON DOPAMINERGICS.....	105
ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS	106
NEUROMUSCULAR AGENTS	106
ALS AGENTS.....	106
MUSCULOSKELETAL THERAPY AGENTS	106
CENTRAL MUSCLE RELAXANTS.....	106
DIRECT MUSCLE RELAXANTS	106
VISCOSUPPLEMENTS.....	106
ANTIMYASTHENIC/CHOLINERGIC AGENTS	106
ANTIMYASTHENIC/CHOLINERGIC AGENTS.....	106
VITAMINS	106
WATER SOLUBLE VITAMINS	106
OIL SOLUBLE VITAMINS.....	107
MULTIVITAMINS	109
VITAMIN MIXTURES.....	109
B-COMPLEX VITAMINS.....	110

B-COMPLEX W/ C	110
B-COMPLEX W/ FOLIC ACID	111
B-COMPLEX W/ IRON	113
B-COMPLEX W/ MINERALS	113
BIOFLAVONOID PRODUCTS.....	113
MULTIVITAMINS.....	114
MULTIPLE VITAMINS W/ IRON	115
MULTIPLE VITAMINS W/ MINERALS	115
MULTIPLE VITAMINS W/ CALCIUM	129
PEDIATRIC VITAMINS	129
PEDIATRIC MULTIPLE VITAMINS.....	129
PED MULTIPLE VITAMINS W/ MINERALS	130
PED MV W/ IRON.....	131
PED MV W/ FLUORIDE.....	132
PED MULTI VITAMINS W/FL & FE	132
SPECIALTY VITAMINS PRODUCTS.....	132
PRENATAL VITAMINS.....	134
VITAMINS W/ LIPOTROPICS	134
IRON W/ VITAMINS.....	135
MINERALS & ELECTROLYTES	135
CALCIUM.....	135
FLUORIDE.....	138
PHOSPHATE	139
POTASSIUM.....	139
MINERAL COMBINATIONS	139
ELECTROLYTE MIXTURES.....	139
NUTRIENTS	140
PROTEINS.....	140
MISC. NUTRITIONAL SUBSTANCES.....	140
DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS	141
DIETARY MANAGEMENT PRODUCTS	141
HEMATOPOIETIC AGENTS.....	141
COBALAMINS	141
FOLIC ACID/FOLATES	141
IRON.....	142
HEMATOPOIETIC GROWTH FACTORS.....	143
AGENTS FOR GAUCHER DISEASE	143
HEMATOPOIETIC MIXTURES.....	144
ANTICOAGULANTS	144
HEPARINS AND HEPARINOID-LIKE AGENTS	144
COUMARIN ANTICOAGULANTS	144
DIRECT FACTOR XA INHIBITORS.....	144
HEMATOLOGICAL AGENTS - MISC.....	145
PLATELET AGGREGATION INHIBITORS	145

COMPLEMENT INHIBITORS	145
BRADYKININ B2 RECEPTOR ANTAGONISTS	145
OPHTHALMIC AGENTS	145
OPHTHALMIC ANTI-INFECTIVES	145
ARTIFICIAL TEARS AND LUBRICANTS.....	146
BETA-BLOCKERS - OPHTHALMIC.....	148
OPHTHALMIC STEROIDS.....	148
PROSTAGLANDINS - OPHTHALMIC	149
OPHTHALMIC ADRENERGIC AGENTS.....	149
OPHTHALMIC IMMUNOMODULATORS	149
OPHTHALMIC INTEGRIN ANTAGONISTS.....	149
OPHTHALMICS - MISC.....	149
OTIC AGENTS	149
OTIC ANTI-INFECTIVES.....	149
OTIC AGENTS - MISCELLANEOUS	149
OTIC COMBINATIONS.....	150
MOUTH/THROAT/DENTAL AGENTS	150
ANTI-INFECTIVES - THROAT.....	150
ANTISEPTICS - MOUTH/THROAT	150
STEROIDS - MOUTH/THROAT/DENTAL.....	150
ANESTHETICS TOPICAL ORAL	150
DENTAL PRODUCTS	150
THROAT PRODUCTS - MISC.....	151
ANORECTAL AND RELATED PRODUCTS.....	152
RECTAL STEROIDS.....	152
INTRARECTAL STEROIDS.....	152
DERMATOLOGICALS.....	152
ACNE PRODUCTS.....	152
ROSACEA AGENTS.....	153
ANTIBIOTICS - TOPICAL	154
ANTIFUNGALS - TOPICAL.....	154
ANTI-INFLAMMATORY AGENTS - TOPICAL.....	156
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS - TOPICAL.....	157
ANTIPSORIATICS.....	157
ECZEMA AGENTS	157
ANTISEBORRHEIC PRODUCTS	158
ANTIVIRALS - TOPICAL.....	158
ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL	158
BURN PRODUCTS.....	158
CORTICOSTEROIDS - TOPICAL.....	158
DIAPER RASH PRODUCTS	160
EMOLLIENTS.....	161
ENZYMES - TOPICAL	161
HAIR GROWTH AGENTS	161

KERATOLYTIC/ANTIMITOTIC/VESICANT AGENTS	161
IMMUNOMODULATING AGENTS - TOPICAL.....	161
IMMUNOSUPPRESSIVE AGENTS - TOPICAL	161
LOCAL ANESTHETICS - TOPICAL	161
SCABICIDES & PEDICULICIDES	161
MISC. TOPICAL	162
ANTISEPTICS & DISINFECTANTS.....	162
CHLORINE ANTISEPTICS	162
IODINE ANTISEPTICS.....	162
ANTISEPTIC COMBINATIONS	163
ANTIDOTES AND SPECIFIC ANTAGONISTS	163
ANTIDOTES AND SPECIFIC ANTAGONISTS.....	163
DIAGNOSTIC PRODUCTS	163
DIAGNOSTIC TESTS	163
ALTERNATIVE MEDICINES	163
ALTERNATIVE MEDICINE - M'S	163
MEDICAL DEVICES AND SUPPLIES	165
PARENTERAL THERAPY SUPPLIES	165
RESPIRATORY THERAPY SUPPLIES	172
RESPIRATORY AIDS	179
DIABETIC SUPPLIES.....	180
BANDAGES-DRESSINGS-TAPE	195
CONTRACEPTIVES	200
MISC. DEVICES.....	203
PHARMACEUTICAL ADJUVANTS	204
LIQUID VEHICLES	204
MISCELLANEOUS THERAPEUTIC CLASSES.....	204
IMMUNOMODULATORS.....	204
IMMUNOSUPPRESSIVE AGENTS	205
POTASSIUM REMOVING AGENTS	206
PIK3CA-RELATED OVERGROWTH SPECTRUM (PROS) AGENTS.....	206
Index	207

INTRODUCTION

We are pleased to provide the CareFirst CHPMD Formulary as a useful reference. This formulary can assist providers in selecting clinically appropriate and cost-effective products for their CareFirst CHPMD patients.

The document is reflective of current medical practices of the date on which CareFirst CHPMD completed its standard review.

The CareFirst CHPMD formulary is intended as a reference for drug therapy selection. It is not intended to be comprehensive in nature nor is it a substitute for the knowledge, expertise, skill, and judgment of the prescriber in his or her choice of prescription drugs. Specific drug selection for an individual patient rests solely with the prescriber.

The CareFirst CHPMD formulary is subject to state-specific regulations and rules, including, but not limited to, those regarding generic substitution, controlled substance schedules, preference for brands and mandatory generics whenever applicable.

We assume no responsibility for the actions or omissions of any provider based upon reliance, in whole or in part, on the information contained herein. The provider should consult the drug manufacturer's product literature or standard drug references for more detailed information.

PREFACE

The formulary is organized by sections. Each section is divided by therapeutic drug class primarily defined by mechanism of action- how the drug produces an effect in the body.

Drugs represented in this formulary may have varying cost to the plan member based on the plan's benefit structure. Generic drugs typically are available at a lower member out-of-pocket cost while brand-name drugs will generally cost more than generics and have a higher member out-of-pocket cost. Generic drugs should be prescribed first-line as much as possible unless a patient has experienced an adverse effect and/or a lack of therapeutic outcome after using a sufficient dose for an appropriate period of time.

PRESCRIPTION COPAYMENT

Effective 5/1/24, the Maryland Department of Health (MDH) is requiring all plans, including CareFirst BlueCross BlueShield Community Health Plan Maryland (CareFirst CHPMD), to charge a copayment amount for some pharmacy services. The new pharmacy copayment will be:

- \$1.00 for generic drugs, preferred/formulary brand drugs, and HIV/AIDS drugs
- \$3.00 for non-preferred/non-formulary brand drugs

Certain drugs, such as mental health and substance use disorder medications, are covered by the MDH, and copayment may apply to those drugs. All other copayment policies will remain the same. Pregnant individuals, American Indians, individuals under the age of 21, individuals receiving hospice care, individuals in long-term care facilities, and family planning drugs such as birth control will remain excluded from the above copayment. If members have questions about this information, they can call CareFirst CHPMD at 410-779-9369 or toll-free at 1-800-730-8530, 8 AM to 5 PM, ET, Monday through Friday. TTY users please dial 711. In accordance with Medicaid regulations (COMAR 10.09.03.03.O), providers may not deny services to any participant because of the individual's inability to pay the copayment. If a member is unable to pay a drug copay, the dispensing pharmacy must contact the CVS Caremark Help Desk at 1-800-345-5413 for assistance.

PHARMACY AND THERAPEUTICS (P&T) COMMITTEE

The CareFirst CHPMD Pharmacy and Therapeutics Committee ("P&T Committee") is an external advisory body of CareFirst CHPMD network physicians and pharmacists. These clinical professionals are utilized to determine the drugs to include on the formulary, providing insights to the safety and clinical effectiveness of drug therapies. Voting members of the P&T Committee must disclose any financial relationship(s) and/or conflict(s) of interest with all pharmaceutical manufacturers and affiliations.

GENERIC SUBSTITUTION

Generic substitution is a pharmacy action whereby a generic version is dispensed rather than prescribed brand-name product. Drug listed in lowercase indicates generic availability. In most instances, when a generic drug of a brand-name drug is released into the market it is covered and the associated brand-name drug will become non-formulary or not covered. Drugs prescribed are subject to state specific regulations and rules regarding generic substitution and mandatory generic rules apply where appropriate.

Generic drugs are usually priced lower than their brand-name counterparts. Prescription generic drugs are:

- Approved by the U.S. Food and Drug Administration for safety and effectiveness and are manufactured under the same strict standards that apply to brand-name drugs.

- Tested in humans to assure the generic is absorbed into the bloodstream in a similar rate and extent compared to the brand-name drug (bioequivalence). Generic drugs may be different from the brand in size, color, and inactive ingredients, but this does not alter their effectiveness or ability to be absorbed just like the brand-name drug.
- Manufactured in the same strength and dosage form as the brand-name drugs. When a generic drug is substituted for a brand-name drug, you can expect the generic to produce the same clinical effect and safety profile as the brand-name drug (therapeutic equivalence).

SPECIALTY PLAN DESIGN

Specialty Guideline Management (SGM)

SGM is our utilization management program that helps ensure appropriate utilization of specialty drugs based on currently accepted evidence-based medicine guidelines. The utilization management program is available for all therapeutic areas dispensed by our specialty pharmacies. SGM is designed to help ensure safety and efficacy while preventing off-guideline utilization. Drugs which may be included in the SGM program are identified in the formulary as “SP” for your reference.

Note: Specialty drugs can only be dispensed by the CVS Pharmacy® Specialty Services and select University of Maryland Medical System Pharmacies. Providers: please contact either CVS Pharmacy® Specialty Services, Call: 1-800-237-2767, Fax: 1-800-323-2445 or University of Maryland Medical System (UMMS) Pharmacy Services, Call: 855-547-4276, Fax: 410-684-3776. For more information on the Specialty Medications and a list of network Specialty pharmacies, please go to our website Pharmaceutical Management Procedures | CareFirst Community Health Plan Maryland (CareFirstchpmd.com) and click on Specialty Medications.

PLAN DESIGN

The formulary represents a closed formulary plan design. The drugs listed on the formulary are covered by the plan as represented and drugs not listed are not covered unless a non-formulary exception is pre-approved for coverage. Certain drugs on the list are covered if utilization criteria is met (i.e., Step Therapy, Prior Authorization, Quantity Limits, etc.); requests for use of such drugs outside of their listed criteria will be reviewed for medical necessity.

Medical necessity or formulary exception requests will be reviewed based on drug specific prior authorization criteria or standard non-formulary prescription request criteria. Log into CareFirstchpmd.com to check the coverage of drugs on the formulary.

AUTHORIZATIONS

Authorization requests for both **NON-FORMULARY** and **FORMULARY** products requiring either a PA (Prior Authorization), QL (Quantity Limit), ST (Step Therapy) or medical necessity review contact **CVS Caremark**® at: **1-877-418-4133**. Coverage determination is rendered within twenty-four (24) hours of receipt of prior authorization. All clinical documentation supporting the request must be provided at the time of submission. If additional documentation is requested, please return as soon as possible, otherwise the request is subject to denial.

FORMULARY CHANGES/UPDATES

CareFirst CHPMD may add or remove drugs from the drug list throughout the year. The formulary changes are reviewed and approved by the Pharmacy and Therapeutics (P & T) Committee or added/removed from the formulary based on the latest medical literature. Monthly formulary changes are posted onto the website at CareFirstchpmd.com.

OPIOIDS

The quantity of opioid products prescribed (including those that are combined with acetaminophen, aspirin, or ibuprofen) will be limited to up to 90 morphine milligram equivalents (MME) per day based on a 30-day supply. **Prescriptions that exceed the 90 MME daily limit will be subject to UM criteria, such as prior authorization.** Members who are opioid-naïve may be subject to additional step therapy requirements [use of an immediate release (IR) formulation will be required before moving to an extended-release (ER) formulation and quantity limit restrictions (first fill will be limited to three days for 19 years and under and seven days for 20 years and older)].

Note: The quantity limits outlined in the formulary reflect post one (1) month Limit of ≤ 200 MME/day (per 25 days).

BLOOD GLUCOSE METER TEST STRIPS, LANCETS, ALCOHOL SWABS

One Touch by LifeScan is the preferred covered blood glucose meter and test strips for CareFirst CHPMD members. Test strips have a quantity limit of 200 strips every 25 days.

Formulary alcohol swabs are limited to a maximum cost of \$10 per month. A majority of alcohol swabs available on the market costs less than \$10. Note: The existing quantity limit of 400 alcohol swabs every 25 days remains.

Formulary lancets are limited to a maximum cost of \$10 per month. A majority of lancets available on the market costs less than \$10. Note: The existing quantity limit of 200 lancets every 25 days remains.

MEDICATIONS CARVED OUT TO MARYLAND DEPARTMENT OF HEALTH

Maryland Department of Health (MDH) is responsible for formulary management of drugs used for behavioral health purposes which are covered under the Medicaid Mental Health Formulary as well as Substance Use Disorder Medications. Drugs in these classes are carved out of the Managed Care Organization (MCO), pharmacy benefit and are payable as fee-for-service through Maryland Medical Assistance and processed by their Pharmacy Benefit Management (PBM): Conduent. For questions about these medications, please connect with the Maryland Medicaid Pharmacy Access Hotline at 833-325-0105 Monday-Friday, 8:00 AM - 5:00 PM or visit <https://health.maryland.gov/mmcp/pap/pages/paphome.aspx>.

Authorization requests for specific MENTAL HEALTH products contact the Maryland Department of Health (MDH) at: 1-800-932-3918 (Antipsychotic Peer Review Line for children 0-17 years old: 1-855-283-0876).

NOTICE

The information contained in this formulary is proprietary. The information may not be copied in whole or in part without written permission. ©2024. All rights reserved. This formulary contains references to brand-name prescription drugs that are trademarks or registered trademarks of pharmaceutical manufacturers. Plan member privacy is important to us. Our employees are trained regarding the appropriate way to handle members' private health information.

Note: The coverage of prescription drugs and supplies along with the utilization management listed on this document is dependent on your benefit plan and is subject to change. For the most accurate information on your drug cost and pricing, please log in to members.carefirstchpmd.com.

Drug Name	Requirements/Limits
PENICILLINS	
NATURAL PENICILLINS	
BICILLIN L-A INJ 600000	
BICILLIN L-A INJ 2400000	
BICILLIN L-A INJ 1200000	
<i>penicillin v potassium tab 250 mg</i>	
<i>penicillin v potassium tab 500 mg</i>	
<i>penicillin v potassium for soln 125 mg/5ml</i>	
<i>penicillin v potassium for soln 250 mg/5ml</i>	
AMINOPENICILLINS	
<i>amoxicillin (trihydrate) cap 250 mg</i>	
<i>amoxicillin (trihydrate) cap 500 mg</i>	
<i>amoxicillin (trihydrate) tab 500 mg</i>	
<i>amoxicillin (trihydrate) tab 875 mg</i>	
<i>amoxicillin (trihydrate) chew tab 125 mg</i>	
<i>amoxicillin (trihydrate) chew tab 250 mg</i>	
<i>amoxicillin (trihydrate) for susp 125 mg/5ml</i>	
<i>amoxicillin (trihydrate) for susp 200 mg/5ml</i>	
<i>amoxicillin (trihydrate) for susp 250 mg/5ml</i>	
<i>amoxicillin (trihydrate) for susp 400 mg/5ml</i>	
<i>ampicillin cap 500 mg</i>	
PENICILLINASE-RESISTANT PENICILLINS	
<i>dicloxacillin sodium cap 250 mg</i>	
<i>dicloxacillin sodium cap 500 mg</i>	
PENICILLIN COMBINATIONS	
<i>amoxicillin & k clavulanate tab 250-125 mg</i>	
<i>amoxicillin & k clavulanate tab 500-125 mg</i>	
<i>amoxicillin & k clavulanate tab 875-125 mg</i>	
<i>amoxicillin & k clavulanate chew tab 200-28.5 mg</i>	
<i>amoxicillin & k clavulanate chew tab 400-57 mg</i>	
AUGMENTIN SUS 125/5ML	
<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	
<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i>	
<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i>	
<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i>	
CEPHALOSPORINS	
CEPHALOSPORINS - 1ST GENERATION	
<i>cefadroxil cap 500 mg</i>	
<i>cefadroxil tab 1 gm</i>	
<i>cefadroxil for susp 250 mg/5ml</i>	
<i>cefadroxil for susp 500 mg/5ml</i>	
<i>cephalexin cap 250 mg</i>	

Drug Name	Requirements/Limits
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<i>cephalexin cap 500 mg</i>	
<i>cephalexin cap 750 mg</i>	
<i>cephalexin tab 250 mg</i>	
<i>cephalexin tab 500 mg</i>	
<i>cephalexin for susp 125 mg/5ml</i>	
<i>cephalexin for susp 250 mg/5ml</i>	

CEPHALOSPORINS - 2ND GENERATION

<i>cefprozil tab 250 mg</i>	
<i>cefprozil tab 500 mg</i>	
<i>cefprozil for susp 125 mg/5ml</i>	
<i>cefprozil for susp 250 mg/5ml</i>	
<i>cefuroxime axetil tab 250 mg</i>	
<i>cefuroxime axetil tab 500 mg</i>	

CEPHALOSPORINS - 3RD GENERATION

<i>cefdinir cap 300 mg</i>	
<i>cefdinir for susp 125 mg/5ml</i>	
<i>cefdinir for susp 250 mg/5ml</i>	
<i>ceftriaxone sodium for inj 250 mg</i>	
<i>ceftriaxone sodium for inj 500 mg</i>	
<i>ceftriaxone sodium for inj 1 gm</i>	
<i>ceftriaxone sodium for inj 2 gm</i>	

CEPHALOSPORIN COMBINATIONS

ZERBAXA INJ 1.5GM	PA
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MACROLIDES

ERYTHROMYCINS

<i>erythromycin tab 250 mg</i>	
<i>erythromycin tab 500 mg</i>	
<i>erythromycin w/ delayed release particles cap 250 mg</i>	
<i>erythrocin tab 250mg</i>	
<i>e.e.s. 400 tab 400mg</i>	
<i>erythromycin ethylsuccinate tab 400 mg</i>	
<i>erythromycin ethylsuccinate for susp 200 mg/5ml</i>	

AZITHROMYCIN

<i>azithromycin tab 250 mg</i>	
<i>azithromycin tab 500 mg</i>	
<i>azithromycin tab 600 mg</i>	
<i>azithromycin for susp 100 mg/5ml</i>	
<i>azithromycin for susp 200 mg/5ml</i>	
<i>azithromycin powd pack for susp 1 gm</i>	

CLARITHROMYCIN

<i>clarithromycin tab 250 mg</i>	
<i>clarithromycin tab 500 mg</i>	

Drug Name	Requirements/Limits
<i>clarithromycin for susp 125 mg/5ml</i>	
<i>clarithromycin for susp 250 mg/5ml</i>	
<i>clarithromycin tab er 24hr 500 mg</i>	
FIDAXOMICIN	
DIFICID TAB 200MG	PA
DIFICID SUS	PA
TETRACYCLINES	
TETRACYCLINES	
<i>doxycycline monohydrate for susp 25 mg/5ml</i>	
<i>doxycycline hyclate cap 50 mg</i>	
<i>doxycycline hyclate cap 100 mg</i>	
<i>doxycycline hyclate tab 20 mg</i>	
<i>doxycycline hyclate tab 100 mg</i>	
<i>minocycline hcl cap 50 mg</i>	
<i>minocycline hcl cap 75 mg</i>	
<i>minocycline hcl cap 100 mg</i>	
<i>tetracycline hcl cap 250 mg</i>	QL (120 caps every 25 days)
<i>tetracycline hcl cap 500 mg</i>	QL (120 caps every 25 days)
FLUOROQUINOLONES	
FLUOROQUINOLONES	
<i>ciprofloxacin hcl tab 250 mg (base equiv)</i>	
<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>	
<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	
<i>levofloxacin tab 250 mg</i>	
<i>levofloxacin tab 500 mg</i>	
<i>levofloxacin tab 750 mg</i>	
<i>levofloxacin oral soln 25 mg/ml</i>	
AMINOGLYCOSIDES	
AMINOGLYCOSIDES	
<i>neomycin sulfate tab 500 mg</i>	
<i>tobramycin nebu soln 300 mg/5ml</i>	SP, PA, QL (10 mL every 1 day)
<i>tobramycin nebu soln 300 mg/4ml</i>	SP, PA, QL (8 mL every 1 day)
ANTIMYCOBACTERIAL AGENTS	
ANTIMYCOBACTERIAL AGENTS	
<i>ethambutol hcl tab 100 mg</i>	
<i>ethambutol hcl tab 400 mg</i>	
<i>isoniazid tab 100 mg</i>	
<i>isoniazid tab 300 mg</i>	
<i>isoniazid syrup 50 mg/5ml</i>	
<i>pyrazinamide tab 500 mg</i>	
<i>rifabutin cap 150 mg</i>	
<i>rifampin cap 150 mg</i>	

Drug Name	Requirements/Limits
<i>rifampin cap 300 mg</i>	
ANTIFUNGALS	
ANTIFUNGALS	
<i>griseofulvin microsize susp 125 mg/5ml</i>	
<i>griseofulvin ultramicrosize tab 125 mg</i>	
<i>griseofulvin ultramicrosize tab 250 mg</i>	
<i>nystatin tab 500000 unit</i>	
<i>terbinafine hcl tab 250 mg</i>	QL (90 tabs every year)
IMIDAZOLE-RELATED ANTIFUNGALS	
<i>fluconazole tab 50 mg</i>	
<i>fluconazole tab 100 mg</i>	
<i>fluconazole tab 150 mg</i>	
<i>fluconazole tab 200 mg</i>	
<i>fluconazole for susp 10 mg/ml</i>	
<i>fluconazole for susp 40 mg/ml</i>	
<i>itraconazole cap 100 mg</i>	PA, QL (4 caps every 1 day)
<i>voriconazole tab 50 mg</i>	PA
<i>voriconazole tab 200 mg</i>	PA
<i>voriconazole for susp 40 mg/ml</i>	PA
ANTIVIRALS	
ANTIRETROVIRALS	
<i>maraviroc tab 150 mg</i>	QL (2 tabs every 1 day)
<i>maraviroc tab 300 mg</i>	QL (4 tabs every 1 day)
SELZENTRY SOL 20MG/ML	QL (1840 mL every 30 days)
TROGARZO INJ 150MG/ML	
TIVICAY TAB 50MG	QL (2 tabs every 1 day)
TIVICAY PD TAB 5MG	QL (12 tabs every 1 day)
ISENTRESS TAB 400MG	QL (4 tabs every 1 day)
ISENTRESS HD TAB 600MG	QL (2 tabs every 1 day)
ISENTRESS CHW 25MG	QL (6 tabs every 1 day)
ISENTRESS CHW 100MG	QL (6 tabs every 1 day)
ISENTRESS POW 100MG	QL (2 packets every 1 day)
<i>atazanavir sulfate cap 150 mg (base equiv)</i>	QL (1 cap every 1 day)
<i>atazanavir sulfate cap 200 mg (base equiv)</i>	QL (2 caps every 1 day)
<i>atazanavir sulfate cap 300 mg (base equiv)</i>	QL (1 cap every 1 day)
REYATAZ POW 50MG	QL (6 packets every 1 day)
PREZISTA TAB 75MG	QL (10 tabs every 1 day)
PREZISTA TAB 150MG	QL (6 tabs every 1 day)
<i>darunavir tab 600 mg</i>	QL (2 tabs every 1 day)
<i>darunavir tab 800 mg</i>	QL (1 tab every 1 day)
PREZISTA SUS 100MG/ML	QL (400 mL every 30 days)
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	QL (4 tabs every 1 day)

Drug Name	Requirements/Limits
<i>ritonavir tab 100 mg</i>	QL (12 tabs every 1 day)
NORVIR POW 100MG	QL (12 packets every 1 day)
<i>abacavir sulfate tab 300 mg (base equiv)</i>	QL (2 tabs every 1 day)
<i>abacavir sulfate soln 20 mg/ml (base equiv)</i>	QL (30 mL every 1 day)
<i>emtricitabine caps 200 mg</i>	QL (1 cap every 1 day)
EMTRIVA SOL 10MG/ML	QL (680 mL every 28 days)
<i>lamivudine tab 150 mg</i>	QL (2 tabs every 1 day)
<i>lamivudine tab 300 mg</i>	QL (1 tab every 1 day)
<i>lamivudine oral soln 10 mg/ml</i>	QL (32 mL every 1 day)
<i>zidovudine cap 100 mg</i>	QL (6 caps every 1 day)
<i>zidovudine tab 300 mg</i>	QL (2 tabs every 1 day)
<i>zidovudine syrup 10 mg/ml</i>	QL (64 mL every 1 day)
VIREAD TAB 150MG	QL (1 tab every 1 day)
VIREAD TAB 200MG	QL (1 tab every 1 day)
VIREAD TAB 250MG	QL (1 tab every 1 day)
<i>tenofovir disoproxil fumarate tab 300 mg</i>	QL (1 tab every 1 day)
VIREAD POW 40MG/GM	QL (8 gm every 1 day)
PIFELTRO TAB 100MG	QL (2 tabs every 1 day)
<i>efavirenz cap 50 mg</i>	QL (3 caps every 1 day)
<i>efavirenz cap 200 mg</i>	QL (3 caps every 1 day)
<i>efavirenz tab 600 mg</i>	QL (1 tab every 1 day)
INTELENCE TAB 25MG	QL (4 tabs every 1 day)
<i>etravirine tab 100 mg</i>	QL (4 tabs every 1 day)
<i>etravirine tab 200 mg</i>	QL (2 tabs every 1 day)
<i>nevirapine tab 200 mg</i>	QL (2 tabs every 1 day)
<i>nevirapine susp 50 mg/5ml</i>	QL (40 mL every 1 day)
<i>nevirapine tab er 24hr 400 mg</i>	QL (1 tab every 1 day)
EDURANT TAB 25MG	QL (2 tabs every 1 day)
TYBOST TAB 150MG	QL (1 tab every 1 day)
<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	QL (1 tab every 1 day)
EVOTAZ TAB 300-150	QL (1 tab every 1 day)
CABENUVA SUS 400-600	PA, QL (1 kit every 30 days)
CABENUVA SUS 600-900	PA, QL (1 kit every 30 days)
DOVATO TAB 50-300MG	QL (1 tab every 1 day)
PREZCOBIX TAB 800-150	QL (1 tab every 1 day)
DESCOVY TAB 120-15MG	QL (1 tab every 1 day)
DESCOVY TAB 200/25MG	QL (1 tab every 1 day)
<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i>	QL (1 tab every 1 day)
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>	QL (1 tab every 1 day)
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>	QL (1 tab every 1 day)

Drug Name	Requirements/Limits
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	QL (1 tab every 1 day)
CIMDUO TAB 300-300	QL (1 tab every 1 day)
<i>lamivudine-zidovudine tab 150-300 mg</i>	QL (2 tabs every 1 day)
<i>lopinavir-ritonavir tab 100-25 mg</i>	QL (10 tabs every 1 day)
<i>lopinavir-ritonavir tab 200-50 mg</i>	QL (4 tabs every 1 day)
<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i>	QL (16 mL every 1 day)
TRIUMEQ TAB	QL (1 tab every 1 day)
TRIUMEQ PD TAB	QL (6 tabs every 1 day)
BIKTARVY TAB	QL (1 tab every 1 day)
<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	QL (1 tab every 1 day)
<i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>	QL (1 tab every 1 day)
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>	QL (1 tab every 1 day)
ODEFSEY TAB	QL (1 tab every 1 day)
COMPLERA TAB	QL (1 tab every 1 day)
SYMTUZA TAB	QL (1 tab every 1 day)
GENVOYA TAB	QL (1 tab every 1 day)
STRIBILD TAB	QL (1 tab every 1 day)

CMV AGENTS

<i>valganciclovir hcl tab 450 mg (base equivalent)</i>	QL (4 tabs every 1 day)
<i>valganciclovir hcl for soln 50 mg/ml (base equiv)</i>	QL (1000 mL every 30 days)

HEPATITIS AGENTS

<i>adefovir dipivoxil tab 10 mg</i>	SP
<i>entecavir tab 0.5 mg</i>	SP, QL (1 tab every 1 day)
<i>entecavir tab 1 mg</i>	SP, QL (1 tab every 1 day)
BARACLUDE SOL	SP, QL (21 mL every 1 day)
<i>lamivudine tab 100 mg (hbv)</i>	SP
VEMLIDY TAB 25MG	SP, QL (1 tab every 1 day)
PEGASYS INJ 180MCG/M	SP, PA
PEGASYS INJ	SP, PA
<i>ribavirin cap 200 mg</i>	SP, PA
<i>ribavirin tab 200 mg</i>	SP, PA
MAVYRET TAB 100-40MG	SP, PA, QL (3 tabs every 1 day)
SOFOS/VELPAT TAB 400-100	SP, PA, QL (1 tab every 1 day)

HERPES AGENTS

<i>acyclovir cap 200 mg</i>	
<i>acyclovir tab 400 mg</i>	
<i>acyclovir tab 800 mg</i>	
<i>acyclovir susp 200 mg/5ml</i>	
<i>valacyclovir hcl tab 500 mg</i>	
<i>valacyclovir hcl tab 1 gm</i>	

Drug Name	Requirements/Limits
<i>famciclovir tab 125 mg</i>	
<i>famciclovir tab 250 mg</i>	
<i>famciclovir tab 500 mg</i>	
INFLUENZA AGENTS	
<i>oseltamivir phosphate cap 30 mg (base equiv)</i>	QL (20 caps every 180 days)
<i>oseltamivir phosphate cap 45 mg (base equiv)</i>	QL (10 caps every 180 days)
<i>oseltamivir phosphate cap 75 mg (base equiv)</i>	QL (10 caps every 180 days)
<i>oseltamivir phosphate for susp 6 mg/ml (base equiv)</i>	QL (180 mL every 180 days); AGE (Max 12)
MISC. ANTIVIRALS	
LAGEVRIO CAP 200MG	QL (40 caps every 30 days)
ANTIVIRAL COMBINATIONS	
PAXLOVID TAB 150-100	QL (40 tabs every 30 days)
PAXLOVID TAB 300-100	QL (60 tabs every 30 days)
ANTIMALARIALS	
ANTIMALARIALS	
<i>chloroquine phosphate tab 250 mg</i>	QL (8 tabs every 180 days)
<i>chloroquine phosphate tab 500 mg</i>	QL (8 tabs every 180 days)
<i>hydroxychloroquine sulfate tab 200 mg</i>	
<i>mefloquine hcl tab 250 mg</i>	QL (8 tabs every 180 days)
ANTIMALARIAL COMBINATIONS	
<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	QL (23 tabs every 180 days)
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	QL (23 tabs every 180 days)
ANTHELMINTICS	
ANTHELMINTICS	
<i>ivermectin tab 3 mg</i>	
EMVERM CHW 100MG	QL (12 tabs every year)
<i>cvs pinworm sus 50mg/ml</i>	OTC
<i>pin-away sus 144mg/ml</i>	OTC
<i>pinworm med sus 144mg/ml</i>	OTC
<i>reeses med sus pinworm</i>	OTC
ANTI-INFECTIVE AGENTS - MISC.	
ANTI-INFECTIVE AGENTS - MISC.	
<i>metronidazole cap 375 mg</i>	
<i>metronidazole tab 250 mg</i>	
<i>metronidazole tab 500 mg</i>	
XIFAXAN TAB 550MG	ST
<i>trimethoprim tab 100 mg</i>	
LINCOSAMIDES	
<i>clindamycin hcl cap 150 mg</i>	
<i>clindamycin hcl cap 300 mg</i>	

Drug Name	Requirements/Limits
<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	
OXAZOLIDINONES	
<i>linezolid tab 600 mg</i>	PA
<i>linezolid for susp 100 mg/5ml</i>	PA
ZYVOX SOL 2MG/ML	PA
<i>linezolid iv soln 600 mg/300ml (2 mg/ml)</i>	PA
LINEZOLID INJ 2MG/ML	PA
GLYCOPEPTIDES	
<i>vancomycin hcl cap 125 mg (base equivalent)</i>	ST
<i>vancomycin hcl cap 250 mg (base equivalent)</i>	ST
LEPROSTATICS	
<i>dapsone tab 25 mg</i>	
<i>dapsone tab 100 mg</i>	
ANTIPROTOZOAL AGENTS	
<i>atovaquone susp 750 mg/5ml</i>	
URINARY ANTI-INFECTIVES	
<i>nitrofurantoin susp 25 mg/5ml</i>	AGE (Max 8)
<i>nitrofurantoin macrocrystalline cap 25 mg</i>	
<i>nitrofurantoin macrocrystalline cap 50 mg</i>	
<i>nitrofurantoin macrocrystalline cap 100 mg</i>	
<i>nitrofurantoin monohydrate macrocrystalline cap 100 mg</i>	
ANTI-INFECTIVE MISC. - COMBINATIONS	
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>	
<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i>	
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	
<i>sulfatrim pd sus 200-40/5</i>	
TOXOIDS	
TOXOID COMBINATIONS	
BOOSTRIX INJ	
BOOSTRIX INJ	
PASSIVE IMMUNIZING AND TREATMENT AGENTS	
MONOCLONAL ANTIBODIES	
SYNAGIS INJ 50/0.5ML	SP, PA
SYNAGIS INJ 100MG/ML	SP, PA
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES	
ALKYLATING AGENTS	
MYLERAN TAB 2MG	
LEUKERAN TAB 2MG	
<i>cyclophosphamide cap 25 mg</i>	
<i>cyclophosphamide cap 50 mg</i>	

Drug Name	Requirements/Limits
CYCLOPHOSPH TAB 25MG	
CYCLOPHOSPH TAB 50MG	
GLEOSTINE CAP 10MG	
GLEOSTINE CAP 40MG	
GLEOSTINE CAP 100MG	
<i>temozolomide cap 5 mg</i>	SP, PA
<i>temozolomide cap 20 mg</i>	SP, PA
<i>temozolomide cap 100 mg</i>	SP, PA
<i>temozolomide cap 140 mg</i>	SP, PA
<i>temozolomide cap 180 mg</i>	SP, PA
<i>temozolomide cap 250 mg</i>	SP, PA
ANTINEOPLASTIC - ANTI-HER2 AGENTS	
KANJINTI SOL 150MG	SP, PA
KANJINTI INJ 420MG	SP, PA
TUKYSA TAB 50MG	PA, QL (4 tabs every 1 day)
TUKYSA TAB 150MG	PA, QL (4 tabs every 1 day)
ANTIMETABOLITES	
<i>capecitabine tab 150 mg</i>	SP, PA
<i>capecitabine tab 500 mg</i>	SP, PA
<i>mercaptopurine tab 50 mg</i>	
<i>methotrexate sodium tab 2.5 mg (base equiv)</i>	
TREXALL TAB 5MG	
TREXALL TAB 7.5MG	
TREXALL TAB 10MG	
TREXALL TAB 15MG	
ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS	
INLYTA TAB 1MG	SP, PA, QL (8 tabs every 1 day)
INLYTA TAB 5MG	SP, PA, QL (4 tabs every 1 day)
MVASI INJ 100MG	SP, PA
MVASI INJ 400MG	SP, PA
ZIRABEV INJ 100/4ML	SP, PA
ZIRABEV INJ 400/16ML	SP, PA
LENVIMA CAP 4MG	SP, PA, QL (1 cap every 1 day)
LENVIMA CAP 8 MG	SP, PA, QL (2 caps every 1 day)
LENVIMA CAP 10 MG	SP, PA, QL (1 cap every 1 day)
LENVIMA CAP 12MG	SP, PA, QL (3 caps every 1 day)
LENVIMA CAP 20 MG	SP, PA, QL (2 caps every 1 day)
LENVIMA CAP 14 MG	SP, PA, QL (2 caps every 1 day)
LENVIMA CAP 18 MG	SP, PA, QL (3 caps every 1 day)
LENVIMA CAP 24 MG	SP, PA, QL (3 caps every 1 day)
ANTINEOPLASTIC - ANTIBODIES	
POLIVY INJ 30MG	SP, PA

\$0 - Zero Dollar Copay **AGE** - Age Limit **GNDR** - Gender Edit **OTC** - Over the counter **PA** - Prior Authorization **QL** - Quantity Limits **SP** - Specialty **ST** - Step Therapy

Drug Name	Requirements/Limits
POLIVY INJ 140MG	SP, PA
PADCEV INJ 20MG	SP, PA, QL (21 vials every 28 days)
PADCEV INJ 30MG	SP, PA, QL (15 vials every 28 days)

ANTINEOPLASTIC - EGFR INHIBITORS

GILOTRIF TAB 20MG	SP, PA, QL (1 tab every 1 day)
GILOTRIF TAB 30MG	SP, PA, QL (1 tab every 1 day)
GILOTRIF TAB 40MG	SP, PA, QL (1 tab every 1 day)
<i>erlotinib hcl tab 25 mg (base equivalent)</i>	SP, PA, QL (2 tabs every 1 day)
<i>erlotinib hcl tab 100 mg (base equivalent)</i>	SP, PA, QL (1 tab every 1 day)
<i>erlotinib hcl tab 150 mg (base equivalent)</i>	SP, PA, QL (1 tab every 1 day)

ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS

ERIVEDGE CAP 150MG	SP, PA, QL (1 cap every 1 day)
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ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS

LYSODREN TAB 500MG	
<i>bicalutamide tab 50 mg</i>	
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	
<i>toremifene citrate tab 60 mg (base equivalent)</i>	
<i>anastrozole tab 1 mg</i>	
<i>exemestane tab 25 mg</i>	
<i>letrozole tab 2.5 mg</i>	
<i>fulvestrant inj soln pref syr 250 mg/5ml</i>	SP, PA
<i>megestrol acetate tab 20 mg</i>	
<i>megestrol acetate tab 40 mg</i>	
<i>megestrol acetate susp 40 mg/ml</i>	
ZOLADEX IMP 3.6MG	SP, PA
<i>leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml)</i>	SP, PA
ELIGARD INJ 7.5MG	SP, PA
ELIGARD INJ 22.5MG	SP, PA
ELIGARD INJ 30MG	SP, PA
ELIGARD INJ 45MG	SP, PA
CAMCEVI INJ 42MG	SP, PA
TRELSTAR MIX INJ 3.75MG	SP, PA
<i>abiraterone acetate tab 250 mg</i>	SP, PA, QL (4 tabs every 1 day)

ANTINEOPLASTIC - BCL-2 INHIBITORS

VENCLEXTA TAB 10MG	PA, QL (4 tabs every 1 day)
VENCLEXTA TAB 50MG	PA, QL (4 tabs every 1 day)
VENCLEXTA TAB 100MG	PA, QL (6 tabs every 1 day)
VENCLEXTA TAB START PK	PA, QL (1 pack every 28 days)

Drug Name	Requirements/Limits
MITOTIC INHIBITORS	
<i>etoposide cap 50 mg</i>	
ANTINEOPLASTIC ENZYME INHIBITORS	
XALKORI CAP 200MG	SP, PA, QL (4 caps every 1 day)
XALKORI CAP 250MG	SP, PA, QL (4 caps every 1 day)
XALKORI CAP 20MG	SP, PA, QL (4 caps every 1 day)
XALKORI CAP 50MG	SP, PA, QL (4 caps every 1 day)
XALKORI CAP 150MG	SP, PA, QL (6 caps every 1 day)
LORBRENA TAB 25MG	SP, PA, QL (3 tabs every 1 day)
LORBRENA TAB 100MG	SP, PA, QL (1 tab every 1 day)
VERZENIO TAB 50MG	SP, PA, QL (2 tabs every 1 day)
VERZENIO TAB 100MG	SP, PA, QL (2 tabs every 1 day)
VERZENIO TAB 150MG	SP, PA, QL (2 tabs every 1 day)
VERZENIO TAB 200MG	SP, PA, QL (2 tabs every 1 day)
ZOLINZA CAP 100MG	SP, PA, QL (4 caps every 1 day)
SPRYCEL TAB 20MG	SP, PA, QL (3 tabs every 1 day)
SPRYCEL TAB 50MG	SP, PA, QL (1 tab every 1 day)
SPRYCEL TAB 70MG	SP, PA, QL (1 tab every 1 day)
SPRYCEL TAB 80MG	SP, PA, QL (1 tab every 1 day)
SPRYCEL TAB 140MG	SP, PA, QL (1 tab every 1 day)
<i>imatinib mesylate tab 100 mg (base equivalent)</i>	SP, PA, QL (4 tabs every 1 day)
<i>imatinib mesylate tab 400 mg (base equivalent)</i>	SP, PA, QL (2 tabs every 1 day)
TAFINLAR CAP 50MG	SP, PA, QL (4 caps every 1 day)
TAFINLAR CAP 75MG	SP, PA, QL (4 caps every 1 day)
TAFINLAR TAB 10MG	SP, PA, QL (30 tabs every 1 day)
ZELBORAF TAB 240MG	SP, PA, QL (8 tabs every 1 day)
CALQUENCE TAB 100MG	SP, PA, QL (2 tabs every 1 day)
<i>everolimus tab 2.5 mg</i>	SP, PA, QL (1 tab every 1 day)
<i>everolimus tab 5 mg</i>	SP, PA, QL (1 tab every 1 day)
<i>everolimus tab 7.5 mg</i>	SP, PA, QL (1 tab every 1 day)
<i>everolimus tab 10 mg</i>	SP, PA, QL (1 tab every 1 day)
CABOMETYX TAB 20MG	SP, PA, QL (1 tab every 1 day)
CABOMETYX TAB 40MG	SP, PA, QL (1 tab every 1 day)
CABOMETYX TAB 60MG	SP, PA, QL (1 tab every 1 day)
COMETRIQ KIT 60MG	SP, PA, QL (3 caps every 1 day)
COMETRIQ KIT 100MG	SP, PA, QL (2 caps every 1 day)
COMETRIQ KIT 140MG	SP, PA, QL (4 caps every 1 day)
XOSPATA TAB 40MG	SP, PA, QL (3 tabs every 1 day)
<i>lapatinib ditosylate tab 250 mg (base equiv)</i>	SP, PA, QL (6 tabs every 1 day)
RYDAPT CAP 25MG	SP, PA, QL (8 caps every 1 day)
<i>pazopanib hcl tab 200 mg (base equiv)</i>	SP, PA, QL (4 tabs every 1 day)
STIVARGA TAB 40MG	SP, PA, QL (3 tabs every 1 day)

Drug Name	Requirements/Limits
<i>sunitinib malate cap 12.5 mg (base equivalent)</i>	SP, PA, QL (1 cap every 1 day)
<i>sunitinib malate cap 25 mg (base equivalent)</i>	SP, PA, QL (1 cap every 1 day)
<i>sunitinib malate cap 37.5 mg (base equivalent)</i>	SP, PA, QL (1 cap every 1 day)
<i>sunitinib malate cap 50 mg (base equivalent)</i>	SP, PA, QL (1 cap every 1 day)
CAPRELSA TAB 100MG	SP, PA, QL (2 tabs every 1 day)
CAPRELSA TAB 300MG	SP, PA, QL (1 tab every 1 day)
MEKINIST TAB 0.5MG	SP, PA, QL (3 tabs every 1 day)
MEKINIST TAB 2MG	SP, PA, QL (1 tab every 1 day)
MEKINIST SOL 0.05/ML	SP, PA, QL (38 mL every 1 day)
ROZLYTREK CAP 100MG	SP, PA, QL (1 cap every 1 day)
ROZLYTREK CAP 200MG	SP, PA, QL (3 caps every 1 day)
ROZLYTREK PAK 50MG	SP, PA, QL (12 packets every 1 day)
ZEJULA TAB 100MG	SP, PA, QL (1 tab every 1 day)
ZEJULA TAB 200MG	SP, PA, QL (1 tab every 1 day)
ZEJULA TAB 300MG	SP, PA, QL (1 tab every 1 day)
RUBRACA TAB 200MG	SP, PA, QL (4 tabs every 1 day)
RUBRACA TAB 250MG	SP, PA, QL (4 tabs every 1 day)
RUBRACA TAB 300MG	SP, PA, QL (4 tabs every 1 day)
<i>bortezomib for inj 3.5 mg</i>	SP, PA
NINLARO CAP 2.3MG	SP, PA, QL (6 caps every 28 days)
NINLARO CAP 3MG	SP, PA, QL (6 caps every 28 days)
NINLARO CAP 4MG	SP, PA, QL (6 caps every 28 days)
JAKAFI TAB 5MG	SP, PA, QL (2 tabs every 1 day)
JAKAFI TAB 10MG	SP, PA, QL (2 tabs every 1 day)
JAKAFI TAB 15MG	SP, PA, QL (2 tabs every 1 day)
JAKAFI TAB 20MG	SP, PA, QL (2 tabs every 1 day)
JAKAFI TAB 25MG	SP, PA, QL (2 tabs every 1 day)
ZYDELIG TAB 100MG	SP, PA, QL (2 tabs every 1 day)
ZYDELIG TAB 150MG	SP, PA, QL (2 tabs every 1 day)
ANTINEOPLASTIC RADIOPHARMACEUTICALS	
PLUVICTO INJ 1000MBQ	SP, PA
ANTINEOPLASTICS MISC.	
<i>hydroxyurea cap 500 mg</i>	
MATULANE CAP 50MG	
<i>tretinoin cap 10 mg</i>	
<i>bexarotene cap 75 mg</i>	SP, PA
CHEMOTHERAPY RESCUE/ANTIDOTE/PROTECTIVE AGENTS	
<i>leucovorin calcium tab 5 mg</i>	
<i>leucovorin calcium tab 10 mg</i>	

Drug Name	Requirements/Limits
<i>leucovorin calcium tab 15 mg</i>	
<i>leucovorin calcium tab 25 mg</i>	
IWILFIN TAB 192MG	SP, PA, QL (240 tabs every 30 days)

CORTICOSTEROIDS

GLUCOCORTICOSTEROIDS

<i>budesonide delayed release particles cap 3 mg</i>	
<i>budesonide tab er 24hr 9 mg</i>	
<i>dexamethasone tab 0.5 mg</i>	
<i>dexamethasone tab 0.75 mg</i>	
<i>dexamethasone tab 1 mg</i>	
<i>dexamethasone tab 1.5 mg</i>	
<i>dexamethasone tab 2 mg</i>	
<i>dexamethasone tab 4 mg</i>	
<i>dexamethasone tab 6 mg</i>	
<i>dexamethasone elixir 0.5 mg/5ml</i>	
<i>dexamethasone soln 0.5 mg/5ml</i>	
<i>hydrocortisone tab 5 mg</i>	
<i>hydrocortisone tab 10 mg</i>	
<i>hydrocortisone tab 20 mg</i>	
MEDROL TAB 2MG	
<i>methylprednisolone tab 4 mg</i>	
<i>methylprednisolone tab 8 mg</i>	
<i>methylprednisolone tab 16 mg</i>	
<i>methylprednisolone tab 32 mg</i>	
<i>methylprednisolone tab therapy pack 4 mg (21)</i>	
<i>prednisolone soln 15 mg/5ml</i>	
<i>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)</i>	
<i>prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)</i>	
<i>prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base)</i>	
<i>prednisolone sod phos orally disintegr tab 10 mg (base eq)</i>	
<i>prednisolone sod phos orally disintegr tab 15 mg (base eq)</i>	
<i>prednisolone sod phos orally disintegr tab 30 mg (base eq)</i>	
<i>prednisone tab 1 mg</i>	
<i>prednisone tab 2.5 mg</i>	
<i>prednisone tab 5 mg</i>	
<i>prednisone tab 10 mg</i>	

Drug Name	Requirements/Limits
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<i>prednisone tab 20 mg</i>	
<i>prednisone tab 50 mg</i>	
<i>prednisone oral soln 5 mg/5ml</i>	
<i>prednisone tab therapy pack 5 mg (21)</i>	
<i>prednisone tab therapy pack 5 mg (48)</i>	
<i>prednisone tab therapy pack 10 mg (21)</i>	
<i>prednisone tab therapy pack 10 mg (48)</i>	

MINERALOCORTICIDS

<i>fludrocortisone acetate tab 0.1 mg</i>	
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ANDROGENS-ANABOLIC

ANDROGENS

<i>danazol cap 50 mg</i>	
<i>danazol cap 100 mg</i>	
<i>danazol cap 200 mg</i>	
<i>testosterone td gel 25 mg/2.5gm (1%)</i>	PA
<i>testosterone td gel 10mg/act (2%)</i>	PA
<i>depo-testost inj 100mg/ml</i>	PA
<i>testosterone cypionate im inj in oil 100 mg/ml</i>	PA
<i>depo-testost inj 200mg/ml</i>	PA
<i>testosterone cypionate im inj in oil 200 mg/ml</i>	PA
<i>testosterone enanthate im inj in oil 200 mg/ml</i>	PA

ESTROGENS

ESTROGENS

<i>estradiol tab 0.5 mg</i>	
<i>estradiol tab 1 mg</i>	
<i>estradiol tab 2 mg</i>	
<i>estradiol td patch weekly 0.025 mg/24hr</i>	
<i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)</i>	
<i>estradiol td patch weekly 0.05 mg/24hr</i>	
<i>estradiol td patch weekly 0.06 mg/24hr</i>	
<i>estradiol td patch weekly 0.075 mg/24hr</i>	
<i>estradiol td patch weekly 0.1 mg/24hr</i>	

ESTROGEN COMBINATIONS

<i>amabelz tab 0.5-0.1</i>	
<i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i>	
<i>estradiol & norethindrone acetate tab 1-0.5 mg</i>	
<i>mimvey tab 1-0.5mg</i>	
COMBIPATCH DIS	
COMBIPATCH DIS	
<i>fyavolv tab 0.5-2.5</i>	

Drug Name	Requirements/Limits
norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg	
fyavolv tab 1-5	
jinteli tab 1mg-5mcg	
norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg	

CONTRACEPTIVES

COPPER CONTRACEPTIVES - IUD

PARAGARD IUD T380A	QL (1 IUD in lifetime); \$0
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PROGESTIN CONTRACEPTIVES - ORAL

camila tab 0.35mg	QL (1 tab every 1 day); \$0
deblitane tab 0.35mg	QL (1 tab every 1 day); \$0
emzahh tab 0.35mg	QL (1 tab every 1 day); \$0
errin tab 0.35mg	QL (1 tab every 1 day); \$0
heather tab 0.35mg	QL (1 tab every 1 day); \$0
incassia tab 0.35mg	QL (1 tab every 1 day); \$0
jencycla tab 0.35mg	QL (1 tab every 1 day); \$0
lyleq tab 0.35mg	QL (1 tab every 1 day); \$0
lyza tab 0.35mg	QL (1 tab every 1 day); \$0
nora-be tab 0.35mg	QL (1 tab every 1 day); \$0
norethindrone tab 0.35 mg	QL (1 tab every 1 day); \$0
norlyroc tab 0.35mg	QL (1 tab every 1 day); \$0
sharobel tab 0.35mg	QL (1 tab every 1 day); \$0

PROGESTIN CONTRACEPTIVES - INJECTABLE

medroxyprogesterone acetate im susp 150 mg/ml	QL (5 injections every 364 days); \$0
medroxyprogesterone acetate im susp prefilled syr 150 mg/ml	QL (5 injections every 364 days); \$0

PROGESTIN CONTRACEPTIVES - IUD

SKYLA IUD 13.5MG	QL (1 IUD in lifetime); \$0
KYLEENA IUD 19.5MG	QL (1 IUD in lifetime); \$0
LILETTA IUD 52MG	QL (1 IUD in lifetime); \$0
MIRENA IUD SYSTEM	QL (1 IUD in lifetime); \$0

PROGESTIN CONTRACEPTIVES - IMPLANTS

NEXPLANON IMP 68MG	QL (1 implant in lifetime); \$0
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EMERGENCY CONTRACEPTIVES

aftera tab 1.5mg	QL (1 tab every 30 days), OTC; \$0
afterpill tab 1.5mg	QL (1 tab every 30 days), OTC; \$0
curae tab 1.5mg	QL (1 tab every 30 days), OTC; \$0

Drug Name	Requirements/Limits
<i>econtra os tab 1.5mg</i>	QL (1 tab every 30 days), OTC; \$0
<i>her style tab 1.5mg</i>	QL (1 tab every 30 days), OTC; \$0
<i>levonorgestrel tab 1.5 mg</i>	QL (1 tab every 30 days), OTC; \$0
<i>my choice tab 1.5mg</i>	QL (1 tab every 30 days), OTC; \$0
<i>my way tab 1.5mg</i>	QL (1 tab every 30 days), OTC; \$0
<i>new day tab 1.5mg</i>	QL (1 tab every 30 days), OTC; \$0
<i>opcicon tab 1.5mg</i>	QL (1 tab every 30 days), OTC; \$0
<i>option 2 tab 1.5mg</i>	QL (1 tab every 30 days), OTC; \$0
<i>react tab 1.5mg</i>	QL (1 tab every 30 days), OTC; \$0
<i>take action tab 1.5mg</i>	QL (1 tab every 30 days), OTC; \$0
ELLA TAB 30MG	QL (2 tabs every year); \$0

COMBINATION CONTRACEPTIVES - TRANSDERMAL

<i>norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr</i>	QL (39 patches every 364 days); \$0
<i>xulane dis 150-35</i>	QL (39 patches every 364 days); \$0
<i>zafemy dis 150/35</i>	QL (39 patches every 364 days); \$0

COMBINATION CONTRACEPTIVES - VAGINAL

<i>eluryng mis</i>	QL (13 rings every 364 days); \$0
<i>enilloring mis</i>	QL (13 rings every 364 days); \$0
<i>etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr</i>	QL (13 rings every 364 days); \$0
<i>haloette mis</i>	QL (13 rings every 364 days); \$0

COMBINATION CONTRACEPTIVES - ORAL

<i>apri tab</i>	QL (1 tab every 1 day); \$0
<i>cyred eq tab</i>	QL (1 tab every 1 day); \$0
<i>enskyce tab</i>	QL (1 tab every 1 day); \$0
<i>isibloom tab</i>	QL (1 tab every 1 day); \$0
<i>juleber tab</i>	QL (1 tab every 1 day); \$0

Drug Name	Requirements/Limits
<i>kalliga tab</i>	QL (1 tab every 1 day); \$0
<i>reclipsen tab</i>	QL (1 tab every 1 day); \$0
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	QL (1 tab every 1 day); \$0
<i>jasmiel tab 3-0.02mg</i>	QL (1 tab every 1 day); \$0
<i>lo-zumandimi tab 3-0.02mg</i>	QL (1 tab every 1 day); \$0
<i>loryna tab 3-0.02mg</i>	QL (1 tab every 1 day); \$0
<i>nikki tab 3-0.02mg</i>	QL (1 tab every 1 day); \$0
<i>vestura tab 3-0.02mg</i>	QL (1 tab every 1 day); \$0
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	QL (1 tab every 1 day); \$0
<i>ocella tab 3-0.03mg</i>	QL (1 tab every 1 day); \$0
<i>syeda tab 3-0.03mg</i>	QL (1 tab every 1 day); \$0
<i>zumandimine tab 3-0.03mg</i>	QL (1 tab every 1 day); \$0
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i>	QL (1 tab every 1 day); \$0
<i>kelnor tab 1/35</i>	QL (1 tab every 1 day); \$0
<i>zovia 1/35 tab</i>	QL (1 tab every 1 day); \$0
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i>	QL (1 tab every 1 day); \$0
<i>kelnor 1/50 tab</i>	QL (1 tab every 1 day); \$0
<i>afirmelle tab 0.1-0.02</i>	QL (1 tab every 1 day); \$0
<i>aubra eq tab 0.1-0.02</i>	QL (1 tab every 1 day); \$0
<i>aviane tab</i>	QL (1 tab every 1 day); \$0
<i>delyla tab 0.1-0.02</i>	QL (1 tab every 1 day); \$0
<i>falmina tab</i>	QL (1 tab every 1 day); \$0
<i>lessina tab</i>	QL (1 tab every 1 day); \$0
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	QL (1 tab every 1 day); \$0
<i>luteru tab</i>	QL (1 tab every 1 day); \$0
<i>sronyx tab</i>	QL (1 tab every 1 day); \$0
<i>vienva tab 0.1-20</i>	QL (1 tab every 1 day); \$0
<i>altavera tab</i>	QL (1 tab every 1 day); \$0
<i>ayuna tab</i>	QL (1 tab every 1 day); \$0
<i>chateal eq tab 0.15/30</i>	QL (1 tab every 1 day); \$0
<i>kurvelo tab 0.15/30</i>	QL (1 tab every 1 day); \$0
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	QL (1 tab every 1 day); \$0
<i>levora-28 tab 0.15/30</i>	QL (1 tab every 1 day); \$0
<i>marlissa tab 0.15/30</i>	QL (1 tab every 1 day); \$0
<i>portia-28 tab</i>	QL (1 tab every 1 day); \$0
<i>balziva tab</i>	QL (1 tab every 1 day); \$0
<i>briellyn tab</i>	QL (1 tab every 1 day); \$0
<i>philith tab 0.4-35</i>	QL (1 tab every 1 day); \$0
<i>vyfemla tab 0.4-35</i>	QL (1 tab every 1 day); \$0
<i>necon tab 0.5/35</i>	QL (1 tab every 1 day); \$0
<i>nortrel tab 0.5/35</i>	QL (1 tab every 1 day); \$0
<i>wera tab 0.5/35</i>	QL (1 tab every 1 day); \$0
<i>alyacen tab 1/35</i>	QL (1 tab every 1 day); \$0

\$0 - Zero Dollar Copay **AGE** - Age Limit **GNDR** - Gender Edit **OTC** - Over the counter **PA** - Prior Authorization **QL** - Quantity Limits **SP** - Specialty **ST** - Step Therapy

Drug Name	Requirements/Limits
<i>dasetta tab 1/35</i>	QL (1 tab every 1 day); \$0
<i>nortrel tab 1/35</i>	QL (1 tab every 1 day); \$0
<i>nylia tab 1/35</i>	QL (1 tab every 1 day); \$0
<i>aurovela tab 1/20</i>	QL (1 tab every 1 day); \$0
<i>junel 1/20 tab</i>	QL (1 tab every 1 day); \$0
<i>larin tab 1/20</i>	QL (1 tab every 1 day); \$0
<i>loestrin tab 1/20-21</i>	QL (1 tab every 1 day); \$0
<i>microgestin tab 1/20</i>	QL (1 tab every 1 day); \$0
<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	QL (1 tab every 1 day); \$0
<i>aurovela tab 1.5/30</i>	QL (1 tab every 1 day); \$0
<i>hailey tab 1.5/30</i>	QL (1 tab every 1 day); \$0
<i>junel 1.5/30 tab</i>	QL (1 tab every 1 day); \$0
<i>larin tab 1.5/30</i>	QL (1 tab every 1 day); \$0
<i>loestrin 21 tab 1.5/30</i>	QL (1 tab every 1 day); \$0
<i>microgestin tab 1.5/30</i>	QL (1 tab every 1 day); \$0
<i>norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i>	QL (1 tab every 1 day); \$0
<i>cryselle-28 tab 28 tabs</i>	QL (1 tab every 1 day); \$0
<i>elinest tab</i>	QL (1 tab every 1 day); \$0
<i>low-ogestrel tab</i>	QL (1 tab every 1 day); \$0
<i>turqoz tab</i>	QL (1 tab every 1 day); \$0
<i>estarylla tab 0.25-35</i>	QL (1 tab every 1 day); \$0
<i>mili tab 0.25/35</i>	QL (1 tab every 1 day); \$0
<i>mono-linyah tab 0.25-35</i>	QL (1 tab every 1 day); \$0
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	QL (1 tab every 1 day); \$0
<i>nymyo tab 0.25-35</i>	QL (1 tab every 1 day); \$0
<i>sprintec 28 tab 28 day</i>	QL (1 tab every 1 day); \$0
<i>vylibra tab 0.25-35</i>	QL (1 tab every 1 day); \$0
<i>aurovela fe tab 1/20</i>	QL (1 tab every 1 day); \$0
<i>blisovi fe tab 1/20</i>	QL (1 tab every 1 day); \$0
<i>hailey fe tab 1/20</i>	QL (1 tab every 1 day); \$0
<i>junel fe tab 1/20</i>	QL (1 tab every 1 day); \$0
<i>larin fe tab 1/20</i>	QL (1 tab every 1 day); \$0
<i>loestrin fe tab 1/20</i>	QL (1 tab every 1 day); \$0
<i>microgestin tab fe 1/20</i>	QL (1 tab every 1 day); \$0
<i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	QL (1 tab every 1 day); \$0
<i>tarina fe tab 1/20 eq</i>	QL (1 tab every 1 day); \$0
<i>aurovela fe tab 1.5/30</i>	QL (1 tab every 1 day); \$0
<i>blisovi fe tab 1.5/30</i>	QL (1 tab every 1 day); \$0
<i>hailey fe tab 1.5/30</i>	QL (1 tab every 1 day); \$0
<i>junel fe tab 1.5/30</i>	QL (1 tab every 1 day); \$0
<i>larin fe tab 1.5/30</i>	QL (1 tab every 1 day); \$0
<i>loestrin fe tab 1.5/30</i>	QL (1 tab every 1 day); \$0

Drug Name	Requirements/Limits
<i>microgestin tab fe1.5/30</i>	QL (1 tab every 1 day); \$0
<i>norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i>	QL (1 tab every 1 day); \$0
<i>azurette tab</i>	QL (1 tab every 1 day); \$0
<i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	QL (1 tab every 1 day); \$0
<i>kariva tab 28 day</i>	QL (1 tab every 1 day); \$0
<i>pimtreea tab</i>	QL (1 tab every 1 day); \$0
<i>simliya tab 28 day</i>	QL (1 tab every 1 day); \$0
<i>viorele tab</i>	QL (1 tab every 1 day); \$0
<i>volnea tab</i>	QL (1 tab every 1 day); \$0
<i>velivet pak</i>	QL (1 tab every 1 day); \$0
<i>enpresse-28 tab</i>	QL (1 tab every 1 day); \$0
<i>levonest tab</i>	QL (1 tab every 1 day); \$0
<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	QL (1 tab every 1 day); \$0
<i>trivora-28 tab</i>	QL (1 tab every 1 day); \$0
<i>alyacen tab 7/7/7</i>	QL (1 tab every 1 day); \$0
<i>dasetta tab 7/7/7</i>	QL (1 tab every 1 day); \$0
<i>nortrel tab 7/7/7</i>	QL (1 tab every 1 day); \$0
<i>nylia tab 7/7/7</i>	QL (1 tab every 1 day); \$0
<i>aranelle tab</i>	QL (1 tab every 1 day); \$0
<i>leena tab</i>	QL (1 tab every 1 day); \$0
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	QL (1 tab every 1 day); \$0
<i>tri-lo tab estaryll</i>	QL (1 tab every 1 day); \$0
<i>tri-lo- tab marzia</i>	QL (1 tab every 1 day); \$0
<i>tri-lo- tab sprintec</i>	QL (1 tab every 1 day); \$0
<i>tri-lo-mili tab</i>	QL (1 tab every 1 day); \$0
<i>tri-vylibra tab lo</i>	QL (1 tab every 1 day); \$0
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	QL (1 tab every 1 day); \$0
<i>tri-estaryll tab</i>	QL (1 tab every 1 day); \$0
<i>tri-linyah tab</i>	QL (1 tab every 1 day); \$0
<i>tri-mili tab</i>	QL (1 tab every 1 day); \$0
<i>tri-nymyo tab</i>	QL (1 tab every 1 day); \$0
<i>tri-sprintec tab</i>	QL (1 tab every 1 day); \$0
<i>tri-vylibra tab</i>	QL (1 tab every 1 day); \$0
<i>ashlyna tab</i>	QL (1 tab every 1 day); \$0
<i>camrese tab</i>	QL (1 tab every 1 day); \$0
<i>daysee tab</i>	QL (1 tab every 1 day); \$0
<i>jaimiess tab</i>	QL (1 tab every 1 day); \$0

Drug Name	Requirements/Limits
<i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	QL (1 tab every 1 day); \$0
<i>simpesse tab</i>	QL (1 tab every 1 day); \$0

PROGESTINS

PROGESTINS

<i>medroxyprogesterone acetate tab 2.5 mg</i>	
<i>medroxyprogesterone acetate tab 5 mg</i>	
<i>medroxyprogesterone acetate tab 10 mg</i>	
<i>norethindrone acetate tab 5 mg</i>	
<i>progesterone cap 100 mg</i>	
<i>progesterone cap 200 mg</i>	

ANTIDIABETICS

INSULIN

BASAGLAR INJ 100UNIT	
SEMGLEE INJ 100U/ML	
SEMGLEE SOL 100U/ML	
SEMGLEE INJ 100U/ML	
ADMELOG INJ 100U/ML	
ADMELOG SOLO INJ 100U/ML	
HUMULIN R INJ U-100	OTC
NOVOLIN R INJ U-100	OTC
HUMULIN R INJ U-500	
NOVOLIN R INJ 100 UNIT	OTC
HUMULIN R INJ U-500	
HUMULIN N INJ U-100	OTC
NOVOLIN N INJ U-100	OTC
HUMULIN N INJ U-100KWP	OTC
NOVOLIN N INJ 100 UNIT	OTC
INSULIN ASPA INJ 70/30	
INS ASP PROT INJ FLEXPEN	
HUMALOG MIX SUS 75/25	
HUMALOG MIX INJ 50/50	
INSULIN LISP INJ PROTAMIN	
HUMALOG MIX INJ 50/50KWP	
HUMULIN INJ 70/30	OTC
NOVOLIN INJ 70/30	OTC
HUMULIN INJ 70/30KWP	OTC
NOVOLIN INJ 70/30 FP	OTC

INCRETIN MIMETIC AGENTS

TRULICITY INJ 0.75/0.5	PA, QL (4 pens every 21 days)
TRULICITY INJ 1.5/0.5	PA, QL (4 pens every 21 days)
TRULICITY INJ 3/0.5	PA, QL (4 pens every 21 days)

Drug Name	Requirements/Limits
TRULICITY INJ 4.5/0.5	PA, QL (4 pens every 21 days)
RYBELSUS TAB 3MG	PA, QL (30 tabs every 25 days)
RYBELSUS TAB 7MG	PA, QL (30 tabs every 25 days)
RYBELSUS TAB 14MG	PA, QL (30 tabs every 25 days)
OZEMPIC INJ 2MG/3ML	PA, QL (1 pen every 21 days)
OZEMPIC INJ 4MG/3ML	PA, QL (1 pen every 21 days)
OZEMPIC INJ 8MG/3ML	PA, QL (1 pen every 21 days)

SULFONYLUREAS

glimepiride tab 1 mg

glimepiride tab 2 mg

glimepiride tab 4 mg

glipizide tab 5 mg

glipizide tab 10 mg

glipizide tab er 24hr 2.5 mg

glipizide xl tab 2.5mg

glipizide tab er 24hr 5 mg

glipizide xl tab 5mg

glipizide tab er 24hr 10 mg

glipizide xl tab 10mg

BIGUANIDES

metformin hcl tab 500 mg

metformin hcl tab 850 mg

metformin hcl tab 1000 mg

metformin hcl tab er 24hr 500 mg

metformin hcl tab er 24hr 750 mg

MEGLITINIDE ANALOGUES

nateglinide tab 60 mg

nateglinide tab 120 mg

repaglinide tab 0.5 mg

repaglinide tab 1 mg

repaglinide tab 2 mg

DIABETIC OTHER

BAQSIMI ONE POW 3MG/DOSE

QL (2 actuations every 30 days)

BAQSIMI TWO POW 3MG/DOSE

QL (2 actuations every 30 days)

GVOKE HYPO 1 INJ .5/.1ML

QL (2 syringes every 30 days)

GVOKE HYPO 2 INJ .5/.1ML

QL (2 syringes every 30 days)

GVOKE HYPO 1 INJ 1MG/.2ML

QL (2 syringes every 30 days)

GVOKE HYPO 2 INJ 1MG/.2ML

QL (2 syringes every 30 days)

GVOKE PFS INJ

QL (2 syringes every 30 days)

glucagon (rdna) for inj kit 1 mg

QL (2 kits every 30 days)

Drug Name	Requirements/Limits
ALPHA-GLUCOSIDASE INHIBITORS	
<i>acarbose tab 25 mg</i>	
<i>acarbose tab 50 mg</i>	
<i>acarbose tab 100 mg</i>	
DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS	
<i>alogliptin benzoate tab 6.25 mg (base equiv)</i>	
<i>alogliptin benzoate tab 12.5 mg (base equiv)</i>	
<i>alogliptin benzoate tab 25 mg (base equiv)</i>	
INSULIN SENSITIZING AGENTS	
<i>pioglitazone hcl tab 15 mg (base equiv)</i>	
<i>pioglitazone hcl tab 30 mg (base equiv)</i>	
<i>pioglitazone hcl tab 45 mg (base equiv)</i>	
SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS	
JARDIANCE TAB 10MG	ST
JARDIANCE TAB 25MG	ST
STEGLATRO TAB 5MG	ST
STEGLATRO TAB 15MG	ST
ANTIDIABETIC COMBINATIONS	
XULTOPHY INJ 100/3.6	ST
SOLIQUA INJ 100/33	ST
<i>alogliptin-metformin hcl tab 12.5-500 mg</i>	
<i>alogliptin-metformin hcl tab 12.5-1000 mg</i>	
<i>alogliptin-pioglitazone tab 12.5-30 mg</i>	
<i>alogliptin-pioglitazone tab 25-15 mg</i>	
<i>alogliptin-pioglitazone tab 25-30 mg</i>	
<i>alogliptin-pioglitazone tab 25-45 mg</i>	
SEGLUROMET TAB 2.5-500	ST
SEGLUROMET TAB 2.5-1000	ST
SEGLUROMET TAB 7.5-500	ST
SEGLUROMET TAB 7.5-1000	ST
<i>glipizide-metformin hcl tab 2.5-250 mg</i>	
<i>glipizide-metformin hcl tab 2.5-500 mg</i>	
<i>glipizide-metformin hcl tab 5-500 mg</i>	
<i>pioglitazone hcl-glimepiride tab 30-2 mg</i>	
<i>pioglitazone hcl-glimepiride tab 30-4 mg</i>	
<i>pioglitazone hcl-metformin hcl tab 15-500 mg</i>	
<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i>	
THYROID AGENTS	
THYROID HORMONES	
<i>euthyrox tab 25mcg</i>	
<i>levo-t tab 25mcg</i>	
<i>levothyroxine sodium tab 25 mcg</i>	

Drug Name	Requirements/Limits
<i>levoxyl tab 25mcg</i>	
<i>unithroid tab 25mcg</i>	
<i>euthyrox tab 50mcg</i>	
<i>levo-t tab 50mcg</i>	
<i>levothyroxine sodium tab 50 mcg</i>	
<i>levoxyl tab 50mcg</i>	
<i>unithroid tab 50mcg</i>	
<i>euthyrox tab 75mcg</i>	
<i>levo-t tab 75mcg</i>	
<i>levothyroxine sodium tab 75 mcg</i>	
<i>levoxyl tab 75mcg</i>	
<i>unithroid tab 75mcg</i>	
<i>euthyrox tab 88mcg</i>	
<i>levo-t tab 88mcg</i>	
<i>levothyroxine sodium tab 88 mcg</i>	
<i>levoxyl tab 88mcg</i>	
<i>unithroid tab 88mcg</i>	
<i>euthyrox tab 100mcg</i>	
<i>levo-t tab 100mcg</i>	
<i>levothyroxine sodium tab 100 mcg</i>	
<i>levoxyl tab 100mcg</i>	
<i>unithroid tab 100mcg</i>	
<i>euthyrox tab 112mcg</i>	
<i>levo-t tab 112mcg</i>	
<i>levothyroxine sodium tab 112 mcg</i>	
<i>levoxyl tab 112mcg</i>	
<i>unithroid tab 112mcg</i>	
<i>euthyrox tab 125mcg</i>	
<i>levo-t tab 125mcg</i>	
<i>levothyroxine sodium tab 125 mcg</i>	
<i>levoxyl tab 125mcg</i>	
<i>unithroid tab 125mcg</i>	
<i>euthyrox tab 137mcg</i>	
<i>levo-t tab 137mcg</i>	
<i>levothyroxine sodium tab 137 mcg</i>	
<i>levoxyl tab 137mcg</i>	
<i>unithroid tab 137mcg</i>	
<i>euthyrox tab 150mcg</i>	
<i>levo-t tab 150mcg</i>	
<i>levothyroxine sodium tab 150 mcg</i>	
<i>levoxyl tab 150mcg</i>	
<i>unithroid tab 150mcg</i>	
<i>euthyrox tab 175mcg</i>	

Drug Name	Requirements/Limits
<i>levo-t tab 175mcg</i>	
<i>levothyroxine sodium tab 175 mcg</i>	
<i>levoxyl tab 175mcg</i>	
<i>unithroid tab 175mcg</i>	
<i>euthyrox tab 200mcg</i>	
<i>levo-t tab 200mcg</i>	
<i>levothyroxine sodium tab 200 mcg</i>	
<i>levoxyl tab 200mcg</i>	
<i>unithroid tab 200mcg</i>	
<i>levo-t tab 300 mcg</i>	
<i>levothyroxine sodium tab 300 mcg</i>	
<i>unithroid tab 300mcg</i>	
<i>liothyronine sodium tab 5 mcg</i>	
<i>liothyronine sodium tab 25 mcg</i>	
<i>liothyronine sodium tab 50 mcg</i>	

ANTITHYROID AGENTS

<i>methimazole tab 5 mg</i>	
<i>methimazole tab 10 mg</i>	
<i>propylthiouracil tab 50 mg</i>	

ENDOCRINE AND METABOLIC AGENTS - MISC.

BONE DENSITY REGULATORS

<i>alendronate sodium tab 5 mg</i>	
<i>alendronate sodium tab 10 mg</i>	
<i>alendronate sodium tab 35 mg</i>	
<i>alendronate sodium tab 70 mg</i>	
<i>calcitonin (salmon) nasal soln 200 unit/act</i>	
TYMLOS INJ	SP, PA, QL (1 pen every 30 days)
TERIPARATIDE INJ 620/2.48	SP, PA, QL (1 pen every 28 days)
PROLIA INJ 60MG/ML	SP, PA, QL (1 syringe every 180 days)

HORMONE RECEPTOR MODULATORS

OSPHENA TAB 60MG	PA
<i>raloxifene hcl tab 60 mg</i>	

LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS

SYNAREL SOL 2MG/ML	
TRIPTODUR SUS 22.5MG	SP, PA

GROWTH HORMONES

NORDITROPIN INJ 5/1.5ML	SP, PA
NORDITROPIN INJ 10/1.5ML	SP, PA
NORDITROPIN INJ 15/1.5ML	SP, PA

Drug Name	Requirements/Limits
NORDITROPIN INJ 30/3ML	SP, PA
HUMATROPE INJ 6MG	SP, PA
HUMATROPE INJ 12MG	SP, PA
HUMATROPE INJ 24MG	SP, PA
SEROSTIM INJ 4MG	SP, PA
SEROSTIM INJ 5MG	SP, PA
SEROSTIM INJ 6MG	SP, PA

SOMATOSTATIC AGENTS

SOMATULINE INJ 60/0.2ML	SP, PA, QL (1 syringe every 28 days)
SOMATULINE INJ 90/0.3ML	SP, PA, QL (1 syringe every 28 days)
LANREOTIDE INJ 120/.5ML	SP, PA, QL (1 syringe every 28 days)
SOMATULINE INJ 120/.5ML	SP, PA, QL (1 syringe every 28 days)
<i>octreotide acetate inj 50 mcg/ml (0.05 mg/ml)</i>	SP, PA, QL (3 vials every 1 day)
<i>octreotide acetate inj 100 mcg/ml (0.1 mg/ml)</i>	SP, PA, QL (3 vials every 1 day)
<i>octreotide acetate inj 200 mcg/ml (0.2 mg/ml)</i>	SP, PA, QL (45 vials every 30 days)
<i>octreotide acetate inj 500 mcg/ml (0.5 mg/ml)</i>	SP, PA, QL (3 vials every 1 day)
<i>octreotide acetate inj 1000 mcg/ml (1 mg/ml)</i>	SP, PA, QL (9 vials every 30 days)
<i>octreotide acetate subcutaneous soln pref syr 50 mcg/ml</i>	SP, PA, QL (3 syringes every 1 day)
<i>octreotide acetate subcutaneous soln pref syr 100 mcg/ml</i>	SP, PA, QL (3 syringes every 1 day)
<i>octreotide acetate subcutaneous soln pref syr 500 mcg/ml</i>	SP, PA, QL (3 syringes every 1 day)

POSTERIOR PITUITARY HORMONES

<i>desmopressin acetate tab 0.1 mg</i>	
<i>desmopressin acetate tab 0.2 mg</i>	
<i>desmopressin acetate nasal spray soln 0.01% (refrigerated)</i>	
<i>desmopressin acetate nasal spray soln 0.01%</i>	

CORTICOTROPIN

ACTHAR INJ 80UNIT	SP, PA, QL (35 mL every 21 days)
CORTROPHIN GEL 80UNIT	SP, PA, QL (35 mL every 21 days)

MINERALOCORTICOID RECEPTOR ANTAGONISTS

KERENDIA TAB 10MG	PA
KERENDIA TAB 20MG	PA

Drug Name	Requirements/Limits
PROLACTIN INHIBITORS	
<i>cabergoline tab 0.5 mg</i>	
VASOPRESSIN RECEPTOR ANTAGONISTS	
<i>tolvaptan tab 15 mg</i>	SP, PA
METABOLIC MODIFIERS	
<i>calcitriol cap 0.25 mcg</i>	
<i>calcitriol cap 0.5 mcg</i>	
<i>calcitriol oral soln 1 mcg/ml</i>	
<i>doxercalciferol cap 0.5 mcg</i>	
<i>doxercalciferol cap 1 mcg</i>	
<i>doxercalciferol cap 2.5 mcg</i>	
<i>paricalcitol cap 1 mcg</i>	
<i>paricalcitol cap 2 mcg</i>	
<i>paricalcitol cap 4 mcg</i>	
<i>cinacalcet hcl tab 30 mg (base equiv)</i>	SP, PA, QL (2 tabs every 1 day)
<i>cinacalcet hcl tab 60 mg (base equiv)</i>	SP, PA, QL (2 tabs every 1 day)
<i>cinacalcet hcl tab 90 mg (base equiv)</i>	SP, PA, QL (4 tabs every 1 day)
<i>javygtor tab 100mg</i>	SP, PA
<i>sapropterin dihydrochloride tab 100 mg</i>	SP, PA
<i>javygtor pak 100mg</i>	SP, PA
<i>sapropterin dihydrochloride powder packet 100 mg</i>	SP, PA
<i>javygtor pow 500mg</i>	SP, PA
<i>sapropterin dihydrochloride powder packet 500 mg</i>	SP, PA
CARDIOTONICS	
CARDIAC GLYCOSIDES	
<i>digoxin tab 62.5 mcg (0.0625 mg)</i>	
<i>digoxin tab 125 mcg (0.125 mg)</i>	
<i>digoxin tab 250 mcg (0.25 mg)</i>	
<i>digoxin oral soln 0.05 mg/ml</i>	
ANTIANGINAL AGENTS	
NITRATES	
<i>isosorbide dinitrate tab 5 mg</i>	
<i>isosorbide dinitrate tab 10 mg</i>	
<i>isosorbide dinitrate tab 20 mg</i>	
<i>isosorbide dinitrate tab 30 mg</i>	
<i>isosorbide dinitrate tab 40 mg</i>	
<i>isosorbide mononitrate tab 10 mg</i>	
<i>isosorbide mononitrate tab 20 mg</i>	
<i>isosorbide mononitrate tab er 24hr 30 mg</i>	
<i>isosorbide mononitrate tab er 24hr 60 mg</i>	
<i>isosorbide mononitrate tab er 24hr 120 mg</i>	
<i>nitro-time cap 2.5mg cr</i>	

Drug Name	Requirements/Limits
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<i>nitro-time cap 6.5mg cr</i>
<i>nitro-time cap 9mg cr</i>
<i>nitroglycerin sl tab 0.3 mg</i>
<i>nitroglycerin sl tab 0.4 mg</i>
<i>nitroglycerin sl tab 0.6 mg</i>
NITRO-BID OIN 2%
<i>nitroglycerin td patch 24hr 0.1 mg/hr</i>
<i>nitroglycerin td patch 24hr 0.2 mg/hr</i>
NITRO-DUR DIS 0.3MG/HR
<i>nitroglycerin td patch 24hr 0.4 mg/hr</i>
<i>nitroglycerin td patch 24hr 0.6 mg/hr</i>
NITRO-DUR DIS 0.8MG/HR

BETA BLOCKERS

BETA BLOCKERS NON-SELECTIVE

<i>nadolol tab 20 mg</i>
<i>nadolol tab 40 mg</i>
<i>nadolol tab 80 mg</i>
<i>pindolol tab 5 mg</i>
<i>pindolol tab 10 mg</i>
<i>propranolol hcl tab 10 mg</i>
<i>propranolol hcl tab 20 mg</i>
<i>propranolol hcl tab 40 mg</i>
<i>propranolol hcl tab 60 mg</i>
<i>propranolol hcl tab 80 mg</i>
<i>propranolol hcl oral soln 20 mg/5ml</i>
<i>propranolol hcl oral soln 40 mg/5ml</i>
<i>propranolol hcl cap er 24hr 60 mg</i>
<i>propranolol hcl cap er 24hr 80 mg</i>
<i>propranolol hcl cap er 24hr 120 mg</i>
<i>propranolol hcl cap er 24hr 160 mg</i>
<i>sotalol hcl tab 80 mg</i>
<i>sotalol hcl tab 120 mg</i>
<i>sotalol hcl tab 160 mg</i>
<i>sotalol hcl tab 240 mg</i>
<i>sotalol hcl (afib/afl) tab 80 mg</i>
<i>sotalol hcl (afib/afl) tab 120 mg</i>
<i>sotalol hcl (afib/afl) tab 160 mg</i>
<i>timolol maleate tab 5 mg</i>
<i>timolol maleate tab 10 mg</i>
<i>timolol maleate tab 20 mg</i>

BETA BLOCKERS CARDIO-SELECTIVE

<i>acebutolol hcl cap 200 mg</i>

Drug Name	Requirements/Limits
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<i>acebutolol hcl cap 400 mg</i>	
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<i>atenolol tab 25 mg</i>	
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<i>atenolol tab 50 mg</i>	
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<i>atenolol tab 100 mg</i>	
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<i>bisoprolol fumarate tab 5 mg</i>	
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<i>bisoprolol fumarate tab 10 mg</i>	
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<i>metoprolol succinate tab er 24hr 25 mg (tartrate equiv)</i>	
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<i>metoprolol succinate tab er 24hr 50 mg (tartrate equiv)</i>	
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<i>metoprolol succinate tab er 24hr 100 mg (tartrate equiv)</i>	
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<i>metoprolol succinate tab er 24hr 200 mg (tartrate equiv)</i>	
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<i>metoprolol tartrate tab 25 mg</i>	
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<i>metoprolol tartrate tab 50 mg</i>	
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<i>metoprolol tartrate tab 100 mg</i>	
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ALPHA-BETA BLOCKERS

<i>carvedilol tab 3.125 mg</i>	
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<i>carvedilol tab 6.25 mg</i>	
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<i>carvedilol tab 12.5 mg</i>	
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<i>carvedilol tab 25 mg</i>	
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<i>labetalol hcl tab 100 mg</i>	
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<i>labetalol hcl tab 200 mg</i>	
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<i>labetalol hcl tab 300 mg</i>	
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CALCIUM CHANNEL BLOCKERS

CALCIUM CHANNEL BLOCKERS

<i>amlodipine besylate tab 2.5 mg (base equivalent)</i>	
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<i>amlodipine besylate tab 5 mg (base equivalent)</i>	
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<i>amlodipine besylate tab 10 mg (base equivalent)</i>	
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<i>diltiazem hcl tab 30 mg</i>	
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<i>diltiazem hcl tab 60 mg</i>	
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<i>diltiazem hcl tab 90 mg</i>	
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<i>diltiazem hcl tab 120 mg</i>	
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<i>diltiazem hcl cap er 12hr 60 mg</i>	
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<i>diltiazem hcl cap er 12hr 90 mg</i>	
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<i>diltiazem hcl cap er 12hr 120 mg</i>	
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<i>dilt-xr cap 120mg</i>	
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<i>diltiazem hcl cap er 24hr 120 mg</i>	
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<i>dilt-xr cap 180mg</i>	
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<i>diltiazem hcl cap er 24hr 180 mg</i>	
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<i>dilt-xr cap 240mg</i>	
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<i>diltiazem hcl cap er 24hr 240 mg</i>	
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<i>diltiazem hcl tab er 24hr 180 mg</i>	
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<i>matzim la tab 180mg/24</i>	
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<i>diltiazem hcl tab er 24hr 240 mg</i>	
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Drug Name	Requirements/Limits
<i>matzim la tab 240mg/24</i>	
<i>diltiazem hcl tab er 24hr 300 mg</i>	
<i>matzim la tab 300mg/24</i>	
<i>diltiazem hcl tab er 24hr 360 mg</i>	
<i>matzim la tab 360mg/24</i>	
<i>diltiazem hcl tab er 24hr 420 mg</i>	
<i>matzim la tab 420mg/24</i>	
<i>diltiazem hcl extended release beads cap er 24hr 120 mg</i>	
<i>taztia xt cap 120mg/24</i>	
<i>tiadytl cap 120mg/24</i>	
<i>diltiazem hcl extended release beads cap er 24hr 180 mg</i>	
<i>taztia xt cap 180mg/24</i>	
<i>tiadytl cap 180mg/24</i>	
<i>diltiazem hcl extended release beads cap er 24hr 240 mg</i>	
<i>taztia xt cap 240mg/24</i>	
<i>tiadytl cap 240mg/24</i>	
<i>diltiazem hcl extended release beads cap er 24hr 300 mg</i>	
<i>taztia xt cap 300mg er</i>	
<i>tiadytl cap 300mg/24</i>	
<i>diltiazem hcl extended release beads cap er 24hr 360 mg</i>	
<i>taztia xt cap 360mg/24</i>	
<i>tiadytl cap 360mg/24</i>	
<i>diltiazem hcl extended release beads cap er 24hr 420 mg</i>	
<i>tiadytl cap 420mg/24</i>	
<i>cartia xt cap 120/24hr</i>	
<i>diltiazem hcl coated beads cap er 24hr 120 mg</i>	
<i>cartia xt cap 180/24hr</i>	
<i>diltiazem hcl coated beads cap er 24hr 180 mg</i>	
<i>cartia xt cap 240/24hr</i>	
<i>diltiazem hcl coated beads cap er 24hr 240 mg</i>	
<i>cartia xt cap 300/24hr</i>	
<i>diltiazem hcl coated beads cap er 24hr 300 mg</i>	
<i>diltiazem hcl coated beads cap er 24hr 360 mg</i>	
<i>felodipine tab er 24hr 2.5 mg</i>	
<i>felodipine tab er 24hr 5 mg</i>	
<i>felodipine tab er 24hr 10 mg</i>	
<i>nifedipine tab er 24hr 30 mg</i>	

Drug Name	Requirements/Limits
<i>nifedipine tab er 24hr 60 mg</i>	
<i>nifedipine tab er 24hr 90 mg</i>	
<i>nifedipine tab er 24hr osmotic release 30 mg</i>	
<i>nifedipine tab er 24hr osmotic release 60 mg</i>	
<i>nifedipine tab er 24hr osmotic release 90 mg</i>	
<i>verapamil hcl tab er 120 mg</i>	
<i>verapamil hcl tab er 180 mg</i>	
<i>verapamil hcl tab er 240 mg</i>	
<i>verapamil hcl cap er 24hr 100 mg</i>	
<i>verapamil hcl cap er 24hr 200 mg</i>	
<i>verapamil hcl cap er 24hr 300 mg</i>	

ANTIARRHYTHMICS

ANTIARRHYTHMICS TYPE I-A

<i>disopyramide phosphate cap 100 mg</i>	
<i>disopyramide phosphate cap 150 mg</i>	
NORPACE CAP 100MG CR	
NORPACE CAP 150MG CR	

ANTIARRHYTHMICS TYPE I-C

<i>flecainide acetate tab 50 mg</i>	
<i>flecainide acetate tab 100 mg</i>	
<i>flecainide acetate tab 150 mg</i>	
<i>propafenone hcl tab 150 mg</i>	
<i>propafenone hcl tab 225 mg</i>	
<i>propafenone hcl tab 300 mg</i>	
<i>propafenone hcl cap er 12hr 225 mg</i>	
<i>propafenone hcl cap er 12hr 325 mg</i>	
<i>propafenone hcl cap er 12hr 425 mg</i>	

ANTIARRHYTHMICS TYPE III

<i>amiodarone hcl tab 200 mg</i>	
<i>pacerone tab 200mg</i>	
<i>dofetilide cap 125 mcg (0.125 mg)</i>	SP, PA
<i>dofetilide cap 250 mcg (0.25 mg)</i>	SP, PA
<i>dofetilide cap 500 mcg (0.5 mg)</i>	SP, PA

ANTIHYPERTENSIVES

ACE INHIBITORS

<i>benazepril hcl tab 5 mg</i>	
<i>benazepril hcl tab 10 mg</i>	
<i>benazepril hcl tab 20 mg</i>	
<i>benazepril hcl tab 40 mg</i>	
<i>captopril tab 12.5 mg</i>	
<i>captopril tab 25 mg</i>	
<i>captopril tab 50 mg</i>	

Drug Name	Requirements/Limits
<i>captopril tab 100 mg</i>	
<i>enalapril maleate tab 2.5 mg</i>	
<i>enalapril maleate tab 5 mg</i>	
<i>enalapril maleate tab 10 mg</i>	
<i>enalapril maleate tab 20 mg</i>	
<i>fosinopril sodium tab 10 mg</i>	
<i>fosinopril sodium tab 20 mg</i>	
<i>fosinopril sodium tab 40 mg</i>	
<i>lisinopril tab 2.5 mg</i>	
<i>lisinopril tab 5 mg</i>	
<i>lisinopril tab 10 mg</i>	
<i>lisinopril tab 20 mg</i>	
<i>lisinopril tab 30 mg</i>	
<i>lisinopril tab 40 mg</i>	
<i>quinapril hcl tab 5 mg</i>	
<i>quinapril hcl tab 10 mg</i>	
<i>quinapril hcl tab 20 mg</i>	
<i>quinapril hcl tab 40 mg</i>	
<i>ramipril cap 1.25 mg</i>	
<i>ramipril cap 2.5 mg</i>	
<i>ramipril cap 5 mg</i>	
<i>ramipril cap 10 mg</i>	
<i>trandolapril tab 1 mg</i>	
<i>trandolapril tab 2 mg</i>	
<i>trandolapril tab 4 mg</i>	
ANGIOTENSIN II RECEPTOR ANTAGONISTS	
<i>irbesartan tab 75 mg</i>	
<i>irbesartan tab 150 mg</i>	
<i>irbesartan tab 300 mg</i>	
<i>losartan potassium tab 25 mg</i>	
<i>losartan potassium tab 50 mg</i>	
<i>losartan potassium tab 100 mg</i>	
<i>valsartan tab 40 mg</i>	
<i>valsartan tab 80 mg</i>	
<i>valsartan tab 160 mg</i>	
<i>valsartan tab 320 mg</i>	
ANTIADRENERGIC ANTIHYPERTENSIVES	
<i>clonidine td patch weekly 0.1 mg/24hr</i>	
<i>clonidine td patch weekly 0.2 mg/24hr</i>	
<i>clonidine td patch weekly 0.3 mg/24hr</i>	
<i>clonidine hcl tab 0.1 mg</i>	
<i>clonidine hcl tab 0.2 mg</i>	

Drug Name	Requirements/Limits
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<i>clonidine hcl tab 0.3 mg</i>	
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<i>guanfacine hcl tab 1 mg</i>	
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<i>guanfacine hcl tab 2 mg</i>	
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<i>doxazosin mesylate tab 1 mg</i>	
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<i>doxazosin mesylate tab 2 mg</i>	
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<i>doxazosin mesylate tab 4 mg</i>	
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<i>doxazosin mesylate tab 8 mg</i>	
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<i>prazosin hcl cap 1 mg</i>	
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<i>prazosin hcl cap 2 mg</i>	
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<i>prazosin hcl cap 5 mg</i>	
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<i>terazosin hcl cap 1 mg (base equivalent)</i>	
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<i>terazosin hcl cap 2 mg (base equivalent)</i>	
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<i>terazosin hcl cap 5 mg (base equivalent)</i>	
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<i>terazosin hcl cap 10 mg (base equivalent)</i>	
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SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS)

<i>eplerenone tab 25 mg</i>	
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<i>eplerenone tab 50 mg</i>	
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VASODILATORS

<i>hydralazine hcl tab 10 mg</i>	
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<i>hydralazine hcl tab 25 mg</i>	
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<i>hydralazine hcl tab 50 mg</i>	
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<i>hydralazine hcl tab 100 mg</i>	
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ANTIHYPERTENSIVE COMBINATIONS

<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i>	
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<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>	
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<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	
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<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	
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<i>amlodipine besylate-benazepril hcl cap 10-20 mg</i>	
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<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	
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<i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i>	
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<i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i>	
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<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	
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<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	
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<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i>	
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<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	
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<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i>	
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<i>lisinopril & hydrochlorothiazide tab 10-12.5 mg</i>	
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<i>lisinopril & hydrochlorothiazide tab 20-12.5 mg</i>	
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<i>lisinopril & hydrochlorothiazide tab 20-25 mg</i>	
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<i>quinapril-hydrochlorothiazide tab 20-12.5 mg</i>	
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<i>quinapril-hydrochlorothiazide tab 20-25 mg</i>	
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<i>atenolol & chlorthalidone tab 50-25 mg</i>	
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Drug Name	Requirements/Limits
<i>atenolol & chlorthalidone tab 100-25 mg</i>	
<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg</i>	
<i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg</i>	
<i>bisoprolol & hydrochlorothiazide tab 10-6.25 mg</i>	
<i>metoprolol & hydrochlorothiazide tab 50-25 mg</i>	
<i>metoprolol & hydrochlorothiazide tab 100-25 mg</i>	
<i>metoprolol & hydrochlorothiazide tab 100-50 mg</i>	
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i>	
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i>	
<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	
<i>losartan potassium & hydrochlorothiazide tab 100-12.5 mg</i>	
<i>losartan potassium & hydrochlorothiazide tab 100-25 mg</i>	
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>	
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i>	
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i>	
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i>	
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i>	

DIURETICS

CARBONIC ANHYDRASE INHIBITORS

<i>acetazolamide tab 125 mg</i>
<i>acetazolamide tab 250 mg</i>
<i>acetazolamide cap er 12hr 500 mg</i>
<i>methazolamide tab 25 mg</i>
<i>methazolamide tab 50 mg</i>

LOOP DIURETICS

<i>bumetanide tab 0.5 mg</i>
<i>bumetanide tab 1 mg</i>
<i>bumetanide tab 2 mg</i>
<i>ethacrynic acid tab 25 mg</i>
<i>furosemide tab 20 mg</i>
<i>furosemide tab 40 mg</i>
<i>furosemide tab 80 mg</i>
<i>furosemide oral soln 8 mg/ml</i>
<i>furosemide oral soln 10 mg/ml</i>
<i>toremide tab 5 mg</i>
<i>toremide tab 10 mg</i>
<i>toremide tab 20 mg</i>
<i>toremide tab 100 mg</i>

Drug Name	Requirements/Limits
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POTASSIUM SPARING DIURETICS

<i>amiloride hcl tab 5 mg</i>	
<i>spironolactone tab 25 mg</i>	
<i>spironolactone tab 50 mg</i>	
<i>spironolactone tab 100 mg</i>	

THIAZIDES AND THIAZIDE-LIKE DIURETICS

<i>chlorthalidone tab 25 mg</i>	
<i>chlorthalidone tab 50 mg</i>	
<i>hydrochlorothiazide cap 12.5 mg</i>	
<i>hydrochlorothiazide tab 12.5 mg</i>	
<i>hydrochlorothiazide tab 25 mg</i>	
<i>hydrochlorothiazide tab 50 mg</i>	
<i>indapamide tab 1.25 mg</i>	
<i>indapamide tab 2.5 mg</i>	
<i>metolazone tab 2.5 mg</i>	
<i>metolazone tab 5 mg</i>	
<i>metolazone tab 10 mg</i>	

DIURETIC COMBINATIONS

<i>amiloride & hydrochlorothiazide tab 5-50 mg</i>	
<i>spironolactone & hydrochlorothiazide tab 25-25 mg</i>	
<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	
<i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i>	
<i>triamterene & hydrochlorothiazide tab 75-50 mg</i>	

VASOPRESSORS

VASOPRESSORS

<i>midodrine hcl tab 2.5 mg</i>	
<i>midodrine hcl tab 5 mg</i>	
<i>midodrine hcl tab 10 mg</i>	

ANAPHYLAXIS THERAPY AGENTS

<i>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)</i>	QL (8 pens every year)
<i>epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000)</i>	QL (8 pens every year)
<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i>	QL (8 pens every year)
<i>EPIPEN 2-PAK INJ 0.3MG</i>	QL (8 pens every year)

ANTIHYPERLIPIDEMICS

BILE ACID SEQUESTRANTS

<i>cholestyramine powder 4 gm/dose</i>	
<i>cholestyramine powder packets 4 gm</i>	
<i>cholestyramine light powder 4 gm/dose</i>	
<i>prevalite pow 4gm</i>	
<i>cholestyramine light powder packets 4 gm</i>	

Drug Name	Requirements/Limits
<i>prevalite pow 4gm pk</i>	
<i>colestipol hcl tab 1 gm</i>	
<i>colestipol hcl granules 5 gm</i>	
<i>colestipol hcl granule packets 5 gm</i>	

FIBRIC ACID DERIVATIVES

<i>fenofibrate tab 48 mg</i>	
<i>fenofibrate tab 54 mg</i>	
<i>fenofibrate tab 145 mg</i>	
<i>fenofibrate tab 160 mg</i>	
<i>fenofibrate micronized cap 67 mg</i>	
<i>fenofibrate micronized cap 134 mg</i>	
<i>fenofibrate micronized cap 200 mg</i>	
<i>gemfibrozil tab 600 mg</i>	

INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS

<i>ezetimibe tab 10 mg</i>	
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PROPROTEIN CONVERTASE SUBTILISIN/KEXIN TYPE 9 INHIBITORS

PRALUENT INJ 75MG/ML	SP, PA, QL (2 pens every 28 days)
PRALUENT INJ 150MG/ML	SP, PA, QL (2 pens every 28 days)
REPATHA SURE INJ 140MG/ML	SP, PA, QL (2 pens every 28 days)
REPATHA PUSH INJ 420/3.5	SP, PA, QL (1 cartridge every 28 days)
REPATHA INJ 140MG/ML	SP, PA, QL (2 syringes every 28 days)

HMG COA REDUCTASE INHIBITORS

<i>atorvastatin calcium tab 10 mg (base equivalent)</i>	
<i>atorvastatin calcium tab 20 mg (base equivalent)</i>	
<i>atorvastatin calcium tab 40 mg (base equivalent)</i>	
<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	
<i>lovastatin tab 10 mg</i>	
<i>lovastatin tab 20 mg</i>	
<i>lovastatin tab 40 mg</i>	
<i>rosuvastatin calcium tab 5 mg</i>	
<i>rosuvastatin calcium tab 10 mg</i>	
<i>rosuvastatin calcium tab 20 mg</i>	
<i>rosuvastatin calcium tab 40 mg</i>	
<i>pravastatin sodium tab 10 mg</i>	
<i>pravastatin sodium tab 20 mg</i>	
<i>pravastatin sodium tab 40 mg</i>	
<i>pravastatin sodium tab 80 mg</i>	

Drug Name	Requirements/Limits
<i>simvastatin tab 5 mg</i>	
<i>simvastatin tab 10 mg</i>	
<i>simvastatin tab 20 mg</i>	
<i>simvastatin tab 40 mg</i>	
<i>simvastatin tab 80 mg</i>	

NICOTINIC ACID DERIVATIVES

<i>niacin tab er 500 mg (antihyperlipidemic)</i>	
<i>niacin tab er 750 mg (antihyperlipidemic)</i>	
<i>niacin tab er 1000 mg (antihyperlipidemic)</i>	

CARDIOVASCULAR AGENTS - MISC.

PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST

UPTRAVI TAB 200MCG	SP, PA, QL (5 tabs every 1 day)
UPTRAVI TAB 400MCG	SP, PA, QL (2 tabs every 1 day)
UPTRAVI TAB 600MCG	SP, PA, QL (2 tabs every 1 day)
UPTRAVI TAB 800MCG	SP, PA, QL (2 tabs every 1 day)
UPTRAVI TAB 1000MCG	SP, PA, QL (2 tabs every 1 day)
UPTRAVI TAB 1200MCG	SP, PA, QL (2 tabs every 1 day)
UPTRAVI TAB 1400MCG	SP, PA, QL (2 tabs every 1 day)
UPTRAVI TAB 1600MCG	SP, PA, QL (2 tabs every 1 day)
UPTRAVI PACK TAB 200/800	SP, PA, QL (1 pack every 28 days)

PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS

<i>sildenafil citrate tab 20 mg</i>	SP, PA, QL (12 tabs every 1 day)
<i>sildenafil citrate for suspension 10 mg/ml</i>	SP, PA, QL (26 mL every 1 day)

PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS

<i>ambrisentan tab 5 mg</i>	SP, PA, QL (1 tab every 1 day)
<i>ambrisentan tab 10 mg</i>	SP, PA, QL (1 tab every 1 day)
<i>bosentan tab 62.5 mg</i>	SP, PA, QL (2 tabs every 1 day)
<i>bosentan tab 125 mg</i>	SP, PA, QL (2 tabs every 1 day)

PROSTAGLANDIN VASODILATORS

<i>epoprostenol sodium for inj 0.5 mg</i>	SP, PA
<i>epoprostenol sodium for inj 1.5 mg</i>	SP, PA
TYVASO REFIL SOL 0.6MG/ML	SP, PA, QL (1 ampule every 1 day)
TYVASO SOL 0.6MG/ML	SP, PA, QL (1 ampule every 1 day)
TYVASO START SOL 0.6MG/ML	SP, PA, QL (1 ampule every 1 day)
REMODULIN INJ 1MG/ML	SP, PA
<i>treprostinil inj soln 20 mg/20ml (1 mg/ml)</i>	SP, PA
REMODULIN INJ 2.5MG/ML	SP, PA
<i>treprostinil inj soln 50 mg/20ml (2.5 mg/ml)</i>	SP, PA

Drug Name	Requirements/Limits
REMODULIN INJ 5MG/ML	SP, PA
<i>treprostinil inj soln 100 mg/20ml (5 mg/ml)</i>	SP, PA
REMODULIN INJ 10MG/ML	SP, PA
<i>treprostinil inj soln 200 mg/20ml (10 mg/ml)</i>	SP, PA
TYVASO DPI POW 16MCG	SP, PA, QL (4 cartridges every 1 day)
TYVASO DPI POW 32MCG	SP, PA, QL (4 cartridges every 1 day)
TYVASO DPI POW 48MCG	SP, PA, QL (4 cartridges every 1 day)
TYVASO DPI POW 64MCG	SP, PA, QL (4 cartridges every 1 day)
TYVASO DPI POW 16-32-48	SP, PA, QL (9 cartridges every 1 day)
ORENITRAM TAB 0.125MG	SP, PA
ORENITRAM TAB 0.25MG	SP, PA
ORENITRAM TAB 1MG	SP, PA
ORENITRAM TAB 2.5MG	SP, PA
ORENITRAM TAB 5MG	SP, PA
ORENITRAM TAB MONTH 1	SP, PA
ORENITRAM TAB MONTH 2	SP, PA
ORENITRAM TAB MONTH 3	SP, PA

CARDIAC MYOSIN INHIBITORS

CAMZYOS CAP 2.5MG	SP, PA, QL (1 cap every 1 day)
CAMZYOS CAP 5MG	SP, PA, QL (1 cap every 1 day)
CAMZYOS CAP 10MG	SP, PA, QL (1 cap every 1 day)
CAMZYOS CAP 15MG	SP, PA, QL (1 cap every 1 day)

SINUS NODE INHIBITORS

CORLANOR TAB 5MG	
CORLANOR TAB 7.5MG	
CORLANOR SOL 5MG/5ML	

CARDIOVASCULAR AGENTS MISC. - COMBINATIONS

ENTRESTO TAB 24-26MG	
ENTRESTO TAB 49-51MG	
ENTRESTO TAB 97-103MG	

ANTI HISTAMINES

ANTI HISTAMINES - ALKYLAMINES

<i>aller-chlor tab 4mg</i>	OTC
<i>allergy relf tab 4mg</i>	OTC
<i>allergy tab 4mg</i>	OTC
<i>chlor-phenir tab 4mg</i>	OTC
<i>chlorhist tab 4mg</i>	OTC

Drug Name	Requirements/Limits
<i>chlorphen tab 4mg</i>	OTC
<i>chlorpheniramine maleate tab 4 mg</i>	OTC
<i>eql allergy tab 4mg</i>	OTC
<i>ft alrgy rlf tab 4mg</i>	OTC
<i>gnp allergy tab 4mg</i>	OTC
<i>pharbechlor tab 4mg</i>	OTC
<i>qc allergy tab 4mg</i>	OTC
<i>ra allergy tab 4mg</i>	OTC
<i>ra chlorphen tab 4mg</i>	OTC
<i>wal-finate tab 4mg</i>	OTC
<i>allergy relf tab 12mg cr</i>	OTC
<i>chlorpheniramine maleate tab er 12 mg</i>	OTC
<i>diabet tuss syp allergy</i>	OTC
<i>ed chlorped syp jr</i>	OTC

ANTIHISTAMINES - ETHANOLAMINES

<i>DAYHIST ALRG TAB 12 HOUR</i>	OTC
<i>clemastine fumarate tab 2.68 mg</i>	
<i>aler-cap cap 25mg</i>	OTC
<i>allergy cap 25mg</i>	OTC
<i>allergy med cap 25mg</i>	OTC
<i>allergy rel cap 25mg</i>	OTC
<i>allergy relf cap 25mg</i>	OTC
<i>antihistamin cap 25mg</i>	OTC
<i>banophen cap 25mg</i>	OTC
<i>comp allergy cap 25mg</i>	OTC
<i>cvs allergy cap 25mg</i>	OTC
<i>diphenhydramine hcl cap 25 mg</i>	OTC
<i>eq allergy cap 25mg</i>	OTC
<i>ft alrgy rlf cap 25mg</i>	OTC
<i>gnp allergy cap 25mg</i>	OTC
<i>medi-phedryl cap 25mg</i>	OTC
<i>pharbedryl cap 25mg</i>	OTC
<i>qc allergy cap 25mg</i>	OTC
<i>wal-dryl cap 25mg</i>	OTC
<i>banophen cap 50mg</i>	OTC
<i>diphenhydramine hcl cap 50 mg</i>	OTC
<i>pharbedryl cap 50mg</i>	OTC
<i>a-s pls alrg tab 25mg</i>	OTC
<i>alertab tab 25mg</i>	OTC
<i>allergy relf tab 25mg</i>	OTC
<i>anti-hist tab 25mg</i>	OTC
<i>banophen tab 25mg</i>	OTC
<i>comp allergy tab 25mg</i>	OTC

Drug Name	Requirements/Limits
<i>comp allergy tab 25mg med</i>	OTC
<i>comp allergy tab 25mg rlf</i>	OTC
<i>diphen tab 25mg</i>	OTC
<i>diphenhydramine hcl tab 25 mg</i>	OTC
<i>eql allergy tab 25mg</i>	OTC
<i>ft alrgy rlf tab 25mg</i>	OTC
<i>geri-dryl tab 25mg</i>	OTC
<i>gnp allergy tab 25mg</i>	OTC
<i>kls allergy tab 25mg</i>	OTC
<i>mm aller-ben tab 25mg</i>	OTC
<i>qc allergy tab 25mg</i>	OTC
<i>ra allergy tab 25mg</i>	OTC
<i>sb allergy tab 25mg med</i>	OTC
<i>sm allergy tab 25mg rlf</i>	OTC
<i>total allerg tab 25mg</i>	OTC
<i>wal-dryl tab 25mg</i>	OTC
BENADRYL ALG TAB EX STR	OTC
<i>allergy chil chw 12.5mg</i>	OTC
<i>gnp allergy chw 12.5mg</i>	OTC
<i>allergy chld liq 12.5/5ml</i>	OTC
<i>allergy liq 12.5/5ml</i>	OTC
<i>allergy med liq 12.5/5ml</i>	OTC
<i>allergy rel liq 12.5/5ml</i>	OTC
<i>allergy relf liq 12.5/5ml</i>	OTC
<i>allergy relf liq 25/10ml</i>	OTC
<i>allergy relf liq 50/20ml</i>	OTC
<i>allergy rlf liq 50/20ml</i>	OTC
<i>chld allergy liq 12.5/5ml</i>	OTC
<i>curelief liq 12.5/5ml</i>	OTC
<i>cvs allergy liq 25/10ml</i>	OTC
<i>diphedryl liq 12.5/5ml</i>	OTC
<i>diphenhydramine hcl liquid 12.5 mg/5ml</i>	OTC
<i>ft alrgy rlf liq 12.5/5ml</i>	OTC
<i>geri-dryl liq 12.5/5ml</i>	OTC
<i>kids allergy liq 12.5/5ml</i>	OTC
<i>liquid aller liq 12.5/5ml</i>	OTC
<i>m-dryl liq 12.5/5ml</i>	OTC
<i>maxallergy liq 12.5/5ml</i>	OTC
<i>naramin liq</i>	OTC
<i>pediacare al liq 12.5/5ml</i>	OTC
<i>siladryl alr liq 12.5/5ml</i>	OTC
<i>total allerg liq 12.5/5ml</i>	OTC
<i>wal-dryl liq 12.5/5ml</i>	OTC

\$0 - Zero Dollar Copay **AGE** - Age Limit **GNDR** - Gender Edit **OTC** - Over the counter **PA** - Prior Authorization **QL** - Quantity Limits **SP** - Specialty **ST** - Step Therapy

Drug Name	Requirements/Limits
<i>diphenhydramine hcl elixir 12.5 mg/5ml</i>	
<i>allrgy relf tab 12.5mg</i>	OTC
<i>cvs allergy chw 12.5mg</i>	OTC
<i>cvs allergy tab chldrn</i>	OTC
<i>eql allergy tab chldrn</i>	OTC
<i>wal-dryl alr tab 12.5mg</i>	OTC

ANTI-HISTAMINES - PHENOTHIAZINES

<i>promethazine hcl tab 12.5 mg</i>	
<i>promethazine hcl tab 25 mg</i>	
<i>promethazine hcl tab 50 mg</i>	
<i>promethazine hcl oral soln 6.25 mg/5ml</i>	
<i>promethazine hcl suppos 12.5 mg</i>	
<i>promethegan sup 12.5mg</i>	
<i>promethazine hcl suppos 25 mg</i>	
<i>promethegan sup 25mg</i>	
<i>promethegan sup 50mg</i>	

ANTI-HISTAMINES - PIPERIDINES

<i>cyproheptadine hcl tab 4 mg</i>	
<i>cyproheptadine hcl syrup 2 mg/5ml</i>	

ANTI-HISTAMINES - NON-SEDATING

<i>all day allg cap 10mg</i>	OTC
<i>allergy rel cap 10mg</i>	OTC
<i>qc all day cap 10mg</i>	OTC
<i>wal-zyr cap 10mg</i>	OTC
<i>allergy relf tab 5mg</i>	OTC
<i>cetirizine hcl tab 5 mg</i>	OTC
<i>all day allg tab 10mg</i>	OTC
<i>aller-tec tab 10mg</i>	OTC
<i>allergy 24hr tab 10mg</i>	OTC
<i>allergy rel tab 10mg</i>	OTC
<i>allergy reli tab 10mg</i>	OTC
<i>allergy rlf tab 10mg</i>	OTC
<i>allergy tab 10mg</i>	OTC
<i>allgy relief tab 10mg</i>	OTC
<i>cetirizine hcl tab 10 mg</i>	OTC
<i>cvs allergy tab 10mg</i>	OTC
<i>eql all day tab allergy</i>	OTC
<i>ft allergy tab 10mg</i>	OTC
<i>gnp all day tab allergy</i>	OTC
<i>qc allergy tab 10mg</i>	OTC
<i>sb allergy tab 10mg</i>	OTC
<i>sm all day tab 10mg</i>	OTC

Drug Name	Requirements/Limits
<i>sm all day tab allergy</i>	OTC
<i>wal-zyr tab 10mg</i>	OTC
<i>cetirizine hcl chew tab 5 mg</i>	OTC; AGE (Max 12)
<i>wal-zyr chw 5mg</i>	OTC; AGE (Max 12)
<i>cetirizine chw 10mg</i>	OTC; AGE (Max 12)
<i>wal-zyr chw 10mg</i>	OTC; AGE (Max 12)
<i>all day allg sol 1mg/ml</i>	OTC
<i>all day allg sol 5mg/5ml</i>	OTC
<i>all-day allg sol 5mg/5ml</i>	OTC
<i>aller-tec sol 1mg/ml</i>	OTC
<i>allergy chld sol 1mg/ml</i>	OTC
<i>allergy rel sol 1mg/ml</i>	OTC
<i>allergy relf sol 1mg/ml</i>	OTC
<i>allergy relf sol 5mg/5ml</i>	OTC
<i>cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)</i>	
<i>cetirizine sol 1mg/ml</i>	OTC
<i>cetirizine sol 5mg/5ml</i>	OTC
<i>child allrgy sol 1mg/ml</i>	OTC
<i>child allrgy sol 5mg/5ml</i>	OTC
<i>wal-zyr chld sol 1mg/ml</i>	OTC
<i>wal-zyr chld sol 5mg/5ml</i>	OTC
<i>wal-zyr sol 1mg/ml</i>	OTC
<i>wal-zyr sol 5mg/5ml</i>	OTC
<i>allergy reli chw cetirizi</i>	OTC
<i>allergy relf tab 60mg</i>	OTC
<i>fexofenadine hcl tab 60 mg</i>	OTC
<i>ft allr rlf tab 60mg</i>	OTC
<i>12hr allergy tab 60mg</i>	OTC
<i>sm allergy tab 60mg</i>	OTC
<i>wal-fex alrg tab 60mg 12h</i>	OTC
<i>allegra hive tab 180mg</i>	OTC
<i>aller-ease tab 180mg</i>	OTC
<i>aller-fex tab 180mg</i>	OTC
<i>allergy 24hr tab 180mg</i>	OTC
<i>allergy relf tab 180mg</i>	OTC
<i>allergy tab 180mg</i>	OTC
<i>cvs allergy tab 180mg</i>	OTC
<i>fexofenadine hcl tab 180 mg</i>	OTC
<i>ft alrgy rlf tab 180mg</i>	OTC
<i>24hr allergy tab 180mg</i>	OTC
<i>mm fexofenad tab 180mg</i>	OTC
<i>wal-fex allr tab 180mg</i>	OTC
<i>wal-fex tab 180mg</i>	OTC

Drug Name	Requirements/Limits
<i>allergy chld sus 30mg/5ml</i>	OTC
<i>allergy rlf sus 30/5ml</i>	OTC
ALLEGRA ALRG TAB 30MG	OTC
<i>allergy relf cap 10mg</i>	OTC
<i>loratadine cap 10 mg</i>	OTC
<i>qc allergy cap relief</i>	OTC
<i>allerclear tab 10mg</i>	OTC
<i>allergy relf tab 10mg</i>	OTC
<i>ft allergy tab 10mg</i>	OTC
<i>loradamed tab 10mg</i>	OTC
<i>loratadine tab 10 mg</i>	OTC
<i>qc allergy tab 10mg</i>	OTC
<i>qc loratadin tab 10mg</i>	OTC
<i>sm all day tab allr rel</i>	OTC
<i>sm loratadin tab 10mg</i>	OTC
<i>wal-itin tab 10mg</i>	OTC
<i>allergy rlf chw 5mg</i>	OTC
<i>loratadine chw 5mg</i>	OTC
<i>wal-itin chw 5mg</i>	OTC
<i>allergy chld sol 5mg/5ml</i>	OTC
<i>allergy relf sol 5mg/5ml</i>	OTC
<i>allergy rlf liq children</i>	OTC
<i>cvs allergy sol 5mg/5ml</i>	OTC
<i>eq allergy sol 5mg/5ml</i>	OTC
<i>loratadine sol 5mg/5ml</i>	OTC
<i>sm allergy sol 5mg/5ml</i>	OTC
<i>wal-itin chl sol 5mg/5ml</i>	OTC
<i>wal-itin sol 5mg/5ml</i>	OTC
<i>cvs allergy tab 5mg</i>	OTC
<i>alavert tab 10mg</i>	OTC
<i>allergy relf tab 10mg</i>	OTC
<i>eq loratadin tab 10mg</i>	OTC
<i>loratadine rapidly-disintegrating tab 10 mg</i>	OTC
<i>triaminic tab 10mg</i>	OTC
<i>wal-itin tab 10mg</i>	OTC
<i>wal-vert tab 10mg</i>	OTC

**NASAL AGENTS - SYSTEMIC AND TOPICAL
SYMPATHOMIMETIC DECONGESTANTS**

<i>decongestant tab 30mg</i>	OTC
<i>ft nsl decon tab 30mg</i>	OTC
<i>gnp deconge tab 30mg</i>	OTC
<i>nasal decong tab 30mg</i>	OTC
<i>pseudoephedrine hcl tab 30 mg</i>	OTC

\$0 - Zero Dollar Copay **AGE** - Age Limit **GNDR** - Gender Edit **OTC** - Over the counter **PA** - Prior Authorization **QL** - Quantity Limits **SP** - Specialty **ST** - Step Therapy

Drug Name	Requirements/Limits
<i>pseudofed tab 30mg</i>	OTC
<i>ra suphedrin tab 30mg</i>	OTC
<i>sinus cngst tab 30mg</i>	OTC
<i>sinus/conges tab 30mg</i>	OTC
<i>sm nasal dec tab 30mg</i>	OTC
<i>sudogest max tab 30mg</i>	OTC
<i>sudogest tab 30mg</i>	OTC
<i>wal-phed d tab 30mg</i>	OTC
<i>pseudoephedrine hcl tab 60 mg</i>	OTC
<i>sudogest tab 60mg</i>	OTC
SUDAFED CHLD LIQ 15MG/5ML	OTC
<i>decongestant tab 120mg er</i>	QL (60 tabs every 30 days), OTC
<i>12hr deconge tab 120mg cr</i>	QL (60 tabs every 30 days), OTC
<i>nasal decong tab 120mg er</i>	QL (60 tabs every 30 days), OTC
<i>pseudoephedrine hcl tab er 12hr 120 mg</i>	QL (60 tabs every 30 days), OTC
<i>qc suphedrin tab 120mg sr</i>	QL (60 tabs every 30 days), OTC
<i>ra suphedrin tab 120mg cr</i>	QL (60 tabs every 30 days), OTC
<i>sinus 12 hr tab 120mg er</i>	QL (60 tabs every 30 days), OTC
<i>sinus 12-hr tab 120mg er</i>	QL (60 tabs every 30 days), OTC
<i>sinus/conges tab 120mg</i>	QL (60 tabs every 30 days), OTC
<i>sudafed 12hr tab 120mg cr</i>	QL (60 tabs every 30 days), OTC
<i>sudafed 12hr tab 120mg er</i>	QL (60 tabs every 30 days), OTC
<i>sudogest 12 tab 120mg er</i>	QL (60 tabs every 30 days), OTC
<i>suphedrine tab 120mg er</i>	QL (60 tabs every 30 days), OTC
<i>wal-phed d tab 120mg</i>	QL (60 tabs every 30 days), OTC
<i>wal-phed tab 120mg er</i>	QL (60 tabs every 30 days), OTC
SUDAFED 24HR TAB 240MG	QL (30 tabs every 30 days), OTC

Drug Name	Requirements/Limits
NASAL STEROIDS	
<i>budesonide sus 32mcg</i>	QL (1 bottle every 30 days), OTC
<i>budesonide sus nasal</i>	QL (1 bottle every 30 days), OTC
<i>flunisolide nasal soln 25 mcg/act (0.025%)</i>	QL (2 bottles every 25 days)
<i>aller-flo spr 50mcg</i>	QL (1 bottle every 25 days), OTC
<i>allergy nasa spr 50mcg</i>	QL (1 bottle every 25 days), OTC
<i>allergy relf spr 50mcg</i>	QL (1 bottle every 25 days), OTC
<i>clarispray spr 50mcg</i>	QL (1 bottle every 25 days), OTC
<i>fluticasone propionate nasal susp 50 mcg/act</i>	QL (1 bottle every 25 days)
<i>fluticasone propionate nasal susp 50 mcg/act</i>	QL (1 bottle every 25 days), OTC
<i>fluticasone sus 50mcg</i>	QL (1 bottle every 25 days), OTC
<i>allergy nasa spr 24hr</i>	QL (1 bottle every 25 days), OTC
<i>ft 24 hour spr 55mcg</i>	QL (1 bottle every 25 days), OTC
<i>24 hr nasal spr allergy</i>	QL (1 bottle every 25 days), OTC
<i>nasal allrgy spr 55mcg/ac</i>	QL (1 bottle every 25 days), OTC
<i>ra nasal spr allergy</i>	QL (1 bottle every 25 days), OTC
<i>triamcinolone acetone nasal aerosol suspension 55 mcg/act</i>	QL (1 bottle every 25 days), OTC
NASAL ANTICHOLINERGICS	
<i>ipratropium bromide nasal soln 0.03% (21 mcg/spray)</i>	
<i>ipratropium bromide nasal soln 0.06% (42 mcg/spray)</i>	
NASAL ANTIALLERGY	
<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	QL (2 bottles every 25 days)
<i>cromolyn sodium nasal aerosol soln 5.2 mg/act (4%)</i>	OTC
NASAL AGENTS - MISC.	
<i>NOZIN NASAL KIT SANITIZE</i>	OTC
<i>afrin saline spr 0.65%</i>	OTC
<i>altamist spr 0.65%</i>	OTC
<i>ayr spr 0.65%</i>	OTC
<i>baby ayr spr 0.65%</i>	OTC

Drug Name	Requirements/Limits
<i>deep sea spr 0.65%</i>	OTC
<i>nasal moist spr 0.65%</i>	OTC
<i>nasal saline spr 0.65%</i>	OTC
<i>ocean kids spr 0.65%</i>	OTC
<i>saline mist spr 0.65%</i>	OTC
<i>saline nasal spr 0.65%</i>	OTC
<i>sb saline spr 0.65%</i>	OTC
<i>true nasal spr 0.65%</i>	OTC
AYR NASAL DRO 0.65%	OTC
CVS NASAL AER 0.9%	OTC
RA STERILE SOL NASAL	OTC
SIMPLY SALIN AER 0.9%	OTC

COUGH/COLD/ALLERGY

ANTITUSSIVES

<i>hydrocodone bitart-homatropine methylbromide tab 5-1.5 mg</i>	QL (6 tabs every 1 day)
<i>hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml</i>	QL (30 mL every 1 day)
<i>hydromet syp 5-1.5/5</i>	QL (30 mL every 1 day)
<i>benzonatate cap 100 mg</i>	
<i>benzonatate cap 200 mg</i>	

EXPECTORANTS

<i>coughtab tab 200mg</i>	OTC
<i>guaifenesin tab 200 mg</i>	OTC
<i>sb coughtab tab 200mg</i>	OTC
<i>chest conges tab 400mg</i>	OTC
<i>ft chest con tab 400mg</i>	OTC
<i>guaifenesin tab 400 mg</i>	OTC
<i>medifin 400 tab 400mg</i>	OTC
<i>mucosa tab 400mg</i>	OTC
<i>mucus relief tab 400mg</i>	OTC
<i>pharbinex tab 400mg</i>	OTC
<i>refenesen tab 400mg</i>	OTC
<i>tab tussin tab 400mg</i>	OTC
<i>xpect tab 400mg</i>	OTC
<i>altarussin liq 100/5ml</i>	OTC
<i>buckleys liq chest</i>	OTC
<i>chest conges liq 100/5ml</i>	OTC
<i>diabtc tussn liq 100/5ml</i>	OTC
<i>ft tussin liq 200/10ml</i>	OTC
<i>geri-tussin liq 100/5</i>	OTC
<i>guaifenesin liquid 100 mg/5ml</i>	OTC

Drug Name	Requirements/Limits
<i>max tussin liq 200/10ml</i>	OTC
<i>mucinex fast liq cst cong</i>	OTC
<i>mucus relief liq 100/5ml</i>	OTC
<i>mucus relief liq 400/20ml</i>	OTC
<i>mucus+chst liq 100/5ml</i>	OTC
<i>mucus+chst liq 200/10ml</i>	OTC
<i>qc medifin liq mucus rl</i>	OTC
<i>qc tussin ex liq 100/5ml</i>	OTC
<i>ra tussin liq 100/5ml</i>	OTC
<i>sb cgh contr liq 100/5ml</i>	OTC
<i>scot-tussin liq expct sf</i>	OTC
<i>siltussin sa liq 100/5ml</i>	OTC
<i>tusnel-ex liq 100/5ml</i>	OTC
<i>tussin adult liq 100/5ml</i>	OTC
<i>tussin chest liq 100/5ml</i>	OTC
<i>tussin mucus liq 100/5ml</i>	OTC
<i>tussin mucus liq 200/10ml</i>	OTC
<i>wal-tussin liq 100/5ml</i>	OTC
EXPECT CHILD LIQ 200M/5ML	OTC
GILTUSS EX LIQ MAX STR	OTC
GERI-TUSSIN SYP 200/10ML	OTC
<i>cvs mucus er tab 600mg</i>	OTC
<i>eq 12 hr muc tab 600mg</i>	OTC
<i>eq mucus er tab 600mg</i>	OTC
<i>eq mucus rel tab 600mg er</i>	OTC
<i>ft mucus rlf tab 600mg er</i>	OTC
<i>gnp mucus er tab 600mg</i>	OTC
<i>guaifenesin tab er 12hr 600 mg</i>	OTC
<i>mucus er tab 600mg</i>	OTC
<i>mucus relief tab 600mg</i>	OTC
<i>mucus relief tab 600mg er</i>	OTC
<i>sm mucus rel tab 600mg er</i>	OTC
<i>cvs mucus tab 1200 er</i>	OTC
<i>eql mucus-er tab 1200mg</i>	OTC
<i>ft mucus rel tab 1200 er</i>	OTC
<i>gnp mucus er tab 1200mg</i>	OTC
<i>guaifenesin tab er 12hr 1200 mg</i>	OTC
MUCINEX TAB 1200MG	OTC
<i>mucus er max tab 1200mg</i>	OTC
<i>mucus relief tab 1200 er</i>	OTC
<i>mucus relief tab 1200mg</i>	OTC
<i>qc mucus rel tab 1200 er</i>	OTC
<i>sm mucus rel tab 1200 er</i>	OTC

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Drug Name	Requirements/Limits
MISC. RESPIRATORY INHALANTS	
sodium chloride soln nebu 0.9%	
nebusal neb 3%	
sodium chloride soln nebu 3%	
pulmosal neb 7%	
sodium chloride soln nebu 7%	
sodium chloride soln nebu 10%	
simply salin aer baby	OTC
sodium chloride aero soln 0.9%	OTC
COUGH/COLD/ALLERGY COMBINATIONS	
cold/allergy elx children	OTC
rynex pse liq	OTC
wal-tap elx cld/alle	OTC
all day alrg tab 5-120mg	OTC
aller-tec d tab 5-120mg	OTC
allergy d tab 5-120mg	OTC
allergy relf tab 5-120mg	OTC
allergy-d tab 5-120mg	OTC
allergy/cong tab 5-120mg	OTC
allrgy relf tab 5-120mg	OTC
cetirizine-pseudoephedrine tab er 12hr 5-120 mg	OTC
cvs allergy tab 5-120mg	OTC
ra cetiri-d tab 5-120mg	OTC
sm allergy-d tab 5-120mg	OTC
wal-zyr d tab 5-120mg	OTC
alavert d-12 tab 5-120mg	OTC
allerclear d tab 5-120mg	OTC
allergy relf tab 5-120mg	OTC
allergy relf tab 5/120mg	OTC
allergy relf tab d12	OTC
allergy/cong tab 5-120mg	OTC
allrgy d-12 tab 5-120mg	OTC
allrgy rlf-d tab 5-120mg	OTC
eq alrg/cong tab 5-120mg	OTC
loratadine d tab 5-120mg	OTC
loratadine-d tab 5-120mg	OTC
wal-itin d tab 5-120mg	OTC
aller/conges tab 10-240mg	OTC
allerclear d tab 10-240mg	OTC
allergy rel/ tab deconges	OTC
allergy relf tab 10-240mg	OTC
allergy relf tab /nsl dec	OTC
allergy relf tab d-24	OTC

Drug Name	Requirements/Limits
<i>allergy relf tab deconges</i>	OTC
<i>allrgy rlf d tab 10-240mg</i>	OTC
<i>allrgy rlf-d tab 10-240mg</i>	OTC
<i>allrgy/nasal tab 10-240mg</i>	OTC
<i>eql allergy tab 10-240mg</i>	OTC
<i>lorata-dine tab d 24hr</i>	OTC
<i>loratadine-d tab 10-240mg</i>	OTC
<i>ra lorata-d tab 24 hour</i>	OTC
<i>wal-itin d tab 10-240mg</i>	OTC
<i>wal-itin d tab 24 hour</i>	OTC
<i>allergy d tab 60-120mg</i>	OTC
<i>allergy reli tab 60-120mg</i>	OTC
<i>allergy-d tab 12 hour</i>	OTC
<i>allergy/cong tab 60-120mg</i>	OTC
<i>cvs allerg d tab 60-120mg</i>	OTC
<i>fexofen/pse tab 60-120mg</i>	OTC
<i>ft alrgy&con tab 60-120mg</i>	OTC
<i>wal-fex d tab 12 hour</i>	OTC
<i>allergy d24 tab 180-240</i>	OTC
<i>allergy reli tab d</i>	OTC
<i>fexofenadine-pseudoephedrine tab er 24hr 180-240 mg</i>	OTC
<i>24hr allergy tab</i>	OTC
<i>wal-fex d tab 24 hour</i>	OTC
<i>prometh vc syp 6.25-5/5</i>	
<i>promethazine w/ codeine syrup 6.25-10 mg/5ml</i>	QL (30 mL every 1 day)
<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	
<i>bromfed dm sol 2-30-10</i>	
<i>pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml</i>	
<i>altarussin syp -pe</i>	OTC
<i>cvs mucus d tab 60-600mg</i>	OTC
<i>ft mucus rlf tab 60-600mg</i>	OTC
MUCINEX D TAB 60-600MG	OTC
<i>mucus relf d tab 60-600mg</i>	OTC
<i>mucus relief tab 60-600mg</i>	OTC
<i>mucus rlf d tab 60-600mg</i>	OTC
<i>pseudoephedrine-guaifenesin tab er 12hr 60-600 mg</i>	OTC
MUCINEX D TAB 120-1200	OTC
<i>mucus d max tab 120-1200</i>	OTC
<i>mucus d tab 120/1200</i>	OTC
<i>mucus rlf d tab 120-1200</i>	OTC
<i>pseudoephedrine-guaifenesin tab er 12hr 120-1200 mg</i>	OTC
CODITUSSIN LIQ AC	QL (60 mL every 1 day), OTC
<i>g tussin ac liq 100-10/5</i>	QL (60 mL every 1 day), OTC

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Drug Name	Requirements/Limits
<i>guaifenesin-codeine soln 100-10 mg/5ml</i>	QL (60 mL every 1 day), OTC
<i>maxi-tuss ac sol</i>	QL (60 mL every 1 day), OTC
VCKS DAYQUIL LIQ MUCUS DM	OTC
<i>cgh cong dm liq 5-100/5</i>	OTC
<i>childrens liq 5-100mg</i>	OTC
<i>cong/cough liq 5-100/5</i>	OTC
<i>cough child liq 5-100/5</i>	OTC
<i>cough cong liq 5-100/5</i>	OTC
<i>cough/chest liq 20-400</i>	OTC
<i>cvstussin dm liq 20-400mg</i>	OTC
<i>delsym cough liq congs dm</i>	OTC
<i>dm max adult liq 20-400</i>	OTC
<i>eq mucus rel liq dm</i>	OTC
<i>ft tussin dm liq 20-400mg</i>	OTC
<i>mucinex cgh liq 5-100mg</i>	OTC
<i>mucinex dm liq 20-400</i>	OTC
<i>mucinex dm liq max str</i>	OTC
<i>mucus rel dm liq</i>	OTC
<i>mucus rel dm liq 5-100/5</i>	OTC
<i>mucus rel dm liq 20-400mg</i>	OTC
<i>mucus relief liq 5-100mg</i>	OTC
<i>mucus rlf dm liq 5-100/5</i>	OTC
<i>mucus rlf dm liq 20-400mg</i>	OTC
<i>mucus/cough liq 5-100mg</i>	OTC
<i>robitussin liq 20-400</i>	OTC
<i>robitussin liq 20-400mg</i>	OTC
<i>sm tussin dm liq 5-100/5</i>	OTC
<i>tussin dm liq 5-100mg</i>	OTC
<i>tussin dm liq 20-400</i>	OTC
<i>tussin dm liq 20-400mg</i>	OTC
<i>tussin dm liq 20-400ml</i>	OTC
<i>tussin dm mx liq</i>	OTC
<i>tussin dm mx liq 5-100/5</i>	OTC
<i>tussin dm mx liq 5-100mg</i>	OTC
<i>biocotron liq 100-10/5</i>	OTC
<i>dextromethorphan-guaifenesin liquid 10-100 mg/5ml</i>	OTC
<i>diabetic tus liq cough dm</i>	OTC
<i>diabetic tus liq dm</i>	OTC
<i>geri-tussin liq dm</i>	OTC
<i>giltuss cgh liq & chest</i>	OTC
<i>giltuss diab liq cgh/cold</i>	OTC
<i>giltuss hon liq chg/chst</i>	OTC
<i>gnp tussin liq dm cough</i>	OTC

Drug Name	Requirements/Limits
<i>guaiaorb dm liq</i>	OTC
<i>guaiaorb dm liq 100-10/5</i>	OTC
<i>maxi-tuss g liq</i>	OTC
<i>maxtussin dm liq 200-20mg</i>	OTC
<i>ra tussin dm liq 100-10/5</i>	OTC
<i>safetussin liq dm</i>	OTC
<i>sm tussin liq dm</i>	OTC
<i>sorbugen nr liq</i>	OTC
<i>sorbutuss nr liq 10-100/5</i>	OTC
<i>tusnel diabt liq 10-100/5</i>	OTC
<i>tussin cough liq 10-100/5</i>	OTC
<i>tussin dm liq</i>	OTC
<i>tussin dm liq 10-100/5</i>	OTC
<i>tussin dm liq 100-10/5</i>	OTC
<i>wal-tussin liq 10-100/5</i>	OTC
<i>diabetic tus liq 20-400mg</i>	OTC
<i>maxi-tuss liq gmx</i>	OTC
<i>ra tussin liq dm max</i>	OTC
INTENSE COUG LIQ RELIEVER	OTC
<i>intense coug liq reliever</i>	OTC
<i>medi-tuss dm liq dbl str</i>	OTC
<i>neotuss liq</i>	OTC
<i>altarussn dm syp 100-10/5</i>	OTC
<i>chest conges syp rel dm</i>	OTC
<i>dextromethorphan-guaifenesin syrup 10-100 mg/5ml</i>	OTC
<i>eq tussin dm syp cgh/chst</i>	OTC
<i>eql tussin syp dm</i>	OTC
<i>geri-tussin syp dm</i>	OTC
<i>medi-tussin syp dm</i>	OTC
<i>sm tussin dm syp 100-10/5</i>	OTC
<i>sm tussin syp dm</i>	OTC
<i>tussin dm syp 100-10/5</i>	OTC
<i>wal-tussin syp dm</i>	OTC
MUCINEX CHLD GRA 5-100MG	OTC
<i>cvs mucus dm tab 30-600mg</i>	OTC
<i>eql mucus-dm tab 30-600cr</i>	OTC
<i>ft mucus rel tab 30-600mg</i>	OTC
MUCINEX DM TAB 30-600ER	OTC
<i>mucus dm tab 30-600mg</i>	OTC
<i>mucus relief tab 30-600er</i>	OTC
<i>mucus relief tab 30-600mg</i>	OTC
<i>mucus rlf dm tab 30-600er</i>	OTC
<i>mucus-dm tab 30-600mg</i>	OTC

Drug Name	Requirements/Limits
<i>cvs mucus dm tab 60-1200</i>	OTC
<i>dextromethorphan-guaifenesin tab er 12hr 60-1200 mg</i>	OTC
<i>eq mucus dm tab 60-1200</i>	OTC
<i>ft mucus rel tab 60-1200</i>	OTC
<i>kls mucus-dm tab 60-1200</i>	OTC
MUCINEX DM TAB 60-1200	OTC
<i>mucus dm max tab 60-1200</i>	OTC
<i>mucus dm tab 60-1200</i>	OTC
<i>mucus relief tab 60-1200</i>	OTC
<i>mucus-dm max tab 60-1200</i>	OTC
TUSNEL C SYP	QL (40 mL every 1 day), OTC
<i>sm tussin cf liq</i>	OTC
<i>wal-tussin liq cf</i>	OTC

ANTI-ASTHMATIC AND BRONCHODILATOR AGENTS

BRONCHODILATORS - ANTICHOLINERGICS

<i>ipratropium bromide inhal soln 0.02%</i>	QL (375 vials every 75 days)
INCRUSE ELPT INH 62.5MCG	QL (30 blisters every 25 days)

ANTI-INFLAMMATORY AGENTS

<i>cromolyn sodium soln nebu 20 mg/2ml</i>	QL (240 each every 25 days)
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SYMPATHOMIMETICS

<i>albuterol sulfate tab 2 mg</i>	
<i>albuterol sulfate tab 4 mg</i>	
<i>albuterol sulfate syrup 2 mg/5ml</i>	
<i>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)</i>	QL (375 each every 25 days)
ALBUTEROL NEB 0.5%	QL (60 mL every 25 days)
<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>	QL (60 each every 25 days)
<i>albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)</i>	QL (375 each every 25 days)
<i>albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)</i>	QL (375 each every 25 days)
<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	QL (2 inhalers every 25 days)
STRIVERDI AER 2.5MCG	QL (1 inhaler every 25 days)
<i>terbutaline sulfate tab 2.5 mg</i>	
<i>terbutaline sulfate tab 5 mg</i>	
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>	QL (1620 mL every 75 days)
COMBIVENT AER 20-100	QL (2 inhalers every 25 days)
<i>breyana aer 80/4.5</i>	QL (2 inhalers every 28 days)
<i>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act</i>	QL (2 inhalers every 28 days)
<i>breyana aer 160/4.5</i>	QL (2 inhalers every 28 days)
<i>budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act</i>	QL (2 inhalers every 28 days)
<i>fluticasone-salmeterol aer powder ba 113-14 mcg/act</i>	

Drug Name	Requirements/Limits
<i>fluticasone-salmeterol aer powder ba 100-50 mcg/act</i>	
<i>wixela inhub aer 100/50</i>	
<i>fluticasone-salmeterol aer powder ba 232-14 mcg/act</i>	
<i>fluticasone furoate-vilanterol aero powd ba 100-25 mcg/act</i>	
<i>fluticasone furoate-vilanterol aero powd ba 200-25 mcg/act</i>	
ANORO ELLIPT AER 62.5-25	QL (60 blisters every 25 days)
TRELEGY AER 100MCG	QL (2 inhalers every 25 days)
TRELEGY AER 200MCG	QL (2 inhalers every 25 days)

XANTHINES

<i>elixophyllin elx 80/15ml</i>	
<i>theophylline elixir 80 mg/15ml</i>	
<i>theophylline soln 80 mg/15ml</i>	
<i>theophylline tab er 12hr 300 mg</i>	
<i>theophylline tab er 12hr 450 mg</i>	
<i>theophylline tab er 24hr 400 mg</i>	
<i>theophylline tab er 24hr 600 mg</i>	

STEROID INHALANTS

QVAR REDIHAL AER 40MCG	QL (1 inhaler every 28 days)
QVAR REDIHA AER 80MCG	QL (1 inhaler every 28 days)
<i>budesonide inhalation susp 0.25 mg/2ml</i>	QL (120 mL every 25 days)
<i>budesonide inhalation susp 0.5 mg/2ml</i>	QL (120 mL every 25 days)
<i>budesonide inhalation susp 1 mg/2ml</i>	QL (60 mL every 25 days)
ALVESCO AER 80MCG	QL (3 inhalers every 25 days)
ALVESCO AER 160MCG	QL (2 inhalers every 25 days)
ARNUITY ELPT INH 100MCG	QL (1 blister every 1 day)
ARNUITY ELPT INH 200MCG	QL (1 blister every 1 day)
<i>fluticasone propionate aer pow ba 50 mcg/act</i>	QL (2 inhalations every 1 day)
<i>fluticasone propionate aer pow ba 100 mcg/act</i>	QL (2 inhalations every 1 day)
<i>fluticasone propionate aer pow ba 250 mcg/act</i>	QL (2 inhalations every 1 day)
<i>fluticasone propionate hfa inhal aero 44 mcg/act</i>	QL (1 inhaler every 28 days)
<i>fluticasone propionate hfa inhal aer 110 mcg/act</i>	QL (1 inhaler every 28 days)
<i>fluticasone propionate hfa inhal aer 220 mcg/act</i>	QL (1 inhaler every 28 days)

LEUKOTRIENE MODULATORS

<i>montelukast sodium tab 10 mg (base equiv)</i>	
<i>montelukast sodium chew tab 4 mg (base equiv)</i>	
<i>montelukast sodium chew tab 5 mg (base equiv)</i>	
<i>montelukast sodium oral granules packet 4 mg (base equiv)</i>	

Drug Name	Requirements/Limits
ANTI-ASTHMATIC - MONOCLONAL ANTIBODIES	
XOLAIR SOL 150MG	SP, PA, QL (8 vials every 28 days)
XOLAIR INJ 75/0.5	SP, PA, QL (2 pens every 28 days)
XOLAIR INJ 150MG/ML	SP, PA, QL (8 syringes every 28 days)
XOLAIR INJ 300/2ML	SP, PA, QL (8 syringes every 28 days)
XOLAIR INJ 75/0.5	SP, PA, QL (2 syringes every 28 days)
XOLAIR INJ 150MG/ML	SP, PA, QL (8 syringes every 28 days)
XOLAIR INJ 300/2ML	SP, PA, QL (8 syringes every 28 days)
FASENRA PEN INJ 30MG/ML	SP, PA, QL (1 pen every 56 days)
FASENRA INJ 30MG/ML	SP, PA, QL (1 pen every 56 days)

RESPIRATORY AGENTS - MISC.

ALPHA-PROTEINASE INHIBITOR (HUMAN)

PROLASTIN-C INJ 1000MG	SP, PA
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CYSTIC FIBROSIS AGENTS

KALYDECO TAB 150MG	SP, PA, QL (2 tabs every 1 day)
KALYDECO GRA 5.8MG	SP, PA, QL (2 packets every 1 day)
KALYDECO GRA 13.4MG	SP, PA, QL (2 packets every 1 day)
KALYDECO PAK 25MG	SP, PA, QL (2 packets every 1 day)
KALYDECO PAK 50MG	SP, PA, QL (2 packets every 1 day)
KALYDECO PAK 75MG	SP, PA, QL (2 packets every 1 day)
PULMOZYME SOL 1MG/ML	SP, PA, QL (5 mL every 1 day)
ORKAMBI TAB 100-125	SP, PA, QL (4 tabs every 1 day)
ORKAMBI TAB 200-125	SP, PA, QL (4 tabs every 1 day)
ORKAMBI GRA 75-94MG	SP, PA, QL (2 packets every 1 day)
ORKAMBI GRA 100-125	SP, PA, QL (2 packets every 1 day)
ORKAMBI GRA 150-188	SP, PA, QL (2 packets every 1 day)

Drug Name	Requirements/Limits
SYMDEKO TAB 50-75MG	SP, PA, QL (2 tabs every 1 day)
TRIKAFTA PAK 59.5MG	SP, PA, QL (2 packets every 1 day)
TRIKAFTA PAK 75MG	SP, PA, QL (2 packets every 1 day)
TRIKAFTA TAB	SP, PA, QL (3 tabs every 1 day)

PULMONARY FIBROSIS AGENTS

OFEV CAP 100MG	SP, PA, QL (2 caps every 1 day)
OFEV CAP 150MG	SP, PA, QL (2 caps every 1 day)

LAXATIVES

STIMULANT LAXATIVES

<i>alophen tab 5mg ec</i>	OTC
<i>bisacodyl tab 5mg ec</i>	OTC
<i>bisacodyl tab delayed release 5 mg</i>	OTC
<i>cvs c-lax tab 5mg</i>	OTC
<i>eql gentle tab laxative</i>	OTC
<i>eql laxative tab 5mg ec</i>	OTC
<i>ex-lax ultra tab 5mg ec</i>	OTC
<i>ft laxative tab 5mg ec</i>	OTC
<i>gentle laxat tab 5mg ec</i>	OTC
<i>gnp gntl lax tab 5mg ec</i>	OTC
<i>gnp laxative tab 5mg ec</i>	OTC
<i>kp bisacodyl tab 5mg ec</i>	OTC
<i>laxative tab 5mg ec</i>	OTC
<i>qc laxative tab 5mg ec</i>	OTC
<i>ra laxative tab 5mg ec</i>	OTC
<i>sb bisacodyl tab 5mg ec</i>	OTC
<i>sm gentle tab laxative</i>	OTC
<i>sm laxative tab 5mg ec</i>	OTC
<i>womans laxat tab 5mg ec</i>	OTC
<i>womens laxat tab 5mg ec</i>	OTC
<i>bisacodyl suppos 10 mg</i>	OTC
<i>fast relief sup 10mg</i>	OTC
<i>ft gntle lax sup 10mg</i>	OTC
<i>gentle laxat sup 10mg</i>	OTC
<i>laxative sup 10mg</i>	OTC
<i>magic bullet sup 10mg</i>	OTC
<i>onelax sup 10mg</i>	OTC
<i>qc laxative sup 10mg</i>	OTC
<i>sb laxative sup 10mg</i>	OTC
<i>sm laxative sup 10mg</i>	OTC
SENOKOT KIDS CHW GUMMIES	OTC

Drug Name	Requirements/Limits
SENOKOT LAX CHW GUMMIES	OTC
SENNA SYP	OTC
<i>sennosides cap 8.6 mg</i>	OTC
<i>cvs senna tab 8.6mg</i>	OTC
<i>eqvegetable tab 8.6mg</i>	OTC
<i>evac-u-gen tab 8.6mg</i>	OTC
<i>ft senna lax tab 8.6mg</i>	OTC
<i>geri-kot tab 8.6mg</i>	OTC
<i>gnp senna lx tab 8.6mg</i>	OTC
<i>kp senna tab 8.6mg</i>	OTC
<i>medi-natural tab 8.6mg</i>	OTC
<i>nat veg lax tab 8.6mg</i>	OTC
<i>qc senna tab 8.6mg</i>	OTC
<i>qc vege laxa tab 8.6mg</i>	OTC
<i>sb senna-lax tab 8.6mg</i>	OTC
<i>senna lax tab 8.6mg</i>	OTC
<i>senna laxati tab 8.6mg</i>	OTC
<i>senna-lax tab 8.6mg</i>	OTC
<i>senna-tabs tab 8.6mg</i>	OTC
<i>senna-time tab 8.6mg</i>	OTC
<i>sennosides tab 8.6 mg</i>	OTC
SENOKOT TAB 8.6MG	OTC
<i>sm senna lax tab 8.6mg</i>	OTC
<i>laxative reg tab 15mg</i>	OTC
<i>medi-lax tab 15mg</i>	OTC
<i>perdiem tab 15mg</i>	OTC
<i>senna smooth tab 15mg</i>	OTC
<i>senna-extra tab 17.2mg</i>	OTC
<i>senokot extr tab 17.2mg</i>	OTC
<i>cvs laxative tab 25mg</i>	OTC
<i>eql laxative tab 25mg</i>	OTC
<i>ex-lax tab max st</i>	OTC
<i>laxative max tab 25mg</i>	OTC
<i>laxative tab 25mg</i>	OTC
<i>choc laxativ chw 15mg</i>	OTC
<i>cvs laxative chw 15mg</i>	OTC
<i>eql laxative chw 15mg</i>	OTC
EX-LAX CHW 15MG	OTC
<i>laxative chw 15mg</i>	OTC
<i>ra laxative chw 15mg</i>	OTC
<i>onelax senna syp 8.8/5ml</i>	OTC
<i>sennazon syp 8.8mg/5</i>	OTC
<i>sennosides syrup 8.8 mg/5ml</i>	OTC

\$0 - Zero Dollar Copay **AGE** - Age Limit **GNDR** - Gender Edit **OTC** - Over the counter **PA** - Prior Authorization **QL** - Quantity Limits **SP** - Specialty **ST** - Step Therapy

Drug Name	Requirements/Limits
BULK LAXATIVES	
<i>cvs fiber chw gummies</i>	OTC
<i>eq fiber chw supplmnt</i>	OTC
<i>fiber adult chw gummies</i>	OTC
<i>fiber gummy chw bears</i>	OTC
<i>fiber select chw gummies</i>	OTC
<i>hm trueplus chw fiber</i>	OTC
<i>metamucil chw gummies</i>	OTC
<i>pedialax fbr chw gummies</i>	OTC
<i>prebiotic chw fiber</i>	OTC
<i>yogurt+fiber chw gummies</i>	OTC
<i>yumvs prebio chw fiber</i>	OTC
<i>yumvs prebio chw fiber ze</i>	OTC
METAMUCIL CAP 0.36GM	OTC
<i>daily fiber cap</i>	OTC
<i>eq daily cap fiber</i>	OTC
<i>hm fiber cap 400mg</i>	OTC
<i>metamucil cap 400mg</i>	OTC
<i>cvs fiber cap 0.52gm</i>	OTC
<i>daily fiber cap 0.52gm</i>	OTC
<i>fiber laxtiv cap 0.52gm</i>	OTC
<i>fiber therap cap 0.52gm</i>	OTC
<i>gnp fiber cap 0.52gm</i>	OTC
<i>medi-mucil cap 0.52gm</i>	OTC
<i>psyllium cap 0.52 gm</i>	OTC
<i>reguloid cap 0.52gm</i>	OTC
<i>wal-mucil cap 0.52gm</i>	OTC
<i>daily psylli pow 25%</i>	OTC
<i>eq daily fib pow 25%</i>	OTC
<i>ft fiber pow 25%</i>	OTC
<i>geri-mucil pow</i>	OTC
<i>hm fiber pow</i>	OTC
<i>onelax fiber pow 25%</i>	OTC
<i>qc fiber pow 25%</i>	OTC
<i>sm fiber pow</i>	OTC
<i>ft fiber pow 27%</i>	OTC
<i>sm fiber pow</i>	OTC
<i>eql fiber pow 28.3%</i>	OTC
<i>metamucil pow 28.3%org</i>	OTC
<i>naturl fiber pow 28.3%</i>	OTC
<i>psyllium powder 28.3%</i>	OTC
<i>reguloid pow orange</i>	OTC
<i>sm fiber pow 28.3%</i>	OTC

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Drug Name	Requirements/Limits
<i>wal-mucil pow 28.3%</i>	OTC
<i>psyldex pow 30%</i>	OTC
<i>sb fib lax pow 30%</i>	OTC
NATURL FIBER POW 30.9%	OTC
<i>sb fib lax pow 33%</i>	OTC
<i>daily fiber pow 43%</i>	OTC
<i>eql fiber pow therapy</i>	OTC
<i>ft fiber pow 43%</i>	OTC
<i>gnp fiber pow 43%</i>	OTC
<i>hm fiber pow 43%</i>	OTC
<i>metamucil pow 43%</i>	OTC
METAMUCIL POW 43%	OTC
<i>multihealth pow fiber</i>	OTC
<i>qc fiber pow 43%</i>	OTC
<i>reguloid pow 43%</i>	OTC
<i>sm fiber pow 43%</i>	OTC
<i>wal-mucil pow 43%</i>	OTC
<i>sb nat fiber pow 49%</i>	OTC
<i>daily fib pow 51.7%</i>	OTC
<i>daily fiber pow 51.7%</i>	OTC
<i>eq daily fib pow 51.7%</i>	OTC
<i>eql smooth pow 51.7%</i>	OTC
<i>eql smooth pow texture</i>	OTC
<i>ft fiber pow 51.7%</i>	OTC
<i>geri-mucil pow</i>	OTC
<i>hm fiber pow 51.7%</i>	OTC
<i>psyllium fib pow 51.7%</i>	OTC
<i>qc fiber the pow 51.7%</i>	OTC
<i>reguloid pow 51.7%</i>	OTC
<i>sm fiber pow 51.7%</i>	OTC
<i>wal-mucil pow 51.7%</i>	OTC
<i>cvs natural pow fiber</i>	OTC
<i>metamucil pow 58.6%</i>	OTC
<i>metamucil pow 58.6% sf</i>	OTC
<i>metamucil pow 58.6%org</i>	OTC
<i>multihealth pow fiber</i>	OTC
<i>naturl fiber pow 58.6%</i>	OTC
<i>sm fiber pow 58.6%</i>	OTC
<i>wal-mucil pow 58.6%</i>	OTC
KONSYL DAILY POW 60.3%	OTC
REGULOID POW ORANGE	OTC
REGULOID POW ORIGINAL	OTC
METAMUCIL POW 55.6%	OTC

Drug Name	Requirements/Limits
ONELAX DAILY POW 83%	OTC
METAMUCIL POW PREMIUM	OTC
HYDROCIL POW 95%	OTC
<i>qc natural pow vegetabl</i>	OTC
EVAC POW	OTC
<i>psyllium pow 100%</i>	OTC
<i>psyllium see pow 100%</i>	OTC
<i>wal-mucil pow 100%</i>	OTC
METAMUCIL POW 4 IN 1	OTC
DAILY FIBER POW 51.7%	OTC
METAMUCIL PAK 4 IN 1	OTC
CVS DAILY POW FIBER	OTC
HYDROCIL INS POW 95%	OTC
KONSYL DAILY POW 100%	OTC
METAMUCIL WAF	OTC

SURFACTANT LAXATIVES

<i>docusate calcium cap 240 mg</i>	OTC
<i>stool soft cap 240mg</i>	OTC
<i>stool softnr cap 240mg</i>	OTC
<i>surfak cap 240mg</i>	OTC
<i>stool softnr cap 50mg</i>	OTC
<i>docusate sodium cap 100 mg</i>	OTC
<i>dulcolax pnk cap 100mg</i>	OTC
<i>dulcolax ss cap 100mg</i>	OTC
<i>easy-lax cap 100mg</i>	OTC
<i>eq stool cap softener</i>	OTC
<i>eq stool sof cap 100mg</i>	OTC
<i>phillips cap 100mg</i>	OTC
<i>ra col-rite cap 100mg</i>	OTC
<i>stool soften cap 100mg</i>	OTC
<i>stool softnr cap 100mg</i>	OTC
<i>docusate sodium cap 250 mg</i>	OTC
<i>ra col-rite cap 250mg</i>	OTC
<i>stool soft cap 250mg</i>	OTC
<i>stool soften cap 250mg</i>	OTC
<i>stool softnr cap 250mg</i>	OTC
<i>dok tab 100mg</i>	OTC
<i>move along tab 100mg</i>	OTC
<i>stool softnr tab 100mg</i>	OTC
PEDIA-LAX LIQ 50MG	OTC
<i>docusate sodium liquid 150 mg/15ml</i>	OTC
<i>onelax liq 50mg/5ml</i>	OTC
<i>stool soften liq 50mg/5ml</i>	OTC

Drug Name	Requirements/Limits
DOCUSATE SOD SYP 60/15ML	OTC
LAXATIVES - MISCELLANEOUS	
<i>constulose sol 10gm/15</i>	
<i>lactulose solution 10 gm/15ml</i>	
<i>clearlax pow</i>	OTC
<i>cvs purelax pow</i>	OTC
<i>eq clearlax pow</i>	OTC
<i>eql clearlax pow</i>	OTC
<i>ft clearlax pow</i>	OTC
<i>gavilax pow</i>	OTC
<i>gentlelax pow</i>	OTC
<i>glycolax pow 3350 nf</i>	OTC
<i>gnp clearlax pow</i>	OTC
<i>hm clearlax pow</i>	OTC
<i>laxaclear pow</i>	OTC
<i>mm clearlax pow</i>	OTC
<i>natura-lax pow 3350 nf</i>	OTC
<i>polyethylene glycol 3350 oral powder 17 gm/scoop</i>	OTC
<i>ra laxative pow</i>	OTC
<i>sm clearlax pow</i>	OTC
<i>smooth lax pow</i>	OTC
<i>smooth lax pow 3350</i>	OTC
<i>cvs purelax pak</i>	OTC
<i>eq laxative pow 3350</i>	OTC
<i>gnp clearlax pak 3350 nf</i>	OTC
<i>healthylax pow</i>	OTC
<i>polyethylene glycol 3350 oral packet 17 gm</i>	OTC
<i>smooth lax pow 3350 nf</i>	OTC
LAXATIVE COMBINATIONS	
<i>colace 2in1 tab 8.6-50mg</i>	OTC
<i>cvs senna pl tab 8.6-50mg</i>	OTC
<i>docuzen tab 8.6-50mg</i>	OTC
<i>easy-lax pls tab 8.6-50mg</i>	OTC
<i>eq senna-s tab 8.6-50mg</i>	OTC
<i>ft senna-s tab 8.6-50mg</i>	OTC
<i>ft stl soft tab 8.6-50mg</i>	OTC
<i>hm stool sof tab 8.6-50mg</i>	OTC
<i>lax/stl soft tab 8.6-50mg</i>	OTC
<i>laxacin tab 8.6-50mg</i>	OTC
<i>laxative pls tab 8.6-50mg</i>	OTC
<i>medi-natural tab 8.6-50mg</i>	OTC
<i>ra p col-rit tab 8.6-50mg</i>	OTC

Drug Name	Requirements/Limits
<i>sb docusate tab 8.6-50mg</i>	OTC
<i>senexon-s tab 8.6-50mg</i>	OTC
<i>senna plus tab 8.6-50mg</i>	OTC
<i>senna s tab 8.6-50mg</i>	OTC
<i>senna-plus tab 8.6-50mg</i>	OTC
<i>senna-s tab 8.6-50mg</i>	OTC
<i>senna-time s tab 8.6-50mg</i>	OTC
<i>sennosides-docusate sodium tab 8.6-50 mg</i>	OTC
<i>sm senna-s tab 8.6-50mg</i>	OTC
<i>sm stool sof tab 8.6-50mg</i>	OTC
<i>stimulant lx tab 8.6-50mg</i>	OTC
<i>stool softnr tab 8.6-50mg</i>	OTC
<i>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml</i>	
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	
<i>gavilyte-g sol</i>	
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	
<i>gavilyte-c sol</i>	

ANTIDIARRHEAL/PROBIOTIC AGENTS

ANTIPERISTALTIC AGENTS

<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	
<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i>	
<i>anti-diarrhe cap 2mg</i>	OTC
<i>ft anti-diar cap 2mg</i>	OTC
<i>loperamide hcl cap 2 mg</i>	
<i>qc anti-diar cap 2mg</i>	OTC
<i>anti-diarrhe tab 2mg</i>	OTC
<i>diamode tab 2mg</i>	OTC
<i>ft anti-diar tab 2mg</i>	OTC
<i>loperamide hcl tab 2 mg</i>	OTC
<i>sm anti-diar tab 2mg</i>	OTC

ANTIDIARRHEAL/PROBIOTIC AGENTS - MISC.

<i>kaopectate tab 262mg</i>	OTC
<i>pink bismuth tab 262mg</i>	OTC
<i>sb bismuth tab 262mg</i>	OTC
<i>stomach rele tab 262mg</i>	OTC
<i>stomach relf tab 262mg</i>	OTC
<i>bismuth subsalicylate chew tab 262 mg</i>	OTC
<i>eql stomach chw 262mg</i>	OTC
<i>ft stomach chw 262mg</i>	OTC
<i>medi-bismuth chw 262mg</i>	OTC
<i>pink bismuth chw 262mg</i>	OTC

Drug Name	Requirements/Limits
<i>qc stomach chw 262mg</i>	OTC
<i>sm stomach chw 262mg</i>	OTC
<i>soothe chw 262mg</i>	OTC
<i>stomach relf chw 262mg</i>	OTC
<i>anti-diarrhl sus 262/15ml</i>	OTC
<i>diarrhea rel sus 262/15ml</i>	OTC
<i>diarrhea sus 262/15ml</i>	OTC
<i>diotame sus 262/15ml</i>	OTC
<i>kaopectate sus 262/15ml</i>	OTC
<i>pink bismuth sus 262/15ml</i>	OTC
<i>pink bismuth sus 525/30ml</i>	OTC
<i>qc stomach sus 525/30ml</i>	OTC
<i>sm stomach sus 262/15ml</i>	OTC
<i>soothe sus 262/15ml</i>	OTC
<i>soothe sus 525/30ml</i>	OTC
<i>stomach relf sus 262/15ml</i>	OTC
<i>stomach relf sus 524/30ml</i>	OTC
<i>stomach relf sus 525/30ml</i>	OTC
<i>stomach relf sus 527/30ml</i>	OTC
<i>gnp pink bis sus 525/15ml</i>	OTC
<i>kaopectate sus ex st</i>	OTC
<i>pink bismuth sus max str</i>	OTC
<i>qc pink bism sus 525/15ml</i>	OTC
<i>qc stomach sus 525/15ml</i>	OTC
<i>soothe sus 525/15ml</i>	OTC
<i>stomach relf sus 525/15ml</i>	OTC
<i>stomach relf sus 1050/30</i>	OTC
<i>stomach relf sus max str</i>	OTC
<i>stomach relf sus plus</i>	OTC
<i>abatinox cap 680mg</i>	OTC
<i>acidophilus cap 10mg</i>	OTC
<i>acidophilus cap 100mg</i>	OTC
<i>acidophilus cap ex st</i>	OTC
<i>acidophilus cap probioti</i>	OTC
<i>azo complete cap fem blnc</i>	OTC
AZO DUAL CAP PROTECT	OTC
BIOGAIS PROT CAP MUM	OTC
BIOMEPRO CAP	OTC
<i>biotinox cap</i>	OTC
BOLSITOL CAP	OTC
<i>cultrl total cap balance</i>	OTC
CULTURELLE CAP ADV REG	OTC
CULTURELLE CAP WOMENS	OTC

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Drug Name	Requirements/Limits
<i>digestive cap health</i>	OTC
<i>digestive cap probioti</i>	OTC
FLORAJEN CAP ACIDOPHI	OTC
FLORAJEN CAP WOMEN	OTC
GNP PROBIOTI CAP XTRA STR	OTC
IDEAL BOWEL CAP PROBIOTI	OTC
<i>intestinex cap</i>	OTC
<i>lactobacillu cap</i>	OTC
<i>lactobacillus cap</i>	OTC
NEWFLORA CAP PROBIOTI	OTC
<i>primadophilu cap</i>	OTC
PROBIOMAX CAP SERENITY	OTC
<i>probiotic cap</i>	OTC
PROBIOTIC CAP	OTC
<i>probiotic cap acidophi</i>	OTC
<i>probiotic cap gold</i>	OTC
REJUVAFLOR CAP	OTC
REPHRESH CAP PRO-B	OTC
REVITAFLORE CAP	OTC
<i>acidoph/prob tab formula</i>	OTC
<i>acidophilus tab probiotc</i>	OTC
<i>acidophilus tab probioti</i>	OTC
<i>floranex tab</i>	OTC
<i>lactobacillus tab</i>	OTC
<i>probiata tab</i>	OTC
<i>culturelle chw womens</i>	OTC
<i>prenatal chw wellness</i>	OTC
<i>probiotic chw children</i>	OTC
BIOMEPRO LIQ	OTC
MORE-DOPHILU POW ACIDOPHI	OTC
<i>floranex gra</i>	OTC
LACTINEX GRA	OTC
<i>lactobacillus - packet</i>	OTC
<i>probiotic pak children</i>	OTC
ACIDOPHILUS WAF	OTC
BIO-K PLUS CAP STRONG	OTC
BIOMEPRO CAP	OTC
ELACTIA CAP	OTC
BIOGAIA CHW 100M CEL	OTC
BIOGAIA CHW GASTRUS	OTC
GOOD START CHW GROW KID	OTC
PEDIA-LAX CHW YUMS	OTC
BIOGAIA DRO PROBIOTI	OTC

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Drug Name	Requirements/Limits
BIOGAIA DRO PRODENTI	OTC
BIOGAIA PROT DRO BABY	OTC
GOOD START POW GROW KID	OTC
BIOGAIA LOZ PRODENTI	OTC
BIOGAIA PROD LOZ KIDS	OTC
BIOGAIA MIS PROBIOTI	OTC
CULTURELLE CAP	OTC
<i>culturelle cap hlth/wel</i>	OTC
CULTURELLE CAP IMMUNITY	OTC
CULTURELLE CAP PRO-WELL	OTC
<i>dual prenatal cap immunity</i>	OTC
<i>hm probiotic cap</i>	OTC
<i>probiotic cap</i>	OTC
CULTUR KIDS CHW PURELY	OTC
CULTURELLE CHW KIDS	OTC
PROBIOTIC DRO COLIC	OTC
PROBIOTIC LIQ 15 DAY	OTC
PROBIOTIC LIQ NEWBORN	OTC
CULTUR KIDS POW PURELY	OTC
CULTURE KIDS PAK PROB FIB	OTC
CULTURELLE PAK KIDS	OTC
CULTURELLE PAK PROBIOT	OTC
KIDS PROBIOT PAK FIBER	OTC
MOMMYS BLISS POW PROBIOTI	OTC

ANTIDIARRHEAL/PROBIOTIC COMBINATIONS

<i>anti-dia/gas tab 2-125mg</i>	OTC
<i>anti-diarrhe tab 2-125mg</i>	OTC
<i>anti-diarrhe tab anti-gas</i>	OTC
<i>loperamide-simethicone tab 2-125 mg</i>	OTC

ANTACIDS

ANTACIDS - CALCIUM SALTS

CALCIUM CARB TAB 648MG	OTC
<i>child soothe chw 400mg</i>	OTC
<i>childrens chw pepto</i>	OTC
<i>childrens chw soothe</i>	OTC
<i>maalox child chw</i>	OTC
<i>medi-first chw ant 420</i>	OTC
<i>titralac chw 420mg</i>	OTC
<i>antacid chw 500mg</i>	OTC
<i>cal-gest chw 500mg</i>	OTC
<i>calc antacid chw 500mg</i>	OTC
<i>calcium carbonate (antacid) chew tab 500 mg</i>	OTC

Drug Name	Requirements/Limits
<i>eql antacid chw fruit</i>	OTC
<i>eql antacid chw pepprmnt</i>	OTC
<i>ft antacid chw 500mg</i>	OTC
<i>qc antacid chw 500mg</i>	OTC
<i>ra antacid chw 500mg</i>	OTC
<i>sm antacid chw 500mg</i>	OTC
<i>tame flame chw 500mg</i>	OTC
MAALOX CHW 600MG	OTC
<i>alka-seltzer chw 750mg</i>	OTC
<i>antacid chw 750mg</i>	OTC
<i>antacid extr chw 750mg</i>	OTC
<i>antacid flav chw 750mg</i>	OTC
<i>antacid kids chw 750mg</i>	OTC
<i>calc antacid chw 750mg</i>	OTC
<i>cvs antacid chw 750mg</i>	OTC
<i>eq antacid chw 750mg</i>	OTC
<i>flavor chews chw 750mg</i>	OTC
<i>ft antacid chw 750mg</i>	OTC
<i>gnp antacid chw 750mg</i>	OTC
<i>hm antacid chw 750mg</i>	OTC
<i>qc antacid chw 750mg</i>	OTC
<i>smooth anta chw fruit</i>	OTC
<i>smooth antac chw 750mg</i>	OTC
<i>tums smoothi chw 750mg</i>	OTC
<i>antacid chw 1000mg</i>	OTC
<i>antacid max chw 1000mg</i>	OTC
<i>antacid ultr chw 1000mg</i>	OTC
<i>cvs antacid chw 1000mg</i>	OTC
<i>eq antacid chw 1000mg</i>	OTC
<i>eql antacid chw 1000mg</i>	OTC
<i>gnp antacid chw 1000mg</i>	OTC
<i>qc antacid chw 1000mg</i>	OTC
<i>ra antacid chw 1000mg</i>	OTC
ANTACID CHW 1177MG	OTC
ANTACID SOFT CHW 1177MG	OTC
CVS ANTACID CHW 1177MG	OTC
TUMS CHW DEL CHW 1177MG	OTC
<i>calcium carbonate (antacid) susp 1250 mg/5ml</i>	OTC
ANTACID COMBINATIONS	
MAG-AL LIQ	OTC
<i>acid gone chw</i>	OTC
<i>antacid chw</i>	OTC
<i>gnp antacid chw 160-105</i>	OTC

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Drug Name	Requirements/Limits
<i>heartbrn ant chw 160-105</i>	OTC
<i>heartbrn rlf chw 160-105</i>	OTC
<i>heartburn chw ex st</i>	OTC
<i>acid gone sus</i>	OTC
<i>heartbrn rel sus cherry</i>	OTC
<i>heartburn sus relief</i>	OTC
FOAM ANTACID CHW 80-20MG	OTC
ANTACID CHW 550-110	OTC
<i>cvs antacid sus supreme</i>	OTC
<i>geri-lanta sus supreme</i>	OTC
<i>mintox plus chw</i>	OTC
<i>alum & mag hydroxide-simethicone susp 200-200-20 mg/5ml</i>	OTC
<i>antacid & sus gas relf</i>	OTC
<i>antacid fast sus relief</i>	OTC
<i>antacid i sus</i>	OTC
<i>antacid liq sus</i>	OTC
<i>antacid m sus</i>	OTC
<i>antacid sus anti-gas</i>	OTC
<i>antacid sus antigas</i>	OTC
<i>antacid sus mint</i>	OTC
<i>antacid sus reg st</i>	OTC
<i>comfort gel sus</i>	OTC
<i>comfort gel sus anti-gas</i>	OTC
<i>cvs antacid sus anti-gas</i>	OTC
<i>cvs antacid/ sus anti-gas</i>	OTC
<i>ft antacid sus antigas</i>	OTC
<i>geri-lanta sus</i>	OTC
<i>geri-mox sus</i>	OTC
<i>gnp antacid sus coolmint</i>	OTC
<i>gnp antacid sus reg st</i>	OTC
<i>goodsense sus antacid</i>	OTC
<i>mag-al plus liq</i>	OTC
<i>qc antacid sus</i>	OTC
<i>qc antacid sus anti-gas</i>	OTC
<i>ra antacid sus anti-gas</i>	OTC
<i>sb antacid sus anti-gas</i>	OTC
<i>sm antacid sus</i>	OTC
<i>sm antacid sus advanced</i>	OTC
<i>sm antacid sus anti-gas</i>	OTC
<i>almacone dbl sus strength</i>	OTC
<i>alum & mag hydroxide-simethicone susp 400-400-40 mg/5ml</i>	OTC

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Drug Name	Requirements/Limits
<i>antacid & sus gas relf</i>	OTC
<i>antacid iii sus</i>	OTC
<i>antacid max sus anti-gas</i>	OTC
<i>antacid max sus cherry</i>	OTC
<i>antacid sus advanced</i>	OTC
<i>antacid sus anti-gas</i>	OTC
<i>antacid sus ex st</i>	OTC
<i>antacid sus max st</i>	OTC
<i>antacid/gas sus rel max</i>	OTC
<i>antacid/sime sus ds</i>	OTC
<i>comfort gel sus antacid</i>	OTC
<i>comfort gel sus anti-gas</i>	OTC
<i>cvs antacid sus antigas</i>	OTC
<i>cvs antacid/ sus anti-gas</i>	OTC
<i>eq antacid sus max st</i>	OTC
<i>ft antacid sus antigas</i>	OTC
<i>geri-lanta sus max st</i>	OTC
<i>gnp antacid sus cherry</i>	OTC
<i>gnp antacid sus original</i>	OTC
<i>goodsense sus ant/gas</i>	OTC
<i>maalox max sus cherry</i>	OTC
<i>maalox max sus lemon</i>	OTC
<i>maalox max sus wild bry</i>	OTC
<i>maalox multi sus symp max</i>	OTC
<i>mag-al plus liq xs</i>	OTC
<i>meijer sus antacid</i>	OTC
<i>mintox sus max st</i>	OTC
<i>mylanta sus max st</i>	OTC
<i>qc antacid sus anti-gas</i>	OTC
<i>ra antacid sus antigas</i>	OTC
<i>sm antacid sus advanced</i>	OTC
<i>sm antacid sus max st</i>	OTC

ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS

ANTISPASMODICS

<i>hyoscyamine sulfate tab 0.125 mg</i>
<i>oscimin tab 0.125mg</i>
<i>hyoscyamine sulfate sl tab 0.125 mg</i>
<i>oscimin sub 0.125mg</i>
<i>hyoscyamine sulfate elixir 0.125 mg/5ml</i>
<i>hyosyne elx 0.125/5</i>
<i>hyoscyamine sulfate soln 0.125 mg/ml</i>
<i>hyosyne dro 0.125/ml</i>
<i>hyoscyamine sulfate tab disint 0.125 mg</i>

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Drug Name	Requirements/Limits
<i>nulev tab 0.125mg</i>	
<i>glycopyrrolate tab 1 mg</i>	
<i>glycopyrrolate tab 2 mg</i>	
<i>glycopyrrolate oral soln 1 mg/5ml</i>	AGE (Min 3, Max 16)
<i>dicyclomine hcl cap 10 mg</i>	
<i>dicyclomine hcl tab 20 mg</i>	
<i>dicyclomine hcl oral soln 10 mg/5ml</i>	

H-2 ANTAGONISTS

<i>acid reducer tab 200mg</i>	OTC
<i>cimetidine tab 200 mg</i>	
<i>cimetidine tab 200mg</i>	OTC
<i>eq cimetidin tab 200mg</i>	OTC
<i>heartburn tab 200mg</i>	OTC
<i>sm acid redu tab 200mg</i>	OTC
<i>cimetidine tab 300 mg</i>	
<i>cimetidine tab 400 mg</i>	
<i>cimetidine tab 800 mg</i>	
<i>cimetidine hcl soln 300 mg/5ml</i>	
<i>acid control tab 10mg</i>	OTC
<i>acid reducer tab 10mg</i>	OTC
<i>eq heartbrn tab 10mg</i>	OTC
<i>famotidine tab 10 mg</i>	OTC
<i>heartburn tab relief</i>	OTC
<i>qc famotidin tab acid red</i>	OTC
<i>zantac 360 tab 10mg</i>	OTC
<i>acid control tab 20mg</i>	OTC
<i>acid reducer tab 20mg</i>	OTC
<i>eq famotidin tab 20mg</i>	OTC
<i>famotidine tab 20 mg</i>	
<i>famotidine tab 20 mg</i>	OTC
<i>heartburn tab 20mg</i>	OTC
<i>mm acid-pep tab 20mg</i>	OTC
<i>PEPCID AC TAB 20MG</i>	OTC
<i>qc famotidin tab acid red</i>	OTC
<i>zantac 360 tab 20mg</i>	OTC
<i>famotidine tab 40 mg</i>	
<i>famotidine for susp 40 mg/5ml</i>	
<i>nizatidine cap 150 mg</i>	
<i>nizatidine cap 300 mg</i>	

ULCER DRUGS - PROSTAGLANDINS

<i>misoprostol tab 100 mcg</i>	
<i>misoprostol tab 200 mcg</i>	

Drug Name	Requirements/Limits
PROTON PUMP INHIBITORS	
<i>esomeprazole magnesium tab delayed release 20 mg</i> NEXIUM GRA 2.5MG DR	QL (90 tabs every year), OTC QL (90 packets every year); AGE (Max 1)
NEXIUM GRA 5MG DR	QL (90 packets every year); AGE (Max 1)
<i>esomeprazole magnesium for delayed release susp packet 10 mg</i>	QL (90 packets every year); AGE (Max 1)
<i>eq esome mag cap 20mg dr</i>	QL (30 caps every 25 days), OTC
<i>esomeprazole cap 20mg dr</i>	QL (30 caps every 25 days), OTC
<i>esomeprazole magnesium cap delayed release 20 mg (base eq)</i>	QL (30 caps every 25 days), OTC
<i>gnp esomepra cap 20mg dr</i>	QL (30 caps every 25 days), OTC
<i>acid reducer cap 15mg</i>	OTC
<i>gnp lansopra cap 15mg dr</i>	OTC
<i>lansoprazole cap delayed release 15 mg</i>	
<i>lansoprazole cap delayed release 15 mg</i>	OTC
PREVACID 24H CAP 15MG DR	OTC
<i>ft omeprazol tab 20mg</i>	OTC
<i>gnp omepraz tab 20mg</i>	OTC
<i>omeprazole delayed release tab 20 mg</i>	OTC
<i>omeprazole tab 20mg</i>	OTC
<i>qc omepraza tab 20mg</i>	OTC
<i>sm omepraza tab 20mg</i>	OTC
<i>omeprazole cap delayed release 10 mg</i>	QL (90 caps every year)
<i>omeprazole cap delayed release 20 mg</i>	QL (90 caps every year)
<i>omeprazole cap delayed release 40 mg</i>	QL (90 caps every year)
<i>acid reducer tab 20mg dr</i>	OTC
<i>omeprazole magnesium delayed release tab 20 mg (base equiv)</i>	OTC
<i>acid reducer cap 20.6mgdr</i>	OTC
<i>gnp omeprazo cap 20mg</i>	OTC
<i>omeprazole cap 20.6mgdr</i>	OTC
<i>omeprazole magnesium cap dr 20.6 mg (20 mg base equiv)</i>	OTC
<i>pantoprazole sodium ec tab 20 mg (base equiv)</i>	QL (90 tabs every year)
<i>pantoprazole sodium ec tab 40 mg (base equiv)</i>	QL (90 tabs every year)
MISC. ANTI-ULCER	
<i>sucralfate tab 1 gm</i>	

Drug Name	Requirements/Limits
ULCER THERAPY COMBINATIONS	
<i>omepra/bicar cap 20-1100</i>	QL (90 caps every year), OTC
ANTIEMETICS	
ANTIEMETICS - ANTICHOLINERGIC	
<i>meclizine hcl tab 12.5 mg</i>	
<i>meclizine hcl tab 12.5 mg</i>	OTC
<i>dramamine tab 25mg</i>	OTC
<i>eql motion tab sickness</i>	OTC
<i>ft motion tab 25mg</i>	OTC
<i>meclizine hcl tab 25 mg</i>	
<i>meclizine hcl tab 25 mg</i>	OTC
<i>medi-meclizi tab 25mg</i>	OTC
<i>motion sick tab 25mg</i>	OTC
<i>motion sickn tab 25 mg</i>	OTC
<i>travel-ease tab 25mg</i>	OTC
<i>bonine chw 25mg</i>	OTC
<i>dramamine chw motion</i>	OTC
<i>meclizine hcl chew tab 25 mg</i>	OTC
<i>motion sick chw 25mg</i>	OTC
<i>motion-time chw 25mg</i>	OTC
<i>travel ease chw 25mg</i>	OTC
<i>trimethobenzamide hcl cap 300 mg</i>	
5-HT3 RECEPTOR ANTAGONISTS	
<i>granisetron hcl tab 1 mg</i>	QL (6 tabs every 15 days)
<i>ondansetron orally disintegrating tab 4 mg</i>	QL (12 tabs every 15 days)
<i>ondansetron orally disintegrating tab 8 mg</i>	QL (12 tabs every 15 days)
<i>ondansetron hcl tab 4 mg</i>	QL (12 tabs every 15 days)
<i>ondansetron hcl tab 8 mg</i>	QL (12 tabs every 15 days)
<i>ondansetron hcl tab 24 mg</i>	QL (1 tab every 15 days)
<i>ondansetron hcl oral soln 4 mg/5ml</i>	QL (100 mL every 15 days)
SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS	
<i>aprepitant capsule 40 mg</i>	QL (3 caps every 180 days)
<i>aprepitant capsule 80 mg</i>	QL (4 caps every 21 days); 4 week limit
<i>aprepitant capsule 125 mg</i>	QL (2 caps every 21 days); 4 week limit
<i>aprepitant capsule therapy pack 80 & 125 mg</i>	QL (6 tabs every 21 days); 4 week limit
ANTIEMETICS - MISCELLANEOUS	
<i>dronabinol cap 2.5 mg</i>	QL (60 caps every 25 days)
<i>dronabinol cap 5 mg</i>	QL (60 caps every 25 days)
<i>dronabinol cap 10 mg</i>	QL (60 caps every 25 days)

Drug Name	Requirements/Limits
DIGESTIVE AIDS	
<i>DIGESTIVE ENZYMES</i>	
VIOKACE TAB 10440	
VIOKACE TAB 20880	
ZENPEP CAP 3000UNIT	
ZENPEP CAP 5000UNIT	
ZENPEP CAP 15000UNT	
ZENPEP CAP 20000UNT	
ZENPEP CAP 25000UNT	
ZENPEP CAP 40000UNT	
ZENPEP CAP 60000UNT	
GASTROINTESTINAL AGENTS - MISC.	
<i>GALLSTONE SOLUBILIZING AGENTS</i>	
<i>ursodiol cap 300 mg</i>	
<i>ursodiol tab 250 mg</i>	
<i>ursodiol tab 500 mg</i>	
<i>ANTIFLATULENTS</i>	
<i>eq gas relie cap 125mg</i>	OTC
<i>gas relief cap 125mg</i>	OTC
<i>gas-x cap 125mg</i>	OTC
<i>simethicone cap 125 mg</i>	OTC
<i>anti-gas cap 180mg</i>	OTC
<i>eq gas relie cap 180mg</i>	OTC
<i>eql gas rlf cap 180mg</i>	OTC
<i>gas relief cap 180mg</i>	OTC
<i>gas-x cap 180mg</i>	OTC
<i>gnp anti-gas cap 180mg</i>	OTC
<i>simethicone cap 180mg</i>	OTC
<i>sm gas relie cap 180mg</i>	OTC
<i>cvs gas relf chw 80mg</i>	OTC
<i>ft gas relf chw 80mg</i>	OTC
<i>gas relief chw 80mg</i>	OTC
<i>gnp gas relf chw 80mg</i>	OTC
<i>qc gas relf chw 80mg</i>	OTC
<i>ra gas relf chw 80mg</i>	OTC
<i>simethicone chew tab 80 mg</i>	OTC
<i>sm gas relf chw 80mg</i>	OTC
<i>sm gas relie chw 80mg</i>	OTC
<i>cvs gas relf chw 125mg</i>	OTC
<i>eql gas gone chw 125mg</i>	OTC
<i>ft gas relie chw 125mg</i>	OTC
<i>gas relief chw 125mg</i>	OTC

Drug Name	Requirements/Limits
<i>gnp gas relf chw 125mg</i>	OTC
<i>phazyme chw 125mg</i>	OTC
<i>qc gas relf chw 125mg</i>	OTC
<i>ra gas relf chw 125mg</i>	OTC
<i>sb gas relf chw 125mg</i>	OTC
<i>simethicone chew tab 125 mg</i>	OTC
<i>sm gas rel chw 125mg</i>	OTC
<i>gas relief liq infants</i>	OTC
<i>gas-x infant dro</i>	OTC
<i>gas relief dro 20/0.3ml</i>	OTC
<i>gas relief dro 40/0.6ml</i>	OTC
<i>gas relief dro infants</i>	OTC
<i>gas relief sus</i>	OTC
<i>gas relief sus infants</i>	OTC
<i>little remed dro 20/0.3ml</i>	OTC
<i>simeped dro 40/0.6ml</i>	OTC
<i>simethicone dro infants</i>	OTC
<i>simethicone susp 40 mg/0.6ml</i>	OTC
<i>teeny tummy dro 20/0.3ml</i>	OTC
GAS-X CHILD MIS 40MG	OTC
GAS-X EX-STR MIS 62.5MG	OTC

GASTROINTESTINAL STIMULANTS

<i>metoclopramide hcl tab 5 mg (base equivalent)</i>
<i>metoclopramide hcl tab 10 mg (base equivalent)</i>
<i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i>

INTESTINAL ACIDIFIERS

<i>enulose sol 10gm/15</i>
<i>generlac sol 10gm/15</i>
<i>lactulose (encephalopathy) solution 10 gm/15ml</i>

GASTROINTESTINAL CHLORIDE CHANNEL ACTIVATORS

<i>lubiprostone cap 8 mcg</i>
<i>lubiprostone cap 24 mcg</i>

INFLAMMATORY BOWEL AGENTS

<i>balsalazide disodium cap 750 mg</i>	
PENTASA CAP 250MG CR	PA
<i>mesalamine enema 4 gm</i>	
<i>mesalamine suppos 1000 mg</i>	
<i>mesalamine cap er 24hr 0.375 gm</i>	
<i>mesalamine rectal enema 4 gm & cleanser wipe kit</i>	
<i>sulfasalazine tab 500 mg</i>	
<i>sulfasalazine tab delayed release 500 mg</i>	

Drug Name	Requirements/Limits
ENTYVIO INJ 300MG	SP, PA, QL (1 vial every 42 days)
ENTYVIO INJ 108/0.68	SP, PA, QL (2 pens every 28 days)
SKYRIZI SOL 60MG/ML	SP, PA, QL (3 vials every 42 days)
SKYRIZI INJ 180/1.2	SP, PA, QL (1.2 mL every 42 days)
SKYRIZI INJ 360/2.4	SP, PA, QL (2.4 mL every 42 days)
AVSOLA INJ 100MG	SP, PA, QL (3 vials every 28 days)

PHOSPHATE BINDER AGENTS

calcium acetate (phosphate binder) cap 667 mg (169 mg ca)

sevelamer carbonate tab 800 mg ST

sevelamer carbonate packet 0.8 gm ST

sevelamer carbonate packet 2.4 gm ST

URINARY ANTISPASMODICS

URINARY ANTISPASMODIC - ANTIMUSCARINICS (ANTICHOLINERGIC)

OXYTROL/WOMN DIS 3.9MG/24 GNDR, OTC

oxybutynin chloride tab 5 mg

oxybutynin chloride solution 5 mg/5ml

oxybutynin chloride tab er 24hr 5 mg

oxybutynin chloride tab er 24hr 10 mg

oxybutynin chloride tab er 24hr 15 mg

tropium chloride tab 20 mg

URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS

bethanechol chloride tab 5 mg

bethanechol chloride tab 10 mg

bethanechol chloride tab 25 mg

bethanechol chloride tab 50 mg

VAGINAL AND RELATED PRODUCTS

VAGINAL ANTI-INFECTIVES

clindamycin phosphate vaginal cream 2%

metronidazole vaginal gel 0.75%

clotrimazole vaginal cream 1% OTC

qc clotrimaz cre 1% OTC

clotrimazole cre 2% OTC

clotrimazole cre 3 day OTC

3 day vaginl cre 2% OTC

cvs miconazo cre 7 OTC

Drug Name	Requirements/Limits
<i>miconazole 7 cre</i>	OTC
<i>miconazole 7 cre 2%</i>	OTC
<i>miconazole 7 cre tube/kit</i>	OTC
<i>miconazole nitrate vaginal cream 2%</i>	OTC
<i>3 day vaginal cre 4%</i>	OTC
<i>miconazole 7 sup 100mg</i>	OTC
<i>sm micon 7 sup 100mg</i>	OTC
<i>miconazole 3 sup 200mg</i>	
<i>miconazole 3 kit combo pk</i>	OTC
<i>vagistat-3 kit combo pk</i>	OTC
<i>miconazole 1 kit</i>	OTC
<i>miconazole 1 kit 1200-2%</i>	OTC
MONISTAT 7 KIT COMBO PK	OTC
<i>miconazole 3 kit combinat</i>	OTC
<i>miconazole 3 kit combo</i>	OTC
MONISTAT 7 KIT COMPLETE	OTC
MONISTAT 3 KIT COMBO PK	OTC
MICONAZOLE 1 KIT COMBO	OTC
<i>terconazole vaginal cream 0.4%</i>	
<i>terconazole vaginal cream 0.8%</i>	
<i>terconazole vaginal suppos 80 mg</i>	

VAGINAL ANTI-INFLAMMATORY AGENTS

<i>cortiz femin cre 1% itch</i>	OTC
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SPERMICIDES

GYNOL II GEL 3%	OTC; \$0
VCF VAGINAL GEL CONTRACE	OTC; \$0
ENCARE SUP 100MG	OTC; \$0
VCF VAGINAL MIS CONTRACP	OTC; \$0

VAGINAL ESTROGENS

<i>estradiol vaginal tab 10 mcg</i>	
<i>yuvafem tab 10mcg</i>	

MISCELLANEOUS VAGINAL PRODUCTS

<i>acetic acid vaginal solution</i>	OTC
<i>ex cleansing sol</i>	OTC
<i>summers eve sol ex clean</i>	OTC

GENITOURINARY AGENTS - MISCELLANEOUS

ALKALINIZERS

<i>potassium citrate tab er 5 meq (540 mg)</i>	
<i>potassium citrate tab er 10 meq (1080 mg)</i>	
<i>potassium citrate tab er 15 meq (1620 mg)</i>	

URINARY ANALGESICS

<i>phenazopyridine hcl tab 100 mg</i>	
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Drug Name	Requirements/Limits
<i>phenazo tab 200mg</i>	
<i>phenazopyridine hcl tab 200 mg</i>	
PROSTATIC HYPERTROPHY AGENTS	
<i>finasteride tab 5 mg</i>	
<i>alfuzosin hcl tab er 24hr 10 mg</i>	
<i>tamsulosin hcl cap 0.4 mg</i>	
ANTIPSYCHOTICS/ANTIMANIC AGENTS	
PHENOTHIAZINES	
<i>compro sup 25mg</i>	
<i>prochlorperazine suppos 25 mg</i>	
<i>prochlorperazine maleate tab 5 mg (base equivalent)</i>	
<i>prochlorperazine maleate tab 10 mg (base equivalent)</i>	
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS	
BARBITURATE HYPNOTICS	
<i>phenobarbital tab 15 mg</i>	
<i>phenobarbital tab 16.2 mg</i>	
<i>phenobarbital tab 30 mg</i>	
<i>phenobarbital tab 32.4 mg</i>	
<i>phenobarbital tab 60 mg</i>	
<i>phenobarbital tab 64.8 mg</i>	
<i>phenobarbital tab 97.2 mg</i>	
<i>phenobarbital tab 100 mg</i>	
<i>phenobarbital elixir 20 mg/5ml</i>	
ANTIHISTAMINE HYPNOTICS	
<i>ft sleep aid tab 25mg</i>	OTC
<i>ra sleep aid tab 25mg</i>	OTC
<i>sleep aid tab 25mg</i>	OTC
<i>sleep-aid tab 25mg</i>	OTC
<i>sm sleep aid tab 25mg</i>	OTC
<i>ultra sleep tab 25mg</i>	OTC
<i>wal-som tab 25mg</i>	OTC
<i>ft sleep-aid cap 50mg</i>	OTC
<i>qc sleep aid cap 50mg</i>	OTC
<i>qc sleep-aid cap 50mg</i>	OTC
<i>ra sleep aid cap 50mg</i>	OTC
<i>sleep aid cap 50mg</i>	OTC
<i>sleep-aid cap 50mg</i>	OTC
<i>sleep-aid ms cap 50mg</i>	OTC
<i>wal-som cap 50mg</i>	OTC
<i>ft nite slp tab 25mg</i>	OTC
<i>night time tab 25mg</i>	OTC
<i>nighttime tab 25mg</i>	OTC

Drug Name	Requirements/Limits
<i>nytol quick tab 25mg</i>	OTC
<i>ra nighttime tab 25mg</i>	OTC
<i>ra sleep aid tab 25mg</i>	OTC
<i>rest simply tab 25mg</i>	OTC
<i>sb sleep tab 25mg</i>	OTC
<i>simply sleep tab 25mg</i>	OTC
<i>sleep aid tab 25mg</i>	OTC
<i>sleep tab 25mg</i>	OTC
<i>sleep-aid tab 25mg</i>	OTC
<i>sleep-tabs tab 25mg</i>	OTC
<i>sm nighttime tab 25mg</i>	OTC
<i>sominex nigh tab 25mg</i>	OTC
<i>sominex tab 25mg</i>	OTC
<i>diphenhydramine hcl (sleep) tab 50 mg</i>	OTC
<i>sominex max tab 50mg</i>	OTC

ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS

ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) AGENTS

<i>clonidine hcl tab er 12hr 0.1 mg</i>	AGE (less than 6, more than 17)
<i>guanfacine hcl tab er 24hr 1 mg (base equiv)</i>	AGE (less than 6, more than 17)
INTUNIV TAB 1MG	AGE (less than 6, more than 17)
<i>guanfacine hcl tab er 24hr 2 mg (base equiv)</i>	AGE (less than 6, more than 17)
INTUNIV TAB 2MG	AGE (less than 6, more than 17)
<i>guanfacine hcl tab er 24hr 3 mg (base equiv)</i>	AGE (less than 6, more than 17)
INTUNIV TAB 3MG	AGE (less than 6, more than 17)
<i>guanfacine hcl tab er 24hr 4 mg (base equiv)</i>	AGE (less than 6, more than 17)
INTUNIV TAB 4MG	AGE (less than 6, more than 17)

PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.

ANTIDEMENTIA AGENTS

<i>donepezil hydrochloride tab 5 mg</i>
<i>donepezil hydrochloride tab 10 mg</i>
<i>donepezil hydrochloride tab 23 mg</i>
<i>donepezil hydrochloride orally disintegrating tab 5 mg</i>
<i>donepezil hydrochloride orally disintegrating tab 10 mg</i>
<i>galantamine hydrobromide tab 4 mg</i>
<i>galantamine hydrobromide tab 8 mg</i>
<i>galantamine hydrobromide tab 12 mg</i>
<i>galantamine hydrobromide oral soln 4 mg/ml</i>
<i>galantamine hydrobromide cap er 24hr 8 mg</i>
<i>galantamine hydrobromide cap er 24hr 16 mg</i>
<i>galantamine hydrobromide cap er 24hr 24 mg</i>
<i>rivastigmine td patch 24hr 4.6 mg/24hr</i>
<i>rivastigmine td patch 24hr 9.5 mg/24hr</i>

Drug Name	Requirements/Limits
<i>rivastigmine td patch 24hr 13.3 mg/24hr</i>	
<i>rivastigmine tartrate cap 1.5 mg (base equivalent)</i>	
<i>rivastigmine tartrate cap 3 mg (base equivalent)</i>	
<i>rivastigmine tartrate cap 4.5 mg (base equivalent)</i>	
<i>rivastigmine tartrate cap 6 mg (base equivalent)</i>	
<i>memantine hcl tab 5 mg</i>	
<i>memantine hcl tab 10 mg</i>	
<i>memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack</i>	
<i>memantine hcl oral solution 2 mg/ml</i>	

MOVEMENT DISORDER DRUG THERAPY

AUSTEDO TAB 6MG	SP, PA, QL (2 tabs every 1 day)
AUSTEDO TAB 9MG	SP, PA, QL (4 tabs every 1 day)
AUSTEDO TAB 12MG	SP, PA, QL (4 tabs every 1 day)
AUSTEDO XR TAB 6MG	SP, PA, QL (3 tabs every 1 day)
AUSTEDO XR TAB 12MG	SP, PA, QL (4 tabs every 1 day)
AUSTEDO XR TAB 24MG	SP, PA, QL (2 tabs every 1 day)
AUSTEDO XR TAB TITR KIT	SP, PA, QL (42 tabs every 28 days)

MULTIPLE SCLEROSIS AGENTS

<i>glatiramer acetate soln prefilled syringe 20 mg/ml</i>	SP, PA, QL (1 injection every 1 day)
<i>glatopa inj 20mg/ml</i>	SP, PA, QL (1 injection every 1 day)
<i>glatiramer acetate soln prefilled syringe 40 mg/ml</i>	SP, PA, QL (12 injections every 28 days)
<i>glatopa inj 40mg/ml</i>	SP, PA, QL (12 injections every 28 days)
REBIF REBIDO INJ 22/0.5	SP, PA, QL (12 injections every 28 days)
REBIF REBIDO INJ 44/0.5	SP, PA, QL (12 injections every 28 days)
REBIF REBIDO INJ TITRATN	SP, PA, QL (12 injections every 28 days)
REBIF INJ 22/0.5	SP, PA, QL (12 injections every 28 days)
REBIF INJ 44/0.5	SP, PA, QL (12 injections every 28 days)
REBIF TITRTN INJ PACK	SP, PA, QL (12 injections every 28 days)
AVONEX PEN KIT 30MCG	SP, PA, QL (4 injections every 28 days)
AVONEX PREFL KIT 30MCG	SP, PA, QL (4 injections every 28 days)

Drug Name	Requirements/Limits
EXTAVIA INJ 0.3MG	SP, PA, QL (15 injections every 30 days)
<i>teriflunomide tab 7 mg</i>	SP, PA, QL (1 tab every 1 day)
<i>teriflunomide tab 14 mg</i>	SP, PA, QL (1 tab every 1 day)
OCREVUS INJ 300/10ML	SP, PA, QL (2 vials every 24 weeks)
<i>dimethyl fumarate capsule delayed release 120 mg</i>	SP, PA, QL (14 caps every 28 days)
<i>dimethyl fumarate capsule delayed release 240 mg</i>	SP, PA, QL (2 caps every 1 day)
<i>dimethyl fumarate capsule dr starter pack 120 mg & 240 mg</i>	SP, PA, QL (1 kit every month)
VUMERITY CAP 231MG	SP, PA, QL (4 caps every 1 day)
<i> fingolimod hcl cap 0.5 mg (base equiv)</i>	SP, PA, QL (1 cap every 1 day)
MAYZENT TAB 0.25MG	SP, PA, QL (12 tabs every 5 days)
MAYZENT TAB 1MG	SP, PA, QL (1 tab every 1 day)
MAYZENT TAB 2MG	SP, PA, QL (1 tab every 1 day)
MAYZENT PAK STARTER (7 TABS)	SP, PA, QL (7 tabs every 4 days)
MAYZENT PAK STARTER (12 TABS)	SP, PA, QL (12 tabs every 5 days)

ANTI-CATAPLECTIC AGENTS

SOD OXYBATE SOL 500MG/ML	SP, PA, QL (18 mL every 1 day)
XYREM SOL 500MG/ML	SP, PA, QL (18 mL every 1 day)

FIBROMYALGIA AGENTS

SAVELLA TAB 12.5MG	PA
SAVELLA TAB 25MG	PA
SAVELLA TAB 50MG	PA
SAVELLA TAB 100MG	PA
SAVELLA MIS TITR PAK	PA

PSEUDOBULBAR AFFECT (PBA) AGENTS

NUEDEXTA CAP 20-10MG	PA
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ANALGESICS - NONNARCOTIC

SALICYLATES

<i>aspirin tab 325 mg</i>	OTC
<i>bayer adv tab 325mg</i>	OTC
<i>bayer asa tab 325mg</i>	OTC
<i>cvs aspirin tab 325mg</i>	OTC
<i>eq aspirin tab 325mg</i>	OTC
<i>ft aspirin tab 325mg</i>	OTC
<i>genuine asa tab 325mg</i>	OTC
<i>genuine aspr tab 325mg</i>	OTC
<i>gnp aspirin tab 325mg</i>	OTC

Drug Name	Requirements/Limits
<i>hm aspirin tab 325mg</i>	OTC
<i>medi-first tab 325 asp</i>	OTC
<i>medique aspi tab 325mg</i>	OTC
<i>qc aspirin tab 325mg</i>	OTC
<i>ra aspirin tab 325mg</i>	OTC
<i>sb aspirin tab 325mg</i>	OTC
<i>bayer adv tab 500mg</i>	OTC
<i>aspirin chew tab 81 mg</i>	OTC
<i>aspirin chld chw 81mg</i>	OTC
<i>aspirin low chw 81mg</i>	OTC
<i>aspirin-81 chw 81mg</i>	OTC
<i>bayer low chw 81mg</i>	OTC
<i>child asa chw 81mg</i>	OTC
<i>eq aspirin chw 81mg</i>	OTC
<i>eql aspirin chw 81mg</i>	OTC
<i>gnp aspirin chw 81mg</i>	OTC
<i>qc aspirin chw 81mg</i>	OTC
<i>qc child asa chw 81mg</i>	OTC
<i>ra aspirin chw 81mg</i>	OTC
<i>sb child asa chw 81mg</i>	OTC
<i>sm aspirin chw 81mg</i>	OTC
<i>sm child asa chw 81mg</i>	OTC
<i>st joseph chw low 81mg</i>	OTC
<i>aspirin 81 tab 81mg ec</i>	OTC
<i>aspirin adlt tab 81mg ec</i>	OTC
<i>aspirin low tab 81mg</i>	OTC
<i>aspirin low tab 81mg ec</i>	OTC
<i>aspirin regi tab 81mg</i>	OTC
<i>aspirin tab delayed release 81 mg</i>	OTC
<i>bayer low tab 81mg ec</i>	OTC
<i>cvs aspirin tab 81mg ec</i>	OTC
<i>ecotrin low tab 81mg ec</i>	OTC
<i>ft aspirin tab 81mg</i>	OTC
<i>gnp aspirin tab 81mg ec</i>	OTC
<i>goodsense tab 81mg ec</i>	OTC
<i>kls aspirin tab 81mg ec</i>	OTC
<i>kp aspirin tab 81mg ec</i>	OTC
<i>mm aspirin tab low dose</i>	OTC
<i>ra aspirin tab 81mg ec</i>	OTC
<i>sm aspirin tab 81mg ec</i>	OTC
<i>st joseph tab low 81mg</i>	OTC
<i>aspirin tab delayed release 325 mg</i>	OTC
<i>bayer asa tab 325mg</i>	OTC

Drug Name	Requirements/Limits
<i>bayer aspiri tab 325mg ec</i>	OTC
<i>enteric asa tab 325mg ec</i>	OTC
<i>eql aspirin tab 325mg ec</i>	OTC
<i>ft aspirin tab 325mg ec</i>	OTC
<i>gnp aspirin tab 325mg ec</i>	OTC
<i>hm aspirin tab 325mg ec</i>	OTC
<i>qc aspirin tab 325mg ec</i>	OTC
<i>ra aspirin tab 325mg ec</i>	OTC
<i>sb aspirin tab 325mg ec</i>	OTC
<i>sm aspirin tab 325mg ec</i>	OTC
ASPIRIN SUP 300MG	OTC
<i>diflunisal tab 500 mg</i>	

ANALGESICS OTHER

<i>mapap cap 500mg</i>	OTC
<i>pain relief cap 500mg</i>	OTC
<i>acetaminophen tab 325 mg</i>	OTC
<i>aspirin free tab 325mg</i>	OTC
<i>cvs acetamin tab 325mg</i>	OTC
<i>eql acetamin tab 325mg</i>	OTC
<i>ft pain relf tab 325mg</i>	OTC
<i>gnp acetamin tab 325mg</i>	OTC
<i>non-aspirin tab 325mg</i>	OTC
<i>pain relief tab 325mg</i>	OTC
<i>pain relieve tab 325mg</i>	OTC
<i>pain relievr tab 325mg</i>	OTC
<i>pharbetol tab 325mg</i>	OTC
<i>ra acetamin tab 325mg</i>	OTC
<i>acetaminophen tab 500 mg</i>	OTC
<i>acetaminophn tab 500mg</i>	OTC
<i>eq acetamin tab 500mg</i>	OTC
<i>eql acetamin tab 500mg</i>	OTC
<i>ft pain reli tab 500mg</i>	OTC
<i>gnp pain rel tab 500mg</i>	OTC
<i>medi-tabs tab 500mg</i>	OTC
<i>mm acetamino tab 500mg</i>	OTC
<i>non-aspirin tab 500mg</i>	OTC
<i>non-aspirin tab 500mg/rr</i>	OTC
<i>pain relief tab 500mg</i>	OTC
<i>pain relief tab 500mg/rr</i>	OTC
<i>pain relieve tab 500mg</i>	OTC
<i>pain relieve tab 500mg/rr</i>	OTC
<i>pain relievr tab 500mg</i>	OTC
<i>panadol tab 500mg</i>	OTC

Drug Name	Requirements/Limits
<i>pharbetol tab 500mg</i>	OTC
<i>shake ache tab 500mg</i>	OTC
<i>sm pain rel tab 500mg</i>	OTC
<i>acetamin er tab 650mg</i>	OTC
<i>acetaminophen tab er 650 mg</i>	OTC
<i>arthrts pain tab 650mg</i>	OTC
<i>arthrts pain tab 650mg er</i>	OTC
<i>ft 8hr pain tab 650mg</i>	OTC
<i>hm pain rlf tab 650mg</i>	OTC
<i>8 hour pain tab 650mg</i>	OTC
<i>8hr arthrits tab 650mg er</i>	OTC
<i>8 hr arthrts tab 650mg</i>	OTC
<i>8hr pain er tab 650mg</i>	OTC
<i>8hr pain rel tab 650mg</i>	OTC
<i>8 hr pain tab 650mg</i>	OTC
<i>8 hr pain tab 650mg er</i>	OTC
<i>midol tab 650mg</i>	OTC
<i>non-aspirin tab 650mg</i>	OTC
<i>pain relief tab 650mg</i>	OTC
<i>qc 8 hr pain tab 650mg er</i>	OTC
<i>qc apap 8 hr tab 650mg</i>	OTC
<i>sm 8 hr pain tab 650mg</i>	OTC
<i>sm arthrts p tab 650mg</i>	OTC
<i>childrens chw apap</i>	OTC
<i>chld meditab chw 80mg</i>	OTC
<i>chld non-asa chw 80mg grp</i>	OTC
<i>cvs childs chw 80mg</i>	OTC
<i>mapap child chw 80mg</i>	OTC
<i>non-aspirin chw 80mg</i>	OTC
<i>pain relievr chw 80mg</i>	OTC
<i>sb non-asa chw 80mg frt</i>	OTC
<i>sb non-asa chw 80mg grp</i>	OTC
<i>acetaminophen chew tab 160 mg</i>	OTC
<i>asa free chw 160mg jr</i>	OTC
<i>ft chld pain chw 160mg</i>	OTC
<i>mapap chw 160mg</i>	OTC
<i>medi-tabs jr chw 160mg</i>	OTC
<i>non-aspirin chw 160mg</i>	OTC
<i>non-aspirin chw 160mg jr</i>	OTC
<i>pain & fever chw 160mg</i>	OTC
<i>pain relief chw 160mg</i>	OTC
<i>sb non-asa chw 160mg</i>	OTC
<i>acetaminophe liq 160/5ml</i>	OTC

Drug Name	Requirements/Limits
<i>acetaminophen liquid 160 mg/5ml</i>	OTC
<i>chld silapap liq 160/5ml</i>	OTC
<i>curanol liq 160/5ml</i>	OTC
<i>ed-apap liq 80mg/2.5</i>	OTC
<i>little remed liq 160/5ml</i>	OTC
<i>m-pap liq 160/5ml</i>	OTC
<i>pain & fever liq 160/5ml</i>	OTC
<i>pain relief liq 160/5ml</i>	OTC
<i>acetamin liq 500/15ml</i>	OTC
<i>mapap apap liq 500/15ml</i>	OTC
<i>pain relief liq 500/15ml</i>	OTC
<i>pain relievr liq 500/15ml</i>	OTC
<i>qc pain reli liq 500/15ml</i>	OTC
<i>apra elx 160/5ml</i>	OTC
<i>chld asafree elx 80/2.5ml</i>	OTC
<i>max reliefjr elx 160/5ml</i>	OTC
<i>medi-tabs elx 80/2.5ml</i>	OTC
<i>pain relief elx 160/5ml</i>	OTC
<i>acetaminophen susp 160 mg/5ml</i>	OTC
<i>betatemp sus 160/5ml</i>	OTC
<i>fever/pain sus 160/5ml</i>	OTC
<i>gnp children sus pain&fev</i>	OTC
<i>maxrelief jr sus 160/5ml</i>	OTC
<i>non-aspirin sus 160/5ml</i>	OTC
<i>pain & fever sus 160/5ml</i>	OTC
<i>pain relief sus 160/5ml</i>	OTC
<i>pain relieve sus 160/5ml</i>	OTC
<i>panadol sus 160/5ml</i>	OTC
<i>pediacare sus 160/5ml</i>	OTC
<i>qc acetamino sus 160/5ml</i>	OTC
<i>ra childrens sus 160/5ml</i>	OTC
<i>acetaminophen soln 160 mg/5ml</i>	OTC
FEVERALL INF SUP 80MG	OTC
<i>acetaminophen suppos 120 mg</i>	OTC
<i>feverall sup 120mg</i>	OTC
<i>fevr reducng sup 120mg</i>	OTC
<i>pain/fever sup 120mg</i>	OTC
FEVERALL SUP 325MG	OTC
<i>acetaminophen suppos 650 mg</i>	OTC
<i>feverall sup 650mg</i>	OTC
<i>apap rapid tab tab 80mg</i>	OTC
<i>chld non-asa tab 80mg qm</i>	OTC
<i>acetaminophe tab 160mg</i>	OTC

Drug Name	Requirements/Limits
<i>non-asa jr tab 160mg qm</i>	OTC
<i>sm rpd melt tab 160mg</i>	OTC

ANALGESICS - OPIOID

OPIOID AGONISTS

<i>fentanyl td patch 72hr 12 mcg/hr</i>	PA, QL (10 patches every 25 days)
<i>fentanyl td patch 72hr 25 mcg/hr</i>	PA, QL (10 patches every 25 days)
<i>fentanyl td patch 72hr 50 mcg/hr</i>	PA, QL (10 patches every 25 days)
<i>fentanyl td patch 72hr 75 mcg/hr</i>	PA, QL (10 patches every 25 days)
<i>fentanyl td patch 72hr 100 mcg/hr</i>	PA, QL (10 patches every 25 days)
<i>hydromorphone hcl tab 2 mg</i>	PA, QL (180 tabs every 25 days)
<i>hydromorphone hcl tab 4 mg</i>	PA, QL (120 tabs every 25 days)
<i>hydromorphone hcl tab 8 mg</i>	PA, QL (60 tabs every 25 days)
<i>methadone hcl tab 5 mg</i>	PA, QL (90 tabs every 25 days)
<i>methadone hcl tab 10 mg</i>	PA, QL (30 tabs every 25 days)
<i>morphine sulfate tab 15 mg</i>	PA, QL (180 tabs every 25 days)
<i>morphine sulfate tab 30 mg</i>	PA, QL (90 tabs every 25 days)
<i>morphine sulfate tab er 15 mg</i>	PA, QL (90 tabs every 25 days)
<i>morphine sulfate tab er 30 mg</i>	PA, QL (90 tabs every 25 days)
<i>morphine sulfate tab er 60 mg</i>	PA, QL (90 tabs every 25 days)
<i>morphine sulfate tab er 100 mg</i>	PA, QL (60 tabs every 25 days)
<i>morphine sulfate tab er 200 mg</i>	PA, QL (60 tabs every 25 days)
<i>morphine sulfate oral soln 10 mg/5ml</i>	PA, QL (900 mL every 25 days)
<i>morphine sulfate oral soln 20 mg/5ml</i>	PA, QL (675 mL every 25 days)
<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	PA, QL (135 mL every 25 days)
<i>oxycodone hcl cap 5 mg</i>	PA, QL (180 caps every 25 days)
<i>oxycodone hcl tab 5 mg</i>	PA, QL (180 tabs every 25 days)
<i>oxycodone hcl tab 10 mg</i>	PA, QL (180 tabs every 25 days)
<i>oxycodone hcl tab 15 mg</i>	PA, QL (120 tabs every 25 days)
<i>oxycodone hcl tab 20 mg</i>	PA, QL (90 tabs every 25 days)
<i>oxycodone hcl tab 30 mg</i>	PA, QL (60 tabs every 25 days)
<i>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</i>	PA, QL (90 mL every 25 days)

Drug Name	Requirements/Limits
<i>oxycodone hcl soln 5 mg/5ml</i>	PA, QL (900 mL every 25 days)
<i>tramadol hcl tab 50 mg</i>	PA, QL (180 tabs every 25 days)
<i>tramadol hcl tab er 24hr 100 mg</i>	PA, QL (30 tabs every 25 days)
<i>tramadol hcl tab er 24hr 200 mg</i>	PA, QL (30 tabs every 25 days)
<i>tramadol hcl tab er 24hr 300 mg</i>	PA, QL (30 tabs every 25 days)

OPIOID COMBINATIONS

<i>endocet tab 2.5-325</i>	PA, QL (360 tabs every 25 days)
<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	PA, QL (360 tabs every 25 days)
<i>endocet tab 5-325mg</i>	PA, QL (360 tabs every 25 days)
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	PA, QL (360 tabs every 25 days)
<i>endocet tab 7.5-325</i>	PA, QL (240 tabs every 25 days)
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	PA, QL (240 tabs every 25 days)
<i>endocet tab 10-325mg</i>	PA, QL (180 tabs every 25 days)
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	PA, QL (180 tabs every 25 days)
<i>acetaminophen w/ codeine tab 300-15 mg</i>	PA, QL (400 tabs every 25 days)
<i>acetaminophen w/ codeine tab 300-30 mg</i>	PA, QL (360 tabs every 25 days)
<i>acetaminophen w/ codeine tab 300-60 mg</i>	PA, QL (180 tabs every 25 days)
<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	PA, QL (2700 mL every 25 days)
<i>hydrocodone-acetaminophen tab 10-325 mg</i>	PA, QL (180 tabs every 25 days)
<i>hydrocodone-acetaminophen tab 5-325 mg</i>	PA, QL (240 tabs every 25 days)
<i>hydrocodone-acetaminophen tab 7.5-325 mg</i>	PA, QL (180 tabs every 25 days)
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	PA, QL (2700 mL every 25 days)
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	PA, QL (40 tabs every 25 days)

ANALGESICS - ANTI-INFLAMMATORY

NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)

<i>diclofenac potassium tab 50 mg</i>	
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Drug Name	Requirements/Limits
<i>diclofenac sodium tab delayed release 25 mg</i>	
<i>diclofenac sodium tab delayed release 50 mg</i>	
<i>diclofenac sodium tab delayed release 75 mg</i>	
<i>diclofenac sodium tab er 24hr 100 mg</i>	
<i>etodolac cap 200 mg</i>	
<i>etodolac cap 300 mg</i>	
<i>etodolac tab 400 mg</i>	
<i>etodolac tab 500 mg</i>	
<i>etodolac tab er 24hr 400 mg</i>	
<i>etodolac tab er 24hr 500 mg</i>	
<i>etodolac tab er 24hr 600 mg</i>	
<i>flurbiprofen tab 50 mg</i>	
<i>flurbiprofen tab 100 mg</i>	
<i>advil minis cap 200mg</i>	OTC
<i>ft ibuprofen cap 200mg</i>	OTC
<i>ibuprofen cap 200mg</i>	OTC
<i>medi-profen cap 200mg</i>	OTC
<i>motrin ib cap 200mg</i>	OTC
<i>proprinal cap 200mg</i>	OTC
<i>qc ibuprofen cap 200mg</i>	OTC
<i>ra ibuprofen cap 200mg</i>	OTC
<i>sm ibuprofen cap 200mg</i>	OTC
<i>wal-profen cap 200mg</i>	OTC
<i>advil jr st tab 100mg</i>	OTC
<i>sm ibuprofen tab 100mg jr</i>	OTC
<i>eq ibuprofen tab 200mg</i>	OTC
<i>ft ibuprofen tab 200mg</i>	OTC
<i>ft pain reli tab 200mg</i>	OTC
<i>ibuprofen tab 200 mg</i>	OTC
<i>kls ibuprofn tab 200mg</i>	OTC
<i>kls ibuprofn tab ib 200mg</i>	OTC
<i>medi-first tab ibu 200</i>	OTC
<i>medi-profen tab 200mg</i>	OTC
<i>mm ibuprofen tab 200mg</i>	OTC
<i>motrin ib tab 200mg</i>	OTC
<i>pain relief tab 200mg</i>	OTC
<i>qc ibuprofen tab 200mg</i>	OTC
<i>ra ibuprofen tab 200mg</i>	OTC
<i>sb ibuprofen tab 200mg</i>	OTC
<i>sm ibuprofen tab 200mg</i>	OTC
<i>wal-profen tab 200mg</i>	OTC
<i>ibu tab 400mg</i>	
<i>ibuprofen tab 400 mg</i>	

Drug Name	Requirements/Limits
<i>ibu tab 600mg</i>	
<i>ibuprofen tab 600 mg</i>	
<i>ibu tab 800mg</i>	
<i>ibuprofen tab 800 mg</i>	
<i>advil jr str chw 100mg</i>	OTC
<i>gs ibuprofen chw children</i>	OTC
<i>ibuprofen chw 100mg</i>	OTC
<i>ibuprofen ib chw 100mg</i>	OTC
<i>ibuprofen jr chw 100mg</i>	OTC
<i>ibuprofn 100 chw jr 100mg</i>	OTC
<i>sm ibuprofen chw 100mg</i>	OTC
<i>cvs ibuprof dro 50/1.25</i>	OTC
<i>ibuprofen dro 50/1.25</i>	OTC
<i>medi-profen sus 40mg/ml</i>	OTC
<i>cvs ibuprofe sus 100/5ml</i>	OTC
<i>eq ibuprofen sus 100/5ml</i>	OTC
<i>ft ibu child sus 100/5ml</i>	OTC
<i>hyvee ibupro sus 100mg/5m</i>	OTC
<i>ibuprofen sus 100/5ml</i>	OTC
<i>ibuprofen sus 200/10ml</i>	OTC
<i>ibuprofen susp 100 mg/5ml</i>	
<i>medi-profen sus 100/5ml</i>	OTC
<i>qc ibuprofen sus 100/5ml</i>	OTC
<i>ketorolac tromethamine tab 10 mg</i>	QL (20 tabs every 25 days)
<i>meloxicam tab 7.5 mg</i>	
<i>meloxicam tab 15 mg</i>	
<i>nabumetone tab 500 mg</i>	
<i>nabumetone tab 750 mg</i>	
<i>naproxen tab 250 mg</i>	
<i>naproxen tab 375 mg</i>	
<i>naproxen tab 500 mg</i>	
<i>ec-naproxen tab 375mg</i>	
<i>naproxen tab ec 375 mg</i>	
<i>ec-naproxen tab 500mg</i>	
<i>naproxen tab ec 500 mg</i>	
<i>ft naproxen cap 220mg</i>	OTC
<i>gnp naproxen cap 220mg</i>	OTC
<i>naproxen sod cap 220mg</i>	OTC
<i>qc naproxen cap 220mg</i>	OTC
<i>all day pain tab 220mg</i>	OTC
<i>all day relf tab 220mg</i>	OTC
<i>cvs naproxen tab 220mg</i>	OTC
<i>mediproxen tab 220mg</i>	OTC

Drug Name	Requirements/Limits
<i>naproxen sod tab 220mg</i>	OTC
<i>naproxen tab 220mg</i>	OTC
<i>pain relief tab 220mg</i>	OTC
<i>pamprin tab 220mg</i>	OTC
<i>oxaprozin tab 600 mg</i>	
<i>sulindac tab 150 mg</i>	
<i>sulindac tab 200 mg</i>	
<i>celecoxib cap 50 mg</i>	PA
<i>celecoxib cap 100 mg</i>	PA
<i>celecoxib cap 200 mg</i>	PA
<i>celecoxib cap 400 mg</i>	PA

ANTIRHEUMATIC ANTIMETABOLITES

RASUVO INJ 7.5MG	SP, PA, QL (4 injections every 28 days)
RASUVO INJ 10MG	SP, PA, QL (4 injections every 28 days)
RASUVO INJ 12.5MG	SP, PA, QL (4 injections every 28 days)
RASUVO INJ 15MG	SP, PA, QL (4 injections every 28 days)
RASUVO INJ 17.5MG	SP, PA, QL (4 injections every 28 days)
RASUVO INJ 20MG	SP, PA, QL (4 injections every 28 days)
RASUVO INJ 22.5MG	SP, PA, QL (4 injections every 28 days)
RASUVO INJ 25MG	SP, PA, QL (4 injections every 28 days)
RASUVO INJ 30MG	SP, PA, QL (4 injections every 28 days)

ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES

ADALIMU-ADAZ INJ 40/0.4ML	SP, PA, QL (4 pens every 28 days)
ADALIMU-ADAZ INJ 40/0.4ML	SP, PA, QL (4 syringes every 28 days)
HADLIMA PUSH INJ 40/0.4ML	SP, PA, QL (4 pens every 28 days)
HADLIMA PUSH INJ 40/0.8ML	SP, PA, QL (4 pens every 28 days)
HADLIMA INJ 40/0.4ML	SP, PA, QL (4 syringes every 28 days)
HADLIMA INJ 40/0.8ML	SP, PA, QL (4 syringes every 28 days)

Drug Name	Requirements/Limits
ADALIMU-FKJP KIT 40/0.8ML	SP, PA, QL (4 pens every 28 days)
ADALIMU-FKJP KIT 20/0.4ML	SP, PA, QL (4 syringes every 28 days)
ADALIMU-FKJP KIT 40/0.8ML	SP, PA, QL (4 syringes every 28 days)

PYRIMIDINE SYNTHESIS INHIBITORS

leflunomide tab 10 mg

leflunomide tab 20 mg

SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS

ENBREL SRCLK INJ 50MG/ML	SP, PA, QL (4 pens every 28 days)
ENBREL MINI INJ 50MG/ML	SP, PA, QL (4 pens every 28 days)
ENBREL INJ 25/0.5ML	SP, PA, QL (4 syringes every 28 days)
ENBREL INJ 50MG/ML	SP, PA, QL (4 pens every 28 days)

INTERLEUKIN-1BETA BLOCKERS

ILARIS INJ 150MG/ML SP, PA

INTERLEUKIN-6 RECEPTOR INHIBITORS

KEVZARA INJ 150/1.14	SP, PA, QL (2 syringes every 28 days)
KEVZARA INJ 200/1.14	SP, PA, QL (2 syringes every 28 days)

ANTIRHEUMATIC - ENZYME INHIBITORS

RINVOQ TAB 15MG ER	SP, PA, QL (1 tab every 1 day)
RINVOQ TAB 30MG ER	SP, PA, QL (1 tab every 1 day)
RINVOQ TAB 45MG ER	SP, PA, QL (1 tab every 1 day)

PHOSPHODIESTERASE 4 (PDE4) INHIBITORS

OTEZLA TAB 30MG	SP, PA, QL (2 tabs every 1 day)
OTEZLA TAB 10/20/30	SP, PA, QL (1 pack (55 tabs) every 28 days)

MIGRAINE PRODUCTS

SEROTONIN AGONISTS

<i>naratriptan hcl tab 1 mg (base equiv)</i>	ST, QL (12 tabs every 25 days)
<i>naratriptan hcl tab 2.5 mg (base equiv)</i>	ST, QL (12 tabs every 25 days)
<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	ST, QL (18 tabs every 25 days)
<i>rizatriptan benzoate tab 10 mg (base equivalent)</i>	ST, QL (18 tabs every 25 days)
<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</i>	ST, QL (18 tabs every 25 days)

Drug Name	Requirements/Limits
<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</i>	ST, QL (18 tabs every 25 days)
<i>sumatriptan nasal spray 5 mg/act</i>	QL (24 inhalations every 25 days)
<i>sumatriptan nasal spray 20 mg/act</i>	QL (12 inhalations every 25 days)
<i>sumatriptan succinate tab 25 mg</i>	QL (12 tabs every 25 days)
<i>sumatriptan succinate tab 50 mg</i>	QL (12 tabs every 25 days)
<i>sumatriptan succinate tab 100 mg</i>	QL (12 tabs every 25 days)
<i>sumatriptan succinate inj 6 mg/0.5ml</i>	QL (12 injections every 25 days)
<i>sumatriptan succinate solution auto-injector 4 mg/0.5ml</i>	QL (18 injections every 25 days)
<i>sumatriptan succinate solution auto-injector 6 mg/0.5ml</i>	QL (12 injections every 25 days)
<i>sumatriptan succinate solution cartridge 4 mg/0.5ml</i>	QL (18 injections every 25 days)
<i>sumatriptan succinate solution cartridge 6 mg/0.5ml</i>	QL (12 injections every 25 days)
<i>zolmitriptan tab 2.5 mg</i>	ST, QL (12 tabs every 25 days)
<i>zolmitriptan tab 5 mg</i>	ST, QL (12 tabs every 25 days)
<i>zolmitriptan orally disintegrating tab 2.5 mg</i>	ST, QL (12 tabs every 25 days)
<i>zolmitriptan orally disintegrating tab 5 mg</i>	ST, QL (12 tabs every 25 days)

CALCITONIN GENE-RELATED PEPTIDE (CGRP) RECEPTOR ANTAG

<i>NURTEC TAB 75MG ODT</i>	ST, QL (16 tabs every 25 days)
<i>UBRELVY TAB 50MG</i>	ST, QL (16 tabs every 25 days)
<i>UBRELVY TAB 100MG</i>	ST, QL (16 tabs every 25 days)
<i>AIMOVIG INJ 70MG/ML</i>	PA, QL (2 pens every 25 days)
<i>AIMOVIG INJ 140MG/ML</i>	PA, QL (1 pen every 25 days)
<i>EMGALITY INJ 120MG/ML</i>	PA, QL (2 pens every 25 days)
<i>EMGALITY INJ 100MG/ML</i>	PA, QL (3 syringes every 25 days)
<i>EMGALITY INJ 120MG/ML</i>	PA, QL (2 syringes every 25 days)

GOUT AGENTS

GOUT AGENTS

<i>allopurinol tab 100 mg</i>	
<i>allopurinol tab 300 mg</i>	
<i>colchicine tab 0.6 mg</i>	QL (30 tabs every 25 days)

URICOSURICS

<i>probenecid tab 500 mg</i>	
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ANTICONVULSANTS

HYDANTOINS

<i>phenytoin chew tab 50 mg</i>	
<i>phenytoin susp 125 mg/5ml</i>	

Drug Name	Requirements/Limits
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<i>phenytoin sodium extended cap 100 mg</i>	
<i>phenytek cap 200mg</i>	
<i>phenytoin sodium extended cap 200 mg</i>	
<i>phenytek cap 300mg</i>	
<i>phenytoin sodium extended cap 300 mg</i>	

SUCCINIMIDES

<i>ethosuximide cap 250 mg</i>	
<i>ethosuximide soln 250 mg/5ml</i>	

ANTICONVULSANTS - MISC.

<i>ZTALMY SUS 50MG/ML</i>	SP, PA, QL (10 bottles every 30 days)
<i>primidone tab 50 mg</i>	
<i>primidone tab 250 mg</i>	

ANTIPARKINSON AND RELATED THERAPY AGENTS

ANTIPARKINSON COMT INHIBITORS

<i>entacapone tab 200 mg</i>	
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ANTIPARKINSON DOPAMINERGICS

<i>amantadine hcl cap 100 mg</i>	
<i>amantadine hcl tab 100 mg</i>	
<i>amantadine hcl soln 50 mg/5ml</i>	
<i>bromocriptine mesylate cap 5 mg (base equivalent)</i>	
<i>bromocriptine mesylate tab 2.5 mg (base equivalent)</i>	
<i>pramipexole dihydrochloride tab 0.125 mg</i>	
<i>pramipexole dihydrochloride tab 0.25 mg</i>	
<i>pramipexole dihydrochloride tab 0.5 mg</i>	
<i>pramipexole dihydrochloride tab 0.75 mg</i>	
<i>pramipexole dihydrochloride tab 1 mg</i>	
<i>pramipexole dihydrochloride tab 1.5 mg</i>	
<i>ropinirole hydrochloride tab 0.25 mg</i>	
<i>ropinirole hydrochloride tab 0.5 mg</i>	
<i>ropinirole hydrochloride tab 1 mg</i>	
<i>ropinirole hydrochloride tab 2 mg</i>	
<i>ropinirole hydrochloride tab 3 mg</i>	
<i>ropinirole hydrochloride tab 4 mg</i>	
<i>ropinirole hydrochloride tab 5 mg</i>	
<i>carbidopa & levodopa tab 10-100 mg</i>	
<i>carbidopa & levodopa tab 25-100 mg</i>	
<i>carbidopa & levodopa tab 25-250 mg</i>	
<i>carbidopa & levodopa tab er 25-100 mg</i>	
<i>carbidopa & levodopa tab er 50-200 mg</i>	
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	

Drug Name	Requirements/Limits
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	
ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS	
<i>selegiline hcl cap 5 mg</i>	
<i>selegiline hcl tab 5 mg</i>	
NEUROMUSCULAR AGENTS	
ALS AGENTS	
<i>riluzole tab 50 mg</i>	
MUSCULOSKELETAL THERAPY AGENTS	
CENTRAL MUSCLE RELAXANTS	
<i>baclofen tab 10 mg</i>	
<i>baclofen tab 20 mg</i>	
<i>carisoprodol tab 350 mg</i>	QL (120 tabs every 25 days)
<i>chlorzoxazone tab 500 mg</i>	
<i>cyclobenzaprine hcl tab 5 mg</i>	
<i>cyclobenzaprine hcl tab 10 mg</i>	
<i>methocarbamol tab 500 mg</i>	
<i>methocarbamol tab 750 mg</i>	
<i>orphenadrine citrate tab er 12hr 100 mg</i>	
<i>tizanidine hcl tab 2 mg (base equivalent)</i>	
<i>tizanidine hcl tab 4 mg (base equivalent)</i>	
DIRECT MUSCLE RELAXANTS	
<i>dantrolene sodium cap 25 mg</i>	
<i>dantrolene sodium cap 50 mg</i>	
<i>dantrolene sodium cap 100 mg</i>	
VISCOSUPPLEMENTS	
GEL-ONE INJ 30MG/3ML	SP, PA
SYNVISC INJ 8MG/ML	SP, PA
SYNVISC ONE INJ 8MG/ML	SP, PA
VISCO-3 INJ 25/2.5ML	SP, PA
ANTIMYASTHENIC/CHOLINERGIC AGENTS	
ANTIMYASTHENIC/CHOLINERGIC AGENTS	
<i>pyridostigmine bromide tab 60 mg</i>	
<i>pyridostigmine bromide tab er 180 mg</i>	
<i>pyridostigmine bromide oral soln 60 mg/5ml</i>	
VITAMINS	
WATER SOLUBLE VITAMINS	
<i>thiamine hcl tab 50 mg</i>	OTC
<i>cvs b1 tab 100mg</i>	OTC
<i>cvs b-1 tab 100mg</i>	OTC

\$0 - Zero Dollar Copay **AGE** - Age Limit **GNDR** - Gender Edit **OTC** - Over the counter **PA** - Prior Authorization **QL** - Quantity Limits **SP** - Specialty **ST** - Step Therapy

Drug Name	Requirements/Limits
<i>qc vit b1 tab 100mg</i>	OTC
<i>thiamine hcl tab 100 mg</i>	OTC
<i>ra vit b-1 tab 100mg</i>	OTC
<i>sm vit b1 tab 100mg</i>	OTC
<i>thiamine mononitrate tab 100 mg</i>	OTC
<i>true vit b1 tab 100mg</i>	OTC
<i>pyridoxine hcl tab 25 mg</i>	OTC
<i>pyridoxine hcl tab 50 mg</i>	OTC
<i>ra vit b-6 tab 50mg</i>	OTC
<i>ascorbic acid liquid 500 mg/5ml</i>	OTC
<i>liquid c liq 500/5ml</i>	OTC
<i>calcium ascorbate tab 500 mg</i>	OTC

OIL SOLUBLE VITAMINS

VITAMIN D2 CAP 2000UNIT	OTC
<i>ergocalciferol cap 1.25 mg (50000 unit)</i>	
VITAMIN D2 TAB 400UNIT	OTC
VITAMIN D2 TAB 2000UNIT	OTC
<i>calcidol dro 8000/ml</i>	OTC
<i>ergocalciferol soln 200 mcg/ml (8000 unit/ml)</i>	OTC
<i>cholecalciferol cap 25 mcg (1000 unit)</i>	OTC
<i>cvs d3 cap 1000unit</i>	OTC
<i>d3 cap 1000unit</i>	OTC
<i>d3 high pote cap 1000unit</i>	OTC
<i>d3-1000 cap 1000unit</i>	OTC
<i>d 1000 cap 1000unit</i>	OTC
<i>finest nutr cap vit d3</i>	OTC
<i>ft vitamin cap d3 25mcg</i>	OTC
<i>gnp d cap 1000unit</i>	OTC
<i>qc vit d3 cap 1000unit</i>	OTC
<i>vitamin d cap 1000unit</i>	OTC
<i>cholecalciferol cap 50 mcg (2000 unit)</i>	OTC
<i>cvs d3 cap 50mcg</i>	OTC
<i>d3 2000 cap 2000unit</i>	OTC
<i>d3 cap 2000unit</i>	OTC
<i>d3 high pote cap 50mcg</i>	OTC
<i>d3 super str cap 2000unit</i>	OTC
<i>ft vitamin cap d3 50mcg</i>	OTC
<i>kls d3 cap 50mcg</i>	OTC
<i>qc vit d3 cap 2000unit</i>	OTC
<i>ra vitamin cap 2000unit</i>	OTC
<i>sm vit d3 cap 50mcg</i>	OTC
<i>vit d3 hp cap 2000unit</i>	OTC
<i>vitamin d3 cap 2000unit</i>	OTC

Drug Name	Requirements/Limits
<i>vitamin d-3 cap 2000unit</i>	OTC
<i>cholecalciferol cap 125 mcg (5000 unit)</i>	OTC
<i>cvs d3 cap 5000unit</i>	OTC
<i>d3 5000 cap 5000unit</i>	OTC
<i>d3 high pot cap 125mcg</i>	OTC
<i>d3 maximum cap 5000unit</i>	OTC
<i>dialyvite d cap 5000unit</i>	OTC
<i>eql vitamin cap d3</i>	OTC
<i>vitamin d3 cap 5000unit</i>	OTC
<i>cholecalciferol cap 250 mcg (10000 unit)</i>	OTC
<i>cvs d3 cap 250mcg</i>	OTC
<i>d3 hp cap 250mcg</i>	OTC
<i>d3 max str cap 250mcg</i>	OTC
<i>is-d 10000 cap 250mcg</i>	OTC
<i>true vit d3 cap 250mcg</i>	OTC
<i>vitamin d3 cap 10000unt</i>	OTC
<i>cholecalciferol cap 1.25 mg (50000 unit)</i>	OTC
<i>d3-50 cap 50000unt</i>	OTC
<i>decara cap 50000unt</i>	OTC
<i>optimal d3 cap 50000unt</i>	OTC
<i>true vit d3 cap 1250mcg</i>	OTC
<i>weekly-d cap 50000unt</i>	OTC
<i>cholecalciferol tab 10 mcg (400 unit)</i>	OTC
<i>d3 high pote tab 400unit</i>	OTC
<i>delta d3 tab 400unit</i>	OTC
<i>qc vit d3 tab 400unit</i>	OTC
<i>sm vitamin d tab 400unit</i>	OTC
<i>vitamin d3 tab 10mcg</i>	OTC
<i>cholecalciferol tab 25 mcg (1000 unit)</i>	OTC
<i>gnp vit d3 tab 1000unit</i>	OTC
<i>gnp vit d tab 1000unit</i>	OTC
<i>qc vit d3 tab 25mcg</i>	OTC
<i>qc vit d3 tab 1000unit</i>	OTC
<i>vitamin d-3 tab 1000unit</i>	OTC
<i>cholecalciferol tab 50 mcg (2000 unit)</i>	OTC
<i>ft vitamin tab d3 50mcg</i>	OTC
<i>qc vit d3 tab 2000unit</i>	OTC
<i>thera-d tab 2000unit</i>	OTC
<i>vitamin d tab 2000unit</i>	OTC
<i>gnp vit d tab 5000unit</i>	OTC
<i>qc vit d3 tab 5000unit</i>	OTC
<i>vitamin d3 tab 125mcg</i>	OTC
<i>vitamin d3 tab 5000unit</i>	OTC

Drug Name	Requirements/Limits
<i>vitamin d tab 5000iu</i>	OTC
<i>vitamin d-3 tab 5000unit</i>	OTC
<i>cholecalciferol chew tab 10 mcg (400 unit)</i>	OTC
<i>d3 kids chw 400unit</i>	OTC
<i>vitamin d chw 400unit</i>	OTC
<i>cholecalciferol chew tab 25 mcg (1000 unit)</i>	OTC
<i>d3 adult chw 1000unit</i>	OTC
<i>gnp d chw 2000unit</i>	OTC
<i>kids vit d3 chw 1000unit</i>	OTC
<i>vit d3 gumm chw 1000unit</i>	OTC
<i>vitachew d3 chw 25mcg</i>	OTC
<i>vitajoy daly chw d 1000iu</i>	OTC
<i>vitamin d3 chw 25mcg</i>	OTC
<i>vitamin d3 chw 50mcg</i>	OTC
<i>vitamin d3 chw 1000unit</i>	OTC
<i>vitamin d3 chw ex str</i>	OTC
<i>vitamin d chw 1000unit</i>	OTC
<i>yumvs vit d3 chw 25mcg</i>	OTC
<i>cholecalciferol oral liquid 10 mcg/ml (400 unit/ml)</i>	OTC
<i>d-vitamin dro 400unit</i>	OTC
<i>d-vite pedia dro 400unit</i>	OTC
<i>pedia d-vite dro 400unit</i>	OTC
<i>vitamin d3 dro 10mcg/ml</i>	OTC
<i>vitamin d dro 10mcg</i>	OTC
BABY DDROPS LIQ 400UNIT	OTC
<i>baby super dro daily d3</i>	OTC
<i>baby vit d dro 400/.028</i>	OTC
DDROPS LIQ 2000UNIT	OTC
<i>phytonadione tab 5 mg</i>	

MULTIVITAMINS

VITAMIN MIXTURES

ECEE PLUS TAB	OTC
<i>ra cod liver cap</i>	OTC
<i>vitamins a & d cap</i>	OTC
<i>yl vitamin cap a & d</i>	OTC
<i>vitamins a & d tab</i>	OTC
<i>cod liver cap</i>	OTC
<i>cod liver cap oil</i>	OTC
<i>cod liver cap oil/a&d</i>	OTC
<i>qc cod liver cap</i>	OTC
COD LIVER OIL	OTC
COD LIVER OIL FOR KIDS	OTC
COD LIVER OIL NORWEGIA	OTC

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Drug Name	Requirements/Limits
COD LIVER OIL OIL	OTC
COD LIVER OIL USP/NF	OTC
RA COD LIVER OIL	OTC
<i>cod liver chw /vit d</i>	OTC
<i>cod liver chw w/vit</i>	OTC
SUPER D3 CAP COMPLEX	OTC
CRANBERRY CAP URIN COM	OTC
<i>niacin cap 400-100</i>	OTC
<i>niacin cap 400mg</i>	OTC
D3/VITAMIN C TAB /ZINC	OTC
D3 + K2 DOTS TAB	OTC
DOSOKAP TAB	OTC
K2 PLUS D3 TAB	OTC
B-COMPLEX VITAMINS	
<i>b-complex vitamin cap</i>	OTC
<i>b-complex + tab b-12</i>	OTC
<i>b-complex vitamin tab</i>	OTC
<i>ra b-complex tab</i>	OTC
<i>ra b-complex tab w/b-12</i>	OTC
CVS BALANCED TAB B100	OTC
<i>b-complex vitamin sublingual liquid</i>	OTC
APETEX ELX	OTC
APETIGEN ELX	OTC
<i>biopetit elx</i>	OTC
<i>brewers yeast tab</i>	OTC
BREWERS YEAS POW	OTC
B-COMPLEX W/ C	
<i>b-complex w/ c cap</i>	OTC
<i>super b w/c cap</i>	OTC
<i>vt b complex cap</i>	OTC
<i>allbee plus tab vit c</i>	OTC
<i>b complex tab plus c</i>	OTC
<i>b-complex w/ c tab</i>	OTC
<i>better b tab complex</i>	OTC
<i>cvs super b tab complx/c</i>	OTC
<i>sm b complex tab with c</i>	OTC
<i>super b comp tab vit c</i>	OTC
RA B-COMPLEX TAB VIT C TR	OTC
PRONUTRIENTS TAB SUPER B	OTC
<i>bec/zinc tab</i>	OTC
<i>cvs stress tab form/zn</i>	OTC
<i>stress b com tab vit c/zn</i>	OTC

Drug Name	Requirements/Limits
<i>stress b/ tab zinc</i>	OTC
<i>stress form/ tab zinc</i>	OTC
<i>stress plus tab zinc</i>	OTC
<i>zinc-vites tab</i>	OTC
<i>b-comp/vit c tab</i>	OTC
<i>b-complex tab /vit c</i>	OTC
B-COMPLEX W/ FOLIC ACID	
<i>b-complex w/ folic acid cap</i>	OTC
<i>benfotiamine cap multi-b</i>	OTC
<i>b complex tab form 1</i>	OTC
<i>b-complex w/ folic acid tab</i>	OTC
<i>big 100 tab</i>	OTC
<i>kobee tab</i>	OTC
<i>sm balanced tab b-50</i>	OTC
<i>sm balanced tab b-100</i>	OTC
BALANCE B-50 TAB TR	OTC
B ACTIV CAP	OTC
B-100 HIGH CAP POTENCY	OTC
B-COMPLEX CAP	OTC
B-COMPLEX CAP VEGGIE	OTC
SUPER B-50 CAP B-COMP	OTC
SUPER B- CAP COMPLEX	OTC
<i>b-50 complex tab</i>	OTC
<i>b-100 tab b-100</i>	OTC
<i>b-compleet- tab 50</i>	OTC
<i>b-compleet- tab 100</i>	OTC
<i>b-complex w/biotin & folic acid tab</i>	OTC
<i>balance b-50 tab</i>	OTC
<i>balanced b tab complex</i>	OTC
<i>balanced tab b-50</i>	OTC
<i>balanced tab b-100</i>	OTC
<i>big 100 tab</i>	OTC
<i>eql b complx tab 50</i>	OTC
<i>quin b stron tab b-25</i>	OTC
<i>ra balanced tab b-50</i>	OTC
<i>ra balanced tab b-100</i>	OTC
<i>sm b100 tab complex</i>	OTC
<i>sm b-complex tab</i>	OTC
<i>super b- tab complex</i>	OTC
<i>super dec tab b-100</i>	OTC
<i>super quints tab</i>	OTC
<i>super-b tab complex</i>	OTC
<i>yl balanced tab b-100</i>	OTC

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Drug Name	Requirements/Limits
<i>b-100 complx tab</i>	OTC
<i>b-100 tab complex</i>	OTC
<i>b-100 tr tab</i>	OTC
<i>b-complex tab 100 tr</i>	OTC
<i>balanc b-100 tab tr</i>	OTC
<i>balanced tab b-100 tr</i>	OTC
<i>complex b-50 tab</i>	OTC
<i>endur-b tab</i>	OTC
<i>eql b-100 tab complex</i>	OTC
<i>gnp b-50 tab complex</i>	OTC
<i>gnp b-100 tab complex</i>	OTC
<i>qc b50 tab pr</i>	OTC
<i>ra balanced tab b-50 tr</i>	OTC
<i>ra balnaced tab b-100 tr</i>	OTC
<i>mynephron cap</i>	
<i>renal cap</i>	
<i>reno cap</i>	
<i>reno cap</i>	OTC
<i>triphrocaps cap</i>	
<i>virt-caps cap</i>	
<i>wescaps cap</i>	
<i>b-complex tab balanced</i>	OTC
<i>b-complex w/ c & folic acid tab</i>	OTC
<i>kp b complex tab /c</i>	OTC
<i>sm b super tab vita com</i>	OTC
SM B-COMPLEX TAB /VIT C	OTC
<i>stress form tab</i>	OTC
<i>super b comp tab /vit c</i>	OTC
<i>super b comp tab vit c</i>	OTC
<i>super b-comp tab /fa/vitc</i>	OTC
<i>super b-comp tab vit c/fa</i>	OTC
<i>dialyvite tab 800</i>	OTC
<i>full spect tab b/ vit c</i>	OTC
<i>nephro tab vitamins</i>	OTC
<i>nephro-vite tab</i>	OTC
<i>rena-vite tab</i>	OTC
<i>renal vitamn tab</i>	OTC
<i>folika-bc tab</i>	OTC
<i>rena-vite rx tab</i>	OTC
B-COMPLEX/FA TAB /VIT C	OTC
DIALYVITE TAB 800/IRON	OTC
DIALYVIT 800 TAB ZINC 15	OTC
DIALYVITE TAB 800/ZINC	OTC

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Drug Name	Requirements/Limits
ACTRIVIT LIQ 800-15-1	OTC
B-COMPLEX TAB C/FA/BIO	OTC
B-COMPLEX W/ IRON	
SUPER B-COMP TAB IRON/C	OTC
APETIGEN-PLS SOL	OTC
B-COMPLEX W/ MINERALS	
APETIGEN TAB PLUS	OTC
<i>eldertonic liq</i>	OTC
BIOFLAVONOID PRODUCTS	
ACTITROM CAP	OTC
ACTITROM-D CAP	OTC
BIO C 1:1 CAP	OTC
C 1000/BIOFL CAP /R HIPS	OTC
DAFLONEX-XL CAP	OTC
EASY-C CAP IMMUNE	OTC
GRAPE SEED CAP 50MG	OTC
QUERCETIN CAP COMPLEX	OTC
TROMBONEX CAP	OTC
TROMBONEX-D CAP	OTC
VASOFLEX CAP	OTC
VASOFLEX CAP FORTE	OTC
VITAMIN C CAP FLAVONOI	OTC
ADVANCED C TAB PLUS	OTC
<i>anti-allergy tab</i>	OTC
<i>bioflex tab</i>	OTC
<i>easy-c tab 500mg</i>	OTC
<i>ester-c tab</i>	OTC
<i>ester-c tab 500mg</i>	OTC
<i>ester-c tab 1000mg</i>	OTC
<i>flexgen tab</i>	OTC
<i>hi c-500 tab</i>	OTC
<i>pan-c 500 tab bioflavo</i>	OTC
PERIDIN-C TAB	OTC
<i>span c tab</i>	OTC
<i>tri super tab flavons</i>	OTC
<i>vasoflex hd tab</i>	OTC
<i>vasoflex tab</i>	OTC
<i>vita c/biofl tab rose hip</i>	OTC
<i>bioflavonoid products tab er</i>	OTC
<i>c1000 tr/rh tab bioflav</i>	OTC
<i>c1500 tr/rh tab bioflav</i>	OTC
<i>c complex tab 500mg</i>	OTC

Drug Name	Requirements/Limits
<i>c complex tab 1000mg</i>	OTC
DAFLONEX-XL TAB	OTC
<i>ester-c tab 500mg</i>	OTC
<i>ra vitamin c tab 1000mg</i>	OTC
FRUIT C CHW 200MG	OTC
VITAMIN C CHW 500MG	OTC
BIOFLAVONOID POW CITRUS	OTC

MULTIVITAMINS

<i>antioxidant cap formula</i>	OTC
<i>chlorocaps cap</i>	OTC
DEKAS CAP ESSENTIA	OTC
<i>mv-one cap</i>	OTC
NUTRA-Z+ CAP	OTC
<i>viteyes clas cap zinc fre</i>	OTC
ZE-PLUS CAP	OTC
ZELDANA CAP	OTC
<i>anti-oxidant tab</i>	OTC
<i>daily multi tab vitamins</i>	OTC
DAILY MULTI TAB VITAMINS	OTC
<i>daily value tab multivit</i>	OTC
<i>daily vit tab</i>	OTC
<i>daily vite tab</i>	OTC
<i>daily-vite tab</i>	OTC
<i>essentl one tab daily</i>	OTC
ESTROFACTORS TAB	OTC
<i>healthy hair tab skn/nail</i>	OTC
HIGH POTENCY TAB MULTIVIT	OTC
<i>mult vitamin tab essent</i>	OTC
MULTI VITAMI TAB	OTC
MULTI VITAMI TAB D-3	OTC
<i>multi-vitamn tab</i>	OTC
<i>multiple vitamin tab</i>	OTC
MULTIVITAMIN TAB	OTC
<i>multivitamin tab adult</i>	OTC
MULTIVITAMIN TAB ADULT	OTC
<i>multivitamin tab iron-fre</i>	OTC
NEOMULTIVITE TAB	OTC
OMNICAP TAB	OTC
<i>once daily tab</i>	OTC
<i>one daily tab</i>	OTC
<i>one daily tab essentl</i>	OTC
ONE DAILY TAB ESSENTL	OTC
<i>one daily tab multivit</i>	OTC

Drug Name	Requirements/Limits
ONE VITE TAB DAILY MV	OTC
ONE-A-DAY TAB ESSENT	OTC
ONE-A-DAY TAB MENS	OTC
<i>one-daily tab mult vit</i>	OTC
<i>one-daily tab mult-vit</i>	OTC
<i>qc essential tab</i>	OTC
QUINTABS TAB	OTC
<i>sm multiple tab vitamins</i>	OTC
<i>stress form tab</i>	OTC
<i>stress formu tab</i>	OTC
<i>stresstabs tab</i>	OTC
<i>stresstabs tab energy</i>	OTC
<i>tab-a-vite tab</i>	OTC
<i>tab-a-vite tab beta car</i>	OTC
THERA TAB	OTC
<i>thera-tabs tab</i>	OTC
THEREMS TAB MULTIVIT	OTC
TM-DAILY TAB VITE	OTC
TRUE MULTI- TAB VITAMIN	OTC
<i>vitalee tab</i>	OTC
ONE-A-DAY CHW VITACRAV	OTC
DEKAS LIQ ESSENTIA	OTC
MULTIVITAMIN DRO ORGANIC	OTC
MULTIVITAMIN LIQ	OTC
MULTIPLE VITAMINS W/ IRON	
CHLORELLA CAP	OTC
<i>daily multi tab vit/iron</i>	OTC
<i>daily vite tab iron</i>	OTC
<i>multi vitam tab w/iron</i>	OTC
<i>multi-vit/fe tab</i>	OTC
<i>multiple vitamins w/ iron tab</i>	OTC
<i>multiv/iron tab adult</i>	OTC
<i>nat-rul dail tab vit/iron</i>	OTC
<i>one daily mv tab /iron</i>	OTC
<i>one-daily tab /iron</i>	OTC
<i>sm multiple tab vit/iron</i>	OTC
<i>stress b com tab w/iron</i>	OTC
<i>stress form tab /iron</i>	OTC
<i>tab-a-vite tab /iron</i>	OTC
TAB-A-VITE TAB IRON/BET	OTC
MULTIPLE VITAMINS W/ MINERALS	
<i>actical cap</i>	OTC

Drug Name	Requirements/Limits
ACTIVNUTRIEN CAP	OTC
ACTIVNUTRIEN CAP PERFORMA	OTC
ACTIVNUTRIEN CAP W/O IRON	OTC
ADULT 50+ CAP EYE HLTH	OTC
ADULT 50+ CAP OCUVITE	OTC
<i>50+ adult cap eye hlth</i>	OTC
<i>advanced eye cap health</i>	OTC
ALIVE IMMUNE CAP HEALTH	OTC
<i>amoryn mood cap booster</i>	OTC
<i>antiox form/ cap minerals</i>	OTC
<i>antioxidant cap</i>	OTC
APETIBEX CAP	OTC
APPE-CURB CAP	OTC
BARIATRIC CAP MULTIVIT	OTC
<i>bdy/hair/skn cap nails</i>	OTC
BIO-35 GLUTE CAP FREE	OTC
BIO-35 IRON CAP FREE	OTC
BIOCAL CAP	OTC
BONEUP 3 PER CAP DAY	OTC
BONEUP CAP	OTC
BOOSTNOW CAP IMM SUPP	OTC
CELEBRATE CAP 18	OTC
CELEBRATE CAP 36	OTC
CELEBRATE CAP 45	OTC
CELEBRATE CAP 60	OTC
CHOICEFUL CAP MULTIVIT	OTC
<i>coral calciu cap plus</i>	OTC
CVS IMMUNE CAP SUPPORT	OTC
CVS VISION CAP HEALTH	OTC
DECUBI-VITE CAP	OTC
DEKAS PLUS CAP	OTC
DEKAS PLUS CAP OCEAN	OTC
<i>dry eye cap formula</i>	OTC
EYE HEALTH CAP	OTC
EYE HEALTH CAP ADLT 50+	OTC
<i>eye vitamins cap</i>	OTC
GENADEK CAP STEP 1	OTC
GENADEK CAP STEP 2	OTC
<i>glucoten cap</i>	OTC
<i>hair/skin cap nails</i>	OTC
HAIR/SKIN/ CAP NAILS	OTC
<i>healthy eyes cap</i>	OTC
<i>healthy eyes cap superv 2</i>	OTC

Drug Name	Requirements/Limits
HEALTHY EYES CAP SUPERVIS	OTC
<i>icaps cap</i>	OTC
<i>icaps lutein cap /omega-3</i>	OTC
IMMUNE ESSEN CAP DAILY	OTC
<i>macular hlth cap formula</i>	OTC
MENS 50+ CAP ADVANCED	OTC
<i>mens daily cap lycopene</i>	OTC
MOOD FOOD CAP	OTC
MOOD FOOD ES CAP	OTC
<i>multi 50+ cap for her</i>	OTC
<i>multi cap complete</i>	OTC
<i>multi cap for her</i>	OTC
<i>multi cap for him</i>	OTC
<i>multivitamin cap daily</i>	OTC
MVW COMPLETE CAP D3000	OTC
MVW COMPLETE CAP D5000	OTC
MVW COMPLETE CAP FORMULAT	OTC
MVW COMPLETE CAP MINIS	OTC
MVW MODULAT CAP FORM MIN	OTC
MVW MODULAT CAP FORMULAT	OTC
OCUHEALTH CAP VISION 2	OTC
OCUVITE CAP ADULT	OTC
<i>ocuvite eye cap health</i>	OTC
OCUVITE LUTE CAP	OTC
ONE-DAILY CAP MULTI	OTC
PORENAL+D CAP OMEGA 3	OTC
PRESCRIPTION CAP SUPPORT	OTC
PRESERVISION CAP AREDS	OTC
PRESERVISION CAP AREDS 2	OTC
PRESERVISION CAP LUTEIN	OTC
<i>prevent cap</i>	OTC
PRORENAL+D CAP OMEGA-3	OTC
PROTECT CAP CARDIO	OTC
PROTECT CAP PLUS SO	OTC
PROTEGRA CAP	OTC
SKIN/HAIR/ CAP NAILS	OTC
SUPER ANTIOX CAP	OTC
<i>super antiox cap protect</i>	OTC
SUPPORT-500 CAP	OTC
<i>systane icap cap areds2</i>	OTC
THERAMILL CAP FORTE	OTC
THERANATAL CAP LACTATIO	OTC
<i>ultra multi cap /iron</i>	OTC

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Drug Name	Requirements/Limits
VISION CAP OPTIMIZE	OTC
<i>vision form cap 2</i>	OTC
<i>vision formu cap 50+</i>	OTC
VISION HEALT CAP	OTC
<i>vision plus cap</i>	OTC
VISTA ADVAN CAP AREDS2	OTC
VISTA ADVAN CAP DRY EYE	OTC
<i>vita-min cap</i>	OTC
VITABEX CAP	OTC
VITABEX PLUS CAP	OTC
VITEYES CAP CLASSIC	OTC
<i>viteyes cap complete</i>	OTC
VITEYES CLAS CAP ADV	OTC
VITEYES CLAS CAP ADVANCED	OTC
VITEYES CLAS CAP MAC SUPP	OTC
VITEYES CLAS CAP OMEGA-3	OTC
<i>womens 50+ cap advanced</i>	OTC
<i>womens cap multi</i>	OTC
<i>a thru z adv tab adult</i>	OTC
<i>a thru z sel tab 50+ adva</i>	OTC
<i>a thru z sel tab 50+ mens</i>	OTC
<i>a thru z sel tab advanced</i>	OTC
<i>a thru z tab advanced</i>	OTC
<i>a thru z tab high pot</i>	OTC
<i>a thru z tab select</i>	OTC
<i>a thru z tab ultimate</i>	OTC
<i>a thru z ult tab mens</i>	OTC
ABC COMPLETE TAB ADULT	OTC
ABC COMPLETE TAB MENS	OTC
ABC COMPLETE TAB MENS 50+	OTC
ABC COMPLETE TAB SENIOR	OTC
ABC COMPLETE TAB WOMEN	OTC
<i>advanced tab formula</i>	OTC
ALIVE 50+ TAB ENERGY	OTC
ALIVE DAILY TAB WOMENS	OTC
ALIVE DIABET TAB MULTIVIT	OTC
ALIVE ENERGY TAB WOMENS	OTC
ALIVE MENS TAB	OTC
ALIVE MENS TAB COMPLETE	OTC
ALIVE WOMENS TAB 50+ COMP	OTC
ALPHA BETIC TAB	OTC
ANTIOXIDANT TAB FORMULA	OTC
<i>antioxidant tab vitamins</i>	OTC

Drug Name	Requirements/Limits
AZO HORMONAL TAB HEALTH	OTC
BASIC AM TAB	OTC
BASIC PM TAB	OTC
BONEUP VEG TAB	OTC
CENT MATURE TAB ADLT 50+	OTC
<i>cent mature tab womn 50+</i>	OTC
<i>centavite az tab minerals</i>	OTC
CENTRAL-VITE TAB	OTC
<i>central-vite tab mens mat</i>	OTC
<i>central-vite tab wmns mat</i>	OTC
<i>centravites tab</i>	OTC
<i>centravites tab 50 plus</i>	OTC
CENTRAVITES TAB 50 PLUS	OTC
CENTRAVITES TAB ADULTS	OTC
CENTRUM MINI TAB ADULT 50	OTC
CENTRUM MINI TAB MEN 50+	OTC
CENTRUM MINI TAB WOMEN 50	OTC
CENTRUM SILV TAB 50+MEN	OTC
CENTRUM SILV TAB 50+WOMEN	OTC
CENTRUM SILV TAB ADULT 50	OTC
CENTRUM SPEC TAB HEART	OTC
CENTRUM SPEC TAB IMMUNE	OTC
CENTRUM SPEC TAB VISION	OTC
CENTRUM TAB ADULTS	OTC
CENTRUM TAB CARDIO	OTC
CENTRUM TAB MEN	OTC
CENTRUM TAB SILVER	OTC
CENTRUM TAB ULTRA	OTC
CENTRUM TAB WOMEN	OTC
<i>century tab</i>	OTC
<i>century tab mature</i>	OTC
<i>cerovite tab senior</i>	OTC
CERTAVITE TAB SENIOR	OTC
<i>certavite/ tab antioxiid</i>	OTC
CERTAVITE/ TAB ANTIOXID	OTC
<i>companion tab</i>	OTC
<i>compete tab</i>	OTC
<i>comple multi tab adlt 50+</i>	OTC
<i>daily betic tab</i>	OTC
<i>daily combo tab</i>	OTC
<i>daily diet tab support</i>	OTC
<i>daily multi tab men</i>	OTC
<i>daily multi tab minerals</i>	OTC

Drug Name	Requirements/Limits
<i>daily multi tab vit/mens</i>	OTC
<i>daily multi tab vit/min</i>	OTC
<i>daily multi tab womn 50+</i>	OTC
DERMAVITE TAB	OTC
<i>diabets hlth tab formula</i>	OTC
<i>dialyvite tab 800/d</i>	OTC
EQ COMPLETE TAB ADULT	OTC
EQ ONE DAILY TAB MENS	OTC
<i>eq one daily tab womens</i>	OTC
EQ ONE DAILY TAB WOMENS	OTC
<i>eql century tab</i>	OTC
<i>eql century tab mature</i>	OTC
EQL CENTURY TAB MENS	OTC
EQL CENTURY TAB WOMENS	OTC
<i>eql vision tab formula</i>	OTC
<i>essentia tab</i>	OTC
<i>essential tab balance</i>	OTC
ESTROVEN MEN TAB SUPPLEM	OTC
<i>eye health & tab lutein</i>	OTC
EYE HEALTH TAB LUTEIN	OTC
EYE MULTIVIT TAB SODIUM	OTC
<i>eye-vites tab</i>	OTC
FITNESS TABS TAB MEN	OTC
FITNESS TABS TAB WOMEN	OTC
FREEDAVITE TAB	OTC
GERI-FREEDA TAB SENIOR	OTC
<i>gerivite tab complete</i>	OTC
<i>gnp healthy tab eyes</i>	OTC
HAIR SKIN & TAB NAILS AD	OTC
<i>hair skin tab nails</i>	OTC
HAIR SKIN TAB NAILS	OTC
<i>hair/skin/ tab nails</i>	OTC
HEAD CARE TAB PROACTIV	OTC
<i>healthy eyes tab</i>	OTC
<i>hi-kovite tab 2-part</i>	OTC
HIGH POTENCY TAB MV/FA	OTC
HM COMPLETE TAB MEN	OTC
<i>hm complete tab women</i>	OTC
<i>i-vite tab</i>	OTC
ICAPS AREDS TAB FORMULA	OTC
<i>icaps mv tab</i>	OTC
K-PAX TAB PROF ST	OTC
<i>kp adult 50+ tab daily</i>	OTC

\$0 - Zero Dollar Copay **AGE** - Age Limit **GNDR** - Gender Edit **OTC** - Over the counter **PA** - Prior Authorization **QL** - Quantity Limits **SP** - Specialty **ST** - Step Therapy

Drug Name	Requirements/Limits
<i>kp adults tab daily</i>	OTC
<i>kp mens 50+ tab daily</i>	OTC
<i>kp mens tab daily</i>	OTC
<i>kp vision tab for/ltn</i>	OTC
<i>kp vision tab formula</i>	OTC
<i>kp women 50+ tab daily</i>	OTC
<i>kp womens tab daily</i>	OTC
<i>life pack tab mens</i>	OTC
<i>life pack tab womens</i>	OTC
LIVER DETOX TAB	OTC
LUTEIN PLUS TAB ZEAXANTH	OTC
<i>macuvite tab</i>	OTC
<i>macuvite tab eye care</i>	OTC
<i>macuvite tab lutein</i>	OTC
<i>max daily tab green</i>	OTC
<i>mega multi tab men</i>	OTC
MEGA MULTI TAB MEN	OTC
<i>mega multi tab women</i>	OTC
MEGA MULTI TAB WOMEN	OTC
MEGAVITE TAB FRT/VEG	OTC
MEGAVITE TAB GOLD 55+	OTC
MENS 50+ TAB MULTIVIT	OTC
<i>mens daily tab formula</i>	OTC
MENS MULTIPL TAB	OTC
<i>mult vitamin tab no iron</i>	OTC
<i>mult vitamin tab womens</i>	OTC
<i>multi 50+ tab for her</i>	OTC
<i>multi 50+ tab for him</i>	OTC
<i>multi 50+ wm tab advanced</i>	OTC
<i>multi complt tab /iron</i>	OTC
<i>multi tab for her</i>	OTC
<i>multi tab for him</i>	OTC
MULTI VITAMN TAB MINERALS	OTC
<i>multi-vit/ tab minerals</i>	OTC
MULTI-VITAMI TAB MONOCAPS	OTC
<i>multi-vite tab</i>	OTC
<i>multi-vite tab 50&over</i>	OTC
<i>multiple vitamins w/ minerals tab</i>	OTC
<i>multiv women tab 50+</i>	OTC
MULTIVITAMIN TAB	OTC
<i>multivitamin tab adlt 50+</i>	OTC
MULTIVITAMIN TAB ADULT	OTC
<i>multivitamin tab adults</i>	OTC

Drug Name	Requirements/Limits
MULTIVITAMIN TAB ADULTS	OTC
MULTIVITAMIN TAB MEN	OTC
<i>multivitamin tab men 50+</i>	OTC
<i>multivitamin tab women</i>	OTC
MULTIVITAMIN TAB WOMEN	OTC
<i>multivitamin tab womens</i>	OTC
MULTIVITAMIN TAB ZINC STR	OTC
<i>myamulti tab</i>	OTC
NAT-RUL THER TAB M	OTC
NATRUL-VITES TAB	OTC
<i>nutritional tab support</i>	OTC
OCULAR TAB VITAMINS	OTC
<i>ocutabs tab</i>	OTC
<i>ocutabs tab lutein</i>	OTC
<i>ocuvite eye tab + multi</i>	OTC
<i>ocuvite tab lutein</i>	OTC
<i>ocuvite xtra tab</i>	OTC
ONCOVITE TAB	OTC
ONE DAILY MN TAB W/O IRON	OTC
ONE DAILY MV TAB WOMENS	OTC
<i>one daily tab 50 plus</i>	OTC
<i>one daily tab 50+</i>	OTC
<i>one daily tab 50+ adv</i>	OTC
<i>one daily tab /mineral</i>	OTC
<i>one daily tab complete</i>	OTC
<i>one daily tab essentl</i>	OTC
<i>one daily tab fe/ca</i>	OTC
<i>one daily tab healthy</i>	OTC
<i>one daily tab iron-fre</i>	OTC
<i>one daily tab maximum</i>	OTC
<i>one daily tab men</i>	OTC
<i>one daily tab men 50+</i>	OTC
<i>one daily tab mens</i>	OTC
ONE DAILY TAB MENS	OTC
<i>one daily tab mens 50+</i>	OTC
ONE DAILY TAB MENS 50+	OTC
<i>one daily tab multi-vi</i>	OTC
ONE DAILY TAB WMNS 50+	OTC
<i>one daily tab wom 50+</i>	OTC
<i>one daily tab women</i>	OTC
<i>one daily tab women 50</i>	OTC
<i>one daily tab womens</i>	OTC
ONE DAILY TAB WOMENS	OTC

Drug Name	Requirements/Limits
<i>one dly hlth tab wght adv</i>	OTC
ONE-A-DAY TAB 50+ ADV	OTC
ONE-A-DAY TAB 50+ MENS	OTC
ONE-A-DAY TAB 50+ WMN	OTC
ONE-A-DAY TAB 65+	OTC
ONE-A-DAY TAB ENERGY	OTC
ONE-A-DAY TAB MENOPAUS	OTC
ONE-A-DAY TAB MENS	OTC
ONE-A-DAY TAB PETITES	OTC
ONE-A-DAY TAB PROEDGE	OTC
<i>one-a-day tab teen/her</i>	OTC
ONE-A-DAY TAB TEEN/HIM	OTC
ONE-A-DAY TAB WOMENS	OTC
<i>optic-vites tab</i>	OTC
<i>optic-vites tab lutein</i>	OTC
<i>optimum pms tab</i>	OTC
OPTIVITE TAB P.M.T.	OTC
OPURITY TAB	OTC
OSTEOPRIME TAB PLUS	OTC
<i>osteoprime tab ultra</i>	OTC
PARVLEX TAB	OTC
PHYTOMULTI TAB	OTC
PRESERVISION TAB AREDS	OTC
PRO-CAL TAB	OTC
PROCERV HP TAB	OTC
PRORENAL +D TAB	OTC
PRORENAL+D TAB	OTC
<i>prosght tab</i>	OTC
PROVIT TAB	OTC
<i>qc hair/skin tab nails</i>	OTC
QC MULTI-VIT TAB	OTC
<i>qc therin-m tab</i>	OTC
QUIN B TAB STRONG	OTC
<i>quintabs-m tab</i>	OTC
QUINTABS-M TAB	OTC
<i>ra one daily tab maximum</i>	OTC
<i>ra one daily tab mens</i>	OTC
<i>ra one daily tab mens 50+</i>	OTC
<i>ra one daily tab mens/d3</i>	OTC
RAYAVIT TAB	OTC
<i>renaplex tab</i>	OTC
RENAPLEX-D TAB	OTC
<i>senior tabs tab</i>	OTC

Drug Name	Requirements/Limits
SENTRY SENIO TAB LUTEIN	OTC
<i>sentry tab</i>	OTC
SENTRY TAB	OTC
<i>sentry tab senior</i>	OTC
<i>sm complete tab</i>	OTC
<i>sm complete tab 50+</i>	OTC
<i>sm complete tab 50+ mens</i>	OTC
<i>sm complete tab 50+ wmn</i>	OTC
<i>sm complete tab adv form</i>	OTC
<i>sm complete tab senior</i>	OTC
<i>sm hair/skin tab /nails</i>	OTC
SM ONE DAILY TAB MENS	OTC
SM ONE DAILY TAB WOMENS	OTC
<i>sm opti-vita tab</i>	OTC
SOLO TAB	OTC
<i>spectr women tab hlth sen</i>	OTC
<i>spectra ultr tab hlth men</i>	OTC
SPECTRAVITE TAB	OTC
SPECTRAVITE TAB ADLT 50+	OTC
SPECTRAVITE TAB ADULTS	OTC
<i>spectravite tab advanced</i>	OTC
<i>spectravite tab men</i>	OTC
<i>spectravite tab men 50+</i>	OTC
SPECTRAVITE TAB MEN 50+	OTC
<i>spectravite tab senior</i>	OTC
SPECTRAVITE TAB ULT MEN	OTC
SPECTRAVITE TAB ULT WMN	OTC
<i>spectravite tab women</i>	OTC
<i>spectravite tab women 50</i>	OTC
<i>stress b-com tab antio/zn</i>	OTC
<i>stresstabs tab advanced</i>	OTC
<i>super antiox tab a/c/e/se</i>	OTC
<i>super multip tab</i>	OTC
<i>super thera tab vite m</i>	OTC
SUPERIOR TAB MENS	OTC
<i>supr aytinal tab</i>	OTC
<i>supr aytinal tab 50 plus</i>	OTC
<i>supr vitamin tab</i>	OTC
SYSTANE ICAP TAB AREDS2	OTC
T-VITES TAB	OTC
<i>thera form/ tab hematin</i>	OTC
<i>thera tab vital-m</i>	OTC
<i>thera vital tab m</i>	OTC

Drug Name	Requirements/Limits
THERA-TABS M TAB	OTC
<i>therabasic-m tab</i>	OTC
<i>theradex m tab</i>	OTC
<i>theradex m/ tab beta car</i>	OTC
THERAGRAN-M TAB	OTC
THERAGRAN-M TAB 50 PLUS	OTC
THERAGRAN-M TAB ADVANCED	OTC
THERAGRAN-M TAB PREMIER	OTC
<i>therapeutic tab -m</i>	OTC
<i>therapeutic- tab m</i>	OTC
THERAPEUTIC- TAB M	OTC
<i>theratrum co tab 50 plus</i>	OTC
<i>theratrum tab complete</i>	OTC
<i>thrive for tab women</i>	OTC
ULTRA BONEUP TAB	OTC
<i>ultra freeda tab</i>	OTC
<i>ultra freeda tab /iron</i>	OTC
ULTRA POTENC TAB WOMEN 50	OTC
<i>ultrachoice tab advanced</i>	OTC
<i>vision form/ tab lutein</i>	OTC
<i>vision tab vitamins</i>	OTC
<i>vita hair tab</i>	OTC
<i>vitabasic tab complete</i>	OTC
<i>vitabasic tab senior</i>	OTC
VITAMIN D3 TAB COMPLETE	OTC
VITASANA TAB	OTC
VITATRUM TAB	OTC
<i>vitatrum tab complete</i>	OTC
VITEYES CLAS TAB MULTIVIT	OTC
VITEYES OPTI TAB NERV SUP	OTC
VITRUM 50+ TAB ADT- MUL	OTC
VITRUM TAB ADULT	OTC
<i>vitrum tab senior</i>	OTC
VITRUM TAB SENIOR	OTC
WEIGHT SMART TAB ADVANCED	OTC
<i>womens 50+ tab advanced</i>	OTC
WOMENS 50+ TAB MULTIVIT	OTC
<i>womens daily tab fa/ca/fe</i>	OTC
<i>womens daily tab formula</i>	OTC
<i>womens mult tab</i>	OTC
WOMENS MULTI TAB	OTC
<i>womns active tab daily</i>	OTC
YELETS TEEN TAB FORMULA	OTC

Drug Name	Requirements/Limits
ENDUR-VM TAB	OTC
ENDUR-VM TAB IRON	OTC
<i>mega-maratho tab 100 tr</i>	OTC
<i>natrul-100 tab super</i>	OTC
<i>superior 35 tab</i>	OTC
<i>totalday mul tab tr</i>	OTC
ULTRA MEGA G TAB 75MG CR	OTC
ULTRA MEGA G TAB 100MG	OTC
ULTRA MEGA TAB 75MG CR	OTC
ULTRA MEGA TAB TWO	OTC
<i>ultra-mega tab cr</i>	OTC
<i>a thru z chw select</i>	OTC
ADEK CHW PLUS ZN	OTC
<i>adlt multivi chw gummies</i>	OTC
ADLT ONE DLY CHW GUMMIES	OTC
<i>advanced chw multi ea</i>	OTC
<i>airborne chw</i>	OTC
AIRBORNE CHW	OTC
AIRBORNE CHW CITRUS	OTC
<i>airborne chw gummies</i>	OTC
<i>airborne chw immune</i>	OTC
<i>airborne chw kids</i>	OTC
AIRBORNE CHW KIDS	OTC
AIRBORNE CHW VERY BER	OTC
<i>airshield chw</i>	OTC
AIRSHIELD CHW IMMUNITY	OTC
ALIVE HAIR CHW SKN/NAIL	OTC
ALIVE MENS CHW 50+	OTC
ALIVE MENS CHW GUMMY	OTC
ALIVE MULTI CHW VITAMIN	OTC
ALIVE WOMENS CHW 50+	OTC
ALIVE WOMENS CHW GUMMY	OTC
BARIATRIC CHW FUSION	OTC
CELEBRATE CHW 18	OTC
CELEBRATE CHW 36	OTC
CELEBRATE CHW 45	OTC
CELEBRATE CHW 60	OTC
CENTRUM 50+ CHW ADULTS	OTC
CENTRUM 50+ CHW FRSH/FRU	OTC
CENTRUM CHW ADULTS	OTC
CENTRUM CHW FLAV BST	OTC
CENTRUM CHW SILVER	OTC
CENTRUM CHW VITAMINT	OTC

Drug Name	Requirements/Limits
CENTRUM MULT CHW OMEGA 3	OTC
CHOICEFUL CHW MULTIVIT	OTC
CULTURELLE CHW MULTIVIT	OTC
<i>cvs daily chw gummies</i>	OTC
DEKAS CHW BARIATRI	OTC
DEKAS PLUS CHW	OTC
EMERGEN-C CHW IMMUNE/D	OTC
EMERGEN-C CHW VITA C	OTC
IMMUNE CHW SUPPORT	OTC
<i>mens daily chw gummies</i>	OTC
MENS MULTI CHW	OTC
<i>multi adult chw gummies</i>	OTC
<i>multi gummie chw mens</i>	OTC
<i>multi gummie chw womens</i>	OTC
<i>multi+omega3 chw adult</i>	OTC
<i>multi-vitami chw gummies</i>	OTC
<i>multivi adlt chw gummies</i>	OTC
MULTIVITAMIN CHW ADLT GUM	OTC
MVW HI-D CHW ADEK	OTC
<i>ocuvite eye chw health</i>	OTC
ONE A DAY CHW IMMUNITY	OTC
ONE A DAY CHW WOMENS	OTC
ONE DAILY CHW ADLT GUM	OTC
ONE-A-DAY CHW IMMUNITY	OTC
ONE-A-DAY CHW VITACRAV	OTC
OPTIFAST POS CHW BARIATRI	OTC
OPTIMUM CHW AIRVITES	OTC
OPTISOURCE CHW BARIATRC	OTC
OPURITY CHW BYPASS	OTC
PRESERVISION CHW AREDS 2	OTC
SPECTRAVITE CHW ADLT 50+	OTC
SPECTRAVITE CHW WOMEN	OTC
SYSTANE ICAP CHW AREDS2	OTC
VITACHEW CHW ADULT	OTC
VITACRAVES CHW GUMMIES	OTC
VITACRAVES CHW IMMUNITY	OTC
VITACRAVES CHW MENS	OTC
VITACRAVES CHW SOUR GUM	OTC
VITACRAVES CHW WOMENS	OTC
VITAJoy MULT CHW ADULT	OTC
<i>vitatum chw</i>	OTC
WAL-BORN CHW VIT C	OTC
WMNS MULTIVI CHW +COLLAGE	OTC

Drug Name	Requirements/Limits
<i>womens daily chw gummies</i>	OTC
WOMENS MULT CHW GUMMIES	OTC
YOUR LIFE CHW GUMMIES	OTC
YUMVS DIABET CHW MULTIVIT	OTC
YUMVS MULTI CHW ZERO	OTC
ACTIVE 55 LIQ PLUS	OTC
ALIVE LIQ MULT-VIT	OTC
<i>bprotected liq multi-vi</i>	OTC
CENTRUM LIQ	OTC
CENTRUM LIQ ADULT	OTC
<i>comp multivi liq mineral</i>	OTC
LYSIPLEX LIQ PLUS	OTC
MULTI-VITE LIQ	OTC
<i>multiple vitamins w/ minerals liquid</i>	OTC
<i>multivitamin liq</i>	OTC
<i>multivitamin liq mineral</i>	OTC
<i>tropical liq nutritio</i>	OTC
ACTIVNUT W/O POW COP/IRON	OTC
ATP IGNITE POW WORKOUT	OTC
BOOSTNOW POW IMM SUPP	OTC
C-BUFF POW	OTC
NANOVM POW ADULT	OTC
NANOVM POW SENIOR	OTC
PHLEXY-VITS POW	OTC
VITEYES CLAS POW +MULTI	OTC
ACTIVESSENT PAK	OTC
ATP IGNITE PAK	OTC
CENTRUM POW DRINK	OTC
EMERGEN-C PAK BLUE	OTC
EMERGEN-C PAK FIVE	OTC
EMERGEN-C PAK HEART	OTC
EMERGEN-C PAK IMMUNE	OTC
EMERGEN-C PAK JOINT	OTC
EMERGEN-C PAK KIDZ	OTC
EMERGEN-C PAK MSM LITE	OTC
EMERGEN-C PAK PINK	OTC
EMERGEN-C PAK SUPER FR	OTC
EMERGEN-C PAK VIT D/CA	OTC
EMERGEN-C PAK VITA C	OTC
ENERGY POW BOOSTER	OTC
EVOLUTION60 POW	OTC
GNP IMMUNE PAK	OTC
GNP IMMUNE PAK SUPPORT	OTC

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Drug Name	Requirements/Limits
IMMUBLAST-C POW ORANGE	OTC
IMMUNE SUPP POW VIT C	OTC
MAXIMIN PAK	OTC
MENS DAILY PAK PACK	OTC
MULTI FOR POW HER	OTC
MULTI FOR POW HIM	OTC
PROCEED PLUS PAK	OTC
RA ESSENCE-C POW ORANGE	OTC
RA ESSENCE-C POW RASPBRY	OTC
RA ESSENCE-C POW TNGERINE	OTC
SKIN BEAUTY/ PAK WELLNESS	OTC
VITAMIN C PAK BLEND	OTC
WOMENS DAILY PAK PACK	OTC
ZINC LOZ	OTC
ACTIVESSENTI PAK ONCOPLEX	OTC
ACTIVESSENTI PAK WOMEN	OTC
CONCEPTIONXR MIS MOTILITY	OTC
DAILY HEART PAK SUPPORT	OTC
DAILY PAK MIS MULTIVIT	OTC
DIABET HLTH PAK SUPPORT	OTC
DIABETES PAK HEALTH	OTC
KP MENS MIS DAILY PK	OTC
KP WOMENS PAK DAILY	OTC
LIFE PACK MIS MENS	OTC
LIFE PACK MIS WOMENS	OTC
MENS PAK	OTC
PREMIUM MIS PACKETS	OTC
THERANATAL MIS LACTATIO	OTC
WOMENS PAK	OTC
MULTIPLE VITAMINS W/ CALCIUM	
<i>essent one tab daily</i>	OTC
<i>one daily tab womens</i>	OTC
ONE-A-DAY TAB WOMENS	OTC
<i>signacal tab</i>	OTC
SM ONE DAILY TAB ESSENTIA	OTC
PEDIATRIC VITAMINS	
HONEY BEARS CHW	OTC
MULTIVITAMIN CHW CHILD	OTC
PEDIATRIC MULTIPLE VITAMINS	
<i>child chew chw vitamins</i>	OTC
<i>child chew/ chw extra c</i>	OTC
<i>children vit chw</i>	OTC

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Drug Name	Requirements/Limits
<i>childrens chw multivit</i>	OTC
<i>childrens chw vitamins</i>	OTC
<i>culturelle chw</i>	OTC
<i>culturelle chw kids</i>	OTC
<i>flintstones chw multivit</i>	OTC
<i>flintstones chw my first</i>	OTC
<i>flintstones chw omega-3</i>	OTC
<i>flintstones chw pls calc</i>	OTC
<i>fruity chews chw</i>	OTC
<i>gnp little chw ones</i>	OTC
<i>kids probiot chw multivit</i>	OTC
<i>land bfr tim chw vit/c</i>	OTC
<i>little chw animals</i>	OTC
<i>multivitamin chw children</i>	OTC
<i>qc childrens chw extra c</i>	OTC
<i>sm animal chw shapes</i>	OTC
VITACRAVES CHW +OMEGA-3	OTC
<i>zoo friends chw extra c</i>	OTC
NOVAMV PED DRO 10MG/ML	OTC
MULTIV INFAN DRO /TODDLER	OTC
MULTIVITAMIN DRO INFANT	OTC
PED POLY-VIT DRO	OTC
POLY-VI-SOL SOL 50MG/ML	OTC
POLY-VITA DRO	OTC
POLY-VITE DRO	OTC
POLY-VITE SOL 50MG/ML	OTC

PED MULTIPLE VITAMINS W/ MINERALS

ACTIVNUTRIEN CHW	OTC
ALIVE GUMMIE CHW CHILDREN	OTC
ALIVE MULTI CHW CHILDRNS	OTC
CENTRUM KIDS CHW	OTC
CENTRUM KIDS CHW FLAV BST	OTC
CHILDRENS CHW GUMMIES	OTC
EQ MULTIVITA CHW GUMMIES	OTC
FLINTSTONES CHW BONE BLD	OTC
FLINTSTONES CHW COMPLETE	OTC
FLINTSTONES CHW GUMMIES	OTC
FLINTSTONES CHW IMMUNITY	OTC
FLINTSTONES CHW SOUR GUM	OTC
FLINTSTONES CHW TODDLER	OTC
GNP MULTI CHW CHILDREN	OTC
GUMMI BEAR CHW MULTIVIT	OTC
GUMMIES CHW	OTC

Drug Name	Requirements/Limits
GUMMY DINOS CHW	OTC
GUMMY DINOS CHW CHLDRN	OTC
GUMMY MULTIV CHW KIDS	OTC
HEALTHY KIDS CHW GUMMIES	OTC
KIDZ MULTVIT CHW PROBIOTI	OTC
MULTI ZERO CHW YUMVSKID	OTC
MULTIVITAMIN CHW CHILD	OTC
MULTIVITAMIN CHW CHILDREN	OTC
MULTIVITAMIN CHW GUMMIES	OTC
MVW COMPLETE CHW BUBBLGUM	OTC
MVW COMPLETE CHW D3000	OTC
MVW COMPLETE CHW D5000	OTC
MVW COMPLETE CHW GRAPE	OTC
MVW COMPLETE CHW ORANGE	OTC
ONE-A-DAY CHW JLY RANC	OTC
SMARTY PANTS CHW KIDS	OTC
VITACHEW CHW	OTC
VITALETS CHW CHILD	OTC
ZOO FRIENDS CHW GUMMIES	OTC
BABY IRON DRO IMMUNITY	OTC
DEKAS PLUS LIQ	OTC
MVW HI-D DR LIQ EX VIT D	OTC
MVW MOD FORM LIQ PEDS	OTC
UPSPRINGBABY DRO MV/IRON	OTC
MVW COMPLETE DRO PEDIATRI	OTC
NANOVM POW 1-3 YRS	OTC
NANOVM POW 4-8YEARS	OTC
NANOVM POW 9-18 YRS	OTC
NANOVM T/F POW	OTC

PED MV W/ IRON

HONEY BEARS CHW IRON-ZIN	OTC
<i>childrens chw /iron</i>	OTC
<i>fruity chews chw /iron</i>	OTC
<i>land bfr tim chw vit/iron</i>	OTC
<i>qc childrens chw iron</i>	OTC
<i>animal shape chw complete</i>	OTC
<i>cerovite jr chw</i>	OTC
<i>chewable chw children</i>	OTC
<i>childrens chw complete</i>	OTC
<i>chld mltivit chw /mineral</i>	OTC
<i>compl multiv chw childrns</i>	OTC
<i>cvs children chw complete</i>	OTC
<i>flintstones chw complete</i>	OTC

Drug Name	Requirements/Limits
<i>flintstones chw ext iron</i>	OTC
<i>flintstones chw w/iron</i>	OTC
MULTIVITAMIN CHW IRON	OTC
<i>qc childrens chw complete</i>	OTC
<i>sm animal sh chw complete</i>	OTC
<i>ultra choice chw kids</i>	OTC
PED POLY-VIT DRO /IRON	OTC
POLY-VITA/FE DRO	OTC
POLY-VITE SOL /IRON	OTC

PED MV W/ FLUORIDE

<i>tri-vit/fluo dro 0.25mg</i>	
<i>vit a/c/d/fl dro 0.25mg</i>	
<i>pediatric vitamins acd w/ fluoride soln 0.5 mg/ml</i>	
<i>tri-vit/fluo dro 0.5mg</i>	
<i>multi vit/fl chw 0.25mg</i>	
<i>multivit/fl chw 0.25mg</i>	
MULTIVIT/FL CHW 0.25MG	OTC
QUFLORA PED CHW 0.25MG	
<i>multivit/fl chw 0.5mg</i>	
MULTIVIT/FL CHW 0.5MG	OTC
QUFLORA PED CHW 0.5MG	
<i>multivit/fl chw 1mg</i>	
MULTIVIT/FL CHW 1MG	OTC
QUFLORA PED CHW 1MG	
FLORIVA DRO PLUS	
<i>multivit/fl dro 0.25mg</i>	
<i>multivit/fl dro 0.25mg</i>	OTC
QUFLORA PED DRO 0.25MG	
<i>multi vit/fl dro 0.5mg/ml</i>	OTC
<i>multi-vit/fl dro 0.5mg/ml</i>	
QUFLORA PED DRO 0.5MG/ML	

PED MULTI VITAMINS W/FL & FE

POLY-VI-FLOR SUS /IRON	OTC
<i>multi-vit/fe dro /fl 0.25</i>	OTC
<i>multi-vit/fl dro /fe 0.25</i>	

SPECIALTY VITAMINS PRODUCTS

ADRENAL CAP MANAGER	OTC
ADRENALIV CAP	OTC
ADRENOID CAP	OTC
BILBERRY CAP PLUS	OTC
CARDIOPRESS CAP	OTC
CHOLASE CAP CONTROL	OTC

Drug Name	Requirements/Limits
COLLAGEN CAP ULTRA	OTC
CORTICARE B CAP	OTC
FEMQUIL CAP	OTC
GLYCOTROL CAP	OTC
GLYCOTROL CAP COMPLETE	OTC
HEART SAVIOR CAP	OTC
IMMUNERX CAP	OTC
IMMUNICARE CAP	OTC
INULOSE BLD CAP SUGAR	OTC
LIPOTRIAD CAP VIS PLUS	OTC
LIPOTRIAD CAP VISION	OTC
LIPOTRIAD CAP VISIONAR	OTC
MEDCAPS DPO CAP	OTC
MEDCAPS GI CAP	OTC
MEDCAPS IS CAP	OTC
MEDCAPS T3 CAP	OTC
MEMORALL CAP	OTC
METHYL CAP PROTECT	OTC
METHYL-GUARD CAP	OTC
METHYL-GUARD CAP PLUS	OTC
MM BIOTIN CAP KERATIN	OTC
RETAINE CAP VISION	OTC
SYNERTROPIN CAP	OTC
VITAMINS FOR CAP HAIR	OTC
<i>a thru z tab advantag</i>	OTC
ADRENAL TAB CALM	OTC
ALLERWELL TAB ALLERGY	OTC
BIOTIN PLUS TAB KERATIN	OTC
BRAIN MIGHT TAB	OTC
CENTRUM SPEC TAB ENERGY	OTC
CENTRUM TAB PERFORMA	OTC
CVS HAIR/SKN TAB NAILS	OTC
ELON MATRIX TAB 5000	OTC
ELON MATRIX TAB 5000 COM	OTC
ELON MATRIX TAB COMPLETE	OTC
ELON MATRIX TAB PLUS	OTC
ELON R3 TAB	OTC
HAIR NOURISH TAB SUPPLEMN	OTC
<i>hair/skin/ tab nails</i>	OTC
HEALTHY TAB HEART	OTC
HEART TABS TAB	OTC
LIPIDSHIELD TAB PLUS	OTC
MEMORY TAB COMPLEX	OTC

Drug Name	Requirements/Limits
<i>menopause tab support</i>	OTC
MG PLUS TAB PROTEIN	OTC
MIL ADREGEN TAB	OTC
RA EAR CARE TAB	OTC
<i>ultimate fat tab burner</i>	OTC
UPSPRING TAB HE NATAL	OTC
<i>varisan tab vitality</i>	OTC
<i>vit for hair tab</i>	OTC
<i>weight loss tab multi</i>	OTC
GERM DEFENSE TAB PM	OTC
RA EFFERVESC TAB FORMULA	OTC
WAL-BORN TAB	OTC
COMPLETE CAP BALANCE	OTC
MENOPAUSE MIS AM/PM	OTC
WOMENS MENOP MIS VITA PAK	OTC
WOMENS VITA MIS PAK	OTC
PRENATAL VITAMINS	
<i>prenatabs rx tab</i>	OTC
<i>elite-ob tab</i>	
<i>trinate tab</i>	
<i>prenatal 19 chw tab</i>	
<i>pnv-select tab</i>	
<i>inatal gt tab</i>	
<i>pnv-dha cap</i>	
VITAMINS W/ LIPOTROPICS	
<i>b-stress cap</i>	OTC
<i>balance b-50 cap complex</i>	OTC
<i>multi-vit hp cap /mineral</i>	OTC
ACTIFLOVIT TAB EAR HEAL	OTC
<i>b-complex tab form 1</i>	OTC
<i>balance b100 tab</i>	OTC
<i>balance b-50 tab complex</i>	OTC
<i>cvs balanced tab b50</i>	OTC
<i>cvs inner tab ear plus</i>	OTC
<i>ear health tab formula</i>	OTC
<i>ear health tab plus</i>	OTC
<i>lipo flavono tab plus</i>	OTC
<i>lipoflavovit tab</i>	OTC
LIPOTRIAD TAB	OTC
<i>mega multi tab w/che mi</i>	OTC
<i>nat-rul tab b-50</i>	OTC
<i>risanoid tab plus</i>	OTC

Drug Name	Requirements/Limits
<i>ultra b-100 tab complex</i>	OTC
<i>vitamins w/ lipotropics tab</i>	OTC
B-100 COMP TAB TR	OTC
GERAVINE ELX	OTC

IRON W/ VITAMINS

<i>geritol tab complete</i>	OTC
GERITOL LIQ TONIC	OTC

MINERALS & ELECTROLYTES

CALCIUM

CALCIUM TAB 280MG	OTC
RA CALCIUM TAB 500MG	OTC
<i>cvs calcium tab 600mg</i>	OTC
<i>ra calcium tab high pot</i>	OTC
<i>calcium carbonate tab 600 mg</i>	OTC
<i>calcium carb tab 1250mg</i>	OTC
<i>calcium carbonate tab 1250 mg (500 mg elemental ca)</i>	OTC
<i>calcium 600 tab</i>	OTC
<i>calcium carbonate tab 1500 mg (600 mg elemental ca)</i>	OTC
<i>calcium tab 600mg</i>	OTC
<i>pure calcium tab carbonat</i>	OTC
<i>super calciu tab 600mg</i>	OTC
CALCIUM CARB CHW 500MG	OTC
<i>calcium citrate tab 950 mg (200 mg elemental ca)</i>	OTC
<i>oyster shell calcium tab 500 mg</i>	OTC
<i>super cal/ tab mag</i>	OTC
CAL-MAG TAB 500-250	OTC
CALCIUM/D3 TAB 500/200	OTC
PARVA-CAL TAB 500MG	OTC
<i>calcium carbonate-vitamin d cap 600 mg-5 mcg (200 unit)</i>	OTC
<i>liq ca/vit d cap 600mg</i>	OTC
<i>calcium carbonate-vitamin d tab 250 mg-3.125 mcg (125 unit)</i>	OTC
OYST SHELL/D TAB 500MG	OTC
CALCIUM/VT D TAB 600-125	OTC
<i>calcium 600 tab +d</i>	OTC
<i>calcium carbonate-vitamin d tab 600 mg-5 mcg (200 unit)</i>	OTC
CALCIUM 600 TAB +D	OTC
EQL CALCIUM CAP VIT D	OTC
<i>calc 600+d3 cap 600-500</i>	OTC
<i>calcium carb-cholecalciferol cap 600 mg-12.5 mcg (500 unit)</i>	OTC

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Drug Name	Requirements/Limits
<i>calcium plus cap d3</i>	OTC
<i>calcium/d3 cap 600-500</i>	OTC
<i>kp calcium cap 600+d</i>	OTC
<i>calcium carb-cholecalciferol tab 250 mg-3.125 mcg (125 unit)</i>	OTC
<i>oyst shell/d tab 250-125</i>	OTC
<i>calcium 500 tab +d</i>	OTC
<i>calcium 500 tab /vit d</i>	OTC
<i>nat-rul cal tab /d 500mg</i>	OTC
<i>oyst shell/d tab 500-125</i>	OTC
<i>calcium carbonate-cholecalciferol tab 500 mg-5 mcg(200 unit)</i>	OTC
<i>calcium pls tab 500-200</i>	OTC
<i>calcium tab 500+d</i>	OTC
<i>calcium tab 500/d</i>	OTC
<i>calcium/d tab 500-200</i>	OTC
<i>calcium/d tab 500/200</i>	OTC
<i>calcium/d tab 500mg</i>	OTC
<i>os-cal + d3 tab 500-200</i>	OTC
<i>oysco 500+d tab</i>	OTC
<i>oyst ca/d3 tab 500-200</i>	OTC
<i>oyst shell/d tab 500-5mcg</i>	OTC
<i>oyst shell/d tab 500-200</i>	OTC
<i>ra hi cal tab 500-200</i>	OTC
<i>sm calcium/d tab 500-200</i>	OTC
<i>calcium 500 tab +d</i>	OTC
<i>calcium carb-cholecalciferol tab 500 mg-10 mcg (400 unit)</i>	OTC
<i>calcium/d3 tab</i>	OTC
<i>calcium/d3 tab 500-400</i>	OTC
<i>calcium/d tab 500-400</i>	OTC
<i>os calcium tab /vit d</i>	OTC
<i>oys shell ca tab /d3</i>	OTC
<i>oyst shell/d tab 500-400</i>	OTC
<i>oyst shell/d tab 500mg</i>	OTC
<i>sm calcium tab /vit d3</i>	OTC
<i>calcium/d3 tab</i>	OTC
<i>calcium/d3 tab 500-600</i>	OTC
<i>os-cal extra tab d3</i>	OTC
<i>calcium 600 tab +d</i>	OTC
<i>calcium 600 tab +d3</i>	OTC
<i>calcium + d tab 600-200</i>	OTC
<i>calcium + d tab 600mg</i>	OTC

Drug Name	Requirements/Limits
<i>calcium carbonate-cholecalciferol tab 600 mg-5 mcg(200 unit)</i>	OTC
<i>calcium tab vit d</i>	OTC
<i>calcium/d3 tab 600-5</i>	OTC
<i>calcium/d tab 600-200</i>	OTC
<i>ra calcium+d tab 600mg</i>	OTC
<i>calcium 600 tab + d</i>	OTC
<i>calcium 600 tab +d</i>	OTC
<i>calcium 600/ tab vit d</i>	OTC
<i>calcium carb-cholecalciferol tab 600 mg-10 mcg (400 unit)</i>	OTC
<i>calcium+d3 tab 600-400</i>	OTC
<i>calcium+d tab 600-400</i>	OTC
<i>calcium/d3 tab 600-10</i>	OTC
<i>eql calcium tab w/vit d</i>	OTC
<i>kp calcium tab 600+d</i>	OTC
<i>ra ca/vit d3 tab 600-400</i>	OTC
<i>ra calcium tab vit d</i>	OTC
<i>sm ca/vit d3 tab 600-400</i>	OTC
<i>sm calcium/d tab 600-400</i>	OTC
<i>super ca 600 tab + d3</i>	OTC
<i>super ca 600 tab + d3 400</i>	OTC
<i>calc 600+d tab 600-800</i>	OTC
<i>calcium+d3 tab 600-20</i>	OTC
<i>calcium+d3 tab 600-800</i>	OTC
<i>calcium/d3 tab</i>	OTC
<i>calcium/d3 tab 600-20</i>	OTC
<i>calcium/d3 tab 600-800</i>	OTC
<i>calcium/d tab 600-800</i>	OTC
<i>calcium/vita tab d3</i>	OTC
<i>600+d3 tab cal/vitd</i>	OTC
<i>kp calcium tab +d</i>	OTC
CALCIUM CHW 500-10	OTC
<i>os-cal chw</i>	OTC
<i>os-cal chw 500-600</i>	OTC
<i>calcium 600 chw w/vit d</i>	OTC
<i>creamies chw 600-400</i>	OTC
<i>calc cit+d3 tab 200-250</i>	OTC
<i>calc citr+d3 tab 200-250</i>	OTC
<i>calc citr+d3 tab 400-12.5</i>	OTC
<i>calc citr/d3 tab 200-250</i>	OTC
<i>calcium cit-vit d tab 200 mg-6.25 mcg(250 unit) (elem ca)</i>	OTC

Drug Name	Requirements/Limits
CALC CIT+D3 TAB 250-200	OTC
CALC CITRATE TAB +D	OTC
<i>ca citrate + tab</i>	OTC
<i>ca citrate tab + d</i>	OTC
<i>ca citrate tab plus d</i>	OTC
<i>calcitrate tab plus d</i>	OTC
<i>calcium + d3 tab</i>	OTC
<i>calcium cit-vitamin d tab 315 mg-5 mcg(200 unit) (elem ca)</i>	OTC
<i>ca cit/vit d tab 315/250</i>	OTC
<i>cal cit+d3 tab maximum</i>	OTC
<i>calc citr+d3 tab 315-250</i>	OTC
<i>calc citra+d tab 315-250</i>	OTC
<i>calcium +d3 tab maximum</i>	OTC
<i>calcium citr tab plus d-3</i>	OTC
<i>calcium citr tab w/vit d3</i>	OTC
<i>calcium+d3 tab 315-250</i>	OTC
<i>eq calcium tab citr+d</i>	OTC
<i>eql calcium tab citr/d3</i>	OTC
<i>gnp calcium tab cit +d3</i>	OTC
<i>sm cal citr+ tab vit d3</i>	OTC
CAL CIT MAL/ TAB VITAMIND	OTC
<i>calcium-magnesium-zinc tab 333-133-5 mg</i>	OTC
<i>cvs ca/mg/zn tab</i>	OTC
<i>kp ca/mg/zn tab</i>	OTC
<i>sm ca/mg/zn tab</i>	OTC
<i>calcium-magnesium-zinc tab 333-133-8.3 mg</i>	OTC
<i>sm ca/mg/zn tab</i>	OTC
RISACAL-D TAB	OTC
<i>calcium for chw women</i>	OTC
<i>calcium soft chw mlk choc</i>	OTC
<i>cal soft chw chw mlk choc</i>	OTC
<i>chew calcium chw</i>	OTC
<i>sm calcium chw</i>	OTC
CALCIUM SOFT CHW CARAMEL	OTC
CALCIUM SOFT CHW CHOCOLAT	OTC

FLUORIDE

<i>sodium fluoride tab 0.5 mg f (from 1.1 mg naf)</i>
<i>sodium fluoride tab 1 mg f (from 2.2 mg naf)</i>
<i>sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf)</i>
<i>sodium fluoride chew tab 0.5 mg f (from 1.1 mg naf)</i>
<i>sodium fluoride chew tab 1 mg f (from 2.2 mg naf)</i>
<i>sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf)</i>

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Drug Name	Requirements/Limits
PHOSPHATE	
<i>phospho-trin tab k500</i>	
POTASSIUM	
<i>effer-k tab 25meq ef</i>	
<i>k-prime tab 25meq ef</i>	
<i>klor-con/ef tab 25meq fr</i>	
<i>potassium chloride cap er 8 meq</i>	
<i>potassium chloride cap er 10 meq</i>	
<i>klor-con 8 tab 8meq er</i>	
<i>potassium chloride tab er 8 meq (600 mg)</i>	
<i>klor-con 10 tab 10meq er</i>	
<i>potassium chloride tab er 10 meq</i>	
<i>potassium chloride tab er 20 meq (1500 mg)</i>	
<i>potassium chloride oral soln 10% (20 meq/15ml)</i>	
<i>potassium chloride oral soln 20% (40 meq/15ml)</i>	
<i>klor-con m10 tab 10meq er</i>	
<i>potassium chloride microencapsulated crys er tab 10 meq</i>	
<i>klor-con m20 tab 20meq er</i>	
<i>potassium chloride microencapsulated crys er tab 20 meq</i>	
MINERAL COMBINATIONS	
<i>CAL/MAG/ZINC TAB VIT D3</i>	OTC
ELECTROLYTE MIXTURES	
<i>ceralyte 70 sol</i>	OTC
<i>cvs electrol sol</i>	OTC
<i>gnp electrol sol</i>	OTC
<i>gnp pediatri sol electrol</i>	OTC
<i>oral electro sol cherry</i>	OTC
<i>oral electro sol freezer</i>	OTC
<i>oral electro sol h-e-b</i>	OTC
<i>oral electrolyte solution</i>	OTC
<i>oralyte sol bubl gum</i>	OTC
<i>oralyte sol fruit</i>	OTC
<i>oralyte sol grape</i>	OTC
<i>oralyte sol unflavor</i>	OTC
<i>ped elctrlyt sol</i>	OTC
<i>ped elctrlyt sol /zinc</i>	OTC
<i>ped elctrlyt sol apple</i>	OTC
<i>ped elctrlyt sol freeze</i>	OTC
<i>ped elctrlyt sol freezer</i>	OTC
<i>ped elctrlyt sol freezpop</i>	OTC

Drug Name	Requirements/Limits
<i>ped elctryt sol fruit</i>	OTC
<i>ped elctryt sol grape</i>	OTC
<i>ped elctryt sol pineappl</i>	OTC
<i>ped elctryt sol unflavor</i>	OTC
<i>ped elctryt sol unflavrd</i>	OTC
<i>pedia vance sol apple</i>	OTC
<i>pedia vance sol grape</i>	OTC
<i>ra pediatric sol electrol</i>	OTC
<i>rehydralyte sol</i>	OTC

NUTRIENTS

PROTEINS

L-CARNITINE CAP 250MG	OTC
<i>levocarnitine cap 500 mg</i>	OTC
LEVOCARNITIN TAB 330MG	OTC
<i>levocarnitine tab 500 mg</i>	OTC
ACTICARNITIN SOL SF	OTC
<i>g-levocarnit sol 1gm/10ml</i>	OTC
LEVOCARNITIN SOL 1GM/10ML	OTC
<i>levocarnitine (dietary) oral soln 1 gm/10ml</i>	OTC

MISC. NUTRITIONAL SUBSTANCES

<i>cvs fish oil cap 1/2 size</i>	OTC
<i>cvs fish oil cap 500mg</i>	OTC
<i>omega-3 fatty acids cap 500 mg</i>	OTC
<i>ovega-3 cap 500mg</i>	OTC
<i>sam-e.p.a. cap 500mg</i>	OTC
<i>sv fish oil cap 500mg</i>	OTC
<i>fish oil con cap 300mg</i>	OTC
<i>omega-3 fatty acids cap 300 mg</i>	OTC
<i>sm fish oil cap</i>	OTC
<i>fish oil cap 435mg</i>	OTC
<i>omega-3 fatty acids cap 435 mg</i>	OTC
FISH OIL CAP 1000MG	OTC
FISH OIL CAP 1400MG	OTC
OMEGA-3 CAP 1400MG	OTC
ULTRA OMEGA3 CAP 1400MG	OTC
<i>cvs fish oil cap 1000mg</i>	OTC
<i>eql fish oil cap 1000mg</i>	OTC
<i>fish oil cap 1000mg</i>	OTC
<i>fish oil con cap 1000mg</i>	OTC
<i>gnp fish oil cap 1000mg</i>	OTC
<i>hm fish oil cap 1000mg</i>	OTC
<i>maxepa cap 1000mg</i>	OTC

Drug Name	Requirements/Limits
<i>maximum epa cap 1000mg</i>	OTC
<i>omega 3 cap 1000mg</i>	OTC
<i>omega-3 cf cap 1000mg</i>	OTC
<i>omega-3 fatty acids cap 1000 mg</i>	OTC
<i>omega-3 fish cap 1000 mg</i>	OTC
<i>qc fish oil cap 1000mg</i>	OTC
<i>ra fish oil cap 1000mg</i>	OTC
<i>salmon oil cap 1000mg</i>	OTC
<i>sea-omega 50 cap 1000mg</i>	OTC
<i>sm fish oil cap 1000mg</i>	OTC
<i>super dha cap gems</i>	OTC
<i>super omega cap -3</i>	OTC
<i>theromega cap 1000mg</i>	OTC
<i>cvs fish oil cap 1200mg</i>	OTC
<i>eql fish oil cap 1200mg</i>	OTC
<i>fish oil cap 1200mg</i>	OTC
<i>kp fish oil cap 1200mg</i>	OTC
<i>omega-3 fatty acids cap 1200 mg</i>	OTC
<i>omega-3 fish cap 1200mg</i>	OTC
<i>sm fish oil cap 1200mg</i>	OTC
FISH OIL CAP 1360MG	OTC
<i>fish oil chw gummies</i>	OTC
<i>gummy fish chw omega-3</i>	OTC
<i>finest fish liq oil</i>	OTC
<i>finest fish liq oil/kids</i>	OTC
<i>very finest liq fish oil</i>	OTC

DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS

DIETARY MANAGEMENT PRODUCTS

FOLBIC TAB	OTC
NIVA-FOL TAB	OTC
<i>westab max tab 2.5-25-2</i>	

HEMATOPOIETIC AGENTS

COBALAMINS

<i>cyanocobalamin inj 1000 mcg/ml</i>	
<i>dodex inj</i>	

FOLIC ACID/FOLATES

<i>folate tab 400mcg</i>	OTC
<i>folic acid tab 400 mcg</i>	OTC
<i>sm folic acid tab 400mcg</i>	OTC
<i>yl folic aci tab 400mcg</i>	OTC
<i>folic acid tab 800mcg</i>	OTC
<i>folic acid tab 1 mg</i>	

Drug Name	Requirements/Limits
<i>folic acid tab 1000mcg</i>	OTC
IRON	
<i>ferrous sulfate tab 27 mg (elemental fe)</i>	OTC
<i>high potency tab fe 27mg</i>	OTC
<i>ra iron tab 27mg</i>	OTC
<i>cvs iron tab 325mg</i>	OTC
<i>ferosul tab 325mg</i>	OTC
<i>ferrous sulfate tab 325 mg (65 mg elemental fe)</i>	OTC
<i>iron supplem tab therapy</i>	OTC
<i>nat-rul iron tab 325mg</i>	OTC
<i>ra iron tab 65mg</i>	OTC
<i>sm iron tab 325mg</i>	OTC
<i>sv iron tab 325mg</i>	OTC
<i>ferrous sulfate tab er 45 mg (elemental fe)</i>	OTC
<i>gnp iron tab 45mg</i>	OTC
<i>iron slow tab 45mg</i>	OTC
<i>iron slow tab 45mg er</i>	OTC
<i>slow release tab 143mg</i>	OTC
<i>sm iron slow tab 45mg</i>	OTC
<i>sm iron tab 45mg</i>	OTC
SLOW RELEASE TAB 47.5MG	OTC
<i>ferrous sulfate tab ec 324 mg (65 mg fe equivalent)</i>	OTC
<i>ferrous sulfate tab ec 325 mg (65 mg fe equivalent)</i>	OTC
<i>fe-vite iron sol 15mg/ml</i>	OTC
<i>ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe)</i>	OTC
<i>iron inf-tod dro 15mg</i>	OTC
<i>iron inf/tod dro 15mg</i>	OTC
<i>iron supplmt dro 15mg/ml</i>	OTC
<i>pedia iron dro 15mg/ml</i>	OTC
<i>pediatric dro iron</i>	OTC
<i>ferrous sul sol 220/5ml</i>	OTC
<i>ferrous sulfate soln 220 mg/5ml (44 mg/5ml elemental fe)</i>	OTC
<i>iron suppmnt sol 220/5ml</i>	OTC
<i>gnp iron tab 65mg</i>	OTC
IRON HP TAB 65MG	OTC
<i>cvs slow rel tab fe 45mg</i>	OTC
<i>iron slow tab 45mg</i>	OTC
<i>slow release tab 45mg</i>	OTC
<i>slow release tab iron 45</i>	OTC
<i>slow-release tab 45mg</i>	OTC
<i>slow-release tab fe 45mg</i>	OTC
<i>slow iron tab 160mg er</i>	OTC

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Drug Name	Requirements/Limits
<i>slow rel fe tab 160mg cr</i>	OTC
<i>sm iron slow tab 160mg cr</i>	OTC
<i>cvs iron tab 27mg</i>	OTC
<i>ferate tab 27mg</i>	OTC
<i>fergon tab 27mg</i>	OTC
<i>ferrotabs tab</i>	OTC
<i>ferrous gluconate tab 240 mg (27 mg elemental fe)</i>	OTC
<i>ferrous gluc tab 324mg</i>	OTC
FERRETTTS TAB 325MG	OTC
<i>ferrocite tab 324mg</i>	OTC
<i>ferrous fumarate tab 324 mg (106 mg elemental fe)</i>	OTC

HEMATOPOIETIC GROWTH FACTORS

ARANESP INJ 25MCG	SP, PA
ARANESP INJ 40MCG	SP, PA
ARANESP INJ 60MCG	SP, PA
ARANESP INJ 100MCG	SP, PA
ARANESP INJ 200MCG	SP, PA
ARANESP INJ 25MCG	SP, PA; PREFILLED SYRINGE
ARANESP INJ 40MCG	SP, PA; PREFILLED SYRINGE
ARANESP INJ 60MCG	SP, PA; PREFILLED SYRINGE
ARANESP INJ 100MCG	SP, PA; PREFILLED SYRINGE
ARANESP INJ 150MCG	SP, PA; PREFILLED SYRINGE
ARANESP INJ 200MCG	SP, PA; PREFILLED SYRINGE
ARANESP INJ 300MCG	SP, PA; PREFILLED SYRINGE
ARANESP INJ 500MCG	SP, PA; PREFILLED SYRINGE
RETACRIT INJ 2000UNIT	SP, PA
RETACRIT INJ 3000UNIT	SP, PA
RETACRIT INJ 4000UNIT	SP, PA
RETACRIT INJ 10000UNT	SP, PA
RETACRIT INJ 20000UNI	SP, PA
RETACRIT INJ 40000UNT	SP, PA
ZARXIO INJ 300/0.5	SP, PA
ZARXIO INJ 480/0.8	SP, PA
ZIEXTENZO INJ 6/0.6ML	SP, PA, QL (3 syringes every 28 days)
DOPTELET TAB 20MG	SP, PA, QL (2 tabs every 1 day)
DOPTELET TAB 20MG	SP, PA, QL (3 tabs every 1 day)

AGENTS FOR GAUCHER DISEASE

CERDELGA CAP 84MG	SP, PA, QL (2 caps every 1 day)
CEREZYME INJ 400UNIT	SP, PA, QL (15 vials every 14 days)

Drug Name	Requirements/Limits
HEMATOPOIETIC MIXTURES	
<i>folic acid-vitamin b6-vitamin b12 tab 2.2-25-0.5 mg</i>	
<i>folplex 2.2 tab</i>	
<i>airavite tab</i>	
<i>folbee tab</i>	
<i>nufol tab</i>	
<i>westab one tab 2.5-25-1</i>	

ANTICOAGULANTS

HEPARINS AND HEPARINOID-LIKE AGENTS

<i>enoxaparin sodium inj 300 mg/3ml</i>
<i>enoxaparin sodium inj soln pref syr 30 mg/0.3ml</i>
<i>enoxaparin sodium inj soln pref syr 40 mg/0.4ml</i>
<i>enoxaparin sodium inj soln pref syr 60 mg/0.6ml</i>
<i>enoxaparin sodium inj soln pref syr 80 mg/0.8ml</i>
<i>enoxaparin sodium inj soln pref syr 100 mg/ml</i>
<i>enoxaparin sodium inj soln pref syr 120 mg/0.8ml</i>
<i>enoxaparin sodium inj soln pref syr 150 mg/ml</i>
<i>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml</i>
<i>fondaparinux sodium subcutaneous inj 5 mg/0.4ml</i>
<i>fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml</i>
<i>fondaparinux sodium subcutaneous inj 10 mg/0.8ml</i>

COUMARIN ANTICOAGULANTS

<i>jantoven tab 1mg</i>
<i>warfarin sodium tab 1 mg</i>
<i>jantoven tab 2mg</i>
<i>warfarin sodium tab 2 mg</i>
<i>jantoven tab 2.5mg</i>
<i>warfarin sodium tab 2.5 mg</i>
<i>jantoven tab 3mg</i>
<i>warfarin sodium tab 3 mg</i>
<i>jantoven tab 4mg</i>
<i>warfarin sodium tab 4 mg</i>
<i>jantoven tab 5mg</i>
<i>warfarin sodium tab 5 mg</i>
<i>jantoven tab 6mg</i>
<i>warfarin sodium tab 6 mg</i>
<i>jantoven tab 7.5mg</i>
<i>warfarin sodium tab 7.5 mg</i>
<i>jantoven tab 10mg</i>
<i>warfarin sodium tab 10 mg</i>

DIRECT FACTOR XA INHIBITORS

<i>ELIQUIS TAB 2.5MG</i>

Drug Name	Requirements/Limits
ELIQUIS TAB 5MG	
ELIQUIS ST P TAB 5MG	
XARELTO TAB 2.5MG	
XARELTO TAB 10MG	
XARELTO TAB 15MG	
XARELTO TAB 20MG	
XARELTO STAR TAB 15/20MG	

HEMATOLOGICAL AGENTS - MISC.

PLATELET AGGREGATION INHIBITORS

<i>dipyridamole tab 25 mg</i>	
<i>dipyridamole tab 50 mg</i>	
<i>dipyridamole tab 75 mg</i>	
<i>cilostazol tab 50 mg</i>	
<i>cilostazol tab 100 mg</i>	
<i>anagrelide hcl cap 0.5 mg</i>	
<i>anagrelide hcl cap 1 mg</i>	
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	
<i>clopidogrel bisulfate tab 300 mg (base equiv)</i>	
<i>prasugrel hcl tab 5 mg (base equiv)</i>	
<i>prasugrel hcl tab 10 mg (base equiv)</i>	
BRILINTA TAB 60MG	
BRILINTA TAB 90MG	

COMPLEMENT INHIBITORS

CINRYZE SOL 500 UNIT	SP, PA, QL (20 vials every 30 days)
HAEGARDA INJ 2000UNIT	SP, PA, QL (20 vials every 30 days)
HAEGARDA INJ 3000UNIT	SP, PA, QL (20 vials every 30 days)
RUCONEST INJ 2100UNIT	SP, PA, QL (60 vials every 90 days)

BRADYKININ B2 RECEPTOR ANTAGONISTS

<i>icatibant acetate subcutaneous soln pref syr 30 mg/3ml</i>	SP, PA, QL (45 syringes every 90 days)
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OPHTHALMIC AGENTS

OPHTHALMIC ANTI-INFECTIVES

<i>bacitracin ophth oint 500 unit/gm</i>	
<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i>	
ERYTHROMYCIN OIN 5MG/GM	
<i>erythromycin ophth oint 5 mg/gm</i>	
<i>gentamicin sulfate ophth soln 0.3%</i>	QL (20 mL every 25 days)
<i>ofloxacin ophth soln 0.3%</i>	

Drug Name	Requirements/Limits
<i>tobramycin ophth soln 0.3%</i>	
<i>sulfacetamide sodium ophth soln 10%</i>	
<i>trifluridine ophth soln 1%</i>	
NATACYN SUS 5% OP	
<i>bacitracin-polymyxin b ophth oint</i>	
<i>polycin oin op</i>	
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	
<i>neo-polycin oin op</i>	
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	
<i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	

ARTIFICIAL TEARS AND LUBRICANTS

<i>eye drops dro 0.25%</i>	OTC
THERATEARS SOL 0.25% PF	OTC
<i>carboxymethylcellulose sodium ophth soln 0.5%</i>	OTC
<i>cvs lubricnt dro 0.5% op</i>	OTC
<i>lubricnt eye dro 0.5% op</i>	OTC
<i>restore tear dro 0.5% op</i>	OTC
<i>ultra fresh dro 0.5% op</i>	OTC
<i>biolle tears dro 0.5% op</i>	OTC
<i>cvs lubrican dro 0.5%</i>	OTC
<i>gnp lubr eye dro 0.5% op</i>	OTC
<i>lubricating dro 0.5%</i>	OTC
<i>lubricating dro 0.5% op</i>	OTC
<i>lubricnt eye dro 0.5% op</i>	OTC
<i>restore plus dro 0.5% op</i>	OTC
<i>lubricnt gel dro 1%</i>	OTC
<i>biolle gel 1%</i>	OTC
<i>refresh cell gel 1% op</i>	OTC
<i>theratears gel 1% oph</i>	OTC
PURE & GENTL DRO 0.3%	OTC
GENTEAL GEL 0.3%	OTC
<i>polyvinyl alcohol ophth soln 1.4%</i>	OTC
<i>eq lubricant dro eye 0.6%</i>	OTC
<i>lubricant dro eye 0.6%</i>	OTC
<i>lubricnt eye dro 0.6%</i>	OTC
<i>artificial sol tears</i>	OTC
<i>genteal tear sol moderate</i>	OTC
<i>just tears sol eye drop</i>	OTC
<i>sm artificia sol tears</i>	OTC
<i>soothe dro hydratio</i>	OTC

Drug Name	Requirements/Limits
<i>soothe xp dro</i>	OTC
<i>soothe xp dro 1%-4.5%</i>	OTC
<i>soothe xp sol</i>	OTC
<i>systeme dro contacts</i>	OTC
<i>eye drops dro 0.5-0.9%</i>	OTC
REFRESH DRO RELIEVA	OTC
REFRESH DRO TEARS PF	OTC
REFRESH OPTI DRO 0.5-0.9%	OTC
REFRESH DRO RELIEVA	OTC
LUBRICNT GEL DRO 0.25-0.3	OTC
<i>artificial sol tears</i>	OTC
<i>artificial sol tears</i>	OTC
BION TEARS SOL 0.1-0.3%	OTC
<i>cvs natural dro tears</i>	OTC
<i>lubricnt eye dro 0.1-0.3%</i>	OTC
<i>eq lubricant dro eye drop</i>	OTC
<i>gnp eye drop dro 0.4-0.3%</i>	OTC
<i>lubricant dro eye</i>	OTC
<i>lubricant sol eye drop</i>	OTC
<i>lubricat eye dro 0.4-0.3%</i>	OTC
<i>lubricating sol 0.4-0.3%</i>	OTC
<i>lubricnt eye dro 0.4-0.3%</i>	OTC
<i>ra lubricant dro 0.4-0.3%</i>	OTC
<i>sm lubricant dro 0.4-0.3%</i>	OTC
<i>ult lub eye dro 0.4-0.3%</i>	OTC
<i>ultra eye dro 0.4-0.3%</i>	OTC
<i>lubricnt eye dro 0.4-0.3%</i>	OTC
<i>ultra eye pf dro 0.4-0.3%</i>	OTC
<i>artificial sol 0.5-0.6%</i>	OTC
<i>artificial sol tears</i>	OTC
<i>clear eyes dro 0.5-0.6%</i>	OTC
<i>stye dro 0.5-0.6%</i>	OTC
REFRESH DRO OP	OTC
<i>artifi tears dro 1-0.3%</i>	OTC
<i>artificial dro tears</i>	OTC
<i>artificial sol tears</i>	OTC
<i>lubricnt eye dro</i>	OTC
<i>altalube oin</i>	OTC
<i>cvs lubricat oin</i>	OTC
<i>dry eye relf oin night</i>	OTC
<i>dry-eye relf oin nighttim</i>	OTC
<i>eq restore oin pm</i>	OTC
<i>eye lubrican oin op</i>	OTC

Drug Name	Requirements/Limits
<i>for sty reli oin</i>	OTC
<i>genteal tear oin nt-time</i>	OTC
<i>hypotears oin op</i>	OTC
<i>lubricant oin eye</i>	OTC
<i>lubricant pm oin</i>	OTC
<i>lubricnt eye oin fast act</i>	OTC
<i>lubricnt eye oin nighttim</i>	OTC
<i>lubrifresh oin p.m.</i>	OTC
<i>nighttime eye oin relief</i>	OTC
<i>refresh lacr oin op</i>	OTC
<i>retaine pm oin</i>	OTC
<i>soothe night oin op</i>	OTC
<i>stye oin</i>	OTC
<i>systeme oin</i>	OTC
<i>ultra fresh oin pm</i>	OTC
REFRESH SOL DIGITAL	OTC
REFRESH SOL OPTIVE	OTC
REFRESH OPT SOL MEGA-3	OTC
REFRESH SOL DIGITAL	OTC
REFRESH SOL OPTIVE	OTC
<i>artificial dro tears</i>	OTC
<i>cvs dry eye dro relief</i>	OTC
<i>dry eye rlf dro</i>	OTC
<i>eye drops sol relief</i>	OTC
<i>sm dry eye sol relief</i>	OTC

BETA-BLOCKERS - OPHTHALMIC

<i>betaxolol hcl ophth soln 0.5%</i>
<i>levobunolol hcl ophth soln 0.5%</i>
<i>timolol maleate ophth soln 0.25%</i>
<i>timolol maleate ophth soln 0.5%</i>
<i>timolol maleate ophth gel forming soln 0.25%</i>
<i>timolol maleate ophth gel forming soln 0.5%</i>
<i>dorzolamide hcl-timolol maleate ophth soln 2-0.5%</i>

OPHTHALMIC STEROIDS

<i>dexamethasone sodium phosphate ophth soln 0.1%</i>
<i>fluorometholone ophth susp 0.1%</i>
<i>prednisolone acetate ophth susp 1%</i>
PREDNISOLONE SUS 1%
PRED SOD PHO SOL 1% OP
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>

Drug Name	Requirements/Limits
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	
<i>neomycin-polymyxin-hc ophth susp</i>	
<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	
<i>neo-polycin oin hc 1%op</i>	
PROSTAGLANDINS - OPHTHALMIC	
<i>latanoprost ophth soln 0.005%</i>	
IYUZEH DRO 0.005%	
OPHTHALMIC ADRENERGIC AGENTS	
<i>brimonidine tartrate ophth soln 0.15%</i>	
<i>brimonidine tartrate ophth soln 0.2%</i>	
OPHTHALMIC IMMUNOMODULATORS	
<i>cyclosporine (ophth) emulsion 0.05%</i>	PA
OPHTHALMIC INTEGRIN ANTAGONISTS	
XIIDRA DRO 5%	PA, QL (60 drops every 25 days)
OPHTHALMICS - MISC.	
<i>azelastine hcl ophth soln 0.05%</i>	
<i>cromolyn sodium ophth soln 4%</i>	
<i>alaway child dro 0.035%op</i>	OTC
<i>alaway dro 0.035%op</i>	OTC
<i>cvs allergy dro 0.035%op</i>	OTC
<i>eye itch rel dro 0.035%op</i>	OTC
<i>ketotifen fumarate ophth soln 0.035%</i>	OTC
ZADITOR DRO 0.035%OP	OTC
<i>dorzolamide hcl ophth soln 2%</i>	
DORZOLAMIDE SOL 2%	
<i>diclofenac sodium ophth soln 0.1%</i>	
<i>ketorolac tromethamine ophth soln 0.4%</i>	
<i>ketorolac tromethamine ophth soln 0.5%</i>	
OTIC AGENTS	
OTIC ANTI-INFECTIVES	
<i>ofloxacin otic soln 0.3%</i>	
OTIC AGENTS - MISCELLANEOUS	
<i>acetic acid otic soln 2%</i>	
<i>clearcanal dro 6.5%</i>	OTC
<i>clinere liq earwax</i>	OTC
DEBROX SOL 6.5% OT	OTC
<i>ear drops dro 6.5%</i>	OTC
<i>ear drops sol 6.5% ot</i>	OTC
<i>ear wax kit sol 6.5% ot</i>	OTC
<i>ear wax rem dro kit 6.5%</i>	OTC
<i>ear wax remv dro 6.5% ot</i>	OTC

Drug Name	Requirements/Limits
<i>ear wax remv sol 6.5% ot</i>	OTC
<i>earwax remov dro kit</i>	OTC
<i>earwax remov dro system</i>	OTC
<i>earwax remov sol 6.5%</i>	OTC
<i>earwax remv sol 6.5% ot</i>	OTC
<i>earwax remvl dro 6.5% ot</i>	OTC
<i>earwax sol removal</i>	OTC
<i>eq ear wax sol removal</i>	OTC
<i>eq earwax sol 6.5% ot</i>	OTC
<i>ft earwax sol removal</i>	OTC
<i>gnp earwax sol 6.5% ot</i>	OTC
<i>gnp earwax sol removal</i>	OTC
<i>murine ear dro 6.5% ot</i>	OTC
<i>murine ear sol 6.5% ot</i>	OTC
<i>ra ear dro 6.5% ot</i>	OTC
<i>sm ear dro 6.5% ot</i>	OTC

OTIC COMBINATIONS

<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>
<i>neomycin-polymyxin-hc otic soln 1%</i>

MOUTH/THROAT/DENTAL AGENTS

ANTI-INFECTIVES - THROAT

<i>nystatin susp 100000 unit/ml</i>	
<i>clotrimazole troche 10 mg</i>	QL (90 troches every 25 days)

ANTISEPTICS - MOUTH/THROAT

<i>chlorhexidine gluconate soln 0.12%</i>
<i>periogard sol 0.12%</i>

STEROIDS - MOUTH/THROAT/DENTAL

<i>kourzeq pst 0.1%</i>
<i>oralone dent pst 0.1%</i>
<i>triamcinolone acetonide dental paste 0.1%</i>

ANESTHETICS TOPICAL ORAL

<i>lidocaine hcl viscous soln 2%</i>

DENTAL PRODUCTS

<i>PREVIDENT SOL 0.2%</i>
<i>denta 5000 cre plus</i>
<i>denta 5000 cre plus 2pk</i>
<i>sf 5000 plus cre 1.1%</i>
<i>sodium fluor cre 5000 pls</i>
<i>sodium fluor cre 5000 ppm</i>
<i>sodium fluoride cream 1.1%</i>

Drug Name	Requirements/Limits
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<i>dentagel gel 1.1%</i>	
<i>sf gel 1.1%</i>	
<i>sodium fluoride gel 1.1% (0.5% f)</i>	
<i>clinpro 5000 pst 1.1%</i>	
<i>fluoridex pst 1.1%</i>	
<i>fluorimax pst 5000</i>	
<i>just right pst 5000</i>	
<i>sod fluoride pst 1.1%</i>	

THROAT PRODUCTS - MISC.

AQUORAL SPR	PA
BIOTENE DRY SPR MOIST	PA, OTC
CAPHOSOL SOL	PA, OTC
CVS DRY SPR MOUTH	PA, OTC
DRY MOUTH SOL ORAL RIN	PA, OTC
MOI-STIR SOL	PA, OTC
MOUTH KOTE SOL	PA, OTC
MOUTH KOTE SOL REMINT	PA, OTC
NUMOISYN LIQ	PA
ORAL RELIEF SPR DRY MOUT	PA, OTC
RA DRY MOUTH SPR	PA, OTC
ACT DRY MOUT GUM MOISTURI	PA, OTC
BIOTENE DRY GUM MOUTH	PA, OTC
BIOTENE PBF GUM DRY MTH	PA, OTC
MIGHTEAFLOW GUM	PA, OTC
BOCASAL POW	PA
MUCOSITISRX POW	PA
SALIVAMAX POW	PA
ORAL RELIEF GEL DRY MOUT	PA, OTC
ORALBALANCE GEL DRY MTH	PA, OTC
<i>act dry loz mouth</i>	PA, OTC
<i>biotene dry loz mouth</i>	PA, OTC
<i>dry mouth loz cherry</i>	PA, OTC
<i>dry mouth loz melon</i>	PA, OTC
<i>dry mouth loz mint</i>	PA, OTC
<i>freshmelts loz mint</i>	PA, OTC
NUMOISYN LOZ	PA
<i>oral relief loz dry mout</i>	PA, OTC
<i>salese/ loz xylitol</i>	PA, OTC
<i>salivasure loz</i>	PA, OTC
<i>therabreath loz dry mout</i>	PA, OTC
ORAL RELIEF KIT DRY MOUT	PA, OTC
<i>pilocarpine hcl tab 5 mg</i>	
<i>pilocarpine hcl tab 7.5 mg</i>	

Drug Name	Requirements/Limits
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ANORECTAL AND RELATED PRODUCTS

RECTAL STEROIDS

<i>hydrocortisone perianal cream 1%</i>	
<i>prep h cre 1%</i>	OTC
<i>proctocort cre 1%</i>	
<i>hydrocortisone perianal cream 2.5%</i>	
<i>procto-med cre hc 2.5%</i>	
<i>proctosol hc cre 2.5%</i>	
<i>proctozone cre -hc 2.5%</i>	

INTRARECTAL STEROIDS

<i>hydrocortisone enema 100 mg/60ml</i>	
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DERMATOLOGICALS

ACNE PRODUCTS

<i>bp wash liq 2.5%</i>	OTC
<i>cerave acne liq foaming</i>	OTC
<i>creamy face liq wash 4%</i>	OTC
<i>panoxyl wash liq 4%</i>	OTC
<i>benzoyl per liq 5%</i>	OTC
<i>benzoyl per liq 5% wash</i>	OTC
<i>bp wash liq 5%</i>	OTC
<i>3-in-1 clean liq 5%</i>	OTC
<i>acne foaming liq wash 10%</i>	OTC
<i>benzoyl per liq 10%</i>	OTC
<i>benzoyl per liq 10% wash</i>	OTC
<i>bp wash liq 10%</i>	OTC
<i>foaming face liq wsh 10%</i>	OTC
<i>panoxyl wash liq 10%</i>	OTC
<i>acne cleanse cre cvs cont</i>	OTC
<i>acne control cre clns 10%</i>	OTC
<i>acne max str cre 10%</i>	OTC
<i>clearasil cre acne</i>	OTC
<i>clearasil cre spot 10%</i>	OTC
<i>clearskin cre 10%</i>	OTC
<i>cvs acne tre cre 10%</i>	OTC
<i>acne medicat gel 2.5%</i>	OTC
<i>benzoyl peroxide gel 2.5%</i>	OTC
<i>acne medicat gel 5%</i>	OTC
<i>benzoyl per gel 5%</i>	OTC
<i>benzoyl peroxide gel 8%</i>	
<i>acne medicat gel 10%</i>	OTC
<i>acne treatmn gel 10%</i>	OTC
<i>acne-clear gel 10%</i>	OTC

Drug Name	Requirements/Limits
<i>benzoyl per gel 10%</i>	OTC
<i>persa-gel gel 10%</i>	OTC
<i>accutane cap 10mg</i>	PA
<i>amneesteem cap 10mg</i>	PA
<i>claravis cap 10mg</i>	PA
<i>isotretinoin cap 10 mg</i>	PA
<i>zenatane cap 10mg</i>	PA
<i>accutane cap 20mg</i>	PA
<i>amneesteem cap 20mg</i>	PA
<i>claravis cap 20mg</i>	PA
<i>isotretinoin cap 20 mg</i>	PA
<i>zenatane cap 20mg</i>	PA
<i>accutane cap 30mg</i>	PA
<i>claravis cap 30mg</i>	PA
<i>isotretinoin cap 30 mg</i>	PA
<i>zenatane cap 30mg</i>	PA
<i>accutane cap 40mg</i>	PA
<i>amneesteem cap 40mg</i>	PA
<i>claravis cap 40mg</i>	PA
<i>isotretinoin cap 40 mg</i>	PA
<i>zenatane cap 40mg</i>	PA
<i>tretinoin cream 0.025%</i>	PA
<i>tretinoin cream 0.05%</i>	PA
<i>tretinoin cream 0.1%</i>	PA
<i>tretinoin gel 0.01%</i>	PA
<i>tretinoin gel 0.025%</i>	PA
<i>clindamycin phosphate soln 1%</i>	QL (60 mL every 25 days)
<i>clindamycin phosphate gel 1%</i>	
<i>clindamycin phosphate lotion 1%</i>	QL (60 mL every 25 days)
<i>erythromycin soln 2%</i>	QL (60 mL every 25 days)
<i>erythromycin gel 2%</i>	QL (60 gm every 25 days)
<i>sulfacetamide sodium lotion 10% (acne)</i>	
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	QL (47 gm every 25 days)
<i>clindamycin phosphate-benzoyl peroxide gel 1-5%</i>	QL (50 gm every 25 days)
<i>clindamycin phosphate-benzoyl peroxide gel 1.2-2.5%</i>	QL (50 gm every 25 days)
<i>clindamycin phosphate-benzoyl peroxide gel 1.2-3.75%</i>	QL (50 gm every 25 days)
<i>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</i>	QL (45 gm every 25 days)
<i>neuac gel 1.2-5%</i>	QL (45 gm every 25 days)
ROSACEA AGENTS	
<i>metronidazole cream 0.75%</i>	QL (60 gm every 25 days)
<i>NORITATE CRE 1%</i>	QL (60 gm every 25 days)
<i>metronidazole gel 0.75%</i>	QL (60 gm every 25 days)

\$0 - Zero Dollar Copay **AGE** - Age Limit **GNDR** - Gender Edit **OTC** - Over the counter **PA** - Prior Authorization **QL** - Quantity Limits **SP** - Specialty **ST** - Step Therapy

Drug Name	Requirements/Limits
<i>metronidazole gel 1%</i>	ST, QL (60 gm every 25 days)
<i>metronidazole lotion 0.75%</i>	QL (60 mL every 25 days)
ANTIBIOTICS - TOPICAL	
<i>antibiotic oin 500unit</i>	OTC
<i>bacitracin oin 500/gm</i>	OTC
<i>bacitracin oint 500 unit/gm</i>	OTC
<i>bacitraycin oin 500/gm</i>	OTC
<i>bacitracin zinc oint 500 unit/gm</i>	OTC
<i>ft antibioti oin</i>	OTC
<i>sm antibioti oin 500/gm</i>	OTC
<i>gentamicin sulfate cream 0.1%</i>	QL (120 gm every 25 days)
<i>gentamicin sulfate oint 0.1%</i>	QL (120 gm every 25 days)
<i>mupirocin oint 2%</i>	QL (30 gm every 25 days)
<i>mupirocin calcium cream 2%</i>	QL (30 gm every 25 days)
<i>double antib oin</i>	OTC
<i>double oin antibiot</i>	OTC
<i>ft double oin antibiot</i>	OTC
<i>neosporin oin</i>	OTC
<i>poly bacitra oin</i>	OTC
<i>wal-sporin oin</i>	OTC
<i>antibiotic oin</i>	OTC
<i>eq triple oin antibiot</i>	OTC
<i>eq1 firstaid oin antibiot</i>	OTC
<i>first aid oin antibiot</i>	OTC
<i>gnp triple oin antibiot</i>	OTC
<i>lanabiotic oin</i>	OTC
<i>qc triple oin antibiot</i>	OTC
<i>ra triple oin antibiot</i>	OTC
<i>sb triple oin antibiot</i>	OTC
<i>sm triple oin antibiot</i>	OTC
<i>triple antib oin</i>	OTC
<i>triple antib oin frst aid</i>	OTC
ANTIFUNGALS - TOPICAL	
<i>ciclopirox gel 0.77%</i>	QL (120 gm every 25 days)
<i>ciclopirox shampoo 1%</i>	QL (120 mL every 25 days)
<i>ciclopirox olamine susp 0.77% (base equiv)</i>	QL (120 mL every 25 days)
<i>ciclopirox olamine cream 0.77% (base equiv)</i>	QL (120 gm every 25 days)
<i>klayesta pow 100000</i>	QL (120 gm every 25 days)
<i>nyamyc pow 100000</i>	QL (120 gm every 25 days)
<i>nystatin topical powder 100000 unit/gm</i>	QL (120 gm every 25 days)
<i>nystop pow 100000</i>	QL (120 gm every 25 days)
<i>nystatin cream 100000 unit/gm</i>	QL (120 gm every 25 days)

Drug Name	Requirements/Limits
<i>nystatin oint 100000 unit/gm</i>	QL (120 gm every 25 days)
<i>anti-fungal sol 1%</i>	OTC
<i>antifungal liq 1%</i>	OTC
<i>blis-to-sol liq 1%</i>	OTC
<i>cvs toe area sol 1%</i>	OTC
<i>dr gs clear sol nail 1%</i>	OTC
<i>foot repair sol serum 1%</i>	OTC
<i>formula 3 sol treatmen</i>	OTC
<i>formula 7 sol</i>	OTC
<i>fungual nail sol erase 1%</i>	OTC
<i>fungi nail liq 1%</i>	OTC
<i>fungicure sol 1%</i>	OTC
<i>micotrin al liq 1%</i>	OTC
<i>mycocide ns sol 1%</i>	OTC
<i>mycozyl al sol 1%</i>	OTC
<i>tinaspore sol 1%</i>	OTC
<i>athlete foot aer 1%</i>	OTC
<i>athletes ft aer 1% pow</i>	OTC
<i>foot&sneaker aer 1%</i>	OTC
<i>jck itch pow aer 1%</i>	OTC
<i>odor control aer powd 1%</i>	OTC
<i>odor eaters aer 1%</i>	OTC
<i>tolnaftate aerosol pow 1%</i>	OTC
<i>anti-fungal cre 1%</i>	OTC
<i>antifungal cre 1%</i>	OTC
<i>antifungal cre foot</i>	OTC
<i>athlete foot cre 1%</i>	OTC
<i>cvs athletes cre foot 1%</i>	OTC
<i>ft antifunga cre 1%</i>	OTC
<i>fungi-guard cre 1%</i>	OTC
<i>qc antifunga cre 1%</i>	OTC
<i>sm antifunagl cre 1%</i>	OTC
<i>tolnaftate cream 1%</i>	OTC
<i>clotrimazole soln 1%</i>	QL (120 mL every 25 days)
<i>clotrimazole soln 1%</i>	QL (120 mL every 25 days), OTC
<i>antifungal cre 1%</i>	QL (120 gm every 25 days), OTC
<i>athlete foot cre 1%</i>	QL (120 gm every 25 days), OTC
<i>clotrimazole cre 1%</i>	QL (120 gm every 25 days), OTC
<i>clotrimazole cream 1%</i>	QL (120 gm every 25 days)

Drug Name	Requirements/Limits
<i>cvs itch rel cre 1%</i>	QL (120 gm every 25 days), OTC
<i>cvs ringworm cre 1%</i>	QL (120 gm every 25 days), OTC
<i>desenex cre 1%</i>	QL (120 gm every 25 days), OTC
<i>jock itch cre 1%</i>	QL (120 gm every 25 days), OTC
<i>micotrin ac cre 1%</i>	QL (120 gm every 25 days), OTC
<i>mycozyl ac cre 1%</i>	QL (120 gm every 25 days), OTC
<i>pro-ex antif cre 1%</i>	QL (120 gm every 25 days), OTC
<i>ketoconazole cream 2%</i>	QL (120 gm every 25 days)
<i>ketoconazole shampoo 2%</i>	QL (120 mL every 25 days)
<i>antifungal pow 2%</i>	OTC
<i>athlete foot pow 2%</i>	OTC
<i>desenex pow 2%</i>	OTC
<i>miconazorb pow af 2%</i>	OTC
<i>micotrin ap pow 2%</i>	OTC
<i>micro guard pow 2%</i>	OTC
<i>zeasorb-af pow 2%</i>	OTC
<i>antifungal cre 2%</i>	OTC
<i>baza antifun cre 2%</i>	OTC
<i>ft antifunga cre 2%</i>	OTC
<i>micaderm cre 2%</i>	OTC
<i>miconazole nitrate cream 2%</i>	OTC
<i>sm antifungl cre 2%</i>	OTC
<i>tineacide cre</i>	OTC
<i>critic-aid oin 2%</i>	OTC
<i>triple paste oin 2%</i>	OTC

ANTI-INFLAMMATORY AGENTS - TOPICAL

<i>aleve arthri gel pain 1%</i>	QL (500 gm every 25 days), OTC
<i>arthr pain gel 1%</i>	QL (500 gm every 25 days), OTC
<i>aspercrm art gel 1% pain</i>	QL (500 gm every 25 days), OTC
<i>diclofenac sodium gel 1% (1.16% diethylamine equiv)</i>	QL (500 gm every 25 days), OTC
<i>eq arthritis gel 1%</i>	QL (500 gm every 25 days), OTC

Drug Name	Requirements/Limits
<i>ft arthritis gel 1%</i>	QL (500 gm every 25 days), OTC
<i>gnp diclofen gel 1%</i>	QL (500 gm every 25 days), OTC
<i>goodsense gel art pain</i>	QL (500 gm every 25 days), OTC
<i>kls arthriti gel 1%</i>	QL (500 gm every 25 days), OTC
<i>kls diclofen gel 1%</i>	QL (500 gm every 25 days), OTC
<i>motrin arthr gel pain 1%</i>	QL (500 gm every 25 days), OTC
<i>qc diclofena gel 1%</i>	QL (500 gm every 25 days), OTC
VOLTAREN GEL 1% ARTHR	QL (500 gm every 25 days), OTC

PHOSPHODIESTERASE 4 (PDE4) INHIBITORS - TOPICAL

EUCRISA OIN 2%	ST, QL (60 gm every 25 days)
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ANTIPSORIATICS

<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	ST, QL (120 mL every 25 days)
<i>calcipotriene oint 0.005%</i>	ST, QL (120 gm every 25 days)
<i>calcitrene oin 0.005%</i>	ST, QL (120 gm every 25 days)
SKYRIZI PEN INJ 150MG/ML	SP, PA, QL (1 pen every 63 days)
SKYRIZI INJ 150MG/ML	SP, PA, QL (1 syringe every 63 days)
COSENTYX PEN INJ 150MG/ML	SP, PA, QL (1 pen every 28 days)
COSENTYX PEN INJ 300DOSE	SP, PA, QL (2 pens every 28 days)
COSENTYX UNO INJ 300/2ML	SP, PA, QL (1 pen every 28 days)
COSENTYX INJ 150MG/ML	SP, PA, QL (1 syringe every 28 days)
COSENTYX INJ 300DOSE	SP, PA, QL (2 syringes every 28 days)

ECZEMA AGENTS

DUPIXENT INJ 200MG	SP, PA, QL (2 pens every 28 days)
DUPIXENT INJ 300/2ML	SP, PA, QL (4 pens every 28 days)
DUPIXENT INJ 200/1.14	SP, PA, QL (2 syringes every 28 days)

Drug Name	Requirements/Limits
DUPIXENT INJ 300/2ML	SP, PA, QL (4 syringes every 28 days)

ANTISEBORRHEIC PRODUCTS

<i>anti-dandruff sha 1%</i>	OTC
<i>dandruff sha 1%</i>	OTC
<i>selenium sulfide lotion 2.5%</i>	

ANTIVIRALS - TOPICAL

<i>docosanol cream 10%</i>	OTC
<i>ft docosan cre 10%</i>	OTC

ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL

<i>fluorouracil cream 5%</i>	
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BURN PRODUCTS

<i>silver sulfadiazine cream 1%</i>	
<i>ssd cre 1%</i>	

CORTICOSTEROIDS - TOPICAL

<i>alclometasone dipropionate cream 0.05%</i>	QL (120 gm every 25 days)
<i>alclometasone dipropionate oint 0.05%</i>	QL (120 gm every 25 days)
<i>betamethasone dipropionate cream 0.05%</i>	QL (120 gm every 25 days)
<i>betamethasone dipropionate lotion 0.05%</i>	QL (120 mL every 25 days)
<i>betamethasone dipropionate oint 0.05%</i>	QL (120 gm every 25 days)
<i>betamethasone dipropionate augmented cream 0.05%</i>	QL (120 gm every 25 days)
<i>betamethasone dipropionate augmented gel 0.05%</i>	QL (120 gm every 25 days)
<i>betamethasone dipropionate augmented lotion 0.05%</i>	QL (120 mL every 25 days)
<i>betamethasone dipropionate augmented oint 0.05%</i>	QL (120 gm every 25 days)
<i>betamethasone valerate cream 0.1% (base equivalent)</i>	QL (120 gm every 25 days)
<i>betamethasone valerate lotion 0.1% (base equivalent)</i>	QL (120 mL every 25 days)
<i>betamethasone valerate oint 0.1% (base equivalent)</i>	QL (120 gm every 25 days)
<i>clobetasol propionate emollient base cream 0.05%</i>	
<i>desonide cream 0.05%</i>	QL (120 gm every 25 days)
<i>desonide lotion 0.05%</i>	QL (120 mL every 25 days)
<i>desonide oint 0.05%</i>	QL (120 gm every 25 days)
<i>desoximetasone cream 0.05%</i>	QL (120 gm every 25 days)
<i>desoximetasone cream 0.25%</i>	QL (120 gm every 25 days)
<i>desoximetasone gel 0.05%</i>	QL (120 gm every 25 days)
<i>desoximetasone oint 0.25%</i>	QL (120 gm every 25 days)
<i>fluocinolone acetonide soln 0.01%</i>	QL (120 mL every 25 days)
<i>fluocinolone acetonide cream 0.025%</i>	QL (120 gm every 25 days)
<i>fluocinolone acetonide oint 0.025%</i>	QL (120 gm every 25 days)
<i>fluocinonide soln 0.05%</i>	QL (120 mL every 25 days)
<i>fluocinonide cream 0.05%</i>	QL (120 gm every 25 days)
<i>fluocinonide gel 0.05%</i>	QL (120 gm every 25 days)
<i>fluocinonide oint 0.05%</i>	QL (120 gm every 25 days)

Drug Name	Requirements/Limits
<i>fluticasone propionate cream 0.05%</i>	QL (120 gm every 25 days)
<i>fluticasone propionate oint 0.005%</i>	QL (120 gm every 25 days)
<i>halobetasol propionate cream 0.05%</i>	QL (120 gm every 25 days)
BRYHALI LOT 0.01%	ST, QL (120 gm every 25 days)
<i>halobetasol propionate oint 0.05%</i>	QL (120 gm every 25 days)
<i>scalp relief sol 1%</i>	OTC
<i>scalpicin sol 1%</i>	OTC
<i>hydrocort cre 0.5%</i>	OTC
<i>instacort 5 cre 0.5%</i>	OTC
<i>ala-cort cre 1%</i>	
<i>anti-itch cre 1%</i>	OTC
<i>anti-itch cre 1%pls 10</i>	OTC
<i>aveeno cre 1%</i>	OTC
<i>cortisone cre 1%</i>	OTC
<i>cortizone-10 cre 1% night</i>	OTC
<i>cortizone-10 cre /aloe 1%</i>	OTC
<i>cortizone-10 cre aloe 1%</i>	OTC
<i>cortizone-10 cre healing</i>	OTC
<i>cortizone-10 cre moisture</i>	OTC
<i>cortizone-10 cre plus</i>	OTC
<i>cortizone-10 cre ultra 1%</i>	OTC
<i>eq 1% hydroc cre</i>	OTC
<i>eq hydrocort cre 1%</i>	OTC
<i>gnp hydrocor cre 1% plus</i>	OTC
<i>hydrocort cre 1% aloe</i>	OTC
<i>hydrocort cre 1% plus</i>	OTC
<i>hydrocort/ cre aloe 1%</i>	OTC
<i>hydrocortisone cream 1%</i>	
<i>hydrocortisone cream 1%</i>	OTC
<i>medi-first cre hydrocor</i>	OTC
<i>qc anti-itch cre 1% aloe</i>	OTC
<i>ra anti-itch cre 1%</i>	OTC
<i>sm hydrocort cre 1%</i>	OTC
<i>sm hydrocort cre 1% plus</i>	OTC
<i>hydrocortisone cream 2.5%</i>	QL (120 gm every 25 days)
<i>cortisone gel 1%</i>	OTC
<i>cortizone-10 gel 1%</i>	OTC
<i>cortizone-10 gel cooling</i>	OTC
<i>mg217 gel 1%</i>	OTC
<i>aquanil hc lot 1%</i>	OTC
<i>beta hc lot 1%</i>	OTC
<i>cortisone lot 1%</i>	OTC
<i>cortizone-10 lot diab/1%</i>	OTC

Drug Name	Requirements/Limits
<i>cortizone-10 lot eczema</i>	OTC
<i>cortizone-10 lot hydraten</i>	OTC
<i>cortizone-10 lot psoriasi</i>	OTC
<i>dermarest lot 1%</i>	OTC
<i>hydrocortisone lotion 1%</i>	OTC
<i>sarnol-hc lot 1%</i>	OTC
<i>hydrocortisone lotion 2.5%</i>	QL (120 mL every 25 days)
<i>hydrocortisone oint 0.5%</i>	OTC
<i>anti-itch oin 1%</i>	OTC
<i>aquaphor oin itch rlf</i>	OTC
<i>cortisone oin 1%</i>	OTC
<i>cortizone-10 oin 1%</i>	OTC
<i>hydrocortisone oint 1%</i>	
<i>hydrocortisone oint 1%</i>	OTC
<i>ra anti-itch oin 1%</i>	OTC
<i>sb hydrocort oin 1%</i>	OTC
<i>sm hydrocort oin 1%</i>	OTC
<i>hydrocortisone oint 2.5%</i>	QL (120 gm every 25 days)
HYDROCORT CRE 1%	OTC
<i>hydrocortisone acetate oint 1%</i>	OTC
<i>hydrocortisone valerate cream 0.2%</i>	QL (120 gm every 25 days)
<i>hydrocortisone valerate oint 0.2%</i>	QL (120 gm every 25 days)
<i>hydrocortisone butyrate soln 0.1%</i>	QL (4.8 mL every 1 day)
<i>hydrocortisone butyrate cream 0.1%</i>	QL (120 gm every 25 days)
<i>hydrocortisone butyrate oint 0.1%</i>	QL (120 gm every 25 days)
<i>mometasone furoate solution 0.1% (lotion)</i>	
<i>mometasone furoate cream 0.1%</i>	QL (120 gm every 25 days)
<i>mometasone furoate oint 0.1%</i>	QL (120 gm every 25 days)
<i>triamcinolone acetonide cream 0.025%</i>	QL (120 gm every 25 days)
<i>triamcinolone acetonide cream 0.1%</i>	QL (120 gm every 25 days)
<i>triamcinolone acetonide cream 0.5%</i>	QL (120 gm every 25 days)
<i>triderm cre 0.5%</i>	QL (120 gm every 25 days)
<i>triamcinolone acetonide lotion 0.025%</i>	QL (120 mL every 25 days)
<i>triamcinolone acetonide lotion 0.1%</i>	QL (120 mL every 25 days)
<i>triamcinolone acetonide oint 0.025%</i>	QL (120 gm every 25 days)
<i>triamcinolone acetonide oint 0.1%</i>	QL (120 gm every 25 days)
<i>triamcinolone acetonide oint 0.5%</i>	QL (120 gm every 25 days)
DIAPER RASH PRODUCTS	
A+D TREAT CRE	OTC
BENSONS CRE BOTTOM	OTC
CVS DIAPER CRE A/D ZINC	OTC
<i>aveeno baby oin multipur</i>	OTC
<i>balmex multi oin purpose</i>	OTC

\$0 - Zero Dollar Copay **AGE** - Age Limit **GNDR** - Gender Edit **OTC** - Over the counter **PA** - Prior Authorization **QL** - Quantity Limits **SP** - Specialty **ST** - Step Therapy

Drug Name	Requirements/Limits
<i>cerave baby oin healing</i>	OTC
<i>desitin oin</i>	OTC
<i>flanders oin buttocks</i>	OTC
<i>medi-paste oin</i>	OTC
<i>paladin oin</i>	OTC
<i>pinxav oin</i>	OTC
<i>skin protect oin all-purp</i>	OTC
EMOLLIENTS	
<i>lactic acid (ammonium lactate) cream 12%</i>	
<i>lactic acid (ammonium lactate) cream 12%</i>	OTC
<i>al12 lot 12%</i>	OTC
<i>amlactin lot daily</i>	OTC
<i>lactic acid (ammonium lactate) lotion 12%</i>	
<i>lactic acid (ammonium lactate) lotion 12%</i>	OTC
<i>skin trtment lot 12%</i>	OTC
<i>a&d oin</i>	OTC
<i>cvs vit a&d oin</i>	OTC
<i>eq vitamins oin a & d</i>	OTC
<i>vitamin a&d oin</i>	OTC
<i>vitamins a & d oint</i>	OTC
ENZYMES - TOPICAL	
<i>SANTYL OIN 250/GM</i>	PA
HAIR GROWTH AGENTS	
<i>finasteride tab 1 mg</i>	PA
KERATOLYTIC/ANTIMITOTIC/VESICANT AGENTS	
<i>podofilox soln 0.5%</i>	
IMMUNOMODULATING AGENTS - TOPICAL	
<i>imiquimod cream 5%</i>	
IMMUNOSUPPRESSIVE AGENTS - TOPICAL	
<i>tacrolimus oint 0.03%</i>	ST
<i>tacrolimus oint 0.1%</i>	ST
LOCAL ANESTHETICS - TOPICAL	
<i>CASTIVA LOT</i>	QL (120 gm every 25 days), OTC
<i>lidocaine patch 5%</i>	PA
<i>lidocan pad 5%</i>	PA
<i>lidocaine hcl soln 4%</i>	
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	QL (1 gm every 1 day)
SCABICIDES & PEDICULICIDES	
<i>cvs ivermect lot 0.5%</i>	OTC
<i>ivermectin lotion 0.5%</i>	OTC
<i>malathion lotion 0.5%</i>	ST

Drug Name	Requirements/Limits
NIX LICE SPR KILLING	OTC
<i>goodsense liq lice rin</i>	OTC
<i>lice treatmt liq 1%</i>	OTC
<i>lice trtmnt liq 1%</i>	OTC
NIX CREM RIN LIQ 1%	OTC
<i>ra lice liq 1%</i>	OTC
<i>permethrin cream 5%</i>	
<i>spinosad susp 0.9%</i>	ST
<i>lice killing sha</i>	OTC
<i>lice killing sha 0.33-4%</i>	OTC
<i>lice shampoo sha max str</i>	OTC
<i>lice treatmt sha 0.33-4%</i>	OTC
<i>rid lice kil sha 0.33-4%</i>	OTC

MISC. TOPICAL

CALAMINE LOT	OTC
MINERAL OIL LIGHT	OTC
CALAMINE LOT	OTC
CALAMINE LOT 8-8%	OTC
GNP CALAMINE LOT 8-8%	OTC
SM CALAMINE LOT	OTC

ANTISEPTICS & DISINFECTANTS

CHLORINE ANTISEPTICS

<i>antibac hand sol 2%</i>	OTC
<i>chlorhexidin sol 2%</i>	OTC
<i>dyna-hex 2 sol 2%</i>	OTC
<i>hand wash sol 2%</i>	OTC
<i>antiseptic sol 4%</i>	OTC
<i>antiseptic sol clnsr 4%</i>	OTC
<i>antiseptic sol skin cln</i>	OTC
<i>betasept sol 4%</i>	OTC
<i>chlorhexidine gluconate soln 4%</i>	OTC
<i>dyna-hex 4 sol 4%</i>	OTC
HIBICLENS SOL 4%	OTC
<i>skin cleansr sol 4%</i>	OTC
<i>sm antisepti sol clnsr 4%</i>	OTC
CHLORHEX GLU PAD 2%	OTC
BIOPATCH MIS 1"/4MM	OTC
BIOPATCH MIS 1"/7MM	OTC
BIOPATCH MIS 3/4"/1.5	OTC
BIOPATCH PRO MIS DISK/CHG	OTC

IODINE ANTISEPTICS

BETADINE SRG SOL 7.5%	OTC
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Drug Name	Requirements/Limits
<i>first aid sol 10%</i>	OTC
<i>povidone-iodine soln 10%</i>	OTC
<i>povidone-ion sol 10%</i>	OTC
<i>povidone/iod sol 10%</i>	OTC
<i>ra antisepti sol 10%</i>	OTC
<i>sm povid-iod sol 10%</i>	OTC
FIRST AID OIN 10%	OTC

ANTISEPTIC COMBINATIONS

IV PREP WIPE PAD	OTC
MICROCLENS PAD WIPES	OTC
UNI-SOLVE PAD WIPES	OTC

ANTIDOTES AND SPECIFIC ANTAGONISTS

ANTIDOTES AND SPECIFIC ANTAGONISTS

VISTOGARD PAK 10GM	QL (20 packets every 5 days)
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DIAGNOSTIC PRODUCTS

DIAGNOSTIC TESTS

ONETOUCH TES ULTRA	QL (200 strips every 25 days), OTC
ONETOUCH TES VERIO	QL (200 strips every 25 days), OTC
DIASTIX TES REAGENT	QL (100 strips every 25 days), OTC
DIASTIX TES STRIPS	QL (100 strips every 25 days), OTC
CHEMSTRIP 2 TES GP	OTC
CHEMSTRIP 5 TES OB	OTC
CHEMSTRIP 7 TES	OTC
CHEMSTRIP 9 TES STRIPS	OTC
CHEMSTRIP 10 TES MD	OTC
CHEMSTRIP TES -10 SG	OTC
MULTISTIX 10 TES SG	OTC
CHEMSTRIP TES UGK	OTC
CVS KETONE TES CARE	OTC
KETO-DIASTIX TES	OTC

ALTERNATIVE MEDICINES

ALTERNATIVE MEDICINE - M'S

<i>cvs quality cap sleep</i>	OTC
<i>melatonin cap 10mg</i>	OTC
MELATONIN TAB 300MCG	OTC
<i>melatonin tab 1 mg</i>	OTC
<i>kp melatonin tab 3mg</i>	OTC
<i>melatonin tab 3 mg</i>	OTC

Drug Name	Requirements/Limits
<i>ra melatonin tab 3mg</i>	OTC
<i>sm melatonin tab 3mg</i>	OTC
<i>melatonin tab 5 mg</i>	OTC
<i>qc melatonin tab 5mg</i>	OTC
<i>ra melatonin tab 5mg</i>	OTC
<i>sm melatonin tab 5mg</i>	OTC
<i>sv melatonin tab 5mg</i>	OTC
<i>melatonin tab 10mg</i>	OTC
<i>melatonin tab ex str</i>	OTC
<i>melatonin tab max str</i>	OTC
<i>ra melatonin tab 10mg</i>	OTC
MELADOX TAB 3MG CR	OTC
MELATONIN TAB 3MG CR	OTC
<i>melatonin tab 10mg</i>	OTC
<i>mm melatonin tab 10mg tr</i>	OTC
<i>melatonin chw 2.5mg</i>	OTC
<i>vitajoy gumm chw 2.5mg</i>	OTC
<i>yumvs melato chw 2.5mg</i>	OTC
RA MELATONIN SUB 1MG	OTC
<i>melatonin sl tab 5 mg</i>	OTC
<i>melatonin sub 5mg</i>	OTC
<i>melatonin sl tab 10 mg</i>	OTC
<i>melatonin sub quik dis</i>	OTC
MELATONIN LIQ 1MG/4ML	OTC
MELATONIN LIQ 2.5MG	OTC
MELATONIN LIQ 5MG/20ML	OTC
<i>melatonin liq 5mg/15ml</i>	OTC
<i>melatonin liquid 1 mg/ml</i>	OTC
<i>sleep child/ liq melatoni</i>	OTC
MELATONIN LOZ 5MG	OTC
MELATONIN TAB 500MCG	OTC
<i>melatonin tablet disintegrating 3 mg</i>	OTC
<i>sv melatonin tab 3mg</i>	OTC
<i>melatonin tab 5mg</i>	OTC
<i>melatonin tablet disintegrating 5 mg</i>	OTC
<i>sm melatonin tab 5mg</i>	OTC
<i>melatonin chw 10mg</i>	OTC
<i>melatonin chw quik dis</i>	OTC
<i>melatonin tablet disintegrating 10 mg</i>	OTC
<i>qc melatonin tab 10mg</i>	OTC

Drug Name	Requirements/Limits
MEDICAL DEVICES AND SUPPLIES	
PARENTERAL THERAPY SUPPLIES	
BD INSULIN SYRINGE - OTC	QL (200 syringes every 25 days), OTC
BD INSULIN SYRINGE - OTC	QL (200 syringes every 25 days), OTC
BD INSULIN SYRINGE - OTC	QL (200 syringes every 25 days), OTC
INSULIN SYRG MIS 0.3/31G	QL (200 syringes every 25 days), OTC
INSULIN SYRG MIS 1ML/30G	QL (200 syringes every 25 days), OTC
INSULIN SYRG MIS 1ML/31G	QL (200 syringes every 25 days), OTC
INSULIN SYRG MIS 0.3/31G	QL (200 syringes every 25 days), OTC
INSULIN SYRG MIS 0.5/31G	QL (200 syringes every 25 days), OTC
INSULIN SYRG MIS 1ML/31G	QL (200 syringes every 25 days), OTC
BD U-500 MIS 31GX6MM	QL (200 syringes every 25 days)
BD PEN NEEDL MIS 29GX12.7	QL (200 needles every 25 days), OTC
LITETOUCH MIS 29GX12.7	QL (200 needles every 25 days), OTC
PEN NEEDLE MIS 29GX1/2"	QL (200 needles every 25 days), OTC
PEN NEEDLES MIS 29GX1/2"	QL (200 needles every 25 days), OTC
PEN NEEDLES MIS 29GX12.7	QL (200 needles every 25 days), OTC
SURE COMFORT MIS 29GX1/2"	QL (200 needles every 25 days), OTC
ULTILET PEN MIS 29GX12.7	QL (200 needles every 25 days), OTC
AQINJECT PEN MIS 31GX3/16	QL (200 needles every 25 days)
ASSURE ID MIS 31GX5MM	QL (200 needles every 25 days), OTC
AUM SAFETY MIS 31GX5MM	QL (200 needles every 25 days), OTC
BD PEN NEEDL MIS 31GX5MM	QL (200 needles every 25 days), OTC

\$0 - Zero Dollar Copay **AGE** - Age Limit **GNDR** - Gender Edit **OTC** - Over the counter **PA** - Prior Authorization **QL** - Quantity Limits **SP** - Specialty **ST** - Step Therapy

Drug Name	Requirements/Limits
CARETOUCH MIS 31GX5MM	QL (200 needles every 25 days), OTC
CLICKFINE MIS 31GX3/16	QL (200 needles every 25 days), OTC
COMFORT EZ MIS 31GX5MM	QL (200 needles every 25 days), OTC
COMFORT TOUC MIS 31GX5MM	QL (200 needles every 25 days), OTC
DIATHRIVE MIS 31GX5MM	QL (200 needles every 25 days), OTC
DROPSAFE MIS 31GX5MM	QL (200 needles every 25 days), OTC
EASY COMFORT MIS 31GX3/16	QL (200 needles every 25 days), OTC
EASY COMFORT MIS 31GX5MM	QL (200 needles every 25 days), OTC
EASY TOUCH MIS 31GX3/16	QL (200 needles every 25 days), OTC
FIFTY50 MIS 31GX3/16	QL (200 needles every 25 days), OTC
FIFTY50 MIS 31GX5MM	QL (200 needles every 25 days), OTC
GNP ULTICARE MIS 31GX5MM	QL (200 needles every 25 days), OTC
IN CONTROL MIS 31GX3/16	QL (200 needles every 25 days), OTC
IN CONTROL MIS 31GX5MM	QL (200 needles every 25 days), OTC
INSUPEN MIS 31GX5MM	QL (200 needles every 25 days), OTC
MM PENTIPS MIS 31GX5MM	QL (200 needles every 25 days)
PEN NEEDLE MIS 31GX3/16	QL (200 needles every 25 days), OTC
PEN NEEDLE MIS 31GX5MM	QL (200 needles every 25 days), OTC
PEN NEEDLES MIS 31GX3/16	QL (200 needles every 25 days), OTC
PEN NEEDLES MIS 31GX5MM	QL (200 needles every 25 days)
PEN NEEDLES MIS 31GX5MM	QL (200 needles every 25 days), OTC
PENTIPS MIS 31GX5MM	QL (200 needles every 25 days)

Drug Name	Requirements/Limits
PENTIPS MIS 31GX5MM	QL (200 needles every 25 days), OTC
PURE COMFORT MIS 31GX5MM	QL (200 needles every 25 days), OTC
RA PEN NEEDL MIS 31GX3/16	QL (200 needles every 25 days), OTC
RAYA SURE MIS 31GX5MM	QL (200 needles every 25 days), OTC
SURE COMFORT MIS 31GX3/16	QL (200 needles every 25 days), OTC
1ST TIER UNI MIS 31GX5MM	QL (200 needles every 25 days), OTC
ULTICARE PEN MIS 31GX5MM	QL (200 needles every 25 days), OTC
ULTIGUARD MIS 31GX5MM	QL (200 needles every 25 days), OTC
ULTILET PEN MIS 31GX5MM	QL (200 needles every 25 days), OTC
ULTRA FLO MIS 31GX5MM	QL (200 needles every 25 days), OTC
UNIFINE PLUS MIS 31GX3/16	QL (200 needles every 25 days), OTC
UNIFINE PNTP MIS 31GX3/16	QL (200 needles every 25 days), OTC
UNIFINE PNTP MIS 31GX5MM	QL (200 needles every 25 days), OTC
UNIFINE ULTR MIS 31GX5MM	QL (200 needles every 25 days), OTC
VERIFINE PEN MIS 31GX5MM	QL (200 needles every 25 days), OTC
ZEVRX MIS 31GX5MM	QL (200 needles every 25 days), OTC
BD PEN NEEDL MIS 31GX8MM	QL (200 needles every 25 days), OTC
CAREFINE MIS 31GX8MM	QL (200 needles every 25 days), OTC
CARETOUCH MIS 31GX8MM	QL (200 needles every 25 days), OTC
CLICKFINE MIS 31GX5/16	QL (200 needles every 25 days), OTC
CLICKFINE MIS 31GX8MM	QL (200 needles every 25 days), OTC
COMFORT EZ MIS 31GX8MM	QL (200 needles every 25 days), OTC

Drug Name	Requirements/Limits
COMFORT TOUC MIS 31GX8MM	QL (200 needles every 25 days), OTC
DIATHRIVE MIS 31GX8MM	QL (200 needles every 25 days), OTC
EASY COMFORT MIS 31GX5/16	QL (200 needles every 25 days), OTC
EASY TOUCH MIS 31GX5/16	QL (200 needles every 25 days), OTC
FIFTY50 MIS 31GX5/16	QL (200 needles every 25 days), OTC
FIFTY50 PEN MIS 31GX8MM	QL (200 needles every 25 days), OTC
GNP ULTICARE MIS 31GX5/16	QL (200 needles every 25 days), OTC
HM ULTICARE MIS 31GX8MM	QL (200 needles every 25 days), OTC
IN CONTROL MIS 31GX8MM	QL (200 needles every 25 days), OTC
INCONTROL MIS 31GX8MM	QL (200 needles every 25 days), OTC
INSUPEN MIS 31GX8MM	QL (200 needles every 25 days), OTC
LITETOUCH MIS 31GX8MM	QL (200 needles every 25 days), OTC
MM PENTIPS MIS 31GX8MM	QL (200 needles every 25 days)
PEN NEEDLE MIS 31GX5/16	QL (200 needles every 25 days), OTC
PEN NEEDLE MIS 31GX8MM	QL (200 needles every 25 days), OTC
PEN NEEDLES MIS 31GX5/16	QL (200 needles every 25 days), OTC
PEN NEEDLES MIS 31GX8MM	QL (200 needles every 25 days)
PEN NEEDLES MIS 31GX8MM	QL (200 needles every 25 days), OTC
PENTIPS MIS 31GX8MM	QL (200 needles every 25 days)
PENTIPS MIS 31GX8MM	QL (200 needles every 25 days), OTC
PREVENT DROP MIS 31GX5/16	QL (200 needles every 25 days), OTC
PREVENT SAFE MIS 31GX5/16	QL (200 needles every 25 days), OTC

Drug Name	Requirements/Limits
PRO COMFORT MIS 31GX8MM	QL (200 needles every 25 days)
RAYA SURE MIS 31GX8MM	QL (200 needles every 25 days), OTC
RELION PEN MIS 31GX5/16	QL (200 needles every 25 days), OTC
RELION PEN MIS 31GX8MM	QL (200 needles every 25 days), OTC
SURE COMFORT MIS 31GX5/16	QL (200 needles every 25 days), OTC
1ST TIER UNI MIS 31GX8MM	QL (200 needles every 25 days), OTC
TIER UNI PLS MIS 31GX8MM	QL (200 needles every 25 days), OTC
ULTICARE PEN MIS 31GX8MM	QL (200 needles every 25 days), OTC
ULTIGUARD MIS 31GX8MM	QL (200 needles every 25 days), OTC
ULTILET PEN MIS 31GX8MM	QL (200 needles every 25 days), OTC
ULTRA FLO MIS 31GX8MM	QL (200 needles every 25 days), OTC
UNIFINE PLUS MIS 31GX5/16	QL (200 needles every 25 days), OTC
UNIFINE PNTP MIS 31GX5/16	QL (200 needles every 25 days), OTC
UNIFINE PNTP MIS 31GX8MM	QL (200 needles every 25 days), OTC
UNIFINE ULTR MIS 31GX8MM	QL (200 needles every 25 days), OTC
VERIFINE PEN MIS 31GX8MM	QL (200 needles every 25 days), OTC
ZEVRX MIS 31GX8MM	QL (200 needles every 25 days), OTC
AQINJECT PEN MIS 32GX5/32	QL (200 needles every 25 days)
AUM MINI PEN MIS 32GX4MM	QL (200 needles every 25 days), OTC
AUM READYGRD MIS 32GX4MM	QL (200 needles every 25 days), OTC
BD PEN NEEDL MIS 32GX4MM	QL (200 needles every 25 days), OTC
CAREFINE MIS 32GX4MM	QL (200 needles every 25 days), OTC

Drug Name	Requirements/Limits
CARETOUCH MIS 32GX4MM	QL (200 needles every 25 days), OTC
CLICKFINE MIS 32GX5/32	QL (200 needles every 25 days), OTC
COMFORT EZ MIS 32GX4MM	QL (200 needles every 25 days), OTC
COMFORT TOUC MIS 32GX4MM	QL (200 needles every 25 days), OTC
DIATHRIVE MIS 32GX4MM	QL (200 needles every 25 days), OTC
EASY COMFORT MIS 32GX4MM	QL (200 needles every 25 days), OTC
EASY COMFORT MIS 32GX5/32	QL (200 needles every 25 days), OTC
EASY TOUCH MIS 32GX5/32	QL (200 needles every 25 days), OTC
FIFTY50 PEN MIS 32GX4MM	QL (200 needles every 25 days), OTC
GNP ULTICARE MIS 32GX5/32	QL (200 needles every 25 days), OTC
INCONTROL MIS 32GX4MM	QL (200 needles every 25 days), OTC
INSUPEN MIS 32GX4MM	QL (200 needles every 25 days), OTC
MM PENTIPS MIS 32GX4MM	QL (200 needles every 25 days)
NOVOFINE PLS MIS 32GX4MM	QL (200 needles every 25 days), OTC
PEN NEEDLE MIS 32GX4MM	QL (200 needles every 25 days), OTC
PEN NEEDLE MIS 32GX5/32	QL (200 needles every 25 days), OTC
PEN NEEDLES MIS 32GX4MM	QL (200 needles every 25 days)
PEN NEEDLES MIS 32GX4MM	QL (200 needles every 25 days), OTC
PEN NEEDLES MIS 32GX5/32	QL (200 needles every 25 days), OTC
PENTIPS MIS 32GX4MM	QL (200 needles every 25 days)
PENTIPS MIS 32GX4MM	QL (200 needles every 25 days), OTC
PIP PEN NEED MIS 32GX4MM	QL (200 needles every 25 days), OTC

Drug Name	Requirements/Limits
PRO COMFORT MIS 32GX4MM	QL (200 needles every 25 days)
PURE COMFORT MIS 32GX4MM	QL (200 needles every 25 days), OTC
RELION PEN MIS 32GX4MM	QL (200 needles every 25 days), OTC
RELION PEN MIS 32GX5/32	QL (200 needles every 25 days), OTC
SURE COMFORT MIS 32GX5/32	QL (200 needles every 25 days)
SURE COMFORT MIS 32GX5/32	QL (200 needles every 25 days), OTC
1ST TIER UNI MIS 32GX4MM	QL (200 needles every 25 days), OTC
TRUE COMFORT MIS 32GX4MM	QL (200 needles every 25 days), OTC
ULTICARE MIC MIS 32GX4MM	QL (200 needles every 25 days), OTC
ULTIGUARD MIS 32GX4MM	QL (200 needles every 25 days), OTC
ULTILET PEN MIS 32GX4MM	QL (200 needles every 25 days), OTC
ULTRA FLO MIS PEN NEED	QL (200 needles every 25 days), OTC
UNFINE PNTP MIS 32GX4MM	QL (200 needles every 25 days), OTC
UNIFINE PLUS MIS 32GX5/32	QL (200 needles every 25 days), OTC
UNIFINE PNTP MIS 32GX4MM	QL (200 needles every 25 days), OTC
UNIFINE PNTP MIS 32GX5/32	QL (200 needles every 25 days), OTC
UNIFINE PROT MIS 32GX4MM	QL (200 needles every 25 days), OTC
UNIFINE SAFE MIS 32GX4MM	QL (200 needles every 25 days), OTC
UNIFINE ULTR MIS 32GX4MM	QL (200 needles every 25 days), OTC
VERIFINE PEN MIS 32GX4MM	QL (200 needles every 25 days), OTC
ZEV RX MIS 32GX4MM	QL (200 needles every 25 days), OTC
AUM MINI PEN MIS 32GX6MM	QL (200 needles every 25 days), OTC

Drug Name	Requirements/Limits
BD PEN NEEDL MIS 32GX6MM	QL (200 needles every 25 days), OTC
CAREFINE MIS 32GX6MM	QL (200 needles every 25 days), OTC
COMFORT EZ MIS 32GX6MM	QL (200 needles every 25 days), OTC
COMFORT TOUC MIS 32GX6MM	QL (200 needles every 25 days), OTC
EASY TOUCH MIS 32GX1/4"	QL (200 needles every 25 days), OTC
EASY TOUCH MIS 32GX6MM	QL (200 needles every 25 days), OTC
FIFTY50 PEN MIS 32GX6MM	QL (200 needles every 25 days), OTC
GNP ULTICARE MIS 32GX1/4"	QL (200 needles every 25 days), OTC
NOVOFINE MIS 32GX6MM	QL (200 needles every 25 days), OTC
PEN NEEDLE MIS 32GX1/4"	QL (200 needles every 25 days), OTC
PEN NEEDLE MIS 32GX6MM	QL (200 needles every 25 days), OTC
PEN NEEDLES MIS 32GX1/4	QL (200 needles every 25 days), OTC
PEN NEEDLES MIS 32GX1/4"	QL (200 needles every 25 days), OTC
PEN NEEDLES MIS 32GX6MM	QL (200 needles every 25 days), OTC
PENTIPS MIS 32GX6MM	QL (200 needles every 25 days), OTC
PRO COMFORT MIS 32GX6MM	QL (200 needles every 25 days), OTC
PURE COMFORT MIS 32GX6MM	QL (200 needles every 25 days), OTC
SURE COMFORT MIS 32GX6MM	QL (200 needles every 25 days), OTC
ULTIGUARD MIS 32GX6MM	QL (200 needles every 25 days), OTC
UNIFINE PNTP MIS 32GX6MM	QL (200 needles every 25 days), OTC
VERIFINE PEN MIS 32GX6MM	QL (200 needles every 25 days), OTC

RESPIRATORY THERAPY SUPPLIES

ACE AERO CLD MIS ENHANCER

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Drug Name	Requirements/Limits
ACTIVITY PCH MIS	
ADULT MASK MIS LARGE	
AE EZ TWIST MIS TUBING	
AE MASK MIS LARGE	OTC
AE MASK MIS MEDIUM	OTC
AE MASK MIS SMALL	OTC
AEROSOL MASK MIS ADULT	OTC
AEROTRC PLUS MIS	
AIR TUBE MIS /PLUGS	
AIRS PEDIATR MIS MASK	
ALTERA NEB MIS HANDSET	
BUBBLES PEDI MIS MASK	OTC
CARETOUCH MIS CPAP	
CO MONITOR MIS T PIECES	
COMFORTSEAL MIS MASK LRG	
COMFORTSEAL MIS MASK MED	
COMFORTSEAL MIS MASK SML	
CONVERSION MIS BABY SZ1	
CONVERSION MIS BABY SZ2	
CONVERSION MIS BABY SZ3	
CPAP & BIPAP MIS HOSE	
2 CPAP HOSE MIS HANGER	
CPAP MASK MIS WIPES	
CPAP NEURAL MIS PRE-WASH	
EASY FLOW MIS 300MM	OTC
EASY FLOW MIS 400MM	OTC
EASY FLOW MIS AIR NOZZ	OTC
EASY FLOW MIS HEPA FIL	OTC
EBASE CONTRO MIS KIT	
ERAPID NEB MIS HANDSET	
FILTER AIR MIS PP	
FLYP HYPERSO MIS CARTRIDG	OTC
FULL KIT NEB MIS SET	
LITETOUCH MIS MASK LG	
LITETOUCH MIS MASK MD	
LITETOUCH MIS MASK SM	
MINIELITE MIS FILTERS	OTC
NEBULIZER MIS MASK AD	
NEBULIZER MIS MASK CH	
NEBULIZER MIS MASK CHD	
NEBULIZER MIS MASK INF	
NOSE CLIP MIS	OTC
OMBRA COMPR MIS AIR FILT	OTC

Drug Name	Requirements/Limits
PARI EXPIRAT MIS FILTER	
PARI MASK MIS SIZE 3	
PARI PLASTIC MIS MASK	
PARI PLASTIC MIS MASK PED	
PARI SMRTMSK MIS BABY	OTC
PEDIATRIC MIS MOUTHPIE	OTC
PFLEX MIS	
PFT FILTER MIS 1000	
PHARM CHOICE MIS WIPES	OTC
PILLOW MASK MIS ADULT	
PILLOW MASK MIS CHILD	
PILLOW MASK MIS PEDIATRI	
PRONEB ULTRA MIS FILTER	OTC
REPLACEMENT MIS FILTER	
REPLACEMENT MIS FILTERS	OTC
SIDESTREAM MIS MASK	
SIDESTREAM MIS MASK	OTC
SIDESTREAM MIS PED MASK	
SIDESTREAM MIS PED MASK	OTC
SIDESTRM PLS MIS FACE MSK	OTC
SILICONE MSK MIS ADULT	
SILICONE MSK MIS INFANT	
SILICONE MSK MIS PED	
SOOTHENEB MIS MED CUP	OTC
SOOTHENEB MIS MESH CAP	OTC
SOOTHENEB MIS NBL 100	OTC
THRESHOLD MIS IMT	
TUBE CLEANIN MIS BRUSH	
ULTRA NEB MIS ACCESSOR	OTC
WINDMILL MIS TRAINER	
WING TIP MIS TUBING	OTC
AERCHMBR PLS MIS INTERMED	
AERCHMBR PLS MIS INTERMED	OTC
AERCHMBR PLS MIS LRG MASK	
AERCHMBR PLS MIS MED MASK	
AERCHMBR PLS MIS SM MASK	
AERCHMBR Z- MIS STAT PLS	
AEROCHAMBER MIS CHAMBER	
AEROCHAMBER MIS FLOSIGNA	
AEROCHAMBER MIS HOLDING	
AEROCHAMBER MIS MTHPIECE	
AEROCHAMBER MIS MV	
AEROCHAMBER MIS PLUS	

Drug Name	Requirements/Limits
AEROVENT MIS PLUS	
BREATHE EASE MIS LG MASK	
BREATHE EASE MIS MED MASK	
BREATHE EASE MIS SM MASK	
BREATHERITE MIS MDI CHMB	
COMPACT SPAC MIS CHAMBER	
COMPACT SPAC MIS LG MASK	
COMPACT SPAC MIS MD MASK	
COMPACT SPAC MIS SM MASK	
EASIVENT MIS	
EASIVENT MIS MASK LG	
EASIVENT MIS MASK MED	
EASIVENT MIS MASK SM	
FLEXICHAMBER MIS	
HOLD CHAMBER MIS ADLT LG	
HOLD CHAMBER MIS ADLT LG	OTC
HOLD CHAMBER MIS MEDIUM	
HOLD CHAMBER MIS MEDIUM	OTC
HOLD CHAMBER MIS SMALL	
HOLD CHAMBER MIS SMALL	OTC
HOLDING CHAM MIS ADULT	OTC
HOLDING CHAM MIS CHILD	OTC
INSPIREASE MIS DD SYST	
MICROCHAMBER MIS	
MICROSPACER MIS	
OPTICHAMBER MIS DIA LG	
OPTICHAMBER MIS DIA MD	
OPTICHAMBER MIS DIA SM	
OPTICHAMBER MIS DIAMOND	
POCKET CHAMB MIS	
POCKET SPACE MIS	
PROCARE MIS ADULT	OTC
PROCARE MIS CHILD	OTC
PROCHAMBER MIS VHC	
PURE COMFORT MIS SPACER	OTC
RITEFLO MIS	
SPACE CHAMBR MIS ANTI-STA	
SPACE CHAMBR MIS LARGE	
SPACE CHAMBR MIS MEDIUM	
SPACE CHAMBR MIS SMALL	
SPACER CHAMB MIS ADULT	OTC
SPACER CHAMB MIS CHILD	OTC
SPACER CHAMB MIS INFANT	OTC

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Drug Name	Requirements/Limits
VORTEX VALVE MIS CHAMBER	
VORTEX/MASK MIS CHILDS	
VORTEX/MASK MIS TODDLER	
FLEXICHAMBER MIS MASK LRG	QL (2 boxes every year)
FLEXICHAMBER MIS MASK SM	QL (2 boxes every year)
MASK VORTEX/ MIS FROG	QL (2 boxes every year), OTC
MASK VORTEX/ MIS LADY BUG	QL (2 boxes every year), OTC
PANDA MASK MIS LARGE	QL (2 packs every year), OTC
PANDA MASK MIS MEDIUM	QL (2 packs every year), OTC
PANDA MASK MIS PEDIATRI	QL (2 packs every year), OTC
PANDA MASK MIS SMALL	QL (2 packs every year), OTC
PARI VORTEX MIS ADL MASK	QL (2 boxes every year), OTC
AERIVA MIS CON/NEB	QL (1 box every 730 days), OTC
AEROECLIPSE MIS II	QL (1 box every 730 days)
AEROECLIPSE MIS II NEB	QL (1 box every 730 days)
AEROECLIPSE MIS II TUBE	QL (1 box every 730 days)
AEROECLIPSE MIS XL	QL (1 box every 730 days)
AIRS DISPOSA MIS NEBULIZR	QL (1 box every 730 days), OTC
ALTERA MIS NEBULIZE	QL (1 box every 730 days)
AURA MIS PORTANEB	QL (1 box every 730 days)
BENTLEY THE MIS BEAR	QL (1 box every 730 days)
CAPTAIN MIS EAGLE	QL (1 box every 730 days)
CLEVER CHOIC MIS NEBULIZR	QL (1 box every 730 days)
COMP A-I-R MIS NEBULIZE	QL (1 box every 730 days)
COMP AIR MIS COMP/NEB	QL (1 box every 730 days)
COMPMIST MIS NEBULIZE	QL (1 box every 730 days), OTC
COMPRESSOR MIS NEBULIZE	QL (1 box every 730 days)
COMPRESSOR MIS NEBULIZR	QL (1 box every 730 days), OTC
EASY AIR COM MIS NEBULIZE	QL (1 box every 730 days), OTC
EASY NEB MIS	QL (1 box every 730 days), OTC
ELITE COMPRS MIS NEBULIZR	QL (1 box every 730 days), OTC
ERAPID MIS NEBULIZE	QL (1 box every 730 days)
FLYP NEBULZR MIS	QL (1 box every 730 days)
FLYP NEBULZR MIS POCKET	QL (1 box every 730 days)
HOMENEB MIS SIDESTRE	QL (1 box every 730 days), OTC
INNOSPIRE EL MIS NEBULIZE	QL (1 box every 730 days)
INNOSPIRE ES MIS NEBULIZE	QL (1 box every 730 days)
INNOSPIRE MIS PORTABLE	QL (1 box every 730 days), OTC
LUMINEB II MIS NEBULIZR	QL (1 box every 730 days)
MABIS COMPXP MIS COMP/NEB	QL (1 box every 730 days), OTC
MABIS COSMO MIS NEBULIZR	QL (1 box every 730 days)
MARGO MOO MIS NEBULIZE	QL (1 box every 730 days), OTC
MC 300 MIS MOUTHPIE	QL (1 box every 730 days)

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Drug Name	Requirements/Limits
MC 300 MIS TUBING	QL (1 box every 730 days)
MEDNEB NEBUL MIS DISP NEB	QL (1 box every 730 days)
MEDNEB NEBUL MIS REUS/BAG	QL (1 box every 730 days), OTC
MEDNEB NEBUL MIS REUSE/DI	QL (1 box every 730 days), OTC
MICROAIR MIS VIB MESH	QL (1 box every 730 days)
MICRONEB MIS TABLETOP	QL (1 box every 730 days)
MINI COMPRES MIS NEBULIZR	QL (1 box every 730 days)
MINI-MIST MIS PORTABLE	QL (1 box every 730 days), OTC
MINIBREEZE MIS NEBULIZE	QL (1 box every 730 days), OTC
NEB-RITE4 MIS	QL (1 box every 730 days)
NEB-RITE4 MIS	QL (1 box every 730 days), OTC
NEBULIZER MIS PED FROG	QL (1 box every 730 days)
NEBULIZER MIS ULTRASON	QL (1 box every 730 days)
NEBULIZER SY KIT ALLINONE	QL (1 box every 730 days)
PARI BABY MIS SIZE 0	QL (1 box every 730 days)
PARI BABY MIS SIZE 1	QL (1 box every 730 days)
PARI BABY MIS SIZE 2	QL (1 box every 730 days)
PARI BBY NEB MIS SET	QL (1 box every 730 days)
PARI LC MIS SPRINT	QL (1 box every 730 days)
PARI LC PLUS MIS	QL (1 box every 730 days)
PARI LC PLUS MIS NEBULIZR	QL (1 box every 730 days)
PARI LC PLUS MIS VIOS PRO	QL (1 box every 730 days)
PARI LC STAR MIS	QL (1 box every 730 days)
PARI SINUS MIS AERO SYS	QL (1 box every 730 days)
PARI TREK S MIS	QL (1 box every 730 days)
PED COMPRESS MIS NEBULIZE	QL (1 box every 730 days)
PORT COMPRES MIS NEBULIZR	QL (1 box every 730 days), OTC
PROCARE COMP MIS NEBULIZE	QL (1 box every 730 days), OTC
PRONEB MAX MIS LC PLUS	QL (1 box every 730 days)
PRONEB MAX MIS LC SPRNT	QL (1 box every 730 days)
PULMONEB LT MIS NEBULIZE	QL (1 box every 730 days)
PURE AIR MIN MIS NEBULIZE	QL (1 box every 730 days), OTC
SIDESTREAM MIS NEBULIZR	QL (1 box every 730 days)
SIDESTREAM MIS PLUS	QL (1 box every 730 days)
SMART NEB MIS COMP NEB	QL (1 box every 730 days), OTC
SOOTHE NEB MIS NEBULIZE	QL (1 box every 730 days)
SOOTHENEB MIS COMP NEB	QL (1 box every 730 days)
SPARKY THE MIS DOG	QL (1 box every 730 days)
ULTRASONIC MIS MINI NEB	QL (1 box every 730 days), OTC
VIOS LC MIS SPRINT	QL (1 box every 730 days)
VIOS LC PLUS MIS	QL (1 box every 730 days)
VIOS LC PLUS MIS DELUXE	QL (1 box every 730 days)
VIOS LC PLUS MIS PEDIATRC	QL (1 box every 730 days)

\$0 - Zero Dollar Copay **AGE** - Age Limit **GNDR** - Gender Edit **OTC** - Over the counter **PA** - Prior Authorization **QL** - Quantity Limits **SP** - Specialty **ST** - Step Therapy

Drug Name	Requirements/Limits
VIOS MIS SYSTEM	QL (1 box every 730 days)
VIOS PRO LC MIS SPRINT	QL (1 box every 730 days)
VIOS PRO LC+ MIS SYSTEM	QL (1 box every 730 days)
WHISPER AIRE MIS AER DELI	QL (1 box every 730 days)
WHISPER AIRE MIS PED AERO	QL (1 box every 730 days)
WHISPER AIRE MIS PED NEBU	QL (1 box every 730 days)
WILLIS THE MIS WHALE	QL (1 box every 730 days), OTC
BREATHE COMF MIS HUMIDIFI	QL (1 box every 730 days), OTC
BREATHE EASE MIS HUMIDIFI	QL (1 box every 730 days), OTC
CLEVER CHOIC MIS ULTRASON	QL (1 box every 730 days), OTC
COOL MIST MIS 0.8 GAL	QL (1 box every 730 days), OTC
COOL MIST MIS 1 GALLON	QL (1 box every 730 days), OTC
COOL MIST MIS 1.2 GAL	QL (1 box every 730 days), OTC
COOL MIST MIS 1.3 GAL	QL (1 box every 730 days), OTC
COOL MIST MIS 2 GALLON	QL (1 box every 730 days), OTC
EVAP HUMIDFR MIS 1.5 GAL	QL (1 box every 730 days), OTC
EVAP HUMIDFR MIS 2 GALLON	QL (1 box every 730 days), OTC
HUMIDIFIER MIS 1.3 GAL	QL (1 box every 730 days), OTC
HUMIDIFIER MIS 1.5 GAL	QL (1 box every 730 days), OTC
HUMIDIFIER MIS 1.8 GAL	QL (1 box every 730 days), OTC
HUMIDIFIER MIS 1.25 GAL	QL (1 box every 730 days), OTC
HUMIDIFIER MIS 2 GALLON	QL (1 box every 730 days), OTC
HUMIDIFIER MIS COOL MIS	QL (1 humidifier every 2 years), OTC
HUMIDIFIER MIS COOL MST	QL (1 box every 730 days), OTC
HUMIDIFIER MIS FROG	QL (1 box every 730 days), OTC
HUMIDIFIER MIS GERMFREE	QL (1 box every 730 days), OTC
HUMIDIFIER MIS HOSPITAL	QL (1 box every 730 days), OTC
HUMIDIFIER MIS PROCARE	QL (1 box every 730 days), OTC
HUMIDIFIER MIS ULTRASON	QL (1 box every 730 days), OTC
HUMIDIFIER MIS ULTSONIC	QL (1 box every 730 days), OTC
HUMIDIFIER MIS WARM MST	QL (1 box every 730 days), OTC
KAZ HUMIDIFR MIS 1.2 GAL	QL (1 box every 730 days), OTC
KAZ HUMIDIFR MIS 3000	QL (1 box every 730 days), OTC
KAZ HUMIDIFR MIS 3300	QL (1 box every 730 days), OTC
KAZ HUMIDIFR MIS 3400	QL (1 box every 730 days), OTC
PURE COMFORT MIS HUMIDIFI	QL (1 box every 730 days), OTC
VICKS MINI MIS COOLMIST	QL (1 box every 730 days), OTC
VICKS PURE MIS MIST	QL (1 box every 730 days), OTC
VICKS WARM MIS MIST	QL (1 box every 730 days), OTC
BACTERIOSTAT LIQ TREATMNT	QL (1 spray every 730 days), OTC
GORDO-POOL CON	QL (1 mL every 730 days), OTC

Drug Name	Requirements/Limits
KAZ INHALANT LIQ	QL (1 mL every 730 days), OTC
KAZ WATER LIQ TREATMNT	QL (1 mL every 730 days), OTC
SM VAPORIZER LIQ INHALANT	QL (1 mL every 730 days), OTC
FLOWING VAPR PAD	QL (1 pad every 730 days), OTC
FLOWING VAPR PAD W/FAN	QL (1 pad every 730 days), OTC
VAPOPADS PAD REFILL	QL (1 pad every 730 days), OTC
VAPORIZER PAD SCENT	QL (1 pad every 730 days), OTC
CHARCOAL MIS FLTR#901	QL (1 box every 730 days), OTC
HEALTHCHECK MIS MONITOR	QL (1 box every 730 days), OTC
HUMIDIFIER MIS FILTER	QL (1 box every 730 days), OTC
KAX AROMATIC PAD INHALANT	QL (1 pad every 730 days), OTC
KAZ DEMINERA MIS CARTRIDG	QL (1 box every 730 days), OTC
KAZ DYNAFLTR MIS K14-3P	QL (1 box every 730 days), OTC
KAZ DYNAFLTR MIS K14-S	QL (1 box every 730 days), OTC
KAZ WICKING MIS FLTR WF1	QL (1 box every 730 days), OTC
ULTSONIC FLT MIS #415-1	QL (1 box every 730 days), OTC
WICKING FLTR MIS	QL (1 box every 730 days), OTC
WICKING FLTR MIS #502	QL (1 box every 730 days), OTC
SM VAPORIZER TAB CLEANING	QL (1 tab every 730 days), OTC
KAZ VAPORIZR MIS 1 GALLON	QL (1 box every 730 days), OTC
KAZ VAPORIZR MIS 1.5 GAL	QL (1 box every 730 days), OTC
KAZ VAPORIZR MIS 2.2 GAL	QL (1 box every 730 days), OTC
LIFESTYLECOM MIS VAPORIZE	QL (1 box every 730 days), OTC
VAPORIZER MIS 1 GALLON	QL (1 box every 730 days), OTC
VAPORIZER MIS 1.2 GAL	QL (1 box every 730 days), OTC
VAPORIZER MIS 1.7 GAL	QL (1 box every 730 days), OTC
VAPORIZER MIS 1.9 GAL	QL (1 box every 730 days), OTC
VAPORIZER MIS 2 GALLON	QL (1 box every 730 days), OTC
VAPORIZER MIS 3 GALLON	QL (1 box every 730 days), OTC
VAPORIZER MIS WATERLES	QL (1 box every 730 days), OTC

RESPIRATORY AIDS

ACTEEV PROTE MIS MASK	OTC
ALL PURPOSE MIS MASK	OTC
BREATHE COMF MIS SHIELD	OTC
CLEVER CHOIC MIS MASK	OTC
CLEVR CHOICE MIS MEDICAL	OTC
DISPOSABLE MIS FACE MAS	OTC
EAR-LOOP MIS MASK SM	OTC
EARLOOP MIS MASK	OTC
EASY FLOW MIS KN 95	OTC
FACE MASK MIS 3 PLY	OTC
FACE MASK MIS 3-PLY	OTC
FACE MASK MIS EARLOOP	

Drug Name	Requirements/Limits
FACE MASK MIS EARLOOP	OTC
FACE MASK MIS N-100	
FACE MASK MIS R95 PART	
FACE MASK MIS SURG/DIS	OTC
FACE MASKS MIS 3 LAYER	OTC
J&J GERM FIL MIS MASK	OTC
KN95 DISPOSABLE MIS MASK	OTC
KN95 MEDICAL MIS MASK	OTC
MASK PEDIATR MIS SIZE 1"	OTC
N95 MASK MIS	OTC
N95 PARTICUL MIS ATE RESP	OTC
PEDIATRIC MD MIS MASK	OTC
PEDIATRIC SM MIS MASK	OTC
PROCEDURAL MIS MASK	OTC
SHIELD-SECUR MIS	OTC
SURGICAL MSK MIS N95	

DIABETIC SUPPLIES

OMNIPOD 5 G6 MIS PODS	PA
OMNIPOD 5 G7 MIS PODS	PA
OMNIPOD DASH MIS PODS	PA
OMNIPOD MIS CLASSIC	PA
OMNIPOD 5 G6 KIT INTRO	PA
OMNIPOD 5 G7 KIT INTRO	PA
OMNIPOD DASH KIT INTRO	PA
OMNIPOD DASH KIT PDM	PA
OMNIPOD GO KIT 10UNT/DY	PA
OMNIPOD GO KIT 15UNT/DY	PA
OMNIPOD GO KIT 20UNT/DY	PA
V-GO 20 KIT	PA
OMNIPOD GO KIT 25UNT/DY	PA
OMNIPOD GO KIT 30UNT/DY	PA
V-GO 30 KIT	PA
OMNIPOD GO KIT 35UNT/DY	PA
OMNIPOD GO KIT 40UNT/DY	PA
V-GO 40 KIT	PA
ONETOUCH KIT ULTRA 2	OTC
ONETOUCH KIT VERIO FL	OTC
ONETOUCH KIT VERIO RE	OTC
DEXCOM G6 MIS RECEIVER	PA
DEXCOM G7 MIS RECEIVER	PA
DEXCOM G6 MIS SENSOR	PA, QL (3 sensors every 25 days)

Drug Name	Requirements/Limits
DEXCOM G7 MIS SENSOR	PA, QL (3 sensors every 25 days)
DEXCOM G6 MIS TRANSMIT	PA
ACTI-LANCE MIS 28G	QL (200 lancets every 25 days), OTC
ACTI-LANCE MIS LITE 28G	QL (200 lancets every 25 days), OTC
ACTI-LANCE MIS SPEC 17G	QL (200 lancets every 25 days), OTC
ACTI-LANCE MIS UNIV 23G	QL (200 lancets every 25 days), OTC
ADVocate SAFE MIS LANC 26G	QL (200 lancets every 25 days), OTC
ADVocate MIS LANC 30G	QL (200 lancets every 25 days), OTC
ADVocate MIS LANCETS	QL (200 lancets every 25 days), OTC
AGAMATRIX MIS 33G	QL (200 lancets every 25 days), OTC
AIMSCO TWIST MIS 32G	QL (200 lancets every 25 days), OTC
AIMSCO TWIST MIS 33G	QL (200 lancets every 25 days), OTC
AQUALANCE MIS 30G	QL (200 lancets every 25 days), OTC
ASSURE CMFRT MIS 28G	QL (200 lancets every 25 days), OTC
ASSURE LANCE MIS 21G	QL (200 lancets every 25 days), OTC
ASSURE LANCE MIS 28G	QL (200 lancets every 25 days), OTC
ASSURE LANCE MIS LOW FLOW	QL (200 lancets every 25 days), OTC
ASSURE LANCE MIS MICRO	QL (200 lancets every 25 days), OTC
ASSURE LANCE MIS SAFE 25G	QL (200 lancets every 25 days), OTC
ASSURE LANCE MIS SAFE 30G	QL (200 lancets every 25 days), OTC
AURORA LANCE MIS 30G	QL (200 lancets every 25 days), OTC
AURORA LANCE MIS THIN 23G	QL (200 lancets every 25 days), OTC

Drug Name	Requirements/Limits
AUTO LANCET MIS	QL (200 lancets every 25 days), OTC
BD MICROTAIN MIS LANCETS	QL (200 lancets every 25 days)
BD MICROTAIN MIS LANCETS	QL (200 lancets every 25 days), OTC
CAREONE LANC MIS 30G	QL (200 lancets every 25 days), OTC
CAREONE LANC MIS THIN 23G	QL (200 lancets every 25 days), OTC
CARESENS 30G MIS LANCETS	QL (200 lancets every 25 days), OTC
CARETOUCH MIS LANC 26G	QL (200 lancets every 25 days), OTC
CARETOUCH MIS LANC 28G	QL (200 lancets every 25 days), OTC
CARETOUCH MIS LANC 30G	QL (200 lancets every 25 days), OTC
CARETOUCH MIS TWIST 28	QL (200 lancets every 25 days), OTC
CARETOUCH MIS TWIST 30	QL (200 lancets every 25 days), OTC
CARETOUCH MIS TWIST 33	QL (200 lancets every 25 days), OTC
CHOSEN MIS 30G	QL (200 lancets every 25 days), OTC
CHOSEN MIS SAFE 28G	QL (200 lancets every 25 days), OTC
CLEANLET 28G MIS LANCETS	QL (200 lancets every 25 days), OTC
CLEVER CHECK MIS	QL (200 lancets every 25 days), OTC
CLEVER CHECK MIS 30G	QL (200 lancets every 25 days), OTC
COAGUCHEK MIS LANCETS	QL (200 lancets every 25 days), OTC
COMFORT ASSU MIS LANC 28G	QL (200 lancets every 25 days), OTC
COMFORT ASSU MIS LANC 33G	QL (200 lancets every 25 days), OTC
COMFORT EZ MIS 21G	QL (200 lancets every 25 days), OTC
COMFORT EZ MIS 23G	QL (200 lancets every 25 days), OTC

Drug Name	Requirements/Limits
COMFORT EZ MIS 28G	QL (200 lancets every 25 days), OTC
COMFORT TCH MIS LANC 28G	QL (200 lancets every 25 days), OTC
COMFORT TCH MIS LANC 30G	QL (200 lancets every 25 days), OTC
COMFORT TCH MIS LANC 31G	QL (200 lancets every 25 days), OTC
COMFORTOUCH MIS LANCET	QL (200 lancets every 25 days), OTC
CVS LANCETS MIS 21G	QL (200 lancets every 25 days), OTC
CVS LANCETS MIS 30G	QL (200 lancets every 25 days), OTC
CVS LANCETS MIS 33G	QL (200 lancets every 25 days), OTC
CVS LANCETS MIS ORIGINAL	QL (200 lancets every 25 days), OTC
CVS LANCETS MIS THIN 26G	QL (200 lancets every 25 days), OTC
CVS LANCETS MIS THIN 30G	QL (200 lancets every 25 days), OTC
CVS LANCETS MIS THIN 33G	QL (200 lancets every 25 days), OTC
DIATHRIVE MIS LANCETS	QL (200 lancets every 25 days), OTC
DIATHRIVE MIS UT 30G	QL (200 lancets every 25 days), OTC
DROPLET LANC MIS 30G	QL (200 lancets every 25 days), OTC
DROPLET PERS MIS LANC 30G	QL (200 lancets every 25 days), OTC
E-Z JECT MIS 21G	QL (200 lancets every 25 days), OTC
E-Z JECT MIS 21G COLR	QL (200 lancets every 25 days), OTC
E-Z JECT MIS 30G	QL (200 lancets every 25 days), OTC
E-Z JECT MIS 32G COLR	QL (200 lancets every 25 days), OTC
E-Z JECT MIS LANC 21G	QL (200 lancets every 25 days), OTC
E-Z JECT MIS THIN 26G	QL (200 lancets every 25 days), OTC

Drug Name	Requirements/Limits
E-ZJECT LANC MIS 33G	QL (200 lancets every 25 days), OTC
EASY COMFORT MIS 30G	QL (200 lancets every 25 days), OTC
EASY COMFORT MIS LANC/30G	QL (200 lancets every 25 days), OTC
EASY COMFORT MIS TWIST	QL (200 lancets every 25 days), OTC
EASY TOUCH MIS LANC/21G	QL (200 lancets every 25 days), OTC
EASY TOUCH MIS LANC/23G	QL (200 lancets every 25 days), OTC
EASY TOUCH MIS LANC/26G	QL (200 lancets every 25 days), OTC
EASY TOUCH MIS LANC/28G	QL (200 lancets every 25 days), OTC
EASY TOUCH MIS LANC/30G	QL (200 lancets every 25 days), OTC
EASY TOUCH MIS LANC/32G	QL (200 lancets every 25 days), OTC
EASY TOUCH MIS LANC/33G	QL (200 lancets every 25 days), OTC
EMBRACE LANC MIS 21G	QL (200 lancets every 25 days), OTC
EMBRACE LANC MIS 28G	QL (200 lancets every 25 days), OTC
EMBRACE LANC MIS THIN 30G	QL (200 lancets every 25 days), OTC
EQL LANCETS MIS 21G COLR	QL (200 lancets every 25 days), OTC
EQL LANCETS MIS 33G COLR	QL (200 lancets every 25 days), OTC
EQL LANCETS MIS THIN 26G	QL (200 lancets every 25 days), OTC
EQL LANCETS MIS THIN 30G	QL (200 lancets every 25 days), OTC
EZ-LETS 21G MIS LANCETS	QL (200 lancets every 25 days), OTC
EZ-LETS 26G MIS LANCETS	QL (200 lancets every 25 days), OTC
EZ-LETS 28G MIS LANCETS	QL (200 lancets every 25 days), OTC
EZ-LETS 30G MIS LANCETS	QL (200 lancets every 25 days), OTC

Drug Name	Requirements/Limits
FASTCLIX MIS LANCETS	QL (200 lancets every 25 days), OTC
FIFTY50 SAFE MIS LANCETS	QL (200 lancets every 25 days), OTC
FINGERSTIX MIS LANCETS	QL (200 lancets every 25 days), OTC
FORA LANCETS MIS 30G	QL (200 lancets every 25 days), OTC
FORA MIS LANCETS	QL (200 lancets every 25 days), OTC
FREESTYLE MIS LANCETS	QL (200 lancets every 25 days), OTC
GENTEEL MIS LANCETS	QL (200 lancets every 25 days), OTC
GENTLE-LET MIS 26G	QL (200 lancets every 25 days), OTC
GENTLE-LET MIS 28G	QL (200 lancets every 25 days), OTC
GENTLE-LET MIS LANCETS	QL (200 lancets every 25 days), OTC
GLOBAL 28G MIS LANCETS	QL (200 lancets every 25 days), OTC
GLOBAL 30G MIS LANCETS	QL (200 lancets every 25 days), OTC
GLUCOCOM MIS 28G	QL (200 lancets every 25 days), OTC
GLUCOCOM MIS 30G	QL (200 lancets every 25 days), OTC
GLUCOCOM MIS 33G	QL (200 lancets every 25 days), OTC
GNP LANCETS MIS 21G	QL (200 lancets every 25 days), OTC
GNP LANCETS MIS 28G	QL (200 lancets every 25 days), OTC
GNP LANCETS MIS 30G	QL (200 lancets every 25 days), OTC
GNP LANCETS MIS 33G	QL (200 lancets every 25 days), OTC
GNP LANCETS MIS THIN 26G	QL (200 lancets every 25 days), OTC
GOJJI LANCET MIS 30G	QL (200 lancets every 25 days), OTC
GOODSENSE MIS LANC 26G	QL (200 lancets every 25 days), OTC

Drug Name	Requirements/Limits
GOODSENSE MIS LANC 30G	QL (200 lancets every 25 days), OTC
GOODSENSE MIS LANC 33G	QL (200 lancets every 25 days), OTC
HAEMOLANCE MIS HIGH FLO	QL (200 lancets every 25 days), OTC
HAEMOLANCE MIS LOW FLOW	QL (200 lancets every 25 days), OTC
HAEMOLANCE MIS PLUS	QL (200 lancets every 25 days), OTC
HAEMOLANCE MIS PLUS LOW	QL (200 lancets every 25 days), OTC
HAEMOLANCE MIS PLUS MAX	QL (200 lancets every 25 days), OTC
HAEMOLANCE MIS PLUS PED	QL (200 lancets every 25 days), OTC
HAEMOLANCE MIS RETRACT	QL (200 lancets every 25 days), OTC
IN TOUCH LAN MIS 30G	QL (200 lancets every 25 days), OTC
INCONTROL MIS LANC 28G	QL (200 lancets every 25 days), OTC
INCONTROL MIS LANC 30G	QL (200 lancets every 25 days), OTC
INCONTROL MIS LANC 33G	QL (200 lancets every 25 days), OTC
KINNEY MIS LANCETS	QL (200 lancets every 25 days), OTC
KINNEY THIN MIS LANCETS	QL (200 lancets every 25 days), OTC
KROGER LANCE MIS	QL (200 lancets every 25 days), OTC
KROGER LANCE MIS 26G	QL (200 lancets every 25 days), OTC
KROGER LANCE MIS THIN	QL (200 lancets every 25 days), OTC
KROGER LANCE MIS THIN 30G	QL (200 lancets every 25 days), OTC
LANCET MICRO MIS THIN 33G	QL (200 lancets every 25 days), OTC
LANCET STAND MIS 21G	QL (200 lancets every 25 days), OTC
LANCET SUPER MIS THIN 30G	QL (200 lancets every 25 days), OTC

Drug Name	Requirements/Limits
LANCET ULTRA MIS THIN 30G	QL (200 lancets every 25 days), OTC
LANCETS MICR MIS THIN 33G	QL (200 lancets every 25 days), OTC
LANCETS MIS	QL (200 lancets every 25 days), OTC
LANCETS MIS 21G	QL (200 lancets every 25 days), OTC
LANCETS MIS 21G COLR	QL (200 lancets every 25 days), OTC
LANCETS MIS 26G	QL (200 lancets every 25 days), OTC
LANCETS MIS 28G	QL (200 lancets every 25 days), OTC
LANCETS MIS 30G	QL (200 lancets every 25 days), OTC
LANCETS MIS 33G	QL (200 lancets every 25 days), OTC
LANCETS MIS ORIGINAL	QL (200 lancets every 25 days), OTC
LANCETS MIS THIN	QL (200 lancets every 25 days), OTC
LANCETS MIS THIN 26G	QL (200 lancets every 25 days), OTC
LANCETS MIS THIN 30G	QL (200 lancets every 25 days), OTC
LANCETS SUPR MIS THIN 28G	QL (200 lancets every 25 days), OTC
LANCETS THIN MIS	QL (200 lancets every 25 days), OTC
LANCETS THIN MIS 26G	QL (200 lancets every 25 days), OTC
LANCETS ULTR MIS THIN	QL (200 lancets every 25 days), OTC
LANCETS ULTR MIS THIN 31G	QL (200 lancets every 25 days), OTC
LITE TOUCH MIS LANCETS	QL (200 lancets every 25 days), OTC
LITETOUCH MIS LANCETS	QL (200 lancets every 25 days), OTC
LONGS LANCET MIS STANDARD	QL (200 lancets every 25 days), OTC
LONGS LANCET MIS THIN	QL (200 lancets every 25 days), OTC

Drug Name	Requirements/Limits
LONGS LANCET MIS ULTRA TH	QL (200 lancets every 25 days), OTC
MEDICHOICE MIS LANCET	QL (200 lancets every 25 days), OTC
MEDLANCE MIS 30G PLUS	QL (200 lancets every 25 days), OTC
MEDLANCE MIS PLUS 30G	QL (200 lancets every 25 days), OTC
MEDLANCE PLS MIS 0.8MM	QL (200 lancets every 25 days), OTC
MEDLANCE PLS MIS EXTR 21G	QL (200 lancets every 25 days), OTC
MEDLANCE PLS MIS LITE 25G	QL (200 lancets every 25 days), OTC
MEDLANCE PLS MIS UNIV 21G	QL (200 lancets every 25 days), OTC
MEIJER LANCE MIS COLOR	QL (200 lancets every 25 days), OTC
MEIJER LANCE MIS UNIV 21G	QL (200 lancets every 25 days), OTC
MEIJER LANCE MIS UNIV 30G	QL (200 lancets every 25 days), OTC
MEIJER LANCE MIS UNIVERSA	QL (200 lancets every 25 days), OTC
MEIJER MIS LANCETS	QL (200 lancets every 25 days), OTC
MICRO THIN MIS LANC 33G	QL (200 lancets every 25 days), OTC
MICROLET MIS LANCETS	QL (200 lancets every 25 days), OTC
MM TWIST MIS LANCETS	QL (200 lancets every 25 days), OTC
MOBILE LANCE MIS 30G	QL (200 lancets every 25 days), OTC
MONOLET MIS LANCETS	QL (200 lancets every 25 days), OTC
MONOLET OPD MIS LANCETS	QL (200 lancets every 25 days), OTC
MONOLETTOR MIS LANCETS	QL (200 lancets every 25 days), OTC
MYGLUCOHEALT MIS LANC 30G	QL (200 lancets every 25 days), OTC
NOVA SAFETY MIS LANC 23G	QL (200 lancets every 25 days), OTC

Drug Name	Requirements/Limits
NOVA SAFETY MIS LANC 28G	QL (200 lancets every 25 days), OTC
NOVA SURE MIS LANCETS	QL (200 lancets every 25 days), OTC
ON-THE-GO MIS LANC 30G	QL (200 lancets every 25 days), OTC
ONETOUCH DEL MIS LANC DEV	QL (200 lancets every 25 days), OTC
ONETOUCH DEL MIS PLUS 30G	QL (200 lancets every 25 days), OTC
ONETOUCH DEL MIS PLUS 33G	QL (200 lancets every 25 days), OTC
ONETOUCH US MIS 2 30G	QL (200 lancets every 25 days), OTC
PERFECT 28G MIS LANCETS	QL (200 lancets every 25 days), OTC
PERFECT 30G MIS LANCETS	QL (200 lancets every 25 days), OTC
PHARMACY COU MIS LANCETS	QL (200 lancets every 25 days), OTC
PIP LANCETS MIS 28G	QL (200 lancets every 25 days), OTC
PIP LANCETS MIS 30G	QL (200 lancets every 25 days), OTC
PRO COMFORT MIS 31G	QL (200 lancets every 25 days), OTC
PRO COMFORT MIS LANC 30G	QL (200 lancets every 25 days), OTC
PRO COMFORT MIS LANCETS	QL (200 lancets every 25 days), OTC
PRODIGY MIS 26G	QL (200 lancets every 25 days), OTC
PRODIGY MIS 28G	QL (200 lancets every 25 days), OTC
PSS SAFE LAN MIS	QL (200 lancets every 25 days), OTC
PSS SEL LANC MIS	QL (200 lancets every 25 days), OTC
PURE COMFORT MIS 30G LAN	QL (200 lancets every 25 days), OTC
PX LANCETS MIS 28G	QL (200 lancets every 25 days), OTC
PX LANCETS MIS 33G	QL (200 lancets every 25 days), OTC

Drug Name	Requirements/Limits
QC LANCETS MIS 28G	QL (200 lancets every 25 days), OTC
QC LANCETS MIS 30G	QL (200 lancets every 25 days), OTC
RA E-ZJECT MIS 28G	QL (200 lancets every 25 days), OTC
RA E-ZJECT MIS THIN 26G	QL (200 lancets every 25 days), OTC
RA E-ZJECT MIS THIN 28G	QL (200 lancets every 25 days), OTC
RA E-ZJECT MIS ULT THIN	QL (200 lancets every 25 days), OTC
READYLANCE MIS 21G	QL (200 lancets every 25 days), OTC
READYLANCE MIS 23G	QL (200 lancets every 25 days), OTC
READYLANCE MIS 26G	QL (200 lancets every 25 days), OTC
READYLANCE MIS 28G	QL (200 lancets every 25 days), OTC
READYLANCE MIS 30G	QL (200 lancets every 25 days), OTC
REALITY MIS LANCETS	QL (200 lancets every 25 days), OTC
REALITY TRIG MIS LANCETS	QL (200 lancets every 25 days), OTC
RELION LANCE MIS THIN 26G	QL (200 lancets every 25 days), OTC
RELION LANCE MIS THIN 30G	QL (200 lancets every 25 days), OTC
RELION MICRO MIS THIN 33G	QL (200 lancets every 25 days), OTC
RELION ULTRA MIS THIN 30G	QL (200 lancets every 25 days), OTC
RELION ULTRA MIS THIN PLS	QL (200 lancets every 25 days), OTC
RIGHTEST MIS GL300	QL (200 lancets every 25 days), OTC
SAFE-T-LANCE MIS 21G	QL (200 lancets every 25 days), OTC
SAFE-T-LANCE MIS 25G	QL (200 lancets every 25 days), OTC
SAFE-T-LANCE MIS HI FLOW	QL (200 lancets every 25 days), OTC

Drug Name	Requirements/Limits
SAFE-T-LANCE MIS LOW FLOW	QL (200 lancets every 25 days), OTC
SAFE-T-LANCE MIS NOR FLOW	QL (200 lancets every 25 days), OTC
SAFE-T-PRO MIS LANCETS	QL (200 lancets every 25 days), OTC
SAFE-T-PRO MIS PLUS	QL (200 lancets every 25 days), OTC
SAFETY 21G MIS LANCETS	QL (200 lancets every 25 days), OTC
SAFETY 23G MIS LANCETS	QL (200 lancets every 25 days), OTC
SAFETY 28G MIS LANCETS	QL (200 lancets every 25 days), OTC
SAFETY 30G MIS LANCETS	QL (200 lancets every 25 days), OTC
SAFETY MIS LANCETS	QL (200 lancets every 25 days), OTC
SAPS HEALTH MIS TWIST	QL (200 lancets every 25 days), OTC
SAPS TWIST MIS 30G	QL (200 lancets every 25 days), OTC
SAPSCARE MIS TWIST	QL (200 lancets every 25 days), OTC
SB LANCETS MIS THIN	QL (200 lancets every 25 days), OTC
SB LANCETS MIS ULTR THN	QL (200 lancets every 25 days), OTC
SINGLE-LET MIS 23G	QL (200 lancets every 25 days), OTC
SM LANCETS MIS 33G	QL (200 lancets every 25 days), OTC
SMART SENSE MIS LANC 21G	QL (200 lancets every 25 days), OTC
SMART SENSE MIS LANC 26G	QL (200 lancets every 25 days), OTC
SMART SENSE MIS LANC 30G	QL (200 lancets every 25 days), OTC
SMART SENSE MIS LANC 33G	QL (200 lancets every 25 days), OTC
SMARTTEST MIS LANCETS	QL (200 lancets every 25 days), OTC
SOFTCLIX MIS LANCETS	QL (200 lancets every 25 days), OTC

Drug Name	Requirements/Limits
SOLUS V2 MIS LANC 28G	QL (200 lancets every 25 days), OTC
SOLUS V2 MIS LANC 30G	QL (200 lancets every 25 days), OTC
STERILANCE MIS TL 28G	QL (200 lancets every 25 days), OTC
STERILANCE MIS TL 30G	QL (200 lancets every 25 days), OTC
STERILANCE MIS TL 32G	QL (200 lancets every 25 days), OTC
SUPER THIN MIS LANC 28G	QL (200 lancets every 25 days), OTC
SUPER THIN MIS LANCETS	QL (200 lancets every 25 days), OTC
SURE COMFORT MIS LANC 18G	QL (200 lancets every 25 days), OTC
SURE COMFORT MIS LANC 21G	QL (200 lancets every 25 days), OTC
SURE COMFORT MIS LANC 23G	QL (200 lancets every 25 days), OTC
SURE COMFORT MIS LANC 30G	QL (200 lancets every 25 days), OTC
SURE COMFORT MIS LANCETS	QL (200 lancets every 25 days), OTC
SUREFLEX MIS LANCETS	QL (200 lancets every 25 days), OTC
SURELITE MIS LANCETS	QL (200 lancets every 25 days), OTC
TECHLITE AST MIS LANCETS	QL (200 lancets every 25 days), OTC
TECHLITE MIS LANC 26G	QL (200 lancets every 25 days), OTC
TECHLITE MIS LANCETS	QL (200 lancets every 25 days), OTC
TGT LANCET MIS 26G	QL (200 lancets every 25 days), OTC
TGT LANCET MIS 30G	QL (200 lancets every 25 days), OTC
TGT LANCET MIS 33G	QL (200 lancets every 25 days), OTC
THIN LANCETS MIS 26G	QL (200 lancets every 25 days), OTC
THIN LANCETS MIS 30G	QL (200 lancets every 25 days), OTC

Drug Name	Requirements/Limits
THINLETS GP MIS 26G	QL (200 lancets every 25 days), OTC
TOPCARE MIS LANC 33G	QL (200 lancets every 25 days), OTC
TRAVEL LANCE MIS ADV 28G	QL (200 lancets every 25 days), OTC
TRUE COMFORT MIS LANC 30G	QL (200 lancets every 25 days), OTC
TRUPLUS LANC MIS 26G	QL (200 lancets every 25 days), OTC
TRUPLUS LANC MIS 28G	QL (200 lancets every 25 days), OTC
TRUPLUS LANC MIS 30G	QL (200 lancets every 25 days), OTC
TRUPLUS LANC MIS 33G	QL (200 lancets every 25 days), OTC
TWIST LANCET MIS 30G	QL (200 lancets every 25 days), OTC
TWIST LANCET MIS 30G MULT	QL (200 lancets every 25 days), OTC
ULTILET MIS 26G	QL (200 lancets every 25 days), OTC
ULTILET MIS 28G	QL (200 lancets every 25 days), OTC
ULTILET MIS 30G	QL (200 lancets every 25 days), OTC
ULTILET MIS 33G	QL (200 lancets every 25 days), OTC
ULTILET MIS LANCETS	QL (200 lancets every 25 days), OTC
ULTILET MIS SAFETY	QL (200 lancets every 25 days), OTC
ULTILET SAFE MIS 21G	QL (200 lancets every 25 days), OTC
ULTRA THIN MIS 28G	QL (200 lancets every 25 days), OTC
ULTRA THIN MIS 30G	QL (200 lancets every 25 days), OTC
ULTRA THIN MIS 31G	QL (200 lancets every 25 days), OTC
ULTRA THIN MIS 33G	QL (200 lancets every 25 days), OTC
ULTRA THIN MIS LAN 31G	QL (200 lancets every 25 days), OTC

Drug Name	Requirements/Limits
ULTRA THIN MIS LANC 28G	QL (200 lancets every 25 days), OTC
ULTRA THIN MIS LANC 30G	QL (200 lancets every 25 days), OTC
ULTRA THIN MIS LANCETS	QL (200 lancets every 25 days), OTC
UNILET EX II MIS 28G	QL (200 lancets every 25 days), OTC
UNILET EXCEL MIS 23G	QL (200 lancets every 25 days), OTC
UNILET G.P MIS SUPR 23G	QL (200 lancets every 25 days), OTC
UNILET G.P. MIS 21G	QL (200 lancets every 25 days), OTC
UNILET GP 28 MIS ULT THIN	QL (200 lancets every 25 days), OTC
UNILET LANC MIS 33G	QL (200 lancets every 25 days), OTC
UNILET LANCE MIS 21G	QL (200 lancets every 25 days), OTC
UNILET LANCE MIS 28G	QL (200 lancets every 25 days), OTC
UNILET LANCE MIS 33G	QL (200 lancets every 25 days), OTC
UNILET LANCT MIS 28G	QL (200 lancets every 25 days), OTC
UNILET LANCT MIS 30G	QL (200 lancets every 25 days), OTC
UNILET LANCT MIS 33G	QL (200 lancets every 25 days), OTC
UNILET MICRO MIS 33G	QL (200 lancets every 25 days), OTC
UNILET MIS 21G	QL (200 lancets every 25 days), OTC
UNILET SUPER MIS 23G	QL (200 lancets every 25 days), OTC
UNILET SUPER MIS G.P. 23G	QL (200 lancets every 25 days), OTC
UNISTIK 3 MIS GENT 30G	QL (200 lancets every 25 days), OTC
UNISTIK PRO MIS LANC 21G	QL (200 lancets every 25 days), OTC
UNISTIK PRO MIS LANC 28G	QL (200 lancets every 25 days), OTC

Drug Name	Requirements/Limits
UNISTIK SAFE MIS LANC 28G	QL (200 lancets every 25 days), OTC
UNISTIK SAFE MIS LANC 30G	QL (200 lancets every 25 days), OTC
UNISTIK TOUC MIS LANC 21G	QL (200 lancets every 25 days), OTC
UNISTIK TOUC MIS LANC 23G	QL (200 lancets every 25 days), OTC
UNISTIK TOUC MIS LANC 28G	QL (200 lancets every 25 days), OTC
UNISTIK TOUC MIS LANC 30G	QL (200 lancets every 25 days), OTC
UNITSTIK PRO MIS LANC 25G	QL (200 lancets every 25 days), OTC
UNIVERSAL 1 MIS 33G	QL (200 lancets every 25 days), OTC
UNIVERSAL 1 MIS LANC 26G	QL (200 lancets every 25 days), OTC
UNIVERSAL 1 MIS LANC 30G	QL (200 lancets every 25 days), OTC
VERIFINE LAN MIS MINI 21G	QL (200 lancets every 25 days), OTC
VERIFINE LAN MIS MINI 23G	QL (200 lancets every 25 days), OTC
VERIFINE LAN MIS MINI 28G	QL (200 lancets every 25 days), OTC
VERIFINE LAN MIS MINI 30G	QL (200 lancets every 25 days), OTC
VERIFINE MIS UNIV 28G	QL (200 lancets every 25 days), OTC
VERIFINE MIS UNIV 30G	QL (200 lancets every 25 days), OTC
VERIFINE MIS UNIV 33G	QL (200 lancets every 25 days), OTC
VIVAGUARD MIS 28G	QL (200 lancets every 25 days), OTC
VIVAGUARD MIS 30G	QL (200 lancets every 25 days), OTC
ZEVRX TWIST MIS LANC 30G	QL (200 lancets every 25 days), OTC
BANDAGES-DRESSINGS-TAPE	
ACT BRIGHTS MIS BANDAGES	OTC
ACT SPORT FM MIS 1-1/8"X3	OTC
ACT SPORT FM MIS ASSORTED	OTC

\$0 - Zero Dollar Copay **AGE** - Age Limit **GNDR** - Gender Edit **OTC** - Over the counter **PA** - Prior Authorization **QL** - Quantity Limits **SP** - Specialty **ST** - Step Therapy

Drug Name	Requirements/Limits
ACT SPORT FM MIS KNEE/ELB	OTC
ADH BANDAGE MIS ANTIBACT	OTC
ADH BANDAGE MIS CLEAR	OTC
ADH BANDAGE MIS FLEXIBLE	OTC
ADH BANDAGE MIS FOAM	OTC
ADH BANDAGE MIS FOAM TOE	OTC
ADH BANDAGE MIS HEALTH	OTC
ADH BANDAGE MIS HYPO-ALL	OTC
ADH BANDAGE MIS PLASTIC	OTC
ADH BANDAGE MIS RETENTIO	OTC
ADH BANDAGE MIS SHEER	OTC
ADH BANDAGE MIS STRONG	OTC
ADH BANDAGE MIS WTR SHLD	OTC
ADHESIVE PAD MIS LARGE	OTC
ADHESIVE PAD MIS MEDIUM	OTC
ADV HEALING MIS BANDAGES	OTC
ANIMAL PRINT MIS STRIPS	OTC
ANTI-BACTRIA MIS CHILD	OTC
ANTIBAC BNDG MIS 7/8"	OTC
ANTIBAC FABR MIS STRIPS	OTC
ANTIBACTERAI MIS BANDAGES	OTC
ANTIBACTERIA MIS BANDAGES	OTC
ANTIBACTERIA MIS CLEAR	OTC
BAND AID MED MIS BUTTRFLY	OTC
BAND AID MIS 1"	OTC
BAND-AID CLR MIS 7/8"SPOT	OTC
BAND-AID FAM MIS PACK	OTC
BAND-AID FLX MIS	OTC
BAND-AID FLX MIS 1" X 3"	OTC
BAND-AID FLX MIS 1"X3"	OTC
BAND-AID FLX MIS 3/4"X3"	OTC
BAND-AID FLX MIS ASSORTED	OTC
BAND-AID FLX MIS EXTRA LG	OTC
BAND-AID FLX MIS FABRIC	OTC
BAND-AID FLX MIS FINGRTIP	OTC
BAND-AID FLX MIS KNUCKLE	OTC
BAND-AID HYD MIS ACNE BLE	OTC
BAND-AID HYD MIS ALL-PURP	OTC
BAND-AID HYD MIS BLS CUSH	OTC
BAND-AID HYD MIS LARGE	OTC
BAND-AID LG MIS BUTTRFLY	OTC
BAND-AID MIS	OTC
BAND-AID MIS 3/4"X3"	OTC

Drug Name	Requirements/Limits
BAND-AID MIS BABY SHA	OTC
BAND-AID MIS BLUE CLU	OTC
BAND-AID MIS DIS PRIN	OTC
BAND-AID MIS FROZEN	OTC
BAND-AID MIS GLOW-DRK	OTC
BAND-AID MIS HL KITTY	OTC
BAND-AID MIS HOT COLR	OTC
BAND-AID MIS LIGHTYEA	OTC
BAND-AID MIS MEDICATE	OTC
BAND-AID MIS MICK MOU	OTC
BAND-AID MIS OURTONE	OTC
BAND-AID MIS PIXAR	OTC
BAND-AID MIS POKEMON	OTC
BAND-AID MIS RUGRATS	OTC
BAND-AID MIS SENSITIV	OTC
BAND-AID MIS SHEER	OTC
BAND-AID MIS SHEER CF	OTC
BAND-AID MIS SKN FLX	OTC
BAND-AID MIS SPORT EX	OTC
BAND-AID MIS STAR WAR	OTC
BAND-AID MIS SUP MARI	OTC
BAND-AID MIS THAT GIR	OTC
BAND-AID MIS TOUGH	OTC
BAND-AID MIS TOUGH WP	OTC
BAND-AID MIS TOUGH XL	OTC
BAND-AID MIS TOUGH-ST	OTC
BAND-AID MIS TOY STRY	OTC
BAND-AID MIS VARIETY	OTC
BAND-AID MIS X-LG	OTC
BAND-AID PAW MIS PATROL	OTC
BAND-AID WTR MIS BLC FLEX	OTC
BANDAGE FABR MIS EX-LONG	OTC
BANDAGES FAB MIS ASSORTED	OTC
BLISTER REL MIS BANDAGE	OTC
BUTTERFLY MIS CLOSURES	OTC
CARPALOID MIS EMPLOYEE	OTC
CARPALOID MIS LARGE	OTC
CARPALOID MIS PRA LG	OTC
CARPALOID MIS PRAC SM	OTC
CARPALOID MIS SMALL	OTC
COMFORT FAB MIS 3/4"X3"	OTC
COMFORT FAB MIS ASSORTED	OTC
COMFORT FAB MIS KNEE/ELB	OTC

\$0 - Zero Dollar Copay **AGE** - Age Limit **GNDR** - Gender Edit **OTC** - Over the counter **PA** - Prior Authorization **QL** - Quantity Limits **SP** - Specialty **ST** - Step Therapy

Drug Name	Requirements/Limits
COVERLET MIS STRIPS	OTC
CRAYON STRIP MIS BANDAGE	OTC
CVS ANTI-BAC MIS	OTC
CVS ANTI-BAC MIS BANDAGE	OTC
CVS ANTI-BAC MIS WATERPRO	OTC
CVS CLEAR MIS BANDAGES	OTC
CVS FLEX FAB MIS BANDAG	OTC
CVS PLASTIC MIS BANDAGE	OTC
CVS SHEER BA MIS ASSORTED	OTC
CVS SHEER MIS BAND 1"	OTC
CVS SHEER MIS BAND XL	OTC
CVS SPOT BAN MIS SHEER	OTC
EQ STRONG MIS STRIPS	OTC
EQL BUTTERFL MIS CLOSURE	OTC
EQL FIRST MIS AID BAND	OTC
EQL FLEXIBLE MIS FABRIC	OTC
EQL FLEXIBLE MIS FOAM	OTC
EQL GENTLE MIS STRIPS	OTC
EQL HVY DUTY MIS STRIPS	OTC
EQL PLASTIC MIS STRIPS	OTC
EQL SHEER MIS SPOTS	OTC
EQL SHEER MIS STRIPS	OTC
EQL STRIPS MIS	OTC
FABRIC BANDG MIS ASSORTED	OTC
FABRIC BANDG MIS FLEXIBLE	OTC
FIRST AID MIS FLEX FAB	OTC
FLEX BANDAGE MIS	OTC
FLEX BANDAGE MIS FABRIC	OTC
GNP BANDAGES MIS	OTC
GNP BANDAGES MIS 1"X3"	OTC
GNP BANDAGES MIS 2"X4"	OTC
GNP BANDAGES MIS 3/4"X3"	OTC
GNP BANDAGES MIS ASSORTED	OTC
GNP BANDAGES MIS CLEAR	OTC
GNP BANDAGES MIS SHEER	OTC
GNTL ADHESVE MIS BNDG XL	OTC
HEAVY DUTY MIS BANDAGES	OTC
HEAVY DUTY MIS CLR&TGH	OTC
HEAVY DUTY MIS FAB BAND	OTC
HM BUTTERFLY MIS CLOSURES	OTC
HYPO-ALLERG MIS BANDAGE	OTC
LEUKOSTRIP MIS 1/2"X4"	OTC
LEUKOSTRIP MIS 1/4"X3"	OTC

Drug Name	Requirements/Limits
LEUKOSTRIP MIS 1/4"X4"	OTC
LEUKOSTRIP MIS 1/8X1.5"	OTC
NEXCARE TATT MIS BANDAGES	OTC
NEXCARE WATR MIS PRF BAND	OTC
PEANUTS MIS BANDAGES	OTC
PLAS BANDAGE MIS 3/4"X3"	OTC
PLASTC BANDG MIS 3/4"	OTC
PROXI-STRIP MIS 1/4"X4"	OTC
PROXI-STRIPS MIS 1/2"X4"	OTC
RA ADHESIVE MIS BANDAGES	OTC
SHEER ADHESI MIS 3/4"X3"	OTC
SHEER BANDGE MIS	OTC
SHEER BANDGE MIS 1"	OTC
SHEER BANDGE MIS EX-LARGE	OTC
SHR BANDAGES MIS	OTC
SHR BANDAGES MIS ASSORTED	OTC
SM BANDAGES MIS ANTIBACT	OTC
SM BANDAGES MIS CLEAR	OTC
SM BANDAGES MIS CLR SPOT	OTC
SM BANDAGES MIS FAB 3/4"	OTC
SM BANDAGES MIS FAB XL	OTC
SM BANDAGES MIS FLEXIBLE	OTC
SM BANDAGES MIS FOAM	OTC
SM BANDAGES MIS FOAM XL	OTC
SM BANDAGES MIS PLASTIC	OTC
SM BANDAGES MIS SHEER	OTC
SM BANDAGES MIS SHEER XL	OTC
SM BANDAGES MIS STRNG ST	OTC
SM BANDAGES MIS WTRSHELD	OTC
SM KNUCKLE/ MIS FINGERTP	OTC
SM STRONG MIS STRIPS	OTC
SM STURDY MIS STRIP	OTC
SOFT 'N FLEX MIS	OTC
SORESPOT MIS BANDAGES	OTC
STRONG STRIP MIS WATERPRF	OTC
SURESEAL MIS EX LARGE	OTC
SURESEAL MIS K	OTC
SURESEAL MIS LARGE	OTC
VARIETY PACK MIS BANDAGES	OTC
WATERPROOF MIS BANDAGES	OTC
WTERPRF BAND MIS CLEAR	OTC
ADHESIVE PAD 2"X3"	OTC
ADHESIVE PAD 3"X4"	OTC

Drug Name	Requirements/Limits
ADHESIVE PAD 4"X4"	OTC
ADHESIVE PAD 6"X6"	OTC
ADHESIVE PAD PAD 2.25"X3"	OTC
ADHESIVE PAD PAD 3"X4"	OTC
ADHESIVE PAD PAD ANTIBACT	OTC
BAND-AID PAD 2"X3"	OTC
BAND-AID PAD 3"X4"	OTC
BAND-AID PAD ADHESIVE	OTC
EASY RELEASE PAD NONSTICK	OTC
FIRST AID NO PAD STICK	OTC
J & J ADHES PAD LARGE	OTC
MOLESKIN PAD FOAM	OTC
POLYMEM DOT PAD 2" X 2"	OTC
RA SHEER ADH PAD LARGE	OTC
SM ADHESIVE PAD 2"X3"	OTC
SM ADHESIVE PAD 3"X4"	OTC
WATERPROOF PAD 3"X4"	OTC

CONTRACEPTIVES

CONDOMS MIS	QL (12 condoms every 1 day), OTC; \$0
AIMSCO MIS LUBRICAT	QL (12 condoms every 1 day), OTC; \$0
COLOR CONDOM MIS + LUBE	QL (12 condoms every 1 day), OTC; \$0
DUREX EXTRA MIS SENSITIV	QL (12 condoms every 1 day), OTC; \$0
FANTASY LUBR MIS	QL (12 condoms every 1 day), OTC; \$0
FANTASY LUBR MIS COLORS	QL (12 condoms every 1 day), OTC; \$0
FANTASY LUBR MIS SPERMICI	QL (12 condoms every 1 day), OTC; \$0
FANTASY MIS LUBRICAT	QL (12 condoms every 1 day), OTC; \$0
KAMELEON LUB MIS COLORS	QL (12 condoms every 1 day), OTC; \$0
KAMELEON MIS TRI-COLR	QL (12 condoms every 1 day), OTC; \$0
KIMONO COLOR MIS	QL (12 condoms every 1 day), OTC; \$0
KIMONO MAXX MIS LG FLARE	QL (12 condoms every 1 day), OTC; \$0

Drug Name	Requirements/Limits
KIMONO MICRO MIS THIN +	QL (12 condoms every 1 day), OTC; \$0
KIMONO MICRO MIS THIN PLS	QL (12 condoms every 1 day), OTC; \$0
KIMONO MIS LUBRICAT	QL (12 condoms every 1 day), OTC; \$0
KIMONO MIS SENSATIO	QL (12 condoms every 1 day), OTC; \$0
KIMONO PLUS MIS LUBRICAT	QL (12 condoms every 1 day), OTC; \$0
KIMONO PLUS MIS SPERMICI	QL (12 condoms every 1 day), OTC; \$0
KIMONO PS MIS LUBRICAT	QL (12 condoms every 1 day), OTC; \$0
KIMONO PS MIS PLUS	QL (12 condoms every 1 day), OTC; \$0
KIMONO SENSА MIS PLUS	QL (12 condoms every 1 day), OTC; \$0
KIMONO SPEC MIS	QL (12 condoms every 1 day), OTC; \$0
MAXX MIS LUBRICAT	QL (12 condoms every 1 day), OTC; \$0
MAXX PLUS MIS SPERMICI	QL (12 condoms every 1 day), OTC; \$0
NATURAL COND MIS + LUBE	QL (12 condoms every 1 day), OTC; \$0
REALITY MIS LUBRICAT	QL (12 condoms every 1 day), OTC; \$0
REALITY ULTR MIS TEXTURED	QL (12 condoms every 1 day), OTC; \$0
REALITY ULTR MIS THIN	QL (12 condoms every 1 day), OTC; \$0
TRUE COVER MIS CONDOM	QL (12 condoms every 1 day), OTC; \$0
TRUSTEX LUBR MIS ASSORTED	QL (12 condoms every 1 day), OTC; \$0
TRUSTEX LUBR MIS BANANA	QL (12 condoms every 1 day), OTC; \$0
TRUSTEX LUBR MIS CHOC	QL (12 condoms every 1 day), OTC; \$0
TRUSTEX LUBR MIS COLA	QL (12 condoms every 1 day), OTC; \$0
TRUSTEX LUBR MIS COLORS	QL (12 condoms every 1 day), OTC; \$0

Drug Name	Requirements/Limits
TRUSTEX LUBR MIS EX LARGE	QL (12 condoms every 1 day), OTC; \$0
TRUSTEX LUBR MIS EX STR	QL (12 condoms every 1 day), OTC; \$0
TRUSTEX LUBR MIS GRAPE	QL (12 condoms every 1 day), OTC; \$0
TRUSTEX LUBR MIS MINT	QL (12 condoms every 1 day), OTC; \$0
TRUSTEX LUBR MIS RIB/STUD	QL (12 condoms every 1 day), OTC; \$0
TRUSTEX LUBR MIS SPERMICI	QL (12 condoms every 1 day), OTC; \$0
TRUSTEX LUBR MIS STRWBRY	QL (12 condoms every 1 day), OTC; \$0
TRUSTEX LUBR MIS VANILLA	QL (12 condoms every 1 day), OTC; \$0
TRUSTEX/RIA MIS LUBRICAT	QL (12 condoms every 1 day), OTC; \$0
TRUSTEX/RIA MIS SPERMICI	QL (12 condoms every 1 day), OTC; \$0
TRUSTX NON-9 MIS RIB/STUD	QL (12 condoms every 1 day), OTC; \$0
KIMONO MICRO MIS THIN	QL (12 condoms every 1 day), OTC; \$0
TRUSTEX MIS BANANA	QL (12 condoms every 1 day), OTC; \$0
TRUSTEX MIS CHOCOLAT	QL (12 condoms every 1 day), OTC; \$0
TRUSTEX MIS FLAVORS	QL (12 condoms every 1 day), OTC; \$0
TRUSTEX MIS MINT	QL (12 condoms every 1 day), OTC; \$0
TRUSTEX MIS STRWBRY	QL (12 condoms every 1 day), OTC; \$0
TRUSTEX MIS VANILLA	QL (12 condoms every 1 day), OTC; \$0
TRUSTEX/RIA MIS NON-LUB	QL (12 condoms every 1 day), OTC; \$0
DUREX MIS REALFEEL	QL (12 condoms every 1 day), OTC; \$0
FC2 FEMALE MIS CONDOM	QL (12 condoms every 1 day), OTC; \$0
OMNIFLEX DPR	QL (1 box every year); \$0
CAYA DPR	QL (1 box every year); \$0

\$0 - Zero Dollar Copay **AGE** - Age Limit **GNDR** - Gender Edit **OTC** - Over the counter **PA** - Prior Authorization **QL** - Quantity Limits **SP** - Specialty **ST** - Step Therapy

Drug Name	Requirements/Limits
WIDE-SEAL DPR KIT 60	QL (1 box every year); \$0
WIDE-SEAL DPR KIT 65	QL (1 box every year); \$0
WIDE-SEAL DPR KIT 70	QL (1 box every year); \$0
WIDE-SEAL DPR KIT 75	QL (1 box every year); \$0
WIDE-SEAL DPR KIT 80	QL (1 box every year); \$0
WIDE-SEAL DPR KIT 85	QL (1 box every year); \$0
WIDE-SEAL DPR KIT 90	QL (1 box every year); \$0
WIDE-SEAL DPR KIT 95	QL (1 box every year); \$0

MISC. DEVICES

ALCOHOL PAD 70%	QL (400 pads every 25 days), OTC
ALCOHOL PAD PREP	QL (400 pads every 25 days), OTC
ALCOHOL PADS PAD 70%	QL (400 pads every 25 days), OTC
ALCOHOL PREP PAD	QL (400 pads every 25 days), OTC
ALCOHOL PREP PAD 70%	QL (400 pads every 25 days), OTC
ALCOHOL PREP PAD MED 70%	QL (400 pads every 25 days), OTC
ALCOHOL PREP PAD PADS 70%	QL (400 pads every 25 days), OTC
ALCOHOL SWAB PAD	QL (400 pads every 25 days), OTC
ALCOHOL SWAB PAD 70%	QL (400 pads every 25 days), OTC
ALCOHOL SWAB PAD EX-THICK	QL (400 pads every 25 days), OTC
AUM ALCOHOL PAD PREP 70%	QL (400 pads every 25 days), OTC
BD SWAB REG PAD SNGL USE	QL (400 pads every 25 days), OTC
CARETOUCH PAD ALCOHOL	QL (400 pads every 25 days), OTC
COMFRT TOUCH PAD ALC PREP	QL (400 pads every 25 days), OTC
CURITY PREP PAD ALCOHOL	QL (400 pads every 25 days), OTC
FIFTY50 PREP PAD PADS	QL (400 pads every 25 days), OTC
GNP ALCOHOL PAD SWABS	QL (400 pads every 25 days), OTC

Drug Name	Requirements/Limits
HM STERILE PAD ALCHOL	QL (400 pads every 25 days), OTC
INCONTROL PAD ALCOHOL	QL (400 pads every 25 days), OTC
PREP PADS PAD	QL (400 pads every 25 days), OTC
PURE COMFORT PAD	QL (400 pads every 25 days), OTC
QC ALCOHOL PAD SWABS	QL (400 pads every 25 days), OTC
RA ALCOHOL PAD SWABS	QL (400 pads every 25 days), OTC
REALITY SWAB PAD	QL (400 pads every 25 days), OTC
SAPS HEALTH PAD ALCOHOL	QL (400 pads every 25 days), OTC
SB ALCOHOL PAD PREP	QL (400 pads every 25 days), OTC
SM ALCOHOL PAD PREP	QL (400 pads every 25 days), OTC
TRUE COMFORT PAD PRO	QL (400 pads every 25 days), OTC
ULTICARE PAD ALCOHOL	QL (400 pads every 25 days), OTC
ULTILET PAD ALCOHOL	QL (400 pads every 25 days), OTC
WEBCOL PREP PAD LARGE	QL (400 pads every 25 days), OTC
WEBCOL PREP PAD MEDIUM	QL (400 pads every 25 days), OTC
ZEV RX STERIL PAD ALCHOL	QL (400 pads every 25 days), OTC

PHARMACEUTICAL ADJUVANTS

LIQUID VEHICLES

<i>glycine diluent for injection</i>	SP, PA
PH 12 STERIL SOL FLOLAN	SP, PA
<i>water for injection</i>	
BACTER WATER INJ BENZ ALC	
<i>bacteriostatic sodium chloride inj soln 0.9%</i>	
SALINE/PHENO SOL	

MISCELLANEOUS THERAPEUTIC CLASSES

IMMUNOMODULATORS

THALOMID CAP 50MG	SP, PA, QL (1 cap every 1 day)
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\$0 - Zero Dollar Copay **AGE** - Age Limit **GNDR** - Gender Edit **OTC** - Over the counter **PA** - Prior Authorization **QL** - Quantity Limits **SP** - Specialty **ST** - Step Therapy

Drug Name	Requirements/Limits
THALOMID CAP 100MG	SP, PA, QL (1 cap every 1 day)
<i>lenalidomide caps 2.5 mg</i>	SP, PA, QL (1 cap every 1 day)
REVLIMID CAP 2.5MG	SP, PA, QL (1 cap every 1 day)
<i>lenalidomide cap 5 mg</i>	SP, PA, QL (1 cap every 1 day)
REVLIMID CAP 5MG	SP, PA, QL (1 cap every 1 day)
<i>lenalidomide cap 10 mg</i>	SP, PA, QL (1 cap every 1 day)
REVLIMID CAP 10MG	SP, PA, QL (1 cap every 1 day)
<i>lenalidomide cap 15 mg</i>	SP, PA, QL (1 cap every 1 day)
REVLIMID CAP 15MG	SP, PA, QL (1 cap every 1 day)
<i>lenalidomide cap 20 mg</i>	SP, PA, QL (42 caps every 28 days)
REVLIMID CAP 20MG	SP, PA, QL (42 caps every 28 days)
<i>lenalidomide cap 25 mg</i>	SP, PA, QL (42 caps every 28 days)
REVLIMID CAP 25MG	SP, PA, QL (42 caps every 28 days)

IMMUNOSUPPRESSIVE AGENTS

<i>cyclosporine cap 25 mg</i>	SP
<i>cyclosporine cap 100 mg</i>	SP
SANDIMMUNE SOL 100MG/ML	SP
<i>cyclosporine modified cap 25 mg</i>	SP
<i>gengraf cap 25mg</i>	SP
<i>cyclosporine modified cap 50 mg</i>	SP
<i>cyclosporine modified cap 100 mg</i>	SP
<i>gengraf cap 100mg</i>	SP
<i>cyclosporine modified oral soln 100 mg/ml</i>	SP
<i>gengraf sol 100mg/ml</i>	SP
<i>mycophenolate mofetil cap 250 mg</i>	SP
<i>mycophenolate mofetil tab 500 mg</i>	SP
<i>mycophenolate mofetil for oral susp 200 mg/ml</i>	SP
<i>sirolimus tab 0.5 mg</i>	SP
<i>sirolimus tab 1 mg</i>	SP
<i>sirolimus tab 2 mg</i>	SP
<i>sirolimus oral soln 1 mg/ml</i>	SP
<i>tacrolimus cap 0.5 mg</i>	SP
<i>tacrolimus cap 1 mg</i>	SP
<i>tacrolimus cap 5 mg</i>	SP
UPLIZNA SOL 100MG	SP, PA
ENSPRYNG INJ	SP, PA, QL (1 syringe every 28 days)
<i>azathioprine tab 50 mg</i>	
<i>azasan tab 75 mg</i>	

Drug Name	Requirements/Limits
azathioprine tab 75 mg	
azasan tab 100mg	
azathioprine tab 100 mg	

POTASSIUM REMOVING AGENTS

sps sus 15gm/60	
LOKELMA PAK 5GM	
LOKELMA PAK 10GM	

PIK3CA-RELATED OVERGROWTH SPECTRUM (PROS) AGENTS

VIJOICE TAB 50MG	SP, PA, QL (1 tab every 1 day)
VIJOICE TAB 125MG	SP, PA, QL (1 tab every 1 day)
VIJOICE TAB 250MG	SP, PA, QL (2 tabs every 1 day)

Index

1	
12hr allergy tab 60mg	57
12hr deconge tab 120mg cr	59
1ST TIER UNI MIS 31GX5MM	167
1ST TIER UNI MIS 31GX8MM	169
1ST TIER UNI MIS 32GX4MM	171
2	
24hr allergy tab	64
24hr allergy tab 180mg	57
24 hr nasal spr allergy	60
2 CPAP HOSE MIS HANGER	173
3	
3 day vaginl cre 2%	88
3 day vaginal cre 4%	89
3-in-1 clean liq 5%	152
5	
50+ adult cap eye hlth	116
6	
600+d3 tab cal/vitd	137
8	
8 hour pain tab 650mg	96
8hr arthrits tab 650mg er	96
8 hr arthrts tab 650mg	96
8hr pain er tab 650mg	96
8hr pain rel tab 650mg	96
8 hr pain tab 650mg	96
8 hr pain tab 650mg er	96
A	
a&d oin	161
A+D TREAT CRE	160
abacavir sulfate-lamivudine tab 600-300 mg	21
abacavir sulfate soln 20 mg/ml (base equiv)	21
abacavir sulfate tab 300 mg (base equiv)	21
abatinex cap 680mg	77
ABC COMPLETE TAB ADULT	118
ABC COMPLETE TAB MENS	118
ABC COMPLETE TAB MENS 50+	118
ABC COMPLETE TAB SENIOR	118
ABC COMPLETE TAB WOMEN	118
abiraterone acetate tab 250 mg	26
acarbose tab 100 mg	38
acarbose tab 25 mg	38
acarbose tab 50 mg	38
accutane cap 10mg	153
accutane cap 20mg	153
accutane cap 30mg	153
accutane cap 40mg	153
ACE AERO CLD MIS ENHANCER	172
acebutolol hcl cap 200 mg	43
acebutolol hcl cap 400 mg	44
acetamin er tab 650mg	96
acetamin liq 500/15ml	97
acetaminophe liq 160/5ml	96
acetaminophen chew tab 160 mg	96
acetaminophen liquid 160 mg/5ml	97
acetaminophen soln 160 mg/5ml	97
acetaminophen suppos 120 mg	97
acetaminophen suppos 650 mg	97
acetaminophen susp 160 mg/5ml	97
acetaminophen tab 325 mg	95
acetaminophen tab 500 mg	95
acetaminophen tab er 650 mg	96
acetaminophen w/ codeine soln 120-12 mg/5ml	99
acetaminophen w/ codeine tab 300-15 mg	99
acetaminophen w/ codeine tab 300-30 mg	99
acetaminophen w/ codeine tab 300-60 mg	99
acetaminophe tab 160mg	97
acetaminophn tab 500mg	95
acetazolamide cap er 12hr 500 mg	49
acetazolamide tab 125 mg	49
acetazolamide tab 250 mg	49
acetic acid otic soln 2%	149
acetic acid vaginal solution	89
acid control tab 10mg	83
acid control tab 20mg	83
acid gone chw	80
acid gone sus	81
acidoph/prob tab formula	78
acidophilus cap 100mg	77
acidophilus cap 10mg	77

<i>acidophilus cap ex st</i>	77	ACTRIVIT LIQ 800-15-1.....	113
<i>acidophilus cap probioti</i>	77	ACT SPORT FM MIS 1-1/8	195
<i>acidophilus tab probiotc</i>	78	ACT SPORT FM MIS ASSORTED	195
<i>acidophilus tab probioti</i>	78	ACT SPORT FM MIS KNEE/ELB	196
ACIDOPHILUS WAF	78	<i>acyclovir cap 200 mg</i>	22
<i>acid reducer cap 15mg</i>	84	<i>acyclovir susp 200 mg/5ml</i>	22
<i>acid reducer cap 20.6mgdr</i>	84	<i>acyclovir tab 400 mg</i>	22
<i>acid reducer tab 10mg</i>	83	<i>acyclovir tab 800 mg</i>	22
<i>acid reducer tab 200mg</i>	83	ADALIMU-ADAZ INJ 40/0.4ML	102
<i>acid reducer tab 20mg</i>	83	ADALIMU-FKJP KIT 20/0.4ML.....	103
<i>acid reducer tab 20mg dr</i>	84	ADALIMU-FKJP KIT 40/0.8ML	103
<i>acne cleanse cre cvs cont</i>	152	<i>adefovir dipivoxil tab 10 mg</i>	22
<i>acne-clear gel 10%</i>	152	ADEK CHW PLUS ZN	126
<i>acne control cre clns 10%</i>	152	ADH BANDAGE MIS ANTIBACT	196
<i>acne foaming liq wash 10%</i>	152	ADH BANDAGE MIS CLEAR.....	196
<i>acne max str cre 10%</i>	152	ADH BANDAGE MIS FLEXIBLE	196
<i>acne medicat gel 10%</i>	152	ADH BANDAGE MIS FOAM.....	196
<i>acne medicat gel 2.5%</i>	152	ADH BANDAGE MIS FOAM TOE	196
<i>acne medicat gel 5%</i>	152	ADH BANDAGE MIS HEALTH.....	196
<i>acne treatmn gel 10%</i>	152	ADH BANDAGE MIS HYPO-ALL.....	196
ACT BRIGHTS MIS BANDAGES.....	195	ADH BANDAGE MIS PLASTIC	196
<i>act dry loz mouth</i>	151	ADH BANDAGE MIS RETENTIO.....	196
ACT DRY MOUT GUM MOISTURI.....	151	ADH BANDAGE MIS SHEER.....	196
ACTEEV PROTE MIS MASK.....	179	ADH BANDAGE MIS STRONG	196
ACTHAR INJ 80UNIT	41	ADH BANDAGE MIS WTR SHLD	196
<i>actical cap</i>	115	ADHESIVE PAD 2.....	199
ACTICARNITIN SOL SF.....	140	ADHESIVE PAD 3.....	199
ACTIFLOVIT TAB EAR HEAL	134	ADHESIVE PAD 4.....	200
ACTI-LANCE MIS 28G	181	ADHESIVE PAD 6.....	200
ACTI-LANCE MIS LITE 28G.....	181	ADHESIVE PAD MIS LARGE.....	196
ACTI-LANCE MIS SPEC 17G	181	ADHESIVE PAD MIS MEDIUM.....	196
ACTI-LANCE MIS UNIV 23G	181	ADHESIVE PAD PAD 2.25.....	200
ACTITROM CAP.....	113	ADHESIVE PAD PAD 3	200
ACTITROM-D CAP	113	ADHESIVE PAD PAD ANTIBACT	200
ACTIVE 55 LIQ PLUS	128	<i>adlt multivi chw gummies</i>	126
ACTIVESSENTI PAK ONCOPLEX	129	ADLT ONE DLY CHW GUMMIES	126
ACTIVESSENTI PAK WOMEN	129	ADMELOG INJ 100U/ML.....	36
ACTIVESSENT PAK	128	ADMELOG SOLO INJ 100U/ML	36
ACTIVITY PCH MIS.....	173	ADRENAL CAP MANAGER.....	132
ACTIVNUTRIEN CAP.....	116	ADRENALIV CAP	132
ACTIVNUTRIEN CAP PERFORMA.....	116	ADRENAL TAB CALM	133
ACTIVNUTRIEN CAP W/O IRON	116	ADRENOID CAP	132
ACTIVNUTRIEN CHW	130	ADULT 50+ CAP EYE HLTH	116
ACTIVNUT W/O POW COP/IRON.....	128	ADULT 50+ CAP OCUVITE.....	116

ADULT MASK MIS LARGE	173	AIMSCO TWIST MIS 33G	181
<i>advanced chw multi ea</i>	126	<i>airavite tab</i>	144
ADVANCED C TAB PLUS.....	113	<i>airborne chw</i>	126
<i>advanced eye cap health</i>	116	AIRBORNE CHW	126
<i>advanced tab formula</i>	118	AIRBORNE CHW CITRUS	126
ADV CATE SAFE MIS LANC 26G.....	181	<i>airborne chw gummies</i>	126
ADV HEALING MIS BANDAGES	196	<i>airborne chw immune</i>	126
<i>advil jr str chw 100mg</i>	101	<i>airborne chw kids</i>	126
<i>advil jr st tab 100mg</i>	100	AIRBORNE CHW KIDS	126
<i>advil minis cap 200mg</i>	100	AIRBORNE CHW VERY BER	126
ADVOCATE MIS LANC 30G	181	AIRS DISPOSA MIS NEBULIZR.....	176
ADVOCATE MIS LANCETS	181	<i>airshield chw</i>	126
AE EZ TWIST MIS TUBING.....	173	AIRSHIELD CHW IMMUNITY	126
AE MASK MIS LARGE.....	173	AIRS PEDIATR MIS MASK	173
AE MASK MIS MEDIUM	173	AIR TUBE MIS /PLUGS	173
AE MASK MIS SMALL	173	<i>al12 lot 12%</i>	161
AERCHMBR PLS MIS INTERMED.....	174	<i>ala-cort cre 1%</i>	159
AERCHMBR PLS MIS LRG MASK.....	174	<i>alavert d-12 tab 5-120mg</i>	63
AERCHMBR PLS MIS MED MASK.....	174	<i>alavert tab 10mg</i>	58
AERCHMBR PLS MIS SM MASK.....	174	<i>alaway child dro 0.035%op</i>	149
AERCHMBR Z- MIS STAT PLS	174	<i>alaway dro 0.035%op</i>	149
AERIVA MIS CON/NEB	176	ALBUTEROL NEB 0.5%	67
AEROCHAMBER MIS CHAMBER	174	<i>albuterol sulfate inhal aero 108 mcg/act</i> <i>(90mcg base equiv)</i>	67
AEROCHAMBER MIS FLOSIGNA	174	<i>albuterol sulfate soln nebu 0.083% (2.5</i> <i>mg/3ml)</i>	67
AEROCHAMBER MIS HOLDING.....	174	<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>	67
AEROCHAMBER MIS MTHPIECE.....	174	<i>albuterol sulfate soln nebu 0.63 mg/3ml</i> <i>(base equiv)</i>	67
AEROCHAMBER MIS MV	174	<i>albuterol sulfate soln nebu 1.25 mg/3ml</i> <i>(base equiv)</i>	67
AEROCHAMBER MIS PLUS.....	174	<i>albuterol sulfate syrup 2 mg/5ml</i>	67
AEROECLIPSE MIS II	176	<i>albuterol sulfate tab 2 mg</i>	67
AEROECLIPSE MIS II NEB.....	176	<i>albuterol sulfate tab 4 mg</i>	67
AEROECLIPSE MIS II TUBE.....	176	<i>alclometasone dipropionate cream 0.05%</i>	158
AEROECLIPSE MIS XL.....	176	<i>alclometasone dipropionate oint 0.05%</i>	158
AEROSOL MASK MIS ADULT.....	173	ALCOHOL PAD 70%	203
AEROTRC PLUS MIS	173	ALCOHOL PAD PREP	203
AEROVENT MIS PLUS	175	ALCOHOL PADS PAD 70%	203
<i>afirmelle tab 0.1-0.02</i>	33	ALCOHOL PREP PAD	203
<i>afrin saline spr 0.65%</i>	60	ALCOHOL PREP PAD 70%.....	203
<i>aftera tab 1.5mg</i>	31	ALCOHOL PREP PAD MED 70%	203
<i>afterpill tab 1.5mg</i>	31		
AGAMATRIX MIS 33G.....	181		
AIMOVIG INJ 140MG/ML.....	104		
AIMOVIG INJ 70MG/ML.....	104		
AIMSCO MIS LUBRICAT	200		
AIMSCO TWIST MIS 32G	181		

ALCOHOL PREP PAD PADS 70%.....	203	<i>allerclear d tab 5-120mg</i>	63
ALCOHOL SWAB PAD	203	<i>allerclear tab 10mg</i>	58
ALCOHOL SWAB PAD 70%	203	<i>aller-ease tab 180mg</i>	57
ALCOHOL SWAB PAD EX-THICK	203	<i>aller-fex tab 180mg</i>	57
<i>alendronate sodium tab 10 mg</i>	40	<i>aller-flo spr 50mcg</i>	60
<i>alendronate sodium tab 35 mg</i>	40	<i>allergy/cong tab 5-120mg</i>	63
<i>alendronate sodium tab 5 mg</i>	40	<i>allergy/cong tab 60-120mg</i>	64
<i>alendronate sodium tab 70 mg</i>	40	<i>allergy 24hr tab 10mg</i>	56
<i>aler-cap cap 25mg</i>	54	<i>allergy 24hr tab 180mg</i>	57
<i>alertab tab 25mg</i>	54	<i>allergy cap 25mg</i>	54
<i>aleve arthri gel pain 1%</i>	156	<i>allergy chil chw 12.5mg</i>	55
<i>alfuzosin hcl tab er 24hr 10 mg</i>	90	<i>allergy chld liq 12.5/5ml</i>	55
ALIVE 50+ TAB ENERGY	118	<i>allergy chld sol 1mg/ml</i>	57
ALIVE DAILY TAB WOMENS.....	118	<i>allergy chld sol 5mg/5ml</i>	58
ALIVE DIABET TAB MULTIVIT	118	<i>allergy chld sus 30mg/5ml</i>	58
ALIVE ENERGY TAB WOMENS.....	118	<i>allergy d24 tab 180-240</i>	64
ALIVE GUMMIE CHW CHILDREN.....	130	<i>allergy-d tab 12 hour</i>	64
ALIVE HAIR CHW SKN/NAIL	126	<i>allergy d tab 5-120mg</i>	63
ALIVE IMMUNE CAP HEALTH	116	<i>allergy-d tab 5-120mg</i>	63
ALIVE LIQ MULT-VIT	128	<i>allergy d tab 60-120mg</i>	64
ALIVE MENS CHW 50+	126	<i>allergy liq 12.5/5ml</i>	55
ALIVE MENS CHW GUMMY	126	<i>allergy med cap 25mg</i>	54
ALIVE MENS TAB	118	<i>allergy med liq 12.5/5ml</i>	55
ALIVE MENS TAB COMPLETE.....	118	<i>allergy nasa spr 24hr</i>	60
ALIVE MULTI CHW CHILDRNS.....	130	<i>allergy nasa spr 50mcg</i>	60
ALIVE MULTI CHW VITAMIN	126	<i>allergy rel/ tab deconges</i>	63
ALIVE WOMENS CHW 50+	126	<i>allergy rel cap 10mg</i>	56
ALIVE WOMENS CHW GUMMY	126	<i>allergy rel cap 25mg</i>	54
ALIVE WOMENS TAB 50+ COMP	118	<i>allergy relf cap 10mg</i>	58
<i>alka-seltzer chw 750mg</i>	80	<i>allergy relf cap 25mg</i>	54
<i>allbee plus tab vit c</i>	110	<i>allergy relf liq 12.5/5ml</i>	55
<i>all day allg cap 10mg</i>	56	<i>allergy relf liq 25/10ml</i>	55
<i>all day allg sol 1mg/ml</i>	57	<i>allergy relf liq 50/20ml</i>	55
<i>all day allg sol 5mg/5ml</i>	57	<i>allergy relf sol 1mg/ml</i>	57
<i>all-day allg sol 5mg/5ml</i>	57	<i>allergy relf sol 5mg/5ml</i>	57, 58
<i>all day allg tab 10mg</i>	56	<i>allergy relf spr 50mcg</i>	60
<i>all day alrg tab 5-120mg</i>	63	<i>allergy relf tab /nsl dec</i>	63
<i>all day pain tab 220mg</i>	101	<i>allergy relf tab 10-240mg</i>	63
<i>all day relf tab 220mg</i>	101	<i>allergy relf tab 10mg</i>	58
ALLEGRA ALRG TAB 30MG	58	<i>allergy relf tab 12mg cr</i>	54
<i>allegra hive tab 180mg</i>	57	<i>allergy relf tab 180mg</i>	57
<i>aller/conges tab 10-240mg</i>	63	<i>allergy relf tab 25mg</i>	54
<i>aller-chlor tab 4mg</i>	53	<i>allergy relf tab 4mg</i>	53
<i>allerclear d tab 10-240mg</i>	63	<i>allergy relf tab 5/120mg</i>	63

<i>allergy relf tab 5-120mg</i>	63	<i>alogliptin-metformin hcl tab 12.5-1000 mg</i>	38
<i>allergy relf tab 5mg</i>	56	<i>alogliptin-metformin hcl tab 12.5-500 mg</i>	38
<i>allergy relf tab 60mg</i>	57	<i>alogliptin-pioglitazone tab 12.5-30 mg</i>	38
<i>allergy relf tab d12</i>	63	<i>alogliptin-pioglitazone tab 25-15 mg</i>	38
<i>allergy relf tab d-24</i>	63	<i>alogliptin-pioglitazone tab 25-30 mg</i>	38
<i>allergy relf tab deconges</i>	64	<i>alogliptin-pioglitazone tab 25-45 mg</i>	38
<i>allergy reli chw cetirizi</i>	57	<i>alophen tab 5mg ec</i>	70
<i>allergy reli tab 10mg</i>	56	ALPHA BETIC TAB	118
<i>allergy reli tab 60-120mg</i>	64	<i>altalube oin</i>	147
<i>allergy reli tab d</i>	64	<i>altamist spr 0.65%</i>	60
<i>allergy rel liq 12.5/5ml</i>	55	<i>altarussin liq 100/5ml</i>	61
<i>allergy rel sol 1mg/ml</i>	57	<i>altarussin syp -pe</i>	64
<i>allergy rel tab 10mg</i>	56	<i>altarussn dm syp 100-10/5</i>	66
<i>allergy rlf chw 5mg</i>	58	<i>altavera tab</i>	33
<i>allergy rlf liq 50/20ml</i>	55	ALTERA MIS NEBULIZE	176
<i>allergy rlf liq children</i>	58	ALTERA NEB MIS HANDSET	173
<i>allergy rlf sus 30/5ml</i>	58	<i>alum & mag hydroxide-simethicone susp</i> <i>200-200-20 mg/5ml</i>	81
<i>allergy rlf tab 10mg</i>	56	<i>alum & mag hydroxide-simethicone susp</i> <i>400-400-40 mg/5ml</i>	81
<i>allergy tab 10mg</i>	56	ALVESCO AER 160MCG.....	68
<i>allergy tab 180mg</i>	57	ALVESCO AER 80MCG	68
<i>allergy tab 4mg</i>	53	<i>alyacen tab 1/35</i>	33
<i>aller-tec d tab 5-120mg</i>	63	<i>alyacen tab 7/7/7</i>	35
<i>aller-tec sol 1mg/ml</i>	57	<i>amabelz tab 0.5-0.1</i>	30
<i>aller-tec tab 10mg</i>	56	<i>amantadine hcl cap 100 mg</i>	105
ALLERWELL TAB ALLERGY	133	<i>amantadine hcl soln 50 mg/5ml</i>	105
<i>allogy relief tab 10mg</i>	56	<i>amantadine hcl tab 100 mg</i>	105
<i>allopurinol tab 100 mg</i>	104	<i>ambrisentan tab 10 mg</i>	52
<i>allopurinol tab 300 mg</i>	104	<i>ambrisentan tab 5 mg</i>	52
ALL PURPOSE MIS MASK	179	<i>amiloride & hydrochlorothiazide tab 5-50</i> <i>mg</i>	50
<i>allrgy/nasal tab 10-240mg</i>	64	<i>amiloride hcl tab 5 mg</i>	50
<i>allrgy d-12 tab 5-120mg</i>	63	<i>amiodarone hcl tab 200 mg</i>	46
<i>allrgy relf tab 12.5mg</i>	56	<i>amlactin lot daily</i>	161
<i>allrgy relf tab 5-120mg</i>	63	<i>amlodipine besylate-benazepril hcl cap 10-</i> <i>20 mg</i>	48
<i>allrgy rlf d tab 10-240mg</i>	64	<i>amlodipine besylate-benazepril hcl cap 10-</i> <i>40 mg</i>	48
<i>allrgy rlf-d tab 10-240mg</i>	64	<i>amlodipine besylate-benazepril hcl cap 2.5-</i> <i>10 mg</i>	48
<i>allrgy rlf-d tab 5-120mg</i>	63	<i>amlodipine besylate-benazepril hcl cap 5-</i> <i>10 mg</i>	48
<i>almacone dbl sus strength</i>	81		
<i>alogliptin benzoate tab 12.5 mg (base equiv)</i>	38		
<i>alogliptin benzoate tab 25 mg (base equiv)</i>	38		
<i>alogliptin benzoate tab 6.25 mg (base</i> <i>equiv)</i>	38		

<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	48	<i>amoxicillin & k clavulanate tab 875-125 mg</i>	17
<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	48	<i>ampicillin cap 500 mg</i>	17
<i>amlodipine besylate tab 10 mg (base equivalent)</i>	44	<i>anagrelide hcl cap 0.5 mg</i>	145
<i>amlodipine besylate tab 2.5 mg (base equivalent)</i>	44	<i>anagrelide hcl cap 1 mg</i>	145
<i>amlodipine besylate tab 5 mg (base equivalent)</i>	44	<i>anastrozole tab 1 mg</i>	26
<i>amnestem cap 10mg</i>	153	ANIMAL PRINT MIS STRIPS.....	196
<i>amnestem cap 20mg</i>	153	<i>animal shape chw complete</i>	131
<i>amnestem cap 40mg</i>	153	ANORO ELLIPT AER 62.5-25.....	68
<i>amoryn mood cap booster</i>	116	<i>antacid/gas sus rel max</i>	82
<i>amoxicillin (trihydrate) cap 250 mg</i>	17	<i>antacid/sime sus ds</i>	82
<i>amoxicillin (trihydrate) cap 500 mg</i>	17	<i>antacid & sus gas relf</i>	81, 82
<i>amoxicillin (trihydrate) chew tab 125 mg</i> ...17		<i>antacid chw</i>	80
<i>amoxicillin (trihydrate) chew tab 250 mg</i> ..17		<i>antacid chw 1000mg</i>	80
<i>amoxicillin (trihydrate) for susp 125 mg/5ml</i>	17	ANTACID CHW 1177MG.....	80
<i>amoxicillin (trihydrate) for susp 200 mg/5ml</i>	17	<i>antacid chw 500mg</i>	79
<i>amoxicillin (trihydrate) for susp 250 mg/5ml</i>	17	ANTACID CHW 550-110	81
<i>amoxicillin (trihydrate) for susp 400 mg/5ml</i>	17	<i>antacid chw 750mg</i>	80
<i>amoxicillin (trihydrate) tab 500 mg</i>	17	<i>antacid extr chw 750mg</i>	80
<i>amoxicillin (trihydrate) tab 875 mg</i>	17	<i>antacid fast sus relief</i>	81
<i>amoxicillin & k clavulanate chew tab 200-28.5 mg</i>	17	<i>antacid flav chw 750mg</i>	80
<i>amoxicillin & k clavulanate chew tab 400-57 mg</i>	17	<i>antacid iii sus</i>	82
<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	17	<i>antacid i sus</i>	81
<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i>	17	<i>antacid kids chw 750mg</i>	80
<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i>	17	<i>antacid liq sus</i>	81
<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i>	17	<i>antacid max chw 1000mg</i>	80
<i>amoxicillin & k clavulanate tab 250-125 mg</i>	17	<i>antacid max sus anti-gas</i>	82
<i>amoxicillin & k clavulanate tab 500-125 mg</i>	17	<i>antacid max sus cherry</i>	82
		<i>antacid m sus</i>	81
		ANTACID SOFT CHW 1177MG	80
		<i>antacid sus advanced</i>	82
		<i>antacid sus antigas</i>	81
		<i>antacid sus anti-gas</i>	81, 82
		<i>antacid sus ex st</i>	82
		<i>antacid sus max st</i>	82
		<i>antacid sus mint</i>	81
		<i>antacid sus reg st</i>	81
		<i>antacid ultr chw 1000mg</i>	80
		<i>anti-allergy tab</i>	113
		ANTIBAC BNDG MIS 7/8.....	196
		ANTIBAC FABR MIS STRIPS	196
		<i>antibac hand sol 2%</i>	162
		ANTIBACTERAI MIS BANDAGES	196
		ANTIBACTERIA MIS BANDAGES	196

ANTIBACTERIA MIS CLEAR.....	196	<i>aprepitant capsule therapy pack 80 & 125</i>	
ANTI-BACTRIA MIS CHILD	196	<i>mg</i>	85
<i>antibiotic oin</i>	154	<i>apri tab</i>	32
<i>antibiotic oin 500unit</i>	154	AQINJECT PEN MIS 31GX3/16	165
<i>anti-dandruf sha 1%</i>	158	AQINJECT PEN MIS 32GX5/32	169
<i>anti-dia/gas tab 2-125mg</i>	79	AQUALANCE MIS 30G.....	181
<i>anti-diarrhe cap 2mg</i>	76	<i>aquanil hc lot 1%</i>	159
<i>anti-diarrhe tab 2-125mg</i>	79	<i>aquaphor oin itch rlf</i>	160
<i>anti-diarrhe tab 2mg</i>	76	AQUORAL SPR.....	151
<i>anti-diarrhe tab anti-gas</i>	79	<i>aranelle tab</i>	35
<i>anti-diarrhl sus 262/15ml</i>	77	ARANESP INJ 100MCG	143
<i>antifungal cre 1%</i>	155	ARANESP INJ 150MCG.....	143
<i>anti-fungal cre 1%</i>	155	ARANESP INJ 200MCG.....	143
<i>antifungal cre 2%</i>	156	ARANESP INJ 25MCG	143
<i>antifungal cre foot</i>	155	ARANESP INJ 300MCG.....	143
<i>antifungal liq 1%</i>	155	ARANESP INJ 40MCG	143
<i>antifungal pow 2%</i>	156	ARANESP INJ 500MCG.....	143
<i>anti-fungal sol 1%</i>	155	ARANESP INJ 60MCG	143
<i>anti-gas cap 180mg</i>	86	ARNUITY ELPT INH 100MCG	68
<i>antihistamin cap 25mg</i>	54	ARNUITY ELPT INH 200MCG.....	68
<i>anti-hist tab 25mg</i>	54	<i>arthr pain gel 1%</i>	156
<i>anti-itch cre 1%</i>	159	<i>arthrts pain tab 650mg</i>	96
<i>anti-itch cre 1%pls 10</i>	159	<i>arthrts pain tab 650mg er</i>	96
<i>anti-itch oin 1%</i>	160	<i>artificial dro tears</i>	147, 148
<i>antiox form/ cap minerals</i>	116	<i>artificial sol 0.5-0.6%</i>	147
<i>antioxidant cap</i>	116	<i>artificial sol tears</i>	146, 147
<i>antioxidant cap formula</i>	114	<i>artifi tears dro 1-0.3%</i>	147
<i>anti-oxidant tab</i>	114	<i>asa free chw 160mg jr</i>	96
ANTIOXIDANT TAB FORMULA	118	<i>ascorbic acid liquid 500 mg/5ml</i>	107
<i>antioxidant tab vitamins</i>	118	<i>ashlyna tab</i>	35
<i>antiseptic sol 4%</i>	162	<i>aspercrm art gel 1% pain</i>	156
<i>antiseptic sol clnsr 4%</i>	162	<i>aspirin-81 chw 81mg</i>	94
<i>antiseptic sol skin cln</i>	162	<i>aspirin 81 tab 81mg ec</i>	94
<i>apap rapid tab tab 80mg</i>	97	<i>aspirin adlt tab 81mg ec</i>	94
APETEX ELX.....	110	<i>aspirin chew tab 81 mg</i>	94
APETIBEX CAP	116	<i>aspirin chld chw 81mg</i>	94
APETIGEN ELX.....	110	<i>aspirin free tab 325mg</i>	95
APETIGEN-PLS SOL.....	113	<i>aspirin low chw 81mg</i>	94
APETIGEN TAB PLUS.....	113	<i>aspirin low tab 81mg</i>	94
APPE-CURB CAP.....	116	<i>aspirin low tab 81mg ec</i>	94
<i>apra elx 160/5ml</i>	97	<i>aspirin regi tab 81mg</i>	94
<i>aprepitant capsule 125 mg</i>	85	ASPIRIN SUP 300MG	95
<i>aprepitant capsule 40 mg</i>	85	<i>aspirin tab 325 mg</i>	93
<i>aprepitant capsule 80 mg</i>	85	<i>aspirin tab delayed release 325 mg</i>	94

<i>aspirin tab delayed release 81 mg</i>	94	<i>atovaquone-proguanil hcl tab 250-100 mg</i>	23
<i>a-s pls alrg tab 25mg</i>	54	<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	23
ASSURE CMFRT MIS 28G	181	<i>atovaquone susp 750 mg/5ml</i>	24
ASSURE ID MIS 31GX5MM	165	ATP IGNITE PAK	128
ASSURE LANCE MIS 21G.....	181	ATP IGNITE POW WORKOUT	128
ASSURE LANCE MIS 28G.....	181	<i>aubra eq tab 0.1-0.02</i>	33
ASSURE LANCE MIS LOW FLOW	181	AUGMENTIN SUS 125/5ML	17
ASSURE LANCE MIS MICRO	181	AUM ALCOHOL PAD PREP 70%	203
ASSURE LANCE MIS SAFE 25G.....	181	AUM MINI PEN MIS 32GX4MM	169
ASSURE LANCE MIS SAFE 30G.....	181	AUM MINI PEN MIS 32GX6MM	171
<i>atazanavir sulfate cap 150 mg (base equiv)</i>	20	AUM READYGRD MIS 32GX4MM	169
<i>atazanavir sulfate cap 200 mg (base equiv)</i>	20	AUM SAFETY MIS 31GX5MM.....	165
<i>atazanavir sulfate cap 300 mg (base equiv)</i>	20	AURA MIS PORTANEB.....	176
<i>atenolol & chlorthalidone tab 100-25 mg</i> .49		AURORA LANCE MIS 30G.....	181
<i>atenolol & chlorthalidone tab 50-25 mg</i> ..48		AURORA LANCE MIS THIN 23G.....	181
<i>atenolol tab 100 mg</i>	44	<i>aurovela fe tab 1/20</i>	34
<i>atenolol tab 25 mg</i>	44	<i>aurovela fe tab 1.5/30</i>	34
<i>atenolol tab 50 mg</i>	44	<i>aurovela tab 1/20</i>	34
<i>athlete foot aer 1%</i>	155	<i>aurovela tab 1.5/30</i>	34
<i>athlete foot cre 1%</i>	155	AUSTEDO TAB 12MG	92
<i>athlete foot pow 2%</i>	156	AUSTEDO TAB 6MG	92
<i>athletes ft aer 1% pow</i>	155	AUSTEDO TAB 9MG	92
<i>a thru z adv tab adult</i>	118	AUSTEDO XR TAB 12MG	92
<i>a thru z chw select</i>	126	AUSTEDO XR TAB 24MG	92
<i>a thru z sel tab 50+ adva</i>	118	AUSTEDO XR TAB 6MG	92
<i>a thru z sel tab 50+ mens</i>	118	AUSTEDO XR TAB TITR KIT	92
<i>a thru z sel tab advanced</i>	118	AUTO LANCET MIS	182
<i>a thru z tab advanced</i>	118	<i>aveeno baby oin multipur</i>	160
<i>a thru z tab advantag</i>	133	<i>aveeno cre 1%</i>	159
<i>a thru z tab high pot</i>	118	<i>aviane tab</i>	33
<i>a thru z tab select</i>	118	AVONEX PEN KIT 30MCG	92
<i>a thru z tab ultimate</i>	118	AVONEX PREFL KIT 30MCG	92
<i>a thru z ult tab mens</i>	118	AVSOLA INJ 100MG	88
<i>atorvastatin calcium tab 10 mg (base equivalent)</i>	51	AYR NASAL DRO 0.65%.....	61
<i>atorvastatin calcium tab 20 mg (base equivalent)</i>	51	<i>ayr spr 0.65%</i>	60
<i>atorvastatin calcium tab 40 mg (base equivalent)</i>	51	<i>ayuna tab</i>	33
<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	51	<i>azasan tab 100mg</i>	206
		<i>azasan tab 75 mg</i>	205
		<i>azathioprine tab 100 mg</i>	206
		<i>azathioprine tab 50 mg</i>	205
		<i>azathioprine tab 75 mg</i>	206

<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	60
<i>azelastine hcl ophth soln 0.05%</i>	149
<i>azithromycin for susp 100 mg/5ml</i>	18
<i>azithromycin for susp 200 mg/5ml</i>	18
<i>azithromycin powd pack for susp 1 gm</i>	18
<i>azithromycin tab 250 mg</i>	18
<i>azithromycin tab 500 mg</i>	18
<i>azithromycin tab 600 mg</i>	18
<i>azo complete cap fem blnc</i>	77
AZO DUAL CAP PROTECT	77
AZO HORMONAL TAB HEALTH.....	119
<i>azurette tab</i>	35
B	
<i>b-100 complx tab</i>	112
B-100 COMP TAB TR	135
B-100 HIGH CAP POTENCY	111
<i>b-100 tab b-100</i>	111
<i>b-100 tab complex</i>	112
<i>b-100 tr tab</i>	112
<i>b-50 complex tab</i>	111
<i>baby ayr spr 0.65%</i>	60
BABY DDROPS LIQ 400UNIT	109
BABY IRON DRO IMMUNITY.....	131
<i>baby super dro daily d3</i>	109
<i>baby vit d dro 400/.028</i>	109
<i>bacitracin oin 500/gm</i>	154
<i>bacitracin oint 500 unit/gm</i>	154
<i>bacitracin ophth oint 500 unit/gm</i>	145
<i>bacitracin-polymyxin b ophth oint</i>	146
<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	149
<i>bacitracin zinc oint 500 unit/gm</i>	154
<i>bacitraycin oin 500/gm</i>	154
<i>baclofen tab 10 mg</i>	106
<i>baclofen tab 20 mg</i>	106
<i>bacteriostatic sodium chloride inj soln 0.9%</i>	204
BACTERIOSTAT LIQ TREATMNT	178
BACTER WATER INJ BENZ ALC.....	204
B ACTIV CAP.....	111
<i>balanc b-100 tab tr</i>	112
<i>balance b100 tab</i>	134
<i>balance b-50 cap complex</i>	134

<i>balance b-50 tab</i>	111
<i>balance b-50 tab complex</i>	134
BALANCE B-50 TAB TR	111
<i>balanced b tab complex</i>	111
<i>balanced tab b-100</i>	111
<i>balanced tab b-100 tr</i>	112
<i>balanced tab b-50</i>	111
<i>balmex multi oin purpose</i>	160
<i>balsalazide disodium cap 750 mg</i>	87
<i>balziva tab</i>	33
BANDAGE FABR MIS EX-LONG	197
BANDAGES FAB MIS ASSORTED.....	197
BAND-AID CLR MIS 7/8	196
BAND-AID FAM MIS PACK	196
BAND-AID FLX MIS	196
BAND-AID FLX MIS 1.....	196
BAND-AID FLX MIS 3/4.....	196
BAND-AID FLX MIS ASSORTED	196
BAND-AID FLX MIS EXTRA LG.....	196
BAND-AID FLX MIS FABRIC.....	196
BAND-AID FLX MIS FINGRTIP	196
BAND-AID FLX MIS KNUCKLE	196
BAND-AID HYD MIS ACNE BLE.....	196
BAND-AID HYD MIS ALL-PURP	196
BAND-AID HYD MIS BLS CUSH	196
BAND-AID HYD MIS LARGE.....	196
BAND-AID LG MIS BUTTRFLY	196
BAND AID MED MIS BUTTRFLY	196
BAND-AID MIS.....	196
BAND AID MIS 1	196
BAND-AID MIS 3/4.....	196
BAND-AID MIS BABY SHA	197
BAND-AID MIS BLUE CLU.....	197
BAND-AID MIS DIS PRIN	197
BAND-AID MIS FROZEN	197
BAND-AID MIS GLOW-DRK.....	197
BAND-AID MIS HL KITTY	197
BAND-AID MIS HOT COLR.....	197
BAND-AID MIS LIGHTYEA	197
BAND-AID MIS MEDICATE.....	197
BAND-AID MIS MICK MOU	197
BAND-AID MIS OURTONE.....	197
BAND-AID MIS PIXAR.....	197
BAND-AID MIS POKEMON.....	197

BAND-AID MIS RUGRATS	197	B-COMPLEX CAP	111
BAND-AID MIS SENSITIV	197	B-COMPLEX CAP VEGGIE	111
BAND-AID MIS SHEER.....	197	<i>b-complex tab /vit c</i>	111
BAND-AID MIS SHEER CF	197	<i>b-complex tab 100 tr</i>	112
BAND-AID MIS SKN FLX.....	197	<i>b-complex tab balanced</i>	112
BAND-AID MIS SPORT EX.....	197	B-COMPLEX TAB C/FA/BIO	113
BAND-AID MIS STAR WAR	197	<i>b complex tab form 1</i>	111
BAND-AID MIS SUP MARI	197	<i>b-complex tab form 1</i>	134
BAND-AID MIS THAT GIR.....	197	<i>b complex tab plus c</i>	110
BAND-AID MIS TOUGH.....	197	<i>b-complex vitamin cap</i>	110
BAND-AID MIS TOUGH-ST	197	<i>b-complex vitamin sublingual liquid</i>	110
BAND-AID MIS TOUGH WP	197	<i>b-complex vitamin tab</i>	110
BAND-AID MIS TOUGH XL	197	<i>b-complex w/biotin & folic acid tab</i>	111
BAND-AID MIS TOY STRY	197	<i>b-complex w/ c & folic acid tab</i>	112
BAND-AID MIS VARIETY	197	<i>b-complex w/ c cap</i>	110
BAND-AID MIS X-LG	197	<i>b-complex w/ c tab</i>	110
BAND-AID PAD 2.....	200	<i>b-complex w/ folic acid cap</i>	111
BAND-AID PAD 3.....	200	<i>b-complex w/ folic acid tab</i>	111
BAND-AID PAD ADHESIVE	200	BD INSULIN SYRINGE - OTC.....	165
BAND-AID PAW MIS PATROL	197	BD MICROTAIN MIS LANCETS.....	182
BAND-AID WTR MIS BLC FLEX	197	BD PEN NEEDL MIS 29GX12.7	165
<i>banophen cap 25mg</i>	54	BD PEN NEEDL MIS 31GX5MM	165
<i>banophen cap 50mg</i>	54	BD PEN NEEDL MIS 31GX8MM.....	167
<i>banophen tab 25mg</i>	54	BD PEN NEEDL MIS 32GX4MM.....	169
BAQSIMI ONE POW 3MG/DOSE.....	37	BD PEN NEEDL MIS 32GX6MM	172
BAQSIMI TWO POW 3MG/DOSE.....	37	BD SWAB REG PAD SNGL USE.....	203
BARACLUDGE SOL	22	BD U-500 MIS 31GX6MM	165
BARIATRIC CAP MULTIVIT	116	<i>bdy/hair/skn cap nails</i>	116
BARIATRIC CHW FUSION	126	<i>bec/zinc tab</i>	110
BASAGLAR INJ 100UNIT.....	36	BENADRYL ALG TAB EX STR	55
BASIC AM TAB.....	119	<i>benazepril & hydrochlorothiazide tab 10-</i>	
BASIC PM TAB.....	119	<i>12.5 mg</i>	48
<i>bayer adv tab 325mg</i>	93	<i>benazepril & hydrochlorothiazide tab 20-</i>	
<i>bayer adv tab 500mg</i>	94	<i>12.5 mg</i>	48
<i>bayer asa tab 325mg</i>	93, 94	<i>benazepril & hydrochlorothiazide tab 20-25</i>	
<i>bayer aspiri tab 325mg ec</i>	95	<i>mg</i>	48
<i>bayer low chw 81mg</i>	94	<i>benazepril hcl tab 10 mg</i>	46
<i>bayer low tab 81mg ec</i>	94	<i>benazepril hcl tab 20 mg</i>	46
<i>baza antifun cre 2%</i>	156	<i>benazepril hcl tab 40 mg</i>	46
<i>b-comp/vit c tab</i>	111	<i>benazepril hcl tab 5 mg</i>	46
<i>b-compleet- tab 100</i>	111	<i>benfotiamine cap multi-b</i>	111
<i>b-compleet- tab 50</i>	111	BENSONS CRE BOTTOM	160
B-COMPLEX/FA TAB /VIT C.....	112	BENTLEY THE MIS BEAR.....	176
<i>b-complex + tab b-12</i>	110	<i>benzonatate cap 100 mg</i>	61

<i>benzonatate cap 200 mg</i>	61	BICILLIN L-A INJ 2400000	17
<i>benzoyl per gel 10%</i>	153	BICILLIN L-A INJ 600000.....	17
<i>benzoyl per gel 5%</i>	152	<i>big 100 tab</i>	111
<i>benzoyl per liq 10%</i>	152	BIKTARVY TAB	22
<i>benzoyl per liq 10% wash</i>	152	BILBERRY CAP PLUS	132
<i>benzoyl per liq 5%</i>	152	BIO-35 GLUTE CAP FREE.....	116
<i>benzoyl per liq 5% wash</i>	152	BIO-35 IRON CAP FREE.....	116
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	153	BIO C 1:1 CAP	113
<i>benzoyl peroxide gel 2.5%</i>	152	BIOCAL CAP	116
<i>benzoyl peroxide gel 8%</i>	152	<i>biocotron liq 100-10/5</i>	65
BETADINE SRG SOL 7.5%	162	BIOFLAVONOID POW CITRUS	114
<i>beta hc lot 1%</i>	159	<i>bioflavonoid products tab er</i>	113
<i>betamethasone dipropionate augmented cream 0.05%</i>	158	<i>bioflex tab</i>	113
<i>betamethasone dipropionate augmented gel 0.05%</i>	158	BIOGAIA CHW 100M CEL	78
<i>betamethasone dipropionate augmented lotion 0.05%</i>	158	BIOGAIA CHW GASTRUS.....	78
<i>betamethasone dipropionate augmented oint 0.05%</i>	158	BIOGAIA DRO PROBIOTI.....	78
<i>betamethasone dipropionate cream 0.05%</i>	158	BIOGAIA DRO PRODENTI	79
<i>betamethasone dipropionate lotion 0.05%</i>	158	BIOGAIA LOZ PRODENTI	79
<i>betamethasone dipropionate oint 0.05%</i>	158	BIOGAIA MIS PROBIOTI	79
<i>betamethasone valerate cream 0.1% (base equivalent)</i>	158	BIOGAIA PROD LOZ KIDS	79
<i>betamethasone valerate lotion 0.1% (base equivalent)</i>	158	BIOGAIA PROT DRO BABY	79
<i>betamethasone valerate oint 0.1% (base equivalent)</i>	158	BIOGAIS PROT CAP MUM	77
<i>betasept sol 4%</i>	162	BIO-K PLUS CAP STRONG	78
<i>betatemp sus 160/5ml</i>	97	<i>biolle gel 1%</i>	146
<i>betaxolol hcl ophth soln 0.5%</i>	148	<i>biolle tears dro 0.5% op</i>	146
<i>bethanechol chloride tab 10 mg</i>	88	BIOMEPRO CAP	77, 78
<i>bethanechol chloride tab 25 mg</i>	88	BIOMEPRO LIQ	78
<i>bethanechol chloride tab 50 mg</i>	88	BION TEARS SOL 0.1-0.3%	147
<i>bethanechol chloride tab 5 mg</i>	88	BIOPATCH MIS 1.....	162
<i>better b tab complex</i>	110	BIOPATCH MIS 3/4	162
<i>bexarotene cap 75 mg</i>	28	BIOPATCH PRO MIS DISK/CHG.....	162
<i>bicalutamide tab 50 mg</i>	26	<i>biopetit elx</i>	110
BICILLIN L-A INJ 1200000	17	BIOTENE DRY GUM MOUTH	151
		<i>biotene dry loz mouth</i>	151
		BIOTENE DRY SPR MOIST	151
		BIOTENE PBF GUM DRY MTH	151
		<i>biotinex cap</i>	77
		BIOTIN PLUS TAB KERATIN	133
		<i>bisacodyl suppos 10 mg</i>	70
		<i>bisacodyl tab 5mg ec</i>	70
		<i>bisacodyl tab delayed release 5 mg</i>	70
		<i>bismuth subsalicylate chew tab 262 mg</i> ...76	
		<i>bisoprolol & hydrochlorothiazide tab 10- 6.25 mg</i>	49

<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg</i>	49	<i>bromocriptine mesylate cap 5 mg (base equivalent)</i>	105
<i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg</i>	49	<i>bromocriptine mesylate tab 2.5 mg (base equivalent)</i>	105
<i>bisoprolol fumarate tab 10 mg</i>	44	BRYHALI LOT 0.01%.....	159
<i>bisoprolol fumarate tab 5 mg</i>	44	<i>b-stress cap</i>	134
<i>blisovi fe tab 1/20</i>	34	BUBBLES PEDI MIS MASK.....	173
<i>blisovi fe tab 1.5/30</i>	34	<i>buckleys liq chest</i>	61
BLISTER REL MIS BANDAGE.....	197	<i>budesonide delayed release particles cap 3 mg</i>	29
<i>blis-to-sol liq 1%</i>	155	<i>budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act</i>	67
BOCASAL POW.....	151	<i>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act</i>	67
BOLSITOL CAP.....	77	<i>budesonide inhalation susp 0.25 mg/2ml</i>	68
BONEUP 3 PER CAP DAY.....	116	<i>budesonide inhalation susp 0.5 mg/2ml</i>	68
BONEUP CAP.....	116	<i>budesonide inhalation susp 1 mg/2ml</i>	68
BONEUP VEG TAB.....	119	<i>budesonide sus 32mcg</i>	60
<i>bonine chw 25mg</i>	85	<i>budesonide sus nasal</i>	60
BOOSTNOW CAP IMM SUPP.....	116	<i>budesonide tab er 24hr 9 mg</i>	29
BOOSTNOW POW IMM SUPP.....	128	<i>bumetanide tab 0.5 mg</i>	49
BOOSTRIX INJ.....	24	<i>bumetanide tab 1 mg</i>	49
<i>bortezomib for inj 3.5 mg</i>	28	<i>bumetanide tab 2 mg</i>	49
<i>bosentan tab 125 mg</i>	52	BUTTERFLY MIS CLOSURES.....	197
<i>bosentan tab 62.5 mg</i>	52	C	
<i>bprotected liq multi-vi</i>	128	C 1000/BIOFL CAP /R HIPS.....	113
<i>bp wash liq 10%</i>	152	<i>c1000 tr/rh tab bioflav</i>	113
<i>bp wash liq 2.5%</i>	152	<i>c1500 tr/rh tab bioflav</i>	113
<i>bp wash liq 5%</i>	152	CABENUVA SUS 400-600.....	21
BRAIN MIGHT TAB.....	133	CABENUVA SUS 600-900.....	21
BREATHE COMF MIS HUMIDIFI.....	178	<i>cabergoline tab 0.5 mg</i>	42
BREATHE COMF MIS SHIELD.....	179	CABOMETYX TAB 20MG.....	27
BREATHE EASE MIS HUMIDIFI.....	178	CABOMETYX TAB 40MG.....	27
BREATHE EASE MIS LG MASK.....	175	CABOMETYX TAB 60MG.....	27
BREATHE EASE MIS MED MASK.....	175	<i>ca cit/vit d tab 315/250</i>	138
BREATHE EASE MIS SM MASK.....	175	<i>ca citrate + tab</i>	138
BREATHERITE MIS MDI CHMB.....	175	<i>ca citrate tab + d</i>	138
BREWERS YEAS POW.....	110	<i>ca citrate tab plus d</i>	138
<i>brewers yeast tab</i>	110	CAL/MAG/ZINC TAB VIT D3.....	139
<i>breyna aer 160/4.5</i>	67	CALAMINE LOT.....	162
<i>breyna aer 80/4.5</i>	67	CALAMINE LOT 8-8%.....	162
<i>briellyn tab</i>	33	<i>calc 600+d3 cap 600-500</i>	135
BRILINTA TAB 60MG.....	145	<i>calc 600+d tab 600-800</i>	137
BRILINTA TAB 90MG.....	145	<i>calc antacid chw 500mg</i>	79
<i>brimonidine tartrate ophth soln 0.15%</i>	149		
<i>brimonidine tartrate ophth soln 0.2%</i>	149		
<i>bromfed dm sol 2-30-10</i>	64		

<i>calc antacid chw 750mg</i>	80	<i>calcium + d tab 600-200</i>	136
<i>calc cit+d3 tab 200-250</i>	137	<i>calcium+d tab 600-400</i>	137
<i>CALC CIT+D3 TAB 250-200</i>	138	<i>calcium + d tab 600mg</i>	136
<i>calc citr/d3 tab 200-250</i>	137	<i>calcium 500 tab /vit d</i>	136
<i>calc citr+d3 tab 200-250</i>	137	<i>calcium 500 tab +d</i>	136
<i>calc citr+d3 tab 315-250</i>	138	<i>calcium 600/ tab vit d</i>	137
<i>calc citr+d3 tab 400-12.5</i>	137	<i>calcium 600 chw w/vit d</i>	137
<i>calc citra+d tab 315-250</i>	138	<i>calcium 600 tab</i>	135
<i>CALC CITRATE TAB +D</i>	138	<i>calcium 600 tab +d</i>	135, 136, 137
<i>calcidol dro 8000/ml</i>	107	<i>CALCIUM 600 TAB +D</i>	135
<i>calcipotriene oint 0.005%</i>	157	<i>calcium 600 tab + d</i>	137
<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	157	<i>calcium 600 tab +d3</i>	136
<i>cal cit+d3 tab maximum</i>	138	<i>calcium acetate (phosphate binder) cap</i> <i>667 mg (169 mg ca)</i>	88
<i>CAL CIT MAL/ TAB VITAMIND</i>	138	<i>calcium ascorbate tab 500 mg</i>	107
<i>calcitonin (salmon) nasal soln 200 unit/act</i>	40	<i>calcium carb-cholecalciferol cap 600 mg-</i> <i>12.5 mcg (500 unit)</i>	135
<i>calcitrate tab plus d</i>	138	<i>calcium carb-cholecalciferol tab 250 mg-</i> <i>3.125 mcg (125 unit)</i>	136
<i>calcitrene oin 0.005%</i>	157	<i>calcium carb-cholecalciferol tab 500 mg-10</i> <i>mcg (400 unit)</i>	136
<i>calcitriol cap 0.25 mcg</i>	42	<i>calcium carb-cholecalciferol tab 600 mg-10</i> <i>mcg (400 unit)</i>	137
<i>calcitriol cap 0.5 mcg</i>	42	<i>CALCIUM CARB CHW 500MG</i>	135
<i>calcitriol oral soln 1 mcg/ml</i>	42	<i>calcium carbonate (antacid) chew tab 500</i> <i>mg</i>	79
<i>calcium/d3 cap 600-500</i>	136	<i>calcium carbonate (antacid) susp 1250</i> <i>mg/5ml</i>	80
<i>calcium/d3 tab</i>	136, 137	<i>calcium carbonate-cholecalciferol tab 500</i> <i>mg-5 mcg(200 unit)</i>	136
<i>CALCIUM/D3 TAB 500/200</i>	135	<i>calcium carbonate-cholecalciferol tab 600</i> <i>mg-5 mcg(200 unit)</i>	137
<i>calcium/d3 tab 500-400</i>	136	<i>calcium carbonate tab 1250 mg (500 mg</i> <i>elemental ca)</i>	135
<i>calcium/d3 tab 500-600</i>	136	<i>calcium carbonate tab 1500 mg (600 mg</i> <i>elemental ca)</i>	135
<i>calcium/d3 tab 600-10</i>	137	<i>calcium carbonate tab 600 mg</i>	135
<i>calcium/d3 tab 600-20</i>	137	<i>calcium carbonate-vitamin d cap 600 mg-5</i> <i>mcg (200 unit)</i>	135
<i>calcium/d3 tab 600-5</i>	137	<i>calcium carbonate-vitamin d tab 250 mg-</i> <i>3.125 mcg (125 unit)</i>	135
<i>calcium/d3 tab 600-800</i>	137	<i>calcium carbonate-vitamin d tab 600 mg-5</i> <i>mcg (200 unit)</i>	135
<i>calcium/d tab 500/200</i>	136	<i>calcium carb tab 1250mg</i>	135
<i>calcium/d tab 500-200</i>	136		
<i>calcium/d tab 500-400</i>	136		
<i>calcium/d tab 500mg</i>	136		
<i>calcium/d tab 600-200</i>	137		
<i>calcium/d tab 600-800</i>	137		
<i>calcium/vita tab d3</i>	137		
<i>CALCIUM/VT D TAB 600-125</i>	135		
<i>calcium + d3 tab</i>	138		
<i>calcium+d3 tab 315-250</i>	138		
<i>calcium+d3 tab 600-20</i>	137		
<i>calcium+d3 tab 600-400</i>	137		
<i>calcium+d3 tab 600-800</i>	137		
<i>calcium +d3 tab maximum</i>	138		

CALCIUM CARB TAB 648MG.....	79	<i>captopril tab 25 mg</i>	46
CALCIUM CHW 500-10	137	<i>captopril tab 50 mg</i>	46
<i>calcium citrate tab 950 mg (200 mg</i>		<i>carbidopa & levodopa tab 10-100 mg</i>	105
<i>elemental ca)</i>	135	<i>carbidopa & levodopa tab 25-100 mg</i>	105
<i>calcium citr tab plus d-3</i>	138	<i>carbidopa & levodopa tab 25-250 mg</i>	105
<i>calcium citr tab w/vit d3</i>	138	<i>carbidopa & levodopa tab er 25-100 mg</i> .105	
<i>calcium cit-vitamin d tab 315 mg-5</i>		<i>carbidopa & levodopa tab er 50-200 mg</i> 105	
<i>mcg(200 unit) (elem ca)</i>	138	<i>carbidopa-levodopa-entacapone tabs 12.5-</i>	
<i>calcium cit-vit d tab 200 mg-6.25 mcg(250</i>		<i>50-200 mg</i>	105
<i>unit) (elem ca)</i>	137	<i>carbidopa-levodopa-entacapone tabs</i>	
<i>calcium for chw women</i>	138	<i>18.75-75-200 mg</i>	105
<i>calcium-magnesium-zinc tab 333-133-5 mg</i>		<i>carbidopa-levodopa-entacapone tabs 25-</i>	
.....	138	<i>100-200 mg</i>	106
<i>calcium-magnesium-zinc tab 333-133-8.3</i>		<i>carbidopa-levodopa-entacapone tabs</i>	
<i>mg</i>	138	<i>31.25-125-200 mg</i>	106
<i>calcium pls tab 500-200</i>	136	<i>carbidopa-levodopa-entacapone tabs 37.5-</i>	
<i>calcium plus cap d3</i>	136	<i>150-200 mg</i>	106
CALCIUM SOFT CHW CARAMEL.....	138	<i>carbidopa-levodopa-entacapone tabs 50-</i>	
CALCIUM SOFT CHW CHOCOLAT	138	<i>200-200 mg</i>	106
<i>calcium soft chw mlk choc</i>	138	<i>carboxymethylcellulose sodium ophth soln</i>	
CALCIUM TAB 280MG.....	135	<i>0.5%</i>	146
<i>calcium tab 500/d</i>	136	CARDIOPRESS CAP	132
<i>calcium tab 500+d</i>	136	CAREFINE MIS 31GX8MM	167
<i>calcium tab 600mg</i>	135	CAREFINE MIS 32GX4MM	169
<i>calcium tab vit d</i>	137	CAREFINE MIS 32GX6MM	172
<i>cal-gest chw 500mg</i>	79	CAREONE LANC MIS 30G.....	182
CAL-MAG TAB 500-250.....	135	CAREONE LANC MIS THIN 23G	182
CALQUENCE TAB 100MG	27	CARESENS 30G MIS LANCETS	182
<i>cal soft chw chw mlk choc</i>	138	CARETOUCH MIS 31GX5MM.....	166
CAMCEVI INJ 42MG	26	CARETOUCH MIS 31GX8MM	167
<i>camila tab 0.35mg</i>	31	CARETOUCH MIS 32GX4MM	170
<i>camrese tab</i>	35	CARETOUCH MIS CPAP	173
CAMZYOS CAP 10MG	53	CARETOUCH MIS LANC 26G.....	182
CAMZYOS CAP 15MG	53	CARETOUCH MIS LANC 28G.....	182
CAMZYOS CAP 2.5MG.....	53	CARETOUCH MIS LANC 30G	182
CAMZYOS CAP 5MG	53	CARETOUCH MIS TWIST 28	182
<i>capecitabine tab 150 mg</i>	25	CARETOUCH MIS TWIST 30.....	182
<i>capecitabine tab 500 mg</i>	25	CARETOUCH MIS TWIST 33.....	182
CAPHOSOL SOL.....	151	CARETOUCH PAD ALCOHOL	203
CAPRELSA TAB 100MG	28	<i>carisoprodol tab 350 mg</i>	106
CAPRELSA TAB 300MG.....	28	CARPALAID MIS EMPLOYEE	197
CAPTAIN MIS EAGLE.....	176	CARPALAID MIS LARGE.....	197
<i>captopril tab 100 mg</i>	47	CARPALAID MIS PRAC SM	197
<i>captopril tab 12.5 mg</i>	46	CARPALAID MIS PRA LG.....	197

CARPALOID MIS SMALL	197	CENT MATURE TAB ADLT 50+	119
<i>cartia xt cap 120/24hr</i>	45	<i>cent mature tab womn 50+</i>	119
<i>cartia xt cap 180/24hr</i>	45	CENTRAL-VITE TAB.....	119
<i>cartia xt cap 240/24hr</i>	45	<i>central-vite tab mens mat</i>	119
<i>cartia xt cap 300/24hr</i>	45	<i>central-vite tab wmns mat</i>	119
<i>carvedilol tab 12.5 mg</i>	44	<i>centravites tab</i>	119
<i>carvedilol tab 25 mg</i>	44	<i>centravites tab 50 plus</i>	119
<i>carvedilol tab 3.125 mg</i>	44	CENTRAVITES TAB 50 PLUS.....	119
<i>carvedilol tab 6.25 mg</i>	44	CENTRAVITES TAB ADULTS	119
CASTIVA LOT.....	161	CENTRUM 50+ CHW ADULTS.....	126
CAYA DPR.....	202	CENTRUM 50+ CHW FRSH/FRU.....	126
C-BUFF POW	128	CENTRUM CHW ADULTS.....	126
<i>c complex tab 1000mg</i>	114	CENTRUM CHW FLAV BST	126
<i>c complex tab 500mg</i>	113	CENTRUM CHW SILVER.....	126
<i>cefadroxil cap 500 mg</i>	17	CENTRUM CHW VITAMINT	126
<i>cefadroxil for susp 250 mg/5ml</i>	17	CENTRUM KIDS CHW.....	130
<i>cefadroxil for susp 500 mg/5ml</i>	17	CENTRUM KIDS CHW FLAV BST	130
<i>cefadroxil tab 1 gm</i>	17	CENTRUM LIQ.....	128
<i>cefdinir cap 300 mg</i>	18	CENTRUM LIQ ADULT	128
<i>cefdinir for susp 125 mg/5ml</i>	18	CENTRUM MINI TAB ADULT 50.....	119
<i>cefdinir for susp 250 mg/5ml</i>	18	CENTRUM MINI TAB MEN 50+	119
<i>cefprozil for susp 125 mg/5ml</i>	18	CENTRUM MINI TAB WOMEN 50.....	119
<i>cefprozil for susp 250 mg/5ml</i>	18	CENTRUM MULT CHW OMEGA 3	127
<i>cefprozil tab 250 mg</i>	18	CENTRUM POW DRINK.....	128
<i>cefprozil tab 500 mg</i>	18	CENTRUM SILV TAB 50+MEN	119
<i>ceftriaxone sodium for inj 1 gm</i>	18	CENTRUM SILV TAB 50+WOMEN.....	119
<i>ceftriaxone sodium for inj 250 mg</i>	18	CENTRUM SILV TAB ADULT 50	119
<i>ceftriaxone sodium for inj 2 gm</i>	18	CENTRUM SPEC TAB ENERGY.....	133
<i>ceftriaxone sodium for inj 500 mg</i>	18	CENTRUM SPEC TAB HEART	119
<i>cefuroxime axetil tab 250 mg</i>	18	CENTRUM SPEC TAB IMMUNE.....	119
<i>cefuroxime axetil tab 500 mg</i>	18	CENTRUM SPEC TAB VISION.....	119
CELEBRATE CAP 18	116	CENTRUM TAB ADULTS	119
CELEBRATE CAP 36	116	CENTRUM TAB CARDIO	119
CELEBRATE CAP 45	116	CENTRUM TAB MEN	119
CELEBRATE CAP 60	116	CENTRUM TAB PERFORMA.....	133
CELEBRATE CHW 18.....	126	CENTRUM TAB SILVER	119
CELEBRATE CHW 36	126	CENTRUM TAB ULTRA.....	119
CELEBRATE CHW 45	126	CENTRUM TAB WOMEN.....	119
CELEBRATE CHW 60	126	<i>century tab</i>	119
<i>celecoxib cap 100 mg</i>	102	<i>century tab mature</i>	119
<i>celecoxib cap 200 mg</i>	102	<i>cephalexin cap 250 mg</i>	17
<i>celecoxib cap 400 mg</i>	102	<i>cephalexin cap 500 mg</i>	18
<i>celecoxib cap 50 mg</i>	102	<i>cephalexin cap 750 mg</i>	18
<i>centavite az tab minerals</i>	119	<i>cephalexin for susp 125 mg/5ml</i>	18

<i>cephalexin for susp 250 mg/5ml</i>	18	<i>childrens chw apap</i>	96
<i>cephalexin tab 250 mg</i>	18	<i>childrens chw complete</i>	131
<i>cephalexin tab 500 mg</i>	18	CHILDRENS CHW GUMMIES	130
<i>ceralyte 70 sol</i>	139	<i>childrens chw multivit</i>	130
<i>cerave acne liq foaming</i>	152	<i>childrens chw pepto</i>	79
<i>cerave baby oin healing</i>	161	<i>childrens chw soothe</i>	79
CERDELGA CAP 84MG.....	143	<i>childrens chw vitamins</i>	130
CEREZYME INJ 400UNIT	143	<i>childrens liq 5-100mg</i>	65
<i>cerovite jr chw</i>	131	<i>children vit chw</i>	129
<i>cerovite tab senior</i>	119	<i>child soothe chw 400mg</i>	79
<i>certavite/ tab antioxid</i>	119	<i>chld allergy liq 12.5/5ml</i>	55
CERTAVITE/ TAB ANTIOXID	119	<i>chld asafree elx 80/2.5ml</i>	97
CERTAVITE TAB SENIOR	119	<i>chld meditab chw 80mg</i>	96
<i>cetirizine chw 10mg</i>	57	<i>chld mltivit chw /mineral</i>	131
<i>cetirizine hcl chew tab 5 mg</i>	57	<i>chld non-asa chw 80mg grp</i>	96
<i>cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)</i>	57	<i>chld non-asa tab 80mg qm</i>	97
<i>cetirizine hcl tab 10 mg</i>	56	<i>chld silapap liq 160/5ml</i>	97
<i>cetirizine hcl tab 5 mg</i>	56	CHLORELLA CAP	115
<i>cetirizine-pseudoephedrine tab er 12hr 5-</i> <i>120 mg</i>	63	CHLORHEX GLU PAD 2%.....	162
<i>cetirizine sol 1mg/ml</i>	57	<i>chlorhexidine gluconate soln 0.12%</i>	150
<i>cetirizine sol 5mg/5ml</i>	57	<i>chlorhexidine gluconate soln 4%</i>	162
<i>cgh cong dm liq 5-100/5</i>	65	<i>chlorhexidin sol 2%</i>	162
CHARCOAL MIS FLTR#901	179	<i>chlorhist tab 4mg</i>	53
<i>chateal eq tab 0.15/30</i>	33	<i>chlorocaps cap</i>	114
CHEMSTRIP 10 TES MD.....	163	<i>chloroquine phosphate tab 250 mg</i>	23
CHEMSTRIP 2 TES GP	163	<i>chloroquine phosphate tab 500 mg</i>	23
CHEMSTRIP 5 TES OB	163	<i>chlorpheniramine maleate tab 4 mg</i>	54
CHEMSTRIP 7 TES.....	163	<i>chlorpheniramine maleate tab er 12 mg</i> ..	54
CHEMSTRIP 9 TES STRIPS	163	<i>chlor-phenir tab 4mg</i>	53
CHEMSTRIP TES -10 SG	163	<i>chlorphen tab 4mg</i>	54
CHEMSTRIP TES UGK.....	163	<i>chlorthalidone tab 25 mg</i>	50
<i>chest conges liq 100/5ml</i>	61	<i>chlorthalidone tab 50 mg</i>	50
<i>chest conges syp rel dm</i>	66	<i>chlorzoxazone tab 500 mg</i>	106
<i>chest conges tab 400mg</i>	61	<i>choc laxativ chw 15mg</i>	71
<i>chewable chw children</i>	131	CHOICEFUL CAP MULTIVIT.....	116
<i>chew calcium chw</i>	138	CHOICEFUL CHW MULTIVIT	127
<i>child allrgy sol 1mg/ml</i>	57	CHOLASE CAP CONTROL.....	132
<i>child allrgy sol 5mg/5ml</i>	57	<i>cholecalciferol cap 1.25 mg (50000 unit)</i> 108	
<i>child asa chw 81mg</i>	94	<i>cholecalciferol cap 125 mcg (5000 unit)</i> .108	
<i>child chew/ chw extra c</i>	129	<i>cholecalciferol cap 250 mcg (10000 unit)</i>	108
<i>child chew chw vitamins</i>	129	<i>cholecalciferol cap 25 mcg (1000 unit)</i> ..	107
<i>childrens chw /iron</i>	131	<i>cholecalciferol cap 50 mcg (2000 unit)</i> ..	107

<i>cholecalciferol chew tab 10 mcg (400 unit)</i>	109	<i>claravis cap 30mg</i>	153
<i>cholecalciferol chew tab 25 mcg (1000 unit)</i>	109	<i>claravis cap 40mg</i>	153
<i>cholecalciferol oral liquid 10 mcg/ml (400 unit/ml)</i>	109	<i>clarispray spr 50mcg</i>	60
<i>cholecalciferol tab 10 mcg (400 unit)</i>	108	<i>clarithromycin for susp 125 mg/5ml</i>	19
<i>cholecalciferol tab 25 mcg (1000 unit)</i>	108	<i>clarithromycin for susp 250 mg/5ml</i>	19
<i>cholecalciferol tab 50 mcg (2000 unit)</i> ...	108	<i>clarithromycin tab 250 mg</i>	18
<i>cholestyramine light powder 4 gm/dose</i> .50		<i>clarithromycin tab 500 mg</i>	18
<i>cholestyramine light powder packets 4 gm</i>	50	<i>clarithromycin tab er 24hr 500 mg</i>	19
<i>cholestyramine powder 4 gm/dose</i>	50	CLEANLET 28G MIS LANCETS	182
<i>cholestyramine powder packets 4 gm</i>	50	<i>clearasil cre acne</i>	152
CHOSEN MIS 30G	182	<i>clearasil cre spot 10%</i>	152
CHOSEN MIS SAFE 28G	182	<i>clearcanal dro 6.5%</i>	149
<i>ciclopirox gel 0.77%</i>	154	<i>clear eyes dro 0.5-0.6%</i>	147
<i>ciclopirox olamine cream 0.77% (base equiv)</i>	154	<i>clearlax pow</i>	75
<i>ciclopirox olamine susp 0.77% (base equiv)</i>	154	<i>clearskin cre 10%</i>	152
<i>ciclopirox shampoo 1%</i>	154	<i>clemastine fumarate tab 2.68 mg</i>	54
<i>cilostazol tab 100 mg</i>	145	CLEVER CHECK MIS	182
<i>cilostazol tab 50 mg</i>	145	CLEVER CHECK MIS 30G.....	182
CIMDUO TAB 300-300.....	22	CLEVER CHOIC MIS MASK	179
<i>cimetidine hcl soln 300 mg/5ml</i>	83	CLEVER CHOIC MIS NEBULIZR	176
<i>cimetidine tab 200mg</i>	83	CLEVER CHOIC MIS ULTRASON	178
<i>cimetidine tab 200 mg</i>	83	CLEVR CHOICE MIS MEDICAL	179
<i>cimetidine tab 300 mg</i>	83	CLICKFINE MIS 31GX3/16	166
<i>cimetidine tab 400 mg</i>	83	CLICKFINE MIS 31GX5/16	167
<i>cimetidine tab 800 mg</i>	83	CLICKFINE MIS 31GX8MM	167
<i>cinacalcet hcl tab 30 mg (base equiv)</i>	42	CLICKFINE MIS 32GX5/32	170
<i>cinacalcet hcl tab 60 mg (base equiv)</i>	42	<i>clindamycin hcl cap 150 mg</i>	23
<i>cinacalcet hcl tab 90 mg (base equiv)</i>	42	<i>clindamycin hcl cap 300 mg</i>	23
CINRYZE SOL 500 UNIT	145	<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	24
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	150	<i>clindamycin phosphate-benzoyl peroxide gel 1.2-2.5%</i>	153
<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i>	145	<i>clindamycin phosphate-benzoyl peroxide gel 1.2-3.75%</i>	153
<i>ciprofloxacin hcl tab 250 mg (base equiv)</i> 19		<i>clindamycin phosphate-benzoyl peroxide gel 1-5%</i>	153
<i>ciprofloxacin hcl tab 500 mg (base equiv)</i> 19		<i>clindamycin phosphate gel 1%</i>	153
<i>ciprofloxacin hcl tab 750 mg (base equiv)</i> 19		<i>clindamycin phosphate lotion 1%</i>	153
<i>claravis cap 10mg</i>	153	<i>clindamycin phosphate soln 1%</i>	153
<i>claravis cap 20mg</i>	153	<i>clindamycin phosphate vaginal cream 2%</i>	88
		<i>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</i>	153
		<i>clinere liq earwax</i>	149

<i>clinpro 5000 pst 1.1%</i>	151	COMETRIQ KIT 140MG.....	27
<i>clobetasol propionate emollient base cream</i>		COMETRIQ KIT 60MG.....	27
0.05%.....	158	COMFORT ASSU MIS LANC 28G.....	182
<i>clonidine hcl tab 0.1 mg</i>	47	COMFORT ASSU MIS LANC 33G.....	182
<i>clonidine hcl tab 0.2 mg</i>	47	COMFORT EZ MIS 21G.....	182
<i>clonidine hcl tab 0.3 mg</i>	48	COMFORT EZ MIS 23G.....	182
<i>clonidine hcl tab er 12hr 0.1 mg</i>	91	COMFORT EZ MIS 28G.....	183
<i>clonidine td patch weekly 0.1 mg/24hr</i>	47	COMFORT EZ MIS 31GX5MM.....	166
<i>clonidine td patch weekly 0.2 mg/24hr</i>	47	COMFORT EZ MIS 31GX8MM.....	167
<i>clonidine td patch weekly 0.3 mg/24hr</i>	47	COMFORT EZ MIS 32GX4MM.....	170
<i>clopidogrel bisulfate tab 300 mg (base</i>		COMFORT EZ MIS 32GX6MM.....	172
equiv).....	145	COMFORT FAB MIS 3/4.....	197
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>		COMFORT FAB MIS ASSORTED.....	197
.....	145	COMFORT FAB MIS KNEE/ELB.....	197
<i>clotrimazole cre 1%</i>	155	<i>comfort gel sus</i>	81
<i>clotrimazole cre 2%</i>	88	<i>comfort gel sus antacid</i>	82
<i>clotrimazole cre 3 day</i>	88	<i>comfort gel sus anti-gas</i>	81, 82
<i>clotrimazole cream 1%</i>	155	COMFORTOUCH MIS LANCET.....	183
<i>clotrimazole soln 1%</i>	155	COMFORTSEAL MIS MASK LRG.....	173
<i>clotrimazole troche 10 mg</i>	150	COMFORTSEAL MIS MASK MED.....	173
<i>clotrimazole vaginal cream 1%</i>	88	COMFORTSEAL MIS MASK SML.....	173
COAGUCHEK MIS LANCETS.....	182	COMFORT TCH MIS LANC 28G.....	183
CODITUSSIN LIQ AC.....	64	COMFORT TCH MIS LANC 30G.....	183
<i>cod liver cap</i>	109	COMFORT TCH MIS LANC 31G.....	183
<i>cod liver cap oil</i>	109	COMFORT TOUC MIS 31GX5MM.....	166
<i>cod liver cap oil/a&d</i>	109	COMFORT TOUC MIS 31GX8MM.....	168
<i>cod liver chw /vit d</i>	110	COMFORT TOUC MIS 32GX4MM.....	170
<i>cod liver chw w/vit</i>	110	COMFORT TOUC MIS 32GX6MM.....	172
COD LIVER OIL.....	109	COMFRT TOUCH PAD ALC PREP.....	203
COD LIVER OIL FOR KIDS.....	109	CO MONITOR MIS T PIECES.....	173
COD LIVER OIL NORWEGIA.....	109	COMPACT SPAC MIS CHAMBER.....	175
COD LIVER OIL OIL.....	110	COMPACT SPAC MIS LG MASK.....	175
COD LIVER OIL USP/NF.....	110	COMPACT SPAC MIS MD MASK.....	175
<i>colace 2in1 tab 8.6-50mg</i>	75	COMPACT SPAC MIS SM MASK.....	175
<i>colchicine tab 0.6 mg</i>	104	COMP AIR MIS COMP/NEB.....	176
<i>cold/allergy elx children</i>	63	COMP A-I-R MIS NEBULIZE.....	176
<i>colestipol hcl granule packets 5 gm</i>	51	<i>comp allergy cap 25mg</i>	54
<i>colestipol hcl granules 5 gm</i>	51	<i>comp allergy tab 25mg</i>	54
<i>colestipol hcl tab 1 gm</i>	51	<i>comp allergy tab 25mg med</i>	55
COLLAGEN CAP ULTRA.....	133	<i>comp allergy tab 25mg rlf</i>	55
COLOR CONDOM MIS + LUBE.....	200	<i>companion tab</i>	119
COMBIPATCH DIS.....	30	<i>compete tab</i>	119
COMBIVENT AER 20-100.....	67	<i>comple multi tab adlt 50+</i>	119
COMETRIQ KIT 100MG.....	27	COMPLERA TAB.....	22

COMPLETE CAP BALANCE	134	CORTROPHIN GEL 80UNIT	41
<i>complex b-50 tab</i>	112	COSENTYX INJ 150MG/ML	157
<i>compl multiv chw childrns</i>	131	COSENTYX INJ 300DOSE	157
COMP MIST MIS NEBULIZE	176	COSENTYX PEN INJ 150MG/ML	157
<i>comp multivi liq mineral</i>	128	COSENTYX PEN INJ 300DOSE	157
COMPRESSOR MIS NEBULIZE	176	COSENTYX UNO INJ 300/2ML	157
COMPRESSOR MIS NEBULIZR	176	<i>cough/chest liq 20-400</i>	65
<i>compro sup 25mg</i>	90	<i>cough child liq 5-100/5</i>	65
CONCEPTIONXR MIS MOTILITY	129	<i>cough cong liq 5-100/5</i>	65
CONDOMS MIS	200	<i>coughtab tab 200mg</i>	61
<i>cong/cough liq 5-100/5</i>	65	COVERLET MIS STRIPS	198
<i>constulose sol 10gm/15</i>	75	CPAP & BIPAP MIS HOSE	173
CONVERSION MIS BABY SZ1	173	CPAP MASK MIS WIPES	173
CONVERSION MIS BABY SZ2	173	CPAP NEURAL MIS PRE-WASH	173
CONVERSION MIS BABY SZ3	173	CRANBERRY CAP URIN COM	110
COOL MIST MIS 0.8 GAL	178	CRAYON STRIP MIS BANDAGE	198
COOL MIST MIS 1.2 GAL	178	<i>creamies chw 600-400</i>	137
COOL MIST MIS 1.3 GAL	178	<i>creamy face liq wash 4%</i>	152
COOL MIST MIS 1 GALLON	178	<i>critic-aid oin 2%</i>	156
COOL MIST MIS 2 GALLON	178	<i>cromolyn sodium nasal aerosol soln 5.2</i>	
<i>coral calciu cap plus</i>	116	<i>mg/act (4%)</i>	60
CORLANOR SOL 5MG/5ML	53	<i>cromolyn sodium ophth soln 4%</i>	149
CORLANOR TAB 5MG	53	<i>cromolyn sodium soln nebu 20 mg/2ml</i>	67
CORLANOR TAB 7.5MG	53	<i>crysel-28 tab 28 tabs</i>	34
CORTICARE B CAP	133	<i>cultrl total cap balance</i>	77
<i>cortisone cre 1%</i>	159	CULTURE KIDS PAK PROB FIB	79
<i>cortisone gel 1%</i>	159	CULTURELLE CAP	79
<i>cortisone lot 1%</i>	159	CULTURELLE CAP ADV REG	77
<i>cortisone oin 1%</i>	160	<i>culturelle cap hlth/wel</i>	79
<i>cortiz femin cre 1% itch</i>	89	CULTURELLE CAP IMMUNITY	79
<i>cortizone-10 cre /aloe 1%</i>	159	CULTURELLE CAP PRO-WELL	79
<i>cortizone-10 cre 1% night</i>	159	CULTURELLE CAP WOMENS	77
<i>cortizone-10 cre aloe 1%</i>	159	<i>culturelle chw</i>	130
<i>cortizone-10 cre healing</i>	159	<i>culturelle chw kids</i>	130
<i>cortizone-10 cre moisture</i>	159	CULTURELLE CHW KIDS	79
<i>cortizone-10 cre plus</i>	159	CULTURELLE CHW MULTIVIT	127
<i>cortizone-10 cre ultra 1%</i>	159	<i>culturelle chw womens</i>	78
<i>cortizone-10 gel 1%</i>	159	CULTURELLE PAK KIDS	79
<i>cortizone-10 gel cooling</i>	159	CULTURELLE PAK PROBIOT	79
<i>cortizone-10 lot diab/1%</i>	159	CULTUR KIDS CHW PURELY	79
<i>cortizone-10 lot eczema</i>	160	CULTUR KIDS POW PURELY	79
<i>cortizone-10 lot hydraten</i>	160	<i>curae tab 1.5mg</i>	31
<i>cortizone-10 lot psoriasi</i>	160	<i>curanol liq 160/5ml</i>	97
<i>cortizone-10 oin 1%</i>	160	<i>curelief liq 12.5/5ml</i>	55

CURITY PREP PAD ALCOHOL	203	<i>cvs dry eye dro relief</i>	148
<i>cvs acetamin tab 325mg</i>	95	CVS DRY SPR MOUTH	151
<i>cvs acne tre cre 10%</i>	152	<i>cvs electrol sol</i>	139
<i>cvs allerg d tab 60-120mg</i>	64	<i>cvs fiber cap 0.52gm</i>	72
<i>cvs allergy cap 25mg</i>	54	<i>cvs fiber chw gummies</i>	72
<i>cvs allergy chw 12.5mg</i>	56	<i>cvs fish oil cap 1/2 size</i>	140
<i>cvs allergy dro 0.035%op</i>	149	<i>cvs fish oil cap 1000mg</i>	140
<i>cvs allergy liq 25/10ml</i>	55	<i>cvs fish oil cap 1200mg</i>	141
<i>cvs allergy sol 5mg/5ml</i>	58	<i>cvs fish oil cap 500mg</i>	140
<i>cvs allergy tab 10mg</i>	56	CVS FLEX FAB MIS BANDAG	198
<i>cvs allergy tab 180mg</i>	57	<i>cvs gas relf chw 125mg</i>	86
<i>cvs allergy tab 5-120mg</i>	63	<i>cvs gas relf chw 80mg</i>	86
<i>cvs allergy tab 5mg</i>	58	CVS HAIR/SKN TAB NAILS	133
<i>cvs allergy tab chldrn</i>	56	<i>cvs ibuprof dro 50/1.25</i>	101
<i>cvs antacid/ sus anti-gas</i>	81, 82	<i>cvs ibuprofe sus 100/5ml</i>	101
<i>cvs antacid chw 1000mg</i>	80	CVS IMMUNE CAP SUPPORT	116
CVS ANTACID CHW 1177MG	80	<i>cvs inner tab ear plus</i>	134
<i>cvs antacid chw 750mg</i>	80	<i>cvs iron tab 27mg</i>	143
<i>cvs antacid sus antigas</i>	82	<i>cvs iron tab 325mg</i>	142
<i>cvs antacid sus anti-gas</i>	81	<i>cvs itch rel cre 1%</i>	156
<i>cvs antacid sus supreme</i>	81	<i>cvs ivermect lot 0.5%</i>	161
CVS ANTI-BAC MIS	198	CVS KETONE TES CARE	163
CVS ANTI-BAC MIS BANDAGE	198	CVS LANCETS MIS 21G	183
CVS ANTI-BAC MIS WATERPRO	198	CVS LANCETS MIS 30G	183
<i>cvs aspirin tab 325mg</i>	93	CVS LANCETS MIS 33G	183
<i>cvs aspirin tab 81mg ec</i>	94	CVS LANCETS MIS ORIGINAL	183
<i>cvs athletes cre foot 1%</i>	155	CVS LANCETS MIS THIN 26G	183
<i>cvs b1 tab 100mg</i>	106	CVS LANCETS MIS THIN 30G	183
<i>cvs b-1 tab 100mg</i>	106	CVS LANCETS MIS THIN 33G	183
CVS BALANCED TAB B100	110	<i>cvs laxative chw 15mg</i>	71
<i>cvs balanced tab b50</i>	134	<i>cvs laxative tab 25mg</i>	71
<i>cvs ca/mg/zn tab</i>	138	<i>cvs lubrican dro 0.5%</i>	146
<i>cvs calcium tab 600mg</i>	135	<i>cvs lubricat oin</i>	147
<i>cvs children chw complete</i>	131	<i>cvs lubricnt dro 0.5% op</i>	146
<i>cvs childs chw 80mg</i>	96	<i>cvs miconazo cre 7</i>	88
<i>cvs c-lax tab 5mg</i>	70	<i>cvs mucus dm tab 30-600mg</i>	66
CVS CLEAR MIS BANDAGES	198	<i>cvs mucus dm tab 60-1200</i>	67
<i>cvs d3 cap 1000unit</i>	107	<i>cvs mucus d tab 60-600mg</i>	64
<i>cvs d3 cap 250mcg</i>	108	<i>cvs mucus er tab 600mg</i>	62
<i>cvs d3 cap 5000unit</i>	108	<i>cvs mucus tab 1200 er</i>	62
<i>cvs d3 cap 50mcg</i>	107	<i>cvs naproxen tab 220mg</i>	101
<i>cvs daily chw gummies</i>	127	CVS NASAL AER 0.9%	61
CVS DAILY POW FIBER	74	<i>cvs natural dro tears</i>	147
CVS DIAPER CRE A/D ZINC	160	<i>cvs natural pow fiber</i>	73

<i>cvx pinworm sus 50mg/ml</i>	23	<i>d3-50 cap 50000unt</i>	108
CVS PLASTIC MIS BANDAGE	198	<i>d3 adult chw 1000unit</i>	109
<i>cvx purelax pak</i>	75	<i>d3 cap 1000unit</i>	107
<i>cvx purelax pow</i>	75	<i>d3 cap 2000unit</i>	107
<i>cvx quality cap sleep</i>	163	<i>d3 high pot cap 125mcg</i>	108
<i>cvx ringworm cre 1%</i>	156	<i>d3 high pote cap 1000unit</i>	107
<i>cvx senna pl tab 8.6-50mg</i>	75	<i>d3 high pote cap 50mcg</i>	107
<i>cvx senna tab 8.6mg</i>	71	<i>d3 high pote tab 400unit</i>	108
CVS SHEER BA MIS ASSORTED.....	198	<i>d3 hp cap 250mcg</i>	108
CVS SHEER MIS BAND 1.....	198	<i>d3 kids chw 400unit</i>	109
CVS SHEER MIS BAND XL.....	198	<i>d3 maximum cap 5000unit</i>	108
<i>cvx slow rel tab fe 45mg</i>	142	<i>d3 max str cap 250mcg</i>	108
CVS SPOT BAN MIS SHEER	198	<i>d3 super str cap 2000unit</i>	107
<i>cvx stress tab form/zn</i>	110	DAFLONEX-XL CAP	113
<i>cvx super b tab complx/c</i>	110	DAFLONEX-XL TAB	114
<i>cvx toe area sol 1%</i>	155	<i>daily betic tab</i>	119
<i>cvstussin dm liq 20-400mg</i>	65	<i>daily combo tab</i>	119
CVS VISION CAP HEALTH	116	<i>daily diet tab support</i>	119
<i>cvx vit a&d oin</i>	161	<i>daily fiber cap</i>	72
<i>cyanocobalamin inj 1000 mcg/ml</i>	141	<i>daily fiber cap 0.52gm</i>	72
<i>cyclobenzaprine hcl tab 10 mg</i>	106	<i>daily fiber pow 43%</i>	73
<i>cyclobenzaprine hcl tab 5 mg</i>	106	<i>daily fiber pow 51.7%</i>	73
<i>cyclophosphamide cap 25 mg</i>	24	DAILY FIBER POW 51.7%	74
<i>cyclophosphamide cap 50 mg</i>	24	<i>daily fib pow 51.7%</i>	73
CYCLOPHOSPH TAB 25MG	25	DAILY HEART PAK SUPPORT	129
CYCLOPHOSPH TAB 50MG.....	25	<i>daily multi tab men</i>	119
<i>cyclosporine (ophth) emulsion 0.05%</i>	149	<i>daily multi tab minerals</i>	119
<i>cyclosporine cap 100 mg</i>	205	<i>daily multi tab vit/iron</i>	115
<i>cyclosporine cap 25 mg</i>	205	<i>daily multi tab vit/mens</i>	120
<i>cyclosporine modified cap 100 mg</i>	205	<i>daily multi tab vit/min</i>	120
<i>cyclosporine modified cap 25 mg</i>	205	<i>daily multi tab vitamins</i>	114
<i>cyclosporine modified cap 50 mg</i>	205	DAILY MULTI TAB VITAMINS	114
<i>cyclosporine modified oral soln 100 mg/ml</i>	205	<i>daily multi tab womn 50+</i>	120
<i>cyproheptadine hcl syrup 2 mg/5ml</i>	56	DAILY PAK MIS MULTIVIT	129
<i>cyproheptadine hcl tab 4 mg</i>	56	<i>daily psylli pow 25%</i>	72
<i>cyred eq tab</i>	32	<i>daily value tab multivit</i>	114
D		<i>daily vite tab</i>	114
<i>d 1000 cap 1000unit</i>	107	<i>daily-vite tab</i>	114
D3/VITAMIN C TAB /ZINC.....	110	<i>daily vite tab iron</i>	115
D3 + K2 DOTS TAB.....	110	<i>daily vit tab</i>	114
<i>d3-1000 cap 1000unit</i>	107	<i>danazol cap 100 mg</i>	30
<i>d3 2000 cap 2000unit</i>	107	<i>danazol cap 200 mg</i>	30
<i>d3 5000 cap 5000unit</i>	108	<i>danazol cap 50 mg</i>	30
		<i>dandruff sha 1%</i>	158

<i>dantrolene sodium cap 100 mg</i>	106	<i>desmopressin acetate nasal spray soln</i>	
<i>dantrolene sodium cap 25 mg</i>	106	0.01% (refrigerated)	41
<i>dantrolene sodium cap 50 mg</i>	106	<i>desmopressin acetate tab 0.1 mg</i>	41
<i>dapsone tab 100 mg</i>	24	<i>desmopressin acetate tab 0.2 mg</i>	41
<i>dapsone tab 25 mg</i>	24	<i>desogest-eth estrad & eth estrad tab 0.15-</i>	
<i>darunavir tab 600 mg</i>	20	0.02/0.01 mg(21/5)	35
<i>darunavir tab 800 mg</i>	20	<i>desonide cream 0.05%</i>	158
<i>dasetta tab 1/35</i>	34	<i>desonide lotion 0.05%</i>	158
<i>dasetta tab 7/7/7</i>	35	<i>desonide oint 0.05%</i>	158
DAYHIST ALRG TAB 12 HOUR	54	<i>desoximetasone cream 0.05%</i>	158
<i>daysee tab</i>	35	<i>desoximetasone cream 0.25%</i>	158
DDROPS LIQ 2000UNIT	109	<i>desoximetasone gel 0.05%</i>	158
<i>deblitane tab 0.35mg</i>	31	<i>desoximetasone oint 0.25%</i>	158
DEBROX SOL 6.5% OT	149	<i>dexamethasone elixir 0.5 mg/5ml</i>	29
<i>decara cap 50000unt</i>	108	<i>dexamethasone sodium phosphate ophth</i>	
<i>decongestant tab 120mg er</i>	59	<i>soln 0.1%</i>	148
<i>decongestant tab 30mg</i>	58	<i>dexamethasone soln 0.5 mg/5ml</i>	29
DECUBI-VITE CAP	116	<i>dexamethasone tab 0.5 mg</i>	29
<i>deep sea spr 0.65%</i>	61	<i>dexamethasone tab 0.75 mg</i>	29
DEKAS CAP ESSENTIA	114	<i>dexamethasone tab 1.5 mg</i>	29
DEKAS CHW BARIATRI	127	<i>dexamethasone tab 1 mg</i>	29
DEKAS LIQ ESSENTIA	115	<i>dexamethasone tab 2 mg</i>	29
DEKAS PLUS CAP	116	<i>dexamethasone tab 4 mg</i>	29
DEKAS PLUS CAP OCEAN	116	<i>dexamethasone tab 6 mg</i>	29
DEKAS PLUS CHW	127	DEXCOM G6 MIS RECEIVER	180
DEKAS PLUS LIQ	131	DEXCOM G6 MIS SENSOR	180
<i>delsym cough liq cong dm</i>	65	DEXCOM G6 MIS TRANSMIT	181
<i>delta d3 tab 400unit</i>	108	DEXCOM G7 MIS RECEIVER	180
<i>delyla tab 0.1-0.02</i>	33	DEXCOM G7 MIS SENSOR	181
<i>denta 5000 cre plus</i>	150	<i>dextromethorphan-guaifenesin liquid 10-</i>	
<i>denta 5000 cre plus 2pk</i>	150	100 mg/5ml	65
<i>dentagel gel 1.1%</i>	151	<i>dextromethorphan-guaifenesin syrup 10-</i>	
<i>depo-testost inj 100mg/ml</i>	30	100 mg/5ml	66
<i>depo-testost inj 200mg/ml</i>	30	<i>dextromethorphan-guaifenesin tab er 12hr</i>	
<i>dermarest lot 1%</i>	160	60-1200 mg	67
DERMAVITE TAB	120	DIABETES PAK HEALTH	129
DESCOVY TAB 120-15MG	21	DIABET HLTH PAK SUPPORT	129
DESCOVY TAB 200/25MG	21	<i>diabetic tus liq 20-400mg</i>	66
<i>desenex cre 1%</i>	156	<i>diabetic tus liq cough dm</i>	65
<i>desenex pow 2%</i>	156	<i>diabetic tus liq dm</i>	65
<i>desitin oin</i>	161	<i>diabets hlth tab formula</i>	120
<i>desmopressin acetate nasal spray soln</i>		<i>diabet tuss syp allergy</i>	54
0.01%	41	<i>diabtc tussn liq 100/5ml</i>	61
		DIALYVIT 800 TAB ZINC 15	112

<i>dialyvite d cap 5000unit</i>	108	<i>diltiazem hcl cap er 24hr 180 mg</i>	44
<i>dialyvite tab 800</i>	112	<i>diltiazem hcl cap er 24hr 240 mg</i>	44
<i>dialyvite tab 800/d</i>	120	<i>diltiazem hcl coated beads cap er 24hr 120</i>	
DIALYVITE TAB 800/IRON.....	112	<i>mg</i>	45
DIALYVITE TAB 800/ZINC	112	<i>diltiazem hcl coated beads cap er 24hr 180</i>	
<i>diamode tab 2mg</i>	76	<i>mg</i>	45
<i>diarrhea rel sus 262/15ml</i>	77	<i>diltiazem hcl coated beads cap er 24hr 240</i>	
<i>diarrhea sus 262/15ml</i>	77	<i>mg</i>	45
DIASTIX TES REAGENT	163	<i>diltiazem hcl coated beads cap er 24hr 300</i>	
DIASTIX TES STRIPS	163	<i>mg</i>	45
DIATHRIVE MIS 31GX5MM	166	<i>diltiazem hcl coated beads cap er 24hr 360</i>	
DIATHRIVE MIS 31GX8MM	168	<i>mg</i>	45
DIATHRIVE MIS 32GX4MM.....	170	<i>diltiazem hcl extended release beads cap</i>	
DIATHRIVE MIS LANCETS.....	183	<i>er 24hr 120 mg</i>	45
DIATHRIVE MIS UT 30G.....	183	<i>diltiazem hcl extended release beads cap</i>	
<i>diclofenac potassium tab 50 mg</i>	99	<i>er 24hr 180 mg</i>	45
<i>diclofenac sodium gel 1% (1.16%</i>		<i>diltiazem hcl extended release beads cap</i>	
<i>diethylamine equiv)</i>	156	<i>er 24hr 240 mg</i>	45
<i>diclofenac sodium ophth soln 0.1%</i>	149	<i>diltiazem hcl extended release beads cap</i>	
<i>diclofenac sodium tab delayed release 25</i>		<i>er 24hr 300 mg</i>	45
<i>mg</i>	100	<i>diltiazem hcl extended release beads cap</i>	
<i>diclofenac sodium tab delayed release 50</i>		<i>er 24hr 360 mg</i>	45
<i>mg</i>	100	<i>diltiazem hcl extended release beads cap</i>	
<i>diclofenac sodium tab delayed release 75</i>		<i>er 24hr 420 mg</i>	45
<i>mg</i>	100	<i>diltiazem hcl tab 120 mg</i>	44
<i>diclofenac sodium tab er 24hr 100 mg</i>	100	<i>diltiazem hcl tab 30 mg</i>	44
<i>dicloxacillin sodium cap 250 mg</i>	17	<i>diltiazem hcl tab 60 mg</i>	44
<i>dicloxacillin sodium cap 500 mg</i>	17	<i>diltiazem hcl tab 90 mg</i>	44
<i>dicyclomine hcl cap 10 mg</i>	83	<i>diltiazem hcl tab er 24hr 180 mg</i>	44
<i>dicyclomine hcl oral soln 10 mg/5ml</i>	83	<i>diltiazem hcl tab er 24hr 240 mg</i>	44
<i>dicyclomine hcl tab 20 mg</i>	83	<i>diltiazem hcl tab er 24hr 300 mg</i>	45
DIFICID SUS	19	<i>diltiazem hcl tab er 24hr 360 mg</i>	45
DIFICID TAB 200MG.....	19	<i>diltiazem hcl tab er 24hr 420 mg</i>	45
<i>diflunisal tab 500 mg</i>	95	<i>dilt-xr cap 120mg</i>	44
<i>digestive cap health</i>	78	<i>dilt-xr cap 180mg</i>	44
<i>digestive cap probioti</i>	78	<i>dilt-xr cap 240mg</i>	44
<i>digoxin oral soln 0.05 mg/ml</i>	42	<i>dimethyl fumarate capsule delayed release</i>	
<i>digoxin tab 125 mcg (0.125 mg)</i>	42	<i>120 mg</i>	93
<i>digoxin tab 250 mcg (0.25 mg)</i>	42	<i>dimethyl fumarate capsule delayed release</i>	
<i>digoxin tab 62.5 mcg (0.0625 mg)</i>	42	<i>240 mg</i>	93
<i>diltiazem hcl cap er 12hr 120 mg</i>	44	<i>dimethyl fumarate capsule dr starter pack</i>	
<i>diltiazem hcl cap er 12hr 60 mg</i>	44	<i>120 mg & 240 mg</i>	93
<i>diltiazem hcl cap er 12hr 90 mg</i>	44	<i>diotame sus 262/15ml</i>	77
<i>diltiazem hcl cap er 24hr 120 mg</i>	44	<i>diphedryl liq 12.5/5ml</i>	55

<i>diphenhydramine hcl (sleep) tab 50 mg</i>	91	<i>double oin antibiot</i>	154
<i>diphenhydramine hcl cap 25 mg</i>	54	DOVATO TAB 50-300MG.....	21
<i>diphenhydramine hcl cap 50 mg</i>	54	<i>doxazosin mesylate tab 1 mg</i>	48
<i>diphenhydramine hcl elixir 12.5 mg/5ml</i> ...	56	<i>doxazosin mesylate tab 2 mg</i>	48
<i>diphenhydramine hcl liquid 12.5 mg/5ml</i> .	55	<i>doxazosin mesylate tab 4 mg</i>	48
<i>diphenhydramine hcl tab 25 mg</i>	55	<i>doxazosin mesylate tab 8 mg</i>	48
<i>diphenoxylate w/ atropine liq 2.5-0.025</i>		<i>doxercalciferol cap 0.5 mcg</i>	42
<i>mg/5ml</i>	76	<i>doxercalciferol cap 1 mcg</i>	42
<i>diphenoxylate w/ atropine tab 2.5-0.025</i>		<i>doxercalciferol cap 2.5 mcg</i>	42
<i>mg</i>	76	<i>doxycycline hyclate cap 100 mg</i>	19
<i>diphen tab 25mg</i>	55	<i>doxycycline hyclate cap 50 mg</i>	19
<i>dipyridamole tab 25 mg</i>	145	<i>doxycycline hyclate tab 100 mg</i>	19
<i>dipyridamole tab 50 mg</i>	145	<i>doxycycline hyclate tab 20 mg</i>	19
<i>dipyridamole tab 75 mg</i>	145	<i>doxycycline monohydrate for susp 25</i>	
<i>disopyramide phosphate cap 100 mg</i>	46	<i>mg/5ml</i>	19
<i>disopyramide phosphate cap 150 mg</i>	46	<i>dramamine chw motion</i>	85
DISPOSABLE MIS FACE MAS	179	<i>dramamine tab 25mg</i>	85
<i>dm max adult liq 20-400</i>	65	<i>dr gs clear sol nail 1%</i>	155
<i>docosanol cream 10%</i>	158	<i>dronabinol cap 10 mg</i>	85
<i>docusate calcium cap 240 mg</i>	74	<i>dronabinol cap 2.5 mg</i>	85
<i>docusate sodium cap 100 mg</i>	74	<i>dronabinol cap 5 mg</i>	85
<i>docusate sodium cap 250 mg</i>	74	DROPLET LANC MIS 30G.....	183
<i>docusate sodium liquid 150 mg/15ml</i>	74	DROPLET PERS MIS LANC 30G	183
DOCUSATE SOD SYP 60/15ML.....	75	DROPSAFE MIS 31GX5MM	166
<i>docuzen tab 8.6-50mg</i>	75	<i>drosiprenone-ethinyl estradiol tab 3-0.02</i>	
<i>dodex inj</i>	141	<i>mg</i>	33
<i>dofetilide cap 125 mcg (0.125 mg)</i>	46	<i>drosiprenone-ethinyl estradiol tab 3-0.03</i>	
<i>dofetilide cap 250 mcg (0.25 mg)</i>	46	<i>mg</i>	33
<i>dofetilide cap 500 mcg (0.5 mg)</i>	46	<i>dry eye cap formula</i>	116
<i>dok tab 100mg</i>	74	<i>dry eye relf oin night</i>	147
<i>donepezil hydrochloride orally</i>		<i>dry-eye relf oin nighttim</i>	147
<i>disintegrating tab 10 mg</i>	91	<i>dry eye rlf dro</i>	148
<i>donepezil hydrochloride orally</i>		<i>dry mouth loz cherry</i>	151
<i>disintegrating tab 5 mg</i>	91	<i>dry mouth loz melon</i>	151
<i>donepezil hydrochloride tab 10 mg</i>	91	<i>dry mouth loz mint</i>	151
<i>donepezil hydrochloride tab 23 mg</i>	91	DRY MOUTH SOL ORAL RIN.....	151
<i>donepezil hydrochloride tab 5 mg</i>	91	<i>dual prenata cap immunity</i>	79
DOPTELET TAB 20MG.....	143	<i>dulcolax pnk cap 100mg</i>	74
<i>dorzolamide hcl ophth soln 2%</i>	149	<i>dulcolax ss cap 100mg</i>	74
<i>dorzolamide hcl-timolol maleate ophth soln</i>		DUPIXENT INJ 200/1.14.....	157
<i>2-0.5%</i>	148	DUPIXENT INJ 200MG	157
DORZOLAMIDE SOL 2%.....	149	DUPIXENT INJ 300/2ML	157, 158
DOSOKAP TAB	110	DUREX EXTRA MIS SENSITIV	200
<i>double antib oin</i>	154	DUREX MIS REALFEEL	202

<i>d-vitamin dro 400unit</i>	109	EASY NEB MIS.....	176
<i>d-vite pedia dro 400unit</i>	109	EASY RELEASE PAD NONSTICK	200
<i>dyna-hex 2 sol 2%</i>	162	EASY TOUCH MIS 31GX3/16	166
<i>dyna-hex 4 sol 4%</i>	162	EASY TOUCH MIS 31GX5/16	168
E		EASY TOUCH MIS 32GX1/4.....	172
<i>e.e.s. 400 tab 400mg</i>	18	EASY TOUCH MIS 32GX5/32.....	170
<i>ear drops dro 6.5%</i>	149	EASY TOUCH MIS 32GX6MM	172
<i>ear drops sol 6.5% ot</i>	149	EASY TOUCH MIS LANC/21G	184
<i>ear health tab formula</i>	134	EASY TOUCH MIS LANC/23G	184
<i>ear health tab plus</i>	134	EASY TOUCH MIS LANC/26G	184
EARLOOP MIS MASK.....	179	EASY TOUCH MIS LANC/28G	184
EAR-LOOP MIS MASK SM.....	179	EASY TOUCH MIS LANC/30G	184
<i>ear wax kit sol 6.5% ot</i>	149	EASY TOUCH MIS LANC/32G	184
<i>ear wax rem dro kit 6.5%</i>	149	EASY TOUCH MIS LANC/33G	184
<i>earwax remov dro kit</i>	150	EBASE CONTRO MIS KIT	173
<i>earwax remov dro system</i>	150	ECEE PLUS TAB	109
<i>earwax remov sol 6.5%</i>	150	<i>ec-naproxen tab 375mg</i>	101
<i>ear wax remv dro 6.5% ot</i>	149	<i>ec-naproxen tab 500mg</i>	101
<i>earwax remvl dro 6.5% ot</i>	150	<i>econtra os tab 1.5mg</i>	32
<i>earwax remv sol 6.5% ot</i>	150	<i>ecotrin low tab 81mg ec</i>	94
<i>ear wax remv sol 6.5% ot</i>	150	<i>ed-apap liq 80mg/2.5</i>	97
<i>earwax sol removal</i>	150	<i>ed chlorped syp jr</i>	54
EASIVENT MIS.....	175	EDURANT TAB 25MG.....	21
EASIVENT MIS MASK LG.....	175	<i>efavirenz cap 200 mg</i>	21
EASIVENT MIS MASK MED	175	<i>efavirenz cap 50 mg</i>	21
EASIVENT MIS MASK SM	175	<i>efavirenz-emtricitabine-tenofovir df tab</i> <i>600-200-300 mg</i>	22
EASY AIR COM MIS NEBULIZE	176	<i>efavirenz-lamivudine-tenofovir df tab 400-</i> <i>300-300 mg</i>	22
EASY-C CAP IMMUNE.....	113	<i>efavirenz-lamivudine-tenofovir df tab 600-</i> <i>300-300 mg</i>	22
EASY COMFORT MIS 30G.....	184	<i>efavirenz tab 600 mg</i>	21
EASY COMFORT MIS 31GX3/16	166	<i>effer-k tab 25meq ef</i>	139
EASY COMFORT MIS 31GX5/16	168	ELACTIA CAP.....	78
EASY COMFORT MIS 31GX5MM.....	166	<i>eldertonic liq</i>	113
EASY COMFORT MIS 32GX4MM	170	ELIGARD INJ 22.5MG	26
EASY COMFORT MIS 32GX5/32.....	170	ELIGARD INJ 30MG	26
EASY COMFORT MIS LANC/30G	184	ELIGARD INJ 45MG	26
EASY COMFORT MIS TWIST	184	ELIGARD INJ 7.5MG	26
<i>easy-c tab 500mg</i>	113	<i>elinest tab</i>	34
EASY FLOW MIS 300MM	173	ELIQUIS ST P TAB 5MG	145
EASY FLOW MIS 400MM	173	ELIQUIS TAB 2.5MG	144
EASY FLOW MIS AIR NOZZ	173	ELIQUIS TAB 5MG	145
EASY FLOW MIS HEPA FIL.....	173	ELITE COMPRS MIS NEBULIZR	176
EASY FLOW MIS KN 95	179		
<i>easy-lax cap 100mg</i>	74		
<i>easy-lax pls tab 8.6-50mg</i>	75		

<i>elite-ob tab</i>	134	<i>enalapril maleate tab 2.5 mg</i>	47
<i>elixophyllin elx 80/15ml</i>	68	<i>enalapril maleate tab 20 mg</i>	47
ELLA TAB 30MG	32	<i>enalapril maleate tab 5 mg</i>	47
ELON MATRIX TAB 5000	133	ENBREL INJ 25/0.5ML	103
ELON MATRIX TAB 5000 COM	133	ENBREL INJ 50MG/ML	103
ELON MATRIX TAB COMPLETE	133	ENBREL MINI INJ 50MG/ML	103
ELON MATRIX TAB PLUS	133	ENBREL SRCLK INJ 50MG/ML	103
ELON R3 TAB	133	ENCARE SUP 100MG.....	89
<i>eluryng mis</i>	32	<i>endocet tab 10-325mg</i>	99
EMBRACE LANC MIS 21G	184	<i>endocet tab 2.5-325</i>	99
EMBRACE LANC MIS 28G.....	184	<i>endocet tab 5-325mg</i>	99
EMBRACE LANC MIS THIN 30G	184	<i>endocet tab 7.5-325</i>	99
EMERGEN-C CHW IMMUNE/D	127	<i>endur-b tab</i>	112
EMERGEN-C CHW VITA C	127	ENDUR-VM TAB.....	126
EMERGEN-C PAK BLUE.....	128	ENDUR-VM TAB IRON	126
EMERGEN-C PAK FIVE	128	ENERGY POW BOOSTER.....	128
EMERGEN-C PAK HEART	128	<i>enilloring mis</i>	32
EMERGEN-C PAK IMMUNE	128	<i>enoxaparin sodium inj 300 mg/3ml</i>	144
EMERGEN-C PAK JOINT	128	<i>enoxaparin sodium inj soln pref syr 100</i> <i>mg/ml</i>	144
EMERGEN-C PAK KIDZ.....	128	<i>enoxaparin sodium inj soln pref syr 120</i> <i>mg/0.8ml</i>	144
EMERGEN-C PAK MSM LITE	128	<i>enoxaparin sodium inj soln pref syr 150</i> <i>mg/ml</i>	144
EMERGEN-C PAK PINK	128	<i>enoxaparin sodium inj soln pref syr 30</i> <i>mg/0.3ml</i>	144
EMERGEN-C PAK SUPER FR	128	<i>enoxaparin sodium inj soln pref syr 40</i> <i>mg/0.4ml</i>	144
EMERGEN-C PAK VITA C	128	<i>enoxaparin sodium inj soln pref syr 60</i> <i>mg/0.6ml</i>	144
EMERGEN-C PAK VIT D/CA.....	128	<i>enoxaparin sodium inj soln pref syr 80</i> <i>mg/0.8ml</i>	144
EMGALITY INJ 100MG/ML	104	<i>enpresse-28 tab</i>	35
EMGALITY INJ 120MG/ML	104	<i>enskyce tab</i>	32
<i>emtricitabine caps 200 mg</i>	21	ENSPRYNG INJ	205
<i>emtricitabine-tenofovir disoproxil fumarate</i> <i>tab 100-150 mg</i>	21	<i>entacapone tab 200 mg</i>	105
<i>emtricitabine-tenofovir disoproxil fumarate</i> <i>tab 133-200 mg</i>	21	<i>entecavir tab 0.5 mg</i>	22
<i>emtricitabine-tenofovir disoproxil fumarate</i> <i>tab 167-250 mg</i>	21	<i>entecavir tab 1 mg</i>	22
<i>emtricitabine-tenofovir disoproxil fumarate</i> <i>tab 200-300 mg</i>	22	<i>enteric asa tab 325mg ec</i>	95
EMTRIVA SOL 10MG/ML	21	ENTRESTO TAB 24-26MG	53
EMVERM CHW 100MG.....	23	ENTRESTO TAB 49-51MG.....	53
<i>emzahh tab 0.35mg</i>	31	ENTRESTO TAB 97-103MG	53
<i>enalapril maleate & hydrochlorothiazide tab</i> <i>10-25 mg</i>	48	ENTYVIO INJ 108/0.68.....	88
<i>enalapril maleate & hydrochlorothiazide tab</i> <i>5-12.5 mg</i>	48	ENTYVIO INJ 300MG	88
<i>enalapril maleate tab 10 mg</i>	47		

<i>enulose sol 10gm/15</i>	87	<i>eql allergy tab 10-240mg</i>	64
<i>epinephrine solution auto-injector 0.15</i> <i>mg/0.15ml (1:1000)</i>	50	<i>eql allergy tab 25mg</i>	55
<i>epinephrine solution auto-injector 0.15</i> <i>mg/0.3ml (1:2000)</i>	50	<i>eql allergy tab 4mg</i>	54
<i>epinephrine solution auto-injector 0.3</i> <i>mg/0.3ml (1:1000)</i>	50	<i>eql allergy tab chldrn</i>	56
EPIPEN 2-PAK INJ 0.3MG	50	<i>eql antacid chw 1000mg</i>	80
<i>eplerenone tab 25 mg</i>	48	<i>eql antacid chw fruit</i>	80
<i>eplerenone tab 50 mg</i>	48	<i>eql antacid chw pepprmnt</i>	80
<i>epoprostenol sodium for inj 0.5 mg</i>	52	<i>eql aspirin chw 81mg</i>	94
<i>epoprostenol sodium for inj 1.5 mg</i>	52	<i>eql aspirin tab 325mg ec</i>	95
<i>eq 1% hydroc cre</i>	159	<i>eq laxative pow 3350</i>	75
<i>eq 12 hr muc tab 600mg</i>	62	<i>eql b-100 tab complex</i>	112
<i>eq acetamin tab 500mg</i>	95	<i>eql b complx tab 50</i>	111
<i>eq allergy cap 25mg</i>	54	EQL BUTTERFL MIS CLOSURE	198
<i>eq allergy sol 5mg/5ml</i>	58	EQL CALCIUM CAP VIT D	135
<i>eq alrg/cong tab 5-120mg</i>	63	<i>eql calcium tab citr/d3</i>	138
<i>eq antacid chw 1000mg</i>	80	<i>eql calcium tab w/vit d</i>	137
<i>eq antacid chw 750mg</i>	80	<i>eql century tab</i>	120
<i>eq antacid sus max st</i>	82	<i>eql century tab mature</i>	120
<i>eq arthritis gel 1%</i>	156	EQL CENTURY TAB MENS	120
<i>eq aspirin chw 81mg</i>	94	EQL CENTURY TAB WOMENS	120
<i>eq aspirin tab 325mg</i>	93	<i>eql clearlax pow</i>	75
<i>eq calcium tab citr+d</i>	138	<i>eql fiber pow 28.3%</i>	72
<i>eq cimetidin tab 200mg</i>	83	<i>eql fiber pow therapy</i>	73
<i>eq clearlax pow</i>	75	<i>eql firstaid oin antibiot</i>	154
EQ COMPLETE TAB ADULT	120	EQL FIRST MIS AID BAND	198
<i>eq daily cap fiber</i>	72	<i>eql fish oil cap 1000mg</i>	140
<i>eq daily fib pow 25%</i>	72	<i>eql fish oil cap 1200mg</i>	141
<i>eq daily fib pow 51.7%</i>	73	EQL FLEXIBLE MIS FABRIC	198
<i>eq earwax sol 6.5% ot</i>	150	EQL FLEXIBLE MIS FOAM	198
<i>eq ear wax sol removal</i>	150	<i>eql gas gone chw 125mg</i>	86
<i>eq esome mag cap 20mg dr</i>	84	<i>eql gas rlf cap 180mg</i>	86
<i>eq famotidin tab 20mg</i>	83	EQL GENTLE MIS STRIPS	198
<i>eq fiber chw supplmnt</i>	72	<i>eql gentle tab laxative</i>	70
<i>eq gas relie cap 125mg</i>	86	<i>eql heartbrn tab 10mg</i>	83
<i>eq gas relie cap 180mg</i>	86	EQL HVY DUTY MIS STRIPS	198
<i>eq hydrocort cre 1%</i>	159	EQL LANCETS MIS 21G COLR	184
<i>eq ibuprofen sus 100/5ml</i>	101	EQL LANCETS MIS 33G COLR	184
<i>eq ibuprofen tab 200mg</i>	100	EQL LANCETS MIS THIN 26G	184
<i>eql acetamin tab 325mg</i>	95	EQL LANCETS MIS THIN 30G	184
<i>eql acetamin tab 500mg</i>	95	<i>eql laxative chw 15mg</i>	71
<i>eql all day tab allergy</i>	56	<i>eql laxative tab 25mg</i>	71
		<i>eql laxative tab 5mg ec</i>	70
		<i>eql motion tab sickness</i>	85
		<i>eql mucus-dm tab 30-600cr</i>	66

<i>eql mucus-er tab 1200mg</i>	62	<i>erythromycin ethylsuccinate tab 400 mg</i> .	18
<i>eq loratadin tab 10mg</i>	58	<i>erythromycin gel 2%</i>	153
<i>EQL PLASTIC MIS STRIPS</i>	198	<i>ERYTHROMYCIN OIN 5MG/GM</i>	145
<i>EQL SHEER MIS SPOTS</i>	198	<i>erythromycin ophth oint 5 mg/gm</i>	145
<i>EQL SHEER MIS STRIPS</i>	198	<i>erythromycin soln 2%</i>	153
<i>eql smooth pow 51.7%</i>	73	<i>erythromycin tab 250 mg</i>	18
<i>eql smooth pow texture</i>	73	<i>erythromycin tab 500 mg</i>	18
<i>eql stomach chw 262mg</i>	76	<i>erythromycin w/ delayed release particles</i>	
<i>EQL STRIPS MIS</i>	198	<i>cap 250 mg</i>	18
<i>eql tussin syp dm</i>	66	<i>esomeprazole cap 20mg dr</i>	84
<i>eq lubricant dro eye 0.6%</i>	146	<i>esomeprazole magnesium cap delayed</i>	
<i>eq lubricant dro eye drop</i>	147	<i>release 20 mg (base eq)</i>	84
<i>eql vision tab formula</i>	120	<i>esomeprazole magnesium for delayed</i>	
<i>eql vitamin cap d3</i>	108	<i>release susp packet 10 mg</i>	84
<i>eq mucus dm tab 60-1200</i>	67	<i>esomeprazole magnesium tab delayed</i>	
<i>eq mucus er tab 600mg</i>	62	<i>release 20 mg</i>	84
<i>eq mucus rel liq dm</i>	65	<i>essential tab balance</i>	120
<i>eq mucus rel tab 600mg er</i>	62	<i>essentia tab</i>	120
<i>EQ MULTIVITA CHW GUMMIES</i>	130	<i>essentl one tab daily</i>	114
<i>EQ ONE DAILY TAB MENS</i>	120	<i>essent one tab daily</i>	129
<i>eq one daily tab womens</i>	120	<i>estarylla tab 0.25-35</i>	34
<i>EQ ONE DAILY TAB WOMENS</i>	120	<i>ester-c tab</i>	113
<i>eq restore oin pm</i>	147	<i>ester-c tab 1000mg</i>	113
<i>eq senna-s tab 8.6-50mg</i>	75	<i>ester-c tab 500mg</i>	113, 114
<i>eq stool cap softener</i>	74	<i>estradiol & norethindrone acetate tab 0.5-</i>	
<i>eq stool sof cap 100mg</i>	74	<i>0.1 mg</i>	30
<i>EQ STRONG MIS STRIPS</i>	198	<i>estradiol & norethindrone acetate tab 1-0.5</i>	
<i>eq triple oin antibiot</i>	154	<i>mg</i>	30
<i>eq tussin dm syp cgh/chst</i>	66	<i>estradiol tab 0.5 mg</i>	30
<i>eqvegetable tab 8.6mg</i>	71	<i>estradiol tab 1 mg</i>	30
<i>eq vitamins oin a & d</i>	161	<i>estradiol tab 2 mg</i>	30
<i>ERAPID MIS NEBULIZE</i>	176	<i>estradiol td patch weekly 0.025 mg/24hr</i>	30
<i>ERAPID NEB MIS HANDSET</i>	173	<i>estradiol td patch weekly 0.0375 mg/24hr</i>	
<i>ergocalciferol cap 1.25 mg (50000 unit)</i> .	107	<i>(37.5 mcg/24hr)</i>	30
<i>ergocalciferol soln 200 mcg/ml (8000</i>		<i>estradiol td patch weekly 0.05 mg/24hr</i> ..	30
<i>unit/ml)</i>	107	<i>estradiol td patch weekly 0.06 mg/24hr</i> ..	30
<i>ERIVEDGE CAP 150MG</i>	26	<i>estradiol td patch weekly 0.075 mg/24hr</i>	30
<i>erlotinib hcl tab 100 mg (base equivalent)</i>	26	<i>estradiol td patch weekly 0.1 mg/24hr</i>	30
<i>erlotinib hcl tab 150 mg (base equivalent)</i>	26	<i>estradiol vaginal tab 10 mcg</i>	89
<i>erlotinib hcl tab 25 mg (base equivalent)</i> ..	26	<i>ESTROFACTORS TAB</i>	114
<i>errin tab 0.35mg</i>	31	<i>ESTROVEN MEN TAB SUPPLEM</i>	120
<i>erythrocin tab 250mg</i>	18	<i>ethacrynic acid tab 25 mg</i>	49
<i>erythromycin ethylsuccinate for susp 200</i>		<i>ethambutol hcl tab 100 mg</i>	19
<i>mg/5ml</i>	18	<i>ethambutol hcl tab 400 mg</i>	19

<i>ethosuximide cap 250 mg</i>	105	<i>ex-lax ultra tab 5mg ec</i>	70
<i>ethosuximide soln 250 mg/5ml</i>	105	EXPECT CHILD LIQ 200M/5ML.....	62
<i>ethynodiol diacetate & ethinyl estradiol tab</i> <i>1 mg-35 mcg</i>	33	EXTAVIA INJ 0.3MG	93
<i>ethynodiol diacetate & ethinyl estradiol tab</i> <i>1 mg-50 mcg</i>	33	<i>eye drops dro 0.25%</i>	146
<i>etodolac cap 200 mg</i>	100	<i>eye drops dro 0.5-0.9%</i>	147
<i>etodolac cap 300 mg</i>	100	<i>eye drops sol relief</i>	148
<i>etodolac tab 400 mg</i>	100	<i>eye health & tab lutein</i>	120
<i>etodolac tab 500 mg</i>	100	EYE HEALTH CAP.....	116
<i>etodolac tab er 24hr 400 mg</i>	100	EYE HEALTH CAP ADLT 50+	116
<i>etodolac tab er 24hr 500 mg</i>	100	EYE HEALTH TAB LUTEIN	120
<i>etodolac tab er 24hr 600 mg</i>	100	<i>eye itch rel dro 0.035%op</i>	149
<i>etonogestrel-ethinyl estradiol va ring 0.12-</i> <i>0.015 mg/24hr</i>	32	<i>eye lubrican oin op</i>	147
<i>etoposide cap 50 mg</i>	27	EYE MULTIVIT TAB SODIUM.....	120
<i>etravirine tab 100 mg</i>	21	<i>eye vitamins cap</i>	116
<i>etravirine tab 200 mg</i>	21	<i>eye-vites tab</i>	120
EUCRISA OIN 2%.....	157	<i>ezetimibe tab 10 mg</i>	51
<i>euthyrox tab 100mcg</i>	39	E-ZJECT LANC MIS 33G.....	184
<i>euthyrox tab 112mcg</i>	39	E-Z JECT MIS 21G.....	183
<i>euthyrox tab 125mcg</i>	39	E-Z JECT MIS 21G COLR.....	183
<i>euthyrox tab 137mcg</i>	39	E-Z JECT MIS 30G.....	183
<i>euthyrox tab 150mcg</i>	39	E-Z JECT MIS 32G COLR.....	183
<i>euthyrox tab 175mcg</i>	39	E-Z JECT MIS LANC 21G.....	183
<i>euthyrox tab 200mcg</i>	40	E-Z JECT MIS THIN 26G	183
<i>euthyrox tab 25mcg</i>	38	EZ-LETS 21G MIS LANCETS.....	184
<i>euthyrox tab 50mcg</i>	39	EZ-LETS 26G MIS LANCETS	184
<i>euthyrox tab 75mcg</i>	39	EZ-LETS 28G MIS LANCETS	184
<i>euthyrox tab 88mcg</i>	39	EZ-LETS 30G MIS LANCETS.....	184
EVAC POW	74	F	
<i>evac-u-gen tab 8.6mg</i>	71	FABRIC BANDG MIS ASSORTED	198
EVAP HUMIDFR MIS 1.5 GAL	178	FABRIC BANDG MIS FLEXIBLE.....	198
EVAP HUMIDFR MIS 2 GALLON	178	FACE MASK MIS 3 PLY	179
<i>everolimus tab 10 mg</i>	27	FACE MASK MIS 3-PLY	179
<i>everolimus tab 2.5 mg</i>	27	FACE MASK MIS EARLOOP	179, 180
<i>everolimus tab 5 mg</i>	27	FACE MASK MIS N-100	180
<i>everolimus tab 7.5 mg</i>	27	FACE MASK MIS R95 PART	180
EVOLUTION60 POW	128	FACE MASK MIS SURG/DIS.....	180
EVOTAZ TAB 300-150.....	21	FACE MASKS MIS 3 LAYER	180
<i>ex cleansing sol</i>	89	<i>falmina tab</i>	33
<i>exemestane tab 25 mg</i>	26	<i>famciclovir tab 125 mg</i>	23
EX-LAX CHW 15MG.....	71	<i>famciclovir tab 250 mg</i>	23
<i>ex-lax tab max st</i>	71	<i>famciclovir tab 500 mg</i>	23
		<i>famotidine for susp 40 mg/5ml</i>	83
		<i>famotidine tab 10 mg</i>	83
		<i>famotidine tab 20 mg</i>	83

<i>famotidine tab 40 mg</i>	83	<i>ferrous sulfate tab ec 324 mg (65 mg fe equivalent)</i>	142
FANTASY LUBR MIS.....	200	<i>ferrous sulfate tab ec 325 mg (65 mg fe equivalent)</i>	142
FANTASY LUBR MIS COLORS	200	<i>ferrous sulfate tab er 45 mg (elemental fe)</i>	142
FANTASY LUBR MIS SPERMICI.....	200	<i>ferrous sul sol 220/5ml</i>	142
FANTASY MIS LUBRICAT	200	<i>fever/pain sus 160/5ml</i>	97
FASENRA INJ 30MG/ML	69	FEVERALL INF SUP 80MG	97
FASENRA PEN INJ 30MG/ML.....	69	<i>feverall sup 120mg</i>	97
FASTCLIX MIS LANCETS.....	185	FEVERALL SUP 325MG	97
<i>fast relief sup 10mg</i>	70	<i>feverall sup 650mg</i>	97
FC2 FEMALE MIS CONDOM	202	<i>fe-vite iron sol 15mg/ml</i>	142
<i>felodipine tab er 24hr 10 mg</i>	45	<i>fevr reducng sup 120mg</i>	97
<i>felodipine tab er 24hr 2.5 mg</i>	45	<i>fexofen/pse tab 60-120mg</i>	64
<i>felodipine tab er 24hr 5 mg</i>	45	<i>fexofenadine hcl tab 180 mg</i>	57
FEMQUIL CAP	133	<i>fexofenadine hcl tab 60 mg</i>	57
<i>fenofibrate micronized cap 134 mg</i>	51	<i>fexofenadine-pseudoephedrine tab er 24hr 180-240 mg</i>	64
<i>fenofibrate micronized cap 200 mg</i>	51	<i>fiber adult chw gummies</i>	72
<i>fenofibrate micronized cap 67 mg</i>	51	<i>fiber gummy chw bears</i>	72
<i>fenofibrate tab 145 mg</i>	51	<i>fiber laxtiv cap 0.52gm</i>	72
<i>fenofibrate tab 160 mg</i>	51	<i>fiber select chw gummies</i>	72
<i>fenofibrate tab 48 mg</i>	51	<i>fiber therap cap 0.52gm</i>	72
<i>fenofibrate tab 54 mg</i>	51	FIFTY50 MIS 31GX3/16	166
<i>fantanyl td patch 72hr 100 mcg/hr</i>	98	FIFTY50 MIS 31GX5/16	168
<i>fantanyl td patch 72hr 12 mcg/hr</i>	98	FIFTY50 MIS 31GX5MM.....	166
<i>fantanyl td patch 72hr 25 mcg/hr</i>	98	FIFTY50 PEN MIS 31GX8MM	168
<i>fantanyl td patch 72hr 50 mcg/hr</i>	98	FIFTY50 PEN MIS 32GX4MM	170
<i>fantanyl td patch 72hr 75 mcg/hr</i>	98	FIFTY50 PEN MIS 32GX6MM.....	172
<i>ferate tab 27mg</i>	143	FIFTY50 PREP PAD PADS	203
<i>fergon tab 27mg</i>	143	FIFTY50 SAFE MIS LANCETS	185
<i>ferosul tab 325mg</i>	142	FILTER AIR MIS PP	173
FERRETTIS TAB 325MG.....	143	<i>finasteride tab 1 mg</i>	161
<i>ferrocite tab 324mg</i>	143	<i>finasteride tab 5 mg</i>	90
<i>ferrotabs tab</i>	143	<i>finest fish liq oil</i>	141
<i>ferrous fumarate tab 324 mg (106 mg elemental fe)</i>	143	<i>finest fish liq oil/kids</i>	141
<i>ferrous gluconate tab 240 mg (27 mg elemental fe)</i>	143	<i>finest nutrt cap vit d3</i>	107
<i>ferrous gluc tab 324mg</i>	143	FINGERSTIX MIS LANCETS.....	185
<i>ferrous sulfate soln 220 mg/5ml (44 mg/5ml elemental fe)</i>	142	<i>ingolimod hcl cap 0.5 mg (base equiv)</i>	93
<i>ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe)</i>	142	FIRST AID MIS FLEX FAB.....	198
<i>ferrous sulfate tab 27 mg (elemental fe)</i> .	142	FIRST AID NO PAD STICK	200
<i>ferrous sulfate tab 325 mg (65 mg elemental fe)</i>	142	FIRST AID OIN 10%.....	163
		<i>first aid oin antibiot</i>	154

<i>first aid sol 10%</i>	163	<i>fluconazole for susp 40 mg/ml</i>	20
<i>fish oil cap 1000mg</i>	140	<i>fluconazole tab 100 mg</i>	20
FISH OIL CAP 1000MG	140	<i>fluconazole tab 150 mg</i>	20
<i>fish oil cap 1200mg</i>	141	<i>fluconazole tab 200 mg</i>	20
FISH OIL CAP 1360MG	141	<i>fluconazole tab 50 mg</i>	20
FISH OIL CAP 1400MG	140	<i>fludrocortisone acetate tab 0.1 mg</i>	30
<i>fish oil cap 435mg</i>	140	<i>flunisolide nasal soln 25 mcg/act (0.025%)</i>	60
<i>fish oil chw gummies</i>	141	<i>fluocinolone acetonide cream 0.025%</i> ...	158
<i>fish oil con cap 1000mg</i>	140	<i>fluocinolone acetonide oint 0.025%</i>	158
<i>fish oil con cap 300mg</i>	140	<i>fluocinolone acetonide soln 0.01%</i>	158
FITNESS TABS TAB MEN	120	<i>fluocinonide cream 0.05%</i>	158
FITNESS TABS TAB WOMEN.....	120	<i>fluocinonide gel 0.05%</i>	158
<i>flanders oin buttocks</i>	161	<i>fluocinonide oint 0.05%</i>	158
<i>flavor chews chw 750mg</i>	80	<i>fluocinonide soln 0.05%</i>	158
<i>flecainide acetate tab 100 mg</i>	46	<i>fluoridex pst 1.1%</i>	151
<i>flecainide acetate tab 150 mg</i>	46	<i>fluorimax pst 5000</i>	151
<i>flecainide acetate tab 50 mg</i>	46	<i>fluorometholone ophth susp 0.1%</i>	148
FLEX BANDAGE MIS	198	<i>fluorouracil cream 5%</i>	158
FLEX BANDAGE MIS FABRIC.....	198	<i>flurbiprofen tab 100 mg</i>	100
<i>flexgen tab</i>	113	<i>flurbiprofen tab 50 mg</i>	100
FLEXICHAMBER MIS.....	175	<i>fluticasone furoate-vilanterol aero powd ba</i> <i>100-25 mcg/act</i>	68
FLEXICHAMBER MIS MASK LRG	176	<i>fluticasone furoate-vilanterol aero powd ba</i> <i>200-25 mcg/act</i>	68
FLEXICHAMBER MIS MASK SM	176	<i>fluticasone propionate aer pow ba 100</i> <i>mcg/act</i>	68
FLINTSTONES CHW BONE BLD.....	130	<i>fluticasone propionate aer pow ba 250</i> <i>mcg/act</i>	68
<i>flintstones chw complete</i>	131	<i>fluticasone propionate aer pow ba 50</i> <i>mcg/act</i>	68
FLINTSTONES CHW COMPLETE.....	130	<i>fluticasone propionate cream 0.05%</i>	159
<i>flintstones chw ext iron</i>	132	<i>fluticasone propionate hfa inhal aer 110</i> <i>mcg/act</i>	68
FLINTSTONES CHW GUMMIES	130	<i>fluticasone propionate hfa inhal aer 220</i> <i>mcg/act</i>	68
FLINTSTONES CHW IMMUNITY	130	<i>fluticasone propionate hfa inhal aero 44</i> <i>mcg/act</i>	68
<i>flintstones chw multivit</i>	130	<i>fluticasone propionate nasal susp 50</i> <i>mcg/act</i>	60
<i>flintstones chw my first</i>	130	<i>fluticasone propionate oint 0.005%</i>	159
<i>flintstones chw omega-3</i>	130	<i>fluticasone-salmeterol aer powder ba 100-</i> <i>50 mcg/act</i>	68
<i>flintstones chw pls calc</i>	130		
FLINTSTONES CHW SOUR GUM	130		
FLINTSTONES CHW TODDLER.....	130		
<i>flintstones chw w/iron</i>	132		
FLORAJEN CAP ACIDOPHI	78		
FLORAJEN CAP WOMEN	78		
<i>floranex gra</i>	78		
<i>floranex tab</i>	78		
FLORIVA DRO PLUS	132		
FLOWING VAPR PAD	179		
FLOWING VAPR PAD W/FAN.....	179		
<i>fluconazole for susp 10 mg/ml</i>	20		

<i>fluticasone-salmeterol aer powder ba 113-14 mcg/act</i>	67	<i>fosinopril sodium tab 40 mg</i>	47
<i>fluticasone-salmeterol aer powder ba 232-14 mcg/act</i>	68	FREEDAVITE TAB	120
<i>fluticasone sus 50mcg</i>	60	FREESTYLE MIS LANCETS.....	185
FLYP HYPERSO MIS CARTRIDG.....	173	<i>freshmelts loz mint</i>	151
FLYP NEBULZR MIS	176	FRUIT C CHW 200MG	114
FLYP NEBULZR MIS POCKET	176	<i>fruity chews chw</i>	130
FOAM ANTACID CHW 80-20MG	81	<i>fruity chews chw /iron</i>	131
<i>foaming face liq wsh 10%</i>	152	<i>ft 24 hour spr 55mcg</i>	60
<i>folate tab 400mcg</i>	141	<i>ft 8hr pain tab 650mg</i>	96
<i>folbee tab</i>	144	<i>ft allergy tab 10mg</i>	56, 58
FOLBIC TAB	141	<i>ft allr rlf tab 60mg</i>	57
<i>folic acid tab 1000mcg</i>	142	<i>ft alrgy&con tab 60-120mg</i>	64
<i>folic acid tab 1 mg</i>	141	<i>ft alrgy rlf cap 25mg</i>	54
<i>folic acid tab 400 mcg</i>	141	<i>ft alrgy rlf liq 12.5/5ml</i>	55
<i>folic acid tab 800mcg</i>	141	<i>ft alrgy rlf tab 180mg</i>	57
<i>folic acid-vitamin b6-vitamin b12 tab 2.2-25-0.5 mg</i>	144	<i>ft alrgy rlf tab 25mg</i>	55
<i>folika-bc tab</i>	112	<i>ft alrgy rlf tab 4mg</i>	54
<i>folplex 2.2 tab</i>	144	<i>ft antacid chw 500mg</i>	80
<i>fondaparinux sodium subcutaneous inj 10 mg/0.8ml</i>	144	<i>ft antacid chw 750mg</i>	80
<i>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml</i>	144	<i>ft antacid sus antigas</i>	81, 82
<i>fondaparinux sodium subcutaneous inj 5 mg/0.4ml</i>	144	<i>ft antibioti oin</i>	154
<i>fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml</i>	144	<i>ft anti-diar cap 2mg</i>	76
<i>foot&sneaker aer 1%</i>	155	<i>ft anti-diar tab 2mg</i>	76
<i>foot repair sol serum 1%</i>	155	<i>ft antifunga cre 1%</i>	155
FORA LANCETS MIS 30G.....	185	<i>ft antifunga cre 2%</i>	156
FORA MIS LANCETS	185	<i>ft arthritis gel 1%</i>	157
<i>formula 3 sol treatmen</i>	155	<i>ft aspirin tab 325mg</i>	93
<i>formula 7 sol</i>	155	<i>ft aspirin tab 325mg ec</i>	95
<i>for sty reli oin</i>	148	<i>ft aspirin tab 81mg</i>	94
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	20	<i>ft chest con tab 400mg</i>	61
<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	48	<i>ft chld pain chw 160mg</i>	96
<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i>	48	<i>ft clearlax pow</i>	75
<i>fosinopril sodium tab 10 mg</i>	47	<i>ft docosan cre 10%</i>	158
<i>fosinopril sodium tab 20 mg</i>	47	<i>ft double oin antibiot</i>	154
		<i>ft earwax sol removal</i>	150
		<i>ft fiber pow 25%</i>	72
		<i>ft fiber pow 27%</i>	72
		<i>ft fiber pow 43%</i>	73
		<i>ft fiber pow 51.7%</i>	73
		<i>ft gas relf chw 80mg</i>	86
		<i>ft gas relie chw 125mg</i>	86
		<i>ft gntle lax sup 10mg</i>	70
		<i>ft ibu child sus 100/5ml</i>	101
		<i>ft ibuprofen cap 200mg</i>	100

<i>ft ibuprofen tab 200mg</i>	100
<i>ft laxative tab 5mg ec</i>	70
<i>ft motion tab 25mg</i>	85
<i>ft mucus rel tab 1200 er</i>	62
<i>ft mucus rel tab 30-600mg</i>	66
<i>ft mucus rel tab 60-1200</i>	67
<i>ft mucus rlf tab 600mg er</i>	62
<i>ft mucus rlf tab 60-600mg</i>	64
<i>ft naproxen cap 220mg</i>	101
<i>ft nite slp tab 25mg</i>	90
<i>ft nsl decon tab 30mg</i>	58
<i>ft omeprazol tab 20mg</i>	84
<i>ft pain relf tab 325mg</i>	95
<i>ft pain reli tab 200mg</i>	100
<i>ft pain reli tab 500mg</i>	95
<i>ft senna lax tab 8.6mg</i>	71
<i>ft senna-s tab 8.6-50mg</i>	75
<i>ft sleep-aid cap 50mg</i>	90
<i>ft sleep aid tab 25mg</i>	90
<i>ft stl soft tab 8.6-50mg</i>	75
<i>ft stomach chw 262mg</i>	76
<i>ft tussin dm liq 20-400mg</i>	65
<i>ft tussin liq 200/10ml</i>	61
<i>ft vitamin cap d3 25mcg</i>	107
<i>ft vitamin cap d3 50mcg</i>	107
<i>ft vitamin tab d3 50mcg</i>	108
FULL KIT NEB MIS SET	173
<i>full spect tab b/ vit c</i>	112
<i>fulvestrant inj soln pref syr 250 mg/5ml</i> ..	26
<i>fungual nail sol erase 1%</i>	155
<i>fungicure sol 1%</i>	155
<i>fungi-guard cre 1%</i>	155
<i>fungi nail liq 1%</i>	155
<i>furosemide oral soln 10 mg/ml</i>	49
<i>furosemide oral soln 8 mg/ml</i>	49
<i>furosemide tab 20 mg</i>	49
<i>furosemide tab 40 mg</i>	49
<i>furosemide tab 80 mg</i>	49
<i>fyavolv tab 0.5-2.5</i>	30
<i>fyavolv tab 1-5</i>	31

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<i>galantamine hydrobromide cap er 24hr 16</i> <i>mg</i>	91
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<i>galantamine hydrobromide cap er 24hr 24</i> <i>mg</i>	91
<i>galantamine hydrobromide cap er 24hr 8</i> <i>mg</i>	91
<i>galantamine hydrobromide oral soln 4</i> <i>mg/ml</i>	91
<i>galantamine hydrobromide tab 12 mg</i>	91
<i>galantamine hydrobromide tab 4 mg</i>	91
<i>galantamine hydrobromide tab 8 mg</i>	91
<i>gas relief cap 125mg</i>	86
<i>gas relief cap 180mg</i>	86
<i>gas relief chw 125mg</i>	86
<i>gas relief chw 80mg</i>	86
<i>gas relief dro 20/0.3ml</i>	87
<i>gas relief dro 40/0.6ml</i>	87
<i>gas relief dro infants</i>	87
<i>gas relief liq infants</i>	87
<i>gas relief sus</i>	87
<i>gas relief sus infants</i>	87
<i>gas-x cap 125mg</i>	86
<i>gas-x cap 180mg</i>	86
GAS-X CHILD MIS 40MG	87
GAS-X EX-STR MIS 62.5MG	87
<i>gas-x infant dro</i>	87
<i>gavilax pow</i>	75
<i>gavilyte-c sol</i>	76
<i>gavilyte-g sol</i>	76
GEL-ONE INJ 30MG/3ML	106
<i>gemfibrozil tab 600 mg</i>	51
GENADEK CAP STEP 1	116
GENADEK CAP STEP 2	116
<i>generlac sol 10gm/15</i>	87
<i>gengraf cap 100mg</i>	205
<i>gengraf cap 25mg</i>	205
<i>gengraf sol 100mg/ml</i>	205
<i>gentamicin sulfate cream 0.1%</i>	154
<i>gentamicin sulfate oint 0.1%</i>	154
<i>gentamicin sulfate ophth soln 0.3%</i>	145
GENTEAL GEL 0.3%	146
<i>genteal tear oin nt-time</i>	148
<i>genteal tear sol moderate</i>	146
GENTEEL MIS LANCETS	185
<i>gentle laxat sup 10mg</i>	70
<i>gentle laxat tab 5mg ec</i>	70

<i>gentlelax pow</i>	75	<i>glimepiride tab 4 mg</i>	37
GENTLE-LET MIS 26G.....	185	<i>glipizide-metformin hcl tab 2.5-250 mg</i> ...	38
GENTLE-LET MIS 28G.....	185	<i>glipizide-metformin hcl tab 2.5-500 mg</i> ...	38
GENTLE-LET MIS LANCETS	185	<i>glipizide-metformin hcl tab 5-500 mg</i>	38
<i>genuine asa tab 325mg</i>	93	<i>glipizide tab 10 mg</i>	37
<i>genuine aspr tab 325mg</i>	93	<i>glipizide tab 5 mg</i>	37
GENVOYA TAB	22	<i>glipizide tab er 24hr 10 mg</i>	37
GERAVINE ELX.....	135	<i>glipizide tab er 24hr 2.5 mg</i>	37
<i>geri-dryl liq 12.5/5ml</i>	55	<i>glipizide tab er 24hr 5 mg</i>	37
<i>geri-dryl tab 25mg</i>	55	<i>glipizide xl tab 10mg</i>	37
GERI-FREEDA TAB SENIOR	120	<i>glipizide xl tab 2.5mg</i>	37
<i>geri-kot tab 8.6mg</i>	71	<i>glipizide xl tab 5mg</i>	37
<i>geri-lanta sus</i>	81	GLOBAL 28G MIS LANCETS	185
<i>geri-lanta sus max st</i>	82	GLOBAL 30G MIS LANCETS.....	185
<i>geri-lanta sus supreme</i>	81	<i>glucagon (rdna) for inj kit 1 mg</i>	37
<i>geri-mox sus</i>	81	GLUCOCOM MIS 28G	185
<i>geri-mucil pow</i>	72, 73	GLUCOCOM MIS 30G	185
GERITOL LIQ TONIC.....	135	GLUCOCOM MIS 33G	185
<i>geritol tab complete</i>	135	<i>glucoten cap</i>	116
<i>geri-tussin liq 100/5</i>	61	<i>glycine diluent for injection</i>	204
<i>geri-tussin liq dm</i>	65	<i>glycolax pow 3350 nf</i>	75
GERI-TUSSIN SYP 200/10ML.....	62	<i>glycopyrrolate oral soln 1 mg/5ml</i>	83
<i>geri-tussin syp dm</i>	66	<i>glycopyrrolate tab 1 mg</i>	83
<i>gerivite tab complete</i>	120	<i>glycopyrrolate tab 2 mg</i>	83
GERM DEFENSE TAB PM	134	GLYCOTROL CAP	133
GILOTRIF TAB 20MG.....	26	GLYCOTROL CAP COMPLETE	133
GILOTRIF TAB 30MG.....	26	<i>gnp acetamin tab 325mg</i>	95
GILOTRIF TAB 40MG.....	26	GNP ALCOHOL PAD SWABS.....	203
<i>giltuss cgh liq & chest</i>	65	<i>gnp all day tab allergy</i>	56
<i>giltuss diab liq cgh/cold</i>	65	<i>gnp allergy cap 25mg</i>	54
GILTUSS EX LIQ MAX STR.....	62	<i>gnp allergy chw 12.5mg</i>	55
<i>giltuss hon liq chg/chst</i>	65	<i>gnp allergy tab 25mg</i>	55
<i>glatiramer acetate soln prefilled syringe 20</i> <i>mg/ml</i>	92	<i>gnp allergy tab 4mg</i>	54
<i>glatiramer acetate soln prefilled syringe 40</i> <i>mg/ml</i>	92	<i>gnp antacid chw 1000mg</i>	80
<i>glatopa inj 20mg/ml</i>	92	<i>gnp antacid chw 160-105</i>	80
<i>glatopa inj 40mg/ml</i>	92	<i>gnp antacid chw 750mg</i>	80
GLEOSTINE CAP 100MG.....	25	<i>gnp antacid sus cherry</i>	82
GLEOSTINE CAP 10MG	25	<i>gnp antacid sus coolmint</i>	81
GLEOSTINE CAP 40MG	25	<i>gnp antacid sus original</i>	82
<i>g-levocarnit sol 1gm/10ml</i>	140	<i>gnp antacid sus reg st</i>	81
<i>glimepiride tab 1 mg</i>	37	<i>gnp anti-gas cap 180mg</i>	86
<i>glimepiride tab 2 mg</i>	37	<i>gnp aspirin chw 81mg</i>	94
		<i>gnp aspirin tab 325mg</i>	93
		<i>gnp aspirin tab 325mg ec</i>	95

<i>gnp aspirin tab 81mg ec</i>	94	<i>gnp lubr eye dro 0.5% op</i>	146
<i>gnp b-100 tab complex</i>	112	<i>gnp mucus er tab 1200mg</i>	62
<i>gnp b-50 tab complex</i>	112	<i>gnp mucus er tab 600mg</i>	62
GNP BANDAGES MIS	198	GNP MULTI CHW CHILDREN	130
GNP BANDAGES MIS 1	198	<i>gnp naproxen cap 220mg</i>	101
GNP BANDAGES MIS 2	198	<i>gnp omeprazo cap 20mg</i>	84
GNP BANDAGES MIS 3/4	198	<i>gnp omepraz tab 20mg</i>	84
GNP BANDAGES MIS ASSORTED	198	<i>gnp pain rel tab 500mg</i>	95
GNP BANDAGES MIS CLEAR	198	<i>gnp pediatri sol electrol</i>	139
GNP BANDAGES MIS SHEER	198	<i>gnp pink bis sus 525/15ml</i>	77
GNP CALAMINE LOT 8-8%	162	GNP PROBIOTI CAP XTRA STR	78
<i>gnp calcium tab cit +d3</i>	138	<i>gnp senna lx tab 8.6mg</i>	71
<i>gnp children sus pain&fev</i>	97	<i>gnp triple oin antibiot</i>	154
<i>gnp clearlax pak 3350 nf</i>	75	<i>gnp tussin liq dm cough</i>	65
<i>gnp clearlax pow</i>	75	GNP ULTICARE MIS 31GX5/16	168
<i>gnp d cap 1000unit</i>	107	GNP ULTICARE MIS 31GX5MM	166
<i>gnp d chw 2000unit</i>	109	GNP ULTICARE MIS 32GX1/4	172
<i>gnp deconge tab 30mg</i>	58	GNP ULTICARE MIS 32GX5/32	170
<i>gnp diclofen gel 1%</i>	157	<i>gnp vit d3 tab 1000unit</i>	108
<i>gnp earwax sol 6.5% ot</i>	150	<i>gnp vit d tab 1000unit</i>	108
<i>gnp earwax sol removal</i>	150	<i>gnp vit d tab 5000unit</i>	108
<i>gnp electrol sol</i>	139	GNTL ADHESVE MIS BNDG XL	198
<i>gnp esomepra cap 20mg dr</i>	84	GOJJI LANCET MIS 30G	185
<i>gnp eye drop dro 0.4-0.3%</i>	147	<i>goodsense gel art pain</i>	157
<i>gnp fiber cap 0.52gm</i>	72	<i>goodsense liq lice rin</i>	162
<i>gnp fiber pow 43%</i>	73	GOODSENSE MIS LANC 26G	185
<i>gnp fish oil cap 1000mg</i>	140	GOODSENSE MIS LANC 30G	186
<i>gnp gas relf chw 125mg</i>	87	GOODSENSE MIS LANC 33G	186
<i>gnp gas relf chw 80mg</i>	86	<i>goodsense sus ant/gas</i>	82
<i>gnp gntl lax tab 5mg ec</i>	70	<i>goodsense sus antacid</i>	81
<i>gnp healthy tab eyes</i>	120	<i>goodsense tab 81mg ec</i>	94
<i>gnp hydrocor cre 1% plus</i>	159	GOOD START CHW GROW KID	78
GNP IMMUNE PAK	128	GOOD START POW GROW KID	79
GNP IMMUNE PAK SUPPORT	128	GORDO-POOL CON	178
<i>gnp iron tab 45mg</i>	142	<i>granisetron hcl tab 1 mg</i>	85
<i>gnp iron tab 65mg</i>	142	GRAPE SEED CAP 50MG	113
GNP LANCETS MIS 21G	185	<i>griseofulvin microsize susp 125 mg/5ml</i>	20
GNP LANCETS MIS 28G	185	<i>griseofulvin ultramicrosize tab 125 mg</i>	20
GNP LANCETS MIS 30G	185	<i>griseofulvin ultramicrosize tab 250 mg</i>	20
GNP LANCETS MIS 33G	185	<i>gs ibuprofen chw children</i>	101
GNP LANCETS MIS THIN 26G	185	<i>g tussin ac liq 100-10/5</i>	64
<i>gnp lansopra cap 15mg dr</i>	84	<i>guaiasorb dm liq</i>	66
<i>gnp laxative tab 5mg ec</i>	70	<i>guaiasorb dm liq 100-10/5</i>	66
<i>gnp little chw ones</i>	130	<i>guaifenesin-codeine soln 100-10 mg/5ml</i>	65

<i>guaifenesin liquid 100 mg/5ml</i>	61	HAIR/SKIN/ CAP NAILS	116
<i>guaifenesin tab 200 mg</i>	61	<i>hair/skin/ tab nails</i>	120, 133
<i>guaifenesin tab 400 mg</i>	61	<i>hair/skin cap nails</i>	116
<i>guaifenesin tab er 12hr 1200 mg</i>	62	HAIR NOURISH TAB SUPPLEMN	133
<i>guaifenesin tab er 12hr 600 mg</i>	62	HAIR SKIN & TAB NAILS AD	120
<i>guanfacine hcl tab 1 mg</i>	48	<i>hair skin tab nails</i>	120
<i>guanfacine hcl tab 2 mg</i>	48	HAIR SKIN TAB NAILS	120
<i>guanfacine hcl tab er 24hr 1 mg (base equiv)</i>	91	<i>halobetasol propionate cream 0.05%</i>	159
<i>guanfacine hcl tab er 24hr 2 mg (base equiv)</i>	91	<i>halobetasol propionate oint 0.05%</i>	159
<i>guanfacine hcl tab er 24hr 3 mg (base equiv)</i>	91	<i>haloette mis</i>	32
<i>guanfacine hcl tab er 24hr 4 mg (base equiv)</i>	91	<i>hand wash sol 2%</i>	162
GUMMI BEAR CHW MULTIVIT	130	HEAD CARE TAB PROACTIV	120
GUMMIES CHW	130	HEALTHCHECK MIS MONITOR	179
GUMMY DINOS CHW	131	<i>healthy eyes cap</i>	116
<i>gummy fish chw omega-3</i>	141	<i>healthy eyes cap superv 2</i>	116
GUMMY MULTIV CHW KIDS	131	HEALTHY EYES CAP SUPERVIS.....	117
GVOKE HYPO 1 INJ .5/.1ML	37	<i>healthy eyes tab</i>	120
GVOKE HYPO 1 INJ 1MG/.2ML.....	37	<i>healthy hair tab skn/nail</i>	114
GVOKE HYPO 2 INJ .5/.1ML	37	HEALTHY KIDS CHW GUMMIES.....	131
GVOKE HYPO 2 INJ 1MG/.2ML	37	<i>healthylax pow</i>	75
GVOKE PFS INJ	37	HEALTHY TAB HEART	133
GYNOL II GEL 3%.....	89	<i>heartbrn ant chw 160-105</i>	81
H		<i>heartbrn rel sus cherry</i>	81
HADLIMA INJ 40/0.4ML	102	<i>heartbrn rlf chw 160-105</i>	81
HADLIMA INJ 40/0.8ML	102	<i>heartburn chw ex st</i>	81
HADLIMA PUSH INJ 40/0.4ML.....	102	<i>heartburn sus relief</i>	81
HADLIMA PUSH INJ 40/0.8ML.....	102	<i>heartburn tab 200mg</i>	83
HAEGARDA INJ 2000UNIT	145	<i>heartburn tab 20mg</i>	83
HAEGARDA INJ 3000UNIT	145	<i>heartburn tab relief</i>	83
HAEMOLANCE MIS HIGH FLO	186	HEART SAVIOR CAP	133
HAEMOLANCE MIS LOW FLOW	186	HEART TABS TAB	133
HAEMOLANCE MIS PLUS	186	<i>heather tab 0.35mg</i>	31
HAEMOLANCE MIS PLUS LOW	186	HEAVY DUTY MIS BANDAGES	198
HAEMOLANCE MIS PLUS MAX.....	186	HEAVY DUTY MIS CLR&TGH.....	198
HAEMOLANCE MIS PLUS PED.....	186	HEAVY DUTY MIS FAB BAND	198
HAEMOLANCE MIS RETRACT.....	186	<i>her style tab 1.5mg</i>	32
<i>hailey fe tab 1/20</i>	34	HIBICLENS SOL 4%.....	162
<i>hailey fe tab 1.5/30</i>	34	<i>hi c-500 tab</i>	113
<i>hailey tab 1.5/30</i>	34	<i>high potency tab fe 27mg</i>	142
		HIGH POTENCY TAB MULTIVIT	114
		HIGH POTENCY TAB MV/FA	120
		<i>hi-kovite tab 2-part</i>	120
		<i>hm antacid chw 750mg</i>	80
		<i>hm aspirin tab 325mg</i>	94

<i>hm aspirin tab 325mg ec</i>	95	HUMIDIFIER MIS WARM MST.....	178
HM BUTTERFLY MIS CLOSURES	198	HUMULIN INJ 70/30	36
<i>hm clearlax pow</i>	75	HUMULIN INJ 70/30KWP.....	36
HM COMPLETE TAB MEN.....	120	HUMULIN N INJ U-100	36
<i>hm complete tab women</i>	120	HUMULIN N INJ U-100KWP	36
<i>hm fiber cap 400mg</i>	72	HUMULIN R INJ U-100	36
<i>hm fiber pow</i>	72	HUMULIN R INJ U-500.....	36
<i>hm fiber pow 43%</i>	73	<i>hydralazine hcl tab 100 mg</i>	48
<i>hm fiber pow 51.7%</i>	73	<i>hydralazine hcl tab 10 mg</i>	48
<i>hm fish oil cap 1000mg</i>	140	<i>hydralazine hcl tab 25 mg</i>	48
<i>hm pain rlf tab 650mg</i>	96	<i>hydralazine hcl tab 50 mg</i>	48
<i>hm probiotic cap</i>	79	<i>hydrochlorothiazide cap 12.5 mg</i>	50
HM STERILE PAD ALCHOL	204	<i>hydrochlorothiazide tab 12.5 mg</i>	50
<i>hm stool sof tab 8.6-50mg</i>	75	<i>hydrochlorothiazide tab 25 mg</i>	50
<i>hm trueplus chw fiber</i>	72	<i>hydrochlorothiazide tab 50 mg</i>	50
HM ULTICARE MIS 31GX8MM.....	168	HYDROCIL INS POW 95%	74
HOLD CHAMBER MIS ADLT LG	175	HYDROCIL POW 95%	74
HOLD CHAMBER MIS MEDIUM.....	175	<i>hydrocodone-acetaminophen soln 7.5-325</i> <i>mg/15ml</i>	99
HOLD CHAMBER MIS SMALL	175	<i>hydrocodone-acetaminophen tab 10-325</i> <i>mg</i>	99
HOLDING CHAM MIS ADULT	175	<i>hydrocodone-acetaminophen tab 5-325</i> <i>mg</i>	99
HOLDING CHAM MIS CHILD	175	<i>hydrocodone-acetaminophen tab 7.5-325</i> <i>mg</i>	99
HOMENEB MIS SIDESTRE	176	<i>hydrocodone bitart-homatropine</i> <i>methylbromide tab 5-1.5 mg</i>	61
HONEY BEARS CHW.....	129	<i>hydrocodone bitart-homatropine</i> <i>methylbrom soln 5-1.5 mg/5ml</i>	61
HONEY BEARS CHW IRON-ZIN	131	<i>hydrocort/ cre aloe 1%</i>	159
HUMALOG MIX INJ 50/50	36	<i>hydrocort cre 0.5%</i>	159
HUMALOG MIX INJ 50/50KWP.....	36	HYDROCORT CRE 1%.....	160
HUMALOG MIX SUS 75/25.....	36	<i>hydrocort cre 1% aloe</i>	159
HUMATROPE INJ 12MG.....	41	<i>hydrocort cre 1% plus</i>	159
HUMATROPE INJ 24MG	41	<i>hydrocortisone acetate oint 1%</i>	160
HUMATROPE INJ 6MG	41	<i>hydrocortisone butyrate cream 0.1%</i>	160
HUMIDIFIER MIS 1.25 GAL.....	178	<i>hydrocortisone butyrate oint 0.1%</i>	160
HUMIDIFIER MIS 1.3 GAL.....	178	<i>hydrocortisone butyrate soln 0.1%</i>	160
HUMIDIFIER MIS 1.5 GAL.....	178	<i>hydrocortisone cream 1%</i>	159
HUMIDIFIER MIS 1.8 GAL.....	178	<i>hydrocortisone cream 2.5%</i>	159
HUMIDIFIER MIS 2 GALLON	178	<i>hydrocortisone enema 100 mg/60ml</i>	152
HUMIDIFIER MIS COOL MIS.....	178	<i>hydrocortisone lotion 1%</i>	160
HUMIDIFIER MIS COOL MST	178	<i>hydrocortisone lotion 2.5%</i>	160
HUMIDIFIER MIS FILTER.....	179	<i>hydrocortisone oint 0.5%</i>	160
HUMIDIFIER MIS FROG.....	178		
HUMIDIFIER MIS GERMFREE.....	178		
HUMIDIFIER MIS HOSPITAL	178		
HUMIDIFIER MIS PROCARE	178		
HUMIDIFIER MIS ULTRASON.....	178		
HUMIDIFIER MIS ULTSONIC	178		

<i>hydrocortisone oint 1%</i>	160	<i>icaps lutein cap /omega-3</i>	117
<i>hydrocortisone oint 2.5%</i>	160	<i>icaps mv tab</i>	120
<i>hydrocortisone perianal cream 1%</i>	152	<i>icatibant acetate subcutaneous soln pref</i>	
<i>hydrocortisone perianal cream 2.5%</i>	152	<i>syr 30 mg/3ml</i>	145
<i>hydrocortisone tab 10 mg</i>	29	IDEAL BOWEL CAP PROBIOTI	78
<i>hydrocortisone tab 20 mg</i>	29	ILARIS INJ 150MG/ML.....	103
<i>hydrocortisone tab 5 mg</i>	29	<i>imatinib mesylate tab 100 mg (base</i>	
<i>hydrocortisone valerate cream 0.2%</i>	160	<i>equivalent)</i>	27
<i>hydrocortisone valerate oint 0.2%</i>	160	<i>imatinib mesylate tab 400 mg (base</i>	
<i>hydromet syp 5-1.5/5</i>	61	<i>equivalent)</i>	27
<i>hydromorphone hcl tab 2 mg</i>	98	<i>imiquimod cream 5%</i>	161
<i>hydromorphone hcl tab 4 mg</i>	98	IMMUBLAST-C POW ORANGE.....	129
<i>hydromorphone hcl tab 8 mg</i>	98	IMMUNE CHW SUPPORT	127
<i>hydroxychloroquine sulfate tab 200 mg</i> ...23		IMMUNE ESSEN CAP DAILY	117
<i>hydroxyurea cap 500 mg</i>	28	IMMUNERX CAP	133
<i>hyoscyamine sulfate elixir 0.125 mg/5ml</i> .82		IMMUNE SUPP POW VIT C	129
<i>hyoscyamine sulfate sl tab 0.125 mg</i>82		IMMUNICARE CAP	133
<i>hyoscyamine sulfate soln 0.125 mg/ml</i>82		<i>inatal gt tab</i>	134
<i>hyoscyamine sulfate tab 0.125 mg</i>	82	<i>incassia tab 0.35mg</i>	31
<i>hyoscyamine sulfate tab disint 0.125 mg</i> ..82		IN CONTROL MIS 31GX3/16.....	166
<i>hyosyne dro 0.125/ml</i>	82	IN CONTROL MIS 31GX5MM	166
<i>hyosyne elx 0.125/5</i>	82	INCONTROL MIS 31GX8MM	168
HYPO-ALLERG MIS BANDAGE	198	IN CONTROL MIS 31GX8MM	168
<i>hypotears oin op</i>	148	INCONTROL MIS 32GX4MM	170
<i>hyvee ibupro sus 100mg/5m</i>	101	INCONTROL MIS LANC 28G.....	186
I		INCONTROL MIS LANC 30G.....	186
<i>ibuprofen cap 200mg</i>	100	INCONTROL MIS LANC 33G.....	186
<i>ibuprofen chw 100mg</i>	101	INCONTROL PAD ALCOHOL	204
<i>ibuprofen dro 50/1.25</i>	101	INCRUSE ELPT INH 62.5MCG	67
<i>ibuprofen ib chw 100mg</i>	101	<i>indapamide tab 1.25 mg</i>	50
<i>ibuprofen jr chw 100mg</i>	101	<i>indapamide tab 2.5 mg</i>	50
<i>ibuprofen sus 100/5ml</i>	101	INLYTA TAB 1MG.....	25
<i>ibuprofen sus 200/10ml</i>	101	INLYTA TAB 5MG.....	25
<i>ibuprofen susp 100 mg/5ml</i>	101	INNOSPIRE EL MIS NEBULIZE	176
<i>ibuprofen tab 200 mg</i>	100	INNOSPIRE ES MIS NEBULIZE	176
<i>ibuprofen tab 400 mg</i>	100	INNOSPIRE MIS PORTABLE.....	176
<i>ibuprofen tab 600 mg</i>	101	INS ASP PROT INJ FLEXPEN.....	36
<i>ibuprofen tab 800 mg</i>	101	INSPIREASE MIS DD SYST	175
<i>ibuprofn 100 chw jr 100mg</i>	101	<i>instacort 5 cre 0.5%</i>	159
<i>ibu tab 400mg</i>	100	INSULIN ASPA INJ 70/30	36
<i>ibu tab 600mg</i>	101	INSULIN LISP INJ PROTAMIN	36
<i>ibu tab 800mg</i>	101	INSULIN SYRG MIS 0.3/31G.....	165
ICAPS AREDS TAB FORMULA	120	INSULIN SYRG MIS 0.5/31G.....	165
<i>icaps cap</i>	117	INSULIN SYRG MIS 1ML/30G	165

INSULIN SYRG MIS 1ML/31G	165	<i>isoniazid tab 100 mg</i>	19
INSUPEN MIS 31GX5MM	166	<i>isoniazid tab 300 mg</i>	19
INSUPEN MIS 31GX8MM	168	<i>isosorbide dinitrate tab 10 mg</i>	42
INSUPEN MIS 32GX4MM	170	<i>isosorbide dinitrate tab 20 mg</i>	42
INTELENCE TAB 25MG	21	<i>isosorbide dinitrate tab 30 mg</i>	42
<i>intense coug liq reliever</i>	66	<i>isosorbide dinitrate tab 40 mg</i>	42
INTENSE COUG LIQ RELIEVER	66	<i>isosorbide dinitrate tab 5 mg</i>	42
<i>intestinex cap</i>	78	<i>isosorbide mononitrate tab 10 mg</i>	42
IN TOUCH LAN MIS 30G	186	<i>isosorbide mononitrate tab 20 mg</i>	42
INTUNIV TAB 1MG	91	<i>isosorbide mononitrate tab er 24hr 120 mg</i>	42
INTUNIV TAB 2MG.....	91	<i>isosorbide mononitrate tab er 24hr 30 mg</i>	42
INTUNIV TAB 3MG.....	91	<i>isosorbide mononitrate tab er 24hr 60 mg</i>	42
INTUNIV TAB 4MG	91	<i>isotretinoin cap 10 mg</i>	153
INULOSE BLD CAP SUGAR	133	<i>isotretinoin cap 20 mg</i>	153
<i>ipratropium-albuterol nebu soln 0.5-2.5(3)</i> <i>mg/3ml</i>	67	<i>isotretinoin cap 30 mg</i>	153
<i>ipratropium bromide inhal soln 0.02%</i>	67	<i>isotretinoin cap 40 mg</i>	153
<i>ipratropium bromide nasal soln 0.03% (21</i> <i>mcg/spray)</i>	60	<i>itraconazole cap 100 mg</i>	20
<i>ipratropium bromide nasal soln 0.06% (42</i> <i>mcg/spray)</i>	60	<i>ivermectin lotion 0.5%</i>	161
<i>irbesartan-hydrochlorothiazide tab 150-12.5</i> <i>mg</i>	49	<i>ivermectin tab 3 mg</i>	23
<i>irbesartan-hydrochlorothiazide tab 300-</i> <i>12.5 mg</i>	49	<i>i-vite tab</i>	120
<i>irbesartan tab 150 mg</i>	47	IV PREP WIPE PAD	163
<i>irbesartan tab 300 mg</i>	47	IWILFIN TAB 192MG	29
<i>irbesartan tab 75 mg</i>	47	IYUZEH DRO 0.005%.....	149
IRON HP TAB 65MG.....	142	J	
<i>iron inf/tod dro 15mg</i>	142	J & J ADHES PAD LARGE.....	200
<i>iron inf-tod dro 15mg</i>	142	J&J GERM FIL MIS MASK	180
<i>iron slow tab 45mg</i>	142	<i>jaimiess tab</i>	35
<i>iron slow tab 45mg er</i>	142	JAKAFI TAB 10MG	28
<i>iron supplem tab therapy</i>	142	JAKAFI TAB 15MG.....	28
<i>iron supplmt dro 15mg/ml</i>	142	JAKAFI TAB 20MG.....	28
<i>iron suppmnt sol 220/5ml</i>	142	JAKAFI TAB 25MG.....	28
<i>is-d 10000 cap 250mcg</i>	108	JAKAFI TAB 5MG	28
ISENTRESS CHW 100MG.....	20	<i>jantoven tab 10mg</i>	144
ISENTRESS CHW 25MG.....	20	<i>jantoven tab 1mg</i>	144
ISENTRESS HD TAB 600MG	20	<i>jantoven tab 2.5mg</i>	144
ISENTRESS POW 100MG.....	20	<i>jantoven tab 2mg</i>	144
ISENTRESS TAB 400MG.....	20	<i>jantoven tab 3mg</i>	144
<i>isibloom tab</i>	32	<i>jantoven tab 4mg</i>	144
<i>isoniazid syrup 50 mg/5ml</i>	19	<i>jantoven tab 5mg</i>	144
		<i>jantoven tab 6mg</i>	144
		<i>jantoven tab 7.5mg</i>	144

JARDIANCE TAB 10MG.....	38	KAZ VAPORIZR MIS 1 GALLON.....	179
JARDIANCE TAB 25MG.....	38	KAZ VAPORIZR MIS 2.2 GAL.....	179
<i>jasmiel tab 3-0.02mg</i>	33	KAZ WATER LIQ TREATMNT.....	179
<i>javygtor pak 100mg</i>	42	KAZ WICKING MIS FLTR WF1.....	179
<i>javygtor pow 500mg</i>	42	<i>kelnor 1/50 tab</i>	33
<i>javygtor tab 100mg</i>	42	<i>kelnor tab 1/35</i>	33
<i>jck itch pow aer 1%</i>	155	KERENDIA TAB 10MG.....	41
<i>jencycla tab 0.35mg</i>	31	KERENDIA TAB 20MG.....	41
<i>jinteli tab 1mg-5mcg</i>	31	<i>ketoconazole cream 2%</i>	156
<i>jock itch cre 1%</i>	156	<i>ketoconazole shampoo 2%</i>	156
<i>juleber tab</i>	32	KETO-DIASTIX TES.....	163
<i>junel 1/20 tab</i>	34	<i>ketorolac tromethamine ophth soln 0.4%</i>	149
<i>junel 1.5/30 tab</i>	34	<i>ketorolac tromethamine ophth soln 0.5%</i>	149
<i>junel fe tab 1/20</i>	34	<i>ketorolac tromethamine tab 10 mg</i>	101
<i>junel fe tab 1.5/30</i>	34	<i>ketotifen fumarate ophth soln 0.035%</i> ...	149
<i>just right pst 5000</i>	151	KEVZARA INJ 150/1.14.....	103
<i>just tears sol eye drop</i>	146	KEVZARA INJ 200/1.14.....	103
K		<i>kids allergy liq 12.5/5ml</i>	55
K2 PLUS D3 TAB.....	110	<i>kids probiot chw multivit</i>	130
<i>kalliga tab</i>	33	KIDS PROBIOT PAK FIBER.....	79
KALYDECO GRA 13.4MG.....	69	<i>kids vit d3 chw 1000unit</i>	109
KALYDECO GRA 5.8MG.....	69	KIDZ MULTVIT CHW PROBIOTI.....	131
KALYDECO PAK 25MG.....	69	KIMONO COLOR MIS.....	200
KALYDECO PAK 50MG.....	69	KIMONO MAXX MIS LG FLARE.....	200
KALYDECO PAK 75MG.....	69	KIMONO MICRO MIS THIN.....	202
KALYDECO TAB 150MG.....	69	KIMONO MICRO MIS THIN +.....	201
KAMELEON LUB MIS COLORS.....	200	KIMONO MICRO MIS THIN PLS.....	201
KAMELEON MIS TRI-COLR.....	200	KIMONO MIS LUBRICAT.....	201
KANJINTI INJ 420MG.....	25	KIMONO MIS SENSATIO.....	201
KANJINTI SOL 150MG.....	25	KIMONO PLUS MIS LUBRICAT.....	201
<i>kaopectate sus 262/15ml</i>	77	KIMONO PLUS MIS SPERMICI.....	201
<i>kaopectate sus ex st</i>	77	KIMONO PS MIS LUBRICAT.....	201
<i>kaopectate tab 262mg</i>	76	KIMONO PS MIS PLUS.....	201
<i>kariva tab 28 day</i>	35	KIMONO SENSAMIS PLUS.....	201
KAX AROMATIC PAD INHALANT.....	179	KIMONO SPEC MIS.....	201
KAZ DEMINERA MIS CARTRIDG.....	179	KINNEY MIS LANCETS.....	186
KAZ DYNAFLTR MIS K14-3P.....	179	KINNEY THIN MIS LANCETS.....	186
KAZ DYNAFLTR MIS K14-S.....	179	<i>klayesta pow 100000</i>	154
KAZ HUMIDIFR MIS 1.2 GAL.....	178	<i>klor-con/ef tab 25meq fr</i>	139
KAZ HUMIDIFR MIS 3000.....	178	<i>klor-con 10 tab 10meq er</i>	139
KAZ HUMIDIFR MIS 3300.....	178	<i>klor-con 8 tab 8meq er</i>	139
KAZ HUMIDIFR MIS 3400.....	178	<i>klor-con m10 tab 10meq er</i>	139
KAZ INHALANT LIQ.....	179		
KAZ VAPORIZR MIS 1.5 GAL.....	179		

<i>klor-con m20 tab 20meq er</i>	139
<i>kls allergy tab 25mg</i>	55
<i>kls arthriti gel 1%</i>	157
<i>kls aspirin tab 81mg ec</i>	94
<i>kls d3 cap 50mcg</i>	107
<i>kls diclofen gel 1%</i>	157
<i>kls ibuprofn tab 200mg</i>	100
<i>kls ibuprofn tab ib 200mg</i>	100
<i>kls mucus-dm tab 60-1200</i>	67
KN95 DISPOSA MIS MASK	180
KN95 MEDICAL MIS MASK.....	180
<i>kobee tab</i>	111
KONSYL DAILY POW 100%.....	74
KONSYL DAILY POW 60.3%	73
<i>kourzeq pst 0.1%</i>	150
<i>kp adult 50+ tab daily</i>	120
<i>kp adults tab daily</i>	121
<i>kp aspirin tab 81mg ec</i>	94
K-PAX TAB PROF ST.....	120
<i>kp b complex tab /c</i>	112
<i>kp bisacodyl tab 5mg ec</i>	70
<i>kp ca/mg/zn tab</i>	138
<i>kp calcium cap 600+d</i>	136
<i>kp calcium tab +d</i>	137
<i>kp calcium tab 600+d</i>	137
<i>kp fish oil cap 1200mg</i>	141
<i>kp melatonin tab 3mg</i>	163
<i>kp mens 50+ tab daily</i>	121
KP MENS MIS DAILY PK.....	129
<i>kp mens tab daily</i>	121
<i>k-prime tab 25meq ef</i>	139
<i>kp senna tab 8.6mg</i>	71
<i>kp vision tab for/ltn</i>	121
<i>kp vision tab formula</i>	121
<i>kp women 50+ tab daily</i>	121
KP WOMENS PAK DAILY	129
<i>kp womens tab daily</i>	121
KROGER LANCE MIS	186
KROGER LANCE MIS 26G	186
KROGER LANCE MIS THIN	186
KROGER LANCE MIS THIN 30G	186
<i>kurvelo tab 0.15/30</i>	33
KYLEENA IUD 19.5MG.....	31

L	
<i>labetalol hcl tab 100 mg</i>	44
<i>labetalol hcl tab 200 mg</i>	44
<i>labetalol hcl tab 300 mg</i>	44
<i>lactic acid (ammonium lactate) cream 12%</i>	161
<i>lactic acid (ammonium lactate) lotion 12%</i>	161
LACTINEX GRA.....	78
<i>lactobacillu cap</i>	78
<i>lactobacillus cap</i>	78
<i>lactobacillus - packet</i>	78
<i>lactobacillus tab</i>	78
<i>lactulose (encephalopathy) solution 10 gm/15ml</i>	87
<i>lactulose solution 10 gm/15ml</i>	75
LAGEVRIO CAP 200MG	23
<i>lamivudine oral soln 10 mg/ml</i>	21
<i>lamivudine tab 100 mg (hbv)</i>	22
<i>lamivudine tab 150 mg</i>	21
<i>lamivudine tab 300 mg</i>	21
<i>lamivudine-zidovudine tab 150-300 mg</i> ...	22
<i>lanabiotic oin</i>	154
LANCET MICRO MIS THIN 33G.....	186
LANCETS MICR MIS THIN 33G.....	187
LANCETS MIS	187
LANCETS MIS 21G.....	187
LANCETS MIS 21G COLR.....	187
LANCETS MIS 26G	187
LANCETS MIS 28G	187
LANCETS MIS 30G	187
LANCETS MIS 33G	187
LANCETS MIS ORIGINAL	187
LANCETS MIS THIN	187
LANCETS MIS THIN 26G	187
LANCETS MIS THIN 30G	187
LANCETS SUPR MIS THIN 28G	187
LANCET STAND MIS 21G	186
LANCETS THIN MIS	187
LANCETS THIN MIS 26G	187
LANCETS ULTR MIS THIN	187
LANCETS ULTR MIS THIN 31G	187
LANCET SUPER MIS THIN 30G	186
LANCET ULTRA MIS THIN 30G	187

<i>land bfr tim chw vit/c</i>	130	<i>leucovorin calcium tab 5 mg</i>	28
<i>land bfr tim chw vit/iron</i>	131	LEUKERAN TAB 2MG	24
LANREOTIDE INJ 120/.5ML	41	LEUKOSTRIP MIS 1/2	198
<i>lansoprazole cap delayed release 15 mg</i> ..	84	LEUKOSTRIP MIS 1/4	198, 199
<i>lapatinib ditosylate tab 250 mg (base equiv)</i>	27	LEUKOSTRIP MIS 1/8X1.5.....	199
<i>larin fe tab 1/20</i>	34	<i>leuprolide acetate inj kit 1 mg/0.2ml (5</i> <i>mg/ml)</i>	26
<i>larin fe tab 1.5/30</i>	34	<i>levobunolol hcl ophth soln 0.5%</i>	148
<i>larin tab 1/20</i>	34	<i>levocarnitine (dietary) oral soln 1 gm/10ml</i>	140
<i>larin tab 1.5/30</i>	34	<i>levocarnitine cap 500 mg</i>	140
<i>latanoprost ophth soln 0.005%</i>	149	<i>levocarnitine tab 500 mg</i>	140
<i>lax/stl soft tab 8.6-50mg</i>	75	LEVOCARNITIN SOL 1GM/10ML.....	140
<i>laxacin tab 8.6-50mg</i>	75	LEVOCARNITIN TAB 330MG.....	140
<i>laxaclear pow</i>	75	<i>levofloxacin oral soln 25 mg/ml</i>	19
<i>laxative chw 15mg</i>	71	<i>levofloxacin tab 250 mg</i>	19
<i>laxative max tab 25mg</i>	71	<i>levofloxacin tab 500 mg</i>	19
<i>laxative pls tab 8.6-50mg</i>	75	<i>levofloxacin tab 750 mg</i>	19
<i>laxative reg tab 15mg</i>	71	<i>levonest tab</i>	35
<i>laxative sup 10mg</i>	70	<i>levonorgestrel & ethinyl estradiol tab 0.15</i> <i>mg-30 mcg</i>	33
<i>laxative tab 25mg</i>	71	<i>levonorgestrel & ethinyl estradiol tab 0.1</i> <i>mg-20 mcg</i>	33
<i>laxative tab 5mg ec</i>	70	<i>levonorgestrel-eth estra tab 0.05-</i> <i>30/0.075-40/0.125-30mg-mcg</i>	35
L-CARNITINE CAP 250MG	140	<i>levonorgestrel tab 1.5 mg</i>	32
<i>leena tab</i>	35	<i>levonorg-eth est tab 0.15-0.03mg(84) & eth</i> <i>est tab 0.01mg(7)</i>	36
<i>leflunomide tab 10 mg</i>	103	<i>levora-28 tab 0.15/30</i>	33
<i>leflunomide tab 20 mg</i>	103	<i>levothyroxine sodium tab 100 mcg</i>	39
<i>lenalidomide cap 10 mg</i>	205	<i>levothyroxine sodium tab 112 mcg</i>	39
<i>lenalidomide cap 15 mg</i>	205	<i>levothyroxine sodium tab 125 mcg</i>	39
<i>lenalidomide cap 20 mg</i>	205	<i>levothyroxine sodium tab 137 mcg</i>	39
<i>lenalidomide cap 25 mg</i>	205	<i>levothyroxine sodium tab 150 mcg</i>	39
<i>lenalidomide cap 5 mg</i>	205	<i>levothyroxine sodium tab 175 mcg</i>	40
<i>lenalidomide caps 2.5 mg</i>	205	<i>levothyroxine sodium tab 200 mcg</i>	40
LENVIMA CAP 10 MG	25	<i>levothyroxine sodium tab 25 mcg</i>	38
LENVIMA CAP 12MG	25	<i>levothyroxine sodium tab 300 mcg</i>	40
LENVIMA CAP 14 MG	25	<i>levothyroxine sodium tab 50 mcg</i>	39
LENVIMA CAP 18 MG	25	<i>levothyroxine sodium tab 75 mcg</i>	39
LENVIMA CAP 20 MG.....	25	<i>levothyroxine sodium tab 88 mcg</i>	39
LENVIMA CAP 24 MG.....	25	<i>levo-t tab 100mcg</i>	39
LENVIMA CAP 4MG.....	25	<i>levo-t tab 112mcg</i>	39
LENVIMA CAP 8 MG	25	<i>levo-t tab 125mcg</i>	39
<i>lessina tab</i>	33		
<i>letrozole tab 2.5 mg</i>	26		
<i>leucovorin calcium tab 10 mg</i>	28		
<i>leucovorin calcium tab 15 mg</i>	29		
<i>leucovorin calcium tab 25 mg</i>	29		

<i>levo-t tab 137mcg</i>	39	<i>liothyronine sodium tab 5 mcg</i>	40
<i>levo-t tab 150mcg</i>	39	LIPIDSHIELD TAB PLUS.....	133
<i>levo-t tab 175mcg</i>	40	<i>lipo flavono tab plus</i>	134
<i>levo-t tab 200mcg</i>	40	<i>lipoflavovit tab</i>	134
<i>levo-t tab 25mcg</i>	38	LIPOTRIAD CAP VISION	133
<i>levo-t tab 300 mcg</i>	40	LIPOTRIAD CAP VISIONAR	133
<i>levo-t tab 50mcg</i>	39	LIPOTRIAD CAP VIS PLUS.....	133
<i>levo-t tab 75mcg</i>	39	LIPOTRIAD TAB	134
<i>levo-t tab 88mcg</i>	39	<i>liq ca/vit d cap 600mg</i>	135
<i>levoxyl tab 100mcg</i>	39	<i>liquid aller liq 12.5/5ml</i>	55
<i>levoxyl tab 112mcg</i>	39	<i>liquid c liq 500/5ml</i>	107
<i>levoxyl tab 125mcg</i>	39	<i>lisinopril & hydrochlorothiazide tab 10-12.5</i>	
<i>levoxyl tab 137mcg</i>	39	<i>mg</i>	48
<i>levoxyl tab 150mcg</i>	39	<i>lisinopril & hydrochlorothiazide tab 20-12.5</i>	
<i>levoxyl tab 175mcg</i>	40	<i>mg</i>	48
<i>levoxyl tab 200mcg</i>	40	<i>lisinopril & hydrochlorothiazide tab 20-25</i>	
<i>levoxyl tab 25mcg</i>	39	<i>mg</i>	48
<i>levoxyl tab 50mcg</i>	39	<i>lisinopril tab 10 mg</i>	47
<i>levoxyl tab 75mcg</i>	39	<i>lisinopril tab 2.5 mg</i>	47
<i>levoxyl tab 88mcg</i>	39	<i>lisinopril tab 20 mg</i>	47
<i>lice killing sha</i>	162	<i>lisinopril tab 30 mg</i>	47
<i>lice killing sha 0.33-4%</i>	162	<i>lisinopril tab 40 mg</i>	47
<i>lice shampoo sha max str</i>	162	<i>lisinopril tab 5 mg</i>	47
<i>lice treatmt liq 1%</i>	162	LITETOUCH MIS 29GX12.7	165
<i>lice treatmt sha 0.33-4%</i>	162	LITETOUCH MIS 31GX8MM	168
<i>lice trtmnt liq 1%</i>	162	LITETOUCH MIS LANCETS	187
<i>lidocaine hcl soln 4%</i>	161	LITE TOUCH MIS LANCETS	187
<i>lidocaine hcl viscous soln 2%</i>	150	LITETOUCH MIS MASK LG.....	173
<i>lidocaine patch 5%</i>	161	LITETOUCH MIS MASK MD.....	173
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	161	LITETOUCH MIS MASK SM	173
<i>lidocan pad 5%</i>	161	<i>little chw animals</i>	130
LIFE PACK MIS MENS	129	<i>little remed dro 20/0.3ml</i>	87
LIFE PACK MIS WOMENS	129	<i>little remed liq 160/5ml</i>	97
<i>life pack tab mens</i>	121	LIVER DETOX TAB.....	121
<i>life pack tab womens</i>	121	<i>loestrin 21 tab 1.5/30</i>	34
LIFESTYLECOM MIS VAPORIZE	179	<i>loestrin fe tab 1/20</i>	34
LILETTA IUD 52MG	31	<i>loestrin fe tab 1.5/30</i>	34
<i>linezolid for susp 100 mg/5ml</i>	24	<i>loestrin tab 1/20-21</i>	34
LINEZOLID INJ 2MG/ML.....	24	LOKELMA PAK 10GM.....	206
<i>linezolid iv soln 600 mg/300ml (2 mg/ml)</i>		LOKELMA PAK 5GM	206
.....	24	LONGS LANCET MIS STANDARD	187
<i>linezolid tab 600 mg</i>	24	LONGS LANCET MIS THIN.....	187
<i>liothyronine sodium tab 25 mcg</i>	40	LONGS LANCET MIS ULTRA TH	188
<i>liothyronine sodium tab 50 mcg</i>	40	<i>loperamide hcl cap 2 mg</i>	76

<i>loperamide hcl tab 2 mg</i>	76	<i>lubricating sol 0.4-0.3%</i>	147
<i>loperamide-simethicone tab 2-125 mg</i>	79	<i>lubricnt eye dro</i>	147
<i>lopinavir-ritonavir soln 400-100 mg/5ml</i> <i>(80-20 mg/ml)</i>	22	<i>lubricnt eye dro 0.1-0.3%</i>	147
<i>lopinavir-ritonavir tab 100-25 mg</i>	22	<i>lubricnt eye dro 0.4-0.3%</i>	147
<i>lopinavir-ritonavir tab 200-50 mg</i>	22	<i>lubricnt eye dro 0.5% op</i>	146
<i>loradamed tab 10mg</i>	58	<i>lubricnt eye dro 0.6%</i>	146
<i>loratadine cap 10 mg</i>	58	<i>lubricnt eye oin fast act</i>	148
<i>loratadine chw 5mg</i>	58	<i>lubricnt eye oin nighttim</i>	148
<i>loratadine-d tab 10-240mg</i>	64	LUBRICNT GEL DRO 0.25-0.3	147
<i>loratadine d tab 5-120mg</i>	63	<i>lubricnt gel dro 1%</i>	146
<i>loratadine-d tab 5-120mg</i>	63	<i>lubrifresh oin p.m.</i>	148
<i>loratadine rapidly-disintegrating tab 10 mg</i>	58	LUMINEB II MIS NEBULIZR.....	176
<i>loratadine sol 5mg/5ml</i>	58	LUTEIN PLUS TAB ZEAXANTH	121
<i>loratadine tab 10 mg</i>	58	<i>lutra tab</i>	33
<i>lorata-dine tab d 24hr</i>	64	<i>lyleq tab 0.35mg</i>	31
LORBRENA TAB 100MG.....	27	LYSIPLEX LIQ PLUS.....	128
LORBRENA TAB 25MG.....	27	LYSODREN TAB 500MG	26
<i>loryna tab 3-0.02mg</i>	33	<i>lyza tab 0.35mg</i>	31
<i>losartan potassium & hydrochlorothiazide</i> <i>tab 100-12.5 mg</i>	49	M	
<i>losartan potassium & hydrochlorothiazide</i> <i>tab 100-25 mg</i>	49	<i>maalox child chw</i>	79
<i>losartan potassium & hydrochlorothiazide</i> <i>tab 50-12.5 mg</i>	49	MAALOX CHW 600MG.....	80
<i>losartan potassium tab 100 mg</i>	47	<i>maalox max sus cherry</i>	82
<i>losartan potassium tab 25 mg</i>	47	<i>maalox max sus lemon</i>	82
<i>losartan potassium tab 50 mg</i>	47	<i>maalox max sus wild bry</i>	82
<i>lovastatin tab 10 mg</i>	51	<i>maalox multi sus symp max</i>	82
<i>lovastatin tab 20 mg</i>	51	MABIS COMPXP MIS COMP/NEB	176
<i>lovastatin tab 40 mg</i>	51	MABIS COSMO MIS NEBULIZR	176
<i>low-ogestrel tab</i>	34	<i>macular hlth cap formula</i>	117
<i>lo-zumandimi tab 3-0.02mg</i>	33	<i>macuvite tab</i>	121
<i>lubiprostone cap 24 mcg</i>	87	<i>macuvite tab eye care</i>	121
<i>lubiprostone cap 8 mcg</i>	87	<i>macuvite tab lutein</i>	121
<i>lubricant dro eye</i>	147	MAG-AL LIQ	80
<i>lubricant dro eye 0.6%</i>	146	<i>mag-al plus liq</i>	81
<i>lubricant oin eye</i>	148	<i>mag-al plus liq xs</i>	82
<i>lubricant pm oin</i>	148	<i>magic bullet sup 10mg</i>	70
<i>lubricant sol eye drop</i>	147	<i>malathion lotion 0.5%</i>	161
<i>lubricat eye dro 0.4-0.3%</i>	147	<i>mapap apap liq 500/15ml</i>	97
<i>lubricating dro 0.5%</i>	146	<i>mapap cap 500mg</i>	95
<i>lubricating dro 0.5% op</i>	146	<i>mapap child chw 80mg</i>	96
		<i>mapap chw 160mg</i>	96
		<i>maraviroc tab 150 mg</i>	20
		<i>maraviroc tab 300 mg</i>	20
		MARGO MOO MIS NEBULIZE	176
		<i>marlissa tab 0.15/30</i>	33

MASK PEDIATR MIS SIZE 1	180	<i>medi-first tab 325 asp</i>	94
MASK VORTEX/ MIS FROG.....	176	<i>medi-first tab ibu 200</i>	100
MASK VORTEX/ MIS LADY BUG	176	<i>medi-lax tab 15mg</i>	71
MATULANE CAP 50MG	28	<i>medi-meclizi tab 25mg</i>	85
<i>matzim la tab 180mg/24</i>	44	<i>medi-mucil cap 0.52gm</i>	72
<i>matzim la tab 240mg/24</i>	45	<i>medi-natural tab 8.6-50mg</i>	75
<i>matzim la tab 300mg/24</i>	45	<i>medi-natural tab 8.6mg</i>	71
<i>matzim la tab 360mg/24</i>	45	<i>medi-paste oin</i>	161
<i>matzim la tab 420mg/24</i>	45	<i>medi-phedryl cap 25mg</i>	54
MAVYRET TAB 100-40MG.....	22	<i>medi-profen cap 200mg</i>	100
<i>maxallergy liq 12.5/5ml</i>	55	<i>medi-profen sus 100/5ml</i>	101
<i>max daily tab green</i>	121	<i>medi-profen sus 40mg/ml</i>	101
<i>maxepa cap 1000mg</i>	140	<i>medi-profen tab 200mg</i>	100
MAXIMIN PAK.....	129	<i>mediproxen tab 220mg</i>	101
<i>maximum epa cap 1000mg</i>	141	<i>medique aspi tab 325mg</i>	94
<i>maxi-tuss ac sol</i>	65	<i>medi-tabs elx 80/2.5ml</i>	97
<i>maxi-tuss g liq</i>	66	<i>medi-tabs jr chw 160mg</i>	96
<i>maxi-tuss liq gmx</i>	66	<i>medi-tabs tab 500mg</i>	95
<i>max reliefjr elx 160/5ml</i>	97	<i>medi-tuss dm liq dbl str</i>	66
<i>maxrelief jr sus 160/5ml</i>	97	<i>medi-tussin syp dm</i>	66
<i>maxtussin dm liq 200-20mg</i>	66	MEDLANCE MIS 30G PLUS.....	188
<i>max tussin liq 200/10ml</i>	62	MEDLANCE MIS PLUS 30G.....	188
MAXX MIS LUBRICAT	201	MEDLANCE PLS MIS 0.8MM	188
MAXX PLUS MIS SPERMICI	201	MEDLANCE PLS MIS EXTR 21G.....	188
MAYZENT PAK STARTER (12 TABS)	93	MEDLANCE PLS MIS LITE 25G.....	188
MAYZENT PAK STARTER (7 TABS).....	93	MEDLANCE PLS MIS UNIV 21G	188
MAYZENT TAB 0.25MG	93	MEDNEB NEBUL MIS DISP NEB	177
MAYZENT TAB 1MG.....	93	MEDNEB NEBUL MIS REUS/BAG	177
MAYZENT TAB 2MG	93	MEDNEB NEBUL MIS REUSE/DI	177
MC 300 MIS MOUTHPIE.....	176	MEDROL TAB 2MG	29
MC 300 MIS TUBING.....	177	<i>medroxyprogesterone acetate im susp 150</i> <i>mg/ml</i>	31
<i>m-dryl liq 12.5/5ml</i>	55	<i>medroxyprogesterone acetate im susp</i> <i>prefilled syr 150 mg/ml</i>	31
<i>meclizine hcl chew tab 25 mg</i>	85	<i>medroxyprogesterone acetate tab 10 mg</i> 36	
<i>meclizine hcl tab 12.5 mg</i>	85	<i>medroxyprogesterone acetate tab 2.5 mg</i>	36
<i>meclizine hcl tab 25 mg</i>	85	<i>medroxyprogesterone acetate tab 5 mg</i> ..	36
MEDCAPS DPO CAP	133	<i>mefloquine hcl tab 250 mg</i>	23
MEDCAPS GI CAP	133	<i>mega-maratho tab 100 tr</i>	126
MEDCAPS IS CAP	133	<i>mega multi tab men</i>	121
MEDCAPS T3 CAP	133	MEGA MULTI TAB MEN.....	121
<i>medi-bismuth chw 262mg</i>	76	<i>mega multi tab w/che mi</i>	134
MEDICHOICE MIS LANCET.....	188	<i>mega multi tab women</i>	121
<i>medifin 400 tab 400mg</i>	61		
<i>medi-first chw ant 420</i>	79		
<i>medi-first cre hydrocor</i>	159		

MEGA MULTI TAB WOMEN	121	<i>meloxicam tab 7.5 mg</i>	101
MEGAVITE TAB FRT/VEG	121	<i>memantine hcl oral solution 2 mg/ml</i>	92
MEGAVITE TAB GOLD 55+	121	<i>memantine hcl tab 10 mg</i>	92
<i>megestrol acetate susp 40 mg/ml</i>	26	<i>memantine hcl tab 28 x 5 mg & 21 x 10 mg</i>	
<i>megestrol acetate tab 20 mg</i>	26	<i>titration pack</i>	92
<i>megestrol acetate tab 40 mg</i>	26	<i>memantine hcl tab 5 mg</i>	92
MEIJER LANCE MIS COLOR	188	MEMORALL CAP	133
MEIJER LANCE MIS UNIV 21G	188	MEMORY TAB COMPLEX.....	133
MEIJER LANCE MIS UNIV 30G	188	MENOPAUSE MIS AM/PM	134
MEIJER LANCE MIS UNIVERSA.....	188	<i>menopause tab support</i>	134
MEIJER MIS LANCETS.....	188	MENS 50+ CAP ADVANCED	117
<i>meijer sus antacid</i>	82	MENS 50+ TAB MULTIVIT.....	121
MEKINIST SOL 0.05/ML	28	<i>mens daily cap lycopene</i>	117
MEKINIST TAB 0.5MG.....	28	<i>mens daily chw gummies</i>	127
MEKINIST TAB 2MG	28	MENS DAILY PAK PACK.....	129
MELADOX TAB 3MG CR.....	164	<i>mens daily tab formula</i>	121
<i>melatonin cap 10mg</i>	163	MENS MULTI CHW	127
<i>melatonin chw 10mg</i>	164	MENS MULTIPL TAB.....	121
<i>melatonin chw 2.5mg</i>	164	MENS PAK	129
<i>melatonin chw quik dis</i>	164	<i>mercaptopurine tab 50 mg</i>	25
MELATONIN LIQ 1MG/4ML	164	<i>mesalamine cap er 24hr 0.375 gm</i>	87
MELATONIN LIQ 2.5MG	164	<i>mesalamine enema 4 gm</i>	87
<i>melatonin liq 5mg/15ml</i>	164	<i>mesalamine rectal enema 4 gm & cleanser</i>	
MELATONIN LIQ 5MG/20ML	164	<i>wipe kit</i>	87
<i>melatonin liquid 1 mg/ml</i>	164	<i>mesalamine suppos 1000 mg</i>	87
MELATONIN LOZ 5MG	164	METAMUCIL CAP 0.36GM	72
<i>melatonin sl tab 10 mg</i>	164	<i>metamucil cap 400mg</i>	72
<i>melatonin sl tab 5 mg</i>	164	<i>metamucil chw gummies</i>	72
<i>melatonin sub 5mg</i>	164	METAMUCIL PAK 4 IN 1	74
<i>melatonin sub quik dis</i>	164	<i>metamucil pow 28.3%org</i>	72
<i>melatonin tab 10mg</i>	164	<i>metamucil pow 43%</i>	73
<i>melatonin tab 1 mg</i>	163	METAMUCIL POW 43%	73
MELATONIN TAB 300MCG	163	METAMUCIL POW 4 IN 1.....	74
<i>melatonin tab 3 mg</i>	163	METAMUCIL POW 55.6%	73
MELATONIN TAB 3MG CR.....	164	<i>metamucil pow 58.6%</i>	73
MELATONIN TAB 500MCG	164	<i>metamucil pow 58.6%org</i>	73
<i>melatonin tab 5mg</i>	164	<i>metamucil pow 58.6% sf</i>	73
<i>melatonin tab 5 mg</i>	164	METAMUCIL POW PREMIUM	74
<i>melatonin tab ex str</i>	164	METAMUCIL WAF	74
<i>melatonin tablet disintegrating 10 mg</i>	164	<i>metformin hcl tab 1000 mg</i>	37
<i>melatonin tablet disintegrating 3 mg</i>	164	<i>metformin hcl tab 500 mg</i>	37
<i>melatonin tablet disintegrating 5 mg</i>	164	<i>metformin hcl tab 850 mg</i>	37
<i>melatonin tab max str</i>	164	<i>metformin hcl tab er 24hr 500 mg</i>	37
<i>meloxicam tab 15 mg</i>	101	<i>metformin hcl tab er 24hr 750 mg</i>	37

<i>methadone hcl tab 10 mg</i>	98	<i>metoprolol tartrate tab 50 mg</i>	44
<i>methadone hcl tab 5 mg</i>	98	<i>metronidazole cap 375 mg</i>	23
<i>methazolamide tab 25 mg</i>	49	<i>metronidazole cream 0.75%</i>	153
<i>methazolamide tab 50 mg</i>	49	<i>metronidazole gel 0.75%</i>	153
<i>methimazole tab 10 mg</i>	40	<i>metronidazole gel 1%</i>	154
<i>methimazole tab 5 mg</i>	40	<i>metronidazole lotion 0.75%</i>	154
<i>methocarbamol tab 500 mg</i>	106	<i>metronidazole tab 250 mg</i>	23
<i>methocarbamol tab 750 mg</i>	106	<i>metronidazole tab 500 mg</i>	23
<i>methotrexate sodium tab 2.5 mg (base equiv)</i>	25	<i>metronidazole vaginal gel 0.75%</i>	88
METHYL CAP PROTECT	133	<i>mg217 gel 1%</i>	159
METHYL-GUARD CAP	133	MG PLUS TAB PROTEIN	134
METHYL-GUARD CAP PLUS	133	<i>micaderm cre 2%</i>	156
<i>methylprednisolone tab 16 mg</i>	29	<i>miconazole 1 kit</i>	89
<i>methylprednisolone tab 32 mg</i>	29	<i>miconazole 1 kit 1200-2%</i>	89
<i>methylprednisolone tab 4 mg</i>	29	MICONAZOLE 1 KIT COMBO	89
<i>methylprednisolone tab 8 mg</i>	29	<i>miconazole 3 kit combinat</i>	89
<i>methylprednisolone tab therapy pack 4 mg (21)</i>	29	<i>miconazole 3 kit combo</i>	89
<i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i>	87	<i>miconazole 3 kit combo pk</i>	89
<i>metoclopramide hcl tab 10 mg (base equivalent)</i>	87	<i>miconazole 3 sup 200mg</i>	89
<i>metoclopramide hcl tab 5 mg (base equivalent)</i>	87	<i>miconazole 7 cre</i>	89
<i>metolazone tab 10 mg</i>	50	<i>miconazole 7 cre 2%</i>	89
<i>metolazone tab 2.5 mg</i>	50	<i>miconazole 7 cre tube/kit</i>	89
<i>metolazone tab 5 mg</i>	50	<i>miconazole 7 sup 100mg</i>	89
<i>metoprolol & hydrochlorothiazide tab 100- 25 mg</i>	49	<i>miconazole nitrate cream 2%</i>	156
<i>metoprolol & hydrochlorothiazide tab 100- 50 mg</i>	49	<i>miconazole nitrate vaginal cream 2%</i>	89
<i>metoprolol & hydrochlorothiazide tab 50-25 mg</i>	49	<i>miconazorb pow af 2%</i>	156
<i>metoprolol succinate tab er 24hr 100 mg (tartrate equiv)</i>	44	<i>micotrin ac cre 1%</i>	156
<i>metoprolol succinate tab er 24hr 200 mg (tartrate equiv)</i>	44	<i>micotrin al liq 1%</i>	155
<i>metoprolol succinate tab er 24hr 25 mg (tartrate equiv)</i>	44	<i>micotrin ap pow 2%</i>	156
<i>metoprolol succinate tab er 24hr 50 mg (tartrate equiv)</i>	44	MICROAIR MIS VIB MESH	177
<i>metoprolol tartrate tab 100 mg</i>	44	MICROCHAMBER MIS	175
<i>metoprolol tartrate tab 25 mg</i>	44	MICROCLENS PAD WIPES	163
		<i>microgestin tab 1/20</i>	34
		<i>microgestin tab 1.5/30</i>	34
		<i>microgestin tab fe 1/20</i>	34
		<i>microgestin tab fe1.5/30</i>	35
		<i>micro guard pow 2%</i>	156
		MICROLET MIS LANCETS	188
		MICRONEB MIS TABLETOP	177
		MICROSPACER MIS	175
		MICRO THIN MIS LANC 33G	188
		<i>midodrine hcl tab 10 mg</i>	50
		<i>midodrine hcl tab 2.5 mg</i>	50
		<i>midodrine hcl tab 5 mg</i>	50

<i>midol tab 650mg</i>	96	MONOLETTOR MIS LANCETS.....	188
MIGHTEAFLOW GUM.....	151	<i>mono-lynyah tab 0.25-35</i>	34
MIL ADREGEN TAB	134	<i>montelukast sodium chew tab 4 mg (base equiv)</i>	68
<i>mili tab 0.25/35</i>	34	<i>montelukast sodium chew tab 5 mg (base equiv)</i>	68
<i>mimvey tab 1-0.5mg</i>	30	<i>montelukast sodium oral granules packet 4 mg (base equiv)</i>	68
MINERAL OIL LIGHT	162	<i>montelukast sodium tab 10 mg (base equiv)</i>	68
MINIBREEZE MIS NEBULIZE.....	177	MOOD FOOD CAP	117
MINI COMPRES MIS NEBULIZR.....	177	MOOD FOOD ES CAP	117
MINIELITE MIS FILTERS.....	173	MORE-DOPHILU POW ACIDOPHI	78
MINI-MIST MIS PORTABLE	177	<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	98
<i>minocycline hcl cap 100 mg</i>	19	<i>morphine sulfate oral soln 10 mg/5ml</i>	98
<i>minocycline hcl cap 50 mg</i>	19	<i>morphine sulfate oral soln 20 mg/5ml</i>	98
<i>minocycline hcl cap 75 mg</i>	19	<i>morphine sulfate tab 15 mg</i>	98
<i>mintox plus chw</i>	81	<i>morphine sulfate tab 30 mg</i>	98
<i>mintox sus max st</i>	82	<i>morphine sulfate tab er 100 mg</i>	98
MIRENA IUD SYSTEM.....	31	<i>morphine sulfate tab er 15 mg</i>	98
<i>misoprostol tab 100 mcg</i>	83	<i>morphine sulfate tab er 200 mg</i>	98
<i>misoprostol tab 200 mcg</i>	83	<i>morphine sulfate tab er 30 mg</i>	98
<i>mm acetamino tab 500mg</i>	95	<i>morphine sulfate tab er 60 mg</i>	98
<i>mm acid-pep tab 20mg</i>	83	<i>motion sick chw 25mg</i>	85
<i>mm aller-ben tab 25mg</i>	55	<i>motion sickn tab 25 mg</i>	85
<i>mm aspirin tab low dose</i>	94	<i>motion sick tab 25mg</i>	85
MM BIOTIN CAP KERATIN	133	<i>motion-time chw 25mg</i>	85
<i>mm clearlax pow</i>	75	<i>motrin arthr gel pain 1%</i>	157
<i>mm fexofenad tab 180mg</i>	57	<i>motrin ib cap 200mg</i>	100
<i>mm ibuprofen tab 200mg</i>	100	<i>motrin ib tab 200mg</i>	100
<i>mm melatonin tab 10mg tr</i>	164	MOUTH KOTE SOL.....	151
MM PENTIPS MIS 31GX5MM.....	166	MOUTH KOTE SOL REMINT	151
MM PENTIPS MIS 31GX8MM.....	168	<i>move along tab 100mg</i>	74
MM PENTIPS MIS 32GX4MM	170	<i>m-pap liq 160/5ml</i>	97
MM TWIST MIS LANCETS.....	188	<i>mucinex cgh liq 5-100mg</i>	65
MOBILE LANCE MIS 30G	188	MUCINEX CHLD GRA 5-100MG.....	66
MOI-STIR SOL.....	151	<i>mucinex dm liq 20-400</i>	65
MOLESKIN PAD FOAM	200	<i>mucinex dm liq max str</i>	65
<i>mometasone furoate cream 0.1%</i>	160	MUCINEX DM TAB 30-600ER.....	66
<i>mometasone furoate oint 0.1%</i>	160	MUCINEX DM TAB 60-1200	67
<i>mometasone furoate solution 0.1% (lotion)</i>	160	MUCINEX D TAB 120-1200	64
MOMMYS BLISS POW PROBIOTI.....	79	MUCINEX D TAB 60-600MG.....	64
MONISTAT 3 KIT COMBO PK.....	89	<i>mucinex fast liq cst cong</i>	62
MONISTAT 7 KIT COMBO PK.....	89		
MONISTAT 7 KIT COMPLETE.....	89		
MONOLET MIS LANCETS	188		
MONOLET OPD MIS LANCETS	188		

MUCINEX TAB 1200MG	62	<i>multi cap for him</i>	117
<i>mucosa tab 400mg</i>	61	<i>multi complt tab /iron</i>	121
MUCOSITISRX POW	151	MULTI FOR POW HER	129
<i>mucus/cough liq 5-100mg</i>	65	MULTI FOR POW HIM	129
<i>mucus+chst liq 100/5ml</i>	62	<i>multi gummie chw mens</i>	127
<i>mucus+chst liq 200/10ml</i>	62	<i>multi gummie chw womens</i>	127
<i>mucus d max tab 120-1200</i>	64	<i>multihealth pow fiber</i>	73
<i>mucus dm max tab 60-1200</i>	67	<i>multiple vitamins w/ iron tab</i>	115
<i>mucus-dm max tab 60-1200</i>	67	<i>multiple vitamins w/ minerals liquid</i>	128
<i>mucus dm tab 30-600mg</i>	66	<i>multiple vitamins w/ minerals tab</i>	121
<i>mucus-dm tab 30-600mg</i>	66	<i>multiple vitamin tab</i>	114
<i>mucus dm tab 60-1200</i>	67	MULTISTIX 10 TES SG	163
<i>mucus d tab 120/1200</i>	64	<i>multi tab for her</i>	121
<i>mucus er max tab 1200mg</i>	62	<i>multi tab for him</i>	121
<i>mucus er tab 600mg</i>	62	<i>multiv/iron tab adult</i>	115
<i>mucus rel dm liq</i>	65	<i>multivi adlt chw gummies</i>	127
<i>mucus rel dm liq 20-400mg</i>	65	MULTIV INFAN DRO /TODDLER	130
<i>mucus rel dm liq 5-100/5</i>	65	<i>multi-vit/fe dro /fl 0.25</i>	132
<i>mucus relf d tab 60-600mg</i>	64	<i>multi-vit/fe tab</i>	115
<i>mucus relief liq 100/5ml</i>	62	<i>multivit/fl chw 0.25mg</i>	132
<i>mucus relief liq 400/20ml</i>	62	MULTIVIT/FL CHW 0.25MG.....	132
<i>mucus relief liq 5-100mg</i>	65	<i>multi vit/fl chw 0.25mg</i>	132
<i>mucus relief tab 1200 er</i>	62	<i>multivit/fl chw 0.5mg</i>	132
<i>mucus relief tab 1200mg</i>	62	MULTIVIT/FL CHW 0.5MG.....	132
<i>mucus relief tab 30-600er</i>	66	<i>multivit/fl chw 1mg</i>	132
<i>mucus relief tab 30-600mg</i>	66	MULTIVIT/FL CHW 1MG	132
<i>mucus relief tab 400mg</i>	61	<i>multi-vit/fl dro /fe 0.25</i>	132
<i>mucus relief tab 600mg</i>	62	<i>multivit/fl dro 0.25mg</i>	132
<i>mucus relief tab 600mg er</i>	62	<i>multi vit/fl dro 0.5mg/ml</i>	132
<i>mucus relief tab 60-1200</i>	67	<i>multi-vit/fl dro 0.5mg/ml</i>	132
<i>mucus relief tab 60-600mg</i>	64	<i>multi-vit/ tab minerals</i>	121
<i>mucus rlf dm liq 20-400mg</i>	65	<i>multi-vitami chw gummies</i>	127
<i>mucus rlf dm liq 5-100/5</i>	65	<i>multivitamin cap daily</i>	117
<i>mucus rlf dm tab 30-600er</i>	66	MULTIVITAMIN CHW ADLT GUM	127
<i>mucus rlf d tab 120-1200</i>	64	MULTIVITAMIN CHW CHILD	129, 131
<i>mucus rlf d tab 60-600mg</i>	64	<i>multivitamin chw children</i>	130
<i>multi+omega3 chw adult</i>	127	MULTIVITAMIN CHW CHILDREN	131
<i>multi 50+ cap for her</i>	117	MULTIVITAMIN CHW GUMMIES	131
<i>multi 50+ tab for her</i>	121	MULTIVITAMIN CHW IRON	132
<i>multi 50+ tab for him</i>	121	MULTIVITAMIN DRO INFANT	130
<i>multi 50+ wm tab advanced</i>	121	MULTIVITAMIN DRO ORGANIC	115
<i>multi adult chw gummies</i>	127	<i>multivitamin liq</i>	128
<i>multi cap complete</i>	117	MULTIVITAMIN LIQ.....	115
<i>multi cap for her</i>	117	<i>multivitamin liq mineral</i>	128

MULTIVITAMIN TAB	114, 121	MVW COMPLETE DRO PEDIATRI.....	131
<i>multivitamin tab adlt 50+</i>	121	MVW HI-D CHW ADEK	127
<i>multivitamin tab adult</i>	114	MVW HI-D DR LIQ EX VIT D	131
MULTIVITAMIN TAB ADULT	114, 121	MVW MOD FORM LIQ PEDS.....	131
<i>multivitamin tab adults</i>	121	MVW MODULAT CAP FORM MIN.....	117
MULTIVITAMIN TAB ADULTS	122	MVW MODULAT CAP FORMULAT	117
<i>multivitamin tab iron-fre</i>	114	<i>myamulti tab</i>	122
MULTIVITAMIN TAB MEN	122	<i>my choice tab 1.5mg</i>	32
<i>multivitamin tab men 50+</i>	122	<i>mycocide ns sol 1%</i>	155
<i>multivitamin tab women</i>	122	<i>mycophenolate mofetil cap 250 mg</i>	205
MULTIVITAMIN TAB WOMEN	122	<i>mycophenolate mofetil for oral susp 200</i>	
<i>multivitamin tab womens</i>	122	<i>mg/ml</i>	205
MULTIVITAMIN TAB ZINC STR.....	122	<i>mycophenolate mofetil tab 500 mg</i>	205
MULTI VITAMI TAB	114	<i>mycozyl ac cre 1%</i>	156
MULTI VITAMI TAB D-3.....	114	<i>mycozyl al sol 1%</i>	155
MULTI-VITAMI TAB MONOCAPS	121	MYGLUCOHEALT MIS LANC 30G	188
<i>multi vitam tab w/iron</i>	115	<i>mylanta sus max st</i>	82
<i>multi-vitam tab</i>	114	MYLERAN TAB 2MG.....	24
MULTI VITAMN TAB MINERALS	121	<i>mynephron cap</i>	112
MULTI-VITE LIQ	128	<i>my way tab 1.5mg</i>	32
<i>multi-vite tab</i>	121	N	
<i>multi-vite tab 50&over</i>	121	N95 MASK MIS	180
<i>multi-vit hp cap /mineral</i>	134	N95 PARTICUL MIS ATE RESP	180
<i>multiv women tab 50+</i>	121	<i>nabumetone tab 500 mg</i>	101
MULTI ZERO CHW YUMVSKID.....	131	<i>nabumetone tab 750 mg</i>	101
<i>mult vitamin tab essent</i>	114	<i>nadolol tab 20 mg</i>	43
<i>mult vitamin tab no iron</i>	121	<i>nadolol tab 40 mg</i>	43
<i>mult vitamin tab womens</i>	121	<i>nadolol tab 80 mg</i>	43
<i>mupirocin calcium cream 2%</i>	154	NANOVM POW 1-3 YRS	131
<i>mupirocin oint 2%</i>	154	NANOVM POW 4-8YEARS.....	131
<i>murine ear dro 6.5% ot</i>	150	NANOVM POW 9-18 YRS	131
<i>murine ear sol 6.5% ot</i>	150	NANOVM POW ADULT	128
MVASI INJ 100MG	25	NANOVM POW SENIOR	128
MVASI INJ 400MG.....	25	NANOVM T/F POW.....	131
<i>mv-one cap</i>	114	<i>naproxen sod cap 220mg</i>	101
MVW COMPLETE CAP D3000	117	<i>naproxen sod tab 220mg</i>	102
MVW COMPLETE CAP D5000	117	<i>naproxen tab 220mg</i>	102
MVW COMPLETE CAP FORMULAT	117	<i>naproxen tab 250 mg</i>	101
MVW COMPLETE CAP MINIS.....	117	<i>naproxen tab 375 mg</i>	101
MVW COMPLETE CHW BUBBLGUM	131	<i>naproxen tab 500 mg</i>	101
MVW COMPLETE CHW D3000	131	<i>naproxen tab ec 375 mg</i>	101
MVW COMPLETE CHW D5000	131	<i>naproxen tab ec 500 mg</i>	101
MVW COMPLETE CHW GRAPE	131	<i>naramin liq</i>	55
MVW COMPLETE CHW ORANGE.....	131	<i>naratriptan hcl tab 1 mg (base equiv)</i>	103

<i>naratriptan hcl tab 2.5 mg (base equiv)</i> ...	103	<i>neomycin-polymyxin-hc otic susp 3.5</i>	
<i>nasal allrgy spr 55mcg/ac</i>	60	<i>mg/ml-10000 unit/ml-1%</i>	150
<i>nasal decong tab 120mg er</i>	59	<i>neomycin sulfate tab 500 mg</i>	19
<i>nasal decong tab 30mg</i>	58	<i>neo-polycin oin hc 1%op</i>	149
<i>nasal moist spr 0.65%</i>	61	<i>neo-polycin oin op</i>	146
<i>nasal saline spr 0.65%</i>	61	<i>neosporin oin</i>	154
NATACYN SUS 5% OP.....	146	<i>neotuss liq</i>	66
<i>nateglinide tab 120 mg</i>	37	<i>nephro tab vitamins</i>	112
<i>nateglinide tab 60 mg</i>	37	<i>nephro-vite tab</i>	112
<i>natrul-100 tab super</i>	126	<i>neuac gel 1.2-5%</i>	153
<i>nat-rul cal tab /d 500mg</i>	136	<i>nevirapine susp 50 mg/5ml</i>	21
<i>nat-rul dail tab vit/iron</i>	115	<i>nevirapine tab 200 mg</i>	21
<i>nat-rul iron tab 325mg</i>	142	<i>nevirapine tab er 24hr 400 mg</i>	21
<i>nat-rul tab b-50</i>	134	<i>new day tab 1.5mg</i>	32
NAT-RUL THER TAB M	122	NEWFLORA CAP PROBIOTI	78
NATRUL-VITES TAB	122	NEXCARE TATT MIS BANDAGES.....	199
<i>natura-lax pow 3350 nf</i>	75	NEXCARE WATR MIS PRF BAND	199
NATURAL COND MIS + LUBE	201	NEXIUM GRA 2.5MG DR	84
<i>naturl fiber pow 28.3%</i>	72	NEXIUM GRA 5MG DR.....	84
NATURL FIBER POW 30.9%	73	NEXPLANON IMP 68MG	31
<i>naturl fiber pow 58.6%</i>	73	<i>niacin cap 400-100</i>	110
<i>nat veg lax tab 8.6mg</i>	71	<i>niacin cap 400mg</i>	110
NEB-RITE4 MIS	177	<i>niacin tab er 1000 mg (antihyperlipidemic)</i>	
NEBULIZER MIS MASK AD	173	52
NEBULIZER MIS MASK CH	173	<i>niacin tab er 500 mg (antihyperlipidemic)</i>	52
NEBULIZER MIS MASK CHD	173	<i>niacin tab er 750 mg (antihyperlipidemic)</i>	52
NEBULIZER MIS MASK INF	173	<i>nifedipine tab er 24hr 30 mg</i>	45
NEBULIZER MIS PED FROG.....	177	<i>nifedipine tab er 24hr 60 mg</i>	46
NEBULIZER MIS ULTRASON	177	<i>nifedipine tab er 24hr 90 mg</i>	46
NEBULIZER SY KIT ALLINONE.....	177	<i>nifedipine tab er 24hr osmotic release 30</i>	
<i>nebusal neb 3%</i>	63	<i>mg</i>	46
<i>necon tab 0.5/35</i>	33	<i>nifedipine tab er 24hr osmotic release 60</i>	
NEOMULTIVITE TAB	114	<i>mg</i>	46
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-</i>		<i>nifedipine tab er 24hr osmotic release 90</i>	
<i>400unt-10000unt op oin</i>	146	<i>mg</i>	46
<i>neomycin-polymy-gramicid op sol 1.75-</i>		<i>nighttime eye oin relief</i>	148
<i>10000-0.025mg-unt-mg/ml</i>	146	<i>nighttime tab 25mg</i>	90
<i>neomycin-polymyxin-dexamethasone</i>		<i>night time tab 25mg</i>	90
<i>ophth oint 0.1%</i>	149	<i>nikki tab 3-0.02mg</i>	33
<i>neomycin-polymyxin-dexamethasone</i>		NINLARO CAP 2.3MG.....	28
<i>ophth susp 0.1%</i>	148	NINLARO CAP 3MG.....	28
<i>neomycin-polymyxin-hc ophth susp</i>	149	NINLARO CAP 4MG.....	28
<i>neomycin-polymyxin-hc otic soln 1%</i>	150	NITRO-BID OIN 2%	43
		NITRO-DUR DIS 0.3MG/HR.....	43

NITRO-DUR DIS 0.8MG/HR.....	43	<i>norethindrone ace & ethinyl estradiol-fe tab</i>	
<i>nitrofurantoin macrocrystalline cap 100 mg</i>		<i>1 mg-20 mcg</i>	34
.....	24	<i>norethindrone ace & ethinyl estradiol tab 1.5</i>	
<i>nitrofurantoin macrocrystalline cap 25 mg</i>		<i>mg-30 mcg</i>	34
.....	24	<i>norethindrone ace & ethinyl estradiol tab 1</i>	
<i>nitrofurantoin macrocrystalline cap 50 mg</i>		<i>mg-20 mcg.....</i>	34
.....	24	<i>norethindrone acetate-ethinyl estradiol tab</i>	
<i>nitrofurantoin monohydrate</i>		<i>0.5 mg-2.5 mcg</i>	31
<i>macrocrystalline cap 100 mg</i>	24	<i>norethindrone acetate-ethinyl estradiol tab</i>	
<i>nitrofurantoin susp 25 mg/5ml.....</i>	24	<i>1 mg-5 mcg</i>	31
<i>nitroglycerin sl tab 0.3 mg</i>	43	<i>norethindrone acetate tab 5 mg</i>	36
<i>nitroglycerin sl tab 0.4 mg</i>	43	<i>norethindrone tab 0.35 mg.....</i>	31
<i>nitroglycerin sl tab 0.6 mg</i>	43	<i>norgestimate & ethinyl estradiol tab 0.25</i>	
<i>nitroglycerin td patch 24hr 0.1 mg/hr.....</i>	43	<i>mg-35 mcg.....</i>	34
<i>nitroglycerin td patch 24hr 0.2 mg/hr.....</i>	43	<i>norgestimate-eth estrad tab 0.18-25/0.215-</i>	
<i>nitroglycerin td patch 24hr 0.4 mg/hr.....</i>	43	<i>25/0.25-25 mg-mcg</i>	35
<i>nitroglycerin td patch 24hr 0.6 mg/hr.....</i>	43	<i>norgestimate-eth estrad tab 0.18-35/0.215-</i>	
<i>nitro-time cap 2.5mg cr.....</i>	42	<i>35/0.25-35 mg-mcg</i>	35
<i>nitro-time cap 6.5mg cr</i>	43	NORITATE CRE 1%	153
<i>nitro-time cap 9mg cr.....</i>	43	<i>norlyroc tab 0.35mg</i>	31
NIVA-FOL TAB.....	141	NORPACE CAP 100MG CR.....	46
NIX CREM RIN LIQ 1%.....	162	NORPACE CAP 150MG CR	46
NIX LICE SPR KILLING	162	<i>nortrel tab 0.5/35</i>	33
<i>nizatidine cap 150 mg</i>	83	<i>nortrel tab 1/35</i>	34
<i>nizatidine cap 300 mg</i>	83	<i>nortrel tab 7/7/7</i>	35
<i>non-asa jr tab 160mg qm</i>	98	NORVIR POW 100MG.....	21
<i>non-aspirin chw 160mg</i>	96	NOSE CLIP MIS	173
<i>non-aspirin chw 160mg jr.....</i>	96	NOVAMV PED DRO 10MG/ML	130
<i>non-aspirin chw 80mg</i>	96	NOVA SAFETY MIS LANC 23G	188
<i>non-aspirin sus 160/5ml.....</i>	97	NOVA SAFETY MIS LANC 28G	189
<i>non-aspirin tab 325mg</i>	95	NOVA SURE MIS LANCETS.....	189
<i>non-aspirin tab 500mg.....</i>	95	NOVOFINE MIS 32GX6MM	172
<i>non-aspirin tab 500mg/rr</i>	95	NOVOFINE PLS MIS 32GX4MM	170
<i>non-aspirin tab 650mg.....</i>	96	NOVOLIN INJ 70/30.....	36
<i>nora-be tab 0.35mg.....</i>	31	NOVOLIN INJ 70/30 FP	36
NORDITROPIN INJ 10/1.5ML	40	NOVOLIN N INJ 100 UNIT	36
NORDITROPIN INJ 15/1.5ML.....	40	NOVOLIN N INJ U-100	36
NORDITROPIN INJ 30/3ML	41	NOVOLIN R INJ 100 UNIT	36
NORDITROPIN INJ 5/1.5ML	40	NOVOLIN R INJ U-100.....	36
<i>norelgestromin-ethinyl estradiol td ptwk</i>		NOZIN NASAL KIT SANITIZE.....	60
<i>150-35 mcg/24hr.....</i>	32	NUEDEXTA CAP 20-10MG.....	93
<i>norethindrone ace & ethinyl estradiol-fe tab</i>		<i>nufol tab</i>	144
<i>1.5 mg-30 mcg</i>	35	<i>nulev tab 0.125mg</i>	83
		NUMOISYN LIQ.....	151

NUMOISYN LOZ	151	<i>ocuvite tab lutein</i>	122
NURTEC TAB 75MG ODT	104	<i>ocuvite xtra tab</i>	122
NUTRA-Z+ CAP	114	ODEFSEY TAB.....	22
<i>nutritional tab support</i>	122	<i>odor control aer powd 1%</i>	155
<i>nyamyc pow 100000</i>	154	<i>odor eaters aer 1%</i>	155
<i>nylia tab 1/35</i>	34	OFEV CAP 100MG.....	70
<i>nylia tab 7/7/7</i>	35	OFEV CAP 150MG.....	70
<i>nymyo tab 0.25-35</i>	34	<i>ofloxacin ophth soln 0.3%</i>	145
<i>nystatin cream 100000 unit/gm</i>	154	<i>ofloxacin otic soln 0.3%</i>	149
<i>nystatin oint 100000 unit/gm</i>	155	OMBRA COMPR MIS AIR FILT	173
<i>nystatin susp 100000 unit/ml</i>	150	<i>omega 3 cap 1000mg</i>	141
<i>nystatin tab 500000 unit</i>	20	OMEGA-3 CAP 1400MG.....	140
<i>nystatin topical powder 100000 unit/gm</i>	154	<i>omega-3 cf cap 1000mg</i>	141
<i>nystop pow 100000</i>	154	<i>omega-3 fatty acids cap 1000 mg</i>	141
<i>nytol quick tab 25mg</i>	91	<i>omega-3 fatty acids cap 1200 mg</i>	141
○		<i>omega-3 fatty acids cap 300 mg</i>	140
<i>ocean kids spr 0.65%</i>	61	<i>omega-3 fatty acids cap 435 mg</i>	140
<i>ocella tab 3-0.03mg</i>	33	<i>omega-3 fatty acids cap 500 mg</i>	140
OCREVUS INJ 300/10ML.....	93	<i>omega-3 fish cap 1000 mg</i>	141
<i>octreotide acetate inj 1000 mcg/ml (1</i> <i>mg/ml)</i>	41	<i>omega-3 fish cap 1200mg</i>	141
<i>octreotide acetate inj 100 mcg/ml (0.1</i> <i>mg/ml)</i>	41	<i>omepra/bicar cap 20-1100</i>	85
<i>octreotide acetate inj 200 mcg/ml (0.2</i> <i>mg/ml)</i>	41	<i>omeprazole cap 20.6mgdr</i>	84
<i>octreotide acetate inj 500 mcg/ml (0.5</i> <i>mg/ml)</i>	41	<i>omeprazole cap delayed release 10 mg</i> ..	84
<i>octreotide acetate inj 50 mcg/ml (0.05</i> <i>mg/ml)</i>	41	<i>omeprazole cap delayed release 20 mg</i> ...84	
<i>octreotide acetate subcutaneous soln pref</i> <i>syr 100 mcg/ml</i>	41	<i>omeprazole cap delayed release 40 mg</i> ..84	
<i>octreotide acetate subcutaneous soln pref</i> <i>syr 500 mcg/ml</i>	41	<i>omeprazole delayed release tab 20 mg</i> ..84	
<i>octreotide acetate subcutaneous soln pref</i> <i>syr 50 mcg/ml</i>	41	<i>omeprazole magnesium cap dr 20.6 mg (20</i> <i>mg base equiv)</i>	84
OCUHEALTH CAP VISION 2	117	<i>omeprazole magnesium delayed release</i> <i>tab 20 mg (base equiv)</i>	84
OCULAR TAB VITAMINS	122	<i>omeprazole tab 20mg</i>	84
<i>ocutabs tab</i>	122	OMNICAP TAB.....	114
<i>ocutabs tab lutein</i>	122	OMNIFLEX DPR.....	202
OCUVITE CAP ADULT.....	117	OMNIPOD 5 G6 KIT INTRO	180
<i>ocuvite eye cap health</i>	117	OMNIPOD 5 G6 MIS PODS	180
<i>ocuvite eye chw health</i>	127	OMNIPOD 5 G7 KIT INTRO	180
<i>ocuvite eye tab + multi</i>	122	OMNIPOD 5 G7 MIS PODS.....	180
OCUVITE LUTE CAP	117	OMNIPOD DASH KIT INTRO.....	180
		OMNIPOD DASH KIT PDM.....	180
		OMNIPOD DASH MIS PODS	180
		OMNIPOD GO KIT 10UNT/DY.....	180
		OMNIPOD GO KIT 15UNT/DY	180
		OMNIPOD GO KIT 20UNT/DY	180
		OMNIPOD GO KIT 25UNT/DY	180

OMNIPOD GO KIT 30UNT/DY	180	<i>one daily tab essentl</i>	114, 122
OMNIPOD GO KIT 35UNT/DY	180	ONE DAILY TAB ESSENTL	114
OMNIPOD GO KIT 40UNT/DY	180	<i>one daily tab fe/ca</i>	122
OMNIPOD MIS CLASSIC	180	<i>one daily tab healthy</i>	122
<i>once daily tab</i>	114	<i>one daily tab iron-fre</i>	122
ONCOVITE TAB.....	122	<i>one daily tab maximum</i>	122
<i>ondansetron hcl oral soln 4 mg/5ml</i>	85	<i>one daily tab men</i>	122
<i>ondansetron hcl tab 24 mg</i>	85	<i>one daily tab men 50+</i>	122
<i>ondansetron hcl tab 4 mg</i>	85	<i>one daily tab mens</i>	122
<i>ondansetron hcl tab 8 mg</i>	85	ONE DAILY TAB MENS	122
<i>ondansetron orally disintegrating tab 4 mg</i>	85	<i>one daily tab mens 50+</i>	122
<i>ondansetron orally disintegrating tab 8 mg</i>	85	ONE DAILY TAB MENS 50+	122
ONE A DAY CHW IMMUNITY	127	<i>one daily tab multi-vi</i>	122
ONE-A-DAY CHW IMMUNITY	127	<i>one daily tab multivit</i>	114
ONE-A-DAY CHW JLY RANC	131	<i>one-daily tab mult vit</i>	115
ONE-A-DAY CHW VITACRAV.....	115, 127	<i>one-daily tab mult-vit</i>	115
ONE A DAY CHW WOMENS	127	ONE DAILY TAB WMNS 50+	122
ONE-A-DAY TAB 50+ ADV	123	<i>one daily tab wom 50+</i>	122
ONE-A-DAY TAB 50+ MENS.....	123	<i>one daily tab women</i>	122
ONE-A-DAY TAB 50+ WMN	123	<i>one daily tab women 50</i>	122
ONE-A-DAY TAB 65+	123	<i>one daily tab womens</i>	122, 129
ONE-A-DAY TAB ENERGY	123	ONE DAILY TAB WOMENS.....	122
ONE-A-DAY TAB ESSENT	115	<i>one dly hlth tab wght adv</i>	123
ONE-A-DAY TAB MENOPAUS	123	ONELAX DAILY POW 83%.....	74
ONE-A-DAY TAB MENS.....	115, 123	<i>onelax fiber pow 25%</i>	72
ONE-A-DAY TAB PETITES.....	123	<i>onelax liq 50mg/5ml</i>	74
ONE-A-DAY TAB PROEDGE.....	123	<i>onelax senna syp 8.8/5ml</i>	71
<i>one-a-day tab teen/her</i>	123	<i>onelax sup 10mg</i>	70
ONE-A-DAY TAB TEEN/HIM.....	123	ONETOUCH DEL MIS LANC DEV	189
ONE-A-DAY TAB WOMENS	123, 129	ONETOUCH DEL MIS PLUS 30G	189
ONE-DAILY CAP MULTI	117	ONETOUCH DEL MIS PLUS 33G	189
ONE DAILY CHW ADLT GUM.....	127	ONETOUCH KIT ULTRA 2.....	180
ONE DAILY MN TAB W/O IRON	122	ONETOUCH KIT VERIO FL.....	180
<i>one daily mv tab /iron</i>	115	ONETOUCH KIT VERIO RE	180
ONE DAILY MV TAB WOMENS.....	122	ONETOUCH TES ULTRA	163
<i>one daily tab</i>	114	ONETOUCH TES VERIO	163
<i>one-daily tab /iron</i>	115	ONETOUCH US MIS 2 30G.....	189
<i>one daily tab /mineral</i>	122	ONE VITE TAB DAILY MV	115
<i>one daily tab 50+</i>	122	ON-THE-GO MIS LANC 30G.....	189
<i>one daily tab 50+ adv</i>	122	<i>opcicon tab 1.5mg</i>	32
<i>one daily tab 50 plus</i>	122	OPTICHAMBER MIS DIA LG.....	175
<i>one daily tab complete</i>	122	OPTICHAMBER MIS DIA MD	175
		OPTICHAMBER MIS DIAMOND.....	175
		OPTICHAMBER MIS DIA SM.....	175

<i>optic-vites tab</i>	123	<i>oscimin sub 0.125mg</i>	82
<i>optic-vites tab lutein</i>	123	<i>oscimin tab 0.125mg</i>	82
OPTIFAST POS CHW BARIATRI	127	<i>oseltamivir phosphate cap 30 mg (base equiv)</i>	23
<i>optimal d3 cap 50000unt</i>	108	<i>oseltamivir phosphate cap 45 mg (base equiv)</i>	23
OPTIMUM CHW AIRVITES	127	<i>oseltamivir phosphate cap 75 mg (base equiv)</i>	23
<i>optimum pms tab</i>	123	<i>oseltamivir phosphate for susp 6 mg/ml (base equiv)</i>	23
<i>option 2 tab 1.5mg</i>	32	OSPHERA TAB 60MG	40
OPTISOURCE CHW BARIATRC	127	OSTEOPRIME TAB PLUS	123
OPTIVITE TAB P.M.T.	123	<i>osteoprime tab ultra</i>	123
OPURITY CHW BYPASS	127	OTEZLA TAB 10/20/30	103
OPURITY TAB	123	OTEZLA TAB 30MG	103
ORALBALANCE GEL DRY MTH	151	<i>ovega-3 cap 500mg</i>	140
<i>oral electrolyte solution</i>	139	<i>oxaprozin tab 600 mg</i>	102
<i>oral electro sol cherry</i>	139	<i>oxybutynin chloride solution 5 mg/5ml</i> ...	88
<i>oral electro sol freezer</i>	139	<i>oxybutynin chloride tab 5 mg</i>	88
<i>oral electro sol h-e-b</i>	139	<i>oxybutynin chloride tab er 24hr 10 mg</i>	88
<i>oralone dent pst 0.1%</i>	150	<i>oxybutynin chloride tab er 24hr 15 mg</i>	88
ORAL RELIEF GEL DRY MOUT	151	<i>oxybutynin chloride tab er 24hr 5 mg</i>	88
ORAL RELIEF KIT DRY MOUT	151	<i>oxycodone hcl cap 5 mg</i>	98
<i>oral relief loz dry mout</i>	151	<i>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</i>	98
ORAL RELIEF SPR DRY MOUT	151	<i>oxycodone hcl soln 5 mg/5ml</i>	99
<i>oralyte sol bubl gum</i>	139	<i>oxycodone hcl tab 10 mg</i>	98
<i>oralyte sol fruit</i>	139	<i>oxycodone hcl tab 15 mg</i>	98
<i>oralyte sol grape</i>	139	<i>oxycodone hcl tab 20 mg</i>	98
<i>oralyte sol unflavor</i>	139	<i>oxycodone hcl tab 30 mg</i>	98
ORENITRAM TAB 0.125MG	53	<i>oxycodone hcl tab 5 mg</i>	98
ORENITRAM TAB 0.25MG	53	<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	99
ORENITRAM TAB 1MG	53	<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	99
ORENITRAM TAB 2.5MG	53	<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	99
ORENITRAM TAB 5MG	53	<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	99
ORENITRAM TAB MONTH 1	53	OXYTROL/WOMN DIS 3.9MG/24	88
ORENITRAM TAB MONTH 2	53	<i>oysco 500+d tab</i>	136
ORENITRAM TAB MONTH 3	53	<i>oys shell ca tab /d3</i>	136
ORKAMBI GRA 100-125	69	<i>oyst ca/d3 tab 500-200</i>	136
ORKAMBI GRA 150-188	69	<i>oyster shell calcium tab 500 mg</i>	135
ORKAMBI GRA 75-94MG	69		
ORKAMBI TAB 100-125	69		
ORKAMBI TAB 200-125	69		
<i>orphenadrine citrate tab er 12hr 100 mg</i>	106		
<i>os-cal + d3 tab 500-200</i>	136		
<i>os-cal chw</i>	137		
<i>os-cal chw 500-600</i>	137		
<i>os calcium tab /vit d</i>	136		
<i>os-cal extra tab d3</i>	136		

<i>oyst shell/d tab 250-125</i>	136	PANDA MASK MIS MEDIUM	176
<i>oyst shell/d tab 500-125</i>	136	PANDA MASK MIS PEDIATRI	176
<i>oyst shell/d tab 500-200</i>	136	PANDA MASK MIS SMALL	176
<i>oyst shell/d tab 500-400</i>	136	<i>panoxyl wash liq 10%</i>	152
<i>oyst shell/d tab 500-5mcg</i>	136	<i>panoxyl wash liq 4%</i>	152
<i>oyst shell/d tab 500mg</i>	136	<i>pantoprazole sodium ec tab 20 mg (base equiv)</i>	84
OYST SHELL/D TAB 500MG	135	<i>pantoprazole sodium ec tab 40 mg (base equiv)</i>	84
OZEMPIC INJ 2MG/3ML	37	PARAGARD IUD T380A	31
OZEMPIC INJ 4MG/3ML	37	PARI BABY MIS SIZE 0	177
OZEMPIC INJ 8MG/3ML	37	PARI BABY MIS SIZE 1	177
P		PARI BABY MIS SIZE 2	177
<i>pacerone tab 200mg</i>	46	PARI BBY NEB MIS SET	177
PADCEV INJ 20MG	26	<i>paricalcitol cap 1 mcg</i>	42
PADCEV INJ 30MG	26	<i>paricalcitol cap 2 mcg</i>	42
<i>pain/fever sup 120mg</i>	97	<i>paricalcitol cap 4 mcg</i>	42
<i>pain & fever chw 160mg</i>	96	PARI EXPIRAT MIS FILTER	174
<i>pain & fever liq 160/5ml</i>	97	PARI LC MIS SPRINT	177
<i>pain & fever sus 160/5ml</i>	97	PARI LC PLUS MIS	177
<i>pain relief cap 500mg</i>	95	PARI LC PLUS MIS NEBULIZR	177
<i>pain relief chw 160mg</i>	96	PARI LC PLUS MIS VIOS PRO	177
<i>pain relief elx 160/5ml</i>	97	PARI LC STAR MIS	177
<i>pain relief liq 160/5ml</i>	97	PARI MASK MIS SIZE 3	174
<i>pain relief liq 500/15ml</i>	97	PARI PLASTIC MIS MASK	174
<i>pain relief sus 160/5ml</i>	97	PARI PLASTIC MIS MASK PED	174
<i>pain relief tab 200mg</i>	100	PARI SINUS MIS AERO SYS	177
<i>pain relief tab 220mg</i>	102	PARI SMRTMSK MIS BABY	174
<i>pain relief tab 325mg</i>	95	PARI TREK S MIS	177
<i>pain relief tab 500mg</i>	95	PARI VORTEX MIS ADL MASK	176
<i>pain relief tab 500mg/rr</i>	95	PARVA-CAL TAB 500MG	135
<i>pain relief tab 650mg</i>	96	PARVLEX TAB	123
<i>pain relieve sus 160/5ml</i>	97	PAXLOVID TAB 150-100	23
<i>pain relieve tab 325mg</i>	95	PAXLOVID TAB 300-100	23
<i>pain relieve tab 500mg</i>	95	<i>pazopanib hcl tab 200 mg (base equiv)</i> ...	27
<i>pain relieve tab 500mg/rr</i>	95	PEANUTS MIS BANDAGES	199
<i>pain relievr chw 80mg</i>	96	PED COMPRESS MIS NEBULIZE	177
<i>pain relievr liq 500/15ml</i>	97	<i>ped elctrlyt sol</i>	139
<i>pain relievr tab 325mg</i>	95	<i>ped elctrlyt sol /zinc</i>	139
<i>pain relievr tab 500mg</i>	95	<i>ped elctrlyt sol apple</i>	139
<i>paladin oin</i>	161	<i>ped elctrlyt sol freeze</i>	139
<i>pamprin tab 220mg</i>	102	<i>ped elctrlyt sol freezer</i>	139
<i>panadol sus 160/5ml</i>	97	<i>ped elctrlyt sol freezpop</i>	139
<i>panadol tab 500mg</i>	95	<i>ped elctrlyt sol fruit</i>	140
<i>pan-c 500 tab bioflavo</i>	113		
PANDA MASK MIS LARGE	176		

<i>ped elctrlyt sol grape</i>	140	PEN NEEDLES MIS 31GX3/16	166
<i>ped elctrlyt sol pineappl</i>	140	PEN NEEDLES MIS 31GX5/16	168
<i>ped elctrlyt sol unflavor</i>	140	PEN NEEDLES MIS 31GX5MM	166
<i>ped elctrlyt sol unflavrd</i>	140	PEN NEEDLES MIS 31GX8MM	168
<i>pediacare al liq 12.5/5ml</i>	55	PEN NEEDLES MIS 32GX1/4	172
<i>pediacare sus 160/5ml</i>	97	PEN NEEDLES MIS 32GX4MM	170
<i>pedia d-vite dro 400unit</i>	109	PEN NEEDLES MIS 32GX5/32	170
<i>pedia iron dro 15mg/ml</i>	142	PEN NEEDLES MIS 32GX6MM.....	172
PEDIA-LAX CHW YUMS.....	78	PENTASA CAP 250MG CR	87
<i>pedialax fbr chw gummies</i>	72	PENTIPS MIS 31GX5MM.....	166, 167
PEDIA-LAX LIQ 50MG	74	PENTIPS MIS 31GX8MM.....	168
<i>pediatric dro iron</i>	142	PENTIPS MIS 32GX4MM	170
PEDIATRIC MD MIS MASK.....	180	PENTIPS MIS 32GX6MM	172
PEDIATRIC MIS MOUTHPIE	174	PEPCID AC TAB 20MG.....	83
PEDIATRIC SM MIS MASK.....	180	<i>perdiem tab 15mg</i>	71
<i>pediatric vitamins acd w/ fluoride soln 0.5</i> <i>mg/ml</i>	132	PERFECT 28G MIS LANCETS.....	189
<i>pedia vance sol apple</i>	140	PERFECT 30G MIS LANCETS	189
<i>pedia vance sol grape</i>	140	PERIDIN-C TAB.....	113
PED POLY-VIT DRO	130	<i>periogard sol 0.12%</i>	150
PED POLY-VIT DRO /IRON.....	132	<i>permethrin cream 5%</i>	162
<i>peg 3350-kcl-na bicarb-nacl-na sulfat</i> <i>for soln 236 gm</i>	76	<i>persa-gel gel 10%</i>	153
<i>peg 3350-kcl-sod bicarb-nacl for soln 420</i> <i>gm</i>	76	PFLEX MIS	174
PEGASYS INJ.....	22	PFT FILTER MIS 1000.....	174
PEGASYS INJ 180MCG/M	22	PH 12 STERIL SOL FLOLAN	204
<i>penicillin v potassium for soln 125 mg/5ml</i>	17	<i>pharbechlor tab 4mg</i>	54
<i>penicillin v potassium for soln 250 mg/5ml</i>	17	<i>pharbedryl cap 25mg</i>	54
<i>penicillin v potassium tab 250 mg</i>	17	<i>pharbedryl cap 50mg</i>	54
<i>penicillin v potassium tab 500 mg</i>	17	<i>pharbetol tab 325mg</i>	95
PEN NEEDLE MIS 29GX1/2	165	<i>pharbetol tab 500mg</i>	96
PEN NEEDLE MIS 31GX3/16.....	166	<i>pharbinex tab 400mg</i>	61
PEN NEEDLE MIS 31GX5/16.....	168	PHARMACY COU MIS LANCETS	189
PEN NEEDLE MIS 31GX5MM	166	PHARM CHOICE MIS WIPES	174
PEN NEEDLE MIS 31GX8MM	168	<i>phazyme chw 125mg</i>	87
PEN NEEDLE MIS 32GX1/4.....	172	<i>phenazopyridine hcl tab 100 mg</i>	89
PEN NEEDLE MIS 32GX4MM.....	170	<i>phenazopyridine hcl tab 200 mg</i>	90
PEN NEEDLE MIS 32GX5/32	170	<i>phenazo tab 200mg</i>	90
PEN NEEDLE MIS 32GX6MM	172	<i>phenobarbital elixir 20 mg/5ml</i>	90
PEN NEEDLES MIS 29GX1/2	165	<i>phenobarbital tab 100 mg</i>	90
PEN NEEDLES MIS 29GX12.7.....	165	<i>phenobarbital tab 15 mg</i>	90
		<i>phenobarbital tab 16.2 mg</i>	90
		<i>phenobarbital tab 30 mg</i>	90
		<i>phenobarbital tab 32.4 mg</i>	90
		<i>phenobarbital tab 60 mg</i>	90
		<i>phenobarbital tab 64.8 mg</i>	90

<i>phenobarbital tab 97.2 mg</i>	90	PIP PEN NEED MIS 32GX4MM	170
<i>phenytek cap 200mg</i>	105	PLAS BANDAGE MIS 3/4	199
<i>phenytek cap 300mg</i>	105	PLASTC BANDG MIS 3/4	199
<i>phenytoin chew tab 50 mg</i>	104	PLUVICTO INJ 1000MBQ.....	28
<i>phenytoin sodium extended cap 100 mg</i>	105	<i>pnv-dha cap</i>	134
<i>phenytoin sodium extended cap 200 mg</i>	105	<i>pnv-select tab</i>	134
.....	105	POCKET CHAMB MIS	175
<i>phenytoin sodium extended cap 300 mg</i>	105	POCKET SPACE MIS	175
.....	105	<i>podofilox soln 0.5%</i>	161
<i>phenytoin susp 125 mg/5ml</i>	104	POLIVY INJ 140MG.....	26
<i>philith tab 0.4-35</i>	33	POLIVY INJ 30MG.....	25
<i>phillips cap 100mg</i>	74	<i>poly bacitra oin</i>	154
PHLEXY-VITS POW	128	<i>polycin oin op</i>	146
<i>phospho-trin tab k500</i>	139	<i>polyethylene glycol 3350 oral packet 17 gm</i>	75
PHYTOMULTI TAB.....	123	75
<i>phytonadione tab 5 mg</i>	109	<i>polyethylene glycol 3350 oral powder 17 gm/scoop</i>	75
PIFELTRO TAB 100MG	21	POLYMEM DOT PAD 2	200
PILLOW MASK MIS ADULT	174	<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	146
PILLOW MASK MIS CHILD.....	174	POLY-VI-FLOR SUS /IRON.....	132
PILLOW MASK MIS PEDIATRI	174	<i>polyvinyl alcohol ophth soln 1.4%</i>	146
<i>pilocarpine hcl tab 5 mg</i>	151	POLY-VI-SOL SOL 50MG/ML.....	130
<i>pilocarpine hcl tab 7.5 mg</i>	151	POLY-VITA/FE DRO	132
<i>pimtrea tab</i>	35	POLY-VITA DRO	130
<i>pin-away sus 144mg/ml</i>	23	POLY-VITE DRO.....	130
<i>pindolol tab 10 mg</i>	43	POLY-VITE SOL /IRON.....	132
<i>pindolol tab 5 mg</i>	43	POLY-VITE SOL 50MG/ML.....	130
<i>pink bismuth chw 262mg</i>	76	PORENAL+D CAP OMEGA 3	117
<i>pink bismuth sus 262/15ml</i>	77	PORT COMPRES MIS NEBULIZR.....	177
<i>pink bismuth sus 525/30ml</i>	77	<i>portia-28 tab</i>	33
<i>pink bismuth sus max str</i>	77	<i>potassium chloride cap er 10 meq</i>	139
<i>pink bismuth tab 262mg</i>	76	<i>potassium chloride cap er 8 meq</i>	139
<i>pinworm med sus 144mg/ml</i>	23	<i>potassium chloride microencapsulated crys er tab 10 meq</i>	139
<i>pinxav oin</i>	161	<i>potassium chloride microencapsulated crys er tab 20 meq</i>	139
<i>pioglitazone hcl-glimepiride tab 30-2 mg</i> .38		<i>potassium chloride oral soln 10% (20 meq/15ml)</i>	139
<i>pioglitazone hcl-glimepiride tab 30-4 mg</i> 38		<i>potassium chloride oral soln 20% (40 meq/15ml)</i>	139
<i>pioglitazone hcl-metformin hcl tab 15-500 mg</i>	38	<i>potassium chloride tab er 10 meq</i>	139
<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i>	38	<i>potassium chloride tab er 20 meq (1500 mg)</i>	139
<i>pioglitazone hcl tab 15 mg (base equiv)</i>38			
<i>pioglitazone hcl tab 30 mg (base equiv)</i> ...38			
<i>pioglitazone hcl tab 45 mg (base equiv)</i> ...38			
PIP LANCETS MIS 28G	189		
PIP LANCETS MIS 30G	189		

<i>potassium chloride tab er 8 meq (600 mg)</i>	<i>prednisolone soln 15 mg/5ml</i>	29
.....	PREDNISOLONE SUS 1%.....	148
<i>potassium citrate tab er 10 meq (1080 mg)</i>	<i>prednisone oral soln 5 mg/5ml</i>	30
.....	<i>prednisone tab 10 mg</i>	29
<i>potassium citrate tab er 15 meq (1620 mg)</i>	<i>prednisone tab 1 mg</i>	29
.....	<i>prednisone tab 2.5 mg</i>	29
<i>potassium citrate tab er 5 meq (540 mg)</i> .89	<i>prednisone tab 20 mg</i>	30
<i>povidone/iod sol 10%</i>	<i>prednisone tab 50 mg</i>	30
.....	<i>prednisone tab 5 mg</i>	29
<i>povidone-iodine soln 10%</i>	<i>prednisone tab therapy pack 10 mg (21)</i> ...30	
.....	<i>prednisone tab therapy pack 10 mg (48)</i> ..30	
<i>povidone-ion sol 10%</i>	<i>prednisone tab therapy pack 5 mg (21)</i>30	
.....	<i>prednisone tab therapy pack 5 mg (48)</i> ...30	
PRALUENT INJ 150MG/ML	PRED SOD PHO SOL 1% OP.....	148
.....	PREMIUM MIS PACKETS.....	129
PRALUENT INJ 75MG/ML.....	<i>prenatabs rx tab</i>	134
.....	<i>prenatal 19 chw tab</i>	134
<i>pramipexole dihydrochloride tab 0.125 mg</i>	<i>prenatal chw wellness</i>	78
.....	<i>prep h cre 1%</i>	152
<i>pramipexole dihydrochloride tab 0.25 mg</i>	PREP PADS PAD	204
.....	PRESCRIPTION CAP SUPPORT	117
<i>pramipexole dihydrochloride tab 0.5 mg</i> 105	PRESERVISION CAP AREDS	117
<i>pramipexole dihydrochloride tab 0.75 mg</i>	PRESERVISION CAP AREDS 2	117
.....	PRESERVISION CAP LUTEIN	117
<i>pramipexole dihydrochloride tab 1.5 mg</i> .105	PRESERVISION CHW AREDS 2.....	127
<i>pramipexole dihydrochloride tab 1 mg</i>105	PRESERVISION TAB AREDS.....	123
<i>prasugrel hcl tab 10 mg (base equiv)</i>	PREVACID 24H CAP 15MG DR.....	84
.....	<i>prevalite pow 4gm</i>	50
<i>prasugrel hcl tab 5 mg (base equiv)</i>	<i>prevalite pow 4gm pk</i>	51
.....	<i>prevent cap</i>	117
<i>pravastatin sodium tab 10 mg</i>	PREVENT DROP MIS 31GX5/16.....	168
.....	PREVENT SAFE MIS 31GX5/16	168
<i>pravastatin sodium tab 20 mg</i>	PREVIDENT SOL 0.2%.....	150
.....	PREZCOBIX TAB 800-150	21
<i>pravastatin sodium tab 40 mg</i>	PREZISTA SUS 100MG/ML.....	20
.....	PREZISTA TAB 150MG	20
<i>pravastatin sodium tab 80 mg</i>	PREZISTA TAB 75MG	20
.....	<i>primadophilu cap</i>	78
<i>prazosin hcl cap 1 mg</i>	<i>primidone tab 250 mg</i>	105
.....	<i>primidone tab 50 mg</i>	105
<i>prazosin hcl cap 2 mg</i>	<i>probenecid tab 500 mg</i>	104
.....	<i>probiata tab</i>	78
<i>prazosin hcl cap 5 mg</i>	PROBIOMAX CAP SERENITY	78
.....	<i>probiotic cap</i>	78, 79
<i>prebiotic chw fiber</i>		
.....		
<i>prednisolone acetate ophth susp 1%</i>		
.....		
<i>prednisolone sodium phosphate oral soln</i>		
<i>25 mg/5ml (base eq)</i>		
.....		
<i>prednisolone sod phos orally disintegr tab</i>		
<i>10 mg (base eq)</i>		
.....		
<i>prednisolone sod phos orally disintegr tab</i>		
<i>15 mg (base eq)</i>		
.....		
<i>prednisolone sod phos orally disintegr tab</i>		
<i>30 mg (base eq)</i>		
.....		
<i>prednisolone sod phosphate oral soln 15</i>		
<i>mg/5ml (base equiv)</i>		
.....		
<i>prednisolone sod phosph oral soln 6.7</i>		
<i>mg/5ml (5 mg/5ml base)</i>		
.....		

PROBIOTIC CAP	78	<i>promethazine w/ codeine syrup 6.25-10</i>	
<i>probiotic cap acidophi</i>	78	<i>mg/5ml</i>	64
<i>probiotic cap gold</i>	78	<i>promethegan sup 12.5mg</i>	56
<i>probiotic chw children</i>	78	<i>promethegan sup 25mg</i>	56
PROBIOTIC DRO COLIC	79	<i>promethegan sup 50mg</i>	56
PROBIOTIC LIQ 15 DAY	79	<i>prometh vc syp 6.25-5/5</i>	64
PROBIOTIC LIQ NEWBORN	79	PRONEB MAX MIS LC PLUS	177
<i>probiotic pak children</i>	78	PRONEB MAX MIS LC SPRNT	177
PRO-CAL TAB	123	PRONEB ULTRA MIS FILTER.....	174
PROCARE COMP MIS NEBULIZE	177	PRONUTRIENTS TAB SUPER B	110
PROCARE MIS ADULT	175	<i>propafenone hcl cap er 12hr 225 mg</i>	46
PROCARE MIS CHILD	175	<i>propafenone hcl cap er 12hr 325 mg</i>	46
PROCEDURAL MIS MASK	180	<i>propafenone hcl cap er 12hr 425 mg</i>	46
PROCERV HP TAB	123	<i>propafenone hcl tab 150 mg</i>	46
PROCHAMBER MIS VHC	175	<i>propafenone hcl tab 225 mg</i>	46
<i>prochlorperazine maleate tab 10 mg (base</i>		<i>propafenone hcl tab 300 mg</i>	46
<i>equivalent)</i>	90	<i>propranolol hcl cap er 24hr 120 mg</i>	43
<i>prochlorperazine maleate tab 5 mg (base</i>		<i>propranolol hcl cap er 24hr 160 mg</i>	43
<i>equivalent)</i>	90	<i>propranolol hcl cap er 24hr 60 mg</i>	43
<i>prochlorperazine suppos 25 mg</i>	90	<i>propranolol hcl cap er 24hr 80 mg</i>	43
PRO COMFORT MIS 31G	189	<i>propranolol hcl oral soln 20 mg/5ml</i>	43
PRO COMFORT MIS 31GX8MM.....	169	<i>propranolol hcl oral soln 40 mg/5ml</i>	43
PRO COMFORT MIS 32GX4MM.....	171	<i>propranolol hcl tab 10 mg</i>	43
PRO COMFORT MIS 32GX6MM	172	<i>propranolol hcl tab 20 mg</i>	43
PRO COMFORT MIS LANC 30G	189	<i>propranolol hcl tab 40 mg</i>	43
PRO COMFORT MIS LANCETS.....	189	<i>propranolol hcl tab 60 mg</i>	43
<i>proctocort cre 1%</i>	152	<i>propranolol hcl tab 80 mg</i>	43
<i>procto-med cre hc 2.5%</i>	152	<i>proprinal cap 200mg</i>	100
<i>proctosol hc cre 2.5%</i>	152	<i>propylthiouracil tab 50 mg</i>	40
<i>proctozone cre -hc 2.5%</i>	152	PRORENAL+D CAP OMEGA-3	117
PRODIGY MIS 26G	189	PRORENAL+D TAB.....	123
PRODIGY MIS 28G	189	PRORENAL +D TAB.....	123
<i>pro-ex antif cre 1%</i>	156	<i>prosght tab</i>	123
<i>progesterone cap 100 mg</i>	36	PROTECT CAP CARDIO	117
<i>progesterone cap 200 mg</i>	36	PROTECT CAP PLUS SO	117
PROLASTIN-C INJ 1000MG	69	PROTEGRA CAP	117
PROLIA INJ 60MG/ML.....	40	PROVIT TAB	123
<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	64	PROXEED PLUS PAK.....	129
<i>promethazine hcl oral soln 6.25 mg/5ml</i> ..	56	PROXI-STRIP MIS 1/4	199
<i>promethazine hcl suppos 12.5 mg</i>	56	PROXI-STRIPS MIS 1/2	199
<i>promethazine hcl suppos 25 mg</i>	56	<i>pseudoephed-bromphen-dm syrup 30-2-10</i>	
<i>promethazine hcl tab 12.5 mg</i>	56	<i>mg/5ml</i>	64
<i>promethazine hcl tab 25 mg</i>	56	<i>pseudoephedrine-guaifenesin tab er 12hr</i>	
<i>promethazine hcl tab 50 mg</i>	56	<i>120-1200 mg</i>	64

<i>pseudoephedrine-guaifenesin tab er 12hr</i>	
60-600 mg	64
<i>pseudoephedrine hcl tab 30 mg</i>	58
<i>pseudoephedrine hcl tab 60 mg</i>	59
<i>pseudoephedrine hcl tab er 12hr 120 mg</i> ..	59
<i>pseudofed tab 30mg</i>	59
PSS SAFE LAN MIS.....	189
PSS SEL LANC MIS.....	189
<i>psylDEX pow 30%</i>	73
<i>psyllium cap 0.52 gm</i>	72
<i>psyllium fib pow 51.7%</i>	73
<i>psyllium pow 100%</i>	74
<i>psyllium powder 28.3%</i>	72
<i>psyllium see pow 100%</i>	74
PULMONEB LT MIS NEBULIZE	177
<i>pulmosal neb 7%</i>	63
PULMOZYME SOL 1MG/ML	69
PURE & GENTL DRO 0.3%	146
PURE AIR MIN MIS NEBULIZE.....	177
<i>pure calcium tab carbonat</i>	135
PURE COMFORT MIS 30G LAN.....	189
PURE COMFORT MIS 31GX5MM.....	167
PURE COMFORT MIS 32GX4MM.....	171
PURE COMFORT MIS 32GX6MM	172
PURE COMFORT MIS HUMIDIFI	178
PURE COMFORT MIS SPACER	175
PURE COMFORT PAD	204
PX LANCETS MIS 28G	189
PX LANCETS MIS 33G	189
<i>pyrazinamide tab 500 mg</i>	19
<i>pyridostigmine bromide oral soln 60</i>	
<i>mg/5ml</i>	106
<i>pyridostigmine bromide tab 60 mg</i>	106
<i>pyridostigmine bromide tab er 180 mg</i> ...	106
<i>pyridoxine hcl tab 25 mg</i>	107
<i>pyridoxine hcl tab 50 mg</i>	107
Q	
<i>qc 8 hr pain tab 650mg er</i>	96
<i>qc acetamino sus 160/5ml</i>	97
QC ALCOHOL PAD SWABS	204
<i>qc all day cap 10mg</i>	56
<i>qc allergy cap 25mg</i>	54
<i>qc allergy cap relief</i>	58
<i>qc allergy tab 10mg</i>	56, 58
<i>qc allergy tab 25mg</i>	55
<i>qc allergy tab 4mg</i>	54
<i>qc antacid chw 1000mg</i>	80
<i>qc antacid chw 500mg</i>	80
<i>qc antacid chw 750mg</i>	80
<i>qc antacid sus</i>	81
<i>qc antacid sus anti-gas</i>	81, 82
<i>qc anti-diar cap 2mg</i>	76
<i>qc antifunga cre 1%</i>	155
<i>qc anti-itch cre 1% aloe</i>	159
<i>qc apap 8 hr tab 650mg</i>	96
<i>qc aspirin chw 81mg</i>	94
<i>qc aspirin tab 325mg</i>	94
<i>qc aspirin tab 325mg ec</i>	95
<i>qc b50 tab pr</i>	112
<i>qc child asa chw 81mg</i>	94
<i>qc childrens chw complete</i>	132
<i>qc childrens chw extra c</i>	130
<i>qc childrens chw iron</i>	131
<i>qc clotrimaz cre 1%</i>	88
<i>qc cod liver cap</i>	109
<i>qc diclofena gel 1%</i>	157
<i>qc essential tab</i>	115
<i>qc famotidin tab acid red</i>	83
<i>qc fiber pow 25%</i>	72
<i>qc fiber pow 43%</i>	73
<i>qc fiber the pow 51.7%</i>	73
<i>qc fish oil cap 1000mg</i>	141
<i>qc gas relf chw 125mg</i>	87
<i>qc gas relf chw 80mg</i>	86
<i>qc hair/skin tab nails</i>	123
<i>qc ibuprofen cap 200mg</i>	100
<i>qc ibuprofen sus 100/5ml</i>	101
<i>qc ibuprofen tab 200mg</i>	100
QC LANCETS MIS 28G	190
QC LANCETS MIS 30G	190
<i>qc laxative sup 10mg</i>	70
<i>qc laxative tab 5mg ec</i>	70
<i>qc loratadin tab 10mg</i>	58
<i>qc medifin liq mucus rl</i>	62
<i>qc melatonin tab 10mg</i>	164
<i>qc melatonin tab 5mg</i>	164
<i>qc mucus rel tab 1200 er</i>	62
QC MULTI-VIT TAB.....	123

<i>qc naproxen cap 220mg</i>	101
<i>qc natural pow vegetabl</i>	74
<i>qc omepraza tab 20mg</i>	84
<i>qc pain reli liq 500/15ml</i>	97
<i>qc pink bism sus 525/15ml</i>	77
<i>qc senna tab 8.6mg</i>	71
<i>qc sleep aid cap 50mg</i>	90
<i>qc sleep-aid cap 50mg</i>	90
<i>qc stomach chw 262mg</i>	77
<i>qc stomach sus 525/15ml</i>	77
<i>qc stomach sus 525/30ml</i>	77
<i>qc suphedrin tab 120mg sr</i>	59
<i>qc therin-m tab</i>	123
<i>qc triple oin antibiot</i>	154
<i>qc tussin ex liq 100/5ml</i>	62
<i>qc vege laxa tab 8.6mg</i>	71
<i>qc vit b1 tab 100mg</i>	107
<i>qc vit d3 cap 1000unit</i>	107
<i>qc vit d3 cap 2000unit</i>	107
<i>qc vit d3 tab 1000unit</i>	108
<i>qc vit d3 tab 2000unit</i>	108
<i>qc vit d3 tab 25mcg</i>	108
<i>qc vit d3 tab 400unit</i>	108
<i>qc vit d3 tab 5000unit</i>	108
QUERCETIN CAP COMPLEX.....	113
QUFLORA PED CHW 0.25MG.....	132
QUFLORA PED CHW 0.5MG	132
QUFLORA PED CHW 1MG	132
QUFLORA PED DRO 0.25MG	132
QUFLORA PED DRO 0.5MG/ML.....	132
<i>quinapril hcl tab 10 mg</i>	47
<i>quinapril hcl tab 20 mg</i>	47
<i>quinapril hcl tab 40 mg</i>	47
<i>quinapril hcl tab 5 mg</i>	47
<i>quinapril-hydrochlorothiazide tab 20-12.5</i> <i>mg</i>	48
<i>quinapril-hydrochlorothiazide tab 20-25 mg</i>	48
<i>quin b stron tab b-25</i>	111
QUIN B TAB STRONG.....	123
<i>quintabs-m tab</i>	123
QUINTABS-M TAB.....	123
QUINTABS TAB.....	115
QVAR REDIIHA AER 80MCG	68

QVAR REDIIHAL AER 40MCG	68
R	
<i>ra acetamin tab 325mg</i>	95
RA ADHESIVE MIS BANDAGES	199
RA ALCOHOL PAD SWABS.....	204
<i>ra allergy tab 25mg</i>	55
<i>ra allergy tab 4mg</i>	54
<i>ra antacid chw 1000mg</i>	80
<i>ra antacid chw 500mg</i>	80
<i>ra antacid sus antigas</i>	82
<i>ra antacid sus anti-gas</i>	81
<i>ra anti-itch cre 1%</i>	159
<i>ra anti-itch oin 1%</i>	160
<i>ra antisepti sol 10%</i>	163
<i>ra aspirin chw 81mg</i>	94
<i>ra aspirin tab 325mg</i>	94
<i>ra aspirin tab 325mg ec</i>	95
<i>ra aspirin tab 81mg ec</i>	94
<i>ra balanced tab b-100</i>	111
<i>ra balanced tab b-50</i>	111
<i>ra balanced tab b-50 tr</i>	112
<i>ra balnaced tab b-100 tr</i>	112
<i>ra b-complex tab</i>	110
RA B-COMPLEX TAB VIT C TR.....	110
<i>ra b-complex tab w/b-12</i>	110
<i>ra ca/vit d3 tab 600-400</i>	137
<i>ra calcium+d tab 600mg</i>	137
RA CALCIUM TAB 500MG	135
<i>ra calcium tab high pot</i>	135
<i>ra calcium tab vit d</i>	137
<i>ra cetiri-d tab 5-120mg</i>	63
<i>ra childrens sus 160/5ml</i>	97
<i>ra chlorphen tab 4mg</i>	54
<i>ra cod liver cap</i>	109
RA COD LIVER OIL	110
<i>ra col-rite cap 100mg</i>	74
<i>ra col-rite cap 250mg</i>	74
RA DRY MOUTH SPR	151
RA EAR CARE TAB.....	134
<i>ra ear dro 6.5% ot</i>	150
RA EFFERVESC TAB FORMULA	134
RA ESSENCE-C POW ORANGE	129
RA ESSENCE-C POW RASPBRY.....	129
RA ESSENCE-C POW TNGERINE	129

RA E-ZJECT MIS 28G.....	190	RASUVO INJ 15MG.....	102
RA E-ZJECT MIS THIN 26G.....	190	RASUVO INJ 17.5MG.....	102
RA E-ZJECT MIS THIN 28G.....	190	RASUVO INJ 20MG.....	102
RA E-ZJECT MIS ULT THIN.....	190	RASUVO INJ 22.5MG.....	102
<i>ra fish oil cap 1000mg</i>	141	RASUVO INJ 25MG.....	102
<i>ra gas relf chw 125mg</i>	87	RASUVO INJ 30MG.....	102
<i>ra gas relf chw 80mg</i>	86	RASUVO INJ 7.5MG.....	102
<i>ra hi cal tab 500-200</i>	136	<i>ra triple oin antibiot</i>	154
<i>ra ibuprofen cap 200mg</i>	100	<i>ra tussin dm liq 100-10/5</i>	66
<i>ra ibuprofen tab 200mg</i>	100	<i>ra tussin liq 100/5ml</i>	62
<i>ra iron tab 27mg</i>	142	<i>ra tussin liq dm max</i>	66
<i>ra iron tab 65mg</i>	142	<i>ra vitamin cap 2000unit</i>	107
<i>ra laxative chw 15mg</i>	71	<i>ra vitamin c tab 1000mg</i>	114
<i>ra laxative pow</i>	75	<i>ra vit b-1 tab 100mg</i>	107
<i>ra laxative tab 5mg ec</i>	70	<i>ra vit b-6 tab 50mg</i>	107
<i>ra lice liq 1%</i>	162	RAYA SURE MIS 31GX5MM.....	167
<i>ra lorata-d tab 24 hour</i>	64	RAYA SURE MIS 31GX8MM.....	169
<i>raloxifene hcl tab 60 mg</i>	40	RAYAVIT TAB.....	123
<i>ra lubricant dro 0.4-0.3%</i>	147	<i>react tab 1.5mg</i>	32
RA MELATONIN SUB 1MG.....	164	READYLANCE MIS 21G.....	190
<i>ra melatonin tab 10mg</i>	164	READYLANCE MIS 23G.....	190
<i>ra melatonin tab 3mg</i>	164	READYLANCE MIS 26G.....	190
<i>ra melatonin tab 5mg</i>	164	READYLANCE MIS 28G.....	190
<i>ramipril cap 1.25 mg</i>	47	READYLANCE MIS 30G.....	190
<i>ramipril cap 10 mg</i>	47	REALITY MIS LANCETS.....	190
<i>ramipril cap 2.5 mg</i>	47	REALITY MIS LUBRICAT.....	201
<i>ramipril cap 5 mg</i>	47	REALITY SWAB PAD.....	204
<i>ra nasal spr allergy</i>	60	REALITY TRIG MIS LANCETS.....	190
<i>ra nighttime tab 25mg</i>	91	REALITY ULTR MIS TEXTURED.....	201
<i>ra one daily tab maximum</i>	123	REALITY ULTR MIS THIN.....	201
<i>ra one daily tab mens</i>	123	REBIF INJ 22/0.5.....	92
<i>ra one daily tab mens/d3</i>	123	REBIF INJ 44/0.5.....	92
<i>ra one daily tab mens 50+</i>	123	REBIF REBIDO INJ 22/0.5.....	92
<i>ra p col-rit tab 8.6-50mg</i>	75	REBIF REBIDO INJ 44/0.5.....	92
<i>ra pediatric sol electrol</i>	140	REBIF REBIDO INJ TITRATN.....	92
RA PEN NEEDL MIS 31GX3/16.....	167	REBIF TITRTN INJ PACK.....	92
RA SHEER ADH PAD LARGE.....	200	<i>reclipsen tab</i>	33
<i>ra sleep aid cap 50mg</i>	90	<i>reeses med sus pinworm</i>	23
<i>ra sleep aid tab 25mg</i>	90, 91	<i>refenesen tab 400mg</i>	61
RA STERILE SOL NASAL.....	61	<i>refresh cell gel 1% op</i>	146
<i>ra suphedrin tab 120mg cr</i>	59	REFRESH DRO OP.....	147
<i>ra suphedrin tab 30mg</i>	59	REFRESH DRO RELIEVA.....	147
RASUVO INJ 10MG.....	102	REFRESH DRO TEARS PF.....	147
RASUVO INJ 12.5MG.....	102	<i>refresh lacr oin op</i>	148

REFRESH OPTI DRO 0.5-0.9%	147	RETACRIT INJ 10000UNT	143
REFRESH OPT SOL MEGA-3.....	148	RETACRIT INJ 20000UNI.....	143
REFRESH SOL DIGITAL	148	RETACRIT INJ 2000UNIT	143
REFRESH SOL OPTIVE.....	148	RETACRIT INJ 3000UNIT.....	143
<i>reguloid cap 0.52gm</i>	72	RETACRIT INJ 40000UNT	143
<i>reguloid pow 43%</i>	73	RETACRIT INJ 4000UNIT.....	143
<i>reguloid pow 51.7%</i>	73	RETAIN CAP VISION	133
<i>reguloid pow orange</i>	72	<i>retaine pm oin</i>	148
REGULOID POW ORANGE.....	73	REVITAFLO CAP	78
REGULOID POW ORIGINAL.....	73	REVLIMID CAP 10MG.....	205
<i>rehydralyte sol</i>	140	REVLIMID CAP 15MG.....	205
REJUVAFLOR CAP	78	REVLIMID CAP 2.5MG	205
RELION LANCE MIS THIN 26G.....	190	REVLIMID CAP 20MG	205
RELION LANCE MIS THIN 30G.....	190	REVLIMID CAP 25MG	205
RELION MICRO MIS THIN 33G.....	190	REVLIMID CAP 5MG.....	205
RELION PEN MIS 31GX5/16.....	169	REYATAZ POW 50MG.....	20
RELION PEN MIS 31GX8MM	169	<i>ribavirin cap 200 mg</i>	22
RELION PEN MIS 32GX4MM	171	<i>ribavirin tab 200 mg</i>	22
RELION PEN MIS 32GX5/32	171	<i>rid lice kil sha 0.33-4%</i>	162
RELION ULTRA MIS THIN 30G	190	<i>rifabutin cap 150 mg</i>	19
RELION ULTRA MIS THIN PLS.....	190	<i>rifampin cap 150 mg</i>	19
REMODULIN INJ 10MG/ML.....	53	<i>rifampin cap 300 mg</i>	20
REMODULIN INJ 1MG/ML	52	RIGHTEST MIS GL300	190
REMODULIN INJ 2.5MG/ML	52	<i>riluzole tab 50 mg</i>	106
REMODULIN INJ 5MG/ML	53	RINVOQ TAB 15MG ER	103
<i>renal cap</i>	112	RINVOQ TAB 30MG ER.....	103
<i>renal vitamn tab</i>	112	RINVOQ TAB 45MG ER.....	103
RENAPLEX-D TAB	123	RISACAL-D TAB.....	138
<i>renaplex tab</i>	123	<i>risanoid tab plus</i>	134
<i>rena-vite rx tab</i>	112	RITEFLO MIS	175
<i>rena-vite tab</i>	112	<i>ritonavir tab 100 mg</i>	21
<i>reno cap</i>	112	<i>rivastigmine tartrate cap 1.5 mg (base</i> <i>equivalent)</i>	92
<i>repaglinide tab 0.5 mg</i>	37	<i>rivastigmine tartrate cap 3 mg (base</i> <i>equivalent)</i>	92
<i>repaglinide tab 1 mg</i>	37	<i>rivastigmine tartrate cap 4.5 mg (base</i> <i>equivalent)</i>	92
<i>repaglinide tab 2 mg</i>	37	<i>rivastigmine tartrate cap 6 mg (base</i> <i>equivalent)</i>	92
REPATHA INJ 140MG/ML	51	<i>rivastigmine td patch 24hr 13.3 mg/24hr</i> ..	92
REPATHA PUSH INJ 420/3.5.....	51	<i>rivastigmine td patch 24hr 4.6 mg/24hr</i>	91
REPATHA SURE INJ 140MG/ML	51	<i>rivastigmine td patch 24hr 9.5 mg/24hr</i>	91
REPHRESH CAP PRO-B	78	<i>rizatriptan benzoate oral disintegrating tab</i> <i>10 mg (base eq)</i>	104
REPLACEMENT MIS FILTER	174		
REPLACEMENT MIS FILTERS	174		
<i>restore plus dro 0.5% op</i>	146		
<i>restore tear dro 0.5% op</i>	146		
<i>rest simply tab 25mg</i>	91		

<i>rizatriptan benzoate oral disintegrating tab</i>		SAFETY MIS LANCETS	191
5 mg (base eq)	103	<i>salese/ loz xylitol</i>	151
<i>rizatriptan benzoate tab 10 mg (base</i>		SALINE/PHENO SOL	204
equivalent)	103	<i>saline mist spr 0.65%</i>	61
<i>rizatriptan benzoate tab 5 mg (base</i>		<i>saline nasal spr 0.65%</i>	61
equivalent)	103	SALIVAMAX POW	151
<i>robitussin liq 20-400</i>	65	<i>salivasure loz</i>	151
<i>robitussin liq 20-400mg</i>	65	<i>salmon oil cap 1000mg</i>	141
<i>ropinirole hydrochloride tab 0.25 mg</i>	105	<i>sam-e.p.a. cap 500mg</i>	140
<i>ropinirole hydrochloride tab 0.5 mg</i>	105	SANDIMMUNE SOL 100MG/ML.....	205
<i>ropinirole hydrochloride tab 1 mg</i>	105	SANTYL OIN 250/GM	161
<i>ropinirole hydrochloride tab 2 mg</i>	105	<i>sapropterin dihydrochloride powder packet</i>	
<i>ropinirole hydrochloride tab 3 mg</i>	105	100 mg	42
<i>ropinirole hydrochloride tab 4 mg</i>	105	<i>sapropterin dihydrochloride powder packet</i>	
<i>ropinirole hydrochloride tab 5 mg</i>	105	500 mg	42
<i>rosuvastatin calcium tab 10 mg</i>	51	<i>sapropterin dihydrochloride tab 100 mg</i> ..	42
<i>rosuvastatin calcium tab 20 mg</i>	51	SAPSCARE MIS TWIST	191
<i>rosuvastatin calcium tab 40 mg</i>	51	SAPS HEALTH MIS TWIST	191
<i>rosuvastatin calcium tab 5 mg</i>	51	SAPS HEALTH PAD ALCOHOL.....	204
ROZLYTREK CAP 100MG.....	28	SAPS TWIST MIS 30G.....	191
ROZLYTREK CAP 200MG	28	<i>sarnol-hc lot 1%</i>	160
ROZLYTREK PAK 50MG.....	28	SAVELLA MIS TITR PAK.....	93
RUBRACA TAB 200MG	28	SAVELLA TAB 100MG	93
RUBRACA TAB 250MG	28	SAVELLA TAB 12.5MG.....	93
RUBRACA TAB 300MG	28	SAVELLA TAB 25MG	93
RUCONEST INJ 2100UNIT	145	SAVELLA TAB 50MG	93
RYBELSUS TAB 14MG.....	37	SB ALCOHOL PAD PREP	204
RYBELSUS TAB 3MG	37	<i>sb allergy tab 10mg</i>	56
RYBELSUS TAB 7MG	37	<i>sb allergy tab 25mg med</i>	55
RYDAPT CAP 25MG.....	27	<i>sb antacid sus anti-gas</i>	81
<i>rynex pse liq</i>	63	<i>sb aspirin tab 325mg</i>	94
S		<i>sb aspirin tab 325mg ec</i>	95
SAFE-T-LANCE MIS 21G.....	190	<i>sb bisacodyl tab 5mg ec</i>	70
SAFE-T-LANCE MIS 25G.....	190	<i>sb bismuth tab 262mg</i>	76
SAFE-T-LANCE MIS HI FLOW	190	<i>sb cgh contr liq 100/5ml</i>	62
SAFE-T-LANCE MIS LOW FLOW	191	<i>sb child asa chw 81mg</i>	94
SAFE-T-LANCE MIS NOR FLOW	191	<i>sb coughtab tab 200mg</i>	61
SAFE-T-PRO MIS LANCETS	191	<i>sb docusate tab 8.6-50mg</i>	76
SAFE-T-PRO MIS PLUS	191	<i>sb fib lax pow 30%</i>	73
<i>safetussin liq dm</i>	66	<i>sb fib lax pow 33%</i>	73
SAFETY 21G MIS LANCETS.....	191	<i>sb gas relf chw 125mg</i>	87
SAFETY 23G MIS LANCETS.....	191	<i>sb hydrocort oin 1%</i>	160
SAFETY 28G MIS LANCETS.....	191	<i>sb ibuprofen tab 200mg</i>	100
SAFETY 30G MIS LANCETS.....	191	SB LANCETS MIS THIN	191

SB LANCETS MIS ULTR THN	191	<i>sennosides tab 8.6 mg</i>	71
<i>sb laxative sup 10mg</i>	70	<i>senokot extr tab 17.2mg</i>	71
<i>sb nat fiber pow 49%</i>	73	SENOKOT KIDS CHW GUMMIES	70
<i>sb non-asa chw 160mg</i>	96	SENOKOT LAX CHW GUMMIES	71
<i>sb non-asa chw 80mg frt</i>	96	SENOKOT TAB 8.6MG	71
<i>sb non-asa chw 80mg grp</i>	96	SENTRY SENIO TAB LUTEIN	124
<i>sb saline spr 0.65%</i>	61	<i>sentry tab</i>	124
<i>sb senna-lax tab 8.6mg</i>	71	SENTRY TAB	124
<i>sb sleep tab 25mg</i>	91	<i>sentry tab senior</i>	124
<i>sb triple oin antibiot</i>	154	SEROSTIM INJ 4MG	41
<i>scalpicin sol 1%</i>	159	SEROSTIM INJ 5MG	41
<i>scalp relief sol 1%</i>	159	SEROSTIM INJ 6MG	41
<i>scot-tussin liq expct sf</i>	62	<i>sevelamer carbonate packet 0.8 gm</i>	88
<i>sea-omega 50 cap 1000mg</i>	141	<i>sevelamer carbonate packet 2.4 gm</i>	88
SEGLUROMET TAB 2.5-1000	38	<i>sevelamer carbonate tab 800 mg</i>	88
SEGLUROMET TAB 2.5-500	38	<i>sf 5000 plus cre 1.1%</i>	150
SEGLUROMET TAB 7.5-1000	38	<i>sf gel 1.1%</i>	151
SEGLUROMET TAB 7.5-500	38	<i>shake ache tab 500mg</i>	96
<i>selegiline hcl cap 5 mg</i>	106	<i>sharobel tab 0.35mg</i>	31
<i>selegiline hcl tab 5 mg</i>	106	SHEER ADHESI MIS 3/4	199
<i>selenium sulfide lotion 2.5%</i>	158	SHEER BANDGE MIS	199
SELZENTRY SOL 20MG/ML	20	SHEER BANDGE MIS 1	199
SEMGLEE INJ 100U/ML	36	SHEER BANDGE MIS EX-LARGE	199
SEMGLEE SOL 100U/ML	36	SHIELD-SECUR MIS	180
<i>senexon-s tab 8.6-50mg</i>	76	SHR BANDAGES MIS	199
<i>senior tabs tab</i>	123	SHR BANDAGES MIS ASSORTED	199
<i>senna-extra tab 17.2mg</i>	71	SIDESTREAM MIS MASK	174
<i>senna laxati tab 8.6mg</i>	71	SIDESTREAM MIS NEBULIZR	177
<i>senna lax tab 8.6mg</i>	71	SIDESTREAM MIS PED MASK	174
<i>senna-lax tab 8.6mg</i>	71	SIDESTREAM MIS PLUS	177
<i>senna plus tab 8.6-50mg</i>	76	SIDESTRM PLS MIS FACE MSK	174
<i>senna-plus tab 8.6-50mg</i>	76	<i>signacal tab</i>	129
<i>senna smooth tab 15mg</i>	71	<i>siladryl alr liq 12.5/5ml</i>	55
<i>senna s tab 8.6-50mg</i>	76	<i>sildenafil citrate for suspension 10 mg/ml</i>	52
<i>senna-s tab 8.6-50mg</i>	76	<i>sildenafil citrate tab 20 mg</i>	52
SENNA SYP	71	SILICONE MSK MIS ADULT	174
<i>senna-tabs tab 8.6mg</i>	71	SILICONE MSK MIS INFANT	174
<i>senna-time s tab 8.6-50mg</i>	76	SILICONE MSK MIS PED	174
<i>senna-time tab 8.6mg</i>	71	<i>siltussin sa liq 100/5ml</i>	62
<i>sennazon syp 8.8mg/5</i>	71	<i>silver sulfadiazine cream 1%</i>	158
<i>sennosides cap 8.6 mg</i>	71	<i>simeped dro 40/0.6ml</i>	87
<i>sennosides-docusate sodium tab 8.6-50</i> <i>mg</i>	76	<i>simethicone cap 125 mg</i>	86
<i>sennosides syrup 8.8 mg/5ml</i>	71	<i>simethicone cap 180mg</i>	86
		<i>simethicone chew tab 125 mg</i>	87

<i>simethicone chew tab 80 mg</i>	86	<i>slow release tab 45mg</i>	142
<i>simethicone dro infants</i>	87	<i>slow-release tab 45mg</i>	142
<i>simethicone susp 40 mg/0.6ml</i>	87	SLOW RELEASE TAB 47.5MG.....	142
<i>simliya tab 28 day</i>	35	<i>slow-release tab fe 45mg</i>	142
<i>simpesse tab</i>	36	<i>slow release tab iron 45</i>	142
SIMPLY SALIN AER 0.9%	61	<i>slow rel fe tab 160mg cr</i>	143
<i>simply salin aer baby</i>	63	<i>sm 8 hr pain tab 650mg</i>	96
<i>simply sleep tab 25mg</i>	91	<i>sm acid redu tab 200mg</i>	83
<i>simvastatin tab 10 mg</i>	52	SM ADHESIVE PAD 2	200
<i>simvastatin tab 20 mg</i>	52	SM ADHESIVE PAD 3	200
<i>simvastatin tab 40 mg</i>	52	SM ALCOHOL PAD PREP	204
<i>simvastatin tab 5 mg</i>	52	<i>sm all day tab 10mg</i>	56
<i>simvastatin tab 80 mg</i>	52	<i>sm all day tab allergy</i>	57
SINGLE-LET MIS 23G.....	191	<i>sm all day tab allr rel</i>	58
<i>sinus/conges tab 120mg</i>	59	<i>sm allergy-d tab 5-120mg</i>	63
<i>sinus/conges tab 30mg</i>	59	<i>sm allergy sol 5mg/5ml</i>	58
<i>sinus 12 hr tab 120mg er</i>	59	<i>sm allergy tab 25mg rlf</i>	55
<i>sinus 12-hr tab 120mg er</i>	59	<i>sm allergy tab 60mg</i>	57
<i>sinus cngst tab 30mg</i>	59	<i>sm animal chw shapes</i>	130
<i>sirolimus oral soln 1 mg/ml</i>	205	<i>sm animal sh chw complete</i>	132
<i>sirolimus tab 0.5 mg</i>	205	<i>sm antacid chw 500mg</i>	80
<i>sirolimus tab 1 mg</i>	205	<i>sm antacid sus</i>	81
<i>sirolimus tab 2 mg</i>	205	<i>sm antacid sus advanced</i>	81, 82
SKIN/HAIR/ CAP NAILS	117	<i>sm antacid sus anti-gas</i>	81
SKIN BEAUTY/ PAK WELLNESS.....	129	<i>sm antacid sus max st</i>	82
<i>skin cleansr sol 4%</i>	162	<i>sm antibioti oin 500/gm</i>	154
<i>skin protect oin all-purp</i>	161	<i>sm anti-diar tab 2mg</i>	76
<i>skin trtment lot 12%</i>	161	<i>sm antifungl cre 1%</i>	155
SKYLA IUD 13.5MG	31	<i>sm antifungl cre 2%</i>	156
SKYRIZI INJ 150MG/ML.....	157	<i>sm antisepti sol clnsr 4%</i>	162
SKYRIZI INJ 180/1.2	88	SMARTEST MIS LANCETS	191
SKYRIZI INJ 360/2.4.....	88	<i>sm arthrts p tab 650mg</i>	96
SKYRIZI PEN INJ 150MG/ML	157	<i>sm artificia sol tears</i>	146
SKYRIZI SOL 60MG/ML	88	SMART NEB MIS COMP NEB	177
<i>sleep aid cap 50mg</i>	90	SMART SENSE MIS LANC 21G	191
<i>sleep-aid cap 50mg</i>	90	SMART SENSE MIS LANC 26G.....	191
<i>sleep-aid ms cap 50mg</i>	90	SMART SENSE MIS LANC 30G	191
<i>sleep aid tab 25mg</i>	90, 91	SMART SENSE MIS LANC 33G.....	191
<i>sleep-aid tab 25mg</i>	90, 91	SMARTY PANTS CHW KIDS	131
<i>sleep child/ liq melatoni</i>	164	<i>sm aspirin chw 81mg</i>	94
<i>sleep tab 25mg</i>	91	<i>sm aspirin tab 325mg ec</i>	95
<i>sleep-tabs tab 25mg</i>	91	<i>sm aspirin tab 81mg ec</i>	94
<i>slow iron tab 160mg er</i>	142	<i>sm b100 tab complex</i>	111
<i>slow release tab 143mg</i>	142	<i>sm balanced tab b-100</i>	111

<i>sm balanced tab b-50</i>	111	<i>sm folic acid tab 400mcg</i>	141
SM BANDAGES MIS ANTIBACT	199	<i>sm gas rel chw 125mg</i>	87
SM BANDAGES MIS CLEAR	199	<i>sm gas relf chw 80mg</i>	86
SM BANDAGES MIS CLR SPOT	199	<i>sm gas relie cap 180mg</i>	86
SM BANDAGES MIS FAB 3/4.....	199	<i>sm gas relie chw 80mg</i>	86
SM BANDAGES MIS FAB XL	199	<i>sm gentle tab laxative</i>	70
SM BANDAGES MIS FLEXIBLE	199	<i>sm hair/skin tab /nails</i>	124
SM BANDAGES MIS FOAM	199	<i>sm hydrocort cre 1%</i>	159
SM BANDAGES MIS FOAM XL	199	<i>sm hydrocort cre 1% plus</i>	159
SM BANDAGES MIS PLASTIC	199	<i>sm hydrocort oin 1%</i>	160
SM BANDAGES MIS SHEER	199	<i>sm ibuprofen cap 200mg</i>	100
SM BANDAGES MIS SHEER XL	199	<i>sm ibuprofen chw 100mg</i>	101
SM BANDAGES MIS STRNG ST	199	<i>sm ibuprofen tab 100mg jr</i>	100
SM BANDAGES MIS WTRSHELD	199	<i>sm ibuprofen tab 200mg</i>	100
<i>sm b-complex tab</i>	111	<i>sm iron slow tab 160mg cr</i>	143
SM B-COMPLEX TAB /VIT C	112	<i>sm iron slow tab 45mg</i>	142
<i>sm b complex tab with c</i>	110	<i>sm iron tab 325mg</i>	142
<i>sm b super tab vita com</i>	112	<i>sm iron tab 45mg</i>	142
<i>sm ca/mg/zn tab</i>	138	SM KNUCKLE/ MIS FINGERTP	199
<i>sm ca/vit d3 tab 600-400</i>	137	SM LANCETS MIS 33G	191
SM CALAMINE LOT.....	162	<i>sm laxative sup 10mg</i>	70
<i>sm cal citr+ tab vit d3</i>	138	<i>sm laxative tab 5mg ec</i>	70
<i>sm calcium/d tab 500-200</i>	136	<i>sm loratadin tab 10mg</i>	58
<i>sm calcium/d tab 600-400</i>	137	<i>sm lubricant dro 0.4-0.3%</i>	147
<i>sm calcium chw</i>	138	<i>sm melatonin tab 3mg</i>	164
<i>sm calcium tab /vit d3</i>	136	<i>sm melatonin tab 5mg</i>	164
<i>sm child asa chw 81mg</i>	94	<i>sm micon 7 sup 100mg</i>	89
<i>sm clearlax pow</i>	75	<i>sm mucus rel tab 1200 er</i>	62
<i>sm complete tab</i>	124	<i>sm mucus rel tab 600mg er</i>	62
<i>sm complete tab 50+</i>	124	<i>sm multiple tab vit/iron</i>	115
<i>sm complete tab 50+ mens</i>	124	<i>sm multiple tab vitamins</i>	115
<i>sm complete tab 50+ wmn</i>	124	<i>sm nasal dec tab 30mg</i>	59
<i>sm complete tab adv form</i>	124	<i>sm nighttime tab 25mg</i>	91
<i>sm complete tab senior</i>	124	<i>sm omepraza tab 20mg</i>	84
<i>sm dry eye sol relief</i>	148	SM ONE DAILY TAB ESSENTIA	129
<i>sm ear dro 6.5% ot</i>	150	SM ONE DAILY TAB MENS.....	124
<i>sm fiber pow</i>	72	SM ONE DAILY TAB WOMENS.....	124
<i>sm fiber pow 28.3%</i>	72	<i>smooth antac chw 750mg</i>	80
<i>sm fiber pow 43%</i>	73	<i>smooth anta chw fruit</i>	80
<i>sm fiber pow 51.7%</i>	73	<i>smooth lax pow</i>	75
<i>sm fiber pow 58.6%</i>	73	<i>smooth lax pow 3350</i>	75
<i>sm fish oil cap</i>	140	<i>smooth lax pow 3350 nf</i>	75
<i>sm fish oil cap 1000mg</i>	141	<i>sm opti-vita tab</i>	124
<i>sm fish oil cap 1200mg</i>	141	<i>sm pain rel tab 500mg</i>	96

<i>sm povid-iod sol 10%</i>	163	<i>sod sulfate-pot sulf-mg sulf oral sol 17.5-</i>	
<i>sm rpd melt tab 160mg</i>	98	<i>3.13-1.6 gm/177ml</i>	76
<i>sm senna lax tab 8.6mg</i>	71	SOFOS/VELPAT TAB 400-100	22
<i>sm senna-s tab 8.6-50mg</i>	76	SOFT 'N FLEX MIS	199
<i>sm sleep aid tab 25mg</i>	90	SOFTCLIX MIS LANCETS	191
<i>sm stomach chw 262mg</i>	77	SOLIQUA INJ 100/33	38
<i>sm stomach sus 262/15ml</i>	77	SOLO TAB	124
<i>sm stool sof tab 8.6-50mg</i>	76	SOLUS V2 MIS LANC 28G	192
SM STRONG MIS STRIPS	199	SOLUS V2 MIS LANC 30G	192
SM STURDY MIS STRIP	199	SOMATULINE INJ 120/.5ML	41
<i>sm triple oin antibiot</i>	154	SOMATULINE INJ 60/0.2ML	41
<i>sm tussin cf liq</i>	67	SOMATULINE INJ 90/0.3ML	41
<i>sm tussin dm liq 5-100/5</i>	65	<i>sominex max tab 50mg</i>	91
<i>sm tussin dm syp 100-10/5</i>	66	<i>sominex nigh tab 25mg</i>	91
<i>sm tussin liq dm</i>	66	<i>sominex tab 25mg</i>	91
<i>sm tussin syp dm</i>	66	<i>soothe chw 262mg</i>	77
SM VAPORIZER LIQ INHALANT	179	<i>soothe dro hydratio</i>	146
SM VAPORIZER TAB CLEANING	179	SOOTHENEB MIS COMP NEB.....	177
<i>sm vitamin d tab 400unit</i>	108	SOOTHENEB MIS MED CUP	174
<i>sm vit b1 tab 100mg</i>	107	SOOTHENEB MIS MESH CAP	174
<i>sm vit d3 cap 50mcg</i>	107	SOOTHENEB MIS NBL 100.....	174
<i>sod fluoride pst 1.1%</i>	151	SOOTHE NEB MIS NEBULIZE	177
<i>sodium chloride aero soln 0.9%</i>	63	<i>soothe night oin op</i>	148
<i>sodium chloride soln nebu 0.9%</i>	63	<i>soothe sus 262/15ml</i>	77
<i>sodium chloride soln nebu 10%</i>	63	<i>soothe sus 525/15ml</i>	77
<i>sodium chloride soln nebu 3%</i>	63	<i>soothe sus 525/30ml</i>	77
<i>sodium chloride soln nebu 7%</i>	63	<i>soothe xp dro</i>	147
<i>sodium fluor cre 5000 pls</i>	150	<i>soothe xp dro 1%-4.5%</i>	147
<i>sodium fluor cre 5000 ppm</i>	150	<i>soothe xp sol</i>	147
<i>sodium fluoride chew tab 0.25 mg f (from</i>		<i>sorbugen nr liq</i>	66
<i>0.55 mg naf)</i>	138	<i>sorbutuss nr liq 10-100/5</i>	66
<i>sodium fluoride chew tab 0.5 mg f (from 1.1</i>		SORESPT MIS BANDAGES.....	199
<i>mg naf)</i>	138	<i>sotalol hcl (afib/afl) tab 120 mg</i>	43
<i>sodium fluoride chew tab 1 mg f (from 2.2</i>		<i>sotalol hcl (afib/afl) tab 160 mg</i>	43
<i>mg naf)</i>	138	<i>sotalol hcl (afib/afl) tab 80 mg</i>	43
<i>sodium fluoride cream 1.1%</i>	150	<i>sotalol hcl tab 120 mg</i>	43
<i>sodium fluoride gel 1.1% (0.5% f)</i>	151	<i>sotalol hcl tab 160 mg</i>	43
<i>sodium fluoride soln 0.5 mg/ml f (from 1.1</i>		<i>sotalol hcl tab 240 mg</i>	43
<i>mg/ml naf)</i>	138	<i>sotalol hcl tab 80 mg</i>	43
<i>sodium fluoride tab 0.5 mg f (from 1.1 mg</i>		SPACE CHAMBR MIS ANTI-STA	175
<i>naf)</i>	138	SPACE CHAMBR MIS LARGE	175
<i>sodium fluoride tab 1 mg f (from 2.2 mg naf)</i>		SPACE CHAMBR MIS MEDIUM	175
.....	138	SPACE CHAMBR MIS SMALL	175
SOD OXYBATE SOL 500MG/ML	93	SPACER CHAMB MIS ADULT	175

SPACER CHAMB MIS CHILD	175	<i>stomach rele tab 262mg</i>	76
SPACER CHAMB MIS INFANT	175	<i>stomach relf chw 262mg</i>	77
<i>span c tab</i>	113	<i>stomach relf sus 1050/30</i>	77
SPARKY THE MIS DOG	177	<i>stomach relf sus 262/15ml</i>	77
<i>spectra ultr tab hlth men</i>	124	<i>stomach relf sus 524/30ml</i>	77
SPECTRAVITE CHW ADLT 50+	127	<i>stomach relf sus 525/15ml</i>	77
SPECTRAVITE CHW WOMEN.....	127	<i>stomach relf sus 525/30ml</i>	77
SPECTRAVITE TAB.....	124	<i>stomach relf sus 527/30ml</i>	77
SPECTRAVITE TAB ADLT 50+	124	<i>stomach relf sus max str</i>	77
SPECTRAVITE TAB ADULTS	124	<i>stomach relf sus plus</i>	77
<i>spectravite tab advanced</i>	124	<i>stomach relf tab 262mg</i>	76
<i>spectravite tab men</i>	124	<i>stool soft cap 240mg</i>	74
<i>spectravite tab men 50+</i>	124	<i>stool soft cap 250mg</i>	74
SPECTRAVITE TAB MEN 50+	124	<i>stool soften cap 100mg</i>	74
<i>spectravite tab senior</i>	124	<i>stool soften cap 250mg</i>	74
SPECTRAVITE TAB ULT MEN	124	<i>stool soften liq 50mg/5ml</i>	74
SPECTRAVITE TAB ULT WMN.....	124	<i>stool softnr cap 100mg</i>	74
<i>spectravite tab women</i>	124	<i>stool softnr cap 240mg</i>	74
<i>spectravite tab women 50</i>	124	<i>stool softnr cap 250mg</i>	74
<i>spectr women tab hlth sen</i>	124	<i>stool softnr cap 50mg</i>	74
<i>spinosad susp 0.9%</i>	162	<i>stool softnr tab 100mg</i>	74
<i>spironolactone & hydrochlorothiazide tab</i>		<i>stool softnr tab 8.6-50mg</i>	76
<i>25-25 mg</i>	50	<i>stress b/ tab zinc</i>	111
<i>spironolactone tab 100 mg</i>	50	<i>stress b-com tab antio/zn</i>	124
<i>spironolactone tab 25 mg</i>	50	<i>stress b com tab vit c/zn</i>	110
<i>spironolactone tab 50 mg</i>	50	<i>stress b com tab w/iron</i>	115
<i>sprintec 28 tab 28 day</i>	34	<i>stress form/ tab zinc</i>	111
SPRYCEL TAB 140MG	27	<i>stress form tab</i>	112, 115
SPRYCEL TAB 20MG	27	<i>stress form tab /iron</i>	115
SPRYCEL TAB 50MG	27	<i>stress formu tab</i>	115
SPRYCEL TAB 70MG	27	<i>stress plus tab zinc</i>	111
SPRYCEL TAB 80MG	27	<i>stresstabs tab</i>	115
<i>sps sus 15gm/60</i>	206	<i>stresstabs tab advanced</i>	124
<i>sronyx tab</i>	33	<i>stresstabs tab energy</i>	115
<i>ssd cre 1%</i>	158	STRIBILD TAB	22
STEGLATRO TAB 15MG	38	STRIVERDI AER 2.5MCG	67
STEGLATRO TAB 5MG.....	38	STRONG STRIP MIS WATERPRF.....	199
STERILANCE MIS TL 28G	192	<i>stye dro 0.5-0.6%</i>	147
STERILANCE MIS TL 30G	192	<i>stye oin</i>	148
STERILANCE MIS TL 32G	192	<i>sucrafate tab 1 gm</i>	84
<i>stimulant lx tab 8.6-50mg</i>	76	<i>sudafed 12hr tab 120mg cr</i>	59
STIVARGA TAB 40MG	27	<i>sudafed 12hr tab 120mg er</i>	59
<i>st joseph chw low 81mg</i>	94	SUDAFED 24HR TAB 240MG	59
<i>st joseph tab low 81mg</i>	94	SUDAFED CHLD LIQ 15MG/5ML	59

<i>sudogest 12 tab 120mg er</i>	59	<i>super antiox tab a/c/e/se</i>	124
<i>sudogest max tab 30mg</i>	59	SUPER B-50 CAP B-COMP	111
<i>sudogest tab 30mg</i>	59	SUPER B- CAP COMPLEX	111
<i>sudogest tab 60mg</i>	59	<i>super b-comp tab /fa/vitc</i>	112
<i>sulfacetamide sodium lotion 10% (acne)</i>	153	<i>super b comp tab /vit c</i>	112
<i>sulfacetamide sodium ophth soln 10% ...</i>	146	SUPER B-COMP TAB IRON/C	113
<i>sulfacetamide sodium-prednisolone ophth</i>		<i>super b comp tab vit c</i>	110, 112
<i>soln 10-0.23(0.25)%</i>	148	<i>super b-comp tab vit c/fa</i>	112
<i>sulfamethoxazole-trimethoprim susp 200-</i>		<i>super b- tab complex</i>	111
<i>40 mg/5ml</i>	24	<i>super-b tab complex</i>	111
<i>sulfamethoxazole-trimethoprim tab 400-80</i>		<i>super b w/c cap</i>	110
<i>mg</i>	24	<i>super ca 600 tab + d3</i>	137
<i>sulfamethoxazole-trimethoprim tab 800-</i>		<i>super ca 600 tab + d3 400</i>	137
<i>160 mg</i>	24	<i>super cal/ tab mag</i>	135
<i>sulfasalazine tab 500 mg</i>	87	<i>super calciu tab 600mg</i>	135
<i>sulfasalazine tab delayed release 500 mg</i>	87	SUPER D3 CAP COMPLEX	110
<i>sulfatrim pd sus 200-40/5</i>	24	<i>super dec tab b-100</i>	111
<i>sulindac tab 150 mg</i>	102	<i>super dha cap gems</i>	141
<i>sulindac tab 200 mg</i>	102	<i>superior 35 tab</i>	126
<i>sumatriptan nasal spray 20 mg/act</i>	104	SUPERIOR TAB MENS	124
<i>sumatriptan nasal spray 5 mg/act</i>	104	<i>super multip tab</i>	124
<i>sumatriptan succinate inj 6 mg/0.5ml</i>	104	<i>super omega cap -3</i>	141
<i>sumatriptan succinate solution auto-</i>		<i>super quints tab</i>	111
<i>injector 4 mg/0.5ml</i>	104	<i>super thera tab vite m</i>	124
<i>sumatriptan succinate solution auto-</i>		SUPER THIN MIS LANC 28G	192
<i>injector 6 mg/0.5ml</i>	104	SUPER THIN MIS LANCETS	192
<i>sumatriptan succinate solution cartridge 4</i>		<i>suphedrine tab 120mg er</i>	59
<i>mg/0.5ml</i>	104	SUPPORT-500 CAP	117
<i>sumatriptan succinate solution cartridge 6</i>		<i>supr aytinal tab</i>	124
<i>mg/0.5ml</i>	104	<i>supr aytinal tab 50 plus</i>	124
<i>sumatriptan succinate tab 100 mg</i>	104	<i>supr vitamin tab</i>	124
<i>sumatriptan succinate tab 25 mg</i>	104	SURE COMFORT MIS 29GX1/2	165
<i>sumatriptan succinate tab 50 mg</i>	104	SURE COMFORT MIS 31GX3/16	167
<i>summers eve sol ex clean</i>	89	SURE COMFORT MIS 31GX5/16	169
<i>sunitinib malate cap 12.5 mg (base</i>		SURE COMFORT MIS 32GX5/32	171
<i>equivalent)</i>	28	SURE COMFORT MIS 32GX6MM	172
<i>sunitinib malate cap 25 mg (base</i>		SURE COMFORT MIS LANC 18G	192
<i>equivalent)</i>	28	SURE COMFORT MIS LANC 21G	192
<i>sunitinib malate cap 37.5 mg (base</i>		SURE COMFORT MIS LANC 23G	192
<i>equivalent)</i>	28	SURE COMFORT MIS LANC 30G	192
<i>sunitinib malate cap 50 mg (base</i>		SURE COMFORT MIS LANCETS	192
<i>equivalent)</i>	28	SUREFLEX MIS LANCETS	192
SUPER ANTIOX CAP	117	SURELITE MIS LANCETS	192
<i>super antiox cap protect</i>	117	SURESEAL MIS EX LARGE	199

SURESEAL MIS K	199	<i>taztia xt cap 120mg/24</i>	45
SURESEAL MIS LARGE	199	<i>taztia xt cap 180mg/24</i>	45
<i>surfak cap 240mg</i>	74	<i>taztia xt cap 240mg/24</i>	45
SURGICAL MSK MIS N95	180	<i>taztia xt cap 300mg er</i>	45
<i>sv fish oil cap 500mg</i>	140	<i>taztia xt cap 360mg/24</i>	45
<i>sv iron tab 325mg</i>	142	TECHLITE AST MIS LANCETS	192
<i>sv melatonin tab 3mg</i>	164	TECHLITE MIS LANC 26G	192
<i>sv melatonin tab 5mg</i>	164	TECHLITE MIS LANCETS	192
<i>syeda tab 3-0.03mg</i>	33	<i>teeny tummy dro 20/0.3ml</i>	87
SYMDEKO TAB 50-75MG	70	<i>temozolomide cap 100 mg</i>	25
SYMTUZA TAB	22	<i>temozolomide cap 140 mg</i>	25
SYNAGIS INJ 100MG/ML	24	<i>temozolomide cap 180 mg</i>	25
SYNAGIS INJ 50/0.5ML	24	<i>temozolomide cap 20 mg</i>	25
SYNAREL SOL 2MG/ML	40	<i>temozolomide cap 250 mg</i>	25
SYNERTROPIN CAP	133	<i>temozolomide cap 5 mg</i>	25
SYNVISC INJ 8MG/ML	106	<i>tenofovir disoproxil fumarate tab 300 mg</i> .21	
SYNVISC ONE INJ 8MG/ML	106	<i>terazosin hcl cap 10 mg (base equivalent)</i> .48	
<i>systane dro contacts</i>	147	<i>terazosin hcl cap 1 mg (base equivalent)</i> .48	
<i>systane icap cap areds2</i>	117	<i>terazosin hcl cap 2 mg (base equivalent)</i> .48	
SYSTANE ICAP CHW AREDS2	127	<i>terazosin hcl cap 5 mg (base equivalent)</i> .48	
SYSTANE ICAP TAB AREDS2	124	<i>terbinafine hcl tab 250 mg</i>	20
<i>systane oin</i>	148	<i>terbutaline sulfate tab 2.5 mg</i>	67
T		<i>terbutaline sulfate tab 5 mg</i>	67
<i>tab-a-vite tab</i>	115	<i>terconazole vaginal cream 0.4%</i>	89
<i>tab-a-vite tab /iron</i>	115	<i>terconazole vaginal cream 0.8%</i>	89
<i>tab-a-vite tab beta car</i>	115	<i>terconazole vaginal suppos 80 mg</i>	89
TAB-A-VITE TAB IRON/BET	115	<i>teriflunomide tab 14 mg</i>	93
<i>tab tussin tab 400mg</i>	61	<i>teriflunomide tab 7 mg</i>	93
<i>tacrolimus cap 0.5 mg</i>	205	TERIPARATIDE INJ 620/2.48	40
<i>tacrolimus cap 1 mg</i>	205	<i>testosterone cypionate im inj in oil 100</i>	
<i>tacrolimus cap 5 mg</i>	205	<i>mg/ml</i>	30
<i>tacrolimus oint 0.03%</i>	161	<i>testosterone cypionate im inj in oil 200</i>	
<i>tacrolimus oint 0.1%</i>	161	<i>mg/ml</i>	30
TAFINLAR CAP 50MG	27	<i>testosterone enanthate im inj in oil 200</i>	
TAFINLAR CAP 75MG	27	<i>mg/ml</i>	30
TAFINLAR TAB 10MG	27	<i>testosterone td gel 10mg/act (2%)</i>	30
<i>take action tab 1.5mg</i>	32	<i>testosterone td gel 25 mg/2.5gm (1%)</i>	30
<i>tame flame chw 500mg</i>	80	<i>tetracycline hcl cap 250 mg</i>	19
<i>tamoxifen citrate tab 10 mg (base</i>		<i>tetracycline hcl cap 500 mg</i>	19
<i>equivalent)</i>	26	TGT LANCET MIS 26G	192
<i>tamoxifen citrate tab 20 mg (base</i>		TGT LANCET MIS 30G	192
<i>equivalent)</i>	26	TGT LANCET MIS 33G	192
<i>tamsulosin hcl cap 0.4 mg</i>	90	THALOMID CAP 100MG	205
<i>tarina fe tab 1/20 eq</i>	34	THALOMID CAP 50MG	204

<i>theophylline elixir 80 mg/15ml</i>	68	<i>tiadylt cap 300mg/24</i>	45
<i>theophylline soln 80 mg/15ml</i>	68	<i>tiadylt cap 360mg/24</i>	45
<i>theophylline tab er 12hr 300 mg</i>	68	<i>tiadylt cap 420mg/24</i>	45
<i>theophylline tab er 12hr 450 mg</i>	68	TIER UNI PLS MIS 31GX8MM.....	169
<i>theophylline tab er 24hr 400 mg</i>	68	<i>timolol maleate ophth gel forming soln</i>	
<i>theophylline tab er 24hr 600 mg</i>	68	0.25%.....	148
<i>therabasic-m tab</i>	125	<i>timolol maleate ophth gel forming soln</i>	
<i>therabreath loz dry mout</i>	151	0.5%.....	148
<i>theradex m/ tab beta car</i>	125	<i>timolol maleate ophth soln 0.25%</i>	148
<i>theradex m tab</i>	125	<i>timolol maleate ophth soln 0.5%</i>	148
<i>thera-d tab 2000unit</i>	108	<i>timolol maleate tab 10 mg</i>	43
<i>thera form/ tab hematin</i>	124	<i>timolol maleate tab 20 mg</i>	43
THERAGRAN-M TAB.....	125	<i>timolol maleate tab 5 mg</i>	43
THERAGRAN-M TAB 50 PLUS.....	125	<i>tinaspore sol 1%</i>	155
THERAGRAN-M TAB ADVANCED.....	125	<i>tineacide cre</i>	156
THERAGRAN-M TAB PREMIER.....	125	<i>titralac chw 420mg</i>	79
THERAMILL CAP FORTE.....	117	TIVICAY PD TAB 5MG.....	20
THERANATAL CAP LACTATIO.....	117	TIVICAY TAB 50MG.....	20
THERANATAL MIS LACTATIO.....	129	<i>tizanidine hcl tab 2 mg (base equivalent)</i>	106
<i>therapeutic tab -m</i>	125	<i>tizanidine hcl tab 4 mg (base equivalent)</i>	106
<i>therapeutic- tab m</i>	125	TM-DAILY TAB VITE.....	115
THERAPEUTIC- TAB M.....	125	<i>tobramycin-dexamethasone ophth susp</i>	
THERA TAB.....	115	0.3-0.1%.....	148
THERA-TABS M TAB.....	125	<i>tobramycin nebu soln 300 mg/4ml</i>	19
<i>thera-tabs tab</i>	115	<i>tobramycin nebu soln 300 mg/5ml</i>	19
<i>thera tab vital-m</i>	124	<i>tobramycin ophth soln 0.3%</i>	146
<i>theratears gel 1% oph</i>	146	<i>tolnaftate aerosol pow 1%</i>	155
THERATEARS SOL 0.25% PF.....	146	<i>tolnaftate cream 1%</i>	155
<i>theratrum co tab 50 plus</i>	125	<i>tolvaptan tab 15 mg</i>	42
<i>theratrum tab complete</i>	125	TOPCARE MIS LANC 33G.....	193
<i>thera vital tab m</i>	124	<i>toremifene citrate tab 60 mg (base</i>	
THEREMS TAB MULTIVIT.....	115	equivalent).....	26
<i>theromega cap 1000mg</i>	141	<i>torseamide tab 100 mg</i>	49
<i>thiamine hcl tab 100 mg</i>	107	<i>torseamide tab 10 mg</i>	49
<i>thiamine hcl tab 50 mg</i>	106	<i>torseamide tab 20 mg</i>	49
<i>thiamine mononitrate tab 100 mg</i>	107	<i>torseamide tab 5 mg</i>	49
THIN LANCETS MIS 26G.....	192	<i>total allerg liq 12.5/5ml</i>	55
THIN LANCETS MIS 30G.....	192	<i>total allerg tab 25mg</i>	55
THINLETS GP MIS 26G.....	193	<i>totalday mul tab tr</i>	126
THRESHOLD MIS IMT.....	174	<i>tramadol-acetaminophen tab 37.5-325 mg</i>	
<i>thrive for tab women</i>	125	99
<i>tiadylt cap 120mg/24</i>	45	<i>tramadol hcl tab 50 mg</i>	99
<i>tiadylt cap 180mg/24</i>	45	<i>tramadol hcl tab er 24hr 100 mg</i>	99
<i>tiadylt cap 240mg/24</i>	45	<i>tramadol hcl tab er 24hr 200 mg</i>	99

<i>tramadol hcl tab er 24hr 300 mg</i>	99	<i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i>	50
<i>trandolapril tab 1 mg</i>	47	<i>triamterene & hydrochlorothiazide tab 75-50 mg</i>	50
<i>trandolapril tab 2 mg</i>	47	<i>triderm cre 0.5%</i>	160
<i>trandolapril tab 4 mg</i>	47	<i>tri-estaryll tab</i>	35
<i>travel ease chw 25mg</i>	85	<i>trifluridine ophth soln 1%</i>	146
<i>travel-ease tab 25mg</i>	85	TRIKAFTA PAK 59.5MG	70
TRAVEL LANCE MIS ADV 28G	193	TRIKAFTA PAK 75MG	70
TRELEGY AER 100MCG	68	TRIKAFTA TAB	70
TRELEGY AER 200MCG	68	<i>tri-linyach tab</i>	35
TRELSTAR MIX INJ 3.75MG	26	<i>tri-lo-mili tab</i>	35
<i>treprostinil inj soln 100 mg/20ml (5 mg/ml)</i>	53	<i>tri-lo tab estaryll</i>	35
<i>treprostinil inj soln 200 mg/20ml (10 mg/ml)</i>	53	<i>tri-lo- tab marzia</i>	35
<i>treprostinil inj soln 20 mg/20ml (1 mg/ml)</i>	52	<i>tri-lo- tab sprintec</i>	35
<i>treprostinil inj soln 50 mg/20ml (2.5 mg/ml)</i>	52	<i>trimethobenzamide hcl cap 300 mg</i>	85
<i>tretinoin cap 10 mg</i>	28	<i>trimethoprim tab 100 mg</i>	23
<i>tretinoin cream 0.025%</i>	153	<i>tri-mili tab</i>	35
<i>tretinoin cream 0.05%</i>	153	<i>trinate tab</i>	134
<i>tretinoin cream 0.1%</i>	153	<i>tri-nymyo tab</i>	35
<i>tretinoin gel 0.01%</i>	153	<i>triphrocaps cap</i>	112
<i>tretinoin gel 0.025%</i>	153	<i>triple antib oin</i>	154
TREXALL TAB 10MG	25	<i>triple antib oin frst aid</i>	154
TREXALL TAB 15MG	25	<i>triple paste oin 2%</i>	156
TREXALL TAB 5MG	25	TRIPTODUR SUS 22.5MG	40
TREXALL TAB 7.5MG	25	<i>tri-sprintec tab</i>	35
<i>triamcinolone acetone cream 0.025%</i>	160	<i>tri super tab flavons</i>	113
<i>triamcinolone acetone cream 0.1%</i>	160	TRIUMEQ PD TAB	22
<i>triamcinolone acetone cream 0.5%</i>	160	TRIUMEQ TAB	22
<i>triamcinolone acetone dental paste 0.1%</i>	150	<i>tri-vit/fluo dro 0.25mg</i>	132
<i>triamcinolone acetone lotion 0.025%</i>	160	<i>tri-vit/fluo dro 0.5mg</i>	132
<i>triamcinolone acetone lotion 0.1%</i>	160	<i>trivora-28 tab</i>	35
<i>triamcinolone acetone nasal aerosol suspension 55 mcg/act</i>	60	<i>tri-vylibra tab</i>	35
<i>triamcinolone acetone oint 0.025%</i>	160	<i>tri-vylibra tab lo</i>	35
<i>triamcinolone acetone oint 0.1%</i>	160	TROGARZO INJ 150MG/ML	20
<i>triamcinolone acetone oint 0.5%</i>	160	TROMBONEX CAP	113
<i>triaminic tab 10mg</i>	58	TROMBONEX-D CAP	113
<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	50	<i>tropical liq nutritio</i>	128
		<i>trospium chloride tab 20 mg</i>	88
		TRUE COMFORT MIS 32GX4MM	171
		TRUE COMFORT MIS LANC 30G	193
		TRUE COMFORT PAD PRO	204
		TRUE COVER MIS CONDOM	201
		TRUE MULTI- TAB VITAMIN	115

<i>true nasal spr 0.65%</i>	61	<i>tussin adult liq 100/5ml</i>	62
<i>true vit b1 tab 100mg</i>	107	<i>tussin chest liq 100/5ml</i>	62
<i>true vit d3 cap 1250mcg</i>	108	<i>tussin cough liq 10-100/5</i>	66
<i>true vit d3 cap 250mcg</i>	108	<i>tussin dm liq</i>	66
TRULICITY INJ 0.75/0.5	36	<i>tussin dm liq 100-10/5</i>	66
TRULICITY INJ 1.5/0.5	36	<i>tussin dm liq 10-100/5</i>	66
TRULICITY INJ 3/0.5	36	<i>tussin dm liq 20-400</i>	65
TRULICITY INJ 4.5/0.5	37	<i>tussin dm liq 20-400mg</i>	65
TRUPLUS LANC MIS 26G	193	<i>tussin dm liq 20-400ml</i>	65
TRUPLUS LANC MIS 28G	193	<i>tussin dm liq 5-100mg</i>	65
TRUPLUS LANC MIS 30G	193	<i>tussin dm mx liq</i>	65
TRUPLUS LANC MIS 33G	193	<i>tussin dm mx liq 5-100/5</i>	65
TRUSTEX/RIA MIS LUBRICAT	202	<i>tussin dm mx liq 5-100mg</i>	65
TRUSTEX/RIA MIS NON-LUB	202	<i>tussin dm syp 100-10/5</i>	66
TRUSTEX/RIA MIS SPERMICI	202	<i>tussin mucus liq 100/5ml</i>	62
TRUSTEX LUBR MIS ASSORTED	201	<i>tussin mucus liq 200/10ml</i>	62
TRUSTEX LUBR MIS BANANA	201	T-VITES TAB	124
TRUSTEX LUBR MIS CHOC	201	TWIST LANCET MIS 30G	193
TRUSTEX LUBR MIS COLA	201	TWIST LANCET MIS 30G MULT	193
TRUSTEX LUBR MIS COLORS	201	TYBOST TAB 150MG	21
TRUSTEX LUBR MIS EX LARGE	202	TYMLOS INJ	40
TRUSTEX LUBR MIS EX STR	202	TYVASO DPI POW 16-32-48	53
TRUSTEX LUBR MIS GRAPE	202	TYVASO DPI POW 16MCG	53
TRUSTEX LUBR MIS MINT	202	TYVASO DPI POW 32MCG	53
TRUSTEX LUBR MIS RIB/STUD	202	TYVASO DPI POW 48MCG	53
TRUSTEX LUBR MIS SPERMICI	202	TYVASO DPI POW 64MCG	53
TRUSTEX LUBR MIS STRWBRY	202	TYVASO REFIL SOL 0.6MG/ML	52
TRUSTEX LUBR MIS VANILLA	202	TYVASO SOL 0.6MG/ML	52
TRUSTEX MIS BANANA	202	TYVASO START SOL 0.6MG/ML	52
TRUSTEX MIS CHOCOLAT	202	U	
TRUSTEX MIS FLAVORS	202	UBRELVY TAB 100MG	104
TRUSTEX MIS MINT	202	UBRELVY TAB 50MG	104
TRUSTEX MIS STRWBRY	202	ULTICARE MIC MIS 32GX4MM	171
TRUSTEX MIS VANILLA	202	ULTICARE PAD ALCOHOL	204
TRUSTX NON-9 MIS RIB/STUD	202	ULTICARE PEN MIS 31GX5MM	167
TUBE CLEANIN MIS BRUSH	174	ULTICARE PEN MIS 31GX8MM	169
TUKYSA TAB 150MG	25	ULTIGUARD MIS 31GX5MM	167
TUKYSA TAB 50MG	25	ULTIGUARD MIS 31GX8MM	169
TUMS CHW DEL CHW 1177MG	80	ULTIGUARD MIS 32GX4MM	171
<i>tums smoothi chw 750mg</i>	80	ULTIGUARD MIS 32GX6MM	172
<i>turqoz tab</i>	34	ULTILET MIS 26G	193
TUSNEL C SYP	67	ULTILET MIS 28G	193
<i>tusnel diabt liq 10-100/5</i>	66	ULTILET MIS 30G	193
<i>tusnel-ex liq 100/5ml</i>	62	ULTILET MIS 33G	193

ULTILET MIS LANCETS.....	193	UNIFINE PLUS MIS 31GX3/16.....	167
ULTILET MIS SAFETY	193	UNIFINE PLUS MIS 31GX5/16	169
ULTILET PAD ALCOHOL.....	204	UNIFINE PLUS MIS 32GX5/32	171
ULTILET PEN MIS 29GX12.7.....	165	UNIFINE PNTP MIS 31GX3/16	167
ULTILET PEN MIS 31GX5MM	167	UNIFINE PNTP MIS 31GX5/16.....	169
ULTILET PEN MIS 31GX8MM	169	UNIFINE PNTP MIS 31GX5MM.....	167
ULTILET PEN MIS 32GX4MM	171	UNIFINE PNTP MIS 31GX8MM	169
ULTILET SAFE MIS 21G	193	UNIFINE PNTP MIS 32GX4MM.....	171
<i>ultimate fat tab burner</i>	134	UNIFINE PNTP MIS 32GX5/32.....	171
<i>ult lub eye dro 0.4-0.3%</i>	147	UNIFINE PNTP MIS 32GX6MM	172
<i>ultra b-100 tab complex</i>	135	UNIFINE PROT MIS 32GX4MM.....	171
ULTRA BONEUP TAB	125	UNIFINE SAFE MIS 32GX4MM	171
<i>ultra choice chw kids</i>	132	UNIFINE ULTR MIS 31GX5MM	167
<i>ultrachoice tab advanced</i>	125	UNIFINE ULTR MIS 31GX8MM	169
<i>ultra eye dro 0.4-0.3%</i>	147	UNIFINE ULTR MIS 32GX4MM	171
<i>ultra eye pf dro 0.4-0.3%</i>	147	UNILET EXCEL MIS 23G	194
ULTRA FLO MIS 31GX5MM	167	UNILET EX II MIS 28G	194
ULTRA FLO MIS 31GX8MM	169	UNILET G.P. MIS 21G.....	194
ULTRA FLO MIS PEN NEED.....	171	UNILET G.P MIS SUPR 23G	194
<i>ultra freeda tab</i>	125	UNILET GP 28 MIS ULT THIN.....	194
<i>ultra freeda tab /iron</i>	125	UNILET LANCE MIS 21G	194
<i>ultra fresh dro 0.5% op</i>	146	UNILET LANCE MIS 28G.....	194
<i>ultra fresh oin pm</i>	148	UNILET LANCE MIS 33G.....	194
ULTRA MEGA G TAB 100MG.....	126	UNILET LANC MIS 33G	194
ULTRA MEGA G TAB 75MG CR	126	UNILET LANCT MIS 28G	194
ULTRA MEGA TAB 75MG CR.....	126	UNILET LANCT MIS 30G	194
<i>ultra-mega tab cr</i>	126	UNILET LANCT MIS 33G.....	194
ULTRA MEGA TAB TWO	126	UNILET MICRO MIS 33G.....	194
<i>ultra multi cap /iron</i>	117	UNILET MIS 21G.....	194
ULTRA NEB MIS ACCESSOR	174	UNILET SUPER MIS 23G	194
ULTRA OMEGA3 CAP 1400MG	140	UNILET SUPER MIS G.P. 23G.....	194
ULTRA POTENC TAB WOMEN 50.....	125	UNI-SOLVE PAD WIPES.....	163
<i>ultra sleep tab 25mg</i>	90	UNISTIK 3 MIS GENT 30G	194
ULTRASONIC MIS MINI NEB.....	177	UNISTIK PRO MIS LANC 21G	194
ULTRA THIN MIS 28G	193	UNISTIK PRO MIS LANC 28G	194
ULTRA THIN MIS 30G	193	UNISTIK SAFE MIS LANC 28G	195
ULTRA THIN MIS 31G	193	UNISTIK SAFE MIS LANC 30G.....	195
ULTRA THIN MIS 33G	193	UNISTIK TOUC MIS LANC 21G.....	195
ULTRA THIN MIS LAN 31G	193	UNISTIK TOUC MIS LANC 23G.....	195
ULTRA THIN MIS LANC 28G.....	194	UNISTIK TOUC MIS LANC 28G.....	195
ULTRA THIN MIS LANC 30G.....	194	UNISTIK TOUC MIS LANC 30G.....	195
ULTRA THIN MIS LANCETS	194	<i>unithroid tab 100mcg</i>	39
ULTSONIC FLT MIS #415-1	179	<i>unithroid tab 112mcg</i>	39
UNFINE PNTP MIS 32GX4MM.....	171	<i>unithroid tab 125mcg</i>	39

<i>unithroid tab 137mcg</i>	39	<i>valsartan-hydrochlorothiazide tab 80-12.5</i>	
<i>unithroid tab 150mcg</i>	39	<i>mg</i>	49
<i>unithroid tab 175mcg</i>	40	<i>valsartan tab 160 mg</i>	47
<i>unithroid tab 200mcg</i>	40	<i>valsartan tab 320 mg</i>	47
<i>unithroid tab 25mcg</i>	39	<i>valsartan tab 40 mg</i>	47
<i>unithroid tab 300mcg</i>	40	<i>valsartan tab 80 mg</i>	47
<i>unithroid tab 50mcg</i>	39	<i>vancomycin hcl cap 125 mg (base</i>	
<i>unithroid tab 75mcg</i>	39	<i>equivalent)</i>	24
<i>unithroid tab 88mcg</i>	39	<i>vancomycin hcl cap 250 mg (base</i>	
UNITSTIK PRO MIS LANC 25G	195	<i>equivalent)</i>	24
UNIVERSAL 1 MIS 33G	195	VAPOPADS PAD REFILL.....	179
UNIVERSAL 1 MIS LANC 26G.....	195	VAPORIZER MIS 1.2 GAL.....	179
UNIVERSAL 1 MIS LANC 30G.....	195	VAPORIZER MIS 1.7 GAL.....	179
UPLIZNA SOL 100MG.....	205	VAPORIZER MIS 1.9 GAL	179
UPSPRINGBABY DRO MV/IRON.....	131	VAPORIZER MIS 1 GALLON.....	179
UPSPRING TAB HE NATAL	134	VAPORIZER MIS 2 GALLON	179
UPTRAVI PACK TAB 200/800	52	VAPORIZER MIS 3 GALLON	179
UPTRAVI TAB 1000MCG.....	52	VAPORIZER MIS WATERLES	179
UPTRAVI TAB 1200MCG.....	52	VAPORIZER PAD SCENT	179
UPTRAVI TAB 1400MCG.....	52	VARIETY PACK MIS BANDAGES.....	199
UPTRAVI TAB 1600MCG.....	52	<i>varisan tab vitality</i>	134
UPTRAVI TAB 200MCG.....	52	VASOFLEX CAP	113
UPTRAVI TAB 400MCG	52	VASOFLEX CAP FORTE	113
UPTRAVI TAB 600MCG	52	<i>vasoflex hd tab</i>	113
UPTRAVI TAB 800MCG	52	<i>vasoflex tab</i>	113
<i>ursodiol cap 300 mg</i>	86	VCF VAGINAL GEL CONTRACE.....	89
<i>ursodiol tab 250 mg</i>	86	VCF VAGINAL MIS CONTRACP	89
<i>ursodiol tab 500 mg</i>	86	VCKS DAYQUIL LIQ MUCUS DM	65
V		<i>velivet pak</i>	35
<i>vagistat-3 kit combo pk</i>	89	VEMLIDY TAB 25MG	22
<i>valacyclovir hcl tab 1 gm</i>	22	VENCLEXTA TAB 100MG.....	26
<i>valacyclovir hcl tab 500 mg</i>	22	VENCLEXTA TAB 10MG	26
<i>valganciclovir hcl for soln 50 mg/ml (base</i>		VENCLEXTA TAB 50MG	26
<i>equiv)</i>	22	VENCLEXTA TAB START PK	26
<i>valganciclovir hcl tab 450 mg (base</i>		<i>verapamil hcl cap er 24hr 100 mg</i>	46
<i>equivalent)</i>	22	<i>verapamil hcl cap er 24hr 200 mg</i>	46
<i>valsartan-hydrochlorothiazide tab 160-12.5</i>		<i>verapamil hcl cap er 24hr 300 mg</i>	46
<i>mg</i>	49	<i>verapamil hcl tab er 120 mg</i>	46
<i>valsartan-hydrochlorothiazide tab 160-25</i>		<i>verapamil hcl tab er 180 mg</i>	46
<i>mg</i>	49	<i>verapamil hcl tab er 240 mg</i>	46
<i>valsartan-hydrochlorothiazide tab 320-12.5</i>		VERIFINE LAN MIS MINI 21G.....	195
<i>mg</i>	49	VERIFINE LAN MIS MINI 23G.....	195
<i>valsartan-hydrochlorothiazide tab 320-25</i>		VERIFINE LAN MIS MINI 28G.....	195
<i>mg</i>	49	VERIFINE LAN MIS MINI 30G.....	195

VERIFINE MIS UNIV 28G.....	195	<i>vision plus cap</i>	118
VERIFINE MIS UNIV 30G.....	195	<i>vision tab vitamins</i>	125
VERIFINE MIS UNIV 33G.....	195	VISTA ADVAN CAP AREDS2.....	118
VERIFINE PEN MIS 31GX5MM	167	VISTA ADVAN CAP DRY EYE.....	118
VERIFINE PEN MIS 31GX8MM	169	VISTOGARD PAK 10GM.....	163
VERIFINE PEN MIS 32GX4MM	171	<i>vit a/c/d/fl dro 0.25mg</i>	132
VERIFINE PEN MIS 32GX6MM.....	172	<i>vitabasic tab complete</i>	125
<i>very finest liq fish oil</i>	141	<i>vitabasic tab senior</i>	125
VERZENIO TAB 100MG.....	27	VITABEX CAP.....	118
VERZENIO TAB 150MG.....	27	VITABEX PLUS CAP	118
VERZENIO TAB 200MG.....	27	<i>vita c/biofl tab rose hip</i>	113
VERZENIO TAB 50MG	27	VITACHEW CHW.....	131
<i>vestura tab 3-0.02mg</i>	33	VITACHEW CHW ADULT.....	127
V-GO 20 KIT	180	<i>vitachew d3 chw 25mcg</i>	109
V-GO 30 KIT	180	VITACRAVES CHW +OMEGA-3	130
V-GO 40 KIT	180	VITACRAVES CHW GUMMIES.....	127
VICKS MINI MIS COOLMIST	178	VITACRAVES CHW IMMUNITY	127
VICKS PURE MIS MIST.....	178	VITACRAVES CHW MENS.....	127
VICKS WARM MIS MIST	178	VITACRAVES CHW SOUR GUM.....	127
<i>vienva tab 0.1-20</i>	33	VITACRAVES CHW WOMENS	127
VIJOICE TAB 125MG	206	<i>vita hair tab</i>	125
VIJOICE TAB 250MG	206	<i>vitajoy daly chw d 1000iu</i>	109
VIJOICE TAB 50MG.....	206	<i>vitajoy gumm chw 2.5mg</i>	164
VIOKACE TAB 10440	86	VITAJOY MULT CHW ADULT	127
VIOKACE TAB 20880	86	<i>vitalee tab</i>	115
<i>viorele tab</i>	35	VITALETS CHW CHILD.....	131
VIOS LC MIS SPRINT.....	177	<i>vitamin a&d oin</i>	161
VIOS LC PLUS MIS.....	177	<i>vita-min cap</i>	118
VIOS LC PLUS MIS DELUXE	177	VITAMIN C CAP FLAVONOI.....	113
VIOS LC PLUS MIS PEDIATRC	177	VITAMIN C CHW 500MG.....	114
VIOS MIS SYSTEM.....	178	VITAMIN C PAK BLEND.....	129
VIOS PRO LC+ MIS SYSTEM.....	178	VITAMIN D2 CAP 2000UNIT.....	107
VIOS PRO LC MIS SPRINT.....	178	VITAMIN D2 TAB 2000UNIT	107
VIREAD POW 40MG/GM.....	21	VITAMIN D2 TAB 400UNIT	107
VIREAD TAB 150MG	21	<i>vitamin d3 cap 10000unt</i>	108
VIREAD TAB 200MG	21	<i>vitamin d3 cap 2000unit</i>	107
VIREAD TAB 250MG.....	21	<i>vitamin d-3 cap 2000unit</i>	108
<i>virt-caps cap</i>	112	<i>vitamin d3 cap 5000unit</i>	108
VISCO-3 INJ 25/2.5ML.....	106	<i>vitamin d3 chw 1000unit</i>	109
VISION CAP OPTIMIZE.....	118	<i>vitamin d3 chw 25mcg</i>	109
<i>vision form/ tab lutein</i>	125	<i>vitamin d3 chw 50mcg</i>	109
<i>vision form cap 2</i>	118	<i>vitamin d3 chw ex str</i>	109
<i>vision formu cap 50+</i>	118	<i>vitamin d3 dro 10mcg/ml</i>	109
VISION HEALT CAP.....	118	<i>vitamin d-3 tab 1000unit</i>	108

<i>vitamin d3 tab 10mcg</i>	108	VORTEX/MASK MIS CHILDS	176
<i>vitamin d3 tab 125mcg</i>	108	VORTEX/MASK MIS TODDLER	176
<i>vitamin d3 tab 5000unit</i>	108	VORTEX VALVE MIS CHAMBER.....	176
<i>vitamin d-3 tab 5000unit</i>	109	<i>vt b complex cap</i>	110
VITAMIN D3 TAB COMPLETE.....	125	VUMERITY CAP 231MG.....	93
<i>vitamin d cap 1000unit</i>	107	<i>vyfemla tab 0.4-35</i>	33
<i>vitamin d chw 1000unit</i>	109	<i>vylibra tab 0.25-35</i>	34
<i>vitamin d chw 400unit</i>	109	W	
<i>vitamin d dro 10mcg</i>	109	WAL-BORN CHW VIT C.....	127
<i>vitamin d tab 2000unit</i>	108	WAL-BORN TAB	134
<i>vitamin d tab 5000iu</i>	109	<i>wal-dryl alr tab 12.5mg</i>	56
<i>vitamins a & d cap</i>	109	<i>wal-dryl cap 25mg</i>	54
<i>vitamins a & d oint</i>	161	<i>wal-dryl liq 12.5/5ml</i>	55
<i>vitamins a & d tab</i>	109	<i>wal-dryl tab 25mg</i>	55
VITAMINS FOR CAP HAIR	133	<i>wal-fex allr tab 180mg</i>	57
<i>vitamins w/ lipotropics tab</i>	135	<i>wal-fex alrg tab 60mg 12h</i>	57
VITASANA TAB	125	<i>wal-fex d tab 12 hour</i>	64
<i>vitatrum chw</i>	127	<i>wal-fex d tab 24 hour</i>	64
VITATRUM TAB.....	125	<i>wal-fex tab 180mg</i>	57
<i>vitatrum tab complete</i>	125	<i>wal-finate tab 4mg</i>	54
<i>vit d3 gumm chw 1000unit</i>	109	<i>wal-itin chl sol 5mg/5ml</i>	58
<i>vit d3 hp cap 2000unit</i>	107	<i>wal-itin chw 5mg</i>	58
VITEYES CAP CLASSIC	118	<i>wal-itin d tab 10-240mg</i>	64
<i>viteyes cap complete</i>	118	<i>wal-itin d tab 24 hour</i>	64
VITEYES CLAS CAP ADV	118	<i>wal-itin d tab 5-120mg</i>	63
VITEYES CLAS CAP ADVANCED	118	<i>wal-itin sol 5mg/5ml</i>	58
VITEYES CLAS CAP MAC SUPP	118	<i>wal-itin tab 10mg</i>	58
VITEYES CLAS CAP OMEGA-3.....	118	<i>wal-mucil cap 0.52gm</i>	72
<i>viteyes clas cap zinc fre</i>	114	<i>wal-mucil pow 100%</i>	74
VITEYES CLAS POW +MULTI.....	128	<i>wal-mucil pow 28.3%</i>	73
VITEYES CLAS TAB MULTIVIT	125	<i>wal-mucil pow 43%</i>	73
VITEYES OPTI TAB NERV SUP	125	<i>wal-mucil pow 51.7%</i>	73
<i>vit for hair tab</i>	134	<i>wal-mucil pow 58.6%</i>	73
VITRUM 50+ TAB ADT- MUL	125	<i>wal-phed d tab 120mg</i>	59
VITRUM TAB ADULT	125	<i>wal-phed d tab 30mg</i>	59
<i>vitrum tab senior</i>	125	<i>wal-phed tab 120mg er</i>	59
VITRUM TAB SENIOR.....	125	<i>wal-profen cap 200mg</i>	100
VIVAGUARD MIS 28G	195	<i>wal-profen tab 200mg</i>	100
VIVAGUARD MIS 30G	195	<i>wal-som cap 50mg</i>	90
<i>volnea tab</i>	35	<i>wal-som tab 25mg</i>	90
VOLTAREN GEL 1% ARTHR	157	<i>wal-sporin oin</i>	154
<i>voriconazole for susp 40 mg/ml</i>	20	<i>wal-tap elx cld/alle</i>	63
<i>voriconazole tab 200 mg</i>	20	<i>wal-tussin liq 100/5ml</i>	62
<i>voriconazole tab 50 mg</i>	20	<i>wal-tussin liq 10-100/5</i>	66

<i>wal-tussin liq cf</i>	67	WIDE-SEAL DPR KIT 90.....	203
<i>wal-tussin syp dm</i>	66	WIDE-SEAL DPR KIT 95.....	203
<i>wal-vert tab 10mg</i>	58	WILLIS THE MIS WHALE	178
<i>wal-zyr cap 10mg</i>	56	WINDMILL MIS TRAINER	174
<i>wal-zyr chld sol 1mg/ml</i>	57	WING TIP MIS TUBING	174
<i>wal-zyr chld sol 5mg/5ml</i>	57	<i>wixela inhub aer 100/50</i>	68
<i>wal-zyr chw 10mg</i>	57	WMNS MULTIVI CHW +COLLAGE.....	127
<i>wal-zyr chw 5mg</i>	57	<i>womans laxat tab 5mg ec</i>	70
<i>wal-zyr d tab 5-120mg</i>	63	<i>womens 50+ cap advanced</i>	118
<i>wal-zyr sol 1mg/ml</i>	57	<i>womens 50+ tab advanced</i>	125
<i>wal-zyr sol 5mg/5ml</i>	57	WOMENS 50+ TAB MULTIVIT	125
<i>wal-zyr tab 10mg</i>	57	<i>womens cap multi</i>	118
<i>warfarin sodium tab 10 mg</i>	144	<i>womens daily chw gummies</i>	128
<i>warfarin sodium tab 1 mg</i>	144	WOMENS DAILY PAK PACK.....	129
<i>warfarin sodium tab 2.5 mg</i>	144	<i>womens daily tab fa/ca/fe</i>	125
<i>warfarin sodium tab 2 mg</i>	144	<i>womens daily tab formula</i>	125
<i>warfarin sodium tab 3 mg</i>	144	<i>womens laxat tab 5mg ec</i>	70
<i>warfarin sodium tab 4 mg</i>	144	WOMENS MENOP MIS VITA PAK	134
<i>warfarin sodium tab 5 mg</i>	144	WOMENS MULT CHW GUMMIES	128
<i>warfarin sodium tab 6 mg</i>	144	WOMENS MULTI TAB	125
<i>warfarin sodium tab 7.5 mg</i>	144	<i>womens mult tab</i>	125
<i>water for injection</i>	204	WOMENS PAK	129
WATERPROOF MIS BANDAGES	199	WOMENS VITA MIS PAK.....	134
WATERPROOF PAD 3	200	<i>womns active tab daily</i>	125
WEBCOL PREP PAD LARGE	204	WTERPRF BAND MIS CLEAR.....	199
WEBCOL PREP PAD MEDIUM	204	X	
<i>weekly-d cap 50000unt</i>	108	XALKORI CAP 150MG.....	27
<i>weight loss tab multi</i>	134	XALKORI CAP 200MG.....	27
WEIGHT SMART TAB ADVANCED.....	125	XALKORI CAP 20MG	27
<i>wera tab 0.5/35</i>	33	XALKORI CAP 250MG	27
<i>wescaps cap</i>	112	XALKORI CAP 50MG	27
<i>westab max tab 2.5-25-2</i>	141	XARELTO STAR TAB 15/20MG.....	145
<i>westab one tab 2.5-25-1</i>	144	XARELTO TAB 10MG.....	145
WHISPER AIRE MIS AER DELI.....	178	XARELTO TAB 15MG.....	145
WHISPER AIRE MIS PED AERO	178	XARELTO TAB 2.5MG	145
WHISPER AIRE MIS PED NEBU.....	178	XARELTO TAB 20MG	145
WICKING FLTR MIS.....	179	XIFAXAN TAB 550MG	23
WICKING FLTR MIS #502	179	XIIDRA DRO 5%.....	149
WIDE-SEAL DPR KIT 60.....	203	XOLAIR INJ 150MG/ML	69
WIDE-SEAL DPR KIT 65.....	203	XOLAIR INJ 300/2ML.....	69
WIDE-SEAL DPR KIT 70.....	203	XOLAIR INJ 75/0.5	69
WIDE-SEAL DPR KIT 75	203	XOLAIR SOL 150MG	69
WIDE-SEAL DPR KIT 80.....	203	XOSPATA TAB 40MG	27
WIDE-SEAL DPR KIT 85	203	<i>xpect tab 400mg</i>	61

<i>xulane dis 150-35</i>	32	ZENPEP CAP 25000UNT	86
XULTOPHY INJ 100/3.6	38	ZENPEP CAP 3000UNIT	86
XYREM SOL 500MG/ML.....	93	ZENPEP CAP 40000UNT	86
Y		ZENPEP CAP 5000UNIT	86
YELETS TEEN TAB FORMULA	125	ZENPEP CAP 60000UNT	86
<i>yl balanced tab b-100</i>	111	ZE-PLUS CAP	114
<i>yl folic aci tab 400mcg</i>	141	ZERBAXA INJ 1.5GM	18
<i>yl vitamin cap a & d</i>	109	ZEVRX MIS 31GX5MM.....	167
<i>yogurt+fiber chw gummies</i>	72	ZEVRX MIS 31GX8MM	169
YOUR LIFE CHW GUMMIES	128	ZEVRX MIS 32GX4MM.....	171
YUMVS DIABET CHW MULTIVIT	128	ZEVRX STERIL PAD ALCHOL.....	204
<i>yumvs melato chw 2.5mg</i>	164	ZEVRX TWIST MIS LANC 30G	195
YUMVS MULTI CHW ZERO	128	<i>zidovudine cap 100 mg</i>	21
<i>yumvs prebio chw fiber</i>	72	<i>zidovudine syrup 10 mg/ml</i>	21
<i>yumvs prebio chw fiber ze</i>	72	<i>zidovudine tab 300 mg</i>	21
<i>yumvs vit d3 chw 25mcg</i>	109	ZIEXTENZO INJ 6/0.6ML	143
<i>yuvaferm tab 10mcg</i>	89	ZINC LOZ	129
Z		<i>zinc-vites tab</i>	111
ZADITOR DRO 0.035%OP.....	149	ZIRABEV INJ 100/4ML	25
<i>zafemy dis 150/35</i>	32	ZIRABEV INJ 400/16ML	25
<i>zantac 360 tab 10mg</i>	83	ZOLADEX IMP 3.6MG.....	26
<i>zantac 360 tab 20mg</i>	83	ZOLINZA CAP 100MG.....	27
ZARXIO INJ 300/0.5	143	<i>zolmitriptan orally disintegrating tab 2.5 mg</i>	104
ZARXIO INJ 480/0.8	143	<i>zolmitriptan orally disintegrating tab 5 mg</i>	104
<i>zeasorb-af pow 2%</i>	156	<i>zolmitriptan tab 2.5 mg</i>	104
ZEJULA TAB 100MG	28	<i>zolmitriptan tab 5 mg</i>	104
ZEJULA TAB 200MG	28	<i>zoo friends chw extra c</i>	130
ZEJULA TAB 300MG	28	ZOO FRIENDS CHW GUMMIES	131
ZELBORAF TAB 240MG	27	<i>zovia 1/35 tab</i>	33
ZELDANA CAP	114	ZTALMY SUS 50MG/ML	105
<i>zenatane cap 10mg</i>	153	<i>zumandimine tab 3-0.03mg</i>	33
<i>zenatane cap 20mg</i>	153	ZYDELIG TAB 100MG	28
<i>zenatane cap 30mg</i>	153	ZYDELIG TAB 150MG.....	28
<i>zenatane cap 40mg</i>	153	ZYVOX SOL 2MG/ML	24
ZENPEP CAP 15000UNT	86		
ZENPEP CAP 20000UNT	86		