BlueCross BlueShield of Illinois
BlueCross BlueShield of Montana
BlueCross BlueShield of New Mexico
BlueCross BlueShield of Oklahoma
BlueCross BlueShield of Texas

Divisions of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association

October 2016

5 Tier Standard Drug List

Please consider talking to your doctor about prescribing preferred medications, which may help reduce your out-of-pocket costs. This list may help guide you and your doctor in selecting an appropriate medication for you.

The drug list, also known as a formulary, is regularly updated. You can view the most up-to-date list, or the specialty drug list, at **MyPrime.com**.

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To search for a drug name within this PDF document, use the **Control** and **F** keys on your keyboard, or go to **Edit** in the drop-down menu and select **Find/Search**. Type in the word or phrase you are looking for and click on **Search**.

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https://www.myprime.com/v/BCBSTX/COMMERCIAL/TX5TIERSTD/en/find-medicine.html

Introduction

Blue Cross and Blue Shield is pleased to present the 2016 Drug List. This is a list of preferred drugs which includes Brand drugs and a partial listing of generic drugs**. Members are encouraged to show this list to their physicians and pharmacists. Physicians are encouraged to prescribe drugs on this list, when right for the member. However, decisions regarding therapy and treatment are always between members and their physician.**

Drug List updates – This list is regularly updated as generic drugs become available and changes take place in the pharmaceuticals market. For the most up-to-date information, visit **MyPrime.com** and log in or call the number on the back of your ID card.

How drugs are selected

Drugs on this list are selected based on the recommendations of a committee made up of physicians and pharmacists from throughout the country. The committee, which includes at least one representative you're your health plan, reviews drugs regulated by the U.S. Food and Drug Administration (FDA).

Both drugs that are newly approved by the FDA as well as those that have been on the market for some time are considered. Drugs are selected based on safety, efficacy, cost and how they compare to other drugs currently on the list.

How member payment is determined

This list shows prescription drug products in tiers. Generally, each drug is placed into one of five member payment tiers: Preferred Generic (Tier 1), Non-Preferred Generic (Tier 2), Preferred Brand (Tier 3), Non-Preferred Brand (Tier 4) (not listed in this document) and Specialty (Tier 5). To verify your payment amount for a drug, visit **myprime.com** and log in or call the number on the back of your ID card.

Your pharmacy benefit includes coverage for many prescription drugs, although some exclusions may apply. For example, drugs indicated for cosmetic purposes, e.g., Propecia, for hair growth, may not be covered. Prescription products that have over-the-counter (OTC) equivalents may not be covered. Drugs that are not FDA-approved for self-administration may be available through your medical benefit.

How to use this list

Generic drugs are shown in lower-case **boldface** type. Most generic drugs are followed by a reference brand drug in (parentheses). The reference brand drug is a non-preferred (NP) brand and is only included as a reference to the brand. Some generic products have no reference brand.

Example: **atorvastatin** (Lipitor)

Brand drugs are listed in all CAPITAL letters.

Example: PROAIR HFA

Drugs used to treat multiple conditions

Some drugs in the same dosage form may be used to treat more than one medical condition. In these instances, each medication is classified according to its first FDA-approved use. Please check the index if you do not find your particular medication in the class/condition section that corresponds to your use.

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Generic drugs

Using generic drugs, when right for you, can help you save on your out-of-pocket medication costs. Generic drugs must be approved by the FDA just as brand drugs are, and must meet the same standards.

There are two types of generic drugs:

- A **generic equivalent** is made with the same active ingredient(s) at the same dosage as the reference drug.
- A **generic alternative** is a drug typically used to treat the same condition, but the active ingredient(s) differs from the brand drug.

According to the FDA, compared to its brand counterpart, an FDA-approved generic drug:

- Is chemically the same
- Works just as well in the body
- Is as safe and effective
- Meets the same standards set by the FDA

The main difference between the reference brand drug and the generic equivalent is that the generic often costs much less.

Preferred brand drugs typically move to a non-preferred brand tier after a generic equivalent becomes available.

You may be responsible for the brand member payment amount *plus* the difference in cost between the brand and generic equivalent if you or your doctor requests the reference brand rather than the generic. Generic drugs have the lowest member payment amount.

Consider talking to your doctor about generic drugs

If your doctor writes a prescription for a brand drug that does not have a generic equivalent, consider asking if an appropriate generic alternative is available.

You can also let your pharmacist know that you would like a generic equivalent for a brand drug, whenever one is available. Your pharmacist can usually substitute a generic equivalent for its brand counterpart without a new prescription from your doctor.

Only your doctor can determine whether a generic alternative is right for you and must prescribe the medication.

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Coverage considerations

Most prescription drug benefit plans provide coverage for up to a 30-day supply of medication, with some exceptions. Your plan may also provide coverage for up to a 90-day supply of maintenance medications. Maintenance medications are those drugs you may take on an ongoing basis for conditions such as high blood pressure, diabetes or high cholesterol. Some plans may exclude coverage for certain agents or drug categories, like those used for erectile dysfunction or weight loss.

Over-the-counter exclusions: Your benefit plan may not provide coverage for prescription medications that have an over-the-counter version. You should refer to your benefit plan material for details about your particular benefits.

Compounded medications: Your benefit plan may not provide coverage for compounded medications. Please see your plan materials or call the number on the back of your ID card to determine whether compounded medications are covered and/or verify your payment amount.

Repackaged medications: Repackaged versions of medications already available on the market are not covered.

Prior Authorization (PA): Your benefit plan may require prior authorization for certain drugs. This means that your doctor will need to submit a prior authorization request for coverage of these medications, and the request will need to be approved, before the medication will be covered under your plan. For the preferred medications listed in this document, if a prior authorization is commonly required, it will generally be noted next to the medication with a dot under the prior authorization column. Some plans may have prior authorization on additional medications beyond those noted in this document. Refer to your benefit plan materials for details about your particular benefits.

Step Therapy (ST): Your benefit plan may include a step therapy program. This means you may need to try another proven, cost-effective medication before coverage may be available for the drug included in the program. Many brand drugs have less-expensive generic or brand alternatives that might be an option for you. For the preferred medications listed in this document, if a step therapy is commonly required, it will generally be noted next to the medication with a dot under the step therapy column. Some plans may have step therapy programs on additional medications beyond those noted in this document. Refer to your benefit plan materials for details about your particular benefits.

Dispensing Limits (DL): Drug Dispensing limits help encourage medication use as intended by the FDA. Dispensing limits are placed on medications in certain drug categories. For the preferred medications listed in this document, if a dispensing limit applies, it will generally be noted next to the medication with a dot under the dispensing limits column. Limits may include: quantity of covered medication per prescription, quantity of covered medication in a given time period, coverage only for members within a certain age range, and coverage only for members of a specific gender. If your doctor prescribes a greater quantity of medication than what the dispensing limit allows, you can still get the medication. However, you will be responsible for the full cost of the prescription beyond what your coverage allows.* For a list of medications and their dispensing limits, visit **myprime.com**.

*Please note: For certain controlled substance medications, some state laws may not allow coverage by a health benefit plan of such medication if dispensed in a quantity beyond what the dispensing limit allows. You will be responsible for the full cost of the prescription with no benefits applied if the dispensed quantity exceeds the dispensing limit.

Remember, medication decisions are between you and your doctor. Only you and your doctor can determine which medication is right for you. Discuss any questions or concerns you have about medications you are taking or are prescribed with your doctor. Blue Cross and Blue Shield does not provide health care services and, therefore, cannot guarantee any results or outcomes.

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Specialty drugs

Specialty drugs are used in the treatment of medical conditions such as hepatitis, hemophilia, multiple sclerosis and rheumatoid arthritis. Specialty drugs may be oral, topical or injectable medications that can either be self-administered or administered by a health care professional. For a current list of specialty medications, visit **myprime.com**.

Note that some drug classes may be excluded by some plans and therefore may not be covered under your pharmacy benefit. Your plan may have a different coverage level for self-administered specialty drugs. If you have questions about your coverage for specialty medications or your prescription drug benefit, call the number on the back of your ID card.

Prime Therapeutics Specialty Pharmacy Program

Through Prime Therapeutics Specialty Pharmacy, members can have covered specialty medications delivered directly to them or their doctor's office. When you receive specialty medications through Prime, you also receive at no additional charge the following services:

- Coordination of coverage between you, your doctor and your health plan
- Educational materials about your particular condition and information about managing potential medication side effects
- Syringes, sharps containers and other supplies with every shipment for self-injectables
- 24/7/365 phone access to a pharmacist for urgent medication issues

To order through Prime Therapeutics Specialty Pharmacy:

- Have your doctor call or fax your prescription to Prime Therapeutics Specialty Pharmacy. Your doctor can call 877-627-6337 or fax to 877-828-3939.
- If you have an existing prescription for a covered specialty medication, you can call 877-627-6337 to transfer your prescription.
- A Prime Therapeutics coordinator will contact you to arrange delivery of your medication.
- The prescription can be shipped directly to you or your prescribing doctor's office. Each package is individually marked for each member. Refrigerated drugs are shipped in temperature-controlled packaging.

If you have questions, please contact Prime Therapeutics Specialty Pharmacy at 877-627-6337, visit www.PrimeTherapeutics.com/specialty, or call the number on the back of your ID card.

* Blue Cross and Blue Shield of Illinois (BCBSIL), Blue Cross and Blue Shield of Montana (BCBSMT), Blue Cross and Blue Shield of New Mexico (BCBSNM), Blue Cross and Blue Shield of Oklahoma (BCBSOK), and Blue Cross and Blue Shield of Texas (BCBSTX) are Divisions of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association. BCBSIL, BCBSMT, BCBSNM, BCBSOK, and BCBSTX contract with Prime Therapeutics to provide pharmacy benefit management, home delivery pharmacy and specialty pharmacy services. BCBSIL, BCBSMT, BCBSNM, BCBSOK, and BCBSTX, as well as several other independent Blue Cross and Blue Shield Plans, have an ownership interest in Prime Therapeutics LLC.

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Abbreviation/acronym key

caps ..... capsules
chew ..... chewable
conc ..... concentrate
cr ..... controlled release
dr ..... delayed release
ec ..... enteric coated
effe ..... effervescent
equiv ..... equivalent
er ..... extended release
inhal ..... inhalation
inj ..... injection
liq ..... liquid
lotn ..... lotion
nebu ..... nebulizer
odt ..... orally disintegrating tablets
oint ..... ointment
ophth ..... ophthalmic
osm ..... osmotic release
powd ..... powder
sa ..... sustained action
sl ..... sublingual
soln ..... solution
sr ..... sustained release
suppos ..... suppositories
susp ..... suspension
tab ..... tablets
td ..... transdermal

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
ANTI-INFECTIVE AGENTS				
PENICILLINS				
amoxicillin (trihydrate) cap 250 mg				
amoxicillin (trihydrate) cap 500 mg				
amoxicillin (trihydrate) for susp 125 mg/5ml				
amoxicillin (trihydrate) for susp 200 mg/5ml				
amoxicillin (trihydrate) for susp 250 mg/5ml				
amoxicillin (trihydrate) for susp 400 mg/5ml				
amoxicillin (trihydrate) tab 500 mg				
amoxicillin (trihydrate) tab 875 mg				
ampicillin cap 250 mg				
ampicillin cap 500 mg				
penicillin v potassium for soln 125 mg/5ml				
penicillin v potassium for soln 250 mg/5ml				
penicillin v potassium tab 250 mg				
penicillin v potassium tab 500 mg				
CEPHALOSPORINS				
cefadroxil cap 500 mg				
CEFTIN – cefuroxime axetil for susp 125 mg/5ml				
cephalexin cap 250 mg (Keflex)				
cephalexin cap 500 mg (Keflex)				
MACROLIDES				
AZITHROMYCIN – azithromycin powd pack for susp 1 gm				
azithromycin tab 250 mg (Zithromax)			•	
azithromycin tab 500 mg (Zithromax)			•	
TETRACYCLINES				
minocycline hcl cap 50 mg (Minocin)				
minocycline hcl cap 75 mg (Minocin)				
minocycline hcl cap 100 mg (Minocin)				
FLUOROQUINOLONES				
ciprofloxacin hcl tab 250 mg (base equiv) (Cipro)				
ciprofloxacin hcl tab 500 mg (base equiv) (Cipro)				
ciprofloxacin hcl tab 750 mg (base equiv)				
levofloxacin tab 250 mg (Levaquin)				
levofloxacin tab 500 mg (Levaquin)				
levofloxacin tab 750 mg (Levaquin)				
AMINOGLYCOSIDES				
neomycin sulfate tab 500 mg				
TUBERCULOSIS				
isoniazid tab 100 mg				
isoniazid tab 300 mg				
PRIFTIN – rifapentine tab 150 mg				
FUNGAL INFECTIONS				
fluconazole for susp 10 mg/ml (Diflucan)				
fluconazole tab 50 mg (Diflucan)				
fluconazole tab 100 mg (Diflucan)				
fluconazole tab 150 mg (Diflucan)				
ketoconazole tab 200 mg				
NOXAFIL – posaconazole tab delayed release 100 mg		•		
NOXAFIL – posaconazole susp 40 mg/ml		•		
terbinafine hcl tab 250 mg (Lamisil)				
VIRAL INFECTIONS				
Cytomegalovirus				
VALCYTE – valganciclovir hcl for soln 50 mg/ml (base equiv)				

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
Hepatitis				
BARACLUDE – entecavir oral soln 0.05 mg/ml				
DAKLINZA – daclatasvir dihydrochloride tab 30 mg (base equivalent)	•	•		
DAKLINZA – daclatasvir dihydrochloride tab 60 mg (base equivalent)	•	•		
DAKLINZA – daclatasvir dihydrochloride tab 90 mg (base equivalent)	•	•		
HARVONI – ledipasvir-sofosbuvir tab 90-400 mg	•	•		
PEGASYS – peginterferon alfa-2a inj 180 mcg/ml	•	•		
PEGASYS – peginterferon alfa-2a inj 180 mcg/0.5ml	•	•		
PEGASYS PROCLICK – peginterferon alfa-2a inj 135 mcg/0.5ml	•	•		
PEGASYS PROCLICK – peginterferon alfa-2a inj 180 mcg/0.5ml	•	•		
SOVALDI – sofosbuvir tab 400 mg	•	•		
Herpes				
acyclovir cap 200 mg (Zovirax)				
acyclovir tab 400 mg (Zovirax)				
acyclovir tab 800 mg (Zovirax)				
HIV/AIDS				
APTIVUS – tipranavir cap 250 mg			•	
APTIVUS – tipranavir oral soln 100 mg/ml			•	
ATRIPLA – efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg			•	
CRIXIVAN – indinavir sulfate cap 200 mg			•	
CRIXIVAN – indinavir sulfate cap 400 mg			•	

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
EMTRIVA – emtricitabine caps 200 mg			•	
EMTRIVA – emtricitabine soln 10 mg/ml			•	
EPZICOM – abacavir sulfate-lamivudine tab 600-300 mg			•	
FUZEON – enfuvirtide for inj 90 mg	•		•	
INTELENCE – etravirine tab 25 mg			•	
INTELENCE – etravirine tab 100 mg			•	
INTELENCE – etravirine tab 200 mg			•	
INVIRASE – saquinavir mesylate cap 200 mg			•	
INVIRASE – saquinavir mesylate tab 500 mg			•	
ISENTRESS – raltegravir potassium tab 400 mg (base equiv)			•	
ISENTRESS – raltegravir potassium packet for susp 100 mg (base equiv)			•	
ISENTRESS – raltegravir potassium chew tab 25 mg (base equiv)			•	
ISENTRESS – raltegravir potassium chew tab 100 mg (base equiv)			•	
KALETRA – lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)			•	
KALETRA – lopinavir-ritonavir tab 100-25 mg			•	
KALETRA – lopinavir-ritonavir tab 200-50 mg			•	
LEXIVA – fosamprenavir calcium tab 700 mg (base equiv)			•	
LEXIVA – fosamprenavir calcium susp 50 mg/ml (base equiv)			•	
nevirapine tab 200 mg (Viramune)			•	
NORVIR – ritonavir cap 100 mg			•	
NORVIR – ritonavir tab 100 mg			•	
NORVIR – ritonavir oral soln 80 mg/ml			•	
PREZISTA – darunavir ethanolate susp 100 mg/ml (base equiv)			•	

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
PREZISTA – darunavir ethanolate tab 75 mg (base equiv)			•	
PREZISTA – darunavir ethanolate tab 150 mg (base equiv)			•	
PREZISTA – darunavir ethanolate tab 600 mg (base equiv)			•	
PREZISTA – darunavir ethanolate tab 800 mg (base equiv)			•	
RESCRIPTOR – delavirdine mesylate tab 100 mg			•	
RESCRIPTOR – delavirdine mesylate tab 200 mg			•	
REYATAZ – atazanavir sulfate oral powder packet 50 mg (base equiv)			•	
REYATAZ – atazanavir sulfate cap 150 mg (base equiv)			•	
REYATAZ – atazanavir sulfate cap 200 mg (base equiv)			•	
REYATAZ – atazanavir sulfate cap 300 mg (base equiv)			•	
SELZENTRY – maraviroc tab 150 mg			•	
SELZENTRY – maraviroc tab 300 mg			•	
STRIBILD – elvitegrav-cobic-emtricitab-tenofovdf tab 150-150-200-300 mg			•	
SUSTIVA – efavirenz tab 600 mg			•	
SUSTIVA – efavirenz cap 50 mg			•	
SUSTIVA – efavirenz cap 200 mg			•	
TIVICAY – dolutegravir sodium tab 10 mg (base equiv)			•	
TIVICAY – dolutegravir sodium tab 25 mg (base equiv)			•	
TIVICAY – dolutegravir sodium tab 50 mg (base equiv)			•	
TRUVADA – emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg			•	
TRUVADA – emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg			•	

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
TRUVADA – emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg			•	
TRUVADA – emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg			•	
VIDEX – didanosine for soln 2 gm			•	
VIDEX – didanosine for soln 4 gm			•	
VIRACEPT – nelfinavir mesylate tab 250 mg			•	
VIRACEPT – nelfinavir mesylate tab 625 mg			•	
VIRAMUNE – nevirapine susp 50 mg/5ml			•	
VIRAMUNE XR – nevirapine tab sr 24hr 100 mg			•	
VIREAD – tenofovir disoproxil fumarate oral powder 40 mg/gm			•	
VIREAD – tenofovir disoproxil fumarate tab 150 mg			•	
VIREAD – tenofovir disoproxil fumarate tab 200 mg			•	
VIREAD – tenofovir disoproxil fumarate tab 250 mg			•	
VIREAD – tenofovir disoproxil fumarate tab 300 mg			•	
ZIAGEN – abacavir sulfate soln 20 mg/ml (base equiv)			•	
MALARIA				
chloroquine phosphate tab 250 mg				
chloroquine phosphate tab 500 mg (Aralen)				
DARAPRIM – pyrimethamine tab 25 mg				
hydroxychloroquine sulfate tab 200 mg (Plaquenil)				
PRIMAQUINE PHOSPHATE – primaquine phosphate tab 26.3 mg (15 mg base)				
WORM INFECTIONS				

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
ALBENZA – albendazole tab 200 mg				
BILTRICIDE – praziquantel tab 600 mg				
OTHER ANTI-INFECTIVES				
clindamycin hcl cap 75 mg (Cleocin)				
clindamycin hcl cap 150 mg (Cleocin)				
clindamycin hcl cap 300 mg (Cleocin)				
IMPAVIDO – miltefosine cap 50 mg				
metronidazole tab 250 mg (Flagyl)				
metronidazole tab 500 mg (Flagyl)				
SIVEXTRO – tedizolid phosphate tab 200 mg				
sulfamethoxazole-trimethoprim susp 200-40 mg/5ml				
sulfamethoxazole-trimethoprim tab 400-80 mg (Bactrim)				
sulfamethoxazole-trimethoprim tab 800-160 mg (Bactrim ds)				
trimethoprim tab 100 mg				
XIFAXAN – rifaximin tab 550 mg			•	
ZYVOX – linezolid for susp 100 mg/5ml			•	
CANCER DRUGS				
ACTIMMUNE – interferon gamma-1b inj 100 mcg/0.5ml (2000000 unit/0.5ml)	•			
AFINITOR – everolimus tab 2.5 mg	•	•		
AFINITOR – everolimus tab 5 mg	•	•		
AFINITOR – everolimus tab 7.5 mg	•	•		
AFINITOR – everolimus tab 10 mg	•	•		
ALKERAN – melphalan tab 2 mg				
anastrozole tab 1 mg (Arimidex)				
bicalutamide tab 50 mg (Casodex)				
COTELLIC – cobimetinib fumarate tab 20 mg (base equivalent)	•	•	•	
EMCYT – estramustine phosphate sodium cap 140 mg				

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
FARESTON – toremifene citrate tab 60 mg (base equivalent)				
GLEEVEC – imatinib mesylate tab 100 mg (base equivalent)	•	•	•	
GLEEVEC – imatinib mesylate tab 400 mg (base equivalent)	•	•	•	
IBRANCE – palbociclib cap 75 mg	•	•	•	
IBRANCE – palbociclib cap 100 mg	•	•	•	
IBRANCE – palbociclib cap 125 mg	•	•	•	
letrozole tab 2.5 mg (Femara)				
LEUCOVORIN CALCIUM – leucovorin calcium tab 10 mg				
LEUCOVORIN CALCIUM – leucovorin calcium tab 15 mg				
LEUKERAN – chlorambucil tab 2 mg				
megestrol acetate tab 20 mg				
megestrol acetate tab 40 mg				
MEKINIST – trametinib dimethyl sulfoxide tab 0.5 mg (base equivalent)	•	•		
MEKINIST – trametinib dimethyl sulfoxide tab 2 mg (base equivalent)	•	•		
MESNEX – mesna tab 400 mg				
MYLERAN – busulfan tab 2 mg				
NEXAVAR – sorafenib tosylate tab 200 mg (base equivalent)	•	•		
NILANDRON – nilutamide tab 150 mg				
PURIXAN – mercaptopurine susp 2000 mg/100ml (20 mg/ml)	•			
SPRYCEL – dasatinib tab 20 mg	•	•		
SPRYCEL – dasatinib tab 50 mg	•	•		
SPRYCEL – dasatinib tab 70 mg	•	•		
SPRYCEL – dasatinib tab 80 mg	•	•		
SPRYCEL – dasatinib tab 100 mg	•	•		
SPRYCEL – dasatinib tab 140 mg	•	•		

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
SUTENT – sunitinib malate cap 12.5 mg (base equivalent)	•	•		
SUTENT – sunitinib malate cap 25 mg (base equivalent)	•	•		
SUTENT – sunitinib malate cap 37.5 mg (base equivalent)	•	•		
SUTENT – sunitinib malate cap 50 mg (base equivalent)	•	•		
SYLATRON – peginterferon alfa-2b for inj kit 200 mcg	•	•		
SYLATRON – peginterferon alfa-2b for inj kit 300 mcg	•	•		
SYLATRON – peginterferon alfa-2b for inj kit 600 mcg	•	•		
TABLOID – thioguanine tab 40 mg				
TAFINLAR – dabrafenib mesylate cap 50 mg (base equivalent)	•	•		
TAFINLAR – dabrafenib mesylate cap 75 mg (base equivalent)	•	•		
tamoxifen citrate tab 10 mg (base equivalent)				
tamoxifen citrate tab 20 mg (base equivalent)				
TARCEVA – erlotinib hcl tab 25 mg (base equivalent)	•	•		
TARCEVA – erlotinib hcl tab 100 mg (base equivalent)	•	•		
TARCEVA – erlotinib hcl tab 150 mg (base equivalent)	•	•		
TASIGNA – nilotinib hcl cap 150 mg (base equivalent)	•	•		
TASIGNA – nilotinib hcl cap 200 mg (base equivalent)	•	•		
TREXALL – methotrexate sodium tab 5 mg (base equiv)				
TREXALL – methotrexate sodium tab 7.5 mg (base equiv)				
TREXALL – methotrexate sodium tab 10 mg (base equiv)				
TREXALL – methotrexate sodium tab 15 mg (base equiv)				
VOTRIENT – pazopanib hcl tab 200 mg (base equiv)	•	•		
XALKORI – crizotinib cap 200 mg	•	•		
XALKORI – crizotinib cap 250 mg	•	•		
ZELBORAF – vemurafenib tab 240 mg	•	•		
ZYTIGA – abiraterone acetate tab 250 mg	•	•		
HORMONES, DIABETES AND RELATED DRUGS				
CORTICOSTEROIDS				
CORTISONE ACETATE – cortisone acetate tab 25 mg				
DEXAMETHASONE – dexamethasone soln 0.5 mg/5ml				
dexamethasone tab 0.5 mg				
dexamethasone tab 0.75 mg				
dexamethasone tab 1.5 mg				
dexamethasone tab 4 mg				
dexamethasone tab 6 mg				
prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)				
prednisolone syrup 15 mg/5ml (usp solution equivalent) (Prelone)				
PREDNISONE – prednisone tab 50 mg				
PREDNISONE – prednisone oral soln 5 mg/5ml				
PREDNISONE INTENSOL – prednisone conc 5 mg/ml				
prednisone tab 1 mg				
prednisone tab 2.5 mg				
prednisone tab 5 mg				
prednisone tab 10 mg				

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
prednisone tab 20 mg				
MALE HORMONES				
ANDRODERM – testosterone td patch 24hr 2 mg/24hr		•	•	
ANDRODERM – testosterone td patch 24hr 4 mg/24hr		•	•	
ANDROGEL – testosterone td gel 20.25 mg/1.25gm (1.62%)		•	•	
ANDROGEL – testosterone td gel 40.5 mg/2.5gm (1.62%)		•	•	
ANDROGEL PUMP – testosterone td gel 20.25 mg/act (1.62%)		•	•	
ANDROXY – fluoxymesterone tab 10 mg		•		
ESTROGENS				
COMBIPATCH – estradiol-norethindrone ace td pttw 0.05-0.14 mg/day				
COMBIPATCH – estradiol-norethindrone ace td pttw 0.05-0.25 mg/day				
DIVIGEL – estradiol td gel 0.25 mg/0.25gm (0.1%)				
DIVIGEL – estradiol td gel 0.5 mg/0.5gm (0.1%)				
DIVIGEL – estradiol td gel 1 mg/gm (0.1%)				
estradiol tab 0.5 mg (Estrace)				
estradiol tab 1 mg (Estrace)				
estradiol tab 2 mg (Estrace)				
PROGESTINS				
medroxyprogesterone acetate tab 2.5 mg (Provera)				
medroxyprogesterone acetate tab 5 mg (Provera)				
medroxyprogesterone acetate tab 10 mg (Provera)				

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
BIRTH CONTROL				
desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg (Desogen)			•	
ELLA – ulipristal acetate tab 30 mg			•	
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg			•	
norethindrone & ethinyl estradiol tab 1 mg-35 mcg (Norinyl 1+35)			•	
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg (Ortho-cyclen)			•	
norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg (Ortho tri-cyclen)			•	
NUVARING – etonogestrel-ethinyl estradiol va ring 0.120-0.015 mg/24hr			•	
INFERTILITY				
FOLLISTIM AQ – follitropin beta inj 75 unit/0.5ml	•		•	
FOLLISTIM AQ – follitropin beta inj 300 unit/0.36ml	•		•	
FOLLISTIM AQ – follitropin beta inj 600 unit/0.72ml	•		•	
FOLLISTIM AQ – follitropin beta inj 900 unit/1.08ml	•		•	
GANIRELIX ACETATE – ganirelix acetate inj 250 mcg/0.5ml	•		•	
DIABETES				
BYDUREON – exenatide extended release for susp pen-injector 2 mg			•	•
BYDUREON – exenatide for inj extended release susp 2 mg			•	•
glimepiride tab 1 mg (Amaryl)				
glimepiride tab 2 mg (Amaryl)				
glimepiride tab 4 mg (Amaryl)				
glipizide tab sr 24hr 2.5 mg (Glucotrol xl)				

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
glipizide tab sr 24hr 5 mg (Glucotrol xl)				
glipizide tab 5 mg (Glucotrol)				
glipizide tab 10 mg (Glucotrol)				
GLUCAGON EMERGENCY KIT – glucagon (rdna) for inj kit 1 mg				
glyburide micronized tab 1.5 mg (Glynase)				
glyburide micronized tab 3 mg (Glynase)				
glyburide micronized tab 6 mg (Glynase)				
glyburide tab 1.25 mg				
glyburide tab 2.5 mg				
glyburide tab 5 mg				
glyburide-metformin tab 1.25-250 mg (Glucovance)				
glyburide-metformin tab 2.5-500 mg (Glucovance)				
glyburide-metformin tab 5-500 mg (Glucovance)				
INVOKAMET – canagliflozin-metformin hcl tab 50-500 mg			•	
INVOKAMET – canagliflozin-metformin hcl tab 50-1000 mg			•	
INVOKAMET – canagliflozin-metformin hcl tab 150-500 mg			•	
INVOKAMET – canagliflozin-metformin hcl tab 150-1000 mg			•	
INVOKANA – canagliflozin tab 100 mg			•	
INVOKANA – canagliflozin tab 300 mg			•	
JANUMET – sitagliptin-metformin hcl tab 50-500 mg			•	
JANUMET – sitagliptin-metformin hcl tab 50-1000 mg			•	

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
JANUMET XR – sitagliptin-metformin hcl tab sr 24hr 50-500 mg			•	
JANUMET XR – sitagliptin-metformin hcl tab sr 24hr 50-1000 mg			•	
JANUMET XR – sitagliptin-metformin hcl tab sr 24hr 100-1000 mg			•	
JANUVIA – sitagliptin phosphate tab 25 mg (base equiv)			•	
JANUVIA – sitagliptin phosphate tab 50 mg (base equiv)			•	
JANUVIA – sitagliptin phosphate tab 100 mg (base equiv)			•	
JARDIANCE – empagliflozin tab 10 mg			•	
JARDIANCE – empagliflozin tab 25 mg			•	
KOMBIGLYZE XR – saxagliptin-metformin hcl tab sr 24hr 2.5-1000 mg			•	
KOMBIGLYZE XR – saxagliptin-metformin hcl tab sr 24hr 5-500 mg			•	
KOMBIGLYZE XR – saxagliptin-metformin hcl tab sr 24hr 5-1000 mg			•	
metformin hcl tab sr 24hr 500 mg (Glucophage xr)				
metformin hcl tab sr 24hr 750 mg (Glucophage xr)				
metformin hcl tab 500 mg (Glucophage)				
metformin hcl tab 850 mg (Glucophage)				
metformin hcl tab 1000 mg (Glucophage)				
ONGLYZA – saxagliptin hcl tab 2.5 mg (base equiv)			•	
ONGLYZA – saxagliptin hcl tab 5 mg (base equiv)			•	
pioglitazone hcl tab 15 mg (base equiv) (Actos)				

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
pioglitazone hcl tab 30 mg (base equiv) (Actos)				
pioglitazone hcl tab 45 mg (base equiv) (Actos)				
SYNJARDY – empagliflozin-metformin hcl tab 5-500 mg			•	
SYNJARDY – empagliflozin-metformin hcl tab 5-1000 mg			•	
SYNJARDY – empagliflozin-metformin hcl tab 12.5-500 mg			•	
SYNJARDY – empagliflozin-metformin hcl tab 12.5-1000 mg			•	
VICTOZA – liraglutide soln pen-injector 18 mg/3ml (6 mg/ml)			•	•
DIABETES - INSULINS				
Rapid-Acting Insulins				
NOVOLOG – insulin aspart inj 100 unit/ml			•	
NOVOLOG FLEXPEN – insulin aspart soln pen-injector 100 unit/ml			•	
NOVOLOG PENFILL – insulin aspart soln cartridge 100 unit/ml			•	
Short-Acting Insulins				
NOVOLIN R – insulin regular (human) inj 100 unit/ml			•	
Intermediate-Acting Insulins				
NOVOLIN N – insulin nph (human) (isophane) inj 100 unit/ml			•	
NOVOLIN 70/30 – insulin nph isophane & regular human inj 100 unit/ml (70-30)			•	
NOVOLOG MIX 70/30 – insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)			•	
NOVOLOG MIX 70/30 PREFILL – insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30)			•	

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
Basal Insulins				
LANTUS – insulin glargine inj 100 unit/ml			•	
LANTUS SOLOSTAR – insulin glargine soln pen-injector 100 unit/ml			•	
LEVEMIR – insulin detemir inj 100 unit/ml			•	
LEVEMIR FLEXTOUCH – insulin detemir soln pen-injector 100 unit/ml			•	
TOUJEO SOLOSTAR – insulin glargine soln pen-injector 300 unit/ml			•	
TRESIBA FLEXTOUCH – insulin degludec soln pen-injector 100 unit/ml			•	
TRESIBA FLEXTOUCH – insulin degludec soln pen-injector 200 unit/ml			•	
THYROID REGULATION				
levothyroxine sodium tab 25 mcg (Synthroid)				
levothyroxine sodium tab 50 mcg (Synthroid)				
levothyroxine sodium tab 75 mcg (Synthroid)				
levothyroxine sodium tab 88 mcg (Synthroid)				
levothyroxine sodium tab 100 mcg (Synthroid)				
levothyroxine sodium tab 112 mcg (Synthroid)				
levothyroxine sodium tab 125 mcg (Synthroid)				
levothyroxine sodium tab 137 mcg (Synthroid)				
levothyroxine sodium tab 150 mcg (Synthroid)				

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
levothyroxine sodium tab 175 mcg (Synthroid)				
levothyroxine sodium tab 200 mcg (Synthroid)				
levothyroxine sodium tab 300 mcg (Synthroid)				
methimazole tab 5 mg (Tapazole)				
methimazole tab 10 mg (Tapazole)				
thyroid tab 30 mg (1/2 grain) (Armour thyroid)				
thyroid tab 60 mg (1 grain) (Armour thyroid)				
thyroid tab 90 mg (1 1/2 grain) (Armour thyroid)				
GROWTH HORMONE				
INCRELEX – mecasermin inj 40 mg/4ml (10 mg/ml)	•			
OMNITROPE – somatropin for inj 5.8 mg	•	•		
OMNITROPE – somatropin inj 5 mg/1.5ml	•	•		
OMNITROPE – somatropin inj 10 mg/1.5ml	•	•		
OTHER HORMONES AND RELATED DRUGS				
ACTONEL – risedronate sodium tab 5 mg			•	
ACTONEL – risedronate sodium tab 30 mg			•	
ACTONEL – risedronate sodium tab 35 mg			•	
ACTONEL – risedronate sodium tab 150 mg			•	
alendronate sodium tab 5 mg			•	
alendronate sodium tab 10 mg			•	
alendronate sodium tab 35 mg			•	

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
alendronate sodium tab 70 mg (Fosamax)			•	
FORTEO – teriparatide (recombinant) inj 600 mcg/2.4ml	•	•	•	
ORFADIN – nitisinone susp 4 mg/ml	•			
ORFADIN – nitisinone cap 2 mg	•			
ORFADIN – nitisinone cap 5 mg	•			
ORFADIN – nitisinone cap 10 mg	•			
SENSIPAR – cinacalcet hcl tab 30 mg (base equiv)				
SENSIPAR – cinacalcet hcl tab 60 mg (base equiv)				
SENSIPAR – cinacalcet hcl tab 90 mg (base equiv)				
STIMATE – desmopressin acetate nasal soln 1.5 mg/ml				
STRENSIQ – asfotase alfa subcutaneous inj 18 mg/0.45ml	•			
STRENSIQ – asfotase alfa subcutaneous inj 28 mg/0.7ml	•			
STRENSIQ – asfotase alfa subcutaneous inj 40 mg/ml	•			
STRENSIQ – asfotase alfa subcutaneous inj 80 mg/0.8ml	•			
HEART AND CIRCULATORY DRUGS				
ANGIOTENSIN CONVERTING ENZYME (ACE) INHIBITORS AND COMBINATI				
benazepril hcl tab 5 mg				
benazepril hcl tab 10 mg (Lotensin)				
benazepril hcl tab 20 mg (Lotensin)				
benazepril hcl tab 40 mg (Lotensin)				
enalapril maleate & hydrochlorothiazide tab 5-12.5 mg				
enalapril maleate & hydrochlorothiazide tab 10-25 mg (Vaseretic)				

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
enalapril maleate tab 2.5 mg (Vasotec)				
enalapril maleate tab 5 mg (Vasotec)				
enalapril maleate tab 10 mg (Vasotec)				
enalapril maleate tab 20 mg (Vasotec)				
fosinopril sodium tab 10 mg				
fosinopril sodium tab 20 mg				
fosinopril sodium tab 40 mg				
lisinopril & hydrochlorothiazide tab 10-12.5 mg (Zestoretic)				
lisinopril & hydrochlorothiazide tab 20-12.5 mg (Zestoretic)				
lisinopril & hydrochlorothiazide tab 20-25 mg (Zestoretic)				
lisinopril tab 2.5 mg (Zestril)				
lisinopril tab 5 mg (Prinivil)				
lisinopril tab 10 mg (Prinivil)				
lisinopril tab 20 mg (Prinivil)				
lisinopril tab 30 mg (Zestril)				
lisinopril tab 40 mg (Zestril)				
perindopril erbumine tab 2 mg				
quinapril hcl tab 5 mg (Accupril)				
quinapril hcl tab 10 mg (Accupril)				
quinapril hcl tab 20 mg (Accupril)				
quinapril hcl tab 40 mg (Accupril)				
ramipril cap 1.25 mg (Altace)				
ramipril cap 2.5 mg (Altace)				
ramipril cap 5 mg (Altace)				
ramipril cap 10 mg (Altace)				
trandolapril tab 1 mg (Mavik)				
trandolapril tab 2 mg (Mavik)				
trandolapril tab 4 mg (Mavik)				
ANGIOTENSIN II RECEPTOR ANTAGONISTS (ARBS) AND COMBINATIONS				

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
BENICAR – olmesartan medoxomil tab 5 mg				
BENICAR – olmesartan medoxomil tab 20 mg				
BENICAR – olmesartan medoxomil tab 40 mg				
BENICAR HCT – olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg				
BENICAR HCT – olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg				
BENICAR HCT – olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg				
irbesartan tab 75 mg (Avapro)				
irbesartan tab 150 mg (Avapro)				
irbesartan tab 300 mg (Avapro)				
irbesartan-hydrochlorothiazide tab 150-12.5 mg (Avalide)				
irbesartan-hydrochlorothiazide tab 300-12.5 mg (Avalide)				
losartan potassium & hydrochlorothiazide tab 50-12.5 mg (Hyzaar)				
losartan potassium & hydrochlorothiazide tab 100-12.5 mg (Hyzaar)				
losartan potassium & hydrochlorothiazide tab 100-25 mg (Hyzaar)				
losartan potassium tab 25 mg (Cozaar)				
losartan potassium tab 50 mg (Cozaar)				
losartan potassium tab 100 mg (Cozaar)				

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
valsartan-hydrochlorothiazide tab 80-12.5 mg (Diovan hct)				
valsartan-hydrochlorothiazide tab 320-12.5 mg (Diovan hct)				
valsartan-hydrochlorothiazide tab 320-25 mg (Diovan hct)				
BETA BLOCKERS AND COMBINATIONS				
acebutolol hcl cap 200 mg (Sectral)				
acebutolol hcl cap 400 mg (Sectral)				
atenolol & chlorthalidone tab 50-25 mg (Tenoretic 50)				
atenolol & chlorthalidone tab 100-25 mg (Tenoretic 100)				
atenolol tab 25 mg (Tenormin)				
atenolol tab 50 mg (Tenormin)				
atenolol tab 100 mg (Tenormin)				
bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg (Ziac)				
bisoprolol & hydrochlorothiazide tab 5-6.25 mg (Ziac)				
bisoprolol & hydrochlorothiazide tab 10-6.25 mg (Ziac)				
bisoprolol fumarate tab 5 mg (Zebeta)				
carvedilol tab 3.125 mg (Coreg)				
carvedilol tab 6.25 mg (Coreg)				
carvedilol tab 12.5 mg (Coreg)				
carvedilol tab 25 mg (Coreg)				
INNOPRAN XL – propranolol hcl sustained-release beads cap sr 24hr 80 mg				
INNOPRAN XL – propranolol hcl sustained-release beads cap sr 24hr 120 mg				
metoprolol succinate tab sr 24hr 25 mg (tartrate equiv) (Toprol xl)				

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
metoprolol succinate tab sr 24hr 50 mg (tartrate equiv) (Toprol xl)				
metoprolol tartrate tab 25 mg				
metoprolol tartrate tab 50 mg (Lopressor)				
metoprolol tartrate tab 100 mg (Lopressor)				
PROPRANOLOL HCL – propranolol hcl oral soln 20 mg/5ml				
PROPRANOLOL HCL – propranolol hcl oral soln 40 mg/5ml				
propranolol hcl tab 10 mg				
propranolol hcl tab 20 mg				
propranolol hcl tab 40 mg				
propranolol hcl tab 80 mg				
TIMOLOL MALEATE – timolol maleate tab 5 mg				
TIMOLOL MALEATE – timolol maleate tab 10 mg				
TIMOLOL MALEATE – timolol maleate tab 20 mg				
CALCIUM CHANNEL BLOCKERS AND COMBINATIONS				
amlodipine besylate tab 2.5 mg (Norvasc)				
amlodipine besylate tab 5 mg (Norvasc)				
amlodipine besylate tab 10 mg (Norvasc)				
diltiazem hcl cap sr 24hr 120 mg				
diltiazem hcl coated beads cap sr 24hr 120 mg (Cardizem cd)				
diltiazem hcl coated beads cap sr 24hr 180 mg (Cardizem cd)				
diltiazem hcl tab 30 mg (Cardizem)				
diltiazem hcl tab 60 mg (Cardizem)				

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
diltiazem hcl tab 90 mg				
diltiazem hcl tab 120 mg (Cardizem)				
nifedipine tab sr 24hr 30 mg (Adalat cc)				
nifedipine tab sr 24hr osmotic release 30 mg (Procardia xl)				
verapamil hcl tab cr 120 mg (Calan sr)				
verapamil hcl tab cr 180 mg (Calan sr)				
verapamil hcl tab cr 240 mg (Calan sr)				
verapamil hcl tab 80 mg (Calan)				
verapamil hcl tab 120 mg (Calan)				
CHEST PAIN				
isosorbide mononitrate tab sr 24hr 30 mg (Imdur)				
isosorbide mononitrate tab sr 24hr 60 mg (Imdur)				
isosorbide mononitrate tab 10 mg				
isosorbide mononitrate tab 20 mg				
nitroglycerin cap cr 2.5 mg				
NITROSTAT – nitroglycerin sl tab 0.3 mg				
NITROSTAT – nitroglycerin sl tab 0.4 mg				
NITROSTAT – nitroglycerin sl tab 0.6 mg				
CHOLESTEROL LOWERING				
atorvastatin calcium tab 10 mg (base equivalent) (Lipitor)				
atorvastatin calcium tab 20 mg (base equivalent) (Lipitor)				
atorvastatin calcium tab 40 mg (base equivalent) (Lipitor)				

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
atorvastatin calcium tab 80 mg (base equivalent) (Lipitor)				
CRESTOR – rosuvastatin calcium tab 5 mg				
CRESTOR – rosuvastatin calcium tab 10 mg				
CRESTOR – rosuvastatin calcium tab 20 mg				
CRESTOR – rosuvastatin calcium tab 40 mg				
fenofibrate tab 54 mg (Lofibra)			•	
gemfibrozil tab 600 mg (Lopid)			•	
lovastatin tab 10 mg				
lovastatin tab 20 mg (Mevacor)				
lovastatin tab 40 mg (Mevacor)				
PRALUENT – alirocumab subcutaneous soln pen-injector 75 mg/ml	•	•	•	
PRALUENT – alirocumab subcutaneous soln pen-injector 150 mg/ml	•	•	•	
PRALUENT – alirocumab subcutaneous soln prefilled syringe 75 mg/ml	•	•	•	
PRALUENT – alirocumab subcutaneous soln prefilled syringe 150 mg/ml	•	•	•	
pravastatin sodium tab 10 mg				
pravastatin sodium tab 20 mg (Pravachol)				
pravastatin sodium tab 40 mg (Pravachol)				
REPATHA – evolocumab subcutaneous soln prefilled syringe 140 mg/ml	•	•	•	
REPATHA PUSHTRONEX SYSTEM – evolocumab subcutaneous soln cartridge/infusor 420 mg/3.5ml	•	•	•	

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
REPATHA SURECLICK – evolocumab subcutaneous soln auto-injector 140 mg/ml	•	•	•	
simvastatin tab 5 mg (Zocor)				
simvastatin tab 10 mg (Zocor)				
simvastatin tab 20 mg (Zocor)				
simvastatin tab 40 mg (Zocor)				
simvastatin tab 80 mg (Zocor)				
WELCHOL – colesevelam hcl tab 625 mg				
WELCHOL – colesevelam hcl packet for susp 3.75 gm				
FLUID RETENTION				
amiloride & hydrochlorothiazide tab 5-50 mg				
bumetanide tab 0.5 mg				
bumetanide tab 1 mg				
chlorothiazide tab 500 mg				
furosemide oral soln 10 mg/ml				
furosemide tab 20 mg (Lasix)				
furosemide tab 40 mg (Lasix)				
furosemide tab 80 mg (Lasix)				
hydrochlorothiazide cap 12.5 mg (Microzide)				
hydrochlorothiazide tab 12.5 mg				
hydrochlorothiazide tab 25 mg				
hydrochlorothiazide tab 50 mg				
indapamide tab 1.25 mg				
indapamide tab 2.5 mg				
spironolactone tab 25 mg (Aldactone)				
spironolactone tab 50 mg (Aldactone)				
torsemide tab 5 mg (Demadex)				
torsemide tab 10 mg (Demadex)				
torsemide tab 20 mg (Demadex)				

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
triamterene & hydrochlorothiazide cap 37.5-25 mg (Dyazide)				
triamterene & hydrochlorothiazide tab 37.5-25 mg (Maxzide-25)				
triamterene & hydrochlorothiazide tab 75-50 mg (Maxzide)				
HEART RHYTHM				
amiodarone hcl tab 200 mg (Cordarone)				
MULTAQ – dronedarone hcl tab 400 mg (base equivalent)				
sotalol hcl tab 80 mg (Betapace)				
sotalol hcl tab 120 mg (Betapace)				
sotalol hcl tab 160 mg (Betapace)				
OTHER HEART RELATED DRUGS				
ADCIRCA – tadalafil tab 20 mg (pah)	•	•	•	
clonidine hcl tab 0.1 mg (Catapres)				
clonidine hcl tab 0.2 mg (Catapres)				
clonidine hcl tab 0.3 mg (Catapres)				
DIBENZYLINE – phenoxybenzamine hcl cap 10 mg				
doxazosin mesylate tab 1 mg (Cardura)				
doxazosin mesylate tab 2 mg (Cardura)				
doxazosin mesylate tab 4 mg (Cardura)				
doxazosin mesylate tab 8 mg (Cardura)				
guanfacine hcl tab 1 mg (Tenex)				
guanfacine hcl tab 2 mg (Tenex)				
hydralazine hcl tab 10 mg				
hydralazine hcl tab 25 mg				
hydralazine hcl tab 50 mg				
LETAIRIS – ambrisentan tab 5 mg	•	•	•	

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
LETAIRIS – ambrisentan tab 10 mg	•	•	•	
methyldopa tab 250 mg				
methyldopa tab 500 mg				
minoxidil tab 2.5 mg				
minoxidil tab 10 mg				
OPSUMIT – macitentan tab 10 mg	•	•	•	
prazosin hcl cap 1 mg (Minipress)				
prazosin hcl cap 2 mg (Minipress)				
terazosin hcl cap 1 mg				
terazosin hcl cap 2 mg				
terazosin hcl cap 5 mg				
terazosin hcl cap 10 mg				
TRACLEER – bosentan tab 62.5 mg	•	•	•	
TRACLEER – bosentan tab 125 mg	•	•	•	
UPTRAVI – selexipag tab therapy pack 200 mcg (140) & 800 mcg (60)	•	•	•	
UPTRAVI – selexipag tab 200 mcg	•	•	•	
UPTRAVI – selexipag tab 400 mcg	•	•	•	
UPTRAVI – selexipag tab 600 mcg	•	•	•	
UPTRAVI – selexipag tab 800 mcg	•	•	•	
UPTRAVI – selexipag tab 1000 mcg	•	•	•	
UPTRAVI – selexipag tab 1200 mcg	•	•	•	
UPTRAVI – selexipag tab 1400 mcg	•	•	•	
UPTRAVI – selexipag tab 1600 mcg	•	•	•	
ERECTILE DYSFUNCTION				
CIALIS – tadalafil tab 2.5 mg		•	•	
CIALIS – tadalafil tab 5 mg		•	•	
CIALIS – tadalafil tab 10 mg		•	•	
CIALIS – tadalafil tab 20 mg		•	•	
BEE STING KITS				
EPIPEN 2-PAK – epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)				
EPIPEN-JR 2-PAK – epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)				
RESPIRATORY AGENTS				
ANTIHISTAMINES				
clemastine fumarate tab 2.68 mg				
promethazine hcl syrup 6.25 mg/5ml				
promethazine hcl tab 12.5 mg				
promethazine hcl tab 25 mg				
promethazine hcl tab 50 mg				
NASAL PRODUCTS				
ASTEPRO – azelastine hcl nasal spray 0.15% (205.5 mcg/spray)			•	
fluticasone propionate nasal susp 50 mcg/act (Flonase)			•	
NASONEX – mometasone furoate nasal susp 50 mcg/act			•	
COUGH/COLD/ALLERGY				
benzonatate cap 100 mg (Tessalon perles)				
benzonatate cap 200 mg				
brompheniramine & pseudoephedrine tab sr 12hr 6-45 mg				
phenylephrine-promethazine w/ codeine syrup 5-6.25-10 mg/5ml				
promethazine & phenylephrine syrup 6.25-5 mg/5ml				
promethazine w/ codeine syrup 6.25-10 mg/5ml				
promethazine-dm syrup 6.25-15 mg/5ml				
sodium chloride soln nebu 0.9%				
ASTHMA/COPD				

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
ADVAIR DISKUS – fluticasone-salmeterol aer powder ba 100-50 mcg/dose			•	
ADVAIR DISKUS – fluticasone-salmeterol aer powder ba 250-50 mcg/dose			•	
ADVAIR DISKUS – fluticasone-salmeterol aer powder ba 500-50 mcg/dose			•	
ADVAIR HFA – fluticasone-salmeterol inhal aerosol 45-21 mcg/act			•	
ADVAIR HFA – fluticasone-salmeterol inhal aerosol 115-21 mcg/act			•	
ADVAIR HFA – fluticasone-salmeterol inhal aerosol 230-21 mcg/act			•	
albuterol sulfate syrup 2 mg/5ml				
ANORO ELLIPTA – umeclidinium-vilanterol aero powd ba 62.5-25 mcg/inh			•	
ARNUITY ELLIPTA – fluticasone furoate aerosol powder breath activ 100 mcg/act			•	
ARNUITY ELLIPTA – fluticasone furoate aerosol powder breath activ 200 mcg/act			•	
ASMANEX HFA – mometasone furoate inhal aerosol suspension 100 mcg/act			•	
ASMANEX HFA – mometasone furoate inhal aerosol suspension 200 mcg/act			•	
ASMANEX TWISTHALER 120 ME – mometasone furoate inhal powd 220 mcg/inh (breath activated)			•	
ASMANEX TWISTHALER 14 MET – mometasone furoate inhal powd 220 mcg/inh (breath activated)			•	
ASMANEX TWISTHALER 30 MET – mometasone furoate inhal powd 110 mcg/inh (breath activated)			•	

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
ASMANEX TWISTHALER 30 MET – mometasone furoate inhal powd 220 mcg/inh (breath activated)			•	
ASMANEX TWISTHALER 60 MET – mometasone furoate inhal powd 220 mcg/inh (breath activated)			•	
ASMANEX TWISTHALER 7 METE – mometasone furoate inhal powd 110 mcg/inh (breath activated)			•	
ATROVENT HFA – ipratropium bromide hfa inhal aerosol 17 mcg/act			•	
BREO ELLIPTA – fluticasone furoate-vilanterol aero powd ba 100-25 mcg/inh			•	
BREO ELLIPTA – fluticasone furoate-vilanterol aero powd ba 200-25 mcg/inh			•	
COMBIVENT RESPIMAT – ipratropium-albuterol inhal aerosol soln 20-100 mcg/act			•	
DULERA – mometasone furoate-formoterol fumarate aerosol 100-5 mcg/act			•	
DULERA – mometasone furoate-formoterol fumarate aerosol 200-5 mcg/act			•	
FLOVENT DISKUS – fluticasone propionate aer pow ba 50 mcg/blister			•	
FLOVENT DISKUS – fluticasone propionate aer pow ba 100 mcg/blister			•	
FLOVENT DISKUS – fluticasone propionate aer pow ba 250 mcg/blister			•	
FLOVENT HFA – fluticasone propionate hfa inhal aero 44 mcg/act (50/valve)			•	

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
FLOVENT HFA – fluticasone propionate hfa inhal aer 110 mcg/act (125/valve)			•	
FLOVENT HFA – fluticasone propionate hfa inhal aer 220 mcg/act (250/valve)			•	
INCRUSE ELLIPTA – umeclidinium br aero powd breath act 62.5 mcg/inh (base eq)			•	
ipratropium bromide inhal soln 0.02%			•	
montelukast sodium chew tab 4 mg (base equiv) (Singulair)				
montelukast sodium chew tab 5 mg (base equiv) (Singulair)				
montelukast sodium tab 10 mg (base equiv) (Singulair)				
PROAIR HFA – albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)			•	
PROAIR RESPICLICK – albuterol sulfate aer pow ba 108 mcg/act (90 mcg base equiv)			•	
QVAR – beclomethasone diprop inhal aero soln 40 mcg/act (50/valve)			•	
QVAR – beclomethasone diprop inhal aero soln 80 mcg/act (100/valve)			•	
SEREVENT DISKUS – salmeterol xinafoate aer pow ba 50 mcg/dose (base equiv)			•	
SPIRIVA HANDIHALER – tiotropium bromide monohydrate inhal cap 18 mcg (base equiv)			•	
SPIRIVA RESPIMAT – tiotropium bromide monohydrate inhal aerosol 1.25 mcg/act			•	
SPIRIVA RESPIMAT – tiotropium bromide monohydrate inhal aerosol 2.5 mcg/act			•	

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
SYMBICORT – budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act			•	
SYMBICORT – budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act			•	
theophylline tab sr 12hr 100 mg				
VENTOLIN HFA – albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)			•	
OTHER RESPIRATORY DRUGS				
KALYDECO – ivacaftor tab 150 mg	•	•	•	
KALYDECO – ivacaftor packet 50 mg	•	•	•	
KALYDECO – ivacaftor packet 75 mg	•	•	•	
PULMOZYME – dornase alfa inhal soln 1 mg/ml	•			
GASTROINTESTINAL DRUGS				
LAXATIVES				
lactulose solution 10 gm/15ml				
peg 3350-kcl-sod bicarb-nacl for soln 420 gm (Nulytely/flavor pack)				
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm (Golytely)				
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm (Colyte-flavor packs)				
polyethylene glycol 3350 oral powder				
ULCER/GERD				
cimetidine tab 300 mg				
cimetidine tab 400 mg				
dicyclomine hcl cap 10 mg (Bentyl)				
dicyclomine hcl tab 20 mg (Bentyl)				
DONNATAL – pb-hyoscy-atrop-scopol tab 16.2-0.1037-0.0194-0.0065 mg				
famotidine tab 40 mg (Pepcid)				

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
hyoscyamine sulfate elixir 0.125 mg/5ml				
misoprostol tab 100 mcg (Cytotec)				
misoprostol tab 200 mcg (Cytotec)				
NEXIUM – esomeprazole magnesium for delayed release susp pack 2.5 mg			•	
NEXIUM – esomeprazole magnesium for delayed release susp packet 5 mg			•	
NEXIUM – esomeprazole magnesium for delayed release susp packet 10 mg			•	
NEXIUM – esomeprazole magnesium for delayed release susp packet 20 mg			•	
NEXIUM – esomeprazole magnesium for delayed release susp packet 40 mg			•	
nizatidine cap 150 mg				
omeprazole cap delayed release 10 mg (Prilosec)			•	
omeprazole cap delayed release 20 mg (Prilosec)			•	
omeprazole cap delayed release 40 mg (Prilosec)			•	
pantoprazole sodium ec tab 20 mg (base equiv) (Protonix)			•	
pantoprazole sodium ec tab 40 mg (base equiv) (Protonix)			•	
ranitidine hcl syrup 15 mg/ml (75 mg/5ml)				
ranitidine hcl tab 300 mg (Zantac)				
NAUSEA AND VOMITING				
EMEND – aprepitant for oral susp 125 mg (125 mg/5ml)			•	
EMEND – aprepitant capsule therapy pack 80 & 125 mg			•	
EMEND – aprepitant capsule 40 mg			•	
EMEND – aprepitant capsule 80 mg			•	
EMEND – aprepitant capsule 125 mg			•	
ondansetron hcl tab 4 mg (Zofran)			•	
ondansetron orally disintegrating tab 4 mg (Zofran odt)			•	
DIGESTIVE ENZYMES				
CREON – pancrelipase (lip-prot-amyl) dr cap 3000-9500-15000 unit				
CREON – pancrelipase (lip-prot-amyl) dr cap 6000-19000-30000 unit				
CREON – pancrelipase (lip-prot-amyl) dr cap 12000-38000-60000 unit				
CREON – pancrelipase (lip-prot-amyl) dr cap 24000-76000-120000 unit				
CREON – pancrelipase (lip-prot-amyl) dr cap 36000-114000-180000 unit				
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 3000-10000-16000 unit				
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 5000-17000-27000 unit				
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 10000-34000-55000 unit				
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 15000-51000-82000 unit				
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 20000-68000-109000 unit				
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 25000-85000-136000 unit				
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 40000-136000-218000 unit				
OTHER GASTROINTESTINAL DRUGS				
ASACOL HD – mesalamine tab delayed release 800 mg				
CANASA – mesalamine suppos 1000 mg				
CHENODAL – chenodiol tab 250 mg	•			

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
DELZICOL – mesalamine cap dr 400 mg				
lactulose (encephalopathy) solution 10 gm/15ml				
LIALDA – mesalamine tab delayed release 1.2 gm				
LINZESS – linaclotide cap 145 mcg				
LINZESS – linaclotide cap 290 mcg				
metoclopramide hcl soln 5 mg/5ml (10 mg/10ml)				
metoclopramide hcl tab 5 mg (Reglan)				
metoclopramide hcl tab 10 mg (Reglan)				
PENTASA – mesalamine cap cr 250 mg				
PENTASA – mesalamine cap cr 500 mg				
RENVELA – sevelamer carbonate tab 800 mg				
RENVELA – sevelamer carbonate packet 0.8 gm				
RENVELA – sevelamer carbonate packet 2.4 gm				
VELPHORO – sucroferric oxyhydroxide chew tab 500 mg				
GENITOURINARY DRUGS				
URINARY TRACT SPASMS				
bethanechol chloride tab 5 mg (Urecholine)				
oxybutynin chloride syrup 5 mg/5ml				
VESICARE – solifenacin succinate tab 5 mg				
VESICARE – solifenacin succinate tab 10 mg				
VAGINAL PRODUCTS				

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
CLEOCIN – clindamycin phosphate vaginal suppos 100 mg				
CRINONE – progesterone vaginal gel 4%			•	
CRINONE – progesterone vaginal gel 8%			•	
ESTRACE – estradiol vaginal cream 0.1 mg/gm				
VAGIFEM – estradiol vaginal tab 10 mcg				
OTHER GENITOURINARY DRUGS				
alfuzosin hcl tab sr 24hr 10 mg (Uroxatral)				
AVODART – dutasteride cap 0.5 mg				
CYSTAGON – cysteamine bitartrate cap 50 mg	•			
CYSTAGON – cysteamine bitartrate cap 150 mg	•			
finasteride tab 5 mg (Proscar)				
phenazopyridine hcl tab 100 mg (Pyridium)				
phenazopyridine hcl tab 200 mg (Pyridium)				
tamsulosin hcl cap 0.4 mg (Flomax)				
CENTRAL NERVOUS SYSTEM DRUGS				
ANXIETY				
alprazolam tab 0.25 mg (Xanax)				
alprazolam tab 0.5 mg (Xanax)				
alprazolam tab 1 mg (Xanax)				
alprazolam tab 2 mg (Xanax)				
buspirone hcl tab 5 mg				
buspirone hcl tab 10 mg				
buspirone hcl tab 15 mg				
chlordiazepoxide hcl cap 5 mg				
chlordiazepoxide hcl cap 10 mg				

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
chlordiazepoxide hcl cap 25 mg				
clorazepate dipotassium tab 3.75 mg (Tranxene t)				
clorazepate dipotassium tab 7.5 mg (Tranxene t)				
DIAZEPAM – diazepam oral soln 1 mg/ml				
diazepam tab 2 mg (Valium)				
diazepam tab 5 mg (Valium)				
diazepam tab 10 mg (Valium)				
hydroxyzine hcl syrup 10 mg/5ml				
hydroxyzine hcl tab 10 mg				
hydroxyzine hcl tab 25 mg				
hydroxyzine hcl tab 50 mg				
hydroxyzine pamoate cap 25 mg (Vistaril)				
hydroxyzine pamoate cap 50 mg (Vistaril)				
lorazepam tab 0.5 mg (Ativan)				
lorazepam tab 1 mg (Ativan)				
lorazepam tab 2 mg (Ativan)				
DEPRESSION				
amitriptyline hcl tab 10 mg				
amitriptyline hcl tab 25 mg				
amitriptyline hcl tab 50 mg				
amitriptyline hcl tab 75 mg				
amitriptyline hcl tab 100 mg				
bupropion hcl tab sr 12hr 100 mg (Wellbutrin sr)				
bupropion hcl tab sr 12hr 150 mg (Wellbutrin sr)				
citalopram hydrobromide tab 10 mg (base equiv) (Celexa)				
citalopram hydrobromide tab 20 mg (base equiv) (Celexa)				

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
citalopram hydrobromide tab 40 mg (base equiv) (Celexa)				
doxepin hcl cap 10 mg				
doxepin hcl cap 25 mg				
doxepin hcl conc 10 mg/ml				
escitalopram oxalate tab 5 mg (base equiv) (Lexapro)				
escitalopram oxalate tab 10 mg (base equiv) (Lexapro)				
escitalopram oxalate tab 20 mg (base equiv) (Lexapro)				
fluoxetine hcl cap 10 mg (Prozac)				
fluoxetine hcl cap 20 mg (Prozac)				
fluoxetine hcl cap 40 mg (Prozac)				
fluoxetine hcl solution 20 mg/5ml				
fluoxetine hcl tab 10 mg				
imipramine hcl tab 10 mg (Tofranil)				
imipramine hcl tab 25 mg (Tofranil)				
imipramine hcl tab 50 mg (Tofranil)				
mirtazapine tab 15 mg (Remeron)				
mirtazapine tab 30 mg (Remeron)				
mirtazapine tab 45 mg (Remeron)				
nortriptyline hcl cap 10 mg (Pamelor)				
nortriptyline hcl cap 25 mg (Pamelor)				
nortriptyline hcl cap 50 mg (Pamelor)				
nortriptyline hcl cap 75 mg (Pamelor)				
paroxetine hcl tab 10 mg (Paxil)				
paroxetine hcl tab 20 mg (Paxil)				
paroxetine hcl tab 30 mg (Paxil)				
paroxetine hcl tab 40 mg (Paxil)				
sertraline hcl tab 25 mg (Zoloft)				
sertraline hcl tab 50 mg (Zoloft)				
sertraline hcl tab 100 mg (Zoloft)				
trazodone hcl tab 50 mg				

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
trazodone hcl tab 100 mg				
trazodone hcl tab 150 mg				
venlafaxine hcl cap sr 24hr 37.5 mg (base equivalent) (Effexor xr)				
venlafaxine hcl cap sr 24hr 75 mg (base equivalent) (Effexor xr)				
venlafaxine hcl cap sr 24hr 150 mg (base equivalent) (Effexor xr)				
PSYCHOTIC AND BIPOLAR DISORDERS				
FLUPHENAZINE HCL – fluphenazine hcl elixir 2.5 mg/5ml				
FLUPHENAZINE HCL – fluphenazine hcl oral conc 5 mg/ml				
fluphenazine hcl tab 1 mg				
fluphenazine hcl tab 2.5 mg				
fluphenazine hcl tab 5 mg				
fluphenazine hcl tab 10 mg				
haloperidol lactate oral conc 2 mg/ml				
haloperidol tab 0.5 mg				
haloperidol tab 1 mg				
haloperidol tab 2 mg				
lithium carbonate cap 150 mg (Lithium carbonate)				
lithium carbonate cap 300 mg				
lithium carbonate cap 600 mg (Lithium carbonate)				
lithium carbonate tab 300 mg				
olanzapine tab 2.5 mg (Zyprexa)			•	
olanzapine tab 5 mg (Zyprexa)			•	
olanzapine tab 7.5 mg (Zyprexa)			•	
olanzapine tab 10 mg (Zyprexa)			•	
prochlorperazine maleate tab 5 mg (base equivalent) (Compazine)				
prochlorperazine maleate tab 10 mg (base equivalent) (Compazine)				

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
quetiapine fumarate tab 25 mg (Seroquel)			•	
quetiapine fumarate tab 50 mg (Seroquel)			•	
quetiapine fumarate tab 100 mg (Seroquel)			•	
risperidone tab 0.25 mg (Risperdal)			•	
risperidone tab 0.5 mg (Risperdal)			•	
risperidone tab 1 mg (Risperdal)			•	
risperidone tab 2 mg (Risperdal)			•	
risperidone tab 3 mg (Risperdal)			•	
risperidone tab 4 mg (Risperdal)			•	
SEROQUEL XR – quetiapine fumarate tab sr 24hr 50 mg			•	
SEROQUEL XR – quetiapine fumarate tab sr 24hr 150 mg			•	
SEROQUEL XR – quetiapine fumarate tab sr 24hr 200 mg			•	
SEROQUEL XR – quetiapine fumarate tab sr 24hr 300 mg			•	
SEROQUEL XR – quetiapine fumarate tab sr 24hr 400 mg			•	
SLEEP AIDS				
estazolam tab 1 mg				
estazolam tab 2 mg				
phenobarbital tab 16.2 mg				
phenobarbital tab 32.4 mg				
temazepam cap 15 mg (Restoril)				
temazepam cap 30 mg (Restoril)				
zaleplon cap 5 mg (Sonata)			•	
zaleplon cap 10 mg (Sonata)			•	
zolpidem tartrate tab 5 mg (Ambien)			•	
zolpidem tartrate tab 10 mg (Ambien)			•	
HYPERACTIVITY/NARCOLEPSY				

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
VYVANSE – lisdexamfetamine dimesylate cap 10 mg			•	
VYVANSE – lisdexamfetamine dimesylate cap 20 mg			•	
VYVANSE – lisdexamfetamine dimesylate cap 30 mg			•	
VYVANSE – lisdexamfetamine dimesylate cap 40 mg			•	
VYVANSE – lisdexamfetamine dimesylate cap 50 mg			•	
VYVANSE – lisdexamfetamine dimesylate cap 60 mg			•	
VYVANSE – lisdexamfetamine dimesylate cap 70 mg			•	
MULTIPLE SCLEROSIS				
BETASERON – interferon beta-1b for inj kit 0.3 mg	•		•	
COPAXONE – glatiramer acetate soln prefilled syringe 20 mg/ml	•		•	
COPAXONE – glatiramer acetate soln prefilled syringe 40 mg/ml	•		•	
PLEGRIDY – peginterferon beta-1a soln pen-injector 125 mcg/0.5ml	•		•	
PLEGRIDY – peginterferon beta-1a soln prefilled syringe 125 mcg/0.5ml	•		•	
PLEGRIDY STARTER PACK – peginterferon beta-1a soln pen-inj 63 & 94 mcg/0.5ml pack	•		•	
PLEGRIDY STARTER PACK – peginterferon beta-1a soln pref syr 63 & 94 mcg/0.5ml pack	•		•	
REBIF – interferon beta-1a soln pref syr 22 mcg/0.5ml (12mu/ml)	•		•	
REBIF – interferon beta-1a soln pref syr 44 mcg/0.5ml (24mu/ml)	•		•	
REBIF REBIDOSE – interferon beta-1a soln auto-inj 22 mcg/0.5ml (12mu/ml)	•		•	
REBIF REBIDOSE – interferon beta-1a soln auto-inj 44 mcg/0.5ml (24mu/ml)	•		•	
REBIF REBIDOSE TITRATION – interferon beta-1a auto-inj 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml	•		•	
REBIF TITRATION PACK – interferon beta-1a pref syr 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml	•		•	
TECFIDERA – dimethyl fumarate capsule delayed release 120 mg	•		•	
TECFIDERA – dimethyl fumarate capsule delayed release 240 mg	•		•	
TECFIDERA STARTER PACK – dimethyl fumarate capsule dr starter pack 120 mg & 240 mg	•		•	
OTHER CENTRAL NERVOUS SYSTEM DRUGS				
CHANTIX – varenicline tartrate tab 0.5 mg (base equiv)				
CHANTIX – varenicline tartrate tab 1 mg (base equiv)				
CHANTIX CONTINUING MONTH – varenicline tartrate tab 1 mg (base equiv)				
CHANTIX STARTING MONTH PA – varenicline tartrate tab 0.5 mg x 11 & tab 1 mg x 42 pack				
donepezil hydrochloride tab 5 mg (Aricept)				
donepezil hydrochloride tab 10 mg (Aricept)				
EXELON – rivastigmine td patch 24hr 4.6 mg/24hr				
EXELON – rivastigmine td patch 24hr 9.5 mg/24hr				
EXELON – rivastigmine td patch 24hr 13.3 mg/24hr				
NICOTROL INHALER – nicotine inhaler system 10 mg (4 mg delivered)				

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
NICOTROL NS – nicotine nasal spray 10 mg/ml (0.5 mg/spray)				
NUEDEXTA – dextromethorphan hbr-quinidine sulfate cap 20-10 mg				
ORAP – pimozide tab 1 mg				
ORAP – pimozide tab 2 mg				
PAIN RELIEF DRUGS				
NARCOTIC DRUGS				
acetaminophen w/ codeine soln 120-12 mg/5ml				
acetaminophen w/ codeine tab 300-15 mg (Tylenol/codeine)				
acetaminophen w/ codeine tab 300-30 mg (Tylenol/codeine #3)				
acetaminophen w/ codeine tab 300-60 mg (Tylenol/codeine #4)				
hydrocodone-acetaminophen tab 10-325 mg (Norco)				
hydrocodone-acetaminophen tab 5-325 mg (Norco)				
hydrocodone-acetaminophen tab 7.5-325 mg (Norco)				
hydrocodone-ibuprofen tab 7.5-200 mg (Vicoprofen)				
hydromorphone hcl tab 2 mg (Dilaudid)				
hydromorphone hcl tab 4 mg (Dilaudid)				
KADIAN – morphine sulfate cap sr 24hr 10 mg			•	
KADIAN – morphine sulfate cap sr 24hr 20 mg			•	
KADIAN – morphine sulfate cap sr 24hr 30 mg			•	
KADIAN – morphine sulfate cap sr 24hr 40 mg			•	

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
KADIAN – morphine sulfate cap sr 24hr 50 mg			•	
KADIAN – morphine sulfate cap sr 24hr 60 mg			•	
KADIAN – morphine sulfate cap sr 24hr 80 mg			•	
KADIAN – morphine sulfate cap sr 24hr 100 mg			•	
KADIAN – morphine sulfate cap sr 24hr 200 mg			•	
methadone hcl tab for oral susp 40 mg				
methadone hcl tab 5 mg (Dolophine hcl)				
methadone hcl tab 10 mg (Dolophine)				
MORPHINE SULFATE – morphine sulfate tab 15 mg				
MORPHINE SULFATE – morphine sulfate tab 30 mg				
MORPHINE SULFATE – morphine sulfate suppos 5 mg				
MORPHINE SULFATE – morphine sulfate suppos 10 mg				
MORPHINE SULFATE – morphine sulfate suppos 20 mg				
MORPHINE SULFATE – morphine sulfate suppos 30 mg				
NUCYNTA ER – tapentadol hcl tab sr 12hr 50 mg			•	
NUCYNTA ER – tapentadol hcl tab sr 12hr 100 mg			•	
NUCYNTA ER – tapentadol hcl tab sr 12hr 150 mg			•	
NUCYNTA ER – tapentadol hcl tab sr 12hr 200 mg			•	
NUCYNTA ER – tapentadol hcl tab sr 12hr 250 mg			•	

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
oxycodone hcl tab 5 mg (Roxicodone)				
oxycodone w/ acetaminophen tab 5-325 mg (Percocet)				
OXYCONTIN – oxycodone hcl tab er 12hr deter 10 mg			•	
OXYCONTIN – oxycodone hcl tab er 12hr deter 15 mg			•	
OXYCONTIN – oxycodone hcl tab er 12hr deter 20 mg			•	
OXYCONTIN – oxycodone hcl tab er 12hr deter 30 mg			•	
OXYCONTIN – oxycodone hcl tab er 12hr deter 40 mg			•	
OXYCONTIN – oxycodone hcl tab er 12hr deter 60 mg			•	
OXYCONTIN – oxycodone hcl tab er 12hr deter 80 mg			•	
tramadol hcl tab 50 mg (Ultram)			•	
tramadol-acetaminophen tab 37.5-325 mg (Ultracet)				
RHEUMATOID AND OSTEOARTHRITIS				
diclofenac sodium tab delayed release 50 mg				
diclofenac sodium tab delayed release 75 mg				
ENBREL – etanercept for subcutaneous inj 25 mg	•		•	•
ENBREL – etanercept subcutaneous soln prefilled syringe 25 mg/0.5ml	•		•	•
ENBREL – etanercept subcutaneous soln prefilled syringe 50 mg/ml	•		•	•
ENBREL SURECLICK – etanercept subcutaneous solution auto-injector 50 mg/ml	•		•	•
flurbiprofen tab 50 mg				
flurbiprofen tab 100 mg				

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
HUMIRA – adalimumab prefilled syringe kit 10 mg/0.2ml	•		•	•
HUMIRA – adalimumab prefilled syringe kit 20 mg/0.4ml	•		•	•
HUMIRA – adalimumab prefilled syringe kit 40 mg/0.8ml	•		•	•
HUMIRA PEDIATRIC CROHNS D – adalimumab prefilled syringe kit 40 mg/0.8ml	•		•	•
HUMIRA PEN – adalimumab pen-injector kit 40 mg/0.8ml	•		•	•
HUMIRA PEN-CROHNS DISEASE – adalimumab pen-injector kit 40 mg/0.8ml	•		•	•
HUMIRA PEN-PSORIASIS STAR – adalimumab pen-injector kit 40 mg/0.8ml	•		•	•
ibuprofen tab 400 mg				
ibuprofen tab 600 mg				
ibuprofen tab 800 mg				
indomethacin cap 25 mg				
indomethacin cap 50 mg				
ketoprofen cap 50 mg				
ketoprofen cap 75 mg				
ketorolac tromethamine tab 10 mg			•	
meloxicam tab 7.5 mg (Mobic)				
meloxicam tab 15 mg (Mobic)				
nabumetone tab 500 mg				
nabumetone tab 750 mg				
naproxen sodium tab 275 mg (Anaprox)				
naproxen sodium tab 550 mg (Anaprox ds)				
naproxen tab ec 375 mg (Ec-naprosyn)				

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
naproxen tab ec 500 mg (Ec-naprosyn)				
naproxen tab 250 mg (Naprosyn)				
naproxen tab 375 mg (Naprosyn)				
naproxen tab 500 mg (Naprosyn)				
SIMPONI – golimumab subcutaneous soln auto-injector 50 mg/0.5ml	•		•	•
SIMPONI – golimumab subcutaneous soln auto-injector 100 mg/ml	•		•	•
SIMPONI – golimumab subcutaneous soln prefilled syringe 50 mg/0.5ml	•		•	•
SIMPONI – golimumab subcutaneous soln prefilled syringe 100 mg/ml	•		•	•
sulindac tab 150 mg				
sulindac tab 200 mg				
MIGRAINE HEADACHES				
IMITREX – sumatriptan nasal spray 5 mg/act			•	
IMITREX – sumatriptan nasal spray 20 mg/act			•	
MIGRANAL – dihydroergotamine mesylate nasal spray 4 mg/ml			•	
sumatriptan succinate tab 25 mg (Imitrex)			•	
sumatriptan succinate tab 50 mg (Imitrex)			•	
sumatriptan succinate tab 100 mg (Imitrex)			•	
GOUT				
allopurinol tab 100 mg (Zyloprim)				
allopurinol tab 300 mg (Zyloprim)				
COLCRYS – colchicine tab 0.6 mg				
NEUROMUSCULAR DRUGS				
SEIZURES				
CELONTIN – methsuximide cap 300 mg				

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
clonazepam tab 0.5 mg (Klonopin)				
clonazepam tab 1 mg (Klonopin)				
clonazepam tab 2 mg (Klonopin)				
DIASTAT ACUDIAL – diazepam rectal gel delivery system 10 mg				
DIASTAT ACUDIAL – diazepam rectal gel delivery system 20 mg				
DIASTAT PEDIATRIC – diazepam rectal gel delivery system 2.5 mg				
DILANTIN – phenytoin sodium extended cap 30 mg				
divalproex sodium tab delayed release 125 mg (Depakote)				
divalproex sodium tab delayed release 250 mg (Depakote)				
gabapentin cap 100 mg (Neurontin)				
gabapentin cap 300 mg (Neurontin)				
gabapentin cap 400 mg (Neurontin)				
GABITRIL – tiagabine hcl tab 12 mg				
GABITRIL – tiagabine hcl tab 16 mg				
lamotrigine tab 25 mg (Lamictal)				
lamotrigine tab 100 mg (Lamictal)				
lamotrigine tab 150 mg (Lamictal)				
lamotrigine tab 200 mg (Lamictal)				
levetiracetam tab 250 mg (Keppra)				
LYRICA – pregabalin cap 25 mg			•	
LYRICA – pregabalin cap 50 mg			•	
LYRICA – pregabalin cap 75 mg			•	
LYRICA – pregabalin cap 100 mg			•	
LYRICA – pregabalin cap 150 mg			•	
LYRICA – pregabalin cap 200 mg			•	
LYRICA – pregabalin cap 225 mg			•	
LYRICA – pregabalin cap 300 mg			•	
oxcarbazepine tab 150 mg (Trileptal)				

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
primidone tab 50 mg (Mysoline)				
SABRIL – vigabatrin tab 500 mg				
SABRIL – vigabatrin powd pack 500 mg				
TEGRETOL-XR – carbamazepine tab sr 12hr 100 mg				
topiramate tab 25 mg (Topamax)				
topiramate tab 50 mg (Topamax)				
topiramate tab 100 mg (Topamax)				
topiramate tab 200 mg (Topamax)				
zonisamide cap 25 mg (Zonegran)				
PARKINSON'S DISEASE				
amantadine hcl syrup 50 mg/5ml				
AZILECT – rasagiline mesylate tab 0.5 mg (base equiv)				
AZILECT – rasagiline mesylate tab 1 mg (base equiv)				
benztropine mesylate tab 0.5 mg				
benztropine mesylate tab 1 mg				
benztropine mesylate tab 2 mg				
carbidopa & levodopa tab 10-100 mg (Sinemet)				
pramipexole dihydrochloride tab 0.125 mg (Mirapex)				
pramipexole dihydrochloride tab 0.25 mg (Mirapex)				
pramipexole dihydrochloride tab 0.5 mg (Mirapex)				
pramipexole dihydrochloride tab 0.75 mg (Mirapex)				
pramipexole dihydrochloride tab 1 mg (Mirapex)				
pramipexole dihydrochloride tab 1.5 mg (Mirapex)				
ropinirole hydrochloride tab 0.25 mg (Requip)				

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
ropinirole hydrochloride tab 0.5 mg (Requip)				
ropinirole hydrochloride tab 1 mg (Requip)				
ropinirole hydrochloride tab 2 mg (Requip)				
ropinirole hydrochloride tab 3 mg (Requip)				
ropinirole hydrochloride tab 4 mg (Requip)				
ropinirole hydrochloride tab 5 mg (Requip)				
trihexyphenidyl hcl tab 2 mg				
trihexyphenidyl hcl tab 5 mg				
MUSCLE RELAXANTS				
baclofen tab 10 mg				
carisoprodol tab 350 mg (Soma)				
chlorzoxazone tab 500 mg (Parafon forte dsc)				
cyclobenzaprine hcl tab 5 mg				
cyclobenzaprine hcl tab 10 mg				
methocarbamol tab 500 mg (Robaxin)				
methocarbamol tab 750 mg (Robaxin-750)				
tizanidine hcl tab 2 mg (base equivalent)			•	
tizanidine hcl tab 4 mg (base equivalent) (Zanaflex)			•	
SUPPLEMENTS				
VITAMINS				
ergocalciferol cap 50000 unit (Drisdol)				
MEPHYTON – phytonadione tab 5 mg				
MULTIVITAMINS				
b-complex w/ c & folic acid cap 1 mg (Nephrocaps)				

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
b-complex w/ c & folic acid tab 1 mg (Nephro-vite rx)				
b-complex w/ c & folic acid tab 5 mg				
multiple vitamins w/ minerals & fa tab 1.25 mg (Corvite)				
pediatric multiple vitamins w/ fl-fe drops 0.25-10 mg/ml				
pediatric multiple vitamins w/ fluoride chew tab 0.25 mg				
pediatric multiple vitamins w/ fluoride chew tab 0.5 mg				
pediatric multiple vitamins w/ fluoride chew tab 1 mg				
pediatric multiple vitamins w/ fluoride soln 0.25 mg/ml				
pediatric multiple vitamins w/ fluoride soln 0.5 mg/ml				
pediatric vitamins acd w/ fluoride soln 0.25 mg/ml				
pediatric vitamins acd w/ fluoride soln 0.5 mg/ml				
PRENATABS FA – prenatal vit w/ fe fumarate-fa tab 29-1 mg				
PRENATAL PLUS – prenatal vit w/ fe fumarate-fa tab 27-1 mg				
PRENATAL VITAMINS PLUS LO – prenatal vit w/ fe fumarate-fa tab 27-1 mg				
PRENATAL 19 – prenatal vit w/ fe fumarate-fa chew tab 29-1 mg				
PRENATAL 19 – prenatal vit w/ dss-fe fumarate-fa tab 29-1 mg				
SE-NATAL 19 – prenatal vit w/ fe fumarate-fa chew tab 29-1 mg				
SE-NATAL 19 – prenatal vit w/ dss-fe fumarate-fa tab 29-1 mg				
MINERALS AND ELECTROLYTES				

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
K-PHOS – potassium phosphate monobasic tab 500 mg				
potassium chloride microencapsulated crys cr tab 10 meq				
potassium chloride microencapsulated crys cr tab 20 meq				
potassium chloride tab cr 8 meq (600 mg)				
potassium chloride tab cr 10 meq (K-tab)				
sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf) (Luride)				
sodium fluoride chew tab 0.5 mg f (from 1.1 mg naf) (Luride)				
sodium fluoride chew tab 1 mg f (from 2.2 mg naf) (Luride)				
sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf) (Luride)				
BLOOD MODIFYING DRUGS				
ADVATE – antihemophilic factor rahf-pfm for inj 250 unit	•			
ADVATE – antihemophilic factor rahf-pfm for inj 500 unit	•			
ADVATE – antihemophilic factor rahf-pfm for inj 1000 unit	•			
ADVATE – antihemophilic factor rahf-pfm for inj 1500 unit	•			
ADVATE – antihemophilic factor rahf-pfm for inj 2000 unit	•			
ADVATE – antihemophilic factor rahf-pfm for inj 3000 unit	•			
ADVATE – antihemophilic factor rahf-pfm for inj 4000 unit	•			
ADYNOVATE – antihemophilic factor recomb pegylated for inj 250 unit	•			

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
ADYNOVATE – antihemophilic factor recomb pegylated for inj 500 unit	•			
ADYNOVATE – antihemophilic factor recomb pegylated for inj 1000 unit	•			
ADYNOVATE – antihemophilic factor recomb pegylated for inj 2000 unit	•			
AFSTYLA – antihemophilic fact rcmb single chain for inj kit 250 unit	•			
AFSTYLA – antihemophilic fact rcmb single chain for inj kit 500 unit	•			
AFSTYLA – antihemophilic fact rcmb single chain for inj kit 1000 unit	•			
AFSTYLA – antihemophilic fact rcmb single chain for inj kit 2000 unit	•			
AFSTYLA – antihemophilic fact rcmb single chain for inj kit 3000 unit	•			
ALPHANATE/VON WILLEBRAND – antihemophilic factor/vwf (human) for inj 250 unit	•			
ALPHANATE/VON WILLEBRAND – antihemophilic factor/vwf (human) for inj 500 unit	•			
ALPHANATE/VON WILLEBRAND – antihemophilic factor/vwf (human) for inj 1000 unit	•			
ALPHANATE/VON WILLEBRAND – antihemophilic factor/vwf (human) for inj 1500 unit	•			
ALPHANATE/VON WILLEBRAND – antihemophilic factor/vwf (human) for inj 2000 unit	•			
ALPHANINE SD – coagulation factor ix for inj 500 unit	•			
ALPHANINE SD – coagulation factor ix for inj 1000 unit	•			
ALPHANINE SD – coagulation factor ix for inj 1500 unit	•			

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
ALPROLIX – coagulation factor ix (recomb) (rfixfc) for inj 250 unit	•			
ALPROLIX – coagulation factor ix (recomb) (rfixfc) for inj 500 unit	•			
ALPROLIX – coagulation factor ix (recomb) (rfixfc) for inj 1000 unit	•			
ALPROLIX – coagulation factor ix (recomb) (rfixfc) for inj 2000 unit	•			
ALPROLIX – coagulation factor ix (recomb) (rfixfc) for inj 3000 unit	•			
ARANESP ALBUMIN FREE – darbepoetin alfa soln prefilled syringe 10 mcg/0.4ml	•	•		
ARANESP ALBUMIN FREE – darbepoetin alfa soln prefilled syringe 25 mcg/0.42ml	•	•		
ARANESP ALBUMIN FREE – darbepoetin alfa soln prefilled syringe 40 mcg/0.4ml	•	•		
ARANESP ALBUMIN FREE – darbepoetin alfa soln prefilled syringe 60 mcg/0.3ml	•	•		
ARANESP ALBUMIN FREE – darbepoetin alfa soln prefilled syringe 100 mcg/0.5ml	•	•		
ARANESP ALBUMIN FREE – darbepoetin alfa soln prefilled syringe 150 mcg/0.3ml	•	•		
ARANESP ALBUMIN FREE – darbepoetin alfa soln prefilled syringe 200 mcg/0.4ml	•	•		
ARANESP ALBUMIN FREE – darbepoetin alfa soln prefilled syringe 300 mcg/0.6ml	•	•		
ARANESP ALBUMIN FREE – darbepoetin alfa soln prefilled syringe 500 mcg/ml	•	•		
ARANESP ALBUMIN FREE – darbepoetin alfa soln inj 25 mcg/ml	•	•		

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
ARANESP ALBUMIN FREE – darbepoetin alfa soln inj 40 mcg/ml	•	•		
ARANESP ALBUMIN FREE – darbepoetin alfa soln inj 60 mcg/ml	•	•		
ARANESP ALBUMIN FREE – darbepoetin alfa soln inj 100 mcg/ml	•	•		
ARANESP ALBUMIN FREE – darbepoetin alfa soln inj 200 mcg/ml	•	•		
ARANESP ALBUMIN FREE – darbepoetin alfa soln inj 300 mcg/ml	•	•		
BEBULIN – factor ix complex for inj 200-1200 unit	•			
BENEFIX – coagulation factor ix (recombinant) for inj 250 unit	•			
BENEFIX – coagulation factor ix (recombinant) for inj 500 unit	•			
BENEFIX – coagulation factor ix (recombinant) for inj 1000 unit	•			
BENEFIX – coagulation factor ix (recombinant) for inj 2000 unit	•			
BENEFIX – coagulation factor ix (recombinant) for inj 3000 unit	•			
BRILINTA – ticagrelor tab 60 mg				
BRILINTA – ticagrelor tab 90 mg				
cilostazol tab 50 mg (Pletal)				
cilostazol tab 100 mg (Pletal)				
clopidogrel bisulfate tab 75 mg (base equiv) (Plavix)				
COAGADEX – coagulation factor x (human) for inj 250 unit	•			
COAGADEX – coagulation factor x (human) for inj 500 unit	•			
CORIFACT – factor xiii concentrate (human) for inj kit 1000-1600 unit	•			
cyanocobalamin inj 1000 mcg/ml				
dipyridamole tab 25 mg (Persantine)				

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
DROXIA – hydroxyurea cap 200 mg				
DROXIA – hydroxyurea cap 300 mg				
DROXIA – hydroxyurea cap 400 mg				
ELIQUIS – apixaban tab 2.5 mg			•	
ELIQUIS – apixaban tab 5 mg			•	
ELOCTATE – antihemophilic factor (recomb) rfviiifc for inj 250 unit	•			
ELOCTATE – antihemophilic factor (recomb) rfviiifc for inj 500 unit	•			
ELOCTATE – antihemophilic factor (recomb) rfviiifc for inj 750 unit	•			
ELOCTATE – antihemophilic factor (recomb) rfviiifc for inj 1000 unit	•			
ELOCTATE – antihemophilic factor (recomb) rfviiifc for inj 1500 unit	•			
ELOCTATE – antihemophilic factor (recomb) rfviiifc for inj 2000 unit	•			
ELOCTATE – antihemophilic factor (recomb) rfviiifc for inj 3000 unit	•			
EPOGEN – epoetin alfa inj 2000 unit/ml	•	•		
EPOGEN – epoetin alfa inj 3000 unit/ml	•	•		
EPOGEN – epoetin alfa inj 4000 unit/ml	•	•		
EPOGEN – epoetin alfa inj 10000 unit/ml	•	•		
EPOGEN – epoetin alfa inj 20000 unit/ml	•	•		
fe fum-iron polysacch complex-fa-b cmplx-c-zn-mn-cu cap (Tandem plus)				
fe fumarate w/ b12-vit c-fa-ifc cap 110-0.015-75-0.5-240 mg				
FEIBA – antiinhibitor coagulant complex for inj	•			
ferrous fumarate-fa-b complex-c-zn-mg-mn-cu tab 106-1 mg				

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
ferrous fumarate-folic acid tab 324-1 mg				
FIRAZYR – icatibant acetate inj 30 mg/3ml (base equivalent)	•		•	
folic acid tab 1 mg				
folic acid-vitamin b6-vitamin b12 tab 2.2-25-0.5 mg				
folic acid-vitamin b6-vitamin b12 tab 2.2-25-1 mg (Folgard rx)				
folic acid-vitamin b6-vitamin b12 tab 2.5-25-1 mg				
HELIXATE FS – antihemophilic factor (recombinant) for inj kit 250 unit	•			
HELIXATE FS – antihemophilic factor (recombinant) for inj kit 500 unit	•			
HELIXATE FS – antihemophilic factor (recombinant) for inj kit 1000 unit	•			
HELIXATE FS – antihemophilic factor (recombinant) for inj kit 2000 unit	•			
HELIXATE FS – antihemophilic factor (recombinant) for inj kit 3000 unit	•			
HEMOFIL M – antihemophilic factor (human) for inj 250 unit	•			
HEMOFIL M – antihemophilic factor (human) for inj 500 unit	•			
HEMOFIL M – antihemophilic factor (human) for inj 1000 unit	•			
HEMOFIL M – antihemophilic factor (human) for inj 1700 unit	•			
HUMATE-P – antihemophilic factor/vwf (human) for inj 250-600 unit	•			
HUMATE-P – antihemophilic factor/vwf (human) for inj 500-1200 unit	•			
HUMATE-P – antihemophilic factor/vwf (human) for inj 1000-2400 unit	•			
IDELVION – coagulation factor ix (recomb) (rix-fp) for inj 250 unit	•			
IDELVION – coagulation factor ix (recomb) (rix-fp) for inj 500 unit	•			
IDELVION – coagulation factor ix (recomb) (rix-fp) for inj 1000 unit	•			
IDELVION – coagulation factor ix (recomb) (rix-fp) for inj 2000 unit	•			
iron combination cap				
iron polysacch complex-vit b12-fa cap 150-0.025-1 mg				
iron-docusate-b12-folic acid-c-e-cu-biotin tab 150-1 mg (Hematron-af)				
IXINITY – coagulation factor ix (recombinant) for inj 500 unit	•			
IXINITY – coagulation factor ix (recombinant) for inj 1000 unit	•			
IXINITY – coagulation factor ix (recombinant) for inj 1500 unit	•			
KOATE-DVI – antihemophilic factor (human) for inj 250 unit	•			
KOATE-DVI – antihemophilic factor (human) for inj 500 unit	•			
KOATE-DVI – antihemophilic factor (human) for inj 1000 unit	•			
KOGENATE FS – antihemophilic factor (recombinant) for inj kit 250 unit	•			
KOGENATE FS – antihemophilic factor (recombinant) for inj kit 500 unit	•			
KOGENATE FS – antihemophilic factor (recombinant) for inj kit 1000 unit	•			
KOGENATE FS – antihemophilic factor (recombinant) for inj kit 2000 unit	•			
KOGENATE FS – antihemophilic factor (recombinant) for inj kit 3000 unit	•			
KOGENATE FS BIO-SET – antihemophilic factor (recombinant) for inj kit 250 unit	•			

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
KOGENATE FS BIO-SET – antihemophilic factor (recombinant) for inj kit 500 unit	•			
KOGENATE FS BIO-SET – antihemophilic factor (recombinant) for inj kit 1000 unit	•			
KOGENATE FS BIO-SET – antihemophilic factor (recombinant) for inj kit 2000 unit	•			
KOGENATE FS BIO-SET – antihemophilic factor (recombinant) for inj kit 3000 unit	•			
KOVALTRY – antihemophilic factor (recombinant) for inj 250 unit	•			
KOVALTRY – antihemophilic factor (recombinant) for inj 500 unit	•			
KOVALTRY – antihemophilic factor (recombinant) for inj 1000 unit	•			
KOVALTRY – antihemophilic factor (recombinant) for inj 2000 unit	•			
KOVALTRY – antihemophilic factor (recombinant) for inj 3000 unit	•			
MONOCLATE-P – antihemophilic factor (human) for inj kit 250 unit	•			
MONOCLATE-P – antihemophilic factor (human) for inj kit 1000 unit	•			
MONOCLATE-P – antihemophilic factor (human) for inj kit 1500 unit	•			
MONONINE – coagulation factor ix for inj 500 unit	•			
MONONINE – coagulation factor ix for inj 1000 unit	•			
NEULASTA – pegfilgrastim soln prefilled syringe 6 mg/0.6ml	•			
NEULASTA ONPRO KIT – pegfilgrastim soln prefilled syringe kit 6 mg/0.6ml	•			

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
NEUPOGEN – filgrastim soln prefilled syringe 300 mcg/0.5ml	•			
NEUPOGEN – filgrastim soln prefilled syringe 480 mcg/0.8ml (600 mcg/ml)	•			
NEUPOGEN – filgrastim inj 300 mcg/ml	•			
NEUPOGEN – filgrastim inj 480 mcg/1.6ml (300 mcg/ml)	•			
NOVOEIGHT – antihemophilic factor (recombinant) for inj 250 unit	•			
NOVOEIGHT – antihemophilic factor (recombinant) for inj 500 unit	•			
NOVOEIGHT – antihemophilic factor (recombinant) for inj 1000 unit	•			
NOVOEIGHT – antihemophilic factor (recombinant) for inj 1500 unit	•			
NOVOEIGHT – antihemophilic factor (recombinant) for inj 2000 unit	•			
NOVOEIGHT – antihemophilic factor (recombinant) for inj 3000 unit	•			
NOVOSEVEN RT – coagulation factor viia (recomb) for inj 1 mg (1000 mcg)	•			
NOVOSEVEN RT – coagulation factor viia (recomb) for inj 2 mg (2000 mcg)	•			
NOVOSEVEN RT – coagulation factor viia (recomb) for inj 5 mg (5000 mcg)	•			
NOVOSEVEN RT – coagulation factor viia (recomb) for inj 8 mg (8000 mcg)	•			
NUWIQ – antihemophilic factor (recombinant) for inj 250 unit	•			
NUWIQ – antihemophilic factor (recombinant) for inj 500 unit	•			
NUWIQ – antihemophilic factor (recombinant) for inj 1000 unit	•			
NUWIQ – antihemophilic factor (recombinant) for inj 2000 unit	•			
NUWIQ – antihemophilic factor (recombinant) for inj kit 250 unit	•			

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
NUWIQ – antihemophilic factor (recombinant) for inj kit 500 unit	•			
NUWIQ – antihemophilic factor (recombinant) for inj kit 1000 unit	•			
NUWIQ – antihemophilic factor (recombinant) for inj kit 2000 unit	•			
OBIZUR – antihemophilic factor (recomb porc) rpfviii for inj 500 unit	•			
pentoxifylline tab cr 400 mg				
PROCRIT – epoetin alfa inj 2000 unit/ml	•	•		
PROCRIT – epoetin alfa inj 3000 unit/ml	•	•		
PROCRIT – epoetin alfa inj 4000 unit/ml	•	•		
PROCRIT – epoetin alfa inj 10000 unit/ml	•	•		
PROCRIT – epoetin alfa inj 20000 unit/ml	•	•		
PROCRIT – epoetin alfa inj 40000 unit/ml	•	•		
PROFILNINE – factor ix complex for inj 500 unit	•			
PROFILNINE – factor ix complex for inj 1000 unit	•			
PROFILNINE – factor ix complex for inj 1500 unit	•			
PROFILNINE SD – factor ix complex for inj 500 unit	•			
PROFILNINE SD – factor ix complex for inj 1000 unit	•			
PROFILNINE SD – factor ix complex for inj 1500 unit	•			
RECOMBINATE – antihemophilic factor (recombinant) for inj 220-400 unit	•			
RECOMBINATE – antihemophilic factor (recombinant) for inj 401-800 unit	•			

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
RECOMBINATE – antihemophilic factor (recombinant) for inj 801-1240 unit	•			
RECOMBINATE – antihemophilic factor (recombinant) for inj 1241-1800 unit	•			
RECOMBINATE – antihemophilic factor (recombinant) for inj 1801-2400 unit	•			
RIXUBIS – coagulation factor ix (recombinant) for inj 250 unit	•			
RIXUBIS – coagulation factor ix (recombinant) for inj 500 unit	•			
RIXUBIS – coagulation factor ix (recombinant) for inj 1000 unit	•			
RIXUBIS – coagulation factor ix (recombinant) for inj 2000 unit	•			
RIXUBIS – coagulation factor ix (recombinant) for inj 3000 unit	•			
TRETTEN – coagulation factor xiii a-subunit for inj 2000-3125 unit	•			
VONVENDI – von willebrand factor (recombinant) for inj 650 unit	•			
VONVENDI – von willebrand factor (recombinant) for inj 1300 unit	•			
warfarin sodium tab 1 mg (Coumadin)				
warfarin sodium tab 2 mg (Coumadin)				
warfarin sodium tab 2.5 mg (Coumadin)				
warfarin sodium tab 3 mg (Coumadin)				
warfarin sodium tab 4 mg (Coumadin)				
warfarin sodium tab 5 mg (Coumadin)				
warfarin sodium tab 6 mg (Coumadin)				
warfarin sodium tab 7.5 mg (Coumadin)				
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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
WILATE – antihemophilic factor/vwf (human) for inj 1000-1000 unit kit	•			
XARELTO – rivaroxaban tab 10 mg			•	
XARELTO – rivaroxaban tab 15 mg			•	
XARELTO – rivaroxaban tab 20 mg			•	
XARELTO STARTER PACK – rivaroxaban tab starter therapy pack 15 mg & 20 mg			•	
XYNTHA – antihemophilic factor recombinant paf for inj kit 250 unit	•			
XYNTHA – antihemophilic factor recombinant paf for inj kit 500 unit	•			
XYNTHA – antihemophilic factor recombinant paf for inj kit 1000 unit	•			
XYNTHA – antihemophilic factor recombinant paf for inj kit 2000 unit	•			
XYNTHA SOLOFUSE – antihemophilic factor recombinant paf for inj kit 250 unit	•			
XYNTHA SOLOFUSE – antihemophilic factor recombinant paf for inj kit 500 unit	•			
XYNTHA SOLOFUSE – antihemophilic factor recombinant paf for inj kit 1000 unit	•			
XYNTHA SOLOFUSE – antihemophilic factor recombinant paf for inj kit 2000 unit	•			
XYNTHA SOLOFUSE – antihemophilic factor recombinant paf for inj kit 3000 unit	•			
ZARXIO – filgrastim-sndz soln prefilled syringe 300 mcg/0.5ml	•			
ZARXIO – filgrastim-sndz soln prefilled syringe 480 mcg/0.8ml	•			
TOPICAL PRODUCTS				
EYE				

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
Anti-infectives				
BACITRACIN – bacitracin ophth oint 500 unit/gm				
bacitracin-polymyxin b ophth oint				
ciprofloxacin hcl ophth soln 0.3% (Ciloxan)				
erythromycin ophth oint 5 mg/gm				
gentamicin sulfate ophth oint 0.3%				
gentamicin sulfate ophth soln 0.3% (Garamycin)				
NATACYN – natamycin ophth susp 5%				
ofloxacin ophth soln 0.3% (Ocuflox)				
polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1% (Polytrim)				
tobramycin ophth soln 0.3% (Tobrex)				
VIGAMOX – moxifloxacin hcl ophth soln 0.5% (base equiv)				
Steroids and Combination Products				
LOTEMAX – loteprednol etabonate ophth susp 0.5%				
LOTEMAX – loteprednol etabonate ophth gel 0.5%				
LOTEMAX – loteprednol etabonate ophth oint 0.5%				
neomycin-polymyxin-dexamethasone ophth oint 0.1% (Maxitrol)				
neomycin-polymyxin-dexamethasone ophth susp 0.1% (Maxitrol)				
PREDNISOLONE SODIUM PHOSP – prednisolone sodium phosphate ophth soln 1%				
sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%				
ZYLET – loteprednol etabonate-tobramycin ophth susp 0.5-0.3%				

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
Glaucoma				
ALPHAGAN P – brimonidine tartrate ophth soln 0.1%				
AZOPT – brinzolamide ophth susp 1%				
brimonidine tartrate ophth soln 0.2%				
carteolol hcl ophth soln 1%				
dorzolamide hcl-timolol maleate ophth soln 22.3-6.8 mg/ml (Cosopt)				
latanoprost ophth soln 0.005% (Xalatan)			•	
levobunolol hcl ophth soln 0.5% (Betagan)				
LUMIGAN – bimatoprost ophth soln 0.01%			•	•
SIMBRINZA – brinzolamide-brimonidine tartrate ophth susp 1-0.2%				
timolol maleate ophth soln 0.25% (Timoptic)				
timolol maleate ophth soln 0.5% (Timoptic)				
TRAVATAN Z – travoprost ophth soln 0.004% (benzalkonium free) (bak free)			•	•
Other Eye Products				
atropine sulfate ophth soln 1% (Isopto atropine)				
cromolyn sodium ophth soln 4%				
cyclopentolate hcl ophth soln 1% (Cyclogyl)				
diclofenac sodium ophth soln 0.1%				
flurbiprofen sodium ophth soln 0.03% (Ocufen)				
homatropine hbr ophth soln 5% (Isopto homatropine)				
ketorolac tromethamine ophth soln 0.5% (Acular)				

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
PATADAY – olopatadine hcl ophth soln 0.2% (base equivalent)				
PAZEO – olopatadine hcl ophth soln 0.7% (base equivalent)				
proparacaine hcl ophth soln 0.5% (Alcaine)				
tetracaine hcl ophth soln 0.5%				
tropicamide ophth soln 0.5%				
tropicamide ophth soln 1% (Mydriacyl)				
EAR				
CIPRODEX – ciprofloxacin-dexamethasone otic susp 0.3-0.1%				
MOUTH AND THROAT (LOCAL)				
benzocaine dental soln 20%				
chlorhexidine gluconate soln 0.12% (Peridex)				
lidocaine hcl viscous soln 2%				
sodium fluoride cream 1.1% (Prevident 5000 plus)				
sodium fluoride gel 1.1% (0.5% f) (Prevident fluoride)				
sodium fluoride paste 1.1% (Prevident 5000 boost)				
sodium fluoride rinse 0.2% (Prevident)				
sodium fluoride-potassium nitrate paste 1.1-5% (Prevident 5000 sensi)				
ANORECTAL AGENTS				
CORTIFOAM – hydrocortisone acetate rectal foam 10% (90 mg/dose)				
hydrocortisone rectal cream 2.5% (Anusol-hc)				
SKIN CONDITIONS/PRODUCTS				
Acne				
FINACEA – azelaic acid foam 15%				

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
FINACEA – azelaic acid gel 15%				
TAZORAC – tazarotene cream 0.05%				
TAZORAC – tazarotene cream 0.1%				
TAZORAC – tazarotene gel 0.05%				
TAZORAC – tazarotene gel 0.1%				
Anti-infectives				
mupirocin oint 2% (Bactroban)				
silver sulfadiazine cream 1% (Silvadene)				
Corticosteroids				
hydrocortisone cream 2.5%				
hydrocortisone oint 2.5%				
triamcinolone acetonide cream 0.025%				
triamcinolone acetonide cream 0.1%				
triamcinolone acetonide cream 0.5%				
triamcinolone acetonide oint 0.025%				
triamcinolone acetonide oint 0.1%				
Other Skin Products				
CARAC – fluorouracil cream 0.5%				
ELIDEL – pimecrolimus cream 1%				•
FLUOROPLEX – fluorouracil cream 1%				
lactic acid w/ vitamin e cream 10%-3500 unit/30gm				
lidocaine hcl gel 2%				
lidocaine hcl soln 4% (Xylocaine)				
selenium sulfide lotion 2.5%				
silver nitrate-potassium nitrate applicator 75-25% (Arzol silver nitrate)				
STELARA – ustekinumab soln prefilled syringe 45 mg/0.5ml	•		•	•
STELARA – ustekinumab soln prefilled syringe 90 mg/ml	•		•	•

Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
VALCHLOR – mechlorethamine hcl gel 0.016% (base equivalent)	•			
VOLTAREN – diclofenac sodium gel 1%				
ZYCLARA – imiquimod cream 3.75%			•	
ZYCLARA PUMP – imiquimod cream 2.5%			•	
ZYCLARA PUMP – imiquimod cream 3.75%			•	
MISCELLANEOUS CATEGORIES				
DIABETIC SUPPLIES				
TEST STRIPS – BAYER ASCENSIA AUTODISC, BREEZE 2, CONTOUR, CONTOUR NEXT			•	
TEST STRIPS – ROCHE ACTIVE, AVIVA, AVIVA PLUS, COMFORT CURVE, COMPACT, COMPACTPLUS, SMARTVIEW			•	
INSULIN PEN NEEDLES – VARIOUS			•	
INSULIN SYRINGES – VARIOUS				
LANCETS – VARIOUS				
RESPIRATORY INHALER-ASSIST DEVICES				
BREATHERITE – spacer/aerosol-holding chambers - device				
MISCELLANEOUS DRUGS				
CELLCEPT – mycophenolate mofetil cap 250 mg				
CELLCEPT – mycophenolate mofetil tab 500 mg				
CHEMET – succimer cap 100 mg				
CUPRIMINE – penicillamine cap 250 mg	•			
CYCLOSPORINE MODIFIED – cyclosporine modified cap 50 mg				
DEPEN TITRATABS – penicillamine tab 250 mg	•			

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Drug Name	Specialty	Prior Authorization	Dispensing Limits	Step Therapy
NARCAN – naloxone hcl nasal spray 4 mg/0.1ml				
PROGRAF – tacrolimus cap 0.5 mg				
PROGRAF – tacrolimus cap 1 mg				
PROGRAF – tacrolimus cap 5 mg				
RAPAMUNE – sirolimus oral soln 1 mg/ml				
REVLIMID – lenalidomide caps 2.5 mg	•	•		
REVLIMID – lenalidomide cap 5 mg	•	•		
REVLIMID – lenalidomide cap 10 mg	•	•		
REVLIMID – lenalidomide cap 15 mg	•	•		
REVLIMID – lenalidomide cap 20 mg	•	•		
REVLIMID – lenalidomide cap 25 mg	•	•		
SUBOXONE – buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)		•	•	
SUBOXONE – buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)		•	•	
SUBOXONE – buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)		•	•	
SUBOXONE – buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)		•	•	
THALOMID – thalidomide cap 50 mg	•	•		
THALOMID – thalidomide cap 100 mg	•	•		
THALOMID – thalidomide cap 150 mg	•	•		
THALOMID – thalidomide cap 200 mg	•	•		
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CHENODAL – chenodiol tab 250 mg.....17
chlordiazepoxide hcl cap 5 mg.....18
chlordiazepoxide hcl cap 10 mg.....18
chlordiazepoxide hcl cap 25 mg.....19
chlorhexidine gluconate soln 0.12% (Peridex).....33
chloroquine phosphate tab 250 mg.....3
chloroquine phosphate tab 500 mg (Aralen).....3
chlorothiazide tab 500 mg..... 13
chlorzoxazone tab 500 mg (Parafon forte dsc)..... 25
CIALIS – tadalafil tab 2.5 mg..... 14
CIALIS – tadalafil tab 5 mg..... 14
CIALIS – tadalafil tab 10 mg..... 14
CIALIS – tadalafil tab 20 mg..... 14
cilostazol tab 50 mg (Pletal).....28
cilostazol tab 100 mg (Pletal).....28
cimetidine tab 300 mg.....16
cimetidine tab 400 mg.....16
CIPRODEX – ciprofloxacin-dexamethasone otic susp 0.3-0.1%.....33
ciprofloxacin hcl ophth soln 0.3% (Ciloxan)..... 32
ciprofloxacin hcl tab 750 mg (base equiv).....1
ciprofloxacin hcl tab 250 mg (base equiv) (Cipro).....1
ciprofloxacin hcl tab 500 mg (base equiv) (Cipro).....1
citalopram hydrobromide tab 10 mg (base equiv) (Celexa)..... 19
citalopram hydrobromide tab 20 mg (base equiv) (Celexa)..... 19
citalopram hydrobromide tab 40 mg (base equiv) (Celexa)..... 19
clemastine fumarate tab 2.68 mg.....14
CLEOCIN – clindamycin phosphate vaginal suppos 100 mg..... 18
clindamycin hcl cap 75 mg (Cleocin).....4
clindamycin hcl cap 150 mg (Cleocin).....4
clindamycin hcl cap 300 mg (Cleocin).....4
clonazepam tab 0.5 mg (Klonopin).....24
clonazepam tab 1 mg (Klonopin).....24
clonazepam tab 2 mg (Klonopin).....24
clonidine hcl tab 0.1 mg (Catapres)..... 13
clonidine hcl tab 0.2 mg (Catapres)..... 13
clonidine hcl tab 0.3 mg (Catapres)..... 13
clopidogrel bisulfate tab 75 mg (base equiv) (Plavix)..... 28
clorazepate dipotassium tab 3.75 mg (Tranxene t).....19
clorazepate dipotassium tab 7.5 mg (Tranxene t).....19
COAGADEX – coagulation factor x (human) for inj 250 unit.....28
COAGADEX – coagulation factor x (human) for inj 500 unit.....28
COLCRYS – colchicine tab 0.6 mg.....24
COMBIPATCH – estradiol-norethindrone ace td pttw 0.05-0.14 mg/day.....6
COMBIPATCH – estradiol-norethindrone ace td pttw 0.05-0.25 mg/day.....6
COMBIVENT RESPIMAT – ipratropium-albuterol inhal aerosol soln 20-100 mcg/act..... 15
COPAXONE – glatiramer acetate soln prefilled syringe 20 mg/ml.....21
COPAXONE – glatiramer acetate soln prefilled syringe 40 mg/ml.....21
CORIFACT – factor xiii concentrate (human) for inj kit 1000-1600 unit.....28
CORTIFOAM – hydrocortisone acetate rectal foam 10% (90 mg/dose)..... 33
CORTISONE ACETATE – cortisone acetate tab 25 mg..... 5
COTELLIC – cobimetinib fumarate tab 20 mg (base equivalent).....4
CREON – pancrelipase (lip-prot-amyl) dr cap 3000-9500-15000 unit..... 17
CREON – pancrelipase (lip-prot-amyl) dr cap 6000-19000-30000 unit..... 17
CREON – pancrelipase (lip-prot-amyl) dr cap 12000-38000-60000 unit..... 17
CREON – pancrelipase (lip-prot-amyl) dr cap 24000-76000-120000 unit..... 17
CREON – pancrelipase (lip-prot-amyl) dr cap 36000-114000-180000 unit..... 17
CRESTOR – rosuvastatin calcium tab 5 mg.....12
CRESTOR – rosuvastatin calcium tab 10 mg.....12
CRESTOR – rosuvastatin calcium tab 20 mg.....12
CRESTOR – rosuvastatin calcium tab 40 mg.....12
CRINONE – progesterone vaginal gel 4%.....18
CRINONE – progesterone vaginal gel 8%.....18
CRIXIVAN – indinavir sulfate cap 200 mg..... 2
CRIXIVAN – indinavir sulfate cap 400 mg..... 2
cromolyn sodium ophth soln 4%.....33
CUPRIMINE – penicillamine cap 250 mg..... 34
cyanocobalamin inj 1000 mcg/ml..... 28
cyclobenzaprine hcl tab 5 mg.....25
cyclobenzaprine hcl tab 10 mg.....25
cyclopentolate hcl ophth soln 1% (Cyclogyl).....33

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CYCLOSPORINE MODIFIED – cyclosporine modified cap 50 mg....34
CYSTAGON – cysteamine bitartrate cap 50 mg....18
CYSTAGON – cysteamine bitartrate cap 150 mg....18

D

DAKLINZA – daclatasvir dihydrochloride tab 30 mg (base equivalent)....2
DAKLINZA – daclatasvir dihydrochloride tab 60 mg (base equivalent)....2
DAKLINZA – daclatasvir dihydrochloride tab 90 mg (base equivalent)....2
DARAPRIM – pyrimethamine tab 25 mg....3
DELZICOL – mesalamine cap dr 400 mg....18
DEPEN TITRATABS – penicillamine tab 250 mg....34
desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg (Desogen)....6
DEXAMETHASONE – dexamethasone soln 0.5 mg/5ml....5
dexamethasone tab 0.5 mg....5
dexamethasone tab 0.75 mg....5
dexamethasone tab 1.5 mg....5
dexamethasone tab 4 mg....5
dexamethasone tab 6 mg....5
DIASTAT ACUDIAL – diazepam rectal gel delivery system 10 mg....24
DIASTAT ACUDIAL – diazepam rectal gel delivery system 20 mg....24
DIASTAT PEDIATRIC – diazepam rectal gel delivery system 2.5 mg....24
DIAZEPAM – diazepam oral soln 1 mg/ml....19
diazepam tab 2 mg (Valium)....19
diazepam tab 5 mg (Valium)....19
diazepam tab 10 mg (Valium)....19
DIBENZYLINE – phenoxybenzamine hcl cap 10 mg....13
diclofenac sodium ophth soln 0.1%....33
diclofenac sodium tab delayed release 50 mg....23
diclofenac sodium tab delayed release 75 mg....23
dicyclomine hcl cap 10 mg (Bentyl)....16
dicyclomine hcl tab 20 mg (Bentyl)....16
DILANTIN – phenytoin sodium extended cap 30 mg....24
diltiazem hcl cap sr 24hr 120 mg....11
diltiazem hcl coated beads cap sr 24hr 120 mg (Cardizem cd)....11
diltiazem hcl coated beads cap sr 24hr 180 mg (Cardizem cd)....11
diltiazem hcl tab 90 mg....12
diltiazem hcl tab 30 mg (Cardizem)....11
diltiazem hcl tab 60 mg (Cardizem)....11
diltiazem hcl tab 120 mg (Cardizem)....12
dipyridamole tab 25 mg (Persantine)....28
divalproex sodium tab delayed release 125 mg (Depakote)....24
divalproex sodium tab delayed release 250 mg (Depakote)....24
DIVIGEL – estradiol td gel 0.25 mg/0.25gm (0.1%)....6
DIVIGEL – estradiol td gel 0.5 mg/0.5gm (0.1%)....6
DIVIGEL – estradiol td gel 1 mg/gm (0.1%)....6
donepezil hydrochloride tab 5 mg (Aricept)....21
donepezil hydrochloride tab 10 mg (Aricept)....21
DONNATAL – pb-hyoscy-atrop-scopol tab 16.2-0.1037-0.0194-0.0065 mg....16
dorzolamide hcl-timolol maleate ophth soln 22.3-6.8 mg/ml (Cosopt)....33
doxazosin mesylate tab 1 mg (Cardura)....13
doxazosin mesylate tab 2 mg (Cardura)....13
doxazosin mesylate tab 4 mg (Cardura)....13
doxazosin mesylate tab 8 mg (Cardura)....13
doxepin hcl cap 10 mg....19
doxepin hcl cap 25 mg....19
doxepin hcl conc 10 mg/ml....19
DROXIA – hydroxyurea cap 200 mg....28
DROXIA – hydroxyurea cap 300 mg....28
DROXIA – hydroxyurea cap 400 mg....28
DULERA – mometasone furoate-formoterol fumarate aerosol 100-5 mcg/act....15
DULERA – mometasone furoate-formoterol fumarate aerosol 200-5 mcg/act....15

E

ELIDEL – pimecrolimus cream 1%....34
ELIQUIS – apixaban tab 2.5 mg....28
ELIQUIS – apixaban tab 5 mg....28
ELLA – ulipristal acetate tab 30 mg....6
ELOCTATE – antihemophilic factor (recomb) rfviiifc for inj 250 unit....28
ELOCTATE – antihemophilic factor (recomb) rfviiifc for inj 500 unit....28
ELOCTATE – antihemophilic factor (recomb) rfviiifc for inj 750 unit....28
ELOCTATE – antihemophilic factor (recomb) rfviiifc for inj 1000 unit....28
ELOCTATE – antihemophilic factor (recomb) rfviiifc for inj 1500 unit....28
ELOCTATE – antihemophilic factor (recomb) rfviiifc for inj 2000 unit....28
ELOCTATE – antihemophilic factor (recomb) rfviiifc for inj 3000 unit....28
EMCYT – estramustine phosphate sodium cap 140 mg....4
EMEND – aprepitant capsule 40 mg....17
EMEND – aprepitant capsule 80 mg....17
EMEND – aprepitant capsule 125 mg....17
EMEND – aprepitant capsule therapy pack 80 & 125 mg....17
EMEND – aprepitant for oral susp 125 mg (125 mg/5ml)....17

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EMTRIVA – emtricitabine caps 200 mg..... 2
EMTRIVA – emtricitabine soln 10 mg/ml..... 2
enalapril maleate & hydrochlorothiazide tab 5-12.5 mg..... 9
enalapril maleate & hydrochlorothiazide tab 10-25 mg (Vaseretic)..... 9
enalapril maleate tab 2.5 mg (Vasotec)..... 10
enalapril maleate tab 5 mg (Vasotec)..... 10
enalapril maleate tab 10 mg (Vasotec)..... 10
enalapril maleate tab 20 mg (Vasotec)..... 10
ENBREL – etanercept for subcutaneous inj 25 mg..... 23
ENBREL – etanercept subcutaneous soln prefilled syringe 25 mg/0.5ml.....23
ENBREL – etanercept subcutaneous soln prefilled syringe 50 mg/ml.....23
ENBREL SURECLICK – etanercept subcutaneous solution auto-injector 50 mg/ml.....23
EPIPEN-JR 2-PAK – epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000).....14
EPIPEN 2-PAK – epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)..... 14
EPOGEN – epoetin alfa inj 2000 unit/ml.....28
EPOGEN – epoetin alfa inj 3000 unit/ml.....28
EPOGEN – epoetin alfa inj 4000 unit/ml.....28
EPOGEN – epoetin alfa inj 10000 unit/ml.....28
EPOGEN – epoetin alfa inj 20000 unit/ml.....28
EPZICOM – abacavir sulfate-lamivudine tab 600-300 mg..... 2
ergocalciferol cap 50000 unit (Drisdol)..... 25
erythromycin ophth oint 5 mg/gm..... 32
escitalopram oxalate tab 5 mg (base equiv) (Lexapro)..... 19
escitalopram oxalate tab 10 mg (base equiv) (Lexapro)..... 19
escitalopram oxalate tab 20 mg (base equiv) (Lexapro)..... 19
estazolam tab 1 mg..... 20
estazolam tab 2 mg..... 20
ESTRACE – estradiol vaginal cream 0.1 mg/gm.....18
estradiol tab 0.5 mg (Estrace)..... 6
estradiol tab 1 mg (Estrace)..... 6
estradiol tab 2 mg (Estrace)..... 6
EXELON – rivastigmine td patch 24hr 4.6 mg/24hr.....21
EXELON – rivastigmine td patch 24hr 9.5 mg/24hr.....21
EXELON – rivastigmine td patch 24hr 13.3 mg/24hr.....21

F

famotidine tab 40 mg (Pepcid)..... 16
FARESTON – toremifene citrate tab 60 mg (base equivalent).....4
fe fumarate w/ b12-vit c-fa-ifc cap 110-0.015-75-0.5-240 mg..... 28
fe fum-iron polysacch complex-fa-b cmplx-c-zn-mn-cu cap (Tandem plus).....28
FEIBA – antiinhibitor coagulant complex for inj..... 28
fenofibrate tab 54 mg (Lofibra)..... 12
ferrous fumarate-fa-b complex-c-zn-mg-mn-cu tab 106-1 mg..... 28
ferrous fumarate-folic acid tab 324-1 mg.....29
FINACEA – azelaic acid foam 15%..... 33
FINACEA – azelaic acid gel 15%.....34
finasteride tab 5 mg (Proscar)..... 18
FIRAZYR – icatibant acetate inj 30 mg/3ml (base equivalent)..... 29
FLOVENT DISKUS – fluticasone propionate aer pow ba 50 mcg/blister..... 15
FLOVENT DISKUS – fluticasone propionate aer pow ba 100 mcg/blister..... 15
FLOVENT DISKUS – fluticasone propionate aer pow ba 250 mcg/blister..... 15
FLOVENT HFA – fluticasone propionate hfa inhal aer 110 mcg/act (125/valve)..... 16
FLOVENT HFA – fluticasone propionate hfa inhal aer 220 mcg/act (250/valve)..... 16
FLOVENT HFA – fluticasone propionate hfa inhal aero 44 mcg/act (50/valve)..... 15
fluconazole for susp 10 mg/ml (Diflucan).....1
fluconazole tab 50 mg (Diflucan).....1
fluconazole tab 100 mg (Diflucan).....1
fluconazole tab 150 mg (Diflucan).....1
FLUOROPLEX – fluorouracil cream 1%..... 34
fluoxetine hcl cap 10 mg (Prozac)..... 19
fluoxetine hcl cap 20 mg (Prozac)..... 19
fluoxetine hcl cap 40 mg (Prozac)..... 19
fluoxetine hcl solution 20 mg/5ml..... 19
fluoxetine hcl tab 10 mg..... 19
FLUPHENAZINE HCL – fluphenazine hcl elixir 2.5 mg/5ml..... 20
FLUPHENAZINE HCL – fluphenazine hcl oral conc 5 mg/ml.....20
fluphenazine hcl tab 1 mg..... 20
fluphenazine hcl tab 2.5 mg..... 20
fluphenazine hcl tab 5 mg..... 20
fluphenazine hcl tab 10 mg..... 20
flurbiprofen sodium ophth soln 0.03% (Ocufen).....33
flurbiprofen tab 50 mg.....23
flurbiprofen tab 100 mg..... 23
fluticasone propionate nasal susp 50 mcg/act (Flonase)..... 14
folic acid tab 1 mg.....29
folic acid-vitamin b6-vitamin b12 tab 2.2-25-0.5 mg..... 29
folic acid-vitamin b6-vitamin b12 tab 2.5-25-1 mg..... 29
folic acid-vitamin b6-vitamin b12 tab 2.2-25-1 mg (Folgard rx).....29
FOLLISTIM AQ – follitropin beta inj 75 unit/0.5ml..... 6

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FOLLISTIM AQ – follitropin beta inj 300 unit/0.36ml.....6
FOLLISTIM AQ – follitropin beta inj 600 unit/0.72ml.....6
FOLLISTIM AQ – follitropin beta inj 900 unit/1.08ml.....6
FORTEO – teriparatide (recombinant) inj 600 mcg/2.4ml.....9
fosinopril sodium tab 10 mg.....10
fosinopril sodium tab 20 mg.....10
fosinopril sodium tab 40 mg.....10
furosemide oral soln 10 mg/ml.....13
furosemide tab 20 mg (Lasix).....13
furosemide tab 40 mg (Lasix).....13
furosemide tab 80 mg (Lasix).....13
FUZEON – enfuvirtide for inj 90 mg.....2

G

gabapentin cap 100 mg (Neurontin).....24
gabapentin cap 300 mg (Neurontin).....24
gabapentin cap 400 mg (Neurontin).....24
GABITRIL – tiagabine hcl tab 12 mg.....24
GABITRIL – tiagabine hcl tab 16 mg.....24
GANIRELIX ACETATE – ganirelix acetate inj 250 mcg/0.5ml.....6
gemfibrozil tab 600 mg (Lopid).....12
gentamicin sulfate ophth oint 0.3%.....32
gentamicin sulfate ophth soln 0.3% (Garamycin).....32
GLEEVEC – imatinib mesylate tab 100 mg (base equivalent).....4
GLEEVEC – imatinib mesylate tab 400 mg (base equivalent).....4
glimepiride tab 1 mg (Amaryl).....6
glimepiride tab 2 mg (Amaryl).....6
glimepiride tab 4 mg (Amaryl).....6
glipizide tab 5 mg (Glucotrol).....7
glipizide tab 10 mg (Glucotrol).....7
glipizide tab sr 24hr 2.5 mg (Glucotrol xl).....6
glipizide tab sr 24hr 5 mg (Glucotrol xl).....7
GLUCAGON EMERGENCY KIT – glucagon (rdna) for inj kit 1 mg.....7
glyburide-metformin tab 1.25-250 mg (Glucovance).....7
glyburide-metformin tab 2.5-500 mg (Glucovance).....7
glyburide-metformin tab 5-500 mg (Glucovance).....7
glyburide micronized tab 1.5 mg (Glynase).....7
glyburide micronized tab 3 mg (Glynase).....7
glyburide micronized tab 6 mg (Glynase).....7
glyburide tab 1.25 mg.....7
glyburide tab 2.5 mg.....7
glyburide tab 5 mg.....7
guanfacine hcl tab 1 mg (Tenex).....13
guanfacine hcl tab 2 mg (Tenex).....13

H

haloperidol lactate oral conc 2 mg/ml.....20
haloperidol tab 0.5 mg.....20
haloperidol tab 1 mg.....20
haloperidol tab 2 mg.....20
HARVONI – ledipasvir-sofosbuvir tab 90-400 mg.....2
HELIXATE FS – antihemophilic factor (recombinant) for inj kit 250 unit.....29
HELIXATE FS – antihemophilic factor (recombinant) for inj kit 500 unit.....29
HELIXATE FS – antihemophilic factor (recombinant) for inj kit 1000 unit.....29
HELIXATE FS – antihemophilic factor (recombinant) for inj kit 2000 unit.....29
HELIXATE FS – antihemophilic factor (recombinant) for inj kit 3000 unit.....29
HEMOFIL M – antihemophilic factor (human) for inj 250 unit.....29
HEMOFIL M – antihemophilic factor (human) for inj 500 unit.....29
HEMOFIL M – antihemophilic factor (human) for inj 1000 unit.....29
HEMOFIL M – antihemophilic factor (human) for inj 1700 unit.....29
homatropine hbr ophth soln 5% (Isopto homatropine).....33
HUMATE-P – antihemophilic factor/vwf (human) for inj 250-600 unit.....29
HUMATE-P – antihemophilic factor/vwf (human) for inj 500-1200 unit.....29
HUMATE-P – antihemophilic factor/vwf (human) for inj 1000-2400 unit.....29
HUMIRA – adalimumab prefilled syringe kit 10 mg/0.2ml.....23
HUMIRA – adalimumab prefilled syringe kit 20 mg/0.4ml.....23
HUMIRA – adalimumab prefilled syringe kit 40 mg/0.8ml.....23
HUMIRA PEDIATRIC CROHNS D – adalimumab prefilled syringe kit 40 mg/0.8ml.....23
HUMIRA PEN – adalimumab pen-injector kit 40 mg/0.8ml.....23
HUMIRA PEN-CROHNS DISEASE – adalimumab pen-injector kit 40 mg/0.8ml.....23
HUMIRA PEN-PSORIASIS STAR – adalimumab pen-injector kit 40 mg/0.8ml.....23
hydralazine hcl tab 10 mg.....13
hydralazine hcl tab 25 mg.....13
hydralazine hcl tab 50 mg.....13
hydrochlorothiazide cap 12.5 mg (Microzide).....13
hydrochlorothiazide tab 12.5 mg.....13
hydrochlorothiazide tab 25 mg.....13
hydrochlorothiazide tab 50 mg.....13
hydrocodone-acetaminophen tab 7.5-325 mg (Norco).....22

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hydrocodone-acetaminophen tab 5-325 mg (Norco) 22
hydrocodone-acetaminophen tab 10-325 mg (Norco) 22
hydrocodone-ibuprofen tab 7.5-200 mg (Vicoprofen) 22
hydrocortisone cream 2.5% 34
hydrocortisone oint 2.5% 34
hydrocortisone rectal cream 2.5% (Anusol-hc) 33
hydromorphone hcl tab 2 mg (Dilaudid) 22
hydromorphone hcl tab 4 mg (Dilaudid) 22
hydroxychloroquine sulfate tab 200 mg (Plaquenil) 3
hydroxyzine hcl syrup 10 mg/5ml 19
hydroxyzine hcl tab 10 mg 19
hydroxyzine hcl tab 25 mg 19
hydroxyzine hcl tab 50 mg 19
hydroxyzine pamoate cap 25 mg (Vistaril) 19
hydroxyzine pamoate cap 50 mg (Vistaril) 19
hyoscyamine sulfate elixir 0.125 mg/5ml 17

I

IBRANCE – palbociclib cap 75 mg 4
IBRANCE – palbociclib cap 100 mg 4
IBRANCE – palbociclib cap 125 mg 4
ibuprofen tab 400 mg 23
ibuprofen tab 600 mg 23
ibuprofen tab 800 mg 23
IDELVION – coagulation factor ix (recomb) (rix-fp) for inj 250 unit 29
IDELVION – coagulation factor ix (recomb) (rix-fp) for inj 500 unit 29
IDELVION – coagulation factor ix (recomb) (rix-fp) for inj 1000 unit 29
IDELVION – coagulation factor ix (recomb) (rix-fp) for inj 2000 unit 29
imipramine hcl tab 10 mg (Tofranil) 19
imipramine hcl tab 25 mg (Tofranil) 19
imipramine hcl tab 50 mg (Tofranil) 19
IMITREX – sumatriptan nasal spray 5 mg/act 24
IMITREX – sumatriptan nasal spray 20 mg/act 24
IMPAVIDO – miltefosine cap 50 mg 4
INCRELEX – mecasermin inj 40 mg/4ml (10 mg/ml) 9
INCRUSE ELLIPTA – umeclidinium br aero powd breath act 62.5 mcg/inh (base eq) 16
indapamide tab 1.25 mg 13
indapamide tab 2.5 mg 13
indomethacin cap 25 mg 23
indomethacin cap 50 mg 23
INNOPRAN XL – propranolol hcl sustained-release beads cap sr 24hr 80 mg 11
INNOPRAN XL – propranolol hcl sustained-release beads cap sr 24hr 120 mg 11
INSULIN PEN NEEDLES – VARIOUS 34
INSULIN SYRINGES – VARIOUS 34
INTELENCE – etravirine tab 25 mg 2
INTELENCE – etravirine tab 100 mg 2
INTELENCE – etravirine tab 200 mg 2
INVIRASE – saquinavir mesylate cap 200 mg 2
INVIRASE – saquinavir mesylate tab 500 mg 2
INVOKAMET – canagliflozin-metformin hcl tab 50-500 mg 7
INVOKAMET – canagliflozin-metformin hcl tab 50-1000 mg 7
INVOKAMET – canagliflozin-metformin hcl tab 150-500 mg 7
INVOKAMET – canagliflozin-metformin hcl tab 150-1000 mg 7
INVOKANA – canagliflozin tab 100 mg 7
INVOKANA – canagliflozin tab 300 mg 7
ipratropium bromide inhal soln 0.02% 16
irbesartan-hydrochlorothiazide tab 150-12.5 mg (Avalide) 10
irbesartan-hydrochlorothiazide tab 300-12.5 mg (Avalide) 10
irbesartan tab 75 mg (Avapro) 10
irbesartan tab 150 mg (Avapro) 10
irbesartan tab 300 mg (Avapro) 10
iron combination cap 29
iron-docusate-b12-folic acid-c-e-cu-biotin tab 150-1 mg (Hematron-af) 29
iron polysacch complex-vit b12-fa cap 150-0.025-1 mg 29
ISENTRESS – raltegravir potassium chew tab 25 mg (base equiv) 2
ISENTRESS – raltegravir potassium chew tab 100 mg (base equiv) 2
ISENTRESS – raltegravir potassium packet for susp 100 mg (base equiv) 2
ISENTRESS – raltegravir potassium tab 400 mg (base equiv) 2
isoniazid tab 100 mg 1
isoniazid tab 300 mg 1
isosorbide mononitrate tab 10 mg 12
isosorbide mononitrate tab 20 mg 12
isosorbide mononitrate tab sr 24hr 30 mg (Imdur) 12
isosorbide mononitrate tab sr 24hr 60 mg (Imdur) 12
IXINITY – coagulation factor ix (recombinant) for inj 500 unit 29
IXINITY – coagulation factor ix (recombinant) for inj 1000 unit 29
IXINITY – coagulation factor ix (recombinant) for inj 1500 unit 29

J

JANUMET – sitagliptin-metformin hcl tab 50-500 mg 7
JANUMET – sitagliptin-metformin hcl tab 50-1000 mg 7

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JANUMET XR – sitagliptin-metformin hcl tab sr 24hr 50-500 mg....7
JANUMET XR – sitagliptin-metformin hcl tab sr 24hr 50-1000 mg.... 7
JANUMET XR – sitagliptin-metformin hcl tab sr 24hr 100-1000 mg.... 7
JANUVIA – sitagliptin phosphate tab 25 mg (base equiv)....7
JANUVIA – sitagliptin phosphate tab 50 mg (base equiv)....7
JANUVIA – sitagliptin phosphate tab 100 mg (base equiv)....7
JARDIANCE – empagliflozin tab 10 mg....7
JARDIANCE – empagliflozin tab 25 mg....7

K

KADIAN – morphine sulfate cap sr 24hr 10 mg....22
KADIAN – morphine sulfate cap sr 24hr 20 mg....22
KADIAN – morphine sulfate cap sr 24hr 30 mg....22
KADIAN – morphine sulfate cap sr 24hr 40 mg....22
KADIAN – morphine sulfate cap sr 24hr 50 mg....22
KADIAN – morphine sulfate cap sr 24hr 60 mg....22
KADIAN – morphine sulfate cap sr 24hr 80 mg....22
KADIAN – morphine sulfate cap sr 24hr 100 mg....22
KADIAN – morphine sulfate cap sr 24hr 200 mg....22
KALETRA – lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml).... 2
KALETRA – lopinavir-ritonavir tab 100-25 mg.... 2
KALETRA – lopinavir-ritonavir tab 200-50 mg.... 2
KALYDECO – ivacaftor packet 50 mg.... 16
KALYDECO – ivacaftor packet 75 mg.... 16
KALYDECO – ivacaftor tab 150 mg.... 16
ketoconazole tab 200 mg....1
ketoprofen cap 50 mg.... 23
ketoprofen cap 75 mg.... 23
ketorolac tromethamine ophth soln 0.5% (Acular).... 33
ketorolac tromethamine tab 10 mg....23
KOATE-DVI – antihemophilic factor (human) for inj 250 unit....29
KOATE-DVI – antihemophilic factor (human) for inj 500 unit....29
KOATE-DVI – antihemophilic factor (human) for inj 1000 unit....29
KOGENATE FS – antihemophilic factor (recombinant) for inj kit 250 unit....29
KOGENATE FS – antihemophilic factor (recombinant) for inj kit 500 unit....29
KOGENATE FS – antihemophilic factor (recombinant) for inj kit 1000 unit....29
KOGENATE FS – antihemophilic factor (recombinant) for inj kit 2000 unit....29
KOGENATE FS – antihemophilic factor (recombinant) for inj kit 3000 unit....29
KOGENATE FS BIO-SET – antihemophilic factor (recombinant) for inj kit 250 unit....29
KOGENATE FS BIO-SET – antihemophilic factor (recombinant) for inj kit 500 unit....30
KOGENATE FS BIO-SET – antihemophilic factor (recombinant) for inj kit 1000 unit....30
KOGENATE FS BIO-SET – antihemophilic factor (recombinant) for inj kit 2000 unit....30
KOGENATE FS BIO-SET – antihemophilic factor (recombinant) for inj kit 3000 unit....30
KOMBIGLYZE XR – saxagliptin-metformin hcl tab sr 24hr 2.5-1000 mg.... 7
KOMBIGLYZE XR – saxagliptin-metformin hcl tab sr 24hr 5-500 mg....7
KOMBIGLYZE XR – saxagliptin-metformin hcl tab sr 24hr 5-1000 mg....7
KOVALTRY – antihemophilic factor (recombinant) for inj 250 unit....30
KOVALTRY – antihemophilic factor (recombinant) for inj 500 unit....30
KOVALTRY – antihemophilic factor (recombinant) for inj 1000 unit....30
KOVALTRY – antihemophilic factor (recombinant) for inj 2000 unit....30
KOVALTRY – antihemophilic factor (recombinant) for inj 3000 unit....30
K-PHOS – potassium phosphate monobasic tab 500 mg.... 26

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lactic acid w/ vitamin e cream 10%-3500 unit/30gm.... 34
lactulose (encephalopathy) solution 10 gm/15ml.... 18
lactulose solution 10 gm/15ml.... 16
lamotrigine tab 25 mg (Lamictal)....24
lamotrigine tab 100 mg (Lamictal)....24
lamotrigine tab 150 mg (Lamictal)....24
lamotrigine tab 200 mg (Lamictal)....24
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LANTUS SOLOSTAR – insulin glargine soln pen-injector 100 unit/ml.... 8
latanoprost ophth soln 0.005% (Xalatan)....33
LETAIRIS – ambrisentan tab 5 mg.... 13
LETAIRIS – ambrisentan tab 10 mg.... 14
letrozole tab 2.5 mg (Femara).... 4
LEUCOVORIN CALCIUM – leucovorin calcium tab 10 mg.... 4
LEUCOVORIN CALCIUM – leucovorin calcium tab 15 mg.... 4
LEUKERAN – chlorambucil tab 2 mg.... 4
LEVEMIR FLEXTOUCH – insulin detemir soln pen-injector 100 unit/ml.... 8
LEVEMIR – insulin detemir inj 100 unit/ml....8

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levetiracetam tab 250 mg (Keppra)....24
levobunolol hcl ophth soln 0.5% (Betagan).... 33
levofloxacin tab 250 mg (Levaquin).... 1
levofloxacin tab 500 mg (Levaquin).... 1
levofloxacin tab 750 mg (Levaquin).... 1
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg.... 6
levothyroxine sodium tab 25 mcg (Synthroid).... 8
levothyroxine sodium tab 50 mcg (Synthroid).... 8
levothyroxine sodium tab 75 mcg (Synthroid).... 8
levothyroxine sodium tab 88 mcg (Synthroid).... 8
levothyroxine sodium tab 100 mcg (Synthroid).... 8
levothyroxine sodium tab 112 mcg (Synthroid).... 8
levothyroxine sodium tab 125 mcg (Synthroid).... 8
levothyroxine sodium tab 137 mcg (Synthroid).... 8
levothyroxine sodium tab 150 mcg (Synthroid).... 8
levothyroxine sodium tab 175 mcg (Synthroid).... 9
levothyroxine sodium tab 200 mcg (Synthroid).... 9
levothyroxine sodium tab 300 mcg (Synthroid).... 9
LEXIVA – fosamprenavir calcium susp 50 mg/ml (base equiv)....2
LEXIVA – fosamprenavir calcium tab 700 mg (base equiv)....2
LIALDA – mesalamine tab delayed release 1.2 gm....18
lidocaine hcl gel 2%.... 34
lidocaine hcl soln 4% (Xylocaine)....34
lidocaine hcl viscous soln 2%.... 33
LINZESS – linaclotide cap 145 mcg.... 18
LINZESS – linaclotide cap 290 mcg.... 18
lisinopril & hydrochlorothiazide tab 10-12.5 mg (Zestoretic).... 10
lisinopril & hydrochlorothiazide tab 20-12.5 mg (Zestoretic).... 10
lisinopril & hydrochlorothiazide tab 20-25 mg (Zestoretic).... 10
lisinopril tab 5 mg (Prinivil).... 10
lisinopril tab 10 mg (Prinivil).... 10
lisinopril tab 20 mg (Prinivil).... 10
lisinopril tab 2.5 mg (Zestril).... 10
lisinopril tab 30 mg (Zestril).... 10
lisinopril tab 40 mg (Zestril).... 10
lithium carbonate cap 300 mg....20
lithium carbonate cap 150 mg (Lithium carbonate)....20
lithium carbonate cap 600 mg (Lithium carbonate)....20
lithium carbonate tab 300 mg.... 20
lorazepam tab 0.5 mg (Ativan).... 19
lorazepam tab 1 mg (Ativan).... 19
lorazepam tab 2 mg (Ativan).... 19
losartan potassium & hydrochlorothiazide tab 50-12.5 mg (Hyzaar).... 10
losartan potassium & hydrochlorothiazide tab 100-12.5 mg (Hyzaar).... 10
losartan potassium & hydrochlorothiazide tab 100-25 mg (Hyzaar).... 10
losartan potassium tab 25 mg (Cozaar).... 10
losartan potassium tab 50 mg (Cozaar).... 10
losartan potassium tab 100 mg (Cozaar).... 10
LOTEMAX – loteprednol etabonate ophth gel 0.5%....32
LOTEMAX – loteprednol etabonate ophth oint 0.5%....32
LOTEMAX – loteprednol etabonate ophth susp 0.5%....32
lovastatin tab 10 mg.... 12
lovastatin tab 20 mg (Mevacor)....12
lovastatin tab 40 mg (Mevacor)....12
LUMIGAN – bimatoprost ophth soln 0.01%....33
LYRICA – pregabalin cap 25 mg....24
LYRICA – pregabalin cap 50 mg....24
LYRICA – pregabalin cap 75 mg....24
LYRICA – pregabalin cap 100 mg....24
LYRICA – pregabalin cap 150 mg....24
LYRICA – pregabalin cap 200 mg....24
LYRICA – pregabalin cap 225 mg....24
LYRICA – pregabalin cap 300 mg....24

M

medroxyprogesterone acetate tab 2.5 mg (Provera).... 6
medroxyprogesterone acetate tab 5 mg (Provera).... 6
medroxyprogesterone acetate tab 10 mg (Provera).... 6
megestrol acetate tab 20 mg.... 4
megestrol acetate tab 40 mg.... 4
MEKINIST – trametinib dimethyl sulfoxide tab 0.5 mg (base equivalent)....4
MEKINIST – trametinib dimethyl sulfoxide tab 2 mg (base equivalent)....4
meloxicam tab 7.5 mg (Mobic).... 23
meloxicam tab 15 mg (Mobic).... 23
MEPHYTON – phytonadione tab 5 mg....25
MESNEX – mesna tab 400 mg....4
metformin hcl tab 500 mg (Glucophage).... 7
metformin hcl tab 850 mg (Glucophage).... 7
metformin hcl tab 1000 mg (Glucophage).... 7
metformin hcl tab sr 24hr 500 mg (Glucophage xr)....7
metformin hcl tab sr 24hr 750 mg (Glucophage xr)....7
methadone hcl tab for oral susp 40 mg....22
methadone hcl tab 10 mg (Dolophine)....22
methadone hcl tab 5 mg (Dolophine hcl)....22
methimazole tab 5 mg (Tapazole).... 9
methimazole tab 10 mg (Tapazole).... 9
methocarbamol tab 750 mg (Robaxin-750)....25
methocarbamol tab 500 mg (Robaxin)....25
methyldopa tab 250 mg.... 14
methyldopa tab 500 mg.... 14
metoclopramide hcl soln 5 mg/5ml (10 mg/10ml).... 18
metoclopramide hcl tab 5 mg (Reglan)....18
metoclopramide hcl tab 10 mg (Reglan)....18

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metoprolol succinate tab sr 24hr 25 mg (tartrate equiv) (Toprol xl) 11
metoprolol succinate tab sr 24hr 50 mg (tartrate equiv) (Toprol xl) 11
metoprolol tartrate tab 25 mg 11
metoprolol tartrate tab 50 mg (Lopressor) 11
metoprolol tartrate tab 100 mg (Lopressor) 11
metronidazole tab 250 mg (Flagyl) 4
metronidazole tab 500 mg (Flagyl) 4
MIGRANAL – dihydroergotamine mesylate nasal spray 4 mg/ml 24
minocycline hcl cap 50 mg (Minocin) 1
minocycline hcl cap 75 mg (Minocin) 1
minocycline hcl cap 100 mg (Minocin) 1
minoxidil tab 2.5 mg 14
minoxidil tab 10 mg 14
mirtazapine tab 15 mg (Remeron) 19
mirtazapine tab 30 mg (Remeron) 19
mirtazapine tab 45 mg (Remeron) 19
misoprostol tab 100 mcg (Cytotec) 17
misoprostol tab 200 mcg (Cytotec) 17
MONOCLATE-P – antihemophilic factor (human) for inj kit 250 unit 30
MONOCLATE-P – antihemophilic factor (human) for inj kit 1000 unit 30
MONOCLATE-P – antihemophilic factor (human) for inj kit 1500 unit 30
MONONINE – coagulation factor ix for inj 500 unit 30
MONONINE – coagulation factor ix for inj 1000 unit 30
montelukast sodium chew tab 4 mg (base equiv) (Singulair) 16
montelukast sodium chew tab 5 mg (base equiv) (Singulair) 16
montelukast sodium tab 10 mg (base equiv) (Singulair) 16
MORPHINE SULFATE – morphine sulfate suppos 5 mg 22
MORPHINE SULFATE – morphine sulfate suppos 10 mg 22
MORPHINE SULFATE – morphine sulfate suppos 20 mg 22
MORPHINE SULFATE – morphine sulfate suppos 30 mg 22
MORPHINE SULFATE – morphine sulfate tab 15 mg 22
MORPHINE SULFATE – morphine sulfate tab 30 mg 22
MULTAQ – dronedarone hcl tab 400 mg (base equivalent) 13
multiple vitamins w/ minerals & fa tab 1.25 mg (Corvite) 26
mupirocin oint 2% (Bactroban) 34
MYLERAN – busulfan tab 2 mg 4

N

nabumetone tab 500 mg 23
nabumetone tab 750 mg 23
naproxen sodium tab 275 mg (Anaprox) 23
naproxen sodium tab 550 mg (Anaprox ds) 23
naproxen tab ec 375 mg (Ec-naprosyn) 23
naproxen tab ec 500 mg (Ec-naprosyn) 24
naproxen tab 250 mg (Naprosyn) 24
naproxen tab 375 mg (Naprosyn) 24
naproxen tab 500 mg (Naprosyn) 24
NARCAN – naloxone hcl nasal spray 4 mg/0.1ml 35
NASONEX – mometasone furoate nasal susp 50 mcg/act 14
NATACYN – natamycin ophth susp 5% 32
neomycin-polymyxin-dexamethasone ophth oint 0.1% (Maxitrol) 32
neomycin-polymyxin-dexamethasone ophth susp 0.1% (Maxitrol) 32
neomycin sulfate tab 500 mg 1
NEULASTA ONPRO KIT – pegfilgrastim soln prefilled syringe kit 6 mg/0.6ml 30
NEULASTA – pegfilgrastim soln prefilled syringe 6 mg/0.6ml 30
NEUPOGEN – filgrastim inj 300 mcg/ml 30
NEUPOGEN – filgrastim inj 480 mcg/1.6ml (300 mcg/ml) 30
NEUPOGEN – filgrastim soln prefilled syringe 300 mcg/0.5ml 30
NEUPOGEN – filgrastim soln prefilled syringe 480 mcg/0.8ml (600 mcg/ml) 30
nevirapine tab 200 mg (Viramune) 2
NEXAVAR – sorafenib tosylate tab 200 mg (base equivalent) 4
NEXIUM – esomeprazole magnesium for delayed release susp packet 5 mg 17
NEXIUM – esomeprazole magnesium for delayed release susp packet 10 mg 17
NEXIUM – esomeprazole magnesium for delayed release susp packet 20 mg 17
NEXIUM – esomeprazole magnesium for delayed release susp packet 40 mg 17
NEXIUM – esomeprazole magnesium for delayed release susp pack 2.5 mg 17
NICOTROL INHALER – nicotine inhaler system 10 mg (4 mg delivered) 21
NICOTROL NS – nicotine nasal spray 10 mg/ml (0.5 mg/spray) 22
nifedipine tab sr 24hr 30 mg (Adalat cc) 12
nifedipine tab sr 24hr osmotic release 30 mg (Procardia xl) 12
NILANDRON – nilutamide tab 150 mg 4
nitroglycerin cap cr 2.5 mg 12

NITROSTAT – nitroglycerin sl tab 0.3 mg..... 12
NITROSTAT – nitroglycerin sl tab 0.4 mg..... 12
NITROSTAT – nitroglycerin sl tab 0.6 mg..... 12
nizatidine cap 150 mg..... 17
norethindrone & ethinyl estradiol tab 1 mg-35 mcg (Norinyl 1+35).....6
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg (Ortho-cyclen)..... 6
norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg (Ortho tri-cyclen).....6
nortriptyline hcl cap 10 mg (Pamelor).....19
nortriptyline hcl cap 25 mg (Pamelor).....19
nortriptyline hcl cap 50 mg (Pamelor).....19
nortriptyline hcl cap 75 mg (Pamelor).....19
NORVIR – ritonavir cap 100 mg..... 2
NORVIR – ritonavir oral soln 80 mg/ml.....2
NORVIR – ritonavir tab 100 mg..... 2
NOVOEIGHT – antihemophilic factor (recombinant) for inj 250 unit.....30
NOVOEIGHT – antihemophilic factor (recombinant) for inj 500 unit.....30
NOVOEIGHT – antihemophilic factor (recombinant) for inj 1000 unit.....30
NOVOEIGHT – antihemophilic factor (recombinant) for inj 1500 unit.....30
NOVOEIGHT – antihemophilic factor (recombinant) for inj 2000 unit.....30
NOVOEIGHT – antihemophilic factor (recombinant) for inj 3000 unit.....30
NOVOLIN 70/30 – insulin nph isophane & regular human inj 100 unit/ml (70-30).....8
NOVOLIN N – insulin nph (human) (isophane) inj 100 unit/ml.....8
NOVOLIN R – insulin regular (human) inj 100 unit/ml..... 8
NOVOLOG FLEXPEN – insulin aspart soln pen-injector 100 unit/ml..... 8
NOVOLOG – insulin aspart inj 100 unit/ml..... 8
NOVOLOG MIX 70/30 – insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)..... 8
NOVOLOG MIX 70/30 PREFILL – insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30).....8
NOVOLOG PENFILL – insulin aspart soln cartridge 100 unit/ml.....8
NOVOSEVEN RT – coagulation factor viia (recomb) for inj 1 mg (1000 mcg).....30
NOVOSEVEN RT – coagulation factor viia (recomb) for inj 2 mg (2000 mcg).....30
NOVOSEVEN RT – coagulation factor viia (recomb) for inj 5 mg (5000 mcg).....30
NOVOSEVEN RT – coagulation factor viia (recomb) for inj 8 mg (8000 mcg).....30
NOXAFIL – posaconazole susp 40 mg/ml..... 1
NOXAFIL – posaconazole tab delayed release 100 mg..... 1
NUCYNTA ER – tapentadol hcl tab sr 12hr 50 mg..... 22
NUCYNTA ER – tapentadol hcl tab sr 12hr 100 mg..... 22
NUCYNTA ER – tapentadol hcl tab sr 12hr 150 mg..... 22
NUCYNTA ER – tapentadol hcl tab sr 12hr 200 mg..... 22
NUCYNTA ER – tapentadol hcl tab sr 12hr 250 mg..... 22
NUEDEXTA – dextromethorphan hbr-quinidine sulfate cap 20-10 mg.....22
NUVARING – etonogestrel-ethinyl estradiol va ring 0.120-0.015 mg/24hr..... 6
NUWIQ – antihemophilic factor (recombinant) for inj kit 250 unit..... 30
NUWIQ – antihemophilic factor (recombinant) for inj kit 500 unit..... 31
NUWIQ – antihemophilic factor (recombinant) for inj kit 1000 unit..... 31
NUWIQ – antihemophilic factor (recombinant) for inj kit 2000 unit..... 31
NUWIQ – antihemophilic factor (recombinant) for inj 250 unit.....30
NUWIQ – antihemophilic factor (recombinant) for inj 500 unit.....30
NUWIQ – antihemophilic factor (recombinant) for inj 1000 unit.....30
NUWIQ – antihemophilic factor (recombinant) for inj 2000 unit.....30

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OBIZUR – antihemophilic factor (recomb porc) rpfviii for inj 500 unit..... 31
ofloxacin ophth soln 0.3% (Ocuflox)..... 32
olanzapine tab 2.5 mg (Zyprexa).....20
olanzapine tab 5 mg (Zyprexa).....20
olanzapine tab 7.5 mg (Zyprexa).....20
olanzapine tab 10 mg (Zyprexa).....20
omeprazole cap delayed release 10 mg (Prilosec)..... 17
omeprazole cap delayed release 20 mg (Prilosec)..... 17
omeprazole cap delayed release 40 mg (Prilosec)..... 17
OMNITROPE – somatropin for inj 5.8 mg..... 9
OMNITROPE – somatropin inj 5 mg/1.5ml..... 9
OMNITROPE – somatropin inj 10 mg/1.5ml..... 9
ondansetron hcl tab 4 mg (Zofran).....17
ondansetron orally disintegrating tab 4 mg (Zofran odt).....17
ONGLYZA – saxagliptin hcl tab 2.5 mg (base equiv).....7
ONGLYZA – saxagliptin hcl tab 5 mg (base equiv).....7
OPSUMIT – macitentan tab 10 mg..... 14
ORAP – pimozide tab 1 mg..... 22
ORAP – pimozide tab 2 mg..... 22
ORFADIN – nitisinone cap 2 mg..... 9
ORFADIN – nitisinone cap 5 mg..... 9
ORFADIN – nitisinone cap 10 mg..... 9
ORFADIN – nitisinone susp 4 mg/ml..... 9
oxcarbazepine tab 150 mg (Trileptal)..... 24

oxybutynin chloride syrup 5 mg/5ml.....18
oxycodone hcl tab 5 mg (Roxicodone).....23
oxycodone w/ acetaminophen tab 5-325 mg (Percocet).....23
OXYCONTIN – oxycodone hcl tab er 12hr deter 10 mg.....23
OXYCONTIN – oxycodone hcl tab er 12hr deter 15 mg.....23
OXYCONTIN – oxycodone hcl tab er 12hr deter 20 mg.....23
OXYCONTIN – oxycodone hcl tab er 12hr deter 30 mg.....23
OXYCONTIN – oxycodone hcl tab er 12hr deter 40 mg.....23
OXYCONTIN – oxycodone hcl tab er 12hr deter 60 mg.....23
OXYCONTIN – oxycodone hcl tab er 12hr deter 80 mg.....23

P

pantoprazole sodium ec tab 20 mg (base equiv) (Protonix).....17
pantoprazole sodium ec tab 40 mg (base equiv) (Protonix).....17
paroxetine hcl tab 10 mg (Paxil).....19
paroxetine hcl tab 20 mg (Paxil).....19
paroxetine hcl tab 30 mg (Paxil).....19
paroxetine hcl tab 40 mg (Paxil).....19
PATADAY – olopatadine hcl ophth soln 0.2% (base equivalent).....33
PAZEO – olopatadine hcl ophth soln 0.7% (base equivalent).....33
pediatric multiple vitamins w/ fl-fe drops 0.25-10 mg/ml.....26
pediatric multiple vitamins w/ fluoride chew tab 0.25 mg.....26
pediatric multiple vitamins w/ fluoride chew tab 0.5 mg.....26
pediatric multiple vitamins w/ fluoride chew tab 1 mg.....26
pediatric multiple vitamins w/ fluoride soln 0.25 mg/ml.....26
pediatric multiple vitamins w/ fluoride soln 0.5 mg/ml.....26
pediatric vitamins acd w/ fluoride soln 0.25 mg/ml.....26
pediatric vitamins acd w/ fluoride soln 0.5 mg/ml.....26
PEGASYS – peginterferon alfa-2a inj 180 mcg/ml.....2
PEGASYS – peginterferon alfa-2a inj 180 mcg/0.5ml.....2
PEGASYS PROCLICK – peginterferon alfa-2a inj 135 mcg/0.5ml.....2
PEGASYS PROCLICK – peginterferon alfa-2a inj 180 mcg/0.5ml.....2
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm (Colyte-flavor packs).....16
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm (Golytely).....16
peg 3350-kcl-sod bicarb-nacl for soln 420 gm (Nulytely/flavor pack).....16
penicillin v potassium for soln 125 mg/5ml.....1
penicillin v potassium for soln 250 mg/5ml.....1
penicillin v potassium tab 250 mg.....1
penicillin v potassium tab 500 mg.....1
PENTASA – mesalamine cap cr 250 mg.....18
PENTASA – mesalamine cap cr 500 mg.....18
pentoxifylline tab cr 400 mg.....31
perindopril erbumine tab 2 mg.....10
phenazopyridine hcl tab 100 mg (Pyridium).....18
phenazopyridine hcl tab 200 mg (Pyridium).....18
phenobarbital tab 16.2 mg.....20
phenobarbital tab 32.4 mg.....20
phenylephrine-promethazine w/ codeine syrup 5-6.25-10 mg/5ml.....14
pioglitazone hcl tab 15 mg (base equiv) (Actos).....7
pioglitazone hcl tab 30 mg (base equiv) (Actos).....8
pioglitazone hcl tab 45 mg (base equiv) (Actos).....8
PLEGRIDY – peginterferon beta-1a soln pen-injector 125 mcg/0.5ml.....21
PLEGRIDY – peginterferon beta-1a soln prefilled syringe 125 mcg/0.5ml.....21
PLEGRIDY STARTER PACK – peginterferon beta-1a soln pen-inj 63 & 94 mcg/0.5ml pack.....21
PLEGRIDY STARTER PACK – peginterferon beta-1a soln pref syr 63 & 94 mcg/0.5ml pack.....21
polyethylene glycol 3350 oral powder.....16
polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1% (Polytrim).....32
potassium chloride microencapsulated crys cr tab 10 meq.....26
potassium chloride microencapsulated crys cr tab 20 meq.....26
potassium chloride tab cr 10 meq (K-tab).....26
potassium chloride tab cr 8 meq (600 mg).....26
PRALUENT – alirocumab subcutaneous soln pen-injector 75 mg/ml.....12
PRALUENT – alirocumab subcutaneous soln pen-injector 150 mg/ml.....12
PRALUENT – alirocumab subcutaneous soln prefilled syringe 75 mg/ml.....12
PRALUENT – alirocumab subcutaneous soln prefilled syringe 150 mg/ml.....12
pramipexole dihydrochloride tab 0.125 mg (Mirapex).....25
pramipexole dihydrochloride tab 0.25 mg (Mirapex).....25
pramipexole dihydrochloride tab 0.5 mg (Mirapex).....25

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pramipexole dihydrochloride tab 0.75 mg (Mirapex)..... 25
pramipexole dihydrochloride tab 1 mg (Mirapex)..... 25
pramipexole dihydrochloride tab 1.5 mg (Mirapex)..... 25
pravastatin sodium tab 10 mg..... 12
pravastatin sodium tab 20 mg (Pravachol)..... 12
pravastatin sodium tab 40 mg (Pravachol)..... 12
prazosin hcl cap 1 mg (Minipress)..... 14
prazosin hcl cap 2 mg (Minipress)..... 14
PREDNISOLONE SODIUM PHOSP – prednisolone sodium phosphate ophth soln 1%..... 32
prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)..... 5
prednisolone syrup 15 mg/5ml (usp solution equivalent) (Prelone)..... 5
PREDNISONE INTENSOL – prednisone conc 5 mg/ml..... 5
PREDNISONE – prednisone oral soln 5 mg/5ml..... 5
PREDNISONE – prednisone tab 50 mg..... 5
prednisone tab 1 mg..... 5
prednisone tab 2.5 mg..... 5
prednisone tab 5 mg..... 5
prednisone tab 10 mg..... 5
prednisone tab 20 mg..... 6
PRENATABS FA – prenatal vit w/ fe fumarate-fa tab 29-1 mg..... 26
PRENATAL PLUS – prenatal vit w/ fe fumarate-fa tab 27-1 mg..... 26
PRENATAL 19 – prenatal vit w/ dss-fe fumarate-fa tab 29-1 mg..... 26
PRENATAL 19 – prenatal vit w/ fe fumarate-fa chew tab 29-1 mg..... 26
PRENATAL VITAMINS PLUS LO – prenatal vit w/ fe fumarate-fa tab 27-1 mg..... 26
PREZISTA – darunavir ethanolate susp 100 mg/ml (base equiv)..... 2
PREZISTA – darunavir ethanolate tab 75 mg (base equiv)..... 3
PREZISTA – darunavir ethanolate tab 150 mg (base equiv)..... 3
PREZISTA – darunavir ethanolate tab 600 mg (base equiv)..... 3
PREZISTA – darunavir ethanolate tab 800 mg (base equiv)..... 3
PRIFTIN – rifapentine tab 150 mg..... 1
PRIMAQUINE PHOSPHATE – primaquine phosphate tab 26.3 mg (15 mg base)..... 3
primidone tab 50 mg (Mysoline)..... 25
PROAIR HFA – albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)..... 16
PROAIR RESPICLICK – albuterol sulfate aer pow ba 108 mcg/act (90 mcg base equiv)..... 16
prochlorperazine maleate tab 5 mg (base equivalent) (Compazine)..... 20
prochlorperazine maleate tab 10 mg (base equivalent) (Compazine)..... 20
PROCRIT – epoetin alfa inj 2000 unit/ml..... 31
PROCRIT – epoetin alfa inj 3000 unit/ml..... 31
PROCRIT – epoetin alfa inj 4000 unit/ml..... 31
PROCRIT – epoetin alfa inj 10000 unit/ml..... 31
PROCRIT – epoetin alfa inj 20000 unit/ml..... 31
PROCRIT – epoetin alfa inj 40000 unit/ml..... 31
PROFILNINE – factor ix complex for inj 500 unit..... 31
PROFILNINE – factor ix complex for inj 1000 unit..... 31
PROFILNINE – factor ix complex for inj 1500 unit..... 31
PROFILNINE SD – factor ix complex for inj 500 unit..... 31
PROFILNINE SD – factor ix complex for inj 1000 unit..... 31
PROFILNINE SD – factor ix complex for inj 1500 unit..... 31
PROGRAF – tacrolimus cap 0.5 mg..... 35
PROGRAF – tacrolimus cap 1 mg..... 35
PROGRAF – tacrolimus cap 5 mg..... 35
promethazine & phenylephrine syrup 6.25-5 mg/5ml..... 14
promethazine-dm syrup 6.25-15 mg/5ml..... 14
promethazine hcl syrup 6.25 mg/5ml..... 14
promethazine hcl tab 12.5 mg..... 14
promethazine hcl tab 25 mg..... 14
promethazine hcl tab 50 mg..... 14
promethazine w/ codeine syrup 6.25-10 mg/5ml..... 14
proparacaine hcl ophth soln 0.5% (Alcaine)..... 33
PROPRANOLOL HCL – propranolol hcl oral soln 20 mg/5ml..... 11
PROPRANOLOL HCL – propranolol hcl oral soln 40 mg/5ml..... 11
propranolol hcl tab 10 mg..... 11
propranolol hcl tab 20 mg..... 11
propranolol hcl tab 40 mg..... 11
propranolol hcl tab 80 mg..... 11
PULMOZYME – dornase alfa inhal soln 1 mg/ml..... 16
PURIXAN – mercaptopurine susp 2000 mg/100ml (20 mg/ml)..... 4

Q

quetiapine fumarate tab 25 mg (Seroquel)..... 20
quetiapine fumarate tab 50 mg (Seroquel)..... 20
quetiapine fumarate tab 100 mg (Seroquel)..... 20
quinapril hcl tab 5 mg (Accupril)..... 10
quinapril hcl tab 10 mg (Accupril)..... 10
quinapril hcl tab 20 mg (Accupril)..... 10
quinapril hcl tab 40 mg (Accupril)..... 10
QVAR – beclomethasone diprop inhal aero soln 40 mcg/act (50/valve)..... 16
QVAR – beclomethasone diprop inhal aero soln 80 mcg/act (100/valve)..... 16

R

ramipril cap 1.25 mg (Altace)..... 10

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ramipril cap 2.5 mg (Altace)..... 10
ramipril cap 5 mg (Altace)..... 10
ramipril cap 10 mg (Altace)..... 10
ranitidine hcl syrup 15 mg/ml (75 mg/5ml)..... 17
ranitidine hcl tab 300 mg (Zantac)..... 17
RAPAMUNE – sirolimus oral soln 1 mg/ml..... 35
REBIF – interferon beta-1a soln pref syr 22 mcg/0.5ml (12mu/ml)..... 21
REBIF – interferon beta-1a soln pref syr 44 mcg/0.5ml (24mu/ml)..... 21
REBIF REBIDOSE – interferon beta-1a soln auto-inj 22 mcg/0.5ml (12mu/ml)..... 21
REBIF REBIDOSE – interferon beta-1a soln auto-inj 44 mcg/0.5ml (24mu/ml)..... 21
REBIF REBIDOSE TITRATION – interferon beta-1a auto-inj 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml..... 21
REBIF TITRATION PACK – interferon beta-1a pref syr 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml..... 21
RECOMBINATE – antihemophilic factor (recombinant) for inj 220-400 unit..... 31
RECOMBINATE – antihemophilic factor (recombinant) for inj 401-800 unit..... 31
RECOMBINATE – antihemophilic factor (recombinant) for inj 801-1240 unit..... 31
RECOMBINATE – antihemophilic factor (recombinant) for inj 1241-1800 unit..... 31
RECOMBINATE – antihemophilic factor (recombinant) for inj 1801-2400 unit..... 31
RENVELA – sevelamer carbonate packet 0.8 gm..... 18
RENVELA – sevelamer carbonate packet 2.4 gm..... 18
RENVELA – sevelamer carbonate tab 800 mg..... 18
REPATHA – evolocumab subcutaneous soln prefilled syringe 140 mg/ml..... 12
REPATHA PUSHTRONEX SYSTEM – evolocumab subcutaneous soln cartridge/infusor 420 mg/3.5ml..... 12
REPATHA SURECLICK – evolocumab subcutaneous soln auto-injector 140 mg/ml..... 13
RESCRIPTOR – delavirdine mesylate tab 100 mg..... 3
RESCRIPTOR – delavirdine mesylate tab 200 mg..... 3
REVLIMID – lenalidomide cap 5 mg..... 35
REVLIMID – lenalidomide cap 10 mg..... 35
REVLIMID – lenalidomide cap 15 mg..... 35
REVLIMID – lenalidomide cap 20 mg..... 35
REVLIMID – lenalidomide cap 25 mg..... 35
REVLIMID – lenalidomide caps 2.5 mg..... 35
REYATAZ – atazanavir sulfate cap 150 mg (base equiv)..... 3
REYATAZ – atazanavir sulfate cap 200 mg (base equiv)..... 3
REYATAZ – atazanavir sulfate cap 300 mg (base equiv)..... 3
REYATAZ – atazanavir sulfate oral powder packet 50 mg (base equiv)..... 3
risperidone tab 0.25 mg (Risperdal)..... 20
risperidone tab 0.5 mg (Risperdal)..... 20
risperidone tab 1 mg (Risperdal)..... 20
risperidone tab 2 mg (Risperdal)..... 20
risperidone tab 3 mg (Risperdal)..... 20
risperidone tab 4 mg (Risperdal)..... 20
RIXUBIS – coagulation factor ix (recombinant) for inj 250 unit..... 31
RIXUBIS – coagulation factor ix (recombinant) for inj 500 unit..... 31
RIXUBIS – coagulation factor ix (recombinant) for inj 1000 unit..... 31
RIXUBIS – coagulation factor ix (recombinant) for inj 2000 unit..... 31
RIXUBIS – coagulation factor ix (recombinant) for inj 3000 unit..... 31
ropinirole hydrochloride tab 0.25 mg (Requip)..... 25
ropinirole hydrochloride tab 0.5 mg (Requip)..... 25
ropinirole hydrochloride tab 1 mg (Requip)..... 25
ropinirole hydrochloride tab 2 mg (Requip)..... 25
ropinirole hydrochloride tab 3 mg (Requip)..... 25
ropinirole hydrochloride tab 4 mg (Requip)..... 25
ropinirole hydrochloride tab 5 mg (Requip)..... 25

S

SABRIL – vigabatrin powd pack 500 mg..... 25
SABRIL – vigabatrin tab 500 mg..... 25
selenium sulfide lotion 2.5%..... 34
SELZENTRY – maraviroc tab 150 mg..... 3
SELZENTRY – maraviroc tab 300 mg..... 3
SE-NATAL 19 – prenatal vit w/ dss-fe fumarate-fa tab 29-1 mg..... 26
SE-NATAL 19 – prenatal vit w/ fe fumarate-fa chew tab 29-1 mg..... 26
SENSIPAR – cinacalcet hcl tab 30 mg (base equiv)..... 9
SENSIPAR – cinacalcet hcl tab 60 mg (base equiv)..... 9
SENSIPAR – cinacalcet hcl tab 90 mg (base equiv)..... 9
SEREVENT DISKUS – salmeterol xinafoate aer pow ba 50 mcg/dose (base equiv)..... 16
SEROQUEL XR – quetiapine fumarate tab sr 24hr 50 mg..... 20
SEROQUEL XR – quetiapine fumarate tab sr 24hr 150 mg..... 20
SEROQUEL XR – quetiapine fumarate tab sr 24hr 200 mg..... 20
SEROQUEL XR – quetiapine fumarate tab sr 24hr 300 mg..... 20
SEROQUEL XR – quetiapine fumarate tab sr 24hr 400 mg..... 20
sertraline hcl tab 25 mg (Zoloft)..... 19
sertraline hcl tab 50 mg (Zoloft)..... 19
sertraline hcl tab 100 mg (Zoloft)..... 19

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silver nitrate-potassium nitrate applicator 75-25% (Arzol silver nitrate)..... 34
silver sulfadiazine cream 1% (Silvadene)..... 34
SIMBRINZA – brinzolamide-brimonidine tartrate ophth susp 1-0.2%.....33
SIMPONI – golimumab subcutaneous soln auto-injector 50 mg/0.5ml.....24
SIMPONI – golimumab subcutaneous soln auto-injector 100 mg/ml.....24
SIMPONI – golimumab subcutaneous soln prefilled syringe 50 mg/0.5ml.....24
SIMPONI – golimumab subcutaneous soln prefilled syringe 100 mg/ml.....24
simvastatin tab 5 mg (Zocor)..... 13
simvastatin tab 10 mg (Zocor)..... 13
simvastatin tab 20 mg (Zocor)..... 13
simvastatin tab 40 mg (Zocor)..... 13
simvastatin tab 80 mg (Zocor)..... 13
SIVEXTRO – tedizolid phosphate tab 200 mg.....4
sodium chloride soln nebu 0.9%..... 14
sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf) (Luride).....26
sodium fluoride chew tab 0.5 mg f (from 1.1 mg naf) (Luride).....26
sodium fluoride chew tab 1 mg f (from 2.2 mg naf) (Luride).....26
sodium fluoride cream 1.1% (Prevident 5000 plus)..... 33
sodium fluoride gel 1.1% (0.5% f) (Prevident fluoride).....33
sodium fluoride paste 1.1% (Prevident 5000 boost).....33
sodium fluoride-potassium nitrate paste 1.1-5% (Prevident 5000 sensi)..... 33
sodium fluoride rinse 0.2% (Prevident).....33
sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf) (Luride).....26
sotalol hcl tab 80 mg (Betapace)..... 13
sotalol hcl tab 120 mg (Betapace)..... 13
sotalol hcl tab 160 mg (Betapace)..... 13
SOVALDI – sofosbuvir tab 400 mg..... 2
SPIRIVA HANDIHALER – tiotropium bromide monohydrate inhal cap 18 mcg (base equiv)..... 16
SPIRIVA RESPIMAT – tiotropium bromide monohydrate inhal aerosol 1.25 mcg/act.....16
SPIRIVA RESPIMAT – tiotropium bromide monohydrate inhal aerosol 2.5 mcg/act.....16
spironolactone tab 25 mg (Aldactone).....13
spironolactone tab 50 mg (Aldactone).....13
SPRYCEL – dasatinib tab 20 mg.....4
SPRYCEL – dasatinib tab 50 mg.....4
SPRYCEL – dasatinib tab 70 mg.....4
SPRYCEL – dasatinib tab 80 mg.....4
SPRYCEL – dasatinib tab 100 mg.....4
SPRYCEL – dasatinib tab 140 mg.....4
STELARA – ustekinumab soln prefilled syringe 45 mg/0.5ml..... 34
STELARA – ustekinumab soln prefilled syringe 90 mg/ml.....34
STIMATE – desmopressin acetate nasal soln 1.5 mg/ml.....9
STRENSIQ – asfotase alfa subcutaneous inj 18 mg/0.45ml..... 9
STRENSIQ – asfotase alfa subcutaneous inj 28 mg/0.7ml..... 9
STRENSIQ – asfotase alfa subcutaneous inj 40 mg/ml..... 9
STRENSIQ – asfotase alfa subcutaneous inj 80 mg/0.8ml..... 9
STRIBILD – elvitegrav-cobic-emtricitab-tenofovdf tab 150-150-200-300 mg.....3
SUBOXONE – buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv).....35
SUBOXONE – buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)..... 35
SUBOXONE – buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)..... 35
SUBOXONE – buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)..... 35
sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%..... 32
sulfamethoxazole-trimethoprim susp 200-40 mg/5ml.....4
sulfamethoxazole-trimethoprim tab 400-80 mg (Bactrim)..... 4
sulfamethoxazole-trimethoprim tab 800-160 mg (Bactrim ds).....4
sulindac tab 150 mg..... 24
sulindac tab 200 mg..... 24
sumatriptan succinate tab 25 mg (Imitrex).....24
sumatriptan succinate tab 50 mg (Imitrex).....24
sumatriptan succinate tab 100 mg (Imitrex).....24
SUSTIVA – efavirenz cap 50 mg..... 3
SUSTIVA – efavirenz cap 200 mg..... 3
SUSTIVA – efavirenz tab 600 mg..... 3
SUTENT – sunitinib malate cap 12.5 mg (base equivalent).....5
SUTENT – sunitinib malate cap 25 mg (base equivalent).....5
SUTENT – sunitinib malate cap 37.5 mg (base equivalent).....5
SUTENT – sunitinib malate cap 50 mg (base equivalent).....5
SYLATRON – peginterferon alfa-2b for inj kit 200 mcg..... 5
SYLATRON – peginterferon alfa-2b for inj kit 300 mcg..... 5
SYLATRON – peginterferon alfa-2b for inj kit 600 mcg..... 5
SYMBICORT – budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act..... 16

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SYMBICORT – budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act..... 16
SYNJARDY – empagliflozin-metformin hcl tab 5-500 mg..... 8
SYNJARDY – empagliflozin-metformin hcl tab 5-1000 mg..... 8
SYNJARDY – empagliflozin-metformin hcl tab 12.5-500 mg..... 8
SYNJARDY – empagliflozin-metformin hcl tab 12.5-1000 mg..... 8

T

TABLOID – thioguanine tab 40 mg..... 5
TAFINLAR – dabrafenib mesylate cap 50 mg (base equivalent).....5
TAFINLAR – dabrafenib mesylate cap 75 mg (base equivalent).....5
tamoxifen citrate tab 10 mg (base equivalent)..... 5
tamoxifen citrate tab 20 mg (base equivalent)..... 5
tamsulosin hcl cap 0.4 mg (Flomax)..... 18
TARCEVA – erlotinib hcl tab 25 mg (base equivalent).....5
TARCEVA – erlotinib hcl tab 100 mg (base equivalent).....5
TARCEVA – erlotinib hcl tab 150 mg (base equivalent).....5
TASIGNA – nilotinib hcl cap 150 mg (base equivalent)..... 5
TASIGNA – nilotinib hcl cap 200 mg (base equivalent)..... 5
TAZORAC – tazarotene cream 0.05%..... 34
TAZORAC – tazarotene cream 0.1%..... 34
TAZORAC – tazarotene gel 0.05%..... 34
TAZORAC – tazarotene gel 0.1%..... 34
TECFIDERA – dimethyl fumarate capsule delayed release 120 mg.....21
TECFIDERA – dimethyl fumarate capsule delayed release 240 mg.....21
TECFIDERA STARTER PACK – dimethyl fumarate capsule dr starter pack 120 mg & 240 mg..... 21
TEGRETOL-XR – carbamazepine tab sr 12hr 100 mg.....25
temazepam cap 15 mg (Restoril)..... 20
temazepam cap 30 mg (Restoril)..... 20
terazosin hcl cap 1 mg.....14
terazosin hcl cap 2 mg.....14
terazosin hcl cap 5 mg.....14
terazosin hcl cap 10 mg.....14
terbinafine hcl tab 250 mg (Lamisil).....1
TEST STRIPS – BAYER ASCENSIA AUTODISC, BREEZE 2, CONTOUR, CONTOUR NEXT..... 34
TEST STRIPS – ROCHE ACTIVE, AVIVA, AVIVA PLUS, COMFORT CURVE, COMPACT, COMPACTPLUS, SMARTVIEW..... 34
tetracaine hcl ophth soln 0.5%..... 33
THALOMID – thalidomide cap 50 mg..... 35
THALOMID – thalidomide cap 100 mg..... 35
THALOMID – thalidomide cap 150 mg..... 35
THALOMID – thalidomide cap 200 mg..... 35
theophylline tab sr 12hr 100 mg..... 16
thyroid tab 30 mg (1/2 grain) (Armour thyroid)..... 9
thyroid tab 90 mg (1 1/2 grain) (Armour thyroid)..... 9
thyroid tab 60 mg (1 grain) (Armour thyroid)..... 9
timolol maleate ophth soln 0.25% (Timoptic)..... 33
timolol maleate ophth soln 0.5% (Timoptic)..... 33
TIMOLOL MALEATE – timolol maleate tab 5 mg..... 11
TIMOLOL MALEATE – timolol maleate tab 10 mg..... 11
TIMOLOL MALEATE – timolol maleate tab 20 mg..... 11
TIVICAY – dolutegravir sodium tab 10 mg (base equiv)..... 3
TIVICAY – dolutegravir sodium tab 25 mg (base equiv)..... 3
TIVICAY – dolutegravir sodium tab 50 mg (base equiv)..... 3
tizanidine hcl tab 2 mg (base equivalent)..... 25
tizanidine hcl tab 4 mg (base equivalent) (Zanaflex)..... 25
tobramycin ophth soln 0.3% (Tobrex)..... 32
topiramate tab 25 mg (Topamax)..... 25
topiramate tab 50 mg (Topamax)..... 25
topiramate tab 100 mg (Topamax)..... 25
topiramate tab 200 mg (Topamax)..... 25
torsemide tab 5 mg (Demadex).....13
torsemide tab 10 mg (Demadex).....13
torsemide tab 20 mg (Demadex).....13
TOUJEO SOLOSTAR – insulin glargine soln pen-injector 300 unit/ml..... 8
TRACLEER – bosentan tab 62.5 mg..... 14
TRACLEER – bosentan tab 125 mg..... 14
tramadol-acetaminophen tab 37.5-325 mg (Ultracet)..... 23
tramadol hcl tab 50 mg (Ultram)..... 23
trandolapril tab 1 mg (Mavik)..... 10
trandolapril tab 2 mg (Mavik)..... 10
trandolapril tab 4 mg (Mavik)..... 10
TRAVATAN Z – travoprost ophth soln 0.004% (benzalkonium free) (bak free)..... 33
trazodone hcl tab 50 mg..... 19
trazodone hcl tab 100 mg..... 20
trazodone hcl tab 150 mg..... 20
TRESIBA FLEXTOUCH – insulin degludec soln pen-injector 100 unit/ml.....8
TRESIBA FLEXTOUCH – insulin degludec soln pen-injector 200 unit/ml.....8
TRETTEN – coagulation factor xiii a-subunit for inj 2000-3125 unit.....31
TREXALL – methotrexate sodium tab 5 mg (base equiv).....5
TREXALL – methotrexate sodium tab 7.5 mg (base equiv).....5
TREXALL – methotrexate sodium tab 10 mg (base equiv).....5
TREXALL – methotrexate sodium tab 15 mg (base equiv).....5
triamcinolone acetonide cream 0.025%..... 34

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triamcinolone acetonide cream 0.1% **34**
triamcinolone acetonide cream 0.5% **34**
triamcinolone acetonide oint 0.025% **34**
triamcinolone acetonide oint 0.1% **34**
triamterene & hydrochlorothiazide cap 37.5-25 mg (Dyazide) **13**
triamterene & hydrochlorothiazide tab 37.5-25 mg (Maxzide-25) **13**
triamterene & hydrochlorothiazide tab 75-50 mg (Maxzide) **13**
trihexyphenidyl hcl tab 2 mg **25**
trihexyphenidyl hcl tab 5 mg **25**
trimethoprim tab 100 mg **4**
tropicamide ophth soln 0.5% **33**
tropicamide ophth soln 1% (Mydriacyl) **33**
TRUVADA – emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg 3
TRUVADA – emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg 3
TRUVADA – emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg 3
TRUVADA – emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg 3

U

UPTRAVI – selexipag tab 200 mcg 14
UPTRAVI – selexipag tab 400 mcg 14
UPTRAVI – selexipag tab 600 mcg 14
UPTRAVI – selexipag tab 800 mcg 14
UPTRAVI – selexipag tab 1000 mcg 14
UPTRAVI – selexipag tab 1200 mcg 14
UPTRAVI – selexipag tab 1400 mcg 14
UPTRAVI – selexipag tab 1600 mcg 14
UPTRAVI – selexipag tab therapy pack 200 mcg (140) & 800 mcg (60) 14

V

VAGIFEM – estradiol vaginal tab 10 mcg 18
VALCHLOR – mechlorethamine hcl gel 0.016% (base equivalent) 34
VALCYTE – valganciclovir hcl for soln 50 mg/ml (base equiv) 1
valsartan-hydrochlorothiazide tab 80-12.5 mg (Diovan hct) **11**
valsartan-hydrochlorothiazide tab 320-12.5 mg (Diovan hct) **11**
valsartan-hydrochlorothiazide tab 320-25 mg (Diovan hct) **11**
VELPHORO – sucroferric oxyhydroxide chew tab 500 mg 18
venlafaxine hcl cap sr 24hr 37.5 mg (base equivalent) (Effexor xr) **20**
venlafaxine hcl cap sr 24hr 75 mg (base equivalent) (Effexor xr) **20**
venlafaxine hcl cap sr 24hr 150 mg (base equivalent) (Effexor xr) **20**
VENTOLIN HFA – albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv) 16
verapamil hcl tab cr 120 mg (Calan sr) **12**
verapamil hcl tab cr 180 mg (Calan sr) **12**
verapamil hcl tab cr 240 mg (Calan sr) **12**
verapamil hcl tab 80 mg (Calan) **12**
verapamil hcl tab 120 mg (Calan) **12**
VESICARE – solifenacin succinate tab 5 mg 18
VESICARE – solifenacin succinate tab 10 mg 18
VICTOZA – liraglutide soln pen-injector 18 mg/3ml (6 mg/ml) 8
VIDEX – didanosine for soln 2 gm 3
VIDEX – didanosine for soln 4 gm 3
VIGAMOX – moxifloxacin hcl ophth soln 0.5% (base equiv) 32
VIRACEPT – nelfinavir mesylate tab 250 mg 3
VIRACEPT – nelfinavir mesylate tab 625 mg 3
VIRAMUNE – nevirapine susp 50 mg/5ml 3
VIRAMUNE XR – nevirapine tab sr 24hr 100 mg 3
VIREAD – tenofovir disoproxil fumarate oral powder 40 mg/gm 3
VIREAD – tenofovir disoproxil fumarate tab 150 mg 3
VIREAD – tenofovir disoproxil fumarate tab 200 mg 3
VIREAD – tenofovir disoproxil fumarate tab 250 mg 3
VIREAD – tenofovir disoproxil fumarate tab 300 mg 3
VOLTAREN – diclofenac sodium gel 1% 34
VONVENDI – von willebrand factor (recombinant) for inj 650 unit 31
VONVENDI – von willebrand factor (recombinant) for inj 1300 unit 31
VOTRIENT – pazopanib hcl tab 200 mg (base equiv) 5
VYVANSE – lisdexamfetamine dimesylate cap 10 mg 21
VYVANSE – lisdexamfetamine dimesylate cap 20 mg 21
VYVANSE – lisdexamfetamine dimesylate cap 30 mg 21
VYVANSE – lisdexamfetamine dimesylate cap 40 mg 21
VYVANSE – lisdexamfetamine dimesylate cap 50 mg 21
VYVANSE – lisdexamfetamine dimesylate cap 60 mg 21
VYVANSE – lisdexamfetamine dimesylate cap 70 mg 21

W

warfarin sodium tab 1 mg (Coumadin) **31**
warfarin sodium tab 2 mg (Coumadin) **31**
warfarin sodium tab 2.5 mg (Coumadin) **31**
warfarin sodium tab 3 mg (Coumadin) **31**
warfarin sodium tab 4 mg (Coumadin) **31**
warfarin sodium tab 5 mg (Coumadin) **31**
warfarin sodium tab 6 mg (Coumadin) **31**
warfarin sodium tab 7.5 mg (Coumadin) **31**
warfarin sodium tab 10 mg (Coumadin) **31**

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WELCHOL – colesevelam hcl packet for susp 3.75 gm.... 13
WELCHOL – colesevelam hcl tab 625 mg.... 13
WILATE – antihemophilic factor/vwf (human) for inj 500-500 unit kit....31
WILATE – antihemophilic factor/vwf (human) for inj 1000-1000 unit kit....32

X

XALKORI – crizotinib cap 200 mg.... 5
XALKORI – crizotinib cap 250 mg.... 5
XARELTO – rivaroxaban tab 10 mg....32
XARELTO – rivaroxaban tab 15 mg....32
XARELTO – rivaroxaban tab 20 mg....32
XARELTO STARTER PACK – rivaroxaban tab starter therapy pack 15 mg & 20 mg....32
XIFAXAN – rifaximin tab 550 mg.... 4
XYNTHA – antihemophilic factor recombinant paf for inj kit 250 unit....32
XYNTHA – antihemophilic factor recombinant paf for inj kit 500 unit....32
XYNTHA – antihemophilic factor recombinant paf for inj kit 1000 unit....32
XYNTHA – antihemophilic factor recombinant paf for inj kit 2000 unit....32
XYNTHA SOLOFUSE – antihemophilic factor recombinant paf for inj kit 250 unit....32
XYNTHA SOLOFUSE – antihemophilic factor recombinant paf for inj kit 500 unit....32
XYNTHA SOLOFUSE – antihemophilic factor recombinant paf for inj kit 1000 unit....32
XYNTHA SOLOFUSE – antihemophilic factor recombinant paf for inj kit 2000 unit....32
XYNTHA SOLOFUSE – antihemophilic factor recombinant paf for inj kit 3000 unit....32

Y

Z

zaleplon cap 5 mg (Sonata)....20
zaleplon cap 10 mg (Sonata)....20
ZARXIO – filgrastim-sndz soln prefilled syringe 300 mcg/0.5ml....32
ZARXIO – filgrastim-sndz soln prefilled syringe 480 mcg/0.8ml....32
ZELBORAF – vemurafenib tab 240 mg.... 5
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 3000-10000-16000 unit.... 17
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 5000-17000-27000 unit.... 17
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 10000-34000-55000 unit.... 17
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 15000-51000-82000 unit.... 17
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 20000-68000-109000 unit.... 17
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 25000-85000-136000 unit.... 17
ZENPEP – pancrelipase (lip-prot-amyl) dr cap 40000-136000-218000 unit.... 17
ZIAGEN – abacavir sulfate soln 20 mg/ml (base equiv)..... 3
zolpidem tartrate tab 5 mg (Ambien)....20
zolpidem tartrate tab 10 mg (Ambien)....20
zonisamide cap 25 mg (Zonegran).... 25
ZORTRESS – everolimus tab 0.25 mg.... 35
ZORTRESS – everolimus tab 0.5 mg.... 35
ZORTRESS – everolimus tab 0.75 mg.... 35
ZYCLARA – imiquimod cream 3.75%.... 34
ZYCLARA PUMP – imiquimod cream 2.5%.... 34
ZYCLARA PUMP – imiquimod cream 3.75%.... 34
ZYLET – loteprednol etabonate-tobramycin ophth susp 0.5-0.3%....32
ZYTIGA – abiraterone acetate tab 250 mg....5
ZYVOX – linezolid for susp 100 mg/5ml.... 4