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2027 List of Covered Drugs (Drug List or Formulary)

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

This *Drug List* was updated on **10/05/2026**. Effective on **01/01/2027**.

For more recent information or other questions, contact us at **1-866-567-7242**,
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Medicare_{Rx}
Prescription Drug Coverage

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NO ENGLISH



1-866-567-7242

TRS: 711

ATTENTION: If you speak English, free language assistance services are available to you free of charge and without unnecessary delay. Additionally, appropriate auxiliary aids and services to provide information in accessible formats are available free of charge and in a timely manner. Please call the number above or speak to your provider. English

ማሳሰቢያ፡- አማርኛ ተናጋሪ ከሆኑ ፤ ነጻ የቋንቋ ድጋፍ አገልግሎቶች ካለምንም ክፍያ እና ካለአላስፈላጊ መዘግየት ማግኘት ይችላሉ። በተጨማሪም መረጃን በቀላሉ ለማግኘት በሚያስችል ቅርጽ ለማቅረብ ተገቢ የሆኑ የመስማት ድጋፍ እና አገልግሎቶች ከክፍያ ነጻ በሆነ እና ግዜውን በጠበቀ መልኩ ማግኘት ይችላሉ። እባክዎ ከላይ ባለው ቁጥር ይደውሉ ወይም አቅራቢዎን ያነጋግሩ። Amharic

تنبيه: نقدم لمتحدثي اللغة العربية خدمات مساعدة لغوية مجانية وفورية، بالإضافة إلى وسائل وخدمات مساعدة مناسبة، وبصيغة معلومات سهلة بدون تكلفة وبشكل سريع. يرجى التواصل على الرقم الموضح أعلاه أو مراجعة مقدم الخدمة المباشرة. Arabic

သတိပြုရန် - အကယ်၍ သင်သည် မြန်မာဘာသာစကား ပြောဆိုသူဖြစ်လျှင် အခမဲ့ ဘာသာစကားဆိုင်ရာ ပံ့ပိုးထောက်ပံ့ပေးမှု ဝန်ဆောင်မှုများအား မလိုအပ်သည့် နှောင့်နှေးကြန့်ကြာမှုများ မရှိစေဘဲ သင် အခမဲ့ ရရှိနိုင်မည် ဖြစ်သည်။ ထို့ပြင် အချက်အလက်များအား အလွယ်တကူ ဝင်ရောက်ရယူနိုင်စေသော ဖောမတ်ပုံစံများဖြင့် ထောက်ပံ့ပေးထားသည့် သက်ဆိုင်ရာ ဖြည့်စွက် ထောက်ပံ့မှုများနှင့် ဝန်ဆောင်မှုများကိုလည်း အခမဲ့ အချိန်မ ရရှိနိုင်စေရန် စီမံပေးထားပါသည်။ ကျေးဇူးပြုပြီး အထက်ဖော်ပြပါ ဖုန်းနံပါတ်သို့ ခေါ်ဆိုပါ သို့မဟုတ် သင်၏ ထောက်ပံ့သူဖြင့် ပြောဆိုဆွေးနွေးပါ။ မြန်မာဘာသာစကား Burmese

၈

យកចិត្តទុកដាក់៖ ប្រសិនបើអ្នកនិយាយភាសាខ្មែរ (ខ្មែរ) សេវាកម្មជំនួយភាសាភាគតិចដែលមានផ្តល់ជូនអ្នកដោយមិនគិតថ្លៃ និងដោយគ្មានការពន្យារពេលមិនចាំបាច់ឡើយ។ លើសពីនេះ ជំនួយ និងសេវាកម្មដែលសមស្របក្នុងការផ្តល់ព័ត៌មានក្នុង ទម្រង់ដែលអាចចូលប្រើបានគឺអាចរកបានដោយឥតគិតថ្លៃ និងទាន់ពេលវេលា។ សូមហៅទូរសព្ទទៅលេខខាងលើ ឬនិយាយជាមួយអ្នកផ្តល់សេវារបស់អ្នក។ ភាសាខ្មែរ (ខ្មែរ) Cambodian (Khmer)

注意：如果您說簡體中文，您可以免費獲得語言協助服務，且不會有不必要的延誤。此外，還能免費及時獲取以無障礙格式提供資訊的適當輔助工具和服務。請撥打上面的電話號碼，或與您的服務提供商溝通。 Cantonese (Traditional Chinese)

ATTENTION : Si vous parlez français, des services d'assistance linguistique gratuits sont à votre disposition, sans frais et sans délai. En outre, des aides et services auxiliaires appropriés pouvant fournir des informations dans des formats accessibles sont disponibles gratuitement et rapidement. Veuillez appeler le numéro ci-dessus ou contacter votre fournisseur. French

CEEB TOOM: Yog koj hais lus Hmoob, muaj kev pab txhais lus dawb rau koj siv. Koj tsis tas them nqi thiab yuav tsis qeeb. Kuj muaj cuab yeej thiab kev pab los pab koj nyeem cov ntaub ntawv kom yooj yim nkag siab. Koj hu tau rau tus xov tooj saum toj no lossis nrog koj tus kws kho mob tham. Hmong

NO ENGLISH



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ဟ်သုဉ်ဟ်သး- နမ့ၢ်ကတိၤကညီကိၣ်အဃိ, နမၤန့ၢ် ကိၣ်တၢ်ဆိၣ်ထွဲမၤစၢၤ လၢတလၢ်ဘျုးလၢ်စ့ၤ ဒီးတအိၣ်ဒီး တၢ်မၤယံၢ်မၤနီၢ်သးဘၣ်န့ၣ်လီၤ. အါန့ၢ်အန့ၣ်, တၢ်အိၣ်စ့ၢ်ကီးဒီး တၢ်မၤစၢၤတၢ်န့ၢ်ဟူၤဒီး တၢ်မၤစၢၤတၢ်မၤတဖၣ် လၢကဟ့ၣ်တၢ်ဂ့ၢ်တၢ်ကျိၤ လၢပုၤအါဂၤန့ၢ်ပၢ်အီၤသ့ လၢတအိၣ်ဒီးအဘျုးအလဲ ဒီးချုးဆၢချုးကတိၤန့ၣ်လီၤ. ဝံသးစ့ၤ ကီးနီၣ်ဂံၢ်လၢထး မ့တမ့ၢ် တဲသကိးတၢ်ဒီး ပုၤလၢအဟ့ၣ်န့ၢ်တၢ်မၤစၢၤ တက့ၢ်. ကညီကိၣ် Karen

안내: 한국어를 사용하시는 분께는 언어 지원 서비스를 무료로, 지체 없이 제공해 드립니다. 또한, 정보 접근성을 위한 적절한 보조 기구 및 서비스가 무료로, 시의적절하게 제공됩니다. 위에 있는 번호로 전화하시거나 담당자에게 말씀해 주십시오. Korean

ທຸກໆພາສາ: ຖ້າທ່ານເວົ້າພາສາລາວ, ທ່ານຈະໄດ້ຮັບບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາໂດຍບໍ່ເສຍຄ່າ ແລະ ບໍ່ມີການຊັກຊ້າ ທີ່ບໍ່ຈຳເປັນ. ນອກຈາກນັ້ນ, ເຄື່ອງມືຊ່ວຍເຫຼືອແລະ ບໍລິການເສີມທີ່ເໝາະສົມເພື່ອໃຫ້ຂໍ້ມູນໃນຮູບແບບທີ່ເຂົາເຈົ້າໄດ້ ໂດຍບໍ່ເສຍຄ່າໃຊ້ຈ່າຍ ແລະ ທັນເວລາ. ກະລຸນາໃຫ້ທ່ານເປັນໄປຕາມຄໍາສັ່ງຂ້າງເທິງ ຫຼື ສົນທະນາກັບຜູ້ໃຫ້ບໍລິການຂອງທ່ານ. Lao

HUBADHAA: Yoo Afaan Oromoo dubbattu ta'e, tajaajila gargaarsa turjumaana afaanii biliisaan akkasumas turtii barbaachisaa hin taane hambisu danda'u isiniif dhihaatee jira. Dabalataanis, odeeffannoo haala salphaan argamuu danda'an dhiyeessuuf gargaarsa fi tajaajiloota deeggarsaa qama midhamtootaaf mijatoo ta'an, kaffaltii tokko malee fi yeroo isaa eeggatee kennamu dhihaatee jira. Odeeffanno dabalataaf lakkoofsa armaan oliitti fayyadamuun namoota gargaarsa kana isiniif kennan qunnamaa. Oromo

ВНИМАНИЕ: Если вы разговариваете на русском языке, воспользуйтесь услугами языковой поддержки бесплатно и без лишних проводов. Также бесплатно и незамедлительно предоставляются соответствующие вспомогательные средства и услуги по обеспечению информацией в доступных форматах. Позвоните по указанному выше номеру или обратитесь к своему поставщику услуг. Russian

FIIRO GAAR AH: Haddii aad ku hadasho Soomaali, waxaa si bilaash ah kuugu diyaar ah adeegyada caawinada luuqadeed oo aan lahayn daahitaan aan munaasib ahayn. Intaas waxaa dheer, waxaa la heli karaa adeegyada iyo kaabitaanka naafada ee haboon si macluumaadka loogu bixiyo qaabab la adeegsan karo oo bilaash ah laguna bixinayo waqigeeada. Fadlan wac lambarka kore ama la hadal adeegbixiyahaaga. Somali

ATENCIÓN: si habla español, tiene a su disposición los servicios gratuitos de traducción sin costo alguno y sin demoras innecesarias. Además, se encuentran disponibles de forma gratuita y oportuna ayuda y servicios auxiliares adecuados con el fin de brindarle información en formatos accesibles. Llame al número indicado anteriormente o hable con su proveedor. Spanish

LƯU Ý: Nếu bạn nói tiếng Việt, bạn có thể được hỗ trợ ngôn ngữ miễn phí mà không phải chờ đợi lâu. Ngoài ra, các thiết bị hỗ trợ và dịch vụ phù hợp để cung cấp thông tin ở định dạng dễ tiếp cận cũng có sẵn miễn phí và kịp thời. Vui lòng gọi số điện thoại phía trên hoặc trao đổi với nhân viên y tế của bạn. Vietnamese

Civil Rights Notice

Discrimination is against the law. South Country Health Alliance (South Country) does not discriminate on the basis of any of the following:

- race
- color
- national origin
- creed
- religion
- sexual orientation
- public assistance status
- age
- disability (including physical or mental impairment)
- sex (including sex stereotypes and gender identity)
- marital status
- political beliefs
- medical condition
- health status
- receipt of health care services
- claims experience
- medical history
- genetic information

You have the right to file a discrimination complaint if you believe you were treated in a discriminatory way by South Country. You can file a complaint and ask for help filing a complaint in person or by mail, phone, fax, or email at:

Civil Rights Coordinator

South Country Health Alliance

6380 West Frontage Road, Medford, MN 55049

Toll Free: 866-567-7242 TTY: 800-627-3529 or 711 Fax: 507-444-7774

Email: grievances-appeals@mnscha.org

Auxiliary Aids and Services: **South Country** provides auxiliary aids and services, like qualified interpreters or information in accessible formats, free of charge and in a timely manner to ensure an equal opportunity to participate in our health care programs. **Contact** Member Services at members@mnscha.org or call 866-567-7242, TTY 800-627-3529 or 711.

Language Assistance Services: **South Country** provides translated documents and spoken language interpreting, free of charge and in a timely manner, when language assistance services are necessary to ensure limited English speakers have meaningful access to our information and services. **Contact** Member Services at members@mnscha.org or call 866-567-7242, TTY 800-627-3529 or 711.

Civil Rights Complaints

You have the right to file a discrimination complaint if you believe you were treated in a discriminatory way by South Country. You may also contact any of the following agencies directly to file a discrimination complaint.

U.S. Department of Health and Human Services Office for Civil Rights (OCR)

You have the right to file a complaint with the OCR, a federal agency, if you believe you have been discriminated against because of any of the following:

- race
- color
- national origin
- age
- disability
- sex
- religion (in some cases)

Contact the **OCR** directly to file a complaint:

Office for Civil Rights, U.S. Department of Health and Human Services

Midwest Region

233 N. Michigan Avenue, Suite 240 Chicago, IL 60601

Customer Response Center: 800-368-1019, TTY: 800-537-7697

Email: ocrmail@hhs.gov

Minnesota Department of Human Rights (MDHR)

In Minnesota, you have the right to file a complaint with the MDHR if you have been discriminated against because of any of the following:

- race
- color
- national origin
- religion
- creed
- sex
- sexual orientation
- marital status
- public assistance status
- disability

Contact the **MDHR** directly to file a complaint:

Minnesota Department of Human Rights

540 Fairview Avenue North, Suite 201, St. Paul, MN 55104

651-539-1100 (voice), 800-657-3704 (toll-free), 711 or 800-627-3529 (MN Relay), 651-296-9042 (fax)

Info.MDHR@state.mn.us (email)

Minnesota Department of Human Services (DHS)

You have the right to file a complaint with DHS if you believe you have been discriminated against in our health care programs because of any of the following:

- race
- color
- national origin
- religion (in some cases)
- age
- disability (including physical or mental impairment)
- sex (including sex stereotypes and gender identity)

Complaints must be in writing and filed within 180 days of the date you discovered the alleged discrimination. The complaint must contain your name and address and describe the discrimination you are complaining about. We will review it and notify you in writing about whether we have authority to investigate. If we do, we will investigate the complaint.

DHS will notify you in writing of the investigation's outcome. You have the right to appeal if you disagree with the decision. To appeal, you must send a written request to have DHS review the investigation outcome. Be brief and state why you disagree with the decision. Include additional information you think is important.

If you file a complaint in this way, the people who work for the agency named in the complaint cannot retaliate against you. This means they cannot punish you in any way for filing a complaint. Filing a complaint in this way does not stop you from seeking out other legal or administrative actions.

Contact **DHS** directly to file a discrimination complaint:

Civil Rights Coordinator

Minnesota Department of Human Services

Equal Opportunity and Access Division

P.O. Box 64997

St. Paul, MN 55164-0997

651-431-3040 (voice) or use your preferred relay service

American Indians can continue or begin to use tribal and Indian Health Services (IHS) clinics. We will not require prior approval or impose any conditions for you to get services at these clinics. For elders age 65 years and older this includes Elderly Waiver (EW) services accessed through the tribe. If a doctor or other provider in a tribal or IHS clinic refers you to a provider in our network, we will not require you to see your primary care provider prior to the referral.

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Introduction

This document is called the *List of Covered Drugs* (also known as the *Drug List*). It tells you which prescription drugs and over-the-counter (OTC) drugs and non-drug products are covered by AbilityCare and SeniorCare Complete. The *Drug List* also tells you if there are any special rules or restrictions on any drugs covered by AbilityCare and SeniorCare Complete. Key terms and their definitions appear in the last chapter of the *Member Handbook*.

Table of Contents

A. Disclaimers	8
B. Frequently Asked Questions (FAQ)	8
B1. What drugs are on the <i>List of Covered Drugs</i> ? (We call the <i>List of Covered Drugs</i> the <i>Drug List</i> for short.)	8
B2. Does the <i>Drug List</i> ever change?	8
B3. What happens when there's a change to the <i>Drug List</i> ?	9
B4. Are there any restrictions or limits on drug coverage or any required actions to take to get certain drugs?	10
B5. How will I know if the drug I want has limits or if there are required actions to take to get the drug? ..	11
B6. What happens if SeniorCare Complete and AbilityCare changes their rules about how they cover some drugs (for example, prior authorization, quantity limits, and/or step therapy restrictions)?	11
B7. How can I find a drug on the <i>Drug List</i> ?	11
B8. What if the drug I want to take isn't on the <i>Drug List</i> ?	11
B9. What if I'm a new SeniorCare Complete and AbilityCare member and can't find my drug on the <i>Drug List</i> or have a problem getting my drug?	11
B10. Can I ask for an exception to cover my drug?	12
B11. How can I ask for an exception?	12
B12. How long does it take to get an exception?	12
B13. What are generic drugs?	13
B14. What are original biological products and how are they related to biosimilars?	13
B15. What are OTC drugs?	13
B16. Does SeniorCare Complete and AbilityCare cover non-drug OTC products?	13
B17. Does SeniorCare Complete and AbilityCare cover long-term supplies of prescriptions?	13
B18. Can I get prescriptions delivered to my home from my local pharmacy?	13
B19. What's my copay?	13
C. Overview of the List of Covered Drugs	14
C1. List of Drugs by Drug Type	15
List of Drugs by Drug Type	16
D. Over-the-Counter (OTC) Drugs Grouped by Drug Type	79
E. Index	166

A. Disclaimers

This is a list of drugs that members can get in *SeniorCare Complete and AbilityCare*

- ❖ SeniorCare Complete (HMO SNP) and AbilityCare (HMO SNP) are health plans that contract with both Medicare and the Minnesota Medical Assistance (Medicaid) programs to provide benefits of both programs to enrollees. Enrollment in SeniorCare Complete and AbilityCare depends on contract renewal.
- ❖ You can always check SeniorCare Complete's and AbilityCare's up-to-date List of Covered Drugs online at www.mnscha.org or by calling Member Services at the number listed at the bottom of this page. This call is free.
- ❖ You can get this document for free in other formats, such as large print, braille, or audio. Call Member Services at the number listed at the bottom of this page. This call is free.
- ❖ To make or change a standing request to get this document, now and in the future, in a language other than English or in an alternate format, call Member Services at the number at the bottom of this page.

B. Frequently Asked Questions (FAQ)

Find answers here to questions you have about this *List of Covered Drugs (Drug List)*. You can read all of the FAQ to learn more, or look for a question and answer.

B1. What drugs are on the *List of Covered Drugs*? (We call the *List of Covered Drugs* the *Drug List* for short.)

The drugs on the *Drug List* that starts in **Section C** are the drugs covered by <plan name>. The drugs are available at pharmacies within our network. A pharmacy is in our network if we have an agreement with them to work with us and provide you services. We refer to these pharmacies as "network pharmacies."

Other drugs, such as some over-the-counter (OTC) medications and certain vitamins, may be covered by Medical Assistance. Refer to **Section B15** or find them in **Section C1 or D**.

- SeniorCare Complete and AbilityCare will cover all medically necessary drugs on the *Drug List* if:
 - your doctor or other prescriber says you need them to get better or stay healthy,SeniorCare Complete and AbilityCare agrees that the drug is medically necessary for you, **and**
 - you fill the prescription at a SeniorCare Complete and AbilityCare network pharmacy.

In some cases, you have to do something before you can get a drug. Refer to question B4 for more information.

You can also find an up-to-date list of drugs we cover on our website at www.mnscha.org or call Member Services at the number listed at the bottom of this page.

B2. Does the *Drug List* ever change?

Yes, and SeniorCare Complete and AbilityCare must follow Medicare and Medical Assistance rules when making changes. We may add or remove drugs on the *Drug List* during the year.

We may also change our rules about drugs. For example, we could:

- Decide to require or not require prior authorization for a drug. (Prior authorization is permission from SeniorCare Complete and AbilityCare before you can get a drug.)
- Add or change the amount of a drug you can get (called quantity limits).
- Add or change step therapy restrictions on a drug. (Step therapy means you must try one drug before we'll cover another drug.)

For more information on these drug rules, refer to question B4.

If you're taking a drug that was covered at the **beginning** of the year, we'll generally not remove or change coverage of that drug **during the rest of the year** unless:

- a new, cheaper drug comes on the market that works as well as a drug on the *Drug List* now, **or**
- we learn that a drug isn't safe, **or**
- a drug is removed from the market.

Questions B3 and B6 below have more information on what happens when the *Drug List* changes.

- You can always check SeniorCare Complete and AbilityCare's up-to-date *Drug List* online at www.mnscha.org. Updates to the *Drug List* are posted on the website monthly.
- You can also call Member Services at the numbers listed at the bottom of this page to check the current *Drug List*.

B3. What happens when there's a change to the *Drug List*?

Some changes to the *Drug List* will happen **immediately**. For example:

- **Substitutions of certain new versions of drugs.** We may immediately remove the drugs from the *Drug List* if we replace them with certain new versions of that drug, but your cost for the new drug will remain the same or will be lower and have the same or fewer restrictions or appear on the same or lower cost-sharing tier with the same or fewer restrictions. When we add a new version of a drug, we may also decide to keep the brand name drug or original biological product on the list but change its coverage rules or limits.
 - We may not tell you before we make this change, but we'll send you information about the specific change we made once it happens.
 - We can make these changes only if the drug we're adding:
 - is a new generic version of a brand name drug, or
 - is a certain new biosimilar version of original biological products on the *Drug List* (for example, adding an interchangeable biosimilar that can be substituted for an original biological product without a new prescription).
 - Some of these drug types may be new to you. For more information, refer to Section B14.
 - You or your provider can ask for an exception from these changes. We'll send you a notice with the steps you can take to ask for an exception. Please refer to questions B10-B12 for more information on exceptions.

- **Remove unsafe drugs and other drugs that are taken off the market.** Sometimes a drug may be found unsafe or taken off the market for another reason. If this happens, we may immediately take it off the *Drug List*. If you're taking the drug, we'll send you a notice. Show the notice to your doctor or other prescriber and ask them about your next steps.

We may make other changes that affect the drugs you take. We'll tell you in advance about these other changes to the *Drug List*. These changes might happen if:

- The FDA provides new guidance or there are new clinical guidelines about a drug.
- We remove a brand name drug from the *Drug List* when adding a generic drug that isn't new to the market, **or**
- we remove an original biological product when adding a biosimilar, **or**
- we change the coverage rules or limits for the brand name drug.

When these changes happen, we'll:

- tell you at least 30 days before we make the change to the *Drug List* **or**
- let you know and give you a 30-day supply of the drug after you ask for a refill.

This will give you time to talk to your doctor or other prescriber. They can help you decide:

- if there's a similar drug on the *Drug List* you can take instead **or**
- whether to ask for an exception from these changes. To learn more about exceptions, refer to questions B10-B12.

B4. Are there any restrictions or limits on drug coverage or any required actions to take to get certain drugs?

Yes, some drugs have coverage rules or have limits on the amount you can get. In some cases you or your doctor or other prescriber must do something before you can get the drug. For example:

- **Prior authorization:** For some drugs, you or your doctor or other prescriber must get authorization from SeniorCare Complete or AbilityCare based on specific criteria before you fill your prescription. Prior authorization is different from a referral. SeniorCare Complete or AbilityCare may not cover the drug if you don't get prior authorization.
- **Quantity limits:** Sometimes SeniorCare Complete or AbilityCare limits the amount of a drug you can get.
- **Step therapy:** Sometimes SeniorCare Complete or AbilityCare requires you to do step therapy. This means you'll have to try drugs in a certain order for your medical condition. You might have to try one drug before we'll cover another drug. If your prescriber thinks the first drug doesn't work for you, then we'll cover the second.

You can find out if your drug has any additional requirements or limits by looking in the tables in **Section C1**. You can also get more information by visiting our website at www.mnscha.org. We have posted online documents that explain our prior authorization restriction *or* step therapy restriction *or* prior authorization and step therapy restrictions. You may also ask us to send you a copy.

You can ask for an exception from these limits. This will give you time to talk to your doctor or other prescriber. They can help you decide if there's a similar drug on the *Drug List* you can take instead or whether to ask for an exception. Refer to questions B10-B12 for more information about exceptions.

B5. How will I know if the drug I want has limits or if there are required actions to take to get the drug?

The table in the section titled "List of Drugs by Drug Type" has a column labeled "Necessary actions, restrictions, or limits on use."

B6. What happens if SeniorCare Complete and AbilityCare changes their rules about how they cover some drugs (for example, prior authorization, quantity limits, and/or step therapy restrictions)?

In some cases, we'll tell you in advance if we add or change prior authorization, quantity limits, and/or step therapy restrictions on a drug. Refer to question B3 for more information about this advance notice and situations where we may not be able to tell you in advance when our rules about drugs on the *Drug List* change.

B7. How can I find a drug on the *Drug List*?

There are two ways to find a drug:

- you can search alphabetically, **or**
- you can search by drug type.

To search **alphabetically**, look for your drug in the Index of Covered Drugs section. You can find it in **Section E**. The Index of Covered Drugs is an alphabetical list of all of the drugs included in the *Drug List*. Brand name drugs and generic drugs as well as over-the-counter (OTC) drugs are listed in the index.

To search **by drug type**, find **Section C1** labeled "List of Drugs by Drug Type". The drugs in this section are grouped into categories by type. For example, if you're taking a medicine for migraines, you should look in the "Antimigraine Agents" category. That is where you will find drugs that treat migraines.

B8. What if the drug I want to take isn't on the *Drug List*?

If you don't find your drug on the *Drug List*, call Member Services at the numbers listed at the bottom of this page and ask about it. If you learn that SeniorCare Complete and AbilityCare won't cover the drug, you can do one of these things:

- Ask Member Services *or* your Care Coordinator for a list of drugs like the one you want to take. Then show the list to your doctor or other prescriber. They can prescribe a drug on the *Drug List* that's like the one you want to take. **Or**
- Ask SeniorCare Complete or AbilityCare to make an exception to cover your drug. Refer to questions B10-B12 for more information about exceptions.

B9. What if I'm a new SeniorCare Complete and AbilityCare member and can't find my drug on the *Drug List* or have a problem getting my drug?

We can help. We may cover a temporary 30-day supply of your drug during the first 90 days you're a member of SeniorCare Complete or AbilityCare. This will give you time to talk to your doctor or other prescriber. They can help you decide if there's a similar drug on the *Drug List* you can take instead or whether to ask for an exception.

If your prescription is written for fewer days, we'll allow multiple refills to provide up to a maximum of 30-days of medication.

We'll cover a 30-day supply of your drug if:

- you're taking a drug that isn't on our *Drug List*, **or**
- our plan rules don't let you get the amount ordered by your prescriber, **or**
- the drug requires prior authorization by SeniorCare Complete and AbilityCare **or**
- you're taking a drug that's part of a step therapy restriction.

If you're taking a drug that SeniorCare Complete and AbilityCare doesn't consider to be a Part D drug, you have the right to get a one-time, 72-hour supply of the drug.

If you're in a nursing home or other long-term care facility and need a drug that isn't on the *Drug List* or if you can't easily get the drug you need, we can help. If you've been in the plan for more than 90 days, live in a long-term care facility, and need a supply right away:

- We'll cover one 31-day supply of the drug you need (unless you have a prescription for fewer days), whether or not you're a new SeniorCare Complete or AbilityCare member.
- This is in addition to the temporary supply during the first 90 days you're a member of SeniorCare Complete and AbilityCare.

SeniorCare Complete or AbilityCare will not apply early refill edits that would limit appropriate and necessary actions to Part D drugs by enrollees who experience a level-of-care change. These enrollees will be allowed to obtain a refill of their prescription(s) upon admission to or discharge from a long-term care facility.

B10. Can I ask for an exception to cover my drug?

Yes. You can ask SeniorCare Complete or AbilityCare to make an exception to cover a drug that isn't on the *Drug List*.

You can also ask us to change the rules on your drug.

- For example, SeniorCare Complete or AbilityCare may limit the amount of a drug we'll cover. If your drug has a limit, you can ask us to change the limit and cover more.
- Other examples: You can ask us to drop step therapy restrictions or prior authorization requirements.

B11. How can I ask for an exception?

To ask for an exception, call care coordinator or Member Services. Your care coordinator or a Member Services representative will work with you and your prescriber to help you ask for an exception. You can also read **Chapter 9 Section G2** of the *Member Handbook* to learn more about exceptions.

B12. How long does it take to get an exception?

After we get a statement from your prescriber supporting your request for an exception, we'll give you a decision within 72 hours.

Fax: Standard Request 1-855-446-7895; Expedited Request 1-855-446-7896

If you have any questions, please call Member services at the number at the bottom of the page.

If you or your prescriber think your health may be harmed if you have to wait 72 hours for a decision, you can ask for an expedited exception. This is a faster decision. If your prescriber supports your request, we'll give you a decision within 24 hours of getting your prescriber's supporting statement.

B13. What are generic drugs?

Generic drugs are made up of the same active ingredients as brand name drugs. They usually cost less than the brand name drug and generally work just as well. They usually don't have well-known names. Generic drugs are approved by the Food and Drug Administration (FDA). There are generic drugs available for many brand name drugs. Generic drugs usually can be substituted for brand name drugs at the pharmacy without a new prescription—depending on state laws.

SeniorCare Complete and AbilityCare covers both brand name drugs and generic drugs.

B14. What are original biological products and how are they related to biosimilars?

When we refer to drugs, this could mean a drug or a biological product. Biological products are drugs that are more complex than typical drugs. Since biological products are more complex than typical drugs, instead of having a generic form, they have forms that are called biosimilars. Generally, biosimilars work just as well as the original biological product and may cost less. There are biosimilar alternatives for some original biological products. Some biosimilars are interchangeable biosimilars and, depending on state laws, may be substituted for the original biological product at the pharmacy without needing a new prescription, just like generic drugs can be substituted for brand name drugs.

For more information on drug types, refer to **Chapter 5** of the *Member Handbook*.

B15. What are OTC drugs?

OTC stands for "over-the-counter". SeniorCare Complete and AbilityCare covers some OTC drugs when they're written as prescriptions by your provider.

You can read the SeniorCare Complete and Ability *Drug List* to find out what OTC drugs are covered.

B16. Does SeniorCare Complete and AbilityCare cover non-drug OTC products?

SeniorCare Complete and AbilityCare covers some non-drug OTC products when they're written as prescriptions by your provider.

Examples of non-drug OTC products include THICK NOW ORAL POWDER and VASELINE GEL.

You can read the SeniorCare Complete and AbilityCare drug list in **section F** to find out what non-drug OTC products are covered.

B17. Does SeniorCare Complete and AbilityCare cover long-term supplies of prescriptions?

90-Day Retail Pharmacy Programs. Some retail pharmacies may also offer up to a 90-day supply of covered drugs. A 90-day supply has the same copay as a one-month supply.

B18. Can I get prescriptions delivered to my home from my local pharmacy?

Your local pharmacy may be able to deliver your prescription to your home. You can call your pharmacy to find out if they offer home delivery.

B19. What's my copay?

SeniorCare Complete and AbilityCare members have an amount they may be required to pay as their share of the cost for prescriptions as long as the member follows the plan's rules. Refer to questions B15 and B16 for more information about OTC drugs and non-drug products.

Tiers are groups of drugs on our *Drug List*.

What you pay for a drug on the *Drug List* depends on whether the drug is a generic or brand name drug. Tier 1 generic drugs have the lowest copay. Tier 5 specialty name drugs have a higher copay. Over-the-counter drugs and products have a \$0 copay.

- Tier 1: Preferred Generic Drugs copay is from \$0 to \$5.80, based on your income and level of extra help.
- Tier 2: Generic Drugs copay is from \$0 to \$5.80, based on your income and level of extra help.
- Tier 3: Preferred Brand Drugs copay is from \$0 to \$14.40, based on your income and level of extra help.
- Tier 4: Non-Preferred Drugs copay is from \$0 to \$14.40, based on your income and level of extra help.
- Tier 5: Specialty Drugs copay is from \$0 to \$14.40, based on your income and level of extra help.

If you have questions, call Member Services at the numbers listed at the bottom of this page.

C. Overview of the List of Covered Drugs

The *List of Covered Drugs* gives you information about the drugs covered by SeniorCare Complete and AbilityCare. If you have trouble finding your drug in the list, turn to the Index of Covered Drugs that begins in **section E**. The index alphabetically lists all drugs covered by SeniorCare Complete and AbilityCare.

Note: “OTC” in the tier column next to a drug means the drug isn’t a “Part D drug.” These drugs have different rules for appeals.

- An appeal is a formal way of asking us to review a decision we made about your coverage and to change it if you think we made a mistake.
- For example, we might decide that a drug that you want isn’t covered or is no longer covered by Medicare or Medical Assistance.
- If you or your prescriber disagrees with our decision, you can appeal. If you ever have a question, call Member Services [*plans insert reference*: at <toll-free phone and TTY numbers> *or* at the numbers listed at the bottom of this page *or* at the numbers in the footer of this document].
- You can also read **Chapter 9** of the *Member Handbook* to learn how to appeal a decision.

C1. List of Drugs by Drug Type

The drugs in this section are grouped into categories by type. For example, if you're taking a medicine for migraines, you should look in the "Antimigraine Agents" category. That's where you'll find drugs that treat migraines.

Here are the meanings of the codes used in the "Necessary actions, restrictions, or limits on use" column:

B/D = This prescription drug has a Medicare Part B versus Medicare Part D administrative prior authorization requirement. This drug may be covered under Medicare Part B or Medicare Part D depending upon the circumstances. Information may need to be submitted describing the use and setting of the drug to make the determination.

QL = Quantity Limit. For certain drugs, SeniorCare Complete and AbilityCare limit the amount of the drug that we'll cover. For example, the plan provides twelve tablets per 30-day supply.

ST = Step Therapy. In some cases, SeniorCare Complete and AbilityCare requires you to first try certain drugs to treat your medical condition before we'll cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, the plan may not cover Drug B unless you try Drug A first. If Drug A doesn't work for you, the plan will then cover Drug B.

PA = Prior Authorization. SeniorCare Complete and AbilityCare requires you or your physician to get prior authorization for certain drugs. This means that you'll need to get approval from the plan before you fill your prescriptions. If you don't get approval, the plan may not cover the drug.

LA = Limited Availability. This prescription may be available only at certain pharmacies. For more information, please contact Member Services at the number listed at the bottom of this page.

The first column of the table lists the name of the drug. Generic drugs are listed in lower-case italics (e.g., warfarin), brand name drugs are capitalized (e.g., CHANTIX), and OTC drugs and products are listed in lower case (e.g., aspirin). The information in the "Necessary actions, restrictions, or limits on use" column tells you if SeniorCare Complete and AbilityCare has any rules for covering your drug.

Table of Contents

ANALGESICS	18
ANESTHETICS	19
ANTI-ADDICTION/SUBSTANCE ABUSE TREATMENT AGENTS	19
ANTIBACTERIALS	20
ANTICONVULSANTS	23
ANTIDEMENTIA AGENTS	26
ANTIDEPRESSANTS	26
ANTIEMETICS	28
ANTIFUNGALS	29
ANTIGOUT AGENTS	30
ANTIMIGRAINE AGENTS	30
ANTIMYASTHENIC AGENTS	30
ANTIMYCOBACTERIALS	30
ANTINEOPLASTICS	31
ANTIPARASITICS	36
ANTIPARKINSON AGENTS	37
ANTIPSYCHOTICS	37
ANTISPASTICITY AGENTS	40
ANTIVIRALS	40
ANXIOLYTICS	43
BIPOLAR AGENTS	43
BLOOD GLUCOSE REGULATORS	43
BLOOD PRODUCTS AND MODIFIERS	46
CARDIOVASCULAR AGENTS	48
CENTRAL NERVOUS SYSTEM AGENTS	53
DENTAL AND ORAL AGENTS	55
DERMATOLOGICAL AGENTS	55
ELECTROLYTES/MINERALS/METALS/VITAMINS	58
GASTROINTESTINAL AGENTS	59
GENETIC OR ENZYME OR PROTEIN DISORDER: REPLACEMENT, MODIFIERS, TREATMENT	60
GENITOURINARY AGENTS	61
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (ADRENAL)	62
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (PITUITARY)	62
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (SEX HORMONES/MODIFIERS) ...	62
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (THYROID)	66
HORMONAL AGENTS, SUPPRESSANT (ADRENAL OR PITUITARY)	66
HORMONAL AGENTS, SUPPRESSANT (THYROID)	67
IMMUNOLOGICAL AGENTS	67
INFLAMMATORY BOWEL DISEASE AGENTS	71
METABOLIC BONE DISEASE AGENTS	71
MISCELLANEOUS THERAPEUTIC AGENTS	72
OPHTHALMIC AGENTS	72
OTIC AGENTS	74
RESPIRATORY TRACT/PULMONARY AGENTS	74

SKELETAL MUSCLE RELAXANTS	78
SLEEP DISORDER AGENTS	78
ALTERNATIVE MEDICINES	79
ANALGESICS - ANTI-INFLAMMATORY	79
ANALGESICS - NONNARCOTIC	81
ANORECTAL AGENTS	88
ANTI-ADDICTION/SUBSTANCE ABUSE TREATMENT AGENTS	89
ANTIDIABETICS	90
ANTIDIARRHEAL AGENTS	91
ANTIDOTES AND SPECIFIC ANTAGONISTS.....	93
ANTIEMETICS	93
ANTISEPTICS & DISINFECTANTS.....	93
ANXIOLYTICS, SEDATIVES, AND HYPNOTICS.....	94
CONTRACEPTIVES.....	96
COUGH/COLD/ALLERGY	96
DERMATOLOGICALS	106
DIAGNOSTIC AGENTS	118
DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS.....	118
DIGESTIVE AGENTS.....	118
GASTROINTESTINAL AGENTS	124
HEMATOPOIETIC AGENTS	125
LAXATIVES.....	126
MEDICAL DEVICES AND SUPPLIES	134
MINERALS & ELECTROLYTES.....	135
MOUTH/THROAT/DENTAL AGENTS	140
MULTIVITAMINS.....	140
NASAL AGENTS - SYSTEMIC AND TOPICAL	149
NONHORMONAL CONTRACEPTIVES	153
NUTRIENTS	153
OPHTHALMIC AGENTS.....	154
OTIC AGENTS	157
PHARMACEUTICAL AIDS	158
RESPIRATORY TRACT/PULMONARY AGENTS.....	158
VAGINAL PRODUCTS	158
VITAMINS.....	159

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
ANALGESICS			
Analgesics			
JOURNAVX 50 mg tab	\$0-\$14.40 (Tier 4)		QL(30 EA per 90 days)
Nonsteroidal Anti-inflammatory Drugs			
celecoxib 100 mg cap, 200 mg cap, 400 mg cap, 50 mg cap	\$0-\$5.80 (Tier 2)	CELEBREX	QL(60 EA per 30 days)
diclofenac potassium 50 mg tab	\$0-\$14.40 (Tier 3)	CATAFLAM	
diclofenac sodium 1.5 % Topical Solution	\$0-\$14.40 (Tier 4)	PENNSAID	PA, QL(300 ML per 30 days)
diclofenac sodium 25 mg tab dr, 50 mg tab dr, 75 mg tab dr	\$0-\$5.80 (Tier 2)	VOLTAREN	
diclofenac sodium er 100 mg tab er 24 hr	\$0-\$14.40 (Tier 3)	VOLTAREN XR	
etodolac 200 mg cap, 300 mg cap, 400 mg tab, 500 mg tab	\$0-\$14.40 (Tier 3)	LODINE	
flurbiprofen 100 mg tab	\$0-\$5.80 (Tier 2)	ANSAID	
ibu 600 mg tab, 800 mg tab	\$0-\$5.80 (Tier 1)	MOTRIN	
ibuprofen 400 mg tab, 600 mg tab, 800 mg tab	\$0-\$5.80 (Tier 1)	MOTRIN	
ibuprofen 100 mg/5ml susp	\$0-\$5.80 (Tier 2)	MOTRIN CHILDRENS	
indomethacin 25 mg cap, 50 mg cap	\$0-\$5.80 (Tier 2)	INDOCIN	
indomethacin er 75 mg cap er	\$0-\$14.40 (Tier 3)	INDOCIN	
ketorolac tromethamine 10 mg tab	\$0-\$14.40 (Tier 4)	TORADOL	QL(20 EA per 30 days)
meloxicam 15 mg tab, 7.5 mg tab	\$0-\$5.80 (Tier 1)	MOBIC	
nabumetone 500 mg tab, 750 mg tab	\$0-\$5.80 (Tier 2)	RELAFEN	
naproxen 250 mg tab, 375 mg tab, 500 mg tab	\$0-\$5.80 (Tier 1)	NAPROSYN	
naproxen 375 mg tab dr	\$0-\$5.80 (Tier 2)	NAPROSYN	
naproxen dr 500 mg tab dr	\$0-\$14.40 (Tier 4)	NAPROSYN	
naproxen sodium 275 mg tab, 550 mg tab	\$0-\$14.40 (Tier 3)	ANAPROX	
oxaprozin 600 mg tab	\$0-\$14.40 (Tier 3)	DAYPRO	
piroxicam 10 mg cap, 20 mg cap	\$0-\$14.40 (Tier 3)	FELDENE	
sulindac 150 mg tab, 200 mg tab	\$0-\$5.80 (Tier 2)	CLINORIL	
Opioid Analgesics, Long-acting			
buprenorphine 10 mcg/hr tdkw patch, 15 mcg/hr tdkw patch, 20 mcg/hr tdkw patch, 5 mcg/hr tdkw patch, 7.5 mcg/hr tdkw patch	\$0-\$14.40 (Tier 4)	BUTRANS	QL(4 EA per 28 days)
fentanyl 100 mcg/hr td patch 72 hr, 12 mcg/hr td patch 72 hr, 25 mcg/hr td patch 72 hr, 50 mcg/hr td patch 72 hr, 75 mcg/hr td patch 72 hr	\$0-\$14.40 (Tier 4)	DURAGESIC	MME
methadone hcl 5 mg/5ml soln	\$0-\$14.40 (Tier 3)		MME
methadone hcl 10 mg tab, 5 mg tab	\$0-\$5.80 (Tier 2)	DOLOPHINE	MME
methadone hcl 10 mg/5ml soln	\$0-\$14.40 (Tier 3)	DOLOPHINE	MME
morphine sulfate er 100 mg tab er, 15 mg tab er, 200 mg tab er, 30 mg tab er, 60 mg tab er	\$0-\$14.40 (Tier 3)	MS CONTIN	MME
XTAMPZA ER 13.5 mg cap er 12 hr abuse-deterr, 18 mg cap er 12 hr abuse-deterr, 27 mg cap er 12 hr abuse-deterr, 36 mg cap er 12 hr abuse-deterr, 9 mg cap er 12 hr abuse-deterr	\$0-\$14.40 (Tier 3)		MME
Opioid Analgesics, Short-acting			
acetaminophen-codeine 300-15 mg tab, 300-30 mg tab, 300-60 mg tab	\$0-\$5.80 (Tier 2)	TYLENOL WITH CODEINE	MME

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>acetaminophen-codeine 120-12 mg/5ml soln</i>	\$0-\$14.40 (Tier 3)	TYLENOL WITH CODEINE	MME
<i>hydrocodone-acetaminophen 7.5-325 mg/15ml soln</i>	\$0-\$14.40 (Tier 3)	HYCET	MME
<i>hydrocodone-acetaminophen 10-325 mg tab, 2.5-325 mg tab, 5-325 mg tab, 7.5-325 mg tab</i>	\$0-\$5.80 (Tier 2)	NORCO	MME
<i>hydromorphone hcl 2 mg tab, 4 mg tab</i>	\$0-\$5.80 (Tier 2)	DILAUDID	MME
<i>hydromorphone hcl 8 mg tab</i>	\$0-\$14.40 (Tier 4)	DILAUDID	MME
<i>hydromorphone hcl pf 10 mg/ml inj soln, 50 mg/5ml inj soln</i>	\$0-\$14.40 (Tier 4)	DILAUDID	MME
<i>morphine sulfate 15 mg tab, 30 mg tab</i>	\$0-\$14.40 (Tier 3)		MME
<i>morphine sulfate 10 mg/5ml soln, 20 mg/5ml soln</i>	\$0-\$14.40 (Tier 3)		MME
<i>morphine sulfate (concentrate) 100 mg/5ml soln</i>	\$0-\$14.40 (Tier 3)	ROXANOL	MME
<i>oxycodone hcl 10 mg tab, 15 mg tab, 5 mg tab</i>	\$0-\$5.80 (Tier 2)	ROXICODONE	MME
<i>oxycodone hcl 20 mg tab, 30 mg tab</i>	\$0-\$14.40 (Tier 3)	ROXICODONE	MME
<i>oxycodone hcl 5 mg/5ml soln</i>	\$0-\$14.40 (Tier 3)	ROXICODONE	MME
<i>oxycodone-acetaminophen 5-325 mg tab</i>	\$0-\$5.80 (Tier 2)	PERCOCET	MME
<i>oxycodone-acetaminophen 10-325 mg tab, 2.5-325 mg tab, 7.5-325 mg tab</i>	\$0-\$14.40 (Tier 3)	PERCOCET	MME
<i>tramadol hcl 50 mg tab</i>	\$0-\$5.80 (Tier 1)	ULTRAM	MME
<i>tramadol-acetaminophen 37.5-325 mg tab</i>	\$0-\$5.80 (Tier 2)	ULTRACET	MME
ANESTHETICS			
Local Anesthetics			
<i>lidocaine 5 % Topical Ointment</i>	\$0-\$14.40 (Tier 3)		PA, QL(150 GM per 30 days)
<i>lidocaine 5 % Topical Patch</i>	\$0-\$14.40 (Tier 4)	LIDODERM	PA, QL(90 EA per 30 days)
<i>lidocaine-prilocaine 2.5-2.5 % Topical Cream</i>	\$0-\$5.80 (Tier 2)	EMLA	PA, QL(30 GM per 30 days)
ANTI-ADDICTION/SUBSTANCE ABUSE TREATMENT AGENTS			
Alcohol Deterrents/anti-craving			
<i>acamprosate calcium 333 mg tab dr</i>	\$0-\$14.40 (Tier 4)	CAMPRAL	
<i>disulfiram 250 mg tab, 500 mg tab</i>	\$0-\$14.40 (Tier 3)	ANTABUSE	
<i>naltrexone hcl 50 mg tab</i>	\$0-\$5.80 (Tier 2)	REVIA	
<i>VIVITROL 380 mg im susp</i>	\$0-\$14.40 (Tier 5)		
Opioid Dependence			
<i>buprenorphine hcl 2 mg tab subl, 8 mg tab subl</i>	\$0-\$5.80 (Tier 2)	SUBUTEX	
<i>buprenorphine hcl-naloxone hcl 2-0.5 mg tab subl, 8-2 mg tab subl</i>	\$0-\$5.80 (Tier 2)	SUBOXONE	
<i>buprenorphine hcl-naloxone hcl 12-3 mg subl film, 2-0.5 mg subl film, 4-1 mg subl film, 8-2 mg subl film</i>	\$0-\$14.40 (Tier 3)	SUBOXONE	
Opioid Reversal Agents			
<i>KLOXXADO 8 mg/0.1ml nasal liq</i>	\$0-\$14.40 (Tier 4)		
<i>naloxone hcl 0.4 mg/ml inj soln, 0.4 mg/ml inj soln cart</i>	\$0-\$5.80 (Tier 2)	NARCAN	
<i>naloxone hcl 2 mg/2ml inj soln pfs</i>	\$0-\$14.40 (Tier 3)	NARCAN	
<i>OPVEE 2.7 mg/0.1ml nasal soln</i>	\$0-\$14.40 (Tier 3)		
Smoking Cessation Agents			
<i>bupropion hcl er (smoking det) 150 mg tab er 12 hr</i>	\$0-\$5.80 (Tier 2)	ZYBAN	QL(60 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
NICOTROL NS 10 mg/ml nasal soln	\$0-\$14.40 (Tier 4)		QL(360 ML per 365 days)
varenicline tartrate 0.5 mg tab, 1 mg tab	\$0-\$14.40 (Tier 4)	CHANTIX	QL(504 EA per 365 days)
varenicline tartrate (starter) 0.5 MG X 11 & 1 mg x 42 tab pack	\$0-\$14.40 (Tier 4)	CHANTIX	QL(504 EA per 365 days)
varenicline tartrate(continue) 1 mg tab	\$0-\$14.40 (Tier 4)	CHANTIX	QL(504 EA per 365 days)
ANTIBACTERIALS			
Aminoglycosides			
amikacin sulfate 500 mg/2ml inj soln	\$0-\$14.40 (Tier 4)	AMIKIN	
ARIKAYCE 590 mg/8.4ml inh susp	\$0-\$14.40 (Tier 5)		PA, QL(235.2 ML per 28 days)
gentamicin sulfate 0.1 % Topical Cream, 0.1 % Topical Ointment	\$0-\$14.40 (Tier 3)	GARAMYCIN	
gentamicin sulfate 40 mg/ml inj soln	\$0-\$14.40 (Tier 3)	GENTAK	
HUMATIN 250 mg cap	\$0-\$14.40 (Tier 5)		
neomycin sulfate 500 mg tab	\$0-\$5.80 (Tier 2)		
streptomycin sulfate 1 gm im soln	\$0-\$14.40 (Tier 5)		QL(60 EA per 30 days)
tobramycin sulfate 10 mg/ml inj soln, 80 mg/2ml inj soln	\$0-\$14.40 (Tier 4)		
Antibacterials, Other			
aztreonam 1 gm inj soln, 2 gm inj soln	\$0-\$14.40 (Tier 4)	AZACTAM	
clindacin etz 1 % Topical Swab	\$0-\$14.40 (Tier 3)	CLEOCIN-T	QL(69 EA per 30 days)
clindamycin hcl 150 mg cap, 300 mg cap, 75 mg cap	\$0-\$5.80 (Tier 2)	CLEOCIN	
clindamycin palmitate hcl 75 mg/5ml soln	\$0-\$14.40 (Tier 4)	CLEOCIN	
clindamycin phosphate 300 mg/2ml inj soln, 600 mg/4ml inj soln, 900 mg/6ml inj soln	\$0-\$14.40 (Tier 3)	CLEOCIN	
clindamycin phosphate 2 % vag crm	\$0-\$14.40 (Tier 4)	CLEOCIN	
clindamycin phosphate 1 % Topical Swab	\$0-\$14.40 (Tier 3)	CLEOCIN-T	QL(69 EA per 30 days)
colistimethate sodium (cba) 150 mg inj soln	\$0-\$14.40 (Tier 4)	COLY-MYCIN	
daptomycin 350 mg iv soln	\$0-\$14.40 (Tier 4)		
daptomycin 500 mg iv soln	\$0-\$14.40 (Tier 4)	CUBICIN	
fosfomycin tromethamine 3 gm pckt	\$0-\$14.40 (Tier 4)	MONUROL	
linezolid 600 mg/300ml iv soln	\$0-\$14.40 (Tier 4)	ZYVOX	
linezolid 600 mg tab	\$0-\$14.40 (Tier 4)	ZYVOX	QL(56 EA per 28 days)
linezolid 100 mg/5ml susp	\$0-\$14.40 (Tier 5)	ZYVOX	QL(1800 ML per 28 days)
methenamine hippurate 1 gm tab	\$0-\$14.40 (Tier 4)	HIPREX	
metronidazole 250 mg tab, 500 mg tab	\$0-\$5.80 (Tier 1)	FLAGYL	
metronidazole 500 mg/100ml iv soln	\$0-\$5.80 (Tier 2)	FLAGYL	
metronidazole 0.75 % vag gel	\$0-\$14.40 (Tier 3)	METROGEL	
nitrofurantoin macrocrystal 100 mg cap, 50 mg cap	\$0-\$14.40 (Tier 3)	MACRODANTIN	
nitrofurantoin monohyd macro 100 mg cap	\$0-\$5.80 (Tier 2)	MACROBID	
SIVEXTRO 200 mg iv soln, 200 mg tab	\$0-\$14.40 (Tier 5)		QL(6 EA per 30 days)
tigecycline 50 mg iv soln	\$0-\$14.40 (Tier 4)	TYGACIL	
tinidazole 250 mg tab, 500 mg tab	\$0-\$14.40 (Tier 4)	TINDAMAX	
trimethoprim 100 mg tab	\$0-\$5.80 (Tier 2)	PROLOPRIM	
vancomycin hcl 1 gm iv soln, 750 mg iv soln	\$0-\$14.40 (Tier 3)		
vancomycin hcl 10 gm iv soln, 500 mg iv soln	\$0-\$14.40 (Tier 3)	VANCOCIN	
vancomycin hcl 125 mg cap	\$0-\$14.40 (Tier 4)	VANCOCIN	QL(120 EA per 30 days)
vancomycin hcl 250 mg cap	\$0-\$14.40 (Tier 4)	VANCOCIN	QL(240 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
Beta-lactam, Cephalosporins			
<i>cefaclor 250 mg cap, 500 mg cap</i>	\$0-\$5.80 (Tier 2)	CECLOR	
<i>cefaclor 250 mg/5ml susp</i>	\$0-\$14.40 (Tier 4)	CECLOR	
<i>cefadroxil 500 mg cap</i>	\$0-\$5.80 (Tier 2)	DURICEF	
<i>cefadroxil 250 mg/5ml susp, 500 mg/5ml susp</i>	\$0-\$5.80 (Tier 2)	DURICEF	
<i>cefazolin sodium 1 gm inj soln, 10 gm inj soln, 500 mg inj soln</i>	\$0-\$14.40 (Tier 4)	ANCEF	
<i>cefdinir 300 mg cap</i>	\$0-\$5.80 (Tier 2)	OMNICEF	
<i>cefdinir 125 mg/5ml susp, 250 mg/5ml susp</i>	\$0-\$5.80 (Tier 2)	OMNICEF	
<i>cefepime hcl 1 gm inj soln, 2 gm iv soln</i>	\$0-\$14.40 (Tier 4)	MAXIPIME	
<i>cefixime 400 mg cap</i>	\$0-\$14.40 (Tier 4)	SUPRAX	
<i>cefotetan disodium 1 gm inj soln, 2 gm inj soln</i>	\$0-\$14.40 (Tier 4)	CEFOTAN	
<i>cefoxitin sodium 10 gm iv soln</i>	\$0-\$14.40 (Tier 3)		
<i>cefoxitin sodium 1 gm iv soln, 2 gm iv soln</i>	\$0-\$14.40 (Tier 3)	MEFOXIN	
<i>cefpodoxime proxetil 100 mg/5ml susp, 50 mg/5ml susp</i>	\$0-\$14.40 (Tier 3)	VANTIN	
<i>cefpodoxime proxetil 100 mg tab, 200 mg tab</i>	\$0-\$14.40 (Tier 4)	VANTIN	
<i>cefprozil 250 mg tab, 500 mg tab</i>	\$0-\$5.80 (Tier 2)	CEFZIL	
<i>cefprozil 125 mg/5ml susp, 250 mg/5ml susp</i>	\$0-\$14.40 (Tier 3)	CEFZIL	
<i>ceftaroline fosamil 400 mg iv soln, 600 mg iv soln</i>	\$0-\$14.40 (Tier 5)		
<i>ceftazidime 2 gm iv soln</i>	\$0-\$14.40 (Tier 3)		
<i>ceftazidime 1 gm inj soln, 6 gm inj soln</i>	\$0-\$14.40 (Tier 3)	FORTAZ	
<i>ceftriaxone sodium 1 gm inj soln, 10 gm iv soln, 2 gm inj soln, 250 mg inj soln, 500 mg inj soln</i>	\$0-\$14.40 (Tier 3)	ROCEPHIN	
<i>cefuroxime axetil 250 mg tab, 500 mg tab</i>	\$0-\$5.80 (Tier 2)	CEFTIN	
<i>cefuroxime sodium 1.5 gm iv soln, 750 mg inj soln</i>	\$0-\$14.40 (Tier 3)	ZINACEF	
<i>cephalexin 250 mg cap, 500 mg cap</i>	\$0-\$5.80 (Tier 2)	KEFLEX	
<i>cephalexin 125 mg/5ml susp, 250 mg/5ml susp</i>	\$0-\$5.80 (Tier 2)	KEFLEX	
<i>tazicef 2 gm iv soln</i>	\$0-\$14.40 (Tier 3)		
TAZICEF 6 gm iv soln	\$0-\$14.40 (Tier 3)		
<i>tazicef 1 gm inj soln</i>	\$0-\$14.40 (Tier 3)	FORTAZ	
Beta-lactam, Penicillins			
<i>amoxicillin 250 mg cap, 500 mg cap, 500 mg tab, 875 mg tab</i>	\$0-\$5.80 (Tier 1)	AMOXIL	
<i>amoxicillin 125 mg/5ml susp, 200 mg/5ml susp, 250 mg/5ml susp, 400 mg/5ml susp</i>	\$0-\$5.80 (Tier 1)	AMOXIL	
<i>amoxicillin 125 mg tab chew, 250 mg tab chew</i>	\$0-\$5.80 (Tier 2)	AMOXIL	
<i>amoxicillin-pot clavulanate 200-28.5 mg tab chew, 400-57 mg tab chew, 500-125 mg tab, 875-125 mg tab</i>	\$0-\$5.80 (Tier 2)	AUGMENTIN	
<i>amoxicillin-pot clavulanate 200-28.5 mg/5ml susp, 400-57 mg/5ml susp, 600-42.9 mg/5ml susp</i>	\$0-\$5.80 (Tier 2)	AUGMENTIN	
<i>amoxicillin-pot clavulanate 250-125 mg tab</i>	\$0-\$14.40 (Tier 4)	AUGMENTIN	
<i>amoxicillin-pot clavulanate 250-62.5 mg/5ml susp</i>	\$0-\$14.40 (Tier 4)	AUGMENTIN	
<i>amoxicillin-pot clavulanate er 1000-62.5 mg tab er 12 hr</i>	\$0-\$14.40 (Tier 4)	AUGMENTIN XR	

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>ampicillin 500 mg cap</i>	\$0-\$5.80 (Tier 2)		
<i>ampicillin sodium 10 gm iv soln, 2 gm inj soln</i>	\$0-\$14.40 (Tier 3)		
<i>ampicillin sodium 1 gm inj soln</i>	\$0-\$14.40 (Tier 3)	TOTACILLIN-N	
<i>ampicillin-sulbactam sodium 1.5 (1-0.5) gm inj soln, 15 (10-5) gm iv soln, 3 (2-1) gm inj soln</i>	\$0-\$14.40 (Tier 3)	UNASYN	
<i>AUGMENTIN 125-31.25 mg/5ml susp</i>	\$0-\$14.40 (Tier 4)		
<i>BICILLIN L-A 1200000 unit/2ml im susp pfs, 2400000 unit/4ml im susp pfs, 600000 unit/ml im susp pfs</i>	\$0-\$14.40 (Tier 4)		
<i>dicloxacillin sodium 250 mg cap, 500 mg cap</i>	\$0-\$14.40 (Tier 3)	DYCILL	
<i>nafcillin sodium 10 gm iv soln, 2 gm inj soln</i>	\$0-\$14.40 (Tier 4)		
<i>nafcillin sodium 1 gm inj soln</i>	\$0-\$14.40 (Tier 4)	NALLPEN	
<i>penicillin g sodium 5000000 unit inj soln</i>	\$0-\$14.40 (Tier 5)		
<i>penicillin v potassium 500 mg tab</i>	\$0-\$5.80 (Tier 2)	PEN-VEE K	
<i>penicillin v potassium 250 mg tab</i>	\$0-\$5.80 (Tier 2)	VEETIDS	
<i>penicillin v potassium 125 mg/5ml soln, 250 mg/5ml soln</i>	\$0-\$5.80 (Tier 2)	VEETIDS	
<i>piperacillin sod-tazobactam so 2.25 (2-0.25) gm iv soln</i>	\$0-\$14.40 (Tier 4)		
<i>piperacillin sod-tazobactam so 3.375 (3-0.375) gm iv soln, 4.5 (4-0.5) gm iv soln, 40.5 (36-4.5) gm iv soln</i>	\$0-\$14.40 (Tier 4)	ZOSYN	
Carbapenems			
<i>ertapenem sodium 1 gm inj soln</i>	\$0-\$14.40 (Tier 4)	INVANZ	
<i>imipenem-cilastatin 250 mg iv soln, 500 mg iv soln</i>	\$0-\$14.40 (Tier 3)	PRIMAXIN	
<i>meropenem 1 gm iv soln, 500 mg iv soln</i>	\$0-\$14.40 (Tier 3)	MERREM	
Macrolides			
<i>azithromycin 250 mg tab, 500 mg tab, 600 mg tab</i>	\$0-\$5.80 (Tier 1)	ZITHROMAX	
<i>azithromycin 100 mg/5ml susp, 200 mg/5ml susp</i>	\$0-\$5.80 (Tier 2)	ZITHROMAX	
<i>azithromycin 500 mg iv soln</i>	\$0-\$14.40 (Tier 3)	ZITHROMAX	
<i>clarithromycin 250 mg tab, 500 mg tab</i>	\$0-\$5.80 (Tier 2)	BIAXIN	
<i>clarithromycin 125 mg/5ml susp, 250 mg/5ml susp</i>	\$0-\$14.40 (Tier 4)	BIAXIN	
<i>clarithromycin er 500 mg tab er 24 hr</i>	\$0-\$14.40 (Tier 4)	BIAXIN XL	
<i>erythromycin 250 mg tab dr, 333 mg tab dr, 500 mg tab dr</i>	\$0-\$14.40 (Tier 4)	ERY-TAB	
<i>erythromycin ethylsuccinate 200 mg/5ml susp</i>	\$0-\$14.40 (Tier 4)	ERYPED	
<i>fidaxomicin 200 mg tab</i>	\$0-\$14.40 (Tier 5)		QL(20 EA per 10 days)
Quinolones			
<i>ciprofloxacin hcl 250 mg tab, 500 mg tab, 750 mg tab</i>	\$0-\$5.80 (Tier 1)	CIPRO	
<i>ciprofloxacin in d5w 200 mg/100ml iv soln</i>	\$0-\$14.40 (Tier 3)	CIPRO	
<i>levofloxacin 250 mg tab, 500 mg tab, 750 mg tab</i>	\$0-\$5.80 (Tier 2)	LEVAQUIN	
<i>levofloxacin 25 mg/ml soln</i>	\$0-\$14.40 (Tier 4)	LEVAQUIN	
<i>levofloxacin in d5w 500 mg/100ml iv soln, 750 mg/150ml iv soln</i>	\$0-\$14.40 (Tier 4)	LEVAQUIN	

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>moxifloxacin hcl 400 mg tab</i>	\$0-\$14.40 (Tier 3)	AVELOX	
<i>moxifloxacin hcl in nacl 400 mg/250ml iv soln</i>	\$0-\$14.40 (Tier 4)	AVELOX	
Sulfonamides			
<i>sulfadiazine 500 mg tab</i>	\$0-\$14.40 (Tier 5)		
<i>sulfamethoxazole-trimethoprim 400-80 mg tab, 800-160 mg tab</i>	\$0-\$5.80 (Tier 1)	SEPTRA	
<i>sulfamethoxazole-trimethoprim 200-40 mg/5ml susp</i>	\$0-\$14.40 (Tier 3)	SEPTRA	
Tetracyclines			
<i>demeclocycline hcl 150 mg tab, 300 mg tab</i>	\$0-\$14.40 (Tier 4)	DECLOMYCIN	
<i>doxycycline hyclate 100 mg iv soln</i>	\$0-\$14.40 (Tier 4)	DOXY	
<i>doxycycline hyclate 100 mg tab</i>	\$0-\$5.80 (Tier 2)	VIBRA-TABS	
<i>doxycycline hyclate 100 mg cap, 50 mg cap</i>	\$0-\$5.80 (Tier 2)	VIBRAMYCIN	
<i>doxycycline monohydrate 100 mg tab, 50 mg tab</i>	\$0-\$5.80 (Tier 2)	ADOXA	
<i>doxycycline monohydrate 150 mg tab, 75 mg tab</i>	\$0-\$14.40 (Tier 3)	ADOXA	
<i>doxycycline monohydrate 100 mg cap, 50 mg cap</i>	\$0-\$5.80 (Tier 2)	MONODOX	
<i>doxycycline monohydrate 25 mg/5ml susp</i>	\$0-\$14.40 (Tier 4)	VIBRAMYCIN	
<i>minocycline hcl 100 mg cap, 50 mg cap, 75 mg cap</i>	\$0-\$14.40 (Tier 3)	MINOCIN	
<i>tetracycline hcl 250 mg cap, 500 mg cap</i>	\$0-\$14.40 (Tier 3)		
ANTICONVULSANTS			
Anticonvulsants, Other			
<i>brivaracetam 10 mg tab</i>	\$0-\$14.40 (Tier 4)		PA
<i>brivaracetam 100 mg tab, 25 mg tab, 50 mg tab, 75 mg tab</i>	\$0-\$14.40 (Tier 4)		PA, QL(60 EA per 30 days)
<i>brivaracetam 10 mg/ml soln</i>	\$0-\$14.40 (Tier 4)		PA, QL(600 ML per 30 days)
EPIDIOLEX 100 mg/ml soln	\$0-\$14.40 (Tier 5)		PA
<i>felbamate 400 mg tab, 600 mg tab</i>	\$0-\$14.40 (Tier 4)	FELBATOL	
<i>felbamate 600 mg/5ml susp</i>	\$0-\$14.40 (Tier 4)	FELBATOL	
FINTEPLA 2.2 mg/ml soln	\$0-\$14.40 (Tier 5)		PA, QL(360 ML per 30 days)
<i>lamotrigine 100 mg tab, 150 mg tab, 200 mg tab, 25 mg tab</i>	\$0-\$5.80 (Tier 1)	LAMICTAL	
<i>lamotrigine 25 mg tab chew, 5 mg tab chew</i>	\$0-\$5.80 (Tier 2)	LAMICTAL	
<i>lamotrigine er 100 mg tab er 24 hr, 200 mg tab er 24 hr, 25 mg tab er 24 hr, 250 mg tab er 24 hr, 300 mg tab er 24 hr, 50 mg tab er 24 hr</i>	\$0-\$14.40 (Tier 4)	LAMICTAL	
<i>lamotrigine starter kit-blue 35 x 25 mg oral kit</i>	\$0-\$14.40 (Tier 4)	LAMICTAL STARTER	
<i>lamotrigine starter kit-green 84 x 25 MG & 14x100 mg oral kit</i>	\$0-\$14.40 (Tier 4)	LAMICTAL STARTER	
<i>lamotrigine starter kit-orange 42 x 25 MG & 7 x 100 mg oral kit</i>	\$0-\$14.40 (Tier 4)	LAMICTAL STARTER	
<i>levetiracetam 250 mg tab disint sol</i>	\$0-\$14.40 (Tier 4)		
<i>levetiracetam 500 mg tab disint sol</i>	\$0-\$14.40 (Tier 4)		QL(60 EA per 30 days)
<i>levetiracetam 1000 mg tab, 250 mg tab, 500 mg tab, 750 mg tab</i>	\$0-\$5.80 (Tier 2)	KEPPRA	

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>levetiracetam 100 mg/ml soln</i>	\$0-\$5.80 (Tier 2)	KEPPRA	
<i>levetiracetam er 500 mg tab er 24 hr, 750 mg tab er 24 hr</i>	\$0-\$14.40 (Tier 3)	KEPPRA XR	
NAYZILAM 5 mg/0.1ml nasal soln	\$0-\$14.40 (Tier 4)		QL(10 EA per 30 days)
<i>perampanel 10 mg tab, 12 mg tab, 2 mg tab, 4 mg tab, 6 mg tab, 8 mg tab</i>	\$0-\$14.40 (Tier 4)		QL(30 EA per 30 days)
<i>perampanel 0.5 mg/ml susp</i>	\$0-\$14.40 (Tier 5)		
<i>roweepra 500 mg tab</i>	\$0-\$5.80 (Tier 2)	KEPPRA	
SPRITAM 250 mg tab disint sol	\$0-\$14.40 (Tier 4)		
SPRITAM 500 mg tab disint sol	\$0-\$14.40 (Tier 4)		QL(60 EA per 30 days)
SUBVENITE 10 mg/ml susp	\$0-\$14.40 (Tier 4)		
<i>subvenite 100 mg tab, 150 mg tab, 200 mg tab, 25 mg tab</i>	\$0-\$5.80 (Tier 1)	LAMICTAL	
<i>subvenite starter kit-blue 35 x 25 mg oral kit</i>	\$0-\$14.40 (Tier 4)	LAMICTAL STARTER	
<i>subvenite starter kit-green 84 x 25 MG & 14x100 mg oral kit</i>	\$0-\$14.40 (Tier 4)	LAMICTAL STARTER	
<i>subvenite starter kit-orange 42 x 25 MG & 7 x 100 mg oral kit</i>	\$0-\$14.40 (Tier 4)	LAMICTAL STARTER	
<i>topiramate 50 mg cap sprinkle</i>	\$0-\$14.40 (Tier 3)		
<i>topiramate 25 mg/ml soln</i>	\$0-\$14.40 (Tier 4)		
<i>topiramate 100 mg tab, 200 mg tab, 25 mg tab, 50 mg tab</i>	\$0-\$5.80 (Tier 1)	TOPAMAX	
<i>topiramate 15 mg cap sprinkle, 25 mg cap sprinkle</i>	\$0-\$14.40 (Tier 3)	TOPAMAX	
<i>valproic acid 250 mg cap</i>	\$0-\$5.80 (Tier 2)	DEPAKENE	
<i>valproic acid 250 mg/5ml soln</i>	\$0-\$5.80 (Tier 2)	DEPAKENE	
Calcium Channel Modifying Agents			
<i>ethosuximide 250 mg cap</i>	\$0-\$14.40 (Tier 3)	ZARONTIN	
<i>ethosuximide 250 mg/5ml soln</i>	\$0-\$14.40 (Tier 3)	ZARONTIN	
<i>methsuximide 300 mg cap</i>	\$0-\$14.40 (Tier 4)		
Gamma-aminobutyric Acid (gaba) Modulating Agents			
<i>clobazam 10 mg tab, 20 mg tab</i>	\$0-\$14.40 (Tier 4)	ONFI	QL(60 EA per 30 days)
<i>clobazam 2.5 mg/ml susp</i>	\$0-\$14.40 (Tier 4)	ONFI	QL(480 ML per 30 days)
<i>clonazepam 0.5 mg tab, 1 mg tab</i>	\$0-\$5.80 (Tier 1)	KLONOPIN	QL(90 EA per 30 days)
<i>clonazepam 2 mg tab</i>	\$0-\$5.80 (Tier 1)	KLONOPIN	QL(300 EA per 30 days)
<i>clonazepam 0.125 mg tab disint, 0.25 mg tab disint, 0.5 mg tab disint, 1 mg tab disint</i>	\$0-\$14.40 (Tier 4)	KLONOPIN	QL(90 EA per 30 days)
<i>clonazepam 2 mg tab disint</i>	\$0-\$14.40 (Tier 4)	KLONOPIN	QL(300 EA per 30 days)
DIACOMIT 250 mg cap, 250 mg pckt, 500 mg cap, 500 mg pckt	\$0-\$14.40 (Tier 5)		PA
<i>diazepam 2.5 mg rect gel, 20 mg rect gel</i>	\$0-\$14.40 (Tier 4)	DIASTAT	
<i>diazepam 10 mg rect gel</i>	\$0-\$14.40 (Tier 4)	DIASTAT	QL(5 EA per 30 days)
<i>divalproex sodium 125 mg cap dr sprinkle, 125 mg tab dr, 250 mg tab dr, 500 mg tab dr</i>	\$0-\$5.80 (Tier 2)	DEPAKOTE	
<i>divalproex sodium er 250 mg tab er 24 hr, 500 mg tab er 24 hr</i>	\$0-\$5.80 (Tier 2)	DEPAKOTE ER	
<i>gabapentin 200 mg cap</i>	\$0-\$14.40 (Tier 5)		PA
<i>gabapentin 400 mg cap</i>	\$0-\$5.80 (Tier 1)	NEURONTIN	QL(270 EA per 30 days)
<i>gabapentin 100 mg cap, 300 mg cap</i>	\$0-\$5.80 (Tier 1)	NEURONTIN	QL(360 EA per 30 days)
<i>gabapentin 800 mg tab</i>	\$0-\$5.80 (Tier 2)	NEURONTIN	QL(150 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>gabapentin 600 mg tab</i>	\$0-\$5.80 (Tier 2)	NEURONTIN	QL(180 EA per 30 days)
<i>gabapentin 250 mg/5ml soln</i>	\$0-\$14.40 (Tier 4)	NEURONTIN	QL(2160 ML per 30 days)
<i>phenobarbital 100 mg tab, 15 mg tab, 16.2 mg tab, 30 mg tab, 32.4 mg tab, 60 mg tab, 64.8 mg tab, 97.2 mg tab</i>	\$0-\$14.40 (Tier 4)		
<i>phenobarbital 20 mg/5ml oral elix</i>	\$0-\$14.40 (Tier 4)		
<i>pregabalin 300 mg cap</i>	\$0-\$5.80 (Tier 2)	LYRICA	QL(60 EA per 30 days)
<i>pregabalin 100 mg cap, 150 mg cap, 200 mg cap, 225 mg cap, 25 mg cap, 50 mg cap, 75 mg cap</i>	\$0-\$5.80 (Tier 2)	LYRICA	QL(90 EA per 30 days)
<i>pregabalin 20 mg/ml soln</i>	\$0-\$14.40 (Tier 4)	LYRICA	QL(900 ML per 30 days)
<i>primidone 125 mg tab</i>	\$0-\$5.80 (Tier 2)		
<i>primidone 250 mg tab, 50 mg tab</i>	\$0-\$5.80 (Tier 2)	MYSOLINE	
<i>SYMPAZAN 5 mg oral film</i>	\$0-\$14.40 (Tier 4)		QL(60 EA per 30 days)
<i>SYMPAZAN 10 mg oral film, 20 mg oral film</i>	\$0-\$14.40 (Tier 5)		
<i>tiagabine hcl 12 mg tab, 16 mg tab, 2 mg tab, 4 mg tab</i>	\$0-\$14.40 (Tier 4)	GABITRIL	
<i>VALTOCO 10 MG DOSE 10 mg/0.1ml nasal liq</i>	\$0-\$14.40 (Tier 5)		QL(10 EA per 30 days)
<i>VALTOCO 15 MG DOSE 2 x 7.5 mg/0.1ml Nasal Liquid Therapy Pack</i>	\$0-\$14.40 (Tier 5)		QL(10 EA per 30 days)
<i>VALTOCO 20 MG DOSE 2 x 10 mg/0.1ml Nasal Liquid Therapy Pack</i>	\$0-\$14.40 (Tier 5)		QL(10 EA per 30 days)
<i>VALTOCO 5 MG DOSE 5 mg/0.1ml nasal liq</i>	\$0-\$14.40 (Tier 5)		QL(10 EA per 30 days)
<i>vigabatrin 500 mg pckt</i>	\$0-\$14.40 (Tier 5)	SABRIL	PA
<i>vigabatrin 500 mg tab</i>	\$0-\$14.40 (Tier 5)	SABRIL	PA, QL(180 EA per 30 days)
<i>vigadrone 500 mg pckt</i>	\$0-\$14.40 (Tier 5)	SABRIL	PA
<i>vigadrone 500 mg tab</i>	\$0-\$14.40 (Tier 5)	SABRIL	PA, QL(180 EA per 30 days)
<i>VIGAFYDE 100 mg/ml soln</i>	\$0-\$14.40 (Tier 5)		PA
<i>ZTALMY 50 mg/ml susp</i>	\$0-\$14.40 (Tier 5)		PA
Sodium Channel Agents			
<i>carbamazepine 200 mg tab chew</i>	\$0-\$5.80 (Tier 2)		
<i>carbamazepine 100 mg tab chew</i>	\$0-\$5.80 (Tier 2)	TEGRETOL	
<i>carbamazepine 200 mg tab</i>	\$0-\$14.40 (Tier 3)	TEGRETOL	
<i>carbamazepine 100 mg/5ml susp</i>	\$0-\$14.40 (Tier 3)	TEGRETOL	
<i>carbamazepine er 100 mg cap er 12 hr, 200 mg cap er 12 hr, 300 mg cap er 12 hr</i>	\$0-\$14.40 (Tier 4)	CARBATROL	
<i>carbamazepine er 100 mg tab er 12 hr, 200 mg tab er 12 hr, 400 mg tab er 12 hr</i>	\$0-\$14.40 (Tier 3)	TEGRETOL XR	
<i>DILANTIN 30 mg cap</i>	\$0-\$14.40 (Tier 4)		
<i>eslicarbazepine acetate 400 mg tab</i>	\$0-\$14.40 (Tier 4)		
<i>eslicarbazepine acetate 200 mg tab</i>	\$0-\$14.40 (Tier 4)		QL(30 EA per 30 days)
<i>eslicarbazepine acetate 600 mg tab, 800 mg tab</i>	\$0-\$14.40 (Tier 4)		QL(60 EA per 30 days)
<i>lacosamide 100 mg tab, 150 mg tab, 200 mg tab, 50 mg tab</i>	\$0-\$14.40 (Tier 4)	VIMPAT	
<i>lacosamide 10 mg/ml soln</i>	\$0-\$14.40 (Tier 4)	VIMPAT	
<i>oxcarbazepine 150 mg tab, 300 mg tab, 600 mg tab</i>	\$0-\$5.80 (Tier 2)	TRILEPTAL	
<i>oxcarbazepine 300 mg/5ml susp</i>	\$0-\$14.40 (Tier 4)	TRILEPTAL	

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>phenytek 200 mg cap, 300 mg cap</i>	\$0-\$5.80 (Tier 2)	DILANTIN	
<i>phenytoin 50 mg tab chew</i>	\$0-\$5.80 (Tier 2)	DILANTIN	
<i>phenytoin 125 mg/5ml susp</i>	\$0-\$5.80 (Tier 2)	DILANTIN	
<i>phenytoin sodium extended 100 mg cap</i>	\$0-\$5.80 (Tier 2)	DILANTIN	
<i>rufinamide 200 mg tab</i>	\$0-\$14.40 (Tier 4)	BANZEL	
<i>rufinamide 400 mg tab</i>	\$0-\$14.40 (Tier 5)	BANZEL	
<i>rufinamide 40 mg/ml susp</i>	\$0-\$14.40 (Tier 5)	BANZEL	
XCOPRI 14 x 12.5 MG & 14 x 25 mg tab pack	\$0-\$14.40 (Tier 4)		PA, QL(56 EA per 365 days)
XCOPRI 100 mg tab, 25 mg tab, 50 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
XCOPRI 14 x 150 MG & 14 x200 mg tab pack	\$0-\$14.40 (Tier 5)		PA, QL(56 EA per 28 days)
XCOPRI 14 x 50 MG & 14 x100 mg tab pack	\$0-\$14.40 (Tier 5)		PA, QL(56 EA per 365 days)
XCOPRI 150 mg tab, 200 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(60 EA per 30 days)
XCOPRI (250 MG DAILY DOSE) 100 & 150 mg tab pack	\$0-\$14.40 (Tier 5)		PA, QL(56 EA per 28 days)
XCOPRI (350 MG DAILY DOSE) 150 & 200 mg tab pack	\$0-\$14.40 (Tier 5)		PA
ZONISADE 100 mg/5ml susp	\$0-\$14.40 (Tier 4)		ST
<i>zonisamide 100 mg cap, 25 mg cap, 50 mg cap</i>	\$0-\$5.80 (Tier 2)	ZONEGRAN	
ANTIDEMENTIA AGENTS			
Antidementia Agents, Other			
LEQEMBI IQLIK 360 mg/1.8ml sc soln auto-inj	\$0-\$14.40 (Tier 5)		PA, QL(7.2 ML per 28 days)
LEQEMBI IQLIK (500 MG DOSE) 2 x 250 mg/1.25ml sc soln auto-inj	\$0-\$14.40 (Tier 5)		PA, QL(10 ML per 28 days)
Cholinesterase Inhibitors			
<i>donepezil hcl 10 mg tab, 5 mg tab</i>	\$0-\$5.80 (Tier 1)	ARICEPT	
<i>donepezil hcl 23 mg tab</i>	\$0-\$14.40 (Tier 4)	ARICEPT	
<i>donepezil hcl 10 mg tab disint, 5 mg tab disint</i>	\$0-\$5.80 (Tier 2)	ARICEPT ODT	
<i>galantamine hydrobromide 12 mg tab, 4 mg tab, 8 mg tab</i>	\$0-\$14.40 (Tier 4)	RAZADYNE	
<i>galantamine hydrobromide 4 mg/ml soln</i>	\$0-\$14.40 (Tier 4)	RAZADYNE	
<i>galantamine hydrobromide er 16 mg cap er 24 hr, 24 mg cap er 24 hr, 8 mg cap er 24 hr</i>	\$0-\$14.40 (Tier 4)	RAZADYNE ER	
<i>rivastigmine 13.3 mg/24hr td patch 24hr, 4.6 mg/24hr td patch 24hr, 9.5 mg/24hr td patch 24hr</i>	\$0-\$14.40 (Tier 4)	EXELON	
<i>rivastigmine tartrate 1.5 mg cap, 3 mg cap, 4.5 mg cap, 6 mg cap</i>	\$0-\$14.40 (Tier 4)	EXELON	
N-methyl-d-aspartate (nmda) Receptor Antagonist			
<i>memantine hcl 10 mg tab, 5 mg tab</i>	\$0-\$5.80 (Tier 2)	NAMENDA	
<i>memantine hcl er 14 mg cap er 24 hr, 21 mg cap er 24 hr, 28 mg cap er 24 hr, 7 mg cap er 24 hr</i>	\$0-\$14.40 (Tier 4)	NAMENDA XR	QL(30 EA per 30 days)
ANTIDEPRESSANTS			
Antidepressants, Other			
AUVELITY 45-105 mg tab er	\$0-\$14.40 (Tier 4)		QL(60 EA per 30 days)
<i>bupropion hcl 100 mg tab</i>	\$0-\$5.80 (Tier 2)	WELLBUTRIN	QL(120 EA per 30 days)
<i>bupropion hcl 75 mg tab</i>	\$0-\$5.80 (Tier 2)	WELLBUTRIN	QL(180 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>bupropion hcl er (sr) 150 mg tab er 12 hr, 200 mg tab er 12 hr</i>	\$0-\$5.80 (Tier 2)	WELLBUTRIN SR	QL(60 EA per 30 days)
<i>bupropion hcl er (sr) 100 mg tab er 12 hr</i>	\$0-\$5.80 (Tier 2)	WELLBUTRIN SR	QL(90 EA per 30 days)
<i>bupropion hcl er (xl) 300 mg tab er 24 hr</i>	\$0-\$5.80 (Tier 2)	WELLBUTRIN XL	QL(30 EA per 30 days)
<i>bupropion hcl er (xl) 150 mg tab er 24 hr</i>	\$0-\$5.80 (Tier 2)	WELLBUTRIN XL	QL(90 EA per 30 days)
EXXUA 18.2 mg tab er 24 hr, 36.3 mg tab er 24 hr, 54.5 mg tab er 24 hr, 72.6 mg tab er 24 hr	\$0-\$14.40 (Tier 5)		QL(30 EA per 30 days), ST
EXXUA TITRATION PACK 18.2 mg tab er 24 hr	\$0-\$14.40 (Tier 5)		QL(30 EA per 30 days), ST
<i>mirtazapine 15 mg tab, 30 mg tab, 45 mg tab, 7.5 mg tab</i>	\$0-\$5.80 (Tier 2)	REMERON	
<i>mirtazapine 15 mg tab disint, 30 mg tab disint, 45 mg tab disint</i>	\$0-\$14.40 (Tier 3)	REMERON	
ZURZUVAE 30 mg cap	\$0-\$14.40 (Tier 5)		PA, QL(14 EA per 14 days)
ZURZUVAE 20 mg cap, 25 mg cap	\$0-\$14.40 (Tier 5)		PA, QL(28 EA per 14 days)
Monoamine Oxidase Inhibitors			
EMSAM 12 mg/24hr td patch 24hr, 6 mg/24hr td patch 24hr, 9 mg/24hr td patch 24hr	\$0-\$14.40 (Tier 5)		QL(30 EA per 30 days), ST
MARPLAN 10 mg tab	\$0-\$14.40 (Tier 4)		
<i>phenelzine sulfate 15 mg tab</i>	\$0-\$14.40 (Tier 3)	NARDIL	
<i>tranylcypromine sulfate 10 mg tab</i>	\$0-\$14.40 (Tier 4)	PARNATE	
Ssris/snrirs (selective Serotonin Reuptake Inhibitors/serotonin And Norepinephrine Reuptake Inhibitor)			
<i>citalopram hydrobromide 10 mg tab, 20 mg tab, 40 mg tab</i>	\$0-\$5.80 (Tier 1)	CELEXA	QL(30 EA per 30 days)
<i>citalopram hydrobromide 10 mg/5ml soln</i>	\$0-\$14.40 (Tier 4)	CELEXA	QL(600 ML per 30 days)
<i>desvenlafaxine succinate er 25 mg tab er 24 hr, 50 mg tab er 24 hr</i>	\$0-\$5.80 (Tier 2)	PRISTIQ	QL(30 EA per 30 days)
<i>desvenlafaxine succinate er 100 mg tab er 24 hr</i>	\$0-\$5.80 (Tier 2)	PRISTIQ	QL(120 EA per 30 days)
DRIZALMA SPRINKLE 20 mg cap dr sprinkle, 60 mg cap dr sprinkle	\$0-\$14.40 (Tier 4)		QL(60 EA per 30 days)
DRIZALMA SPRINKLE 30 mg cap dr sprinkle, 40 mg cap dr sprinkle	\$0-\$14.40 (Tier 4)		QL(90 EA per 30 days)
<i>duloxetine hcl 120 mg cap dr prt, 80 mg cap dr prt, 90 mg cap dr prt</i>	\$0-\$5.80 (Tier 2)		QL(30 EA per 30 days)
<i>duloxetine hcl 20 mg cap dr prt, 60 mg cap dr prt</i>	\$0-\$5.80 (Tier 2)	CYMBALTA	QL(60 EA per 30 days)
<i>duloxetine hcl 30 mg cap dr prt</i>	\$0-\$5.80 (Tier 2)	CYMBALTA	QL(90 EA per 30 days)
<i>escitalopram oxalate 10 mg tab, 20 mg tab, 5 mg tab</i>	\$0-\$5.80 (Tier 1)	LEXAPRO	
<i>escitalopram oxalate 5 mg/5ml soln</i>	\$0-\$14.40 (Tier 3)	LEXAPRO	
FETZIMA 120 mg cap er 24 hr, 20 mg cap er 24 hr, 40 mg cap er 24 hr, 80 mg cap er 24 hr	\$0-\$14.40 (Tier 4)		QL(30 EA per 30 days), ST
FETZIMA TITRATION 20 & 40 mg cap er 24 hr pack	\$0-\$14.40 (Tier 4)		QL(56 EA per 365 days), ST
<i>fluoxetine hcl 10 mg cap, 20 mg cap, 40 mg cap</i>	\$0-\$5.80 (Tier 1)	PROZAC	
<i>fluoxetine hcl 20 mg/5ml soln</i>	\$0-\$14.40 (Tier 4)	PROZAC	
<i>fluvoxamine maleate 100 mg tab, 25 mg tab, 50 mg tab</i>	\$0-\$5.80 (Tier 2)	LUVOX	
<i>nefazodone hcl 100 mg tab, 150 mg tab, 200 mg tab, 250 mg tab, 50 mg tab</i>	\$0-\$14.40 (Tier 4)	SERZONE	
<i>paroxetine hcl 10 mg tab, 20 mg tab, 30 mg tab, 40 mg tab</i>	\$0-\$5.80 (Tier 2)	PAXIL	

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>paroxetine hcl 10 mg/5ml susp</i>	\$0-\$14.40 (Tier 4)	PAXIL	
<i>RALDESY 10 mg/ml soln</i>	\$0-\$14.40 (Tier 4)		
<i>sertraline hcl 100 mg tab, 25 mg tab, 50 mg tab</i>	\$0-\$5.80 (Tier 1)	ZOLOFT	
<i>sertraline hcl 20 mg/ml oral conc</i>	\$0-\$14.40 (Tier 3)	ZOLOFT	
<i>trazodone hcl 100 mg tab, 150 mg tab, 50 mg tab</i>	\$0-\$5.80 (Tier 1)	DESYREL	
<i>TRINTELLIX 10 mg tab, 20 mg tab, 5 mg tab</i>	\$0-\$14.40 (Tier 4)		QL(30 EA per 30 days)
<i>venlafaxine hcl 100 mg tab, 25 mg tab, 37.5 mg tab, 50 mg tab, 75 mg tab</i>	\$0-\$5.80 (Tier 2)	EFFEXOR	
<i>venlafaxine hcl er 150 mg cap er 24 hr, 37.5 mg cap er 24 hr, 75 mg cap er 24 hr</i>	\$0-\$5.80 (Tier 2)	EFFEXOR XR	
<i>vilazodone hcl 10 mg tab, 20 mg tab, 40 mg tab</i>	\$0-\$14.40 (Tier 4)	VIIBRYD	QL(30 EA per 30 days)
Tricyclics			
<i>amitriptyline hcl 10 mg tab, 100 mg tab, 150 mg tab, 25 mg tab, 50 mg tab, 75 mg tab</i>	\$0-\$14.40 (Tier 3)	ELAVIL	
<i>amoxapine 100 mg tab, 150 mg tab, 25 mg tab, 50 mg tab</i>	\$0-\$14.40 (Tier 4)	ASENDIN	
<i>clomipramine hcl 25 mg cap, 50 mg cap, 75 mg cap</i>	\$0-\$14.40 (Tier 4)	ANAFRANIL	
<i>desipramine hcl 10 mg tab, 100 mg tab, 150 mg tab, 25 mg tab, 50 mg tab, 75 mg tab</i>	\$0-\$14.40 (Tier 4)	NORPRAMIN	
<i>doxepin hcl 10 mg cap, 100 mg cap, 150 mg cap, 25 mg cap, 50 mg cap, 75 mg cap</i>	\$0-\$14.40 (Tier 3)	SINEQUAN	
<i>doxepin hcl 10 mg/ml oral conc</i>	\$0-\$14.40 (Tier 4)	SINEQUAN	
<i>imipramine hcl 10 mg tab, 25 mg tab, 50 mg tab</i>	\$0-\$14.40 (Tier 4)	TOFRANIL	
<i>nortriptyline hcl 10 mg cap, 25 mg cap, 50 mg cap, 75 mg cap</i>	\$0-\$5.80 (Tier 2)	PAMELOR	
<i>nortriptyline hcl 10 mg/5ml soln</i>	\$0-\$14.40 (Tier 4)	PAMELOR	
<i>protriptyline hcl 10 mg tab, 5 mg tab</i>	\$0-\$14.40 (Tier 4)	VIVACTIL	
<i>trimipramine maleate 100 mg cap, 25 mg cap, 50 mg cap</i>	\$0-\$14.40 (Tier 4)	SURMONTIL	
ANTIEMETICS			
Antiemetics, Other			
<i>compro 25 mg rect supp</i>	\$0-\$14.40 (Tier 4)	COMPRO	
<i>meclizine hcl 12.5 mg tab, 25 mg tab</i>	\$0-\$14.40 (Tier 4)	ANTIVERT	
<i>prochlorperazine 25 mg rect supp</i>	\$0-\$14.40 (Tier 4)	COMPRO	
<i>prochlorperazine maleate 10 mg tab, 5 mg tab</i>	\$0-\$5.80 (Tier 2)	COMPAZINE	
<i>promethazine hcl 12.5 mg tab, 25 mg tab, 50 mg tab</i>	\$0-\$5.80 (Tier 2)	PHENERGAN	PA
<i>promethazine hcl 6.25 mg/5ml soln</i>	\$0-\$14.40 (Tier 3)	PHENERGAN	PA
<i>promethazine hcl 12.5 mg rect supp, 25 mg rect supp</i>	\$0-\$14.40 (Tier 4)	PHENERGAN	PA
<i>promethegan 25 mg rect supp</i>	\$0-\$14.40 (Tier 4)	PHENERGAN	PA
<i>scopolamine 1 mg/3days td patch 72 hr</i>	\$0-\$14.40 (Tier 4)	TRANSDERM-SCOP	
Emetogenic Therapy Adjuncts			
<i>aprepitant 80 & 125 mg cap pack</i>	\$0-\$14.40 (Tier 4)		B/D, QL(6 EA per 30 days)
<i>aprepitant 40 mg cap</i>	\$0-\$14.40 (Tier 4)	EMEND	B/D, QL(1 EA per 30 days)
<i>aprepitant 80 mg cap</i>	\$0-\$14.40 (Tier 4)	EMEND	B/D, QL(8 EA per 30 days)
<i>aprepitant 125 mg cap</i>	\$0-\$14.40 (Tier 5)	EMEND	B/D, QL(2 EA per 30 days)
<i>dronabinol 10 mg cap, 2.5 mg cap, 5 mg cap</i>	\$0-\$14.40 (Tier 4)	MARINOL	B/D,QL(60 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>ondansetron 4 mg tab disint, 8 mg tab disint</i>	\$0-\$5.80 (Tier 2)	ZOFRAN ODT	B/D
<i>ondansetron hcl 4 mg tab, 8 mg tab</i>	\$0-\$5.80 (Tier 1)	ZOFRAN	B/D
<i>ondansetron hcl 4 mg/5ml soln</i>	\$0-\$14.40 (Tier 4)	ZOFRAN	B/D, QL(450 ML per 30 days)
ANTIFUNGALS			
Antifungals			
<i>amphotericin b 50 mg iv soln</i>	\$0-\$14.40 (Tier 4)	FUNGIZONE	B/D
<i>amphotericin b liposome 50 mg iv susp</i>	\$0-\$14.40 (Tier 5)	AMBISOME	B/D
<i>caspofungin acetate 50 mg iv soln, 70 mg iv soln</i>	\$0-\$14.40 (Tier 4)	CANCIDAS	
<i>clotrimazole 1 % Topical Cream</i>	\$0-\$5.80 (Tier 2)	LOTRIMIN	QL(90 GM per 30 days)
<i>clotrimazole 1 % Topical Solution</i>	\$0-\$5.80 (Tier 2)	MYCELEX	QL(60 ML per 30 days)
<i>clotrimazole 10 mg m/t troche</i>	\$0-\$14.40 (Tier 3)	MYCELEX	
<i>CRESEMBA 186 mg cap</i>	\$0-\$14.40 (Tier 5)		PA, QL(70 EA per 30 days)
<i>CRESEMBA 74.5 mg cap</i>	\$0-\$14.40 (Tier 5)		PA, QL(175 EA per 30 days)
<i>econazole nitrate 1 % Topical Cream</i>	\$0-\$5.80 (Tier 2)	SPECTAZOLE	QL(85 GM per 30 days)
<i>fluconazole 100 mg tab, 150 mg tab, 200 mg tab, 50 mg tab</i>	\$0-\$5.80 (Tier 2)	DIFLUCAN	
<i>fluconazole 10 mg/ml susp, 40 mg/ml susp</i>	\$0-\$14.40 (Tier 3)	DIFLUCAN	
<i>fluconazole in sodium chloride 200-0.9 mg/100ml-% iv soln, 400-0.9 mg/200ml-% iv soln</i>	\$0-\$14.40 (Tier 3)	DIFLUCAN	
<i>flucytosine 250 mg cap, 500 mg cap</i>	\$0-\$14.40 (Tier 5)	ANCOBON	
<i>griseofulvin microsize 500 mg tab</i>	\$0-\$14.40 (Tier 4)	GRIFULVIN V	
<i>griseofulvin microsize 125 mg/5ml susp</i>	\$0-\$14.40 (Tier 4)	GRIFULVIN V	
<i>griseofulvin ultramicrosize 125 mg tab, 250 mg tab</i>	\$0-\$14.40 (Tier 4)	GRIS-PEG	
<i>itraconazole 100 mg cap</i>	\$0-\$14.40 (Tier 4)	SPORANOX	PA
<i>JUBLIA 10 % Topical Solution</i>	\$0-\$14.40 (Tier 5)		
<i>ketoconazole 200 mg tab</i>	\$0-\$5.80 (Tier 2)	NIZORAL	
<i>ketoconazole 2 % Topical Cream</i>	\$0-\$5.80 (Tier 2)	NIZORAL	QL(90 GM per 30 days)
<i>ketoconazole 2 % Topical Shampoo</i>	\$0-\$5.80 (Tier 2)	NIZORAL	QL(120 ML per 30 days)
<i>miconazole sodium 100 mg iv soln, 50 mg iv soln</i>	\$0-\$14.40 (Tier 4)	MYCAMINE	
<i>nyamyc 100000 unit/gm Topical Powder</i>	\$0-\$5.80 (Tier 2)	MYCOSTATIN	QL(120 GM per 30 days)
<i>nystatin 100000 unit/ml m/t susp</i>	\$0-\$5.80 (Tier 2)	MYCOSTATIN	
<i>nystatin 100000 unit/gm Topical Cream, 100000 unit/gm Topical Ointment</i>	\$0-\$5.80 (Tier 2)	MYCOSTATIN	QL(60 GM per 30 days)
<i>nystatin 100000 unit/gm Topical Powder</i>	\$0-\$5.80 (Tier 2)	MYCOSTATIN	QL(120 GM per 30 days)
<i>nystatin 500000 unit tab</i>	\$0-\$14.40 (Tier 3)	MYCOSTATIN	
<i>nystop 100000 unit/gm Topical Powder</i>	\$0-\$5.80 (Tier 2)	MYCOSTATIN	QL(120 GM per 30 days)
<i>posaconazole 40 mg/ml susp</i>	\$0-\$14.40 (Tier 5)		PA, QL(600 ML per 30 days)
<i>posaconazole 100 mg tab dr</i>	\$0-\$14.40 (Tier 5)	NOXAFIL	PA, QL(93 EA per 30 days)
<i>terbinafine hcl 250 mg tab</i>	\$0-\$5.80 (Tier 2)	LAMISIL	QL(84 EA per 180 days)
<i>terconazole 0.4 % vag crm, 0.8 % vag crm</i>	\$0-\$14.40 (Tier 3)	TERAZOL	
<i>voriconazole 200 mg tab</i>	\$0-\$14.40 (Tier 4)	VFEND	QL(120 EA per 30 days)
<i>voriconazole 50 mg tab</i>	\$0-\$14.40 (Tier 4)	VFEND	QL(480 EA per 30 days)
<i>voriconazole 200 mg iv soln</i>	\$0-\$14.40 (Tier 4)	VFEND	PA
<i>voriconazole 40 mg/ml susp</i>	\$0-\$14.40 (Tier 5)	VFEND	QL(600 ML per 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
ANTIGOUT AGENTS			
Antigout Agents			
<i>allopurinol 100 mg tab, 300 mg tab</i>	\$0-\$5.80 (Tier 1)	ZYLOPRIM	
<i>colchicine 0.6 mg tab</i>	\$0-\$14.40 (Tier 3)	COLCRYS	
<i>colchicine-probenecid 0.5-500 mg tab</i>	\$0-\$5.80 (Tier 2)	COLBENEMID	
<i>febuxostat 40 mg tab, 80 mg tab</i>	\$0-\$14.40 (Tier 4)	ULORIC	
<i>probenecid 500 mg tab</i>	\$0-\$5.80 (Tier 2)	BENEMID	
ANTIMIGRAINE AGENTS			
Calcitonin Gene-related Peptide (cgrp) Receptor Antagonists			
AIMOVIG 140 mg/ml sc soln auto-inj	\$0-\$14.40 (Tier 3)		PA, QL(1 ML per 28 days)
AIMOVIG 70 mg/ml sc soln auto-inj	\$0-\$14.40 (Tier 3)		PA, QL(2 ML per 28 days)
EMGALITY 120 mg/ml sc soln auto-inj, 120 mg/ml sc soln pfs	\$0-\$14.40 (Tier 3)		PA, QL(2 ML per 28 days)
EMGALITY (300 MG DOSE) 100 mg/ml sc soln pfs	\$0-\$14.40 (Tier 5)		PA, QL(3 ML per 28 days)
NURTEC 75 mg tab disint	\$0-\$14.40 (Tier 5)		PA, QL(18 EA per 30 days)
UBRELVY 100 mg tab, 50 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(16 EA per 30 days)
Ergot Alkaloids			
<i>dihydroergotamine mesylate 4 mg/ml nasal soln</i>	\$0-\$14.40 (Tier 4)	MIGRANAL	PA, QL(8 ML per 30 days)
<i>ergotamine-caffeine 1-100 mg tab</i>	\$0-\$14.40 (Tier 3)	CAFERGOT	QL(40 EA per 28 days)
Prophylactic			
<i>timolol maleate 10 mg tab, 20 mg tab, 5 mg tab</i>	\$0-\$14.40 (Tier 3)	BLOCADREN	
Serotonin (5-HT) Receptor Agonist			
<i>naratriptan hcl 1 mg tab, 2.5 mg tab</i>	\$0-\$14.40 (Tier 3)	AMERGE	QL(9 EA per 30 days)
<i>rizatriptan benzoate 10 mg tab, 5 mg tab</i>	\$0-\$5.80 (Tier 2)	MAXALT	QL(18 EA per 30 days)
<i>rizatriptan benzoate 10 mg tab disint, 5 mg tab disint</i>	\$0-\$14.40 (Tier 3)	MAXALT MLT	QL(18 EA per 30 days)
<i>sumatriptan 20 mg/act nasal soln, 5 mg/act nasal soln</i>	\$0-\$14.40 (Tier 4)	IMITREX	QL(12 EA per 30 days)
<i>sumatriptan succinate 100 mg tab, 25 mg tab, 50 mg tab</i>	\$0-\$5.80 (Tier 2)	IMITREX	QL(9 EA per 30 days)
<i>sumatriptan succinate 6 mg/0.5ml sc soln</i>	\$0-\$14.40 (Tier 4)	IMITREX	QL(5 ML per 30 days)
<i>sumatriptan succinate 6 mg/0.5ml sc soln auto-inj</i>	\$0-\$14.40 (Tier 4)	IMITREX STATDOSE	QL(5 ML per 30 days)
<i>zolmitriptan 2.5 mg tab, 5 mg tab</i>	\$0-\$14.40 (Tier 3)	ZOMIG	QL(12 EA per 30 days)
ANTIMYASTHENIC AGENTS			
Parasympathomimetics			
<i>pyridostigmine bromide 60 mg tab</i>	\$0-\$5.80 (Tier 2)	MESTINON	
ANTIMYCOBACTERIALS			
Antimycobacterials, Other			
<i>dapsone 100 mg tab, 25 mg tab</i>	\$0-\$14.40 (Tier 3)		
<i>pretomanid 200 mg tab</i>	\$0-\$14.40 (Tier 4)		
<i>rifabutin 150 mg cap</i>	\$0-\$14.40 (Tier 4)	MYCOBUTIN	
Antituberculars			
<i>cycloserine 250 mg cap</i>	\$0-\$14.40 (Tier 5)		
<i>ethambutol hcl 100 mg tab, 400 mg tab</i>	\$0-\$5.80 (Tier 2)	MYAMBUTOL	
<i>isoniazid 100 mg tab, 300 mg tab</i>	\$0-\$5.80 (Tier 1)		
<i>isoniazid 50 mg/5ml syr</i>	\$0-\$14.40 (Tier 4)		
<i>pyrazinamide 500 mg tab</i>	\$0-\$14.40 (Tier 3)		
<i>rifampin 150 mg cap, 300 mg cap</i>	\$0-\$14.40 (Tier 3)	RIFADIN	

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>rifampin 600 mg iv soln</i>	\$0-\$14.40 (Tier 4)	RIFADIN	
<i>rifapentine 150 mg tab</i>	\$0-\$14.40 (Tier 4)		
SIRTURO 100 mg tab, 20 mg tab	\$0-\$14.40 (Tier 5)		
ANTINEOPLASTICS			
Alkylating Agents			
<i>cyclophosphamide 25 mg cap, 50 mg cap</i>	\$0-\$14.40 (Tier 3)		B/D
LEUKERAN 2 mg tab	\$0-\$14.40 (Tier 5)		
<i>lomustine 10 mg cap, 100 mg cap, 40 mg cap</i>	\$0-\$14.40 (Tier 4)		
MATULANE 50 mg cap	\$0-\$14.40 (Tier 5)		
VALCHLOR 0.016 % Topical Gel	\$0-\$14.40 (Tier 5)		PA, QL(60 GM per 30 days)
Antiandrogens			
<i>abiraterone acetate 250 mg tab</i>	\$0-\$14.40 (Tier 4)	ZYTIGA	PA
<i>abiraterone acetate 500 mg tab</i>	\$0-\$14.40 (Tier 5)	ZYTIGA	PA
<i>abirtega 250 mg tab</i>	\$0-\$14.40 (Tier 4)	ZYTIGA	PA
<i>bicalutamide 50 mg tab</i>	\$0-\$5.80 (Tier 2)	CASODEX	
ERLEADA 240 mg tab, 60 mg tab	\$0-\$14.40 (Tier 5)		PA
EULEXIN 125 mg cap	\$0-\$14.40 (Tier 4)		
<i>nilutamide 150 mg tab</i>	\$0-\$14.40 (Tier 5)	NILANDRON	
NUBEQA 300 mg tab	\$0-\$14.40 (Tier 5)		PA
XTANDI 40 mg cap, 40 mg tab, 80 mg tab	\$0-\$14.40 (Tier 5)		PA
YONSA 125 mg tab	\$0-\$14.40 (Tier 5)		PA
Antiangiogenic Agents			
<i>lenalidomide 10 mg cap, 15 mg cap, 2.5 mg cap, 20 mg cap, 25 mg cap, 5 mg cap</i>	\$0-\$14.40 (Tier 5)	REVLIMID	PA, QL(30 EA per 30 days)
<i>pomalidomide 1 mg cap, 2 mg cap, 3 mg cap, 4 mg cap</i>	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
POMALYST 1 mg cap, 2 mg cap, 3 mg cap, 4 mg cap	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
THALOMID 50 mg cap	\$0-\$14.40 (Tier 5)		PA
THALOMID 100 mg cap	\$0-\$14.40 (Tier 5)		PA, QL(112 EA per 28 days)
Antiestrogens/modifiers			
INLURIYO 200 mg tab	\$0-\$14.40 (Tier 5)		PA
ORSERDU 345 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
ORSERDU 86 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(90 EA per 30 days)
SOLTAMOX 10 mg/5ml soln	\$0-\$14.40 (Tier 5)		
<i>tamoxifen citrate 10 mg tab, 20 mg tab</i>	\$0-\$5.80 (Tier 2)	NOLVADEX	
<i>toremifene citrate 60 mg tab</i>	\$0-\$14.40 (Tier 4)	FARESTON	
Antimetabolites			
DROXIA 200 mg cap, 300 mg cap, 400 mg cap	\$0-\$14.40 (Tier 3)		
<i>hydroxyurea 500 mg cap</i>	\$0-\$5.80 (Tier 2)	HYDREA	
<i>mercaptopurine 2000 mg/100ml susp</i>	\$0-\$14.40 (Tier 5)		
<i>mercaptopurine 50 mg tab</i>	\$0-\$14.40 (Tier 3)	PURINETHOL	
TABLOID 40 mg tab	\$0-\$14.40 (Tier 5)		
Antineoplastics, Other			
AKEEGA 100-500 mg tab, 50-500 mg tab	\$0-\$14.40 (Tier 5)		PA
IBRANCE 100 mg tab, 125 mg tab, 75 mg tab	\$0-\$14.40 (Tier 5)		PA
INREBIC 100 mg cap	\$0-\$14.40 (Tier 5)		PA
ITOVEBI 9 mg tab	\$0-\$14.40 (Tier 5)		PA
ITOVEBI 3 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(60 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
IWILFIN 192 mg tab	\$0-\$14.40 (Tier 5)		PA
KOMZIFTI 200 mg cap	\$0-\$14.40 (Tier 5)		PA
LAZCLUZE 240 mg tab	\$0-\$14.40 (Tier 5)		PA
LAZCLUZE 80 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(60 EA per 30 days)
<i>leucovorin calcium 10 mg tab, 15 mg tab, 25 mg tab, 5 mg tab</i>	\$0-\$14.40 (Tier 3)		
LONSURF 15-6.14 mg tab, 20-8.19 mg tab	\$0-\$14.40 (Tier 5)		PA
LYSODREN 500 mg tab	\$0-\$14.40 (Tier 5)		
MODEYSO 125 mg cap	\$0-\$14.40 (Tier 5)		PA
OGSIVEO 100 mg tab	\$0-\$14.40 (Tier 5)		PA
OGSIVEO 150 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(60 EA per 30 days)
OJEMDA 100 mg tab	\$0-\$14.40 (Tier 5)		PA
OJEMDA 25 mg/ml susp	\$0-\$14.40 (Tier 5)		PA
ONUREG 200 mg tab, 300 mg tab	\$0-\$14.40 (Tier 5)		PA
REVUFORJ 110 mg tab, 160 mg tab, 25 mg tab	\$0-\$14.40 (Tier 5)		PA
VONJO 100 mg cap	\$0-\$14.40 (Tier 5)		PA
ZENBEXUS 0.75 mg cap, 1 mg cap	\$0-\$14.40 (Tier 5)		PA
ZOLINZA 100 mg cap	\$0-\$14.40 (Tier 5)		PA
Aromatase Inhibitors, 3rd Generation			
<i>anastrozole 1 mg tab</i>	\$0-\$5.80 (Tier 1)	ARIMIDEX	
<i>exemestane 25 mg tab</i>	\$0-\$14.40 (Tier 4)	AROMASIN	
<i>letrozole 2.5 mg tab</i>	\$0-\$5.80 (Tier 2)	FEMARA	
Enzyme Inhibitors			
AVMAPKI FAKZYNJA CO-PACK 0.8 & 200 mg pack	\$0-\$14.40 (Tier 5)		PA
Molecular Target Inhibitors			
ALECENSA 150 mg cap	\$0-\$14.40 (Tier 5)		PA
ALUNBRIG 180 mg tab, 90 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
ALUNBRIG 90 & 180 mg tab pack	\$0-\$14.40 (Tier 5)		PA, QL(60 EA per 365 days)
ALUNBRIG 30 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(120 EA per 30 days)
AUGTYRO 160 mg cap, 40 mg cap	\$0-\$14.40 (Tier 5)		PA
AYVAKIT 100 mg tab, 200 mg tab, 25 mg tab, 300 mg tab, 50 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
BALVERSA 3 mg tab, 4 mg tab, 5 mg tab	\$0-\$14.40 (Tier 5)		PA
BOSULIF 100 mg cap, 100 mg tab, 50 mg cap, 500 mg tab	\$0-\$14.40 (Tier 5)		PA
<i>bosutinib 400 mg tab</i>	\$0-\$14.40 (Tier 5)		PA
BRAFTOVI 75 mg cap	\$0-\$14.40 (Tier 5)		PA
BRUKINSA 160 mg tab	\$0-\$14.40 (Tier 5)		PA
CABOMETYX 20 mg tab, 60 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
CABOMETYX 40 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(60 EA per 30 days)
CALQUENCE 100 mg tab	\$0-\$14.40 (Tier 5)		PA
CAPRELSA 300 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
CAPRELSA 100 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(60 EA per 30 days)
COMETRIQ (100 MG DAILY DOSE) 80 & 20 mg oral kit	\$0-\$14.40 (Tier 5)		PA
COMETRIQ (140 MG DAILY DOSE) 3 x 20 MG & 80 mg oral kit	\$0-\$14.40 (Tier 5)		PA

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
COMETRIQ (60 MG DAILY DOSE) 20 mg oral kit	\$0-\$14.40 (Tier 5)		PA
COPIKTRA 15 mg cap, 25 mg cap	\$0-\$14.40 (Tier 5)		PA
COTELLIC 20 mg tab	\$0-\$14.40 (Tier 5)		PA
DANZITEN 71 mg tab, 95 mg tab	\$0-\$14.40 (Tier 5)		PA
<i>dasatinib 100 mg tab, 140 mg tab, 70 mg tab</i>	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
<i>dasatinib 80 mg tab</i>	\$0-\$14.40 (Tier 5)		PA, QL(60 EA per 30 days)
<i>dasatinib 20 mg tab, 50 mg tab</i>	\$0-\$14.40 (Tier 5)		PA, QL(90 EA per 30 days)
DAURISMO 100 mg tab, 25 mg tab	\$0-\$14.40 (Tier 5)		PA
ENSACOVE 100 mg cap, 25 mg cap	\$0-\$14.40 (Tier 5)		PA
ERIVEDGE 150 mg cap	\$0-\$14.40 (Tier 5)		PA
<i>erlotinib hcl 100 mg tab, 150 mg tab, 25 mg tab</i>	\$0-\$14.40 (Tier 4)	TARCEVA	PA
<i>everolimus 10 mg tab, 2.5 mg tab, 5 mg tab, 7.5 mg tab</i>	\$0-\$14.40 (Tier 5)	AFINITOR	PA, QL(30 EA per 30 days)
<i>everolimus 2 mg tab sol, 3 mg tab sol, 5 mg tab sol</i>	\$0-\$14.40 (Tier 5)	AFINITOR DISPERZ	PA
FOTIVDA 0.89 mg cap, 1.34 mg cap	\$0-\$14.40 (Tier 5)		PA
FRUZAQLA 5 mg cap	\$0-\$14.40 (Tier 5)		PA, QL(21 EA per 28 days)
FRUZAQLA 1 mg cap	\$0-\$14.40 (Tier 5)		PA, QL(84 EA per 28 days)
GAVRETO 100 mg cap	\$0-\$14.40 (Tier 5)		PA
<i>gefitinib 250 mg tab</i>	\$0-\$14.40 (Tier 5)	IRESSA	PA
GILOTRIF 20 mg tab, 30 mg tab, 40 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
GOMEKLI 1 mg cap, 1 mg tab sol, 2 mg cap	\$0-\$14.40 (Tier 5)		PA
HERNEXEOS 60 mg tab	\$0-\$14.40 (Tier 5)		PA
HYRNUO 10 mg tab	\$0-\$14.40 (Tier 5)		PA
IBRANCE 125 mg cap	\$0-\$14.40 (Tier 5)		PA
IBTROZI 200 mg cap	\$0-\$14.40 (Tier 5)		PA
ICLUSIG 10 mg tab, 15 mg tab, 30 mg tab, 45 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
IDHIFA 100 mg tab, 50 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
<i>imatinib mesylate 100 mg tab</i>	\$0-\$14.40 (Tier 3)	GLEEVEC	PA
<i>imatinib mesylate 400 mg tab</i>	\$0-\$14.40 (Tier 4)	GLEEVEC	PA
IMBRUVICA 140 mg tab, 280 mg tab, 420 mg tab, 70 mg cap	\$0-\$14.40 (Tier 5)		PA, QL(28 EA per 28 days)
IMBRUVICA 140 mg cap	\$0-\$14.40 (Tier 5)		PA, QL(120 EA per 30 days)
IMBRUVICA 70 mg/ml susp	\$0-\$14.40 (Tier 5)		PA, QL(240 ML per 30 days)
<i>imkeldi 80 mg/ml soln</i>	\$0-\$14.40 (Tier 5)		PA
INLYTA 5 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(120 EA per 30 days)
INLYTA 1 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(180 EA per 30 days)
INQOVI 35-100 mg tab	\$0-\$14.40 (Tier 5)		PA
JAKAFI 10 mg tab, 15 mg tab, 20 mg tab, 25 mg tab, 5 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(60 EA per 30 days)
JAKAFI XR 11 mg tab er 24 hr, 22 mg tab er 24 hr, 33 mg tab er 24 hr, 44 mg tab er 24 hr, 55 mg tab er 24 hr	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
JAYPIRCA 50 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
JAYPIRCA 100 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(90 EA per 30 days)
JIDEYTRO 100 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
JIDEYTRO 25 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(90 EA per 30 days)
KISQALI (200 MG DOSE) 200 mg tab pack	\$0-\$14.40 (Tier 5)		PA, QL(21 EA per 21 days)
KISQALI (400 MG DOSE) 200 mg tab pack	\$0-\$14.40 (Tier 5)		PA, QL(42 EA per 21 days)
KISQALI (600 MG DOSE) 200 mg tab pack	\$0-\$14.40 (Tier 5)		PA, QL(63 EA per 21 days)
KOSELUGO 10 mg cap, 25 mg cap, 5 mg cap sprinkle, 7.5 mg cap sprinkle	\$0-\$14.40 (Tier 5)		PA
KRAZATI 200 mg tab	\$0-\$14.40 (Tier 5)		PA
<i>lapatinib ditosylate 250 mg tab</i>	\$0-\$14.40 (Tier 5)	TYKERB	PA
LENVIMA (10 MG DAILY DOSE) 10 mg cap pack	\$0-\$14.40 (Tier 5)		PA
LENVIMA (12 MG DAILY DOSE) 3 x 4 mg cap pack	\$0-\$14.40 (Tier 5)		PA
LENVIMA (14 MG DAILY DOSE) 10 & 4 mg cap pack	\$0-\$14.40 (Tier 5)		PA
LENVIMA (18 MG DAILY DOSE) 10 MG & 2 x 4 mg cap pack	\$0-\$14.40 (Tier 5)		PA
LENVIMA (20 MG DAILY DOSE) 2 x 10 mg cap pack	\$0-\$14.40 (Tier 5)		PA
LENVIMA (24 MG DAILY DOSE) 2 x 10 MG & 4 mg cap pack	\$0-\$14.40 (Tier 5)		PA
LENVIMA (4 MG DAILY DOSE) 4 mg cap pack	\$0-\$14.40 (Tier 5)		PA
LENVIMA (8 MG DAILY DOSE) 2 x 4 mg cap pack	\$0-\$14.40 (Tier 5)		PA
LIFYORLI (125 MG DOSE) 1 x 25 MG & 1 x 100 mg cap pack	\$0-\$14.40 (Tier 5)		PA
LIFYORLI (150 MG DOSE) 2 x 25 MG & 1 x 100 mg cap pack	\$0-\$14.40 (Tier 5)		PA
LORBRENA 100 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
LORBRENA 25 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(90 EA per 30 days)
LUMAKRAS 120 mg tab, 240 mg tab, 320 mg tab	\$0-\$14.40 (Tier 5)		PA
LYNPARZA 100 mg tab, 150 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(120 EA per 30 days)
LYTGOBI (12 MG DAILY DOSE) 4 mg tab pack	\$0-\$14.40 (Tier 5)		PA
LYTGOBI (16 MG DAILY DOSE) 4 mg tab pack	\$0-\$14.40 (Tier 5)		PA
LYTGOBI (20 MG DAILY DOSE) 4 mg tab pack	\$0-\$14.40 (Tier 5)		PA
MEKINIST 0.05 mg/ml soln	\$0-\$14.40 (Tier 5)		PA
MEKINIST 2 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
MEKINIST 0.5 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(90 EA per 30 days)
MEKTOVI 15 mg tab	\$0-\$14.40 (Tier 5)		PA
NERLYNX 40 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(180 EA per 30 days)
<i>nilotinib hcl 200 mg cap</i>	\$0-\$14.40 (Tier 5)		PA, QL(112 EA per 28 days)
<i>nilotinib hcl 150 mg cap</i>	\$0-\$14.40 (Tier 5)		PA, QL(140 EA per 28 days)
<i>nilotinib hcl 50 mg cap</i>	\$0-\$14.40 (Tier 5)		PA, QL(420 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
NINLARO 2.3 mg cap, 3 mg cap, 4 mg cap	\$0-\$14.40 (Tier 5)		PA
ODOMZO 200 mg cap	\$0-\$14.40 (Tier 5)		PA
OJJAARA 100 mg tab, 150 mg tab, 200 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
<i>pazopanib hcl 200 mg tab</i>	\$0-\$14.40 (Tier 5)		PA
PEMAZYRE 13.5 mg tab, 4.5 mg tab, 9 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
PIQRAY (200 MG DAILY DOSE) 200 mg tab pack	\$0-\$14.40 (Tier 5)		PA
PIQRAY (250 MG DAILY DOSE) 200 & 50 mg tab pack	\$0-\$14.40 (Tier 5)		PA
PIQRAY (300 MG DAILY DOSE) 2 x 150 mg tab pack	\$0-\$14.40 (Tier 5)		PA
QINLOCK 50 mg tab	\$0-\$14.40 (Tier 5)		PA
RETEVMO 120 mg tab, 160 mg tab, 80 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(60 EA per 30 days)
RETEVMO 40 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(90 EA per 30 days)
REZLIDHIA 150 mg cap	\$0-\$14.40 (Tier 5)		PA
ROMVIMZA 14 mg cap, 20 mg cap, 30 mg cap	\$0-\$14.40 (Tier 5)		PA
ROZLYTREK 50 mg pckt	\$0-\$14.40 (Tier 5)		PA
ROZLYTREK 200 mg cap	\$0-\$14.40 (Tier 5)		PA, QL(90 EA per 30 days)
ROZLYTREK 100 mg cap	\$0-\$14.40 (Tier 5)		PA, QL(150 EA per 30 days)
RUBRACA 250 mg tab, 300 mg tab	\$0-\$14.40 (Tier 5)		PA
RUBRACA 200 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(120 EA per 30 days)
RYDAPT 25 mg cap	\$0-\$14.40 (Tier 5)		PA
SCSEMBLIX 20 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(60 EA per 30 days)
SCSEMBLIX 100 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(120 EA per 30 days)
SCSEMBLIX 40 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(240 EA per 30 days)
<i>sorafenib tosylate 200 mg tab</i>	\$0-\$14.40 (Tier 5)	NEXAVAR	PA
STIVARGA 40 mg tab	\$0-\$14.40 (Tier 5)		PA
<i>sunitinib malate 12.5 mg cap, 25 mg cap, 50 mg cap</i>	\$0-\$14.40 (Tier 5)	SUTENT	PA, QL(28 EA per 28 days)
<i>sunitinib malate 37.5 mg cap</i>	\$0-\$14.40 (Tier 5)	SUTENT	PA, QL(56 EA per 28 days)
TABRECTA 150 mg tab, 200 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(120 EA per 30 days)
TAFINLAR 10 mg tab sol, 50 mg cap, 75 mg cap	\$0-\$14.40 (Tier 5)		PA
TAGRISSO 80 mg tab	\$0-\$14.40 (Tier 5)		PA
TAGRISSO 40 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
TALZENNA 0.1 mg cap, 1 mg cap	\$0-\$14.40 (Tier 5)		PA
TALZENNA 0.35 mg cap, 0.5 mg cap, 0.75 mg cap	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
TALZENNA 0.25 mg cap	\$0-\$14.40 (Tier 5)		PA, QL(90 EA per 30 days)
TEPMETKO 225 mg tab	\$0-\$14.40 (Tier 5)		PA
TIBSOVO 250 mg tab	\$0-\$14.40 (Tier 5)		PA
TRUQAP 160 mg tab pack, 200 mg tab	\$0-\$14.40 (Tier 5)		PA
TUKYSA 150 mg tab, 50 mg tab	\$0-\$14.40 (Tier 5)		PA
TURALIO 125 mg cap	\$0-\$14.40 (Tier 5)		PA
VANFLYTA 17.7 mg tab, 26.5 mg tab	\$0-\$14.40 (Tier 5)		PA

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
VENCLEXTA 10 mg tab	\$0-\$14.40 (Tier 4)		PA
VENCLEXTA 100 mg tab, 50 mg tab	\$0-\$14.40 (Tier 5)		PA
VENCLEXTA STARTING PACK 10 & 50 & 100 mg tab pack	\$0-\$14.40 (Tier 5)		PA, QL(84 EA per 365 days)
VERZENIO 100 mg tab, 150 mg tab, 200 mg tab, 50 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(56 EA per 28 days)
VITRAKVI 100 mg cap	\$0-\$14.40 (Tier 5)		PA, QL(120 EA per 30 days)
VITRAKVI 25 mg cap	\$0-\$14.40 (Tier 5)		PA, QL(180 EA per 30 days)
VITRAKVI 20 mg/ml soln	\$0-\$14.40 (Tier 5)		PA, QL(600 ML per 30 days)
XALKORI 150 mg cap sprinkle, 20 mg cap sprinkle, 200 mg cap, 250 mg cap, 50 mg cap sprinkle	\$0-\$14.40 (Tier 5)		PA
XOSPATA 40 mg tab	\$0-\$14.40 (Tier 5)		PA
XPOVIO (100 MG ONCE WEEKLY) 50 mg tab pack	\$0-\$14.40 (Tier 5)		PA
XPOVIO (40 MG ONCE WEEKLY) 10 mg tab pack	\$0-\$14.40 (Tier 5)		PA
XPOVIO (40 MG TWICE WEEKLY) 40 mg tab pack	\$0-\$14.40 (Tier 5)		PA
XPOVIO (60 MG ONCE WEEKLY) 60 mg tab pack	\$0-\$14.40 (Tier 5)		PA
XPOVIO (60 MG TWICE WEEKLY) 20 mg tab pack	\$0-\$14.40 (Tier 5)		PA
XPOVIO (80 MG ONCE WEEKLY) 40 mg tab pack, 80 mg tab pack	\$0-\$14.40 (Tier 5)		PA
XPOVIO (80 MG TWICE WEEKLY) 20 mg tab pack	\$0-\$14.40 (Tier 5)		PA
<i>yulithira 10 mg tab, 2.5 mg tab, 5 mg tab, 7.5 mg tab</i>	\$0-\$14.40 (Tier 4)	AFINITOR	PA, QL(30 EA per 30 days)
ZEJULA 100 mg tab, 200 mg tab, 300 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
ZELBORAF 240 mg tab	\$0-\$14.40 (Tier 5)		PA
ZYKADIA 150 mg tab	\$0-\$14.40 (Tier 5)		PA
Retinoids			
<i>bexarotene 75 mg cap</i>	\$0-\$14.40 (Tier 5)	TARGRETIN	PA
<i>bexarotene 1 % Topical Gel</i>	\$0-\$14.40 (Tier 5)	TARGRETIN	PA, QL(60 GM per 30 days)
PANRETIN 0.1 % Topical Gel	\$0-\$14.40 (Tier 5)		QL(120 GM per 30 days)
<i>tretinoin 10 mg cap</i>	\$0-\$14.40 (Tier 5)	VESANOID	
Treatment Adjuncts			
<i>mesna 400 mg tab</i>	\$0-\$14.40 (Tier 3)		
VORANIGO 40 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
VORANIGO 10 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(60 EA per 30 days)
ANTIPARASITICS			
Anthelmintics			
<i>albendazole 200 mg tab</i>	\$0-\$14.40 (Tier 4)	ALBENZA	
<i>ivermectin 6 mg tab</i>	\$0-\$14.40 (Tier 3)		PA
<i>ivermectin 3 mg tab</i>	\$0-\$14.40 (Tier 3)	STROMECTOL	PA
<i>praziquantel 600 mg tab</i>	\$0-\$14.40 (Tier 4)	BILTRICIDE	

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
Antiprotozoals			
<i>atovaquone 750 mg/5ml susp</i>	\$0-\$14.40 (Tier 4)	MEPRON	QL(300 ML per 30 days)
<i>atovaquone-proguanil hcl 250-100 mg tab, 62.5-25 mg tab</i>	\$0-\$14.40 (Tier 4)	MALARONE	
<i>benznidazole 100 mg tab, 12.5 mg tab</i>	\$0-\$14.40 (Tier 3)		
<i>chloroquine phosphate 250 mg tab</i>	\$0-\$14.40 (Tier 3)		
<i>chloroquine phosphate 500 mg tab</i>	\$0-\$14.40 (Tier 3)	ARALEN	
<i>COARTEM 20-120 mg tab</i>	\$0-\$14.40 (Tier 4)		
<i>hydroxychloroquine sulfate 100 mg tab</i>	\$0-\$5.80 (Tier 2)		
<i>hydroxychloroquine sulfate 200 mg tab</i>	\$0-\$5.80 (Tier 2)	PLAQUENIL	
<i>mefloquine hcl 250 mg tab</i>	\$0-\$5.80 (Tier 2)		
<i>nitazoxanide 500 mg tab</i>	\$0-\$14.40 (Tier 5)	ALINIA	QL(60 EA per 30 days)
<i>pentamidine isethionate 300 mg inh soln</i>	\$0-\$14.40 (Tier 3)	NEBUPENT	B/D
<i>pentamidine isethionate 300 mg inj soln</i>	\$0-\$14.40 (Tier 3)	PENTAM	
<i>primaquine phosphate 26.3 (15 Base) mg tab</i>	\$0-\$14.40 (Tier 3)		
<i>pyrimethamine 25 mg tab</i>	\$0-\$14.40 (Tier 5)	DARAPRIM	PA
<i>quinine sulfate 324 mg cap</i>	\$0-\$14.40 (Tier 3)	QUALAQUIN	PA
ANTIPARKINSON AGENTS			
Anticholinergics			
<i>benztropine mesylate 0.5 mg tab, 1 mg tab, 2 mg tab</i>	\$0-\$5.80 (Tier 2)	COGENTIN	
<i>trihexyphenidyl hcl 2 mg tab, 5 mg tab</i>	\$0-\$14.40 (Tier 4)	ARTANE	
Antiparkinson Agents, Other			
<i>entacapone 200 mg tab</i>	\$0-\$14.40 (Tier 3)	COMTAN	
Dopamine Agonists			
<i>bromocriptine mesylate 2.5 mg tab, 5 mg cap</i>	\$0-\$14.40 (Tier 4)	PARLODEL	
<i>pramipexole dihydrochloride 0.125 mg tab, 0.25 mg tab, 0.5 mg tab, 0.75 mg tab, 1 mg tab, 1.5 mg tab</i>	\$0-\$5.80 (Tier 2)	MIRAPEX	
<i>ropinirole hcl 0.25 mg tab, 0.5 mg tab, 1 mg tab, 2 mg tab, 3 mg tab, 4 mg tab, 5 mg tab</i>	\$0-\$5.80 (Tier 2)	REQUIP	
<i>ropinirole hcl er 12 mg tab er 24 hr, 2 mg tab er 24 hr, 4 mg tab er 24 hr, 6 mg tab er 24 hr, 8 mg tab er 24 hr</i>	\$0-\$14.40 (Tier 4)	REQUIP XL	
Dopamine Precursors And/or L-amino Acid Decarboxylase Inhibitors			
<i>carbidopa 25 mg tab</i>	\$0-\$14.40 (Tier 4)	LODOSYN	
<i>carbidopa-levodopa 10-100 mg tab disint, 25-100 mg tab disint, 25-250 mg tab disint</i>	\$0-\$14.40 (Tier 4)	PARCOPA	
<i>carbidopa-levodopa 10-100 mg tab, 25-100 mg tab, 25-250 mg tab</i>	\$0-\$5.80 (Tier 2)	SINEMET	
<i>carbidopa-levodopa er 25-100 mg tab er, 50-200 mg tab er</i>	\$0-\$14.40 (Tier 3)	SINEMET CR	
<i>INBRIJA 42 mg inh cap</i>	\$0-\$14.40 (Tier 5)		PA
Monoamine Oxidase B (mao-b) Inhibitors			
<i>rasagiline mesylate 0.5 mg tab, 1 mg tab</i>	\$0-\$14.40 (Tier 4)	AZILECT	
<i>selegiline hcl 5 mg tab</i>	\$0-\$14.40 (Tier 3)		
<i>selegiline hcl 5 mg cap</i>	\$0-\$14.40 (Tier 3)	ELDEPRYL	
ANTIPSYCHOTICS			
1st Generation/typical			

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>chlorpromazine hcl 100 mg/ml oral conc, 30 mg/ml oral conc</i>	\$0-\$14.40 (Tier 4)		
<i>chlorpromazine hcl 10 mg tab, 100 mg tab, 200 mg tab, 25 mg tab, 50 mg tab</i>	\$0-\$14.40 (Tier 4)	THORAZINE	
<i>fluphenazine decanoate 25 mg/ml inj soln</i>	\$0-\$14.40 (Tier 4)	PROLIXIN	
<i>fluphenazine hcl 1 mg tab, 10 mg tab, 2.5 mg tab, 5 mg tab</i>	\$0-\$14.40 (Tier 4)	PROLIXIN	
<i>fluphenazine hcl 2.5 mg/5ml oral elix, 2.5 mg/ml inj soln, 5 mg/ml oral conc</i>	\$0-\$14.40 (Tier 4)	PROLIXIN	
<i>haloperidol 0.5 mg tab, 1 mg tab, 10 mg tab, 2 mg tab, 5 mg tab</i>	\$0-\$5.80 (Tier 2)	HALDOL	
<i>haloperidol 20 mg tab</i>	\$0-\$14.40 (Tier 3)	HALDOL	
<i>haloperidol decanoate 100 mg/ml im soln, 50 mg/ml im soln</i>	\$0-\$14.40 (Tier 3)	HALDOL	
<i>haloperidol lactate 2 mg/ml oral conc, 5 mg/ml inj soln</i>	\$0-\$5.80 (Tier 2)	HALDOL	
<i>loxapine succinate 10 mg cap, 25 mg cap, 5 mg cap, 50 mg cap</i>	\$0-\$5.80 (Tier 2)	LOXITANE	
<i>molindone hcl 10 mg tab, 25 mg tab, 5 mg tab</i>	\$0-\$14.40 (Tier 4)	MOBAN	
<i>perphenazine 16 mg tab, 2 mg tab, 4 mg tab, 8 mg tab</i>	\$0-\$14.40 (Tier 3)	TRILAFON	
<i>pimozide 1 mg tab, 2 mg tab</i>	\$0-\$14.40 (Tier 4)	ORAP	
<i>thioridazine hcl 10 mg tab, 100 mg tab, 25 mg tab, 50 mg tab</i>	\$0-\$14.40 (Tier 3)	MELLARIL	
<i>thiothixene 1 mg cap, 10 mg cap, 2 mg cap, 5 mg cap</i>	\$0-\$14.40 (Tier 4)	NAVANE	
<i>trifluoperazine hcl 1 mg tab, 10 mg tab, 2 mg tab, 5 mg tab</i>	\$0-\$14.40 (Tier 3)	STELAZINE	
2nd Generation/atypical			
ABILIFY MAINTENA 300 mg im pfs, 300 mg Intramuscular Suspension Reconstituted ER, 400 mg im pfs, 400 mg Intramuscular Suspension Reconstituted ER	\$0-\$14.40 (Tier 5)		QL(1 EA per 30 days)
<i>aripiprazole 10 mg tab, 15 mg tab, 2 mg tab, 20 mg tab, 30 mg tab, 5 mg tab</i>	\$0-\$5.80 (Tier 2)	ABILIFY	QL(30 EA per 30 days)
<i>aripiprazole 1 mg/ml soln</i>	\$0-\$14.40 (Tier 4)	ABILIFY	QL(750 ML per 30 days)
<i>aripiprazole 10 mg tab disint, 15 mg tab disint</i>	\$0-\$14.40 (Tier 4)	ABILIFY DISCMELT	QL(60 EA per 30 days)
ARISTADA 441 mg/1.6ml im pfs	\$0-\$14.40 (Tier 5)		QL(1.6 ML per 30 days)
ARISTADA 662 mg/2.4ml im pfs	\$0-\$14.40 (Tier 5)		QL(2.4 ML per 30 days)
ARISTADA 882 mg/3.2ml im pfs	\$0-\$14.40 (Tier 5)		QL(3.2 ML per 30 days)
ARISTADA 1064 mg/3.9ml im pfs	\$0-\$14.40 (Tier 5)		QL(3.9 ML per 60 days)
ARISTADA INITIO 675 mg/2.4ml im pfs	\$0-\$14.40 (Tier 5)		
<i>asenapine maleate 10 mg tab subl, 2.5 mg tab subl, 5 mg tab subl</i>	\$0-\$14.40 (Tier 4)	SAPHRIS	QL(60 EA per 30 days)
CAPLYTA 10.5 mg cap, 21 mg cap, 42 mg cap	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
FANAPT 2 mg tab	\$0-\$14.40 (Tier 4)		QL(60 EA per 30 days), ST
FANAPT 1 mg tab, 10 mg tab, 12 mg tab, 4 mg tab, 6 mg tab, 8 mg tab	\$0-\$14.40 (Tier 5)		QL(60 EA per 30 days), ST
FANAPT TITRATION PACK A 1 & 2 & 4 & 6 mg tab	\$0-\$14.40 (Tier 4)		QL(16 EA per 365 days), ST

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
FANAPT TITRATION PACK B 1 & 2 & 6 & 8 mg tab	\$0-\$14.40 (Tier 4)		QL(24 EA per 365 days), ST
FANAPT TITRATION PACK C 1 & 2 & 6 mg tab	\$0-\$14.40 (Tier 4)		QL(16 EA per 365 days), ST
INVEGA HAFYERA 1092 mg/3.5ml im susp pfs	\$0-\$14.40 (Tier 5)		ST
INVEGA HAFYERA 1560 mg/5ml im susp pfs	\$0-\$14.40 (Tier 5)		QL(5 ML per 180 days), ST
INVEGA SUSTENNA 39 mg/0.25ml im susp pfs	\$0-\$14.40 (Tier 4)		QL(0.25 ML per 30 days)
INVEGA SUSTENNA 78 mg/0.5ml im susp pfs	\$0-\$14.40 (Tier 5)		QL(0.5 ML per 30 days)
INVEGA SUSTENNA 117 mg/0.75ml im susp pfs	\$0-\$14.40 (Tier 5)		QL(0.75 ML per 30 days)
INVEGA SUSTENNA 156 mg/ml im susp pfs	\$0-\$14.40 (Tier 5)		QL(1 ML per 30 days)
INVEGA SUSTENNA 234 mg/1.5ml im susp pfs	\$0-\$14.40 (Tier 5)		QL(1.5 ML per 30 days)
INVEGA TRINZA 273 mg/0.88ml im susp pfs	\$0-\$14.40 (Tier 5)		QL(0.88 ML per 84 days)
INVEGA TRINZA 410 mg/1.32ml im susp pfs	\$0-\$14.40 (Tier 5)		QL(1.32 ML per 84 days)
INVEGA TRINZA 546 mg/1.75ml im susp pfs	\$0-\$14.40 (Tier 5)		QL(1.75 ML per 84 days)
INVEGA TRINZA 819 mg/2.63ml im susp pfs	\$0-\$14.40 (Tier 5)		QL(2.63 ML per 84 days)
<i>lurasidone hcl 120 mg tab, 20 mg tab, 40 mg tab, 60 mg tab</i>	\$0-\$14.40 (Tier 4)	LATUDA	QL(30 EA per 30 days)
<i>lurasidone hcl 80 mg tab</i>	\$0-\$14.40 (Tier 4)	LATUDA	QL(60 EA per 30 days)
LYBALVI 10-10 mg tab, 15-10 mg tab, 20-10 mg tab, 5-10 mg tab	\$0-\$14.40 (Tier 5)		QL(30 EA per 30 days), ST
NUPLAZID 10 mg tab, 34 mg cap	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
<i>olanzapine 10 mg tab, 15 mg tab, 2.5 mg tab, 20 mg tab, 5 mg tab, 7.5 mg tab</i>	\$0-\$5.80 (Tier 2)	ZYPREXA	QL(30 EA per 30 days)
<i>olanzapine 10 mg im soln</i>	\$0-\$14.40 (Tier 4)	ZYPREXA	
<i>olanzapine 10 mg tab disint, 15 mg tab disint, 20 mg tab disint, 5 mg tab disint</i>	\$0-\$14.40 (Tier 3)	ZYPREXA ZYDIS	QL(30 EA per 30 days)
OPIPZA 2 mg oral film	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
OPIPZA 10 mg oral film, 5 mg oral film	\$0-\$14.40 (Tier 5)		PA, QL(90 EA per 30 days)
<i>paliperidone er 1.5 mg tab er 24 hr, 3 mg tab er 24 hr, 9 mg tab er 24 hr</i>	\$0-\$14.40 (Tier 4)	INVEGA	QL(30 EA per 30 days)
<i>paliperidone er 6 mg tab er 24 hr</i>	\$0-\$14.40 (Tier 4)	INVEGA	QL(60 EA per 30 days)
<i>quetiapine fumarate 150 mg tab</i>	\$0-\$5.80 (Tier 2)		QL(90 EA per 30 days)
<i>quetiapine fumarate 300 mg tab, 400 mg tab</i>	\$0-\$5.80 (Tier 2)	SEROQUEL	QL(60 EA per 30 days)
<i>quetiapine fumarate 100 mg tab, 200 mg tab, 25 mg tab, 50 mg tab</i>	\$0-\$5.80 (Tier 2)	SEROQUEL	QL(90 EA per 30 days)
<i>quetiapine fumarate er 150 mg tab er 24 hr, 300 mg tab er 24 hr, 400 mg tab er 24 hr, 50 mg tab er 24 hr</i>	\$0-\$5.80 (Tier 2)	SEROQUEL XR	QL(60 EA per 30 days)
<i>quetiapine fumarate er 200 mg tab er 24 hr</i>	\$0-\$5.80 (Tier 2)	SEROQUEL XR	QL(90 EA per 30 days)
REXULTI 0.25 mg tab, 0.5 mg tab, 1 mg tab, 2 mg tab, 3 mg tab, 4 mg tab	\$0-\$14.40 (Tier 5)		QL(30 EA per 30 days)
<i>risperidone 0.25 mg tab, 0.5 mg tab, 1 mg tab, 2 mg tab, 3 mg tab, 4 mg tab</i>	\$0-\$5.80 (Tier 1)	RISPERDAL	QL(60 EA per 30 days)
<i>risperidone 1 mg/ml soln</i>	\$0-\$5.80 (Tier 2)	RISPERDAL	QL(240 ML per 30 days)
<i>risperidone 0.25 mg tab disint, 0.5 mg tab disint, 1 mg tab disint, 2 mg tab disint, 3 mg tab disint, 4 mg tab disint</i>	\$0-\$14.40 (Tier 4)	RISPERDAL	QL(60 EA per 30 days)
<i>risperidone microspheres er 37.5 mg Intramuscular Suspension Reconstituted ER</i>	\$0-\$14.40 (Tier 4)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>risperidone microspheres er 12.5 mg Intramuscular Suspension Reconstituted ER, 25 mg Intramuscular Suspension Reconstituted ER</i>	\$0-\$14.40 (Tier 4)		QL(2 EA per 28 days)
<i>risperidone microspheres er 50 mg Intramuscular Suspension Reconstituted ER</i>	\$0-\$14.40 (Tier 5)		QL(2 EA per 28 days)
SECUADO 3.8 mg/24hr td patch 24hr, 5.7 mg/24hr td patch 24hr, 7.6 mg/24hr td patch 24hr	\$0-\$14.40 (Tier 5)		QL(30 EA per 30 days), ST
UZEDY 200 mg/0.56ml sc susp pfs, 250 mg/0.7ml sc susp pfs, 75 mg/0.21ml sc susp pfs	\$0-\$14.40 (Tier 5)		
UZEDY 50 mg/0.14ml sc susp pfs	\$0-\$14.40 (Tier 5)		QL(0.14 ML per 30 days)
UZEDY 100 mg/0.28ml sc susp pfs	\$0-\$14.40 (Tier 5)		QL(0.28 ML per 30 days)
UZEDY 125 mg/0.35ml sc susp pfs	\$0-\$14.40 (Tier 5)		QL(0.35 ML per 30 days)
UZEDY 150 mg/0.42ml sc susp pfs	\$0-\$14.40 (Tier 5)		QL(0.42 ML per 60 days)
VRAYLAR 0.5 mg cap, 0.75 mg cap, 1.5 mg cap, 3 mg cap, 4.5 mg cap, 6 mg cap	\$0-\$14.40 (Tier 3)		QL(30 EA per 30 days)
<i>ziprasidone hcl 20 mg cap, 40 mg cap, 60 mg cap, 80 mg cap</i>	\$0-\$14.40 (Tier 3)	GEODON	QL(60 EA per 30 days)
<i>ziprasidone mesylate 20 mg im soln</i>	\$0-\$14.40 (Tier 4)	GEODON	QL(60 EA per 30 days)
Treatment-resistant			
<i>clozapine 50 mg tab</i>	\$0-\$14.40 (Tier 3)	CLOZARIL	QL(180 EA per 30 days)
<i>clozapine 25 mg tab</i>	\$0-\$14.40 (Tier 3)	CLOZARIL	QL(270 EA per 30 days)
<i>clozapine 200 mg tab</i>	\$0-\$14.40 (Tier 4)	CLOZARIL	QL(120 EA per 30 days)
<i>clozapine 100 mg tab</i>	\$0-\$14.40 (Tier 4)	CLOZARIL	QL(270 EA per 30 days)
<i>clozapine 12.5 mg tab disint</i>	\$0-\$14.40 (Tier 4)	FAZACLO	QL(90 EA per 30 days)
<i>clozapine 200 mg tab disint</i>	\$0-\$14.40 (Tier 4)	FAZACLO	QL(120 EA per 30 days)
<i>clozapine 150 mg tab disint</i>	\$0-\$14.40 (Tier 4)	FAZACLO	QL(180 EA per 30 days)
<i>clozapine 100 mg tab disint, 25 mg tab disint</i>	\$0-\$14.40 (Tier 4)	FAZACLO	QL(270 EA per 30 days)
VERSACLOZ 50 mg/ml susp	\$0-\$14.40 (Tier 5)		QL(540 ML per 30 days)
ANTISPASTICITY AGENTS			
Antispasticity Agents			
<i>baclofen 5 mg tab</i>	\$0-\$14.40 (Tier 3)		
<i>baclofen 10 mg tab, 20 mg tab</i>	\$0-\$5.80 (Tier 2)	LIORESAL	
<i>dantrolene sodium 100 mg cap, 25 mg cap, 50 mg cap</i>	\$0-\$14.40 (Tier 4)	DANTRIUM	
<i>tizanidine hcl 2 mg tab, 4 mg tab</i>	\$0-\$5.80 (Tier 2)	ZANAFLEX	
ANTIVIRALS			
Anti-cytomegalovirus (cmv) Agents			
LIVTENCITY 200 mg tab	\$0-\$14.40 (Tier 5)		QL(360 EA per 30 days)
PREVYMIS 240 mg tab, 480 mg tab	\$0-\$14.40 (Tier 5)		QL(28 EA per 28 days)
PREVYMIS 120 mg pckt, 20 mg pckt	\$0-\$14.40 (Tier 5)		QL(120 EA per 30 days)
<i>valganciclovir hcl 450 mg tab</i>	\$0-\$14.40 (Tier 3)	VALCYTE	QL(120 EA per 30 days)
<i>valganciclovir hcl 50 mg/ml soln</i>	\$0-\$14.40 (Tier 5)	VALCYTE	QL(1080 ML per 30 days)
Anti-hepatitis B (hbv) Agents			
<i>adefovir dipivoxil 10 mg tab</i>	\$0-\$14.40 (Tier 4)	HEPSERA	QL(30 EA per 30 days)
BARACLUDE 0.05 mg/ml soln	\$0-\$14.40 (Tier 5)		QL(600 ML per 30 days)
<i>entecavir 0.5 mg tab, 1 mg tab</i>	\$0-\$14.40 (Tier 4)	BARACLUDE	QL(30 EA per 30 days)
<i>lamivudine 100 mg tab</i>	\$0-\$14.40 (Tier 3)	EPIVIR HBV	QL(30 EA per 30 days)
Anti-hepatitis C (hcv) Agents			

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
MAVYRET 100-40 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(336 EA per 365 days)
MAVYRET 50-20 mg pckt	\$0-\$14.40 (Tier 5)		PA, QL(560 EA per 365 days)
<i>ribavirin 200 mg tab</i>	\$0-\$14.40 (Tier 3)	COPEGUS	
<i>sofosbuvir-velpatasvir 400-100 mg tab</i>	\$0-\$14.40 (Tier 5)	EPCLUSA	PA, QL(84 EA per 365 days)
VOSEVI 400-100-100 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(84 EA per 365 days)
Anti-hiv Agents, Integrase Inhibitors (insti)			
BIKTARVY 30-120-15 mg tab, 50-200-25 mg tab	\$0-\$14.40 (Tier 5)		QL(30 EA per 30 days)
DOVATO 50-300 mg tab	\$0-\$14.40 (Tier 5)		QL(30 EA per 30 days)
GENVOYA 150-150-200-10 mg tab	\$0-\$14.40 (Tier 5)		QL(30 EA per 30 days)
ISENTRESS 25 mg tab chew	\$0-\$14.40 (Tier 3)		QL(180 EA per 30 days)
ISENTRESS 100 mg pckt, 400 mg tab	\$0-\$14.40 (Tier 5)		QL(60 EA per 30 days)
ISENTRESS 100 mg tab chew	\$0-\$14.40 (Tier 5)		QL(180 EA per 30 days)
ISENTRESS HD 600 mg tab	\$0-\$14.40 (Tier 5)		QL(60 EA per 30 days)
JULUCA 50-25 mg tab	\$0-\$14.40 (Tier 5)		QL(30 EA per 30 days)
STRIBILD 150-150-200-300 mg tab	\$0-\$14.40 (Tier 5)		QL(30 EA per 30 days)
TIVICAY 50 mg tab	\$0-\$14.40 (Tier 5)		QL(60 EA per 30 days)
TIVICAY PD 5 mg tab sol	\$0-\$14.40 (Tier 4)		QL(180 EA per 30 days)
Anti-hiv Agents, Non-nucleoside Reverse Transcriptase Inhibitors (nnrti)			
DELSTRIGO 100-300-300 mg tab	\$0-\$14.40 (Tier 5)		QL(30 EA per 30 days)
EDURANT PED 2.5 mg tab sol	\$0-\$14.40 (Tier 5)		QL(180 EA per 30 days)
<i>efavirenz 600 mg tab</i>	\$0-\$14.40 (Tier 4)	SUSTIVA	QL(30 EA per 30 days)
<i>efavirenz-emtricitab-tenofo df 600-200-300 mg tab</i>	\$0-\$14.40 (Tier 3)	ATRIPLA	QL(30 EA per 30 days)
<i>efavirenz-lamivudine-tenofovir 600-300-300 mg tab</i>	\$0-\$14.40 (Tier 5)	SYMFI	QL(30 EA per 30 days)
<i>efavirenz-lamivudine-tenofovir 400-300-300 mg tab</i>	\$0-\$14.40 (Tier 5)	SYMFI LO	QL(30 EA per 30 days)
<i>emtricitab-rilpivir-tenofov df 200-25-300 mg tab</i>	\$0-\$14.40 (Tier 5)		QL(30 EA per 30 days)
<i>etravirine 100 mg tab</i>	\$0-\$14.40 (Tier 4)	INTELENCE	QL(60 EA per 30 days)
<i>etravirine 200 mg tab</i>	\$0-\$14.40 (Tier 5)	INTELENCE	QL(60 EA per 30 days)
IDVYNOS 100-0.25 mg tab	\$0-\$14.40 (Tier 5)		QL(30 EA per 30 days)
INTELENCE 25 mg tab	\$0-\$14.40 (Tier 4)		QL(120 EA per 30 days)
<i>nevirapine 200 mg tab</i>	\$0-\$5.80 (Tier 2)	VIRAMUNE	QL(60 EA per 30 days)
<i>nevirapine 50 mg/5ml susp</i>	\$0-\$14.40 (Tier 3)	VIRAMUNE	QL(1200 ML per 30 days)
<i>nevirapine er 400 mg tab er 24 hr</i>	\$0-\$14.40 (Tier 4)	VIRAMUNE XR	QL(30 EA per 30 days)
PIFELTRO 100 mg tab	\$0-\$14.40 (Tier 5)		QL(30 EA per 30 days)
<i>rilpivirine hcl 25 mg tab</i>	\$0-\$14.40 (Tier 5)		QL(30 EA per 30 days)
Anti-hiv Agents, Nucleoside And Nucleotide Reverse Transcriptase Inhibitors (nrti)			
<i>abacavir sulfate 300 mg tab</i>	\$0-\$14.40 (Tier 3)	ZIAGEN	QL(60 EA per 30 days)
<i>abacavir sulfate 20 mg/ml soln</i>	\$0-\$14.40 (Tier 4)	ZIAGEN	QL(960 ML per 30 days)
<i>abacavir sulfate-lamivudine 600-300 mg tab</i>	\$0-\$14.40 (Tier 4)	EPZICOM	QL(30 EA per 30 days)
CIMDUO 300-300 mg tab	\$0-\$14.40 (Tier 5)		QL(30 EA per 30 days)
DESCOVY 120-15 mg tab, 200-25 mg tab	\$0-\$14.40 (Tier 5)		QL(30 EA per 30 days)
<i>emtricitabine 200 mg cap</i>	\$0-\$14.40 (Tier 4)	EMTRIVA	QL(30 EA per 30 days)
<i>emtricitabine-tenofovir df 200-300 mg tab</i>	\$0-\$5.80 (Tier 2)	TRUVADA	QL(30 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>emtricitabine-tenofovir df 100-150 mg tab, 167-250 mg tab</i>	\$0-\$14.40 (Tier 4)	TRUVADA	QL(30 EA per 30 days)
<i>emtricitabine-tenofovir df 133-200 mg tab</i>	\$0-\$14.40 (Tier 5)	TRUVADA	QL(30 EA per 30 days)
EMTRIVA 10 mg/ml soln	\$0-\$14.40 (Tier 4)		QL(850 ML per 30 days)
<i>lamivudine 150 mg tab</i>	\$0-\$5.80 (Tier 2)	EPIVIR	QL(60 EA per 30 days)
<i>lamivudine 300 mg tab</i>	\$0-\$14.40 (Tier 3)	EPIVIR	QL(30 EA per 30 days)
<i>lamivudine 10 mg/ml soln</i>	\$0-\$14.40 (Tier 3)	EPIVIR	QL(960 ML per 30 days)
<i>lamivudine-zidovudine 150-300 mg tab</i>	\$0-\$14.40 (Tier 3)	COMBIVIR	QL(60 EA per 30 days)
ODEFSEY 200-25-25 mg tab	\$0-\$14.40 (Tier 5)		QL(30 EA per 30 days)
<i>tenofovir disoproxil fumarate 300 mg tab</i>	\$0-\$14.40 (Tier 4)	VIREAD	QL(30 EA per 30 days)
TRIUMEQ 600-50-300 mg tab	\$0-\$14.40 (Tier 5)		QL(30 EA per 30 days)
<i>triumeq pd 60-5-30 mg tab sol</i>	\$0-\$14.40 (Tier 5)		QL(180 EA per 30 days)
VIREAD 150 mg tab, 200 mg tab, 250 mg tab	\$0-\$14.40 (Tier 5)		QL(30 EA per 30 days)
VIREAD 40 mg/gm oral pwdr	\$0-\$14.40 (Tier 5)		QL(240 GM per 30 days)
<i>zidovudine 300 mg tab</i>	\$0-\$14.40 (Tier 3)	RETROVIR	QL(60 EA per 30 days)
<i>zidovudine 100 mg cap</i>	\$0-\$14.40 (Tier 3)	RETROVIR	QL(180 EA per 30 days)
<i>zidovudine 50 mg/5ml syr</i>	\$0-\$14.40 (Tier 3)	RETROVIR	QL(1920 ML per 30 days)
Anti-hiv Agents, Other			
<i>maraviroc 150 mg tab</i>	\$0-\$14.40 (Tier 5)	SELZENTRY	QL(60 EA per 30 days)
<i>maraviroc 300 mg tab</i>	\$0-\$14.40 (Tier 5)	SELZENTRY	QL(120 EA per 30 days)
RUKOBIA 600 mg tab er 12 hr	\$0-\$14.40 (Tier 5)		QL(60 EA per 30 days)
SUNLENCA 4 x 300 mg tab pack	\$0-\$14.40 (Tier 5)		QL(8 EA per 365 days)
SUNLENCA 5 x 300 mg tab pack	\$0-\$14.40 (Tier 5)		QL(10 EA per 365 days)
SUNLENCA 300 mg tab	\$0-\$14.40 (Tier 5)		QL(24 EA per 168 days)
Anti-hiv Agents, Protease Inhibitors (pi)			
APTIVUS 250 mg cap	\$0-\$14.40 (Tier 5)		QL(120 EA per 30 days)
<i>atazanavir sulfate 150 mg cap</i>	\$0-\$14.40 (Tier 4)	REYATAZ	
<i>atazanavir sulfate 300 mg cap</i>	\$0-\$14.40 (Tier 4)	REYATAZ	QL(30 EA per 30 days)
<i>atazanavir sulfate 200 mg cap</i>	\$0-\$14.40 (Tier 4)	REYATAZ	QL(60 EA per 30 days)
<i>darunavir 800 mg tab</i>	\$0-\$14.40 (Tier 4)	PREZISTA	QL(30 EA per 30 days)
<i>darunavir 600 mg tab</i>	\$0-\$14.40 (Tier 4)	PREZISTA	QL(60 EA per 30 days)
EVOTAZ 300-150 mg tab	\$0-\$14.40 (Tier 5)		QL(30 EA per 30 days)
<i>fosamprenavir calcium 700 mg tab</i>	\$0-\$14.40 (Tier 5)	LEXIVA	QL(120 EA per 30 days)
<i>lopinavir-ritonavir 200-50 mg tab</i>	\$0-\$14.40 (Tier 4)	KALETRA	QL(120 EA per 30 days)
<i>lopinavir-ritonavir 100-25 mg tab</i>	\$0-\$14.40 (Tier 4)	KALETRA	QL(240 EA per 30 days)
PREZCOBIX 675-150 mg tab, 800-150 mg tab	\$0-\$14.40 (Tier 5)		QL(30 EA per 30 days)
PREZISTA 75 mg tab	\$0-\$14.40 (Tier 4)		QL(300 EA per 30 days)
PREZISTA 150 mg tab	\$0-\$14.40 (Tier 5)		QL(180 EA per 30 days)
PREZISTA 100 mg/ml susp	\$0-\$14.40 (Tier 5)		QL(400 ML per 30 days)
REYATAZ 50 mg pckt	\$0-\$14.40 (Tier 5)		QL(180 EA per 30 days)
<i>ritonavir 100 mg tab</i>	\$0-\$14.40 (Tier 3)	NORVIR	QL(360 EA per 30 days)
SYM TUZA 800-150-200-10 mg tab	\$0-\$14.40 (Tier 5)		QL(30 EA per 30 days)
VIRACEPT 625 mg tab	\$0-\$14.40 (Tier 5)		QL(120 EA per 30 days)
VIRACEPT 250 mg tab	\$0-\$14.40 (Tier 5)		QL(300 EA per 30 days)
Anti-influenza Agents			
<i>amantadine hcl 50 mg/5ml soln</i>	\$0-\$5.80 (Tier 2)		
<i>amantadine hcl 100 mg cap</i>	\$0-\$5.80 (Tier 2)	SYMMETREL	
<i>oseltamivir phosphate 45 mg cap</i>	\$0-\$5.80 (Tier 2)	TAMIFLU	QL(84 EA per 365 days)
<i>oseltamivir phosphate 75 mg cap</i>	\$0-\$5.80 (Tier 2)	TAMIFLU	QL(110 EA per 365 days)

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>oseltamivir phosphate 30 mg cap</i>	\$0-\$5.80 (Tier 2)	TAMIFLU	QL(168 EA per 365 days)
<i>oseltamivir phosphate 6 mg/ml susp</i>	\$0-\$14.40 (Tier 3)	TAMIFLU	QL(1080 ML per 365 days)
XOFLUZA (40 MG DOSE) 1 x 40 mg tab pack	\$0-\$14.40 (Tier 3)		QL(1 EA per 30 days)
XOFLUZA (80 MG DOSE) 1 x 80 mg tab pack	\$0-\$14.40 (Tier 3)		QL(1 EA per 30 days)
Antitherpetic Agents			
<i>acyclovir 200 mg cap, 400 mg tab, 800 mg tab</i>	\$0-\$5.80 (Tier 2)	ZOVIRAX	
<i>acyclovir 200 mg/5ml susp</i>	\$0-\$14.40 (Tier 4)	ZOVIRAX	
<i>acyclovir sodium 50 mg/ml iv soln</i>	\$0-\$14.40 (Tier 4)	ZOVIRAX	B/D
<i>famciclovir 125 mg tab, 250 mg tab</i>	\$0-\$14.40 (Tier 3)	FAMVIR	QL(60 EA per 30 days)
<i>famciclovir 500 mg tab</i>	\$0-\$14.40 (Tier 3)	FAMVIR	QL(90 EA per 30 days)
<i>valacyclovir hcl 1 gm tab, 500 mg tab</i>	\$0-\$14.40 (Tier 3)	VALTREX	QL(120 EA per 30 days)
Antiviral, Coronavirus Agents			
PAXLOVID (150/100) 10 x 150 MG & 10 x 100mg tab pack	\$0-\$14.40 (Tier 3)		QL(20 EA per 5 days)
PAXLOVID (300/100 & 150/100) 6 x 150 MG & 5 x 100mg tab pack	\$0-\$14.40 (Tier 3)		QL(11 EA per 5 days)
PAXLOVID (300/100) 20 x 150 MG & 10 x 100mg tab pack	\$0-\$14.40 (Tier 3)		QL(30 EA per 5 days)
XOCOVA 125 mg tab	\$0-\$14.40 (Tier 3)		QL(7 EA per 5 days)
ANXIOLYTICS			
Anxiolytics, Other			
<i>buspirone hcl 10 mg tab, 15 mg tab, 30 mg tab, 5 mg tab, 7.5 mg tab</i>	\$0-\$5.80 (Tier 1)	BUSPAR	
Benzodiazepines			
<i>alprazolam 0.25 mg tab, 0.5 mg tab, 1 mg tab</i>	\$0-\$5.80 (Tier 2)	XANAX	QL(120 EA per 30 days)
<i>alprazolam 2 mg tab</i>	\$0-\$5.80 (Tier 2)	XANAX	QL(150 EA per 30 days)
<i>clorazepate dipotassium 15 mg tab</i>	\$0-\$14.40 (Tier 4)	TRANXENE	QL(180 EA per 30 days)
<i>clorazepate dipotassium 7.5 mg tab</i>	\$0-\$14.40 (Tier 4)	TRANXENE	QL(360 EA per 30 days)
<i>clorazepate dipotassium 3.75 mg tab</i>	\$0-\$14.40 (Tier 4)	TRANXENE	QL(720 EA per 30 days)
<i>diazepam 10 mg tab</i>	\$0-\$5.80 (Tier 2)	VALIUM	QL(120 EA per 30 days)
<i>diazepam 5 mg tab</i>	\$0-\$5.80 (Tier 2)	VALIUM	QL(240 EA per 30 days)
<i>diazepam 2 mg tab</i>	\$0-\$5.80 (Tier 2)	VALIUM	QL(300 EA per 30 days)
<i>diazepam 5 mg/5ml soln</i>	\$0-\$5.80 (Tier 2)	VALIUM	QL(1200 ML per 30 days)
<i>diazepam intensol 5 mg/ml oral conc</i>	\$0-\$5.80 (Tier 2)		
<i>lorazepam 0.5 mg tab, 1 mg tab</i>	\$0-\$5.80 (Tier 2)	ATIVAN	QL(90 EA per 30 days)
<i>lorazepam 2 mg tab</i>	\$0-\$5.80 (Tier 2)	ATIVAN	QL(150 EA per 30 days)
<i>lorazepam intensol 2 mg/ml oral conc</i>	\$0-\$14.40 (Tier 3)	LORAZEPAM INTENSOL	QL(150 ML per 30 days)
BIPOLAR AGENTS			
Mood Stabilizers			
<i>lithium 8 meq/5ml soln</i>	\$0-\$14.40 (Tier 3)		
<i>lithium carbonate 150 mg cap, 600 mg cap</i>	\$0-\$5.80 (Tier 1)		
<i>lithium carbonate 300 mg cap</i>	\$0-\$5.80 (Tier 1)	ESKALITH	
<i>lithium carbonate 300 mg tab</i>	\$0-\$5.80 (Tier 1)	LITHOBID	
<i>lithium carbonate er 450 mg tab er</i>	\$0-\$5.80 (Tier 2)	ESKALITH CR	
<i>lithium carbonate er 300 mg tab er</i>	\$0-\$5.80 (Tier 2)	LITHOBID	
BLOOD GLUCOSE REGULATORS			
Antidiabetic Agents			
<i>acarbose 100 mg tab, 25 mg tab, 50 mg tab</i>	\$0-\$5.80 (Tier 2)	PRECOSE	

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>dapagliflozin-metformin hcl er 10-1000 mg tab er 24 hr, 10-500 mg tab er 24 hr, 5-500 mg tab er 24 hr</i>	\$0-\$14.40 (Tier 3)		QL(30 EA per 30 days)
<i>dapagliflozin-metformin hcl er 5-1000 mg tab er 24 hr</i>	\$0-\$14.40 (Tier 3)		QL(60 EA per 30 days)
<i>glimepiride 1 mg tab, 2 mg tab, 4 mg tab</i>	\$0-\$5.80 (Tier 1)	AMARYL	
<i>glipizide 2.5 mg tab</i>	\$0-\$5.80 (Tier 1)		
<i>glipizide 10 mg tab, 5 mg tab</i>	\$0-\$5.80 (Tier 1)	GLUCOTROL	
<i>glipizide er 10 mg tab er 24 hr, 2.5 mg tab er 24 hr, 5 mg tab er 24 hr</i>	\$0-\$5.80 (Tier 1)	GLUCOTROL XL	
<i>glipizide-metformin hcl 2.5-250 mg tab, 2.5-500 mg tab, 5-500 mg tab</i>	\$0-\$5.80 (Tier 1)	METAGLIP	
<i>glyburide 1.25 mg tab, 2.5 mg tab, 5 mg tab</i>	\$0-\$5.80 (Tier 1)	DIABETA	
<i>glyburide-metformin 1.25-250 mg tab, 2.5-500 mg tab, 5-500 mg tab</i>	\$0-\$5.80 (Tier 1)	GLUCOVANCE	
<i>GLYXAMBI 10-5 mg tab, 25-5 mg tab</i>	\$0-\$14.40 (Tier 3)		QL(30 EA per 30 days)
<i>JANUMET 50-1000 mg tab, 50-500 mg tab</i>	\$0-\$14.40 (Tier 3)		
<i>JANUMET XR 100-1000 mg tab er 24 hr, 50-1000 mg tab er 24 hr, 50-500 mg tab er 24 hr</i>	\$0-\$14.40 (Tier 3)		
<i>JANUVIA 100 mg tab, 25 mg tab, 50 mg tab</i>	\$0-\$14.40 (Tier 3)		QL(30 EA per 30 days)
<i>JENTADUETO 2.5-1000 mg tab, 2.5-500 mg tab</i>	\$0-\$14.40 (Tier 3)		
<i>JENTADUETO XR 2.5-1000 mg tab er 24 hr, 5-1000 mg tab er 24 hr</i>	\$0-\$14.40 (Tier 3)		
<i>metformin hcl 1000 mg tab, 500 mg tab, 850 mg tab</i>	\$0-\$5.80 (Tier 1)	GLUCOPHAGE	
<i>metformin hcl er 500 mg tab er 24 hr, 750 mg tab er 24 hr</i>	\$0-\$5.80 (Tier 1)	GLUCOPHAGE XR	
<i>metformin hcl er (osm) 1000 mg tab er 24 hr, 500 mg tab er 24 hr</i>	\$0-\$5.80 (Tier 2)	FORTAMET	
<i>MOUNJARO 10 mg/0.5ml sc soln auto-inj, 12.5 mg/0.5ml sc soln auto-inj, 15 mg/0.5ml sc soln auto-inj, 2.5 mg/0.5ml sc soln auto-inj, 5 mg/0.5ml sc soln auto-inj, 7.5 mg/0.5ml sc soln auto-inj</i>	\$0-\$14.40 (Tier 3)		PA, QL(2 ML per 28 days)
<i>nateglinide 120 mg tab, 60 mg tab</i>	\$0-\$5.80 (Tier 1)	STARLIX	
<i>OZEMPIC 4 mg tab, 9 mg tab</i>	\$0-\$14.40 (Tier 3)		PA, QL(30 EA per 30 days)
<i>OZEMPIC 1.5 mg tab</i>	\$0-\$14.40 (Tier 3)		PA, QL(60 EA per 365 days)
<i>OZEMPIC (0.25 OR 0.5 MG/DOSE) 2 mg/3ml sc soln pen-inj</i>	\$0-\$14.40 (Tier 3)		PA, QL(3 ML per 28 days)
<i>OZEMPIC (1 MG/DOSE) 4 mg/3ml sc soln pen-inj</i>	\$0-\$14.40 (Tier 3)		PA, QL(3 ML per 28 days)
<i>OZEMPIC (2 MG/DOSE) 8 mg/3ml sc soln pen-inj</i>	\$0-\$14.40 (Tier 3)		PA, QL(3 ML per 28 days)
<i>pioglitazone hcl 15 mg tab, 30 mg tab, 45 mg tab</i>	\$0-\$5.80 (Tier 1)	ACTOS	
<i>pioglitazone hcl-metformin hcl 15-500 mg tab, 15-850 mg tab</i>	\$0-\$5.80 (Tier 2)	ACTOPLUS MET	
<i>repaglinide 0.5 mg tab, 1 mg tab, 2 mg tab</i>	\$0-\$5.80 (Tier 1)	PRANDIN	
<i>SOLIQUA 100-33 unt-mcg/ml sc soln pen-inj</i>	\$0-\$14.40 (Tier 3)		QL(15 ML per 24 days)

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
SYNJARDY 12.5-1000 mg tab, 5-500 mg tab	\$0-\$14.40 (Tier 3)		
SYNJARDY 12.5-500 mg tab, 5-1000 mg tab	\$0-\$14.40 (Tier 3)		QL(60 EA per 30 days)
SYNJARDY XR 25-1000 mg tab er 24 hr	\$0-\$14.40 (Tier 3)		QL(30 EA per 30 days)
SYNJARDY XR 10-1000 mg tab er 24 hr, 12.5-1000 mg tab er 24 hr, 5-1000 mg tab er 24 hr	\$0-\$14.40 (Tier 3)		QL(60 EA per 30 days)
TRADJENTA 5 mg tab	\$0-\$14.40 (Tier 3)		QL(30 EA per 30 days)
TRIJARDY XR 10-5-1000 mg tab er 24 hr, 25-5-1000 mg tab er 24 hr	\$0-\$14.40 (Tier 3)		QL(30 EA per 30 days)
TRIJARDY XR 12.5-2.5-1000 mg tab er 24 hr, 5-2.5-1000 mg tab er 24 hr	\$0-\$14.40 (Tier 3)		QL(60 EA per 30 days)
TRULICITY 0.75 mg/0.5ml sc soln auto-inj, 1.5 mg/0.5ml sc soln auto-inj, 3 mg/0.5ml sc soln auto-inj, 4.5 mg/0.5ml sc soln auto-inj	\$0-\$14.40 (Tier 3)		PA, QL(2 ML per 28 days)
XIGDUO XR 10-1000 mg tab er 24 hr, 10-500 mg tab er 24 hr, 5-500 mg tab er 24 hr	\$0-\$14.40 (Tier 3)		QL(30 EA per 30 days)
XIGDUO XR 2.5-1000 mg tab er 24 hr, 5-1000 mg tab er 24 hr	\$0-\$14.40 (Tier 3)		QL(60 EA per 30 days)
Glycemic Agents			
BAQSIMI ONE PACK 3 mg/dose nasal pwdr	\$0-\$14.40 (Tier 3)		
<i>diazoxide 50 mg/ml susp</i>	\$0-\$14.40 (Tier 5)	PROGLYCEM	
<i>glucagon emergency 1 mg inj soln</i>	\$0-\$14.40 (Tier 3)	GLUCAGON EMERGENCY	
GVOKE HYPOPEN 2-PACK 0.5 mg/0.1ml sc soln auto-inj, 1 mg/0.2ml sc soln auto-inj	\$0-\$14.40 (Tier 3)		
GVOKE KIT 1 mg/0.2ml sc soln	\$0-\$14.40 (Tier 3)		
GVOKE PFS 1 mg/0.2ml sc soln pfs	\$0-\$14.40 (Tier 3)		
Insulins			
HUMALOG 100 unit/ml inj soln, 100 unit/ml sc soln cart	\$0-\$14.40 (Tier 3)		
HUMALOG JUNIOR KWIKPEN 100 unit/ml sc soln pen-inj	\$0-\$14.40 (Tier 3)		
HUMALOG KWIKPEN 100 unit/ml sc soln pen-inj, 200 unit/ml sc soln pen-inj	\$0-\$14.40 (Tier 3)		
HUMALOG MIX 50/50 KWIKPEN (50-50) 100 unit/ml sc susp pen-inj	\$0-\$14.40 (Tier 3)		
HUMALOG MIX 75/25 (75-25) 100 unit/ml sc susp	\$0-\$14.40 (Tier 3)		
HUMALOG MIX 75/25 KWIKPEN (75-25) 100 unit/ml sc susp pen-inj	\$0-\$14.40 (Tier 3)		
HUMULIN 70/30 (70-30) 100 unit/ml sc susp	\$0-\$14.40 (Tier 3)		
HUMULIN 70/30 KWIKPEN (70-30) 100 unit/ml sc susp pen-inj	\$0-\$14.40 (Tier 3)		
HUMULIN N 100 unit/ml sc susp	\$0-\$14.40 (Tier 3)		
HUMULIN N KWIKPEN 100 unit/ml sc susp pen-inj	\$0-\$14.40 (Tier 3)		
HUMULIN R 100 unit/ml inj soln	\$0-\$14.40 (Tier 3)		
HUMULIN R U-500 KWIKPEN 500 unit/ml sc soln pen-inj	\$0-\$14.40 (Tier 3)		
<i>insulin lispro 100 unit/ml inj soln</i>	\$0-\$14.40 (Tier 3)	HUMALOG	
LANTUS 100 unit/ml sc soln	\$0-\$14.40 (Tier 3)		

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LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
LANTUS SOLOSTAR 100 unit/ml sc soln pen-inj	\$0-\$14.40 (Tier 3)		
LYUMJEV 100 unit/ml inj soln	\$0-\$14.40 (Tier 3)		
LYUMJEV KWIKPEN 100 unit/ml sc soln pen-inj, 200 unit/ml sc soln pen-inj	\$0-\$14.40 (Tier 3)		
NOVOLIN 70/30 (70-30) 100 unit/ml sc susp	\$0-\$14.40 (Tier 3)		
NOVOLIN 70/30 FLEXPEN (70-30) 100 unit/ml sc susp pen-inj	\$0-\$14.40 (Tier 3)		
NOVOLIN N 100 unit/ml sc susp	\$0-\$14.40 (Tier 3)		
NOVOLIN N FLEXPEN 100 unit/ml sc susp pen-inj	\$0-\$14.40 (Tier 3)		
NOVOLIN R 100 unit/ml inj soln	\$0-\$14.40 (Tier 3)		
NOVOLIN R FLEXPEN 100 unit/ml Injection Solution Pen-injector	\$0-\$14.40 (Tier 3)		
NOVOLOG 100 unit/ml inj soln	\$0-\$14.40 (Tier 3)		
NOVOLOG FLEXPEN 100 unit/ml sc soln pen-inj	\$0-\$14.40 (Tier 3)		
NOVOLOG MIX 70/30 (70-30) 100 unit/ml sc susp	\$0-\$14.40 (Tier 3)		
NOVOLOG MIX 70/30 FLEXPEN (70-30) 100 unit/ml sc susp pen-inj	\$0-\$14.40 (Tier 3)		
NOVOLOG PENFILL 100 unit/ml sc soln cart	\$0-\$14.40 (Tier 3)		
TOUJEO MAX SOLOSTAR 300 unit/ml sc soln pen-inj	\$0-\$14.40 (Tier 3)		
TOUJEO SOLOSTAR 300 unit/ml sc soln pen-inj	\$0-\$14.40 (Tier 3)		
TRESIBA 100 unit/ml sc soln	\$0-\$14.40 (Tier 3)		
TRESIBA FLEXTOUCH 100 unit/ml sc soln pen-inj, 200 unit/ml sc soln pen-inj	\$0-\$14.40 (Tier 3)		
BLOOD PRODUCTS AND MODIFIERS			
Anticoagulants			
<i>dabigatran etexilate mesylate 110 mg cap</i>	\$0-\$14.40 (Tier 4)		QL(60 EA per 30 days)
<i>dabigatran etexilate mesylate 150 mg cap, 75 mg cap</i>	\$0-\$14.40 (Tier 4)	PRADAXA	QL(60 EA per 30 days)
ELIQUIS 5 mg tab	\$0-\$14.40 (Tier 3)		
ELIQUIS 2.5 mg tab	\$0-\$14.40 (Tier 3)		QL(60 EA per 30 days)
ELIQUIS 0.15 mg cap sprinkle	\$0-\$14.40 (Tier 3)		QL(84 EA per 28 days)
ELIQUIS 0.5 mg tab sol	\$0-\$14.40 (Tier 3)		QL(140 EA per 28 days)
ELIQUIS (1.5 MG PACK) 3 x 0.5 mg tab sol	\$0-\$14.40 (Tier 3)		QL(420 EA per 28 days)
ELIQUIS (2 MG PACK) 4 x 0.5 mg tab sol	\$0-\$14.40 (Tier 3)		QL(560 EA per 28 days)
ELIQUIS DVT/PE STARTER PACK 5 mg tab pack	\$0-\$14.40 (Tier 3)		QL(148 EA per 365 days)
<i>enoxaparin sodium 30 mg/0.3ml inj soln pfs</i>	\$0-\$14.40 (Tier 4)	LOVENOX	QL(18 ML per 30 days)
<i>enoxaparin sodium 40 mg/0.4ml inj soln pfs</i>	\$0-\$14.40 (Tier 4)	LOVENOX	QL(24 ML per 30 days)
<i>enoxaparin sodium 60 mg/0.6ml inj soln pfs</i>	\$0-\$14.40 (Tier 4)	LOVENOX	QL(36 ML per 30 days)
<i>enoxaparin sodium 120 mg/0.8ml inj soln pfs, 80 mg/0.8ml inj soln pfs</i>	\$0-\$14.40 (Tier 4)	LOVENOX	QL(48 ML per 30 days)
<i>enoxaparin sodium 100 mg/ml inj soln pfs, 150 mg/ml inj soln pfs</i>	\$0-\$14.40 (Tier 4)	LOVENOX	QL(60 ML per 30 days)
<i>fondaparinux sodium 5 mg/0.4ml sc soln</i>	\$0-\$14.40 (Tier 4)	ARIXTRA	
<i>fondaparinux sodium 2.5 mg/0.5ml sc soln</i>	\$0-\$14.40 (Tier 4)	ARIXTRA	QL(15 ML per 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>fondaparinux sodium 7.5 mg/0.6ml sc soln</i>	\$0-\$14.40 (Tier 4)	ARIXTRA	QL(18 ML per 30 days)
<i>fondaparinux sodium 10 mg/0.8ml sc soln</i>	\$0-\$14.40 (Tier 5)	ARIXTRA	QL(24 ML per 30 days)
FRAGMIN 2500 unit/0.2ml sc soln pfs	\$0-\$14.40 (Tier 4)		
FRAGMIN 10000 unit/ml sc soln pfs, 12500 unit/0.5ml sc soln pfs, 15000 unit/0.6ml sc soln pfs, 18000 unit/0.72ml sc soln pfs, 5000 unit/0.2ml sc soln pfs, 7500 unit/0.3ml sc soln pfs, 95000 unit/3.8ml sc soln	\$0-\$14.40 (Tier 5)		
<i>heparin sodium (porcine) 5000 unit/ml inj soln</i>	\$0-\$14.40 (Tier 3)		
<i>jantoven 1 mg tab, 10 mg tab, 2 mg tab, 2.5 mg tab, 3 mg tab, 4 mg tab, 5 mg tab, 6 mg tab, 7.5 mg tab</i>	\$0-\$5.80 (Tier 1)	COUMADIN	
<i>rivaroxaban 2.5 mg tab</i>	\$0-\$14.40 (Tier 4)		QL(360 EA per 30 days)
<i>rivaroxaban 1 mg/ml susp</i>	\$0-\$14.40 (Tier 4)		QL(600 ML per 30 days)
<i>warfarin sodium 1 mg tab, 10 mg tab, 2 mg tab, 2.5 mg tab, 3 mg tab, 4 mg tab, 5 mg tab, 6 mg tab, 7.5 mg tab</i>	\$0-\$5.80 (Tier 1)	COUMADIN	
XARELTO 10 mg tab, 20 mg tab	\$0-\$14.40 (Tier 3)		QL(30 EA per 30 days)
XARELTO 15 mg tab	\$0-\$14.40 (Tier 3)		QL(60 EA per 30 days)
Blood Products And Modifiers, Other			
<i>anagrelide hcl 0.5 mg cap, 1 mg cap</i>	\$0-\$14.40 (Tier 3)	AGRYLIN	
<i>eltrombopag olamine 12.5 mg tab, 25 mg tab</i>	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
<i>eltrombopag olamine 50 mg tab, 75 mg tab</i>	\$0-\$14.40 (Tier 5)		PA, QL(60 EA per 30 days)
<i>eltrombopag olamine 12.5 mg pckt, 25 mg pckt</i>	\$0-\$14.40 (Tier 5)		PA, QL(180 EA per 30 days)
LEUKINE 250 mcg inj soln	\$0-\$14.40 (Tier 5)		PA
NEULASTA 6 mg/0.6ml sc soln pfs	\$0-\$14.40 (Tier 5)		PA, QL(1.2 ML per 28 days)
PROCRIT 10000 unit/ml inj soln, 2000 unit/ml inj soln, 3000 unit/ml inj soln, 4000 unit/ml inj soln	\$0-\$14.40 (Tier 4)		PA
PROCRIT 20000 unit/ml inj soln, 40000 unit/ml inj soln	\$0-\$14.40 (Tier 5)		PA
RETACRIT 10000 unit/ml inj soln, 2000 unit/ml inj soln, 20000 unit/ml inj soln, 3000 unit/ml inj soln, 4000 unit/ml inj soln	\$0-\$14.40 (Tier 4)		PA
RETACRIT 40000 unit/ml inj soln	\$0-\$14.40 (Tier 5)		PA
UDENYCA 6 mg/0.6ml sc soln auto-inj, 6 mg/0.6ml sc soln pfs	\$0-\$14.40 (Tier 5)		PA, QL(1.2 ML per 28 days)
XOLREMDI 100 mg cap	\$0-\$14.40 (Tier 5)		PA, QL(120 EA per 30 days)
ZARXIO 300 mcg/0.5ml inj soln pfs, 480 mcg/0.8ml inj soln pfs	\$0-\$14.40 (Tier 5)		
Hemostasis Agents			
<i>tranexamic acid 650 mg tab</i>	\$0-\$14.40 (Tier 3)	LYSTEDA	
Platelet Modifying Agents			
<i>aspirin-dipyridamole er 25-200 mg cap er 12 hr</i>	\$0-\$14.40 (Tier 4)	AGGRENOX	
CABLIVI 11 mg inj kit	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
<i>cilostazol 100 mg tab, 50 mg tab</i>	\$0-\$5.80 (Tier 2)	PLETAL	
<i>clopidogrel bisulfate 75 mg tab</i>	\$0-\$5.80 (Tier 1)	PLAVIX	
<i>clopidogrel bisulfate 300 mg tab</i>	\$0-\$5.80 (Tier 2)	PLAVIX	

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
DOPTelet 20 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(90 EA per 30 days)
<i>prasugrel hcl 10 mg tab, 5 mg tab</i>	\$0-\$5.80 (Tier 2)	EFFIENT	
<i>ticagrelor 60 mg tab, 90 mg tab</i>	\$0-\$14.40 (Tier 3)		
CARDIOVASCULAR AGENTS			
Alpha-adrenergic Agonists			
<i>clonidine 0.1 mg/24hr tdwk patch, 0.2 mg/24hr tdwk patch, 0.3 mg/24hr tdwk patch</i>	\$0-\$14.40 (Tier 4)	CATAPRES-TTS	
<i>clonidine hcl 0.05 mg tab</i>	\$0-\$5.80 (Tier 1)		
<i>clonidine hcl 0.1 mg tab, 0.2 mg tab, 0.3 mg tab</i>	\$0-\$5.80 (Tier 1)	CATAPRES	
<i>droxidopa 100 mg cap</i>	\$0-\$14.40 (Tier 4)	NORTHERA	PA, QL(90 EA per 30 days)
<i>droxidopa 200 mg cap, 300 mg cap</i>	\$0-\$14.40 (Tier 5)	NORTHERA	PA, QL(180 EA per 30 days)
<i>guanfacine hcl 1 mg tab, 2 mg tab</i>	\$0-\$14.40 (Tier 4)	TENEX	
<i>methyldopa 250 mg tab, 500 mg tab</i>	\$0-\$14.40 (Tier 4)	ALDOMET	
<i>midodrine hcl 10 mg tab, 2.5 mg tab, 5 mg tab</i>	\$0-\$5.80 (Tier 2)	PROAMATINE	
Alpha-adrenergic Blocking Agents			
<i>prazosin hcl 1 mg cap, 2 mg cap, 5 mg cap</i>	\$0-\$5.80 (Tier 2)	MINIPRESS	
Angiotensin II Receptor Antagonists			
<i>azilsartan medoxomil 40 mg tab, 80 mg tab</i>	\$0-\$14.40 (Tier 4)		
<i>candesartan cilexetil 16 mg tab, 32 mg tab, 4 mg tab, 8 mg tab</i>	\$0-\$5.80 (Tier 1)	ATACAND	
<i>irbesartan 150 mg tab, 300 mg tab, 75 mg tab</i>	\$0-\$5.80 (Tier 1)	AVAPRO	
<i>losartan potassium 100 mg tab, 25 mg tab, 50 mg tab</i>	\$0-\$5.80 (Tier 1)	COZAAR	
<i>olmesartan medoxomil 20 mg tab, 40 mg tab, 5 mg tab</i>	\$0-\$5.80 (Tier 1)	BENICAR	
<i>telmisartan 20 mg tab, 40 mg tab, 80 mg tab</i>	\$0-\$5.80 (Tier 1)	MICARDIS	
<i>valsartan 160 mg tab, 320 mg tab, 40 mg tab, 80 mg tab</i>	\$0-\$5.80 (Tier 1)	DIOVAN	
Angiotensin-converting Enzyme (ace) Inhibitors			
<i>benazepril hcl 10 mg tab, 20 mg tab, 40 mg tab, 5 mg tab</i>	\$0-\$5.80 (Tier 1)	LOTENSIN	
<i>captopril 100 mg tab, 12.5 mg tab, 25 mg tab, 50 mg tab</i>	\$0-\$5.80 (Tier 2)	CAPOTEN	
<i>enalapril maleate 10 mg tab, 2.5 mg tab, 20 mg tab, 5 mg tab</i>	\$0-\$5.80 (Tier 1)	VASOTEC	
<i>fosinopril sodium 10 mg tab, 20 mg tab, 40 mg tab</i>	\$0-\$5.80 (Tier 1)	MONOPRIL	
<i>lisinopril 10 mg tab, 2.5 mg tab, 20 mg tab, 30 mg tab, 40 mg tab, 5 mg tab</i>	\$0-\$5.80 (Tier 1)	ZESTRIL	
<i>moexipril hcl 15 mg tab, 7.5 mg tab</i>	\$0-\$5.80 (Tier 2)	UNIVASC	
<i>perindopril erbumine 2 mg tab, 4 mg tab, 8 mg tab</i>	\$0-\$5.80 (Tier 2)	ACEON	
<i>quinapril hcl 10 mg tab, 20 mg tab, 40 mg tab, 5 mg tab</i>	\$0-\$5.80 (Tier 1)	ACCUPRIL	
<i>ramipril 1.25 mg cap, 10 mg cap, 2.5 mg cap, 5 mg cap</i>	\$0-\$5.80 (Tier 1)	ALTACE	
<i>trandolapril 1 mg tab, 2 mg tab, 4 mg tab</i>	\$0-\$5.80 (Tier 1)	MAVIK	
Antiarrhythmics			
<i>amiodarone hcl 200 mg tab</i>	\$0-\$5.80 (Tier 1)	CORDARONE	

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>amiodarone hcl 100 mg tab, 400 mg tab</i>	\$0-\$14.40 (Tier 3)	CORDARONE	
<i>digoxin 125 mcg tab, 250 mcg tab</i>	\$0-\$5.80 (Tier 2)	LANOXIN	
<i>digoxin 0.05 mg/ml soln</i>	\$0-\$14.40 (Tier 4)	LANOXIN	
<i>disopyramide phosphate 100 mg cap, 150 mg cap</i>	\$0-\$14.40 (Tier 3)	NORPACE	
<i>dofetilide 125 mcg cap, 250 mcg cap, 500 mcg cap</i>	\$0-\$14.40 (Tier 4)	TIKOSYN	
<i>flecainide acetate 100 mg tab, 150 mg tab, 50 mg tab</i>	\$0-\$5.80 (Tier 2)	TAMBOCOR	
<i>mexiletine hcl 150 mg cap</i>	\$0-\$14.40 (Tier 3)	MEXITIL	
<i>mexiletine hcl 200 mg cap, 250 mg cap</i>	\$0-\$14.40 (Tier 4)	MEXITIL	
<i>MULTAQ 400 mg tab</i>	\$0-\$14.40 (Tier 3)		
<i>pacerone 200 mg tab</i>	\$0-\$5.80 (Tier 2)	CORDARONE	
<i>pacerone 100 mg tab</i>	\$0-\$14.40 (Tier 3)	CORDARONE	
<i>propafenone hcl 150 mg tab, 225 mg tab, 300 mg tab</i>	\$0-\$5.80 (Tier 2)	RYTHMOL	
<i>propafenone hcl er 225 mg cap er 12 hr, 325 mg cap er 12 hr, 425 mg cap er 12 hr</i>	\$0-\$14.40 (Tier 4)	RYTHMOL SR	
<i>quinidine sulfate 200 mg tab, 300 mg tab</i>	\$0-\$14.40 (Tier 4)		
<i>sotalol hcl 120 mg tab, 160 mg tab, 240 mg tab, 80 mg tab</i>	\$0-\$5.80 (Tier 2)	BETAPACE	
<i>sotalol hcl (af) 120 mg tab, 160 mg tab, 80 mg tab</i>	\$0-\$5.80 (Tier 2)	BETAPACE AF	
Beta-adrenergic Blocking Agents			
<i>acebutolol hcl 200 mg cap, 400 mg cap</i>	\$0-\$5.80 (Tier 2)	SECTRAL	
<i>atenolol 100 mg tab, 25 mg tab, 50 mg tab</i>	\$0-\$5.80 (Tier 1)	TENORMIN	
<i>betaxolol hcl 10 mg tab, 20 mg tab</i>	\$0-\$14.40 (Tier 3)	KERLONE	
<i>bisoprolol fumarate 2.5 mg tab</i>	\$0-\$5.80 (Tier 2)		
<i>bisoprolol fumarate 10 mg tab, 5 mg tab</i>	\$0-\$5.80 (Tier 2)	ZEBETA	
<i>carvedilol 12.5 mg tab, 25 mg tab, 3.125 mg tab, 6.25 mg tab</i>	\$0-\$5.80 (Tier 1)	COREG	
<i>labetalol hcl 100 mg tab, 200 mg tab, 300 mg tab</i>	\$0-\$5.80 (Tier 2)	NORMODYNE	
<i>metoprolol succinate er 100 mg tab er 24 hr, 200 mg tab er 24 hr, 25 mg tab er 24 hr, 50 mg tab er 24 hr</i>	\$0-\$5.80 (Tier 1)	TOPROL XL	
<i>metoprolol tartrate 37.5 mg tab, 75 mg tab</i>	\$0-\$5.80 (Tier 1)		
<i>metoprolol tartrate 100 mg tab, 25 mg tab, 50 mg tab</i>	\$0-\$5.80 (Tier 1)	LOPRESSOR	
<i>nadolol 20 mg tab, 40 mg tab, 80 mg tab</i>	\$0-\$5.80 (Tier 2)	CORGARD	
<i>nebivolol hcl 10 mg tab, 2.5 mg tab, 20 mg tab, 5 mg tab</i>	\$0-\$14.40 (Tier 3)	BYSTOLIC	
<i>pindolol 10 mg tab, 5 mg tab</i>	\$0-\$14.40 (Tier 3)	VISKEN	
<i>propranolol hcl 10 mg tab, 20 mg tab, 40 mg tab, 60 mg tab, 80 mg tab</i>	\$0-\$5.80 (Tier 2)	INDERAL	
<i>propranolol hcl er 120 mg cap er 24 hr, 160 mg cap er 24 hr, 60 mg cap er 24 hr, 80 mg cap er 24 hr</i>	\$0-\$5.80 (Tier 2)	INDERAL LA	
Calcium Channel Blocking Agents, Dihydropyridines			

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>amlodipine besylate 10 mg tab, 2.5 mg tab, 5 mg tab</i>	\$0-\$5.80 (Tier 1)	NORVASC	
<i>felodipine er 10 mg tab er 24 hr, 2.5 mg tab er 24 hr, 5 mg tab er 24 hr</i>	\$0-\$5.80 (Tier 2)	PLENDIL	
<i>nifedipine er 30 mg tab er 24 hr, 60 mg tab er 24 hr, 90 mg tab er 24 hr</i>	\$0-\$5.80 (Tier 2)	ADALAT CC	
<i>nifedipine er osmotic release 30 mg tab er 24 hr, 60 mg tab er 24 hr, 90 mg tab er 24 hr</i>	\$0-\$5.80 (Tier 2)	PROCARDIA XL	
<i>nimodipine 30 mg cap</i>	\$0-\$14.40 (Tier 4)	NIMOTOP	
Calcium Channel Blocking Agents, Nondihydropyridines			
<i>cartia xt 120 mg cap er 24 hr, 180 mg cap er 24 hr, 240 mg cap er 24 hr, 300 mg cap er 24 hr</i>	\$0-\$5.80 (Tier 2)	CARDIZEM CD	
<i>dilt-xr 120 mg cap er 24 hr, 180 mg cap er 24 hr, 240 mg cap er 24 hr</i>	\$0-\$5.80 (Tier 2)	DILACOR XR	
<i>diltiazem hcl 120 mg tab, 30 mg tab, 60 mg tab, 90 mg tab</i>	\$0-\$5.80 (Tier 2)	CARDIZEM	
<i>diltiazem hcl er 120 mg tab er 24 hr, 180 mg tab er 24 hr, 240 mg tab er 24 hr, 300 mg tab er 24 hr, 360 mg tab er 24 hr, 420 mg tab er 24 hr</i>	\$0-\$14.40 (Tier 4)		
<i>diltiazem hcl er 120 mg cap er 12 hr, 60 mg cap er 12 hr, 90 mg cap er 12 hr</i>	\$0-\$14.40 (Tier 4)	CARDIZEM	
<i>diltiazem hcl er beads 360 mg cap er 24 hr, 420 mg cap er 24 hr</i>	\$0-\$5.80 (Tier 2)	TIAZAC	
<i>diltiazem hcl er coated beads 120 mg cap er 24 hr, 180 mg cap er 24 hr, 240 mg cap er 24 hr, 300 mg cap er 24 hr</i>	\$0-\$5.80 (Tier 2)	CARDIZEM CD	
<i>matzim la 180 mg tab er 24 hr, 240 mg tab er 24 hr, 300 mg tab er 24 hr, 360 mg tab er 24 hr, 420 mg tab er 24 hr</i>	\$0-\$14.40 (Tier 4)		
<i>tiadylt er 120 mg cap er 24 hr, 180 mg cap er 24 hr, 240 mg cap er 24 hr, 300 mg cap er 24 hr, 360 mg cap er 24 hr, 420 mg cap er 24 hr</i>	\$0-\$5.80 (Tier 2)	TIAZAC	
<i>verapamil hcl 120 mg tab, 40 mg tab, 80 mg tab</i>	\$0-\$5.80 (Tier 1)	CALAN	
<i>verapamil hcl er 120 mg tab er, 180 mg tab er, 240 mg tab er</i>	\$0-\$5.80 (Tier 2)	CALAN	
<i>verapamil hcl er 120 mg cap er 24 hr, 180 mg cap er 24 hr, 240 mg cap er 24 hr, 360 mg cap er 24 hr</i>	\$0-\$14.40 (Tier 3)	VERELAN	
Cardiovascular Agents, Other			
<i>aliskiren fumarate 150 mg tab, 300 mg tab</i>	\$0-\$5.80 (Tier 2)	TEKTURNA	
<i>amiloride-hydrochlorothiazide 5-50 mg tab</i>	\$0-\$5.80 (Tier 2)	MODURETIC	
<i>amlodipine besy-benazepril hcl 10-20 mg cap, 10-40 mg cap, 2.5-10 mg cap, 5-10 mg cap, 5-20 mg cap, 5-40 mg cap</i>	\$0-\$5.80 (Tier 1)	LOTREL	
<i>amlodipine besylate-valsartan 10-160 mg tab, 10-320 mg tab, 5-160 mg tab, 5-320 mg tab</i>	\$0-\$5.80 (Tier 1)	EXFORGE	
<i>amlodipine-olmesartan 10-20 mg tab, 10-40 mg tab, 5-20 mg tab, 5-40 mg tab</i>	\$0-\$5.80 (Tier 1)	AZOR	
<i>atenolol-chlorthalidone 100-25 mg tab, 50-25 mg tab</i>	\$0-\$5.80 (Tier 2)	TENORETIC	

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>benazepril-hydrochlorothiazide 10-12.5 mg tab, 20-12.5 mg tab, 20-25 mg tab, 5-6.25 mg tab</i>	\$0-\$5.80 (Tier 1)	LOTENSIN HCT	
<i>bisoprolol-hydrochlorothiazide 10-6.25 mg tab, 2.5-6.25 mg tab, 5-6.25 mg tab</i>	\$0-\$5.80 (Tier 2)	ZIAC	
<i>candesartan cilexetil-hctz 16-12.5 mg tab, 32-12.5 mg tab, 32-25 mg tab</i>	\$0-\$5.80 (Tier 1)	ATACAND HCT	
<i>enalapril-hydrochlorothiazide 10-25 mg tab, 5-12.5 mg tab</i>	\$0-\$5.80 (Tier 1)	VASERETIC	
FILSPARI 200 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
FILSPARI 400 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(60 EA per 30 days)
<i>fosinopril sodium-hctz 10-12.5 mg tab, 20-12.5 mg tab</i>	\$0-\$5.80 (Tier 2)	MONOPRIL-HCT	
<i>irbesartan-hydrochlorothiazide 150-12.5 mg tab, 300-12.5 mg tab</i>	\$0-\$5.80 (Tier 1)	AVALIDE	
<i>isosorb dinitrate-hydralazine 20-37.5 mg tab</i>	\$0-\$14.40 (Tier 4)	BIDIL	
<i>ivabradine hcl 5 mg tab, 7.5 mg tab</i>	\$0-\$14.40 (Tier 4)		QL(60 EA per 30 days)
<i>lisinopril-hydrochlorothiazide 10-12.5 mg tab, 20-12.5 mg tab, 20-25 mg tab</i>	\$0-\$5.80 (Tier 1)	ZESTORETIC	
<i>losartan potassium-hctz 100-12.5 mg tab, 100-25 mg tab, 50-12.5 mg tab</i>	\$0-\$5.80 (Tier 1)	HYZAAR	
<i>metyrosine 250 mg cap</i>	\$0-\$14.40 (Tier 5)	DEMSEER	PA
<i>olmesartan medoxomil-hctz 20-12.5 mg tab, 40-12.5 mg tab, 40-25 mg tab</i>	\$0-\$5.80 (Tier 1)	BENICAR HCT	
<i>pentoxifylline er 400 mg tab er</i>	\$0-\$5.80 (Tier 2)	TRENTAL	
<i>quinapril-hydrochlorothiazide 10-12.5 mg tab, 20-12.5 mg tab, 20-25 mg tab</i>	\$0-\$5.80 (Tier 1)	ACCURETIC	
<i>ranolazine er 1000 mg tab er 12 hr, 500 mg tab er 12 hr</i>	\$0-\$14.40 (Tier 3)	RANEXA	
<i>sacubitril-valsartan 49-51 mg tab, 97-103 mg tab</i>	\$0-\$14.40 (Tier 3)		QL(60 EA per 30 days)
<i>sacubitril-valsartan 24-26 mg tab</i>	\$0-\$14.40 (Tier 3)		QL(180 EA per 30 days)
<i>spironolactone-hctz 25-25 mg tab</i>	\$0-\$5.80 (Tier 2)	ALDACTAZIDE	
<i>telmisartan-hctz 40-12.5 mg tab, 80-12.5 mg tab, 80-25 mg tab</i>	\$0-\$5.80 (Tier 1)	MICARDIS-HCT	
<i>triamterene-hctz 37.5-25 mg cap</i>	\$0-\$5.80 (Tier 1)	DYAZIDE	
<i>triamterene-hctz 37.5-25 mg tab, 75-50 mg tab</i>	\$0-\$5.80 (Tier 1)	MAXZIDE	
<i>valsartan-hydrochlorothiazide 160-12.5 mg tab, 160-25 mg tab, 320-12.5 mg tab, 320-25 mg tab, 80-12.5 mg tab</i>	\$0-\$5.80 (Tier 1)	DIOVAN HCT	
VYNDAMAX 61 mg cap	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
Diuretics, Loop			
<i>bumetanide 0.5 mg tab, 1 mg tab, 2 mg tab</i>	\$0-\$5.80 (Tier 2)	BUMEX	
<i>bumetanide 0.25 mg/ml inj soln</i>	\$0-\$5.80 (Tier 2)	BUMEX	
<i>furosemide 20 mg tab, 40 mg tab, 80 mg tab</i>	\$0-\$5.80 (Tier 1)	LASIX	
<i>furosemide 10 mg/ml soln, 8 mg/ml soln</i>	\$0-\$5.80 (Tier 1)	LASIX	
<i>furosemide 10 mg/ml inj soln</i>	\$0-\$5.80 (Tier 2)	LASIX	
<i>torsemide 10 mg tab, 100 mg tab, 20 mg tab, 5 mg tab</i>	\$0-\$5.80 (Tier 1)	DEMADEX	

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
Diuretics, Potassium-sparing			
<i>amiloride hcl 5 mg tab</i>	\$0-\$5.80 (Tier 1)	MIDAMOR	
<i>triamterene 100 mg cap, 50 mg cap</i>	\$0-\$14.40 (Tier 4)	DYRENIUM	
Diuretics, Thiazide			
<i>chlorthalidone 25 mg tab, 50 mg tab</i>	\$0-\$5.80 (Tier 2)	HYGROTON	
<i>hydrochlorothiazide 25 mg tab, 50 mg tab</i>	\$0-\$5.80 (Tier 1)	HYDRODIURIL	
<i>hydrochlorothiazide 12.5 mg cap, 12.5 mg tab</i>	\$0-\$5.80 (Tier 1)	MICROZIDE	
<i>indapamide 1.25 mg tab, 2.5 mg tab</i>	\$0-\$5.80 (Tier 1)	LOZOL	
<i>metolazone 10 mg tab, 2.5 mg tab, 5 mg tab</i>	\$0-\$5.80 (Tier 2)	ZAROXOLYN	
Dyslipidemics, Fibric Acid Derivatives			
<i>fenofibrate 145 mg tab, 160 mg tab, 48 mg tab, 54 mg tab</i>	\$0-\$5.80 (Tier 2)	TRICOR	
<i>fenofibrate micronized 134 mg cap, 200 mg cap, 67 mg cap</i>	\$0-\$5.80 (Tier 2)	TRICOR	
<i>fenofibric acid 135 mg cap dr, 45 mg cap dr</i>	\$0-\$14.40 (Tier 3)	TRILIPIX	
<i>gemfibrozil 600 mg tab</i>	\$0-\$5.80 (Tier 2)	LOPID	
Dyslipidemics, Hmg Coa Reductase Inhibitors			
<i>atorvastatin calcium 10 mg tab, 20 mg tab, 40 mg tab, 80 mg tab</i>	\$0-\$5.80 (Tier 1)	LIPITOR	
<i>fluvastatin sodium 20 mg cap, 40 mg cap</i>	\$0-\$14.40 (Tier 4)	LESCOL	
<i>fluvastatin sodium er 80 mg tab er 24 hr</i>	\$0-\$14.40 (Tier 4)	LESCOL XL	
<i>lovastatin 10 mg tab, 20 mg tab, 40 mg tab</i>	\$0-\$5.80 (Tier 1)	MEVACOR	
<i>pitavastatin calcium 1 mg tab, 2 mg tab, 4 mg tab</i>	\$0-\$14.40 (Tier 4)		
<i>pravastatin sodium 10 mg tab, 20 mg tab, 40 mg tab, 80 mg tab</i>	\$0-\$5.80 (Tier 1)	PRAVACHOL	
<i>rosuvastatin calcium 10 mg tab, 20 mg tab, 40 mg tab, 5 mg tab</i>	\$0-\$5.80 (Tier 1)	CRESTOR	
<i>simvastatin 10 mg tab, 20 mg tab, 40 mg tab, 5 mg tab, 80 mg tab</i>	\$0-\$5.80 (Tier 1)	ZOCOR	
Dyslipidemics, Other			
<i>cholestyramine 4 gm pckt</i>	\$0-\$14.40 (Tier 3)	QUESTRAN	
<i>cholestyramine light 4 gm pckt</i>	\$0-\$14.40 (Tier 4)	QUESTRAN LIGHT	
<i>colesevelam hcl 625 mg tab</i>	\$0-\$14.40 (Tier 4)	WELCHOL	
<i>colestipol hcl 1 gm tab</i>	\$0-\$14.40 (Tier 3)	COLESTID	
<i>ezetimibe 10 mg tab</i>	\$0-\$5.80 (Tier 2)	ZETIA	
<i>ezetimibe-simvastatin 10-10 mg tab, 10-20 mg tab, 10-40 mg tab, 10-80 mg tab</i>	\$0-\$5.80 (Tier 2)	VYTORIN	
<i>icosapent ethyl 0.5 gm cap, 1 gm cap</i>	\$0-\$14.40 (Tier 4)	VASCEPA	
NEXLETOL 180 mg tab	\$0-\$14.40 (Tier 4)		PA, QL(30 EA per 30 days)
NEXLIZET 180-10 mg tab	\$0-\$14.40 (Tier 4)		PA, QL(30 EA per 30 days)
<i>niacin er (antihyperlipidemic) 1000 mg tab er, 500 mg tab er, 750 mg tab er</i>	\$0-\$14.40 (Tier 3)	NIASPAN	
<i>omega-3-acid ethyl esters 1 gm cap</i>	\$0-\$14.40 (Tier 3)	LOVAZA	
PRALUENT 150 mg/ml sc soln auto-inj, 75 mg/ml sc soln auto-inj	\$0-\$14.40 (Tier 3)		PA, QL(2 ML per 28 days)
<i>prevalite 4 gm pckt</i>	\$0-\$14.40 (Tier 4)	QUESTRAN LIGHT	
REPATHA 140 mg/ml sc soln pfs	\$0-\$14.40 (Tier 3)		PA, QL(3 ML per 28 days)
REPATHA SURECLICK 140 mg/ml sc soln auto-inj	\$0-\$14.40 (Tier 3)		PA, QL(3 ML per 28 days)

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
TRYNGOLZA 50 mg/0.8ml sc soln auto-inj, 80 mg/0.8ml sc soln auto-inj	\$0-\$14.40 (Tier 5)		PA, QL(0.8 ML per 28 days)
Mineralocorticoid Receptor Antagonists			
<i>eplerenone 25 mg tab, 50 mg tab</i>	\$0-\$14.40 (Tier 4)	INSPIRA	
KERENDIA 10 mg tab, 20 mg tab, 40 mg tab	\$0-\$14.40 (Tier 4)		PA, QL(30 EA per 30 days)
<i>spironolactone 100 mg tab, 25 mg tab, 50 mg tab</i>	\$0-\$5.80 (Tier 1)	ALDACTONE	
Sodium-glucose Co-transporter 2 Inhibitors (sglt2i)			
<i>dapagliflozin 10 mg tab, 5 mg tab</i>	\$0-\$14.40 (Tier 3)		QL(30 EA per 30 days)
FARXIGA 10 mg tab, 5 mg tab	\$0-\$14.40 (Tier 3)		QL(30 EA per 30 days), ST
JARDIANCE 10 mg tab, 25 mg tab	\$0-\$14.40 (Tier 3)		QL(30 EA per 30 days)
Vasodilators, Direct-acting Arterial			
<i>hydralazine hcl 10 mg tab, 100 mg tab, 25 mg tab, 50 mg tab</i>	\$0-\$5.80 (Tier 1)	APRESOLINE	
<i>minoxidil 10 mg tab, 2.5 mg tab</i>	\$0-\$5.80 (Tier 2)	LONITEN	
Vasodilators, Direct-acting Arterial/venous			
<i>isosorbide dinitrate 10 mg tab, 20 mg tab, 30 mg tab, 5 mg tab</i>	\$0-\$5.80 (Tier 2)	ISORDIL TITRADOSE	
<i>isosorbide mononitrate 10 mg tab, 20 mg tab</i>	\$0-\$5.80 (Tier 2)	MONOKET	
<i>isosorbide mononitrate er 120 mg tab er 24 hr, 30 mg tab er 24 hr, 60 mg tab er 24 hr</i>	\$0-\$5.80 (Tier 1)	IMDUR	
<i>nitro-bid 2 % td oint</i>	\$0-\$14.40 (Tier 4)		
<i>nitroglycerin 0.1 mg/hr td patch 24hr, 0.2 mg/hr td patch 24hr, 0.4 mg/hr td patch 24hr, 0.6 mg/hr td patch 24hr</i>	\$0-\$5.80 (Tier 2)	NITRO-DUR	
<i>nitroglycerin 0.4 mg/spray tl soln</i>	\$0-\$14.40 (Tier 4)	NITROLINGUAL	
<i>nitroglycerin 0.3 mg tab subl, 0.4 mg tab subl, 0.6 mg tab subl</i>	\$0-\$5.80 (Tier 2)	NITROSTAT	
VERQUVO 10 mg tab, 2.5 mg tab, 5 mg tab	\$0-\$14.40 (Tier 3)		PA, QL(30 EA per 30 days)
CENTRAL NERVOUS SYSTEM AGENTS			
Attention Deficit Hyperactivity Disorder Agents, Amphetamines			
<i>amphetamine-dextroamphet er 10 mg cap er 24 hr, 15 mg cap er 24 hr, 20 mg cap er 24 hr, 25 mg cap er 24 hr, 30 mg cap er 24 hr, 5 mg cap er 24 hr</i>	\$0-\$14.40 (Tier 3)	ADDERALL XR	QL(60 EA per 30 days)
<i>amphetamine-dextroamphetamine 10 mg tab, 12.5 mg tab, 15 mg tab, 20 mg tab, 30 mg tab, 5 mg tab, 7.5 mg tab</i>	\$0-\$14.40 (Tier 3)	ADDERALL	QL(90 EA per 30 days)
<i>dextroamphetamine sulfate 5 mg tab</i>	\$0-\$14.40 (Tier 4)	DEXTROSTAT	QL(90 EA per 30 days)
<i>dextroamphetamine sulfate 10 mg tab</i>	\$0-\$14.40 (Tier 4)	DEXTROSTAT	QL(180 EA per 30 days)
Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines			
<i>atomoxetine hcl 100 mg cap, 18 mg cap, 25 mg cap, 40 mg cap, 60 mg cap, 80 mg cap</i>	\$0-\$14.40 (Tier 4)	STRATTERA	QL(30 EA per 30 days)
<i>atomoxetine hcl 10 mg cap</i>	\$0-\$14.40 (Tier 4)	STRATTERA	QL(60 EA per 30 days)
<i>dexmethylphenidate hcl 10 mg tab, 2.5 mg tab, 5 mg tab</i>	\$0-\$14.40 (Tier 3)	FOCALIN	QL(60 EA per 30 days)
<i>guanfacine hcl er 1 mg tab er 24 hr, 2 mg tab er 24 hr, 3 mg tab er 24 hr, 4 mg tab er 24 hr</i>	\$0-\$14.40 (Tier 3)	INTUNIV	
<i>methylphenidate hcl 5 mg/5ml soln</i>	\$0-\$14.40 (Tier 4)	METHYLIN	

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>methylphenidate hcl 10 mg tab, 20 mg tab, 5 mg tab</i>	\$0-\$5.80 (Tier 2)	RITALIN	QL(90 EA per 30 days)
<i>methylphenidate hcl er (osm) 18 mg tab er, 27 mg tab er, 54 mg tab er</i>	\$0-\$14.40 (Tier 4)	CONCERTA	QL(30 EA per 30 days)
<i>methylphenidate hcl er (osm) 36 mg tab er</i>	\$0-\$14.40 (Tier 4)	CONCERTA	QL(60 EA per 30 days)
Central Nervous System, Other			
AUSTEDO 12 mg tab, 6 mg tab, 9 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(120 EA per 30 days)
AUSTEDO XR 12 mg tab er 24 hr, 18 mg tab er 24 hr, 24 mg tab er 24 hr, 30 mg tab er 24 hr, 36 mg tab er 24 hr, 42 mg tab er 24 hr, 48 mg tab er 24 hr, 6 mg tab er 24 hr	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
AUSTEDO XR PATIENT TITRATION 12 & 18 & 24 & 30 mg tab er pack	\$0-\$14.40 (Tier 5)		PA, QL(56 EA per 365 days)
<i>butalbital-apap-caffeine 50-325-40 mg tab</i>	\$0-\$14.40 (Tier 3)	ESGIC	
COBENFY 100-20 mg cap, 125-30 mg cap, 50-20 mg cap	\$0-\$14.40 (Tier 5)		PA, QL(60 EA per 30 days)
COBENFY STARTER PACK 50-20 & 100-20 mg cap pack	\$0-\$14.40 (Tier 5)		PA, QL(112 EA per 365 days)
<i>dextromethorphan-quinidine 20-10 mg cap</i>	\$0-\$14.40 (Tier 5)		PA, QL(60 EA per 30 days)
INGREZZA 60 mg cap, 60 mg cap sprinkle, 80 mg cap, 80 mg cap sprinkle	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
INGREZZA 40 & 80 mg cap pack	\$0-\$14.40 (Tier 5)		PA, QL(56 EA per 365 days)
INGREZZA 40 mg cap, 40 mg cap sprinkle	\$0-\$14.40 (Tier 5)		PA, QL(60 EA per 30 days)
<i>riluzole 50 mg tab</i>	\$0-\$14.40 (Tier 4)	RILUTEK	
<i>tetrabenazine 12.5 mg tab</i>	\$0-\$14.40 (Tier 4)	XENAZINE	PA, QL(90 EA per 30 days)
<i>tetrabenazine 25 mg tab</i>	\$0-\$14.40 (Tier 5)	XENAZINE	PA, QL(120 EA per 30 days)
VEOZAH 45 mg tab	\$0-\$14.40 (Tier 4)		PA, QL(30 EA per 30 days)
Fibromyalgia Agents			
<i>milnacipran hcl 100 mg tab, 12.5 mg tab, 25 mg tab, 50 mg tab</i>	\$0-\$14.40 (Tier 3)		QL(60 EA per 30 days)
SAVELLA 100 mg tab, 12.5 mg tab, 25 mg tab, 50 mg tab	\$0-\$14.40 (Tier 3)		QL(60 EA per 30 days)
Multiple Sclerosis Agents			
AVONEX PEN 30 mcg/0.5ml im auto-inj kit	\$0-\$14.40 (Tier 5)		PA, QL(4 EA per 28 days)
AVONEX PREFILLED 30 mcg/0.5ml im pfs kit	\$0-\$14.40 (Tier 5)		PA, QL(4 EA per 28 days)
BETASERON 0.3 mg sc kit	\$0-\$14.40 (Tier 5)		PA, QL(15 EA per 30 days)
<i>dalfampridine er 10 mg tab er 12 hr</i>	\$0-\$14.40 (Tier 3)	AMPYRA	PA, QL(60 EA per 30 days)
<i>dimethyl fumarate 120 mg cap dr, 240 mg cap dr</i>	\$0-\$14.40 (Tier 4)	TECFIDERA	PA, QL(60 EA per 30 days)
<i>dimethyl fumarate starter pack 120 & 240 mg cap dr pack</i>	\$0-\$14.40 (Tier 4)	TECFIDERA STARTER PACK	PA, QL(120 EA per 365 days)
<i> fingolimod hcl 0.5 mg cap</i>	\$0-\$14.40 (Tier 5)	GILENYA	PA, QL(30 EA per 30 days)
<i>glatiramer acetate 40 mg/ml sc soln pfs</i>	\$0-\$14.40 (Tier 5)	COPAXONE	PA, QL(12 ML per 28 days)
<i>glatiramer acetate 20 mg/ml sc soln pfs</i>	\$0-\$14.40 (Tier 5)	COPAXONE	PA, QL(30 ML per 30 days)
KESIMPTA 20 mg/0.4ml sc soln auto-inj	\$0-\$14.40 (Tier 5)		PA, QL(0.4 ML per 28 days)
MAYZENT 1 mg tab, 2 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
MAYZENT 0.25 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(120 EA per 30 days)
MAYZENT STARTER PACK 7 x 0.25 mg tab pack	\$0-\$14.40 (Tier 4)		PA, QL(14 EA per 365 days)
MAYZENT STARTER PACK 12 x 0.25 mg tab pack	\$0-\$14.40 (Tier 4)		PA, QL(24 EA per 365 days)
VUMERITY 231 mg cap dr	\$0-\$14.40 (Tier 5)		PA, QL(120 EA per 30 days)
ZEPOSIA 0.92 mg cap	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
ZEPOSIA 7-DAY STARTER PACK 4 x 0.23MG & 3 x 0.46mg cap pack	\$0-\$14.40 (Tier 5)		PA, QL(14 EA per 365 days)
ZEPOSIA STARTER KIT 0.23MG & 0.46MG 0.92mg(21) cap pack	\$0-\$14.40 (Tier 5)		PA, QL(56 EA per 365 days)
DENTAL AND ORAL AGENTS			
Dental And Oral Agents			
<i>chlorhexidine gluconate 0.12 % m/t soln</i>	\$0-\$5.80 (Tier 1)	PERIDEX	
<i>doxycycline hyclate 20 mg tab</i>	\$0-\$14.40 (Tier 3)	PERIOSTAT	
<i>lidocaine viscous hcl 2 % m/t soln</i>	\$0-\$5.80 (Tier 2)	XYLOCAINE	
<i>periogard 0.12 % m/t soln</i>	\$0-\$5.80 (Tier 1)	PERIDEX	
<i>pilocarpine hcl 5 mg tab, 7.5 mg tab</i>	\$0-\$14.40 (Tier 4)	SALAGEN	
<i>triamcinolone acetonide 0.1 % m/t paste</i>	\$0-\$14.40 (Tier 3)	KENALOG IN ORABASE	
DERMATOLOGICAL AGENTS			
Acne And Rosacea Agents			
<i>acitretin 10 mg cap, 17.5 mg cap, 25 mg cap</i>	\$0-\$14.40 (Tier 4)	SORIATANE	
<i>amnestem 10 mg cap, 20 mg cap, 30 mg cap, 40 mg cap</i>	\$0-\$14.40 (Tier 4)	ABSORICA	
<i>azelaic acid 15 % Topical Gel</i>	\$0-\$14.40 (Tier 4)	FINACEA	QL(100 GM per 30 days)
<i>benzoyl peroxide-erythromycin 5-3 % Topical Gel</i>	\$0-\$14.40 (Tier 4)	BENZAMYCIN	
<i>claravis 10 mg cap, 20 mg cap, 30 mg cap, 40 mg cap</i>	\$0-\$14.40 (Tier 4)	ABSORICA	
<i>clindamycin phos-benzoyl perox 1.2-5 % Topical Gel</i>	\$0-\$5.80 (Tier 2)	DUAC	
FINACEA 15 % Topical Foam	\$0-\$14.40 (Tier 3)		QL(50 GM per 30 days)
<i>isotretinoin 10 mg cap, 20 mg cap, 30 mg cap, 40 mg cap</i>	\$0-\$14.40 (Tier 4)	ABSORICA	
<i>metronidazole 0.75 % Topical Cream</i>	\$0-\$5.80 (Tier 2)	METROCREAM	
<i>metronidazole 0.75 % Topical Gel</i>	\$0-\$14.40 (Tier 3)	METROGEL	
<i>metronidazole 1 % Topical Gel</i>	\$0-\$14.40 (Tier 4)	METROGEL	
<i>tazarotene 0.1 % Topical Cream</i>	\$0-\$14.40 (Tier 4)	TAZORAC	QL(60 GM per 30 days)
<i>tretinoin 0.025 % Topical Cream</i>	\$0-\$14.40 (Tier 3)	RETIN-A	PA
<i>tretinoin 0.05 % Topical Cream</i>	\$0-\$14.40 (Tier 4)	RETIN-A	PA
<i>zenatane 10 mg cap, 20 mg cap, 30 mg cap, 40 mg cap</i>	\$0-\$14.40 (Tier 4)	ABSORICA	
Dermatitis And Pruritus Agents			
ADBRY 150 mg/ml sc soln pfs	\$0-\$14.40 (Tier 5)		PA, QL(6 ML per 28 days)
ADBRY 300 mg/2ml sc soln auto-inj	\$0-\$14.40 (Tier 5)		PA, QL(8 ML per 28 days)
<i>ala-cort 1 % Topical Cream</i>	\$0-\$5.80 (Tier 2)	ALA-CORT	

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>alclometasone dipropionate 0.05 % Topical Cream, 0.05 % Topical Ointment</i>	\$0-\$5.80 (Tier 2)	ACLOVATE	
<i>ammonium lactate 12 % Topical Cream, 12 % Topical Lotion</i>	\$0-\$5.80 (Tier 2)	LAC-HYDRIN	
<i>betamethasone dipropionate 0.05 % Topical Cream</i>	\$0-\$14.40 (Tier 3)	DIPROSONE	
<i>betamethasone dipropionate 0.05 % Topical Lotion</i>	\$0-\$14.40 (Tier 3)	DIPROSONE	
<i>betamethasone dipropionate 0.05 % Topical Ointment</i>	\$0-\$14.40 (Tier 4)	DIPROSONE	
<i>betamethasone dipropionate aug 0.05 % Topical Cream</i>	\$0-\$5.80 (Tier 2)	DIPROLENE	
<i>betamethasone dipropionate aug 0.05 % Topical Lotion</i>	\$0-\$5.80 (Tier 2)	DIPROLENE	
<i>betamethasone dipropionate aug 0.05 % Topical Ointment</i>	\$0-\$14.40 (Tier 3)	DIPROLENE	
<i>betamethasone dipropionate aug 0.05 % Topical Gel</i>	\$0-\$14.40 (Tier 4)	DIPROLENE	
<i>betamethasone valerate 0.1 % Topical Ointment</i>	\$0-\$5.80 (Tier 2)	BETA-VAL	
<i>betamethasone valerate 0.1 % Topical Cream</i>	\$0-\$14.40 (Tier 3)	BETA-VAL	
<i>betamethasone valerate 0.1 % Topical Lotion</i>	\$0-\$14.40 (Tier 3)	BETA-VAL	
<i>clobetasol prop emollient base 0.05 % Topical Cream</i>	\$0-\$5.80 (Tier 2)	TEMOVATE-E	QL(120 GM per 30 days)
<i>clobetasol propionate 0.05 % Topical Shampoo</i>	\$0-\$14.40 (Tier 4)	CLOBEX	
<i>clobetasol propionate 0.05 % Topical Foam</i>	\$0-\$5.80 (Tier 2)	OLUX	
<i>clobetasol propionate 0.05 % Topical Ointment</i>	\$0-\$5.80 (Tier 2)	TEMOVATE	QL(120 GM per 30 days)
<i>clobetasol propionate 0.05 % Topical Gel</i>	\$0-\$14.40 (Tier 3)	TEMOVATE	
<i>clobetasol propionate 0.05 % Topical Solution</i>	\$0-\$14.40 (Tier 3)	TEMOVATE	
<i>clobetasol propionate 0.05 % Topical Cream</i>	\$0-\$5.80 (Tier 2)	TEMOVATE-E	
<i>desonide 0.05 % Topical Ointment</i>	\$0-\$5.80 (Tier 2)	DESOWEN	QL(120 GM per 30 days)
<i>desonide 0.05 % Topical Cream</i>	\$0-\$14.40 (Tier 3)	DESOWEN	
<i>desoximetasone 0.25 % Topical Ointment</i>	\$0-\$14.40 (Tier 3)	TOPICORT	
<i>desoximetasone 0.25 % Topical Cream</i>	\$0-\$14.40 (Tier 3)	TOPICORT	QL(100 GM per 30 days)
EBGLYSS 250 mg/2ml sc soln auto-inj	\$0-\$14.40 (Tier 5)		PA
EUCRISA 2 % Topical Ointment	\$0-\$14.40 (Tier 4)		PA
<i>fluocinolone acetonide 0.01 % Topical Solution</i>	\$0-\$14.40 (Tier 3)	SYNALAR	QL(60 ML per 30 days)
<i>fluocinolone acetonide 0.01 % Topical Cream, 0.025 % Topical Cream, 0.025 % Topical Ointment</i>	\$0-\$14.40 (Tier 3)	SYNALAR	QL(120 GM per 30 days)
<i>fluocinonide 0.05 % Topical Cream, 0.05 % Topical Gel, 0.05 % Topical Ointment</i>	\$0-\$5.80 (Tier 2)	LIDEX	QL(60 GM per 30 days)
<i>fluocinonide 0.05 % Topical Solution</i>	\$0-\$5.80 (Tier 2)	LIDEX	QL(60 ML per 30 days)
<i>fluocinonide 0.1 % Topical Cream</i>	\$0-\$5.80 (Tier 2)	VANOS	QL(120 GM per 30 days)
<i>fluticasone propionate 0.005 % Topical Ointment, 0.05 % Topical Cream</i>	\$0-\$5.80 (Tier 2)	CUTIVATE	
<i>halobetasol propionate 0.05 % Topical Cream</i>	\$0-\$14.40 (Tier 3)	ULTRAVATE	
<i>halobetasol propionate 0.05 % Topical Ointment</i>	\$0-\$14.40 (Tier 4)	ULTRAVATE	
<i>hydrocortisone 1 % Topical Cream</i>	\$0-\$5.80 (Tier 2)	ALA-CORT	
<i>hydrocortisone 2.5 % Topical Ointment</i>	\$0-\$5.80 (Tier 2)	HYTONE	
<i>hydrocortisone 2.5 % Topical Lotion</i>	\$0-\$5.80 (Tier 2)	HYTONE	

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>hydrocortisone 1 % Topical Ointment</i>	\$0-\$5.80 (Tier 2)	HYTONE	QL(100 GM per 30 days)
<i>hydrocortisone valerate 0.2 % Topical Cream</i>	\$0-\$14.40 (Tier 3)	WESTCORT	QL(60 GM per 30 days)
<i>mometasone furoate 0.1 % Topical Cream, 0.1 % Topical Ointment</i>	\$0-\$5.80 (Tier 2)	ELOCON	
<i>mometasone furoate 0.1 % Topical Solution</i>	\$0-\$5.80 (Tier 2)	ELOCON	
<i>pimecrolimus 1 % Topical Cream</i>	\$0-\$14.40 (Tier 4)	ELIDEL	QL(100 GM per 30 days)
<i>selenium sulfide 2.5 % Topical Lotion</i>	\$0-\$5.80 (Tier 2)	SELSUN	
SPEVIGO 150 mg/ml sc soln pfs, 300 mg/2ml sc soln pfs	\$0-\$14.40 (Tier 5)		PA, QL(4 ML per 28 days)
<i>tacrolimus 0.03 % Topical Ointment, 0.1 % Topical Ointment</i>	\$0-\$14.40 (Tier 4)	PROTOPIC	QL(100 GM per 30 days)
<i>triamcinolone acetonide 0.025 % Topical Ointment, 0.1 % Topical Ointment</i>	\$0-\$5.80 (Tier 1)	KENALOG	
<i>triamcinolone acetonide 0.5 % Topical Ointment</i>	\$0-\$5.80 (Tier 2)	KENALOG	
<i>triamcinolone acetonide 0.1 % Topical Lotion</i>	\$0-\$5.80 (Tier 2)	KENALOG	
<i>triamcinolone acetonide 0.025 % Topical Lotion</i>	\$0-\$14.40 (Tier 3)	KENALOG	
<i>triamcinolone acetonide 0.025 % Topical Cream, 0.1 % Topical Cream, 0.5 % Topical Cream</i>	\$0-\$5.80 (Tier 1)	TRIDERM	
<i>triderm 0.5 % Topical Cream</i>	\$0-\$5.80 (Tier 2)	TRIDERM	
Dermatological Agents, Other			
<i>calcipotriene 0.005 % Topical Solution</i>	\$0-\$14.40 (Tier 3)	DOVONEX	QL(60 ML per 30 days)
<i>calcipotriene 0.005 % Topical Cream, 0.005 % Topical Ointment</i>	\$0-\$14.40 (Tier 4)	DOVONEX	QL(120 GM per 30 days)
<i>clotrimazole-betamethasone 1-0.05 % Topical Cream</i>	\$0-\$5.80 (Tier 2)	LOTRISONE	QL(90 GM per 30 days)
<i>diclofenac sodium 3 % Topical Gel</i>	\$0-\$14.40 (Tier 4)	SOLARAZE	QL(300 GM per 30 days), ST
<i>fluorouracil 5 % Topical Cream</i>	\$0-\$5.80 (Tier 2)	EFUDEX	QL(40 GM per 30 days)
<i>fluorouracil 2 % Topical Solution, 5 % Topical Solution</i>	\$0-\$14.40 (Tier 3)	EFUDEX	
<i>imiquimod 5 % Topical Cream</i>	\$0-\$14.40 (Tier 3)	ALDARA	QL(48 EA per 30 days)
<i>nystatin-triamcinolone 100000-0.1 unit/gm-% Topical Cream, 100000-0.1 unit/gm-% Topical Ointment</i>	\$0-\$5.80 (Tier 2)	MYCOLOG	
OTEZLA 20 mg tab, 30 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(60 EA per 30 days)
OTEZLA XR 75 mg tab er 24 hr	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
<i>podofilox 0.5 % Topical Solution</i>	\$0-\$14.40 (Tier 3)	CONDYLOX	
SANTYL 250 unit/gm Topical Ointment	\$0-\$14.40 (Tier 4)		QL(180 GM per 30 days)
<i>silver sulfadiazine 1 % Topical Cream</i>	\$0-\$5.80 (Tier 2)	SILVADENE	
<i>ssd 1 % Topical Cream</i>	\$0-\$5.80 (Tier 2)	SILVADENE	
Pediculicides/scabicides			
<i>malathion 0.5 % Topical Lotion</i>	\$0-\$14.40 (Tier 4)	OVIDE	QL(59 ML per 30 days)
<i>permethrin 5 % Topical Cream</i>	\$0-\$14.40 (Tier 3)	ELIMITE	QL(60 GM per 30 days)
Topical Anti-infectives			
<i>acyclovir 5 % Topical Ointment</i>	\$0-\$14.40 (Tier 4)	ZOVIRAX	QL(60 GM per 30 days)
<i>ciclopirox 0.77 % Topical Gel</i>	\$0-\$5.80 (Tier 2)	LOPROX	QL(100 GM per 30 days)
<i>ciclopirox 1 % Topical Shampoo</i>	\$0-\$14.40 (Tier 3)	LOPROX	QL(120 ML per 30 days)
<i>ciclopirox 8 % Topical Solution</i>	\$0-\$5.80 (Tier 2)	PENLAC	PA, QL(13.2 ML per 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>ciclopirox olamine 0.77 % Topical Cream</i>	\$0-\$5.80 (Tier 2)	LOPROX	QL(90 GM per 30 days)
<i>ciclopirox olamine 0.77 % Topical Suspension</i>	\$0-\$14.40 (Tier 3)	LOPROX	QL(120 ML per 30 days)
<i>clindamycin phosphate 1 % Topical Solution</i>	\$0-\$5.80 (Tier 2)	CLEOCIN-T	QL(60 ML per 30 days)
<i>clindamycin phosphate 1 % Topical Lotion</i>	\$0-\$14.40 (Tier 4)	CLEOCIN-T	QL(75 ML per 30 days)
<i>ery 2 % Topical Pad</i>	\$0-\$14.40 (Tier 3)		QL(60 EA per 30 days)
<i>erythromycin 2 % Topical Solution</i>	\$0-\$5.80 (Tier 2)	ERYDERM	QL(60 ML per 30 days)
<i>erythromycin 2 % Topical Gel</i>	\$0-\$14.40 (Tier 3)	ERYGEL	QL(60 GM per 30 days)
<i>mupirocin 2 % Topical Ointment</i>	\$0-\$5.80 (Tier 2)	BACTROBAN	QL(110 GM per 30 days)
<i>mupirocin calcium 2 % Topical Cream</i>	\$0-\$14.40 (Tier 4)	BACTROBAN	
ELECTROLYTES/MINERALS/METALS/VITAMINS			
Electrolyte/mineral Replacement			
<i>carglumic acid 200 mg tab sol</i>	\$0-\$14.40 (Tier 5)	CARBAGLU	
<i>dextrose 5 % iv soln</i>	\$0-\$5.80 (Tier 2)		
<i>dextrose-sodium chloride 5-0.45 % iv soln, 5-0.9 % iv soln</i>	\$0-\$14.40 (Tier 4)		
<i>klor-con 20 meq pckt</i>	\$0-\$14.40 (Tier 4)		
<i>klor-con 8 meq tab er</i>	\$0-\$5.80 (Tier 2)	KLOR-CON	
<i>klor-con 10 10 meq tab er</i>	\$0-\$5.80 (Tier 2)	KLOR-CON	
<i>klor-con m10 10 meq tab er</i>	\$0-\$5.80 (Tier 2)		
<i>klor-con m15 15 meq tab er</i>	\$0-\$5.80 (Tier 2)	KLOR-CON	
<i>klor-con m20 20 meq tab er</i>	\$0-\$5.80 (Tier 2)	KLOR-CON	
<i>magnesium sulfate 50 % inj soln</i>	\$0-\$14.40 (Tier 3)		
<i>plenamine 15 % iv soln</i>	\$0-\$14.40 (Tier 4)		B/D
<i>potassium chloride 10 meq/100ml iv soln, 20 meq/100ml iv soln</i>	\$0-\$5.80 (Tier 2)		
<i>potassium chloride 20 meq pckt</i>	\$0-\$14.40 (Tier 4)		
<i>potassium chloride 20 MEQ/15ML (10%) soln, 40 MEQ/15ML (20%) soln</i>	\$0-\$14.40 (Tier 4)	K-SOL	
<i>potassium chloride crys er 10 meq tab er</i>	\$0-\$5.80 (Tier 2)		
<i>potassium chloride crys er 15 meq tab er, 20 meq tab er</i>	\$0-\$5.80 (Tier 2)	KLOR-CON	
<i>potassium chloride er 15 meq tab er</i>	\$0-\$5.80 (Tier 2)		
<i>potassium chloride er 20 meq tab er</i>	\$0-\$5.80 (Tier 2)	K-TAB	
<i>potassium chloride er 10 meq tab er, 8 meq tab er</i>	\$0-\$5.80 (Tier 2)	KLOR-CON	
<i>potassium chloride er 10 meq cap er, 8 meq cap er</i>	\$0-\$5.80 (Tier 2)	MICRO-K	
<i>potassium citrate er 10 MEQ (1080 mg) tab er, 15 MEQ (1620 mg) tab er, 5 MEQ (540 mg) tab er</i>	\$0-\$14.40 (Tier 4)	UROCIT-K	
<i>sodium chloride 0.45 % iv soln, 0.9 % iv soln</i>	\$0-\$14.40 (Tier 3)		
Electrolyte/mineral/metal Modifiers			
<i>CHEMET 100 mg cap</i>	\$0-\$14.40 (Tier 5)		
<i>deferasirox 125 mg tab sol, 250 mg tab sol</i>	\$0-\$14.40 (Tier 4)	EXJADE	PA
<i>deferasirox 500 mg tab sol</i>	\$0-\$14.40 (Tier 5)	EXJADE	PA
<i>deferasirox 90 mg tab</i>	\$0-\$14.40 (Tier 3)	JADENU	PA
<i>deferasirox 180 mg tab, 360 mg tab</i>	\$0-\$14.40 (Tier 4)	JADENU	PA
<i>deferasirox granules 180 mg pckt, 360 mg pckt, 90 mg pckt</i>	\$0-\$14.40 (Tier 5)	JADENU SPRINKLE	PA
<i>penicillamine 250 mg tab</i>	\$0-\$14.40 (Tier 5)	DEPEN TITRATABS	

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>tolvaptan 15 mg tab</i>	\$0-\$14.40 (Tier 5)	JYNARQUE	PA, QL(120 EA per 30 days)
<i>tolvaptan 30 mg tab</i>	\$0-\$14.40 (Tier 5)	SAMSCA	PA, QL(120 EA per 30 days)
<i>trientine hcl 500 mg cap</i>	\$0-\$14.40 (Tier 5)		PA
<i>trientine hcl 250 mg cap</i>	\$0-\$14.40 (Tier 5)	SYPRINE	PA
Phosphate Binders			
<i>calcium acetate (phos binder) 667 mg tab</i>	\$0-\$14.40 (Tier 3)	ELIPHOS	
<i>calcium acetate (phos binder) 667 mg cap</i>	\$0-\$14.40 (Tier 4)	PHOSLO	
<i>sevelamer hcl 400 mg tab, 800 mg tab</i>	\$0-\$14.40 (Tier 4)	RENAGEL	
VELPHORO 500 mg tab chew	\$0-\$14.40 (Tier 5)		
Potassium Binders			
<i>kionex 15 gm/60ml Multiple Routes Suspension</i>	\$0-\$14.40 (Tier 3)		
LOKELMA 10 gm pckt, 5 gm pckt	\$0-\$14.40 (Tier 4)		QL(90 EA per 30 days)
<i>sodium polystyrene sulfonate 15 gm/60ml Multiple Routes Suspension</i>	\$0-\$14.40 (Tier 3)		
<i>sodium polystyrene sulfonate oral pwdr sps (sodium polystyrene sulf) 15 gm/60ml Multiple Routes Suspension</i>	\$0-\$14.40 (Tier 3)	KAYEXALATE	
VELTASSA 16.8 gm pckt, 25.2 gm pckt, 8.4 gm pckt	\$0-\$14.40 (Tier 4)		QL(30 EA per 30 days)
VELTASSA 1 gm pckt	\$0-\$14.40 (Tier 4)		QL(120 EA per 30 days)
Vitamins			
PR NATAL 440 EC 30-1 & 440 mg oral misc	\$0-\$5.80 (Tier 2)		
GASTROINTESTINAL AGENTS			
Anti-constipation Agents			
<i>constulose 10 gm/15ml soln</i>	\$0-\$5.80 (Tier 2)	CONSTULOSE	
<i>enulose 10 gm/15ml soln</i>	\$0-\$5.80 (Tier 2)	CONSTULOSE	
<i>generlac 10 gm/15ml soln</i>	\$0-\$5.80 (Tier 2)	CONSTULOSE	
<i>lactulose 10 gm/15ml soln</i>	\$0-\$5.80 (Tier 2)	CONSTULOSE	
LINZESS 145 mcg cap, 290 mcg cap, 72 mcg cap	\$0-\$14.40 (Tier 3)		QL(30 EA per 30 days)
<i>lubiprostone 24 mcg cap, 8 mcg cap</i>	\$0-\$14.40 (Tier 4)	AMITIZA	QL(60 EA per 30 days)
MOVANTIK 12.5 mg tab, 25 mg tab	\$0-\$14.40 (Tier 3)		QL(30 EA per 30 days)
Anti-diarrheal Agents			
<i>aloseptron hcl 0.5 mg tab</i>	\$0-\$14.40 (Tier 4)	LOTRONEX	PA, QL(120 EA per 30 days)
<i>aloseptron hcl 1 mg tab</i>	\$0-\$14.40 (Tier 5)	LOTRONEX	PA, QL(60 EA per 30 days)
<i>diphenoxylate-atropine 2.5-0.025 mg tab</i>	\$0-\$14.40 (Tier 3)	LOMOTIL	
<i>loperamide hcl 2 mg cap</i>	\$0-\$5.80 (Tier 2)	IMODIUM	
XERMELO 250 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(90 EA per 30 days)
Antispasmodics, Gastrointestinal			
<i>dicyclomine hcl 10 mg cap, 20 mg tab</i>	\$0-\$5.80 (Tier 2)	BENTYL	
<i>glycopyrrolate 1 mg tab, 2 mg tab</i>	\$0-\$14.40 (Tier 3)	ROBINUL	PA
Gastrointestinal Agents, Other			
<i>bismuth/metronidaz/tetracyclin 140-125-125 mg cap</i>	\$0-\$14.40 (Tier 4)		
BYLVAY 1200 mcg cap, 400 mcg cap	\$0-\$14.40 (Tier 5)		PA
BYLVAY (PELLETS) 200 mcg cap sprinkle, 600 mcg cap sprinkle	\$0-\$14.40 (Tier 5)		PA

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
CLENPIQ 10-3.5-12 MG-GM -gm/175ml soln	\$0-\$14.40 (Tier 3)		
CTEXTI 250 mg tab	\$0-\$14.40 (Tier 5)		PA
GAVILYTE-C 240 gm soln	\$0-\$5.80 (Tier 2)		
<i>gavilyte-g 236 gm soln</i>	\$0-\$5.80 (Tier 2)	GOLYTELY	
<i>gavilyte-n with flavor pack 420 gm soln</i>	\$0-\$5.80 (Tier 2)	NULYTELY	
<i>metoclopramide hcl 10 mg tab, 5 mg tab</i>	\$0-\$5.80 (Tier 1)	REGLAN	
<i>metoclopramide hcl 5 mg/5ml soln</i>	\$0-\$5.80 (Tier 2)	REGLAN	
<i>na sulfate-k sulfate-mg sulf 17.5-3.13-1.6 gm/177ml soln</i>	\$0-\$14.40 (Tier 3)	SUPREP BOWEL PREP KIT	
<i>nitroglycerin 0.4 % rect oint</i>	\$0-\$14.40 (Tier 4)		QL(30 GM per 30 days)
<i>peg 3350-kcl-na bicarb-nacl 420 gm soln</i>	\$0-\$5.80 (Tier 2)	NULYTELY	
<i>peg-3350/electrolytes 236 gm soln</i>	\$0-\$5.80 (Tier 2)	GOLYTELY	
SUTAB 1479-225-188 mg tab	\$0-\$14.40 (Tier 3)		
TALICIA 250-12.5-10 mg cap dr	\$0-\$14.40 (Tier 4)		
<i>ursodiol 300 mg cap</i>	\$0-\$14.40 (Tier 4)	ACTIGALL	
<i>ursodiol 250 mg tab, 500 mg tab</i>	\$0-\$14.40 (Tier 3)	URSO	
VOWST cap	\$0-\$14.40 (Tier 5)		PA, QL(12 EA per 3 days)
XIFAXAN 200 mg tab, 550 mg tab	\$0-\$14.40 (Tier 3)		PA, QL(90 EA per 30 days)
Histamine2 (h2) Receptor Antagonists			
<i>famotidine 20 mg tab, 40 mg tab</i>	\$0-\$5.80 (Tier 1)	PEPCID	
<i>famotidine 40 mg/5ml susp</i>	\$0-\$14.40 (Tier 4)	PEPCID	
<i>nizatidine 150 mg cap, 300 mg cap</i>	\$0-\$14.40 (Tier 4)	AXID	
Protectants			
<i>misoprostol 100 mcg tab, 200 mcg tab</i>	\$0-\$14.40 (Tier 3)	CYTOTEC	
<i>sucralfate 1 gm tab</i>	\$0-\$5.80 (Tier 2)	CARAFATE	
Proton Pump Inhibitors			
<i>esomeprazole magnesium 20 mg cap dr, 40 mg cap dr</i>	\$0-\$5.80 (Tier 2)	NEXIUM	QL(60 EA per 30 days)
<i>lansoprazole 15 mg cap dr, 30 mg cap dr</i>	\$0-\$5.80 (Tier 2)	PREVACID	QL(60 EA per 30 days)
<i>omeprazole 10 mg cap dr, 20 mg cap dr, 40 mg cap dr</i>	\$0-\$5.80 (Tier 1)	PRILOSEC	QL(60 EA per 30 days)
<i>pantoprazole sodium 20 mg tab dr, 40 mg tab dr</i>	\$0-\$5.80 (Tier 1)	PROTONIX	QL(60 EA per 30 days)
<i>rabeprazole sodium 20 mg tab dr</i>	\$0-\$14.40 (Tier 3)	ACIPHEX	QL(60 EA per 30 days)
GENETIC OR ENZYME OR PROTEIN DISORDER: REPLACEMENT, MODIFIERS, TREATMENT			
Genetic Or Enzyme Or Protein Disorder: Replacement, Modifiers, Treatment			
<i>betaine oral pwdr</i>	\$0-\$14.40 (Tier 5)	CYSTADANE	
CHOLBAM 250 mg cap, 50 mg cap	\$0-\$14.40 (Tier 5)		PA
CREON 12000-38000 unit cap dr prt, 24000-76000 unit cap dr prt, 3000-9500 unit cap dr prt, 36000-114000 unit cap dr prt, 6000-19000 unit cap dr prt	\$0-\$14.40 (Tier 3)		
<i>cromolyn sodium 100 mg/5ml oral conc</i>	\$0-\$14.40 (Tier 4)	GASTROCROM	
CYSTAGON 150 mg cap, 50 mg cap	\$0-\$14.40 (Tier 4)		
EVRYSDI 0.75 mg/ml soln	\$0-\$14.40 (Tier 5)		PA, QL(240 ML per 30 days)
<i>l-glutamine 5 gm pckt</i>	\$0-\$14.40 (Tier 5)		PA
<i>miglustat 100 mg cap</i>	\$0-\$14.40 (Tier 5)	ZAVESCA	PA, QL(90 EA per 30 days)
<i>nitisinone 10 mg cap, 2 mg cap, 20 mg cap, 5 mg cap</i>	\$0-\$14.40 (Tier 5)	ORFADIN	
PROLASTIN-C 1000 mg/20ml iv soln	\$0-\$14.40 (Tier 5)		PA

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
PYRUKYND 20 mg tab, 5 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(60 EA per 30 days)
PYRUKYND 50 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(120 EA per 30 days)
PYRUKYND TAPER PACK 5 mg tab pack, 7 x 20 MG & 7 x 5 mg tab pack, 7 x 50 MG & 7 x 20 mg tab pack	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
REVCovi 2.4 mg/1.5ml im soln	\$0-\$14.40 (Tier 5)		PA
sapropterin dihydrochloride 100 mg pckt, 100 mg tab, 500 mg pckt	\$0-\$14.40 (Tier 5)	KUVAN	PA
sodium phenylbutyrate 3 gm/tsp oral pwdr	\$0-\$14.40 (Tier 5)	BUPHENYL	
SUCRAID 8500 unit/ml soln	\$0-\$14.40 (Tier 5)		PA
WELIREG 40 mg tab	\$0-\$14.40 (Tier 5)		PA
yargesa 100 mg cap	\$0-\$14.40 (Tier 5)	ZAVESCA	PA, QL(90 EA per 30 days)
zelvysia 100 mg pckt, 500 mg pckt	\$0-\$14.40 (Tier 5)	KUVAN	PA
ZENPEP 10000-32000 unit cap dr prt, 15000-47000 unit cap dr prt, 20000-63000 unit cap dr prt, 25000-79000 unit cap dr prt, 3000-10000 unit cap dr prt, 40000-126000 unit cap dr prt, 5000-24000 unit cap dr prt, 60000-189600 unit cap dr prt	\$0-\$14.40 (Tier 3)		
GENITOURINARY AGENTS			
Antispasmodics, Urinary			
fesoterodine fumarate er 4 mg tab er 24 hr, 8 mg tab er 24 hr	\$0-\$14.40 (Tier 4)	TOVIAZ	
GEMTESA 75 mg tab	\$0-\$14.40 (Tier 4)		QL(30 EA per 30 days)
MYRBETRIQ 25 mg tab er 24 hr, 50 mg tab er 24 hr	\$0-\$14.40 (Tier 3)		QL(30 EA per 30 days)
MYRBETRIQ 8 mg/ml Oral Suspension Reconstituted ER	\$0-\$14.40 (Tier 3)		QL(300 ML per 30 days)
oxybutynin chloride 5 mg tab	\$0-\$5.80 (Tier 2)	DITROPAN	
oxybutynin chloride 5 mg/5ml soln	\$0-\$5.80 (Tier 2)	DITROPAN	
oxybutynin chloride er 10 mg tab er 24 hr, 15 mg tab er 24 hr, 5 mg tab er 24 hr	\$0-\$5.80 (Tier 2)	DITROPAN	
solifenacin succinate 10 mg tab, 5 mg tab	\$0-\$5.80 (Tier 2)	VESICARE	
tolterodine tartrate 1 mg tab, 2 mg tab	\$0-\$14.40 (Tier 3)	DETROL	
tolterodine tartrate er 2 mg cap er 24 hr, 4 mg cap er 24 hr	\$0-\$14.40 (Tier 3)	DETROL LA	
trospium chloride 20 mg tab	\$0-\$14.40 (Tier 3)	SANCTURA	
trospium chloride er 60 mg cap er 24 hr	\$0-\$14.40 (Tier 4)	SANCTURA XR	
Benign Prostatic Hypertrophy Agents			
alfuzosin hcl er 10 mg tab er 24 hr	\$0-\$5.80 (Tier 2)	UROXATRAL	QL(30 EA per 30 days)
doxazosin mesylate 1 mg tab, 2 mg tab, 4 mg tab, 8 mg tab	\$0-\$5.80 (Tier 2)	CARDURA	
dutasteride 0.5 mg cap	\$0-\$5.80 (Tier 2)	AVODART	
finasteride 5 mg tab	\$0-\$5.80 (Tier 1)	PROSCAR	
silodosin 4 mg cap, 8 mg cap	\$0-\$14.40 (Tier 4)	RAPAFLO	QL(30 EA per 30 days)
tadalafil 2.5 mg tab, 5 mg tab	\$0-\$14.40 (Tier 3)	CIALIS	PA, QL(30 EA per 30 days)
tamsulosin hcl 0.4 mg cap	\$0-\$5.80 (Tier 1)	FLOMAX	QL(60 EA per 30 days)
terazosin hcl 1 mg cap, 10 mg cap, 2 mg cap, 5 mg cap	\$0-\$5.80 (Tier 1)	HYTRIN	

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
Genitourinary Agents, Other			
<i>bethanechol chloride 10 mg tab, 25 mg tab, 5 mg tab, 50 mg tab</i>	\$0-\$5.80 (Tier 2)	URECHOLINE	
ELMIRON 100 mg cap	\$0-\$14.40 (Tier 4)		QL(90 EA per 30 days)
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (ADRENAL)			
Hormonal Agents, Stimulant/replacement/modifying (adrenal)			
<i>dexamethasone 1 mg tab, 2 mg tab</i>	\$0-\$5.80 (Tier 2)		
<i>dexamethasone 0.5 mg/5ml soln</i>	\$0-\$5.80 (Tier 2)		
<i>dexamethasone 0.5 mg tab, 0.75 mg tab, 1.5 mg tab, 4 mg tab, 6 mg tab</i>	\$0-\$5.80 (Tier 2)	DECADRON	
<i>fludrocortisone acetate 0.1 mg tab</i>	\$0-\$5.80 (Tier 2)	FLORINEF	
<i>hydrocortisone 10 mg tab, 20 mg tab, 5 mg tab</i>	\$0-\$5.80 (Tier 2)	CORTEF	
<i>methylprednisolone 16 mg tab, 32 mg tab, 4 mg tab, 4 mg tab pack, 8 mg tab</i>	\$0-\$5.80 (Tier 2)	MEDROL	
<i>prednisolone 15 mg/5ml soln</i>	\$0-\$14.40 (Tier 3)	PRELONE	
<i>prednisolone sodium phosphate 25 mg/5ml soln</i>	\$0-\$14.40 (Tier 4)		
<i>prednisolone sodium phosphate 5 mg/5ml soln</i>	\$0-\$14.40 (Tier 4)	PEDIAPRED	
<i>prednisone 1 mg tab, 10 mg tab, 2.5 mg tab, 20 mg tab, 5 mg tab, 50 mg tab</i>	\$0-\$5.80 (Tier 1)		
<i>prednisone 10 mg (21) tab pack, 10 mg (48) tab pack, 5 mg (21) tab pack, 5 mg (48) tab pack</i>	\$0-\$5.80 (Tier 2)		
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (PITUITARY)			
Hormonal Agents, Stimulant/replacement/modifying (pituitary)			
<i>desmopressin ace spray refrig 0.01 % nasal soln</i>	\$0-\$14.40 (Tier 4)	MINIRIN	
<i>desmopressin acetate 0.1 mg tab, 0.2 mg tab</i>	\$0-\$14.40 (Tier 3)	DDAVP	
GENOTROPIN 12 mg sc cart, 5 mg sc cart	\$0-\$14.40 (Tier 5)		PA
GENOTROPIN MINIUICK 0.2 mg Subcutaneous Prefilled Syringe	\$0-\$14.40 (Tier 4)		PA
GENOTROPIN MINIUICK 0.4 mg Subcutaneous Prefilled Syringe, 0.6 mg Subcutaneous Prefilled Syringe, 0.8 mg Subcutaneous Prefilled Syringe, 1 mg Subcutaneous Prefilled Syringe, 1.2 mg Subcutaneous Prefilled Syringe, 1.4 mg Subcutaneous Prefilled Syringe, 1.6 mg Subcutaneous Prefilled Syringe, 1.8 mg Subcutaneous Prefilled Syringe, 2 mg Subcutaneous Prefilled Syringe	\$0-\$14.40 (Tier 5)		PA
INCRELEX 40 mg/4ml sc soln	\$0-\$14.40 (Tier 5)		PA
ISTURISA 1 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(240 EA per 30 days)
ISTURISA 5 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(360 EA per 30 days)
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (SEX HORMONES/MODIFIERS)			
Androgens			
<i>danazol 100 mg cap, 200 mg cap, 50 mg cap</i>	\$0-\$14.40 (Tier 4)	DANOCRINE	
<i>testosterone 20.25 MG/1.25GM (1.62%) td gel, 20.25 MG/ACT (1.62%) td gel, 40.5 MG/2.5GM (1.62%) td gel</i>	\$0-\$14.40 (Tier 3)	ANDROGEL	PA, QL(150 GM per 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>testosterone 12.5 MG/ACT (1%) td gel, 25 MG/2.5GM (1%) td gel, 50 MG/5GM (1%) td gel</i>	\$0-\$14.40 (Tier 4)	ANDROGEL	PA, QL(300 GM per 30 days)
<i>testosterone cypionate 100 mg/ml im soln, 200 mg/ml im soln</i>	\$0-\$5.80 (Tier 2)	DEPO-TESTOSTERONE	PA, QL(10 ML per 28 days)
<i>testosterone enanthate 200 mg/ml im soln</i>	\$0-\$14.40 (Tier 3)	DELATESTRYL	PA, QL(5 ML per 28 days)
Estrogens			
<i>abigale 1-0.5 mg tab</i>	\$0-\$14.40 (Tier 4)	ACTIVELLA	
<i>abigale lo 0.5-0.1 mg tab</i>	\$0-\$14.40 (Tier 4)	ACTIVELLA	
<i>altavera 0.15-30 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	NORDETTE	
<i>alyacen 1/35 1-35 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)		
<i>ashlyna 0.15-0.03 & 0.01 mg tab</i>	\$0-\$14.40 (Tier 4)	SEASONIQUE	QL(91 EA per 91 days)
<i>aubra eq 0.1-20 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	ALESSE	
<i>aviane 0.1-20 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	ALESSE	
<i>azurette 0.15-0.02/0.01 mg (21/5) tab</i>	\$0-\$14.40 (Tier 3)	MIRCETTE	
<i>balziva 0.4-35 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)		
<i>blisovi fe 1.5/30 1.5-30 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	LOESTRIN FE	
<i>briellyn 0.4-35 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)		
<i>camrese lo 0.1-0.02 & 0.01 mg tab</i>	\$0-\$14.40 (Tier 4)	LOSEASONIQUE	QL(91 EA per 91 days)
<i>CLIMARA PRO 0.045-0.015 mg/day tdwk patch</i>	\$0-\$14.40 (Tier 4)		QL(4 EA per 28 days)
<i>cryselle 0.3-30 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)		
<i>dolishale 90-20 mcg tab</i>	\$0-\$14.40 (Tier 3)	AMETHYST 28 DAY	
<i>dotti 0.025 mg/24hr tdbiw patch, 0.0375 mg/24hr tdbiw patch, 0.05 mg/24hr tdbiw patch, 0.075 mg/24hr tdbiw patch, 0.1 mg/24hr tdbiw patch</i>	\$0-\$14.40 (Tier 4)	VIVELLE-DOT	QL(8 EA per 28 days)
<i>eluryng 0.12-0.015 mg/24hr vag ring</i>	\$0-\$14.40 (Tier 4)	NUVARING	QL(1 EA per 28 days)
<i>enilloring 0.12-0.015 mg/24hr vag ring</i>	\$0-\$14.40 (Tier 4)	NUVARING	QL(1 EA per 28 days)
<i>estarylla 0.25-35 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	ORTHO-CYCLEN (28)	
<i>estradiol 0.75 MG/1.25 GM (0.06%) td gel</i>	\$0-\$14.40 (Tier 4)		
<i>estradiol 0.025 mg/24hr tdwk patch, 0.0375 mg/24hr tdwk patch, 0.05 mg/24hr tdwk patch, 0.06 mg/24hr tdwk patch, 0.075 mg/24hr tdwk patch, 0.1 mg/24hr tdwk patch</i>	\$0-\$14.40 (Tier 3)	CLIMARA	QL(4 EA per 28 days)
<i>estradiol 0.25 mg/0.25gm td gel, 0.5 mg/0.5gm td gel, 0.75 mg/0.75gm td gel</i>	\$0-\$14.40 (Tier 4)	DIVIGEL	
<i>estradiol 1 mg/gm td gel, 1.25 mg/1.25gm td gel</i>	\$0-\$14.40 (Tier 4)	DIVIGEL	
<i>estradiol 0.5 mg tab, 1 mg tab, 2 mg tab</i>	\$0-\$5.80 (Tier 2)	ESTRACE	
<i>estradiol 0.01 % vag crm</i>	\$0-\$5.80 (Tier 2)	ESTRACE	
<i>estradiol 10 mcg vag tab</i>	\$0-\$14.40 (Tier 4)	VAGIFEM	
<i>estradiol 0.025 mg/24hr tdbiw patch, 0.0375 mg/24hr tdbiw patch, 0.05 mg/24hr tdbiw patch, 0.075 mg/24hr tdbiw patch, 0.1 mg/24hr tdbiw patch</i>	\$0-\$14.40 (Tier 4)	VIVELLE-DOT	QL(8 EA per 28 days)
<i>estradiol-norethindrone acet 0.5-0.1 mg tab, 1-0.5 mg tab</i>	\$0-\$14.40 (Tier 4)	ACTIVELLA	
<i>ESTRING 7.5 mcg/24hr vag ring</i>	\$0-\$14.40 (Tier 4)		QL(1 EA per 90 days)
<i>estrogens conjugated 0.3 mg tab, 0.45 mg tab, 0.625 mg tab, 0.9 mg tab, 1.25 mg tab</i>	\$0-\$14.40 (Tier 4)		QL(30 EA per 30 days)
<i>etonogestrel-ethinyl estradiol 0.12-0.015 mg/24hr vag ring</i>	\$0-\$14.40 (Tier 3)	NUVARING	QL(1 EA per 28 days)
<i>falmina 0.1-20 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	ALESSE	

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>feirza 1.5/30 1.5-30 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	LOESTRIN FE	
<i>feirza 1/20 1-20 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	LOESTRIN FE	
<i>fyavolv 0.5-2.5 mg-mcg tab, 1-5 mg-mcg tab</i>	\$0-\$14.40 (Tier 4)	FEMHRT	
<i>hailey fe 1/20 1-20 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	LOESTRIN FE	
<i>iclevia 0.15-0.03 mg tab</i>	\$0-\$14.40 (Tier 4)	SEASONALE	QL(91 EA per 91 days)
<i>introvale 0.15-0.03 mg tab</i>	\$0-\$14.40 (Tier 4)	SEASONALE	QL(91 EA per 91 days)
<i>jaimiess 0.15-0.03 & 0.01 mg tab</i>	\$0-\$14.40 (Tier 4)	SEASONIQUE	QL(91 EA per 91 days)
<i>jinteli 1-5 mg-mcg tab</i>	\$0-\$14.40 (Tier 4)	FEMHRT	
<i>junel 1.5/30 1.5-30 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	LOESTRIN	
<i>junel 1/20 1-20 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	LOESTRIN	
<i>junel fe 1.5/30 1.5-30 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	LOESTRIN FE	
<i>junel fe 1/20 1-20 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	LOESTRIN FE	
<i>kariva 0.15-0.02/0.01 mg (21/5) tab</i>	\$0-\$14.40 (Tier 3)	MIRCETTE	
<i>kelnor 1/35 1-35 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	DEMULEN	
<i>kurvelo 0.15-30 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	NORDETTE	
<i>larin 1.5/30 1.5-30 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	LOESTRIN	
<i>larin 1/20 1-20 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	LOESTRIN	
<i>larin fe 1.5/30 1.5-30 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	LOESTRIN FE	
<i>larin fe 1/20 1-20 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	LOESTRIN FE	
<i>lessina 0.1-20 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	ALESSE	
<i>levonest 50-30/75-40/ 125-30 mcg tab</i>	\$0-\$14.40 (Tier 3)	ENPRESSE 28 DAY	
<i>levonorg-eth estrad triphasic 50-30/75-40/ 125-30 mcg tab</i>	\$0-\$14.40 (Tier 3)	ENPRESSE 28 DAY	
<i>levonorgest-eth estrad 91-day 0.1-0.02 & 0.01 mg tab</i>	\$0-\$14.40 (Tier 4)	LOSEASONIQUE	QL(91 EA per 91 days)
<i>levonorgest-eth estrad 91-day 0.15-0.03 mg tab</i>	\$0-\$14.40 (Tier 4)	SEASONALE	QL(91 EA per 91 days)
<i>levonorgestrel-ethinyl estrad 0.1-20 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	ALESSE	
<i>levonorgestrel-ethinyl estrad 90-20 mcg tab</i>	\$0-\$14.40 (Tier 3)	AMETHYST 28 DAY	
<i>lojaimiess 0.1-0.02 & 0.01 mg tab</i>	\$0-\$14.40 (Tier 4)	LOSEASONIQUE	QL(91 EA per 91 days)
<i>low-ogestrel 0.3-30 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)		
<i>luizza 1.5/30 1.5-30 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	LOESTRIN	
<i>luizza 1/20 1-20 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	LOESTRIN	
<i>lyllana 0.025 mg/24hr tdbiw patch, 0.0375 mg/24hr tdbiw patch, 0.05 mg/24hr tdbiw patch, 0.075 mg/24hr tdbiw patch, 0.1 mg/24hr tdbiw patch</i>	\$0-\$14.40 (Tier 4)	VIVELLE-DOT	QL(8 EA per 28 days)
<i>marlissa 0.15-30 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	NORDETTE	
<i>microgestin 1.5/30 1.5-30 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	LOESTRIN	
<i>microgestin 1/20 1-20 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	LOESTRIN	
<i>microgestin fe 1.5/30 1.5-30 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	LOESTRIN FE	
<i>microgestin fe 1/20 1-20 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	LOESTRIN FE	
<i>mili 0.25-35 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	ORTHO-CYCLEN (28)	
<i>mimvey 1-0.5 mg tab</i>	\$0-\$14.40 (Tier 4)	ACTIVELLA	
<i>necon 0.5/35 (28) 0.5-35 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)		
<i>norelgestromin-eth estradiol 150-35 mcg/24hr tdkw patch</i>	\$0-\$14.40 (Tier 4)		
<i>norethindrone acet-ethinyl est 1-20 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	LOESTRIN	
<i>norethindrone-eth estradiol 0.5-2.5 mg-mcg tab, 1-5 mg-mcg tab</i>	\$0-\$14.40 (Tier 4)	FEMHRT	

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>norgestim-eth estrad triphasic 0.18/0.215/0.25 mg-35 mcg tab</i>	\$0-\$14.40 (Tier 3)	ORTHO TRI-CYCLEN	
<i>norgestimate-eth estradiol 0.25-35 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	ORTHO-CYCLEN (28)	
<i>nortrel 0.5/35 (28) 0.5-35 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)		
<i>nortrel 1/35 (21) 1-35 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)		
<i>nortrel 1/35 (28) 1-35 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)		
<i>nortrel 7/7/7 0.5/0.75/1-35 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)		
<i>nylia 1/35 1-35 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)		
<i>nylia 7/7/7 0.5/0.75/1-35 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)		
<i>pimtrea 0.15-0.02/0.01 mg (21/5) tab</i>	\$0-\$14.40 (Tier 3)	MIRCETTE	
<i>portia-28 0.15-30 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	NORDETTE	
PREMARIN 0.625 mg/gm vag crm	\$0-\$14.40 (Tier 4)		
PREMPHASE 0.625-5 mg tab	\$0-\$14.40 (Tier 4)		QL(28 EA per 28 days)
PREMPRO 0.3-1.5 mg tab, 0.45-1.5 mg tab, 0.625-2.5 mg tab, 0.625-5 mg tab	\$0-\$14.40 (Tier 4)		QL(28 EA per 28 days)
<i>setlakin 0.15-0.03 mg tab</i>	\$0-\$14.40 (Tier 4)	SEASONALE	QL(91 EA per 91 days)
<i>sprintec 28 0.25-35 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	ORTHO-CYCLEN (28)	
<i>tarina fe 1/20 eq 1-20 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	LOESTRIN FE	
<i>tri-estarylla 0.18/0.215/0.25 mg-35 mcg tab</i>	\$0-\$14.40 (Tier 3)	ORTHO TRI-CYCLEN	
<i>tri-mili 0.18/0.215/0.25 mg-35 mcg tab</i>	\$0-\$14.40 (Tier 3)	ORTHO TRI-CYCLEN	
<i>tri-sprintec 0.18/0.215/0.25 mg-35 mcg tab</i>	\$0-\$14.40 (Tier 3)	ORTHO TRI-CYCLEN	
<i>tri-vylibra 0.18/0.215/0.25 mg-35 mcg tab</i>	\$0-\$14.40 (Tier 3)	ORTHO TRI-CYCLEN	
<i>turqoz 0.3-30 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)		
<i>valtya 1/35 1-35 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	DEMULEN	
VALTYA 1/50 1-50 mg-mcg tab	\$0-\$14.40 (Tier 3)		
<i>vienva 0.1-20 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	ALESSE	
<i>violele 0.15-0.02/0.01 mg (21/5) tab</i>	\$0-\$14.40 (Tier 3)	MIRCETTE	
<i>vyfemla 0.4-35 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)		
<i>vylibra 0.25-35 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	ORTHO-CYCLEN (28)	
<i>xulane 150-35 mcg/24hr tdwk patch</i>	\$0-\$14.40 (Tier 3)		
<i>yuvaferm 10 mcg vag tab</i>	\$0-\$14.40 (Tier 4)	VAGIFEM	
<i>zafemy 150-35 mcg/24hr tdwk patch</i>	\$0-\$14.40 (Tier 4)		
<i>zovia 1/35 (28) 1-35 mg-mcg tab</i>	\$0-\$14.40 (Tier 3)	DEMULEN	
Progestins			
<i>camila 0.35 mg tab</i>	\$0-\$5.80 (Tier 2)	NOR-QD	
<i>deblitane 0.35 mg tab</i>	\$0-\$5.80 (Tier 2)	NOR-QD	
DEPO-SUBQ PROVERA 104 104 mg/0.65ml sc susp pfs	\$0-\$14.40 (Tier 3)		QL(0.65 ML per 90 days)
<i>errin 0.35 mg tab</i>	\$0-\$5.80 (Tier 2)	NOR-QD	
<i>gallifrey 5 mg tab</i>	\$0-\$5.80 (Tier 2)	AYGESTIN	
<i>heather 0.35 mg tab</i>	\$0-\$5.80 (Tier 2)	NOR-QD	
<i>incassia 0.35 mg tab</i>	\$0-\$5.80 (Tier 2)	NOR-QD	
LILETTA (52 MG) 20.1 mcg/day iud	\$0-\$14.40 (Tier 3)		
<i>lyleq 0.35 mg tab</i>	\$0-\$5.80 (Tier 2)	NOR-QD	
<i>lyza 0.35 mg tab</i>	\$0-\$5.80 (Tier 2)	NOR-QD	
<i>medroxyprogesterone acetate 150 mg/ml im susp, 150 mg/ml im susp pfs</i>	\$0-\$5.80 (Tier 2)	DEPO-PROVERA	QL(1 ML per 90 days)
<i>medroxyprogesterone acetate 10 mg tab, 2.5 mg tab, 5 mg tab</i>	\$0-\$5.80 (Tier 1)	PROVERA	
<i>megestrol acetate 20 mg tab, 40 mg tab</i>	\$0-\$5.80 (Tier 2)	MEGACE	

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>megestrol acetate 40 mg/ml susp</i>	\$0-\$14.40 (Tier 3)	MEGACE	
<i>megestrol acetate 625 mg/5ml susp</i>	\$0-\$14.40 (Tier 4)	MEGACE	
<i>meleya 0.35 mg tab</i>	\$0-\$5.80 (Tier 2)	NOR-QD	
NEXPLANON 68 mg sc implant	\$0-\$14.40 (Tier 3)		
<i>nora-be 0.35 mg tab</i>	\$0-\$5.80 (Tier 2)	NOR-QD	
<i>norethindrone 0.35 mg tab</i>	\$0-\$5.80 (Tier 2)	NOR-QD	
<i>norethindrone acetate 5 mg tab</i>	\$0-\$5.80 (Tier 2)	AYGESTIN	
<i>orquidea 0.35 mg tab</i>	\$0-\$5.80 (Tier 2)	NOR-QD	
<i>progesterone 100 mg cap, 200 mg cap</i>	\$0-\$5.80 (Tier 2)	PROMETRIUM	
<i>sharobel 0.35 mg tab</i>	\$0-\$5.80 (Tier 2)	NOR-QD	
Selective Estrogen Receptor Modifying Agents			
OSPHEHA 60 mg tab	\$0-\$14.40 (Tier 3)		PA, QL(30 EA per 30 days)
<i>raloxifene hcl 60 mg tab</i>	\$0-\$5.80 (Tier 2)	EVISTA	
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (THYROID)			
Hormonal Agents, Stimulant/replacement/modifying (thyroid)			
<i>levothyroxine sodium 100 mcg tab, 112 mcg tab, 125 mcg tab, 137 mcg tab, 150 mcg tab, 175 mcg tab, 200 mcg tab, 25 mcg tab, 300 mcg tab, 50 mcg tab, 75 mcg tab, 88 mcg tab</i>	\$0-\$5.80 (Tier 1)	SYNTHROID	
<i>levoxyl 100 mcg tab, 112 mcg tab, 125 mcg tab, 137 mcg tab, 150 mcg tab, 175 mcg tab, 200 mcg tab, 25 mcg tab, 50 mcg tab, 75 mcg tab, 88 mcg tab</i>	\$0-\$5.80 (Tier 2)	SYNTHROID	
<i>liomny 25 mcg tab, 5 mcg tab, 50 mcg tab</i>	\$0-\$5.80 (Tier 2)	CYTOMEL	
<i>liothyronine sodium 25 mcg tab, 5 mcg tab, 50 mcg tab</i>	\$0-\$5.80 (Tier 2)	CYTOMEL	
REZDIFFRA 100 mg tab, 60 mg tab, 80 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
SYNTHROID 100 mcg tab, 112 mcg tab, 125 mcg tab, 137 mcg tab, 150 mcg tab, 175 mcg tab, 200 mcg tab, 25 mcg tab, 300 mcg tab, 50 mcg tab, 75 mcg tab, 88 mcg tab	\$0-\$14.40 (Tier 3)		
<i>unithroid 100 mcg tab, 112 mcg tab, 125 mcg tab, 137 mcg tab, 150 mcg tab, 175 mcg tab, 200 mcg tab, 25 mcg tab, 300 mcg tab, 50 mcg tab, 75 mcg tab, 88 mcg tab</i>	\$0-\$5.80 (Tier 2)	SYNTHROID	
HORMONAL AGENTS, SUPPRESSANT (ADRENAL OR PITUITARY)			
Hormonal Agents, Suppressant (adrenal Or Pituitary)			
<i>cabergoline 0.5 mg tab</i>	\$0-\$14.40 (Tier 3)	DOSTINEX	
FIRMAGON 80 mg sc soln	\$0-\$14.40 (Tier 4)		PA, QL(1 EA per 28 days)
FIRMAGON (240 MG DOSE) 120 mg/vial sc soln	\$0-\$14.40 (Tier 5)		PA, QL(4 EA per 365 days)
<i>leuprolide acetate 1 mg/0.2ml inj kit</i>	\$0-\$14.40 (Tier 4)	LUPRON	PA
LUPRON DEPOT (1-MONTH) 3.75 mg im kit, 7.5 mg im kit	\$0-\$14.40 (Tier 5)		PA, QL(1 EA per 28 days)
LUPRON DEPOT (3-MONTH) 11.25 mg im kit, 22.5 mg im kit	\$0-\$14.40 (Tier 5)		PA, QL(1 EA per 84 days)
LUPRON DEPOT (4-MONTH) 30 mg im kit	\$0-\$14.40 (Tier 5)		PA, QL(1 EA per 112 days)
LUPRON DEPOT (6-MONTH) 45 mg im kit	\$0-\$14.40 (Tier 5)		PA, QL(1 EA per 168 days)
<i>mifepristone 300 mg tab</i>	\$0-\$14.40 (Tier 5)		PA, QL(120 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>octreotide acetate 100 mcg/ml inj soln, 200 mcg/ml inj soln, 50 mcg/ml inj soln</i>	\$0-\$14.40 (Tier 4)	SANDOSTATIN	PA
<i>octreotide acetate 1000 mcg/ml inj soln, 500 mcg/ml inj soln</i>	\$0-\$14.40 (Tier 5)	SANDOSTATIN	PA
ORGOVYX 120 mg tab	\$0-\$14.40 (Tier 5)		PA
SIGNIFOR 0.3 mg/ml sc soln, 0.6 mg/ml sc soln, 0.9 mg/ml sc soln	\$0-\$14.40 (Tier 5)		PA, QL(60 ML per 30 days)
SOMAVERT 10 mg sc soln, 15 mg sc soln, 20 mg sc soln, 25 mg sc soln, 30 mg sc soln	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
TRELSTAR MIXJECT 11.25 mg im susp	\$0-\$14.40 (Tier 4)		PA, QL(1 EA per 84 days)
TRELSTAR MIXJECT 22.5 mg im susp	\$0-\$14.40 (Tier 5)		PA, QL(1 EA per 168 days)
HORMONAL AGENTS, SUPPRESSANT (THYROID)			
Antithyroid Agents			
<i>methimazole 10 mg tab, 5 mg tab</i>	\$0-\$5.80 (Tier 2)	TAPAZOLE	
<i>propylthiouracil 50 mg tab</i>	\$0-\$5.80 (Tier 2)		
IMMUNOLOGICAL AGENTS			
Angioedema Agents			
CINRYZE 500 unit iv soln	\$0-\$14.40 (Tier 5)		PA
<i>icatibant acetate 30 mg/3ml sc soln pfs</i>	\$0-\$14.40 (Tier 5)		PA, QL(36 ML per 30 days)
Immunoglobulins			
BIVIGAM 5 gm/50ml iv soln	\$0-\$14.40 (Tier 5)		B/D
PRIVIGEN 20 gm/200ml iv soln	\$0-\$14.40 (Tier 5)		B/D
Immunological Agents, Other			
BENLYSTA 200 mg/ml sc soln auto-inj, 200 mg/ml sc soln pfs	\$0-\$14.40 (Tier 5)		PA
COSENTYX 75 mg/0.5ml sc soln pfs	\$0-\$14.40 (Tier 5)		PA, QL(10 ML per 28 days)
COSENTYX (300 MG DOSE) 150 mg/ml sc soln pfs	\$0-\$14.40 (Tier 5)		PA, QL(10 ML per 28 days)
COSENTYX SENSOREADY (300 MG) 150 mg/ml sc soln auto-inj	\$0-\$14.40 (Tier 5)		PA, QL(10 ML per 28 days)
COSENTYX UNOREADY 300 mg/2ml sc soln auto-inj	\$0-\$14.40 (Tier 5)		PA, QL(10 ML per 28 days)
DUPIXENT 200 mg/1.14ml sc soln auto-inj, 200 mg/1.14ml sc soln pfs	\$0-\$14.40 (Tier 5)		PA, QL(4.56 ML per 28 days)
DUPIXENT 300 mg/2ml sc soln auto-inj, 300 mg/2ml sc soln pfs	\$0-\$14.40 (Tier 5)		PA, QL(8 ML per 28 days)
EBGLYSS 250 mg/2ml sc soln pfs	\$0-\$14.40 (Tier 5)		PA
EMPAVELI 1080 mg/20ml sc soln	\$0-\$14.40 (Tier 5)		PA
ENTYVIO PEN 108 mg/0.68ml sc soln auto-inj	\$0-\$14.40 (Tier 5)		PA, QL(1.36 ML per 28 days)
KINERET 100 mg/0.67ml sc soln pfs	\$0-\$14.40 (Tier 5)		PA
ORENCIA 50 mg/0.4ml sc soln pfs	\$0-\$14.40 (Tier 5)		PA, QL(1.6 ML per 28 days)
ORENCIA 87.5 mg/0.7ml sc soln pfs	\$0-\$14.40 (Tier 5)		PA, QL(2.8 ML per 28 days)
ORENCIA 125 mg/ml sc soln pfs	\$0-\$14.40 (Tier 5)		PA, QL(4 ML per 28 days)
ORENCIA CLICKJECT 125 mg/ml sc soln auto-inj	\$0-\$14.40 (Tier 5)		PA, QL(4 ML per 28 days)
OTEZLA 10 & 20 & 30 mg tab pack, 4 x 10 & 51 x20 mg tab pack	\$0-\$14.40 (Tier 5)		PA, QL(110 EA per 365 days)

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
OTEZLA/OTEZLA XR INITIATION PK 10&20&30&(ER)75 mg tab pack	\$0-\$14.40 (Tier 5)		PA, QL(82 EA per 365 days)
RINVOQ 15 mg tab er 24 hr, 30 mg tab er 24 hr, 45 mg tab er 24 hr	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
RINVOQ LQ 1 mg/ml soln	\$0-\$14.40 (Tier 5)		PA, QL(360 ML per 30 days)
SKYRIZI 55 mg/0.37ml sc soln pfs	\$0-\$14.40 (Tier 5)		PA, QL(0.37 ML per 28 days)
SKYRIZI 150 mg/ml sc soln pfs	\$0-\$14.40 (Tier 5)		PA, QL(1 ML per 28 days)
SKYRIZI 180 mg/1.2ml sc soln cart	\$0-\$14.40 (Tier 5)		PA, QL(1.2 ML per 56 days)
SKYRIZI 360 mg/2.4ml sc soln cart	\$0-\$14.40 (Tier 5)		PA, QL(2.4 ML per 56 days)
SKYRIZI PEN 150 mg/ml sc soln auto-inj	\$0-\$14.40 (Tier 5)		PA, QL(1 ML per 28 days)
STARJEMZA 45 mg/0.5ml sc soln, 45 mg/0.5ml sc soln pfs, 90 mg/ml sc soln pfs	\$0-\$14.40 (Tier 3)		PA, QL(3 ML per 84 days)
STEQEYMA 45 mg/0.5ml sc soln, 45 mg/0.5ml sc soln pfs, 90 mg/ml sc soln pfs	\$0-\$14.40 (Tier 3)		PA, QL(3 ML per 84 days)
TAVNEOS 10 mg cap	\$0-\$14.40 (Tier 5)		PA, QL(180 EA per 30 days)
<i>tofacitinib citrate 10 mg tab, 5 mg tab</i>	\$0-\$14.40 (Tier 5)		PA, QL(60 EA per 30 days)
<i>tofacitinib citrate 1 mg/ml soln</i>	\$0-\$14.40 (Tier 5)		PA, QL(300 ML per 30 days)
<i>tofacitinib citrate er 11 mg tab er 24 hr, 22 mg tab er 24 hr</i>	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
TREMFYA 100 mg/ml sc soln pfs	\$0-\$14.40 (Tier 5)		PA, QL(2 ML per 56 days)
TREMFYA 200 mg/2ml sc soln pfs	\$0-\$14.40 (Tier 5)		PA, QL(4 ML per 28 days)
TREMFYA ONE-PRESS 100 mg/ml sc soln pen-inj	\$0-\$14.40 (Tier 5)		PA, QL(2 ML per 56 days)
TREMFYA PEN 200 mg/2ml sc soln auto-inj	\$0-\$14.40 (Tier 5)		PA, QL(4 ML per 28 days)
TREMFYA-CD/UC INDUCTION 200 mg/2ml sc soln auto-inj	\$0-\$14.40 (Tier 5)		PA, QL(4 ML per 28 days)
TYENNE 162 mg/0.9ml sc soln auto-inj, 162 mg/0.9ml sc soln pfs	\$0-\$14.40 (Tier 5)		PA, QL(3.6 ML per 28 days)
VYVGART HYTRULO 1000-10000 mg-unt/5ml sc soln pfs	\$0-\$14.40 (Tier 5)		PA, QL(20 ML per 28 days)
XOLAIR 75 mg/0.5ml sc soln auto-inj, 75 mg/0.5ml sc soln pfs	\$0-\$14.40 (Tier 5)		PA, QL(1 ML per 28 days)
XOLAIR 150 mg sc soln	\$0-\$14.40 (Tier 5)		PA, QL(8 EA per 28 days)
XOLAIR 150 mg/ml sc soln auto-inj, 150 mg/ml sc soln pfs, 300 mg/2ml sc soln auto-inj, 300 mg/2ml sc soln pfs	\$0-\$14.40 (Tier 5)		PA, QL(8 ML per 28 days)
YESINTEK 45 mg/0.5ml sc soln, 45 mg/0.5ml sc soln pfs, 90 mg/ml sc soln pfs	\$0-\$14.40 (Tier 3)		PA, QL(3 ML per 84 days)
Immunostimulants			
ACTIMMUNE 100 mcg/0.5ml sc soln	\$0-\$14.40 (Tier 5)		PA
BESREMI 500 mcg/ml sc soln pfs	\$0-\$14.40 (Tier 5)		PA
BESREMI PEN 500 mcg/0.5ml sc soln pen-inj	\$0-\$14.40 (Tier 5)		PA
PEGASYS 180 mcg/ml sc soln	\$0-\$14.40 (Tier 5)		PA, QL(4 ML per 28 days)
Immunosuppressants			

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>adalimumab-aaty (1 pen) 80 mg/0.8ml Subcutaneous Auto-injector Kit</i>	\$0-\$14.40 (Tier 5)		PA, QL(3 EA per 28 days)
<i>adalimumab-aaty (2 pen) 40 mg/0.4ml Subcutaneous Auto-injector Kit</i>	\$0-\$14.40 (Tier 5)		PA, QL(6 EA per 28 days)
<i>adalimumab-aaty (2 syringe) 20 mg/0.2ml sc pfs kit</i>	\$0-\$14.40 (Tier 5)		PA, QL(2 EA per 28 days)
<i>adalimumab-aaty (2 syringe) 40 mg/0.4ml sc pfs kit</i>	\$0-\$14.40 (Tier 5)		PA, QL(6 EA per 28 days)
<i>adalimumab-aaty cd/uc/hs start 80 mg/0.8ml Subcutaneous Auto-injector Kit</i>	\$0-\$14.40 (Tier 5)		PA, QL(3 EA per 28 days)
<i>adalimumab-adbm (2 pen) 40 mg/0.4ml Subcutaneous Auto-injector Kit, 40 mg/0.8ml Subcutaneous Auto-injector Kit</i>	\$0-\$14.40 (Tier 5)		PA, QL(6 EA per 28 days)
<i>adalimumab-adbm (2 syringe) 10 mg/0.2ml sc pfs kit, 20 mg/0.4ml sc pfs kit</i>	\$0-\$14.40 (Tier 5)		PA, QL(2 EA per 28 days)
<i>adalimumab-adbm (2 syringe) 40 mg/0.4ml sc pfs kit, 40 mg/0.8ml sc pfs kit</i>	\$0-\$14.40 (Tier 5)		PA, QL(6 EA per 28 days)
<i>adalimumab-fkjp (2 pen) 40 mg/0.8ml Subcutaneous Auto-injector Kit</i>	\$0-\$14.40 (Tier 5)	HULIO	PA, QL(6 EA per 28 days)
<i>adalimumab-fkjp (2 syringe) 20 mg/0.4ml sc pfs kit</i>	\$0-\$14.40 (Tier 5)	HULIO	PA, QL(2 EA per 28 days)
<i>adalimumab-fkjp (2 syringe) 40 mg/0.8ml sc pfs kit</i>	\$0-\$14.40 (Tier 5)	HULIO	PA, QL(6 EA per 28 days)
<i>azathioprine 50 mg tab</i>	\$0-\$5.80 (Tier 2)	IMURAN	B/D
<i>cyclosporine 100 mg cap, 25 mg cap</i>	\$0-\$14.40 (Tier 4)	SANDIMMUNE	B/D
<i>cyclosporine modified 100 mg cap, 25 mg cap, 50 mg cap</i>	\$0-\$14.40 (Tier 4)	NEORAL	B/D
<i>cyclosporine modified 100 mg/ml soln</i>	\$0-\$14.40 (Tier 4)	NEORAL	B/D
<i>ENBREL 25 mg/0.5ml sc soln, 25 mg/0.5ml sc soln pfs</i>	\$0-\$14.40 (Tier 5)		PA, QL(4 ML per 28 days)
<i>ENBREL 50 mg/ml sc soln pfs</i>	\$0-\$14.40 (Tier 5)		PA, QL(8 ML per 28 days)
<i>ENBREL MINI 50 mg/ml sc soln cart</i>	\$0-\$14.40 (Tier 5)		PA, QL(8 ML per 28 days)
<i>ENBREL SURECLICK 50 mg/ml sc soln auto-inj</i>	\$0-\$14.40 (Tier 5)		PA, QL(8 ML per 28 days)
<i>ENVARUSUS XR 0.75 mg tab er 24 hr, 1 mg tab er 24 hr</i>	\$0-\$14.40 (Tier 4)		B/D
<i>ENVARUSUS XR 4 mg tab er 24 hr</i>	\$0-\$14.40 (Tier 5)		B/D
<i>everolimus 0.25 mg tab, 0.5 mg tab, 0.75 mg tab</i>	\$0-\$14.40 (Tier 4)	ZORTRESS	B/D
<i>everolimus 1 mg tab</i>	\$0-\$14.40 (Tier 5)	ZORTRESS	B/D
<i>gengraf 100 mg cap, 25 mg cap</i>	\$0-\$14.40 (Tier 4)	NEORAL	B/D
<i>JYLAMVO 2 mg/ml soln</i>	\$0-\$14.40 (Tier 4)		B/D
<i>leflunomide 10 mg tab, 20 mg tab</i>	\$0-\$5.80 (Tier 2)	ARAVA	
<i>methotrexate sodium 2.5 mg tab</i>	\$0-\$5.80 (Tier 2)		
<i>methotrexate sodium 50 mg/2ml inj soln</i>	\$0-\$5.80 (Tier 2)		
<i>methotrexate sodium (pf) 50 mg/2ml inj soln</i>	\$0-\$5.80 (Tier 2)		
<i>mycophenolate mofetil 250 mg cap, 500 mg tab</i>	\$0-\$14.40 (Tier 4)	CELLCEPT	B/D
<i>mycophenolate mofetil 200 mg/ml susp</i>	\$0-\$14.40 (Tier 5)	CELLCEPT	B/D
<i>mycophenolate sodium 180 mg tab dr, 360 mg tab dr</i>	\$0-\$14.40 (Tier 4)	MYFORTIC	B/D
<i>PEGASYS 180 mcg/0.5ml sc soln pfs</i>	\$0-\$14.40 (Tier 5)		PA, QL(2 ML per 28 days)
<i>PROGRAF 0.2 mg pckt, 1 mg pckt</i>	\$0-\$14.40 (Tier 4)		B/D

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
REZUROCK 200 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(60 EA per 30 days)
<i>sirolimus 0.5 mg tab, 1 mg tab, 2 mg tab</i>	\$0-\$14.40 (Tier 4)	RAPAMUNE	B/D
<i>sirolimus 1 mg/ml soln</i>	\$0-\$14.40 (Tier 4)	RAPAMUNE	B/D
<i>tacrolimus 0.5 mg cap, 1 mg cap, 5 mg cap</i>	\$0-\$14.40 (Tier 4)	PROGRAF	B/D
<i>tacrolimus er 0.5 mg cap er 24 hr, 1 mg cap er 24 hr, 5 mg cap er 24 hr</i>	\$0-\$14.40 (Tier 4)		B/D
XATMEP 2.5 mg/ml soln	\$0-\$14.40 (Tier 4)		B/D
ZYMFENTRA (2 PEN) 120 mg/ml Subcutaneous Auto-injector Kit	\$0-\$14.40 (Tier 5)		PA, QL(2 EA per 28 days)
ZYMFENTRA (2 SYRINGE) 120 mg/ml sc pfs kit	\$0-\$14.40 (Tier 5)		PA, QL(2 EA per 28 days)
Vaccines			
ABRYSCO 120 mcg/0.5ml im soln	\$0-\$5.80 (Tier 1)		QL(1 EA per 252 days)
ACTHIB im soln	\$0-\$5.80 (Tier 1)		
ADACEL 5-2-15.5 lf-mcg/0.5 im susp, 5-2-15.5 lf-mcg/0.5 im susp pfs	\$0-\$5.80 (Tier 1)		
AREXVY 120 mcg/0.5ml im susp	\$0-\$5.80 (Tier 1)		QL(1 EA per 999 days)
<i>bcg vaccine 50 mg inj soln</i>	\$0-\$5.80 (Tier 1)		
BEXSERO 0.5 ml im susp pfs	\$0-\$5.80 (Tier 1)		
BOOSTRIX 5-2.5-18.5 lf-mcg/0.5 im susp pfs	\$0-\$5.80 (Tier 1)		
DAPTACEL 23-15-5 im susp	\$0-\$14.40 (Tier 3)		
ENGRIX-B 10 mcg/0.5ml Injection Suspension Prefilled Syringe, 20 mcg/ml inj susp, 20 mcg/ml Injection Suspension Prefilled Syringe	\$0-\$5.80 (Tier 1)		B/D
GARDASIL 9 0.5 ml im susp, 0.5 ml im susp pfs	\$0-\$5.80 (Tier 1)		
HAVRIX 1440 el u/ml im susp pfs	\$0-\$5.80 (Tier 1)		
HAVRIX 720 el u/0.5ml im susp pfs	\$0-\$14.40 (Tier 3)		
HEPLISAV-B 20 mcg/0.5ml im soln pfs	\$0-\$5.80 (Tier 1)		B/D
HIBERIX 10 mcg inj soln	\$0-\$5.80 (Tier 1)		
IMOVAX RABIES 2.5 unit/ml im susp	\$0-\$5.80 (Tier 1)		B/D
INFANRIX 25-58-10 im susp	\$0-\$14.40 (Tier 3)		
IPOX inj susp	\$0-\$5.80 (Tier 1)		
IXIARO im susp	\$0-\$5.80 (Tier 1)		
JYNNEOS 0.5 ml sc susp	\$0-\$5.80 (Tier 1)		
KINRIX 0.5 ml im susp pfs	\$0-\$14.40 (Tier 3)		
M-M-R II inj soln	\$0-\$5.80 (Tier 1)		
MENQUADFI 0.5 ml im soln	\$0-\$5.80 (Tier 1)		
MENVEO im soln	\$0-\$5.80 (Tier 1)		
MRESVIA 50 mcg/0.5ml im susp pfs	\$0-\$5.80 (Tier 1)		QL(0.5 ML per 999 days)
PEDIARIX im susp pfs	\$0-\$14.40 (Tier 3)		
PEDVAXHIB 7.5 mcg/0.5ml im susp	\$0-\$14.40 (Tier 3)		
PENBRAYA im susp	\$0-\$5.80 (Tier 1)		
<i>penmenvax im susp</i>	\$0-\$5.80 (Tier 1)		
PENTACEL im susp	\$0-\$14.40 (Tier 3)		
PRIORIX sc susp	\$0-\$5.80 (Tier 1)		
PROQUAD sc susp	\$0-\$14.40 (Tier 3)		
QUADRACEL im susp, 0.5 ml im susp pfs	\$0-\$14.40 (Tier 3)		
RABAVERT im susp	\$0-\$5.80 (Tier 1)		B/D

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
RECOMBIVAX HB 10 mcg/ml inj susp, 10 mcg/ml Injection Suspension Prefilled Syringe, 40 mcg/ml inj susp, 5 mcg/0.5ml inj susp, 5 mcg/0.5ml Injection Suspension Prefilled Syringe	\$0-\$5.80 (Tier 1)		B/D
ROTARIX susp	\$0-\$14.40 (Tier 3)		
ROTATEQ soln	\$0-\$14.40 (Tier 3)		
SHINGRIX 50 mcg/0.5ml im susp pfs	\$0-\$5.80 (Tier 1)		
SHINGRIX 50 mcg/0.5ml im susp	\$0-\$5.80 (Tier 1)		QL(2 EA per 999 days)
TENIVAC 5-2 lf/0.5ml im susp	\$0-\$5.80 (Tier 1)		
TICOVAC 2.4 mcg/0.5ml im susp pfs	\$0-\$5.80 (Tier 1)		
TICOVAC 1.2 mcg/0.25ml im susp pfs	\$0-\$14.40 (Tier 3)		
TRUMENBA 0.5 ml im susp pfs	\$0-\$5.80 (Tier 1)		
TWINRIX 720-20 elu-mcg/ml im susp pfs	\$0-\$5.80 (Tier 1)		
TYPHIM VI 25 mcg/0.5ml im soln pfs	\$0-\$5.80 (Tier 1)		
VAQTA 50 unit/ml im susp, 50 unit/ml im susp pfs	\$0-\$5.80 (Tier 1)		
VAQTA 25 unit/0.5ml im susp, 25 unit/0.5ml im susp pfs	\$0-\$14.40 (Tier 3)		
VARIVAX 1350 pfu/0.5ml inj susp	\$0-\$5.80 (Tier 1)		
VAXCHORA susp	\$0-\$5.80 (Tier 1)		
VIMKUNYA 40 mcg/0.8ml im susp pfs	\$0-\$5.80 (Tier 1)		
VIVOTIF cap dr	\$0-\$5.80 (Tier 1)		QL(4 EA per 999 days)
YF-VAX sc susp	\$0-\$5.80 (Tier 1)		
INFLAMMATORY BOWEL DISEASE AGENTS			
Aminosalicylates			
<i>balsalazide disodium 750 mg cap</i>	\$0-\$14.40 (Tier 4)	COLAZAL	
<i>mesalamine 1000 mg rect supp</i>	\$0-\$14.40 (Tier 4)	CANASA	QL(30 EA per 30 days)
<i>mesalamine 1.2 gm tab dr</i>	\$0-\$14.40 (Tier 4)	LIALDA	QL(120 EA per 30 days)
<i>mesalamine 4 gm rect enema</i>	\$0-\$14.40 (Tier 4)	ROWASA	QL(1800 ML per 30 days)
<i>mesalamine er 0.375 gm cap er 24 hr</i>	\$0-\$14.40 (Tier 4)	APRISO	QL(120 EA per 30 days)
<i>mesalamine er 500 mg cap er</i>	\$0-\$14.40 (Tier 4)	PENTASA	QL(240 EA per 30 days)
<i>sulfasalazine 500 mg tab, 500 mg tab dr</i>	\$0-\$5.80 (Tier 2)	AZULFIDINE	
Glucocorticoids			
<i>budesonide 3 mg cap dr prt</i>	\$0-\$14.40 (Tier 4)	ENTOCORT	
<i>budesonide er 9 mg tab er 24 hr</i>	\$0-\$14.40 (Tier 5)	UCERIS	
<i>hydrocortisone 100 mg/60ml rect enema</i>	\$0-\$14.40 (Tier 4)	CORTENEMA	
<i>hydrocortisone (perianal) 2.5 % Topical Cream</i>	\$0-\$5.80 (Tier 2)	ANUSOL HC	QL(300 GM per 30 days)
<i>procto-med hc 2.5 % Topical Cream</i>	\$0-\$5.80 (Tier 2)	ANUSOL HC	QL(300 GM per 30 days)
TARPEYO 4 mg cap dr	\$0-\$14.40 (Tier 5)		PA, QL(120 EA per 30 days)
METABOLIC BONE DISEASE AGENTS			
Metabolic Bone Disease Agents			
<i>alendronate sodium 10 mg tab, 35 mg tab</i>	\$0-\$5.80 (Tier 1)	FOSAMAX	
<i>alendronate sodium 70 mg tab</i>	\$0-\$5.80 (Tier 1)	FOSAMAX	QL(4 EA per 28 days)
BONSITY 560 mcg/2.24ml sc soln pen-inj	\$0-\$14.40 (Tier 5)		PA, QL(2.24 ML per 28 days)
<i>calcitonin (salmon) 200 unit/act nasal soln</i>	\$0-\$14.40 (Tier 3)	MIACALCIN	QL(3.7 ML per 30 days)
<i>calcitriol 0.25 mcg cap, 0.5 mcg cap</i>	\$0-\$5.80 (Tier 2)	ROCALTROL	
<i>cinacalcet hcl 30 mg tab, 60 mg tab, 90 mg tab</i>	\$0-\$14.40 (Tier 4)	SENSIPAR	

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LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>ibandronate sodium 150 mg tab</i>	\$0-\$5.80 (Tier 2)	BONIVA	QL(1 EA per 28 days)
JUBBONTI 60 mg/ml sc soln pfs	\$0-\$14.40 (Tier 4)		QL(2 ML per 365 days)
OSENVELT 120 mg/1.7ml sc soln	\$0-\$14.40 (Tier 5)		PA
<i>paricalcitol 1 mcg cap, 2 mcg cap, 4 mcg cap</i>	\$0-\$14.40 (Tier 4)	ZEMPLAR	
RAYALDEE 30 mcg cap er	\$0-\$14.40 (Tier 5)		QL(60 EA per 30 days)
<i>risedronate sodium 5 mg tab</i>	\$0-\$14.40 (Tier 4)	ACTONEL	
<i>risedronate sodium 150 mg tab</i>	\$0-\$14.40 (Tier 4)	ACTONEL	QL(1 EA per 28 days)
<i>risedronate sodium 35 mg tab</i>	\$0-\$14.40 (Tier 4)	ACTONEL	QL(4 EA per 28 days)
STOBOCLO 60 mg/ml sc soln pfs	\$0-\$14.40 (Tier 4)		QL(2 ML per 365 days)
<i>teriparatide 560 mcg/2.24ml sc soln pen-inj</i>	\$0-\$14.40 (Tier 5)		PA, QL(2.24 ML per 28 days)
TYMLOS 3120 mcg/1.56ml sc soln pen-inj	\$0-\$14.40 (Tier 5)		PA, QL(1.56 ML per 30 days)
WYOST 120 mg/1.7ml sc soln	\$0-\$14.40 (Tier 5)		PA
MISCELLANEOUS THERAPEUTIC AGENTS			
Miscellaneous Therapeutic Agents			
<i>alcohol preps pad</i>	\$0-\$14.40 (Tier 3)		
BD INSULIN SYRINGE 29G X 1/2" 1 ml misc	\$0-\$5.80 (Tier 2)		QL(200 EA per 30 days)
BD INSULIN SYRINGE ULTRAFINE 29G X 1/2" 0.3 ml misc, 29G X 1/2" 0.5 ml misc	\$0-\$5.80 (Tier 2)		QL(200 EA per 30 days)
BD PEN MINI misc	\$0-\$5.80 (Tier 2)		QL(200 EA per 30 days)
BD PEN NEEDLE MINI ULTRAFINE 31G X 5 MM misc	\$0-\$5.80 (Tier 2)		QL(200 EA per 30 days)
<i>gauze pads 2"X2" pad</i>	\$0-\$14.40 (Tier 3)		
KYGEVVI 2-2 gm pckt	\$0-\$14.40 (Tier 5)		PA
<i>levocarnitine 330 mg tab</i>	\$0-\$14.40 (Tier 4)	CARNITOR	
<i>levocarnitine 1 gm/10ml soln</i>	\$0-\$14.40 (Tier 4)	CARNITOR	
NUTRILIPID 20 % iv emul	\$0-\$14.40 (Tier 4)		B/D
RIVFLOZA 128 mg/0.8ml sc soln pfs	\$0-\$14.40 (Tier 5)		PA, QL(0.8 ML per 28 days)
RIVFLOZA 160 mg/ml sc soln pfs, 80 mg/0.5ml sc soln	\$0-\$14.40 (Tier 5)		PA, QL(1 ML per 28 days)
SKYCLARYS 50 mg cap	\$0-\$14.40 (Tier 5)		PA, QL(90 EA per 30 days)
<i>sodium chloride 0.9 % irrig soln</i>	\$0-\$5.80 (Tier 2)		
WEGOVY 0.25 mg/0.5ml sc soln auto-inj, 0.5 mg/0.5ml sc soln auto-inj, 1 mg/0.5ml sc soln auto-inj	\$0-\$14.40 (Tier 3)		PA, QL(2 ML per 28 days)
WEGOVY 1.7 mg/0.75ml sc soln auto-inj, 2.4 mg/0.75ml sc soln auto-inj	\$0-\$14.40 (Tier 3)		PA, QL(3 ML per 28 days)
WEGOVY 25 mg tab, 4 mg tab, 9 mg tab	\$0-\$14.40 (Tier 3)		PA, QL(30 EA per 30 days)
WEGOVY 1.5 mg tab	\$0-\$14.40 (Tier 3)		PA, QL(60 EA per 365 days)
ZOKINVY 50 mg cap, 75 mg cap	\$0-\$14.40 (Tier 5)		PA, QL(120 EA per 30 days)
OPHTHALMIC AGENTS			
Ophthalmic Agents, Other			
<i>atropine sulfate 1 % ophth soln</i>	\$0-\$5.80 (Tier 2)	ISOPTO ATROPINE	
<i>bacitra-neomycin-polymyxin-hc 1 % ophth oint</i>	\$0-\$14.40 (Tier 3)	CORTISPORIN	
<i>bacitracin-polymyxin b 500-10000 unit/gm ophth oint</i>	\$0-\$5.80 (Tier 2)	POLYSPORIN	

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>brimonidine tartrate-timolol 0.2-0.5 % ophth soln</i>	\$0-\$14.40 (Tier 3)	COMBIGAN	
COMBIGAN 0.2-0.5 % ophth soln	\$0-\$14.40 (Tier 3)		
<i>cyclosporine (pf) 0.05 % ophth emul</i>	\$0-\$14.40 (Tier 3)		QL(60 EA per 30 days)
CYSTARAN 0.44 % ophth soln	\$0-\$14.40 (Tier 5)		QL(60 ML per 28 days)
<i>dorzolamide hcl-timolol mal 2-0.5 % ophth soln</i>	\$0-\$5.80 (Tier 2)	COSOPT	
<i>dorzolamide hcl-timolol mal pf 2-0.5 % ophth soln</i>	\$0-\$5.80 (Tier 2)	COSOPT	
<i>loteprednol-tobramycin 0.5-0.3 % ophth susp</i>	\$0-\$14.40 (Tier 4)		
MIEBO 1.338 gm/ml ophth soln	\$0-\$14.40 (Tier 4)		QL(12 ML per 30 days)
<i>neomycin-bacitracin zn-polymyx 5-400-10000 ophth oint</i>	\$0-\$14.40 (Tier 3)	NEOSPORIN	
<i>neomycin-polymyxin-dexameth 3.5-10000-0.1 ophth oint</i>	\$0-\$5.80 (Tier 2)	MAXITROL	
<i>neomycin-polymyxin-dexameth 3.5-10000-0.1 ophth susp</i>	\$0-\$5.80 (Tier 2)	MAXITROL	
<i>neomycin-polymyxin-gramicidin 1.75-10000-.025 ophth soln</i>	\$0-\$14.40 (Tier 3)	NEOSPORIN	
<i>polymyxin b-trimethoprim 10000-0.1 unit/ml-% ophth soln</i>	\$0-\$5.80 (Tier 1)	POLYTRIM	
RESTASIS 0.05 % ophth emul	\$0-\$14.40 (Tier 3)		QL(60 EA per 30 days)
RESTASIS MULTIDOSE 0.05 % ophth emul	\$0-\$14.40 (Tier 3)		QL(5.5 ML per 25 days)
ROCKLATAN 0.02-0.005 % ophth soln	\$0-\$14.40 (Tier 3)		QL(2.5 ML per 25 days)
SIMBRINZA 1-0.2 % ophth susp	\$0-\$14.40 (Tier 3)		
<i>sulfacetamide-prednisolone 10-0.23 % ophth soln</i>	\$0-\$5.80 (Tier 2)	VASOCIDIN	
TOBRADEX 0.3-0.1 % ophth oint	\$0-\$14.40 (Tier 4)		
<i>tobramycin-dexamethasone 0.3-0.1 % ophth susp</i>	\$0-\$14.40 (Tier 4)	TOBRADEX	
TYRVAYA 0.03 mg/act nasal soln	\$0-\$14.40 (Tier 4)		QL(8.4 ML per 30 days)
XIIDRA 5 % ophth soln	\$0-\$14.40 (Tier 4)		QL(60 EA per 30 days)
Ophthalmic Anti-allergy Agents			
<i>azelastine hcl 0.05 % ophth soln</i>	\$0-\$5.80 (Tier 2)	OPTIVAR	
<i>cromolyn sodium 4 % ophth soln</i>	\$0-\$5.80 (Tier 2)	OPTICROM	
Ophthalmic Anti-infectives			
BESIVANCE 0.6 % ophth susp	\$0-\$14.40 (Tier 4)		
<i>ciprofloxacin hcl 0.3 % ophth soln</i>	\$0-\$5.80 (Tier 2)	CILOXAN	
<i>erythromycin 5 mg/gm ophth oint</i>	\$0-\$5.80 (Tier 2)	ILOTYCIN	
<i>gatifloxacin 0.5 % ophth soln</i>	\$0-\$14.40 (Tier 4)	ZYMAXID	
<i>gentamicin sulfate 0.3 % ophth soln</i>	\$0-\$5.80 (Tier 2)	GARAMYCIN	
<i>levofloxacin 0.5 % ophth soln</i>	\$0-\$14.40 (Tier 3)	QUIXIN	
<i>moxifloxacin hcl 0.5 % ophth soln</i>	\$0-\$5.80 (Tier 2)	VIGAMOX	
NATACYN 5 % ophth susp	\$0-\$14.40 (Tier 4)		
<i>ofloxacin 0.3 % ophth soln</i>	\$0-\$5.80 (Tier 2)	OCUFLOX	
<i>sulfacetamide sodium 10 % ophth soln</i>	\$0-\$5.80 (Tier 2)	BLEPH-10	
<i>tobramycin 0.3 % ophth soln</i>	\$0-\$5.80 (Tier 1)	TOBREX	
<i>trifluridine 1 % ophth soln</i>	\$0-\$14.40 (Tier 4)	VIROPTIC	
XDEMYVY 0.25 % ophth soln	\$0-\$14.40 (Tier 5)		QL(10 ML per 42 days)
ZIRGAN 0.15 % ophth gel	\$0-\$14.40 (Tier 4)		
Ophthalmic Anti-inflammatories			
<i>bromfenac sodium 0.07 % ophth soln</i>	\$0-\$14.40 (Tier 4)		QL(12 ML per 365 days)

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>dexamethasone sodium phosphate 0.1 % ophth soln</i>	\$0-\$14.40 (Tier 3)	MAXIDEX	
<i>diclofenac sodium 0.1 % ophth soln</i>	\$0-\$5.80 (Tier 2)	VOLTAREN	
FLAREX 0.1 % ophth susp	\$0-\$14.40 (Tier 3)		
<i>fluorometholone 0.1 % ophth susp</i>	\$0-\$14.40 (Tier 3)	FML	
<i>flurbiprofen sodium 0.03 % ophth soln</i>	\$0-\$5.80 (Tier 2)	OCUFEN	
ILEVRO 0.3 % ophth susp	\$0-\$14.40 (Tier 3)		QL(4 ML per 30 days)
<i>ketorolac tromethamine 0.5 % ophth soln</i>	\$0-\$5.80 (Tier 2)	ACULAR	
<i>ketorolac tromethamine 0.4 % ophth soln</i>	\$0-\$14.40 (Tier 3)	ACULAR	
<i>loteprednol etabonate 0.5 % ophth gel</i>	\$0-\$14.40 (Tier 4)	LOTEMAX	QL(20 GM per 365 days)
<i>prednisolone acetate 1 % ophth susp</i>	\$0-\$14.40 (Tier 3)	PRED FORTE	
Ophthalmic Beta-adrenergic Blocking Agents			
<i>betaxolol hcl 0.5 % ophth soln</i>	\$0-\$14.40 (Tier 3)	BETOPTIC	
<i>carteolol hcl 1 % ophth soln</i>	\$0-\$5.80 (Tier 2)	OCUPRESS	
<i>levobunolol hcl 0.5 % ophth soln</i>	\$0-\$5.80 (Tier 2)	BETAGAN	
<i>timolol maleate 0.25 % ophth soln, 0.5 % ophth soln</i>	\$0-\$5.80 (Tier 1)	TIMOPTIC	
Ophthalmic Intraocular Pressure Lowering Agents, Other			
<i>acetazolamide 125 mg tab, 250 mg tab</i>	\$0-\$14.40 (Tier 3)	DIAMOX	
<i>acetazolamide er 500 mg cap er 12 hr</i>	\$0-\$14.40 (Tier 3)	DIAMOX	
<i>brimonidine tartrate 0.1 % ophth soln</i>	\$0-\$14.40 (Tier 3)		
<i>brimonidine tartrate 0.2 % ophth soln</i>	\$0-\$5.80 (Tier 2)	ALPHAGAN	
<i>brinzolamide 1 % ophth susp</i>	\$0-\$14.40 (Tier 4)	AZOPT	
<i>dorzolamide hcl 2 % ophth soln</i>	\$0-\$5.80 (Tier 2)	TRUSOPT	
<i>pilocarpine hcl 1 % ophth soln, 2 % ophth soln, 4 % ophth soln</i>	\$0-\$14.40 (Tier 3)	ISOPTO CARPINE	
RHOPRESSA 0.02 % ophth soln	\$0-\$14.40 (Tier 3)		QL(2.5 ML per 25 days)
Ophthalmic Prostaglandin And Prostamide Analogs			
<i>latanoprost 0.005 % ophth soln</i>	\$0-\$5.80 (Tier 1)	XALATAN	
LUMIGAN 0.01 % ophth soln	\$0-\$14.40 (Tier 3)		QL(2.5 ML per 25 days)
<i>travoprost (bak free) 0.004 % ophth soln</i>	\$0-\$14.40 (Tier 4)	TRAVATAN	QL(2.5 ML per 25 days)
VYZULTA 0.024 % ophth soln	\$0-\$14.40 (Tier 4)		QL(5 ML per 25 days)
OTIC AGENTS			
Otic Agents			
<i>acetic acid 2 % otic soln</i>	\$0-\$5.80 (Tier 2)	VOSOL	
<i>ciprofloxacin-dexamethasone 0.3-0.1 % otic susp</i>	\$0-\$14.40 (Tier 4)	CIPRODEX	
<i>hydrocortisone-acetic acid 1-2 % otic soln</i>	\$0-\$14.40 (Tier 4)	VOSOL HC	
<i>neomycin-polymyxin-hc 1 % otic soln, 3.5-10000-1 otic susp</i>	\$0-\$14.40 (Tier 3)	CORTISPORIN	
<i>ofloxacin 0.3 % otic soln</i>	\$0-\$5.80 (Tier 2)	FLOXIN	
RESPIRATORY TRACT/PULMONARY AGENTS			
Anti-inflammatories, Inhaled Corticosteroids			
ARNUITY ELLIPTA 100 mcg/act inh aer pwdr br act, 200 mcg/act inh aer pwdr br act, 50 mcg/act inh aer pwdr br act	\$0-\$14.40 (Tier 3)		QL(30 EA per 30 days)
ASMANEX (120 METERED DOSES) 220 mcg/act inh aer pwdr br act	\$0-\$14.40 (Tier 4)		QL(1 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
ASMANEX (30 METERED DOSES) 110 mcg/act inh aer pwdr br act, 220 mcg/act inh aer pwdr br act	\$0-\$14.40 (Tier 4)		QL(1 EA per 30 days)
ASMANEX (60 METERED DOSES) 220 mcg/act inh aer pwdr br act	\$0-\$14.40 (Tier 4)		QL(1 EA per 30 days)
ASMANEX HFA 100 mcg/act inh aer, 200 mcg/act inh aer, 50 mcg/act inh aer	\$0-\$14.40 (Tier 4)		QL(13 GM per 30 days)
<i>budesonide 0.25 mg/2ml inh susp, 0.5 mg/2ml inh susp, 1 mg/2ml inh susp</i>	\$0-\$14.40 (Tier 4)	PULMICORT	B/D, QL(120 ML per 30 days)
<i>flunisolide 25 MCG/ACT (0.025%) nasal soln</i>	\$0-\$14.40 (Tier 4)	NASALIDE	QL(50 ML per 30 days)
<i>fluticasone propionate 50 mcg/act nasal susp</i>	\$0-\$5.80 (Tier 1)	FLONASE	QL(16 GM per 30 days)
<i>mometasone furoate 50 mcg/act nasal susp</i>	\$0-\$14.40 (Tier 4)	NASONEX	QL(34 GM per 30 days)
QVAR REDIHALER 40 mcg/act inh aer br act, 80 mcg/act inh aer br act	\$0-\$14.40 (Tier 3)		QL(21.2 GM per 30 days)
Antihistamines			
<i>azelastine hcl 0.1 % nasal soln</i>	\$0-\$5.80 (Tier 2)	ASTELIN	QL(60 ML per 30 days)
<i>cetirizine hcl 5 mg/5ml soln</i>	\$0-\$5.80 (Tier 2)	ZYRTEC	
<i>cycloheptadine hcl 4 mg tab</i>	\$0-\$14.40 (Tier 4)	PERIACTIN	
<i>hydroxyzine hcl 10 mg tab, 25 mg tab, 50 mg tab</i>	\$0-\$14.40 (Tier 3)	ATARAX	PA
<i>hydroxyzine hcl 10 mg/5ml syr</i>	\$0-\$14.40 (Tier 4)	ATARAX	PA
<i>hydroxyzine pamoate 100 mg cap, 25 mg cap, 50 mg cap</i>	\$0-\$14.40 (Tier 4)	VISTARIL	PA
<i>levocetirizine dihydrochloride 5 mg tab</i>	\$0-\$5.80 (Tier 2)	XYZAL	QL(30 EA per 30 days)
Antileukotrienes			
<i>montelukast sodium 10 mg tab</i>	\$0-\$5.80 (Tier 1)	SINGULAIR	QL(30 EA per 30 days)
<i>montelukast sodium 4 mg pckt</i>	\$0-\$5.80 (Tier 2)	SINGULAIR	
<i>montelukast sodium 4 mg tab chew, 5 mg tab chew</i>	\$0-\$5.80 (Tier 2)	SINGULAIR	QL(30 EA per 30 days)
<i>zafirlukast 10 mg tab, 20 mg tab</i>	\$0-\$14.40 (Tier 4)	ACCOLATE	QL(60 EA per 30 days)
Bronchodilators, Anticholinergic			
INCRUSE ELLIPTA 62.5 mcg/act inh aer pwdr br act	\$0-\$14.40 (Tier 3)		QL(30 EA per 30 days)
<i>ipratropium bromide 0.03 % nasal soln</i>	\$0-\$5.80 (Tier 2)	ATROVENT	QL(30 ML per 28 days)
<i>ipratropium bromide 0.06 % nasal soln</i>	\$0-\$5.80 (Tier 2)	ATROVENT	QL(45 ML per 30 days)
<i>ipratropium bromide 0.02 % inh soln</i>	\$0-\$5.80 (Tier 2)	ATROVENT	B/D, QL(312.5 ML per 30 days)
<i>ipratropium bromide hfa 17 mcg/act inh aer soln</i>	\$0-\$14.40 (Tier 4)		QL(25.8 GM per 30 days)
SPIRIVA RESPIMAT 1.25 mcg/act inh aer soln, 2.5 mcg/act inh aer soln	\$0-\$14.40 (Tier 3)		QL(4 GM per 30 days)
<i>tiotropium bromide 18 mcg inh cap</i>	\$0-\$14.40 (Tier 4)	SPIRIVA HANDIHALER	QL(30 EA per 30 days)
YUPELRI 175 mcg/3ml inh neb soln	\$0-\$14.40 (Tier 5)		B/D, QL(90 ML per 30 days)
Bronchodilators, Sympathomimetic			
<i>albuterol sulfate 0.63 mg/3ml inh neb soln, 1.25 mg/3ml inh neb soln</i>	\$0-\$14.40 (Tier 4)	ACCUNEB	B/D, QL(375 ML per 30 days)
<i>albuterol sulfate 2.5 mg/0.5ml inh neb soln</i>	\$0-\$5.80 (Tier 2)	PROVENTIL	B/D, QL(100 EA per 30 days)
<i>albuterol sulfate (2.5 MG/3ML) 0.083% inh neb soln</i>	\$0-\$5.80 (Tier 2)	PROVENTIL	B/D, QL(525 ML per 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>albuterol sulfate hfa 108 (90 Base) mcg/act inh aer soln</i>	\$0-\$5.80 (Tier 2)	PROAIR HFA	QL(13.4 GM per 30 days)
<i>albuterol sulfate hfa 108 (90 Base) mcg/act inh aer soln</i>	\$0-\$5.80 (Tier 2)	PROAIR HFA	QL(17 GM per 30 days)
<i>albuterol sulfate hfa 108 (90 Base) mcg/act inh aer soln</i>	\$0-\$5.80 (Tier 2)	PROAIR HFA	QL(48 GM per 30 days)
<i>arformoterol tartrate 15 mcg/2ml inh neb soln</i>	\$0-\$14.40 (Tier 4)	BROVANA	B/D, QL(120 ML per 30 days)
<i>epinephrine 0.15 mg/0.15ml inj soln auto-inj, 0.3 mg/0.3ml inj soln auto-inj</i>	\$0-\$14.40 (Tier 3)	ADRENACLICK	QL(4 EA per 30 days)
<i>epinephrine 0.15 mg/0.3ml inj soln auto-inj</i>	\$0-\$14.40 (Tier 3)	EPIPEN JR	QL(4 EA per 30 days)
<i>levalbuterol hcl 0.63 mg/3ml inh neb soln</i>	\$0-\$14.40 (Tier 4)	XOPENEX	B/D, QL(540 ML per 30 days)
<i>levalbuterol tartrate 45 mcg/act inh aer</i>	\$0-\$14.40 (Tier 3)	XOPENEX HFA	QL(30 GM per 30 days)
PROAIR RESPICLICK 108 (90 Base) mcg/act inh aer pwdr br act	\$0-\$14.40 (Tier 3)		QL(2 EA per 30 days)
SEREVENT DISKUS 50 mcg/act inh aer pwdr br act	\$0-\$14.40 (Tier 3)		QL(60 EA per 30 days)
Cystic Fibrosis Agents			
CAYSTON 75 mg inh soln	\$0-\$14.40 (Tier 5)		PA, QL(84 ML per 28 days)
KALYDECO 13.4 mg pckt, 25 mg pckt, 5.8 mg pckt, 50 mg pckt, 75 mg pckt	\$0-\$14.40 (Tier 5)		PA, QL(56 EA per 28 days)
KALYDECO 150 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(60 EA per 30 days)
ORKAMBI 100-125 mg tab, 200-125 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(112 EA per 28 days)
PULMOZYME 2.5 mg/2.5ml inh soln	\$0-\$14.40 (Tier 5)		B/D
TOBI PODHALER 28 mg inh cap	\$0-\$14.40 (Tier 5)		QL(224 EA per 56 days)
<i>tobramycin 300 mg/5ml inh neb soln</i>	\$0-\$14.40 (Tier 5)	TOBI	B/D, QL(280 ML per 28 days)
TRIKAFTA 100-50-75 & 150 mg tab pack, 50-25-37.5 & 75 mg tab pack	\$0-\$14.40 (Tier 5)		PA, QL(84 EA per 28 days)
Mast Cell Stabilizers			
<i>cromolyn sodium 20 mg/2ml inh neb soln</i>	\$0-\$14.40 (Tier 3)	INTAL	B/D
Phosphodiesterase Inhibitors, Airways Disease			
<i>roflumilast 500 mcg tab</i>	\$0-\$14.40 (Tier 4)	DALIRESP	PA, QL(30 EA per 30 days)
<i>roflumilast 250 mcg tab</i>	\$0-\$14.40 (Tier 4)	DALIRESP	PA, QL(56 EA per 365 days)
<i>theophylline er 300 mg tab er 12 hr, 450 mg tab er 12 hr</i>	\$0-\$14.40 (Tier 4)	THEO-DUR	
<i>theophylline er 400 mg tab er 24 hr, 600 mg tab er 24 hr</i>	\$0-\$5.80 (Tier 2)	UNIPHYL	
Pulmonary Antihypertensives			
ADEMPAS 0.5 mg tab, 1 mg tab, 1.5 mg tab, 2 mg tab, 2.5 mg tab	\$0-\$14.40 (Tier 5)		PA, QL(90 EA per 30 days)
<i>alyq 20 mg tab</i>	\$0-\$14.40 (Tier 4)	ADCIRCA	PA, QL(60 EA per 30 days)
<i>ambrisentan 10 mg tab, 5 mg tab</i>	\$0-\$14.40 (Tier 5)	LETAIRIS	PA, QL(30 EA per 30 days)
<i>macitentan 10 mg tab</i>	\$0-\$14.40 (Tier 5)		PA, QL(30 EA per 30 days)
ORENITRAM 0.125 mg tab er	\$0-\$14.40 (Tier 4)		PA
ORENITRAM 0.25 mg tab er, 1 mg tab er, 2.5 mg tab er, 5 mg tab er	\$0-\$14.40 (Tier 5)		PA

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
ORENITRAM MONTH 1 0.125 & 0.25 mg tab er pack	\$0-\$14.40 (Tier 5)		PA, QL(336 EA per 365 days)
ORENITRAM MONTH 2 0.125 & 0.25 mg tab er pack	\$0-\$14.40 (Tier 5)		PA, QL(672 EA per 365 days)
ORENITRAM MONTH 3 0.125 & 0.25 & 1 mg tab er pack	\$0-\$14.40 (Tier 5)		PA, QL(504 EA per 365 days)
<i>sildenafil citrate 20 mg tab</i>	\$0-\$14.40 (Tier 3)	REVATIO	PA, QL(90 EA per 30 days)
<i>tadalafil (pah) 20 mg tab</i>	\$0-\$14.40 (Tier 4)	ADCIRCA	PA, QL(60 EA per 30 days)
WINREVAIR 2 x 45 mg sc kit, 2 x 60 mg sc kit, 45 mg sc kit, 60 mg sc kit	\$0-\$14.40 (Tier 5)		PA, QL(1 EA per 21 days)
Pulmonary Fibrosis Agents			
<i>nintedanib esylate 100 mg cap, 150 mg cap</i>	\$0-\$14.40 (Tier 5)		PA, QL(60 EA per 30 days)
OFEV 100 mg cap, 150 mg cap	\$0-\$14.40 (Tier 5)		PA, QL(60 EA per 30 days)
<i>pirfenidone 534 mg tab</i>	\$0-\$14.40 (Tier 5)		PA
<i>pirfenidone 801 mg tab</i>	\$0-\$14.40 (Tier 5)	ESBRIET	PA, QL(90 EA per 30 days)
<i>pirfenidone 267 mg cap, 267 mg tab</i>	\$0-\$14.40 (Tier 5)	ESBRIET	PA, QL(270 EA per 30 days)
Respiratory Tract Agents, Other			
ADVAIR HFA 115-21 mcg/act inh aer, 230-21 mcg/act inh aer, 45-21 mcg/act inh aer	\$0-\$14.40 (Tier 3)		QL(24 GM per 30 days)
AIRSUPRA 90-80 mcg/act inh aer	\$0-\$14.40 (Tier 3)		QL(32.1 GM per 30 days)
ANORO ELLIPTA 62.5-25 mcg/act inh aer pwdr br act	\$0-\$14.40 (Tier 3)		QL(60 EA per 30 days)
BREO ELLIPTA 100-25 mcg/act inh aer pwdr br act, 200-25 mcg/act inh aer pwdr br act, 50-25 mcg/inh inh aer pwdr br act	\$0-\$14.40 (Tier 3)		QL(60 EA per 30 days)
<i>breyndra 160-4.5 mcg/act inh aer, 80-4.5 mcg/act inh aer</i>	\$0-\$14.40 (Tier 4)	SYMBICORT	QL(10.3 GM per 30 days)
BREZTRI AEROSPHERE 160-18-4.8 mcg/act inh aer	\$0-\$14.40 (Tier 3)		QL(10.7 GM per 30 days)
BREZTRI AEROSPHERE 160-9-4.8 mcg/act inh aer	\$0-\$14.40 (Tier 3)		QL(23.6 GM per 28 days)
<i>budesonide-formoterol fumarate 160-4.5 mcg/act inh aer, 80-4.5 mcg/act inh aer</i>	\$0-\$14.40 (Tier 4)	SYMBICORT	QL(10.3 GM per 30 days)
COMBIVENT RESPIMAT 20-100 mcg/act inh aer soln	\$0-\$14.40 (Tier 3)		QL(8 GM per 30 days)
DULERA 50-5 mcg/act inh aer	\$0-\$14.40 (Tier 4)		PA, QL(13 GM per 30 days)
DULERA 100-5 mcg/act inh aer, 200-5 mcg/act inh aer	\$0-\$14.40 (Tier 4)		PA, QL(17.6 GM per 30 days)
FASENRA 10 mg/0.5ml sc soln pfs	\$0-\$14.40 (Tier 4)		PA, QL(0.5 ML per 28 days)
FASENRA 30 mg/ml sc soln pfs	\$0-\$14.40 (Tier 5)		PA, QL(1 ML per 28 days)
FASENRA PEN 30 mg/ml sc soln auto-inj	\$0-\$14.40 (Tier 5)		PA, QL(1 ML per 28 days)
<i>fluticasone furoate-vilanterol 100-25 mcg/act inh aer pwdr br act, 200-25 mcg/act inh aer pwdr br act</i>	\$0-\$14.40 (Tier 3)		QL(60 EA per 30 days)
<i>fluticasone-salmeterol 100-50 mcg/act inh aer pwdr br act, 250-50 mcg/act inh aer pwdr br act, 500-50 mcg/act inh aer pwdr br act</i>	\$0-\$5.80 (Tier 2)	ADVAIR DISKUS	QL(60 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

LIST OF DRUGS BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>ipratropium-albuterol 0.5-2.5 (3) mg/3ml inh soln</i>	\$0-\$5.80 (Tier 2)	DUONEB	B/D, QL(540 ML per 30 days)
NUCALA 40 mg/0.4ml sc soln pfs	\$0-\$14.40 (Tier 5)		PA, QL(0.4 ML per 28 days)
NUCALA 100 mg sc soln	\$0-\$14.40 (Tier 5)		PA, QL(3 EA per 28 days)
NUCALA 100 mg/ml sc soln auto-inj, 100 mg/ml sc soln pfs	\$0-\$14.40 (Tier 5)		PA, QL(3 ML per 28 days)
STIOLTO RESPIMAT 2.5-2.5 mcg/act inh aer soln	\$0-\$14.40 (Tier 3)		QL(24 GM per 30 days)
TRELEGY ELLIPTA 100-62.5-25 mcg/act inh aer pwdr br act, 200-62.5-25 mcg/act inh aer pwdr br act	\$0-\$14.40 (Tier 3)		QL(60 EA per 30 days)
<i>wixela inhub 100-50 mcg/act inh aer pwdr br act, 250-50 mcg/act inh aer pwdr br act, 500-50 mcg/act inh aer pwdr br act</i>	\$0-\$5.80 (Tier 2)	ADVAIR DISKUS	QL(60 EA per 30 days)
SKELETAL MUSCLE RELAXANTS			
Skeletal Muscle Relaxants			
<i>cyclobenzaprine hcl 10 mg tab, 5 mg tab</i>	\$0-\$14.40 (Tier 3)	FLEXERIL	PA, QL(90 EA per 30 days)
<i>methocarbamol 500 mg tab, 750 mg tab</i>	\$0-\$5.80 (Tier 2)	ROBAXIN	
<i>orphenadrine citrate er 100 mg tab er 12 hr</i>	\$0-\$14.40 (Tier 3)	NORFLEX	
SLEEP DISORDER AGENTS			
Sleep Promoting Agents			
BELSOMRA 10 mg tab, 15 mg tab, 20 mg tab, 5 mg tab	\$0-\$14.40 (Tier 3)		QL(30 EA per 30 days)
<i>eszopiclone 1 mg tab, 2 mg tab, 3 mg tab</i>	\$0-\$14.40 (Tier 4)	LUNESTA	QL(30 EA per 30 days)
<i>ramelteon 8 mg tab</i>	\$0-\$14.40 (Tier 4)	ROZEREM	QL(30 EA per 30 days)
<i>temazepam 15 mg cap, 30 mg cap</i>	\$0-\$14.40 (Tier 3)	RESTORIL	QL(30 EA per 30 days)
<i>zaleplon 5 mg cap</i>	\$0-\$14.40 (Tier 4)	SONATA	QL(30 EA per 30 days)
<i>zaleplon 10 mg cap</i>	\$0-\$14.40 (Tier 4)	SONATA	QL(60 EA per 30 days)
<i>zolpidem tartrate 10 mg tab, 5 mg tab</i>	\$0-\$5.80 (Tier 2)	AMBIEN	QL(30 EA per 30 days)
<i>zolpidem tartrate er 12.5 mg tab er, 6.25 mg tab er</i>	\$0-\$14.40 (Tier 4)	AMBIEN CR	QL(30 EA per 30 days)
Wakefulness Promoting Agents			
<i>armodafinil 150 mg tab, 200 mg tab, 250 mg tab</i>	\$0-\$14.40 (Tier 4)	NUVIGIL	PA, QL(30 EA per 30 days)
<i>armodafinil 50 mg tab</i>	\$0-\$14.40 (Tier 4)	NUVIGIL	PA, QL(60 EA per 30 days)
<i>modafinil 100 mg tab, 200 mg tab</i>	\$0-\$14.40 (Tier 3)	PROVIGIL	PA, QL(30 EA per 30 days)
<i>sodium oxybate 500 mg/ml soln</i>	\$0-\$14.40 (Tier 5)		PA, QL(540 ML per 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page 15.

D. Over-the-Counter (OTC) Drugs Grouped by Drug Type

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
ALTERNATIVE MEDICINES			
Alternative Medicines			
<i>charcoal 200 mg cap</i>	\$0 (OTC)		
<i>ciditrine 500 mg tab</i>	\$0 (OTC)		
<i>cvs glucosamine sulfate 1000 mg cap</i>	\$0 (OTC)		
<i>dona 750 mg tab</i>	\$0 (OTC)		
<i>DONA 375 mg tab</i>	\$0 (OTC)		
<i>genicin 500 mg cap</i>	\$0 (OTC)		
<i>glucosamine sulfate 1000 mg cap, 500 mg cap, 500 mg tab, 750 mg cap, 750 mg tab</i>	\$0 (OTC)		
<i>hyprost cap</i>	\$0 (OTC)		
<i>ra glucosamine sulfate 500 mg tab</i>	\$0 (OTC)		
<i>synovacin 500 mg cap</i>	\$0 (OTC)		
ANALGESICS - ANTI-INFLAMMATORY			
Nonsteroidal Anti-inflammatory Agents (nsaids)			
<i>addaprin 200 mg tab</i>	\$0 (OTC)		
<i>all day pain relief 220 mg tab</i>	\$0 (OTC)		
<i>all day relief 220 mg tab</i>	\$0 (OTC)		
<i>bayer migraine 250-250-65 mg tab</i>	\$0 (OTC)		
<i>childrens ibuprofen 100 mg/5ml susp, 200 mg/10ml susp</i>	\$0 (OTC)		
<i>childrens ibuprofen 100 100 mg/5ml susp</i>	\$0 (OTC)		
<i>childs ibuprofen 100 mg/5ml susp</i>	\$0 (OTC)		
<i>cvs all day pain relief 220 mg tab</i>	\$0 (OTC)		
<i>cvs childrens ibuprofen 100 mg/5ml susp</i>	\$0 (OTC)		
<i>cvs headache relief 250-250-65 mg tab</i>	\$0 (OTC)		
<i>cvs headache relief added st 250-250-65 mg tab</i>	\$0 (OTC)		
<i>cvs ibuprofen 200 mg tab</i>	\$0 (OTC)		
<i>cvs ibuprofen childrens 100 mg/5ml susp</i>	\$0 (OTC)		
<i>cvs ibuprofen ib 200 mg tab</i>	\$0 (OTC)		
<i>cvs ibuprofen infants 50 mg/1.25ml susp</i>	\$0 (OTC)		
<i>cvs ibuprofen junior strength 100 mg tab chew</i>	\$0 (OTC)		
<i>cvs migraine relief 250-250-65 mg tab</i>	\$0 (OTC)		
<i>cvs naproxen sodium 220 mg tab</i>	\$0 (OTC)		
<i>eq headache relief 250-250-65 mg tab</i>	\$0 (OTC)		
<i>eq ibuprofen 200 mg tab</i>	\$0 (OTC)		
<i>eq ibuprofen childrens 100 mg/5ml susp</i>	\$0 (OTC)		
<i>eq ibuprofen infants 50 mg/1.25ml susp</i>	\$0 (OTC)		
<i>eq ibuprofen junior 100 mg tab chew</i>	\$0 (OTC)		
<i>eq naproxen sodium 220 mg tab</i>	\$0 (OTC)		
<i>eql all day pain relief 220 mg tab</i>	\$0 (OTC)		
<i>eql all day relief 220 mg tab</i>	\$0 (OTC)		
<i>eql childrens ibuprofen 100 mg/5ml susp</i>	\$0 (OTC)		
<i>eql headache formula 250-250-65 mg tab</i>	\$0 (OTC)		
<i>eql headache relief ex str 250-250-65 mg tab</i>	\$0 (OTC)		
<i>eql ibuprofen 200 mg tab</i>	\$0 (OTC)		
<i>eql ibuprofen infants 50 mg/1.25ml susp</i>	\$0 (OTC)		
<i>eql ibuprofen junior strength 100 mg tab chew</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>eql migraine formula 250-250-65 mg tab</i>	\$0 (OTC)		
<i>eql naproxen sodium 220 mg tab</i>	\$0 (OTC)		
<i>extraprin 250-250-65 mg tab</i>	\$0 (OTC)		
<i>flanax pain relief 220 mg tab</i>	\$0 (OTC)		
<i>gnp all day pain relief 220 mg tab</i>	\$0 (OTC)		
<i>gnp childrens ibuprofen 100 mg/5ml susp</i>	\$0 (OTC)		
<i>gnp headache relief 250-250-65 mg tab</i>	\$0 (OTC)		
<i>gnp headache relief extra str 250-250-65 mg tab</i>	\$0 (OTC)		
<i>gnp ibuprofen 200 mg tab</i>	\$0 (OTC)		
<i>gnp ibuprofen infants 50 mg/1.25ml susp</i>	\$0 (OTC)		
<i>gnp ibuprofen junior strength 100 mg tab chew</i>	\$0 (OTC)		
<i>gnp migraine relief 250-250-65 mg tab</i>	\$0 (OTC)		
<i>gnp naproxen sodium 220 mg tab</i>	\$0 (OTC)		
<i>goodsense ibuprofen 200 mg tab</i>	\$0 (OTC)		
<i>goodsense ibuprofen childrens 100 mg/5ml susp</i>	\$0 (OTC)		
<i>goodsense ibuprofen infants 50 mg/1.25ml susp</i>	\$0 (OTC)		
<i>goodsense ibuprofen junior st 100 mg tab chew</i>	\$0 (OTC)		
<i>goodsense migraine formula 250-250-65 mg tab</i>	\$0 (OTC)		
<i>goodsense naproxen sodium 220 mg tab</i>	\$0 (OTC)		
<i>headache pain-reliever 250-250-65 mg tab</i>	\$0 (OTC)		
<i>headache relief 250-250-65 mg tab</i>	\$0 (OTC)		
<i>hm ibuprofen 100 mg tab chew, 200 mg tab</i>	\$0 (OTC)		
<i>hm ibuprofen childrens 100 mg/5ml susp</i>	\$0 (OTC)		
<i>hm ibuprofen ib 100 mg tab chew, 200 mg tab</i>	\$0 (OTC)		
<i>hm ibuprofen infants 50 mg/1.25ml susp</i>	\$0 (OTC)		
<i>hm migraine relief 250-250-65 mg tab</i>	\$0 (OTC)		
<i>hm naproxen sodium 220 mg tab</i>	\$0 (OTC)		
<i>i-prin 200 mg tab</i>	\$0 (OTC)		
<i>ibu-200 200 mg tab</i>	\$0 (OTC)		
<i>ibu-drops 40 mg/ml susp, 50 mg/1.25ml susp</i>	\$0 (OTC)		
<i>ibuprofen 200 mg tab</i>	\$0 (OTC)		
<i>ibuprofen 100 mg/5ml susp</i>	\$0 (OTC)		
<i>ibuprofen childrens 100 mg/5ml susp, 200 mg/10ml susp</i>	\$0 (OTC)		
<i>ibuprofen infants 50 mg/1.25ml susp</i>	\$0 (OTC)		
<i>ibuprofen infants drops 50 mg/1.25ml susp</i>	\$0 (OTC)		
<i>ibuprofen junior strength 100 mg tab chew</i>	\$0 (OTC)		
<i>infants ibuprofen 50 mg/1.25ml susp</i>	\$0 (OTC)		
<i>kls ibuprofen 200 mg tab</i>	\$0 (OTC)		
<i>kls ibuprofen ib 200 mg tab</i>	\$0 (OTC)		
<i>kls naproxen sodium 220 mg tab</i>	\$0 (OTC)		
<i>medi-first ibuprofen 200 mg tab</i>	\$0 (OTC)		
<i>mediproxen 220 mg tab</i>	\$0 (OTC)		
<i>meijer ibuprofen 200 mg tab</i>	\$0 (OTC)		
<i>migraine formula 250-250-65 mg tab</i>	\$0 (OTC)		
<i>migraine relief 250-250-65 mg tab</i>	\$0 (OTC)		
<i>motrin ib 200 mg tab</i>	\$0 (OTC)		
<i>naproxen sodium 220 mg tab</i>	\$0 (OTC)		
<i>pain reliever extra strength 250-250-65 mg tab</i>	\$0 (OTC)		
<i>pain reliever plus 250-250-65 mg tab</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>pain-off 250-250-65 mg tab</i>	\$0 (OTC)		
<i>pamprin max 250-250-65 mg tab</i>	\$0 (OTC)		
<i>provil 200 mg tab</i>	\$0 (OTC)		
<i>px all day relief 220 mg tab</i>	\$0 (OTC)		
<i>px childrens profen ib 100 mg/5ml susp</i>	\$0 (OTC)		
<i>px ibuprofen 200 mg tab</i>	\$0 (OTC)		
<i>px ibuprofen junior strength 100 mg tab chew</i>	\$0 (OTC)		
<i>px infants profen ib 50 mg/1.25ml susp</i>	\$0 (OTC)		
<i>px migraine relief 250-250-65 mg tab</i>	\$0 (OTC)		
<i>qc childrens ibuprofen 100 mg/5ml susp</i>	\$0 (OTC)		
<i>qc headache relief 250-250-65 mg tab</i>	\$0 (OTC)		
<i>qc ibuprofen 200 mg tab</i>	\$0 (OTC)		
<i>qc ibuprofen ib 200 mg tab</i>	\$0 (OTC)		
<i>qc ibuprofen infants 50 mg/1.25ml susp</i>	\$0 (OTC)		
<i>qc naproxen sodium 220 mg tab</i>	\$0 (OTC)		
<i>ra ibuprofen 200 mg tab</i>	\$0 (OTC)		
<i>ra ibuprofen 100 mg/5ml susp</i>	\$0 (OTC)		
<i>ra ibuprofen childrens 100 mg/5ml susp</i>	\$0 (OTC)		
<i>ra ibuprofen infants 50 mg/1.25ml susp</i>	\$0 (OTC)		
<i>ra ibuprofen junior strength 100 mg tab chew</i>	\$0 (OTC)		
<i>ra migraine relief 250-250-65 mg tab</i>	\$0 (OTC)		
<i>ra naproxen sodium 220 mg tab</i>	\$0 (OTC)		
<i>ra pain relief ibuprofen 200 mg tab</i>	\$0 (OTC)		
<i>ra pain reliever ex st 250-250-65 mg tab</i>	\$0 (OTC)		
<i>sb childrens ibuprofen 100 mg/5ml susp</i>	\$0 (OTC)		
<i>sb ibuprofen 200 mg tab</i>	\$0 (OTC)		
<i>sb infants ibuprofen 50 mg/1.25ml susp</i>	\$0 (OTC)		
<i>sb naproxen sodium 220 mg tab</i>	\$0 (OTC)		
<i>sb pain relief x-str 250-250-65 mg tab</i>	\$0 (OTC)		
<i>sm all day pain relief 220 mg tab</i>	\$0 (OTC)		
<i>sm childrens ibuprofen 100 mg/5ml susp</i>	\$0 (OTC)		
<i>sm headache added strength 250-250-65 mg tab</i>	\$0 (OTC)		
<i>sm ibuprofen 200 mg tab</i>	\$0 (OTC)		
<i>sm ibuprofen ib 100 mg tab chew, 200 mg tab</i>	\$0 (OTC)		
<i>sm infants ibuprofen 50 mg/1.25ml susp</i>	\$0 (OTC)		
<i>sm migraine relief 250-250-65 mg tab</i>	\$0 (OTC)		
<i>sm naproxen sodium 220 mg tab</i>	\$0 (OTC)		
<i>tgt childrens ibuprofen 100 mg/5ml susp</i>	\$0 (OTC)		
<i>tgt ibuprofen 200 mg tab</i>	\$0 (OTC)		
<i>tgt ibuprofen childrens 100 mg/5ml susp</i>	\$0 (OTC)		
<i>tgt ibuprofen junior strength 100 mg tab chew</i>	\$0 (OTC)		
<i>tgt migraine relief 250-250-65 mg tab</i>	\$0 (OTC)		
<i>tgt naproxen sodium 220 mg tab</i>	\$0 (OTC)		
<i>tgt pain reliever added st 250-250-65 mg tab</i>	\$0 (OTC)		
<i>wal-profen 200 mg tab</i>	\$0 (OTC)		
ANALGESICS - NONNARCOTIC			
Analgesics Other			
<i>8 hour arthritis pain reliever 650 mg tab er</i>	\$0 (OTC)		
<i>8 hour pain relief 650 mg tab er</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>8 hour pain reliever 650 mg tab er</i>	\$0 (OTC)		
<i>8 hr arthritis pain relief 650 mg tab er</i>	\$0 (OTC)		
<i>8hr muscle aches & pain 650 mg tab er</i>	\$0 (OTC)		
<i>acephen 325 mg rect supp, 650 mg rect supp</i>	\$0 (OTC)		
<i>acetaminophen 120 mg rect supp, 160 mg tab chew, 325 mg tab, 500 mg tab, 650 mg rect supp, 80 mg tab chew</i>	\$0 (OTC)		
<i>acetaminophen 160 mg/5ml liq, 160 mg/5ml soln, 160 mg/5ml susp, 325 mg/10.15ml soln, 325 mg/10.15ml susp, 650 mg/20.3ml soln, 650 mg/20.3ml susp</i>	\$0 (OTC)		
<i>acetaminophen 8 hour 650 mg tab er</i>	\$0 (OTC)		
<i>acetaminophen childrens 160 mg tab chew</i>	\$0 (OTC)		
<i>acetaminophen childrens 160 mg/5ml soln, 160 mg/5ml susp</i>	\$0 (OTC)		
<i>acetaminophen er 650 mg tab er</i>	\$0 (OTC)		
<i>acetaminophen extra strength 500 mg cap, 500 mg tab</i>	\$0 (OTC)		
<i>acetaminophen extra strength 500 mg/15ml liq</i>	\$0 (OTC)		
<i>acetaminophen infants 160 mg/5ml susp</i>	\$0 (OTC)		
<i>acetaminophen junior strength 160 mg tab disint</i>	\$0 (OTC)		
<i>apap 160 mg/5ml oral elix</i>	\$0 (OTC)		
<i>apap extra strength 500 mg tab</i>	\$0 (OTC)		
<i>arthritis pain 650 mg tab er</i>	\$0 (OTC)		
<i>arthritis pain relief 650 mg tab er</i>	\$0 (OTC)		
<i>arthritis pain reliever 650 mg tab er</i>	\$0 (OTC)		
<i>aurophen childrens 160 mg/5ml susp</i>	\$0 (OTC)		
<i>betatemp childrens 160 mg/5ml susp</i>	\$0 (OTC)		
<i>childrens acetaminophen 80 mg tab disint</i>	\$0 (OTC)		
<i>childrens acetaminophen 160 mg/5ml susp</i>	\$0 (OTC)		
<i>childrens apap 80 mg tab chew</i>	\$0 (OTC)		
<i>childrens mapap rapid tabs 80 mg tab disint</i>	\$0 (OTC)		
<i>childrens non-aspirin 80 mg tab chew, 80 mg tab disint</i>	\$0 (OTC)		
<i>childrens pain relief 160 mg/5ml susp</i>	\$0 (OTC)		
<i>childrens pain reliever 80 mg tab disint</i>	\$0 (OTC)		
<i>childrens silapap 160 mg/5ml liq</i>	\$0 (OTC)		
<i>childrens tactual 80 mg tab chew</i>	\$0 (OTC)		
<i>cvs 8 hour pain relief 650 mg tab er</i>	\$0 (OTC)		
<i>cvs 8hr arthritis pain relief 650 mg tab er</i>	\$0 (OTC)		
<i>cvs 8hr muscle aches & pain 650 mg tab er</i>	\$0 (OTC)		
<i>cvs acetaminophen 325 mg tab</i>	\$0 (OTC)		
<i>cvs acetaminophen 500 mg/15ml liq</i>	\$0 (OTC)		
<i>cvs acetaminophen ex st 500 mg tab</i>	\$0 (OTC)		
<i>cvs acetaminophen ex st 500 mg/15ml liq</i>	\$0 (OTC)		
<i>cvs arthritis pain relief 650 mg tab er</i>	\$0 (OTC)		
<i>cvs childs non-aspirin 80 mg tab chew</i>	\$0 (OTC)		
<i>cvs fever reducing childrens 120 mg rect supp</i>	\$0 (OTC)		
<i>cvs infants pain relief drops 160 mg/5ml susp</i>	\$0 (OTC)		
<i>cvs menstrual relief 500-60-15 mg tab</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>cvs non-aspirin childrens 80 mg tab chew</i>	\$0 (OTC)		
<i>cvs non-aspirin extra strength 500 mg tab</i>	\$0 (OTC)		
<i>cvs non-aspirin jr 160 mg tab chew</i>	\$0 (OTC)		
<i>cvs pain & fever childrens 160 mg/5ml susp</i>	\$0 (OTC)		
<i>cvs pain & fever infants 160 mg/5ml susp</i>	\$0 (OTC)		
<i>cvs pain relief 500 mg tab, 650 mg tab er</i>	\$0 (OTC)		
<i>cvs pain relief adult 500 mg/15ml liq</i>	\$0 (OTC)		
<i>cvs pain relief childrens 160 mg tab chew</i>	\$0 (OTC)		
<i>cvs pain relief childrens 160 mg/5ml susp</i>	\$0 (OTC)		
<i>cvs pain relief extra strength 500 mg tab</i>	\$0 (OTC)		
<i>cvs pain relief regular st 325 mg tab</i>	\$0 (OTC)		
<i>ed-apap 160 mg/5ml liq</i>	\$0 (OTC)		
<i>eq 8hr arthritis pain relief 650 mg tab er</i>	\$0 (OTC)		
<i>eq acetaminophen 325 mg tab, 500 mg tab</i>	\$0 (OTC)		
<i>eq acetaminophen childrens 80 mg tab disint</i>	\$0 (OTC)		
<i>eq acetaminophen childrens 160 mg/5ml susp</i>	\$0 (OTC)		
<i>eq acetaminophen junior 160 mg tab disint</i>	\$0 (OTC)		
<i>eq arthritis pain 650 mg tab er</i>	\$0 (OTC)		
<i>eq childrens pain reliever 160 mg/5ml susp</i>	\$0 (OTC)		
<i>eq pain & fever childrens 160 mg tab chew</i>	\$0 (OTC)		
<i>eq pain & fever childrens 160 mg/5ml susp</i>	\$0 (OTC)		
<i>eq pain & fever infants 160 mg/5ml susp</i>	\$0 (OTC)		
<i>eq pain relief/rapid burst 500 mg/15ml liq</i>	\$0 (OTC)		
<i>eq pain reliever 325 mg tab, 500 mg tab</i>	\$0 (OTC)		
<i>eq pain reliever ex st 500 mg tab</i>	\$0 (OTC)		
<i>eql acetaminophen 160 mg tab disint, 325 mg tab</i>	\$0 (OTC)		
<i>eql acetaminophen 8 hour 650 mg tab er</i>	\$0 (OTC)		
<i>eql acetaminophen childrens 160 mg/5ml susp</i>	\$0 (OTC)		
<i>eql acetaminophen ex st 500 mg tab</i>	\$0 (OTC)		
<i>eql acetaminophen infants 160 mg/5ml susp</i>	\$0 (OTC)		
<i>eql acetaminophen rapid tabs 160 mg tab disint</i>	\$0 (OTC)		
<i>eql arthritis pain relief 650 mg tab er</i>	\$0 (OTC)		
<i>eql childrens pain relief 160 mg/5ml susp</i>	\$0 (OTC)		
<i>eql childrens pain reliever 160 mg/5ml susp</i>	\$0 (OTC)		
<i>eql infant pain relief 80 mg/0.8ml susp</i>	\$0 (OTC)		
<i>eql menstrual relief max st 500-60-15 mg tab</i>	\$0 (OTC)		
<i>eql pain & fever childrens 160 mg/5ml susp</i>	\$0 (OTC)		
<i>eql pain & fever infants 160 mg/5ml susp</i>	\$0 (OTC)		
<i>eql pain relief 325 mg tab</i>	\$0 (OTC)		
<i>eql pain relief extra strength 500 mg tab</i>	\$0 (OTC)		
<i>extra strength pain relief 500 mg tab</i>	\$0 (OTC)		
<i>fever reducer childrens 120 mg rect supp</i>	\$0 (OTC)		
<i>FEVERALL INFANTS 80 mg rect supp</i>	\$0 (OTC)		
<i>gnp 8 hour arthritis relief 650 mg tab er</i>	\$0 (OTC)		
<i>gnp 8 hour pain reliever 650 mg tab er</i>	\$0 (OTC)		
<i>gnp acetaminophen 325 mg tab</i>	\$0 (OTC)		
<i>gnp arthritis pain relief 650 mg tab er</i>	\$0 (OTC)		
<i>gnp children's pain & fever 160 mg/5ml susp</i>	\$0 (OTC)		
<i>gnp childrens easy-melts 80 mg tab disint</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>gnp childrens pain relief 160 mg/5ml susp</i>	\$0 (OTC)		
<i>gnp infants pain relief 160 mg/5ml susp</i>	\$0 (OTC)		
<i>gnp infants pain/fever 160 mg/5ml susp</i>	\$0 (OTC)		
<i>gnp pain & fever childrens 160 mg/5ml susp</i>	\$0 (OTC)		
<i>gnp pain & fever infants 160 mg/5ml susp</i>	\$0 (OTC)		
<i>gnp pain relief 325 mg tab</i>	\$0 (OTC)		
<i>gnp pain relief extra strength 500 mg tab</i>	\$0 (OTC)		
<i>gnp pain reliever ex st 500 mg tab</i>	\$0 (OTC)		
<i>goodsense arthritis pain 650 mg tab er</i>	\$0 (OTC)		
<i>goodsense pain & fever child 160 mg/5ml susp</i>	\$0 (OTC)		
<i>goodsense pain & fever infants 160 mg/5ml susp</i>	\$0 (OTC)		
<i>goodsense pain relief 325 mg tab, 650 mg tab er</i>	\$0 (OTC)		
<i>goodsense pain relief extra st 500 mg tab</i>	\$0 (OTC)		
<i>healthy mama shake that ache 500 mg tab</i>	\$0 (OTC)		
<i>hm acetaminophen childrens 160 mg tab chew</i>	\$0 (OTC)		
<i>hm arthritis pain relief 650 mg tab er</i>	\$0 (OTC)		
<i>hm pain & fever childrens 160 mg/5ml susp</i>	\$0 (OTC)		
<i>hm pain & fever infants 160 mg/5ml susp</i>	\$0 (OTC)		
<i>hm pain relief extra strength 500 mg tab</i>	\$0 (OTC)		
<i>hm pain reliever 325 mg tab</i>	\$0 (OTC)		
<i>infants pain & fever 160 mg/5ml susp</i>	\$0 (OTC)		
<i>infants pain relief 160 mg/5ml susp, 80 mg/0.8ml susp</i>	\$0 (OTC)		
<i>junior mapap 160 mg tab disint</i>	\$0 (OTC)		
<i>kls acetaminophen ex st 500 mg tab</i>	\$0 (OTC)		
<i>kls arthritis pain 650 mg tab er</i>	\$0 (OTC)		
<i>kls non aspirin 500 mg tab</i>	\$0 (OTC)		
<i>kls pain relief childrens 160 mg/5ml susp</i>	\$0 (OTC)		
<i>kls rapid release pain 500 mg tab</i>	\$0 (OTC)		
<i>liquid acetaminophen 160 mg/5ml liq</i>	\$0 (OTC)		
<i>liquid pain relief 160 mg/5ml liq</i>	\$0 (OTC)		
<i>little remedies for fever 160 mg/5ml liq</i>	\$0 (OTC)		
<i>m-pap 160 mg/5ml liq</i>	\$0 (OTC)		
<i>mapap 325 mg tab, 500 mg cap, 500 mg tab, 80 mg tab chew</i>	\$0 (OTC)		
<i>mapap 160 mg/5ml liq</i>	\$0 (OTC)		
<i>mapap acetaminophen extra str 500 mg/15ml liq</i>	\$0 (OTC)		
<i>mapap arthritis pain 650 mg tab er</i>	\$0 (OTC)		
<i>mapap childrens 160 mg tab chew, 80 mg tab chew</i>	\$0 (OTC)		
<i>mapap childrens 160 mg/5ml susp</i>	\$0 (OTC)		
<i>mapap extra strength 500 mg tab</i>	\$0 (OTC)		
<i>masophen 500 mg tab</i>	\$0 (OTC)		
<i>menstrual complete 500-60-15 mg tab</i>	\$0 (OTC)		
<i>menstrual relief max strength 500-60-15 mg tab</i>	\$0 (OTC)		
<i>non-aspirin 325 mg tab, 500 mg tab</i>	\$0 (OTC)		
<i>non-aspirin 160 mg/5ml oral elix</i>	\$0 (OTC)		
<i>non-aspirin 8 hour 650 mg tab er</i>	\$0 (OTC)		
<i>non-aspirin childrens 100 mg/ml soln, 160</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>mg/5ml liq, 160 mg/5ml susp</i>			
<i>non-aspirin extra strength 500 mg cap, 500 mg tab</i>	\$0 (OTC)		
<i>non-aspirin extra strength 160 mg/5ml soln</i>	\$0 (OTC)		
<i>non-aspirin infant 80 mg/0.8ml susp</i>	\$0 (OTC)		
<i>non-aspirin pain relief 325 mg tab</i>	\$0 (OTC)		
<i>non-aspirin pain relief child 160 mg/5ml susp</i>	\$0 (OTC)		
<i>non-aspirin pain reliever 325 mg tab</i>	\$0 (OTC)		
<i>nortemp 160 mg/5ml susp</i>	\$0 (OTC)		
<i>nortemp infants 80 mg/0.8ml susp</i>	\$0 (OTC)		
<i>pain & fever childrens 160 mg tab chew, 80 mg tab chew</i>	\$0 (OTC)		
<i>pain & fever childrens 160 mg/5ml soln, 160 mg/5ml susp</i>	\$0 (OTC)		
<i>pain & fever extra strength 500 mg tab</i>	\$0 (OTC)		
<i>pain & fever infants 160 mg/5ml susp</i>	\$0 (OTC)		
<i>pain & fever junior 160 mg tab disint</i>	\$0 (OTC)		
<i>pain relief 325 mg tab, 500 mg tab</i>	\$0 (OTC)		
<i>pain relief 500 mg/15ml liq</i>	\$0 (OTC)		
<i>pain relief 8 hour 650 mg tab er</i>	\$0 (OTC)		
<i>pain relief childrens 160 mg/5ml susp</i>	\$0 (OTC)		
<i>pain relief extra strength 500 mg tab</i>	\$0 (OTC)		
<i>pain relief regular strength 325 mg tab</i>	\$0 (OTC)		
<i>pain reliever 325 mg tab, 500 mg tab</i>	\$0 (OTC)		
<i>pain reliever 500 mg/15ml liq</i>	\$0 (OTC)		
<i>pain reliever extra strength 500 mg tab</i>	\$0 (OTC)		
<i>pain reliever/fever reducer 120 mg rect supp</i>	\$0 (OTC)		
<i>pediacare children 160 mg/5ml susp</i>	\$0 (OTC)		
<i>pharbetol 325 mg tab</i>	\$0 (OTC)		
<i>pharbetol extra strength 500 mg tab</i>	\$0 (OTC)		
<i>px arthritis pain relief 650 mg tab er</i>	\$0 (OTC)		
<i>px childrens pain relief 160 mg/5ml susp</i>	\$0 (OTC)		
<i>px pain relief extra strength 500 mg tab</i>	\$0 (OTC)		
<i>q-pap 325 mg tab</i>	\$0 (OTC)		
<i>q-pap 160 mg/5ml liq</i>	\$0 (OTC)		
<i>q-pap childrens 160 mg/5ml susp</i>	\$0 (OTC)		
<i>q-pap extra strength 500 mg tab</i>	\$0 (OTC)		
<i>q-pap infants 80 mg/0.8ml soln</i>	\$0 (OTC)		
<i>qc acetaminophen 8 hours 650 mg tab er</i>	\$0 (OTC)		
<i>qc arthritis pain relief 650 mg tab er</i>	\$0 (OTC)		
<i>qc non-aspirin 8 hour 650 mg tab er</i>	\$0 (OTC)		
<i>qc non-aspirin childrens 160 mg/5ml susp</i>	\$0 (OTC)		
<i>qc non-aspirin extra strength 500 mg tab</i>	\$0 (OTC)		
<i>qc non-aspirin jr strength 160 mg tab disint</i>	\$0 (OTC)		
<i>qc pain relief 325 mg tab</i>	\$0 (OTC)		
<i>qc pain relief childrens 160 mg/5ml susp</i>	\$0 (OTC)		
<i>qc pain relief extra strength 500 mg tab</i>	\$0 (OTC)		
<i>qc pain relief infants 160 mg/5ml susp</i>	\$0 (OTC)		
<i>ra 8 hour pain relief 650 mg tab er</i>	\$0 (OTC)		
<i>ra acetaminophen 325 mg tab, 650 mg tab er</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>ra acetaminophen childrens 160 mg tab chew</i>	\$0 (OTC)		
<i>ra acetaminophen ex st 500 mg tab</i>	\$0 (OTC)		
<i>ra acetaminophen rapid melts 160 mg tab disint, 80 mg tab disint</i>	\$0 (OTC)		
<i>ra arthritis pain relief 650 mg tab er</i>	\$0 (OTC)		
<i>ra childrens fever/pain 160 mg/5ml susp</i>	\$0 (OTC)		
<i>ra fever reducer/pain reliever 160 mg/5ml susp</i>	\$0 (OTC)		
<i>ra menstrual complete 500-60-15 mg tab</i>	\$0 (OTC)		
<i>ra menstrual relief 500-60-15 mg tab</i>	\$0 (OTC)		
<i>ra pain relief acetaminophen 325 mg tab, 500 mg tab</i>	\$0 (OTC)		
<i>rapid burst adult 1000 mg/30ml liq</i>	\$0 (OTC)		
<i>sb non-aspirin 325 mg tab, 80 mg tab chew</i>	\$0 (OTC)		
<i>sb non-aspirin extra strength 500 mg tab</i>	\$0 (OTC)		
<i>sb pain reliever childrens 160 mg/5ml susp</i>	\$0 (OTC)		
<i>sb pain reliever ex st 500 mg tab</i>	\$0 (OTC)		
<i>sm 8 hour pain relief 650 mg tab er</i>	\$0 (OTC)		
<i>sm arthritis pain relief 650 mg tab er</i>	\$0 (OTC)		
<i>sm arthritis pain reliever 650 mg tab er</i>	\$0 (OTC)		
<i>sm pain & fever childrens 160 mg/5ml susp</i>	\$0 (OTC)		
<i>sm pain & fever infants 160 mg/5ml susp</i>	\$0 (OTC)		
<i>sm pain relief 500 mg tab</i>	\$0 (OTC)		
<i>sm pain relief extra strength 500 mg tab</i>	\$0 (OTC)		
<i>sm pain reliever 325 mg tab</i>	\$0 (OTC)		
<i>sm pain reliever childrens 160 mg/5ml susp</i>	\$0 (OTC)		
<i>sm pain reliever ex st 500 mg tab, 650 mg tab er</i>	\$0 (OTC)		
<i>sm pain reliever jr st 160 mg tab chew</i>	\$0 (OTC)		
<i>tactinal 325 mg tab</i>	\$0 (OTC)		
<i>tactinal extra strength 500 mg tab</i>	\$0 (OTC)		
<i>tgt acetaminophen childrens 160 mg/5ml susp</i>	\$0 (OTC)		
<i>tgt acetaminophen ex st 500 mg tab</i>	\$0 (OTC)		
<i>tgt acetaminophen infants 80 mg/0.8ml susp</i>	\$0 (OTC)		
<i>tgt arthritis pain relief 650 mg tab er</i>	\$0 (OTC)		
<i>tgt childrens acetaminophen 160 mg/5ml susp</i>	\$0 (OTC)		
<i>tgt pain/fever acetaminophen 160 mg/5ml susp</i>	\$0 (OTC)		
<i>th arthritis pain relief 650 mg tab er</i>	\$0 (OTC)		
<i>tylenol childrens chewables 160 mg tab chew</i>	\$0 (OTC)		
TYLENOL CHILDRENS CHEWABLES 160 mg tab chew	\$0 (OTC)		
<i>tylophen 325 mg tab, 500 mg cap</i>	\$0 (OTC)		
Salicylates			
<i>adult aspirin regimen 81 mg tab dr</i>	\$0 (OTC)		
<i>aspir-low 81 mg tab dr</i>	\$0 (OTC)		
<i>aspir-trin 325 mg tab dr</i>	\$0 (OTC)		
<i>aspirin 300 mg rect supp, 325 mg tab, 325 mg tab dr, 600 mg rect supp, 81 mg tab, 81 mg tab chew, 81 mg tab dr</i>	\$0 (OTC)		
<i>aspirin 81 81 mg tab chew, 81 mg tab dr</i>	\$0 (OTC)		
<i>aspirin adult 325 mg tab</i>	\$0 (OTC)		
<i>aspirin adult low dose 81 mg tab dr</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>aspirin adult low strength 81 mg tab chew, 81 mg tab dr</i>	\$0 (OTC)		
<i>aspirin childrens 81 mg tab chew</i>	\$0 (OTC)		
<i>aspirin ec 325 mg tab dr, 81 mg tab dr</i>	\$0 (OTC)		
<i>aspirin ec adult low dose 81 mg tab dr</i>	\$0 (OTC)		
<i>aspirin ec adult low strength 81 mg tab dr</i>	\$0 (OTC)		
<i>aspirin ec low dose 81 mg tab dr</i>	\$0 (OTC)		
<i>aspirin ec low strength 81 mg tab dr</i>	\$0 (OTC)		
<i>aspirin low dose 81 mg tab chew, 81 mg tab dr</i>	\$0 (OTC)		
<i>aspirin low dose adult 81 mg tab chew</i>	\$0 (OTC)		
<i>aspirin low strength 81 mg tab chew</i>	\$0 (OTC)		
<i>aspirin regimen low dose adult 81 mg tab dr</i>	\$0 (OTC)		
<i>bayer aspirin 325 mg tab, 325 mg tab dr</i>	\$0 (OTC)		
<i>bayer aspirin ec low dose 81 mg tab dr</i>	\$0 (OTC)		
<i>bayer aspirin regimen 325 mg tab dr</i>	\$0 (OTC)		
<i>bayer low dose 81 mg tab dr</i>	\$0 (OTC)		
<i>childrens aspirin 81 mg tab chew</i>	\$0 (OTC)		
<i>childrens aspirin low strength 81 mg tab chew</i>	\$0 (OTC)		
<i>cvs aspirin 325 mg tab, 81 mg tab dr</i>	\$0 (OTC)		
<i>cvs aspirin adult low dose 81 mg tab chew</i>	\$0 (OTC)		
<i>cvs aspirin adult low strength 81 mg tab dr</i>	\$0 (OTC)		
<i>cvs aspirin child 81 mg tab chew</i>	\$0 (OTC)		
<i>cvs aspirin ec 325 mg tab dr, 81 mg tab dr</i>	\$0 (OTC)		
<i>cvs aspirin low dose 81 mg tab dr</i>	\$0 (OTC)		
<i>cvs aspirin low strength 81 mg tab chew, 81 mg tab dr</i>	\$0 (OTC)		
<i>cvs buffered aspirin 325 mg tab</i>	\$0 (OTC)		
<i>cvs childrens aspirin 81 mg tab chew</i>	\$0 (OTC)		
<i>ec-81 aspirin 81 mg tab dr</i>	\$0 (OTC)		
<i>ecotrin low strength 81 mg tab dr</i>	\$0 (OTC)		
<i>ecpirin 325 mg tab dr</i>	\$0 (OTC)		
<i>eq aspirin 325 mg tab, 325 mg tab dr</i>	\$0 (OTC)		
<i>eq aspirin adult low dose 81 mg tab dr</i>	\$0 (OTC)		
<i>eq aspirin low dose 81 mg tab chew</i>	\$0 (OTC)		
<i>eql adult aspirin low strength 81 mg tab dr</i>	\$0 (OTC)		
<i>eql aspirin 325 mg tab</i>	\$0 (OTC)		
<i>eql aspirin ec 325 mg tab dr, 81 mg tab dr</i>	\$0 (OTC)		
<i>eql aspirin low dose 81 mg tab chew, 81 mg tab dr</i>	\$0 (OTC)		
<i>eql childrens aspirin 81 mg tab chew</i>	\$0 (OTC)		
<i>gnp adult aspirin low strength 81 mg tab chew</i>	\$0 (OTC)		
<i>gnp aspirin 325 mg tab, 325 mg tab dr, 81 mg tab dr</i>	\$0 (OTC)		
<i>gnp aspirin low dose 81 mg tab dr</i>	\$0 (OTC)		
<i>goodsense aspirin 325 mg tab, 325 mg tab dr, 81 mg tab chew</i>	\$0 (OTC)		
<i>goodsense aspirin adult low st 81 mg tab chew</i>	\$0 (OTC)		
<i>goodsense aspirin low dose 81 mg tab dr</i>	\$0 (OTC)		
<i>hm aspirin 325 mg tab, 81 mg tab chew</i>	\$0 (OTC)		
<i>hm aspirin ec 325 mg tab dr</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>hm aspirin ec low dose 81 mg tab dr</i>	\$0 (OTC)		
<i>kls aspirin ec 325 mg tab dr</i>	\$0 (OTC)		
<i>kls aspirin low dose 81 mg tab dr</i>	\$0 (OTC)		
<i>kp aspirin 81 mg tab dr</i>	\$0 (OTC)		
<i>medi-first aspirin 325 mg tab</i>	\$0 (OTC)		
<i>medique aspirin 325 mg tab</i>	\$0 (OTC)		
<i>px aspirin 325 mg tab, 81 mg tab chew</i>	\$0 (OTC)		
<i>qc aspirin 325 mg tab, 325 mg tab dr</i>	\$0 (OTC)		
<i>qc aspirin low dose 81 mg tab chew, 81 mg tab dr</i>	\$0 (OTC)		
<i>qc enteric aspirin 325 mg tab dr</i>	\$0 (OTC)		
<i>ra aspirin 325 mg tab</i>	\$0 (OTC)		
<i>ra aspirin adult low dose 81 mg tab chew</i>	\$0 (OTC)		
<i>ra aspirin adult low strength 81 mg tab chew</i>	\$0 (OTC)		
<i>ra aspirin childrens 81 mg tab chew</i>	\$0 (OTC)		
<i>ra aspirin ec 325 mg tab dr, 81 mg tab dr</i>	\$0 (OTC)		
<i>ra aspirin ec adult low st 81 mg tab dr</i>	\$0 (OTC)		
<i>ra tri-buffered aspirin 325 mg tab</i>	\$0 (OTC)		
<i>sb aspirin 325 mg tab, 81 mg tab dr</i>	\$0 (OTC)		
<i>sb aspirin adult low strength 81 mg tab dr</i>	\$0 (OTC)		
<i>sb aspirin ec 325 mg tab dr</i>	\$0 (OTC)		
<i>sb childrens aspirin 81 mg tab chew</i>	\$0 (OTC)		
<i>sb low dose asa ec 81 mg tab dr</i>	\$0 (OTC)		
<i>sm aspirin 325 mg tab</i>	\$0 (OTC)		
<i>sm aspirin adult low strength 81 mg tab chew, 81 mg tab dr</i>	\$0 (OTC)		
<i>sm aspirin ec 325 mg tab dr</i>	\$0 (OTC)		
<i>sm aspirin ec low strength 81 mg tab dr</i>	\$0 (OTC)		
<i>sm aspirin low dose 81 mg tab chew, 81 mg tab dr</i>	\$0 (OTC)		
<i>sm aspirin tri-buffered 325 mg tab</i>	\$0 (OTC)		
<i>sm childrens aspirin 81 mg tab chew</i>	\$0 (OTC)		
<i>st joseph low dose 81 mg tab chew, 81 mg tab dr</i>	\$0 (OTC)		
<i>tgt aspirin 325 mg tab, 81 mg tab chew, 81 mg tab dr</i>	\$0 (OTC)		
<i>tgt aspirin ec 325 mg tab dr</i>	\$0 (OTC)		
<i>tgt aspirin low dose 81 mg tab dr</i>	\$0 (OTC)		
<i>tgt childrens aspirin 81 mg tab chew</i>	\$0 (OTC)		
<i>tri-buffered aspirin 325 mg tab</i>	\$0 (OTC)		
ANORECTAL AGENTS			
Rectal Combinations			
<i>cvs hemorrhoidal 0.25-14-74.9 % rect oint</i>	\$0 (OTC)		
<i>eql hemorrhoidal 0.25-14-74.9 % rect oint, 0.25-3-14-71.9 % rect oint</i>	\$0 (OTC)		
<i>eql hemorrhoidal cooling 0.25-50 % Topical Gel</i>	\$0 (OTC)		
<i>hemorrhoidal 0.25-3-85.5 % rect supp</i>	\$0 (OTC)		
<i>hemorrhoidal 0.25-3-14-71.9 % rect oint</i>	\$0 (OTC)		
<i>hemorrhoidal cooling 0.25-50 % rect gel, 0.25-50 % Topical Gel</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>px hemorrhoidal 0.25-3-85.5 % rect supp</i>	\$0 (OTC)		
<i>px hemorrhoidal 0.25-3-14-71.9 % rect oint</i>	\$0 (OTC)		
<i>ra hemorrhoidal 0.25-3-85.5 % rect supp</i>	\$0 (OTC)		
<i>ra hemorrhoidal 0.25-3-14-71.9 % rect oint</i>	\$0 (OTC)		
<i>ra hemorrhoidal cooling 0.25-50 % Topical Gel</i>	\$0 (OTC)		
<i>sm hemorrhoidal 0.25-3-14-71.9 % rect oint</i>	\$0 (OTC)		
<i>sm hemorrhoidal cooling 0.25-50 % Topical Gel</i>	\$0 (OTC)		
Rectal Products - Misc.			
<i>dibucaine (perianal) 1 % Topical Ointment</i>	\$0 (OTC)		
PREPARATION H 1 % Topical Cream	\$0 (OTC)		
PREPARATION H SOOTHING RELIEF 1 % Topical Cream	\$0 (OTC)		
ANTI-ADDICTION/SUBSTANCE ABUSE TREATMENT AGENTS			
Smoking Cessation Agents			
<i>cvs nicotine 14 mg/24hr td patch 24hr, 2 mg m/t gum, 2 mg m/t lozg, 21 mg/24hr td patch 24hr, 4 mg m/t gum, 7 mg/24hr td patch 24hr</i>	\$0 (OTC)		
<i>cvs nicotine polacrilex 2 mg m/t gum, 2 mg m/t lozg, 4 mg m/t gum, 4 mg m/t lozg</i>	\$0 (OTC)		
<i>cvs nts step 1 21 mg/24hr td patch 24hr</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>eq nicotine 14 mg/24hr td patch 24hr, 21 mg/24hr td patch 24hr, 4 mg m/t gum, 4 mg m/t lozg</i>	\$0 (OTC)		
<i>eq nicotine polacrilex 2 mg m/t gum, 2 mg m/t lozg, 4 mg m/t gum, 4 mg m/t lozg</i>	\$0 (OTC)		
<i>eq nicotine step 3 7 mg/24hr td patch 24hr</i>	\$0 (OTC)		
<i>eql nicotine 14 mg/24hr td patch 24hr, 2 mg m/t lozg, 21 mg/24hr td patch 24hr, 4 mg m/t lozg, 7 mg/24hr td patch 24hr</i>	\$0 (OTC)		
<i>eql nicotine polacrilex 2 mg m/t gum, 2 mg m/t lozg, 4 mg m/t gum, 4 mg m/t lozg</i>	\$0 (OTC)		
<i>ft nicotine 2 mg m/t gum, 4 mg m/t gum</i>	\$0 (OTC)		
<i>gnp nicotine 14 mg/24hr td patch 24hr, 2 mg m/t gum, 21 mg/24hr td patch 24hr, 4 mg m/t gum, 7 mg/24hr td patch 24hr</i>	\$0 (OTC)		
<i>gnp nicotine mini 2 mg m/t lozg, 4 mg m/t lozg</i>	\$0 (OTC)		
<i>gnp nicotine polacrilex 2 mg m/t gum, 2 mg m/t lozg, 4 mg m/t gum, 4 mg m/t lozg</i>	\$0 (OTC)		
<i>goodsense nicotine 2 mg m/t gum, 2 mg m/t lozg, 4 mg m/t gum, 4 mg m/t lozg</i>	\$0 (OTC)		
<i>habitrol 21 mg/24hr td patch 24hr</i>	\$0 (OTC)		
<i>hm nicotine 14 mg/24hr td patch 24hr, 21 mg/24hr td patch 24hr, 7 mg/24hr td patch 24hr</i>	\$0 (OTC)		
<i>hm nicotine polacrilex 2 mg m/t gum, 2 mg m/t lozg, 4 mg m/t gum, 4 mg m/t lozg</i>	\$0 (OTC)		
<i>kls quit2 2 mg m/t gum, 2 mg m/t lozg</i>	\$0 (OTC)		
<i>kls quit4 4 mg m/t gum, 4 mg m/t lozg</i>	\$0 (OTC)		
<i>nicoderm cq 14 mg/24hr td patch 24hr, 21 mg/24hr td patch 24hr, 7 mg/24hr td patch 24hr</i>	\$0 (OTC)		
NICODERM CQ 14 mg/24hr td patch 24hr, 21	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
mg/24hr td patch 24hr, 7 mg/24hr td patch 24hr			
<i>nicorelief 2 mg m/t gum</i>	\$0 (OTC)		
<i>nicorelief 4 mg m/t gum</i>	\$0 (OTC)		QL(450 EA per 30 days)
<i>nicorette 2 mg m/t gum, 2 mg m/t lozg, 4 mg m/t gum, 4 mg m/t lozg</i>	\$0 (OTC)		
NICORETTE 2 mg m/t gum, 2 mg m/t lozg, 4 mg m/t gum, 4 mg m/t lozg	\$0 (OTC)		
<i>nicorette mini 2 mg m/t lozg, 4 mg m/t lozg</i>	\$0 (OTC)		
NICORETTE MINI 2 mg m/t lozg, 4 mg m/t lozg	\$0 (OTC)		
<i>nicorette starter kit 2 mg m/t gum, 4 mg m/t gum</i>	\$0 (OTC)		
NICORETTE STARTER KIT 2 mg m/t gum, 4 mg m/t gum	\$0 (OTC)		
<i>nicotine 14 mg/24hr td patch 24hr, 21 mg/24hr td patch 24hr, 21-14-7 mg/24hr td kit, 7 mg/24hr td patch 24hr</i>	\$0 (OTC)		
<i>nicotine mini 2 mg m/t lozg, 4 mg m/t lozg</i>	\$0 (OTC)		
<i>nicotine polacrilex 2 mg m/t gum, 2 mg m/t lozg, 4 mg m/t gum, 4 mg m/t lozg</i>	\$0 (OTC)		
<i>nicotine polacrilex mini 2 mg m/t lozg</i>	\$0 (OTC)		
<i>nicotine step 1 21 mg/24hr td patch 24hr</i>	\$0 (OTC)		
<i>nicotine step 2 14 mg/24hr td patch 24hr</i>	\$0 (OTC)		
<i>nicotine step 3 7 mg/24hr td patch 24hr</i>	\$0 (OTC)		
<i>px stop smoking aid 2 mg m/t gum, 2 mg m/t lozg, 4 mg m/t gum, 4 mg m/t lozg</i>	\$0 (OTC)		
<i>qc nicotine transdermal system 14 mg/24hr td patch 24hr, 21 mg/24hr td patch 24hr</i>	\$0 (OTC)		
<i>ra mini nicotine 2 mg m/t lozg, 4 mg m/t lozg</i>	\$0 (OTC)		
<i>ra nicotine 14 mg/24hr td patch 24hr, 2 mg m/t gum, 21 mg/24hr td patch 24hr, 4 mg m/t gum, 7 mg/24hr td patch 24hr</i>	\$0 (OTC)		
<i>ra nicotine gum 2 mg m/t gum, 4 mg m/t gum</i>	\$0 (OTC)		
<i>ra nicotine polacrilex 2 mg m/t gum, 2 mg m/t lozg, 4 mg m/t gum, 4 mg m/t lozg</i>	\$0 (OTC)		
<i>sm nicotine 14 mg/24hr td patch 24hr, 2 mg m/t lozg, 21 mg/24hr td patch 24hr, 4 mg m/t gum, 7 mg/24hr td patch 24hr</i>	\$0 (OTC)		
<i>sm nicotine polacrilex 2 mg m/t gum, 2 mg m/t lozg, 4 mg m/t gum, 4 mg m/t lozg</i>	\$0 (OTC)		
<i>sw nicotine polacrilex 2 mg m/t gum, 2 mg m/t lozg, 4 mg m/t gum, 4 mg m/t lozg</i>	\$0 (OTC)		
<i>tgt nicotine 2 mg m/t gum, 4 mg m/t gum</i>	\$0 (OTC)		
<i>tgt nicotine polacrilex 2 mg m/t gum, 2 mg m/t lozg, 4 mg m/t gum, 4 mg m/t lozg</i>	\$0 (OTC)		
<i>tgt nicotine step one 21 mg/24hr td patch 24hr</i>	\$0 (OTC)		
<i>tgt nicotine step three 7 mg/24hr td patch 24hr</i>	\$0 (OTC)		
<i>tgt nicotine step two 14 mg/24hr td patch 24hr</i>	\$0 (OTC)		
<i>thrive 2 mg m/t gum</i>	\$0 (OTC)		
ANTIDIABETICS			
Antidiabetics, Other			
<i>cvs glucose 40 % Oral Gel</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>cvs glucose 4 gm tab chew, 4-6 gm-mg tab chew</i>	\$0 (OTC)		QL(50 EA per 30 days)
<i>cvs soft glucose 4 gm tab chew</i>	\$0 (OTC)		QL(50 EA per 30 days)
<i>DEX4 4-6 gm-mg tab chew</i>	\$0 (OTC)		QL(50 EA per 30 days)
<i>dex4 glucose 15 gm/38gm Oral Gel</i>	\$0 (OTC)		
<i>DEX4 GLUCOSE 4-6 gm-mg tab chew</i>	\$0 (OTC)		QL(50 EA per 30 days)
<i>DEX4 NATURALS 4-6 gm-mg tab chew</i>	\$0 (OTC)		QL(50 EA per 30 days)
<i>DEX4 POUCH PACK 4-6 gm-mg tab chew</i>	\$0 (OTC)		QL(50 EA per 30 days)
<i>DEX4 QUICK DISSOLVE GLUCOSE 4 gm tab chew</i>	\$0 (OTC)		QL(50 EA per 30 days)
<i>drug mart glucose 4-6 gm-mg tab chew</i>	\$0 (OTC)		QL(50 EA per 30 days)
<i>gluco burst 40 % Oral Gel</i>	\$0 (OTC)		
<i>glucose 40 % Oral Gel</i>	\$0 (OTC)		
<i>glucose 4 gm tab chew, 4-6 gm-mg tab chew</i>	\$0 (OTC)		QL(50 EA per 30 days)
<i>glucose instant energy 4-6 gm-mg tab chew, 6-4 mg-gm tab chew</i>	\$0 (OTC)		QL(50 EA per 30 days)
<i>glutose 15 40 % Oral Gel</i>	\$0 (OTC)		
<i>glutose 45 40 % Oral Gel</i>	\$0 (OTC)		
<i>glutose 5 40 % Oral Gel</i>	\$0 (OTC)		
<i>gnp glucose 4 gm tab chew, 4-6 gm-mg tab chew</i>	\$0 (OTC)		QL(50 EA per 30 days)
<i>gnp quick dissolve glucose 4 gm tab chew</i>	\$0 (OTC)		QL(50 EA per 30 days)
<i>goodsense glucose 4-6 gm-mg tab chew</i>	\$0 (OTC)		QL(50 EA per 30 days)
<i>groger glucose 4-6 gm-mg tab chew</i>	\$0 (OTC)		QL(50 EA per 30 days)
<i>leader glucose 4-6 gm-mg tab chew</i>	\$0 (OTC)		QL(50 EA per 30 days)
<i>leader quick dissolve glucose 4 gm tab chew</i>	\$0 (OTC)		QL(50 EA per 30 days)
<i>longs glucose 4-6 gm-mg tab chew</i>	\$0 (OTC)		QL(50 EA per 30 days)
<i>medicine shoppe glucose 4-6 gm-mg tab chew</i>	\$0 (OTC)		QL(50 EA per 30 days)
<i>meijer glucose 4-6 gm-mg tab chew</i>	\$0 (OTC)		QL(50 EA per 30 days)
<i>ms quick dissolve glucose 4 gm tab chew</i>	\$0 (OTC)		QL(50 EA per 30 days)
<i>preferred plus glucose 4-6 gm-mg tab chew</i>	\$0 (OTC)		QL(50 EA per 30 days)
<i>px glucose 4-6 gm-mg tab chew</i>	\$0 (OTC)		QL(50 EA per 30 days)
<i>ra glucose 4-6 gm-mg tab chew, 6-4 mg-gm tab chew</i>	\$0 (OTC)		QL(50 EA per 30 days)
<i>relion glucose 15 gm/38gm Oral Gel</i>	\$0 (OTC)		
<i>relion glucose 4-6 gm-mg tab chew</i>	\$0 (OTC)		QL(50 EA per 30 days)
<i>RELION GLUCOSE 4-6 gm-mg tab chew</i>	\$0 (OTC)		QL(50 EA per 30 days)
<i>sm glucose 4 gm tab chew, 4-6 gm-mg tab chew</i>	\$0 (OTC)		QL(50 EA per 30 days)
<i>SMART SENSE GLUCOSE 4-6 gm-mg tab chew</i>	\$0 (OTC)		QL(50 EA per 30 days)
<i>tgt glucose 4-6 gm-mg tab chew</i>	\$0 (OTC)		QL(50 EA per 30 days)
<i>trueplus glucose 4 gm tab chew</i>	\$0 (OTC)		QL(50 EA per 30 days)
<i>TRUEPLUS GLUCOSE 4 gm tab chew</i>	\$0 (OTC)		QL(50 EA per 30 days)
<i>TRUEPLUS GLUCOSE ON THE GO 4 gm tab chew</i>	\$0 (OTC)		QL(50 EA per 30 days)
<i>up & up glucose 4-6 gm-mg tab chew</i>	\$0 (OTC)		QL(50 EA per 30 days)
<i>value plus glucose 40 % Oral Gel</i>	\$0 (OTC)		
<i>walgreens glucose 4 gm tab chew, 4-6 gm-mg tab chew</i>	\$0 (OTC)		QL(50 EA per 30 days)
ANTIDIARRHEAL AGENTS			

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
Antidiarrheal Agents - Misc.			
<i>anti-diarrheal 2 mg cap, 2 mg tab</i>	\$0 (OTC)		
<i>bismatrol 262 mg/15ml susp</i>	\$0 (OTC)		
<i>bismatrol maximum strength 525 mg/15ml susp</i>	\$0 (OTC)		
<i>cvs anti-diarrheal 2 mg cap, 2 mg tab</i>	\$0 (OTC)		
<i>cvs anti-diarrheal 262 mg/15ml susp</i>	\$0 (OTC)		
<i>cvs bismuth 262 mg/15ml susp</i>	\$0 (OTC)		
<i>cvs bismuth maximum strength 525 mg/15ml susp</i>	\$0 (OTC)		
<i>cvs stomach relief 525 mg/15ml susp, 525 mg/30ml susp</i>	\$0 (OTC)		
<i>cvs stomach relief max st 525 mg/15ml susp</i>	\$0 (OTC)		
<i>diamode 2 mg tab</i>	\$0 (OTC)		
<i>diarrhea 262 mg/15ml susp</i>	\$0 (OTC)		
<i>diarrhea relief 262 mg/15ml susp</i>	\$0 (OTC)		
<i>eq anti-diarrheal 2 mg cap, 2 mg tab</i>	\$0 (OTC)		
<i>eq stomach relief 262 mg/15ml susp</i>	\$0 (OTC)		
<i>eq stomach relief max st 525 mg/15ml susp</i>	\$0 (OTC)		
<i>eql anti-diarrheal 2 mg tab</i>	\$0 (OTC)		
<i>eql anti-diarrheal 1 mg/5ml liq</i>	\$0 (OTC)		
<i>eql stomach relief 262 mg/15ml susp, 525 mg/30ml susp</i>	\$0 (OTC)		
<i>eql stomach relief max st 525 mg/15ml susp</i>	\$0 (OTC)		
<i>geri-pectate 262 mg/15ml susp</i>	\$0 (OTC)		
<i>gnp anti-diarrheal 2 mg cap, 2 mg tab</i>	\$0 (OTC)		
<i>gnp k-pec 262 mg/15ml susp</i>	\$0 (OTC)		
<i>gnp stomach relief 262 mg/15ml susp</i>	\$0 (OTC)		
<i>gnp stomach relief max st 525 mg/15ml susp</i>	\$0 (OTC)		
<i>hm anti-diarrheal 2 mg tab</i>	\$0 (OTC)		
<i>hm loperamide hcl 2 mg cap</i>	\$0 (OTC)		
<i>hm stomach relief 262 mg/15ml susp, 525 mg/30ml susp</i>	\$0 (OTC)		
<i>hm stomach relief max strength 525 mg/15ml susp</i>	\$0 (OTC)		
<i>imodium a-d 2 mg cap</i>	\$0 (OTC)		
<i>IMODIUM A-D 2 mg cap</i>	\$0 (OTC)		
<i>kao-tin 262 mg/15ml susp</i>	\$0 (OTC)		
<i>kaopectate 262 mg/15ml susp</i>	\$0 (OTC)		
<i>kaopectate extra strength 525 mg/15ml susp</i>	\$0 (OTC)		
<i>kls anti-diarrheal 2 mg tab</i>	\$0 (OTC)		
<i>loperamide hcl 2 mg tab</i>	\$0 (OTC)		
<i>loperamide hcl 1 mg/5ml liq</i>	\$0 (OTC)		
<i>meijer anti-diarrheal 2 mg tab</i>	\$0 (OTC)		
<i>peptic relief 262 mg/15ml susp</i>	\$0 (OTC)		
<i>pink bismuth 262 mg/15ml susp</i>	\$0 (OTC)		
<i>pink bismuth maximum strength 525 mg/15ml susp</i>	\$0 (OTC)		
<i>px stomach relief 262 mg/15ml susp</i>	\$0 (OTC)		
<i>px stomach relief max st 525 mg/15ml susp</i>	\$0 (OTC)		
<i>qc anti-diarrheal 2 mg cap, 2 mg tab</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>qc diarrhea relief 262 mg/15ml susp</i>	\$0 (OTC)		
<i>ra anti-diarrheal 2 mg cap, 2 mg tab</i>	\$0 (OTC)		
<i>ra stomach relief 262 mg/15ml susp</i>	\$0 (OTC)		
<i>ra stomach relief max st 525 mg/15ml susp</i>	\$0 (OTC)		
<i>sb anti-diarrhea 2 mg tab</i>	\$0 (OTC)		
<i>sb bismuth 262 mg/15ml susp</i>	\$0 (OTC)		
<i>sb bismuth maximum strength 525 mg/15ml susp</i>	\$0 (OTC)		
<i>sb peptic relief 262 mg/15ml susp</i>	\$0 (OTC)		
<i>sm anti-diarrheal 2 mg cap, 2 mg tab</i>	\$0 (OTC)		
<i>sm stomach relief 262 mg/15ml susp, 525 mg/30ml susp, 527 mg/30ml susp</i>	\$0 (OTC)		
<i>sm stomach relief max st 525 mg/15ml susp</i>	\$0 (OTC)		
<i>soothe 262 mg/15ml susp</i>	\$0 (OTC)		
<i>stomach relief 262 mg/15ml susp, 525 mg/30ml susp</i>	\$0 (OTC)		
<i>stomach relief max st 525 mg/15ml susp</i>	\$0 (OTC)		
<i>tgt anti-diarrheal 2 mg tab</i>	\$0 (OTC)		
<i>th anti-diarrheal 2 mg tab</i>	\$0 (OTC)		
ANTIDOTES AND SPECIFIC ANTAGONISTS			
Antidotes And Specific Antagonists			
<i>sm ipecac syrup syr</i>	\$0 (OTC)		
ANTIEMETICS			
Antiemetics			
<i>cvs motion sickness ii 25 mg tab</i>	\$0 (OTC)		
<i>cvs motion sickness relief 25 mg tab chew</i>	\$0 (OTC)		
<i>dramamine less drowsy 25 mg tab</i>	\$0 (OTC)		
<i>eq motion sickness relief 25 mg tab</i>	\$0 (OTC)		
<i>eql motion sickness relief 25 mg tab</i>	\$0 (OTC)		
<i>gnp motion sickness relief 25 mg tab</i>	\$0 (OTC)		
<i>hm motion relief 25 mg tab</i>	\$0 (OTC)		
<i>hm motion sickness relief 25 mg tab</i>	\$0 (OTC)		
<i>meclizine hcl 12.5 mg tab, 25 mg tab, 25 mg tab chew</i>	\$0 (OTC)		
<i>medi-meclizine 25 mg tab</i>	\$0 (OTC)		
<i>motion sickness relief 25 mg tab chew</i>	\$0 (OTC)		
<i>motion sickness relief ii 25 mg tab</i>	\$0 (OTC)		
<i>motion-time 25 mg tab chew</i>	\$0 (OTC)		
<i>ra motion sickness relief 25 mg tab chew</i>	\$0 (OTC)		
<i>sm motion sickness 25 mg tab</i>	\$0 (OTC)		
<i>th motion relief 25 mg tab</i>	\$0 (OTC)		
<i>travel-ease 25 mg tab</i>	\$0 (OTC)		
<i>wal-dram ii 25 mg tab</i>	\$0 (OTC)		
ANTISEPTICS & DISINFECTANTS			
Antiseptics			
<i>antiseptic 10 % Topical Solution</i>	\$0 (OTC)		
<i>antiseptic skin cleanser 4 % Topical Solution</i>	\$0 (OTC)		
<i>apicare povidone-iodine 10 % Topical Solution</i>	\$0 (OTC)		
<i>betasept surgical scrub 4 % Topical Liquid, 4 % Topical Solution</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>chlorhexidine gluconate 4 % Topical Solution</i>	\$0 (OTC)		
<i>cvs antiseptic skin cleanser 4 % Topical Solution</i>	\$0 (OTC)		
<i>cvs povidone-iodine 10 % Topical Solution</i>	\$0 (OTC)		
<i>dyna-hex 4 4 % Topical Solution</i>	\$0 (OTC)		
<i>eq first aid antiseptic 10 % Topical Solution</i>	\$0 (OTC)		
<i>eq povidone-iodine 10 % Topical Solution</i>	\$0 (OTC)		
<i>gnp antiseptic skin cleanser 4 % Topical Solution</i>	\$0 (OTC)		
<i>grx dyne 10 % Topical Solution</i>	\$0 (OTC)		
<i>hm antiseptic skin cleanser 4 % Topical Solution</i>	\$0 (OTC)		
<i>hm povidone-iodine 10 % Topical Solution</i>	\$0 (OTC)		
<i>povidone-iodine 10 % Topical Ointment, 10 % Topical Pad</i>	\$0 (OTC)		
<i>povidone-iodine 10 % Topical Ointment</i>	\$0 (OTC)		
<i>povidone-iodine 10 % Topical Solution</i>	\$0 (OTC)		
<i>povidone-iodine prep 10 % Topical Pad</i>	\$0 (OTC)		
<i>qc povidone iodine 10 % Topical Solution</i>	\$0 (OTC)		
<i>ra antiseptic 10 % Topical Solution</i>	\$0 (OTC)		
<i>sb povidone-iodine 10 % Topical Solution</i>	\$0 (OTC)		
<i>sm povidone-iodine 10 % Topical Solution</i>	\$0 (OTC)		
Antiseptics & Disinfectants			
<i>cvs hydrogen peroxide 3 % Topical Solution</i>	\$0 (OTC)		
<i>eql hydrogen peroxide 3 % Topical Solution</i>	\$0 (OTC)		
<i>gnp hydrogen peroxide 3 % Topical Solution</i>	\$0 (OTC)		
<i>goodsense hydrogen peroxide 3 % Topical Solution</i>	\$0 (OTC)		
<i>hm hydrogen peroxide 3 % Topical Solution</i>	\$0 (OTC)		
<i>hydrogen peroxide 3 % Topical Solution</i>	\$0 (OTC)		
<i>px hydrogen peroxide 3 % Topical Solution</i>	\$0 (OTC)		
<i>qc hydrogen peroxide 3 % Topical Solution</i>	\$0 (OTC)		
<i>ra hydrogen peroxide 3 % Topical Solution</i>	\$0 (OTC)		
<i>sm hydrogen peroxide 3 % Topical Solution</i>	\$0 (OTC)		
Local Anti-infectives, Miscellaneous			
<i>cvs isopropyl alcohol 70 % soln</i>	\$0 (OTC)		
<i>cvs isopropyl rubbing alcohol 70 % soln</i>	\$0 (OTC)		
<i>cvs rubbing alcohol 70 % soln</i>	\$0 (OTC)		
<i>eql isopropyl rubbing alcohol 70 % soln</i>	\$0 (OTC)		
<i>gnp isopropyl alcohol 70 % soln</i>	\$0 (OTC)		
<i>hm isopropyl alcohol 70 % soln</i>	\$0 (OTC)		
<i>isopropyl alcohol 70 % soln</i>	\$0 (OTC)		
<i>isopropyl alcohol 70 % soln</i>	\$0 (OTC)		
<i>isopropyl alcohol (rubbing) 70 % soln</i>	\$0 (OTC)		
<i>isopropyl alcohol, rubbing 70 % soln</i>	\$0 (OTC)		
<i>qc isopropyl rubbing alcohol 70 % soln</i>	\$0 (OTC)		
<i>ra isopropyl rubbing alcohol 70 % soln</i>	\$0 (OTC)		
<i>sm alcohol 70 % soln</i>	\$0 (OTC)		
<i>sm isopropyl alcohol 70 % soln</i>	\$0 (OTC)		
ANXIOLYTICS, SEDATIVES, AND HYPNOTICS			
Anxiolytics, Sedatives, & Hypnotics, Misc			
<i>acetadryl 25-500 mg tab</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>acetaminophen pm 500-25 mg tab</i>	\$0 (OTC)		
<i>acetaminophen pm ex st 25-500 mg tab, 500-25 mg tab</i>	\$0 (OTC)		
<i>compoz 50 mg cap</i>	\$0 (OTC)		
<i>cvs non-aspirin pm 500-25 mg tab</i>	\$0 (OTC)		
<i>cvs pain relief pm ex st 25-500 mg tab</i>	\$0 (OTC)		
<i>cvs sleep aid 25 mg tab</i>	\$0 (OTC)		
<i>cvs sleep aid nighttime 25 mg tab</i>	\$0 (OTC)		
<i>diphenhydramine-apap (sleep) 25-500 mg tab</i>	\$0 (OTC)		
<i>eq acetaminophen pm 25-500 mg tab, 500-25 mg tab</i>	\$0 (OTC)		
<i>eq nighttime sleep aid 25 mg tab</i>	\$0 (OTC)		
<i>eq acetaminophen pm 25-500 mg tab</i>	\$0 (OTC)		
<i>eq headache pm 25-500 mg tab</i>	\$0 (OTC)		
<i>eq nighttime sleep aid 25 mg tab</i>	\$0 (OTC)		
<i>eq pain relief pm 25-500 mg tab</i>	\$0 (OTC)		
<i>eq pain relief pm ex st 25-500 mg tab</i>	\$0 (OTC)		
<i>gnp headache pm 500-25 mg tab</i>	\$0 (OTC)		
<i>gnp nighttime sleep aid 25 mg tab</i>	\$0 (OTC)		
<i>gnp pain relief pm ex st 25-500 mg tab, 500-25 mg tab</i>	\$0 (OTC)		
<i>goodsense headache pm 25-500 mg tab</i>	\$0 (OTC)		
<i>goodsense pain relief pm ex st 25-500 mg tab</i>	\$0 (OTC)		
<i>headache pm 25-500 mg tab</i>	\$0 (OTC)		
<i>headache pm formula 500-25 mg tab</i>	\$0 (OTC)		
<i>headache relief pm 25-500 mg tab</i>	\$0 (OTC)		
<i>healthy mama eazze the pain 500-25 mg tab</i>	\$0 (OTC)		
<i>hm acetaminophen pm ex st 25-500 mg tab</i>	\$0 (OTC)		
<i>hm pain reliever pm ex st 25-500 mg tab</i>	\$0 (OTC)		
<i>mapap pm 500-25 mg tab</i>	\$0 (OTC)		
<i>night time pain medicine ex st 25-500 mg tab</i>	\$0 (OTC)		
<i>night time sleep aid 25 mg tab</i>	\$0 (OTC)		
<i>nighttime sleep aid 25 mg tab</i>	\$0 (OTC)		
<i>non-aspirin pm 25-500 mg tab</i>	\$0 (OTC)		
<i>non-aspirin pm extra strength 25-500 mg tab</i>	\$0 (OTC)		
<i>nyt-time sleep 25 mg tab</i>	\$0 (OTC)		
<i>pain relief pm extra strength 500-25 mg tab</i>	\$0 (OTC)		
<i>pain reliever pm 25-500 mg cap, 500-25 mg tab</i>	\$0 (OTC)		
<i>pain reliever pm ex st 25-500 mg tab, 500-25 mg tab</i>	\$0 (OTC)		
<i>px pain relief pm ex st 25-500 mg tab</i>	\$0 (OTC)		
<i>qc non-aspirin pm 500-25 mg tab</i>	\$0 (OTC)		
<i>qc pain reliever pm ex st 25-500 mg tab</i>	\$0 (OTC)		
<i>ra acetaminophen pm ex st 25-500 mg tab</i>	\$0 (OTC)		
<i>ra nighttime sleep aid 25 mg tab</i>	\$0 (OTC)		
<i>ra sleep aid (diphenhydramine) 25 mg tab</i>	\$0 (OTC)		
<i>rest simply 25 mg tab</i>	\$0 (OTC)		
<i>sb non-aspirin nighttime 500-25 mg tab</i>	\$0 (OTC)		
<i>sb pain reliever pm 500-25 mg tab</i>	\$0 (OTC)		
<i>sb sleep 25 mg tab</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>simply sleep 25 mg tab</i>	\$0 (OTC)		
<i>sleep aid (diphenhydramine) 25 mg tab</i>	\$0 (OTC)		
<i>sleep ii 25 mg tab</i>	\$0 (OTC)		
<i>sleep-tabs 25 mg tab</i>	\$0 (OTC)		
<i>sm nighttime sleep aid 25 mg tab</i>	\$0 (OTC)		
<i>sm pain reliever pm ex st 25-500 mg tab</i>	\$0 (OTC)		
<i>sm sleep aid night time 25 mg tab</i>	\$0 (OTC)		
<i>tgt pain reliever pm ex st 25-500 mg tab</i>	\$0 (OTC)		
<i>th pain reliever pm ex st 25-500 mg tab</i>	\$0 (OTC)		
<i>th sleep aid 25 mg tab</i>	\$0 (OTC)		
<i>tylenol pm extra strength 500-25 mg tab</i>	\$0 (OTC)		
TYLENOL PM EXTRA STRENGTH 500-25 mg tab	\$0 (OTC)		
CONTRACEPTIVES			
Contraceptives			
OPILL 0.075 mg tab	\$0 (OTC)		QL(28 EA per 28 days)
COUGH/COLD/ALLERGY			
Antihistamines			
<i>alavert allergy/sinus 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>aler-cap 25 mg cap</i>	\$0 (OTC)		
<i>alertab 25 mg tab</i>	\$0 (OTC)		
<i>alka-seltzer plus allergy 25 mg tab</i>	\$0 (OTC)		
<i>all day allergy d 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>all day allergy d-12 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>all day allergy-d 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>aller-chlor 4 mg tab</i>	\$0 (OTC)		
<i>allergy 25 mg cap, 25 mg tab, 4 mg tab</i>	\$0 (OTC)		
<i>allergy childrens 12.5 mg/5ml liq</i>	\$0 (OTC)		
<i>allergy rel d12 (cetirizine) 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>allergy relief 25 mg cap, 25 mg tab, 4 mg tab</i>	\$0 (OTC)		
<i>allergy relief childrens 12.5 mg/5ml liq</i>	\$0 (OTC)		
<i>allergy relief d 10-240 mg tab er 24 hr</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>allergy relief d 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>allergy relief d-12 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>allergy relief d-24 10-240 mg tab er 24 hr</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>allergy relief d12 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>allergy relief-d 10-240 mg tab er 24 hr</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>allergy relief-d 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>allergy relief/nasal decongest 10-240 mg tab er 24 hr</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>allergy-time 4 mg tab</i>	\$0 (OTC)		
<i>allergy/congestion relief 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>aurodryl allergy childrens 12.5 mg/5ml liq</i>	\$0 (OTC)		
<i>banophen 25 mg cap, 25 mg tab, 50 mg cap</i>	\$0 (OTC)		
<i>cetirizine-pseudoephedrine er 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>chlorphen 4 mg tab</i>	\$0 (OTC)		
<i>chlorpheniramine maleate 4 mg tab</i>	\$0 (OTC)		
<i>complete allergy medicine 25 mg cap</i>	\$0 (OTC)		
<i>complete allergy relief 25 mg tab</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>cvs allergy relief-d 10-240 mg tab er 24 hr</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>cvs allergy relief-d 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>cvs allergy relief-d12 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>cvs loratadine-d 24 hour 10-240 mg tab er 24 hr</i>	\$0 (OTC)		QL(1 EA per 1 days)
DAYHIST ALLERGY 12 HOUR RELIEF 1.34 mg tab	\$0 (OTC)		
<i>diphen 25 mg tab</i>	\$0 (OTC)		
<i>diphenhydramine hcl 25 mg cap, 25 mg tab, 50 mg cap</i>	\$0 (OTC)		
<i>diphenhydramine hcl 12.5 mg/5ml liq</i>	\$0 (OTC)		
<i>diphenhydramine hcl childrens 12.5 mg/5ml liq</i>	\$0 (OTC)		
<i>eq allergy & congestion relief 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>eq allergy relief d 24 hour 10-240 mg tab er 24 hr</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>eq chlortabs 4 mg tab</i>	\$0 (OTC)		
<i>eql all day allergy-d 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>eql allergy/congestion relief 10-240 mg tab er 24 hr</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>geri-dryl 25 mg tab</i>	\$0 (OTC)		
<i>geri-dryl 12.5 mg/5ml liq</i>	\$0 (OTC)		
<i>gnp all day allergy-d 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>gnp allergy 25 mg cap, 25 mg tab, 4 mg tab</i>	\$0 (OTC)		
<i>gnp allergy & congestion 10-240 mg tab er 24 hr</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>gnp allergy antihistamine 12.5 mg/5ml liq</i>	\$0 (OTC)		
<i>gnp allergy relief 25 mg cap</i>	\$0 (OTC)		
<i>gnp allergy/congestion relief 10-240 mg tab er 24 hr</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>gnp childrens allergy 12.5 mg/5ml liq</i>	\$0 (OTC)		
<i>gnp dayhist allergy 1.34 mg tab</i>	\$0 (OTC)		
<i>gnp loratadine-d 12hr 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>gnp loratadine-d 24 hour 10-240 mg tab er 24 hr</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>goodsense allergy relief 25 mg cap</i>	\$0 (OTC)		
<i>hm allergy & congestion 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>hm allergy complete-d 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>hm allergy relief 25 mg cap, 25 mg tab, 4 mg tab</i>	\$0 (OTC)		
<i>hm allergy relief childrens 12.5 mg/5ml liq</i>	\$0 (OTC)		
<i>hm allergy relief/nasal decong 10-240 mg tab er 24 hr</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>kls aller-tec d 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>kls allerclear d-12hr 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>kls allerclear d-24hr 10-240 mg tab er 24 hr</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>kls allergy medicine 25 mg tab</i>	\$0 (OTC)		
LOHIST-D 2-30 mg/5ml liq	\$0 (OTC)		
<i>loratadine-d 12hr 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>loratadine-d 24hr 10-240 mg tab er 24 hr</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>m-dryl 12.5 mg/5ml liq</i>	\$0 (OTC)		
<i>meijer allergy relief-d 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>meijer allergy/congestion 10-240 mg tab er 24 hr</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>pharbedryl 25 mg cap, 50 mg cap</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>px allergy relief d 10-240 mg tab er 24 hr</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>px allergy relief d 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>px allergy relief d (loratid) 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>qc chlor-pheniramine 4 mg tab</i>	\$0 (OTC)		
<i>qc complete allergy medicine 25 mg tab</i>	\$0 (OTC)		
<i>qc loratadine-d 10-240 mg tab er 24 hr</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>ra allergy/congestion relief 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>ra cetiri-d 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>ra lorata-d 10-240 mg tab er 24 hr</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>sb allergy 25 mg cap</i>	\$0 (OTC)		
<i>sb allergy medicine 25 mg tab</i>	\$0 (OTC)		
<i>sb allergy medicine 12.5 mg/5ml liq</i>	\$0 (OTC)		
<i>sb chlorpheniramine 4 mg tab</i>	\$0 (OTC)		
<i>siladryl allergy 12.5 mg/5ml liq</i>	\$0 (OTC)		
<i>sm all day allergy-d 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>sm allergy 4 hour 4 mg tab</i>	\$0 (OTC)		
<i>sm allergy relief 1.34 mg tab, 25 mg cap, 25 mg tab</i>	\$0 (OTC)		
<i>sm allergy relief 12.5 mg/5ml liq</i>	\$0 (OTC)		
<i>sm allergy relief childrens 12.5 mg/5ml liq</i>	\$0 (OTC)		
<i>sm lorata-dine d 10-240 mg tab er 24 hr</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>sm loratadine d 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>sm loratadine d 12hr 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>sudogest sinus/allergy 4-60 mg tab</i>	\$0 (OTC)		
<i>sw allergy relief-d 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>tgt all day allergy-d 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>tgt allergy relief 25 mg cap, 25 mg tab</i>	\$0 (OTC)		
<i>tgt allergy relief childrens 12.5 mg/5ml liq</i>	\$0 (OTC)		
<i>tgt allergy/congestion relief 10-240 mg tab er 24 hr</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>tgt allergy/congestion relief 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>tgt allergy+ congestion relief 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>th loratadine-d 10-240 mg tab er 24 hr</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>total allergy 25 mg tab</i>	\$0 (OTC)		
<i>wal-itin d 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>wal-itin d 24 hour 10-240 mg tab er 24 hr</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>wal-zyr d 5-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
Antihistamines - Non-sedating			
<i>alavert 10 mg tab disint</i>	\$0 (OTC)		QL(30 EA per 30 days)
<i>all day allergy 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>all day allergy childrens 10 mg tab chew</i>	\$0 (OTC)		
<i>all day allergy childrens 1 mg/ml soln, 5 mg/5ml soln</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>all-day allergy childrens 5 mg/5ml soln</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>allergy 10 mg tab, 10 mg tab disint</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>allergy 24hour indoor/outdoor 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>allergy childrens 5 mg/5ml soln, 5 mg/5ml syr</i>	\$0 (OTC)		QL(300 ML per 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>allergy non-drowsy 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>allergy rel child (cetirizine) 5 mg/5ml soln</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>allergy rel child (loratadine) 5 mg/5ml soln</i>	\$0 (OTC)		QL(300 ML per 30 days)
<i>allergy relief 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>allergy relief 10 mg tab disint</i>	\$0 (OTC)		QL(30 EA per 30 days)
<i>allergy relief (cetirizine) 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>allergy relief 24-hr 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>allergy relief cetirizine 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>allergy relief child 5 mg/5ml soln, 5 mg/5ml syr</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>allergy relief childrens 1 mg/ml soln</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>allergy relief loratadine 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>cetirizine hcl 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>cetirizine hcl 5 mg tab</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>cetirizine hcl 10 mg tab chew</i>	\$0 (OTC)		QL(30 EA per 30 days)
<i>cetirizine hcl 5 mg tab chew</i>	\$0 (OTC)		QL(60 EA per 30 days)
<i>cetirizine hcl allergy child 5 mg/5ml soln</i>	\$0 (OTC)		QL(300 ML per 30 days)
<i>cetirizine hcl childrens 1 mg/ml soln, 5 mg/5ml soln</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>cetirizine hcl childrens 10 mg tab chew</i>	\$0 (OTC)		QL(30 EA per 30 days)
<i>cetirizine hcl childrens 5 mg tab chew</i>	\$0 (OTC)		QL(60 EA per 30 days)
<i>cetirizine hcl childrens 1 mg/ml soln</i>	\$0 (OTC)		QL(300 ML per 30 days)
<i>cetirizine hcl childrens alrgy 1 mg/ml soln</i>	\$0 (OTC)		QL(300 ML per 30 days)
<i>cetirizine hcl hives relief 5 mg/5ml soln</i>	\$0 (OTC)		QL(300 ML per 30 days)
<i>childrens loratadine 5 mg/5ml soln, 5 mg/5ml syr</i>	\$0 (OTC)		QL(300 ML per 30 days)
<i>claritin allergy childrens 5 mg/5ml soln</i>	\$0 (OTC)		QL(300 ML per 30 days)
CLARITIN ALLERGY CHILDRENS 5 mg/5ml soln	\$0 (OTC)		QL(300 ML per 30 days)
<i>claritin reditabs 5 mg tab disint</i>	\$0 (OTC)		
CLARITIN REDITABS 5 mg tab disint	\$0 (OTC)		
<i>cvs allerg rel child (lorat) 5 mg/5ml soln</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>cvs allergy relief 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>cvs allergy relief 10 mg tab disint</i>	\$0 (OTC)		QL(30 EA per 30 days)
<i>cvs allergy relief childrens 5 mg tab chew</i>	\$0 (OTC)		
<i>cvs allergy relief childrens 5 mg/5ml soln, 5 mg/5ml syr</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>cvs indoor/outdoor allergy rlf 10 mg tab chew</i>	\$0 (OTC)		
<i>cvs indoor/outdoor allergy rlf 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>cvs loratadine 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>eq allerg relief child (cetir) 5 mg/5ml soln</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>eq allerg relief child (lorat) 5 mg/5ml soln</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>eq allergy childrens 5 mg/5ml soln, 5 mg/5ml syr</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>eq allergy relief 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>eq allergy relief (cetirizine) 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>eq allergy relief (cetirizine) 1 mg/ml soln</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>eq allergy relief childrens 5 mg/5ml soln, 5 mg/5ml syr</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>eq cetirizine hcl 5 mg/5ml soln</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>eql all day allergy 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>eql all day allergy childrens 5 mg/5ml soln</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>eql allergy relief 10 mg tab, 10 mg tab disint</i>	\$0 (OTC)		QL(1 EA per 1 days)

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>eql childrens loratadine 5 mg/5ml syr</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>gnp all day allergy 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>gnp all day allergy childrens 1 mg/ml soln, 5 mg/5ml soln</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>gnp all day allergy childrens 1 mg/ml soln</i>	\$0 (OTC)		QL(300 ML per 30 days)
<i>gnp allergy relief 10 mg tab disint</i>	\$0 (OTC)		QL(30 EA per 30 days)
<i>gnp loratadine 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>gnp loratadine 5 mg/5ml soln, 5 mg/5ml syr</i>	\$0 (OTC)		QL(300 ML per 30 days)
<i>gnp loratadine childrens 5 mg tab chew</i>	\$0 (OTC)		
<i>gnp loratadine childrens 5 mg/5ml soln, 5 mg/5ml syr</i>	\$0 (OTC)		QL(300 ML per 30 days)
<i>goodsense all day allergy 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>goodsense all day allergy 5 mg/5ml soln</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>hm all day allergy 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>hm all day allergy 5 mg/5ml soln</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>hm all day allergy childrens 5 mg/5ml soln</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>hm allergy complete childrens 5 mg/5ml soln</i>	\$0 (OTC)		QL(300 ML per 30 days)
<i>hm allergy relief 10 mg tab disint</i>	\$0 (OTC)		QL(30 EA per 30 days)
<i>hm allergy relief (loratadine) 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>hm cetirizine hcl 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>hm cetirizine hcl childrens 5 mg/5ml soln</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>hm cetirizine hcl childrens 5 mg/5ml soln</i>	\$0 (OTC)		QL(300 ML per 30 days)
<i>hm loratadine 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>hm loratadine childrens 5 mg/5ml soln, 5 mg/5ml syr</i>	\$0 (OTC)		QL(300 ML per 30 days)
<i>kls aller-tec 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>kls aller-tec childrens 1 mg/ml soln</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>kls allerclear 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>kp cetirizine hcl 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>kp cetirizine hcl 5 mg tab</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>kp loratadine 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>loradamed 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>loratadine 5 mg tab chew</i>	\$0 (OTC)		
<i>loratadine 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>loratadine 5 mg/5ml soln</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>loratadine childrens 5 mg tab chew</i>	\$0 (OTC)		QL(60 EA per 30 days)
<i>loratadine childrens 5 mg/5ml soln, 5 mg/5ml syr</i>	\$0 (OTC)		QL(300 ML per 30 days)
<i>loratadine hives relief 5 mg/5ml soln</i>	\$0 (OTC)		QL(300 ML per 30 days)
<i>meijer allergy relief 10 mg tab disint</i>	\$0 (OTC)		QL(30 EA per 30 days)
<i>meijer loratadine 5 mg/5ml soln</i>	\$0 (OTC)		QL(300 ML per 30 days)
<i>mm cetirizine hcl 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>px allergy relief 10 mg tab disint</i>	\$0 (OTC)		QL(30 EA per 30 days)
<i>px allergy relief cetirizine 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>px allergy relief loratadine 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>px childrens allergy 5 mg/5ml soln</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>qc all day allergy 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>qc allergy relief 10 mg tab disint</i>	\$0 (OTC)		QL(30 EA per 30 days)
<i>qc allergy relief childrens 1 mg/ml syr, 5 mg/5ml soln, 5 mg/5ml syr</i>	\$0 (OTC)		QL(300 ML per 30 days)
<i>qc childrens allergy 5 mg/5ml soln</i>	\$0 (OTC)		QL(10 ML per 1 days)

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>qc loratadine allergy relief 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>qlearquil 24 hour relief 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>ra allergy relief (cetirizine) 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>ra allergy relief (loratadine) 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>ra allergy relief childrens 5 mg/5ml soln, 5 mg/5ml syr</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>ra allergy relief childrens 5 mg tab chew</i>	\$0 (OTC)		QL(60 EA per 30 days)
<i>ra cetirizine 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>ra cetirizine childrens 10 mg tab chew</i>	\$0 (OTC)		
<i>ra cetirizine hcl child allrgy 5 mg/5ml soln</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>ra loratadine 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>ra loratadine 5 mg/5ml soln</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>ra loratadine 10 mg tab disint</i>	\$0 (OTC)		QL(30 EA per 30 days)
<i>ra loratadine childrens 5 mg/5ml syr</i>	\$0 (OTC)		QL(300 ML per 30 days)
<i>sb allergy 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>sb loratadine 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>sm all day allergy 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>sm all day allergy childrens 1 mg/ml soln, 5 mg/5ml soln</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>sm allergy childrens 5 mg/5ml soln</i>	\$0 (OTC)		QL(300 ML per 30 days)
<i>sm allergy relief 10 mg tab disint</i>	\$0 (OTC)		QL(30 EA per 30 days)
<i>sm childrens loratadine 5 mg/5ml soln, 5 mg/5ml syr</i>	\$0 (OTC)		QL(300 ML per 30 days)
<i>sm loratadine 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>sm loratadine 10 mg tab disint</i>	\$0 (OTC)		QL(30 EA per 30 days)
<i>sm loratadine 5 mg/5ml soln, 5 mg/5ml syr</i>	\$0 (OTC)		QL(300 ML per 30 days)
<i>sm loratadine allergy relief 10 mg tab disint</i>	\$0 (OTC)		QL(30 EA per 30 days)
<i>sw allergy relief 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>tgt all day allergy childrens 5 mg/5ml soln</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>tgt all day allergy relief 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>tgt allergy relief 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>tgt allergy relief 10 mg tab disint</i>	\$0 (OTC)		QL(30 EA per 30 days)
<i>tgt loratadine childrens 5 mg/5ml soln</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>th cetirizine hcl 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>th loratadine 10 mg tab, 10 mg tab disint</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>wal-itin 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>wal-itin 5 mg/5ml soln, 5 mg/5ml syr</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>wal-itin 10 mg tab disint</i>	\$0 (OTC)		QL(30 EA per 30 days)
<i>wal-itin aller-melts 10 mg tab disint</i>	\$0 (OTC)		QL(30 EA per 30 days)
<i>wal-itin allergy reditabs 10 mg tab disint</i>	\$0 (OTC)		QL(30 EA per 30 days)
<i>wal-itin childrens 5 mg/5ml soln</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>wal-vert 10 mg tab disint</i>	\$0 (OTC)		QL(30 EA per 30 days)
<i>wal-zyr 10 mg tab</i>	\$0 (OTC)		QL(1 EA per 1 days)
<i>wal-zyr all day allergy child 5 mg/5ml soln</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>wal-zyr childrens 1 mg/ml soln, 5 mg/5ml soln</i>	\$0 (OTC)		QL(10 ML per 1 days)
<i>wal-zyr childrens 10 mg tab chew</i>	\$0 (OTC)		QL(30 EA per 30 days)
Cough/cold/allergy Combinations			
<i>biocotron 10-100 mg/5ml liq</i>	\$0 (OTC)		
<i>cheratussin ac 100-10 mg/5ml syr</i>	\$0 (OTC)		
<i>childrens cold & allergy 1-2.5 mg/5ml oral elix</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>cold & allergy childrens 1-2.5 mg/5ml oral elix</i>	\$0 (OTC)		
<i>cold & cough childrens 2.5-1-5 mg/5ml liq</i>	\$0 (OTC)		
<i>cold/allergy childrens 1-2.5 mg/5ml oral elix</i>	\$0 (OTC)		
<i>cold/cough childrens 2.5-1-5 mg/5ml liq</i>	\$0 (OTC)		
<i>cold/cough dm childrens 2.5-1-5 mg/5ml liq, 2.5-1-5 mg/5ml oral elix</i>	\$0 (OTC)		
<i>cough dm 30 mg/5ml susp er</i>	\$0 (OTC)		
<i>cough dm childrens 30 mg/5ml susp er</i>	\$0 (OTC)		
<i>cough/chest congestion dm 10-100 mg/5ml syr</i>	\$0 (OTC)		
<i>cvs cold & cough childrens 2.5-1-5 mg/5ml liq</i>	\$0 (OTC)		
<i>cvs cold & cough dm childrens 2.5-1-5 mg/5ml oral elix</i>	\$0 (OTC)		
<i>cvs cold/cough dm childrens 2.5-1-5 mg/5ml oral elix</i>	\$0 (OTC)		
<i>cvs cough dm 30 mg/5ml susp er</i>	\$0 (OTC)		
<i>cvs cough dm childrens 30 mg/5ml susp er</i>	\$0 (OTC)		
<i>cvs mucus dm extended release 60-1200 mg tab er 12 hr</i>	\$0 (OTC)		
<i>cvs tussin cough 100-10 mg/5ml liq</i>	\$0 (OTC)		
<i>cvs tussin dm 10-100 mg/5ml liq, 100-10 mg/5ml liq, 20-200 mg/10ml liq, 200-20 mg/10ml liq</i>	\$0 (OTC)		
<i>dextromethorphan polistirex er 30 mg/5ml susp er</i>	\$0 (OTC)		
<i>dextromethorphan-guaifenesin 10-100 mg/5ml liq</i>	\$0 (OTC)		
<i>dextromethorphan-guaifenesin 10-100 mg/5ml liq, 10-100 mg/5ml soln, 10-100 mg/5ml syr, 20-200 mg/10ml liq, 20-200 mg/10ml soln</i>	\$0 (OTC)		
<i>diabetic siltussin-dm 100-10 mg/5ml liq</i>	\$0 (OTC)		
<i>diabetic tussin dm 100-10 mg/5ml liq</i>	\$0 (OTC)		
<i>dimaphen childrens 1-2.5 mg/5ml oral elix</i>	\$0 (OTC)		
<i>dimaphen dm cold/cough 2.5-1-5 mg/5ml liq</i>	\$0 (OTC)		
<i>dimaphen dm cold/cough child 2.5-1-5 mg/5ml oral elix</i>	\$0 (OTC)		
<i>dm-guaifenesin er 60-1200 mg tab er 12 hr</i>	\$0 (OTC)		
<i>endacof-dm 2.5-1-5 mg/5ml liq</i>	\$0 (OTC)		
<i>eq cold/cough dm childrens 2.5-1-5 mg/5ml liq</i>	\$0 (OTC)		
<i>eq cough dm 30 mg/5ml susp er</i>	\$0 (OTC)		
<i>eq mucus relief dm 30-600 mg tab er 12 hr</i>	\$0 (OTC)		
<i>eq tussin dm cough/chest 10-100 mg/5ml syr</i>	\$0 (OTC)		
<i>eql cold/cough 2.5-1-5 mg/5ml liq</i>	\$0 (OTC)		
<i>eql tussin cough/chest congest 10-100 mg/5ml liq</i>	\$0 (OTC)		
<i>eql tussin dm cough/chest cong 100-10 mg/5ml syr</i>	\$0 (OTC)		
<i>extra action cough 10-100 mg/5ml syr, 100-10 mg/5ml syr</i>	\$0 (OTC)		
<i>g tussin ac 100-10 mg/5ml soln</i>	\$0 (OTC)		
<i>g-tron 10-100 mg/5ml liq</i>	\$0 (OTC)		
<i>geri-tussin dm 10-100 mg/5ml syr, 100-10</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>mg/5ml syr</i>			
<i>giltuss cough & chest 20-200 mg/10ml liq</i>	\$0 (OTC)		
<i>giltuss diabetic cough & cold 10-100 mg/5ml liq</i>	\$0 (OTC)		
<i>gnp cold/allergy childrens 1-2.5 mg/5ml oral elix</i>	\$0 (OTC)		
<i>gnp cold/cough childrens 2.5-1-5 mg/5ml liq</i>	\$0 (OTC)		
<i>gnp cough dm er 30 mg/5ml susp er</i>	\$0 (OTC)		
<i>gnp mucus dm max strength 60-1200 mg tab er 12 hr</i>	\$0 (OTC)		
<i>gnp tussin dm 20-200 mg/10ml liq</i>	\$0 (OTC)		
<i>gnp tussin dm cough 100-10 mg/5ml liq</i>	\$0 (OTC)		
<i>goodsense cough dm 30 mg/5ml susp er</i>	\$0 (OTC)		
<i>goodsense cough dm childrens 30 mg/5ml susp er</i>	\$0 (OTC)		
<i>guaiaisorb dm 100-10 mg/5ml liq</i>	\$0 (OTC)		
<i>guaiaitussin ac 100-10 mg/5ml syr</i>	\$0 (OTC)		
<i>guaifenesin ac 100-10 mg/5ml syr</i>	\$0 (OTC)		
<i>guaifenesin-codeine 100-10 mg/5ml soln, 200-20 mg/10ml soln</i>	\$0 (OTC)		
<i>guaifenesin-dm 100-10 mg/5ml syr</i>	\$0 (OTC)		
<i>hm cold & cough childrens 2.5-1-5 mg/5ml liq</i>	\$0 (OTC)		
<i>hm cough dm 30 mg/5ml susp er</i>	\$0 (OTC)		
<i>hm daytime cold & flu 10-5-325 mg/15ml liq</i>	\$0 (OTC)		
<i>hm tussin adult dm 100-10 mg/5ml liq</i>	\$0 (OTC)		
<i>iophen c-nr 100-10 mg/5ml liq</i>	\$0 (OTC)		
<i>iophen dm-nr 100-10 mg/5ml liq</i>	\$0 (OTC)		
<i>meijer cough syrup dm 100-10 mg/5ml syr</i>	\$0 (OTC)		
<i>mucus relief dm 30-600 mg tab er 12 hr, 60-1200 mg tab er 12 hr</i>	\$0 (OTC)		
<i>mucus relief dm max 60-1200 mg tab er 12 hr</i>	\$0 (OTC)		
<i>mucus-dm 30-600 mg tab er 12 hr</i>	\$0 (OTC)		
<i>mucus-dm max 60-1200 mg tab er 12 hr</i>	\$0 (OTC)		
<i>mucus-dm maximum strength 60-1200 mg tab er 12 hr</i>	\$0 (OTC)		
<i>px dibromm dm cold/cough child 2.5-1-5 mg/5ml liq</i>	\$0 (OTC)		
<i>px tussin dm 100-10 mg/5ml liq</i>	\$0 (OTC)		
<i>q-tussin dm 100-10 mg/5ml syr</i>	\$0 (OTC)		
<i>qc tussin dm cough/congestion 10-100 mg/5ml liq</i>	\$0 (OTC)		
<i>ra cold & cough childrens 2.5-1-5 mg/5ml liq</i>	\$0 (OTC)		
<i>ra cough dm 30 mg/5ml susp er</i>	\$0 (OTC)		
<i>ra tussin cgh/chest congest dm 100-10 mg/5ml liq</i>	\$0 (OTC)		
<i>ra tussin cough 10-100 mg/5ml liq</i>	\$0 (OTC)		
<i>ra tussin dm 100-10 mg/5ml liq</i>	\$0 (OTC)		
<i>ri-tussin dm 100-10 mg/5ml syr</i>	\$0 (OTC)		
<i>robafen ac 100-10 mg/5ml soln</i>	\$0 (OTC)		
<i>robafen dm 100-10 mg/5ml syr</i>	\$0 (OTC)		
<i>robafen dm cgh/chest congest 10-100 mg/5ml liq</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>robafen dm cough 10-100 mg/5ml liq</i>	\$0 (OTC)		
<i>robafen dm cough clear 100-10 mg/5ml syr</i>	\$0 (OTC)		
<i>robafen dm peak cold cgh/cong 10-100 mg/5ml liq</i>	\$0 (OTC)		
ROBITUSSIN CHILDRENS COUGH LA 7.5 mg/5ml syr	\$0 (OTC)		
<i>robitussin cold cough+ chest 10-100 mg/5ml liq</i>	\$0 (OTC)		
<i>rynex dm 2.5-1-5 mg/5ml liq</i>	\$0 (OTC)		
<i>rynex pe 1-2.5 mg/5ml oral elix</i>	\$0 (OTC)		
<i>rynex pse 1-15 mg/5ml liq</i>	\$0 (OTC)		
<i>safe tussin 30 30-200 mg/5ml liq</i>	\$0 (OTC)		
<i>safe tussin dm 100-10 mg/5ml liq</i>	\$0 (OTC)		
<i>sb cough control dm 100-10 mg/5ml liq</i>	\$0 (OTC)		
<i>siltussin dm das 100-10 mg/5ml liq</i>	\$0 (OTC)		
<i>siltussin-dm alcohol free 100-10 mg/5ml syr</i>	\$0 (OTC)		
<i>sm cold & allergy childrens 1-2.5 mg/5ml oral elix</i>	\$0 (OTC)		
<i>sm cold & cough dm childrens 2.5-1-5 mg/5ml liq</i>	\$0 (OTC)		
<i>sm tussin cough/chest congest 100-10 mg/5ml syr, 20-200 mg/10ml liq</i>	\$0 (OTC)		
<i>sm tussin dm 100-10 mg/5ml syr</i>	\$0 (OTC)		
<i>sorbugen nr 10-100 mg/5ml liq</i>	\$0 (OTC)		
<i>tgt cold/cough childrens 2.5-1-5 mg/5ml oral elix</i>	\$0 (OTC)		
<i>tgt tussin dm cough 100-10 mg/5ml syr</i>	\$0 (OTC)		
<i>tusnel diabetic 10-100 mg/5ml liq</i>	\$0 (OTC)		
<i>tussin cough dm sugar free 100-10 mg/5ml liq</i>	\$0 (OTC)		
<i>tussin dm 100-10 mg/5ml liq, 100-10 mg/5ml syr, 20-200 mg/10ml liq</i>	\$0 (OTC)		
<i>tussin dm clear 100-10 mg/5ml liq</i>	\$0 (OTC)		
<i>tussin dm cough + chest 200-20 mg/10ml liq</i>	\$0 (OTC)		
<i>tussin dm max sugar-free 100-10 mg/5ml liq</i>	\$0 (OTC)		
<i>virtussin a/c 100-10 mg/5ml soln</i>	\$0 (OTC)		
<i>virtussin ac w/alc 100-10 mg/5ml liq</i>	\$0 (OTC)		
<i>wal-tap dm cold/cough 2.5-1-5 mg/5ml oral elix</i>	\$0 (OTC)		
<i>wal-tussin cough/chest dm 100-10 mg/5ml syr</i>	\$0 (OTC)		
<i>wal-tussin dm 100-10 mg/5ml liq</i>	\$0 (OTC)		
<i>wal-tussin dm cgh/chest cong 100-10 mg/5ml liq</i>	\$0 (OTC)		
Expectorants			
<i>chest congestion childrens 100 mg/5ml liq</i>	\$0 (OTC)		
<i>chest congestion relief 400 mg tab</i>	\$0 (OTC)		
<i>childrens mucus relief expect 100 mg/5ml liq</i>	\$0 (OTC)		
<i>cough syrup 100 mg/5ml liq, 100 mg/5ml syr</i>	\$0 (OTC)		
<i>cough tab 200 mg tab</i>	\$0 (OTC)		
<i>cvs chest congestion childrens 100 mg/5ml liq</i>	\$0 (OTC)		
<i>cvs chest congestion relief 400 mg tab</i>	\$0 (OTC)		
<i>cvs mucus d extended release 60-600 mg tab er 12 hr</i>	\$0 (OTC)		
<i>cvs mucus d max st er 1200-120 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>cvs mucus extended release 1200 mg tab er 12</i>	\$0 (OTC)		QL(2 EA per 1 days)

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>hr</i>			
<i>cvs mucus extended release 600 mg tab er 12 hr</i>	\$0 (OTC)		QL(4 EA per 1 days)
<i>cvs tussin adult chest congest 100 mg/5ml liq</i>	\$0 (OTC)		
<i>despec 5-100 mg/5ml liq</i>	\$0 (OTC)		QL(480 ML per 30 days)
<i>diabetic siltussin das-na 100 mg/5ml liq</i>	\$0 (OTC)		
<i>diabetic tussin 100 mg/5ml liq</i>	\$0 (OTC)		
<i>diabetic tussin chest/congest 100 mg/5ml liq</i>	\$0 (OTC)		
<i>ed bron gp 5-100 mg/5ml liq</i>	\$0 (OTC)		QL(480 ML per 30 days)
<i>eq mucus er 600 mg tab er 12 hr</i>	\$0 (OTC)		QL(4 EA per 1 days)
<i>eql mucus-er 600 mg tab er 12 hr</i>	\$0 (OTC)		QL(4 EA per 1 days)
<i>eql tussin chest congestion 100 mg/5ml syr</i>	\$0 (OTC)		
<i>eql tussin mucus/chest congest 100 mg/5ml liq</i>	\$0 (OTC)		
<i>fenesis ir 400 mg tab</i>	\$0 (OTC)		
<i>geri-tussin 100 mg/5ml liq</i>	\$0 (OTC)		
<i>gnp mucus er 600 mg tab er 12 hr</i>	\$0 (OTC)		QL(4 EA per 1 days)
<i>gnp mucus relief 400 mg tab</i>	\$0 (OTC)		
<i>gnp tab tussin 400 mg tab</i>	\$0 (OTC)		
<i>gnp tussin 100 mg/5ml syr</i>	\$0 (OTC)		
<i>gnp tussin mucus & chest cong 100 mg/5ml liq</i>	\$0 (OTC)		
<i>goodsense mucus relief 400 mg tab</i>	\$0 (OTC)		
<i>guaifenesin 200 mg tab, 400 mg tab</i>	\$0 (OTC)		
<i>guaifenesin 100 mg/5ml liq, 100 mg/5ml soln, 100 mg/5ml syr, 200 mg/10ml liq, 200 mg/10ml soln, 300 mg/15ml liq, 300 mg/15ml soln</i>	\$0 (OTC)		
<i>guaifenesin er 1200 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>guaifenesin er 600 mg tab er 12 hr</i>	\$0 (OTC)		QL(4 EA per 1 days)
<i>hm chest congestion relief 400 mg tab</i>	\$0 (OTC)		
<i>hm mucus er 1200 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>hm mucus er 600 mg tab er 12 hr</i>	\$0 (OTC)		QL(4 EA per 1 days)
<i>hm mucus relief d 60-600 mg tab er 12 hr</i>	\$0 (OTC)		
<i>hm tussin adult 100 mg/5ml liq</i>	\$0 (OTC)		
<i>iophen-nr 100 mg/5ml liq</i>	\$0 (OTC)		
<i>kls mucus relief chest 400 mg tab</i>	\$0 (OTC)		
<i>mucinex chest congestion child 100 mg/5ml liq</i>	\$0 (OTC)		
<i>mucinex for kids 100 mg/5ml liq</i>	\$0 (OTC)		
MUCINEX FOR KIDS 100 mg pckt	\$0 (OTC)		
<i>mucosa 400 mg tab</i>	\$0 (OTC)		
<i>mucus d 60-600 mg tab er 12 hr</i>	\$0 (OTC)		
<i>mucus relief 400 mg tab</i>	\$0 (OTC)		
<i>mucus relief 600 mg tab er 12 hr</i>	\$0 (OTC)		QL(4 EA per 1 days)
<i>mucus relief chest congestion 200 mg tab, 400 mg tab</i>	\$0 (OTC)		
<i>mucus relief childrens 100 mg/5ml liq</i>	\$0 (OTC)		
<i>mucus relief cold/sinus max st 10-650-400 mg/20ml liq</i>	\$0 (OTC)		
<i>mucus relief d 60-600 mg tab er 12 hr</i>	\$0 (OTC)		
<i>mucus relief er 600 mg tab er 12 hr</i>	\$0 (OTC)		QL(4 EA per 1 days)
<i>mucus relief max st 1200 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>mucus-er 600 mg tab er 12 hr</i>	\$0 (OTC)		QL(4 EA per 1 days)

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>mucus+chest congestion 200 mg/10ml liq</i>	\$0 (OTC)		
<i>organ-i nr 200 mg tab</i>	\$0 (OTC)		
<i>pseudoephedrine-guaifenesin er 60-600 mg tab er 12 hr</i>	\$0 (OTC)		
<i>pseudoephedrine-guaifenesin er 120-1200 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>px tussin 100 mg/5ml liq, 100 mg/5ml soln</i>	\$0 (OTC)		
<i>q-tussin 100 mg/5ml soln</i>	\$0 (OTC)		
<i>qc medifin 400 400 mg tab</i>	\$0 (OTC)		
<i>qc mucus relief 600 mg tab er 12 hr</i>	\$0 (OTC)		QL(4 EA per 1 days)
<i>qc tussin mucus/congestion 100 mg/5ml liq</i>	\$0 (OTC)		
<i>ra mucus relief 400 mg tab</i>	\$0 (OTC)		
<i>ra mucus relief d 600-60 mg tab er 12 hr</i>	\$0 (OTC)		
<i>ra mucus relief d max strength 120-1200 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>ra tussin 100 mg/5ml liq</i>	\$0 (OTC)		
<i>ra tussin chest congestion 100 mg/5ml liq</i>	\$0 (OTC)		
<i>refenesen 200 mg tab</i>	\$0 (OTC)		
<i>refenesen 400 400 mg tab</i>	\$0 (OTC)		
<i>ri-tussin 100 mg/5ml syr</i>	\$0 (OTC)		
<i>robafen 100 mg/5ml liq, 100 mg/5ml syr</i>	\$0 (OTC)		
<i>robafen mucus/chest congestion 200 mg/10ml liq</i>	\$0 (OTC)		
<i>sb cough control 100 mg/5ml liq, 100 mg/5ml syr</i>	\$0 (OTC)		
<i>sb cough tab 200 mg tab</i>	\$0 (OTC)		
<i>siltussin sa 100 mg/5ml liq</i>	\$0 (OTC)		
<i>sm chest congestion relief 400 mg tab</i>	\$0 (OTC)		
<i>sm mucus er 600 mg tab er 12 hr</i>	\$0 (OTC)		QL(4 EA per 1 days)
<i>sm mucus relief 600 mg tab er 12 hr</i>	\$0 (OTC)		QL(4 EA per 1 days)
<i>sm mucus relief d 60-600 mg tab er 12 hr</i>	\$0 (OTC)		
<i>sm mucus relief max strength 1200 mg tab er 12 hr</i>	\$0 (OTC)		QL(2 EA per 1 days)
<i>sm tussin 100 mg/5ml syr</i>	\$0 (OTC)		
<i>sm tussin mucus+chest congest 100 mg/5ml liq</i>	\$0 (OTC)		
<i>tabtussin 400 mg tab</i>	\$0 (OTC)		
<i>tgt mucus relief childrens 100 mg/5ml liq</i>	\$0 (OTC)		
<i>th chest congestion relief 400 mg tab</i>	\$0 (OTC)		
<i>tusnel-ex 100 mg/5ml liq</i>	\$0 (OTC)		
<i>tussin chest congestion 100 mg/5ml liq, 100 mg/5ml syr</i>	\$0 (OTC)		
<i>tussin expectorant 100 mg/5ml syr</i>	\$0 (OTC)		
<i>tussin mucus & chest congest 100 mg/5ml liq</i>	\$0 (OTC)		
<i>tussin mucus+chest congestion 100 mg/5ml liq, 100 mg/5ml syr</i>	\$0 (OTC)		
<i>tussin pe 5-100 mg/5ml liq</i>	\$0 (OTC)		QL(480 ML per 30 days)
<i>wal-tussin 100 mg/5ml liq, 100 mg/5ml syr</i>	\$0 (OTC)		
<i>wal-tussin chest congestion 100 mg/5ml liq</i>	\$0 (OTC)		
Misc. Respiratory Inhalants			
<i>sodium chloride 0.9 % inh neb soln</i>	\$0 (OTC)		
DERMATOLOGICALS			

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
Acne Products			
<i>acne foaming wash 10 % Topical Liquid</i>	\$0 (OTC)		
<i>acne medication 10 10 % Topical Gel</i>	\$0 (OTC)		
<i>acne medication 10 10 % Topical Lotion</i>	\$0 (OTC)		
<i>acne medication 2.5 2.5 % Topical Gel</i>	\$0 (OTC)		
<i>acne medication 5 5 % Topical Gel</i>	\$0 (OTC)		
<i>acne medication 5 5 % Topical Lotion</i>	\$0 (OTC)		
<i>acne treatment 10 % Topical Gel</i>	\$0 (OTC)		
<i>acne-clear 10 % Topical Gel</i>	\$0 (OTC)		
<i>benzoyl peroxide 10 % Topical Liquid, 2.5 % Topical Gel, 5 % Topical Gel</i>	\$0 (OTC)		
<i>benzoyl peroxide wash 10 % Topical Liquid, 5 % Topical Liquid</i>	\$0 (OTC)		
<i>benzoyl peroxide wash 10 % Topical Liquid, 5 % Topical Liquid</i>	\$0 (OTC)		
<i>bp gel 5 % Topical Gel</i>	\$0 (OTC)		
<i>bp wash 10 % Topical Liquid, 5 % Topical Liquid</i>	\$0 (OTC)		
<i>bpo 4 % Topical Gel, 8 % Topical Gel</i>	\$0 (OTC)		
<i>bpo-10 wash 10 % Topical Liquid</i>	\$0 (OTC)		
<i>bpo-5 wash 5 % Topical Liquid</i>	\$0 (OTC)		
<i>clearasil daily clear acne 10 % Topical Cream</i>	\$0 (OTC)		
<i>cvs acne 10 % Topical Cream</i>	\$0 (OTC)		
<i>cvs acne control cleanser 10 % Topical Cream</i>	\$0 (OTC)		
<i>cvs acne foaming face wash 10 % Topical Liquid</i>	\$0 (OTC)		
<i>cvs advanced 3-in-1 cleanser 5 % Topical Liquid</i>	\$0 (OTC)		
<i>cvs creamy acne face wash 4 % Topical Liquid</i>	\$0 (OTC)		
<i>cvs foaming acne face wash 10 % Topical Liquid</i>	\$0 (OTC)		
<i>daily face wash 2 % Topical Liquid</i>	\$0 (OTC)		
<i>invisible acne max st 10 % Topical Cream</i>	\$0 (OTC)		
<i>kp benzoyl peroxide 5 % Topical Gel</i>	\$0 (OTC)		
<i>kp benzoyl peroxide wash 10 % Topical Liquid, 5 % Topical Liquid</i>	\$0 (OTC)		
<i>panoxyl creamy wash 4 % Topical Liquid</i>	\$0 (OTC)		
<i>panoxyl foaming wash 10 % Topical Liquid</i>	\$0 (OTC)		
<i>panoxyl wash 10 % Topical Liquid</i>	\$0 (OTC)		
<i>ra acne cleanser oil-free 2 % Topical Liquid</i>	\$0 (OTC)		
<i>ra acne maximum 2 % Topical Pad</i>	\$0 (OTC)		
<i>ra acne treatment 10 % Topical Cream</i>	\$0 (OTC)		
<i>ra daylogic acne foaming wash 10 % Topical Foam</i>	\$0 (OTC)		
Antibiotics - Topical			
<i>bacitracin 500 unit/gm Topical Ointment</i>	\$0 (OTC)		
<i>bacitracin 500 unit/gm Topical Ointment</i>	\$0 (OTC)		
<i>bacitracin zinc 500 unit/gm Topical Ointment</i>	\$0 (OTC)		
<i>bacitracin zinc 500 unit/gm Topical Ointment</i>	\$0 (OTC)		
<i>bacitracin-neomycin-polymyxin 400-5-5000 Topical Ointment</i>	\$0 (OTC)		
<i>bacitracin-neomycin-polymyxin 400-5-5000</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>Topical Ointment</i>			
<i>bacitraycin plus 500 unit/gm Topical Ointment</i>	\$0 (OTC)		
<i>cvs antibiotic 3.5-400-5000 Topical Ointment</i>	\$0 (OTC)		
<i>cvs bacitracin 500 unit/gm Topical Ointment</i>	\$0 (OTC)		
<i>cvs bacitracin zinc 500 unit/gm Topical Ointment</i>	\$0 (OTC)		
<i>cvs poly bacitracin 500-10000 unit/gm Topical Ointment</i>	\$0 (OTC)		
<i>cvs triple antibiotic Topical Ointment, 3.5-400-5000 Topical Ointment</i>	\$0 (OTC)		
<i>cvs triple antibiotic max str 1 % Topical Ointment</i>	\$0 (OTC)		
<i>cvs triple antibiotic/pain 1 % Topical Ointment</i>	\$0 (OTC)		
<i>double antibiotic 500-10000 unit/gm Topical Ointment</i>	\$0 (OTC)		
<i>double antibiotic 500-10000 unit/gm Topical Ointment</i>	\$0 (OTC)		
<i>eq bacitracin zinc 500 unit/gm Topical Ointment</i>	\$0 (OTC)		
<i>eq triple antibiotic 3.5-400-5000 Topical Ointment</i>	\$0 (OTC)		
<i>eql bacitracin zinc 500 unit/gm Topical Ointment</i>	\$0 (OTC)		
<i>eql first aid antibiotic 1 % Topical Ointment, 3.5-400-5000 Topical Ointment</i>	\$0 (OTC)		
<i>gnp bacitracin zinc 500 unit/gm Topical Ointment</i>	\$0 (OTC)		
<i>gnp triple antibiotic Topical Ointment, 3.5-400-5000 Topical Ointment</i>	\$0 (OTC)		
<i>gnp triple antibiotic plus 1 % Topical Ointment</i>	\$0 (OTC)		
<i>hm bacitracin zinc 500 unit/gm Topical Ointment</i>	\$0 (OTC)		
<i>hm double antibiotic 500-10000 unit/gm Topical Ointment</i>	\$0 (OTC)		
<i>hm triple antibiotic 3.5-400-5000 Topical Ointment</i>	\$0 (OTC)		
<i>hm triple antibiotic max st 1 % Topical Ointment</i>	\$0 (OTC)		
<i>kp bacitracin zinc 500 unit/gm Topical Ointment</i>	\$0 (OTC)		
<i>kp double antibiotic 500-10000 unit/gm Topical Ointment</i>	\$0 (OTC)		
<i>poly bacitracin 500-10000 unit/gm Topical Ointment</i>	\$0 (OTC)		
<i>px triple 3.5-400-5000 Topical Ointment</i>	\$0 (OTC)		
<i>qc bacitracin 500 unit/gm Topical Ointment</i>	\$0 (OTC)		
<i>qc triple antibiotic max st 1 % Topical Ointment</i>	\$0 (OTC)		
<i>ra antibiotic/pain relief 1 % Topical Ointment</i>	\$0 (OTC)		
<i>ra bacitracin 500 unit/gm Topical Ointment</i>	\$0 (OTC)		
<i>ra bacitracin zinc first aid 500 unit/gm Topical Ointment</i>	\$0 (OTC)		
<i>ra double antibiotic 500-10000 unit/gm Topical Ointment</i>	\$0 (OTC)		
<i>ra triple antibiotic 3.5-400-5000 Topical Ointment</i>	\$0 (OTC)		
<i>ra triple antibiotic plus 1 % Topical Ointment</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>sb triple antibiotic 3.5-400-5000 Topical Ointment</i>	\$0 (OTC)		
<i>sm antibiotic 500 unit/gm Topical Ointment</i>	\$0 (OTC)		
<i>sm double antibiotic 500-10000 unit/gm Topical Ointment, 500-100000 unit/gm Topical Ointment</i>	\$0 (OTC)		
<i>sm triple antibiotic 3.5-400-5000 Topical Ointment</i>	\$0 (OTC)		
<i>sm triple antibiotic max st 1 % Topical Ointment</i>	\$0 (OTC)		
<i>sm triple antibiotic original 3.5-400-5000 Topical Ointment</i>	\$0 (OTC)		
<i>tgt antibiotic 3.5-400-5000 Topical Ointment</i>	\$0 (OTC)		
<i>tgt bacitracin 500 unit/gm Topical Ointment</i>	\$0 (OTC)		
<i>th bacitracin 500 unit/gm Topical Ointment</i>	\$0 (OTC)		
<i>th triple antibiotic 3.5-400-5000 Topical Ointment</i>	\$0 (OTC)		
<i>th triple antibiotic plus 1 % Topical Ointment</i>	\$0 (OTC)		
<i>tri-biozene 1 % Topical Ointment</i>	\$0 (OTC)		
<i>triple antibiotic 3.5-400-5000 Topical Ointment, 5-400-5000 Topical Ointment</i>	\$0 (OTC)		
<i>triple antibiotic 3.5-400-5000 Topical Ointment, 5-400-5000 Topical Ointment</i>	\$0 (OTC)		
<i>triple antibiotic pain relief 1 % Topical Ointment</i>	\$0 (OTC)		
<i>triple antibiotic plus 1 % Topical Ointment</i>	\$0 (OTC)		
<i>triple antibiotic+pain relief 1 % Topical Ointment</i>	\$0 (OTC)		
<i>wal-sporin 500-100000 unit/gm Topical Ointment</i>	\$0 (OTC)		
Antifungals - Topical			
<i>anti-fungal 1 % Topical Cream, 1 % Topical Powder, 2 % Topical Aerosol</i>	\$0 (OTC)		
<i>antifungal 1 % Topical Aerosol, 2 % Topical Cream, 2 % Topical Powder</i>	\$0 (OTC)		
<i>antifungal (tolnaftate) 1 % Topical Cream</i>	\$0 (OTC)		
<i>antifungal clotrimazole 1 % Topical Cream</i>	\$0 (OTC)		
<i>antifungal foot/sneaker spray 1 % Topical Aerosol Powder</i>	\$0 (OTC)		
<i>antifungal spray powder 1 % Topical Aerosol Powder</i>	\$0 (OTC)		
<i>athletes foot 1 % Topical Cream, 2 % Topical Powder</i>	\$0 (OTC)		
<i>athletes foot (clotrimazole) 1 % Topical Cream</i>	\$0 (OTC)		
<i>athletes foot (terbinafine) 1 % Topical Cream</i>	\$0 (OTC)		
<i>athletes foot af 1 % Topical Cream</i>	\$0 (OTC)		
<i>athletes foot powder spray 1 % Topical Aerosol Powder, 2 % Topical Aerosol Powder</i>	\$0 (OTC)		
<i>athletes foot spray 1 % Topical Aerosol</i>	\$0 (OTC)		
<i>azolen tincture 2 % Topical Solution</i>	\$0 (OTC)		
<i>baza antifungal 2 % Topical Cream</i>	\$0 (OTC)		
<i>blis-to-sol 1 % Topical Liquid</i>	\$0 (OTC)		
<i>carrington antifungal 2 % Topical Cream</i>	\$0 (OTC)		
<i>clotrimazole 1 % Topical Cream</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>clotrimazole 1 % Topical Solution</i>	\$0 (OTC)		QL(30 ML per 30 days)
<i>clotrimazole af 1 % Topical Cream</i>	\$0 (OTC)		
<i>clotrimazole anti-fungal 1 % Topical Cream</i>	\$0 (OTC)		
<i>clotrimazole athletes foot 1 % Topical Cream</i>	\$0 (OTC)		
<i>clotrimazole grx 1 % Topical Cream</i>	\$0 (OTC)		
<i>cvs af spray powder 1 % Topical Aerosol Powder</i>	\$0 (OTC)		
<i>cvs anti-fungal 2 % Topical Powder</i>	\$0 (OTC)		
<i>cvs antifungal 1 % Topical Cream</i>	\$0 (OTC)		
<i>cvs athletes foot 1 % Topical Cream, 2 % Topical Aerosol Powder</i>	\$0 (OTC)		
<i>cvs athletes foot spray 2 % Topical Aerosol Powder</i>	\$0 (OTC)		
<i>cvs clotrimazole 1 % Topical Cream</i>	\$0 (OTC)		
<i>cvs clotrimazole 1 % Topical Solution</i>	\$0 (OTC)		QL(30 ML per 30 days)
<i>cvs foot & sneaker 1 % Topical Aerosol Powder</i>	\$0 (OTC)		
<i>cvs itch relief 1 % Topical Cream</i>	\$0 (OTC)		
<i>cvs jock itch 1 % Topical Cream</i>	\$0 (OTC)		
<i>cvs ringworm 1 % Topical Cream</i>	\$0 (OTC)		
<i>desenex 2 % Topical Powder</i>	\$0 (OTC)		
<i>desenex spray 2 % Topical Aerosol Powder</i>	\$0 (OTC)		
<i>eq antifungal 1 % Topical Cream</i>	\$0 (OTC)		
<i>eq athletes foot 1 % Topical Aerosol Powder, 1 % Topical Cream</i>	\$0 (OTC)		
<i>eq athletes foot (terbinafine) 1 % Topical Cream</i>	\$0 (OTC)		
<i>eq athletes foot (tolnaftate) 1 % Topical Cream</i>	\$0 (OTC)		
<i>eq athletes foot spray 2 % Topical Aerosol Powder</i>	\$0 (OTC)		
<i>eq jock itch 1 % Topical Cream</i>	\$0 (OTC)		
<i>eql antifungal 1 % Topical Cream</i>	\$0 (OTC)		
<i>eql antifungal (tolnaftate) 1 % Topical Cream</i>	\$0 (OTC)		
<i>eql athletes foot 1 % Topical Aerosol Powder, 1 % Topical Cream</i>	\$0 (OTC)		
<i>eql athletes foot powder spray 2 % Topical Aerosol Powder</i>	\$0 (OTC)		
<i>eql athletes foot spray 1 % Topical Aerosol</i>	\$0 (OTC)		
<i>eql athletes foot(terbinafine) 1 % Topical Cream</i>	\$0 (OTC)		
<i>eql jock itch 1 % Topical Cream</i>	\$0 (OTC)		
<i>formula 3 the treatment 1 % Topical Solution</i>	\$0 (OTC)		
<i>fungoid-d 1 % Topical Cream</i>	\$0 (OTC)		
<i>gnp athletes foot 1 % Topical Cream</i>	\$0 (OTC)		
<i>gnp miconazole nitrate 2 % Topical Aerosol Powder</i>	\$0 (OTC)		
<i>gnp miconazorb af 2 % Topical Powder</i>	\$0 (OTC)		
<i>gnp terbinafine hydrochloride 1 % Topical Cream</i>	\$0 (OTC)		
<i>gnp tolnaftate 1 % Topical Cream</i>	\$0 (OTC)		
<i>jock itch 1 % Topical Cream</i>	\$0 (OTC)		
<i>jock itch relief 1 % Topical Cream</i>	\$0 (OTC)		
<i>jock itch spray 1 % Topical Aerosol Powder</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>jock itch spray powder 1 % Topical Aerosol Powder</i>	\$0 (OTC)		
<i>kp clotrimazole 1 % Topical Cream</i>	\$0 (OTC)		
<i>kp miconazole nitrate 2 % Topical Cream</i>	\$0 (OTC)		
<i>kp terbinafine hydrochloride 1 % Topical Cream</i>	\$0 (OTC)		
<i>kp tolnaftate 1 % Topical Cream</i>	\$0 (OTC)		
<i>lamisil af defense 1 % Topical Aerosol Powder, 1 % Topical Powder</i>	\$0 (OTC)		
<i>lotrimin af 2 % Topical Powder</i>	\$0 (OTC)		
<i>lotrimin af deodorant powder 2 % Topical Aerosol Powder</i>	\$0 (OTC)		
<i>lotrimin af jock itch powder 2 % Topical Aerosol Powder</i>	\$0 (OTC)		
<i>lotrimin af powder 2 % Topical Aerosol Powder</i>	\$0 (OTC)		
<i>medi-first anti-fungal 1 % Topical Cream</i>	\$0 (OTC)		
<i>medicated anti-fungal 1 % Topical Solution</i>	\$0 (OTC)		
<i>miconazole antifungal 2 % Topical Cream</i>	\$0 (OTC)		
<i>miconazole nitrate 2 % Topical Aerosol Powder, 2 % Topical Cream</i>	\$0 (OTC)		
<i>miconazorb af 2 % Topical Powder</i>	\$0 (OTC)		
<i>micro guard 2 % Topical Powder</i>	\$0 (OTC)		
<i>odor control foot & sneaker 1 % Topical Aerosol Powder</i>	\$0 (OTC)		
<i>podactin 1 % Topical Powder</i>	\$0 (OTC)		
<i>px athletic foot 1 % Topical Cream</i>	\$0 (OTC)		
<i>qc athletes foot 1 % Topical Cream</i>	\$0 (OTC)		
<i>qc tolnaftate 1 % Topical Cream</i>	\$0 (OTC)		
<i>ra antifungal 1 % Topical Aerosol</i>	\$0 (OTC)		
<i>ra antifungal foot care 1 % Topical Cream</i>	\$0 (OTC)		
<i>ra atheletes foot 2 % Topical Aerosol Powder</i>	\$0 (OTC)		
<i>ra athletes foot 1 % Topical Cream</i>	\$0 (OTC)		
<i>ra clotrimazole 1 % Topical Cream</i>	\$0 (OTC)		
<i>ra foot care (terbinafine) 1 % Topical Cream</i>	\$0 (OTC)		
<i>ra foot care (tolnaftate) 1 % Topical Cream</i>	\$0 (OTC)		
<i>ra jock itch 1 % Topical Cream</i>	\$0 (OTC)		
<i>ra jock itch max st 1 % Topical Aerosol Powder</i>	\$0 (OTC)		
<i>remedy antifungal 2 % Topical Powder</i>	\$0 (OTC)		
<i>remedy phytoplex antifungal 2 % Topical Powder</i>	\$0 (OTC)		
<i>secura antifungal 2 % Topical Cream</i>	\$0 (OTC)		
<i>secura antifungal extra thick 2 % Topical Cream</i>	\$0 (OTC)		
<i>sm antifungal clotrimazole 1 % Topical Cream</i>	\$0 (OTC)		
<i>sm antifungal miconazole 2 % Topical Cream</i>	\$0 (OTC)		
<i>sm antifungal tolnaftate 1 % Topical Cream</i>	\$0 (OTC)		
<i>sm athletes foot 1 % Topical Cream</i>	\$0 (OTC)		
<i>soothe & cool inzo antifungal 2 % Topical Cream</i>	\$0 (OTC)		
<i>terbinafine hcl 1 % Topical Cream</i>	\$0 (OTC)		
<i>tgt antifungal 1 % Topical Aerosol, 1 % Topical Cream</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>tgt antifungal spray powder 1 % Topical Aerosol Powder</i>	\$0 (OTC)		
<i>tgt clotrimazole 1 % Topical Cream</i>	\$0 (OTC)		
<i>th clotrimazole 1 % Topical Cream</i>	\$0 (OTC)		
<i>tolnaftate 1 % Topical Aerosol Powder, 1 % Topical Cream, 1 % Topical Powder</i>	\$0 (OTC)		
<i>tolnaftate 1 % Topical Solution</i>	\$0 (OTC)		
<i>tolnaftate antifungal 1 % Topical Cream</i>	\$0 (OTC)		
<i>zeasorb-af 2 % Topical Powder</i>	\$0 (OTC)		
Antivirals - Topical			
<i>docosanol 10 % Topical Cream</i>	\$0 (OTC)		
Corticosteroids - Topical			
<i>anti-itch intensive healing 1 % Topical Lotion</i>	\$0 (OTC)		
<i>anti-itch maximum strength 1 % Topical Cream</i>	\$0 (OTC)		
<i>aquanil hc 1 % Topical Lotion</i>	\$0 (OTC)		
<i>beta hc 1 % Topical Lotion</i>	\$0 (OTC)		
<i>cortizone-10 1 % Topical Ointment</i>	\$0 (OTC)		
<i>cortizone-10 diabetics skin 1 % Topical Lotion</i>	\$0 (OTC)		
<i>cortizone-10 eczema 1 % Topical Lotion</i>	\$0 (OTC)		
<i>cortizone-10 hydratensive 1 % Topical Lotion</i>	\$0 (OTC)		
<i>cortizone-10 intensive healing 1 % Topical Cream</i>	\$0 (OTC)		
<i>cortizone-10 plus 1 % Topical Cream</i>	\$0 (OTC)		
<i>cortizone-10/aloe 1 % Topical Cream</i>	\$0 (OTC)		
<i>curad hydrocortisone 1 % Topical Cream</i>	\$0 (OTC)		
<i>cvs anti-itch maximum strength 1 % Topical Cream</i>	\$0 (OTC)		
<i>cvs cortisone intense healing 1 % Topical Cream</i>	\$0 (OTC)		
<i>cvs cortisone long-lasting 1 % Topical Lotion</i>	\$0 (OTC)		
<i>cvs cortisone maximum strength 1 % Topical Cream, 1 % Topical Lotion, 1 % Topical Ointment</i>	\$0 (OTC)		
<i>cvs eczema anti-itch 1 % Topical Cream</i>	\$0 (OTC)		
<i>cvs hydrocortisone acetate 0.5 % Topical Cream</i>	\$0 (OTC)		
<i>cvs hydrocortisone anti-itch 1 % Topical Cream</i>	\$0 (OTC)		
<i>cvs hydrocortisone max st 1 % Topical Cream</i>	\$0 (OTC)		
<i>dermarest eczema 1 % Topical Lotion</i>	\$0 (OTC)		
<i>eq anti-itch max strength 1 % Topical Cream</i>	\$0 (OTC)		
<i>eq hydrocortisone 1 % Topical Cream</i>	\$0 (OTC)		
<i>eq hydrocortisone max st 1 % Topical Cream</i>	\$0 (OTC)		
<i>eql anti-itch intensive heal 1 % Topical Cream</i>	\$0 (OTC)		
<i>eql anti-itch maximum strength 1 % Topical Cream, 1 % Topical Ointment</i>	\$0 (OTC)		
<i>gnp hydrocortisone 0.5 % Topical Cream</i>	\$0 (OTC)		
<i>gnp hydrocortisone max st 1 % Topical Ointment</i>	\$0 (OTC)		
<i>gnp hydrocortisone plus 1 % Topical Cream</i>	\$0 (OTC)		
<i>gnp hydrocortisone/aloe 1 % Topical Cream</i>	\$0 (OTC)		
<i>hm hydrocortisone plus 1 % Topical Cream</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>hm hydrocortisone-aloe max st 1 % Topical Cream</i>	\$0 (OTC)		
<i>hydrocortisone 0.5 % Topical Cream, 1 % Topical Cream</i>	\$0 (OTC)		
<i>hydrocortisone 0.5 % Topical Cream, 0.5 % Topical Ointment, 1 % Topical Cream, 1 % Topical Lotion, 1 % Topical Ointment</i>	\$0 (OTC)		
<i>hydrocortisone 1 % Topical Lotion</i>	\$0 (OTC)		
<i>hydrocortisone acetate 1 % Topical Ointment</i>	\$0 (OTC)		
<i>hydrocortisone anti-itch 1 % Topical Cream</i>	\$0 (OTC)		
<i>hydrocortisone anti-itch 1 % Topical Cream</i>	\$0 (OTC)		
<i>hydrocortisone intensive heal 1 % Topical Cream</i>	\$0 (OTC)		
<i>hydrocortisone max st 1 % Topical Cream</i>	\$0 (OTC)		
<i>hydrocortisone max st/12 moist 1 % Topical Cream</i>	\$0 (OTC)		
<i>hydrocortisone plus 1 % Topical Cream</i>	\$0 (OTC)		
<i>hydrocortisone-aloe 1 % Topical Cream</i>	\$0 (OTC)		
<i>hydrocortisone/aloe max str 1 % Topical Cream</i>	\$0 (OTC)		
<i>hydroskin 1 % Topical Cream</i>	\$0 (OTC)		
<i>hydroskin 1 % Topical Lotion</i>	\$0 (OTC)		
<i>instacort 5 0.5 % Topical Cream</i>	\$0 (OTC)		
<i>kls hydrocortisone plus 1 % Topical Cream</i>	\$0 (OTC)		
<i>kp hydrocortisone 1 % Topical Cream</i>	\$0 (OTC)		
<i>kp hydrocortisone max st 1 % Topical Ointment</i>	\$0 (OTC)		
<i>medpura hydrocortisone 1 % Topical Cream</i>	\$0 (OTC)		
<i>noble formula hc 1 % Topical Cream</i>	\$0 (OTC)		
<i>preparation h 1 % Topical Cream</i>	\$0 (OTC)		
<i>px hydrocream 1 % Topical Cream</i>	\$0 (OTC)		
<i>qc hydrocortisone max st 1 % Topical Cream</i>	\$0 (OTC)		
<i>ra anti-itch maximum strength 1 % Topical Cream, 1 % Topical Ointment</i>	\$0 (OTC)		
<i>ra hydrocortisone plus 1 % Topical Cream</i>	\$0 (OTC)		
<i>ra hydrocortisone plus 12 1 % Topical Cream</i>	\$0 (OTC)		
<i>sb hydrocortisone 1 % Topical Cream</i>	\$0 (OTC)		
<i>sb hydrocortisone max st 1 % Topical Ointment</i>	\$0 (OTC)		
<i>sb hydrocortisone plus 1 % Topical Cream</i>	\$0 (OTC)		
<i>sm hydrocortisone 0.5 % Topical Cream, 0.5 % Topical Ointment, 1 % Topical Cream</i>	\$0 (OTC)		
<i>sm hydrocortisone max st 1 % Topical Ointment</i>	\$0 (OTC)		
<i>sm hydrocortisone plus 1 % Topical Cream</i>	\$0 (OTC)		
<i>sm hydrocortisone-aloe max st 1 % Topical Cream</i>	\$0 (OTC)		
<i>tgt anti-itch maximum strength 1 % Topical Cream, 1 % Topical Ointment</i>	\$0 (OTC)		
<i>tgt anti-itch/aloe max st 1 % Topical Cream</i>	\$0 (OTC)		
<i>th hydrocortisone 1 % Topical Cream</i>	\$0 (OTC)		
<i>th hydrocortisone-aloe 1 % Topical Cream</i>	\$0 (OTC)		
Emollients			
<i>4-N-1 1 % Topical Cream</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
4-N-1 1 % Topical Cream	\$0 (OTC)		
al12 12 % Topical Lotion	\$0 (OTC)		
amlactin 12 % Topical Lotion	\$0 (OTC)		
baby darlings soothing bath Topical Packet	\$0 (OTC)		
calamine 8-8 % Topical Lotion	\$0 (OTC)		
calamine-zinc oxide Topical Lotion, 8-8 % Topical Lotion, 8-8 % Topical Suspension	\$0 (OTC)		
colloidal oatmeal bath Topical Packet	\$0 (OTC)		
COOL BOTTOMS 1 % Topical Cream	\$0 (OTC)		
cvs oatmeal bath Topical Powder	\$0 (OTC)		
cvs petroleum jelly Topical Gel	\$0 (OTC)		
cvs skin treatment 12 % Topical Lotion	\$0 (OTC)		
eq petroleum jelly Topical Gel	\$0 (OTC)		
gnp calamine 8-8 % Topical Lotion	\$0 (OTC)		
gnp petroleum jelly gel, Topical Gel	\$0 (OTC)		
goodsense calamine 8-8 % Topical Suspension	\$0 (OTC)		
goodsense petroleum jelly Topical Gel	\$0 (OTC)		
GRX WHITE PETROLATUM Topical Ointment	\$0 (OTC)		
hm calamine 8-8 % Topical Lotion	\$0 (OTC)		
hm petroleum jelly Topical Gel	\$0 (OTC)		
LAC-HYDRIN FIVE 5 % Topical Lotion	\$0 (OTC)		
mapo bath Topical Oil	\$0 (OTC)		
mineral oil light Topical Oil, 100 % Topical Oil	\$0 (OTC)		
natural oatmeal bath treatment 100 % Topical Packet	\$0 (OTC)		
NEUTRAPHOR 1 % Topical Cream	\$0 (OTC)		
petrolatum white Topical Ointment	\$0 (OTC)		
petroleum jelly gel, Topical Gel, Topical Ointment, 100 % Topical Gel	\$0 (OTC)		
petroleum jelly lip treatment Topical Ointment	\$0 (OTC)		
qc calamine Topical Lotion	\$0 (OTC)		
qc muscle rub 10-15 % Topical Cream	\$0 (OTC)		
ra calamine 8-8 % Topical Suspension	\$0 (OTC)		
ra petroleum jelly gel, Topical Gel, Topical Ointment	\$0 (OTC)		
ra renewal soothing bath 100 % Topical Packet	\$0 (OTC)		
ra tugaboos petroleum jelly gel	\$0 (OTC)		
REMEDY NUTRASHIELD 1 % Topical Cream	\$0 (OTC)		
sm calamine Topical Lotion	\$0 (OTC)		
sm oatmeal bath 100 % Topical Packet	\$0 (OTC)		
sm petroleum jelly gel, Topical Gel	\$0 (OTC)		
vaseline gel	\$0 (OTC)		
white petrolatum Topical Ointment, 100 % Topical Ointment	\$0 (OTC)		
white petroleum jelly Topical Gel	\$0 (OTC)		
Keratolytic/antimitotic/vesicant Agents			
acne 2 % Topical Pad	\$0 (OTC)		
acne pads maximum strength 2 % Topical Pad	\$0 (OTC)		
callus removers 40 % Topical Pad	\$0 (OTC)		
callus removers extra thick 40 % Topical Pad	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>compound w 40 % Topical Pad</i>	\$0 (OTC)		
<i>compound w one step 40 % Topical Pad</i>	\$0 (OTC)		
<i>compound w one step invisible 40 % Topical Strip</i>	\$0 (OTC)		
<i>corn & callus remover 17 % Topical Liquid</i>	\$0 (OTC)		
<i>corn remover one-step 40 % Topical Strip</i>	\$0 (OTC)		
<i>corn removers 40 % Topical Pad</i>	\$0 (OTC)		
<i>cvs corn remover 40 % Topical Pad</i>	\$0 (OTC)		
<i>cvs corn removers 40 % Topical Pad</i>	\$0 (OTC)		
<i>cvs corn/callus remover 17 % Topical Kit</i>	\$0 (OTC)		
<i>cvs one step wart remover 40 % Topical Strip</i>	\$0 (OTC)		
<i>cvs plantar wart remover 40 % Topical Pad</i>	\$0 (OTC)		
<i>cvs wart remover 40 % Topical Pad</i>	\$0 (OTC)		
<i>cvs wart remover 17 % Topical Liquid</i>	\$0 (OTC)		
<i>cvs wart remover one step 40 % Topical Strip</i>	\$0 (OTC)		
<i>cvs wart remover pen 17 % Topical Gel</i>	\$0 (OTC)		
<i>daily cleansing max st 2 % Topical Pad</i>	\$0 (OTC)		
<i>DUOFILM 17 % Topical Solution</i>	\$0 (OTC)		
<i>eq wart remover 17 % Topical Liquid</i>	\$0 (OTC)		
<i>gel callus removers 40 % Topical Pad</i>	\$0 (OTC)		
<i>gnp scalp relief 3 % Topical Liquid</i>	\$0 (OTC)		
<i>gnp wart remover 17 % Topical Liquid</i>	\$0 (OTC)		
<i>keralyt 3 % Topical Gel</i>	\$0 (OTC)		
<i>KERALYT 3 % Topical Gel</i>	\$0 (OTC)		
<i>liquid corn & callus remover 17 % Topical Liquid</i>	\$0 (OTC)		
<i>medicated callus removers 40 % Topical Pad</i>	\$0 (OTC)		
<i>medicated corn removers 40 % Topical Pad</i>	\$0 (OTC)		
<i>medicated wart removers 40 % Topical Pad</i>	\$0 (OTC)		
<i>mediplast 40 % Topical Pad</i>	\$0 (OTC)		
<i>mosco corn remover max str 40 % Topical Pad</i>	\$0 (OTC)		
<i>neutrogena rapid clear 2 % Topical Pad</i>	\$0 (OTC)		
<i>plantar wart remover 40 % Topical Pad</i>	\$0 (OTC)		
<i>psoriasin 3 % Topical Liquid</i>	\$0 (OTC)		
<i>ra corn removers ultra thin 40 % Topical Pad</i>	\$0 (OTC)		
<i>ra scalp itch/dandruff relief 3 % Topical Liquid</i>	\$0 (OTC)		
<i>ra wart remover 40 % Topical Pad</i>	\$0 (OTC)		
<i>ra wart remover 17 % Topical Gel</i>	\$0 (OTC)		
<i>ra wart remover 17 % Topical Solution</i>	\$0 (OTC)		
<i>ra wart remover max strength 17 % Topical Liquid</i>	\$0 (OTC)		
<i>sal-plant 17 % Topical Gel</i>	\$0 (OTC)		
<i>salactic film 17 % Topical Solution</i>	\$0 (OTC)		
<i>scalp relief 3 % Topical Liquid</i>	\$0 (OTC)		
<i>sm medicated corn removers 40 % Topical Pad</i>	\$0 (OTC)		
<i>sm wart remover max st 17 % Topical Liquid</i>	\$0 (OTC)		
<i>tgt wart remover 17 % Topical Liquid</i>	\$0 (OTC)		
<i>ultra thin corn removers 40 % Topical Pad</i>	\$0 (OTC)		
<i>wart remover 40 % Topical Pad</i>	\$0 (OTC)		
<i>wart remover 17 % Topical Gel</i>	\$0 (OTC)		
<i>wart remover maximum strength 40 % Topical</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>Strip</i>			
<i>wart remover maximum strength 17 % Topical Gel</i>	\$0 (OTC)		
<i>wart remover maximum strength 17 % Topical Liquid</i>	\$0 (OTC)		
Liniments			
<i>arthritis pain relieving 0.075 % Topical Cream</i>	\$0 (OTC)		
<i>capsaicin 0.075 % Topical Cream</i>	\$0 (OTC)		
<i>muscle relief 0.075 % Topical Cream</i>	\$0 (OTC)		
<i>trixaicin 0.025 % Topical Cream</i>	\$0 (OTC)		
<i>trixaicin hp 0.075 % Topical Cream</i>	\$0 (OTC)		
Local Anesthetics - Topical			
<i>capsaicin 0.025 % Topical Cream, 0.1 % Topical Cream</i>	\$0 (OTC)		
<i>capsaicin hp 0.1 % Topical Cream</i>	\$0 (OTC)		
<i>cvs capsaicin hp 0.1 % Topical Cream</i>	\$0 (OTC)		
<i>zostrix hp 0.1 % Topical Cream</i>	\$0 (OTC)		
Misc. Topical			
<i>calamine Topical Lotion</i>	\$0 (OTC)		
<i>cvs diaper rash 40 % Topical Ointment</i>	\$0 (OTC)		
<i>cvs zinc oxide 20 % Topical Ointment</i>	\$0 (OTC)		
<i>diaper rash 40 % Topical Ointment, 40 % Topical Paste</i>	\$0 (OTC)		
<i>eql baby basics diaper rash 40 % Topical Ointment</i>	\$0 (OTC)		
<i>gnp zinc oxide 20 % Topical Ointment</i>	\$0 (OTC)		
<i>medpura zinc oxide 20 % Topical Ointment</i>	\$0 (OTC)		
<i>qc calamine Topical Lotion</i>	\$0 (OTC)		
<i>ra zinc oxide 20 % Topical Ointment</i>	\$0 (OTC)		
<i>TRIPLE PASTE 12.8 % Topical Ointment</i>	\$0 (OTC)		
<i>zinc oxide 20 % Topical Ointment, 25 % Topical Ointment, 40 % Topical Ointment</i>	\$0 (OTC)		
Scabicides & Pediculicides			
<i>complete lice treatment 0.33-4-0.5 % Multiple Routes Kit</i>	\$0 (OTC)		
<i>cvs lice killing 0.33-4 % Topical Shampoo</i>	\$0 (OTC)		
<i>cvs lice solution Multiple Routes Kit</i>	\$0 (OTC)		
<i>cvs lice solution 3-step Multiple Routes Kit</i>	\$0 (OTC)		
<i>cvs lice treatment 1 % Topical Liquid</i>	\$0 (OTC)		
<i>cvs permethrin 1 % Topical Lotion</i>	\$0 (OTC)		
<i>eq complete lice treatment 0.33-4-0.5 % Multiple Routes Kit</i>	\$0 (OTC)		
<i>eq lice killing max st 0.33-4 % Topical Shampoo</i>	\$0 (OTC)		
<i>eql lice killing max st 0.33-4 % Topical Shampoo</i>	\$0 (OTC)		
<i>eql lice solution 0.5-0.33-4 % Multiple Routes Kit</i>	\$0 (OTC)		
<i>eql lice treatment maximum str 0.33-4 % Topical Liquid</i>	\$0 (OTC)		
<i>gnp lice solution 0.33-4-0.5 % Multiple Routes Kit</i>	\$0 (OTC)		
<i>gnp lice treatment 0.33-4 % Topical Shampoo, 1</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>% Topical Liquid</i>			
<i>goodsense complete lice kit Multiple Routes Kit</i>	\$0 (OTC)		
<i>hm lice killing max st 0.33-4 % Topical Shampoo</i>	\$0 (OTC)		
<i>hm lice treatment 1 % Topical Liquid, 1 % Topical Lotion</i>	\$0 (OTC)		
<i>lice killing 0.33-4 % Topical Shampoo, 4-0.33 % Topical Shampoo</i>	\$0 (OTC)		
<i>lice killing maximum strength 0.33-4 % Topical Liquid, 0.33-4 % Topical Shampoo</i>	\$0 (OTC)		
<i>lice solution 0.33-4-0.5 % Multiple Routes Kit</i>	\$0 (OTC)		
<i>lice treatment 1 % Topical Liquid, 1 % Topical Lotion</i>	\$0 (OTC)		
<i>lice treatment max st 0.33-4-0.5 % Multiple Routes Kit</i>	\$0 (OTC)		
<i>permethrin 1 % Topical Lotion</i>	\$0 (OTC)		
<i>permethrin lice treatment 1 % Topical Lotion</i>	\$0 (OTC)		
<i>ra lice maximum strength 0.33-4 % Topical Liquid, 0.33-4 % Topical Shampoo</i>	\$0 (OTC)		
<i>ra lice solution Multiple Routes Kit, 0.5-0.33-4 % Multiple Routes Kit</i>	\$0 (OTC)		
<i>RID ESSENTIAL LICE ELIMINATION 0.33-4 % Topical Kit</i>	\$0 (OTC)		
<i>rid lice killing shampoo 0.33-4 % Topical Shampoo</i>	\$0 (OTC)		
<i>sb lice killing max st 0.33-4 % Topical Shampoo</i>	\$0 (OTC)		
<i>sm lice killing 0.33-4 % Topical Shampoo</i>	\$0 (OTC)		
<i>sm lice killing max strength 0.33-4 % Topical Shampoo</i>	\$0 (OTC)		
<i>sm lice solution 0.33-4-0.5 % Multiple Routes Kit</i>	\$0 (OTC)		
<i>sm lice solution kit 0.33-4-0.5 % Multiple Routes Kit</i>	\$0 (OTC)		
<i>sm lice treatment 1 % Topical Liquid, 1 % Topical Lotion</i>	\$0 (OTC)		
<i>stop lice complete treatment 0.33-4-0.5 % Multiple Routes Kit</i>	\$0 (OTC)		
<i>stop lice maximum strength 0.33-4 % Topical Shampoo</i>	\$0 (OTC)		
<i>tgt lice complete 1-2-3 Multiple Routes Kit</i>	\$0 (OTC)		
<i>tgt lice killing max st 0.33-4 % Topical Shampoo</i>	\$0 (OTC)		
Tar Products			
<i>cvs therapeutic 0.5 % Topical Shampoo</i>	\$0 (OTC)		
<i>eql therapeutic 0.5 % Topical Shampoo</i>	\$0 (OTC)		
<i>ionil-t 1 % Topical Shampoo</i>	\$0 (OTC)		
<i>OXIPOR VHC PSORIASIS 48.5-1-2 % Topical Lotion</i>	\$0 (OTC)		
<i>ra therapeutic 0.5 % Topical Shampoo, 2.5 % Topical Shampoo</i>	\$0 (OTC)		
<i>sm anti-dandruff coal tar 0.5 % Topical Shampoo</i>	\$0 (OTC)		
<i>TARSUM RELIEF 2 % Topical Shampoo</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>tera-gel tar 0.5 % Topical Shampoo</i>	\$0 (OTC)		
<i>therapeutic 0.5 % Topical Shampoo</i>	\$0 (OTC)		
<i>therapeutic t+plus 0.5 % Topical Shampoo</i>	\$0 (OTC)		
X-SEB T PLUS 10 % Topical Shampoo	\$0 (OTC)		
Wound Care Products			
DUODERM CGF DRESSING Topical Miscellaneous	\$0 (OTC)		
DUODERM CGF EXTRA THIN Topical Miscellaneous	\$0 (OTC)		
DUODERM HYDROACTIVE Topical Miscellaneous	\$0 (OTC)		
DUODERM HYDROACTIVE Topical Gel	\$0 (OTC)		
MEDI-PAK PERFORMANCE PLUS ABD Topical Pad	\$0 (OTC)		
DIAGNOSTIC AGENTS			
Diagnostic Agents			
ACCU-CHEK GUIDE TEST in vitro strip	\$0 (OTC)		QL(3.4 EA per 1 days)
<i>one step pregnancy in vitro diagn test</i>	\$0 (OTC)		QL(450 EA per 30 days)
DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS			
Nutritional Supplements			
<i>l-carnitine 500 mg cap, 500 mg tab</i>	\$0 (OTC)		
<i>levocarnitine fumarate 500 mg tab</i>	\$0 (OTC)		
TYR COOLER liq	\$0 (OTC)		
DIGESTIVE AGENTS			
Antacid			
<i>activated charcoal 260 mg cap</i>	\$0 (OTC)		
<i>activated vegetable charcoal 260 mg cap</i>	\$0 (OTC)		
<i>almacone double strength 400-400-40 mg/5ml susp</i>	\$0 (OTC)		
<i>alum & mag hydroxide-simeth 200-200-20 mg/5ml susp, 400-400-40 mg/5ml susp</i>	\$0 (OTC)		
<i>aluminum hydroxide 600 mg/5ml susp</i>	\$0 (OTC)		
<i>aluminum hydroxide gel 320 mg/5ml susp</i>	\$0 (OTC)		
<i>antacid 1177 mg tab chew, 500 mg tab chew</i>	\$0 (OTC)		
<i>antacid 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>antacid advanced 400-400-40 mg/5ml susp</i>	\$0 (OTC)		
<i>antacid anti-gas 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>antacid anti-gas fast acting 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>antacid anti-gas max strength 400-400-40 mg/5ml susp</i>	\$0 (OTC)		
<i>antacid anti-gas reg strength 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>antacid calcium 500 mg tab chew</i>	\$0 (OTC)		
<i>antacid calcium extra strength 750 mg tab chew</i>	\$0 (OTC)		
<i>antacid extra strength 750 mg tab chew</i>	\$0 (OTC)		
<i>antacid fast acting 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>antacid fast relief 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>antacid flavor chews 750 mg tab chew</i>	\$0 (OTC)		
<i>antacid liquid 200-200-20 mg/5ml susp</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>antacid m 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>antacid maximum 1000 mg tab chew</i>	\$0 (OTC)		
<i>antacid maximum strength 400-400-40 mg/5ml susp</i>	\$0 (OTC)		
<i>antacid plus anti-gas fast act 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>antacid plus anti-gas relief 200-200-20 mg/5ml susp, 400-400-40 mg/5ml susp</i>	\$0 (OTC)		
<i>antacid regular strength 500 mg tab chew</i>	\$0 (OTC)		
<i>antacid regular strength 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>antacid soft chews 1177 mg tab chew</i>	\$0 (OTC)		
<i>antacid ultra strength 1000 mg tab chew</i>	\$0 (OTC)		
<i>cal-gest antacid 500 mg tab chew</i>	\$0 (OTC)		
<i>calcium antacid 500 mg tab chew</i>	\$0 (OTC)		
<i>calcium antacid extra strength 750 mg tab chew</i>	\$0 (OTC)		
<i>calcium antacid ultra 1000 mg tab chew</i>	\$0 (OTC)		
<i>calcium antacid ultra max st 1000 mg tab chew</i>	\$0 (OTC)		
<i>calcium antacid ultra strength 1000 mg tab chew</i>	\$0 (OTC)		
<i>calcium carbonate antacid 500 mg tab chew, 750 mg tab chew</i>	\$0 (OTC)		
<i>calcium carbonate antacid 1250 mg/5ml susp</i>	\$0 (OTC)		
<i>charcoal activated 260 mg cap</i>	\$0 (OTC)		
<i>childrens pepto 400 mg tab chew</i>	\$0 (OTC)		
<i>childrens soothe 400 mg tab chew</i>	\$0 (OTC)		
<i>comfort gel antacid & anti-gas 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>comfort gel antacid anti-gas 400-400-40 mg/5ml susp</i>	\$0 (OTC)		
<i>comfort gel extra strength 400-400-40 mg/5ml susp</i>	\$0 (OTC)		
<i>cvs antacid 400-400-40 mg/5ml susp</i>	\$0 (OTC)		
<i>cvs antacid extra 750 mg tab chew</i>	\$0 (OTC)		
<i>cvs antacid extra strength 750 mg tab chew</i>	\$0 (OTC)		
<i>cvs antacid fast relief 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>cvs antacid kids 750 mg tab chew</i>	\$0 (OTC)		
<i>cvs antacid maximum strength 1000 mg tab chew</i>	\$0 (OTC)		
<i>cvs antacid plus antigas 400-400-40 mg/5ml susp</i>	\$0 (OTC)		
<i>cvs antacid soft chews ultr st 1177 mg tab chew</i>	\$0 (OTC)		
<i>cvs antacid ultra strength 1000 mg tab chew</i>	\$0 (OTC)		
<i>cvs antacid/anti-gas 200-200-20 mg/5ml susp, 400-400-40 mg/5ml susp</i>	\$0 (OTC)		
<i>cvs antacid/simethicone 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>cvs chewy not chalky flavor 750 mg tab chew</i>	\$0 (OTC)		
<i>cvs smooth antacid extra st 750 mg tab chew</i>	\$0 (OTC)		
<i>eq antacid 500 mg tab chew</i>	\$0 (OTC)		
<i>eq antacid 200-200-20 mg/5ml susp</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>eq antacid extra strength 750 mg tab chew</i>	\$0 (OTC)		
<i>eq antacid maximum strength 400-400-40 mg/5ml susp</i>	\$0 (OTC)		
<i>eq antacid ultra strength 1000 mg tab chew</i>	\$0 (OTC)		
<i>eq antacid/anti-gas 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>eql antacid 500 mg tab chew</i>	\$0 (OTC)		
<i>eql antacid advanced max st 400-400-40 mg/5ml susp</i>	\$0 (OTC)		
<i>eql antacid extra strength 750 mg tab chew</i>	\$0 (OTC)		
<i>eql antacid ultra strength 1000 mg tab chew</i>	\$0 (OTC)		
<i>eql antacid/anti-gas 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>eql magnesium 250 mg tab</i>	\$0 (OTC)		
<i>fast acting antacid/anti-gas 400-400-40 mg/5ml susp</i>	\$0 (OTC)		
<i>flanax heartburn relief 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>geri-lanta 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>geri-lanta maximum strength 400-400-40 mg/5ml susp</i>	\$0 (OTC)		
<i>geri-mox 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>gnp antacid 500 mg tab chew</i>	\$0 (OTC)		
<i>gnp antacid & anti-gas 200-200-20 mg/5ml susp, 400-400-40 mg/5ml susp</i>	\$0 (OTC)		
<i>gnp antacid anti-gas 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>gnp antacid extra strength 750 mg tab chew</i>	\$0 (OTC)		
<i>gnp antacid maximum strength 400-400-40 mg/5ml susp</i>	\$0 (OTC)		
<i>gnp antacid regular strength 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>gnp antacid ultra strength 1000 mg tab chew</i>	\$0 (OTC)		
<i>gnp magnesium oxide 250 mg tab</i>	\$0 (OTC)		
<i>gnp masanti maximum strength 400-400-40 mg/5ml susp</i>	\$0 (OTC)		
<i>gnp masanti regular strength 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>hm advanced antacid max st 400-400-40 mg/5ml susp</i>	\$0 (OTC)		
<i>hm antacid 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>hm antacid anti-gas ex st 400-400-40 mg/5ml susp</i>	\$0 (OTC)		
<i>hm antacid/antigas 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>hm calcium antacid 500 mg tab chew, 750 mg tab chew</i>	\$0 (OTC)		
<i>hm calcium antacid ex st 750 mg tab chew</i>	\$0 (OTC)		
<i>hm magnesium 250 mg tab, 400 mg tab</i>	\$0 (OTC)		
<i>kerr insta-char 25 gm/120ml susp, 50 gm/240ml susp</i>	\$0 (OTC)		
<i>maalox advanced max st 400-400-40 mg/5ml susp</i>	\$0 (OTC)		
<i>mag-al plus xs 400-400-40 mg/5ml liq</i>	\$0 (OTC)		
<i>magnesium oxide 250 mg tab, 400 mg tab</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>magnesium oxide (antacid) 500 mg cap</i>	\$0 (OTC)		
<i>meijer antacid 400-400-40 mg/5ml susp</i>	\$0 (OTC)		
<i>mi-acid 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>mi-acid maximum strength 400-400-40 mg/5ml susp</i>	\$0 (OTC)		
<i>mintox 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>mintox maximum strength 400-400-40 mg/5ml susp</i>	\$0 (OTC)		
<i>mintox regular strength 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>mylanta maximum strength 400-400-40 mg/5ml susp</i>	\$0 (OTC)		
MYLANTA MAXIMUM STRENGTH 400-400-40 mg/5ml susp	\$0 (OTC)		
<i>px antacid extra strength 750 mg tab chew</i>	\$0 (OTC)		
<i>px antacid maximum strength 1000 mg tab chew</i>	\$0 (OTC)		
<i>px antacid maximum strength 400-400-40 mg/5ml susp</i>	\$0 (OTC)		
<i>px antacid regular strength 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>px calcium antacid 500 mg tab chew</i>	\$0 (OTC)		
<i>qc antacid 500 mg tab chew</i>	\$0 (OTC)		
<i>qc antacid 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>qc antacid extra strength 750 mg tab chew</i>	\$0 (OTC)		
<i>qc antacid ultra strength 1000 mg tab chew</i>	\$0 (OTC)		
<i>qc antacid/anti-gas 200-200-20 mg/5ml susp, 400-400-40 mg/5ml susp</i>	\$0 (OTC)		
<i>ra antacid 500 mg tab chew</i>	\$0 (OTC)		
<i>ra antacid extra strength 750 mg tab chew</i>	\$0 (OTC)		
<i>ra antacid ultra strength 1000 mg tab chew</i>	\$0 (OTC)		
<i>ra antacid/anti-gas 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>ra antacid/anti-gas max st 400-400-40 mg/5ml susp</i>	\$0 (OTC)		
<i>ra antacid/gas relief max st 400-400-40 mg/5ml susp</i>	\$0 (OTC)		
<i>ra smooth antacid ex st 750 mg tab chew</i>	\$0 (OTC)		
<i>ri-gel 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>ri-gel ii 400-400-40 mg/5ml susp</i>	\$0 (OTC)		
<i>ri-mox 225-200 mg/5ml susp</i>	\$0 (OTC)		
<i>sb antacid 500 mg tab chew</i>	\$0 (OTC)		
<i>sb antacid anti-gas 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>sb antacid anti-gas double st 400-400-40 mg/5ml susp</i>	\$0 (OTC)		
<i>sb antacid extra strength 750 mg tab chew</i>	\$0 (OTC)		
<i>sb antacid/antigas 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>sm antacid advanced 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>sm antacid advanced max st 400-400-40 mg/5ml susp</i>	\$0 (OTC)		
<i>sm antacid anti-gas 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>sm antacid anti-gas ex st 400-400-40 mg/5ml</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>susp</i>			
<i>sm antacid maximum strength 400-400-40 mg/5ml susp</i>	\$0 (OTC)		
<i>sm antacid/antigas 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>sm calcium antacid 500 mg tab chew</i>	\$0 (OTC)		
<i>sm calcium antacid ex st 750 mg tab chew</i>	\$0 (OTC)		
<i>sm calcium antacid ultra st 1000 mg tab chew</i>	\$0 (OTC)		
<i>sm foaming antacid 80-20 mg tab chew</i>	\$0 (OTC)		
<i>sm smooth antacid ex st 750 mg tab chew</i>	\$0 (OTC)		
<i>smooth antacid extra strength 750 mg tab chew</i>	\$0 (OTC)		
<i>sodium bicarbonate 650 mg tab</i>	\$0 (OTC)		
<i>tgt antacid 1000 mg tab chew</i>	\$0 (OTC)		
<i>tgt antacid anti-gas 200-200-20 mg/5ml susp</i>	\$0 (OTC)		
<i>tgt antacid extra strength 750 mg tab chew</i>	\$0 (OTC)		
<i>tgt antacid ultra strength 1000 mg tab chew</i>	\$0 (OTC)		
<i>th antacid extra strength 750 mg tab chew</i>	\$0 (OTC)		
<i>th antacid regular strength 500 mg tab chew</i>	\$0 (OTC)		
<i>th antacid ultra strength 1000 mg tab chew</i>	\$0 (OTC)		
<i>tum-ease 500 mg tab chew</i>	\$0 (OTC)		
<i>tums chewy delights 1177 mg tab chew</i>	\$0 (OTC)		
TUMS CHEWY DELIGHTS 1177 mg tab chew	\$0 (OTC)		
URO-MAG 140 mg cap	\$0 (OTC)		
Antiflatulents			
<i>anti-gas ultra strength 180 mg cap</i>	\$0 (OTC)		
<i>cvs gas relief 80 mg tab chew</i>	\$0 (OTC)		
<i>cvs gas relief drops ex st 40 mg/0.6ml liq</i>	\$0 (OTC)		
<i>cvs gas relief extra strength 125 mg tab chew</i>	\$0 (OTC)		
<i>cvs gas relief infants 20 mg/0.3ml susp</i>	\$0 (OTC)		
<i>cvs gas relief ultra strength 180 mg cap</i>	\$0 (OTC)		
<i>cvs infants gas relief 20 mg/0.3ml susp</i>	\$0 (OTC)		
<i>drxchoice gas relief 80 mg tab chew</i>	\$0 (OTC)		
<i>eq gas relief extra strength 125 mg tab chew</i>	\$0 (OTC)		
<i>eq infants gas relief 40 mg/0.6ml susp</i>	\$0 (OTC)		
<i>eql gas relief ultra strength 180 mg cap</i>	\$0 (OTC)		
<i>eql infants gas relief 20 mg/0.3ml susp</i>	\$0 (OTC)		
<i>gas relief 180 mg cap, 80 mg tab chew</i>	\$0 (OTC)		
<i>gas relief 20 mg/0.3ml susp, 40 mg/0.6ml liq</i>	\$0 (OTC)		
<i>gas relief drops infants 20 mg/0.3ml susp</i>	\$0 (OTC)		
<i>gas relief extra strength 125 mg tab chew</i>	\$0 (OTC)		
<i>gas relief infants 20 mg/0.3ml susp</i>	\$0 (OTC)		
<i>gas relief maximum strength 125 mg tab chew</i>	\$0 (OTC)		
<i>gas relief ultra strength 180 mg cap</i>	\$0 (OTC)		
GAS-X EXTRA STRENGTH 62.5 mg Oral Strip	\$0 (OTC)		
<i>gnp anti-gas 180 mg cap</i>	\$0 (OTC)		
<i>gnp gas relief 80 mg tab chew</i>	\$0 (OTC)		
<i>gnp gas relief extra strength 125 mg tab chew</i>	\$0 (OTC)		
<i>gnp infant gas relief 20 mg/0.3ml susp</i>	\$0 (OTC)		
<i>gnp infants gas relief 20 mg/0.3ml susp</i>	\$0 (OTC)		
<i>goodsense gas relief 125 mg tab chew</i>	\$0 (OTC)		
<i>hm gas relief 80 mg tab chew</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>hm gas relief infants drops 20 mg/0.3ml susp</i>	\$0 (OTC)		
<i>infants gas relief 20 mg/0.3ml susp</i>	\$0 (OTC)		
<i>infants simethicone 20 mg/0.3ml susp</i>	\$0 (OTC)		
<i>little remedies for tummys 20 mg/0.3ml susp</i>	\$0 (OTC)		
<i>little remedies gas relief 20 mg/0.3ml susp</i>	\$0 (OTC)		
<i>little tummys gas relief 20 mg/0.3ml susp</i>	\$0 (OTC)		
<i>mi-acid gas relief 80 mg tab chew</i>	\$0 (OTC)		
<i>mytab gas 80 mg tab chew</i>	\$0 (OTC)		
<i>mytab gas maximum strength 125 mg tab chew</i>	\$0 (OTC)		
<i>px gas relief infants 20 mg/0.3ml susp</i>	\$0 (OTC)		
<i>px gas relief ultra strength 180 mg cap</i>	\$0 (OTC)		
<i>qc anti-gas 180 mg cap</i>	\$0 (OTC)		
<i>qc gas relief extra strength 125 mg tab chew</i>	\$0 (OTC)		
<i>ra gas relief 80 mg tab chew</i>	\$0 (OTC)		
<i>ra gas relief extra strength 125 mg tab chew</i>	\$0 (OTC)		
<i>simethicone 125 mg tab chew, 180 mg cap, 80 mg tab chew</i>	\$0 (OTC)		
<i>simethicone 40 mg/0.6ml susp</i>	\$0 (OTC)		
<i>sm gas relief 125 mg tab chew, 80 mg tab chew</i>	\$0 (OTC)		
<i>sm gas relief antiflatuent 180 mg cap</i>	\$0 (OTC)		
<i>sm gas relief infants 20 mg/0.3ml susp</i>	\$0 (OTC)		
<i>sm gas relief infants drops 40 mg/0.6ml susp</i>	\$0 (OTC)		
<i>tgt gas relief extra strength 125 mg tab chew</i>	\$0 (OTC)		
<i>tgt gas relief infants 20 mg/0.3ml liq</i>	\$0 (OTC)		
Digestive Enzyme			
<i>cvs dairy relief 9000 unit tab chew</i>	\$0 (OTC)		
<i>cvs dairy relief ex st 4500 unit tab</i>	\$0 (OTC)		
<i>cvs dairy relief fast acting 9000 unit tab, 9000 unit tab chew</i>	\$0 (OTC)		
<i>cvs lactase 3000 unit tab</i>	\$0 (OTC)		
<i>dairy digest fast acting 9000 unit tab</i>	\$0 (OTC)		
<i>dairy digest ultra 9000 unit tab</i>	\$0 (OTC)		
<i>dairy digestive 9000 unit tab</i>	\$0 (OTC)		
<i>dairy relief 3000 unit tab</i>	\$0 (OTC)		
<i>eq dairy digestive fast acting 9000 unit tab, 9000 unit tab chew</i>	\$0 (OTC)		
<i>eql dairy digest fast acting 9000 unit tab</i>	\$0 (OTC)		
<i>eql dairy digestive ultra 9000 unit tab</i>	\$0 (OTC)		
<i>gnp dairy relief 3000 unit tab</i>	\$0 (OTC)		
<i>gnp fast acting dairy relief 9000 unit tab chew</i>	\$0 (OTC)		
<i>kls fast acting lactase 9000 unit tab</i>	\$0 (OTC)		
<i>lac-dose 3000 unit tab</i>	\$0 (OTC)		
<i>lactase 3000 unit tab</i>	\$0 (OTC)		
<i>lactase enzyme 3000 unit tab</i>	\$0 (OTC)		
<i>lactase fast acting 9000 unit tab</i>	\$0 (OTC)		
<i>lactose fast acting relief 9000 unit tab, 9000 unit tab chew</i>	\$0 (OTC)		
<i>px dairy digestive 9000 unit tab</i>	\$0 (OTC)		
<i>quick action dairy relief 9000 unit tab chew</i>	\$0 (OTC)		
<i>ra dairy aid 3000 unit tab</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>ra dairy relief fast acting 9000 unit tab chew</i>	\$0 (OTC)		
<i>sb dairy relief 9000 unit tab</i>	\$0 (OTC)		
<i>sm ultra dairy digestive 9000 unit tab</i>	\$0 (OTC)		
<i>tgt dairy digestive aid 9000 unit tab</i>	\$0 (OTC)		
GASTROINTESTINAL AGENTS			
Histamine2 (h2) Receptor Antagonists			
<i>acid controller 10 mg tab</i>	\$0 (OTC)		
<i>acid controller max st 20 mg tab</i>	\$0 (OTC)		
<i>acid controller original str 10 mg tab</i>	\$0 (OTC)		
<i>acid reducer 10 mg tab</i>	\$0 (OTC)		
<i>acid reducer maximum strength 20 mg tab</i>	\$0 (OTC)		
<i>cvs acid controller 10 mg tab</i>	\$0 (OTC)		
<i>cvs acid controller max st 20 mg tab</i>	\$0 (OTC)		
<i>cvs acid reducer 10 mg tab</i>	\$0 (OTC)		
<i>eq acid reducer 10 mg tab</i>	\$0 (OTC)		
<i>eq acid reducer max st 20 mg tab</i>	\$0 (OTC)		
<i>eq famotidine max st 20 mg tab</i>	\$0 (OTC)		
<i>eq heartburn prevention 10 mg tab, 20 mg tab</i>	\$0 (OTC)		
<i>famotidine 10 mg tab, 20 mg tab</i>	\$0 (OTC)		
<i>famotidine maximum strength 20 mg tab</i>	\$0 (OTC)		
<i>gnp acid reducer 10 mg tab</i>	\$0 (OTC)		
<i>gnp acid reducer max st 20 mg tab</i>	\$0 (OTC)		
<i>heartburn relief 10 mg tab</i>	\$0 (OTC)		
<i>heartburn relief max st 20 mg tab</i>	\$0 (OTC)		
<i>hm famotidine 10 mg tab, 20 mg tab</i>	\$0 (OTC)		
<i>kls acid controller max st 20 mg tab</i>	\$0 (OTC)		
<i>px acid reducer 10 mg tab</i>	\$0 (OTC)		
<i>px acid reducer max st 20 mg tab</i>	\$0 (OTC)		
<i>qc acid controller 10 mg tab</i>	\$0 (OTC)		
<i>qc acid controller max st 20 mg tab</i>	\$0 (OTC)		
<i>ra acid reducer 10 mg tab</i>	\$0 (OTC)		
<i>ra acid reducer max st 20 mg tab</i>	\$0 (OTC)		
<i>sm acid reducer 10 mg tab</i>	\$0 (OTC)		
<i>sm acid reducer max st 20 mg tab</i>	\$0 (OTC)		
<i>tgt acid reducer 10 mg tab</i>	\$0 (OTC)		
<i>th famotidine 10 10 mg tab</i>	\$0 (OTC)		
Proton Pump Inhibitors			
<i>acid reducer 20.6 (20 Base) mg cap dr</i>	\$0 (OTC)		
<i>cvs omeprazole 20.6 (20 Base) mg cap dr</i>	\$0 (OTC)		
<i>eq omeprazole magnesium 20 mg cap dr</i>	\$0 (OTC)		
<i>hm esomeprazole magnesium dr 20 mg cap dr</i>	\$0 (OTC)		
<i>kp omeprazole magnesium 20.6 (20 Base) mg cap dr</i>	\$0 (OTC)		
<i>omeprazole magnesium 20 mg tab dr, 20.6 (20 Base) mg cap dr</i>	\$0 (OTC)		
<i>prilosec otc 20 mg tab dr</i>	\$0 (OTC)		
<i>PRILOSEC OTC 20 mg tab dr</i>	\$0 (OTC)		
<i>qc esomeprazole magnesium 20 mg cap dr</i>	\$0 (OTC)		
<i>qc omeprazole magnesium 20.6 (20 Base) mg cap dr</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>sm esomeprazole magnesium 20 mg cap dr</i>	\$0 (OTC)		
HEMATOPOIETIC AGENTS			
Folic Acid/folates			
<i>cvs folic acid 800 mcg tab</i>	\$0 (OTC)		
<i>eql folic acid 400 mcg tab</i>	\$0 (OTC)		
<i>folate 400 mcg tab</i>	\$0 (OTC)		
<i>folic acid 1 mg tab, 20 mg cap, 400 mcg tab, 800 mcg tab</i>	\$0 (OTC)		
<i>gnp folic acid 400 mcg tab</i>	\$0 (OTC)		
<i>hm folic acid 400 mcg tab</i>	\$0 (OTC)		
<i>kp folic acid 1 mg tab, 800 mcg tab</i>	\$0 (OTC)		
<i>ra folic acid 400 mcg tab, 800 mcg tab</i>	\$0 (OTC)		
<i>sm folic acid 400 mcg tab</i>	\$0 (OTC)		
Iron			
<i>bprotected pedia iron 75 (15 Fe) mg/ml soln</i>	\$0 (OTC)		
<i>cvs iron 240 (27 Fe) mg tab, 325 (65 Fe) mg tab</i>	\$0 (OTC)		
<i>eq slow-release iron 45 mg tab er</i>	\$0 (OTC)		
<i>eql iron supplement therapy 325 mg tab</i>	\$0 (OTC)		
<i>eql slow release iron 160 (50 Fe) mg tab er</i>	\$0 (OTC)		
<i>EZFE 200 434.8 (200 Fe) mg cap</i>	\$0 (OTC)		
<i>fer-iron 75 (15 Fe) mg/ml soln</i>	\$0 (OTC)		
<i>ferate 240 (27 Fe) mg tab</i>	\$0 (OTC)		
<i>fergon 240 (27 Fe) mg tab</i>	\$0 (OTC)		
<i>FERGON 240 (27 Fe) mg tab</i>	\$0 (OTC)		
<i>ferosul 325 (65 Fe) mg tab</i>	\$0 (OTC)		
<i>ferretts 325 (106 Fe) mg tab</i>	\$0 (OTC)		
<i>ferrex 150 150 mg cap</i>	\$0 (OTC)		QL(60 EA per 30 days)
<i>ferric x-150 150 mg cap</i>	\$0 (OTC)		QL(60 EA per 30 days)
<i>ferrocite 324 mg tab</i>	\$0 (OTC)		QL(60 EA per 30 days)
<i>ferrous fumarate 324 (106 Fe) mg tab</i>	\$0 (OTC)		QL(60 EA per 30 days)
<i>ferrous gluconate 225 (27 Fe) mg tab, 240 (27 Fe) mg tab, 324 (38 Fe) mg tab</i>	\$0 (OTC)		
<i>ferrous sulfate 324 (65 Fe) mg tab dr, 324 mg tab dr, 325 (65 Fe) mg tab, 325 (65 Fe) mg tab dr</i>	\$0 (OTC)		
<i>ferrous sulfate 220 (44 Fe) mg/5ml liq, 220 (44 Fe) mg/5ml oral elix, 220 (44 Fe) mg/5ml soln, 75 (15 Fe) mg/ml soln</i>	\$0 (OTC)		
<i>ferrous sulfate iron 200 (65 Fe) mg tab</i>	\$0 (OTC)		
<i>ferrousul 325 (65 Fe) mg tab</i>	\$0 (OTC)		
<i>gnp iron 200 (65 Fe) mg tab, 45 mg tab er</i>	\$0 (OTC)		
<i>HEMOCYTE 324 (106 Fe) mg tab</i>	\$0 (OTC)		QL(60 EA per 30 days)
<i>hm iron 200 (65 Fe) mg tab</i>	\$0 (OTC)		
<i>iron 142 (45 Fe) mg tab er, 240 (27 Fe) mg tab, 325 (65 Fe) mg tab</i>	\$0 (OTC)		
<i>iron 27 240 (27 Fe) mg tab</i>	\$0 (OTC)		
<i>iron high-potency 325 mg tab</i>	\$0 (OTC)		
<i>iron supplement 325 (65 Fe) mg tab</i>	\$0 (OTC)		
<i>iron supplement childrens 75 (15 Fe) mg/ml soln</i>	\$0 (OTC)		
<i>kp ferrous sulfate 325 (65 Fe) mg tab</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>myferon 150 150 mg cap</i>	\$0 (OTC)		QL(60 EA per 30 days)
<i>poly-iron 150 150 mg cap</i>	\$0 (OTC)		QL(60 EA per 30 days)
<i>polysaccharide iron complex 150 mg cap</i>	\$0 (OTC)		QL(60 EA per 30 days)
<i>polysaccharide-iron complex 150 mg cap</i>	\$0 (OTC)		QL(60 EA per 30 days)
<i>ra iron 325 (65 Fe) mg tab</i>	\$0 (OTC)		
<i>ra slow release iron 45 mg tab er, 47.5 mg tab er</i>	\$0 (OTC)		
<i>slow iron 160 (50 Fe) mg tab er</i>	\$0 (OTC)		
<i>slow release iron 160 (50 Fe) mg tab er, 45 mg tab er, 47.5 mg tab er</i>	\$0 (OTC)		
<i>sm iron 325 (65 Fe) mg tab</i>	\$0 (OTC)		
<i>sm iron slow release 160 (50 Fe) mg tab er</i>	\$0 (OTC)		
<i>sm slow release iron 45 mg tab er</i>	\$0 (OTC)		
<i>th iron 325 (65 Fe) mg tab</i>	\$0 (OTC)		
LAXATIVES			
Bulk Laxatives			
<i>calcium polycarbophil 625 mg tab</i>	\$0 (OTC)		
<i>citrucel oral pwdr</i>	\$0 (OTC)		
<i>CITRUCEL oral pwdr</i>	\$0 (OTC)		
<i>cvs daily fiber 0.52 gm cap</i>	\$0 (OTC)		
<i>cvs daily fiber 51.7 % oral pwdr</i>	\$0 (OTC)		
<i>cvs fiber 0.52 gm cap</i>	\$0 (OTC)		
<i>cvs fiber laxative 625 mg tab</i>	\$0 (OTC)		
<i>cvs natural daily fiber 43 % oral pwdr, 51.7 % oral pwdr, 58.6 % oral pwdr</i>	\$0 (OTC)		
<i>cvs soluble fiber therapy 500 mg tab</i>	\$0 (OTC)		
<i>eq daily fiber 400 mg cap</i>	\$0 (OTC)		
<i>eq daily fiber 25 % oral pwdr</i>	\$0 (OTC)		
<i>eq fiber therapy 0.52 gm cap, 500 mg tab, 625 mg tab</i>	\$0 (OTC)		
<i>eq fiber therapy 48.57 % oral pwdr</i>	\$0 (OTC)		
<i>eq natural fiber laxative 28.3 % oral pwdr, 58.6 % oral pwdr</i>	\$0 (OTC)		
<i>eq fiber laxative 625 mg tab</i>	\$0 (OTC)		
<i>eq fiber therapy 500 mg tab</i>	\$0 (OTC)		
<i>eq fiber therapy 28.3 % oral pwdr, 43 % oral pwdr</i>	\$0 (OTC)		
<i>eq smooth texture fiber 51.7 % oral pwdr</i>	\$0 (OTC)		
<i>fiber 0.52 gm cap, 625 mg tab</i>	\$0 (OTC)		
<i>fiber laxative 0.52 gm cap, 625 mg tab</i>	\$0 (OTC)		
<i>fiber therapy 500 mg tab</i>	\$0 (OTC)		
<i>fiber therapy 58.6 % oral pwdr</i>	\$0 (OTC)		
<i>fiber-lax 625 mg tab</i>	\$0 (OTC)		
<i>geri-mucil 25 % oral pwdr, 51.7 % oral pwdr, 68 % oral pwdr</i>	\$0 (OTC)		
<i>gnp fiber 0.36 gm cap</i>	\$0 (OTC)		
<i>gnp fiber 43 % oral pwdr</i>	\$0 (OTC)		
<i>gnp fiber therapy 500 mg tab</i>	\$0 (OTC)		
<i>gnp fiber-caps 625 mg tab</i>	\$0 (OTC)		
<i>gnp natural fiber 0.52 gm cap</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>gnp natural fiber 28.3 % oral pwdr, 48.57 % oral pwdr</i>	\$0 (OTC)		
<i>goodsense natural fiber 28.3 % oral pwdr</i>	\$0 (OTC)		
<i>hm fiber 0.52 gm cap, 500 mg tab</i>	\$0 (OTC)		
<i>hm fiber 28.3 % oral pwdr, 30.9 % oral pwdr, 48.57 % oral pwdr, 58.6 % oral pwdr</i>	\$0 (OTC)		
<i>kls fiber-tabs 625 mg tab</i>	\$0 (OTC)		
<i>kls natural psyllium fiber 58.6 % oral pwdr</i>	\$0 (OTC)		
<i>konsyl 520 mg cap</i>	\$0 (OTC)		
<i>konsyl 30.9 % oral pwdr</i>	\$0 (OTC)		
<i>konsyl daily fiber 28.3 % oral pwdr</i>	\$0 (OTC)		
<i>konsyl fiber 625 mg tab</i>	\$0 (OTC)		
<i>metamucil 28.3 % oral pwdr, 30.9 % oral pwdr</i>	\$0 (OTC)		
<i>metamucil multihealth fiber 58.6 % oral pwdr</i>	\$0 (OTC)		
METAMUCIL MULTIHEALTH FIBER 63 % oral pwdr	\$0 (OTC)		
<i>metamucil smooth texture 28.3 % oral pwdr, 58.6 % oral pwdr</i>	\$0 (OTC)		
<i>natural fiber 28.3 % oral pwdr</i>	\$0 (OTC)		
<i>natural fiber laxative 28.3 % oral pwdr, 30.9 % oral pwdr, 48.57 % oral pwdr, 58.6 % oral pwdr, 68 % oral pwdr</i>	\$0 (OTC)		
<i>natural fiber therapy 28.3 % oral pwdr, 48.57 % oral pwdr</i>	\$0 (OTC)		
<i>natural psyllium seed 100 % oral pwdr</i>	\$0 (OTC)		
<i>px fiber 0.52 gm cap, 625 mg tab</i>	\$0 (OTC)		
<i>qc fiber laxative 0.52 gm cap</i>	\$0 (OTC)		
<i>qc natural vegetable 95 % oral pwdr</i>	\$0 (OTC)		
<i>qc psyllium fiber 43 % oral pwdr</i>	\$0 (OTC)		
<i>ra fiber 0.52 gm cap</i>	\$0 (OTC)		
<i>ra fiber 58.6 % oral pwdr</i>	\$0 (OTC)		
<i>ra fiber laxative 48.57 % oral pwdr</i>	\$0 (OTC)		
<i>ra fiber supplement 28.3 % oral pwdr</i>	\$0 (OTC)		
<i>ra fiber therapy 0.52 gm cap</i>	\$0 (OTC)		
<i>ra multihealth fiber 43 % oral pwdr, 58.6 % oral pwdr</i>	\$0 (OTC)		
<i>ra soluble fiber 500 mg tab</i>	\$0 (OTC)		
<i>reguloid 0.52 gm cap, 400 mg cap</i>	\$0 (OTC)		
<i>reguloid 43 % oral pwdr, 48.57 % oral pwdr, 58.6 % oral pwdr</i>	\$0 (OTC)		
<i>sm fiber 625 mg tab</i>	\$0 (OTC)		
<i>sm fiber 28.3 % oral pwdr, 43 % oral pwdr, 48.57 % oral pwdr, 58.6 % oral pwdr</i>	\$0 (OTC)		
<i>sm fiber laxative 0.52 gm cap, 500 mg tab, 625 mg tab</i>	\$0 (OTC)		
<i>sm fiber powder 25 % oral pwdr</i>	\$0 (OTC)		
<i>soluble fiber therapy oral pwdr</i>	\$0 (OTC)		
<i>tgt fiber therapy 28.3 % oral pwdr, 58.6 % oral pwdr</i>	\$0 (OTC)		
<i>tgt psyllium fiber 520 mg cap</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>th fiber 0.52 gm cap</i>	\$0 (OTC)		
<i>th natural fiber 48.57 % oral pwdr</i>	\$0 (OTC)		
UNIFIBER oral pwdr	\$0 (OTC)		
<i>wal-mucil 0.52 gm cap</i>	\$0 (OTC)		
<i>wal-mucil 28.3 % oral pwdr, 43 % oral pwdr, 48.57 % oral pwdr, 58.6 % oral pwdr</i>	\$0 (OTC)		
Laxatives - Miscellaneous			
<i>alophen 5 mg tab dr</i>	\$0 (OTC)		
<i>bisacodyl 10 mg rect supp</i>	\$0 (OTC)		
<i>bisacodyl ec 5 mg tab dr</i>	\$0 (OTC)		
<i>bisacodyl laxative 10 mg rect supp, 5 mg tab dr</i>	\$0 (OTC)		
<i>biscolax 10 mg rect supp</i>	\$0 (OTC)		
<i>chocolated laxative 15 mg tab chew</i>	\$0 (OTC)		
<i>citrate of magnesia soln, 1.745 gm/30ml soln</i>	\$0 (OTC)		
<i>clearlax 17 gm/scoop oral pwdr</i>	\$0 (OTC)		QL(527 GM per 30 days)
<i>complete ready-to-use enema 7-19 gm/118ml rect enema</i>	\$0 (OTC)		
<i>cvs bisacodyl 10 mg rect supp, 5 mg tab dr</i>	\$0 (OTC)		
<i>cvs c-lax laxative 5 mg tab dr</i>	\$0 (OTC)		
<i>cvs chocolate laxative pieces 15 mg tab chew</i>	\$0 (OTC)		
<i>cvs citrate of magnesia soln</i>	\$0 (OTC)		
<i>cvs enema disposable 19-7 gm/118ml rect enema, 7-19 gm/118ml rect enema</i>	\$0 (OTC)		
<i>cvs enema ready-to-use 19-7 gm/118ml rect enema, 7-19 gm/118ml rect enema</i>	\$0 (OTC)		
<i>cvs gentle laxative 10 mg rect supp, 5 mg tab dr</i>	\$0 (OTC)		
<i>cvs gentle laxative womens 5 mg tab dr</i>	\$0 (OTC)		
<i>cvs glycerin adult 2 gm rect supp, 2.1 gm rect supp</i>	\$0 (OTC)		
<i>cvs glycerin child 1 gm rect supp</i>	\$0 (OTC)		
<i>cvs laxative dietary supplemnt 500 mg tab</i>	\$0 (OTC)		
<i>cvs laxative pills 25 mg tab</i>	\$0 (OTC)		
<i>cvs magnesium citrate 1.745 gm/30ml soln</i>	\$0 (OTC)		
<i>cvs milk of magnesia 1200 mg/15ml susp, 400 mg/5ml susp</i>	\$0 (OTC)		
<i>cvs mineral oil oral oil</i>	\$0 (OTC)		
<i>cvs purelax 17 gm pckt</i>	\$0 (OTC)		
<i>cvs purelax 17 gm/scoop oral pwdr</i>	\$0 (OTC)		QL(527 GM per 30 days)
<i>cvs senna 8.6 mg tab</i>	\$0 (OTC)		
<i>cvs senna plus 8.6-50 mg tab</i>	\$0 (OTC)		
<i>cvs senna-extra 17.2 mg tab</i>	\$0 (OTC)		
<i>cvs stool softener 8.6-50 mg tab</i>	\$0 (OTC)		
<i>cvs stool softener/laxative 8.6-50 mg tab</i>	\$0 (OTC)		
<i>doc-q-lax 8.6-50 mg tab</i>	\$0 (OTC)		
<i>docuzen 8.6-50 mg tab</i>	\$0 (OTC)		
<i>dok plus 50-8.6 mg tab</i>	\$0 (OTC)		
<i>ducodyl 5 mg tab dr</i>	\$0 (OTC)		
<i>easy-lax plus 8.6-50 mg tab</i>	\$0 (OTC)		
<i>enema rect enema, 7-19 gm/118ml rect enema</i>	\$0 (OTC)		
<i>enema disposable rect enema, 19-7 gm/118ml</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>rect enema</i>			
<i>enema pediatric 3.5-9.5 gm/59ml rect enema, 9.5-3.5 gm/59ml rect enema</i>	\$0 (OTC)		
<i>enema ready-to-use 19-7 gm/118ml rect enema, 7-19 gm/118ml rect enema</i>	\$0 (OTC)		
<i>eq clearlax 17 gm/scoop oral pwdr</i>	\$0 (OTC)		QL(527 GM per 30 days)
<i>eq enema 19-7 gm/118ml rect enema</i>	\$0 (OTC)		
<i>eq gentle laxative 5 mg tab dr</i>	\$0 (OTC)		
<i>eq laxative maximum strength 25 mg tab</i>	\$0 (OTC)		
<i>eq magnesium citrate 1.745 gm/30ml soln</i>	\$0 (OTC)		
<i>eq milk of magnesia 1200 mg/15ml susp</i>	\$0 (OTC)		
<i>eq mineral oil oral oil</i>	\$0 (OTC)		
<i>eq natural laxative 8.6 mg tab</i>	\$0 (OTC)		
<i>eq natural vegetable laxative 8.6 mg tab</i>	\$0 (OTC)		
<i>eq senna-s 8.6-50 mg tab</i>	\$0 (OTC)		
<i>eq stool softener/laxative 8.6-50 mg tab</i>	\$0 (OTC)		
<i>eq vegetable laxative 8.6 mg tab</i>	\$0 (OTC)		
<i>eq womans laxative 5 mg tab dr</i>	\$0 (OTC)		
<i>eql clearlax 17 gm/scoop oral pwdr</i>	\$0 (OTC)		QL(527 GM per 30 days)
<i>eql gentle laxative 5 mg tab dr</i>	\$0 (OTC)		
<i>eql laxative 10 mg rect supp, 15 mg tab chew, 25 mg tab, 5 mg tab dr</i>	\$0 (OTC)		
<i>eql laxative maximum strength 25 mg tab</i>	\$0 (OTC)		
<i>eql magnesium citrate 1.745 gm/30ml soln</i>	\$0 (OTC)		
<i>eql milk of magnesia 1200 mg/15ml susp, 400 mg/5ml susp</i>	\$0 (OTC)		
<i>eql ready-to-use enema 19-7 gm/118ml rect enema</i>	\$0 (OTC)		
<i>eql senna laxative 8.6 mg tab</i>	\$0 (OTC)		
<i>eql senna-s 8.6-50 mg tab</i>	\$0 (OTC)		
<i>eql stool softener/stimulant 8.6-50 mg tab</i>	\$0 (OTC)		
<i>eql womans laxative 5 mg tab dr</i>	\$0 (OTC)		
<i>evac-u-gen 8.6 mg tab</i>	\$0 (OTC)		
<i>fleet glycerin (adult) 2 gm rect supp</i>	\$0 (OTC)		
<i>fleet laxative 5 mg tab dr</i>	\$0 (OTC)		
FLEET LIQUID GLYCERIN SUPP 5.4 gm/dose rect enema	\$0 (OTC)		
FLEET MINI ENEMA 10 mg/30ml rect enema	\$0 (OTC)		
<i>gavilax 17 gm/scoop oral pwdr</i>	\$0 (OTC)		QL(527 GM per 30 days)
<i>gentle laxative 10 mg rect supp, 5 mg tab dr</i>	\$0 (OTC)		
<i>gentlelax 17 gm/scoop oral pwdr</i>	\$0 (OTC)		QL(527 GM per 30 days)
<i>geri-kot 8.6 mg tab</i>	\$0 (OTC)		
<i>glycerin (adult) 2 gm rect supp, 2.1 gm rect supp, 80.7 % rect supp</i>	\$0 (OTC)		
<i>glycerin (child) 1.2 gm rect supp</i>	\$0 (OTC)		
<i>glycerin (infant) 80.7 % rect supp</i>	\$0 (OTC)		
<i>glycerin (infants & children) 1 gm rect supp, 1.2 gm rect supp</i>	\$0 (OTC)		
<i>glycerin (pediatric) 1 gm rect supp</i>	\$0 (OTC)		
<i>glycerin adult 2 gm rect supp</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>glycerin childrens 1 gm rect supp</i>	\$0 (OTC)		
<i>glycolax 17 gm/scoop oral pwdr</i>	\$0 (OTC)		QL(527 GM per 30 days)
<i>gnp bisa-lax 5 mg tab dr</i>	\$0 (OTC)		
<i>gnp clearlax 17 gm pckt</i>	\$0 (OTC)		
<i>gnp clearlax 17 gm/scoop oral pwdr</i>	\$0 (OTC)		QL(527 GM per 30 days)
<i>gnp enema rect enema, 7-19 gm/118ml rect enema</i>	\$0 (OTC)		
<i>gnp gentle laxative 10 mg rect supp, 5 mg tab dr</i>	\$0 (OTC)		
<i>gnp glycerin (adult) 2.1 gm rect supp</i>	\$0 (OTC)		
<i>gnp glycerin child 1.2 gm rect supp</i>	\$0 (OTC)		
<i>gnp laxative 5 mg tab dr</i>	\$0 (OTC)		
<i>gnp laxative pills 25 mg tab</i>	\$0 (OTC)		
<i>gnp magnesium citrate 1.745 gm/30ml soln</i>	\$0 (OTC)		
<i>gnp milk of magnesia 1200 mg/15ml susp</i>	\$0 (OTC)		
<i>gnp mineral oil oral oil</i>	\$0 (OTC)		
<i>gnp mineral oil heavy oral oil</i>	\$0 (OTC)		
<i>gnp senna lax 8.6 mg tab</i>	\$0 (OTC)		
<i>gnp senna plus 8.6-50 mg tab</i>	\$0 (OTC)		
<i>gnp senna-lax 8.6 mg tab</i>	\$0 (OTC)		
<i>gnp stool softener/laxative 8.6-50 mg tab</i>	\$0 (OTC)		
<i>gnp womens gentle laxative 5 mg tab dr</i>	\$0 (OTC)		
<i>goodsense bisacodyl ec 5 mg tab dr</i>	\$0 (OTC)		
<i>goodsense clearlax 17 gm/scoop oral pwdr</i>	\$0 (OTC)		QL(527 GM per 30 days)
<i>goodsense magnesium citrate 1.745 gm/30ml soln</i>	\$0 (OTC)		
<i>goodsense mineral oil oral oil</i>	\$0 (OTC)		
<i>goodsense senna laxative 8.6 mg tab</i>	\$0 (OTC)		
<i>goodsense stimulant laxative 8.6-50 mg tab</i>	\$0 (OTC)		
<i>healthylax 17 gm pckt</i>	\$0 (OTC)		
<i>hm clearlax 17 gm/scoop oral pwdr</i>	\$0 (OTC)		QL(527 GM per 30 days)
<i>hm enema 19-7 gm/118ml rect enema, 7-19 gm/118ml rect enema</i>	\$0 (OTC)		
<i>hm laxative 5 mg tab dr</i>	\$0 (OTC)		
<i>hm magnesium citrate 1.745 gm/30ml soln</i>	\$0 (OTC)		
<i>hm milk of magnesia 1200 mg/15ml susp</i>	\$0 (OTC)		
<i>hm mineral oil oral oil</i>	\$0 (OTC)		
<i>hm senna 8.6 mg tab</i>	\$0 (OTC)		
<i>hm senna-s 8.6-50 mg tab</i>	\$0 (OTC)		
<i>hm stool softener/laxative 8.6-50 mg tab</i>	\$0 (OTC)		
<i>kls laxaclear 17 gm/scoop oral pwdr</i>	\$0 (OTC)		QL(527 GM per 30 days)
<i>kp bisacodyl 5 mg tab dr</i>	\$0 (OTC)		
<i>kp senna 8.6 mg tab</i>	\$0 (OTC)		
<i>laxacin 8.6-50 mg tab</i>	\$0 (OTC)		
<i>laxative 10 mg rect supp, 25 mg tab, 5 mg tab dr</i>	\$0 (OTC)		
<i>laxative feminine 5 mg tab dr</i>	\$0 (OTC)		
<i>laxative max str 25 mg tab</i>	\$0 (OTC)		
<i>laxative pills 25 mg tab</i>	\$0 (OTC)		
<i>laxative polyethylene glycol 17 gm/scoop oral pwdr</i>	\$0 (OTC)		QL(527 GM per 30 days)
<i>magnesium citrate 1.745 gm/30ml soln</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>medi-laxx 8.6-50 mg cap</i>	\$0 (OTC)		
<i>milk of magnesia 1200 mg/15ml susp, 2400 mg/30ml susp, 400 mg/5ml susp, 7.75 % susp</i>	\$0 (OTC)		
<i>mineral oil oral oil, 55 % oral oil</i>	\$0 (OTC)		
<i>mineral oil heavy oil</i>	\$0 (OTC)		
<i>mineral oil light oil</i>	\$0 (OTC)		
<i>natural senna laxative 8.6 mg tab</i>	\$0 (OTC)		
<i>PEDIA-LAX 400 mg tab chew</i>	\$0 (OTC)		
<i>peg 3350 17 gm pckt</i>	\$0 (OTC)		
<i>peg 3350 17 gm/scoop oral pwdr</i>	\$0 (OTC)		QL(527 GM per 30 days)
<i>PHILLIPS MILK OF MAGNESIA 311 mg tab chew</i>	\$0 (OTC)		
<i>polyethylene glycol 3350 17 gm pckt</i>	\$0 (OTC)		
<i>polyethylene glycol 3350 17 gm/scoop oral pwdr</i>	\$0 (OTC)		QL(527 GM per 30 days)
<i>polyethylene glycol 3350-grx 17 gm/scoop oral pwdr</i>	\$0 (OTC)		QL(527 GM per 30 days)
<i>px laxative 5 mg tab dr</i>	\$0 (OTC)		
<i>px milk of magnesia 1200 mg/15ml susp</i>	\$0 (OTC)		
<i>qc enema 16-6 gm/133ml rect enema, 19-7 gm/118ml rect enema</i>	\$0 (OTC)		
<i>qc gentle laxative 10 mg rect supp</i>	\$0 (OTC)		
<i>qc laxative 25 mg tab</i>	\$0 (OTC)		
<i>qc magnesium citrate 1.745 gm/30ml soln</i>	\$0 (OTC)		
<i>qc milk of magnesia 400 mg/5ml susp</i>	\$0 (OTC)		
<i>qc mineral oil heavy oral oil</i>	\$0 (OTC)		
<i>qc natura-lax 17 gm/scoop oral pwdr</i>	\$0 (OTC)		QL(527 GM per 30 days)
<i>qc natural vegetable laxative 8.6 mg tab</i>	\$0 (OTC)		
<i>qc stool softener pls laxative 8.6-50 mg tab</i>	\$0 (OTC)		
<i>ra enema 19-7 gm/118ml rect enema, 7-19 gm/118ml rect enema</i>	\$0 (OTC)		
<i>ra fast relief laxative 10 mg rect supp</i>	\$0 (OTC)		
<i>ra glycerin adult 80.7 % rect supp</i>	\$0 (OTC)		
<i>ra glycerin child 80.7 % rect supp</i>	\$0 (OTC)		
<i>ra laxative 25 mg tab, 5 mg tab dr</i>	\$0 (OTC)		
<i>ra laxative 17 gm/scoop oral pwdr</i>	\$0 (OTC)		QL(527 GM per 30 days)
<i>ra laxative & stool softener 8.6-50 mg tab</i>	\$0 (OTC)		
<i>ra laxative extra strength 17.2 mg tab</i>	\$0 (OTC)		
<i>ra laxative maximum strength 25 mg tab</i>	\$0 (OTC)		
<i>ra magnesium citrate 1.745 gm/30ml soln</i>	\$0 (OTC)		
<i>ra milk of magnesia 400 mg/5ml susp</i>	\$0 (OTC)		
<i>ra mineral oil oral oil</i>	\$0 (OTC)		
<i>ra p col-rite 8.6-50 mg tab</i>	\$0 (OTC)		
<i>ra senna 8.6 mg tab</i>	\$0 (OTC)		
<i>ra senna plus 8.6-50 mg tab</i>	\$0 (OTC)		
<i>ra womens laxative 5 mg tab dr</i>	\$0 (OTC)		
<i>sb bisacodyl laxative ec 5 mg tab dr</i>	\$0 (OTC)		
<i>sb gentle laxative womens 5 mg tab dr</i>	\$0 (OTC)		
<i>sb milk of magnesia 400 mg/5ml susp</i>	\$0 (OTC)		
<i>sb senna-lax 8.6 mg tab</i>	\$0 (OTC)		
<i>sen-o-tabs 187 mg tab</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>senexon 8.6 mg tab</i>	\$0 (OTC)		
<i>senexon 8.8 mg/5ml liq</i>	\$0 (OTC)		
<i>senexon-s 8.6-50 mg tab</i>	\$0 (OTC)		
<i>senna 8.6 mg tab</i>	\$0 (OTC)		
<i>senna 176 mg/5ml syr, 26.4 mg/15ml syr, 8.8 mg/5ml liq, 8.8 mg/5ml syr</i>	\$0 (OTC)		
<i>senna lax 8.6 mg tab</i>	\$0 (OTC)		
<i>senna laxative 8.6 mg tab</i>	\$0 (OTC)		
<i>senna plus 8.6-50 mg tab</i>	\$0 (OTC)		
<i>senna s 8.6-50 mg tab</i>	\$0 (OTC)		
<i>senna-docusate sodium 8.6-50 mg tab</i>	\$0 (OTC)		
<i>senna-grx 8.8 mg/5ml syr</i>	\$0 (OTC)		
<i>senna-lax 8.6 mg tab</i>	\$0 (OTC)		
<i>senna-plus 8.6-50 mg tab</i>	\$0 (OTC)		
<i>senna-s 8.6-50 mg tab</i>	\$0 (OTC)		
<i>senna-tabs 8.6 mg tab</i>	\$0 (OTC)		
<i>senna-time 8.6 mg tab</i>	\$0 (OTC)		
<i>senna-time s 8.6-50 mg tab</i>	\$0 (OTC)		
<i>sennalax-s 8.6-50 mg tab</i>	\$0 (OTC)		
<i>senno 8.6 mg tab</i>	\$0 (OTC)		
<i>sennosides 8.6 mg tab</i>	\$0 (OTC)		
<i>sennosides-docusate sodium 8.6-50 mg tab</i>	\$0 (OTC)		
<i>sm clearlax 17 gm/scoop oral pwdr</i>	\$0 (OTC)		QL(527 GM per 30 days)
<i>sm enema 19-7 gm/118ml rect enema, 7-19 gm/118ml rect enema, 9.5-3.5 gm/59ml rect enema</i>	\$0 (OTC)		
<i>sm gentle laxative 5 mg tab dr</i>	\$0 (OTC)		
<i>sm glycerin (adult) 80.7 % rect supp</i>	\$0 (OTC)		
<i>sm glycerin pediatric 1.2 gm rect supp, 80.7 % rect supp</i>	\$0 (OTC)		
<i>sm laxative 10 mg rect supp, 5 mg tab dr</i>	\$0 (OTC)		
<i>sm laxative maximum strength 25 mg tab</i>	\$0 (OTC)		
<i>sm magnesium citrate 1.745 gm/30ml soln</i>	\$0 (OTC)		
<i>sm milk of magnesia 1200 mg/15ml susp, 400 mg/5ml susp</i>	\$0 (OTC)		
<i>sm mineral oil oral oil</i>	\$0 (OTC)		
<i>sm natural laxative/stool soft 8.6-50 mg tab</i>	\$0 (OTC)		
<i>sm senna laxative 8.6 mg tab</i>	\$0 (OTC)		
<i>sm senna laxative max st 25 mg tab</i>	\$0 (OTC)		
<i>sm senna-s 8.6-50 mg tab</i>	\$0 (OTC)		
<i>sm stool softener 8.6-50 mg tab</i>	\$0 (OTC)		
<i>sm stool softener/laxative 8.6-50 mg tab</i>	\$0 (OTC)		
<i>sm womans laxative 5 mg tab dr</i>	\$0 (OTC)		
<i>smooth lax 17 gm pckt</i>	\$0 (OTC)		
<i>smooth lax 17 gm/scoop oral pwdr</i>	\$0 (OTC)		QL(527 EA per 30 days)
<i>smooth lax 17 gm/scoop oral pwdr</i>	\$0 (OTC)		QL(527 GM per 30 days)
<i>sod phos mono-sod phos dibasic 19-7 gm/118ml rect enema</i>	\$0 (OTC)		
<i>sorbitol 70 % rect soln, 70 % soln</i>	\$0 (OTC)		
<i>stimulant laxative 5 mg tab dr, 8.6-50 mg tab</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>stool softener plus laxative 8.6-50 mg tab</i>	\$0 (OTC)		
<i>stool softener/laxative 50-8.6 mg tab</i>	\$0 (OTC)		
<i>sw clearlax 17 gm/scoop oral pwdr</i>	\$0 (OTC)		QL(527 GM per 30 days)
<i>tgt gentle laxative 5 mg tab dr</i>	\$0 (OTC)		
<i>tgt laxative pills max st 25 mg tab</i>	\$0 (OTC)		
<i>tgt natural laxative pills 25 mg tab</i>	\$0 (OTC)		
<i>tgt powderlax 17 gm/scoop oral pwdr</i>	\$0 (OTC)		QL(527 GM per 30 days)
<i>tgt saline laxative rect enema</i>	\$0 (OTC)		
<i>tgt senna lax/stool softener 8.6-50 mg tab</i>	\$0 (OTC)		
<i>tgt senna laxative 8.6 mg tab</i>	\$0 (OTC)		
<i>tgt stool softener & stimulant 8.6-50 mg tab</i>	\$0 (OTC)		
<i>tgt womens laxative 5 mg tab dr</i>	\$0 (OTC)		
<i>th gentle laxative 5 mg tab dr</i>	\$0 (OTC)		
<i>th stool softener/laxative 8.6-50 mg tab</i>	\$0 (OTC)		
<i>th womans laxative 5 mg tab dr</i>	\$0 (OTC)		
<i>the magic bullet 10 mg rect supp</i>	\$0 (OTC)		
<i>vegetable lax+stool softener 8.6-50 mg tab</i>	\$0 (OTC)		
<i>womans laxative 5 mg tab dr</i>	\$0 (OTC)		
<i>womens laxative 5 mg tab dr</i>	\$0 (OTC)		
Surfactant Laxatives			
<i>cvs stool softener 100 mg cap, 250 mg cap, 50 mg cap</i>	\$0 (OTC)		
<i>dioctyl 60 mg/15ml syr</i>	\$0 (OTC)		
<i>dioctyl s.s. 100 mg cap</i>	\$0 (OTC)		
<i>docqlace 100 mg cap</i>	\$0 (OTC)		
<i>docu 50 mg/5ml liq</i>	\$0 (OTC)		
<i>docu soft 100 mg cap</i>	\$0 (OTC)		
<i>docusate mini 283 mg/5ml rect enema</i>	\$0 (OTC)		
<i>docusate sodium 100 mg cap, 250 mg cap</i>	\$0 (OTC)		
<i>docusate sodium 150 mg/15ml liq, 50 mg/5ml liq, 60 mg/15ml syr</i>	\$0 (OTC)		
<i>docusil 100 mg cap</i>	\$0 (OTC)		
<i>docusol mini 283 mg/5ml rect enema</i>	\$0 (OTC)		
<i>dss 250 mg cap</i>	\$0 (OTC)		
<i>dulcolax stool softener 100 mg cap</i>	\$0 (OTC)		
<i>easy-lax 100 mg cap</i>	\$0 (OTC)		
<i>eq stool softener 100 mg cap</i>	\$0 (OTC)		
<i>eql stool softener 100 mg cap</i>	\$0 (OTC)		
<i>gentle stool softener 100 mg cap</i>	\$0 (OTC)		
<i>gnp stool softener 100 mg cap, 250 mg cap</i>	\$0 (OTC)		
<i>gnp stool softener 50 mg/5ml liq, 60 mg/15ml syr</i>	\$0 (OTC)		
<i>hm stool softener 100 mg cap, 250 mg cap</i>	\$0 (OTC)		
<i>kls stool softener 100 mg cap</i>	\$0 (OTC)		
<i>ks stool softener 100 mg cap</i>	\$0 (OTC)		
<i>laxa basic 100 mg cap</i>	\$0 (OTC)		
<i>PEDIA-LAX 50 mg/15ml liq</i>	\$0 (OTC)		
<i>phillips stool softener 100 mg cap</i>	\$0 (OTC)		
<i>px docusate sodium 100 mg cap</i>	\$0 (OTC)		
<i>qc stool softener 100 mg cap</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>ra col-rite 100 mg cap, 250 mg cap, 50 mg cap</i>	\$0 (OTC)		
<i>ra stool softener 100 mg cap</i>	\$0 (OTC)		
<i>sb docusate sodium 100 mg cap</i>	\$0 (OTC)		
<i>sm stool softener 100 mg cap, 250 mg cap</i>	\$0 (OTC)		
<i>sof-lax 100 mg cap</i>	\$0 (OTC)		
<i>stool softener 100 mg cap, 250 mg cap</i>	\$0 (OTC)		
<i>stool softener laxative 100 mg cap, 250 mg cap</i>	\$0 (OTC)		
<i>tgt stool softener 100 mg cap</i>	\$0 (OTC)		
<i>th stool softener 100 mg cap, 250 mg cap</i>	\$0 (OTC)		
<i>womans stool softener 100 mg cap</i>	\$0 (OTC)		
MEDICAL DEVICES AND SUPPLIES			
Contraceptives			
<i>aimsco lubricated misc</i>	\$0 (OTC)		
<i>condoms misc</i>	\$0 (OTC)		
DUREX EXTRA SENSITIVE THIN dev	\$0 (OTC)		
DUREX REALFEEL dev	\$0 (OTC)		
FANTASY LUBRICATED misc	\$0 (OTC)		
FANTASY LUBRICATED/SPERMICIDE misc	\$0 (OTC)		
FC FEMALE CONDOM misc	\$0 (OTC)		
FC2 FEMALE CONDOM misc	\$0 (OTC)		
K-Y ME & YOU EXTRA LUBRICATED dev	\$0 (OTC)		
K-Y ME & YOU INTENSE dev	\$0 (OTC)		
KAMELEON LUBRICATED misc	\$0 (OTC)		
<i>kimono misc</i>	\$0 (OTC)		
KIMONO COLORS dev	\$0 (OTC)		
KIMONO MAXX-LARGE FLARE misc	\$0 (OTC)		
<i>kimono micro thin misc</i>	\$0 (OTC)		
<i>kimono micro thin plus misc</i>	\$0 (OTC)		
<i>kimono plus misc</i>	\$0 (OTC)		
<i>kimono ps misc</i>	\$0 (OTC)		
<i>kimono ps plus misc</i>	\$0 (OTC)		
<i>kimono sensation misc</i>	\$0 (OTC)		
<i>kimono sensation plus misc</i>	\$0 (OTC)		
KIMONO SPECIAL dev	\$0 (OTC)		
LIFESTYLES ASSORTED COLORS misc	\$0 (OTC)		
LIFESTYLES EXTRA STRENGTH misc	\$0 (OTC)		
LIFESTYLES FORM FITTING misc	\$0 (OTC)		
LIFESTYLES LUBRICATED misc	\$0 (OTC)		
LIFESTYLES RIBBED misc	\$0 (OTC)		
LIFESTYLES SKYN ORIGINAL misc	\$0 (OTC)		
LIFESTYLES SPERMICIDAL LUBE misc	\$0 (OTC)		
LIFESTYLES STUDDER misc	\$0 (OTC)		
LIFESTYLES ULTRA SENSITIVE misc	\$0 (OTC)		
LIFESTYLES VIBRA-RIBBED misc	\$0 (OTC)		
LIFESTYLES XTRA PLEASURE misc	\$0 (OTC)		
<i>maxx misc</i>	\$0 (OTC)		
<i>maxx plus misc</i>	\$0 (OTC)		
<i>premium condoms lubricated misc</i>	\$0 (OTC)		
REALITY LATEX CONDOMS misc	\$0 (OTC)		
REALITY LATEX/ULTRA TEXTURED dev	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
REALITY LATEX/ULTRA THIN dev	\$0 (OTC)		
TRUSTEX COLOR CONDOMS + LUBE misc	\$0 (OTC)		
TRUSTEX LUB/RIBBED/STUDDERED misc	\$0 (OTC)		
TRUSTEX LUB/SPERMICIDE EX ST misc	\$0 (OTC)		
TRUSTEX LUB/SPERMICIDE XL misc	\$0 (OTC)		
TRUSTEX LUBRICATED misc	\$0 (OTC)		
TRUSTEX LUBRICATED EX LARGE misc	\$0 (OTC)		
TRUSTEX LUBRICATED EXTRA ST misc	\$0 (OTC)		
TRUSTEX LUBRICATED/SPERMICIDE misc	\$0 (OTC)		
TRUSTEX NATURAL CONDOMS + LUBE misc	\$0 (OTC)		
TRUSTEX NON-LUBRICATED misc	\$0 (OTC)		
TRUSTEX RIA LUB/SPERMICIDE misc	\$0 (OTC)		
TRUSTEX RIA LUBRICATED misc	\$0 (OTC)		
TRUSTEX RIA NON-LUBRICATED misc	\$0 (OTC)		
TRUSTEX-NONOXYNOL-9/RIB/STUD misc	\$0 (OTC)		
Devices			
ACCU-CHEK GUIDE w/Device kit	\$0 (OTC)		QL(1 EA per 365 days)
ACCU-CHEK NANO SMARTVIEW w/Device kit	\$0 (OTC)		QL(1 EA per 365 days)
CONTOUR MONITOR dev	\$0 (OTC)		QL(1 EA per 365 days)
CONTOUR NEXT ONE kit	\$0 (OTC)		QL(1 EA per 365 days)
Female Personal Care Products			
<i>maxi pad ultra thin pad</i>	\$0 (OTC)		
Foot Care Products			
<i>cvs callus remover pad</i>	\$0 (OTC)		
MINERALS & ELECTROLYTES			
Calcium			
<i>cal-citrate plus vitamin d 250-100 mg-unit tab, 250-2.5 mg-mcg tab</i>	\$0 (OTC)		
<i>calci-chew 1250 (500 Ca) mg tab chew</i>	\$0 (OTC)		
CALCI-CHEW 1250 (500 Ca) mg tab chew	\$0 (OTC)		
<i>calcitrate 315-6.25 mg-mcg tab, 950 (200 Ca) mg tab, 950 mg tab</i>	\$0 (OTC)		
<i>calcium 500-2.5 mg-mcg tab chew, 600 mg tab, 600-5 mg-mcg tab</i>	\$0 (OTC)		
<i>calcium + d3 250-3 mg-mcg tab</i>	\$0 (OTC)		
<i>calcium + vitamin d3 600-10 mg-mcg tab, 600-5 mg-mcg tab</i>	\$0 (OTC)		
<i>calcium 1000 + d 1000-20 mg-mcg tab</i>	\$0 (OTC)		
<i>calcium 500 + d 500-3.125 mg-mcg tab, 500-5 mg-mcg tab</i>	\$0 (OTC)		
<i>calcium 500 + d3 500-15 mg-mcg tab</i>	\$0 (OTC)		
<i>calcium 500/d 500-200 mg-unit tab, 500-5 mg-mcg tab</i>	\$0 (OTC)		
<i>calcium 500+d 500-10 mg-mcg tab, 500-5 mg-mcg tab</i>	\$0 (OTC)		
<i>calcium 500+d high potency 500-10 mg-mcg tab</i>	\$0 (OTC)		
<i>calcium 500+d3 500-10 mg-mcg tab, 500-5 mg-mcg tab</i>	\$0 (OTC)		
<i>calcium 600 1500 (600 Ca) mg tab, 600 mg tab</i>	\$0 (OTC)		
<i>calcium 600 + d 600-5 mg-mcg tab</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>calcium 600 +d high potency 600-10 mg-mcg tab</i>	\$0 (OTC)		
<i>calcium 600 high potency 600 mg tab</i>	\$0 (OTC)		
<i>calcium 600-d 600-10 mg-mcg tab</i>	\$0 (OTC)		
<i>calcium 600/vitamin d 600-10 mg-mcg tab, 600-10 mg-mcg tab chew</i>	\$0 (OTC)		
<i>calcium 600/vitamin d3 600-20 mg-mcg tab</i>	\$0 (OTC)		
<i>calcium 600+d 600-10 mg-mcg tab, 600-200 mg-unit tab, 600-400 mg-unit tab, 600-5 mg-mcg tab</i>	\$0 (OTC)		
<i>calcium 600+d high potency 600-10 mg-mcg tab</i>	\$0 (OTC)		
<i>calcium 600+d3 600-10 mg-mcg tab, 600-5 mg-mcg tab</i>	\$0 (OTC)		
<i>calcium 600+d3 plus minerals 600-800 mg-unit tab chew</i>	\$0 (OTC)		
<i>calcium carb-cholecalciferol 250-3.125 mg-mcg tab, 500-10 mg-mcg tab, 500-200 mg-unit tab, 600-10 mg-mcg tab, 600-3.125 mg-mcg tab, 600-400 mg-unit tab, 600-5 mg-mcg tab</i>	\$0 (OTC)		
<i>calcium carbonate 1250 (500 Ca) mg tab, 1250 (500 Ca) mg tab chew, 1500 (600 Ca) mg tab, 600 mg tab</i>	\$0 (OTC)		
<i>calcium carbonate-vitamin d 500-5 mg-mcg tab, 600-3.125 mg-mcg tab, 600-400 mg-unit tab, 600-5 mg-mcg tab</i>	\$0 (OTC)		
<i>calcium carbonate-vitamin d3 600-400 mg-unit tab</i>	\$0 (OTC)		
<i>calcium carbonate+vitamin d 600-200 mg-unit tab</i>	\$0 (OTC)		
<i>calcium citrate 950 (200 Ca) mg tab</i>	\$0 (OTC)		
<i>calcium citrate + d 250-5 mg-mcg tab, 315-200 mg-unit tab, 315-5 mg-mcg tab, 315-6.25 mg-mcg tab</i>	\$0 (OTC)		
<i>calcium citrate + d3 200-6.25 mg-mcg tab, 250-5 mg-mcg tab</i>	\$0 (OTC)		
<i>calcium citrate + d3 maximum 315-6.25 mg-mcg tab</i>	\$0 (OTC)		
<i>calcium citrate maximum/vit d 315-6.25 mg-mcg tab</i>	\$0 (OTC)		
<i>calcium citrate petite/vit d 200-250 mg-unit tab</i>	\$0 (OTC)		
<i>calcium citrate-vitamin d 315-200 mg-unit tab, 315-250 mg-unit tab, 315-5 mg-mcg tab, 315-6.25 mg-mcg tab</i>	\$0 (OTC)		
<i>calcium citrate-vitamin d3 315-6.25 mg-mcg tab</i>	\$0 (OTC)		
<i>calcium citrate+d3 315-6.25 mg-mcg tab</i>	\$0 (OTC)		
<i>calcium citrate+d3 petites 200-6.25 mg-mcg tab</i>	\$0 (OTC)		
<i>calcium extra d3 500-15 mg-mcg tab, 500-600 mg-unit tab</i>	\$0 (OTC)		
<i>calcium high potency 1500 (600 Ca) mg tab</i>	\$0 (OTC)		
<i>calcium high potency/vitamin d 600-5 mg-mcg tab</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>calcium plus vitamin d3 600-20 mg-mcg tab</i>	\$0 (OTC)		
<i>calcium-d 600-400 mg-unit tab</i>	\$0 (OTC)		
<i>calcium-vitamin d 500-200 mg-unit tab, 600-125 mg-unit tab, 600-200 mg-unit tab</i>	\$0 (OTC)		
<i>calcium-vitamin d3 250-3.125 mg-mcg tab</i>	\$0 (OTC)		
<i>calcium/c/d 500-10-250 mg-mg-unit tab chew</i>	\$0 (OTC)		
<i>calcium+d3 500-10 mg-mcg tab, 500-15 mg-mcg tab</i>	\$0 (OTC)		
<i>chewable calcium/d3 500-15 mg-mcg oral wafer</i>	\$0 (OTC)		
<i>CITRACAL/VITAMIN D 250-200 mg-unit tab</i>	\$0 (OTC)		
<i>citrus calcium +d 315-6.25 mg-mcg tab</i>	\$0 (OTC)		
<i>citrus calcium/vitamin d 200-6.25 mg-mcg tab</i>	\$0 (OTC)		
<i>cvs calcium 1500 (600 Ca) mg tab, 600 mg tab</i>	\$0 (OTC)		
<i>cvs calcium 600 + d/minerals 600-800 mg-unit tab chew</i>	\$0 (OTC)		
<i>cvs calcium 600+d 600-20 mg-mcg tab</i>	\$0 (OTC)		
<i>cvs calcium carbonate 1250 (500 Ca) mg tab</i>	\$0 (OTC)		
<i>cvs calcium citrate +d 315-6.25 mg-mcg tab</i>	\$0 (OTC)		
<i>cvs calcium citrate +d3 mini 200-6.25 mg-mcg tab</i>	\$0 (OTC)		
<i>cvs calcium citrate+d3 315-6.25 mg-mcg tab</i>	\$0 (OTC)		
<i>cvs calcium citrate+d3 petites 200-6.25 mg-mcg tab</i>	\$0 (OTC)		
<i>cvs oyster shell calcium-vit d 500-3.125 mg-mcg tab</i>	\$0 (OTC)		
<i>cvs oyster shell calcium+vit d 500-125 mg-unit tab, 500-3.125 mg-mcg tab</i>	\$0 (OTC)		
<i>eq calcium 500+d 500-5 mg-mcg tab</i>	\$0 (OTC)		
<i>eq calcium 600+d 600-20 mg-mcg tab</i>	\$0 (OTC)		
<i>eq calcium citrate+d 315-6.25 mg-mcg tab</i>	\$0 (OTC)		
<i>eql calcium 600 mg tab</i>	\$0 (OTC)		
<i>eql calcium citrate/vitamin d 315-6.25 mg-mcg tab</i>	\$0 (OTC)		
<i>eql calcium citrate/vitamin d3 315-6.25 mg-mcg tab</i>	\$0 (OTC)		
<i>eql oyster shell calcium/d 200-500 unit-mg tab, 500-200 mg-unit tab</i>	\$0 (OTC)		
<i>gnp calcium 1500 (600 Ca) mg tab</i>	\$0 (OTC)		
<i>gnp calcium 500 +d3 500-15 mg-mcg tab</i>	\$0 (OTC)		
<i>gnp calcium 600 +d3/minerals 600-800 mg-unit tab chew</i>	\$0 (OTC)		
<i>gnp calcium 600/d 600-10 mg-mcg tab, 600-400 mg-unit tab</i>	\$0 (OTC)		
<i>gnp calcium citrate +d3 315-6.25 mg-mcg tab</i>	\$0 (OTC)		
<i>hm calcium 600+d plus minerals 600-800 mg-unit tab chew</i>	\$0 (OTC)		
<i>hm calcium citrate+d3 petite 200-6.25 mg-mcg tab</i>	\$0 (OTC)		
<i>hm calcium citrate+vitamin d 315-6.25 mg-mcg tab</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>hm calcium-vitamin d 500-5 mg-mcg tab, 600-10 mg-mcg tab</i>	\$0 (OTC)		
<i>kp calcium 600+d 600-10 mg-mcg tab</i>	\$0 (OTC)		
<i>kp calcium citrate+d 315-6.25 mg-mcg tab</i>	\$0 (OTC)		
<i>os-cal calcium + d3 500-5 mg-mcg tab</i>	\$0 (OTC)		
<i>OSTEO-PORETICAL 600-25 mg-mcg tab</i>	\$0 (OTC)		
<i>oysco 500 500 mg tab</i>	\$0 (OTC)		
<i>oysco 500+d 500-5 mg-mcg tab</i>	\$0 (OTC)		
<i>oyst-cal-d 500 500-200 mg-unit tab</i>	\$0 (OTC)		
<i>oyster calcium 500 mg tab</i>	\$0 (OTC)		
<i>oyster shell calcium 500 mg tab</i>	\$0 (OTC)		
<i>oyster shell calcium + d 500-10 mg-mcg tab, 500-400 mg-unit tab, 500-5 mg-mcg tab</i>	\$0 (OTC)		
<i>oyster shell calcium + d3 500-10 mg-mcg tab, 500-400 mg-unit tab</i>	\$0 (OTC)		
<i>oyster shell calcium 250+d 250-125 mg-unit tab, 250-3.125 mg-mcg tab</i>	\$0 (OTC)		
<i>oyster shell calcium 500 + d 500-200 mg-unit tab, 500-3.125 mg-mcg tab</i>	\$0 (OTC)		
<i>oyster shell calcium plus d 500-5 mg-mcg tab</i>	\$0 (OTC)		
<i>oyster shell calcium w/d 500-200 mg-unit tab, 500-5 mg-mcg tab</i>	\$0 (OTC)		
<i>oyster shell calcium/d 250-125 mg-unit tab, 250-3.125 mg-mcg tab, 500-10 mg-mcg tab, 500-200 mg-unit tab, 500-400 mg-unit tab, 500-5 mg-mcg tab</i>	\$0 (OTC)		
<i>oyster shell calcium/d3 500-10 mg-mcg tab, 500-5 mg-mcg tab</i>	\$0 (OTC)		
<i>oyster shell calcium/vitamin d 250-125 mg-unit tab, 250-3.125 mg-mcg tab, 500-5 mg-mcg tab</i>	\$0 (OTC)		
<i>oystercal-d 500-10 mg-mcg tab</i>	\$0 (OTC)		
<i>pa oyster shell calcium 500-5 mg-mcg tab</i>	\$0 (OTC)		
<i>qc calcium 600 +d3 600-800 mg-unit tab</i>	\$0 (OTC)		
<i>ra calcium 600 1500 (600 Ca) mg tab</i>	\$0 (OTC)		
<i>ra calcium 600/vitamin d-3 600-10 mg-mcg tab</i>	\$0 (OTC)		
<i>ra calcium cit plus vit d-3 315-6.25 mg-mcg tab</i>	\$0 (OTC)		
<i>ra calcium cit-vit d-3 petites 200-6.25 mg-mcg tab</i>	\$0 (OTC)		
<i>ra calcium plus vitamin d 600-10 mg-mcg tab, 600-5 mg-mcg tab</i>	\$0 (OTC)		
<i>ra hi cal 500-5 mg-mcg tab</i>	\$0 (OTC)		
<i>ra hi-cal plus vitamin d 500-5 mg-mcg tab</i>	\$0 (OTC)		
<i>ra oyster shell calcium/d 250-3.125 mg-mcg tab, 500-5 mg-mcg tab</i>	\$0 (OTC)		
<i>ra oyster shell calcium/d2 250-3.125 mg-mcg tab, 500-5 mg-mcg tab</i>	\$0 (OTC)		
<i>sm calcium 500 mg tab</i>	\$0 (OTC)		
<i>sm calcium 500/vitamin d3 500-10 mg-mcg tab, 500-400 mg-unit tab</i>	\$0 (OTC)		
<i>sm calcium 600 1500 mg tab</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>sm calcium 600/vitamin d 600-10 mg-mcg tab, 600-400 mg-unit tab</i>	\$0 (OTC)		
<i>sm calcium citrate w/vit d3 315-6.25 mg-mcg tab</i>	\$0 (OTC)		
<i>sm calcium citrate-vit d 315-200 mg-unit tab, 315-5 mg-mcg tab</i>	\$0 (OTC)		
<i>sm calcium citrate+/vit d3 315-6.25 mg-mcg tab</i>	\$0 (OTC)		
<i>sm calcium citrate+d3 petite 200-6.25 mg-mcg tab</i>	\$0 (OTC)		
<i>sm calcium-vitamin d 500-5 mg-mcg tab</i>	\$0 (OTC)		
<i>sm calcium/vitamin d 500-5 mg-mcg tab</i>	\$0 (OTC)		
<i>sm oyster shell calcium/vit d 500-10 mg-mcg tab, 500-400 mg-unit tab</i>	\$0 (OTC)		
<i>sm oyster shell calcium/vit d3 500-10 mg-mcg tab, 500-400 mg-unit tab</i>	\$0 (OTC)		
<i>super calcium 1500 (600 Ca) mg tab, 1500 mg tab</i>	\$0 (OTC)		
<i>super calcium 600 + d 400 600-10 mg-mcg tab</i>	\$0 (OTC)		
<i>super calcium 600 + d3 600-10 mg-mcg tab</i>	\$0 (OTC)		
<i>th calcium 600 mg tab</i>	\$0 (OTC)		
<i>th calcium carbonate-vitamin d 600-400 mg-unit tab, 600-400 mg-unit tab chew</i>	\$0 (OTC)		
<i>th calcium citrate-vitamin d 315-200 mg-unit tab</i>	\$0 (OTC)		
<i>th oyster shell calcium/d 500-400 mg-unit tab</i>	\$0 (OTC)		
Electrolytes			
<i>advantage care electrolyte ped soln</i>	\$0 (OTC)		
<i>baby darlings ped electrolyte soln</i>	\$0 (OTC)		
<i>cerasport ex1 soln</i>	\$0 (OTC)		
<i>CERASPORT EX1 soln</i>	\$0 (OTC)		
<i>cvs electrolyte solution soln</i>	\$0 (OTC)		
<i>cvs ped electrolyte freeze pop soln</i>	\$0 (OTC)		
<i>cvs pediatric electrolyte soln</i>	\$0 (OTC)		
<i>eql pediatric electrolyte soln</i>	\$0 (OTC)		
<i>gnp electrolyte solution soln</i>	\$0 (OTC)		
<i>gnp pediatric electrolyte soln</i>	\$0 (OTC)		
<i>goodsense electrolyte soln</i>	\$0 (OTC)		
<i>h-e-b oral electrolyte soln</i>	\$0 (OTC)		
<i>hm pediatric electrolyte soln</i>	\$0 (OTC)		
<i>oral electrolytes soln</i>	\$0 (OTC)		
<i>oralyte soln</i>	\$0 (OTC)		
<i>oralyte freezer pops soln</i>	\$0 (OTC)		
<i>ped electrolyte freeze pops soln</i>	\$0 (OTC)		
<i>ped electrolyte freezer pops soln</i>	\$0 (OTC)		
<i>pediatric electrolyte soln</i>	\$0 (OTC)		
<i>pediatric electrolyte-zinc soln</i>	\$0 (OTC)		
<i>ra ped electrolyte freezer pop soln</i>	\$0 (OTC)		
<i>ra pediatric electrolyte soln</i>	\$0 (OTC)		
<i>sm pediatric electrolyte soln</i>	\$0 (OTC)		
Magnesium			
<i>cvs magnesium 250 mg tab, 500 mg tab</i>	\$0 (OTC)		
<i>cvs magnesium oxide 250 mg tab, 500 mg tab</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>essential magnesium 250 mg tab</i>	\$0 (OTC)		
<i>kp mag-oxide magnesium 200 mg tab</i>	\$0 (OTC)		
<i>mag-g 500 (27 Mg) mg tab</i>	\$0 (OTC)		
<i>mag-oxide 200 mg tab</i>	\$0 (OTC)		
<i>magdelay 64 mg tab dr</i>	\$0 (OTC)		
<i>magnesium 250 mg tab, 300 mg cap, 400 mg tab, 500 mg cap</i>	\$0 (OTC)		
<i>magnesium 27 500 (27 Mg) mg tab</i>	\$0 (OTC)		
<i>magnesium chloride 64 mg tab dr</i>	\$0 (OTC)		
<i>magnesium gluconate 27.5 mg tab, 500 (27 Mg) mg tab, 500 mg tab</i>	\$0 (OTC)		
<i>magnesium lactate 84 MG (7MEQ) tab er</i>	\$0 (OTC)		
<i>magnesium oxide 400 (241.3 Mg) mg tab</i>	\$0 (OTC)		
<i>magnesium oxide -mg supplement 250 mg tab, 400 (240 Mg) mg tab, 500 mg cap, 500 mg tab</i>	\$0 (OTC)		
<i>magnesium-oxide 400 (240 Mg) mg tab</i>	\$0 (OTC)		
<i>mgo 400 (240 Mg) mg tab</i>	\$0 (OTC)		
<i>ra magnesium 500 mg cap</i>	\$0 (OTC)		
<i>ra natural magnesium 250 mg tab</i>	\$0 (OTC)		
<i>sm magnesium 250 mg tab</i>	\$0 (OTC)		
<i>sm magnesium oxide 250 mg tab</i>	\$0 (OTC)		
Minerals			
<i>oceanic selenium 50 mcg tab</i>	\$0 (OTC)		
<i>selenium 100 mcg tab, 200 mcg cap, 50 mcg tab</i>	\$0 (OTC)		
Sodium			
<i>sodium chloride 1 gm tab</i>	\$0 (OTC)		
Zinc			
<i>cvs zinc gluconate 50 mg tab</i>	\$0 (OTC)		
<i>hm zinc 50 mg tab</i>	\$0 (OTC)		
<i>ra zinc 50 mg tab</i>	\$0 (OTC)		
<i>sm zinc 50 mg tab</i>	\$0 (OTC)		
<i>sm zinc gluconate 50 mg tab</i>	\$0 (OTC)		
<i>th zinc 50 mg tab</i>	\$0 (OTC)		
<i>zinc 220 (50 Zn) mg cap, 30 mg tab, 50 mg tab</i>	\$0 (OTC)		
<i>zinc gluconate 100 mg tab, 30 mg tab, 50 mg tab</i>	\$0 (OTC)		
<i>zinc sulfate 220 (50 Zn) mg cap, 50 mg cap</i>	\$0 (OTC)		
MOUTH/THROAT/DENTAL AGENTS			
Dental Products			
<i>gel-kam 0.4 % dental gel</i>	\$0 (OTC)		
<i>GEL-KAM 0.4 % dental gel</i>	\$0 (OTC)		
rotectant - Misc.			
<i>benz-o-sthetic 20 % m/t gel</i>	\$0 (OTC)		
<i>cvs oral anesthetic max str 20 % m/t gel</i>	\$0 (OTC)		
<i>eql cold sore treatment 0.13 % Topical Liquid</i>	\$0 (OTC)		
<i>intense toothache pain relief 20 % m/t gel</i>	\$0 (OTC)		
<i>oral analgesic max st 20 % m/t gel</i>	\$0 (OTC)		
<i>ra anesthetic oral 20 % m/t gel</i>	\$0 (OTC)		
MULTIVITAMINS			

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
B-complex W/ C			
<i>b complex-c tab</i>	\$0 (OTC)		
<i>b-complex-c tab</i>	\$0 (OTC)		
<i>b-complex/vitamin c (w/ ca) tab</i>	\$0 (OTC)		
<i>bee zee tab</i>	\$0 (OTC)		
<i>cvs b complex plus c tab</i>	\$0 (OTC)		
<i>cvs stress formula/zinc tab</i>	\$0 (OTC)		
<i>cvs super b complex/c tab</i>	\$0 (OTC)		
<i>sm super b complex/c tab</i>	\$0 (OTC)		
<i>stress b/zinc tab</i>	\$0 (OTC)		
<i>superplex-t tab</i>	\$0 (OTC)		
<i>total b/c tab</i>	\$0 (OTC)		
<i>vitamin b + c complex tab</i>	\$0 (OTC)		
B-complex W/ Folic Acid			
<i>b complex-c-biotin-e-fa 0.4 mg tab</i>	\$0 (OTC)		
<i>b complex-c-folic acid tab</i>	\$0 (OTC)		
<i>b-complex-c (w/folic acid) tab</i>	\$0 (OTC)		
<i>b-complex/vitamin c tab</i>	\$0 (OTC)		
<i>eql b complex tab</i>	\$0 (OTC)		
<i>eql super b complex/vitamin c tab</i>	\$0 (OTC)		
<i>full spectrum b/vitamin c 0.8 mg tab</i>	\$0 (OTC)		
<i>hm super vitamin b complex/c tab</i>	\$0 (OTC)		
<i>hm vitamin b complex/vitamin c tab</i>	\$0 (OTC)		
<i>kp b complex-c tab</i>	\$0 (OTC)		
<i>rena-vite tab</i>	\$0 (OTC)		
<i>rena-vite rx 1 mg tab</i>	\$0 (OTC)		
<i>renal vitamin 0.8 mg tab</i>	\$0 (OTC)		
<i>renal-vite 0.8 mg tab</i>	\$0 (OTC)		
<i>reno caps 1 mg cap</i>	\$0 (OTC)		
<i>sm b super vitamin complex tab</i>	\$0 (OTC)		
<i>sm b-complex/vitamin c tab</i>	\$0 (OTC)		
<i>stress 500 b-complex tab</i>	\$0 (OTC)		
<i>stress formula (folic acid) tab</i>	\$0 (OTC)		
<i>super b complex/fa/vit c tab</i>	\$0 (OTC)		
<i>super b-complex/vit c/fa tab</i>	\$0 (OTC)		
<i>west-vite w/folic acid 0.8 mg tab</i>	\$0 (OTC)		
Bioflavonoid Products			
<i>c complex tab er</i>	\$0 (OTC)		
<i>ra vitamin c cr tab er</i>	\$0 (OTC)		
<i>th vitamin c/rose hips/bioflav tab</i>	\$0 (OTC)		
<i>vitamin c tab chew</i>	\$0 (OTC)		
<i>vitamin c-rose hips-acerola tab</i>	\$0 (OTC)		
Multiple Vitamins W/ Iron			
<i>daily multiple vitamins/iron tab</i>	\$0 (OTC)		
<i>daily vitamin formula+iron tab</i>	\$0 (OTC)		
<i>gnp one daily plus iron tab</i>	\$0 (OTC)		
<i>hm one daily/iron tab</i>	\$0 (OTC)		
<i>mini multi vitamins/iron tab</i>	\$0 (OTC)		
<i>multi-day plus iron tab</i>	\$0 (OTC)		
<i>multiple vitamins/iron tab</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>once daily/iron tab</i>	\$0 (OTC)		
<i>one daily multivitamin/iron tab</i>	\$0 (OTC)		
<i>ra one daily multi-vit plus fe tab</i>	\$0 (OTC)		
<i>sm multiple vitamins/iron tab</i>	\$0 (OTC)		
<i>stress formula/iron tab</i>	\$0 (OTC)		
<i>tab-a-vite/iron tab</i>	\$0 (OTC)		
TAB-A-VITE/IRON tab	\$0 (OTC)		
<i>th b complex/iron/c/e tab</i>	\$0 (OTC)		
<i>th daily multiple vitamin/iron tab</i>	\$0 (OTC)		
Multiple Vitamins W/ Minerals			
<i>50+ adult eye health cap</i>	\$0 (OTC)		
<i>a thru z advanced tab</i>	\$0 (OTC)		
<i>a thru z select tab</i>	\$0 (OTC)		
<i>a thru z select 50+ advanced tab</i>	\$0 (OTC)		
<i>a thru z select 50+ mens tab</i>	\$0 (OTC)		
<i>a thru z select advanced tab</i>	\$0 (OTC)		
<i>a thru z select ultimate women tab</i>	\$0 (OTC)		
<i>a thru z ultimate mens tab</i>	\$0 (OTC)		
<i>abc plus senior adults 50+ tab</i>	\$0 (OTC)		
<i>antioxidant cap</i>	\$0 (OTC)		
<i>antioxidant a/c/e/selenium tab</i>	\$0 (OTC)		
BIO-35 GLUTEN-FREE cap	\$0 (OTC)		
<i>biocal cap</i>	\$0 (OTC)		
<i>biosupp liq</i>	\$0 (OTC)		
BIOTECT PLUS liq	\$0 (OTC)		
<i>biotin plus/calcium/vit d3 tab</i>	\$0 (OTC)		
BPROTECTED MULTI-VITE liq	\$0 (OTC)		
<i>centamin liq</i>	\$0 (OTC)		
<i>centravites tab</i>	\$0 (OTC)		
<i>centravites 50 plus tab</i>	\$0 (OTC)		
<i>centravites adults tab</i>	\$0 (OTC)		
CENTRUM SILVER tab	\$0 (OTC)		
CENTRUM SPECIALIST HEART tab	\$0 (OTC)		
CENTRUM ULTRA WOMENS tab	\$0 (OTC)		
<i>certa plus tab</i>	\$0 (OTC)		
<i>certavite/antioxidants tab</i>	\$0 (OTC)		
<i>certavite/antioxidants liq</i>	\$0 (OTC)		
CERTAVITE/ANTIOXIDANTS tab	\$0 (OTC)		
<i>companion tab</i>	\$0 (OTC)		
<i>complete tab</i>	\$0 (OTC)		
<i>complete multivitamin/mineral liq</i>	\$0 (OTC)		
<i>complete senior tab</i>	\$0 (OTC)		
<i>cvs daily multiple fe/ca/zn tab</i>	\$0 (OTC)		
<i>cvs daily multiple for men tab</i>	\$0 (OTC)		
<i>cvs daily multiple for men 50+ tab</i>	\$0 (OTC)		
<i>cvs daily multiple for women tab</i>	\$0 (OTC)		
<i>cvs daily multiple women 50+ tab</i>	\$0 (OTC)		
<i>cvs eye health & lutein tab</i>	\$0 (OTC)		
<i>cvs eye health adult 50+ cap</i>	\$0 (OTC)		
<i>cvs one daily essential tab</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>cvs one daily womens formula tab</i>	\$0 (OTC)		
<i>cvs spectravite adult 50+ tab</i>	\$0 (OTC)		
<i>cvs spectravite advanced tab</i>	\$0 (OTC)		
<i>cvs spectravite senior tab</i>	\$0 (OTC)		
<i>cvs spectravite ultra men 50+ tab</i>	\$0 (OTC)		
<i>cvs spectravite ultra mens tab</i>	\$0 (OTC)		
<i>cvs spectravite ultra women tab</i>	\$0 (OTC)		
<i>cvs spectravite womens senior tab</i>	\$0 (OTC)		
<i>cvs vision formula tab</i>	\$0 (OTC)		
<i>cvs womens active daily tab</i>	\$0 (OTC)		
<i>daily multiple vitamins/min tab</i>	\$0 (OTC)		
<i>daily multiple weight loss tab</i>	\$0 (OTC)		
<i>daily vitamin formula+minerals tab</i>	\$0 (OTC)		
<i>DECUBI-VITE cap</i>	\$0 (OTC)		
<i>diabetes health formula tab</i>	\$0 (OTC)		
<i>eq complete multivit adult 50+ tab</i>	\$0 (OTC)		
<i>eq complete multivitamin-adult tab</i>	\$0 (OTC)		
<i>eq one daily mens health tab</i>	\$0 (OTC)		
<i>eq one daily womens health tab</i>	\$0 (OTC)		
<i>eq one daily womens pro-active tab</i>	\$0 (OTC)		
<i>eql central-vite tab</i>	\$0 (OTC)		
<i>eql central-vite performance tab</i>	\$0 (OTC)		
<i>eql central-vite select tab</i>	\$0 (OTC)		
<i>eql century tab</i>	\$0 (OTC)		
<i>eql century cardio health tab</i>	\$0 (OTC)		
<i>eql one daily 50 plus tab</i>	\$0 (OTC)		
<i>eql one daily diet support tab</i>	\$0 (OTC)		
<i>eql one daily dieters support tab</i>	\$0 (OTC)		
<i>eql one daily maximum tab</i>	\$0 (OTC)		
<i>eql one daily mens health tab</i>	\$0 (OTC)		
<i>eql one daily womens 50+ adv tab</i>	\$0 (OTC)		
<i>eql ultimate womens century tab</i>	\$0 (OTC)		
<i>eql vision formula tab</i>	\$0 (OTC)		
<i>ESSENTIA tab</i>	\$0 (OTC)		
<i>freedavite tab</i>	\$0 (OTC)		
<i>geri-vite liq</i>	\$0 (OTC)		
<i>gnp century tab</i>	\$0 (OTC)		
<i>gnp century active performance tab</i>	\$0 (OTC)		
<i>gnp century adults 50+ senior tab</i>	\$0 (OTC)		
<i>gnp century cardio health tab</i>	\$0 (OTC)		
<i>gnp century mature tab</i>	\$0 (OTC)		
<i>gnp century ultimate mens tab</i>	\$0 (OTC)		
<i>gnp century ultimate womens tab</i>	\$0 (OTC)		
<i>gnp diabetic support formula tab</i>	\$0 (OTC)		
<i>gnp hair/skin/nails tab</i>	\$0 (OTC)		
<i>gnp healthy eyes tab</i>	\$0 (OTC)		
<i>gnp healthy eyes supervision cap</i>	\$0 (OTC)		
<i>gnp mega multi for men tab</i>	\$0 (OTC)		
<i>gnp mega multi for women tab</i>	\$0 (OTC)		
<i>gnp one daily maximum tab</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>gnp one daily mens health 50+ tab</i>	\$0 (OTC)		
<i>gnp one daily mens/lycopene tab</i>	\$0 (OTC)		
<i>gnp one daily womens tab</i>	\$0 (OTC)		
<i>gnp one daily womens 50+ tab</i>	\$0 (OTC)		
<i>gnp therapeutic-m tab</i>	\$0 (OTC)		
<i>hair vitamins tab</i>	\$0 (OTC)		
<i>hair/skin/nails cap, tab</i>	\$0 (OTC)		
<i>healthy eyes tab</i>	\$0 (OTC)		
<i>healthy eyes/lutein tab</i>	\$0 (OTC)		
<i>hm antioxidant vitamins tab</i>	\$0 (OTC)		
<i>hm complete tab</i>	\$0 (OTC)		
<i>hm complete 50+ tab</i>	\$0 (OTC)		
<i>hm complete 50+ mens ultimate tab</i>	\$0 (OTC)		
<i>hm complete 50+ women ultimate tab</i>	\$0 (OTC)		
<i>hm complete men tab</i>	\$0 (OTC)		
<i>hm complete women tab</i>	\$0 (OTC)		
<i>hm one daily mens tab</i>	\$0 (OTC)		
<i>hm one daily womens tab</i>	\$0 (OTC)		
<i>hm womens 50+ advanced daily tab</i>	\$0 (OTC)		
<i>i-vite protect tab</i>	\$0 (OTC)		
<i>icaps cap</i>	\$0 (OTC)		
ICAPS cap	\$0 (OTC)		
<i>icaps mv tab</i>	\$0 (OTC)		
ICAPS MV tab	\$0 (OTC)		
K-PAX IMMUNE PROFESSIONAL ST tab	\$0 (OTC)		
<i>kp adults 50+ daily formula tab</i>	\$0 (OTC)		
<i>kp adults daily formula tab</i>	\$0 (OTC)		
<i>kp mens daily formula tab</i>	\$0 (OTC)		
KP VISION FORMULA/LUTEIN tab	\$0 (OTC)		
<i>kp womens 50+ daily formula tab</i>	\$0 (OTC)		
<i>kp womens daily formula tab</i>	\$0 (OTC)		
LYSIPLEX PLUS liq	\$0 (OTC)		
<i>macuvite/lutein tab</i>	\$0 (OTC)		
<i>mega multivitamin for men tab</i>	\$0 (OTC)		
<i>mega multivitamin for women tab</i>	\$0 (OTC)		
<i>megavite fruits & veggies tab</i>	\$0 (OTC)		
<i>mens multi vitamin & mineral tab</i>	\$0 (OTC)		
<i>milltrium senior tab</i>	\$0 (OTC)		
<i>multi complete/iron tab</i>	\$0 (OTC)		
<i>multi-vitamin monocaps tab</i>	\$0 (OTC)		
<i>multi-vitamin/minerals tab</i>	\$0 (OTC)		
<i>multi-vite liq</i>	\$0 (OTC)		
<i>multiple vit/minerals/no iron tab</i>	\$0 (OTC)		
<i>multiple vitamins-minerals liq</i>	\$0 (OTC)		
<i>multiple vitamins/womens tab</i>	\$0 (OTC)		
<i>multivital tab</i>	\$0 (OTC)		
<i>multivital performance tab</i>	\$0 (OTC)		
<i>multivital platinum tab</i>	\$0 (OTC)		
<i>multivitamin liq</i>	\$0 (OTC)		
<i>multivitamin & mineral liq</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>multivitamin adult (minerals) tab</i>	\$0 (OTC)		
<i>multivitamin adults tab</i>	\$0 (OTC)		
<i>multivitamin adults 50+ tab</i>	\$0 (OTC)		
<i>multivitamin men tab</i>	\$0 (OTC)		
<i>multivitamin men 50+ tab</i>	\$0 (OTC)		
<i>multivitamin women tab</i>	\$0 (OTC)		
<i>multivitamin women 50+ tab</i>	\$0 (OTC)		
<i>multivitamin-minerals tab</i>	\$0 (OTC)		
<i>my-vitalife cap</i>	\$0 (OTC)		
<i>no iron mult vitamin-minerals tab</i>	\$0 (OTC)		
<i>ocutabs tab</i>	\$0 (OTC)		
<i>ocutabs-lutein tab</i>	\$0 (OTC)		
<i>OCUVITE-LUTEIN cap, tab</i>	\$0 (OTC)		
<i>ONCOVITE tab</i>	\$0 (OTC)		
<i>one daily calcium/iron tab</i>	\$0 (OTC)		
<i>one daily for men 50+ advanced tab</i>	\$0 (OTC)		
<i>one daily for men/lycopene tab</i>	\$0 (OTC)		
<i>one daily for women tab</i>	\$0 (OTC)		
<i>one daily for women 50+ adv tab</i>	\$0 (OTC)		
<i>one daily maximum tab</i>	\$0 (OTC)		
<i>one daily mens tab</i>	\$0 (OTC)		
<i>one daily mens health tab</i>	\$0 (OTC)		
<i>one daily multivit-min adult tab</i>	\$0 (OTC)		
<i>one daily plus iron tab</i>	\$0 (OTC)		
<i>one daily womens 50 plus tab</i>	\$0 (OTC)		
<i>one daily/minerals tab</i>	\$0 (OTC)		
<i>ONE-A-DAY MAXIMUM FORMULA tab</i>	\$0 (OTC)		
<i>ONE-A-DAY MENOPAUSE FORMULA tab</i>	\$0 (OTC)		
<i>ONE-A-DAY MENS 50+ ADVANTAGE tab</i>	\$0 (OTC)		
<i>one-a-day teen advantage/her tab</i>	\$0 (OTC)		
<i>ONE-A-DAY TEEN ADVANTAGE/HIM tab</i>	\$0 (OTC)		
<i>parvlex tab</i>	\$0 (OTC)		
<i>PRESERVISION/LUTEIN cap</i>	\$0 (OTC)		
<i>PRO-CAL tab</i>	\$0 (OTC)		
<i>PRORENAL + D tab</i>	\$0 (OTC)		
<i>PRORENAL + D W/ OMEGA-3 cap</i>	\$0 (OTC)		
<i>px complete senior multivits tab</i>	\$0 (OTC)		
<i>qc daily multivit/multimineral tab</i>	\$0 (OTC)		
<i>qc mens daily multivitamin tab</i>	\$0 (OTC)		
<i>quin b strong tab</i>	\$0 (OTC)		
<i>quintabs-m tab</i>	\$0 (OTC)		
<i>ra central-vite tab</i>	\$0 (OTC)		
<i>RA CENTRAL-VITE tab</i>	\$0 (OTC)		
<i>ra central-vite energy tab</i>	\$0 (OTC)		
<i>ra central-vite senior tab</i>	\$0 (OTC)		
<i>ra central-vite under 50 mens tab</i>	\$0 (OTC)		
<i>ra central-vite under 50 women tab</i>	\$0 (OTC)		
<i>ra central-vite womens mature tab</i>	\$0 (OTC)		
<i>ra one daily energy formula tab</i>	\$0 (OTC)		
<i>ra one daily maximum tab</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>ra one daily mens/vit d-3 tab</i>	\$0 (OTC)		
<i>ra one daily womens tab</i>	\$0 (OTC)		
<i>ra therapeutic m plus beta car tab</i>	\$0 (OTC)		
<i>ra whole source dietary tab</i>	\$0 (OTC)		
<i>ra whole source dietary mature tab</i>	\$0 (OTC)		
<i>ra whole source for men tab</i>	\$0 (OTC)		
<i>senior tabs tab</i>	\$0 (OTC)		
<i>sentry tab</i>	\$0 (OTC)		
<i>sentry adult tab</i>	\$0 (OTC)		
<i>sentry senior tab</i>	\$0 (OTC)		
<i>sm antioxidant vitamins tab</i>	\$0 (OTC)		
<i>sm complete tab</i>	\$0 (OTC)		
<i>sm complete 50+ tab</i>	\$0 (OTC)		
<i>sm complete 50+ ultimate mens tab</i>	\$0 (OTC)		
<i>sm complete 50+ ultimate women tab</i>	\$0 (OTC)		
<i>sm complete advanced formula tab</i>	\$0 (OTC)		
<i>sm complete senior formula tab</i>	\$0 (OTC)		
<i>sm hair/skin/nails tab</i>	\$0 (OTC)		
<i>sm multiple vitamins womens tab</i>	\$0 (OTC)		
<i>sm one daily mens tab</i>	\$0 (OTC)		
<i>sm one daily womens tab</i>	\$0 (OTC)		
<i>sm opti-vitamins tab</i>	\$0 (OTC)		
<i>sm stress formula b-complex/zn tab</i>	\$0 (OTC)		
<i>sm therapeutic-m tab</i>	\$0 (OTC)		
<i>stress 500 b-complex/zinc tab</i>	\$0 (OTC)		
<i>stress b complex/antioxid/zinc tab</i>	\$0 (OTC)		
<i>stress formula (w/ minerals) tab</i>	\$0 (OTC)		
<i>stress formula/iron tab</i>	\$0 (OTC)		
<i>stress formula/iron (mvi) tab</i>	\$0 (OTC)		
<i>super antioxidant cap</i>	\$0 (OTC)		
<i>super multiple tab</i>	\$0 (OTC)		
<i>super thera vite m tab</i>	\$0 (OTC)		
<i>support liq</i>	\$0 (OTC)		
<i>tab-a-vite maximum tab</i>	\$0 (OTC)		
<i>th complete multi tab</i>	\$0 (OTC)		
<i>th complete multi 50+ tab</i>	\$0 (OTC)		
<i>th premium daily multiple tab</i>	\$0 (OTC)		
<i>th theradex-m tab</i>	\$0 (OTC)		
<i>th vision vitamins tab</i>	\$0 (OTC)		
<i>th womens daily tab</i>	\$0 (OTC)		
<i>thera-m tab</i>	\$0 (OTC)		
THERAGRAN-M PREMIER 50 PLUS tab	\$0 (OTC)		
<i>therapeutic m tab</i>	\$0 (OTC)		
<i>therapeutic-m tab</i>	\$0 (OTC)		
<i>theratrum complete tab</i>	\$0 (OTC)		
THERATRUM COMPLETE tab	\$0 (OTC)		
<i>theratrum complete 50 plus tab</i>	\$0 (OTC)		
THERATRUM COMPLETE 50 PLUS tab	\$0 (OTC)		
THEREMS-M tab	\$0 (OTC)		
<i>vision formula eye health cap</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>vision formula/lutein tab</i>	\$0 (OTC)		
<i>vision vitamins tab</i>	\$0 (OTC)		
<i>vitamin d3 complete tab</i>	\$0 (OTC)		
<i>vitamin-mineral supplement liq</i>	\$0 (OTC)		
<i>vitamins a-d-e/selenium tab</i>	\$0 (OTC)		
<i>vitamins/minerals tab</i>	\$0 (OTC)		
<i>vitrum senior tab</i>	\$0 (OTC)		
<i>womens daily form/fa/ca/fe tab</i>	\$0 (OTC)		
<i>womens daily formula tab</i>	\$0 (OTC)		
<i>womens multivitamin tab</i>	\$0 (OTC)		
<i>womens one daily tab</i>	\$0 (OTC)		
YELETS TEENAGE FORMULA tab	\$0 (OTC)		
Multivitamins			
<i>animal chews tab chew</i>	\$0 (OTC)		
<i>animal shapes/iron 18 mg tab chew</i>	\$0 (OTC)		
<i>child chewable vitamins/iron tab chew</i>	\$0 (OTC)		
<i>childrens chewable multi vits tab chew</i>	\$0 (OTC)		
<i>childrens chewable vitamins tab chew</i>	\$0 (OTC)		
<i>childrens multivitamin tab chew</i>	\$0 (OTC)		
<i>cvs children multivitamin/iron 15 mg tab chew</i>	\$0 (OTC)		
<i>cvs childrens complete 18 mg tab chew</i>	\$0 (OTC)		
<i>cvs daily multiple tab</i>	\$0 (OTC)		
<i>cvs gummy dinos tab chew</i>	\$0 (OTC)		
<i>cvs hair/skin/nails tab</i>	\$0 (OTC)		
<i>daily multiple vitamins tab</i>	\$0 (OTC)		
<i>daily value multivitamin tab</i>	\$0 (OTC)		
<i>daily vitamin tab</i>	\$0 (OTC)		
<i>daily vitamins tab</i>	\$0 (OTC)		
<i>daily vite tab</i>	\$0 (OTC)		
DINO-LIFE W/IRON-ZINC 30-200-3 tab chew	\$0 (OTC)		
<i>eq multivitamin gummies tab chew</i>	\$0 (OTC)		
<i>eql child multivit/minerals 18 mg tab chew</i>	\$0 (OTC)		
<i>eql childrens c tab chew</i>	\$0 (OTC)		
<i>eql one daily essential tab</i>	\$0 (OTC)		
<i>eql one daily womens tab</i>	\$0 (OTC)		
<i>essential one daily multivit tab</i>	\$0 (OTC)		
<i>flintstones complete 18 mg tab chew</i>	\$0 (OTC)		
FLINTSTONES COMPLETE tab chew	\$0 (OTC)		
<i>flintstones plus extra c tab chew</i>	\$0 (OTC)		
<i>flintstones/extra c tab chew</i>	\$0 (OTC)		
FLINTSTONES/MY FIRST tab chew	\$0 (OTC)		
<i>gnp century energy metabolism tab</i>	\$0 (OTC)		
<i>gnp childrens chewables/iron 15 mg tab chew</i>	\$0 (OTC)		
<i>gnp essential one daily tab</i>	\$0 (OTC)		
<i>gnp little ones childrens tab chew</i>	\$0 (OTC)		
<i>gnp one daily womens health tab</i>	\$0 (OTC)		
<i>gnp zoochews gummies tab chew</i>	\$0 (OTC)		
GUMMI BEAR MULTIVITAMIN/MIN tab chew	\$0 (OTC)		
<i>hm animal shapes 18 mg tab chew</i>	\$0 (OTC)		
<i>hm one daily essential tab</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
HONEY BEARS W/IRON-ZINC 30-200-3 tab chew	\$0 (OTC)		
<i>kids gummy bear vitamins tab chew</i>	\$0 (OTC)		
<i>kids vitamins with C & FA tab chew</i>	\$0 (OTC)		
<i>kids vitamins complete 18 mg tab chew, 60 mg tab chew</i>	\$0 (OTC)		
<i>kids vitamins plus extra c tab chew</i>	\$0 (OTC)		
<i>kids vitamins plus iron 15 mg tab chew</i>	\$0 (OTC)		
<i>little animals/iron tab chew</i>	\$0 (OTC)		
<i>multi vitamin daily tab</i>	\$0 (OTC)		
<i>multi-delyn liq</i>	\$0 (OTC)		
<i>multi-vitamin tab</i>	\$0 (OTC)		
<i>multi-vitamin daily tab</i>	\$0 (OTC)		
<i>multi-vitamins tab</i>	\$0 (OTC)		
<i>multiple vitamins tab</i>	\$0 (OTC)		
<i>multiple vitamins-iron 15 mg tab chew</i>	\$0 (OTC)		
<i>multivit-min gummies childrens tab chew</i>	\$0 (OTC)		
<i>multivitamin tab</i>	\$0 (OTC)		
<i>multivitamin adult tab</i>	\$0 (OTC)		
<i>multivitamin childrens tab chew</i>	\$0 (OTC)		
<i>multivitamin childrens (w/ fa) tab chew</i>	\$0 (OTC)		
<i>multivitamin gummies childrens tab chew</i>	\$0 (OTC)		
<i>multivitamins cap</i>	\$0 (OTC)		
<i>omnicap tab</i>	\$0 (OTC)		
<i>once daily tab</i>	\$0 (OTC)		
<i>one daily tab</i>	\$0 (OTC)		
<i>one daily multivitamin adult tab</i>	\$0 (OTC)		
ONE-A-DAY ADULT VITACRAVES+DHA tab chew	\$0 (OTC)		
<i>one-daily multi vitamins tab</i>	\$0 (OTC)		
<i>one-daily multi-vitamin tab</i>	\$0 (OTC)		
<i>poly-vita soln</i>	\$0 (OTC)		
<i>polyvitamin soln</i>	\$0 (OTC)		
<i>polyvitamin/iron tab chew</i>	\$0 (OTC)		
<i>quintabs tab</i>	\$0 (OTC)		
<i>ra central-vite performance tab</i>	\$0 (OTC)		
<i>ra one daily essential tab</i>	\$0 (OTC)		
<i>ra one daily multi-vitamin tab</i>	\$0 (OTC)		
SCOOBY-DOO ONE A DAY tab chew	\$0 (OTC)		
<i>sm animal shapes complete 18 mg tab chew</i>	\$0 (OTC)		
<i>sm animal shapes kids first tab chew</i>	\$0 (OTC)		
<i>sm animal shapes/iron 15 mg tab chew</i>	\$0 (OTC)		
<i>sm multiple vitamins essential tab</i>	\$0 (OTC)		
<i>sm one daily essential tab</i>	\$0 (OTC)		
<i>stress formula tab</i>	\$0 (OTC)		
<i>tab-a-vite tab</i>	\$0 (OTC)		
TAB-A-VITE tab	\$0 (OTC)		
TAB-A-VITE WOMENS tab	\$0 (OTC)		
TAB-A-VITE/BETA CAROTENE tab	\$0 (OTC)		
<i>th children multi vitamins tab chew</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>th daily multiple vitamins tab</i>	\$0 (OTC)		
<i>thera tab</i>	\$0 (OTC)		
<i>thera-tabs tab</i>	\$0 (OTC)		
<i>therems tab</i>	\$0 (OTC)		
THEREMS tab	\$0 (OTC)		
<i>tri-vita 1500-400-35 unit-mg/ml soln</i>	\$0 (OTC)		
<i>tri-vitamin 1500-400-35 soln</i>	\$0 (OTC)		
<i>vit e-vit c-beta carotene 200-250-5000 tab</i>	\$0 (OTC)		
<i>vitachew multiple vitamin tab chew</i>	\$0 (OTC)		
<i>vitalee tab</i>	\$0 (OTC)		
VITALETS CHILDRENS tab chew	\$0 (OTC)		
<i>zoo friends tab chew, 60 mg tab chew</i>	\$0 (OTC)		
<i>zoo friends plus iron 15 mg tab chew</i>	\$0 (OTC)		
Prenatal Vitamins			
<i>cvs prenatal 28-0.8 mg tab</i>	\$0 (OTC)		
<i>gnp prenatal 28-0.8 mg tab</i>	\$0 (OTC)		
<i>hm prenatal 28-0.8 mg tab</i>	\$0 (OTC)		
<i>kp prenatal multivitamins 28-0.8 mg tab</i>	\$0 (OTC)		
<i>kpn prenatal 0.1 mg tab</i>	\$0 (OTC)		
<i>pnv prenatal plus multivitamin 27-1 mg tab</i>	\$0 (OTC)		
<i>prenatal 27-0.8 mg tab, 28-0.8 mg tab</i>	\$0 (OTC)		
<i>prenatal (w/iron & fa) 27-0.8 mg tab</i>	\$0 (OTC)		
<i>prenatal low iron 27-0.8 mg tab</i>	\$0 (OTC)		
<i>prenatal vitamin and mineral 28-0.8 mg tab</i>	\$0 (OTC)		
<i>prenatal vitamins 28-0.8 mg tab</i>	\$0 (OTC)		
<i>prenatal/iron tab</i>	\$0 (OTC)		
<i>qc prenatal 28-0.8 mg tab</i>	\$0 (OTC)		
<i>ra prenatal 28-0.8 mg tab</i>	\$0 (OTC)		
RIGHT STEP PRENATAL 27-0.8 mg tab	\$0 (OTC)		
<i>sm prenatal vitamins 28-0.8 mg tab</i>	\$0 (OTC)		
<i>th prenatal vitamins 28-0.8 mg tab</i>	\$0 (OTC)		
Vitamins W/ Lipotropics			
<i>b complex-c (lipotropic) tab</i>	\$0 (OTC)		
<i>mega multiple/chelated mineral tab</i>	\$0 (OTC)		
<i>multi-vitamin hp/minerals cap</i>	\$0 (OTC)		
NASAL AGENTS - SYSTEMIC AND TOPICAL			
Nasal Agent - Misc.			
<i>altamist spray 0.65 % nasal soln</i>	\$0 (OTC)		
AYR SALINE NASAL DROPS 0.65 % nasal soln	\$0 (OTC)		
<i>cvs saline nasal spray 0.65 % nasal soln</i>	\$0 (OTC)		
<i>cvs saline nose spray 0.65 % nasal soln</i>	\$0 (OTC)		
<i>deep sea nasal spray 0.65 % nasal soln</i>	\$0 (OTC)		
<i>eq saline nasal spray 0.65 % nasal soln</i>	\$0 (OTC)		
<i>eq saline nasal spray 0.65 % nasal soln</i>	\$0 (OTC)		
<i>gnp nasal moisturizing 0.65 % nasal soln</i>	\$0 (OTC)		
<i>hm saline nasal spray 0.65 % nasal soln</i>	\$0 (OTC)		
<i>little noses stuffy nose kit 0.65 % nasal soln</i>	\$0 (OTC)		
<i>little remedies saline nasal soln</i>	\$0 (OTC)		
<i>nasal moisturizing spray 0.65 % nasal soln</i>	\$0 (OTC)		
<i>px saline nasal spray 0.65 % nasal soln</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>ra saline nasal spray 0.65 % nasal soln</i>	\$0 (OTC)		
<i>saline mist spray 0.65 % nasal soln</i>	\$0 (OTC)		
<i>saline nasal spray 0.65 % nasal soln</i>	\$0 (OTC)		
<i>sb saline nose 0.65 % nasal soln</i>	\$0 (OTC)		
<i>sea soft nasal mist 0.65 % nasal soln</i>	\$0 (OTC)		
<i>sm nasal spray saline 0.65 % nasal soln</i>	\$0 (OTC)		
<i>tgt saline nasal spray 0.65 % nasal soln</i>	\$0 (OTC)		
Nasal Antiallergy			
<i>cromolyn sodium 5.2 mg/act nasal aer soln</i>	\$0 (OTC)		
<i>nasal allergy 5.2 mg/act nasal aer soln</i>	\$0 (OTC)		
Nasal Steroids			
<i>allergy spray 24 hour 55 mcg/act nasal aer</i>	\$0 (OTC)		
<i>cvs nasal allergy spray 55 mcg/act nasal aer</i>	\$0 (OTC)		
<i>eq nasal allergy 55 mcg/act nasal aer</i>	\$0 (OTC)		
<i>gnp 24 hour nasal allergy 55 mcg/act nasal aer</i>	\$0 (OTC)		
<i>goodsense nasal allergy spray 55 mcg/act nasal aer</i>	\$0 (OTC)		
<i>kls aller-cort 55 mcg/act nasal aer</i>	\$0 (OTC)		
<i>nasal allergy 24 hour 55 mcg/act nasal aer</i>	\$0 (OTC)		
<i>ra nasal allergy 55 mcg/act nasal aer</i>	\$0 (OTC)		
<i>triamcinolone acetonide 55 mcg/act nasal aer</i>	\$0 (OTC)		
Sympathomimetic Decongestants			
<i>12 hour decongestant 120 mg tab er 12 hr</i>	\$0 (OTC)		
<i>12 hour decongestant 0.05 % nasal soln</i>	\$0 (OTC)		
<i>12 hour nasal decongestant 120 mg tab er 12 hr</i>	\$0 (OTC)		
<i>12 hour nasal decongestant 0.05 % nasal soln</i>	\$0 (OTC)		
<i>12 hour nasal relief spray 0.05 % nasal soln</i>	\$0 (OTC)		
<i>12 hour nasal spray 0.05 % nasal soln</i>	\$0 (OTC)		
<i>4-way fast acting 1 % nasal soln</i>	\$0 (OTC)		
<i>anefrin spray 0.05 % nasal soln</i>	\$0 (OTC)		
<i>anefrin spray/moisturizing 0.05 % nasal soln</i>	\$0 (OTC)		
<i>childrens silfedrine 15 mg/5ml liq</i>	\$0 (OTC)		
<i>cvs 12 hour cold relief 120 mg tab er 12 hr</i>	\$0 (OTC)		
<i>cvs 12 hour nasal decongestant 120 mg tab er 12 hr</i>	\$0 (OTC)		
<i>cvs nasal decongestant 30 mg tab</i>	\$0 (OTC)		
<i>cvs nasal decongestant pe 10 mg tab</i>	\$0 (OTC)		
<i>cvs nasal mist 0.05 % nasal soln</i>	\$0 (OTC)		
<i>cvs nasal spray 0.05 % nasal soln</i>	\$0 (OTC)		
<i>cvs nose drops 1 % nasal soln</i>	\$0 (OTC)		
<i>cvs sinus pe decongestant 10 mg tab</i>	\$0 (OTC)		
<i>ephrene nose drops 1 % nasal soln</i>	\$0 (OTC)		
<i>eq nasal spray 0.05 % nasal soln</i>	\$0 (OTC)		
<i>eq nasal spray fast acting 1 % nasal soln</i>	\$0 (OTC)		
<i>eq suphedrine 30 mg tab</i>	\$0 (OTC)		
<i>eq 12 hour decongestant 120 mg tab er 12 hr</i>	\$0 (OTC)		
<i>eq 12 hour nasal decongestant 30 mg tab</i>	\$0 (OTC)		
<i>eq 12 hour nasal decongestant pe 10 mg tab</i>	\$0 (OTC)		
<i>eq 12 hour nasal four 1 % nasal soln</i>	\$0 (OTC)		
<i>eq 12 hour nasal spray 12 hour 0.05 % nasal soln</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>eql nasal spray fast acting 1 % nasal soln</i>	\$0 (OTC)		
<i>eql nasal spray no drip 0.05 % nasal soln</i>	\$0 (OTC)		
<i>eql sinus nasal spray 0.05 % nasal soln</i>	\$0 (OTC)		
<i>gnp 12 hour nasal spray 0.05 % nasal soln</i>	\$0 (OTC)		
<i>gnp nasal decongestant 120 mg tab er 12 hr, 30 mg tab</i>	\$0 (OTC)		
<i>gnp nasal decongestant pe 10 mg tab</i>	\$0 (OTC)		
<i>gnp nasal spray 0.05 % nasal soln</i>	\$0 (OTC)		
<i>gnp nasal spray extra moist 0.05 % nasal soln</i>	\$0 (OTC)		
<i>gnp nasal spray fast acting 1 % nasal soln</i>	\$0 (OTC)		
<i>gnp no drip nasal spray 0.05 % nasal soln</i>	\$0 (OTC)		
<i>gnp nose drops extra strength 1 % nasal soln</i>	\$0 (OTC)		
<i>gnp pseudoephedrine hcl 12 hr 120 mg tab er 12 hr</i>	\$0 (OTC)		
<i>gnp suphedrin 15 mg/5ml liq</i>	\$0 (OTC)		
<i>hm nasal decongestant 30 mg tab</i>	\$0 (OTC)		
<i>hm nasal decongestant 12 hour 120 mg tab er 12 hr</i>	\$0 (OTC)		
<i>hm nasal decongestant pe 10 mg tab</i>	\$0 (OTC)		
<i>hm nasal spray 0.05 % nasal soln</i>	\$0 (OTC)		
<i>hm nose drops 1 % nasal soln</i>	\$0 (OTC)		
<i>hm sinus nasal spray 0.05 % nasal soln</i>	\$0 (OTC)		
<i>kls nasal decongestant spray 0.05 % nasal soln</i>	\$0 (OTC)		
<i>kp pseudoephedrine hcl 30 mg tab, 60 mg tab</i>	\$0 (OTC)		
<i>meijer nasal decongestant 30 mg tab</i>	\$0 (OTC)		
<i>mucinex sinus-max clear & cool 0.05 % nasal soln</i>	\$0 (OTC)		
<i>mucinex sinus-max full force 0.05 % nasal soln</i>	\$0 (OTC)		
<i>mucinex sinus-max sinus/allrgy 0.05 % nasal soln</i>	\$0 (OTC)		
<i>nasal decongestant 10 mg tab, 30 mg tab</i>	\$0 (OTC)		
<i>nasal decongestant 1 % nasal soln, 30 mg/5ml syr</i>	\$0 (OTC)		
<i>nasal decongestant 12hr 120 mg tab er 12 hr</i>	\$0 (OTC)		
<i>nasal decongestant d 30 mg tab</i>	\$0 (OTC)		
<i>nasal decongestant d max str 30 mg tab</i>	\$0 (OTC)		
<i>nasal decongestant max st 30 mg tab</i>	\$0 (OTC)		
<i>nasal decongestant pe 10 mg tab</i>	\$0 (OTC)		
<i>nasal decongestant pe max st 10 mg tab</i>	\$0 (OTC)		
<i>nasal decongestant spray 0.05 % nasal soln</i>	\$0 (OTC)		
<i>nasal four 1 % nasal soln</i>	\$0 (OTC)		
<i>nasal spray 0.05 % nasal soln</i>	\$0 (OTC)		
<i>nasal spray 12 hour 0.05 % nasal soln</i>	\$0 (OTC)		
<i>nasal spray extra moisturizing 0.05 % nasal soln</i>	\$0 (OTC)		
<i>nasal spray moisturizing 12 hr 0.05 % nasal soln</i>	\$0 (OTC)		
<i>nasal spray no drip 0.05 % nasal soln</i>	\$0 (OTC)		
<i>nasal spray sinus 0.05 % nasal soln</i>	\$0 (OTC)		
<i>NEO-SYNEPHRINE 1 % nasal soln</i>	\$0 (OTC)		
<i>NEO-SYNEPHRINE COLD & SINUS 0.25 % nasal soln</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>no drip nasal spray 0.05 % nasal soln</i>	\$0 (OTC)		
<i>non-pseudo sinus decongestant 10 mg tab</i>	\$0 (OTC)		
<i>nu-way nasal decongestant 1 % nasal soln</i>	\$0 (OTC)		
<i>oxymetazoline hcl 0.05 % nasal soln</i>	\$0 (OTC)		
<i>pseudoephedrine hcl 30 mg tab, 60 mg tab</i>	\$0 (OTC)		
<i>pseudoephedrine hcl er 120 mg tab er 12 hr</i>	\$0 (OTC)		
<i>px nasal decongestant 120 mg tab er 12 hr, 30 mg tab</i>	\$0 (OTC)		
<i>px nasal decongestant pe 10 mg tab</i>	\$0 (OTC)		
<i>px nasal four 1 % nasal soln</i>	\$0 (OTC)		
<i>px nasal spray moisturizing 0.05 % nasal soln</i>	\$0 (OTC)		
<i>px no drip nasal spray 0.05 % nasal soln</i>	\$0 (OTC)		
<i>px original nasal spray 0.05 % nasal soln</i>	\$0 (OTC)		
<i>qc nasal decongestant pe 10 mg tab</i>	\$0 (OTC)		
<i>qc suphedrine 30 mg tab</i>	\$0 (OTC)		
<i>qc suphedrine maximum strength 120 mg tab er 12 hr</i>	\$0 (OTC)		
<i>qc suphedrine pe 10 mg tab</i>	\$0 (OTC)		
<i>qlearquil 0.05 % nasal soln</i>	\$0 (OTC)		
<i>ra 12 hour nasal spray 0.05 % nasal soln</i>	\$0 (OTC)		
<i>ra nasal decongestant pe 10 mg tab</i>	\$0 (OTC)		
<i>ra nose drops extra strength 1 % nasal soln</i>	\$0 (OTC)		
<i>ra sinus/congestion relief pe 10 mg tab</i>	\$0 (OTC)		
<i>ra suphedrine 120 mg tab er 12 hr, 30 mg tab</i>	\$0 (OTC)		
<i>sb 12hr nasal spray 0.05 % nasal soln</i>	\$0 (OTC)		
<i>severe congestion 0.05 % nasal soln</i>	\$0 (OTC)		
<i>sinus & allergy 12 hour 120 mg tab er 12 hr</i>	\$0 (OTC)		
<i>sinus 12 hour 120 mg tab er 12 hr</i>	\$0 (OTC)		
<i>sinus nasal spray 0.05 % nasal soln</i>	\$0 (OTC)		
<i>sinus relief 0.05 % nasal soln</i>	\$0 (OTC)		
<i>sinus relief extra strength 1 % nasal soln</i>	\$0 (OTC)		
<i>sinus relief nasal spray 0.05 % nasal soln</i>	\$0 (OTC)		
<i>sm 12 hour sinus decongestant 120 mg tab er 12 hr</i>	\$0 (OTC)		
<i>sm 12-hour no drip 0.05 % nasal soln</i>	\$0 (OTC)		
<i>sm adult nasal decongestant 15 mg/5ml liq</i>	\$0 (OTC)		
<i>sm nasal decongestant 120 mg tab er 12 hr</i>	\$0 (OTC)		
<i>sm nasal decongestant max st 30 mg tab</i>	\$0 (OTC)		
<i>sm nasal decongestant pe 10 mg tab</i>	\$0 (OTC)		
<i>sm nasal pump spray mist 0.05 % nasal soln</i>	\$0 (OTC)		
<i>sm nasal spray 0.05 % nasal soln</i>	\$0 (OTC)		
<i>sm nasal spray 12 hour 0.05 % nasal soln</i>	\$0 (OTC)		
<i>sm nasal spray moisturizing 0.05 % nasal soln</i>	\$0 (OTC)		
<i>sm nasal spray sinus 0.05 % nasal soln</i>	\$0 (OTC)		
<i>sm nose drops nasal decongest 1 % nasal soln</i>	\$0 (OTC)		
<i>sudogest 30 mg tab, 60 mg tab</i>	\$0 (OTC)		
<i>sudogest 12 hour 120 mg tab er 12 hr</i>	\$0 (OTC)		
<i>sudogest maximum strength 30 mg tab</i>	\$0 (OTC)		
<i>sudogest pe 10 mg tab</i>	\$0 (OTC)		
<i>suphedrine 12hour 120 mg tab er 12 hr</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>sw nasal decongestant max st 30 mg tab</i>	\$0 (OTC)		
<i>sw suphedrine 12 hr decongest 120 mg tab er 12 hr</i>	\$0 (OTC)		
<i>tgt 12 hour nasal decongestant 120 mg tab er 12 hr</i>	\$0 (OTC)		
<i>tgt nasal decongestant 30 mg tab</i>	\$0 (OTC)		
<i>tgt nasal decongestant 12-hour 0.05 % nasal soln</i>	\$0 (OTC)		
<i>tgt nasal decongestant pe 10 mg tab</i>	\$0 (OTC)		
<i>tgt nasal spray 0.05 % nasal soln</i>	\$0 (OTC)		
<i>tgt sinus 12 hour 120 mg tab er 12 hr</i>	\$0 (OTC)		
<i>th 12 hour decongestant 120 mg tab er 12 hr</i>	\$0 (OTC)		
<i>th nasal decongestant pe 10 mg tab</i>	\$0 (OTC)		
<i>th nasal relief 0.05 % nasal soln</i>	\$0 (OTC)		
<i>th nasal relief moisturizing 0.05 % nasal soln</i>	\$0 (OTC)		
<i>th nasal relief sinus 0.05 % nasal soln</i>	\$0 (OTC)		
<i>ultra fine mist nasal spray 0.05 % nasal soln</i>	\$0 (OTC)		
<i>wal-four 1 % nasal soln</i>	\$0 (OTC)		
<i>wal-phed 30 mg tab</i>	\$0 (OTC)		
<i>wal-phed 12 hour 120 mg tab er 12 hr</i>	\$0 (OTC)		
<i>wal-phed d 120 mg tab er 12 hr, 30 mg tab</i>	\$0 (OTC)		
<i>wal-phed pe 10 mg tab</i>	\$0 (OTC)		
NONHORMONAL CONTRACEPTIVES			
Nonhormonal Contraceptives			
ENCARE 100 mg vag supp	\$0 (OTC)		
OPTIONS CONCEPTROL 4 % vag gel	\$0 (OTC)		
OPTIONS GYNOL II CONTRACEPTIVE 3 % vag gel	\$0 (OTC)		
SHUR-SEAL CONTRACEPTIVE 2 % vag gel	\$0 (OTC)		
TODAY SPONGE 1000 mg vag misc	\$0 (OTC)		
VCF VAGINAL CONTRACEPTIVE 28 % vag film	\$0 (OTC)		
VCF VAGINAL CONTRACEPTIVE 12.5 % vag foam, 4 % vag gel	\$0 (OTC)		
NUTRIENTS			
Misc. Nutritional Substances			
<i>cvs fish oil 1000 mg cap</i>	\$0 (OTC)		
<i>cvs natural fish oil 1000 mg cap</i>	\$0 (OTC)		
<i>enteric fish oil 1000 mg cap dr</i>	\$0 (OTC)		
<i>eql fish oil 1000 mg cap</i>	\$0 (OTC)		
<i>fish oil 1000 mg cap, 1000 mg cap dr</i>	\$0 (OTC)		
<i>fish oil concentrate 1000 mg cap, 300 mg cap</i>	\$0 (OTC)		
<i>fish oil omega-3 1000 mg cap</i>	\$0 (OTC)		
<i>fish oil/super potent/no burp 1000 mg cap</i>	\$0 (OTC)		
<i>gnp fish oil 1000 mg cap, 1000 mg cap dr</i>	\$0 (OTC)		
<i>hm fish oil 1000 mg cap, 1000 mg cap dr</i>	\$0 (OTC)		
<i>maximum epa 1000 mg cap</i>	\$0 (OTC)		
<i>odorless coated fish oil 1000 mg cap dr</i>	\$0 (OTC)		
<i>omega 3 1000 mg cap</i>	\$0 (OTC)		
<i>omega 3 500 500 mg cap</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>omega iii epa+dha 1000 mg cap</i>	\$0 (OTC)		
<i>omega-3 1000 mg cap</i>	\$0 (OTC)		
<i>omega-3 fish oil 1000 mg cap, 500 mg cap</i>	\$0 (OTC)		
<i>pa fish oil 1000 mg cap</i>	\$0 (OTC)		
<i>ra fish oil 1000 mg cap, 1000 mg cap dr</i>	\$0 (OTC)		
<i>sb omega-3 fish oil 1000 mg cap</i>	\$0 (OTC)		
<i>sm fish oil 1000 mg cap</i>	\$0 (OTC)		
<i>super omega-3 1000 mg cap</i>	\$0 (OTC)		
<i>th omega-3 fish oil 1000 mg cap</i>	\$0 (OTC)		
<i>ultra omega 3 1000 mg cap</i>	\$0 (OTC)		
OPHTHALMIC AGENTS			
Artificial Tears And Lubricants			
<i>advanced eye relief 1-0.3 % ophth soln</i>	\$0 (OTC)		
<i>artificial tears 0.4 % ophth soln, 1 % ophth soln</i>	\$0 (OTC)		
<i>artificial tears 0.1-0.3 % ophth soln</i>	\$0 (OTC)		QL(30 EA per 30 days)
<i>artificial tears 0.1-0.3 % ophth soln, 0.5-0.6 % ophth soln, 5-6 mg/ml ophth soln</i>	\$0 (OTC)		QL(30 ML per 30 days)
<i>artificial tears pf 0.1-0.3 % ophth soln</i>	\$0 (OTC)		
<i>clear eyes natural tears 5-6 mg/ml ophth soln</i>	\$0 (OTC)		QL(30 ML per 30 days)
<i>cvs dry-eye relief nighttime 42.5-57.3 % ophth oint</i>	\$0 (OTC)		
<i>cvs eye lubricant ophth oint</i>	\$0 (OTC)		
<i>cvs eye lubricant nighttime ophth oint</i>	\$0 (OTC)		
<i>cvs lubricant drops fast act 0.4-0.3 % ophth soln</i>	\$0 (OTC)		
<i>cvs lubricant drops long last 0.4-0.3 % ophth soln</i>	\$0 (OTC)		
<i>cvs lubricant eye drops 0.4-0.3 % ophth soln</i>	\$0 (OTC)		
<i>cvs lubricant eye drops 0.5 % ophth soln</i>	\$0 (OTC)		QL(30 EA per 30 days)
<i>cvs lubricant eye drops 0.5 % ophth soln</i>	\$0 (OTC)		QL(30 ML per 30 days)
<i>cvs lubricant eye drops (pf) 0.4-0.3 % ophth soln, 0.5 % ophth soln</i>	\$0 (OTC)		
<i>cvs lubricant eye drops pf 0.5 % ophth soln</i>	\$0 (OTC)		
<i>cvs natural tears 0.1-0.3 % ophth soln</i>	\$0 (OTC)		
<i>cvs natural tears pf 0.1-0.3 % ophth soln</i>	\$0 (OTC)		
<i>eq gentle lubricant 0.3 % ophth soln</i>	\$0 (OTC)		
<i>eq lubricant eye drops 0.4-0.3 % ophth soln</i>	\$0 (OTC)		
<i>eq restore plus lubricant eye 0.5 % ophth soln</i>	\$0 (OTC)		
<i>eq restore pm ophth oint</i>	\$0 (OTC)		
<i>eq restore tears 0.5 % ophth soln</i>	\$0 (OTC)		QL(30 ML per 30 days)
<i>eq revive plus lubricant eye 0.5 % ophth soln</i>	\$0 (OTC)		
<i>eye lubricant ophth oint</i>	\$0 (OTC)		
<i>for sty relief 31.9-57.7 % ophth oint</i>	\$0 (OTC)		
<i>gentle tears 0.1-0.2-0.3 % ophth soln</i>	\$0 (OTC)		
<i>gnp artificial tears 5-6 mg/ml ophth soln</i>	\$0 (OTC)		QL(30 ML per 30 days)
<i>gnp eye drops 0.4-0.3 % ophth soln</i>	\$0 (OTC)		
<i>gnp eye drops 0.5 % ophth soln</i>	\$0 (OTC)		QL(30 ML per 30 days)
<i>gnp eye drops long lasting 0.4-0.3 % ophth soln</i>	\$0 (OTC)		
<i>gnp lubricant eye drops 0.4-0.3 % ophth soln</i>	\$0 (OTC)		
<i>gnp lubricant eye drops 0.5 % ophth soln</i>	\$0 (OTC)		QL(30 ML per 30 days)
<i>gnp lubricant pm ophth oint</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>gnp lubricating plus eye drops 0.5 % ophth soln</i>	\$0 (OTC)		
<i>gnp ultra lubricant eye drops 0.4-0.3 % ophth soln</i>	\$0 (OTC)		
<i>goodsense artificial tears 0.5-0.6 % ophth soln</i>	\$0 (OTC)		QL(30 ML per 30 days)
<i>goodsense lubricating eye drop 0.5 % ophth soln</i>	\$0 (OTC)		
<i>hm lubricating plus 0.5 % ophth soln</i>	\$0 (OTC)		
<i>hm lubricating tears 0.4-0.3 % ophth soln</i>	\$0 (OTC)		
<i>liquitears 1.4 % ophth soln</i>	\$0 (OTC)		
<i>lubricant drops 1.4 % ophth soln</i>	\$0 (OTC)		
<i>lubricant eye ophth oint</i>	\$0 (OTC)		
<i>lubricant eye drops 0.4-0.3 % ophth soln</i>	\$0 (OTC)		
<i>lubricant eye drops 0.4-0.3 % ophth soln</i>	\$0 (OTC)		
<i>lubricant eye drops 0.5 % ophth soln</i>	\$0 (OTC)		QL(30 EA per 30 days)
<i>lubricant eye drops 0.5 % ophth soln</i>	\$0 (OTC)		QL(30 ML per 30 days)
<i>lubricant eye drops (pf) 0.4-0.3 % ophth soln</i>	\$0 (OTC)		
<i>lubricant eye drops pf 0.5 % ophth soln</i>	\$0 (OTC)		
<i>lubricant eye nighttime ophth oint</i>	\$0 (OTC)		
<i>lubricant pm ophth oint</i>	\$0 (OTC)		
<i>lubricating eye drops 0.4-0.3 % ophth soln</i>	\$0 (OTC)		
<i>lubricating plus eye drops 0.5 % ophth soln</i>	\$0 (OTC)		
<i>lubricating tears eye drops 0.1-0.3 % ophth soln</i>	\$0 (OTC)		
<i>lubrifresh p.m. ophth oint</i>	\$0 (OTC)		
<i>moisturizing lubricant eye 0.5 % ophth soln</i>	\$0 (OTC)		QL(30 ML per 30 days)
<i>natural balance tears 0.4 % ophth soln</i>	\$0 (OTC)		
<i>natures tears 0.4 % ophth soln</i>	\$0 (OTC)		
<i>polyvinyl alcohol 1.4 % ophth soln</i>	\$0 (OTC)		
<i>pure & gentle lubricant 0.3 % ophth soln</i>	\$0 (OTC)		
<i>PURE & GENTLE LUBRICANT 3 mg/ml ophth soln</i>	\$0 (OTC)		
<i>px artificial tears 5-6 mg/ml ophth soln</i>	\$0 (OTC)		QL(30 ML per 30 days)
<i>qc artificial tears 5-6 mg/ml ophth soln</i>	\$0 (OTC)		QL(30 ML per 30 days)
<i>ra lubricant eye 0.4-0.3 % ophth soln</i>	\$0 (OTC)		
<i>ra lubricant eye drops 0.5 % ophth soln</i>	\$0 (OTC)		QL(30 ML per 30 days)
<i>REFRESH 1.4-0.6 % ophth soln</i>	\$0 (OTC)		
<i>refresh lacri-lube ophth oint</i>	\$0 (OTC)		
<i>retaine cmc 0.5 % ophth soln</i>	\$0 (OTC)		
<i>retaine pm ophth oint</i>	\$0 (OTC)		
<i>sm artificial tears ophth soln</i>	\$0 (OTC)		QL(30 ML per 30 days)
<i>sm lubricant eye drops 0.4-0.3 % ophth soln</i>	\$0 (OTC)		
<i>sm lubricating plus 0.5 % ophth soln</i>	\$0 (OTC)		
<i>sm lubricating tears 0.4-0.3 % ophth soln</i>	\$0 (OTC)		
<i>soothe hydration 1.25 % ophth soln</i>	\$0 (OTC)		
<i>soothe xp xtra protection ophth soln</i>	\$0 (OTC)		QL(30 ML per 30 days)
<i>systane contacts ophth soln</i>	\$0 (OTC)		QL(30 ML per 30 days)
<i>tears again ophth oint</i>	\$0 (OTC)		
<i>tears again 1.4 % ophth soln</i>	\$0 (OTC)		
<i>tears naturale free 0.1-0.3 % ophth soln</i>	\$0 (OTC)		
<i>tears naturale ii ophth soln</i>	\$0 (OTC)		QL(30 ML per 30 days)
<i>tears pure 0.1-0.3 % ophth soln</i>	\$0 (OTC)		QL(30 ML per 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>tgt lubricant eye drops 0.4-0.3 % ophth soln</i>	\$0 (OTC)		
<i>tgt lubricant eye nighttime 83-15 % ophth oint</i>	\$0 (OTC)		
<i>ultra fresh 0.5 % ophth soln</i>	\$0 (OTC)		QL(30 ML per 30 days)
<i>ultra fresh pm ophth oint</i>	\$0 (OTC)		
<i>ultra lubricant eye drops 0.4-0.3 % ophth soln</i>	\$0 (OTC)		
<i>ultra lubricating eye drops 0.4-0.3 % ophth soln</i>	\$0 (OTC)		
Contact Lens Solutions			
B&L SENSITIVE EYES DAILY CLEAN soln	\$0 (OTC)		
BIOTRUE soln	\$0 (OTC)		
BOSTON ADVANCE CLEANER soln	\$0 (OTC)		
BOSTON ADVANCE CONDITIONING soln	\$0 (OTC)		
BOSTON CONDITIONING soln	\$0 (OTC)		
BOSTON ONE STEP CLEANER soln	\$0 (OTC)		
BOSTON REWETTING soln	\$0 (OTC)		
BOSTON SIMPLUS soln	\$0 (OTC)		
CLERZ PLUS soln	\$0 (OTC)		
<i>cvs contact lens relief/rewet soln</i>	\$0 (OTC)		
<i>cvs multi-purpose no-rub soln</i>	\$0 (OTC)		
<i>gnp multi-purpose soln</i>	\$0 (OTC)		
<i>hm multi-purpose no rub soln</i>	\$0 (OTC)		
<i>lubricating & rewetting soln</i>	\$0 (OTC)		
<i>multi-purpose no-rub soln</i>	\$0 (OTC)		
<i>multi-purpose solution soln</i>	\$0 (OTC)		
OPTI-FREE DAILY CLEANER soln	\$0 (OTC)		
OPTI-FREE EXPRESS soln	\$0 (OTC)		
OPTI-FREE EXPRESS REWETTING soln	\$0 (OTC)		
OPTI-FREE REPLENISH soln	\$0 (OTC)		
<i>ra cleaning/disinfecting lens soln</i>	\$0 (OTC)		
<i>ra multi-purpose no rub soln</i>	\$0 (OTC)		
<i>ra multi-purpose solution soln</i>	\$0 (OTC)		
<i>ra saline solution soln</i>	\$0 (OTC)		
RENU DISINFECTING soln	\$0 (OTC)		
RENU MULTIPLUS soln	\$0 (OTC)		
RENU MULTIPLUS LUB/REWETTING soln	\$0 (OTC)		
RENU REWETTING DROPS soln	\$0 (OTC)		
<i>rewetting drops soln</i>	\$0 (OTC)		
<i>saline soln</i>	\$0 (OTC)		
<i>saline sensitive eyes soln</i>	\$0 (OTC)		
<i>sb multi-purpose 0.9 % soln</i>	\$0 (OTC)		
SENSITIVE EYES PLUS SALINE soln	\$0 (OTC)		
<i>sm multi-purpose soln</i>	\$0 (OTC)		
<i>sm saline solution soln</i>	\$0 (OTC)		
UNISOL 4 soln	\$0 (OTC)		
VISINE FOR CONTACTS soln	\$0 (OTC)		
Ophthalmic Anti-allergy			
<i>allergy eye drops 0.025 % ophth soln, 0.035 % ophth soln</i>	\$0 (OTC)		QL(10 ML per 30 days)
<i>cvs allergy eye drops 0.025 % ophth soln, 0.035 % ophth soln</i>	\$0 (OTC)		QL(10 ML per 30 days)
<i>cvs eye itch relief 0.025 % ophth soln, 0.035 %</i>	\$0 (OTC)		QL(10 ML per 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>ophth soln</i>			
<i>eq eye itch relief 0.025 % ophth soln, 0.035 % ophth soln</i>	\$0 (OTC)		QL(10 ML per 30 days)
<i>eye itch relief 0.025 % ophth soln, 0.035 % ophth soln</i>	\$0 (OTC)		QL(10 ML per 30 days)
<i>goodsense itchy eye 0.025 % ophth soln</i>	\$0 (OTC)		QL(10 ML per 30 days)
<i>hm eye itch relief 0.025 % ophth soln, 0.035 % ophth soln</i>	\$0 (OTC)		QL(10 ML per 30 days)
<i>ketotifen fumarate 0.035 % ophth soln</i>	\$0 (OTC)		QL(10 ML per 30 days)
<i>kp ketotifen fumarate 0.035 % ophth soln</i>	\$0 (OTC)		QL(10 ML per 30 days)
<i>ra eye itch relief 0.025 % ophth soln, 0.035 % ophth soln</i>	\$0 (OTC)		QL(10 ML per 30 days)
<i>sm eye itch relief 0.025 % ophth soln, 0.035 % ophth soln</i>	\$0 (OTC)		QL(10 ML per 30 days)
<i>tgt eye itch relief 0.025 % ophth soln</i>	\$0 (OTC)		QL(10 ML per 30 days)
<i>wal-zyr 0.025 % ophth soln</i>	\$0 (OTC)		QL(10 ML per 30 days)
Ophthalmics - Misc.			
<i>altachlore 5 % ophth oint</i>	\$0 (OTC)		
<i>altachlore 5 % ophth soln</i>	\$0 (OTC)		
<i>cvs sodium chloride 5 % ophth oint</i>	\$0 (OTC)		
<i>cvs sodium chloride 5 % ophth soln</i>	\$0 (OTC)		
<i>eye allergy itch relief 0.2 % ophth soln</i>	\$0 (OTC)		
<i>eye allergy itch/redness rel 0.1 % ophth soln</i>	\$0 (OTC)		
<i>gnp olopatadine hcl 0.1 % ophth soln, 0.2 % ophth soln</i>	\$0 (OTC)		
<i>MURO 128 2 % ophth soln</i>	\$0 (OTC)		
<i>ra ophthalmic 5 % ophth soln</i>	\$0 (OTC)		
<i>sochlor 5 % ophth soln</i>	\$0 (OTC)		
<i>sodium chloride (hypertonic) 5 % ophth oint</i>	\$0 (OTC)		
<i>sodium chloride (hypertonic) 5 % ophth soln</i>	\$0 (OTC)		
OTIC AGENTS			
Otic Agents - Miscellaneous			
<i>auraphene-b 6.5 % otic soln</i>	\$0 (OTC)		
<i>carbamoxide ear drops 6.5 % otic soln</i>	\$0 (OTC)		
<i>cvs ear drops 6.5 % otic soln</i>	\$0 (OTC)		
<i>cvs ear wax removal system 6.5 % otic soln</i>	\$0 (OTC)		
<i>cvs earwax removal kit 6.5 % otic soln</i>	\$0 (OTC)		
<i>ear drops 6.5 % otic soln</i>	\$0 (OTC)		
<i>ear drops earwax aid 6.5 % otic soln</i>	\$0 (OTC)		
<i>ear wax removal drops 6.5 % otic soln</i>	\$0 (OTC)		
<i>ear wax removal kit 6.5 % otic soln</i>	\$0 (OTC)		
<i>ear wax removal system 6.5 % otic soln</i>	\$0 (OTC)		
<i>earwax removal 6.5 % otic soln</i>	\$0 (OTC)		
<i>earwax removal kit 6.5 % otic soln</i>	\$0 (OTC)		
<i>earwax treatment drops 6.5 % otic soln</i>	\$0 (OTC)		
<i>eq ear wax removal aid 6.5 % otic soln</i>	\$0 (OTC)		
<i>eq ear drops 6.5 % otic soln</i>	\$0 (OTC)		
<i>gnp ear drops 6.5 % otic soln</i>	\$0 (OTC)		
<i>gnp ear systems 6.5 % otic soln</i>	\$0 (OTC)		
<i>gnp earwax removal drops 6.5 % otic soln</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>gnp earwax removal kit 6.5 % otic soln</i>	\$0 (OTC)		
<i>goodsense ear wax kit 6.5 % otic soln</i>	\$0 (OTC)		
<i>goodsense ear wax removal 6.5 % otic soln</i>	\$0 (OTC)		
<i>hm earwax removal aid 6.5 % otic soln</i>	\$0 (OTC)		
<i>hm earwax removal kit 6.5 % otic soln</i>	\$0 (OTC)		
<i>murine ear wax removal system 6.5 % otic soln</i>	\$0 (OTC)		
<i>ra ear drops 6.5 % otic soln</i>	\$0 (OTC)		
<i>sb ear wax remover 6.5 % otic soln</i>	\$0 (OTC)		
<i>sm ear drops 6.5 % otic soln</i>	\$0 (OTC)		
PHARMACEUTICAL AIDS			
Pharmaceutical Aids			
<i>cvs instant food thickener oral pwdr</i>	\$0 (OTC)		
<i>polyethylene glycol 3350 pwdr</i>	\$0 (OTC)		QL(527 GM per 30 days)
RESOURCE THICKENUP CLEAR oral pwdr	\$0 (OTC)		
<i>sorbitol 70 % soln</i>	\$0 (OTC)		
<i>sorbitol 70 % soln</i>	\$0 (OTC)		
THICK NOW oral pwdr	\$0 (OTC)		
THICK-IT oral pwdr	\$0 (OTC)		
THICK-IT #2 oral pwdr	\$0 (OTC)		
THICKENUP CLEAR pckt	\$0 (OTC)		
RESPIRATORY TRACT/PULMONARY AGENTS			
Antihistamines			
<i>ed chlorped jr 2 mg/5ml syr</i>	\$0 (OTC)		
VAGINAL PRODUCTS			
Vaginal Anti-infectives			
<i>7 day vaginal 2 % vag crm</i>	\$0 (OTC)		
<i>clotrimazole 1 % vag crm</i>	\$0 (OTC)		
<i>clotrimazole 3 2 % vag crm</i>	\$0 (OTC)		
<i>clotrimazole 3 day 2 % vag crm</i>	\$0 (OTC)		
<i>clotrimazole-7 1 % vag crm</i>	\$0 (OTC)		
<i>cvs 3-day vaginal 2 % vag crm</i>	\$0 (OTC)		
<i>cvs clotrimazole 3 2 % vag crm</i>	\$0 (OTC)		
<i>cvs miconazole 1 combo pack 1200 & 2 mg & % vag kit</i>	\$0 (OTC)		
<i>cvs miconazole 1 combo-wipes 1200 & 2 mg & % vag kit</i>	\$0 (OTC)		
<i>cvs miconazole 3 combo pack 200 & 2 mg-% (9gm) vag kit</i>	\$0 (OTC)		
<i>cvs miconazole 3 combo-suppl 200 & 2 mg-% (9gm) vag kit</i>	\$0 (OTC)		
<i>cvs miconazole 3-day combo app 200 & 2 mg-% (9gm) vag kit</i>	\$0 (OTC)		
<i>cvs miconazole 7 2 % vag crm</i>	\$0 (OTC)		
<i>eq miconazole 1 1200 & 2 mg & % vag kit</i>	\$0 (OTC)		
<i>eq miconazole 7 2 % vag crm</i>	\$0 (OTC)		
<i>eq miconazole 7 day treatment 2 % vag crm</i>	\$0 (OTC)		
<i>eql miconazole 1 1200 & 2 mg & % vag kit</i>	\$0 (OTC)		
<i>eql miconazole 3 200 & 2 mg-% (9gm) vag kit</i>	\$0 (OTC)		
<i>eql miconazole 7 2 % vag crm</i>	\$0 (OTC)		
<i>gnp clotrimazole 3 2 % vag crm</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>gnp miconazole 3 200 & 2 mg-% (9gm) vag kit</i>	\$0 (OTC)		
<i>gnp miconazole 7 2 % vag crm</i>	\$0 (OTC)		
<i>miconazole 1 1200 & 2 mg & % vag kit</i>	\$0 (OTC)		
<i>miconazole 3 vag kit</i>	\$0 (OTC)		
<i>miconazole 3 4 % vag crm</i>	\$0 (OTC)		
<i>miconazole 3 applicator 200 & 2 mg-% (9gm) vag kit</i>	\$0 (OTC)		
<i>miconazole 3 applicator 200 & 2 mg-% (9gm) vag kit</i>	\$0 (OTC)		
<i>miconazole 3 combo pack 200 & 2 mg-% (9gm) vag kit</i>	\$0 (OTC)		
<i>miconazole 3 combo pack 200 & 2 mg-% (9gm) vag kit</i>	\$0 (OTC)		
<i>miconazole 3 combo pack app 200 & 2 mg-% (9gm) vag kit</i>	\$0 (OTC)		
<i>miconazole 3 combo-suppl 200 & 2 mg-% (9gm) vag kit</i>	\$0 (OTC)		
<i>miconazole 7 100 mg vag suppl</i>	\$0 (OTC)		
<i>miconazole 7 2 % vag crm</i>	\$0 (OTC)		
<i>miconazole nitrate 100 mg vag suppl</i>	\$0 (OTC)		
<i>miconazole nitrate 2 % vag crm</i>	\$0 (OTC)		
<i>px miconazole 3-day combo 200 & 2 mg-% (9gm) vag kit</i>	\$0 (OTC)		
<i>qc 3 day 4 % vag crm</i>	\$0 (OTC)		
<i>qc miconazole 7 2 % vag crm</i>	\$0 (OTC)		
<i>ra clotrimazole 7 1 % vag crm</i>	\$0 (OTC)		
<i>ra miconazole 3 combo pack 200 & 2 mg-% (9gm) vag kit</i>	\$0 (OTC)		
<i>ra miconazole 3 combo pack app 200 & 2 mg-% (9gm) vag kit</i>	\$0 (OTC)		
<i>ra miconazole 3 combo pack app 200 & 2 mg-% (9gm) vag kit</i>	\$0 (OTC)		
<i>ra miconazole 7 2 % vag crm</i>	\$0 (OTC)		
<i>sm clotrimazole vaginal 1 % vag crm</i>	\$0 (OTC)		
<i>sm miconazole 3 200 & 2 mg-% (9gm) vag kit</i>	\$0 (OTC)		
<i>sm miconazole 7 100 mg vag suppl</i>	\$0 (OTC)		
<i>sm miconazole 7 2 % vag crm</i>	\$0 (OTC)		
<i>tgt miconazole 1 1200 & 2 mg & % vag kit</i>	\$0 (OTC)		
<i>tgt miconazole 3 combo pack 200 & 2 mg-% (9gm) vag kit</i>	\$0 (OTC)		
<i>tgt miconazole 3 combo pack 200 & 2 mg-% (9gm) vag kit</i>	\$0 (OTC)		
<i>tgt miconazole 7 2 % vag crm</i>	\$0 (OTC)		
<i>vagistat-3 200 & 2 mg-% (9gm) vag kit</i>	\$0 (OTC)		
VITAMINS			
Vitamin A			
<i>a-10000 3 MG (10000 ut) cap</i>	\$0 (OTC)		
<i>beta carotene 10000 unit cap, 25000 unit cap</i>	\$0 (OTC)		
<i>cvs beta carotene 15 mg cap, 25000 unit cap</i>	\$0 (OTC)		
<i>cvs vitamin a 2400 MCG (8000 ut) cap, 3 MG</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>(10000 ut) cap</i>			
<i>eqi beta carotene 25000 unit cap</i>	\$0 (OTC)		
<i>gnp vitamin a 3000 mcg cap</i>	\$0 (OTC)		
<i>ra beta carotene 15 mg cap</i>	\$0 (OTC)		
<i>ra vitamin a 3 MG (10000 ut) cap</i>	\$0 (OTC)		
<i>vitamin a 10000 unit cap, 2400 MCG (8000 ut) cap, 3 MG (10000 ut) cap</i>	\$0 (OTC)		
<i>vitamin a palmitate 10000 unit cap</i>	\$0 (OTC)		
Vitamin B Complex			
<i>b-1 100 mg tab, 250 mg tab</i>	\$0 (OTC)		
<i>b-12 100 mcg tab, 1000 mcg tab, 1000 mcg tab er, 250 mcg tab, 500 mcg tab</i>	\$0 (OTC)		
<i>B-12 DOTS 500 mcg tab disint</i>	\$0 (OTC)		
<i>b-12 tr 1000 mcg tab er</i>	\$0 (OTC)		
<i>b-2 100 mg tab</i>	\$0 (OTC)		
<i>b-6 100 mg tab, 50 mg tab</i>	\$0 (OTC)		
<i>b1 100 mg tab</i>	\$0 (OTC)		
<i>b6 natural 100 mg tab</i>	\$0 (OTC)		
<i>cvs b-1 100 mg tab</i>	\$0 (OTC)		
<i>cvs b-12 1000 mcg tab er, 500 mcg tab</i>	\$0 (OTC)		
<i>cvs b-6 100 mg tab</i>	\$0 (OTC)		
<i>cvs b6 100 mg tab</i>	\$0 (OTC)		
<i>cvs vitamin b-12 1000 mcg tab, 500 mcg tab</i>	\$0 (OTC)		
<i>cvs vitamin b-2 100 mg tab</i>	\$0 (OTC)		
<i>cvs vitamin b-6 100 mg tab</i>	\$0 (OTC)		
<i>cvs vitamin b12 1000 mcg tab, 1000 mcg tab er</i>	\$0 (OTC)		
<i>cyanocobalamin 1000 mcg/ml inj soln</i>	\$0 (OTC)		QL(30 ML per 30 days)
<i>endur-acin 250 mg tab er, 500 mg tab er, 750 mg tab er</i>	\$0 (OTC)		
<i>eqi b-12 1000 mcg tab er</i>	\$0 (OTC)		
<i>eqi b-6 100 mg tab</i>	\$0 (OTC)		
<i>eqi niacin 100 mg tab</i>	\$0 (OTC)		
<i>eqi vitamin b-12 500 mcg tab</i>	\$0 (OTC)		
<i>eqi vitamin b-12 tr 1000 mcg tab er</i>	\$0 (OTC)		
<i>gnp niacin 250 mg tab</i>	\$0 (OTC)		
<i>gnp vitamin b-1 100 mg tab</i>	\$0 (OTC)		
<i>gnp vitamin b-12 1000 mcg tab er, 500 mcg tab</i>	\$0 (OTC)		
<i>gnp vitamin b-6 100 mg tab</i>	\$0 (OTC)		
<i>hm niacin 250 mg tab er</i>	\$0 (OTC)		
<i>hm niacin tr 250 mg tab er</i>	\$0 (OTC)		
<i>hm vitamin b-12 500 mcg tab</i>	\$0 (OTC)		
<i>hm vitamin b12 1000 mcg tab er, 500 mcg tab</i>	\$0 (OTC)		
<i>hm vitamin b6 100 mg tab</i>	\$0 (OTC)		
<i>kp niacin 500 mg tab</i>	\$0 (OTC)		
<i>kp vitamin b-12 1000 mcg tab</i>	\$0 (OTC)		
<i>kp vitamin b-6 100 mg tab</i>	\$0 (OTC)		
<i>niacin 100 mg tab, 250 mg tab, 50 mg tab, 500 mg tab</i>	\$0 (OTC)		
<i>niacin er 1000 mg tab er, 250 mg cap er, 250 mg tab er, 500 mg cap er, 500 mg tab er, 750</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>mg tab er</i>			
<i>niacinamide 500 mg tab</i>	\$0 (OTC)		
<i>plain niacin 250 mg tab, 500 mg tab</i>	\$0 (OTC)		
<i>pyridoxine hcl 100 mg tab, 25 mg tab, 50 mg tab</i>	\$0 (OTC)		
<i>ra niacin 100 mg tab, 500 mg tab</i>	\$0 (OTC)		
<i>ra no flush niacin 500 mg tab</i>	\$0 (OTC)		
<i>ra vitamin b-1 100 mg tab</i>	\$0 (OTC)		
<i>ra vitamin b-12 100 mcg tab, 1000 mcg tab er</i>	\$0 (OTC)		
<i>ra vitamin b-12 tr 1000 mcg tab er</i>	\$0 (OTC)		
<i>ra vitamin b-6 100 mg tab, 50 mg tab</i>	\$0 (OTC)		
<i>sm niacin cr 250 mg tab er</i>	\$0 (OTC)		
<i>sm vitamin b-1 100 mg tab</i>	\$0 (OTC)		
<i>sm vitamin b-12 100 mcg tab, 500 mcg tab</i>	\$0 (OTC)		
<i>sm vitamin b-12 tr 1000 mcg tab er</i>	\$0 (OTC)		
<i>sm vitamin b-6 100 mg tab</i>	\$0 (OTC)		
<i>sm vitamin b1 100 mg tab</i>	\$0 (OTC)		
<i>sm vitamin b12 tr 1000 mcg tab er</i>	\$0 (OTC)		
<i>sm vitamin b6 100 mg tab</i>	\$0 (OTC)		
<i>sv vitamin b-12 er 1000 mcg tab er</i>	\$0 (OTC)		
<i>th vitamin b-12 500 mcg tab</i>	\$0 (OTC)		
<i>th vitamin b-6 100 mg tab</i>	\$0 (OTC)		
<i>th vitamin b1 100 mg tab</i>	\$0 (OTC)		
<i>th vitamin b12 100 mcg tab</i>	\$0 (OTC)		
<i>th vitamin b12 er 1000 mcg tab er</i>	\$0 (OTC)		
<i>thiamine hcl 100 mg tab</i>	\$0 (OTC)		
<i>thiamine mononitrate 100 mg tab</i>	\$0 (OTC)		
<i>vitamin b 12 500 mcg tab</i>	\$0 (OTC)		
<i>vitamin b-1 100 mg tab, 250 mg tab, 50 mg tab</i>	\$0 (OTC)		
<i>vitamin b-12 100 mcg tab, 1000 mcg tab, 250 mcg tab, 500 mcg tab</i>	\$0 (OTC)		
<i>vitamin b-12 er 1000 mcg tab er</i>	\$0 (OTC)		
<i>vitamin b-2 100 mg tab</i>	\$0 (OTC)		
<i>vitamin b-6 100 mg tab, 25 mg tab, 50 mg tab</i>	\$0 (OTC)		
<i>vitamin b1 50 mg tab</i>	\$0 (OTC)		
<i>vitamin b12 100 mcg tab, 500 mcg tab</i>	\$0 (OTC)		
<i>vitamin b6 100 mg tab, 50 mg tab</i>	\$0 (OTC)		
Vitamin C			
<i>ACEROLA C 500 500 mg oral wafer</i>	\$0 (OTC)		
<i>acerola c-500 500 mg tab chew</i>	\$0 (OTC)		
<i>ascorbic acid 500 mg tab</i>	\$0 (OTC)		
<i>c 1000 1000 mg tab</i>	\$0 (OTC)		
<i>c 250 250 mg tab</i>	\$0 (OTC)		
<i>c 500 500 mg tab, 500 mg tab chew</i>	\$0 (OTC)		
<i>c 500/rose hips 500 mg tab</i>	\$0 (OTC)		
<i>c-1000 1000 mg tab, 1000 mg tab er</i>	\$0 (OTC)		
<i>c-1000/rose hips 1000 mg tab</i>	\$0 (OTC)		
<i>c-250 250 mg tab</i>	\$0 (OTC)		
<i>c-500 500 mg tab, 500 mg tab chew</i>	\$0 (OTC)		
<i>c-500/rose hips 500 mg tab</i>	\$0 (OTC)		
<i>c-chewable 500 mg tab chew</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>calcium ascorbate 500 mg tab</i>	\$0 (OTC)		
<i>cvs chewable c with rose hips 500 mg tab chew</i>	\$0 (OTC)		
<i>cvs vitamin c 1000 mg tab, 250 mg tab, 500 mg tab</i>	\$0 (OTC)		
<i>cvs vitamin c-rose hips 1000 mg tab, 500 mg tab</i>	\$0 (OTC)		
<i>endur-c 1000 mg tab er</i>	\$0 (OTC)		
<i>eql vitamin c 1000 mg tab, 500 mg tab, 500 mg tab chew</i>	\$0 (OTC)		
<i>eql vitamin c/rose hips 1000 mg tab, 500 mg tab</i>	\$0 (OTC)		
<i>fruit c 500 500 mg tab chew</i>	\$0 (OTC)		
<i>gnp vitamin c 1000 mg tab, 250 mg tab, 500 mg tab, 500 mg tab chew</i>	\$0 (OTC)		
<i>gnp vitamin c w/rose hips 500-37 mg tab</i>	\$0 (OTC)		
<i>gnp vitamin c/rose hips 1000 mg tab</i>	\$0 (OTC)		
<i>hm vitamin c 1000 mg tab, 500 mg tab, 500 mg tab chew</i>	\$0 (OTC)		
<i>hm vitamin c/rose hips 1000 mg tab, 500 mg tab</i>	\$0 (OTC)		
<i>meijer c 500 mg tab</i>	\$0 (OTC)		
<i>natural c/rose hips 1000 mg tab</i>	\$0 (OTC)		
<i>pureway-c 500 mg tab</i>	\$0 (OTC)		
<i>ra vitamin c 250 mg tab, 500 mg tab, 500 mg tab chew</i>	\$0 (OTC)		
<i>ra vitamin c/acerola 500 mg tab chew</i>	\$0 (OTC)		
<i>ra vitamin c/rose hips 1000 mg tab, 500 mg tab</i>	\$0 (OTC)		
<i>ra vitamin c/rose hips cr 1000 mg tab er</i>	\$0 (OTC)		
<i>sb vitamin c 500 mg tab</i>	\$0 (OTC)		
<i>sm chewable c 500 mg tab chew</i>	\$0 (OTC)		
<i>sm chewable vitamin c 500 mg tab chew</i>	\$0 (OTC)		
<i>sm vit c/rose hips 1000 mg tab</i>	\$0 (OTC)		
<i>sm vitamin c 1000 mg tab, 250 mg tab, 500 mg tab, 500 mg tab chew</i>	\$0 (OTC)		
<i>sm vitamin c/rose hips 500 mg tab</i>	\$0 (OTC)		
<i>th vitamin c 1000 mg tab, 250 mg tab, 500 mg tab, 500 mg tab chew</i>	\$0 (OTC)		
<i>vitamin c 1000 mg tab, 250 mg tab, 500 mg tab, 500 mg tab chew</i>	\$0 (OTC)		
<i>vitamin c er 1000 mg tab er</i>	\$0 (OTC)		
<i>vitamin c immune health 500 mg tab chew</i>	\$0 (OTC)		
<i>vitamin c plus wild rose hips 500 mg tab chew</i>	\$0 (OTC)		
<i>vitamin c-rose hips 1000 mg tab, 500 mg tab</i>	\$0 (OTC)		
<i>vitamin c-rose hips er 1000 mg tab er</i>	\$0 (OTC)		
<i>vitamin c/rose hips 500 mg tab</i>	\$0 (OTC)		
<i>vitamin c/rose hips tr 1000 mg tab er</i>	\$0 (OTC)		
Vitamin D			
<i>aqueous vitamin d 10 mcg/ml liq</i>	\$0 (OTC)		
<i>bprotected pedia d-vite 10 mcg/ml liq</i>	\$0 (OTC)		
<i>calcidol 200 mcg/ml soln</i>	\$0 (OTC)		
<i>calciferol 200 mcg/ml soln</i>	\$0 (OTC)		
<i>cvs d3 10 MCG (400 unit) cap, 125 MCG (5000 ut) cap, 25 MCG (1000 ut) cap, 50 MCG (2000</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>ut) cap</i>			
<i>cvs vit d 5000 high-potency 125 MCG (5000 ut) cap</i>	\$0 (OTC)		
<i>d 1000 25 MCG (1000 ut) cap, 25 MCG (1000 ut) tab</i>	\$0 (OTC)		
<i>d 400 10 MCG (400 unit) tab</i>	\$0 (OTC)		
<i>d-1000 extra strength 25 MCG (1000 ut) tab</i>	\$0 (OTC)		
<i>d-3-5 125 MCG (5000 ut) cap</i>	\$0 (OTC)		
<i>d-400 10 MCG (400 unit) tab</i>	\$0 (OTC)		
<i>d-vita 10 mcg/ml liq</i>	\$0 (OTC)		
<i>d3 125 MCG (5000 ut) cap, 50 MCG (2000 ut) cap</i>	\$0 (OTC)		
<i>d3 high potency 10 MCG (400 unit) tab, 25 MCG (1000 ut) cap, 50 MCG (2000 ut) cap</i>	\$0 (OTC)		
<i>d3 maximum strength 125 MCG (5000 ut) cap</i>	\$0 (OTC)		
<i>d3 super strength 50 MCG (2000 ut) cap</i>	\$0 (OTC)		
<i>d3 vitamin 10 mcg/ml liq</i>	\$0 (OTC)		
<i>d3-1000 25 MCG (1000 ut) cap, 25 MCG (1000 ut) tab</i>	\$0 (OTC)		
<i>d3-50 1.25 MG (50000 ut) cap</i>	\$0 (OTC)		
<i>decara 1.25 MG (50000 ut) cap</i>	\$0 (OTC)		
<i>delta d3 10 MCG (400 unit) tab</i>	\$0 (OTC)		
<i>eql vitamin d3 10 MCG (400 unit) cap, 125 MCG (5000 ut) cap, 25 MCG (1000 ut) cap, 25 MCG (1000 ut) tab, 50 MCG (2000 ut) cap</i>	\$0 (OTC)		
<i>ergocalciferol 200 mcg/ml soln</i>	\$0 (OTC)		
<i>gnp d 1000 25 MCG (1000 ut) cap</i>	\$0 (OTC)		
<i>gnp vitamin d 25 MCG (1000 ut) tab</i>	\$0 (OTC)		
<i>gnp vitamin d-400 10 MCG (400 unit) tab</i>	\$0 (OTC)		
<i>gnp vitamin d3 10 MCG (400 unit) tab</i>	\$0 (OTC)		
<i>gnp vitamin d3 extra strength 25 MCG (1000 ut) tab</i>	\$0 (OTC)		
<i>hm vitamin d 10 MCG (400 unit) tab, 25 MCG (1000 ut) tab</i>	\$0 (OTC)		
<i>hm vitamin d3 50 MCG (2000 ut) cap</i>	\$0 (OTC)		
<i>kp vitamin d 25 MCG (1000 ut) cap</i>	\$0 (OTC)		
<i>kp vitamin d3 25 MCG (1000 ut) cap, 50 MCG (2000 ut) cap</i>	\$0 (OTC)		
<i>optimal d3 1.25 MG (50000 ut) cap</i>	\$0 (OTC)		
<i>pa vitamin d-3 125 MCG (5000 ut) cap, 50 MCG (2000 ut) cap</i>	\$0 (OTC)		
<i>ra vitamin d-3 125 MCG (5000 ut) cap, 25 MCG (1000 ut) tab, 50 MCG (2000 ut) cap</i>	\$0 (OTC)		
<i>sm vitamin d 10 MCG (400 unit) tab</i>	\$0 (OTC)		
<i>sm vitamin d3 25 MCG (1000 ut) tab, 50 MCG (2000 ut) cap</i>	\$0 (OTC)		
<i>th vitamin d3 25 MCG (1000 ut) cap, 50 MCG (2000 ut) cap</i>	\$0 (OTC)		
<i>vitamin d 125 MCG (5000 ut) cap, 25 MCG (1000 ut) tab, 50 MCG (2000 ut) cap</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>vitamin d 10 mcg/ml liq</i>	\$0 (OTC)		
<i>vitamin d (cholecalciferol) 10 MCG (400 unit) cap, 10 MCG (400 unit) tab, 25 MCG (1000 ut) cap, 25 MCG (1000 ut) tab</i>	\$0 (OTC)		
<i>vitamin d high potency 25 MCG (1000 ut) cap</i>	\$0 (OTC)		
<i>vitamin d infant 10 mcg/ml liq</i>	\$0 (OTC)		
<i>vitamin d-1000 max st 25 MCG (1000 ut) tab</i>	\$0 (OTC)		
<i>vitamin d-3 25 MCG (1000 ut) cap</i>	\$0 (OTC)		
<i>vitamin d-400 10 MCG (400 unit) tab</i>	\$0 (OTC)		
<i>vitamin d2 10 MCG (400 unit) tab</i>	\$0 (OTC)		
<i>vitamin d3 1.25 MG (50000 ut) cap, 1.25 MG (50000 ut) tab, 10 MCG (400 unit) cap, 10 MCG (400 unit) tab, 125 MCG (5000 ut) cap, 25 MCG (1000 ut) cap, 25 MCG (1000 ut) tab, 50 MCG (2000 ut) cap</i>	\$0 (OTC)		
<i>vitamin d3 10 mcg/ml liq</i>	\$0 (OTC)		
<i>vitamin d3 maximum strength 125 MCG (5000 ut) cap</i>	\$0 (OTC)		
<i>weekly-d 1.25 MG (50000 ut) cap</i>	\$0 (OTC)		
Vitamin E			
<i>cvs e 90 MG (200 unit) cap</i>	\$0 (OTC)		
<i>cvs vitamin e 1000 unit cap, 180 MG (400 unit) cap, 268 MG (400 unit) cap, 400 unit cap, 450 MG (1000 ut) cap</i>	\$0 (OTC)		
<i>e 1000 450 MG (1000 ut) cap, 670 MG (1000 ut) cap</i>	\$0 (OTC)		
<i>e-200 200 unit cap, 90 MG (200 unit) cap</i>	\$0 (OTC)		
<i>e-400 180 MG (400 unit) cap, 268 MG (400 unit) cap, 400 unit cap</i>	\$0 (OTC)		
<i>e200 90 MG (200 unit) cap</i>	\$0 (OTC)		
<i>e400 180 MG (400 unit) cap, 268 MG (400 unit) cap, 400 unit cap</i>	\$0 (OTC)		
<i>e400 mixed 400 unit cap</i>	\$0 (OTC)		
<i>eql vitamin e 1000 unit cap, 400 unit cap</i>	\$0 (OTC)		
<i>gnp vitamin e 180 MG (400 unit) cap, 268 MG (400 unit) cap, 400 unit cap, 450 MG (1000 ut) cap</i>	\$0 (OTC)		
<i>hm e vitamin 180 MG (400 unit) cap</i>	\$0 (OTC)		
<i>hm vitamin e 400 unit cap, 450 MG (1000 ut) cap, 90 MG (200 unit) cap</i>	\$0 (OTC)		
<i>kp vitamin e 45 MG (100 unit) cap</i>	\$0 (OTC)		
<i>natural mixed tocopherols 1000 unit cap, 400 unit cap</i>	\$0 (OTC)		
<i>natural vitamin e 1000 unit cap, 670 MG (1000 ut) cap</i>	\$0 (OTC)		
<i>pa vitamin e 180 MG (400 unit) cap, 400 unit cap</i>	\$0 (OTC)		
<i>ra vitamin e 1000 unit cap, 134 MG (200 unit) cap, 180 MG (400 unit) cap, 200 unit cap, 268 MG (400 unit) cap, 400 unit cap</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

OVER-THE-COUNTER (OTC) DRUGS GROUPED BY DRUG TYPE

Name of Drug	What the drug will cost you (tier level)	Reference Name	Necessary actions, restrictions, or limits on use
<i>sm vitamin e 1000 unit cap, 180 MG (400 unit) cap, 200 unit cap, 400 unit cap, 450 MG (1000 ut) cap, 90 MG (200 unit) cap</i>	\$0 (OTC)		
<i>th vitamin e 1000 unit cap, 200 unit cap, 400 unit cap</i>	\$0 (OTC)		
<i>vitamin e 100 unit cap, 1000 unit cap, 134 MG (200 unit) cap, 180 MG (400 unit) cap, 200 unit cap, 268 MG (400 unit) cap, 400 unit cap, 45 MG (100 unit) cap, 450 MG (1000 ut) cap, 670 MG (1000 ut) cap, 90 MG (200 unit) cap</i>	\$0 (OTC)		
<i>vitamin e blend 400 unit cap</i>	\$0 (OTC)		
<i>vitamin e high potency 180 MG (400 unit) cap</i>	\$0 (OTC)		
<i>vitamin e water soluble 450 MG (1000 ut) cap</i>	\$0 (OTC)		
<i>vitamin e-200 200 unit cap, 90 MG (200 unit) cap</i>	\$0 (OTC)		
<i>vitamin e-400 400 unit cap</i>	\$0 (OTC)		
<i>vitamin e/d-alpha natural 400 unit cap</i>	\$0 (OTC)		

You can find information on what the symbols and abbreviations in this table mean by going to page 15

INDEX

E. Index

In this section, you can find a drug by searching its name alphabetically. This will tell you the page number where you can find additional coverage information for your drug.

12 hour decongestant.....	150	acetaminophen infants.....	82	AIMOVIG.....	30
12 hour nasal decongestant.....	150	acetaminophen junior strength.....	82	aimsc0 lubricated.....	134
12 hour nasal relief spray.....	150	acetaminophen pm.....	95	AIRSUPRA.....	77
12 hour nasal spray.....	150	acetaminophen pm ex st.....	95	AKEEGA.....	31
4-N-1.....	113, 114	acetaminophen-codeine.....	18, 19	al12.....	114
4-way fast acting.....	150	acetazolamide.....	74	ala-cort.....	55
50+ adult eye health.....	142	acetazolamide er.....	74	alavert.....	98
7 day vaginal.....	158	acetic acid.....	74	alavert allergy/sinus.....	96
8 hour arthritis pain reliever.....	81	acid controller.....	124	albendazole.....	36
8 hour pain relief.....	81	acid controller max st.....	124	albuterol sulfate.....	75
8 hour pain reliever.....	82	acid controller original str.....	124	albuterol sulfate hfa.....	76
8 hr arthritis pain relief.....	82	acid reducer.....	124	alclometasone dipropionate.....	56
8hr muscle aches & pain.....	82	acid reducer maximum strength.....	124	alcohol preps.....	72
a thru z advanced.....	142	acitretin.....	55	ALECENSA.....	32
a thru z select.....	142	acne.....	114	alendronate sodium.....	71
a thru z select 50+ advanced.....	142	acne foaming wash.....	107	aler-cap.....	96
a thru z select 50+ mens.....	142	acne medication 10.....	107	alertab.....	96
a thru z select advanced.....	142	acne medication 2.5.....	107	alfuzosin hcl er.....	61
a thru z select ultimate women.....	142	acne medication 5.....	107	aliskiren fumarate.....	50
a thru z ultimate mens.....	142	acne pads maximum strength.....	114	alka-seltzer plus allergy.....	96
a-10000.....	159	acne treatment.....	107	all day allergy.....	98
abacavir sulfate.....	41	acne-clear.....	107	all day allergy childrens.....	98
abacavir sulfate-lamivudine.....	41	ACTHIB.....	70	all day allergy d.....	96
abc plus senior adults 50+.....	142	ACTIMMUNE.....	68	all day allergy d-12.....	96
abigale.....	63	activated charcoal.....	118	all day allergy-d.....	96
abigale lo.....	63	activated vegetable charcoal.....	118	all day pain relief.....	79
ABILIFY MAINTENA.....	38	acyclovir.....	43, 57	all day relief.....	79
abiraterone acetate.....	31	acyclovir sodium.....	43	all-day allergy childrens.....	98
abirtega.....	31	ADACEL.....	70	aller-chlor.....	96
ABRYSVO.....	70	adalimumab-aaty (1 pen).....	69	allergy.....	96, 98
acamprosate calcium.....	19	adalimumab-aaty (2 pen).....	69	allergy 24hour indoor/outdoor.....	98
acarbose.....	43	adalimumab-aaty (2 syringe).....	69	allergy childrens.....	96, 98
ACCU-CHEK GUIDE.....	135	adalimumab-aaty cd/uc/hs start.....	69	allergy eye drops.....	156
ACCU-CHEK GUIDE TEST.....	118	adalimumab-adbm (2 pen).....	69	allergy non-drowsy.....	99
ACCU-CHEK NANO SMARTVIEW.....	135	adalimumab-adbm (2 syringe).....	69	allergy rel child (cetirizine).....	99
acebutolol hcl.....	49	adalimumab-fkjp (2 pen).....	69	allergy rel child (loratadine).....	99
acephen.....	82	adalimumab-fkjp (2 syringe).....	69	allergy rel d12 (cetirizine).....	96
ACEROLA C 500.....	161	ADBRY.....	55	allergy relief.....	96, 99
acerola c-500.....	161	addaprin.....	79	allergy relief (cetirizine).....	99
acetadryl.....	94	adefovir dipivoxil.....	40	allergy relief 24-hr.....	99
acetaminophen.....	82	ADEMPAS.....	76	allergy relief cetirizine.....	99
acetaminophen 8 hour.....	82	adult aspirin regimen.....	86	allergy relief child.....	99
acetaminophen childrens.....	82	ADVAIR HFA.....	77	allergy relief childrens.....	96, 99
acetaminophen er.....	82	advanced eye relief.....	154	allergy relief d.....	96
acetaminophen extra strength.....	82	advantage care electrolyte ped.....	139	allergy relief d12.....	96

INDEX

allergy relief d-12.....	96	anefrin spray/moisturizing	150	ARISTADA.....	38
allergy relief d-24.....	96	animal chews	147	ARISTADA INITIO	38
allergy relief loratadine	99	animal shapes/iron.....	147	armodafinil	78
allergy relief/nasal decongest.....	96	ANORO ELLIPTA.....	77	ARNUITY ELLIPTA.....	74
allergy relief-d.....	96	antacid	118	arthritis pain	82
allergy spray 24 hour.....	150	antacid advanced.....	118	arthritis pain relief.....	82
allergy/congestion relief.....	96	antacid anti-gas.....	118	arthritis pain reliever.....	82
allergy-time.....	96	antacid anti-gas fast acting	118	arthritis pain relieving.....	116
allopurinol.....	30	antacid anti-gas max strength	118	artificial tears.....	154
almacone double strength	118	antacid anti-gas reg strength.....	118	artificial tears pf.....	154
alophen	128	antacid calcium	118	ascorbic acid	161
alosetron hcl.....	59	antacid calcium extra strength	118	asenapine maleate.....	38
alprazolam.....	43	antacid extra strength.....	118	ashlyna.....	63
altachlore.....	157	antacid fast acting	118	ASMANEX (120 METERED DOSES)	
altamist spray	149	antacid fast relief.....	118		74
altavera	63	antacid flavor chews.....	118	ASMANEX (30 METERED DOSES)	75
alum & mag hydroxide-simeth.....	118	antacid liquid	118	ASMANEX (60 METERED DOSES)	75
aluminum hydroxide	118	antacid m.....	119	ASMANEX HFA	75
aluminum hydroxide gel	118	antacid maximum.....	119	aspirin	86
ALUNBRIG.....	32	antacid maximum strength	119	aspirin 81	86
alyacen 1/35.....	63	antacid plus anti-gas fast act.....	119	aspirin adult.....	86
alyq.....	76	antacid plus anti-gas relief	119	aspirin adult low dose	86
amantadine hcl.....	42	antacid regular strength	119	aspirin adult low strength	87
ambrisentan.....	76	antacid soft chews.....	119	aspirin childrens.....	87
amikacin sulfate.....	20	antacid ultra strength.....	119	aspirin ec.....	87
amiloride hcl.....	52	anti-diarrheal	92	aspirin ec adult low dose.....	87
amiloride-hydrochlorothiazide	50	antifungal.....	109	aspirin ec adult low strength	87
amiodarone hcl.....	48, 49	anti-fungal	109	aspirin ec low dose	87
amitriptyline hcl.....	28	antifungal (tolnaftate)	109	aspirin ec low strength	87
amlactin.....	114	antifungal clotrimazole	109	aspirin low dose	87
amlodipine besy-benazepril hcl	50	antifungal foot/sneaker spray	109	aspirin low dose adult	87
amlodipine besylate.....	50	antifungal spray powder	109	aspirin low strength	87
amlodipine besylate-valsartan	50	anti-gas ultra strength	122	aspirin regimen low dose adult.....	87
amlodipine-olmesartan	50	anti-itch intensive healing	112	aspirin-dipyridamole er.....	47
ammonium lactate	56	anti-itch maximum strength	112	aspir-low.....	86
amnestem.....	55	antioxidant.....	142	aspir-trin	86
amoxapine.....	28	antioxidant a/c/e/selenium.....	142	atazanavir sulfate.....	42
amoxicillin.....	21	antiseptic.....	93	atenolol	49
amoxicillin-pot clavulanate	21	antiseptic skin cleanser.....	93	atenolol-chlorthalidone.....	50
amoxicillin-pot clavulanate er	21	apap	82	athletes foot	109
amphetamine-dextroamphet er	53	apap extra strength	82	athletes foot (clotrimazole).....	109
amphetamine-dextroamphetamine...53		apicare povidone-iodine	93	athletes foot (terbinafine)	109
amphotericin b	29	aprepitant	28	athletes foot af	109
amphotericin b liposome	29	APTIVUS.....	42	athletes foot powder spray.....	109
ampicillin.....	22	aquanil hc.....	112	athletes foot spray.....	109
ampicillin sodium.....	22	aqueous vitamin d	162	atomoxetine hcl.....	53
ampicillin-sulbactam sodium	22	AREXVY.....	70	atorvastatin calcium	52
anagrelide hcl.....	47	arformoterol tartrate	76	atovaquone	37
anastrozole.....	32	ARIKAYCE.....	20	atovaquone-proguanil hcl.....	37
anefrin spray.....	150	aripiprazole.....	38	atropine sulfate	72

INDEX

<i>aubra eq</i>	63	<i>balziva</i>	63	<i>BIKTARVY</i>	41
<i>AUGMENTIN</i>	22	<i>banophen</i>	96	<i>BIO-35 GLUTEN-FREE</i>	142
<i>AUGTYRO</i>	32	<i>BAQSIMI ONE PACK</i>	45	<i>biocal</i>	142
<i>auraphene-b</i>	157	<i>BARACLUDE</i>	40	<i>biocotron</i>	101
<i>aurodryl allergy childrens</i>	96	<i>bayer aspirin</i>	87	<i>biosupp</i>	142
<i>aurophen childrens</i>	82	<i>bayer aspirin ec low dose</i>	87	<i>BIOTECT PLUS</i>	142
<i>AUSTEDO</i>	54	<i>bayer aspirin regimen</i>	87	<i>biotin plus/calcium/vit d3</i>	142
<i>AUSTEDO XR</i>	54	<i>bayer low dose</i>	87	<i>BIOTRUE</i>	156
<i>AUSTEDO XR PATIENT TITRATION</i>	54	<i>bayer migraine</i>	79	<i>bisacodyl</i>	128
<i>AUVELITY</i>	26	<i>baza antifungal</i>	109	<i>bisacodyl ec</i>	128
<i>aviane</i>	63	<i>bcg vaccine</i>	70	<i>bisacodyl laxative</i>	128
<i>AVMAPKI FAKZYNJA CO-PACK</i>	32	<i>b-complex/vitamin c</i>	141	<i>biscolax</i>	128
<i>AVONEX PEN</i>	54	<i>b-complex/vitamin c (w/ ca)</i>	141	<i>bismatrol</i>	92
<i>AVONEX PREFILLED</i>	54	<i>b-complex-c</i>	141	<i>bismatrol maximum strength</i>	92
<i>AYR SALINE NASAL DROPS</i>	149	<i>b-complex-c (w/folic acid)</i>	141	<i>bismuth/metronidaz/tetracyclin</i>	59
<i>AYYAKIT</i>	32	<i>BD INSULIN SYRINGE</i>	72	<i>bisoprolol fumarate</i>	49
<i>azathioprine</i>	69	<i>BD INSULIN SYRINGE ULTRAFINE</i>	72	<i>bisoprolol-hydrochlorothiazide</i>	51
<i>azelaic acid</i>	55	<i>BD PEN MINI</i>	72	<i>BIVIGAM</i>	67
<i>azelastine hcl</i>	73, 75	<i>BD PEN NEEDLE MINI ULTRAFINE</i>	72	<i>blisovi fe 1.5/30</i>	63
<i>azilsartan medoxomil</i>	48	<i>bee zee</i>	141	<i>blis-to-sol</i>	109
<i>azithromycin</i>	22	<i>BELSOMRA</i>	78	<i>BONSITY</i>	71
<i>azolen tincture</i>	109	<i>benazepril hcl</i>	48	<i>BOOSTRIX</i>	70
<i>aztreonam</i>	20	<i>benazepril-hydrochlorothiazide</i>	51	<i>BOSTON ADVANCE CLEANER</i>	156
<i>azurette</i>	63	<i>BENLYSTA</i>	67	<i>BOSTON ADVANCE CONDITIONING</i>	156
<i>b complex-c</i>	141	<i>benznidazole</i>	37	<i>BOSTON CONDITIONING</i>	156
<i>b complex-c (lipotropic)</i>	149	<i>benz-o-sthetic</i>	140	<i>BOSTON ONE STEP CLEANER</i>	156
<i>b complex-c-biotin-e-fa</i>	141	<i>benzoyl peroxide</i>	107	<i>BOSTON REWETTING</i>	156
<i>b complex-c-folic acid</i>	141	<i>benzoyl peroxide wash</i>	107	<i>BOSTON SIMPLUS</i>	156
<i>B&L SENSITIVE EYES DAILY CLEAN</i>	156	<i>benzoyl peroxide-erythromycin</i>	55	<i>BOSULIF</i>	32
<i>b1 160</i> <i>b-1</i>	160	<i>benztropine mesylate</i>	37	<i>bosutinib</i>	32
<i>b-12</i>	160	<i>BESIVANCE</i>	73	<i>bp gel</i>	107
<i>B-12 DOTS</i>	160	<i>BESREMI</i>	68	<i>bp wash</i>	107
<i>b-12 tr</i>	160	<i>BESREMI PEN</i>	68	<i>bpo</i>	107
<i>b-2</i>	160	<i>beta carotene</i>	159	<i>bpo-10 wash</i>	107
<i>b-6</i>	160	<i>beta hc</i>	112	<i>bpo-5 wash</i>	107
<i>b6 natural</i>	160	<i>betaine</i>	60	<i>BPROTECTED MULTI-VITE</i>	142
<i>baby darlings ped electrolyte</i>	139	<i>betamethasone dipropionate</i>	56	<i>bprotected pedia d-vite</i>	162
<i>baby darlings soothing bath</i>	114	<i>betamethasone dipropionate aug</i>	56	<i>bprotected pedia iron</i>	125
<i>bacitracin</i>	107	<i>betamethasone valerate</i>	56	<i>BRAFTOVI</i>	32
<i>bacitracin zinc</i>	107	<i>betasept surgical scrub</i>	93	<i>BREO ELLIPTA</i>	77
<i>bacitracin-neomycin-polymyxin</i>	107	<i>BETASERON</i>	54	<i>breyana</i>	77
<i>bacitracin-polymyxin b</i>	72	<i>betatemp childrens</i>	82	<i>BREZTRI AEROSPHERE</i>	77
<i>bacitra-neomycin-polymyxin-hc</i>	72	<i>betaxolol hcl</i>	49, 74	<i>brIELlyn</i>	63
<i>bacitraycin plus</i>	108	<i>bethanechol chloride</i>	62	<i>brimonidine tartrate</i>	74
<i>baclofen</i>	40	<i>bexarotene</i>	36	<i>brimonidine tartrate-timolol</i>	73
<i>balsalazide disodium</i>	71	<i>BEXSERO</i>	70	<i>brinzolamide</i>	74
<i>BALVERSA</i>	32	<i>bicalutamide</i>	31	<i>brivaracetam</i>	23
		<i>BICILLIN L-A</i>	22	<i>bromfenac sodium</i>	73
				<i>bromocriptine mesylate</i>	37

INDEX

BRUKINSA.....	32	calcium 600.....	135	candesartan cilexetil.....	48
budesonide.....	71, 75	calcium 600 + d.....	135	candesartan cilexetil-hctz.....	51
budesonide er.....	71	calcium 600 +d high potency.....	136	CAPLYTA.....	38
budesonide-formoterol fumarate.....	77	calcium 600 high potency.....	136	CAPRELSA.....	32
bumetanide.....	51	calcium 600/vitamin d.....	136	capsaicin.....	116
buprenorphine.....	18	calcium 600/vitamin d3.....	136	capsaicin hp.....	116
buprenorphine hcl.....	19	calcium 600+d.....	136	captopril.....	48
buprenorphine hcl-naloxone hcl.....	19	calcium 600+d high potency.....	136	carbamazepine.....	25
bupropion hcl.....	26	calcium 600+d3.....	136	carbamazepine er.....	25
bupropion hcl er (smoking det).....	19	calcium 600+d3 plus minerals.....	136	carbamoxide ear drops.....	157
bupropion hcl er (sr).....	27	calcium 600-d.....	136	carbidopa.....	37
bupropion hcl er (xl).....	27	calcium acetate (phos binder).....	59	carbidopa-levodopa.....	37
buspirone hcl.....	43	calcium antacid.....	119	carbidopa-levodopa er.....	37
butalbital-apap-cafeine.....	54	calcium antacid extra strength.....	119	carglumic acid.....	58
BYLVAY.....	59	calcium antacid ultra.....	119	carrington antifungal.....	109
BYLVAY (PELLETS).....	59	calcium antacid ultra max st.....	119	carteolol hcl.....	74
c 1000.....	161	calcium antacid ultra strength.....	119	cartia xt.....	50
c 250.....	161	calcium ascorbate.....	162	carvedilol.....	49
c 500.....	161	calcium carb-cholecalciferol.....	136	casprofungin acetate.....	29
c 500/rose hips.....	161	calcium carbonate.....	136	CAYSTON.....	76
c complex.....	141	calcium carbonate antacid.....	119	c-chewable.....	161
c-1000.....	161	calcium carbonate+vitamin d.....	136	cefaclor.....	21
c-1000/rose hips.....	161	calcium carbonate-vitamin d.....	136	cefadroxil.....	21
c-250.....	161	calcium carbonate-vitamin d3.....	136	cefazolin sodium.....	21
c-500.....	161	calcium citrate.....	136	cefdinir.....	21
c-500/rose hips.....	161	calcium citrate + d.....	136	cefepime hcl.....	21
cabergoline.....	66	calcium citrate + d3.....	136	cefixime.....	21
CABLIV.....	47	calcium citrate + d3 maximum.....	136	cefotetan disodium.....	21
CABOMETYX.....	32	calcium citrate maximum/vit d.....	136	cefoxitin sodium.....	21
calamine.....	114, 116	calcium citrate petite/vit d.....	136	cefpodoxime proxetil.....	21
calamine-zinc oxide.....	114	calcium citrate+d3.....	136	cefprozil.....	21
calci-chew.....	135	calcium citrate+d3 petites.....	136	ceftaroline fosamil.....	21
CALCI-CHEW.....	135	calcium citrate-vitamin d.....	136	ceftazidime.....	21
calcidol.....	162	calcium citrate-vitamin d3.....	136	ceftriaxone sodium.....	21
calciferol.....	162	calcium extra d3.....	136	cefuroxime axetil.....	21
calcipotriene.....	57	calcium high potency.....	136	cefuroxime sodium.....	21
calcitonin (salmon).....	71	calcium high potency/vitamin d.....	136	celecoxib.....	18
calcitrate.....	135	calcium plus vitamin d3.....	137	centamin.....	142
cal-citrate plus vitamin d.....	135	calcium polycarbophil.....	126	centravites.....	142
calcitriol.....	71	calcium/c/d.....	137	centravites 50 plus.....	142
calcium.....	135	calcium+d3.....	137	centravites adults.....	142
calcium + d3.....	135	calcium-d.....	137	CENTRUM SILVER.....	142
calcium + vitamin d3.....	135	calcium-vitamin d.....	137	CENTRUM SPECIALIST HEART.....	142
calcium 1000 + d.....	135	calcium-vitamin d3.....	137	CENTRUM ULTRA WOMENS.....	142
calcium 500 + d.....	135	cal-gest antacid.....	119	cephalexin.....	21
calcium 500 + d3.....	135	callus removers.....	114	cerasport ex1.....	139
calcium 500/d.....	135	callus removers extra thick.....	114	CERASPORT EX1.....	139
calcium 500+d.....	135	CALQUENCE.....	32	certa plus.....	142
calcium 500+d high potency.....	135	camila.....	65	certavite/antioxidants.....	142
calcium 500+d3.....	135	camrese lo.....	63	CERTAVITE/ANTIOXIDANTS.....	142

INDEX

cetirizine hcl.....	75, 99	CIMDUO.....	41	COARTEM.....	37
cetirizine hcl allergy child.....	99	cinacalcet hcl.....	71	COBENFY.....	54
cetirizine hcl childrens	99	CINRYZE.....	67	COBENFY STARTER PACK.....	54
cetirizine hcl childrens alrgy	99	ciprofloxacin hcl.....	22, 73	colchicine	30
cetirizine hcl hives relief	99	ciprofloxacin in d5w.....	22	colchicine-probenecid	30
cetirizine-pseudoephedrine er	96	ciprofloxacin-dexamethasone	74	cold & allergy childrens.....	102
charcoal.....	79	citalopram hydrobromide.....	27	cold & cough childrens.....	102
charcoal activated	119	CITRACAL/VITAMIN D.....	137	cold/allergy childrens	102
CHEMET	58	citrate of magnesia.....	128	cold/cough childrens	102
cheratussin ac	101	citrucel.....	126	cold/cough dm childrens	102
chest congestion childrens	104	CITRUCEL	126	colesevelam hcl	52
chest congestion relief.....	104	citrus calcium +d	137	colestipol hcl	52
chewable calcium/d3	137	citrus calcium/vitamin d	137	colistimethate sodium (cba)	20
child chewable vitamins/iron.....	147	claravis.....	55	colloidal oatmeal bath	114
childrens acetaminophen	82	clarithromycin	22	COMBIGAN	73
childrens apap	82	clarithromycin er.....	22	COMBIVENT RESPIMAT	77
childrens aspirin	87	claritin allergy childrens.....	99	COMETRIQ (100 MG DAILY DOSE).....	32
childrens aspirin low strength.....	87	CLARITIN ALLERGY CHILDRENS.....	99	COMETRIQ (140 MG DAILY DOSE).....	32
childrens chewable multi vits.....	147	claritin reditabs	99	COMETRIQ (60 MG DAILY DOSE).....	33
childrens chewable vitamins.....	147	CLARITIN REDITABS.....	99	comfort gel antacid & anti-gas	119
childrens cold & allergy	101	clear eyes natural tears.....	154	comfort gel antacid anti-gas.....	119
childrens ibuprofen.....	79	clearasil daily clear acne	107	comfort gel extra strength	119
childrens ibuprofen 100	79	clearlax.....	128	companion	142
childrens loratadine	99	CLENPIQ	60	complete	142
childrens mapap rapid tabs	82	CLERZ PLUS.....	156	complete allergy medicine	96
childrens mucus relief expect.....	104	CLIMARA PRO	63	complete allergy relief	96
childrens multivitamin.....	147	clindacin etz	20	complete lice treatment.....	116
childrens non-aspirin	82	clindamycin hcl.....	20	complete multivitamin/mineral.....	142
childrens pain relief	82	clindamycin palmitate hcl	20	complete ready-to-use enema	128
childrens pain reliever	82	clindamycin phos-benzoyl perox	55	complete senior.....	142
childrens pepto.....	119	clindamycin phosphate.....	20, 58	compound w.....	115
childrens silapap.....	82	clobazam.....	24	compound w one step.....	115
childrens silfedrine.....	150	clobetasol prop emollient base.....	56	compound w one step invisible	115
childrens soothe	119	clobetasol propionate	56	compoz	95
childrens tactinal.....	82	clomipramine hcl	28	compro.....	28
childs ibuprofen	79	clonazepam.....	24	condoms	134
chlorhexidine gluconate.....	55, 94	clonidine.....	48	constulose.....	59
chloroquine phosphate	37	clonidine hcl	48	CONTOUR MONITOR.....	135
chlorphen.....	96	clopidogrel bisulfate	47	CONTOUR NEXT ONE	135
chlorpheniramine maleate	96	clorazepate dipotassium	43	COOL BOTTOMS.....	114
chlorpromazine hcl	38	clotrimazole.....	29, 109, 110, 158	COPIKTRA.....	33
chlorthalidone	52	clotrimazole 3	158	corn & callus remover	115
chocolated laxative	128	clotrimazole 3 day	158	corn remover one-step.....	115
CHOLBAM.....	60	clotrimazole af.....	110	corn removers.....	115
cholestyramine	52	clotrimazole anti-fungal	110	cortizone-10	112
cholestyramine light.....	52	clotrimazole athletes foot	110	cortizone-10 diabetics skin.....	112
ciclopirox	57	clotrimazole grx.....	110	cortizone-10 eczema.....	112
ciclopirox olamine.....	58	clotrimazole-7.....	158	cortizone-10 hydratensive.....	112
cidatrine.....	79	clotrimazole-betamethasone	57	cortizone-10 intensive healing	112
cilostazol.....	47	clozapine.....	40	cortizone-10 plus.....	112

INDEX

cortizone-10/aloe.....	112	cvs antacid/anti-gas	119	cvs citrate of magnesia	128
COSENTYX.....	67	cvs antacid/simethicone	119	cvs c-lax laxative.....	128
COSENTYX (300 MG DOSE)	67	cvs antibiotic.....	108	cvs clotrimazole	110
COSENTYX SENSOREADY (300 MG)		cvs anti-diarrheal.....	92	cvs clotrimazole 3	158
.....	67	cvs antifungal	110	cvs cold & cough childrens	102
COSENTYX UNOREADY	67	cvs anti-fungal	110	cvs cold & cough dm childrens.....	102
COTELLIC.....	33	cvs anti-itch maximum strength.....	112	cvs cold/cough dm childrens.....	102
cough dm.....	102	cvs antiseptic skin cleanser.....	94	cvs contact lens relief/rewet.....	156
cough dm childrens	102	cvs arthritis pain relief	82	cvs corn remover	115
cough syrup.....	104	cvs aspirin	87	cvs corn removers.....	115
cough/chest congestion dm.....	102	cvs aspirin adult low dose	87	cvs corn/callus remover	115
coughstab	104	cvs aspirin adult low strength	87	cvs cortisone intense healing.....	112
CREON	60	cvs aspirin child.....	87	cvs cortisone long-lasting.....	112
CRESEMBA	29	cvs aspirin ec	87	cvs cortisone maximum strength....	112
cromolyn sodium	60, 73, 76, 150	cvs aspirin low dose	87	cvs cough dm.....	102
cryselle	63	cvs aspirin low strength.....	87	cvs cough dm childrens	102
CTEXLI.....	60	cvs athletes foot	110	cvs creamy acne face wash.....	107
curad hydrocortisone.....	112	cvs athletes foot spray	110	cvs d3	162
cvs 12 hour cold relief	150	cvs b complex plus c	141	cvs daily fiber	126
cvs 12 hour nasal decongestant.....	150	cvs b-1	160	cvs daily multiple.....	147
cvs 3-day vaginal.....	158	cvs b-12.....	160	cvs daily multiple fe/ca/zn	142
cvs 8 hour pain relief	82	cvs b6.....	160	cvs daily multiple for men.....	142
cvs 8hr arthritis pain relief	82	cvs b-6	160	cvs daily multiple for men 50+.....	142
cvs 8hr muscle aches & pain.....	82	cvs bacitracin	108	cvs daily multiple for women	142
cvs acetaminophen	82	cvs bacitracin zinc.....	108	cvs daily multiple women 50+	142
cvs acetaminophen ex st.....	82	cvs beta carotene.....	159	cvs dairy relief.....	123
cvs acid controller.....	124	cvs bisacodyl.....	128	cvs dairy relief ex st	123
cvs acid controller max st.....	124	cvs bismuth	92	cvs dairy relief fast acting.....	123
cvs acid reducer	124	cvs bismuth maximum strength.....	92	cvs diaper rash.....	116
cvs acne	107	cvs buffered aspirin.....	87	cvs dry-eye relief nighttime	154
cvs acne control cleanser.....	107	cvs calcium.....	137	cvs e	164
cvs acne foaming face wash	107	cvs calcium 600 + d/minerals.....	137	cvs ear drops	157
cvs advanced 3-in-1 cleanser.....	107	cvs calcium 600+d	137	cvs ear wax removal system.....	157
cvs af spray powder	110	cvs calcium carbonate.....	137	cvs earwax removal kit.....	157
cvs all day pain relief.....	79	cvs calcium citrate +d.....	137	cvs eczema anti-itch	112
cvs allerg rel child (lorat)	99	cvs calcium citrate +d3 mini	137	cvs electrolyte solution.....	139
cvs allergy eye drops.....	156	cvs calcium citrate+d3.....	137	cvs enema disposable	128
cvs allergy relief.....	99	cvs calcium citrate+d3 petites	137	cvs enema ready-to-use	128
cvs allergy relief childrens	99	cvs callus remover	135	cvs eye health & lutein.....	142
cvs allergy relief-d	97	cvs capsaicin hp.....	116	cvs eye health adult 50+	142
cvs allergy relief-d12	97	cvs chest congestion childrens	104	cvs eye itch relief	156
cvs antacid	119	cvs chest congestion relief.....	104	cvs eye lubricant	154
cvs antacid extra	119	cvs chewable c with rose hips.....	162	cvs eye lubricant nighttime.....	154
cvs antacid extra strength	119	cvs chewy not chalky flavor.....	119	cvs fever reducing childrens	82
cvs antacid fast relief.....	119	cvs children multivitamin/iron	147	cvs fiber.....	126
cvs antacid kids.....	119	cvs childrens aspirin.....	87	cvs fiber laxative	126
cvs antacid maximum strength.....	119	cvs childrens complete.....	147	cvs fish oil	153
cvs antacid plus antigas	119	cvs childrens ibuprofen	79	cvs foaming acne face wash.....	107
cvs antacid soft chews ultr st.....	119	cvs child non-aspirin.....	82	cvs folic acid.....	125
cvs antacid ultra strength	119	cvs chocolate laxative pieces.....	128	cvs foot & sneaker	110

INDEX

cvs gas relief	122	cvs magnesium oxide.....	139	cvs pain relief pm ex st	95
cvs gas relief drops ex st.....	122	cvs menstrual relief	82	cvs pain relief regular st	83
cvs gas relief extra strength	122	cvs miconazole 1 combo pack	158	cvs ped electrolyte freeze pop	139
cvs gas relief infants.....	122	cvs miconazole 1 combo-wipes	158	cvs pediatric electrolyte.....	139
cvs gas relief ultra strength	122	cvs miconazole 3 combo pack	158	cvs permethrin	116
cvs gentle laxative	128	cvs miconazole 3 combo-suppl.....	158	cvs petroleum jelly	114
cvs gentle laxative womens.....	128	cvs miconazole 3-day combo app..	158	cvs plantar wart remover.....	115
cvs glucosamine sulfate	79	cvs miconazole 7.....	158	cvs poly bacitracin.....	108
cvs glucose.....	90, 91	cvs migraine relief	79	cvs povidone-iodine	94
cvs glycerin adult.....	128	cvs milk of magnesia.....	128	cvs prenatal.....	149
cvs glycerin child	128	cvs mineral oil	128	cvs purelax.....	128
cvs gummy dinos.....	147	cvs motion sickness ii.....	93	cvs ringworm.....	110
cvs hair/skin/nails	147	cvs motion sickness relief	93	cvs rubbing alcohol	94
cvs headache relief	79	cvs mucus d extended release.....	104	cvs saline nasal spray.....	149
cvs headache relief added st.....	79	cvs mucus d max st er	104	cvs saline nose spray.....	149
cvs hemorrhoidal.....	88	cvs mucus dm extended release....	102	cvs senna.....	128
cvs hydrocortisone acetate.....	112	cvs mucus extended release..	104, 105	cvs senna plus	128
cvs hydrocortisone anti-itch.....	112	cvs multi-purpose no-rub.....	156	cvs senna-extra.....	128
cvs hydrocortisone max st.....	112	cvs naproxen sodium	79	cvs sinus pe decongestant.....	150
cvs hydrogen peroxide	94	cvs nasal allergy spray.....	150	cvs skin treatment.....	114
cvs ibuprofen	79	cvs nasal decongestant.....	150	cvs sleep aid	95
cvs ibuprofen childrens.....	79	cvs nasal decongestant pe.....	150	cvs sleep aid nighttime.....	95
cvs ibuprofen ib	79	cvs nasal mist.....	150	cvs smooth antacid extra st	119
cvs ibuprofen infants	79	cvs nasal spray	150	cvs sodium chloride	157
cvs ibuprofen junior strength	79	cvs natural daily fiber	126	cvs soft glucose	91
cvs indoor/outdoor allergy rlf	99	cvs natural fish oil.....	153	cvs soluble fiber therapy	126
cvs infants gas relief.....	122	cvs natural tears.....	154	cvs spectravite adult 50+	143
cvs infants pain relief drops.....	82	cvs natural tears pf.....	154	cvs spectravite advanced.....	143
cvs instant food thickener.....	158	cvs nicotine	89	cvs spectravite senior	143
cvs iron.....	125	cvs nicotine polacrilex	89	cvs spectravite ultra men 50+	143
cvs isopropyl alcohol	94	cvs non-aspirin childrens.....	83	cvs spectravite ultra mens	143
cvs isopropyl rubbing alcohol	94	cvs non-aspirin extra strength	83	cvs spectravite ultra women.....	143
cvs itch relief.....	110	cvs non-aspirin jr.....	83	cvs spectravite womens senior	143
cvs jock itch	110	cvs non-aspirin pm.....	95	cvs stomach relief	92
cvs lactase.....	123	cvs nose drops	150	cvs stomach relief max st.....	92
cvs laxative dietary supplemnt	128	cvs nts step 1	89	cvs stool softener	128, 133
cvs laxative pills.....	128	cvs oatmeal bath.....	114	cvs stool softener/laxative.....	128
cvs lice killing.....	116	cvs omeprazole.....	124	cvs stress formula/zinc.....	141
cvs lice solution	116	cvs one daily essential	142	cvs super b complex/c	141
cvs lice solution 3-step	116	cvs one daily womens formula	143	cvs therapeutic.....	117
cvs lice treatment	116	cvs one step wart remover	115	cvs triple antibiotic.....	108
cvs loratadine	99	cvs oral anesthetic max str.....	140	cvs triple antibiotic max str.....	108
cvs loratadine-d 24 hour.....	97	cvs oyster shell calcium+vit d.....	137	cvs triple antibiotic/pain.....	108
cvs lubricant drops fast act.....	154	cvs oyster shell calcium-vit d.....	137	cvs tussin adult chest congest	105
cvs lubricant drops long last.....	154	cvs pain & fever childrens	83	cvs tussin cough	102
cvs lubricant eye drops.....	154	cvs pain & fever infants.....	83	cvs tussin dm	102
cvs lubricant eye drops (pf)	154	cvs pain relief	83	cvs vision formula	143
cvs lubricant eye drops pf.....	154	cvs pain relief adult	83	cvs vit d 5000 high-potency	163
cvs magnesium	139	cvs pain relief childrens.....	83	cvs vitamin a	159
cvs magnesium citrate.....	128	cvs pain relief extra strength	83	cvs vitamin b12	160

INDEX

cvs vitamin b-12	160	dairy relief.....	123	dextrose	58
cvs vitamin b-2	160	dalfampridine er	54	dextrose-sodium chloride	58
cvs vitamin b-6	160	danazol	62	diabetes health formula.....	143
cvs vitamin c.....	162	dantrolene sodium.....	40	diabetic siltussin das-na	105
cvs vitamin c-rose hips	162	DANZITEN	33	diabetic siltussin-dm.....	102
cvs vitamin e.....	164	dapagliflozin	53	diabetic tussin	105
cvs wart remover.....	115	dapagliflozin-metformin hcl er	44	diabetic tussin chest/congest	105
cvs wart remover one step	115	dapsone	30	diabetic tussin dm	102
cvs wart remover pen	115	DAPTACEL	70	DIACOMIT	24
cvs womens active daily.....	143	daptomycin.....	20	diamode	92
cvs zinc gluconate.....	140	darunavir	42	diaper rash	116
cvs zinc oxide.....	116	dasatinib.....	33	diarrhea.....	92
cyanocobalamin	160	DAURISMO.....	33	diarrhea relief	92
cyclobenzaprine hcl.....	78	DAYHIST ALLERGY 12 HOUR		diazepam	24, 43
cyclophosphamide.....	31	RELIEF	97	diazepam intensol	43
cycloserine	30	deblitane.....	65	diazoxide.....	45
cyclosporine	69	decara	163	dibucaine (perianal)	89
cyclosporine (pf)	73	DECUBI-VITE	143	diclofenac potassium	18
cyclosporine modified.....	69	deep sea nasal spray.....	149	diclofenac sodium	18, 57, 74
cyproheptadine hcl	75	deferasirox	58	diclofenac sodium er	18
CYSTAGON	60	deferasirox granules.....	58	dicloxacillin sodium	22
CYSTARAN.....	73	DELSTRIGO	41	dicyclomine hcl.....	59
d 1000	163	delta d3	163	digoxin.....	49
d 400	163	demeclocycline hcl.....	23	dihydroergotamine mesylate	30
d-1000 extra strength	163	DEPO-SUBQ PROVERA 104	65	DILANTIN.....	25
d3 163		dermarest eczema	112	diltiazem hcl	50
d3 high potency	163	DESCOVY.....	41	diltiazem hcl er	50
d3 maximum strength.....	163	desenex.....	110	diltiazem hcl er beads	50
d3 super strength	163	desenex spray.....	110	diltiazem hcl er coated beads	50
d3 vitamin	163	desipramine hcl.....	28	dilt-xr	50
d3-1000.....	163	desmopressin ace spray refrig	62	dimaphen childrens.....	102
d-3-5.....	163	desmopressin acetate	62	dimaphen dm cold/cough	102
d3-50	163	desonide.....	56	dimaphen dm cold/cough child	102
d-400	163	desoximetasone	56	dimethyl fumarate	54
dabigatran etexilate mesylate.....	46	despec	105	dimethyl fumarate starter pack.....	54
daily cleansing max st	115	DEX4.....	91	DINO-LIFE W/IRON-ZINC	147
daily face wash.....	107	dex4 glucose	91	dioctyl.....	133
daily multiple vitamins	147	DEX4 GLUCOSE	91	dioctyl s.s.	133
daily multiple vitamins/iron	141	DEX4 NATURALS.....	91	diphen	97
daily multiple vitamins/min.....	143	DEX4 POUCH PACK.....	91	diphenhydramine hcl.....	97
daily multiple weight loss.....	143	DEX4 QUICK DISSOLVE GLUCOSE		diphenhydramine hcl childrens.....	97
daily value multivitamin	147		91	diphenhydramine-apap (sleep)	95
daily vitamin.....	147	dexamethasone.....	62	diphenoxylate-atropine.....	59
daily vitamin formula+iron.....	141	dexamethasone sodium phosphate	74	disopyramide phosphate.....	49
daily vitamin formula+minerals.....	143	dexmethylphenidate hcl	53	disulfiram.....	19
daily vitamins.....	147	dextroamphetamine sulfate.....	53	divalproex sodium	24
daily vite	147	dextromethorphan polistirex er.....	102	divalproex sodium er.....	24
dairy digest fast acting.....	123	dextromethorphan guaifenesin	102	dm-guaifenesin er	102
dairy digest ultra	123	dextromethorphan-guaifenesin	102	docosanol.....	112
dairy digestive	123	dextromethorphan-quinidine	54	docqlace.....	133

INDEX

doc-q-lax.....	128	e400.....	164	enema disposable.....	128
docu.....	133	e-400.....	164	enema pediatric.....	129
docu soft.....	133	e400 mixed.....	164	enema ready-to-use.....	129
docusate mini.....	133	ear drops.....	157	ENERGIX-B.....	70
docusate sodium.....	133	ear drops earwax aid.....	157	enilloring.....	63
docusil.....	133	ear wax removal drops.....	157	enoxaparin sodium.....	46
docusol mini.....	133	ear wax removal kit.....	157	ENSACOVE.....	33
docuzen.....	128	ear wax removal system.....	157	entacapone.....	37
dofetilide.....	49	earwax removal.....	157	entecavir.....	40
dok plus.....	128	earwax removal kit.....	157	enteric fish oil.....	153
dolishale.....	63	earwax treatment drops.....	157	ENTYVIO PEN.....	67
dona.....	79	easy-lax.....	133	enulose.....	59
DONA.....	79	easy-lax plus.....	128	ENVARSUS XR.....	69
donepezil hcl.....	26	EBGLYSS.....	56, 67	ephrine nose drops.....	150
DOPTelet.....	48	ec-81 aspirin.....	87	EPIDIOLEX.....	23
dorzolamide hcl.....	74	econazole nitrate.....	29	epinephrine.....	76
dorzolamide hcl-timolol mal.....	73	ecotrin low strength.....	87	eplerenone.....	53
dorzolamide hcl-timolol mal pf.....	73	ecpirin.....	87	eq 8hr arthritis pain relief.....	83
dotti.....	63	ed bron gp.....	105	eq acetaminophen.....	83
double antibiotic.....	108	ed chlorped jr.....	158	eq acetaminophen childrens.....	83
DOVATO.....	41	ed-apap.....	83	eq acetaminophen junior.....	83
doxazosin mesylate.....	61	EDURANT PED.....	41	eq acetaminophen pm.....	95
doxepin hcl.....	28	efavirenz.....	41	eq acid reducer.....	124
doxycycline hyclate.....	23, 55	efavirenz-emtricitab-tenofo df.....	41	eq acid reducer max st.....	124
doxycycline monohydrate.....	23	efavirenz-lamivudine-tenofovir.....	41	eq allerg relief child (cetir).....	99
dramamine less drowsy.....	93	ELIQUIS.....	46	eq allerg relief child (lorat).....	99
DRIZALMA SPRINKLE.....	27	ELIQUIS (1.5 MG PACK).....	46	eq allergy & congestion relief.....	97
dronabinol.....	28	ELIQUIS (2 MG PACK).....	46	eq allergy childrens.....	99
DROXIA.....	31	ELIQUIS DVT/PE STARTER PACK.....	46	eq allergy relief.....	99
droxidopa.....	48	ELMIRON.....	62	eq allergy relief (cetirizine).....	99
drug mart glucose.....	91	eltrombopag olamine.....	47	eq allergy relief childrens.....	99
drxchoice gas relief.....	122	eluryng.....	63	eq allergy relief d 24 hour.....	97
dss.....	133	EMGALITY.....	30	eq antacid.....	119
ducodyl.....	128	EMGALITY (300 MG DOSE).....	30	eq antacid extra strength.....	120
dulcolax stool softener.....	133	EMPAVELI.....	67	eq antacid maximum strength.....	120
DULERA.....	77	EMSAM.....	27	eq antacid ultra strength.....	120
duloxetine hcl.....	27	emtricitabine.....	41	eq antacid/anti-gas.....	120
DUODERM CGF DRESSING.....	118	emtricitabine-tenofovir df.....	41, 42	eq anti-diarrheal.....	92
DUODERM CGF EXTRA THIN.....	118	emtricitab-rilpivir-tenofov df.....	41	eq antifungal.....	110
DUODERM HYDROACTIVE.....	118	EMTRIVA.....	42	eq anti-itch max strength.....	112
DUOFILM.....	115	enalapril maleate.....	48	eq arthritis pain.....	83
DUPIXENT.....	67	enalapril-hydrochlorothiazide.....	51	eq aspirin.....	87
DUREX EXTRA SENSITIVE THIN.....	134	ENBREL.....	69	eq aspirin adult low dose.....	87
DUREX REALFEEL.....	134	ENBREL MINI.....	69	eq aspirin low dose.....	87
dutasteride.....	61	ENBREL SURECLICK.....	69	eq athletes foot.....	110
d-vita.....	163	ENCARE.....	153	eq athletes foot (terbinafine).....	110
dyna-hex 4.....	94	endacof-dm.....	102	eq athletes foot (tolnaftate).....	110
e 1000.....	164	endur-acin.....	160	eq athletes foot spray.....	110
e200.....	164	endur-c.....	162	eq bacitracin zinc.....	108
e-200.....	164	enema.....	128	eq calcium 500+d.....	137

INDEX

eq calcium 600+d	137	eq natural vegetable laxative	129	eq antacid advanced max st	120
eq calcium citrate+d	137	eq nicotine	89	eq antacid extra strength	120
eq cetirizine hcl	99	eq nicotine polacrilex	89	eq antacid ultra strength	120
eq childrens pain reliever	83	eq nicotine step 3	89	eq antacid/anti-gas	120
eq chlortabs	97	eq nighttime sleep aid	95	eq anti-diarrheal	92
eq clearlax	129	eq omeprazole magnesium	124	eq antifungal	110
eq cold/cough dm childrens	102	eq one daily mens health	143	eq antifungal (tolnaftate)	110
eq complete lice treatment	116	eq one daily womens health	143	eq anti-itch intensive heal	112
eq complete multivit adult 50+	143	eq one daily womens pro-active	143	eq anti-itch maximum strength	112
eq complete multivitamin-adult	143	eq pain & fever childrens	83	eq arthritis pain relief	83
eq cough dm	102	eq pain & fever infants	83	eq aspirin	87
eq daily fiber	126	eq pain relief/rapid burst	83	eq aspirin ec	87
eq dairy digestive fast acting	123	eq pain reliever	83	eq aspirin low dose	87
eq ear wax removal aid	157	eq pain reliever ex st	83	eq athletes foot	110
eq enema	129	eq petroleum jelly	114	eq athletes foot powder spray	110
eq eye itch relief	157	eq povidone-iodine	94	eq athletes foot spray	110
eq famotidine max st	124	eq restore plus lubricant eye	154	eq athletes foot(terbinafine)	110
eq fiber therapy	126	eq restore pm	154	eq b complex	141
eq first aid antiseptic	94	eq restore tears	154	eq b-12	160
eq gas relief extra strength	122	eq revive plus lubricant eye	154	eq b-6	160
eq gentle laxative	129	eq saline nasal spray	149	eq baby basics diaper rash	116
eq gentle lubricant	154	eq senna-s	129	eq bacitracin zinc	108
eq headache relief	79	eq slow-release iron	125	eq beta carotene	160
eq hydrocortisone	112	eq stomach relief	92	eq calcium	137
eq hydrocortisone max st	112	eq stomach relief max st	92	eq calcium citrate/vitamin d	137
eq ibuprofen	79	eq stool softener	133	eq calcium citrate/vitamin d3	137
eq ibuprofen childrens	79	eq stool softener/laxative	129	eq central-vite	143
eq ibuprofen infants	79	eq suphedrine	150	eq central-vite performance	143
eq ibuprofen junior	79	eq triple antibiotic	108	eq central-vite select	143
eq infants gas relief	122	eq tussin dm cough/chest	102	eq century	143
eq jock itch	110	eq vegetable laxative	129	eq century cardio health	143
eq laxative maximum strength	129	eq wart remover	115	eq child multivit/minerals	147
eq lice killing max st	116	eq womans laxative	129	eq childrens aspirin	87
eq lubricant eye drops	154	eql 12 hour decongestant	150	eq childrens c	147
eq magnesium citrate	129	eql acetaminophen	83	eq childrens ibuprofen	79
eq miconazole 1	158	eql acetaminophen 8 hour	83	eq childrens loratadine	100
eq miconazole 7	158	eql acetaminophen childrens	83	eq childrens pain relief	83
eq miconazole 7 day treatment	158	eql acetaminophen ex st	83	eq childrens pain reliever	83
eq milk of magnesia	129	eql acetaminophen infants	83	eq clearlax	129
eq mineral oil	129	eql acetaminophen pm	95	eq cold sore treatment	140
eq motion sickness relief	93	eql acetaminophen rapid tabs	83	eq cold/cough	102
eq mucus er	105	eql adult aspirin low strength	87	eq dairy digest fast acting	123
eq mucus relief dm	102	eql all day allergy	99	eq dairy digestive ultra	123
eq multivitamin gummies	147	eql all day allergy childrens	99	eq ear drops	157
eq naproxen sodium	79	eql all day allergy-d	97	eq fiber laxative	126
eq nasal allergy	150	eql all day pain relief	79	eq fiber therapy	126
eq nasal spray	150	eql all day relief	79	eq first aid antibiotic	108
eq nasal spray fast acting	150	eql allergy relief	99	eq fish oil	153
eq natural fiber laxative	126	eql allergy/congestion relief	97	eq folic acid	125
eq natural laxative	129	eql antacid	120	eq gas relief ultra strength	122

INDEX

eql gentle laxative.....	129	eql oyster shell calcium/d	137	estarylla.....	63
eql headache formula.....	79	eql pain & fever childrens.....	83	estradiol	63
eql headache pm.....	95	eql pain & fever infants.....	83	estradiol-norethindrone acet	63
eql headache relief ex str	79	eql pain relief.....	83	ESTRING.....	63
eql heartburn prevention	124	eql pain relief extra strength.....	83	estrogens conjugated.....	63
eql hemorrhoidal.....	88	eql pain relief pm.....	95	eszopiclone	78
eql hemorrhoidal cooling.....	88	eql pain relief pm ex st	95	ethambutol hcl.....	30
eql hydrogen peroxide.....	94	eql pediatric electrolyte	139	ethosuximide.....	24
eql ibuprofen.....	79	eql ready-to-use enema	129	etodolac	18
eql ibuprofen infants.....	79	eql saline nasal spray.....	149	etonogestrel-ethinyl estradiol	63
eql ibuprofen junior strength.....	79	eql senna laxative	129	etravirine	41
eql infant pain relief	83	eql senna-s.....	129	EUCRISA.....	56
eql infants gas relief	122	eql sinus nasal spray.....	151	EULEXIN.....	31
eql iron supplement therapy.....	125	eql slow release iron	125	evac-u-gen.....	129
eql isopropyl rubbing alcohol.....	94	eql smooth texture fiber.....	126	everolimus.....	33, 69
eql jock itch.....	110	eql stomach relief.....	92	EVOTAZ.....	42
eql laxative	129	eql stomach relief max st	92	EVRYSDI	60
eql laxative maximum strength.....	129	eql stool softener.....	133	exemestane	32
eql lice killing max st.....	116	eql stool softener/stimulant	129	extra action cough.....	102
eql lice solution.....	116	eql super b complex/vitamin c.....	141	extra strength pain relief	83
eql lice treatment maximum str	116	eql therapeutic.....	117	extraprin.....	80
eql magnesium.....	120	eql tussin chest congestion	105	EXXUA.....	27
eql magnesium citrate	129	eql tussin cough/chest congest	102	EXXUA TITRATION PACK	27
eql menstrual relief max st	83	eql tussin dm cough/chest cong.....	102	eye allergy itch relief	157
eql miconazole 1	158	eql tussin mucus/chest congest	105	eye allergy itch/redness rel	157
eql miconazole 3	158	eql ultimate womens century.....	143	eye itch relief.....	157
eql miconazole 7	158	eql vision formula	143	eye lubricant.....	154
eql migraine formula.....	80	eql vitamin b-12.....	160	ezetimibe.....	52
eql milk of magnesia.....	129	eql vitamin b-12 tr.....	160	ezetimibe-simvastatin	52
eql motion sickness relief	93	eql vitamin c	162	EZFE 200.....	125
eql mucus-er.....	105	eql vitamin c/rose hips.....	162	falmina	63
eql naproxen sodium	80	eql vitamin d3.....	163	famciclovir.....	43
eql nasal decongestant	150	eql vitamin e.....	164	famotidine	60, 124
eql nasal decongestant pe	150	eql womans laxative.....	129	famotidine maximum strength.....	124
eql nasal four.....	150	ergocalciferol.....	163	FANAPT.....	38
eql nasal spray 12 hour	150	ergotamine-caffeine	30	FANAPT TITRATION PACK A.....	38
eql nasal spray fast acting.....	151	ERIVEDGE.....	33	FANAPT TITRATION PACK B.....	39
eql nasal spray no drip	151	ERLEADA	31	FANAPT TITRATION PACK C.....	39
eql niacin	160	erlotinib hcl.....	33	FANTASY LUBRICATED.....	134
eql nicotine	89	errin.....	65	FANTASY	
eql nicotine polacrilex.....	89	ertapenem sodium	22	LUBRICATED/SPERMICIDE	134
eql nighttime sleep aid.....	95	ery.....	58	FARXIGA	53
eql one daily 50 plus.....	143	erythromycin.....	22, 58, 73	FASENRA.....	77
eql one daily diet support	143	erythromycin ethylsuccinate.....	22	FASENRA PEN.....	77
eql one daily dieters support	143	escitalopram oxalate	27	fast acting antacid/anti-gas	120
eql one daily essential	147	eslicarbazepine acetate	25	FC FEMALE CONDOM	134
eql one daily maximum.....	143	esomeprazole magnesium	60	FC2 FEMALE CONDOM	134
eql one daily mens health.....	143	ESSENTIA	143	febuxostat	30
eql one daily womens.....	147	essential magnesium	140	feirza 1.5/30.....	64
eql one daily womens 50+ adv.....	143	essential one daily multivit	147	feirza 1/20.....	64

INDEX

felbamate.....	23	flintstones complete	147	gas relief	122
felodipine er.....	50	FLINTSTONES COMPLETE.....	147	gas relief drops infants.....	122
fenesis ir.....	105	flintstones plus extra c.....	147	gas relief extra strength	122
fenofibrate	52	flintstones/extra c	147	gas relief infants.....	122
fenofibrate micronized	52	FLINTSTONES/MY FIRST.....	147	gas relief maximum strength	122
fenofibric acid	52	fluconazole.....	29	gas relief ultra strength	122
fentanyl.....	18	fluconazole in sodium chloride	29	GAS-X EXTRA STRENGTH	122
ferate	125	flucytosine	29	gatifloxacin.....	73
fergon	125	fludrocortisone acetate	62	gauze pads	72
FERGON.....	125	flunisolide	75	gavilax.....	129
fer-iron	125	fluocinolone acetonide	56	GAVILYTE-C.....	60
ferosul	125	fluocinonide.....	56	gavilyte-g.....	60
ferretts	125	fluorometholone	74	gavilyte-n with flavor pack.....	60
ferrex 150	125	fluorouracil.....	57	GAVRETO	33
ferric x-150	125	fluoxetine hcl	27	gefitinib.....	33
ferrocite	125	fluphenazine decanoate	38	gel callus removers	115
ferrous fumarate	125	fluphenazine hcl	38	gel-kam	140
ferrous gluconate.....	125	flurbiprofen	18	GEL-KAM.....	140
ferrous sulfate.....	125	flurbiprofen sodium.....	74	gemfibrozil.....	52
ferrous sulfate iron.....	125	fluticasone furoate-vilanterol	77	GEMTESA	61
ferrousul	125	fluticasone propionate	56, 75	generlac	59
fesoterodine fumarate er	61	fluticasone-salmeterol	77	gengraf.....	69
FETZIMA.....	27	fluvastatin sodium	52	genicin.....	79
FETZIMA TITRATION	27	fluvastatin sodium er	52	GENOTROPIN.....	62
fever reducer childrens.....	83	fluvoxamine maleate	27	GENOTROPIN MINIQUICK.....	62
FEVERALL INFANTS.....	83	folate	125	gentamicin sulfate	20, 73
fiber	126	folic acid.....	125	genteal tears	154
fiber laxative	126	fondaparinux sodium.....	46, 47	gentle laxative.....	129
fiber therapy	126	for sty relief.....	154	gentle stool softener.....	133
fiber-lax	126	formula 3 the treatment	110	gentlelax.....	129
fidaxomicin	22	fosamprenavir calcium	42	GENVOYA	41
FILSPARI	51	fosfomycin tromethamine	20	geri-dryl.....	97
FINACEA.....	55	fosinopril sodium	48	geri-kot.....	129
finasteride.....	61	fosinopril sodium-hctz	51	geri-lanta	120
fingolimod hcl	54	FOTIVDA.....	33	geri-lanta maximum strength	120
FINTEPLA	23	FRAGMIN.....	47	geri-mox	120
FIRMAGON.....	66	freedavite	143	geri-mucil	126
FIRMAGON (240 MG DOSE).....	66	fruit c 500	162	geri-pectate	92
fish oil	153	FRUZAQLA.....	33	geri-tussin	105
fish oil concentrate	153	ft nicotine.....	89	geri-tussin dm	102
fish oil omega-3.....	153	full spectrum b/vitamin c.....	141	geri-vite	143
fish oil/super potent/no burp	153	fungoid-d	110	GILOTRIF	33
flanax heartburn relief.....	120	furosemide	51	giltuss cough & chest	103
flanax pain relief	80	fyavolv	64	giltuss diabetic cough & cold.....	103
FLAREX	74	g tussin ac.....	102	glatiramer acetate	54
flecainide acetate	49	gabapentin	24, 25	glimepiride.....	44
fleet glycerin (adult)	129	galantamine hydrobromide.....	26	glipizide	44
fleet laxative	129	galantamine hydrobromide er	26	glipizide er.....	44
FLEET LIQUID GLYCERIN SUPP.....	129	gallifrey.....	65	glipizide-metformin hcl	44
FLEET MINI ENEMA.....	129	GARDASIL 9.....	70	glucagon emergency.....	45

INDEX

<i>gluco burst</i>	91	<i>gnp athletes foot</i>	110	<i>gnp glucose</i>	91
<i>glucosamine sulfate</i>	79	<i>gnp bacitracin zinc</i>	108	<i>gnp glycerin (adult)</i>	130
<i>glucose</i>	91	<i>gnp bisa-lax</i>	130	<i>gnp glycerin child</i>	130
<i>glucose instant energy</i>	91	<i>gnp calamine</i>	114	<i>gnp hair/skin/nails</i>	143
<i>glutose 15</i>	91	<i>gnp calcium</i>	137	<i>gnp headache pm</i>	95
<i>glutose 45</i>	91	<i>gnp calcium 500 +d3</i>	137	<i>gnp headache relief</i>	80
<i>glutose 5</i>	91	<i>gnp calcium 600 +d3/minerals</i>	137	<i>gnp headache relief extra str</i>	80
<i>glyburide</i>	44	<i>gnp calcium 600/d</i>	137	<i>gnp healthy eyes</i>	143
<i>glyburide-metformin</i>	44	<i>gnp calcium citrate +d3</i>	137	<i>gnp healthy eyes supervision</i>	143
<i>glycerin (adult)</i>	129	<i>gnp century</i>	143	<i>gnp hydrocortisone</i>	112
<i>glycerin (child)</i>	129	<i>gnp century active performance</i>	143	<i>gnp hydrocortisone max st</i>	112
<i>glycerin (infant)</i>	129	<i>gnp century adults 50+ senior</i>	143	<i>gnp hydrocortisone plus</i>	112
<i>glycerin (infants & children)</i>	129	<i>gnp century cardio health</i>	143	<i>gnp hydrocortisone/aloe</i>	112
<i>glycerin (pediatric)</i>	129	<i>gnp century energy metabolism</i>	147	<i>gnp hydrogen peroxide</i>	94
<i>glycerin adult</i>	129	<i>gnp century mature</i>	143	<i>gnp ibuprofen</i>	80
<i>glycerin childrens</i>	130	<i>gnp century ultimate mens</i>	143	<i>gnp ibuprofen infants</i>	80
<i>glycolax</i>	130	<i>gnp century ultimate womens</i>	143	<i>gnp ibuprofen junior strength</i>	80
<i>glycopyrrolate</i>	59	<i>gnp childrens allergy</i>	97	<i>gnp infant gas relief</i>	122
<i>GLYXAMBI</i>	44	<i>gnp childrens chewables/iron</i>	147	<i>gnp infants gas relief</i>	122
<i>gnp 12 hour nasal spray</i>	151	<i>gnp childrens easy-melts</i>	83	<i>gnp infants pain relief</i>	84
<i>gnp 24 hour nasal allergy</i>	150	<i>gnp childrens ibuprofen</i>	80	<i>gnp infants pain/fever</i>	84
<i>gnp 8 hour arthritis relief</i>	83	<i>gnp children's pain & fever</i>	83	<i>gnp iron</i>	125
<i>gnp 8 hour pain reliever</i>	83	<i>gnp childrens pain relief</i>	84	<i>gnp isopropyl alcohol</i>	94
<i>gnp acetaminophen</i>	83	<i>gnp clearlax</i>	130	<i>gnp k-pec</i>	92
<i>gnp acid reducer</i>	124	<i>gnp clotrimazole 3</i>	158	<i>gnp laxative</i>	130
<i>gnp acid reducer max st</i>	124	<i>gnp cold/allergy childrens</i>	103	<i>gnp laxative pills</i>	130
<i>gnp adult aspirin low strength</i>	87	<i>gnp cold/cough childrens</i>	103	<i>gnp lice solution</i>	116
<i>gnp all day allergy</i>	100	<i>gnp cough dm er</i>	103	<i>gnp lice treatment</i>	116
<i>gnp all day allergy childrens</i>	100	<i>gnp d 1000</i>	163	<i>gnp little ones childrens</i>	147
<i>gnp all day allergy-d</i>	97	<i>gnp dairy relief</i>	123	<i>gnp loratadine</i>	100
<i>gnp all day pain relief</i>	80	<i>gnp dayhist allergy</i>	97	<i>gnp loratadine childrens</i>	100
<i>gnp allergy</i>	97	<i>gnp diabetic support formula</i>	143	<i>gnp loratadine-d 12hr</i>	97
<i>gnp allergy & congestion</i>	97	<i>gnp ear drops</i>	157	<i>gnp loratadine-d 24 hour</i>	97
<i>gnp allergy antihistamine</i>	97	<i>gnp ear systems</i>	157	<i>gnp lubricant eye drops</i>	154
<i>gnp allergy relief</i>	97, 100	<i>gnp earwax removal drops</i>	157	<i>gnp lubricant pm</i>	154
<i>gnp allergy/congestion relief</i>	97	<i>gnp earwax removal kit</i>	158	<i>gnp lubricating plus eye drops</i>	155
<i>gnp antacid</i>	120	<i>gnp electrolyte solution</i>	139	<i>gnp magnesium citrate</i>	130
<i>gnp antacid & anti-gas</i>	120	<i>gnp enema</i>	130	<i>gnp magnesium oxide</i>	120
<i>gnp antacid anti-gas</i>	120	<i>gnp essential one daily</i>	147	<i>gnp masanti maximum strength</i>	120
<i>gnp antacid extra strength</i>	120	<i>gnp eye drops</i>	154	<i>gnp masanti regular strength</i>	120
<i>gnp antacid maximum strength</i>	120	<i>gnp eye drops long lasting</i>	154	<i>gnp mega multi for men</i>	143
<i>gnp antacid regular strength</i>	120	<i>gnp fast acting dairy relief</i>	123	<i>gnp mega multi for women</i>	143
<i>gnp antacid ultra strength</i>	120	<i>gnp fiber</i>	126	<i>gnp miconazole 3</i>	159
<i>gnp anti-diarrheal</i>	92	<i>gnp fiber therapy</i>	126	<i>gnp miconazole 7</i>	159
<i>gnp anti-gas</i>	122	<i>gnp fiber-caps</i>	126	<i>gnp miconazole nitrate</i>	110
<i>gnp antiseptic skin cleanser</i>	94	<i>gnp fish oil</i>	153	<i>gnp miconazorb af</i>	110
<i>gnp arthritis pain relief</i>	83	<i>gnp folic acid</i>	125	<i>gnp migraine relief</i>	80
<i>gnp artificial tears</i>	154	<i>gnp gas relief</i>	122	<i>gnp milk of magnesia</i>	130
<i>gnp aspirin</i>	87	<i>gnp gas relief extra strength</i>	122	<i>gnp mineral oil</i>	130
<i>gnp aspirin low dose</i>	87	<i>gnp gentle laxative</i>	130	<i>gnp mineral oil heavy</i>	130

INDEX

gnp motion sickness relief.....	93	gnp therapeutic-m.....	144	goodsense itchy eye.....	157
gnp mucus dm max strength.....	103	gnp tolnaftate.....	110	goodsense lubricating eye drop.....	155
gnp mucus er.....	105	gnp triple antibiotic.....	108	goodsense magnesium citrate.....	130
gnp mucus relief.....	105	gnp triple antibiotic plus.....	108	goodsense migraine formula.....	80
gnp multi-purpose.....	156	gnp tussin.....	105	goodsense mineral oil.....	130
gnp naproxen sodium.....	80	gnp tussin dm.....	103	goodsense mucus relief.....	105
gnp nasal decongestant.....	151	gnp tussin dm cough.....	103	goodsense naproxen sodium.....	80
gnp nasal decongestant pe.....	151	gnp tussin mucus & chest cong.....	105	goodsense nasal allergy spray.....	150
gnp nasal moisturizing.....	149	gnp ultra lubricant eye drops.....	155	goodsense natural fiber.....	127
gnp nasal spray.....	151	gnp vitamin a.....	160	goodsense nicotine.....	89
gnp nasal spray extra moist.....	151	gnp vitamin b-1.....	160	goodsense pain & fever child.....	84
gnp nasal spray fast acting.....	151	gnp vitamin b-12.....	160	goodsense pain & fever infants.....	84
gnp natural fiber.....	126, 127	gnp vitamin b-6.....	160	goodsense pain relief.....	84
gnp niacin.....	160	gnp vitamin c.....	162	goodsense pain relief extra st.....	84
gnp nicotine.....	89	gnp vitamin c w/rose hips.....	162	goodsense pain relief pm ex st.....	95
gnp nicotine mini.....	89	gnp vitamin c/rose hips.....	162	goodsense petroleum jelly.....	114
gnp nicotine polacrilex.....	89	gnp vitamin d.....	163	goodsense senna laxative.....	130
gnp nighttime sleep aid.....	95	gnp vitamin d3.....	163	goodsense stimulant laxative.....	130
gnp no drip nasal spray.....	151	gnp vitamin d3 extra strength.....	163	griseofulvin microsize.....	29
gnp nose drops extra strength.....	151	gnp vitamin d-400.....	163	griseofulvin ultramicrosize.....	29
gnp olopatadine hcl.....	157	gnp vitamin e.....	164	grx dyne.....	94
gnp one daily maximum.....	143	gnp wart remover.....	115	GRX WHITE PETROLATUM.....	114
gnp one daily mens health 50+.....	144	gnp womens gentle laxative.....	130	g-tron.....	102
gnp one daily mens/lycopene.....	144	gnp zinc oxide.....	116	guaiaisorb dm.....	103
gnp one daily plus iron.....	141	gnp zochews gummies.....	147	guaiaatussin ac.....	103
gnp one daily womens.....	144	GOMEKLI.....	33	guaifenesin.....	105
gnp one daily womens 50+.....	144	goodsense all day allergy.....	100	guaifenesin ac.....	103
gnp one daily womens health.....	147	goodsense allergy relief.....	97	guaifenesin er.....	105
gnp pain & fever childrens.....	84	goodsense arthritis pain.....	84	guaifenesin-codeine.....	103
gnp pain & fever infants.....	84	goodsense artificial tears.....	155	guaifenesin-dm.....	103
gnp pain relief.....	84	goodsense aspirin.....	87	guanfacine hcl.....	48
gnp pain relief extra strength.....	84	goodsense aspirin adult low st.....	87	guanfacine hcl er.....	53
gnp pain relief pm ex st.....	95	goodsense aspirin low dose.....	87	GUMMI BEAR MULTIVITAMIN/MIN.....	147
gnp pain reliever ex st.....	84	goodsense bisacodyl ec.....	130	GVOKE HYPOPEN 2-PACK.....	45
gnp pediatric electrolyte.....	139	goodsense calamine.....	114	GVOKE KIT.....	45
gnp petroleum jelly.....	114	goodsense clearlax.....	130	GVOKE PFS.....	45
gnp prenatal.....	149	goodsense complete lice kit.....	117	habitrol.....	89
gnp pseudoephedrine hcl 12 hr.....	151	goodsense cough dm.....	103	hailey fe 1/20.....	64
gnp quick dissolve glucose.....	91	goodsense cough dm childrens.....	103	hair vitamins.....	144
gnp scalp relief.....	115	goodsense ear wax kit.....	158	hair/skin/nails.....	144
gnp senna lax.....	130	goodsense ear wax removal.....	158	halobetasol propionate.....	56
gnp senna plus.....	130	goodsense electrolyte.....	139	haloperidol.....	38
gnp senna-lax.....	130	goodsense gas relief.....	122	haloperidol decanoate.....	38
gnp stomach relief.....	92	goodsense glucose.....	91	haloperidol lactate.....	38
gnp stomach relief max st.....	92	goodsense headache pm.....	95	HAVRIX.....	70
gnp stool softener.....	133	goodsense hydrogen peroxide.....	94	headache pain-reliever.....	80
gnp stool softener/laxative.....	130	goodsense ibuprofen.....	80	headache pm.....	95
gnp suphedrin.....	151	goodsense ibuprofen childrens.....	80	headache pm formula.....	95
gnp tab tussin.....	105	goodsense ibuprofen infants.....	80	headache relief.....	80
gnp terbinafine hydrochloride.....	110	goodsense ibuprofen junior st.....	80		

INDEX

<i>headache relief pm</i>	95	<i>hm chest congestion relief</i>	105	<i>hm multi-purpose no rub</i>	156
<i>healthy eyes</i>	144	<i>hm clearlax</i>	130	<i>hm naproxen sodium</i>	80
<i>healthy eyes/lutein</i>	144	<i>hm cold & cough childrens</i>	103	<i>hm nasal decongestant</i>	151
<i>healthy mama eazzze the pain</i>	95	<i>hm complete</i>	144	<i>hm nasal decongestant 12 hour</i>	151
<i>healthy mama shake that ache</i>	84	<i>hm complete 50+</i>	144	<i>hm nasal decongestant pe</i>	151
<i>healthylax</i>	130	<i>hm complete 50+ mens ultimate</i>	144	<i>hm nasal spray</i>	151
<i>heartburn relief</i>	124	<i>hm complete 50+ women ultimate</i>	144	<i>hm niacin</i>	160
<i>heartburn relief max st</i>	124	<i>hm complete men</i>	144	<i>hm niacin tr</i>	160
<i>heather</i>	65	<i>hm complete women</i>	144	<i>hm nicotine</i>	89
<i>h-e-b oral electrolyte</i>	139	<i>hm cough dm</i>	103	<i>hm nicotine polacrilex</i>	89
<i>HEMOCYTE</i>	125	<i>hm daytime cold & flu</i>	103	<i>hm nose drops</i>	151
<i>hemorrhoidal</i>	88	<i>hm double antibiotic</i>	108	<i>hm one daily essential</i>	147
<i>hemorrhoidal cooling</i>	88	<i>hm e vitamin</i>	164	<i>hm one daily mens</i>	144
<i>heparin sodium (porcine)</i>	47	<i>hm earwax removal aid</i>	158	<i>hm one daily womens</i>	144
<i>HEPLISAV-B</i>	70	<i>hm earwax removal kit</i>	158	<i>hm one daily/iron</i>	141
<i>HERNEXEOS</i>	33	<i>hm enema</i>	130	<i>hm pain & fever childrens</i>	84
<i>HIBERIX</i>	70	<i>hm esomeprazole magnesium dr</i>	124	<i>hm pain & fever infants</i>	84
<i>hm acetaminophen childrens</i>	84	<i>hm eye itch relief</i>	157	<i>hm pain relief extra strength</i>	84
<i>hm acetaminophen pm ex st</i>	95	<i>hm famotidine</i>	124	<i>hm pain reliever</i>	84
<i>hm advanced antacid max st</i>	120	<i>hm fiber</i>	127	<i>hm pain reliever pm ex st</i>	95
<i>hm all day allergy</i>	100	<i>hm fish oil</i>	153	<i>hm pediatric electrolyte</i>	139
<i>hm all day allergy childrens</i>	100	<i>hm folic acid</i>	125	<i>hm petroleum jelly</i>	114
<i>hm allergy & congestion</i>	97	<i>hm gas relief</i>	122	<i>hm povidone-iodine</i>	94
<i>hm allergy complete childrens</i>	100	<i>hm gas relief infants drops</i>	123	<i>hm prenatal</i>	149
<i>hm allergy complete-d</i>	97	<i>hm hydrocortisone plus</i>	112	<i>hm saline nasal spray</i>	149
<i>hm allergy relief</i>	97, 100	<i>hm hydrocortisone-aloe max st</i>	113	<i>hm senna</i>	130
<i>hm allergy relief (loratadine)</i>	100	<i>hm hydrogen peroxide</i>	94	<i>hm senna-s</i>	130
<i>hm allergy relief childrens</i>	97	<i>hm ibuprofen</i>	80	<i>hm sinus nasal spray</i>	151
<i>hm allergy relief/nasal decong</i>	97	<i>hm ibuprofen childrens</i>	80	<i>hm stomach relief</i>	92
<i>hm animal shapes</i>	147	<i>hm ibuprofen ib</i>	80	<i>hm stomach relief max strength</i>	92
<i>hm antacid</i>	120	<i>hm ibuprofen infants</i>	80	<i>hm stool softener</i>	133
<i>hm antacid anti-gas ex st</i>	120	<i>hm iron</i>	125	<i>hm stool softener/laxative</i>	130
<i>hm antacid/antigas</i>	120	<i>hm isopropyl alcohol</i>	94	<i>hm super vitamin b complex/c</i>	141
<i>hm anti-diarrheal</i>	92	<i>hm laxative</i>	130	<i>hm triple antibiotic</i>	108
<i>hm antioxidant vitamins</i>	144	<i>hm lice killing max st</i>	117	<i>hm triple antibiotic max st</i>	108
<i>hm antiseptic skin cleanser</i>	94	<i>hm lice treatment</i>	117	<i>hm tussin adult</i>	105
<i>hm arthritis pain relief</i>	84	<i>hm loperamide hcl</i>	92	<i>hm tussin adult dm</i>	103
<i>hm aspirin</i>	87	<i>hm loratadine</i>	100	<i>hm vitamin b complex/vitamin c</i>	141
<i>hm aspirin ec</i>	87	<i>hm loratadine childrens</i>	100	<i>hm vitamin b12</i>	160
<i>hm aspirin ec low dose</i>	88	<i>hm lubricating plus</i>	155	<i>hm vitamin b-12</i>	160
<i>hm bacitracin zinc</i>	108	<i>hm lubricating tears</i>	155	<i>hm vitamin b6</i>	160
<i>hm calamine</i>	114	<i>hm magnesium</i>	120	<i>hm vitamin c</i>	162
<i>hm calcium 600+d plus minerals</i>	137	<i>hm magnesium citrate</i>	130	<i>hm vitamin c/rose hips</i>	162
<i>hm calcium antacid</i>	120	<i>hm migraine relief</i>	80	<i>hm vitamin d</i>	163
<i>hm calcium antacid ex st</i>	120	<i>hm milk of magnesia</i>	130	<i>hm vitamin d3</i>	163
<i>hm calcium citrate+d3 petite</i>	137	<i>hm mineral oil</i>	130	<i>hm vitamin e</i>	164
<i>hm calcium citrate+vitamin d</i>	137	<i>hm motion relief</i>	93	<i>hm womens 50+ advanced daily</i>	144
<i>hm calcium-vitamin d</i>	138	<i>hm motion sickness relief</i>	93	<i>hm zinc</i>	140
<i>hm cetirizine hcl</i>	100	<i>hm mucus er</i>	105	<i>HONEY BEARS W/IRON-ZINC</i>	148
<i>hm cetirizine hcl childrens</i>	100	<i>hm mucus relief d</i>	105	<i>HUMALOG</i>	45

INDEX

HUMALOG JUNIOR KWIKPEN	45	icaps mv	144	ipratropium bromide	75
HUMALOG KWIKPEN	45	ICAPS MV	144	ipratropium bromide hfa	75
HUMALOG MIX 50/50 KWIKPEN ...	45	icatibant acetate	67	ipratropium-albuterol	78
HUMALOG MIX 75/25	45	iclevia	64	i-prin	80
HUMALOG MIX 75/25 KWIKPEN ...	45	ICLUSIG	33	irbesartan	48
HUMATIN	20	icosapent ethyl	52	irbesartan-hydrochlorothiazide	51
HUMULIN 70/30	45	IDHIFA	33	iron	125
HUMULIN 70/30 KWIKPEN	45	IDVYNOS	41	iron 27	125
HUMULIN N	45	ILEVRO	74	iron high-potency	125
HUMULIN N KWIKPEN	45	imatinib mesylate	33	iron supplement	125
HUMULIN R	45	IMBRUVICA	33	iron supplement childrens	125
HUMULIN R U-500 KWIKPEN	45	imipenem-cilastatin	22	ISENTRESS	41
hydralazine hcl	53	imipramine hcl	28	ISENTRESS HD	41
hydrochlorothiazide	52	imiquimod	57	isoniazid	30
hydrocodone-acetaminophen	19	imkeldi	33	isopropyl alcohol	94
hydrocortisone	56, 57, 62, 71, 113	imodium a-d	92	isopropyl alcohol (rubbing)	94
hydrocortisone (perianal)	71	IMODIUM A-D	92	isopropyl alcohol, rubbing	94
hydrocortisone acetate	113	IMOVAX RABIES	70	isosorb dinitrate-hydralazine	51
hydrocortisone anti-itch	113	INBRIJA	37	isosorbide dinitrate	53
hydrocortisone intensive heal	113	incassia	65	isosorbide mononitrate	53
hydrocortisone max st	113	INCRELEX	62	isosorbide mononitrate er	53
hydrocortisone max st/12 moist	113	INCRUSE ELLIPTA	75	isotretinoin	55
hydrocortisone plus	113	indapamide	52	ISTURISA	62
hydrocortisone valerate	57	indomethacin	18	ITOVEBI	31
hydrocortisone/aloe max str	113	indomethacin er	18	itraconazole	29
hydrocortisone-acetic acid	74	INFANRIX	70	ivabradine hcl	51
hydrocortisone-aloe	113	infants gas relief	123	ivermectin	36
hydrogen peroxide	94	infants ibuprofen	80	i-vite protect	144
hydromorphone hcl	19	infants pain & fever	84	IWILFIN	32
hydromorphone hcl pf	19	infants pain relief	84	IXIARO	70
hydroskin	113	infants simethicone	123	jaimiess	64
hydroxychloroquine sulfate	37	INGREZZA	54	JAKAFI	33
hydroxyurea	31	INLURIYO	31	JAKAFI XR	33
hydroxyzine hcl	75	INLYTA	33	jantoven	47
hydroxyzine pamoate	75	INQOVI	33	JANUMET	44
hyprost	79	INREBIC	31	JANUMET XR	44
HYRNUO	33	instacort 5	113	JANUVIA	44
ibandronate sodium	72	insulin lispro	45	JARDIANCE	53
IBRANCE	31, 33	INTELENCE	41	JAYPIRCA	33, 34
IBTROZI	33	intense toothache pain relief	140	JENTADUETO	44
ibu	18	introvale	64	JENTADUETO XR	44
ibu-200	80	INVEGA HAFYERA	39	JIDEYTRO	34
ibu-drops	80	INVEGA SUSTENNA	39	jinteli	64
ibuprofen	18, 80	INVEGA TRINZA	39	jock itch	110
ibuprofen childrens	80	invisible acne max st	107	jock itch relief	110
ibuprofen infants	80	ionil-t	117	jock itch spray	110
ibuprofen infants drops	80	iophen c-nr	103	jock itch spray powder	111
ibuprofen junior strength	80	iophen dm-nr	103	JOURNAVX	18
icaps	144	iophen-nr	105	JUBBONTI	72
ICAPS	144	IPOL	70	JUBLIA	29

INDEX

JULUCA	41	KLOXXADO	19	kp folic acid	125
june1 1.5/30.....	64	kls acetaminophen ex st.....	84	kp hydrocortisone.....	113
june1 1/20.....	64	kls acid controller max st.....	124	kp hydrocortisone max st	113
june1 fe 1.5/30.....	64	kls allerclear	100	kp ketotifen fumarate	157
june1 fe 1/20.....	64	kls allerclear d-12hr.....	97	kp loratadine	100
junior mapap.....	84	kls allerclear d-24hr.....	97	kp mag-oxide magnesium.....	140
JYLAMVO.....	69	kls aller-cort.....	150	kp mens daily formula	144
JYNNEOS	70	kls allergy medicine.....	97	kp miconazole nitrate	111
KALYDECO.....	76	kls aller-tec.....	100	kp niacin.....	160
KAMELEON LUBRICATED.....	134	kls aller-tec childrens.....	100	kp omeprazole magnesium.....	124
kaopectate.....	92	kls aller-tec d	97	kp prenatal multivitamins	149
kaopectate extra strength.....	92	kls anti-diarrheal.....	92	kp pseudoephedrine hcl.....	151
kao-tin	92	kls arthritis pain	84	kp senna	130
kariva.....	64	kls aspirin ec	88	kp terbinafine hydrochloride.....	111
kelnor 1/35.....	64	kls aspirin low dose	88	kp tolnaftate	111
keralyt.....	115	kls fast acting lactase	123	KP VISION FORMULA/LUTEIN.....	144
KERALYT	115	kls fiber-tabs.....	127	kp vitamin b-12.....	160
KERENDIA	53	kls hydrocortisone plus.....	113	kp vitamin b-6.....	160
kerr insta-char	120	kls ibuprofen.....	80	kp vitamin d.....	163
KESIMPTA	54	kls ibuprofen ib.....	80	kp vitamin d3.....	163
ketoconazole	29	kls laxaclear	130	kp vitamin e.....	164
ketorolac tromethamine.....	18, 74	kls mucus relief chest.....	105	kp womens 50+ daily formula	144
ketotifen fumarate.....	157	kls naproxen sodium	80	kp womens daily formula	144
kids gummy bear vitamins.....	148	kls nasal decongestant spray.....	151	K-PAX IMMUNE PROFESSIONAL ST	
kids vitamins.....	148	kls natural psyllium fiber.....	127		144
kids vitamins complete	148	kls non aspirin	84	kpn prenatal	149
kids vitamins plus extra c	148	kls pain relief childrens.....	84	KRAZATI.....	34
kids vitamins plus iron	148	kls quit2.....	89	kruger glucose	91
kimono.....	134	kls quit4.....	89	ks stool softener.....	133
KIMONO COLORS.....	134	kls rapid release pain	84	kurvelo	64
KIMONO MAXX-LARGE FLARE.....	134	kls stool softener	133	K-Y ME & YOU EXTRA LUBRICATED	
kimono micro thin	134	KOMZIFTI	32		134
kimono micro thin plus.....	134	konsyl.....	127	K-Y ME & YOU INTENSE.....	134
kimono plus	134	konsyl daily fiber.....	127	KYGEVVI	72
kimono ps.....	134	konsyl fiber.....	127	labetalol hcl	49
kimono ps plus	134	KOSELUGO.....	34	lac-dose	123
kimono sensation	134	kp adults 50+ daily formula	144	LAC-HYDRIN FIVE.....	114
kimono sensation plus.....	134	kp adults daily formula	144	lacosamide.....	25
KIMONO SPECIAL.....	134	kp aspirin.....	88	lactase.....	123
KINERET.....	67	kp b complex-c.....	141	lactase enzyme.....	123
KINRIX	70	kp bacitracin zinc.....	108	lactase fast acting	123
kionex.....	59	kp benzoyl peroxide	107	lactose fast acting relief	123
KISQALI (200 MG DOSE)	34	kp benzoyl peroxide wash.....	107	lactulose.....	59
KISQALI (400 MG DOSE)	34	kp bisacodyl	130	lamisil af defense	111
KISQALI (600 MG DOSE)	34	kp calcium 600+d	138	lamivudine.....	40, 42
klor-con	58	kp calcium citrate+d	138	lamivudine-zidovudine	42
klor-con 10.....	58	kp cetirizine hcl.....	100	lamotrigine	23
klor-con m10.....	58	kp clotrimazole	111	lamotrigine er	23
klor-con m15.....	58	kp double antibiotic	108	lamotrigine starter kit-blue.....	23
klor-con m20.....	58	kp ferrous sulfate.....	125	lamotrigine starter kit-green	23

INDEX

lamotrigine starter kit-orange.....	23	levonorgest-eth estrad 91-day	64	LIVTENCITY	40
lansoprazole	60	levonorgestrel-ethinyl estrad	64	LOHIST-D	97
LANTUS	45	levonorg-eth estrad triphasic	64	lojaimiess	64
LANTUS SOLOSTAR.....	46	levothyroxine sodium	66	LOKELMA	59
lapatinib ditosylate	34	levoxyl	66	lomustine.....	31
larin 1.5/30.....	64	l-glutamine.....	60	longs glucose	91
larin 1/20.....	64	lice killing.....	117	LONSURF.....	32
larin fe 1.5/30.....	64	lice killing maximum strength	117	loperamide hcl.....	59, 92
larin fe 1/20.....	64	lice solution	117	lopinavir-ritonavir.....	42
latanoprost.....	74	lice treatment.....	117	loradamed	100
laxa basic	133	lice treatment max st.....	117	loratadine	100
laxacin	130	lidocaine	19	loratadine childrens.....	100
laxative	130	lidocaine viscous hcl	55	loratadine hives relief	100
laxative feminine.....	130	lidocaine-prilocaine	19	loratadine-d 12hr.....	97
laxative max str	130	LIFESTYLES ASSORTED COLORS	134	loratadine-d 24hr.....	97
laxative pills.....	130	LIFESTYLES EXTRA STRENGTH	134	lorazepam	43
laxative polyethylene glycol.....	130	LIFESTYLES FORM FITTING	134	lorazepam intensol.....	43
LAZCLUZE	32	LIFESTYLES LUBRICATED	134	LORBRENA	34
l-carnitine.....	118	LIFESTYLES RIBBED	134	losartan potassium.....	48
leader glucose	91	LIFESTYLES SKYN ORIGINAL.....	134	losartan potassium-hctz	51
leader quick dissolve glucose.....	91	LIFESTYLES SPERMICIDAL LUBE	134	loteprednol etabonate	74
leflunomide	69	LIFESTYLES STUDDED	134	loteprednol-tobramycin	73
lenalidomide	31	LIFESTYLES ULTRA SENSITIVE	134	lotrimin af	111
LENVIMA (10 MG DAILY DOSE).....	34	LIFESTYLES VIBRA-RIBBED.....	134	lotrimin af deodorant powder	111
LENVIMA (12 MG DAILY DOSE).....	34	LIFESTYLES XTRA PLEASURE	134	lotrimin af jock itch powder.....	111
LENVIMA (14 MG DAILY DOSE).....	34	LIFYORLI (125 MG DOSE).....	34	lotrimin af powder.....	111
LENVIMA (18 MG DAILY DOSE).....	34	LIFYORLI (150 MG DOSE).....	34	lovastatin.....	52
LENVIMA (20 MG DAILY DOSE).....	34	LILETTA (52 MG).....	65	low-ogestrel.....	64
LENVIMA (24 MG DAILY DOSE).....	34	linezolid.....	20	loxapine succinate	38
LENVIMA (4 MG DAILY DOSE).....	34	LINZESS	59	lubiprostone	59
LENVIMA (8 MG DAILY DOSE).....	34	liomny.....	66	lubricant drops	155
LEQEMBI IQLIK	26	liothyronine sodium	66	lubricant eye.....	155
LEQEMBI IQLIK (500 MG DOSE)	26	liquid acetaminophen	84	lubricant eye drops.....	155
lessina	64	liquid corn & callus remover.....	115	lubricant eye drops (pf)	155
letrozole.....	32	liquid pain relief.....	84	lubricant eye drops pf.....	155
leucovorin calcium.....	32	liquitears.....	155	lubricant eye nighttime	155
LEUKERAN.....	31	lisinopril	48	lubricant pm	155
LEUKINE.....	47	lisinopril-hydrochlorothiazide.....	51	lubricating & rewetting.....	156
leuprolide acetate	66	lithium.....	43	lubricating eye drops.....	155
levalbuterol hcl	76	lithium carbonate.....	43	lubricating plus eye drops	155
levalbuterol tartrate.....	76	lithium carbonate er.....	43	lubricating tears eye drops.....	155
levetiracetam	23, 24	little animals/iron	148	lubrifresh p.m.	155
levetiracetam er.....	24	little noses stuffy nose kit	149	luizza 1.5/30.....	64
levobunolol hcl.....	74	little remedies for fever.....	84	luizza 1/20.....	64
levocarnitine	72	little remedies for tummys	123	LUMAKRAS	34
levocarnitine fumarate	118	little remedies gas relief	123	LUMIGAN.....	74
levocetirizine dihydrochloride	75	little remedies saline.....	149	LUPRON DEPOT (1-MONTH).....	66
levofloxacin.....	22, 73	little tummys gas relief.....	123	LUPRON DEPOT (3-MONTH).....	66
levofloxacin in d5w	22			LUPRON DEPOT (4-MONTH).....	66
levonest.....	64			LUPRON DEPOT (6-MONTH).....	66

INDEX

<i>lurasidone hcl</i>	39	<i>MAYZENT</i>	54, 55	<i>mercaptopurine</i>	31
<i>LYBALVI</i>	39	<i>MAYZENT STARTER PACK</i>	55	<i>meropenem</i>	22
<i>lyleq</i>	65	<i>m-dryl</i>	97	<i>mesalamine</i>	71
<i>lyllana</i>	64	<i>meclizine hcl</i>	28, 93	<i>mesalamine er</i>	71
<i>LYNPARZA</i>	34	<i>medicated anti-fungal</i>	111	<i>mesna</i>	36
<i>LYSIPLEX PLUS</i>	144	<i>medicated callus removers</i>	115	<i>metamucil</i>	127
<i>LYSODREN</i>	32	<i>medicated corn removers</i>	115	<i>metamucil multihealth fiber</i>	127
<i>LYTGOBI (12 MG DAILY DOSE)</i>	34	<i>medicated wart removers</i>	115	METAMUCIL MULTIHEALTH FIBER	
<i>LYTGOBI (16 MG DAILY DOSE)</i>	34	<i>medicine shoppe glucose</i>	91		127
<i>LYTGOBI (20 MG DAILY DOSE)</i>	34	<i>medi-first anti-fungal</i>	111	<i>metamucil smooth texture</i>	127
<i>LYUMJEV</i>	46	<i>medi-first aspirin</i>	88	<i>metformin hcl</i>	44
<i>LYUMJEV KWIKPEN</i>	46	<i>medi-first ibuprofen</i>	80	<i>metformin hcl er</i>	44
<i>lyza</i>	65	<i>medi-laxx</i>	131	<i>metformin hcl er (osm)</i>	44
<i>maalox advanced max st</i>	120	<i>medi-meclizine</i>	93	<i>methadone hcl</i>	18
<i>macitentan</i>	76	MEDI-PAK PERFORMANCE PLUS		<i>methenamine hippurate</i>	20
<i>macuvite/lutein</i>	144	<i>ABD</i>	118	<i>methimazole</i>	67
<i>mag-al plus xs</i>	120	<i>mediplast</i>	115	<i>methocarbamol</i>	78
<i>magdelay</i>	140	<i>mediproxen</i>	80	<i>methotrexate sodium</i>	69
<i>mag-g</i>	140	<i>medique aspirin</i>	88	<i>methotrexate sodium (pf)</i>	69
<i>magnesium</i>	140	<i>medpura hydrocortisone</i>	113	<i>methsuximide</i>	24
<i>magnesium 27</i>	140	<i>medpura zinc oxide</i>	116	<i>methyl dopa</i>	48
<i>magnesium chloride</i>	140	<i>medoxyprogesterone acetate</i>	65	<i>methylphenidate hcl</i>	53, 54
<i>magnesium citrate</i>	130	<i>mefloquine hcl</i>	37	<i>methylphenidate hcl er (osm)</i>	54
<i>magnesium gluconate</i>	140	<i>mega multiple/chelated mineral</i>	149	<i>methylprednisolone</i>	62
<i>magnesium lactate</i>	140	<i>mega multivitamin for men</i>	144	<i>metoclopramide hcl</i>	60
<i>magnesium oxide</i>	120, 140	<i>mega multivitamin for women</i>	144	<i>metolazone</i>	52
<i>magnesium oxide (antacid)</i>	121	<i>megavite fruits & veggies</i>	144	<i>metoprolol succinate er</i>	49
<i>magnesium oxide -mg supplement</i>	140	<i>megestrol acetate</i>	65, 66	<i>metoprolol tartrate</i>	49
<i>magnesium sulfate</i>	58	<i>meijer allergy relief</i>	100	<i>metronidazole</i>	20, 55
<i>magnesium-oxide</i>	140	<i>meijer allergy relief-d</i>	97	<i>metyrosine</i>	51
<i>mag-oxide</i>	140	<i>meijer allergy/congestion</i>	97	<i>mexiletine hcl</i>	49
<i>malathion</i>	57	<i>meijer antacid</i>	121	<i>mgo</i>	140
<i>mapap</i>	84	<i>meijer anti-diarrheal</i>	92	<i>mi-acid</i>	121
<i>mapap acetaminophen extra str</i>	84	<i>meijer c</i>	162	<i>mi-acid gas relief</i>	123
<i>mapap arthritis pain</i>	84	<i>meijer cough syrup dm</i>	103	<i>mi-acid maximum strength</i>	121
<i>mapap childrens</i>	84	<i>meijer glucose</i>	91	<i>micafungin sodium</i>	29
<i>mapap extra strength</i>	84	<i>meijer ibuprofen</i>	80	<i>miconazole 1</i>	159
<i>mapap pm</i>	95	<i>meijer loratadine</i>	100	<i>miconazole 3</i>	159
<i>mapo bath</i>	114	<i>meijer nasal decongestant</i>	151	<i>miconazole 3 applicator</i>	159
<i>maraviroc</i>	42	MEKINIST	34	<i>miconazole 3 combo pack</i>	159
<i>marlissa</i>	64	MEKTOVI	34	<i>miconazole 3 combo pack app</i>	159
MARPLAN	27	<i>meleya</i>	66	<i>miconazole 3 combo-supp</i>	159
<i>masophen</i>	84	<i>meloxicam</i>	18	<i>miconazole 7</i>	159
MATULANE	31	<i>memantine hcl</i>	26	<i>miconazole antifungal</i>	111
<i>matzim la</i>	50	<i>memantine hcl er</i>	26	<i>miconazole nitrate</i>	111, 159
MAVYRET	41	MENQUADFI	70	<i>miconazorb af</i>	111
<i>maxi pad ultra thin</i>	135	<i>mens multi vitamin & mineral</i>	144	<i>micro guard</i>	111
<i>maximum epa</i>	153	<i>menstrual complete</i>	84	<i>microgestin 1.5/30</i>	64
<i>maxx</i>	134	<i>menstrual relief max strength</i>	84	<i>microgestin 1/20</i>	64
<i>maxx plus</i>	134	MENVEO	70	<i>microgestin fe 1.5/30</i>	64

INDEX

microgestin fe 1/20	64	mucinex sinus-max clear & cool.....	151	multivitamin women	145
midodrine hcl	48	mucinex sinus-max full force	151	multivitamin women 50+	145
MIEBO.....	73	mucinex sinus-max sinus/allrgy	151	multi-vitamin/minerals	144
mifepristone.....	66	mucosa.....	105	multivitamin-minerals	145
miglustat.....	60	mucus d.....	105	multivitamins	148
migraine formula.....	80	mucus relief.....	105	multi-vitamins	148
migraine relief.....	80	mucus relief chest congestion	105	multi-vite.....	144
mili.....	64	mucus relief childrens	105	multivit-min gummies childrens.....	148
milk of magnesia	131	mucus relief cold/sinus max st	105	mupirocin	58
milltrium senior	144	mucus relief d.....	105	mupirocin calcium	58
milnacipran hcl	54	mucus relief dm.....	103	murine ear wax removal system	158
mimvey.....	64	mucus relief dm max	103	MURO 128.....	157
mineral oil	131	mucus relief er.....	105	muscle relief.....	116
mineral oil heavy	131	mucus relief max st	105	mycophenolate mofetil	69
mineral oil light	114, 131	mucus+chest congestion.....	106	mycophenolate sodium	69
mini multi vitamins/iron	141	mucus-dm	103	myferon 150.....	126
minocycline hcl.....	23	mucus-dm max.....	103	mylanta maximum strength.....	121
minoxidil	53	mucus-dm maximum strength	103	MYLANTA MAXIMUM STRENGTH.....	121
mintox.....	121	mucus-er	105	MYRBETRIQ.....	61
mintox maximum strength	121	MULTAQ	49	mytab gas	123
mintox regular strength.....	121	multi complete/iron	144	mytab gas maximum strength	123
mirtazapine.....	27	multi vitamin daily.....	148	my-vitalife.....	145
misoprostol.....	60	multi-day plus iron	141	na sulfate-k sulfate-mg sulf.....	60
mm cetirizine hcl.....	100	multi-delyn.....	148	nabumetone	18
M-M-R II	70	multiple vit/minerals/no iron.....	144	nadolol	49
modafinil.....	78	multiple vitamins.....	148	nafcillin sodium	22
MODEYSO.....	32	multiple vitamins/iron.....	141	naloxone hcl.....	19
moexipril hcl	48	multiple vitamins/womens	144	naltrexone hcl.....	19
moisturizing lubricant eye.....	155	multiple vitamins-iron	148	naproxen	18
molindone hcl	38	multiple vitamins-minerals.....	144	naproxen dr.....	18
mometasone furoate	57, 75	multi-purpose no-rub	156	naproxen sodium	18, 80
montelukast sodium	75	multi-purpose solution	156	naratriptan hcl	30
morphine sulfate.....	19	multivital	144	nasal allergy.....	150
morphine sulfate (concentrate).....	19	multivital performance	144	nasal allergy 24 hour.....	150
morphine sulfate er.....	18	multivital platinum.....	144	nasal decongestant.....	151
mosco corn remover max str.....	115	multivitamin	144, 148	nasal decongestant 12hr.....	151
motion sickness relief.....	93	multi-vitamin	148	nasal decongestant d.....	151
motion sickness relief ii	93	multivitamin & mineral	144	nasal decongestant d max str	151
motion-time.....	93	multivitamin adult	148	nasal decongestant max st	151
motrin ib.....	80	multivitamin adult (minerals)	145	nasal decongestant pe.....	151
MOUNJARO.....	44	multivitamin adults.....	145	nasal decongestant pe max st	151
MOVANTIK.....	59	multivitamin adults 50+.....	145	nasal decongestant spray	151
moxifloxacin hcl.....	23, 73	multivitamin childrens.....	148	nasal four	151
moxifloxacin hcl in nacl.....	23	multivitamin childrens (w/ fa)	148	nasal moisturizing spray	149
m-pap	84	multi-vitamin daily.....	148	nasal spray.....	151
MRESVIA	70	multivitamin gummies childrens	148	nasal spray 12 hour	151
ms quick dissolve glucose.....	91	multi-vitamin hp/minerals	149	nasal spray extra moisturizing	151
mucinex chest congestion child.....	105	multivitamin men	145	nasal spray moisturizing 12 hr	151
mucinex for kids	105	multivitamin men 50+	145	nasal spray no drip.....	151
MUCINEX FOR KIDS.....	105	multi-vitamin monocats	144	nasal spray sinus	151

INDEX

NATACYN	73	nicotine polacrilex mini	90	nortriptyline hcl	28
nateglinide	44	nicotine step 1	90	NOVOLIN 70/30	46
natural balance tears	155	nicotine step 2	90	NOVOLIN 70/30 FLEXPEN	46
natural c/rose hips	162	nicotine step 3	90	NOVOLIN N	46
natural fiber	127	NICOTROL NS	20	NOVOLIN N FLEXPEN	46
natural fiber laxative	127	nifedipine er	50	NOVOLIN R	46
natural fiber therapy	127	nifedipine er osmotic release	50	NOVOLIN R FLEXPEN	46
natural mixed tocopherols	164	night time pain medicine ex st	95	NOVOLOG	46
natural oatmeal bath treatment	114	night time sleep aid	95	NOVOLOG FLEXPEN	46
natural psyllium seed	127	nighttime sleep aid	95	NOVOLOG MIX 70/30	46
natural senna laxative	131	nilotinib hcl	34	NOVOLOG MIX 70/30 FLEXPEN	46
natural vitamin e	164	nilutamide	31	NOVOLOG PENFILL	46
natures tears	155	nimodipine	50	NUBEQA	31
NAYZILAM	24	NINLARO	35	NUCALA	78
nebivolol hcl	49	nintedanib esylate	77	NUPLAZID	39
necon 0.5/35 (28)	64	nitazoxanide	37	NURTEC	30
nefazodone hcl	27	nitisinone	60	NUTRILIPID	72
neomycin sulfate	20	nitro-bid	53	nu-way nasal decongestant	152
neomycin-bacitracin zn-polymyx	73	nitrofurantoin macrocrystal	20	nyamyc	29
neomycin-polymyxin-dexameth	73	nitrofurantoin monohyd macro	20	nylia 1/35	65
neomycin-polymyxin-gramicidin	73	nitroglycerin	53, 60	nylia 7/7/7	65
neomycin-polymyxin-hc	74	nizatidine	60	nystatin	29
NEO-SYNEPHRINE	151	no drip nasal spray	152	nystatin-triamcinolone	57
NEO-SYNEPHRINE COLD & SINUS	151	no iron mult vitamin-minerals	145	nystop	29
NERLYNX	34	noble formula hc	113	nyt-time sleep	95
NEULASTA	47	non-aspirin	84	oceanic selenium	140
NEUTRAPHOR	114	non-aspirin 8 hour	84	octreotide acetate	67
neutrogena rapid clear	115	non-aspirin childrens	84	ocutabs	145
nevirapine	41	non-aspirin extra strength	85	ocutabs-lutein	145
nevirapine er	41	non-aspirin infant	85	OCUVITE-LUTEIN	145
NEXLETOL	52	non-aspirin pain relief	85	ODEFSEY	42
NEXLIZET	52	non-aspirin pain relief child	85	ODOMZO	35
NEXPLANON	66	non-aspirin pain reliever	85	odor control foot & sneaker	111
niacin	160	non-aspirin pm	95	odorless coated fish oil	153
niacin er	160	non-aspirin pm extra strength	95	OFEV	77
niacin er (antihyperlipidemic)	52	non-pseudo sinus decongestant	152	ofloxacin	73, 74
niacinamide	161	nora-be	66	OGSIVEO	32
nicoderm cq	89	norelgestromin-eth estradiol	64	OJEMDA	32
NICODERM CQ	89	norethindrone	66	OJJAARA	35
nicorelief	90	norethindrone acetate	66	olanzapine	39
nicorette	90	norethindrone acet-ethinyl est	64	olmesartan medoxomil	48
NICORETTE	90	norethindrone-eth estradiol	64	olmesartan medoxomil-hctz	51
nicorette mini	90	norgestimate-eth estradiol	65	omega 3	153
NICORETTE MINI	90	norgestim-eth estrad triphasic	65	omega 3 500	153
nicorette starter kit	90	nortemp	85	omega iii epa+dha	154
NICORETTE STARTER KIT	90	nortemp infants	85	omega-3	154
nicotine	90	nortrel 0.5/35 (28)	65	omega-3 fish oil	154
nicotine mini	90	nortrel 1/35 (21)	65	omega-3-acid ethyl esters	52
nicotine polacrilex	90	nortrel 1/35 (28)	65	omeprazole	60
		nortrel 7/7/7	65	omeprazole magnesium	124

INDEX

omnicap.....	148	oralyte.....	139	pa fish oil.....	154
once daily.....	148	oralyte freezer pops.....	139	pa oyster shell calcium.....	138
once daily/iron.....	142	ORENCIA.....	67	pa vitamin d-3.....	163
ONCOVITE.....	145	ORENCIA CLICKJECT.....	67	pa vitamin e.....	164
ondansetron.....	29	ORENITRAM.....	76	pacerone.....	49
ondansetron hcl.....	29	ORENITRAM MONTH 1.....	77	pain & fever childrens.....	85
one daily.....	148	ORENITRAM MONTH 2.....	77	pain & fever extra strength.....	85
one daily calcium/iron.....	145	ORENITRAM MONTH 3.....	77	pain & fever infants.....	85
one daily for men 50+ advanced.....	145	organ-i nr.....	106	pain & fever junior.....	85
one daily for men/lycopene.....	145	ORGOVYX.....	67	pain relief.....	85
one daily for women.....	145	ORKAMBI.....	76	pain relief 8 hour.....	85
one daily for women 50+ adv.....	145	orphenadrine citrate er.....	78	pain relief childrens.....	85
one daily maximum.....	145	orquidea.....	66	pain relief extra strength.....	85
one daily mens.....	145	ORSERDU.....	31	pain relief pm extra strength.....	95
one daily mens health.....	145	os-cal calcium + d3.....	138	pain relief regular strength.....	85
one daily multivitamin adult.....	148	oseltamivir phosphate.....	42, 43	pain reliever.....	85
one daily multivitamin/iron.....	142	OSEVELT.....	72	pain reliever extra strength.....	80, 85
one daily multivit-min adult.....	145	OSPHENA.....	66	pain reliever plus.....	80
one daily plus iron.....	145	OSTEO-PORETICAL.....	138	pain reliever pm.....	95
one daily womens 50 plus.....	145	OTEZLA.....	57, 67	pain reliever pm ex st.....	95
one daily/minerals.....	145	OTEZLA XR.....	57	pain reliever/fever reducer.....	85
one step pregnancy.....	118	OTEZLA/OTEZLA XR INITIATION PK.....	68	pain-off.....	81
ONE-A-DAY ADULT		oxaprozin.....	18	paliperidone er.....	39
VITACRAVES+DHA.....	148	oxcarbazepine.....	25	pamprin max.....	81
ONE-A-DAY MAXIMUM FORMULA		OXIPOR VHC PSORIASIS.....	117	panoxyl creamy wash.....	107
.....	145	oxybutynin chloride.....	61	panoxyl foaming wash.....	107
ONE-A-DAY MENOPAUSE		oxybutynin chloride er.....	61	panoxyl wash.....	107
FORMULA.....	145	oxycodone hcl.....	19	PANRETIN.....	36
ONE-A-DAY MENS 50+ ADVANTAGE		oxycodone-acetaminophen.....	19	pantoprazole sodium.....	60
.....	145	oxymetazoline hcl.....	152	paricalcitol.....	72
one-a-day teen advantage/her.....	145	oysco 500.....	138	paroxetine hcl.....	27, 28
ONE-A-DAY TEEN ADVANTAGE/HIM		oysco 500+d.....	138	parvlex.....	145
.....	145	oyst-cal-d 500.....	138	PAXLOVID (150/100).....	43
one-daily multi vitamins.....	148	oyster calcium.....	138	PAXLOVID (300/100 & 150/100).....	43
one-daily multi-vitamin.....	148	oyster shell calcium.....	138	PAXLOVID (300/100).....	43
ONUREG.....	32	oyster shell calcium + d.....	138	pazopanib hcl.....	35
OPILL.....	96	oyster shell calcium + d3.....	138	ped electrolyte freeze pops.....	139
OPIPZA.....	39	oyster shell calcium 250+d.....	138	ped electrolyte freezer pops.....	139
OPTI-FREE DAILY CLEANER.....	156	oyster shell calcium 500 + d.....	138	pediacare children.....	85
OPTI-FREE EXPRESS.....	156	oyster shell calcium plus d.....	138	PEDIA-LAX.....	131, 133
OPTI-FREE EXPRESS REWETTING		oyster shell calcium w/d.....	138	PEDIARIX.....	70
.....	156	oyster shell calcium/d.....	138	pediatric electrolyte.....	139
OPTI-FREE REPLENISH.....	156	oyster shell calcium/d3.....	138	pediatric electrolyte-zinc.....	139
optimal d3.....	163	oyster shell calcium/vitamin d.....	138	PEDVAXHIB.....	70
OPTIONS CONCEPTROL.....	153	oystercal-d.....	138	peg 3350.....	131
OPTIONS GYNOL II		OZEMPIC.....	44	peg 3350-kcl-na bicarb-nacl.....	60
CONTRACEPTIVE.....	153	OZEMPIC (0.25 OR 0.5 MG/DOSE).....	44	peg-3350/electrolytes.....	60
OPVEE.....	19	OZEMPIC (1 MG/DOSE).....	44	PEGASYS.....	68, 69
oral analgesic max st.....	140	OZEMPIC (2 MG/DOSE).....	44	PEMAZYRE.....	35
oral electrolytes.....	139			PENBRAYA.....	70

INDEX

penicillamine.....	58	poly bacitracin	108	prevalite	52
penicillin g sodium	22	polyethylene glycol 3350.....	131, 158	PREVYMIS	40
penicillin v potassium	22	polyethylene glycol 3350-grx.....	131	PREZCOBIX	42
penmenvy.....	70	poly-iron 150	126	PREZISTA	42
PENTACEL	70	polymyxin b-trimethoprim	73	prilosec otc.....	124
pentamidine isethionate	37	polysaccharide iron complex.....	126	PRILOSEC OTC	124
pentoxifylline er	51	polysaccharide-iron complex.....	126	primaquine phosphate	37
peptic relief.....	92	polyvinyl alcohol.....	155	primidone	25
perampanel	24	poly-vita.....	148	PRIORIX	70
perindopril erbumine.....	48	polyvitamin	148	PRIVIGEN.....	67
periogard.....	55	polyvitamin/iron	148	PROAIR RESPICLICK.....	76
permethrin	57, 117	pomalidomide.....	31	probenecid	30
permethrin lice treatment.....	117	POMALYST.....	31	PRO-CAL	145
perphenazine.....	38	portia-28.....	65	prochlorperazine	28
petrolatum white	114	posaconazole	29	prochlorperazine maleate	28
petroleum jelly	114	potassium chloride	58	PROCRT.....	47
petroleum jelly lip treatment	114	potassium chloride crys er	58	procto-med hc.....	71
pharbedryl	97	potassium chloride er.....	58	progesterone.....	66
pharbetol	85	potassium citrate er.....	58	PROGRAF	69
pharbetol extra strength	85	povidone-iodine.....	94	PROLASTIN-C.....	60
phenelzine sulfate	27	povidone-iodine prep.....	94	promethazine hcl.....	28
phenobarbital.....	25	PR NATAL 440 EC.....	59	promethegan.....	28
phenytek.....	26	PRALUENT.....	52	propafenone hcl	49
phenytoin.....	26	pramipexole dihydrochloride	37	propafenone hcl er.....	49
phenytoin sodium extended	26	prasugrel hcl.....	48	propranolol hcl	49
PHILLIPS MILK OF MAGNESIA	131	pravastatin sodium.....	52	propranolol hcl er.....	49
phillips stool softener.....	133	praziquantel.....	36	propylthiouracil.....	67
PIFELTRO.....	41	prazosin hcl.....	48	PROQUAD.....	70
pilocarpine hcl	55, 74	prednisolone.....	62	PRORENAL + D.....	145
pimecrolimus	57	prednisolone acetate.....	74	PRORENAL + D W/ OMEGA-3.....	145
pimozide.....	38	prednisolone sodium phosphate	62	protriptyline hcl.....	28
pimtrea	65	prednisone	62	provil	81
pindolol.....	49	preferred plus glucose.....	91	pseudoephedrine hcl.....	152
pink bismuth	92	pregabalin	25	pseudoephedrine hcl er	152
pink bismuth maximum strength.....	92	PREMARIN	65	pseudoephedrine-guaifenesin er....	106
pioglitazone hcl.....	44	premium condoms lubricated	134	psoriasis.....	115
pioglitazone hcl-metformin hcl.....	44	PREMPHASE.....	65	PULMOZYME	76
piperacillin sod-tazobactam so	22	PREMPRO.....	65	pure & gentle lubricant.....	155
PIQRAY (200 MG DAILY DOSE)	35	prenatal	149	PURE & GENTLE LUBRICANT.....	155
PIQRAY (250 MG DAILY DOSE)	35	prenatal (w/iron & fa).....	149	pureway-c	162
PIQRAY (300 MG DAILY DOSE)	35	prenatal low iron.....	149	px acid reducer	124
pirfenidone.....	77	prenatal vitamin and mineral	149	px acid reducer max st.....	124
piroxicam.....	18	prenatal vitamins.....	149	px all day relief.....	81
pitavastatin calcium	52	prenatal/iron	149	px allergy relief.....	100
plain niacin	161	preparation h	113	px allergy relief cetirizine.....	100
plantar wart remover	115	PREPARATION H.....	89	px allergy relief d.....	98
plenamine.....	58	PREPARATION H SOOTHING		px allergy relief d (loratid).....	98
pnv prenatal plus multivitamin	149	RELIEF.....	89	px allergy relief loratadine	100
podactin.....	111	PRESERVISION/LUTEIN	145	px antacid extra strength.....	121
podofilox.....	57	pretomanid	30	px antacid maximum strength	121

INDEX

px antacid regular strength	121	qc acid controller	124	qc nasal decongestant pe	152
px arthritis pain relief	85	qc acid controller max st	124	qc natural vegetable	127
px artificial tears	155	qc all day allergy	100	qc natural vegetable laxative	131
px aspirin	88	qc allergy relief	100	qc natura-lax	131
px athletic foot	111	qc allergy relief childrens	100	qc nicotine transdermal system	90
px calcium antacid	121	qc antacid	121	qc non-aspirin 8 hour	85
px childrens allergy	100	qc antacid extra strength	121	qc non-aspirin childrens	85
px childrens pain relief	85	qc antacid ultra strength	121	qc non-aspirin extra strength	85
px childrens profen ib	81	qc antacid/anti-gas	121	qc non-aspirin jr strength	85
px complete senior multivits	145	qc anti-diarrheal	92	qc non-aspirin pm	95
px dairy digestive	123	qc anti-gas	123	qc omeprazole magnesium	124
px dibromm dm cold/cough child	103	qc arthritis pain relief	85	qc pain relief	85
px docusate sodium	133	qc artificial tears	155	qc pain relief childrens	85
px fiber	127	qc aspirin	88	qc pain relief extra strength	85
px gas relief infants	123	qc aspirin low dose	88	qc pain relief infants	85
px gas relief ultra strength	123	qc athletes foot	111	qc pain reliever pm ex st	95
px glucose	91	qc bacitracin	108	qc povidone iodine	94
px hemorrhoidal	89	qc calamine	114, 116	qc prenatal	149
px hydrocream	113	qc calcium 600 +d3	138	qc psyllium fiber	127
px hydrogen peroxide	94	qc childrens allergy	100	qc stool softener	133
px ibuprofen	81	qc childrens ibuprofen	81	qc stool softener pls laxative	131
px ibuprofen junior strength	81	qc chlor-pheniramine	98	qc suphedrine	152
px infants profen ib	81	qc complete allergy medicine	98	qc suphedrine maximum strength	152
px laxative	131	qc daily multivit/multimineral	145	qc suphedrine pe	152
px miconazole 3-day combo	159	qc diarrhea relief	93	qc tolinaftate	111
px migraine relief	81	qc enema	131	qc triple antibiotic max st	108
px milk of magnesia	131	qc enteric aspirin	88	qc tussin dm cough/congestion	103
px nasal decongestant	152	qc esomeprazole magnesium	124	qc tussin mucus/congestion	106
px nasal decongestant pe	152	qc fiber laxative	127	QINLOCK	35
px nasal four	152	qc gas relief extra strength	123	qlearquil	152
px nasal spray moisturizing	152	qc gentle laxative	131	qlearquil 24 hour relief	101
px no drip nasal spray	152	qc headache relief	81	q-pap	85
px original nasal spray	152	qc hydrocortisone max st	113	q-pap childrens	85
px pain relief extra strength	85	qc hydrogen peroxide	94	q-pap extra strength	85
px pain relief pm ex st	95	qc ibuprofen	81	q-pap infants	85
px saline nasal spray	149	qc ibuprofen ib	81	q-tussin	106
px stomach relief	92	qc ibuprofen infants	81	q-tussin dm	103
px stomach relief max st	92	qc isopropyl rubbing alcohol	94	QUADRACEL	70
px stop smoking aid	90	qc laxative	131	quetiapine fumarate	39
px triple	108	qc loratadine allergy relief	101	quetiapine fumarate er	39
px tussin	106	qc loratadine-d	98	quick action dairy relief	123
px tussin dm	103	qc magnesium citrate	131	quin b strong	145
pyrazinamide	30	qc medifin 400	106	quinapril hcl	48
pyridostigmine bromide	30	qc mens daily multivitamin	145	quinapril-hydrochlorothiazide	51
pyridoxine hcl	161	qc miconazole 7	159	quinidine sulfate	49
pyrimethamine	37	qc milk of magnesia	131	quinine sulfate	37
PYRUKYND	61	qc mineral oil heavy	131	quintabs	148
PYRUKYND TAPER PACK	61	qc mucus relief	106	quintabs-m	145
qc 3 day	159	qc muscle rub	114	QVAR REDIHALER	75
qc acetaminophen 8 hours	85	qc naproxen sodium	81	ra 12 hour nasal spray	152

INDEX

<i>ra</i> 8 hour pain relief	85	<i>ra</i> central-vite senior.....	145	<i>ra</i> iron.....	126
<i>ra</i> acetaminophen.....	85	<i>ra</i> central-vite under 50 mens	145	<i>ra</i> isopropyl rubbing alcohol.....	94
<i>ra</i> acetaminophen childrens	86	<i>ra</i> central-vite under 50 women.....	145	<i>ra</i> jock itch.....	111
<i>ra</i> acetaminophen ex st.....	86	<i>ra</i> central-vite womens mature.....	145	<i>ra</i> jock itch max st	111
<i>ra</i> acetaminophen pm ex st.....	95	<i>ra</i> cetiri-d	98	<i>ra</i> laxative.....	131
<i>ra</i> acetaminophen rapid melts	86	<i>ra</i> cetirizine.....	101	<i>ra</i> laxative & stool softener.....	131
<i>ra</i> acid reducer	124	<i>ra</i> cetirizine childrens	101	<i>ra</i> laxative extra strength.....	131
<i>ra</i> acid reducer max st.....	124	<i>ra</i> cetirizine hcl child allrgy	101	<i>ra</i> laxative maximum strength.....	131
<i>ra</i> acne cleanser oil-free.....	107	<i>ra</i> childrens fever/pain.....	86	<i>ra</i> lice maximum strength.....	117
<i>ra</i> acne maximum.....	107	<i>ra</i> cleaning/disinfecting lens	156	<i>ra</i> lice solution	117
<i>ra</i> acne treatment	107	<i>ra</i> clotrimazole.....	111	<i>ra</i> lorata-d.....	98
<i>ra</i> allergy relief (cetirizine)	101	<i>ra</i> clotrimazole 7.....	159	<i>ra</i> loratadine.....	101
<i>ra</i> allergy relief (loratadine).....	101	<i>ra</i> cold & cough childrens	103	<i>ra</i> loratadine childrens.....	101
<i>ra</i> allergy relief childrens	101	<i>ra</i> col-rite	134	<i>ra</i> lubricant eye	155
<i>ra</i> allergy/congestion relief	98	<i>ra</i> corn removers ultra thin	115	<i>ra</i> lubricant eye drops	155
<i>ra</i> anesthetic oral.....	140	<i>ra</i> cough dm	103	<i>ra</i> magnesium	140
<i>ra</i> antacid.....	121	<i>ra</i> dairy aid	123	<i>ra</i> magnesium citrate	131
<i>ra</i> antacid extra strength.....	121	<i>ra</i> dairy relief fast acting	124	<i>ra</i> menstrual complete	86
<i>ra</i> antacid ultra strength.....	121	<i>ra</i> daylogic acne foaming wash.....	107	<i>ra</i> menstrual relief	86
<i>ra</i> antacid/anti-gas.....	121	<i>ra</i> double antibiotic	108	<i>ra</i> miconazole 3 combo pack	159
<i>ra</i> antacid/anti-gas max st	121	<i>ra</i> ear drops.....	158	<i>ra</i> miconazole 3 combo pack app ..	159
<i>ra</i> antacid/gas relief max st	121	<i>ra</i> enema.....	131	<i>ra</i> miconazole 7.....	159
<i>ra</i> antibiotic/pain relief	108	<i>ra</i> eye itch relief.....	157	<i>ra</i> migraine relief	81
<i>ra</i> anti-diarrheal	93	<i>ra</i> fast relief laxative	131	<i>ra</i> milk of magnesia.....	131
<i>ra</i> antifungal.....	111	<i>ra</i> fever reducer/pain reliever	86	<i>ra</i> mineral oil	131
<i>ra</i> antifungal foot care.....	111	<i>ra</i> fiber.....	127	<i>ra</i> mini nicotine.....	90
<i>ra</i> anti-itch maximum strength.....	113	<i>ra</i> fiber laxative.....	127	<i>ra</i> motion sickness relief	93
<i>ra</i> antiseptic.....	94	<i>ra</i> fiber supplement	127	<i>ra</i> mucus relief	106
<i>ra</i> arthritis pain relief.....	86	<i>ra</i> fiber therapy.....	127	<i>ra</i> mucus relief d	106
<i>ra</i> aspirin.....	88	<i>ra</i> fish oil.....	154	<i>ra</i> mucus relief d max strength.....	106
<i>ra</i> aspirin adult low dose.....	88	<i>ra</i> folic acid.....	125	<i>ra</i> multihealth fiber	127
<i>ra</i> aspirin adult low strength	88	<i>ra</i> foot care (terbinafine).....	111	<i>ra</i> multi-purpose no rub.....	156
<i>ra</i> aspirin childrens	88	<i>ra</i> foot care (tolnaftate).....	111	<i>ra</i> multi-purpose solution.....	156
<i>ra</i> aspirin ec.....	88	<i>ra</i> gas relief	123	<i>ra</i> naproxen sodium	81
<i>ra</i> aspirin ec adult low st.....	88	<i>ra</i> gas relief extra strength	123	<i>ra</i> nasal allergy.....	150
<i>ra</i> atheletes foot.....	111	<i>ra</i> glucosamine sulfate	79	<i>ra</i> nasal decongestant pe.....	152
<i>ra</i> athletes foot.....	111	<i>ra</i> glucose.....	91	<i>ra</i> natural magnesium	140
<i>ra</i> bacitracin.....	108	<i>ra</i> glycerin adult.....	131	<i>ra</i> niacin	161
<i>ra</i> bacitracin zinc first aid.....	108	<i>ra</i> glycerin child	131	<i>ra</i> nicotine	90
<i>ra</i> beta carotene	160	<i>ra</i> hemorrhoidal.....	89	<i>ra</i> nicotine gum	90
<i>ra</i> calamine.....	114	<i>ra</i> hemorrhoidal cooling.....	89	<i>ra</i> nicotine polacrilex	90
<i>ra</i> calcium 600.....	138	<i>ra</i> hi cal.....	138	<i>ra</i> nighttime sleep aid.....	95
<i>ra</i> calcium 600/vitamin d-3	138	<i>ra</i> hi-cal plus vitamin d	138	<i>ra</i> no flush niacin.....	161
<i>ra</i> calcium cit plus vit d-3.....	138	<i>ra</i> hydrocortisone plus	113	<i>ra</i> nose drops extra strength	152
<i>ra</i> calcium cit-vit d-3 petites.....	138	<i>ra</i> hydrocortisone plus 12.....	113	<i>ra</i> one daily energy formula	145
<i>ra</i> calcium plus vitamin d.....	138	<i>ra</i> hydrogen peroxide	94	<i>ra</i> one daily essential	148
<i>ra</i> central-vite.....	145	<i>ra</i> ibuprofen.....	81	<i>ra</i> one daily maximum.....	145
RA CENTRAL-VITE	145	<i>ra</i> ibuprofen childrens.....	81	<i>ra</i> one daily mens/vit d-3.....	146
<i>ra</i> central-vite energy.....	145	<i>ra</i> ibuprofen infants	81	<i>ra</i> one daily multi-vit plus fe	142
<i>ra</i> central-vite performance	148	<i>ra</i> ibuprofen junior strength	81	<i>ra</i> one daily multi-vitamin	148

INDEX

ra one daily womens	146	ra wart remover	115	RETACRIT	47
ra ophthalmic	157	ra wart remover max strength	115	retaine cmc	155
ra oyster shell calcium/d	138	ra whole source dietary	146	retaine pm	155
ra oyster shell calcium/d2	138	ra whole source dietary mature	146	RETEVMO	35
ra p col-rite	131	ra whole source for men	146	REVCovi	61
ra pain relief acetaminophen	86	ra womens laxative	131	REVUFORJ	32
ra pain relief ibuprofen	81	ra zinc	140	rewetting drops	156
ra pain reliever ex st	81	ra zinc oxide	116	REXULTI	39
ra ped electrolyte freezer pop	139	RABAVERT	70	REYATAZ	42
ra pediatric electrolyte	139	rabeprazole sodium	60	REZDIFFRA	66
ra petroleum jelly	114	RALDESY	28	REZLIDHIA	35
ra prenatal	149	raloxifene hcl	66	REZUROCK	70
ra renewal soothing bath	114	ramelteon	78	RHOPRESSA	74
ra saline nasal spray	150	ramipril	48	ribavirin	41
ra saline solution	156	ranolazine er	51	RID ESSENTIAL LICE ELIMINATION	117
ra scalp itch/dandruff relief	115	rapid burst adult	86	rid lice killing shampoo	117
ra senna	131	rasagiline mesylate	37	rifabutin	30
ra senna plus	131	RAYALDEE	72	rifampin	30, 31
ra sinus/congestion relief pe	152	REALITY LATEX CONDOMS	134	rifapentine	31
ra sleep aid (diphenhydramine)	95	REALITY LATEX/ULTRA TEXTURED	134	ri-gel	121
ra slow release iron	126	REALITY LATEX/ULTRA THIN	135	ri-gel ii	121
ra smooth antacid ex st	121	RECOMBIVAX HB	71	RIGHT STEP PRENATAL	149
ra soluble fiber	127	refenesen	106	rilpivirine hcl	41
ra stomach relief	93	refenesen 400	106	riluzole	54
ra stomach relief max st	93	REFRESH	155	ri-mox	121
ra stool softener	134	refresh lacri-lube	155	RINVOQ	68
ra suphedrine	152	reguloid	127	RINVOQ LQ	68
ra therapeutic	117	relion glucose	91	risedronate sodium	72
ra therapeutic m plus beta car	146	RELION GLUCOSE	91	risperidone	39
ra tri-buffered aspirin	88	remedy antifungal	111	risperidone microspheres er	39, 40
ra triple antibiotic	108	REMEDY NUTRASHIELD	114	ritonavir	42
ra triple antibiotic plus	108	remedy phytoPLEX antifungal	111	ri-tussin	106
ra tugaboos petroleum jelly	114	renal vitamin	141	ri-tussin dm	103
ra tussin	106	renal-vite	141	rivaroxaban	47
ra tussin cgh/chest congest dm	103	rena-vite	141	rivastigmine	26
ra tussin chest congestion	106	rena-vite rx	141	rivastigmine tartrate	26
ra tussin cough	103	reno caps	141	RIVFLOZA	72
ra tussin dm	103	RENU DISINFECTING	156	rizatriptan benzoate	30
ra vitamin a	160	RENU MULTIPLUS	156	robafen	106
ra vitamin b-1	161	RENU MULTIPLUS LUB/REWETTING	156	robafen ac	103
ra vitamin b-12	161	RENU REWETTING DROPS	156	robafen dm	103
ra vitamin b-12 tr	161	repaglinide	44	robafen dm cgh/chest congest	103
ra vitamin b-6	161	REPATHA	52	robafen dm cough	104
ra vitamin c	162	REPATHA SURECLICK	52	robafen dm cough clear	104
ra vitamin c cr	141	RESOURCE THICKENUP CLEAR	158	robafen dm peak cold cgh/cong	104
ra vitamin c/acerola	162	rest simply	95	robafen dmucus/chest congestion ...	106
ra vitamin c/rose hips	162	RESTASIS	73	ROBITUSSIN CHILDRENS COUGH	
ra vitamin c/rose hips cr	162	RESTASIS MULTIDOSE	73	LA	104
ra vitamin d-3	163			robitussin cold cough+ chest	104
ra vitamin e	164				

INDEX

ROCKLATAN	73	sb dairy relief.....	124	senna-grx.....	132
roflumilast.....	76	sb docusate sodium.....	134	senna-lax.....	132
ROMVIMZA.....	35	sb ear wax remover.....	158	sennalax-s.....	132
ropinirole hcl.....	37	sb gentle laxative womens.....	131	senna-plus.....	132
ropinirole hcl er.....	37	sb hydrocortisone.....	113	senna-s.....	132
rosuvastatin calcium.....	52	sb hydrocortisone max st.....	113	senna-tabs.....	132
ROTARIX.....	71	sb hydrocortisone plus.....	113	senna-time.....	132
ROTATEQ.....	71	sb ibuprofen.....	81	senna-time s.....	132
roweepra.....	24	sb infants ibuprofen.....	81	senno.....	132
ROZLYTREK.....	35	sb lice killing max st.....	117	sennosides.....	132
RUBRACA.....	35	sb loratadine.....	101	sennosides-docusate sodium.....	132
rufinamide.....	26	sb low dose asa ec.....	88	sen-o-tabs.....	131
RUKOBIA.....	42	sb milk of magnesia.....	131	SENSITIVE EYES PLUS SALINE..	156
RYDAPT.....	35	sb multi-purpose.....	156	sentry.....	146
rynex dm.....	104	sb naproxen sodium.....	81	sentry adult.....	146
rynex pe.....	104	sb non-aspirin.....	86	sentry senior.....	146
rynex pse.....	104	sb non-aspirin extra strength.....	86	SEREVENT DISKUS.....	76
sacubitril-valsartan.....	51	sb non-aspirin nighttime.....	95	sertraline hcl.....	28
safe tussin 30.....	104	sb omega-3 fish oil.....	154	setlakin.....	65
safe tussin dm.....	104	sb pain relief x-str.....	81	sevelamer hcl.....	59
salactic film.....	115	sb pain reliever childrens.....	86	severe congestion.....	152
saline.....	156	sb pain reliever ex st.....	86	sharobel.....	66
saline mist spray.....	150	sb pain reliever pm.....	95	SHINGRIX.....	71
saline nasal spray.....	150	sb peptic relief.....	93	SHUR-SEAL CONTRACEPTIVE...	153
saline sensitive eyes.....	156	sb povidone-iodine.....	94	SIGNIFOR.....	67
sal-plant.....	115	sb saline nose.....	150	siladryl allergy.....	98
SANTYL.....	57	sb senna-lax.....	131	sildenafil citrate.....	77
sapropterin dihydrochloride.....	61	sb sleep.....	95	silodosin.....	61
SAVELLA.....	54	sb triple antibiotic.....	109	siltussin dm das.....	104
sb 12hr nasal spray.....	152	sb vitamin c.....	162	siltussin sa.....	106
sb allergy.....	98, 101	scalp relief.....	115	siltussin-dm alcohol free.....	104
sb allergy medicine.....	98	SCEMBLIX.....	35	silver sulfadiazine.....	57
sb antacid.....	121	SCOOBY-DOO ONE A DAY.....	148	SIMBRINZA.....	73
sb antacid anti-gas.....	121	scopolamine.....	28	simethicone.....	123
sb antacid anti-gas double st.....	121	sea soft nasal mist.....	150	simply sleep.....	96
sb antacid extra strength.....	121	SECUADO.....	40	simvastatin.....	52
sb antacid/antigas.....	121	secura antifungal.....	111	sinus & allergy 12 hour.....	152
sb anti-diarrhea.....	93	secura antifungal extra thick.....	111	sinus 12 hour.....	152
sb aspirin.....	88	selegiline hcl.....	37	sinus nasal spray.....	152
sb aspirin adult low strength.....	88	selenium.....	140	sinus relief.....	152
sb aspirin ec.....	88	selenium sulfide.....	57	sinus relief extra strength.....	152
sb bisacodyl laxative ec.....	131	senexon.....	132	sinus relief nasal spray.....	152
sb bismuth.....	93	senexon-s.....	132	sirolimus.....	70
sb bismuth maximum strength.....	93	senior tabs.....	146	SIRTURO.....	31
sb childrens aspirin.....	88	senna.....	132	SIVEXTRO.....	20
sb childrens ibuprofen.....	81	senna lax.....	132	SKYCLARYS.....	72
sb chlorpheniramine.....	98	senna laxative.....	132	SKYRIZI.....	68
sb cough control.....	106	senna plus.....	132	SKYRIZI PEN.....	68
sb cough control dm.....	104	senna s.....	132	sleep aid (diphenhydramine).....	96
sb coughtab.....	106	senna-docusate sodium.....	132	sleep ii.....	96

INDEX

sleep-tabs.....	96	sm calcium 600/vitamin d.....	139	sm hydrocortisone max st.....	113
slow iron.....	126	sm calcium antacid.....	122	sm hydrocortisone plus.....	113
slow release iron.....	126	sm calcium antacid ex st.....	122	sm hydrocortisone-aloe max st.....	113
sm 12 hour sinus decongestant.....	152	sm calcium antacid ultra st.....	122	sm hydrogen peroxide.....	94
sm 12-hour no drip.....	152	sm calcium citrate w/vit d3.....	139	sm ibuprofen.....	81
sm 8 hour pain relief.....	86	sm calcium citrate+/vit d3.....	139	sm ibuprofen ib.....	81
sm acid reducer.....	124	sm calcium citrate+d3 petite.....	139	sm infants ibuprofen.....	81
sm acid reducer max st.....	124	sm calcium citrate-vit d.....	139	sm ipecac syrup.....	93
sm adult nasal decongestant.....	152	sm calcium/vitamin d.....	139	sm iron.....	126
sm alcohol.....	94	sm calcium-vitamin d.....	139	sm iron slow release.....	126
sm all day allergy.....	101	sm chest congestion relief.....	106	sm isopropyl alcohol.....	94
sm all day allergy childrens.....	101	sm chewable c.....	162	sm laxative.....	132
sm all day allergy-d.....	98	sm chewable vitamin c.....	162	sm laxative maximum strength.....	132
sm all day pain relief.....	81	sm childrens aspirin.....	88	sm lice killing.....	117
sm allergy 4 hour.....	98	sm childrens ibuprofen.....	81	sm lice killing max strength.....	117
sm allergy childrens.....	101	sm childrens loratadine.....	101	sm lice solution.....	117
sm allergy relief.....	98, 101	sm clearlax.....	132	sm lice solution kit.....	117
sm allergy relief childrens.....	98	sm clotrimazole vaginal.....	159	sm lice treatment.....	117
sm animal shapes complete.....	148	sm cold & allergy childrens.....	104	sm loratadine.....	101
sm animal shapes kids first.....	148	sm cold & cough dm childrens.....	104	sm loratadine allergy relief.....	101
sm animal shapes/iron.....	148	sm complete.....	146	sm loratadine d.....	98
sm antacid advanced.....	121	sm complete 50+.....	146	sm lorata-dine d.....	98
sm antacid advanced max st.....	121	sm complete 50+ ultimate mens.....	146	sm loratadine d 12hr.....	98
sm antacid anti-gas.....	121	sm complete 50+ ultimate women.....	146	sm lubricant eye drops.....	155
sm antacid anti-gas ex st.....	121	sm complete advanced formula.....	146	sm lubricating plus.....	155
sm antacid maximum strength.....	122	sm complete senior formula.....	146	sm lubricating tears.....	155
sm antacid/antigas.....	122	sm double antibiotic.....	109	sm magnesium.....	140
sm antibiotic.....	109	sm ear drops.....	158	sm magnesium citrate.....	132
sm anti-dandruff coal tar.....	117	sm enema.....	132	sm magnesium oxide.....	140
sm anti-diarrheal.....	93	sm esomeprazole magnesium.....	125	sm medicated corn removers.....	115
sm antifungal clotrimazole.....	111	sm eye itch relief.....	157	sm miconazole 3.....	159
sm antifungal miconazole.....	111	sm fiber.....	127	sm miconazole 7.....	159
sm antifungal tolinaftate.....	111	sm fiber laxative.....	127	sm migraine relief.....	81
sm antioxidant vitamins.....	146	sm fiber powder.....	127	sm milk of magnesia.....	132
sm arthritis pain relief.....	86	sm fish oil.....	154	sm mineral oil.....	132
sm arthritis pain reliever.....	86	sm foaming antacid.....	122	sm motion sickness.....	93
sm artificial tears.....	155	sm folic acid.....	125	sm mucus er.....	106
sm aspirin.....	88	sm gas relief.....	123	sm mucus relief.....	106
sm aspirin adult low strength.....	88	sm gas relief antifatulent.....	123	sm mucus relief d.....	106
sm aspirin ec.....	88	sm gas relief infants.....	123	sm mucus relief max strength.....	106
sm aspirin ec low strength.....	88	sm gas relief infants drops.....	123	sm multiple vitamins essential.....	148
sm aspirin low dose.....	88	sm gentle laxative.....	132	sm multiple vitamins womens.....	146
sm aspirin tri-buffered.....	88	sm glucose.....	91	sm multiple vitamins/iron.....	142
sm athletes foot.....	111	sm glycerin (adult).....	132	sm multi-purpose.....	156
sm b super vitamin complex.....	141	sm glycerin pediatric.....	132	sm naproxen sodium.....	81
sm b-complex/vitamin c.....	141	sm hair/skin/nails.....	146	sm nasal decongestant.....	152
sm calamine.....	114	sm headache added strength.....	81	sm nasal decongestant max st.....	152
sm calcium.....	138	sm hemorrhoidal.....	89	sm nasal decongestant pe.....	152
sm calcium 500/vitamin d3.....	138	sm hemorrhoidal cooling.....	89	sm nasal pump spray mist.....	152
sm calcium 600.....	138	sm hydrocortisone.....	113	sm nasal spray.....	152

INDEX

sm nasal spray 12 hour	152	sm tussin mucus+chest congest	106	sprintec 28	65
sm nasal spray moisturizing	152	sm ultra dairy digestive	124	SPRITAM	24
sm nasal spray saline	150	sm vit c/rose hips	162	sps (sodium polystyrene sulf)	59
sm nasal spray sinus	152	sm vitamin b1	161	ssd	57
sm natural laxative/stool soft	132	sm vitamin b-1	161	st joseph low dose	88
sm niacin cr	161	sm vitamin b-12	161	STARJEMZA	68
sm nicotine	90	sm vitamin b12 tr	161	STEQEYMA	68
sm nicotine polacrilex	90	sm vitamin b-12 tr	161	stimulant laxative	132
sm nighttime sleep aid	96	sm vitamin b6	161	STIOLTO RESPIMAT	78
sm nose drops nasal decongest	152	sm vitamin b-6	161	STIVARGA	35
sm oatmeal bath	114	sm vitamin c	162	STOBOCLO	72
sm one daily essential	148	sm vitamin c/rose hips	162	stomach relief	93
sm one daily mens	146	sm vitamin d	163	stomach relief max st	93
sm one daily womens	146	sm vitamin d3	163	stool softener	134
sm opti-vitamins	146	sm vitamin e	165	stool softener laxative	134
sm oyster shell calcium/vit d	139	sm wart remover max st	115	stool softener plus laxative	133
sm oyster shell calcium/vit d3	139	sm womans laxative	132	stool softener/laxative	133
sm pain & fever childrens	86	sm zinc	140	stop lice complete treatment	117
sm pain & fever infants	86	sm zinc gluconate	140	stop lice maximum strength	117
sm pain relief	86	SMART SENSE GLUCOSE	91	streptomycin sulfate	20
sm pain relief extra strength	86	smooth antacid extra strength	122	stress 500 b-complex	141
sm pain reliever	86	smooth lax	132	stress 500 b-complex/zinc	146
sm pain reliever childrens	86	sochlor	157	stress b complex/antioxid/zinc	146
sm pain reliever ex st	86	sod phos mono-sod phos dibasic	132	stress b/zinc	141
sm pain reliever jr st	86	sodium bicarbonate	122	stress formula	148
sm pain reliever pm ex st	96	sodium chloride	58, 72, 106, 140	stress formula (folic acid)	141
sm pediatric electrolyte	139	sodium chloride (hypertonic)	157	stress formula (w/ minerals)	146
sm petroleum jelly	114	sodium oxybate	78	stress formula/iron	142, 146
sm povidone-iodine	94	sodium phenylbutyrate	61	stress formula/iron (mvi)	146
sm prenatal vitamins	149	sodium polystyrene sulfonate	59	STRIBILD	41
sm saline solution	156	sof-lax	134	subvenite	24
sm senna laxative	132	sofosbuvir-velpatasvir	41	SUBVENITE	24
sm senna laxative max st	132	solifenacin succinate	61	subvenite starter kit-blue	24
sm senna-s	132	SOLQUA	44	subvenite starter kit-green	24
sm sleep aid night time	96	SOLTAMOX	31	subvenite starter kit-orange	24
sm slow release iron	126	soluble fiber therapy	127	SUCRAID	61
sm smooth antacid ex st	122	SOMAVERT	67	sucralfate	60
sm stomach relief	93	soothe	93	sudogest	152
sm stomach relief max st	93	soothe & cool inzo antifungal	111	sudogest 12 hour	152
sm stool softener	132, 134	soothe hydration	155	sudogest maximum strength	152
sm stool softener/laxative	132	soothe xp xtra protection	155	sudogest pe	152
sm stress formula b-complex/zn	146	sorafenib tosylate	35	sudogest sinus/allergy	98
sm super b complex/c	141	sorbitol	132, 158	sulfacetamide sodium	73
sm therapeutic-m	146	sorbugen nr	104	sulfacetamide-prednisolone	73
sm triple antibiotic	109	sotalol hcl	49	sulfadiazine	23
sm triple antibiotic max st	109	sotalol hcl (af)	49	sulfamethoxazole-trimethoprim	23
sm triple antibiotic original	109	SPEVIGO	57	sulfasalazine	71
sm tussin	106	SPIRIVA RESPIMAT	75	sulindac	18
sm tussin cough/chest congest	104	spironolactone	53	sumatriptan	30
sm tussin dm	104	spironolactone-hctz	51	sumatriptan succinate	30

INDEX

<i>sunitinib malate</i>	35	<i>tamsulosin hcl</i>	61	<i>tgt arthritis pain relief</i>	86
<i>SUNLENCA</i>	42	<i>tarina fe 1/20 eq</i>	65	<i>tgt aspirin</i>	88
<i>super antioxidant</i>	146	<i>TARPEYO</i>	71	<i>tgt aspirin ec</i>	88
<i>super b complex/fa/vit c</i>	141	<i>TARSUM RELIEF</i>	117	<i>tgt aspirin low dose</i>	88
<i>super b-complex/vit c/fa</i>	141	<i>TAVNEOS</i>	68	<i>tgt bacitracin</i>	109
<i>super calcium</i>	139	<i>tazarotene</i>	55	<i>tgt childrens acetaminophen</i>	86
<i>super calcium 600 + d 400</i>	139	<i>tazicef</i>	21	<i>tgt childrens aspirin</i>	88
<i>super calcium 600 + d3</i>	139	<i>TAZICEF</i>	21	<i>tgt childrens ibuprofen</i>	81
<i>super multiple</i>	146	<i>tears again</i>	155	<i>tgt clotrimazole</i>	112
<i>super omega-3</i>	154	<i>tears naturale free</i>	155	<i>tgt cold/cough childrens</i>	104
<i>super thera vite m</i>	146	<i>tears naturale ii</i>	155	<i>tgt dairy digestive aid</i>	124
<i>superplex-t</i>	141	<i>tears pure</i>	155	<i>tgt eye itch relief</i>	157
<i>suphedrine 12hour</i>	152	<i>telmisartan</i>	48	<i>tgt fiber therapy</i>	127
<i>support</i>	146	<i>telmisartan-hctz</i>	51	<i>tgt gas relief extra strength</i>	123
<i>SUTAB</i>	60	<i>temazepam</i>	78	<i>tgt gas relief infants</i>	123
<i>sv vitamin b-12 er</i>	161	<i>TENIVAC</i>	71	<i>tgt gentle laxative</i>	133
<i>sw allergy relief</i>	101	<i>tenofovir disoproxil fumarate</i>	42	<i>tgt glucose</i>	91
<i>sw allergy relief-d</i>	98	<i>TEPMETKO</i>	35	<i>tgt ibuprofen</i>	81
<i>sw clearlax</i>	133	<i>tera-gel tar</i>	118	<i>tgt ibuprofen childrens</i>	81
<i>sw nasal decongestant max st</i>	153	<i>terazosin hcl</i>	61	<i>tgt ibuprofen junior strength</i>	81
<i>sw nicotine polacrilex</i>	90	<i>terbinafine hcl</i>	29, 111	<i>tgt laxative pills max st</i>	133
<i>sw suphedrine 12 hr decongest</i>	153	<i>terconazole</i>	29	<i>tgt lice complete 1-2-3</i>	117
<i>SYMPAZAN</i>	25	<i>teriparatide</i>	72	<i>tgt lice killing max st</i>	117
<i>SYMTUZA</i>	42	<i>testosterone</i>	62, 63	<i>tgt loratadine childrens</i>	101
<i>SYNJARDY</i>	45	<i>testosterone cypionate</i>	63	<i>tgt lubricant eye drops</i>	156
<i>SYNJARDY XR</i>	45	<i>testosterone enanthate</i>	63	<i>tgt lubricant eye nighttime</i>	156
<i>synovacin</i>	79	<i>tetrabenazine</i>	54	<i>tgt miconazole 1</i>	159
<i>SYNTHROID</i>	66	<i>tetracycline hcl</i>	23	<i>tgt miconazole 3 combo pack</i>	159
<i>systane contacts</i>	155	<i>tgt 12 hour nasal decongestant</i>	153	<i>tgt miconazole 7</i>	159
<i>tab-a-vite</i>	148	<i>tgt acetaminophen childrens</i>	86	<i>tgt migraine relief</i>	81
<i>TAB-A-VITE</i>	148	<i>tgt acetaminophen ex st</i>	86	<i>tgt mucus relief childrens</i>	106
<i>tab-a-vite maximum</i>	146	<i>tgt acetaminophen infants</i>	86	<i>tgt naproxen sodium</i>	81
<i>TAB-A-VITE WOMENS</i>	148	<i>tgt acid reducer</i>	124	<i>tgt nasal decongestant</i>	153
<i>TAB-A-VITE/BETA CAROTENE</i>	148	<i>tgt all day allergy childrens</i>	101	<i>tgt nasal decongestant 12-hour</i>	153
<i>tab-a-vite/iron</i>	142	<i>tgt all day allergy relief</i>	101	<i>tgt nasal decongestant pe</i>	153
<i>TAB-A-VITE/IRON</i>	142	<i>tgt all day allergy-d</i>	98	<i>tgt nasal spray</i>	153
<i>TABLOID</i>	31	<i>tgt allergy relief</i>	98, 101	<i>tgt natural laxative pills</i>	133
<i>TABRECTA</i>	35	<i>tgt allergy relief childrens</i>	98	<i>tgt nicotine</i>	90
<i>tabtussin</i>	106	<i>tgt allergy/congestion relief</i>	98	<i>tgt nicotine polacrilex</i>	90
<i>tacrolimus</i>	57, 70	<i>tgt allergy+ congestion relief</i>	98	<i>tgt nicotine step one</i>	90
<i>tacrolimus er</i>	70	<i>tgt antacid</i>	122	<i>tgt nicotine step three</i>	90
<i>tactinal</i>	86	<i>tgt antacid anti-gas</i>	122	<i>tgt nicotine step two</i>	90
<i>tactinal extra strength</i>	86	<i>tgt antacid extra strength</i>	122	<i>tgt pain reliever added st</i>	81
<i>tadalafil</i>	61	<i>tgt antacid ultra strength</i>	122	<i>tgt pain reliever pm ex st</i>	96
<i>tadalafil (pah)</i>	77	<i>tgt antibiotic</i>	109	<i>tgt pain/fever acetaminophen</i>	86
<i>TAFINLAR</i>	35	<i>tgt anti-diarrheal</i>	93	<i>tgt powderlax</i>	133
<i>TAGRISSO</i>	35	<i>tgt antifungal</i>	111	<i>tgt psyllium fiber</i>	127
<i>TALICIA</i>	60	<i>tgt antifungal spray powder</i>	112	<i>tgt saline laxative</i>	133
<i>TALZENNA</i>	35	<i>tgt anti-itch maximum strength</i>	113	<i>tgt saline nasal spray</i>	150
<i>tamoxifen citrate</i>	31	<i>tgt anti-itch/aloe max st</i>	113	<i>tgt senna lax/stool softener</i>	133

INDEX

tgt senna laxative	133	th triple antibiotic plus.....	109	tinidazole.....	20
tgt sinus 12 hour.....	153	th vision vitamins.....	146	tiotropium bromide	75
tgt stool softener.....	134	th vitamin b1.....	161	TIVICAY.....	41
tgt stool softener & stimulant	133	th vitamin b12.....	161	TIVICAY PD.....	41
tgt tussin dm cough	104	th vitamin b-12.....	161	tizanidine hcl	40
tgt wart remover	115	th vitamin b12 er.....	161	TOBI PODHALER.....	76
tgt womens laxative.....	133	th vitamin b-6.....	161	TOBRADEX	73
th 12 hour decongestant.....	153	th vitamin c.....	162	tobramycin	73, 76
th antacid extra strength.....	122	th vitamin c/rose hips/bioflav	141	tobramycin sulfate.....	20
th antacid regular strength.....	122	th vitamin d3.....	163	tobramycin-dexamethasone.....	73
th antacid ultra strength.....	122	th vitamin e.....	165	TODAY SPONGE	153
th anti-diarrheal	93	th womans laxative.....	133	tofacinib citrate	68
th arthritis pain relief.....	86	th womens daily	146	tofacinib citrate er.....	68
th b complex/iron/c/e	142	th zinc.....	140	tolnaftate	112
th bacitracin	109	THALOMID.....	31	tolnaftate antifungal.....	112
th calcium	139	the magic bullet.....	133	tolterodine tartrate.....	61
th calcium carbonate-vitamin d.....	139	theophylline er.....	76	tolterodine tartrate er.....	61
th calcium citrate-vitamin d.....	139	thera.....	149	tolvaptan	59
th cetirizine hcl.....	101	ThERAGRAN-M PREMIER 50 PLUS		topiramate	24
th chest congestion relief.....	106		146	toremifene citrate	31
th children multi vitamins.....	148	thera-m.....	146	torsemide	51
th clotrimazole	112	therapeutic	118	total allergy.....	98
th complete multi	146	therapeutic m	146	total b/c	141
th complete multi 50+	146	therapeutic t+plus.....	118	TOUJEO MAX SOLOSTAR.....	46
th daily multiple vitamin/iron	142	therapeutic-m	146	TOUJEO SOLOSTAR.....	46
th daily multiple vitamins	149	thera-tabs	149	TRADJENTA.....	45
th famotidine 10.....	124	theratrum complete	146	tramadol hcl	19
th fiber	128	THERATRUM COMPLETE.....	146	tramadol-acetaminophen	19
th gentle laxative	133	theratrum complete 50 plus.....	146	trandolapril	48
th hydrocortisone.....	113	THERATRUM COMPLETE 50 PLUS		tranexamic acid.....	47
th hydrocortisone-aloe.....	113		146	tranylcypromine sulfate.....	27
th iron	126	therems.....	149	travel-ease	93
th loratadine.....	101	THEREMS.....	149	travoprost (bak free).....	74
th loratadine-d	98	THEREMS-M	146	trazodone hcl	28
th motion relief.....	93	thiamine hcl.....	161	TRELEGY ELLIPTA.....	78
th nasal decongestant pe	153	thiamine mononitrate.....	161	TRELSTAR MIXJECT.....	67
th nasal relief.....	153	THICK NOW.....	158	TREMFYA.....	68
th nasal relief moisturizing.....	153	THICKENUP CLEAR	158	TREMFYA ONE-PRESS.....	68
th nasal relief sinus.....	153	THICK-IT.....	158	TREMFYA PEN	68
th natural fiber	128	THICK-IT #2.....	158	TREMFYA-CD/UC INDUCTION	68
th omega-3 fish oil.....	154	thioridazine hcl	38	TRESIBA.....	46
th oyster shell calcium/d	139	thiothixene.....	38	TRESIBA FLEXTOUCH.....	46
th pain reliever pm ex st	96	thrive	90	tretinoin	36, 55
th premium daily multiple.....	146	tiadylt er.....	50	triamcinolone acetonide	55, 57, 150
th prenatal vitamins	149	tiagabine hcl.....	25	triarterene.....	52
th sleep aid	96	TIBSOVO	35	triarterene-hctz	51
th stool softener.....	134	ticagrelor	48	tri-biozene	109
th stool softener/laxative.....	133	TICOVAC	71	tri-buffered aspirin	88
th theradex-m	146	tigecycline	20	triderm.....	57
th triple antibiotic	109	timolol maleate	30, 74	trientine hcl.....	59

INDEX

tri-estarylla.....	65	TRUSTEX RIA LUBRICATED.....	135	ursodiol	60
trifluoperazine hcl	38	TRUSTEX RIA NON-LUBRICATED	135	UZEDY.....	40
trifluridine.....	73	TRUSTEX-NONOXYNOL-9/RIB/STUD	135	vagistat-3	159
trihexyphenidyl hcl.....	37	TRYNGOLZA	53	valacyclovir hcl.....	43
TRIJARDY XR.....	45	TUKYSA.....	35	VALCHLOR.....	31
TRIKAFTA.....	76	tum-ease.....	122	valganciclovir hcl.....	40
trimethoprim	20	tums chewy delights.....	122	valproic acid.....	24
tri-mili.....	65	TUMS CHEWY DELIGHTS.....	122	valsartan	48
trimipramine maleate.....	28	TURALIO.....	35	valsartan-hydrochlorothiazide	51
TRINTELLIX.....	28	turqoz	65	VALTOCO 10 MG DOSE.....	25
triple antibiotic	109	tusnel diabetic	104	VALTOCO 15 MG DOSE.....	25
triple antibiotic pain relief.....	109	tusnel-ex.....	106	VALTOCO 20 MG DOSE.....	25
triple antibiotic plus.....	109	tussin chest congestion.....	106	VALTOCO 5 MG DOSE.....	25
triple antibiotic+pain relief.....	109	tussin cough dm sugar free.....	104	valtya 1/35.....	65
TRIPLE PASTE.....	116	tussin dm.....	104	VALTYA 1/50	65
tri-sprintec.....	65	tussin dm clear.....	104	value plus glucose	91
TRIUMEQ.....	42	tussin dm cough + chest	104	vancomycin hcl	20
triumeq pd	42	tussin dm max sugar-free.....	104	VANFLYTA	35
tri-vita	149	tussin expectorant.....	106	VAQTA.....	71
tri-vitamin.....	149	tussin mucus & chest congest.....	106	varenicline tartrate	20
tri-vylibra.....	65	tussin mucus+chest congestion	106	varenicline tartrate (starter).....	20
trixaicin	116	tussin pe.....	106	varenicline tartrate(continue)	20
trixaicin hp.....	116	TWINRIX.....	71	VARIVAX	71
trosipium chloride.....	61	TYENNE.....	68	vaseline.....	114
trosipium chloride er.....	61	tylenol childrens chewables	86	VAXCHORA.....	71
trueplus glucose	91	TYLENOL CHILDRENS CHEWABLES	86	VCF VAGINAL CONTRACEPTIVE.....	153
TRUEPLUS GLUCOSE.....	91	tylenol pm extra strength.....	96	vegetable lax+stool softener	133
TRUEPLUS GLUCOSE ON THE GO	91	TYLENOL PM EXTRA STRENGTH.....	96	VELPHORO.....	59
TRULICITY.....	45	tylophen.....	86	VELTASSA	59
TRUMENBA	71	TYMLOS	72	VENCLEXTA.....	36
TRUQAP.....	35	TYPHIM VI.....	71	VENCLEXTA STARTING PACK.....	36
TRUSTEX COLOR CONDOMS + LUBE.....	135	TYR COOLER.....	118	venlafaxine hcl	28
TRUSTEX LUB/RIBBED/STUDDED	135	TYRVAYA	73	venlafaxine hcl er.....	28
TRUSTEX LUB/SPERMICIDE EX ST	135	UBRELVY	30	VEOZAH	54
TRUSTEX LUB/SPERMICIDE XL.....	135	UDENYCA.....	47	verapamil hcl.....	50
TRUSTEX LUBRICATED.....	135	ultra fine mist nasal spray	153	verapamil hcl er.....	50
TRUSTEX LUBRICATED EX LARGE	135	ultra fresh	156	VERQUVO.....	53
TRUSTEX LUBRICATED EXTRA ST	135	ultra fresh pm	156	VERSACLOZ	40
TRUSTEX	135	ultra lubricant eye drops.....	156	VERZENIO.....	36
LUBRICATED/SPERMICIDE.....	135	ultra lubricating eye drops.....	156	vienva	65
TRUSTEX NATURAL CONDOMS + LUBE.....	135	ultra omega 3.....	154	vigabatrin	25
TRUSTEX NON-LUBRICATED.....	135	ultra thin corn removers	115	vigadrone	25
TRUSTEX RIA LUB/SPERMICIDE.....	135	UNIFIBER	128	VIGAFYDE.....	25
		UNISOL 4.....	156	vilazodone hcl	28
		unithroid	66	VIMKUNYA	71
		up & up glucose	91	viorele	65
		URO-MAG.....	122	VIRACEPT.....	42
				VIREAD.....	42
				virtussin a/c.....	104
				virtussin ac w/alc.....	104

INDEX

VISINE FOR CONTACTS	156	VITRAKVI.....	36	west-vite w/folic acid	141
vision formula eye health.....	146	vitrum senior.....	147	white petrolatum.....	114
vision formula/lutein.....	147	VIVITROL.....	19	white petroleum jelly	114
vision vitamins	147	VIVOTIF	71	WINREVAIR.....	77
vit e-vit c-beta carotene	149	VONJO.....	32	wixela inhub	78
vitachew multiple vitamin.....	149	VORANIGO.....	36	womans laxative	133
vitalee.....	149	voriconazole.....	29	womans stool softener	134
VITALETS CHILDRENS.....	149	VOSEVI.....	41	womens daily form/fa/ca/fe	147
vitamin a	160	VOWST.....	60	womens daily formula	147
vitamin a palmitate	160	VRAYLAR	40	womens laxative	133
vitamin b + c complex.....	141	VUMERITY.....	55	womens multivitamin.....	147
vitamin b 12.....	161	vyfemla.....	65	womens one daily	147
vitamin b1	161	vylibra.....	65	WYOST.....	72
vitamin b-1.....	161	VYNDAMAX.....	51	XALKORI	36
vitamin b12.....	161	VYVGART HYTRULO.....	68	XARELTO	47
vitamin b-12.....	161	VYZULTA	74	XATMEP	70
vitamin b-12 er.....	161	wal-dram ii.....	93	XCOPRI	26
vitamin b-2.....	161	wal-four	153	XCOPRI (250 MG DAILY DOSE).....	26
vitamin b6.....	161	walgreens glucose	91	XCOPRI (350 MG DAILY DOSE).....	26
vitamin b-6.....	161	wal-itin	101	XDEMVI.....	73
vitamin c	141, 162	wal-itin allergy reditabs.....	101	XERMELO	59
vitamin c er.....	162	wal-itin aller-melts	101	XIFAXAN.....	60
vitamin c immune health.....	162	wal-itin childrens.....	101	XIGDUO XR.....	45
vitamin c plus wild rose hips.....	162	wal-itin d	98	XIIDRA	73
vitamin c/rose hips.....	162	wal-itin d 24 hour.....	98	XOCOVA.....	43
vitamin c/rose hips tr	162	wal-mucil.....	128	XOFLUZA (40 MG DOSE).....	43
vitamin c-rose hips	162	wal-phed.....	153	XOFLUZA (80 MG DOSE).....	43
vitamin c-rose hips er	162	wal-phed 12 hour	153	XOLAIR.....	68
vitamin c-rose hips-acerola	141	wal-phed d.....	153	XOLREMDI	47
vitamin d.....	163, 164	wal-phed pe.....	153	XOSPATA.....	36
vitamin d (cholecalciferol).....	164	wal-profen	81	XPOVIO (100 MG ONCE WEEKLY) 36	
vitamin d high potency.....	164	wal-sporin.....	109	XPOVIO (40 MG ONCE WEEKLY) ..36	
vitamin d infant	164	wal-tap dm cold/cough	104	XPOVIO (40 MG TWICE WEEKLY) 36	
vitamin d-1000 max st	164	wal-tussin	106	XPOVIO (60 MG ONCE WEEKLY) ..36	
vitamin d2.....	164	wal-tussin chest congestion	106	XPOVIO (60 MG TWICE WEEKLY) 36	
vitamin d3.....	164	wal-tussin cough/chest dm	104	XPOVIO (80 MG ONCE WEEKLY) ..36	
vitamin d-3.....	164	wal-tussin dm	104	XPOVIO (80 MG TWICE WEEKLY) 36	
vitamin d3 complete	147	wal-tussin dm cgh/chest cong	104	X-SEB T PLUS.....	118
vitamin d3 maximum strength	164	wal-vert.....	101	XTAMPZA ER.....	18
vitamin d-400.....	164	wal-zyr.....	101, 157	XTANDI.....	31
vitamin e.....	165	wal-zyr all day allergy child	101	xulane	65
vitamin e blend	165	wal-zyr childrens	101	yargesa	61
vitamin e high potency.....	165	wal-zyr d	98	YELETS TEENAGE FORMULA.....	147
vitamin e water soluble.....	165	warfarin sodium.....	47	YESINTEK	68
vitamin e/d-alpha natural	165	wart remover	115	YF-VAX.....	71
vitamin e-200.....	165	wart remover maximum strength... 115,		YONSA	31
vitamin e-400.....	165	116		yulithira.....	36
vitamin-mineral supplement	147	weekly-d.....	164	YUPELRI.....	75
vitamins a-d-e/selenium	147	WEGOVY.....	72	yuvafem	65
vitamins/minerals.....	147	WELIREG.....	61	zafemy	65

INDEX

<i>zafirlukast</i>	75	<i>zidovudine</i>	42	<i>ZONISADE</i>	26
<i>zaleplon</i>	78	<i>zinc</i>	140	<i>zonisamide</i>	26
<i>ZARXIO</i>	47	<i>zinc gluconate</i>	140	<i>zoo friends</i>	149
<i>zeasorb-af</i>	112	<i>zinc oxide</i>	116	<i>zoo friends plus iron</i>	149
<i>ZEJULA</i>	36	<i>zinc sulfate</i>	140	<i>zostrix hp</i>	116
<i>ZELBORAF</i>	36	<i>ziprasidone hcl</i>	40	<i>zovia 1/35 (28)</i>	65
<i>zelvysia</i>	61	<i>ziprasidone mesylate</i>	40	<i>ZTALMY</i>	25
<i>zenatane</i>	55	<i>ZIRGAN</i>	73	<i>ZURZUVAE</i>	27
<i>ZENBEXUS</i>	32	<i>ZOKINVY</i>	72	<i>ZYKADIA</i>	36
<i>ZENPEP</i>	61	<i>ZOLINZA</i>	32	<i>ZYMFENTRA (2 PEN)</i>	70
<i>ZEPOSIA</i>	55	<i>zolmitriptan</i>	30	<i>ZYMFENTRA (2 SYRINGE)</i>	70
<i>ZEPOSIA 7-DAY STARTER PACK</i> ..	55	<i>zolpidem tartrate</i>	78		
<i>ZEPOSIA STARTER KIT</i>	55	<i>zolpidem tartrate er</i>	78		



This formulary was updated on 10/05/2026.

**For more recent information or other questions, contact us at
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