Individual and Family Plans

2026 Cigna Healthcare Plus Illinois 4-Tier Prescription Drug List

Coverage as of January 1, 2026

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View your drug list online, 24/7

- **Cigna.com/ifp-drug-list.** Choose **Illinois** from the dropdown list and pick your search method. Then type in your medication name or view the full list.
- **myCigna® App[1] or myCigna.com®.** Starting January 1, 2026, log into your account and use the Price a Medication tool to see how your medication is covered.

Questions?

Call **866.494.2111** or the toll-free number on your Cigna Healthcare® ID card. We're here 24/7/365.

If you need language assistance, or have a disability, please call us at **800.244.6224 (For TTY services, dial 711)**. Accommodations are available and provided at no cost to you.

About this drug list

This is a list of the prescription medications covered on the Cigna Healthcare Plus Illinois 4-Tier Prescription Drug List as of January 1, 2026. All medications are approved by the U.S. Food and Drug Administration (FDA). Medications are listed in alphabetical order (A-Z). If you don't see a certain medication listed here, log in to the myCigna App or **myCigna.com** to see all of the medications your plan covers.

How to read this drug list

Use the table below to understand how medications are covered on the Cigna Healthcare Plus Illinois 4-Tier Prescription Drug List.

Medication Name	Generic Name	Tier	Notes
ACETAMINOPHEN-CODEINE #2 TABLET		1	PA
ACETAMINOPHEN-CODEINE #3 TABLET		1	PA
ACETAMINOPHEN-CODEINE #4 TABLET		1	PA
ACETAZOLAMIDE 125 MG TABLET		1	
ACETAZOLAMIDE 250 MG TABLET		1	
ACETAZOLAMIDE ER 500 MG CAPSULE		1	
ACETIC ACID 0.25% EAR SOLUTION		1	
ACETIC ACID 2% EAR SOLUTION		1	
ACETYLCYSTEINE 10% VIAL		1	
ACETYLCYSTEINE 20% VIAL		1	
ACITRETIN 10 MG CAPSULE		3	
ACITRETIN 17.5 MG CAPSULE		3	
ACITRETIN 25 MG CAPSULE		3	
ACTEMRA 162 MG/0.9 ML SYRINGE		4	PA, QL, LDD, SRX
ACTEMRA ACTPEN 162 MG/0.9 ML		4	PA, QL, LDD, SRX
ACTHIB VACCINE VIAL		2	
ACTHIB VACCINE WITH DILUENT		2	
ACTIMMUNE 100 MCG/0.5 ML VIAL		4	PA, LDD, SRX
ACYCLOVIR 200 MG CAPSULE		1	
ACYCLOVIR 200 MG/5 ML SUSPENSION		1	
ACYCLOVIR 400 MG TABLET		1	
ACYCLOVIR 800 MG TABLET		1	
ACYCLOVIR 5% OINTMENT		3	PA, QL
ADACEL TDAP VIAL		2	
ADALIMUMAB-ADBM(CF) 10 MG SYRINGE		4	PA, QL, SRX
ADALIMUMAB-ADBM(CF) 20 MG SYRINGE		4	PA, QL, SRX
ADALIMUMAB-ADBM(CF) 40 MG SYRINGE		4	PA, QL, SRX

Medications are listed in **alphabetical** order (A-Z)

Tier (cost-share level) gives you an idea of how much you may pay for a medication

Medications that have extra coverage rules (requirements) have **letters (acronyms)** listed next to them in the Notes column

Specialty medications have SRX listed next to them in the Notes column

* This table is just an example. It may not show how these medications are currently covered on this drug list.

Tiers

We put covered medications into tiers (or cost-share levels). Typically, the higher the tier, the higher the price you'll pay for the medication.

Tier 1	**Generic Medications** (and some low-cost brand-name medications). Generics work in the same way and provide the same clinical benefits as their brand-name versions – and typically cost much less.[2]	**$**
Tier 2	**Preferred Brand Medications** (and some high-cost generics).	**$$**
Tier 3	**Non-Preferred Brand Medications** (and some high-cost generics).	**$$$**
Tier 4	**Specialty and Other High-Cost Generic and Brand-Name Medications.** Your plan covers Tier 4 medications in up to a 30-day supply. *These medications are covered at your plan's highest cost-share.*	**$$$$**

Letters (acronyms) in the Notes column

In this drug list, some medications have **letters (acronyms)** next to them in the Notes column. Here's what they mean.

PA	**Prior Authorization** – This medication needs approval from Cigna Healthcare before your plan will cover it. Your doctor's office will have to send us information to review to make sure you meet the medication's coverage rules (requirements).
QL	**Quantity Limit** – Your plan will only cover so much of this medication at one time. If your doctor wants you to fill more than what's allowed, your doctor's office can ask us to cover more.
AGE	**Age Requirement** – Your plan will only cover this medication if you're a certain age or within a certain age range. If you're not within the allowed age range and your doctor wants you to use the medication, your doctor's office can ask us to cover it.
SRX	This is a **specialty medication**, which is used to treat rare and/or complex medical conditions. They're typically injected or infused and may need special handling, such as refrigeration.
LDD	This is a **"limited distribution drug."** It a high-cost specialty medication that treats medical conditions that are very hard to manage and need special handling, patient support and monitoring. It can only be filled at a select number of specialty pharmacies in the United States.

Plan exclusions

There are certain medications and products that your plan won't cover for any reason. They're known as a "plan (or benefit) exclusion." This means they aren't on your plan's drug list and there's no option to ask us to cover them through our medication review process.

For example, your plan doesn't cover, or "excludes," medications that the FDA hasn't approved.

How to find your medication

Use the table below to find the page your medication is listed on.

* Some medications start with a number instead of a letter.

2026 Cigna Healthcare Plus Illinois 4-Tier Prescription Drug List

Medication Name	Generic Name	Tier	Notes
1ST TIER UNIFINE PENTIP 29G 1/2"	PEN NEEDLE, DIABETIC	2	
1ST TIER UNIFINE PENTIP 29G 12MM	PEN NEEDLE, DIABETIC	2	
1ST TIER UNIFINE PENTIP 31G 1/4"	PEN NEEDLE, DIABETIC	2	
1ST TIER UNIFINE PENTIP 31G 3/16"	PEN NEEDLE, DIABETIC	2	
1ST TIER UNIFINE PENTIP 31G 5/16"	PEN NEEDLE, DIABETIC	2	
1ST TIER UNIFINE PENTIP 31G 5MM	PEN NEEDLE, DIABETIC	2	
1ST TIER UNIFINE PENTIP 31G 6MM	PEN NEEDLE, DIABETIC	2	
1ST TIER UNIFINE PENTIP 31G 8MM	PEN NEEDLE, DIABETIC	2	
1ST TIER UNIFINE PENTIP 32G 4MM	PEN NEEDLE, DIABETIC	2	
1ST TIER UNIFINE PENTIP 32G 5/32"	PEN NEEDLE, DIABETIC	2	
2TEK CONTROL SOLUTION	BLOOD GLUCOSE CNTL HIGH,NORMAL	2	
ABACAVIR 20 MG/ML ORAL SOLUTION	ABACAVIR SULFATE	1	SRX
ABACAVIR 300 MG TABLET	ABACAVIR SULFATE	1	SRX
ABACAVIR-LAMIVUDINE 600-300 MG TABLET	ABACAVIR SULFATE/LAMIVUDINE	1	SRX
ABIRATERONE 250 MG TABLET	ABIRATERONE ACETATE	4	PA, SRX
ABIRATERONE 500 MG TABLET	ABIRATERONE ACETATE	4	PA, SRX
ABRYSVO ACT-O-VIAL	RSV VACC, PREF A AND PREF B/PF	2	
ABRYSVO VIAL WITH DILUENT SYRINGE	RSV VACC, PREF A AND PREF B/PF	2	
ACAMPROSATE DR 333 MG TABLET	ACAMPROSATE CALCIUM	1	
ACARBOSE 100 MG TABLET	ACARBOSE	1	
ACARBOSE 25 MG TABLET	ACARBOSE	1	
ACARBOSE 50 MG TABLET	ACARBOSE	1	
ACCU-CHEK AVIVA SOLUTION	BLOOD GLUCOSE CONTROL HIGH,LOW	2	
ACCU-CHEK GUIDE L1-L2 CONTROL SOLUTION	BLOOD GLUCOSE CONTROL HIGH,LOW	2	
ACCU-CHEK SMARTVIEW CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
ACCUTANE 10 MG CAPSULE	ISOTRETINOIN	3	
ACCUTANE 20 MG CAPSULE	ISOTRETINOIN	3	
ACCUTANE 30 MG CAPSULE	ISOTRETINOIN	3	
ACCUTANE 40 MG CAPSULE	ISOTRETINOIN	3	
ACCUTREND GLUCOSE CONTROL	BLOOD GLUCOSE CONTROL HIGH,LOW	2	
ACE AEROSOL CLOUD ENHANCER	INHALER, ASSIST DEVICES	2	QL
ACEBUTOLOL 200 MG CAPSULE	ACEBUTOLOL HCL	1	
ACEBUTOLOL 400 MG CAPSULE	ACEBUTOLOL HCL	1	
ACETAMINOPHEN-CAFFEINE-DIHYDROCODEINE 320.5-30 MG CAPSULE	ACETAMINOPHEN/CAFF/DIHYDROCOD	1	PA
ACETAMINOPHEN-CODEINE #2 TABLET	ACETAMINOPHEN WITH CODEINE	1	PA
ACETAMINOPHEN-CODEINE #3 TABLET	ACETAMINOPHEN WITH CODEINE	1	PA
ACETAMINOPHEN-CODEINE #4 TABLET	ACETAMINOPHEN WITH CODEINE	1	PA
ACETAMINOPHEN-CODEINE 120-12 MG/5 ML ORAL SOLUTION	ACETAMINOPHEN WITH CODEINE	1	
ACETAMINOPHEN-CODEINE 300-30 MG/12.5 ML ORAL SOLUTION	ACETAMINOPHEN WITH CODEINE	1	
ACETAZOLAMIDE 125 MG TABLET	ACETAZOLAMIDE	1	

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Medication Name	Generic Name	Tier	Notes
ACETAZOLAMIDE 250 MG TABLET	ACETAZOLAMIDE	1	
ACETAZOLAMIDE ER 500 MG CAPSULE	ACETAZOLAMIDE	1	
ACETIC ACID 0.25% IRRIGATION SOLUTION	ACETIC ACID	1	
ACETIC ACID 2% EAR SOLUTION	ACETIC ACID	1	
ACETYLCYSTEINE 10% VIAL	ACETYLCYSTEINE	1	
ACETYLCYSTEINE 20% VIAL	ACETYLCYSTEINE	1	
ACITRETIN 10 MG CAPSULE	ACITRETIN	3	
ACITRETIN 17.5 MG CAPSULE	ACITRETIN	3	
ACITRETIN 25 MG CAPSULE	ACITRETIN	3	
ACTEMRA 162 MG/0.9 ML SYRINGE	TOCILIZUMAB	4	PA, QL, LDD, SRX
ACTEMRA ACTPEN 162 MG/0.9 ML	TOCILIZUMAB	4	PA, QL, LDD, SRX
ACTHIB VACCINE VIAL	HAEMOPH B POLY CONJ-TET TOX/PF	2	
ACTHIB VACCINE WITH DILUENT	HAEMOPH B POLY CONJ-TET TOX/PF	2	
ACTIMMUNE 100 MCG/0.5 ML VIAL	INTERFERON GAMMA-1B,RECOMB.	4	PA, LDD, SRX
ACYCLOVIR 200 MG CAPSULE	ACYCLOVIR	1	
ACYCLOVIR 5% OINTMENT	ACYCLOVIR	3	PA, QL
ACYCLOVIR 200 MG/5 ML ORAL SUSPENSION	ACYCLOVIR	1	
ACYCLOVIR 400 MG TABLET	ACYCLOVIR	1	
ACYCLOVIR 800 MG TABLET	ACYCLOVIR	1	
ADACEL TDAP SYRINGE	DIPH,PERTUSS(ACELL),TET VAC/PF	2	
ADACEL TDAP VIAL	DIPH,PERTUSS(ACELL),TET VAC/PF	2	
ADALIMUMAB-ADBM (CF) 40 MG CROHN'S PEN	ADALIMUMAB-ADBM	4	PA, QL, SRX
ADALIMUMAB-ADBM (CF) 40 MG PEN	ADALIMUMAB-ADBM	4	PA, QL, SRX
ADALIMUMAB-ADBM (CF) 40 MG PSORIASIS-UVEITIS PEN	ADALIMUMAB-ADBM	4	PA, QL, SRX
ADALIMUMAB-ADBM (CF) 10 MG SYRINGE	ADALIMUMAB-ADBM	4	PA, QL, SRX
ADALIMUMAB-ADBM (CF) 20 MG SYRINGE	ADALIMUMAB-ADBM	4	PA, QL, SRX
ADALIMUMAB-ADBM (CF) 40 MG SYRINGE	ADALIMUMAB-ADBM	4	PA, QL, SRX
ADALIMUMAB-RYVK (CF) 40 MG AUTO-INJECTOR	ADALIMUMAB-RYVK	4	PA, QL, SRX
ADALIMUMAB-RYVK (CF) 40 MG SYRINGE	ADALIMUMAB-RYVK	4	PA, QL, SRX
ADAPALENE 0.1% CREAM	ADAPALENE	2	PA, AGE
ADAPALENE 0.1% LOTION	ADAPALENE	2	PA, AGE
ADAPALENE 0.3% GEL	ADAPALENE	2	PA, AGE
ADAPALENE 0.3% GEL PUMP	ADAPALENE	2	PA, AGE
ADAPALENE 0.1% TOPICAL SOLUTION	ADAPALENE	2	PA, AGE
ADEFOVIR 10 MG TABLET	ADEFOVIR DIPIVOXIL	4	SRX
ADEMPAS 0.5 MG TABLET	RIOCIGUAT	4	PA, LDD, SRX
ADEMPAS 1 MG TABLET	RIOCIGUAT	4	PA, LDD, SRX
ADEMPAS 1.5 MG TABLET	RIOCIGUAT	4	PA, LDD, SRX
ADEMPAS 2 MG TABLET	RIOCIGUAT	4	PA, LDD, SRX
ADEMPAS 2.5 MG TABLET	RIOCIGUAT	4	PA, LDD, SRX
ADVOCATE HIGH CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, HIGH	2	

2026 Cigna Healthcare Plus Illinois 4-Tier Prescription Drug List

Medication Name	Generic Name	Tier	Notes
ADVOCATE INSULIN SYRINGE 0.3 ML 29G 1/2"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
ADVOCATE INSULIN SYRINGE 0.3 ML 30G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
ADVOCATE INSULIN SYRINGE 0.3 ML 31G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
ADVOCATE INSULIN SYRINGE 0.5 ML 29G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
ADVOCATE INSULIN SYRINGE 0.5 ML 30G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
ADVOCATE INSULIN SYRINGE 0.5 ML 31G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
ADVOCATE INSULIN SYRINGE 1 ML 29G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
ADVOCATE INSULIN SYRINGE 1 ML 30G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
ADVOCATE INSULIN SYRINGE 1 ML 31G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
ADVOCATE LOW CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, LOW	2	
ADVOCATE PEN NEEDLE 29G 12.7MM	PEN NEEDLE, DIABETIC	2	
ADVOCATE PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC	2	
ADVOCATE PEN NEEDLE 31G 8MM	PEN NEEDLE, DIABETIC	2	
ADVOCATE PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
ADVOCATE PEN NEEDLE 33G 4MM	PEN NEEDLE, DIABETIC	2	
ADVOCATE REDI-CODE+ CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, HIGH	2	
AEROCHAMBER MECHANICAL VENT	INHALER, ASSIST DEVICES	2	QL
AEROCHAMBER MINI	INHALER, ASSIST DEVICES	2	QL
AEROCHAMBER MV HOLD CHAMBER	INHALER, ASSIST DEVICES	2	QL
AEROCHAMBER PLUS FLOW-VU	INHALER, ASSIST DEVICES	2	QL
AEROCHAMBER PLUS FLOW-VU LARGE	INHALER,ASSIST DEVICE,LG MASK	2	QL
AEROCHAMBER PLUS FLOW-VU MEDIUM	INHALER,ASSIST DEVICE,MED MASK	2	QL
AEROCHAMBER PLUS FLOW-VU SMALL	INHALER,ASSIST DEV,SMALL MASK	2	QL
AEROCHAMBER Z-STAT PLUS LARGE	INHALER,ASSIST DEVICE,LG MASK	2	QL
AEROCHAMBER Z-STAT PLUS-MEDIUM	INHALER,ASSIST DEVICE,MED MASK	2	QL
AEROCHAMBER Z-STAT PLUS-SMALL	INHALER,ASSIST DEV,SMALL MASK	2	QL
AEROCHAMBER Z-STAT PLUS W-FLOW	INHALER, ASSIST DEVICES	2	QL
AEROGEAR ASTHMA ACTION KIT	PEAK FLOW METER/INH ASSIT DEV	2	
AEROTRACH HOLDING CHAMBER	INHALER, ASSIST DEVICES	2	QL
AEROVENT PLUS HOLDING CHAMBER	INHALER, ASSIST DEVICES	2	QL
AFIRMELLE-28 TABLET	LEVONORGESTREL/ETHIN.ESTRADIOL	1	
AFLURIA	FLU VACC TS2024-25 36MOS UP/PF	2	
AFLURIA	FLU VACC TS 2024-25 (6 MOS UP)	2	
AFTER PILL 1.5 MG TABLET	LEVONORGESTREL	1	
AFTERA 1.5 MG TABLET	LEVONORGESTREL	3	
AGAMATRIX HIGH CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, HIGH	2	
AGAMATRIX NORM-HI CONTROL SOLUTION	BLOOD GLUCOSE CNTL HIGH,NORMAL	2	
AIRZONE PEAK FLOW METER	PEAK FLOW METER	2	
AK-POLY-BAC EYE OINTMENT	BACITRACIN/POLYMYXIN B SULFATE	1	
AKYNZEO 300-0.5 MG CAPSULE	NETUPITANT/PALONOSETRON HCL	4	PA, QL
ALBENDAZOLE 200 MG TABLET	ALBENDAZOLE	3	PA

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Medication Name	Generic Name	Tier	Notes
ALBUSTIX REAGENT TEST STRIP	URINE ALBUMIN TEST	2	
ALBUTEROL 0.63 MG/3 ML INHALATION SOLUTION	ALBUTEROL SULFATE	1	
ALBUTEROL 1.25 MG/3 ML INHALATION SOLUTION	ALBUTEROL SULFATE	1	
ALBUTEROL 2.5 MG/0.5 ML INHALATION SOLUTION	ALBUTEROL SULFATE	1	
ALBUTEROL 2.5 MG/3 ML INHALATION SOLUTION	ALBUTEROL SULFATE	1	
ALBUTEROL 5 MG/ML INHALATION SOLUTION	ALBUTEROL SULFATE	1	
ALBUTEROL 15 MG/3 ML INHALATION SOLUTION	ALBUTEROL SULFATE	1	
ALBUTEROL 25 MG/5 ML INHALTION SOLUTION	ALBUTEROL SULFATE	1	
ALBUTEROL 75 MG/15 ML INHALATION SOLUTION	ALBUTEROL SULFATE	1	
ALBUTEROL 100 MG/20 ML INHALATION SOLUTION	ALBUTEROL SULFATE	1	
ALBUTEROL 2 MG/5 ML SYRUP	ALBUTEROL SULFATE	1	
ALBUTEROL 2 MG TABLET	ALBUTEROL SULFATE	1	
ALBUTEROL 4 MG TABLET	ALBUTEROL SULFATE	1	
ALBUTEROL ER 4 MG TABLET	ALBUTEROL SULFATE	1	
ALBUTEROL ER 8 MG TABLET	ALBUTEROL SULFATE	1	
ALBUTEROL HFA 90 MCG INHALER	ALBUTEROL SULFATE	1	QL
ALCLOMETASONE 0.05% CREAM	ALCLOMETASONE DIPROPIONATE	1	
ALCLOMETASONE 0.05% OINTMENT	ALCLOMETASONE DIPROPIONATE	1	
ALCOHOL PREP PAD	ALCOHOL ANTISEPTIC PADS	2	
ALECENSA 150 MG CAPSULE	ALECTINIB HCL	4	PA, QL, LDD, SRX
ALENDRONATE 70 MG/75 ML ORAL SOLUTION	ALENDRONATE SODIUM	1	
ALENDRONATE 5 MG TABLET	ALENDRONATE SODIUM	1	
ALENDRONATE 10 MG TABLET	ALENDRONATE SODIUM	1	
ALENDRONATE 35 MG TABLET	ALENDRONATE SODIUM	1	
ALENDRONATE 70 MG TABLET	ALENDRONATE SODIUM	1	
ALFUZOSIN ER 10 MG TABLET	ALFUZOSIN HCL	1	
ALINIA 100 MG/5 ML ORAL SUSPENSION	NITAZOXANIDE	3	
ALISKIREN 150 MG TABLET	ALISKIREN HEMIFUMARATE	3	QL
ALISKIREN 300 MG TABLET	ALISKIREN HEMIFUMARATE	3	QL
ALLOPURINOL 100 MG TABLET	ALLOPURINOL	1	
ALLOPURINOL 300 MG TABLET	ALLOPURINOL	1	
ALMOTRIPTAN 6.25 MG TABLET	ALMOTRIPTAN MALATE	2	QL
ALMOTRIPTAN 12.5 MG TABLET	ALMOTRIPTAN MALATE	2	QL
ALOCRIL 2% EYE DROPS	NEDOCROMIL SODIUM	3	
ALOSETRON 0.5 MG TABLET	ALOSETRON HCL	4	SRX
ALOSETRON 1 MG TABLET	ALOSETRON HCL	4	SRX
ALPRAZOLAM 0.25 MG ODT TABLET	ALPRAZOLAM	1	
ALPRAZOLAM 0.5 MG ODT TABLET	ALPRAZOLAM	1	
ALPRAZOLAM 1 MG ODT TABLET	ALPRAZOLAM	1	
ALPRAZOLAM 2 MG ODT TABLET	ALPRAZOLAM	1	
ALPRAZOLAM 0.25 MG TABLET	ALPRAZOLAM	1	

2026 Cigna Healthcare Plus Illinois 4-Tier Prescription Drug List

Medication Name	Generic Name	Tier	Notes
ALPRAZOLAM 0.5 MG TABLET	ALPRAZOLAM	1	
ALPRAZOLAM 1 MG TABLET	ALPRAZOLAM	1	
ALPRAZOLAM 2 MG TABLET	ALPRAZOLAM	1	
ALPRAZOLAM ER 0.5 MG TABLET	ALPRAZOLAM	1	
ALPRAZOLAM ER 1 MG TABLET	ALPRAZOLAM	1	
ALPRAZOLAM ER 2 MG TABLET	ALPRAZOLAM	1	
ALPRAZOLAM ER 3 MG TABLET	ALPRAZOLAM	1	
ALPRAZOLAM INTENSOL 1 MG/ML ORAL CONCENTRATE	ALPRAZOLAM	1	
ALPRAZOLAM XR 0.5 MG TABLET	ALPRAZOLAM	1	
ALPRAZOLAM XR 1 MG TABLET	ALPRAZOLAM	1	
ALPRAZOLAM XR 2 MG TABLET	ALPRAZOLAM	1	
ALPRAZOLAM XR 3 MG TABLET	ALPRAZOLAM	1	
ALTABAX 1% OINTMENT	RETAPAMULIN	3	
ALTACAINE 0.5% EYE DROPS	TETRACAINE HCL	1	
ALTAVERA-28 TABLET	LEVONORGESTREL/ETHIN.ESTRADIOL	1	
ALVESCO 80 MCG INHALER	CICLESONIDE	2	
ALVESCO 160 MCG INHALER	CICLESONIDE	2	
ALYACEN 1-35 28 TABLET	NORETHINDRONE-ETHIN. ESTRADIOL	1	
ALYACEN 7-7-7-28 TABLET	NORETHINDRONE-ETHIN. ESTRADIOL	1	
ALYQ 20 MG TABLET	TADALAFIL	4	PA, SRX
AMABELZ 0.5 MG-0.1 MG TABLET	ESTRADIOL/NORETHINDRONE ACET	1	
AMABELZ 1 MG-0.5 MG TABLET	ESTRADIOL/NORETHINDRONE ACET	1	
AMANTADINE 100 MG CAPSULE	AMANTADINE HCL	1	
AMANTADINE 50 MG/5 ML ORAL SOLUTION	AMANTADINE HCL	1	
AMANTADINE 100 MG/10 ML ORAL SOLUTION	AMANTADINE HCL	1	
AMANTADINE 100 MG TABLET	AMANTADINE HCL	1	
AMBRISENTAN 5 MG TABLET	AMBRISENTAN	4	PA, LDD, SRX
AMBRISENTAN 10 MG TABLET	AMBRISENTAN	4	PA, LDD, SRX
AMETHIA 0.15-0.03-0.01 MG TABLET	L-NORGEST/E.ESTRADIOL-E.ESTRAD	1	
AMETHYST 90-20 MCG TABLET	LEVONORGESTREL/ETHIN.ESTRADIOL	1	
AMILORIDE 5 MG TABLET	AMILORIDE HCL	1	
AMILORIDE-HCTZ 5-50 MG TABLET	AMILORIDE/HYDROCHLOROTHIAZIDE	1	
AMINOCAPROIC ACID 0.25 GM/ML ORAL SOLUTION	AMINOCAPROIC ACID	4	PA, SRX
AMINOCAPROIC ACID 1,000 MG TABLET	AMINOCAPROIC ACID	4	PA, SRX
AMINOCAPROIC ACID 500 MG TABLET	AMINOCAPROIC ACID	4	PA, SRX
AMITRIPTYLINE 10 MG TABLET	AMITRIPTYLINE HCL	1	
AMITRIPTYLINE 25 MG TABLET	AMITRIPTYLINE HCL	1	
AMITRIPTYLINE 50 MG TABLET	AMITRIPTYLINE HCL	1	
AMITRIPTYLINE 75 MG TABLET	AMITRIPTYLINE HCL	1	
AMIODARONE 100 MG TABLET	AMIODARONE HCL	1	
AMIODARONE 200 MG TABLET	AMIODARONE HCL	1	

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Medication Name	Generic Name	Tier	Notes
AMIODARONE 400 MG TABLET	AMIODARONE HCL	1	
AMITRIPTYLINE 100 MG TABLET	AMITRIPTYLINE HCL	1	
AMITRIPTYLINE 150 MG TABLET	AMITRIPTYLINE HCL	1	
AMLODIPINE 2.5 MG TABLET	AMLODIPINE BESYLATE	1	
AMLODIPINE 5 MG TABLET	AMLODIPINE BESYLATE	1	
AMLODIPINE 10 MG TABLET	AMLODIPINE BESYLATE	1	
AMLODIPINE-ATORVASTATIN 2.5-10 MG TABLET	AMLODIPINE/ATORVASTATIN	1	
AMLODIPINE-ATORVASTATIN 2.5-20 MG TABLET	AMLODIPINE/ATORVASTATIN	1	
AMLODIPINE-ATORVASTATIN 2.5-40 MG TABLET	AMLODIPINE/ATORVASTATIN	1	
AMLODIPINE-ATORVASTATIN 5-10 MG TABLET	AMLODIPINE/ATORVASTATIN	1	
AMLODIPINE-ATORVASTATIN 5-20 MG TABLET	AMLODIPINE/ATORVASTATIN	1	
AMLODIPINE-ATORVASTATIN 5-40 MG TABLET	AMLODIPINE/ATORVASTATIN	1	
AMLODIPINE-ATORVASTATIN 5-80 MG TABLET	AMLODIPINE/ATORVASTATIN	1	
AMLODIPINE-ATORVASTATIN 10-10 MG TABLET	AMLODIPINE/ATORVASTATIN	1	
AMLODIPINE-ATORVASTATIN 10-20 MG TABLET	AMLODIPINE/ATORVASTATIN	1	
AMLODIPINE-ATORVASTATIN 10-40 MG TABLET	AMLODIPINE/ATORVASTATIN	1	
AMLODIPINE-ATORVASTATIN 10-80 MG TABLET	AMLODIPINE/ATORVASTATIN	1	
AMLODIPINE-BENAZEPRIL 2.5-10 MG CAPSULE	AMLODIPINE BESYLATE/BENAZEPRIL	1	
AMLODIPINE-BENAZEPRIL 5-10 MG CAPSULE	AMLODIPINE BESYLATE/BENAZEPRIL	1	
AMLODIPINE-BENAZEPRIL 5-20 MG CAPSULE	AMLODIPINE BESYLATE/BENAZEPRIL	1	
AMLODIPINE-BENAZEPRIL 5-40 MG CAPSULE	AMLODIPINE BESYLATE/BENAZEPRIL	1	
AMLODIPINE-BENAZEPRIL 10-20 MG CAPSULE	AMLODIPINE BESYLATE/BENAZEPRIL	1	
AMLODIPINE-BENAZEPRIL 10-40 MG CAPSULE	AMLODIPINE BESYLATE/BENAZEPRIL	1	
AMLODIPINE-OLMESARTAN 5-20 MG TABLET	AMLODIPINE BES/OLMESARTAN MED	1	
AMLODIPINE-OLMESARTAN 5-40 MG TABLET	AMLODIPINE BES/OLMESARTAN MED	1	
AMLODIPINE-OLMESARTAN 10-20 MG TABLET	AMLODIPINE BES/OLMESARTAN MED	1	
AMLODIPINE-OLMESARTAN 10-40 MG TABLET	AMLODIPINE BES/OLMESARTAN MED	1	
AMLODIPINE-VALSARTAN 5-160 MG TABLET	AMLODIPINE BESYLATE/VALSARTAN	1	
AMLODIPINE-VALSARTAN 5-320 MG TABLET	AMLODIPINE BESYLATE/VALSARTAN	1	
AMLODIPINE-VALSARTAN 10-160 MG TABLET	AMLODIPINE BESYLATE/VALSARTAN	1	
AMLODIPINE-VALSARTAN 10-320 MG TABLET	AMLODIPINE BESYLATE/VALSARTAN	1	
AMLODIPINE-VALSARTAN-HCTZ 5-160-12.5 MG TABLET	AMLODIPINE/VALSARTAN/HCTHIAZID	2	
AMLODIPINE-VALSARTAN-HCTZ 5-160-25 MG TABLET	AMLODIPINE/VALSARTAN/HCTHIAZID	2	
AMLODIPINE-VALSARTAN-HCTZ 10-160-12.5 MG TABLET	AMLODIPINE/VALSARTAN/HCTHIAZID	2	
AMLODIPINE-VALSARTAN-HCTZ 10-160-25 MG TABLET	AMLODIPINE/VALSARTAN/HCTHIAZID	2	
AMLODIPINE-VALSARTAN-HCTZ 10-320-25 MG TABLET	AMLODIPINE/VALSARTAN/HCTHIAZID	2	
AMMONIUM LACTATE 12% CREAM	AMMONIUM LACTATE	1	
AMMONIUM LACTATE 12% LOTION	AMMONIUM LACTATE	1	
AMNESTEEM 10 MG CAPSULE	ISOTRETINOIN	3	
AMNESTEEM 20 MG CAPSULE	ISOTRETINOIN	3	
AMNESTEEM 40 MG CAPSULE	ISOTRETINOIN	3	

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Medication Name	Generic Name	Tier	Notes
AMOXAPINE 25 MG TABLET	AMOXAPINE	1	
AMOXAPINE 50 MG TABLET	AMOXAPINE	1	
AMOXAPINE 100 MG TABLET	AMOXAPINE	1	
AMOXAPINE 150 MG TABLET	AMOXAPINE	1	
AMOXICILLIN 250 MG CAPSULE	AMOXICILLIN	1	
AMOXICILLIN 500 MG CAPSULE	AMOXICILLIN	1	
AMOXICILLIN 125 MG CHEWABLE TABLET	AMOXICILLIN	1	
AMOXICILLIN 250 MG CHEWABLE TABLET	AMOXICILLIN	1	
AMOXICILLIN 125 MG/5 ML ORAL SUSPENSION	AMOXICILLIN	1	
AMOXICILLIN 200 MG/5 ML ORAL SUSPENSION	AMOXICILLIN	1	
AMOXICILLIN 250 MG/5 ML ORAL SUSPENSION	AMOXICILLIN	1	
AMOXICILLIN 400 MG/5 ML ORAL SUSPENSION	AMOXICILLIN	1	
AMOXICILLIN 500 MG TABLET	AMOXICILLIN	1	
AMOXICILLIN 875 MG TABLET	AMOXICILLIN	1	
AMOXICILLIN-CLAVULANATE 200-28.5 MG CHEWABLE TABLET	AMOXICILLIN/POTASSIUM CLAV	1	
AMOXICILLIN-CLAVULANATE 400-57 MG CHEWABLE TABLET	AMOXICILLIN/POTASSIUM CLAV	1	
AMOXICILLIN-CLAVULANATE 200-28.5 MG/5 ML ORAL SUSPENSION	AMOXICILLIN/POTASSIUM CLAV	1	
AMOXICILLIN-CLAVULANATE 250-62.5 MG/5 ML ORAL SUSPENSION	AMOXICILLIN/POTASSIUM CLAV	1	
AMOXICILLIN-CLAVULANATE 400-57 MG/5 ML ORAL SUSPENSION	AMOXICILLIN/POTASSIUM CLAV	1	
AMOXICILLIN-CLAVULANATE 600-42.9 MG/5 ML ORAL SUSPENSION	AMOXICILLIN/POTASSIUM CLAV	1	
AMOXICILLIN-CLAVULANATE 250-125 MG TABLET	AMOXICILLIN/POTASSIUM CLAV	1	
AMOXICILLIN-CLAVULANATE 500-125 MG TABLET	AMOXICILLIN/POTASSIUM CLAV	1	
AMOXICILLIN-CLAVULANATE 875-125 MG TABLET	AMOXICILLIN/POTASSIUM CLAV	1	
AMOXICILLIN-CLAVULANATE ER 1,000-62.5 MG TABLET	AMOXICILLIN/POTASSIUM CLAV	2	
AMPHETAMINE 5 MG TABLET	AMPHETAMINE SULFATE	2	QL
AMPHETAMINE 10 MG TABLET	AMPHETAMINE SULFATE	2	QL
AMPICILLIN 500 MG CAPSULE	AMPICILLIN TRIHYDRATE	1	
ANAGRELIDE 0.5 MG CAPSULE	ANAGRELIDE HCL	3	
ANAGRELIDE 1 MG CAPSULE	ANAGRELIDE HCL	3	
ANALPRAM HC 2.5%-1% LOTION	HYDROCORTISONE/PRAMOXINE	3	
ANASTROZOLE 1 MG TABLET	ANASTROZOLE	1	
ANNOVERA VAGINAL RING	SEGESTERONE AC/ETHIN ESTRADIOL	1	
ANORO ELLIPTA 62.5-25 MCG INHALER	UMECLIDINIUM BRM/VILANTEROL TR	2	QL
ANUCORT-HC 25 MG SUPPOSITORY	HYDROCORTISONE ACETATE	1	
ANZEMET 50 MG TABLET	DOLASETRON MESYLATE	4	PA, QL
APIDRA 100 UNIT/ML SOLOSTAR	INSULIN GLULISINE	3	QL
APIDRA 100 UNIT/ML VIAL	INSULIN GLULISINE	3	QL
APOMORPHINE 30 MG/3 ML CARTRIDGE	APOMORPHINE HCL	4	PA, QL, SRX

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Medication Name	Generic Name	Tier	Notes
APRACLONIDINE 0.5% DROPS	APRACLONIDINE HCL	1	
APREPITANT 40 MG CAPSULE	APREPITANT	2	QL
APREPITANT 80 MG CAPSULE	APREPITANT	2	QL
APREPITANT 125 MG CAPSULE	APREPITANT	2	QL
APREPITANT 125-80-80 MG PACK	APREPITANT	2	QL
APRETUDE ER 600 MG/3 ML VIAL	CABOTEGRAVIR	4	LDD, SRX
APRI 28 DAY TABLET	DESOGESTREL-ETHINYL ESTRADIOL	1	
APTIOM 200 MG TABLET	ESLICARBAZEPINE ACETATE	3	PA, QL
APTIOM 400 MG TABLET	ESLICARBAZEPINE ACETATE	3	PA, QL
APTIOM 600 MG TABLET	ESLICARBAZEPINE ACETATE	3	PA, QL
APTIOM 800 MG TABLET	ESLICARBAZEPINE ACETATE	3	PA, QL
APTIVUS 250 MG CAPSULE	TIPRANAVIR	2	SRX
AQ INSULIN SYRINGE 0.5 ML 30G 8MM	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
AQ INSULIN SYRINGE 1 ML 29G 12MM	SYRINGE AND NEEDLE,INSULIN,1ML	2	
AQ INSULIN SYRINGE 1 ML 31G 8MM	SYRINGE AND NEEDLE,INSULIN,1ML	2	
AQINJECT PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC	2	
AQINJECT PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
AQUA CARE 0.9% NACL IRRIGATION	SODIUM CHLORIDE IRRIG SOLUTION	1	
AQUA CARE STERILE WATER IRRIGATION	WATER FOR IRRIGATION,STERILE	1	
ARANELLE 28 TABLET	NORETHINDRONE-ETHIN. ESTRADIOL	1	
ARANESP 10 MCG/0.4 ML SYRINGE	DARBEPOETIN ALFA IN POLYSORBAT	4	PA, SRX
ARANESP 25 MCG/0.42 ML SYRINGE	DARBEPOETIN ALFA IN POLYSORBAT	4	PA, SRX
ARANESP 40 MCG/0.4 ML SYRINGE	DARBEPOETIN ALFA IN POLYSORBAT	4	PA, SRX
ARANESP 60 MCG/0.3 ML SYRINGE	DARBEPOETIN ALFA IN POLYSORBAT	4	PA, SRX
ARANESP 100 MCG/0.5 ML SYRINGE	DARBEPOETIN ALFA IN POLYSORBAT	4	PA, SRX
ARANESP 150 MCG/0.3 ML SYRINGE	DARBEPOETIN ALFA IN POLYSORBAT	4	PA, SRX
ARANESP 200 MCG/0.4 ML SYRINGE	DARBEPOETIN ALFA IN POLYSORBAT	4	PA, SRX
ARANESP 300 MCG/0.6 ML SYRINGE	DARBEPOETIN ALFA IN POLYSORBAT	4	PA, SRX
ARANESP 500 MCG/1 ML SYRINGE	DARBEPOETIN ALFA IN POLYSORBAT	4	PA, SRX
ARANESP 25 MCG/ML VIAL	DARBEPOETIN ALFA IN POLYSORBAT	4	PA, SRX
ARANESP 40 MCG/ML VIAL	DARBEPOETIN ALFA IN POLYSORBAT	4	PA, SRX
ARANESP 60 MCG/ML VIAL	DARBEPOETIN ALFA IN POLYSORBAT	4	PA, SRX
ARANESP 100 MCG/ML VIAL	DARBEPOETIN ALFA IN POLYSORBAT	4	PA, SRX
ARANESP 200 MCG/ML VIAL	DARBEPOETIN ALFA IN POLYSORBAT	4	PA, SRX
ARCALYST 220 MG VIAL	RILONACEPT	4	PA, LDD, SRX
AREXVY VIAL KIT	RSVPREF3 ANTIGEN/AS01E/PF	2	
ARFORMOTEROL 15 MCG/2 ML INHALATION SOLUTION	ARFORMOTEROL TARTRATE	3	QL
ARIPIPRAZOLE 10 MG ODT TABLET	ARIPIPRAZOLE	3	
ARIPIPRAZOLE 15 MG ODT TABLET	ARIPIPRAZOLE	3	
ARIPIPRAZOLE 1 MG/ML ORAL SOLUTION	ARIPIPRAZOLE	2	
ARIPIPRAZOLE 2 MG TABLET	ARIPIPRAZOLE	1	

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Medication Name	Generic Name	Tier	Notes
ARIPIPRAZOLE 5 MG TABLET	ARIPIPRAZOLE	1	
ARIPIPRAZOLE 10 MG TABLET	ARIPIPRAZOLE	1	
ARIPIPRAZOLE 15 MG TABLET	ARIPIPRAZOLE	1	
ARIPIPRAZOLE 20 MG TABLET	ARIPIPRAZOLE	1	
ARIPIPRAZOLE 30 MG TABLET	ARIPIPRAZOLE	1	
ARMODAFINIL 50 MG TABLET	ARMODAFINIL	1	PA
ARMODAFINIL 150 MG TABLET	ARMODAFINIL	1	PA
ARMODAFINIL 200 MG TABLET	ARMODAFINIL	1	PA
ARMODAFINIL 250 MG TABLET	ARMODAFINIL	1	PA
ARMOUR THYROID 15 MG TABLET	THYROID,PORK	2	
ARMOUR THYROID 30 MG TABLET	THYROID,PORK	2	
ARMOUR THYROID 60 MG TABLET	THYROID,PORK	2	
ARMOUR THYROID 90 MG TABLET	THYROID,PORK	2	
ARMOUR THYROID 120 MG TABLET	THYROID,PORK	2	
ARMOUR THYROID 180 MG TABLET	THYROID,PORK	2	
ARMOUR THYROID 240 MG TABLET	THYROID,PORK	2	
ARMOUR THYROID 300 MG TABLET	THYROID,PORK	2	
ARNUITY ELLIPTA 50 MCG INHALER	FLUTICASONE FUROATE	2	
ARNUITY ELLIPTA 100 MCG INHALER	FLUTICASONE FUROATE	2	
ARNUITY ELLIPTA 200 MCG INHALER	FLUTICASONE FUROATE	2	
ASCOMP WITH CODEINE CAPSULE	CODEINE/BUTALBITAL/ASA/CAFFEIN	2	PA
ASENAPINE 2.5 MG SUBLINGUAL TABLET	ASENAPINE MALEATE	3	QL
ASENAPINE 5 MG SUBLINGUAL TABLET	ASENAPINE MALEATE	3	QL
ASENAPINE 10 MG SUBLINGUAL TABLET	ASENAPINE MALEATE	3	QL
ASHLYNA 0.15-0.03-0.01 MG TABLET	L-NORGEST/E.ESTRADIOL-E.ESTRAD	1	
ASMANEX 110 MCG #30 TWISTHALER	MOMETASONE FUROATE	3	QL
ASMANEX 220 MCG #14 TWISTHALER	MOMETASONE FUROATE	3	
ASMANEX 220 MCG #30 TWISTHALER	MOMETASONE FUROATE	3	QL
ASMANEX 220 MCG #60 TWISTHALER	MOMETASONE FUROATE	3	QL
ASMANEX 220 MCG #120 TWISTHALER	MOMETASONE FUROATE	3	QL
ASMANEX HFA 50 MCG INHALER	MOMETASONE FUROATE	3	QL
ASMANEX HFA 100 MCG INHALER	MOMETASONE FUROATE	3	QL
ASMANEX HFA 200 MCG INHALER	MOMETASONE FUROATE	3	QL
ASPIRIN-BUTALBITAL-CAFFEINE-CODEINE #3 CAPSULE	CODEINE/BUTALBITAL/ASA/CAFFEIN	2	PA
ASPIRIN-DIPYRIDAMOLE ER 25-200 MG CAPSULE	ASPIRIN/DIPYRIDAMOLE	1	
ASSURE 4 CONTROL SOLUTION	BLOOD-GLUCOSE CALIB. CONTROL	2	
ASSURE DOSE CONTROL SOLUTION	BLOOD GLUCOSE CNTL HIGH,NORMAL	2	
ASSURE ID DUO PRO NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC, SAFETY	2	
ASSURE ID PEN NEEDLE 30G 5/16"	PEN NEEDLE, DIABETIC, SAFETY	2	
ASSURE ID PEN NEEDLE 31G 3/16"	PEN NEEDLE, DIABETIC, SAFETY	2	
ASSURE ID PRO PEN NEEDLE 30G 5MM	PEN NEEDLE, DIABETIC, SAFETY	2	

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Medication Name	Generic Name	Tier	Notes
ASSURE ID SYRINGE 0.5 ML 31G 15/64"	SYRINGE,NEEDLE,INSULN,SF 0.5ML	2	
ASSURE ID SYRINGE 1 ML 31G 15/64"	SYRINGE,NEEDLE,INSULN,SAFE,1ML	2	
ASSURE PRISM CONTROL SOLUTION	BLOOD GLUCOSE CNTL HIGH,NORMAL	2	
ASTAGRAF XL 0.5 MG CAPSULE	TACROLIMUS	4	SRX
ASTAGRAF XL 1 MG CAPSULE	TACROLIMUS	4	SRX
ASTAGRAF XL 5 MG CAPSULE	TACROLIMUS	4	SRX
ASTHMA CHECK PEAK FLOW METER	PEAK FLOW METER	2	
ASTHMAPACK CHILDREN'S CARE KIT	PEAK FLOW METER/INH ASSIT DEV	2	
ATAZANAVIR 150 MG CAPSULE	ATAZANAVIR SULFATE	1	SRX
ATAZANAVIR 200 MG CAPSULE	ATAZANAVIR SULFATE	1	SRX
ATAZANAVIR 300 MG CAPSULE	ATAZANAVIR SULFATE	1	SRX
ATENOLOL 25 MG TABLET	ATENOLOL	1	
ATENOLOL 50 MG TABLET	ATENOLOL	1	
ATENOLOL 100 MG TABLET	ATENOLOL	1	
ATENOLOL-CHLORTHALIDONE 50-25 MG TABLET	ATENOLOL/CHLORTHALIDONE	1	
ATENOLOL-CHLORTHALIDONE 100-25 MG TABLET	ATENOLOL/CHLORTHALIDONE	1	
ATOMOXETINE 10 MG CAPSULE	ATOMOXETINE HCL	1	QL
ATOMOXETINE 18 MG CAPSULE	ATOMOXETINE HCL	1	QL
ATOMOXETINE 25 MG CAPSULE	ATOMOXETINE HCL	1	QL
ATOMOXETINE 40 MG CAPSULE	ATOMOXETINE HCL	1	QL
ATOMOXETINE 60 MG CAPSULE	ATOMOXETINE HCL	1	QL
ATOMOXETINE 80 MG CAPSULE	ATOMOXETINE HCL	1	QL
ATOMOXETINE 100 MG CAPSULE	ATOMOXETINE HCL	1	QL
ATORVASTATIN 10 MG TABLET	ATORVASTATIN CALCIUM	1	
ATORVASTATIN 20 MG TABLET	ATORVASTATIN CALCIUM	1	
ATORVASTATIN 40 MG TABLET	ATORVASTATIN CALCIUM	1	
ATORVASTATIN 80 MG TABLET	ATORVASTATIN CALCIUM	1	
ATOVAQUONE 750 MG/5 ML ORAL SUSPENSION	ATOVAQUONE	3	
ATOVAQUONE-PROGUANIL 62.5 MG-25 MG TABLET	ATOVAQUONE/PROGUANIL HCL	1	
ATOVAQUONE-PROGUANIL 250 MG-100 MG TABLET	ATOVAQUONE/PROGUANIL HCL	1	
ATROPINE 1% EYE DROPS	ATROPINE SULFATE/PF	1	
ATROPINE 1% EYE OINTMENT	ATROPINE SULFATE	1	
AUBRA EQ-28 TABLET	LEVONORGESTREL/ETHIN.ESTRADIOL	1	
AUBRA-28 TABLET	LEVONORGESTREL/ETHIN.ESTRADIOL	1	
AUROVELA 1 MG-20 MCG TABLET	NORETHINDRONE AC/ETH ESTRADIOL	1	
AUROVELA 21 1.5 MG-30 MCG TABLET	NORETHINDRONE AC/ETH ESTRADIOL	1	
AUROVELA 24 FE 1 MG-20 MCG TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
AUROVELA FE 1 MG-20 MCG TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
AUROVELA FE 1.5 MG-30 MCG TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
AUTOJECT 2 INJECTION DEVICE	INSULIN ADMIN. SUPPLIES	2	
AUTOPEN 1 TO 21 UNITS	INSULIN ADMIN. SUPPLIES	2	

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Medication Name	Generic Name	Tier	Notes
AUTOPEN 2 TO 42 UNITS	INSULIN ADMIN. SUPPLIES	2	
AUTOSHIELD DUO PEN NEEDLE 30G 5MM	PEN NEEDLE,DUAL SAFETY,DIABETC	2	
AUTOSOFT 30 INFUSION PACK 23" 13MM	INSULIN INFUSION SET/CARTRIDGE	2	
AUTOSOFT 30 INFUSION SET 23" 13MM	INFUSION SET FOR INSULIN PUMP	2	
AUTOSOFT 30 INFUSION SET 43" 13MM	INFUSION SET FOR INSULIN PUMP	2	
AUTOSOFT 90 INFUSION SET 23" 6MM	INFUSION SET FOR INSULIN PUMP	2	
AUTOSOFT 90 INFUSION SET 23" 9MM	INFUSION SET FOR INSULIN PUMP	2	
AUTOSOFT 90 INFUSION SET 43" 6MM	INFUSION SET FOR INSULIN PUMP	2	
AUTOSOFT 90 INFUSION SET 43" 9MM	INFUSION SET FOR INSULIN PUMP	2	
AUTOSOFT XC INFUSION PACK 5" 6MM	INSULIN INFUSION SET/CARTRIDGE	2	
AUTOSOFT XC INFUSION PACK 23" 6MM	INSULIN INFUSION SET/CARTRIDGE	2	
AUTOSOFT XC INFUSION SET 23" 6MM	INFUSION SET FOR INSULIN PUMP	2	
AUTOSOFT XC INFUSION SET 23" 9MM	INFUSION SET FOR INSULIN PUMP	2	
AUTOSOFT XC INFUSION SET 32" 6MM	INFUSION SET FOR INSULIN PUMP	2	
AUTOSOFT XC INFUSION SET 43" 6MM	INFUSION SET FOR INSULIN PUMP	2	
AUTOSOFT XC INFUSION SET 43" 9MM	INFUSION SET FOR INSULIN PUMP	2	
AVIANE-28 TABLET	LEVONORGESTREL/ETHIN.ESTRADIOL	1	
AVONEX 30 MCG/0.5 ML PEN	INTERFERON BETA-1A	4	PA, SRX
AVONEX 30 MCG/0.5 ML SYRINGE	INTERFERON BETA-1A	4	PA, SRX
AYUNA-28 TABLET	LEVONORGESTREL/ETHIN.ESTRADIOL	1	
AZASITE 1% EYE DROPS	AZITHROMYCIN	3	
AZATHIOPRINE 50 MG TABLET	AZATHIOPRINE	1	SRX
AZELAIC ACID 15% GEL	AZELAIC ACID	2	
AZELASTINE 0.05% DROPS	AZELASTINE HCL	1	
AZELASTINE 0.1% (137 MCG) NASAL SPRAY	AZELASTINE HCL	1	
AZELASTINE 0.15% NASAL SPRAY	AZELASTINE HCL	1	
AZELASTINE-FLUTICASONE 137-50MCG NASAL SPRAY	AZELASTINE/FLUTICASONE	2	
AZITHROMYCIN 100 MG/5 ML ORAL SUSPENSION	AZITHROMYCIN	1	
AZITHROMYCIN 200 MG/5 ML ORAL SUSPENSION	AZITHROMYCIN	1	
AZITHROMYCIN 1 GM POWDER PACKET	AZITHROMYCIN	1	
AZITHROMYCIN 250 MG TABLET	AZITHROMYCIN	1	
AZITHROMYCIN 500 MG TABLET	AZITHROMYCIN	1	
AZITHROMYCIN 600 MG TABLET	AZITHROMYCIN	1	
AZURETTE 28 DAY TABLET	DESOG-E.ESTRADIOL/E.ESTRADIOL	1	
BACITRACIN 500 UNIT/GM EYE OINTMENT	BACITRACIN	2	
BACITRACIN-POLYMYXIN EYE OINTMENT	BACITRACIN/POLYMYXIN B SULFATE	1	
BACLOFEN 5 MG TABLET	BACLOFEN	1	
BACLOFEN 10 MG TABLET	BACLOFEN	1	
BACLOFEN 20 MG TABLET	BACLOFEN	1	
BAL-CARE DHA COMBO PACK	PNV81/IRON EDTA,PS/FOLIC/OMEG3	1	
BALSALAZIDE 750 MG CAPSULE	BALSALAZIDE DISODIUM	1	

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Medication Name	Generic Name	Tier	Notes
BALZIVA 28 TABLET	NORETHINDRONE-ETHIN. ESTRADIOL	1	
BAQSIMI 3 MG NASAL SPRAY	GLUCAGON	2	QL
BARACLUDE 0.05 MG/ML ORAL SOLUTION	ENTECAVIR	4	SRX
BASAGLAR 100 UNIT/ML KWIKPEN	INSULIN GLARGINE,HUM.REC.ANLOG	2	QL
BASAGLAR 100 UNIT/ML TEMPO PEN	INSULIN GLARGINE,HUM.REC.ANLOG	2	QL
BD AUTOSHIELD DUO PEN NEEDLE 30G 5MM	PEN NEEDLE,DUAL SAFETY,DIABETC	2	
BD BLUNT NEEDLE 18G 1.5"	BLUNT NEEDLE, DISPOSABLE	2	
BD ECLIPSE LUER-LOK SYRINGE 3 ML	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
BD ECLIPSE NEEDLE 18G 1.5"	NEEDLES, SAFETY	2	
BD ECLIPSE NEEDLE 18G 40MM	NEEDLES, SAFETY	2	
BD ECLIPSE NEEDLE 21G 1"	NEEDLES, SAFETY	2	
BD ECLIPSE NEEDLE 21G 1.5"	NEEDLES, DISPOSABLE	2	
BD ECLIPSE NEEDLE 22G 1"	NEEDLES, SAFETY	2	
BD ECLIPSE NEEDLE 23G 1"	NEEDLES, SAFETY	2	
BD ECLIPSE NEEDLE 23G 25MM	NEEDLES, SAFETY	2	
BD ECLIPSE NEEDLE 25G 1"	NEEDLES, SAFETY	2	
BD ECLIPSE NEEDLE 25G 1.5"	NEEDLES, SAFETY	2	
BD ECLIPSE NEEDLE 25G 16MM	NEEDLES, SAFETY	2	
BD ECLIPSE NEEDLE 25G 25MM	NEEDLES, SAFETY	2	
BD ECLIPSE NEEDLE 25G 40MM	NEEDLES, SAFETY	2	
BD ECLIPSE NEEDLE 30G 13MM	NEEDLES, SAFETY	2	
BD ECLIPSE SYRINGE 30G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
BD FILTER NEEDLE	NEEDLES, FILTER	2	
BD INSULIN SYRINGE 0.3 ML 29G 12.7MM	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
BD INSULIN SYRINGE 0.3 ML 31G 8MM (1/2)	SYRGE-NDL,INS 0.3 ML HALF MARK	2	
BD INSULIN SYRINGE 0.5 ML 28G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
BD INSULIN SYRINGE 0.5 ML 29G 12.7MM	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
BD INSULIN SYRINGE 1 ML 27G 12.7MM	SYRINGE AND NEEDLE,INSULIN,1ML	2	
BD INSULIN SYRINGE 1 ML 27G 5/8"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
BD INSULIN SYRINGE 1 ML 28G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
BD INSULIN SYRINGE 1 ML 29G 12.7MM	SYRINGE AND NEEDLE,INSULIN,1ML	2	
BD INSULIN SYRINGE U-500 1/2 ML 31G 6MM	SYRINGE,INSUL U-500,NDL,0.5ML	2	
BD INSULIN SYRINGE ULTRAFINE 0.3 ML 30G 12.7MM	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
BD INSULIN SYRINGE ULTRAFINE 0.3 ML 31G 8MM	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
BD INSULIN SYRINGE ULTRAFINE 0.5 ML 30G 12.7MM	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
BD INSULIN SYRINGE ULTRAFINE 0.5 ML 31G 8MM	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
BD INSULIN SYRINGE ULTRAFINE 1 ML 30G 12.7MM	SYRINGE AND NEEDLE,INSULIN,1ML	2	
BD INSULIN SYRINGE ULTRAFINE 1 ML 30G 12.7MM	SYRINGE AND NEEDLE,INSULIN,1ML	2	
BD INSULIN SYRINGE ULTRAFINE 1 ML 31G 8MM	SYRINGE AND NEEDLE,INSULIN,1ML	2	
BD INTEGRA NEEDLE 25G 5/8"	NEEDLES, SAFETY	2	
BD INTEGRA RETRA NEEDLE 23G 1"	NEEDLES, DISPOSABLE	2	

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Medication Name	Generic Name	Tier	Notes
BD INTEGRA SYRINGE 3 ML 21G 1.5"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
BD LUER-LOK SYRINGE 3 ML 25G 5/8"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
BD NANO 2 GEN PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
BD NEEDLE 16G 1"	NEEDLES, DISPOSABLE	2	
BD NEEDLE 16G 1.5"	NEEDLES, DISPOSABLE	2	
BD NEEDLE 18G 1"	NEEDLES, DISPOSABLE	2	
BD NEEDLE 18G 1.5"	NEEDLES, DISPOSABLE	2	
BD NEEDLE 19G 1"	NEEDLES, DISPOSABLE	2	
BD NEEDLE 19G 1.5"	NEEDLES, DISPOSABLE	2	
BD NEEDLE 20G 1"	NEEDLES, DISPOSABLE	2	
BD NEEDLE 20G 1.5"	NEEDLES, DISPOSABLE	2	
BD NEEDLE 21G 1"	NEEDLES, DISPOSABLE	2	
BD NEEDLE 21G 1.5"	NEEDLES, DISPOSABLE	2	
BD NEEDLE 21G 2"	NEEDLES, DISPOSABLE	2	
BD NEEDLE 22G 1"	NEEDLES, DISPOSABLE	2	
BD NEEDLE 22G 1.5"	NEEDLES, DISPOSABLE	2	
BD NEEDLE 22G 3/4"	NEEDLES, DISPOSABLE	2	
BD NEEDLE 23G 0.75"	NEEDLES, DISPOSABLE	2	
BD NEEDLE 23G 1"	NEEDLES, DISPOSABLE	2	
BD NEEDLE 23G 1.25"	NEEDLES, DISPOSABLE	2	
BD NEEDLE 23G 1.5"	NEEDLES, DISPOSABLE	2	
BD NEEDLE 25G 0.625"	NEEDLES, DISPOSABLE	2	
BD NEEDLE 25G 0.875"	NEEDLES, DISPOSABLE	2	
BD NEEDLE 25G 1"	NEEDLES, DISPOSABLE	2	
BD NEEDLE 25G 1.5"	NEEDLES, DISPOSABLE	2	
BD NEEDLE 25G 5/8"	NEEDLES, DISPOSABLE	2	
BD NEEDLE 26G 0.375"	NEEDLES, DISPOSABLE	2	
BD NEEDLE 26G 0.5"	NEEDLES, DISPOSABLE	2	
BD NEEDLE 26G 0.625"	NEEDLES, DISPOSABLE	2	
BD NEEDLE 27G 0.5"	NEEDLES, DISPOSABLE	2	
BD NEEDLE 27G 1 1.25"	NEEDLES, DISPOSABLE	2	
BD NEEDLE 30G 0.5"	NEEDLES, DISPOSABLE	2	
BD NEEDLE 30G 1"	NEEDLES, DISPOSABLE	2	
BD NOKOR ADMIX NEEDLE 18G 1.5"	NEEDLES, DISPOSABLE	2	
BD NOKOR NEEDLE 16G 1"	NEEDLES, DISPOSABLE	2	
BD NOKOR NEEDLE 18G 1"	NEEDLES, DISPOSABLE	2	
BD PRECISIONGLIDE 3 ML 22G 3/4"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
BD PRECISIONGLIDE NEEDLE 25G	NEEDLES, DISPOSABLE	2	
BD PRECISIONGLIDE NEEDLE 27G 1.5"	NEEDLES, DISPOSABLE	2	
BD PRECISIONGLIDE NEEDLE 27G 3/8"	NEEDLES, DISPOSABLE	2	
BD SAFETYGLIDE INSULIN SYRINGE 0.3 ML 29G 13MM	SYRINGE,NEEDLE,INSULN,SF,0.3ML	2	

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Medication Name	Generic Name	Tier	Notes
BD SAFETYGLIDE INSULIN SYRINGE 0.3 ML 31G 6MM	SYRINGE,NEEDLE,INSULN,SF,0.3ML	2	
BD SAFETYGLIDE INSULIN SYRINGE 0.3 ML 31G 8MM	SYRINGE,NEEDLE,INSULN,SF,0.3ML	2	
BD SAFETYGLIDE INSULIN SYRINGE 0.5 ML 29G 13MM	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
BD SAFETYGLIDE INSULIN SYRINGE 0.5 ML 29G 13MM	SYRINGE,NEEDLE,INSULN,SF 0.5ML	2	
BD SAFETYGLIDE INSULIN SYRINGE 0.5 ML 30G 8MM	SYRINGE,NEEDLE,INSULN,SF 0.5ML	2	
BD SAFETYGLIDE INSULIN SYRINGE 0.5 ML 31G 6MM	SYRINGE,NEEDLE,INSULN,SF 0.5ML	2	
BD SAFETYGLIDE INSULIN SYRINGE 1 ML 29G 13MM	SYRINGE,NEEDLE,INSULN,SAFE,1ML	2	
BD SAFETYGLIDE INSULIN SYRINGE 1 ML 31G 6MM	SYRINGE,NEEDLE,INSULN,SAFE,1ML	2	
BD SAFETYGLIDE NEEDLE	NEEDLES, SAFETY	2	
BD SAFETYGLIDE NEEDLE 18G 1.5"	NEEDLES, SAFETY	2	
BD SAFETYGLIDE NEEDLE 21G 1"	NEEDLES, SAFETY	2	
BD SAFETYGLIDE NEEDLE 21G 1.5"	NEEDLES, SAFETY	2	
BD SAFETYGLIDE NEEDLE 22G 1.5"	NEEDLES, SAFETY	2	
BD SAFETYGLIDE NEEDLE 23G 40MM	NEEDLES, SAFETY	2	
BD SAFETYGLIDE NEEDLE 25G 1"	NEEDLES, SAFETY	2	
BD SAFETYGLIDE NEEDLE 27G 5/8"	NEEDLES, SAFETY	2	
BD SAFETYGLIDE SYRINGE 27G 5/8"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
BD SAFETYGLIDE SYRINGE 3 ML	SYRINGE,SAFETY WITH NEEDLE,3ML	2	
BD SYRINGE 3 ML 18G 1.5"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
BD SYRINGE 3 ML 20G 1.5"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
BD SYRINGE 3 ML 25G 1"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
BD SYRINGE 3 ML 25G 1.5"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
BD SYRINGE WITH NEEDLE 3 ML	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
BD SYRINGE-SAFETY GLIDE	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
BD ULTRAFINE MICRO PEN NEEDLE 32G 6MM	PEN NEEDLE, DIABETIC	2	
BD ULTRAFINE MINI PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC	2	
BD ULTRAFINE NANO PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
BD ULTRAFINE ORIGINAL PEN NEEDLE 29G 12.7MM	PEN NEEDLE, DIABETIC	2	
BD ULTRAFINE SHORT PEN NEEDLE 31G 8MM	PEN NEEDLE, DIABETIC	2	
BD VEO INSULIN SYRINGE 0.3 ML 31G 6MM	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
BD VEO INSULIN SYRINGE 0.3 ML 31G 6MM (1/2)	SYRGE-NDL,INS 0.3 ML HALF MARK	2	
BD VEO INSULIN SYRINGE 0.5 ML 31G 6MM	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
BD VEO INSULIN SYRINGE 1 ML 31G 6MM	SYRINGE AND NEEDLE,INSULIN,1ML	2	
BELLADONNA-OPIUM 16.2-30 SUPPOSITORY	OPIUM/BELLADONNA ALKALOIDS	1	PA
BELLADONNA-OPIUM 16.2-60 SUPPOSITORY	OPIUM/BELLADONNA ALKALOIDS	1	PA
BENAZEPRIL 5 MG TABLET	BENAZEPRIL HCL	1	
BENAZEPRIL 10 MG TABLET	BENAZEPRIL HCL	1	
BENAZEPRIL 20 MG TABLET	BENAZEPRIL HCL	1	
BENAZEPRIL 40 MG TABLET	BENAZEPRIL HCL	1	
BENAZEPRIL-HCTZ 5-6.25 MG TABLET	BENAZEPRIL/HYDROCHLOROTHIAZIDE	1	
BENAZEPRIL-HCTZ 10-12.5 MG TABLET	BENAZEPRIL/HYDROCHLOROTHIAZIDE	1	

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Medication Name	Generic Name	Tier	Notes
BENAZEPRIL-HCTZ 20-12.5 MG TABLET	BENAZEPRIL/HYDROCHLOROTHIAZIDE	1	
BENAZEPRIL-HCTZ 20-25 MG TABLET	BENAZEPRIL/HYDROCHLOROTHIAZIDE	1	
BD SAFETYGLIDE INSULIN SYRINGE 0.3 ML 29G 13MM	SYRINGE,NEEDLE,INSULN,SF,0.3ML	2	
BD SAFETYGLIDE INSULIN SYRINGE 0.3 ML 31G 6MM	SYRINGE,NEEDLE,INSULN,SF,0.3ML	2	
BD SAFETYGLIDE INSULIN SYRINGE 0.3 ML 31G 8MM	SYRINGE,NEEDLE,INSULN,SF,0.3ML	2	
BD SAFETYGLIDE INSULIN SYRINGE 0.5 ML 29G 13MM	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
BD SAFETYGLIDE INSULIN SYRINGE 0.5 ML 29G 13MM	SYRINGE,NEEDLE,INSULN,SF 0.5ML	2	
BD SAFETYGLIDE INSULIN SYRINGE 0.5 ML 30G 8MM	SYRINGE,NEEDLE,INSULN,SF 0.5ML	2	
BD SAFETYGLIDE INSULIN SYRINGE 0.5 ML 31G 6MM	SYRINGE,NEEDLE,INSULN,SF 0.5ML	2	
BD SAFETYGLIDE INSULIN SYRINGE 1 ML 29G 13MM	SYRINGE,NEEDLE,INSULN,SAFE,1ML	2	
BD SAFETYGLIDE INSULIN SYRINGE 1 ML 31G 6MM	SYRINGE,NEEDLE,INSULN,SAFE,1ML	2	
BD SAFETYGLIDE NEEDLE	NEEDLES, SAFETY	2	
BD SAFETYGLIDE NEEDLE 18G 1.5"	NEEDLES, SAFETY	2	
BD SAFETYGLIDE NEEDLE 21G 1"	NEEDLES, SAFETY	2	
BD SAFETYGLIDE NEEDLE 21G 1.5"	NEEDLES, SAFETY	2	
BD SAFETYGLIDE NEEDLE 22G 1.5"	NEEDLES, SAFETY	2	
BD SAFETYGLIDE NEEDLE 23G 40MM	NEEDLES, SAFETY	2	
BD SAFETYGLIDE NEEDLE 25G 1"	NEEDLES, SAFETY	2	
BD SAFETYGLIDE NEEDLE 27G 5/8"	NEEDLES, SAFETY	2	
BD SAFETYGLIDE SYRINGE 27G 5/8"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
BD SAFETYGLIDE SYRINGE 3 ML	SYRINGE,SAFETY WITH NEEDLE,3ML	2	
BD SYRINGE 3 ML 18G 1.5"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
BD SYRINGE 3 ML 20G 1.5"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
BD SYRINGE 3 ML 25G 1"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
BD SYRINGE 3 ML 25G 1.5"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
BD SYRINGE WITH NEEDLE 3 ML	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
BD SYRINGE-SAFETY GLIDE	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
BD ULTRAFINE MICRO PEN NEEDLE 32G 6MM	PEN NEEDLE, DIABETIC	2	
BD ULTRAFINE MINI PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC	2	
BD ULTRAFINE NANO PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
BD ULTRAFINE ORIGINAL PEN NEEDLE 29G 12.7MM	PEN NEEDLE, DIABETIC	2	
BD ULTRAFINE SHORT PEN NEEDLE 31G 8MM	PEN NEEDLE, DIABETIC	2	
BD VEO INSULIN SYRINGE 0.3 ML 31G 6MM	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
BD VEO INSULIN SYRINGE 0.3 ML 31G 6MM (1/2)	SYRGE-NDL,INS 0.3 ML HALF MARK	2	
BD VEO INSULIN SYRINGE 0.5 ML 31G 6MM	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
BD VEO INSULIN SYRINGE 1 ML 31G 6MM	SYRINGE AND NEEDLE,INSULIN,1ML	2	
BELLADONNA-OPIUM 16.2-30 SUPPOSITORY	OPIUM/BELLADONNA ALKALOIDS	1	PA
BELLADONNA-OPIUM 16.2-60 SUPPOSITORY	OPIUM/BELLADONNA ALKALOIDS	1	PA
BENAZEPRIL 5 MG TABLET	BENAZEPRIL HCL	1	
BENAZEPRIL 10 MG TABLET	BENAZEPRIL HCL	1	
BENAZEPRIL 20 MG TABLET	BENAZEPRIL HCL	1	

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Medication Name	Generic Name	Tier	Notes
BENAZEPRIL 40 MG TABLET	BENAZEPRIL HCL	1	
BENAZEPRIL-HCTZ 5-6.25 MG TABLET	BENAZEPRIL/HYDROCHLOROTHIAZIDE	1	
BENAZEPRIL-HCTZ 10-12.5 MG TABLET	BENAZEPRIL/HYDROCHLOROTHIAZIDE	1	
BENAZEPRIL-HCTZ 20-12.5 MG TABLET	BENAZEPRIL/HYDROCHLOROTHIAZIDE	1	
BENAZEPRIL-HCTZ 20-25 MG TABLET	BENAZEPRIL/HYDROCHLOROTHIAZIDE	1	
BENZONATATE 100 MG CAPSULE	BENZONATATE	1	
BENZONATATE 200 MG CAPSULE	BENZONATATE	1	
BENZTROPINE 0.5 MG TABLET	BENZTROPINE MESYLATE	1	
BENZTROPINE 1 MG TABLET	BENZTROPINE MESYLATE	1	
BENZTROPINE 2 MG TABLET	BENZTROPINE MESYLATE	1	
BEPOTASTINE 1.5% EYE DROPS	BEPOTASTINE BESILATE	3	
BESER 0.05% LOTION	FLUTICASONE PROPIONATE	3	
BETADINE 5% EYE SOLUTION	POVIDONE-IODINE	3	
BETAINE 1 GRAM/SCOOP POWDER	BETAINE	4	PA, SRX
BETAMETHASONE DIPROPIONATE 0.05% CREAM	BETAMETHASONE DIPROPIONATE	1	
BETAMETHASONE DIPROPIONATE 0.05% LOTION	BETAMETHASONE DIPROPIONATE	1	
BETAMETHASONE DIPROPIONATE 0.05% OINTMENT	BETAMETHASONE DIPROPIONATE	1	
BETAMETHASONE DIPROPIONATE AUGMENTED 0.05% CREAM	BETAMETHASONE/PROPYLENE GLYC	1	
BETAMETHASONE DIPROPIONATE AUGMENTED 0.05% GEL	BETAMETHASONE DIPROPIONATE	1	
BETAMETHASONE DIPROPIONATE AUGMENTED 0.05% LOTION	BETAMETHASONE/PROPYLENE GLYC	1	
BETAMETHASONE DIPROPIONATE AUGMENTED 0.05% OINTMENT	BETAMETHASONE/PROPYLENE GLYC	1	
BETAMETHASONE VALERATE 0.1% CREAM	BETAMETHASONE VALERATE	1	
BETAMETHASONE VALERATE 0.12% FOAM	BETAMETHASONE VALERATE	2	
BETAMETHASONE VALERATE 0.1% LOTION	BETAMETHASONE VALERATE	1	
BETAMETHASONE VALERATE 0.1% OINTMENT	BETAMETHASONE VALERATE	1	
BETAXOLOL 0.5% EYE DROPS	BETAXOLOL HCL	1	
BETAXOLOL 10 MG TABLET	BETAXOLOL HCL	1	
BETAXOLOL 20 MG TABLET	BETAXOLOL HCL	1	
BETHANECHOL 5 MG TABLET	BETHANECHOL CHLORIDE	1	
BETHANECHOL 10 MG TABLET	BETHANECHOL CHLORIDE	1	
BETHANECHOL 25 MG TABLET	BETHANECHOL CHLORIDE	1	
BETHANECHOL 50 MG TABLET	BETHANECHOL CHLORIDE	1	
BEXAROTENE 1% GEL	BEXAROTENE	4	PA, SRX
BEXAROTENE 75 MG CAPSULE	BEXAROTENE	4	PA, SRX
BEXSERO PREFILLED SYRINGE	MENINGOCOCCAL B VACCINE,4-COMP	2	
BEYFORTUS 50 MG/0.5 ML SYRINGE	NIRSEVIMAB-ALIP	2	
BEYFORTUS 100 MG/ML SYRINGE	NIRSEVIMAB-ALIP	2	
BICALUTAMIDE 50 MG TABLET	BICALUTAMIDE	1	
BIKTARVY 30-120-15 MG TABLET	BICTEGRAV/EMTRICIT/TENOFOV ALA	3	QL, SRX
BIKTARVY 50-200-25 MG TABLET	BICTEGRAV/EMTRICIT/TENOFOV ALA	3	QL, SRX
BIMATOPROST 0.03% EYE DROPS	BIMATOPROST	1	QL

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Medication Name	Generic Name	Tier	Notes
BINOSTO 70 MG EFFERVESCENT TABLET	ALENDRONATE SODIUM	3	
BISOPROLOL 5 MG TABLET	BISOPROLOL FUMARATE	1	
BISOPROLOL 10 MG TABLET	BISOPROLOL FUMARATE	1	
BISOPROLOL-HCTZ 2.5-6.25 MG TABLET	BISOPROLOL/HYDROCHLOROTHIAZIDE	1	
BISOPROLOL-HCTZ 5-6.25 MG TABLET	BISOPROLOL/HYDROCHLOROTHIAZIDE	1	
BISOPROLOL-HCTZ 10-6.25 MG TABLET	BISOPROLOL/HYDROCHLOROTHIAZIDE	1	
BLISOVI 24 FE TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
BLISOVI FE 1-20 TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
BLISOVI FE 1.5-30 TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
BLOOD GLUCOSE CONTROL SOLUTION	BLOOD GLUCOSE CNTL HIGH,NORMAL	2	
BLUNT NEEDLE	BLUNT NEEDLE, DISPOSABLE	2	
BOOSTRIX TDAP	DIPHTH,PERTUSS(ACELL),TET VAC	2	
BOSENTAN 62.5 MG TABLET	BOSENTAN	4	PA, SRX
BOSENTAN 125 MG TABLET	BOSENTAN	4	PA, SRX
BOSULIF 50 MG CAPSULE	BOSUTINIB	4	PA, QL, LDD, SRX
BOSULIF 100 MG CAPSULE	BOSUTINIB	4	PA, QL, LDD, SRX
BOSULIF 100 MG TABLET	BOSUTINIB	4	PA, QL, LDD, SRX
BOSULIF 400 MG TABLET	BOSUTINIB	4	PA, QL, LDD, SRX
BOSULIF 500 MG TABLET	BOSUTINIB	4	PA, QL, LDD, SRX
BREATHERITE MDI SPACER	INHALER, ASSIST DEVICES	2	QL
BREATHERITE SPACER-ADULT MASK	INHALER,ASSIST DEVICE,LG MASK	2	QL
BREATHERITE SPACER-INFANT MASK	INHALER,ASSIST DEV,SMALL MASK	2	QL
BREATHERITE SPACER-LARGE CHILD MASK	INHALER,ASSIST DEVICE,MED MASK	2	QL
BREATHERITE SPACER-NEONATE MASK	INHALER,ASSIST DEV,SMALL MASK	2	QL
BREATHERITE SPACER-SMALL CHILD MASK	INHALER,ASSIST DEV,SMALL MASK	2	QL
BREATHRITE VALVED MDI CHAMBER	INHALER, ASSIST DEVICES	2	QL
BREATHRITE VALVED MDI SPACER	INHALER, ASSIST DEVICES	2	QL
BREEZE 2 CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, HIGH	2	
BREO ELLIPTA 50-25 MCG INHALER	FLUTICASONE/VILANTEROL	2	QL
BREO ELLIPTA 100-25 MCG INHALER	FLUTICASONE/VILANTEROL	2	QL
BREO ELLIPTA 200-25 MCG INHALER	FLUTICASONE/VILANTEROL	2	QL
BREYNA 80-4.5 MCG INHALER	BUDESONIDE/FORMOTEROL FUMARATE	3	QL
BREYNA 160-4.5 MCG INHALER	BUDESONIDE/FORMOTEROL FUMARATE	3	QL
BRIELLYN TABLET	NORETHINDRONE-ETHIN. ESTRADIOL	1	
BRIMONIDINE 0.1% DROPS	BRIMONIDINE TARTRATE	1	
BRIMONIDINE 0.15% DROPS	BRIMONIDINE TARTRATE	1	
BRIMONIDINE 0.2% EYE DROPS	BRIMONIDINE TARTRATE	1	
BRIMONIDINE-TIMOLOL 0.2%-0.5% EYE DROPS	BRIMONIDINE TARTRATE/TIMOLOL	3	
BRINZOLAMIDE 1% EYE DROPS	BRINZOLAMIDE	2	
BRIVIACT 10 MG/ML ORAL SOLUTION	BRIVARACETAM	3	PA, QL
BRIVIACT 10 MG TABLET	BRIVARACETAM	3	PA, QL

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Medication Name	Generic Name	Tier	Notes
BRIVIACT 25 MG TABLET	BRIVARACETAM	3	PA, QL
BRIVIACT 50 MG TABLET	BRIVARACETAM	3	PA, QL
BRIVIACT 75 MG TABLET	BRIVARACETAM	3	PA, QL
BRIVIACT 100 MG TABLET	BRIVARACETAM	3	PA, QL
BROMFENAC 0.09% EYE DROPS	BROMFENAC SODIUM	2	
BROMOCRIPTINE 5 MG CAPSULE	BROMOCRIPTINE MESYLATE	1	
BROMOCRIPTINE 2.5 MG TABLET	BROMOCRIPTINE MESYLATE	1	
BROMPHENIRAMINE-PSEUDOEPHEDRINE-DM 2-30-10 MG/5 ML SYRUP	BROMPHENIRAMINE/PSEUDOEPHED/DM	1	
BROOKS INSULIN SYRINGE 0.3 ML	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
BRUKINSA 80 MG CAPSULE	ZANUBRUTINIB	4	PA, QL, LDD, SRX
BUDESONIDE 0.25 MG/2 ML INHALATION SUSPENSION	BUDESONIDE	3	QL
BUDESONIDE 0.5 MG/2 ML INHALATION SUSPENSION	BUDESONIDE	3	QL
BUDESONIDE 1 MG/2 ML INHALATION SUSPENSION	BUDESONIDE	3	QL
BUDESONIDE DR 3 MG CAPSULE	BUDESONIDE	3	
BUDESONIDE EC 3 MG CAPSULE	BUDESONIDE	3	
BUDESONIDE ER 9 MG TABLET	BUDESONIDE	4	PA, QL
BUDESONIDE-FORMOTEROL 80-4.5 INHALER	BUDESONIDE/FORMOTEROL FUMARATE	3	QL
BUDESONIDE-FORMOTEROL 160-4.5 INHALER	BUDESONIDE/FORMOTEROL FUMARATE	3	QL
BUMETANIDE 0.5 MG TABLET	BUMETANIDE	1	
BUMETANIDE 1 MG TABLET	BUMETANIDE	1	
BUMETANIDE 2 MG TABLET	BUMETANIDE	1	
BUPRENORPHINE 5 MCG/HR PATCH	BUPRENORPHINE	2	QL
BUPRENORPHINE 7.5 MCG/HR PATCH	BUPRENORPHINE	2	QL
BUPRENORPHINE 10 MCG/HR PATCH	BUPRENORPHINE	2	QL
BUPRENORPHINE 15 MCG/HR PATCH	BUPRENORPHINE	2	QL
BUPRENORPHINE 20 MCG/HR PATCH	BUPRENORPHINE	2	QL
BUPRENORPHINE 2 MG SUBLINGUAL TABLET	BUPRENORPHINE HCL	1	
BUPRENORPHINE 8 MG SUBLINGUAL TABLET	BUPRENORPHINE HCL	1	
BUPRENORPHINE-NALOXONE 2-0.5 MG FILM	BUPRENORPHINE HCL/NALOXONE HCL	1	
BUPRENORPHINE-NALOXONE 4-1 MG FILM	BUPRENORPHINE HCL/NALOXONE HCL	1	
BUPRENORPHINE-NALOXONE 8-2 MG FILM	BUPRENORPHINE HCL/NALOXONE HCL	1	
BUPRENORPHINE-NALOXONE 12-3 MG FILM	BUPRENORPHINE HCL/NALOXONE HCL	1	
BUPRENORPHINE-NALOXONE 2-0.5 MG TABLET	BUPRENORPHINE HCL/NALOXONE HCL	1	
BUPRENORPHINE-NALOXONE 8-2 MG TABLET	BUPRENORPHINE HCL/NALOXONE HCL	1	
BUPROPION 75 MG TABLET	BUPROPION HCL	1	QL
BUPROPION 100 MG TABLET	BUPROPION HCL	1	QL
BUPROPION SR 100 MG TABLET	BUPROPION HCL	1	QL
BUPROPION SR 150 MG TABLET	BUPROPION HCL	1	
BUPROPION SR 150 MG TABLET (smoking cessation)	BUPROPION HCL	1	QL
BUPROPION SR 200 MG TABLET	BUPROPION HCL	1	QL

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Medication Name	Generic Name	Tier	Notes
BUPROPION XL 150 MG TABLET	BUPROPION HCL	1	QL
BUPROPION XL 300 MG TABLET	BUPROPION HCL	1	QL
BUSPIRONE 5 MG TABLET	BUSPIRONE HCL	1	
BUSPIRONE 7.5 MG TABLET	BUSPIRONE HCL	1	
BUSPIRONE 10 MG TABLET	BUSPIRONE HCL	1	
BUSPIRONE 15 MG TABLET	BUSPIRONE HCL	1	
BUSPIRONE 30 MG TABLET	BUSPIRONE HCL	1	
BUTALBITAL COMPOUND-CODEINE #3 CAPSULE	CODEINE/BUTALBITAL/ASA/CAFFEIN	2	PA
BUTALBITAL-ACETAMINOPHEN 50-325 MG TABLET	BUTALBITAL/ACETAMINOPHEN	1	
BUTALBITAL-ACETAMINOPHEN-CAFFEINE 50-300-40 MG CAPSULE	BUTALB/ACETAMINOPHEN/CAFFEINE	1	QL
BUTALBITAL-ACETAMINOPHEN-CAFFEINE 50-325-40 MG TABLET	BUTALB/ACETAMINOPHEN/CAFFEINE	1	QL
BUTALBITAL-ACETAMINOPHEN-CAFFEINE-CODEINE 50-300-30 MG CAPSULE	BUTALBIT/ACETAMIN/CAFF/CODEINE	1	PA
BUTALBITAL-ACETAMINOPHEN-CAFFEINE-CODEINE 50-325-30 MG CAPSULE	BUTALBIT/ACETAMIN/CAFF/CODEINE	1	PA
BUTALBITAL-ASPIRIN-CAFFEINE CAPSULE	BUTALBITAL/ASPIRIN/CAFFEINE	1	QL
BUTALBITAL-ASPIRIN-CAFFEINE TABLET	BUTALBITAL/ASPIRIN/CAFFEINE	1	QL
BUTORPHANOL 10 MG/ML NASAL SPRAY	BUTORPHANOL TARTRATE	1	PA, QL
BYDUREON BCISE 2 MG AUTO-INJECTOR	EXENATIDE MICROSPHERES	2	PA, QL
BYETTA 5 MCG DOSE PEN INJECTOR	EXENATIDE	2	PA, QL
BYETTA 10 MCG DOSE PEN INJECTOR	EXENATIDE	2	PA, QL
CA INSULIN SYRINGE 0.3 ML 29G 1/2"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
CA INSULIN SYRINGE 0.3 ML 30G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
CA INSULIN SYRINGE 0.3 ML 31G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
CA INSULIN SYRINGE 0.5 ML 29G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
CA INSULIN SYRINGE 0.5 ML 30G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
CA INSULIN SYRINGE 0.5 ML 31G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
CA INSULIN SYRINGE 1 ML 29G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
CA INSULIN SYRINGE 1 ML 30G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
CA INSULIN SYRINGE 1 ML 31G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
CABERGOLINE 0.5 MG TABLET	CABERGOLINE	1	QL
CABOMETYX 20 MG TABLET	CABOZANTINIB S-MALATE	4	PA, QL, LDD, SRX
CABOMETYX 40 MG TABLET	CABOZANTINIB S-MALATE	4	PA, QL, LDD, SRX
CABOMETYX 60 MG TABLET	CABOZANTINIB S-MALATE	4	PA, QL, LDD, SRX
CAFFEINE CITRATE 60 MG/3 ML ORAL SOLUTION	CAFFEINE CITRATE	1	
CALCIPOTRIENE 0.005% CREAM	CALCIPOTRIENE	2	
CALCIPOTRIENE 0.005% OINTMENT	CALCIPOTRIENE	2	
CALCIPOTRIENE 0.005% TOPICAL SOLUTION	CALCIPOTRIENE	2	
CALCIPOTRIENE-BETAMETHASONE OINTMENT	CALCIPOTRIENE/BETAMETHASONE	3	
CALCITONIN-SALMON 200 UNIT NASAL SPRAY	CALCITONIN,SALMON,SYNTHETIC	1	
CALCITRIOL 0.25 MCG CAPSULE	CALCITRIOL	1	

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Medication Name	Generic Name	Tier	Notes
CALCITRIOL 0.5 MCG CAPSULE	CALCITRIOL	1	
CALCITRIOL 1 MCG/ML ORAL SOLUTION	CALCITRIOL	1	
CALCITRIOL 3 MCG/G OINTMENT	CALCITRIOL	1	QL
CALCIUM ACETATE 667 MG CAPSULE	CALCIUM ACETATE	1	
CALCIUM ACETATE 667 MG GELCAP	CALCIUM ACETATE	1	
CALCIUM ACETATE 667 MG TABLET	CALCIUM ACETATE	1	
CALQUENCE 100 MG TABLET	ACALABRUTINIB MALEATE	4	PA, QL, LDD, SRX
CAMILA 0.35 MG TABLET	NORETHINDRONE	1	
CAMRESE 0.15-0.03-0.01 MG TABLET	L-NORGEST/E.ESTRADIOL-E.ESTRAD	1	
CAMRESE LO TABLET	L-NORGEST/E.ESTRADIOL-E.ESTRAD	1	
CAMZYOS 2.5 MG CAPSULE	MAVACAMTEN	4	PA, QL, LDD, SRX
CAMZYOS 5 MG CAPSULE	MAVACAMTEN	4	PA, QL, LDD, SRX
CAMZYOS 10 MG CAPSULE	MAVACAMTEN	4	PA, QL, LDD, SRX
CAMZYOS 15 MG CAPSULE	MAVACAMTEN	4	PA, QL, LDD, SRX
CANDESARTAN 4 MG TABLET	CANDESARTAN CILEXETIL	1	
CANDESARTAN 8 MG TABLET	CANDESARTAN CILEXETIL	1	
CANDESARTAN 16 MG TABLET	CANDESARTAN CILEXETIL	1	
CANDESARTAN 32 MG TABLET	CANDESARTAN CILEXETIL	1	
CANDESARTAN-HCTZ 16-12.5 MG TABLET	CANDESARTAN/HYDROCHLOROTHIAZID	1	
CANDESARTAN-HCTZ 32-12.5 MG TABLET	CANDESARTAN/HYDROCHLOROTHIAZID	1	
CANDESARTAN-HCTZ 32-25 MG TABLET	CANDESARTAN/HYDROCHLOROTHIAZID	1	
CAPECITABINE 150 MG TABLET	CAPECITABINE	4	PA, SRX
CAPECITABINE 500 MG TABLET	CAPECITABINE	4	PA, SRX
CAPRELSA 100 MG TABLET	VANDETANIB	4	PA, QL, LDD, SRX
CAPRELSA 300 MG TABLET	VANDETANIB	4	PA, QL, LDD, SRX
CAPTOPRIL 12.5 MG TABLET	CAPTOPRIL	1	
CAPTOPRIL 25 MG TABLET	CAPTOPRIL	1	
CAPTOPRIL 50 MG TABLET	CAPTOPRIL	1	
CAPTOPRIL 100 MG TABLET	CAPTOPRIL	1	
CAPTOPRIL-HCTZ 25-15 MG TABLET	CAPTOPRIL/HYDROCHLOROTHIAZIDE	1	QL
CAPTOPRIL-HCTZ 25-25 MG TABLET	CAPTOPRIL/HYDROCHLOROTHIAZIDE	1	QL
CAPTOPRIL-HCTZ 50-15 MG TABLET	CAPTOPRIL/HYDROCHLOROTHIAZIDE	1	QL
CAPTOPRIL-HCTZ 50-25 MG TABLET	CAPTOPRIL/HYDROCHLOROTHIAZIDE	1	QL
CAPVAXIVE 0.5 ML SYRINGE	PNEUMOC 21-VAL CONJ-DIP CRM/PF	2	
CARBAMAZEPINE 100 MG CHEWABLE TABLET	CARBAMAZEPINE	1	
CARBAMAZEPINE 100 MG/5 ML ORAL SUSPENSION	CARBAMAZEPINE	1	
CARBAMAZEPINE 200 MG TABLET	CARBAMAZEPINE	1	
CARBAMAZEPINE ER 100 MG CAPSULE	CARBAMAZEPINE	1	
CARBAMAZEPINE ER 200 MG CAPSULE	CARBAMAZEPINE	1	
CARBAMAZEPINE ER 300 MG CAPSULE	CARBAMAZEPINE	1	
CARBAMAZEPINE ER 100 MG TABLET	CARBAMAZEPINE	1	

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Medication Name	Generic Name	Tier	Notes
CARBAMAZEPINE ER 200 MG TABLET	CARBAMAZEPINE	1	
CARBAMAZEPINE ER 400 MG TABLET	CARBAMAZEPINE	1	
CARBIDOPA 25 MG TABLET	CARBIDOPA	3	
CARBIDOPA-LEVODOPA 10-100 MG ODT TABLET	CARBIDOPA/LEVODOPA	1	
CARBIDOPA-LEVODOPA 25-100 MG ODT TABLET	CARBIDOPA/LEVODOPA	1	
CARBIDOPA-LEVODOPA 25-250 MG ODT TABLET	CARBIDOPA/LEVODOPA	1	
CARBIDOPA-LEVODOPA 10-100 TABLET	CARBIDOPA/LEVODOPA	1	
CARBIDOPA-LEVODOPA 25-100 TABLET	CARBIDOPA/LEVODOPA	1	
CARBIDOPA-LEVODOPA 25-250 TABLET	CARBIDOPA/LEVODOPA	1	
CARBIDOPA-LEVODOPA ER 25-100 TABLET	CARBIDOPA/LEVODOPA	1	
CARBIDOPA-LEVODOPA ER 50-200 TABLET	CARBIDOPA/LEVODOPA	1	
CARBIDOPA-LEVODOPA-ENTACAPONE 12.5 MG-50 MG TABLET	CARBIDOPA/LEVODOPA/ENTACAPONE	2	
CARBIDOPA-LEVODOPA-ENTACAPONE 18.75 MG-75 MG TABLET	CARBIDOPA/LEVODOPA/ENTACAPONE	2	
CARBIDOPA-LEVODOPA-ENTACAPONE 25 MG-100 MG-200 MG TABLET	CARBIDOPA/LEVODOPA/ENTACAPONE	2	
CARBIDOPA-LEVODOPA-ENTACAPONE 31.25 MG-125 MG TABLET	CARBIDOPA/LEVODOPA/ENTACAPONE	2	
CARBIDOPA-LEVODOPA-ENTACAPONE 37.5 MG-150 MG TABLET	CARBIDOPA/LEVODOPA/ENTACAPONE	2	
CARBIDOPA-LEVODOPA-ENTACAPONE 50 MG-200 MG-200 MG TABLET	CARBIDOPA/LEVODOPA/ENTACAPONE	2	
CARBINOXAMINE 4 MG/5 ML ORAL LIQUID	CARBINOXAMINE MALEATE	1	
CARBINOXAMINE 4 MG TABLET	CARBINOXAMINE MALEATE	1	
CAREFINE PEN NEEDLE 29G 12.7MM	PEN NEEDLE, DIABETIC	2	
CAREFINE PEN NEEDLE 30G 8MM	PEN NEEDLE, DIABETIC	2	
CAREFINE PEN NEEDLE 31G 6MM	PEN NEEDLE, DIABETIC	2	
CAREFINE PEN NEEDLE 31G 8MM	PEN NEEDLE, DIABETIC	2	
CAREFINE PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
CAREFINE PEN NEEDLE 32G 5MM	PEN NEEDLE, DIABETIC	2	
CAREFINE PEN NEEDLE 32G 6MM	PEN NEEDLE, DIABETIC	2	
CAREONE SYRINGE 0.3 ML 30G 1/2"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
CAREONE SYRINGE 0.5 ML 30G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
CAREONE SYRINGE 1 ML 30G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
CAREONE UNIFINE PENTIP 29G 1/2"	PEN NEEDLE, DIABETIC	2	
CAREONE UNIFINE PENTIP 29G 12MM	PEN NEEDLE, DIABETIC	2	
CAREONE UNIFINE PENTIP 31G 1/4"	PEN NEEDLE, DIABETIC	2	
CAREONE UNIFINE PENTIP 31G 3/16"	PEN NEEDLE, DIABETIC	2	
CAREONE UNIFINE PENTIP 31G 5/16"	PEN NEEDLE, DIABETIC	2	
CAREONE UNIFINE PENTIP 31G 5MM	PEN NEEDLE, DIABETIC	2	
CAREONE UNIFINE PENTIP 31G 6MM	PEN NEEDLE, DIABETIC	2	
CAREONE UNIFINE PENTIP 31G 8MM	PEN NEEDLE, DIABETIC	2	
CAREONE UNIFINE PENTIP 32G 4MM	PEN NEEDLE, DIABETIC	2	
CAREONE UNIFINE PENTIP 32G 5/32"	PEN NEEDLE, DIABETIC	2	
CAREPOINT LL SYRINGE 3 ML 20G 1.5"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	

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Medication Name	Generic Name	Tier	Notes
CAREPOINT LL SYRINGE 3 ML 21G 1"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
CAREPOINT LL SYRINGE 3 ML 21G 1.5"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
CAREPOINT LL SYRINGE 3 ML 22G 1"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
CAREPOINT LL SYRINGE 3 ML 22G 38MM	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
CAREPOINT LL SYRINGE 3 ML 23G 1"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
CAREPOINT LL SYRINGE 3 ML 23G 1.5"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
CAREPOINT LL SYRINGE 3 ML 25G 1"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
CAREPOINT LL SYRINGE 3 ML 25G 5/8"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
CAREPOINT PRECISION NEEDLE 21G 1"	NEEDLES, DISPOSABLE	2	
CARESENS CONTROL SOLUTION	BLOOD GLUCOSE CNTL HIGH,NORMAL	2	
CARETOUCH L2-L3 CONTROL SOLUTION	BLOOD GLUCOSE CNTL HIGH,NORMAL	2	
CARETOUCH HYPODERMIC NEEDLE 18G 1.5"	NEEDLES, DISPOSABLE	2	
CARETOUCH HYPODERMIC NEEDLE 20G 1"	NEEDLES, DISPOSABLE	2	
CARETOUCH HYPODERMIC NEEDLE 22G 1"	NEEDLES, DISPOSABLE	2	
CARETOUCH HYPODERMIC NEEDLE 23G 1"	NEEDLES, DISPOSABLE	2	
CARETOUCH HYPODERMIC NEEDLE 23G 1.5"	NEEDLES, DISPOSABLE	2	
CARETOUCH HYPODERMIC NEEDLE 25G 1"	NEEDLES, DISPOSABLE	2	
CARETOUCH HYPODERMIC NEEDLE 25G 1.5"	NEEDLES, DISPOSABLE	2	
CARETOUCH HYPODERMIC NEEDLE 25G 5/8"	NEEDLES, DISPOSABLE	2	
CARETOUCH HYPODERMIC NEEDLE 26G 1"	NEEDLES, DISPOSABLE	2	
CARETOUCH LL SYRINGE 3 ML 22G 1"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
CARETOUCH LL SYRINGE 3 ML 22G 1.5"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
CARETOUCH LL SYRINGE 3 ML 23G 1"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
CARETOUCH LL SYRINGE 3 ML 23G 1.5"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
CARETOUCH LL SYRINGE 3 ML 25G 1"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
CARETOUCH LL SYRINGE 3 ML 25G 1.5"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
CARETOUCH LL SYRINGE 3 ML 25G 5/8"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
CARETOUCH PEN NEEDLE 29G 12MM	PEN NEEDLE, DIABETIC	2	
CARETOUCH PEN NEEDLE 31G 1/4"	PEN NEEDLE, DIABETIC	2	
CARETOUCH PEN NEEDLE 31G 3/16"	PEN NEEDLE, DIABETIC	2	
CARETOUCH PEN NEEDLE 31G 5/16"	PEN NEEDLE, DIABETIC	2	
CARETOUCH PEN NEEDLE 32G 3/16"	PEN NEEDLE, DIABETIC	2	
CARETOUCH PEN NEEDLE 32G 5/32"	PEN NEEDLE, DIABETIC	2	
CARETOUCH SYRINGE 0.3 ML 31G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
CARETOUCH SYRINGE 0.5 ML 30G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
CARETOUCH SYRINGE 0.5 ML 31G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
CARETOUCH SYRINGE 1 ML 28G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
CARETOUCH SYRINGE 1 ML 29G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
CARETOUCH SYRINGE 1 ML 30G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
CARETOUCH SYRINGE 1 ML 31G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
CARGLUMIC ACID 200 MG TABLET FOR SUSPENSION	CARGLUMIC ACID	4	PA, LDD, SRX

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Medication Name	Generic Name	Tier	Notes
CARISOPRODOL 250 MG TABLET	CARISOPRODOL	1	
CARISOPRODOL 350 MG TABLET	CARISOPRODOL	1	
CARISOPRODOL-ASPIRIN 200-325 MG TABLET	CARISOPRODOL/ASPIRIN	1	
CARISOPRODOL-ASPIRIN-CODEINE TABLET	CARISOPRODOL/ASPIRIN/CODEINE	1	PA
CARTEOLOL 1% EYE DROPS	CARTEOLOL HCL	1	
CARTIA XT 120 MG CAPSULE	DILTIAZEM HCL	1	
CARTIA XT 180 MG CAPSULE	DILTIAZEM HCL	1	
CARTIA XT 240 MG CAPSULE	DILTIAZEM HCL	1	
CARTIA XT 300 MG CAPSULE	DILTIAZEM HCL	1	
CARVEDILOL 3.125 MG TABLET	CARVEDILOL	1	
CARVEDILOL 6.25 MG TABLET	CARVEDILOL	1	
CARVEDILOL 12.5 MG TABLET	CARVEDILOL	1	
CARVEDILOL 25 MG TABLET	CARVEDILOL	1	
CAYSTON 75 MG INHALATION SOLUTION	AZTREONAM LYSINE	4	PA, QL, LDD, SRX
CAZIANT 28 DAY TABLET	DESOGESTREL-ETHINYL ESTRADIOL	1	
CEFACLOR 250 MG CAPSULE	CEFACLOR	1	
CEFACLOR 500 MG CAPSULE	CEFACLOR	1	
CEFACLOR 125 MG/5 ML ORAL SUSPENSION	CEFACLOR	1	
CEFACLOR 250 MG/5 ML ORAL SUSPENSION	CEFACLOR	1	
CEFACLOR 375 MG/5 ML ORAL SUSPENSION	CEFACLOR	1	
CEFACLOR ER 500 MG TABLET	CEFACLOR	2	
CEFADROXIL 500 MG CAPSULE	CEFADROXIL	1	
CEFADROXIL 250 MG/5 ML ORAL SUSPENSION	CEFADROXIL	1	
CEFADROXIL 500 MG/5 ML ORAL SUSPENSION	CEFADROXIL	1	
CEFADROXIL 1 GM TABLET	CEFADROXIL	1	
CEFDINIR 300 MG CAPSULE	CEFDINIR	1	
CEFDINIR 125 MG/5 ML ORAL SUSPENSION	CEFDINIR	1	
CEFDINIR 250 MG/5 ML ORAL SUSPENSION	CEFDINIR	1	
CEFIXIME 400 MG CAPSULE	CEFIXIME	2	
CEFIXIME 100 MG/5 ML ORAL SUSPENSION	CEFIXIME	2	
CEFIXIME 200 MG/5 ML ORAL SUSPENSION	CEFIXIME	2	
CEFPODOXIME 50 MG/5 ML ORAL SUSPENSION	CEFPODOXIME PROXETIL	1	
CEFPODOXIME 100 MG/5 ML ORAL SUSPENSION	CEFPODOXIME PROXETIL	1	
CEFPODOXIME 100 MG TABLET	CEFPODOXIME PROXETIL	1	
CEFPODOXIME 200 MG TABLET	CEFPODOXIME PROXETIL	1	
CEFPROZIL 125 MG/5 ML ORAL SUSPENSION	CEFPROZIL	1	
CEFPROZIL 250 MG/5 ML ORAL SUSPENSION	CEFPROZIL	1	
CEFPROZIL 250 MG TABLET	CEFPROZIL	1	
CEFPROZIL 500 MG TABLET	CEFPROZIL	1	
CEFUROXIME AXETIL 250 MG TABLET	CEFUROXIME AXETIL	1	
CEFUROXIME AXETIL 500 MG TABLET	CEFUROXIME AXETIL	1	

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Medication Name	Generic Name	Tier	Notes
CELECOXIB 50 MG CAPSULE	CELECOXIB	1	QL
CELECOXIB 100 MG CAPSULE	CELECOXIB	1	QL
CELECOXIB 200 MG CAPSULE	CELECOXIB	1	QL
CELECOXIB 400 MG CAPSULE	CELECOXIB	1	QL
CEPHALEXIN 250 MG CAPSULE	CEPHALEXIN	1	
CEPHALEXIN 500 MG CAPSULE	CEPHALEXIN	1	
CEPHALEXIN 750 MG CAPSULE	CEPHALEXIN	1	
CEPHALEXIN 125 MG/5 ML ORAL SUSPENSION	CEPHALEXIN	1	
CEPHALEXIN 250 MG/5 ML ORAL SUSPENSION	CEPHALEXIN	1	
CEQUR SIMPLICITY INSERTER	DIABETIC SUPPLIES,MISCELL	2	
CETIRIZINE 1 MG/ML ORAL SOLUTION	CETIRIZINE HCL	1	
CETIRIZINE 1 MG/ML SYRUP	CETIRIZINE HCL	1	
CETRORELIX 0.25 MG VIAL	CETRORELIX ACETATE	4	PA, SRX
CEVIMELINE 30 MG CAPSULE	CEVIMELINE HCL	1	
CHANTIX 0.5 MG TABLET	VARENICLINE TARTRATE	2	
CHANTIX 1 MG CONTINUING MONTH BOX	VARENICLINE TARTRATE	2	
CHANTIX 1 MG TABLET	VARENICLINE TARTRATE	2	
CHANTIX STARTING MONTH BOX	VARENICLINE TARTRATE	2	
CHARLOTTE 24 FE CHEWABLE TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
CHATEAL EQ-28 TABLET	LEVONORGESTREL/ETHIN.ESTRADIOL	1	
CHEK-STIX TEST STRIP	URINE MULTIPLE TEST STRIPS	2	
CHEMET 100 MG CAPSULE	SUCCIMER	3	
CHEMSTRIP 10 MD TEST STRIP	URINE MULTIPLE TEST STRIPS	2	
CHEMSTRIP 10 WITH SG TEST STRIP	URINE MULTIPLE TEST STRIPS	2	
CHEMSTRIP 2 GP TEST STRIP	URINE MULTIPLE TEST STRIPS	2	
CHEMSTRIP 2 LN TEST STRIP	URINE PHENAPHTHAZINE-PH TEST	2	
CHEMSTRIP 50B TEST STRIP	URINE MULTIPLE TEST STRIPS	2	
CHEMSTRIP 7 TEST STRIP	URINE MULTIPLE TEST STRIPS	2	
CHEMSTRIP BG DIARY	DIABETIC SUPPLIES,MISCELL	2	
CHEMSTRIP MICRAL TEST STRIP	URINE ALBUMIN TEST	2	
CHEMSTRIP-9 TEST STRIP	URINE MULTIPLE TEST STRIPS	2	
CHLORDIAZEPOXIDE 5 MG CAPSULE	CHLORDIAZEPOXIDE HCL	1	
CHLORDIAZEPOXIDE 10 MG CAPSULE	CHLORDIAZEPOXIDE HCL	1	
CHLORDIAZEPOXIDE 25 MG CAPSULE	CHLORDIAZEPOXIDE HCL	1	
CHLORDIAZEPOXIDE-AMITRIPTYLINE 5-12.5 MG TABLET	AMITRIPTYLINE/CHLORDIAZEPOXIDE	1	
CHLORDIAZEPOXIDE-AMITRIPTYLINE 10-25 MG TABLET	AMITRIPTYLINE/CHLORDIAZEPOXIDE	1	
CHLORDIAZEPOXIDE-CLIDINIUM CAPSULE	CHLORDIAZEPOXIDE/CLIDINIUM BR	1	
CHLORHEXIDINE 0.12% ORAL RINSE	CHLORHEXIDINE GLUCONATE	1	
CHLOROQUINE 250 MG TABLET	CHLOROQUINE PHOSPHATE	1	
CHLOROQUINE 500 MG TABLET	CHLOROQUINE PHOSPHATE	1	
CHLORPROMAZINE 10 MG TABLET	CHLORPROMAZINE HCL	2	

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Medication Name	Generic Name	Tier	Notes
CHLORPROMAZINE 25 MG TABLET	CHLORPROMAZINE HCL	2	
CHLORPROMAZINE 50 MG TABLET	CHLORPROMAZINE HCL	2	
CHLORPROMAZINE 100 MG TABLET	CHLORPROMAZINE HCL	2	
CHLORPROMAZINE 200 MG TABLET	CHLORPROMAZINE HCL	2	
CHLORTHALIDONE 25 MG TABLET	CHLORTHALIDONE	1	
CHLORTHALIDONE 50 MG TABLET	CHLORTHALIDONE	1	
CHLORZOXAZONE 500 MG TABLET	CHLORZOXAZONE	1	
CHOLESTYRAMINE LIGHT PACKET	CHOLESTYRAMINE/ASPARTAME	1	
CHOLESTYRAMINE LIGHT POWDER	CHOLESTYRAMINE/ASPARTAME	1	
CHOLESTYRAMINE PACKET	CHOLESTYRAMINE (WITH SUGAR)	1	
CHOLESTYRAMINE POWDER	CHOLESTYRAMINE (WITH SUGAR)	1	
CHORIONIC GONADOTROPIN 10,000 UNIT VIAL	CHORIONIC GONADOTROPIN, HUMAN	3	PA, SRX
CICLODAN 0.77% CREAM	CICLOPIROX OLAMINE	1	
CICLODAN 8% TOPICAL SOLUTION	CICLOPIROX	1	
CICLOPIROX 0.77% CREAM	CICLOPIROX OLAMINE	1	
CICLOPIROX 0.77% GEL	CICLOPIROX	1	
CICLOPIROX 1% SHAMPOO	CICLOPIROX	1	
CICLOPIROX 8% TOPICAL SOLUTION	CICLOPIROX	1	
CICLOPIROX 0.77% TOPICAL SUSPENSION	CICLOPIROX OLAMINE	1	
CILOSTAZOL 50 MG TABLET	CILOSTAZOL	1	
CILOSTAZOL 100 MG TABLET	CILOSTAZOL	1	
CILOXAN 0.3% OINTMENT	CIPROFLOXACIN HCL	3	
CIMETIDINE 300 MG/5 ML ORAL SOLUTION	CIMETIDINE HCL	1	
CIMETIDINE 200 MG TABLET	CIMETIDINE	1	
CIMETIDINE 300 MG TABLET	CIMETIDINE	1	
CIMETIDINE 400 MG TABLET	CIMETIDINE	1	
CIMETIDINE 800 MG TABLET	CIMETIDINE	1	
CIMZIA 2X200 MG VIAL KIT	CERTOLIZUMAB PEGOL	4	PA, QL, LDD, SRX
CIMZIA 2X200 MG/ML (X3) STARTER KIT	CERTOLIZUMAB PEGOL	4	PA, QL, LDD, SRX
CIMZIA 2X200 MG/ML SYRINGE KIT	CERTOLIZUMAB PEGOL	4	PA, QL, LDD, SRX
CINACALCET 30 MG TABLET	CINACALCET HCL	4	PA, SRX
CINACALCET 60 MG TABLET	CINACALCET HCL	4	PA, SRX
CINACALCET 90 MG TABLET	CINACALCET HCL	4	PA, SRX
CIPROFLOXACIN 0.2% EAR SOLUTION	CIPROFLOXACIN HCL	1	
CIPROFLOXACIN 0.3% EYE DROPS	CIPROFLOXACIN HCL	1	
CIPROFLOXACIN 250 MG/5 ML ORAL SUSPENSION	CIPROFLOXACIN	1	
CIPROFLOXACIN 500 MG/5 ML ORAL SUSPENSION	CIPROFLOXACIN	1	
CIPROFLOXACIN 250 MG TABLET	CIPROFLOXACIN HCL	1	
CIPROFLOXACIN 500 MG TABLET	CIPROFLOXACIN HCL	1	
CIPROFLOXACIN 750 MG TABLET	CIPROFLOXACIN HCL	1	
CIPROFLOXACIN-DEXAMETHASONE EAR SUSPENSION	CIPROFLOXACIN HCL/DEXAMETH	2	

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Medication Name	Generic Name	Tier	Notes
CIPROFLOXACIN-FLUOCINOLONE 0.3-0.025% VIAL	CIPROFLOXACIN HCL/FLUOCINOLONE	2	PA
CITALOPRAM 10 MG/5 ML ORAL SOLUTION	CITALOPRAM HYDROBROMIDE	1	QL
CITALOPRAM 10 MG TABLET	CITALOPRAM HYDROBROMIDE	1	QL
CITALOPRAM 20 MG TABLET	CITALOPRAM HYDROBROMIDE	1	QL
CITALOPRAM 40 MG TABLET	CITALOPRAM HYDROBROMIDE	1	QL
CLARAVIS 10 MG CAPSULE	ISOTRETINOIN	3	
CLARAVIS 20 MG CAPSULE	ISOTRETINOIN	3	
CLARAVIS 30 MG CAPSULE	ISOTRETINOIN	3	
CLARAVIS 40 MG CAPSULE	ISOTRETINOIN	3	
CLARITHROMYCIN 125 MG/5 ML ORAL SUSPENSION	CLARITHROMYCIN	1	
CLARITHROMYCIN 250 MG/5 ML ORAL SUSPENSION	CLARITHROMYCIN	1	
CLARITHROMYCIN 250 MG TABLET	CLARITHROMYCIN	1	
CLARITHROMYCIN 500 MG TABLET	CLARITHROMYCIN	1	
CLARITHROMYCIN ER 500 MG TABLET	CLARITHROMYCIN	2	
CLEMASTINE 2.68 MG TABLET	CLEMASTINE FUMARATE	1	
CLEVER CHOICE CHAMBER-LARGE MASK	INHALER,ASSIST DEVICE,LG MASK	2	QL
CLEVER CHOICE CHAMBER-MEDIUM MASK	INHALER,ASSIST DEVICE,MED MASK	2	QL
CLEVER CHOICE CHAMBER-SMALL MASK	INHALER,ASSIST DEV,SMALL MASK	2	QL
CLEVER CHOICE LEVEL 1 CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, LOW	2	
CLEVER CHOICE LEVEL 2 CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
CLEVER CHOICE LEVEL 3 CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, HIGH	2	
CLEVER CHOICE PEAK FLOW METER	PEAK FLOW METER	2	
CLICKFINE NEEDLE 31G 1/4"	PEN NEEDLE, DIABETIC	2	
CLICKFINE NEEDLE 31G 5/16"	PEN NEEDLE, DIABETIC	2	
CLICKFINE PEN NEEDLE 32G 5/32"	PEN NEEDLE, DIABETIC	2	
CLICKFINE UNIVERSAL 31G 1/4"	PEN NEEDLE, DIABETIC	2	
CLINDACIN 1% FOAM	CLINDAMYCIN PHOSPHATE	2	
CLINDACIN ETZ 1% PLEDGET	CLINDAMYCIN PHOSPHATE	1	
CLINDACIN P 1% PLEDGET	CLINDAMYCIN PHOSPHATE	1	
CLINDAMYCIN (PEDI) 75 MG/5 ML ORAL SOLUTION	CLINDAMYCIN PALMITATE HCL	1	
CLINDAMYCIN 2% VAGINAL CREAM	CLINDAMYCIN PHOSPHATE	1	
CLINDAMYCIN HCL 75 MG CAPSULE	CLINDAMYCIN HCL	1	
CLINDAMYCIN HCL 150 MG CAPSULE	CLINDAMYCIN HCL	1	
CLINDAMYCIN HCL 300 MG CAPSULE	CLINDAMYCIN HCL	1	
CLINDAMYCIN PHOSPHATE 1% FOAM	CLINDAMYCIN PHOSPHATE	2	
CLINDAMYCIN PHOSPHATE 1% GEL	CLINDAMYCIN PHOSPHATE	1	
CLINDAMYCIN PHOSPHATE 1% LOTION	CLINDAMYCIN PHOSPHATE	1	
CLINDAMYCIN PHOSPHATE 1% PLEDGET	CLINDAMYCIN PHOSPHATE	1	
CLINDAMYCIN PHOSPHATE 1% TOPICAL SOLUTION	CLINDAMYCIN PHOSPHATE	1	
CLINDAMYCIN-BENZOYL PEROXIDE 1.2-5% GEL	CLINDAMYCIN PHOS/BENZOYL PEROX	1	
CLINDAMYCIN-BENZOYL PEROXIDE 1-5% GEL	CLINDAMYCIN PHOS/BENZOYL PEROX	1	

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Medication Name	Generic Name	Tier	Notes
CLINDAMYCIN-BENZOYL PEROXIDE 1-5% GEL PUMP	CLINDAMYCIN PHOS/BENZOYL PEROX	1	
CLINDAMYCIN-TRETINOIN 1.2%-0.025% GEL	CLINDAMYCIN/TRETINOIN	1	
CLINDESSE 2% VAGINAL CREAM	CLINDAMYCIN PHOSPHATE	3	
CLOBAZAM 2.5 MG/ML ORAL SUSPENSION	CLOBAZAM	3	PA
CLOBAZAM 10 MG TABLET	CLOBAZAM	3	PA
CLOBAZAM 20 MG TABLET	CLOBAZAM	3	PA
CLOBETASOL 0.05% CREAM	CLOBETASOL PROPIONATE	1	QL
CLOBETASOL 0.05% GEL	CLOBETASOL PROPIONATE	1	QL
CLOBETASOL 0.05% OINTMENT	CLOBETASOL PROPIONATE	1	QL
CLOBETASOL 0.05% SHAMPOO	CLOBETASOL PROPIONATE	1	QL
CLOBETASOL 0.05% TOPICAL LOTION	CLOBETASOL PROPIONATE	1	QL
CLOBETASOL 0.05% TOPICAL SOLUTION	CLOBETASOL PROPIONATE	1	QL
CLOBETASOL EMOLLIENT 0.05% CREAM	CLOBETASOL PROPIONATE/EMOLL	1	QL
CLOBETASOL EMOLLIENT 0.05% FOAM	CLOBETASOL PROPIONATE/EMOLL	2	QL
CLOBETASOL EMULSION 0.05% FOAM	CLOBETASOL PROPIONATE/EMOLL	2	QL
CLOBETASOL PROPIONATE 0.05% FOAM	CLOBETASOL PROPIONATE	1	QL
CLOBETASOL PROPIONATE 0.05% SPRAY	CLOBETASOL PROPIONATE	1	QL
CLODAN 0.05% SHAMPOO	CLOBETASOL PROPIONATE	1	QL
CLOMIPHENE 50 MG TABLET	CLOMIPHENE CITRATE	1	
CLOMIPRAMINE 25 MG CAPSULE	CLOMIPRAMINE HCL	3	
CLOMIPRAMINE 50 MG CAPSULE	CLOMIPRAMINE HCL	3	
CLOMIPRAMINE 75 MG CAPSULE	CLOMIPRAMINE HCL	3	
CLONAZEPAM 0.125 MG ODT TABLET	CLONAZEPAM	1	
CLONAZEPAM 0.25 MG ODT TABLET	CLONAZEPAM	1	
CLONAZEPAM 0.5 MG ODT TABLET	CLONAZEPAM	1	
CLONAZEPAM 1 MG ODT TABLET	CLONAZEPAM	1	
CLONAZEPAM 2 MG ODT TABLET	CLONAZEPAM	1	
CLONAZEPAM 0.5 MG TABLET	CLONAZEPAM	1	
CLONAZEPAM 1 MG TABLET	CLONAZEPAM	1	
CLONAZEPAM 2 MG TABLET	CLONAZEPAM	1	
CLONIDINE 0.1 MG/DAY PATCH	CLONIDINE	1	
CLONIDINE 0.2 MG/DAY PATCH	CLONIDINE	1	
CLONIDINE 0.3 MG/DAY PATCH	CLONIDINE	1	
CLONIDINE 0.1 MG TABLET	CLONIDINE HCL	1	
CLONIDINE 0.2 MG TABLET	CLONIDINE HCL	1	
CLONIDINE 0.3 MG TABLET	CLONIDINE HCL	1	
CLONIDINE ER 0.1 MG TABLET	CLONIDINE HCL	1	
CLOPIDOGREL 75 MG TABLET	CLOPIDOGREL BISULFATE	1	
CLOPIDOGREL 300 MG TABLET	CLOPIDOGREL BISULFATE	1	
CLORAZEPATE 3.75 MG TABLET	CLORAZEPATE DIPOTASSIUM	1	
CLORAZEPATE 7.5 MG TABLET	CLORAZEPATE DIPOTASSIUM	1	

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Medication Name	Generic Name	Tier	Notes
CLORAZEPATE 15 MG TABLET	CLORAZEPATE DIPOTASSIUM	1	
CLOTRIMAZOLE 10 MG LOZENGE	CLOTRIMAZOLE	1	
CLOTRIMAZOLE 1% TOPICAL CREAM	CLOTRIMAZOLE	1	
CLOTRIMAZOLE 1% TOPICAL SOLUTION	CLOTRIMAZOLE	1	
CLOTRIMAZOLE 10 MG TROCHE	CLOTRIMAZOLE	1	
CLOTRIMAZOLE-BETAMETHASONE CREAM	CLOTRIMAZOLE/BETAMETHASONE DIP	1	
CLOTRIMAZOLE-BETAMETHASONE LOTION	CLOTRIMAZOLE/BETAMETHASONE DIP	1	
CLOZAPINE 25 MG TABLET	CLOZAPINE	1	
CLOZAPINE 50 MG TABLET	CLOZAPINE	1	
CLOZAPINE 100 MG TABLET	CLOZAPINE	1	
CLOZAPINE 200 MG TABLET	CLOZAPINE	1	
CLOZAPINE 12.5 MG ODT TABLET	CLOZAPINE	3	
CLOZAPINE 25 MG ODT TABLET	CLOZAPINE	3	
CLOZAPINE 150 MG ODT TABLET	CLOZAPINE	3	
CLOZAPINE 100 MG ODT TABLET	CLOZAPINE	3	
CLOZAPINE 200 MG ODT TABLET	CLOZAPINE	3	
C-NATE DHA SOFTGEL	PNV 11/IRON FUM/FOLIC ACID/OM3	1	
COARTEM TABLET	ARTEMETHER/LUMEFANTRINE	3	QL
CODEINE SULFATE 15 MG TABLET	CODEINE SULFATE	1	PA
CODEINE SULFATE 30 MG TABLET	CODEINE SULFATE	1	PA
CODEINE SULFATE 60 MG TABLET	CODEINE SULFATE	1	PA
COLCHICINE 0.6 MG TABLET	COLCHICINE	1	
COLESEVELAM 3.75 G PACKET	COLESEVELAM HCL	2	
COLESEVELAM 625 MG TABLET	COLESEVELAM HCL	2	
COLESTIPOL GRANULES	COLESTIPOL HCL	1	
COLESTIPOL GRANULES PACKET	COLESTIPOL HCL	1	
COLESTIPOL 1 GM TABLET	COLESTIPOL HCL	1	
COMBISTIX REAGENT TEST STRIP	URINE MULTIPLE TEST STRIPS	2	
COMETRIQ 60 MG DAILY-DOSE PACK	CABOZANTINIB S-MALATE	4	PA, QL, LDD, SRX
COMETRIQ 100 MG DAILY-DOSE PACK	CABOZANTINIB S-MALATE	4	PA, QL, LDD, SRX
COMETRIQ 140 MG DAILY-DOSE PACK	CABOZANTINIB S-MALATE	4	PA, QL, LDD, SRX
COMFORT EZ INSULIN SYRINGE 0.3 ML	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
COMFORT EZ INSULIN SYRINGE 0.3 ML 30G 1/2"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
COMFORT EZ INSULIN SYRINGE 0.3 ML 30G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
COMFORT EZ INSULIN SYRINGE 0.3 ML 31G 15/64"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
COMFORT EZ INSULIN SYRINGE 0.5 ML	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
COMFORT EZ INSULIN SYRINGE 0.5 ML 31G 15/64"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
COMFORT EZ INSULIN SYRINGE 0.5 ML 31G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
COMFORT EZ INSULIN SYRINGE 1 ML 31G 15/64"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
COMFORT EZ INSULIN SYRINGE 1 ML 31G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
COMFORT EZ PEN NEEDLE 29G 12MM	PEN NEEDLE, DIABETIC	2	

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Medication Name	Generic Name	Tier	Notes
COMFORT EZ PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC	2	
COMFORT EZ PEN NEEDLE 31G 6MM	PEN NEEDLE, DIABETIC	2	
COMFORT EZ PEN NEEDLE 31G 8MM	PEN NEEDLE, DIABETIC	2	
COMFORT EZ PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
COMFORT EZ PEN NEEDLE 32G 5MM	PEN NEEDLE, DIABETIC	2	
COMFORT EZ PEN NEEDLE 32G 6MM	PEN NEEDLE, DIABETIC	2	
COMFORT EZ PEN NEEDLE 32G 8MM	PEN NEEDLE, DIABETIC	2	
COMFORT EZ PEN NEEDLE 33G 4MM	PEN NEEDLE, DIABETIC	2	
COMFORT EZ PEN NEEDLE 33G 5MM	PEN NEEDLE, DIABETIC	2	
COMFORT EZ PEN NEEDLE 33G 6MM	PEN NEEDLE, DIABETIC	2	
COMFORT EZ PEN NEEDLE 33G 8MM	PEN NEEDLE, DIABETIC	2	
COMFORT EZ PRO PEN NEEDLE 30G 8MM	PEN NEEDLE, DIABETIC, SAFETY	2	
COMFORT EZ PRO PEN NEEDLE 31G 4MM	PEN NEEDLE, DIABETIC, SAFETY	2	
COMFORT EZ PRO PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC, SAFETY	2	
COMFORT EZ SYRINGE 0.3 ML 29G 1/2"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
COMFORT EZ SYRINGE 0.5 ML 28G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
COMFORT EZ SYRINGE 0.5 ML 29G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
COMFORT EZ SYRINGE 0.5 ML 30G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
COMFORT EZ SYRINGE 1 ML 28G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
COMFORT EZ SYRINGE 1 ML 29G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
COMFORT EZ SYRINGE 1 ML 30G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
COMFORT EZ SYRINGE 1 ML 30G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
COMFORT POINT PEN NEEDLE 29G 1/2"	PEN NEEDLE, DIABETIC	2	
COMFORT POINT PEN NEEDLE 31G 1/3"	PEN NEEDLE, DIABETIC	2	
COMFORT POINT PEN NEEDLE 31G 1/4"	PEN NEEDLE, DIABETIC	2	
COMFORT POINT PEN NEEDLE 31G 1/6"	PEN NEEDLE, DIABETIC	2	
COMFORT TOUCH PEN NEEDLE 31G 4MM	PEN NEEDLE, DIABETIC	2	
COMFORT TOUCH PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC	2	
COMFORT TOUCH PEN NEEDLE 31G 6MM	PEN NEEDLE, DIABETIC	2	
COMFORT TOUCH PEN NEEDLE 31G 8MM	PEN NEEDLE, DIABETIC	2	
COMFORT TOUCH PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
COMFORT TOUCH PEN NEEDLE 32G 5MM	PEN NEEDLE, DIABETIC	2	
COMFORT TOUCH PEN NEEDLE 32G 6MM	PEN NEEDLE, DIABETIC	2	
COMFORT TOUCH PEN NEEDLE 32G 8MM	PEN NEEDLE, DIABETIC	2	
COMFORT TOUCH PEN NEEDLE 33G 4MM	PEN NEEDLE, DIABETIC	2	
COMFORT TOUCH PEN NEEDLE 33G 5MM	PEN NEEDLE, DIABETIC	2	
COMFORT TOUCH PEN NEEDLE 33G 6MM	PEN NEEDLE, DIABETIC	2	
COMFORTSEAL LARGE MASK	INHALER,ASSIST DEVICE,ACCESORY	2	QL
COMFORTSEAL MEDIUM MASK	INHALER,ASSIST DEVICE,ACCESORY	2	QL
COMFORTSEAL SMALL MASK	INHALER,ASSIST DEVICE,ACCESORY	2	QL
COMIRNATY (12Y UP) SYRINGE	COVID VAC 23-24(12UP)(RAXT)/PF	2	

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Medication Name	Generic Name	Tier	Notes
COMIRNATY (12Y UP) VIAL	COVID VAC 23-24(12UP)(RAXT)/PF	2	
COMIRNATY 30 MCG/0.3 ML VACCINE - GRAY	COVID-19 VAC, TRIS(PFIZER)/PF	2	
COMPACT SPACE CHAMBER	INHALER, ASSIST DEVICES	2	QL
COMPACT SPACE CHAMBER-LARGE MASK	INHALER,ASSIST DEVICE,LG MASK	2	QL
COMPACT SPACE CHAMBER-MEDIUM MASK	INHALER,ASSIST DEVICE,MED MASK	2	QL
COMPACT SPACE CHAMBER-SMALL MASK	INHALER,ASSIST DEV,SMALL MASK	2	QL
COMPLETENATE CHEWABLE TABLET	PRENATAL VIT 14/IRON FUM/FOLIC	1	
COMPRO 25 MG SUPPOSITORY	PROCHLORPERAZINE	2	
CONSTULOSE 10 GM/15 ML ORAL SOLUTION	LACTULOSE	1	
CONTOUR CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, HIGH	2	
CONTOUR NEXT LEVEL 1 CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, LOW	2	
CONTOUR NEXT LEVEL 2 CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
COOL A CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
COOL B CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, HIGH	2	
CORTISONE 25 MG TABLET	CORTISONE ACETATE	1	
CORTISPORIN-TC EAR SUSPENSION	NEOMYC/COLIST/HYDROCORT/THONZN	3	
COSENTYX 75 MG/0.5 ML SYRINGE	SECUKINUMAB	4	PA, QL, SRX
COSENTYX 150 MG/ML SYRINGE	SECUKINUMAB	4	PA, QL, SRX
COSENTYX 300 MG DOSE-2 SYRINGE	SECUKINUMAB	4	PA, QL, SRX
COSENTYX SENSOREADY 150 MG PEN	SECUKINUMAB	4	PA, QL, SRX
COSENTYX SENSOREADY 300 MG DOSE-2PEN	SECUKINUMAB	4	PA, QL, SRX
COSENTYX UNOREADY 300 MG PEN	SECUKINUMAB	4	PA, QL, SRX
COTELLIC 20 MG TABLET	COBIMETINIB FUMARATE	4	PA, QL, LDD, SRX
COVARYX H.S. TABLET	ESTROGEN,ESTER/ME-TESTOSTERONE	1	
COVARYX TABLET	ESTROGEN,ESTER/ME-TESTOSTERONE	1	
CRESEMBA 74.5 MG CAPSULE	ISAVUCONAZONIUM SULFATE	3	PA
CRESEMBA 186 MG CAPSULE	ISAVUCONAZONIUM SULFATE	3	PA
CROMOLYN 4% EYE DROPS	CROMOLYN SODIUM	1	
CROMOLYN 20 MG/2 ML INHALATION SOLUTION	CROMOLYN SODIUM	3	QL
CROMOLYN 100 MG/5 ML ORAL CONCENTRATE	CROMOLYN SODIUM	3	
CROTAN 10% LOTION	CROTAMITON	3	PA
CRYSELLE-28 TABLET	NORGESTREL-ETHINYL ESTRADIOL	1	
CVS ALKALINE BATTERIES	DIABETIC SUPPLIES,MISCELL	2	
CVS KETONE CARE TEST STRIP	URINE ACETONE TEST STRIPS	2	
CYANOCOBALAMIN 1,000 MCG/ML VIAL	CYANOCOBALAMIN (VITAMIN B-12)	1	
CYANOCOBALAMIN 10,000 MCG/10 ML VIAL	CYANOCOBALAMIN (VITAMIN B-12)	1	
CYANOCOBALAMIN 30,000 MCG/30 ML VIAL	CYANOCOBALAMIN (VITAMIN B-12)	1	
CYCLOBENZAPRINE 5 MG TABLET	CYCLOBENZAPRINE HCL	1	
CYCLOBENZAPRINE 10 MG TABLET	CYCLOBENZAPRINE HCL	1	
CYCLOMYDRIL EYE DROPS	CYCLOPENTOLATE/PHENYLEPHRINE	3	
CYCLOPENTOLATE 0.5% EYE DROPS	CYCLOPENTOLATE HCL	1	

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Medication Name	Generic Name	Tier	Notes
CYCLOPENTOLATE 1% EYE DROPS	CYCLOPENTOLATE HCL	1	
CYCLOPENTOLATE 2% EYE DROPS	CYCLOPENTOLATE HCL	1	
CYCLOPHOSPHAMIDE 25 MG CAPSULE	CYCLOPHOSPHAMIDE	2	SRX
CYCLOPHOSPHAMIDE 50 MG CAPSULE	CYCLOPHOSPHAMIDE	2	SRX
CYCLOSERINE 250 MG CAPSULE	CYCLOSERINE	1	
CYCLOSET 0.8 MG TABLET	BROMOCRIPTINE MESYLATE	3	
CYCLOSPORINE 25 MG CAPSULE	CYCLOSPORINE	1	SRX
CYCLOSPORINE 100 MG CAPSULE	CYCLOSPORINE	1	SRX
CYCLOSPORINE 0.05% EYE EMULSION	CYCLOSPORINE	3	
CYCLOSPORINE MODIFIED 25 MG CAPSULE	CYCLOSPORINE, MODIFIED	1	SRX
CYCLOSPORINE MODIFIED 50 MG CAPSULE	CYCLOSPORINE, MODIFIED	1	SRX
CYCLOSPORINE MODIFIED 100 MG CAPSULE	CYCLOSPORINE, MODIFIED	1	SRX
CYCLOSPORINE MODIFIED 100 MG/ML ORAL SOLUTION	CYCLOSPORINE, MODIFIED	1	SRX
CYLTEZO (CF) 40 MG CROHN'S-UC-HS PEN	ADALIMUMAB-ADBM	4	PA, QL, SRX
CYLTEZO (CF) 40 MG/0.4 ML PEN	ADALIMUMAB-ADBM	4	PA, QL, SRX
CYLTEZO (CF) 40 MG/0.8 ML PEN	ADALIMUMAB-ADBM	4	PA, QL, SRX
CYLTEZO (CF) 40 MG PSORIASIS-UVEITIS PEN	ADALIMUMAB-ADBM	4	PA, QL, SRX
CYLTEZO (CF) 10 MG/0.2 ML SYRINGE	ADALIMUMAB-ADBM	4	PA, QL, SRX
CYLTEZO (CF) 20 MG/0.4 ML SYRINGE	ADALIMUMAB-ADBM	4	PA, QL, SRX
CYLTEZO (CF) 40 MG/0.4 ML SYRINGE	ADALIMUMAB-ADBM	4	PA, QL, SRX
CYLTEZO (CF) 40 MG/0.8 ML SYRINGE	ADALIMUMAB-ADBM	4	PA, QL, SRX
CYPROHEPTADINE 2 MG/5 ML SYRUP	CYPROHEPTADINE HCL	1	
CYPROHEPTADINE 4 MG TABLET	CYPROHEPTADINE HCL	1	
CYRED 28 DAY TABLET	DESOGESTREL-ETHINYL ESTRADIOL	1	
CYRED EQ 28 DAY TABLET	DESOGESTREL-ETHINYL ESTRADIOL	1	
CYSTAGON 50 MG CAPSULE	CYSTEAMINE BITARTRATE	4	PA, LDD, SRX
CYSTAGON 150 MG CAPSULE	CYSTEAMINE BITARTRATE	4	PA, LDD, SRX
CYSTARAN 0.44% EYE DROPS	CYSTEAMINE HCL	3	PA, QL, LDD, SRX
DABIGATRAN 75 MG CAPSULE	DABIGATRAN ETEXILATE MESYLATE	3	QL
DABIGATRAN 110 MG CAPSULE	DABIGATRAN ETEXILATE MESYLATE	3	QL
DABIGATRAN 150 MG CAPSULE	DABIGATRAN ETEXILATE MESYLATE	3	QL
DALFAMPRIDINE ER 10 MG TABLET	DALFAMPRIDINE	4	PA, QL, SRX
DANAZOL 50 MG CAPSULE	DANAZOL	1	
DANAZOL 100 MG CAPSULE	DANAZOL	1	
DANAZOL 200 MG CAPSULE	DANAZOL	1	
DANTROLENE 25 MG CAPSULE	DANTROLENE SODIUM	1	
DANTROLENE 50 MG CAPSULE	DANTROLENE SODIUM	1	
DANTROLENE 100 MG CAPSULE	DANTROLENE SODIUM	1	
DAPSONE 25 MG TABLET	DAPSONE	3	
DAPSONE 100 MG TABLET	DAPSONE	3	
DAPTACEL DTAP VACCINE	DIPH,PERTUSS(ACELL),TET PED/PF	2	

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Medication Name	Generic Name	Tier	Notes
DARIFENACIN ER 7.5 MG TABLET	DARIFENACIN HYDROBROMIDE	1	
DARIFENACIN ER 15 MG TABLET	DARIFENACIN HYDROBROMIDE	1	
DARUNAVIR 600 MG TABLET	DARUNAVIR	1	SRX
DARUNAVIR 800 MG TABLET	DARUNAVIR	1	SRX
DASATINIB 20 MG TABLET	DASATINIB	4	PA, QL, SRX
DASATINIB 50 MG TABLET	DASATINIB	4	PA, QL, SRX
DASATINIB 70 MG TABLET	DASATINIB	4	PA, QL, SRX
DASATINIB 80 MG TABLET	DASATINIB	4	PA, QL, SRX
DASATINIB 100 MG TABLET	DASATINIB	4	PA, QL, SRX
DASATINIB 140 MG TABLET	DASATINIB	4	PA, QL, SRX
DASETTA 1-35-28 TABLET	NORETHINDRONE-ETHIN. ESTRADIOL	1	
DASETTA 7/7/7-28 TABLET	NORETHINDRONE-ETHIN. ESTRADIOL	1	
DAYSEE 0.15-0.03-0.01 MG TABLET	L-NORGEST/E.ESTRADIOL-E.ESTRAD	1	
DEBLITANE 0.35 MG TABLET	NORETHINDRONE	1	
DEFERASIROX 90 MG GRANULE PACKET	DEFERASIROX	4	PA, SRX
DEFERASIROX 180 MG GRANULE PACKET	DEFERASIROX	4	PA, SRX
DEFERASIROX 360 MG GRANULE PACKET	DEFERASIROX	4	PA, SRX
DEFERASIROX 90 MG TABLET	DEFERASIROX	4	PA, SRX
DEFERASIROX 180 MG TABLET	DEFERASIROX	4	PA, SRX
DEFERASIROX 360 MG TABLET	DEFERASIROX	4	PA, SRX
DEFERASIROX 125 MG TABLET FOR SUSPENSION	DEFERASIROX	4	PA, SRX
DEFERASIROX 250 MG TABLET FOR SUSPENSION	DEFERASIROX	4	PA, SRX
DEFERASIROX 500 MG TABLET FOR SUSPENSION	DEFERASIROX	4	PA, SRX
DEFERIPRONE 500 MG TABLET	DEFERIPRONE	4	PA, SRX
DEFERIPRONE 1,000 MG TABLET (3X/DAY)	DEFERIPRONE	4	PA, SRX
DELTEC COZMO CLEO INFUSION SET	SUBCUTANEOUS ADMIN. SET	2	
DEMECLOCYCLINE 150 MG TABLET	DEMECLOCYCLINE HCL	2	
DEMECLOCYCLINE 300 MG TABLET	DEMECLOCYCLINE HCL	2	
DENTA 5000 PLUS SENSITIVE TOOTHPASTE	SODIUM FLUORIDE/POTASSIUM NIT	1	
DENTA 5000 PLUS TOOTHPASTE	FLUORIDE (SODIUM)	1	
DENTAGEL 1.1% GEL	FLUORIDE (SODIUM)	1	
DEPO-SUBQ PROVERA 104 SYRINGE	MEDROXYPROGESTERONE ACETATE	1	
DERMACINRX LIDOCAN 5% PATCH	LIDOCAINE	1	
DESCOVY 120-15 MG TABLET	EMTRICITABINE/TENOFOV ALAFENAM	2	SRX
DESCOVY 200-25 MG TABLET	EMTRICITABINE/TENOFOV ALAFENAM	2	SRX
DESIPRAMINE 10 MG TABLET	DESIPRAMINE HCL	1	
DESIPRAMINE 25 MG TABLET	DESIPRAMINE HCL	1	
DESIPRAMINE 50 MG TABLET	DESIPRAMINE HCL	1	
DESIPRAMINE 75 MG TABLET	DESIPRAMINE HCL	1	
DESIPRAMINE 100 MG TABLET	DESIPRAMINE HCL	1	
DESIPRAMINE 150 MG TABLET	DESIPRAMINE HCL	1	

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Medication Name	Generic Name	Tier	Notes
DESLORATADINE 5 MG TABLET	DESLORATADINE	1	QL
DESLORATADINE 2.5 MG ODT TABLET	DESLORATADINE	1	QL
DESLORATADINE 5 MG ODT TABLET	DESLORATADINE	1	QL
DESMOPRESSIN 0.01% NASAL SPRAY	DESMOPRESSIN ACETATE	1	
DESMOPRESSIN 10 MCG/0.1 ML NASAL SPRAY	DESMOPRESSIN (NONREFRIGERATED)	1	
DESMOPRESSIN 0.1 MG TABLET	DESMOPRESSIN ACETATE	1	
DESMOPRESSIN 0.2 MG TABLET	DESMOPRESSIN ACETATE	1	
DESOGESTREL-ETHINYL ESTRADIOL 0.15-0.03 MG TABLET	DESOGESTREL-ETHINYL ESTRADIOL	1	
DESOGESTREL-ETHINYL ESTRADIOL ETHINYL ESTRADIOL TABLET	DESOG-E.ESTRADIOL/E.ESTRADIOL	1	
DESONIDE 0.05% CREAM	DESONIDE	1	
DESONIDE 0.05% LOTION	DESONIDE	2	
DESONIDE 0.05% OINTMENT	DESONIDE	1	
DESOXIMETASONE 0.05% CREAM	DESOXIMETASONE	2	
DESOXIMETASONE 0.25% CREAM	DESOXIMETASONE	2	
DESOXIMETASONE 0.05% GEL	DESOXIMETASONE	2	
DESOXIMETASONE 0.05% OINTMENT	DESOXIMETASONE	2	
DESOXIMETASONE 0.25% OINTMENT	DESOXIMETASONE	2	
DESVENLAFAXINE SUCCINATE ER 25 MG TABLET	DESVENLAFAXINE SUCCINATE	1	QL
DESVENLAFAXINE SUCCINATE ER 50 MG TABLET	DESVENLAFAXINE SUCCINATE	1	QL
DESVENLAFAXINE SUCCINATE ER 100 MG TABLET	DESVENLAFAXINE SUCCINATE	1	QL
DEXAMETHASONE 0.1% EYE DROPS	DEXAMETHASONE SODIUM PHOSPHATE	1	
DEXAMETHASONE 0.5 MG/5 ML ELIXIR	DEXAMETHASONE	1	
DEXAMETHASONE 0.5 MG/5 ML LIQUID	DEXAMETHASONE	1	
DEXAMETHASONE 0.5 MG TABLET	DEXAMETHASONE	1	
DEXAMETHASONE 0.75 MG TABLET	DEXAMETHASONE	1	
DEXAMETHASONE 1 MG TABLET	DEXAMETHASONE	1	
DEXAMETHASONE 1.5 MG TABLET	DEXAMETHASONE	1	
DEXAMETHASONE 2 MG TABLET	DEXAMETHASONE	1	
DEXAMETHASONE 4 MG TABLET	DEXAMETHASONE	1	
DEXAMETHASONE 6 MG TABLET	DEXAMETHASONE	1	
DEXAMETHASONE INTENSOL 1 MG/ML ORAL CONCENTRATE	DEXAMETHASONE	1	
DEXCOM G6 RECEIVER	BLOOD-GLUCOSE,RECEIVER,CONT	2	PA, QL
DEXCOM G6 SENSOR	BLOOD-GLUCOSE SENSOR	2	PA, QL
DEXCOM G6 TRANSMITTER	BLOOD-GLUCOSE TRANSMITTER	2	PA, QL
DEXCOM G7 RECEIVER	BLOOD-GLUCOSE,RECEIVER,CONT	2	PA, QL
DEXCOM G7 SENSOR	BLOOD-GLUCOSE SENSOR	2	PA, QL
DEXLANSOPRAZOLE DR 30 MG CAPSULE	DEXLANSOPRAZOLE	3	QL
DEXLANSOPRAZOLE DR 60 MG CAPSULE	DEXLANSOPRAZOLE	3	QL
DEXMETHYLPHENIDATE 2.5 MG TABLET	DEXMETHYLPHENIDATE HCL	1	QL
DEXMETHYLPHENIDATE 5 MG TABLET	DEXMETHYLPHENIDATE HCL	1	QL
DEXMETHYLPHENIDATE 10 MG TABLET	DEXMETHYLPHENIDATE HCL	1	QL

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Medication Name	Generic Name	Tier	Notes
DEXMETHYLPHENIDATE ER 5 MG CAPSULE	DEXMETHYLPHENIDATE HCL	2	QL
DEXMETHYLPHENIDATE ER 10 MG CAPSULE	DEXMETHYLPHENIDATE HCL	2	QL
DEXMETHYLPHENIDATE ER 15 MG CAPSULE	DEXMETHYLPHENIDATE HCL	2	QL
DEXMETHYLPHENIDATE ER 20 MG CAPSULE	DEXMETHYLPHENIDATE HCL	2	QL
DEXMETHYLPHENIDATE ER 25 MG CAPSULE	DEXMETHYLPHENIDATE HCL	2	QL
DEXMETHYLPHENIDATE ER 30 MG CAPSULE	DEXMETHYLPHENIDATE HCL	2	QL
DEXMETHYLPHENIDATE ER 35 MG CAPSULE	DEXMETHYLPHENIDATE HCL	2	QL
DEXMETHYLPHENIDATE ER 40 MG CAPSULE	DEXMETHYLPHENIDATE HCL	2	QL
DEXTROAMPHETAMINE 5 MG/5 ML ORAL SOLUTION	DEXTROAMPHETAMINE SULFATE	1	QL
DEXTROAMPHETAMINE 5 MG TABLET	DEXTROAMPHETAMINE SULFATE	1	QL
DEXTROAMPHETAMINE 10 MG TABLET	DEXTROAMPHETAMINE SULFATE	1	QL
DEXTROAMPHETAMINE ER 5 MG CAPSULE	DEXTROAMPHETAMINE SULFATE	1	QL
DEXTROAMPHETAMINE ER 10 MG CAPSULE	DEXTROAMPHETAMINE SULFATE	1	QL
DEXTROAMPHETAMINE ER 15 MG CAPSULE	DEXTROAMPHETAMINE SULFATE	1	QL
DEXTROAMPHETAMINE-AMPHETAMINE 5 MG TABLET	DEXTROAMPHETAMINE/AMPHETAMINE	1	QL
DEXTROAMPHETAMINE-AMPHETAMINE 7.5 MG TABLET	DEXTROAMPHETAMINE/AMPHETAMINE	1	QL
DEXTROAMPHETAMINE-AMPHETAMINE 10 MG TABLET	DEXTROAMPHETAMINE/AMPHETAMINE	1	QL
DEXTROAMPHETAMINE-AMPHETAMINE 12.5 MG TABLET	DEXTROAMPHETAMINE/AMPHETAMINE	1	QL
DEXTROAMPHETAMINE-AMPHETAMINE 15 MG TABLET	DEXTROAMPHETAMINE/AMPHETAMINE	1	QL
DEXTROAMPHETAMINE-AMPHETAMINE 20 MG TABLET	DEXTROAMPHETAMINE/AMPHETAMINE	1	QL
DEXTROAMPHETAMINE-AMPHETAMINE 30 MG TABLET	DEXTROAMPHETAMINE/AMPHETAMINE	1	QL
DEXTROAMPHETAMINE-AMPHETAMINE ER 5 MG CAPSULE	DEXTROAMPHETAMINE/AMPHETAMINE	1	QL
DEXTROAMPHETAMINE-AMPHETAMINE ER 10 MG CAPSULE	DEXTROAMPHETAMINE/AMPHETAMINE	1	QL
DEXTROAMPHETAMINE-AMPHETAMINE ER 15 MG CAPSULE	DEXTROAMPHETAMINE/AMPHETAMINE	1	QL
DEXTROAMPHETAMINE-AMPHETAMINE ER 20 MG CAPSULE	DEXTROAMPHETAMINE/AMPHETAMINE	1	QL
DEXTROAMPHETAMINE-AMPHETAMINE ER 25 MG CAPSULE	DEXTROAMPHETAMINE/AMPHETAMINE	1	QL
DEXTROAMPHETAMINE-AMPHETAMINE ER 30 MG CAPSULE	DEXTROAMPHETAMINE/AMPHETAMINE	1	QL
DIASTIX REAGENT TEST STRIP	URINE GLUCOSE TEST STRIP	2	
DIATRUE LEVEL 1 CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, LOW	2	
DIATRUE LEVEL 2 CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
DIATRUE LEVEL 3 CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, HIGH	2	
DIAZEPAM 5 MG/ML ORAL CONCENTRATE	DIAZEPAM	1	
DIAZEPAM 25 MG/5 ML ORAL CONCENTRATE	DIAZEPAM	1	
DIAZEPAM 5 MG/5 ML ORAL SOLUTION	DIAZEPAM	1	
DIAZEPAM 2.5 MG RECTAL GEL (2PK)	DIAZEPAM	1	
DIAZEPAM 10 MG RECTAL GEL (2PK)	DIAZEPAM	1	
DIAZEPAM 20 MG RECTAL GEL (2PK)	DIAZEPAM	1	
DIAZEPAM 10 MG RECTAL GEL SYRINGE	DIAZEPAM	1	
DIAZEPAM 20 MG RECTAL GEL SYRINGE	DIAZEPAM	1	
DIAZEPAM 2 MG TABLET	DIAZEPAM	1	
DIAZEPAM 5 MG TABLET	DIAZEPAM	1	

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Medication Name	Generic Name	Tier	Notes
DIAZEPAM 10 MG TABLET	DIAZEPAM	1	
DIAZOXIDE 50 MG/ML ORAL SUSPENSION	DIAZOXIDE	3	
DICLOFENAC 0.1% EYE DROPS	DICLOFENAC SODIUM	1	
DICLOFENAC 1.5% TOPICAL SOLUTION	DICLOFENAC SODIUM	1	
DICLOFENAC POTASSIUM 50 MG TABLET	DICLOFENAC POTASSIUM	1	
DICLOFENAC SODIUM 1% GEL	DICLOFENAC SODIUM	1	QL
DICLOFENAC SODIUM DR 25 MG TABLET	DICLOFENAC SODIUM	1	
DICLOFENAC SODIUM DR 50 MG TABLET	DICLOFENAC SODIUM	1	
DICLOFENAC SODIUM DR 75 MG TABLET	DICLOFENAC SODIUM	1	
DICLOFENAC SODIUM EC 25 MG TABLET	DICLOFENAC SODIUM	1	
DICLOFENAC SODIUM EC 50 MG TABLET	DICLOFENAC SODIUM	1	
DICLOFENAC SODIUM EC 75 MG TABLET	DICLOFENAC SODIUM	1	
DICLOFENAC SODIUM ER 100 MG TABLET	DICLOFENAC SODIUM	1	
DICLOFENAC-MISOPROSTOL 50-0.2 MG TABLET	DICLOFENAC SODIUM/MISOPROSTOL	1	
DICLOFENAC-MISOPROSTOL 75-0.2 MG TABLET	DICLOFENAC SODIUM/MISOPROSTOL	1	
DICLOXACILLIN 250 MG CAPSULE	DICLOXACILLIN SODIUM	1	
DICLOXACILLIN 500 MG CAPSULE	DICLOXACILLIN SODIUM	1	
DICYCLOMINE 10 MG CAPSULE	DICYCLOMINE HCL	1	
DICYCLOMINE 10 MG/5 ML ORAL SOLUTION	DICYCLOMINE HCL	1	
DICYCLOMINE 20 MG TABLET	DICYCLOMINE HCL	1	
DIDANOSINE DR 250 MG CAPSULE	DIDANOSINE	1	SRX
DIDANOSINE DR 400 MG CAPSULE	DIDANOSINE	1	SRX
DIFICID 40 MG/ML ORAL SUSPENSION	FIDAXOMICIN	3	PA, QL
DIFICID 200 MG TABLET	FIDAXOMICIN	3	PA, QL
DIFLUNISAL 500 MG TABLET	DIFLUNISAL	1	
DIFLUPREDNATE 0.05% EYE DROPS	DIFLUPREDNATE	2	
DIGOX 125 MCG TABLET	DIGOXIN	1	
DIGOX 250 MCG TABLET	DIGOXIN	1	
DIGOXIN 0.05 MG/ML ORAL SOLUTION	DIGOXIN	1	
DIGOXIN 0.125 MG TABLET	DIGOXIN	1	
DIGOXIN 0.25 MG TABLET	DIGOXIN	1	
DIGOXIN 125 MCG TABLET	DIGOXIN	1	
DIGOXIN 250 MCG TABLET	DIGOXIN	1	
DIHYDROERGOTAMINE 1 MG/ML AMPULE	DIHYDROERGOTAMINE MESYLATE	3	QL
DILT XR 120 MG CAPSULE	DILTIAZEM HCL	1	
DILT XR 180 MG CAPSULE	DILTIAZEM HCL	1	
DILT XR 240 MG CAPSULE	DILTIAZEM HCL	1	
DILTIAZEM 120 MG TABLET	DILTIAZEM HCL	1	
DILTIAZEM 12HR ER 60 MG CAPSULE	DILTIAZEM HCL	1	
DILTIAZEM 12HR ER 90 MG CAPSULE	DILTIAZEM HCL	1	
DILTIAZEM 12HR ER 120 MG CAPSULE	DILTIAZEM HCL	1	

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Medication Name	Generic Name	Tier	Notes
DILTIAZEM 24H ER(CD) 120 MG CAPSULE	DILTIAZEM HCL	1	
DILTIAZEM 24H ER(CD) 180 MG CAPSULE	DILTIAZEM HCL	1	
DILTIAZEM 24H ER(CD) 240 MG CAPSULE	DILTIAZEM HCL	1	
DILTIAZEM 24H ER(CD) 300 MG CAPSULE	DILTIAZEM HCL	1	
DILTIAZEM 24H ER(CD) 360 MG CAPSULE	DILTIAZEM HCL	1	
DILTIAZEM 24H ER(LA) 120 MG TABLET	DILTIAZEM HCL	2	
DILTIAZEM 24H ER(LA) 180 MG TABLET	DILTIAZEM HCL	2	
DILTIAZEM 24H ER(LA) 240 MG TABLET	DILTIAZEM HCL	2	
DILTIAZEM 24H ER(LA) 300 MG TABLET	DILTIAZEM HCL	2	
DILTIAZEM 24H ER(LA) 360 MG TABLET	DILTIAZEM HCL	2	
DILTIAZEM 24H ER(LA) 420 MG TABLET	DILTIAZEM HCL	2	
DILTIAZEM 24H ER(XR) 120 MG CAPSULE	DILTIAZEM HCL	1	
DILTIAZEM 24H ER(XR) 180 MG CAPSULE	DILTIAZEM HCL	1	
DILTIAZEM 24H ER(XR) 240 MG CAPSULE	DILTIAZEM HCL	1	
DILTIAZEM 24HR ER 120 MG CAPSULE	DILTIAZEM HCL	1	
DILTIAZEM 24HR ER 180 MG CAPSULE	DILTIAZEM HCL	1	
DILTIAZEM 24HR ER 240 MG CAPSULE	DILTIAZEM HCL	1	
DILTIAZEM 24HR ER 300 MG CAPSULE	DILTIAZEM HCL	1	
DILTIAZEM 24HR ER 360 MG CAPSULE	DILTIAZEM HCL	1	
DILTIAZEM 24HR ER 420 MG CAPSULE	DILTIAZEM HCL	1	
DILTIAZEM 30 MG TABLET	DILTIAZEM HCL	1	
DILTIAZEM 60 MG TABLET	DILTIAZEM HCL	1	
DILTIAZEM 90 MG TABLET	DILTIAZEM HCL	1	
DIMETHYL FUMARATE 30 DAY STARTER PACK	DIMETHYL FUMARATE	3	PA, QL, SRX
DIMETHYL FUMARATE DR 120 MG CAPSULE	DIMETHYL FUMARATE	3	PA, QL, SRX
DIMETHYL FUMARATE DR 240 MG CAPSULE	DIMETHYL FUMARATE	3	PA, QL, SRX
DIPENTUM 250 MG CAPSULE	OLSALAZINE SODIUM	3	
DIPHEN 12.5 MG/5 ML ELIXIR	DIPHENHYDRAMINE HCL	3	
DIPHEN 12.5 MG/5 ML ORAL SOLUTION	DIPHENHYDRAMINE HCL	3	
DIPHENHYDRAMINE 12.5 MG/5 ML ORAL SOLUTION	DIPHENHYDRAMINE HCL	1	
DIPHENHYDRAMINE 25 MG/10 ML ORAL SOLUTION	DIPHENHYDRAMINE HCL	1	
DIPHENOXYLATE-ATROPINE 2.5-0.025/5 ML ORAL SOLUTION	DIPHENOXYLATE HCL/ATROPINE	1	
DIPHENOXYLATE-ATROPINE 2.5-0.025 MG TABLET	DIPHENOXYLATE HCL/ATROPINE	1	
DIPHTHERIA-TETANUS TOXOIDS-PEDIATRIC	TETANUS,DIPHTHERIA TOXD PED/PF	2	
DIPYRIDAMOLE 25 MG TABLET	DIPYRIDAMOLE	1	
DIPYRIDAMOLE 50 MG TABLET	DIPYRIDAMOLE	1	
DIPYRIDAMOLE 75 MG TABLET	DIPYRIDAMOLE	1	
DISOPYRAMIDE 100 MG CAPSULE	DISOPYRAMIDE PHOSPHATE	1	
DISOPYRAMIDE 150 MG CAPSULE	DISOPYRAMIDE PHOSPHATE	1	
DISULFIRAM 250 MG TABLET	DISULFIRAM	1	
DISULFIRAM 500 MG TABLET	DISULFIRAM	1	

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Medication Name	Generic Name	Tier	Notes
DIVALPROEX DR 125 MG CAPSULE SPRINKLE	DIVALPROEX SODIUM	1	
DIVALPROEX DR 125 MG TABLET	DIVALPROEX SODIUM	1	
DIVALPROEX DR 250 MG TABLET	DIVALPROEX SODIUM	1	
DIVALPROEX DR 500 MG TABLET	DIVALPROEX SODIUM	1	
DIVALPROEX ER 250 MG TABLET	DIVALPROEX SODIUM	1	
DIVALPROEX ER 500 MG TABLET	DIVALPROEX SODIUM	1	
DODEX 10,000 MCG/10 ML VIAL	CYANOCOBALAMIN (VITAMIN B-12)	1	
DODEX 30,000 MCG/30 ML VIAL	CYANOCOBALAMIN (VITAMIN B-12)	1	
DOFETILIDE 125 MCG CAPSULE	DOFETILIDE	3	QL
DOFETILIDE 250 MCG CAPSULE	DOFETILIDE	3	QL
DOFETILIDE 500 MCG CAPSULE	DOFETILIDE	3	QL
DOLISHALE 90-20 MCG TABLET	LEVONORGESTREL/ETHIN.ESTRADIOL	1	
DONEPEZIL 5 MG ODT TABLET	DONEPEZIL HCL	1	
DONEPEZIL 10 MG ODT TABLET	DONEPEZIL HCL	1	
DONEPEZIL 5 MG TABLET	DONEPEZIL HCL	1	
DONEPEZIL 10 MG TABLET	DONEPEZIL HCL	1	
DONEPEZIL 23 MG TABLET	DONEPEZIL HCL	1	
DORZOLAMIDE 2% EYE DROPS	DORZOLAMIDE HCL	1	
DORZOLAMIDE-TIMOLOL EYE DROPS	DORZOLAMIDE HCL/TIMOLOL MALEAT	1	
DOTTI 0.025 MG PATCH	ESTRADIOL	1	QL
DOTTI 0.0375 MG PATCH	ESTRADIOL	1	QL
DOTTI 0.05 MG PATCH	ESTRADIOL	1	QL
DOTTI 0.075 MG PATCH	ESTRADIOL	1	QL
DOTTI 0.1 MG PATCH	ESTRADIOL	1	QL
DOVATO 50-300 MG TABLET	DOLUTEGRAVIR SODIUM/LAMIVUDINE	3	QL, SRX
DOXAZOSIN 1 MG TABLET	DOXAZOSIN MESYLATE	1	
DOXAZOSIN 2 MG TABLET	DOXAZOSIN MESYLATE	1	
DOXAZOSIN 4 MG TABLET	DOXAZOSIN MESYLATE	1	
DOXAZOSIN 8 MG TABLET	DOXAZOSIN MESYLATE	1	
DOXEPIN 10 MG CAPSULE	DOXEPIN HCL	1	
DOXEPIN 25 MG CAPSULE	DOXEPIN HCL	1	
DOXEPIN 50 MG CAPSULE	DOXEPIN HCL	1	
DOXEPIN 75 MG CAPSULE	DOXEPIN HCL	1	
DOXEPIN 100 MG CAPSULE	DOXEPIN HCL	1	
DOXEPIN 150 MG CAPSULE	DOXEPIN HCL	1	
DOXEPIN 5% CREAM	DOXEPIN HCL	3	QL
DOXEPIN 10 MG/ML ORAL CONCENTRATE	DOXEPIN HCL	1	
DOXEPIN 3 MG TABLET	DOXEPIN HCL	2	QL
DOXEPIN 6 MG TABLET	DOXEPIN HCL	2	QL
DOXERCALCIFEROL 0.5 MCG CAPSULE	DOXERCALCIFEROL	1	
DOXERCALCIFEROL 1 MCG CAPSULE	DOXERCALCIFEROL	1	

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Medication Name	Generic Name	Tier	Notes
DOXERCALCIFEROL 2.5 MCG CAPSULE	DOXERCALCIFEROL	1	
DOXYCYCLINE 25 MG/5 ML ORAL SUSPENSION	DOXYCYCLINE MONOHYDRATE	1	
DOXYCYCLINE HYCLATE 50 MG CAPSULE	DOXYCYCLINE HYCLATE	1	
DOXYCYCLINE HYCLATE 100 MG CAPSULE	DOXYCYCLINE HYCLATE	1	
DOXYCYCLINE HYCLATE 20 MG TABLET	DOXYCYCLINE HYCLATE	1	
DOXYCYCLINE HYCLATE 100 MG TABLET	DOXYCYCLINE HYCLATE	1	
DOXYCYCLINE MONOHYDRATE 50 MG CAPSULE	DOXYCYCLINE MONOHYDRATE	1	
DOXYCYCLINE MONOHYDRATE 75 MG CAPSULE	DOXYCYCLINE MONOHYDRATE	1	
DOXYCYCLINE MONOHYDRATE 100 MG CAPSULE	DOXYCYCLINE MONOHYDRATE	1	
DOXYCYCLINE MONOHYDRATE 150 MG CAPSULE	DOXYCYCLINE MONOHYDRATE	1	
DOXYCYCLINE MONOHYDRATE 50 MG TABLET	DOXYCYCLINE MONOHYDRATE	1	
DOXYCYCLINE MONOHYDRATE 75 MG TABLET	DOXYCYCLINE MONOHYDRATE	1	
DOXYCYCLINE MONOHYDRATE 100 MG TABLET	DOXYCYCLINE MONOHYDRATE	1	
DOXYCYCLINE MONOHYDRATE 150 MG TABLET	DOXYCYCLINE MONOHYDRATE	1	
DRONABINOL 2.5 MG CAPSULE	DRONABINOL	3	
DRONABINOL 5 MG CAPSULE	DRONABINOL	3	
DRONABINOL 10 MG CAPSULE	DRONABINOL	3	
DROPLET INSULIN SYRINGE 0.3 ML 29G 12.5MM	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
DROPLET INSULIN SYRINGE 0.3 ML 30G 12.5MM	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
DROPLET INSULIN SYRINGE 0.3 ML 30G 6MM	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
DROPLET INSULIN SYRINGE 0.3 ML 30G 8MM	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
DROPLET INSULIN SYRINGE 0.3 ML 31G 6MM	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
DROPLET INSULIN SYRINGE 0.3 ML 31G 8MM	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
DROPLET INSULIN SYRINGE 0.5 ML 30G 6MM (1/2)	SYRGE-NDL,INS 0.5 ML HALF MARK	2	
DROPLET INSULIN SYRINGE 0.5 ML 30G 8MM (1/2)	SYRGE-NDL,INS 0.5 ML HALF MARK	2	
DROPLET INSULIN SYRINGE 0.5 ML 31G 6MM (1/2)	SYRGE-NDL,INS 0.5 ML HALF MARK	2	
DROPLET INSULIN SYRINGE 0.5 ML 31G 8MM (1/2)	SYRGE-NDL,INS 0.5 ML HALF MARK	2	
DROPLET INSULIN SYRINGE 1 ML 29G 12.5MM	SYRINGE AND NEEDLE,INSULIN,1ML	2	
DROPLET INSULIN SYRINGE 1 ML 30G 12.5MM	SYRINGE AND NEEDLE,INSULIN,1ML	2	
DROPLET INSULIN SYRINGE 1 ML 30G 6MM	SYRINGE AND NEEDLE,INSULIN,1ML	2	
DROPLET INSULIN SYRINGE 1 ML 30G 8MM	SYRINGE AND NEEDLE,INSULIN,1ML	2	
DROPLET INSULIN SYRINGE 1 ML 31G 6MM	SYRINGE AND NEEDLE,INSULIN,1ML	2	
DROPLET INSULIN SYRINGE 1 ML 31G 8MM	SYRINGE AND NEEDLE,INSULIN,1ML	2	
DROPLET MICRON PEN NEEDLE 34G 3.5MM	PEN NEEDLE, DIABETIC	2	
DROPLET MICRON PEN NEEDLE 34G 9/64"	PEN NEEDLE, DIABETIC	2	
DROPLET PEN NEEDLE 29G 10MM	PEN NEEDLE, DIABETIC	2	
DROPLET PEN NEEDLE 29G 12MM	PEN NEEDLE, DIABETIC	2	
DROPLET PEN NEEDLE 30G 8MM	PEN NEEDLE, DIABETIC	2	
DROPLET PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC	2	
DROPLET PEN NEEDLE 31G 6MM	PEN NEEDLE, DIABETIC	2	
DROPLET PEN NEEDLE 31G 8MM	PEN NEEDLE, DIABETIC	2	

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Medication Name	Generic Name	Tier	Notes
DROPLET PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
DROPLET PEN NEEDLE 32G 5MM	PEN NEEDLE, DIABETIC	2	
DROPLET PEN NEEDLE 32G 6MM	PEN NEEDLE, DIABETIC	2	
DROPLET PEN NEEDLE 32G 8MM	PEN NEEDLE, DIABETIC	2	
DROPLET SYRINGE 0.5 ML 29G 12.5MM (1/2)	SYRGE-NDL,INS 0.5 ML HALF MARK	2	
DROPLET SYRINGE 0.5 ML 30G 12.5MM (1/2)	SYRGE-NDL,INS 0.5 ML HALF MARK	2	
DROPSAFE INSULIN SYRINGE 0.3 ML 31G 6MM	SYRINGE,NEEDLE,INSULN,SF,0.3ML	2	
DROPSAFE INSULIN SYRINGE 0.3 ML 31G 8MM	SYRINGE,NEEDLE,INSULN,SF,0.3ML	2	
DROPSAFE INSULIN SYRINGE 0.5 ML 31G 6MM	SYRINGE,NEEDLE,INSULN,SF 0.5ML	2	
DROPSAFE INSULIN SYRINGE 0.5 ML 31G 8MM	SYRINGE,NEEDLE,INSULN,SF 0.5ML	2	
DROPSAFE INSULIN SYRINGE 1 ML 29G 12.5MM	SYRINGE,NEEDLE,INSULN,SAFE,1ML	2	
DROPSAFE INSULIN SYRINGE 1 ML 31G 6MM	SYRINGE,NEEDLE,INSULN,SAFE,1ML	2	
DROPSAFE INSULIN SYRINGE 1 ML 31G 8MM	SYRINGE,NEEDLE,INSULN,SAFE,1ML	2	
DROPSAFE PEN NEEDLE 31G 1/4"	PEN NEEDLE, DIABETIC, SAFETY	2	
DROPSAFE PEN NEEDLE 31G 3/16"	PEN NEEDLE, DIABETIC, SAFETY	2	
DROPSAFE PEN NEEDLE 31G 5/16"	PEN NEEDLE, DIABETIC, SAFETY	2	
DROPSAFE SICURA NEEDLE 25G 25MM	NEEDLES, SAFETY	2	
DROSPIRENONE-ETHINYL ESTRADIOL 3-0.02 MG TABLET	ETHINYL ESTRADIOL/DROSPIRENONE	1	
DROSPIRENONE-ETHINYL ESTRADIOL 3-0.03 MG TABLET	ETHINYL ESTRADIOL/DROSPIRENONE	1	
DROSPIRENONE-ETHINYL ESTRADIOL-LEVOMEFOLATE 3-0.02-0.451 TABLET	DROSPIR/ETH ESTRA/LEVOMEFOL CA	1	
DROSPIRENONE-ETHINYL ESTRADIOL-LEVOMEFOLATE 3-0.03-0.451 TABLET	DROSPIR/ETH ESTRA/LEVOMEFOL CA	1	
DROXIA 200 MG CAPSULE	HYDROXYUREA	3	
DROXIA 300 MG CAPSULE	HYDROXYUREA	3	
DROXIA 400 MG CAPSULE	HYDROXYUREA	3	
DRUG MART ULTRA COMFORT SYRINGE	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
DUAVEE 0.45-20 MG TABLET	ESTROGENS,CONJ/BAZEDOXIFENE	3	
DULERA 50 MCG-5 MCG INHALER	MOMETASONE/FORMOTEROL	2	QL
DULERA 100 MCG-5 MCG INHALER	MOMETASONE/FORMOTEROL	2	QL
DULERA 200 MCG-5 MCG INHALER	MOMETASONE/FORMOTEROL	2	QL
DULOXETINE DR 20 MG CAPSULE	DULOXETINE HCL	1	QL
DULOXETINE DR 30 MG CAPSULE	DULOXETINE HCL	1	QL
DULOXETINE DR 60 MG CAPSULE	DULOXETINE HCL	1	QL
DUPIXENT 200 MG/1.14 ML PEN	DUPILUMAB	4	PA, SRX
DUPIXENT 300 MG/2 ML PEN	DUPILUMAB	4	PA, SRX
DUPIXENT 100 MG/0.67 ML SYRINGE	DUPILUMAB	4	PA, SRX
DUPIXENT 200 MG/1.14 ML SYRINGE	DUPILUMAB	4	PA, SRX
DUPIXENT 300 MG/2 ML SYRINGE	DUPILUMAB	4	PA, SRX
DUTASTERIDE 0.5 MG CAPSULE	DUTASTERIDE	1	
DUTASTERIDE-TAMSULOSIN 0.5-0.4 MG CAPSULE	DUTASTERIDE/TAMSULOSIN HCL	1	
EASIVENT HOLDING CHAMBER	INHALER, ASSIST DEVICES	2	QL

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Medication Name	Generic Name	Tier	Notes
EASIVENT MASK-LARGE	INHALER,ASSIST DEVICE,ACCESORY	2	QL
EASIVENT MASK-MEDIUM	INHALER,ASSIST DEVICE,ACCESORY	2	QL
EASIVENT MASK-SMALL	INHALER,ASSIST DEVICE,ACCESORY	2	QL
EASY COMFORT INSULIN SYRINGE 1 ML	SYRINGE AND NEEDLE,INSULIN,1ML	2	
EASY COMFORT PEN NEEDLE 31G 3/16"	PEN NEEDLE, DIABETIC	2	
EASY COMFORT PEN NEEDLE 31G 1/4"	PEN NEEDLE, DIABETIC	2	
EASY COMFORT PEN NEEDLE 31G 5/16"	PEN NEEDLE, DIABETIC	2	
EASY COMFORT PEN NEEDLE 32G 5/32"	PEN NEEDLE, DIABETIC	2	
EASY COMFORT PEN NEEDLE 33G 4MM	PEN NEEDLE, DIABETIC	2	
EASY COMFORT PEN NEEDLE 33G 5MM	PEN NEEDLE, DIABETIC	2	
EASY COMFORT PEN NEEDLE 33G 6MM	PEN NEEDLE, DIABETIC	2	
EASY COMFORT SAFETY PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC, SAFETY	2	
EASY COMFORT SAFETY PEN NEEDLE 31G 6MM	PEN NEEDLE, DIABETIC, SAFETY	2	
EASY COMFORT SAFETY PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC, SAFETY	2	
EASY COMFORT SYRINGE 0.3 ML	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
EASY COMFORT SYRINGE 0.3 ML 31G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
EASY COMFORT SYRINGE 0.3 ML 31G 1/2"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
EASY COMFORT SYRINGE 0.5 ML	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
EASY COMFORT SYRINGE 0.5 ML 30G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
EASY COMFORT SYRINGE 0.5 ML 31G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
EASY COMFORT SYRINGE 0.5 ML 32G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
EASY COMFORT SYRINGE 1 ML 30G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
EASY COMFORT SYRINGE 1 ML 31G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
EASY COMFORT SYRINGE 1 ML 32G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
EASY GLIDE INSULIN SYRINGE 0.3 ML 31G 6MM	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
EASY GLIDE INSULIN SYRINGE 0.5 ML 31G 6MM	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
EASY GLIDE INSULIN SYRINGE 1 ML 31G 6MM	SYRINGE AND NEEDLE,INSULIN,1ML	2	
EASY GLIDE PEN NEEDLE 33G 4MM	PEN NEEDLE, DIABETIC	2	
EASY PLUS II HIGH CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, HIGH	2	
EASY PLUS II LOW CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, LOW	2	
EASY STEP HIGH CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, HIGH	2	
EASY STEP LOW CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, LOW	2	
EASY STEP NORMAL CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
EASY TALK HIGH CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, HIGH	2	
EASY TALK LOW CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, LOW	2	
EASY TALK PLUS II HIGH CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, HIGH	2	
EASY TALK PLUS II LOW CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, LOW	2	
EASY TOUCH BLULINK CONTROL SOLUTION	BLOOD GLUCOSE CONTROL HIGH,LOW	2	
EASY TOUCH FLIPLOCK NEEDLE 18G 1"	NEEDLES, SAFETY	2	
EASY TOUCH FLIPLOCK NEEDLE 18G 1.5"	NEEDLES, SAFETY	2	
EASY TOUCH FLIPLOCK NEEDLE 19G 1"	NEEDLES, SAFETY	2	

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Medication Name	Generic Name	Tier	Notes
EASY TOUCH FLIPLOCK NEEDLE 19G 1.5"	NEEDLES, SAFETY	2	
EASY TOUCH FLIPLOCK NEEDLE 20G 1"	NEEDLES, SAFETY	2	
EASY TOUCH FLIPLOCK NEEDLE 20G 1.5"	NEEDLES, SAFETY	2	
EASY TOUCH FLIPLOCK NEEDLE 21G 1"	NEEDLES, SAFETY	2	
EASY TOUCH FLIPLOCK NEEDLE 21G 1.5"	NEEDLES, SAFETY	2	
EASY TOUCH FLIPLOCK NEEDLE 22G 3/4"	NEEDLES, SAFETY	2	
EASY TOUCH FLIPLOCK NEEDLE 22G 1"	NEEDLES, SAFETY	2	
EASY TOUCH FLIPLOCK NEEDLE 22G 1.5"	NEEDLES, SAFETY	2	
EASY TOUCH FLIPLOCK NEEDLE 23G 5/8"	NEEDLES, SAFETY	2	
EASY TOUCH FLIPLOCK NEEDLE 23G 1"	NEEDLES, SAFETY	2	
EASY TOUCH FLIPLOCK NEEDLE 23G 1.5"	NEEDLES, SAFETY	2	
EASY TOUCH FLIPLOCK NEEDLE 25G 5/8"	NEEDLES, SAFETY	2	
EASY TOUCH FLIPLOCK NEEDLE 25G 1"	NEEDLES, SAFETY	2	
EASY TOUCH FLIPLOCK NEEDLE 25G 1.5"	NEEDLES, SAFETY	2	
EASY TOUCH FLIPLOCK NEEDLE 26G 1"	NEEDLES, SAFETY	2	
EASY TOUCH FLIPLOCK NEEDLE 26G 1/2"	NEEDLES, SAFETY	2	
EASY TOUCH FLIPLOCK NEEDLE 27G 1"	NEEDLES, SAFETY	2	
EASY TOUCH FLIPLOCK NEEDLE 27G 1/2"	NEEDLES, SAFETY	2	
EASY TOUCH FLIPLOCK NEEDLE 28G 1/2"	NEEDLES, SAFETY	2	
EASY TOUCH FLIPLOCK NEEDLE 29G 1/2"	NEEDLES, SAFETY	2	
EASY TOUCH FLIPLOCK NEEDLE 30G 1/2"	NEEDLES, SAFETY	2	
EASY TOUCH FLIPLOCK NEEDLE 30G 5/16"	NEEDLES, SAFETY	2	
EASY TOUCH FLIPLOCK NEEDLE 31G 5/16"	NEEDLES, SAFETY	2	
EASY TOUCH HIGH-LOW CONTROL SOLUTION	BLOOD GLUCOSE CONTROL HIGH,LOW	2	
EASY TOUCH HYPODERMIC 16G 1"	NEEDLES, DISPOSABLE	2	
EASY TOUCH HYPODERMIC 16G 1.5"	NEEDLES, DISPOSABLE	2	
EASY TOUCH HYPODERMIC 18G 1"	NEEDLES, DISPOSABLE	2	
EASY TOUCH HYPODERMIC 18G 1.25"	NEEDLES, DISPOSABLE	2	
EASY TOUCH HYPODERMIC 18G 1.5"	NEEDLES, DISPOSABLE	2	
EASY TOUCH HYPODERMIC 19G 1"	NEEDLES, DISPOSABLE	2	
EASY TOUCH HYPODERMIC 19G 1.5"	NEEDLES, DISPOSABLE	2	
EASY TOUCH HYPODERMIC 20G 1"	NEEDLES, DISPOSABLE	2	
EASY TOUCH HYPODERMIC 20G 1.5"	NEEDLES, DISPOSABLE	2	
EASY TOUCH HYPODERMIC 21G 1"	NEEDLES, DISPOSABLE	2	
EASY TOUCH HYPODERMIC 21G 1.5"	NEEDLES, DISPOSABLE	2	
EASY TOUCH HYPODERMIC 22G 1"	NEEDLES, DISPOSABLE	2	
EASY TOUCH HYPODERMIC 22G 1.5"	NEEDLES, DISPOSABLE	2	
EASY TOUCH HYPODERMIC 23G 1"	NEEDLES, DISPOSABLE	2	
EASY TOUCH HYPODERMIC 23G 1.25"	NEEDLES, DISPOSABLE	2	
EASY TOUCH HYPODERMIC 23G 1.5"	NEEDLES, DISPOSABLE	2	
EASY TOUCH HYPODERMIC 23G 3/4"	NEEDLES, DISPOSABLE	2	

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Medication Name	Generic Name	Tier	Notes
EASY TOUCH HYPODERMIC 24G 1"	NEEDLES, DISPOSABLE	2	
EASY TOUCH HYPODERMIC 24G 1.25"	NEEDLES, DISPOSABLE	2	
EASY TOUCH HYPODERMIC 25G 5/8"	NEEDLES, DISPOSABLE	2	
EASY TOUCH HYPODERMIC 25G 1"	NEEDLES, DISPOSABLE	2	
EASY TOUCH HYPODERMIC 25G 1.5"	NEEDLES, DISPOSABLE	2	
EASY TOUCH HYPODERMIC 26G 3/8"	NEEDLES, DISPOSABLE	2	
EASY TOUCH HYPODERMIC 26G 1/2"	NEEDLES, DISPOSABLE	2	
EASY TOUCH HYPODERMIC 26G 5/8"	NEEDLES, DISPOSABLE	2	
EASY TOUCH HYPODERMIC 27G 1.25"	NEEDLES, DISPOSABLE	2	
EASY TOUCH HYPODERMIC 27G 1.5"	NEEDLES, DISPOSABLE	2	
EASY TOUCH HYPODERMIC 27G 1/2"	NEEDLES, DISPOSABLE	2	
EASY TOUCH HYPODERMIC 30G 1"	NEEDLES, DISPOSABLE	2	
EASY TOUCH HYPODERMIC 30G 1/2"	NEEDLES, DISPOSABLE	2	
EASY TOUCH HYPODERMIC 31G 5/16"	NEEDLES, DISPOSABLE	2	
EASY TOUCH HYPODERMIC 32G 5/16"	NEEDLES, DISPOSABLE	2	
EASY TOUCH INSULIN SYRINGE 0.3 ML	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
EASY TOUCH INSULIN SYRINGE 0.5 ML	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
EASY TOUCH INSULIN SYRINGE 1 ML	SYRINGE AND NEEDLE,INSULIN,1ML	2	
EASY TOUCH INSULIN SYRINGE 1 ML 29G 1/2"	SYRINGE,NEEDLE,INSULN,SAFE,1ML	2	
EASY TOUCH INSULIN SYRINGE 1 ML 30G 5/16"	SYRINGE,NEEDLE,INSULN,SAFE,1ML	2	
EASY TOUCH INSULIN SYRINGE 1 ML 30G 1/2"	SYRINGE,NEEDLE,INSULN,SAFE,1ML	2	
EASY TOUCH INSULIN SYRINGE 1 ML 31G 5/16"	SYRINGE,NEEDLE,INSULN,SAFE,1ML	2	
EASY TOUCH LUER LOK INSULIN SYRINGE 1 ML	SYRINGE,INSULIN,NEEDLESS 1 ML	2	
EASY TOUCH PEN NEEDLE 29G 1/2"	PEN NEEDLE, DIABETIC	2	
EASY TOUCH PEN NEEDLE 30G 5/16"	PEN NEEDLE, DIABETIC	2	
EASY TOUCH PEN NEEDLE 31G 3/16"	PEN NEEDLE, DIABETIC	2	
EASY TOUCH PEN NEEDLE 31G 1/4"	PEN NEEDLE, DIABETIC	2	
EASY TOUCH PEN NEEDLE 31G 5/16"	PEN NEEDLE, DIABETIC	2	
EASY TOUCH PEN NEEDLE 32G 3/16"	PEN NEEDLE, DIABETIC	2	
EASY TOUCH PEN NEEDLE 32G 1/4"	PEN NEEDLE, DIABETIC	2	
EASY TOUCH PEN NEEDLE 32G 5/32"	PEN NEEDLE, DIABETIC	2	
EASY TOUCH SAFETY PEN NEEDLE 29G 5MM	PEN NEEDLE, DIABETIC, SAFETY	2	
EASY TOUCH SAFETY PEN NEEDLE 29G 8MM	PEN NEEDLE, DIABETIC, SAFETY	2	
EASY TOUCH SAFETY PEN NEEDLE 30G 5MM	PEN NEEDLE, DIABETIC, SAFETY	2	
EASY TOUCH SAFETY PEN NEEDLE 30G 8MM	PEN NEEDLE, DIABETIC, SAFETY	2	
EASY TOUCH SYRINGE 0.3 ML 30G 1/2"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
EASY TOUCH SYRINGE 0.5 ML 27G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
EASY TOUCH SYRINGE 0.5 ML 27G 12.7MM	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
EASY TOUCH SYRINGE 0.5 ML 28G 12.7MM	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
EASY TOUCH SYRINGE 0.5 ML 29G 1/2"	SYRINGE,NEEDLE,INSULN,SF 0.5ML	2	
EASY TOUCH SYRINGE 0.5 ML 29G 12.7MM	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	

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Medication Name	Generic Name	Tier	Notes
EASY TOUCH SYRINGE 0.5 ML 30G 5/16"	SYRINGE,NEEDLE,INSULN,SF 0.5ML	2	
EASY TOUCH SYRINGE 0.5 ML 30G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
EASY TOUCH SYRINGE 1 ML 27G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
EASY TOUCH SYRINGE 1 ML 27G 12.7MM	SYRINGE AND NEEDLE,INSULIN,1ML	2	
EASY TOUCH SYRINGE 1 ML 27G 16MM	SYRINGE AND NEEDLE,INSULIN,1ML	2	
EASY TOUCH SYRINGE 1 ML 28G 12.7MM	SYRINGE AND NEEDLE,INSULIN,1ML	2	
EASY TOUCH SYRINGE 1 ML 29G 1/2"	SYRINGE,NEEDLE,INSULN,SAFE,1ML	2	
EASY TOUCH SYRINGE 1 ML 29G 12.7MM	SYRINGE AND NEEDLE,INSULIN,1ML	2	
EASY TOUCH SYRINGE 1 ML 30G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
EASY TOUCH SYRINGE 3 ML 20G 1"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
EASY TOUCH SYRINGE 3 ML 21G 1"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
EASY TOUCH SYRINGE 3 ML 22G 1"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
EASY TOUCH SYRINGE 3 ML 22G 1.5"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
EASY TOUCH SYRINGE 3 ML 23G 1"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
EASY TOUCH SYRINGE 3 ML 25G 1"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
EASY TOUCH SYRINGE 3 ML 25G 5/8"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
EASY TOUCH UNI-SLIP SYRINGE 1 ML	SYRINGE,INSULIN,NEEDLESS 1 ML	2	
EASY TRAK HIGH CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, HIGH	2	
EASY TRAK II NORMAL CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
EASY TRAK LOW CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, LOW	2	
EASYGLUCO PLUS NORMAL CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
EASYMAX 15 LEVEL 2 SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
EASYMAX NORMAL CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
EASYPOINT NEEDLE 18G 1"	NEEDLES, SAFETY	2	
EASYPOINT NEEDLE 18G 1.5"	NEEDLES, SAFETY	2	
EASYPOINT NEEDLE 20G 1"	NEEDLES, SAFETY	2	
EASYPOINT NEEDLE 20G 1.5"	NEEDLES, SAFETY	2	
EASYPOINT NEEDLE 21G 1"	NEEDLES, SAFETY	2	
EASYPOINT NEEDLE 21G 1.5"	NEEDLES, SAFETY	2	
EASYPOINT NEEDLE 22G 1"	NEEDLES, SAFETY	2	
EASYPOINT NEEDLE 22G 1.5"	NEEDLES, SAFETY	2	
EASYPOINT NEEDLE 23G 1"	NEEDLES, SAFETY	2	
EASYPOINT NEEDLE 25G 5/8"	NEEDLES, SAFETY	2	
EASYPOINT NEEDLE 25G 1"	NEEDLES, SAFETY	2	
EASYPOINT NEEDLE 25G 1.5"	NEEDLES, SAFETY	2	
EASYPOINT NEEDLE 25G 16MM	NEEDLES, SAFETY	2	
EASYTOUCH SAFETY PEN NEEDLE 30G 6MM	PEN NEEDLE, DIABETIC, SAFETY	2	
EC-NAPROXEN DR 375 MG TABLET	NAPROXEN	1	
EC-NAPROXEN DR 500 MG TABLET	NAPROXEN	1	
ECONAZOLE 1% CREAM	ECONAZOLE NITRATE	1	
ECONTRA EZ 1.5 MG TABLET	LEVONORGESTREL	1	

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Medication Name	Generic Name	Tier	Notes
ECONTRA ONE-STEP 1.5 MG TABLET	LEVONORGESTREL	1	
ED-SPAZ 0.125 MG ODT TABLET	HYOSCYAMINE SULFATE	1	
EDURANT 25 MG TABLET	RILPIVIRINE HCL	2	SRX
EEMT DS 1.25-2.5 MG TABLET	ESTROGEN,ESTER/ME-TESTOSTERONE	1	
EEMT HS 0.625-1.25 MG TABLET	ESTROGEN,ESTER/ME-TESTOSTERONE	1	
EFAVIRENZ 50 MG CAPSULE	EFAVIRENZ	1	SRX
EFAVIRENZ 200 MG CAPSULE	EFAVIRENZ	1	SRX
EFAVIRENZ 600 MG TABLET	EFAVIRENZ	1	SRX
EFAVIRENZ-EMTRICITABINE-TENOFOVIR 600-200-300 MG TABLET	EFAVIRENZ/EMTRICIT/TENOFOVR DF	3	QL, SRX
EFAVIRENZ-LAMIVUDINE-TENOFOVIR 400-300-300 MG TABLET	EFAVIRENZ/LAMIVU/TENOFOV DISOP	2	QL, SRX
EFAVIRENZ-LAMIVUDINE-TENOFOVIR 600-300-300 MG TABLET	EFAVIRENZ/LAMIVU/TENOFOV DISOP	2	QL, SRX
EFFER-K 10 MEQ EFFERVESCENT TABLET	POTASSIUM BICARBONATE/CIT AC	3	
EFFER-K 20 MEQ EFFERVESCENT TABLET	POTASSIUM BICARBONATE/CIT AC	3	
ELEMENT COMPACT HIGH CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, HIGH	2	
ELEMENT COMPACT NORMAL CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
ELEMENT HIGH CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, HIGH	2	
ELEMENT LOW CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, LOW	2	
ELEMENT NORMAL CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
ELETRIPTAN 20 MG TABLET	ELETRIPTAN HYDROBROMIDE	2	QL
ELETRIPTAN 40 MG TABLET	ELETRIPTAN HYDROBROMIDE	2	QL
ELINEST-28 TABLET	NORGESTREL-ETHINYL ESTRADIOL	1	
ELIQUIS 2.5 MG TABLET	APIXABAN	2	QL
ELIQUIS 5 MG TABLET	APIXABAN	2	QL
ELIQUIS DVT-PE 5 MG STARTER PACK	APIXABAN	2	QL
ELITE-OB TABLET	MULTIVIT-MIN69/IRON/FOLIC ACID	1	
ELLA 30 MG TABLET	ULIPRISTAL ACETATE	1	
ELMIRON 100 MG CAPSULE	PENTOSAN POLYSULFATE SODIUM	3	
ELTROMBOPAG 12.5 MG SUSPENSION PACKET	ELTROMBOPAG OLAMINE	4	PA, QL, SRX
ELTROMBOPAG 25 MG SUSPENSION PACKET	ELTROMBOPAG OLAMINE	4	PA, QL, SRX
ELTROMBOPAG 12.5 MG TABLET	ELTROMBOPAG OLAMINE	4	PA, QL, SRX
ELTROMBOPAG 25 MG TABLET	ELTROMBOPAG OLAMINE	4	PA, QL, SRX
ELTROMBOPAG 50 MG TABLET	ELTROMBOPAG OLAMINE	4	PA, QL, SRX
ELTROMBOPAG 75 MG TABLET	ELTROMBOPAG OLAMINE	4	PA, QL, SRX
ELURYNG VAGINAL RING	ETONOGESTREL/ETHINYL ESTRADIOL	1	
EMBRACE EVO LEVEL 1 CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, LOW	2	
EMBRACE GLUCOSE HIGH CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, HIGH	2	
EMBRACE GLUCOSE LOW CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, LOW	2	
EMBRACE PEN NEEDLE 29G 12MM	PEN NEEDLE, DIABETIC	2	
EMBRACE PEN NEEDLE 30G 5MM	PEN NEEDLE, DIABETIC	2	
EMBRACE PEN NEEDLE 30G 8MM	PEN NEEDLE, DIABETIC	2	
EMBRACE PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC	2	

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Medication Name	Generic Name	Tier	Notes
EMBRACE PEN NEEDLE 31G 6MM	PEN NEEDLE, DIABETIC	2	
EMBRACE PEN NEEDLE 31G 8MM	PEN NEEDLE, DIABETIC	2	
EMBRACE PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
EMBRACE PRO CONTROL SOLUTION	BLOOD GLUCOSE CNTL HIGH,NORMAL	2	
EMBRACE TALK HIGH (L2) CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, HIGH	2	
EMBRACE TALK LOW (L1) CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, LOW	2	
EMEND 125 MG POWDER PACKET	APREPITANT	4	PA, QL
EMGALITY 120 MG/ML PEN	GALCANEZUMAB-GNLM	2	PA
EMGALITY 100 MG/ML SYRINGE	GALCANEZUMAB-GNLM	2	PA
EMGALITY 120 MG/ML SYRINGE	GALCANEZUMAB-GNLM	2	PA
EMGALITY 300 MG (100 MG X 3 SYRINGE)	GALCANEZUMAB-GNLM	2	PA
EMTRICITABINE 200 MG CAPSULE	EMTRICITABINE	1	SRX
EMTRICITABINE-RILPIVIRINE-TENOFOVIR 200-25-300 TABLET	EMTRICITA/RILPIVIRINE/TENOF DF	3	QL, SRX
EMTRICITABINE-TENOFOVIR 100-150 MG TABLET	EMTRICITABINE/TENOFOVIR (TDF)	1	SRX
EMTRICITABINE-TENOFOVIR 133-200 MG TABLET	EMTRICITABINE/TENOFOVIR (TDF)	1	SRX
EMTRICITABINE-TENOFOVIR 167-250 MG TABLET	EMTRICITABINE/TENOFOVIR (TDF)	1	SRX
EMTRICITABINE-TENOFOVIR 200-300 MG TABLET	EMTRICITABINE/TENOFOVIR (TDF)	1	SRX
EMTRIVA 10 MG/ML ORAL SOLUTION	EMTRICITABINE	2	SRX
EMVERM 100 MG CHEWABLE TABLET	MEBENDAZOLE	3	
EMZAHH 0.35 MG TABLET	NORETHINDRONE	1	
ENALAPRIL 2.5 MG TABLET	ENALAPRIL MALEATE	1	
ENALAPRIL 5 MG TABLET	ENALAPRIL MALEATE	1	
ENALAPRIL 10 MG TABLET	ENALAPRIL MALEATE	1	
ENALAPRIL 20 MG TABLET	ENALAPRIL MALEATE	1	
ENALAPRIL-HCTZ 5-12.5 MG TABLET	ENALAPRIL/HYDROCHLOROTHIAZIDE	1	
ENALAPRIL-HCTZ 10-25 MG TABLET	ENALAPRIL/HYDROCHLOROTHIAZIDE	1	
ENBREL 25 MG/0.5 ML SYRINGE	ETANERCEPT	4	PA, QL, SRX
ENBREL 25 MG/0.5 ML VIAL	ETANERCEPT	4	PA, QL, SRX
ENBREL 50 MG/ML MINI CARTRIDGE	ETANERCEPT	4	PA, QL, SRX
ENBREL 50 MG/ML SURECLICK	ETANERCEPT	4	PA, QL, SRX
ENBREL 50 MG/ML SYRINGE	ETANERCEPT	4	PA, QL, SRX
ENDOCET 2.5-325 MG TABLET	OXYCODONE HCL/ACETAMINOPHEN	1	PA
ENDOCET 5-325 MG TABLET	OXYCODONE HCL/ACETAMINOPHEN	1	PA
ENDOCET 7.5-325 MG TABLET	OXYCODONE HCL/ACETAMINOPHEN	1	PA
ENDOCET 10-325 MG TABLET	OXYCODONE HCL/ACETAMINOPHEN	1	PA
ENDOMETRIN 100 MG VAGINAL INSERT	PROGESTERONE, MICRONIZED	3	PA
ENGERIX-B 20 MCG/ML SYRINGE	HEPATITIS B VIRUS VACCINE/PF	2	
ENGERIX-B 20 MCG/ML VIAL	HEPATITIS B VIRUS VACCINE/PF	2	
ENGERIX-B PEDI 10 MCG/0.5 SYRINGE	HEPATITIS B VIRUS VACCINE/PF	2	
ENILLORING VAGINAL RING	ETONOGESTREL/ETHINYL ESTRADIOL	1	
ENLITE SERTER	DIABETIC SUPPLIES,MISCELL	2	

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Medication Name	Generic Name	Tier	Notes
ENLYTE SOFTGEL	IRON/FA/DHA/EPA/FAD/NADH/MV47	3	
ENOXAPARIN 30 MG/0.3 ML SYRINGE	ENOXAPARIN SODIUM	4	QL, SRX
ENOXAPARIN 40 MG/0.4 ML SYRINGE	ENOXAPARIN SODIUM	4	QL, SRX
ENOXAPARIN 60 MG/0.6 ML SYRINGE	ENOXAPARIN SODIUM	4	QL, SRX
ENOXAPARIN 80 MG/0.8 ML SYRINGE	ENOXAPARIN SODIUM	4	QL, SRX
ENOXAPARIN 100 MG/ML SYRINGE	ENOXAPARIN SODIUM	4	QL, SRX
ENOXAPARIN 120 MG/0.8 ML SYRINGE	ENOXAPARIN SODIUM	4	QL, SRX
ENOXAPARIN 150 MG/ML SYRINGE	ENOXAPARIN SODIUM	4	QL, SRX
ENOXAPARIN 300 MG/3 ML VIAL	ENOXAPARIN SODIUM	4	QL, SRX
ENPRESSE-28 TABLET	LEVONORGESTREL/ETHIN.ESTRADIOL	1	
ENSKYCE 28 TABLET	DESOGESTREL-ETHINYL ESTRADIOL	1	
ENTACAPONE 200 MG TABLET	ENTACAPONE	1	
ENTECAVIR 0.5 MG TABLET	ENTECAVIR	4	SRX
ENTECAVIR 1 MG TABLET	ENTECAVIR	4	SRX
ENTRESTO 6-6 MG SPRINKLE PELLET	SACUBITRIL/VALSARTAN	2	QL
ENTRESTO 15-16 MG SPRINKLE PELLET	SACUBITRIL/VALSARTAN	2	QL
ENULOSE 10 GM/15 ML ORAL SOLUTION	LACTULOSE	1	
EPIDIOLEX 100 MG/ML ORAL SOLUTION	CANNABIDIOL (CBD)	3	PA, LDD, SRX
EPIDIOLEX 100 MG/ML ORAL SOLUTION PACK	CANNABIDIOL (CBD)	3	PA, LDD, SRX
EPIFOAM FOAM	HYDROCORTISONE/PRAMOXINE	3	
EPINASTINE 0.05% EYE DROPS	EPINASTINE HCL	1	
EPINEPHRINE 0.15 MG AUTO-INJECTOR	EPINEPHRINE	1	QL
EPINEPHRINE 0.3 MG AUTO-INJECTOR	EPINEPHRINE	1	QL
EPITOL 200 MG TABLET	CARBAMAZEPINE	1	
EPLERENONE 25 MG TABLET	EPLERENONE	1	
EPLERENONE 50 MG TABLET	EPLERENONE	1	
EPROSARTAN 600 MG TABLET	EPROSARTAN MESYLATE	1	
EQ SPACE CHAMBER	INHALER, ASSIST DEVICES	2	QL
EQ SPACE CHAMBER-LARGE MASK	INHALER,ASSIST DEVICE,LG MASK	2	QL
EQ SPACE CHAMBER-MEDIUM MASK	INHALER,ASSIST DEVICE,MED MASK	2	QL
EQ SPACE CHAMBER-SMALL MASK	INHALER,ASSIST DEV,SMALL MASK	2	QL
EQL INSULIN SYRINGE 0.3 ML	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
EQL INSULIN SYRINGE 0.3 ML 31G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
EQL INSULIN SYRINGE 0.5 ML	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
EQL INSULIN SYRINGE 0.5 ML 31G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
EQL INSULIN SYRINGE 1 ML	SYRINGE AND NEEDLE,INSULIN,1ML	2	
EQL INSULIN SYRINGE 1 ML 29G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
EQL INSULIN SYRINGE 1 ML 31G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
EQL PEN NEEDLE 8MM 31G 5/16"	PEN NEEDLE, DIABETIC	2	
ERGOLOID 1 MG TABLET	ERGOLOID MESYLATES	1	
ERGOMAR 2 MG SUBLINGUAL TABLET	ERGOTAMINE TARTRATE	3	PA

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Medication Name	Generic Name	Tier	Notes
ERIVEDGE 150 MG CAPSULE	VISMODEGIB	4	PA, QL, LDD, SRX
ERLOTINIB 25 MG TABLET	ERLOTINIB HCL	4	PA, SRX
ERLOTINIB 100 MG TABLET	ERLOTINIB HCL	4	PA, SRX
ERLOTINIB 150 MG TABLET	ERLOTINIB HCL	4	PA, SRX
ERRIN 0.35 MG TABLET	NORETHINDRONE	1	
ERTACZO 2% CREAM	SERTACONAZOLE NITRATE	3	PA
ERY 2% PADS	ERYTHROMYCIN BASE IN ETHANOL	1	
ERYTHROCIN 250 MG TABLET	ERYTHROMYCIN STEARATE	3	
ERYTHROMYCIN 0.5% EYE OINTMENT	ERYTHROMYCIN BASE	1	
ERYTHROMYCIN 2% GEL	ERYTHROMYCIN BASE IN ETHANOL	1	
ERYTHROMYCIN 200 MG/5 ML ORAL SUSPENSION	ERYTHROMYCIN ETHYLSUCCINATE	2	
ERYTHROMYCIN 400 MG/5 ML ORAL SUSPENSION	ERYTHROMYCIN ETHYLSUCCINATE	2	
ERYTHROMYCIN 250 MG TABLET	ERYTHROMYCIN BASE	1	
ERYTHROMYCIN 500 MG TABLET	ERYTHROMYCIN BASE	1	
ERYTHROMYCIN 2% TOPICAL SOLUTION	ERYTHROMYCIN BASE IN ETHANOL	1	
ERYTHROMYCIN DR 250 MG CAPSULE	ERYTHROMYCIN BASE	1	
ERYTHROMYCIN ES 400 MG TABLET	ERYTHROMYCIN ETHYLSUCCINATE	2	
ERYTHROMYCIN-BENZOYL GEL	ERYTHROMYCIN/BENZOYL PEROXIDE	2	
ESCITALOPRAM 5 MG/5 ML ORAL SOLUTION	ESCITALOPRAM OXALATE	1	QL
ESCITALOPRAM 5 MG TABLET	ESCITALOPRAM OXALATE	1	QL
ESCITALOPRAM 10 MG TABLET	ESCITALOPRAM OXALATE	1	QL
ESCITALOPRAM 20 MG TABLET	ESCITALOPRAM OXALATE	1	QL
ESOMEPRAZOLE DR 20 MG CAPSULE	ESOMEPRAZOLE MAGNESIUM	1	QL
ESOMEPRAZOLE DR 40 MG CAPSULE	ESOMEPRAZOLE MAGNESIUM	1	QL
ESOMEPRAZOLE DR 49.3 MG CAPSULE	ESOMEPRAZOLE STRONTIUM	1	QL
ESOMEPRAZOLE DR 2.5 MG PACKET	ESOMEPRAZOLE MAGNESIUM	2	QL
ESOMEPRAZOLE DR 5 MG PACKET	ESOMEPRAZOLE MAGNESIUM	2	QL
ESOMEPRAZOLE DR 10 MG PACKET	ESOMEPRAZOLE MAGNESIUM	2	QL
ESOMEPRAZOLE DR 20 MG PACKET	ESOMEPRAZOLE MAGNESIUM	2	QL
ESOMEPRAZOLE DR 40 MG PACKET	ESOMEPRAZOLE MAGNESIUM	2	QL
ESTARYLLA 0.25-0.035 MG TABLET	NORGESTIMATE-ETHINYL ESTRADIOL	1	
ESTAZOLAM 1 MG TABLET	ESTAZOLAM	1	
ESTAZOLAM 2 MG TABLET	ESTAZOLAM	1	
ESTRADIOL 0.01% CREAM	ESTRADIOL	1	
ESTRADIOL 0.025 MG PATCH (1/WK)	ESTRADIOL	1	QL
ESTRADIOL 0.025 MG PATCH (2/WK)	ESTRADIOL	1	QL
ESTRADIOL 0.0375 MG PATCH (1/WK)	ESTRADIOL	1	QL
ESTRADIOL 0.0375 MG PATCH (2/WK)	ESTRADIOL	1	QL
ESTRADIOL 0.05 MG PATCH (1/WK)	ESTRADIOL	1	QL
ESTRADIOL 0.05 MG PATCH (2/WK)	ESTRADIOL	1	QL
ESTRADIOL 0.06 MG PATCH (1/WK)	ESTRADIOL	1	QL

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Medication Name	Generic Name	Tier	Notes
ESTRADIOL 0.075 MG PATCH (1/WK)	ESTRADIOL	1	QL
ESTRADIOL 0.075 MG PATCH (2/WK)	ESTRADIOL	1	QL
ESTRADIOL 0.1 MG PATCH (1/WK)	ESTRADIOL	1	QL
ESTRADIOL 0.1 MG PATCH (2/WK)	ESTRADIOL	1	QL
ESTRADIOL 0.5 MG TABLET	ESTRADIOL	1	
ESTRADIOL 1 MG TABLET	ESTRADIOL	1	
ESTRADIOL 2 MG TABLET	ESTRADIOL	1	
ESTRADIOL 10 MCG VAGINAL INSERT TABLET	ESTRADIOL	2	QL
ESTRADIOL-NORETHINDRONE 0.5-0.1 MG TABLET	ESTRADIOL/NORETHINDRONE ACET	1	
ESTRADIOL-NORETHINDRONE 1-0.5 MG TABLET	ESTRADIOL/NORETHINDRONE ACET	1	
ESTRING 7.5 MCG/DAY (2 MG) RING	ESTRADIOL	3	QL
ESTROGEN-METHYLTESTOSTERONE F.S. TABLET	ESTROGEN,ESTER/ME-TESTOSTERONE	1	
ESTROGEN-METHYLTESTOSTERONE H.S. TABLET	ESTROGEN,ESTER/ME-TESTOSTERONE	1	
ESZOPICLONE 1 MG TABLET	ESZOPICLONE	1	
ESZOPICLONE 2 MG TABLET	ESZOPICLONE	1	
ESZOPICLONE 3 MG TABLET	ESZOPICLONE	1	
ETHAMBUTOL 100 MG TABLET	ETHAMBUTOL HCL	1	
ETHAMBUTOL 400 MG TABLET	ETHAMBUTOL HCL	1	
ETHOSUXIMIDE 250 MG CAPSULE	ETHOSUXIMIDE	1	
ETHOSUXIMIDE 250 MG/5 ML ORAL SOLUTION	ETHOSUXIMIDE	1	
ETHYL CHLORIDE SPRAY	ETHYL CHLORIDE	1	
ETHYNODIOL-ETHINYL ESTRADIOL 1 MG-35 MCG TABLET	ETHYNODIOL D-ETHINYL ESTRADIOL	1	
ETHYNODIOL-ETHINYL ESTRADIOL 1 MG-50 MCG TABLET	ETHYNODIOL D-ETHINYL ESTRADIOL	1	
ETODOLAC 200 MG CAPSULE	ETODOLAC	1	
ETODOLAC 300 MG CAPSULE	ETODOLAC	1	
ETODOLAC 400 MG TABLET	ETODOLAC	1	
ETODOLAC 500 MG TABLET	ETODOLAC	1	
ETODOLAC ER 400 MG TABLET	ETODOLAC	1	
ETODOLAC ER 500 MG TABLET	ETODOLAC	1	
ETODOLAC ER 600 MG TABLET	ETODOLAC	1	
ETONOGESTREL-ETHINYL ESTRADIOL VAGINAL RING	ETONOGESTREL/ETHINYL ESTRADIOL	1	
ETOPOSIDE 50 MG CAPSULE	ETOPOSIDE	4	SRX
ETRAVIRINE 100 MG TABLET	ETRAVIRINE	1	SRX
ETRAVIRINE 200 MG TABLET	ETRAVIRINE	1	SRX
EURAX 10% CREAM	CROTAMITON	3	
EUTHYROX 25 MCG TABLET	LEVOTHYROXINE SODIUM	1	
EUTHYROX 50 MCG TABLET	LEVOTHYROXINE SODIUM	1	
EUTHYROX 75 MCG TABLET	LEVOTHYROXINE SODIUM	1	
EUTHYROX 88 MCG TABLET	LEVOTHYROXINE SODIUM	1	
EUTHYROX 100 MCG TABLET	LEVOTHYROXINE SODIUM	1	
EUTHYROX 112 MCG TABLET	LEVOTHYROXINE SODIUM	1	

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Medication Name	Generic Name	Tier	Notes
EUTHYROX 125 MCG TABLET	LEVOTHYROXINE SODIUM	1	
EUTHYROX 137 MCG TABLET	LEVOTHYROXINE SODIUM	1	
EUTHYROX 150 MCG TABLET	LEVOTHYROXINE SODIUM	1	
EUTHYROX 175 MCG TABLET	LEVOTHYROXINE SODIUM	1	
EUTHYROX 200 MCG TABLET	LEVOTHYROXINE SODIUM	1	
EVAMIST 1.53 MG/SPRAY	ESTRADIOL	2	
EVENCARE G2 CONTROL SOLUTION	BLOOD GLUCOSE CONTROL HIGH,LOW	2	
EVENCARE G3 CONTROL SOLUTION	BLOOD GLUCOSE CONTROL HIGH,LOW	2	
EVEROLIMUS 0.25 MG TABLET	EVEROLIMUS	4	SRX
EVEROLIMUS 0.5 MG TABLET	EVEROLIMUS	4	SRX
EVEROLIMUS 0.75 MG TABLET	EVEROLIMUS	4	SRX
EVEROLIMUS 1 MG TABLET	EVEROLIMUS	4	SRX
EVEROLIMUS 2.5 MG TABLET	EVEROLIMUS	4	PA, QL, SRX
EVEROLIMUS 5 MG TABLET	EVEROLIMUS	4	PA, QL, SRX
EVEROLIMUS 7.5 MG TABLET	EVEROLIMUS	4	PA, QL, SRX
EVEROLIMUS 10 MG TABLET	EVEROLIMUS	4	PA, QL, SRX
EVEROLIMUS 2 MG TABLET FOR SUSPENSION	EVEROLIMUS	4	PA, QL, SRX
EVEROLIMUS 3 MG TABLET FOR SUSPENSION	EVEROLIMUS	4	PA, QL, SRX
EVEROLIMUS 5 MG TABLET FOR SUSPENSION	EVEROLIMUS	4	PA, QL, SRX
EVOLUTION NORMAL CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
EVOTAZ 300 MG-150 MG TABLET	ATAZANAVIR SULFATE/COBICISTAT	2	SRX
EXEL HUBER NEEDLE 22G 3/4"	NEEDLES,SAFETY HUBER,DISPOSABL	2	
EXEL HUBER NEEDLE 22G 1"	NEEDLES, HUBER DISPOSABLE	2	
EXEL HYPO NEEDLE 16G 1"	NEEDLES, DISPOSABLE	2	
EXEL HYPO NEEDLE 18G 1"	NEEDLES, DISPOSABLE	2	
EXEL HYPO NEEDLE 18G 1.5"	NEEDLES, DISPOSABLE	2	
EXEL HYPO NEEDLE 19G 1"	NEEDLES, DISPOSABLE	2	
EXEL HYPO NEEDLE 19G 1.5"	NEEDLES, DISPOSABLE	2	
EXEL HYPO NEEDLE 20G 0.75"	NEEDLES, DISPOSABLE	2	
EXEL HYPO NEEDLE 20G 1"	NEEDLES, DISPOSABLE	2	
EXEL HYPO NEEDLE 20G 1.5"	NEEDLES, DISPOSABLE	2	
EXEL HYPO NEEDLE 21G 1"	NEEDLES, DISPOSABLE	2	
EXEL HYPO NEEDLE 21G 1.5"	NEEDLES, DISPOSABLE	2	
EXEL HYPO NEEDLE 22G 0.75"	NEEDLES, DISPOSABLE	2	
EXEL HYPO NEEDLE 22G 1"	NEEDLES, DISPOSABLE	2	
EXEL HYPO NEEDLE 22G 1.5"	NEEDLES, DISPOSABLE	2	
EXEL HYPO NEEDLE 23G 0.75"	NEEDLES, DISPOSABLE	2	
EXEL HYPO NEEDLE 23G 1"	NEEDLES, DISPOSABLE	2	
EXEL HYPO NEEDLE 25G 0.625"	NEEDLES, DISPOSABLE	2	
EXEL HYPO NEEDLE 25G 0.75"	NEEDLES, DISPOSABLE	2	
EXEL HYPO NEEDLE 25G 1"	NEEDLES, DISPOSABLE	2	

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Medication Name	Generic Name	Tier	Notes
EXEL HYPO NEEDLE 25G 1.5"	NEEDLES, DISPOSABLE	2	
EXEL HYPO NEEDLE 26G 0.375"	NEEDLES, DISPOSABLE	2	
EXEL HYPO NEEDLE 26G 0.5"	NEEDLES, DISPOSABLE	2	
EXEL HYPO NEEDLE 26G 0.625"	NEEDLES, DISPOSABLE	2	
EXEL HYPO NEEDLE 26G 1.5"	NEEDLES, DISPOSABLE	2	
EXEL HYPO NEEDLE 27G 0.5"	NEEDLES, DISPOSABLE	2	
EXEL HYPO NEEDLE 30G 0.5"	NEEDLES, DISPOSABLE	2	
EXEL INSULIN SYRINGE U100 1 ML 28G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
EXEL MTI DRAWING NEEDLE 20G 1"	NEEDLES, BLOOD COLLECTION	2	
EXEL MTI DRAWING NEEDLE 21G 1"	NEEDLES, BLOOD COLLECTION	2	
EXEL MTI DRAWING NEEDLE 22G 1"	NEEDLES, BLOOD COLLECTION	2	
EXEL SYRINGE 3 ML 20G 1"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
EXEL SYRINGE 3 ML 20G 1.5"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
EXEL SYRINGE 3 ML 21G 1"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
EXEL SYRINGE 3 ML 21G 1.5"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
EXEL SYRINGE 3 ML 22G 3/4"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
EXEL SYRINGE 3 ML 22G 1"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
EXEL SYRINGE 3 ML 22G 1.5"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
EXEL SYRINGE 3 ML 23G 1"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
EXEL SYRINGE 3 ML 25G 1"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
EXEL SYRINGE 3 ML 27G 1.25"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
EXEL SYRINGE U100 0.3 ML 29G 1/2"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
EXEL SYRINGE U100 0.3 ML 30G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
EXEL SYRINGE U100 0.5 ML 28G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
EXEL SYRINGE U100 0.5 ML 29G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
EXEL SYRINGE U100 0.5 ML 30G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
EXEL SYRINGE U100 1 ML 30G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
EXEL U100 INSULIN SYRINGE 1 ML 29G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
EXEMESTANE 25 MG TABLET	EXEMESTANE	1	
EXTENDED RESERVOIR 3 ML	INSULIN PUMP SYRINGE, 3 ML	2	
EZETIMIBE 10 MG TABLET	EZETIMIBE	1	
EZETIMIBE-SIMVASTATIN 10-10 MG TABLET	EZETIMIBE/SIMVASTATIN	1	
EZETIMIBE-SIMVASTATIN 10-20 MG TABLET	EZETIMIBE/SIMVASTATIN	1	
EZETIMIBE-SIMVASTATIN 10-40 MG TABLET	EZETIMIBE/SIMVASTATIN	1	
EZETIMIBE-SIMVASTATIN 10-80 MG TABLET	EZETIMIBE/SIMVASTATIN	1	
FACTIVE 320 MG TABLET	GEMIFLOXACIN MESYLATE	3	
FALMINA-28 TABLET	LEVONORGESTREL/ETHIN.ESTRADIOL	1	
FAMCICLOVIR 125 MG TABLET	FAMCICLOVIR	1	
FAMCICLOVIR 250 MG TABLET	FAMCICLOVIR	1	
FAMCICLOVIR 500 MG TABLET	FAMCICLOVIR	1	
FAMOTIDINE 40 MG/5 ML ORAL SUSPENSION	FAMOTIDINE	1	

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Medication Name	Generic Name	Tier	Notes
FAMOTIDINE 20 MG TABLET	FAMOTIDINE	1	
FAMOTIDINE 40 MG TABLET	FAMOTIDINE	1	
FARXIGA 5 MG TABLET	DAPAGLIFLOZIN PROPANEDIOL	2	QL
FARXIGA 10 MG TABLET	DAPAGLIFLOZIN PROPANEDIOL	2	QL
FEBUXOSTAT 40 MG TABLET	FEBUXOSTAT	3	QL
FEBUXOSTAT 80 MG TABLET	FEBUXOSTAT	3	QL
FEIRZA 1 MG-20 MCG TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
FEIRZA 1.5 MG-30 MCG TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
FELBAMATE 600 MG/5 ML ORAL SUSPENSION	FELBAMATE	3	
FELBAMATE 400 MG TABLET	FELBAMATE	3	
FELBAMATE 600 MG TABLET	FELBAMATE	3	
FELODIPINE ER 2.5 MG TABLET	FELODIPINE	1	
FELODIPINE ER 5 MG TABLET	FELODIPINE	1	
FELODIPINE ER 10 MG TABLET	FELODIPINE	1	
FEM PH VAGINAL JELLY	ACETIC ACID/OXYQUINOLINE	1	
FEMLYV 1 MG-0.02 MG ODT TABLET	NORETHINDRONE AC/ETH ESTRADIOL	1	
FENOFIBRATE 43 MG CAPSULE	FENOFIBRATE,MICRONIZED	1	
FENOFIBRATE 50 MG CAPSULE	FENOFIBRATE	1	
FENOFIBRATE 67 MG CAPSULE	FENOFIBRATE,MICRONIZED	1	
FENOFIBRATE 130 MG CAPSULE	FENOFIBRATE,MICRONIZED	2	
FENOFIBRATE 134 MG CAPSULE	FENOFIBRATE,MICRONIZED	1	
FENOFIBRATE 150 MG CAPSULE	FENOFIBRATE	1	
FENOFIBRATE 200 MG CAPSULE	FENOFIBRATE,MICRONIZED	1	
FENOFIBRATE 40 MG TABLET	FENOFIBRATE	2	
FENOFIBRATE 48 MG TABLET	FENOFIBRATE NANOCRYSTALLIZED	1	
FENOFIBRATE 54 MG TABLET	FENOFIBRATE	1	
FENOFIBRATE 120 MG TABLET	FENOFIBRATE	1	
FENOFIBRATE 145 MG TABLET	FENOFIBRATE NANOCRYSTALLIZED	1	
FENOFIBRATE 160 MG TABLET	FENOFIBRATE	1	
FENOFIBRIC ACID 35 MG TABLET	FENOFIBRIC ACID	1	
FENOFIBRIC ACID 105 MG TABLET	FENOFIBRIC ACID	1	
FENOFIBRIC ACID DR 135 MG CAPSULE	FENOFIBRIC ACID (CHOLINE)	1	
FENOFIBRIC ACID DR 45 MG CAPSULE	FENOFIBRIC ACID (CHOLINE)	1	
FENOPROFEN 600 MG TABLET	FENOPROFEN CALCIUM	2	
FENTANYL 12 MCG/HR PATCH	FENTANYL	2	PA
FENTANYL 25 MCG/HR PATCH	FENTANYL	2	PA
FENTANYL 37.5 MCG/HR PATCH	FENTANYL	2	PA
FENTANYL 50 MCG/HR PATCH	FENTANYL	2	PA
FENTANYL 62.5 MCG/HR PATCH	FENTANYL	2	PA
FENTANYL 75 MCG/HR PATCH	FENTANYL	2	PA
FENTANYL 87.5 MCG/HR PATCH	FENTANYL	2	PA

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Medication Name	Generic Name	Tier	Notes
FENTANYL 100 MCG/HR PATCH	FENTANYL	2	PA
FENTANYL CITRATE OTFC 200 MCG LOZENGE	FENTANYL CITRATE	3	PA
FENTANYL CITRATE OTFC 400 MCG LOZENGE	FENTANYL CITRATE	3	PA
FENTANYL CITRATE OTFC 600 MCG LOZENGE	FENTANYL CITRATE	3	PA
FENTANYL CITRATE OTFC 800 MCG LOZENGE	FENTANYL CITRATE	3	PA
FENTANYL CITRATE OTFC 1,200 MCG LOZENGE	FENTANYL CITRATE	3	PA
FENTANYL CITRATE OTFC 1,600 MCG LOZENGE	FENTANYL CITRATE	3	PA
FERRIPROX 100 MG/ML ORAL SOLUTION	DEFERIPRONE	3	PA, LDD, SRX
FESOTERODINE ER 4 MG TABLET	FESOTERODINE FUMARATE	3	QL
FESOTERODINE ER 8 MG TABLET	FESOTERODINE FUMARATE	3	QL
FETZIMA 20-40 MG TITRATION PACK	LEVOMILNACIPRAN HCL	3	QL
FETZIMA ER 20 MG CAPSULE	LEVOMILNACIPRAN HCL	3	QL
FETZIMA ER 40 MG CAPSULE	LEVOMILNACIPRAN HCL	3	QL
FETZIMA ER 80 MG CAPSULE	LEVOMILNACIPRAN HCL	3	QL
FETZIMA ER 120 MG CAPSULE	LEVOMILNACIPRAN HCL	3	QL
FIFTY50 GLUCOSE CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
FIFTY50 INSULIN SYRINGE 0.3 ML 31G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
FIFTY50 INSULIN SYRINGE 0.5 ML 31G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
FIFTY50 INSULIN SYRINGE 1 ML 31G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
FILTER ASPIRATOR NEEDLE	NEEDLES, FILTER	2	
FILTER NEEDLE	NEEDLES, FILTER	2	
FILTER NEEDLE 19G 1.5"	NEEDLES, FILTER	2	
FILTER NEEDLE 5 MICRON	NEEDLES, FILTER	2	
FINASTERIDE 5 MG TABLET	FINASTERIDE	1	
FINGOLIMOD 0.5 MG CAPSULE	FINGOLIMOD HCL	4	PA, QL, SRX
FINZALA 1-0.02(24)-75 CHEWABLE TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
FLAC OTIC OIL 0.01% EAR DROPS	FLUOCINOLONE ACETONIDE OIL	1	
FLAVOXATE 100 MG TABLET	FLAVOXATE HCL	1	
FLECAINIDE 50 MG TABLET	FLECAINIDE ACETATE	1	
FLECAINIDE 100 MG TABLET	FLECAINIDE ACETATE	1	
FLECAINIDE 150 MG TABLET	FLECAINIDE ACETATE	1	
FLEXICHAMBER	INHALER, ASSIST DEVICES	2	QL
FLEXICHAMBER-LARGE CHILD MASK	INHALER,ASSIST DEVICE,ACCESORY	2	QL
FLEXICHAMBER-SMALL ADULT MASK	INHALER,ASSIST DEVICE,ACCESORY	2	QL
FLEXICHAMBER-SMALL CHILD MASK	INHALER,ASSIST DEVICE,ACCESORY	2	QL
FLOW-EZE VENTED NEEDLE	NEEDLES, DISPOSABLE	2	
FLUAD	FLU VACC TS2024(65UP)/MF59C/PF	2	
FLUARIX	FLU VACC TS2024-25(6MOS UP)/PF	2	
FLUBLOK	FLU VAC TV 2024(18YR UP)RCM/PF	2	
FLUCELVAX	FLU VAC TS 24-25(6MS UP)CEL/PF	2	
FLUCONAZOLE 10 MG/ML ORAL SUSPENSION	FLUCONAZOLE	1	

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Medication Name	Generic Name	Tier	Notes
FLUCONAZOLE 40 MG/ML ORAL SUSPENSION	FLUCONAZOLE	1	
FLUCONAZOLE 50 MG TABLET	FLUCONAZOLE	1	
FLUCONAZOLE 100 MG TABLET	FLUCONAZOLE	1	
FLUCONAZOLE 150 MG TABLET	FLUCONAZOLE	1	
FLUCONAZOLE 200 MG TABLET	FLUCONAZOLE	1	
FLUCYTOSINE 250 MG CAPSULE	FLUCYTOSINE	3	
FLUCYTOSINE 500 MG CAPSULE	FLUCYTOSINE	3	
FLUDROCORTISONE 0.1 MG TABLET	FLUDROCORTISONE ACETATE	1	
FLULAVAL	FLU VACC TS2024-25(6MOS UP)/PF	2	
FLUMIST	FLU VACC TV LIVE 2024(2-49YRS)	2	
FLUNISOLIDE 0.025% NASAL SPRAY	FLUNISOLIDE	1	
FLUOCINOLONE 0.01% BODY OIL	FLUOCINOLONE ACETONIDE	1	
FLUOCINOLONE 0.01% CREAM	FLUOCINOLONE ACETONIDE	1	
FLUOCINOLONE 0.025% CREAM	FLUOCINOLONE ACETONIDE	1	
FLUOCINOLONE 0.025% OINTMENT	FLUOCINOLONE ACETONIDE	1	
FLUOCINOLONE 0.01% SCALP OIL	FLUOCINOLONE/SHOWER CAP	1	
FLUOCINOLONE 0.01% TOPICAL SOLUTION	FLUOCINOLONE ACETONIDE	1	
FLUOCINOLONE OIL 0.01% EAR DROPS	FLUOCINOLONE ACETONIDE OIL	1	
FLUOCINONIDE 0.05% CREAM	FLUOCINONIDE	1	
FLUOCINONIDE 0.1% CREAM	FLUOCINONIDE	1	
FLUOCINONIDE 0.05% GEL	FLUOCINONIDE	1	
FLUOCINONIDE 0.05% OINTMENT	FLUOCINONIDE	1	
FLUOCINONIDE 0.05% TOPICAL SOLUTION	FLUOCINONIDE	1	
FLUOCINONIDE-E 0.05% CREAM	FLUOCINONIDE/EMOLLIENT BASE	1	
FLUORIDEX DAILY DEFENSE 1.1% TOOTHPASTE	FLUORIDE (SODIUM)	1	
FLUORIDEX SENSITIVE RELIEF TOOTHPASTE	SODIUM FLUORIDE/POTASSIUM NIT	1	
FLUORIMAX 5000 1.1% TOOTHPASTE	FLUORIDE (SODIUM)	1	
FLUOROMETHOLONE 0.1% EYE DROPS	FLUOROMETHOLONE	1	
FLUOROURACIL 0.5% CREAM	FLUOROURACIL	3	
FLUOROURACIL 5% CREAM	FLUOROURACIL	1	
FLUOROURACIL 2% TOPICAL SOLUTION	FLUOROURACIL	1	
FLUOROURACIL 5% TOPICAL SOLUTION	FLUOROURACIL	1	
FLUOXETINE 10 MG CAPSULE	FLUOXETINE HCL	1	QL
FLUOXETINE 20 MG CAPSULE	FLUOXETINE HCL	1	QL
FLUOXETINE 40 MG CAPSULE	FLUOXETINE HCL	1	QL
FLUOXETINE 20 MG/5 ML ORAL SOLUTION	FLUOXETINE HCL	1	QL
FLUOXETINE DR 90 MG CAPSULE	FLUOXETINE HCL	1	QL
FLUPHENAZINE 2.5 MG/5 ML ELIXIR	FLUPHENAZINE HCL	1	
FLUPHENAZINE 5 MG/ML ORAL CONCENTRATE	FLUPHENAZINE HCL	1	
FLUPHENAZINE 1 MG TABLET	FLUPHENAZINE HCL	1	
FLUPHENAZINE 2.5 MG TABLET	FLUPHENAZINE HCL	1	

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Medication Name	Generic Name	Tier	Notes
FLUPHENAZINE 5 MG TABLET	FLUPHENAZINE HCL	1	
FLUPHENAZINE 10 MG TABLET	FLUPHENAZINE HCL	1	
FLURANDRENOLIDE 0.05% CREAM	FLURANDRENOLIDE	3	
FLURANDRENOLIDE 0.05% LOTION	FLURANDRENOLIDE	3	
FLURANDRENOLIDE 0.05% OINTMENT	FLURANDRENOLIDE	3	
FLURAZEPAM 15 MG CAPSULE	FLURAZEPAM HCL	1	
FLURAZEPAM 30 MG CAPSULE	FLURAZEPAM HCL	1	
FLURBIPROFEN 0.03% EYE DROPS	FLURBIPROFEN SODIUM	1	
FLURBIPROFEN 100 MG TABLET	FLURBIPROFEN	1	
FLUTAMIDE 125 MG CAPSULE	FLUTAMIDE	1	
FLUTICASONE 0.05% CREAM	FLUTICASONE PROPIONATE	1	
FLUTICASONE 0.05% LOTION	FLUTICASONE PROPIONATE	3	
FLUTICASONE 50 MCG NASAL SPRAY	FLUTICASONE PROPIONATE	1	
FLUTICASONE 0.005% OINTMENT	FLUTICASONE PROPIONATE	1	
FLUTICASONE-SALMETEROL 100-50 INHALER	FLUTICASONE PROPION/SALMETEROL	1	QL
FLUTICASONE-SALMETEROL 250-50 INHALER	FLUTICASONE PROPION/SALMETEROL	1	QL
FLUTICASONE-SALMETEROL 500-50 INHALER	FLUTICASONE PROPION/SALMETEROL	1	QL
FLUVASTATIN 20 MG CAPSULE	FLUVASTATIN SODIUM	2	
FLUVASTATIN 40 MG CAPSULE	FLUVASTATIN SODIUM	2	
FLUVASTATIN ER 80 MG TABLET	FLUVASTATIN SODIUM	2	
FLUVOXAMINE 25 MG TABLET	FLUVOXAMINE MALEATE	1	QL
FLUVOXAMINE 50 MG TABLET	FLUVOXAMINE MALEATE	1	QL
FLUVOXAMINE 100 MG TABLET	FLUVOXAMINE MALEATE	1	QL
FLUVOXAMINE ER 100 MG CAPSULE	FLUVOXAMINE MALEATE	1	QL
FLUVOXAMINE ER 150 MG CAPSULE	FLUVOXAMINE MALEATE	1	QL
FLUZONE	FLU VACC TS2024-25(6MOS UP)/PF	2	
FLUZONE HIGH-DOSE	FLU VACC TS2024-25(65YR UP)/PF	2	
FOLIC ACID 1 MG TABLET	FOLIC ACID	1	
FOLIVANE-OB CAPSULE	MVN-MIN 74/IRON FUM/IRON/FA	1	
FOLLISTIM AQ 300 UNIT CARTRIDGE	FOLLITROPIN BETA,RECOMB	4	PA, SRX
FOLLISTIM AQ 600 UNIT CARTRIDGE	FOLLITROPIN BETA,RECOMB	4	PA, SRX
FOLLISTIM AQ 900 UNIT CARTRIDGE	FOLLITROPIN BETA,RECOMB	4	PA, SRX
FONDAPARINUX 2.5 MG/0.5 ML SYRINGE	FONDAPARINUX SODIUM	4	QL, SRX
FONDAPARINUX 5 MG/0.4 ML SYRINGE	FONDAPARINUX SODIUM	4	QL, SRX
FONDAPARINUX 7.5 MG/0.6 ML SYRINGE	FONDAPARINUX SODIUM	4	QL, SRX
FONDAPARINUX 10 MG/0.8 ML SYRINGE	FONDAPARINUX SODIUM	4	QL, SRX
FORA HIGH CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, HIGH	2	
FORA KETONE L1 CONTROL SOLUTION	BLOOD-KETONE CONTROL, NORMAL	2	
FORA LOW CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, LOW	2	
FORA NORMAL CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
FORACARE GDH HIGH CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, HIGH	2	

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Medication Name	Generic Name	Tier	Notes
FORACARE GDH LOW CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, LOW	2	
FORACARE GDH NORMAL CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
FORMOTEROL 20 MCG/2 ML INHALATION SOLUTION	FORMOTEROL FUMARATE	3	QL
FORTISCARE HIGH CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, HIGH	2	
FORTISCARE LOW CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, LOW	2	
FORTISCARE NORMAL CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
FOSAMPRENAVIR 700 MG TABLET	FOSAMPRENAVIR CALCIUM	1	SRX
FOSFOMYCIN 3 GM SACHET	FOSFOMYCIN TROMETHAMINE	2	
FOSINOPRIL 10 MG TABLET	FOSINOPRIL SODIUM	1	
FOSINOPRIL 20 MG TABLET	FOSINOPRIL SODIUM	1	
FOSINOPRIL 40 MG TABLET	FOSINOPRIL SODIUM	1	
FOSINOPRIL-HCTZ 10-12.5 MG TABLET	FOSINOPRIL/HYDROCHLOROTHIAZIDE	1	
FOSINOPRIL-HCTZ 20-12.5 MG TABLET	FOSINOPRIL/HYDROCHLOROTHIAZIDE	1	
FOSRENOL 750 MG POWDER PACKET	LANTHANUM CARBONATE	3	
FOSRENOL 1,000 MG POWDER PACKET	LANTHANUM CARBONATE	3	
FRAGMIN 2,500 UNIT/0.2 ML SYRINGE	DALTEPARIN SODIUM,PORCINE	4	QL, SRX
FRAGMIN 5,000 UNIT/0.2 ML SYRINGE	DALTEPARIN SODIUM,PORCINE	4	QL, SRX
FRAGMIN 7,500 UNIT/0.3 ML SYRINGE	DALTEPARIN SODIUM,PORCINE	4	QL, SRX
FRAGMIN 10,000 UNIT/ML SYRINGE	DALTEPARIN SODIUM,PORCINE	4	QL, SRX
FRAGMIN 12,500 UNIT/0.5 ML SYRINGE	DALTEPARIN SODIUM,PORCINE	4	QL, SRX
FRAGMIN 15,000 UNIT/0.6 ML SYRINGE	DALTEPARIN SODIUM,PORCINE	4	QL, SRX
FRAGMIN 18,000 UNIT/0.72 ML SYRINGE	DALTEPARIN SODIUM,PORCINE	4	QL, SRX
FRAGMIN 10,000 UNIT/4 ML VIAL	DALTEPARIN SODIUM,PORCINE	4	QL, SRX
FRAGMIN 95,000 UNIT/3.8 ML VIAL	DALTEPARIN SODIUM,PORCINE	4	QL, SRX
FRAICHE 5000 1.1 % DENTAL GEL	FLUORIDE (SODIUM)	1	
FREESTYLE 28G LANCET	LANCETS	2	
FREESTYLE CONTROL SOLUTION	BLOOD GLUCOSE CONTROL HIGH,LOW	2	
FREESTYLE FREEDOM LITE GLUCOSE METER	BLOOD-GLUCOSE METER	1	
FREESTYLE INSULINX GLUCOSE SYSTEM	BLOOD-GLUCOSE METER	1	
FREESTYLE INSULINX TEST STRIP	BLOOD SUGAR DIAGNOSTIC	2	
FREESTYLE LIBRE 14 DAY READER	FLASH GLUCOSE SCANNING READER	2	PA, QL
FREESTYLE LIBRE 14 DAY SENSOR	FLASH GLUCOSE SENSOR	2	PA, QL
FREESTYLE LIBRE 2 PLUS SENSOR	BLOOD-GLUCOSE SENSOR	2	PA, QL
FREESTYLE LIBRE 3 PLUS SENSOR	BLOOD-GLUCOSE SENSOR	2	PA, QL
FREESTYLE LIBRE 2 READER	FLASH GLUCOSE SCANNING READER	2	PA, QL
FREESTYLE LIBRE 3 READER	BLOOD-GLUCOSE,RECEIVER,CONT	2	PA, QL
FREESTYLE LIBRE 2 SENSOR	FLASH GLUCOSE SENSOR	2	PA, QL
FREESTYLE LIBRE 3 SENSOR	BLOOD-GLUCOSE SENSOR	2	PA, QL
FREESTYLE LITE GLUCOSE METER	BLOOD-GLUCOSE METER	1	
FREESTYLE LITE TEST STRIP	BLOOD SUGAR DIAGNOSTIC	2	
FREESTYLE PRECISION NEO GLUCOSE METER	BLOOD-GLUCOSE METER	1	

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Medication Name	Generic Name	Tier	Notes
FREESTYLE PRECISION NEO TEST STRIP	BLOOD SUGAR DIAGNOSTIC	2	
FREESTYLE PRECISION SYRINGE 0.5 ML 30G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
FREESTYLE PRECISION SYRINGE 0.5 ML 31G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
FREESTYLE PRECISION SYRINGE 1 ML 30G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
FREESTYLE PRECISION SYRINGE 1 ML 31G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
FREESTYLE TEST STRIP	FREESTYLE TEST STRIP	2	
FREESTYLE UNISTIK 2 LANCET	FREESTYLE UNISTIK 2 LANCET	2	
FROVATRIPTAN 2.5 MG TABLET	FROVATRIPTAN SUCCINATE	2	QL
FUROSEMIDE 10 MG/ML ORAL SOLUTION	FUROSEMIDE	1	
FUROSEMIDE 40 MG/5 ML ORAL SOLUTION	FUROSEMIDE	1	
FUROSEMIDE 20 MG TABLET	FUROSEMIDE	1	
FUROSEMIDE 40 MG TABLET	FUROSEMIDE	1	
FUROSEMIDE 80 MG TABLET	FUROSEMIDE	1	
FUZEON 90 MG VIAL	ENFUVIRTIDE	4	SRX
FYAVOLV 0.5 MG-2.5 MCG TABLET	NORETHINDRONE AC/ETH ESTRADIOL	1	
FYAVOLV 1 MG-5 MCG TABLET	NORETHINDRONE AC/ETH ESTRADIOL	1	
FYCOMPA 2 MG TABLET	PERAMPANEL	3	PA, QL
FYCOMPA 4 MG TABLET	PERAMPANEL	3	PA, QL
FYCOMPA 6 MG TABLET	PERAMPANEL	3	PA, QL
FYCOMPA 8 MG TABLET	PERAMPANEL	3	PA, QL
FYCOMPA 10 MG TABLET	PERAMPANEL	3	PA, QL
FYCOMPA 12 MG TABLET	PERAMPANEL	3	PA, QL
GABAPENTIN 100 MG CAPSULE	GABAPENTIN	1	
GABAPENTIN 300 MG CAPSULE	GABAPENTIN	1	
GABAPENTIN 400 MG CAPSULE	GABAPENTIN	1	
GABAPENTIN 250 MG/5 ML ORAL SOLUTION	GABAPENTIN	1	
GABAPENTIN 300 MG/6 ML ORAL SOLUTION	GABAPENTIN	1	
GABAPENTIN 600 MG TABLET	GABAPENTIN	1	
GABAPENTIN 800 MG TABLET	GABAPENTIN	1	
GALANTAMINE 4 MG/ML ORAL SOLUTION	GALANTAMINE HBR	1	
GALANTAMINE 4 MG TABLET	GALANTAMINE HBR	1	
GALANTAMINE 8 MG TABLET	GALANTAMINE HBR	1	
GALANTAMINE 12 MG TABLET	GALANTAMINE HBR	1	
GALANTAMINE ER 8 MG CAPSULE	GALANTAMINE HBR	1	QL
GALANTAMINE ER 16 MG CAPSULE	GALANTAMINE HBR	1	QL
GALANTAMINE ER 24 MG CAPSULE	GALANTAMINE HBR	1	QL
GALLIFREY 5 MG TABLET	NORETHINDRONE ACETATE	1	
GALZIN 25 MG CAPSULE	ZINC ACETATE	3	LDD, SRX
GALZIN 50 MG CAPSULE	ZINC ACETATE	3	LDD, SRX
GARDASIL 9 SYRINGE	HPV VACCINE 9-VALENT/PF	2	
GARDASIL 9 VIAL	HPV VACCINE 9-VALENT/PF	2	

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Medication Name	Generic Name	Tier	Notes
GATIFLOXACIN 0.5% EYE DROPS	GATIFLOXACIN	2	
GATTEX 5 MG VIAL	TEDUGLUTIDE	4	PA, LDD, SRX
GATTEX 5 MG 30-VIAL KIT	TEDUGLUTIDE	4	PA, LDD, SRX
GATTEX 5 MG ONE-VIAL KIT	TEDUGLUTIDE	4	PA, LDD, SRX
GAVILYTE-C ORAL SOLUTION	PEG3350/SOD SULF,BICARB,CL/KCL	1	
GAVILYTE-G ORAL SOLUTION	PEG3350/SOD SULF,BICARB,CL/KCL	1	
GAVILYTE-N ORAL SOLUTION	SODIUM CHLORIDE/NAHCO3/KCL/PEG	1	
GE100 NORMAL CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
GEFITINIB 250 MG TABLET	GEFITINIB	4	PA, QL, SRX
GEMFIBROZIL 600 MG TABLET	GEMFIBROZIL	1	
GEMMILY 1 MG-20 MCG CAPSULE	NORETHINDRONE-E.ESTRADIOL-IRON	1	
GENERLAC 10 GM/15 ML ORAL SOLUTION	LACTULOSE	1	
GENGRAF 25 MG CAPSULE	CYCLOSPORINE, MODIFIED	1	SRX
GENGRAF 100 MG CAPSULE	CYCLOSPORINE, MODIFIED	1	SRX
GENGRAF 100 MG/ML ORAL SOLUTION	CYCLOSPORINE, MODIFIED	1	SRX
GENOTROPIN 5 MG CARTRIDGE	SOMATROPIN	4	PA, SRX
GENOTROPIN 12 MG CARTRIDGE	SOMATROPIN	4	PA, SRX
GENOTROPIN MINIQUICK 0.2 MG SYRINGE	SOMATROPIN	4	PA, SRX
GENOTROPIN MINIQUICK 0.4 MG SYRINGE	SOMATROPIN	4	PA, SRX
GENOTROPIN MINIQUICK 0.6 MG SYRINGE	SOMATROPIN	4	PA, SRX
GENOTROPIN MINIQUICK 0.8 MG SYRINGE	SOMATROPIN	4	PA, SRX
GENOTROPIN MINIQUICK 1 MG SYRINGE	SOMATROPIN	4	PA, SRX
GENOTROPIN MINIQUICK 1.2 MG SYRINGE	SOMATROPIN	4	PA, SRX
GENOTROPIN MINIQUICK 1.4 MG SYRINGE	SOMATROPIN	4	PA, SRX
GENOTROPIN MINIQUICK 1.6 MG SYRINGE	SOMATROPIN	4	PA, SRX
GENOTROPIN MINIQUICK 1.8 MG SYRINGE	SOMATROPIN	4	PA, SRX
GENOTROPIN MINIQUICK 2 MG SYRINGE	SOMATROPIN	4	PA, SRX
GENTAK 0.3 % EYE OINTMENT	GENTAMICIN SULFATE	1	
GENTAMICIN 0.1% CREAM	GENTAMICIN SULFATE	1	
GENTAMICIN 0.1% OINTMENT	GENTAMICIN SULFATE	1	
GENTAMICIN 0.3% EYE DROPS	GENTAMICIN SULFATE	1	
GENVOYA TABLET	ELVITEG/COB/EMTRI/TENOF ALAFEN	3	QL, SRX
GILOTRIF 20 MG TABLET	AFATINIB DIMALEATE	4	PA, QL, LDD, SRX
GILOTRIF 30 MG TABLET	AFATINIB DIMALEATE	4	PA, QL, LDD, SRX
GILOTRIF 40 MG TABLET	AFATINIB DIMALEATE	4	PA, QL, LDD, SRX
GLATIRAMER 20 MG/ML SYRINGE	GLATIRAMER ACETATE	4	PA, SRX
GLATIRAMER 40 MG/ML SYRINGE	GLATIRAMER ACETATE	4	PA, SRX
GLATOPA 20 MG/ML SYRINGE	GLATIRAMER ACETATE	4	PA, SRX
GLATOPA 40 MG/ML SYRINGE	GLATIRAMER ACETATE	4	PA, SRX
GLEOSTINE 10 MG CAPSULE	LOMUSTINE	3	PA
GLEOSTINE 40 MG CAPSULE	LOMUSTINE	3	PA

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Medication Name	Generic Name	Tier	Notes
GLEOSTINE 100 MG CAPSULE	LOMUSTINE	3	PA
GLIMEPIRIDE 1 MG TABLET	GLIMEPIRIDE	1	
GLIMEPIRIDE 2 MG TABLET	GLIMEPIRIDE	1	
GLIMEPIRIDE 4 MG TABLET	GLIMEPIRIDE	1	
GLIPIZIDE 5 MG TABLET	GLIPIZIDE	1	
GLIPIZIDE 10 MG TABLET	GLIPIZIDE	1	
GLIPIZIDE ER 2.5 MG TABLET	GLIPIZIDE	1	
GLIPIZIDE ER 5 MG TABLET	GLIPIZIDE	1	
GLIPIZIDE ER 10 MG TABLET	GLIPIZIDE	1	
GLIPIZIDE XL 2.5 MG TABLET	GLIPIZIDE	1	
GLIPIZIDE XL 5 MG TABLET	GLIPIZIDE	1	
GLIPIZIDE XL 10 MG TABLET	GLIPIZIDE	1	
GLIPIZIDE-METFORMIN 2.5-250 MG TABLET	GLIPIZIDE/METFORMIN HCL	1	
GLIPIZIDE-METFORMIN 2.5-500 MG TABLET	GLIPIZIDE/METFORMIN HCL	1	
GLIPIZIDE-METFORMIN 5-500 MG TABLET	GLIPIZIDE/METFORMIN HCL	1	
GLUCAGON 1 MG EMERGENCY KIT	GLUCAGON HCL	2	QL
GLUCOCARD 01 CONTROL SOLUTION	BLOOD GLUCOSE CNTL HIGH,NORMAL	2	
GLUCOCARD EXPRESSION CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
GLUCOCARD SHINE CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
GLUCOCOM AUTOLINK SYSTEM	DIABETIC SUPPLIES,MISCELL	2	
GLUCOCOM CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, HIGH	2	
GLUCOSE CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
GLUCOSE NORMAL CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
GLYBURIDE 1.25 MG TABLET	GLYBURIDE	1	
GLYBURIDE 2.5 MG TABLET	GLYBURIDE	1	
GLYBURIDE 5 MG TABLET	GLYBURIDE	1	
GLYBURIDE MICRO 1.5 MG TABLET	GLYBURIDE,MICRONIZED	1	
GLYBURIDE MICRO 3 MG TABLET	GLYBURIDE,MICRONIZED	1	
GLYBURIDE MICRO 6 MG TABLET	GLYBURIDE,MICRONIZED	1	
GLYBURIDE-METFORMIN 1.25-250 MG TABLET	GLYBURIDE/METFORMIN HCL	1	
GLYBURIDE-METFORMIN 2.5-500 MG TABLET	GLYBURIDE/METFORMIN HCL	1	
GLYBURIDE-METFORMIN 5-500 MG TABLET	GLYBURIDE/METFORMIN HCL	1	
GLYCINE 1.5% IRRIGATION	GLYCINE UROLOGIC SOLUTION	1	
GLYCOPYRROLATE 1 MG TABLET	GLYCOPYRROLATE	1	
GLYCOPYRROLATE 2 MG TABLET	GLYCOPYRROLATE	1	
GLYDO 2% JELLY SYRINGE	LIDOCAINE HCL	1	
GNP CLICKFINE NEEDLE 31G 1/4"	PEN NEEDLE, DIABETIC	2	
GNP CLICKFINE NEEDLE 31G 5/16"	PEN NEEDLE, DIABETIC	2	
GNP EASY TOUCH HIGH-LOW CONTROL SOLUTION	BLOOD GLUCOSE CONTROL HIGH,LOW	2	
GNP INSULIN SYRINGE 0.3 ML 29G 1/2"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
GNP INSULIN SYRINGE 0.3 ML 31G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	

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Medication Name	Generic Name	Tier	Notes
GNP INSULIN SYRINGE 0.5 ML 31G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
GNP INSULIN SYRINGE 1 ML 28G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
GNP INSULIN SYRINGE 1 ML 31G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
GNP PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC	2	
GNP PEN NEEDLE 31G 8MM	PEN NEEDLE, DIABETIC	2	
GNP PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
GNP PEN NEEDLE 32G 6MM	PEN NEEDLE, DIABETIC	2	
GNP ULTICARE PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC	2	
GNP ULTICARE PEN NEEDLE 31G 8MM	PEN NEEDLE, DIABETIC	2	
GNP ULTICARE PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
GNP ULTICARE PEN NEEDLE 32G 6MM	PEN NEEDLE, DIABETIC	2	
GNP ULTIGUARD SAFEPACK 31G 5MM	PEN NEEDLE, DIABETIC,DISP UNIT	2	
GNP ULTIGUARD SAFEPACK 31G 8MM	PEN NEEDLE, DIABETIC,DISP UNIT	2	
GNP ULTIGUARD SAFEPACK 32G 4MM	PEN NEEDLE, DIABETIC,DISP UNIT	2	
GNP ULTIGUARD SAFEPACK 32G 6MM	PEN NEEDLE, DIABETIC,DISP UNIT	2	
GNP ULTRA COMFORT SYRINGE 0.3 ML 29G 1/2"	SYRGE-NDL,INS 0.3 ML HALF MARK	2	
GNP ULTRA COMFORT SYRINGE 0.5 ML	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
GNP ULTRA COMFORT SYRINGE 0.5 ML 28G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
GNP ULTRA COMFORT SYRINGE 0.5 ML 29G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
GNP ULTRA COMFORT SYRINGE 1 ML	SYRINGE AND NEEDLE,INSULIN,1ML	2	
GNP ULTRA COMFORT SYRINGE 3/10 ML	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
GOJJI GLUCOSE NORMAL CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
GOJJI KETONE L1 CONTROL SOLUTION	BLOOD-KETONE CONTROL, NORMAL	2	
GONAL-F 1,050 UNITS VIAL	FOLLITROPIN ALFA, RECOMBINANT	4	PA, SRX
GONAL-F 450 UNITS VIAL	FOLLITROPIN ALFA, RECOMBINANT	4	PA, SRX
GONAL-F RFF REDI-JECT 300 UNIT	FOLLITROPIN ALFA, RECOMBINANT	4	PA, SRX
GONAL-F RFF REDI-JECT 450 UNIT	FOLLITROPIN ALFA, RECOMBINANT	4	PA, SRX
GONAL-F RFF REDI-JECT 900 UNIT	FOLLITROPIN ALFA, RECOMBINANT	4	PA, SRX
GRANISETRON 1 MG TABLET	GRANISETRON HCL	3	
GRANISETRON 0.1 MG/ML VIAL	GRANISETRON HCL/PF	3	
GRANISETRON 1 MG/ML VIAL	GRANISETRON HCL/PF	3	
GRANISETRON 4 MG/4 ML VIAL	GRANISETRON HCL	3	
GRASTEK 2,800 BAU SUBLINGUAL TABLET	GRASS POLLEN-TIMOTHY, STANDARD	3	PA, QL
GRISEOFULVIN 125 MG/5 ML ORAL SUSPENSION	GRISEOFULVIN, MICROSIZE	2	
GRISEOFULVIN MICRO 500 MG TABLET	GRISEOFULVIN, MICROSIZE	2	
GRISEOFULVIN ULTRA 125 MG TABLET	GRISEOFULVIN ULTRAMICROSIZE	2	
GRISEOFULVIN ULTRA 250 MG TABLET	GRISEOFULVIN ULTRAMICROSIZE	2	
GS ALCOHOL 70% SWAB	ALCOHOL ANTISEPTIC PADS	2	
GS PEN NEEDLE 31G 5/16"	PEN NEEDLE, DIABETIC	2	
GS PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC	2	
GS PEN NEEDLE 31G 6MM	PEN NEEDLE, DIABETIC	2	

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Medication Name	Generic Name	Tier	Notes
GS PEN NEEDLE 31G 8MM	PEN NEEDLE, DIABETIC	2	
GS PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
GS PEN NEEDLE 32G 6MM	PEN NEEDLE, DIABETIC	2	
GUANFACINE 1 MG TABLET	GUANFACINE HCL	1	
GUANFACINE 2 MG TABLET	GUANFACINE HCL	1	
GUANFACINE ER 1 MG TABLET	GUANFACINE HCL	1	QL
GUANFACINE ER 2 MG TABLET	GUANFACINE HCL	1	QL
GUANFACINE ER 3 MG TABLET	GUANFACINE HCL	1	QL
GUANFACINE ER 4 MG TABLET	GUANFACINE HCL	1	QL
GUARDIAN RT REPLACE CHARGER	DIABETIC SUPPLIES,MISCELL	2	
GUARDIAN RT REPLACE TEST PLUG	DIABETIC SUPPLIES,MISCELL	2	
GUARDIAN TEST PLUG	DIABETIC SUPPLIES,MISCELL	2	
GUARDIAN TRANSMITTER TAPE	DIABETIC SUPPLIES,MISCELL	2	
GYNAZOLE 1 2% CREAM	BUTOCONAZOLE NITRATE	2	
HAILEY 21 1.5 MG-30 MCG TABLET	NORETHINDRONE AC/ETH ESTRADIOL	1	
HAILEY 24 FE 1 MG-20 MCG TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
HAILEY FE 1-20 TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
HAILEY FE 1.5-30 TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
HALOBETASOL 0.05% CREAM	HALOBETASOL PROPIONATE	1	
HALOBETASOL 0.05% OINTMENT	HALOBETASOL PROPIONATE	1	
HALOETTE VAGINAL RING	ETONOGESTREL/ETHINYL ESTRADIOL	1	
HALOPERIDOL 0.5 MG TABLET	HALOPERIDOL	1	
HALOPERIDOL 1 MG TABLET	HALOPERIDOL	1	
HALOPERIDOL 2 MG TABLET	HALOPERIDOL	1	
HALOPERIDOL 5 MG TABLET	HALOPERIDOL	1	
HALOPERIDOL 10 MG TABLET	HALOPERIDOL	1	
HALOPERIDOL 20 MG TABLET	HALOPERIDOL	1	
HALOPERIDOL LACTATE 2 MG/ML ORAL CONCENTRATE	HALOPERIDOL LACTATE	1	
HALOPERIDOL LACTATE 10 MG/5 ML ORAL CONCENTRATE	HALOPERIDOL LACTATE	1	
HAVRIX 720 UNIT/0.5 ML SYRINGE	HEPATITIS A VIRUS VACCINE/PF	2	
HAVRIX 1,440 UNIT/ML SYRINGE	HEPATITIS A VIRUS VACCINE/PF	2	
HEALTHPRO L1, L3 CONTROL SOLUTION	BLOOD GLUCOSE CONTROL HIGH,LOW	2	
HEALTHWISE INSULIN SYRINGE 0.3 ML 30G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
HEALTHWISE INSULIN SYRINGE 0.3 ML 31G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
HEALTHWISE INSULIN SYRINGE 0.5 ML 30G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
HEALTHWISE INSULIN SYRINGE 0.5 ML 31G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
HEALTHWISE INSULIN SYRINGE 1 ML 30G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
HEALTHWISE INSULIN SYRINGE 1 ML 31G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
HEALTHWISE PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC	2	
HEALTHWISE PEN NEEDLE 31G 8MM	PEN NEEDLE, DIABETIC	2	
HEALTHWISE PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	

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Medication Name	Generic Name	Tier	Notes
HEALTHY ACCENTS PENTIP 29G 12MM	PEN NEEDLE, DIABETIC, SAFETY	2	
HEALTHY ACCENTS PENTIP 31G 5MM	PEN NEEDLE, DIABETIC	2	
HEALTHY ACCENTS PENTIP 31G 6MM	PEN NEEDLE, DIABETIC	2	
HEALTHY ACCENTS PENTIP 31G 8MM	PEN NEEDLE, DIABETIC	2	
HEALTHY ACCENTS PENTIP 32G 4MM	PEN NEEDLE, DIABETIC	2	
HEATHER 0.35 MG TABLET	NORETHINDRONE	1	
HEB UNIFINE PENTIP PLUS 31G 3/16"	PEN NEEDLE, DIABETIC	2	
HEMA-COMBISTIX REAGENT TEST STRIP	URINE MULTIPLE TEST STRIPS	2	
HEMMOREX-HC 25 MG SUPPOSITORY	HYDROCORTISONE ACETATE	1	
HEMMOREX-HC 30 MG SUPPOSITORY	HYDROCORTISONE ACETATE	1	
HEPARIN 5,000 UNIT/0.5 ML INJECTION	HEPARIN SODIUM,PORCINE/PF	1	
HEPARIN 5,000 UNIT/ML SYRINGE	HEPARIN SODIUM,PORCINE	1	
HEPLISAV-B 20 MCG/0.5 ML SYRINGE	HEPATITIS B VACCINE/CPG1018/PF	2	
HIBERIX VACCINE VIAL	HAEMOPH B POLY CONJ-TET TOX/PF	2	
HIBERIX VIAL AND DILUENT SYRINGE	HAEMOPH B POLY CONJ-TET TOX/PF	2	
HIBERIX VIAL WITH DILUENT VIAL	HAEMOPH B POLY CONJ-TET TOX/PF	2	
HM ULTICARE PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC	2	
HM ULTICARE PEN NEEDLE 31G 6MM	PEN NEEDLE, DIABETIC	2	
HM ULTICARE PEN NEEDLE 31G 8MM	PEN NEEDLE, DIABETIC	2	
HM ULTICARE PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
HOMATROPAIRE 5% EYE DROPS	HOMATROPINE HBR	1	
HUMALOG 100 UNIT/ML CARTRIDGE	INSULIN LISPRO	2	QL
HUMALOG 100 UNIT/ML KWIKPEN	INSULIN LISPRO	2	QL
HUMALOG 200 UNIT/ML KWIKPEN	INSULIN LISPRO	2	QL
HUMALOG JR 100 UNIT/ML KWIKPEN	INSULIN LISPRO	2	QL
HUMALOG MIX 50-50 KWIKPEN	INSULIN LISPRO PROTAMIN/LISPRO	2	QL
HUMALOG MIX 75-25 KWIKPEN	INSULIN LISPRO PROTAMIN/LISPRO	2	QL
HUMALOG MIX 75-25 VIAL	INSULIN LISPRO PROTAMIN/LISPRO	2	QL
HUMALOG TEMPO PEN 100 UNIT/ML	INSULIN LISPRO	2	QL
HUMIRA 40 MG/0.8 ML PEN	ADALIMUMAB	4	PA, QL, SRX
HUMIRA 40 MG/0.8 ML SYRINGE	ADALIMUMAB	4	PA, QL, SRX
HUMIRA (CF) 40 MG/0.4 ML PEN	ADALIMUMAB	4	PA, QL, SRX
HUMIRA (CF) 80 MG/0.8 ML PEN	ADALIMUMAB	4	PA, QL, SRX
HUMIRA (CF) 80 MG CROHN'S-UC-HS PEN	ADALIMUMAB	4	PA, QL, SRX
HUMIRA (CF) 80 MG PEDIATRIC UC PEN	ADALIMUMAB	4	PA, QL, SRX
HUMIRA (CF) 80 MG-40 MG PSORIASIS-UVEITIS-ADOL HS PEN	ADALIMUMAB	4	PA, QL, SRX
HUMIRA (CF) 10 MG/0.1 ML SYRINGE	ADALIMUMAB	4	PA, QL, SRX
HUMIRA (CF) 20 MG/0.2 ML SYRINGE	ADALIMUMAB	4	PA, QL, SRX
HUMIRA (CF) 40 MG/0.4 ML SYRINGE	ADALIMUMAB	4	PA, QL, SRX
HUMULIN 70/30 KWIKPEN	INSULIN NPH HUM/REG INSULIN HM	2	QL
HUMULIN 70-30 VIAL	INSULIN NPH HUM/REG INSULIN HM	2	QL

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Medication Name	Generic Name	Tier	Notes
HUMULIN N 100 UNIT/ML KWIKPEN	INSULIN NPH HUMAN ISOPHANE	2	QL
HUMULIN N 100 UNIT/ML VIAL	INSULIN NPH HUMAN ISOPHANE	2	QL
HUMULIN R 500 UNIT/ML KWIKPEN	INSULIN REGULAR, HUMAN	2	QL
HUMULIN R 100 UNIT/ML VIAL	INSULIN REGULAR, HUMAN	2	QL
HUMULIN R 500 UNIT/ML VIAL	INSULIN REGULAR, HUMAN	2	QL
HYCAMTIN 0.25 MG CAPSULE	TOPOTECAN HCL	4	PA, SRX
HYCAMTIN 1 MG CAPSULE	TOPOTECAN HCL	4	PA, SRX
HYDRALAZINE 10 MG TABLET	HYDRALAZINE HCL	1	
HYDRALAZINE 25 MG TABLET	HYDRALAZINE HCL	1	
HYDRALAZINE 50 MG TABLET	HYDRALAZINE HCL	1	
HYDRALAZINE 100 MG TABLET	HYDRALAZINE HCL	1	
HYDROCHLOROTHIAZIDE 12.5 MG CAPSULE	HYDROCHLOROTHIAZIDE	1	
HYDROCHLOROTHIAZIDE 12.5 MG TABLET	HYDROCHLOROTHIAZIDE	1	
HYDROCHLOROTHIAZIDE 25 MG TABLET	HYDROCHLOROTHIAZIDE	1	
HYDROCHLOROTHIAZIDE 50 MG TABLET	HYDROCHLOROTHIAZIDE	1	
HYDROCODONE ER 20 MG TABLET	HYDROCODONE BITARTRATE	1	PA
HYDROCODONE ER 30 MG TABLET	HYDROCODONE BITARTRATE	1	PA
HYDROCODONE ER 40 MG TABLET	HYDROCODONE BITARTRATE	1	PA
HYDROCODONE ER 60 MG TABLET	HYDROCODONE BITARTRATE	1	PA
HYDROCODONE ER 80 MG TABLET	HYDROCODONE BITARTRATE	1	PA
HYDROCODONE ER 100 MG TABLET	HYDROCODONE BITARTRATE	1	PA
HYDROCODONE ER 120 MG TABLET	HYDROCODONE BITARTRATE	1	PA
HYDROCODONE-ACETAMINOPHEN 2.5-108 MG/5 ML ORAL SOLUTION	HYDROCODONE/ACETAMINOPHEN	1	PA
HYDROCODONE-ACETAMINOPHEN 5-217 MG/10 ML ORAL SOLUTION	HYDROCODONE/ACETAMINOPHEN	1	PA
HYDROCODONE-ACETAMINOPHEN 7.5-325 MG/15 ML ORAL SOLUTION	HYDROCODONE/ACETAMINOPHEN	1	PA
HYDROCODONE-ACETAMINOPHEN 10-325 MG/15 ML ORAL SOLUTION	HYDROCODONE/ACETAMINOPHEN	1	PA
HYDROCODONE-ACETAMINOPHEN 2.5-325 MG TABLET	HYDROCODONE/ACETAMINOPHEN	1	PA
HYDROCODONE-ACETAMINOPHEN 5-300 MG TABLET	HYDROCODONE/ACETAMINOPHEN	1	PA
HYDROCODONE-ACETAMINOPHEN 5-325 MG TABLET	HYDROCODONE/ACETAMINOPHEN	1	PA
HYDROCODONE-ACETAMINOPHEN 7.5-300 MG TABLET	HYDROCODONE/ACETAMINOPHEN	1	PA
HYDROCODONE-ACETAMINOPHEN 7.5-325 MG TABLET	HYDROCODONE/ACETAMINOPHEN	1	PA
HYDROCODONE-ACETAMINOPHEN 10-300 MG TABLET	HYDROCODONE/ACETAMINOPHEN	1	PA
HYDROCODONE-ACETAMINOPHEN 10-325 MG TABLET	HYDROCODONE/ACETAMINOPHEN	1	PA
HYDROCODONE-CHLORPHENIRAMINE ER ORAL SUSPENSION	HYDROCODONE/CHLORPHEN P-STIREX	1	
HYDROCODONE-HOMATROPINE ORAL SOLUTION	HYDROCODONE BIT/HOMATROP ME-BR	1	QL
HYDROCODONE-HOMATROPINE 5 ML ORAL SOLUTION	HYDROCODONE BIT/HOMATROP ME-BR	1	QL
HYDROCODONE-HOMATROPINE 5 MG-1.5 MG TABLET	HYDROCODONE BIT/HOMATROP ME-BR	1	QL
HYDROCODONE-IBUPROFEN 5 MG-200 MG TABLET	HYDROCODONE/IBUPROFEN	1	PA

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Medication Name	Generic Name	Tier	Notes
HYDROCODONE-IBUPROFEN 7.5 MG-200 MG TABLET	HYDROCODONE/IBUPROFEN	1	PA
HYDROCODONE-IBUPROFEN 10 MG-200 MG TABLET	HYDROCODONE/IBUPROFEN	1	PA
HYDROCORTISONE 1% CREAM	HYDROCORTISONE ACETATE	1	
HYDROCORTISONE 2.5% CREAM	HYDROCORTISONE	1	
HYDROCORTISONE 100 MG/60 ML ENEMA	HYDROCORTISONE	1	
HYDROCORTISONE 2.5% LOTION	HYDROCORTISONE	1	
HYDROCORTISONE 1% OINTMENT	HYDROCORTISONE ACETATE	1	
HYDROCORTISONE 2.5% OINTMENT	HYDROCORTISONE	1	
HYDROCORTISONE 5 MG TABLET	HYDROCORTISONE	1	
HYDROCORTISONE 10 MG TABLET	HYDROCORTISONE	1	
HYDROCORTISONE 20 MG TABLET	HYDROCORTISONE	1	
HYDROCORTISONE 2.5% TOPICAL SOLUTION	HYDROCORTISONE	3	
HYDROCORTISONE AC 25 MG SUPPOSITORY	HYDROCORTISONE ACETATE	1	
HYDROCORTISONE AC 30 MG SUPPOSITORY	HYDROCORTISONE ACETATE	1	
HYDROCORTISONE BUTYRATE 0.1% CREAM	HYDROCORTISONE BUTYRATE	2	QL
HYDROCORTISONE BUTYRATE 0.1% OINTMENT	HYDROCORTISONE BUTYRATE	2	QL
HYDROCORTISONE BUTYRATE 0.1% TOPICAL SOLUTION	HYDROCORTISONE BUTYRATE	2	QL
HYDROCORTISONE VALERATE 0.2% CREAM	HYDROCORTISONE VALERATE	1	
HYDROCORTISONE VALERATE 0.2% OINTMENT	HYDROCORTISONE VALERATE	1	
HYDROCORTISONE-ACETIC ACID EAR DROPS	HYDROCORTISONE/ACETIC ACID	2	
HYDROCORTISONE-ACETIC ACID EAR SOLUTION	HYDROCORTISONE/ACETIC ACID	2	
HYDROMET 5 MG-1.5 MG/5 ML ORAL SOLUTION	HYDROCODONE BIT/HOMATROP ME-BR	1	QL
HYDROMORPHONE 1 MG/ML ORAL SOLUTION	HYDROMORPHONE HCL	1	PA
HYDROMORPHONE 5 MG/5 ML ORAL SOLUTION	HYDROMORPHONE HCL	1	PA
HYDROMORPHONE 3 MG SUPPOSITORY	HYDROMORPHONE HCL	1	PA
HYDROMORPHONE 2 MG TABLET	HYDROMORPHONE HCL	1	PA
HYDROMORPHONE 4 MG TABLET	HYDROMORPHONE HCL	1	PA
HYDROMORPHONE 8 MG TABLET	HYDROMORPHONE HCL	1	PA
HYDROMORPHONE ER 8 MG TABLET	HYDROMORPHONE HCL	3	PA
HYDROMORPHONE ER 12 MG TABLET	HYDROMORPHONE HCL	3	PA
HYDROMORPHONE ER 16 MG TABLET	HYDROMORPHONE HCL	3	PA
HYDROMORPHONE ER 32 MG TABLET	HYDROMORPHONE HCL	3	PA
HYDROXYCHLOROQUINE 200 MG TABLET	HYDROXYCHLOROQUINE SULFATE	1	
HYDROXYUREA 500 MG CAPSULE	HYDROXYUREA	1	
HYDROXYZINE 10 MG/5 ML ORAL SOLUTION	HYDROXYZINE HCL	1	
HYDROXYZINE 50 MG/25 ML ORAL SOLUTION	HYDROXYZINE HCL	1	
HYDROXYZINE 10 MG/5 ML SYRUP	HYDROXYZINE HCL	1	
HYDROXYZINE 10 MG TABLET	HYDROXYZINE HCL	1	
HYDROXYZINE 25 MG TABLET	HYDROXYZINE HCL	1	
HYDROXYZINE 50 MG TABLET	HYDROXYZINE HCL	1	
HYDROXYZINE PAMOATE 25 MG CAPSULE	HYDROXYZINE PAMOATE	1	

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Medication Name	Generic Name	Tier	Notes
HYDROXYZINE PAMOATE 50 MG CAPSULE	HYDROXYZINE PAMOATE	1	
HYDROXYZINE PAMOATE 100 MG CAPSULE	HYDROXYZINE PAMOATE	1	
HYOSCYAMINE 0.125 MG ODT TABLET	HYOSCYAMINE SULFATE	1	
HYOSCYAMINE 0.125 MG/5 ML ELIXIR	HYOSCYAMINE SULFATE	1	
HYOSCYAMINE 0.125 MG/ML ORAL DROPS	HYOSCYAMINE SULFATE	1	
HYOSCYAMINE 0.125 MG SUBLINGUAL TABLET	HYOSCYAMINE SULFATE	1	
HYOSCYAMINE 0.125 MG TABLET	HYOSCYAMINE SULFATE	1	
HYOSCYAMINE ER 0.375 MG TABLET	HYOSCYAMINE SULFATE	1	
HYOSCYAMINE SR 0.375 MG TABLET	HYOSCYAMINE SULFATE	1	
HYOSYNE 125 MCG/5 ML ELIXIR	HYOSCYAMINE SULFATE	1	
HYOSYNE 0.125 MG/ML ORAL DROPS	HYOSCYAMINE SULFATE	1	
HYPO NEEDLE, POLYPROPYL HUB	NEEDLES, DISPOSABLE	2	
HYPODERMIC NEEDLE, ALUM HUB	NEEDLES, DISPOSABLE	2	
IBANDRONATE 150 MG TABLET	IBANDRONATE SODIUM	1	
IBRANCE 75 MG CAPSULE	PALBOCICLIB	4	PA, QL, LDD, SRX
IBRANCE 100 MG CAPSULE	PALBOCICLIB	4	PA, QL, LDD, SRX
IBRANCE 125 MG CAPSULE	PALBOCICLIB	4	PA, QL, LDD, SRX
IBRANCE 75 MG TABLET	PALBOCICLIB	4	PA, QL, LDD, SRX
IBRANCE 100 MG TABLET	PALBOCICLIB	4	PA, QL, LDD, SRX
IBRANCE 125 MG TABLET	PALBOCICLIB	4	PA, QL, LDD, SRX
IBU 400 MG TABLET	IBUPROFEN	1	
IBU 600 MG TABLET	IBUPROFEN	1	
IBU 800 MG TABLET	IBUPROFEN	1	
IBUPROFEN 100 MG/5 ML ORAL SUSPENSION	IBUPROFEN	1	
IBUPROFEN 400 MG TABLET	IBUPROFEN	1	
IBUPROFEN 600 MG TABLET	IBUPROFEN	1	
IBUPROFEN 800 MG TABLET	IBUPROFEN	1	
ICATIBANT 30 MG/3 ML SYRINGE	ICATIBANT ACETATE	4	PA, SRX
ICLEVIA 0.15 MG-0.03 MG TABLET	LEVONORGESTREL/ETHIN.ESTRADIOL	1	
ICLUSIG 10 MG TABLET	PONATINIB HCL	4	PA, QL, LDD, SRX
ICLUSIG 15 MG TABLET	PONATINIB HCL	4	PA, QL, LDD, SRX
ICLUSIG 30 MG TABLET	PONATINIB HCL	4	PA, QL, LDD, SRX
ICLUSIG 45 MG TABLET	PONATINIB HCL	4	PA, QL, LDD, SRX
ICOSAPENT ETHYL 0.5 GM CAPSULE	ICOSAPENT ETHYL	3	PA
ICOSAPENT ETHYL 1 GM CAPSULE	ICOSAPENT ETHYL	3	PA
ICOSAPENT ETHYL 500 MG CAPSULE	ICOSAPENT ETHYL	3	PA
IHEALTH LEVEL 2 CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
ILARIS 150 MG/ML VIAL	CANAKINUMAB/PF	4	PA, LDD, SRX
ILET INFUSION KIT-INSET 23" 6MM	INSULIN INFUSION SET/CARTRIDGE	2	
ILET INFUSION KIT-INSET 32" 6MM	INSULIN INFUSION SET/CARTRIDGE	2	
ILET INFUSION-CONTACT DETACH 23" 6MM	INSULIN INFUSION SET/CARTRIDGE	2	

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Medication Name	Generic Name	Tier	Notes
IMATINIB 100 MG TABLET	IMATINIB MESYLATE	4	PA, QL, SRX
IMATINIB 400 MG TABLET	IMATINIB MESYLATE	4	PA, QL, SRX
IMBRUVICA 70 MG CAPSULE	IBRUTINIB	4	PA, QL, LDD, SRX
IMBRUVICA 140 MG CAPSULE	IBRUTINIB	4	PA, QL, LDD, SRX
IMBRUVICA 70 MG/ML ORAL SUSPENSION	IBRUTINIB	4	PA, QL, LDD, SRX
IMBRUVICA 140 MG TABLET	IBRUTINIB	4	PA, QL, LDD, SRX
IMBRUVICA 280 MG TABLET	IBRUTINIB	4	PA, QL, LDD, SRX
IMBRUVICA 420 MG TABLET	IBRUTINIB	4	PA, QL, LDD, SRX
IMIPRAMINE 10 MG TABLET	IMIPRAMINE HCL	1	
IMIPRAMINE 25 MG TABLET	IMIPRAMINE HCL	1	
IMIPRAMINE 50 MG TABLET	IMIPRAMINE HCL	1	
IMIPRAMINE PAMOATE 75 MG CAPSULE	IMIPRAMINE PAMOATE	2	
IMIPRAMINE PAMOATE 100 MG CAPSULE	IMIPRAMINE PAMOATE	2	
IMIPRAMINE PAMOATE 125 MG CAPSULE	IMIPRAMINE PAMOATE	2	
IMIPRAMINE PAMOATE 150 MG CAPSULE	IMIPRAMINE PAMOATE	2	
IMIQUIMOD 5% CREAM PACKET	IMIQUIMOD	1	
INCASSIA 0.35 MG TABLET	NORETHINDRONE	1	
IN-CHECK NASAL WITH MASK	PEAK FLOW METER	2	
IN-CHECK ORAL FLOW METER	PEAK FLOW METER	2	
INCONTROL PEN NEEDLE 29G 12MM	PEN NEEDLE, DIABETIC	2	
INCONTROL PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC	2	
INCONTROL PEN NEEDLE 31G 6MM	PEN NEEDLE, DIABETIC	2	
INCONTROL PEN NEEDLE 31G 8MM	PEN NEEDLE, DIABETIC	2	
INCONTROL PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
INCONTROL ULTICARE PEN NEEDLE 31G 6MM	PEN NEEDLE, DIABETIC	2	
INCONTROL ULTICARE PEN NEEDLE 31G 8MM	PEN NEEDLE, DIABETIC	2	
INCONTROL ULTICARE PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
INCRELEX 40 MG/4 ML VIAL	MECASERMIN	4	PA, LDD, SRX
INCRUSE ELLIPTA 62.5 MCG INHALER	UMECLIDINIUM BROMIDE	2	
INDAPAMIDE 1.25 MG TABLET	INDAPAMIDE	1	
INDAPAMIDE 2.5 MG TABLET	INDAPAMIDE	1	
INDOMETHACIN 25 MG CAPSULE	INDOMETHACIN	1	
INDOMETHACIN 50 MG CAPSULE	INDOMETHACIN	1	
INDOMETHACIN ER 75 MG CAPSULE	INDOMETHACIN	1	
INFANRIX DTAP SYRINGE	DIPH,PERTUSS(ACELL),TET PED/PF	2	
INFINITY HIGH CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, HIGH	2	
INFINITY LOW CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, LOW	2	
INFINITY NORMAL CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
INFINITY VOICE LEVEL 2 CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
INJECT-EASE SYRINGE NEEDLE INTRODUCER	INJECTOR DEVICE	2	
INLYTA 1 MG TABLET	AXITINIB	4	PA, QL, LDD, SRX

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Medication Name	Generic Name	Tier	Notes
INLYTA 5 MG TABLET	AXITINIB	4	PA, QL, LDD, SRX
INPEN (FOR HUMALOG) BLUE	INSULIN PEN,REUSABLE,BT LISPRO	2	
INPEN (FOR HUMALOG) GREY	INSULIN PEN,REUSABLE,BT LISPRO	2	
INPEN (FOR HUMALOG) PINK	INSULIN PEN,REUSABLE,BT LISPRO	2	
INPEN (NOVOLOG OR FIASP) BLUE	INSULIN PEN,REUSABLE,BT,ASPART	2	
INPEN (NOVOLOG OR FIASP) GREY	INSULIN PEN,REUSABLE,BT,ASPART	2	
INPEN (NOVOLOG OR FIASP) PINK	INSULIN PEN,REUSABLE,BT,ASPART	2	
INSUL-CAP INSULIN HOLDER	DIABETIC SUPPLIES,MISCELL	2	
INSULIN ASPART 100 UNIT/ML CARTRIDGE	INSULIN ASPART	3	QL
INSULIN ASPART 100 UNIT/ML PEN	INSULIN ASPART	3	QL
INSULIN ASPART 100 UNIT/ML VIAL	INSULIN ASPART	3	QL
INSULIN ASPART PROTAMINE MIX 70-30 PEN	INSULIN ASPART PROT/INSULN ASP	3	QL
INSULIN ASPART PROTAMINE MIX 70-30 VIAL	INSULIN ASPART PROT/INSULN ASP	3	QL
INSULIN CARTRIDGE 3 ML	INSULIN PUMP SYRINGE, 3 ML	2	
INSULIN LISPRO 100 UNIT/ML VIAL	INSULIN LISPRO	2	QL
INSULIN SYRINGE 0.3 ML	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
INSULIN SYRINGE 0.3 ML 29G 1/2"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
INSULIN SYRINGE 0.3 ML 30G 1/2"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
INSULIN SYRINGE 0.3 ML 30G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
INSULIN SYRINGE 0.3 ML 31G 1/4"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
INSULIN SYRINGE 0.3 ML 31G 1/4" (1/2)	SYRGE-NDL,INS 0.3 ML HALF MARK	2	
INSULIN SYRINGE 0.3 ML 31G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
INSULIN SYRINGE 0.5 ML	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
INSULIN SYRINGE 0.5 ML 27G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
INSULIN SYRINGE 0.5 ML 27G 13MM	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
INSULIN SYRINGE 0.5 ML 28G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
INSULIN SYRINGE 0.5 ML 28G 12.7MM	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
INSULIN SYRINGE 0.5 ML 29G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
INSULIN SYRINGE 0.5 ML 30G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
INSULIN SYRINGE 0.5 ML 30G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
INSULIN SYRINGE 0.5 ML 31G 1/4"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
INSULIN SYRINGE 0.5 ML 31G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
INSULIN SYRINGE 1 ML	SYRINGE AND NEEDLE,INSULIN,1ML	2	
INSULIN SYRINGE 1 ML 27G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
INSULIN SYRINGE 1 ML 27G 13MM	SYRINGE AND NEEDLE,INSULIN,1ML	2	
INSULIN SYRINGE 1 ML 27G 16MM	SYRINGE AND NEEDLE,INSULIN,1ML	2	
INSULIN SYRINGE 1 ML 28G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
INSULIN SYRINGE 1 ML 28G 12.7MM	SYRINGE AND NEEDLE,INSULIN,1ML	2	
INSULIN SYRINGE 1 ML 28G 13MM	SYRINGE AND NEEDLE,INSULIN,1ML	2	
INSULIN SYRINGE 1 ML 29G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
INSULIN SYRINGE 1 ML 30G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	

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Medication Name	Generic Name	Tier	Notes
INSULIN SYRINGE 1 ML 30G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
INSULIN SYRINGE 1 ML 31G 1/4"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
INSULIN SYRINGE 1 ML 31G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
INSULIN SYRINGE 1/2 ML	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
INSULIN SYRINGE 3/10 ML	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
INSULIN-EZE SYRINGE MAGNIFIER	DIABETIC SUPPLIES,MISCELL	2	
INSUPEN PEN NEEDLE 29G 1/2"	PEN NEEDLE, DIABETIC	2	
INSUPEN PEN NEEDLE 31G 3/16"	PEN NEEDLE, DIABETIC	2	
INSUPEN PEN NEEDLE 31G 5/16"	PEN NEEDLE, DIABETIC	2	
INSUPEN PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC	2	
INSUPEN PEN NEEDLE 31G 8MM	PEN NEEDLE, DIABETIC	2	
INSUPEN PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
INSUPEN PEN NEEDLE 32G 5/32"	PEN NEEDLE, DIABETIC	2	
INSUPEN PEN NEEDLE 32G 6MM	PEN NEEDLE, DIABETIC	2	
INSUPEN PEN NEEDLE 32G 8MM	PEN NEEDLE, DIABETIC	2	
INSUPEN ULTRAFINE NEEDLE 30G	PEN NEEDLE, DIABETIC	2	
INSUPEN ULTRAFINE NEEDLE 31G	PEN NEEDLE, DIABETIC	2	
INTELENCE 25 MG TABLET	ETRAVIRINE	2	SRX
IPOL VIAL	POLIOMYELITIS VACCINE, KILLED	2	
IPRATROPIUM 0.02% INHALATION SOLUTION	IPRATROPIUM BROMIDE	1	
IPRATROPIUM 0.03% NASAL SPRAY	IPRATROPIUM BROMIDE	1	
IPRATROPIUM 0.06% NASAL SPRAY	IPRATROPIUM BROMIDE	1	
IPRATROPIUM-ALBUTEROL 0.5-3(2.5) MG/3 ML INHALATION SOLUTION	IPRATROPIUM/ALBUTEROL SULFATE	1	
IRBESARTAN 75 MG TABLET	IRBESARTAN	1	
IRBESARTAN 150 MG TABLET	IRBESARTAN	1	
IRBESARTAN 300 MG TABLET	IRBESARTAN	1	
IRBESARTAN-HCTZ 150-12.5 MG TABLET	IRBESARTAN/HYDROCHLOROTHIAZIDE	1	
IRBESARTAN-HCTZ 300-12.5 MG TABLET	IRBESARTAN/HYDROCHLOROTHIAZIDE	1	
ISENTRESS 25 MG CHEWABLE TABLET	RALTEGRAVIR POTASSIUM	2	SRX
ISENTRESS 100 MG CHEWABLE TABLET	RALTEGRAVIR POTASSIUM	2	SRX
ISENTRESS 100 MG POWDER PACKET	RALTEGRAVIR POTASSIUM	2	SRX
ISENTRESS 400 MG TABLET	RALTEGRAVIR POTASSIUM	2	SRX
ISENTRESS HD 600 MG TABLET	RALTEGRAVIR POTASSIUM	2	SRX
ISIBLOOM 28 DAY TABLET	DESOGESTREL-ETHINYL ESTRADIOL	1	
ISONIAZID 50 MG/5 ML ORAL SOLUTION	ISONIAZID	1	
ISONIAZID 100 MG TABLET	ISONIAZID	1	
ISONIAZID 300 MG TABLET	ISONIAZID	1	
ISOSORBIDE DINITRATE 5 MG TABLET	ISOSORBIDE DINITRATE	1	
ISOSORBIDE DINITRATE 10 MG TABLET	ISOSORBIDE DINITRATE	1	
ISOSORBIDE DINITRATE 20 MG TABLET	ISOSORBIDE DINITRATE	1	
ISOSORBIDE DINITRATE 30 MG TABLET	ISOSORBIDE DINITRATE	1	

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Medication Name	Generic Name	Tier	Notes
ISOSORBIDE MONONITRATE 10 MG TABLET	ISOSORBIDE MONONITRATE	1	
ISOSORBIDE MONONITRATE 20 MG TABLET	ISOSORBIDE MONONITRATE	1	
ISOSORBIDE MONONITRATE ER 30 MG TABLET	ISOSORBIDE MONONITRATE	1	
ISOSORBIDE MONONITRATE ER 60 MG TABLET	ISOSORBIDE MONONITRATE	1	
ISOSORBIDE MONONITRATE ER 120 MG TABLET	ISOSORBIDE MONONITRATE	1	
ISOTRETINOIN 10 MG CAPSULE	ISOTRETINOIN	3	
ISOTRETINOIN 20 MG CAPSULE	ISOTRETINOIN	3	
ISOTRETINOIN 30 MG CAPSULE	ISOTRETINOIN	3	
ISOTRETINOIN 40 MG CAPSULE	ISOTRETINOIN	3	
ISOXSUPRINE 10 MG TABLET	ISOXSUPRINE HCL	1	
ISRADIPINE 2.5 MG CAPSULE	ISRADIPINE	1	
ISRADIPINE 5 MG CAPSULE	ISRADIPINE	1	
ITRACONAZOLE 100 MG CAPSULE	ITRACONAZOLE	2	QL
ITRACONAZOLE 10 MG/ML ORAL SOLUTION	ITRACONAZOLE	2	
ITRACONAZOLE 100 MG/10 ML ORAL SOLUTION	ITRACONAZOLE	2	
IVERMECTIN 3 MG TABLET	IVERMECTIN	1	PA
JAIMIESS 0.15-0.03-0.01 MG TABLET	L-NORGEST/E.ESTRADIOL-E.ESTRAD	1	
JAKAFI 5 MG TABLET	RUXOLITINIB PHOSPHATE	4	PA, QL, LDD, SRX
JAKAFI 10 MG TABLET	RUXOLITINIB PHOSPHATE	4	PA, QL, LDD, SRX
JAKAFI 15 MG TABLET	RUXOLITINIB PHOSPHATE	4	PA, QL, LDD, SRX
JAKAFI 20 MG TABLET	RUXOLITINIB PHOSPHATE	4	PA, QL, LDD, SRX
JAKAFI 25 MG TABLET	RUXOLITINIB PHOSPHATE	4	PA, QL, LDD, SRX
JANSSEN COVID-19 VACCINE (EUA)	COVID-19 VAC,AD26(JANSSEN)/PF	2	
JANTOVEN 1 MG TABLET	WARFARIN SODIUM	1	
JANTOVEN 2 MG TABLET	WARFARIN SODIUM	1	
JANTOVEN 2.5 MG TABLET	WARFARIN SODIUM	1	
JANTOVEN 3 MG TABLET	WARFARIN SODIUM	1	
JANTOVEN 4 MG TABLET	WARFARIN SODIUM	1	
JANTOVEN 5 MG TABLET	WARFARIN SODIUM	1	
JANTOVEN 6 MG TABLET	WARFARIN SODIUM	1	
JANTOVEN 7.5 MG TABLET	WARFARIN SODIUM	1	
JANTOVEN 10 MG TABLET	WARFARIN SODIUM	1	
JANUMET 50-500 MG TABLET	SITAGLIPTIN PHOS/METFORMIN HCL	2	QL
JANUMET 50-1,000 MG TABLET	SITAGLIPTIN PHOS/METFORMIN HCL	2	QL
JANUMET XR 50-500 MG TABLET	SITAGLIPTIN PHOS/METFORMIN HCL	2	QL
JANUMET XR 50-1,000 MG TABLET	SITAGLIPTIN PHOS/METFORMIN HCL	2	QL
JANUMET XR 100-1,000 MG TABLET	SITAGLIPTIN PHOS/METFORMIN HCL	2	QL
JANUVIA 25 MG TABLET	SITAGLIPTIN PHOSPHATE	2	QL
JANUVIA 50 MG TABLET	SITAGLIPTIN PHOSPHATE	2	QL
JANUVIA 100 MG TABLET	SITAGLIPTIN PHOSPHATE	2	QL
JARDIANCE 10 MG TABLET	EMPAGLIFLOZIN	2	QL

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Medication Name	Generic Name	Tier	Notes
JARDIANCE 25 MG TABLET	EMPAGLIFLOZIN	2	QL
JASMIEL 3 MG-0.02 MG TABLET	ETHINYL ESTRADIOL/DROSPIRENONE	1	
JENCYCLA 0.35 MG TABLET	NORETHINDRONE	1	
JENTADUETO 2.5 MG-500 MG TABLET	LINAGLIPTIN/METFORMIN HCL	2	QL
JENTADUETO 2.5 MG-850 MG TABLET	LINAGLIPTIN/METFORMIN HCL	2	QL
JENTADUETO 2.5 MG-1000 MG TABLET	LINAGLIPTIN/METFORMIN HCL	2	QL
JENTADUETO XR 2.5 MG-1,000 MG TABLET	LINAGLIPTIN/METFORMIN HCL	2	QL
JENTADUETO XR 5 MG-1,000 MG TABLET	LINAGLIPTIN/METFORMIN HCL	2	QL
JINTELI 1 MG-5 MCG TABLET	NORETHINDRONE AC/ETH ESTRADIOL	1	
JOLESSA 0.15 MG-0.03 MG TABLET	LEVONORGESTREL/ETHIN.ESTRADIOL	1	
JOYEAUX-28 TABLET	LEVONORGEST/ETH.ESTRADIOL/IRON	1	
JULEBER 28 DAY TABLET	DESOGESTREL-ETHINYL ESTRADIOL	1	
JULUCA 50-25 MG TABLET	DOLUTEGRAVIR/RILPIVIRINE	3	QL, SRX
JUNEL 1 MG-20 MCG TABLET	NORETHINDRONE AC/ETH ESTRADIOL	1	
JUNEL 1.5 MG-30 MCG TABLET	NORETHINDRONE AC/ETH ESTRADIOL	1	
JUNEL FE 1 MG-20 MCG TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
JUNEL FE 1.5 MG-30 MCG TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
JUNEL FE 24 TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
JYNNEOS 0.5 ML VIAL	SMALLPOX AND MPOX LIVE VACC/PF	2	
KAITLIB FE 0.8-0.025 MG CHEWABLE TABLET	NORETH-ETHINYL ESTRADIOL/IRON	1	
KALLIGA 28 DAY TABLET	DESOGESTREL-ETHINYL ESTRADIOL	1	
KARIVA 28 DAY TABLET	DESOG-E.ESTRADIOL/E.ESTRADIOL	1	
KELNOR 1-35 28 TABLET	ETHYNODIOL D-ETHINYL ESTRADIOL	1	
KELNOR 1-50 TABLET	ETHYNODIOL D-ETHINYL ESTRADIOL	1	
KESIMPTA 20 MG/0.4 ML PEN	OFATUMUMAB	4	PA, SRX
KETOCONAZOLE 2% CREAM	KETOCONAZOLE	1	
KETOCONAZOLE 2% SHAMPOO	KETOCONAZOLE	1	
KETOCONAZOLE 200 MG TABLET	KETOCONAZOLE	1	
KETO-DIASTIX REAGENT TEST STRIP	URINE GLUCOSE-ACET TEST STRIP	2	
KETONE TEST STRIP	URINE ACETONE TEST STRIPS	2	
KETOPROFEN 50 MG CAPSULE	KETOPROFEN	2	
KETOPROFEN 75 MG CAPSULE	KETOPROFEN	2	
KETOPROFEN ER 200 MG CAPSULE	KETOPROFEN	2	
KETOROLAC 0.4% EYE DROPS	KETOROLAC TROMETHAMINE	1	
KETOROLAC 0.5% EYE DROPS	KETOROLAC TROMETHAMINE	1	
KETOROLAC 10 MG TABLET	KETOROLAC TROMETHAMINE	1	QL
KETOSTIX REAGENT TEST STRIP	URINE ACETONE TEST STRIPS	2	
KINERET 100 MG/0.67 ML SYRINGE	ANAKINRA	4	PA, QL, LDD, SRX
KINRAY INSULIN SYRINGE 1 ML 31G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
KINRAY SYRINGE 0.3 ML 31G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
KINRAY SYRINGE 0.5 ML 31G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	

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Medication Name	Generic Name	Tier	Notes
KINRIX TIP-LOK SYRINGE	DIPH,PERTUS(ACEL),TET,POLIO/PF	2	
KIONEX 15 GM/60 ML ORAL SUSPENSION	SODIUM POLYSTYRENE SULFON/SORB	2	
KISQALI 200 MG DAILY DOSE TABLET	RIBOCICLIB SUCCINATE	4	PA, QL, SRX
KISQALI 400 MG DAILY DOSE TABLET	RIBOCICLIB SUCCINATE	4	PA, QL, SRX
KISQALI 600 MG DAILY DOSE TABLET	RIBOCICLIB SUCCINATE	4	PA, QL, SRX
KLAYESTA 100,000 UNIT/GM POWDER	NYSTATIN	1	
KLOR-CON 8 MEQ TABLET	POTASSIUM CHLORIDE	1	
KLOR-CON 10 MEQ TABLET	POTASSIUM CHLORIDE	1	
KLOR-CON 20 MEQ PACKET	POTASSIUM CHLORIDE	1	
KLOR-CON M10 TABLET	POTASSIUM CHLORIDE	1	
KLOR-CON M15 TABLET	POTASSIUM CHLORIDE	3	
KLOR-CON M20 TABLET	POTASSIUM CHLORIDE	1	
KLOXXADO 8 MG NASAL SPRAY	NALOXONE HCL	2	
KMART VALU PLUS SYRINGE 1/2 ML	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
KOURZEQ 0.1% TOOTHPASTE	TRIAMCINOLONE ACETONIDE	1	
K-PHOS #2 TABLET	SOD PHOS,M-B/K PHOS,MONOB	3	
K-PHOS ORIGINAL TABLET	POTASSIUM PHOSPHATE,MONOBASIC	3	
KRO INSULIN SYRINGE 0.3 ML 29G 1/2"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
KRO INSULIN SYRINGE 0.5 ML 31G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
KRO INSULIN SYRINGE 1 ML 30G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
KRO PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC	2	
KRO PEN NEEDLE 31G 6MM	PEN NEEDLE, DIABETIC	2	
KRO PEN NEEDLE 31G 8MM	PEN NEEDLE, DIABETIC	2	
KRO PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
KRO PEN NEEDLE 33G 4MM	PEN NEEDLE, DIABETIC	2	
KROGER INSULIN SYRINGE 0.3 ML 30G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
KROGER INSULIN SYRINGE 0.5 ML 29G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
KROGER INSULIN SYRINGE 1 ML 29G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
KROGER INSULIN SYRINGE 1 ML 31G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
KROGER PEN NEEDLE 31G 5/16"	PEN NEEDLE, DIABETIC	2	
KROGER SYRINGE 0.3 ML 31G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
KROGER SYRINGE 0.5 ML 30G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
KURVELO-28 TABLET	LEVONORGESTREL/ETHIN.ESTRADIOL	1	
KYLEENA 19.5 MG SYSTEM	LEVONORGESTREL	1	LDD, SRX
LABETALOL 100 MG TABLET	LABETALOL HCL	1	
LABETALOL 200 MG TABLET	LABETALOL HCL	1	
LABETALOL 300 MG TABLET	LABETALOL HCL	1	
LABSTIX REAGENT TEST STRIP	URINE MULTIPLE TEST STRIPS	2	
LACOSAMIDE 10 MG/ML ORAL SOLUTION	LACOSAMIDE	2	QL
LACOSAMIDE 50 MG/5 ML ORAL SOLUTION	LACOSAMIDE	2	QL
LACOSAMIDE 100 MG/10 ML ORAL SOLUTION	LACOSAMIDE	2	QL

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Medication Name	Generic Name	Tier	Notes
LACOSAMIDE 50 MG TABLET	LACOSAMIDE	2	QL
LACOSAMIDE 100 MG TABLET	LACOSAMIDE	2	QL
LACOSAMIDE 150 MG TABLET	LACOSAMIDE	2	QL
LACOSAMIDE 200 MG TABLET	LACOSAMIDE	2	QL
LACRISERT 5 MG EYE INSERT	HYDROXYPROPYL CELLULOSE	3	
LACTATED RINGERS IRRIGATION	RINGER'S SOLUTION,LACTATED	1	
LACTULOSE 10 GM/15 ML ORAL SOLUTION	LACTULOSE	1	
LACTULOSE 20 GM/30 ML ORAL SOLUTION	LACTULOSE	1	
LAMIVUDINE 10 MG/ML ORAL SOLUTION	LAMIVUDINE	1	SRX
LAMIVUDINE 150 MG TABLET	LAMIVUDINE	1	SRX
LAMIVUDINE 300 MG TABLET	LAMIVUDINE	1	SRX
LAMIVUDINE HBV 100 MG TABLET	LAMIVUDINE	3	SRX
LAMIVUDINE-ZIDOVUDINE TABLET	LAMIVUDINE/ZIDOVUDINE	1	SRX
LAMOTRIGINE 5 MG DISPERSIBLE TABLET	LAMOTRIGINE	1	
LAMOTRIGINE 25 MG DISPERSIBLE TABLET	LAMOTRIGINE	1	
LAMOTRIGINE ODT KIT (BLUE)	LAMOTRIGINE	1	
LAMOTRIGINE ODT KIT (GREEN)	LAMOTRIGINE	1	
LAMOTRIGINE ODT KIT (ORANGE)	LAMOTRIGINE	1	
LAMOTRIGINE 25 MG ODT TABLET	LAMOTRIGINE	2	
LAMOTRIGINE 50 MG ODT TABLET	LAMOTRIGINE	2	
LAMOTRIGINE 100 MG ODT TABLET	LAMOTRIGINE	2	
LAMOTRIGINE 200 MG ODT TABLET	LAMOTRIGINE	2	
LAMOTRIGINE 25 MG TABLET	LAMOTRIGINE	1	
LAMOTRIGINE 100 MG TABLET	LAMOTRIGINE	1	
LAMOTRIGINE 150 MG TABLET	LAMOTRIGINE	1	
LAMOTRIGINE 200 MG TABLET	LAMOTRIGINE	1	
LAMOTRIGINE TABLET STARTER KIT-BLUE	LAMOTRIGINE	1	
LAMOTRIGINE TABLET STARTER KIT-GREEN	LAMOTRIGINE	1	
LAMOTRIGINE TABLET STARTER KIT-ORANGE	LAMOTRIGINE	1	
LAMOTRIGINE ER 25 MG TABLET	LAMOTRIGINE	2	
LAMOTRIGINE ER 50 MG TABLET	LAMOTRIGINE	2	
LAMOTRIGINE ER 100 MG TABLET	LAMOTRIGINE	2	
LAMOTRIGINE ER 200 MG TABLET	LAMOTRIGINE	2	
LAMOTRIGINE ER 250 MG TABLET	LAMOTRIGINE	2	
LAMOTRIGINE ER 300 MG TABLET	LAMOTRIGINE	2	
LANSOPRAZOLE DR 15 MG CAPSULE	LANSOPRAZOLE	1	QL
LANSOPRAZOLE DR 30 MG CAPSULE	LANSOPRAZOLE	1	QL
LANSOPRAZOLE-AMOXICILLIN-CLARITHROMYCIN	LANSOPRAZOLE/AMOXICILN/CLARITH	2	
LANTHANUM 500 MG CHEWABLE TABLET	LANTHANUM CARBONATE	3	
LANTHANUM 750 MG CHEWABLE TABLET	LANTHANUM CARBONATE	3	
LANTHANUM 1,000 MG CHEWABLE TABLET	LANTHANUM CARBONATE	3	

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Medication Name	Generic Name	Tier	Notes
LAPATINIB 250 MG TABLET	LAPATINIB DITOSYLATE	4	PA, QL, SRX
LARIN 1.5 MG-30 MCG TABLET	NORETHINDRONE AC/ETH ESTRADIOL	1	
LARIN 21 1-20 TABLET	NORETHINDRONE AC/ETH ESTRADIOL	1	
LARIN 24 FE 1 MG-20 MCG TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
LARIN FE 1.5-30 TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
LARIN FE 1-20 TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
LATANOPROST 0.005% EYE DROPS	LATANOPROST	1	
LAYOLIS FE CHEWABLE TABLET	NORETH-ETHINYL ESTRADIOL/IRON	3	
LEADER INSULIN SYRINGE 0.3 ML	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
LEADER INSULIN SYRINGE 0.3 ML 29G 1/2"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
LEADER INSULIN SYRINGE 0.5 ML 28G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
LEADER INSULIN SYRINGE 0.5 ML 29G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
LEADER INSULIN SYRINGE 0.5 ML 30G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
LEADER INSULIN SYRINGE 1 ML 28G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
LEADER INSULIN SYRINGE 1 ML 29G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
LEADER INSULIN SYRINGE 1 ML 30G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
LEADER INSULIN SYRINGE 1 ML 31G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
LEADER PEN NEEDLE 29G 12MM	PEN NEEDLE, DIABETIC	2	
LEADER SYRINGE 0.3 ML 31G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
LEADER SYRINGE 0.5 ML 31G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
LEDIPASVIR-SOFOSBUVIR 90-400 MG TABLET	LEDIPASVIR/SOFOSBUVIR	4	PA, QL, SRX
LEENA 28 TABLET	NORETHINDRONE-ETHIN. ESTRADIOL	1	
LEFLUNOMIDE 10 MG TABLET	LEFLUNOMIDE	1	
LEFLUNOMIDE 20 MG TABLET	LEFLUNOMIDE	1	
LENALIDOMIDE 2.5 MG CAPSULE	LENALIDOMIDE	4	PA, QL, LDD, SRX
LENALIDOMIDE 5 MG CAPSULE	LENALIDOMIDE	4	PA, QL, LDD, SRX
LENALIDOMIDE 10 MG CAPSULE	LENALIDOMIDE	4	PA, QL, LDD, SRX
LENALIDOMIDE 15 MG CAPSULE	LENALIDOMIDE	4	PA, QL, LDD, SRX
LENALIDOMIDE 20 MG CAPSULE	LENALIDOMIDE	4	PA, QL, LDD, SRX
LENALIDOMIDE 25 MG CAPSULE	LENALIDOMIDE	4	PA, QL, LDD, SRX
LENVIMA 4 MG CAPSULE	LENVATINIB MESYLATE	4	PA, QL, LDD, SRX
LENVIMA 8 MG DAILY DOSE	LENVATINIB MESYLATE	4	PA, QL, LDD, SRX
LENVIMA 10 MG DAILY DOSE	LENVATINIB MESYLATE	4	PA, QL, LDD, SRX
LENVIMA 12 MG DAILY DOSE	LENVATINIB MESYLATE	4	PA, QL, LDD, SRX
LENVIMA 14 MG DAILY DOSE	LENVATINIB MESYLATE	4	PA, QL, LDD, SRX
LENVIMA 18 MG DAILY DOSE	LENVATINIB MESYLATE	4	PA, QL, LDD, SRX
LENVIMA 20 MG DAILY DOSE	LENVATINIB MESYLATE	4	PA, QL, LDD, SRX
LENVIMA 24 MG DAILY DOSE	LENVATINIB MESYLATE	4	PA, QL, LDD, SRX
LESSINA-28 TABLET	LEVONORGESTREL/ETHIN.ESTRADIOL	1	
LETROZOLE 2.5 MG TABLET	LETROZOLE	1	
LEUCOVORIN 5 MG TABLET	LEUCOVORIN CALCIUM	1	

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Medication Name	Generic Name	Tier	Notes
LEUCOVORIN 10 MG TABLET	LEUCOVORIN CALCIUM	1	
LEUCOVORIN 15 MG TABLET	LEUCOVORIN CALCIUM	1	
LEUCOVORIN 25 MG TABLET	LEUCOVORIN CALCIUM	1	
LEUKERAN 2 MG TABLET	CHLORAMBUCIL	3	
LEUKINE 250 MCG VIAL	SARGRAMOSTIM	4	SRX
LEUPROLIDE 2 WEEK 14 MG/2.8 ML KIT	LEUPROLIDE ACETATE	4	PA, SRX
LEVALBUTEROL 1.25 MG/0.5 INHALATION CONCENTRATE	LEVALBUTEROL HCL	2	
LEVALBUTEROL 0.31 MG/3 ML INHALATION SOLUTION	LEVALBUTEROL HCL	1	
LEVALBUTEROL 0.63 MG/3 ML INHALATION SOLUTION	LEVALBUTEROL HCL	1	
LEVALBUTEROL 1.25 MG/3 ML INHALATION SOLUTION	LEVALBUTEROL HCL	1	
LEVALBUTEROL TARTRATE HFA 45 MCG INHALER	LEVALBUTEROL TARTRATE	1	QL
LEVETIRACETAM 100 MG/ML ORAL SOLUTION	LEVETIRACETAM	1	
LEVETIRACETAM 500 MG/5 ML ORAL SOLUTION	LEVETIRACETAM	1	
LEVETIRACETAM 1,000 MG/10 ML ORAL SOLUTION	LEVETIRACETAM	1	
LEVETIRACETAM 250 MG TABLET	LEVETIRACETAM	1	
LEVETIRACETAM 500 MG TABLET	LEVETIRACETAM	1	
LEVETIRACETAM 750 MG TABLET	LEVETIRACETAM	1	
LEVETIRACETAM 1,000 MG TABLET	LEVETIRACETAM	1	
LEVETIRACETAM ER 500 MG TABLET	LEVETIRACETAM	1	
LEVETIRACETAM ER 750 MG TABLET	LEVETIRACETAM	1	
LEVOBUNOLOL 0.5% EYE DROPS	LEVOBUNOLOL HCL	1	
LEVOCARNITINE 500 MG/5 ML ORAL SOLUTION	LEVOCARNITINE (WITH SUGAR)	1	
LEVOCARNITINE 1 G/10 ML ORAL SOLUTION	LEVOCARNITINE (WITH SUGAR)	1	
LEVOCARNITINE 330 MG TABLET	LEVOCARNITINE	1	
LEVOCARNITINE SF 1 G/10 ML ORAL SOLUTION	LEVOCARNITINE	1	
LEVOCETIRIZINE 2.5 MG/5 ML ORAL SOLUTION	LEVOCETIRIZINE DIHYDROCHLORIDE	1	
LEVOCETIRIZINE 5 MG TABLET	LEVOCETIRIZINE DIHYDROCHLORIDE	1	
LEVOFLOXACIN 0.5% EYE DROPS	LEVOFLOXACIN	1	
LEVOFLOXACIN 1.5% EYE DROPS	LEVOFLOXACIN	1	
LEVOFLOXACIN 25 MG/ML ORAL SOLUTION	LEVOFLOXACIN	1	
LEVOFLOXACIN 250 MG TABLET	LEVOFLOXACIN	1	
LEVOFLOXACIN 500 MG TABLET	LEVOFLOXACIN	1	
LEVOFLOXACIN 750 MG TABLET	LEVOFLOXACIN	1	
LEVONEST-28 TABLET	LEVONORGESTREL/ETHIN.ESTRADIOL	1	
LEVONORGESTREL 0.15 MG-ETHINYL ESTRADIOL 20-25-30 MCG TABLET	L-NORGEST/E.ESTRADIOL-E.ESTRAD	1	
LEVONORGESTREL 1.5 MG TABLET	LEVONORGESTREL	1	
LEVONORGESTREL-ETHINYL ESTRADIOL 0.09-0.02 MG TABLET	LEVONORGESTREL/ETHIN.ESTRADIOL	1	
LEVONORGESTREL-ETHINYL ESTRADIOL 0.1-0.02 MG TABLET	LEVONORGESTREL/ETHIN.ESTRADIOL	1	
LEVONORGESTREL-ETHINYL ESTRADIOL 0.1-0.02-0.01 TABLET	L-NORGEST/E.ESTRADIOL-E.ESTRAD	1	
LEVONORGESTREL-ETHINYL ESTRADIOL 0.15-0.03 TABLET	LEVONORGESTREL/ETHIN.ESTRADIOL	1	
LEVONORGESTREL-ETHINYL ESTRADIOL 0.15-0.03-0.01 TABLET	L-NORGEST/E.ESTRADIOL-E.ESTRAD	1	

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Medication Name	Generic Name	Tier	Notes
LEVONORGESTREL-ETHINYL ESTRADIOL TRIPHASIC TABLET	LEVONORGESTREL/ETHIN.ESTRADIOL	1	
LEVONORGESTREL-ETHINYL ESTRADIOL-FE BISGLYCINATE 0.1-0.02-36 TABLET	LEVONORGEST/ETH.ESTRADIOL/IRON	1	
LEVORA-28 TABLET	LEVONORGESTREL/ETHIN.ESTRADIOL	1	
LEVORPHANOL 2 MG TABLET	LEVORPHANOL TARTRATE	4	PA
LEVORPHANOL 3 MG TABLET	LEVORPHANOL TARTRATE	4	PA
LEVO-T 25 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVO-T 50 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVO-T 75 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVO-T 88 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVO-T 100 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVO-T 112 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVO-T 125 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVO-T 137 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVO-T 150 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVO-T 175 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVO-T 200 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVO-T 300 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVOTHYROXINE 25 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVOTHYROXINE 50 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVOTHYROXINE 75 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVOTHYROXINE 88 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVOTHYROXINE 100 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVOTHYROXINE 112 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVOTHYROXINE 125 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVOTHYROXINE 137 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVOTHYROXINE 150 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVOTHYROXINE 175 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVOTHYROXINE 200 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVOTHYROXINE 300 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVOXYL 25 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVOXYL 50 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVOXYL 75 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVOXYL 88 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVOXYL 100 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVOXYL 112 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVOXYL 125 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVOXYL 137 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVOXYL 150 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVOXYL 175 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVOXYL 200 MCG TABLET	LEVOTHYROXINE SODIUM	1	
LEVULAN KERASTICK 20%	AMINOLEVULINIC ACID HCL	3	SRX

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Medication Name	Generic Name	Tier	Notes
L-GLUTAMINE 5 GRAM POWDER PACKET	GLUTAMINE	4	PA
LIDOCAINE 2% JELLY	LIDOCAINE HCL	1	
LIDOCAINE 2% JELLY URO-JET	LIDOCAINE HCL	1	
LIDOCAINE 2% JELLY URO-JET AC	LIDOCAINE HCL	1	
LIDOCAINE 2% VISCOUS ORAL SOLUTION	LIDOCAINE HCL	1	
LIDOCAINE 4% ORAL SOLUTION	LIDOCAINE HCL	1	
LIDOCAINE 5% OINTMENT	LIDOCAINE	1	QL
LIDOCAINE 5% PATCH	LIDOCAINE	1	
LIDOCAINE-PRILOCAINE CREAM	LIDOCAINE/PRILOCAINE	1	
LIDOCAN III 5% PATCH	LIDOCAINE	1	
LIDOCAN IV 5% PATCH	LIDOCAINE	1	
LIDOCAN V 5% PATCH	LIDOCAINE	1	
LIFESHIELD BLUNT CANNULA	SYRINGE WITH CANNULA, 3 ML	2	
LILETTA 52 MG SYSTEM	LEVONORGESTREL	1	LDD, SRX
LINDANE 1% SHAMPOO	LINDANE	1	
LINEZOLID 100 MG/5 ML ORAL SUSPENSION	LINEZOLID	3	PA
LINEZOLID 600 MG TABLET	LINEZOLID	2	PA
LINZESS 72 MCG CAPSULE	LINACLOTIDE	3	QL
LINZESS 145 MCG CAPSULE	LINACLOTIDE	3	QL
LINZESS 290 MCG CAPSULE	LINACLOTIDE	3	QL
LIOTHYRONINE 5 MCG TABLET	LIOTHYRONINE SODIUM	1	
LIOTHYRONINE 25 MCG TABLET	LIOTHYRONINE SODIUM	1	
LIOTHYRONINE 50 MCG TABLET	LIOTHYRONINE SODIUM	1	
LIRAGLUTIDE 2-PAK 18 MG/3 ML PEN	LIRAGLUTIDE	2	PA, QL
LIRAGLUTIDE 3-PAK 18 MG/3 ML PEN	LIRAGLUTIDE	2	PA, QL
LISDEXAMFETAMINE 10 MG CAPSULE	LISDEXAMFETAMINE DIMESYLATE	1	PA, QL
LISDEXAMFETAMINE 20 MG CAPSULE	LISDEXAMFETAMINE DIMESYLATE	1	PA, QL
LISDEXAMFETAMINE 30 MG CAPSULE	LISDEXAMFETAMINE DIMESYLATE	1	PA, QL
LISDEXAMFETAMINE 40 MG CAPSULE	LISDEXAMFETAMINE DIMESYLATE	1	PA, QL
LISDEXAMFETAMINE 50 MG CAPSULE	LISDEXAMFETAMINE DIMESYLATE	1	PA, QL
LISDEXAMFETAMINE 60 MG CAPSULE	LISDEXAMFETAMINE DIMESYLATE	1	PA, QL
LISDEXAMFETAMINE 70 MG CAPSULE	LISDEXAMFETAMINE DIMESYLATE	1	PA, QL
LISDEXAMFETAMINE 10 MG CHEWABLE TABLET	LISDEXAMFETAMINE DIMESYLATE	1	PA, QL
LISDEXAMFETAMINE 20 MG CHEWABLE TABLET	LISDEXAMFETAMINE DIMESYLATE	1	PA, QL
LISDEXAMFETAMINE 30 MG CHEWABLE TABLET	LISDEXAMFETAMINE DIMESYLATE	1	PA, QL
LISDEXAMFETAMINE 40 MG CHEWABLE TABLET	LISDEXAMFETAMINE DIMESYLATE	1	PA, QL
LISDEXAMFETAMINE 50 MG CHEWABLE TABLET	LISDEXAMFETAMINE DIMESYLATE	1	PA, QL
LISDEXAMFETAMINE 60 MG CHEWABLE TABLET	LISDEXAMFETAMINE DIMESYLATE	1	PA, QL
LISINOPRIL 2.5 MG TABLET	LISINOPRIL	1	
LISINOPRIL 5 MG TABLET	LISINOPRIL	1	
LISINOPRIL 10 MG TABLET	LISINOPRIL	1	

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Medication Name	Generic Name	Tier	Notes
LISINOPRIL 20 MG TABLET	LISINOPRIL	1	
LISINOPRIL 30 MG TABLET	LISINOPRIL	1	
LISINOPRIL 40 MG TABLET	LISINOPRIL	1	
LISINOPRIL-HCTZ 10-12.5 MG TABLET	LISINOPRIL/HYDROCHLOROTHIAZIDE	1	
LISINOPRIL-HCTZ 20-12.5 MG TABLET	LISINOPRIL/HYDROCHLOROTHIAZIDE	1	
LISINOPRIL-HCTZ 20-25 MG TABLET	LISINOPRIL/HYDROCHLOROTHIAZIDE	1	
LITE TOUCH INSULIN SYRINGE 0.3 ML	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
LITE TOUCH INSULIN SYRINGE 0.5 ML	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
LITE TOUCH INSULIN SYRINGE 1 ML	SYRINGE AND NEEDLE,INSULIN,1ML	2	
LITE TOUCH PEN NEEDLE 29G	PEN NEEDLE, DIABETIC	2	
LITE TOUCH PEN NEEDLE 31G	PEN NEEDLE, DIABETIC	2	
LITE TOUCH PEN NEEDLE 31G 1/4"	PEN NEEDLE, DIABETIC	2	
LITEAIRE MDI CHAMBER	INHALER, ASSIST DEVICES	2	QL
LITETOUCH INSULIN SYRINGE 0.3 ML 29G 1/2"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
LITETOUCH INSULIN SYRINGE 0.3 ML 30G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
LITETOUCH INSULIN SYRINGE 0.3 ML 31G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
LITETOUCH INSULIN SYRINGE 0.5 ML 31G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
LITETOUCH LARGE MASK	INHALER,ASSIST DEVICE,ACCESORY	2	QL
LITETOUCH MEDIUM MASK	INHALER,ASSIST DEVICE,ACCESORY	2	QL
LITETOUCH SMALL MASK	INHALER,ASSIST DEVICE,ACCESORY	2	QL
LITETOUCH SYRINGE 0.5 ML 28G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
LITETOUCH SYRINGE 0.5 ML 29G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
LITETOUCH SYRINGE 0.5 ML 30G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
LITETOUCH SYRINGE 1 ML 28G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
LITETOUCH SYRINGE 1 ML 29G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
LITETOUCH SYRINGE 1 ML 30G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
LITHIUM 8 MEQ/5 ML ORAL SOLUTION	LITHIUM CITRATE	1	
LITHIUM CARBONATE 150 MG CAPSULE	LITHIUM CARBONATE	1	
LITHIUM CARBONATE 300 MG CAPSULE	LITHIUM CARBONATE	1	
LITHIUM CARBONATE 600 MG CAPSULE	LITHIUM CARBONATE	1	
LITHIUM CARBONATE 300 MG TABLET	LITHIUM CARBONATE	1	
LITHIUM CARBONATE ER 300 MG TABLET	LITHIUM CARBONATE	1	
LITHIUM CARBONATE ER 450 MG TABLET	LITHIUM CARBONATE	1	
LITHOSTAT 250 MG TABLET	ACETOHYDROXAMIC ACID	3	
LIVE BETTER PEN NEEDLE 8MM	PEN NEEDLE, DIABETIC	2	
LO LOESTRIN FE 1-10 TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
LOFEXIDINE 0.18 MG TABLET	LOFEXIDINE HCL	1	QL
LOJAIMIESS 0.1-0.02-0.01 TABLET	L-NORGEST/E.ESTRADIOL-E.ESTRAD	1	
LOKELMA 5 GRAM POWDER PACKET	SODIUM ZIRCONIUM CYCLOSILICATE	3	
LOKELMA 10 GRAM POWDER PACKET	SODIUM ZIRCONIUM CYCLOSILICATE	3	
LONSURF 15 MG-6.14 MG TABLET	TRIFLURIDINE/TIPIRACIL HCL	4	PA, LDD, SRX

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Medication Name	Generic Name	Tier	Notes
LONSURF 20 MG-8.19 MG TABLET	TRIFLURIDINE/TIPIRACIL HCL	4	PA, LDD, SRX
LOPERAMIDE 2 MG CAPSULE	LOPERAMIDE HCL	1	
LOPINAVIR-RITONAVIR 80-20 MG/ML ORAL SOLUTION	LOPINAVIR/RITONAVIR	1	SRX
LOPINAVIR-RITONAVIR 100-25 MG TABLET	LOPINAVIR/RITONAVIR	1	SRX
LOPINAVIR-RITONAVIR 200-50 MG TABLET	LOPINAVIR/RITONAVIR	1	SRX
LORAZEPAM 2 MG/ML ORAL CONCENTRATE	LORAZEPAM	1	
LORAZEPAM 0.5 MG TABLET	LORAZEPAM	1	
LORAZEPAM 1 MG TABLET	LORAZEPAM	1	
LORAZEPAM 2 MG TABLET	LORAZEPAM	1	
LORAZEPAM INTENSOL 2 MG/ML ORAL CONCENTRATE	LORAZEPAM	1	
LORTAB 10 MG-300 MG/15 ML ELIXIR	HYDROCODONE/ACETAMINOPHEN	1	PA
LORYNA 3 MG-0.02 MG TABLET	ETHINYL ESTRADIOL/DROSPIRENONE	1	
LOSARTAN 25 MG TABLET	LOSARTAN POTASSIUM	1	
LOSARTAN 50 MG TABLET	LOSARTAN POTASSIUM	1	
LOSARTAN 100 MG TABLET	LOSARTAN POTASSIUM	1	
LOSARTAN-HCTZ 50-12.5 MG TABLET	LOSARTAN/HYDROCHLOROTHIAZIDE	1	
LOSARTAN-HCTZ 100-12.5 MG TABLET	LOSARTAN/HYDROCHLOROTHIAZIDE	1	
LOSARTAN-HCTZ 100-25 MG TABLET	LOSARTAN/HYDROCHLOROTHIAZIDE	1	
LOTEPREDNOL 0.5% DROPS	LOTEPREDNOL ETABONATE	2	
LOTEPREDNOL 0.5% EYE GEL	LOTEPREDNOL ETABONATE	2	
LOVASTATIN 10 MG TABLET	LOVASTATIN	1	
LOVASTATIN 20 MG TABLET	LOVASTATIN	1	
LOVASTATIN 40 MG TABLET	LOVASTATIN	1	
LOW-OGESTREL-28 TABLET	NORGESTREL-ETHINYL ESTRADIOL	1	
LOXAPINE 5 MG CAPSULE	LOXAPINE SUCCINATE	1	
LOXAPINE 10 MG CAPSULE	LOXAPINE SUCCINATE	1	
LOXAPINE 25 MG CAPSULE	LOXAPINE SUCCINATE	1	
LOXAPINE 50 MG CAPSULE	LOXAPINE SUCCINATE	1	
LO-ZUMANDIMINE 3 MG-0.02 MG TABLET	ETHINYL ESTRADIOL/DROSPIRENONE	1	
LUBIPROSTONE 8 MCG CAPSULE	LUBIPROSTONE	1	
LUBIPROSTONE 24 MCG CAPSULE	LUBIPROSTONE	1	
LUCEMYRA 0.18 MG TABLET	LOFEXIDINE HCL	2	QL
LURASIDONE 20 MG TABLET	LURASIDONE HCL	3	QL
LURASIDONE 40 MG TABLET	LURASIDONE HCL	3	QL
LURASIDONE 60 MG TABLET	LURASIDONE HCL	3	QL
LURASIDONE 80 MG TABLET	LURASIDONE HCL	3	QL
LURASIDONE 120 MG TABLET	LURASIDONE HCL	3	QL
LUTERA-28 TABLET	LEVONORGESTREL/ETHIN.ESTRADIOL	1	
LYLEQ 0.35 MG TABLET	NORETHINDRONE	1	
LYLLANA 0.025 MG PATCH	ESTRADIOL	1	QL
LYLLANA 0.0375 MG PATCH	ESTRADIOL	1	QL

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Medication Name	Generic Name	Tier	Notes
LYLLANA 0.05 MG PATCH	ESTRADIOL	1	QL
LYLLANA 0.075 MG PATCH	ESTRADIOL	1	QL
LYLLANA 0.1 MG PATCH	ESTRADIOL	1	QL
LYNPARZA 100 MG TABLET	OLAPARIB	4	PA, QL, LDD, SRX
LYNPARZA 150 MG TABLET	OLAPARIB	4	PA, QL, LDD, SRX
LYSODREN 500 MG TABLET	MITOTANE	3	LDD
LYZA 0.35 MG TABLET	NORETHINDRONE	1	
MAGELLAN INSULIN SYRINGE 0.3 ML	SYRINGE,NEEDLE,INSULN,SF,0.3ML	2	
MAGELLAN INSULIN SYRINGE 0.5 ML	SYRINGE,NEEDLE,INSULN,SF 0.5ML	2	
MAGELLAN INSULIN SYRINGE 1 ML	SYRINGE,NEEDLE,INSULN,SAFE,1ML	2	
MALATHION 0.5% LOTION	MALATHION	2	
MARLISSA-28 TABLET	LEVONORGESTREL/ETHIN.ESTRADIOL	1	
MARPLAN 10 MG TABLET	ISOCARBOXAZID	3	
MATZIM LA 180 MG TABLET	DILTIAZEM HCL	2	
MATZIM LA 240 MG TABLET	DILTIAZEM HCL	2	
MATZIM LA 300 MG TABLET	DILTIAZEM HCL	2	
MATZIM LA 360 MG TABLET	DILTIAZEM HCL	2	
MATZIM LA 420 MG TABLET	DILTIAZEM HCL	2	
MAXICOMFORT INSULIN SYRINGE 0.5 ML 27G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
MAXICOMFORT INSULIN SYRINGE 1 ML 27G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
MAXICOMFORT PEN NEEDLE 29G 5MM	PEN NEEDLE, DIABETIC, SAFETY	2	
MAXICOMFORT PEN NEEDLE 29G 8MM	PEN NEEDLE, DIABETIC, SAFETY	2	
MAXICOMFORT II PEN NEEDLE 31G 6MM	PEN NEEDLE, DIABETIC	2	
MAXI-COMFORT INSULIN SYRINGE 0.5 ML 28G	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
MAXI-COMFORT INSULIN SYRINGE 1 ML 28G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
MECLIZINE 12.5 MG TABLET	MECLIZINE HCL	1	
MECLIZINE 25 MG TABLET	MECLIZINE HCL	1	
MECLOFENAMATE 50 MG CAPSULE	MECLOFENAMATE SODIUM	3	
MECLOFENAMATE 100 MG CAPSULE	MECLOFENAMATE SODIUM	3	
MEDICATION TRANSFER NEEDLE	NEEDLES, PHARMACY COMPOUND	2	
MEDISENSE GLUCOSE-KETONE CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
MEDISENSE H-L CONTROL SOLUTION	BLOOD-GLUCOSE CALIB. CONTROL	2	
MEDISENSE H-M-L CONTROL SOLUTION	BLOOD-GLUCOSE CALIB. CONTROL	2	
MEDISENSE MID CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
MEDPOINT CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
MEDROL 2 MG TABLET	METHYLPREDNISOLONE	3	
MEDROXYPROGESTERONE 2.5 MG TABLET	MEDROXYPROGESTERONE ACETATE	1	
MEDROXYPROGESTERONE 5 MG TABLET	MEDROXYPROGESTERONE ACETATE	1	
MEDROXYPROGESTERONE 10 MG TABLET	MEDROXYPROGESTERONE ACETATE	1	
MEDROXYPROGESTERONE 150 MG/ML VIAL	MEDROXYPROGESTERONE ACETATE	1	
MEDTRONIC EXTENDED INFUSION SET 23" 6MM	INFUSION SET FOR INSULIN PUMP	2	

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Medication Name	Generic Name	Tier	Notes
MEDTRONIC EXTENDED INFUSION SET 23" 9MM	INFUSION SET FOR INSULIN PUMP	2	
MEDTRONIC EXTENDED INFUSION SET 32" 6MM	INFUSION SET FOR INSULIN PUMP	2	
MEDTRONIC EXTENDED INFUSION SET 32" 9MM	INFUSION SET FOR INSULIN PUMP	2	
MEDTRONIC REMOTE CONTROL	DIABETIC SUPPLIES,MISCELL	2	
MEFENAMIC ACID 250 MG CAPSULE	MEFENAMIC ACID	2	
MEFLOQUINE 250 MG TABLET	MEFLOQUINE HCL	1	QL
MEGESTROL 40 MG/ML ORAL SUSPENSION	MEGESTROL ACETATE	1	
MEGESTROL 400 MG/10 ML ORAL SUSPENSION	MEGESTROL ACETATE	1	
MEGESTROL 625 MG/5 ML ORAL SUSPENSION	MEGESTROL ACETATE	3	
MEGESTROL 20 MG TABLET	MEGESTROL ACETATE	1	
MEGESTROL 40 MG TABLET	MEGESTROL ACETATE	1	
MEKINIST 0.05 MG/ML ORAL SOLUTION	TRAMETINIB DIMETHYL SULFOXIDE	4	PA, QL, SRX
MEKINIST 0.5 MG TABLET	TRAMETINIB DIMETHYL SULFOXIDE	4	PA, QL, SRX
MEKINIST 2 MG TABLET	TRAMETINIB DIMETHYL SULFOXIDE	4	PA, QL, SRX
MELOXICAM 7.5 MG TABLET	MELOXICAM	1	
MELOXICAM 15 MG TABLET	MELOXICAM	1	
MEMANTINE 2 MG/ML ORAL SOLUTION	MEMANTINE HCL	1	
MEMANTINE 5 MG TABLET	MEMANTINE HCL	1	
MEMANTINE 10 MG TABLET	MEMANTINE HCL	1	
MEMANTINE 5-10 MG TITRATION PACK	MEMANTINE HCL	1	
MENEST 0.3 MG TABLET	ESTROGENS,ESTERIFIED	3	
MENEST 0.625 MG TABLET	ESTROGENS,ESTERIFIED	3	
MENEST 1.25 MG TABLET	ESTROGENS,ESTERIFIED	3	
MENEST 2.5 MG TABLET	ESTROGENS,ESTERIFIED	3	
MENQUADFI VIAL	MENING VAC A,C,Y,W135,C-TET/PF	2	
MENVEO 1 VIAL-A-C-Y-W-135-DIP	MENING VAC A,C,Y,W-135 DIP/PF	2	
MENVEO A-C-Y-W KIT (2 VIALS)	MENING VAC A,C,Y,W-135 DIP/PF	2	
MEPERIDINE 50 MG/5 ML ORAL SOLUTION	MEPERIDINE HCL	2	PA
MEPERIDINE 50 MG TABLET	MEPERIDINE HCL	2	PA
MEPROBAMATE 200 MG TABLET	MEPROBAMATE	2	
MEPROBAMATE 400 MG TABLET	MEPROBAMATE	2	
MERCAPTOPURINE 20 MG/ML ORAL SUSPENSION	MERCAPTOPURINE	4	PA, SRX
MERCAPTOPURINE 50 MG TABLET	MERCAPTOPURINE	1	
MERZEE 1 MG-20 MCG CAPSULE	NORETHINDRONE-E.ESTRADIOL-IRON	1	
MESALAMINE 4 GM/60 ML ENEMA	MESALAMINE	3	
MESALAMINE 4 GM/60 ML ENEMA KIT	MESALAMINE W/CLEANSING WIPES	3	
MESALAMINE 800 MG DR TABLET	MESALAMINE	3	
MESALAMINE ER 0.375 GRAM CAPSULE	MESALAMINE	2	
MESALAMINE ER 500 MG CAPSULE	MESALAMINE	3	
MESNA 400 MG TABLET	MESNA	4	SRX
METAXALONE 400 MG TABLET	METAXALONE	3	

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Medication Name	Generic Name	Tier	Notes
METAXALONE 800 MG TABLET	METAXALONE	3	
METFORMIN 500 MG TABLET	METFORMIN HCL	1	
METFORMIN 850 MG TABLET	METFORMIN HCL	1	
METFORMIN 1,000 MG TABLET	METFORMIN HCL	1	
METFORMIN ER 500 MG TABLET	METFORMIN HCL	1	
METFORMIN ER 750 MG TABLET	METFORMIN HCL	1	
METHADONE 10 MG/ML ORAL CONCENTRATE	METHADONE HCL	1	PA
METHADONE 5 MG/5 ML ORAL SOLUTION	METHADONE HCL	1	PA
METHADONE 10 MG/5 ML ORAL SOLUTION	METHADONE HCL	1	PA
METHADONE 5 MG TABLET	METHADONE HCL	1	PA
METHADONE 10 MG TABLET	METHADONE HCL	1	PA
METHADONE INTENSOL 10 MG/ML ORAL CONCENTRATE	METHADONE HCL	1	PA
METHAMPHETAMINE 5 MG TABLET	METHAMPHETAMINE HCL	3	QL
METHAZOLAMIDE 25 MG TABLET	METHAZOLAMIDE	2	
METHAZOLAMIDE 50 MG TABLET	METHAZOLAMIDE	2	
METHENAMINE HIPPURATE 1 GM TABLET	METHENAMINE HIPPURATE	1	
METHENAMINE MANDELATE 500 MG TABLET	METHENAMINE MANDELATE	1	
METHENAMINE MANDELATE 1 GM TABLET	METHENAMINE MANDELATE	1	
METHIMAZOLE 5 MG TABLET	METHIMAZOLE	1	
METHIMAZOLE 10 MG TABLET	METHIMAZOLE	1	
METHITEST 10 MG TABLET	METHYLTESTOSTERONE	4	
METHOCARBAMOL 500 MG TABLET	METHOCARBAMOL	1	
METHOCARBAMOL 750 MG TABLET	METHOCARBAMOL	1	
METHOTREXATE 2.5 MG TABLET	METHOTREXATE SODIUM	1	
METHOXSALEN 10 MG SOFTGEL	METHOXSALEN	3	
METHSCOPOLAMINE 2.5 MG TABLET	METHSCOPOLAMINE BROMIDE	1	
METHSCOPOLAMINE 5 MG TABLET	METHSCOPOLAMINE BROMIDE	1	
METHSUXIMIDE 300 MG CAPSULE	METHSUXIMIDE	3	
METHYLDOPA 250 MG TABLET	METHYLDOPA	1	
METHYLDOPA 500 MG TABLET	METHYLDOPA	1	
METHYLDOPA-HCTZ 250-15 MG TABLET	METHYLDOPA/HYDROCHLOROTHIAZIDE	1	
METHYLDOPA-HCTZ 250-25 MG TABLET	METHYLDOPA/HYDROCHLOROTHIAZIDE	1	
METHYLERGONOVINE 0.2 MG TABLET	METHYLERGONOVINE MALEATE	3	
METHYLPHENIDATE 2.5 MG CHEWABLE TABLET	METHYLPHENIDATE HCL	1	QL
METHYLPHENIDATE 5 MG CHEWABLE TABLET	METHYLPHENIDATE HCL	1	QL
METHYLPHENIDATE 10 MG CHEWABLE TABLET	METHYLPHENIDATE HCL	1	QL
METHYLPHENIDATE 5 MG/5 ML ORAL SOLUTION	METHYLPHENIDATE HCL	1	QL
METHYLPHENIDATE 10 MG/5 ML ORAL SOLUTION	METHYLPHENIDATE HCL	1	QL
METHYLPHENIDATE 5 MG TABLET	METHYLPHENIDATE HCL	1	QL
METHYLPHENIDATE 10 MG TABLET	METHYLPHENIDATE HCL	1	QL
METHYLPHENIDATE 20 MG TABLET	METHYLPHENIDATE HCL	1	QL

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Medication Name	Generic Name	Tier	Notes
METHYLPHENIDATE CD 10 MG CAPSULE	METHYLPHENIDATE HCL	2	QL
METHYLPHENIDATE CD 20 MG CAPSULE	METHYLPHENIDATE HCL	2	QL
METHYLPHENIDATE CD 30 MG CAPSULE	METHYLPHENIDATE HCL	2	QL
METHYLPHENIDATE CD 40 MG CAPSULE	METHYLPHENIDATE HCL	2	QL
METHYLPHENIDATE CD 50 MG CAPSULE	METHYLPHENIDATE HCL	2	QL
METHYLPHENIDATE CD 60 MG CAPSULE	METHYLPHENIDATE HCL	2	QL
METHYLPHENIDATE ER 10 MG TABLET	METHYLPHENIDATE HCL	1	QL
METHYLPHENIDATE ER 18 MG TABLET	METHYLPHENIDATE HCL	1	QL
METHYLPHENIDATE ER 20 MG TABLET	METHYLPHENIDATE HCL	1	QL
METHYLPHENIDATE ER 27 MG TABLET	METHYLPHENIDATE HCL	1	QL
METHYLPHENIDATE ER 36 MG TABLET	METHYLPHENIDATE HCL	1	QL
METHYLPHENIDATE ER 54 MG TABLET	METHYLPHENIDATE HCL	1	QL
METHYLPHENIDATE ER(CD) 10 MG CAPSULE	METHYLPHENIDATE HCL	2	QL
METHYLPHENIDATE ER(CD) 20 MG CAPSULE	METHYLPHENIDATE HCL	2	QL
METHYLPHENIDATE ER(CD) 30 MG CAPSULE	METHYLPHENIDATE HCL	2	QL
METHYLPHENIDATE ER(CD) 40 MG CAPSULE	METHYLPHENIDATE HCL	2	QL
METHYLPHENIDATE ER(CD) 50 MG CAPSULE	METHYLPHENIDATE HCL	2	QL
METHYLPHENIDATE ER(CD) 60 MG CAPSULE	METHYLPHENIDATE HCL	2	QL
METHYLPHENIDATE ER(LA) 10 MG CAPSULE	METHYLPHENIDATE HCL	2	QL
METHYLPHENIDATE ER(LA) 20 MG CAPSULE	METHYLPHENIDATE HCL	2	QL
METHYLPHENIDATE ER(LA) 30 MG CAPSULE	METHYLPHENIDATE HCL	2	QL
METHYLPHENIDATE ER(LA) 40 MG CAPSULE	METHYLPHENIDATE HCL	2	QL
METHYLPHENIDATE ER(LA) 60 MG CAPSULE	METHYLPHENIDATE HCL	2	QL
METHYLPREDNISOLONE 4 MG DOSEPACK	METHYLPREDNISOLONE	1	
METHYLPREDNISOLONE 4 MG TABLET	METHYLPREDNISOLONE	1	
METHYLPREDNISOLONE 8 MG TABLET	METHYLPREDNISOLONE	1	
METHYLPREDNISOLONE 16 MG TABLET	METHYLPREDNISOLONE	1	
METHYLPREDNISOLONE 32 MG TABLET	METHYLPREDNISOLONE	1	
METHYLTESTOSTERONE 10 MG CAPSULE	METHYLTESTOSTERONE	4	
METOCLOPRAMIDE 5 MG/5 ML ORAL SOLUTION	METOCLOPRAMIDE HCL	1	
METOCLOPRAMIDE 10 MG/10 ML ORAL SOLUTION	METOCLOPRAMIDE HCL	1	
METOCLOPRAMIDE 5 MG TABLET	METOCLOPRAMIDE HCL	1	
METOCLOPRAMIDE 10 MG TABLET	METOCLOPRAMIDE HCL	1	
METOLAZONE 2.5 MG TABLET	METOLAZONE	1	
METOLAZONE 5 MG TABLET	METOLAZONE	1	
METOLAZONE 10 MG TABLET	METOLAZONE	1	
METOPROLOL SUCCINATE ER 25 MG TABLET	METOPROLOL SUCCINATE	1	
METOPROLOL SUCCINATE ER 50 MG TABLET	METOPROLOL SUCCINATE	1	
METOPROLOL SUCCINATE ER 100 MG TABLET	METOPROLOL SUCCINATE	1	
METOPROLOL SUCCINATE ER 200 MG TABLET	METOPROLOL SUCCINATE	1	
METOPROLOL TARTRATE 25 MG TABLET	METOPROLOL TARTRATE	1	

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Medication Name	Generic Name	Tier	Notes
METOPROLOL TARTRATE 37.5 MG TABLET	METOPROLOL TARTRATE	1	
METOPROLOL TARTRATE 50 MG TABLET	METOPROLOL TARTRATE	1	
METOPROLOL TARTRATE 75 MG TABLET	METOPROLOL TARTRATE	1	
METOPROLOL TARTRATE 100 MG TABLET	METOPROLOL TARTRATE	1	
METOPROLOL-HCTZ 50-25 MG TABLET	METOPROLOL/HYDROCHLOROTHIAZIDE	1	
METOPROLOL-HCTZ 100-25 MG TABLET	METOPROLOL/HYDROCHLOROTHIAZIDE	1	
METOPROLOL-HCTZ 100-50 MG TABLET	METOPROLOL/HYDROCHLOROTHIAZIDE	1	
METRONIDAZOLE 375 MG CAPSULE	METRONIDAZOLE	1	
METRONIDAZOLE 0.75% CREAM	METRONIDAZOLE	1	
METRONIDAZOLE 0.75% LOTION	METRONIDAZOLE	1	
METRONIDAZOLE 250 MG TABLET	METRONIDAZOLE	1	
METRONIDAZOLE 500 MG TABLET	METRONIDAZOLE	1	
METRONIDAZOLE TOPICAL 0.75% GEL	METRONIDAZOLE	1	
METRONIDAZOLE TOPICAL 1% GEL	METRONIDAZOLE	1	
METRONIDAZOLE TOPICAL 1% GEL PUMP	METRONIDAZOLE	1	
METRONIDAZOLE VAGINAL 0.75% GEL	METRONIDAZOLE	1	
METYROSINE 250 MG CAPSULE	METYROSINE	4	PA
MEXILETINE 150 MG CAPSULE	MEXILETINE HCL	1	
MEXILETINE 200 MG CAPSULE	MEXILETINE HCL	1	
MEXILETINE 250 MG CAPSULE	MEXILETINE HCL	1	
MIBELAS 24 FE CHEWABLE TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
MICONAZOLE 3 200 MG VAGINAL SUPPOSITORY	MICONAZOLE NITRATE	2	
MICROCHAMBER	INHALER, ASSIST DEVICES	2	QL
MICRODOT HIGH-LOW CONTROL SOLUTION	BLOOD GLUCOSE CONTROL HIGH,LOW	2	
MICRODOT NORMAL CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
MICROGESTIN 21 1.5-30 TABLET	NORETHINDRONE AC/ETH ESTRADIOL	1	
MICROGESTIN 21 1-20 TABLET	NORETHINDRONE AC/ETH ESTRADIOL	1	
MICROGESTIN 24 FE 1 MG-20 MCG TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
MICROGESTIN FE 1.5-30 TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
MICROGESTIN FE 1-20 TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
MICROLIFE PEAK FLOW METER	PEAK FLOW METER	2	
MICROSPACER FOR AEROSOL DEVICE	INHALER, ASSIST DEVICES	2	QL
MIDAZOLAM 2 MG/ML SYRUP	MIDAZOLAM HCL	1	
MIDAZOLAM 10 MG/5 ML SYRUP	MIDAZOLAM HCL	1	
MIDODRINE 2.5 MG TABLET	MIDODRINE HCL	1	
MIDODRINE 5 MG TABLET	MIDODRINE HCL	1	
MIDODRINE 10 MG TABLET	MIDODRINE HCL	1	
MIFEPREX 200 MG TABLET	MIFEPRISTONE	3	
MIFEPRISTONE 200 MG TABLET	MIFEPRISTONE	1	
MIGERGOT 2-100 MG SUPPOSITORY	ERGOTAMINE TARTRATE/CAFFEINE	3	
MIGLITOL 25 MG TABLET	MIGLITOL	1	

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Medication Name	Generic Name	Tier	Notes
MIGLITOL 50 MG TABLET	MIGLITOL	1	
MIGLITOL 100 MG TABLET	MIGLITOL	1	
MIGLUSTAT 100 MG CAPSULE	MIGLUSTAT	4	PA, SRX
MILI 0.25-0.035 MG TABLET	NORGESTIMATE-ETHINYL ESTRADIOL	1	
MIMVEY 1-0.5 MG TABLET	ESTRADIOL/NORETHINDRONE ACET	1	
MINI PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
MINI PEN NEEDLE 32G 5MM	PEN NEEDLE, DIABETIC	2	
MINI PEN NEEDLE 32G 6MM	PEN NEEDLE, DIABETIC	2	
MINI PEN NEEDLE 32G 8MM	PEN NEEDLE, DIABETIC	2	
MINI PEN NEEDLE 33G 4MM	PEN NEEDLE, DIABETIC	2	
MINI PEN NEEDLE 33G 5MM	PEN NEEDLE, DIABETIC	2	
MINI PEN NEEDLE 33G 6MM	PEN NEEDLE, DIABETIC	2	
MINI ULTRA-THIN II PEN NEEDLE 31G	PEN NEEDLE, DIABETIC	2	
MINI WRIGHT PEAK FLOW METER	PEAK FLOW METER	2	
MINIMED INFUSION SET	INFUSION SET FOR INSULIN PUMP	2	
MINIMED MIO ADVANCE INFUSION SET 23" 6MM	INFUSION SET FOR INSULIN PUMP	2	
MINIMED MIO ADVANCE INFUSION SET 23" 9MM	INFUSION SET FOR INSULIN PUMP	2	
MINIMED MIO ADVANCE INFUSION SET 43" 6MM	INFUSION SET FOR INSULIN PUMP	2	
MINIMED MIO ADVANCE INFUSION SET 43" 9MM	INFUSION SET FOR INSULIN PUMP	2	
MINIMED QUICK INFUSION SET 18" 6MM	INFUSION SET FOR INSULIN PUMP	2	
MINIMED QUICK INFUSION SET 23" 6MM	INFUSION SET FOR INSULIN PUMP	2	
MINIMED QUICK INFUSION SET 23" 9MM	INFUSION SET FOR INSULIN PUMP	2	
MINIMED QUICK INFUSION SET 32" 6MM	INFUSION SET FOR INSULIN PUMP	2	
MINIMED QUICK INFUSION SET 32" 9MM	INFUSION SET FOR INSULIN PUMP	2	
MINIMED QUICK INFUSION SET 43" 6MM	INFUSION SET FOR INSULIN PUMP	2	
MINIMED QUICK INFUSION SET 43" 9MM	INFUSION SET FOR INSULIN PUMP	2	
MINIMED QUICK-SERTER	DIABETIC SUPPLIES,MISCELL	2	
MINIMED RESERVOIR 1.8 ML	INSULIN PUMP SYRINGE, 1.8 ML	2	
MINIMED RESERVOIR 3 ML	INSULIN PUMP SYRINGE, 3 ML	2	
MINIMED SILHOUETTE INFUSION SET 18"	INFUSION SET FOR INSULIN PUMP	2	
MINIMED SILHOUETTE INFUSION SET 23"	INFUSION SET FOR INSULIN PUMP	2	
MINIMED SILHOUETTE INFUSION SET 32"	INFUSION SET FOR INSULIN PUMP	2	
MINIMED SILHOUETTE INFUSION SET 43"	INFUSION SET FOR INSULIN PUMP	2	
MINIMED SURE T INFUSION SET 18" 6MM	INFUSION SET FOR INSULIN PUMP	2	
MINIMED SURE T INFUSION SET 23"	INFUSION SET FOR INSULIN PUMP	2	
MINIMED SURE T INFUSION SET 23" 6MM	INFUSION SET FOR INSULIN PUMP	2	
MINIMED SURE T INFUSION SET 23" 8MM	INFUSION SET FOR INSULIN PUMP	2	
MINIMED SURE T INFUSION SET 32"	INFUSION SET FOR INSULIN PUMP	2	
MINIMED SURE T INFUSION SET 32" 6MM	INFUSION SET FOR INSULIN PUMP	2	
MINIMED SURE T INFUSION SET 32" 8MM	INFUSION SET FOR INSULIN PUMP	2	
MINOCYCLINE 50 MG CAPSULE	MINOCYCLINE HCL	1	

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Medication Name	Generic Name	Tier	Notes
MINOCYCLINE 75 MG CAPSULE	MINOCYCLINE HCL	1	
MINOCYCLINE 100 MG CAPSULE	MINOCYCLINE HCL	1	
MINOCYCLINE 50 MG TABLET	MINOCYCLINE HCL	1	
MINOCYCLINE 75 MG TABLET	MINOCYCLINE HCL	1	
MINOCYCLINE 100 MG TABLET	MINOCYCLINE HCL	1	
MINOXIDIL 2.5 MG TABLET	MINOXIDIL	1	
MINOXIDIL 10 MG TABLET	MINOXIDIL	1	
MINZOYA-28 TABLET	LEVONORGEST/ETH.ESTRADIOL/IRON	1	
MIRABEGRON ER 25 MG TABLET	MIRABEGRON	3	QL
MIRABEGRON ER 50 MG TABLET	MIRABEGRON	3	QL
MIRENA 52 MG SYSTEM	LEVONORGESTREL	1	LDD, SRX
MIRTAZAPINE 15 MG ODT TABLET	MIRTAZAPINE	1	
MIRTAZAPINE 30 MG ODT TABLET	MIRTAZAPINE	1	
MIRTAZAPINE 45 MG ODT TABLET	MIRTAZAPINE	1	
MIRTAZAPINE 7.5 MG TABLET	MIRTAZAPINE	1	
MIRTAZAPINE 15 MG TABLET	MIRTAZAPINE	1	
MIRTAZAPINE 30 MG TABLET	MIRTAZAPINE	1	
MIRTAZAPINE 45 MG TABLET	MIRTAZAPINE	1	
MISOPROSTOL 100 MCG TABLET	MISOPROSTOL	1	
MISOPROSTOL 200 MCG TABLET	MISOPROSTOL	1	
M-M-R II VACCINE VIAL	MEASLES,MUMPS,RUBELLA VACC/PF	2	
M-NATAL PLUS TABLET	PNV,CALCIUM 72/IRON/FOLIC ACID	1	
MODAFINIL 100 MG TABLET	MODAFINIL	3	PA
MODAFINIL 200 MG TABLET	MODAFINIL	3	PA
MODERNA COVID (6M-5Y) VACCINE (EUA)	COVID-19 VACC,PEDI(MODERNA)/PF	2	
MODERNA COVID (6-11Y) VACCINE (EUA)	COVID-19 VACC,PEDI(MODERNA)/PF	2	
MODERNA COVID (12Y UP) VACCINE (EUA)	COVID-19 VACC,MRNA(MODERNA)/PF	2	
MODERNA COVID (6M-11Y) EUA	COVID VAC 23-24(6M-11Y)ANDU/PF	2	
MODERNA COVID BIVAL (6MO-5Y) EUA	COVID-19 VAC, BV (MODERNA)/PF	2	
MODERNA COVID BIVAL (6MO UP) EUA	COVID-19 VAC, BV (MODERNA)/PF	2	
MODERNA COVID-19 BOOSTER (EUA)	COVID-19 VACC,MRNA(MODERNA)/PF	2	
MOEXIPRIL 7.5 MG TABLET	MOEXIPRIL HCL	1	
MOEXIPRIL 15 MG TABLET	MOEXIPRIL HCL	1	
MOLINDONE 5 MG TABLET	MOLINDONE HCL	1	
MOLINDONE 10 MG TABLET	MOLINDONE HCL	1	
MOLINDONE 25 MG TABLET	MOLINDONE HCL	1	
MOMETASONE 0.1% CREAM	MOMETASONE FUROATE	1	
MOMETASONE 0.1% OINTMENT	MOMETASONE FUROATE	1	
MOMETASONE 0.1% TOPICAL SOLUTION	MOMETASONE FUROATE	1	
MOMETASONE 50 MCG NASAL SPRAY	MOMETASONE FUROATE	2	QL
MONDOXYNE NL 75 MG CAPSULE	DOXYCYCLINE MONOHYDRATE	1	

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Medication Name	Generic Name	Tier	Notes
MONDOXYNE NL 100 MG CAPSULE	DOXYCYCLINE MONOHYDRATE	1	
MONOJECT BLOOD COLLECTION NEEDLE 20G 1"	NEEDLES, BLOOD COLLECTION	2	
MONOJECT BLOOD COLLECTION NEEDLE 20G 1.5	NEEDLES, BLOOD COLLECTION	2	
MONOJECT BLOOD COLLECTION NEEDLE 21G 1"	NEEDLES, BLOOD COLLECTION	2	
MONOJECT BLOOD COLLECTION NEEDLE 22G 1"	NEEDLES, BLOOD COLLECTION	2	
MONOJECT FILTER NEEDLE 18G 1.5"	NEEDLES, FILTER	2	
MONOJECT HYPODERMIC NEEDLE	NEEDLES, DISPOSABLE	2	
MONOJECT HYPODERMIC NEEDLE 18G 1A"	NEEDLES, DISPOSABLE	2	
MONOJECT HYPODERMIC NEEDLE 19G 1"	NEEDLES, DISPOSABLE	2	
MONOJECT HYPODERMIC NEEDLE 19G 1.5"	NEEDLES, DISPOSABLE	2	
MONOJECT HYPODERMIC NEEDLE 20G 1"	NEEDLES, DISPOSABLE	2	
MONOJECT HYPODERMIC NEEDLE 20G 1.5"	NEEDLES, DISPOSABLE	2	
MONOJECT HYPODERMIC NEEDLE 21G 1"	NEEDLES, DISPOSABLE	2	
MONOJECT HYPODERMIC NEEDLE 21G 1.5"	NEEDLES, DISPOSABLE	2	
MONOJECT HYPODERMIC NEEDLE 22G 1"	NEEDLES, DISPOSABLE	2	
MONOJECT HYPODERMIC NEEDLE 22G 1.5"	NEEDLES, DISPOSABLE	2	
MONOJECT HYPODERMIC NEEDLE 23G 1"	NEEDLES, DISPOSABLE	2	
MONOJECT HYPODERMIC NEEDLE 25G 5/8"	NEEDLES, DISPOSABLE	2	
MONOJECT HYPODERMIC NEEDLE 25G 1"	NEEDLES, DISPOSABLE	2	
MONOJECT HYPODERMIC NEEDLE 25G 1.5"	NEEDLES, DISPOSABLE	2	
MONOJECT HYPODERMIC NEEDLE 26G 1.5"	NEEDLES, DISPOSABLE	2	
MONOJECT HYPODERMIC NEEDLE 27G 0.5"	NEEDLES, DISPOSABLE	2	
MONOJECT HYPODERMIC NEEDLE 27G 1.5"	NEEDLES, DISPOSABLE	2	
MONOJECT HYPODERMIC NEEDLE 30G 3/4"	NEEDLES, DISPOSABLE	2	
MONOJECT INSULIN SYRINGE 0.3 ML	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
MONOJECT INSULIN SYRINGE 0.5 ML	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
MONOJECT INSULIN SYRINGE 1 ML	SYRINGE AND NEEDLE,INSULIN,1ML	2	
MONOJECT INSULIN SYRINGE 3/10 ML	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
MONOJECT INSULIN SYRINGE U100	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
MONOJECT INSULIN SYRINGE U100 0.5 ML	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
MONOJECT INSULIN SYRINGE U100 1 ML	SYRINGE AND NEEDLE,INSULIN,1ML	2	
MONOJECT SAFETY SYRINGE 6CC	SYRINGE WITH NEEDLE, 6 ML	2	
MONOJECT SYRINGE 0.3 ML	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
MONOJECT SYRINGE 0.5 ML	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
MONOJECT SYRINGE 0.5 ML 28G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
MONOJECT SYRINGE 1 ML	SYRINGE AND NEEDLE,INSULIN,1ML	2	
MONOJECT SYRINGE 1 ML 27 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
MONOJECT SYRINGE 1 ML 28G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
MONOJECT SYRINGE 3 ML 20G 1"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
MONOJECT SYRINGE 3 ML 20G 1.5"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
MONOJECT SYRINGE 3 ML 20G 3/4"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	

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Medication Name	Generic Name	Tier	Notes
MONOJECT SYRINGE 3 ML 21G 1"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
MONOJECT SYRINGE 3 ML 21G 1.5"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
MONOJECT SYRINGE 3 ML 22G 1"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
MONOJECT SYRINGE 3 ML 22G 1.5"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
MONOJECT SYRINGE 3 ML 23G 1"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
MONOJECT SYRINGE 3 ML 25G 5/8"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
MONOJECT SYRINGE 3 ML 25G 1"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
MONOJECT SYRINGE 3 ML 25G 1.25"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
MONOJECT SYRINGE 3 ML 27G 1.25"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
MONOJECT SYRINGE 6 ML 20G 1.5"	SYRINGE WITH NEEDLE, 6 ML	2	
MONOJECT SYRINGE 6 ML 21G 1"	SYRINGE WITH NEEDLE, 6 ML	2	
MONOJECT SYRINGE 6 ML 21G 1.5"	SYRINGE WITH NEEDLE, 6 ML	2	
MONOJECT SYRINGE 6 ML 22G 1.5"	SYRINGE WITH NEEDLE, 6 ML	2	
MONO-LINYAH 28 TABLET	NORGESTIMATE-ETHINYL ESTRADIOL	1	
MONTELUKAST 10 MG TABLET	MONTELUKAST SODIUM	1	
MONTELUKAST 4 MG CHEWABLE TABLET	MONTELUKAST SODIUM	1	
MONTELUKAST 5 MG CHEWABLE TABLET	MONTELUKAST SODIUM	1	
MONTELUKAST 4 MG GRANULE	MONTELUKAST SODIUM	1	
MORGIDOX 50 MG CAPSULE	DOXYCYCLINE HYCLATE	1	
MORPHINE 100 MG/5 ML ORAL CONCENTRATE	MORPHINE SULFATE	1	PA
MORPHINE 10 MG/5 ML ORAL SOLUTION	MORPHINE SULFATE	1	PA
MORPHINE 20 MG/5 ML ORAL SOLUTION	MORPHINE SULFATE	1	PA
MORPHINE 5 MG SUPPOSITORY	MORPHINE SULFATE	1	PA
MORPHINE 10 MG SUPPOSITORY	MORPHINE SULFATE	1	PA
MORPHINE 20 MG SUPPOSITORY	MORPHINE SULFATE	1	PA
MORPHINE 30 MG SUPPOSITORY	MORPHINE SULFATE	1	PA
MORPHINE ER 10 MG CAPSULE	MORPHINE SULFATE	1	PA
MORPHINE ER 20 MG CAPSULE	MORPHINE SULFATE	1	PA
MORPHINE ER 30 MG CAPSULE	MORPHINE SULFATE	1	PA
MORPHINE ER 45 MG CAPSULE	MORPHINE SULFATE	1	PA
MORPHINE ER 50 MG CAPSULE	MORPHINE SULFATE	1	PA
MORPHINE ER 60 MG CAPSULE	MORPHINE SULFATE	1	PA
MORPHINE ER 75 MG CAPSULE	MORPHINE SULFATE	1	PA
MORPHINE ER 80 MG CAPSULE	MORPHINE SULFATE	1	PA
MORPHINE ER 90 MG CAPSULE	MORPHINE SULFATE	1	PA
MORPHINE ER 100 MG CAPSULE	MORPHINE SULFATE	1	PA
MORPHINE ER 120 MG CAPSULE	MORPHINE SULFATE	1	PA
MORPHINE ER 15 MG TABLET	MORPHINE SULFATE	1	PA
MORPHINE ER 30 MG TABLET	MORPHINE SULFATE	1	PA
MORPHINE ER 60 MG TABLET	MORPHINE SULFATE	1	PA
MORPHINE ER 100 MG TABLET	MORPHINE SULFATE	1	PA

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Medication Name	Generic Name	Tier	Notes
MORPHINE ER 200 MG TABLET	MORPHINE SULFATE	1	PA
MORPHINE IR 15 MG TABLET	MORPHINE SULFATE	1	PA
MORPHINE IR 30 MG TABLET	MORPHINE SULFATE	1	PA
MOUNJARO 2.5 MG/0.5 ML PEN	TIRZEPATIDE	2	PA, QL
MOUNJARO 5 MG/0.5 ML PEN	TIRZEPATIDE	2	PA, QL
MOUNJARO 7.5 MG/0.5 ML PEN	TIRZEPATIDE	2	PA, QL
MOUNJARO 10 MG/0.5 ML PEN	TIRZEPATIDE	2	PA, QL
MOUNJARO 12.5 MG/0.5 ML PEN	TIRZEPATIDE	2	PA, QL
MOUNJARO 15 MG/0.5 ML PEN	TIRZEPATIDE	2	PA, QL
MOVANTIK 12.5 MG TABLET	NALOXEGOL OXALATE	2	PA, QL
MOVANTIK 25 MG TABLET	NALOXEGOL OXALATE	2	PA, QL
MOXIFLOXACIN 0.5% EYE DROPS	MOXIFLOXACIN HCL	1	
MOXIFLOXACIN 0.5% EYE DROPS-VISCOUS	MOXIFLOXACIN HCL	1	
MOXIFLOXACIN 400 MG TABLET	MOXIFLOXACIN HCL	1	
MRESVIA 50 MCG/0.5 ML SYRINGE	RSV VACCINE, PREF, MRNA/PF	2	
MS INSULIN SYRINGE 0.3 ML	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
MS INSULIN SYRINGE 0.3 ML 29G 1/2"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
MS INSULIN SYRINGE 0.3 ML 31G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
MS INSULIN SYRINGE 0.5 ML 29G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
MS INSULIN SYRINGE 0.5 ML 30G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
MS INSULIN SYRINGE 0.5 ML 31G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
MS INSULIN SYRINGE 1 ML 29G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
MS INSULIN SYRINGE 1 ML 30G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
MS INSULIN SYRINGE 1 ML 31G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
MS PEN NEEDLE 31G 6MM	PEN NEEDLE, DIABETIC	2	
MULTISTIX 5 TEST STRIP	URINE MULTIPLE TEST STRIPS	2	
MULTISTIX REAGENT TEST STRIP	URINE MULTIPLE TEST STRIPS	2	
MULTISTIX 7 REAGENT TEST STRIP	URINE MULTIPLE TEST STRIPS	2	
MULTISTIX 9 REAGENT TEST STRIP	URINE MULTIPLE TEST STRIPS	2	
MULTISTIX 8 SG REAGENT TEST STRIP	URINE MULTIPLE TEST STRIPS	2	
MULTISTIX 9 SG REAGENT TEST STRIP	URINE MULTIPLE TEST STRIPS	2	
MULTISTIX 10 SG REAGENT TEST STRIP	URINE MULTIPLE TEST STRIPS	2	
MULTIVITAMIN-FLUORIDE 0.25 MG CHEWABLE TABLET	PEDI MULTIVIT NO.242/FLUORIDE	1	
MULTIVITAMIN-FLUORIDE 0.5 MG CHEWABLE TABLET	PEDI MULTIVIT NO.242/FLUORIDE	1	
MULTIVITAMIN-FLUORIDE 1 MG CHEWABLE TABLET	PEDI MULTIVIT NO.242/FLUORIDE	1	
MUPIROCIN 2% CREAM	MUPIROCIN CALCIUM	2	
MUPIROCIN 2% OINTMENT	MUPIROCIN	1	
MY CHOICE 1.5 MG TABLET	LEVONORGESTREL	1	
MY WAY 1.5 MG TABLET	LEVONORGESTREL	1	
MYCOPHENOLATE 250 MG CAPSULE	MYCOPHENOLATE MOFETIL	1	SRX
MYCOPHENOLATE 200 MG/ML ORAL SUSPENSION	MYCOPHENOLATE MOFETIL	1	SRX

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Medication Name	Generic Name	Tier	Notes
MYCOPHENOLATE 500 MG TABLET	MYCOPHENOLATE MOFETIL	1	SRX
MYCOPHENOLIC ACID DR 180 MG TABLET	MYCOPHENOLATE SODIUM	1	SRX
MYCOPHENOLIC ACID DR 360 MG TABLET	MYCOPHENOLATE SODIUM	1	SRX
MYGLUCOHEALTH CONTROL SOLUTION PAK	BLOOD GLUCOSE CTL HIGH,NML,LOW	2	
MYLERAN 2 MG TABLET	BUSULFAN	3	
MYNATAL CAPSULE	PRENATAL VIT/IRON FUM/FOLIC AC	1	
MYNATAL PLUS CAPTAB	PRENATAL VIT/IRON FUM/FOLIC AC	1	
MYNATAL ULTRACAPLET	PNV/IRON,CARB/DOCUSAT/FOLIC AC	1	
MYNATAL-Z CAPTAB	PRENATAL VIT/IRON FUM/FOLIC AC	1	
MYORISAN 10 MG CAPSULE	ISOTRETINOIN	3	
MYORISAN 20 MG CAPSULE	ISOTRETINOIN	3	
MYORISAN 30 MG CAPSULE	ISOTRETINOIN	3	
MYORISAN 40 MG CAPSULE	ISOTRETINOIN	3	
MYTESI 125 MG DR TABLET	CROFELEMER	3	LDD, SRX
NABUMETONE 500 MG TABLET	NABUMETONE	1	
NABUMETONE 750 MG TABLET	NABUMETONE	1	
NADOLOL 20 MG TABLET	NADOLOL	1	
NADOLOL 40 MG TABLET	NADOLOL	1	
NADOLOL 80 MG TABLET	NADOLOL	1	
NAFTIFINE 1% CREAM	NAFTIFINE HCL	2	
NAFTIFINE 2% CREAM	NAFTIFINE HCL	2	
NAFTIFINE 2% GEL	NAFTIFINE HCL	2	
NALOXONE 0.4 MG/ML CARPUJECT	NALOXONE HCL	1	
NALOXONE 0.4 MG/ML SYRINGE	NALOXONE HCL	1	
NALOXONE 2 MG/2 ML SYRINGE	NALOXONE HCL	1	
NALOXONE 4 MG NASAL SPRAY	NALOXONE HCL	1	
NALTREXONE 50 MG TABLET	NALTREXONE HCL	1	
NANO 2 GEN PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
NANO PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
NAPROXEN 500 MG KIT	NAPROXEN	1	
NAPROXEN 250 MG TABLET	NAPROXEN	1	
NAPROXEN 375 MG TABLET	NAPROXEN	1	
NAPROXEN 500 MG TABLET	NAPROXEN	1	
NAPROXEN DR 375 MG TABLET	NAPROXEN	1	
NAPROXEN DR 500 MG TABLET	NAPROXEN	1	
NAPROXEN SODIUM 275 MG TABLET	NAPROXEN SODIUM	1	
NAPROXEN SODIUM 550 MG TABLET	NAPROXEN SODIUM	1	
NARATRIPTAN 1 MG TABLET	NARATRIPTAN HCL	1	QL
NARATRIPTAN 2.5 MG TABLET	NARATRIPTAN HCL	1	QL
NARCAN 4 MG NASAL SPRAY	NALOXONE HCL	2	
NATACYN 5% EYE DROPS	NATAMYCIN	3	

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Medication Name	Generic Name	Tier	Notes
NATAZIA 28 TABLET	ESTRADIOL VALERATE/DIENOGEST	1	
NATEGLINIDE 60 MG TABLET	NATEGLINIDE	1	
NATEGLINIDE 120 MG TABLET	NATEGLINIDE	1	
NAYZILAM 5 MG NASAL SPRAY	MIDAZOLAM	4	PA, QL
NEBUSAL 3% VIAL	SODIUM CHLORIDE FOR INHALATION	1	
NECON 0.5-35-28 TABLET	NORETHINDRONE-ETHIN. ESTRADIOL	1	
NEFAZODONE 50 MG TABLET	NEFAZODONE HCL	1	
NEFAZODONE 100 MG TABLET	NEFAZODONE HCL	1	
NEFAZODONE 150 MG TABLET	NEFAZODONE HCL	1	
NEFAZODONE 200 MG TABLET	NEFAZODONE HCL	1	
NEFAZODONE 250 MG TABLET	NEFAZODONE HCL	1	
NEOMYCIN 500 MG TABLET	NEOMYCIN SULFATE	1	
NEOMYCIN-BACITRACIN-POLYMYXIN EYE OINTMENT	NEOMYCIN/BACITRACIN/POLYMYXINB	1	
NEOMYCIN-BACITRACIN-POLYMYXIN-HC EYE OINTMENT	NEOMYCIN/BACIT/P-MYX/HYDROCORT	1	
NEOMYCIN-POLYMYXIN B 40 MG/ML AMPULE	NEOMYCIN SULF/POLYMYXIN B SULF	1	
NEOMYCIN-POLYMYXIN B 40 MG/ML VIAL	NEOMYCIN SULF/POLYMYXIN B SULF	1	
NEOMYCIN-POLYMYXIN-DEXAMETHASONE EYE DROPS	NEOMYCIN/POLYMYXIN B/DEXAMETHA	1	
NEOMYCIN-POLYMYXIN-DEXAMETHASONE EYE OINTMENT	NEOMYCIN/POLYMYXIN B/DEXAMETHA	1	
NEOMYCIN-POLYMYXIN-GRAMICIDIN EYE DROPS	NEOMYCIN/POLYMYXN B/GRAMICIDIN	1	
NEOMYCIN-POLYMYXIN-HC EAR SOLUTION	NEOMYCIN/POLYMYXIN B/HYDROCORT	1	
NEOMYCIN-POLYMYXIN-HC EAR SUSPENSION	NEOMYCIN/POLYMYXIN B/HYDROCORT	1	
NEOMYCIN-POLYMYXIN-HC EYE DROPS	NEOMYCIN/POLYMYXIN B/HYDROCORT	1	
NEO-POLYCIN EYE OINTMENT	NEOMYCIN/BACITRACIN/POLYMYXINB	1	
NEO-POLYCIN HC EYE OINTMENT	NEOMYCIN/BACIT/P-MYX/HYDROCORT	1	
NEUAC GEL	CLINDAMYCIN PHOS/BENZOYL PEROX	1	
NEULASTA 6 MG/0.6 ML SYRINGE	PEGFILGRASTIM	4	PA, SRX
NEULASTA ONPRO 6 MG/0.6 ML KIT	PEGFILGRASTIM	4	PA, SRX
NEUPRO 1 MG/24 HR PATCH	ROTIGOTINE	3	
NEUPRO 2 MG/24 HR PATCH	ROTIGOTINE	3	
NEUPRO 3 MG/24 HR PATCH	ROTIGOTINE	3	
NEUPRO 4 MG/24 HR PATCH	ROTIGOTINE	3	
NEUPRO 6 MG/24 HR PATCH	ROTIGOTINE	3	
NEUPRO 8 MG/24 HR PATCH	ROTIGOTINE	3	
NEVANAC 0.1% EYE DROPS	NEPAFENAC	3	
NEVIRAPINE 50 MG/5 ML ORAL SUSPENSION	NEVIRAPINE	1	SRX
NEVIRAPINE 200 MG TABLET	NEVIRAPINE	1	SRX
NEVIRAPINE ER 100 MG TABLET	NEVIRAPINE	1	SRX
NEVIRAPINE ER 400 MG TABLET	NEVIRAPINE	1	SRX
NEW DAY 1.5 MG TABLET	LEVONORGESTREL	1	
NEWGEN TABLET	PRENATAL VIT86/IRON/FOLIC ACID	1	
NEXPLANON 68 MG IMPLANT	ETONOGESTREL	1	LDD, SRX

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Medication Name	Generic Name	Tier	Notes
NEXTSTELLIS 3-14.2 MG TABLET	DROSPIRENONE/ESTETROL	1	
NIACIN ER 500 MG TABLET	NIACIN	1	
NIACIN ER 750 MG TABLET	NIACIN	1	
NIACIN ER 1,000 MG TABLET	NIACIN	1	
NICARDIPINE 20 MG CAPSULE	NICARDIPINE HCL	2	
NICARDIPINE 30 MG CAPSULE	NICARDIPINE HCL	2	
NICOTROL CARTRIDGE INHALER	NICOTINE	2	
NICOTROL NS 10 MG/ML SPRAY	NICOTINE	2	
NIFEDIPINE 10 MG CAPSULE	NIFEDIPINE	1	
NIFEDIPINE 20 MG CAPSULE	NIFEDIPINE	1	
NIFEDIPINE ER 30 MG TABLET	NIFEDIPINE	1	
NIFEDIPINE ER 60 MG TABLET	NIFEDIPINE	1	
NIFEDIPINE ER 90 MG TABLET	NIFEDIPINE	1	
NIKKI 3 MG-0.02 MG TABLET	ETHINYL ESTRADIOL/DROSPIRENONE	1	
NILOTINIB HCL 50 MG CAPSULE	NILOTINIB HCL	4	PA, QL, SRX
NILOTINIB HCL 150 MG CAPSULE	NILOTINIB HCL	4	PA, QL, SRX
NILOTINIB HCL 200 MG CAPSULE	NILOTINIB HCL	4	PA, QL, SRX
NILUTAMIDE 150 MG TABLET	NILUTAMIDE	4	
NIMODIPINE 30 MG CAPSULE	NIMODIPINE	3	
NINLARO 2.3 MG CAPSULE	IXAZOMIB CITRATE	4	PA, QL, LDD, SRX
NINLARO 3 MG CAPSULE	IXAZOMIB CITRATE	4	PA, QL, LDD, SRX
NINLARO 4 MG CAPSULE	IXAZOMIB CITRATE	4	PA, QL, LDD, SRX
NISOLDIPINE ER 8.5 MG TABLET	NISOLDIPINE	1	QL
NISOLDIPINE ER 17 MG TABLET	NISOLDIPINE	1	QL
NISOLDIPINE ER 20 MG TABLET	NISOLDIPINE	1	QL
NISOLDIPINE ER 25.5 MG TABLET	NISOLDIPINE	1	QL
NISOLDIPINE ER 30 MG TABLET	NISOLDIPINE	1	QL
NISOLDIPINE ER 34 MG TABLET	NISOLDIPINE	1	QL
NISOLDIPINE ER 40 MG TABLET	NISOLDIPINE	1	QL
NITAZOXANIDE 500 MG TABLET	NITAZOXANIDE	3	PA
NITRO-BID 2% OINTMENT	NITROGLYCERIN	1	
NITROFURANTOIN MACRO 25 MG CAPSULE	NITROFURANTOIN MACROCRYSTAL	2	
NITROFURANTOIN MACRO 50 MG CAPSULE	NITROFURANTOIN MACROCRYSTAL	1	
NITROFURANTOIN MACRO 100 MG CAPSULE	NITROFURANTOIN MACROCRYSTAL	1	
NITROFURANTOIN 25 MG/5 ML ORAL SUSPENSION	NITROFURANTOIN	3	
NITROFURANTOIN MONO-MACRO 100 MG CAPSULE	NITROFURANTOIN MONOHYD/M-CRYST	1	
NITROGLYCERIN 0.4% OINTMENT	NITROGLYCERIN	3	
NITROGLYCERIN 0.1 MG/HR PATCH	NITROGLYCERIN	1	
NITROGLYCERIN 0.2 MG/HR PATCH	NITROGLYCERIN	1	
NITROGLYCERIN 0.4 MG/HR PATCH	NITROGLYCERIN	1	
NITROGLYCERIN 0.6 MG/HR PATCH	NITROGLYCERIN	1	

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Medication Name	Generic Name	Tier	Notes
NITROGLYCERIN 400 MCG SPRAY	NITROGLYCERIN	1	
NITROGLYCERIN 0.3 MG SUBLINGUAL TABLET	NITROGLYCERIN	1	
NITROGLYCERIN 0.4 MG SUBLINGUAL TABLET	NITROGLYCERIN	1	
NITROGLYCERIN 0.6 MG SUBLINGUAL TABLET	NITROGLYCERIN	1	
NITRO-TIME ER 2.5 MG CAPSULE	NITROGLYCERIN	1	
NITRO-TIME ER 6.5 MG CAPSULE	NITROGLYCERIN	1	
NITRO-TIME ER 9 MG CAPSULE	NITROGLYCERIN	1	
NIVA THYROID 15 MG TABLET	THYROID,PORK	1	
NIVA THYROID 30 MG TABLET	THYROID,PORK	1	
NIVA THYROID 60 MG TABLET	THYROID,PORK	1	
NIVA THYROID 90 MG TABLET	THYROID,PORK	1	
NIVA THYROID 120 MG TABLET	THYROID,PORK	1	
NIVA-PLUS TABLET	MULTIVIT-MINS60/IRON FUM/FOLIC	1	
NIVESTYM 300 MCG/0.5 ML SYRINGE	FILGRASTIM-AAFI	4	SRX
NIVESTYM 480 MCG/0.8 ML SYRINGE	FILGRASTIM-AAFI	4	SRX
NIVESTYM 300 MCG/ML VIAL	FILGRASTIM-AAFI	4	SRX
NIVESTYM 480 MCG/1.6 ML VIAL	FILGRASTIM-AAFI	4	SRX
NIZATIDINE 150 MG CAPSULE	NIZATIDINE	1	
NIZATIDINE 300 MG CAPSULE	NIZATIDINE	1	
NORA-BE TABLET	NORETHINDRONE	1	
NORELGESTROMIN-ETHINYL ESTRADIOL 150-35 MCG/DAY PATCH	NORELGESTROMIN/ETHIN.ESTRADIOL	1	
NORETHINDRONE 0.35 MG TABLET	NORETHINDRONE	1	
NORETHINDRONE 5 MG TABLET	NORETHINDRONE ACETATE	1	
NORETHINDRONE-ESTRADIOL-FE 0.4-0.035(21)-75 CHEWABLE TABLET	NORETH-ETHINYL ESTRADIOL/IRON	1	
NORETHINDRONE-ESTRADIOL-FE 0.8-0.025 MG CHEWABLE TABLET	NORETH-ETHINYL ESTRADIOL/IRON	1	
NORETHINDRONE-ETHINYL ESTRADIOL 0.5-2.5 TABLET	NORETHINDRONE AC/ETH ESTRADIOL	1	
NORETHINDRONE-ETHINYL ESTRADIOL 1 MG-5 MCG TABLET	NORETHINDRONE AC/ETH ESTRADIOL	1	
NORETHINDRONE-ETHINYL ESTRADIOL 1.5-0.03 MG (21) TABLET	NORETHINDRONE AC/ETH ESTRADIOL	1	
NORETHINDRONE-ETHINYL ESTRADIOL 1-0.02 MG TABLET	NORETHINDRONE AC/ETH ESTRADIOL	1	
NORETHINDRONE-ETHINYL ESTRADIOL-FE 1 MG/20-30-35 MCG TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
NORETHINDRONE-ETHINYL ESTRADIOL-FE 1.5-0.03 MG (21) - 75 TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
NORETHINDRONE-ETHINYL ESTRADIOL-FE 1-0.02 (21) - 75 TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
NORETHINDRONE-ETHINYL ESTRADIOL-FE 1-0.02 (24) - 75 CAPSULE	NORETHINDRONE-E.ESTRADIOL-IRON	1	
NORETHINDRONE-ETHINYL ESTRADIOL-FE 1-0.02 (24) - 75 CHEWABLE TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
NORGESTIMATE-ETHINYL ESTRADIOL 0.18-0.215-0.25/0.025 TABLET	NORGESTIMATE-ETHINYL ESTRADIOL	1	

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Medication Name	Generic Name	Tier	Notes
NORGESTIMATE-ETHINYL ESTRADIOL 0.18-0.215-0.25/0.035 TABLET	NORGESTIMATE-ETHINYL ESTRADIOL	1	
NORGESTIMATE-ETHINYL ESTRADIOL 0.25-0.035 MG TABLET	NORGESTIMATE-ETHINYL ESTRADIOL	1	
NORPACE CR 100 MG CAPSULE	DISOPYRAMIDE PHOSPHATE	3	
NORPACE CR 150 MG CAPSULE	DISOPYRAMIDE PHOSPHATE	3	
NORTREL 0.5-35-28 TABLET	NORETHINDRONE-ETHIN. ESTRADIOL	1	
NORTREL 1-35 21 TABLET	NORETHINDRONE-ETHIN. ESTRADIOL	1	
NORTREL 1-35 28 TABLET	NORETHINDRONE-ETHIN. ESTRADIOL	1	
NORTREL 7-7-7-28 TABLET	NORETHINDRONE-ETHIN. ESTRADIOL	1	
NORTRIPTYLINE 10 MG CAPSULE	NORTRIPTYLINE HCL	1	
NORTRIPTYLINE 25 MG CAPSULE	NORTRIPTYLINE HCL	1	
NORTRIPTYLINE 50 MG CAPSULE	NORTRIPTYLINE HCL	1	
NORTRIPTYLINE 75 MG CAPSULE	NORTRIPTYLINE HCL	1	
NORTRIPTYLINE 10 MG/5 ML ORAL SOLUTION	NORTRIPTYLINE HCL	1	
NORVIR 100 MG POWDER PACKET	RITONAVIR	2	SRX
NOVAVAX COVID SYRINGE (EUA)	COVID VAC 24-25(12Y UP)/ADJ/PF	2	
NOVAVAX COVID VIAL (EUA)	COVID VAC 23-24 XBB.1.5/ADJ/PF	2	
NOVAVAX COVID-19 VACCINE, ADJ (EUA)	COVID19 VAC,(NOVAVAX)/ADJ/PF	2	
NOVOFINE AUTOCOVER NEEDLE 30G	PEN NEEDLE, DIABETIC, SAFETY	2	
NOVOFINE NEEDLE 32G	PEN NEEDLE, DIABETIC	2	
NOVOFINE PLUS PEN NEEDLE 32G 1/6"	PEN NEEDLE, DIABETIC	2	
NOVOLOG 100 UNIT/ML FLEXPEN	INSULIN ASPART	3	QL, ST
NOVOLOG 100 UNIT/ML PENFILL	INSULIN ASPART	3	QL, ST
NOVOLOG 100 UNIT/ML VIAL	INSULIN ASPART	3	QL, ST
NOVOLOG MIX 70-30 FLEXPEN	INSULIN ASPART PROT/INSULN ASP	3	QL, ST
NOVOLOG MIX 70-30 VIAL	INSULIN ASPART PROT/INSULN ASP	3	QL, ST
NOVOPEN ECHO INSULIN DEVICE	INSULIN ADMIN. SUPPLIES	2	
NP THYROID 15 MG TABLET	THYROID,PORK	1	
NP THYROID 30 MG TABLET	THYROID,PORK	1	
NP THYROID 60 MG TABLET	THYROID,PORK	1	
NP THYROID 90 MG TABLET	THYROID,PORK	1	
NP THYROID 120 MG TABLET	THYROID,PORK	1	
NUCYNTA ER 50 MG TABLET	TAPENTADOL HCL	3	PA
NUCYNTA ER 100 MG TABLET	TAPENTADOL HCL	3	PA
NUCYNTA ER 150 MG TABLET	TAPENTADOL HCL	3	PA
NUCYNTA ER 200 MG TABLET	TAPENTADOL HCL	3	PA
NUCYNTA ER 250 MG TABLET	TAPENTADOL HCL	3	PA
NUEDEXTA 20-10 MG CAPSULE	DEXTROMETHORPHAN HBR/QUINIDINE	3	PA, QL
NYAMYC 100,000 UNIT/GM POWDER	NYSTATIN	1	
NYLIA 1-35 28 TABLET	NORETHINDRONE-ETHIN. ESTRADIOL	1	
NYLIA 7-7-7-28 TABLET	NORETHINDRONE-ETHIN. ESTRADIOL	1	
NYMYO 0.25-0.035 MG (28) TABLET	NORGESTIMATE-ETHINYL ESTRADIOL	1	

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Medication Name	Generic Name	Tier	Notes
NYSTATIN 100,000 UNIT/GM CREAM	NYSTATIN	1	
NYSTATIN 100,000 UNIT/GM OINTMENT	NYSTATIN	1	
NYSTATIN 100,000 UNIT/GM POWDER	NYSTATIN	1	
NYSTATIN 100,000 UNIT/ML ORAL SUSPENSION	NYSTATIN	1	
NYSTATIN 500,000 UNIT/5 ML ORAL SUSPENSION	NYSTATIN	1	
NYSTATIN 500,000 UNIT ORAL TABLET	NYSTATIN	1	
NYSTATIN-TRIAMCINOLONE CREAM	NYSTATIN/TRIAMCINOLONE ACET	1	
NYSTATIN-TRIAMCINOLONE OINTMENT	NYSTATIN/TRIAMCINOLONE ACET	1	
NYSTOP 100,000 UNIT/GM POWDER	NYSTATIN	1	
NYVEPRIA 6 MG/0.6 ML SYRINGE	PEGFILGRASTIM-APGF	4	PA, SRX
OBSTETRIX DHA COMBO PAK	PRENATAL 12/IRON/FOLIC/DSS/OM3	1	
OCELLA 3 MG-0.03 MG TABLET	ETHINYL ESTRADIOL/DROSPIRENONE	1	
OCTREOTIDE 50 MCG/ML AMPULE	OCTREOTIDE ACETATE	2	PA, SRX
OCTREOTIDE 100 MCG/ML AMPULE	OCTREOTIDE ACETATE	2	PA, SRX
OCTREOTIDE 500 MCG/ML AMPULE	OCTREOTIDE ACETATE	2	PA, SRX
OCTREOTIDE 50 MCG/ML SYRINGE	OCTREOTIDE ACETATE	2	PA, SRX
OCTREOTIDE 100 MCG/ML SYRINGE	OCTREOTIDE ACETATE	2	PA, SRX
OCTREOTIDE 500 MCG/ML SYRINGE	OCTREOTIDE ACETATE	2	PA, SRX
OCTREOTIDE 0.05 MG/ML VIAL	OCTREOTIDE ACETATE	2	PA, SRX
OCTREOTIDE 50 MCG/ML VIAL	OCTREOTIDE ACETATE	2	PA, SRX
OCTREOTIDE 100 MCG/ML VIAL	OCTREOTIDE ACETATE	2	PA, SRX
OCTREOTIDE 500 MCG/ML VIAL	OCTREOTIDE ACETATE	2	PA, SRX
OCTREOTIDE 1,000 MCG/5 ML VIAL	OCTREOTIDE ACETATE	2	PA, SRX
OCTREOTIDE 5,000 MCG/5 ML VIAL	OCTREOTIDE ACETATE	2	PA, SRX
ODACTRA 12 SQ-HDM SUBLINGUAL TABLET	MITE,D.FARINAE-D.PTERONYSSINUS	3	PA, QL
ODEFSEY TABLET	EMTRICITAB/RILPIVIRI/TENOF ALA	3	QL, SRX
ODOMZO 200 MG CAPSULE	SONIDEGIB PHOSPHATE	4	PA, QL, SRX
OFEV 100 MG CAPSULE	NINTEDANIB ESYLATE	4	PA, LDD, SRX
OFEV 150 MG CAPSULE	NINTEDANIB ESYLATE	4	PA, LDD, SRX
OFLOXACIN 0.3% EAR DROPS	OFLOXACIN	1	
OFLOXACIN 0.3% EYE DROPS	OFLOXACIN	1	
OFLOXACIN 300 MG TABLET	OFLOXACIN	1	
OFLOXACIN 400 MG TABLET	OFLOXACIN	1	
OLANZAPINE 5 MG ODT TABLET	OLANZAPINE	1	
OLANZAPINE 10 MG ODT TABLET	OLANZAPINE	1	
OLANZAPINE 15 MG ODT TABLET	OLANZAPINE	1	
OLANZAPINE 20 MG ODT TABLET	OLANZAPINE	1	
OLANZAPINE 2.5 MG TABLET	OLANZAPINE	1	
OLANZAPINE 5 MG TABLET	OLANZAPINE	1	
OLANZAPINE 7.5 MG TABLET	OLANZAPINE	1	
OLANZAPINE 10 MG TABLET	OLANZAPINE	1	

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Medication Name	Generic Name	Tier	Notes
OLANZAPINE 15 MG TABLET	OLANZAPINE	1	
OLANZAPINE 20 MG TABLET	OLANZAPINE	1	
OLANZAPINE-FLUOXETINE 3-25 MG CAPSULE	OLANZAPINE/FLUOXETINE HCL	2	
OLANZAPINE-FLUOXETINE 6-25 MG CAPSULE	OLANZAPINE/FLUOXETINE HCL	2	
OLANZAPINE-FLUOXETINE 6-50 MG CAPSULE	OLANZAPINE/FLUOXETINE HCL	2	
OLANZAPINE-FLUOXETINE 12-25 MG CAPSULE	OLANZAPINE/FLUOXETINE HCL	2	
OLANZAPINE-FLUOXETINE 12-50 MG CAPSULE	OLANZAPINE/FLUOXETINE HCL	2	
OLMESARTAN 5 MG TABLET	OLMESARTAN MEDOXOMIL	1	
OLMESARTAN 20 MG TABLET	OLMESARTAN MEDOXOMIL	1	
OLMESARTAN 40 MG TABLET	OLMESARTAN MEDOXOMIL	1	
OLMESARTAN-AMLODIPINE-HCTZ 20-5-12.5 MG TABLET	OLMESARTAN/AMLODIPIN/HCTHIAZID	1	
OLMESARTAN-AMLODIPINE-HCTZ 40-10-12.5 MG TABLET	OLMESARTAN/AMLODIPIN/HCTHIAZID	1	
OLMESARTAN-AMLODIPINE-HCTZ 40-10-25 MG TABLET	OLMESARTAN/AMLODIPIN/HCTHIAZID	1	
OLMESARTAN-AMLODIPINE-HCTZ 40-5-12.5 MG TABLET	OLMESARTAN/AMLODIPIN/HCTHIAZID	1	
OLMESARTAN-AMLODIPINE-HCTZ 40-5-25 MG TABLET	OLMESARTAN/AMLODIPIN/HCTHIAZID	1	
OLMESARTAN-HCTZ 20-12.5 MG TABLET	OLMESARTAN/HYDROCHLOROTHIAZIDE	1	
OLMESARTAN-HCTZ 40-12.5 MG TABLET	OLMESARTAN/HYDROCHLOROTHIAZIDE	1	
OLMESARTAN-HCTZ 40-25 MG TABLET	OLMESARTAN/HYDROCHLOROTHIAZIDE	1	
OLOPATADINE 0.1% EYE DROPS	OLOPATADINE HCL	1	
OLOPATADINE 0.2% EYE DROPS	OLOPATADINE HCL	1	
OLOPATADINE 665 MCG NASAL SPRAY	OLOPATADINE HCL	1	
OMEGA-3 ETHYL ESTERS 1 GM CAPSULE	OMEGA-3 ACID ETHYL ESTERS	1	
OMEPRAZOLE DR 10 MG CAPSULE	OMEPRAZOLE	1	QL
OMEPRAZOLE DR 20 MG CAPSULE	OMEPRAZOLE	1	QL
OMEPRAZOLE DR 40 MG CAPSULE	OMEPRAZOLE	1	QL
OMNIPOD 5 (G6/LIBRE 2 PLUS)	INSULIN PUMP CART,AUTO,BT,G6/L	2	QL
OMNIPOD 5 DEX G7 G6 INTRO (GEN 5)	INSULIN PMP CART,AUT,G6/7,CNTR	2	QL
OMNIPOD 5 DEX G7 G6 PODS (GEN 5)	INSULIN PUMP CART,AUTO,BT,G6/7	2	QL
OMNIPOD 5 G6-G7 INTRO KIT (GEN 5)	INSULIN PMP CART,AUT,G6/7,CNTR	2	QL
OMNIPOD 5 G6-G7 PODS (GEN 5)	INSULIN PUMP CART,AUTO,BT,G6/7	2	QL
OMNIPOD 5 INTRO (G6/LIBRE 2 PLUS)	INSULIN PMP CART,BT,G6/L2/CNTR	2	QL
OMNIPOD CLASSIC PDM KIT (GEN 3)	INSULIN PUMP CONTROLLER, RF	2	QL
OMNIPOD CLASSIC PODS (GEN 3) 5 PACK	INSULIN PUMP CART,CONT INF,RF	2	QL
OMNIPOD DASH INTRO KIT (GEN 4)	INSULIN PUMP CART,CONT BT/CNTR	2	QL
OMNIPOD DASH PODS (GEN 4) 5 PACK	INSULIN PUMP CART,CONT INF,BT	2	QL
OMNIPOD GO 10 UNIT/DAY PODS	INSULIN PUMP CART,10 UNITS/DAY	2	QL
OMNIPOD GO 15 UNIT/DAY PODS	INSULIN PUMP CART,15 UNITS/DAY	2	QL
OMNIPOD GO 20 UNIT/DAY PODS	INSULIN PUMP CART,20 UNITS/DAY	2	QL
OMNIPOD GO 25 UNIT/DAY PODS	INSULIN PUMP CART,25 UNITS/DAY	2	QL
OMNIPOD GO 30 UNIT/DAY PODS	INSULIN PUMP CART,30 UNITS/DAY	2	QL
OMNIPOD GO 35 UNIT/DAY PODS	INSULIN PUMP CART,35 UNITS/DAY	2	QL

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Medication Name	Generic Name	Tier	Notes
OMNIPOD GO 40 UNIT/DAY PODS	INSULIN PUMP CART,40 UNITS/DAY	2	QL
OMNITROPE 5 MG/1.5 ML CARTRIDGE	SOMATROPIN	4	PA
OMNITROPE 10 MG/1.5 ML CARTRIDGE	SOMATROPIN	4	PA
OMNITROPE 5.8 MG VIAL	SOMATROPIN	4	PA
ON CALL EXPRESS CONTROL SOLUTION PAK	BLOOD GLUCOSE CTL HIGH,NML,LOW	2	
ON CALL PLUS CONTROL SOLUTION	BLOOD GLUCOSE CNTL HIGH,NORMAL	2	
ON CALL VIVID CONTROL SOLUTION	BLOOD GLUCOSE CNTL HIGH,NORMAL	2	
ONDANSETRON 4 MG ODT TABLET	ONDANSETRON	1	
ONDANSETRON 8 MG ODT TABLET	ONDANSETRON	1	
ONDANSETRON 4 MG/5 ML ORAL SOLUTION	ONDANSETRON HCL	1	
ONDANSETRON 4 MG TABLET	ONDANSETRON HCL	1	
ONDANSETRON 8 MG TABLET	ONDANSETRON HCL	1	
ONE WAY VALVED MOUTHPIECE	INHALER,ASSIST DEVICE,ACCESORY	2	QL
OPCICON ONE-STEP 1.5 MG TABLET	LEVONORGESTREL	1	
OPILL 0.075 MG TABLET	NORGESTREL	1	QL
OPIUM 10 MG/ML TINCTURE	OPIUM TINCTURE	2	PA
OPTICHAMBER ADULT MASK-LARGE	INHALER,ASSIST DEVICE,ACCESORY	2	QL
OPTICHAMBER DIAMOND VHC	INHALER, ASSIST DEVICES	2	QL
OPTICHAMBER DIAMOND W-LARGE MASK	INHALER,ASSIST DEVICE,LG MASK	2	QL
OPTICHAMBER DIAMOND W-MEDIUM MASK	INHALER,ASSIST DEVICE,MED MASK	2	QL
OPTICHAMBER DIAMOND W-SMALL MASK	INHALER,ASSIST DEV,SMALL MASK	2	QL
OPTION 2 1.5 MG TABLET	LEVONORGESTREL	1	
OPTUMRX GLUCOSE CONTROL SOLUTION	BLOOD GLUCOSE CNTL HIGH,NORMAL	2	
OPVEE 2.7 MG NASAL SPRAY	NALMEFENE HCL	2	
ORACIT ORAL SOLUTION	CITRIC ACID/SODIUM CITRATE	3	
ORAL CITRATE SOLUTION	CITRIC ACID/SODIUM CITRATE	3	
ORALONE 0.1% TOOTHPASTE	TRIAMCINOLONE ACETONIDE	1	
ORENCIA CLICKJECT 125 MG/ML	ABATACEPT	4	PA, QL, SRX
ORENCIA 50 MG/0.4 ML SYRINGE	ABATACEPT	4	PA, QL, SRX
ORENCIA 87.5 MG/0.7 ML SYRINGE	ABATACEPT	4	PA, QL, SRX
ORENCIA 125 MG/ML SYRINGE	ABATACEPT	4	PA, QL, SRX
ORPHENADRINE ER 100 MG TABLET	ORPHENADRINE CITRATE	1	
ORSERDU 86 MG TABLET	ELACESTRANT HCL	4	PA, QL, LDD, SRX
ORSERDU 345 MG TABLET	ELACESTRANT HCL	4	PA, QL, LDD, SRX
OSCIMIN 0.125 MG SUBLINGUAL TABLET	HYOSCYAMINE SULFATE	1	
OSCIMIN 0.125 MG TABLET	HYOSCYAMINE SULFATE	1	
OSELTAMIVIR 30 MG CAPSULE	OSELTAMIVIR PHOSPHATE	1	QL
OSELTAMIVIR 45 MG CAPSULE	OSELTAMIVIR PHOSPHATE	1	QL
OSELTAMIVIR 75 MG CAPSULE	OSELTAMIVIR PHOSPHATE	1	QL
OSELTAMIVIR 6 MG/ML ORAL SUSPENSION	OSELTAMIVIR PHOSPHATE	1	QL
OSMOPREP TABLET	SOD PHOSPHATE MBAS/SOD PHOS,DI	3	

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Medication Name	Generic Name	Tier	Notes
OTEZLA 10-20 MG STARTER 28 DAY	APREMILAST	4	PA, QL, SRX
OTEZLA 10-20-30 MG STARTER 28 DAY	APREMILAST	4	PA, QL, SRX
OTEZLA 20 MG TABLET	APREMILAST	4	PA, QL, SRX
OTEZLA 30 MG TABLET	APREMILAST	4	PA, QL, SRX
OVAL TAPE	DIABETIC SUPPLIES,MISCELL	2	
OXANDROLONE 2.5 MG TABLET	OXANDROLONE	3	PA
OXANDROLONE 10 MG TABLET	OXANDROLONE	3	PA
OXAPROZIN 600 MG CAPLET	OXAPROZIN	1	
OXAPROZIN 600 MG TABLET	OXAPROZIN	1	
OXAZEPAM 10 MG CAPSULE	OXAZEPAM	1	
OXAZEPAM 15 MG CAPSULE	OXAZEPAM	1	
OXAZEPAM 30 MG CAPSULE	OXAZEPAM	1	
OXCARBAZEPINE 300 MG/5 ML ORAL SUSPENSION	OXCARBAZEPINE	1	
OXCARBAZEPINE 150 MG TABLET	OXCARBAZEPINE	1	
OXCARBAZEPINE 300 MG TABLET	OXCARBAZEPINE	1	
OXCARBAZEPINE 600 MG TABLET	OXCARBAZEPINE	1	
OXICONAZOLE 1% CREAM	OXICONAZOLE NITRATE	2	
OXYBUTYNIN 5 MG/5 ML ORAL SOLUTION	OXYBUTYNIN CHLORIDE	1	
OXYBUTYNIN 5 MG/5 ML SYRUP	OXYBUTYNIN CHLORIDE	1	
OXYBUTYNIN 5 MG TABLET	OXYBUTYNIN CHLORIDE	1	
OXYBUTYNIN ER 5 MG TABLET	OXYBUTYNIN CHLORIDE	1	
OXYBUTYNIN ER 10 MG TABLET	OXYBUTYNIN CHLORIDE	1	
OXYBUTYNIN ER 15 MG TABLET	OXYBUTYNIN CHLORIDE	1	
OXYCODONE (IR) 5 MG CAPSULE	OXYCODONE HCL	1	PA
OXYCODONE (IR) 5 MG TABLET	OXYCODONE HCL	1	PA
OXYCODONE (IR) 10 MG TABLET	OXYCODONE HCL	1	PA
OXYCODONE (IR) 15 MG TABLET	OXYCODONE HCL	1	PA
OXYCODONE (IR) 20 MG TABLET	OXYCODONE HCL	1	PA
OXYCODONE (IR) 30 MG TABLET	OXYCODONE HCL	1	PA
OXYCODONE 100 MG/5 ML ORAL CONCENTRATE	OXYCODONE HCL	1	PA
OXYCODONE 5 MG/5 ML ORAL SOLUTION	OXYCODONE HCL	1	PA
OXYCODONE-ACETAMINOPHEN 2.5-325 MG TABLET	OXYCODONE HCL/ACETAMINOPHEN	1	PA
OXYCODONE-ACETAMINOPHEN 5-325 MG TABLET	OXYCODONE HCL/ACETAMINOPHEN	1	PA
OXYCODONE-ACETAMINOPHEN 7.5-325 MG TABLET	OXYCODONE HCL/ACETAMINOPHEN	1	PA
OXYCODONE-ACETAMINOPHEN 10-325 MG TABLET	OXYCODONE HCL/ACETAMINOPHEN	1	PA
OXYMORPHONE 5 MG TABLET	OXYMORPHONE HCL	2	PA
OXYMORPHONE 10 MG TABLET	OXYMORPHONE HCL	2	PA
OXYMORPHONE ER 5 MG TABLET	OXYMORPHONE HCL	2	PA
OXYMORPHONE ER 7.5 MG TABLET	OXYMORPHONE HCL	2	PA
OXYMORPHONE ER 10 MG TABLET	OXYMORPHONE HCL	2	PA
OXYMORPHONE ER 15 MG TABLET	OXYMORPHONE HCL	2	PA

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Medication Name	Generic Name	Tier	Notes
OXYMORPHONE ER 20 MG TABLET	OXYMORPHONE HCL	2	PA
OXYMORPHONE ER 30 MG TABLET	OXYMORPHONE HCL	2	PA
OXYMORPHONE ER 40 MG TABLET	OXYMORPHONE HCL	2	PA
OZEMPIC 0.25-0.5 MG/DOSE PEN INJECTOR	SEMAGLUTIDE	2	PA, QL
OZEMPIC 1 MG/DOSE (4 MG/3 ML) PEN INJECTOR	SEMAGLUTIDE	2	PA, QL
OZEMPIC 2 MG/DOSE (8 MG/3 ML) PEN INJECTOR	SEMAGLUTIDE	2	PA, QL
PACERONE 200 MG TABLET	AMIODARONE HCL	1	
PALIPERIDONE ER 1.5 MG TABLET	PALIPERIDONE	3	
PALIPERIDONE ER 3 MG TABLET	PALIPERIDONE	3	
PALIPERIDONE ER 6 MG TABLET	PALIPERIDONE	3	
PALIPERIDONE ER 9 MG TABLET	PALIPERIDONE	3	
PANCREAZE DR 2,600 UNIT CAPSULE	LIPASE/PROTEASE/AMYLASE	2	
PANCREAZE DR 4,200 UNIT CAPSULE	LIPASE/PROTEASE/AMYLASE	2	
PANCREAZE DR 10,500 UNIT CAPSULE	LIPASE/PROTEASE/AMYLASE	2	
PANCREAZE DR 16,800 UNIT CAPSULE	LIPASE/PROTEASE/AMYLASE	2	
PANCREAZE DR 21,000 UNIT CAPSULE	LIPASE/PROTEASE/AMYLASE	2	
PANCREAZE DR 37,000 UNIT CAPSULE	LIPASE/PROTEASE/AMYLASE	2	
PANDA MASK LARGE	INHALER,ASSIST DEVICE,ACCESORY	2	QL
PANDA MASK MEDIUM	INHALER,ASSIST DEVICE,ACCESORY	2	QL
PANDA MASK SMALL	INHALER,ASSIST DEVICE,ACCESORY	2	QL
PANRETIN 0.1% GEL	ALITRETINOIN	4	SRX
PANTOPRAZOLE DR 20 MG TABLET	PANTOPRAZOLE SODIUM	1	QL
PANTOPRAZOLE DR 40 MG TABLET	PANTOPRAZOLE SODIUM	1	QL
PARADIGM RESERVOIR 1.8 ML	INSULIN PUMP SYRINGE, 1.8 ML	2	
PARADIGM RESERVOIR 3 ML	INSULIN PUMP SYRINGE, 3 ML	2	
PARAGARD T 380-A IUD	COPPER	1	LDD, SRX
PARICALCITOL 1 MCG CAPSULE	PARICALCITOL	1	SRX
PARICALCITOL 2 MCG CAPSULE	PARICALCITOL	1	SRX
PARICALCITOL 4 MCG CAPSULE	PARICALCITOL	1	SRX
PAROEX 0.12% ORAL RINSE	CHLORHEXIDINE GLUCONATE	1	
PAROXETINE 10 MG TABLET	PAROXETINE HCL	1	QL
PAROXETINE 20 MG TABLET	PAROXETINE HCL	1	QL
PAROXETINE 30 MG TABLET	PAROXETINE HCL	1	QL
PAROXETINE 40 MG TABLET	PAROXETINE HCL	1	QL
PAROXETINE MESYLATE 7.5 MG CAPSULE	PAROXETINE MESYLATE	2	QL
PASER GRANULES 4 GM PACKET	AMINOSALICYLIC ACID	3	
PAXLOVID 150-100 MG DOSE PACK	NIRMATRELVIR/RITONAVIR	3	QL
PAXLOVID 300-100 MG DOSE PACK	NIRMATRELVIR/RITONAVIR	3	QL
PAZOPANIB 200 MG TABLET	PAZOPANIB HCL	4	PA, QL, SRX
PC UNIFINE PENTIP NEEDLE 6MM	PEN NEEDLE, DIABETIC	2	
PC UNIFINE PENTIP NEEDLE 8MM	PEN NEEDLE, DIABETIC	2	

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Medication Name	Generic Name	Tier	Notes
PC UNIFINE PENTIP NEEDLE 12MM	PEN NEEDLE, DIABETIC	2	
PEAK-AIR PEAK FLOW METER	PEAK FLOW METER	2	
PEDIARIX 0.5 ML SYRINGE	HEP B VACCINE/DP(A)T-POLIO/PF	2	
PEDIATRIC MEDIUM MASK	INHALER,ASSIST DEVICE,ACCESORY	2	QL
PEDIATRIC MOUTHPIECE	INHALER,ASSIST DEVICE,ACCESORY	2	QL
PEDIATRIC PANDA MASK	INHALER,ASSIST DEVICE,ACCESORY	2	QL
PEDIATRIC SMALL MASK	INHALER,ASSIST DEVICE,ACCESORY	2	QL
PEDVAXHIB VACCINE VIAL	HAEMPH B POLYSAC CONJ-MENIN/PF	2	
PEG 3350-ELECTROLYTE ORAL SOLUTION	SODIUM CHLORIDE/NAHCO3/KCL/PEG	1	
PEG3350 100-7.5-2.691-1.01-5.9 POWDER PACKET	PEG3350/SOD SUL/NACL/KCL/ASB/C	1	
PEG-3350 AND ELECTROLYTES ORAL SOLUTION	PEG3350/SOD SULF,BICARB,CL/KCL	1	
PEGASYS 180 MCG/0.5 ML SYRINGE	PEGINTERFERON ALFA-2A	4	PA, SRX
PEGASYS 180 MCG/ML VIAL	PEGINTERFERON ALFA-2A	4	PA, SRX
PEG-PREP KIT	BISAC/NACL/NAHCO3/KCL/PEG 3350	1	
PEN NEEDLE 29G 12MM	PEN NEEDLE, DIABETIC	2	
PEN NEEDLE 30G 5/16"	PEN NEEDLE, DIABETIC	2	
PEN NEEDLE 30G 5MM	PEN NEEDLE, DIABETIC	2	
PEN NEEDLE 30G 8MM	PEN NEEDLE, DIABETIC	2	
PEN NEEDLE 31G 1/4"	PEN NEEDLE, DIABETIC	2	
PEN NEEDLE 31G 3/16"	PEN NEEDLE, DIABETIC	2	
PEN NEEDLE 31G 5/16"	PEN NEEDLE, DIABETIC	2	
PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC	2	
PEN NEEDLE 31G 6MM	PEN NEEDLE, DIABETIC	2	
PEN NEEDLE 31G 8MM	PEN NEEDLE, DIABETIC	2	
PEN NEEDLE 32G 3/16"	PEN NEEDLE, DIABETIC	2	
PEN NEEDLE 32G 1/4"	PEN NEEDLE, DIABETIC	2	
PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
PEN NEEDLE 32G 5/32"	PEN NEEDLE, DIABETIC	2	
PEN NEEDLE 33G 4MM	PEN NEEDLE, DIABETIC	2	
PENBRAYA KIT	MENING A,C,Y,W COMP/N.MEN B/PF	2	
PENCICLOVIR 1% CREAM	PENCICLOVIR	3	PA, QL
PENICILLAMINE 250 MG TABLET	PENICILLAMINE	4	PA, QL, SRX
PENICILLIN VK 125 MG/5 ML ORAL SOLUTION	PENICILLIN V POTASSIUM	1	
PENICILLIN VK 250 MG/5 ML ORAL SOLUTION	PENICILLIN V POTASSIUM	1	
PENICILLIN VK 250 MG TABLET	PENICILLIN V POTASSIUM	1	
PENICILLIN VK 500 MG TABLET	PENICILLIN V POTASSIUM	1	
PENTACEL VIAL KIT	DIPHT,PERT(A),TET-POLIO/HIB/PF	2	
PENTAMIDINE 300 MG INHALATION POWDER	PENTAMIDINE ISETHIONATE	2	
PENTAZOCINE-NALOXONE TABLET	PENTAZOCINE HCL/NALOXONE HCL	1	PA
PENTIPS PEN NEEDLE 29G 1/2"	PEN NEEDLE, DIABETIC	2	
PENTIPS PEN NEEDLE 29G 12MM	PEN NEEDLE, DIABETIC	2	

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Medication Name	Generic Name	Tier	Notes
PENTIPS PEN NEEDLE 31G 3/16"	PEN NEEDLE, DIABETIC	2	
PENTIPS PEN NEEDLE 31G 1/4"	PEN NEEDLE, DIABETIC	2	
PENTIPS PEN NEEDLE 31G 5/16"	PEN NEEDLE, DIABETIC	2	
PENTIPS PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC	2	
PENTIPS PEN NEEDLE 31G 6MM	PEN NEEDLE, DIABETIC	2	
PENTIPS PEN NEEDLE 31G 8MM	PEN NEEDLE, DIABETIC	2	
PENTIPS PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
PENTIPS PEN NEEDLE 32G 1/4"	PEN NEEDLE, DIABETIC	2	
PENTIPS PEN NEEDLE 32G 5/32"	PEN NEEDLE, DIABETIC	2	
PENTOXIFYLLINE ER 400 MG TABLET	PENTOXIFYLLINE	1	
PERFECT POINT NEEDLE 25G 1"	NEEDLES, SAFETY	2	
PERINDOPRIL 2 MG TABLET	PERINDOPRIL ERBUMINE	1	
PERINDOPRIL 4 MG TABLET	PERINDOPRIL ERBUMINE	1	
PERINDOPRIL 8 MG TABLET	PERINDOPRIL ERBUMINE	1	
PERIOGARD 0.12% ORAL RINSE	CHLORHEXIDINE GLUCONATE	1	
PERMETHRIN 5% CREAM	PERMETHRIN	1	
PERPHENAZINE 2 MG TABLET	PERPHENAZINE	1	
PERPHENAZINE 4 MG TABLET	PERPHENAZINE	1	
PERPHENAZINE 8 MG TABLET	PERPHENAZINE	1	
PERPHENAZINE 16 MG TABLET	PERPHENAZINE	1	
PERPHENAZINE-AMITRIPTYLINE 2 MG-10 MG TABLET	PERPHENAZINE/AMITRIPTYLINE HCL	1	
PERPHENAZINE-AMITRIPTYLINE 2 MG-25 MG TABLET	PERPHENAZINE/AMITRIPTYLINE HCL	1	
PERPHENAZINE-AMITRIPTYLINE 4 MG-10 MG TABLET	PERPHENAZINE/AMITRIPTYLINE HCL	1	
PERPHENAZINE-AMITRIPTYLINE 4 MG-25 MG TABLET	PERPHENAZINE/AMITRIPTYLINE HCL	1	
PERPHENAZINE-AMITRIPTYLINE 4 MG-50 MG TABLET	PERPHENAZINE/AMITRIPTYLINE HCL	1	
PERSONAL BEST PEAK FLOW METER	PEAK FLOW METER	2	
PFIZER COVID (6M-4Y) EUA	COVID VAC 24-25(6M-4Y)(PFI)/PF	2	
PFIZER COVID (5-11Y) EUA	COVID VAC 24-25(5-11Y)(PFI)/PF	2	
PFIZER COVID (6M-4Y) VACCINE - MAROON	COVID-19 VAC, TRIS(PFIZER)/PF	2	
PFIZER COVID (5-11Y) VACCINE - ORANGE	COVID-19 VAC, TRIS(PFIZER)/PF	2	
PFIZER COVID (12Y UP) VACCINE - GRAY	COVID-19 VAC, TRIS(PFIZER)/PF	2	
PFIZER COVID BIVAL (6MO-4Y) EUA	COVID-19 VAC, BV (PFIZER)/PF	2	
PFIZER COVID BIVAL (5-11YR) EUA	COVID-19 VAC, BV (PFIZER)/PF	2	
PFIZER COVID BIVAL (12Y UP) EUA	COVID-19 VAC, BV (PFIZER)/PF	2	
PFIZER COVID-19 VACCINE - PURPLE	COVID-19 VACC, MRNA(PFIZER)/PF	2	
PHASEAL PROTECTOR 14	TRANSFER DEVICE, CLOSED SYSTEM	2	
PHASEAL PROTECTOR 21	TRANSFER DEVICE, CLOSED SYSTEM	2	
PHASEAL PROTECTOR 28	TRANSFER DEVICE, CLOSED SYSTEM	2	
PHASEAL PROTECTOR 50	TRANSFER DEVICE, CLOSED SYSTEM	2	
PHENAZOPYRIDINE 100 MG TABLET	PHENAZOPYRIDINE HCL	1	
PHENAZOPYRIDINE 200 MG TABLET	PHENAZOPYRIDINE HCL	1	

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Medication Name	Generic Name	Tier	Notes
PHENELZINE 15 MG TABLET	PHENELZINE SULFATE	1	
PHENOBARBITAL 20 MG/5 ML ORAL SOLUTION	PHENOBARBITAL	1	
PHENOBARBITAL 30 MG/7.5 ML ORAL SOLUTION	PHENOBARBITAL	1	
PHENOBARBITAL 60 MG/15 ML ORAL SOLUTION	PHENOBARBITAL	1	
PHENOBARBITAL 30 MG TABLET	PHENOBARBITAL	1	
PHENOBARBITAL 15 MG TABLET	PHENOBARBITAL	1	
PHENOBARBITAL 16.2 MG TABLET	PHENOBARBITAL	1	
PHENOBARBITAL 32.4 MG TABLET	PHENOBARBITAL	1	
PHENOBARBITAL 60 MG TABLET	PHENOBARBITAL	1	
PHENOBARBITAL 64.8 MG TABLET	PHENOBARBITAL	1	
PHENOBARBITAL 97.2 MG TABLET	PHENOBARBITAL	1	
PHENOBARBITAL 100 MG TABLET	PHENOBARBITAL	1	
PHENOXYBENZAMINE 10 MG CAPSULE	PHENOXYBENZAMINE HCL	4	
PHENYLEPHRINE 2.5% EYE DROPS	PHENYLEPHRINE HCL	1	
PHENYLEPHRINE 10% EYE DROPS	PHENYLEPHRINE HCL	1	
PHENYTOIN 50 MG CHEWABLE TABLET	PHENYTOIN	1	
PHENYTOIN 50 MG INFATAB CHEW	PHENYTOIN	1	
PHENYTOIN 100 MG/4 ML ORAL SUSPENSION	PHENYTOIN	1	
PHENYTOIN 125 MG/5 ML ORAL SUSPENSION	PHENYTOIN	1	
PHENYTOIN SODIUM EXT 100 MG CAPSULE	PHENYTOIN SODIUM EXTENDED	1	
PHENYTOIN SODIUM EXT 200 MG CAPSULE	PHENYTOIN SODIUM EXTENDED	1	
PHENYTOIN SODIUM EXT 300 MG CAPSULE	PHENYTOIN SODIUM EXTENDED	1	
PHEXXI 1.8-1-0.4% VAGINAL GEL	LACTIC ACID/CITRIC/POTASSIUM	1	
PHILITH 0.4-0.035 MG TABLET	NORETHINDRONE-ETHIN. ESTRADIOL	1	
PHYSIOSOL IRRIGATION SOLUTION	PHYSIOLOGICAL IRRIG SOLN NO.1	3	
PHYTONADIONE 5 MG TABLET	PHYTONADIONE (VIT K1)	3	
PIKO 1 FLOW METER	PEAK FLOW METER	2	
PILOCARPINE 1% EYE DROPS	PILOCARPINE HCL	1	
PILOCARPINE 2% EYE DROPS	PILOCARPINE HCL	1	
PILOCARPINE 4% EYE DROPS	PILOCARPINE HCL	1	
PILOCARPINE 5 MG TABLET	PILOCARPINE HCL	1	
PILOCARPINE 7.5 MG TABLET	PILOCARPINE HCL	1	
PIMECROLIMUS 1% CREAM	PIMECROLIMUS	3	
PIMOZIDE 1 MG TABLET	PIMOZIDE	1	
PIMOZIDE 2 MG TABLET	PIMOZIDE	1	
PIMTREA 28 DAY TABLET	DESOG-E.ESTRADIOL/E.ESTRADIOL	1	
PINDOLOL 5 MG TABLET	PINDOLOL	1	
PINDOLOL 10 MG TABLET	PINDOLOL	1	
PIOGLITAZONE 15 MG TABLET	PIOGLITAZONE HCL	1	
PIOGLITAZONE 30 MG TABLET	PIOGLITAZONE HCL	1	
PIOGLITAZONE 45 MG TABLET	PIOGLITAZONE HCL	1	

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Medication Name	Generic Name	Tier	Notes
PIOGLITAZONE-GLIMEPIRIDE 30 MG-2 MG TABLET	PIOGLITAZONE HCL/GLIMEPIRIDE	1	
PIOGLITAZONE-GLIMEPIRIDE 30 MG-4 MG TABLET	PIOGLITAZONE HCL/GLIMEPIRIDE	1	
PIOGLITAZONE-METFORMIN 15 MG-500 MG TABLET	PIOGLITAZONE HCL/METFORMIN HCL	1	
PIOGLITAZONE-METFORMIN 15 MG-850 MG TABLET	PIOGLITAZONE HCL/METFORMIN HCL	1	
PIP GLUCOSE L1-L2 CONTROL SOLUTION	BLOOD GLUCOSE CONTROL HIGH,LOW	2	
PIP PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC	2	
PIP PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
PIRFENIDONE 267 MG CAPSULE	PIRFENIDONE	4	PA, SRX
PIRFENIDONE 267 MG TABLET	PIRFENIDONE	4	PA, SRX
PIRFENIDONE 801 MG TABLET	PIRFENIDONE	4	PA, SRX
PIRMELLA 1-35 28 TABLET	NORETHINDRONE-ETHIN. ESTRADIOL	1	
PIRMELLA 7-7-7-28 TABLET	NORETHINDRONE-ETHIN. ESTRADIOL	1	
PIROXICAM 10 MG CAPSULE	PIROXICAM	1	
PIROXICAM 20 MG CAPSULE	PIROXICAM	1	
PLAN B ONE-STEP 1.5 MG TABLET	LEVONORGESTREL	3	
PNEUMOVAX 23 SYRINGE	PNEUMOCOCCAL 23-VAL P-SAC VAC	2	
PNEUMOVAX 23 VIAL	PNEUMOCOCCAL 23-VAL P-SAC VAC	2	
PNV 29-1 TABLET	PRENATAL VIT,CALC76/IRON/FOLIC	1	
PNV PRENATAL PLUS MULTIVITAMIN TABLET	PNV,CALCIUM 72/IRON/FOLIC ACID	1	
PNV-DHA + DOCUSATE SOFTGEL	PNV 66/IRON/FOLIC/DOCUSATE/DHA	1	
PNV-DHA SOFTGEL	MULTIVIT 47/IRON/FOLATE 1/DHA	1	
PNV-OMEGA SOFTGEL	MV-MINS 71/IRON/FOLIC NO.1/DHA	1	
PNV-SELECT TABLET	PRENATAL,CALC.40/IRON/FOLATE 1	1	
POCKET CHAMBER	INHALER, ASSIST DEVICES	2	QL
POCKET PEAK FLOW METER	PEAK FLOW METER	2	
PODOFILOX 0.5% TOPICAL SOLUTION	PODOFILOX	1	
POLY HUB NEEDLE 18G 1"	NEEDLES, DISPOSABLE	2	
POLY HUB NEEDLE 18G 1.5"	NEEDLES, DISPOSABLE	2	
POLY HUB NEEDLE 21G 1"	NEEDLES, DISPOSABLE	2	
POLY HUB NEEDLE 21G 1.5"	NEEDLES, DISPOSABLE	2	
POLY HUB NEEDLE 22G 1"	NEEDLES, DISPOSABLE	2	
POLY HUB NEEDLE 22G 1.5"	NEEDLES, DISPOSABLE	2	
POLY HUB NEEDLE 23G 1"	NEEDLES, DISPOSABLE	2	
POLY HUB NEEDLE 23G 1.5"	NEEDLES, DISPOSABLE	2	
POLY HUB NEEDLE 25G 1"	NEEDLES, DISPOSABLE	2	
POLY HUB NEEDLE 25G 1.5"	NEEDLES, DISPOSABLE	2	
POLY HUB NEEDLE 25G 5/8"	NEEDLES, DISPOSABLE	2	
POLY HUB NEEDLE 27G 1.25"	NEEDLES, DISPOSABLE	2	
POLY HUB NEEDLE 27G 1/2"	NEEDLES, DISPOSABLE	2	
POLY HUB NEEDLE 30G 1/2"	NEEDLES, DISPOSABLE	2	
POLYCIN EYE OINTMENT	BACITRACIN/POLYMYXIN B SULFATE	1	

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Medication Name	Generic Name	Tier	Notes
POLYMYXIN B-TMP EYE DROPS	POLYMYXIN B SULF/TRIMETHOPRIM	1	
POMALYST 1 MG CAPSULE	POMALIDOMIDE	4	PA, QL, LDD, SRX
POMALYST 2 MG CAPSULE	POMALIDOMIDE	4	PA, QL, LDD, SRX
POMALYST 3 MG CAPSULE	POMALIDOMIDE	4	PA, QL, LDD, SRX
POMALYST 4 MG CAPSULE	POMALIDOMIDE	4	PA, QL, LDD, SRX
PORTIA-28 TABLET	LEVONORGESTREL/ETHIN.ESTRADIOL	1	
POSACONAZOLE 200 MG/5 ML ORAL SUSPENSION	POSACONAZOLE	3	
POSACONAZOLE DR 100 MG TABLET	POSACONAZOLE	3	QL
POTASSIUM CHLORIDE ER 8 MEQ CAPSULE	POTASSIUM CHLORIDE	1	
POTASSIUM CHLORIDE ER 10 MEQ CAPSULE	POTASSIUM CHLORIDE	1	
POTASSIUM CHLORIDE 10% (20 MEQ/15 ML) ORAL SOLUTION	POTASSIUM CHLORIDE	1	
POTASSIUM CHLORIDE 10% (40 MEQ/30 ML) ORAL SOLUTION	POTASSIUM CHLORIDE	1	
POTASSIUM CHLORIDE 20% (40 MEQ/15 ML) ORAL SOLUTION	POTASSIUM CHLORIDE	1	
POTASSIUM CHLORIDE 20 MEQ PACKET	POTASSIUM CHLORIDE	1	
POTASSIUM CHLORIDE ER 8 MEQ TABLET	POTASSIUM CHLORIDE	1	
POTASSIUM CHLORIDE ER 10 MEQ TABLET	POTASSIUM CHLORIDE	1	
POTASSIUM CHLORIDE ER 15 MEQ TABLET	POTASSIUM CHLORIDE	1	
POTASSIUM CHLORIDE ER 20 MEQ TABLET	POTASSIUM CHLORIDE	1	
POTASSIUM CITRATE ER 5 MEQ TABLET	POTASSIUM CITRATE	1	
POTASSIUM CITRATE ER 10 MEQ TABLET	POTASSIUM CITRATE	1	
POTASSIUM CITRATE ER 15 MEQ TABLET	POTASSIUM CITRATE	1	
POTASSIUM IODIDE 1 GM/ML ORAL SOLUTION	POTASSIUM IODIDE	3	
PR NATAL 400 COMBO PACK	PRENATAL 53/IRON/FOLIC AC/OMG3	1	
PR NATAL 430 COMBO PACK	PRENATAL 54/IRON/FOLIC AC/OMG3	1	
PR NATAL 400 EC COMBO PACK	PNV19/IRON BG,S.P/FOLIC AC/OM3	1	
PR NATAL 430 EC COMBO PACK	PRENATAL VIT 55/IRON/FOLIC/OM3	1	
PRAMIPEXOLE 0.125 MG TABLET	PRAMIPEXOLE DI-HCL	1	
PRAMIPEXOLE 0.25 MG TABLET	PRAMIPEXOLE DI-HCL	1	
PRAMIPEXOLE 0.5 MG TABLET	PRAMIPEXOLE DI-HCL	1	
PRAMIPEXOLE 0.75 MG TABLET	PRAMIPEXOLE DI-HCL	1	
PRAMIPEXOLE 1 MG TABLET	PRAMIPEXOLE DI-HCL	1	
PRAMIPEXOLE 1.5 MG TABLET	PRAMIPEXOLE DI-HCL	1	
PRAMIPEXOLE ER 0.375 MG TABLET	PRAMIPEXOLE DI-HCL	2	
PRAMIPEXOLE ER 0.75 MG TABLET	PRAMIPEXOLE DI-HCL	2	
PRAMIPEXOLE ER 1.5 MG TABLET	PRAMIPEXOLE DI-HCL	2	
PRAMIPEXOLE ER 2.25 MG TABLET	PRAMIPEXOLE DI-HCL	2	
PRAMIPEXOLE ER 3 MG TABLET	PRAMIPEXOLE DI-HCL	2	
PRAMIPEXOLE ER 3.75 MG TABLET	PRAMIPEXOLE DI-HCL	2	
PRAMIPEXOLE ER 4.5 MG TABLET	PRAMIPEXOLE DI-HCL	2	
PRAMOSONE 1% LOTION	HYDROCORTISONE/PRAMOXINE	3	
PRAMOSONE 2.5%-1% LOTION	HYDROCORTISONE/PRAMOXINE	3	

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Medication Name	Generic Name	Tier	Notes
PRAMOSONE 1%-1% OINTMENT	HYDROCORTISONE/PRAMOXINE	3	
PRAMOSONE 2.5%-1% OINTMENT	HYDROCORTISONE/PRAMOXINE	3	
PRASUGREL 5 MG TABLET	PRASUGREL HCL	1	
PRASUGREL 10 MG TABLET	PRASUGREL HCL	1	
PRAVASTATIN 10 MG TABLET	PRAVASTATIN SODIUM	1	
PRAVASTATIN 20 MG TABLET	PRAVASTATIN SODIUM	1	
PRAVASTATIN 40 MG TABLET	PRAVASTATIN SODIUM	1	
PRAVASTATIN 80 MG TABLET	PRAVASTATIN SODIUM	1	
PRAZIQUANTEL 600 MG TABLET	PRAZIQUANTEL	3	
PRAZOSIN 1 MG CAPSULE	PRAZOSIN HCL	1	
PRAZOSIN 2 MG CAPSULE	PRAZOSIN HCL	1	
PRAZOSIN 5 MG CAPSULE	PRAZOSIN HCL	1	
PRECISION XTRA MONITOR	BLOOD GLUCOSE METER	1	
PRECISION XTRA TEST STRIP	BLOOD SUGAR DIAGNOSTIC	2	
PREDNICARBATE 0.1% CREAM	PREDNICARBATE	1	
PREDNICARBATE 0.1% OINTMENT	PREDNICARBATE	1	
PREDNISOLONE 1% EYE DROPS	PREDNISOLONE SODIUM PHOSPHATE	1	
PREDNISOLONE 10 MG ODT TABLET	PREDNISOLONE SODIUM PHOSPHATE	2	
PREDNISOLONE 15 MG ODT TABLET	PREDNISOLONE SODIUM PHOSPHATE	2	
PREDNISOLONE 30 MG ODT TABLET	PREDNISOLONE SODIUM PHOSPHATE	2	
PREDNISOLONE 5 MG/5 ML ORAL SOLUTION	PREDNISOLONE SODIUM PHOSPHATE	1	
PREDNISOLONE 15 MG/5 ML ORAL SOLUTION	PREDNISOLONE SODIUM PHOSPHATE	1	
PREDNISOLONE 25 MG/5 ML ORAL SOLUTION	PREDNISOLONE SODIUM PHOSPHATE	1	
PREDNISOLONE AC 1% EYE DROPS	PREDNISOLONE ACETATE	1	
PREDNISONE 5 MG/5 ML ORAL SOLUTION	PREDNISONE	1	
PREDNISONE 1 MG TABLET	PREDNISONE	1	
PREDNISONE 2.5 MG TABLET	PREDNISONE	1	
PREDNISONE 5 MG TABLET	PREDNISONE	1	
PREDNISONE 10 MG TABLET	PREDNISONE	1	
PREDNISONE 20 MG TABLET	PREDNISONE	1	
PREDNISONE 50 MG TABLET	PREDNISONE	1	
PREDNISONE 5 MG TABLET DOSE PACK	PREDNISONE	1	
PREDNISONE 10 MG TABLET DOSE PACK	PREDNISONE	1	
PREDNISONE INTENSOL 5 MG/ML ORAL CONCENTRATE	PREDNISONE	2	
PREF PLUS INSULIN SYRINGE 0.3 ML 29G 1/2"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
PREF PLUS SYRINGE 0.5 ML 30G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
PREF PLUS SYRINGE 1 ML 29G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
PREFERRED PLUS SYRINGE 0.3 ML 30G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
PREFERRED PLUS SYRINGE 0.5 ML	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
PREFERRED PLUS SYRINGE 0.5 ML 29G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
PREFERRED PLUS SYRINGE 1 ML	SYRINGE AND NEEDLE,INSULIN,1ML	2	

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Medication Name	Generic Name	Tier	Notes
PREFPLS INSULIN SYRINGE 1 ML 30G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
PREGABALIN 25 MG CAPSULE	PREGABALIN	1	QL
PREGABALIN 50 MG CAPSULE	PREGABALIN	1	QL
PREGABALIN 75 MG CAPSULE	PREGABALIN	1	QL
PREGABALIN 100 MG CAPSULE	PREGABALIN	1	QL
PREGABALIN 150 MG CAPSULE	PREGABALIN	1	QL
PREGABALIN 200 MG CAPSULE	PREGABALIN	1	QL
PREGABALIN 225 MG CAPSULE	PREGABALIN	1	QL
PREGABALIN 300 MG CAPSULE	PREGABALIN	1	QL
PREGABALIN 20 MG/ML ORAL SOLUTION	PREGABALIN	1	QL
PREHEVBRIO 10 MCG/ML VIAL	HEPATITIS B VIRUS VAC S,M,L/PF	2	
PREMARIN 0.3 MG TABLET	ESTROGENS, CONJUGATED	3	
PREMARIN 0.45 MG TABLET	ESTROGENS, CONJUGATED	3	
PREMARIN 0.625 MG TABLET	ESTROGENS, CONJUGATED	3	
PREMARIN 0.9 MG TABLET	ESTROGENS, CONJUGATED	3	
PREMARIN 1.25 MG TABLET	ESTROGENS, CONJUGATED	3	
PRENA1 TRUE COMBO PACK	PRENATAL 105/IRON/FOLIC AC/DHA	1	
PRENAISSANCE CAPSULE	PNV 80/IRON FUM/FOLIC/DSS/DHA	1	
PRENAISSANCE PLUS SOFTGEL	PNV 69/IRON/FOLIC/DOCUSATE/DHA	1	
PRENATAL 19 CHEWABLE TABLET	PNV NO.118/IRON FUMARATE/FA	1	
PRENATAL 19 TABLET	PNV 119/IRON FUM/FOLIC ACID	1	
PRENATAL PLUS IRON TABLET	PNV,CALCIUM 72/IRON,CARB/FOLIC	1	
PRENATAL PLUS VITAMIN-MINERAL TABLET	PRENATAL VIT NO.180/IRON/FOLIC	1	
PRENATAL PLUS-DHA COMBO PACK	PRENATAL72/IRON FUM/FA/OM3/DHA	1	
PRENATAL VITAMIN PLUS LOW IRON TABLET	PNV,CALCIUM 72/IRON/FOLIC ACID	1	
PRENATAL-U CAPSULE	MULTIVIT NO.51/IRON/FOLIC ACID	1	
PREVALITE PACKET	CHOLESTYRAMINE/ASPARTAME	1	
PREVALITE POWDER	CHOLESTYRAMINE/ASPARTAME	1	
PREVENT PEN NEEDLE 31G 1/4"	PEN NEEDLE, DIABETIC, SAFETY	2	
PREVENT PEN NEEDLE 31G 5/16"	PEN NEEDLE, DIABETIC, SAFETY	2	
PREVNAR 20 SYRINGE	PNEUMOC 20-VAL CONJ-DIP CRM/PF	2	
PREVYMIS 20 MG PELLET PACKET	LETERMOVIR	3	PA, QL, SRX
PREVYMIS 120 MG PELLET PACKET	LETERMOVIR	3	PA, QL, SRX
PREVYMIS 240 MG TABLET	LETERMOVIR	3	PA, QL, SRX
PREVYMIS 480 MG TABLET	LETERMOVIR	3	PA, QL, SRX
PREZCOBIX 800 MG-150 MG TABLET	DARUNAVIR/COBICISTAT	2	SRX
PREZISTA 75 MG TABLET	DARUNAVIR	2	SRX
PREZISTA 150 MG TABLET	DARUNAVIR	2	SRX
PREZISTA 100 MG/ML ORAL SUSPENSION	DARUNAVIR	2	SRX
PRIFTIN 150 MG TABLET	RIFAPENTINE	3	
PRIMAQUINE 26.3 MG TABLET	PRIMAQUINE PHOSPHATE	1	

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Medication Name	Generic Name	Tier	Notes
PRIMEAIRE CHAMBER	INHALER, ASSIST DEVICES	2	QL
PRIMIDONE 250 MG TABLET	PRIMIDONE	1	
PRIMIDONE 50 MG TABLET	PRIMIDONE	1	
PRIMSOL 50 MG/5 ML ORAL SOLUTION	TRIMETHOPRIM	3	
PRIORIX VIAL	MEASLES,MUMPS,RUBELLA VACC/PF	2	
PRO COMFORT PEN NEEDLE 32G 1/4"	PEN NEEDLE, DIABETIC	2	
PRO COMFORT PEN NEEDLE 31G 5/16"	PEN NEEDLE, DIABETIC	2	
PRO COMFORT PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
PRO COMFORT PEN NEEDLE 32G 5MM	PEN NEEDLE, DIABETIC	2	
PRO COMFORT SYRINGE 0.5 ML 30G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
PRO COMFORT SYRINGE 0.5 ML 30G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
PRO COMFORT SYRINGE 0.5 ML 31G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
PRO COMFORT SYRINGE 1 ML 30G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
PRO COMFORT SYRINGE 1 ML 31G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
PRO COMFORT SYRINGE 1 ML 30G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
PRO COMFORT SPACER-ADULT MASK	INHALER,ASSIST DEVICE,LG MASK	2	QL
PRO COMFORT SPACER-CHILD MASK	INHALER,ASSIST DEV,SMALL MASK	2	QL
PRO COMFORT SPACER-INFANT MASK	INHALER,ASSIST DEV,SMALL MASK	2	QL
PROBENECID 500 MG TABLET	PROBENECID	1	
PROBENECID-COLCHICINE TABLET	PROBENECID/COLCHICINE	1	
PROCARE SPACER WITH ADULT MASK	INHALER,ASSIST DEVICE,LG MASK	2	QL
PROCARE SPACER WITH CHILD MASK	INHALER,ASSIST DEVICE,MED MASK	2	QL
PROCENTRA 5 MG/5 ML ORAL SOLUTION	DEXTROAMPHETAMINE SULFATE	1	QL
PROCHAMBER HOLDING CHAMBER	INHALER, ASSIST DEVICES	2	QL
PROCHLORPERAZINE 25 MG SUPPOSITORY	PROCHLORPERAZINE	2	
PROCHLORPERAZINE 5 MG TABLET	PROCHLORPERAZINE MALEATE	1	
PROCHLORPERAZINE 10 MG TABLET	PROCHLORPERAZINE MALEATE	1	
PROCTO-MED HC 2.5% CREAM	HYDROCORTISONE	1	
PROCTOSOL-HC 2.5% CREAM	HYDROCORTISONE	1	
PROCTOZONE-HC 2.5% CREAM	HYDROCORTISONE	1	
PRODIGY CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, HIGH	2	
PRODIGY INSULIN SYRINGE 1 ML 28G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
PRODIGY LOW CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, LOW	2	
PRODIGY SYRINGE 0.3 ML 31G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
PRODIGY SYRINGE 0.5 ML 31G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
PROGESTERONE 100 MG CAPSULE	PROGESTERONE, MICRONIZED	1	
PROGESTERONE 200 MG CAPSULE	PROGESTERONE, MICRONIZED	1	
PROGRAF 0.2 MG GRANULE PACKET	TACROLIMUS	3	SRX
PROGRAF 1 MG GRANULE PACKET	TACROLIMUS	3	SRX
PROMETHAZINE 12.5 MG SUPPOSITORY	PROMETHAZINE HCL	2	
PROMETHAZINE 25 MG SUPPOSITORY	PROMETHAZINE HCL	2	

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Medication Name	Generic Name	Tier	Notes
PROMETHAZINE 12.5 MG/10 ML SYRUP	PROMETHAZINE HCL	1	
PROMETHAZINE 12.5 MG TABLET	PROMETHAZINE HCL	1	
PROMETHAZINE 25 MG TABLET	PROMETHAZINE HCL	1	
PROMETHAZINE 50 MG TABLET	PROMETHAZINE HCL	1	
PROMETHAZINE 6.25 MG/5 ML SYRUP	PROMETHAZINE HCL	1	
PROMETHAZINE VC-CODEINE SYRUP	PROMETHAZINE/PHENYLEPH/CODEINE	1	QL
PROMETHAZINE-CODEINE ORAL SOLUTION	PROMETHAZINE HCL/CODEINE	1	QL
PROMETHAZINE-CODEINE SYRUP	PROMETHAZINE HCL/CODEINE	1	QL
PROMETHAZINE-DM 6.25-15 MG/5 ML SYRUP	PROMETHAZINE/DEXTROMETHORPHAN	1	
PROMETHAZINE-PE 6.25-5 MG/5 ML SYRUP	PHENYLEPHRINE HCL/PROMETH HCL	1	
PROMETHAZINE-PE-CODEINE SYRUP	PROMETHAZINE/PHENYLEPH/CODEINE	1	QL
PROMETHAZINE-PHENYLEPHRINE SYRUP	PHENYLEPHRINE HCL/PROMETH HCL	1	
PROMETHEGAN 12.5 MG SUPPOSITORY	PROMETHAZINE HCL	2	
PROMETHEGAN 25 MG SUPPOSITORY	PROMETHAZINE HCL	2	
PROMETHEGAN 50 MG SUPPOSITORY	PROMETHAZINE HCL	2	
PROPAFENONE 150 MG TABLET	PROPAFENONE HCL	1	
PROPAFENONE 225 MG TABLET	PROPAFENONE HCL	1	
PROPAFENONE 300 MG TABLET	PROPAFENONE HCL	1	
PROPAFENONE ER 225 MG CAPSULE	PROPAFENONE HCL	1	
PROPAFENONE ER 325 MG CAPSULE	PROPAFENONE HCL	1	
PROPAFENONE ER 425 MG CAPSULE	PROPAFENONE HCL	1	
PROPARACAINE 0.5% EYE DROPS	PROPARACAINE HCL	1	
PROPRANOLOL 20 MG/5 ML ORAL SOLUTION	PROPRANOLOL HCL	1	
PROPRANOLOL 40 MG/5 ML ORAL SOLUTION	PROPRANOLOL HCL	1	
PROPRANOLOL 10 MG TABLET	PROPRANOLOL HCL	1	
PROPRANOLOL 20 MG TABLET	PROPRANOLOL HCL	1	
PROPRANOLOL 40 MG TABLET	PROPRANOLOL HCL	1	
PROPRANOLOL 60 MG TABLET	PROPRANOLOL HCL	1	
PROPRANOLOL 80 MG TABLET	PROPRANOLOL HCL	1	
PROPRANOLOL ER 60 MG CAPSULE	PROPRANOLOL HCL	1	
PROPRANOLOL ER 80 MG CAPSULE	PROPRANOLOL HCL	1	
PROPRANOLOL ER 120 MG CAPSULE	PROPRANOLOL HCL	1	
PROPRANOLOL ER 160 MG CAPSULE	PROPRANOLOL HCL	1	
PROPRANOLOL-HCTZ 40-25 MG TABLET	PROPRANOLOL/HYDROCHLOROTHIAZID	1	
PROPRANOLOL-HCTZ 80-25 MG TABLET	PROPRANOLOL/HYDROCHLOROTHIAZID	1	
PROPYLTHIOURACIL 50 MG TABLET	PROPYLTHIOURACIL	1	
PROQUAD VIAL	MEASLES,MUMPS,RUB,VARICELLA/PF	2	
PROTRIPTYLINE 5 MG TABLET	PROTRIPTYLINE HCL	3	
PROTRIPTYLINE 10 MG TABLET	PROTRIPTYLINE HCL	3	
PUB INSULIN SYRINGE 0.3 ML 30G 1/2"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
PUB INSULIN SYRINGE 0.3 ML 31G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	

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Medication Name	Generic Name	Tier	Notes
PUB INSULIN SYRINGE 0.5 ML 30G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
PUB INSULIN SYRINGE 0.5 ML 31G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
PUB INSULIN SYRINGE 1 ML 30G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
PUB INSULIN SYRINGE 1 ML 31G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
PUB PEN NEEDLE 29G 12MM	PEN NEEDLE, DIABETIC	2	
PUB PEN NEEDLE 31G 6MM	PEN NEEDLE, DIABETIC	2	
PUB PEN NEEDLE 31G 8MM	PEN NEEDLE, DIABETIC	2	
PUB UNIFINE PENTIP PLUS 31G 3/16"	PEN NEEDLE, DIABETIC	2	
PULMOSAL 7% VIAL	SODIUM CHLORIDE FOR INHALATION	1	
PULMOZYME 1 MG/ML AMPULE	DORNASE ALFA	4	PA, SRX
PURE COMFORT PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
PURE COMFORT PEN NEEDLE 32G 5MM	PEN NEEDLE, DIABETIC	2	
PURE COMFORT PEN NEEDLE 32G 6MM	PEN NEEDLE, DIABETIC	2	
PURE COMFORT PEN NEEDLE 32G 8MM	PEN NEEDLE, DIABETIC	2	
PURE COMFORT SAFETY PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC, SAFETY	2	
PURE COMFORT SAFETY PEN NEEDLE 31G 6MM	PEN NEEDLE, DIABETIC, SAFETY	2	
PURE COMFORT SAFETY PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC, SAFETY	2	
PURE COMFORT SPACER-ADULT MASK	INHALER,ASSIST DEVICE,LG MASK	2	QL
PURECOMFORT PEAK FLOW METER ADULT	PEAK FLOW METER	2	
PURECOMFORT PEAK FLOW METER CHILD	PEAK FLOW METER	2	
PURIXAN 20 MG/ML ORAL SUSPENSION	MERCAPTOPURINE	4	PA, LDD, SRX
PV UNIFINE PENTIP PLUS 31G 5MM	PEN NEEDLE, DIABETIC	2	
PV UNIFINE PENTIP PLUS 31G 6MM	PEN NEEDLE, DIABETIC	2	
PV UNIFINE PENTIP PLUS 31G 8MM	PEN NEEDLE, DIABETIC	2	
PV UNIFINE PENTIP PLUS 32G 4MM	PEN NEEDLE, DIABETIC	2	
PV UNIFINE PENTIP PLUS 33G 4MM	PEN NEEDLE, DIABETIC	2	
PYRAZINAMIDE 500 MG TABLET	PYRAZINAMIDE	1	
PYRIDOSTIGMINE 60 MG TABLET	PYRIDOSTIGMINE BROMIDE	3	
PYRIDOSTIGMINE 60 MG/5 ML ORAL SOLUTION	PYRIDOSTIGMINE BROMIDE	4	PA
PYRIDOSTIGMINE ER 180 MG TABLET	PYRIDOSTIGMINE BROMIDE	3	
PYRIMETHAMINE 25 MG TABLET	PYRIMETHAMINE	4	PA, SRX
QC UNIFINE PENTIP 32G 4MM	PEN NEEDLE, DIABETIC	2	
QC UNIFINE PENTIP 32G 5/32"	PEN NEEDLE, DIABETIC	2	
QUADRACEL DTAP-IPV SYRINGE	DIPH,PERTUS(ACEL),TET,POLIO/PF	2	
QUADRACEL DTAP-IPV VIAL	DIPH,PERTUS(ACEL),TET,POLIO/PF	2	
QUAZEPAM 15 MG TABLET	QUAZEPAM	3	PA
QUETIAPINE 25 MG TABLET	QUETIAPINE FUMARATE	1	
QUETIAPINE 50 MG TABLET	QUETIAPINE FUMARATE	1	
QUETIAPINE 100 MG TABLET	QUETIAPINE FUMARATE	1	
QUETIAPINE 200 MG TABLET	QUETIAPINE FUMARATE	1	
QUETIAPINE 300 MG TABLET	QUETIAPINE FUMARATE	1	

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Medication Name	Generic Name	Tier	Notes
QUETIAPINE 400 MG TABLET	QUETIAPINE FUMARATE	1	
QUETIAPINE ER 50 MG TABLET	QUETIAPINE FUMARATE	1	
QUETIAPINE ER 150 MG TABLET	QUETIAPINE FUMARATE	1	
QUETIAPINE ER 200 MG TABLET	QUETIAPINE FUMARATE	1	
QUETIAPINE ER 300 MG TABLET	QUETIAPINE FUMARATE	1	
QUETIAPINE ER 400 MG TABLET	QUETIAPINE FUMARATE	1	
QUINAPRIL 5 MG TABLET	QUINAPRIL HCL	1	
QUINAPRIL 10 MG TABLET	QUINAPRIL HCL	1	
QUINAPRIL 20 MG TABLET	QUINAPRIL HCL	1	
QUINAPRIL 40 MG TABLET	QUINAPRIL HCL	1	
QUINAPRIL-HCTZ 10-12.5 MG TABLET	QUINAPRIL/HYDROCHLOROTHIAZIDE	1	
QUINAPRIL-HCTZ 20-12.5 MG TABLET	QUINAPRIL/HYDROCHLOROTHIAZIDE	1	
QUINAPRIL-HCTZ 20-25 MG TABLET	QUINAPRIL/HYDROCHLOROTHIAZIDE	1	
QUINIDINE GLUCONATE ER 324 MG TABLET	QUINIDINE GLUCONATE	2	
QUINIDINE SULFATE 200 MG TABLET	QUINIDINE SULFATE	1	
QUINIDINE SULFATE 300 MG TABLET	QUINIDINE SULFATE	1	
QUININE SULFATE 324 MG CAPSULE	QUININE SULFATE	1	
QVAR REDIHALER 40 MCG	BECLOMETHASONE DIPROPIONATE	2	
QVAR REDIHALER 80 MCG	BECLOMETHASONE DIPROPIONATE	2	
RA INSULIN SYRINGE 0.5 ML 29G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
RA INSULIN SYRINGE 0.5 ML 30G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
RA INSULIN SYRINGE 1 ML 29G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
RA INSULIN SYRINGE 1 ML 30G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
RA PEN NEEDLE 31G 3/16"	PEN NEEDLE, DIABETIC	2	
RA PEN NEEDLE 31G 5/16"	PEN NEEDLE, DIABETIC	2	
RABEPRAZOLE DR 20 MG TABLET	RABEPRAZOLE SODIUM	1	QL
RALOXIFENE 60 MG TABLET	RALOXIFENE HCL	1	
RAMELTEON 8 MG TABLET	RAMELTEON	2	QL
RAMIPRIL 1.25 MG CAPSULE	RAMIPRIL	1	
RAMIPRIL 2.5 MG CAPSULE	RAMIPRIL	1	
RAMIPRIL 5 MG CAPSULE	RAMIPRIL	1	
RAMIPRIL 10 MG CAPSULE	RAMIPRIL	1	
RANOLAZINE ER 1,000 MG TABLET	RANOLAZINE	3	QL
RANOLAZINE ER 500 MG TABLET	RANOLAZINE	3	QL
RASAGILINE 0.5 MG TABLET	RASAGILINE MESYLATE	1	
RASAGILINE 1 MG TABLET	RASAGILINE MESYLATE	1	
RAYA SURE PEN NEEDLE 29G 12MM	PEN NEEDLE, DIABETIC	2	
RAYA SURE PEN NEEDLE 31G 4MM	PEN NEEDLE, DIABETIC	2	
RAYA SURE PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC	2	
RAYA SURE PEN NEEDLE 31G 6MM	PEN NEEDLE, DIABETIC	2	
RECLIPSEN 28 DAY TABLET	DESOGESTREL-ETHINYL ESTRADIOL	1	

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Medication Name	Generic Name	Tier	Notes
RECOMBIVAX HB 5 MCG/0.5 ML SYRINGE	HEPATITIS B VIRUS VACCINE/PF	2	
RECOMBIVAX HB 10 MCG/ML SYRINGE	HEPATITIS B VIRUS VACCINE/PF	2	
RECOMBIVAX HB 5 MCG/0.5 ML VIAL	HEPATITIS B VIRUS VACCINE/PF	2	
RECOMBIVAX HB 10 MCG/ML VIAL	HEPATITIS B VIRUS VACCINE/PF	2	
RECOMBIVAX HB 40 MCG/ML VIAL	HEPATITIS B VIRUS VACCINE/PF	2	
REFUAH PLUS CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, HIGH	2	
RELENZA 5 MG DISKHALER	ZANAMIVIR	3	QL
RELION INSULIN SYRINGE 0.3 ML 29G 1/2"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
RELION INSULIN SYRINGE 0.3 ML 31G 6MM	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
RELION INSULIN SYRINGE 0.5 ML	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
RELION INSULIN SYRINGE 0.5 ML 29G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
RELION INSULIN SYRINGE 0.5 ML 31G 6MM	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
RELION INSULIN SYRINGE 1 ML 29G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
RELION TRUE METRIX AIR GLUCOSE METER	BLOOD-GLUCOSE METER	1	
RELION TRUE METRIX TEST STRIP	BLOOD SUGAR DIAGNOSTIC	2	
RELION INSULIN SYRINGE 1 ML 31G 15/64"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
RELION INSULIN SYRINGE 1 ML 31G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
RELION KETONE TEST STRIP	URINE ACETONE TEST STRIPS	2	
RELION MINI PEN NEEDLE 31G 1/4"	PEN NEEDLE, DIABETIC	2	
RELION NOVOLOG 100 UNIT/ML VIAL	INSULIN ASPART	3	QL
RELION NOVOLOG MIX 70-30 FLEXPEN	INSULIN ASPART PROT/INSULN ASP	3	QL
RELION NOVOLOG MIX 70-30 VIAL	INSULIN ASPART PROT/INSULN ASP	3	QL
RELION NOVOLOG U-100 FLEXPEN	INSULIN ASPART	3	QL
RELION PEN NEEDLE 29G	PEN NEEDLE, DIABETIC	2	
RELION PEN NEEDLE 29G 1/2"	PEN NEEDLE, DIABETIC	2	
RELION PEN NEEDLE 31G	PEN NEEDLE, DIABETIC	2	
RELION PEN NEEDLE 31G 1/4"	PEN NEEDLE, DIABETIC	2	
RELION PEN NEEDLE 31G 5/16"	PEN NEEDLE, DIABETIC	2	
RELION PEN NEEDLE 31G 6MM	PEN NEEDLE, DIABETIC	2	
RELION PEN NEEDLE 32G 5/32"	PEN NEEDLE, DIABETIC	2	
RELION SYRINGE 0.3 ML 31G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
RELION SYRINGE 0.5 ML 31G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
RELISTOR 8 MG/0.4 ML SYRINGE	METHYLNALTREXONE BROMIDE	3	PA
RELISTOR 12 MG/0.6 ML SYRINGE	METHYLNALTREXONE BROMIDE	3	PA
RELISTOR 12 MG/0.6 ML VIAL	METHYLNALTREXONE BROMIDE	3	PA
RENACIDIN IRRIGATION SOLUTION	CITRIC AC/GLUCONOLACT/MAG CARB	3	
REPAGLINIDE 0.5 MG TABLET	REPAGLINIDE	1	
REPAGLINIDE 1 MG TABLET	REPAGLINIDE	1	
REPAGLINIDE 2 MG TABLET	REPAGLINIDE	1	
REPATHA 140 MG/ML SURECLICK	EVOLOCUMAB	4	
REPATHA 140 MG/ML SYRINGE	EVOLOCUMAB	4	

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Medication Name	Generic Name	Tier	Notes
REPATHA 420 MG/3.5 ML PUSHTRONEX	EVOLOCUMAB	4	
RESPA A.R. TABLET SA	PSEUDOEPHED/CHLOR-MAL/BELL ALK	3	
REVLIMID 2.5 MG CAPSULE	LENALIDOMIDE	4	PA, QL, LDD, SRX
REVLIMID 5 MG CAPSULE	LENALIDOMIDE	4	PA, QL, LDD, SRX
REVLIMID 10 MG CAPSULE	LENALIDOMIDE	4	PA, QL, LDD, SRX
REVLIMID 15 MG CAPSULE	LENALIDOMIDE	4	PA, QL, LDD, SRX
REVLIMID 20 MG CAPSULE	LENALIDOMIDE	4	PA, QL, LDD, SRX
REVLIMID 25 MG CAPSULE	LENALIDOMIDE	4	PA, QL, LDD, SRX
REXTOVY 4 MG NASAL SPRAY	NALOXONE HCL	2	
REYATAZ 50 MG POWDER PACKET	ATAZANAVIR SULFATE	2	SRX
REZDIFFRA 60 MG TABLET	RESMETIROM	4	PA, QL, LDD, SRX
REZDIFFRA 80 MG TABLET	RESMETIROM	4	PA, QL, LDD, SRX
REZDIFFRA 100 MG TABLET	RESMETIROM	4	PA, QL, LDD, SRX
RIBAVIRIN 200 MG CAPSULE	RIBAVIRIN	3	SRX
RIBAVIRIN 200 MG TABLET	RIBAVIRIN	3	SRX
RIFABUTIN 150 MG CAPSULE	RIFABUTIN	2	
RIFAMPIN 150 MG CAPSULE	RIFAMPIN	1	
RIFAMPIN 300 MG CAPSULE	RIFAMPIN	1	
RIGHTEST HIGH CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, HIGH	2	
RIGHTEST NORMAL CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
RILUZOLE 50 MG TABLET	RILUZOLE	4	SRX
RIMANTADINE 100 MG TABLET	RIMANTADINE HCL	1	
RINVOQ ER 15 MG TABLET	UPADACITINIB	4	PA, QL, LDD, SRX
RINVOQ ER 30 MG TABLET	UPADACITINIB	4	PA, QL, LDD, SRX
RINVOQ ER 45 MG TABLET	UPADACITINIB	4	PA, QL, LDD, SRX
RINVOQ LQ 1 MG/ML SOLUTION	UPADACITINIB	4	PA, QL, LDD, SRX
RISEDRONATE 5 MG TABLET	RISEDRONATE SODIUM	2	
RISEDRONATE 30 MG TABLET	RISEDRONATE SODIUM	2	
RISEDRONATE 35 MG TABLET	RISEDRONATE SODIUM	2	
RISEDRONATE 150 MG TABLET	RISEDRONATE SODIUM	2	
RISEDRONATE DR 35 MG TABLET	RISEDRONATE SODIUM	2	
RISPERIDONE 0.25 MG ODT TABLET	RISPERIDONE	1	
RISPERIDONE 1 MG/ML ORAL SOLUTION	RISPERIDONE	1	
RISPERIDONE 0.5 MG ODT TABLET	RISPERIDONE	1	
RISPERIDONE 1 MG ODT TABLET	RISPERIDONE	1	
RISPERIDONE 2 MG ODT TABLET	RISPERIDONE	1	
RISPERIDONE 3 MG ODT TABLET	RISPERIDONE	1	
RISPERIDONE 4 MG ODT TABLET	RISPERIDONE	1	
RISPERIDONE 0.25 MG TABLET	RISPERIDONE	1	
RISPERIDONE 0.5 MG TABLET	RISPERIDONE	1	
RISPERIDONE 1 MG TABLET	RISPERIDONE	1	

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Medication Name	Generic Name	Tier	Notes
RISPERIDONE 2 MG TABLET	RISPERIDONE	1	
RISPERIDONE 3 MG TABLET	RISPERIDONE	1	
RISPERIDONE 4 MG TABLET	RISPERIDONE	1	
RITEFLO SPACER	INHALER, ASSIST DEVICES	2	QL
RITONAVIR 100 MG TABLET	RITONAVIR	1	SRX
RIVAROXABAN 1 MG/ML SUSPENSION	RIVAROXABAN	2	QL
RIVAROXABAN 2.5 MG TABLET	RIVAROXABAN	2	QL
RIVASTIGMINE 1.5 MG CAPSULE	RIVASTIGMINE TARTRATE	1	
RIVASTIGMINE 3 MG CAPSULE	RIVASTIGMINE TARTRATE	1	
RIVASTIGMINE 4.5 MG CAPSULE	RIVASTIGMINE TARTRATE	1	
RIVASTIGMINE 6 MG CAPSULE	RIVASTIGMINE TARTRATE	1	
RIVASTIGMINE 4.6 MG/24HR PATCH	RIVASTIGMINE	1	
RIVASTIGMINE 9.5 MG/24HR PATCH	RIVASTIGMINE	1	
RIVASTIGMINE 13.3 MG/24HR PATCH	RIVASTIGMINE	1	
RIVELSA TABLET	L-NORGEST/E.ESTRADIOL-E.ESTRAD	1	
RIZATRIPTAN 5 MG ODT TABLET	RIZATRIPTAN BENZOATE	1	QL
RIZATRIPTAN 10 MG ODT TABLET	RIZATRIPTAN BENZOATE	1	QL
RIZATRIPTAN 5 MG TABLET	RIZATRIPTAN BENZOATE	1	QL
RIZATRIPTAN 10 MG TABLET	RIZATRIPTAN BENZOATE	1	QL
R-NATAL OB SOFTGEL	PNV NO.66/IRON,CARB/FOLIC/DHA	1	
ROFLUMILAST 250 MCG TABLET	ROFLUMILAST	3	QL
ROFLUMILAST 500 MCG TABLET	ROFLUMILAST	3	QL
ROPINIROLE 0.25 MG TABLET	ROPINIROLE HCL	1	
ROPINIROLE 0.5 MG TABLET	ROPINIROLE HCL	1	
ROPINIROLE 1 MG TABLET	ROPINIROLE HCL	1	
ROPINIROLE 2 MG TABLET	ROPINIROLE HCL	1	
ROPINIROLE 3 MG TABLET	ROPINIROLE HCL	1	
ROPINIROLE 4 MG TABLET	ROPINIROLE HCL	1	
ROPINIROLE 5 MG TABLET	ROPINIROLE HCL	1	
ROPINIROLE ER 2 MG TABLET	ROPINIROLE HCL	1	
ROPINIROLE ER 4 MG TABLET	ROPINIROLE HCL	1	
ROPINIROLE ER 6 MG TABLET	ROPINIROLE HCL	1	
ROPINIROLE ER 8 MG TABLET	ROPINIROLE HCL	1	
ROPINIROLE ER 12 MG TABLET	ROPINIROLE HCL	1	
ROSADAN 0.75% CREAM	METRONIDAZOLE	1	
ROSADAN 0.75% GEL	METRONIDAZOLE	1	
ROSUVASTATIN 5 MG TABLET	ROSUVASTATIN CALCIUM	1	
ROSUVASTATIN 10 MG TABLET	ROSUVASTATIN CALCIUM	1	
ROSUVASTATIN 20 MG TABLET	ROSUVASTATIN CALCIUM	1	
ROSUVASTATIN 40 MG TABLET	ROSUVASTATIN CALCIUM	1	
ROTARIX VACCINE ORAL SUSPENSION	ROTAVIRUS VAC,LIVE ATT, 89-12	2	

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Medication Name	Generic Name	Tier	Notes
ROTARIX VACCINE ORAL SYRINGE	ROTAVIRUS VAC,LIVE ATT, 89-12	2	
ROTATEQ VACCINE	ROTAVIRUS VACCINE,LIVE ORAL PV	2	
ROWEEPRA 500 MG TABLET	LEVETIRACETAM	1	
ROWEEPRA 750 MG TABLET	LEVETIRACETAM	1	
ROWEEPRA 1,000 MG TABLET	LEVETIRACETAM	1	
RUFINAMIDE 40 MG/ML ORAL SUSPENSION	RUFINAMIDE	3	PA, QL
RUFINAMIDE 200 MG TABLET	RUFINAMIDE	3	PA, QL
RUFINAMIDE 400 MG TABLET	RUFINAMIDE	3	PA, QL
RYBELSUS 1.5 MG TABLET	SEMAGLUTIDE	2	PA, QL
RYBELSUS 3 MG TABLET	SEMAGLUTIDE	2	PA, QL
RYBELSUS 4 MG TABLET	SEMAGLUTIDE	2	PA, QL
RYBELSUS 7 MG TABLET	SEMAGLUTIDE	2	PA, QL
RYBELSUS 9 MG TABLET	SEMAGLUTIDE	2	PA, QL
RYBELSUS 14 MG TABLET	SEMAGLUTIDE	2	PA, QL
SACUBITRIL-VALSARTAN 24-26 MG TABLET	SACUBITRIL/VALSARTAN	2	QL
SACUBITRIL-VALSARTAN 49-51 MG TABLET	SACUBITRIL/VALSARTAN	2	QL
SACUBITRIL-VALSARTAN 97-103 MG TABLET	SACUBITRIL/VALSARTAN	2	QL
SAFESNAP INSULIN SYRINGE 0.3 ML	SYR,NDL 0.3 ML,INS,SAFE,D.UNIT	2	
SAFESNAP INSULIN SYRINGE 0.5 ML	SYR,NDL,INS,SAFE 0.5ML,DISP UN	2	
SAFESNAP INSULIN SYRINGE 1 ML	SYR,NDL 1 ML,INS,SAFE,DISP UNT	2	
SAFETY PEN NEEDLE 31G 4MM	PEN NEEDLE, DIABETIC, SAFETY	2	
SAFETY PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC, SAFETY	2	
SAFETY PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC, SAFETY	2	
SAJAZIR 30 MG/3 ML SYRINGE	ICATIBANT ACETATE	4	PA, LDD, SRX
SALICYLIC ACID 27.5% LIQUID	SALICYLIC ACID	1	
SALSALATE 500 MG TABLET	SALSALATE	1	
SALSALATE 750 MG TABLET	SALSALATE	1	
SANTYL OINTMENT	COLLAGENASE CLOSTRIDIUM HIST.	3	PA, QL
SAPROPTERIN 100 MG POWDER PACKET	SAPROPTERIN DIHYDROCHLORIDE	4	PA, SRX
SAPROPTERIN 500 MG POWDER PACKET	SAPROPTERIN DIHYDROCHLORIDE	4	PA, SRX
SAPROPTERIN 100 MG TABLET	SAPROPTERIN DIHYDROCHLORIDE	4	PA, SRX
SAVAYSA 15 MG TABLET	EDOXABAN TOSYLATE	3	PA, QL
SAVAYSA 30 MG TABLET	EDOXABAN TOSYLATE	3	PA, QL
SAVAYSA 60 MG TABLET	EDOXABAN TOSYLATE	3	PA, QL
SAVELLA 12.5 MG TABLET	MILNACIPRAN HCL	3	
SAVELLA 25 MG TABLET	MILNACIPRAN HCL	3	
SAVELLA 50 MG TABLET	MILNACIPRAN HCL	3	
SAVELLA 100 MG TABLET	MILNACIPRAN HCL	3	
SAVELLA TITRATION PACK	MILNACIPRAN HCL	3	
SAXAGLIPTIN 2.5 MG TABLET	SAXAGLIPTIN HCL	1	QL
SAXAGLIPTIN 5 MG TABLET	SAXAGLIPTIN HCL	1	QL

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Medication Name	Generic Name	Tier	Notes
SAXAGLIPTIN-METFORMIN ER 2.5-1000 MG TABLET	SAXAGLIPTIN HCL/METFORMIN HCL	1	QL
SAXAGLIPTIN-METFORMIN ER 5-500 MG TABLET	SAXAGLIPTIN HCL/METFORMIN HCL	1	QL
SAXAGLIPTIN-METFORMIN ER 5-1000 MG TABLET	SAXAGLIPTIN HCL/METFORMIN HCL	1	QL
SCOPOLAMINE 1 MG/3 DAY PATCH	SCOPOLAMINE	1	
SECURESAFE PEN NEEDLE 30G 5/16"	PEN NEEDLE, DIABETIC, SAFETY	2	
SECURESAFE SYRINGE 0.5 ML 29G 1/2"	SYRINGE,NEEDLE,INSULN,SF 0.5ML	2	
SECURESAFE SYRINGE 1 ML 29G 1/2"	SYRINGE,NEEDLE,INSULN,SAFE,1ML	2	
SELARSDI 45 MG/0.5 ML SYRINGE	USTEKINUMAB-AEKN	4	PA, QL, SRX
SELARSDI 90 MG/ML SYRINGE	USTEKINUMAB-AEKN	4	PA, QL, SRX
SELEGILINE 5 MG CAPSULE	SELEGILINE HCL	1	
SELEGILINE 5 MG TABLET	SELEGILINE HCL	1	
SELENIUM SULFIDE 2.5% LOTION	SELENIUM SULFIDE	1	
SELENIUM SULFIDE 2.25% SHAMPOO	SELENIUM SULFIDE	1	
SE-NATAL 19 CHEWABLE TABLET	PNV NO.118/IRON FUMARATE/FA	1	
SE-NATAL 19 TABLET	PNV 119/IRON FUM/FOLIC ACID	1	
SEREVENT 50 MCG DISKUS	SALMETEROL XINAFOATE	3	QL
SERTRALINE 20 MG/ML ORAL CONCENTRATE	SERTRALINE HCL	1	QL
SERTRALINE 25 MG TABLET	SERTRALINE HCL	1	QL
SERTRALINE 50 MG TABLET	SERTRALINE HCL	1	QL
SERTRALINE 100 MG TABLET	SERTRALINE HCL	1	QL
SETLAKIN 0.15 MG-0.03 MG TABLET	LEVONORGESTREL/ETHIN.ESTRADIOL	1	
SEVELAMER CARBONATE 800 MG TABLET	SEVELAMER CARBONATE	3	
SF 1.1% GEL	FLUORIDE (SODIUM)	1	
SF 5000 PLUS TOOTHPASTE	FLUORIDE (SODIUM)	1	
SHAROBEL 0.35 MG TABLET	NORETHINDRONE	1	
SHINGRIX VIAL KIT	VARICELLA-ZOSTER GE/AS01B/PF	2	QL
SHOPKO UNIFINE PENTIP 29G 12MM	PEN NEEDLE, DIABETIC	2	
SHOPKO UNIFINE PENTIP 31G 5MM	PEN NEEDLE, DIABETIC	2	
SHOPKO UNIFINE PENTIP 31G 8MM	PEN NEEDLE, DIABETIC	2	
SHOPKO UNIFINE PENTIP 32G 4MM	PEN NEEDLE, DIABETIC	2	
SIDESTREAM PEDIATRIC FACE MASK	INHALER,ASSIST DEVICE,ACCESORY	2	QL
SIGNIFOR 0.3 MG/ML AMPULE	PASIREOTIDE DIASPARTATE	4	PA, LDD, SRX
SIGNIFOR 0.6 MG/ML AMPULE	PASIREOTIDE DIASPARTATE	4	PA, LDD, SRX
SIGNIFOR 0.9 MG/ML AMPULE	PASIREOTIDE DIASPARTATE	4	PA, LDD, SRX
SILDENAFIL 20 MG TABLET	SILDENAFIL CITRATE	4	PA, SRX
SILHOUETTE INFUSION SET 23"	INFUSION SET FOR INSULIN PUMP	2	
SILICONE MASK-INFANT	INHALER,ASSIST DEVICE,ACCESORY	2	QL
SILICONE MASK-PEDIATRIC	NEBULIZER ACCESSORIES	2	QL
SILODOSIN 4 MG CAPSULE	SILODOSIN	1	QL
SILODOSIN 8 MG CAPSULE	SILODOSIN	1	QL
SIL-SERTER INFUSION SET	DIABETIC SUPPLIES,MISCELL	2	

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Medication Name	Generic Name	Tier	Notes
SILVER NITRATE 0.5% TOPICAL SOLUTION	SILVER NITRATE	1	
SILVER NITRATE 10% TOPICAL SOLUTION	SILVER NITRATE	1	
SILVER NITRATE 25% TOPICAL SOLUTION	SILVER NITRATE	1	
SILVER NITRATE 50% TOPICAL SOLUTION	SILVER NITRATE	1	
SILVER SULFADIAZINE 1% CREAM	SILVER SULFADIAZINE	1	
SIMBRINZA 1%-0.2% EYE DROPS	BRINZOLAMIDE/BRIMONIDINE TART	2	
SIMLANDI (CF) 40 MG/0.4 ML AUTO-INJECTOR	ADALIMUMAB-RYVK	4	PA, QL, SRX
SIMLANDI (CF) 20 MG/0.2 ML SYRINGE	ADALIMUMAB-RYVK	4	PA, QL, SRX
SIMLANDI (CF) 40 MG/0.4 ML SYRINGE	ADALIMUMAB-RYVK	4	PA, QL, SRX
SIMLANDI (CF) 80 MG/0.8 ML SYRINGE	ADALIMUMAB-RYVK	4	PA, QL, SRX
SIMLIYA 28 DAY TABLET	DESOG-E.ESTRADIOL/E.ESTRADIOL	1	
SIMPESSE 0.15-0.03-0.01 MG TABLET	L-NORGEST/E.ESTRADIOL-E.ESTRAD	1	
SIMVASTATIN 5 MG TABLET	SIMVASTATIN	1	
SIMVASTATIN 10 MG TABLET	SIMVASTATIN	1	
SIMVASTATIN 20 MG TABLET	SIMVASTATIN	1	
SIMVASTATIN 40 MG TABLET	SIMVASTATIN	1	
SIMVASTATIN 80 MG TABLET	SIMVASTATIN	1	QL
SIROLIMUS 0.5 MG TABLET	SIROLIMUS	1	SRX
SIROLIMUS 1 MG TABLET	SIROLIMUS	1	SRX
SIROLIMUS 2 MG TABLET	SIROLIMUS	1	SRX
SIROLIMUS 1 MG/ML ORAL SOLUTION	SIROLIMUS	4	SRX
SIRTURO 20 MG TABLET	BEDAQUILINE FUMARATE	3	PA, SRX
SIRTURO 100 MG TABLET	BEDAQUILINE FUMARATE	3	PA, SRX
SKY SAFETY PEN NEEDLE 30G 5MM	PEN NEEDLE, DIABETIC, SAFETY	2	
SKY SAFETY PEN NEEDLE 30G 8MM	PEN NEEDLE, DIABETIC, SAFETY	2	
SKYLA 13.5 MG SYSTEM	LEVONORGESTREL	1	LDD, SRX
SKYRIZI 180 MG/1.2 ML ON-BODY	RISANKIZUMAB-RZAA	4	PA, QL, SRX
SKYRIZI 360 MG/2.4 ML ON-BODY	RISANKIZUMAB-RZAA	4	PA, QL, SRX
SKYRIZI 150 MG/ML PEN	RISANKIZUMAB-RZAA	4	PA, QL, SRX
SKYRIZI 150 MG/ML SYRINGE	RISANKIZUMAB-RZAA	4	PA, QL, SRX
SLYND 4 MG TABLET	DROSPIRENONE	1	
SM INSULIN SYRINGE 0.3 ML 29G 1/2"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
SM INSULIN SYRINGE 0.3 ML 30G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
SM INSULIN SYRINGE 0.3 ML 31G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
SM INSULIN SYRINGE 0.5 ML 28G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
SM INSULIN SYRINGE 0.5 ML 29G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
SM INSULIN SYRINGE 0.5 ML 30G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
SM INSULIN SYRINGE 0.5 ML 31G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
SM INSULIN SYRINGE 1 ML 28G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
SM INSULIN SYRINGE 1 ML 29G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
SM INSULIN SYRINGE 1 ML 30G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	

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Medication Name	Generic Name	Tier	Notes
SM INSULIN SYRINGE 1 ML 31G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
SMARTEST CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
SODIUM CHLORIDE 0.9% INHALATION VIAL	SODIUM CHLORIDE FOR INHALATION	1	
SODIUM CHLORIDE 0.9% IRRIGATION	SODIUM CHLORIDE IRRIG SOLUTION	1	
SODIUM CHLORIDE 0.9% PROCESSING SOLUTION	SODIUM CHLORIDE IRRIG SOLUTION	1	
SODIUM CHLORIDE 10% VIAL	SODIUM CHLORIDE FOR INHALATION	1	
SODIUM CHLORIDE 3% VIAL	SODIUM CHLORIDE FOR INHALATION	1	
SODIUM CHLORIDE 7% VIAL	SODIUM CHLORIDE FOR INHALATION	1	
SODIUM FLUORIDE 1.1% GEL	FLUORIDE (SODIUM)	1	
SODIUM FLUORIDE 0.2% RINSE	FLUORIDE (SODIUM)	1	
SODIUM FLUORIDE 1.1% TOOTHPASTE	FLUORIDE (SODIUM)	1	
SODIUM FLUORIDE 5000 DRY MOUTH TOOTHPASTE	FLUORIDE (SODIUM)	1	
SODIUM FLUORIDE 5000 PLUS TOOTHPASTE	FLUORIDE (SODIUM)	1	
SODIUM FLUORIDE 5000 PPM TOOTHPASTE	FLUORIDE (SODIUM)	1	
SODIUM FLUORIDE ENAMEL PROTECT 5000 PPM TOOTHPASTE	SODIUM FLUORIDE/POTASSIUM NIT	1	
SODIUM FLUORIDE SENSITIVE 5000 PPM TOOTHPASTE	SODIUM FLUORIDE/POTASSIUM NIT	1	
SODIUM FLUORIDE-POTASSIUM NITRATE PASTE	SODIUM FLUORIDE/POTASSIUM NIT	1	
SODIUM PHENYLBUTYRATE POWDER	SODIUM PHENYLBUTYRATE	4	SRX
SODIUM PHENYLBUTYRATE 500 MG TABLET	SODIUM PHENYLBUTYRATE	4	SRX
SODIUM POLYSTYRENE SULFONATE POWDER	SODIUM POLYSTYRENE SULFONATE	1	
SODIUM SULFACETAMIDE 10% LOTION	SULFACETAMIDE SODIUM	1	
SODIUM SULFATE-POTASSIUM SULFATE-MAGNESIUM SULFATE ORAL SOLUTION	SODIUM, POTASSIUM,MAG SULFATES	3	
SOFOSBUVIR-VELPATASVIR 400-100 TABLET	SOFOSBUVIR/VELPATASVIR	4	PA, QL, SRX
SOLIFENACIN 5 MG TABLET	SOLIFENACIN SUCCINATE	2	QL
SOLIFENACIN 10 MG TABLET	SOLIFENACIN SUCCINATE	2	QL
SOLIQUA 100 UNIT-33 MCG/ML PEN	INSULIN GLARGINE/LIXISENATIDE	4	
SOLUTIONUS V2 HIGH CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, HIGH	2	
SOLUTIONUS V2 LOW CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, LOW	2	
SOLUVITA 0.5 MG/ML ORAL DROPS	FLUORIDE (SODIUM)	1	
SOLUVITA A,C,D-FLUOR 0.25 MG/ML ORAL DROPS	PED MVIT A,C,D3 NO.21/FLUORIDE	1	
SOMAVERT 10 MG VIAL	PEGVISOMANT	4	PA, LDD, SRX
SOMAVERT 15 MG VIAL	PEGVISOMANT	4	PA, LDD, SRX
SOMAVERT 20 MG VIAL	PEGVISOMANT	4	PA, LDD, SRX
SOMAVERT 25 MG VIAL	PEGVISOMANT	4	PA, LDD, SRX
SOMAVERT 30 MG VIAL	PEGVISOMANT	4	PA, LDD, SRX
SORAFENIB 200 MG TABLET	SORAFENIB TOSYLATE	4	PA, QL, SRX
SOTALOL 80 MG TABLET	SOTALOL HCL	1	
SOTALOL 120 MG TABLET	SOTALOL HCL	1	
SOTALOL 160 MG TABLET	SOTALOL HCL	1	
SOTALOL 240 MG TABLET	SOTALOL HCL	1	
SOTALOL AF 80 MG TABLET	SOTALOL HCL	1	

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Medication Name	Generic Name	Tier	Notes
SOTALOL AF 120 MG TABLET	SOTALOL HCL	1	
SOTALOL AF 160 MG TABLET	SOTALOL HCL	1	
SOTYKTU 6 MG TABLET	DEUCRAVACITINIB	4	PA, QL, SRX
SOTYLIZE 5 MG/ML ORAL SOLUTION	SOTALOL HCL	3	PA
SOVALDI 150 MG PELLET PACKET	SOFOSBUVIR	3	PA, QL, SRX
SOVALDI 200 MG PELLET PACKET	SOFOSBUVIR	3	PA, QL, SRX
SOVALDI 200 MG TABLET	SOFOSBUVIR	3	PA, QL, SRX
SOVALDI 400 MG TABLET	SOFOSBUVIR	3	PA, QL, SRX
SPIKEVAX (12Y UP) SYRINGE	COVID VAC 23-24(12UP)(ANDU)/PF	2	
SPIKEVAX (12Y UP) VIAL	COVID VAC 23-24(12UP)(ANDU)/PF	2	
SPIKEVAX 2024-25 (12Y UP) SYRINGE	COVID VAC 24-25 (12UP)(MOD)/PF	2	
SPIKEVAX COVID (18Y UP) VACCINE	COVID-19 VACC,MRNA(MODERNA)/PF	2	
SPINOSAD 0.9% TOPICAL SUSPENSION	SPINOSAD	2	
SPIRONOLACTONE 25 MG TABLET	SPIRONOLACTONE	1	
SPIRONOLACTONE 50 MG TABLET	SPIRONOLACTONE	1	
SPIRONOLACTONE 100 MG TABLET	SPIRONOLACTONE	1	
SPIRONOLACTONE-HCTZ 25-25 TABLET	SPIRONOLACT/HYDROCHLOROTHIAZID	1	
SPRINTEC 28 DAY TABLET	NORGESTIMATE-ETHINYL ESTRADIOL	1	
SPS 15 GM/60 ML ORAL SUSPENSION	SODIUM POLYSTYRENE SULFON/SORB	2	
SPS 30 GM/120 ML ENEMA SUSPENSION	SODIUM POLYSTYRENE SULFON/SORB	2	
SRONYX 0.10-0.02 MG TABLET	LEVONORGESTREL/ETHIN.ESTRADIOL	1	
SSKI 1 GM/ML ORAL SOLUTION	POTASSIUM IODIDE	3	
STAVUDINE 40 MG CAPSULE	STAVUDINE	1	SRX
STELARA 45 MG/0.5 ML SYRINGE	USTEKINUMAB	4	PA, QL, SRX
STELARA 45 MG/0.5 ML VIAL	USTEKINUMAB	4	PA, QL, SRX
STELARA 90 MG/ML SYRINGE	USTEKINUMAB	4	PA, QL, SRX
STERILE WATER FOR IRRIGATION	WATER FOR IRRIGATION,STERILE	1	
STIVARGA 40 MG TABLET	REGORAFENIB	4	PA, QL, LDD, SRX
STRIBILD TABLET	ELVITEG/COB/EMTRI/TENOFO DISOP	3	QL, SRX
STRIVE PEAK FLOW METER	PEAK FLOW METER	2	
STRIVERDI RESPIMAT INHALATION SPRAY	OLODATEROL HCL	2	QL
SUBOXONE 2 MG-0.5 MG SUBLINGUAL FILM	BUPRENORPHINE HCL/NALOXONE HCL	2	
SUBOXONE 4 MG-1 MG SUBLINGUAL FILM	BUPRENORPHINE HCL/NALOXONE HCL	2	
SUBOXONE 8 MG-2 MG SUBLINGUAL FILM	BUPRENORPHINE HCL/NALOXONE HCL	2	
SUBOXONE 12 MG-3 MG SUBLINGUAL FILM	BUPRENORPHINE HCL/NALOXONE HCL	2	
SUBVENITE 25 MG TABLET	LAMOTRIGINE	1	
SUBVENITE 100 MG TABLET	LAMOTRIGINE	1	
SUBVENITE 150 MG TABLET	LAMOTRIGINE	1	
SUBVENITE 200 MG TABLET	LAMOTRIGINE	1	
SUBVENITE TABLET STARTER KIT (BLUE)	LAMOTRIGINE	1	
SUBVENITE TABLET STARTER KIT (GREEN)	LAMOTRIGINE	1	

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Medication Name	Generic Name	Tier	Notes
SUBVENITE TABLET STARTER KIT (ORANGE)	LAMOTRIGINE	1	
SUCRAID 17,000 UNIT/2 ML ORAL SOLUTION	SACROSIDASE	4	PA, LDD, SRX
SUCRAID 8,500 UNIT/ML ORAL SOLUTION	SACROSIDASE	4	PA, SRX
SUCRALFATE 1 GM TABLET	SUCRALFATE	1	
SULFACETAMIDE 10% EYE DROPS	SULFACETAMIDE SODIUM	1	
SULFACETAMIDE 10% EYE OINTMENT	SULFACETAMIDE SODIUM	1	
SULFACETAMIDE SODIUM 10% TOPICAL SUSPENSION	SULFACETAMIDE SODIUM	1	
SULFADIAZINE 500 MG TABLET	SULFADIAZINE	3	
SULFAMETHOXAZOLE-TMP DS TABLET	SULFAMETHOXAZOLE/TRIMETHOPRIM	1	
SULFAMETHOXAZOLE-TMP ORAL SUSPENSION	SULFAMETHOXAZOLE/TRIMETHOPRIM	1	
SULFAMETHOXAZOLE-TMP SS TABLET	SULFAMETHOXAZOLE/TRIMETHOPRIM	1	
SULFAMYLON 8.5% CREAM	MAFENIDE ACETATE	3	
SULFASALAZINE 500 MG TABLET	SULFASALAZINE	1	
SULFASALAZINE DR 500 MG TABLET	SULFASALAZINE	1	
SULF-PRED 10-0.23% EYE DROPS	SULFACETAMIDE/PREDNISOLONE SP	1	
SULINDAC 150 MG TABLET	SULINDAC	1	
SULINDAC 200 MG TABLET	SULINDAC	1	
SUMATRIPTAN 6 MG/0.5 ML AUTO-INJECTOR	SUMATRIPTAN SUCCINATE	1	QL
SUMATRIPTAN 6 MG/0.5 ML CARTRIDGE	SUMATRIPTAN SUCCINATE	1	QL
SUMATRIPTAN 5 MG NASAL SPRAY	SUMATRIPTAN	2	QL
SUMATRIPTAN 20 MG NASAL SPRAY	SUMATRIPTAN	2	QL
SUMATRIPTAN 4 MG/0.5 ML PEN INJECTOR	SUMATRIPTAN SUCCINATE	1	QL
SUMATRIPTAN 6 MG/0.5 ML VIAL	SUMATRIPTAN SUCCINATE	1	QL
SUMATRIPTAN SUCCINATE 25 MG TABLET	SUMATRIPTAN SUCCINATE	1	QL
SUMATRIPTAN SUCCINATE 50 MG TABLET	SUMATRIPTAN SUCCINATE	1	QL
SUMATRIPTAN SUCCINATE 100 MG TABLET	SUMATRIPTAN SUCCINATE	1	QL
SUNITINIB 12.5 MG CAPSULE	SUNITINIB MALATE	4	PA, QL, SRX
SUNITINIB 25 MG CAPSULE	SUNITINIB MALATE	4	PA, QL, SRX
SUNITINIB 37.5 MG CAPSULE	SUNITINIB MALATE	4	PA, QL, SRX
SUNITINIB 50 MG CAPSULE	SUNITINIB MALATE	4	PA, QL, SRX
SURE COMFORT INSULIN SYRINGE 0.3 ML 31G 1/4"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
SURE COMFORT INSULIN SYRINGE 0.5 ML 31G 1/4"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
SURE COMFORT INSULIN SYRINGE 1 ML 31G 1/4"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
SURE COMFORT PEN NEEDLE 29G 1/2"	PEN NEEDLE, DIABETIC	2	
SURE COMFORT PEN NEEDLE 30G	PEN NEEDLE, DIABETIC	2	
SURE COMFORT PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC	2	
SURE COMFORT PEN NEEDLE 31G 8MM	PEN NEEDLE, DIABETIC	2	
SURE COMFORT PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
SURE COMFORT PEN NEEDLE 32G 6MM	PEN NEEDLE, DIABETIC	2	
SURE COMFORT SAFETY PEN NEEDLE 31G 6MM	PEN NEEDLE, DIABETIC, SAFETY	2	
SURE COMFORT SAFETY PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC, SAFETY	2	

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Medication Name	Generic Name	Tier	Notes
SURE COMFORT SYRINGE 0.3 ML	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
SURE COMFORT SYRINGE 0.5 ML	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
SURE COMFORT SYRINGE 1 ML	SYRINGE AND NEEDLE,INSULIN,1ML	2	
SURE COMFORT SYRINGE 3/10 ML	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
SURE-FINE PEN NEEDLE 5MM	PEN NEEDLE, DIABETIC	2	
SURE-FINE PEN NEEDLE 8MM	PEN NEEDLE, DIABETIC	2	
SURE-FINE PEN NEEDLE 12.7MM	PEN NEEDLE, DIABETIC	2	
SURE-JECT INSULIN SYRINGE 0.3 ML 31G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
SURE-JECT INSULIN SYRINGE 0.5 ML 31G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
SURE-JECT INSULIN SYRINGE 1 ML	SYRINGE AND NEEDLE,INSULIN,1ML	2	
SURE-JECT INSULIN SYRINGE U100 0.3 ML	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
SURE-JECT INSULIN SYRINGE U100 0.5 ML	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
SURE-JECT INSULIN SYRINGE U100 1 ML	SYRINGE AND NEEDLE,INSULIN,1ML	2	
SURE-TEST EASYPLUS MINI CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
SYEDA 28 TABLET	ETHINYL ESTRADIOL/DROSPIRENONE	1	
SYMAX FASTABS 0.125 MG TABLET	HYOSCYAMINE SULFATE	1	
SYMAX-SL 0.125 MG SUBLINGUAL TABLET	HYOSCYAMINE SULFATE	1	
SYMAX-SR 0.375 MG TABLET	HYOSCYAMINE SULFATE	1	
SYMLINPEN 60 PEN INJECTOR	PRAMLINTIDE ACETATE	3	QL
SYMLINPEN 120 PEN INJECTOR	PRAMLINTIDE ACETATE	3	QL
SYMTUZA 800-150-200-10 MG TABLET	DARUNAVIR/COB/EMTRI/TENOF ALAF	3	QL, SRX
SYNAREL 2 MG/ML NASAL SPRAY	NAFARELIN ACETATE	4	PA, SRX
SYNERA PATCH	LIDOCAINE/TETRACAINE	3	
SYNJARDY 12.5-500 MG TABLET	EMPAGLIFLOZIN/METFORMIN HCL	2	QL
SYNJARDY 12.5-1,000 MG TABLET	EMPAGLIFLOZIN/METFORMIN HCL	2	QL
SYNJARDY 5-500 MG TABLET	EMPAGLIFLOZIN/METFORMIN HCL	2	QL
SYNJARDY 5-1,000 MG TABLET	EMPAGLIFLOZIN/METFORMIN HCL	2	QL
SYNJARDY XR 5-1,000 MG TABLET	EMPAGLIFLOZIN/METFORMIN HCL	2	QL
SYNJARDY XR 10-1,000 MG TABLET	EMPAGLIFLOZIN/METFORMIN HCL	2	QL
SYNJARDY XR 12.5-1,000 MG TABLET	EMPAGLIFLOZIN/METFORMIN HCL	2	QL
SYNJARDY XR 25-1,000 MG TABLET	EMPAGLIFLOZIN/METFORMIN HCL	2	QL
SYNTHROID 25 MCG TABLET	LEVOTHYROXINE SODIUM	3	
SYNTHROID 50 MCG TABLET	LEVOTHYROXINE SODIUM	3	
SYNTHROID 75 MCG TABLET	LEVOTHYROXINE SODIUM	3	
SYNTHROID 88 MCG TABLET	LEVOTHYROXINE SODIUM	3	
SYNTHROID 100 MCG TABLET	LEVOTHYROXINE SODIUM	3	
SYNTHROID 112 MCG TABLET	LEVOTHYROXINE SODIUM	3	
SYNTHROID 125 MCG TABLET	LEVOTHYROXINE SODIUM	3	
SYNTHROID 137 MCG TABLET	LEVOTHYROXINE SODIUM	3	
SYNTHROID 150 MCG TABLET	LEVOTHYROXINE SODIUM	3	
SYNTHROID 175 MCG TABLET	LEVOTHYROXINE SODIUM	3	

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Medication Name	Generic Name	Tier	Notes
SYNTHROID 200 MCG TABLET	LEVOTHYROXINE SODIUM	3	
SYNTHROID 300 MCG TABLET	LEVOTHYROXINE SODIUM	3	
SYRINGE WITH NEEDLE 3 ML 23G 1"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
T:FLEX 4.8 ML CARTRIDGE	INSULIN PUMP CARTRIDGE	2	
T:SLIM X2 3 ML CARTRIDGE	INSULIN PUMP CARTRIDGE	2	
TABLOID 40 MG TABLET	THIOGUANINE	3	PA
TACROLIMUS 0.03% OINTMENT	TACROLIMUS	1	
TACROLIMUS 0.1% OINTMENT	TACROLIMUS	1	
TACROLIMUS 0.5 MG CAPSULE (IR)	TACROLIMUS	1	SRX
TACROLIMUS 1 MG CAPSULE (IR)	TACROLIMUS	1	SRX
TACROLIMUS 5 MG CAPSULE (IR)	TACROLIMUS	1	SRX
TADALAFIL 2.5 MG TABLET	TADALAFIL	1	PA, QL
TADALAFIL 5 MG TABLET	TADALAFIL	1	PA, QL
TADALAFIL 20 MG TABLET	TADALAFIL	4	PA, SRX
TAFINLAR 10 MG TABLET FOR SUSPENSION	DABRAFENIB MESYLATE	4	PA, QL, SRX
TAFINLAR 50 MG CAPSULE	DABRAFENIB MESYLATE	4	PA, QL, SRX
TAFINLAR 75 MG CAPSULE	DABRAFENIB MESYLATE	4	PA, QL, SRX
TAFLUPROST 0.0015% EYE DROPS	TAFLUPROST/PF	3	QL
TAGRISSO 40 MG TABLET	OSIMERTINIB MESYLATE	4	PA, QL, LDD, SRX
TAGRISSO 80 MG TABLET	OSIMERTINIB MESYLATE	4	PA, QL, LDD, SRX
TAKE ACTION 1.5 MG TABLET	LEVONORGESTREL	3	
TAMOXIFEN 10 MG TABLET	TAMOXIFEN CITRATE	1	
TAMOXIFEN 20 MG TABLET	TAMOXIFEN CITRATE	1	
TAMSULOSIN 0.4 MG CAPSULE	TAMSULOSIN HCL	1	
TANDEM MOBI 2 ML CARTRIDGE	INSULIN PUMP CARTRIDGE	2	
TANDEM MOBI AUTOSOFT 30 KIT 23"	INSULIN INFUSION SET/CARTRIDGE	2	
TANDEM MOBI AUTOSOFT XC KIT 23"	INSULIN INFUSION SET/CARTRIDGE	2	
TANDEM MOBI AUTOSOFT XC KIT 5"	INSULIN INFUSION SET/CARTRIDGE	2	
TANDEM MOBI TRUSTEEL KIT 23"	INSULIN INFUSION SET/CARTRIDGE	2	
TARINA 24 FE 1 MG-20 MCG TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
TARINA FE 1-20 EQ TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
TARINA FE 1-20 TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
TARON-C DHA CAPSULE	MVN-MIN75/IRON/IRON PS/OM3/DHA	1	
TARON-PREX PRENATAL DHA CAPSULE	MVN NO.53/IRON/FOLIC/DSS/DHA	1	
TAYSOFY 1 MG-20 MCG CAPSULE	NORETHINDRONE-E.ESTRADIOL-IRON	1	
TAZAROTENE 0.05% CREAM	TAZAROTENE	3	
TAZAROTENE 0.1% CREAM	TAZAROTENE	2	
TAZAROTENE 0.05% GEL	TAZAROTENE	3	
TAZAROTENE 0.1% GEL	TAZAROTENE	3	
TAZTIA XT 120 MG CAPSULE	DILTIAZEM HCL	1	
TAZTIA XT 180 MG CAPSULE	DILTIAZEM HCL	1	

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Medication Name	Generic Name	Tier	Notes
TAZTIA XT 240 MG CAPSULE	DILTIAZEM HCL	1	
TAZTIA XT 300 MG CAPSULE	DILTIAZEM HCL	1	
TAZTIA XT 360 MG CAPSULE	DILTIAZEM HCL	1	
TDVAX VIAL	TETANUS, DIPHTHERIA TOX,ADULT	2	
TECHLITE INSULIN SYRINGE 1 ML 29G 12MM	SYRINGE AND NEEDLE,INSULIN,1ML	2	
TECHLITE INSULIN SYRINGE 1 ML 30G 12MM	SYRINGE AND NEEDLE,INSULIN,1ML	2	
TECHLITE INSULIN SYRINGE 1 ML 31G 6MM	SYRINGE AND NEEDLE,INSULIN,1ML	2	
TECHLITE INSULIN SYRINGE 1 ML 31G 8MM	SYRINGE AND NEEDLE,INSULIN,1ML	2	
TECHLITE PEN NEEDLE 29G 3/8"	PEN NEEDLE, DIABETIC	2	
TECHLITE PEN NEEDLE 29G 1/2"	PEN NEEDLE, DIABETIC	2	
TECHLITE PEN NEEDLE 31G 1/4"	PEN NEEDLE, DIABETIC	2	
TECHLITE PEN NEEDLE 31G 3/16"	PEN NEEDLE, DIABETIC	2	
TECHLITE PEN NEEDLE 31G 5/16"	PEN NEEDLE, DIABETIC	2	
TECHLITE PEN NEEDLE 32G 5/32"	PEN NEEDLE, DIABETIC	2	
TECHLITE PEN NEEDLE 32G 1/4"	PEN NEEDLE, DIABETIC	2	
TECHLITE PEN NEEDLE 32G 5/16"	PEN NEEDLE, DIABETIC	2	
TECHLITE PLUS PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
TECHLITE SYRINGE 0.3 ML 29G 12MM (1/2)	SYRGE-NDL,INS 0.3 ML HALF MARK	2	
TECHLITE SYRINGE 0.3 ML 30G 8MM (1/2)	SYRGE-NDL,INS 0.3 ML HALF MARK	2	
TECHLITE SYRINGE 0.3 ML 31G 6MM (1/2)	SYRGE-NDL,INS 0.3 ML HALF MARK	2	
TECHLITE SYRINGE 0.3 ML 31G 8MM (1/2)	SYRGE-NDL,INS 0.3 ML HALF MARK	2	
TECHLITE SYRINGE 0.5 ML 30G 8MM (1/2)	SYRGE-NDL,INS 0.5 ML HALF MARK	2	
TECHLITE SYRINGE 0.5 ML 30G 12MM (1/2)	SYRGE-NDL,INS 0.5 ML HALF MARK	2	
TECHLITE SYRINGE 0.5 ML 31G 6MM (1/2)	SYRGE-NDL,INS 0.5 ML HALF MARK	2	
TECHLITE SYRINGE 0.5 ML 31G 8MM (1/2)	SYRGE-NDL,INS 0.5 ML HALF MARK	2	
TELCARE CONTROL SOLUTION	BLOOD GLUCOSE CONTROL HIGH,LOW	2	
TELMISARTAN 20 MG TABLET	TELMISARTAN	1	
TELMISARTAN 40 MG TABLET	TELMISARTAN	1	
TELMISARTAN 80 MG TABLET	TELMISARTAN	1	
TELMISARTAN-AMLODIPINE 40-5 MG TABLET	TELMISARTAN/AMLODIPINE	1	
TELMISARTAN-AMLODIPINE 40-10 MG TABLET	TELMISARTAN/AMLODIPINE	1	
TELMISARTAN-AMLODIPINE 80-5 MG TABLET	TELMISARTAN/AMLODIPINE	1	
TELMISARTAN-AMLODIPINE 80-10 MG TABLET	TELMISARTAN/AMLODIPINE	1	
TELMISARTAN-HCTZ 40-12.5 MG TABLET	TELMISARTAN/HYDROCHLOROTHIAZID	1	
TELMISARTAN-HCTZ 80-12.5 MG TABLET	TELMISARTAN/HYDROCHLOROTHIAZID	1	
TELMISARTAN-HCTZ 80-25 MG TABLET	TELMISARTAN/HYDROCHLOROTHIAZID	1	
TEMAZEPAM 7.5 MG CAPSULE	TEMAZEPAM	1	
TEMAZEPAM 15 MG CAPSULE	TEMAZEPAM	1	
TEMAZEPAM 22.5 MG CAPSULE	TEMAZEPAM	1	
TEMAZEPAM 30 MG CAPSULE	TEMAZEPAM	1	
TEMOZOLOMIDE 5 MG CAPSULE	TEMOZOLOMIDE	4	PA, SRX

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Medication Name	Generic Name	Tier	Notes
TEMOZOLOMIDE 20 MG CAPSULE	TEMOZOLOMIDE	4	PA, SRX
TEMOZOLOMIDE 100 MG CAPSULE	TEMOZOLOMIDE	4	PA, SRX
TEMOZOLOMIDE 140 MG CAPSULE	TEMOZOLOMIDE	4	PA, SRX
TEMOZOLOMIDE 180 MG CAPSULE	TEMOZOLOMIDE	4	PA, SRX
TEMOZOLOMIDE 250 MG CAPSULE	TEMOZOLOMIDE	4	PA, SRX
TENCON 50-325 MG TABLET	BUTALBITAL/ACETAMINOPHEN	1	
TENIVAC SYRINGE	TETANUS-DIPHTHERIA TOXOIDS/PF	2	
TENIVAC VIAL	TETANUS-DIPHTHERIA TOXOIDS/PF	2	
TENOFOVIR 300 MG TABLET	TENOFOVIR DISOPROXIL FUMARATE	1	SRX
TERAZOSIN 1 MG CAPSULE	TERAZOSIN HCL	1	
TERAZOSIN 2 MG CAPSULE	TERAZOSIN HCL	1	
TERAZOSIN 5 MG CAPSULE	TERAZOSIN HCL	1	
TERAZOSIN 10 MG CAPSULE	TERAZOSIN HCL	1	
TERBUTALINE 2.5 MG TABLET	TERBUTALINE SULFATE	1	
TERBINAFINE 250 MG TABLET	TERBINAFINE HCL	1	
TERBUTALINE 5 MG TABLET	TERBUTALINE SULFATE	1	
TERCONAZOLE 0.4% CREAM	TERCONAZOLE	1	
TERCONAZOLE 0.8% CREAM	TERCONAZOLE	1	
TERCONAZOLE 80 MG SUPPOSITORY	TERCONAZOLE	1	
TERIFLUNOMIDE 7 MG TABLET	TERIFLUNOMIDE	4	PA, QL, SRX
TERIFLUNOMIDE 14 MG TABLET	TERIFLUNOMIDE	4	PA, QL, SRX
TERUMO INSULIN SYRINGE 0.3 ML 29G 1/2"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
TERUMO INSULIN SYRINGE U100 1 ML	SYRINGE AND NEEDLE,INSULIN,1ML	2	
TERUMO INSULIN SYRINGE U100 1/2 ML	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
TERUMO INSULIN SYRINGE U100 1/3 ML	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
TERUMO SURGUARD2 NEEDLE 18G 1"	NEEDLES, SAFETY	2	
TERUMO SURGUARD2 NEEDLE 18G 1.5"	NEEDLES, SAFETY	2	
TERUMO SURGUARD2 NEEDLE 19G 1"	NEEDLES, SAFETY	2	
TERUMO SURGUARD2 NEEDLE 19G 1.5"	NEEDLES, SAFETY	2	
TERUMO SURGUARD2 NEEDLE 20G 1"	NEEDLES, SAFETY	2	
TERUMO SURGUARD2 NEEDLE 20G 1.5"	NEEDLES, SAFETY	2	
TERUMO SURGUARD2 NEEDLE 21G 1"	NEEDLES, SAFETY	2	
TERUMO SURGUARD2 NEEDLE 21G 1-1.5"	NEEDLES, SAFETY	2	
TERUMO SURGUARD2 NEEDLE 22 1.5"	NEEDLES, SAFETY	2	
TERUMO SURGUARD2 NEEDLE 22G 1"	NEEDLES, SAFETY	2	
TERUMO SURGUARD2 NEEDLE 23G 1.5"	NEEDLES, SAFETY	2	
TERUMO SURGUARD2 NEEDLE 23G 1"	NEEDLES, SAFETY	2	
TERUMO SURGUARD2 NEEDLE 25G 1"	NEEDLES, SAFETY	2	
TERUMO SURGUARD2 NEEDLE 25G 1.5"	NEEDLES, SAFETY	2	
TERUMO SURGUARD2 NEEDLE 25G 5/8"	NEEDLES, SAFETY	2	
TERUMO SURGUARD2 NEEDLE 26G 1/2"	NEEDLES, SAFETY	2	

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Medication Name	Generic Name	Tier	Notes
TERUMO SURGUARD2 NEEDLE 27G 1/2"	NEEDLES, SAFETY	2	
TERUMO SURGUARD2 NEEDLE 30G 1/2"	NEEDLES, SAFETY	2	
TERUMO SYRINGE 3 ML	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
TESTOSTERONE 50 MG/5 GRAM GEL	TESTOSTERONE	2	PA, QL
TESTOSTERONE 1% (25 MG/2.5 G) PACKET	TESTOSTERONE	2	PA, QL
TESTOSTERONE 1% (50 MG/5 G) PACKET	TESTOSTERONE	2	PA, QL
TESTOSTERONE 1.62%(1.25 G) PACKET	TESTOSTERONE	2	PA, QL
TESTOSTERONE 1.62% (2.5 G) PACKET	TESTOSTERONE	2	PA, QL
TESTOSTERONE 1.62% GEL PUMP	TESTOSTERONE	2	PA, QL
TESTOSTERONE 10 MG GEL PUMP	TESTOSTERONE	2	PA, QL
TESTOSTERONE 12.5 MG/1.25 GRAM PUMP	TESTOSTERONE	2	PA, QL
TESTOSTERONE 50 MG/5 GRAM PACKET	TESTOSTERONE	2	PA, QL
TESTOSTERONE CYPIONATE 200 MG/ML VIAL	TESTOSTERONE CYPIONATE	1	
TESTOSTERONE CYPIONATE 500 MG/2.5 ML VIAL	TESTOSTERONE CYPIONATE	1	
TESTOSTERONE CYPIONATE 1,000 MG/5 ML VIAL	TESTOSTERONE CYPIONATE	1	
TESTOSTERONE CYPIONATE 1,000 MG/10 ML VIAL	TESTOSTERONE CYPIONATE	1	
TESTOSTERONE CYPIONATE 2,000 MG/10 ML VIAL	TESTOSTERONE CYPIONATE	1	
TESTOSTERONE CYPIONATE 6,000 MG/30 ML VIAL	TESTOSTERONE CYPIONATE	1	
TESTOSTERONE ENANTHATE 200 MG/ML VIAL	TESTOSTERONE ENANTHATE	1	
TESTOSTERONE ENANTHATE 1,000 MG/5 ML VIAL	TESTOSTERONE ENANTHATE	1	
TETRABENAZINE 12.5 MG TABLET	TETRABENAZINE	4	PA, QL, SRX
TETRABENAZINE 25 MG TABLET	TETRABENAZINE	4	PA, QL, SRX
TETRACAINE 0.5% EYE DROPS	TETRACAINE HCL	1	
TETRACAINE 0.5% STERI-UNIT EYE SOLUTION	TETRACAINE HCL/PF	1	
TETRACYCLINE 250 MG CAPSULE	TETRACYCLINE HCL	2	
TETRACYCLINE 500 MG CAPSULE	TETRACYCLINE HCL	2	
TEXACORT 2.5% TOPICAL SOLUTION	HYDROCORTISONE	3	
THALOMID 50 MG CAPSULE	THALIDOMIDE	4	PA, QL, LDD, SRX
THALOMID 100 MG CAPSULE	THALIDOMIDE	4	PA, QL, LDD, SRX
THALOMID 200 MG CAPSULE	THALIDOMIDE	4	PA, QL, SRX
THEOPHYLLINE 80 MG/15 ML ORAL SOLUTION	THEOPHYLLINE ANHYDROUS	1	
THEOPHYLLINE ER 100 MG TABLET	THEOPHYLLINE ANHYDROUS	1	
THEOPHYLLINE ER 200 MG TABLET	THEOPHYLLINE ANHYDROUS	1	
THEOPHYLLINE ER 300 MG TABLET	THEOPHYLLINE ANHYDROUS	1	
THEOPHYLLINE ER 400 MG TABLET	THEOPHYLLINE ANHYDROUS	1	
THEOPHYLLINE ER 450 MG TABLET	THEOPHYLLINE ANHYDROUS	1	
THEOPHYLLINE ER 600 MG TABLET	THEOPHYLLINE ANHYDROUS	1	
THINPRO INSULIN SYRINGE U100 0.3 ML	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
THINPRO INSULIN SYRINGE U100 0.5 ML	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
THINPRO INSULIN SYRINGE U100 1 ML	SYRINGE AND NEEDLE,INSULIN,1ML	2	
THIORIDAZINE 10 MG TABLET	THIORIDAZINE HCL	1	

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Medication Name	Generic Name	Tier	Notes
THIORIDAZINE 25 MG TABLET	THIORIDAZINE HCL	1	
THIORIDAZINE 50 MG TABLET	THIORIDAZINE HCL	1	
THIORIDAZINE 100 MG TABLET	THIORIDAZINE HCL	1	
THIOTHIXENE 1 MG CAPSULE	THIOTHIXENE	1	
THIOTHIXENE 2 MG CAPSULE	THIOTHIXENE	1	
THIOTHIXENE 5 MG CAPSULE	THIOTHIXENE	1	
THIOTHIXENE 10 MG CAPSULE	THIOTHIXENE	1	
THRIVITE 19 TABLET	MV, MIN 59/IRON/FOLIC/DOCUSATE	1	
THYROID 15 MG TABLET	THYROID,PORK	1	
THYROID 30 MG TABLET	THYROID,PORK	1	
THYROID 60 MG TABLET	THYROID,PORK	1	
THYROID 90 MG TABLET	THYROID,PORK	1	
THYROID 120 MG TABLET	THYROID,PORK	1	
TIADYLT ER 120 MG CAPSULE	DILTIAZEM HCL	1	
TIADYLT ER 180 MG CAPSULE	DILTIAZEM HCL	1	
TIADYLT ER 240 MG CAPSULE	DILTIAZEM HCL	1	
TIADYLT ER 300 MG CAPSULE	DILTIAZEM HCL	1	
TIADYLT ER 360 MG CAPSULE	DILTIAZEM HCL	1	
TIADYLT ER 420 MG CAPSULE	DILTIAZEM HCL	1	
TIAGABINE 2 MG TABLET	TIAGABINE HCL	3	
TIAGABINE 4 MG TABLET	TIAGABINE HCL	3	
TIAGABINE 12 MG TABLET	TIAGABINE HCL	3	
TIAGABINE 16 MG TABLET	TIAGABINE HCL	3	
TICAGRELOR 60 MG TABLET	TICAGRELOR	2	
TICAGRELOR 90 MG TABLET	TICAGRELOR	2	
TILIA FE 28 TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
TIMOLOL 0.25% EYE DROPS	TIMOLOL MALEATE	1	
TIMOLOL 0.5% EYE DROPS	TIMOLOL MALEATE	1	
TIMOLOL 0.25% GEL-SOLUTION	TIMOLOL MALEATE	1	
TIMOLOL 0.5% GEL-SOLUTION	TIMOLOL MALEATE	1	
TIMOLOL 0.5% GFS GEL-SOLUTION	TIMOLOL MALEATE	1	
TIMOLOL 5 MG TABLET	TIMOLOL MALEATE	1	
TIMOLOL 10 MG TABLET	TIMOLOL MALEATE	1	
TIMOLOL 20 MG TABLET	TIMOLOL MALEATE	1	
TINIDAZOLE 250 MG TABLET	TINIDAZOLE	1	
TINIDAZOLE 500 MG TABLET	TINIDAZOLE	1	
TIOPRONIN 100 MG TABLET	TIOPRONIN	4	SRX
TIS-U-SOLUTION PENTALYTE IRRIGATION SOLUTION	SOD,POT CHLOR/MAG/SOD,POT PHOS	3	
TIVICAY 10 MG TABLET	DOLUTEGRAVIR SODIUM	2	SRX
TIVICAY 25 MG TABLET	DOLUTEGRAVIR SODIUM	2	SRX
TIVICAY 50 MG TABLET	DOLUTEGRAVIR SODIUM	2	SRX

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Medication Name	Generic Name	Tier	Notes
TIVICAY PD 5 MG TABLET FOR SUSPENSION	DOLUTEGRAVIR SODIUM	2	SRX
TIZANIDINE 2 MG TABLET	TIZANIDINE HCL	1	
TIZANIDINE 4 MG TABLET	TIZANIDINE HCL	1	
TOBRAMYCIN 300 MG/5 ML AMPULE	TOBRAMYCIN IN 0.225% SOD CHLOR	4	PA, QL, SRX
TOBRAMYCIN 0.3% EYE DROPS	TOBRAMYCIN	1	
TOBRAMYCIN PAK 300 MG/5 ML	TOBRAMYCIN/NEBULIZER	4	PA, QL, SRX
TOBRAMYCIN-DEXAMETHASONE EYE DROPS	TOBRAMYCIN/DEXAMETHASONE	1	
TODAY'S HEALTH PEN NEEDLE 31G 6MM	PEN NEEDLE, DIABETIC	2	
TOLCAPONE 100 MG TABLET	TOLCAPONE	4	
TOLMETIN 400 MG CAPSULE	TOLMETIN SODIUM	1	
TOLMETIN 200 MG TABLET	TOLMETIN SODIUM	1	
TOLMETIN 600 MG TABLET	TOLMETIN SODIUM	1	
TOLTERODINE 1 MG TABLET	TOLTERODINE TARTRATE	1	
TOLTERODINE 2 MG TABLET	TOLTERODINE TARTRATE	1	
TOLTERODINE ER 2 MG CAPSULE	TOLTERODINE TARTRATE	1	
TOLTERODINE ER 4 MG CAPSULE	TOLTERODINE TARTRATE	1	
TOLVAPTAN 15 MG TABLET	TOLVAPTAN	4	PA, SRX
TOLVAPTAN 30 MG TABLET	TOLVAPTAN	4	PA, SRX
TOPCARE CLICKFINE 31G 1/4"	PEN NEEDLE, DIABETIC	2	
TOPCARE CLICKFINE 31G 5/16"	PEN NEEDLE, DIABETIC	2	
TOPCARE ULTRA COMFORT SYRINGE	SYRINGE AND NEEDLE,INSULIN,1ML	2	
TOPIRAMATE 15 MG SPRINKLE CAPSULE	TOPIRAMATE	1	
TOPIRAMATE 25 MG SPRINKLE CAPSULE	TOPIRAMATE	1	
TOPIRAMATE 25 MG TABLET	TOPIRAMATE	1	
TOPIRAMATE 50 MG TABLET	TOPIRAMATE	1	
TOPIRAMATE 100 MG TABLET	TOPIRAMATE	1	
TOPIRAMATE 200 MG TABLET	TOPIRAMATE	1	
TOPIRAMATE ER 25 MG SPRINKLE CAPSULE	TOPIRAMATE	2	
TOPIRAMATE ER 50 MG SPRINKLE CAPSULE	TOPIRAMATE	2	
TOPIRAMATE ER 100 MG SPRINKLE CAPSULE	TOPIRAMATE	2	
TOPIRAMATE ER 150 MG SPRINKLE CAPSULE	TOPIRAMATE	2	
TOPIRAMATE ER 200 MG SPRINKLE CAPSULE	TOPIRAMATE	2	
TOREMIFENE 60 MG TABLET	TOREMIFENE CITRATE	3	QL
TORPENZ 2.5 MG TABLET	EVEROLIMUS	4	PA, QL, LDD, SRX
TORPENZ 5 MG TABLET	EVEROLIMUS	4	PA, QL, LDD, SRX
TORPENZ 7.5 MG TABLET	EVEROLIMUS	4	PA, QL, LDD, SRX
TORPENZ 10 MG TABLET	EVEROLIMUS	4	PA, QL, LDD, SRX
TORSEMIDE 5 MG TABLET	TORSEMIDE	1	
TORSEMIDE 10 MG TABLET	TORSEMIDE	1	
TORSEMIDE 20 MG TABLET	TORSEMIDE	1	
TORSEMIDE 100 MG TABLET	TORSEMIDE	1	

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Medication Name	Generic Name	Tier	Notes
TOVET EMOLLIENT 0.05% FOAM	CLOBETASOL PROPIONATE/EMOLL	2	QL
TRADJENTA 5 MG TABLET	LINAGLIPTIN	2	QL
TRAMADOL 50 MG TABLET	TRAMADOL HCL	1	QL
TRAMADOL ER 100 MG TABLET	TRAMADOL HCL	1	PA, QL
TRAMADOL ER 200 MG TABLET	TRAMADOL HCL	1	PA, QL
TRAMADOL ER 300 MG TABLET	TRAMADOL HCL	1	PA, QL
TRAMADOL-ACETAMINOPHEN 37.5-325 MG TABLET	TRAMADOL HCL/ACETAMINOPHEN	1	QL
TRANDOLAPRIL 1 MG TABLET	TRANDOLAPRIL	1	
TRANDOLAPRIL 2 MG TABLET	TRANDOLAPRIL	1	
TRANDOLAPRIL 4 MG TABLET	TRANDOLAPRIL	1	
TRANDOLAPRIL-VERAPAMIL ER 1-240 MG TABLET	TRANDOLAPRIL/VERAPAMIL HCL	1	
TRANDOLAPRIL-VERAPAMIL ER 2-180 MG TABLET	TRANDOLAPRIL/VERAPAMIL HCL	1	
TRANDOLAPRIL-VERAPAMIL ER 2-240 MG TABLET	TRANDOLAPRIL/VERAPAMIL HCL	1	
TRANDOLAPRIL-VERAPAMIL ER 4-240 MG TABLET	TRANDOLAPRIL/VERAPAMIL HCL	1	
TRANEXAMIC ACID 650 MG TABLET	TRANEXAMIC ACID	1	SRX
TRANYLCYPROMINE 10 MG TABLET	TRANYLCYPROMINE SULFATE	2	
TRAVOPROST 0.004% EYE DROPS	TRAVOPROST	1	
TRAZODONE 50 MG TABLET	TRAZODONE HCL	1	
TRAZODONE 100 MG TABLET	TRAZODONE HCL	1	
TRAZODONE 150 MG TABLET	TRAZODONE HCL	1	
TRAZODONE 300 MG TABLET	TRAZODONE HCL	1	
TRECATOR 250 MG TABLET	ETHIONAMIDE	3	
TRELEGY ELLIPTA 100-62.5-25 INHALATION DEVICE	FLUTICASONE/UMECLIDIN/VILANTER	2	QL
TRELEGY ELLIPTA 200-62.5-25 INHALATION DEVICE	FLUTICASONE/UMECLIDIN/VILANTER	2	QL
TREMFYA 100 MG/ML AUTO-INJECTOR	GUSELKUMAB	4	PA, QL, SRX
TREMFYA 100 MG/ML SYRINGE	GUSELKUMAB	4	PA, QL, SRX
TREMFYA 200 MG/2 ML PEN	GUSELKUMAB	4	PA, QL, SRX
TREMFYA 200 MG/2 ML SYRINGE	GUSELKUMAB	4	PA, QL, SRX
TRESIBA 100 UNIT/ML VIAL	INSULIN DEGLUDEC	2	QL
TRESIBA FLEXTOUCH 100 UNIT/ML	INSULIN DEGLUDEC	2	QL
TRESIBA FLEXTOUCH 200 UNIT/ML	INSULIN DEGLUDEC	2	QL
TRETINOIN 10 MG CAPSULE	TRETINOIN	3	PA
TRETINOIN 0.025% CREAM	TRETINOIN	1	PA, AGE
TRETINOIN 0.05% CREAM	TRETINOIN	1	PA, AGE
TRETINOIN 0.1% CREAM	TRETINOIN	1	PA, AGE
TRETINOIN 0.025% GEL	TRETINOIN	2	PA, AGE
TRETINOIN 0.01% GEL	TRETINOIN	2	PA, AGE
TRETINOIN 0.05% GEL	TRETINOIN	2	PA, AGE
TRETINOIN GEL MICRO 0.04% PUMP	TRETINOIN MICROSPHERES	2	PA, AGE
TRETINOIN GEL MICRO 0.1% PUMP	TRETINOIN MICROSPHERES	2	PA, AGE
TRETINOIN GEL MICRO 0.04% TUBE	TRETINOIN MICROSPHERES	2	PA, AGE
TRETINOIN GEL MICRO 0.1% TUBE	TRETINOIN MICROSPHERES	2	PA, AGE

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Medication Name	Generic Name	Tier	Notes
TRIAMCINOLONE 0.025% CREAM	TRIAMCINOLONE ACETONIDE	1	
TRIAMCINOLONE 0.1% CREAM	TRIAMCINOLONE ACETONIDE	1	
TRIAMCINOLONE 0.5% CREAM	TRIAMCINOLONE ACETONIDE	1	
TRIAMCINOLONE 0.025% LOTION	TRIAMCINOLONE ACETONIDE	1	
TRIAMCINOLONE 0.1% LOTION	TRIAMCINOLONE ACETONIDE	1	
TRIAMCINOLONE 0.025% OINTMENT	TRIAMCINOLONE ACETONIDE	1	
TRIAMCINOLONE 0.1% OINTMENT	TRIAMCINOLONE ACETONIDE	1	
TRIAMCINOLONE 0.5% OINTMENT	TRIAMCINOLONE ACETONIDE	1	
TRIAMCINOLONE 0.1% TOOTHPASTE	TRIAMCINOLONE ACETONIDE	1	
TRIAMTERENE 50 MG CAPSULE	TRIAMTERENE	3	
TRIAMTERENE 100 MG CAPSULE	TRIAMTERENE	3	
TRIAMTERENE-HCTZ 37.5-25 MG CAPSULE	TRIAMTERENE/HYDROCHLOROTHIAZID	1	
TRIAMTERENE-HCTZ 37.5-25 MG TABLET	TRIAMTERENE/HYDROCHLOROTHIAZID	1	
TRIAMTERENE-HCTZ 75-50 MG TABLET	TRIAMTERENE/HYDROCHLOROTHIAZID	1	
TRIAZOLAM 0.125 MG TABLET	TRIAZOLAM	1	
TRIAZOLAM 0.25 MG TABLET	TRIAZOLAM	1	
TRIDERM 0.1% CREAM	TRIAMCINOLONE ACETONIDE	1	
TRIDERM 0.5% CREAM	TRIAMCINOLONE ACETONIDE	1	
TRI-ESTARYLLA TABLET	NORGESTIMATE-ETHINYL ESTRADIOL	1	
TRI-LEGEST FE-28 DAY TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
TRI-LINYAH TABLET	NORGESTIMATE-ETHINYL ESTRADIOL	1	
TRI-LO-ESTARYLLA TABLET	NORGESTIMATE-ETHINYL ESTRADIOL	1	
TRI-LO-MARZIA TABLET	NORGESTIMATE-ETHINYL ESTRADIOL	1	
TRI-LO-MILI TABLET	NORGESTIMATE-ETHINYL ESTRADIOL	1	
TRI-LO-SPRINTEC TABLET	NORGESTIMATE-ETHINYL ESTRADIOL	1	
TRI-MILI 28 TABLET	NORGESTIMATE-ETHINYL ESTRADIOL	1	
TRI-NYMYO 28 TABLET	NORGESTIMATE-ETHINYL ESTRADIOL	1	
TRI-SPRINTEC TABLET	NORGESTIMATE-ETHINYL ESTRADIOL	1	
TRI-VITE-FLUORIDE 0.25 MG/ML ORAL DROPS	PED MVIT A,C,D3 NO.21/FLUORIDE	1	
TRI-VITE-FLUORIDE 0.5 MG/ML ORAL DROPS	PED MVIT A,C,D3 NO.21/FLUORIDE	1	
TRI-VIT-FLUOR 0.25 MG/ML ORAL DROPS	PED MVIT A,C,D3 NO.21/FLUORIDE	1	
TRI-VIT-FLUOR 0.5 MG/ML ORAL DROPS	PED MVIT A,C,D3 NO.21/FLUORIDE	1	
TRI-VYLIBRA 28 TABLET	NORGESTIMATE-ETHINYL ESTRADIOL	1	
TRI-VYLIBRA LO TABLET	NORGESTIMATE-ETHINYL ESTRADIOL	1	
TRIFLUOPERAZINE 1 MG TABLET	TRIFLUOPERAZINE HCL	1	
TRIFLUOPERAZINE 2 MG TABLET	TRIFLUOPERAZINE HCL	1	
TRIFLUOPERAZINE 5 MG TABLET	TRIFLUOPERAZINE HCL	1	
TRIFLUOPERAZINE 10 MG TABLET	TRIFLUOPERAZINE HCL	1	
TRIFLURIDINE 1% EYE DROPS	TRIFLURIDINE	1	
TRIHEXYPHENIDYL 2 MG/5 ML ORAL SOLUTION	TRIHEXYPHENIDYL HCL	1	
TRIHEXYPHENIDYL 2 MG TABLET	TRIHEXYPHENIDYL HCL	1	

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Medication Name	Generic Name	Tier	Notes
TRIHEXYPHENIDYL 5 MG TABLET	TRIHEXYPHENIDYL HCL	1	
TRIKAFTA 50-25-37.5 MG/75 MG TABLET	ELEXACAFTOR/TEZACAFTOR/IVACAFT	4	PA, QL, LDD, SRX
TRIKAFTA 80-40-60 MG/59.5 MG PACKET	ELEXACAFTOR/TEZACAFTOR/IVACAFT	4	PA, QL, LDD, SRX
TRIKAFTA 100-50-75 MG/75 MG PACKET	ELEXACAFTOR/TEZACAFTOR/IVACAFT	4	PA, QL, LDD, SRX
TRIKAFTA 100-50-75 MG/150 MG TABLET	ELEXACAFTOR/TEZACAFTOR/IVACAFT	4	PA, QL, LDD, SRX
TRIMETHOBENZAMIDE 300 MG CAPSULE	TRIMETHOBENZAMIDE HCL	1	
TRIMETHOPRIM 100 MG TABLET	TRIMETHOPRIM	1	
TRIMIPRAMINE 25 MG CAPSULE	TRIMIPRAMINE MALEATE	1	
TRIMIPRAMINE 50 MG CAPSULE	TRIMIPRAMINE MALEATE	1	
TRIMIPRAMINE 100 MG CAPSULE	TRIMIPRAMINE MALEATE	1	
TRINATAL RX 1 TABLET	PRENATAL VIT27,CALCIUM/IRON/FA	1	
TRINTELLIX 5 MG TABLET	VORTIOXETINE HYDROBROMIDE	3	QL
TRINTELLIX 10 MG TABLET	VORTIOXETINE HYDROBROMIDE	3	QL
TRINTELLIX 20 MG TABLET	VORTIOXETINE HYDROBROMIDE	3	QL
TRIUMEQ 600-50-300 MG TABLET	ABACAVIR/DOLUTEGRAVIR/LAMIVUDI	3	QL, SRX
TRIUMEQ PD 60-5-30 MG TABLET FOR SUSPENSION	ABACAVIR/DOLUTEGRAVIR/LAMIVUDI	3	QL, SRX
TROPICAMIDE 0.5% EYE DROPS	TROPICAMIDE	1	
TROPICAMIDE 1% EYE DROPS	TROPICAMIDE	1	
TROSPIUM 20 MG TABLET	TROSPIUM CHLORIDE	1	
TROSPIUM ER 60 MG CAPSULE	TROSPIUM CHLORIDE	1	
TRUE COMFORT PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC	2	
TRUE COMFORT PEN NEEDLE 31G 6MM	PEN NEEDLE, DIABETIC	2	
TRUE COMFORT PEN NEEDLE 31G 8MM	PEN NEEDLE, DIABETIC	2	
TRUE COMFORT PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
TRUE COMFORT PEN NEEDLE 32G 5MM	PEN NEEDLE, DIABETIC	2	
TRUE COMFORT PEN NEEDLE 32G 6MM	PEN NEEDLE, DIABETIC	2	
TRUE COMFORT PEN NEEDLE 33G 4MM	PEN NEEDLE, DIABETIC	2	
TRUE COMFORT PEN NEEDLE 33G 5MM	PEN NEEDLE, DIABETIC	2	
TRUE COMFORT PEN NEEDLE 33G 6MM	PEN NEEDLE, DIABETIC	2	
TRUE COMFORT PRO SYRINGE 0.5 ML 30G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
TRUE COMFORT PRO SYRINGE 0.5 ML 30G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
TRUE COMFORT PRO SYRINGE 0.5 ML 31G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
TRUE COMFORT PRO SYRINGE 0.5 ML 32G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
TRUE COMFORT PRO SYRINGE 1 ML 30G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
TRUE COMFORT PRO SYRINGE 1 ML 30G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
TRUE COMFORT PRO SYRINGE 1 ML 31G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
TRUE COMFORT PRO SYRINGE 1 ML 32G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
TRUE COMFORT SAFETY PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC, SAFETY	2	
TRUE COMFORT SAFETY PEN NEEDLE 31G 6MM	PEN NEEDLE, DIABETIC, SAFETY	2	
TRUE COMFORT SAFETY PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC, SAFETY	2	
TRUE COMFORT SAFETY SYRINGE 1 ML 30G 1/2"	SYRINGE,NEEDLE,INSULN,SAFE,1ML	2	

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Medication Name	Generic Name	Tier	Notes
TRUE COMFORT SYRINGE 0.5 ML 30G 1/2"	SYRINGE,NEEDLE,INSULN,SF 0.5ML	2	
TRUE COMFORT SYRINGE 0.5 ML 30G 5/16"	SYRINGE,NEEDLE,INSULN,SF 0.5ML	2	
TRUE COMFORT SYRINGE 0.5 ML 31G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
TRUE COMFORT SYRINGE 1 ML 31G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
TRUE COMFRT SAFETY SYRINGE 1 ML 30G 5/16"	SYRINGE,NEEDLE,INSULN,SAFE,1ML	2	
TRUE COMFRT SAFETY SYRINGE 1 ML 31G 5/16"	SYRINGE,NEEDLE,INSULN,SAFE,1ML	2	
TRUE COMFRT SAFETY SYRINGE 1 ML 32G 5/16"	SYRINGE,NEEDLE,INSULN,SAFE,1ML	2	
TRUE METRIX AIR GLUCOSE METER	BLOOD-GLUCOSE METER	1	
TRUE METRIX GO GLUCOSE METER	BLOOD-GLUCOSE METER	1	
TRUE METRIX GLUCOSE METER	BLOOD-GLUCOSE METER	1	
TRUE METRIX GLUCOSE TEST STRIP	BLOOD SUGAR DIAGNOSTIC	2	
TRUE METRIX LEVEL 1 CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, LOW	2	
TRUE METRIX LEVEL 2 CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
TRUE METRIX LEVEL 3 CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, HIGH	2	
TRUECONTROL GLUCOSE SOLUTION	BLOOD-GLUCOSE CONTROL, LOW	2	
TRUEDRAW LANCING DEVICE	LANCING DEVICE/LANCETS	2	
TRUEPLUS 33G LANCET	LANCETS	2	
TRUEPLUS KETONE TEST STRIP	URINE ACETONE TEST STRIPS	2	
TRUEPLUS PEN NEEDLE 29G 1/2"	PEN NEEDLE, DIABETIC	2	
TRUEPLUS PEN NEEDLE 29G 12MM	PEN NEEDLE, DIABETIC	2	
TRUEPLUS PEN NEEDLE 31G 1/4"	PEN NEEDLE, DIABETIC	2	
TRUEPLUS PEN NEEDLE 31G 3/16"	PEN NEEDLE, DIABETIC	2	
TRUEPLUS PEN NEEDLE 31G 5/16"	PEN NEEDLE, DIABETIC	2	
TRUEPLUS PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC	2	
TRUEPLUS PEN NEEDLE 31G 8MM	PEN NEEDLE, DIABETIC	2	
TRUEPLUS PEN NEEDLE 32G 5/32"	PEN NEEDLE, DIABETIC	2	
TRUEPLUS SAFETY 28G LANCET	LANCETS	2	
TRUEPLUS SUPER THIN 28G LANCET	LANCETS	2	
TRUEPLUS SYRINGE 0.3 ML 29G 1/2"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
TRUEPLUS SYRINGE 0.3 ML 30G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
TRUEPLUS SYRINGE 0.3 ML 31G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
TRUEPLUS SYRINGE 0.5 ML 28G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
TRUEPLUS SYRINGE 0.5 ML 29G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
TRUEPLUS SYRINGE 0.5 ML 30G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
TRUEPLUS SYRINGE 0.5 ML 31G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
TRUEPLUS SYRINGE 1 ML 28G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
TRUEPLUS SYRINGE 1 ML 29G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
TRUEPLUS SYRINGE 1 ML 30G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
TRUEPLUS SYRINGE 1 ML 31G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
TRUEPLUS ULTRA THIN 30G LANCET	LANCETS	2	
TRULICITY 0.75 MG/0.5 ML PEN	DULAGLUTIDE	2	PA, QL

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Medication Name	Generic Name	Tier	Notes
TRULICITY 1.5 MG/0.5 ML PEN	DULAGLUTIDE	2	PA, QL
TRULICITY 3 MG/0.5 ML PEN	DULAGLUTIDE	2	PA, QL
TRULICITY 4.5 MG/0.5 ML PEN	DULAGLUTIDE	2	PA, QL
TRUMENBA 120 MCG/0.5 ML VACCINE	N.MENINGITIDIS B,LIPID FHBP RC	2	
TRUSTEEL INFUSION PACK 23" 6MM	INSULIN INFUSION SET/CARTRIDGE	2	
TRUSTEEL INFUSION SET 23" 6MM	INFUSION SET FOR INSULIN PUMP	2	
TRUSTEEL INFUSION SET 23" 8MM	INFUSION SET FOR INSULIN PUMP	2	
TRUSTEEL INFUSION SET 32" 6MM	INFUSION SET FOR INSULIN PUMP	2	
TRUSTEEL INFUSION SET 32" 8MM	INFUSION SET FOR INSULIN PUMP	2	
TRUZONE PEAK FLOW METER	PEAK FLOW METER	2	
TUDORZA PRESSAIR 400 MCG INHALER	ACLIDINIUM BROMIDE	3	QL
TULANA 0.35 MG TABLET	NORETHINDRONE	1	
TURQOZ-28 TABLET	NORGESTREL-ETHINYL ESTRADIOL	1	
TWINRIX VACCINE SYRINGE	HEPATITIS A AND B VACCINE/PF	2	
TWIRLA 120-30 MCG/DAY PATCH	LEVONORGESTREL/ETHIN.ESTRADIOL	1	
TYBLUME 0.1-0.02 MG CHEWABLE TABLET	LEVONORGESTREL/ETHIN.ESTRADIOL	1	
TYBOST 150 MG TABLET	COBICISTAT	2	SRX
TYENNE 162 MG/0.9 ML AUTO-INJECTOR	TOCILIZUMAB-AAZG	4	PA, QL, SRX
TYENNE 162 MG/0.9 ML SYRINGE	TOCILIZUMAB-AAZG	4	PA, QL, SRX
TYMLOS 80 MCG DOSE PEN INJECTOR	ABALOPARATIDE	4	PA, QL, SRX
TYVASO INHALATION REFILL KIT	TREPROSTINIL/NEB ACCESSORIES	4	PA, LDD, SRX
TYVASO INHALATION STARTER KIT	TREPROSTINIL/NEBULIZER/ACCESOR	4	PA, LDD, SRX
TYVASO 1.74 MG/2.9 ML INHALATION SOLUTION	TREPROSTINIL	4	PA, LDD, SRX
TYVASO INSTITUTIONAL STARTER KIT	TREPROSTINIL/NEBULIZER/ACCESOR	4	PA, LDD, SRX
UDENYCA 6 MG/0.6 ML AUTO-INJECTOR	PEGFILGRASTIM-CBQV	4	PA, SRX
UDENYCA 6 MG/0.6 ML ON-BODY	PEGFILGRASTIM-CBQV	4	PA, SRX
UDENYCA 6 MG/0.6 ML SYRINGE	PEGFILGRASTIM-CBQV	4	PA, SRX
ULESFIA 5% LOTION	BENZYL ALCOHOL	3	
ULTICARE INSULIN SAFETY SYRINGE 1 ML 29G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
ULTICARE INSULIN SYRINGE 0.3 ML 30G 1/2"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
ULTICARE INSULIN SYRINGE 0.3 ML 31G 1/4"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
ULTICARE INSULIN SYRINGE 0.3 ML 31G 1/4" (1/2)	SYRGE-NDL,INS 0.3 ML HALF MARK	2	
ULTICARE INSULIN SYRINGE 0.5 ML 30G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
ULTICARE INSULIN SYRINGE 0.5 ML 31G 1/4"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
ULTICARE INSULIN SYRINGE 1 ML 28G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
ULTICARE INSULIN SYRINGE 1 ML 29G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
ULTICARE INSULIN SYRINGE 1 ML 30G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
ULTICARE INSULIN SYRINGE 1 ML 31G 1/4"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
ULTICARE INSULIN SYRINGE 1 ML 31G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
ULTICARE LDS SYRINGE 3 ML 22G 1.5"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
ULTICARE PEN NEEDLE 29G 12.7MM	PEN NEEDLE, DIABETIC	2	

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ULTICARE PEN NEEDLE 29G 12MM	PEN NEEDLE, DIABETIC	2	
ULTICARE PEN NEEDLE 31G 3/16"	PEN NEEDLE, DIABETIC	2	
ULTICARE PEN NEEDLE 31G 6MM	PEN NEEDLE, DIABETIC	2	
ULTICARE PEN NEEDLE 31G 8MM	PEN NEEDLE, DIABETIC	2	
ULTICARE PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
ULTICARE PEN NEEDLE 32G 6MM	PEN NEEDLE, DIABETIC	2	
ULTICARE SAFETY PEN NEEDLE 30G 5MM	PEN NEEDLE, DIABETIC, SAFETY	2	
ULTICARE SAFETY PEN NEEDLE 30G 8MM	PEN NEEDLE, DIABETIC, SAFETY	2	
ULTICARE SAFETY SYRINGE 0.5 ML 29G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
ULTICARE SYRINGE 0.3 ML 29G 1/2"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
ULTICARE SYRINGE 0.3 ML 30G 1/2"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
ULTICARE SYRINGE 0.3 ML 30G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
ULTICARE SYRINGE 0.3 ML 31G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
ULTICARE SYRINGE 0.5 ML 28G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
ULTICARE SYRINGE 0.5 ML 29G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
ULTICARE SYRINGE 0.5 ML 30G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
ULTICARE SYRINGE 0.5 ML 30G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
ULTICARE SYRINGE 0.5 ML 31G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
ULTICARE SYRINGE 1 ML 30G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
ULTICARE SYRINGE 1 ML 30G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
ULTICARE SYRINGE 1 ML 31G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
ULTIGUARD SAFEPACK 29G 12.7MM	PEN NEEDLE, DIABETIC,DISP UNIT	2	
ULTIGUARD SAFEPACK NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC,DISP UNIT	2	
ULTIGUARD SAFEPACK NEEDLE 31G 6MM	PEN NEEDLE, DIABETIC,DISP UNIT	2	
ULTIGUARD SAFEPACK NEEDLE 31G 8MM	PEN NEEDLE, DIABETIC,DISP UNIT	2	
ULTIGUARD SAFEPACK NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC,DISP UNIT	2	
ULTIGUARD SAFEPACK NEEDLE 32G 6MM	PEN NEEDLE, DIABETIC,DISP UNIT	2	
ULTIGUARD SAFEPACK SYRINGE 0.3 ML 30G 12.7MM	SYR-ND,INS,0.3/CONTAINER,EMPTY	2	
ULTIGUARD SAFEPACK SYRINGE 0.3 ML 31G 8MM	SYR-ND,INS,0.3/CONTAINER,EMPTY	2	
ULTIGUARD SAFEPACK SYRINGE 0.5 ML 30G 12.7MM	SYR-ND,INS,0.5/CONTAINER,EMPTY	2	
ULTIGUARD SAFEPACK SYRINGE 0.5 ML 31G 8MM	SYR-ND,INS,0.5/CONTAINER,EMPTY	2	
ULTIGUARD SAFEPACK SYRINGE 1 ML 30G 12.7MM	SYR,NDL,INSULIN,1ML-SHARPS BIN	2	
ULTIGUARD SAFEPACK SYRINGE 1 ML 31G 8MM	SYR,NDL,INSULIN,1ML-SHARPS BIN	2	
ULTILET INSULIN SYRINGE 0.3 ML	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
ULTILET INSULIN SYRINGE 0.5 ML	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
ULTILET INSULIN SYRINGE 1 ML	SYRINGE AND NEEDLE,INSULIN,1ML	2	
ULTILET PEN NEEDLE	PEN NEEDLE, DIABETIC	2	
ULTILET PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
ULTRA COMFORT SYRINGE 0.3 ML	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
ULTRA COMFORT SYRINGE 0.3 ML 29G 1/2"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
ULTRA COMFORT SYRINGE 0.3 ML 29G 1/2" (1/2)	SYRGE-NDL,INS 0.3 ML HALF MARK	2	

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Medication Name	Generic Name	Tier	Notes
ULTRA COMFORT SYRINGE 0.3 ML 31G 5/16" (1/2)	SYRGE-NDL,INS 0.3 ML HALF MARK	2	
ULTRA COMFORT SYRINGE 0.5 ML	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
ULTRA COMFORT SYRINGE 0.5 ML 28G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
ULTRA COMFORT SYRINGE 0.5 ML 29G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
ULTRA COMFORT SYRINGE 0.5 ML 31G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
ULTRA COMFORT SYRINGE 1 ML	SYRINGE AND NEEDLE,INSULIN,1ML	2	
ULTRA COMFORT SYRINGE 1 ML 28G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
ULTRA COMFORT SYRINGE 1 ML 29G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
ULTRA COMFORT SYRINGE 1 ML 30G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
ULTRA COMFORT SYRINGE 1 ML 31G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
ULTRA FLO PEN NEEDLE 29G 12MM	PEN NEEDLE, DIABETIC	2	
ULTRA FLO PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC	2	
ULTRA FLO PEN NEEDLE 31G 8MM	PEN NEEDLE, DIABETIC	2	
ULTRA FLO PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
ULTRA FLO PEN NEEDLE 33G 4MM	PEN NEEDLE, DIABETIC	2	
ULTRA FLO SYRINGE 0.3 ML 29G 1/2"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
ULTRA FLO SYRINGE 0.3 ML 30G 1/2" (1/2)	SYRGE-NDL,INS 0.3 ML HALF MARK	2	
ULTRA FLO SYRINGE 0.3 ML 30G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
ULTRA FLO SYRINGE 0.3 ML 30G 5/16" (1/2)	SYRGE-NDL,INS 0.3 ML HALF MARK	2	
ULTRA FLO SYRINGE 0.3 ML 31G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
ULTRA FLO SYRINGE 0.3 ML 31G 5/16" (1/2)	SYRGE-NDL,INS 0.3 ML HALF MARK	2	
ULTRA FLO SYRINGE 0.5 ML 29G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
ULTRA THIN PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
ULTRACARE INSULIN SYRINGE 0.3 ML 30G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
ULTRACARE INSULIN SYRINGE 0.3 ML 31G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
ULTRACARE INSULIN SYRINGE 0.5 ML 30G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
ULTRACARE INSULIN SYRINGE 0.5 ML 30G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
ULTRACARE INSULIN SYRINGE 0.5 ML 31G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
ULTRACARE INSULIN SYRINGE 1 ML 30G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
ULTRACARE INSULIN SYRINGE 1 ML 30G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
ULTRACARE INSULIN SYRINGE 1 ML 31G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
ULTRACARE PEN NEEDLE 31G 1/4"	PEN NEEDLE, DIABETIC	2	
ULTRACARE PEN NEEDLE 31G 3/16"	PEN NEEDLE, DIABETIC	2	
ULTRACARE PEN NEEDLE 31G 5/16"	PEN NEEDLE, DIABETIC	2	
ULTRACARE PEN NEEDLE 32G 1/4"	PEN NEEDLE, DIABETIC	2	
ULTRACARE PEN NEEDLE 32G 3/16"	PEN NEEDLE, DIABETIC	2	
ULTRACARE PEN NEEDLE 32G 5/32"	PEN NEEDLE, DIABETIC	2	
ULTRACARE PEN NEEDLE 33G 5/32"	PEN NEEDLE, DIABETIC	2	
ULTRA-FINE 0.3 ML 30G 12.7MM	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
ULTRA-FINE 0.3 ML 31G 8MM (1/2)	SYRGE-NDL,INS 0.3 ML HALF MARK	2	
ULTRA-FINE INSULIN SYRINGE 1 ML 31G 6MM	SYRINGE AND NEEDLE,INSULIN,1ML	2	

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ULTRA-FINE INSULIN SYRINGE 1 ML 31G 8MM	SYRINGE AND NEEDLE,INSULIN,1ML	2	
ULTRA-FINE PEN NEEDLE 29G 12.7MM	PEN NEEDLE, DIABETIC	2	
ULTRA-FINE PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC	2	
ULTRA-FINE PEN NEEDLE 31G 8MM	PEN NEEDLE, DIABETIC	2	
ULTRA-FINE PEN NEEDLE 32G 6MM	PEN NEEDLE, DIABETIC	2	
ULTRA-FINE SYRINGE 0.3 ML 31G 6MM	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
ULTRA-FINE SYRINGE 0.3 ML 31G 6MM (1/2)	SYRGE-NDL,INS 0.3 ML HALF MARK	2	
ULTRA-FINE SYRINGE 0.3 ML 31G 8MM	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
ULTRA-FINE SYRINGE 0.5 ML 30G 12.7MM	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
ULTRA-FINE SYRINGE 0.5 ML 31G 6MM	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
ULTRA-FINE SYRINGE 0.5 ML 31G 8MM	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
ULTRA-FINE SYRINGE 1 ML 30G 12.7MM	SYRINGE AND NEEDLE,INSULIN,1ML	2	
ULTRA-THIN II INSULIN SYRINGE 0.3 ML 30G	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
ULTRA-THIN II INSULIN SYRINGE 0.3 ML 31G	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
ULTRA-THIN II INSULIN SYRINGE 0.5 ML 29G	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
ULTRA-THIN II INSULIN SYRINGE 0.5 ML 30G	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
ULTRA-THIN II INSULIN SYRINGE 0.5 ML 31G	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
ULTRA-THIN II INSULIN SYRINGE 1 ML 29G	SYRINGE AND NEEDLE,INSULIN,1ML	2	
ULTRA-THIN II INSULIN SYRINGE 1 ML 30G	SYRINGE AND NEEDLE,INSULIN,1ML	2	
ULTRA-THIN II PEN NEEDLE 29G 1/2"	PEN NEEDLE, DIABETIC	2	
ULTRA-THIN II PEN NEEDLE 31G 5/16"	PEN NEEDLE, DIABETIC	2	
ULTRA-THIN II SYRINGE 1 ML 31G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
ULTRATRAK CONTROL SOLUTION	BLOOD GLUCOSE CONTROL HIGH,LOW	2	
ULTRATRAK NORMAL CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
ULTRATRAK ULTIMATE CONTROL SOLUTION	BLOOD GLUCOSE CONTROL HIGH,LOW	2	
UNIFINE PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
UNIFINE PENTIP 29G 12MM	PEN NEEDLE, DIABETIC	2	
UNIFINE PENTIP 31G 3/16"	PEN NEEDLE, DIABETIC	2	
UNIFINE PENTIP 31G 5MM	PEN NEEDLE, DIABETIC	2	
UNIFINE PENTIP 31G 6MM	PEN NEEDLE, DIABETIC	2	
UNIFINE PENTIP 31G 8MM	PEN NEEDLE, DIABETIC	2	
UNIFINE PENTIP 32G 1/4"	PEN NEEDLE, DIABETIC	2	
UNIFINE PENTIP 32G 4MM	PEN NEEDLE, DIABETIC	2	
UNIFINE PENTIP 32G 5/32"	PEN NEEDLE, DIABETIC	2	
UNIFINE PENTIP 32G 6MM	PEN NEEDLE, DIABETIC	2	
UNIFINE PENTIP 33G 5/32"	PEN NEEDLE, DIABETIC	2	
UNIFINE PENTIP MAX 30G 3/16"	PEN NEEDLE, DIABETIC	2	
UNIFINE PENTIP NEEDLE 29G	PEN NEEDLE, DIABETIC	2	
UNIFINE PENTIP NEEDLE 6MM	PEN NEEDLE, DIABETIC	2	
UNIFINE PENTIP NEEDLE 8MM	PEN NEEDLE, DIABETIC	2	
UNIFINE PENTIP PLUS 29G 1/2"	PEN NEEDLE, DIABETIC	2	

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Medication Name	Generic Name	Tier	Notes
UNIFINE PENTIP PLUS 30G 3/16"	PEN NEEDLE, DIABETIC	2	
UNIFINE PENTIP PLUS 31G 1/4"	PEN NEEDLE, DIABETIC	2	
UNIFINE PENTIP PLUS 31G 3/16"	PEN NEEDLE, DIABETIC	2	
UNIFINE PENTIP PLUS 31G 5/16"	PEN NEEDLE, DIABETIC	2	
UNIFINE PENTIP PLUS 32G 5/32"	PEN NEEDLE, DIABETIC	2	
UNIFINE PENTIP PLUS 33G 5/32"	PEN NEEDLE, DIABETIC	2	
UNIFINE PENTIPS PLUS 31G 5MM	PEN NEEDLE, DIABETIC	2	
UNIFINE PROTECT NEEDLE 30G 5MM	PEN NEEDLE,DUAL SAFETY,DIABETC	2	
UNIFINE PROTECT NEEDLE 30G 8MM	PEN NEEDLE,DUAL SAFETY,DIABETC	2	
UNIFINE PROTECT NEEDLE 32G 4MM	PEN NEEDLE,DUAL SAFETY,DIABETC	2	
UNIFINE SAFECONTROL NEEDLE 30G 5MM	PEN NEEDLE,DUAL SAFETY,DIABETC	2	
UNIFINE SAFECONTROL NEEDLE 30G 8MM	PEN NEEDLE,DUAL SAFETY,DIABETC	2	
UNIFINE SAFECONTROL NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC	2	
UNIFINE SAFECONTROL NEEDLE 31G 6MM	PEN NEEDLE, DIABETIC	2	
UNIFINE SAFECONTROL NEEDLE 31G 8MM	PEN NEEDLE, DIABETIC	2	
UNIFINE SAFECONTROL NEEDLE 32G 4MM	PEN NEEDLE,DUAL SAFETY,DIABETC	2	
UNIFINE ULTRA PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC	2	
UNIFINE ULTRA PEN NEEDLE 31G 6MM	PEN NEEDLE, DIABETIC	2	
UNIFINE ULTRA PEN NEEDLE 31G 8MM	PEN NEEDLE, DIABETIC	2	
UNIFINE ULTRA PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
UNISTRIP HIGH CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, HIGH	2	
UNISTRIP LOW CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, LOW	2	
UNITHROID 25 MCG TABLET	LEVOTHYROXINE SODIUM	1	
UNITHROID 50 MCG TABLET	LEVOTHYROXINE SODIUM	1	
UNITHROID 75 MCG TABLET	LEVOTHYROXINE SODIUM	1	
UNITHROID 88 MCG TABLET	LEVOTHYROXINE SODIUM	1	
UNITHROID 100 MCG TABLET	LEVOTHYROXINE SODIUM	1	
UNITHROID 112 MCG TABLET	LEVOTHYROXINE SODIUM	1	
UNITHROID 125 MCG TABLET	LEVOTHYROXINE SODIUM	1	
UNITHROID 137 MCG TABLET	LEVOTHYROXINE SODIUM	1	
UNITHROID 150 MCG TABLET	LEVOTHYROXINE SODIUM	1	
UNITHROID 175 MCG TABLET	LEVOTHYROXINE SODIUM	1	
UNITHROID 200 MCG TABLET	LEVOTHYROXINE SODIUM	1	
UNITHROID 300 MCG TABLET	LEVOTHYROXINE SODIUM	1	
UPTRAVI 200 MCG TABLET	SELEXIPAG	4	PA, LDD, SRX
UPTRAVI 400 MCG TABLET	SELEXIPAG	4	PA, LDD, SRX
UPTRAVI 600 MCG TABLET	SELEXIPAG	4	PA, LDD, SRX
UPTRAVI 800 MCG TABLET	SELEXIPAG	4	PA, LDD, SRX
UPTRAVI 1,000 MCG TABLET	SELEXIPAG	4	PA, LDD, SRX
UPTRAVI 1,200 MCG TABLET	SELEXIPAG	4	PA, LDD, SRX
UPTRAVI 1,400 MCG TABLET	SELEXIPAG	4	PA, LDD, SRX

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Medication Name	Generic Name	Tier	Notes
UPTRAVI 1,600 MCG TABLET	SELEXIPAG	4	PA, LDD, SRX
UPTRAVI 200-800 TITRATION PACK	SELEXIPAG	4	PA, LDD, SRX
URISTIX 4 REAGENT TEST STRIP	URINE MULTIPLE TEST STRIPS	2	
URISTIX REAGENT TEST STRIP	URINE MULTIPLE TEST STRIPS	2	
UROQID-ACID NO.2 500-500 TABLET	METHENAMINE/SOD PHOSPHATE MBAS	3	
URSODIOL 300 MG CAPSULE	URSODIOL	1	
URSODIOL 250 MG TABLET	URSODIOL	1	
URSODIOL 500 MG TABLET	URSODIOL	1	
USTEKINUMAB-TTWE 45 MG/0.5 ML SYRINGE	USTEKINUMAB-TTWE	4	PA, QL, SRX
USTEKINUMAB-TTWE 90 MG/ML SYRINGE	USTEKINUMAB-TTWE	4	PA, QL, SRX
VALACYCLOVIR 500 MG TABLET	VALACYCLOVIR HCL	1	
VALACYCLOVIR 1 GRAM TABLET	VALACYCLOVIR HCL	1	
VALGANCICLOVIR 50 MG/ML ORAL SOLUTION	VALGANCICLOVIR HCL	3	
VALGANCICLOVIR 450 MG TABLET	VALGANCICLOVIR HCL	3	
VALPROIC ACID 250 MG CAPSULE	VALPROIC ACID	1	
VALPROIC ACID 250 MG/5 ML ORAL SOLUTION	VALPROIC ACID (AS SODIUM SALT)	1	
VALPROIC ACID 500 MG/10 ML ORAL SOLUTION	VALPROIC ACID (AS SODIUM SALT)	1	
VALSARTAN 40 MG TABLET	VALSARTAN	1	
VALSARTAN 80 MG TABLET	VALSARTAN	1	
VALSARTAN 160 MG TABLET	VALSARTAN	1	
VALSARTAN 320 MG TABLET	VALSARTAN	1	
VALSARTAN-HCTZ 80-12.5 MG TABLET	VALSARTAN/HYDROCHLOROTHIAZIDE	1	
VALSARTAN-HCTZ 160-12.5 MG TABLET	VALSARTAN/HYDROCHLOROTHIAZIDE	1	
VALSARTAN-HCTZ 160-25 MG TABLET	VALSARTAN/HYDROCHLOROTHIAZIDE	1	
VALSARTAN-HCTZ 320-12.5 MG TABLET	VALSARTAN/HYDROCHLOROTHIAZIDE	1	
VALSARTAN-HCTZ 320-25 MG TABLET	VALSARTAN/HYDROCHLOROTHIAZIDE	1	
VALTYA 1 MG-50 MCG TABLET	ETHYNODIOL D-ETHINYL ESTRADIOL	1	
VANADOM 350 MG TABLET	CARISOPRODOL	1	
VANCOMYCIN 125 MG CAPSULE	VANCOMYCIN HCL	3	QL
VANCOMYCIN 250 MG CAPSULE	VANCOMYCIN HCL	3	QL
VANCOMYCIN 25 MG/ML ORAL SOLUTION	VANCOMYCIN HCL	1	QL
VANDAZOLE VAGINAL 0.75% GEL	METRONIDAZOLE	1	
VANISHPOINT INSULIN SYRINGE 1 ML 30G 3/16"	SYRINGE,NEEDLE,INSULN,SAFE,1ML	2	
VANISHPOINT SYRINGE 0.5 ML 30G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
VANISHPOINT SYRINGE 3 ML 20G 1"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
VANISHPOINT SYRINGE 3 ML 21G 1"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
VANISHPOINT SYRINGE 3 ML 21G 1.5"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
VANISHPOINT SYRINGE 3 ML 22G 1"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
VANISHPOINT SYRINGE 3 ML 22G 1.5"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
VANISHPOINT SYRINGE 3 ML 23G 1"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
VANISHPOINT SYRINGE 3 ML 23G 1.5"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	

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VANISHPOINT SYRINGE 3 ML 25G 1"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
VANISHPOINT SYRINGE 3 ML 25G 5/8"	SYRINGE W-NEEDLE,DISPOSAB,3 ML	2	
VANISHPOINT SYRINGE U-100 29G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
VAQTA 25 UNITS/0.5 ML SYRINGE	HEPATITIS A VIRUS VACCINE/PF	2	
VAQTA 50 UNITS/ML SYRINGE	HEPATITIS A VIRUS VACCINE/PF	2	
VAQTA 25 UNITS/0.5 ML VIAL	HEPATITIS A VIRUS VACCINE/PF	2	
VAQTA 50 UNITS/ML VIAL	HEPATITIS A VIRUS VACCINE/PF	2	
VARENICLINE 0.5 MG TABLET	VARENICLINE TARTRATE	1	
VARENICLINE 1 MG TABLET	VARENICLINE TARTRATE	1	
VARENICLINE 1 MG CONTINUING MONTH BOX	VARENICLINE TARTRATE	1	
VARENICLINE STARTING MONTH BOX	VARENICLINE TARTRATE	1	
VARISOFT INFUSION SET 23" 13MM	INFUSION SET FOR INSULIN PUMP	2	
VARISOFT INFUSION SET 23" 17MM	INFUSION SET FOR INSULIN PUMP	2	
VARISOFT INFUSION SET 32" 13MM	INFUSION SET FOR INSULIN PUMP	2	
VARISOFT INFUSION SET 43" 17MM	INFUSION SET FOR INSULIN PUMP	2	
VARIVAX VACCINE VIAL	VARICELLA VACCINE LIVE/PF	2	
VARIVAX VACCINE WITH DILUENT	VARICELLA VACCINE LIVE/PF	2	
VAXELIS VACCINE SYRINGE	DIP,PERT(A)TET/HEPB/POL/HIB/PF	2	
VAXELIS VACCINE VIAL	DIP,PERT(A)TET/HEPB/POL/HIB/PF	2	
VAXNEUVANCE 0.5 ML SYRINGE	PNEUMOC 15-VAL CONJ-DIP CRM/PF	2	
VELIVET 28 DAY TABLET	DESOGESTREL-ETHINYL ESTRADIOL	1	
VEMLIDY 25 MG TABLET	TENOFOVIR ALAFENAMIDE	4	PA, SRX
VENCLEXTA STARTING PACK	VENETOCLAX	4	PA, QL, LDD, SRX
VENCLEXTA 10 MG TABLET	VENETOCLAX	4	PA, QL, LDD, SRX
VENCLEXTA 10 MG TABLET (10 MG X 2)	VENETOCLAX	4	PA, QL, LDD, SRX
VENCLEXTA 50 MG TABLET	VENETOCLAX	4	PA, QL, LDD, SRX
VENCLEXTA 100 MG TABLET	VENETOCLAX	4	PA, QL, LDD, SRX
VENLAFAXINE 25 MG TABLET	VENLAFAXINE HCL	1	QL
VENLAFAXINE 37.5 MG TABLET	VENLAFAXINE HCL	1	QL
VENLAFAXINE 50 MG TABLET	VENLAFAXINE HCL	1	QL
VENLAFAXINE 75 MG TABLET	VENLAFAXINE HCL	1	QL
VENLAFAXINE 100 MG TABLET	VENLAFAXINE HCL	1	QL
VENLAFAXINE ER 150 MG CAPSULE	VENLAFAXINE HCL	1	QL
VENLAFAXINE ER 37.5 MG CAPSULE	VENLAFAXINE HCL	1	QL
VENLAFAXINE ER 75 MG CAPSULE	VENLAFAXINE HCL	1	QL
VENTAVIS 10 MCG/1 ML INHALATION SOLUTION	ILOPROST TROMETHAMINE	4	PA, LDD, SRX
VENTAVIS 20 MCG/1 ML INHALATION SOLUTION	ILOPROST TROMETHAMINE	4	PA, LDD, SRX
VEOZAH 45 MG TABLET	FEZOLINETANT	4	PA, QL
VERAPAMIL 40 MG TABLET	VERAPAMIL HCL	1	
VERAPAMIL 80 MG TABLET	VERAPAMIL HCL	1	
VERAPAMIL 120 MG TABLET	VERAPAMIL HCL	1	

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Medication Name	Generic Name	Tier	Notes
VERAPAMIL ER 120 MG CAPSULE	VERAPAMIL HCL	1	
VERAPAMIL ER 180 MG CAPSULE	VERAPAMIL HCL	1	
VERAPAMIL ER 240 MG CAPSULE	VERAPAMIL HCL	1	
VERAPAMIL ER 120 MG TABLET	VERAPAMIL HCL	1	
VERAPAMIL ER 180 MG TABLET	VERAPAMIL HCL	1	
VERAPAMIL ER 240 MG TABLET	VERAPAMIL HCL	1	
VERAPAMIL ER PM 100 MG CAPSULE	VERAPAMIL HCL	2	
VERAPAMIL ER PM 200 MG CAPSULE	VERAPAMIL HCL	2	
VERAPAMIL ER PM 300 MG CAPSULE	VERAPAMIL HCL	2	
VERAPAMIL SR 120 MG CAPSULE	VERAPAMIL HCL	1	
VERAPAMIL SR 180 MG CAPSULE	VERAPAMIL HCL	1	
VERAPAMIL SR 240 MG CAPSULE	VERAPAMIL HCL	1	
VERAPAMIL SR 360 MG CAPSULE	VERAPAMIL HCL	1	
VEREGEN 15% OINTMENT	SINECATECHINS	3	
VERIFINE INSULIN SYRINGE 0.3 ML 31G 8MM	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
VERIFINE INSULIN SYRINGE 0.5 ML 29G 12MM	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
VERIFINE INSULIN SYRINGE 0.5 ML 31G 8MM	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
VERIFINE INSULIN SYRINGE 1 ML 29G 1/2"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
VERIFINE INSULIN SYRINGE 1 ML 29G 12MM	SYRINGE AND NEEDLE,INSULIN,1ML	2	
VERIFINE INSULIN SYRINGE 1 ML 31G 8MM	SYRINGE AND NEEDLE,INSULIN,1ML	2	
VERIFINE PEN NEEDLE 29G 12MM	PEN NEEDLE, DIABETIC	2	
VERIFINE PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC	2	
VERIFINE PEN NEEDLE 31G 8MM	PEN NEEDLE, DIABETIC	2	
VERIFINE PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
VERIFINE PEN NEEDLE 32G 6MM	PEN NEEDLE, DIABETIC	2	
VERIFINE PLUS PEN NEEDLE 31G 5MM	PEN NEEDLE, DIABETIC	2	
VERIFINE PLUS PEN NEEDLE 31G 8MM	PEN NEEDLE, DIABETIC	2	
VERIFINE PLUS PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC,DISP UNIT	2	
VERIFINE PLUS PEN NEEDLE 32G 4MM	PEN NEEDLE, DIABETIC	2	
VERIFINE SYRINGE 0.3 ML 31G 5/16"	SYRING-NEEDL,DISP,INSUL,0.3 ML	2	
VERIFINE SYRINGE 0.5 ML 29G 1/2"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
VERIFINE SYRINGE 0.5 ML 31G 5/16"	SYRINGE-NEEDLE,INSULIN,0.5 ML	2	
VERIFINE SYRINGE 1 ML 31G 5/16"	SYRINGE AND NEEDLE,INSULIN,1ML	2	
VESTURA 3 MG-0.02 MG TABLET	ETHINYL ESTRADIOL/DROSPIRENONE	1	
VIENVA-28 TABLET	LEVONORGESTREL/ETHIN.ESTRADIOL	1	
VIGABATRIN 500 MG POWDER PACKET	VIGABATRIN	4	PA, QL, LDD, SRX
VIGABATRIN 500 MG TABLET	VIGABATRIN	4	PA, QL, LDD, SRX
VIGADRONE 500 MG POWDER PACKET	VIGABATRIN	4	PA, QL, LDD, SRX
VIGADRONE 500 MG TABLET	VIGABATRIN	4	PA, QL, LDD, SRX
VIGPODER 500 MG POWDER PACKET	VIGABATRIN	4	PA, QL, LDD, SRX
VILAZODONE 10 MG TABLET	VILAZODONE HCL	3	QL

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VILAZODONE 20 MG TABLET	VILAZODONE HCL	3	QL
VILAZODONE 40 MG TABLET	VILAZODONE HCL	3	QL
VIOKACE 10,440-39,150 UNITS TABLET	LIPASE/PROTEASE/AMYLASE	3	
VIOKACE 20,880-78,300 UNITS TABLET	LIPASE/PROTEASE/AMYLASE	3	
VIORELE 28 DAY TABLET	DESOG-E.ESTRADIOL/E.ESTRADIOL	1	
VIREAD 150 MG TABLET	TENOFOVIR DISOPROXIL FUMARATE	2	SRX
VIREAD 200 MG TABLET	TENOFOVIR DISOPROXIL FUMARATE	2	SRX
VIREAD 250 MG TABLET	TENOFOVIR DISOPROXIL FUMARATE	2	SRX
VIREAD POWDER	TENOFOVIR DISOPROXIL FUMARATE	2	SRX
VIRT-C DHA SOFTGEL	MVN-MIN75/IRON/IRON PS/OM3/DHA	1	
VISTOGARD 10 GRAM PACKET	URIDINE TRIACETATE	4	LDD, SRX
VIT A,C,D-FLUORIDE 0.25 MG/ML ORAL DROPS	PED MVIT A,C,D3 NO.21/FLUORIDE	1	
VITAFOL-OB CAPLET	PRENATAL VIT 10/IRON FUM/FOLIC	1	
VITAMIN D2 1.25 MG (50,000 UNIT) CAPSULE	ERGOCALCIFEROL (VITAMIN D2)	1	
VIVAGUARD INO L1, L3 CONTROL SOLUTION	BLOOD GLUCOSE CONTROL HIGH,LOW	2	
VIVAGUARD INO L1,2,3 CONTROL SOLUTION	BLOOD GLUCOSE CTL HIGH,NML,LOW	2	
VIVAGUARD INO L2 CONTROL SOLUTION	BLOOD-GLUCOSE CONTROL, NORMAL	2	
VOLNEA 0.15-0.02-0.01 MG TABLET	DESOG-E.ESTRADIOL/E.ESTRADIOL	1	
VORICONAZOLE 40 MG/ML ORAL SUSPENSION	VORICONAZOLE	3	PA
VORICONAZOLE 50 MG TABLET	VORICONAZOLE	3	PA
VORICONAZOLE 200 MG TABLET	VORICONAZOLE	3	PA
VORTEX HOLDING CHAMBER	INHALER, ASSIST DEVICES	2	QL
VORTEX ADULT MASK	INHALER,ASSIST DEVICE,ACCESORY	2	QL
VORTEX VHC FROG CHILD MASK	INHALER,ASSIST DEVICE,MED MASK	2	QL
VORTEX VHC LADYBUG TODDLER MASK	INHALER,ASSIST DEV,SMALL MASK	2	QL
VORTEX VHC PEDIATRIC MED MASK	INHALER,ASSIST DEVICE,MED MASK	2	QL
VOSEVI 400-100-100 MG TABLET	SOFOSBUVIR/VELPATAS/VOXILAPREV	4	PA, QL, SRX
VRAYLAR 1.5 MG CAPSULE	CARIPRAZINE HCL	3	QL
VRAYLAR 3 MG CAPSULE	CARIPRAZINE HCL	3	QL
VRAYLAR 4.5 MG CAPSULE	CARIPRAZINE HCL	3	QL
VRAYLAR 6 MG CAPSULE	CARIPRAZINE HCL	3	QL
VYFEMLA 0.4 MG-0.035 MG TABLET	NORETHINDRONE-ETHIN. ESTRADIOL	1	
VYLIBRA 28 TABLET	NORGESTIMATE-ETHINYL ESTRADIOL	1	
VYNDAMAX 61 MG CAPSULE	TAFAMIDIS	4	PA, QL, LDD, SRX
WAKIX 4.45 MG TABLET	PITOLISANT HCL	4	PA, QL, LDD, SRX
WAKIX 17.8 MG TABLET	PITOLISANT HCL	4	PA, QL, LDD, SRX
WARFARIN 1 MG TABLET	WARFARIN SODIUM	1	
WARFARIN 2 MG TABLET	WARFARIN SODIUM	1	
WARFARIN 2.5 MG TABLET	WARFARIN SODIUM	1	
WARFARIN 3 MG TABLET	WARFARIN SODIUM	1	
WARFARIN 4 MG TABLET	WARFARIN SODIUM	1	

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WARFARIN 5 MG TABLET	WARFARIN SODIUM	1	
WARFARIN 6 MG TABLET	WARFARIN SODIUM	1	
WARFARIN 7.5 MG TABLET	WARFARIN SODIUM	1	
WARFARIN 10 MG TABLET	WARFARIN SODIUM	1	
WERA 0.5/0.035 MG 28 TABLET	NORETHINDRONE-ETHIN. ESTRADIOL	1	
WESCAP-PN DHA CAPSULE	MULTIVIT 47/IRON/FOLATE 1/DHA	1	
WESNATAL DHA COMPLETE	PNV CMB 52/IRON/FA/OMEGA-3/DHA	1	
WESNATE DHA SOFTGEL	PNV 11/IRON FUM/FOLIC ACID/OM3	1	
WESTAB PLUS TABLET	PNV,CALCIUM 72/IRON/FOLIC ACID	1	
WIXELA 100-50 INHUB	FLUTICASONE PROPION/SALMETEROL	1	QL
WIXELA 250-50 INHUB	FLUTICASONE PROPION/SALMETEROL	1	QL
WIXELA 500-50 INHUB	FLUTICASONE PROPION/SALMETEROL	1	QL
WM UNIFINE PENTIP PLUS 31G 5MM	PEN NEEDLE, DIABETIC	2	
WM UNIFINE PENTIP PLUS 31G 6MM	PEN NEEDLE, DIABETIC	2	
WM UNIFINE PENTIP PLUS 31G 8MM	PEN NEEDLE, DIABETIC	2	
WM UNIFINE PENTIP PLUS 32G 4MM	PEN NEEDLE, DIABETIC	2	
WYMZYA FE 0.4-0.035 MG CHEWABLE TABLET	NORETH-ETHINYL ESTRADIOL/IRON	1	
XALKORI 200 MG CAPSULE	CRIZOTINIB	4	PA, QL, LDD, SRX
XALKORI 250 MG CAPSULE	CRIZOTINIB	4	PA, QL, LDD, SRX
XALKORI 20 MG PELLET	CRIZOTINIB	4	PA, QL, LDD, SRX
XALKORI 50 MG PELLET	CRIZOTINIB	4	PA, QL, LDD, SRX
XALKORI 150 MG PELLET	CRIZOTINIB	4	PA, QL, LDD, SRX
XARAH FE 1 MG/20-30-35 MCG TABLET	NORETHINDRONE-E.ESTRADIOL-IRON	1	
XARELTO 10 MG TABLET	RIVAROXABAN	2	QL
XARELTO 15 MG TABLET	RIVAROXABAN	2	QL
XARELTO 20 MG TABLET	RIVAROXABAN	2	QL
XARELTO DVT-PE STARTER PACK	RIVAROXABAN	2	QL
XDEMVY 0.25% EYE DROPS	LOTILANER	4	PA, QL, LDD, SRX
XELJANZ 1 MG/ML ORAL SOLUTION	TOFACITINIB CITRATE	4	PA, QL, SRX
XELJANZ 5 MG TABLET	TOFACITINIB CITRATE	4	PA, QL, SRX
XELJANZ 10 MG TABLET	TOFACITINIB CITRATE	4	PA, QL, SRX
XELJANZ XR 11 MG TABLET	TOFACITINIB CITRATE	4	PA, QL, SRX
XELJANZ XR 22 MG TABLET	TOFACITINIB CITRATE	4	PA, QL, SRX
XIFAXAN 200 MG TABLET	RIFAXIMIN	3	PA, QL
XIFAXAN 550 MG TABLET	RIFAXIMIN	3	PA, QL
XIGDUO XR 2.5 MG-1,000 MG TABLET	DAPAGLIFLOZ PROPANED/METFORMIN	2	QL
XIGDUO XR 5 MG-500 MG TABLET	DAPAGLIFLOZ PROPANED/METFORMIN	2	QL
XIGDUO XR 5 MG-1,000 MG TABLET	DAPAGLIFLOZ PROPANED/METFORMIN	2	QL
XIGDUO XR 10 MG-500 MG TABLET	DAPAGLIFLOZ PROPANED/METFORMIN	2	QL
XIGDUO XR 10 MG-1,000 MG TABLET	DAPAGLIFLOZ PROPANED/METFORMIN	2	QL
XOLAIR 75 MG/0.5 ML AUTO-INJECTOR	OMALIZUMAB	4	PA, LDD, SRX

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XOLAIR 75 MG/0.5 ML SYRINGE	OMALIZUMAB	4	PA, LDD, SRX
XOLAIR 150 MG/ML AUTO-INJECTOR	OMALIZUMAB	4	PA, LDD, SRX
XOLAIR 150 MG/1.2 ML POWDER VIAL	OMALIZUMAB	4	PA, LDD, SRX
XOLAIR 150 MG/ML SYRINGE	OMALIZUMAB	4	PA, LDD, SRX
XOLAIR 300 MG/2 ML AUTO-INJECTOR	OMALIZUMAB	4	PA, LDD, SRX
XOLAIR 300 MG/2 ML SYRINGE	OMALIZUMAB	4	PA, LDD, SRX
XTAMPZA ER 9 MG CAPSULE	OXYCODONE MYRISTATE	2	PA
XTAMPZA ER 13.5 MG CAPSULE	OXYCODONE MYRISTATE	2	PA
XTAMPZA ER 18 MG CAPSULE	OXYCODONE MYRISTATE	2	PA
XTAMPZA ER 27 MG CAPSULE	OXYCODONE MYRISTATE	2	PA
XTAMPZA ER 36 MG CAPSULE	OXYCODONE MYRISTATE	2	PA
XTANDI 40 MG CAPSULE	ENZALUTAMIDE	4	PA, QL, LDD, SRX
XTANDI 40 MG TABLET	ENZALUTAMIDE	4	PA, QL, LDD, SRX
XTANDI 80 MG TABLET	ENZALUTAMIDE	4	PA, QL, LDD, SRX
XULANE 150-35 MCG/DAY PATCH	NORELGESTROMIN/ETHIN.ESTRADIOL	1	
YALE NEEDLE 21G 1.25"	NEEDLES, DISPOSABLE	2	
YARGESA 100 MG CAPSULE	MIGLUSTAT	4	PA, LDD, SRX
YESINTEK 45 MG/0.5 ML SYRINGE	USTEKINUMAB-KFCE	4	PA, QL, SRX
YESINTEK 45 MG/0.5 ML VIAL	USTEKINUMAB-KFCE	4	PA, QL, SRX
YESINTEK 90 MG/ML SYRINGE	USTEKINUMAB-KFCE	4	PA, QL, SRX
YOURX ULTICARE PEN NEEDLE 4MM 32G	PEN NEEDLE, DIABETIC	2	
YOURX ULTICARE PEN NEEDLE 6MM 31G	PEN NEEDLE, DIABETIC	2	
YOURX ULTICARE PEN NEEDLE 8MM 31G	PEN NEEDLE, DIABETIC	2	
YUVAFEM 10 MCG VAGINAL INSERT	ESTRADIOL	2	QL
ZAFEMY 150-35 MCG/DAY PATCH	NORELGESTROMIN/ETHIN.ESTRADIOL	1	
ZAFIRLUKAST 10 MG TABLET	ZAFIRLUKAST	1	
ZAFIRLUKAST 20 MG TABLET	ZAFIRLUKAST	1	
ZALEPLON 5 MG CAPSULE	ZALEPLON	1	
ZALEPLON 10 MG CAPSULE	ZALEPLON	1	
ZARAH TABLET	ETHINYL ESTRADIOL/DROSPIRENONE	1	
ZARXIO 300 MCG/0.5 ML SYRINGE	FILGRASTIM-SNDZ	4	SRX
ZARXIO 480 MCG/0.8 ML SYRINGE	FILGRASTIM-SNDZ	4	SRX
ZATEAN-PN DHA CAPSULE	MULTIVIT 47/IRON/FOLATE 1/DHA	1	
ZATEAN-PN PLUS SOFTGEL	MV-MINS 71/IRON/FOLIC NO.1/DHA	1	
ZELBORAF 240 MG TABLET	VEMURAFENIB	4	PA, QL, LDD, SRX
ZELNORM 6 MG TABLET	TEGASEROD HYDROGEN MALEATE	3	
ZENATANE 10 MG CAPSULE	ISOTRETINOIN	3	
ZENATANE 20 MG CAPSULE	ISOTRETINOIN	3	
ZENATANE 30 MG CAPSULE	ISOTRETINOIN	3	
ZENATANE 40 MG CAPSULE	ISOTRETINOIN	3	
ZENPEP DR 3,000 UNIT CAPSULE	LIPASE/PROTEASE/AMYLASE	2	

2026 Cigna Healthcare Plus Illinois 4-Tier Prescription Drug List

Medication Name	Generic Name	Tier	Notes
ZENPEP DR 40,000 UNIT CAPSULE	LIPASE/PROTEASE/AMYLASE	2	
ZENPEP DR 5,000 UNIT CAPSULE	LIPASE/PROTEASE/AMYLASE	2	
ZENPEP DR 10,000 UNIT CAPSULE	LIPASE/PROTEASE/AMYLASE	2	
ZENPEP DR 15,000 UNIT CAPSULE	LIPASE/PROTEASE/AMYLASE	2	
ZENPEP DR 20,000 UNIT CAPSULE	LIPASE/PROTEASE/AMYLASE	2	
ZENPEP DR 25,000 UNIT CAPSULE	LIPASE/PROTEASE/AMYLASE	2	
ZENPEP DR 60,000 UNIT CAPSULE	LIPASE/PROTEASE/AMYLASE	2	
ZENZEDI 5 MG TABLET	DEXTROAMPHETAMINE SULFATE	1	QL
ZENZEDI 10 MG TABLET	DEXTROAMPHETAMINE SULFATE	1	QL
ZEPATIER 50-100 MG TABLET	ELBASVIR/GRAZOPREVIR	4	PA, QL, SRX
ZEPOSIA 0.92 MG CAPSULE	OZANIMOD HYDROCHLORIDE	4	PA, QL, LDD, SRX
ZEPOSIA STARTER KIT (7-DAY)	OZANIMOD HYDROCHLORIDE	4	PA, QL, LDD, SRX
ZEPOSIA STARTER KIT (28-DAY)	OZANIMOD HYDROCHLORIDE	4	PA, QL, LDD, SRX
ZETONNA 37 MCG NASAL SPRAY	CICLESONIDE	3	
ZIDOVUDINE 100 MG CAPSULE	ZIDOVUDINE	1	SRX
ZIDOVUDINE 50 MG/5 ML SYRUP	ZIDOVUDINE	1	SRX
ZIDOVUDINE 300 MG TABLET	ZIDOVUDINE	1	SRX
ZILEUTON ER 600 MG TABLET	ZILEUTON	4	
ZIMHI 5 MG/0.5 ML SYRINGE	NALOXONE HCL	2	
ZIPRASIDONE 20 MG CAPSULE	ZIPRASIDONE HCL	1	
ZIPRASIDONE 40 MG CAPSULE	ZIPRASIDONE HCL	1	
ZIPRASIDONE 60 MG CAPSULE	ZIPRASIDONE HCL	1	
ZIPRASIDONE 80 MG CAPSULE	ZIPRASIDONE HCL	1	
ZIRGAN 0.15% EYE GEL	GANCICLOVIR	3	
ZOLADEX 3.6 MG IMPLANT SYRINGE	GOSERELIN ACETATE	4	PA, SRX
ZOLADEX 10.8 MG IMPLANT SYRINGE	GOSERELIN ACETATE	4	PA, SRX
ZOLINZA 100 MG CAPSULE	VORINOSTAT	4	PA, QL, LDD, SRX
ZOLMITRIPTAN 2.5 MG TABLET	ZOLMITRIPTAN	2	QL
ZOLMITRIPTAN 5 MG TABLET	ZOLMITRIPTAN	2	QL
ZOLMITRIPTAN 2.5 MG ODT TABLET	ZOLMITRIPTAN	2	QL
ZOLMITRIPTAN 5 MG ODT TABLET	ZOLMITRIPTAN	2	QL
ZOLPIDEM 5 MG TABLET	ZOLPIDEM TARTRATE	1	
ZOLPIDEM 10 MG TABLET	ZOLPIDEM TARTRATE	1	
ZOLPIDEM ER 6.25 MG TABLET	ZOLPIDEM TARTRATE	1	
ZOLPIDEM ER 12.5 MG TABLET	ZOLPIDEM TARTRATE	1	
ZONISAMIDE 100 MG CAPSULE	ZONISAMIDE	1	
ZONISAMIDE 25 MG CAPSULE	ZONISAMIDE	1	
ZONISAMIDE 50 MG CAPSULE	ZONISAMIDE	1	
ZOVIA 1-35 TABLET	ETHYNODIOL D-ETHINYL ESTRADIOL	1	
ZUBSOLV 0.7-0.18 MG SUBLINGUAL TABLET	BUPRENORPHINE HCL/NALOXONE HCL	2	
ZUBSOLV 1.4-0.36 MG SUBLINGUAL TABLET	BUPRENORPHINE HCL/NALOXONE HCL	2	

2026 Cigna Healthcare Plus Illinois 4-Tier Prescription Drug List

Medication Name	Generic Name	Tier	Notes
ZUBSOLV 2.9-0.71 MG SUBLINGUAL TABLET	BUPRENORPHINE HCL/NALOXONE HCL	2	
ZUBSOLV 5.7-1.4 MG SUBLINGUAL TABLET	BUPRENORPHINE HCL/NALOXONE HCL	2	
ZUBSOLV 8.6-2.1 MG SUBLINGUAL TABLET	BUPRENORPHINE HCL/NALOXONE HCL	2	
ZUBSOLV 11.4-2.9 MG SUBLINGUAL TABLET	BUPRENORPHINE HCL/NALOXONE HCL	2	
ZUMANDIMINE 3 MG-0.03 MG TABLET	ETHINYL ESTRADIOL/DROSPIRENONE	1	
ZURZUVAE 20 MG CAPSULE	ZURANOLONE	4	PA, QL, LDD, SRX
ZURZUVAE 25 MG CAPSULE	ZURANOLONE	4	PA, QL, LDD, SRX
ZURZUVAE 30 MG CAPSULE	ZURANOLONE	4	PA, QL, LDD, SRX
ZYDELIG 100 MG TABLET	IDELALISIB	4	PA, QL, LDD, SRX
ZYDELIG 150 MG TABLET	IDELALISIB	4	PA, QL, LDD, SRX
ZYKADIA 150 MG TABLET	CERITINIB	4	PA, QL, SRX
ZYLET EYE DROPS	TOBRAMYCIN/LOTEPRED ETAB	3	PA

Medications covered under the prescription drug benefits

Prescription Drugs Covered under the Medical Benefits

When prescription drugs on the Cigna Healthcare Prescription Drug List or on the Cigna Pathwell Specialty Medication Drug List are administered in a health care setting by a physician or other health care professional, and are billed with the office or facility charges, they will be covered under the medical benefits. These medications may still be subject to Prior Authorization requirements.

Limited Distribution Drugs

For certain limited distribution drugs covered under the medical benefits, the provider who administers the drug must obtain the drug directly from Accredo Specialty Pharmacy, your plan's preferred specialty pharmacy, or if not available through Accredo, then through a network specialty pharmacy, in order for that drug to be covered. If you have questions about where your provider obtained the drugs being administered to you, please consult your provider.

Specialty Medications that Require Administration by a Provider that Participates in the Cigna Pathwell Specialty Program

Certain specialty medications often used for the treatment of complex conditions that are high cost, require special handling and administration, provider coordination, or patient education may be subject to additional coverage criteria or require administration by a participating provider in the Cigna Pathwell Specialty program.

A complete list of these specialty medications subject to additional coverage criteria or that require administration by a participating provider in the Cigna Pathwell Specialty program is available at **cigna.com/pathwellspecialty**.

The following are not covered, unless a medical necessity coverage exception is obtained:

- Specialty medication regimens that have a therapeutic equivalent or therapeutic alternative to another covered prescription drug(s);
- Specialty medications newly approved by the U.S. Food and Drug Administration (FDA) up to the first 180 days following its market launch;
- Specialty medication regimens for which there is an appropriate lower cost alternative for treatment.

Cigna Healthcare may consider certain specialty medication regimens as preferred when they are clinically superior to alternative treatments and more cost effective. Preferred regimens may be required for coverage, except when the member is not a candidate for the regimen and a medical necessity coverage exception is obtained.

Certain specialty medications may be covered only under the prescription drug benefits when one or more of the following criteria is met:

- Cost of the medication is lower under pharmacy sources than medical sources in the Cigna Pathwell Specialty program;
- Provider accepts the medication from the pharmacy source;
- The member is able to self-administer the medication procured from a pharmacy.

Self-Administered Injectable Medication and infusion and Injectable Medication Benefits

Self-administered injectable medications, and syringes for the self-administration of those drugs, on the Cigna Healthcare Prescription Drug List, are covered under the prescription drug benefits.

Medications covered under the prescription drug benefits *(Cont.)*

To determine if a drug prescribed for you is covered, you can:

- Log on to your **mycigna®** account, and
- View the Cigna Healthcare Prescription Drug List at **cigna.com/ifp-drug-lists**, and
- Then choose the Cigna Healthcare Prescription Drug List for your state.

Note: the drugs may be subject to prescription drug Prior Authorization requirements.

Medications Covered under the Medical Benefits

Infusion and injectable medications on the Cigna Healthcare Prescription Drug List are covered under the medical benefits when they are administered in a healthcare setting by a physician or other health care professional, and are billed with the office or facility charges.

You or your physician can view the Cigna Healthcare Prescription Drug List by

- Accessing **cigna.com/ifp-drug-lists**, and
- Choose your state.

Note: the drugs may be subject to prescription drug Prior Authorization requirements.

Questions?

If you have questions about prescription drug coverage, call Customer Service at the toll-free number on the back of your ID card.

Frequently Asked Questions (FAQs)

Here are answers to questions you may have about your drug list and prescription medication coverage.

Q. Why do you make changes to the drug list?
A. We review and update the drug list on a regular basis to make sure you have coverage for low-cost, safe and effective medications. We make changes for many reasons; for example, when a new medication comes out or is no longer available, or when a medication's price changes. These changes may include:

- Moving a medication to a lower cost tier.
- Moving a brand medication to a higher cost tier when a generic becomes available.
- Moving a medication to a higher cost tier and/or no longer covering a medication.
- Adding extra coverage rules (requirements) to a medication.

When we make a change that affects your medication (for example, it'll cost more, won't be covered, and/or has an extra coverage requirement), we let you know before it happens. This way, you have time to talk with your doctor about your options. Only you and your doctor can decide what's best for your treatment.

Q. Why doesn't my plan cover certain medications?
A. To help lower your overall health care costs, your plan doesn't cover certain high-cost brand-name medications that have lower-cost alternatives that can treat the same condition. If your medication isn't covered and your doctor feels a different medication isn't right for you, your doctor's office can ask us to cover it through our review process.

There are also some medications and products that your plan won't cover for any reason because they're a "plan (or benefit) exclusion." This means the medication or product isn't on your drug list, and there's no option to ask us to cover it through our medication review process. For example, your plan doesn't cover (or "excludes") medications that the FDA hasn't approved.

Q. How do you decide which medications to cover?
A. The prescription drug list is managed by the Health Plan Value Assessment Committee (HVAC), which makes, subject to the Pharmacy and Therapeutics Committee's review and approval of the prescription drug list, coverage tier placement decisions of prescription drugs or related supplies and/or applies utilization management requirements to certain prescription drugs or related supplies.

Your Policy/Service Agreement coverage tiers may contain prescription drugs or related supplies that are generic drugs, brand drugs or specialty medications. Placement of any prescription drug or related supplies in a specific tier, and application of utilization management requirements to a prescription drug, depends on a number of clinical and economic factors. Clinical factors include, without limitation, the P&T Committee's evaluations of the place in therapy, or relative safety or relative efficacy of the prescription drug or related supplies, and economic factors include, without limitation, the cost and/or available rebates for prescription drugs or related supplies.

Whether a particular prescription drug or related supply is appropriate for you or any of your family member(s), regardless of its eligibility coverage under Your Policy/Service Agreement is a determination that is made by you (or your family member) and the prescribing physician.

Q. Why do certain medications need approval before my plan will cover them?
A. The review process helps make sure you're getting coverage for the right medication, at the right cost, in the right amount and for the right situation.

Q. How do I know if a medication needs approval?
A. Check your drug list or log in to the myCigna App or **myCigna.com** and use the Price a Medication tool. If the medication has:

- **PA** (Prior Authorization) next to it, it needs approval before your plan will cover it.

Frequently Asked Questions (FAQs) *(cont.)*

- **QL** (Quantity Limit) next to it, you may need approval depending on how much you're filling at one time.
- **AGE** (Age Requirement) next to it, you may need approval depending on your age.

Q. What types of medications typically need approval?
A. Medications that:

- May not be safe when you take them with other medications.
- Have lower-cost alternatives that work just as well at treating the same condition.
- Should only be used for certain health conditions.
- Are often used in the wrong way or are abused (taken more often than you should).

Q. What types of medications typically have quantity limits?
A. Medications that are often:

- Taken in a greater amount or used for a longer time than they should be.
- Used in the wrong way or are abused (taken more often than you should).

Q. Why does my medication have an age requirement?
A. Not all medications are right for all ages. Some medications work best for people of a certain age or within a certain age range. As you get older, body changes can decrease the body's ability to break down or get rid of certain medications. This means that the medication may stay in your body longer. So, an older adult may need a lower dose of the medication or a different medication that's safer.

Q. How do I get approval (prior authorization) for my medication?
A. Ask your doctor's office to contact us to start the coverage review process. They know how the review process works and will take care of everything for you. In case the office asks, they can download a request form from our provider portal at **cignaforhcp.com**.

We'll review the information your doctor sends us to make sure you meet the medication's coverage rules (requirements). We'll send you and your doctor a letter with our decision (approved/not approved) and next steps. It can take up to five (5) business days to hear from us. You can always check with your doctor's office to find out if we've made a decision. Or, you can log in to the myCigna App or **myCigna.com** to see where your medication is in the review process or to read about the decision we made.

Many times, we don't get all of the information we need from the doctor's office to approve coverage. If we don't approve your medication, your doctor can send us more information to review, using the same process as before. We're happy to review the request again. Depending on what your doctor sends this time, we may be able to approve coverage. Or you and your doctor can appeal the decision by sending us a request, in writing, that explains why we should cover the medication.

Q. What happens if I try to fill a prescription that needs approval but I don't it ahead of time?
A. When your pharmacist tries to fill your prescription, they'll see that the medication needs our approval before it can be covered. Because you didn't get approval ahead of time, your plan won't cover its cost.

You can still fill it (without using your plan/insurance), but you'll pay its full price at the pharmacy counter. And, if you do this, your costs can't be applied to your annual deductible or out-of-pocket maximum.

Q. What happens if I try to fill a prescription that has a quantity limit?
A. Your pharmacist will only fill the amount your plan covers. If you want to fill more than what's allowed, your doctor's office can ask us to cover it through our review process.

Q. Are all of the medications on this drug list approved by the FDA?
A. Yes.

Frequently Asked Questions (FAQs) *(cont.)*

Q. Does my plan cover medications that the FDA recently approved?
A. We review all recently approved medications and products to see if they should be covered, and if so, at what cost-share (tier). These include, but are not limited to, medications, medical supplies and/or devices covered under standard pharmacy benefits. It can take up to six months from the date the FDA approved them for us to make a decision.

If your doctor wants you to use a recently approved medication, your doctor's office can ask us to cover it through our review process.

Q. What are preventive medications?
A. Preventive medications can help keep you from getting certain long-term health conditions such as asthma, depression, diabetes, heart attack, high blood pressure, high cholesterol, osteoporosis, prenatal nutrient deficiency and stroke. They improve your chances of staying well and living longer.

Q. Which medications are covered under the health care reform law?
A. The Patient Protection and Affordable Care Act (PPACA), known as health care reform, helps make health care and preventive care more affordable. PPACA requires health plans to cover the full cost of certain preventive medications and over-the-counter (OTC) products. This means you don't have to pay anything – not even a copay, coinsurance or deductible for these products.

To see a list of $0 medications, go to **Cigna.com/PDL** and click on the link for the IFP PPACA No Cost-Share Preventive Drug List.

Q. How can I find out how much my medication will cost me?
A. When you and your doctor are thinking about the right medication for your treatment, knowing how much it costs, what lower-cost options are available, and which pharmacies have the best prices can help you avoid surprises. Log in to the myCigna App or **myCigna.com** and use the Price a Medication tool to see how much your medication costs before you get to the pharmacy counter – or even before you leave your doctor's office.[3]

Q. What's a cost-share?
A. It's the amount you pay out of your own pocket for a covered prescription and/or an eligible health care or related service. For some plans, the cost-share is a copay; for other plans, it's a coinsurance.

Q. How can I save money on my prescription medications?
A. You should think about using a medication that's covered on a lower tier, such as a generic or preferred brand medication, or by filling a 90-day supply (if your plan allows). Ask your doctor if one of these options may work for you.

Q. What's a generic medication?
A. A generic is the same as its brand-name version. It has the same active ingredient, strength and dosage form, treats the same condition(s), and works in the same way – and typically costs less.[2] Generics are typically sold under their chemical or scientific name, instead of the brand name.

Q. Do generics work the same as brand-name medications?
A. Yes. A generic medication works in the same way and provides the same clinical benefit as the brand-name medication.[2]

Q. What are the differences between generic and brand-name medications?
A. The generic and brand-name medication may:[2]

- Look different. For example, generics may have a different shape, size or color than their brand-name versions.
- Have a different flavor and/or different preservatives, come in different packaging and/or with different labeling and may expire at different times.

It's important to know that these differences don't affect how well the generic works.

Q. My pharmacy isn't in my plan's network. Can I continue to fill my prescriptions there?
A. Your plan doesn't offer out-of-network coverage. This means you'll have to use an in-network pharmacy for your medication to be covered.

Frequently Asked Questions (FAQs) *(cont.)*

Q. Can I fill my prescriptions by mail?
A. Yes.[4]

Fill maintenance medications through Express Scripts® Pharmacy.

Home delivery is a convenient option when you're taking a medication on a regular basis to treat an ongoing health condition. It's simple and safe, and saves you trips to the pharmacy. To learn more, go to **Cigna.com/homedelivery**.

- Easily order, manage, track and pay for your medications on your phone or online.
- Get standard shipping at no extra cost.[5]
- Fill up to a 90-day supply at one time. [6]
- Talk with a pharmacist, 24/7.
- Sign up for refill reminders so you don't miss a dose.[7]

Here are two easy ways to get started:

1. **Online.** Log in to the myCigna App or **myCigna.com** and click on the Prescriptions tab. Choose My Medications from the dropdown menu. Then click the button next to your medication name to move your prescription(s) from your retail pharmacy to home delivery. Or
2. **By phone.**
   - Call your doctor's office. Ask them to send a 90-day prescription (with refills) to Express Scripts home delivery. Or
   - Call Express Scripts Pharmacy at **800.835.3784**. They'll contact your doctor's office to get your prescription. Have your ID card, doctor's contact information and medication name(s) ready when you call.

Fill specialty medications through Accredo® Specialty Pharmacy

If you're using a specialty medication, Accredo's team can help you manage your rare and/or complex medical condition. They'll also fill and ship your medication to you, so you don't have to stand in line at the pharmacy.

- Talk with specially-trained pharmacists and nurses, 24/7.
- Get fast shipping at no extra cost.[5]
- Sign up for refills and reminders. Some refills can be done by text.[8]
- Get help paying for your medication (if you need it).
- Manage and track your medications online.

To learn more, go to **Cigna.com/specialty**. To get started with Accredo, call **877.826.7657**, Monday–Friday, 7:00 am–8:00 pm CST or Saturdays, 7:00 am–4:00 pm CST.

Q. Where can I find more information about my pharmacy benefits?
A. You can use the online tools and resources on the myCigna App or **myCigna.com** to help you better understand your pharmacy coverage. You can find out how much your medication costs, see which medications your plan covers, find an in-network pharmacy, see your pharmacy claims and coverage details and more. You can also manage your home delivery orders.

Exclusions and Limitations: What isn't covered by this policy

In addition to any other exclusions and limitations described in this EOC, there are no benefits provided for the following:

1. **Services obtained from a Non-Participating/ Out-of-Network Provider**, except for treatment of an Emergency Medical Condition.
2. Any **amounts in excess of maximum benefit limitations of Covered Expenses** stated in this EOC.
3. Services **not specifically listed as Covered Services** in this EOC.
4. Services or supplies that are **not Medically Necessary**.
5. Services or supplies that are considered to be for **Experimental Procedures or Investigational Procedures**.
6. Services **received before the Effective Date of coverage**.
7. Services **received after coverage under this EOC ends**.
8. Services **for which you have no legal obligation to pay** or for which no charge would be made if you did not have a health plan or insurance coverage.
9. Any condition for which benefits are recovered or can be recovered, either by adjudication, settlement or otherwise, **under any workers' compensation, employer's liability law or occupational disease law**, even if the Member does not claim those benefits.
10. Conditions caused by: (a) an **act of war (declared or undeclared)**; (b) the **inadvertent release of nuclear energy** when government funds are available for treatment of Illness or Injury arising from such release of nuclear energy; (c) a Member **participating in the military service of any country**; (d) a Member **participating in an insurrection, rebellion, or riot;** (e) services received as a direct result of a Member's commission of, or attempt to commit a **felony** (whether or not charged) **or as a direct result of the Member being engaged in an illegal occupation;** (f) a Member **being intoxicated,** as defined by applicable state law in the state where the Illness occurred **or under the influence of illegal narcotics or non-prescribed controlled substances** unless administered or prescribed by Physician.
11. Any **services provided by a local, state or federal government agency**, except when payment under this EOC is expressly required by federal or state law.
12. Any **services required by state or federal law to be supplied by a public school system** or school district.
13. Any **services for which payment is obtained from any local, state or federal government agency** (except Medicaid). Veterans Administration Hospitals and military treatment facilities will be considered for payment according to current legislation.
14. **If the Member is enrolled in Medicare** Part A, B, C or D, Cigna Healthcare will provide claim payment according to this EOC minus any amount paid by Medicare, not to exceed the amount Cigna Healthcare would have paid if it were the sole insurance carrier.
15. **Court-ordered treatment or hospitalization**, unless such treatment is prescribed by a Physician and listed as covered in this EOC.
16. Professional **services or supplies received or purchased directly or on your behalf by anyone, including a Physician, from** any of the following:
    - Yourself or your employer;
    - A person who lives in the Member's home, or that person's employer;
    - A person who is related to the Member by blood, marriage or adoption, or that person's employer; or
    - A facility or health care professional that provides remuneration to you or to an organization from which you receive remuneration.
17. Services of a Hospital emergency room **for any condition that is not an Emergency Medical Condition** as defined in this EOC.
18. **Custodial Care, including but not limited to rest cures; infant, child or adult day care, including geriatric day care**.
19. **Private duty nursing** except when provided as part of the home health care services or Hospice

Care Services benefit in this EOC.

20. Inpatient room and board **charges in connection with a Hospital stay primarily for environmental change or Physical Therapy.**
21. Services received during **an inpatient stay when the stay is primarily related to** behavioral, social maladjustment, lack of discipline or other antisocial actions which are not specifically the result of a Mental Health Disorder.
22. **Complementary and alternative medicine services, including but not limited to**: massage therapy; animal therapy, including but not limited to equine therapy or canine therapy; art therapy; meditation; visualization; acupuncture; acupressure; acupuncture point injection therapy; dry needling; reflexology; rolfing; light therapy; aromatherapy; music or sound therapy; dance therapy; sleep therapy; hypnosis; energy-balancing; breathing exercises; movement and/or exercise therapy including but not limited to yoga, pilates, tai-chi, walking, hiking, swimming, golf; and any other alternative treatment as defined by the National Center for Complementary and Alternative Medicine (NCCAM) of the National Institutes of Health. Services specifically listed as covered under "Rehabilitative Therapy" and "Habilitative Therapy" are not subject to this exclusion.
23. Any services or supplies **provided by or at a place for the aged, a nursing home, or any facility** a significant portion of the activities of which include rest, recreation, leisure, or any other services that are not Covered Services.
24. **Assistance in activities of daily living**, including but not limited to: bathing, eating, dressing, or other Custodial Care, self-care activities or homemaker services, and services primarily for rest, domiciliary or convalescent care.
25. **Services performed by unlicensed practitioners** or services which do not require licensure to perform, for example-meditation, breathing exercises, guided visualization.
26. **Dental services**, dentures, bridges, crowns, caps or other Dental Prostheses, extraction of teeth or treatment to the teeth or gums, except as specifically provided in this EOC.
27. **Orthodontic services**, braces and other orthodontic appliances including orthodontic services for Temporomandibular Joint Dysfunction.
28. **Dental implants**: dental materials implanted into or on bone or soft tissue or any associated procedure as part of the implantation or removal of dental implants.
29. **Any services covered under both this medical plan and an accompanying exchange-certified pediatric dental plan** and reimbursed under the dental plan will not be reimbursed under this plan.
30. **Routine hearing tests** except as provided under Preventive Care.
31. **Optometric services**, eye exercises including orthoptics, eyeglasses, contact lenses, routine eye exams, and routine eye refractions, except as specifically stated in this EOC under Pediatric Vision Care.
32. An **eye surgery solely for the purpose of correcting refractive defects** of the eye, such as near-sightedness (myopia), astigmatism and/or farsightedness (presbyopia).
33. **Cosmetic surgery, therapy** or other services for beautification, to improve or alter appearance or self-esteem or to treat psychological or psychosocial complaints regarding one's appearance. This exclusion does not apply to Reconstructive Surgery to restore a bodily function or to correct a deformity caused by Injury or congenital defect of a Newborn child, or for Medically Necessary Reconstructive Surgery performed to restore symmetry incident to a mastectomy or lumpectomy.
34. **Aids or devices that assist with nonverbal communication**, including but not limited to communication boards, prerecorded speech devices, laptop computers, desktop computers, personal digital assistants (PDAs), braille typewriters, visual alert systems for the deaf and memory books except as specifically stated in this EOC.
35. **Non-medical counseling or ancillary services**, including but not limited to: education, training, vocational rehabilitation, behavioral training, biofeedback, neurofeedback, employment

counseling, back school, return to work services, work hardening programs, driving safety, and services, training, educational therapy or other non-medical ancillary services for learning disabilities and developmental delays, **except** as otherwise stated in this EOC.

36. Services and procedures for **redundant skin surgery** including abdominoplasty/ panniculectomy, removal of skin tags, craniosacral/cranial therapy, applied kinesiology, prolotherapy and extracorporeal shock wave lithotripsy (ESWL) for musculoskeletal and orthopedic conditions, macromastia or gynecomastia including breast reduction (unless Medically Necessary), varicose veins, rhinoplasty and blepharoplasty.
37. Procedures, surgery or treatments to **change characteristics of the body** to those of the opposite sex unless such services are deemed Medically Necessary or otherwise meet applicable coverage requirements.
38. Any treatment, Prescription Drug, service or supply **to treat sexual dysfunction**, enhance sexual performance or increase sexual desire.
39. Fees associated with the **collection or donation of blood or blood products**, except for autologous donation in anticipation of scheduled services where in the utilization review Physician's opinion the likelihood of excess blood loss is such that transfusion is an expected adjunct to surgery.
40. Blood administration **for the purpose of general improvement in physical condition.**
41. **Orthopedic shoes** (except when joined to Braces), shoe inserts, foot Orthotic Devices.
42. **External and internal power enhancements** or power controls for Prosthetic limbs and terminal devices.
43. **Myoelectric Prostheses** peripheral nerve stimulators.
44. **Electronic Prosthetic limbs or appliances** unless Medically Necessary, when a less-costly alternative is not sufficient.
45. **Prefabricated foot Orthoses**.
46. **Cranial banding/cranial Orthoses/ other similar devices**, except when used postoperatively for synostotic plagiocephaly.
47. **Orthosis shoes**, shoe additions, procedures for foot orthopedic shoes, shoe modifications and transfers.
48. **Orthoses primarily used for cosmetic** rather than functional reasons.
49. **Non-foot Orthoses**, except **only** the following non-foot Orthoses are covered when Medically Necessary:
    - Rigid and semi-rigid custom fabricated Orthoses;
    - Semi-rigid pre-fabricated and flexible Orthoses; and
    - Rigid pre-fabricated Orthoses, including preparation, fitting and basic additions, such as bars and joints.
50. Services primarily for **weight reduction or treatment of obesity including morbid obesity**, or any care which involves weight reduction as a main method for treatment. This includes any program, product or medical treatment for weight reduction or any expenses of any kind to treat obesity, weight control or weight reduction, except as provided under Preventive Care.
51. **Routine physical exams or tests** that do not directly treat an actual Illness, Injury or condition. This includes reports, evaluations, or hospitalization not required for health reasons; physical exams required for or by an employer or for school, or sports physicals, or for insurance or government authority, and court ordered, forensic, or custodial evaluations, except as otherwise specifically stated in this EOC.
52. Therapy or treatment **intended primarily to improve or maintain general physical condition** or for the purpose of enhancing job, school, athletic or recreational performance, including but not limited to routine, long term, or maintenance care which is provided after the resolution of the acute medical problem and when significant therapeutic improvement is not expected.
53. **Educational services** except for Diabetic Self-Management Training Programs, treatment for Autism, or as specifically provided or arranged by Cigna Healthcare.
54. **Nutritional counseling or food supplements**, except as stated in this EOC.

Exclusions and Limitations: What isn't covered by this policy *(cont.)*

55. **Exercise equipment, comfort items and other medical supplies and equipment** not specifically listed as Covered Services in the "Comprehensive Benefits: What the EOC Pays For" section of this EOC. Excluded medical equipment includes, but is not limited to: air purifiers, air conditioners, humidifiers; treadmills; spas; elevators; supplies for comfort, hygiene or beautification; disposable sheaths and supplies; correction appliances or support appliances and supplies such as stockings, and consumable medical supplies other than ostomy supplies and urinary catheters, including, but not limited to, bandages and other disposable medical supplies, skin preparations and test strips except as otherwise stated in this EOC.
56. **Physical and/or Occupational Therapy/ Medicine** except when provided during an inpatient Hospital confinement or as specifically stated in the benefit schedule and under" Rehabilitative Therapy Services (Physical Therapy, Occupational Therapy and Speech Therapy)" in the section of this EOC titled "Comprehensive Benefits: What the EOC Pays For."
57. **Foreign Country Provider charges** except as specifically stated under "Foreign Country Providers" in the section of this EOC titled "Comprehensive Benefits: What the EOC Pays For."
58. **Routine foot care** including the cutting or removal of corns or calluses; the trimming of nails, routine hygienic care and any service rendered in the absence of localized Illness, a systemic condition, Injury or symptoms involving the feet. However, services associated with foot care for diabetes and peripheral vascular disease are covered when Medically Necessary.
59. **Charges for which We are unable to determine Our liability** because the Member failed, within 60 days, or as soon as reasonably possible to: (a) authorize Us to receive all the medical records and information We requested; or (b) provide Us with information We requested regarding the circumstances of the claim or other insurance coverage.
60. Charges for the **services of a standby Physician**.
61. Charges for **animal to human organ transplants**.
62. **Claims received by Cigna Healthcare after 15 months from the date service was rendered**, except in the event of a legal incapacity.
63. Services obtained from a **Dedicated Virtual Care Physician** that are not Dedicated Virtual Urgent Care or Dedicated Virtual Primary Care services.

Cigna Healthcare reserves the right to make changes to this drug list without notice. Please reference **Cigna.com/ifp-drug-list** for an up-to-date listing. Your plan may cover additional medications; please refer to your policy/service agreement for details. Cigna Healthcare does not take responsibility for any medication decisions made by the doctor or pharmacist.

Health benefit plans vary, but in general to be eligible for coverage a drug must be approved by the U.S. Food and Drug Administration (FDA), prescribed by a health care professional, purchased from a licensed pharmacy and medically necessary. Certain features described in this document may not be applicable to your specific health plan, and plan features may vary by location and plan type. Refer to your plan documents for costs and complete details of your plan's prescription drug coverage.

1. App/online store terms and mobile phone carrier/data charges apply. Customers under age 13 (and/or their parent/guardian) will not be able to register at myCigna.com.
2. U.S. Food and Drug Administration (FDA) website, "Generic Drug Facts." Content current as of 11/01/21. fda.gov/drugs/generic-drugs/generic-drug-facts.
3. Prices shown on myCigna are not guaranteed and coverage is subject to your plan terms and conditions. Visit myCigna for more information.
4. Cigna Healthcare, Express Scripts and Accredo are all part of The Cigna Group. This means we have an ownership interest in Express Scripts Pharmacy's home delivery services and Accredo's specialty pharmacy services. However, you have the right to fill prescriptions at any pharmacy in your plan's network (as your plan allows).
5. Standard shipping costs are included as part of your prescription plan.
6. Not all medications come in a 90-day supply. For example, oral contraceptives come in a 3-pack, which is an 84-day supply. It's important to know that even though it's not a full "90-day supply," we still think of it as a 90-day prescription. **Tier 4 medications are limited to a 30-day supply.**
7. You can sign up to get emails and/or texts from Express Scripts Pharmacy. To get text messages, you'll have to sign up for the Express Scripts texting service. You can do this online or over the phone. Once you sign up, simply reply to their welcome text to get started. Standard text messaging rates apply.
8. You can only refill certain specialty medications by text. To get text messages, you'll have to sign up for Accredo's texting service. You can do this when you call Accredo to refill your prescription. Once you sign up, just reply to their welcome text to get started. Standard text messaging rates apply.

Product availability may vary by location and plan type and is subject to change. All health insurance policies and health benefit plans contain exclusions and limitations. For costs and details of coverage, review your plan documents or contact a Cigna Healthcare representative.

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Discrimination is against the law

Cigna Healthcare® complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, sex, ancestry, religion, marital status, gender, sexual orientation, gender identity or sexual stereotypes.

Cigna Healthcare does not exclude people or treat them less favorably differently because of race, color, national origin, age, disability, sex, ancestry, religion, marital status, gender, sexual orientation, gender identity or sexual stereotypes.

Cigna Healthcare:

- Provides people with disabilities reasonable modifications and free appropriate auxiliary aids to communicate effectively with us, such as:
  - Qualified sign language interpreters
  - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language assistance services to people whose primary language is not English in a timely manner, such as:
  - Qualified interpreters
  - Information written in other languages

If you need reasonable modifications, appropriate auxiliary aids and services or language assistance services, contact the Civil Rights Coordinator.

If you believe that Cigna Healthcare has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, sex, ancestry, religion, marital status, gender, sexual orientation, gender identity or sexual stereotypes, you can file a grievance with the Civil Rights Coordinator
P.O. Box 188016, Chattanooga, TN 37422,
877.822.6561 (TTY: Dial 711)

ACAGrievance@CignaHealthcare.com

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Civil Rights Coordinator is available to help you.

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

U.S. Department of Health and Human Services
200 Independence Avenue,
SW Room 509F, HHH Building
Washington, DC 20201
1.800.368.1019, 800.537.7697 (TDD)

Complaint forms are available at
https://www.hhs.gov/civil-rights/filing-a-complaint/complaint-process/index.html

Proficiency of Language Assistance Services

English – ATTENTION: If you speak English, free language assistance services are available to you. Appropriate auxiliary aids and services to provide information in accessible formats are also available free of charge. Call 1-800-244-6224 (TTY: Dial 711) or speak to your provider.

Spanish – ATENCIÓN: Si habla español, los servicios de asistencia lingüística gratuitos están disponibles para usted. También están disponibles de forma gratuita ayudas y servicios auxiliares adecuados para proporcionar información en formatos accesibles. Llame al 1-800-244-6224 (TTY: Marque 711) o hable con su proveedor.

Chinese – 注意：如果您讲中文，我们提供免费的语言援助服务。适当的辅助设备和服务也可以免费提供，以提供无障碍格式的信息。请拨打 1-800-244-6224（TTY：拨打 711）或与您的服务提供者联系。

Vietnamese – XIN LƯU Ý: Nếu bạn nói tiếng Viet, dịch vụ hỗ trợ ngôn ngữ miễn phí có sẵn cho bạn. Các thiết bị và dịch vụ hỗ trợ phù hợp để cung cấp thông tin ở định dạng có thể tiếp cận cũng có sẵn miễn phí. Gọi số 1-800-244-6224 (TTY: Gọi 711) hoặc nói chuyện với nhà cung cấp của bạn).

Korean – 주의: 한국어를 사용하시는 경우, 무료 언어 지원 서비스가 제공됩니다. 접근 가능한 형식으로 정보를 제공하기 위한 적절한 보조 기기 및 서비스도 무료로 제공됩니다. 1-800-244-6224 (TTY: 711 로 전화) 로 전화하시거나 제공자에게 문의하십 시오.

Tagalog – PAUNAWA: Kung ikaw ay nagsasalita ng Tagalog, ang mga libreng serbisyo ng tulong sa wika ay magagamit para sa iyo. Ang mga angkop na pantulong na kagamitan at serbisyo upang magbigay ng impormasyon sa mga naa-access na format ay magagamit din ng libre. Tumawag sa 1-800-244-6224 (TTY: Tumawag sa 711) o makipag-usap sa iyong tagapagbigay.

Russian – ВНИМАНИЕ: Если вы говорите на русском, доступны бесплатные услуги языковой помощи. Также бесплатно предоставляются соответствующие вспомогательные средства и услуги для предоставления информации в доступных форматах. Позвоните по телефону 1-800-244-6224 (TTY: Наберите 711) или обратитесь к вашему провайдеру.

Arabic - تنبيه: إذا كنت تتحدث العربية، تتوفر لك خدمات المساعدة اللغوية المجانية. كما تتوفر أيضًا مساعدات قابلة للوصول إليها، وذلك مجانًا. اتصل بالرقم 1-800-244-6224 (TTY: 711 اطلب) أو تحدث إلى مقدم الخدمة الخاص بك.

French Creole – ATANSYON: Si ou pale Kreyòl Ayisyen, sèvis asistans lang gratis yo disponib pou ou. Ekipman ak sèvis adisyonèl ki apwopriye pou bay enfòmasyon nan fòma ki aksesib yo disponib tou gratis. Rele 1-800-244-6224 (TTY: Rele 711) oswa pale ak founisè ou a.

French – ATTENTION : Si vous parlez français, des services d'assistance linguistique gratuits sont disponibles pour vous. Des aides et des services auxiliaires appropriés pour fournir des informations dans des formats accessibles sont également disponibles gratuitement. Appelez le 1-800-244-6224 (TTY : composez le 711) ou parlez à votre fournisseur.

Portuguese – ATENÇÃO: Se você fala português, serviços gratuitos de assistência linguística estão disponíveis para você. Auxílios e serviços apropriados para fornecer informações em formatos acessíveis também estão disponíveis gratuitamente. Ligue para 1-800-244-6224 (TTY: disque 711) ou fale com seu prestador de serviços.

Polish – UWAGA: Jeśli mówisz po polsku, dostępne są bezpłatne usługi pomocy językowej. Odpowiednie pomoce i usługi wspierające w celu dostarczenia informacji w dostępnych formatach są również dostępne bezpłatnie. Zadzwoń pod numer 1-800-244-6224 (TTY: wybierz 711) lub skontaktuj się ze swoim dostawcą usług.

Japanese – 注意: 日本語を話す場合は、無料の言語支援サービスが利用できます。アクセス可能な形式で情報を提供するための適切な補助機器やサービスも無料で利用できます。1-800-244-6224（TTY: 711 にダイヤル）に電話するか、提供者に話してください。

Italian – ATTENZIONE: Se parli italiano, sono disponibili per te servizi gratuiti di assistenza linguistica. Sono disponibili gratuitamente anche ausili e servizi appropriati per fornire informazioni in formati accessibili. Chiama il numero
1-800-244-6224 (TTY: comporre il 711) o parla con il tuo fornitore.

German – Achtung: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlose Sprachassistenzdienste zur Verfügung. Geeignete Hilfsmittel und Dienste, um Informationen in barrierefreien Formaten bereitzustellen, sind ebenfalls kostenlos verfügbar. Rufen Sie 1-800-244-6224 an (TTY: Wählen Sie 711) oder sprechen Sie mit Ihrem Anbieter.

Persian (Farsi) - توجه: همچنین، وسایل و خدمات کمکی مناسب برای در دسترس است. خدمات رایگان کمک زبان برای شما صحبت می‌کنید، اگر به فارسی تماس بگیرید یا با (شماره 711 را بگیرید :TTY) ارائه اطلاعات در قالبهای قابل دسترس به صورت رایگان در دسترس هستند. با شماره 1-800-244-6224 ارائه‌دهنده خود صحبت کنید.