



Community Health Plan

Maryland



2021 Comprehensive Formulary (List of Covered Drugs)

**CareFirst BlueCross BlueShield Community Health Plan Maryland
A HEALTHCHOICE MANAGED CARE ORGANIZATION**

PLEASE READ: THIS DOCUMENT CONTAINS INFORMATION ABOUT THE DRUGS WE COVER IN THIS PLAN. Formulary File Submission ID: 20211001

This formulary was updated on 10/01/2021. For more recent information or other questions, please contact us at 1-800-730-8530, for TTY users, 711, 24 hours a day, 7 days a week, or visit www.CareFirstchpmd.com.



Formulary (Preferred Drug List)

(10/01/2021)

INTRODUCTION

We are pleased to provide the 2021 CareFirst Community Health Plan Maryland (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.

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 Specialty Pharmacy and select University of Maryland Medical System Pharmacies. Providers: please contact either CVS Specialty, 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 are 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 www.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.

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 0-9 years old: 1-855-283-0876).

HIV TREATMENT

Effective 01/01/2020, HIV drugs will no longer be processed by the Maryland Medicaid Fee For Service program. HIV drugs are now covered under the pharmacy benefit at CareFirst CHPMD. CareFirst CHPMD requires a copay of \$0 for generic drugs and \$3 for brand drugs. If a member is unable to pay a brand drug copay, the dispensing pharmacy must contact the CVS Help Desk at 1-800-345-5413 for assistance.

Formulary restrictions were implemented on 07/01/2020. Members 21 years of age or younger will not be subject to formulary restrictions in the antiretroviral class.

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 www.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 seven days)].

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, previously owned by Johnson and Johnson (J&J), 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.

Effective 11/01/2020, formulary alcohol swabs will be 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 200 alcohol swabs every 25 days remains.

Effective 07/01/2021, formulary lancets will be 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.

NOTICE

The information contained in this formulary is proprietary. The information may not be copied in whole or in part without written permission. ©2020. 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.

Effective: 10/01/2021

Drug Name

Drug Tier Requirements/Limits

ALTERNATIVE MEDICINES

ALTERNATIVE MEDICINE - M'S

cvs quality cap sleep	1	OTC
hm melatonin sub 10mg	1	OTC
kp melatonin tab 3mg	1	OTC
MELADOX TAB 3MG CR	1	OTC
melatonin cap 10mg	1	OTC
melatonin chw 2.5mg	1	OTC
melatonin chw 10mg	1	OTC
melatonin chw quik dis	1	OTC
MELATONIN LIQ 1MG/4ML	1	OTC
MELATONIN LIQ 2.5MG	1	OTC
melatonin liq 5mg/15ml	1	OTC
melatonin liquid 1 mg/ml	1	OTC
MELATONIN LOZ 5MG	1	OTC
melatonin sl tab 10 mg	1	OTC
melatonin sub 5mg	1	OTC
melatonin sub quik dis	1	OTC
melatonin tab 1 mg	1	OTC
melatonin tab 3mg	1	OTC
MELATONIN TAB 3MG CR	1	OTC
melatonin tab 5 mg	1	OTC
melatonin tab 10 mg	1	OTC
melatonin tab 10mg	1	OTC
melatonin tab 10mg cr	1	OTC
MELATONIN TAB 200MCG	1	OTC
melatonin tab 300 mcg	1	OTC
MELATONIN TAB 500MCG	1	OTC
melatonin tab ex str	1	OTC
melatonin tab max st	1	OTC
melatonin tab max str	1	OTC
melatonin tablet disintegrating 3 mg	1	OTC
melatonin tablet disintegrating 5 mg	1	OTC
melatonin tablet disintegrating 10 mg	1	OTC
mm melatonin tab 10mg tr	1	OTC
qc melatonin tab 5mg	1	OTC
RA MELATONIN SUB 1MG	1	OTC
ra melatonin tab 3mg	1	OTC
ra melatonin tab 5mg	1	OTC
ra melatonin tab 10mg	1	OTC
sleep child/ liq melatoni	1	OTC
SLEEP SOUNDL LIQ 3.5/2ML	1	OTC
sm melatonin tab 3mg	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>sm melatonin tab 5mg</i>	1	OTC
<i>sv melatonin tab 3mg</i>	1	OTC
<i>sv melatonin tab 5mg</i>	1	OTC
<i>vitajoy gumm chw 2.5mg</i>	1	OTC

AMINOGLYCOSIDES

AMINOGLYCOSIDES

<i>neomycin sulfate tab 500 mg</i>	1	
<i>tobramycin nebu soln 300 mg/4ml</i>	1	PA, QL (8 mL / 1 day)
<i>tobramycin nebu soln 300 mg/5ml</i>	1	PA, QL (56 ampules / 28 days)

ANALGESICS - ANTI-INFLAMMATORY

ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES

HUMIRA KIT 40MG/0.8	1	PA, QL (4 injections / 28 days)
HUMIRA PEN INJ 40MG/0.8	1	PA, QL (4 pens / 28 days)
HUMIRA PEN INJ 80/0.8ML	1	PA, QL (8 pens / 28 days)
HUMIRA PEN INJ CD/UC/HS	1	PA, QL (6 pens / 28 days)
HUMIRA PEN INJ PS/UV	1	PA, QL (4 pens / 28 days)
HUMIRA PEN KIT CD/UC/HS	1	PA, QL (3 pens / 28 days)
HUMIRA PEN KIT PED UC	1	PA, QL (4 pens / 28 days)
HUMIRA PEN KIT PS/UV	1	PA, QL (3 pens / 28 days)

ANTIRHEUMATIC - ENZYME INHIBITORS

XELJANZ SOL 1MG/ML	1	PA, QL (10 mL / 1 day)
XELJANZ TAB 5MG	1	PA, QL (2 tabs / 1 day)
XELJANZ TAB 10MG	1	PA, QL (2 tabs / 1 day)
XELJANZ XR TAB 11MG	1	PA, QL (1 tab / 1 day)

ANTIRHEUMATIC ANTIMETABOLITES

RASUVO INJ 7.5MG	1	PA, QL (4 injections / 28 days)
RASUVO INJ 10MG	1	PA, QL (4 injections / 28 days)
RASUVO INJ 12.5MG	1	PA, QL (4 injections / 28 days)
RASUVO INJ 15MG	1	PA, QL (4 injections / 28 days)
RASUVO INJ 17.5MG	1	PA, QL (4 injections / 28 days)
RASUVO INJ 20MG	1	PA, QL (4 injections / 28 days)

Drug Name	Drug Tier	Requirements/Limits
RASUVO INJ 22.5MG	1	PA, QL (4 injections / 28 days)
RASUVO INJ 25MG	1	PA, QL (4 injections / 28 days)
RASUVO INJ 30MG	1	PA, QL (4 injections / 28 days)

INTERLEUKIN-6 RECEPTOR INHIBITORS

KEVZARA INJ 150/1.14	1	PA, QL (2 syringes / 28 days)
KEVZARA INJ 200/1.14	1	PA, QL (2 syringes / 28 days)

NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)

<i>addaprin tab 200mg</i>	1	OTC
<i>advil jr st tab 100mg</i>	1	OTC
<i>advil jr str chw 100mg</i>	1	OTC
<i>advil minis cap 200mg</i>	1	OTC
<i>all day pain tab 220mg</i>	1	OTC
<i>all day relf tab 220mg</i>	1	OTC
<i>cataflam tab 50mg</i>	1	
<i>celecoxib cap 50 mg</i>	1	PA
<i>celecoxib cap 100 mg</i>	1	PA
<i>celecoxib cap 200 mg</i>	1	PA
<i>celecoxib cap 400 mg</i>	1	PA
<i>cvs ibuprof dro 50/1.25</i>	1	OTC
<i>cvs ibuprofe sus 100/5ml</i>	1	OTC
<i>cvs naproxen tab 220mg</i>	1	OTC
<i>diclofenac potassium tab 50 mg</i>	1	
<i>diclofenac sodium tab delayed release 25 mg</i>	1	
<i>diclofenac sodium tab delayed release 50 mg</i>	1	
<i>diclofenac sodium tab delayed release 75 mg</i>	1	
<i>diclofenac sodium tab er 24hr 100 mg</i>	1	
<i>ec-naproxen tab 375mg</i>	1	
<i>ec-naproxen tab 500mg</i>	1	
<i>eq ibuprofen sus 100/5ml</i>	1	OTC
<i>eq ibuprofen tab 200mg</i>	1	OTC
<i>eql ibuprofn tab 200mg</i>	1	OTC
<i>eql naproxen cap 220mg</i>	1	OTC
<i>etodolac cap 200 mg</i>	1	
<i>etodolac cap 300 mg</i>	1	
<i>etodolac tab 400 mg</i>	1	
<i>etodolac tab 500 mg</i>	1	
<i>etodolac tab er 24hr 400 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
etodolac tab er 24hr 500 mg	1	
etodolac tab er 24hr 600 mg	1	
flurbiprofen tab 50 mg	1	
flurbiprofen tab 100 mg	1	
gnp naproxen cap 220mg	1	OTC
hm ibuprofen chw 100mg	1	OTC
hm ibuprofen tab 200mg	1	OTC
hyvee ibupro sus 100mg/5m	1	OTC
ibu tab 400mg	1	
ibu tab 600mg	1	
ibu tab 800mg	1	
ibu-200 tab 200mg	1	OTC
ibuprfn liqd cap 200mg	1	OTC
ibuprofen cap 200mg	1	OTC
ibuprofen ch sus 100/5ml	1	OTC
ibuprofen chw 100mg	1	OTC
ibuprofen dro 50/1.25	1	OTC
ibuprofen ib chw 100mg	1	OTC
ibuprofen jr chw 100mg	1	OTC
ibuprofen sus 100/5ml	1	OTC
ibuprofen sus 200/10ml	1	OTC
ibuprofen susp 100 mg/5ml	1	
ibuprofen tab 200 mg	1	OTC
ibuprofen tab 400 mg	1	
ibuprofen tab 600 mg	1	
ibuprofen tab 800 mg	1	
ibuprofn 100 chw jr 100mg	1	OTC
ketorolac tromethamine tab 10 mg	1	QL (20 tabs / 25 days)
cls ibuprofn tab 200mg	1	OTC
cls ibuprofn tab ib 200mg	1	OTC
medi-profen cap 200mg	1	OTC
medi-profen sus 40mg/ml	1	OTC
medi-profen sus 100/5ml	1	OTC
medi-profen tab 200mg	1	OTC
mediproxen tab 220mg	1	OTC
meloxicam tab 7.5 mg	1	
meloxicam tab 15 mg	1	
motrin ib cap 200mg	1	OTC
motrin ib tab 200mg	1	OTC
nabumetone tab 500 mg	1	
nabumetone tab 750 mg	1	
naproxen sod cap 220mg	1	OTC
naproxen sod tab 220mg	1	OTC
naproxen sodium tab 220 mg	1	OTC
naproxen tab 250 mg	1	

Drug Name	Drug Tier	Requirements/Limits
<i>naproxen tab 375 mg</i>	1	
<i>naproxen tab 500 mg</i>	1	
<i>naproxen tab ec 375 mg</i>	1	
<i>naproxen tab ec 500 mg</i>	1	
<i>oxaprozin tab 600 mg</i>	1	
<i>pain relief tab 200mg</i>	1	OTC
<i>pain relief tab 220mg</i>	1	OTC
<i>pamprin tab 220mg</i>	1	OTC
<i>px ibuprofen tab 200mg</i>	1	OTC
<i>px profen ib dro 50/1.25</i>	1	OTC
<i>px profen ib sus 100/5ml</i>	1	OTC
<i>qc ibuprofen cap 200mg</i>	1	OTC
<i>qc ibuprofen tab 200mg</i>	1	OTC
<i>ra ibuprofen cap 200mg</i>	1	OTC
<i>ra ibuprofen tab 200mg</i>	1	OTC
<i>sb ibuprofen tab 200mg</i>	1	OTC
<i>sm ibuprofen cap 200mg</i>	1	OTC
<i>sm ibuprofen chw 100mg</i>	1	OTC
<i>sm ibuprofen tab 100mg jr</i>	1	OTC
<i>sm ibuprofen tab 200mg</i>	1	OTC
<i>sulindac tab 150 mg</i>	1	
<i>sulindac tab 200 mg</i>	1	
<i>wal-profen cap 200mg</i>	1	OTC
<i>wal-profen tab 200mg</i>	1	OTC

PYRIMIDINE SYNTHESIS INHIBITORS

<i>leflunomide tab 10 mg</i>	1	
<i>leflunomide tab 20 mg</i>	1	

SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS

<i>ENBREL INJ 25/0.5ML</i>	1	PA, QL (4 pens / 28 days)
<i>ENBREL INJ 25MG</i>	1	PA, QL (4 pens / 28 days)
<i>ENBREL INJ 50MG/ML</i>	1	PA, QL (4 pens / 28 days)
<i>ENBREL MINI INJ 50MG/ML</i>	1	PA, QL (4 pens / 28 days)
<i>ENBREL SRCLK INJ 50MG/ML</i>	1	PA, QL (4 pens / 28 days)

ANALGESICS - NONNARCOTIC

ANALGESICS OTHER

<i>acetamin er tab 650mg</i>	1	OTC
<i>acetamin liq 500/15ml</i>	1	OTC
<i>acetaminophe liq 160/5ml</i>	1	OTC
<i>acetaminophe tab 160mg</i>	1	OTC
<i>acetaminophen chew tab 160 mg</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
acetaminophen liquid 160 mg/5ml	1	OTC
acetaminophen soln 160 mg/5ml	1	OTC
acetaminophen suppos 120 mg	1	OTC
acetaminophen suppos 650 mg	1	OTC
acetaminophen susp 160 mg/5ml	1	OTC
acetaminophen tab 325 mg	1	OTC
acetaminophen tab 500 mg	1	OTC
acetaminophen tab er 650 mg	1	OTC
acetaminophn tab 325mg	1	OTC
acetaminophn tab 500mg	1	OTC
apap rapid tab tab 80mg	1	OTC
apra elx 160/5ml	1	OTC
arthrts pain tab 650mg	1	OTC
arthrts pain tab 650mg er	1	OTC
asa free chw 160mg jr	1	OTC
aspirin free tab 325mg	1	OTC
aurophen sus 160/5ml	1	OTC
betatemp sus 160/5ml	1	OTC
childrens chw apap	1	OTC
chld asafree elx 80/2.5ml	1	OTC
chld meditab chw 80mg	1	OTC
chld non-asa chw 80mg grp	1	OTC
chld non-asa tab 80mg qm	1	OTC
chld silapap liq 160/5ml	1	OTC
cvs acetamin tab 325mg	1	OTC
cvs childs chw 80mg	1	OTC
ed-apap liq 80mg/2.5	1	OTC
eq acetamin tab 500mg	1	OTC
eql acetamin tab 325mg	1	OTC
eql acetamin tab 500mg	1	OTC
fever/pain sus 160/5ml	1	OTC
FEVERALL INF SUP 80MG	1	OTC
feverall sup 120mg	1	OTC
FEVERALL SUP 325MG	1	OTC
feverall sup 650mg	1	OTC
fevr reducng sup 120mg	1	OTC
gnp acetamin tab 325mg	1	OTC
hm pain rlf tab 650mg	1	OTC
8 hour pain tab 650mg	1	OTC
8hr arthrits tab 650mg er	1	OTC
8 hr arthrits tab 650mg	1	OTC
8hr pain er tab 650mg	1	OTC
8hr pain rel tab 650mg	1	OTC
8 hr pain tab 650mg	1	OTC
8 hr pain tab 650mg er	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>little remed liq 160/5ml</i>	1	OTC
<i>m-pap liq 160/5ml</i>	1	OTC
<i>mapap apap liq 500/15ml</i>	1	OTC
<i>mapap cap 500mg</i>	1	OTC
<i>mapap child chw 80mg</i>	1	OTC
<i>mapap chw 160mg</i>	1	OTC
<i>medi-tabs elx 80/2.5ml</i>	1	OTC
<i>medi-tabs jr chw 160mg</i>	1	OTC
<i>medi-tabs tab 500mg</i>	1	OTC
<i>midol tab 650mg</i>	1	OTC
<i>non-asa jr tab 160mg qm</i>	1	OTC
<i>non-aspirin chw 80mg</i>	1	OTC
<i>non-aspirin chw 160mg</i>	1	OTC
<i>non-aspirin chw 160mg jr</i>	1	OTC
<i>non-aspirin sus 160/5ml</i>	1	OTC
<i>non-aspirin tab 325mg</i>	1	OTC
<i>non-aspirin tab 500mg</i>	1	OTC
<i>non-aspirin tab 500mg/rr</i>	1	OTC
<i>non-aspirin tab 650mg</i>	1	OTC
<i>pain & fever chw 160mg</i>	1	OTC
<i>pain & fever sus 160/5ml</i>	1	OTC
<i>pain relief cap 500mg</i>	1	OTC
<i>pain relief chw 160mg</i>	1	OTC
<i>pain relief elx 160/5ml</i>	1	OTC
<i>pain relief liq 160/5ml</i>	1	OTC
<i>pain relief liq 500/15ml</i>	1	OTC
<i>pain relief sus 160/5ml</i>	1	OTC
<i>pain relief tab 325mg</i>	1	OTC
<i>pain relief tab 500mg</i>	1	OTC
<i>pain relief tab 500mg/rr</i>	1	OTC
<i>pain relief tab 650mg</i>	1	OTC
<i>pain relieve sus 160/5ml</i>	1	OTC
<i>pain relieve tab 325mg</i>	1	OTC
<i>pain relieve tab 500mg</i>	1	OTC
<i>pain relieve tab 500mg/rr</i>	1	OTC
<i>pain reliev r chw 80mg</i>	1	OTC
<i>pain reliev r liq 500/15ml</i>	1	OTC
<i>pain reliev r tab 325mg</i>	1	OTC
<i>pain reliev r tab 500mg</i>	1	OTC
<i>pain/fever sup 120mg</i>	1	OTC
<i>pain/fever sus 160/5ml</i>	1	OTC
<i>panadol sus 160/5ml</i>	1	OTC
<i>panadol tab 500mg</i>	1	OTC
<i>pediacare sus 160/5ml</i>	1	OTC
<i>pharbetol tab 325mg</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
pharbetol tab 500mg	1	OTC
qc apap 8 hr tab 650mg	1	OTC
ra acetamin tab 325mg	1	OTC
ra childrens sus 160/5ml	1	OTC
sb non-asa chw 80mg frt	1	OTC
sb non-asa chw 80mg grp	1	OTC
sb non-asa chw 160mg	1	OTC
shake ache tab 500mg	1	OTC
sm pain rel tab 500mg	1	OTC
sm pain rlvr tab 650mg	1	OTC
sm rpd melt tab 160mg	1	OTC

SALICYLATES

aspirin adult tab 81mg ec	1	OTC
aspirin chew tab 81 mg	1	OTC
aspirin chld chw 81mg	1	OTC
aspirin low chw 81mg	1	OTC
aspirin low tab 81mg	1	OTC
aspirin low tab 81mg ec	1	OTC
ASPIRIN SUP 300MG	1	OTC
aspirin tab 81mg ec	1	OTC
aspirin tab 325mg	1	OTC
aspirin tab delayed release 81 mg	1	OTC
aspirin tab delayed release 325 mg	1	OTC
aspirin-81 chw 81mg	1	OTC
bayer adv tab 325mg	1	OTC
bayer adv tab 500mg	1	OTC
bayer asa tab 325mg	1	OTC
bayer asa tab 500mg	1	OTC
bayer aspiri tab 325mg ec	1	OTC
bayer low chw 81mg	1	OTC
bayer low tab 81mg ec	1	OTC
child asa chw 81mg	1	OTC
cvs aspirin tab 81mg ec	1	OTC
cvs aspirin tab 325mg	1	OTC
cvs aspirin tab 325mg ec	1	OTC
diflunisal tab 500 mg	1	
ecotrin low tab 81mg ec	1	OTC
enteric asa tab 325mg ec	1	OTC
eq aspirin tab 325mg	1	OTC
eql aspirin chw 81mg	1	OTC
eql aspirin tab 325mg ec	1	OTC
gnp aspirin chw 81mg	1	OTC
gnp aspirin tab 81mg ec	1	OTC
gnp aspirin tab 325mg	1	OTC
gnp aspirin tab 325mg ec	1	OTC

Drug Name	Drug Tier	Requirements/Limits
goodsense tab 81mg ec	1	OTC
hm aspirin chw 81mg	1	OTC
hm aspirin tab 325mg	1	OTC
hm aspirin tab 325mg ec	1	OTC
kls aspirin tab 81mg ec	1	OTC
kp aspirin tab 81mg ec	1	OTC
low dose asa tab 81mg	1	OTC
px aspirin chw 81mg	1	OTC
px aspirin tab 81mg ec	1	OTC
px aspirin tab 325mg	1	OTC
px aspirin tab 325mg ec	1	OTC
qc aspirin tab 325mg	1	OTC
qc aspirin tab 325mg ec	1	OTC
qc child asa chw 81mg	1	OTC
ra aspirin chw 81mg	1	OTC
ra aspirin tab 81mg ec	1	OTC
ra aspirin tab 325mg	1	OTC
ra aspirin tab 325mg ec	1	OTC
sb aspirin tab 325mg	1	OTC
sb aspirin tab 325mg ec	1	OTC
sb child asa chw 81mg	1	OTC
sm aspirin chw 81mg	1	OTC
sm aspirin tab 81mg ec	1	OTC
sm aspirin tab 325mg	1	OTC
sm aspirin tab 325mg ec	1	OTC
sm child asa chw 81mg	1	OTC
st joseph chw low 81mg	1	OTC

ANALGESICS - OPIOID

OPIOID AGONISTS

fentanyl td patch 72hr 12 mcg/hr	1	PA, QL (10 patches / 25 days)
fentanyl td patch 72hr 25 mcg/hr	1	PA, QL (10 patches / 25 days)
fentanyl td patch 72hr 50 mcg/hr	1	PA, QL (10 patches / 25 days)
fentanyl td patch 72hr 75 mcg/hr	1	PA, QL (10 patches / 25 days)
fentanyl td patch 72hr 100 mcg/hr	1	PA, QL (10 patches / 25 days)
hydromorphone hcl tab 2 mg	1	PA, QL (180 tabs / 25 days)
hydromorphone hcl tab 4 mg	1	PA, QL (180 tabs / 25 days)
hydromorphone hcl tab 8 mg	1	PA, QL (180 tabs / 25 days)

Drug Name	Drug Tier	Requirements/Limits
<i>methadone hcl tab 5 mg</i>	1	PA, QL (120 tabs / 25 days)
<i>methadone hcl tab 10 mg</i>	1	PA, QL (120 tabs / 25 days)
<i>morphine sulfate oral soln 10 mg/5ml</i>	1	PA, QL (900 mL / 25 days)
<i>morphine sulfate oral soln 20 mg/5ml</i>	1	PA, QL (900 mL / 25 days)
<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	1	PA, QL (180 mL / 25 days)
<i>morphine sulfate tab 15 mg</i>	1	PA, QL (180 tabs / 25 days)
<i>morphine sulfate tab 30 mg</i>	1	PA, QL (180 tabs / 25 days)
<i>morphine sulfate tab er 15 mg</i>	1	PA, QL (90 tabs / 25 days)
<i>morphine sulfate tab er 30 mg</i>	1	PA, QL (90 tabs / 25 days)
<i>morphine sulfate tab er 60 mg</i>	1	PA, QL (90 tabs / 25 days)
<i>morphine sulfate tab er 100 mg</i>	1	PA, QL (90 tabs / 25 days)
<i>morphine sulfate tab er 200 mg</i>	1	PA, QL (60 tabs / 25 days)
<i>oxycodone hcl cap 5 mg</i>	1	PA, QL (180 caps / 25 days)
<i>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</i>	1	PA, QL (180 mL / 25 days)
<i>oxycodone hcl soln 5 mg/5ml</i>	1	PA, QL (180 mL / 25 days)
<i>oxycodone hcl tab 5 mg</i>	1	PA, QL (180 tabs / 25 days)
<i>oxycodone hcl tab 10 mg</i>	1	PA, QL (180 tabs / 25 days)
<i>oxycodone hcl tab 15 mg</i>	1	PA, QL (180 tabs / 25 days)
<i>oxycodone hcl tab 20 mg</i>	1	PA, QL (180 tabs / 25 days)
<i>oxycodone hcl tab 30 mg</i>	1	PA, QL (180 tabs / 25 days)
<i>tramadol hcl tab 50 mg</i>	1	PA, QL (240 tabs / 25 days)
<i>tramadol hcl tab er 24hr 100 mg</i>	1	PA, QL (30 tabs / 25 days)
<i>tramadol hcl tab er 24hr 200 mg</i>	1	PA, QL (30 tabs / 25 days)
<i>tramadol hcl tab er 24hr 300 mg</i>	1	PA, QL (30 tabs / 25 days)

Drug Name	Drug Tier	Requirements/Limits
OPIOID COMBINATIONS		
<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	1	PA, QL (2700 mL / 25 days)
<i>acetaminophen w/ codeine tab 300-15 mg</i>	1	PA, QL (400 tabs / 25 days)
<i>acetaminophen w/ codeine tab 300-30 mg</i>	1	PA, QL (360 tabs / 25 days)
<i>acetaminophen w/ codeine tab 300-60 mg</i>	1	PA, QL (180 tabs / 25 days)
<i>endocet tab 2.5-325</i>	1	PA, QL (360 tabs / 25 days)
<i>endocet tab 5-325mg</i>	1	PA, QL (360 tabs / 25 days)
<i>endocet tab 7.5-325</i>	1	PA, QL (240 tabs / 25 days)
<i>endocet tab 10-325mg</i>	1	PA, QL (180 tabs / 25 days)
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	1	PA, QL (2700 mL / 25 days)
<i>hydrocodone-acetaminophen tab 5-325 mg</i>	1	PA, QL (240 tabs / 25 days)
<i>hydrocodone-acetaminophen tab 7.5-325 mg</i>	1	PA, QL (180 tabs / 25 days)
<i>hydrocodone-acetaminophen tab 10-325 mg</i>	1	PA, QL (180 tabs / 25 days)
<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	1	PA, QL (360 tabs / 25 days)
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	1	PA, QL (360 tabs / 25 days)
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	1	PA, QL (240 tabs / 25 days)
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	1	PA, QL (180 tabs / 25 days)
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	1	PA, QL (40 tabs / 25 days)

ANDROGENS-ANABOLIC

ANDROGENS

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

Drug Name	Drug Tier	Requirements/Limits
<i>testosterone td gel 25 mg/2.5gm (1%)</i>	1	PA

ANORECTAL AND RELATED PRODUCTS

INTRARECTAL STEROIDS

<i>hydrocortisone enema 100 mg/60ml</i>	1
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RECTAL STEROIDS

<i>hydrocortisone perianal cream 1%</i>	1
<i>hydrocortisone perianal cream 2.5%</i>	1
<i>procto-med cre hc 2.5%</i>	1
<i>procto-pak cre 1%</i>	1
<i>proctosol hc cre 2.5%</i>	1
<i>protozone cre -hc 2.5%</i>	1

ANTACIDS

ANTACID COMBINATIONS

<i>acid gone chw</i>	1	OTC
<i>acid gone sus</i>	1	OTC
<i>advanced sus antacid</i>	1	OTC
<i>almacone dbl sus strength</i>	1	OTC
<i>alum & mag hydroxide-simethicone susp 200-200-20 mg/5ml</i>	1	OTC
<i>alum & mag hydroxide-simethicone susp 400-400-40 mg/5ml</i>	1	OTC
<i>alumina/mag sus simethic</i>	1	OTC
<i>antacid & sus gas relf</i>	1	OTC
<i>antacid adv sus max st</i>	1	OTC
<i>antacid chw</i>	1	OTC
<i>antacid chw 550-110</i>	1	OTC
<i>antacid fast sus relief</i>	1	OTC
<i>antacid i sus</i>	1	OTC
<i>antacid iii sus</i>	1	OTC
<i>antacid liq sus</i>	1	OTC
<i>antacid m sus</i>	1	OTC
<i>antacid max sus anti-gas</i>	1	OTC
<i>antacid max sus cherry</i>	1	OTC
<i>antacid plus sus gas rel</i>	1	OTC
<i>antacid sus</i>	1	OTC
<i>antacid sus advanced</i>	1	OTC
<i>antacid sus anti-gas</i>	1	OTC
<i>antacid sus antigas</i>	1	OTC
<i>antacid sus ex st</i>	1	OTC
<i>antacid sus max st</i>	1	OTC
<i>antacid sus mint</i>	1	OTC
<i>antacid sus reg</i>	1	OTC
<i>antacid sus reg st</i>	1	OTC
<i>antacid/gas sus rel max</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>antacid/sime sus ds</i>	1	OTC
<i>comfort gel sus</i>	1	OTC
<i>comfort gel sus antacid</i>	1	OTC
<i>comfort gel sus anti-gas</i>	1	OTC
<i>cvs antacid sus anti-gas</i>	1	OTC
<i>cvs antacid sus antigas</i>	1	OTC
<i>cvs antacid sus supreme</i>	1	OTC
<i>cvs antacid/ sus anti-gas</i>	1	OTC
<i>DI-GEL SUS</i>	1	OTC
<i>eq antacid sus anti-gas</i>	1	OTC
<i>eq antacid sus max st</i>	1	OTC
<i>eql antacid sus anti-gas</i>	1	OTC
<i>FOAM ANTACID CHW 80-20MG</i>	1	OTC
<i>geri-lanta sus</i>	1	OTC
<i>geri-lanta sus supreme</i>	1	OTC
<i>geri-mox sus</i>	1	OTC
<i>gnp antacid chw 160-105</i>	1	OTC
<i>gnp antacid sus cherry</i>	1	OTC
<i>gnp antacid sus coolmint</i>	1	OTC
<i>gnp antacid sus original</i>	1	OTC
<i>gnp antacid sus reg st</i>	1	OTC
<i>heartbrn ant chw 160-105</i>	1	OTC
<i>heartbrn rel sus cherry</i>	1	OTC
<i>heartbrn rlf chw 160-105</i>	1	OTC
<i>heartburn chw ex st</i>	1	OTC
<i>heartburn sus relief</i>	1	OTC
<i>hm antacid sus</i>	1	OTC
<i>hm antacid sus anti-gas</i>	1	OTC
<i>maalox max sus cherry</i>	1	OTC
<i>maalox max sus lemon</i>	1	OTC
<i>maalox max sus wild bry</i>	1	OTC
<i>maalox multi sus symp max</i>	1	OTC
<i>MAG-AL LIQ</i>	1	OTC
<i>mag-al plus liq</i>	1	OTC
<i>mag-al plus liq xs</i>	1	OTC
<i>meijer sus antacid</i>	1	OTC
<i>mintox plus chw</i>	1	OTC
<i>mintox sus max st</i>	1	OTC
<i>mylanta sus max st</i>	1	OTC
<i>px antacid sus max st</i>	1	OTC
<i>px antacid sus reg st</i>	1	OTC
<i>qc antacid sus</i>	1	OTC
<i>qc antacid sus anti-gas</i>	1	OTC
<i>ra antacid sus anti-gas</i>	1	OTC
<i>ra antacid sus antigas</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>rolaids chw 550-110</i>	1	OTC
<i>sb antacid sus anti-gas</i>	1	OTC
<i>sm antacid sus</i>	1	OTC
<i>sm antacid sus advanced</i>	1	OTC
<i>sm antacid sus anti-gas</i>	1	OTC
<i>sm antacid sus max st</i>	1	OTC
<i>sm antacid/ sus antigas</i>	1	OTC
ANTACIDS - CALCIUM SALTS		
<i>antacid chw 500mg</i>	1	OTC
<i>antacid chw 750mg</i>	1	OTC
<i>antacid chw 1000mg</i>	1	OTC
<i>ANTACID CHW 1177MG</i>	1	OTC
<i>antacid extr chw 750mg</i>	1	OTC
<i>antacid flav chw 750mg</i>	1	OTC
<i>antacid kids chw 750mg</i>	1	OTC
<i>antacid max chw 1000mg</i>	1	OTC
<i>ANTACID SOFT CHW 1177MG</i>	1	OTC
<i>antacid ultr chw 1000mg</i>	1	OTC
<i>cal-gest chw 500mg</i>	1	OTC
<i>calc antacid chw 500mg</i>	1	OTC
<i>calc antacid chw 750mg</i>	1	OTC
<i>CALCIUM CARB TAB 648MG</i>	1	OTC
<i>calcium carbonate (antacid) chew tab 500 mg</i>	1	OTC
<i>calcium carbonate (antacid) susp 1250 mg/5ml</i>	1	OTC
<i>child soothe chw 400mg</i>	1	OTC
<i>childrens chw pepto</i>	1	OTC
<i>childrens chw soothe</i>	1	OTC
<i>cvs antacid chw 1000mg</i>	1	OTC
<i>CVS ANTACID CHW 1177MG</i>	1	OTC
<i>eq antacid chw 750mg</i>	1	OTC
<i>eq antacid chw 1000mg</i>	1	OTC
<i>eql antacid chw 1000mg</i>	1	OTC
<i>eql antacid chw fruit</i>	1	OTC
<i>eql antacid chw pepprmnt</i>	1	OTC
<i>flavor chews chw 750mg</i>	1	OTC
<i>gnp antacid chw 750mg</i>	1	OTC
<i>gnp antacid chw 1000mg</i>	1	OTC
<i>hm antacid chw 500mg</i>	1	OTC
<i>hm antacid chw 750mg</i>	1	OTC
<i>maalox child chw</i>	1	OTC
<i>MAALOX CHW 600MG</i>	1	OTC
<i>px antacid chw 1000mg</i>	1	OTC
<i>qc antacid chw 500mg</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>qc antacid chw 1000mg</i>	1	OTC
<i>ra antacid chw 500mg</i>	1	OTC
<i>ra antacid chw 1000mg</i>	1	OTC
<i>sm antacid chw 500mg</i>	1	OTC
<i>smooth antac chw 750mg</i>	1	OTC
<i>tame flame chw 500mg</i>	1	OTC
<i>titralac chw 420mg</i>	1	OTC
TUMS CHW DEL CHW 1177MG	1	OTC
<i>tums smoothi chw 750mg</i>	1	OTC

ANTHELMINTICS

ANTHELMINTICS

<i>cvs pinworm sus 50mg/ml</i>	1	OTC
EMVERM CHW 100MG	1	QL (12 tabs / year)
<i>ivermectin tab 3 mg</i>	1	
<i>pin-away sus 144mg/ml</i>	1	OTC
<i>pinworm med sus 144mg/ml</i>	1	OTC
<i>reeses med sus pinworm</i>	1	OTC

ANTI-INFECTIVE AGENTS - MISC.

ANTI-INFECTIVE AGENTS - MISC.

<i>metronidazole cap 375 mg</i>	1	
<i>metronidazole tab 250 mg</i>	1	
<i>metronidazole tab 500 mg</i>	1	
<i>trimethoprim tab 100 mg</i>	1	
XIFAXAN TAB 550MG	1	ST

ANTI-INFECTIVE MISC. - COMBINATIONS

<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	1	
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>	1	
<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i>	1	
<i>sulfatrim pd sus 200-40/5</i>	1	

ANTIPROTOZOAL AGENTS

<i>atovaquone susp 750 mg/5ml</i>	1	
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GLYCOPEPTIDES

<i>vancomycin hcl cap 125 mg (base equivalent)</i>	1	ST
<i>vancomycin hcl cap 250 mg (base equivalent)</i>	1	ST

LEPROSTATICs

<i>dapsone tab 25 mg</i>	1	
<i>dapsone tab 100 mg</i>	1	

LINCOSAMIDES

<i>clindamycin hcl cap 150 mg</i>	1	
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Drug Name	Drug Tier	Requirements/Limits
<i>clindamycin hcl cap 300 mg</i>	1	
<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	1	
OXAZOLIDINONES		
<i>linezolid for susp 100 mg/5ml</i>	1	PA
<i>linezolid in sodium chloride iv soln 600 mg/300ml-0.9%</i>	1	PA
<i>linezolid iv soln 600 mg/300ml (2 mg/ml)</i>	1	PA
<i>linezolid tab 600 mg</i>	1	PA
ZYVOX SOL 2MG/ML	1	PA
URINARY ANTI-INFECTIVES		
<i>nitrofurantoin macrocrystalline cap 25 mg</i>	1	
<i>nitrofurantoin macrocrystalline cap 50 mg</i>	1	
<i>nitrofurantoin macrocrystalline cap 100 mg</i>	1	
<i>nitrofurantoin monohydrate macrocrystalline cap 100 mg</i>	1	
ANTIANGINAL AGENTS		
NITRATES		
<i>isosorbide dinitrate tab 5 mg</i>	1	
<i>isosorbide dinitrate tab 10 mg</i>	1	
<i>isosorbide dinitrate tab 20 mg</i>	1	
<i>isosorbide dinitrate tab 30 mg</i>	1	
<i>isosorbide dinitrate tab 40 mg</i>	1	
<i>isosorbide mononitrate tab 10 mg</i>	1	
<i>isosorbide mononitrate tab 20 mg</i>	1	
<i>isosorbide mononitrate tab er 24hr 30 mg</i>	1	
<i>isosorbide mononitrate tab er 24hr 60 mg</i>	1	
<i>isosorbide mononitrate tab er 24hr 120 mg</i>	1	
<i>NITRO-BID OIN 2%</i>	1	
<i>NITRO-DUR DIS 0.3MG/HR</i>	1	
<i>NITRO-DUR DIS 0.8MG/HR</i>	1	
<i>nitro-time cap 2.5mg cr</i>	1	
<i>nitro-time cap 6.5mg cr</i>	1	
<i>nitro-time cap 9mg cr</i>	1	
<i>nitroglycerin sl tab 0.3 mg</i>	1	
<i>nitroglycerin sl tab 0.4 mg</i>	1	
<i>nitroglycerin sl tab 0.6 mg</i>	1	
<i>nitroglycerin td patch 24hr 0.1 mg/hr</i>	1	
<i>nitroglycerin td patch 24hr 0.2 mg/hr</i>	1	
<i>nitroglycerin td patch 24hr 0.4 mg/hr</i>	1	
<i>nitroglycerin td patch 24hr 0.6 mg/hr</i>	1	
ANTIARRHYTHMICS		
ANTIARRHYTHMICS TYPE I-A		
<i>disopyramide phosphate cap 100 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>disopyramide phosphate cap 150 mg</i>	1	
NORPACE CAP 100MG CR	1	
NORPACE CAP 150MG CR	1	
ANTIARRHYTHMICS TYPE I-C		
<i>flecainide acetate tab 50 mg</i>	1	
<i>flecainide acetate tab 100 mg</i>	1	
<i>flecainide acetate tab 150 mg</i>	1	
<i>propafenone hcl cap er 12hr 225 mg</i>	1	
<i>propafenone hcl cap er 12hr 325 mg</i>	1	
<i>propafenone hcl cap er 12hr 425 mg</i>	1	
<i>propafenone hcl tab 150 mg</i>	1	
<i>propafenone hcl tab 225 mg</i>	1	
<i>propafenone hcl tab 300 mg</i>	1	
ANTIARRHYTHMICS TYPE III		
<i>amiodarone hcl tab 200 mg</i>	1	
<i>dofetilide cap 125 mcg (0.125 mg)</i>	1	PA
<i>dofetilide cap 250 mcg (0.25 mg)</i>	1	PA
<i>dofetilide cap 500 mcg (0.5 mg)</i>	1	PA
<i>pacerone tab 200mg</i>	1	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS		
ANTI-INFLAMMATORY AGENTS		
<i>cromolyn sodium soln nebu 20 mg/2ml</i>	1	
ANTIASTHMATIC - MONOCLONAL ANTIBODIES		
<i>FASENRA INJ 30MG/ML</i>	1	PA, QL (1 pen / 56 days)
<i>FASENRA PEN INJ 30MG/ML</i>	1	PA, QL (1 pen / 56 days)
<i>XOLAIR INJ 75/0.5</i>	1	PA, QL (2 syringes / 28 days)
<i>XOLAIR INJ 150MG/ML</i>	1	PA, QL (8 syringes / 28 days)
<i>XOLAIR SOL 150MG</i>	1	PA, QL (8 vials / 28 days)
BRONCHODILATORS - ANTICHOLINERGICS		
<i>INCRUSE ELPT INH 62.5MCG</i>	1	QL (30 blisters / 25 days)
<i>ipratropium bromide inhal soln 0.02%</i>	1	QL (375 vials / 75 days)
LEUKOTRIENE MODULATORS		
<i>montelukast sodium chew tab 4 mg (base equiv)</i>	1	
<i>montelukast sodium chew tab 5 mg (base equiv)</i>	1	
<i>montelukast sodium oral granules packet 4 mg (base equiv)</i>	1	
<i>montelukast sodium tab 10 mg (base equiv)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
STEROID INHALANTS		
ALVESCO AER 80MCG	1	QL (3 inhalers / 25 days)
ALVESCO AER 160MCG	1	QL (2 inhalers / 25 days)
ARNUITY ELPT INH 100MCG	1	QL (1 blister / 1 day)
ARNUITY ELPT INH 200MCG	1	QL (1 blister / 1 day)
<i>budesonide inhalation susp 0.5 mg/2ml</i>	1	QL (120 mL / 25 days)
<i>budesonide inhalation susp 0.25 mg/2ml</i>	1	QL (120 mL / 25 days)
<i>budesonide inhalation susp 1 mg/2ml</i>	1	QL (60 mL / 25 days)
FLOVENT DISK AER 50MCG	1	QL (2 inhalations / 1 day)
FLOVENT DISK AER 100MCG	1	QL (2 inhalations / 1 day)
FLOVENT DISK AER 250MCG	1	QL (2 inhalations / 1 day)
FLOVENT HFA AER 44MCG	1	QL (1 inhaler / 30 days)
FLOVENT HFA AER 110MCG	1	QL (1 inhaler / 30 days)
FLOVENT HFA AER 220MCG	1	QL (1 inhaler / 30 days)
QVAR REDIHA AER 80MCG	1	QL (2 inhalers / 30 days)
QVAR REDIHAL AER 40MCG	1	QL (2 inhalers / 30 days)
SYMPATHOMIMETICS		
ALBUTEROL NEB 0.5%	1	QL (60 mL / 25 days)
<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	1	PA
<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>	1	QL (180 each / 75 days)
<i>albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)</i>	1	QL (1125 each / 75 days)
<i>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)</i>	1	QL (1125 each / 75 days)
<i>albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)</i>	1	QL (1125 each / 75 days)
<i>albuterol sulfate syrup 2 mg/5ml</i>	1	
<i>albuterol sulfate tab 2 mg</i>	1	
<i>albuterol sulfate tab 4 mg</i>	1	
ANORO ELLIPT AER 62.5-25	1	QL (60 blisters / 25 days)
<i>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act</i>	1	ST
<i>budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act</i>	1	ST
COMBIVENT AER 20-100	1	QL (2 inhalers / 25 days)

Drug Name	Drug Tier	Requirements/Limits
<i>fluticasone-salmeterol aer powder ba 100-50 mcg/dose</i>	1	QL (60 inhalations / 25 days)
<i>fluticasone-salmeterol aer powder ba 113-14 mcg/act</i>	1	QL (1 inhaler / 30 days)
<i>fluticasone-salmeterol aer powder ba 232-14 mcg/act</i>	1	QL (1 inhaler / 30 days)
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>	1	QL (1620 mL / 75 days)
<i>STRIVERDI AER 2.5MCG</i>	1	QL (1 inhaler / 25 days)
<i>terbutaline sulfate tab 2.5 mg</i>	1	
<i>terbutaline sulfate tab 5 mg</i>	1	
<i>TRELEGY AER ELLIPTA</i>	1	QL (2 inhalers / 25 days)
<i>wixela inhub aer 100/50</i>	1	QL (60 inhalations / 25 days)

XANTHINES

<i>ELIXOPHYLLIN ELX 80/15ML</i>	1
<i>theophylline soln 80 mg/15ml</i>	1
<i>theophylline tab er 12hr 300 mg</i>	1
<i>theophylline tab er 12hr 450 mg</i>	1
<i>theophylline tab er 24hr 400 mg</i>	1
<i>theophylline tab er 24hr 600 mg</i>	1

ANTICOAGULANTS

COUMARIN ANTICOAGULANTS

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

DIRECT FACTOR XA INHIBITORS

<i>ELIQUIS ST P TAB 5MG</i>	1
<i>ELIQUIS TAB 2.5MG</i>	1

Drug Name	Drug Tier Requirements/Limits
ELIQUIS TAB 5MG	1
XARELTO STAR TAB 15/20MG	1
XARELTO TAB 2.5MG	1
XARELTO TAB 10MG	1
XARELTO TAB 15MG	1
XARELTO TAB 20MG	1

HEPARINS AND HEPARINOID-LIKE AGENTS

<i>enoxaparin sodium inj 30 mg/0.3ml</i>	1
<i>enoxaparin sodium inj 40 mg/0.4ml</i>	1
<i>enoxaparin sodium inj 100 mg/ml</i>	1
<i>enoxaparin sodium inj 120 mg/0.8ml</i>	1
<i>enoxaparin sodium inj 150 mg/ml</i>	1
<i>enoxaparin sodium inj 300 mg/3ml</i>	1
<i>enoxaparin sodium subcutaneous soln 60 mg/0.6ml</i>	1
<i>enoxaparin sodium subcutaneous soln 80 mg/0.8ml</i>	1
<i>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml</i>	1
<i>fondaparinux sodium subcutaneous inj 5 mg/0.4ml</i>	1
<i>fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml</i>	1
<i>fondaparinux sodium subcutaneous inj 10 mg/0.8ml</i>	1

ANTICONVULSANTS

ANTICONVULSANTS - MISC.

<i>primidone tab 50 mg</i>	1
<i>primidone tab 250 mg</i>	1

HYDANTOINS

<i>DILANTIN CAP 30MG</i>	1
<i>phenytoin chew tab 50 mg</i>	1
<i>phenytoin sodium extended cap 100 mg</i>	1
<i>phenytoin sodium extended cap 200 mg</i>	1
<i>phenytoin sodium extended cap 300 mg</i>	1
<i>phenytoin susp 125 mg/5ml</i>	1

SUCCINIMIDES

<i>ethosuximide cap 250 mg</i>	1
<i>ethosuximide soln 250 mg/5ml</i>	1

ANTIDIABETICS

ALPHA-GLUCOSIDASE INHIBITORS

<i>acarbose tab 25 mg</i>	1
<i>acarbose tab 50 mg</i>	1
<i>acarbose tab 100 mg</i>	1

Drug Name	Drug Tier	Requirements/Limits
ANTIDIABETIC COMBINATIONS		
<i>alogliptin-metformin hcl tab 12.5-500 mg</i>	1	
<i>alogliptin-metformin hcl tab 12.5-1000 mg</i>	1	
<i>alogliptin-pioglitazone tab 12.5-15 mg</i>	1	
<i>alogliptin-pioglitazone tab 12.5-30 mg</i>	1	
<i>alogliptin-pioglitazone tab 12.5-45 mg</i>	1	
<i>alogliptin-pioglitazone tab 25-15 mg</i>	1	
<i>alogliptin-pioglitazone tab 25-30 mg</i>	1	
<i>alogliptin-pioglitazone tab 25-45 mg</i>	1	
<i>glipizide-metformin hcl tab 2.5-250 mg</i>	1	
<i>glipizide-metformin hcl tab 2.5-500 mg</i>	1	
<i>glipizide-metformin hcl tab 5-500 mg</i>	1	
<i>pioglitazone hcl-glimepiride tab 30-2 mg</i>	1	
<i>pioglitazone hcl-glimepiride tab 30-4 mg</i>	1	
<i>pioglitazone hcl-metformin hcl tab 15-500 mg</i>	1	
<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i>	1	
SEGLUROMET TAB 2.5-500	1	ST
SEGLUROMET TAB 2.5-1000	1	ST
SEGLUROMET TAB 7.5-500	1	ST
SEGLUROMET TAB 7.5-1000	1	ST
BIGUANIDES		
<i>metformin hcl tab 500 mg</i>	1	
<i>metformin hcl tab 850 mg</i>	1	
<i>metformin hcl tab 1000 mg</i>	1	
<i>metformin hcl tab er 24hr 500 mg</i>	1	
<i>metformin hcl tab er 24hr 750 mg</i>	1	
DIABETIC OTHER		
BAQSIMI ONE POW 3MG/DOSE	1	QL (2 actuations / 30 days)
BAQSIMI TWO POW 3MG/DOSE	1	QL (2 actuations / 30 days)
<i>glucagon (rdna) for inj kit 1 mg</i>	1	QL (2 kits / 30 days)
GVOKE HYPO 1 INJ 1MG/.2ML	1	QL (10 injections / 30 days)
GVOKE HYPO 1 INJ .5/.1ML	1	QL (20 injections / 30 days)
GVOKE HYPO 2 INJ 1MG/.2ML	1	QL (10 injections / 30 days)
GVOKE HYPO 2 INJ .5/.1ML	1	QL (20 injections / 30 days)
GVOKE PFS INJ	1	QL (10 syringes / 30 days)
GVOKE PFS INJ	1	QL (20 syringes / 30 days)

Drug Name	Drug Tier	Requirements/Limits
DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS		
alogliptin benzoate tab 6.25 mg (base equiv)	1	
alogliptin benzoate tab 12.5 mg (base equiv)	1	
alogliptin benzoate tab 25 mg (base equiv)	1	
INCRETIN MIMETIC AGENTS (GLP-1 RECEPTOR AGONISTS)		
OZEMPIC INJ 2/1.5ML	1	ST, QL (2 prefilled pens / 21 days)
OZEMPIC INJ 4MG/3ML	1	ST, QL (1 prefilled pen / 21 days)
RYBELSUS TAB 3MG	1	ST, QL (30 tabs / 25 days)
RYBELSUS TAB 7MG	1	ST, QL (30 tabs / 25 days)
RYBELSUS TAB 14MG	1	ST, QL (30 tabs / 25 days)
TRULICITY INJ 0.75/0.5	1	ST, QL (4 pens / 21 days)
TRULICITY INJ 1.5/0.5	1	ST, QL (4 pens / 21 days)
TRULICITY INJ 3/0.5	1	ST, QL (4 pens / 21 days)
TRULICITY INJ 4.5/0.5	1	ST, QL (4 pens / 21 days)
INSULIN		
ADMELOG INJ 100U/ML	1	
ADMELOG SOLO INJ 100U/ML	1	
BASAGLAR INJ 100UNIT	1	
HUMALOG MIX INJ 50/50	1	
HUMALOG MIX INJ 50/50KWP	1	
HUMALOG MIX SUS 75/25	1	
HUMULIN INJ 70/30	1	OTC
HUMULIN INJ 70/30KWP	1	OTC
HUMULIN N INJ U-100	1	OTC
HUMULIN N INJ U-100KWP	1	OTC
HUMULIN R INJ U-100	1	OTC
HUMULIN R INJ U-500	1	
INS ASP PROT INJ FLEXPEN	1	
INSULIN ASPA INJ 70/30	1	
INSULIN LISP INJ PROTAMIN	1	
NOVOLIN INJ 70/30	1	OTC
NOVOLIN INJ 70/30 FP	1	OTC
NOVOLIN N INJ 100 UNIT	1	OTC
NOVOLIN N INJ U-100	1	OTC
NOVOLIN R INJ 100 UNIT	1	OTC

Drug Name	Drug Tier	Requirements/Limits
NOVOLIN R INJ U-100	1	OTC
SEMGLEE INJ 100U/ML	1	
SEMGLEE SOL 100U/ML	1	
INSULIN SENSITIZING AGENTS		
pioglitazone hcl tab 15 mg (base equiv)	1	
pioglitazone hcl tab 30 mg (base equiv)	1	
pioglitazone hcl tab 45 mg (base equiv)	1	
MEGLITINIDE ANALOGUES		
nateglinide tab 60 mg	1	
nateglinide tab 120 mg	1	
repaglinide tab 0.5 mg	1	
repaglinide tab 1 mg	1	
repaglinide tab 2 mg	1	
SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS		
JARDIANCE TAB 10MG	1	PA
JARDIANCE TAB 25MG	1	PA
STEGLATRO TAB 5MG	1	ST
STEGLATRO TAB 15MG	1	ST
SULFONYLUREAS		
glimepiride tab 1 mg	1	
glimepiride tab 2 mg	1	
glimepiride tab 4 mg	1	
glipizide tab 5 mg	1	
glipizide tab 10 mg	1	
glipizide tab er 24hr 2.5 mg	1	
glipizide tab er 24hr 5 mg	1	
glipizide tab er 24hr 10 mg	1	
glipizide xl tab 2.5mg	1	
glipizide xl tab 5mg	1	
glipizide xl tab 10mg	1	
ANTIDIARRHEAL/PROBIOTIC AGENTS		
ANTIDIARRHEAL/PROBIOTIC AGENTS - MISC.		
abatinex cap 680mg	1	OTC
acidoph/prob tab formula	1	OTC
acidophilus cap 10mg	1	OTC
acidophilus cap 100mg	1	OTC
acidophilus cap ex st	1	OTC
acidophilus cap probioti	1	OTC
acidophilus tab probiotc	1	OTC
acidophilus tab probioti	1	OTC
ACIDOPHILUS WAF	1	OTC
ACIDOPHILUS/ WAF BIFIDUS	1	OTC
anti-diarrhl sus 262/15ml	1	OTC
azo complete cap fem blnc	1	OTC

Drug Name	Drug Tier	Requirements/Limits
AZO DUAL CAP PROTECT	1	OTC
BIO-K PLUS CAP STRONG	1	OTC
BIOGAIA CHW 100M CEL	1	OTC
BIOGAIA CHW GASTRUS	1	OTC
BIOGAIA DRO PROBIOTI	1	OTC
BIOGAIA MIS PROBIOTI	1	OTC
BIOGAIA PROT DRO BABY	1	OTC
BIOMEPRO CAP	1	OTC
BIOMEPRO LIQ	1	OTC
<i>biotinex cap</i>	1	OTC
<i>bismatrol chw 262mg</i>	1	OTC
<i>bismuth subsalicylate chew tab 262 mg</i>	1	OTC
<i>bismuth subsalicylate susp 262 mg/15ml</i>	1	OTC
<i>cultrl total cap balance</i>	1	OTC
CULTUR KIDS CHW PURELY	1	OTC
CULTUR KIDS POW PURELY	1	OTC
CULTURELLE CAP	1	OTC
<i>culturelle cap hlth/wel</i>	1	OTC
CULTURELLE CAP IMMUNITY	1	OTC
CULTURELLE CAP PRO-WELL	1	OTC
CULTURELLE CAP WOMENS	1	OTC
CULTURELLE CHW KIDS	1	OTC
CULTURELLE PAK KIDS	1	OTC
CULTURELLE PAK PROBIOT	1	OTC
<i>diarrhea rel sus 262/15ml</i>	1	OTC
<i>diarrhea sus 262/15ml</i>	1	OTC
<i>digestive cap health</i>	1	OTC
<i>digestive cap probioti</i>	1	OTC
<i>diotame sus 262/15ml</i>	1	OTC
<i>dual prenata cap immunity</i>	1	OTC
<i>eql stomach chw 262mg</i>	1	OTC
FLORAJEN CAP ACIDOPHI	1	OTC
FLORAJEN CAP WOMEN	1	OTC
<i>floranex gra</i>	1	OTC
<i>floranex tab</i>	1	OTC
GERBR SOOTHE DRO COLIC	1	OTC
<i>geri-pectate sus 262/15ml</i>	1	OTC
GOOD START CHW GROW KID	1	OTC
GOOD START POW GROW KID	1	OTC
<i>hm probiotic cap</i>	1	OTC
<i>kaopectate sus 262/15ml</i>	1	OTC
<i>kaopectate sus ex st</i>	1	OTC
<i>kaopectate tab 262mg</i>	1	OTC
<i>lactinex chw</i>	1	OTC
LACTINEX GRA	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>lactobacillu cap</i>	1	OTC
<i>lactobacillu tab probioti</i>	1	OTC
<i>lactobacillus - packet</i>	1	OTC
<i>lactobacillus cap</i>	1	OTC
<i>lactobacillus tab</i>	1	OTC
<i>medi-bismuth chw 262mg</i>	1	OTC
MOMMYS BLISS POW PROBIOTI	1	OTC
MORE-DOPHILU POW ACIDOPHI	1	OTC
PEDIA-LAX CHW YUMS	1	OTC
<i>peptic relf chw 262mg</i>	1	OTC
<i>pink bismuth chw 262mg</i>	1	OTC
<i>pink bismuth sus 262/15ml</i>	1	OTC
<i>pink bismuth sus 525/30ml</i>	1	OTC
<i>pink bismuth sus max str</i>	1	OTC
<i>pink bismuth tab 262mg</i>	1	OTC
<i>prenatal chw wellness</i>	1	OTC
<i>primadophilu cap</i>	1	OTC
<i>probiata tab</i>	1	OTC
<i>probiotic cap</i>	1	OTC
PROBIOTIC CAP	1	OTC
<i>probiotic cap acidophi</i>	1	OTC
<i>probiotic cap formula</i>	1	OTC
<i>probiotic cap gold</i>	1	OTC
PROBIOTIC CAP GOLD	1	OTC
<i>probiotic chw children</i>	1	OTC
PROBIOTIC DRO COLIC	1	OTC
PROBIOTIC LIQ 15 DAY	1	OTC
PROBIOTIC LIQ NEWBORN	1	OTC
<i>probiotic pak children</i>	1	OTC
<i>px stomach chw 262mg</i>	1	OTC
<i>px stomach sus 262/15ml</i>	1	OTC
<i>px stomach sus 525/15ml</i>	1	OTC
REPHRESH CAP PRO-B	1	OTC
<i>sb bismuth tab 262mg</i>	1	OTC
<i>sm stomach sus 262/15ml</i>	1	OTC
<i>sm stomach sus 525/30ml</i>	1	OTC
<i>soothe chw 262mg</i>	1	OTC
<i>soothe sus 262/15ml</i>	1	OTC
<i>soothe sus 525/15ml</i>	1	OTC
<i>soothe sus 525/30ml</i>	1	OTC
<i>soothe tab 262mg</i>	1	OTC
<i>stomach relf chw 262mg</i>	1	OTC
<i>stomach relf sus 262/15ml</i>	1	OTC
<i>stomach relf sus 524/30ml</i>	1	OTC
<i>stomach relf sus 525/15ml</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
stomach relf sus 525/30ml	1	OTC
stomach relf sus 527/30ml	1	OTC
stomach relf sus max str	1	OTC
stomach relf sus plus	1	OTC
stomach relf tab 262mg	1	OTC

ANTIDIARRHEAL/PROBIOTIC COMBINATIONS

anti-diarrhe tab 2-125mg	1	OTC
anti-diarrhe tab anti-gas	1	OTC
loperamide-simethicone tab 2-125 mg	1	OTC

ANTIPERTISTALTIC AGENTS

anti-diarrhe cap 2mg	1	OTC
ANTI-DIARRHE LIQ 1MG/5ML	1	OTC
anti-diarrhe tab 2mg	1	OTC
diamode tab 2mg	1	OTC
diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml	1	
diphenoxylate w/ atropine tab 2.5-0.025 mg	1	
loperamide hcl cap 2 mg	1	
loperamide hcl tab 2 mg	1	OTC
qc anti-diar cap 2mg	1	OTC
sm anti-diar tab 2mg	1	OTC

ANTIDOTES AND SPECIFIC ANTAGONISTS

ANTIDOTES AND SPECIFIC ANTAGONISTS

VISTOGARD PAK 10GM	1	QL (20 packets / 5 days)
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ANTIEMETICS

5-HT3 RECEPTOR ANTAGONISTS

granisetron hcl tab 1 mg	1	QL (6 tabs / 15 days)
ondansetron hcl oral soln 4 mg/5ml	1	QL (100 mL / 15 days)
ondansetron hcl tab 4 mg	1	QL (12 tabs / 15 days)
ondansetron hcl tab 8 mg	1	QL (12 tabs / 15 days)
ondansetron hcl tab 24 mg	1	QL (1 tab / 15 days)
ondansetron orally disintegrating tab 4 mg	1	QL (12 tabs / 15 days)
ondansetron orally disintegrating tab 8 mg	1	QL (12 tabs / 15 days)

ANTIEMETICS - ANTICHOLINERGIC

bonine chw 25mg	1	OTC
eql motion tab sickness	1	OTC
meclizine hcl chew tab 25 mg	1	OTC
meclizine hcl tab 12.5 mg	1	
meclizine hcl tab 12.5 mg	1	OTC
meclizine hcl tab 25 mg	1	
meclizine hcl tab 25 mg	1	OTC
motion relf tab 25mg	1	OTC
motion sick chw 25mg	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>motion sick tab 25mg</i>	1	OTC
<i>motion-time chw 25mg</i>	1	OTC
<i>travel ease chw 25mg</i>	1	OTC
<i>travel-ease tab 25mg</i>	1	OTC
<i>trimethobenzamide hcl cap 300 mg</i>	1	
<i>wal-dram ii tab 25mg</i>	1	OTC

ANTIEMETICS - MISCELLANEOUS

<i>dronabinol cap 2.5 mg</i>	1	QL (60 caps / 25 days)
<i>dronabinol cap 5 mg</i>	1	QL (60 caps / 25 days)
<i>dronabinol cap 10 mg</i>	1	QL (60 caps / 25 days)

SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS

<i>aprepitant capsule 40 mg</i>	1	PA
<i>aprepitant capsule 80 mg</i>	1	PA
<i>aprepitant capsule 125 mg</i>	1	PA
<i>aprepitant capsule therapy pack 80 & 125 mg</i>	1	PA

ANTIFUNGALS

ANTIFUNGALS

<i>griseofulvin microsize susp 125 mg/5ml</i>	1	
<i>griseofulvin ultramicrosize tab 125 mg</i>	1	
<i>griseofulvin ultramicrosize tab 250 mg</i>	1	
<i>nystatin tab 500000 unit</i>	1	
<i>terbinafine hcl tab 250 mg</i>	1	QL (90 tabs / year)

IMIDAZOLE-RELATED ANTIFUNGALS

<i>fluconazole for susp 10 mg/ml</i>	1	
<i>fluconazole for susp 40 mg/ml</i>	1	
<i>fluconazole tab 50 mg</i>	1	
<i>fluconazole tab 100 mg</i>	1	
<i>fluconazole tab 150 mg</i>	1	
<i>fluconazole tab 200 mg</i>	1	
<i>itraconazole cap 100 mg</i>	1	PA, QL (4 caps / 1 day)
<i>voriconazole for susp 40 mg/ml</i>	1	PA
<i>voriconazole tab 50 mg</i>	1	PA
<i>voriconazole tab 200 mg</i>	1	PA

ANTIHISTAMINES

ANTIHISTAMINES - ALKYLAMINES

<i>aller-chlor tab 4mg</i>	1	OTC
<i>allergy relf tab 4mg</i>	1	OTC
<i>allergy relf tab 12mg cr</i>	1	OTC
<i>allergy reli tab 4mg</i>	1	OTC
<i>allergy tab 4mg</i>	1	OTC
<i>allergy tab 12mg cr</i>	1	OTC
<i>chlor-phenir tab 4mg</i>	1	OTC
<i>chlorhist tab 4mg</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
chlorpheniramine maleate tab 4 mg	1	OTC
chlorpheniramine maleate tab er 12 mg	1	OTC
cvs allergy tab 4mg	1	OTC
diabet tuss syp allergy	1	OTC
ed chlorped syp jr	1	OTC
eq chlortabs tab 4mg	1	OTC
eql allergy tab 4mg	1	OTC
gnp allergy tab 4mg	1	OTC
pharbechlor tab 4mg	1	OTC
ra allergy tab 4mg	1	OTC
ra chlorphen tab 4mg	1	OTC
sm allergy tab 4mg	1	OTC
wal-finate tab 4mg	1	OTC

ANTIHISTAMINES - ETHANOLAMINES

a-s pls alrg tab 25mg	1	OTC
aler-cap cap 25mg	1	OTC
alertab tab 25mg	1	OTC
allergy cap 25mg	1	OTC
allergy chil chw 12.5mg	1	OTC
allergy chld liq 12.5/5ml	1	OTC
allergy liq 12.5/5ml	1	OTC
allergy med cap 25mg	1	OTC
allergy med liq 12.5/5ml	1	OTC
allergy rel cap 25mg	1	OTC
allergy rel liq 12.5/5ml	1	OTC
allergy relf cap 25mg	1	OTC
allergy relf liq 12.5/5ml	1	OTC
allergy relf liq 50/20ml	1	OTC
allergy relf tab 25mg	1	OTC
allergy rlf liq 50/20ml	1	OTC
allrgy relf tab 12.5mg	1	OTC
anti-hist tab 25mg	1	OTC
antihistamin cap 25mg	1	OTC
aurodryl liq 12.5/5ml	1	OTC
banophen cap 25mg	1	OTC
banophen cap 50mg	1	OTC
banophen tab 25mg	1	OTC
chld allergy liq 12.5/5ml	1	OTC
clemastine fumarate tab 2.68 mg	1	
CLEMASTINE SYP 0.5/5ML	1	
comp allergy cap 25mg	1	OTC
comp allergy tab 25mg	1	OTC
comp allergy tab 25mg med	1	OTC
comp allergy tab 25mg rlf	1	OTC
cvs allergy cap 25mg	1	OTC

Drug Name	Drug Tier	Requirements/Limits
cvs allergy chw 12.5mg	1	OTC
cvs allergy liq 25/10ml	1	OTC
cvs allergy tab chldrn	1	OTC
dayhist alrg tab 12 hour	1	OTC
diphedryl liq 12.5/5ml	1	OTC
diphen tab 25mg	1	OTC
diphenhist cap 25mg	1	OTC
diphenhydramine hcl cap 25 mg	1	OTC
diphenhydramine hcl cap 50 mg	1	OTC
diphenhydramine hcl elixir 12.5 mg/5ml	1	
diphenhydramine hcl liquid 12.5 mg/5ml	1	OTC
diphenhydramine hcl tab 25 mg	1	OTC
eq allergy cap 25mg	1	OTC
eql allergy tab 25mg	1	OTC
eql allergy tab chldrn	1	OTC
geri-dryl liq 12.5/5ml	1	OTC
geri-dryl tab 25mg	1	OTC
gnp allergy cap 25mg	1	OTC
gnp allergy chw 12.5mg	1	OTC
gnp allergy liq children	1	OTC
gnp allergy tab 25mg	1	OTC
hm allergy cap 25mg	1	OTC
liquid aller liq 12.5/5ml	1	OTC
m-dryl liq 12.5/5ml	1	OTC
medi-phedryl cap 25mg	1	OTC
naramin liq	1	OTC
pediacare al liq 12.5/5ml	1	OTC
pharbedryl cap 25mg	1	OTC
pharbedryl cap 50mg	1	OTC
px allergy cap 25mg	1	OTC
px allergy tab 25mg	1	OTC
px dayhist tab 1.34mg	1	OTC
qc allergy tab 25mg	1	OTC
ra allergy tab 25mg	1	OTC
sb allergy tab 25mg med	1	OTC
siladryl alr liq 12.5/5ml	1	OTC
sm allergy tab 25mg	1	OTC
sm allergy tab 25mg rlf	1	OTC
total allerg liq 12.5/5ml	1	OTC
total allerg tab 25mg	1	OTC
wal-dryl alr tab 12.5mg	1	OTC
wal-dryl cap 25mg	1	OTC
wal-dryl liq 12.5/5ml	1	OTC
wal-dryl tab 25mg	1	OTC

Drug Name	Drug Tier	Requirements/Limits
ANTIHISTAMINES - NON-SEDATING		
alavert tab 10mg	1	OTC
all day allg cap 10mg	1	OTC
all day allg sol 1mg/ml	1	OTC
all day allg sol 5mg/5ml	1	OTC
all day allg tab 10mg	1	OTC
all-day allg sol 5mg/5ml	1	OTC
ALLEGRA ALRG TAB 30MG	1	OTC
aller-ease tab 60mg	1	OTC
aller-ease tab 180mg	1	OTC
aller-fex tab 180mg	1	OTC
aller-tec sol 1mg/ml	1	OTC
aller-tec tab 10mg	1	OTC
allerclear tab 10mg	1	OTC
allergy 24hr tab 10mg	1	OTC
allergy 24hr tab 180mg	1	OTC
allergy chld sol 1mg/ml	1	OTC
allergy chld sol 5mg/5ml	1	OTC
allergy chld syrup 5mg/5ml	1	OTC
allergy rel cap 10mg	1	OTC
allergy rel sol 1mg/ml	1	OTC
allergy rel tab 10mg	1	OTC
allergy relf cap 10mg	1	OTC
allergy relf sol 1mg/ml	1	OTC
allergy relf sol 5mg/5ml	1	OTC
allergy relf syrup 5mg/5ml	1	OTC
allergy relf tab 10mg	1	OTC
allergy rlf tab 60mg	1	OTC
allergy rlf tab 180mg	1	OTC
allergy reli tab 10mg	1	OTC
allergy rlf chw 5mg	1	OTC
allergy rlf sus 30/5ml	1	OTC
allergy rlf tab 10mg	1	OTC
allergy tab 10mg	1	OTC
allergy tab 180mg	1	OTC
allgy relief tab 10mg	1	OTC
cetirizine chw 10mg	1	AGE, OTC
cetirizine hcl chew tab 5 mg	1	AGE, OTC
cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)	1	
cetirizine hcl tab 5 mg	1	OTC
cetirizine hcl tab 10 mg	1	OTC
cetirizine sol 1mg/ml	1	OTC
cetirizine sol 5mg/5ml	1	OTC
child allrgy sol 5mg/5ml	1	OTC
CLARITIN RDT TAB 5MG	1	OTC

Drug Name	Drug Tier	Requirements/Limits
claritin sol 5mg/5ml	1	OTC
cvs allergy tab 10mg	1	OTC
cvs allergy tab 180mg	1	OTC
eq allergy syrup 5mg/5ml	1	OTC
eq loratadine tab 10mg	1	OTC
eql all day tab allergy	1	OTC
fexofenadine hcl tab 60 mg	1	OTC
fexofenadine hcl tab 180 mg	1	OTC
gnp all day tab allergy	1	OTC
hm allergy tab 180mg	1	OTC
24hr allergy tab 180mg	1	OTC
loradamed tab 10mg	1	OTC
loratadine cap 10 mg	1	OTC
loratadine chw 5mg	1	OTC
loratadine sol 10/10ml	1	OTC
loratadine syrup 5mg/5ml	1	OTC
loratadine syrup 5 mg/5ml	1	OTC
loratadine tab 10 mg	1	OTC
loratadine tab 10mg	1	OTC
mm fexofenad tab 180mg	1	OTC
qc allergy tab 10mg	1	OTC
sb allergy tab 10mg	1	OTC
sm all day tab 10mg	1	OTC
sm all day tab allergy	1	OTC
sm allergy syrup 5mg/5ml	1	OTC
sm loratadin tab 10mg	1	OTC
triaminic tab 10mg	1	OTC
wal-fex allr tab 180mg	1	OTC
wal-fex alrg tab 60mg 12h	1	OTC
wal-fex tab 180mg	1	OTC
wal-itin chl sol 5mg/5ml	1	OTC
wal-itin chw 5mg	1	OTC
wal-itin syrup 5mg/5ml	1	OTC
wal-itin tab 10mg	1	OTC
wal-vert tab 10mg	1	OTC
wal-zyr cap 10mg	1	OTC
wal-zyr chld sol 5mg/5ml	1	OTC
wal-zyr chw 5mg	1	AGE, OTC
wal-zyr chw 10mg	1	AGE, OTC
wal-zyr sol 1mg/ml	1	OTC
wal-zyr sol 5mg/5ml	1	OTC
wal-zyr tab 10mg	1	OTC
ZYRTEC ALLGY TAB 10MG	1	OTC
ZYRTEC CHILD TAB 10MG	1	OTC

Drug Name	Drug Tier Requirements/Limits
ANTIHISTAMINES - PHENOTHIAZINES	
<i>promethazine hcl suppos 12.5 mg</i>	1
<i>promethazine hcl suppos 25 mg</i>	1
<i>promethazine hcl syrup 6.25 mg/5ml</i>	1
<i>promethazine hcl tab 12.5 mg</i>	1
<i>promethazine hcl tab 25 mg</i>	1
<i>promethazine hcl tab 50 mg</i>	1
<i>promethegan sup 12.5mg</i>	1
<i>promethegan sup 25mg</i>	1
<i>promethegan sup 50mg</i>	1
ANTIHISTAMINES - PIPERIDINES	
<i>ciproheptadine hcl syrup 2 mg/5ml</i>	1
<i>ciproheptadine hcl tab 4 mg</i>	1
ANTIHYPERTROPHIC CARDIOPATHY	
BILE ACID SEQUESTRANTS	
<i>cholestyramine light powder 4 gm/dose</i>	1
<i>cholestyramine light powder packets 4 gm</i>	1
<i>cholestyramine powder 4 gm/dose</i>	1
<i>cholestyramine powder packets 4 gm</i>	1
<i>colestipol hcl granule packets 5 gm</i>	1
<i>colestipol hcl granules 5 gm</i>	1
<i>colestipol hcl tab 1 gm</i>	1
<i>prevalite pow 4gm</i>	1
<i>prevalite pow 4gm pk</i>	1
FIBRIC ACID DERIVATIVES	
<i>fenofibrate micronized cap 67 mg</i>	1
<i>fenofibrate micronized cap 134 mg</i>	1
<i>fenofibrate micronized cap 200 mg</i>	1
<i>fenofibrate tab 48 mg</i>	1
<i>fenofibrate tab 54 mg</i>	1
<i>fenofibrate tab 145 mg</i>	1
<i>fenofibrate tab 160 mg</i>	1
<i>gemfibrozil tab 600 mg</i>	1
HMG COA REDUCTASE INHIBITORS	
<i>atorvastatin calcium tab 10 mg (base equivalent)</i>	1
<i>atorvastatin calcium tab 20 mg (base equivalent)</i>	1
<i>atorvastatin calcium tab 40 mg (base equivalent)</i>	1
<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	1
<i>lovastatin tab 10 mg</i>	1
<i>lovastatin tab 20 mg</i>	1

Drug Name	Drug Tier	Requirements/Limits
<i>lovastatin tab 40 mg</i>	1	
<i>pravastatin sodium tab 10 mg</i>	1	
<i>pravastatin sodium tab 20 mg</i>	1	
<i>pravastatin sodium tab 40 mg</i>	1	
<i>pravastatin sodium tab 80 mg</i>	1	
<i>rosuvastatin calcium tab 5 mg</i>	1	
<i>rosuvastatin calcium tab 10 mg</i>	1	
<i>rosuvastatin calcium tab 20 mg</i>	1	
<i>rosuvastatin calcium tab 40 mg</i>	1	
<i>simvastatin tab 5 mg</i>	1	
<i>simvastatin tab 10 mg</i>	1	
<i>simvastatin tab 20 mg</i>	1	
<i>simvastatin tab 40 mg</i>	1	
<i>simvastatin tab 80 mg</i>	1	

INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS

<i>ezetimibe tab 10 mg</i>	1
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NICOTINIC ACID DERIVATIVES

<i>niacin tab er 500 mg (antihyperlipidemic)</i>	1
<i>niacin tab er 750 mg (antihyperlipidemic)</i>	1
<i>niacin tab er 1000 mg (antihyperlipidemic)</i>	1

PROPROTEIN CONVERTASE SUBTILISIN/KEXIN TYPE 9 INHIBITORS

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

ANTIHYPERTENSIVES

ACE INHIBITORS

<i>benazepril hcl tab 5 mg</i>	1
<i>benazepril hcl tab 10 mg</i>	1
<i>benazepril hcl tab 20 mg</i>	1
<i>benazepril hcl tab 40 mg</i>	1
<i>captopril tab 12.5 mg</i>	1
<i>captopril tab 25 mg</i>	1
<i>captopril tab 50 mg</i>	1
<i>captopril tab 100 mg</i>	1
<i>enalapril maleate tab 2.5 mg</i>	1
<i>enalapril maleate tab 5 mg</i>	1
<i>enalapril maleate tab 10 mg</i>	1
<i>enalapril maleate tab 20 mg</i>	1

Drug Name	Drug Tier Requirements/Limits
<i>fosinopril sodium tab 10 mg</i>	1
<i>fosinopril sodium tab 20 mg</i>	1
<i>fosinopril sodium tab 40 mg</i>	1
<i>lisinopril tab 2.5 mg</i>	1
<i>lisinopril tab 5 mg</i>	1
<i>lisinopril tab 10 mg</i>	1
<i>lisinopril tab 20 mg</i>	1
<i>lisinopril tab 30 mg</i>	1
<i>lisinopril tab 40 mg</i>	1
<i>quinapril hcl tab 5 mg</i>	1
<i>quinapril hcl tab 10 mg</i>	1
<i>quinapril hcl tab 20 mg</i>	1
<i>quinapril hcl tab 40 mg</i>	1
<i>ramipril cap 1.25 mg</i>	1
<i>ramipril cap 2.5 mg</i>	1
<i>ramipril cap 5 mg</i>	1
<i>ramipril cap 10 mg</i>	1
<i>trandolapril tab 1 mg</i>	1
<i>trandolapril tab 2 mg</i>	1
<i>trandolapril tab 4 mg</i>	1

ANGIOTENSIN II RECEPTOR ANTAGONISTS

<i>irbesartan tab 75 mg</i>	1
<i>irbesartan tab 150 mg</i>	1
<i>irbesartan tab 300 mg</i>	1
<i>losartan potassium tab 25 mg</i>	1
<i>losartan potassium tab 50 mg</i>	1
<i>losartan potassium tab 100 mg</i>	1
<i>valsartan tab 40 mg</i>	1
<i>valsartan tab 80 mg</i>	1
<i>valsartan tab 160 mg</i>	1
<i>valsartan tab 320 mg</i>	1

ANTIADRENERGIC ANTIHYPERTENSIVES

<i>clonidine hcl tab 0.1 mg</i>	1
<i>clonidine hcl tab 0.2 mg</i>	1
<i>clonidine hcl tab 0.3 mg</i>	1
<i>clonidine td patch weekly 0.1 mg/24hr</i>	1
<i>clonidine td patch weekly 0.2 mg/24hr</i>	1
<i>clonidine td patch weekly 0.3 mg/24hr</i>	1
<i>doxazosin mesylate tab 1 mg</i>	1
<i>doxazosin mesylate tab 2 mg</i>	1
<i>doxazosin mesylate tab 4 mg</i>	1
<i>doxazosin mesylate tab 8 mg</i>	1
<i>guanfacine hcl tab 1 mg</i>	1
<i>guanfacine hcl tab 2 mg</i>	1
<i>METHYLDOPA TAB 250MG</i>	1

Drug Name	Drug Tier	Requirements/Limits
METHYLDOPA TAB 500MG	1	
<i>prazosin hcl cap 1 mg</i>	1	
<i>prazosin hcl cap 2 mg</i>	1	
<i>prazosin hcl cap 5 mg</i>	1	
<i>terazosin hcl cap 1 mg (base equivalent)</i>	1	
<i>terazosin hcl cap 2 mg (base equivalent)</i>	1	
<i>terazosin hcl cap 5 mg (base equivalent)</i>	1	
<i>terazosin hcl cap 10 mg (base equivalent)</i>	1	
ANTIHYPERTENSIVE COMBINATIONS		
<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i>	1	
<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>	1	
<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	1	
<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	1	
<i>amlodipine besylate-benazepril hcl cap 10-20 mg</i>	1	
<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	1	
<i>atenolol & chlorthalidone tab 50-25 mg</i>	1	
<i>atenolol & chlorthalidone tab 100-25 mg</i>	1	
BENAZEP/HCTZ TAB 5-6.25	1	
<i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	1	
<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg</i>	1	
<i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg</i>	1	
<i>bisoprolol & hydrochlorothiazide tab 10-6.25 mg</i>	1	
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	1	
<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i>	1	
<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i>	1	

Drug Name	Drug Tier Requirements/Limits
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i>	1
<i>lisinopril & hydrochlorothiazide tab 10-12.5 mg</i>	1
<i>lisinopril & hydrochlorothiazide tab 20-12.5 mg</i>	1
<i>lisinopril & hydrochlorothiazide tab 20-25 mg</i>	1
<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	1
<i>losartan potassium & hydrochlorothiazide tab 100-12.5 mg</i>	1
<i>losartan potassium & hydrochlorothiazide tab 100-25 mg</i>	1
<i>metoprolol & hydrochlorothiazide tab 50-25 mg</i>	1
<i>metoprolol & hydrochlorothiazide tab 100-25 mg</i>	1
<i>metoprolol & hydrochlorothiazide tab 100-50 mg</i>	1
<i>quinapril-hydrochlorothiazide tab 10-12.5 mg</i>	1
<i>quinapril-hydrochlorothiazide tab 20-12.5 mg</i>	1
<i>quinapril-hydrochlorothiazide tab 20-25 mg</i>	1
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>	1
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i>	1
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i>	1
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i>	1
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i>	1

SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS)

<i>eplerenone tab 25 mg</i>	1
<i>eplerenone tab 50 mg</i>	1

VASODILATORS

<i>hydralazine hcl tab 10 mg</i>	1
<i>hydralazine hcl tab 25 mg</i>	1
<i>hydralazine hcl tab 50 mg</i>	1
<i>hydralazine hcl tab 100 mg</i>	1

ANTIMALARIALS

ANTIMALARIAL COMBINATIONS

<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	1	QL (23 tabs / 180 days)
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Drug Name	Drug Tier	Requirements/Limits
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	1	QL (23 tabs / 180 days)

ANTIMALARIALS

<i>chloroquine phosphate tab 250 mg</i>	1	QL (8 tabs / 180 days)
<i>chloroquine phosphate tab 500 mg</i>	1	QL (8 tabs / 180 days)
<i>hydroxychloroquine sulfate tab 200 mg</i>	1	
<i>mefloquine hcl tab 250 mg</i>	1	QL (8 tabs / 180 days)

ANTIMYASTHENIC/CHOLINERGIC AGENTS

ANTIMYASTHENIC/CHOLINERGIC AGENTS

<i>pyridostigmine bromide oral soln 60 mg/5ml</i>	1	
<i>pyridostigmine bromide tab 60 mg</i>	1	
<i>pyridostigmine bromide tab er 180 mg</i>	1	

ANTIMYCOBACTERIAL AGENTS

ANTIMYCOBACTERIAL AGENTS

<i>ethambutol hcl tab 100 mg</i>	1	
<i>ethambutol hcl tab 400 mg</i>	1	
<i>isoniazid syrup 50 mg/5ml</i>	1	
<i>isoniazid tab 100 mg</i>	1	
<i>isoniazid tab 300 mg</i>	1	
<i>pyrazinamide tab 500 mg</i>	1	
<i>rifabutin cap 150 mg</i>	1	
<i>rifampin cap 150 mg</i>	1	
<i>rifampin cap 300 mg</i>	1	

ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

ALKYLATING AGENTS

<i>CYCLOPHOSPH TAB 25MG</i>	1	
<i>CYCLOPHOSPH TAB 50MG</i>	1	
<i>cyclophosphamide cap 25 mg</i>	1	
<i>cyclophosphamide cap 50 mg</i>	1	
<i>GLEOSTINE CAP 10MG</i>	1	
<i>GLEOSTINE CAP 40MG</i>	1	
<i>GLEOSTINE CAP 100MG</i>	1	
<i>LEUKERAN TAB 2MG</i>	1	
<i>melphalan tab 2 mg</i>	1	
<i>MYLERAN TAB 2MG</i>	1	
<i>temozolomide cap 5 mg</i>	1	PA
<i>temozolomide cap 20 mg</i>	1	PA
<i>temozolomide cap 100 mg</i>	1	PA
<i>temozolomide cap 140 mg</i>	1	PA
<i>temozolomide cap 180 mg</i>	1	PA
<i>temozolomide cap 250 mg</i>	1	PA

ANTIMETABOLITES

<i>capecitabine tab 150 mg</i>	1	PA, QL (4 tabs / 1 day)
<i>capecitabine tab 500 mg</i>	1	PA, QL (10 tabs / 1 day)

Drug Name	Drug Tier	Requirements/Limits
<i>mercaptopurine tab 50 mg</i>	1	
<i>methotrexate sodium tab 2.5 mg (base equiv)</i>	1	
TREXALL TAB 5MG	1	
TREXALL TAB 7.5MG	1	
TREXALL TAB 10MG	1	
TREXALL TAB 15MG	1	
ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS		
INLYTA TAB 1MG	1	PA, QL (8 tabs / 1 day)
INLYTA TAB 5MG	1	PA, QL (4 tabs / 1 day)
LENVIMA CAP 4MG	1	PA, QL (1 cap / 1 day)
LENVIMA CAP 8 MG	1	PA, QL (2 caps / 1 day)
LENVIMA CAP 10 MG	1	PA, QL (1 cap / 1 day)
LENVIMA CAP 12MG	1	PA, QL (3 caps / 1 day)
LENVIMA CAP 14 MG	1	PA, QL (2 caps / 1 day)
LENVIMA CAP 18 MG	1	PA, QL (3 caps / 1 day)
LENVIMA CAP 20 MG	1	PA, QL (2 caps / 1 day)
LENVIMA CAP 24 MG	1	PA, QL (3 caps / 1 day)
MVASI INJ 100MG	1	PA
MVASI INJ 400MG	1	PA
ZIRABEV INJ 100/4ML	1	PA
ZIRABEV INJ 400/16ML	1	PA
ANTINEOPLASTIC - ANTI-HER2 AGENTS		
KANJINTI INJ 420MG	1	PA
KANJINTI SOL 150MG	1	PA
TUKYSA TAB 50MG	1	PA, QL (4 tabs / 1 day)
TUKYSA TAB 150MG	1	PA, QL (4 tabs / 1 day)
ANTINEOPLASTIC - BCL-2 INHIBITORS		
VENCLEXTA TAB 10MG	1	PA, QL (4 tabs / 1 day)
VENCLEXTA TAB 50MG	1	PA, QL (4 tabs / 1 day)
VENCLEXTA TAB 100MG	1	PA, QL (6 tabs / 1 day)
VENCLEXTA TAB START PK	1	PA, QL (1 pack / 28 days)
ANTINEOPLASTIC - EGFR INHIBITORS		
<i>erlotinib hcl tab 25 mg (base equivalent)</i>	1	PA, QL (2 tabs / 1 day)
<i>erlotinib hcl tab 100 mg (base equivalent)</i>	1	PA, QL (1 tab / 1 day)
<i>erlotinib hcl tab 150 mg (base equivalent)</i>	1	PA, QL (1 tab / 1 day)
GILOTRIF TAB 20MG	1	PA, QL (1 tab / 1 day)
GILOTRIF TAB 30MG	1	PA, QL (1 tab / 1 day)
GILOTRIF TAB 40MG	1	PA, QL (1 tab / 1 day)
ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS		
ERIVEDGE CAP 150MG	1	PA, QL (30 caps / 30 days)

Drug Name	Drug Tier	Requirements/Limits
ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS		
<i>abiraterone acetate tab 250 mg</i>	1	PA, QL (4 tabs / 1 day)
<i>anastrozole tab 1 mg</i>	1	
<i>bicalutamide tab 50 mg</i>	1	
<i>ELIGARD INJ 7.5MG</i>	1	PA
<i>ELIGARD INJ 22.5MG</i>	1	PA
<i>ELIGARD INJ 30MG</i>	1	PA
<i>ELIGARD INJ 45MG</i>	1	PA
<i>exemestane tab 25 mg</i>	1	
<i>flutamide cap 125 mg</i>	1	
<i>fulvestrant inj 250 mg/5ml</i>	1	PA
<i>letrozole tab 2.5 mg</i>	1	
<i>leuprolide acetate inj kit 5 mg/ml</i>	1	PA
<i>LYSODREN TAB 500MG</i>	1	
<i>megestrol acetate susp 40 mg/ml</i>	1	
<i>megestrol acetate tab 20 mg</i>	1	
<i>megestrol acetate tab 40 mg</i>	1	
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	1	
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	1	
<i>toremifene citrate tab 60 mg (base equivalent)</i>	1	
ANTINEOPLASTIC ENZYME INHIBITORS		
<i>CABOMETYX TAB 20MG</i>	1	PA, QL (1 tab / 1 day)
<i>CABOMETYX TAB 40MG</i>	1	PA, QL (1 tab / 1 day)
<i>CABOMETYX TAB 60MG</i>	1	PA, QL (1 tab / 1 day)
<i>CAPRELSA TAB 100MG</i>	1	PA, QL (2 tabs / 1 day)
<i>CAPRELSA TAB 300MG</i>	1	PA, QL (1 tab / 1 day)
<i>COMETRIQ KIT 60MG</i>	1	PA, QL (3 caps / 1 day)
<i>COMETRIQ KIT 100MG</i>	1	PA, QL (2 caps / 1 day)
<i>COMETRIQ KIT 140MG</i>	1	PA, QL (4 caps / 1 day)
<i>everolimus tab 2.5 mg</i>	1	PA, QL (1 tab / 1 day)
<i>everolimus tab 5 mg</i>	1	PA, QL (1 tab / 1 day)
<i>everolimus tab 7.5 mg</i>	1	PA, QL (1 tab / 1 day)
<i>everolimus tab 10 mg</i>	1	PA, QL (1 tab / 1 day)
<i>FARYDAK CAP 10MG</i>	1	PA, QL (6 caps / 21 days)
<i>FARYDAK CAP 15MG</i>	1	PA, QL (6 caps / 21 days)
<i>FARYDAK CAP 20MG</i>	1	PA, QL (6 caps / 21 days)
<i>imatinib mesylate tab 100 mg (base equivalent)</i>	1	PA, QL (3 tabs / 1 day)

Drug Name	Drug Tier	Requirements/Limits
<i>imatinib mesylate tab 400 mg (base equivalent)</i>	1	PA, QL (2 tabs / 1 day)
IMBRUVICA CAP 140MG	1	PA, QL (3 caps / 1 day)
JAKAFI TAB 5MG	1	PA, QL (2 tabs / 1 day)
JAKAFI TAB 10MG	1	PA, QL (2 tabs / 1 day)
JAKAFI TAB 15MG	1	PA, QL (2 tabs / 1 day)
JAKAFI TAB 20MG	1	PA, QL (2 tabs / 1 day)
JAKAFI TAB 25MG	1	PA, QL (2 tabs / 1 day)
<i>lapatinib ditosylate tab 250 mg (base equiv)</i>	1	PA, QL (6 tabs / 1 day)
LORBRENA TAB 25MG	1	PA, QL (3 tabs / 1 day)
LORBRENA TAB 100MG	1	PA, QL (1 tab / 1 day)
MEKINIST TAB 0.5MG	1	PA, QL (3 tabs / 1 day)
MEKINIST TAB 2MG	1	PA, QL (1 tab / 1 day)
NINLARO CAP 2.3MG	1	PA, QL (6 caps / 28 days)
NINLARO CAP 3MG	1	PA, QL (6 caps / 28 days)
NINLARO CAP 4MG	1	PA, QL (6 caps / 28 days)
ROZLYTREK CAP 100MG	1	PA, QL (1 cap / 1 day)
ROZLYTREK CAP 200MG	1	PA, QL (3 caps / 1 day)
RUBRACA TAB 200MG	1	PA, QL (4 tabs / 1 day)
RUBRACA TAB 250MG	1	PA, QL (4 tabs / 1 day)
RUBRACA TAB 300MG	1	PA, QL (4 tabs / 1 day)
RYDAPT CAP 25MG	1	PA, QL (8 caps / 1 day)
STIVARGA TAB 40MG	1	PA, QL (3 tabs / 1 day)
<i>sunitinib malate cap 12.5 mg (base equivalent)</i>	1	PA, QL (1 cap / 1 day)
<i>sunitinib malate cap 25 mg (base equivalent)</i>	1	PA, QL (1 cap / 1 day)
<i>sunitinib malate cap 37.5 mg (base equivalent)</i>	1	PA, QL (1 cap / 1 day)
<i>sunitinib malate cap 50 mg (base equivalent)</i>	1	PA, QL (1 cap / 1 day)
TAFINLAR CAP 50MG	1	PA, QL (4 caps / 1 day)
TAFINLAR CAP 75MG	1	PA, QL (4 caps / 1 day)
VELCADE INJ 3.5MG	1	PA
VERZENIO TAB 50MG	1	PA, QL (2 tabs / 1 day)
VERZENIO TAB 100MG	1	PA, QL (2 tabs / 1 day)
VERZENIO TAB 150MG	1	PA, QL (2 tabs / 1 day)
VERZENIO TAB 200MG	1	PA, QL (2 tabs / 1 day)
VOTRIENT TAB 200MG	1	PA, QL (4 tabs / 1 day)
XALKORI CAP 200MG	1	PA, QL (4 caps / 1 day)
XALKORI CAP 250MG	1	PA, QL (4 caps / 1 day)
XOSPATA TAB 40MG	1	PA, QL (3 tabs / 1 day)

Drug Name	Drug Tier	Requirements/Limits
ZEJULA CAP 100MG	1	PA, QL (3 caps / 1 day)
ZELBORAF TAB 240MG	1	PA, QL (8 tabs / 1 day)
ZOLINZA CAP 100MG	1	PA, QL (4 caps / 1 day)
ZYDELIG TAB 100MG	1	PA, QL (2 tabs / 1 day)
ZYDELIG TAB 150MG	1	PA, QL (2 tabs / 1 day)

ANTINEOPLASTICS MISC.

<i>bexarotene cap 75 mg</i>	1	PA
<i>hydroxyurea cap 500 mg</i>	1	
INTRON A INJ 10MU	1	PA
INTRON A INJ 18MU	1	PA
INTRON A INJ 25MU	1	PA
INTRON A INJ 50MU	1	PA
MATULANE CAP 50MG	1	
<i>tretinoin cap 10 mg</i>	1	

CHEMOTHERAPY RESCUE/ANTIDOTE/PROTECTIVE AGENTS

<i>leucovorin calcium tab 5 mg</i>	1
<i>leucovorin calcium tab 10 mg</i>	1
<i>leucovorin calcium tab 15 mg</i>	1
<i>leucovorin calcium tab 25 mg</i>	1

MITOTIC INHIBITORS

<i>etoposide cap 50 mg</i>	1
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ANTIPARKINSON AND RELATED THERAPY AGENTS

ANTIPARKINSON COMT INHIBITORS

<i>entacapone tab 200 mg</i>	1
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ANTIPARKINSON DOPAMINERGICS

<i>amantadine hcl cap 100 mg</i>	1
<i>amantadine hcl soln 50 mg/5ml</i>	1
<i>amantadine hcl tab 100 mg</i>	1
<i>bromocriptine mesylate cap 5 mg (base equivalent)</i>	1
<i>bromocriptine mesylate tab 2.5 mg (base equivalent)</i>	1
CARB/LEVO TAB 10-100MG	1
CARB/LEVO TAB 25-100MG	1
CARB/LEVO TAB 25-250MG	1
<i>carbidopa & levodopa tab 10-100 mg</i>	1
<i>carbidopa & levodopa tab 25-100 mg</i>	1
<i>carbidopa & levodopa tab 25-250 mg</i>	1
<i>carbidopa & levodopa tab er 25-100 mg</i>	1
<i>carbidopa & levodopa tab er 50-200 mg</i>	1
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	1
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	1

Drug Name	Drug Tier	Requirements/Limits
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	1	
<i>pramipexole dihydrochloride tab 0.5 mg</i>	1	
<i>pramipexole dihydrochloride tab 0.25 mg</i>	1	
<i>pramipexole dihydrochloride tab 0.75 mg</i>	1	
<i>pramipexole dihydrochloride tab 0.125 mg</i>	1	
<i>pramipexole dihydrochloride tab 1 mg</i>	1	
<i>pramipexole dihydrochloride tab 1.5 mg</i>	1	
<i>ropinirole hydrochloride tab 0.5 mg</i>	1	
<i>ropinirole hydrochloride tab 0.25 mg</i>	1	
<i>ropinirole hydrochloride tab 1 mg</i>	1	
<i>ropinirole hydrochloride tab 2 mg</i>	1	
<i>ropinirole hydrochloride tab 3 mg</i>	1	
<i>ropinirole hydrochloride tab 4 mg</i>	1	
<i>ropinirole hydrochloride tab 5 mg</i>	1	

ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS

<i>selegiline hcl cap 5 mg</i>	1
<i>selegiline hcl tab 5 mg</i>	1

ANTIPSYCHOTICS/ANTIMANIC AGENTS

PHENOTHIAZINES

<i>compro sup 25mg</i>	1
<i>prochlorperazine maleate tab 5 mg (base equivalent)</i>	1
<i>prochlorperazine maleate tab 10 mg (base equivalent)</i>	1
<i>prochlorperazine suppos 25 mg</i>	1

ANTISEPTICS & DISINFECTANTS

ANTISEPTIC COMBINATIONS

<i>IV PREP WIPE PAD</i>	1	OTC
<i>MICROCLENS PAD WIPES</i>	1	OTC
<i>UNI-SOLVE PAD WIPES</i>	1	OTC

CHLORINE ANTISEPTICS

<i>antibac hand sol 2%</i>	1	OTC
<i>antiseptic sol 4%</i>	1	OTC
<i>antiseptic sol clnsr 4%</i>	1	OTC
<i>antiseptic sol skin clin</i>	1	OTC
<i>betasept liq 4%</i>	1	OTC
<i>BIOPATCH MIS 1"/4MM</i>	1	OTC
<i>BIOPATCH MIS 1"/7MM</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
BIOPATCH MIS 3/4"/1.5	1	OTC
BIOPATCH PRO MIS DISK/CHG	1	OTC
CHLORHEX GLU PAD 2%	1	OTC
<i>chlorhexidin sol 2%</i>	1	OTC
<i>dyna-hex 2 sol 2%</i>	1	OTC
<i>dyna-hex 4 sol 4%</i>	1	OTC
<i>hand wash sol 2%</i>	1	OTC
HIBICLENS LIQ 4%	1	OTC
<i>skin cleansr sol 4%</i>	1	OTC
<i>sm antisepti sol clnsr 4%</i>	1	OTC
TEGADERM CHG MIS DRESSING	1	OTC

IODINE ANTISEPTICS

BETADINE SRG SOL 7.5%	1	OTC
FIRST AID OIN 10%	1	OTC
<i>first aid sol 10%</i>	1	OTC
<i>hm povid-iod sol 10%</i>	1	OTC
<i>povidone-iodine soln 10%</i>	1	OTC
<i>povidone-ion sol 10%</i>	1	OTC
<i>povidone/iod sol 10%</i>	1	OTC
<i>ra antisepti sol 10%</i>	1	OTC
<i>sm povid-iod sol 10%</i>	1	OTC

ANTIVIRALS

ANTIRETROVIRALS

<i>abacavir sulfate soln 20 mg/ml (base equiv)</i>	1	QL (30 mL / 1 day)
<i>abacavir sulfate tab 300 mg (base equiv)</i>	1	QL (2 tabs / 1 day)
<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	1	QL (1 tab / 1 day)
<i>abacavir sulfate-lamivudine-zidovudine tab 300-150-300 mg</i>	1	QL (2 tabs / 1 day)
<i>atazanavir sulfate cap 150 mg (base equiv)</i>	1	QL (1 cap / 1 day)
<i>atazanavir sulfate cap 200 mg (base equiv)</i>	1	QL (2 caps / 1 day)
<i>atazanavir sulfate cap 300 mg (base equiv)</i>	1	QL (1 cap / 1 day)
BIKTARVY TAB	1	QL (1 tab / 1 day)
CIMDUO TAB 300-300	1	QL (1 tab / 1 day)
COMPLERA TAB	1	QL (1 tab / 1 day)
CRIXIVAN CAP 400MG	1	QL (6 caps / 1 day)
DESCOVY TAB 200/25MG	1	QL (1 tab / 1 day)
DOVATO TAB 50-300MG	1	QL (1 tab / 1 day)
EDURANT TAB 25MG	1	QL (2 tabs / 1 day)
<i>efavirenz cap 50 mg</i>	1	QL (3 caps / 1 day)
<i>efavirenz cap 200 mg</i>	1	QL (3 caps / 1 day)
<i>efavirenz tab 600 mg</i>	1	QL (1 tab / 1 day)
<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	1	QL (1 tab / 1 day)

Drug Name	Drug Tier	Requirements/Limits
<i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>	1	QL (1 tab / 1 day)
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>	1	QL (1 tab / 1 day)
<i>emtricitabine caps 200 mg</i>	1	QL (1 cap / 1 day)
<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i>	1	QL (1 tab / 1 day)
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>	1	QL (1 tab / 1 day)
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>	1	QL (1 tab / 1 day)
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	1	QL (1 tab / 1 day)
<i>EMTRIVA SOL 10MG/ML</i>	1	QL (680 mL / 28 days)
<i>etravirine tab 100 mg</i>	1	QL (4 tabs / 1 day)
<i>etravirine tab 200 mg</i>	1	QL (2 tabs / 1 day)
<i>EVOTAZ TAB 300-150</i>	1	QL (1 tab / 1 day)
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	1	QL (4 tabs / 1 day)
<i>GENVOYA TAB</i>	1	QL (1 tab / 1 day)
<i>INTELENCE TAB 25MG</i>	1	QL (4 tabs / 1 day)
<i>ISENTRESS CHW 25MG</i>	1	QL (6 tabs / 1 day)
<i>ISENTRESS CHW 100MG</i>	1	QL (6 tabs / 1 day)
<i>ISENTRESS HD TAB 600MG</i>	1	QL (2 tabs / 1 day)
<i>ISENTRESS POW 100MG</i>	1	QL (2 packets / 1 day)
<i>ISENTRESS TAB 400MG</i>	1	QL (4 tabs / 1 day)
<i>lamivudine oral soln 10 mg/ml</i>	1	QL (30 mL / 1 day)
<i>lamivudine tab 150 mg</i>	1	QL (2 tabs / 1 day)
<i>lamivudine tab 300 mg</i>	1	QL (1 tab / 1 day)
<i>lamivudine-zidovudine tab 150-300 mg</i>	1	QL (2 tabs / 1 day)
<i>LEXIVA SUS 50MG/ML</i>	1	QL (1575 mL / 28 days)
<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i>	1	QL (13 mL / 1 day)
<i>lopinavir-ritonavir tab 100-25 mg</i>	1	QL (8 tabs / 1 day)
<i>lopinavir-ritonavir tab 200-50 mg</i>	1	QL (4 tabs / 1 day)
<i>nevirapine susp 50 mg/5ml</i>	1	QL (40 mL / 1 day)
<i>nevirapine tab 200 mg</i>	1	QL (2 tabs / 1 day)
<i>nevirapine tab er 24hr 100 mg</i>	1	QL (3 tabs / 1 day)
<i>nevirapine tab er 24hr 400 mg</i>	1	QL (1 tab / 1 day)
<i>NORVIR POW 100MG</i>	1	QL (12 packets / 1 day)
<i>NORVIR SOL 80MG/ML</i>	1	QL (16 mL / 1 day)
<i>ODEFSEY TAB</i>	1	QL (1 tab / 1 day)
<i>PIFELTRO TAB 100MG</i>	1	QL (2 tabs / 1 day)
<i>PREZCOBIX TAB 800-150</i>	1	QL (1 tab / 1 day)
<i>PREZISTA SUS 100MG/ML</i>	1	QL (400 mL / 30 days)
<i>PREZISTA TAB 75MG</i>	1	QL (10 tabs / 1 day)

Drug Name	Drug Tier	Requirements/Limits
PREZISTA TAB 150MG	1	QL (6 tabs / 1 day)
PREZISTA TAB 600MG	1	QL (2 tabs / 1 day)
PREZISTA TAB 800MG	1	QL (1 tab / 1 day)
REYATAZ POW 50MG	1	QL (6 packets / 1 day)
<i>ritonavir tab 100 mg</i>	1	QL (12 tabs / 1 day)
SELZENTRY SOL 20MG/ML	1	QL (1840 mL / 30 days)
SELZENTRY TAB 25MG	1	QL (8 tabs / 1 day)
SELZENTRY TAB 75MG	1	QL (2 tabs / 1 day)
SELZENTRY TAB 150MG	1	QL (2 tabs / 1 day)
SELZENTRY TAB 300MG	1	QL (4 tabs / 1 day)
<i>stavudine cap 15 mg</i>	1	QL (2 caps / 1 day)
<i>stavudine cap 20 mg</i>	1	QL (2 caps / 1 day)
<i>stavudine cap 30 mg</i>	1	QL (2 caps / 1 day)
<i>stavudine cap 40 mg</i>	1	QL (2 caps / 1 day)
STRIBILD TAB	1	QL (1 tab / 1 day)
SYMTUZA TAB	1	QL (1 tab / 1 day)
TEMIXYS TAB 300-300	1	QL (1 tab / 1 day)
<i>tenofovir disoproxil fumarate tab 300 mg</i>	1	QL (1 tab / 1 day)
TIVICAY PD TAB 5MG	1	QL (12 tabs / 1 day)
TIVICAY TAB 10MG	1	QL (8 tabs / 1 day)
TIVICAY TAB 25MG	1	QL (2 tabs / 1 day)
TIVICAY TAB 50MG	1	QL (2 tabs / 1 day)
TRIUMEQ TAB	1	QL (1 tab / 1 day)
TROGARZO INJ 150MG/ML	1	
TYBOST TAB 150MG	1	QL (1 tab / 1 day)
VIREAD POW 40MG/GM	1	QL (8 gm / 1 day)
VIREAD TAB 150MG	1	QL (1 tab / 1 day)
VIREAD TAB 200MG	1	QL (1 tab / 1 day)
VIREAD TAB 250MG	1	QL (1 tab / 1 day)
<i>zidovudine cap 100 mg</i>	1	QL (6 caps / 1 day)
<i>zidovudine syrup 10 mg/ml</i>	1	QL (60 mL / 1 day)
<i>zidovudine tab 300 mg</i>	1	QL (2 tabs / 1 day)

CMV AGENTS

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

HEPATITIS AGENTS

<i>adefovir dipivoxil tab 10 mg</i>	1	
BARACLUDE SOL	1	QL (21 mL / 1 day)
<i>entecavir tab 0.5 mg</i>	1	QL (1 tab / 1 day)
<i>entecavir tab 1 mg</i>	1	QL (1 tab / 1 day)
<i>lamivudine tab 100 mg (hbv)</i>	1	
MAVYRET TAB 100-40MG	1	PA, QL (3 tabs / 1 day)
PEGASYS INJ	1	PA

Drug Name	Drug Tier	Requirements/Limits
PEGASYS INJ 180MCG/M	1	PA
ribavirin cap 200 mg	1	PA
ribavirin tab 200 mg	1	PA
SOFOS/VELPAT TAB 400-100	1	PA, QL (1 tab / 1 day)

HERPES AGENTS

acyclovir cap 200 mg	1
acyclovir susp 200 mg/5ml	1
acyclovir tab 400 mg	1
acyclovir tab 800 mg	1
famciclovir tab 125 mg	1
famciclovir tab 250 mg	1
famciclovir tab 500 mg	1
valacyclovir hcl tab 1 gm	1
valacyclovir hcl tab 500 mg	1

INFLUENZA AGENTS

oseltamivir phosphate cap 30 mg (base equiv)	1	QL (28 caps / 180 days)
oseltamivir phosphate cap 45 mg (base equiv)	1	QL (14 caps / 180 days)
oseltamivir phosphate cap 75 mg (base equiv)	1	QL (14 caps / 180 days)
oseltamivir phosphate for susp 6 mg/ml (base equiv)	1	QL (180 mL / 180 days), AGE

BETA BLOCKERS

ALPHA-BETA BLOCKERS

carvedilol tab 3.125 mg	1
carvedilol tab 6.25 mg	1
carvedilol tab 12.5 mg	1
carvedilol tab 25 mg	1
labetalol hcl tab 100 mg	1
labetalol hcl tab 200 mg	1
labetalol hcl tab 300 mg	1

BETA BLOCKERS CARDIO-SELECTIVE

atenolol tab 25 mg	1
atenolol tab 50 mg	1
atenolol tab 100 mg	1
bisoprolol fumarate tab 5 mg	1
bisoprolol fumarate tab 10 mg	1
metoprolol succinate tab er 24hr 25 mg (tartrate equiv)	1
metoprolol succinate tab er 24hr 50 mg (tartrate equiv)	1
metoprolol succinate tab er 24hr 100 mg (tartrate equiv)	1

Drug Name	Drug Tier Requirements/Limits
<i>metoprolol succinate tab er 24hr 200 mg (tartrate equiv)</i>	1
<i>metoprolol tartrate tab 25 mg</i>	1
<i>metoprolol tartrate tab 50 mg</i>	1
<i>metoprolol tartrate tab 100 mg</i>	1
BETA BLOCKERS NON-SELECTIVE	
<i>nadolol tab 20 mg</i>	1
<i>nadolol tab 40 mg</i>	1
<i>nadolol tab 80 mg</i>	1
<i>pindolol tab 5 mg</i>	1
<i>pindolol tab 10 mg</i>	1
<i>propranolol hcl cap er 24hr 60 mg</i>	1
<i>propranolol hcl cap er 24hr 80 mg</i>	1
<i>propranolol hcl cap er 24hr 120 mg</i>	1
<i>propranolol hcl cap er 24hr 160 mg</i>	1
<i>propranolol hcl oral soln 20 mg/5ml</i>	1
<i>propranolol hcl oral soln 40 mg/5ml</i>	1
<i>propranolol hcl tab 10 mg</i>	1
<i>propranolol hcl tab 20 mg</i>	1
<i>propranolol hcl tab 40 mg</i>	1
<i>propranolol hcl tab 60 mg</i>	1
<i>propranolol hcl tab 80 mg</i>	1
<i>sorine tab 80mg</i>	1
<i>sorine tab 120mg</i>	1
<i>sorine tab 160mg</i>	1
<i>sorine tab 240mg</i>	1
<i>sotalol hcl (afib/afl) tab 80 mg</i>	1
<i>sotalol hcl (afib/afl) tab 120 mg</i>	1
<i>sotalol hcl (afib/afl) tab 160 mg</i>	1
<i>sotalol hcl tab 80 mg</i>	1
<i>sotalol hcl tab 120 mg</i>	1
<i>sotalol hcl tab 160 mg</i>	1
<i>sotalol hcl tab 240 mg</i>	1
<i>timolol maleate tab 5 mg</i>	1
<i>timolol maleate tab 10 mg</i>	1
<i>timolol maleate tab 20 mg</i>	1

CALCIUM CHANNEL BLOCKERS

CALCIUM CHANNEL BLOCKERS

<i>amlodipine besylate tab 2.5 mg (base equivalent)</i>	1
<i>amlodipine besylate tab 5 mg (base equivalent)</i>	1
<i>amlodipine besylate tab 10 mg (base equivalent)</i>	1
<i>cartia xt cap 120/24hr</i>	1

Drug Name	Drug Tier	Requirements/Limits
<i>cartia xt cap 180/24hr</i>	1	
<i>cartia xt cap 240/24hr</i>	1	
<i>cartia xt cap 300/24hr</i>	1	
<i>dilt-xr cap 120mg</i>	1	
<i>dilt-xr cap 180mg</i>	1	
<i>dilt-xr cap 240mg</i>	1	
<i>diltiazem hcl cap er 12hr 60 mg</i>	1	
<i>diltiazem hcl cap er 12hr 90 mg</i>	1	
<i>diltiazem hcl cap er 12hr 120 mg</i>	1	
<i>diltiazem hcl cap er 24hr 120 mg</i>	1	
<i>diltiazem hcl cap er 24hr 180 mg</i>	1	
<i>diltiazem hcl cap er 24hr 240 mg</i>	1	
<i>diltiazem hcl coated beads cap er 24hr 120 mg</i>	1	
<i>diltiazem hcl coated beads cap er 24hr 180 mg</i>	1	
<i>diltiazem hcl coated beads cap er 24hr 240 mg</i>	1	
<i>diltiazem hcl coated beads cap er 24hr 300 mg</i>	1	
<i>diltiazem hcl coated beads cap er 24hr 360 mg</i>	1	
<i>diltiazem hcl coated beads tab er 24hr 180 mg</i>	1	
<i>diltiazem hcl coated beads tab er 24hr 240 mg</i>	1	
<i>diltiazem hcl coated beads tab er 24hr 300 mg</i>	1	
<i>diltiazem hcl coated beads tab er 24hr 360 mg</i>	1	
<i>diltiazem hcl coated beads tab er 24hr 420 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 120 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 180 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 240 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 300 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 360 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 420 mg</i>	1	
<i>diltiazem hcl tab 30 mg</i>	1	
<i>diltiazem hcl tab 60 mg</i>	1	
<i>diltiazem hcl tab 90 mg</i>	1	

Drug Name	Drug Tier Requirements/Limits
diltiazem hcl tab 120 mg	1
felodipine tab er 24hr 2.5 mg	1
felodipine tab er 24hr 5 mg	1
felodipine tab er 24hr 10 mg	1
matzim la tab 180mg/24	1
matzim la tab 240mg/24	1
matzim la tab 300mg/24	1
matzim la tab 360mg/24	1
matzim la tab 420mg/24	1
nifedipine tab er 24hr 30 mg	1
nifedipine tab er 24hr 60 mg	1
nifedipine tab er 24hr 90 mg	1
nifedipine tab er 24hr osmotic release 30 mg	1
nifedipine tab er 24hr osmotic release 60 mg	1
nifedipine tab er 24hr osmotic release 90 mg	1
taztia xt cap 120mg/24	1
taztia xt cap 180mg/24	1
taztia xt cap 240mg/24	1
taztia xt cap 300mg er	1
taztia xt cap 360mg/24	1
tiadylt cap 120mg/24	1
tiadylt cap 180mg/24	1
tiadylt cap 240mg/24	1
tiadylt cap 300mg/24	1
tiadylt cap 360mg/24	1
tiadylt cap 420mg/24	1
verapamil hcl cap er 24hr 100 mg	1
verapamil hcl cap er 24hr 200 mg	1
verapamil hcl cap er 24hr 300 mg	1
verapamil hcl tab er 120 mg	1
verapamil hcl tab er 180 mg	1
verapamil hcl tab er 240 mg	1

CARDIOTONICS

CARDIAC GLYCOSIDES

digitek tab 0.25mg	1
digitek tab 0.125mg	1
digox tab 0.25mg	1
digox tab 0.125mg	1
digoxin oral soln 0.05 mg/ml	1
digoxin tab 125 mcg (0.125 mg)	1
digoxin tab 250 mcg (0.25 mg)	1
LANOXIN TAB 0.0625MG	1

Drug Name	Drug Tier	Requirements/Limits
CARDIOVASCULAR AGENTS - MISC.		
CARDIOVASCULAR AGENTS MISC. - COMBINATIONS		
ENTRESTO TAB 24-26MG	1	
ENTRESTO TAB 49-51MG	1	
ENTRESTO TAB 97-103MG	1	
PROSTAGLANDIN VASODILATORS		
<i>epoprostenol sodium for inj 0.5 mg</i>	1	PA
<i>epoprostenol sodium for inj 1.5 mg</i>	1	PA
ORENITRAM TAB 0.25MG	1	PA
ORENITRAM TAB 0.125MG	1	PA
ORENITRAM TAB 1MG	1	PA
ORENITRAM TAB 2.5MG	1	PA
ORENITRAM TAB 5MG	1	PA
REMODULIN INJ 1MG/ML	1	PA
REMODULIN INJ 2.5MG/ML	1	PA
REMODULIN INJ 5MG/ML	1	PA
REMODULIN INJ 10MG/ML	1	PA
<i>treprostinil inj soln 20 mg/20ml (1 mg/ml)</i>	1	PA
<i>treprostinil inj soln 50 mg/20ml (2.5 mg/ml)</i>	1	PA
<i>treprostinil inj soln 100 mg/20ml (5 mg/ml)</i>	1	PA
<i>treprostinil inj soln 200 mg/20ml (10 mg/ml)</i>	1	PA
TYVASO REFIL SOL 0.6MG/ML	1	PA, QL (1 ampule / 1 day)
TYVASO SOL 0.6MG/ML	1	PA, QL (1 ampule / 1 day)
TYVASO START SOL 0.6MG/ML	1	PA, QL (1 ampule / 1 day)
PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS		
<i>ambrisentan tab 5 mg</i>	1	PA, QL (1 tab / 1 day)
<i>ambrisentan tab 10 mg</i>	1	PA, QL (1 tab / 1 day)
<i>bosentan tab 62.5 mg</i>	1	PA, QL (2 tabs / 1 day)
<i>bosentan tab 125 mg</i>	1	PA, QL (2 tabs / 1 day)
OPSUMIT TAB 10MG	1	PA, QL (1 tab / 1 day)
PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS		
<i>sildenafil citrate for suspension 10 mg/ml</i>	1	PA, QL (7.5 mL / 1 day)
<i>sildenafil citrate tab 20 mg</i>	1	PA, QL (3 tabs / 1 day)
PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST		
UPTRAVI TAB 200/800	1	PA, QL (1 pack / 28 days)
UPTRAVI TAB 200MCG	1	PA, QL (140 tabs / 28 days)

Drug Name	Drug Tier	Requirements/Limits
UPTRAVI TAB 400MCG	1	PA, QL (60 tabs / 30 days)
UPTRAVI TAB 600MCG	1	PA, QL (60 tabs / 30 days)
UPTRAVI TAB 800MCG	1	PA, QL (60 tabs / 30 days)
UPTRAVI TAB 1000MCG	1	PA, QL (60 tabs / 30 days)
UPTRAVI TAB 1200MCG	1	PA, QL (60 tabs / 30 days)
UPTRAVI TAB 1400MCG	1	PA, QL (60 tabs / 30 days)
UPTRAVI TAB 1600MCG	1	PA, QL (60 tabs / 30 days)

SINUS NODE INHIBITORS

CORLANOR SOL 5MG/5ML	1
CORLANOR TAB 5MG	1
CORLANOR TAB 7.5MG	1

CEPHALOSPORINS

CEPHALOSPORIN COMBINATIONS

ZERBAXA INJ 1.5GM	1	PA
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CEPHALOSPORINS - 1ST GENERATION

cefadroxil cap 500 mg	1
cefadroxil for susp 250 mg/5ml	1
cefadroxil for susp 500 mg/5ml	1
cefadroxil tab 1 gm	1
cephalexin cap 250 mg	1
cephalexin cap 500 mg	1
cephalexin cap 750 mg	1
cephalexin for susp 125 mg/5ml	1
cephalexin for susp 250 mg/5ml	1
cephalexin tab 250 mg	1
cephalexin tab 500 mg	1

CEPHALOSPORINS - 2ND GENERATION

cefprozil for susp 125 mg/5ml	1
cefprozil for susp 250 mg/5ml	1
cefprozil tab 250 mg	1
cefprozil tab 500 mg	1
cefuroxime axetil tab 250 mg	1
cefuroxime axetil tab 500 mg	1

CEPHALOSPORINS - 3RD GENERATION

cefdinir cap 300 mg	1
cefdinir for susp 125 mg/5ml	1
cefdinir for susp 250 mg/5ml	1
ceftriaxone sodium for inj 1 gm	1

Drug Name	Drug Tier	Requirements/Limits
<i>ceftriaxone sodium for inj 2 gm</i>	1	
<i>ceftriaxone sodium for inj 250 mg</i>	1	
<i>ceftriaxone sodium for inj 500 mg</i>	1	

CHEMICALS

LIQUIDS

ALMOND OIL	1	
ALMOND OIL SWEET	1	
ALMOND OIL SWEET	1	OTC
BASE G ALMON OIL SWEET	1	
CASTOR OIL	1	
CASTOR OIL	1	OTC
HM CASTOR OIL	1	OTC
LINSEED OIL RAW	1	
OLIVE OIL	1	
OLIVE OIL	1	OTC
QC CASTOR OIL	1	OTC
QC SWEET OIL	1	OTC
SM SWEET OIL	1	OTC
SWEET OIL	1	OTC

CONTRACEPTIVES

COMBINATION CONTRACEPTIVES - ORAL

<i>afirmelle tab 0.1-0.02</i>	1	QL (1 tab / 1 day)
<i>altavera tab</i>	1	QL (1 tab / 1 day)
<i>alyacen tab 1/35</i>	1	QL (1 tab / 1 day)
<i>alyacen tab 7/7/7</i>	1	QL (1 tab / 1 day)
<i>amethia tab</i>	1	QL (1 tab / 1 day)
<i>apri tab</i>	1	QL (1 tab / 1 day)
<i>aranelle tab</i>	1	QL (1 tab / 1 day)
<i>ashlyna tab</i>	1	QL (1 tab / 1 day)
<i>aubra eq tab 0.1-0.02</i>	1	QL (1 tab / 1 day)
<i>aubra tab 0.1-0.02</i>	1	QL (1 tab / 1 day)
<i>aurovela fe tab 1.5/30</i>	1	QL (1 tab / 1 day)
<i>aurovela fe tab 1/20</i>	1	QL (1 tab / 1 day)
<i>aurovela tab 1.5/30</i>	1	QL (1 tab / 1 day)
<i>aurovela tab 1/20</i>	1	QL (1 tab / 1 day)
<i>aviane tab</i>	1	QL (1 tab / 1 day)
<i>ayuna tab</i>	1	QL (1 tab / 1 day)
<i>azurette tab</i>	1	QL (1 tab / 1 day)
<i>azurette tab 28 day</i>	1	QL (1 tab / 1 day)
<i>balziva tab</i>	1	QL (1 tab / 1 day)
<i>blisovi fe tab 1.5/30</i>	1	QL (1 tab / 1 day)
<i>blisovi fe tab 1/20</i>	1	QL (1 tab / 1 day)
<i>briellyn tab</i>	1	QL (1 tab / 1 day)
<i>camrese tab</i>	1	QL (1 tab / 1 day)

Drug Name	Drug Tier	Requirements/Limits
<i>caziant pak</i>	1	QL (1 tab / 1 day)
<i>chateal eq tab 0.15/30</i>	1	QL (1 tab / 1 day)
<i>chateal tab 0.15/30</i>	1	QL (1 tab / 1 day)
<i>cryselle-28 tab 28 tabs</i>	1	QL (1 tab / 1 day)
<i>cyclafem tab 1/35</i>	1	QL (1 tab / 1 day)
<i>cyclafem tab 7/7/7</i>	1	QL (1 tab / 1 day)
<i>cyred eq tab</i>	1	QL (1 tab / 1 day)
<i>cyred tab</i>	1	QL (1 tab / 1 day)
<i>dasetta tab 1/35</i>	1	QL (1 tab / 1 day)
<i>dasetta tab 7/7/7</i>	1	QL (1 tab / 1 day)
<i>daysee tab</i>	1	QL (1 tab / 1 day)
<i>delyla tab 0.1-0.02</i>	1	QL (1 tab / 1 day)
<i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	1	QL (1 tab / 1 day)
<i>desogestrel & ethynodiol estradiol tab 0.15 mg-30 mcg</i>	1	QL (1 tab / 1 day)
<i>drospirenone-ethynodiol estradiol tab 3-0.02 mg</i>	1	QL (1 tab / 1 day)
<i>drospirenone-ethynodiol estradiol tab 3-0.03 mg</i>	1	QL (1 tab / 1 day)
<i>elinest tab</i>	1	QL (1 tab / 1 day)
<i>emoquette tab</i>	1	QL (1 tab / 1 day)
<i>enpresse-28 tab</i>	1	QL (1 tab / 1 day)
<i>enskyce tab</i>	1	QL (1 tab / 1 day)
<i>estarylla tab 0.25-35</i>	1	QL (1 tab / 1 day)
<i>ethynodiol diacetate & ethynodiol estradiol tab 1 mg-35 mcg</i>	1	QL (1 tab / 1 day)
<i>ethynodiol diacetate & ethynodiol estradiol tab 1 mg-50 mcg</i>	1	QL (1 tab / 1 day)
<i>falmina tab</i>	1	QL (1 tab / 1 day)
<i>femynor tab 0.25-35</i>	1	QL (1 tab / 1 day)
<i>hailey fe tab 1.5/30</i>	1	QL (1 tab / 1 day)
<i>hailey fe tab 1/20</i>	1	QL (1 tab / 1 day)
<i>hailey tab 1.5/30</i>	1	QL (1 tab / 1 day)
<i>isibloom tab</i>	1	QL (1 tab / 1 day)
<i>jaimiess tab</i>	1	QL (1 tab / 1 day)
<i>jasmiel tab 3-0.02mg</i>	1	QL (1 tab / 1 day)
<i>juleber tab</i>	1	QL (1 tab / 1 day)
<i>junel 1.5/30 tab</i>	1	QL (1 tab / 1 day)
<i>junel 1/20 tab</i>	1	QL (1 tab / 1 day)
<i>junel fe tab 1.5/30</i>	1	QL (1 tab / 1 day)
<i>junel fe tab 1/20</i>	1	QL (1 tab / 1 day)
<i>kalliga tab</i>	1	QL (1 tab / 1 day)
<i>kariva tab 28 day</i>	1	QL (1 tab / 1 day)
<i>kelnor 1/50 tab</i>	1	QL (1 tab / 1 day)
<i>kelnor tab 1/35</i>	1	QL (1 tab / 1 day)

Drug Name	Drug Tier	Requirements/Limits
<i>kurvelo tab 0.15/30</i>	1	QL (1 tab / 1 day)
<i>larin fe tab 1.5/30</i>	1	QL (1 tab / 1 day)
<i>larin fe tab 1/20</i>	1	QL (1 tab / 1 day)
<i>larin tab 1.5/30</i>	1	QL (1 tab / 1 day)
<i>larin tab 1/20</i>	1	QL (1 tab / 1 day)
<i>larissa tab</i>	1	QL (1 tab / 1 day)
<i>leena tab</i>	1	QL (1 tab / 1 day)
<i>lessina tab</i>	1	QL (1 tab / 1 day)
<i>levonest tab</i>	1	QL (1 tab / 1 day)
<i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	1	QL (1 tab / 1 day)
<i>levonorgestrel & ethynodiol-diol tab 0.1 mg-20 mcg</i>	1	QL (1 tab / 1 day)
<i>levonorgestrel & ethynodiol-diol tab 0.15 mg-30 mcg</i>	1	QL (1 tab / 1 day)
<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	1	QL (1 tab / 1 day)
<i>levora-28 tab 0.15/30</i>	1	QL (1 tab / 1 day)
<i>lillow tab 0.15/30</i>	1	QL (1 tab / 1 day)
<i>lo-zumandimi tab 3-0.02mg</i>	1	QL (1 tab / 1 day)
<i>loestrin 21 tab 1.5/30</i>	1	QL (1 tab / 1 day)
<i>loestrin fe tab 1.5/30</i>	1	QL (1 tab / 1 day)
<i>loestrin fe tab 1/20</i>	1	QL (1 tab / 1 day)
<i>loestrin tab 1/20-21</i>	1	QL (1 tab / 1 day)
<i>loryna tab 3-0.02mg</i>	1	QL (1 tab / 1 day)
<i>low-ogestrel tab</i>	1	QL (1 tab / 1 day)
<i>lutera tab</i>	1	QL (1 tab / 1 day)
<i>marlissa tab 0.15/30</i>	1	QL (1 tab / 1 day)
<i>microgestin tab 1.5/30</i>	1	QL (1 tab / 1 day)
<i>microgestin tab 1/20</i>	1	QL (1 tab / 1 day)
<i>microgestin tab fe1.5/30</i>	1	QL (1 tab / 1 day)
<i>microgestin tab fe 1/20</i>	1	QL (1 tab / 1 day)
<i>milu tab 0.25/35</i>	1	QL (1 tab / 1 day)
<i>mono-linyah tab 0.25-35</i>	1	QL (1 tab / 1 day)
<i>necon tab 0.5/35</i>	1	QL (1 tab / 1 day)
<i>nikki tab 3-0.02mg</i>	1	QL (1 tab / 1 day)
<i>norethindrone ace & ethynodiol-diol tab 1 mg-20 mcg</i>	1	QL (1 tab / 1 day)
<i>norethindrone ace & ethynodiol-diol tab 1.5 mg-30 mcg</i>	1	QL (1 tab / 1 day)
<i>norethindrone ace & ethynodiol-fe tab 1 mg-20 mcg</i>	1	QL (1 tab / 1 day)
<i>norethindrone ace & ethynodiol-fe tab 1.5 mg-30 mcg</i>	1	QL (1 tab / 1 day)
<i>norgestimate & ethynodiol-diol tab 0.25 mg-35 mcg</i>	1	QL (1 tab / 1 day)

Drug Name	Drug Tier	Requirements/Limits
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	1	QL (1 tab / 1 day)
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	1	QL (1 tab / 1 day)
<i>nortrel tab 0.5/35</i>	1	QL (1 tab / 1 day)
<i>nortrel tab 1/35</i>	1	QL (1 tab / 1 day)
<i>nortrel tab 7/7/7</i>	1	QL (1 tab / 1 day)
<i>nylia tab 7/7/7</i>	1	QL (1 tab / 1 day)
<i>nymyo tab 0.25-35</i>	1	QL (1 tab / 1 day)
<i>ocella tab 3-0.03mg</i>	1	QL (1 tab / 1 day)
<i>orsythia tab</i>	1	QL (1 tab / 1 day)
<i>philith tab 0.4-35</i>	1	QL (1 tab / 1 day)
<i>pimtrea tab</i>	1	QL (1 tab / 1 day)
<i>pirmella tab 1/35</i>	1	QL (1 tab / 1 day)
<i>pirmella tab 7/7/7</i>	1	QL (1 tab / 1 day)
<i>portia-28 tab</i>	1	QL (1 tab / 1 day)
<i>previfem tab</i>	1	QL (1 tab / 1 day)
<i>reclipsen tab</i>	1	QL (1 tab / 1 day)
<i>simliya tab 28 day</i>	1	QL (1 tab / 1 day)
<i>simpesse tab</i>	1	QL (1 tab / 1 day)
<i>sprintec 28 tab 28 day</i>	1	QL (1 tab / 1 day)
<i>sronyx tab</i>	1	QL (1 tab / 1 day)
<i>syeda tab 3-0.03mg</i>	1	QL (1 tab / 1 day)
<i>tarina fe tab 1/20</i>	1	QL (1 tab / 1 day)
<i>tarina fe tab 1/20 eq</i>	1	QL (1 tab / 1 day)
<i>tri femynor tab</i>	1	QL (1 tab / 1 day)
<i>tri-estaryll tab</i>	1	QL (1 tab / 1 day)
<i>tri-linyah tab</i>	1	QL (1 tab / 1 day)
<i>tri-lo tab estaryll</i>	1	QL (1 tab / 1 day)
<i>tri-lo- tab marzia</i>	1	QL (1 tab / 1 day)
<i>tri-lo- tab sprintec</i>	1	QL (1 tab / 1 day)
<i>tri-lo-mili tab</i>	1	QL (1 tab / 1 day)
<i>tri-mili tab</i>	1	QL (1 tab / 1 day)
<i>tri-nymyo tab</i>	1	QL (1 tab / 1 day)
<i>tri-previfem tab</i>	1	QL (1 tab / 1 day)
<i>tri-sprintec tab</i>	1	QL (1 tab / 1 day)
<i>tri-vylibra tab</i>	1	QL (1 tab / 1 day)
<i>tri-vylibra tab lo</i>	1	QL (1 tab / 1 day)
<i>trivora-28 tab</i>	1	QL (1 tab / 1 day)
<i>velivet pak</i>	1	QL (1 tab / 1 day)
<i>vestura tab 3-0.02mg</i>	1	QL (1 tab / 1 day)
<i>vienna tab 0.1-20</i>	1	QL (1 tab / 1 day)
<i>vioresle tab</i>	1	QL (1 tab / 1 day)
<i>volnea tab</i>	1	QL (1 tab / 1 day)
<i>vyfemla tab 0.4-35</i>	1	QL (1 tab / 1 day)

Drug Name	Drug Tier	Requirements/Limits
<i>vylitra tab 0.25-35</i>	1	QL (1 tab / 1 day)
<i>wera tab 0.5/35</i>	1	QL (1 tab / 1 day)
<i>zarah tab 3-0.03mg</i>	1	QL (1 tab / 1 day)
<i>zovia 1/35 tab</i>	1	QL (1 tab / 1 day)
<i>zovia 1/35e tab</i>	1	QL (1 tab / 1 day)
<i>zumandimine tab 3-0.03mg</i>	1	QL (1 tab / 1 day)
COMBINATION CONTRACEPTIVES - TRANSDERMAL		
<i>xulane dis 150-35</i>	1	QL (39 patches / 364 days)
<i>zafemy dis 150/35</i>	1	QL (39 patches / 364 days)
COMBINATION CONTRACEPTIVES - VAGINAL		
<i>eluryng mis</i>	1	QL (13 rings / 364 days)
<i>etonogestrel-ethynodiol va ring 0.120-0.015 mg/24hr</i>	1	QL (13 rings / 364 days)
COPPER CONTRACEPTIVES - IUD		
<i>PARAGARD IUD T380A</i>	1	QL (1 IUD in lifetime)
EMERGENCY CONTRACEPTIVES		
<i>aftera tab 1.5mg</i>	1	QL (1 tab / 30 days), OTC
<i>afterpill tab 1.5mg</i>	1	QL (1 tab / 30 days), OTC
<i>econtra ez tab 1.5mg</i>	1	QL (1 tab / 30 days), OTC
<i>econtra os tab 1.5mg</i>	1	QL (1 tab / 30 days), OTC
<i>ELLA TAB 30MG</i>	1	QL (2 tabs / year)
<i>levonorgestrel tab 1.5 mg</i>	1	QL (1 tab / 30 days), OTC
<i>my choice tab 1.5mg</i>	1	QL (1 tab / 30 days), OTC
<i>my way tab 1.5mg</i>	1	QL (1 tab / 30 days), OTC
<i>new day tab 1.5mg</i>	1	QL (1 tab / 30 days), OTC
<i>opcicon tab 1.5mg</i>	1	QL (1 tab / 30 days), OTC
<i>option 2 tab 1.5mg</i>	1	QL (1 tab / 30 days), OTC
<i>preventeza tab 1.5mg</i>	1	QL (1 tab / 30 days), OTC
<i>react tab 1.5mg</i>	1	QL (1 tab / 30 days), OTC
<i>take action tab 1.5mg</i>	1	QL (1 tab / 30 days), OTC

Drug Name	Drug Tier	Requirements/Limits
PROGESTIN CONTRACEPTIVES - IMPLANTS		
NEXPLANON IMP 68MG	1	QL (1 implant in lifetime)
PROGESTIN CONTRACEPTIVES - INJECTABLE		
medroxyprogesterone acetate im susp 150 mg/ml	1	QL (5 injections / 364 days)
medroxyprogesterone acetate im susp prefilled syr 150 mg/ml	1	QL (5 injections / 364 days)
PROGESTIN CONTRACEPTIVES - IUD		
KYLEENA IUD 19.5MG	1	QL (1 IUD in lifetime)
LILETTA IUD 52MG	1	QL (1 IUD in lifetime)
MIRENA IUD SYSTEM	1	QL (1 IUD in lifetime)
SKYLA IUD 13.5MG	1	QL (1 IUD in lifetime)
PROGESTIN CONTRACEPTIVES - ORAL		
camila tab 0.35mg	1	QL (1 tab / 1 day)
deblitane tab 0.35mg	1	QL (1 tab / 1 day)
errin tab 0.35mg	1	QL (1 tab / 1 day)
heather tab 0.35mg	1	QL (1 tab / 1 day)
incassia tab 0.35mg	1	QL (1 tab / 1 day)
jencycla tab 0.35mg	1	QL (1 tab / 1 day)
lyleq tab 0.35mg	1	QL (1 tab / 1 day)
lyza tab 0.35mg	1	QL (1 tab / 1 day)
nora-be tab 0.35mg	1	QL (1 tab / 1 day)
norethindrone tab 0.35 mg	1	QL (1 tab / 1 day)
norlyda tab 0.35mg	1	QL (1 tab / 1 day)
norlyroc tab 0.35mg	1	QL (1 tab / 1 day)
sharobel tab 0.35mg	1	QL (1 tab / 1 day)
tulana tab 0.35mg	1	QL (1 tab / 1 day)
CORTICOSTEROIDS		
GLUCOCORTICOSTEROIDS		
budesonide delayed release particles cap 3 mg	1	
decadron tab 0.5mg	1	
decadron tab 0.75mg	1	
decadron tab 4mg	1	
decadron tab 6mg	1	
dexamethasone elixir 0.5 mg/5ml	1	
dexamethasone soln 0.5 mg/5ml	1	
dexamethasone tab 0.5 mg	1	
dexamethasone tab 0.75 mg	1	
dexamethasone tab 1 mg	1	
dexamethasone tab 1.5 mg	1	
dexamethasone tab 2 mg	1	
dexamethasone tab 4 mg	1	

Drug Name	Drug Tier	Requirements/Limits
dexamethasone tab 6 mg	1	
hydrocortisone tab 5 mg	1	
hydrocortisone tab 10 mg	1	
hydrocortisone tab 20 mg	1	
MEDROL TAB 2MG	1	
methylprednisolone tab 4 mg	1	
methylprednisolone tab 8 mg	1	
methylprednisolone tab 16 mg	1	
methylprednisolone tab 32 mg	1	
methylprednisolone tab therapy pack 4 mg (21)	1	
prednisolone sod phos orally disintegr tab 10 mg (base eq)	1	
prednisolone sod phos orally disintegr tab 15 mg (base eq)	1	
prednisolone sod phos orally disintegr tab 30 mg (base eq)	1	
prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base)	1	
prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)	1	
prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)	1	
prednisolone syrup 15 mg/5ml (usp solution equivalent)	1	
prednisone oral soln 5 mg/5ml	1	
prednisone tab 1 mg	1	
prednisone tab 2.5 mg	1	
prednisone tab 5 mg	1	
prednisone tab 10 mg	1	
prednisone tab 20 mg	1	
prednisone tab 50 mg	1	
prednisone tab therapy pack 5 mg (21)	1	
prednisone tab therapy pack 5 mg (48)	1	
prednisone tab therapy pack 10 mg (21)	1	
prednisone tab therapy pack 10 mg (48)	1	

MINERALOCORTICOIDS

fludrocortisone acetate tab 0.1 mg	1
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COUGH/COLD/ALLERGY

ANTITUSSIVES

benzonatate cap 100 mg	1
benzonatate cap 200 mg	1
hydrocodone w/ homatropine syrup 5-1.5 mg/5ml	1 QL (30 mL / 1 day)
hydrocodone w/ homatropine tab 5-1.5 mg	1 QL (6 tabs / 1 day)

Drug Name	Drug Tier	Requirements/Limits
hydromet syrup 5-1.5/5	1	QL (30 mL / 1 day)
COUGH/COLD/ALLERGY COMBINATIONS		
alavert alrg tab /sinus	1	OTC
all day alrg tab 5-120mg	1	OTC
aller-tec d tab 5-120mg	1	OTC
aller/conges tab 10-240mg	1	OTC
allerclear d tab 5-120mg	1	OTC
allerclear d tab 10-240mg	1	OTC
allergy d tab 5-120mg	1	OTC
allergy d tab 60-120mg	1	OTC
allergy rel/ tab deconges	1	OTC
allergy relf tab 5-120mg	1	OTC
allergy relf tab 5/120mg	1	OTC
allergy relf tab 10-240mg	1	OTC
allergy relf tab /nsl dec	1	OTC
allergy relf tab d	1	OTC
allergy relf tab d12	1	OTC
allergy relf tab d-24	1	OTC
allergy relf tab deconges	1	OTC
allergy-d tab 5-120mg	1	OTC
allergy-d tab 12 hour	1	OTC
allergy/cong tab 5-120mg	1	OTC
allergy/cong tab 60-120mg	1	OTC
allgy comp-d tab 5-120mg	1	OTC
allrgy d-12 tab 5-120mg	1	OTC
allrgy rel d tab 10-240mg	1	OTC
allrgy rlef tab 5-120mg	1	OTC
allrgy rlf-d tab 5-120mg	1	OTC
allrgy rlf-d tab 10-240mg	1	OTC
allrgy/nasal tab 10-240mg	1	OTC
altarussin syrup -pe	1	OTC
altarussn dm syrup 100-10/5	1	OTC
antihistamin tab 60-120mg	1	OTC
biocotron liq 100-10/5	1	OTC
cetirizine-pseudoephedrine tab er 12hr 5-120 mg	1	OTC
cgh cong dm liq 5-100/5	1	OTC
chest conges syrup rel dm	1	OTC
childrens liq 5-100mg	1	OTC
CODITUSSIN LIQ AC	1	QL (60 mL / 1 day), OTC
cold/allergy elx children	1	OTC
cong/cough liq 5-100/5	1	OTC
cough child liq 5-100/5	1	OTC
cough/chest liq 20-400	1	OTC
cough/chest liq dm child	1	OTC

Drug Name	Drug Tier	Requirements/Limits
cough/chest syrup dm	1	OTC
cvs mucus d tab 60-600mg	1	OTC
cvstussin dm liq 20-400mg	1	OTC
delsym cough liq congs dm	1	OTC
dextromethorphan-guaifenesin liquid 10-100 mg/5ml	1	OTC
dextromethorphan-guaifenesin syrup 10-100 mg/5ml	1	OTC
dextromethorphan-guaifenesin tab er 12hr 60-1200 mg	1	OTC
diabetic tus liq children	1	OTC
diabetic tus liq dm	1	OTC
diabetic tus liq max st	1	OTC
dm max adult liq 20-400	1	OTC
eq mucus d tab 60-600mg	1	OTC
eq mucus dm tab 60-1200	1	OTC
eq tussin dm liq max	1	OTC
eq tussin dm syrup cgh/chst	1	OTC
eql allergy tab 10-240mg	1	OTC
eql mucus-dm tab 30-600cr	1	OTC
eql tussin syrup dm	1	OTC
fexofenadine-pseudoephedrine tab er 12hr 60-120 mg	1	OTC
fexofenadine-pseudoephedrine tab er 24hr 180-240 mg	1	OTC
g tussin ac liq 100-10/5	1	QL (60 mL / 1 day), OTC
geri-tussin syrup dm	1	OTC
giltuss cgh liq & chest	1	OTC
giltuss diab liq cgh/cold	1	OTC
giltuss hon liq chg/chst	1	OTC
gnp mucus liq rlf dm	1	OTC
gnp tussin liq dm	1	OTC
gnp tussin liq dm cough	1	OTC
guaiasorb dm liq 100-10/5	1	OTC
guaiatuss ac syrup 100-10/5	1	QL (60 mL / 1 day), OTC
guaicon dms syrup 100-10/5	1	OTC
guaifenesin syrup 100-10/5	1	QL (60 mL / 1 day), OTC
guaifenesin-codeine soln 100-10 mg/5ml	1	QL (60 mL / 1 day), OTC
hm mucus dm tab 60-1200	1	OTC
hm mucus rel liq cgh chld	1	OTC
hm tussin liq adlt dm	1	OTC
hm tussin liq dm max	1	OTC
12hr allergy tab 60-120mg	1	OTC
intense coug liq reliever	1	OTC
lorata-dine tab d 24hr	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>loratadine d tab 5-120mg</i>	1	OTC
<i>loratadine-d tab 5-120mg</i>	1	OTC
<i>loratadine-d tab 10-240mg</i>	1	OTC
M-CLEAR WC LIQ 100-6.3	1	QL (90 mL / 1 day), OTC
<i>maxi-tuss ac sol</i>	1	QL (60 mL / 1 day), OTC
<i>maxi-tuss g liq</i>	1	OTC
<i>maxi-tuss liq gmx</i>	1	OTC
<i>medi-tuss dm liq dbl str</i>	1	OTC
<i>medi-tussin syrup dm</i>	1	OTC
<i>muc/cgh relf liq 5-100mg</i>	1	OTC
MUCINEX CGH GRA 5-100MG	1	OTC
<i>mucinex cgh liq 5-100mg</i>	1	OTC
MUCINEX D TAB 60-600MG	1	OTC
MUCINEX D TAB 120-1200	1	OTC
<i>mucinex dm liq 20-400</i>	1	OTC
<i>mucinex dm liq max str</i>	1	OTC
MUCINEX DM TAB 30-600ER	1	OTC
MUCINEX DM TAB 60-1200	1	OTC
<i>mucinex liq freeform</i>	1	OTC
<i>mucus d max tab 120-1200</i>	1	OTC
<i>mucus d tab 60-600mg</i>	1	OTC
<i>mucus d tab 120/1200</i>	1	OTC
<i>mucus dm max tab 60-1200</i>	1	OTC
<i>mucus dm tab 30-600mg</i>	1	OTC
<i>mucus dm tab 60-1200</i>	1	OTC
<i>mucus rel dm liq</i>	1	OTC
<i>mucus rel dm liq 5-100/5</i>	1	OTC
<i>mucus rel dm liq 20-400mg</i>	1	OTC
<i>mucus relf d tab 60-600mg</i>	1	OTC
<i>mucus relief liq 5-100mg</i>	1	OTC
<i>mucus relief tab 30-600er</i>	1	OTC
<i>mucus relief tab 30-600mg</i>	1	OTC
<i>mucus relief tab 60-600mg</i>	1	OTC
<i>mucus relief tab 60-1200</i>	1	OTC
<i>mucus rlf d tab 60-600mg</i>	1	OTC
<i>mucus rlf d tab 120-1200</i>	1	OTC
<i>mucus rlf dm liq 5-100/5</i>	1	OTC
<i>mucus rlf dm liq 20-400mg</i>	1	OTC
<i>mucus rlf dm tab 30-600er</i>	1	OTC
<i>mucus-d tab 60-600mg</i>	1	OTC
<i>mucus-dm max tab 60-1200</i>	1	OTC
<i>mucus-dm tab 30-600mg</i>	1	OTC
<i>mucus/cough liq 5-100mg</i>	1	OTC
<i>prometh vc syrup 6.25-5/5</i>	1	
<i>prometh vc/ syrup codeine</i>	1	QL (30 mL / 1 day)

Drug Name	Drug Tier	Requirements/Limits
<i>promethazine & phenylephrine syrup 6.25-5 mg/5ml</i>	1	
<i>promethazine w/ codeine syrup 6.25-10 mg/5ml</i>	1	QL (30 mL / 1 day)
<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	1	
<i>promethazine-phenylephrine-codeine syrup 6.25-5-10 mg/5ml</i>	1	QL (30 mL / 1 day)
<i>pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml</i>	1	
<i>pseudoephedrine-guaifenesin tab er 12hr 60-600 mg</i>	1	OTC
<i>pseudoephedrine-guaifenesin tab er 12hr 120-1200 mg</i>	1	OTC
<i>px tussin dm liq 100-10/5</i>	1	OTC
<i>ra cetiri-d tab 5-120mg</i>	1	OTC
<i>ra lorata-d tab 24 hour</i>	1	OTC
<i>ra tussin dm liq 100-10/5</i>	1	OTC
<i>ra tussin liq dm max</i>	1	OTC
<i>robafen dm liq 10-100/5</i>	1	OTC
<i>robafen dm liq 10-100mg</i>	1	OTC
<i>robafen dm liq cough</i>	1	OTC
<i>robitussin liq 20-400</i>	1	OTC
<i>robitussin liq 20-400mg</i>	1	OTC
<i>rynex pse liq</i>	1	OTC
<i>siltussin dm liq das</i>	1	OTC
<i>siltussin-dm syp alc free</i>	1	OTC
<i>sm tussin cf liq</i>	1	OTC
<i>sm tussin dm liq 5-100/5</i>	1	OTC
<i>sm tussin dm syp 100-10/5</i>	1	OTC
<i>sm tussin syp dm</i>	1	OTC
<i>sorbugen nr liq</i>	1	OTC
<i>TUSNEL C SYP</i>	1	QL (40 mL / 1 day), OTC
<i>tusnel diabt liq 10-100/5</i>	1	OTC
<i>tussin adult liq cgh/cong</i>	1	OTC
<i>tussin cough liq 10-100/5</i>	1	OTC
<i>tussin dm liq</i>	1	OTC
<i>tussin dm liq 5-100mg</i>	1	OTC
<i>tussin dm liq 10-100/5</i>	1	OTC
<i>tussin dm liq 10-100mg</i>	1	OTC
<i>tussin dm liq 20-400mg</i>	1	OTC
<i>tussin dm liq 20-400ml</i>	1	OTC
<i>tussin dm liq 100-10/5</i>	1	OTC
<i>tussin dm mx liq</i>	1	OTC
<i>tussin dm mx liq 5-100/5</i>	1	OTC
<i>tussin dm syp 100-10/5</i>	1	OTC
<i>VCKS DAYQUIL LIQ MUCUS DM</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>virtussin ac liq 100-10/5</i>	1	QL (60 mL / 1 day), OTC
<i>virtussin ac sol 100-10/5</i>	1	QL (60 mL / 1 day), OTC
VIRTUSSIN SOL DAC	1	QL (40 mL / 1 day), OTC
<i>wal-fex d tab 12 hour</i>	1	OTC
<i>wal-fex d tab 24 hour</i>	1	OTC
<i>wal-itin d tab 5-120mg</i>	1	OTC
<i>wal-itin d tab 10-240mg</i>	1	OTC
<i>wal-itin d tab 24 hour</i>	1	OTC
<i>wal-tap elx cld/alle</i>	1	OTC
<i>wal-tussin liq 10-100/5</i>	1	OTC
<i>wal-tussin liq cf</i>	1	OTC
<i>wal-tussin syrup dm</i>	1	OTC
<i>wal-zyr d tab 5-120mg</i>	1	OTC

EXPECTORANTS

<i>altarussin syrup 100/5ml</i>	1	OTC
<i>buckleys liq chest</i>	1	OTC
<i>chest conges liq childrens</i>	1	OTC
<i>chest conges syrup 100/5ml</i>	1	OTC
<i>chest conges tab 400mg</i>	1	OTC
<i>coughtab tab 200mg</i>	1	OTC
<i>cvs mucus er tab 600mg</i>	1	OTC
<i>cvs mucus tab 1200 er</i>	1	OTC
<i>diabetic tus liq 100/5ml</i>	1	OTC
<i>diabtc tussn syrup 100/5ml</i>	1	OTC
<i>eq 12 hr muc tab 600mg</i>	1	OTC
<i>eq 12 hr muc tab 1200mg</i>	1	OTC
<i>eq mucus er tab 600mg</i>	1	OTC
<i>eql mucus-er tab 1200mg</i>	1	OTC
<i>geri-tussin liq 100/5</i>	1	OTC
GILTUSS EX LIQ MAX STR	1	OTC
<i>gnp mucus er tab 600mg</i>	1	OTC
<i>gnp mucus er tab 1200mg</i>	1	OTC
<i>guaifenesin liquid 100 mg/5ml</i>	1	OTC
<i>guaifenesin tab 200 mg</i>	1	OTC
<i>guaifenesin tab 400 mg</i>	1	OTC
<i>medifin 400 tab 400mg</i>	1	OTC
<i>mucinex fast liq cst cong</i>	1	OTC
MUCINEX TAB 1200MG	1	OTC
MUCINEX/KIDS GRA 100MG	1	OTC
<i>mucosa tab 400mg</i>	1	OTC
<i>mucus er max tab 1200mg</i>	1	OTC
<i>mucus relief liq 100/5ml</i>	1	OTC
<i>mucus relief liq 400/20ml</i>	1	OTC
<i>mucus relief tab 200mg</i>	1	OTC
<i>mucus relief tab 400mg</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
mucus relief tab 600mg	1	OTC
mucus relief tab 600mg er	1	OTC
mucus relief tab 1200 er	1	OTC
mucus relief tab 1200mg	1	OTC
mucus+chst liq 100/5ml	1	OTC
mucus+chst liq 200/10ml	1	OTC
pharbinex tab 400mg	1	OTC
px tussin sol 100/5ml	1	OTC
qc medifin liq mucus rl	1	OTC
ra tussin syrup 100/5ml	1	OTC
refenesen tab 400mg	1	OTC
robafen liq 200/10ml	1	OTC
sb cgh contr syrup 100/5ml	1	OTC
sb coughtab tab 200mg	1	OTC
scot-tussin liq expct sf	1	OTC
siltuss das liq 100/5ml	1	OTC
siltussin sa syrup 100/5ml	1	OTC
sm mucus rel tab 600mg er	1	OTC
sm mucus rel tab 1200 er	1	OTC
tab tussin tab 400mg	1	OTC
tusnel-ex liq 100/5ml	1	OTC
tussin adult liq 100/5ml	1	OTC
tussin chest syrup 100/5ml	1	OTC
tussin mucus liq 100/5ml	1	OTC
tussin mucus liq 200/10ml	1	OTC
wal-tussin liq 100/5ml	1	OTC
xpect tab 400mg	1	OTC

MISC. RESPIRATORY INHALANTS

simply salin aer baby	1	OTC
sodium chloride aero soln 0.9%	1	OTC
sodium chloride soln nebu 0.9%	1	
sodium chloride soln nebu 3%	1	
sodium chloride soln nebu 7%	1	
sodium chloride soln nebu 10%	1	

DERMATOLOGICALS

ACNE PRODUCTS

accutane cap 20mg	1	PA
accutane cap 30mg	1	PA
accutane cap 40mg	1	PA
acne cleanse cre cvs cont	1	OTC
acne control cre clns 10%	1	OTC
acne foaming liq wash 10%	1	OTC
acne max str cre 10%	1	OTC
acne medicat gel 2.5%	1	OTC

Drug Name	Drug Tier	Requirements/Limits
acne medicat gel 5%	1	OTC
acne medicat gel 10%	1	OTC
acne treatmn gel 10%	1	OTC
acne-clear gel 10%	1	OTC
amnesteem cap 10mg	1	PA
amnesteem cap 20mg	1	PA
amnesteem cap 40mg	1	PA
avita cre 0.025%	1	PA
avita gel 0.025%	1	PA
benzepro liq creamy	1	
benzoyl per liq 5% wash	1	OTC
benzoyl per liq 10% wash	1	OTC
benzoyl peroxide gel 2.5%	1	OTC
benzoyl peroxide gel 5%	1	OTC
benzoyl peroxide gel 8%	1	
benzoyl peroxide gel 10%	1	OTC
bp gel gel 5%	1	OTC
bp gel gel 10%	1	OTC
cerave acne liq foaming	1	OTC
claravis cap 10mg	1	PA
claravis cap 20mg	1	PA
claravis cap 30mg	1	PA
claravis cap 40mg	1	PA
3-in-1 clean liq 5%	1	OTC
clean&clear cre 10%	1	OTC
clearasil cre acne	1	OTC
clearasil cre spot 10%	1	OTC
clearskin cre 10%	1	OTC
clindamycin phosphate gel 1%	1	
clindamycin phosphate lotion 1%	1	QL (60 mL / 25 days)
clindamycin phosphate soln 1%	1	QL (60 mL / 25 days)
creamy face liq wsh 4%	1	OTC
cvs acne cre 10%	1	OTC
erythromycin gel 2%	1	QL (60 gm / 25 days)
erythromycin soln 2%	1	QL (60 mL / 25 days)
foaming face liq wsh 10%	1	OTC
isotretinoin cap 10 mg	1	PA
isotretinoin cap 20 mg	1	PA
isotretinoin cap 30 mg	1	PA
isotretinoin cap 40 mg	1	PA
myorisan cap 10mg	1	PA
myorisan cap 20mg	1	PA
myorisan cap 30mg	1	PA
myorisan cap 40mg	1	PA
panoxyl wash liq 4%	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>panoxyl wash liq 10%</i>	1	OTC
<i>persa-gel gel 10%</i>	1	OTC
<i>pr benzoyl liq 7% wash</i>	1	
<i>sulfacetamide sodium lotion 10% (acne)</i>	1	
<i>tretinoin cream 0.1%</i>	1	PA
<i>tretinoin cream 0.05%</i>	1	PA
<i>tretinoin cream 0.025%</i>	1	PA
<i>tretinoin gel 0.01%</i>	1	PA
<i>tretinoin gel 0.025%</i>	1	PA
<i>zenatane cap 10mg</i>	1	PA
<i>zenatane cap 20mg</i>	1	PA
<i>zenatane cap 30mg</i>	1	PA
<i>zenatane cap 40mg</i>	1	PA

ANTI-INFLAMMATORY AGENTS - TOPICAL

<i>arthr pain gel 1%</i>	1	QL (500 gm / 25 days), OTC
<i>aspercrm art gel 1% pain</i>	1	QL (500 gm / 25 days), OTC
<i>diclofenac sodium gel 1%</i>	1	QL (500 gm / 25 days), OTC
<i>goodsense gel art pain</i>	1	QL (500 gm / 25 days), OTC
<i>kls diclofen gel 1%</i>	1	QL (500 gm / 25 days), OTC
<i>qc diclofena gel 1%</i>	1	QL (500 gm / 25 days), OTC
VOLTAREN GEL 1%	1	QL (500 gm / 25 days), OTC

ANTIBIOTICS - TOPICAL

<i>antibiotic oin</i>	1	OTC
<i>antibiotic oin 500unit</i>	1	OTC
<i>bacitr zinc oin 500/gm</i>	1	OTC
<i>bacitracin oint 500 unit/gm</i>	1	OTC
<i>bacitracin zinc oint 500 unit/gm</i>	1	OTC
<i>bacitraycin oin 500/gm</i>	1	OTC
<i>double antib oin</i>	1	OTC
<i>double oin antibiot</i>	1	OTC
<i>eq triple oin antibiot</i>	1	OTC
<i>eql firstaid oin antibiot</i>	1	OTC
<i>first aid oin antibiot</i>	1	OTC
<i>gentamicin sulfate oint 0.1%</i>	1	
<i>gnp triple oin antibiot</i>	1	OTC
<i>hm triple oin antibiot</i>	1	OTC
<i>lanabiotic oin</i>	1	OTC
<i>mupirocin oint 2%</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>neosporin oin</i>	1	OTC
<i>poly bacitra oin</i>	1	OTC
<i>px triple oin</i>	1	OTC
<i>ra triple oin antibiot</i>	1	OTC
<i>sb triple oin antibiot</i>	1	OTC
<i>sm antibioti oin 500/gm</i>	1	OTC
<i>sm triple oin antibiot</i>	1	OTC
<i>triple antib oin</i>	1	OTC
<i>triple antib oin frst aid</i>	1	OTC
<i>wal-sporin oin</i>	1	OTC

ANTIFUNGALS - TOPICAL

<i>anti-fungal cre 1%</i>	1	OTC
<i>anti-fungal sol 1%</i>	1	OTC
<i>antifungal cre 1%</i>	1	OTC
<i>antifungal cre 1%</i>	1	QL (120 gm / 25 days), OTC
<i>antifungal cre 2%</i>	1	OTC
<i>antifungal cre foot</i>	1	OTC
<i>antifungal pow 2%</i>	1	OTC
<i>athlete foot aer 1%</i>	1	OTC
<i>athlete foot cre 1%</i>	1	OTC
<i>athlete foot cre 1%</i>	1	QL (120 gm / 25 days), OTC
<i>athlete foot pow 2%</i>	1	OTC
<i>athletes ft aer 1% pow</i>	1	OTC
<i>blis-to-sol liq 1%</i>	1	OTC
<i>cavilon cre 2%</i>	1	OTC
<i>ciclopirox gel 0.77%</i>	1	QL (120 gm / 25 days)
<i>ciclopirox olamine cream 0.77% (base equiv)</i>	1	QL (120 gm / 25 days)
<i>ciclopirox olamine susp 0.77% (base equiv)</i>	1	QL (120 mL / 25 days)
<i>ciclopirox shampoo 1%</i>	1	QL (120 mL / 25 days)
<i>clotrimazole cream 1%</i>	1	QL (120 gm / 25 days)
<i>clotrimazole cream 1%</i>	1	QL (120 gm / 25 days), OTC
<i>clotrimazole soln 1%</i>	1	QL (120 mL / 25 days)
<i>clotrimazole soln 1%</i>	1	QL (120 mL / 25 days), OTC
<i>cvs itch rel cre 1%</i>	1	QL (120 gm / 25 days), OTC
<i>desenex cre 1%</i>	1	QL (120 gm / 25 days), OTC
<i>desenex pow 2%</i>	1	OTC
<i>dr gs clear sol nail 1%</i>	1	OTC
<i>foot repair sol serum 1%</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>foot&sneaker aer 1%</i>	1	OTC
<i>formula 3 sol treatmen</i>	1	OTC
<i>formula 7 sol</i>	1	OTC
<i>fungal nail sol erase 1%</i>	1	OTC
<i>fungi-guard cre 1%</i>	1	OTC
<i>jck itch pow aer 1%</i>	1	OTC
<i>jock itch cre 1%</i>	1	QL (120 gm / 25 days), OTC
<i>ketoconazole cream 2%</i>	1	QL (120 gm / 25 days)
<i>ketoconazole shampoo 2%</i>	1	QL (120 mL / 25 days)
<i>micaderm cre 2%</i>	1	OTC
<i>miconazole nitrate cream 2%</i>	1	OTC
<i>miconazorb pow af 2%</i>	1	OTC
<i>mycocide ns sol 1%</i>	1	OTC
<i>mycozyl ac cre 1%</i>	1	QL (120 gm / 25 days), OTC
<i>myozyl al sol 1%</i>	1	OTC
<i>nyamyc pow 100000</i>	1	QL (120 gm / 25 days)
<i>nystatin cream 100000 unit/gm</i>	1	QL (120 gm / 25 days)
<i>nystatin oint 100000 unit/gm</i>	1	QL (120 gm / 25 days)
<i>nystatin topical powder 100000 unit/gm</i>	1	QL (120 gm / 25 days)
<i>nystop pow 100000</i>	1	QL (120 gm / 25 days)
<i>odor control aer powd 1%</i>	1	OTC
<i>odor eaters aer 1%</i>	1	OTC
<i>pro-ex antif cre 1%</i>	1	QL (120 gm / 25 days), OTC
<i>ringworm cre 1%</i>	1	QL (120 gm / 25 days), OTC
<i>sm antifungl cre 1%</i>	1	OTC
<i>sm antifungl cre 2%</i>	1	OTC
<i>tinaspore sol 1%</i>	1	OTC
<i>tineacide cre</i>	1	OTC
<i>tolnaftate aerosol pow 1%</i>	1	OTC
<i>tolnaftate cre 1%</i>	1	OTC
<i>zeasorb-af pow 2%</i>	1	OTC
ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL		
<i>fluorouracil cream 5%</i>	1	
ANTIPSORIATICS		
<i>calcipotriene oint 0.005%</i>	1	ST, QL (120 gm / 25 days)
<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	1	ST, QL (120 mL / 25 days)
<i>calcitrene oin 0.005%</i>	1	ST, QL (120 gm / 25 days)

Drug Name	Drug Tier	Requirements/Limits
COSENTYX INJ 150MG/ML	1	ST, QL (1 syringe / 28 days)
COSENTYX INJ 300DOSE	1	ST, QL (2 syringes / 28 days)
COSENTYX PEN INJ 150MG/ML	1	ST, QL (1 pen / 28 days)
COSENTYX PEN INJ 300DOSE	1	ST, QL (2 pens / 28 days)
SILIQ INJ 210/1.5	1	PA, QL (2 syringes / 28 days)
ANTISEBORRHEIC PRODUCTS		
anti-dandruf sha 1%	1	OTC
dandruff sha 1%	1	OTC
selenium sulfide lotion 2.5%	1	
ANTIVIRALS - TOPICAL		
docosanol cream 10%	1	OTC
hm docosan cre 10%	1	OTC
BURN PRODUCTS		
silver sulfadiazine cream 1%	1	
ssd cre 1%	1	
CORTICOSTEROIDS - TOPICAL		
ala-cort cre 1%	1	
ala-cort cre 2.5%	1	QL (120 gm / 25 days)
alclometasone dipropionate cream 0.05%	1	QL (120 gm / 25 days)
alclometasone dipropionate oint 0.05%	1	QL (120 gm / 25 days)
anti-itch cre 1%	1	OTC
anti-itch cre 1%pls 10	1	OTC
anti-itch oin 1%	1	OTC
aquanil hc lot 1%	1	OTC
aquaphor oin itch rlf	1	OTC
aveeno cre 1%	1	OTC
beta hc lot 1%	1	OTC
betamethasone dipropionate augmented cream 0.05%	1	QL (120 gm / 25 days)
betamethasone dipropionate augmented gel 0.05%	1	QL (120 gm / 25 days)
betamethasone dipropionate augmented lotion 0.05%	1	QL (120 mL / 25 days)
betamethasone dipropionate augmented oint 0.05%	1	QL (120 gm / 25 days)
betamethasone dipropionate cream 0.05%	1	QL (120 gm / 25 days)
betamethasone dipropionate lotion 0.05%	1	QL (120 mL / 25 days)
betamethasone dipropionate oint 0.05%	1	QL (120 gm / 25 days)
betamethasone valerate cream 0.1% (base equivalent)	1	QL (120 gm / 25 days)

Drug Name	Drug Tier	Requirements/Limits
<i>betamethasone valerate lotion 0.1% (base equivalent)</i>	1	QL (120 mL / 25 days)
<i>betamethasone valerate oint 0.1% (base equivalent)</i>	1	QL (120 gm / 25 days)
BRYHALI LOT 0.01%	1	ST, QL (120 gm / 25 days)
<i>cort intense cre heal 1%</i>	1	OTC
<i>cortisone cre 1%</i>	1	OTC
<i>cortisone gel 1%</i>	1	OTC
<i>cortisone lot 1%</i>	1	OTC
<i>cortisone oin 1%</i>	1	OTC
<i>cortizone-10 cre /aloe 1%</i>	1	OTC
<i>cortizone-10 cre healing</i>	1	OTC
<i>cortizone-10 cre plus</i>	1	OTC
<i>cortizone-10 gel 1%</i>	1	OTC
<i>cortizone-10 lot diab/1%</i>	1	OTC
<i>cortizone-10 lot eczema</i>	1	OTC
<i>cortizone-10 lot hydraten</i>	1	OTC
<i>cortizone-10 oin 1%</i>	1	OTC
<i>dermarest lot 1%</i>	1	OTC
<i>desonide cream 0.05%</i>	1	QL (120 gm / 25 days)
<i>desonide lotion 0.05%</i>	1	QL (120 mL / 25 days)
<i>desonide oint 0.05%</i>	1	QL (120 gm / 25 days)
<i>desoximetasone cream 0.05%</i>	1	QL (120 gm / 25 days)
<i>desoximetasone cream 0.25%</i>	1	QL (120 gm / 25 days)
<i>desoximetasone gel 0.05%</i>	1	QL (120 gm / 25 days)
<i>desoximetasone oint 0.25%</i>	1	QL (120 gm / 25 days)
<i>eq 1% hydroc cre</i>	1	OTC
<i>eq hydrocort cre 1%</i>	1	OTC
<i>fluocinolone acetonide cream 0.025%</i>	1	QL (120 gm / 25 days)
<i>fluocinolone acetonide oint 0.025%</i>	1	QL (120 gm / 25 days)
<i>fluocinolone acetonide soln 0.01%</i>	1	QL (120 gm / 25 days)
<i>fluocinonide cream 0.05%</i>	1	QL (120 gm / 25 days)
<i>fluocinonide gel 0.05%</i>	1	QL (120 gm / 25 days)
<i>fluocinonide oint 0.05%</i>	1	QL (120 gm / 25 days)
<i>fluocinonide soln 0.05%</i>	1	QL (120 gm / 25 days)
<i>fluticasone propionate cream 0.05%</i>	1	QL (120 gm / 25 days)
<i>fluticasone propionate oint 0.005%</i>	1	QL (120 gm / 25 days)
<i>gnp hydrocor cre 1% plus</i>	1	OTC
<i>gynecort 10 cre 1%</i>	1	OTC
<i>halobetasol propionate cream 0.05%</i>	1	QL (120 gm / 25 days)
<i>halobetasol propionate oint 0.05%</i>	1	QL (120 gm / 25 days)
<i>hm hydrocort cre 1% plus</i>	1	OTC
<i>hydrocort cre 0.5%</i>	1	OTC
<i>hydrocort cre 1%</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
hydrocort cre 1% aloe	1	OTC
hydrocort cre 1% plus	1	OTC
hydrocort oin 1%	1	OTC
HYDROCORT OIN 1%	1	OTC
hydrocort/ cre aloe 1%	1	OTC
hydrocortisone acetate cream 1%	1	OTC
hydrocortisone butyrate cream 0.1%	1	QL (120 gm / 25 days)
hydrocortisone butyrate oint 0.1%	1	QL (120 gm / 25 days)
hydrocortisone butyrate soln 0.1%	1	QL (4.8 mL / 1 day)
hydrocortisone cream 1%	1	
hydrocortisone cream 1%	1	OTC
hydrocortisone cream 2.5%	1	QL (120 gm / 25 days)
hydrocortisone lotion 1%	1	OTC
hydrocortisone lotion 2.5%	1	QL (120 mL / 25 days)
hydrocortisone oint 0.5%	1	OTC
hydrocortisone oint 1%	1	
hydrocortisone oint 2.5%	1	QL (120 gm / 25 days)
hydrocortisone valerate cream 0.2%	1	QL (120 gm / 25 days)
hydrocortisone valerate oint 0.2%	1	QL (120 gm / 25 days)
hydrocream cre 1%	1	OTC
instacort 5 cre 0.5%	1	OTC
kericort 10 cre 1%	1	OTC
lanacort 10 cre 1%	1	OTC
mg217 gel 1%	1	OTC
mometasone furoate cream 0.1%	1	QL (120 gm / 25 days)
mometasone furoate oint 0.1%	1	QL (120 gm / 25 days)
mometasone furoate solution 0.1% (lotion)	1	
prep h cre 1%	1	OTC
ra anti-itch cre 1%	1	OTC
ra anti-itch oin 1%	1	OTC
ra hydrocort cre 1%	1	OTC
ra hydrocort cre 1%plis 12	1	OTC
sarnol-hc lot 1%	1	OTC
sb hydrocort cre 1%	1	OTC
sb hydrocort oin 1%	1	OTC
scalp relief sol 1%	1	OTC
scalpicin sol 1%	1	OTC
sm hydrocort cre 1%	1	OTC
sm hydrocort cre 1% plus	1	OTC
sm hydrocort oin 1%	1	OTC
triamcinolone acetonide cream 0.1%	1	QL (120 gm / 25 days)
triamcinolone acetonide cream 0.5%	1	QL (120 gm / 25 days)
triamcinolone acetonide cream 0.025%	1	QL (120 gm / 25 days)
triamcinolone acetonide lotion 0.1%	1	QL (120 mL / 25 days)
triamcinolone acetonide lotion 0.025%	1	QL (120 mL / 25 days)

Drug Name	Drug Tier	Requirements/Limits
<i>triamcinolone acetonide oint 0.1%</i>	1	QL (120 gm / 25 days)
<i>triamcinolone acetonide oint 0.5%</i>	1	QL (120 gm / 25 days)
<i>triamcinolone acetonide oint 0.025%</i>	1	QL (120 gm / 25 days)
<i>triderm cre 0.1%</i>	1	QL (120 gm / 25 days)
<i>triderm cre 0.5%</i>	1	QL (120 gm / 25 days)
<i>vagisil cre 1%</i>	1	OTC

DIAPER RASH PRODUCTS

<i>A+D DIAPER CRE RASH</i>	1	OTC
<i>aveeno baby oin multipur</i>	1	OTC
<i>balmex multi oin purpose</i>	1	OTC
<i>BENSONS CRE BOTTOM</i>	1	OTC
<i>cerave baby oin healing</i>	1	OTC
<i>CVS DIAPER CRE A/D ZINC</i>	1	OTC
<i>desitin oin</i>	1	OTC
<i>medi-paste oin</i>	1	OTC
<i>paladin oin</i>	1	OTC
<i>pediatric oin</i>	1	OTC
<i>pinxav oin</i>	1	OTC
<i>skin protect oin all-purp</i>	1	OTC

EMOLLIENT/KERATOLYTIC AGENTS

<i>gordons urea cre 40%</i>	1	OTC
<i>urea cream 40%</i>	1	
<i>uremez-40 cre 40%</i>	1	

EMOLLIENTS

<i>a&d oin</i>	1	OTC
<i>a+d prevent oin</i>	1	OTC
<i>al12 lot 12%</i>	1	OTC
<i>amlactin lot 12%</i>	1	OTC
<i>amlactin lot daily</i>	1	OTC
<i>baby vitamin oin a & d</i>	1	OTC
<i>cvs vit a&d oin</i>	1	OTC
<i>eq vitamins oin a & d</i>	1	OTC
<i>gnp vit a&d oin</i>	1	OTC
<i>lactic acid (ammonium lactate) cream 12%</i>	1	
<i>lactic acid (ammonium lactate) cream 12%</i>	1	OTC
<i>lactic acid (ammonium lactate) lotion 12%</i>	1	
<i>lactic acid (ammonium lactate) lotion 12%</i>	1	OTC
<i>skin trtmnt lot 12%</i>	1	OTC
<i>vitamins a & d oint</i>	1	OTC

ENZYMES - TOPICAL

<i>SANTYL OIN 250/GM</i>	1	PA
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IMMUNOMODULATING AGENTS - TOPICAL

<i>imiquimod cream 5%</i>	1	
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Drug Name	Drug Tier	Requirements/Limits
KERATOLYTIC/ANTIMITOTIC AGENTS		
<i>podofilox soln 0.5%</i>	1	
LOCAL ANESTHETICS - TOPICAL		
ARTH PAIN CRE 0.075%	1	QL (120 gm / 25 days), OTC
<i>aspercreme pad lid 4%</i>	1	QL (30 patches / 25 days), OTC
<i>aspercreme pad lido 4%</i>	1	QL (30 patches / 25 days), OTC
<i>asperflex pad 4%</i>	1	QL (30 patches / 25 days), OTC
<i>blue-emu dry pad rlf 4%</i>	1	QL (30 patches / 25 days), OTC
<i>capsaicin cream 0.1%</i>	1	QL (120 gm / 25 days), OTC
<i>capsaicin cream 0.025%</i>	1	QL (120 gm / 25 days), OTC
<i>capsaicin hp cre 0.1%</i>	1	QL (120 gm / 25 days), OTC
CAPSAICIN LIQ 0.15%	1	QL (30 mL / 25 days), OTC
CAPZASIN GEL RELIEF	1	QL (42.5 gm / 25 days), OTC
CAPZASIN LIQ 0.15%	1	QL (30 mL / 25 days), OTC
CAPZASIN-P CRE 0.035%	1	QL (120 gm / 25 days), OTC
CASTIVA LOT	1	QL (120 gm / 25 days), OTC
<i>cvs pain rel pad 4%</i>	1	QL (30 patches / 25 days), OTC
<i>eq lidocaine pad 4%</i>	1	QL (30 patches / 25 days), OTC
<i>gnp lidocain pad 4%</i>	1	QL (30 patches / 25 days), OTC
<i>hm lidocaine pad 4%</i>	1	QL (30 patches / 25 days), OTC
<i>lido king pad 4%</i>	1	QL (30 patches / 25 days), OTC
<i>lidocaine hcl soln 4%</i>	1	
<i>lidocaine pa pad 4%</i>	1	QL (30 patches / 25 days), OTC
<i>lidocaine pad 4%</i>	1	QL (30 patches / 25 days), OTC
<i>lidocaine pad relievin</i>	1	QL (30 patches / 25 days), OTC
<i>lidocaine patch 5%</i>	1	PA

Drug Name	Drug Tier	Requirements/Limits
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	1	QL (1 gm / 1 day)
<i>pain relief pad 4% max</i>	1	QL (30 patches / 25 days), OTC
<i>pain relievi pad lidocain</i>	1	QL (30 patches / 25 days), OTC
<i>QC CAPSAICIN LIQ 0.15%</i>	1	QL (30 mL / 25 days), OTC
<i>qc lidocaine pad rlf 4%</i>	1	QL (30 patches / 25 days), OTC
<i>ra lidocaine pad 4%</i>	1	QL (30 patches / 25 days), OTC
<i>ra pain reli pad 4%</i>	1	QL (30 patches / 25 days), OTC
<i>re-lieved pad 4%</i>	1	QL (30 patches / 25 days), OTC
<i>salonpas gel pad 4%</i>	1	QL (30 patches / 25 days), OTC
<i>theracare pad 4%</i>	1	QL (30 patches / 25 days), OTC
<i>welmate pad 4%</i>	1	QL (30 patches / 25 days), OTC
<i>zostrix hp cre 0.1%</i>	1	QL (120 gm / 25 days), OTC
<i>ZOSTRIX NAT CRE 0.033%</i>	1	QL (120 gm / 25 days), OTC

MISC. TOPICAL

CALAMINE LOT	1	OTC
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PHOSPHODIESTERASE 4 (PDE4) INHIBITORS - TOPICAL

EUCRISA OIN 2%	1	ST, QL (60 gm / 25 days)
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ROSACEA AGENTS

<i>metronidazole cream 0.75%</i>	1	
<i>metronidazole gel 0.75%</i>	1	
<i>metronidazole gel 1%</i>	1	ST
<i>metronidazole lotion 0.75%</i>	1	
<i>rosadan cre 0.75%</i>	1	
<i>rosadan gel 0.75%</i>	1	

SCABICIDES & PEDICULICIDES

<i>bedding spra aer 0.5%</i>	1	OTC
<i>lice killing sha</i>	1	OTC
<i>lice killing sha 0.33-4%</i>	1	OTC
<i>lice treatmt liq 1%</i>	1	OTC
<i>lice treatmt lot 1%</i>	1	OTC
<i>lice treatmt sha 0.33-4%</i>	1	OTC
<i>lice trtmnt liq 1%</i>	1	OTC
<i>lice/bedbug aer 0.5%</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>lice/bedbug spr dust mit</i>	1	OTC
<i>malathion lotion 0.5%</i>	1	ST
<i>NIX CREM RIN LIQ 1%</i>	1	OTC
<i>permethrin cream 5%</i>	1	
<i>ra lice lot 1%</i>	1	OTC
<i>RID AER</i>	1	OTC
<i>rid lice kil sha 0.33-4%</i>	1	OTC
<i>sm bedding aer lice</i>	1	OTC
<i>spinosad susp 0.9%</i>	1	ST
<i>stop lice 3 spr 0.5%</i>	1	OTC
<i>stop lice spr 0.5%</i>	1	OTC

DIAGNOSTIC PRODUCTS

DIAGNOSTIC TESTS

CHEMSTRIP 2 TES GP	1	OTC
CHEMSTRIP 5 TES OB	1	OTC
CHEMSTRIP 7 TES	1	OTC
CHEMSTRIP 9 TES STRIPS	1	OTC
CHEMSTRIP 10 TES MD	1	OTC
CHEMSTRIP TES -10 SG	1	OTC
CHEMSTRIP TES UGK	1	OTC
CVS KETONE TES CARE	1	OTC
KETO-DIASTIX TES	1	OTC
ONETOUCH TES ULTRA	1	QL (200 strips / 25 days), OTC
ONETOUCH TES VERIO	1	QL (200 strips / 25 days), OTC

DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS

DIETARY MANAGEMENT PRODUCTS

FOLBIC TAB	1	OTC
niva-fol tab	1	OTC
westab max tab 2.5-25-2	1	

DIGESTIVE AIDS

DIGESTIVE ENZYMES

CREON CAP 3000UNIT	1	
CREON CAP 6000UNIT	1	
CREON CAP 12000UNT	1	
CREON CAP 24000UNT	1	
CREON CAP 36000UNT	1	
VIOKACE TAB 10440	1	
VIOKACE TAB 20880	1	
ZENPEP CAP 3000UNIT	1	
ZENPEP CAP 5000UNIT	1	
ZENPEP CAP 15000UNT	1	
ZENPEP CAP 20000UNT	1	

Drug Name	Drug Tier	Requirements/Limits
ZENPEP CAP 25000	1	
ZENPEP CAP 40000	1	

DIURETICS

CARBONIC ANHYDRASE INHIBITORS

<i>acetazolamide cap er 12hr 500 mg</i>	1
<i>acetazolamide tab 125 mg</i>	1
<i>acetazolamide tab 250 mg</i>	1
<i>methazolamide tab 25 mg</i>	1
<i>methazolamide tab 50 mg</i>	1

DIURETIC COMBINATIONS

<i>ALDACTAZIDE TAB 50/50</i>	1
<i>amiloride & hydrochlorothiazide tab 5-50 mg</i>	1
<i>spironolactone & hydrochlorothiazide tab 25-25 mg</i>	1
<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	1
<i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i>	1
<i>triamterene & hydrochlorothiazide tab 75-50 mg</i>	1

LOOP DIURETICS

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

POTASSIUM SPARING DIURETICS

<i>amiloride hcl tab 5 mg</i>	1
<i>spironolactone tab 25 mg</i>	1
<i>spironolactone tab 50 mg</i>	1
<i>spironolactone tab 100 mg</i>	1

THIAZIDES AND THIAZIDE-LIKE DIURETICS

<i>chlorthalidone tab 25 mg</i>	1
<i>chlorthalidone tab 50 mg</i>	1
<i>hydrochlorothiazide cap 12.5 mg</i>	1
<i>hydrochlorothiazide tab 12.5 mg</i>	1
<i>hydrochlorothiazide tab 25 mg</i>	1

Drug Name	Drug Tier	Requirements/Limits
hydrochlorothiazide tab 50 mg	1	
indapamide tab 1.25 mg	1	
indapamide tab 2.5 mg	1	
metolazone tab 2.5 mg	1	
metolazone tab 5 mg	1	
metolazone tab 10 mg	1	

ENDOCRINE AND METABOLIC AGENTS - MISC.

BONE DENSITY REGULATORS

alendronate sodium tab 5 mg	1	
alendronate sodium tab 10 mg	1	
alendronate sodium tab 35 mg	1	
alendronate sodium tab 70 mg	1	
calcitonin (salmon) nasal soln 200 unit/act	1	
PROLIA SOL 60MG/ML	1	PA, QL (1 syringe / 180 days)
TYMLOS INJ	1	PA, QL (1 pen / 30 days)

CORTICOTROPIN

ACTHAR INJ 80UNIT	1	PA, QL (35 mL / 21 days)
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GROWTH HORMONES

NORDITROPIN INJ 5/1.5ML	1	ST
NORDITROPIN INJ 10/1.5ML	1	ST
NORDITROPIN INJ 15/1.5ML	1	ST
NORDITROPIN INJ 30/3ML	1	ST
SEROSTIM INJ 4MG	1	PA
SEROSTIM INJ 5MG	1	PA
SEROSTIM INJ 6MG	1	PA
ZORBTIVE INJ 8.8MG	1	PA

HORMONE RECEPTOR MODULATORS

OSPHENA TAB 60MG	1	PA
raloxifene hcl tab 60 mg	1	

LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS

SYNAREL SOL 2MG/ML	1	
TRIPTODUR SUS 22.5MG	1	PA

METABOLIC MODIFIERS

calcitriol cap 0.5 mcg	1	
calcitriol cap 0.25 mcg	1	
calcitriol oral soln 1 mcg/ml	1	
cinacalcet hcl tab 30 mg (base equiv)	1	PA, QL (2 tabs / 1 day)
cinacalcet hcl tab 60 mg (base equiv)	1	PA, QL (2 tabs / 1 day)
cinacalcet hcl tab 90 mg (base equiv)	1	PA, QL (4 tabs / 1 day)
doxercalciferol cap 0.5 mcg	1	
doxercalciferol cap 1 mcg	1	
doxercalciferol cap 2.5 mcg	1	

Drug Name	Drug Tier	Requirements/Limits
<i>paricalcitol cap 1 mcg</i>	1	
<i>paricalcitol cap 2 mcg</i>	1	
<i>paricalcitol cap 4 mcg</i>	1	
<i>sapropterin dihydrochloride powder packet 100 mg</i>	1	PA
<i>sapropterin dihydrochloride powder packet 500 mg</i>	1	PA
<i>sapropterin dihydrochloride tab 100 mg</i>	1	PA
POSTERIOR PITUITARY HORMONES		
<i>desmopressin acetate nasal spray soln 0.01%</i>	1	PA
<i>desmopressin acetate nasal spray soln 0.01% (refrigerated)</i>	1	PA
<i>desmopressin acetate tab 0.1 mg</i>	1	PA
<i>desmopressin acetate tab 0.2 mg</i>	1	PA
PROLACTIN INHIBITORS		
<i>cabergoline tab 0.5 mg</i>	1	
SOMATOSTATIC AGENTS		
<i>octreotide acetate inj 50 mcg/ml (0.05 mg/ml)</i>	1	PA, QL (3 vials / 1 day)
<i>octreotide acetate inj 100 mcg/ml (0.1 mg/ml)</i>	1	PA, QL (3 vials / 1 day)
<i>octreotide acetate inj 200 mcg/ml (0.2 mg/ml)</i>	1	PA, QL (45 vials / 30 days)
<i>octreotide acetate inj 500 mcg/ml (0.5 mg/ml)</i>	1	PA, QL (3 vials / 1 day)
<i>octreotide acetate inj 1000 mcg/ml (1 mg/ml)</i>	1	PA, QL (9 vials / 30 days)
<i>octreotide acetate subcutaneous soln pref syr 50 mcg/ml</i>	1	PA, QL (3 vials / 1 day)
<i>octreotide acetate subcutaneous soln pref syr 100 mcg/ml</i>	1	PA, QL (3 vials / 1 day)
<i>octreotide acetate subcutaneous soln pref syr 500 mcg/ml</i>	1	PA, QL (3 vials / 1 day)
<i>SOMATULINE INJ 60/0.2ML</i>	1	PA, QL (1 syringe / 28 days)
<i>SOMATULINE INJ 90/0.3ML</i>	1	PA, QL (1 syringe / 28 days)
<i>SOMATULINE INJ 120/.5ML</i>	1	PA, QL (1 syringe / 28 days)
VASOPRESSIN RECEPTOR ANTAGONISTS		
<i>tolvaptan tab 15 mg</i>	1	PA, QL (2 tabs / 1 day)
<i>tolvaptan tab 30 mg</i>	1	PA, QL (1 tab / 1 day)
ESTROGENS		
ESTROGEN COMBINATIONS		
<i>amabelz tab 0.5-0.1</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>amabelz tab 1-0.5mg</i>	1	
<i>COMBIPATCH DIS</i>	1	
<i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i>	1	
<i>estradiol & norethindrone acetate tab 1-0.5 mg</i>	1	
<i>fyavolv tab 0.5-2.5</i>	1	
<i>fyavolv tab 1-5</i>	1	
<i>jinteli tab 1mg-5mcg</i>	1	
<i>mimvey tab 1-0.5mg</i>	1	
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>	1	
<i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i>	1	

ESTROGENS

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

FLUOROQUINOLONES

FLUOROQUINOLONES

<i>ciprofloxacin hcl tab 100 mg (base equiv)</i>	1
<i>ciprofloxacin hcl tab 250 mg (base equiv)</i>	1
<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>	1
<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	1
<i>levofloxacin oral soln 25 mg/ml</i>	1
<i>levofloxacin tab 250 mg</i>	1
<i>levofloxacin tab 500 mg</i>	1
<i>levofloxacin tab 750 mg</i>	1

GASTROINTESTINAL AGENTS - MISC.

AGENTS FOR CHRONIC IDIOPATHIC CONSTIPATION (CIC)

<i>TRULANCE TAB 3MG</i>	1
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ANTIFLATULENTS

<i>anti-gas cap 180mg</i>	1	OTC
<i>cvs gas rlef chw 80mg</i>	1	OTC
<i>cvs gas rlef chw 125mg</i>	1	OTC
<i>eq gas relie cap 125mg</i>	1	OTC
<i>eql gas gone chw 125mg</i>	1	OTC
<i>eql gas rlf cap 180mg</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
gas relief cap 125mg	1	OTC
gas relief cap 180mg	1	OTC
gas relief chw 80mg	1	OTC
gas relief chw 125mg	1	OTC
gas relief dro 20/0.3ml	1	OTC
gas relief dro 40/0.6ml	1	OTC
gas relief dro infants	1	OTC
gas relief liq infants	1	OTC
gas relief sus infants	1	OTC
gas-x cap 125mg	1	OTC
gas-x cap 180mg	1	OTC
GAS-X CHILD MIS 40MG	1	OTC
GAS-X EX-STR MIS 62.5MG	1	OTC
gas-x infant dro	1	OTC
gnp anti-gas cap 180mg	1	OTC
gnp gas relf chw 80mg	1	OTC
gnp gas relf chw 125mg	1	OTC
hm gas relf chw 80mg	1	OTC
hm gas relf chw 125mg	1	OTC
little remed sus 20/.03ml	1	OTC
mi-acid gas chw 80mg	1	OTC
phazyme chw 125mg	1	OTC
qc gas relf chw 80mg	1	OTC
qc gas relf chw 125mg	1	OTC
ra gas relf chw 80mg	1	OTC
ra gas relf chw 125mg	1	OTC
sb gas relf chw 125mg	1	OTC
simeped dro 40/0.6ml	1	OTC
simethicone cap 125 mg	1	OTC
simethicone cap 180mg	1	OTC
simethicone chew tab 80 mg	1	OTC
simethicone chew tab 125 mg	1	OTC
simethicone dro 20/0.3ml	1	OTC
simethicone dro infants	1	OTC
simethicone susp 40 mg/0.6ml	1	OTC
sm gas rel chw 125mg	1	OTC
sm gas relf chw 80mg	1	OTC
sm gas relie cap 180mg	1	OTC
sm gas relieve chw 80mg	1	OTC

GALLSTONE SOLUBILIZING AGENTS

ursodiol cap 300 mg	1
ursodiol tab 250 mg	1
ursodiol tab 500 mg	1

Drug Name	Drug Tier	Requirements/Limits
GASTROINTESTINAL STIMULANTS		
<i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i>	1	
<i>metoclopramide hcl tab 5 mg (base equivalent)</i>	1	
<i>metoclopramide hcl tab 10 mg (base equivalent)</i>	1	
INFLAMMATORY BOWEL AGENTS		
AVSOLA INJ 100MG	1	PA, QL (3 vials / 28 days)
<i>balsalazide disodium cap 750 mg</i>	1	
ENTYVIO INJ 300MG	1	ST, QL (1 vial / 50 days)
<i>mesalamine cap er 24hr 0.375 gm</i>	1	
<i>mesalamine enema 4 gm</i>	1	
<i>mesalamine rectal enema 4 gm & cleanser wipe kit</i>	1	
PENTASA CAP 250MG CR	1	PA
PENTASA CAP 500MG CR	1	PA
<i>sulfasalazine tab 500 mg</i>	1	
<i>sulfasalazine tab delayed release 500 mg</i>	1	
INTESTINAL ACIDIFIERS		
<i>enulose sol 10gm/15</i>	1	
<i>generlac sol 10gm/15</i>	1	
<i>lactulose (encephalopathy) solution 10 gm/15ml</i>	1	
IRRITABLE BOWEL SYNDROME (IBS) AGENTS		
LINZESS CAP 72MCG	1	
LINZESS CAP 145MCG	1	
LINZESS CAP 290MCG	1	
PERIPHERAL OPIOID RECEPTOR ANTAGONISTS		
MOVANTIK TAB 12.5MG	1	
MOVANTIK TAB 25MG	1	
PHOSPHATE BINDER AGENTS		
<i>calcium acetate (phosphate binder) cap 667 mg (169 mg ca)</i>	1	
<i>sevelamer carbonate packet 0.8 gm</i>	1	ST
<i>sevelamer carbonate packet 2.4 gm</i>	1	ST
<i>sevelamer carbonate tab 800 mg</i>	1	ST
GENITOURINARY AGENTS - MISCELLANEOUS		
ALKALINIZERS		
<i>potassium citrate tab er 5 meq (540 mg)</i>	1	
<i>potassium citrate tab er 10 meq (1080 mg)</i>	1	
<i>potassium citrate tab er 15 meq (1620 mg)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
PROSTATIC HYPERTROPHY AGENTS		
<i>alfuzosin hcl tab er 24hr 10 mg</i>	1	
<i>finasteride tab 5 mg</i>	1	
<i>tamsulosin hcl cap 0.4 mg</i>	1	
URINARY ANALGESICS		
<i>phenazo tab 200mg</i>	1	
<i>phenazopyridine hcl tab 100 mg</i>	1	
<i>phenazopyridine hcl tab 200 mg</i>	1	
GOUT AGENTS		
GOUT AGENTS		
<i>allopurinol tab 100 mg</i>	1	
<i>allopurinol tab 300 mg</i>	1	
<i>colchicine tab 0.6 mg</i>	1	QL (30 tabs / 25 days)
URICOSURICS		
<i>probencid tab 500 mg</i>	1	
HEMATOLOGICAL AGENTS - MISC.		
ANTIHEMOPHILIC PRODUCTS		
<i>HEMLIBRA INJ 30MG/ML</i>	1	PA
<i>HEMLIBRA INJ 60/0.4</i>	1	PA
<i>HEMLIBRA INJ 105/0.7</i>	1	PA
<i>HEMLIBRA INJ 150/ML</i>	1	PA
<i>JIVI INJ 500 UNIT</i>	1	PA
<i>JIVI INJ 1000UNIT</i>	1	PA
<i>JIVI INJ 2000UNIT</i>	1	PA
<i>JIVI INJ 3000UNIT</i>	1	PA
BRADYKININ B2 RECEPTOR ANTAGONISTS		
<i>icatibant acetate inj 30 mg/3ml (base equivalent)</i>	1	PA, QL (45 syringes / 90 days)
COMPLEMENT INHIBITORS		
<i>CINRYZE SOL 500 UNIT</i>	1	PA, QL (20 vials / 30 days)
<i>RUCONEST INJ 2100UNIT</i>	1	PA, QL (60 vials / 90 days)
<i>SOLIRIS INJ 10MG/ML</i>	1	PA
PLATELET AGGREGATION INHIBITORS		
<i>anagrelide hcl cap 0.5 mg</i>	1	
<i>anagrelide hcl cap 1 mg</i>	1	
<i>BRILINTA TAB 60MG</i>	1	
<i>BRILINTA TAB 90MG</i>	1	
<i>cilostazol tab 50 mg</i>	1	
<i>cilostazol tab 100 mg</i>	1	
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>clopidogrel bisulfate tab 300 mg (base equiv)</i>	1	
<i>dipyridamole tab 25 mg</i>	1	
<i>dipyridamole tab 50 mg</i>	1	
<i>dipyridamole tab 75 mg</i>	1	
<i>prasugrel hcl tab 5 mg (base equiv)</i>	1	
<i>prasugrel hcl tab 10 mg (base equiv)</i>	1	

HEMATOPOIETIC AGENTS

AGENTS FOR GAUCHER DISEASE

CERDELGA CAP 84MG	1	PA, QL (60 caps / 30 days)
CEREZYME INJ 400UNIT	1	PA, QL (15 vials / 14 days)

COBALAMINS

<i>cyanocobalamin inj 1000 mcg/ml</i>	1	
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FOLIC ACID/FOLATES

<i>folate tab 400mcg</i>	1	OTC
<i>folic acid tab 1 mg</i>	1	
<i>folic acid tab 400 mcg</i>	1	OTC
<i>folic acid tab 800mcg</i>	1	OTC
<i>folic acid tab 1000mcg</i>	1	OTC
<i>sm folic acd tab 400mcg</i>	1	OTC
<i>yl folic aci tab 400mcg</i>	1	OTC

HEMATOPOIETIC GROWTH FACTORS

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

Drug Name	Drug Tier	Requirements/Limits
HEMATOPOIETIC MIXTURES		
<i>airavite tab</i>	1	
<i>fabb tab 2.2-25-1</i>	1	
<i>folbee tab</i>	1	
<i>folic acid-vitamin b6-vitamin b12 tab 2.2-25-0.5 mg</i>	1	
<i>folplex 2.2 tab</i>	1	
<i>nufol tab</i>	1	
<i>virt-gard tab 2.2-25-1</i>	1	
<i>westab mini tab 2.2-25-1</i>	1	
<i>westab one tab 2.5-25-1</i>	1	
IRON		
<i>cvs iron tab 27mg</i>	1	OTC
<i>cvs iron tab 325mg</i>	1	OTC
<i>cvs slow rel tab fe 45mg</i>	1	OTC
<i>fe tabs tab 325mg ec</i>	1	OTC
<i>fe-vite iron sol 15mg/ml</i>	1	OTC
<i>ferate tab 27mg</i>	1	OTC
<i>fergon tab 27mg</i>	1	OTC
<i>ferosul tab 325mg</i>	1	OTC
<i>FERRETT'S TAB 325MG</i>	1	OTC
<i>ferrocite tab 324mg</i>	1	OTC
<i>ferrotabs tab</i>	1	OTC
<i>ferrous fumarate tab 324 mg (106 mg elemental fe)</i>	1	OTC
<i>ferrous gluc tab 324mg</i>	1	OTC
<i>ferrous gluconate tab 240 mg (27 mg elemental fe)</i>	1	OTC
<i>FERROUS SULF TAB 324MG EC</i>	1	OTC
<i>ferrous sulfate elixir 220 mg/5ml (44 mg/5ml elemental fe)</i>	1	OTC
<i>ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe)</i>	1	OTC
<i>ferrous sulfate tab 27 mg (elemental fe)</i>	1	OTC
<i>ferrous sulfate tab 325 mg (65 mg elemental fe)</i>	1	OTC
<i>ferrous sulfate tab ec 325 mg (65 mg fe equivalent)</i>	1	OTC
<i>ferrous sulfate tab er 142 mg (45 mg fe equivalent)</i>	1	OTC
<i>gnp iron tab 45mg</i>	1	OTC
<i>gnp iron tab 65mg</i>	1	OTC
<i>high potency tab fe 27mg</i>	1	OTC
<i>IRON HP TAB 65MG</i>	1	OTC
<i>iron slow tab 45mg</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
iron supplem tab therapy	1	OTC
iron supplmt dro 15mg/ml	1	OTC
iron suppmnt elx 220/5ml	1	OTC
nat-rul iron tab 325mg	1	OTC
pedia iron dro 15mg/ml	1	OTC
pediatric dro iron	1	OTC
px iron tab 27mg	1	OTC
px iron tab 200mg	1	OTC
ra iron tab 27mg	1	OTC
ra iron tab 325mg	1	OTC
slow iron tab 160mg cr	1	OTC
slow rel fe tab 160mg cr	1	OTC
slow release tab 45mg	1	OTC
SLOW RELEASE TAB 47.5MG	1	OTC
slow release tab iron 45	1	OTC
slow-release tab 45mg	1	OTC
slow-release tab fe 45mg	1	OTC
sm iron slow tab 45mg	1	OTC
sm iron slow tab 160mg cr	1	OTC
sm iron tab 45mg	1	OTC
sm iron tab 325mg	1	OTC

HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS

ANTIHISTAMINE HYPNOTICS

diphenhydramine hcl (sleep) tab 50 mg	1	OTC
eq sleep aid cap 50mg	1	OTC
eql sleep tab aid	1	OTC
hm nighttime tab 25mg	1	OTC
hm sleep aid tab 25mg	1	OTC
night time tab 25mg	1	OTC
nighttime tab 25mg	1	OTC
qc sleep aid cap 50mg	1	OTC
qc sleep-aid cap 50mg	1	OTC
ra nighttime tab 25mg	1	OTC
ra sleep aid cap 50mg	1	OTC
ra sleep aid tab 25mg	1	OTC
rest simply tab 25mg	1	OTC
sb sleep tab 25mg	1	OTC
simply sleep tab 25mg	1	OTC
sleep aid cap 50mg	1	OTC
sleep aid tab 25mg	1	OTC
sleep ii tab 25mg	1	OTC
sleep tab 25mg	1	OTC
sleep-aid cap 50mg	1	OTC
sleep-aid tab 25mg	1	OTC
sleep-tabs tab 25mg	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>sm nighttime tab 25mg</i>	1	OTC
<i>sm sleep aid tab 25mg</i>	1	OTC
<i>ultra sleep tab 25mg</i>	1	OTC
<i>wal-som cap 50mg</i>	1	OTC
<i>wal-som tab 25mg</i>	1	OTC

BARBITURATE HYPNOTICS

<i>phenobarbital elixir 20 mg/5ml</i>	1
<i>phenobarbital tab 15 mg</i>	1
<i>phenobarbital tab 16.2 mg</i>	1
<i>phenobarbital tab 30 mg</i>	1
<i>phenobarbital tab 32.4 mg</i>	1
<i>phenobarbital tab 60 mg</i>	1
<i>phenobarbital tab 64.8 mg</i>	1
<i>phenobarbital tab 97.2 mg</i>	1
<i>phenobarbital tab 100 mg</i>	1

LAXATIVES

LAXATIVE COMBINATIONS

<i>colace 2in1 tab 8.6-50mg</i>	1	OTC
<i>cvs senna pl tab 8.6-50mg</i>	1	OTC
<i>docuzen tab 8.6-50mg</i>	1	OTC
<i>easy-lax pls tab 8.6-50mg</i>	1	OTC
<i>eq senna-s tab 8.6-50mg</i>	1	OTC
<i>eql stool tab softener</i>	1	OTC
<i>gavilyte-c sol</i>	1	
<i>gavilyte-g sol</i>	1	
<i>gavilyte-n sol flav pk</i>	1	
<i>hm senna-s tab 8.6-50mg</i>	1	OTC
<i>hm stool sof tab 8.6-50mg</i>	1	OTC
<i>lax/stl soft tab 8.6-50mg</i>	1	OTC
<i>laxacin tab 8.6-50mg</i>	1	OTC
<i>laxative pls tab 8.6-50mg</i>	1	OTC
<i>medi-natural tab 8.6-50mg</i>	1	OTC
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	1	
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	1	
<i>ra p col-rit tab 8.6-50mg</i>	1	OTC
<i>sb docusate tab 8.6-50mg</i>	1	OTC
<i>senexon-s tab 8.6-50mg</i>	1	OTC
<i>senna plus tab 8.6-50mg</i>	1	OTC
<i>senna s tab 8.6-50mg</i>	1	OTC
<i>senna-plus tab 8.6-50mg</i>	1	OTC
<i>senna-s tab 8.6-50mg</i>	1	OTC
<i>senna-time s tab 8.6-50mg</i>	1	OTC
<i>senna/dss tab 8.6-50mg</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>sm senna-s tab 8.6-50mg</i>	1	OTC
<i>sm stool sof tab 8.6-50mg</i>	1	OTC
<i>sm stool tab softener</i>	1	OTC
<i>stimulant tab 8.6-50mg</i>	1	OTC
<i>stool softnr tab 8.6-50mg</i>	1	OTC
<i>SUPREP BOWEL SOL PREP KIT</i>	1	

LAXATIVES - MISCELLANEOUS

<i>clearlax pow</i>	1	OTC
<i>constulose sol 10gm/15</i>	1	
<i>cvs purelax pak</i>	1	OTC
<i>cvs purelax pow</i>	1	OTC
<i>eq clearlax pow</i>	1	OTC
<i>eql clearlax pow</i>	1	OTC
<i>gavilax pow</i>	1	OTC
<i>gentrelax pow</i>	1	OTC
<i>glycolax pow 3350 nf</i>	1	OTC
<i>gnp clearlax pak 3350 nf</i>	1	OTC
<i>gnp clearlax pow</i>	1	OTC
<i>healthylax pow</i>	1	OTC
<i>hm clearlax pow</i>	1	OTC
<i>lactulose solution 10 gm/15ml</i>	1	
<i>laxaclear pow</i>	1	OTC
<i>mm clearlax pow</i>	1	OTC
<i>natura-lax pow 3350 nf</i>	1	OTC
<i>Polyethylene glycol 3350 oral packet 17 gm</i>	1	OTC
<i>Polyethylene glycol 3350 oral powder 17 gm/scoop</i>	1	OTC
<i>ra laxative pow</i>	1	OTC
<i>sm clearlax pow</i>	1	OTC
<i>smooth lax pow</i>	1	OTC
<i>smooth lax pow 3350</i>	1	OTC
<i>smooth lax pow 3350 nf</i>	1	OTC

STIMULANT LAXATIVES

<i>alophen tab 5mg ec</i>	1	OTC
<i>bisacodyl suppos 10 mg</i>	1	OTC
<i>bisacodyl tab 5mg ec</i>	1	OTC
<i>choc laxativ chw 15mg</i>	1	OTC
<i>CORRECTOL MIS HERBAL</i>	1	OTC
<i>correctol tab 5mg ec</i>	1	OTC
<i>cvs c-lax tab 5mg</i>	1	OTC
<i>cvs laxative chw 15mg</i>	1	OTC
<i>cvs laxative tab 25mg</i>	1	OTC
<i>cvs senna tab 8.6mg</i>	1	OTC
<i>eq laxative tab 25mg</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
eql gentle tab laxative	1	OTC
eql laxative chw 15mg	1	OTC
eql laxative tab 5mg ec	1	OTC
eql laxative tab 25mg	1	OTC
evac-u-gen tab 8.6mg	1	OTC
EX-LAX CHW 15MG	1	OTC
ex-lax ultra tab 5mg ec	1	OTC
fast relief sup 10mg	1	OTC
feenamint tab 5mg ec	1	OTC
gentle laxat sup 10mg	1	OTC
gentle laxat tab 5mg ec	1	OTC
geri-kot tab 8.6mg	1	OTC
gnp gntl lax tab 5mg ec	1	OTC
gnp laxative tab 5mg ec	1	OTC
hm laxative tab 5mg	1	OTC
hm senna tab 8.6mg	1	OTC
kp bisacodyl tab 5mg ec	1	OTC
kp senna tab 8.6mg	1	OTC
laxative chw 15mg	1	OTC
laxative max tab 25mg	1	OTC
laxative reg tab 15mg	1	OTC
laxative sup 10mg	1	OTC
laxative tab 5mg ec	1	OTC
laxative tab 15mg	1	OTC
laxative tab 25mg	1	OTC
magic bullet sup 10mg	1	OTC
medi-lax tab 15mg	1	OTC
medi-natural tab 8.6mg	1	OTC
nat veg lax tab 8.6mg	1	OTC
natural lax tab 8.6mg	1	OTC
perdiem tab 15mg	1	OTC
px laxative tab 8.6mg	1	OTC
qc laxative sup 10mg	1	OTC
qc laxative tab 5mg ec	1	OTC
qc senna tab 8.6mg	1	OTC
ra laxative chw 15mg	1	OTC
ra laxative tab 5mg ec	1	OTC
sb bisacodyl tab 5mg ec	1	OTC
sb laxative sup 10mg	1	OTC
sb senna-lax tab 8.6mg	1	OTC
senna lax tab 8.6mg	1	OTC
senna laxati tab 8.6mg	1	OTC
senna smooth tab 15mg	1	OTC
SENNA SYP	1	OTC
senna-extra tab 17.2mg	1	OTC

Drug Name	Drug Tier	Requirements/Limits
senna-lax tab 8.6mg	1	OTC
senna-tabs tab 8.6mg	1	OTC
senna-time tab 8.6mg	1	OTC
sennazon syrup 8.8mg/5	1	OTC
sennosides cap 8.6 mg	1	OTC
sennosides syrup 8.8 mg/5ml	1	OTC
sennosides tab 8.6 mg	1	OTC
senokot extr tab 17.2mg	1	OTC
SENOKOT LAX CHW GUMMIES	1	OTC
SENOKOT TAB 8.6MG	1	OTC
sm gentle tab laxative	1	OTC
sm laxative sup 10mg	1	OTC
sm laxative tab 5mg ec	1	OTC
sm laxative tab 25mg	1	OTC
sm senna lax tab 8.6mg	1	OTC
womans laxat tab 5mg ec	1	OTC
womens laxat tab 5mg ec	1	OTC

SURFACTANT LAXATIVES

correctol cap 100mg	1	OTC
docu liq 50mg/5ml	1	OTC
docu liq 100/10ml	1	OTC
docusate calcium cap 240 mg	1	OTC
docusate sodium cap 100 mg	1	OTC
docusate sodium cap 250 mg	1	OTC
docusate sodium liquid 150 mg/15ml	1	OTC
docusate sodium syrup 60 mg/15ml	1	OTC
docusate sodium tab 100 mg	1	OTC
dok cap 100mg	1	OTC
dok tab 100mg	1	OTC
dulcolax pnk cap 100mg	1	OTC
dulcolax ss cap 100mg	1	OTC
easy-lax cap 100mg	1	OTC
eq stool cap softener	1	OTC
hm stool sof cap 100mg	1	OTC
move along tab 100mg	1	OTC
PEDIA-LAX LIQ 50MG	1	OTC
phillips cap 100mg	1	OTC
ra col-rite cap 100mg	1	OTC
ra col-rite cap 250mg	1	OTC
silace liq 10mg/ml	1	OTC
silace syrup 60/15ml	1	OTC
stool soft cap 240mg	1	OTC
stool soft cap 250mg	1	OTC
stool soften cap 100mg	1	OTC
stool soften cap 250mg	1	OTC

Drug Name	Drug Tier	Requirements/Limits
stool soften liq 50mg/5ml	1	OTC
stool softnr cap 50mg	1	OTC
stool softnr cap 100mg	1	OTC
stool softnr cap 240mg	1	OTC
stool softnr cap 250mg	1	OTC
stool softnr tab 100mg	1	OTC
surfak cap 240mg	1	OTC

MACROLIDES

AZITHROMYCIN

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

CLARITHROMYCIN

clarithromycin for susp 125 mg/5ml	1
clarithromycin for susp 250 mg/5ml	1
clarithromycin tab 250 mg	1
clarithromycin tab 500 mg	1
clarithromycin tab er 24hr 500 mg	1

ERYTHROMYCINS

e.e.s. 400 tab 400mg	1
erythrocin tab 250mg	1
erythromycin ethylsuccinate for susp 200 mg/5ml	1
erythromycin ethylsuccinate tab 400 mg	1
erythromycin tab 250 mg	1
erythromycin tab 500 mg	1
erythromycin w/ delayed release particles cap 250 mg	1

MEDICAL DEVICES AND SUPPLIES

BANDAGES-DRESSINGS-TAPE

ACT BRIGHTS MIS BANDAGES	1	OTC
ACT SPORT FM MIS 1-1/8"X3	1	OTC
ACT SPORT FM MIS ASSORTED	1	OTC
ACT SPORT FM MIS KNEE/ELB	1	OTC
ADH BANDAGE MIS ANTIBACT	1	OTC
ADH BANDAGE MIS CLEAR	1	OTC
ADH BANDAGE MIS FLEXIBLE	1	OTC
ADH BANDAGE MIS FOAM	1	OTC
ADH BANDAGE MIS FOAM TOE	1	OTC
ADH BANDAGE MIS HEALTH	1	OTC
ADH BANDAGE MIS HYPO-ALL	1	OTC

Drug Name	Drug Tier	Requirements/Limits
ADH BANDAGE MIS PLASTIC	1	OTC
ADH BANDAGE MIS RETENTIO	1	OTC
ADH BANDAGE MIS SHEER	1	OTC
ADH BANDAGE MIS STRONG	1	OTC
ADH BANDAGE MIS WTR SHLD	1	OTC
ADHESIVE PAD 2"X3"	1	OTC
ADHESIVE PAD 3"X4"	1	OTC
ADHESIVE PAD 4"X4"	1	OTC
ADHESIVE PAD 6"X6"	1	OTC
ADHESIVE PAD MIS LARGE	1	OTC
ADHESIVE PAD MIS MEDIUM	1	OTC
ADHESIVE PAD PAD 2.25"X3"	1	OTC
ADHESIVE PAD PAD 3"X4"	1	OTC
ADHESIVE PAD PAD ANTIBACT	1	OTC
ADV HEALING MIS BANDAGES	1	OTC
ADVANC CURAD MIS AQUA-PRO	1	OTC
ADVANC CURAD MIS BLISTER	1	OTC
ADVANC CURAD MIS COOL-WRP	1	OTC
ADVANC CURAD MIS SOF-GEL	1	OTC
ANIMAL PRINT MIS STRIPS	1	OTC
ANTI-BACTRIA MIS CHILD	1	OTC
ANTIBAC BNDG MIS 7/8"	1	OTC
ANTIBAC FABR MIS STRIPS	1	OTC
ANTIBACTERAI MIS BANDAGES	1	OTC
ANTIBACTERIA MIS BANDAGES	1	OTC
ANTIBACTERIA MIS CLEAR	1	OTC
BAND AID MED MIS BUTTRFLY	1	OTC
BAND AID MIS 1"	1	OTC
BAND-AID CLR MIS 7/8"SPOT	1	OTC
BAND-AID FAM MIS PACK	1	OTC
BAND-AID FLX MIS	1	OTC
BAND-AID FLX MIS 1" X 3"	1	OTC
BAND-AID FLX MIS 1"X3"	1	OTC
BAND-AID FLX MIS 3/4"X3"	1	OTC
BAND-AID FLX MIS ASSORTED	1	OTC
BAND-AID FLX MIS EXTRA LG	1	OTC
BAND-AID FLX MIS FABRIC	1	OTC
BAND-AID FLX MIS FINGRTIP	1	OTC
BAND-AID FLX MIS KNUCKLE	1	OTC
BAND-AID HYD MIS ALL-PURP	1	OTC
BAND-AID HYD MIS BLS CUSH	1	OTC
BAND-AID HYD MIS LARGE	1	OTC
BAND-AID LG MIS BUTTRFLY	1	OTC
BAND-AID MIS	1	OTC
BAND-AID MIS 3/4"X3"	1	OTC

Drug Name	Drug Tier	Requirements/Limits
BAND-AID MIS BABY SHA	1	OTC
BAND-AID MIS BLUE CLU	1	OTC
BAND-AID MIS DIS PRIN	1	OTC
BAND-AID MIS EMOJI	1	OTC
BAND-AID MIS FROZEN	1	OTC
BAND-AID MIS GLOW-DRK	1	OTC
BAND-AID MIS HL KITTY	1	OTC
BAND-AID MIS HOT COLR	1	OTC
BAND-AID MIS INCRED 2	1	OTC
BAND-AID MIS JUS LEAG	1	OTC
BAND-AID MIS MEDICATE	1	OTC
BAND-AID MIS MICK MOU	1	OTC
BAND-AID MIS MINIONS	1	OTC
BAND-AID MIS OURTONE	1	OTC
BAND-AID MIS POKEMON	1	OTC
BAND-AID MIS SHEER	1	OTC
BAND-AID MIS SHEER CF	1	OTC
BAND-AID MIS SKN FLX	1	OTC
BAND-AID MIS SPORT EX	1	OTC
BAND-AID MIS STAR WAR	1	OTC
BAND-AID MIS SUP MARI	1	OTC
BAND-AID MIS TOUGH	1	OTC
BAND-AID MIS TOUGH WP	1	OTC
BAND-AID MIS TOUGH XL	1	OTC
BAND-AID MIS TOUGH-ST	1	OTC
BAND-AID MIS TOY STRY	1	OTC
BAND-AID MIS TROLLS	1	OTC
BAND-AID MIS VARIETY	1	OTC
BAND-AID MIS WON WOM	1	OTC
BAND-AID MIS X-LG	1	OTC
BAND-AID PAD 2"X3"	1	OTC
BAND-AID PAD 3"X4"	1	OTC
BAND-AID PAD ADHESIVE	1	OTC
BAND-AID PAW MIS PATROL	1	OTC
BAND-AID WTR MIS BLC FLEX	1	OTC
BANDAGE FABR MIS EX-LONG	1	OTC
BANDAGE FABR MIS KNUC/FIN	1	OTC
BANDAGES FAB MIS 3/4"	1	OTC
BANDAGES FAB MIS ASSORTED	1	OTC
BLISTER REL MIS BANDAGE	1	OTC
BUTTERFLY MIS CLOSURES	1	OTC
CARPALAID MIS EMPLOYEE	1	OTC
CARPALAID MIS LARGE	1	OTC
CARPALAID MIS PRA LG	1	OTC
CARPALAID MIS PRAC SM	1	OTC

Drug Name	Drug Tier	Requirements/Limits
CARPALAID MIS SMALL	1	OTC
CLEAR BANDAG MIS 3/4"	1	OTC
COMFORT FAB MIS 3/4"X3"	1	OTC
COMFORT FAB MIS ASSORTED	1	OTC
COMFORT FAB MIS KNEE/ELB	1	OTC
COVERLET MIS STRIPS	1	OTC
CRAYON STRIP MIS BANDAGE	1	OTC
CURAD 7/8" MIS ACTIFLEX	1	OTC
CURAD ASSORT MIS ACTIFLEX	1	OTC
CURAD FAMILY MIS FLX ASST	1	OTC
CURAD FLEX MIS ASSORTED	1	OTC
CURAD KID SZ MIS DINOSAUR	1	OTC
CURAD MIS GODZILLA	1	OTC
CURAD MIS JURASSIC	1	OTC
CURAD SENSIT MIS 3/4"	1	OTC
CURAD SENSIT MIS ASSORTED	1	OTC
CURAD SENSIT MIS EX LARGE	1	OTC
CURAD SENSIT MIS SPOTS	1	OTC
CURAD WILD MIS DESIGNIT	1	OTC
CURAD WILD MIS TATTOO-U	1	OTC
CURITY CURAD MIS 3/4 FABR	1	OTC
CURITY CURAD MIS 3/4 PLAS	1	OTC
CURITY CURAD MIS 3/4 SHEE	1	OTC
CURITY CURAD MIS ASST FAB	1	OTC
CURITY CURAD MIS PLASTIC	1	OTC
CURITY CURAD MIS SHEER	1	OTC
CVS ANTI-BAC MIS	1	OTC
CVS ANTI-BAC MIS BANDAGE	1	OTC
CVS ANTI-BAC MIS WATERPRO	1	OTC
CVS CLEAR MIS BANDAGES	1	OTC
CVS FLEX FAB MIS BANDAG	1	OTC
CVS PLASTIC MIS BANDAGE	1	OTC
CVS SHEER BA MIS ASSORTED	1	OTC
CVS SHEER MIS BAND 1"	1	OTC
CVS SHEER MIS BAND XL	1	OTC
CVS SPOT BAN MIS SHEER	1	OTC
EASY RELEASE PAD NONSTICK	1	OTC
EQ STRONG MIS STRIPS	1	OTC
EQL BUTTERFL MIS CLOSURE	1	OTC
EQL FIRST MIS AID BAND	1	OTC
EQL FLEXIBLE MIS FABRIC	1	OTC
EQL FLEXIBLE MIS FOAM	1	OTC
EQL GENTLE MIS STRIPS	1	OTC
EQL HVY DUTY MIS STRIPS	1	OTC
EQL PLASTIC MIS STRIPS	1	OTC

Drug Name	Drug Tier	Requirements/Limits
EQL SHEER MIS SPOTS	1	OTC
EQL SHEER MIS STRIPS	1	OTC
EQL STRIPS MIS	1	OTC
FABRIC BANDG MIS ASSORTED	1	OTC
FABRIC BANDG MIS FLEXIBLE	1	OTC
FIRST AID MIS FLEX FAB	1	OTC
FIRST AID NO PAD STICK	1	OTC
FLEX BANDAGE MIS	1	OTC
FLEX BANDAGE MIS FABRIC	1	OTC
GNP BANDAGES MIS	1	OTC
GNP BANDAGES MIS 1"X3"	1	OTC
GNP BANDAGES MIS 2"X4"	1	OTC
GNP BANDAGES MIS 3/4"X3"	1	OTC
GNP BANDAGES MIS ASSORTED	1	OTC
GNP BANDAGES MIS CLEAR	1	OTC
GNP BANDAGES MIS SHEER	1	OTC
GNTL ADHESVE MIS BNDG XL	1	OTC
HEAVY DUTY MIS BANDAGES	1	OTC
HEAVY DUTY MIS CLR&TGH	1	OTC
HEAVY DUTY MIS FAB BAND	1	OTC
HM BUTTERFLY MIS CLOSURES	1	OTC
HYPO-ALLERG MIS BANDAGE	1	OTC
J & J ADHES PAD LARGE	1	OTC
LEUKOSTRIp MIS 1/2"X4"	1	OTC
LEUKOSTRIp MIS 1/4"X3"	1	OTC
LEUKOSTRIp MIS 1/4"X4"	1	OTC
LEUKOSTRIp MIS 1/8X1.5"	1	OTC
MOLESKIN PAD FOAM	1	OTC
NEON STRIPS MIS 3/4 ASST	1	OTC
NEXCARE TATT MIS BANDAGES	1	OTC
NEXCARE WATR MIS PRF BAND	1	OTC
PEANUTS MIS BANDAGES	1	OTC
PLAS BANDAGE MIS 3/4"X3"	1	OTC
PLASTC BANDG MIS 3/4"	1	OTC
PLASTIC MIS BANDAGES	1	OTC
POLYMEM DOT PAD 2" X 2"	1	OTC
PROXI-STRIP MIS 1/4"X4"	1	OTC
PROXI-STRIPS MIS 1/2"X4"	1	OTC
RA ADHESIVE MIS BANDAGES	1	OTC
RA SHEER ADH PAD LARGE	1	OTC
SHEER ADHESI MIS 3/4"X3"	1	OTC
SHEER BANDGE MIS	1	OTC
SHEER BANDGE MIS 1"	1	OTC
SHEER BANDGE MIS EX-LARGE	1	OTC
SHR BANDAGES MIS	1	OTC

Drug Name	Drug Tier	Requirements/Limits
SHR BANDAGES MIS 3/4"	1	OTC
SHR BANDAGES MIS ASSORTED	1	OTC
SHR BANDAGES MIS EX-LARGE	1	OTC
SM ADHESIVE PAD 2"X3"	1	OTC
SM ADHESIVE PAD 3"X4"	1	OTC
SM BANDAGES MIS ANTIBACT	1	OTC
SM BANDAGES MIS CLEAR	1	OTC
SM BANDAGES MIS CLR SPOT	1	OTC
SM BANDAGES MIS FAB 3/4"	1	OTC
SM BANDAGES MIS FAB XL	1	OTC
SM BANDAGES MIS FLEXIBLE	1	OTC
SM BANDAGES MIS FOAM	1	OTC
SM BANDAGES MIS FOAM XL	1	OTC
SM BANDAGES MIS PLASTIC	1	OTC
SM BANDAGES MIS SHEER	1	OTC
SM BANDAGES MIS SHEER XL	1	OTC
SM BANDAGES MIS STRNG ST	1	OTC
SM BANDAGES MIS WTRSHELD	1	OTC
SM KNUCKLE/ MIS FINGERTP	1	OTC
SM STRONG MIS STRIPS	1	OTC
SM STURDY MIS STRIP	1	OTC
SOFT 'N FLEX MIS	1	OTC
SORESPOT MIS BANDAGES	1	OTC
STERI-STRIP MIS	1	OTC
STERI-STRIP MIS 1" X 5"	1	OTC
STERI-STRIP MIS 1/2"X2"	1	OTC
STERI-STRIP MIS 1/2"X4"	1	OTC
STERI-STRIP MIS 1/4"X1.5	1	OTC
STERI-STRIP MIS 1/4"X3"	1	OTC
STERI-STRIP MIS 1/4"X4"	1	OTC
STERI-STRIP MIS 1/8"X3"	1	OTC
STRONG STRIP MIS WATERPRF	1	OTC
SUPERSTRIP MIS 1" X 3"	1	OTC
SURESEAL MIS EX LARGE	1	OTC
SURESEAL MIS K	1	OTC
SURESEAL MIS LARGE	1	OTC
VARIETY PACK MIS BANDAGES	1	OTC
WATERPROOF MIS BANDAGES	1	OTC
WATERPROOF PAD 3"X4"	1	OTC
WATERSHIELD MIS BANDAGES	1	OTC
WTERPRF BAND MIS CLEAR	1	OTC
CONTRACEPTIVES		
AIMSCO MIS LUBRICAT	1	QL (12 condoms / 1 day), OTC

Drug Name	Drug Tier	Requirements/Limits
COLOR CONDOM MIS + LUBE	1	QL (12 condoms / 1 day), OTC
CONDOMS MIS	1	QL (12 condoms / 1 day), OTC
CONDOMS MIS LUBRICAT	1	QL (12 condoms / 1 day), OTC
DUREX EXTRA MIS SENSITIV	1	QL (12 condoms / 1 day), OTC
DUREX MIS REALFEEL	1	QL (12 condoms / 1 day), OTC
FANTASY LUBR MIS	1	QL (12 condoms / 1 day), OTC
FANTASY LUBR MIS COLORS	1	QL (12 condoms / 1 day), OTC
FANTASY LUBR MIS SPERMICI	1	QL (12 condoms / 1 day), OTC
FANTASY MIS LUBRICAT	1	QL (12 condoms / 1 day), OTC
FC FEMALE MIS CONDOM	1	QL (12 condoms / 1 day), OTC
K-Y ME & YOU MIS EX LUBRI	1	QL (12 condoms / 1 day), OTC
K-Y ME & YOU MIS INTENSE	1	QL (12 condoms / 1 day), OTC
KAMELEON LUB MIS COLORS	1	QL (12 condoms / 1 day), OTC
KAMELEON MIS TRI-COLR	1	QL (12 condoms / 1 day), OTC
KIMONO COLOR MIS	1	QL (12 condoms / 1 day), OTC
KIMONO MICRO MIS THIN	1	QL (12 condoms / 1 day), OTC
KIMONO MICRO MIS THIN +	1	QL (12 condoms / 1 day), OTC
KIMONO MICRO MIS THIN PLS	1	QL (12 condoms / 1 day), OTC
KIMONO MIS LUBRICAT	1	QL (12 condoms / 1 day), OTC
KIMONO MIS SENSATIO	1	QL (12 condoms / 1 day), OTC
KIMONO PLUS MIS LUBRICAT	1	QL (12 condoms / 1 day), OTC
KIMONO PLUS MIS SPERMICI	1	QL (12 condoms / 1 day), OTC
KIMONO PS MIS LUBRICAT	1	QL (12 condoms / 1 day), OTC
KIMONO PS MIS PLUS	1	QL (12 condoms / 1 day), OTC

Drug Name	Drug Tier	Requirements/Limits
KIMONO SENSA MIS PLUS	1	QL (12 condoms / 1 day), OTC
KIMONO SPEC MIS	1	QL (12 condoms / 1 day), OTC
MAXX MIS LUBRICAT	1	QL (12 condoms / 1 day), OTC
MAXX PLUS MIS SPERMICI	1	QL (12 condoms / 1 day), OTC
NATURAL COND MIS + LUBE	1	QL (12 condoms / 1 day), OTC
OMNIFLEX DPR	1	QL (1 box / year)
REALITY MIS LUBRICAT	1	QL (12 condoms / 1 day), OTC
REALITY ULTR MIS TEXTURED	1	QL (12 condoms / 1 day), OTC
REALITY ULTR MIS THIN	1	QL (12 condoms / 1 day), OTC
TRUSTEX LUBR MIS ASSORTED	1	QL (12 condoms / 1 day), OTC
TRUSTEX LUBR MIS BANANA	1	QL (12 condoms / 1 day), OTC
TRUSTEX LUBR MIS CHOC	1	QL (12 condoms / 1 day), OTC
TRUSTEX LUBR MIS COLA	1	QL (12 condoms / 1 day), OTC
TRUSTEX LUBR MIS COLORS	1	QL (12 condoms / 1 day), OTC
TRUSTEX LUBR MIS EX LARGE	1	QL (12 condoms / 1 day), OTC
TRUSTEX LUBR MIS EX STR	1	QL (12 condoms / 1 day), OTC
TRUSTEX LUBR MIS GRAPE	1	QL (12 condoms / 1 day), OTC
TRUSTEX LUBR MIS MINT	1	QL (12 condoms / 1 day), OTC
TRUSTEX LUBR MIS RIB/STUD	1	QL (12 condoms / 1 day), OTC
TRUSTEX LUBR MIS SPERMICI	1	QL (12 condoms / 1 day), OTC
TRUSTEX LUBR MIS STRWBRY	1	QL (12 condoms / 1 day), OTC
TRUSTEX LUBR MIS VANILLA	1	QL (12 condoms / 1 day), OTC
TRUSTEX MIS BANANA	1	QL (12 condoms / 1 day), OTC
TRUSTEX MIS CHOCOLAT	1	QL (12 condoms / 1 day), OTC

Drug Name	Drug Tier	Requirements/Limits
TRUSTEX MIS FLAVORS	1	QL (12 condoms / 1 day), OTC
TRUSTEX MIS MINT	1	QL (12 condoms / 1 day), OTC
TRUSTEX MIS STRWBRY	1	QL (12 condoms / 1 day), OTC
TRUSTEX MIS VANILLA	1	QL (12 condoms / 1 day), OTC
TRUSTEX/RIA MIS LUBRICAT	1	QL (12 condoms / 1 day), OTC
TRUSTEX/RIA MIS NON-LUB	1	QL (12 condoms / 1 day), OTC
TRUSTEX/RIA MIS SPERMICI	1	QL (12 condoms / 1 day), OTC
TRUSTX NON-9 MIS RIB/STUD	1	QL (12 condoms / 1 day), OTC

DIABETIC SUPPLIES

ACCU-CHEK MIS MLTICLIX	1	QL (200 lancets / 25 days), OTC
ACTI-LANCE MIS 28G	1	QL (200 lancets / 25 days), OTC
ACTI-LANCE MIS LITE 28G	1	QL (200 lancets / 25 days), OTC
ACTI-LANCE MIS SPEC 17G	1	QL (200 lancets / 25 days), OTC
ACTI-LANCE MIS UNIV 23G	1	QL (200 lancets / 25 days), OTC
ADV TRAVEL MIS LANC 28G	1	QL (200 lancets / 25 days), OTC
ADVCATE SAFE MIS LANC 26G	1	QL (200 lancets / 25 days), OTC
ADVOCATE MIS LANC 30G	1	QL (200 lancets / 25 days), OTC
ADVOCATE MIS LANCETS	1	QL (200 lancets / 25 days), OTC
AGAMATRIX MIS 33G	1	QL (200 lancets / 25 days), OTC
AIMSCO TWIST MIS 32G	1	QL (200 lancets / 25 days), OTC
AIMSCO TWIST MIS 33G	1	QL (200 lancets / 25 days), OTC
AQUALANCE MIS 30G	1	QL (200 lancets / 25 days), OTC
ASSURE CMFRT MIS 28G	1	QL (200 lancets / 25 days), OTC
ASSURE LANCE MIS 21G	1	QL (200 lancets / 25 days), OTC

Drug Name	Drug Tier	Requirements/Limits
ASSURE LANCE MIS 28G	1	QL (200 lancets / 25 days), OTC
ASSURE LANCE MIS LOW FLOW	1	QL (200 lancets / 25 days), OTC
ASSURE LANCE MIS MICRO	1	QL (200 lancets / 25 days), OTC
ASSURE LANCE MIS SAFE 25G	1	QL (200 lancets / 25 days), OTC
ASSURE LANCE MIS SAFE 30G	1	QL (200 lancets / 25 days), OTC
ASSURE PLUS MIS HIGH 18G	1	QL (200 lancets / 25 days), OTC
ASSURE PLUS MIS LOW 25G	1	QL (200 lancets / 25 days), OTC
ASSURE PLUS MIS MCRO 28G	1	QL (200 lancets / 25 days), OTC
ASSURE PLUS MIS NORM 21G	1	QL (200 lancets / 25 days), OTC
ASSURE PLUS MIS PEDIATRI	1	QL (200 lancets / 25 days), OTC
AURORA LANCE MIS 30G	1	QL (200 lancets / 25 days), OTC
AURORA LANCE MIS THIN 23G	1	QL (200 lancets / 25 days), OTC
AUTO LANCET MIS	1	QL (200 lancets / 25 days), OTC
BD LANCET UF MIS 30G	1	QL (200 lancets / 25 days), OTC
BD LANCET UF MIS 33G	1	QL (200 lancets / 25 days), OTC
BD MICROTAIN MIS LANCETS	1	QL (200 lancets / 25 days), OTC
CAREONE LANC MIS 30G	1	QL (200 lancets / 25 days), OTC
CAREONE LANC MIS THIN 23G	1	QL (200 lancets / 25 days), OTC
CARESENS 30G MIS LANCETS	1	QL (200 lancets / 25 days), OTC
CARETOUCH MIS LANC 26G	1	QL (200 lancets / 25 days), OTC
CARETOUCH MIS LANC 28G	1	QL (200 lancets / 25 days), OTC
CARETOUCH MIS LANC 30G	1	QL (200 lancets / 25 days), OTC
CARETOUCH MIS TWIST 28	1	QL (200 lancets / 25 days), OTC
CARETOUCH MIS TWIST 30	1	QL (200 lancets / 25 days), OTC

Drug Name	Drug Tier	Requirements/Limits
CARETOUCH MIS TWIST 33	1	QL (200 lancets / 25 days), OTC
CLEANLET 28G MIS LANCETS	1	QL (200 lancets / 25 days), OTC
CLEVER CHECK MIS	1	QL (200 lancets / 25 days), OTC
CLEVER CHECK MIS 30G	1	QL (200 lancets / 25 days), OTC
COAGUCHEK MIS LANCETS	1	QL (200 lancets / 25 days), OTC
COMFORT ASSU MIS LANC 28G	1	QL (200 lancets / 25 days), OTC
COMFORT ASSU MIS LANC 33G	1	QL (200 lancets / 25 days), OTC
COMFORT EZ MIS 21G	1	QL (200 lancets / 25 days), OTC
COMFORT EZ MIS 23G	1	QL (200 lancets / 25 days), OTC
COMFORT EZ MIS 28G	1	QL (200 lancets / 25 days), OTC
COMFORT MIS LANCETS	1	QL (200 lancets / 25 days), OTC
COMFORT TCH MIS LANC 30G	1	QL (200 lancets / 25 days), OTC
COMFORT TCH MIS LANC 31G	1	QL (200 lancets / 25 days), OTC
COMFORTOUCH MIS LANCET	1	QL (200 lancets / 25 days), OTC
CVS LANCETS MIS 21G	1	QL (200 lancets / 25 days), OTC
CVS LANCETS MIS 30G	1	QL (200 lancets / 25 days), OTC
CVS LANCETS MIS 33G	1	QL (200 lancets / 25 days), OTC
CVS LANCETS MIS ORIGINAL	1	QL (200 lancets / 25 days), OTC
CVS LANCETS MIS THIN 26G	1	QL (200 lancets / 25 days), OTC
CVS LANCETS MIS THIN 30G	1	QL (200 lancets / 25 days), OTC
CVS LANCETS MIS THIN 33G	1	QL (200 lancets / 25 days), OTC
DIATHRIVE MIS LANCETS	1	QL (200 lancets / 25 days), OTC
DIATHRIVE MIS UT 30G	1	QL (200 lancets / 25 days), OTC
DROPLET LANC MIS 30G	1	QL (200 lancets / 25 days), OTC

Drug Name	Drug Tier	Requirements/Limits
DROPLET PERS MIS LANC 30G	1	QL (200 lancets / 25 days), OTC
E-Z JECT MIS 21G	1	QL (200 lancets / 25 days), OTC
E-Z JECT MIS 21G COLR	1	QL (200 lancets / 25 days), OTC
E-Z JECT MIS 30G	1	QL (200 lancets / 25 days), OTC
E-Z JECT MIS 32G COLR	1	QL (200 lancets / 25 days), OTC
E-Z JECT MIS LANC 21G	1	QL (200 lancets / 25 days), OTC
E-Z JECT MIS THIN 26G	1	QL (200 lancets / 25 days), OTC
E-ZJECT LANC MIS 33G	1	QL (200 lancets / 25 days), OTC
EASY COMFORT MIS 30G	1	QL (200 lancets / 25 days), OTC
EASY COMFORT MIS LANC/30G	1	QL (200 lancets / 25 days), OTC
EASY COMFORT MIS TWIST	1	QL (200 lancets / 25 days), OTC
EASY TOUCH MIS LANC/21G	1	QL (200 lancets / 25 days), OTC
EASY TOUCH MIS LANC/23G	1	QL (200 lancets / 25 days), OTC
EASY TOUCH MIS LANC/26G	1	QL (200 lancets / 25 days), OTC
EASY TOUCH MIS LANC/28G	1	QL (200 lancets / 25 days), OTC
EASY TOUCH MIS LANC/30G	1	QL (200 lancets / 25 days), OTC
EASY TOUCH MIS LANC/32G	1	QL (200 lancets / 25 days), OTC
EASY TOUCH MIS LANC/33G	1	QL (200 lancets / 25 days), OTC
EMBRACE LANC MIS 21G	1	QL (200 lancets / 25 days), OTC
EMBRACE LANC MIS 28G	1	QL (200 lancets / 25 days), OTC
EMBRACE LANC MIS THIN 30G	1	QL (200 lancets / 25 days), OTC
EQL LANCETS MIS 21G COLR	1	QL (200 lancets / 25 days), OTC
EQL LANCETS MIS 33G COLR	1	QL (200 lancets / 25 days), OTC
EQL LANCETS MIS THIN 26G	1	QL (200 lancets / 25 days), OTC

Drug Name	Drug Tier	Requirements/Limits
EQL LANCETS MIS THIN 30G	1	QL (200 lancets / 25 days), OTC
EZ-LETS 21G MIS LANCETS	1	QL (200 lancets / 25 days), OTC
EZ-LETS 26G MIS LANCETS	1	QL (200 lancets / 25 days), OTC
EZ-LETS 28G MIS LANCETS	1	QL (200 lancets / 25 days), OTC
EZ-LETS 30G MIS LANCETS	1	QL (200 lancets / 25 days), OTC
FASTCLIX MIS LANCETS	1	QL (200 lancets / 25 days), OTC
FIFTY50 SAFE MIS LANCETS	1	QL (200 lancets / 25 days), OTC
FINE 30 MIS	1	QL (200 lancets / 25 days), OTC
FINGERSTIX MIS LANCETS	1	QL (200 lancets / 25 days), OTC
FORA LANCETS MIS 30G	1	QL (200 lancets / 25 days), OTC
FORA MIS LANCETS	1	QL (200 lancets / 25 days), OTC
FREESTYLE MIS LANCETS	1	QL (200 lancets / 25 days), OTC
FREESTYLE MIS UNISTICK	1	QL (200 lancets / 25 days), OTC
GENTEEL MIS LANCETS	1	QL (200 lancets / 25 days), OTC
GENTLE-LET MIS 26G	1	QL (200 lancets / 25 days), OTC
GENTLE-LET MIS 28G	1	QL (200 lancets / 25 days), OTC
GENTLE-LET MIS LANCETS	1	QL (200 lancets / 25 days), OTC
GLOBAL 28G MIS LANCETS	1	QL (200 lancets / 25 days), OTC
GLOBAL 30G MIS LANCETS	1	QL (200 lancets / 25 days), OTC
GLUCOCOM MIS 28G	1	QL (200 lancets / 25 days), OTC
GLUCOCOM MIS 30G	1	QL (200 lancets / 25 days), OTC
GLUCOCOM MIS 33G	1	QL (200 lancets / 25 days), OTC
GNP LANCETS MIS 21G	1	QL (200 lancets / 25 days), OTC
GNP LANCETS MIS 28G	1	QL (200 lancets / 25 days), OTC

Drug Name	Drug Tier	Requirements/Limits
GNP LANCETS MIS 30G	1	QL (200 lancets / 25 days), OTC
GNP LANCETS MIS 33G	1	QL (200 lancets / 25 days), OTC
GNP LANCETS MIS THIN 26G	1	QL (200 lancets / 25 days), OTC
GOJJI LANCET MIS 30G	1	QL (200 lancets / 25 days), OTC
GOODSENSE MIS LANC 26G	1	QL (200 lancets / 25 days), OTC
GOODSENSE MIS LANC 30G	1	QL (200 lancets / 25 days), OTC
GOODSENSE MIS LANC 33G	1	QL (200 lancets / 25 days), OTC
HAEMOLANCE MIS HIGH FLO	1	QL (200 lancets / 25 days), OTC
HAEMOLANCE MIS LOW FLOW	1	QL (200 lancets / 25 days), OTC
HAEMOLANCE MIS PLUS	1	QL (200 lancets / 25 days), OTC
HAEMOLANCE MIS PLUS LOW	1	QL (200 lancets / 25 days), OTC
HAEMOLANCE MIS PLUS MAX	1	QL (200 lancets / 25 days), OTC
HAEMOLANCE MIS PLUS PED	1	QL (200 lancets / 25 days), OTC
HAEMOLANCE MIS RETRACT	1	QL (200 lancets / 25 days), OTC
HLTHY ACCNTS MIS LANC 30G	1	QL (200 lancets / 25 days), OTC
IN TOUCH LAN MIS 30G	1	QL (200 lancets / 25 days), OTC
INCONTROL MIS LANC 28G	1	QL (200 lancets / 25 days), OTC
INCONTROL MIS LANC 30G	1	QL (200 lancets / 25 days), OTC
INCONTROL MIS LANC 33G	1	QL (200 lancets / 25 days), OTC
KINNEY MIS LANCETS	1	QL (200 lancets / 25 days), OTC
KINNEY THIN MIS LANCETS	1	QL (200 lancets / 25 days), OTC
KROGER LANCE MIS	1	QL (200 lancets / 25 days), OTC
KROGER LANCE MIS 26G	1	QL (200 lancets / 25 days), OTC
KROGER LANCE MIS THIN	1	QL (200 lancets / 25 days), OTC

Drug Name	Drug Tier	Requirements/Limits
KROGER LANCE MIS THIN 30G	1	QL (200 lancets / 25 days), OTC
LANCET MICRO MIS THIN 33G	1	QL (200 lancets / 25 days), OTC
LANCET STAND MIS 21G	1	QL (200 lancets / 25 days), OTC
LANCET SUPER MIS THIN 30G	1	QL (200 lancets / 25 days), OTC
LANCET ULTRA MIS 28G	1	QL (200 lancets / 25 days), OTC
LANCET ULTRA MIS THIN 30G	1	QL (200 lancets / 25 days), OTC
LANCETS MICR MIS THIN 33G	1	QL (200 lancets / 25 days), OTC
LANCETS MIS	1	QL (200 lancets / 25 days), OTC
LANCETS MIS 21G	1	QL (200 lancets / 25 days), OTC
LANCETS MIS 21G COLR	1	QL (200 lancets / 25 days), OTC
LANCETS MIS 26G	1	QL (200 lancets / 25 days), OTC
LANCETS MIS 28G	1	QL (200 lancets / 25 days), OTC
LANCETS MIS 30G	1	QL (200 lancets / 25 days), OTC
LANCETS MIS 33G	1	QL (200 lancets / 25 days), OTC
LANCETS MIS ORANGE	1	QL (200 lancets / 25 days), OTC
LANCETS MIS ORIGINAL	1	QL (200 lancets / 25 days), OTC
LANCETS MIS THIN	1	QL (200 lancets / 25 days), OTC
LANCETS MIS THIN 26G	1	QL (200 lancets / 25 days), OTC
LANCETS MIS THIN 30G	1	QL (200 lancets / 25 days), OTC
LANCETS SUPR MIS THIN 28G	1	QL (200 lancets / 25 days), OTC
LANCETS THIN MIS	1	QL (200 lancets / 25 days), OTC
LANCETS THIN MIS 26G	1	QL (200 lancets / 25 days), OTC
LANCETS ULTR MIS THIN	1	QL (200 lancets / 25 days), OTC
LB LANCET MIS 28G	1	QL (200 lancets / 25 days), OTC

Drug Name	Drug Tier	Requirements/Limits
LIFESCAN MIS UNISTIK2	1	QL (200 lancets / 25 days), OTC
LITE TOUCH MIS LANCETS	1	QL (200 lancets / 25 days), OTC
LITETOUCH MIS LANCETS	1	QL (200 lancets / 25 days), OTC
LONGS LANCET MIS STANDARD	1	QL (200 lancets / 25 days), OTC
LONGS LANCET MIS THIN	1	QL (200 lancets / 25 days), OTC
LONGS LANCET MIS ULTRA TH	1	QL (200 lancets / 25 days), OTC
MEDICHOICE MIS LANCET	1	QL (200 lancets / 25 days), OTC
MEDLANCE MIS 30G PLUS	1	QL (200 lancets / 25 days), OTC
MEDLANCE MIS EXTR 21G	1	QL (200 lancets / 25 days), OTC
MEDLANCE MIS LITE 25G	1	QL (200 lancets / 25 days), OTC
MEDLANCE MIS PLUS	1	QL (200 lancets / 25 days), OTC
MEDLANCE MIS PLUS 30G	1	QL (200 lancets / 25 days), OTC
MEDLANCE MIS UNV 21G	1	QL (200 lancets / 25 days), OTC
MEDLANCE PLS MIS 0.8MM	1	QL (200 lancets / 25 days), OTC
MEDLANCE PLS MIS EXTR 21G	1	QL (200 lancets / 25 days), OTC
MEDLANCE PLS MIS LITE 25G	1	QL (200 lancets / 25 days), OTC
MEDLANCE PLS MIS UNIV 21G	1	QL (200 lancets / 25 days), OTC
MEIJER LANCE MIS COLOR	1	QL (200 lancets / 25 days), OTC
MEIJER LANCE MIS UNIV 21G	1	QL (200 lancets / 25 days), OTC
MEIJER LANCE MIS UNIV 30G	1	QL (200 lancets / 25 days), OTC
MEIJER LANCE MIS UNIVERSA	1	QL (200 lancets / 25 days), OTC
MEIJER MIS LANCETS	1	QL (200 lancets / 25 days), OTC
MICRO THIN MIS LANC 33G	1	QL (200 lancets / 25 days), OTC
MICROLET MIS LANCETS	1	QL (200 lancets / 25 days), OTC

Drug Name	Drug Tier	Requirements/Limits
MM TWIST MIS LANCETS	1	QL (200 lancets / 25 days), OTC
MOBILE LANCE MIS 30G	1	QL (200 lancets / 25 days), OTC
MONOLET MIS LANCETS	1	QL (200 lancets / 25 days), OTC
MONOLET OPD MIS LANCETS	1	QL (200 lancets / 25 days), OTC
MONOLETTOR MIS LANCETS	1	QL (200 lancets / 25 days), OTC
MPD SFTY LAN MIS 21G	1	QL (200 lancets / 25 days), OTC
MPD SFTY LAN MIS 23G	1	QL (200 lancets / 25 days), OTC
MPD SFTY LAN MIS 28G	1	QL (200 lancets / 25 days), OTC
MPD SFTY LAN MIS 30G	1	QL (200 lancets / 25 days), OTC
MYGLUCOHEALT MIS LANC 30G	1	QL (200 lancets / 25 days), OTC
NOVA SAFETY MIS LANC 23G	1	QL (200 lancets / 25 days), OTC
NOVA SAFETY MIS LANC 28G	1	QL (200 lancets / 25 days), OTC
NOVA SURE MIS LANCETS	1	QL (200 lancets / 25 days), OTC
ON-THE-GO MIS LANC 30G	1	QL (200 lancets / 25 days), OTC
ONE TOUCH KIT VERIO FL	1	OTC
ONETOUCH DEL MIS PLUS 30G	1	QL (200 lancets / 25 days), OTC
ONETOUCH DEL MIS PLUS 33G	1	QL (200 lancets / 25 days), OTC
ONETOUCH FP MIS LANCETS	1	QL (200 lancets / 25 days), OTC
ONETOUCH KIT ULT MINI	1	OTC
ONETOUCH KIT ULTRA 2	1	OTC
ONETOUCH KIT VERIO	1	OTC
ONETOUCH KIT VERIO FL	1	OTC
ONETOUCH KIT VERIO IQ	1	OTC
ONETOUCH KIT VERIO RE	1	OTC
ONETOUCH MIS 30G	1	QL (200 lancets / 25 days), OTC
ONETOUCH MIS LANCETS	1	QL (200 lancets / 25 days), OTC
ONETOUCH US MIS LANCETS	1	QL (200 lancets / 25 days), OTC

Drug Name	Drug Tier	Requirements/Limits
ONETOUCH VER KIT SYNC	1	OTC
PC LANCETS MIS 30G	1	QL (200 lancets / 25 days), OTC
PERFECT 28G MIS LANCETS	1	QL (200 lancets / 25 days), OTC
PERFECT 30G MIS LANCETS	1	QL (200 lancets / 25 days), OTC
PHARMACY COU MIS LANCETS	1	QL (200 lancets / 25 days), OTC
PIP LANCETS MIS 28G	1	QL (200 lancets / 25 days), OTC
PIP LANCETS MIS 30G	1	QL (200 lancets / 25 days), OTC
PRO COMFORT MIS 31G	1	QL (200 lancets / 25 days), OTC
PRO COMFORT MIS LANCETS	1	QL (200 lancets / 25 days), OTC
PRODIGY MIS 26G	1	QL (200 lancets / 25 days), OTC
PRODIGY MIS 28G	1	QL (200 lancets / 25 days), OTC
PSS SAFE LAN MIS	1	QL (200 lancets / 25 days), OTC
PSS SEL LANC MIS	1	QL (200 lancets / 25 days), OTC
PURE COMFORT MIS 30G LAN	1	QL (200 lancets / 25 days), OTC
PX LANCETS MIS 28G	1	QL (200 lancets / 25 days), OTC
PX LANCETS MIS 33G	1	QL (200 lancets / 25 days), OTC
PX LANCETS MIS ULT THIN	1	QL (200 lancets / 25 days), OTC
QC LANCETS MIS 28G	1	QL (200 lancets / 25 days), OTC
QC LANCETS MIS 30G	1	QL (200 lancets / 25 days), OTC
RA E-ZJECT MIS 28G	1	QL (200 lancets / 25 days), OTC
RA E-ZJECT MIS THIN 26G	1	QL (200 lancets / 25 days), OTC
RA E-ZJECT MIS THIN 28G	1	QL (200 lancets / 25 days), OTC
RA E-ZJECT MIS ULT THIN	1	QL (200 lancets / 25 days), OTC
READYLANCE MIS 21G	1	QL (200 lancets / 25 days), OTC

Drug Name	Drug Tier	Requirements/Limits
READYLANCE MIS 23G	1	QL (200 lancets / 25 days), OTC
READYLANCE MIS 26G	1	QL (200 lancets / 25 days), OTC
READYLANCE MIS 28G	1	QL (200 lancets / 25 days), OTC
READYLANCE MIS 30G	1	QL (200 lancets / 25 days), OTC
REALITY MIS LANCETS	1	QL (200 lancets / 25 days), OTC
REALITY TRIG MIS LANCETS	1	QL (200 lancets / 25 days), OTC
RELION LANCE MIS THIN 26G	1	QL (200 lancets / 25 days), OTC
RELION LANCE MIS THIN 30G	1	QL (200 lancets / 25 days), OTC
RELION MICRO MIS THIN 33G	1	QL (200 lancets / 25 days), OTC
RELION ULTRA MIS THIN 30G	1	QL (200 lancets / 25 days), OTC
RELION ULTRA MIS THIN PLS	1	QL (200 lancets / 25 days), OTC
RIGHTEST MIS GL300	1	QL (200 lancets / 25 days), OTC
SAFE-T-LANCE MIS 21G	1	QL (200 lancets / 25 days), OTC
SAFE-T-LANCE MIS 25G	1	QL (200 lancets / 25 days), OTC
SAFE-T-LANCE MIS HI FLOW	1	QL (200 lancets / 25 days), OTC
SAFE-T-LANCE MIS LOW FLOW	1	QL (200 lancets / 25 days), OTC
SAFE-T-LANCE MIS NOR FLOW	1	QL (200 lancets / 25 days), OTC
SAFE-T-PRO MIS LANCETS	1	QL (200 lancets / 25 days), OTC
SAFE-T-PRO MIS PLUS	1	QL (200 lancets / 25 days), OTC
SAFETY 21G MIS LANCETS	1	QL (200 lancets / 25 days), OTC
SAFETY 28G MIS LANCETS	1	QL (200 lancets / 25 days), OTC
SAFETY 30G MIS LANCETS	1	QL (200 lancets / 25 days), OTC
SAFETY MIS LANCETS	1	QL (200 lancets / 25 days), OTC
SAPS HEALTH MIS TWIST	1	QL (200 lancets / 25 days), OTC

Drug Name	Drug Tier	Requirements/Limits
SAPS TWIST MIS 30G	1	QL (200 lancets / 25 days), OTC
SAPSCARE MIS TWIST	1	QL (200 lancets / 25 days), OTC
SB LANCETS MIS THIN	1	QL (200 lancets / 25 days), OTC
SB LANCETS MIS ULTR THN	1	QL (200 lancets / 25 days), OTC
SINGLE-LET MIS 23G	1	QL (200 lancets / 25 days), OTC
SM LANCETS MIS 33G	1	QL (200 lancets / 25 days), OTC
SMART SENSE MIS LANC 21G	1	QL (200 lancets / 25 days), OTC
SMART SENSE MIS LANC 26G	1	QL (200 lancets / 25 days), OTC
SMART SENSE MIS LANC 30G	1	QL (200 lancets / 25 days), OTC
SMART SENSE MIS LANC 33G	1	QL (200 lancets / 25 days), OTC
SMARTEST MIS LANCETS	1	QL (200 lancets / 25 days), OTC
SOFTCLIX MIS LANCETS	1	QL (200 lancets / 25 days), OTC
SOLUS V2 MIS LANC 28G	1	QL (200 lancets / 25 days), OTC
SOLUS V2 MIS LANC 30G	1	QL (200 lancets / 25 days), OTC
STERILANCE MIS TL 28G	1	QL (200 lancets / 25 days), OTC
STERILANCE MIS TL 30G	1	QL (200 lancets / 25 days), OTC
STERILANCE MIS TL 32G	1	QL (200 lancets / 25 days), OTC
SUPER THIN MIS LANC 28G	1	QL (200 lancets / 25 days), OTC
SUPER THIN MIS LANCETS	1	QL (200 lancets / 25 days), OTC
SURE COMFORT MIS LANC 18G	1	QL (200 lancets / 25 days), OTC
SURE COMFORT MIS LANC 21G	1	QL (200 lancets / 25 days), OTC
SURE COMFORT MIS LANC 23G	1	QL (200 lancets / 25 days), OTC
SURE COMFORT MIS LANC 30G	1	QL (200 lancets / 25 days), OTC
SURE COMFORT MIS LANCETS	1	QL (200 lancets / 25 days), OTC

Drug Name	Drug Tier	Requirements/Limits
SURE-LANCE MIS 26G	1	QL (200 lancets / 25 days), OTC
SURE-LANCE MIS LANCETS	1	QL (200 lancets / 25 days), OTC
SURE-TOUCH MIS UNV LANC	1	QL (200 lancets / 25 days), OTC
SUREFLEX MIS LANCETS	1	QL (200 lancets / 25 days), OTC
SURELITE MIS LANCETS	1	QL (200 lancets / 25 days), OTC
TECHLITE AST MIS LANCETS	1	QL (200 lancets / 25 days), OTC
TECHLITE MIS LANC 30G	1	QL (200 lancets / 25 days), OTC
TECHLITE MIS LANCETS	1	QL (200 lancets / 25 days), OTC
TGT LANCET MIS 26G	1	QL (200 lancets / 25 days), OTC
TGT LANCET MIS 30G	1	QL (200 lancets / 25 days), OTC
TGT LANCET MIS 33G	1	QL (200 lancets / 25 days), OTC
THIN LANCETS MIS	1	QL (200 lancets / 25 days), OTC
THIN LANCETS MIS 26G	1	QL (200 lancets / 25 days), OTC
THIN LANCETS MIS 30G	1	QL (200 lancets / 25 days), OTC
THINLETS GP MIS 26G	1	QL (200 lancets / 25 days), OTC
TOPCARE MIS LANC 33G	1	QL (200 lancets / 25 days), OTC
TRAVEL LANCE MIS 30G	1	QL (200 lancets / 25 days), OTC
TRAVEL LANCE MIS ADV 28G	1	QL (200 lancets / 25 days), OTC
TRUE COMFORT MIS LANC 30G	1	QL (200 lancets / 25 days), OTC
TRUPLUS LANC MIS 26G	1	QL (200 lancets / 25 days), OTC
TRUPLUS LANC MIS 28G	1	QL (200 lancets / 25 days), OTC
TRUPLUS LANC MIS 30G	1	QL (200 lancets / 25 days), OTC
TRUPLUS LANC MIS 33G	1	QL (200 lancets / 25 days), OTC
ULTILET MIS 26G	1	QL (200 lancets / 25 days), OTC

Drug Name	Drug Tier	Requirements/Limits
ULTILET MIS 28G	1	QL (200 lancets / 25 days), OTC
ULTILET MIS 30G	1	QL (200 lancets / 25 days), OTC
ULTILET MIS 33G	1	QL (200 lancets / 25 days), OTC
ULTILET MIS LANCETS	1	QL (200 lancets / 25 days), OTC
ULTILET MIS SAFETY	1	QL (200 lancets / 25 days), OTC
ULTILET SAFE MIS 21G	1	QL (200 lancets / 25 days), OTC
ULTRA THIN MIS 28G	1	QL (200 lancets / 25 days), OTC
ULTRA THIN MIS 30G	1	QL (200 lancets / 25 days), OTC
ULTRA THIN MIS 31G	1	QL (200 lancets / 25 days), OTC
ULTRA THIN MIS 33G	1	QL (200 lancets / 25 days), OTC
ULTRA THIN MIS LAN 31G	1	QL (200 lancets / 25 days), OTC
ULTRA THIN MIS LANC 28G	1	QL (200 lancets / 25 days), OTC
ULTRA THIN MIS LANC 30G	1	QL (200 lancets / 25 days), OTC
ULTRA THIN MIS LANCETS	1	QL (200 lancets / 25 days), OTC
UNILET CMFR MIS TCH 28G	1	QL (200 lancets / 25 days), OTC
UNILET CMFR MIS TCH 30G	1	QL (200 lancets / 25 days), OTC
UNILET EX II MIS 28G	1	QL (200 lancets / 25 days), OTC
UNILET EXCEL MIS 23G	1	QL (200 lancets / 25 days), OTC
UNILET G.P MIS SUPR 23G	1	QL (200 lancets / 25 days), OTC
UNILET G.P. MIS 21G	1	QL (200 lancets / 25 days), OTC
UNILET GP 28 MIS ULT THIN	1	QL (200 lancets / 25 days), OTC
UNILET LANC MIS 33G	1	QL (200 lancets / 25 days), OTC
UNILET LANCE MIS 21G	1	QL (200 lancets / 25 days), OTC
UNILET LANCE MIS 28G	1	QL (200 lancets / 25 days), OTC

Drug Name	Drug Tier	Requirements/Limits
UNILET LANCE MIS 33G	1	QL (200 lancets / 25 days), OTC
UNILET LANCT MIS 28G	1	QL (200 lancets / 25 days), OTC
UNILET LANCT MIS 30G	1	QL (200 lancets / 25 days), OTC
UNILET LANCT MIS 33G	1	QL (200 lancets / 25 days), OTC
UNILET MICRO MIS 33G	1	QL (200 lancets / 25 days), OTC
UNILET MIS 21G	1	QL (200 lancets / 25 days), OTC
UNILET SUPER MIS 23G	1	QL (200 lancets / 25 days), OTC
UNILET SUPER MIS G.P. 23G	1	QL (200 lancets / 25 days), OTC
UNISTIK 3 MIS GENT 30G	1	QL (200 lancets / 25 days), OTC
UNISTIK II MIS LANCETS	1	QL (200 lancets / 25 days), OTC
UNISTIK PRO MIS LANC 21G	1	QL (200 lancets / 25 days), OTC
UNISTIK PRO MIS LANC 28G	1	QL (200 lancets / 25 days), OTC
UNISTIK SAFE MIS LANC 28G	1	QL (200 lancets / 25 days), OTC
UNISTIK SAFE MIS LANC 30G	1	QL (200 lancets / 25 days), OTC
UNISTIK TOUC MIS LANC 21G	1	QL (200 lancets / 25 days), OTC
UNISTIK TOUC MIS LANC 23G	1	QL (200 lancets / 25 days), OTC
UNISTIK TOUC MIS LANC 28G	1	QL (200 lancets / 25 days), OTC
UNISTIK TOUC MIS LANC 30G	1	QL (200 lancets / 25 days), OTC
UNITSTIK PRO MIS LANC 25G	1	QL (200 lancets / 25 days), OTC
UNIVERSAL 1 MIS 33G	1	QL (200 lancets / 25 days), OTC
UNIVERSAL 1 MIS LANC 26G	1	QL (200 lancets / 25 days), OTC
UNIVERSAL 1 MIS LANC 30G	1	QL (200 lancets / 25 days), OTC
VIVAGUARD MIS 30G	1	QL (200 lancets / 25 days), OTC
ZEVRX TWIST MIS LANC 30G	1	QL (200 lancets / 25 days), OTC

Drug Name	Drug Tier	Requirements/Limits
MISC. DEVICES		
ALCOHOL PAD 70%	1	OTC
ALCOHOL PAD PREP	1	OTC
ALCOHOL PREP PAD	1	OTC
ALCOHOL PREP PAD 70%	1	OTC
ALCOHOL PREP PAD MED 70%	1	OTC
ALCOHOL PREP PAD PADS 70%	1	OTC
ALCOHOL SWAB PAD	1	OTC
ALCOHOL SWAB PAD 70%	1	OTC
ALCOHOL SWAB PAD EX-THICK	1	OTC
BD SWAB BFLY PAD SNGL USE	1	OTC
BD SWAB REG PAD SNGL USE	1	OTC
CARETOUCH PAD ALCOHOL	1	OTC
COMFRONT TOUCH PAD ALC PREP	1	OTC
CURITY PREP PAD ALCOHOL	1	OTC
CURITY SWABS PAD ALCOHOL	1	OTC
FIFTY50 PREP PAD PADS	1	OTC
GNP ALCOHOL PAD SWABS	1	OTC
HM STERILE PAD ALCHOL	1	OTC
INCONTROL PAD ALCOHOL	1	OTC
PREP PADS PAD	1	OTC
PURE COMFORT PAD	1	OTC
QC ALCOHOL PAD SWABS	1	OTC
RA ALCOHOL PAD SWABS	1	OTC
REALITY SWAB PAD	1	OTC
SAPS HEALTH PAD ALCOHOL	1	OTC
SB ALCOHOL PAD PREP	1	OTC
SM ALCOHOL PAD PREP	1	OTC
TRUE COMFORT PAD PRO	1	OTC
ULTICARE PAD ALCOHOL	1	OTC
ULTILET PAD ALCOHOL	1	OTC
WEBCOL PREP PAD LARGE	1	OTC
WEBCOL PREP PAD MEDIUM	1	OTC
ZEVRX STERIL PAD ALCHOL	1	OTC
PARENTERAL THERAPY SUPPLIES		
ABOUTTIME MIS 31GX3/16	1	QL (200 needles / 25 days), OTC
ABOUTTIME MIS 31GX5/16	1	QL (200 pen needles / 25 days), OTC
ABOUTTIME MIS 32GX5/32	1	QL (200 needles / 25 days), OTC
ASSURE ID MIS 31GX3/16	1	QL (200 needles / 25 days), OTC
BD PEN NEEDL MIS 29GX12.7	1	QL (200 needles / 25 days), OTC

Drug Name	Drug Tier	Requirements/Limits
BD PEN NEEDL MIS 31GX5MM	1	QL (200 needles / 25 days), OTC
BD PEN NEEDL MIS 31GX8MM	1	QL (200 pen needles / 25 days), OTC
BD PEN NEEDL MIS 32GX4MM	1	QL (200 needles / 25 days)
BD PEN NEEDL MIS 32GX4MM	1	QL (200 needles / 25 days), OTC
BD PEN NEEDL MIS 32GX5/32	1	QL (200 needles / 25 days), OTC
BD PEN NEEDL MIS 32GX6MM	1	QL (200 needles / 25 days), OTC
BD U-500 MIS 31GX6MM	1	QL (200 syringes / 25 days)
CAREFINE MIS 31GX8MM	1	QL (200 pen needles / 25 days), OTC
CAREFINE MIS 32GX4MM	1	QL (200 needles / 25 days), OTC
CAREFINE MIS 32GX6MM	1	QL (200 needles / 25 days), OTC
CARETOUCH MIS 31GX5MM	1	QL (200 needles / 25 days), OTC
CARETOUCH MIS 31GX8MM	1	QL (200 pen needles / 25 days), OTC
CARETOUCH MIS 32GX4MM	1	QL (200 needles / 25 days), OTC
CLICKFINE MIS 31GX3/16	1	QL (200 needles / 25 days), OTC
CLICKFINE MIS 31GX5/16	1	QL (200 pen needles / 25 days), OTC
CLICKFINE MIS 31GX8MM	1	QL (200 pen needles / 25 days), OTC
CLICKFINE MIS 32GX5/32	1	QL (200 needles / 25 days), OTC
COMFORT EZ MIS 31GX5MM	1	QL (200 needles / 25 days), OTC
COMFORT EZ MIS 31GX8MM	1	QL (200 pen needles / 25 days), OTC
COMFORT EZ MIS 32GX4MM	1	QL (200 needles / 25 days), OTC
COMFORT EZ MIS 32GX6MM	1	QL (200 needles / 25 days), OTC
COMFORT TOUC MIS 31GX5MM	1	QL (200 needles / 25 days), OTC
COMFORT TOUC MIS 31GX8MM	1	QL (200 pen needles / 25 days), OTC
COMFORT TOUC MIS 32GX4MM	1	QL (200 needles / 25 days), OTC

Drug Name	Drug Tier	Requirements/Limits
COMFORT TOUC MIS 32GX6MM	1	QL (200 needles / 25 days), OTC
DIATHRIVE MIS 31GX5MM	1	QL (200 needles / 25 days), OTC
DIATHRIVE MIS 31GX8MM	1	QL (200 pen needles / 25 days), OTC
DIATHRIVE MIS 32GX4MM	1	QL (200 needles / 25 days), OTC
EASY COMFORT MIS 31GX3/16	1	QL (200 needles / 25 days), OTC
EASY COMFORT MIS 31GX5/16	1	QL (200 pen needles / 25 days), OTC
EASY COMFORT MIS 32GX5/32	1	QL (200 needles / 25 days), OTC
EASY TOUCH MIS 31GX3/16	1	QL (200 needles / 25 days), OTC
EASY TOUCH MIS 31GX5/16	1	QL (200 pen needles / 25 days), OTC
EASY TOUCH MIS 32GX1/4"	1	QL (200 needles / 25 days), OTC
EASY TOUCH MIS 32GX5/32	1	QL (200 needles / 25 days), OTC
EASY TOUCH MIS 32GX6MM	1	QL (200 needles / 25 days), OTC
FIFTY50 MIS 31GX3/16	1	QL (200 needles / 25 days), OTC
FIFTY50 MIS 31GX5/16	1	QL (200 pen needles / 25 days), OTC
FIFTY50 MIS 31GX5MM	1	QL (200 needles / 25 days), OTC
FIFTY50 PEN MIS 31GX8MM	1	QL (200 pen needles / 25 days), OTC
FIFTY50 PEN MIS 32GX4MM	1	QL (200 needles / 25 days), OTC
FIFTY50 PEN MIS 32GX6MM	1	QL (200 needles / 25 days), OTC
GNP ULTICARE MIS 31GX5/16	1	QL (200 pen needles / 25 days), OTC
GNP ULTICARE MIS 31GX5MM	1	QL (200 needles / 25 days), OTC
GNP ULTICARE MIS 32GX1/4"	1	QL (200 needles / 25 days), OTC
GNP ULTICARE MIS 32GX5/32	1	QL (200 needles / 25 days), OTC
HM ULTICARE MIS 31GX8MM	1	QL (200 pen needles / 25 days), OTC
IN CONTROL MIS 31GX3/16	1	QL (200 needles / 25 days), OTC

Drug Name	Drug Tier	Requirements/Limits
IN CONTROL MIS 31GX5MM	1	QL (200 needles / 25 days), OTC
IN CONTROL MIS 31GX8MM	1	QL (200 pen needles / 25 days), OTC
INSULIN PEN MIS 31GX8MM	1	QL (200 pen needles / 25 days), OTC
INSULIN SYRG MIS 0.3/30G	1	QL (200 syringes / 25 days), OTC
INSULIN SYRG MIS 0.3/31G	1	QL (200 syringes / 25 days), OTC
INSULIN SYRG MIS 0.5/30G	1	QL (200 syringes / 25 days), OTC
INSULIN SYRG MIS 0.5/31G	1	QL (200 syringes / 25 days), OTC
INSULIN SYRG MIS 1ML/30G	1	QL (200 syringes / 25 days), OTC
INSULIN SYRG MIS 1ML/31G	1	QL (200 syringes / 25 days), OTC
INSUPEN MIS 31GX5MM	1	QL (200 needles / 25 days), OTC
INSUPEN MIS 31GX8MM	1	QL (200 pen needles / 25 days), OTC
INSUPEN MIS 32GX4MM	1	QL (200 needles / 25 days), OTC
INSUPEN SENS MIS 32GX6MM	1	QL (200 needles / 25 days), OTC
INSUPEN ULTR MIS 31GX8MM	1	QL (200 pen needles / 25 days), OTC
LITETOUCH MIS 29GX12.7	1	QL (200 needles / 25 days), OTC
LITETOUCH MIS 31GX8MM	1	QL (200 pen needles / 25 days), OTC
MM PENTIPS MIS 31GX5MM	1	QL (200 needles / 25 days)
MM PENTIPS MIS 31GX8MM	1	QL (200 pen needles / 25 days)
MM PENTIPS MIS 32GX4MM	1	QL (200 needles / 25 days)
NOVOFINE MIS 32GX6MM	1	QL (200 needles / 25 days), OTC
NOVOFINE PLS MIS 32GX4MM	1	QL (200 needles / 25 days), OTC
PEN NEEDLE MIS 29GX1/2"	1	QL (200 needles / 25 days), OTC
PEN NEEDLE MIS 31GX3/16	1	QL (200 needles / 25 days), OTC
PEN NEEDLE MIS 31GX5/16	1	QL (200 pen needles / 25 days), OTC

Drug Name	Drug Tier	Requirements/Limits
PEN NEEDLE MIS 31GX5MM	1	QL (200 needles / 25 days), OTC
PEN NEEDLE MIS 32GX1/4"	1	QL (200 needles / 25 days), OTC
PEN NEEDLE MIS 32GX4MM	1	QL (200 needles / 25 days), OTC
PEN NEEDLE MIS 32GX5/32	1	QL (200 needles / 25 days), OTC
PEN NEEDLES MIS 29GX1/2"	1	QL (200 needles / 25 days), OTC
PEN NEEDLES MIS 29GX12.7	1	QL (200 needles / 25 days), OTC
PEN NEEDLES MIS 31GX3/16	1	QL (200 needles / 25 days), OTC
PEN NEEDLES MIS 31GX5/16	1	QL (200 pen needles / 25 days), OTC
PEN NEEDLES MIS 31GX5MM	1	QL (200 needles / 25 days), OTC
PEN NEEDLES MIS 31GX8MM	1	QL (200 pen needles / 25 days), OTC
PEN NEEDLES MIS 32GX1/4	1	QL (200 needles / 25 days), OTC
PEN NEEDLES MIS 32GX1/4"	1	QL (200 needles / 25 days), OTC
PEN NEEDLES MIS 32GX4MM	1	QL (200 needles / 25 days), OTC
PEN NEEDLES MIS 32GX5/32	1	QL (200 needles / 25 days), OTC
PEN NEEDLES MIS 32GX6MM	1	QL (200 needles / 25 days), OTC
PENTIPS MIS 31GX5MM	1	QL (200 needles / 25 days)
PENTIPS MIS 31GX5MM	1	QL (200 needles / 25 days), OTC
PENTIPS MIS 31GX8MM	1	QL (200 pen needles / 25 days)
PENTIPS MIS 31GX8MM	1	QL (200 pen needles / 25 days), OTC
PENTIPS MIS 32GX4MM	1	QL (200 needles / 25 days)
PENTIPS MIS 32GX4MM	1	QL (200 needles / 25 days), OTC
PREVENT DROP MIS 31GX5/16	1	QL (200 pen needles / 25 days), OTC
PREVENT SAFE MIS 31GX5/16	1	QL (200 pen needles / 25 days), OTC
PRO COMFORT MIS 31GX8MM	1	QL (200 pen needles / 25 days)

Drug Name	Drug Tier	Requirements/Limits
PRO COMFORT MIS 32GX4MM	1	QL (200 needles / 25 days)
PRO COMFORT MIS 32GX6MM	1	QL (200 needles / 25 days), OTC
PURE COMFORT MIS 32GX4MM	1	QL (200 needles / 25 days), OTC
PURE COMFORT MIS 32GX6MM	1	QL (200 needles / 25 days), OTC
RA PEN NEEDL MIS 31GX3/16	1	QL (200 needles / 25 days), OTC
RELION PEN MIS 31GX5/16	1	QL (200 pen needles / 25 days), OTC
RELION PEN MIS 31GX8MM	1	QL (200 pen needles / 25 days), OTC
RELION PEN MIS 32GX4MM	1	QL (200 needles / 25 days), OTC
RELION PEN MIS 32GX5/32	1	QL (200 needles / 25 days), OTC
SURE COMFORT MIS 29GX1/2"	1	QL (200 needles / 25 days), OTC
SURE COMFORT MIS 31GX3/16	1	QL (200 needles / 25 days), OTC
SURE COMFORT MIS 31GX5/16	1	QL (200 pen needles / 25 days), OTC
SURE COMFORT MIS 32GX5/32	1	QL (200 needles / 25 days), OTC
SURE COMFORT MIS 32GX6MM	1	QL (200 needles / 25 days), OTC
SURE-FINE MIS 29GX1/2"	1	QL (200 needles / 25 days), OTC
SURE-FINE MIS 31GX3/16	1	QL (200 needles / 25 days), OTC
SURE-FINE MIS 31GX5/16	1	QL (200 pen needles / 25 days), OTC
1ST TIER UNI MIS 31GX5MM	1	QL (200 needles / 25 days), OTC
1ST TIER UNI MIS 31GX8MM	1	QL (200 pen needles / 25 days), OTC
1ST TIER UNI MIS 32GX4MM	1	QL (200 needles / 25 days), OTC
TIER UNI PLS MIS 31GX8MM	1	QL (200 pen needles / 25 days), OTC
ULTICARE MIC MIS 32GX4MM	1	QL (200 needles / 25 days), OTC
ULTICARE PEN MIS 31GX5MM	1	QL (200 needles / 25 days), OTC
ULTICARE PEN MIS 31GX8MM	1	QL (200 pen needles / 25 days), OTC

Drug Name	Drug Tier	Requirements/Limits
ULTIGUARD MIS 31GX5MM	1	QL (200 needles / 25 days), OTC
ULTIGUARD MIS 31GX8MM	1	QL (200 pen needles / 25 days), OTC
ULTIGUARD MIS 32GX4MM	1	QL (200 needles / 25 days), OTC
ULTIGUARD MIS 32GX6MM	1	QL (200 needles / 25 days), OTC
ULTILET PEN MIS 29GX12.7	1	QL (200 needles / 25 days), OTC
ULTILET PEN MIS 31GX5MM	1	QL (200 needles / 25 days), OTC
ULTILET PEN MIS 31GX8MM	1	QL (200 pen needles / 25 days), OTC
ULTILET PEN MIS 32GX4MM	1	QL (200 needles / 25 days), OTC
ULTRA FLO MIS 31GX5MM	1	QL (200 needles / 25 days), OTC
ULTRA FLO MIS 31GX8MM	1	QL (200 pen needles / 25 days), OTC
ULTRA FLO MIS PEN NEED	1	QL (200 needles / 25 days), OTC
UNFINE PNTP MIS 32GX4MM	1	QL (200 needles / 25 days), OTC
UNIFINE PLUS MIS 31GX3/16	1	QL (200 needles / 25 days), OTC
UNIFINE PLUS MIS 31GX5/16	1	QL (200 pen needles / 25 days), OTC
UNIFINE PLUS MIS 32GX5/32	1	QL (200 needles / 25 days), OTC
UNIFINE PNTP MIS 31GX3/16	1	QL (200 needles / 25 days), OTC
UNIFINE PNTP MIS 31GX5/16	1	QL (200 pen needles / 25 days), OTC
UNIFINE PNTP MIS 31GX5MM	1	QL (200 needles / 25 days), OTC
UNIFINE PNTP MIS 31GX8MM	1	QL (200 pen needles / 25 days), OTC
UNIFINE PNTP MIS 32GX4MM	1	QL (200 needles / 25 days), OTC
UNIFINE PNTP MIS 32GX5/32	1	QL (200 needles / 25 days), OTC
UNIFINE PNTP MIS 32GX6MM	1	QL (200 needles / 25 days), OTC
ZEVRX MIS 31GX5MM	1	QL (200 needles / 25 days), OTC
ZEVRX MIS 31GX8MM	1	QL (200 pen needles / 25 days), OTC

Drug Name	Drug Tier	Requirements/Limits
ZEVRX MIS 32GX4MM	1	QL (200 needles / 25 days), OTC

RESPIRATORY AIDS

ACTEEV PROTE MIS MASK	1	OTC
ALL PURPOSE MIS MASK	1	OTC
BREATHE COMF MIS SHIELD	1	OTC
CLEVER CHOIC MIS MASK	1	OTC
DISPOSABLE MIS FACE MAS	1	OTC
EAR-LOOP MIS MASK SM	1	OTC
EARLOOP MIS MASK	1	OTC
EASY FLOW MIS KN 95	1	OTC
FACE MASK MIS 3 PLY	1	OTC
FACE MASK MIS 3-PLY	1	OTC
FACE MASK MIS EARLOOP	1	
FACE MASK MIS EARLOOP	1	OTC
FACE MASK MIS N-100	1	
FACE MASK MIS R95 PART	1	
FACE MASK MIS SURG/DIS	1	OTC
FACE MASKS MIS 3 LAYER	1	OTC
J&J GERM FIL MIS MASK	1	OTC
KN95 DISPOSA MIS MASK	1	OTC
KN95 MEDICAL MIS MASK	1	OTC
MASK PEDIATR MIS SIZE 1"	1	OTC
N95 MASK MIS	1	OTC
PEDIATRIC MD MIS MASK	1	OTC
PEDIATRIC SM MIS MASK	1	OTC
PROCEDURAL MIS MASK	1	OTC
SHIELD-SECUR MIS	1	OTC
SURGICAL MSK MIS N95	1	

RESPIRATORY THERAPY SUPPLIES

ACE AERO CLD MIS ENHANCER	1	
ACTIVITY PCH MIS	1	
ADULT MASK MIS LARGE	1	
AERCHMBR PLS MIS FLOW-VU	1	
AERCHMBR PLS MIS LRG MASK	1	
AERCHMBR PLS MIS MED MASK	1	
AERCHMBR PLS MIS SM MASK	1	
AERCHMBR Z- MIS STAT PLS	1	
AEROCHAMBER MIS CHAMBER	1	
AEROCHAMBER MIS FLOSIGNA	1	
AEROCHAMBER MIS MV	1	
AEROCHAMBER MIS PLUS	1	
AEROSOL MASK MIS ADULT	1	
AEROSOL MASK MIS ADULT	1	OTC
AEROTRC PLUS MIS	1	

Drug Name	Drug Tier	Requirements/Limits
AEROVENT MIS PLUS	1	
AIR TUBE MIS /PLUGS	1	
AIRS PEDIATR MIS MASK	1	
ALTERA NEB MIS HANDSET	1	
BREATHE EASE MIS LG MASK	1	
BREATHE EASE MIS MED MASK	1	
BREATHE EASE MIS SM MASK	1	
BUBBLES PEDI MIS MASK	1	OTC
CARETOUCH MIS CPAP	1	
CO MONITOR MIS T PIECES	1	
COMPACT SPAC MIS CHAMBER	1	
COMPACT SPAC MIS LG MASK	1	
COMPACT SPAC MIS MD MASK	1	
COMPACT SPAC MIS SM MASK	1	
CONVERSION MIS BABY SZ1	1	
CONVERSION MIS BABY SZ2	1	
CONVERSION MIS BABY SZ3	1	
CPAP & BIPAP MIS HOSE	1	
2 CPAP HOSE MIS HANGER	1	
CPAP MASK MIS WIPES	1	
CPAP NEURAL MIS PRE-WASH	1	
EASIVENT MIS	1	
EASIVENT MIS MASK LG	1	
EASIVENT MIS MASK MED	1	
EASIVENT MIS MASK SM	1	
EASY FLOW MIS 300MM	1	OTC
EASY FLOW MIS 400MM	1	OTC
EASY FLOW MIS AIR NOZZ	1	OTC
EASY FLOW MIS HEPA FIL	1	OTC
EBASE CONTRO MIS KIT	1	
ERAPID NEB MIS HANDSET	1	
FILTER AIR MIS PP	1	
FLEXICHAMBER MIS	1	
FLEXICHAMBER MIS MASK LRG	1	QL (2 boxes / year)
FLEXICHAMBER MIS MASK SM	1	QL (2 boxes / year)
FLYP HYPERSO MIS CARTRIDG	1	OTC
FULL KIT NEB MIS SET	1	
HOLD CHAMBER MIS ADLT LG	1	
HOLD CHAMBER MIS ADLT LG	1	OTC
HOLD CHAMBER MIS MEDIUM	1	
HOLD CHAMBER MIS MEDIUM	1	OTC
HOLD CHAMBER MIS SMALL	1	
HOLD CHAMBER MIS SMALL	1	OTC
INSPIRACHAMB MIS LARGE	1	
INSPIRACHAMB MIS MEDIUM	1	

Drug Name	Drug Tier	Requirements/Limits
INSPIRACHAMB MIS MOUTHPICE	1	
INSPIRACHAMB MIS SMALL	1	
INSPIREASE MIS DD SYST	1	
KAZ VAPORIZR MIS 1 GALLON	1	OTC
KAZ VAPORIZR MIS 1.5 GAL	1	OTC
KAZ VAPORIZR MIS 2.2 GAL	1	OTC
LIFESTYLECOM MIS VAPORIZE	1	OTC
LITETOUCH MIS MASK LG	1	
LITETOUCH MIS MASK MD	1	
LITETOUCH MIS MASK SM	1	
MASK VORTEX/ MIS FROG	1	QL (2 boxes / year), OTC
MASK VORTEX/ MIS LADY BUG	1	QL (2 boxes / year), OTC
MICROCHAMBER MIS	1	
MINIELITE MIS FILTERS	1	OTC
NEBULIZER MIS MASK CHD	1	
NEBULIZER MIS MASK INF	1	
NOSE CLIP MIS	1	OTC
OPTICHAMBER MIS DIA LG	1	
OPTICHAMBER MIS DIA MD	1	
OPTICHAMBER MIS DIA SM	1	
OPTICHAMBER MIS DIAMOND	1	
PANDA MASK MIS LARGE	1	QL (2 packs / year), OTC
PANDA MASK MIS MEDIUM	1	QL (1 pack / year), OTC
PANDA MASK MIS PEDIATRI	1	QL (1 pack / year), OTC
PANDA MASK MIS SMALL	1	QL (1 pack / year), OTC
PARI EXPIRAT MIS FILTER	1	
PARI MASK MIS SIZE 3	1	
PARI PLASTIC MIS MASK	1	
PARI PLASTIC MIS MASK PED	1	
PARI SMRTMSK MIS BABY	1	OTC
PARI VORTEX MIS ADL MASK	1	OTC
PEDIATRIC MIS MOUTHPIE	1	OTC
PFLEX MIS	1	
PFT FILTER MIS 1000	1	
PHARM CHOICE MIS WIPES	1	OTC
PILLOW MASK MIS ADULT	1	
PILLOW MASK MIS CHILD	1	
PILLOW MASK MIS PEDIATRI	1	
POCKET CHAMB MIS	1	
POCKET SPACE MIS	1	
PROCARE MIS ADULT	1	OTC
PROCARE MIS CHILD	1	OTC

Drug Name	Drug Tier	Requirements/Limits
PRONEB ULTRA MIS FILTER	1	OTC
REPLACEMENT MIS FILTER	1	
REPLACEMENT MIS FILTERS	1	OTC
RITEFLO MIS	1	
SIDESTREAM MIS MASK	1	
SIDESTREAM MIS MASK	1	OTC
SIDESTREAM MIS PED MASK	1	
SIDESTREAM MIS PED MASK	1	OTC
SIDESTRM PLS MIS FACE MSK	1	OTC
SILICONE MSK MIS ADULT	1	
SILICONE MSK MIS INFANT	1	
SILICONE MSK MIS PED	1	
SOOTHENEBO MIS MED CUP	1	OTC
SOOTHENEBO MIS MESH CAP	1	OTC
SOOTHENEBO MIS NBL 100	1	OTC
SPACE CHAMBR MIS ANTI-STA	1	OTC
SPACE CHAMBR MIS LARGE	1	OTC
SPACE CHAMBR MIS MEDIUM	1	OTC
SPACE CHAMBR MIS SMALL	1	OTC
SPACER CHAMB MIS ADULT	1	OTC
SPACER CHAMB MIS CHILD	1	OTC
SPACER CHAMB MIS INFANT	1	OTC
THRESHOLD MIS IMT	1	
TUBE CLEANIN MIS BRUSH	1	
VAPORIZER MIS 1 GALLON	1	OTC
VAPORIZER MIS 1.2 GAL	1	OTC
VAPORIZER MIS 1.7 GAL	1	OTC
VAPORIZER MIS 1.9 GAL	1	OTC
VAPORIZER MIS 2 GALLON	1	OTC
VAPORIZER MIS 3 GALLON	1	OTC
VAPORIZER MIS WATERLES	1	OTC
VORTEX VALVE MIS CHAMBER	1	
WINDMILL MIS TRAINER	1	
WING TIP MIS TUBING	1	OTC

MIGRAINE PRODUCTS

CALCITONIN GENE-RELATED PEPTIDE (CGRP) RECEPTOR ANTAG

AIMOVIG INJ 70MG/ML	1	PA, QL (2 pens / 25 days)
AIMOVIG INJ 140MG/ML	1	PA, QL (1 pen / 25 days)
AJOVY INJ 225/1.5	1	PA, QL (3 syringes / 75 days)
EMGALITY INJ 100MG/ML	1	PA, QL (3 syringes / 25 days)
EMGALITY INJ 120MG/ML	1	PA, QL (2 syringes / 25 days)

Drug Name	Drug Tier	Requirements/Limits
SEROTONIN AGONISTS		
<i>naratriptan hcl tab 1 mg (base equiv)</i>	1	ST, QL (8 tabs / 25 days)
<i>naratriptan hcl tab 2.5 mg (base equiv)</i>	1	ST, QL (8 tabs / 25 days)
<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</i>	1	ST, QL (12 tabs / 25 days)
<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</i>	1	ST, QL (12 tabs / 25 days)
<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	1	ST, QL (12 tabs / 25 days)
<i>rizatriptan benzoate tab 10 mg (base equivalent)</i>	1	ST, QL (12 tabs / 25 days)
<i>sumatriptan nasal spray 5 mg/act</i>	1	QL (8 inhalers / 25 days)
<i>sumatriptan nasal spray 20 mg/act</i>	1	QL (8 inhalers / 25 days)
<i>sumatriptan succinate inj 6 mg/0.5ml</i>	1	QL (8 injections / 25 days)
<i>sumatriptan succinate solution auto-injector 4 mg/0.5ml</i>	1	QL (8 injections / 25 days)
<i>sumatriptan succinate solution auto-injector 6 mg/0.5ml</i>	1	QL (8 injections / 25 days)
<i>sumatriptan succinate solution cartridge 4 mg/0.5ml</i>	1	QL (8 injections / 25 days)
<i>sumatriptan succinate solution cartridge 6 mg/0.5ml</i>	1	QL (8 injections / 25 days)
<i>sumatriptan succinate tab 25 mg</i>	1	QL (8 tabs / 25 days)
<i>sumatriptan succinate tab 50 mg</i>	1	QL (8 tabs / 25 days)
<i>sumatriptan succinate tab 100 mg</i>	1	QL (8 tabs / 25 days)
<i>zolmitriptan orally disintegrating tab 2.5 mg</i>	1	ST, QL (8 tabs / 25 days)
<i>zolmitriptan orally disintegrating tab 5 mg</i>	1	ST, QL (8 tabs / 25 days)
<i>zolmitriptan tab 2.5 mg</i>	1	ST, QL (8 tabs / 25 days)
<i>zolmitriptan tab 5 mg</i>	1	ST, QL (8 tabs / 25 days)

MINERALS & ELECTROLYTES

CALCIUM

<i>ca citrate + tab</i>	1	OTC
<i>ca citrate tab + d</i>	1	OTC
<i>ca citrate tab plus d</i>	1	OTC
<i>CAL CIT MAL/ TAB VITAMIND</i>	1	OTC
<i>cal cit+d3 tab maximum</i>	1	OTC
<i>cal soft chw chw mlk choc</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>cal-mag aspa tab 333-167</i>	1	OTC
<i>cal-mag tab 500-250</i>	1	OTC
<i>calc 600+d3 cap 600-500</i>	1	OTC
<i>calc 600+d tab 600-800</i>	1	OTC
<i>calc cit+d3 tab 200-250</i>	1	OTC
<i>calc cit+d3 tab 250-200</i>	1	OTC
<i>calc citr+d3 tab 200-250</i>	1	OTC
<i>calc citr+d3 tab 315-6.25</i>	1	OTC
<i>calc citr+d3 tab 315-250</i>	1	OTC
<i>calc citr+d3 tab 400-12.5</i>	1	OTC
<i>calc citr/d3 tab 200-250</i>	1	OTC
<i>calc citra+d tab 315-250</i>	1	OTC
<i>calc citrate tab +d</i>	1	OTC
<i>calcitrat tab plus d</i>	1	OTC
<i>calcium 500 tab +d</i>	1	OTC
<i>calcium 500 tab /vit d</i>	1	OTC
<i>calcium 600 chw w/vit d</i>	1	OTC
<i>calcium 600 tab</i>	1	OTC
<i>calcium 600 tab + d</i>	1	OTC
<i>calcium 600 tab +d</i>	1	OTC
<i>calcium 600 tab +d3</i>	1	OTC
<i>calcium 600/ tab vit d</i>	1	OTC
<i>calcium + d3 tab</i>	1	OTC
<i>calcium + d tab</i>	1	OTC
<i>calcium + d tab 600-200</i>	1	OTC
<i>calcium + d tab 600mg</i>	1	OTC
<i>calcium +d3 tab maximum</i>	1	OTC
<i>CALCIUM CARB CHW 500MG</i>	1	OTC
<i>calcium carb tab 1250mg</i>	1	OTC
<i>calcium carbonate tab 600 mg</i>	1	OTC
<i>calcium carbonate tab 1250 mg (500 mg elemental ca)</i>	1	OTC
<i>calcium carbonate tab 1500 mg (600 mg elemental ca)</i>	1	OTC
<i>calcium carbonate-cholecalciferol chew tab 500 mg-400 unit</i>	1	OTC
<i>calcium carbonate-cholecalciferol chew tab 600 mg-400 unit</i>	1	OTC
<i>calcium carbonate-cholecalciferol tab 250 mg-125 unit</i>	1	OTC
<i>calcium carbonate-cholecalciferol tab 500 mg-125 unit</i>	1	OTC
<i>calcium carbonate-cholecalciferol tab 500 mg-200 unit</i>	1	OTC
<i>calcium carbonate-cholecalciferol tab 500 mg-400 unit</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
calcium carbonate-cholecalciferol tab 600 mg-200 unit	1	OTC
calcium carbonate-cholecalciferol tab 600 mg-400 unit	1	OTC
calcium carbonate-vitamin d cap 600 mg-200 unit	1	OTC
calcium carbonate-vitamin d tab 250 mg-125 unit	1	OTC
calcium carbonate-vitamin d tab 500 mg-200 unit	1	OTC
calcium carbonate-vitamin d tab 600 mg-125 unit	1	OTC
calcium carbonate-vitamin d tab 600 mg-200 unit	1	OTC
calcium carbonate-vitamin d tab 600 mg-400 unit	1	OTC
calcium citr tab +d	1	OTC
calcium citr tab plus d-3	1	OTC
calcium citr tab w/vit d3	1	OTC
calcium citrate tab 950 mg (200 mg elemental ca)	1	OTC
calcium citrate-vitamin d tab 200 mg-250 unit (elemental ca)	1	OTC
calcium citrate-vitamin d tab 315 mg-200 unit (elemental ca)	1	OTC
calcium citrate-vitamin d tab 315 mg-250 unit (elemental ca)	1	OTC
calcium for chw women	1	OTC
calcium pls tab 500-200	1	OTC
calcium plus cap d3	1	OTC
CALCIUM SOFT CHW CARAMEL	1	OTC
CALCIUM SOFT CHW CHOCOLAT	1	OTC
calcium soft chw mlk choc	1	OTC
CALCIUM TAB 280MG	1	OTC
calcium tab 500+d	1	OTC
calcium tab 500/d	1	OTC
calcium tab 600mg	1	OTC
calcium tab vit d	1	OTC
calcium w/ magnesium tab 250-125 mg	1	OTC
calcium w/ magnesium tab 500-250 mg	1	OTC
calcium+d3 tab 315-250	1	OTC
calcium+d3 tab 600-20	1	OTC
calcium+d3 tab 600-400	1	OTC
calcium+d3 tab 600-800	1	OTC
calcium+d tab 600-400	1	OTC
calcium+d tab 600-800	1	OTC

Drug Name	Drug Tier	Requirements/Limits
calcium-magnesium-zinc tab 333-133-5 mg	1	OTC
calcium-magnesium-zinc tab 333-133-8.3 mg	1	OTC
calcium/d3 cap 600-500	1	OTC
calcium/d3 tab	1	OTC
calcium/d3 tab 200-250	1	OTC
calcium/d3 tab 500-600	1	OTC
CALCIUM/D3 TAB 500/200	1	OTC
calcium/d3 tab 600-5	1	OTC
calcium/d3 tab 600-10	1	OTC
calcium/d3 tab 600-20	1	OTC
calcium/d3 tab 600-800	1	OTC
CALCIUM/D3 WAF	1	OTC
calcium/d tab 500-200	1	OTC
calcium/d tab 500-400	1	OTC
calcium/d tab 500/200	1	OTC
calcium/d tab 500mg	1	OTC
calcium/d tab 600-200	1	OTC
calcium/d tab 600-800	1	OTC
calcium/vita tab d3	1	OTC
calcium/vitd cap 600-500	1	OTC
chew calcium chw	1	OTC
coral calciu cap plus	1	OTC
creamies chw 600-400	1	OTC
cvs ca/mg/zn tab	1	OTC
cvs calcium tab 600mg	1	OTC
eq calcium tab citr+d	1	OTC
EQL CALCIUM CAP VIT D	1	OTC
eql calcium tab citr/d3	1	OTC
eql calcium tab w/vit d	1	OTC
gnp calcium tab cit +d3	1	OTC
hm calcium tab 600mg	1	OTC
kp ca/mg/zn tab	1	OTC
kp calcium cap 600+d	1	OTC
kp calcium tab 600+d	1	OTC
kp calcium tab +d	1	OTC
liq ca/vit d cap 600mg	1	OTC
nat-rul cal tab /d 500mg	1	OTC
os calcium tab /vit d	1	OTC
os-cal + d3 tab 500-200	1	OTC
os-cal chw	1	OTC
os-cal chw 500-600	1	OTC
os-cal extra tab d3	1	OTC
oys shell ca tab 500 + d	1	OTC

Drug Name	Drug Tier	Requirements/Limits
oys shell ca tab /d3	1	OTC
oys shell+d chw 500-400	1	OTC
oys shell+d tab 250-125	1	OTC
oysco 500+d tab	1	OTC
oyst ca/d3 tab 500-200	1	OTC
oyst shell/d tab 250-125	1	OTC
oyst shell/d tab 500-125	1	OTC
oyst shell/d tab 500-400	1	OTC
oyst shell/d tab 500mg	1	OTC
oyster shell calcium tab 500 mg	1	OTC
oystercal tab 500mg	1	OTC
oystercal-d tab 500mg	1	OTC
PARVA-CAL TAB 500MG	1	OTC
pure calcium tab carbonat	1	OTC
px calcium&d tab 600-400	1	OTC
ra ca/vit d3 tab 600-400	1	OTC
RA CALCIUM TAB 500MG	1	OTC
ra calcium tab high pot	1	OTC
ra calcium tab vit d	1	OTC
ra calcium+d tab 600mg	1	OTC
ra hi cal tab 500-200	1	OTC
RISACAL-D TAB	1	OTC
sm ca/mg/zn tab	1	OTC
sm ca/vit d3 tab 600-400	1	OTC
sm cal citr+ tab vit d3	1	OTC
sm calcium chw	1	OTC
sm calcium tab /vit d3	1	OTC
sm calcium/d tab 500-200	1	OTC
sm calcium/d tab 600-400	1	OTC
super ca 600 tab + d3	1	OTC
super ca 600 tab + d3 400	1	OTC
super ca 600 tab + d 400	1	OTC
super cal/ tab mag	1	OTC
super calciu tab 600mg	1	OTC
VITAMIN D3 TAB CAL/PHOS	1	OTC

ELECTROLYTE MIXTURES

ceralyte 70 sol	1	OTC
cvs electrol sol	1	OTC
oral electro sol cherry	1	OTC
oral electro sol freezer	1	OTC
oral electro sol h-e-b	1	OTC
oral electrolyte solution	1	OTC
oralyte sol bubl gum	1	OTC
oralyte sol freeze	1	OTC
oralyte sol fruit	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>oralyte sol grape</i>	1	OTC
<i>oralyte sol unflavor</i>	1	OTC
<i>ped elctrlyt sol</i>	1	OTC
<i>ped elctrlyt sol /zinc</i>	1	OTC
<i>ped elctrlyt sol apple</i>	1	OTC
<i>ped elctrlyt sol freeze</i>	1	OTC
<i>ped elctrlyt sol freezer</i>	1	OTC
<i>ped elctrlyt sol freezpop</i>	1	OTC
<i>ped elctrlyt sol fruit</i>	1	OTC
<i>ped elctrlyt sol grape</i>	1	OTC
<i>ped elctrlyt sol pineappl</i>	1	OTC
<i>ped elctrlyt sol strawbry</i>	1	OTC
<i>ped elctrlyt sol unflavor</i>	1	OTC
<i>ped elctrlyt sol unflavrd</i>	1	OTC
<i>pedia vance sol apple</i>	1	OTC
<i>pedia vance sol grape</i>	1	OTC
<i>ra pediatric sol electrol</i>	1	OTC
<i>rehydralyte sol</i>	1	OTC

FLUORIDE

<i>fluoritab dro 0.125mg</i>	1	
<i>nafrinse chw 1mg f</i>	1	
<i>nafrinse dro 0.125mg</i>	1	
<i>sodium fluoride chew tab 0.5 mg f (from 1.1 mg naf)</i>	1	
<i>sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf)</i>	1	
<i>sodium fluoride chew tab 1 mg f (from 2.2 mg naf)</i>	1	
<i>sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf)</i>	1	
<i>sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf)</i>	1	OTC
<i>sodium fluoride tab 0.5 mg f (from 1.1 mg naf)</i>	1	
<i>sodium fluoride tab 1 mg f (from 2.2 mg naf)</i>	1	

PHOSPHATE

<i>K-PHOS TAB</i>	1	
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POTASSIUM

<i>effer-k tab 25meq ef</i>	1	
<i>k-prime tab 25meq ef</i>	1	
<i>klor-con 8 tab 8meq er</i>	1	
<i>klor-con 10 tab 10meq er</i>	1	
<i>klor-con m10 tab 10meq er</i>	1	
<i>klor-con m20 tab 20meq er</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>klor-con/ef tab 25meq fr</i>	1	
<i>potassium chloride cap er 8 meq</i>	1	
<i>potassium chloride cap er 10 meq</i>	1	
<i>potassium chloride microencapsulated crys er tab 10 meq</i>	1	
<i>potassium chloride microencapsulated crys er tab 20 meq</i>	1	
<i>potassium chloride oral soln 10% (20 meq/15ml)</i>	1	
<i>potassium chloride oral soln 20% (40 meq/15ml)</i>	1	
<i>potassium chloride tab er 8 meq (600 mg)</i>	1	
<i>potassium chloride tab er 10 meq</i>	1	
<i>potassium chloride tab er 20 meq (1500 mg)</i>	1	

MISCELLANEOUS THERAPEUTIC CLASSES

IMMUNOMODULATORS

REVLIMID CAP 2.5MG	1	PA, QL (28 caps / 28 days)
REVLIMID CAP 5MG	1	PA, QL (28 caps / 28 days)
REVLIMID CAP 10MG	1	PA, QL (28 caps / 28 days)
REVLIMID CAP 15MG	1	PA, QL (28 caps / 28 days)
REVLIMID CAP 20MG	1	PA, QL (42 caps / 28 days)
REVLIMID CAP 25MG	1	PA, QL (42 caps / 28 days)
THALOMID CAP 50MG	1	PA, QL (1 cap / 1 day)
THALOMID CAP 100MG	1	PA, QL (1 cap / 1 day)
THALOMID CAP 150MG	1	PA, QL (2 caps / 1 day)
THALOMID CAP 200MG	1	PA, QL (2 caps / 1 day)

IMMUNOSUPPRESSIVE AGENTS

AZASAN TAB 75 MG	1	
AZASAN TAB 100MG	1	
<i>azathioprine tab 50 mg</i>	1	
<i>cyclosporine cap 25 mg</i>	1	
<i>cyclosporine cap 100 mg</i>	1	
<i>cyclosporine modified cap 25 mg</i>	1	
<i>cyclosporine modified cap 50 mg</i>	1	
<i>cyclosporine modified cap 100 mg</i>	1	
<i>cyclosporine modified oral soln 100 mg/ml</i>	1	
<i>gengraf cap 25mg</i>	1	
<i>gengraf cap 100mg</i>	1	
<i>gengraf sol 100mg/ml</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>mycophenolate mofetil cap 250 mg</i>	1	
<i>mycophenolate mofetil for oral susp 200 mg/ml</i>	1	
<i>mycophenolate mofetil tab 500 mg</i>	1	
<i>SANDIMMUNE SOL 100MG/ML</i>	1	
<i>sirolimus oral soln 1 mg/ml</i>	1	
<i>sirolimus tab 0.5 mg</i>	1	
<i>sirolimus tab 1 mg</i>	1	
<i>sirolimus tab 2 mg</i>	1	
<i>tacrolimus cap 0.5 mg</i>	1	
<i>tacrolimus cap 1 mg</i>	1	
<i>tacrolimus cap 5 mg</i>	1	
POTASSIUM REMOVING AGENTS		
<i>sps sus 15gm/60</i>	1	
MOUTH/THROAT/DENTAL AGENTS		
ANESTHETICS TOPICAL ORAL		
<i>lidocaine hcl viscous soln 2%</i>	1	
ANTI-INFECTIVES - THROAT		
<i>clotrimazole troche 10 mg</i>	1	
<i>nystatin susp 100000 unit/ml</i>	1	
ANTISEPTICS - MOUTH/THROAT		
<i>chlorhexidine gluconate soln 0.12%</i>	1	
<i>periogard sol 0.12%</i>	1	
DENTAL PRODUCTS		
<i>cavarest gel 1.1%</i>	1	
<i>clinpro 5000 pst 1.1%</i>	1	
<i>denta 5000 cre plus</i>	1	
<i>denta 5000 cre plus 2pk</i>	1	
<i>dentagel gel 1.1%</i>	1	
<i>fluoridex pst 1.1%</i>	1	
<i>sf 5000 plus cre 1.1%</i>	1	
<i>sf gel 1.1%</i>	1	
<i>sod fluoride gel 1.1%</i>	1	
<i>sod fluoride pst 1.1%</i>	1	
<i>sodium fluor cre 5000 pls</i>	1	
<i>sodium fluor cre 5000 ppm</i>	1	
<i>sodium fluoride cream 1.1%</i>	1	
<i>sodium fluoride gel 1.1% (0.5% f)</i>	1	
<i>sodium fluoride rinse 0.2%</i>	1	
STEROIDS - MOUTH/THROAT/DENTAL		
<i>oralone dent pst 0.1%</i>	1	
<i>triamcinolone acetonide dental paste 0.1%</i>	1	
THROAT PRODUCTS - MISC.		
<i>pilocarpine hcl tab 5 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
pilocarpine hcl tab 7.5 mg	1	
MULTIVITAMINS		
B-COMPLEX VITAMINS		
APETEX ELX	1	OTC
APETIGEN ELX	1	OTC
b-complex + tab b-12	1	OTC
b-complex tab	1	OTC
b-complex vitamin cap	1	OTC
b-complex vitamin sublingual liquid	1	OTC
b-complex vitamin tab	1	OTC
biopetit elx	1	OTC
BREWERS YEAS POW	1	OTC
brewers yeast tab	1	OTC
cvs balanced tab b100	1	OTC
ra b-complex tab	1	OTC
ra b-complex tab w/b-12	1	OTC
B-COMPLEX W/ C		
allbee plus tab vit c	1	OTC
b complex tab plus c	1	OTC
b-comp/vit c tab	1	OTC
b-complex tab /vit c	1	OTC
b-complex w/ c cap	1	OTC
b-complex w/ c tab	1	OTC
bec/zinc tab	1	OTC
better b tab complex	1	OTC
cvs stress tab form/zn	1	OTC
cvs super b tab complx/c	1	OTC
hm b complex tab w/ vit c	1	OTC
PRONUTRIENTS TAB SUPER B	1	OTC
RA B-COMPLEX TAB VIT C TR	1	OTC
sm b complex tab with c	1	OTC
stress b com tab vit c/zn	1	OTC
stress b/ tab zinc	1	OTC
stress form tab /zinc	1	OTC
stress form/ tab zinc	1	OTC
stress formu tab /zinc	1	OTC
stress plus tab zinc	1	OTC
super b comp tab vit c	1	OTC
super b w/c cap	1	OTC
vt b complex cap	1	OTC
zinc-vites tab	1	OTC
B-COMPLEX W/ FOLIC ACID		
ACTRIVIT LIQ 800-15-1	1	OTC
B COMPLEX +C TAB TR	1	OTC

Drug Name	Drug Tier	Requirements/Limits
b complex tab form 1	1	OTC
b complex tab plus	1	OTC
b-50 complex tab	1	OTC
b-50 tr tab	1	OTC
b-100 complx tab	1	OTC
B-100 HIGH CAP POTENTCY	1	OTC
b-100 tab b-100	1	OTC
b-100 tab complex	1	OTC
b-100 tr tab	1	OTC
b-compleet- tab 50	1	OTC
b-compleet- tab 100	1	OTC
B-COMPLEX CAP	1	OTC
b-complex tab 100 tr	1	OTC
b-complex tab balanced	1	OTC
B-COMPLEX TAB C/FA/BIO	1	OTC
b-complex w/ c & folic acid tab	1	OTC
b-complex w/ folic acid cap	1	OTC
b-complex w/ folic acid tab	1	OTC
b-complex w/biotin & folic acid tab	1	OTC
B-COMPLEX/FA TAB /VIT C	1	OTC
balanc b-100 tab tr	1	OTC
balance b-50 tab	1	OTC
balance b-50 tab tr	1	OTC
balanced b tab complex	1	OTC
balanced tab b-50	1	OTC
balanced tab b-100	1	OTC
balanced tab b-100 tr	1	OTC
benfotiamine cap multi-b	1	OTC
big 100 tab	1	OTC
BIOTIN FORTE TAB	1	OTC
BIOTIN FORTE TAB /ZINC	1	OTC
complex b-50 tab	1	OTC
DIALYVIT 800 TAB ZINC 15	1	OTC
dialyvite tab 800	1	OTC
DIALYVITE TAB 800/IRON	1	OTC
DIALYVITE TAB 800/ZINC	1	OTC
endur-b tab	1	OTC
eql b complx tab 50	1	OTC
eql b-100 tab complex	1	OTC
FULL SPECT TAB B/ VIT C	1	OTC
gnp b-50 tab complex	1	OTC
gnp b-100 tab complex	1	OTC
kobee tab	1	OTC
kp b complex tab /c	1	OTC
MULTI-B CAP COMPLEX	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>mynephron cap</i>	1	
<i>nephro tab vitamins</i>	1	OTC
NEPHRO-VITE TAB	1	OTC
<i>qc b50 tab pr</i>	1	OTC
<i>quin b stron tab b-25</i>	1	OTC
<i>ra balanced tab b-50</i>	1	OTC
<i>ra balanced tab b-50 tr</i>	1	OTC
<i>ra balanced tab b-100</i>	1	OTC
<i>ra balnaced tab b-100 tr</i>	1	OTC
<i>rena-vite rx tab</i>	1	OTC
<i>rena-vite tab</i>	1	OTC
<i>renal cap</i>	1	
<i>renal tab multivit</i>	1	OTC
<i>renal vitamn tab</i>	1	OTC
<i>renal-vite tab</i>	1	OTC
<i>reno cap</i>	1	
<i>reno cap</i>	1	OTC
<i>sm b100 tab complex</i>	1	OTC
<i>sm b super tab vita com</i>	1	OTC
<i>sm b-complex tab</i>	1	OTC
SM B-COMPLEX TAB /VIT C	1	OTC
<i>sm balanced tab b-50</i>	1	OTC
<i>sm balanced tab b-100</i>	1	OTC
<i>stress form tab</i>	1	OTC
<i>super b comp tab /vit c</i>	1	OTC
<i>super b comp tab maxi</i>	1	OTC
<i>super b comp tab vit c</i>	1	OTC
SUPER B-50 CAP B-COMP	1	OTC
<i>super b-50 tab</i>	1	OTC
<i>super b-100 tab</i>	1	OTC
SUPER B- CAP COMPLEX	1	OTC
<i>super b- tab complex</i>	1	OTC
<i>super b-comp tab /fa/vitc</i>	1	OTC
<i>super b-comp tab vit c/fa</i>	1	OTC
<i>super dec tab b-100</i>	1	OTC
<i>super quints tab</i>	1	OTC
<i>super-b tab complex</i>	1	OTC
<i>triphocaps cap</i>	1	
<i>virt-caps cap</i>	1	
WEST-VITE TAB W/FA	1	OTC
<i>yl balanced tab b-100</i>	1	OTC
B-COMPLEX W/ IRON		
APETIGEN-PLS SOL	1	OTC
<i>b-complex w/ iron tab</i>	1	OTC
<i>super b-comp tab iron/c</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>B-COMPLEX W/ MINERALS</i>		
APETIGEN TAB PLUS	1	OTC
<i>eldertonic liq</i>	1	OTC
<i>senior tonic liq</i>	1	OTC
<i>BIOFLAVONOID PRODUCTS</i>		
ACTITROM CAP	1	OTC
ACTITROM-D CAP	1	OTC
ADVANCED C TAB PLUS	1	OTC
<i>anti-allergy tab</i>	1	OTC
BIOFLAVONOID POW CITRUS	1	OTC
<i>bioflavonoid products tab</i>	1	OTC
<i>bioflavonoid products tab er</i>	1	OTC
<i>bioflex tab</i>	1	OTC
<i>c1000 tr/rh tab bioflav</i>	1	OTC
<i>c1500 tr/rh tab bioflav</i>	1	OTC
<i>c1500/rh tab bioflav</i>	1	OTC
C 1000/BIOFL CAP /R HIPS	1	OTC
<i>c complex tab 500mg</i>	1	OTC
<i>c complex tab 1000mg</i>	1	OTC
DAFLONEX-XL CAP	1	OTC
DAFLONEX-XL TAB	1	OTC
<i>easy-c tab 500mg</i>	1	OTC
<i>ester-c tab</i>	1	OTC
<i>ester-c tab 500mg</i>	1	OTC
<i>ester-c tab 1000mg</i>	1	OTC
<i>flexgen tab</i>	1	OTC
FRUIT C CHW 200MG	1	OTC
GRAPE SEED CAP 50MG	1	OTC
<i>hi c-500 tab</i>	1	OTC
<i>LIQUID C LIQ</i>	1	OTC
<i>pan-c 500 tab bioflavo</i>	1	OTC
PERIDIN-C TAB	1	OTC
<i>ra vitamin c tab 1000mg</i>	1	OTC
<i>span c tab</i>	1	OTC
<i>super c-500 tab</i>	1	OTC
SUPER C-500 TAB COMPLEX	1	OTC
<i>super c-1000 tab</i>	1	OTC
<i>tri super tab flavons</i>	1	OTC
TROMBONEX CAP	1	OTC
TROMBONEX-D CAP	1	OTC
VASOFLEX CAP	1	OTC
VASOFLEX CAP FORTE	1	OTC
<i>vasoflex hd tab</i>	1	OTC
<i>vasoflex tab</i>	1	OTC
<i>vita c/biofl tab rose hip</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
VITAMIN C CAP FLAVONOI	1	OTC
VITAMIN C CHW 500MG	1	OTC
vitamin c tab plus	1	OTC
IRON W/ VITAMINS		
GERITOL LIQ TONIC	1	OTC
geritol tab complete	1	OTC
MULTIPLE VITAMINS W/ CALCIUM		
essent one tab daily	1	OTC
multi-day tab /ca/iron	1	OTC
one daily tab womens	1	OTC
ONE-A-DAY TAB WOMENS	1	OTC
signacal tab	1	OTC
SM ONE DAILY TAB ESSENTIA	1	OTC
MULTIPLE VITAMINS W/ IRON		
CHLORELLA CAP	1	OTC
daily multi tab vit/iron	1	OTC
daily vit tab +iron	1	OTC
daily vit tab iron	1	OTC
daily vite tab iron	1	OTC
daily-vitamn tab	1	OTC
multi vitami tab w/iron	1	OTC
multi-day tab /iron	1	OTC
multi-vit/fe tab	1	OTC
multiple vitamins w/ iron tab	1	OTC
multiv/iron tab adult	1	OTC
nat-rul dail tab vit/iron	1	OTC
one daily mv tab /iron	1	OTC
one-daily tab /iron	1	OTC
sm multiple tab vit/iron	1	OTC
stress b com tab w/iron	1	OTC
stress form tab /iron	1	OTC
tab-a-vite tab /iron	1	OTC
TAB-A-VITE TAB IRON/BET	1	OTC
MULTIPLE VITAMINS W/ MINERALS		
a thru z adv tab adult	1	OTC
a thru z chw select	1	OTC
a thru z sel tab 50+ adva	1	OTC
a thru z sel tab 50+ mens	1	OTC
a thru z sel tab advanced	1	OTC
a thru z tab advanced	1	OTC
a thru z tab high pot	1	OTC
a thru z tab select	1	OTC
a thru z tab ultimate	1	OTC
a thru z ult tab mens	1	OTC

Drug Name	Drug Tier	Requirements/Limits
ABC COMPLETE TAB WOMEN	1	OTC
<i>abc plus tab</i>	1	OTC
<i>abc plus tab senior</i>	1	OTC
ACTIVE 55 LIQ PLUS	1	OTC
ACTIVESSENT PAK	1	OTC
ACTIVNUTRIEN CAP	1	OTC
<i>adlt multivi chw gummies</i>	1	OTC
ADLT ONE DLY CHW GUMMIES	1	OTC
ADULT 50+ CAP EYE HLTH	1	OTC
ADULT 50+ CAP OCUVITE	1	OTC
<i>50+ adult cap eye hlth</i>	1	OTC
<i>adult gummy chw</i>	1	OTC
ADV DIABETIC TAB MULTIVIT	1	OTC
<i>advanced chw multi ea</i>	1	OTC
<i>advanced eye cap health</i>	1	OTC
<i>advanced tab formula</i>	1	OTC
AIRBORN+ POW REST	1	OTC
<i>airborne chw</i>	1	OTC
AIRBORNE CHW	1	OTC
<i>airborne chw gummies</i>	1	OTC
<i>airborne chw immune</i>	1	OTC
<i>airborne chw kids</i>	1	OTC
AIRBORNE CHW KIDS	1	OTC
AIRBORNE POW	1	OTC
AIRBORNE+ CHW PROBIOTI	1	OTC
AIRBORNE+ CHW REST	1	OTC
AIRBORNE+ POW STRESS	1	OTC
AIRBORNE+NAT LIQ ENERGY	1	OTC
<i>airshield chw</i>	1	OTC
AIRSHIELD CHW IMMUNITY	1	OTC
ALGAE BASED TAB CALCIUM	1	OTC
ALIVE 50+ TAB ENERGY	1	OTC
ALIVE 50+ TAB WOMENS	1	OTC
ALIVE DAILY TAB WOMENS	1	OTC
ALIVE ENERGY TAB MENS	1	OTC
ALIVE ENERGY TAB WOMENS	1	OTC
ALIVE LIQ MULT-VIT	1	OTC
ALIVE MULTI CHW VITAMIN	1	OTC
ALIVE WOMENS CHW 50+	1	OTC
ALIVE WOMENS CHW GUMMY	1	OTC
<i>amoryn mood cap booster</i>	1	OTC
<i>anti-oxidant cap formula</i>	1	OTC
<i>antiox form/ cap minerals</i>	1	OTC
<i>antioxidant cap</i>	1	OTC
ANTIOXIDANT TAB FORMULA	1	OTC

Drug Name	Drug Tier	Requirements/Limits
antioxidant tab protecti	1	OTC
antioxidant tab vitamins	1	OTC
antioxin cap 4000	1	OTC
AQUADEKS CHW	1	OTC
AZO HORMONAL TAB HEALTH	1	OTC
BARIATRIC CAP MULTIVIT	1	OTC
BARIATRIC CHW FUSION	1	OTC
BASIC AM TAB	1	OTC
BASIC PM TAB	1	OTC
bdy/hair/skn cap nails	1	OTC
BIO-35 GLUTE CAP FREE	1	OTC
BIO-35 IRON CAP FREE	1	OTC
BIOCAL CAP	1	OTC
biotin plus/ tab cal/vitd	1	OTC
bprotected liq multi-vi	1	OTC
C-BUFF POW	1	OTC
CAL-DAY 1000 TAB	1	OTC
CELEBRATE CAP 18	1	OTC
CELEBRATE CAP 36	1	OTC
CELEBRATE CAP 45	1	OTC
CELEBRATE CAP 60	1	OTC
CELEBRATE CHW 18	1	OTC
CELEBRATE CHW 36	1	OTC
CELEBRATE CHW 45	1	OTC
CELEBRATE CHW 60	1	OTC
CENT MATURE TAB ADLT 50+	1	OTC
cent mature tab womn 50+	1	OTC
centavite az tab minerals	1	OTC
CENTRAL-VITE TAB	1	OTC
central-vite tab mens mat	1	OTC
central-vite tab wmn's mat	1	OTC
centravites tab	1	OTC
centravites tab 50 plus	1	OTC
CENTRAVITES TAB 50 PLUS	1	OTC
CENTRAVITES TAB ADULTS	1	OTC
CENTRUM 50+ CHW FRSH/FRU	1	OTC
CENTRUM CHW	1	OTC
CENTRUM CHW FLAV BST	1	OTC
CENTRUM CHW SILVER	1	OTC
CENTRUM CHW VITAMINT	1	OTC
CENTRUM LIQ	1	OTC
CENTRUM MULT CHW OMEGA 3	1	OTC
CENTRUM POW DRINK	1	OTC
CENTRUM SILV TAB 50+MEN	1	OTC
CENTRUM SILV TAB 50+WOMEN	1	OTC

Drug Name	Drug Tier	Requirements/Limits
CENTRUM SILV TAB ADULT 50	1	OTC
CENTRUM SPEC TAB HEART	1	OTC
CENTRUM SPEC TAB IMMUNE	1	OTC
CENTRUM SPEC TAB VISION	1	OTC
CENTRUM TAB ADULTS	1	OTC
CENTRUM TAB CARDIO	1	OTC
CENTRUM TAB MEN	1	OTC
CENTRUM TAB SILVER	1	OTC
CENTRUM TAB ULTRA	1	OTC
CENTRUM TAB WOMEN	1	OTC
<i>century tab</i>	1	OTC
<i>century tab mature</i>	1	OTC
<i>cerovite tab senior</i>	1	OTC
<i>certa plus tab</i>	1	OTC
CERTAVIRE TAB SENIOR	1	OTC
CERTAVITE TAB SENIOR	1	OTC
<i>certavite/ tab antioxidant</i>	1	OTC
CERTAVITE/ TAB ANTIOXID	1	OTC
CHOICEFUL CAP MULTIVIT	1	OTC
CHOICEFUL CHW MULTIVIT	1	OTC
<i>comp daily tab w/lutein</i>	1	OTC
<i>comp energy tab</i>	1	OTC
<i>comp multivi liq mineral</i>	1	OTC
<i>companion tab</i>	1	OTC
<i>compete tab</i>	1	OTC
<i>complete multi tab adlt 50+</i>	1	OTC
<i>complete tab womens</i>	1	OTC
CONCEPTIONXR MIS MOTILITY	1	OTC
<i>coral calciu cap plus</i>	1	OTC
CULTURELLE CHW MULTIVIT	1	OTC
<i>cvs daily chw gummies</i>	1	OTC
CVS VISION CAP HEALTH	1	OTC
<i>daily betic tab</i>	1	OTC
<i>daily combo tab</i>	1	OTC
<i>daily diet tab support</i>	1	OTC
DAILY ENERGY POW ENFUSION	1	OTC
DAILY HEART PAK SUPPORT	1	OTC
<i>daily mens tab health</i>	1	OTC
<i>daily multi tab</i>	1	OTC
<i>daily multi tab 50+</i>	1	OTC
<i>daily multi tab men</i>	1	OTC
<i>daily multi tab minerals</i>	1	OTC
<i>daily multi tab vit/mens</i>	1	OTC
<i>daily multi tab vit/min</i>	1	OTC
<i>daily multi tab womn 50+</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
DAILY PAK MIS MULTIVIT	1	OTC
<i>daily vit tab +mineral</i>	1	OTC
<i>daily vitamn cap plus</i>	1	OTC
<i>daily womens tab health</i>	1	OTC
<i>daily-vitamn tab maximum</i>	1	OTC
DECUBI-VITE CAP	1	OTC
DEKAS CHW BARIATRI	1	OTC
DEKAS PLUS CAP	1	OTC
DEKAS PLUS CAP OCEAN	1	OTC
DEKAS PLUS CHW	1	OTC
DERMAVITE TAB	1	OTC
DIABET HLTH PAK SUPPORT	1	OTC
DIABETES PAK HEALTH	1	OTC
DIABETES PAK SUPPORT	1	OTC
<i>diabets hlth tab formula</i>	1	OTC
<i>dialyvite tab 800/d</i>	1	OTC
<i>drs choice tab men</i>	1	OTC
<i>dry eye cap formula</i>	1	OTC
EMERGEN-C CHW IMMUNE/D	1	OTC
EMERGEN-C CHW VITA C	1	OTC
EMERGEN-C PAK BLUE	1	OTC
EMERGEN-C PAK FIVE	1	OTC
EMERGEN-C PAK HEART	1	OTC
EMERGEN-C PAK IMMUNE	1	OTC
EMERGEN-C PAK JOINT	1	OTC
EMERGEN-C PAK KIDZ	1	OTC
EMERGEN-C PAK MSM LITE	1	OTC
EMERGEN-C PAK PINK	1	OTC
EMERGEN-C PAK SUPER FR	1	OTC
EMERGEN-C PAK VIT D/CA	1	OTC
EMERGEN-C PAK VITA C	1	OTC
ENDUR-VM TAB	1	OTC
ENDUR-VM TAB IRON	1	OTC
ENERGY POW BOOSTER	1	OTC
EQ COMPLETE TAB ADULT	1	OTC
EQ ONE DAILY TAB MENS	1	OTC
<i>eq one daily tab womens</i>	1	OTC
EQ ONE DAILY TAB WOMENS	1	OTC
<i>eql century tab</i>	1	OTC
<i>eql century tab mature</i>	1	OTC
EQL CENTURY TAB MENS	1	OTC
EQL CENTURY TAB WOMENS	1	OTC
<i>eql vision tab formula</i>	1	OTC
<i>essentia tab</i>	1	OTC
<i>essential tab balance</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
ESTROVEN MEN TAB SUPPLEM	1	OTC
EVOLUTION60 POW	1	OTC
<i>eye health & tab lutein</i>	1	OTC
EYE HEALTH CAP	1	OTC
EYE HEALTH CAP ADLT 50+	1	OTC
EYE HEALTH TAB LUTEIN	1	OTC
EYE MULTIVIT TAB LUTEIN	1	OTC
EYE MULTIVIT TAB SODIUM	1	OTC
<i>eye vitamins cap</i>	1	OTC
<i>eye-vites tab</i>	1	OTC
<i>eyeprotect tab</i>	1	OTC
FITNESS TABS TAB MEN	1	OTC
FITNESS TABS TAB WOMEN	1	OTC
FOLIKA-MG TAB	1	OTC
FOSFREE TAB	1	OTC
FREDAVITE TAB	1	OTC
GENADEK CAP STEP 1	1	OTC
GENADEK CAP STEP 2	1	OTC
GERI-FREEDA TAB SENIOR	1	OTC
<i>gerivite tab complete</i>	1	OTC
<i>glucoten cap</i>	1	OTC
<i>gnp century tab</i>	1	OTC
<i>gnp century tab senior</i>	1	OTC
<i>gnp century tab ultimate</i>	1	OTC
<i>gnp healthy tab eyes</i>	1	OTC
<i>hair formula tab ex stren</i>	1	OTC
<i>hair formula tab ultr man</i>	1	OTC
HAIR SKIN & TAB NAILS AD	1	OTC
<i>hair skin tab nails</i>	1	OTC
<i>hair vitamin tab</i>	1	OTC
<i>hair/skin cap nails</i>	1	OTC
HAIR/SKIN/ CAP NAILS	1	OTC
<i>hair/skin/ tab nails</i>	1	OTC
<i>healthy eyes cap</i>	1	OTC
<i>healthy eyes cap superv 2</i>	1	OTC
<i>healthy eyes cap supervis</i>	1	OTC
<i>healthy eyes tab</i>	1	OTC
<i>healthy eyes tab lutein</i>	1	OTC
HI POT MV/ TAB BETA-CAR	1	OTC
<i>hi-kovite tab 2-part</i>	1	OTC
<i>hi-potency tab multivit</i>	1	OTC
HIGH POTENCY TAB MV/FA	1	OTC
HM COMPLETE TAB MEN	1	OTC
<i>hm complete tab women</i>	1	OTC
HM HAIR/SKIN TAB /NAILS	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>i-vite tab</i>	1	OTC
ICAPS AREDS TAB FORMULA	1	OTC
<i>icaps cap</i>	1	OTC
<i>icaps lutein cap /omega-3</i>	1	OTC
<i>icaps mv tab</i>	1	OTC
IMMUBLAST-C POW ORANGE	1	OTC
IMMUNE CHW SUPPORT	1	OTC
IMMUNE SUPP POW VIT C	1	OTC
K-PAX TAB PROF ST	1	OTC
<i>kp adult 50+ tab daily</i>	1	OTC
<i>kp adults tab daily</i>	1	OTC
<i>kp mens 50+ tab daily</i>	1	OTC
KP MENS MIS DAILY PK	1	OTC
<i>kp mens tab daily</i>	1	OTC
<i>kp vision tab for/ltn</i>	1	OTC
<i>kp vision tab formula</i>	1	OTC
<i>kp women 50+ tab daily</i>	1	OTC
KP WOMENS PAK DAILY	1	OTC
<i>kp womens tab daily</i>	1	OTC
LIFE PACK MIS MENS	1	OTC
LIFE PACK MIS WOMENS	1	OTC
<i>life pack tab mens</i>	1	OTC
<i>life pack tab womens</i>	1	OTC
LUTEIN PLUS TAB ZEAXANTH	1	OTC
<i>lysiplex liq plus</i>	1	OTC
<i>macular hlth cap formula</i>	1	OTC
<i>macuvite tab</i>	1	OTC
<i>macuvite tab eye care</i>	1	OTC
<i>macuvite tab lutein</i>	1	OTC
<i>magnum-75 tab</i>	1	OTC
<i>max daily tab green</i>	1	OTC
MAXIMIN PAK	1	OTC
<i>mega multi tab men</i>	1	OTC
MEGA MULTI TAB MEN	1	OTC
<i>mega multi tab women</i>	1	OTC
MEGA MULTI TAB WOMEN	1	OTC
MEGA MULTIVI POW	1	OTC
MEGA MULTIVI TAB MEN	1	OTC
MEGA MULTIVI TAB WOMEN	1	OTC
<i>mega vm-80 tab</i>	1	OTC
<i>mega-maratho tab 100 tr</i>	1	OTC
MEGAVITE TAB FRT/VEG	1	OTC
MEGAVITE TAB GOLD 55+	1	OTC
MENS 50+ CAP ADVANCED	1	OTC
<i>mens daily cap lycopene</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>mens daily chw gummies</i>	1	OTC
<i>mens daily tab formula</i>	1	OTC
MENS MULTI CHW	1	OTC
MENS MULTI TAB VIT/MIN	1	OTC
MENS MULTIPL TAB	1	OTC
MENS PAK	1	OTC
<i>milltrium sr tab</i>	1	OTC
<i>milltrium tab advanced</i>	1	OTC
<i>milltrium tab cardio</i>	1	OTC
<i>mult vitamin tab no iron</i>	1	OTC
<i>mult vitamin tab womens</i>	1	OTC
<i>multi 50+ cap for her</i>	1	OTC
<i>multi 50+ tab for her</i>	1	OTC
<i>multi 50+ tab for him</i>	1	OTC
MULTI ADULT CHW EXTRA C	1	OTC
<i>multi adult chw gummies</i>	1	OTC
<i>multi cap complete</i>	1	OTC
<i>multi cap for her</i>	1	OTC
<i>multi cap for him</i>	1	OTC
<i>multi complt tab /iron</i>	1	OTC
MULTI FOR POW HER	1	OTC
MULTI FOR POW HIM	1	OTC
<i>multi gummie chw mens</i>	1	OTC
<i>multi gummie chw womens</i>	1	OTC
<i>multi tab for her</i>	1	OTC
<i>multi tab for him</i>	1	OTC
MULTI VITAMN TAB MINERALS	1	OTC
<i>multi+omega3 chw adult</i>	1	OTC
MULTI-BETIC TAB DIABETES	1	OTC
<i>multi-day tab minerals</i>	1	OTC
<i>multi-day tab wght trm</i>	1	OTC
<i>multi-lean tab</i>	1	OTC
<i>multi-vit/ tab minerals</i>	1	OTC
<i>multi-vitami chw gummies</i>	1	OTC
<i>multi-vitami tab menopaus</i>	1	OTC
MULTI-VITAMI TAB MONOCAPS	1	OTC
MULTI-VITE LIQ	1	OTC
<i>multi-vite tab</i>	1	OTC
<i>multi-vite tab 50&over</i>	1	OTC
<i>multiple vitamins w/ minerals tab</i>	1	OTC
<i>multiv women tab 50+</i>	1	OTC
<i>multiv women tab 50+ adv</i>	1	OTC
<i>multivi adlt chw gummies</i>	1	OTC
<i>multivitamin cap daily</i>	1	OTC
MULTIVITAMIN CHW ADLT GUM	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>multivitamin chw vita d3</i>	1	OTC
<i>multivitamin liq</i>	1	OTC
<i>multivitamin liq mineral</i>	1	OTC
MULTIVITAMIN TAB	1	OTC
<i>multivitamin tab adult 50+</i>	1	OTC
<i>multivitamin tab adt 50+</i>	1	OTC
MULTIVITAMIN TAB ADULT	1	OTC
<i>multivitamin tab adults</i>	1	OTC
MULTIVITAMIN TAB ADULTS	1	OTC
MULTIVITAMIN TAB MEN	1	OTC
<i>multivitamin tab men 50+</i>	1	OTC
<i>multivitamin tab women</i>	1	OTC
MULTIVITAMIN TAB WOMEN	1	OTC
<i>multivitamin tab womens</i>	1	OTC
MULTIVITAMIN TAB ZINC STR	1	OTC
MVW COMPLETE CAP D3000	1	OTC
MVW COMPLETE CAP D5000	1	OTC
MVW COMPLETE CAP FORMULAT	1	OTC
MVW COMPLETE CAP MINIS	1	OTC
<i>myamulti tab</i>	1	OTC
NANOVM POW ADULT	1	OTC
NANOVM POW SENIOR	1	OTC
NAT-RUL THER TAB M	1	OTC
<i>natrul-100 tab super</i>	1	OTC
NATRUL-VITES TAB	1	OTC
NUTRIENT 45+ TAB WOMEN	1	OTC
NUTRIENT 50+ TAB MEN	1	OTC
NUTRIENTS CAP ANTIOXID	1	OTC
NUTRIENTS TAB MEN	1	OTC
NUTRIENTS TAB TEENS	1	OTC
NUTRIENTS TAB WOMEN	1	OTC
<i>nutritional tab support</i>	1	OTC
OCUHEALTH CAP VISION 2	1	OTC
OCULAR TAB VITAMINS	1	OTC
<i>ocutabs tab</i>	1	OTC
<i>ocutabs tab lutein</i>	1	OTC
OCUVITE CAP ADULT	1	OTC
<i>ocuvite eye cap health</i>	1	OTC
<i>ocuvite eye chw heathl</i>	1	OTC
<i>ocuvite eye tab + multi</i>	1	OTC
OCUVITE LUTE CAP	1	OTC
<i>ocuvite tab lutein</i>	1	OTC
<i>ocuvite xtra tab</i>	1	OTC
ONCOVITE TAB	1	OTC
ONE DAILY CHW ADLT GUM	1	OTC

Drug Name	Drug Tier	Requirements/Limits
ONE DAILY MN TAB W/O IRON	1	OTC
ONE DAILY MV TAB WOMENS	1	OTC
<i>one daily tab 50 plus</i>	1	OTC
<i>one daily tab 50+</i>	1	OTC
<i>one daily tab 50+ adv</i>	1	OTC
<i>one daily tab /mineral</i>	1	OTC
<i>one daily tab complete</i>	1	OTC
<i>one daily tab essentl</i>	1	OTC
<i>one daily tab fe/ca</i>	1	OTC
<i>one daily tab healthy</i>	1	OTC
<i>one daily tab iron-fre</i>	1	OTC
<i>one daily tab maximum</i>	1	OTC
<i>one daily tab men</i>	1	OTC
<i>one daily tab men 50+</i>	1	OTC
<i>one daily tab mens</i>	1	OTC
ONE DAILY TAB MENS	1	OTC
<i>one daily tab mens 50+</i>	1	OTC
ONE DAILY TAB MENS 50+	1	OTC
<i>one daily tab multivit</i>	1	OTC
<i>one daily tab plus iro</i>	1	OTC
ONE DAILY TAB WMNS 50+	1	OTC
<i>one daily tab wom 50+</i>	1	OTC
<i>one daily tab women</i>	1	OTC
<i>one daily tab women 50</i>	1	OTC
<i>one daily tab womens</i>	1	OTC
ONE DAILY TAB WOMENS	1	OTC
<i>one daily/ tab minerals</i>	1	OTC
<i>one dly hlth tab wght adv</i>	1	OTC
ONE-A-DAY CHW IMMUNITY	1	OTC
ONE-A-DAY CHW VITACRAV	1	OTC
ONE-A-DAY TAB 50+	1	OTC
ONE-A-DAY TAB 50+ ADV	1	OTC
ONE-A-DAY TAB 65+	1	OTC
ONE-A-DAY TAB ENERGY	1	OTC
ONE-A-DAY TAB MENOPAUS	1	OTC
ONE-A-DAY TAB MENS	1	OTC
ONE-A-DAY TAB PETITES	1	OTC
ONE-A-DAY TAB PROEDGE	1	OTC
<i>one-a-day tab teen/her</i>	1	OTC
ONE-A-DAY TAB TEEN/HIM	1	OTC
ONE-A-DAY TAB WOMENS	1	OTC
ONE-DAILY CAP MULTI	1	OTC
ONE-DAILY PAK VIT/MIN	1	OTC
<i>optic-vites tab</i>	1	OTC
<i>optic-vites tab lutein</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
OPTIFAST POS CHW BARIATRI	1	OTC
OPTIMUM CHW AIRVITES	1	OTC
<i>optimum pms tab</i>	1	OTC
OPTISOURCE CHW BARIATRC	1	OTC
OPTIVITE TAB P.M.T.	1	OTC
OPURITY CHW BYPASS	1	OTC
OPURITY TAB	1	OTC
OSTEOPRIME TAB PLUS	1	OTC
<i>osteoprime tab ultra</i>	1	OTC
PARVLEX TAB	1	OTC
PHLEXY-VITS POW	1	OTC
PHYTOMULTI TAB	1	OTC
<i>pms support cap complex</i>	1	OTC
PORENAL+D CAP OMEGA 3	1	OTC
PREMIUM MIS PACKETS	1	OTC
PRESCRIPTIVE PAK FORM MEN	1	OTC
PRESCRIPTIVE PAK FORM WMN	1	OTC
PRESERVISION CAP AREDS	1	OTC
PRESERVISION CAP AREDS 2	1	OTC
PRESERVISION CAP LUTEIN	1	OTC
PRESERVISION CHW AREDS 2	1	OTC
PRESERVISION TAB AREDS	1	OTC
PRO-CAL TAB	1	OTC
PROCERV HP TAB	1	OTC
PRORENAL +D TAB	1	OTC
PRORENAL+D CAP OMEGA-3	1	OTC
PRORENAL+D TAB	1	OTC
<i>prosight tab</i>	1	OTC
PROTECT CAP CARDIO	1	OTC
PROTECT CAP PLUS SO	1	OTC
PROTEGRA CAP	1	OTC
PROVIT TAB	1	OTC
PROXEED PLUS PAK	1	OTC
<i>px advanced tab multivit</i>	1	OTC
<i>px complete tab senior</i>	1	OTC
<i>px mens mult tab vitamins</i>	1	OTC
<i>qc hair/skin tab nails</i>	1	OTC
QC MULTI-VIT TAB	1	OTC
<i>qc therin-m tab</i>	1	OTC
QUIN B TAB STRONG	1	OTC
<i>quintabs-m tab</i>	1	OTC
QUINTABS-M TAB	1	OTC
RA ESSENCE-C POW ORANGE	1	OTC
RA ESSENCE-C POW RASPBRY	1	OTC
RA ESSENCE-C POW TNGERINE	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>ra one daily tab maximum</i>	1	OTC
<i>ra one daily tab mens</i>	1	OTC
<i>ra one daily tab mens 50+</i>	1	OTC
<i>ra one daily tab mens/d3</i>	1	OTC
<i>renaplex tab</i>	1	OTC
RENAPLEX-D TAB	1	OTC
SAVISION CAP	1	OTC
<i>senior tabs tab</i>	1	OTC
<i>sentry adult tab under 50</i>	1	OTC
SENTRY SENIO TAB LUTEIN	1	OTC
<i>sentry tab</i>	1	OTC
SENTRY TAB	1	OTC
<i>sentry tab senior</i>	1	OTC
SENTRY TAB SENIOR	1	OTC
SKIN BEAUTY/ PAK WELLNESS	1	OTC
<i>sm complete tab</i>	1	OTC
<i>sm complete tab 50+</i>	1	OTC
<i>sm complete tab 50+ mens</i>	1	OTC
<i>sm complete tab 50+ wmn</i>	1	OTC
<i>sm complete tab adv form</i>	1	OTC
<i>sm complete tab senior</i>	1	OTC
<i>sm hair/skin tab /nails</i>	1	OTC
SM ONE DAILY TAB MENS	1	OTC
SM ONE DAILY TAB WOMENS	1	OTC
<i>sm opti-vita tab</i>	1	OTC
SOLO TAB	1	OTC
<i>spectr women tab hlth sen</i>	1	OTC
<i>spectra ultr tab hlth men</i>	1	OTC
SPECTRAVITE CHW ADLT 50+	1	OTC
SPECTRAVITE CHW WOMEN	1	OTC
SPECTRAVITE TAB	1	OTC
SPECTRAVITE TAB ADLT 50+	1	OTC
SPECTRAVITE TAB ADULTS	1	OTC
<i>spectravite tab advanced</i>	1	OTC
<i>spectravite tab men</i>	1	OTC
<i>spectravite tab men 50+</i>	1	OTC
SPECTRAVITE TAB MEN 50+	1	OTC
<i>spectravite tab senior</i>	1	OTC
SPECTRAVITE TAB SENIOR	1	OTC
SPECTRAVITE TAB ULT MEN	1	OTC
SPECTRAVITE TAB ULT WMN	1	OTC
<i>spectravite tab women 50</i>	1	OTC
<i>stress b-com tab /c/zinc</i>	1	OTC
<i>stress form tab /iron</i>	1	OTC
<i>stress form/ tab zinc</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>stress tab formula</i>	1	OTC
<i>stresstabs tab advanced</i>	1	OTC
<i>sunvite actv tab adult</i>	1	OTC
<i>sunvite tab advanced</i>	1	OTC
SUPER ANTIOX CAP	1	OTC
<i>super antiox cap protect</i>	1	OTC
<i>super antiox tab a/c/e/se</i>	1	OTC
<i>super liq nu-thera</i>	1	OTC
<i>super multip cap</i>	1	OTC
<i>super multip tab</i>	1	OTC
SUPER POW NU-THERA	1	OTC
<i>super tab nu-thera</i>	1	OTC
<i>super thera tab vite m</i>	1	OTC
<i>superior 35 tab</i>	1	OTC
<i>supr aytinal tab</i>	1	OTC
<i>supr aytinal tab 50 plus</i>	1	OTC
<i>supr vitamin tab</i>	1	OTC
<i>systane icap cap areds2</i>	1	OTC
SYSTANE ICAP CHW AREDS2	1	OTC
SYSTANE ICAP TAB AREDS2	1	OTC
T-VITES TAB	1	OTC
<i>thera form/ tab hematin</i>	1	OTC
THERA M PLUS TAB	1	OTC
<i>thera tab vital-m</i>	1	OTC
<i>thera vital tab m</i>	1	OTC
<i>thera-m tab</i>	1	OTC
THERA-M TAB	1	OTC
<i>thera-mill m tab</i>	1	OTC
THERA-TABS M TAB	1	OTC
<i>therabasic-m tab</i>	1	OTC
THERABETIC TAB MULTIVIT	1	OTC
<i>theradex m tab</i>	1	OTC
<i>theradex m/ tab beta car</i>	1	OTC
THERAGRAN-M TAB	1	OTC
THERAGRAN-M TAB 50 PLUS	1	OTC
THERAGRAN-M TAB ADVANCED	1	OTC
THERAGRAN-M TAB PREMIER	1	OTC
THERAMILL CAP FORTE	1	OTC
THERANATAL CAP LACTATIO	1	OTC
THERANATAL MIS LACTATIO	1	OTC
<i>therapeutic tab</i>	1	OTC
<i>therapeutic tab -m</i>	1	OTC
<i>therapeutic- tab m</i>	1	OTC
<i>therapeutic- tab m/lutein</i>	1	OTC
<i>theratrum co tab 50 plus</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>theratrum tab complete</i>	1	OTC
<i>theravim -m tab</i>	1	OTC
THEREMS-M TAB	1	OTC
<i>thrive for tab women</i>	1	OTC
<i>totalday mul tab tr</i>	1	OTC
<i>tropical liq nutritio</i>	1	OTC
<i>ultra antiox tab formula</i>	1	OTC
<i>ultra freeda tab</i>	1	OTC
<i>ultra freeda tab /iron</i>	1	OTC
ULTRA MEGA G TAB 75MG CR	1	OTC
ULTRA MEGA G TAB 100MG	1	OTC
ULTRA MEGA TAB 75MG CR	1	OTC
ULTRA MEGA TAB TWO	1	OTC
<i>ultra multi cap /iron</i>	1	OTC
<i>ultra vita-t tab</i>	1	OTC
<i>ultra-mega tab cr</i>	1	OTC
<i>ultrachoice tab advanced</i>	1	OTC
<i>vision form cap 2</i>	1	OTC
<i>vision form cap eye hlth</i>	1	OTC
<i>vision form/ tab lutein</i>	1	OTC
<i>vision formu cap 50+</i>	1	OTC
<i>vision plus cap</i>	1	OTC
<i>vision tab vitamins</i>	1	OTC
<i>visivites tab</i>	1	OTC
<i>visivites tab /lutein</i>	1	OTC
VISTA ADVAN CAP AREDS2	1	OTC
VISTA ADVAN CAP DRY EYE	1	OTC
<i>vita hair tab</i>	1	OTC
<i>vita-min cap</i>	1	OTC
<i>vitabasic tab complete</i>	1	OTC
<i>vitabasic tab senior</i>	1	OTC
VITABEX CAP	1	OTC
VITABEX PLUS CAP	1	OTC
VITACRAVES CHW GUMMIES	1	OTC
VITACRAVES CHW IMMUNITY	1	OTC
VITACRAVES CHW MENS	1	OTC
VITACRAVES CHW SOUR GUM	1	OTC
VITACRAVES CHW WOMENS	1	OTC
VITALINE TAB FORMULA2	1	OTC
VITALINE TAB FORMULA3	1	OTC
VITAMENT PAK	1	OTC
VITAMIN C PAK BLEND	1	OTC
VITAMIN C POW ELECTROL	1	OTC
VITAMIN D3 TAB COMPLETE	1	OTC
VITAMINS TO MIS GO MAX	1	OTC

Drug Name	Drug Tier	Requirements/Limits
VITAMINS TO MIS GO MEN	1	OTC
VITAMINS TO MIS GO WOMEN	1	OTC
VITASANA TAB	1	OTC
<i>vitatrum chw</i>	1	OTC
VITATRUM TAB	1	OTC
<i>vitatrum tab complete</i>	1	OTC
VITEYES CAP CLASSIC	1	OTC
<i>viteyes cap complete</i>	1	OTC
VITEYES CLAS CAP ADV	1	OTC
VITEYES CLAS CAP ADVANCED	1	OTC
VITEYES CLAS CAP MAC SUPP	1	OTC
VITEYES CLAS CAP OMEGA-3	1	OTC
VITEYES CLAS POW +MULTI	1	OTC
VITEYES CLAS TAB MULTIVIT	1	OTC
VITEYES OPTI TAB NERV SUP	1	OTC
VITRUM TAB ADULT	1	OTC
<i>vitrum tab senior</i>	1	OTC
VITRUM TAB SENIOR	1	OTC
WAL-BORN CHW VIT C	1	OTC
WEIGHT SMART TAB ADVANCED	1	OTC
WHOLE FOOD TAB MULTIVIT	1	OTC
WMNS MULTIVI CHW +COLLAGE	1	OTC
<i>womens 50+ cap advanced</i>	1	OTC
<i>womens 50+ tab advanced</i>	1	OTC
<i>womens cap multi</i>	1	OTC
<i>womens daily chw gummies</i>	1	OTC
<i>womens daily tab fa/ca/fe</i>	1	OTC
<i>womens daily tab formula</i>	1	OTC
WOMENS MULT CHW GUMMIES	1	OTC
<i>womens mult tab</i>	1	OTC
WOMENS MULTI TAB VIT/MIN	1	OTC
<i>womens one tab daily</i>	1	OTC
WOMENS PAK	1	OTC
<i>womns active tab daily</i>	1	OTC
YELETS TEEN TAB FORMULA	1	OTC
YOUR LIFE CHW GUMMIES	1	OTC
YOUR LIFE CHW MULTIVIT	1	OTC
<i>your life tab mens 50+</i>	1	OTC
<i>your life tab wmns 50+</i>	1	OTC
ZINC LOZ	1	OTC

MULTIVITAMINS

<i>anti-oxidant tab</i>	1	OTC
<i>antioxidant cap formula</i>	1	OTC
<i>chlorocaps cap</i>	1	OTC
<i>daily multi tab vitamins</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>daily tab vitamin</i>	1	OTC
<i>daily value tab multivit</i>	1	OTC
<i>daily vit tab</i>	1	OTC
<i>daily vite tab</i>	1	OTC
<i>daily-vitamn tab</i>	1	OTC
<i>daily-vite tab</i>	1	OTC
DEKAS CAP ESSENTIA	1	OTC
DEKAS LIQ ESSENTIA	1	OTC
<i>essentl one tab daily</i>	1	OTC
ESTROFACTORS TAB	1	OTC
<i>healthy hair tab skn/nail</i>	1	OTC
HIGH POTENCY TAB MULTIVIT	1	OTC
<i>mult vitamin tab daily</i>	1	OTC
<i>mult vitamin tab essent</i>	1	OTC
MULTI VITAMI TAB	1	OTC
MULTI VITAMI TAB D-3	1	OTC
<i>multi-day tab</i>	1	OTC
<i>multi-vitamn tab</i>	1	OTC
<i>multiple vitamin cap</i>	1	OTC
<i>multiple vitamin tab</i>	1	OTC
MULTIVITAMIN DRO ORGANIC	1	OTC
MULTIVITAMIN LIQ	1	OTC
MULTIVITAMIN TAB	1	OTC
<i>multivitamin tab adult</i>	1	OTC
MULTIVITAMIN TAB ADULT	1	OTC
<i>multivitamin tab daily</i>	1	OTC
<i>multivitamin tab iron-fre</i>	1	OTC
<i>mv-one cap</i>	1	OTC
NEOMULTIVITE TAB	1	OTC
OMNICAP TAB	1	OTC
<i>once daily tab</i>	1	OTC
<i>one daily tab</i>	1	OTC
<i>one daily tab essentl</i>	1	OTC
ONE DAILY TAB ESSENTL	1	OTC
<i>one daily tab multivit</i>	1	OTC
ONE-A-DAY CHW VITACRAV	1	OTC
ONE-A-DAY TAB ESSENT	1	OTC
ONE-A-DAY TAB MENS	1	OTC
<i>one-daily tab mult vit</i>	1	OTC
<i>one-daily tab mult-vit</i>	1	OTC
<i>qc essential tab</i>	1	OTC
QUINTABS TAB	1	OTC
<i>sm multiple tab vitamins</i>	1	OTC
<i>stress form tab</i>	1	OTC
<i>stress formu tab</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>stresstabs tab</i>	1	OTC
<i>stresstabs tab energy</i>	1	OTC
<i>tab-a-vite tab</i>	1	OTC
<i>tab-a-vite tab beta car</i>	1	OTC
<i>THERA TAB</i>	1	OTC
<i>thera-mill tab</i>	1	OTC
<i>thera-tabs tab</i>	1	OTC
<i>THEREMS TAB MULTIVIT</i>	1	OTC
<i>vitalee tab</i>	1	OTC
<i>viteyes clas cap zinc fre</i>	1	OTC
<i>ZE-PLUS CAP</i>	1	OTC

PED MULTI VITAMINS W/FL & FE

<i>multi-vit/fe dro /fl 0.25</i>	1	OTC
<i>multi-vit/fl dro /fe 0.25</i>	1	
<i>multivit/fl/ dro fe 0.25</i>	1	OTC

PED MULTIPLE VITAMINS W/ MINERALS

<i>alive gummie chw children</i>	1	OTC
<i>alive multi chw childrns</i>	1	OTC
<i>AQUADEKS DRO</i>	1	OTC
<i>BABY IRON DRO IMMUNITY</i>	1	OTC
<i>CENTRUM KIDS CHW</i>	1	OTC
<i>CENTRUM KIDS CHW FLAV BST</i>	1	OTC
<i>childrens chw gummies</i>	1	OTC
<i>complete chw multi-vi</i>	1	OTC
<i>DEKAS PLUS LIQ</i>	1	OTC
<i>disney cars chw gummies</i>	1	OTC
<i>eq multivita chw gummies</i>	1	OTC
<i>flintstones chw bone bld</i>	1	OTC
<i>FLINTSTONES CHW COMPLETE</i>	1	OTC
<i>FLINTSTONES CHW GUMMIES</i>	1	OTC
<i>FLINTSTONES CHW IMMUNITY</i>	1	OTC
<i>FLINTSTONES CHW SOUR GUM</i>	1	OTC
<i>FLINTSTONES CHW TODDLER</i>	1	OTC
<i>GENADEK DRO</i>	1	OTC
<i>gummi bear chw multivit</i>	1	OTC
<i>gummies chw</i>	1	OTC
<i>gummy dinos chw</i>	1	OTC
<i>gummy dinos chw chldrn</i>	1	OTC
<i>gummy multiv chw kids</i>	1	OTC
<i>HEALTHY KIDS CHW GUMMIES</i>	1	OTC
<i>healthy kids chw overall</i>	1	OTC
<i>JOLLY RANCHR CHW ONE-A-DA</i>	1	OTC
<i>KIDZ MULTVIT CHW PROBIOTI</i>	1	OTC
<i>multivitamin chw child</i>	1	OTC
<i>multivitamin chw children</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>mvw complete chw bubblegum</i>	1	OTC
<i>mvw complete chw d3000</i>	1	OTC
<i>mvw complete chw d5000</i>	1	OTC
MVW COMPLETE CHW GRAPE	1	OTC
<i>mvw complete chw orange</i>	1	OTC
NANOVM POW 1-3 YRS	1	OTC
NANOVM POW 4-8YEARS	1	OTC
NANOVM POW 9-18 YRS	1	OTC
NANOVM T/F POW	1	OTC
NF FORMULAS CHW CHILDREN	1	OTC
ONE-A-DAY CHW SCOOBY	1	OTC
<i>princess chw gummies</i>	1	OTC
<i>sea buddies chw dly mult</i>	1	OTC
<i>smarty pants chw kids</i>	1	OTC
<i>spider-man chw</i>	1	OTC
UPSPRINGBABY DRO MV/IRON	1	OTC
<i>vitachew chw</i>	1	OTC
VITALETS CHW CHILD	1	OTC
<i>zoo friends chw</i>	1	OTC
ZOO FRIENDS CHW COMPLETE	1	OTC
<i>zoo friends chw extra d</i>	1	OTC
<i>zoo friends chw gummies</i>	1	OTC

PED MV W/ FLUORIDE

FLORIVA DRO PLUS	1	
<i>multi vit/fl chw 0.25mg</i>	1	
<i>multi vit/fl dro 0.5mg/ml</i>	1	OTC
<i>multi-vit/fl dro 0.5mg/ml</i>	1	
MULTIV+FLUOR CHW 0.5MG	1	OTC
MULTIV+FLUOR CHW 0.25MG	1	OTC
MULTIV+FLUOR CHW 1MG	1	OTC
<i>multivit/fl chw 0.5mg</i>	1	
MULTIVIT/FL CHW 0.5MG	1	
<i>multivit/fl chw 0.25mg</i>	1	
MULTIVIT/FL CHW 0.25MG	1	
<i>multivit/fl chw 1mg</i>	1	
MULTIVIT/FL CHW 1MG	1	
<i>multivit/fl dro 0.5mg/ml</i>	1	OTC
<i>multivit/fl dro 0.25mg</i>	1	
<i>multivit/fl dro 0.25mg</i>	1	OTC
<i>mv select/fl dro 0.25mg</i>	1	OTC
<i>pediatric vitamins acd w/ fluoride soln 0.5 mg/ml</i>	1	
QUFLORA PED CHW 0.5MG	1	
QUFLORA PED CHW 0.25MG	1	
QUFLORA PED CHW 1MG	1	

Drug Name	Drug Tier	Requirements/Limits
QUFLORA PED DRO 0.5MG/ML	1	
QUFLORA PED DRO 0.25MG	1	
tri-vit/fluoride dro 0.5mg	1	
tri-vit/fluoride dro 0.25mg	1	
vit a/c/d/fl dro 0.25mg	1	
PED MV W/ IRON		
animal shape chw complete	1	OTC
ANIMAL SHAPE CHW IRON	1	OTC
bite-a-mins chw /iron	1	OTC
cerovite jr chw	1	OTC
chewable chw children	1	OTC
child multiv chw iron	1	OTC
child vitami chw	1	OTC
childrens chw /iron	1	OTC
childrens chw complete	1	OTC
chld mltvิต chw /mineral	1	OTC
chld vitamin chw iron	1	OTC
compl multiv chw childrn	1	OTC
cvs children chw complete	1	OTC
DINO-LIFE CHW IRON-ZIN	1	OTC
flintstones chw complete	1	OTC
flintstones chw w/iron	1	OTC
fruity chews chw /iron	1	OTC
HONEY BEARS CHW IRON-ZIN	1	OTC
land bfr tim chw vit/iron	1	OTC
little anima chw plus fe	1	OTC
MULTIVITAMIN CHW IRON	1	OTC
PED POLY-VIT DRO /IRON	1	OTC
POLY-VITA/FE DRO	1	OTC
POLY-VITE SOL /IRON	1	OTC
qc childrens chw complete	1	OTC
qc childrens chw iron	1	OTC
SCOODY-DOO CHW	1	OTC
sm animal sh chw complete	1	OTC
ultra choice chw kids	1	OTC
zoo friends chw pls iron	1	OTC
PEDIATRIC MULTIPLE VITAMINS		
animal chews chw	1	OTC
bite-a-mins chw	1	OTC
bounty bears chw /c	1	OTC
child chew chw vitamins	1	OTC
child chew/ chw extra c	1	OTC
children vit chw	1	OTC
childrens chw multivit	1	OTC
childrens chw vitamin	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>childrens chw vitamins</i>	1	OTC
CULTURELLE CHW	1	OTC
<i>dino-life chw</i>	1	OTC
<i>dino-life chw extra c</i>	1	OTC
<i>flintstones chw extra c</i>	1	OTC
<i>flintstones chw my first</i>	1	OTC
<i>flintstones chw omega-3</i>	1	OTC
<i>flintstones chw pls calc</i>	1	OTC
<i>fruity chews chw</i>	1	OTC
<i>gerber grow chw mighty</i>	1	OTC
GERBER LIL CHW BRAINIES	1	OTC
<i>gnp little chw ones</i>	1	OTC
KIDS PROBIOT CHW MULTIVIT	1	OTC
<i>land bfr tim chw vit/c</i>	1	OTC
<i>little chw animals</i>	1	OTC
<i>multivitamin chw children</i>	1	OTC
MULTIVITAMIN CHW CHILDREN	1	OTC
NOVAMV PED DRO 10MG/ML	1	OTC
PEDIAVIT LIQ	1	OTC
<i>qc childrens chw extra c</i>	1	OTC
<i>sm animal chw shapes</i>	1	OTC
VITACRAVES CHW +OMEGA-3	1	OTC
<i>zoo friends chw extra c</i>	1	OTC
<i>zoo friends chw gummies</i>	1	OTC
<i>zoo friends chw plus c</i>	1	OTC

PEDIATRIC VITAMINS

HONEY BEARS CHW	1	OTC
MULTIVITAMIN CHW CHILD	1	OTC

PREGNATAL VITAMINS

CITRANATAL TAB RX	1
<i>elite-ob tab</i>	1
<i>inatal gt tab</i>	1
<i>pnv-dha cap</i>	1
<i>pnv-select tab</i>	1
<i>prenatabs rx tab</i>	1
<i>prenatal 19 chw tab</i>	1
<i>trinate tab</i>	1

SPECIALTY VITAMINS PRODUCTS

<i>a thru z tab advantag</i>	1	OTC
ADRENAL TAB CALM	1	OTC
ADRENOID CAP	1	OTC
ADV COLLAGEN TAB	1	OTC
ALLERWELL TAB ALLERGY	1	OTC
BILBERRY CAP PLUS	1	OTC

Drug Name	Drug Tier	Requirements/Limits
BIOTIN PLUS TAB KERATIN	1	OTC
BRAIN MIGHT TAB	1	OTC
CARDIOPRESS CAP	1	OTC
CENTRUM SPEC TAB ENERGY	1	OTC
CENTRUM TAB PERFORMA	1	OTC
CHOLASE CAP CONTROL	1	OTC
COLLAGEN CAP ULTRA	1	OTC
CVS HAIR/SKN TAB NAILS	1	OTC
ELON MATRIX TAB 5000	1	OTC
ELON MATRIX TAB 5000 COM	1	OTC
ELON MATRIX TAB COMPLETE	1	OTC
ELON MATRIX TAB PLUS	1	OTC
ELON R3 TAB	1	OTC
GERM DEFENSE TAB PM	1	OTC
GLYCOTROL CAP	1	OTC
GLYCOTROL CAP COMPLETE	1	OTC
GNP CENTURY TAB ENERGY	1	OTC
GREEN SOURCE TAB	1	OTC
HAIR FARE TAB	1	OTC
HAIR NOURISH TAB SUPPLEMN	1	OTC
<i>hair/skin/ tab nails</i>	1	OTC
HEALTHY TAB HEART	1	OTC
HEART SAVIOR CAP	1	OTC
HEART TABS TAB	1	OTC
IMMUNERX CAP	1	OTC
IMMUNICARE CAP	1	OTC
INULOSE BLD CAP SUGAR	1	OTC
LIPIDSHIELD TAB PLUS	1	OTC
LIPOTRIAD CAP VIS PLUS	1	OTC
LIPOTRIAD CAP VISION	1	OTC
LIPOTRIAD CAP VISIONAR	1	OTC
MENOPAUSE MIS AM/PM	1	OTC
<i>menopause tab support</i>	1	OTC
METHYL-GUARD CAP	1	OTC
METHYL-GUARD CAP PLUS	1	OTC
MG PLUS TAB PROTEIN	1	OTC
MIL ADREGEN TAB	1	OTC
<i>milltrium tab stamina</i>	1	OTC
MM BIOTIN CAP KERATIN	1	OTC
NEW LIFE TAB HAIR	1	OTC
RA EAR CARE TAB	1	OTC
RA EFFERVESC TAB FORMULA	1	OTC
RETAIN CAP VISION	1	OTC
SYNERTROPIN CAP	1	OTC
THERABETIC TAB EYE HLTH	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>ultimate fat tab burner</i>	1	OTC
ULTRA MAN TAB	1	OTC
ULTRA WOMAN TAB	1	OTC
UPSPRING TAB HE NATAL	1	OTC
<i>varisan tab vitality</i>	1	OTC
VISTA ADVAN CAP CAROTEN	1	OTC
<i>vit for hair tab</i>	1	OTC
VITAMINS FOR TAB THE HAIR	1	OTC
WAL-BORN TAB	1	OTC
<i>weight loss tab multi</i>	1	OTC
WOMENS MENOP MIS VITA PAK	1	OTC
WOMENS VITA MIS PAK	1	OTC
VITAMIN MIXTURES		
<i>cod liver cap</i>	1	OTC
<i>cod liver cap oil</i>	1	OTC
<i>cod liver cap oil/a&d</i>	1	OTC
<i>cod liver chw /vit d</i>	1	OTC
<i>cod liver chw w/vit</i>	1	OTC
COD LIVER OIL	1	OTC
COD LIVER OIL FOR KIDS	1	OTC
COD LIVER OIL NORWEGIA	1	OTC
COD LIVER OIL OIL	1	OTC
COD LIVER OIL USP/NF	1	OTC
<i>cranberry cap urin com</i>	1	OTC
D3 + K2 DOTS TAB	1	OTC
D3/VITAMIN C TAB /ZINC	1	OTC
<i>d 400 cap</i>	1	OTC
DOSOQUIN TAB	1	OTC
<i>e-400 cap selenium</i>	1	OTC
ECEE PLUS TAB	1	OTC
K2 PLUS D3 TAB	1	OTC
<i>niacin cap 400-100</i>	1	OTC
<i>niacin cap 400mg</i>	1	OTC
<i>qc cod liver cap</i>	1	OTC
<i>ra cod liver cap</i>	1	OTC
RA COD LIVER OIL	1	OTC
SUPER D3 CAP COMPLEX	1	OTC
VITAMIN C LIQ	1	OTC
VITAMIN E CAP COMPLETE	1	OTC
<i>vitamin mixture cap</i>	1	OTC
<i>vitamins a & d cap</i>	1	OTC
<i>vitamins a & d tab</i>	1	OTC
<i>vitamins c & e cap</i>	1	OTC
<i>yl vitamin cap a & d</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
VITAMINS W/ LIPOTOPICS		
ACTIFLOVIT TAB EAR HEAL	1	OTC
b-50 tab	1	OTC
b-100 comp tab tr	1	OTC
b-100 complx tab	1	OTC
b-100 tab	1	OTC
b-100 tab td	1	OTC
b-100 tab tr	1	OTC
b-complex tab form 1	1	OTC
b-stress cap	1	OTC
balanc b-100 tab tr	1	OTC
balance b100 tab	1	OTC
balance b-50 cap complex	1	OTC
balance b-50 tab complex	1	OTC
cvs balanced tab b50	1	OTC
cvs inner tab ear plus	1	OTC
ear health tab formula	1	OTC
ear health tab plus	1	OTC
GERAVINE ELX	1	OTC
inner ear tab plus	1	OTC
lipo flavono tab plus	1	OTC
lipoflavovit tab	1	OTC
LIPOTRIAD TAB	1	OTC
mega multi tab w/che mi	1	OTC
methacholine cap /liver	1	OTC
multi-vit hp cap /mineral	1	OTC
nat-rul tab b-50	1	OTC
px b-50 tab	1	OTC
risanoid tab plus	1	OTC
super stress tab b-complx	1	OTC
ultra b-100 tab complex	1	OTC
vitamins w/ lipotropics tab	1	OTC

MUSCULOSKELETAL THERAPY AGENTS

CENTRAL MUSCLE RELAXANTS

baclofen tab 10 mg	1	
baclofen tab 20 mg	1	
carisoprodol tab 350 mg	1	QL (120 tabs / 25 days)
chlorzoxazone tab 500 mg	1	
cyclobenzaprine hcl tab 5 mg	1	
cyclobenzaprine hcl tab 10 mg	1	
methocarbamol tab 500 mg	1	
methocarbamol tab 750 mg	1	
orphenadrine citrate tab er 12hr 100 mg	1	
tizanidine hcl tab 2 mg (base equivalent)	1	

Drug Name	Drug Tier	Requirements/Limits
<i>tizanidine hcl tab 4 mg (base equivalent)</i>	1	
DIRECT MUSCLE RELAXANTS		
<i>dantrolene sodium cap 25 mg</i>	1	
<i>dantrolene sodium cap 50 mg</i>	1	
<i>dantrolene sodium cap 100 mg</i>	1	
VISCOSUPPLEMENTS		
<i>GEL-ONE INJ 30MG/3ML</i>	1	PA
<i>SYNVISC INJ 8MG/ML</i>	1	PA
<i>SYNVISC ONE INJ 8MG/ML</i>	1	PA
<i>VISCO-3 INJ 25/2.5ML</i>	1	PA
NASAL AGENTS - SYSTEMIC AND TOPICAL		
NASAL AGENTS - MISC.		
<i>afrin saline spr 0.65%</i>	1	OTC
<i>altamist spr 0.65%</i>	1	OTC
<i>AYR NASAL DRO 0.65%</i>	1	OTC
<i>ayr spr 0.65%</i>	1	OTC
<i>baby ayr spr 0.65%</i>	1	OTC
<i>CVS NASAL AER 0.9%</i>	1	OTC
<i>deep sea spr 0.65%</i>	1	OTC
<i>hm saline spr 0.65%</i>	1	OTC
<i>nasal moist spr 0.65%</i>	1	OTC
<i>nasal saline spr 0.65%</i>	1	OTC
<i>nozin nasal kit sanitize</i>	1	OTC
<i>ocean kids spr 0.65%</i>	1	OTC
<i>RA STERILE SOL NASAL</i>	1	OTC
<i>saline mist spr 0.65%</i>	1	OTC
<i>saline nasal spr 0.65%</i>	1	OTC
<i>sb saline spr 0.65%</i>	1	OTC
<i>SIMPLY SALIN AER 0.9%</i>	1	OTC
NASAL ANTIALLERGY		
<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	1	QL (2 bottles / 25 days)
<i>cromolyn sodium nasal aerosol soln 5.2 mg/act (4%)</i>	1	OTC
NASAL ANTICHOLINERGICS		
<i>ipratropium bromide nasal soln 0.03% (21 mcg/spray)</i>	1	
<i>ipratropium bromide nasal soln 0.06% (42 mcg/spray)</i>	1	
NASAL STEROIDS		
<i>aller-cort spr 55mcg/ac</i>	1	QL (1 bottle / 25 days), OTC
<i>aller-flo spr 50mcg</i>	1	QL (1 bottle / 25 days), OTC

Drug Name	Drug Tier	Requirements/Limits
allergy nasa spr 24hr	1	QL (1 bottle / 25 days), OTC
allergy nasa spr 50mcg	1	QL (1 bottle / 25 days), OTC
allergy relf spr 50mcg	1	QL (1 bottle / 25 days), OTC
allgy relief spr 50mcg	1	QL (1 bottle / 25 days), OTC
budesonide sus 32mcg	1	QL (1 bottle / 30 days), OTC
budesonide sus nasal	1	QL (1 bottle / 30 days), OTC
clarispray spr 50mcg	1	QL (1 bottle / 25 days), OTC
flunisolide nasal soln 25 mcg/act (0.025%)	1	QL (2 bottles / 25 days)
fluticasone propionate nasal susp 50 mcg/act	1	QL (1 bottle / 25 days)
fluticasone propionate nasal susp 50 mcg/act	1	QL (1 bottle / 25 days), OTC
fluticasone sus 50mcg	1	QL (1 bottle / 25 days), OTC
24 hr nasal spr allergy	1	QL (1 bottle / 25 days), OTC
nasal allrgy spr 55mcg/ac	1	QL (1 bottle / 25 days), OTC
ra nasal spr allergy	1	QL (1 bottle / 25 days), OTC
triamcinolone acetonide nasal aerosol suspension 55 mcg/act	1	QL (1 bottle / 25 days), OTC

SYMPATHOMIMETIC DECONGESTANTS

decongestant tab 30mg	1	OTC
decongestant tab 120mg er	1	QL (60 tabs / 30 days), OTC
genaphed tab 30mg	1	OTC
gnp deconge tab 30mg	1	OTC
12hr deconge tab 120mg cr	1	QL (60 tabs / 30 days), OTC
nasal decong tab 30mg	1	OTC
nasal decong tab 120mg er	1	QL (60 tabs / 30 days), OTC
pseudoephedrine hcl tab 30 mg	1	OTC
pseudoephedrine hcl tab 60 mg	1	OTC
pseudoephedrine hcl tab er 12hr 120 mg	1	QL (60 tabs / 30 days), OTC
qc suphedrin tab 120mg sr	1	QL (60 tabs / 30 days), OTC
ra suphedrin tab 30mg	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>ra suphedrin tab 120mg cr</i>	1	QL (60 tabs / 30 days), OTC
<i>sinus 12 hr tab 120mg er</i>	1	QL (60 tabs / 30 days), OTC
<i>sinus cngst tab 30mg</i>	1	OTC
<i>sinus/conges tab 30mg</i>	1	OTC
<i>sinus/conges tab 120mg</i>	1	QL (60 tabs / 30 days), OTC
<i>sm nasal dec tab 30mg</i>	1	OTC
<i>sudafed 12hr tab 120mg cr</i>	1	QL (60 tabs / 30 days), OTC
<i>sudafed 12hr tab 120mg er</i>	1	QL (60 tabs / 30 days), OTC
SUDAFED 24HR TAB 240MG	1	QL (30 tabs / 30 days), OTC
SUDAFED CHLD LIQ 15MG/5ML	1	OTC
<i>sudogest 12 tab 120mg er</i>	1	QL (60 tabs / 30 days), OTC
<i>sudogest max tab 30mg</i>	1	OTC
<i>sudogest tab 30mg</i>	1	OTC
<i>sudogest tab 60mg</i>	1	OTC
<i>suphredrine tab 120mg er</i>	1	QL (60 tabs / 30 days), OTC
<i>wal-phed d tab 120mg</i>	1	QL (60 tabs / 30 days), OTC
<i>wal-phed tab 30mg</i>	1	OTC
<i>wal-phed tab 120mg er</i>	1	QL (60 tabs / 30 days), OTC

NEUROMUSCULAR AGENTS

ALS AGENTS

<i>riluzole tab 50 mg</i>	1
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NUTRIENTS

MISC. NUTRITIONAL SUBSTANCES

<i>cvs fish oil cap 1/2 size</i>	1	OTC
<i>cvs fish oil cap 1000mg</i>	1	OTC
<i>cvs fish oil cap 1200mg</i>	1	OTC
<i>eql fish oil cap 1000mg</i>	1	OTC
<i>eql fish oil cap 1200mg</i>	1	OTC
<i>eskimo-3 cap 500mg</i>	1	OTC
<i>eskimo-3 liq</i>	1	OTC
<i>finest fish liq oil</i>	1	OTC
<i>finest fish liq oil/kids</i>	1	OTC
<i>fish oil cap 300mg</i>	1	OTC
<i>fish oil cap 435mg</i>	1	OTC
FISH OIL CAP 1000MG	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>fish oil cap 1200mg</i>	1	OTC
FISH OIL CAP 1360MG	1	OTC
FISH OIL CAP 1400MG	1	OTC
<i>fish oil chw gummies</i>	1	OTC
<i>fish oil con cap 300mg</i>	1	OTC
<i>fish oil con cap 1000mg</i>	1	OTC
<i>gnp fish oil cap 1000mg</i>	1	OTC
<i>gummy fish chw omega-3</i>	1	OTC
<i>hm fish oil cap 1000mg</i>	1	OTC
<i>hm fish oil cap 1200mg</i>	1	OTC
<i>kp fish oil cap 1200mg</i>	1	OTC
<i>maxepa cap 1000mg</i>	1	OTC
<i>maximum epa cap 1000mg</i>	1	OTC
<i>omega 3 cap 1000mg</i>	1	OTC
<i>omega iii cap epa+dha</i>	1	OTC
OMEGA-3 CAP 1400MG	1	OTC
<i>omega-3 cf cap 1000mg</i>	1	OTC
<i>omega-3 fatty acids cap 300 mg</i>	1	OTC
<i>omega-3 fatty acids cap 435 mg</i>	1	OTC
<i>omega-3 fatty acids cap 500 mg</i>	1	OTC
<i>omega-3 fatty acids cap 1000 mg</i>	1	OTC
<i>omega-3 fatty acids cap 1200 mg</i>	1	OTC
<i>omega-3 fish cap 1000 mg</i>	1	OTC
<i>omega-3 fish cap 1200mg</i>	1	OTC
<i>omera cap 1000mg</i>	1	OTC
<i>ovega-3 cap 500mg</i>	1	OTC
<i>purefa cap 1000mg</i>	1	OTC
<i>px fish oil cap 1000mg</i>	1	OTC
<i>qc fish oil cap 1000mg</i>	1	OTC
<i>ra fish oil cap 1000mg</i>	1	OTC
<i>salmon oil cap 1000mg</i>	1	OTC
<i>sam-e.p.a. cap 500mg</i>	1	OTC
<i>sea-omega 50 cap 1000mg</i>	1	OTC
<i>sm fish oil cap 1000mg</i>	1	OTC
<i>sm fish oil cap 1200mg</i>	1	OTC
<i>super dha cap gems</i>	1	OTC
<i>super omega cap 500mg</i>	1	OTC
<i>super omega cap -3</i>	1	OTC
<i>supr omega 3 cap epa/dha</i>	1	OTC
<i>sv fish oil cap 500mg</i>	1	OTC
<i>theromega cap 1000mg</i>	1	OTC
ULTRA OMEGA3 CAP 1400MG	1	OTC
<i>very finest liq fish oil</i>	1	OTC
PROTEINS		
ACTICARNITIN SOL SF	1	OTC

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

OPHTHALMIC AGENTS

ARTIFICIAL TEARS AND LUBRICANTS

<i>altalube oin</i>	1	OTC
<i>artifi tears dro 1-0.3%</i>	1	OTC
<i>artifi tears oin op</i>	1	OTC
<i>artifi tears sol 1.4% op</i>	1	OTC
<i>artificial dro tears</i>	1	OTC
<i>artificial oin eye</i>	1	OTC
<i>artificial sol 0.5-0.6%</i>	1	OTC
<i>artificial sol tears</i>	1	OTC
<i>biolle gel 1%</i>	1	OTC
<i>biolle tears dro 0.5% op</i>	1	OTC
<i>carboxymethylcellulose sodium ophth soln 0.5%</i>	1	OTC
<i>cvs dry eye dro relief</i>	1	OTC
<i>cvs lubrican dro 0.5%</i>	1	OTC
<i>cvs lubricat oin</i>	1	OTC
<i>cvs lubricnt dro 0.5% op</i>	1	OTC
<i>cvs natural dro tears</i>	1	OTC
<i>dry eye rlef oin night</i>	1	OTC
<i>dry eye rlf dro</i>	1	OTC
<i>dry-eye rlef oin nighttim</i>	1	OTC
<i>eq lubricant dro eye drop</i>	1	OTC
<i>eq restore oin pm</i>	1	OTC
<i>eye drops dro 0.5-0.9%</i>	1	OTC
<i>eye drops dro 0.25%</i>	1	OTC
<i>eye drops sol relief</i>	1	OTC
<i>eye lubrican oin op</i>	1	OTC
<i>for sty reli oin</i>	1	OTC
<i>GENTEAL GEL 0.3%</i>	1	OTC
<i>genteal tear oin nt-time</i>	1	OTC
<i>genteal tear sol moderate</i>	1	OTC
<i>gnp eye drop dro 0.4-0.3%</i>	1	OTC
<i>hm dry eye sol relief</i>	1	OTC
<i>hypoteears oin op</i>	1	OTC
<i>just tears sol eye drop</i>	1	OTC
<i>lubr/dry eye dro 0.5-0.9%</i>	1	OTC
<i>lubric tears sol 0.4-0.3%</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>lubricant dro eye</i>	1	OTC
<i>lubricant dro eye 0.6%</i>	1	OTC
<i>lubricant oin eye</i>	1	OTC
<i>lubricant oin eye pm</i>	1	OTC
<i>lubricant pm oin</i>	1	OTC
<i>lubricant sol eye drop</i>	1	OTC
<i>lubricat eye dro 0.4-0.3%</i>	1	OTC
<i>lubricating dro 0.5%</i>	1	OTC
<i>lubricating sol 0.4-0.3%</i>	1	OTC
<i>lubricating sol tears</i>	1	OTC
<i>lubricnt eye dro</i>	1	OTC
<i>lubricnt eye dro 0.1-0.3%</i>	1	OTC
<i>lubricnt eye dro 0.4-0.3%</i>	1	OTC
<i>lubricnt eye dro 0.5% op</i>	1	OTC
<i>lubricnt eye dro 0.6%</i>	1	OTC
<i>lubricnt eye oin fast act</i>	1	OTC
<i>lubricnt eye oin nighttim</i>	1	OTC
LUBRICNT GEL DRO 0.25-0.3	1	OTC
<i>lubricnt gel dro 1%</i>	1	OTC
<i>polyvinyl alcohol ophth soln 1.4%</i>	1	OTC
<i>puralube oin</i>	1	OTC
PURE & GENTL DRO 0.3%	1	OTC
<i>ra lubricant dro 0.4-0.3%</i>	1	OTC
<i>refresh cell gel 1% op</i>	1	OTC
REFRESH DRO OP	1	OTC
REFRESH DRO RELIEVA	1	OTC
<i>refresh lacr oin op</i>	1	OTC
REFRESH OPT SOL MEGA-3	1	OTC
REFRESH OPTI DRO 0.5-0.9%	1	OTC
<i>refresh p.m. oin op</i>	1	OTC
REFRESH SOL DIGITAL	1	OTC
REFRESH SOL OPTIVE	1	OTC
<i>restore plus dro 0.5% op</i>	1	OTC
<i>restore tear dro 0.5% op</i>	1	OTC
<i>retaine cmc sol 0.5% op</i>	1	OTC
RETAINE HPMC SOL 0.3%	1	OTC
<i>retaine pm oin</i>	1	OTC
<i>sm artificia sol tears</i>	1	OTC
<i>sm dry eye sol relief</i>	1	OTC
<i>sm lubricant dro 0.4-0.3%</i>	1	OTC
<i>soothe dro hydratio</i>	1	OTC
<i>soothe night oin op</i>	1	OTC
<i>soothe xp dro</i>	1	OTC
<i>soothe xp dro 1%-4.5%</i>	1	OTC
<i>soothe xp sol</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>styte oin</i>	1	OTC
<i>systane dro contacts</i>	1	OTC
<i>SYSTANE GEL 0.3%</i>	1	OTC
<i>systane oin</i>	1	OTC
<i>tears pure sol</i>	1	OTC
<i>theratears gel 1% ophth</i>	1	OTC
<i>THERATEARS SOL 0.25% PF</i>	1	OTC
<i>ult lub eye dro 0.4-0.3%</i>	1	OTC
<i>ultra eye dr dro 0.4-0.3%</i>	1	OTC
<i>ultra fresh dro 0.5% op</i>	1	OTC
<i>ultra fresh oin pm</i>	1	OTC
<i>VISTA GEL DRO 0.3%</i>	1	OTC
<i>vista meibo dro tears</i>	1	OTC
<i>vista tears sol 0.4-0.3%</i>	1	OTC

BETA-BLOCKERS - OPHTHALMIC

<i>betaxolol hcl ophth soln 0.5%</i>	1
<i>dorzolamide hcl-timolol maleate ophth soln 22.3-6.8 mg/ml</i>	1
<i>levobunolol hcl ophth soln 0.5%</i>	1
<i>timolol maleate ophth gel forming soln 0.5%</i>	1
<i>timolol maleate ophth gel forming soln 0.25%</i>	1
<i>timolol maleate ophth soln 0.5%</i>	1
<i>timolol maleate ophth soln 0.25%</i>	1

OPHTHALMIC ADRENERGIC AGENTS

<i>brimonidine tartrate ophth soln 0.2%</i>	1
<i>brimonidine tartrate ophth soln 0.15%</i>	1

OPHTHALMIC ANTI-INFECTIVES

<i>ak-poly-bac oin op</i>	1
<i>bacitracin ophth oint 500 unit/gm</i>	1
<i>bacitracin-polymyxin b ophth oint</i>	1
<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i>	1
<i>erythromycin ophth oint 5 mg/gm</i>	1
<i>gentak oin 0.3% op</i>	1
<i>gentamicin sulfate ophth soln 0.3%</i>	1
<i>levofloxacin ophth soln 0.5%</i>	1
<i>NATACYN SUS 5% OP</i>	1
<i>neo-polycin oin op</i>	1
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	1
<i>neomycin-polomy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	1
<i>ofloxacin ophth soln 0.3%</i>	1

Drug Name	Drug Tier	Requirements/Limits
<i>polycin oin op</i>	1	
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	1	
<i>sulfacetamide sodium ophth soln 10%</i>	1	
<i>tobramycin ophth soln 0.3%</i>	1	
<i>trifluridine ophth soln 1%</i>	1	
OPHTHALMIC INTEGRIN ANTAGONISTS		
XIIDRA DRO 5%	1	PA, QL (60 drops / 25 days)
OPHTHALMIC STEROIDS		
<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	1	
<i>dexamethasone sodium phosphate ophth soln 0.1%</i>	1	
<i>fluorometholone ophth susp 0.1%</i>	1	
<i>neo-polycin oin hc 1%op</i>	1	
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	1	
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	1	
<i>neomycin-polymyxin-hc ophth susp</i>	1	
PRED SOD PHO SOL 1% OP	1	
<i>prednisolone acetate ophth susp 1%</i>	1	
PREDNISOLONE SUS 1%	1	
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>	1	
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	1	
OPHTHALMICS - MISC.		
<i>alaway child dro 0.025%op</i>	1	OTC
<i>alaway dro 0.025%op</i>	1	OTC
<i>azelastine hcl ophth soln 0.05%</i>	1	
<i>claritin eye dro 0.025%op</i>	1	OTC
<i>cromolyn sodium ophth soln 4%</i>	1	
<i>cvs allergy dro 0.025%op</i>	1	OTC
<i>diclofenac sodium ophth soln 0.1%</i>	1	
<i>dorzolamide hcl ophth soln 2%</i>	1	
DORZOLAMIDE SOL 2%	1	
<i>eye itch rel dro 0.025%</i>	1	OTC
<i>eye itch rel dro 0.025%op</i>	1	OTC
<i>ketorolac tromethamine ophth soln 0.4%</i>	1	
<i>ketorolac tromethamine ophth soln 0.5%</i>	1	
<i>ketotifen fumarate ophth soln 0.025% (base equiv)</i>	1	OTC
ZADITOR DRO 0.025%OP	1	OTC

Drug Name	Drug Tier	Requirements/Limits
PROSTAGLANDINS - OPHTHALMIC		
<i>latanoprost ophth soln 0.005%</i>	1	
OTIC AGENTS		
OTIC AGENTS - MISCELLANEOUS		
<i>acetic acid otic soln 2%</i>	1	
<i>clearcanal dro 6.5%</i>	1	OTC
<i>DEBROX SOL 6.5% OT</i>	1	OTC
<i>ear drops dro 6.5%</i>	1	OTC
<i>ear drops sol 6.5% ot</i>	1	OTC
<i>ear wax kit sol 6.5% ot</i>	1	OTC
<i>ear wax rem dro kit 6.5%</i>	1	OTC
<i>ear wax remv dro 6.5% ot</i>	1	OTC
<i>ear wax remv sol 6.5% ot</i>	1	OTC
<i>earwax remov dro kit</i>	1	OTC
<i>earwax remov dro system</i>	1	OTC
<i>earwax remov sol 6.5%</i>	1	OTC
<i>earwax remv sol 6.5% ot</i>	1	OTC
<i>earwax remvl dro 6.5% ot</i>	1	OTC
<i>earwax sol removal</i>	1	OTC
<i>eq ear drops sol 6.5% ot</i>	1	OTC
<i>eq ear wax sol removal</i>	1	OTC
<i>gnp earwax sol 6.5% ot</i>	1	OTC
<i>gnp earwax sol removal</i>	1	OTC
<i>murine ear dro 6.5% ot</i>	1	OTC
<i>ra ear dro 6.5% ot</i>	1	OTC
<i>sm ear dro 6.5% ot</i>	1	OTC
OTIC ANTI-INFECTIVES		
<i>ofloxacin otic soln 0.3%</i>	1	
OTIC COMBINATIONS		
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	1	
<i>neomycin-polymyxin-hc otic soln 1%</i>	1	
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	1	
PASSIVE IMMUNIZING AND TREATMENT AGENTS		
MONOCLONAL ANTIBODIES		
<i>SYNAGIS INJ 50MG</i>	1	PA
<i>SYNAGIS INJ 100MG/ML</i>	1	PA
PENICILLINS		
AMINOPENICILLINS		
<i>amoxicillin (trihydrate) cap 250 mg</i>	1	
<i>amoxicillin (trihydrate) cap 500 mg</i>	1	
<i>amoxicillin (trihydrate) chew tab 125 mg</i>	1	
<i>amoxicillin (trihydrate) chew tab 250 mg</i>	1	

Drug Name	Drug Tier Requirements/Limits
<i>amoxicillin (trihydrate) for susp 125 mg/5ml</i>	1
<i>amoxicillin (trihydrate) for susp 200 mg/5ml</i>	1
<i>amoxicillin (trihydrate) for susp 250 mg/5ml</i>	1
<i>amoxicillin (trihydrate) for susp 400 mg/5ml</i>	1
<i>amoxicillin (trihydrate) tab 500 mg</i>	1
<i>amoxicillin (trihydrate) tab 875 mg</i>	1
<i>ampicillin cap 500 mg</i>	1

NATURAL PENICILLINS

<i>BICILLIN L-A INJ 600000</i>	1
<i>BICILLIN L-A INJ 1200000</i>	1
<i>BICILLIN L-A INJ 2400000</i>	1
<i>penicillin v potassium for soln 125 mg/5ml</i>	1
<i>penicillin v potassium for soln 250 mg/5ml</i>	1
<i>penicillin v potassium tab 250 mg</i>	1
<i>penicillin v potassium tab 500 mg</i>	1

PENICILLIN COMBINATIONS

<i>amoxicillin & k clavulanate chew tab 200-28.5 mg</i>	1
<i>amoxicillin & k clavulanate chew tab 400-57 mg</i>	1
<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	1
<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i>	1
<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i>	1
<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i>	1
<i>amoxicillin & k clavulanate tab 250-125 mg</i>	1
<i>amoxicillin & k clavulanate tab 500-125 mg</i>	1
<i>amoxicillin & k clavulanate tab 875-125 mg</i>	1

PENICILLINASE-RESISTANT PENICILLINS

<i>dicloxacillin sodium cap 250 mg</i>	1
<i>dicloxacillin sodium cap 500 mg</i>	1

PHARMACEUTICAL ADJUVANTS

ANTIMICROBIAL AGENTS

<i>BENZYL ALC LIQ</i>	1
<i>BENZYL ALC LIQ</i>	1 OTC

LIQUID VEHICLES

<i>bacteriostatic sodium chloride inj soln 0.9%</i>	1
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Drug Name	Drug Tier	Requirements/Limits
<i>glycine diluent for injection</i>	1	
SALINE/PHENO SOL	1	
STERILE DILU SOL TREPROST	1	
<i>water for inject, bacteriostatic benzyl alcohol</i>	1	
<i>water for injection</i>	1	
<i>water for iv injection</i>	1	

PROGESTINS

PROGESTINS

<i>hydroxyprogesterone caproate im in oil 250 mg/ml</i>	1	PA, QL (5 vials / year)
MAKENA INJ 275MG	1	PA, QL (21 injections / year)
<i>medroxyprogesterone acetate tab 2.5 mg</i>	1	
<i>medroxyprogesterone acetate tab 5 mg</i>	1	
<i>medroxyprogesterone acetate tab 10 mg</i>	1	
<i>norethindrone acetate tab 5 mg</i>	1	
<i>progesterone cap 100 mg</i>	1	
<i>progesterone cap 200 mg</i>	1	

PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.

ANTI-CATALEPTIC AGENTS

XYREM SOL 500MG/ML	1	PA
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ANTIDEMENTIA AGENTS

<i>donepezil hydrochloride orally disintegrating tab 5 mg</i>	1	
<i>donepezil hydrochloride orally disintegrating tab 10 mg</i>	1	
<i>donepezil hydrochloride tab 5 mg</i>	1	
<i>donepezil hydrochloride tab 10 mg</i>	1	
<i>donepezil hydrochloride tab 23 mg</i>	1	
<i>galantamine hydrobromide cap er 24hr 8 mg</i>	1	
<i>galantamine hydrobromide cap er 24hr 16 mg</i>	1	
<i>galantamine hydrobromide cap er 24hr 24 mg</i>	1	
<i>galantamine hydrobromide oral soln 4 mg/ml</i>	1	
<i>galantamine hydrobromide tab 4 mg</i>	1	
<i>galantamine hydrobromide tab 8 mg</i>	1	
<i>galantamine hydrobromide tab 12 mg</i>	1	
<i>memantine hcl oral solution 2 mg/ml</i>	1	
<i>memantine hcl tab 5 mg</i>	1	
<i>memantine hcl tab 10 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack</i>	1	
<i>rivastigmine tartrate cap 1.5 mg (base equivalent)</i>	1	PA
<i>rivastigmine tartrate cap 3 mg (base equivalent)</i>	1	PA
<i>rivastigmine tartrate cap 4.5 mg (base equivalent)</i>	1	PA
<i>rivastigmine tartrate cap 6 mg (base equivalent)</i>	1	PA
<i>rivastigmine td patch 24hr 4.6 mg/24hr</i>	1	PA
<i>rivastigmine td patch 24hr 9.5 mg/24hr</i>	1	PA
<i>rivastigmine td patch 24hr 13.3 mg/24hr</i>	1	PA
FIBROMYALGIA AGENTS		
SAVELLA MIS TITR PAK	1	PA
SAVELLA TAB 12.5MG	1	PA
SAVELLA TAB 25MG	1	PA
SAVELLA TAB 50MG	1	PA
SAVELLA TAB 100MG	1	PA
MULTIPLE SCLEROSIS AGENTS		
AUBAGIO TAB 7MG	1	PA, QL (1 tab / 1 day)
AUBAGIO TAB 14MG	1	PA, QL (1 tab / 1 day)
AVONEX PEN KIT 30MCG	1	PA, QL (4 injections / 28 days)
AVONEX PREFL KIT 30MCG	1	PA, QL (4 injections / 28 days)
<i>dimethyl fumarate capsule delayed release 120 mg</i>	1	PA, QL (14 caps / 28 days)
<i>dimethyl fumarate capsule delayed release 240 mg</i>	1	PA, QL (2 caps / 1 day)
<i>dimethyl fumarate capsule dr starter pack 120 mg & 240 mg</i>	1	PA, QL (1 kit / month)
EXTAVIA INJ 0.3MG	1	PA, QL (15 injections / 30 days)
GILENYA CAP 0.5MG	1	PA, QL (30 caps / 30 days)
<i>glatiramer acetate soln prefilled syringe 20 mg/ml</i>	1	PA, QL (30 injections / 30 days)
<i>glatiramer acetate soln prefilled syringe 40 mg/ml</i>	1	PA, QL (12 injections / 28 days)
<i>glatopa inj 20mg/ml</i>	1	PA, QL (30 injections / 30 days)
<i>glatopa inj 40mg/ml</i>	1	PA, QL (12 injections / 28 days)
MAYZENT PAK STARTER	1	PA, QL (12 tabs / 5 days)

Drug Name	Drug Tier	Requirements/Limits
MAYZENT TAB 0.25MG	1	PA, QL (112 tabs / 28 days)
MAYZENT TAB 2MG	1	PA, QL (30 tabs / 30 days)
OCREVUS INJ 300/10ML	1	PA, QL (2 vials / 24 weeks)
REBIF INJ 22/0.5	1	PA, QL (12 injections / 28 days)
REBIF INJ 44/0.5	1	PA, QL (12 injections / 28 days)
REBIF REBIDO INJ 22/0.5	1	PA, QL (12 injections / 28 days)
REBIF REBIDO INJ 44/0.5	1	PA, QL (12 injections / 28 days)
REBIF REBIDO INJ TITRATN	1	PA, QL (12 injections / 28 days)
REBIF TITRTN INJ PACK	1	PA, QL (12 injections / 28 days)

PSEUDOBULBAR AFFECT (PBA) AGENTS

NUEDEXTA CAP 20-10MG	1	PA
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RESPIRATORY AGENTS - MISC.

ALPHA-PROTEINASE INHIBITOR (HUMAN)

PROLASTIN-C INJ 1000MG	1	PA
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CYSTIC FIBROSIS AGENTS

KALYDECO PAK 25MG	1	PA, QL (2 packets / 1 day)
KALYDECO PAK 50MG	1	PA, QL (2 packets / 1 day)
KALYDECO PAK 75MG	1	PA, QL (2 packets / 1 day)
KALYDECO TAB 150MG	1	PA, QL (2 tabs / 1 day)
ORKAMBI GRA 100-125	1	PA, QL (2 packets / 1 day)
ORKAMBI GRA 150-188	1	PA, QL (2 packets / 1 day)
ORKAMBI TAB 100-125	1	PA, QL (4 tabs / 1 day)
ORKAMBI TAB 200-125	1	PA, QL (4 tabs / 1 day)
PULMOZYME SOL 1MG/ML	1	PA, QL (5 mL / 1 day)
SYMDEKO TAB 50-75MG	1	PA, QL (2 tabs / 1 day)
TRIKAFTA TAB	1	PA, QL (3 tabs / 1 day)

PULMONARY FIBROSIS AGENTS

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

Drug Name	Drug Tier Requirements/Limits
SULFONAMIDES	
SULFONAMIDES	
SULFADIAZINE TAB 500MG	1
TETRACYCLINES	
TETRACYCLINES	
<i>doxycycline hyclate cap 50 mg</i>	1
<i>doxycycline hyclate cap 100 mg</i>	1
<i>doxycycline hyclate tab 20 mg</i>	1
<i>doxycycline hyclate tab 100 mg</i>	1
<i>doxycycline monohydrate for susp 25 mg/5ml</i>	1
<i>minocycline hcl cap 50 mg</i>	1
<i>minocycline hcl cap 75 mg</i>	1
<i>minocycline hcl cap 100 mg</i>	1
<i>morgodox cap 1x100mg</i>	1
<i>morgodox cap 2x100mg</i>	1
<i>tetracycline hcl cap 250 mg</i>	1
<i>tetracycline hcl cap 500 mg</i>	1
THYROID AGENTS	
ANTITHYROID AGENTS	
<i>methimazole tab 5 mg</i>	1
<i>methimazole tab 10 mg</i>	1
<i>propylthiouracil tab 50 mg</i>	1
THYROID HORMONES	
<i>euthyrox tab 25mcg</i>	1
<i>euthyrox tab 50mcg</i>	1
<i>euthyrox tab 75mcg</i>	1
<i>euthyrox tab 88mcg</i>	1
<i>euthyrox tab 100mcg</i>	1
<i>euthyrox tab 112mcg</i>	1
<i>euthyrox tab 125mcg</i>	1
<i>euthyrox tab 137mcg</i>	1
<i>euthyrox tab 150mcg</i>	1
<i>euthyrox tab 175mcg</i>	1
<i>euthyrox tab 200mcg</i>	1
<i>levo-t tab 25mcg</i>	1
<i>levo-t tab 50mcg</i>	1
<i>levo-t tab 75mcg</i>	1
<i>levo-t tab 88mcg</i>	1
<i>levo-t tab 100mcg</i>	1
<i>levo-t tab 112mcg</i>	1
<i>levo-t tab 125mcg</i>	1
<i>levo-t tab 137mcg</i>	1
<i>levo-t tab 150mcg</i>	1

Drug Name	Drug Tier Requirements/Limits
<i>levo-t tab 175mcg</i>	1
<i>levo-t tab 200 mcg</i>	1
<i>levo-t tab 300 mcg</i>	1
<i>levothyroxine sodium tab 25 mcg</i>	1
<i>levothyroxine sodium tab 50 mcg</i>	1
<i>levothyroxine sodium tab 75 mcg</i>	1
<i>levothyroxine sodium tab 88 mcg</i>	1
<i>levothyroxine sodium tab 100 mcg</i>	1
<i>levothyroxine sodium tab 112 mcg</i>	1
<i>levothyroxine sodium tab 125 mcg</i>	1
<i>levothyroxine sodium tab 137 mcg</i>	1
<i>levothyroxine sodium tab 150 mcg</i>	1
<i>levothyroxine sodium tab 175 mcg</i>	1
<i>levothyroxine sodium tab 200 mcg</i>	1
<i>levothyroxine sodium tab 300 mcg</i>	1
<i>levoxyl tab 25mcg</i>	1
<i>levoxyl tab 50mcg</i>	1
<i>levoxyl tab 75mcg</i>	1
<i>levoxyl tab 88mcg</i>	1
<i>levoxyl tab 100mcg</i>	1
<i>levoxyl tab 112mcg</i>	1
<i>levoxyl tab 125mcg</i>	1
<i>levoxyl tab 137mcg</i>	1
<i>levoxyl tab 150mcg</i>	1
<i>levoxyl tab 175mcg</i>	1
<i>levoxyl tab 200mcg</i>	1
<i>liothyronine sodium tab 5 mcg</i>	1
<i>liothyronine sodium tab 25 mcg</i>	1
<i>liothyronine sodium tab 50 mcg</i>	1
<i>unithroid tab 25mcg</i>	1
<i>unithroid tab 50mcg</i>	1
<i>unithroid tab 75mcg</i>	1
<i>unithroid tab 88mcg</i>	1
<i>unithroid tab 100mcg</i>	1
<i>unithroid tab 112mcg</i>	1
<i>unithroid tab 125mcg</i>	1
<i>unithroid tab 137mcg</i>	1
<i>unithroid tab 150mcg</i>	1
<i>unithroid tab 175mcg</i>	1
<i>unithroid tab 200mcg</i>	1
<i>unithroid tab 300mcg</i>	1

TOXOIDS

TOXOID COMBINATIONS

BOOSTRIX INJ	1
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Drug Name	Drug Tier	Requirements/Limits
ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS		
ANTISPASMODICS		
CUVPOSA SOL 1MG/5ML	1	AGE
<i>dicyclomine hcl cap 10 mg</i>	1	
<i>dicyclomine hcl oral soln 10 mg/5ml</i>	1	
<i>dicyclomine hcl tab 20 mg</i>	1	
<i>ed-spaZ tab 0.125mg</i>	1	
<i>glycopyrrolate tab 1 mg</i>	1	
<i>glycopyrrolate tab 2 mg</i>	1	
<i>hyoscyamine sulfate elixir 0.125 mg/5ml</i>	1	
<i>hyoscyamine sulfate sl tab 0.125 mg</i>	1	
<i>hyoscyamine sulfate soln 0.125 mg/ml</i>	1	
<i>hyoscyamine sulfate tab 0.125 mg</i>	1	
<i>hyoscyamine sulfate tab disint 0.125 mg</i>	1	
<i>hyosyne dro 0.125/ml</i>	1	
<i>hyosyne elx 0.125/5</i>	1	
<i>nulev tab 0.125mg</i>	1	
<i>oscimin sub 0.125mg</i>	1	
<i>oscimin tab 0.125mg</i>	1	
H-2 ANTAGONISTS		
<i>acid control tab 10mg</i>	1	OTC
<i>acid control tab 20mg</i>	1	OTC
<i>acid reducer tab 10mg</i>	1	OTC
<i>acid reducer tab 20mg</i>	1	OTC
<i>acid reducer tab 200mg</i>	1	OTC
<i>cimetidine hcl soln 300 mg/5ml</i>	1	
<i>cimetidine tab 200 mg</i>	1	
<i>cimetidine tab 200mg</i>	1	OTC
<i>cimetidine tab 300 mg</i>	1	
<i>cimetidine tab 400 mg</i>	1	
<i>cimetidine tab 800 mg</i>	1	
<i>eq cimetidin tab 200mg</i>	1	OTC
<i>eq famotidin tab 20mg</i>	1	OTC
<i>eql heartbrn tab 10mg</i>	1	OTC
<i>famotidine for susp 40 mg/5ml</i>	1	
<i>famotidine tab 10 mg</i>	1	OTC
<i>famotidine tab 20 mg</i>	1	
<i>famotidine tab 20mg</i>	1	OTC
<i>famotidine tab 40 mg</i>	1	
<i>heartburn tab 20mg</i>	1	OTC
<i>heartburn tab 200mg</i>	1	OTC
<i>heartburn tab relief</i>	1	OTC
<i>mm acid-pep tab 20mg</i>	1	OTC
<i>mm famotidin tab 20mg</i>	1	OTC

Drug Name	Drug Tier	Requirements/Limits
nizatidine cap 150 mg	1	
nizatidine cap 300 mg	1	
nizatidine oral soln 15 mg/ml	1	
PEPCID AC TAB 20MG	1	OTC
PEPCID TAB 20MG	1	
sm acid redu tab 200mg	1	OTC
zantac 360 tab 10mg	1	OTC
zantac 360 tab 20mg	1	OTC
MISC. ANTI-ULCER		
sucralfate tab 1 gm	1	
PROTON PUMP INHIBITORS		
acid reducer cap 20.6mgdr	1	OTC
acid reducer tab 20mg dr	1	OTC
esomeprazole cap 20mg dr	1	QL (30 caps / 25 days), OTC
esomeprazole magnesium cap delayed release 20 mg (base eq)	1	QL (30 caps / 25 days), OTC
esomeprazole magnesium for delayed release susp packet 10 mg	1	QL (90 packets / year), AGE
lansoprazole cap delayed release 15 mg	1	
lansoprazole cap delayed release 15 mg	1	OTC
NEXIUM 24HR TAB 20MG	1	QL (90 tabs / year), OTC
NEXIUM GRA 2.5MG DR	1	QL (90 packets / year), AGE
NEXIUM GRA 5MG DR	1	QL (90 packets / year), AGE
omeprazole cap 20.6mgdr	1	OTC
omeprazole cap delayed release 10 mg	1	QL (90 caps / year)
omeprazole cap delayed release 20 mg	1	QL (90 caps / year)
omeprazole cap delayed release 20 mg	1	QL (90 caps / year), OTC
omeprazole cap delayed release 40 mg	1	QL (90 caps / year)
omeprazole delayed release tab 20 mg	1	OTC
omeprazole magnesium delayed release tab 20 mg (base equiv)	1	OTC
omeprazole tab 20mg	1	OTC
pantoprazole sodium ec tab 20 mg (base equiv)	1	QL (90 tabs / year)
pantoprazole sodium ec tab 40 mg (base equiv)	1	QL (90 tabs / year)
PREVACID 24H CAP 15MG DR	1	OTC
ULCER DRUGS - PROSTAGLANDINS		
misoprostol tab 100 mcg	1	
misoprostol tab 200 mcg	1	

Drug Name	Drug Tier	Requirements/Limits
ULCER THERAPY COMBINATIONS		
omepra/bicar cap 20-1100	1	QL (90 caps / year), OTC
URINARY ANTISPASMODICS		
URINARY ANTISPASMODIC - ANTIMUSCARINICS (ANTICHOLINERGIC)		
oxybutynin chloride syrup 5 mg/5ml	1	
oxybutynin chloride tab 5 mg	1	
oxybutynin chloride tab er 24hr 5 mg	1	
oxybutynin chloride tab er 24hr 10 mg	1	
oxybutynin chloride tab er 24hr 15 mg	1	
OXYTROL/WOMN DIS 3.9MG/24	1	GNDR, OTC
trospium chloride tab 20 mg	1	
URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS		
bethanechol chloride tab 5 mg	1	
bethanechol chloride tab 10 mg	1	
bethanechol chloride tab 25 mg	1	
bethanechol chloride tab 50 mg	1	
VAGINAL AND RELATED PRODUCTS		
MISCELLANEOUS VAGINAL PRODUCTS		
acetic acid vaginal solution	1	OTC
ex cleansing sol	1	OTC
summers eve sol ex clean	1	OTC
SPERMICIDES		
ENCARE SUP 100MG	1	OTC
GYNOL II GEL 3%	1	OTC
SHUR-SEAL GEL 2%	1	OTC
VCF VAGINAL AER CONTRACP	1	OTC
VCF VAGINAL GEL CONTRACE	1	OTC
VCF VAGINAL MIS CONTRACP	1	OTC
VAGINAL ANTI-INFECTIVES		
clindamycin phosphate vaginal cream 2%	1	
clotrimazole cre 2%	1	OTC
clotrimazole cre 3 day	1	OTC
clotrimazole vaginal cream 1%	1	OTC
cvs miconazo cre 7	1	OTC
3 day vaginl cre 2%	1	OTC
3 day vagnal cre 4%	1	OTC
metronidazole vaginal gel 0.75%	1	
miconazole 1 kit	1	OTC
miconazole 1 kit 1200-2%	1	OTC
MICONAZOLE 1 KIT COMBO	1	OTC
miconazole 3 kit combinat	1	OTC
miconazole 3 kit combo	1	OTC

Drug Name	Drug Tier	Requirements/Limits
miconazole 3 kit combo pk	1	OTC
miconazole 3 sup 200mg	1	
miconazole 7 cre	1	OTC
miconazole 7 cre 2%	1	OTC
miconazole 7 cre tube/kit	1	OTC
miconazole 7 sup 100mg	1	OTC
miconazole nitrate vaginal cream 2%	1	OTC
MONISTAT 3 KIT COMBO PK	1	OTC
MONISTAT 7 KIT COMBO PK	1	OTC
MONISTAT 7 KIT COMPLETE	1	OTC
sm micon 7 sup 100mg	1	OTC
terconazole vaginal cream 0.4%	1	
terconazole vaginal cream 0.8%	1	
terconazole vaginal suppos 80 mg	1	
vagistat-3 kit combo pk	1	OTC
vandazole gel 0.75%	1	

VAGINAL ESTROGENS

estradiol vaginal tab 10 mcg	1
yuvafem tab 10mcg	1

VASOPRESSORS

ANAPHYLAXIS THERAPY AGENTS

epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)	1	QL (8 pens / year)
epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)	1	QL (8 pens / year)
epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000)	1	QL (4 pens / year)
EPIPEN 2-PAK INJ 0.3MG	1	QL (8 pens / year)

VASOPRESSORS

midodrine hcl tab 2.5 mg	1
midodrine hcl tab 5 mg	1
midodrine hcl tab 10 mg	1

VITAMINS

OIL SOLUBLE VITAMINS

BABY DDROPS LIQ 400UNIT	1	OTC
baby super dro daily d3	1	OTC
baby vit d dro 400/.028	1	OTC
calcidiol dro 8000/ml	1	OTC
cholecalciferol cap 1.25 mg (50000 unit)	1	OTC
cholecalciferol cap 25 mcg (1000 unit)	1	OTC
cholecalciferol cap 50 mcg (2000 unit)	1	OTC
cholecalciferol cap 125 mcg (5000 unit)	1	OTC
cholecalciferol cap 250 mcg (10000 unit)	1	OTC
cholecalciferol chew tab 10 mcg (400 unit)	1	OTC

Drug Name	Drug Tier	Requirements/Limits
cholecalciferol chew tab 25 mcg (1000 unit)	1	OTC
cholecalciferol oral liquid 10 mcg/ml (400 unit/ml)	1	OTC
cholecalciferol tab 10 mcg (400 unit)	1	OTC
cholecalciferol tab 25 mcg (1000 unit)	1	OTC
cholecalciferol tab 50 mcg (2000 unit)	1	OTC
cholecalciferol tab 125 mcg (5000 unit)	1	OTC
cvs d3 cap 50mcg	1	OTC
cvs d3 cap 1000unit	1	OTC
cvs d3 cap 5000unit	1	OTC
d3 adult chw 1000unit	1	OTC
d3 cap 50mcg	1	OTC
d3 cap 1000unit	1	OTC
d3 cap 2000unit	1	OTC
d3 high pot cap 125mcg	1	OTC
d3 high pote cap 50mcg	1	OTC
d3 kids chw 400unit	1	OTC
d3 maximum cap 5000unit	1	OTC
d3 super str cap 2000unit	1	OTC
d3 tab 400unit	1	OTC
d3-50 cap 50000unt	1	OTC
d3-1000 cap 1000unit	1	OTC
d 400 chw 400unit	1	OTC
d 400 tab 400unit	1	OTC
d 1000 cap 1000unit	1	OTC
d-vitamin dro 400unit	1	OTC
d-vite pedia dro 400unit	1	OTC
DDROPS LIQ 2000UNIT	1	OTC
decara cap 10000unt	1	OTC
decara cap 50000unt	1	OTC
delta d3 tab 400unit	1	OTC
dialyvite d cap 5000unit	1	OTC
eql vitamin cap d3	1	OTC
ergocalciferol cap 1.25 mg (50000 unit)	1	
ergocalciferol soln 200 mcg/ml (8000 unit/ml)	1	OTC
gnp d cap 1000unit	1	OTC
gnp d chw 2000unit	1	OTC
gnp vit d3 tab 1000unit	1	OTC
gnp vit d tab 1000unit	1	OTC
gnp vit d tab 5000unit	1	OTC
hm vitamin d tab 25mcg	1	OTC
is-d 10000 cap 250mcg	1	OTC
kids vit d3 chw 1000unit	1	OTC

Drug Name	Drug Tier	Requirements/Limits
kls d3 cap 50mcg	1	OTC
optimal-d cap 50000unt	1	OTC
pedia d-vite dro 400unit	1	OTC
phytonadione tab 5 mg	1	
qc vit d3 cap 1000unit	1	OTC
qc vit d3 cap 2000unit	1	OTC
qc vit d3 tab 400unit	1	OTC
qc vit d3 tab 1000unit	1	OTC
qc vit d3 tab 2000unit	1	OTC
qc vit d3 tab 5000unit	1	OTC
ra vitamin cap 2000unit	1	OTC
sm vit d3 cap 50mcg	1	OTC
sm vitamin d tab 400unit	1	OTC
thera-d tab 2000unit	1	OTC
vit d3 gumm chw 1000unit	1	OTC
vit d3 hp cap 2000unit	1	OTC
vitajoy daly chw d 1000iu	1	OTC
VITAMIN D2 TAB 400UNIT	1	OTC
VITAMIN D2 TAB 2000UNIT	1	OTC
vitamin d3 cap 2000unit	1	OTC
vitamin d3 cap 10000unt	1	OTC
vitamin d3 chw 25mcg	1	OTC
vitamin d3 chw 50mcg	1	OTC
vitamin d3 chw 1000unit	1	OTC
vitamin d3 chw ex str	1	OTC
vitamin d3 dro 10mcg/ml	1	OTC
vitamin d3 tab 5000unit	1	OTC
vitamin d cap 1000unit	1	OTC
VITAMIN D CAP 2000UNIT	1	OTC
vitamin d chw 400unit	1	OTC
vitamin d chw 1000unit	1	OTC
vitamin d tab 1000unit	1	OTC
vitamin d tab 5000iu	1	OTC
vitamin d-3 cap 2000unit	1	OTC
vitamin d-3 tab 1000unit	1	OTC
vitamin d-3 tab 5000unit	1	OTC
weekly-d cap 50000unt	1	OTC

WATER SOLUBLE VITAMINS

b-1 hi potcy tab 100mg	1	OTC
c-500 tab non-acid	1	OTC
calcium ascorbate tab 500 mg	1	OTC
cvs b1 tab 100mg	1	OTC
cvs b-1 tab 100mg	1	OTC
pyridoxine hcl tab 25 mg	1	OTC
pyridoxine hcl tab 50 mg	1	OTC

Drug Name	Drug Tier	Requirements/Limits
<i>qc vit b1 tab 100mg</i>	1	OTC
<i>ra vit b-1 tab 100mg</i>	1	OTC
<i>ra vit b-6 tab 50mg</i>	1	OTC
<i>sm vit b1 tab 100mg</i>	1	OTC
<i>thiamine hcl tab 50 mg</i>	1	OTC
<i>thiamine hcl tab 100 mg</i>	1	OTC
<i>thiamine mononitrate tab 100 mg</i>	1	OTC

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<i>camrese tab</i>	52
<i>capecitabine tab 150 mg</i>	37
<i>capecitabine tab 500 mg</i>	37
<i>CAPRELSA TAB 100MG</i>	39
<i>CAPRELSA TAB 300MG</i>	39
<i>capsaicin cream 0.025%</i>	73
<i>capsaicin cream 0.1%</i>	73
<i>capsaicin hp cre 0.1%</i>	73
<i>CAPSAICIN LIQ 0.15%</i>	73
<i>captopril tab 100 mg</i>	33
<i>captopril tab 12.5 mg</i>	33
<i>captopril tab 25 mg</i>	33
<i>captopril tab 50 mg</i>	33
<i>CAPZASIN GEL RELIEF</i>	73
<i>CAPZASIN LIQ 0.15%</i>	73
<i>CAPZASIN-P CRE 0.035%</i>	73
<i>CARB/LEVO TAB 10-100MG</i>	41
<i>CARB/LEVO TAB 25-100MG</i>	41
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<i>carbidopa & levodopa tab 10-100 mg</i>	41
<i>carbidopa & levodopa tab 25-100 mg</i>	41
<i>carbidopa & levodopa tab 25-250 mg</i>	41
<i>carbidopa & levodopa tab er 25-100 mg</i>	41
<i>carbidopa & levodopa tab er 50-200 mg</i>	41
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	41
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	41
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	42
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	42
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	42
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	42
<i>carboxymethylcellulose sodium ophth soln 0.5%</i>	163
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CAREFINE MIS 32GX4MM	114
CAREFINE MIS 32GX6MM	114
CAREONE LANC MIS 30G	99
CAREONE LANC MIS THIN 23G	99
CARESENS 30G MIS LANCETS	99
CARETOUCH MIS 31GX5MM	114
CARETOUCH MIS 31GX8MM	114
CARETOUCH MIS 32GX4MM	114
CARETOUCH MIS CPAP	121
CARETOUCH MIS LANC 26G	99
CARETOUCH MIS LANC 28G	99
CARETOUCH MIS LANC 30G	99
CARETOUCH MIS TWIST 28	99
CARETOUCH MIS TWIST 30	99
CARETOUCH MIS TWIST 33	100
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CARPALAID MIS LARGE	92
CARPALAID MIS PRA LG	92
CARPALAID MIS PRAC SM	92
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<i>cartia xt cap 120/24hr</i>	47
<i>cartia xt cap 180/24hr</i>	48
<i>cartia xt cap 240/24hr</i>	48
<i>cartia xt cap 300/24hr</i>	48
<i>carvedilol tab 12.5 mg</i>	46
<i>carvedilol tab 25 mg</i>	46
<i>carvedilol tab 3.125 mg</i>	46
<i>carvedilol tab 6.25 mg</i>	46
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<i>cavarest gel 1.1%</i>	131
<i>cavilon cre 2%</i>	67
<i>caziant pak</i>	53
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<i>cefadroxil for susp 250 mg/5ml</i>	51
<i>cefadroxil for susp 500 mg/5ml</i>	51
<i>cefadroxil tab 1 gm</i>	51
<i>cefdinir cap 300 mg</i>	51
<i>cefdinir for susp 125 mg/5ml</i>	51
<i>cefdinir for susp 250 mg/5ml</i>	51
<i>ceprozil for susp 125 mg/5ml</i>	51
<i>ceprozil for susp 250 mg/5ml</i>	51
<i>ceprozil tab 250 mg</i>	51
<i>ceprozil tab 500 mg</i>	51
<i>ceftriaxone sodium for inj 1 gm</i>	51
<i>ceftriaxone sodium for inj 2 gm</i>	52
<i>ceftriaxone sodium for inj 250 mg</i>	52
<i>ceftriaxone sodium for inj 500 mg</i>	52
<i>cefuroxime axetil tab 250 mg</i>	51
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<i>celecoxib cap 200 mg</i>	3
<i>celecoxib cap 400 mg</i>	3
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<i>century tab mature</i>	139
<i>cephalexin cap 250 mg</i>	51
<i>cephalexin cap 500 mg</i>	51
<i>cephalexin cap 750 mg</i>	51
<i>cephalexin for susp 125 mg/5ml</i>	51
<i>cephalexin for susp 250 mg/5ml</i>	51
<i>cephalexin tab 250 mg</i>	51
<i>cephalexin tab 500 mg</i>	51
<i>ceralyte 70 sol</i>	128
<i>cerave acne liq foaming</i>	65
<i>cerave baby oin healing</i>	72
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CEREZYME INJ 400UNIT	83
<i>cerovite jr chw</i>	154
<i>cerovite tab senior</i>	139
<i>certa plus tab</i>	139
CERTAVIRE TAB SENIOR	139
CERTAVITE TAB SENIOR	139
<i>certavite/ tab antioxidant</i>	139
CERTAVITE/ TAB ANTIOXID	139
<i>cetirizine chw 10mg</i>	30
<i>cetirizine hcl chew tab 5 mg</i>	30
<i>cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)</i>	30
<i>cetirizine hcl tab 10 mg</i>	30
<i>cetirizine hcl tab 5 mg</i>	30
<i>cetirizine sol 1mg/ml</i>	30
<i>cetirizine sol 5mg/5ml</i>	30
<i>cetirizine-pseudoephedrine tab er 12hr 5-120 mg</i>	59
<i>cgh cong dm liq 5-100/5</i>	59
<i>chateal eq tab 0.15/30</i>	53
<i>chateal tab 0.15/30</i>	53
CHEMSTRIP 10 TES MD	75
CHEMSTRIP 2 TES GP	75
CHEMSTRIP 5 TES OB	75
CHEMSTRIP 7 TES	75
CHEMSTRIP 9 TES STRIPS	75
CHEMSTRIP TES -10 SG	75
CHEMSTRIP TES UGK	75
<i>chest conges liq childrns</i>	63
<i>chest conges syrup 100/5ml</i>	63
<i>chest conges syrup rel dm</i>	59
<i>chest conges tab 400mg</i>	63
<i>chew calcium chw</i>	127
<i>chewable chw children</i>	154
<i>child allrgy sol 5mg/5ml</i>	30
<i>child asa chw 81mg</i>	8
<i>child chew chw vitamins</i>	154
<i>child chew/ chw extra c</i>	154
<i>child multiv chw iron</i>	154
<i>child soothe chw 400mg</i>	14
<i>child vitami chw</i>	154
<i>children vit chw</i>	154
<i>childrens chw /iron</i>	154
<i>childrens chw apap</i>	6
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<i>childrens chw multivit</i>	154
<i>childrens chw pepto</i>	14
<i>childrens chw soothe</i>	14
<i>childrens chw vitamin</i>	154
<i>childrens chw vitamins</i>	155
<i>childrens liq 5-100mg</i>	59

<i>chld allergy liq 12.5/5ml</i>	28
<i>chld asafree elx 80/2.5ml</i>	6
<i>chld meditab chw 80mg</i>	6
<i>chld mltivit chw /mineral</i>	154
<i>chld non-asa chw 80mg grp</i>	6
<i>chld non-asa tab 80mg qm</i>	6
<i>chld silapap liq 160/5ml</i>	6
<i>chld vitamin chw iron</i>	154
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<i>chlorhexidin sol 2%</i>	43
<i>chlorhexidine gluconate soln 0.12%</i> 131	
<i>chlorhist tab 4mg</i>	27
<i>chlorocaps cap</i>	150
<i>chloroquine phosphate tab 250 mg</i> ...37	
<i>chloroquine phosphate tab 500 mg</i> ...37	
<i>chlor-phenir tab 4mg</i>	27
<i>chlorpheniramine maleate tab 4 mg</i> .28	
<i>chlorpheniramine maleate tab er 12 mg</i>	28
<i>chlorthalidone tab 25 mg</i>	76
<i>chlorthalidone tab 50 mg</i>	76
<i>chlorzoxazone tab 500 mg</i>	158
<i>choc laxativ chw 15mg</i>	87
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<i>cholecalciferol cap 125 mcg (5000 unit)</i>	177
<i>cholecalciferol cap 25 mcg (1000 unit)</i>	177
<i>cholecalciferol cap 250 mcg (10000 unit)</i>	177
<i>cholecalciferol cap 50 mcg (2000 unit)</i>	177
<i>cholecalciferol chew tab 10 mcg (400 unit)</i>	177
<i>cholecalciferol chew tab 25 mcg (1000 unit)</i>	178
<i>cholecalciferol oral liquid 10 mcg/ml (400 unit/ml)</i>	178
<i>cholecalciferol tab 10 mcg (400 unit)</i>	178
<i>cholecalciferol tab 125 mcg (5000 unit)</i>	178
<i>cholecalciferol tab 25 mcg (1000 unit)</i>	178
<i>cholecalciferol tab 50 mcg (2000 unit)</i>	178
<i>cholestyramine light powder 4 gm/dose</i>	32
<i>cholestyramine light powder packets 4 gm</i>	32
<i>cholestyramine powder 4 gm/dose</i> ...32	
<i>cholestyramine powder packets 4 gm</i> 32	
<i>ciclopirox gel 0.77%</i>	67
<i>ciclopirox olamine cream 0.77% (base equiv)</i>	67
<i>ciclopirox olamine susp 0.77% (base equiv)</i>	67
<i>ciclopirox shampoo 1%</i>	67
<i>cilostazol tab 100 mg</i>	82
<i>cilostazol tab 50 mg</i>	82
CIMDUO TAB 300-300	43
<i>cimetidine hcl soln 300 mg/5ml</i>	174
<i>cimetidine tab 200 mg</i>	174
<i>cimetidine tab 200mg</i>	174
<i>cimetidine tab 300 mg</i>	174
<i>cimetidine tab 400 mg</i>	174
<i>cimetidine tab 800 mg</i>	174
<i>cinacalcet hcl tab 30 mg (base equiv)</i>	77
<i>cinacalcet hcl tab 60 mg (base equiv)</i>	77
<i>cinacalcet hcl tab 90 mg (base equiv)</i>	77
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<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i>	165
<i>ciprofloxacin hcl tab 100 mg (base equiv)</i>	79
<i>ciprofloxacin hcl tab 250 mg (base equiv)</i>	79
<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>	79
<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	79
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	167
CITRANATAL TAB RX	155
<i>claravis cap 10mg</i>	65
<i>claravis cap 20mg</i>	65

<i>claravis cap 30mg</i>	65
<i>claravis cap 40mg</i>	65
<i>clarispray spr 50mcg</i>	160
<i>clarithromycin for susp 125 mg/5ml</i> .90	
<i>clarithromycin for susp 250 mg/5ml</i> .90	
<i>clarithromycin tab 250 mg</i>	90
<i>clarithromycin tab 500 mg</i>	90
<i>clarithromycin tab er 24hr 500 mg</i> ...90	
<i>claritin eye dro 0.025%op</i>	166
<i>CLARITIN RDT TAB 5MG</i>	30
<i>claritin sol 5mg/5ml</i>	31
<i>clean&clear cre 10%</i>	65
<i>CLEANLET 28G MIS LANCETS</i>	100
<i>CLEAR BANDAG MIS 3/4</i>	93
<i>clearasil cre acne</i>	65
<i>clearasil cre spot 10%</i>	65
<i>clearcanal dro 6.5%</i>	167
<i>clearlax pow.</i>	87
<i>clearskin cre 10%</i>	65
<i>clemastine fumarate tab 2.68 mg</i>28	
<i>CLEMASTINE SYP 0.5/5ML</i>	28
<i>CLEVER CHECK MIS</i>	100
<i>CLEVER CHECK MIS 30G</i>	100
<i>CLEVER CHOIC MIS MASK.</i>	120
<i>CLICKFINE MIS 31GX3/16</i>	114
<i>CLICKFINE MIS 31GX5/16</i>	114
<i>CLICKFINE MIS 31GX8MM</i>	114
<i>CLICKFINE MIS 32GX5/32</i>	114
<i>clindamycin hcl cap 150 mg</i>	15
<i>clindamycin hcl cap 300 mg</i>	16
<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	16
<i>clindamycin phosphate gel 1%</i>	65
<i>clindamycin phosphate lotion 1%</i>	65
<i>clindamycin phosphate soln 1%</i>	65
<i>clindamycin phosphate vaginal cream 2%</i>	176
<i>clinpro 5000 pst 1.1%</i>	131
<i>clonidine hcl tab 0.1 mg</i>	34
<i>clonidine hcl tab 0.2 mg</i>	34
<i>clonidine hcl tab 0.3 mg</i>	34
<i>clonidine td patch weekly 0.1 mg/24hr</i>	34
<i>clonidine td patch weekly 0.2 mg/24hr</i>	34
<i>clonidine td patch weekly 0.3 mg/24hr</i>	34

<i>clopidogrel bisulfate tab 300 mg (base equiv)</i>	83
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	82
<i>clotrimazole cre 2%</i>	176
<i>clotrimazole cre 3 day</i>	176
<i>clotrimazole cream 1%</i>	67
<i>clotrimazole soln 1%</i>	67
<i>clotrimazole troche 10 mg</i>	131
<i>clotrimazole vaginal cream 1%</i>	176
<i>CO MONITOR MIS T PIECES</i>	121
<i>COAGUCHEK MIS LANCETS</i>	100
<i>cod liver cap</i>	157
<i>cod liver cap oil</i>	157
<i>cod liver cap oil/a&d</i>	157
<i>cod liver chw /vit d</i>	157
<i>cod liver chw w/vit</i>	157
<i>COD LIVER OIL</i>	157
<i>COD LIVER OIL FOR KIDS</i>	157
<i>COD LIVER OIL NORWAYIA</i>	157
<i>COD LIVER OIL OIL</i>	157
<i>COD LIVER OIL USP/NF</i>	157
<i>CODITUSSIN LIQ AC</i>	59
<i>colace 2in1 tab 8.6-50mg</i>	86
<i>colchicine tab 0.6 mg</i>	82
<i>cold/allergy elx children</i>	59
<i>colestipol hcl granule packets 5 gm</i> ..32	
<i>colestipol hcl granules 5 gm</i>	32
<i>colestipol hcl tab 1 gm</i>	32
<i>COLLAGEN CAP ULTRA</i>	156
<i>COLOR CONDOM MIS + LUBE</i>	96
<i>COMBIPATCH DIS</i>	79
<i>COMBIVENT AER 20-100</i>	18
<i>COMETRIQ KIT 100MG</i>	39
<i>COMETRIQ KIT 140MG</i>	39
<i>COMETRIQ KIT 60MG</i>	39
<i>COMFORT ASSU MIS LANC 28G</i>100	
<i>COMFORT ASSU MIS LANC 33G</i>100	
<i>COMFORT EZ MIS 21G</i>	100
<i>COMFORT EZ MIS 23G</i>	100
<i>COMFORT EZ MIS 28G</i>	100
<i>COMFORT EZ MIS 31GX5MM</i>	114
<i>COMFORT EZ MIS 31GX8MM</i>	114
<i>COMFORT EZ MIS 32GX4MM</i>	114
<i>COMFORT EZ MIS 32GX6MM</i>	114
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<i>comfort gel sus antacid.....</i>	13
<i>comfort gel sus anti-gas</i>	13
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COMFORT TCH MIS LANC 30G	100
COMFORT TCH MIS LANC 31G	100
COMFORT TOUC MIS 31GX5MM	114
COMFORT TOUC MIS 31GX8MM	114
COMFORT TOUC MIS 32GX4MM	114
COMFORT TOUC MIS 32GX6MM	115
COMFORTOUCH MIS LANCET	100
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<i>comp allergy cap 25mg.....</i>	28
<i>comp allergy tab 25mg</i>	28
<i>comp allergy tab 25mg med</i>	28
<i>comp allergy tab 25mg rlf.....</i>	28
<i>comp daily tab w/lutein</i>	139
<i>comp energy tab</i>	139
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<i>constulose sol 10gm/15</i>	87
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<i>correctol tab 5mg ec</i>	87
<i>cort intense cre heal 1%.....</i>	70
<i>cortisone cre 1%</i>	70
<i>cortisone gel 1%</i>	70
<i>cortisone lot 1%.....</i>	70
<i>cortisone oin 1%</i>	70
<i>cortizone-10 cre /aloe 1%</i>	70
<i>cortizone-10 cre healing</i>	70
<i>cortizone-10 cre plus</i>	70
<i>cortizone-10 gel 1%.....</i>	70
<i>cortizone-10 lot diab/1%</i>	70
<i>cortizone-10 lot eczema</i>	70
<i>cortizone-10 lot hydraten</i>	70
<i>cortizone-10 oin 1%</i>	70
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COSENTYX INJ 300DOSE	69
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<i>cough child liq 5-100/5.....</i>	59
<i>cough/chest liq 20-400.....</i>	59
<i>cough/chest liq dm child</i>	59
<i>cough/chest syrup dm.....</i>	60
<i>coughtab tab 200mg</i>	63
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CPAP MASK MIS WIPES	121
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<i>cranberry cap urin com</i>	157
CRAYON STRIP MIS BANDAGE	93
<i>creamies chw 600-400</i>	127
<i>creamy face liq wash 4%</i>	65
CREON CAP 12000UNT	75
CREON CAP 24000UNT	75
CREON CAP 3000UNIT.....	75
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<i>cromolyn sodium nasal aerosol soln 5.2 mg/act (4%)</i>	159
<i>cromolyn sodium ophth soln 4%....</i>	166
<i>cromolyn sodium soln nebu 20 mg/2ml</i>	17
<i>cryselle-28 tab 28 tabs.....</i>	53
<i>cultrl total cap balance</i>	24
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CULTURELLE CAP IMMUNITY.....	24	CVS ANTI-BAC MIS BANDAGE	93
CULTURELLE CAP PRO-WELL	24	CVS ANTI-BAC MIS WATERPRO	93
CULTURELLE CAP WOMENS	24	cvs aspirin tab 325mg	8
CULTURELLE CHW.....	155	cvs aspirin tab 325mg ec	8
CULTURELLE CHW KIDS.....	24	cvs aspirin tab 81mg ec	8
CULTURELLE CHW MULTIVIT	139	cvs b1 tab 100mg	179
CULTURELLE PAK KIDS	24	cvs b-1 tab 100mg	179
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CURAD ASSORT MIS ACTIFLEX	93	cvs ca/mg/zn tab.....	127
CURAD FAMILY MIS FLX ASST	93	cvs calcium tab 600mg.....	127
CURAD FLEX MIS ASSORTED	93	cvs children chw complete	154
CURAD KID SZ MIS DINOSAUR.....	93	cvs childs chw 80mg	6
CURAD MIS GODZILLA	93	cvs c-lax tab 5mg	87
CURAD MIS JURASSIC.....	93	CVS CLEAR MIS BANDAGES	93
CURAD SENSIT MIS 3/4.....	93	cvs d3 cap 1000unit.....	178
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<i>desonide lotion 0.05%</i>	70
<i>desonide oint 0.05%</i>	70
<i>desoximetasone cream 0.05%</i>	70
<i>desoximetasone cream 0.25%</i>	70
<i>desoximetasone gel 0.05%</i>	70
<i>desoximetasone oint 0.25%</i>	70
<i>dexamethasone elixir 0.5 mg/5ml</i>	57
<i>dexamethasone sodium phosphate ophth soln 0.1%</i>	166
<i>dexamethasone soln 0.5 mg/5ml</i>	57
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<i>dexamethasone tab 0.75 mg</i>	57
<i>dexamethasone tab 1 mg</i>	57
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<i>melatonin liq 5mg/15ml</i>	1
<i>melatonin liquid 1 mg/ml</i>	1
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<i>melatonin sub 5mg</i>	1
<i>melatonin sub quik dis</i>	1
<i>melatonin tab 1 mg</i>	1
<i>melatonin tab 10 mg</i>	1
<i>melatonin tab 10mg</i>	1
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MELATONIN TAB 200MCG	1
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<i>promethazine hcl suppos 25 mg</i>	32
<i>promethazine hcl syrup 6.25 mg/5ml</i>	32
<i>promethazine hcl tab 12.5 mg</i>	32
<i>promethazine hcl tab 25 mg</i>	32
<i>promethazine hcl tab 50 mg</i>	32
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<i>px antacid sus max st</i>	13
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<i>qc anti-diar cap 2mg</i>	26
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<i>qc aspirin tab 325mg</i>	9
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<i>QC LANCETS MIS 30G</i>	107
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<i>ra antisepti sol 10%</i>	43
<i>ra aspirin chw 81mg</i>	9
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<i>ra ibuprofen tab 200mg</i>	5
<i>ra iron tab 27mg</i>	85
<i>ra iron tab 325mg</i>	85
<i>ra laxative chw 15mg</i>	88
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<i>ra vit b-1 tab 100mg</i>	180
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<i>sb aspirin tab 325mg ec</i>	9	<i>senna s tab 8.6-50mg</i>	86
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<i>sb bismuth tab 262mg</i>	25	<i>SENNA SYP</i>	88
<i>sb cgh contr syrup 100/5ml</i>	64	<i>senna/dss tab 8.6-50mg</i>	86
<i>sb child asa chw 81mg</i>	9	<i>senna-extra tab 17.2mg</i>	88
<i>sb coughtab tab 200mg</i>	64	<i>senna-lax tab 8.6mg</i>	89
<i>sb docusate tab 8.6-50mg</i>	86	<i>senna-plus tab 8.6-50mg</i>	86
<i>sb gas relf chw 125mg</i>	80	<i>senna-s tab 8.6-50mg</i>	86
<i>sb hydrocort cre 1%</i>	71	<i>senna-tabs tab 8.6mg</i>	89
<i>sb hydrocort oin 1%</i>	71	<i>senna-time s tab 8.6-50mg</i>	86
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<i>SB LANCETS MIS ULTR THN</i>	109	<i>sennosides cap 8.6 mg</i>	89
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<i>sb non-asa chw 160mg</i>	8	<i>sennosides tab 8.6 mg</i>	89
<i>sb non-asa chw 80mg frt</i>	8	<i>senokot extr tab 17.2mg</i>	89
<i>sb non-asa chw 80mg grp</i>	8	<i>SENOKOT LAX CHW GUMMIES</i>	89
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