

Health Net Medicare Part D 2012 Value Formulary (List of Covered Drugs)

PLEASE READ: THIS DOCUMENT CONTAINS INFORMATION ABOUT THE DRUGS WE COVER IN THIS PLAN AS OF SEPTEMBER 1, 2011.

Note to existing members: This formulary has changed since last year. Please review this document to make sure that it still contains the drugs you take. To get updated information about the drugs covered by Health Net, please visit our website at www.healthnet.com.

Beneficiaries must use network pharmacies to access their prescription drug benefit. Benefits, formulary, pharmacy network, premium and/or copayments/coinsurance may change on January 1, 2013.

This information is available for free in other languages. Please contact our Customer Service department at the toll free number listed at the beginning of this booklet.

Esta información está disponible en forma gratuita en otros idiomas. Comuníquese con nuestro departamento de Servicio al Cliente al número de teléfono gratuito que aparece al comienzo de este folleto.

本資訊備有其他語言版本，可免費提供。請撥打本冊子開頭所列的免付費電話，聯絡我們的客戶服務部。

Thông tin này được cung cấp miễn phí qua nhiều ngôn ngữ khác. Vui lòng liên lạc với ban Phục vụ Hội viên của chúng tôi theo số điện thoại miễn phí nơi phần đầu của tập sách này.

Available nang libre sa ibang mga wika ang impormasyong ito. Mangyaring makipag-ugnay sa aming departamento ng Serbisyo sa Customer sa numerong toll free na nakalista sa umpisa ng booklet na ito.

A Medicare Advantage organization with a Medicare contract. A stand-alone prescription drug plan with a Medicare contract.



Health Net[®]
MEDICARE PROGRAMS

6025492

Material ID# Y0035_2012_0021_A (H0351, H0562, H5439, H5520, H6815, S5678)

CMS Approved 09152011

HPMS Approved Formulary File Submission ID 12050, Version 8

If you would like to contact Health Net Customer Service, please find the contact information for your state below:

ARIZONA

FOR MEDICAL PLANS:

Health Net
Attn: Arizona Medicare Program
P.O. Box 10420
Van Nuys, CA 91410-0420
Fax- 1-866-375-3790

FOR HEALTH NET ORANGE, PART D PRESCRIPTION DRUG PLANS:

Health Net
P.O. Box 6501
Rensselaer, NY 12144-6501
Fax- 1-888-268-2393
Hours are: 8:00 a.m. – 8:00 p.m.,
seven days a week.

Current members:

All medical plans

1-800-977-7522, TTY 1-800-977-6757

Health Net Orange (PDP) prescription drug plans

1-800-806-8811, TTY 1-800-929-9955

Prospective members:

All medical plans

1-800-333-3930, TTY 1-800-977-6757

Health Net Orange prescription drug plans

1-800-865-9431, TTY 1-800-929-9955

CALIFORNIA

FOR MEDICAL PLANS:

Health Net
P.O. Box 10198
Van Nuys, CA 91410-0198
Fax- 1-818-676-8100

FOR HEALTH NET ORANGE, PART D PRESCRIPTION DRUG PLANS:

Health Net
P.O. Box 6501
Rensselaer, NY 12144-6501
Fax- 1-888-268-2393
Hours are: 8:00 a.m. – 8:00 p.m.,
seven days a week.

Current members:

**Health Net Seniority Plus Ruby
(HMO), Health Net Green (HMO),
Salud con Health Net (HMO),
Health Net Healthy Heart (HMO)**
1-800-275-4737, TTY 1-800-929-9955

Health Net Amber (HMO SNP)
1-800-431-9007, TTY 1-800-929-9955

Health Net Violet (PPO)
1-800-960-4638, TTY 1-800-929-9955

**Health Net Orange (PDP)
prescription drug plans**
1-800-806-8811, TTY 1-800-929-9955

Prospective members:

All medical plans
1-800-977-6738, TTY 1-800-929-9955

**Health Net Orange
prescription drug plans**
1-800-865-9431, TTY 1-800-929-9955

**OREGON/WASHINGTON–
CLARK COUNTY ONLY**

FOR MEDICAL PLANS:

Health Net Medicare Advantage
13221 SW 68th Parkway, Ste. 200
Tigard, OR 97223
Fax- 1-818-337-7241

**FOR HEALTH NET ORANGE,
PART D PRESCRIPTION DRUG
PLANS:**

Health Net
P.O. Box 6501
Rensselaer, NY 12144-6501
Fax- 1-888-268-2393
Hours are: 8:00 a.m. – 8:00 p.m.,
seven days a week.

Current members:

All medical plans
1-888-445-8913, TTY 1-800-929-9955

**Health Net Orange (PDP)
prescription drug plans**
1-800-806-8811, TTY 1-800-929-9955

Prospective members:

All medical plans
1-800-949-6192, TTY 1-800-929-9955

**Health Net Orange
prescription drug plans**
1-800-865-9431, TTY 1-800-929-9955

ALL OTHER STATES –

**FOR HEALTH NET ORANGE,
PART D PRESCRIPTION DRUG
PLANS:**

Health Net
P.O. Box 6501
Rensselaer, NY 12144-6501
Fax- 1-888-268-2393
Hours are: 8:00 a.m. – 8:00 p.m.,
seven days a week.

Current members:

**Health Net Orange (PDP)
prescription drug plans**
1-800-806-8811, TTY 1-800-929-9955

Prospective members:

**Health Net Orange
prescription drug plans**
1-800-865-9431, TTY 1-800-929-9955

Welcome to Health Net. We are glad you have chosen us to be your plan of choice for your prescription needs. This easy-to-read formulary provides you with valuable information about the formulary (also known as a “drug list”) that applies to your benefit, the prescription drugs we cover, copayment or coinsurance levels and details on how to use your benefit. To quickly find your drug, turn to the index at the end of this booklet. For detailed information on how to read the formulary, turn to page ix.

What is the Health Net Medicare Part D formulary?

This formulary represents the entire list of Part D drugs covered by Health Net. A formulary is a list of covered drugs selected by Health Net in consultation with a team of health care providers, which represents the prescription therapies believed to be a necessary part of a quality treatment program. Health Net will generally cover the drugs listed on the formulary as long as the drug is medically necessary, the prescription is filled at a Health Net network pharmacy, and other plan rules are followed. For more information on how to fill your prescriptions, please review your Evidence of Coverage (EOC).

Which Health Net Medicare Part D formulary applies to you?

This document contains detailed information for one of Health Net’s formularies. The name of the formulary appears on the front cover of this document. To confirm you are viewing the formulary that applies to your benefit, locate your plan name or type in the table below. If you are not sure of your plan name, you can find it on your EOC.

<i>Plan</i>	<i>Formulary</i>
Health Net Orange Option 1 (PDP)	Value
Health Net Value Orange Option 2 (PDP)	Formulary
Health Net Orange Option 2 (PDP)	Classic
All MAPD Medical Plans (HMO, PPO, and POS)	Formulary

Can the formulary change?

Generally, if you are taking a drug on the 2012 formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2012 coverage year **except** when a new, less expensive generic drug becomes available and is offered at a lower tier or lower cost to you, or when new information about the safety or effectiveness of a drug is released.

In most cases, formulary changes such as applying a new or revised restriction to a drug, moving a drug to a more expensive tier or removing a drug from the formulary, will not affect you if you are currently taking the drug. The drug will remain available at the same cost for the remainder of the year. We feel it is important that you have continued access for the remainder of the year to the formulary drugs that were available when you chose our plan.

However, in some cases, these types of formulary changes may affect you. If a formulary change will affect you, we will notify you in advance of the change. You will receive notification at least 60 days before the change becomes effective, or you may receive a 60-day supply when you request a refill of the drug which will act as your notification. If we make any non-maintenance formulary changes during the year, you will be notified via mail and the changes will be posted on our website.

If the United States Food and Drug Administration (FDA) deems a drug on the formulary to be unsafe or if the manufacturer of the drug removes the drug from the market, we will immediately remove the drug from the formulary and provide notice to you if you are currently receiving the drug.

To get the most up-to-date information about the drugs covered by Health Net, please visit our website at www.healthnet.com where you may view and print a formulary. You may also call our Customer Service department at the toll-free number listed at the beginning of this booklet.

What if my drug is not on the formulary?

If your drug is not included on the formulary, you should first contact Customer Service and ask if your drug is covered. If you learn that Health Net does not cover your drug, you have two options:

- You can ask Customer Service for a list of similar drugs that are covered by Health Net. When you receive the list, show it to your prescriber and ask him or her to prescribe a similar drug that is covered by Health Net.
- You can ask Health Net to make an exception and cover your drug. See “How do I request an exception to the Health Net Medicare Part D formulary?” for information about how to request an exception.

Are there any restrictions on my coverage?

Some drugs may have additional restrictions or limits on coverage. You can find out if your drug has any restrictions or limits by looking in the Limits column on the formulary.

The table below provides a description of abbreviations that may appear in the Limits column on the formulary:

<i>Abbreviation</i>	<i>Definition</i>	<i>Description</i>
AL	Age Limit	Some drugs may require prior authorization if your age does not meet manufacturer, FDA, or clinical recommendations.
B/D	Medicare Part B vs. Part D	Some drugs require prior authorization to determine coverage under the Medicare Part B or Part D benefit, according to Medicare guidelines. Your prescriber may need to supply additional information, which will allow Health Net to make the determination. If the drug qualifies for coverage under Medicare Part B and you do not have Medicare Part B coverage through Health Net, the drug will not be covered by Health Net.
GL	Gender Limit	Some drugs are only covered for males or females based on manufacturer, FDA, or clinical recommendations.

LA	Limited Access	<p>Some drugs may be subject to limited access or restricted access. This means that a drug may only be available at one or a limited number of pharmacies. Limited access may be due to the following reasons:</p> <ul style="list-style-type: none"> • The FDA has restricted distribution of a drug to certain facilities, pharmacies or prescribers, or • Certain drugs require special handling, coordination of care, or patient education that cannot be provided at a retail pharmacy. <p>You should talk to your prescriber or pharmacist for details about acquiring limited access drugs.</p>
MO	Mail Order	<p>These drugs are available at Health Net's network mail order pharmacy in addition to other network pharmacies.</p>
PA	Prior Authorization	<p>Some drugs require prior authorization for coverage, clinical effectiveness, or safety reasons. This means that you or your prescriber must request approval from Health Net before the drug will be covered.</p>
QL	Quantity Limit	<p>For some drugs, Health Net limits the amount of the drug covered based on manufacturer, FDA, clinical dosing or treatment recommendations.</p> <p>This may replace your standard days supply limit.</p>

ST	Step Therapy	<p>In some cases, Health Net requires you to first try certain drugs to treat your medical condition before covering another drug for that condition.</p> <p>For example, if Drug A and Drug B both treat your medical condition, Health Net may not cover Drug B unless you try Drug A first. If Drug A is found in your recent Health Net prescription claims history, Drug B will be automatically approved.</p>
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You can ask Health Net to make an exception to these restrictions or limits. See the next section.

How do I request an exception to the Health Net Medicare Part D formulary?

You can ask Health Net to make an exception to our coverage rules. There are several types of exceptions that you can ask us to make.

- You can ask us to cover your drug even if it is not on the formulary.
- You can ask us to waive coverage restrictions or limits on your drug. For example, for certain drugs, Health Net may limit the amount of the drug that will be covered. If your drug has a quantity limit, you can ask us to waive the limit and cover more.
- You can ask us to make an exception and cover your drug at a lower tier. If your drug is on Tier 3 (Non-preferred Brand Tier) or on Tier 4 (Injectable Tier), you can ask us for an exception to cover it

for the Tier 2 (Preferred Brand Tier) copayment. Please note, if we grant your request to cover a drug that is not on the formulary, the drug will be available for the Tier 3 (Non-preferred Brand Tier) copayment. The drug is not eligible for an exception for payment at a lower tier. Also, drugs on Tier 2 (Preferred Brand Tier) and Tier 5 (Specialty Tier) are not eligible for an exception for payment at a lower tier.

Generally, Health Net will only approve your request for an exception if preferred alternative drugs or utilization restrictions would not be as effective in treating your condition and/or would cause you to have adverse medical effects.

You may contact us to request an exception. When requesting an exception, we require a statement from your prescriber supporting your request. Generally, we must make our decision

within 72 hours of receiving your prescriber’s supporting statement. You or your prescriber may request an expedited (fast) exception if you or your prescriber believe that your health could be seriously

harmed by waiting up to 72 hours for a decision. If your request to expedite is granted, we must give you a decision no later than 24 hours after we receive your prescriber’s supporting statement.

Formulary tier descriptions

To determine how much you will be required to pay for a drug, the abbreviations in the table below appear in the Brand Tier and Generic Tier columns on the formulary. The copayment or coinsurance level you will be required to pay is displayed in the Copayment/Coinsurance column. If you do not know your copayment or coinsurance for each tier, please refer to your Summary of Benefits or EOC.

<i>Abbreviation</i>	<i>Copayment/ Coinsurance</i>	<i>Description</i>
1	Tier 1 copayment	Preferred generic drugs.
2	Tier 2 copayment	Preferred brand drugs.
3	Tier 3 copayment	Non-preferred brand drugs.
4 (Injectable Tier)	Tier 4 copayment or coinsurance	Includes injectable drugs that do not meet the Centers for Medicare and Medicaid Services (CMS) minimum cost threshold required to be placed on the Specialty Tier (Tier 5). These drugs may be limited to a maximum 30-day supply per fill.
5 (Specialty Tier)	Tier 5 copayment or coinsurance	High cost drugs. Some of these drugs may be limited to a maximum 30-day supply per fill. Specialty Tier (Tier 5) drugs are not eligible for exceptions for payment at a lower tier.
NF	Non-formulary – If Health Net approves an exception request for a non-formulary drug, the Non-preferred Brand Tier (Tier 3) copayment will apply.	Drugs not covered on Health Net’s Medicare Part D formulary. You may request an exception from Health Net to cover these drugs. See the section, “How do I request an exception to the Health Net Medicare Part D formulary?” for information about how to request an exception.

How do I use the formulary?

The drugs in this formulary are grouped into Therapeutic Category and Therapeutic Class Name. If you know what your drug is used for, look for the category or class name which is listed alphabetically. For example, drugs used to treat depression are listed under the category, ANTIDEPRESSANTS.

The index at the end of this booklet provides an alphabetical list of all of the drugs included in the formulary. Both brand name drugs and generic drugs are listed in the index. Next to the drug, you will see the page number where you can find coverage information.

How do I read the formulary?

If you have trouble finding a drug, turn to the index at the end of this booklet.

Brand and generic drugs

Health Net covers both brand name drugs and generic drugs. A generic drug is approved by the FDA as having the same active ingredient as the brand name drug. Generally, generic drugs cost less than brand name drugs.

The name of each drug can be found in the first column. Brand name drugs are in uppercase (example: ZOCOR) and generic drugs are in lowercase (example: simvastatin). When there is a brand name drug with a generic equivalent available, the drugs will be listed on the same line with the generic drug in parentheses, for example: ZOCOR (simvastatin).

Tier status

The tier status is shown to the right of the drug name. Generally, when there is a brand name drug with a generic equivalent available, the brand name drug will be non-preferred or non-formulary.

Limits

The information in the Limits column tells you if there are any limits or restrictions on a drug. For a complete description of abbreviations found in the Limits column, please refer to the Abbreviations table beginning on page v.

Note: Example only

<i>BRAND DRUG (generic drug)</i>	<i>Brand Tier</i>	<i>Generic Tier</i>	<i>Limits</i>
Therapeutic Category Name			
Therapeutic Class Name -			
BRAND NAME (generic name)	3	1	B/D, MO, PA, QL
BRAND NAME	2		LA, ST

Brand drug only; generic not available

Sample of abbreviations; Turn to pages v – vii for a complete description of abbreviations

Health Net's transition program

The transition program is designed to ensure continuity of care for new members, existing members who may be subject to formulary changes, and members who experience a level of care change. The program also allows members in Long Term Care (LTC) facilities access to a temporary transition supply of drugs.

Initial eligibility

If you are a new member in our plan, you may be taking drugs that are not on the formulary, or you may be taking a drug that is on the formulary with restrictions or limits. For example, you may need a prior authorization from us before your prescription can be filled. You should talk to your prescriber to decide if you should change to a drug that we cover or request an exception so that we will cover the drug you take. While you talk to your prescriber to determine the right course of action for you, we may cover

your drug in certain cases during the first 90 days you are a member of our plan. This may also apply if you are a renewing member and experience a change in the formulary at the beginning of the contract year. During this time, if your drug is not on the formulary or if your ability to get your drug is limited, we will cover a one-time temporary 30-day transition supply (unless you have a prescription written for fewer days) when you go to a network pharmacy. If your prescription is written for less than a 30-day transition supply, refills for up to a cumulative 30-day supply will be covered.

If you are a resident of a LTC facility, we will cover a temporary 34-day transition supply (unless you have a prescription written for fewer days). We will allow you to refill your prescription until we have provided you with a 102-day transition supply, consistent with the dispensing increment, (unless you have a prescription written for fewer days).

Emergency supply

If you are a resident of an LTC facility and need a drug that is not on the formulary or your ability to get your drug is limited, but you are past the first 90 days of membership in our plan, we will cover a 34-day emergency supply of that drug (unless you have a prescription written for fewer days) while you pursue an exception.

Level of care changes

If you experience a level of care change, we will cover a transition supply of your drugs. A level of care change occurs when you are discharged from a hospital or moved to or from a long-term care facility.

- If you move from a LTC facility or a hospital to home and need a transition supply right away, we will cover one 30-day supply, or less if your prescription is written for fewer days (in which case we will allow multiple fills to provide up to a total of a 30-day supply of medication).
- If you move from home or a hospital to a long-term care facility and need a transition supply right away, we will cover one 34-day supply, or less if your prescription is written for fewer days (in which case we will allow multiple fills to provide up to a total of a 34-day supply of medication).

For more information

For more detailed information about your Health Net prescription drug coverage, please review your EOC and other plan materials.

If you have questions about Health Net, please call our Customer Service department at the toll-free number listed at the beginning of this booklet, or visit www.healthnet.com.

If you have general questions about Medicare prescription drug coverage, please call Medicare at 1-800-MEDICARE (1-800-633-4227) 24 hours a day/7 days a week. TTY/TDD users should call 1-877-486-2048. Or, visit www.medicare.gov.

BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS			
Amphetamines			
ADDERALL TAB 10 MG, 12.5 MG, 15 MG, 20 MG, 30 MG, 5 MG, 7.5 MG	NF		MO
AMPHETAMINE SALT COMBO TAB 10 MG, 12.5 MG, 15 MG, 20 MG, 30 MG, 5 MG, 7.5 MG		1	MO
DESOXYN TAB (<i>methamphetamine</i>) 5 MG	3	1	MO
DEXEDRINE SPANSULE CAP (<i>dextroamphetamine</i>) 10 MG, 15 MG, 5 MG	NF	1	MO
DEXTROSTAT TAB (<i>dextroamphetamine</i>) 10 MG	NF	1	MO
DEXTROSTAT TAB (<i>dextroamphetamine</i>) 5 MG		1	MO
Attention-Deficit/Hyperactivity Disorder (ADHD) Agents			
INTUNIV ER 24 HR TAB 1 MG, 2 MG, 3 MG, 4 MG	3		MO
STRATTERA CAP 10 MG, 100 MG, 18 MG, 25 MG, 40 MG, 60 MG, 80 MG	2		MO
Stimulants - Misc.			
CONCERTA 24 HR TAB (<i>methylphenidate</i>) 18 MG, 27 MG, 36 MG, 54 MG	2	1	MO
FOCALIN TAB (<i>dexmethylphenidate</i>) 10 MG, 2.5 MG, 5 MG	3	1	MO
METADATE ER TAB (<i>methylphenidate</i>) 10 MG	NF	NF	MO
METADATE ER TAB (<i>methylphenidate</i>) 20 MG		1	MO

Please refer to pages v - vi for a complete description of abbreviations.

AL=Age Limit B/D=Medicare Part B vs.D GL=Gender Limit LA=Limited Access

MO=Available at Mail Order PA=Prior Authorization QL=Quantity Limit ST=Step Therapy

BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
METHYLIN CHEWABLE TAB 10 MG, 2.5 MG, 5 MG	2		MO
METHYLIN ORAL SOLN (<i>methylphenidate</i>) 10 MG/5 ML, 5 MG/5 ML	2	1	MO
METHYLIN TAB (<i>methylphenidate</i>) 10 MG, 20 MG, 5 MG		1	MO
METHYLIN ER TAB (<i>methylphenidate</i>) 10 MG		1	MO
METHYLIN ER TAB (<i>methylphenidate</i>) 20 MG		1	MO
NUVIGIL TAB 150 MG, 250 MG, 50 MG	2		PA; MO
RITALIN TAB (<i>methylphenidate</i>) 10 MG, 20 MG, 5 MG	NF	1	MO
RITALIN SR TAB (<i>methylphenidate</i>) 20 MG	NF	1	MO
AMINOGLYCOSIDES			
AMINOGLYCOSIDES			
<i>amikacin injection 1,000 mg/4 ml</i>		4	
<i>amikacin injection 100 mg/2 ml, 500 mg/2 ml</i>		4	MO
<i>amikacin syringe 250 mg/ml</i>		4	MO
<i>amikacin (pf) injection 1,000 mg/4 ml</i>		4	
<i>amikacin (pf) injection 100 mg/2 ml, 500 mg/2 ml</i>		4	MO
<i>gentamicin injection 10 mg/ml, 40 mg/ml</i>		4	MO
<i>gentamicin in sodium chloride(iso-osmotic) iv piggy back 100 mg/100 ml, 100 mg/50 ml, 120 mg/100 ml, 60 mg/100 ml, 60 mg/50 ml, 70 mg/50 ml, 80 mg/50 ml, 90 mg/100 ml</i>		4	
<i>gentamicin in sodium chloride(iso-osmotic) iv piggy back 80 mg/100 ml</i>		4	MO
<i>gentamicin sulfate (pediatric) (pf) injection 20 mg/2 ml</i>		4	MO
<i>gentamicin sulfate (pf) iv 100 mg/10 ml, 60 mg/6 ml, 80 mg/8 ml</i>		4	
<i>kanamycin injection 1 gram/3 ml</i>		4	MO
NEO-FRADIN ORAL SOLN 25 MG/ML	2		MO
<i>neomycin tab 500 mg</i>		1	MO

Please refer to pages v - vi for a complete description of abbreviations.

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
<i>paromomycin cap 250 mg</i>		1	MO
<i>streptomycin im 1 gram</i>		4	MO
TOBI NEB SOLUTION 300 MG/5 ML	5		B/D
<i>tobramycin in ns iv piggy back 60 mg/50 ml, 80 mg/100 ml</i>		4	
<i>tobramycin injection 10 mg/ml</i>		4	
<i>tobramycin injection 40 mg/ml</i>		4	MO
<i>tobramycin iv 80 mg/8ml</i>		4	
<i>tobramycin solution for injection 1.2 g</i>		4	
ANALGESICS - ANTI-INFLAMMATORY			
Anti-TNF-alpha - Monoclonal Antibodies			
HUMIRA SUB-Q KIT 20 MG/0.4 ML, 40 MG/0.8 ML	5		PA
HUMIRA CROHN'S DISEASE STARTER PACK SUBQ PEN KIT 40 MG/0.8 ML	5		PA
HUMIRA PEN SUBQ KIT 40 MG/0.8 ML	5		PA
HUMIRA PSORIASIS STARTER PACK SUBQ PEN KIT 40 MG/0.8 ML	5		PA
SIMPONI SUB-Q PEN INJECTOR 50 MG/0.5 ML	5		PA
SIMPONI SUB-Q SYRINGE 50 MG/0.5 ML	5		PA
Antirheumatic Antimetabolites			
RHEUMATREX TABS IN A DOSE PACK 2.5 MG	2		MO
Gold Compounds			
RIDAURA CAP 3 MG	2		MO
Interleukin-1 Blockers			
ARCALYST SUB-Q SOLN 220 MG	5		LA
Interleukin-1 Receptor Antagonist (IL-1Ra)			
KINERET SUB-Q SYRINGE 100 MG/0.67 ML	5		PA

Please refer to pages v - vi for a complete description of abbreviations.

AL=Age Limit B/D=Medicare Part B vs.D GL=Gender Limit LA=Limited Access

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
Interleukin-1beta Blockers			
ILARIS (PF) SUB-Q SOLN 180 MG/1.2 ML (150 MG/ML)	5		
Interleukin-6 Receptor Inhibitors			
ACTEMRA IV 200 MG/10 ML (20 MG/ML), 400 MG/20 ML (20 MG/ML), 80 MG/4 ML (20 MG/ML)	5		PA
Nonsteroidal Anti-inflammatory Agents (NSAIDs)			
ANAPROX TAB (<i>naproxen sodium</i>) 275 MG	NF	1	MO
ANAPROX DS TAB (<i>naproxen sodium</i>) 550 MG	NF	1	MO
ANSAID TAB (<i>flurbiprofen</i>) 100 MG	NF	1	MO
CATAFLAM TAB (<i>diclofenac potassium</i>) 50 MG	NF	1	MO
CELEBREX CAP 100 MG, 200 MG, 400 MG, 50 MG	2		MO
CLINORIL TAB (<i>sulindac</i>) 200 MG	NF	1	MO
DAYPRO TAB (<i>oxaprozin</i>) 600 MG	NF	1	MO
<i>diclofenac sodium tab, delayed release 25 mg, 50 mg</i>		1	MO
EC-NAPROSYN TAB (<i>naproxen</i>) 375 MG, 500 MG	NF	1	MO
<i>etodolac cap 200 mg, 300 mg</i>		1	MO
<i>etodolac er 24 hr tab 400 mg, 500 mg, 600 mg</i>		1	MO
<i>etodolac tab 400 mg, 500 mg</i>		1	MO
FELDENE CAP (<i>piroxicam</i>) 10 MG, 20 MG	NF	1	MO
<i>fenoprofen tab 600 mg</i>		1	MO
<i>flurbiprofen tab 50 mg</i>		1	MO
<i>ibuprofen oral susp 100 mg/5 ml</i>		1	MO
<i>ibuprofen tab 400 mg, 600 mg, 800 mg</i>		1	MO
INDOCIN ORAL SUSP 25 MG/5 ML	2		MO
<i>indomethacin cap 25 mg, 50 mg</i>		1	MO
<i>indomethacin er cap 75 mg</i>		1	MO

Please refer to pages v - vi for a complete description of abbreviations.

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
<i>ketoprofen cap 50 mg, 75 mg</i>		1	MO
<i>ketoprofen er 24 hr cap 200 mg</i>		1	MO
<i>ketorolac im 60 mg/2 ml</i>		4	MO
<i>ketorolac im cartridge 60 mg/2 ml</i>		4	MO
<i>ketorolac injection 15 mg/ml, 30 mg/ml, 30 mg/ml (1 ml)</i>		4	MO
<i>ketorolac injection, cartridge 15 mg/ml, 30 mg/ml</i>		4	MO
<i>ketorolac syringe 15 mg/ml, 30 mg/ml</i>		4	MO
<i>ketorolac tab 10 mg</i>		1	MO
<i>meclofenamate cap 100 mg, 50 mg</i>		NF	MO
MOBIC ORAL SUSP (<i>meloxicam</i>) 7.5 MG/5 ML	NF	1	MO
MOBIC TAB (<i>meloxicam</i>) 15 MG, 7.5 MG	NF	1	MO
<i>nabumetone tab 500 mg, 750 mg</i>		1	MO
NALFON CAP 200 MG	3		MO
NAPRELAN CR 24 HR TAB 375 MG, 500 MG	2		MO
NAPROSYN ORAL SUSP (<i>naproxen</i>) 125 MG/5 ML	NF	1	MO
NAPROSYN TAB (<i>naproxen</i>) 250 MG, 375 MG, 500 MG	NF	1	MO
<i>naproxen sodium er tab 500 mg</i>		1	MO
PONSTEL CAP (<i>mefenamic acid</i>) 250 MG	NF	1	MO
SPRIX NASAL SPRAY 15.75 MG/SPRAY	3		MO
<i>sulindac tab 150 mg</i>		1	MO
<i>tolmetin cap 400 mg</i>		1	MO
<i>tolmetin tab 200 mg, 600 mg</i>		1	MO
VIMOVO 12 HR TAB 375-20 MG, 500-20 MG	2		MO
VOLTAREN TAB (<i>diclofenac sodium</i>) 75 MG	NF	1	MO
VOLTAREN-XR 24 HR TAB (<i>diclofenac sodium</i>) 100 MG	3	1	MO
Pyrimidine Synthesis Inhibitors			
ARAVA TAB (<i>leflunomide</i>) 10 MG, 20 MG	3	1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
Selective Costimulation Modulators			
ORENCIA IV SOLUTION 250 MG	5		PA
Soluble Tumor Necrosis Factor Receptor Agents			
ENBREL SUB-Q KIT 25 MG	5		PA
ENBREL SUB-Q SYRINGE 25 MG/0.5ML (0.51), 50 MG/ML (0.98 ML)	5		PA
ENBREL SURECLICK SUB-Q PEN INJECTOR 50 MG/ML (0.98 ML)	5		PA
ANALGESICS - NonNarcotic			
Salicylates			
<i>diflunisal tab 500 mg</i>		1	MO
ANALGESICS - OPIOID			
Opioid Agonists			
ABSTRAL SUBLINGUAL TAB 100 MCG, 200 MCG, 300 MCG, 400 MCG, 600 MCG, 800 MCG	5		
ASTRAMORPH-PF INJECTION (<i>morphine (PF)</i>) 0.5 MG/ML, 1 MG/ML	4	4	
AVINZA 24 HR CAP 120 MG, 30 MG, 45 MG, 60 MG, 75 MG, 90 MG	2		MO
<i>codeine tab 15 mg, 30 mg, 60 mg</i>		1	MO
DARVON CAP (<i>propoxyphene</i>) 65 MG	NF	1	MO
DAZIDOX TAB (<i>oxycodone</i>) 20 MG	2	1	MO
DEMEROL INJECTION 100 MG/ML, 50 MG/ML	4		MO
DEMEROL TAB (<i>meperidine</i>) 100 MG, 50 MG	NF	1	MO
DEMEROL (PF) INJECTION 100 MG/2 ML	4		
DEMEROL (PF) INJECTION 25 MG/0.5 ML, 75 MG/1.5 ML	4		MO
DEMEROL (PF) SYRINGE 100 MG/ML, 50 MG/ML	4		MO
DEMEROL (PF) SYRINGE 25 MG/ML, 75 MG/ML	4		

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
DEMEROL (PF) INJECTION (<i>meperidine (PF)</i>) 100 MG/ML, 50 MG/ML	4	4	MO
DILAUDID TAB (<i>hydromorphone</i>) 2 MG, 4 MG, 8 MG	NF	1	MO
DILAUDID (PF) INJECTION 1 MG/ML, 2 MG/ML	4		MO
DILAUDID (PF) INJECTION 4 MG/ML	4		
DILAUDID-5 ORAL LIQUID 1 MG/ML	3		MO
DILAUDID-HP SOLUTION FOR INJECTION 250 MG	4		
DILAUDID-HP INJECTION (<i>hydromorphone (PF)</i>) 10 MG/ML	4	4	MO
DISKETS SOLUBLE TAB (<i>methadone</i>) 40 MG		1	
DOLOPHINE TAB (<i>methadone</i>) 10 MG, 5 MG	NF	1	MO
DURAGESIC TRANSDERM PATCH (<i>fentanyl</i>) 100 MCG/HR, 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR	3	1	MO
DURAMORPH INJECTION (<i>morphine (PF)</i>) 0.5 MG/ML, 1 MG/ML	4	4	
EMBEDA CAP 100-4 MG, 20-0.8 MG, 30-1.2 MG, 50-2 MG, 60-2.4 MG, 80-3.2 MG	2		MO
<i>fentanyl (pf) syringe 50 mcg/ml</i>		4	MO
INFUMORPH P/F INJECTION 10 MG/ML, 25 MG/ML	4		MO
KADIAN CAP 10 MG, 100 MG, 20 MG, 200 MG, 30 MG, 50 MG, 60 MG, 80 MG	2		MO
LEVO-DROMORAN INJECTION 2 MG/ML	4		
LEVO-DROMORAN TAB (<i>levorphanol tartrate</i>) 2 MG	NF	NF	MO
<i>meperidine injection, cartridge 10 mg/ml</i>		4	
<i>meperidine oral soln 50 mg/5 ml</i>		1	MO
<i>meperidine (pf) injection 25 mg/ml, 75 mg/ml</i>		4	
<i>meperidine (pf) pca syringe 500 mg/50 ml</i>		4	

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
MEPERITAB TAB (<i>meperidine</i>) 100 MG, 50 MG		1	MO
<i>methadone injection 10 mg/ml</i>		4	
<i>methadone oral soln 10 mg/5 ml, 5 mg/5 ml</i>		1	MO
METHADONE INTENSOL ORAL CONCENTRATE (<i>methadone</i>) 10 MG/ML	NF	1	MO
METHADOSE ORAL CONCENTRATE (<i>methadone</i>) 10 MG/ML		1	MO
METHADOSE SOLUBLE TAB (<i>methadone</i>) 40 MG		1	
METHADOSE TAB (<i>methadone</i>) 10 MG		1	MO
<i>morphine injection 5 mg/ml</i>		4	MO
<i>morphine oral soln 10 mg/5 ml, 20 mg/5 ml</i>		1	MO
<i>morphine syringe 1 mg/ml</i>		4	
<i>morphine tab 15 mg, 30 mg</i>		1	MO
<i>morphine (pf) iv pca syringe 30 mg/30 ml (1 mg/ml), 50 mg/50 ml (1 mg/ml)</i>		4	
<i>morphine (pf) pca iv soln 30 mg/30 ml</i>		4	
<i>morphine concentrate oral 100 mg/5 ml (20 mg/ml)</i>		1	MO
MS CONTIN TAB (<i>morphine</i>) 100 MG, 15 MG, 200 MG, 30 MG, 60 MG	NF	1	MO
NUCYNTA TAB 100 MG, 50 MG, 75 MG	2		MO
NUMORPHAN INJECTION 1 MG/ML	4		
ONSOLIS BUCCAL FILM 1,200 MCG, 200 MCG, 400 MCG, 600 MCG, 800 MCG	5		PA; LA
OPANA INJECTION 1 MG/ML	4		
OPANA ER 12 HR TAB 10 MG, 20 MG, 30 MG, 40 MG, 5 MG	2		MO
OPANA ER 12 HR TAB (<i>oxymorphone</i>) 15 MG	2	1	MO
OPANA ER 12 HR TAB (<i>oxymorphone</i>) 7.5 MG	2	1	
ORAMORPH SR TAB (<i>morphine</i>) 100 MG, 15 MG, 30 MG, 60 MG	NF	1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
<i>oxycodone cap 5 mg</i>		1	MO
<i>oxycodone oral concentrate 20 mg/ml</i>		1	MO
<i>oxycodone tab 10 mg</i>		1	MO
OXYCONTIN 12 HR TAB 15 MG, 30 MG, 60 MG	2		MO
OXYCONTIN 12 HR TAB (<i>oxycodone</i>) 10 MG, 20 MG, 40 MG, 80 MG	2	1	MO
ROXICODONE TAB (<i>oxycodone</i>) 15 MG, 30 MG, 5 MG	NF	1	MO
SUBLIMAZE (P/F) INJECTION (<i>fentanyl citrate (PF)</i>) 50 MCG/ML	4	4	MO
ULTRAM TAB (<i>tramadol</i>) 50 MG	NF	1	MO
Opioid Combinations			
<i>acetaminophen-codeine elixir 120-12 mg/5 ml</i>		1	MO
<i>acetaminophen-codeine tab 300-15 mg</i>		1	MO
ASCOMP W/CODEINE CAP 30-50-325-40 MG		1	MO
BUTALBITAL COMPOUND W/CODEINE CAP 30-50-325-40 MG		1	MO
CO-GESIC TAB (<i>hydrocodone-acetaminophen</i>) 5-500 MG		1	MO
DOLOREX FORTE CAP 5-500 MG		1	MO
ENDOCET TAB (<i>oxycodone-acetaminophen</i>) 10-325 MG, 10-650 MG, 5-325 MG, 7.5-325 MG, 7.5-500 MG		1	MO
ENDODAN TAB (<i>oxycodone-aspirin</i>) 4.8355-325 MG		1	MO
FIORICET-CODEINE CAP (<i>cod-butalbital-acetaminop-caf</i>) 30-50-325-40 MG	3	1	MO
FIORINAL-CODEINE #3 CAP 30-50-325-40 MG	3		MO
HYCET ORAL SOLN 7.5-325 MG/15 ML	3		MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
<i>hydrocodone-acetaminophen oral soln 2.5-167 mg/5 ml, 5-334 mg/10 ml, 7.5-500 mg/15 ml(15 ml)</i>		1	MO
<i>hydrocodone-acetaminophen tab 2.5-500 mg</i>		1	MO
HYDROGESIC CAP 5-500 MG		1	MO
IBUDONE TAB 5-200 MG		1	MO
LORCET 10/650 TAB (<i>hydrocodone-acetaminophen</i>) 10-650 MG	NF	1	MO
LORCET PLUS TAB (<i>hydrocodone-acetaminophen</i>) 7.5-650 MG	NF	1	MO
LORTAB TAB (<i>hydrocodone-acetaminophen</i>) 10-500 MG, 5-500 MG, 7.5-500 MG	NF	1	MO
LORTAB ELIXIR ORAL SOLN (<i>hydrocodone-acetaminophen</i>) 7.5-500 MG/15 ML	NF	1	MO
MARGESIC-H CAP 5-500 MG		1	MO
MAXIDONE TAB (<i>hydrocodone-acetaminophen</i>) 10-750 MG	NF	1	MO
NORCO TAB (<i>hydrocodone-acetaminophen</i>) 10-325 MG, 5-325 MG, 7.5-325 MG	NF	1	MO
<i>oxycodone hcl-oxycodone ter-aspirin tab 4.5-0.38-325 mg</i>		1	MO
PANLOR SS TAB (<i>dihydrocode-acetaminophen-caff</i>) 32-712.8-60 MG	3	1	MO
PERCOCET TAB (<i>oxycodone-acetaminophen</i>) 10-325 MG, 10-650 MG, 2.5-325 MG, 5-325 MG, 7.5-325 MG, 7.5-500 MG	NF	1	MO
PERCODAN TAB (<i>oxycodone-aspirin</i>) 4.8355-325 MG	NF	1	MO
PHRENILIN W/CAFFEINE-CODEINE CAP (<i>cod-butalbital-acetaminop-caf</i>) 30-50-325-40 MG		1	MO
POLYGESIC CAP 5-500 MG		1	MO
<i>propoxyphene-acetaminophen tab 65-650 mg</i>		1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
REPREXAIN TAB 2.5-200 MG, 5-200 MG	3		MO
REPREXAIN TAB (<i>hydrocodone-ibuprofen</i>) 7.5-200 MG		1	MO
ROXICET ORAL SOLN 5-325 MG/5 ML	2		MO
ROXICET TAB 5-500 MG	2		MO
ROXICET TAB (<i>oxycodone-acetaminophen</i>) 5-325 MG		1	MO
STAGESIC CAP 5-500 MG		1	MO
SYNALGOS-DC CAP 16-356.4-30 MG	3		MO
TALACEN TAB (<i>pentazocine-acetaminophen</i>) 25-650 MG	NF	NF	MO
TYLENOL-CODEINE #3 TAB (<i>acetaminophen-codeine</i>) 300-30 MG	NF	1	MO
TYLENOL-CODEINE #4 TAB (<i>acetaminophen-codeine</i>) 300-60 MG	NF	1	MO
TYLOX CAP (<i>oxycodone-acetaminophen</i>) 5-500 MG	NF	1	MO
ULTRACET TAB (<i>tramadol-acetaminophen</i>) 37.5-325 MG	3	1	MO
VICODIN TAB (<i>hydrocodone-acetaminophen</i>) 5-500 MG	NF	1	MO
VICODIN ES TAB (<i>hydrocodone-acetaminophen</i>) 7.5-750 MG	NF	1	MO
VICODIN HP TAB (<i>hydrocodone-acetaminophen</i>) 10-660 MG		1	MO
VICOPROFEN TAB (<i>hydrocodone-ibuprofen</i>) 7.5-200 MG	3	1	MO
XODOL 10/300 TAB (<i>hydrocodone-acetaminophen</i>) 10-300 MG	3	1	MO
XODOL 5/300 TAB (<i>hydrocodone-acetaminophen</i>) 5-300 MG	3	1	MO
XODOL 7.5/300 TAB (<i>hydrocodone-acetaminophen</i>) 7.5-300 MG	3	1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
ZERLOR TAB (<i>dihydrocode-acetaminophen-caff</i>) 32-712.8-60 MG		1	MO
Opioid Partial Agonists			
BUPRENEX INJECTION (<i>buprenorphine</i>) 0.3 MG/ML	4	4	MO
<i>buprenorphine syringe 0.3 mg/ml</i>		4	MO
<i>butorphanol tartrate injection 1 mg/ml, 2 mg/ml</i>		4	MO
BUTRANS TRANSDERM PATCH 10 MCG/HOUR, 20 MCG/HOUR, 5 MCG/HOUR	3		MO
<i>nalbuphine injection 10 mg/ml, 20 mg/ml</i>		4	MO
SUBOXONE SUBLINGUAL TAB 2-0.5 MG, 8-2 MG	3		PA; MO
TALWIN INJECTION 30 MG/ML	4		MO
TALWIN NX TAB (<i>pentazocine-naloxone</i>) 50-0.5 MG	3	1	MO
ANDROGENS-ANABOLIC			
Anabolic Steroids			
ANADROL-50 TAB 50 MG	5		MO
OXANDRIN TAB (<i>oxandrolone</i>) 10 MG, 2.5 MG	NF	1	MO
Androgens			
ANDRODERM TRANSDERM 24 HR PATCH 2.5 MG/24 HR, 5 MG/24 HR	2		MO; GL
ANDROGEL TRANSDERMAL GEL PUMP 1.25 G/ACTUATION, 20.25 MG/1.25 GRAM (1.62 %)	2		MO; GL
ANDROGEL TRANSDERMAL PACKET 1 % (25 MG/2.5 G), 1 %(50 MG/5 GRAM)	2		MO; GL
ANDROID CAP 10 MG	2		MO
ANDROXY TAB 10 MG	2		MO
AXIRON TRANSDERM SOLUTION IN METERED PUMP 30 MG/ACTUATION	3		MO; GL

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
<i>danazol cap 100 mg, 200 mg, 50 mg</i>		1	MO
DELATESTRYL IM OIL (<i>testosterone enanthate</i>) 200 MG/ML	4	4	MO
DEPO-TESTOSTERONE IM OIL (<i>testosterone cypionate</i>) 100 MG/ML, 200 MG/ML	4	4	MO
FORTESTA TRANSDERMAL GEL PUMP 10 MG/0.5 GRAM PER ACTUATION	3		MO; GL
METHITEST TAB 10 MG	2		MO
TESTIM TRANSDERMAL GEL 50 MG/5 GRAM (1 %)	2		MO; GL
TESTRED CAP 10 MG	2		MO
ANORECTAL AGENTS			
Intrarectal Steroids			
COLOCORT ENEMA (<i>hydrocortisone</i>) 100 MG/60 ML		1	MO
CORTENEMA (<i>hydrocortisone</i>) 100 MG/60 ML	NF	1	MO
CORTIFOAM RECTAL 10 % (80 MG)	3		MO
Rectal Steroids			
ANUSOL-HC RECTAL CREAM 2.5 %	NF		MO
PROCTO-KIT RECTAL CREAM 2.5 %		1	MO
PROCTO-PAK RECTAL CREAM 1 %		1	MO
PROCTOCORT RECTAL CREAM 1 %	NF		MO
PROCTOCREAM-HC RECTAL 2.5 %		1	MO
PROCTOSOL HC RECTAL CREAM 2.5 %		1	MO
PROCTOZONE-HC RECTAL CREAM 2.5 %		1	MO
ANTHELMINTICS			
ANTHELMINTICS			
ALBENZA TAB 200 MG	3		MO
BILTRICIDE TAB 600 MG	2		MO
<i>mebendazole chewable tab 100 mg</i>		1	MO
STROMECTOL TAB 3 MG	3		MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
ANTI-INFECTIVE AGENTS - MISC.			
Anti-infective Agents - Misc.			
AZACTAM SOLUTION FOR INJECTION (aztreonam) 1 GRAM	4	4	MO
AZACTAM SOLUTION FOR INJECTION (aztreonam) 2 GRAM	4	4	
AZACTAM IN ISO-OSMOTIC DEXTROSE IV PIGGY BACK 1 GRAM/50 ML, 2 GRAM/50 ML	4		
BACI-IM IM (<i>bacitracin</i>) 50,000 UNIT	4	4	MO
CAYSTON NEB SOLUTION 75 MG/ML	5		LA
COLY-MYCIN M SOLUTION FOR INJECTION (<i>colistimethate sodium</i>) 150 MG	4	4	MO
COLY-MYCIN M PARENTERAL SOLUTION FOR INJECTION (<i>colistimethate sodium</i>) 150 MG	4	4	MO
FLAGYL CAP (<i>metronidazole</i>) 375 MG	NF	1	MO
FLAGYL TAB (<i>metronidazole</i>) 250 MG, 500 MG	NF	1	MO
METRO I.V. PIGGY BACK 500 MG/100 ML	4		
<i>metronidazole in sodium chloride (iso-osm) iv piggy back 500 mg/100 ml</i>		4	MO
NEBUPENT SOLUTION FOR INHALATION 300 MG	2		MO; B/D
PENTAM SOLUTION FOR INJECTION (<i>pentamidine</i>) 300 MG	4	4	MO
PRIMSOL ORAL SOLN 50 MG/5 ML	2		MO
<i>trimethoprim tab 100 mg</i>		1	MO
VANCOCIN CAP 125 MG, 250 MG	5		PA; MO
<i>vancomycin iv solution 1,000 mg, 500 mg</i>		4	MO; B/D
<i>vancomycin iv solution 10 gram, 5 gram, 750 mg</i>		4	B/D
<i>vancomycin in dextrose 5% iv piggy back 1 gram/200 ml, 500 mg/100 ml</i>		4	B/D

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
<i>vancomycin in dextrose (iso-osmotic) iv piggy back 750 mg/150 ml</i>		4	B/D
XIFAXAN TAB 550 MG	5		MO
Anti-infective Misc. - Combinations			
BACTRIM TAB <i>(sulfamethoxazole-trimethoprim) 400-80 MG</i>	NF	1	MO
BACTRIM DS TAB <i>(sulfamethoxazole-trimethoprim) 800-160 MG</i>	NF	1	MO
<i>erythromycin-sulfisoxazole oral susp 200-600 mg/5 ml</i>		1	MO
SEPTRA TAB <i>(sulfamethoxazole-trimethoprim) 400-80 MG</i>	NF	1	MO
SEPTRA DS TAB <i>(sulfamethoxazole-trimethoprim) 800-160 MG</i>	NF	1	MO
<i>sulfamethoxazole-trimethoprim iv 400-80 mg/5 ml</i>		4	MO
SULFATRIM ORAL SUSP <i>(sulfamethoxazole-trimethoprim) 200-40 MG/5 ML</i>		1	MO
Antiprotozoal Agents			
ALINIA ORAL SUSP 100 MG/5 ML	3		MO
ALINIA TAB 500 MG	3		MO
MEPRON ORAL SUSP 750 MG/5 ML	5		MO
Carbapenems			
DORIBAX IV SUSP 250 MG	5		
DORIBAX IV SUSP 500 MG	4		
INVANZ IV SOLUTION 1 GRAM	4		
INVANZ SOLUTION FOR INJECTION 1 GRAM	4		MO
MERREM IV SOLUTION <i>(meropenem)</i> 1 GRAM, 500 MG	4	4	MO
PRIMAXIN IM SUSP 500 MG	2		MO
PRIMAXIN IV SOLUTION 250 MG, 500 MG	2		MO

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Chloramphenicols			
<i>chloramphenicol sod succinate iv solution 1 gram</i>		4	
Cyclic Lipopeptides			
CUBICIN IV SOLUTION 500 MG	5		MO; B/D
Glycylcyclines			
TYGACIL IV SOLUTION 50 MG	4		
Ketolides			
KETEK TAB 300 MG	3		
KETEK TAB 400 MG	3		MO
Leprostotics			
<i>dapsone tab 100 mg, 25 mg</i>		1	MO
Lincosamides			
CLEOCIN CAP 75 MG	2		MO
CLEOCIN CAP (<i>clindamycin HCl</i>) 150 MG, 300 MG	NF	1	MO
CLEOCIN ORAL SOLUTION (<i>clindamycin palmitate HCl</i>) 75 MG/5 ML	2	1	MO
CLEOCIN INJECTION (<i>clindamycin phosphate</i>) 150 MG/ML	4	4	MO
CLEOCIN IV (<i>clindamycin phosphate</i>) 600 MG/4 ML, 900 MG/6 ML	4	4	
CLEOCIN IN D5W IV PIGGY BACK 300 MG/50 ML, 600 MG/50 ML, 900 MG/50 ML	4		
<i>clindamycin iv 300 mg/2 ml</i>		4	
LINCOCIN INJECTION 300 MG/ML	4		MO
Oxazolidinones			
ZYVOX IV 200 MG/100 ML, 600 MG/300 ML	5		PA
ZYVOX ORAL SUSP 100 MG/5 ML	5		PA; MO
ZYVOX TAB 600 MG	5		PA; MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
Polymyxins			
<i>polymyxin b sulfate solution for injection 500,000 unit</i>		4	
Streptogramins			
SYNERCID IV SOLUTION 500 MG	4		
ANTIANGINAL AGENTS			
Antianginals-Other			
RANEXA 12 HR TAB 1,000 MG, 500 MG	3		PA; MO
Nitrates			
DILATRATE-SR CAP 40 MG	2		MO
IMDUR 24 HR TAB (<i>isosorbide mononitrate</i>) 120 MG, 30 MG, 60 MG	NF	1	MO
ISMO TAB (<i>isosorbide mononitrate</i>) 20 MG	NF	1	MO
ISOCHRON TAB (<i>isosorbide dinitrate</i>) 40 MG		1	MO
ISODITRATE TAB (<i>isosorbide dinitrate</i>) 40 MG		1	MO
ISORDIL TAB 40 MG	2		MO
ISORDIL TITRADOSE TAB (<i>isosorbide dinitrate</i>) 5 MG	NF	1	MO
<i>isosorbide dinitrate sublingual tab 2.5 mg, 5 mg</i>		1	MO
<i>isosorbide dinitrate tab 10 mg, 20 mg, 30 mg</i>		1	MO
MINITRAN TRANSDERM 24 HR PATCH (<i>nitroglycerin</i>) 0.1 MG/HR, 0.2 MG/HR, 0.4 MG/HR, 0.6 MG/HR		1	MO
MONOKET TAB (<i>isosorbide mononitrate</i>) 10 MG, 20 MG	NF	1	MO
NITRO-BID TRANSDERMAL OINTMENT 2 %	2		MO
NITRO-DUR TRANSDERM 24 HR PATCH 0.3 MG/HR, 0.8 MG/HR	2		MO
NITRO-DUR TRANSDERM 24 HR PATCH (<i>nitroglycerin</i>) 0.1 MG/HR, 0.2 MG/HR, 0.4 MG/HR, 0.6 MG/HR	NF	1	MO
<i>nitroglycerin iv 50 mg/10 ml (5 mg/ml)</i>		4	

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
<i>nitroglycerin in d5w iv 100 mg/250 ml (0.4 mg/ml), 200 mg/500 ml (0.4 mg/ml), 25 mg/250 ml (0.1 mg/ml), 50 mg/250 ml (0.2 mg/ml), 50 mg/500 ml (0.1 mg/ml)</i>		4	
NITROLINGUAL SPRAY (<i>nitroglycerin</i>) 0.4 MG/DOSE	3	1	MO
NITROMIST SPRAY, AEROSOL 0.4 MG/DOSE	2		MO
NITROQUICK SUBLINGUAL TAB (<i>nitroglycerin</i>) 0.4 MG, 0.6 MG		1	MO
NITROSTAT SUBLINGUAL TAB (<i>nitroglycerin</i>) 0.3 MG, 0.4 MG, 0.6 MG	2	1	MO
ANTIANSXIETY AGENTS			
Antianxiety Agents - Misc.			
BUSPAR TAB (<i>bupropion</i>) 10 MG, 15 MG, 30 MG, 5 MG	NF	1	MO
<i>hydroxyzine im 25 mg/ml</i>		4	
<i>hydroxyzine im 50 mg/ml</i>		4	MO
<i>hydroxyzine syrup 10 mg/5 ml</i>		1	MO
<i>hydroxyzine tab 10 mg, 25 mg, 50 mg</i>		1	MO
<i>hydroxyzine pamoate cap 100 mg</i>		1	MO
INAPSINE INJECTION (<i>droperidol</i>) 2.5 MG/ML	4	4	MO
<i>meprobamate tab 200 mg, 400 mg</i>		1	MO
VANSPAR TAB (<i>bupropion</i>) 7.5 MG	NF	1	MO
VISTARIL CAP (<i>hydroxyzine pamoate</i>) 25 MG, 50 MG	NF	1	MO
ANTIARRHYTHMICS			
Antiarrhythmics Type I-A			
NORPACE CAP (<i>disopyramide</i>) 100 MG, 150 MG	NF	1	MO
NORPACE CR CAP 100 MG	2		MO
NORPACE CR CAP (<i>disopyramide</i>) 150 MG	NF	1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
<i>procainamide injection 100 mg/ml, 500 mg/ml</i>		4	
<i>quinidine er tab 324 mg</i>		1	MO
<i>quinidine injection 80 mg/ml</i>		4	
<i>quinidine sulfate er tab 300 mg</i>		1	MO
<i>quinidine tab 200 mg, 300 mg</i>		1	MO
Antiarrhythmics Type I-B			
<i>lidocaine (pf) iv syringe 100 mg/5 ml (2 %), 50 mg/5 ml (1 %)</i>		4	MO
<i>mexiletine cap 150 mg, 200 mg, 250 mg</i>		1	MO
XYLOCAINE (CARDIAC) IV (<i>lidocaine (PF)</i>) 20 MG/ML (2 %)	4	4	MO
Antiarrhythmics Type I-C			
RYTHMOL TAB (<i>propafenone</i>) 150 MG, 225 MG, 300 MG	NF	1	MO
RYTHMOL SR 12 HR CAP (<i>propafenone</i>) 225 MG, 325 MG, 425 MG	2	1	MO
TAMBOCOR TAB (<i>flecainide</i>) 100 MG, 150 MG, 50 MG	NF	1	MO
Antiarrhythmics Type III			
<i>amiodarone iv 50 mg/ml</i>		4	
<i>amiodarone iv syringe 150 mg/3 ml</i>		4	
CORDARONE TAB (<i>amiodarone</i>) 200 MG	NF	1	MO
MULTAQ TAB 400 MG	2		MO
PACERONE TAB (<i>amiodarone</i>) 200 MG		1	MO
PACERONE TAB (<i>amiodarone</i>) 400 MG	NF	1	MO
TIKOSYN CAP 125 MCG, 250 MCG, 500 MCG	2		
ANTIASTHMATIC AND BRONCHODILATOR AGENTS			
Anti-Inflammatory Agents			
INTAL NEB SOLUTION (<i>cromolyn</i>) 20 MG/2 ML	NF	1	MO; B/D

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
Antiasthmatic - Monoclonal Antibodies			
XOLAIR SUB-Q SOLN 150 MG	5		LA
Bronchodilators - Anticholinergics			
ATROVENT HFA AEROSOL INHALER 17 MCG/ACTUATION	2		MO
<i>ipratropium bromide soln for inhalation 0.02 %</i>		1	MO; B/D
SPIRIVA WITH HANDIHALER & INHALATION CAPS 18 MCG	2		MO
Leukotriene Modulators			
ACCOLATE TAB (<i>zafirlukast</i>) 10 MG, 20 MG	3	1	MO
SINGULAIR CHEWABLE TAB 4 MG, 5 MG	2		MO
SINGULAIR ORAL GRANULES IN PACKET 4 MG	2		MO
SINGULAIR TAB 10 MG	2		MO
ZYFLO CR 12 HR TAB 600 MG	3		MO
Steroid Inhalants			
ASMANEX TWISTHALER BREATH ACTIVATED 110 MCG (30 DOSES), 110 MCG (7 DOSES), 220 MCG (120 DOSES), 220 MCG (14 DOSES), 220 MCG (30 DOSES), 220 MCG (60 DOSES)	2		MO
AZMACORT AEROSOL INHALER 75 MCG/ACTUATION	3		
FLOVENT DISKUS FOR INHALATION 100 MCG/ACTUATION, 250 MCG/ACTUATION, 50 MCG/ACTUATION	2		MO
FLOVENT HFA AEROSOL INHALER 110 MCG/ACTUATION, 220 MCG/ACTUATION, 44 MCG/ACTUATION	2		MO
PULMICORT NEB SUSPENSION 1 MG/2 ML	2		MO; B/D
PULMICORT NEB SUSPENSION (<i>budesonide</i>) 0.25 MG/2 ML, 0.5 MG/2 ML	3	1	MO; B/D

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
PULMICORT FLEXHALER BREATH ACTIVATED 180 MCG/INHALATION, 90 MCG/INHALATION	3		MO
QVAR AEROSOL INHALER 40 MCG/ACTUATION, 80 MCG/ACTUATION	2		MO
Sympathomimetics			
ACCUNEB NEB SOLUTION (<i>albuterol sulfate</i>) 0.63 MG/3 ML, 1.25 MG/3 ML	NF	1	MO; B/D
ADVAIR DISKUS FOR INHALATION 100-50 MCG/DOSE, 250-50 MCG/DOSE, 500-50 MCG/DOSE	2		MO
ADVAIR HFA AEROSOL INHALER 115-21 MCG/ACTUATION, 230-21 MCG/ACTUATION, 45-21 MCG/ACTUATION	2		MO
<i>albuterol sulfate neb solution 2.5 mg /3 ml (0.083 %), 2.5 mg/0.5 ml, 5 mg/ml</i>		1	MO; B/D
<i>albuterol sulfate syrup 2 mg/5 ml</i>		1	MO
<i>albuterol sulfate tab 2 mg, 4 mg</i>		1	MO
COMBIVENT AEROSOL INHALER 18-103 MCG/ACTUATION	2		MO
DULERA INHALATION HFA AEROSOL INHALER 100-5 MCG/ACTUATION, 200-5 MCG/ACTUATION	3		MO
DUONEB NEB SOLUTION (<i>ipratropium-albuterol</i>) 0.5 MG-3 MG(2.5 MG BASE)/3 ML	3	1	MO; B/D
<i>epinephrine hcl syringe 0.1 mg/ml</i>		4	MO
FORADIL AEROLIZER INHALATION CAPS 12 MCG	2		MO
<i>metaproterenol syrup 10 mg/5 ml</i>		1	MO
<i>metaproterenol tab 10 mg, 20 mg</i>		1	MO
PROAIR HFA AEROSOL INHALER 90 MCG/ACTUATION	2		MO
PROVENTIL HFA AEROSOL INHALER 90 MCG/ACTUATION	2		MO

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SEREVENT DISKUS FOR INHALATION 50 MCG/DOSE	2		MO
SYMBICORT INHALATION HFA AEROSOL INHALER 160-4.5 MCG/ACTUATION, 80-4.5 MCG/ACTUATION	2		MO
<i>terbutaline sub-q 1 mg/ml</i>		4	MO
<i>terbutaline tab 2.5 mg, 5 mg</i>		1	MO
VENTOLIN HFA AEROSOL INHALER 90 MCG/ACTUATION	3		MO
VOSPIRE ER 12 HR TAB (<i>albuterol sulfate</i>) 4 MG, 8 MG	NF	1	MO
XOPENEX NEB SOLUTION 0.31 MG/3 ML, 0.63 MG/3 ML, 1.25 MG/3 ML	3		MO; B/D
XOPENEX CONCENTRATE NEB SOLUTION (<i>levalbuterol HCl</i>) 1.25 MG/0.5 ML	3	1	MO; B/D
XOPENEX HFA AEROSOL INHALER 45 MCG/ACTUATION	3		MO
Xanthines			
<i>aminophylline iv 250 mg/10 ml, 500 mg/20 ml</i>		4	MO
<i>aminophylline iv syringe 250 mg/10 ml</i>		4	MO
<i>aminophylline tab 100 mg, 200 mg</i>		1	MO
ELIXOPHYLLIN 80 MG/15 ML	3		MO
THEO-24 24 HR CAP 100 MG, 200 MG, 300 MG, 400 MG	2		MO
THEOCHRON 12 HR TAB (<i>theophylline</i>) 100 MG, 200 MG, 300 MG, 450 MG		1	MO
<i>theophylline in d5w iv 400 mg/500 ml, 800 mg/l</i>		4	
UNIPHYL TAB (<i>theophylline</i>) 400 MG, 600 MG	NF	1	MO
ANTICOAGULANTS			
Coumarin Anticoagulants			
COUMADIN IV SOLUTION 5 MG	4		MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
COUMADIN TAB (<i>warfarin</i>) 1 MG, 10 MG, 2 MG, 2.5 MG, 3 MG, 4 MG, 5 MG, 6 MG, 7.5 MG	3	1	MO
JANTOVEN TAB (<i>warfarin</i>) 1 MG, 10 MG, 2 MG, 2.5 MG, 3 MG, 4 MG, 5 MG, 6 MG, 7.5 MG		1	MO
Heparins And Heparinoid-Like Agents			
ARIXTRA SUB-Q SYRINGE (<i>fondaparinux</i>) 10 MG/0.8 ML, 2.5 MG/0.5 ML, 5 MG/0.4 ML, 7.5 MG/0.6 ML	4	4	MO
FRAGMIN FOR SUB-Q INJECTION 10,000 UNIT/ML	4		MO
FRAGMIN SUB-Q 25,000 UNIT/ML	4		MO
FRAGMIN SUB-Q SYRINGE 10,000 UNIT/ML, 12,500 UNIT/0.5 ML, 15,000 UNIT/0.6 ML, 18,000 UNIT/0.72 ML, 2,500 UNIT/0.2 ML, 5,000 UNIT/0.2 ML, 7,500 UNIT/0.3 ML	4		MO
<i>heparin (porcine) injection 1,000 unit/ml, 10,000 unit/ml, 20,000 unit/ml, 5,000 unit/ml</i>		4	MO; B/D
<i>heparin (porcine) injection, cartridge 5,000 unit/ml</i>		4	MO; B/D
<i>heparin (porcine) in d5w iv 10,000 unit/100 ml, 12,500 unit/250 ml, 20,000 unit/500 ml, 25,000 unit/250 ml, 25,000 unit/500 ml</i>		4	B/D
<i>heparin (porcine) in ns (pf) iv 1,000 unit/500 ml, 2,000 unit/1,000 ml</i>		4	B/D
<i>heparin (porcine)-0.45% nacl iv 12,500 unit/250 ml, 25,000 unit/250 ml, 25,000 unit/500 ml</i>		4	B/D
<i>heparin, porcine (pf) injection 1,000 unit/ml, 5,000 unit/0.5 ml</i>		4	MO; B/D
<i>heparin, porcine (pf) iv 10,000 unit/5 ml, 25,000 unit/10 ml</i>		4	B/D
<i>heparin, porcine (pf) syringe 5,000 unit/0.5 ml</i>		4	MO; B/D
INNOHEP SUB-Q 20,000 ANTI-XA UNIT/ML	4		MO
LOVENOX SUB-Q 300 MG/3 ML	4		MO

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LOVENOX SUB-Q SYRINGE (<i>enoxaparin</i>) 100 MG/ML, 120 MG/0.8 ML, 150 MG/ML, 30 MG/0.3 ML, 40 MG/0.4 ML, 60 MG/0.6 ML, 80 MG/0.8 ML	4	4	MO
Thrombin Inhibitors			
IPRIVASK SUB-Q SOLN 15 MG	5		
PRADAXA CAP 150 MG, 75 MG	3		MO
REFLUDAN IV SOLUTION 50 MG	5		MO
ANTICONVULSANTS			
Anticonvulsants - Misc.			
BANZEL ORAL SUSP 40 MG/ML	2		
BANZEL TAB 200 MG, 400 MG	2		MO
<i>carbamazepine oral susp 200 mg/10 ml</i>		1	MO
CARBATROL 12 HR CAP (<i>carbamazepine</i>) 100 MG, 200 MG, 300 MG	3	1	MO
EPITOL TAB (<i>carbamazepine</i>) 200 MG		1	MO
KEPPRA IV (<i>levetiracetam</i>) 500 MG/5 ML	4	4	MO
KEPPRA ORAL SOLN (<i>levetiracetam</i>) 100 MG/ML	3	1	MO
KEPPRA TAB (<i>levetiracetam</i>) 1,000 MG, 250 MG, 500 MG, 750 MG	3	1	MO
KEPPRA XR 24 HR TAB 500 MG, 750 MG	2		MO
LAMICTAL DISPERSIBLE TAB (<i>lamotrigine</i>) 25 MG, 5 MG	3	1	MO
LAMICTAL TAB (<i>lamotrigine</i>) 100 MG, 150 MG, 200 MG, 25 MG	3	1	MO
LAMICTAL ODT TAB 100 MG, 200 MG, 25 MG, 50 MG	3		MO
LAMICTAL ODT STARTER (BLUE) TAB, PACK 25 MG (21) -50 MG (7)	3		MO
LAMICTAL ODT STARTER (GREEN) TAB, PACK 50 MG (42) -100 MG (14)	3		MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
LAMICTAL ODT STARTER (ORANGE) TAB, PACK 25MG (14)-50 MG (14)-100MG (7)	3		MO
LAMICTAL STARTER (BLUE) KIT TABS IN A DOSE PACK (<i>lamotrigine</i>) 25 MG (35)	3	1	MO
LAMICTAL STARTER (GREEN) KIT TABLETS, DOSE PACK (<i>lamotrigine</i>) 25 MG (84) -100 MG (14)	3	1	MO
LAMICTAL STARTER (ORANGE) KIT TABLETS, DOSE PACK (<i>lamotrigine</i>) 25 MG (42) -100 MG (7)	3	1	MO
LAMICTAL XR 24 HR TAB 100 MG, 200 MG, 25 MG, 50 MG	3		MO
LAMICTAL XR 24 HR TAB 300 MG	3		
LAMICTAL XR STARTER (BLUE) TAB, DOSE PACK 25 MG (21) -50 MG (7)	3		
LAMICTAL XR STARTER (GREEN) TAB, PACK 50 MG(14)-100MG (14)-200 MG (7)	3		MO
LAMICTAL XR STARTER (ORANGE) TAB, PACK 25MG (14)-50 MG (14)-100MG (7)	3		MO
<i>levetiracetam oral soln 500 mg/5 ml (5 ml)</i>		1	MO
LYRICA CAP 100 MG, 150 MG, 200 MG, 225 MG, 25 MG, 300 MG, 50 MG, 75 MG	2		MO
MYSOLINE TAB (<i>primidone</i>) 250 MG, 50 MG	3	1	MO
NEURONTIN CAP (<i>gabapentin</i>) 100 MG, 300 MG, 400 MG	3	1	MO
NEURONTIN ORAL SOLN (<i>gabapentin</i>) 250 MG/5 ML	2	1	MO
NEURONTIN TAB (<i>gabapentin</i>) 600 MG, 800 MG	3	1	MO
TEGRETOL CHEWABLE TAB (<i>carbamazepine</i>) 100 MG	3	1	MO
TEGRETOL ORAL SUSP (<i>carbamazepine</i>) 100 MG/5 ML	3	1	MO
TEGRETOL TAB (<i>carbamazepine</i>) 200 MG	3	1	MO

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TEGRETOL XR 12 HR TAB 100 MG	2		MO
TEGRETOL XR 12 HR TAB (<i>carbamazepine</i>) 200 MG, 400 MG	3	1	MO
TOPAMAX SPRINKLE CAP (<i>topiramate</i>) 15 MG, 25 MG	3	1	MO
TOPAMAX TAB (<i>topiramate</i>) 100 MG, 200 MG, 25 MG, 50 MG	3	1	MO
TOPIRAGEN TAB (<i>topiramate</i>) 100 MG, 200 MG, 25 MG, 50 MG		1	MO
TRILEPTAL ORAL SUSP (<i>oxcarbazepine</i>) 300 MG/5 ML	3	1	MO
TRILEPTAL TAB (<i>oxcarbazepine</i>) 150 MG, 300 MG, 600 MG	3	1	MO
VIMPAT IV 200 MG/20 ML	4		
VIMPAT ORAL SOLN 10 MG/ML	2		MO
VIMPAT TAB 100 MG, 150 MG, 200 MG, 50 MG	2		MO
ZONEGRAN CAP (<i>zonisamide</i>) 100 MG, 25 MG, 50 MG	3	1	MO
Carbamates			
FELBATOL ORAL SUSP 600 MG/5 ML	3		MO
FELBATOL TAB 400 MG, 600 MG	2		MO
GABA Modulators			
GABITRIL TAB 12 MG, 16 MG, 2 MG, 4 MG	2		MO
SABRIL ORAL POWDER IN PACKET 500 MG	5		LA
SABRIL TAB 500 MG	5		LA
Hydantoins			
CEREBYX INJECTION (<i>fosphenytoin</i>) 100 MG PE/2 ML	4	4	
CEREBYX INJECTION (<i>fosphenytoin</i>) 500 MG PE/10 ML	4	4	MO
DILANTIN CAP 30 MG	2		MO

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DILANTIN EXTENDED CAP (<i>phenytoin sodium extended</i>) 100 MG	3	1	MO
DILANTIN INFATABS CHEWABLE 50 MG	2		MO
DILANTIN KAPSEAL CAP 30 MG	2		MO
DILANTIN-125 ORAL SUSP (<i>phenytoin</i>) 125 MG/5 ML	3	1	MO
PEGANONE TAB 250 MG	3		MO
PHENYTEK CAP (<i>phenytoin sodium extended</i>) 200 MG, 300 MG	3	1	MO
<i>phenytoin oral susp 100 mg/4 ml</i>		1	MO
<i>phenytoin sodium iv 50 mg/ml</i>		4	
<i>phenytoin sodium iv syringe 50 mg/ml</i>		4	
Succinimides			
CELONTIN CAP 300 MG	2		MO
ZARONTIN CAP (<i>ethosuximide</i>) 250 MG	3	1	MO
ZARONTIN SYRUP (<i>ethosuximide</i>) 250 MG/5 ML	3	1	MO
Valproic Acid			
DEPAON IV (<i>valproate sodium</i>) 500 MG/5 ML (100 MG/ML)	4	4	MO
DEPAKENE CAP (<i>valproic acid</i>) 250 MG	3	1	MO
DEPAKENE SYRUP (<i>valproic acid (as sodium salt)</i>) 250 MG/5 ML	3	1	MO
DEPAKOTE TAB (<i>divalproex</i>) 125 MG, 250 MG, 500 MG	3	1	MO
DEPAKOTE ER 24 HR TAB (<i>divalproex</i>) 250 MG, 500 MG	3	1	MO
DEPAKOTE SPRINKLES SPRINKLE CAP (<i>divalproex</i>) 125 MG	3	1	MO
STAVZOR CAP 125 MG, 250 MG, 500 MG	3		MO

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ANTIDEPRESSANTS			
Alpha-2 Receptor Antagonists (Tetracyclics)			
<i>mirtazapine tab 7.5 mg</i>		1	MO
REMERON TAB (<i>mirtazapine</i>) 15 MG, 30 MG, 45 MG	3	1	MO
REMERON SOLTAB (<i>mirtazapine</i>) 15 MG, 30 MG, 45 MG	3	1	MO
Antidepressants - Misc.			
APLENZIN 24 HR TAB 174 MG, 348 MG, 522 MG	3		MO
BUDEPRION SR TAB 150 MG		1	MO
BUDEPRION SR TAB (<i>bupropion HCl</i>) 100 MG		1	MO
BUDEPRION XL 24 HR TAB (<i>bupropion HCl</i>) 150 MG, 300 MG		1	MO
<i>maprotiline tab 25 mg, 50 mg, 75 mg</i>		1	MO
WELLBUTRIN TAB (<i>bupropion HCl</i>) 100 MG, 75 MG	3	1	MO
WELLBUTRIN SR TAB 150 MG	3		MO
WELLBUTRIN SR TAB (<i>bupropion HCl</i>) 100 MG, 200 MG	3	1	MO
WELLBUTRIN XL 24 HR TAB (<i>bupropion HCl</i>) 150 MG, 300 MG	3	1	MO
Modified Cyclics			
<i>nefazodone tab 100 mg, 150 mg, 200 mg, 250 mg, 50 mg</i>		1	MO
OLEPTRO ER 24 HR TAB 150 MG, 300 MG	3		MO
<i>trazodone tab 100 mg, 150 mg, 300 mg, 50 mg</i>		1	MO
VIIBRYD TAB 10 MG, 20 MG, 40 MG	3		
Monoamine Oxidase Inhibitors (MAOIs)			
EMSAM TRANSDERM 24 HR PATCH 12 MG/24 HR, 6 MG/24 HR, 9 MG/24 HR	3		MO
MARPLAN TAB 10 MG	2		MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
NARDIL TAB (<i>phenelzine</i>) 15 MG	2	1	MO
PARNATE TAB (<i>tranylcypromine</i>) 10 MG	3	1	MO
Selective Serotonin Reuptake Inhibitors (SSRIs)			
CELEXA ORAL SOLN (<i>citalopram</i>) 10 MG/5 ML	3	1	MO
CELEXA TAB (<i>citalopram</i>) 10 MG, 20 MG, 40 MG	3	1	MO
<i>fluoxetine tab 10 mg</i>		1	MO
<i>fluvoxamine tab 100 mg, 25 mg, 50 mg</i>		1	MO
LEXAPRO ORAL SOLN 5 MG/5 ML	2		MO
LEXAPRO TAB 10 MG, 20 MG, 5 MG	2		MO
LUVOX CR 24 HR CAP 100 MG, 150 MG	3		MO
PAXIL ORAL SUSP (<i>paroxetine HCl</i>) 10 MG/5 ML	3	1	MO
PAXIL TAB (<i>paroxetine HCl</i>) 10 MG, 20 MG, 30 MG, 40 MG	3	1	MO
PAXIL CR 24 HR TAB (<i>paroxetine HCl</i>) 12.5 MG, 25 MG, 37.5 MG	3	1	MO
PEXEVA TAB 10 MG, 20 MG, 30 MG, 40 MG	3		MO
PROZAC CAP (<i>fluoxetine</i>) 10 MG, 20 MG, 40 MG	3	1	MO
PROZAC ORAL SOLN (<i>fluoxetine</i>) 20 MG/5 ML	3	1	MO
PROZAC WEEKLY CAP (<i>fluoxetine</i>) 90 MG	3	1	MO
RAPIFLUX TAB (<i>fluoxetine</i>) 20 MG	3	1	MO
ZOLOFT ORAL CONCENTRATE (<i>sertraline</i>) 20 MG/ML	3	1	MO
ZOLOFT TAB (<i>sertraline</i>) 100 MG, 25 MG, 50 MG	3	1	MO
Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)			
CYMBALTA CAP 20 MG, 30 MG, 60 MG	2		MO
EFFEXOR TAB (<i>venlafaxine</i>) 100 MG, 25 MG, 37.5 MG, 50 MG, 75 MG	3	1	MO

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EFFEXOR XR 24 HR CAP (<i>venlafaxine</i>) 150 MG, 37.5 MG, 75 MG	2	1	MO
PRISTIQ 24 HR TAB 100 MG, 50 MG	3		MO
<i>venlafaxine er 24 hr tab 150 mg, 225 mg, 37.5 mg, 75 mg</i>		1	MO
Tricyclic Agents			
<i>amitriptyline tab 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>		1	MO
<i>amoxapine tab 100 mg, 150 mg, 25 mg, 50 mg</i>		1	MO
ANAFRANIL CAP (<i>clomipramine</i>) 25 MG, 50 MG, 75 MG	3	1	MO
<i>doxepin cap 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>		1	MO
<i>doxepin oral concentrate 10 mg/ml</i>		1	MO
NORPRAMIN TAB (<i>desipramine</i>) 10 MG, 100 MG, 150 MG, 25 MG, 50 MG, 75 MG	3	1	MO
PAMELOR CAP (<i>nortriptyline</i>) 10 MG, 25 MG, 50 MG, 75 MG	3	1	MO
PAMELOR ORAL SOLN (<i>nortriptyline</i>) 10 MG/5 ML	3	1	MO
SURMONTIL CAP 100 MG	3		MO
SURMONTIL CAP (<i>trimipramine</i>) 25 MG, 50 MG	3	1	MO
TOFRANIL TAB (<i>imipramine HCl</i>) 10 MG, 25 MG, 50 MG	3	1	MO
TOFRANIL-PM CAP (<i>imipramine pamoate</i>) 100 MG, 125 MG, 150 MG, 75 MG	3	1	MO
VIVACTIL TAB (<i>protriptyline</i>) 10 MG, 5 MG	3	1	MO
ANTIDIABETICS			
Alpha-Glucosidase Inhibitors			
GLYSET TAB 100 MG, 25 MG, 50 MG	3		MO
PRECOSE TAB (<i>acarbose</i>) 100 MG, 25 MG, 50 MG	NF	1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
Antidiabetic - Amylin Analogs			
SYMLIN SUB-Q 600 MCG/ML	4		
SYMLINPEN 120 SUB-Q PEN INJECTOR 2,700 MCG/2.7 ML	4		MO
SYMLINPEN 60 SUB-Q PEN INJECTOR 1,500 MCG/1.5 ML	4		MO
Antidiabetic Combinations			
ACTOPLUS MET TAB 15-500 MG, 15-850 MG	2		MO
ACTOPLUS MET XR 24 HR TAB 15-1,000 MG, 30-1,000 MG	2		MO
AVANDAMET TAB 2-1,000 MG, 2-500 MG, 4-1,000 MG, 4-500 MG	2		MO
AVANDARYL TAB 4-1 MG, 4-2 MG, 4-4 MG, 8-2 MG, 8-4 MG	2		MO
DUETACT TAB 30-2 MG, 30-4 MG	2		MO
GLUCOVANCE TAB (<i>glyburide-metformin</i>) 1.25-250 MG, 2.5-500 MG, 5-500 MG	NF	1	MO
JANUMET TAB 50-1,000 MG, 50-500 MG	2		MO
METAGLIP TAB (<i>glipizide-metformin</i>) 2.5-250 MG, 2.5-500 MG, 5-500 MG	NF	1	MO
Biguanides			
FORTAMET 24 HR TAB CTRL REL 1,000 MG, 500 MG	3		MO
GLUCOPHAGE TAB (<i>metformin</i>) 1,000 MG, 500 MG, 850 MG	NF	1	MO
GLUCOPHAGE XR 24 HR TAB (<i>metformin</i>) 500 MG, 750 MG	NF	1	MO
GLUMETZA 24 HR TAB 1,000 MG, 500 MG	3		MO
RIOMET ORAL SOLN 500 MG/5 ML	2		MO
Diabetic Other			
GLUCAGEN SOLUTION FOR INJECTION 1 MG	2		MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
GLUCAGEN DIAGNOSTIC KIT INJECTION 1 MG/ML	2		MO
GLUCAGEN HYPOKIT INJECTION 1 MG	2		MO
GLUCAGON EMERGENCY INJECTION KIT 1 MG		1	MO
PROGLYCEM ORAL SUSP 50 MG/ML	3		MO
Dipeptidyl Peptidase-4 (DPP-4) Inhibitors			
JANUVIA TAB 100 MG, 25 MG, 50 MG	2		MO
ONGLYZA TAB 2.5 MG, 5 MG	2		MO
Dopamine Receptor Agonists - Antidiabetic			
CYCLOSET TAB 0.8 MG	3		MO
Incretin Mimetic Agents (GLP-1 Receptor Agonists)			
BYETTA SUB-Q PEN INJECTOR 10 MCG/0.04 ML, 5 MCG/0.02 ML	4		PA; MO
VICTOZA SUB-Q PEN INJECTOR 0.6 MG/0.1 ML (18 MG/3 ML)	4		PA; MO
Insulin			
HUMALOG SUB-Q 100 UNIT/ML	2		MO
HUMALOG SUBQ CARTRIDGE 100 UNIT/ML	2		MO
HUMALOG KWIKPEN SUB-Q PEN 100 UNIT/ML	2		MO
HUMALOG MIX 50-50 SUB-Q PEN 100 UNIT/ML (50-50)	2		MO
HUMALOG MIX 50-50 SUSP, SUB-Q INJ 100 UNIT/ML (50-50)	2		MO
HUMALOG MIX 50-50 KWIKPEN SUB-Q PEN 100 UNIT/ML (50-50)	2		MO
HUMALOG MIX 75-25 SUB-Q PEN 100 UNIT/ML (75-25)	2		MO
HUMALOG MIX 75-25 SUSP, SUB-Q INJ 100 UNIT/ML (75-25)	2		MO
HUMALOG MIX 75-25 KWIKPEN SUB-Q PEN 100 UNIT/ML (75-25)	2		MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
HUMALOG PEN SUBQ 100 UNIT/ML	2		MO
HUMULIN 50/50 SUSP, SUB-Q INJ 100 UNIT/ML (50-50)	2		
HUMULIN 70/30 SUSP, SUB-Q INJ 100 UNIT/ML (70-30)	2		MO
HUMULIN 70/30 PEN SUBQ 100 UNIT/ML (70-30)	2		MO
HUMULIN N SUSP, SUB-Q INJ 100 UNIT/ML	2		MO
HUMULIN N PEN SUBQ 100 UNIT/ML (3 ML)	2		MO
HUMULIN R INJECTION 100 UNIT/ML	2		MO
HUMULIN R U-500 "CONCENTRATED" INSULIN INJECTION 500 UNIT/ML	2		MO
LANTUS SUB-Q 100 UNIT/ML	2		MO
LANTUS SUBQ CARTRIDGE 100 UNIT/ML	2		MO
LANTUS SOLOSTAR SUB-Q INSULIN PEN 100 UNIT/ML (3 ML)	2		MO
LEVEMIR SUB-Q 100 UNIT/ML	2		MO
LEVEMIR FLEXPEN SUB-Q INSULIN PEN 100 UNIT/ML	2		MO
NOVOLIN 70/30 SUSP, SUB-Q INJ 100 UNIT/ML (70-30)	3		MO
NOVOLIN 70/30 INNOLET SUB-Q PEN 100 UNIT/ML (70-30)	3		MO
NOVOLIN 70/30 PENFILL SUBQ CARTRIDGE 100 UNIT/ML (70-30)	3		MO
NOVOLIN N SUSP, SUB-Q INJ 100 UNIT/ML	3		MO
NOVOLIN N INNOLET SUB-Q PEN 100 UNIT/ML (3 ML)	3		MO
NOVOLIN N PENFILL SUBQ CARTRIDGE 100 UNIT/ML	3		MO
NOVOLIN R INJECTION 100 UNIT/ML	3		MO
NOVOLIN R INNOLET SUB-Q PEN 100 UNIT/ML (3 ML)	3		MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
NOVOLIN R PENFILL CARTRIDGE 100 UNIT/ML	3		MO
NOVOLOG SUB-Q 100 UNIT/ML	3		MO
NOVOLOG FLEXPEN SUB-Q 100 UNIT/ML	3		MO
NOVOLOG MIX 70-30 SUB-Q 100 UNIT/ML (70-30)	3		MO
NOVOLOG MIX 70-30 FLEXPEN SUB-Q 100 UNIT/ML (70-30)	3		MO
NOVOLOG PENFILL SUBQ CARTRIDGE 100 UNIT/ML	3		MO
Insulin Sensitizing Agents			
ACTOS TAB 15 MG, 30 MG, 45 MG	2		MO
AVANDIA TAB 2 MG, 4 MG, 8 MG	2		MO
Meglitinide Analogues			
PRANDIN TAB 0.5 MG, 1 MG, 2 MG	2		MO
STARLIX TAB (<i>nateglinide</i>) 120 MG, 60 MG	NF	1	MO
Sulfonylureas			
AMARYL TAB (<i>glimepiride</i>) 1 MG, 2 MG, 4 MG	NF	1	MO
<i>chlorpropamide tab 100 mg, 250 mg</i>		1	MO
DIABETA TAB (<i>glyburide</i>) 1.25 MG, 2.5 MG, 5 MG	NF	1	MO
GLUCOTROL TAB (<i>glipizide</i>) 10 MG, 5 MG	NF	1	MO
GLUCOTROL XL 24 HR TAB (<i>glipizide</i>) 10 MG, 2.5 MG, 5 MG	NF	1	MO
GLYNASE TAB (<i>glyburide micronized</i>) 1.5 MG, 3 MG, 6 MG	NF	1	MO
MICRONASE TAB (<i>glyburide</i>) 2.5 MG, 5 MG	NF	1	MO
<i>tolazamide tab 250 mg, 500 mg</i>		1	MO
<i>tolbutamide tab 500 mg</i>		1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
ANTIDIARRHEALS			
Antiperistaltic Agents			
LOMOTIL ORAL LIQUID (<i>diphenoxylate-atropine</i>) 2.5-0.025 MG/5 ML	NF	1	MO
LOMOTIL TAB (<i>diphenoxylate-atropine</i>) 2.5-0.025 MG	NF	1	MO
LONOX TAB (<i>diphenoxylate-atropine</i>) 2.5-0.025 MG		1	MO
<i>loperamide cap 2 mg</i>		1	MO
MOTOFEN TAB 1-0.025 MG	3		
Antidotes			
ANTIDOTES			
ANTIZOL IV (<i>fomepizole</i>) 1 GRAM/ML	4	4	
DESFERAL SOLUTION FOR INJECTION (<i>deferoxamine</i>) 2 GRAM, 500 MG	5	5	MO; B/D
Antidotes - Chelating Agents			
CHEMET CAP 100 MG	3		MO
EXJADE TAB 125 MG	3		LA
EXJADE TAB 250 MG, 500 MG	5		LA
Benzodiazepine Antagonists			
ROMAZICON IV (<i>flumazenil</i>) 0.1 MG/ML	4	4	
Opioid Antagonists			
DEPADE TAB (<i>naltrexone</i>) 50 MG		1	MO
<i>naloxone injection 0.4 mg/ml</i>		4	MO
<i>naloxone syringe 0.4 mg/ml</i>		4	MO
<i>naloxone syringe 1 mg/ml</i>		4	
REVIA TAB (<i>naltrexone</i>) 50 MG	NF	1	MO
VIVITROL IM SUSP 380 MG	5		
ANTIEMETICS			
5-HT3 Receptor Antagonists			
ALOXI IV 0.075 MG/1.5 ML	5		

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
ALOXI IV 0.25 MG/5 ML	4		MO
ANZEMET IV 100 MG/5 ML, 12.5 MG/0.625 ML, 20 MG/ML	4		MO
ANZEMET IV CARTRIDGE 12.5 MG/0.625 ML	4		MO
<i>granisetron (pf) iv 1 mg/ml (1 ml)</i>		4	MO
KYTRIL IV (<i>granisetron</i>) 1 MG/ML, 1 MG/ML (1 ML)	4	4	MO
KYTRIL IV (<i>granisetron (PF)</i>) 100 MCG/ML	4	4	MO
<i>ondansetron (pf) in sodium chloride(iso-osm) iv piggy back 32 mg/50 ml</i>		4	
<i>ondansetron hcl tab 24 mg</i>		1	MO; B/D
<i>ondansetron hcl (pf) syringe 4 mg/2 ml</i>		4	MO
ZOFRAN IV (<i>ondansetron HCl</i>) 2 MG/ML	4	4	MO
ZOFRAN ORAL SOLN (<i>ondansetron HCl</i>) 4 MG/5 ML	NF	1	MO; B/D
ZOFRAN TAB (<i>ondansetron HCl</i>) 4 MG, 8 MG	NF	1	MO; B/D
ZOFRAN INJECTION (<i>ondansetron HCl (PF)</i>) 4 MG/2 ML	4	4	MO
ZOFRAN (PF) IN DEXTROSE IV PIGGY BACK (<i>ondansetron (PF) in dextrose</i>) 32 MG/50 ML	4	4	MO
ZOFRAN ODT TAB, RAPID DISSOLVE (<i>ondansetron</i>) 4 MG, 8 MG	NF	1	MO; B/D
ZUPLENZ ORAL SOLUBLE FILM 4 MG, 8 MG	3		MO; B/D
Antiemetics - Anticholinergic			
ANTIVERT TAB (<i>meclizine</i>) 12.5 MG, 25 MG	NF	1	MO
<i>dimenhydrinate injection 50 mg/ml</i>		4	
TIGAN IM 100 MG/ML	4		MO
TIGAN CAP (<i>trimethobenzamide</i>) 300 MG	NF	1	MO
TRANSDERM-SCOP 72 HR TRANSDERM PATCH 1.5 MG	3		MO
<i>trimethobenzamide im syringe 100 mg/ml</i>		4	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
Antiemetics - Miscellaneous			
CESAMET CAP 1 MG	3		MO; B/D
MARINOL CAP (<i>dronabinol</i>) 10 MG, 2.5 MG, 5 MG	3	1	MO; B/D
Substance P/Neurokinin 1 (NK1) Receptor Antagonists			
EMEND CAP 125 MG, 80 MG	3		MO; B/D
EMEND CAP 40 MG	3		MO
EMEND IV SOLUTION 115 MG, 150 MG	4		MO
Antifungals			
Antifungal - Glucan Synthesis Inhibitors (Echinocandins)			
CANCIDAS IV SOLUTION 50 MG, 70 MG	5		
ERAXIS (ALCOHOL DILUENT) IV SOLUTION 100 MG, 50 MG	4		
ERAXIS(WATER DILUENT) IV SOLUTION 100 MG, 50 MG	4		
MYCAMINE IV SOLUTION 100 MG, 50 MG	5		
ANTIFUNGALS			
ABELCET IV 5 MG/ML	5		MO
AMBISOME IV SUSP 50 MG	5		MO
AMPHOTEC IV SUSP 50 MG	4		
<i>amphotericin b solution for injection 50 mg</i>		4	MO
ANCOBON CAP 250 MG	3		
ANCOBON CAP 500 MG	3		MO
GRIFULVIN V TAB 500 MG	2		MO
GRIFULVIN V ORAL SUSP (<i>griseofulvin microsize</i>) 125 MG/5 ML	NF	1	MO
GRIS-PEG TAB 125 MG, 250 MG	2		MO
LAMISIL ORAL GRANULES IN PACKET 125 MG, 187.5 MG	2		PA; MO
LAMISIL TAB (<i>terbinafine</i>) 250 MG	NF	1	PA; MO
<i>nystatin tab 500,000 unit</i>		1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
Imidazole-Related Antifungals			
DIFLUCAN ORAL SUSP (<i>fluconazole</i>) 10 MG/ML, 40 MG/ML	NF	1	MO
DIFLUCAN TAB (<i>fluconazole</i>) 100 MG, 150 MG, 200 MG, 50 MG	NF	1	MO
DIFLUCAN IN DEXTROSE (ISO-OSMOTIC) IV PIGGY BACK (<i>fluconazole in dextrose(iso-o)</i>) 400 MG/200 ML	4	4	
DIFLUCAN IN SODIUM CHLORIDE (ISO-OSMOTIC) IV PIGGY BACK (<i>fluconazole in NaCl (iso-osm)</i>) 200 MG/100 ML	4	4	
DIFLUCAN IN SODIUM CHLORIDE (ISO-OSMOTIC) IV PIGGY BACK (<i>fluconazole in NaCl (iso-osm)</i>) 400 MG/200 ML	4	4	MO
<i>ketoconazole tab 200 mg</i>		1	MO
NOXAFIL ORAL SUSP 200 MG/5 ML (40 MG/ML)	5		MO
SPORANOX CAP (<i>itraconazole</i>) 100 MG	3	1	MO
SPORANOX PULSEPAK CAP (<i>itraconazole</i>) 100 MG	3	1	MO
VFEND ORAL SUSP 200 MG/5 ML (40 MG/ML)	5		PA; MO
VFEND TAB (<i>voriconazole</i>) 200 MG, 50 MG	5	5	PA; MO
VFEND IV SOLN 200 MG	4		PA
ANTIHISTAMINES			
Antihistamines - Alkylamines			
<i>dexchlorpheniramine maleate syrup 2 mg/5 ml</i>		1	MO
Antihistamines - Ethanolamines			
ARBINOXA ORAL LIQUID (<i>carbinoxamine maleate</i>) 4 MG/5 ML		1	MO
ARBINOXA TAB (<i>carbinoxamine maleate</i>) 4 MG		1	MO
<i>clemastine syrup 0.67 mg/5 ml</i>		1	MO
<i>clemastine tab 2.68 mg</i>		1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
<i>diphenhydramine cap 25 mg, 50 mg</i>		1	MO
<i>diphenhydramine elixir 12.5 mg/5 ml</i>		1	
<i>diphenhydramine injection 50 mg/ml</i>		4	MO
<i>diphenhydramine syringe 50 mg/ml</i>		4	MO
PALGIC ORAL LIQUID (<i>carbinoxamine maleate</i>) 4 MG/5 ML	3	1	MO
PALGIC TAB (<i>carbinoxamine maleate</i>) 4 MG	3	1	MO
Antihistamines - Non-Sedating			
ALLEGRA ORAL SUSP 30 MG/5 ML	3		MO
ALLEGRA TAB (<i>fexofenadine</i>) 180 MG, 60 MG	NF	1	MO
<i>fexofenadine tab 30 mg</i>		1	MO
XYZAL ORAL SOLN 2.5 MG/5 ML	2		MO
XYZAL TAB (<i>levocetirizine</i>) 5 MG	2	1	MO
ZYRTEC ORAL SOLN (<i>cetirizine</i>) 1 MG/ML	3	1	MO
Antihistamines - Phenothiazines			
PHENADOZ RECTAL SUPPOSITORY (<i>promethazine</i>) 12.5 MG, 25 MG		1	MO
PHENERGAN INJECTION (<i>promethazine</i>) 25 MG/ML, 50 MG/ML	4	4	MO
<i>promethazine syringe 25 mg/ml</i>		4	MO
<i>promethazine syrup 6.25 mg/5 ml</i>		1	MO
<i>promethazine tab 12.5 mg, 25 mg, 50 mg</i>		1	MO
PROMETHEGAN RECTAL SUPPOSITORY (<i>promethazine</i>) 12.5 MG, 25 MG, 50 MG		1	MO
Antihistamines - Piperidines			
<i>cyproheptadine syrup 2 mg/5 ml</i>		1	MO
<i>cyproheptadine tab 4 mg</i>		1	MO
ANTHYPERLIPIDEMICS			
Antihyperlipidemics - Combinations			
VYTORIN 10-10 TAB 10-10 MG	2		MO
VYTORIN 10-20 TAB 10-20 MG	2		MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
VYTORIN 10-40 TAB 10-40 MG	2		MO
VYTORIN 10-80 TAB 10-80 MG	2		PA; MO
Antihyperlipidemics - Misc.			
LOVAZA CAP 1 GRAM	2		MO
Bile Acid Sequestrants			
CHOLESTYRAMINE LIGHT ORAL POWDER 4 GRAM		1	MO
CHOLESTYRAMINE LIGHT PACKET 4 GRAM		1	MO
COLESTID ORAL GRANULES (<i>colestipol</i>) 5 GRAM	NF	1	MO
COLESTID ORAL PACKET (<i>colestipol</i>) 5 GRAM	NF	1	MO
COLESTID TAB (<i>colestipol</i>) 1 GRAM	NF	1	MO
COLESTID FLAVORED PACKET 7.5 G	NF		MO
COLESTID FLAVORED ORAL GRANULES (<i>colestipol</i>) 5 GRAM	NF	1	MO
PREVALITE ORAL PACKET 4 GRAM		1	MO
PREVALITE ORAL POWDER 4 GRAM		1	MO
QUESTRAN ORAL POWDER (<i>cholestyramine-sucrose</i>) 4 GRAM	NF	1	MO
QUESTRAN PACKET (<i>cholestyramine-sucrose</i>) 4 GRAM	3	1	MO
QUESTRAN LIGHT ORAL POWDER 4 GRAM	NF		MO
QUESTRAN LIGHT PACKET 4 GRAM	3		MO
Fibric Acid Derivatives			
ANTARA CAP 130 MG, 43 MG	2		MO
FENOGLIDE TAB 120 MG, 40 MG	3		MO
FIBRICOR TAB (<i>fenofibric acid</i>) 105 MG, 35 MG	3	1	MO
LIPOFEN CAP 150 MG, 50 MG	3		MO
LOFIBRA TAB (<i>fenofibrate</i>) 160 MG	3	1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
LOFIBRA TAB (<i>fenofibrate</i>) 54 MG	NF	1	MO
LOFIBRA CAP (<i>fenofibrate micronized</i>) 134 MG, 200 MG, 67 MG	NF	1	MO
LOPID TAB (<i>gemfibrozil</i>) 600 MG	NF	1	MO
TRICOR TAB 145 MG, 48 MG	2		MO
TRIGLIDE TAB 160 MG, 50 MG	3		MO
TRILIPIX CAP 135 MG, 45 MG	2		MO
HMG CoA Reductase Inhibitors			
CRESTOR TAB 10 MG, 20 MG, 40 MG, 5 MG	2		MO
LESCOL CAP 20 MG, 40 MG	3		MO
LESCOL XL 24 HR TAB 80 MG	3		MO
LIVALO TAB 1 MG, 2 MG, 4 MG	3		MO
<i>lovastatin tab 10 mg</i>		1	MO
MEVACOR TAB (<i>lovastatin</i>) 20 MG, 40 MG	NF	1	MO
PRAVACHOL TAB (<i>pravastatin</i>) 10 MG, 20 MG, 40 MG, 80 MG	NF	1	MO
SIMCOR 24 HR TAB 1,000-20 MG, 1,000-40 MG, 500-20 MG, 500-40 MG, 750-20 MG	2		MO
ZOCOR TAB (<i>simvastatin</i>) 10 MG, 20 MG, 40 MG, 5 MG	NF	1	MO
ZOCOR TAB (<i>simvastatin</i>) 80 MG	NF	1	PA; MO
Intestinal Cholesterol Absorption Inhibitors			
ZETIA TAB 10 MG	2		MO
Nicotinic Acid Derivatives			
NIASPAN EXTENDED-RELEASE 24 HR TAB 1,000 MG, 500 MG, 750 MG	2		MO
ANTIHYPERTENSIVES			
ACE Inhibitors			
ACCUPRIL TAB (<i>quinapril</i>) 10 MG, 20 MG, 40 MG, 5 MG	NF	1	MO
ACEON TAB (<i>perindopril erbumine</i>) 2 MG, 4 MG, 8 MG	3	1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
ALTACE CAP (<i>ramipril</i>) 1.25 MG, 10 MG, 2.5 MG, 5 MG	NF	1	MO
CAPOTEN TAB (<i>captopril</i>) 100 MG, 12.5 MG, 25 MG, 50 MG	NF	1	MO
LOTENSIN TAB (<i>benazepril</i>) 10 MG, 20 MG, 40 MG, 5 MG	NF	1	MO
MAVIK TAB (<i>trandolapril</i>) 1 MG, 2 MG, 4 MG	3	1	MO
MONOPRIL TAB (<i>fosinopril</i>) 10 MG, 20 MG, 40 MG	NF	1	MO
PRINIVIL TAB (<i>lisinopril</i>) 10 MG, 20 MG, 5 MG	NF	1	MO
UNIVASC TAB (<i>moexipril</i>) 15 MG, 7.5 MG	NF	1	MO
VASOTEC TAB (<i>enalapril maleate</i>) 10 MG, 2.5 MG, 20 MG, 5 MG	NF	1	MO
ZESTRIL TAB (<i>lisinopril</i>) 10 MG, 2.5 MG, 20 MG, 30 MG, 40 MG, 5 MG	NF	1	MO
Agents for Pheochromocytoma			
DEMSER CAP 250 MG	5		MO
DIBENZYLINE CAP 10 MG	3		MO
<i>phentolamine solution for injection 5 mg</i>		4	MO
Angiotensin II Receptor Antagonists			
ATACAND TAB 16 MG, 32 MG, 4 MG, 8 MG	3		MO
AVAPRO TAB 150 MG, 300 MG, 75 MG	3		MO
BENICAR TAB 20 MG, 40 MG, 5 MG	2		MO
COZAAR TAB (<i>losartan</i>) 100 MG, 25 MG, 50 MG	3	1	MO
DIOVAN TAB 160 MG, 320 MG, 40 MG, 80 MG	2		MO
MICARDIS TAB 20 MG, 40 MG, 80 MG	3		MO
TEVETEN TAB 400 MG, 600 MG	3		MO
Antiadrenergic Antihypertensives			
CARDURA TAB (<i>doxazosin</i>) 1 MG, 2 MG, 4 MG, 8 MG	NF	1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
CATAPRES TAB (<i>clonidine</i>) 0.1 MG, 0.2 MG, 0.3 MG	NF	1	MO
CATAPRES-TTS-1 TRANSDERM PATCH (<i>clonidine</i>) 0.1 MG/24 HR	3	1	MO
CATAPRES-TTS-2 TRANSDERM PATCH (<i>clonidine</i>) 0.2 MG/24 HR	3	1	MO
CATAPRES-TTS-3 TRANSDERM PATCH (<i>clonidine</i>) 0.3 MG/24 HR	3	1	MO
<i>guanabenz tab 4 mg, 8 mg</i>		1	MO
HYTRIN CAP (<i>terazosin</i>) 2 MG	NF	1	MO
<i>methyldopa tab 250 mg, 500 mg</i>		1	MO
<i>methyldopate iv 250 mg/5 ml</i>		4	
MINIPRESS CAP (<i>prazosin</i>) 1 MG, 2 MG, 5 MG	NF	1	MO
NEXICLON XR ORAL 24 HR SUSP 0.09 MG/ML	NF		
<i>reserpine tab 0.1 mg, 0.25 mg</i>		1	MO
TENEX TAB (<i>guanfacine</i>) 1 MG, 2 MG	NF	1	MO
<i>terazosin cap 1 mg, 10 mg, 5 mg</i>		1	MO
Antihypertensive Combinations			
ACCURETIC TAB (<i>quinapril-hydrochlorothiazide</i>) 10-12.5 MG, 20-12.5 MG, 20-25 MG	NF	1	MO
AMTURNIDE TAB 150-5-12.5 MG, 300-10-12.5 MG, 300-10-25 MG, 300-5-12.5 MG, 300-5-25 MG	2		MO
ATACAND HCT TAB 16-12.5 MG, 32-12.5 MG, 32-25 MG	3		MO
AVALIDE TAB 150-12.5 MG, 300-12.5 MG, 300-25 MG	3		MO
AZOR TAB 10-20 MG, 10-40 MG, 5-20 MG, 5-40 MG	2		MO
BENICAR HCT TAB 20-12.5 MG, 40-12.5 MG, 40-25 MG	2		MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
CAPOZIDE TAB (<i>captopril-hydrochlorothiazide</i>) 25-15 MG, 25-25 MG, 50-15 MG, 50-25 MG	NF	1	MO
CLOPRES TAB 0.1-15 MG, 0.2-15 MG		1	MO
CLOPRES TAB 0.3-15 MG		1	
DIOVAN HCT TAB 160-12.5 MG, 160-25 MG, 320-12.5 MG, 320-25 MG, 80-12.5 MG	2		MO
<i>enalapril-hydrochlorothiazide tab 5-12.5 mg</i>		1	MO
EXFORGE TAB 10-160 MG, 10-320 MG, 5-160 MG, 5-320 MG	2		MO
EXFORGE HCT TAB 10-160-12.5 MG, 10-160-25 MG, 10-320-25 MG, 5-160-12.5 MG, 5-160-25 MG	2		MO
HYZAAR TAB (<i>losartan-hydrochlorothiazide</i>) 100-12.5 MG, 100-25 MG, 50-12.5 MG	3	1	MO
LOPRESSOR HCT TAB (<i>metoprolol-hydrochlorothiazide</i>) 100-25 MG, 100-50 MG, 50-25 MG	NF	1	MO
LOTENSIN HCT TAB (<i>benazepril-hydrochlorothiazide</i>) 10-12.5 MG, 20-12.5 MG, 20-25 MG, 5-6.25 MG	NF	1	MO
LOTREL CAP (<i>amlodipine-benazepril</i>) 10-20 MG, 10-40 MG, 2.5-10 MG, 5-10 MG, 5-20 MG, 5-40 MG	3	1	MO
<i>methyldopa-hydrochlorothiazide tab 250-15 mg, 250-25 mg</i>		1	MO
MICARDIS HCT TAB 40-12.5 MG, 80-12.5 MG, 80-25 MG	3		MO
MONOPRIL HCT TAB (<i>fosinopril-hydrochlorothiazide</i>) 10-12.5 MG, 20-12.5 MG	NF	1	MO
PRINZIDE TAB (<i>lisinopril-hydrochlorothiazide</i>) 10-12.5 MG, 20-12.5 MG	NF	1	MO
<i>propranolol-hydrochlorothiazide tab 40-25 mg, 80-25 mg</i>		1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
QUINARETIC TAB (<i>quinapril-hydrochlorothiazide</i>) 10-12.5 MG, 20-12.5 MG, 20-25 MG		1	MO
TARKA 24 HR TAB (<i>trandolapril-verapamil</i>) 1-240 MG, 2-180 MG, 2-240 MG, 4-240 MG	3	1	MO
TEKTRUNA HCT TAB 150-12.5 MG, 150-25 MG, 300-12.5 MG, 300-25 MG	2		MO
TENORETIC 100 TAB (<i>atenolol-chlorthalidone</i>) 100-25 MG	NF	1	MO
TENORETIC 50 TAB (<i>atenolol-chlorthalidone</i>) 50-25 MG	NF	1	MO
TEVETEN HCT TAB 600-12.5 MG, 600-25 MG	3		MO
TRIBENZOR TAB 20-5-12.5 MG, 40-10-12.5 MG, 40-10-25 MG, 40-5-12.5 MG, 40-5-25 MG	2		MO
UNIRETIC TAB (<i>moexipril-hydrochlorothiazide</i>) 15-12.5 MG, 15-25 MG, 7.5-12.5 MG	NF	1	MO
VALTURNA TAB 150-160 MG, 300-320 MG	2		MO
VASERETIC TAB (<i>enalapril-hydrochlorothiazide</i>) 10-25 MG	NF	1	MO
ZESTORETIC TAB (<i>lisinopril-hydrochlorothiazide</i>) 10-12.5 MG, 20-12.5 MG, 20-25 MG	NF	1	MO
ZIAC TAB (<i>bisoprolol-hydrochlorothiazide</i>) 10-6.25 MG, 2.5-6.25 MG, 5-6.25 MG	NF	1	MO
Direct Renin Inhibitors			
TEKTRUNA TAB 150 MG, 300 MG	2		MO
Vasodilators			
<i>hydralazine injection 20 mg/ml</i>		4	
<i>hydralazine tab 10 mg, 100 mg, 25 mg, 50 mg</i>		1	MO
<i>minoxidil tab 10 mg, 2.5 mg</i>		1	MO
ANTIMALARIALS			
Antimalarial Combinations			
COARTEM TAB 20-120 MG	2		MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
FANSIDAR TAB 500-25 MG	2		MO
MALARONE TAB 250-100 MG, 62.5-25 MG	3		MO
ANTIMALARIALS			
ARALEN TAB (<i>chloroquine phosphate</i>) 500 MG	3	1	MO
<i>chloroquine tab 250 mg</i>		1	MO
DARAPRIM TAB 25 MG	2		MO
LARIAM TAB (<i>mefloquine</i>) 250 MG	NF	1	MO
PLAQUENIL TAB (<i>hydroxychloroquine</i>) 200 MG	NF	1	MO
<i>primaquine tab 26.3 mg</i>		1	MO
QUALAQUIN CAP 324 MG	2		PA; MO
Antimyasthenic Agents			
Antimyasthenic Agents			
<i>guanidine tab 125 mg</i>		1	
MESTINON SYRUP 60 MG/5 ML	2		MO
MESTINON TAB (<i>pyridostigmine bromide</i>) 60 MG	NF	1	MO
MESTINON TIMESPAN TAB 180 MG	2		MO
MYTELASE TAB 10 MG	2		MO
REGONOL INJECTION 5 MG/ML	4		
ANTIMYCOBACTERIAL AGENTS			
Antimycobacterial Agents			
CAPASTAT SOLUTION FOR INJECTION 1 GRAM	4		
<i>isoniazid injection 100 mg/ml</i>		4	
<i>isoniazid syrup 50 mg/5 ml</i>		1	MO
<i>isoniazid tab 100 mg, 300 mg</i>		1	MO
MYAMBUTOL TAB (<i>ethambutol</i>) 100 MG, 400 MG	NF	1	MO
MYCOBUTIN CAP 150 MG	2		MO
PASER ORAL PACKET 4 GRAM	3		MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
PRIFTIN TAB 150 MG	3		MO
<i>pyrazinamide tab 500 mg</i>		1	MO
RIFADIN CAP (<i>rifampin</i>) 150 MG, 300 MG	NF	1	MO
RIFADIN IV SOLUTION (<i>rifampin</i>) 600 MG	4	4	MO
SEROMYCIN CAP (<i>cycloserine</i>) 250 MG	3	1	MO
TRECTOR TAB 250 MG	3		MO
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES			
Alkylating Agents			
ALKERAN IV SOLUTION (<i>melphalan</i>) 50 MG	4	4	
BICNU IV SOLUTION 100 MG	4		
BUSULFEX IV 60 MG/10 ML	4		
<i>carboplatin iv 10 mg/ml</i>		1	
<i>carboplatin iv powder for solution 150 mg</i>		4	
CEENU CAP 10 MG, 100 MG, 40 MG	2		MO
CEENU CAP 10-40-100 MG	2		
<i>cisplatin iv 1 mg/ml</i>		4	
<i>cyclophosphamide tab 25 mg, 50 mg</i>		1	MO; B/D
CYTOXAN IV SOLUTION (<i>cyclophosphamide</i>) 1 GRAM, 2 GRAM, 500 MG	4	4	
ELOXATIN SOLN 200 MG/40 ML	5		
ELOXATIN SOLN (<i>oxaliplatin</i>) 100 MG/20 ML, 50 MG/10 ML (5 MG/ML)	5	5	
HEXALEN CAP 50 MG	5		MO
IFEX IV SOLUTION (<i>ifosfamide</i>) 1 GRAM, 3 GRAM	4	4	
<i>ifosfamide iv soln 1 gram/20 ml, 3 gram/60 ml</i>		4	
LEUKERAN TAB 2 MG	2		MO
MUSTARGEN SOLUTION FOR INJECTION 10 MG	4		
<i>oxaliplatin iv solution 100 mg, 50 mg</i>		4	
TEMODAR IV SOLUTION 100 MG	5		

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
<i>thiotepa solution for injection 15 mg</i>		4	
TREANDA IV SOLUTION 100 MG, 25 MG	5		
ZANOSAR IV SOLUTION 1 GRAM	4		
Antimetabolites			
ADRUCIL IV (<i>fluorouracil</i>) 2.5 GRAM/50 ML, 5 GRAM/100 ML, 500 MG/10 ML	4	4	
ALIMTA IV SOLUTION 100 MG, 500 MG	5		
ARRANON IV 250 MG/50 ML	5		
CLOLAR IV 20 MG/20 ML	4		
<i>cytarabine injection 20 mg/ml</i>		4	
<i>cytarabine (pf) injection 2 gram/20 ml (100 mg/ml)</i>		4	
<i>cytarabine (pf) solution for injection 1 gram, 100 mg, 2 gram, 500 mg</i>		4	
DACOGEN IV SOLUTION 50 MG	5		
FLUDARA IV SOLUTION (<i>fludarabine</i>) 50 MG	4	1	
<i>fludarabine iv 50 mg/2 ml</i>		4	
<i>fluorouracil iv 1 gram/20 ml</i>		4	
<i>gemcitabine iv solution 2 gram</i>		5	
GEMZAR IV SOLUTION (<i>gemcitabine</i>) 1 GRAM, 200 MG	5	5	
LEUSTATIN IV (<i>cladribine</i>) 10 MG/10 ML	4	4	
<i>methotrexate sodium injection 25 mg/ml</i>		4	MO
<i>methotrexate sodium tab 2.5 mg</i>		1	MO
<i>methotrexate sodium (pf) injection 25 mg/ml</i>		4	MO
<i>methotrexate sodium (pf) solution for injection 1 gram</i>		4	MO
PURINETHOL TAB (<i>mercaptopurine</i>) 50 MG	3	1	MO
TABLOID TAB 40 MG	2		MO
TREXALL TAB 10 MG, 15 MG, 5 MG, 7.5 MG	3		MO
VIDAZA SUB-Q SOLN 100 MG	5		

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
Antineoplastic - Angiogenesis Inhibitors			
AVASTIN IV 25 MG/ML	5		
Antineoplastic - Antibodies			
ARZERRA IV 1,000 MG/50 ML, 100 MG/5 ML	5		
CAMPATH IV 30 MG/ML	5		
ERBITUX IV 100 MG/50 ML, 200 MG/100 ML	5		
HERCEPTIN IV SOLUTION 440 MG	5		
MYLOTARG IV SOLUTION 5 MG	5		
RITUXAN CONCENTRATE, IV 10 MG/ML	5		
VECTIBIX IV 100 MG/5 ML (20 MG/ML), 200 MG/10 ML (20 MG/ML), 400 MG/20 ML (20 MG/ML)	5		
YERVOY IV 200 MG/40 ML (5 MG/ML), 50 MG/10 ML (5 MG/ML)	5		
Antineoplastic - Hormonal Agents			
ARIMIDEX TAB (<i>anastrozole</i>) 1 MG	2	1	MO
ARIMIDEX 30-DAY PACK TAB (<i>anastrozole</i>) 1 MG	2	1	MO
AROMASIN TAB (<i>exemestane</i>) 25 MG	3	1	MO
CASODEX TAB (<i>bicalutamide</i>) 50 MG	3	1	MO
DEPO-PROVERA IM 400 MG/ML	4		MO
ELIGARD SUB-Q SYRINGE 22.5 MG, 30 MG, 45 MG, 7.5 MG	4		
EMCYT CAP 140 MG	3		MO
FARESTON TAB 60 MG	2		MO
FASLODEX IM SYRINGE 125 MG/2.5, 250 MG/5 ML	5		
FEMARA TAB (<i>letrozole</i>) 2.5 MG	3	1	MO
FIRMAGON SUB-Q SOLN 120 MG	5		
FIRMAGON SUB-Q SOLN 80 MG	4		
<i>flutamide cap 125 mg</i>		1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
LUPRON SUB-Q 1 MG/0.2 ML	4		
LUPRON SUB-Q KIT (<i>leuprolide</i>) 1 MG/0.2 ML	4	4	
LUPRON DEPOT IM KIT 3.75 MG	4		
LUPRON DEPOT IM SYRINGE 7.5 MG	5		
LUPRON DEPOT (3 MONTH) IM KIT 11.25 MG	4		
LUPRON DEPOT (3 MONTH) IM SYRINGE KIT 22.5 MG	5		
LUPRON DEPOT (4 MONTH) IM SYRINGE KIT 30 MG	5		
LUPRON DEPOT (6 MONTH) IM SYRINGE KIT 45 MG	5		
LYSODREN TAB 500 MG	2		MO
MEGACE ORAL ORAL SUSP (<i>megestrol</i>) 400 MG/10 ML (40 MG/ML)	3	1	MO
<i>megestrol tab 20 mg, 40 mg</i>		1	MO
NILANDRON TAB 150 MG	3		MO
SOLTAMOX ORAL SOLN 10 MG/5 ML	3		
<i>tamoxifen tab 10 mg, 20 mg</i>		1	MO
TRELSTAR IM SUSP 22.5 MG	5		
TRELSTAR IM SYRINGE 11.25 MG/2 ML, 3.75 MG/2 ML	4		
TRELSTAR IM SYRINGE 22.5 MG/2 ML	5		
TRELSTAR DEPOT IM SUSP 3.75 MG	4		
TRELSTAR LA IM SUSP 11.25 MG	4		
VANTAS IMPLANT KIT 50 MG	4		
ZOLADEX SUBQ IMPLANT 10.8 MG	5		
ZOLADEX SUBQ IMPLANT 3.6 MG	4		
ZYTIGA TAB 250 MG	5		
Antineoplastic Antibiotics			
ADRIAMYCIN IV SOLUTION 20 MG	4		

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
ADRIAMYCIN IV (<i>doxorubicin</i>) 10 MG/5 ML, 20 MG/10 ML, 50 MG/25 ML	4	4	
ADRIAMYCIN IV SOLUTION (<i>doxorubicin</i>) 10 MG, 50 MG	4	4	
ADRIAMYCIN PFS IV (<i>doxorubicin</i>) 2 MG/ML	4	4	
<i>bleomycin solution for injection 15 unit, 30 unit</i>		4	
CERUBIDINE IV SOLUTION (<i>daunorubicin</i>) 20 MG	4	4	
COSMEGEN IV SOLUTION 0.5 MG	4		
<i>daunorubicin iv inj 5 mg/ml</i>		4	
DAUNOXOME IV 2 MG/ML	4		
DOXIL IV 2 MG/ML	5		
ELLEENCE IV (<i>epirubicin</i>) 200 MG/100 ML, 50 MG/25 ML	4	4	
<i>epirubicin iv 10 mg/5 ml, 150 mg/75 ml</i>		4	
<i>epirubicin iv solution 50 mg</i>		4	
IDAMYCIN PFS IV (<i>idarubicin</i>) 1 MG/ML	4	4	
<i>mitomycin iv solution 20 mg, 40 mg, 5 mg</i>		4	
NOVANTRONE CONCENTRATE, IV (<i>mitoxantrone</i>) 2 MG/ML	4	4	
Antineoplastic Combinations			
<i>ifosfamide-mesna iv kit 1-1 gram, 3,000-1,000 mg</i>		4	
Antineoplastic Enzyme Inhibitors			
AFINITOR TAB 10 MG, 2.5 MG, 5 MG	5		
CAPRELSA TAB (<i>vandetanib</i>) 100 MG, 300 MG	5	5	
GLEEVEC TAB 100 MG, 400 MG	5		
IRESSA TAB 250 MG	5		LA
ISTODAX IV SOLUTION 10 MG/2 ML	5		
NEXAVAR TAB 200 MG	5		LA
SPRYCEL TAB 100 MG, 140 MG, 20 MG, 50 MG, 70 MG, 80 MG	5		

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
SUTENT CAP 12.5 MG, 25 MG, 50 MG	5		
TARCEVA TAB 100 MG, 150 MG, 25 MG	5		
TASIGNA CAP 150 MG, 200 MG	5		
TORISEL IV SOLUTION 30 MG/3 ML (10 MG/ML) (FINAL)	5		
TYKERB TAB 250 MG	5		
VELCADE IV SOLUTION 3.5 MG	5		
VOTRIENT TAB 200 MG	5		
ZOLINZA CAP 100 MG	5		
Antineoplastic Enzymes			
ELSPAR SOLUTION FOR INJECTION 10,000 UNIT	4		
ONCASPAR INJECTION 750 UNIT/ML	4		
Antineoplastics Misc.			
ACTIMMUNE SUB-Q 2 MILLION UNIT/0.5 ML	5		LA
<i>bcg vaccine, live (pf) percutaneous suspension 50 mg</i>		4	
<i>dacarbazine iv solution 100 mg, 200 mg</i>		4	
HYDREA CAP (<i>hydroxyurea</i>) 500 MG	3	1	MO
INTRON A INJECTION 10 MILLION UNIT/ML	5		
INTRON A INJECTION 6 MILLION UNIT/ML	4		
INTRON A SOLUTION FOR INJECTION 10 MILLION UNIT (1 ML)	4		
INTRON A SOLUTION FOR INJECTION 18 MILLION UNIT (1 ML), 50 MILLION UNIT (1 ML)	5		
INTRON A SUBQ PEN KIT 10 MILLION UNIT/0.2 ML, 5 MILLION UNIT/0.2 ML	5		
INTRON A SUBQ PEN KIT 3 MILLION UNIT /0.2 ML-6 DOSES	4		
MATULANE CAP 50 MG	5		MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
NIPENT IV SOLUTION (<i>pentostatin</i>) 10 MG	4	4	
ONTAK IV 150 MCG/ML	4		
PHOTOFRIN IV SOLUTION 75 MG	4		
PROLEUKIN IV SOLUTION 22 MILLION UNIT	5		
SYLATRON SUB-Q KIT 296 MCG, 444 MCG, 888 MCG	5		
SYLATRON 4-PACK SUB-Q KIT 296 MCG, 444 MCG, 888 MCG	5		
TARGRETIN CAP 75 MG	5		
THERACYS INTRAVESICAL SUSP 81 MG	4		
TICE BCG INTRAVESICAL SUSP 50 MG	4		
TRISENOX IV 10 MG/10 ML	4		
UVADEX INJECTION 20 MCG/ML	4		
VESANOID CAP (<i>tretinoin (chemotherapy)</i>) 10 MG	5	5	MO
Chemotherapy Adjuncts			
ELITEK IV SOLUTION 1.5 MG, 7.5 MG	5		
KEPIVANCE SOLUTION 6.25 MG	5		
Chemotherapy Rescue/Antidote Agents			
CALCIUM FOLINATE INJECTION 10 MG/ML	4		
ETHYOL IV SOLUTION (<i>amifostine crystalline</i>) 500 MG	4	1	
<i>leucovorin calcium injection 500 mg/50 ml</i>		4	
<i>leucovorin calcium solution for injection 100 mg, 200 mg, 350 mg, 50 mg, 500 mg</i>		4	
<i>leucovorin calcium tab 10 mg, 15 mg, 25 mg, 5 mg</i>		1	MO
MESNEX TAB 400 MG	2		MO
MESNEX IV (<i>mesna</i>) 100 MG/ML	4	4	
ZINECARD IV SOLUTION (<i>dexrazoxane</i>) 250 MG, 500 MG	4	4	

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
Mitotic Inhibitors			
ABRAXANE IV SOLUTION 100 MG	5		
DOCEFREZ IV SOLUTION 20 MG, 80 MG	5		
<i>docetaxel iv 160 mg/16 ml (10 mg/ml), 20 mg/2 ml (10 mg/ml), 80 mg/8 ml (10 mg/ml)</i>		5	
ETOPOPHOS IV SOLUTION 100 MG	4		
HALAVEN IV 1 MG/2 ML (0.5 MG/ML)	5		
IXEMPRA IV SOLUTION 15 MG, 45 MG	5		
JEVTANA IV 10 MG/ML (FINAL)	5		
NAVELBINE IV (<i>vinorelbine</i>) 10 MG/ML	4	4	
ONXOL CONCENTRATE, IV (<i>paclitaxel</i>) 6 MG/ML	4	4	
TAXOL CONCENTRATE, IV (<i>paclitaxel</i>) 6 MG/ML	4	4	
TAXOTERE IV (<i>docetaxel</i>) 20 MG/2 ML (FINAL), 80 MG/8 ML (FINAL)	4	4	
TAXOTERE IV (<i>docetaxel</i>) 20 MG/ML (1 ML), 80 MG/4 ML (20 MG/ML)	5	5	
TOPOSAR IV (<i>etoposide</i>) 20 MG/ML	4	4	
<i>vinblastine iv 1 mg/ml</i>		4	
<i>vinblastine iv powder for solution 10 mg</i>		4	
<i>vincristine iv 1 mg/ml, 2 mg/2 ml</i>		4	
<i>vinorelbine iv 50 mg/5 ml</i>		4	
Topoisomerase I Inhibitors			
CAMPTOSAR IV 300 MG/15 ML	4		
CAMPTOSAR IV (<i>irinotecan</i>) 100 MG/5 ML, 40 MG/2 ML	4	4	
HYCANTIN IV SOLUTION (<i>topotecan</i>) 4 MG	5	5	
<i>irinotecan iv 500 mg/25 ml</i>		4	
<i>topotecan iv 4 mg/4 ml (1 mg/ml)</i>		5	

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
ANTIPARKINSON AGENTS			
Antiparkinson Adjuvants			
LODOSYN TAB 25 MG	3		MO
Antiparkinson Anticholinergics			
<i>benztropine tab 0.5 mg, 1 mg, 2 mg</i>		1	MO
COGENTIN INJECTION (<i>benztropine</i>) 2 MG/2 ML	4	4	MO
<i>trihexyphenidyl elixir 0.4 mg/ml</i>		1	MO
<i>trihexyphenidyl tab 2 mg, 5 mg</i>		1	MO
Antiparkinson COMT Inhibitors			
COMTAN TAB 200 MG	2		MO
TASMAR TAB 100 MG	3		MO
TASMAR TAB 200 MG	3		
Antiparkinson Dopaminergics			
<i>amantadine cap 100 mg</i>		1	MO
<i>amantadine syrup 50 mg/5 ml</i>		1	MO
<i>amantadine tab 100 mg</i>		1	MO
APOKYN SUBQ CARTRIDGE 10 MG/ML	5		LA
MIRAPEX TAB (<i>pramipexole</i>) 0.125 MG, 0.25 MG, 0.5 MG, 0.75 MG, 1 MG, 1.5 MG	2	1	MO
PARLODEL CAP (<i>bromocriptine</i>) 5 MG	3	1	MO
PARLODEL TAB (<i>bromocriptine</i>) 2.5 MG	3	1	MO
REQUIP TAB (<i>ropinirole</i>) 0.25 MG, 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG, 5 MG	3	1	MO
SINEMET TAB (<i>carbidopa-levodopa</i>) 10-100 MG, 25-100 MG, 25-250 MG	3	1	MO
SINEMET CR TAB (<i>carbidopa-levodopa</i>) 25-100 MG, 50-200 MG	3	1	MO
STALEVO 100 TAB 25-100-200 MG	2		MO
STALEVO 125 TAB 31.25-125-200 MG	2		MO
STALEVO 150 TAB 37.5-150-200 MG	2		MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
STALEVO 200 TAB 50-200-200 MG	2		MO
STALEVO 50 TAB 12.5-50-200 MG	2		MO
STALEVO 75 TAB 18.75-75-200 MG	2		MO
Antiparkinson Monoamine Oxidase Inhibitors			
AZILECT TAB 0.5 MG, 1 MG	2		MO
ELDEPRYL CAP (<i>selegiline HCl</i>) 5 MG	3	1	MO
<i>selegiline tab 5 mg</i>		1	MO
ANTIPSYCHOTICS/ANTIMANIC AGENTS			
Antimanic Agents			
<i>lithium carbonate cap 150 mg, 300 mg, 600 mg</i>		1	MO
<i>lithium carbonate er tab 450 mg</i>		1	MO
<i>lithium carbonate tab 300 mg</i>		1	MO
<i>lithium citrate oral soln 8 meq/5 ml</i>		1	MO
LITHOBID TAB (<i>lithium carbonate</i>) 300 MG	3	1	MO
Antipsychotics - Misc.			
EQUETRO 12 HR CAP 100 MG, 200 MG, 300 MG	3		MO
GEODON CAP 20 MG, 40 MG, 60 MG, 80 MG	2		MO
GEODON IM 20 MG	4		MO
LATUDA TAB 40 MG, 80 MG	3		MO
Benzisoxazoles			
FANAPT TAB 1 MG, 10 MG, 12 MG, 2 MG, 4 MG, 6 MG, 8 MG	3		MO
FANAPT TABS IN A DOSE PACK 1MG(2)-2MG(2)- 4MG(2)-6MG(2)	3		
INVEGA 24 HR TAB 1.5 MG, 3 MG, 6 MG, 9 MG	2		MO
INVEGA SUSTENNA IM SYRINGE 117 MG/0.75 ML, 156 MG/ML (1 ML), 234 MG/1.5 ML, 39 MG/0.25 ML, 78 MG/0.5 ML	4		MO
RISPERDAL ORAL SOLN (<i>risperidone</i>) 1 MG/ML	3	1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
RISPERDAL TAB (<i>risperidone</i>) 0.25 MG, 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG	3	1	MO
RISPERDAL CONSTA IM SYRINGE 12.5 MG/2 ML, 25 MG/2 ML	4		MO
RISPERDAL CONSTA IM SYRINGE 37.5 MG/2 ML, 50 MG/2 ML	5		MO
RISPERDAL M-TAB (<i>risperidone</i>) 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG	3	1	MO
<i>risperidone tab, rapid dissolve 0.25 mg</i>		1	MO
RISPERIDONE M-TAB TAB, RAPID DISSOLVE (<i>risperidone</i>) 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG		1	MO
Butyrophenones			
HALDOL INJECTION (<i>haloperidol lactate</i>) 5 MG/ML	4	4	MO
HALDOL DECANOATE IM (<i>haloperidol decanoate</i>) 100 MG/ML, 50 MG/ML	4	4	MO
<i>haloperidol tab 0.5 mg, 1 mg, 10 mg, 2 mg, 20 mg, 5 mg</i>		1	MO
<i>haloperidol oral concentrate 2 mg/ml</i>		1	MO
Dibenzapines			
<i>clozapine tab 200 mg, 50 mg</i>		1	
CLOZARIL TAB (<i>clozapine</i>) 100 MG, 25 MG	3	1	
FAZACLO TAB, RAPID DISSOLVE 100 MG, 12.5 MG, 150 MG, 200 MG, 25 MG	3		
LOXITANE CAP (<i>loxapine succinate</i>) 10 MG, 25 MG, 5 MG, 50 MG	3	1	MO
SAPHRIS SUBLINGUAL TAB 10 MG, 5 MG	2		MO
SEROQUEL TAB 100 MG, 200 MG, 25 MG, 300 MG, 400 MG, 50 MG	2		MO
SEROQUEL XR 24 HR TAB 150 MG, 200 MG, 300 MG, 400 MG, 50 MG	2		MO
ZYPREXA IM 10 MG	4		MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
ZYPREXA TAB 10 MG, 15 MG, 2.5 MG, 20 MG, 5 MG, 7.5 MG	2		MO
ZYPREXA RELPREVV IM SUSP 210 MG, 300 MG, 405 MG	5		
ZYPREXA ZYDIS TAB, RAPID DISSOLVE 10 MG, 15 MG, 20 MG, 5 MG	2		MO
Dihydroindolones			
MOBAN TAB 10 MG, 25 MG, 5 MG, 50 MG	3		
Phenothiazines			
<i>chlorpromazine injection 25 mg/ml</i>		4	MO
<i>chlorpromazine tab 10 mg, 100 mg, 200 mg, 25 mg, 50 mg</i>		1	MO
COMPRO RECTAL SUPPOSITORY (<i>prochlorperazine</i>) 25 MG		1	MO
<i>fluphenazine decanoate injection 25 mg/ml</i>		4	MO
<i>fluphenazine elixir 2.5 mg/5 ml</i>		1	MO
<i>fluphenazine injection 2.5 mg/ml</i>		4	MO
<i>fluphenazine oral concentrate 5 mg/ml</i>		1	MO
<i>fluphenazine tab 1 mg, 10 mg, 2.5 mg, 5 mg</i>		1	MO
<i>perphenazine tab 16 mg, 2 mg, 4 mg, 8 mg</i>		1	MO
<i>prochlorperazine edisylate injection 5 mg/ml</i>		4	MO
<i>prochlorperazine maleate tab 10 mg, 5 mg</i>		1	MO
<i>thioridazine tab 10 mg, 100 mg, 25 mg, 50 mg</i>		1	MO
<i>trifluoperazine tab 1 mg, 10 mg, 2 mg, 5 mg</i>		1	MO
Quinolinone Derivatives			
ABILIFY IM 9.75 MG/1.3 ML	4		MO
ABILIFY ORAL SOLN 1 MG/ML	2		MO
ABILIFY TAB 10 MG, 15 MG, 2 MG, 20 MG, 30 MG, 5 MG	2		MO
ABILIFY DISCMELT 10 MG, 15 MG	2		MO

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Thioxanthenes			
NAVANE CAP 20 MG	2		MO
NAVANE CAP (<i>thiothixene</i>) 10 MG, 2 MG, 5 MG	3	1	MO
<i>thiothixene cap 1 mg</i>		1	MO
ANTISEPTICS & DISINFECTANTS			
Chlorine Antiseptics			
PHISOHEX TOPICAL LIQUID 3 %	2		MO
ANTIVIRALS			
Antiretrovirals			
APTIVUS CAP 250 MG	5		MO
APTIVUS ORAL SOLN 100 MG/ML	2		
ATRIPLA TAB 600-200-300 MG	5		MO
COMBIVIR TAB 150-300 MG	2		MO
CRIXIVAN CAP 100 MG, 333 MG	2		
CRIXIVAN CAP 200 MG, 400 MG	2		MO
EDURANT TAB 25 MG	5		MO
EMTRIVA CAP 200 MG	2		MO
EMTRIVA ORAL SOLN 10 MG/ML	2		MO
EPIVIR ORAL SOLN 10 MG/ML	2		MO
EPIVIR TAB 150 MG, 300 MG	2		MO
EPIVIR HBV ORAL SOLN 25 MG/5 ML (5 MG/ML)	2		MO
EPIVIR HBV TAB 100 MG	2		MO
EPZICOM TAB 600-300 MG	2		MO
FUZEON SUB-Q KIT 90 MG	5		
INTELENCE TAB 100 MG, 200 MG	5		MO
INVIRASE CAP 200 MG	3		MO
INVIRASE TAB 500 MG	5		MO
ISENTRESS TAB 400 MG	5		MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
KALETRA CAP 133.3-33.3 MG	5		
KALETRA ORAL SOLN 400-100 MG/5 ML	5		MO
KALETRA TAB 100-25 MG	3		MO
KALETRA TAB 200-50 MG	5		MO
LEXIVA ORAL SUSP 50 MG/ML	2		
LEXIVA TAB 700 MG	2		MO
NORVIR CAP 100 MG	3		MO
NORVIR ORAL SOLN 80 MG/ML	3		MO
NORVIR TAB 100 MG	3		MO
NORVIR SOFT GELATIN CAP 100 MG	3		MO
PREZISTA TAB 150 MG, 300 MG, 75 MG	2		
PREZISTA TAB 400 MG, 600 MG	2		MO
RESCRIPTOR DISPERSIBLE TAB 100 MG	2		MO
RESCRIPTOR TAB 200 MG	2		MO
RETROVIR IV 10 MG/ML	4		
RETROVIR CAP (<i>zidovudine</i>) 100 MG	3	1	MO
RETROVIR SYRUP (<i>zidovudine</i>) 10 MG/ML	3	1	MO
RETROVIR TAB (<i>zidovudine</i>) 300 MG	3	1	MO
REYATAZ CAP 100 MG, 150 MG, 200 MG, 300 MG	2		MO
SELZENTRY TAB 150 MG, 300 MG	5		MO
SUSTIVA CAP 200 MG, 50 MG	2		MO
SUSTIVA TAB 600 MG	2		MO
TRIZIVIR TAB 300-150-300 MG	2		MO
TRUVADA TAB 200-300 MG	5		MO
VIDEX 2 GRAM PEDIATRIC ORAL SOLUTION 10 MG/ML (FINAL)	2		MO
VIDEX 4 GRAM PEDIATRIC ORAL SOLUTION 10 MG/ML (FINAL)	2		MO
VIDEX EC CAP (<i>didanosine</i>) 125 MG, 200 MG, 250 MG, 400 MG	3	1	MO

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VIRACEPT ORAL POWDER 50 MG/G	2		MO
VIRACEPT TAB 250 MG, 625 MG	3		MO
VIRAMUNE ORAL SUSP 50 MG/5 ML	2		MO
VIRAMUNE TAB 200 MG	2		MO
VIRAMUNE XR 24 HR TAB 400 MG	3		MO
VIREAD TAB 300 MG	2		MO
ZERIT CAP (<i>stavudine</i>) 15 MG, 20 MG, 30 MG, 40 MG	3	1	MO
ZERIT ORAL SOLUTION (<i>stavudine</i>) 1 MG/ML	3	1	MO
ZIAGEN ORAL SOLN 20 MG/ML	2		MO
ZIAGEN TAB 300 MG	2		MO
CMV Agents			
CYTOVENE IV SOLUTION (<i>ganciclovir sodium</i>) 500 MG	4	4	MO
FOSCAVIR IV (<i>foscarnet</i>) 24 MG/ML	4	4	MO
<i>ganciclovir cap 250 mg</i>		1	
<i>ganciclovir cap 500 mg</i>		5	
VALCYTE ORAL SOLUTION 50 MG/ML	5		MO
VALCYTE TAB 450 MG	5		MO
VISTIDE IV 75 MG/ML	5		MO
Hepatitis Agents			
BARACLUDE ORAL SOLN 0.05 MG/ML	2		MO
BARACLUDE TAB 0.5 MG, 1 MG	5		MO
COPEGUS TAB (<i>ribavirin</i>) 200 MG	NF	1	
HEPSERA TAB 10 MG	3		MO
INFERGEN SUB-Q 15 MCG/0.5 ML, 9 MCG/0.3 ML	5		PA
PEGASYS SUB-Q 180 MCG/ML	5		PA
PEGASYS CONVENIENCE PACK SUB-Q KIT 180 MCG/0.5 ML	5		PA

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
PEGINTRON SUB-Q KIT 120 MCG/0.5 ML, 150 MCG/0.5 ML, 50 MCG/0.5 ML, 80 MCG/0.5 ML	5		PA
PEGINTRON REDIPEN SUBQ KIT 120 MCG/0.5 ML, 150 MCG/0.5 ML, 50 MCG/0.5 ML, 80 MCG/0.5 ML	5		PA
REBETOL ORAL SOLN 40 MG/ML	2		
REBETOL CAP (<i>ribavirin</i>) 200 MG	5	1	
RIBASPHERE CAP (<i>ribavirin</i>) 200 MG		1	
RIBASPHERE TAB (<i>ribavirin</i>) 200 MG		1	
TYZEKA TAB 600 MG	5		MO
Herpes Agents			
<i>acyclovir sodium iv 50 mg/ml</i>		4	
<i>acyclovir sodium iv powder for solution 1,000 mg</i>		4	
<i>acyclovir sodium iv powder for solution 500 mg</i>		4	MO
VALTRESX TAB (<i>valacyclovir</i>) 1 G, 500 MG	3	1	MO
ZOVIRAX CAP (<i>acyclovir</i>) 200 MG	NF	1	MO
ZOVIRAX ORAL SUSP (<i>acyclovir</i>) 200 MG/5 ML	NF	1	MO
ZOVIRAX TAB (<i>acyclovir</i>) 400 MG, 800 MG	NF	1	MO
Influenza Agents			
FLUMADINE TAB (<i>rimantadine</i>) 100 MG	NF	1	MO
RELENZA DISKHALER FOR INHALATION 5 MG/ACTUATION	3		MO
TAMIFLU CAP 30 MG, 45 MG, 75 MG	3		MO
TAMIFLU ORAL SUSP 12 MG/ML	3		MO
ASSORTED CLASSES			
Chelating Agents			
CUPRIMINE CAP 250 MG	2		MO
DEPEN TITRATABS TAB 250 MG	2		MO
SYPRINE CAP 250 MG	3		MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
ENZYMES			
XIAFLEX SOLUTION FOR INJECTION 0.9 MG	5		
Immunomodulators			
REVLIMID CAP 10 MG, 15 MG, 25 MG, 5 MG	5		LA
THALOMID CAP 100 MG, 150 MG, 200 MG, 50 MG	5		
Immunosuppressive Agents			
ATGAM IV 50 MG/ML	4		B/D
AZASAN TAB 100 MG, 75 MG	2		MO; B/D
<i>azathioprine solution for injection 100 mg</i>		4	MO; B/D
CELLCEPT ORAL SUSP 200 MG/ML	2		MO; B/D
CELLCEPT CAP (<i>mycophenolate mofetil</i>) 250 MG	3	1	MO; B/D
CELLCEPT TAB (<i>mycophenolate mofetil</i>) 500 MG	3	1	MO; B/D
CELLCEPT INTRAVENOUS IV SOLUTION 500 MG	4		B/D
<i>cyclosporine modified cap 50 mg</i>		1	MO; B/D
GENGRAF CAP (<i>cyclosporine modified</i>) 100 MG, 25 MG		1	MO; B/D
GENGRAF ORAL SOLN (<i>cyclosporine modified</i>) 100 MG/ML		1	MO; B/D
IMURAN TAB (<i>azathioprine</i>) 50 MG	3	1	MO; B/D
MYFORTIC TAB 180 MG, 360 MG	3		MO; B/D
NEORAL CAP (<i>cyclosporine modified</i>) 100 MG, 25 MG	3	1	MO; B/D
NEORAL ORAL SOLN (<i>cyclosporine modified</i>) 100 MG/ML	3	1	MO; B/D
NULOJIX IV SOLUTION 250 MG	5		B/D
ORTHOCLONE OKT3 IV 1 MG/ML	5		B/D
PROGRAF IV 5 MG/ML	4		B/D

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
PROGRAF CAP (<i>tacrolimus</i>) 0.5 MG, 1 MG	3	1	MO; B/D
PROGRAF CAP (<i>tacrolimus</i>) 5 MG	5	5	MO; B/D
RAPAMUNE ORAL SOLN 1 MG/ML	2		MO; B/D
RAPAMUNE TAB 0.5 MG, 1 MG, 2 MG	2		MO; B/D
SANDIMMUNE CAP (<i>cyclosporine</i>) 100 MG, 25 MG	3	1	MO; B/D
SANDIMMUNE IV (<i>cyclosporine</i>) 250 MG/5 ML	4	4	B/D
SANDIMMUNE ORAL SOLN (<i>cyclosporine</i>) 100 MG/ML	3	1	MO; B/D
SIMULECT IV SOLUTION 10 MG, 20 MG	5		B/D
THYMOGLOBULIN IV SOLUTION 25 MG	2		B/D
ZENAPAX CONCENTRATE, IV 5 MG/ML	5		B/D
ZORTRESS TAB 0.25 MG	2		MO; B/D
ZORTRESS TAB 0.5 MG, 0.75 MG	5		MO; B/D
Irrigation Solutions			
<i>lactated ringers irrigation soln</i>		1	
<i>lactated ringers soln</i>		1	
PHYSIOLYTE IRRIGATION SOLN 140-5-3-98 MEQ/L		1	
PHYSIOSOL IRRIGATION SOLN 140-5-3-98 MEQ/L		1	
<i>ringers irrigation soln</i>		1	
<i>water for irrigation, sterile solution</i>		1	MO
Peritoneal Dialysis Solutions			
DELFLEX-LC/1.5% DEXTROSE CA+= 3.5MEQ &MAG= 0.5 MEQ/L	4		
DIANEAL LOW CALCIUM WITH 1.5% DEX LOW CA+=2.5 MEQ &MAG=0.5 MEQ/L	4		
DIANEAL PD-2/1.5% DEXTROSE CA+= 3.5MEQ &MAG= 0.5 MEQ/L	4		

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
DIANEAL WITH 1.5% DEXTROSE LOW CA+=2.5 MEQ &MAG=0.5 MEQ/L	4		
Potassium Removing Resins			
KALEXATE ORAL POWDER (<i>sodium polystyrene sulfonate</i>)		1	MO
KAYEXALATE ORAL POWDER (<i>sodium polystyrene sulfonate</i>)	NF	1	MO
KIONEX ORAL POWDER (<i>sodium polystyrene sulfonate</i>)		1	MO
KIONEX ORAL SUSP (<i>sodium polystyrene sulfonate</i>) 15 G/60 ML		1	MO
<i>sodium polystyrene sulfonate enema 30 gram/120 ml, 50 gram/200 ml</i>		1	
SPS ENEMA 30 GRAM/120 ML	3		MO
SPS ORAL SUSP (<i>sodium polystyrene sulfonate</i>) 15 G/60 ML	3	1	MO
Prostaglandins			
PROSTIN VR PEDIATRIC INJECTION (<i>alprostadil</i>) 500 MCG/ML	NF	NF	
BETA BLOCKERS			
Alpha-Beta Blockers			
COREG TAB (<i>carvedilol</i>) 12.5 MG, 25 MG, 3.125 MG, 6.25 MG	NF	1	MO
COREG CR 24 HR CAP 10 MG, 20 MG, 40 MG, 80 MG	3		MO
<i>labetalol iv syringe 5 mg/ml</i>		4	
TRANDATE IV (<i>labetalol</i>) 5 MG/ML	4	4	
TRANDATE TAB (<i>labetalol</i>) 100 MG, 200 MG, 300 MG	NF	1	MO
Beta Blockers Cardio-Selective			
BYSTOLIC TAB 10 MG, 2.5 MG, 20 MG, 5 MG	2		MO
KERLONE TAB (<i>betaxolol</i>) 10 MG, 20 MG	3	1	MO

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LOPRESSOR IV (<i>metoprolol tartrate</i>) 5 MG/5 ML	4	4	MO
LOPRESSOR TAB (<i>metoprolol tartrate</i>) 100 MG, 50 MG	NF	1	MO
<i>metoprolol iv syringe 5 mg/5 ml</i>		4	MO
<i>metoprolol tartrate tab 25 mg</i>		1	MO
SECTRAL CAP (<i>acebutolol</i>) 200 MG, 400 MG	NF	1	MO
TENORMIN TAB (<i>atenolol</i>) 100 MG, 25 MG, 50 MG	NF	1	MO
TOPROL XL 24 HR TAB (<i>metoprolol succinate</i>) 100 MG, 200 MG, 25 MG, 50 MG	3	1	MO
ZEBETA TAB (<i>bisoprolol fumarate</i>) 10 MG, 5 MG	NF	1	MO
Beta Blockers Non-Selective			
BETAPACE TAB (<i>sotalol</i>) 120 MG, 160 MG, 240 MG, 80 MG	NF	1	MO
BETAPACE AF TAB (<i>sotalol</i>) 120 MG, 160 MG, 80 MG	NF	1	MO
CORGARD TAB (<i>nadolol</i>) 20 MG, 40 MG, 80 MG	NF	1	MO
INDERAL LA 24 HR CAP (<i>propranolol</i>) 120 MG, 160 MG, 60 MG, 80 MG	NF	1	MO
INNOPRAN XL 24 HR CAP 120 MG, 80 MG	3		MO
<i>pindolol tab 10 mg, 5 mg</i>		1	MO
<i>propranolol iv 1 mg/ml</i>		4	
<i>propranolol oral soln 20 mg/5 ml, 40 mg/5 ml</i>		1	MO
<i>propranolol tab 10 mg, 20 mg, 40 mg, 60 mg, 80 mg</i>		1	MO
SORINE TAB (<i>sotalol</i>) 120 MG, 160 MG, 240 MG, 80 MG		1	MO
SOTALOL AF TAB (<i>sotalol</i>) 120 MG, 160 MG, 80 MG		1	MO
<i>timolol tab 10 mg, 20 mg, 5 mg</i>		1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
BIOLOGICALS MISC			
Biologicals Misc			
ADAGEN IM 250 UNIT/ML	5		
Calcium Channel Blockers			
CALCIUM CHANNEL BLOCKERS			
ADALAT CC TAB (<i>nifedipine</i>) 30 MG, 60 MG, 90 MG	3	1	MO
AFEDITAB CR (<i>nifedipine</i>) 30 MG, 60 MG		1	MO
CALAN TAB (<i>verapamil</i>) 120 MG, 40 MG, 80 MG	NF	1	MO
CALAN SR TAB (<i>verapamil</i>) 120 MG, 180 MG, 240 MG	NF	1	MO
CARDIZEM TAB (<i>diltiazem HCl</i>) 120 MG, 30 MG, 60 MG, 90 MG	NF	1	MO
CARDIZEM CD 24 HR CAP 360 MG	2		MO
CARDIZEM CD 24 HR CAP (<i>diltiazem HCl</i>) 120 MG, 180 MG, 240 MG, 300 MG	NF	1	MO
CARDIZEM LA 24 HR TAB 120 MG	3		MO
CARDIZEM LA 24 HR TAB (<i>diltiazem HCl</i>) 180 MG, 240 MG, 300 MG, 360 MG, 420 MG	3	1	MO
CARTIA XT 24 HR CAP (<i>diltiazem HCl</i>) 120 MG, 180 MG, 240 MG, 300 MG		1	MO
COVERA-HS 24 HR TAB 180 MG, 240 MG	3		MO
DILACOR XR CAP (<i>diltiazem HCl</i>) 120 MG, 180 MG, 240 MG	NF	1	MO
DILT-CD 24 HR CAP (<i>diltiazem HCl</i>) 120 MG, 180 MG, 240 MG, 300 MG		1	MO
DILT-XR CAP (<i>diltiazem HCl</i>) 120 MG, 180 MG, 240 MG		1	MO
DILTIA XT CAP (<i>diltiazem HCl</i>) 120 MG, 180 MG, 240 MG		1	MO
<i>diltiazem er 12 hr cap 120 mg, 60 mg, 90 mg</i>		1	MO
<i>diltiazem iv 5 mg/ml</i>		4	

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<i>diltiazem iv powder for solution 100 mg</i>		4	
DILTZAC ER CAP (<i>diltiazem HCl</i>) 120 MG, 180 MG, 240 MG, 300 MG, 360 MG		1	MO
ISOPTIN SR TAB (<i>verapamil</i>) 120 MG, 180 MG, 240 MG	NF	1	MO
<i>isradipine cap 2.5 mg, 5 mg</i>		1	MO
MATZIM LA 24 HR TAB (<i>diltiazem HCl</i>) 180 MG, 240 MG, 300 MG, 360 MG, 420 MG		1	MO
<i>nicardipine cap 20 mg, 30 mg</i>		1	MO
<i>nicardipine iv 25 mg/10 ml</i>		4	
NIFEDIAC CC TAB (<i>nifedipine</i>) 30 MG, 60 MG, 90 MG		1	MO
NIFEDICAL XL 24 HR TAB (<i>nifedipine</i>) 30 MG, 60 MG		1	MO
<i>nifedipine cap 20 mg</i>		1	MO
NIMOTOP CAP (<i>nimodipine</i>) 30 MG	NF	1	MO
NORVASC TAB (<i>amlodipine</i>) 10 MG, 2.5 MG, 5 MG	NF	1	MO
PLENDIL 24 HR TAB (<i>felodipine</i>) 10 MG, 2.5 MG, 5 MG	3	1	MO
PROCARDIA CAP (<i>nifedipine</i>) 10 MG	NF	1	MO
PROCARDIA XL 24 HR TAB (<i>nifedipine</i>) 30 MG, 60 MG, 90 MG	NF	1	MO
SULAR 24 HR TAB (<i>nisoldipine</i>) 17 MG, 25.5 MG, 34 MG, 8.5 MG	3	1	MO
TAZTIA XT CAP (<i>diltiazem HCl</i>) 120 MG, 180 MG, 240 MG, 300 MG, 360 MG		1	MO
TIAZAC CAP (<i>diltiazem HCl</i>) 120 MG, 180 MG, 240 MG, 300 MG, 360 MG, 420 MG	NF	1	MO
<i>verapamil iv 2.5 mg/ml</i>		4	MO
<i>verapamil iv syringe 2.5 mg/ml</i>		4	MO
VERELAN 24 HR CAP (<i>verapamil</i>) 120 MG, 180 MG, 240 MG, 360 MG	NF	1	MO

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VERELAN PM CAP (<i>verapamil</i>) 100 MG, 200 MG, 300 MG	3	1	MO
CARDIOTONICS			
Cardiac Glycosides			
DIGITEK TAB (<i>digoxin</i>) 125 MCG, 250 MCG		1	MO
<i>digoxin oral soln 50 mcg/ml</i>		1	MO
<i>digoxin syringe 250 mcg/ml</i>		4	MO
LANOXIN INJECTION (<i>digoxin</i>) 250 MCG/ML	4	4	MO
LANOXIN TAB (<i>digoxin</i>) 125 MCG, 250 MCG	3	1	MO
LANOXIN PEDIATRIC INJECTION 100 MCG/ML	4		
CARDIOVASCULAR AGENTS - MISC.			
Prostaglandin Vasodilators			
FLOLAN IV SOLUTION (<i>epoprostenol</i>) 0.5 MG, 1.5 MG	5	5	B/D
REMODULIN INJECTION 1 MG/ML, 10 MG/ML, 2.5 MG/ML, 5 MG/ML	5		LA
TYVASO NEB SOLUTION 1.74 MG/2.9 ML (0.6 MG/ML)	5		B/D
TYVASO REFILL KIT NEB SOLUTION 1.74 MG/2.9 ML (0.6 MG/ML)	5		B/D
TYVASO STARTER KIT NEB SOLUTION 1.74 MG/2.9 ML	5		B/D
VELETRI IV SOLUTION (<i>epoprostenol</i>) 1.5 MG	5	5	B/D
VENTAVIS NEB SOLUTION 10 MCG/ML, 20 MCG/2 ML	2		LA; B/D
VENTAVIS NEB SOLUTION 20 MCG/ML	2		LA; B/D
Pulmonary Hypertension - Endothelin Receptor Antagonists			
LETAIRIS TAB 10 MG, 5 MG	5		LA
TRACLEER TAB 125 MG, 62.5 MG	5		LA

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
Pulmonary Hypertension - Phosphodiesterase Inhibitors			
ADCIRCA TAB 20 MG	5		
REVATIO IV 10 MG/12.5 ML	5		PA
REVATIO TAB 20 MG	5		PA
CEPHALOSPORINS			
Cephalosporins - 1st Generation			
<i>cefadroxil cap 500 mg</i>		1	MO
<i>cefadroxil oral susp 250 mg/5 ml, 500 mg/5 ml</i>		1	MO
<i>cefadroxil tab 1 gram</i>		1	MO
<i>cefazolin iv solution 1 gram</i>		4	
<i>cefazolin solution for injection 1 gram, 10 gram, 500 mg</i>		4	MO
<i>cefazolin solution for injection 20 gram</i>		4	
<i>cefazolin in dextrose (iso-osmotic) iv piggy back 1 gram/50 ml</i>		4	
<i>cephalexin oral susp 125 mg/5 ml, 250 mg/5 ml</i>		1	MO
<i>cephalexin tab 250 mg, 500 mg</i>		1	MO
KEFLEX CAP 750 MG	3		MO
KEFLEX CAP (<i>cephalexin</i>) 250 MG, 500 MG	NF	1	MO
Cephalosporins - 2nd Generation			
<i>cefaclor cap 250 mg, 500 mg</i>		1	MO
<i>cefaclor er 12 hr tab 500 mg</i>		1	MO
<i>cefaclor oral susp 125 mg/5 ml, 250 mg/5 ml</i>		1	MO
<i>cefaclor oral susp 375 mg/5 ml</i>		1	
<i>cefotetan iv solution 10 gram</i>		4	
<i>cefotetan solution for injection 1 gram, 2 gram</i>		4	
<i>cefotetan in dextrose, iso-osmotic iv piggy back 1 gram/50 ml, 2 gram/50 ml</i>		4	
<i>cefoxitin iv solution 1 gram, 10 gram</i>		4	
<i>cefoxitin iv solution 2 gram</i>		4	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
<i>cefoxitin in dextrose, iso-osmotic iv piggy back 1 gram/50 ml, 2 gram/50 ml</i>		4	
<i>cefprozil tab 250 mg, 500 mg</i>		1	MO
CEFTIN ORAL SUSP (<i>cefuroxime axetil</i>) 125 MG/5 ML, 250 MG/5 ML	NF	1	MO
CEFTIN TAB (<i>cefuroxime axetil</i>) 250 MG, 500 MG	NF	1	MO
<i>cefuroxime-dextrose (iso-osmotic) iv piggy back 1.5 gram/50 ml</i>		4	
CEFZIL ORAL SUSP (<i>cefprozil</i>) 125 MG/5 ML, 250 MG/5 ML	NF	1	MO
MEFOXIN IN DEXTROSE (ISO-OSMOTIC) IV PIGGY BACK 1 GRAM/50 ML, 2 GRAM/50 ML	4		
ZINACEF IV SOLUTION 1.5 GRAM, 750 MG	4		
ZINACEF IV SOLUTION (<i>cefuroxime sodium</i>) 7.5 GRAM	4	4	
ZINACEF SOLUTION FOR INJECTION (<i>cefuroxime sodium</i>) 1.5 GRAM, 750 MG	4	4	
ZINACEF IN DEXTROSE (ISO-OSMOTIC) IV PIGGY BACK (<i>cefuroxime-dextrose (iso-osm)</i>) 750 MG/50 ML	4	4	
ZINACEF IN STERILE WATER IV PIGGY BACK 1.5 GRAM/50 ML	4		
Cephalosporins - 3rd Generation			
<i>cefotaxime iv solution 20 gram</i>		4	
<i>cefpodoxime oral susp 100 mg/5 ml, 50 mg/5 ml</i>		1	MO
<i>cefpodoxime tab 100 mg</i>		1	MO
<i>ceftriaxone iv piggy back 1 gram, 2 gram</i>		4	
<i>ceftriaxone iv solution 1 gram, 2 gram</i>		4	
<i>ceftriaxone in dextrose (iso-osmotic) iv piggy back 1 gram/50 ml, 2 gram/50 ml</i>		4	
CLAFORAN IV PIGGY BACK 1 GRAM, 2 GRAM	4		

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
CLAFORAN IV SOLUTION 1 GRAM, 2 GRAM	4		
CLAFORAN SOLUTION FOR INJECTION (<i>cefotaxime</i>) 1 GRAM, 10 GRAM, 2 GRAM	4	4	MO
CLAFORAN SOLUTION FOR INJECTION (<i>cefotaxime</i>) 500 MG	4	4	
CLAFORAN IN D5W IV PIGGY BACK 1 GRAM/50 ML, 2 GRAM/50 ML	4		
FORTAZ IV SOLUTION 1 GRAM, 2 GRAM	4		
FORTAZ SOLUTION FOR INJECTION (<i>ceftazidime</i>) 1 GRAM, 2 GRAM, 500 MG	4	4	MO
FORTAZ SOLUTION FOR INJECTION (<i>ceftazidime</i>) 6 GRAM	4	4	
FORTAZ IN D5W IV PIGGY BACK 1 GRAM/50 ML, 2 GRAM/50 ML	4		
OMNICEF CAP (<i>cefdinir</i>) 300 MG	NF	1	MO
OMNICEF ORAL SUSP (<i>cefdinir</i>) 125 MG/5 ML, 250 MG/5 ML	NF	1	MO
ROCEPHIN SOLUTION FOR INJECTION (<i>ceftriaxone</i>) 1 GRAM, 10 GRAM, 2 GRAM, 250 MG, 500 MG	4	4	MO
SUPRAX ORAL SUSP 100 MG/5 ML, 200 MG/5 ML	3		MO
SUPRAX TAB 400 MG	3		MO
TAZICEF IV SOLUTION 1 GRAM, 2 GRAM	4		
TAZICEF SOLUTION FOR INJECTION (<i>ceftazidime</i>) 1 GRAM, 2 GRAM	4	4	MO
TAZICEF SOLUTION FOR INJECTION (<i>ceftazidime</i>) 6 GRAM	4	4	
VANTIN TAB (<i>cefepodoxime</i>) 200 MG	3	1	MO
Cephalosporins - 4th Generation			
<i>cefepime in dextrose (iso-osmotic) iv piggy back 1 gram/50 ml, 2 gram/100 ml</i>		4	
MAXIPIME IV SOLUTION 1 GRAM	4		
MAXIPIME IV SOLUTION 2 GRAM	4		MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
MAXIPIME SOLUTION FOR INJECTION (<i>cefepime</i>) 1 GRAM, 2 GRAM	4	4	MO
CONTRACEPTIVES			
Combination Contraceptives - Oral			
ALTAVERA (28) TAB 0.15-30 MG-MCG		1	MO
AMETHYST TAB 90-20 MCG		1	MO
APRI TAB 0.15-30 MG-MCG		1	MO
ARANELLE (28) TAB 0.5/1/0.5-35 MG-MCG		1	MO
AVIANE TAB 0.1-20 MG-MCG		1	MO
AZURETTE TAB 0.15-0.02MG X21 /0.01 MG X 5		1	MO
BALZIVA (28) TAB 0.4-35 MG-MCG		1	MO
BEYAZ TAB 3-0.02-0.451 MG (24)	3		MO
BREVICON (28) TAB 0.5-35 MG-MCG	NF		MO
BRIELLYN TAB 0.4-35 MG-MCG		1	MO
CAZIAN T TAB 0.1/.125/.15-25 MG-MCG		1	MO
CESIA TAB 0.1/.125/.15-25 MG-MCG		1	MO
CRYSSELLE (28) TAB (<i>norgestrel-ethinyl estradiol</i>) 0.3-30 MG-MCG		1	MO
CYCLAFEM 1/35 (28) TAB 1-35 MG-MCG		1	MO
CYCLAFEM 7/7/7 (28) TAB 0.5/0.75/1 MG- 35 MCG		1	MO
CYCLESSA TAB 0.1/.125/.15-25 MG-MCG	NF		MO
DESOGEN TAB 0.15-30 MG-MCG	NF		MO
EMOQUETTE TAB 0.15-30 MG-MCG		1	MO
ENPRESSE TAB 50-30 (6)/75-40 (5)/125-30(10)		1	MO
ESTROSTEP FE-28 TAB 1-20(5)/1-30(7) /1MG-35MCG (9)	3		MO
GENERESS FE CHEWABLE TAB 0.8MG-25MCG(24) & 75 MG (4)	3		
GIANVI TAB 3-20 MG-MCG		1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
GILDESS FE TAB 1-20 MG-MCG, 1.5-30 MG-MCG		1	MO
INTROVALE TABS,3 MONTH DOSE PACK 0.15-30 MG-MCG		1	MO
JOLESSA TABS,3 MONTH DOSE PACK 0.15-30 MG-MCG		1	MO
JUNEL 1.5/30 (21) TAB 1.5-30 MG-MCG		1	MO
JUNEL 1/20 (21) TAB 1-20 MG-MCG		1	MO
JUNEL FE 1.5/30 (28) TAB 1.5-30 MG-MCG		1	MO
JUNEL FE 1/20 (28) TAB 1-20 MG-MCG		1	MO
KARIVA TAB 0.15-0.02MG X21 /0.01 MG X 5		1	MO
KELNOR 1/35 (28) TAB 1-35 MG-MCG		1	MO
LEENA 28 TAB 0.5/1/0.5-35 MG-MCG		1	MO
LESSINA TAB 0.1-20 MG-MCG		1	MO
LEVLEN (28) TAB 0.15-30 MG-MCG	NF		MO
LEVORA-28 TAB 0.15-30 MG-MCG		1	MO
LO-OVRAL (28) TAB (<i>norgestrel-ethinyl estradiol</i>) 0.3-30 MG-MCG	NF	1	MO
LOESTRIN 1.5/30 (21) TAB 1.5-30 MG-MCG	NF		MO
LOESTRIN 1/20 (21) TAB 1-20 MG-MCG	NF		MO
LOESTRIN 24 FE TAB 1-20 (24)-75(4) MG-MCG-MG	3		MO
LOESTRIN FE 1.5/30 (28) TAB 1.5-30 MG-MCG	NF		MO
LOESTRIN FE 1/20 (28) TAB 1-20 MG-MCG	NF		MO
LORYNA TAB 3-20 MG-MCG		1	MO
LOW-OGESTREL (28) TAB (<i>norgestrel-ethinyl estradiol</i>) 0.3-30 MG-MCG		1	MO
LUTERA (28) TAB 0.1-20 MG-MCG		1	MO
LYBREL TAB 90-20 MCG	3		MO
MICROGESTIN 1.5/30 (21) TAB 1.5-30 MG-MCG		1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
MICROGESTIN 1/20 (21) TAB 1-20 MG-MCG		1	MO
MICROGESTIN FE 1.5/30 (28) TAB 1.5-30 MG-MCG		1	MO
MICROGESTIN FE 1/20 (28) TAB 1-20 MG-MCG		1	MO
MIRCETTE TAB 0.15-0.02MG X21 /0.01 MG X 5	NF		MO
MODICON (28) TAB 0.5-35 MG-MCG	NF		MO
MONONESSA (28) TAB 0.25-35 MG-MCG		1	MO
NATAZIA TAB 3 MG/2 MG/2 MG/ 2 MG-3 MG/1 MG	3		MO
NECON 0.5/35 (28) TAB 0.5-35 MG-MCG		1	MO
NECON 1/35 (28) TAB 1-35 MG-MCG		1	MO
NECON 1/50 (28) TAB 1-50 MG-MCG		1	MO
NECON 10/11 (28) TAB 0.5-35/1-35 MG-MCG/MG-MCG	2		MO
NECON 7/7/7 (28) TAB 0.5/0.75/1 MG- 35 MCG		1	MO
NORDETTE-28 TAB 0.15-30 MG-MCG	NF		MO
NORINYL 1+35 (28) TAB 1-35 MG-MCG	NF		MO
NORINYL 1+50 (28) TAB 1-50 MG-MCG	NF		MO
NORTREL 0.5/35 (28) TAB 0.5-35 MG-MCG		1	MO
NORTREL 1/35 (21) TAB 1-35 MG-MCG		1	MO
NORTREL 1/35 (28) TAB 1-35 MG-MCG		1	MO
NORTREL 7/7/7 (28) TAB 0.5/0.75/1 MG- 35 MCG		1	MO
OCELLA TAB 3-0.03 MG		1	MO
OGESTREL (28) TAB 0.5-50 MG-MCG		1	MO
ORSYTHIA TAB 0.1-20 MG-MCG		1	MO
ORTHO TRI-CYCLEN (28) TAB (<i>norgestimate-ethinyl estradiol</i>) 0.18/0.215/0.25 MG-35 MCG (28)	NF	1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
ORTHO TRI-CYCLEN LO TAB 0.18/0.215/0.25 MG-25 MCG	2		MO
ORTHO-CEPT (28) TAB 0.15-30 MG-MCG	NF		MO
ORTHO-CYCLEN (28) TAB 0.25-35 MG-MCG	NF		MO
ORTHO-NOVUM 1/35 (28) TAB 1-35 MG-MCG	NF		MO
ORTHO-NOVUM 1/50 (28) TAB 1-50 MG-MCG	NF		MO
ORTHO-NOVUM 7/7/7 (28) TAB 0.5/0.75/1 MG- 35 MCG	NF		MO
OVCON-35 (28) TAB 0.4-35 MG-MCG	NF		MO
OVCON-50 (28) TAB 1-50 MG-MCG	2		MO
PORTIA TAB 0.15-30 MG-MCG		1	MO
PREVIFEM TAB 0.25-35 MG-MCG		1	MO
QUASENSE TABS,3 MONTH DOSE PACK 0.15-30 MG-MCG		1	MO
RECLIPSEN (28) TAB 0.15-30 MG-MCG		1	MO
SEASONALE TABS,3 MONTH DOSE PACK 0.15-30 MG-MCG	3		MO
SOLIA TAB 0.15-30 MG-MCG		1	MO
SPRINTEC (28) TAB 0.25-35 MG-MCG		1	MO
SRONYX TAB 0.1-20 MG-MCG		1	MO
SYEDA TAB 3-0.03 MG		1	MO
TILIA FE TAB 1-20(5)/1-30(7) /1MG-35MCG (9)		1	MO
TRI-LEGEST FE TAB 1-20(5)/1-30(7) /1MG-35MCG (9)		1	MO
TRI-LO-SPRINTEC TAB 0.18/0.215/0.25 MG-25 MCG		1	MO
TRI-NORINYL (28) TAB 0.5/1/0.5-35 MG-MCG	NF		MO
TRI-PREVIFEM (28) TAB (<i>norgestimate-ethinyl estradiol</i>) 0.18/0.215/0.25 MG-35 MCG (28)		1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
TRI-SPRINTEC (28) TAB (<i>norgestimate-ethinyl estradiol</i>) 0.18/0.215/0.25 MG-35 MCG (28)		1	MO
TRINESSA (28) TAB (<i>norgestimate-ethinyl estradiol</i>) 0.18/0.215/0.25 MG-35 MCG (28)		1	MO
TRIVORA (28) TAB 50-30 (6)/75-40 (5)/125-30(10)		1	MO
VELIVET TAB 0.1/.125/.15-25 MG-MCG		1	MO
YASMIN 28 TAB 3-0.03 MG	NF		MO
YAZ 28 TAB 3-20 MG-MCG	2		MO
ZARAH TAB 3-0.03 MG		1	MO
ZENCHENT (28) TAB 0.4-35 MG-MCG		1	MO
ZOVIA 1/35E (28) TAB 1-35 MG-MCG		1	MO
ZOVIA 1/50E (28) TAB 1-50 MG-MCG		1	MO
Combination Contraceptives - Transdermal			
ORTHO EVRA TRANSDERM PATCH 150-20 MCG/24 HR	2		MO
Combination Contraceptives - Vaginal			
NUVARING VAGINAL 0.12-0.015 MG/24 HR	2		MO
Emergency Contraceptives			
ELLA TAB 30 MG	3		
NEXT CHOICE TAB (<i>levonorgestrel</i>) 0.75 MG		1	
PLAN B TAB (<i>levonorgestrel</i>) 0.75 MG	3	1	
PLAN B ONE-STEP TAB 1.5 MG	3		
Progestin Contraceptives - Implants			
IMPLANON SUBDERMAL IMPLANT 68 MG	4		
Progestin Contraceptives - Injectable			
DEPO-PROVERA IM SUSP (<i>medroxyprogesterone</i>) 150 MG/ML	4	4	MO
DEPO-PROVERA IM SYRINGE (<i>medroxyprogesterone</i>) 150 MG/ML	4	4	MO
DEPO-SUBQ PROVERA 104 SYRINGE 104 MG/0.65 ML	4		MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
Progestin Contraceptives - Oral			
CAMILA TAB (<i>norethindrone (contraceptive)</i>) 0.35 MG		1	MO
ERRIN TAB (<i>norethindrone (contraceptive)</i>) 0.35 MG		1	MO
HEATHER TAB (<i>norethindrone (contraceptive)</i>) 0.35 MG		1	MO
JOLIVETTE TAB (<i>norethindrone (contraceptive)</i>) 0.35 MG		1	MO
NOR-QD TAB (<i>norethindrone (contraceptive)</i>) 0.35 MG	NF	1	MO
NORA-BE TAB (<i>norethindrone (contraceptive)</i>) 0.35 MG		1	MO
ORTHO MICRONOR TAB (<i>norethindrone (contraceptive)</i>) 0.35 MG	NF	1	MO
CORTICOSTEROIDS			
Glucocorticosteroids			
A-HYDROCORT SOLUTION FOR INJECTION 100 MG	4		MO
A-METHAPRED SOLUTION FOR INJECTION 125 MG/2 ML, 40 MG/ML	4		MO
A-METHAPRED SOLUTION FOR INJECTION (<i>methylprednisolone sodium succ</i>) 40 MG	4	4	MO
ARISTOSPAN INTRA-ARTICULAR SUSP FOR INJECTION 20 MG/ML	3		MO
ASMALPRED PLUS ORAL SOLN 15 MG/5 ML		1	MO
BAYCADRON ELIXIR (<i>dexamethasone</i>) 0.5 MG/5 ML		1	MO
CELESTONE ORAL SOLN 0.6 MG/5 ML	3		MO
CELESTONE SOLUSPAN SUSP FOR INJECTION (<i>betamethasone acet & sod phos</i>) 6 MG/ML	4	4	MO
CORTEF TAB (<i>hydrocortisone</i>) 10 MG, 20 MG, 5 MG	3	1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
<i>cortisone tab 25 mg</i>		1	MO
DEPO-MEDROL SUSP FOR INJECTION 20 MG/ML	4		MO
DEPO-MEDROL SUSP FOR INJECTION (<i>methylprednisolone acetate</i>) 40 MG/ML, 80 MG/ML	4	4	MO
<i>dexamethasone oral soln 0.5 mg/5 ml</i>		1	MO
<i>dexamethasone tab 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg</i>		1	MO
DEXAMETHASONE INTENSOL ORAL DROPS 1 MG/ML		1	MO
<i>dexamethasone sodium phosphate (pf) injection 10 mg/ml</i>		4	MO
<i>dexamethasone injection 10 mg/ml, 4 mg/ml</i>		4	MO
DEXPAK DOSE PACK, TAB 1.5 MG (21 TABS), 1.5 MG (51 TABS)	2		MO
DEXPAK JR. DOSE PACK, TAB 1.5 MG (35 TABS)	2		MO
ENTOCORT EC CAP (<i>budesonide</i>) 3 MG	3	1	MO
KENALOG SUSP FOR INJECTION (<i>triamcinolone acetonide</i>) 10 MG/ML, 40 MG/ML	4	4	MO
MEDROL TAB 2 MG	2		MO
MEDROL TAB (<i>methylprednisolone</i>) 16 MG, 32 MG, 4 MG, 8 MG	3	1	MO
MEDROL (PAK) TABS IN A DOSE PACK (<i>methylprednisolone</i>) 4 MG	3	1	MO
MEPROLONE UNIPAK TABS IN A DOSE PACK (<i>methylprednisolone</i>) 4 MG		1	MO
<i>methylprednisolone sodium succ solution for injection 125 mg</i>		4	MO
MILLIPRED ORAL SOLN 10 MG/5 ML	3		
MILLIPRED TAB (<i>prednisolone</i>) 5 MG	2	1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
MILLIPRED DP DOSE PACK, TAB 5 MG (21 TABS), 5 MG (48 TABS)	3		MO
ORAPRED ORAL SOLN (<i>prednisolone sodium phosphate</i>) 15 MG/5 ML	3	1	MO
ORAPRED ODT TAB, RAPID DISSOLVE 10 MG, 15 MG, 30 MG	3		MO
PEDIAPRED ORAL SOLN (<i>prednisolone sodium phosphate</i>) 5 MG BASE/5 ML (6.7 MG/5 ML)	3	1	MO
<i>prednisolone oral soln 5 mg/5 ml</i>		1	
<i>prednisone oral soln 5 mg/5 ml</i>		1	MO
<i>prednisone tab 1 mg, 10 mg, 2.5 mg, 20 mg, 5 mg, 50 mg</i>		1	MO
PREDNISONE INTENSOL ORAL CONCENTRATE 5 MG/ML		1	MO
PRELONE ORAL SOLN (<i>prednisolone</i>) 15 MG/5 ML	3	1	MO
SOLU-CORTEF SOLUTION FOR INJECTION 1,000 MG/8 ML, 500 MG/4 ML	4		
SOLU-CORTEF SOLUTION FOR INJECTION 100 MG, 100 MG/2 ML, 250 MG/2 ML	4		MO
SOLU-CORTEF (PF) SOLUTION FOR INJECTION 1,000 MG/8 ML, 500 MG/4 ML	4		
SOLU-CORTEF (PF) SOLUTION FOR INJECTION 100 MG/2 ML, 250 MG/2 ML	4		MO
SOLU-MEDROL IV SOLUTION 1,000 MG/8 ML, 500 MG/4 ML	4		MO
SOLU-MEDROL IV SOLUTION 2 GRAM	4		
SOLU-MEDROL SOLUTION FOR INJECTION 125 MG/2 ML, 40 MG/ML	4		MO
SOLU-MEDROL IV SOLUTION (<i>methylprednisolone sodium succ</i>) 1,000 MG, 500 MG	4	4	MO
SOLU-MEDROL (PF) IV SOLUTION 1,000 MG/8 ML, 500 MG/4 ML	4		MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
SOLU-MEDROL (PF) SOLUTION FOR INJECTION 125 MG/2 ML, 40 MG/ML	4		MO
STERAPRED TABS IN A DOSE PACK (prednisone) 5 MG	3	1	MO
STERAPRED DS TABS IN A DOSE PACK (prednisone) 10 MG	3	1	MO
VERIPRED 20 ORAL SOLN 20 MG/5 ML	3		MO
ZEMA-PAK DOSE PACK, TAB 1.5 MG (21 TABS), 1.5 MG (35 TABS), 1.5 MG (51 TABS)		1	MO
Mineralocorticoids			
fludrocortisone tab 0.1 mg		1	MO
COUGH/COLD/ALLERGY			
Cough/Cold/Allergy Combinations			
ALLEGRA-D 12 HOUR TAB (fexofenadine-pseudoephedrine) 60-120 MG	3	1	MO
ALLEGRA-D 24 HOUR TAB (fexofenadine-pseudoephedrine) 180-240 MG	3	1	MO
PROMETHAZINE VC SYRUP 6.25-5 MG/5 ML		1	MO
SEMPREX-D CAP 8-60 MG	3		MO
Mucolytics			
acetylcysteine soln 10 % (100 mg/ml), 20 % (200 mg/ml)		1	MO; B/D
DERMATOLOGICALS			
Acne Products			
ACCUTANE CAP 10 MG, 20 MG, 40 MG	3		
AMNESTEEM CAP 10 MG, 20 MG, 40 MG		1	
AVITA TOPICAL CREAM (tretinoin) 0.025 %		1	MO
AVITA TOPICAL GEL (tretinoin) 0.025 %		1	MO
AZELEX TOPICAL CREAM 20 %	3		MO
BENZAACLIN TOPICAL GEL (clindamycin-benzoyl peroxide) 1-5 %	3	1	MO
BENZAACLIN CAREKIT TOPICAL KIT 1-5 %	3		

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
BENZACLIN PUMP TOPICAL GEL (clindamycin-benzoyl peroxide) 1-5 %	3	1	MO
BENZAMYCIN TOPICAL GEL (erythromycin-benzoyl peroxide) 3-5 %	NF	1	MO
CLARAVIS CAP 10 MG, 20 MG, 30 MG, 40 MG		1	
CLEOCIN T LOTION (clindamycin phosphate) 1 %	NF	1	MO
CLEOCIN T SOLN (clindamycin phosphate) 1 %	NF	1	MO
CLEOCIN T TOPICAL GEL (clindamycin phosphate) 1 %	3	1	MO
CLEOCIN T TOPICAL SWAB (clindamycin phosphate) 1 %	NF	1	MO
CLINDACIN P TOPICAL SWAB (clindamycin phosphate) 1 %		1	MO
CLINDAGEL TOPICAL (clindamycin phosphate) 1 %	3	1	MO
CLINDAMAX LOTION (clindamycin phosphate) 1 %		1	MO
CLINDAMAX TOPICAL GEL (clindamycin phosphate) 1 %		1	MO
CLINDETS TOPICAL SWAB (clindamycin phosphate) 1 %		1	MO
DUAC TOPICAL GEL 1-5 %	3		MO
ERY PADS TOPICAL SWAB (erythromycin with ethanol) 2 %		1	MO
ERYGEL TOPICAL (erythromycin with ethanol) 2 %	NF	1	MO
erythromycin with ethanol topical soln 2 %		1	MO
KLARON TOPICAL SUSP (sulfacetamide sodium (acne)) 10 %	3	1	MO
RETIN-A TOPICAL CREAM (tretinoin) 0.025 %, 0.05 %, 0.1 %	NF	1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
RETIN-A TOPICAL GEL (<i>tretinoin</i>) 0.01 %, 0.025 %	NF	1	MO
SOTRET CAP 10 MG, 20 MG, 30 MG, 40 MG		1	
Anti-inflammatory Agents - Topical			
FLECTOR ADHESIVE PATCH 1.3 %	3		MO
VOLTAREN TOPICAL GEL 1 %	3		MO
Antibiotics - Topical			
ALTABAX OINTMENT 1 %	3		MO
BACTROBAN TOPICAL CREAM 2 %	3		MO
BACTROBAN OINTMENT (<i>mupirocin</i>) 2 %	NF	1	MO
CENTANY OINTMENT (<i>mupirocin</i>) 2 %		1	MO
CORTISPORIN OINTMENT 1 %	2		MO
CORTISPORIN TOPICAL CREAM 3.5-10,000-0.5 MG/G-UNIT/G-%	2		MO
<i>gentamicin ointment 0.1 %</i>		1	MO
<i>gentamicin topical cream 0.1 %</i>		1	MO
Antifungals - Topical			
CICLODAN TOPICAL SOLN (<i>ciclopirox</i>) 8 %		1	MO
<i>clotrimazole topical cream 1 %</i>		1	MO
<i>clotrimazole topical soln 1 %</i>		1	MO
<i>econazole topical cream 1 %</i>		1	MO
ERTACZO TOPICAL CREAM 2 %	3		MO
EXELDERM TOPICAL CREAM 1 %	3		MO
EXELDERM TOPICAL SOLN 1 %	3		MO
FUNGI CURE TOPICAL SPRAY 1 %		1	MO
KURIC TOPICAL CREAM (<i>ketconazole</i>) 2 %		1	MO
LAMISIL TOPICAL SPRAY, NON-AEROSOL 1 %	2		MO
LOPROX SHAMPOO (<i>ciclopirox</i>) 1 %	3	1	MO
LOPROX TOPICAL CREAM (<i>ciclopirox</i>) 0.77 %	3	1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
LOPROX TOPICAL GEL (<i>ciclopirox</i>) 0.77 %	3	1	MO
LOPROX TOPICAL SUSP (<i>ciclopirox</i>) 0.77 %	3	1	MO
LOTRISONE LOTION (<i>clotrimazole-betamethasone</i>) 1-0.05 %	NF	1	MO
LOTRISONE TOPICAL CREAM (<i>clotrimazole-betamethasone</i>) 1-0.05 %	NF	1	MO
MENTAX TOPICAL CREAM 1 %	2		MO
NAFTIN TOPICAL CREAM 1 %	3		MO
NAFTIN TOPICAL GEL 1 %	3		MO
NIZORAL SHAMPOO (<i>ketconazole</i>) 2 %	NF	1	MO
NYAMYC TOPICAL POWDER (<i>nystatin</i>) 100,000 UNIT/G		1	MO
<i>nystatin ointment 100,000 unit/g</i>		1	MO
<i>nystatin topical cream 100,000 unit/g</i>		1	MO
<i>nystatin-triamcinolone ointment 100,000-0.1 unit/gram-%</i>		1	MO
<i>nystatin-triamcinolone topical cream 100,000-0.1 unit/g-%</i>		1	MO
NYSTOP TOPICAL POWDER (<i>nystatin</i>) 100,000 UNIT/G		1	MO
OXISTAT LOTION 1 %	3		MO
OXISTAT TOPICAL CREAM 1 %	3		MO
PEDI-DRI TOPICAL POWDER (<i>nystatin</i>) 100,000 UNIT/G		1	MO
PENLAC TOPICAL SOLN (<i>ciclopirox</i>) 8 %	3	1	MO
VUSION OINTMENT 0.25-15-81.35 %	NF		MO
Antineoplastic or Premalignant Lesion Agents - Topical			
CARAC TOPICAL CREAM 0.5 %	2		MO
EFUDEX TOPICAL CREAM (<i>fluorouracil</i>) 5 %	3	1	MO
EFUDEX TOPICAL SOLN (<i>fluorouracil</i>) 2 %, 5 %	3	1	MO
FLUOROPLEX TOPICAL CREAM 1 %	2		MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
PANRETIN TOPICAL GEL 0.1 %	5		MO
SOLARAZE TOPICAL GEL 3 %	2		MO
TARGRETIN TOPICAL GEL 1 %	5		MO
Antipruritics - Topical			
PRUDOXIN TOPICAL CREAM 5 %	NF		MO
ZONALON TOPICAL CREAM 5 %	NF		MO
Antipsoriatics			
8-MOP CAP 10 MG	2		MO
AMEVIVE IM 15 MG (0.5 ML)	5		PA; LA
CALCITRENE OINTMENT (<i>calcipotriene</i>) 0.005 %		1	MO
DOVONEX TOPICAL CREAM 0.005 %	3		MO
DOVONEX TOPICAL SOLN (<i>calcipotriene</i>) 0.005 %	NF	1	MO
OXSORALEN ULTRA CAP 10 MG	2		MO
SORIATANE CAP 10 MG, 17.5 MG, 22.5 MG, 25 MG	5		MO
STELARA SUB-Q 45 MG/0.5 ML	5		PA
STELARA SUB-Q SYRINGE 45 MG/0.5 ML, 90 MG/ML	5		PA
TAZORAC TOPICAL CREAM 0.05 %, 0.1 %	2		MO
TAZORAC TOPICAL GEL 0.05 %, 0.1 %	2		MO
VECTICAL OINTMENT 3 MCG/GRAM	2		MO
Antiseborrheic Products			
<i>selenium sulfide topical susp 2.5 %</i>		1	MO
Antivirals - Topical			
DENAVIR TOPICAL CREAM 1 %	2		MO
XERESE TOPICAL CREAM 5-1 %	NF		MO
ZOVIRAX OINTMENT 5 %	2		MO
ZOVIRAX TOPICAL CREAM 5 %	2		MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
Burn Products			
SILVADENE TOPICAL CREAM (<i>silver sulfadiazine</i>) 1 %	NF	1	MO
SSD TOPICAL CREAM (<i>silver sulfadiazine</i>) 1 %		1	MO
SSD AF TOPICAL CREAM (<i>silver sulfadiazine</i>) 1 %		1	MO
SULFAMYLON TOPICAL CREAM 85 MG/G	3		MO
SULFAMYLON TOPICAL PACKET 50 GRAM	3		MO
THERMAZENE TOPICAL CREAM (<i>silver sulfadiazine</i>) 1 %		1	MO
Corticosteroids - Topical			
ACLOVATE OINTMENT (<i>alclometasone</i>) 0.05 %	3	1	MO
ACLOVATE TOPICAL CREAM (<i>alclometasone</i>) 0.05 %	3	1	MO
ALA-CORT TOPICAL CREAM (<i>hydrocortisone</i>) 1 %		1	MO
ALA-SCALP LOTION 2 %	NF		MO
<i>amcinonide lotion 0.1 %</i>		1	MO
<i>amcinonide ointment 0.1 %</i>		1	MO
<i>amcinonide topical cream 0.1 %</i>		1	MO
APEXICON OINTMENT (<i>diflorasone</i>) 0.05 %		1	MO
BETA-VAL LOTION (<i>betamethasone valerate</i>) 0.1 %		1	MO
BETA-VAL TOPICAL CREAM (<i>betamethasone valerate</i>) 0.1 %		1	MO
<i>betamethasone dipropionate lotion 0.05 %</i>		1	MO
<i>betamethasone dipropionate ointment 0.05 %</i>		1	MO
<i>betamethasone dipropionate topical cream 0.05 %</i>		1	MO
<i>betamethasone valerate ointment 0.1 %</i>		1	MO
<i>betamethasone, augmented topical gel 0.05 %</i>		1	MO

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CARMOL HC TOPICAL CREAM 1-10 %	3		MO
CORDRAN TAPE 4 MCG/CM2	3		MO
CORMAX OINTMENT (<i>clobetasol</i>) 0.05 %		1	MO
CORMAX TOPICAL CREAM (<i>clobetasol</i>) 0.05 %		1	MO
CORMAX TOPICAL SOLN (<i>clobetasol</i>) 0.05 %		1	MO
CUTIVATE OINTMENT (<i>fluticasone</i>) 0.005 %	NF	1	MO
CUTIVATE TOPICAL CREAM (<i>fluticasone</i>) 0.05 %	NF	1	MO
DERMA-SMOOTH/FS BODY OIL TOPICAL 0.01 %	3		MO
DERMA-SMOOTH/FS SCALP OIL TOPICAL 0.01 %	3		MO
DERMATOP OINTMENT (<i>prednicarbate</i>) 0.1 %	3	1	MO
DERMATOP TOPICAL CREAM (<i>prednicarbate</i>) 0.1 %	3	1	MO
DESONATE TOPICAL GEL 0.05 %	NF		MO
DESOWEN LOTION (<i>desonide</i>) 0.05 %	NF	1	MO
DESOWEN OINTMENT (<i>desonide</i>) 0.05 %	NF	1	MO
DESOWEN TOPICAL CREAM (<i>desonide</i>) 0.05 %	NF	1	MO
<i>diflorasone topical cream 0.05 %</i>		1	MO
DIPROLENE LOTION (<i>betamethasone, augmented</i>) 0.05 %	NF	1	MO
DIPROLENE OINTMENT (<i>betamethasone, augmented</i>) 0.05 %	NF	1	MO
DIPROLENE AF TOPICAL CREAM (<i>betamethasone, augmented</i>) 0.05 %	NF	1	MO
ELOCON OINTMENT (<i>mometasone</i>) 0.1 %	NF	1	MO
ELOCON TOPICAL CREAM (<i>mometasone</i>) 0.1 %	NF	1	MO
ELOCON TOPICAL SOLN (<i>mometasone</i>) 0.1 %	NF	1	MO
<i>fluocinolone ointment 0.025 %</i>		1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
<i>fluocinolone topical cream 0.01 %, 0.025 %</i>		1	MO
<i>fluocinolone topical soln 0.01 %</i>		1	MO
<i>fluocinonide ointment 0.05 %</i>		1	MO
<i>fluocinonide topical cream 0.05 %</i>		1	MO
<i>fluocinonide topical gel 0.05 %</i>		1	MO
<i>fluocinonide topical soln 0.05 %</i>		1	MO
FLUOCINONIDE-E TOPICAL CREAM (<i>fluocinonide-emollient</i>) 0.05 %		1	MO
HALAC TOPICAL PACK, OINTMENT & LOTION 0.05-12 %		1	MO
HALOG OINTMENT 0.1 %	3		MO
HALOG TOPICAL CREAM 0.1 %	3		MO
HALONATE PAC TOPICAL PACK, OINTMENT & LOTION 0.05-12 %		1	MO
<i>hydrocortisone lotion 1 %, 2.5 %</i>		1	MO
<i>hydrocortisone ointment 1 %, 2.5 %</i>		1	MO
<i>hydrocortisone valerate topical cream 0.2 %</i>		1	MO
<i>hydrocortisone-mineral oil-white petrolatum ointment 1 %</i>		1	MO
HYTONE TOPICAL CREAM (<i>hydrocortisone</i>) 2.5 %	NF	1	MO
KENALOG TOPICAL AEROSOL 0.147 MG/GRAM	2		MO
KERATOL HC TOPICAL CREAM 1-10 %		1	MO
LOCOID OINTMENT (<i>hydrocortisone butyrate</i>) 0.1 %	NF	1	MO
LOCOID TOPICAL CREAM (<i>hydrocortisone butyrate</i>) 0.1 %	NF	1	MO
LOCOID TOPICAL SOLN (<i>hydrocortisone butyrate</i>) 0.1 %	NF	1	MO
LOCOID LIPOCREAM TOPICAL 0.1 %	2		MO
LOKARA LOTION (<i>desonide</i>) 0.05 %		1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
PROCTO-KIT RECTAL CREAM 1 %		1	MO
SCALACORT LOTION 2 %		1	MO
TEMOVATE OINTMENT (<i>clobetasol</i>) 0.05 %	NF	1	MO
TEMOVATE TOPICAL CREAM (<i>clobetasol</i>) 0.05 %	NF	1	MO
TEMOVATE TOPICAL GEL (<i>clobetasol</i>) 0.05 %	NF	1	MO
TEMOVATE TOPICAL SOLN (<i>clobetasol</i>) 0.05 %	NF	1	MO
TEMOVATE E TOPICAL CREAM (<i>clobetasol-emollient</i>) 0.05 %	2	1	MO
TEXACORT TOPICAL SOLN 2.5 %	3		MO
TOPICORT OINTMENT (<i>desoximetasone</i>) 0.25 %	NF	1	MO
TOPICORT TOPICAL CREAM (<i>desoximetasone</i>) 0.25 %	NF	1	MO
TOPICORT TOPICAL GEL (<i>desoximetasone</i>) 0.05 %	NF	1	MO
TOPICORT LP OINTMENT 0.05 %	3		
TOPICORT LP TOPICAL CREAM (<i>desoximetasone</i>) 0.05 %	3	1	MO
<i>triamcinolone acetonide lotion 0.025 %, 0.1 %</i>		1	MO
<i>triamcinolone acetonide ointment 0.025 %, 0.1 %, 0.5 %</i>		1	MO
<i>triamcinolone acetonide topical cream 0.025 %, 0.5 %</i>		1	MO
TRIANEX OINTMENT (<i>triamcinolone acetonide</i>) 0.05 %	2	1	MO
TRIDERM TOPICAL CREAM (<i>triamcinolone acetonide</i>) 0.1 %		1	MO
U-CORT TOPICAL CREAM 1-10 %		1	MO
ULTRAVATE OINTMENT (<i>halobetasol propionate</i>) 0.05 %	3	1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
ULTRAVATE TOPICAL CREAM (<i>halobetasol propionate</i>) 0.05 %	3	1	MO
ULTRAVATE PAC TOPICAL PACK, OINTMENT & LOTION 0.05-12 %	3		MO
WESTCORT OINTMENT (<i>hydrocortisone valerate</i>) 0.2 %	NF	1	MO
Emollients			
LAC-HYDRIN LOTION (<i>ammonium lactate</i>) 12 %	NF	1	MO
LAC-HYDRIN TOPICAL CREAM (<i>ammonium lactate</i>) 12 %	NF	1	MO
LACLOTION (<i>ammonium lactate</i>) 12 %		1	MO
LACTREX TOPICAL CREAM (<i>ammonium lactate</i>) 12 %		1	MO
Enzymes - Topical			
SANTYL OINTMENT 250 UNIT/G	2		MO
Immunomodulating Agents - Topical			
ALDARA TOPICAL CREAM PACKET (<i>imiquimod</i>) 5 %	3	1	MO
ZYCLARA TOPICAL CREAM PACKET 3.75 %	3		MO
Immunosuppressive Agents - Topical			
ELIDEL TOPICAL CREAM 1 %	3		MO
PROTOPIC OINTMENT 0.03 %, 0.1 %	2		MO
Keratolytic/Antimitotic Agents			
CONDYLOX TOPICAL GEL 0.5 %	2		MO
CONDYLOX TOPICAL SOLN (<i>podofilox</i>) 0.5 %	NF	1	MO
Local Anesthetics - Topical			
EMLA TOPICAL CREAM (<i>lidocaine-prilocaine</i>) 2.5-2.5 %	3	1	MO; B/D
<i>lidocaine mucous membrane jelly in applicator</i> 2 %		1	MO

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<i>lidocaine ointment 5 %</i>		1	MO
<i>lidocaine topical soln 4 %</i>		1	MO
LIDODERM ADHESIVE PATCH 5 %(700 MG/PATCH)	2		MO
XYLOCAINE MUCOSAL SOLN (<i>lidocaine HCl</i>) 4 %	NF	1	MO
XYLOCAINE JELLY MUCOSAL GEL (<i>lidocaine HCl</i>) 2 %	NF	1	MO
Rosacea Agents			
FINACEA TOPICAL GEL 15 %	3		MO
METROCREAM TOPICAL (<i>metronidazole</i>) 0.75 %	NF	1	MO
METROGEL TOPICAL 1 %	2		MO
METROLOTION (<i>metronidazole</i>) 0.75 %	NF	1	MO
<i>metronidazole topical gel 0.75 %</i>		1	MO
NORITATE TOPICAL CREAM 1 %	3		MO
VITAZOL TOPICAL CREAM (<i>metronidazole</i>) 0.75 %		1	MO
Scabicides & Pediculicides			
ACTICIN TOPICAL CREAM (<i>permethrin</i>) 5 %		1	MO
ELIMITE TOPICAL CREAM (<i>permethrin</i>) 5 %	NF	1	MO
EURAX LOTION 10 %	2		MO
EURAX TOPICAL CREAM 10 %	2		MO
<i>lindane lotion 1 %</i>		1	MO
<i>lindane shampoo 1 %</i>		1	MO
ULESFIA LOTION 5 %	3		MO
DIGESTIVE AIDS			
Digestive Enzymes			
CREON CAP 12,000-38,000 -60,000 UNIT, 24,000-76,000 -120,000 UNIT, 6,000-19,000 -30,000 UNIT	2		MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
PANCREAZE CAP 10,500-25,000 -43,750 UNIT, 16,800-40,000 -70,000 UNIT, 21,000-37,000 -61,000 UNIT, 4,200-10,000 -17,500 UNIT	2		MO
PANCRELIPASE 5000 CAP 5,000-17,000 -27,000 UNIT	2		MO
ZENPEP CAP 10,000-34,000 -55,000 UNIT, 15,000-51,000 -82,000 UNIT, 20,000-68,000 -109,000 UNIT, 5,000-17,000 -27,000 UNIT	2		MO
DIURETICS			
Carbonic Anhydrase Inhibitors			
<i>acetazolamide tab 125 mg, 250 mg</i>		1	MO
<i>acetazolamide solution for injection 500 mg</i>		4	
DIAMOX SEQUELS CAP (<i>acetazolamide</i>) 500 MG	NF	1	MO
NEPTAZANE TAB (<i>methazolamide</i>) 25 MG, 50 MG	NF	1	MO
Diuretic Combinations			
ALDACTAZIDE TAB 50-50 MG	2		MO
ALDACTAZIDE TAB (<i>spironolacton-hydrochlorothiaz</i>) 25-25 MG	NF	1	MO
<i>amiloride-hydrochlorothiazide tab 5-50 mg</i>		1	MO
DYAZIDE CAP (<i>triamterene-hydrochlorothiazid</i>) 37.5-25 MG	NF	1	MO
MAXZIDE TAB (<i>triamterene-hydrochlorothiazid</i>) 75-50 MG	NF	1	MO
MAXZIDE-25MG TAB (<i>triamterene-hydrochlorothiazid</i>) 37.5-25 MG	NF	1	MO
<i>triamterene-hydrochlorothiazide cap 50-25 mg</i>		1	MO
Loop Diuretics			
<i>bumetanide injection 0.25 mg/ml</i>		4	
<i>bumetanide tab 0.5 mg, 1 mg</i>		1	MO
BUMEX TAB (<i>bumetanide</i>) 2 MG	NF	1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
DEMADEX TAB (<i>torseamide</i>) 10 MG, 100 MG, 20 MG, 5 MG	3	1	MO
EDECIN TAB 25 MG	3		MO
<i>furosemide injection 10 mg/ml</i>		4	MO
<i>furosemide oral soln 10 mg/ml, 40 mg/5 ml</i>		1	MO
<i>furosemide syringe 10 mg/ml</i>		4	MO
LASIX TAB (<i>furosemide</i>) 20 MG, 40 MG, 80 MG	NF	1	MO
SODIUM EDECIN IV SOLUTION 50 MG	4		
<i>torseamide iv 20 mg/2 ml (10 mg/ml)</i>		4	
<i>torseamide iv 50 mg/5 ml (10 mg/ml)</i>		4	MO
Osmotic Diuretics			
<i>mannitol 25 % iv 25 %</i>		4	MO
Potassium Sparing Diuretics			
ALDACTONE TAB (<i>spironolactone</i>) 100 MG, 25 MG, 50 MG	NF	1	MO
DYRENIUM CAP 100 MG, 50 MG	3		MO
MIDAMOR TAB (<i>amiloride</i>) 5 MG	NF	1	MO
Thiazides and Thiazide-Like Diuretics			
<i>chlorothiazide tab 250 mg, 500 mg</i>		1	MO
<i>chlorthalidone tab 25 mg, 50 mg</i>		1	MO
DIURIL ORAL SUSP 250 MG/5 ML	2		MO
DIURIL IV SOLUTION (<i>chlorothiazide sodium</i>) 500 MG	4	4	
<i>hydrochlorothiazide tab 12.5 mg, 25 mg, 50 mg</i>		1	MO
<i>indapamide tab 1.25 mg, 2.5 mg</i>		1	MO
<i>methyclothiazide tab 5 mg</i>		1	MO
MICROZIDE CAP (<i>hydrochlorothiazide</i>) 12.5 MG	NF	1	MO
THALITONE TAB 15 MG	2		MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
ZAROXOLYN TAB (<i>metolazone</i>) 10 MG, 2.5 MG, 5 MG	NF	1	MO
ENDOCRINE AND METABOLIC AGENTS - MISC.			
Bone Density Regulators			
ACTONEL TAB 150 MG, 30 MG, 35 MG, 5 MG	2		MO
ACTONEL WITH CALCIUM TABS IN A DOSE PACK 35 MG-500 MG CALCIUM(1250MG)	2		
AREDIA IV SOLUTION (<i>pamidronate</i>) 30 MG, 90 MG	4	4	MO; B/D
AELVIA TAB 35 MG	2		MO
BONIVA IV SYRINGE 3 MG/3 ML	4		MO; B/D
BONIVA TAB 150 MG	2		MO
BONIVA TAB 2.5 MG	2		
DIDRONEL TAB (<i>etidronate disodium</i>) 200 MG, 400 MG	NF	1	MO
FORTEO SUB-Q PEN INJECTOR 20 MCG/DOSE (750 MCG/3 ML), 20 MCG/DOSE - 600 MCG/2.4 ML	2		
FORTICAL NASAL SPRAY AEROSOL (<i>calcitonin (salmon)</i>) 200 UNIT/ACTUATION		1	MO
FOSAMAX ORAL SOLN 70 MG/75 ML	2		
FOSAMAX TAB (<i>alendronate</i>) 10 MG, 35 MG, 40 MG, 5 MG, 70 MG	NF	1	MO
FOSAMAX PLUS D TAB 70-2,800 MG-UNIT, 70-5,600 MG-UNIT	3		MO
MIACALCIN INJECTION 200 UNIT/ML	4		MO; B/D
MIACALCIN NASAL SPRAY AEROSOL (<i>calcitonin (salmon)</i>) 200 UNIT/ACTUATION	NF	1	MO
<i>pamidronate iv 30 mg/10 ml (3 mg/ml), 60 mg/10 ml (6 mg/ml)</i>		4	MO; B/D
<i>pamidronate iv 90 mg/10 ml (9 mg/ml)</i>		4	B/D
PROLIA SUB-Q SYRINGE 60 MG/ML	4		

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
RECLAST IV 5 MG/100 ML	4		
SKELID TAB 240 MG	2		
XGEVA SUB-Q 120 MG/1.7 ML (70 MG/ML)	5		
ZOMETA IV 4 MG/5 ML	5		
Corticotropin			
ACTHAR H.P. INJECTION GEL 80 UNIT/ML	5		
Fertility Regulators			
NOVAREL IM (<i>chorionic gonadotropin, human</i>) 10,000 UNIT	4	4	
PREGNYL IM (<i>chorionic gonadotropin, human</i>) 10,000 UNIT	4	4	
Growth Hormone Receptor Antagonists			
SOMAVERT SUB-Q SOLN 10 MG, 15 MG, 20 MG	5		LA
Growth Hormone Releasing Hormones (GHRH)			
EGRIFTA SUB-Q SOLN 1 MG	5		
Growth Hormones			
GENOTROPIN SUBQ CARTRIDGE 12 MG/ML (36 UNIT/ML)	5		
GENOTROPIN SUBQ CARTRIDGE 5 MG/ML (15 UNIT/ML)	4		
GENOTROPIN MINIQUICK SUB-Q SYRINGE 0.2 MG/0.25 ML, 0.4 MG/0.25 ML, 0.6 MG/0.25 ML	4		
GENOTROPIN MINIQUICK SUB-Q SYRINGE 0.8 MG/0.25 ML, 1 MG/0.25 ML, 1.2 MG/0.25 ML, 1.4 MG/0.25 ML, 1.6 MG/0.25 ML, 1.8 MG/0.25 ML, 2 MG/0.25 ML	5		
HUMATROPE INJECTION, CARTRIDGE 12 (36 UNIT) MG, 24 (72 UNIT) MG	5		
HUMATROPE INJECTION, CARTRIDGE 6 (18 UNIT) MG	4		
HUMATROPE SOLUTION FOR INJECTION 5 (15 UNIT) MG	5		

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
NORDITROPIN CARTRIDGE SUBQ CARTRIDGE 15 MG/1.5 ML (10 MG/ML)	5		
NORDITROPIN CARTRIDGE SUBQ CARTRIDGE 5 MG/1.5 ML (3.3 MG/ML)	4		
NORDITROPIN FLEXPPO SUB-Q PEN INJECTOR 10 MG/1.5 ML (6.7 MG/ML), 5 MG/1.5 ML (3.3 MG/ML)	4		
NORDITROPIN FLEXPPO SUB-Q PEN INJECTOR 15 MG/1.5 ML (10 MG/ML)	5		
NORDITROPIN NORDIFLEX SUB-Q PEN INJECTOR 10 MG/1.5 ML (6.7 MG/ML), 5 MG/1.5 ML (3.3 MG/ML)	4		
NORDITROPIN NORDIFLEX SUB-Q PEN INJECTOR 15 MG/1.5 ML (10 MG/ML), 30 MG/3 ML (10 MG/ML)	5		
NUTROPIN SUB-Q SOLN 10 MG	5		
NUTROPIN SUB-Q SOLN 5 MG	4		
NUTROPIN AQ SUB-Q 10 MG/2 ML (5 MG/ML)	5		
NUTROPIN AQ SUBQ CARTRIDGE 10 MG/2 ML (5 MG/ML), 20 MG/2 ML (10 MG/ML)	5		
NUTROPIN AQ NUSPIN SUBQ CARTRIDGE 10 MG/2 ML (5 MG/ML), 20 MG/2 ML (10 MG/ML)	5		
OMNITROPE SUB-Q SOLN 5.8 MG	5		
OMNITROPE SUBQ CARTRIDGE 10 MG/1.5 ML, 5 MG/1.5 ML (3.3 MG/ML)	4		
SAIZEN SUB-Q SOLN 5 MG, 8.8 MG	5		
SAIZEN CLICK.EASY SUBQ CARTRIDGE 8.8 MG/1.5 ML (FNL)	5		
SEROSTIM SUB-Q SOLN 4 MG, 5 MG, 6 MG	5		
SEROSTIM SUB-Q SOLN 8.8 MG	5		
TEV-TROPIN SUB-Q SOLN 5 MG	4		
ZORBTIVE SUB-Q SOLN 8.8 MG	5		LA

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
Hormone Receptor Modulators			
EVISTA TAB 60 MG	2		MO
Insulin-Like Growth Factors (Somatomedins)			
INCRELEX SUB-Q 10 MG/ML	4		LA
LHRH/GnRH Agonist Analog Pituitary Suppressants			
LUPRON DEPOT-PED IM KIT 11.25 MG, 15 MG, 7.5 MG (PED)	4		
SYNAREL NASAL SPRAY 2 MG/ML	5		MO
Metabolic Modifiers			
ALDURAZYME IV 2.9 MG/5 ML	5		LA
BUPHENYL ORAL POWDER	5		MO
BUPHENYL TAB 500 MG	5		MO
CALCIJEX IV (<i>calcitriol</i>)	4	4	B/D
CARNITOR IV (<i>levocarnitine</i>) 200 MG/ML	4	4	MO; B/D
CARNITOR TAB (<i>levocarnitine</i>) 330 MG	3	1	MO; B/D
CARNITOR ORAL SOLN (<i>levocarnitine (with sucrose)</i>) 100 MG/ML	3	1	MO; B/D
CARNITOR SUGAR-FREE ORAL SOLN 100 MG/ML	3		MO; B/D
CYSTADANE ORAL POWDER	3		
ELAPRASE IV 6 MG/3 ML	5		LA
FABRAZYME IV SOLUTION 35 MG	5		LA
FABRAZYME IV SOLUTION 5 MG	5		LA
HECTOROL IV 2 MCG/ML (1 ML), 4 MCG/2 ML	4		MO; B/D
KUVAN SOLUBLE TAB 100 MG	5		LA
LUMIZYME IV SOLUTION 50 MG	5		LA
MYOZYME IV SOLUTION 50 MG	5		LA
NAGLAZYME IV 5 MG/5 ML	5		LA
ORFADIN CAP 10 MG, 2 MG, 5 MG	2		LA

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
ROCALTROL CAP (<i>calcitriol</i>) 0.25 MCG, 0.5 MCG	NF	1	MO; B/D
ROCALTROL ORAL SOLN (<i>calcitriol</i>) 1 MCG/ML	NF	1	MO; B/D
SENSIPAR TAB 30 MG	2		
SENSIPAR TAB 60 MG, 90 MG	5		
ZEMPLAR CAP 1 MCG, 2 MCG, 4 MCG	2		MO; B/D
ZEMPLAR IV 2 MCG/ML, 5 MCG/ML	4		MO; B/D
Posterior Pituitary Hormones			
DDAVP INJECTION (<i>desmopressin</i>) 4 MCG/ML	4	4	MO
DDAVP NASAL SOLN (<i>desmopressin</i>) 0.01 % (REFRIG)	NF	1	MO
DDAVP NASAL SPRAY AEROSOL (<i>desmopressin</i>) 10 MCG/SPRAY	3	1	MO
DDAVP TAB (<i>desmopressin</i>) 0.1 MG, 0.2 MG	NF	1	MO
<i>desmopressin nasal spray 10 mcg/spray</i>		1	MO
STIMATE NASAL SPRAY 150 MCG/SPRAY	3		
Somatostatic Agents			
<i>octreotide acetate syringe 100 mcg/ml (1 ml)</i>		4	
<i>octreotide acetate syringe 50 mcg/ml (1 ml)</i>		1	
<i>octreotide acetate syringe 500 mcg/ml (1 ml)</i>		5	
SANDOSTATIN INJECTION (<i>octreotide acetate</i>) 1,000 MCG/ML, 500 MCG/ML	5	5	
SANDOSTATIN INJECTION (<i>octreotide acetate</i>) 100 MCG/ML, 200 MCG/ML	4	4	
SANDOSTATIN INJECTION (<i>octreotide acetate</i>) 50 MCG/ML	4	1	
SANDOSTATIN LAR DEPOT IM KIT 10 MG, 20 MG, 30 MG	5		
SOMATULINE DEPOT SUB-Q SYRINGE 120 MG/0.5 ML, 60 MG/0.2 ML, 90 MG/0.3 ML	5		

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
Vasopressin Receptor Antagonists			
SAMSCA TAB 15 MG, 30 MG	5		
VAPRISOL IV 20 MG/100 ML	4		
ESTROGENS			
Estrogen Combinations			
ACTIVELLA TAB (<i>estradiol-norethindrone acet</i>) 0.5-0.1 MG, 1-0.5 MG	3	1	MO
ANGELIQ TAB 1-0.5 MG	3		MO
CLIMARA PRO TRANSDERM PATCH 0.045-0.015 MG/24 HR	2		MO
COMBIPATCH TRANSDERMAL 0.05-0.14 MG/24 HR, 0.05-0.25 MG/24 HR	3		MO
FEMHRT 1/5 TAB 1-5 MG-MCG	3		MO
FEMHRT LOW DOSE TAB 0.5-2.5 MG-MCG	3		MO
JEVANTIQUE TAB 1-5 MG-MCG		1	MO
JINTELI TAB 1-5 MG-MCG		1	MO
MIMVEY TAB (<i>estradiol-norethindrone acet</i>) 1-0.5 MG		1	MO
PREFEST TAB 1/1-0.09 MG (15/15)	3		MO
PREMPHASE TAB 0.625 MG (14)/ 0.625MG-5MG(14)	2		MO
PREMPRO TAB 0.3-1.5 MG, 0.45-1.5 MG, 0.625-2.5 MG, 0.625-5 MG	2		MO
ESTROGENS			
ALORA TRANSDERM PATCH 0.025 MG/24 HR, 0.05 MG/24 HR, 0.075 MG/24 HR, 0.1 MG/24 HR	3		MO
CENESTIN TAB 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG	3		MO
CLIMARA TRANSDERM PATCH (<i>estradiol</i>) 0.025 MG/24 HR, 0.0375 MG/24 HR, 0.05 MG/24 HR, 0.06 MG/24 HR, 0.075 MG/24 HR, 0.1 MG/24 HR	NF	1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
DELESTROGEN IM OIL (<i>estradiol valerate</i>) 10 MG/ML, 20 MG/ML, 40 MG/ML	4	4	MO
DEPO-ESTRADIOL IM OIL 5 MG/ML	4		MO
DIVIGEL TRANSDERMAL GEL PACKET 0.25 (0.1) MG (%), 0.5 (0.1) MG (%), 1 (0.1) MG (%)	3		MO
ENJUVIA TAB 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG	3		MO
ESTRACE TAB (<i>estradiol</i>) 0.5 MG, 1 MG, 2 MG	NF	1	MO
ESTRADERM TRANSDERM PATCH 0.05 MG/24 HR, 0.1 MG/24 HR	3		MO
ESTRASORB TRANSDERMAL EMULSION PKT 2.5 MG/G (1.74 G)	3		MO
ESTROGEL TRANSDERMAL GEL PUMP 1.25 GRAM/ACTUATION	3		MO
EVAMIST TRANSDERMAL SPRAY 1.53 MG/SPRAY (1.7%)	3		MO
FEMTRACE TAB 0.45 MG, 0.9 MG, 1.8 MG	3		MO
MENEST TAB 0.3 MG, 0.625 MG, 1.25 MG, 2.5 MG	2		MO
MENOSTAR TRANSDERM PATCH 14 MCG/24 HR	3		MO
OGEN 0.625 TAB (<i>estropipate</i>) 0.75 MG	NF	1	MO
OGEN 1.25 TAB (<i>estropipate</i>) 1.5 MG	NF	1	MO
OGEN 2.5 TAB (<i>estropipate</i>) 3 MG	NF	1	MO
PREMARIN SOLUTION FOR INJECTION 25 MG	4		MO
PREMARIN TAB 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG	2		MO
VIVELLE TRANSDERM PATCH 0.05 MG/24 HR, 0.1 MG/24 HR	3		MO
VIVELLE-DOT TRANSDERM PATCH 0.025 MG/24 HR, 0.0375 MG/24 HR, 0.05 MG/24 HR, 0.075 MG/24 HR, 0.1 MG/24 HR	3		MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
FLUOROQUINOLONES			
FLUOROQUINOLONES			
AVELOX TAB 400 MG	2		MO
AVELOX ABC PACK TAB 400 MG	2		MO
AVELOX IN SODIUM CHLORIDE (ISO-OSMOTIC) IV PIGGY BACK 400 MG/250 ML	4		
CIPRO ORAL SUSP 250 MG/5 ML, 500 MG/5 ML	2		MO
CIPRO TAB (<i>ciprofloxacin</i>) 250 MG, 500 MG, 750 MG	NF	1	MO
CIPRO I.V. SOLN (<i>ciprofloxacin</i>) 200 MG/20 ML	4	4	
CIPRO I.V. SOLN (<i>ciprofloxacin</i>) 400 MG/40 ML	4	4	MO
CIPRO IN D5W IV PIGGY BACK 400 MG/200 ML	4		MO
CIPRO IN D5W IV PIGGY BACK (<i>ciprofloxacin in D5W</i>) 200 MG/100 ML	4	4	
CIPRO XR 24 HR TAB (<i>ciprofloxacin (mixture)</i>) 1,000 MG, 500 MG	3	1	MO
<i>ciprofloxacin iv 10 mg/ml</i>		4	
<i>ciprofloxacin tab 100 mg</i>		1	MO
<i>ciprofloxacin in d5w iv piggy back 400 mg/200 ml</i>		4	
LEVAQUIN IV 25 MG/ML	4		
LEVAQUIN ORAL SOLN (<i>levofloxacin</i>) 250 MG/10 ML	2	1	MO
LEVAQUIN TAB (<i>levofloxacin</i>) 250 MG, 500 MG, 750 MG	2	1	MO
LEVAQUIN IN D5W IV PIGGY BACK (<i>levofloxacin in D5W</i>) 250 MG/50 ML, 500 MG/100 ML, 750 MG/150 ML	4	4	
LEVAQUIN LEVA-PAK TAB (<i>levofloxacin</i>) 750 MG	2	1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
NOROXIN TAB 400 MG	3		MO
<i>ofloxacin tab 200 mg, 300 mg, 400 mg</i>		1	MO
PROQUIN XR 24 HR TAB 500 MG	3		MO
GASTROINTESTINAL AGENTS - MISC.			
Gallstone Solubilizing Agents			
ACTIGALL CAP (<i>ursodiol</i>) 300 MG	NF	1	MO
CHENODAL TAB 250 MG	5		
URSO 250 TAB (<i>ursodiol</i>) 250 MG	NF	1	MO
URSO FORTE TAB (<i>ursodiol</i>) 500 MG	NF	1	MO
Gastrointestinal Chloride Channel Activators			
AMITIZA CAP 24 MCG, 8 MCG	2		MO
Gastrointestinal Stimulants			
<i>metoclopramide oral soln 5 mg/5 ml</i>		1	MO
<i>metoclopramide syringe 5 mg/ml</i>		4	MO
METOZOLV ODT TAB, RAPID DISSOLVE 10 MG, 5 MG	3		MO
REGLAN INJECTION (<i>metoclopramide</i>) 5 MG/ML	4	4	MO
REGLAN TAB (<i>metoclopramide</i>) 10 MG, 5 MG	NF	1	MO
Inflammatory Bowel Agents			
APRISO 24 HR CAP 0.375 GRAM	2		MO
ASACOL TAB 400 MG	2		MO
ASACOL HD TAB 800 MG	2		MO
AZULFIDINE TAB (<i>sulfasalazine</i>) 500 MG	NF	1	MO
AZULFIDINE EN-TABS TAB (<i>sulfasalazine</i>) 500 MG	NF	1	MO
CANASA RECTAL SUPPOSITORY 1,000 MG	2		MO
CIMZIA SUBQ SYRINGE KIT 400 MG/2 ML (200 MG/ML X 2)	5		PA
CIMZIA POWDER FOR RECONSTITUTION SUB-Q KIT 400 MG (200 MG X 2)	5		PA

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
CIMZIA STARTER KIT SUBQ SYRINGE KIT 400 MG/2 ML (200 MG/ML X 2)	5		PA
COLAZAL CAP (<i>balsalazide</i>) 750 MG	NF	1	MO
DIPENTUM CAP 250 MG	3		MO
LIALDA TAB 1.2 G	2		MO
REMICADE IV SOLUTION 100 MG	5		PA
ROWASA ENEMA (<i>mesalamine</i>) 4 GRAM/60 ML	NF	1	MO
SULFAZINE TAB (<i>sulfasalazine</i>) 500 MG		1	MO
SULFAZINE EC TAB (<i>sulfasalazine</i>) 500 MG		1	MO
Intestinal Acidifiers			
ENULOSE ORAL SOLN (<i>lactulose</i>) 10 GRAM/15 ML		1	MO
GENERLAC ORAL SOLN (<i>lactulose</i>) 10 GRAM/15 ML		1	MO
Irritable Bowel Syndrome (IBS) Agents			
LOTRONEX TAB 0.5 MG, 1 MG	2		MO
Peripheral Opioid Receptor Antagonists			
RELISTOR SUB-Q 12 MG/0.6 ML	4		MO
RELISTOR SUB-Q KIT 12 MG/0.6 ML	4		MO
Phosphate Binder Agents			
ELIPHOS TAB 667 MG	2		MO
FOSRENOL CHEWABLE TAB 1,000 MG, 500 MG, 750 MG	2		MO
PHOSLO CAP (<i>calcium acetate</i>) 667 MG	NF	1	MO
RENVELA ORAL PWPK 0.8 GRAM, 2.4 GRAM	2		MO
RENVELA TAB 800 MG	2		MO
GENITOURINARY AGENTS - MISCELLANEOUS			
Alkalinizers			
<i>potassium citrate er tab 10 meq, 5 meq</i>		1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
Genitourinary Irrigants			
<i>acetic acid irrigation soln 0.25 %</i>		1	MO
NEOSPORIN GU IRRIGANT (<i>neomycin-polymyxin B GU</i>) 40-200,000 MG-UNIT/ML	NF	1	MO
STERILE SALINE IRRIGATION SOLN (<i>sodium chloride</i>) 0.9 %		1	MO
Prostatic Hypertrophy Agents			
AVODART CAP 0.5 MG	2		MO; GL
CARDURA XL 24 HR TAB 4 MG, 8 MG	3		MO
FLOMAX 24 HR CAP (<i>tamsulosin</i>) 0.4 MG	3	1	MO
JALYN 24 HR CAP 0.5-0.4 MG	2		MO; GL
PROSCAR TAB (<i>finasteride</i>) 5 MG	3	1	MO; GL
RAPAFLO CAP 4 MG, 8 MG	2		MO
UROXATRAL 24 HR TAB (<i>alfuzosin</i>) 10 MG	3	1	MO
GOUT AGENTS			
Gout Agent Combinations			
<i>colchicine-probenecid tab 0.5-500 mg</i>		1	MO
Gout Agents			
ALOPRIM IV SOLUTION (<i>allopurinol sodium</i>) 500 MG	4	4	
COLCRYS TAB 0.6 MG	2		MO
KRYSTEXXA IV 8 MG/ML	5		
ULORIC TAB 40 MG, 80 MG	2		MO
ZYLOPRIM TAB (<i>allopurinol</i>) 100 MG, 300 MG	NF	1	MO
Uricosurics			
<i>probenecid tab 500 mg</i>		1	MO
HEMATOLOGICAL AGENTS - MISC.			
Complement Inhibitors			
BERINERT IV SOLUTION 500 UNIT	5		

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
CINRYZE IV SOLUTION 500 UNIT	5		
Hematorheologic Agents			
PENTOXIL TAB (<i>pentoxifylline</i>) 400 MG		1	MO
TRENTAL TAB (<i>pentoxifylline</i>) 400 MG	NF	1	MO
Plasma Kallikrein Inhibitors			
KALBITOR SUB-Q 10 MG/ML (1 ML)	5		
Platelet Aggregation Inhibitors			
AGGRENOX 12 HR CAP 200-25 MG	2		MO
AGRYLIN CAP (<i>anagrelide</i>) 0.5 MG	NF	1	MO
<i>anagrelide cap 1 mg</i>		1	MO
EFFIENT TAB 10 MG, 5 MG	2		MO
PERSANTINE TAB (<i>dipyridamole</i>) 25 MG, 50 MG, 75 MG	NF	1	MO
PLAVIX TAB 300 MG	2		
PLAVIX TAB 75 MG	2		MO
PLETAL TAB (<i>cilostazol</i>) 100 MG	NF	1	MO
PLETAL TAB (<i>cilostazol</i>) 50 MG	3	1	MO
TICLID TAB (<i>ticlopidine</i>) 250 MG	NF	1	MO
Protamine			
<i>protamine iv 10 mg/ml</i>		4	MO
HEMATOPOIETIC AGENTS			
Agents for Gaucher Disease			
CEREDASE IV 80 UNIT/ML	5		LA
CEREZYME IV SOLUTION 200 UNIT	5		LA
CEREZYME IV SOLUTION 400 UNIT	5		LA
VPRIV SOLUTION 400 UNIT	5		
ZAVESCA CAP 100 MG	5		LA
Agents for Sickle Cell Anemia			
DROXIA CAP 200 MG, 300 MG, 400 MG	3		MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
Hematopoietic Growth Factors			
ARANESP (POLYSORBATE) INJECTION 100 MCG/ML, 25 MCG/ML, 40 MCG/ML, 60 MCG/ML	4		PA; B/D
ARANESP (POLYSORBATE) INJECTION 150 MCG/0.75 ML, 200 MCG/ML, 300 MCG/ML	5		PA; B/D
ARANESP (POLYSORBATE) SYRINGE 100 MCG/0.5 ML, 25 MCG/0.42 ML, 40 MCG/0.4 ML, 60 MCG/0.3 ML	4		PA; B/D
ARANESP (POLYSORBATE) SYRINGE 150 MCG/0.3 ML, 200 MCG/0.4 ML, 300 MCG/0.6 ML, 500 MCG/ML	5		PA; B/D
ARANESP SURECLICK -POLYSORBATE SUB-Q PEN INJECTOR 100 MCG/0.5 ML, 25 MCG/0.42 ML, 40 MCG/0.4 ML, 60 MCG/0.3 ML	4		PA; B/D
ARANESP SURECLICK -POLYSORBATE SUB-Q PEN INJECTOR 150 MCG/0.3 ML, 200 MCG/0.4 ML, 300 MCG/0.6 ML, 500 MCG/ML	5		PA; B/D
EPOGEN INJECTION 10,000 UNIT/ML, 2,000 UNIT/ML, 20,000 UNIT/2 ML, 20,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML	4		PA; B/D
EPOGEN INJECTION 40,000 UNIT/ML	5		PA; B/D
LEUKINE INJECTION 500 MCG/ML	5		PA
LEUKINE SOLUTION FOR INJECTION 250 MCG	5		PA
NEULASTA SUB-Q SYRINGE 6 MG/0.6ML	5		PA
NEUMEGA SUB-Q SOLN 5 MG	2		PA
NEUPOGEN INJECTION 300 MCG/ML, 480 MCG/1.6 ML	5		PA
NEUPOGEN SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML	5		PA
PROCRIT INJECTION 10,000 UNIT/ML, 2,000 UNIT/ML, 20,000 UNIT/2 ML, 20,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML, 40,000 UNIT/ML	2		PA; B/D

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PROMACTA TAB 25 MG, 50 MG, 75 MG	5		
Stem Cell Mobilizers			
MOZOBIL SUB-Q 24 MG/1.2 ML (20 MG/ML)	5		
HEMOSTATICS			
Hemostatics - Systemic			
AMICAR TAB 1,000 MG	3		MO
AMICAR ORAL SOLN (<i>aminocaproic acid</i>) 25 %	3	1	MO
AMICAR TAB (<i>aminocaproic acid</i>) 500 MG	3	1	MO
CYKLOKAPRON IV 100 MG/ML	2		MO
LYSTEDA TAB 650 MG	3		MO
HYPNOTICS			
Hypnotics - Tricyclic Agents			
SILENOR TAB 3 MG, 6 MG	3		MO
Non-Barbiturate Hypnotics			
AMBIEN TAB (<i>zolpidem</i>) 10 MG, 5 MG	NF	1	MO
AMBIEN CR TAB (<i>zolpidem</i>) 12.5 MG, 6.25 MG	2	1	MO
LUNESTA TAB 1 MG, 2 MG, 3 MG	3		ST; MO
SONATA CAP (<i>zaleplon</i>) 10 MG, 5 MG	NF	1	MO
ZOLPIMIST ORAL SPRAY 5 MG/SPRAY (0.1 ML)	3		MO
Selective Melatonin Receptor Agonists			
ROZEREM TAB 8 MG	3		MO
LAXATIVES			
Laxative Combinations			
COLYTE WITH FLAVOR PACKS ORAL SOLUTION 227.1-21.5-6.36 GRAM	NF		
COLYTE WITH FLAVOR PACKS ORAL SOLUTION (<i>peg 3350-electrolytes</i>) 240-22.72-6.72 GRAM	NF	1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
GAVILYTE-C ORAL SOLUTION (<i>peg 3350-electrolytes</i>) 240-22.72-6.72 GRAM		1	MO
GAVILYTE-G ORAL SOLUTION (<i>peg 3350-electrolytes</i>) 236-22.74-6.74 GRAM		1	MO
GAVILYTE-N ORAL SOLUTION (<i>peg-electrolyte soln</i>) 420 G		1	MO
GOLYTELY ORAL SOLUTION (<i>peg 3350-electrolytes</i>) 236-22.74-6.74 GRAM	NF	1	MO
HALFLYTELY WITH FLAVOR PACKS ORAL KIT 5 MG X4 (20 MG) -210 GRAM	2		MO
HALFLYTELY-BISACODYL BOWEL KIT ORAL 10-210 MG-GRAM	2		MO
HALFLYTELY-BISACODYL W-FLAVOR PACK ORAL KIT 10-210 MG-GRAM, 5-210 MG-GRAM	2		MO
MOVIPREP ORAL POWDER PACKET 100-7.5-2.691 GRAM	3		MO
NULYTELY ORAL SOLUTION (<i>peg-electrolyte soln</i>) 420 G	NF	1	MO
NULYTELY CHERRY ORAL SOLUTION (<i>peg-electrolyte soln</i>) 420 G	NF	1	MO
NULYTELY LEMON-LIME ORAL SOLUTION (<i>peg-electrolyte soln</i>) 420 G	NF	1	MO
NULYTELY ORANGE ORAL SOLUTION (<i>peg-electrolyte soln</i>) 420 G	NF	1	MO
NULYTELY WITH FLAVOR PACKS ORAL SOLUTION (<i>peg-electrolyte soln</i>) 420 G	NF	1	MO
PEG-3350 WITH FLAVOR PACKS ORAL SOLUTION (<i>peg-electrolyte soln</i>) 420 G		1	MO
SUPREP ORAL SOLUTION 17.5-3.13-1.6 GRAM	3		MO
TRILYTE WITH FLAVOR PACKETS ORAL SOLUTION (<i>peg-electrolyte soln</i>) 420 G		1	MO
Laxatives - Miscellaneous			
CONSTULOSE ORAL SOLN 10 GRAM/15 ML		1	MO

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GLYCOLAX ORAL POWDER (<i>polyethylene glycol 3350</i>) 17 GRAM/DOSE		1	MO
KRISTALOSE ORAL PACKET 10 GRAM, 20 GRAM	3		MO
MIRALAX ORAL POWDER (<i>polyethylene glycol 3350</i>) 17 GRAM/DOSE	NF	1	MO
MIRALAX ORAL POWDER PACKET (<i>polyethylene glycol 3350</i>) 17 GRAM	3	1	MO
Saline Laxatives			
OSMOPREP TAB 1.5 GRAM	3		MO
VISICOL TAB 1.5 GRAM	3		MO
LOCAL ANESTHETICS-Parenteral			
Local Anesthetic Combinations			
<i>bupivacaine-epinephrine injection, cartridge 0.5 %-1:200,000</i>		4	MO
MARCAINE-EPINEPHRINE INJECTION (<i>bupivacaine-epinephrine</i>) 0.5 %-1:200,000	4	4	MO
MARCAINE-EPINEPHRINE (PF) INJECTION (<i>bupivacaine-epinephrine (PF)</i>) 0.5 %-1:200,000	4	4	MO
SENSORCAINE-MPF/EPINEPHRINE INJECTION (<i>bupivacaine-epinephrine (PF)</i>) 0.5 %-1:200,000	4	4	MO
SENSORCAINE/EPINEPHRINE INJECTION (<i>bupivacaine-epinephrine</i>) 0.5 %-1:200,000	4	4	MO
XYLOCAINE-EPINEPHRINE INJECTION (<i>lidocaine-epinephrine</i>) 1 %-1:100,000	4	4	MO
Local Anesthetics - Amides			
<i>bupivacaine (pf) syringe 0.25 % (2.5 mg/ml)</i>		4	
<i>lidocaine (pf) syringe 10 mg/ml (1 %)</i>		4	MO
MARCAINE INJECTION (<i>bupivacaine</i>) 0.25 % (2.5 MG/ML)	4	4	
MARCAINE INJECTION (<i>bupivacaine</i>) 0.5 % (5 MG/ML)	4	4	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
MARCAINE (PF) INJECTION (<i>bupivacaine (PF)</i>) 0.25 % (2.5 MG/ML), 0.5 % (5 MG/ML), 0.75 % (7.5 MG/ML)	4	4	MO
SENSORCAINE INJECTION (<i>bupivacaine</i>) 0.25 % (2.5 MG/ML)	4	4	
SENSORCAINE INJECTION (<i>bupivacaine</i>) 0.5 % (5 MG/ML)	4	4	MO
SENSORCAINE-MPF INJECTION (<i>bupivacaine (PF)</i>) 0.25 % (2.5 MG/ML), 0.5 % (5 MG/ML), 0.75 % (7.5 MG/ML)	4	4	MO
XYLOCAINE INJECTION (<i>lidocaine HCl</i>) 10 MG/ML (1 %), 20 MG/ML (2 %)	4	4	MO
XYLOCAINE INJECTION (<i>lidocaine HCl</i>) 5 MG/ML (0.5 %)	4	4	
XYLOCAINE-MPF INJECTION (<i>lidocaine (PF)</i>) 10 MG/ML (1 %), 20 MG/ML (2 %), 40 MG/ML (4 %)	4	4	MO
XYLOCAINE-MPF INJECTION (<i>lidocaine (PF)</i>) 5 MG/ML (0.5 %)	4	4	
MACROLIDES			
Azithromycin			
<i>azithromycin hydrogen citrate iv solution 500 mg</i>		4	
ZITHROMAX IV SOLUTION (<i>azithromycin</i>) 500 MG	4	4	MO
ZITHROMAX ORAL PACKET (<i>azithromycin</i>) 1 GRAM	2	1	MO
ZITHROMAX ORAL SUSP (<i>azithromycin</i>) 100 MG/5 ML	3	1	MO
ZITHROMAX ORAL SUSP (<i>azithromycin</i>) 200 MG/5 ML	NF	1	MO
ZITHROMAX TAB (<i>azithromycin</i>) 250 MG, 500 MG, 600 MG	NF	1	MO
ZITHROMAX TRI-PAK TAB (<i>azithromycin</i>) 500 MG	NF	1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
ZITHROMAX Z-PAK TAB (<i>azithromycin</i>) 250 MG	NF	1	MO
ZMAX ORAL SUSP 2 GRAM/60 ML	3		MO
ZMAX ADULT-PEDIATRIC ORAL SUSP 2 GRAM/60 ML	3		MO
ZMAX PEDIATRIC ORAL SUSP 2 GRAM/60 ML	3		MO
Clarithromycin			
BIAXIN ORAL SUSP (<i>clarithromycin</i>) 125 MG/5 ML, 250 MG/5 ML	NF	1	MO
BIAXIN TAB (<i>clarithromycin</i>) 250 MG, 500 MG	NF	1	MO
BIAXIN XL 24 HR TAB (<i>clarithromycin</i>) 500 MG	NF	1	MO
BIAXIN XL PAK 24 HR TAB (<i>clarithromycin</i>) 500 MG	NF	1	MO
Erythromycins			
E.E.S. 200 ORAL SUSP 200 MG/5 ML		1	
E.E.S. 400 TAB (<i>erythromycin ethylsuccinate</i>) 400 MG		1	MO
E.E.S. GRANULES ORAL SUSP 200 MG/5 ML	2		MO
ERY-TAB TAB 250 MG, 333 MG, 500 MG	2		MO
ERYPED 200 ORAL SUSP 200 MG/5 ML	2		MO
ERYPED 400 ORAL SUSP 400 MG/5 ML	2		MO
ERYTHROCIN IV SOLUTION 1,000 MG, 500 MG	4		
ERYTHROCIN STEARATE TAB 250 MG		1	MO
ERYTHROCIN STEARATE TAB 500 MG		1	
<i>erythromycin cap, delayed release 250 mg</i>		1	MO
<i>erythromycin tab 250 mg, 500 mg</i>		1	MO
MEDICAL DEVICES			
Bandages-Dressings-Tape			
<i>gauze bandage 2 x 2 "</i>		1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
Misc. Devices			
<i>alcohol swabs</i>	2		MO
Parenteral Therapy Supplies			
AUTOPEN 1 TO 16 UNITS SUB-Q INSULIN PEN	3		MO
AUTOPEN 1 TO 21 UNITS SUB-Q INSULIN PEN	3		MO
AUTOPEN 2 TO 32 UNITS SUB-Q INSULIN PEN	3		MO
AUTOPEN 2 TO 42 UNITS SUB-Q INSULIN PEN	3		MO
BD AUTOSHIELD PEN NEEDLE 29 X 1/2 ", 29 X 3/16 ", 29 X 5/16 "	2		MO
BD INSULIN PEN NEEDLE UF MINI 31 X 3/16 "	2		MO
BD INSULIN PEN NEEDLE UF ORIG 29 X 1/2 "	2		MO
BD INSULIN PEN NEEDLE UF SHORT 31 X 5/16 "	2		MO
BD INSULIN SYRINGE 1 ML 25 X 1", 1 ML 26 X 1/2", 1 ML 28 X 1/2"	2		MO
BD INSULIN SYRINGE HALF UNIT 0.3 ML 31 X 5/16"	2		MO
BD INSULIN SYRINGE MICRO-FINE 0.3 ML 28, 0.3 ML 28 X 1/2", 1 ML 27 X 5/8", 1 ML 28 X 1/2", 1/2 ML 28 X 1/2"	2		MO
BD INSULIN SYRINGE SAFETY-LOK 1 ML 29 X 1/2"	2		MO
BD INSULIN SYRINGE ULT-FINE II 0.3 ML 31 X 5/16", 1 ML 31 X 5/16", 1/2 ML 31 X 5/16"	2		MO
BD INSULIN SYRINGE ULTRA-FINE 0.3 ML 30 X 1/2", 1 ML 29 X 1/2", 1/2 ML 30 X 1/2"	2		MO
BD INTEGRA INSULIN SYRINGE 1 ML 29 X 1/2"	2		MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
BD LO-DOSE MICRO-FINE IV SYRINGE 0.3 ML 28 X 1/2", 1/2 ML 28 X 1/2"	2		MO
BD LO-DOSE ULTRA-FINE SYRINGE 0.3 ML 29 X 1/2", 1/2 ML 29 X 1/2"	2		MO
BD SAFETYGLIDE INSULIN SYRINGE 0.3 ML 29 X 1/2", 0.3 ML 31 X 5/16", 1 ML 29 X 1/2", 1/2 ML 29 X 1/2", 1/2 ML 30 X 5/16"	2		MO
BD ULTRA-FINE NANO PEN NEEDLES 32 X 5/32 "	2		MO
HUMAPEN LUXURA HD SUB-Q INSULIN PEN	3		MO
HUMAPEN MEMOIR SUB-Q INSULIN PEN	3		MO
INSULIN SYRINGE MICROFINE 0.3 ML 28 X 1/2", 1 ML 27 X 5/8", 1/2 ML 28 X 1/2"	2		MO
INSULIN SYRINGE ULTRAFINE 1/2 ML 29 X 1/2"	2		MO
INTEGRA SYRINGE 1 ML 25 X 1"	2		MO
NOVOPEN 3 SUB-Q INSULIN PEN	3		MO
NOVOPEN 3 PENMATE SUB-Q INSULIN PEN	3		MO
NOVOPEN JR SUB-Q INSULIN PEN	3		MO
MIGRAINE PRODUCTS			
Migraine Combinations			
CAFERGOT TAB (<i>ergotamine-caffeine</i>) 1-100 MG	NF	1	MO
MIGERGOT RECTAL SUPPOSITORY 2-100 MG	2		MO
TREXIMET TAB 85-500 MG	3		MO
Migraine Products			
D.H.E.45 INJECTION (<i>dihydroergotamine</i>) 1 MG/ML	4	4	MO
ERGOMAR SUBLINGUAL TAB 2 MG	2		MO
Serotonin Agonists			
AMERGE TAB (<i>naratriptan</i>) 1 MG, 2.5 MG	2	1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
IMITREX NASAL SPRAY (<i>sumatriptan</i>) 20 MG/ACTUATION	NF	1	MO
IMITREX NASAL SPRAY (<i>sumatriptan</i>) 5 MG/ACTUATION	NF	NF	MO
IMITREX SUB-Q (<i>sumatriptan succinate</i>) 6 MG/0.5 ML	4	4	MO
IMITREX TAB (<i>sumatriptan succinate</i>) 100 MG, 25 MG, 50 MG	NF	1	MO
IMITREX STATDOSE KIT REFILL SUBQ KIT, REFILL (<i>sumatriptan succinate</i>) 4 MG/0.5 ML, 6 MG/0.5 ML	4	4	MO
IMITREX STATDOSE PEN SUBQ KIT (<i>sumatriptan succinate</i>) 4 MG/0.5 ML, 6 MG/0.5 ML	4	4	MO
<i>sumatriptan sub-q 4 mg/0.5 ml</i>		4	
<i>sumatriptan sub-q pen injector 6 mg/0.5 ml</i>		4	MO
<i>sumatriptan sub-q syringe 4 mg/0.5 ml</i>		4	
<i>sumatriptan sub-q syringe 6 mg/0.5 ml</i>		4	MO
MINERALS & ELECTROLYTES			
Bicarbonates			
<i>sodium bicarbonate iv 7.5 %</i>		4	
<i>sodium bicarbonate iv 8.4 %</i>		4	MO
<i>sodium bicarbonate iv syringe 7.5 % (0.9 meq/ml)</i>		4	
<i>sodium bicarbonate iv syringe 8.4 % (1 meq/ml)</i>		4	MO
<i>sodium lactate iv 5 meq/ml</i>		4	
<i>sodium lactate iv soln 167 meq/l</i>		4	
Chloride			
<i>ammonium chloride iv 5 meq/ml</i>		4	MO
Electrolyte Mixtures			
<i>1/2 ns with potassium chloride iv 20 meq/l</i>		4	
<i>dextrose 10 %-0.45 % sodium chloride iv</i>		4	
<i>dextrose 2.5 %-0.45 % sodium chloride iv</i>		4	

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
<i>dextrose 5 %-0.45 % sodium chloride iv</i>		4	
<i>dextrose 5 %-0.9 % sodium chloride iv</i>		4	MO
<i>d5-1/2 ns and potassium chloride iv 10 meq/l, 20 meq/l, 30 meq/l, 40 meq/l</i>		4	
<i>d5-1/3 ns & potassium chloride iv 20 meq/l</i>		4	
<i>d5-1/4 ns & potassium chloride iv 10 meq/l, 20 meq/l, 30 meq/l, 40 meq/l</i>		4	
<i>d5-lr with potassium chloride iv 20 meq/l, 40 meq/l</i>		4	
<i>d5-ns with potassium chloride iv 20 meq/l, 40 meq/l</i>		4	
<i>d5w with potassium chloride iv 20 meq/l, 30 meq/l, 40 meq/l</i>		4	
<i>dextrose 10%-1/4 normal saline iv</i>		4	
<i>dextrose 5%-0.3 % sodium chloride iv</i>		4	
<i>dextrose 5%-1/4 normal saline iv</i>		4	
<i>dextrose 5%-lactated ringers iv</i>		4	
<i>dextrose in ringers iv 5 %</i>		4	
<i>electrolyte-48 in d5w iv</i>		4	
IONOSOL-B IN D5W IV 5 %	4		
IONOSOL-MB IN D5W IV 5 %	4		
IONOSOL-T IN D5W IV 5 %	4		
ISOLYTE-H IN D5W IV 5 %	4		
ISOLYTE-M IN D5W IV	4		
ISOLYTE-P IN D5W IV 5 %	4		
ISOLYTE-S IV	4		
ISOLYTE-S IN D5W IV	4		
ISOLYTE-S PH 7.4 IV	4		
<i>lactated ringers iv</i>		4	
NORMOSOL-M IN D5W IV	4		
NORMOSOL-R IV	4		

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
NORMOSOL-R IN D5W IV 5 %	4		
NORMOSOL-R PH 7.4 IV	4		
<i>ns with potassium chloride iv 20 meq/l</i>		4	MO
<i>ns with potassium chloride iv 40 meq/l</i>		4	
NUTRILYTE IV 25-40.6-5 MEQ/20 ML	4		B/D
NUTRILYTE II IV 35-20-5-4.5-35 MEQ/20 ML	4		B/D
PLASMA-LYTE 148 IV	4		
PLASMA-LYTE A IV	4		
PLASMA-LYTE-56 IN D5W IV 5 %	4		
<i>ringers iv</i>		4	
TPN ELECTROLYTES IV 35-20-5-4.5-35 MEQ/20 ML	4		B/D
Fluoride			
<i>sodium fluoride tab 1 mg fluoride (2.2 mg)</i>		1	
Magnesium			
<i>magnesium sulfate injection 50 % (4 meq/ml)</i>		4	MO
<i>magnesium sulfate iv 20 gram/500 ml, 40 gram/1,000 ml</i>		4	
<i>magnesium sulfate iv piggy back 2 gram/50 ml, 4 gram/100 ml, 4 gram/50 ml</i>		4	
<i>magnesium sulfate syringe 4 meq/ml</i>		4	MO
<i>magnesium sulfate in d5w iv piggy back 1 gram/100 ml</i>		4	
Phosphate			
<i>sodium phosphate iv 3 mmole/ml</i>		4	MO
Potassium			
K-TAB (<i>potassium chloride</i>) 10 MEQ	NF	1	MO
KAON CL-10 TAB (<i>potassium chloride</i>) 10 MEQ		1	MO
KLOR-CON TAB (<i>potassium chloride</i>) 8 MEQ		1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
KLOR-CON 10 TAB (<i>potassium chloride</i>) 10 MEQ		1	MO
KLOR-CON 8 TAB (<i>potassium chloride</i>) 8 MEQ		1	MO
KLOR-CON M10 TAB (<i>potassium chloride</i>) 10 MEQ		1	MO
KLOR-CON M15 TAB 15 MEQ	2		MO
KLOR-CON M20 TAB (<i>potassium chloride</i>) 20 MEQ		1	MO
MICRO-K CAP (<i>potassium chloride</i>) 10 MEQ, 8 MEQ	NF	1	MO
<i>potassium acetate iv 2 meq/ml</i>		4	
<i>potassium chloride iv piggy back 10 meq/100 ml, 10 meq/50 ml, 20 meq/100 ml, 30 meq/100 ml, 40 meq/100 ml</i>		4	
<i>potassium chloride iv piggy back 20 meq/50 ml</i>		4	MO
<i>potassium chloride iv soln 2 meq/ml</i>		4	MO
Sodium			
<i>sodium chloride iv 2.5 meq/ml</i>		4	MO
<i>sodium chloride 0.45 % iv 0.45 %</i>		4	
<i>sodium chloride 0.45 % iv piggy back 0.45 %</i>		4	
<i>sodium chloride 0.9 % iv 0.9 %</i>		4	MO
<i>sodium chloride 0.9 % iv piggy back 0.9 %</i>		4	MO
<i>sodium chloride 0.9 % syringe 0.9 %</i>		4	MO
<i>sodium chloride 3 % iv 3 %</i>		4	MO
<i>sodium chloride 5 % iv 5 %</i>		4	MO
MOUTH/THROAT/DENTAL AGENTS			
Anesthetics Topical Oral			
LIDOCAINE VISCOUS MUCOSAL SOLN (<i>lidocaine HCl</i>) 2 %		1	MO
Anti-infectives - Throat			
MYCELEX TROCHE (<i>clotrimazole</i>) 10 MG	NF	1	MO
<i>nystatin oral susp 100,000 unit/ml</i>		1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
ORAVIG MUCO-ADHESIVE BUCCAL TAB 50 MG	3		MO
Antiseptics - Mouth/Throat			
PERIDEX MOUTHWASH (<i>chlorhexidine gluconate</i>) 0.12 %	NF	1	MO
PERIOGARD MOUTHWASH (<i>chlorhexidine gluconate</i>) 0.12 %		1	MO
PERISOL MOUTHWASH (<i>chlorhexidine gluconate</i>) 0.12 %		1	MO
Steroids - Mouth/Throat			
ORALONE DENTAL PASTE (<i>triamcinolone acetonide</i>) 0.1 %		1	MO
Throat Products - Misc.			
EVOXAC CAP 30 MG	3		MO
SALAGEN TAB (<i>pilocarpine HCl</i>) 5 MG, 7.5 MG	NF	1	MO
MULTIVITAMINS			
Prenatal Vitamins			
NOVANATAL TAB 29-1 MG	3		MO
NUTRISPIRE TAB 29-1 MG		1	MO
MUSCULOSKELETAL THERAPY AGENTS			
Central Muscle Relaxants			
<i>baclofen tab 10 mg, 20 mg</i>		1	MO
<i>chlorzoxazone tab 250 mg</i>		1	
FLEXERIL TAB (<i>cyclobenzaprine</i>) 10 MG, 5 MG	NF	1	MO
NORFLEX INJECTION (<i>orphenadrine citrate</i>) 30 MG/ML	4	4	MO
<i>orphenadrine citrate er tab 100 mg</i>		1	MO
PARAFON FORTE DSC TAB (<i>chlorzoxazone</i>) 500 MG	3	1	MO
ROBAXIN INJECTION 100 MG/ML	4		

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
ROBAXIN TAB (<i>methocarbamol</i>) 500 MG	NF	1	MO
ROBAXIN-750 TAB (<i>methocarbamol</i>) 750 MG	NF	1	MO
SOMA TAB (<i>carisoprodol</i>) 350 MG	NF	1	MO
ZANAFLEX TAB (<i>tizanidine</i>) 2 MG, 4 MG	3	1	MO
Direct Muscle Relaxants			
DANTRIUM CAP (<i>dantrolene</i>) 100 MG, 25 MG, 50 MG	NF	1	MO
Muscle Relaxant Combinations			
<i>carisoprodol-aspirin tab 200-325 mg</i>		1	MO
ORPHENADRINE COMPOUND TAB 25-385-30 MG		1	MO
ORPHENADRINE COMPOUND-DS TAB 50-770-60 MG		1	MO
NASAL AGENTS - SYSTEMIC AND TOPICAL			
Nasal Anti-infectives			
BACTROBAN NASAL OINTMENT 2 %	3		MO
Nasal Antiallergy			
ASTELIN NASAL SPRAY AEROSOL (<i>azelastine</i>) 137 MCG	3	1	MO
ASTEPRO NASAL SPRAY 0.15 % (205.5 MCG)	2		MO
ASTEPRO NASAL SPRAY AEROSOL (<i>azelastine</i>) 137 MCG	3	1	MO
PATANASE NASAL SPRAY 0.6 %	3		MO
Nasal Anticholinergics			
ATROVENT NASAL SPRAY (<i>ipratropium bromide</i>) 0.03 %, 0.06 %	NF	1	MO
Nasal Steroids			
FLONASE NASAL SPRAY (<i>fluticasone</i>) 50 MCG/ACTUATION	NF	1	MO
<i>flunisolide nasal spray 25 mcg (0.025 %)</i>		1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
NASACORT AQ NASAL SPRAY AEROSOL (triamcinolone acetonide) 55 MCG	3	1	MO
NASAREL NASAL SPRAY (flunisolide) 29 MCG (0.025 %)	3	1	MO
NASONEX SPRAY 50 MCG/ACTUATION	2		MO
OMNARIS NASAL SPRAY 50 MCG	3		MO
RHINOCORT AQUA NASAL SPRAY 32 MCG/ACTUATION	3		MO
VERAMYST NASAL SPRAY 27.5 MCG/ACTUATION	2		MO
Sympathomimetic Decongestants			
TYZINE NASAL DROPS 0.1 %	3		MO
TYZINE NASAL SPRAY 0.1 %	3		MO
NEUROMUSCULAR AGENTS			
ALS Agents			
RILUTEK TAB 50 MG	5		MO
Neuromuscular Blocking Agent - Neurotoxins			
BOTOX INJECTION 100 UNIT	4		PA
XEOMIN IM 100 UNIT, 50 UNIT	4		
Nondepolarizing Muscle Relaxants			
<i>vecuronium bromide iv solution 10 mg</i>		4	
NUTRIENTS			
Carbohydrates			
<i>alcohol in d5w iv 5 %</i>		4	
<i>dextrose 10% in water (d10w) iv</i>		4	B/D
<i>dextrose 10% in water (d10w) iv soln</i>		4	B/D
<i>dextrose 5% in water (d5w) iv</i>		4	MO; B/D
<i>dextrose 5% in water (d5w) iv piggy back</i>		4	MO; B/D
<i>dextrose 50% in water (d50w) iv</i>		4	B/D
<i>dextrose 50% in water (d50w) iv syringe</i>		4	B/D
<i>dextrose 70% in water (d70w) iv</i>		4	B/D

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
Lipids			
INTRALIPID IV 10 %, 20 %, 30 %	4		B/D
LIPOSYN II IV 10 %, 20 %	4		B/D
LIPOSYN III IV 10 %, 20 %, 30 %	4		B/D
Proteins			
AMINOSYN 10 % IV 10 %	4		B/D
AMINOSYN 3.5 % IV 3.5 %	4		B/D
AMINOSYN 5 % IV 5 %	4		B/D
AMINOSYN 7 % IV 7 %	4		B/D
AMINOSYN 7 % WITH ELECTROLYTES IV 7 %	4		B/D
AMINOSYN 8.5 % IV 8.5 %	4		B/D
AMINOSYN 8.5 % WITH ELECTROLYTES IV 8.5 %	4		B/D
AMINOSYN II 10 % IV	4		B/D
AMINOSYN II 15% IV 15 %	4		B/D
AMINOSYN II 3.5 % IN DEXTROSE 25 % IV 3.5 %	4		B/D
AMINOSYN II 3.5 %/DEXTROSE 5 % IV 3.5 %	4		B/D
AMINOSYN II 3.5% M/DEXTROSE 5% IV 3.5 %	4		B/D
AMINOSYN II 3.5% WITH LYTES & CALCIUM IN D25W IV 3.5 %	4		B/D
AMINOSYN II 4.25% IN DEXTROSE 10% IV 4.25 %	4		B/D
AMINOSYN II 4.25 % IN DEXTROSE 25 % IV 4.25 %	4		B/D
AMINOSYN II 4.25 % WITH LYTES & CALCIUM IN D25W IV 4.25 %	4		B/D
AMINOSYN II 4.25%/DEXTROSE 20% IV 4.25 %	4		B/D
AMINOSYN II 5%/DEXTROSE 25% IV 5 %	4		B/D

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
AMINOSYN II 7 % IV 7 %	4		B/D
AMINOSYN II 8.5 % IV 8.5 %	4		B/D
AMINOSYN II 8.5 % WITH ELECTROLYTES IV 8.5 %	4		B/D
AMINOSYN II-M 4.25% IN DEXTROSE 10% IV 4.25 %	4		B/D
AMINOSYN M 3.5 % IV 3.5 %	4		B/D
AMINOSYN-HBC 7% IV 7 %	4		B/D
AMINOSYN-HF 8 % IV 8 %	4		B/D
AMINOSYN-PF 10 % IV 10 %	4		B/D
AMINOSYN-PF 7 % (SULFITE-FREE) IV 7 %	4		B/D
AMINOSYN-RF 5.2 % IV 5.2 %	4		B/D
CLINIMIX 2.75%/D5 SULFITE FREE IV 2.75 %	4		B/D
CLINIMIX 4.25%/D5 SULFITE FREE IV 4.25 %	4		B/D
CLINIMIX 4.25%/D10 SULFITE FREE IV 4.25 %	4		B/D
CLINIMIX 4.25%/D20 SULFITE FREE IV 4.25 %	4		B/D
CLINIMIX 4.25%/D25 SULFITE FREE IV 4.25 %	4		B/D
CLINIMIX 5%/D15 SULFITE FREE IV 5 %	4		B/D
CLINIMIX 5%/D20 SULFITE FREE IV 5 %	4		B/D
CLINIMIX 5%/D25 SULFITE FREE IV 5 %	4		B/D
CLINIMIX E 2.75%/D10 SULFITE FREE IV 2.75 %	4		B/D
CLINIMIX E 2.75%/D5 SULFITE FREE IV 2.75 %	4		B/D
CLINIMIX E 4.25%/D25 SULFITE FREE IV 4.25 %	4		B/D
CLINIMIX E 4.25%/D5 SULFITE FREE IV 4.25 %	4		B/D

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
CLINIMIX E 5%/D15 SULFITE FREE IV 5 %	4		B/D
CLINIMIX E 5%/D20 SULFITE FREE IV 5 %	4		B/D
CLINIMIX E 5%/D25 SULFITE FREE IV 5 %	4		B/D
CLINIMIX E 5%/D35 SULFITE FREE IV 5 %	4		B/D
CLINISOL SF 15% IV 15 %	4		B/D
FREAMINE HBC 6.9 % IV 6.9 %	4		B/D
FREAMINE III 10 % IV 10 %	4		B/D
FREAMINE III 3 % WITH ELECTROLYTES IV 3 %	4		B/D
FREAMINE III 8.5 % IV 8.5 %	4		B/D
HEPATAMINE 8% IV 8 %	4		B/D
HEPATASOL 8 % IV 8 %	4		B/D
NEPHRAMINE 5.4 % IV 5.4 %	4		B/D
NOVAMINE 15 % IV 15 %	4		B/D
PREMASOL 10 % IV	4		B/D
PREMASOL 6 % IV	4		B/D
PROCALAMINE 3% IV 3 %	4		B/D
PROSOL 20% IV	4		B/D
RENAMIN 6.5 % IV 6.5 %	4		B/D
TRAVASOL 10 % IV 10 %	4		B/D
TRAVASOL 3.5 % WITH ELECTROLYTES IV 3.5 %	4		B/D
TRAVASOL 8.5% WITH ELECTROLYTES IV 8.5 %	4		B/D
TROPHAMINE 10 % IV 10 %	4		B/D
TROPHAMINE 6% IV 6 %	4		B/D
OPHTHALMIC AGENTS			
Beta-blockers - Ophthalmic			
BETAGAN EYE DROPS (<i>levobunolol</i>) 0.5 %	NF	1	MO
<i>betaxolol eye drops 0.5 %</i>		1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
BETIMOL EYE DROPS 0.25 %, 0.5 %	2		MO
BETOPTIC S EYE DROPS 0.25 %	2		MO
<i>carteolol eye drops 1 %</i>		1	MO
COMBIGAN EYE DROPS 0.2-0.5 %	3		MO
COSOPT EYE DROPS (<i>dorzolamide-timolol</i>) 2-0.5 %	3	1	MO
ISTALOL EYE DROPS 0.5 %	2		MO
<i>levobunolol eye drops 0.25 %</i>		1	MO
OPTIPRANOLOL EYE DROPS (<i>metipranolol</i>) 0.3 %	NF	1	MO
TIMOPTIC EYE DROPS (<i>timolol maleate</i>) 0.25 %, 0.5 %	NF	1	MO
TIMOPTIC OCUDOSE EYE DROPPERETTE 0.25 %, 0.5 %	NF		MO
TIMOPTIC-XE EYE GEL (<i>timolol maleate</i>) 0.25 %, 0.5 %	NF	1	MO
Cycloplegic Mydriatics			
AK-PENTOLATE EYE DROPS (<i>cyclopentolate</i>) 1 %		1	MO
CYCLOGYL EYE DROPS (<i>cyclopentolate</i>) 1 %	NF	1	MO
CYLATE EYE DROPS (<i>cyclopentolate</i>) 1 %		1	MO
MYDRAL EYE DROPS (<i>tropicamide</i>) 0.5 %, 1 %		1	MO
MYDRIACYL EYE DROPS (<i>tropicamide</i>) 1 %	3	1	MO
TROPICACYL EYE DROPS (<i>tropicamide</i>) 0.5 %, 1 %		1	MO
Miotics			
PHOSPHOLINE IODIDE EYE DROPS 0.125 %	3		
PILOPINE HS EYE GEL 4 %	2		MO
Ophthalmic - Angiogenesis Inhibitors			
LUCENTIS INTRAOCULAR 0.5 MG/0.05 ML	5		

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
Ophthalmic Adrenergic Agents			
ALPHAGAN P EYE DROPS 0.1 %	2		MO
ALPHAGAN P EYE DROPS (<i>brimonidine</i>) 0.15 %	3	1	MO
<i>brimonidine eye drops</i> 0.2 %		1	MO
IOPIDINE EYE DROPPERETTE 1 %	3		MO
IOPIDINE EYE DROPS (<i>apraclonidine</i>) 0.5 %	3	1	MO
PROPINE EYE DROPS (<i>dipivefrin</i>) 0.1 %	NF	1	
Ophthalmic Anti-infectives			
AK-POLY-BAC EYE OINTMENT (<i>bacitracin-polymyxin B</i>) 500-10,000 UNIT/G		1	MO
AK-SPORE EYE OINTMENT (<i>neomycin-bacitracin-polymyxin</i>) 3.5-400-10,000 MG-UNIT-UNIT/G		1	MO
AK-TOB EYE DROPS (<i>tobramycin sulfate</i>) 0.3 %		1	MO
AZASITE EYE DROPS 1 %	3		MO
<i>bacitracin eye ointment</i> 500 unit/g		1	MO
BESIVANCE EYE DROPS 0.6 %	3		MO
BLEPH-10 EYE DROPS (<i>sulfacetamide sodium</i>) 10 %	NF	1	MO
CILOXAN EYE OINTMENT 0.3 %	2		MO
CILOXAN EYE DROPS (<i>ciprofloxacin</i>) 0.3 %	NF	1	MO
GARAMYCIN EYE DROPS (<i>gentamicin</i>) 0.3 %	NF	1	MO
GARAMYCIN EYE OINTMENT (<i>gentamicin</i>) 0.3 % (3 MG/G)		1	MO
GENTAK EYE DROPS (<i>gentamicin</i>) 0.3 %		1	MO
GENTAK EYE OINTMENT (<i>gentamicin</i>) 0.3 % (3 MG/G)		1	MO
GENTASOL EYE DROPS (<i>gentamicin</i>) 0.3 %		1	MO
ILOTYCIN EYE OINTMENT (<i>erythromycin</i>) 5 MG/GRAM (0.5 %)		1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
IQUIX EYE DROPS 1.5 %	3		MO
MOXEZA EYE DROPS 0.5 %	2		MO
NATACYN EYE DROPS 5 %	2		MO
NEOSPORIN EYE DROPS (<i>neomycin-polymyxin-gramicidin</i>) 1.75-10K-0.025 MG-UNIT-MG/ML	NF	1	MO
OCUFLOX EYE DROPS (<i>ofloxacin</i>) 0.3 %	3	1	MO
POLYCIN B EYE OINTMENT (<i>bacitracin-polymyxin B</i>) 500-10,000 UNIT/G		1	MO
POLYTRIM EYE DROPS (<i>trimethoprim-polymyxin B</i>) 0.1-10,000 %-UNIT/ML	NF	1	MO
QUIXIN EYE DROPS (<i>levofloxacin</i>) 0.5 %	3	1	MO
ROMYCIN EYE OINTMENT (<i>erythromycin</i>) 5 MG/GRAM (0.5 %)		1	MO
SULFAC EYE DROPS (<i>sulfacetamide sodium</i>) 10 %		1	MO
SULFAMIDE EYE DROPS (<i>sulfacetamide sodium</i>) 10 %		1	MO
TOBRASOL EYE DROPS (<i>tobramycin sulfate</i>) 0.3 %		1	MO
TOBREX EYE OINTMENT 0.3 %	2		MO
TOBREX EYE DROPS (<i>tobramycin sulfate</i>) 0.3 %	NF	1	MO
VIGAMOX EYE DROPS 0.5 %	2		MO
VIROPTIC EYE DROPS (<i>trifluridine</i>) 1 %	NF	1	MO
ZYMAR EYE DROPS 0.3 %	3		
ZYMAXID EYE DROPS 0.5 %	3		MO
Ophthalmic Decongestants			
AK-CON EYE DROPS 0.1 %		1	MO
ALBALON EYE DROPS 0.1 %	NF		MO
ALLERSOL EYE DROPS 0.1 %		1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
Ophthalmic Immunomodulators			
RESTASIS EYE DROPPERETTE 0.05 %	3		MO
Ophthalmic Local Anesthetics			
ALCAINE EYE DROPS (<i>proparacaine</i>) 0.5 %	3	1	MO
OPHTHETIC EYE DROPS (<i>proparacaine</i>) 0.5 %	3	1	MO
PARCAINE EYE DROPS (<i>proparacaine</i>) 0.5 %		1	MO
Ophthalmic Steroids			
ALREX EYE DROPS 0.2 %	3		MO
BLEPHAMIDE EYE DROPS 10-0.2 %	2		MO
BLEPHAMIDE S.O.P. EYE OINTMENT 10-0.2 %	2		MO
CORTISPORIN EYE DROPS (<i>neomycin-polymyxin-HC</i>) 3.5-10,000-10 MG-UNIT-MG/ML	3	1	MO
DEXASOL EYE DROPS (<i>dexamethasone sodium phosphate</i>) 0.1 %		1	MO
DUREZOL EYE DROPS 0.05 %	2		MO
FLAREX EYE DROPS 0.1 %	2		MO
FML FORTE EYE DROPS 0.25 %	2		MO
FML LIQUIFILM EYE DROPS (<i>fluorometholone</i>) 0.1 %	NF	1	MO
FML S.O.P. EYE OINTMENT 0.1 %	2		MO
LOTEMAX EYE DROPS 0.5 %	2		MO
MAXIDEX EYE DROPS 0.1 %	3		MO
MAXITROL EYE DROPS (<i>neomycin-polymyxin-dexameth</i>) 3.5-10,000-0.1 MG/ML-UNIT/ML-%	NF	1	MO
MAXITROL EYE OINTMENT (<i>neomycin-polymyxin-dexameth</i>) 3.5-10,000-0.1 MG-UNIT/G-%	NF	1	MO
METHADEX EYE DROPS (<i>neomycin-polymyxin-dexameth</i>) 3.5-10,000-0.1 MG/ML-UNIT/ML-%		1	MO

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<i>neomycin-bacitracin-poly-hc eye ointment</i> 3.5-400-10,000 mg-unit/g-1%		1	MO
OMNIPRED EYE DROPS (<i>prednisolone acetate</i>) 1 %	NF	1	MO
POLY-DEX EYE DROPS (<i>neomycin-polymyxin-dexameth</i>) 3.5-10,000-0.1 MG/ML-UNIT/ML-%		1	MO
POLY-DEX EYE OINTMENT (<i>neomycin-polymyxin-dexameth</i>) 3.5-10,000-0.1 MG-UNIT/G-%		1	MO
PRED FORTE EYE DROPS (<i>prednisolone acetate</i>) 1 %	NF	1	MO
PRED MILD EYE DROPS 0.12 %	2		MO
PRED-G EYE DROPS 0.3-1 %	3		MO
PREDNISOL EYE DROPS (<i>prednisolone sodium phosphate</i>) 1 %		1	MO
<i>sulfacetamide-prednisolone eye drops</i> 10 %-0.25 % (0.23 %)		1	MO
TOBRADEX EYE OINTMENT 0.3-0.1 %	3		MO
TOBRADEX EYE DROPS (<i>tobramycin-dexamethasone</i>) 0.3-0.1 %	3	1	MO
TOBRADEX ST EYE DROPS 0.3-0.05 %	3		MO
VEXOL EYE DROPS 1 %	3		MO
ZYLET EYE DROPS 0.3-0.5 %	2		MO
Ophthalmics - Misc.			
ACULAR EYE DROPS (<i>ketorolac</i>) 0.5 %	2	1	MO
ACULAR LS EYE DROPS (<i>ketorolac</i>) 0.4 %	3	1	MO
ACULAR PF EYE DROPPERETTE 0.5 %	2		MO
ALAMAST EYE DROPS 0.1 %	3		MO
ALOCRIE EYE DROPS 2 %	3		MO
ALOMIDE EYE DROPS 0.1 %	3		MO
AZOPT EYE DROPS 1 %	2		MO
BEPREVE EYE DROPS 1.5 %	3		MO

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CROLOM EYE DROPS (<i>cromolyn</i>) 4 %	NF	1	MO
ELESTAT EYE DROPS (<i>epinastine</i>) 0.05 %	3	1	MO
EMADINE EYE DROPS 0.05 %	3		MO
LASTACAFT EYE DROPS 0.25 %	NF		MO
NEVANAC EYE DROPS 0.1 %	2		MO
OCUFEN EYE DROPS (<i>flurbiprofen sodium</i>) 0.03 %	NF	1	MO
OPTIVAR EYE DROPS (<i>azelastine</i>) 0.05 %	3	1	MO
PATADAY EYE DROPS 0.2 %	2		MO
PATANOL EYE DROPS 0.1 %	3		MO
TRUSOPT EYE DROPS (<i>dorzolamide</i>) 2 %	3	1	MO
VOLTAREN EYE DROPS (<i>diclofenac sodium</i>) 0.1 %	NF	1	MO
Prostaglandins - Ophthalmic			
LUMIGAN EYE DROPS 0.01 %, 0.03 %	2		MO
TRAVATAN EYE DROPS 0.004 %	2		MO
TRAVATAN Z EYE DROPS 0.004 %	2		MO
XALATAN EYE DROPS (<i>latanoprost</i>) 0.005 %	3	1	MO
OTIC AGENTS			
Otic Agents - Miscellaneous			
BOROFAIR EAR DROPS (<i>acetic acid-aluminum acetate</i>) 2 %		1	MO
VOSOL EAR SOLN (<i>acetic acid</i>) 2 %	NF	1	MO
Otic Anti-infectives			
FLOXIN EAR DROPPERETTE 0.3 %	NF		MO
FLOXIN EAR DROPS (<i>ofloxacin</i>) 0.3 %	NF	1	MO
Otic Combinations			
CIPRO HC EAR DROPS, SUSP 0.2-1 %	3		MO
CIPRODEX EAR DROPS, SUSP 0.3-0.1 %	2		MO
COLY-MYCIN S EAR DROPS, SUSP 3.3-3-10-0.5 MG/ML	3		MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
CORTISPORIN EAR DROPS, SUSP (<i>neomycin-polymyxin-HC</i>) 3.5-10,000-1 MG-UNIT/ML-%	NF	1	MO
CORTISPORIN EAR SOLN (<i>neomycin-polymyxin-HC</i>) 3.5-10,000-1 MG-UNIT/ML-%	NF	1	MO
CORTISPORIN-TC EAR DROPS, SUSP 3.3-3-10-0.5 MG/ML	3		MO
CORTOMYCIN EAR DROPS, SUSP (<i>neomycin-polymyxin-HC</i>) 3.5-10,000-1 MG-UNIT/ML-%		1	MO
CORTOMYCIN EAR SOLN (<i>neomycin-polymyxin-HC</i>) 3.5-10,000-1 MG-UNIT/ML-%		1	MO
PEDIOTIC EAR DROPS, SUSP 3.5-10,000-1 MG-UNIT/ML-%	NF		MO
Otic Steroids			
ACETASOL HC EAR DROPS (<i>hydrocortisone-acetic acid</i>) 1-2 %		1	MO
DERMOTIC OIL EAR DROPS 0.01 %	3		MO
VOSOL-HC EAR DROPS (<i>hydrocortisone-acetic acid</i>) 1-2 %	NF	1	MO
Oxytocics			
OXYTOCICS			
METHERGINE TAB (<i>methylergonovine</i>) 0.2 MG	2	1	MO
PASSIVE IMMUNIZING AGENTS			
Immune Serums			
CARIMUNE NF NANOFILTERED IV SOLUTION 12 G, 3 GRAM, 6 GRAM	5		B/D
GAMASTAN S/D IM 15-18 % RANGE	4		B/D
GAMASTAN S/D IM SYRINGE 15-18 % RANGE	4		B/D
GAMMAGARD LIQUID IV 10 %	5		B/D

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
GAMMAGARD S-D (IGA<1UG/ML) IV SOLUTION 10 GRAM, 5 GRAM	5		B/D
GAMMAGARD S/D IV SOLUTION 10 GRAM, 5 GRAM	5		B/D
GAMMAGARD S/D IV SOLUTION 2.5 G	2		B/D
GAMMAPLEX IV 5 %	5		B/D
GAMUNEX IV 10 %	5		B/D
GAMUNEX-C INJECTION 1 GRAM/10 ML (10 %), 10 GRAM/100 ML (10 %), 2.5 GRAM/25 ML (10 %), 20 GRAM/200 ML (10 %), 5 GRAM/50 ML (10 %)	5		B/D
HEPAGAM B INJECTION >312 UNIT/ML, >312 UNIT/ML (5 ML)	4		
HIZENTRA SUB-Q 1 GRAM/5 ML (20 %), 2 GRAM/10 ML (20 %), 4 GRAM/20 ML (20 %)	4		B/D
HYPERHEP B S-D NEONATAL IM SYRINGE 110 UNIT/0.5 ML	4		
HYPERHEP B S/D IM 220 UNIT/ML, 220 UNIT/ML (5 ML)	4		
HYPERHEP B S/D IM SYRINGE 220 UNIT/ML	4		
OCTAGAM IV 5 %	5		B/D
PRIVIGEN IV 10 %	5		B/D
VIVAGLOBIN SUB-Q 16 % (160 MG/ML)	5		B/D
Monoclonal Antibodies			
SYNAGIS IM SOLN 100 MG/ML, 50 MG/0.5 ML	5		
PENICILLINS			
Aminopenicillins			
<i>amoxicillin cap 250 mg</i>		1	MO
<i>amoxicillin chewable tab 125 mg, 250 mg</i>		1	MO
<i>amoxicillin chewable tab 200 mg, 400 mg</i>		1	
<i>amoxicillin oral susp 125 mg/5 ml, 200 mg/5 ml</i>		1	MO
<i>amoxicillin tab 500 mg, 875 mg</i>		1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
AMOXIL ORAL SUSP 50 MG/ML	2		
AMOXIL CAP (<i>amoxicillin</i>) 500 MG		1	MO
AMOXIL ORAL SUSP (<i>amoxicillin</i>) 250 MG/5 ML		1	MO
AMOXIL ORAL SUSP (<i>amoxicillin</i>) 400 MG/5 ML	NF	1	MO
<i>ampicillin cap 250 mg, 500 mg</i>		1	MO
<i>ampicillin oral susp 125 mg/5 ml</i>		1	
<i>ampicillin oral susp 250 mg/5 ml</i>		1	MO
<i>ampicillin iv solution 1 gram, 2 gram</i>		4	
<i>ampicillin solution for injection 1 gram, 2 gram</i>		4	MO
<i>ampicillin solution for injection 10 gram, 125 mg, 250 mg, 500 mg</i>		4	
Extended-Spectrum Penicillins			
<i>piperacillin iv solution 2 gram, 3 gram, 4 gram</i>		4	
<i>piperacillin solution for injection 40 gram</i>		4	
Natural Penicillins			
BICILLIN L-A IM SYRINGE 1,200,000 UNIT/2 ML, 2,400,000 UNIT/4 ML, 600,000 UNIT/ML	4		MO
<i>penicillin g pot in dextrose iv piggy back 1 million unit, 2 million unit/50 ml, 3 million unit/50 ml</i>		4	
<i>penicillin g procaine im syringe 1,200,000 unit, 600,000 unit</i>		4	MO
<i>penicillin g sodium solution for injection 5 million unit</i>		4	
<i>penicillin v potassium oral susp 125 mg/5 ml, 250 mg/5 ml</i>		1	MO
<i>penicillin v potassium tab 250 mg, 500 mg</i>		1	MO
PFIZERPEN-G SOLUTION FOR INJECTION (<i>penicillin G potassium</i>) 20 MILLION UNIT, 5 MILLION UNIT	4	4	

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
Penicillin Combinations			
<i>amoxicillin-potassium clavulanate chewable tab</i> 200-28.5 mg, 400-57 mg		1	MO
<i>amoxicillin-potassium clavulanate oral susp</i> 200-28.5 mg/5 ml		1	MO
AUGMENTIN CHEWABLE TAB 250-62.5 MG	2		MO
AUGMENTIN ORAL SUSP 125-31.25 MG/5 ML	2		MO
AUGMENTIN ORAL SUSP (<i>amoxicillin-pot clavulanate</i>) 250-62.5 MG/5 ML	3	1	MO
AUGMENTIN ORAL SUSP (<i>amoxicillin-pot clavulanate</i>) 400-57 MG/5 ML	NF	1	MO
AUGMENTIN TAB (<i>amoxicillin-pot clavulanate</i>) 250-125 MG, 500-125 MG, 875-125 MG	NF	1	MO
AUGMENTIN ES-600 ORAL SUSP (<i>amoxicillin-pot clavulanate</i>) 600-42.9 MG/5 ML	NF	1	MO
AUGMENTIN XR 12 HR TAB (<i>amoxicillin-pot clavulanate</i>) 1,000-62.5 MG	3	1	MO
BICILLIN C-R IM SYRINGE 1,200,000 UNIT/ 2 ML(600K/600K)	4		MO
BICILLIN C-R IM SYRINGE 1,200,000 UNIT/ 2 ML(900K/300K)	4		
TIMENTIN IV PIGGY BACK 3.1 G/100 ML	4		
TIMENTIN IV SOLUTION 3.1 G, 31 G	4		
UNASYN IV PIGGY BACK 1.5 GRAM, 3 GRAM	4		
UNASYN IV SOLUTION (<i>ampicillin-sulbactam</i>) 1.5 GRAM, 3 GRAM	4	4	
UNASYN SOLUTION FOR INJECTION (<i>ampicillin-sulbactam</i>) 1.5 GRAM, 15 GRAM	4	4	
UNASYN SOLUTION FOR INJECTION (<i>ampicillin-sulbactam</i>) 3 GRAM	4	4	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
ZOSYN IV SOLUTION (<i>piperacillin-tazobactam</i>) 2.25 GRAM, 40.5 GRAM	4	4	
ZOSYN IV SOLUTION (<i>piperacillin-tazobactam</i>) 3.375 GRAM, 4.5 GRAM	4	4	MO
ZOSYN IN DEXTROSE (ISO-OSMOTIC) IV PIGGY BACK 2.25 GRAM/50 ML, 3.375 GRAM/50 ML, 4.5 GRAM/100 ML	4		
Penicillinase-Resistant Penicillins			
<i>dicloxacillin cap 250 mg, 500 mg</i>		1	MO
<i>nafcillin iv solution 1 gram, 2 gram</i>		4	
<i>nafcillin solution for injection 1 gram, 10 gram, 2 gram</i>		4	
<i>nafcillin in d2.4w iv piggy back 1 gram/50 ml, 2 gram/100 ml</i>		4	
<i>oxacillin iv solution 1 gram</i>		4	
<i>oxacillin iv solution 2 gram</i>		4	MO
<i>oxacillin solution for injection 1 gram</i>		4	
<i>oxacillin solution for injection 10 gram</i>		5	
<i>oxacillin solution for injection 2 gram</i>		4	MO
<i>oxacillin in dextrose, iso-osmotic iv piggy back 1 g/50 ml</i>		4	
<i>oxacillin in dextrose, iso-osmotic iv piggy back 2 g/50 ml</i>		5	
PROGESTINS			
PROGESTINS			
AYGESTIN TAB (<i>norethindrone acetate</i>) 5 MG	NF	1	MO
MAKENA IM OIL 250 MG/ML	5		
MEGACE ES ORAL SUSP 625 MG/5 ML	3		MO
PROMETRIUM CAP 100 MG, 200 MG	3		MO
PROVERA TAB (<i>medroxyprogesterone</i>) 10 MG, 2.5 MG, 5 MG	NF	1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.			
Agents for Chemical Dependency			
ANTABUSE TAB (<i>disulfiram</i>) 250 MG, 500 MG	2	1	MO
CAMPRAL TAB 333 MG	2		MO
CAMPRAL DOSE PAK TABS 333 MG	2		MO
Anti-Cataplectic Agents			
XYREM ORAL SOLN 500 MG/ML	5		LA
Antidementia Agents			
ARICEPT TAB 23 MG	2		MO
ARICEPT TAB (<i>donepezil</i>) 10 MG, 5 MG	2	1	MO
ARICEPT ODT TAB, RAPID DISSOLVE (<i>donepezil</i>) 10 MG, 5 MG	2	1	MO
EXELON ORAL SOLN 2 MG/ML	2		MO
EXELON TRANSDERM 24 HR PATCH 4.6 MG/24 HOUR, 9.5 MG/24 HOUR	2		MO
EXELON CAP (<i>rivastigmine</i>) 1.5 MG, 3 MG, 4.5 MG, 6 MG	2	1	MO
NAMENDA ORAL SOLN 10 MG/5 ML	2		MO
NAMENDA TAB 10 MG, 5 MG	2		MO
NAMENDA TITRATION PAK TABS IN A DOSE PACK 5-10 MG	2		MO
RAZADYNE ORAL SOLN (<i>galantamine</i>) 4 MG/ML	3	1	MO
Antidepressants - Misc.			
<i>bupropion hcl sr tab 150 mg</i>		1	MO
Combination Psychotherapeutics			
<i>amitriptyline-chlordiazepoxide tab 25-10 mg</i>		1	MO
LIMBITROL TAB (<i>amitriptyline-chlordiazepoxide</i>) 12.5-5 MG	3	1	MO
<i>perphenazine-amitriptyline tab 2-10 mg, 2-25 mg, 4-10 mg, 4-25 mg, 4-50 mg</i>		1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
SYMBYAX CAP 12-25 MG, 12-50 MG, 3-25 MG, 6-25 MG, 6-50 MG	2		MO
Movement Disorder Drug Therapy			
XENAZINE TAB 12.5 MG, 25 MG	5		LA
Multiple Sclerosis Agents			
AMPYRA 12 HR TAB 10 MG	5		
AVONEX IM KIT 30 MCG	5		PA
AVONEX ADMINISTRATION PACK IM KIT 30 MCG/0.5 ML	5		PA
BETASERON SUB-Q KIT 0.3 MG	5		
COPAXONE SUB-Q KIT 20 MG	5		PA
EXTAVIA SUB-Q KIT 0.3 MG	5		PA
GILENYA CAP 0.5 MG	5		PA
REBIF SUB-Q SYRINGE 22 MCG/0.5 ML, 44 MCG/0.5 ML	5		PA
REBIF TITRATION PACK SUB-Q SYRINGE 8.8MCG/0.2ML-22 MCG/0.5ML (6)	5		PA
TYSABRI IV 300 MG/15 ML	5		PA
Pseudobulbar Affect (PBA) Agents			
NUEDEXTA CAP 20-10 MG	2		MO
Psychotherapeutic and Neurological Agents - Misc.			
<i>ergoloid tab 1 mg</i>		1	MO
ORAP TAB 1 MG, 2 MG	3		MO
Smoking Deterrents			
BUPROBAN TAB 150 MG		1	MO
CHANTIX TAB 0.5 MG, 1 MG	3		PA; MO
CHANTIX CONTINUING MONTH PAK TAB 1 MG	3		PA; MO
CHANTIX STARTING MONTH PAK TABS IN A DOSE PACK 0.5(11)-1(3X14) MG	3		PA; MO
NICOTROL INHALATION CARTRIDGE 10 MG	3		MO

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NICOTROL NS NASAL SPRAY 10 MG/ML	3		MO
ZYBAN TAB 150 MG	NF		MO
RESPIRATORY AGENTS - MISC.			
Alpha-Proteinase Inhibitor (Human)			
ARALAST IV SUSP 1,000 MG	5		LA
ARALAST IV SUSP 500 MG	5		LA
ARALAST NP IV SUSP 1,000 MG	5		LA
ARALAST NP IV SUSP 500 MG	2		LA
GLASSIA IV 1 G/50 ML (2 %)	4		
PROLASTIN IV SUSP 1,000 MG	5		LA
PROLASTIN IV SUSP 500 MG	2		LA
PROLASTIN C IV SUSP 1,000 MG	5		LA
ZEMAIRA IV SUSP 1,000 MG	5		LA
Cystic Fibrosis Agents			
PULMOZYME SOLN FOR INHALATION 1 MG/ML	5		B/D
SULFONAMIDES			
SULFONAMIDES			
GANTRISIN PEDIATRIC ORAL SUSP 500 MG/5 ML	2		
<i>sulfadiazine tab 500 mg</i>		1	MO
Tetracyclines			
TETRACYCLINES			
ADOXA TAB (<i>doxycycline monohydrate</i>) 100 MG, 50 MG, 75 MG	NF	1	MO
ADOXA PAK TAB (<i>doxycycline monohydrate</i>) 100 MG, 150 MG, 75 MG	NF	1	MO
AVIDOXY TAB (<i>doxycycline monohydrate</i>) 100 MG		1	MO
<i>demeclocycline tab 300 mg</i>		NF	MO
DORYX TAB (<i>doxycycline hyclate</i>) 75 MG	NF	NF	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
<i>doxycycline hyclate cap 50 mg</i>		1	MO
<i>doxycycline hyclate cap, delayed release 100 mg</i>		NF	
<i>doxycycline hyclate iv solution 100 mg</i>		4	MO
MINOCIN IV SOLUTION 100 MG	4		
MINOCIN CAP (<i>minocycline</i>) 100 MG, 50 MG	NF	1	MO
<i>minocycline cap 75 mg</i>		1	MO
MONODOX CAP (<i>doxycycline monohydrate</i>) 100 MG, 50 MG	NF	1	MO
MORGIDOX CAP (<i>doxycycline hyclate</i>) 100 MG		1	MO
PERIOSTAT TAB (<i>doxycycline hyclate</i>) 20 MG	3	1	MO
<i>tetracycline cap 250 mg, 500 mg</i>		1	MO
VIBRA-TABS TAB (<i>doxycycline hyclate</i>) 100 MG	3	1	MO
VIBRAMYCIN SYRUP 50 MG/5 ML	2		MO
VIBRAMYCIN CAP (<i>doxycycline hyclate</i>) 100 MG	NF	1	MO
VIBRAMYCIN ORAL SUSP (<i>doxycycline monohydrate</i>) 25 MG/5 ML	NF	1	MO
THYROID AGENTS			
Antithyroid Agents			
<i>propylthiouracil tab 50 mg</i>		1	MO
TAPAZOLE TAB (<i>methimazole</i>) 10 MG, 5 MG	NF	1	MO
Thyroid Hormones			
CYTOMEL TAB (<i>liothyronine</i>) 25 MCG, 5 MCG, 50 MCG	NF	1	MO
LEVOTHROID TAB (<i>levothyroxine</i>) 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 300 MCG, 50 MCG, 75 MCG, 88 MCG		1	MO
LEVOXYL TAB (<i>levothyroxine</i>) 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG		1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
SYNTHROID TAB (<i>levothyroxine</i>) 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 300 MCG, 50 MCG, 75 MCG, 88 MCG	3	1	MO
THYROLAR-1 TAB 12.5-50 MCG	2		MO
THYROLAR-1/2 TAB 6.25-25 MCG	2		MO
THYROLAR-1/4 TAB 3.1-12.5 MCG	2		MO
THYROLAR-2 TAB 25-100 MCG	2		MO
THYROLAR-3 TAB 37.5-150 MCG	2		MO
TRIOSTAT IV (<i>liothyronine</i>) 10 MCG/ML	4	4	
UNITHROID TAB (<i>levothyroxine</i>) 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 300 MCG, 50 MCG, 75 MCG, 88 MCG		1	MO
Toxoids			
Toxoid Combinations			
ADACEL (ADOLESCENT & ADULT) IM SUSP 2-5-3-5-5 LF-MCG-LF/0.5ML	4		
ADACEL (ADOLESCENT & ADULT) IM SYRINGE 2-5-3-5-5 LF-MCG-LF/0.5ML	4		
BOOSTRIX IM SUSP 2.5-8-5 LF-MCG-LF/0.5ML	4		
BOOSTRIX IM SYRINGE 2.5-8-5 LF-MCG-LF/0.5ML	4		
DAPTACEL (PEDIATRIC) (PF) IM SUSP 15-10-5 LF-MCG-LF/0.5ML	4		
DECAVAC IM SUSP 5-2 LF UNIT/0.5 ML	4		
DECAVAC IM SYRINGE 5-2 LF UNIT/0.5 ML	4		
INFANRIX (PF) IM SUSP 25-58-10 LF-MCG-LF/0.5ML	4		
INFANRIX (PF) IM SYRINGE 25-58-10 LF-MCG-LF/0.5ML	4		
KINRIX IM SUSP 25 LF-58 MCG-10 LF/0.5 ML	4		

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
KINRIX IM SYRINGE 25 LF-58 MCG-10 LF/0.5 ML	4		
PEDIARIX (PF) IM SUSP 10-25-25-10-80 MCG-LF-MCG-LF-D	4		
PEDIARIX (PF) IM SYRINGE 10-25-25-10-80 MCG-LF-MCG-LF-D	4		
PENTACEL IM KIT 15-20-5 LF-MCG-LF	4		
<i>tetanus,diphtheria toxoids ped (pf) im susp 5-6.7 lf unit</i>		4	
<i>tetanus-diphtheria toxoids-td im susp 2-2 lf unit/0.5 ml</i>		4	
TRIHIBIT PRESERVATIVE FREE IM KIT 6.7-46.8-5-10 LF-MCG-LF-MCG	4		
TRIPEDIA (PF) IM SUSP 6.7-46.8-5 LF-MCG-LF/0.5ML	4		
TOXOIDS			
<i>tetanus toxoid,adsorbed (pf) im 5 lf unit/0.5 ml</i>		4	B/D
ULCER DRUGS			
Antispasmodics			
<i>atropine syringe 0.05 mg/ml, 0.1 mg/ml</i>		4	
BENTYL CAP (<i>dicyclomine</i>) 10 MG	NF	1	MO
BENTYL IM (<i>dicyclomine</i>) 10 MG/ML	4	4	MO
BENTYL SYRUP (<i>dicyclomine</i>) 10 MG/5 ML	NF	1	MO
BENTYL TAB (<i>dicyclomine</i>) 20 MG	NF	1	MO
CUVPOSA ORAL SOLN 1 MG/5 ML (0.2 MG/ML)	2		
PAMINE TAB (<i>methscopolamine</i>) 2.5 MG	NF	1	MO
PAMINE FORTE TAB (<i>methscopolamine</i>) 5 MG	3	1	MO
<i>propantheline tab 15 mg</i>		1	MO
ROBINUL INJECTION (<i>glycopyrrolate</i>) 0.2 MG/ML	4	4	MO
ROBINUL TAB (<i>glycopyrrolate</i>) 1 MG	3	1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
ROBINUL FORTE TAB (<i>glycopyrrolate</i>) 2 MG	3	1	MO
H-2 Antagonists			
AXID CAP (<i>nizatidine</i>) 150 MG, 300 MG	3	1	MO
AXID ORAL SOLN (<i>nizatidine</i>) 150 MG/10 ML	3	1	MO
<i>cimetidine injection 150 mg/ml</i>		4	MO
<i>cimetidine oral soln 300 mg/5 ml</i>		1	MO
<i>cimetidine tab 200 mg, 300 mg, 400 mg, 800 mg</i>		1	MO
<i>famotidine iv 10 mg/ml</i>		4	MO
<i>famotidine (pf) iv 20 mg/2 ml</i>		4	MO
<i>famotidine (pf) in saline (iso-osmotic) iv piggy back 20 mg/50 ml</i>		4	
PEPCID ORAL SUSP (<i>famotidine</i>) 40 MG/5 ML	2	1	MO
PEPCID TAB (<i>famotidine</i>) 20 MG, 40 MG	NF	1	MO
<i>ranitidine cap 300 mg</i>		1	MO
TALADINE CAP (<i>ranitidine HCl</i>) 150 MG	NF	1	MO
ZANTAC INJECTION (<i>ranitidine HCl</i>) 25 MG/ML, 50 MG/2 ML (25 MG/ML)	4	4	MO
ZANTAC SYRUP (<i>ranitidine HCl</i>) 15 MG/ML	3	1	MO
ZANTAC TAB (<i>ranitidine HCl</i>) 150 MG, 300 MG	NF	1	MO
ZANTAC 25 EFFERDOSE TAB 25 MG	2		MO
ZANTAC IN 1/2 NS IV PIGGY BACK 50 MG/50 ML	4		
Misc. Anti-Ulcer			
CARAFATE ORAL SUSP 100 MG/ML	2		MO
CARAFATE TAB (<i>sucralfate</i>) 1 GRAM	NF	1	MO
Proton Pump Inhibitors			
ACIPHEX TAB 20 MG	2		MO
DEXILANT CAPSULE 30 MG, 60 MG	3		ST; MO
NEXIUM IV SOLUTION 20 MG, 40 MG	4		
PREVACID CAP (<i>lansoprazole</i>) 15 MG, 30 MG	NF	1	MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
PREVACID SOLUTAB RAPID DISSOLVE (<i>lansoprazole</i>) 15 MG, 30 MG	NF	1	MO
PRILOSEC CAP (<i>omeprazole</i>) 10 MG, 20 MG, 40 MG	NF	1	MO
PROTONIX IV SOLUTION 40 MG	4		
PROTONIX TAB (<i>pantoprazole</i>) 20 MG, 40 MG	NF	1	MO
Ulcer Drugs - Prostaglandins			
CYTOTEC TAB (<i>misoprostol</i>) 100 MCG, 200 MCG	NF	1	MO
URINARY ANTI-INFECTIVES			
URINARY ANTI-INFECTIVES			
HIPREX TAB (<i>methenamine hippurate</i>) 1 GRAM	NF	1	MO
MACROBID CAP (<i>nitrofurantoin monohyd/m-cryst</i>) 100 MG	NF	1	MO
MACRODANTIN CAP 25 MG	2		MO
MACRODANTIN CAP (<i>nitrofurantoin macrocrystal</i>) 100 MG, 50 MG	NF	1	MO
Urinary Antispasmodics			
URINARY ANTISPASMODICS			
DETROL TAB 1 MG, 2 MG	2		MO
DETROL LA 24 HR CAP 2 MG, 4 MG	2		MO
DITROPAN TAB (<i>oxybutynin chloride</i>) 5 MG	NF	1	MO
DITROPAN XL 24 HR TAB (<i>oxybutynin chloride</i>) 10 MG, 15 MG, 5 MG	3	1	MO
ENABLEX 24 HR TAB 15 MG, 7.5 MG	2		MO
<i>oxybutynin chloride syrup 5 mg/5 ml</i>		1	MO
TOVIAZ 24 HR TAB 4 MG, 8 MG	2		MO
URECHOLINE TAB (<i>bethanechol chloride</i>) 10 MG, 25 MG, 5 MG, 50 MG	NF	1	MO
URISPAS TAB (<i>flavoxate</i>) 100 MG	NF	1	MO
VESICARE TAB 10 MG, 5 MG	2		MO

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
VACCINES			
Bacterial Vaccines			
ACTHIB IM 10 MCG/0.5 ML	4		
BIOTHRAX IM SUSP 0.5 ML/DOSE	4		
HIBERIX IM 10 MCG/0.5 ML	4		
HIBTITER IM	4		
MENACTRA (PF) IM 4 MCG/0.5 ML	4		
MENACTRA (PF) IM SYRINGE 4 MCG/0.5 ML	4		
MENOMUNE - A/C/Y/W-135 SUB-Q SOLN 50 MCG	4		
MENOMUNE - A/C/Y/W-135 (PF) SUB-Q SOLN 50 MCG	4		
PEDVAX HIB (PF) IM 7.5 MCG/0.5 ML	4		
TYPHIM VI IM 25 MCG/0.5 ML	4		
TYPHIM VI IM SYRINGE 25 MCG/0.5 ML	4		
Mixed Vaccine Combinations			
COMVAX IM 5-7.5-125 MCG/0.5 ML	4		
Viral Vaccines			
ATTENUVAX (PF) SUB-Q SUSP 1,000 TCID50/0.5 ML	4		
CERVARIX IM SUSP 20-20 MCG/0.5 ML	4		
CERVARIX IM SYRINGE 20-20 MCG/0.5 ML	4		
ENGERIX-B (PF) IM SUSP 10 MCG/0.5 ML, 20 MCG/ML	4		B/D
ENGERIX-B (PF) IM SYRINGE 10 MCG/0.5 ML, 20 MCG/ML	4		B/D
GARDASIL IM SUSP 20-40-40-20 MCG/0.5 ML	4		
GARDASIL IM SYRINGE 20-40-40-20 MCG/0.5 ML	4		

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BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
HAVRIX (PF) IM SUSP 1,440 EL UNIT/ML, 720 EL UNIT/0.5 ML	4		
HAVRIX (PF) IM SYRINGE 1,440 ELISA UNIT/ML, 720 EL UNIT/0.5 ML	4		
IMOVAX RABIES VACCINE IM SOLUTION 2.5 UNIT	4		B/D
IPOL SUSP FOR INJECTION 40-8-32 UNIT/0.5 ML	4		
IPOL SYRINGE 40-8-32 UNIT/0.5 ML	4		
IXIARO (PF) IM SYRINGE 6 MCG/0.5 ML	4		
JE-VAX SUB-Q SOLN	4		
M-M-R II (PF) SUB-Q SUSP 1,000-12,500 TCID50/0.5 ML	4		
MERUVAX II (PF) SUB-Q SUSP 1,000 TCID50/0.5 ML	4		
MUMPSVAX (PF) SUB-Q SUSP 20,000 TCID50/0.5 ML	4		
PROQUAD SUB-Q 10EXP3-4.3-3- 3.99 TCID50/0.5	4		
RABAERT (PF) IM KIT 2.5 UNIT	4		B/D
RECOMBIVAX HB (PF) IM SUSP 10 MCG/ML, 40 MCG/ML, 5 MCG/0.5 ML	4		B/D
RECOMBIVAX HB (PF) IM SYRINGE 10 MCG/ML	4		B/D
ROTARIX ORAL SUSP 10EXP6 CCID50/ML	4		
ROTATEQ VACCINE ORAL SUSP 2 ML	2		
TWINRIX (PF) IM SUSP 720-20 EL UNIT-MCG/ML	4		
TWINRIX (PF) IM SYRINGE 720-20 EL UNIT-MCG/ML	4		
VAQTA (PF) IM SUSP 25 UNIT/0.5 ML, 50 UNIT/ML	4		
VAQTA (PF) IM SYRINGE 50 UNIT/ML	4		

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VARIVAX (PF) SUB-Q SOLN 1,350 UNIT/0.5 ML	4		
YF-VAX SUB-Q SUSP 10 EXP4.74 UNIT/0.5 ML	4		
ZOSTAVAX SUB-Q SOLN 19,400 UNIT	4		
VAGINAL PRODUCTS			
Vaginal Anti-infectives			
CLEOCIN VAGINAL SUPPOSITORY 100 MG	3		MO
CLEOCIN VAGINAL CREAM (<i>clindamycin phosphate</i>) 2 %	3	1	MO
CLINDAMAX VAGINAL CREAM (<i>clindamycin phosphate</i>) 2 %		1	MO
CLINDESSE VAGINAL CREAM 2 %	3		
GYNAZOLE-1 VAGINAL CREAM 2 %	3		MO
METROGEL VAGINAL (<i>metronidazole</i>) 0.75 %	3	1	MO
MICONAZOLE-3 VAGINAL SUPPOSITORY 200 MG		1	MO
TERAZOL 3 VAGINAL CREAM (<i>terconazole</i>) 0.8 %	3	1	MO
TERAZOL 3 VAGINAL SUPPOSITORY (<i>terconazole</i>) 80 MG	3	1	MO
TERAZOL 7 VAGINAL CREAM (<i>terconazole</i>) 0.4 %	3	1	MO
VANAZOLE VAGINAL GEL (<i>metronidazole</i>) 0.75 %		1	MO
ZAZOLE VAGINAL CREAM (<i>terconazole</i>) 0.4 %, 0.8 %		1	MO
ZAZOLE VAGINAL SUPPOSITORY (<i>terconazole</i>) 80 MG		1	MO
Vaginal Estrogens			
ESTRACE VAGINAL CREAM 0.01 % (0.1 MG/G)	2		MO
PREMARIN VAGINAL CREAM 0.625 MG/G	2		MO

Please refer to pages v - vi for a complete description of abbreviations.

AL=Age Limit B/D=Medicare Part B vs.D GL=Gender Limit LA=Limited Access

MO=Available at Mail Order PA=Prior Authorization QL=Quantity Limit ST=Step Therapy

BRAND DRUG (generic drug)	Brand Tier	Generic Tier	Limits
VAGIFEM VAGINAL TAB 10 MCG	3		MO
VAGIFEM VAGINAL TAB 25 MCG	3		
Vaginal Progestins			
ENDOMETRIN VAGINAL INSERTS 100 MG	NF		MO
VASOPRESSORS			
Anaphylaxis Therapy Agents			
ADRENALIN IM PEN INJECTOR 0.15 MG/0.15 ML, 0.3 MG/0.3 ML	2		MO
EPIPEN IM INJECTOR 0.3 MG/0.3 ML	2		MO
EPIPEN JR IM INJECTOR 0.15 MG/0.3 ML	2		MO
TWINJECT AUTOINJECTOR IM PEN 0.15 MG/0.15 ML, 0.3 MG/0.3 ML	2		MO
VASOPRESSORS			
<i>dobutamine iv 250 mg/20 ml (12.5 mg/ml), 500 mg/40 ml (12.5 mg/ml)</i>		4	
<i>dopamine iv 200 mg/5 ml (40 mg/ml), 400 mg/10 ml (40 mg/ml)</i>		4	
<i>dopamine in d5w iv 400 mg/250 ml (1,600 mcg/ml), 800 mg/500 ml (1,600 mcg/ml)</i>		4	
PROAMATINE TAB (<i>midodrine</i>) 10 MG, 2.5 MG, 5 MG	3	1	MO
VITAMINS			
Water Soluble Vitamins			
NIACOR TAB 500 MG		1	MO

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BENICAR HCT 20-12.5 MG, 40-12.5 MG, 40-25 MG.....	43	BIAXIN 125 MG/5 ML, 250 MG/5 ML.....	111	BUDEPRION XL 150 MG, 300 MG.....	28
BENTYL 10 MG.....	140	BIAXIN 250 MG, 500 MG.....	111	<i>budesonide</i>	20
BENTYL 10 MG/5 ML.....	140	BIAXIN XL 500 MG.....	111	<i>budesonide</i>	79
BENTYL 10 MG/ML.....	140	BIAXIN XL PAK 500 MG.....	111	<i>bumetanide</i>	92
BENTYL 20 MG.....	140	<i>bicalutamide</i>	49	<i>bumetanide 0.25 mg/ml</i>	92
BENZACLIN 1-5 %.....	81	BICILLIN C-R 1,200,000 UNIT/ 2 ML(600K/600K)...	133	<i>bumetanide 0.5 mg, 1 mg</i>	92
BENZACLIN CAREKIT 1-5 %.....	81	BICILLIN C-R 1,200,000 UNIT/ 2 ML(900K/300K)...	133	BUMEX 2 MG.....	92
BENZACLIN PUMP 1-5 %.....	82	BICILLIN L-A 1,200,000 UNIT/2 ML, 2,400,000 UNIT/4 ML, 600,000 UNIT/ML.....	132	BUPHENYL	97
BENZAMYCIN 3-5 %.....	82	BICNU 100 MG.....	47	BUPHENYL 500 MG.....	97
<i>benztropine</i>	55	BILTRICIDE 600 MG.....	13	<i>bupivacaine</i>	109
<i>benztropine 0.5 mg, 1 mg, 2 mg</i>	55	BIOTHRAX 0.5 ML/DOSE.....	143	<i>bupivacaine</i>	110
BEPREVE 1.5 %.....	128	<i>bisoprolol fumarate</i>	66	<i>bupivacaine (pf)</i>	110
BERINERT 500 UNIT.....	104	<i>bisoprolol-hydrochlorothiazide</i>	45	<i>bupivacaine (pf) 0.25 % (2.5 mg/ml)</i>	109
BESIVANCE 0.6 %.....	125	<i>bleomycin 15 unit, 30 unit</i>	51	<i>bupivacaine-epinephrine</i>	109
BETAGAN 0.5 %.....	123	BLEPH-10 10 %.....	125	<i>bupivacaine-epinephrine (pf)</i>	109
<i>betamethasone acet & sod phos</i>	78	BLEPHAMIDE 10-0.2 %....	127	<i>bupivacaine-epinephrine 0.5 %-1:200,000</i>	109
<i>betamethasone dipropionate 0.05 %</i>	86	BLEPHAMIDE S.O.P. 10-0.2 %.....	127	BUPRENEX 0.3 MG/ML.....	12
<i>betamethasone valerate</i>	86	BONIVA 150 MG.....	94	<i>buprenorphine</i>	12
<i>betamethasone valerate 0.1 %</i>	86	BONIVA 2.5 MG.....	94	<i>buprenorphine 0.3 mg/ml</i>	12
<i>betamethasone, augmented</i>	87	BONIVA 3 MG/3 ML.....	94	BUPROBAN 150 MG.....	136
<i>betamethasone, augmented 0.05 %</i>	86	BOOSTRIX 2.5-8-5 LF-MCG-LF/0.5ML.....	139	<i>bupropion hcl</i>	28
BETAPACE 120 MG, 160 MG, 240 MG, 80 MG.....	66	BOROFAIR 2 %.....	129	<i>bupropion hcl 150 mg</i>	135
BETAPACE AF 120 MG, 160 MG, 80 MG.....	66	BOTOX 100 UNIT.....	120	BUSPAR 10 MG, 15 MG, 30 MG, 5 MG.....	18
BETASERON 0.3 MG.....	136	BREVICON (28) 0.5-35 MG-MCG.....	73	<i>bupirone</i>	18
BETA-VAL 0.1 %.....	86	BRIELLYN 0.4-35 MG-MCG.....	73	BUSULFEX 60 MG/10 ML.....	47
<i>betaxolol</i>	65	<i>brimonidine</i>	125	BUTALBITAL COMPOUND W/CODEINE 30-50-325-40 MG.....	9
<i>betaxolol 0.5 %</i>	123	<i>brimonidine 0.2 %</i>	125	<i>butorphanol tartrate 1 mg/ml, 2 mg/ml</i>	12
<i>bethanechol chloride</i>	142	<i>bromocriptine</i>	55	BUTRANS 10 MCG/HOUR, 20 MCG/HOUR, 5 MCG/HOUR.....	12
BETIMOL 0.25 %, 0.5 %....	124	BUDEPRION SR 100 MG....	28	BYETTA 10 MCG/0.04 ML, 5 MCG/0.02 ML.....	32
BETOPTIC S 0.25 %.....	124	BUDEPRION SR 150 MG....	28	BYSTOLIC 10 MG, 2.5 MG, 20 MG, 5 MG.....	65
BEYAZ 3-0.02-0.451 MG (24).....	73			CAFERGOT 1-100 MG.....	113

CALAN 120 MG, 40 MG, 80 MG.....	67	CARBATROL 100 MG, 200 MG, 300 MG.....	24	CATAPRES-TTS-3 0.3 MG/24 HR.....	43
CALAN SR 120 MG, 180 MG, 240 MG.....	67	<i>carbidopa-levodopa</i>	55	CAYSTON 75 MG/ML.....	14
CALCIJEX	97	<i>carbinoxamine maleate</i>	38	CAZIAN 0.1/.125/.15-25 MG-MCG.....	73
<i>calcipotriene</i>	85	<i>carbinoxamine maleate</i>	39	CEENU 10 MG, 100 MG, 40 MG.....	47
<i>calcitonin (salmon)</i>	94	<i>carboplatin 10 mg/ml</i>	47	CEENU 10-40-100 MG.....	47
CALCITRENE 0.005 %.....	85	<i>carboplatin 150 mg</i>	47	<i>cefaclor 125 mg/5 ml, 250 mg/5 ml</i>	70
<i>calcitriol</i>	97	CARDIZEM 120 MG, 30 MG, 60 MG, 90 MG.....	67	<i>cefaclor 250 mg, 500 mg</i>	70
<i>calcitriol</i>	98	CARDIZEM CD 120 MG, 180 MG, 240 MG, 300 MG...	67	<i>cefaclor 375 mg/5 ml</i>	70
<i>calcium acetate</i>	103	CARDIZEM CD 360 MG.....	67	<i>cefaclor 500 mg</i>	70
CALCIUM FOLINATE 10 MG/ML.....	53	CARDIZEM LA 120 MG.....	67	<i>cefadroxil 1 gram</i>	70
CAMILA 0.35 MG.....	78	CARDIZEM LA 180 MG, 240 MG, 300 MG, 360 MG, 420 MG.....	67	<i>cefadroxil 250 mg/5 ml, 500 mg/5 ml</i>	70
CAMPATH 30 MG/ML.....	49	CARDURA 1 MG, 2 MG, 4 MG, 8 MG.....	42	<i>cefadroxil 500 mg</i>	70
CAMPRAL 333 MG.....	135	CARDURA XL 4 MG, 8 MG.....	104	<i>cefazolin 1 gram</i>	70
CAMPRAL DOSE PAK 333 MG.....	135	CARIMUNE NF NANOFILTERED 12 G, 3 GRAM, 6 GRAM.....	130	<i>cefazolin 1 gram, 10 gram, 500 mg</i>	70
CAMPTOSAR 100 MG/5 ML, 40 MG/2 ML.....	54	<i>carisoprodol</i>	119	<i>cefazolin 20 gram</i>	70
CAMPTOSAR 300 MG/15 ML.....	54	<i>carisoprodol-aspirin 200-325 mg</i>	119	<i>cefazolin in dextrose (iso-os) 1 gram/50 ml</i>	70
CANASA 1,000 MG.....	102	CARMOL HC 1-10 %.....	87	<i>cefdinir</i>	72
CANCIDAS 50 MG, 70 MG.....	37	CARNITOR 100 MG/ML.....	97	<i>cefepime</i>	73
CAPASTAT 1 GRAM.....	46	CARNITOR 200 MG/ML.....	97	<i>cefepime in dextrose, iso-osm 1 gram/50 ml, 2 gram/100 ml</i>	72
CAPOTEN 100 MG, 12.5 MG, 25 MG, 50 MG.....	42	CARNITOR 330 MG.....	97	<i>cefotaxime</i>	72
CAPOZIDE 25-15 MG, 25-25 MG, 50-15 MG, 50-25 MG.....	44	CARNITOR SUGAR-FREE 100 MG/ML.....	97	<i>cefotaxime 20 gram</i>	71
CAPRELSA 100 MG, 300 MG.....	51	<i>carteolol 1 %</i>	124	<i>cefotetan 1 gram, 2 gram</i>	70
<i>captopril</i>	42	CARTIA XT 120 MG, 180 MG, 240 MG, 300 MG.....	67	<i>cefotetan 10 gram</i>	70
<i>captopril-hydrochlorothiazid e</i>	44	<i>carvedilol</i>	65	<i>cefotetan in dextrose, iso-osm 1 gram/50 ml, 2 gram/50 ml</i>	70
CARAC 0.5 %.....	84	CASODEX 50 MG.....	49	<i>cefoxitin 1 gram, 10 gram</i>	70
CARAFATE 1 GRAM.....	141	CATAFLAM 50 MG.....	4	<i>cefoxitin 2 gram</i>	70
CARAFATE 100 MG/ML...	141	CATAPRES 0.1 MG, 0.2 MG, 0.3 MG.....	43	<i>cefoxitin in dextrose, iso-osm 1 gram/50 ml, 2 gram/50 ml</i>	71
<i>carbamazepine</i>	24	CATAPRES-TTS-1 0.1 MG/24 HR.....	43	<i>cefpodoxime</i>	72
<i>carbamazepine</i>	25	CATAPRES-TTS-2 0.2 MG/24 HR.....	43	<i>cefpodoxime 100 mg</i>	71
<i>carbamazepine</i>	26			<i>cefpodoxime 100 mg/5 ml, 50 mg/5 ml</i>	71
<i>carbamazepine 200 mg/10 ml</i>	24				

<i>cefprozil</i>	71	CEREBYX 500 MG PE/10 ML.....	26	<i>chorionic gonadotropin, human</i>	95
<i>cefprozil 250 mg, 500 mg</i>	71	CEREDASE 80 UNIT/ML.....	105	CICLODAN 8 %.....	83
<i>ceftazidime</i>	72	CEREZYME 200 UNIT.....	105	<i>ciclopirox</i>	83
CEFTIN 125 MG/5 ML, 250 MG/5 ML.....	71	CEREZYME 400 UNIT.....	105	<i>ciclopirox</i>	84
CEFTIN 250 MG, 500 MG....	71	CERUBIDINE 20 MG.....	51	<i>cilostazol</i>	105
<i>ceftriaxone</i>	72	CERVARIX 20-20 MCG/0.5 ML.....	143	CILOXAN 0.3 %.....	125
<i>ceftriaxone 1 gram, 2 gram</i>	71	CESAMET 1 MG.....	37	<i>cimetidine 150 mg/ml</i>	141
<i>ceftriaxone in dextrose, iso-os 1 gram/50 ml, 2 gram/50 ml</i>	71	CESIA 0.1/.125/.15-25 MG-MCG.....	73	<i>cimetidine 200 mg, 300 mg, 400 mg, 800 mg</i>	141
<i>cefuroxime axetil</i>	71	<i>cetirizine</i>	39	<i>cimetidine 300 mg/5 ml</i>	141
<i>cefuroxime sodium</i>	71	CHANTIX 0.5 MG, 1 MG.....	136	CIMZIA 400 MG/2 ML (200 MG/ML X 2).....	102
<i>cefuroxime-dextrose (iso-osm)</i>	71	CHANTIX CONTINUING MONTH PAK 1 MG.....	136	CIMZIA POWDER FOR RECONST 400 MG (200 MG X 2).....	102
<i>cefuroxime-dextrose (iso-osm) 1.5 gram/50 ml</i>	71	CHANTIX STARTING MONTH PAK 0.5(11)-1(3X14) MG.....	136	CIMZIA STARTER KIT 400 MG/2 ML (200 MG/ML X 2).....	103
CEFZIL 125 MG/5 ML, 250 MG/5 ML.....	71	CHEMET 100 MG.....	35	CINRYZE 500 UNIT.....	105
CELEBREX 100 MG, 200 MG, 400 MG, 50 MG.....	4	CHENODAL 250 MG.....	102	CIPRO 250 MG, 500 MG, 750 MG.....	101
CELESTONE 0.6 MG/5 ML.....	78	<i>chloramphenicol sod succinate 1 gram</i>	16	CIPRO 250 MG/5 ML, 500 MG/5 ML.....	101
CELESTONE SOLUSPAN 6 MG/ML.....	78	<i>chlorhexidine gluconate</i>	118	CIPRO HC 0.2-1 %.....	129
CELEXA 10 MG, 20 MG, 40 MG.....	29	<i>chloroquine phosphate</i>	46	CIPRO I.V. 200 MG/20 ML.....	101
CELEXA 10 MG/5 ML.....	29	<i>chloroquine phosphate 250 mg</i>	46	CIPRO I.V. 400 MG/40 ML.....	101
CELLCEPT 200 MG/ML.....	63	<i>chlorothiazide 250 mg, 500 mg</i>	93	CIPRO IN D5W 200 MG/100 ML.....	101
CELLCEPT 250 MG.....	63	<i>chlorothiazide sodium</i>	93	CIPRO IN D5W 400 MG/200 ML.....	101
CELLCEPT 500 MG.....	63	<i>chlorpromazine 10 mg, 100 mg, 200 mg, 25 mg, 50 mg</i>	58	CIPRO XR 1,000 MG, 500 MG.....	101
CELLCEPT INTRAVENOUS 500 MG....	63	<i>chlorpromazine 25 mg/ml</i>	58	CIPRODEX 0.3-0.1 %.....	129
CELONTIN 300 MG.....	27	<i>chlorpropamide 100 mg, 250 mg</i>	34	<i>ciprofloxacin</i>	101
CENESTIN 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG.....	99	<i>chlorthalidone 25 mg, 50 mg</i>	93	<i>ciprofloxacin</i>	125
CENTANY 2 %.....	83	<i>chlorzoxazone</i>	118	<i>ciprofloxacin (mixture)</i>	101
<i>cephalexin</i>	70	<i>chlorzoxazone 250 mg</i>	118	<i>ciprofloxacin 10 mg/ml</i>	101
<i>cephalexin 125 mg/5 ml, 250 mg/5 ml</i>	70	CHOLESTYRAMINE LIGHT 4 GRAM.....	40	<i>ciprofloxacin 100 mg</i>	101
<i>cephalexin 250 mg, 500 mg</i> ...	70	<i>cholestyramine-sucrose</i>	40	<i>ciprofloxacin in d5w</i>	101
CEREBYX 100 MG PE/2 ML.....	26			<i>ciprofloxacin in d5w 400 mg/200 ml</i>	101

<i>cisplatin 1 mg/ml</i>	47	<i>clindamycin phosphate</i>	16	<i>clobetasol</i>	87
<i>citalopram</i>	29	<i>clindamycin phosphate</i>	82	<i>clobetasol</i>	89
<i>cladribine</i>	48	<i>clindamycin phosphate</i>	145	<i>clobetasol-emollient</i>	89
CLAFORAN 1 GRAM, 10 GRAM, 2 GRAM.....	72	<i>clindamycin phosphate 300 mg/2 ml</i>	16	CLOLAR 20 MG/20 ML.....	48
CLAFORAN 1 GRAM, 2 GRAM.....	71	<i>clindamycin-benzoyl peroxide</i>	81	<i>clomipramine</i>	30
CLAFORAN 1 GRAM, 2 GRAM.....	72	<i>clindamycin-benzoyl peroxide</i>	82	CLORPRES 0.1-15 MG, 0.2-15 MG.....	44
CLAFORAN 500 MG.....	72	CLINDESSE 2 %.....	145	CLORPRES 0.3-15 MG.....	44
CLAFORAN IN D5W 1 GRAM/50 ML, 2 GRAM/50 ML.....	72	CLINDETS 1 %.....	82	<i>clotrimazole</i>	117
CLARAVIS 10 MG, 20 MG, 30 MG, 40 MG.....	82	CLINIMIX 2.75%/D5 SULFITE FREE 2.75 %.....	122	<i>clotrimazole 1 %</i>	83
<i>clarithromycin</i>	111	CLINIMIX 4.25%/D5 SULFITE FREE 4.25 %.....	122	<i>clotrimazole-betamethasone</i>	84
<i>clemastine 0.67 mg/5 ml</i>	38	CLINIMIX 4.25/D10 SULFITE FREE 4.25 %.....	122	<i>clozapine</i>	57
<i>clemastine 2.68 mg</i>	38	CLINIMIX 4.25/D20 SULFITE FREE 4.25 %.....	122	<i>clozapine 200 mg, 50 mg</i>	57
CLEOCIN 100 MG.....	145	CLINIMIX 4.25/D25 SULFITE FREE 4.25 %.....	122	CLOZARIL 100 MG, 25 MG.....	57
CLEOCIN 150 MG, 300 MG.....	16	CLINIMIX 5%/D15 SULFITE FREE 5 %.....	122	COARTEM 20-120 MG.....	45
CLEOCIN 150 MG/ML.....	16	CLINIMIX 5%/D20 SULFITE FREE 5 %.....	122	<i>cod-butalbital-acetaminop-caf</i>	9
CLEOCIN 2 %.....	145	CLINIMIX 5%/D25 SULFITE FREE 5 %.....	122	<i>cod-butalbital-acetaminop-ca f</i>	10
CLEOCIN 600 MG/4 ML, 900 MG/6 ML.....	16	CLINIMIX E 2.75/D10 SULFITFREE 2.75 %.....	122	<i>codeine sulfate 15 mg, 30 mg, 60 mg</i>	6
CLEOCIN 75 MG.....	16	CLINIMIX E 2.75/D5 SULFITEFREE 2.75 %.....	122	COGENTIN 2 MG/2 ML.....	55
CLEOCIN 75 MG/5 ML.....	16	CLINIMIX E 4.25/D25 SULFITFREE 4.25 %.....	122	CO-GESIC 5-500 MG.....	9
CLEOCIN IN D5W 300 MG/50 ML, 600 MG/50 ML, 900 MG/50 ML.....	16	CLINIMIX E 4.25/D5 SULFITEFREE 4.25 %.....	122	COLAZAL 750 MG.....	103
CLEOCIN T 1 %.....	82	CLINIMIX E 5%/D15 SULFITE FREE 5 %.....	123	<i>colchicine-probenecid</i> <i>0.5-500 mg</i>	104
CLIMARA 0.025 MG/24 HR, 0.0375 MG/24 HR, 0.05 MG/24 HR, 0.06 MG/24 HR, 0.075 MG/24 HR, 0.1 MG/24 HR.....	99	CLINIMIX E 5%/D20 SULFITE FREE 5 %.....	123	COLCRYS 0.6 MG.....	104
CLIMARA PRO 0.045-0.015 MG/24 HR.....	99	CLINIMIX E 5%/D25 SULFITE FREE 5 %.....	123	COLESTID 1 GRAM.....	40
CLINDACIN P 1 %.....	82	CLINIMIX E 5%/D35 SULFITE FREE 5 %.....	123	COLESTID 5 GRAM.....	40
CLINDAGEL 1 %.....	82	CLINISOL SF 15% 15 %....	123	COLESTID FLAVORED 5 GRAM.....	40
CLINDAMAX 1 %.....	82	CLINORIL 200 MG.....	4	COLESTID FLAVORED 7.5 G.....	40
CLINDAMAX 2 %.....	145			<i>colestipol</i>	40
<i>clindamycin hcl</i>	16			<i>colistimethate sodium</i>	14
<i>clindamycin palmitate hcl</i>	16			COLOCORT 100 MG/60 ML.....	13
				COLY-MYCIN M 150 MG... COLY-MYCIN M PARENTERAL 150 MG.....	14

COLY-MYCIN S 3.3-3-10-0.5 MG/ML.....	129	CORTISPORIN 3.5-10,000-0.5 MG/G-UNIT/G-%.....	83	CUVPOSA 1 MG/5 ML (0.2 MG/ML).....	140
COLYTE WITH FLAVOR PACKS 227.1-21.5-6.36 GRAM.....	107	CORTISPORIN 3.5-10,000-1 MG-UNIT/ML-%.....	130	CYCLAFEM 1/35 (28) 1-35 MG-MCG.....	73
COLYTE WITH FLAVOR PACKS 240-22.72-6.72 GRAM.....	107	CORTISPORIN 3.5-10,000-10 MG-UNIT-MG/ML.....	127	CYCLAFEM 7/7/7 (28) 0.5/0.75/1 MG- 35 MCG.....	73
COMBIGAN 0.2-0.5 %.....	124	CORTISPORIN-TC 3.3-3-10-0.5 MG/ML.....	130	CYCLESSA 0.1/.125/.15-25 MG-MCG.....	73
COMBIPATCH 0.05-0.14 MG/24 HR, 0.05-0.25 MG/24 HR.....	99	CORTOMYCIN 3.5-10,000-1 MG-UNIT/ML-%.....	130	<i>cyclobenzaprine</i>	118
COMBIVENT 18-103 MCG/ACTUATION.....	21	COSMEGEN 0.5 MG.....	51	CYCLOGYL 1 %.....	124
COMBIVIR 150-300 MG.....	59	COSOFT 2-0.5 %.....	124	<i>cyclopentolate</i>	124
COMPRO 25 MG.....	58	COUMADIN 1 MG, 10 MG, 2 MG, 2.5 MG, 3 MG, 4 MG, 5 MG, 6 MG, 7.5 MG.....	23	<i>cyclophosphamide</i>	47
COMTAN 200 MG.....	55	COUMADIN 5 MG.....	22	<i>cyclophosphamide 25 mg, 50 mg</i>	47
COMVAX 5-7.5-125 MCG/0.5 ML.....	143	COVERA-HS 180 MG, 240 MG.....	67	<i>cycloserine</i>	47
CONCERTA 18 MG, 27 MG, 36 MG, 54 MG.....	1	COZAAR 100 MG, 25 MG, 50 MG.....	42	CYCLOSET 0.8 MG.....	32
CONDYLOX 0.5 %.....	90	CREON 12,000-38,000 -60,000 UNIT, 24,000-76,000 -120,000 UNIT, 6,000-19,000 -30,000 UNIT.....	91	<i>cyclosporine</i>	64
CONSTULOSE 10 GRAM/15 ML.....	108	CRESTOR 10 MG, 20 MG, 40 MG, 5 MG.....	41	<i>cyclosporine modified</i>	63
COPAXONE 20 MG.....	136	CRIVIVAN 100 MG, 333 MG.....	59	<i>cyclosporine modified 50 mg</i>	63
COPEGUS 200 MG.....	61	CRIVIVAN 200 MG, 400 MG.....	59	CYKLOKAPRON 100 MG/ML.....	107
CORDARONE 200 MG.....	19	CROLOM 4 %.....	129	CYLATE 1 %.....	124
CORDRAN 4 MCG/CM2.....	87	<i>cromolyn</i>	19	CYMBALTA 20 MG, 30 MG, 60 MG.....	29
COREG 12.5 MG, 25 MG, 3.125 MG, 6.25 MG.....	65	<i>cromolyn</i>	129	<i>cyproheptadine 2 mg/5 ml</i>	39
COREG CR 10 MG, 20 MG, 40 MG, 80 MG.....	65	CRYSSELLE (28) 0.3-30 MG-MCG.....	73	<i>cyproheptadine 4 mg</i>	39
CORGARD 20 MG, 40 MG, 80 MG.....	66	CUBICIN 500 MG.....	16	CYSTADANE 97	
CORMAX 0.05 %.....	87	CUPRIMINE 250 MG.....	62	<i>cytarabine (pf) 1 gram, 100 mg, 2 gram, 500 mg</i>	48
CORTEF 10 MG, 20 MG, 5 MG.....	78	CUTIVATE 0.005 %.....	87	<i>cytarabine (pf) 2 gram/20 ml (100 mg/ml)</i>	48
CORTENEMA 100 MG/60 ML.....	13	CUTIVATE 0.05 %.....	87	<i>cytarabine 20 mg/ml</i>	48
CORTIFOAM 10 % (80 MG).....	13			CYTOMEL 25 MCG, 5 MCG, 50 MCG.....	138
<i>cortisone 25 mg</i>	79			CYTOTEC 100 MCG, 200 MCG.....	142
CORTISPORIN 1 %.....	83			CYTOVENE 500 MG.....	61
				CYTOXAN 1 GRAM, 2 GRAM, 500 MG.....	47
				D.H.E.45 1 MG/ML.....	113
				<i>d10 %-0.45 % sodium chloride</i>	114

<i>d2.5 %-0.45 % sodium chloride</i>	114	DDAVP 4 MCG/ML.....	98	DEPO-ESTRADIOL 5 MG/ML.....	100
<i>d5 %-0.45 % sodium chloride</i>	115	DECAVAC 5-2 LF UNIT/0.5 ML.....	139	DEPO-MEDROL 20 MG/ML.....	79
<i>d5 %-0.9 % sodium chloride</i>	115	<i>deferoxamine</i>	35	DEPO-MEDROL 40 MG/ML, 80 MG/ML.....	79
<i>d5-1/2 ns & potassium chloride 10 meq/l, 20 meq/l, 30 meq/l, 40 meq/l</i>	115	DELATESTRYL 200 MG/ML.....	13	DEPO-PROVERA 150 MG/ML.....	77
<i>d5-1/3 ns & potassium chloride 20 meq/l</i>	115	DELESTROGEN 10 MG/ML, 20 MG/ML, 40 MG/ML.....	100	DEPO-PROVERA 400 MG/ML.....	49
<i>d5-1/4 ns & potassium chloride 10 meq/l, 20 meq/l, 30 meq/l, 40 meq/l</i>	115	DELFLEX-LC/1.5% DEXTROSE CA+= 3.5MEQ &MAG= 0.5 MEQ/L.....	64	DEPO-SUBQ PROVERA 104 104 MG/0.65 ML.....	77
<i>d5-lr with potassium chloride 20 meq/l, 40 meq/l</i>	115	DEMADEX 10 MG, 100 MG, 20 MG, 5 MG.....	93	DEPO-TESTOSTERONE 100 MG/ML, 200 MG/ML....	13
<i>d5-ns with potassium chloride 20 meq/l, 40 meq/l</i>	115	<i>demeclocycline 300 mg</i>	137	DERMA-SMOOTH/FS BODY OIL 0.01 %.....	87
<i>d5w with potassium chloride 20 meq/l, 30 meq/l, 40 meq/l</i>	115	DEMEROL (PF) 100 MG/2 ML.....	6	DERMA-SMOOTH/FS SCALP OIL 0.01 %.....	87
<i>dacarbazine 100 mg, 200 mg</i>	52	DEMEROL (PF) 100 MG/ML, 50 MG/ML.....	6	DERMATOP 0.1 %.....	87
DACOGEN 50 MG.....	48	DEMEROL (PF) 100 MG/ML, 50 MG/ML.....	7	DERMOTIC OIL 0.01 %....	130
<i>danazol 100 mg, 200 mg, 50 mg</i>	13	DEMEROL (PF) 25 MG/0.5 ML, 75 MG/1.5 ML.....	6	DESFERAL 2 GRAM, 500 MG.....	35
DANTRIUM 100 MG, 25 MG, 50 MG.....	119	DEMEROL (PF) 25 MG/ML, 75 MG/ML.....	6	<i>desipramine</i>	30
<i>dantrolene</i>	119	DEMEROL 100 MG, 50 MG... 6		<i>desmopressin</i>	98
<i>dapsone 100 mg, 25 mg</i>	16	DEMEROL 100 MG/ML, 50 MG/ML.....	6	<i>desmopressin 10 mcg/spray</i> ...	98
DAPTACEL (PEDIATRIC) (PF) 15-10-5 LF-MCG-LF/0.5ML.....	139	DEMERSER 250 MG.....	42	DESOGEN 0.15-30 MG-MCG.....	73
DARAPRIM 25 MG.....	46	DENAVIR 1 %.....	85	DESONATE 0.05 %.....	87
DARVON 65 MG.....	6	DEPACON 500 MG/5 ML (100 MG/ML).....	27	<i>desonide</i>	87
<i>daunorubicin</i>	51	DEPADE 50 MG.....	35	<i>desonide</i>	88
<i>daunorubicin 5 mg/ml</i>	51	DEPAKENE 250 MG.....	27	DESOWEN 0.05 %.....	87
DAUNOXOME 2 MG/ML....	51	DEPAKENE 250 MG/5 ML.....	27	<i>desoximetasone</i>	89
DAYPRO 600 MG.....	4	DEPAKOTE 125 MG, 250 MG, 500 MG.....	27	DESOXYN 5 MG.....	1
DAZIDOX 20 MG.....	6	DEPAKOTE ER 250 MG, 500 MG.....	27	DETROL 1 MG, 2 MG.....	142
DDAVP 0.01 % (REFRIG)....	98	DEPAKOTE SPRINKLES 125 MG.....	27	DETROL LA 2 MG, 4 MG.....	142
DDAVP 0.1 MG, 0.2 MG.....	98	DEPEN TITRATABS 250 MG.....	62	<i>dexamethasone</i>	78
DDAVP 10 MCG/SPRAY....	98			<i>dexamethasone 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg</i>	79
				<i>dexamethasone 0.5 mg/5 ml</i> ...	79
				DEXAMETHASONE INTENSOL 1 MG/ML.....	79

<i>dexamethasone sodium phos</i> (pf) 10 mg/ml.....	79	DIANEAL LOW CALCIUM/1.5% DEX LOW CA+=2.5 MEQ &MAG=0.5 MEQ/L.....	64	<i>dihydrocode-acetaminophen-</i> <i>caff</i>	12
<i>dexamethasone sodium</i> <i>phosphate</i>	127	DIANEAL PD-2/1.5% DEXTROSE CA+= 3.5MEQ &MAG= 0.5 MEQ/L.....	64	<i>dihydroergotamine</i>	113
<i>dexamethasone sodium</i> <i>phosphate 10 mg/ml, 4</i> <i>mg/ml</i>	79	DIANEAL WITH 1.5% DEXTROSE LOW CA+=2.5 MEQ &MAG=0.5 MEQ/L....	65	DILACOR XR 120 MG, 180 MG, 240 MG.....	67
DEXASOL 0.1 %.....	127	DIBENZYLINE 10 MG.....	42	DILANTIN 30 MG.....	26
<i>dexchlorpheniramine maleate</i> 2 mg/5 ml.....	38	<i>diclofenac potassium</i>	4	DILANTIN EXTENDED 100 MG.....	27
DEXEDRINE SPANSULE 10 MG, 15 MG, 5 MG.....	1	<i>diclofenac sodium</i>	5	DILANTIN INFATABS 50 MG.....	27
DEXILANT 30 MG, 60 MG.....	141	<i>diclofenac sodium 25 mg, 50</i> <i>mg</i>	129	DILANTIN-KAPSEAL 30 MG.....	27
<i>dexmethylphenidate</i>	1	<i>diclofenac sodium 25 mg, 50</i> <i>mg</i>	4	DILATRATE-SR 40 MG.....	17
DEXPAK 1.5 MG (21 TABS), 1.5 MG (51 TABS)...	79	<i>dicloxacillin 250 mg, 500</i> <i>mg</i>	134	DILAUDID (PF) 1 MG/ML, 2 MG/ML.....	7
DEXPAK JR. 1.5 MG (35 TABS).....	79	<i>dicyclomine</i>	140	DILAUDID (PF) 4 MG/ML....	7
<i>dexrazoxane</i>	53	<i>didanosine</i>	60	DILAUDID 2 MG, 4 MG, 8 MG.....	7
<i>dextroamphetamine</i>	1	DIDRONEL 200 MG, 400 MG.....	94	DILAUDID-5 1 MG/ML.....	7
<i>dextrose 10% in water</i> (d10w)	120	<i>diflorasone</i>	86	DILAUDID-HP 10 MG/ML....	7
<i>dextrose 10%-1/4 normal</i> <i>saline</i>	115	<i>diflorasone 0.05 %</i>	87	DILAUDID-HP 250 MG.....	7
<i>dextrose 5% in water (d5w)</i>	120	DIFLUCAN 10 MG/ML, 40 MG/ML.....	38	DILT-CD 120 MG, 180 MG, 240 MG, 300 MG.....	67
<i>dextrose 5%-0.3 %</i> <i>sod.chloride</i>	115	DIFLUCAN 100 MG, 150 MG, 200 MG, 50 MG.....	38	DILTIA XT 120 MG, 180 MG, 240 MG.....	67
<i>dextrose 5%-1/4 normal</i> <i>saline</i>	115	DIFLUCAN IN DEXTROSE (ISO-OSM) 400 MG/200 ML.....	38	<i>diltiazem hcl</i>	67
<i>dextrose 5%-lactated</i> <i>ringers</i>	115	DIFLUCAN IN NAACL (ISO-OSM) 200 MG/100 ML.....	38	<i>diltiazem hcl</i>	68
<i>dextrose 50% in water</i> (d50w)	120	DIFLUCAN IN NAACL (ISO-OSM) 400 MG/200 ML.....	38	<i>diltiazem hcl 100 mg</i>	68
<i>dextrose 70% in water</i> (d70w)	120	<i>diflunisal 500 mg</i>	6	<i>diltiazem hcl 120 mg, 60 mg,</i> <i>90 mg</i>	67
<i>dextrose in ringers 5 %</i>	115	DIGITEK 125 MCG, 250 MCG.....	69	<i>diltiazem hcl 5 mg/ml</i>	67
DEXTROSTAT 10 MG.....	1	<i>digoxin</i>	69	DILT-XR 120 MG, 180 MG, 240 MG.....	67
DEXTROSTAT 5 MG.....	1	<i>digoxin 250 mcg/ml</i>	69	DILTZAC ER 120 MG, 180 MG, 240 MG, 300 MG, 360 MG.....	68
DIABETA 1.25 MG, 2.5 MG, 5 MG.....	34	<i>digoxin 50 mcg/ml</i>	69	<i>dimenhydrinate 50 mg/ml</i>	36
DIAMOX SEQUELS 500 MG.....	92	<i>dihydrocode-acetaminophen-</i> <i>caff</i>	10	DIOVAN 160 MG, 320 MG, 40 MG, 80 MG.....	42

DIPENTUM 250 MG.....	103	<i>dopamine in d5w 400</i>		E.E.S. 200 200 MG/5 ML....	111
<i>diphenhydramine hcl 12.5</i>		<i>mg/250 ml (1,600 mcg/ml),</i>		E.E.S. 400 400 MG.....	111
<i>mg/5 ml.....</i>	39	<i>800 mg/500 ml (1,600</i>		E.E.S. GRANULES 200	
<i>diphenhydramine hcl 25 mg,</i>		<i>mcg/ml).....</i>	146	MG/5 ML.....	111
<i>50 mg.....</i>	39	DORIBAX 250 MG.....	15	EC-NAPROSYN 375 MG,	
<i>diphenhydramine hcl 50</i>		DORIBAX 500 MG.....	15	500 MG.....	4
<i>mg/ml.....</i>	39	DORYX 75 MG.....	137	<i>econazole 1 %.....</i>	83
<i>diphenoxylate-atropine.....</i>	35	<i>dorzolamide.....</i>	129	EDECIN 25 MG.....	93
<i>dipivefrin.....</i>	125	<i>dorzolamide-timolol.....</i>	124	EDURANT 25 MG.....	59
DIPROLENE 0.05 %.....	87	DOVONEX 0.005 %.....	85	EFFEXOR 100 MG, 25 MG,	
DIPROLENE AF 0.05 %.....	87	<i>doxazosin.....</i>	42	37.5 MG, 50 MG, 75 MG.....	29
<i>dipyridamole.....</i>	105	<i>doxepin 10 mg, 100 mg, 150</i>		EFFEXOR XR 150 MG, 37.5	
DISKETTS 40 MG.....	7	<i>mg, 25 mg, 50 mg, 75 mg.....</i>	30	MG, 75 MG.....	30
<i>disopyramide.....</i>	18	<i>doxepin 10 mg/ml.....</i>	30	EFFIENT 10 MG, 5 MG....	105
<i>disulfiram.....</i>	135	DOXIL 2 MG/ML.....	51	EFUDEX 2 %, 5 %.....	84
DITROPAN 5 MG.....	142	<i>doxorubicin.....</i>	51	EFUDEX 5 %.....	84
DITROPAN XL 10 MG, 15		<i>doxycycline hyclate.....</i>	137	EGRIFTA 1 MG.....	95
MG, 5 MG.....	142	<i>doxycycline hyclate.....</i>	138	ELAPRASE 6 MG/3 ML.....	97
DIURIL 250 MG/5 ML.....	93	<i>doxycycline hyclate 100</i>		ELDEPRYL 5 MG.....	56
DIURIL IV 500 MG.....	93	<i>mg.....</i>	138	<i>electrolyte-48 in d5w</i>	115
<i>divalproex.....</i>	27	<i>doxycycline hyclate 50 mg...</i>	138	ELESTAT 0.05 %.....	129
DIVIGEL 0.25 (0.1) MG		<i>doxycycline monohydrate....</i>	137	ELIDEL 1 %.....	90
(%), 0.5 (0.1) MG (%), 1		<i>doxycycline monohydrate....</i>	138	ELIGARD 22.5 MG, 30 MG,	
(0.1) MG (%).	100	<i>dronabinol.....</i>	37	45 MG, 7.5 MG.....	49
<i>dobutamine 250 mg/20 ml</i>		<i>droperidol.....</i>	18	ELIMITE 5 %.....	91
<i>(12.5 mg/ml), 500 mg/40 ml</i>		DROXIA 200 MG, 300		ELIPHOS 667 MG.....	103
<i>(12.5 mg/ml).....</i>	146	MG, 400 MG.....	105	ELITEK 1.5 MG, 7.5 MG.....	53
DOCEFREZ 20 MG, 80		DUAC 1-5 %.....	82	ELIXOPHYLLIN 80 MG/15	
MG.....	54	DUETACT 30-2 MG, 30-4		ML.....	22
<i>docetaxel.....</i>	54	MG.....	31	ELLA 30 MG.....	77
<i>docetaxel 160 mg/16 ml (10</i>		DULERA 100-5		ELLENCE 200 MG/100 ML,	
<i>mg/ml), 20 mg/2 ml (10</i>		MCG/ACTION, 200-5		50 MG/25 ML.....	51
<i>mg/ml), 80 mg/8 ml (10</i>		MCG/ACTION.....	21	ELOCON 0.1 %.....	87
<i>mg/ml).....</i>	54	DUONEB 0.5 MG-3 MG(2.5		ELOXATIN 100 MG/20 ML,	
DOLOPHINE 10 MG, 5 MG... 7		MG BASE)/3 ML.....	21	50 MG/10 ML (5 MG/ML)....	47
DOLOREX FORTE 5-500		DURAGESIC 100 MCG/HR,		ELOXATIN 200 MG/40	
MG.....	9	12 MCG/HR, 25 MCG/HR, 50		ML.....	47
<i>donepezil.....</i>	135	MCG/HR, 75 MCG/HR.....	7	ELSPAR 10,000 UNIT.....	52
<i>dopamine 200 mg/5 ml (40</i>		DURAMORPH 0.5 MG/ML, 1		EMADINE 0.05 %.....	129
<i>mg/ml), 400 mg/10 ml (40</i>		MG/ML.....	7	EMBEDA 100-4 MG, 20-0.8	
<i>mg/ml).....</i>	146	DUREZOL 0.05 %.....	127	MG, 30-1.2 MG, 50-2 MG,	
		DYAZIDE 37.5-25 MG.....	92	60-2.4 MG, 80-3.2 MG.....	7
		DYRENIUM 100 MG, 50		EMCYT 140 MG.....	49
		MG.....	93		

EMEND 115 MG, 150 MG...	37	EPIPEN JR 0.15 MG/0.3 ML.....	146	ERY-TAB 250 MG, 333 MG, 500 MG.....	111
EMEND 125 MG, 80 MG.....	37	<i>epirubicin</i>	51	ERYTHROCIN 1,000 MG, 500 MG.....	111
EMEND 40 MG.....	37	<i>epirubicin 10 mg/5 ml, 150 mg/75 ml</i>	51	ERYTHROCIN STEARATE 250 MG.....	111
EMLA 2.5-2.5 %.....	90	<i>epirubicin 50 mg</i>	51	ERYTHROCIN STEARATE 500 MG.....	111
EMOQUETTE 0.15-30 MG-MCG.....	73	EPITOL 200 MG.....	24	<i>erythromycin</i>	125
EMSAM 12 MG/24 HR, 6 MG/24 HR, 9 MG/24 HR.....	28	EPIVIR 10 MG/ML.....	59	<i>erythromycin</i>	126
EMTRIVA 10 MG/ML.....	59	EPIVIR 150 MG, 300 MG.....	59	<i>erythromycin 250 mg</i>	111
EMTRIVA 200 MG.....	59	EPIVIR HBV 100 MG.....	59	<i>erythromycin 250 mg, 500 mg</i>	111
ENABLEX 15 MG, 7.5 MG.....	142	EPIVIR HBV 25 MG/5 ML (5 MG/ML).....	59	<i>erythromycin</i> <i>ethylsuccinate</i>	111
<i>enalapril maleate</i>	42	EPOGEN 10,000 UNIT/ML, 2,000 UNIT/ML, 20,000 UNIT/2 ML, 20,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML.....	106	<i>erythromycin with ethanol</i>	82
<i>enalapril-hydrochlorothiazid e</i>	45	EPOGEN 40,000 UNIT/ML.....	106	<i>erythromycin with ethanol 2 %</i>	82
<i>enalapril-hydrochlorothiazid e 5-12.5 mg</i>	44	<i>epoprostenol</i>	69	<i>erythromycin-benzoyl peroxide</i>	82
ENBREL 25 MG.....	6	EPZICOM 600-300 MG.....	59	<i>erythromycin-sulfisoxazole 200-600 mg/5 ml</i>	15
ENBREL 25 MG/0.5ML (0.51), 50 MG/ML (0.98 ML).....	6	EQUETRO 100 MG, 200 MG, 300 MG.....	56	ESTRACE 0.01 % (0.1 MG/G).....	145
ENBREL SURECLICK 50 MG/ML (0.98 ML).....	6	ERAXIS (ALCOHOL DILUENT) 100 MG, 50 MG.....	37	ESTRACE 0.5 MG, 1 MG, 2 MG.....	100
ENDOCET 10-325 MG, 10-650 MG, 5-325 MG, 7.5-325 MG, 7.5-500 MG.....	9	ERAXIS(WATER DILUENT) 100 MG, 50 MG.....	37	ESTRADERM 0.05 MG/24 HR, 0.1 MG/24 HR.....	100
ENDODAN 4.8355-325 MG... 9	9	ERBITUX 100 MG/50 ML, 200 MG/100 ML.....	49	<i>estradiol</i>	99
ENDOMETRIN 100 MG... 146	146	<i>ergoloid 1 mg</i>	136	<i>estradiol</i>	100
ENGERIX-B (PF) 10 MCG/0.5 ML, 20 MCG/ML.....	143	ERGOMAR 2 MG.....	113	<i>estradiol valerate</i>	100
ENJUVIA 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG.....	100	<i>ergotamine-caffeine</i>	113	<i>estradiol-norethindrone acet</i>	99
<i>enoxaparin</i>	24	ERRIN 0.35 MG.....	78	ESTRASORB 2.5 MG/G (1.74 G).....	100
ENPRESSE 50-30 (6)/75-40 (5)/125-30(10).....	73	ERTACZO 2 %.....	83	ESTROGEL 1.25 GRAM/ACTION.....	100
ENTOCORT EC 3 MG.....	79	ERY PADS 2 %.....	82	<i>estropipate</i>	100
ENULOSE 10 GRAM/15 ML.....	103	ERYGEL 2 %.....	82	ESTROSTEP FE-28 1-20(5)/1-30(7) /1MG-35MCG (9).....	73
<i>epinastine</i>	129	ERYPED 200 200 MG/5 ML.....	111	<i>ethambutol</i>	46
<i>epinephrine hcl 0.1 mg/ml</i>	21	ERYPED 400 400 MG/5 ML.....	111	<i>ethosuximide</i>	27
EPIPEN 0.3 MG/0.3 ML.....	146			ETHYOL 500 MG.....	53

<i>etidronate disodium</i>	94	FANSIDAR 500-25 MG.....	46	FLAGYL 250 MG, 500	
<i>etodolac 200 mg, 300 mg</i>	4	FARESTON 60 MG.....	49	MG.....	14
<i>etodolac 400 mg, 500 mg</i>	4	FASLODEX 125 MG/2.5,		FLAGYL 375 MG.....	14
<i>etodolac 400 mg, 500 mg, 600</i>		250 MG/5 ML.....	49	FLAREX 0.1 %.....	127
<i>mg</i>	4	FAZACLO 100 MG, 12.5		<i>flavoxate</i>	142
ETOPOPHOS 100 MG.....	54	MG, 150 MG, 200 MG, 25		<i>flecainide</i>	19
<i>etoposide</i>	54	MG.....	57	FLECTOR 1.3 %.....	83
EURAX 10 %.....	91	FELBATOL 400 MG, 600		FLEXERIL 10 MG, 5	
EVAMIST 1.53		MG.....	26	MG.....	118
MG/SPRAY (1.7%).....	100	FELBATOL 600 MG/5 ML...	26	FLOLAN 0.5 MG, 1.5 MG...	69
EVISTA 60 MG.....	97	FELDENE 10 MG, 20 MG.....	4	FLOMAX 0.4 MG.....	104
EVOXAC 30 MG.....	118	<i>felodipine</i>	68	FLOMASE 50	
EXELDERM 1 %.....	83	FEMARA 2.5 MG.....	49	MCG/ACTUATION.....	119
EXELON 1.5 MG, 3 MG,		FEMHRT 1/5 1-5		FLOVENT DISKUS 100	
4.5 MG, 6 MG.....	135	MG-MCG.....	99	MCG/ACTUATION, 250	
EXELON 2 MG/ML.....	135	FEMHRT LOW DOSE		MCG/ACTUATION, 50	
EXELON 4.6 MG/24		0.5-2.5 MG-MCG.....	99	MCG/ACTUATION.....	20
HOUR, 9.5 MG/24		FEMTRACE 0.45 MG, 0.9		FLOVENT HFA 110	
HOUR.....	135	MG, 1.8 MG.....	100	MCG/ACTUATION, 220	
<i>exemestane</i>	49	<i>fenofibrate</i>	40	MCG/ACTUATION, 44	
EXFORGE 10-160 MG,		<i>fenofibrate</i>	41	MCG/ACTUATION.....	20
10-320 MG, 5-160 MG,		<i>fenofibrate micronized</i>	41	FLOXIN 0.3 %.....	129
5-320 MG.....	44	<i>fenofibric acid</i>	40	<i>fluconazole</i>	38
EXFORGE HCT		FENOGLIDE 120 MG, 40		<i>fluconazole in</i>	
10-160-12.5 MG, 10-160-25		MG.....	40	<i>dextrose(iso-o)</i>	38
MG, 10-320-25 MG,		<i>fenopropfen 600 mg</i>	4	<i>fluconazole in nacl</i>	
5-160-12.5 MG, 5-160-25		<i>fentanyl</i>	7	<i>(iso-osm)</i>	38
MG.....	44	<i>fentanyl citrate (pf)</i>	9	FLUDARA 50 MG.....	48
EXJADE 125 MG.....	35	<i>fentanyl citrate (pf) 50</i>		<i>fludarabine</i>	48
EXJADE 250 MG, 500 MG...	35	<i>mcg/ml</i>	7	<i>fludarabine 50 mg/2 ml</i>	48
EXTAVIA 0.3 MG.....	136	<i>fexofenadine</i>	39	<i>fludrocortisone 0.1 mg</i>	81
FABRAZYME 35 MG.....	97	<i>fexofenadine 30 mg</i>	39	FLUMADINE 100 MG.....	62
FABRAZYME 5 MG.....	97	<i>fexofenadine-pseudoephedrin</i>		<i>flumazenil</i>	35
<i>famotidine</i>	141	<i>e</i>	81	<i>flunisolide</i>	120
<i>famotidine (pf) 20 mg/2</i>		FIBRICOR 105 MG, 35		<i>flunisolide 25 mcg (0.025</i>	
<i>ml</i>	141	MG.....	40	<i>%)</i>	119
<i>famotidine 10 mg/ml</i>	141	FINACEA 15 %.....	91	<i>fluocinolone 0.01 %</i>	88
<i>famotidine(pf) in sal</i>		<i>finasteride</i>	104	<i>fluocinolone 0.01 %, 0.025</i>	
<i>(iso-os) 20 mg/50 ml</i>	141	FIORICET-CODEINE		<i>%</i>	88
FANAPT 1 MG, 10 MG, 12		30-50-325-40 MG.....	9	<i>fluocinolone 0.025 %</i>	87
MG, 2 MG, 4 MG, 6 MG, 8		FIORINAL-CODEINE #3		<i>fluocinonide 0.05 %</i>	88
MG.....	56	30-50-325-40 MG.....	9	FLUOCINONIDE-E 0.05	
FANAPT 1MG(2)-2MG(2)-		FIRMAGON 120 MG.....	49	<i>%</i>	88
4MG(2)-6MG(2).....	56	FIRMAGON 80 MG.....	49	<i>fluocinonide-emollient</i>	88

<i>fluorometholone</i>	127	FORTEO 20 MCG/DOSE (750 MCG/3 ML), 20 MCG/DOSE - 600 MCG/2.4 ML.....	94	<i>furosemide 10 mg/ml, 40 mg/5 ml</i>	93
FLUOROPLEX 1 %.....	84	FORTESTA 10 MG/0.5 GRAM PER ACTUATION... 13		FUZEON 90 MG.....	59
<i>fluorouracil</i>	48	FORTICAL 200 UNIT/ACTUATION.....	94	<i>gabapentin</i>	25
<i>fluorouracil</i>	84	FOSAMAX 10 MG, 35 MG, 40 MG, 5 MG, 70 MG.....	94	GABITRIL 12 MG, 16 MG, 2 MG, 4 MG.....	26
<i>fluorouracil 1 gram/20 ml</i>	48	FOSAMAX 70 MG/75 ML... 94		<i>galantamine</i>	135
<i>fluoxetine</i>	29	FOSAMAX PLUS D 70-2,800 MG-UNIT, 70-5,600 MG-UNIT.....	94	GAMASTAN S/D 15-18 % RANGE.....	130
<i>fluoxetine 10 mg</i>	29	<i>foscarnet</i>	61	GAMMAGARD LIQUID 10 %.....	130
<i>fluphenazine decanoate 25 mg/ml</i>	58	FOSCAVIR 24 MG/ML.....	61	GAMMAGARD S/D 10 GRAM, 5 GRAM.....	131
<i>fluphenazine hcl 1 mg, 10 mg, 2.5 mg, 5 mg</i>	58	<i>fosinopril</i>	42	GAMMAGARD S/D 2.5 G.....	131
<i>fluphenazine hcl 2.5 mg/5 ml</i>	58	<i>fosinopril-hydrochlorothiazid e</i>	44	GAMMAGARD S-D (IGA<1UG/ML) 10 GRAM, 5 GRAM.....	131
<i>fluphenazine hcl 2.5 mg/ml</i>	58	<i>fosphenytoin</i>	26	GAMMAPLEX 5 %.....	131
<i>flurbiprofen</i>	4	FOSRENOL 1,000 MG, 500 MG, 750 MG.....	103	GAMUNEX 10 %.....	131
<i>flurbiprofen 50 mg</i>	4	FRAGMIN 10,000 UNIT/ML.....	23	GAMUNEX-C 1 GRAM/10 ML (10 %), 10 GRAM/100 ML (10 %), 2.5 GRAM/25 ML (10 %), 20 GRAM/200 ML (10 %), 5 GRAM/50 ML (10 %)......	131
<i>flurbiprofen sodium</i>	129	FRAGMIN 10,000 UNIT/ML, 12,500 UNIT/0.5 ML, 15,000 UNIT/0.6 ML, 18,000 UNIT/0.72 ML, 2,500 UNIT/0.2 ML, 5,000 UNIT/0.2 ML, 7,500 UNIT/0.3 ML.....	23	<i>ganciclovir 250 mg</i>	61
<i>flutamide 125 mg</i>	49	FRAGMIN 25,000 UNIT/ML.....	23	<i>ganciclovir 500 mg</i>	61
<i>fluticasone</i>	87	FREAMINE HBC 6.9 % 6.9 %.....	123	<i>ganciclovir sodium</i>	61
<i>fluticasone</i>	119	FREAMINE III 10 % 10 %.....	123	GANTRISIN PEDIATRIC 500 MG/5 ML.....	137
<i>fluvoxamine 100 mg, 25 mg, 50 mg</i>	29	FREAMINE III 3 %-ELECTROLYTES 3 %... 123		GARAMYCIN 0.3 %.....	125
FML FORTE 0.25 %.....	127	FREAMINE III 8.5 % 8.5 %.....	123	GARAMYCIN 0.3 % (3 MG/G).....	125
FML LIQUIFILM 0.1 %.....	127	FUNGI CURE 1 %.....	83	GARDASIL 20-40-40-20 MCG/0.5 ML.....	143
FML S.O.P. 0.1 %.....	127	<i>furosemide</i>	93	<i>gauze bandage 2 x 2 "</i>	111
FOCALIN 10 MG, 2.5 MG, 5 MG.....	1	<i>furosemide 10 mg/ml</i>	93	GAVILYTE-C 240-22.72-6.72 GRAM.....	108
<i>fomepizole</i>	35			GAVILYTE-G 236-22.74-6.74 GRAM.....	108
<i>fondaparinux</i>	23			GAVILYTE-N 420 G.....	108
FORADIL AEROLIZER 12 MCG.....	21			<i>gemcitabine</i>	48
FORTAMET 1,000 MG, 500 MG.....	31			<i>gemcitabine 2 gram</i>	48
FORTAZ 1 GRAM, 2 GRAM.....	72				
FORTAZ 1 GRAM, 2 GRAM, 500 MG.....	72				
FORTAZ 6 GRAM.....	72				
FORTAZ IN D5W 1 GRAM/50 ML, 2 GRAM/50 ML.....	72				

<i>gemfibrozil</i>	41	GEODON 20 MG.....	56	GLYSET 100 MG, 25 MG,	
GEMZAR 1 GRAM, 200		GEODON 20 MG, 40 MG,		50 MG.....	30
MG.....	48	60 MG, 80 MG.....	56	GOLYTELY	
GENERESS FE		GIANVI 3-20 MG-MCG.....	73	236-22.74-6.74 GRAM.....	108
0.8MG-25MCG(24) & 75		GILDESS FE 1-20		<i>granisetron</i>	36
MG (4).....	73	MG-MCG, 1.5-30		<i>granisetron (pf)</i>	36
GENERLAC 10 GRAM/15		MG-MCG.....	74	<i>granisetron (pf) 1 mg/ml (1</i>	
ML.....	103	GILENYA 0.5 MG.....	136	<i>ml)</i>	36
GENGRAF 100 MG, 25		GLASSIA 1 G/50 ML (2		GRIFULVIN V 125 MG/5	
MG.....	63	%).....	137	ML.....	37
GENGRAF 100 MG/ML.....	63	GLEEVEC 100 MG, 400		GRIFULVIN V 500 MG.....	37
GENOTROPIN 12 MG/ML		MG.....	51	<i>griseofulvin microsize</i>	37
(36 UNIT/ML).....	95	<i>glimepiride</i>	34	GRIS-PEG 125 MG, 250	
GENOTROPIN 5 MG/ML		<i>glipizide</i>	34	MG.....	37
(15 UNIT/ML).....	95	<i>glipizide-metformin</i>	31	<i>guanabenz 4 mg, 8 mg</i>	43
GENOTROPIN		GLUCAGEN 1 MG.....	31	<i>guanfacine</i>	43
MINIQUICK 0.2 MG/0.25		GLUCAGEN DIAGNOSTIC		<i>guanidine 125 mg</i>	46
ML, 0.4 MG/0.25 ML, 0.6		KIT 1 MG/ML.....	32	GYNAZOLE-1 2 %.....	145
MG/0.25 ML.....	95	GLUCAGEN HYPOKIT 1		HALAC 0.05-12 %.....	88
GENOTROPIN		MG.....	32	HALAVEN 1 MG/2 ML (0.5	
MINIQUICK 0.8 MG/0.25		GLUCAGON		MG/ML).....	54
ML, 1 MG/0.25 ML, 1.2		EMERGENCY 1 MG.....	32	HALDOL 5 MG/ML.....	57
MG/0.25 ML, 1.4 MG/0.25		GLUCOPHAGE 1,000 MG,		HALDOL DECANOATE	
ML, 1.6 MG/0.25 ML, 1.8		500 MG, 850 MG.....	31	100 MG/ML, 50 MG/ML.....	57
MG/0.25 ML, 2 MG/0.25		GLUCOPHAGE XR 500		HALFLYTELY WITH	
ML.....	95	MG, 750 MG.....	31	FLAVOR PACKS 5 MG	
GENTAK 0.3 %.....	125	GLUCOTROL 10 MG, 5		X4 (20 MG) -210 GRAM....	108
GENTAK 0.3 % (3		MG.....	34	HALFLYTELY-BISACOD	
MG/G).....	125	GLUCOTROL XL 10 MG,		YL BOWEL KIT 10-210	
<i>gentamicin</i>	125	2.5 MG, 5 MG.....	34	MG-GRAM.....	108
<i>gentamicin 0.1 %</i>	83	GLUCOVANCE 1.25-250		HALFLYTELY-BISACOD	
<i>gentamicin 10 mg/ml, 40</i>		MG, 2.5-500 MG, 5-500		YL W-FLAV PK 10-210	
<i>mg/ml</i>	2	MG.....	31	MG-GRAM, 5-210	
<i>gentamicin in nacl (iso-osm)</i>		GLUMETZA 1,000 MG, 500		MG-GRAM.....	108
<i>100 mg/100 ml, 100 mg/50 ml,</i>		MG.....	31	<i>halobetasol propionate</i>	89
<i>120 mg/100 ml, 60 mg/100 ml,</i>		<i>glyburide</i>	34	<i>halobetasol propionate</i>	90
<i>60 mg/50 ml, 70 mg/50 ml, 80</i>		<i>glyburide micronized</i>	34	HALOG 0.1 %.....	88
<i>mg/50 ml, 90 mg/100 ml</i>	2	<i>glyburide-metformin</i>	31	HALONATE PAC 0.05-12	
<i>gentamicin in nacl (iso-osm)</i>		GLYCOLAX 17		%.....	88
<i>80 mg/100 ml</i>	2	GRAM/DOSE.....	109	<i>haloperidol 0.5 mg, 1 mg, 10</i>	
<i>gentamicin sulfate (ped) (pf)</i>		<i>glycopyrrolate</i>	140	<i>mg, 2 mg, 20 mg, 5 mg</i>	57
<i>20 mg/2 ml</i>	2	<i>glycopyrrolate</i>	141	<i>haloperidol decanoate</i>	57
<i>gentamicin sulfate (pf) 100</i>		GLYNASE 1.5 MG, 3 MG, 6		<i>haloperidol lactate</i>	57
<i>mg/10 ml, 60 mg/6 ml, 80 mg/8</i>		MG.....	34	<i>haloperidol lactate 2 mg/ml</i> ...	57
<i>ml</i>	2				
GENTASOL 0.3 %.....	125				

HAVRIX (PF) 1,440 EL UNIT/ML, 720 EL UNIT/0.5 ML.....	144	HIZENTRA 1 GRAM/5 ML (20 %), 2 GRAM/10 ML (20 %), 4 GRAM/20 ML (20 %).....	131	HUMULIN N 100 UNIT/ML.....	33
HAVRIX (PF) 1,440 ELISA UNIT/ML, 720 EL UNIT/0.5 ML.....	144	HUMALOG 100 UNIT/ML.....	32	HUMULIN N PEN 100 UNIT/ML (3 ML).....	33
HEATHER 0.35 MG.....	78	HUMALOG KWIKPEN 100 UNIT/ML.....	32	HUMULIN R 100 UNIT/ML.....	33
HECTOROL 2 MCG/ML (1 ML), 4 MCG/2 ML.....	97	HUMALOG MIX 50-50 100 UNIT/ML (50-50).....	32	HUMULIN R U-500 "CONCENTRATED" 500 UNIT/ML.....	33
HEPAGAM B >312 UNIT/ML, >312 UNIT/ML (5 ML).....	131	HUMALOG MIX 50-50 KWIKPEN 100 UNIT/ML (50-50).....	32	HYCAMTIN 4 MG.....	54
<i>heparin (porcine) 1,000 unit/ml, 10,000 unit/ml, 20,000 unit/ml, 5,000 unit/ml.....</i>	23	HUMALOG MIX 75-25 100 UNIT/ML (75-25).....	32	HYCET 7.5-325 MG/15 ML....	9
<i>heparin (porcine) 5,000 unit/ml.....</i>	23	HUMALOG MIX 75-25 KWIKPEN 100 UNIT/ML (75-25).....	32	<i>hydralazine 10 mg, 100 mg, 25 mg, 50 mg.....</i>	45
<i>heparin (porcine) in d5w 10,000 unit/100 ml, 12,500 unit/250 ml, 20,000 unit/500 ml, 25,000 unit/250 ml, 25,000 unit/500 ml.....</i>	23	HUMALOG PEN 100 UNIT/ML.....	33	<i>hydralazine 20 mg/ml.....</i>	45
<i>heparin (porcine) in ns (pf) 1,000 unit/500 ml, 2,000 unit/1,000 ml.....</i>	23	HUMAPEN LUXURA HD	113	HYDREA 500 MG.....	52
<i>heparin (porcine)-0.45% nacl 12,500 unit/250 ml, 25,000 unit/250 ml, 25,000 unit/500 ml.....</i>	23	HUMAPEN MEMOIR	113	<i>hydrochlorothiazide.....</i>	93
<i>heparin, porcine (pf) 1,000 unit/ml, 5,000 unit/0.5 ml.....</i>	23	HUMATROPE 12 (36 UNIT) MG, 24 (72 UNIT) MG.....	95	<i>hydrochlorothiazide 12.5 mg, 25 mg, 50 mg.....</i>	93
<i>heparin, porcine (pf) 10,000 unit/5 ml, 25,000 unit/10 ml... </i>	23	HUMATROPE 5 (15 UNIT) MG.....	95	<i>hydrocodone-acetaminophen... </i>	9
<i>heparin, porcine (pf) 5,000 unit/0.5 ml.....</i>	23	HUMATROPE 6 (18 UNIT) MG.....	95	<i>hydrocodone-acetaminophen.</i>	10
HEPATAMINE 8% 8 %.....	123	HUMIRA 20 MG/0.4 ML, 40 MG/0.8 ML.....	3	<i>hydrocodone-acetaminophen.</i>	11
HEPATASOL 8 % 8 %.....	123	HUMIRA CROHN'S DIS START PCK 40 MG/0.8 ML...	3	<i>hydrocodone-acetaminophen 2.5-167 mg/5 ml, 5-334 mg/10 ml, 7.5-500 mg/15 ml(15 ml).....</i>	10
HEPSERA 10 MG.....	61	HUMIRA PEN 40 MG/0.8 ML.....	3	<i>hydrocodone-acetaminophen 2.5-500 mg.....</i>	10
HERCEPTIN 440 MG.....	49	HUMIRA PSORIASIS STARTER PACK 40 MG/0.8 ML.....	3	<i>hydrocodone-ibuprofen.....</i>	11
HEXALEN 50 MG.....	47	HUMULIN 50/50 100 UNIT/ML (50-50).....	33	<i>hydrocortisone.....</i>	13
HIBERIX 10 MCG/0.5 ML.....	143	HUMULIN 70/30 100 UNIT/ML (70-30).....	33	<i>hydrocortisone.....</i>	78
HIBTITER	143	HUMULIN 70/30 PEN 100 UNIT/ML (70-30).....	33	<i>hydrocortisone.....</i>	86
HIPREX 1 GRAM.....	142			<i>hydrocortisone.....</i>	88
				<i>hydrocortisone 1 %, 2.5 %....</i>	88
				<i>hydrocortisone butyrate.....</i>	88
				<i>hydrocortisone valerate.....</i>	90
				<i>hydrocortisone valerate 0.2 %.....</i>	88
				<i>hydrocortisone-acetic acid.....</i>	130
				<i>hydrocortisone-min oil-wht pet 1 %.....</i>	88
				HYDROGESIC 5-500 MG....	10

<i>hydromorphone</i>	7	<i>imipramine pamoate</i>	30	INTAL 20 MG/2 ML.....	19
<i>hydromorphone (pf)</i>	7	<i>imiquimod</i>	90	INTEGRA SYRINGE 1	
<i>hydroxychloroquine</i>	46	IMITREX 100 MG, 25 MG,		ML 25 X 1".....	113
<i>hydroxyurea</i>	52	50 MG.....	114	INTELENCE 100 MG, 200	
<i>hydroxyzine hcl 10 mg, 25</i>		IMITREX 20		MG.....	59
<i>mg, 50 mg</i>	18	MG/ACTUATION.....	114	INTRALIPID 10 %, 20 %, 30 %.....	121
<i>hydroxyzine hcl 10 mg/5 ml</i> ...	18	IMITREX 5		INTRON A 10 MILLION	
<i>hydroxyzine hcl 25 mg/ml</i>	18	MG/ACTUATION.....	114	UNIT (1 ML).....	52
<i>hydroxyzine hcl 50 mg/ml</i>	18	IMITREX 6 MG/0.5 ML.....	114	INTRON A 10 MILLION	
<i>hydroxyzine pamoate</i>	18	IMITREX STATDOSE		UNIT/0.2 ML, 5 MILLION	
<i>hydroxyzine pamoate 100</i>		KIT REFILL 4 MG/0.5		UNIT/0.2 ML.....	52
<i>mg</i>	18	ML, 6 MG/0.5 ML.....	114	INTRON A 10 MILLION	
HYPERHEP B S/D 220		IMITREX STATDOSE		UNIT/ML.....	52
UNIT/ML.....	131	PEN 4 MG/0.5 ML, 6		INTRON A 18 MILLION	
HYPERHEP B S/D 220		MG/0.5 ML.....	114	UNIT (1 ML), 50 MILLION	
UNIT/ML, 220 UNIT/ML		IMOVAX RABIES		UNIT (1 ML).....	52
(5 ML).....	131	VACCINE 2.5 UNIT.....	144	INTRON A 3 MILLION	
HYPERHEP B S-D		IMPLANON 68 MG.....	77	UNIT /0.2 ML-6 DOSES.....	52
NEONATAL 110 UNIT/0.5		IMURAN 50 MG.....	63	INTRON A 6 MILLION	
ML.....	131	INAPSINE 2.5 MG/ML.....	18	UNIT/ML.....	52
HYTONE 2.5 %.....	88	INCRELEX 10 MG/ML.....	97	INTROVALE 0.15-30	
HYTRIN 2 MG.....	43	<i>indapamide 1.25 mg, 2.5</i>		MG-MCG.....	74
HYZAAR 100-12.5 MG,		<i>mg</i>	93	INTUNIV ER 1 MG, 2 MG, 3	
100-25 MG, 50-12.5 MG.....	44	INDERAL LA 120 MG, 160		MG, 4 MG.....	1
IBUDONE 5-200 MG.....	10	MG, 60 MG, 80 MG.....	66	INVANZ 1 GRAM.....	15
<i>ibuprofen 100 mg/5 ml</i>	4	INDOCIN 25 MG/5 ML.....	4	INVEGA 1.5 MG, 3 MG, 6	
<i>ibuprofen 400 mg, 600 mg, 800</i>		<i>indomethacin 25 mg, 50 mg</i>	4	MG, 9 MG.....	56
<i>mg</i>	4	<i>indomethacin 75 mg</i>	4	INVEGA SUSTENNA 117	
IDAMYCIN PFS 1		INFANRIX (PF) 25-58-10		MG/0.75 ML, 156 MG/ML	
MG/ML.....	51	LF-MCG-LF/0.5ML.....	139	(1 ML), 234 MG/1.5 ML, 39	
<i>idarubicin</i>	51	INFERGEN 15 MCG/0.5		MG/0.25 ML, 78 MG/0.5	
IFEX 1 GRAM, 3 GRAM.....	47	ML, 9 MCG/0.3 ML.....	61	ML.....	56
<i>ifosfamide</i>	47	INFUMORPH P/F 10		INVIRASE 200 MG.....	59
<i>ifosfamide 1 gram/20 ml, 3</i>		MG/ML, 25 MG/ML.....	7	INVIRASE 500 MG.....	59
<i>gram/60 ml</i>	47	INNOHEP 20,000 ANTI-XA		IONOSOL-B IN D5W 5	
<i>ifosfamide-mesna 1-1 gram,</i>		UNIT/ML.....	23	%.....	115
<i>3,000-1,000 mg</i>	51	INNOPRAN XL 120 MG, 80		IONOSOL-MB IN D5W 5	
ILARIS (PF) 180 MG/1.2 ML		MG.....	66	%.....	115
(150 MG/ML).....	4	INSULIN SYRINGE		IONOSOL-T IN D5W 5	
ILOTYCIN 5 MG/GRAM		MICROFINE 0.3 ML 28 X		%.....	115
(0.5 %).....	125	1/2", 1 ML 27 X 5/8", 1/2		IOPIDINE 0.5 %.....	125
IMDUR 120 MG, 30 MG, 60		ML 28 X 1/2".....	113	IOPIDINE 1 %.....	125
MG.....	17	INSULIN SYRINGE		IPOL 40-8-32 UNIT/0.5	
<i>imipramine hcl</i>	30	ULTRAFINE 1/2 ML 29 X		ML.....	144
		1/2".....	113		

<i>ipratropium bromide</i>	119	JANTOVEN 1 MG, 10 MG, 2 MG, 2.5 MG, 3 MG, 4 MG, 5 MG, 6 MG, 7.5 MG.....	23	KENALOG 0.147 MG/GRAM.....	88
<i>ipratropium bromide 0.02 %</i>	20	JANUMET 50-1,000 MG, 50-500 MG.....	31	KENALOG 10 MG/ML, 40 MG/ML.....	79
<i>ipratropium-albuterol</i>	21	JANUVIA 100 MG, 25 MG, 50 MG.....	32	KEPIVANCE 6.25 MG.....	53
IPRIVASK 15 MG.....	24	JEVANTIQUE 1-5 MG-MCG.....	99	KEPPRA 1,000 MG, 250 MG, 500 MG, 750 MG.....	24
IQUIX 1.5 %.....	126	JE-VAX	144	KEPPRA 100 MG/ML.....	24
IRESSA 250 MG.....	51	JEVTANA 10 MG/ML (FINAL).....	54	KEPPRA 500 MG/5 ML.....	24
<i>irinotecan</i>	54	JINTELI 1-5 MG-MCG.....	99	KEPPRA XR 500 MG, 750 MG.....	24
<i>irinotecan 500 mg/25 ml</i>	54	JOLESSA 0.15-30 MG-MCG.....	74	KERATOL HC 1-10 %.....	88
ISENTRESS 400 MG.....	59	JOLIVETTE 0.35 MG.....	78	KERLONE 10 MG, 20 MG...	65
ISMO 20 MG.....	17	JUNEL 1.5/30 (21) 1.5-30 MG-MCG.....	74	KETEK 300 MG.....	16
ISOCHRON 40 MG.....	17	JUNEL 1/20 (21) 1-20 MG-MCG.....	74	KETEK 400 MG.....	16
ISODITRATE 40 MG.....	17	JUNEL FE 1.5/30 (28) 1.5-30 MG-MCG.....	74	<i>ketoconazole</i>	83
ISOLYTE-H IN D5W 5 %.....	115	JUNEL FE 1/20 (28) 1-20 MG-MCG.....	74	<i>ketoconazole</i>	84
ISOLYTE-M IN D5W	115	KADIAN 10 MG, 100 MG, 20 MG, 200 MG, 30 MG, 50 MG, 60 MG, 80 MG.....	7	<i>ketoconazole 200 mg</i>	38
ISOLYTE-P IN D5W 5 %...	115	KALBITOR 10 MG/ML (1 ML).....	105	<i>ketoprofen 200 mg</i>	5
ISOLYTE-S	115	KALETRA 100-25 MG.....	60	<i>ketoprofen 50 mg, 75 mg</i>	5
ISOLYTE-S IN D5W	115	KALETRA 133.3-33.3 MG...	60	<i>ketorolac</i>	128
ISOLYTE-S PH 7.4	115	KALETRA 200-50 MG.....	60	<i>ketorolac 10 mg</i>	5
<i>isoniazid 100 mg, 300 mg</i>	46	KALETRA 400-100 MG/5 ML.....	60	<i>ketorolac 15 mg/ml, 30 mg/ml</i>	5
<i>isoniazid 100 mg/ml</i>	46	KALEXATE	65	<i>ketorolac 15 mg/ml, 30 mg/ml, 30 mg/ml (1 ml)</i>	5
<i>isoniazid 50 mg/5 ml</i>	46	<i>kanamycin 1 gram/3 ml</i>	2	<i>ketorolac 60 mg/2 ml</i>	5
ISOPTIN SR 120 MG, 180 MG, 240 MG.....	68	KAON CL-10 10 MEQ.....	116	KINERET 100 MG/0.67 ML...	3
ISORDIL 40 MG.....	17	KARIVA 0.15-0.02MG X21 /0.01 MG X 5.....	74	KINRIX 25 LF-58 MCG-10 LF/0.5 ML.....	139
ISORDIL TITRADOSE 5 MG.....	17	KAYEXALATE	65	KINRIX 25 LF-58 MCG-10 LF/0.5 ML.....	140
<i>isosorbide dinitrate</i>	17	KEFLEX 250 MG, 500 MG.....	70	KIONEX	65
<i>isosorbide dinitrate 10 mg, 20 mg, 30 mg</i>	17	KEFLEX 750 MG.....	70	KIONEX 15 G/60 ML.....	65
<i>isosorbide dinitrate 2.5 mg, 5 mg</i>	17	KELNOR 1/35 (28) 1-35 MG-MCG.....	74	KLARON 10 %.....	82
<i>isosorbide mononitrate</i>	17			KLOR-CON 10 10 MEQ.....	117
<i>isradipine 2.5 mg, 5 mg</i>	68			KLOR-CON 8 8 MEQ.....	117
ISTALOL 0.5 %.....	124			KLOR-CON 8 MEQ.....	116
ISTODAX 10 MG/2 ML.....	51			KLOR-CON M10 10 MEQ.....	117
<i>itraconazole</i>	38			KLOR-CON M15 15 MEQ.....	117
IXEMPRA 15 MG, 45 MG...	54				
IXIARO (PF) 6 MCG/0.5 ML.....	144				
JALYN 0.5-0.4 MG.....	104				

KLOR-CON M20 20 MEQ.....	117	LAMICTAL XR 300 MG.....	25	<i>leucovorin calcium 100 mg, 200 mg, 350 mg, 50 mg, 500 mg</i>	53
KRISTALOSE 10 GRAM, 20 GRAM.....	109	LAMICTAL XR STARTER (BLUE) 25 MG (21) -50 MG (7).....	25	<i>leucovorin calcium 500 mg/50 ml</i>	53
KRYSTEXXA 8 MG/ML...	104	LAMICTAL XR STARTER (GREEN) 50 MG(14)-100MG (14)-200 MG (7).....	25	LEUKERAN 2 MG.....	47
K-TAB 10 MEQ.....	116	LAMICTAL XR STARTER (ORANGE) 25MG (14)-50 MG (14)-100MG (7).....	25	LEUKINE 250 MCG.....	106
KURIC 2 %.....	83	LAMISIL 1 %.....	83	LEUKINE 500 MCG/ML....	106
KUVAN 100 MG.....	97	LAMISIL 125 MG, 187.5 MG.....	37	<i>leuprolide</i>	50
KYTRIL 1 MG/ML, 1 MG/ML (1 ML).....	36	LAMISIL 250 MG.....	37	LEUSTATIN 10 MG/10 ML.....	48
KYTRIL 100 MCG/ML.....	36	<i>lamotrigine</i>	24	<i>levabuterol hcl</i>	22
<i>labetalol</i>	65	<i>lamotrigine</i>	25	LEVAQUIN 25 MG/ML.....	101
<i>labetalol 5 mg/ml</i>	65	LANOXIN 125 MCG, 250 MCG.....	69	LEVAQUIN 250 MG, 500 MG, 750 MG.....	101
LAC-HYDRIN 12 %.....	90	LANOXIN 250 MCG/ML....	69	LEVAQUIN 250 MG/10 ML.....	101
LACLOTION 12 %.....	90	LANOXIN PEDIATRIC 100 MCG/ML.....	69	LEVAQUIN IN D5W 250 MG/50 ML, 500 MG/100 ML, 750 MG/150 ML.....	101
<i>lactated ringers</i>	64	<i>lansoprazole</i>	141	LEVAQUIN LEVA-PAK 750 MG.....	101
<i>lactated ringers</i>	115	<i>lansoprazole</i>	142	LEVEMIR 100 UNIT/ML....	33
LACTREX 12 %.....	90	LANTUS 100 UNIT/ML.....	33	LEVEMIR FLEXPEN 100 UNIT/ML.....	33
<i>lactulose</i>	103	LANTUS SOLOSTAR 100 UNIT/ML (3 ML).....	33	<i>levetiracetam</i>	24
LAMICTAL 100 MG, 150 MG, 200 MG, 25 MG.....	24	LARIAM 250 MG.....	46	<i>levetiracetam 500 mg/5 ml (5 ml)</i>	25
LAMICTAL 25 MG, 5 MG... ..	24	LASIX 20 MG, 40 MG, 80 MG.....	93	LEVLEN (28) 0.15-30 MG-MCG.....	74
LAMICTAL ODT 100 MG, 200 MG, 25 MG, 50 MG.....	24	LASTACRAFT 0.25 %.....	129	<i>levobunolol</i>	123
LAMICTAL ODT STARTER (BLUE) 25 MG (21) -50 MG (7).....	24	<i>latanoprost</i>	129	<i>levobunolol 0.25 %</i>	124
LAMICTAL ODT STARTER (GREEN) 50 MG (42) -100 MG (14).....	24	LATUDA 40 MG, 80 MG....	56	<i>levocarnitine</i>	97
LAMICTAL ODT STARTER (ORANGE) 25MG (14)-50 MG (14)-100MG (7).....	25	LEENA 28 0.5/1/0.5-35 MG-MCG.....	74	<i>levocarnitine (with sucrose)</i>	97
LAMICTAL STARTER (BLUE) KIT 25 MG (35).....	25	<i>leflunomide</i>	5	<i>levocetirizine</i>	39
LAMICTAL STARTER (GREEN) KIT 25 MG (84) -100 MG (14).....	25	LESCOL 20 MG, 40 MG.....	41	LEVO-DROMORAN 2 MG... ..	7
LAMICTAL STARTER (ORANGE) KIT 25 MG (42) -100 MG (7).....	25	LESCOL XL 80 MG.....	41	LEVO-DROMORAN 2 MG/ML.....	7
LAMICTAL XR 100 MG, 200 MG, 25 MG, 50 MG.....	25	LESSINA 0.1-20 MG-MCG.....	74	<i>levofloxacin</i>	101
		LETAIRIS 10 MG, 5 MG.....	69	<i>levofloxacin</i>	126
		<i>letrozole</i>	49	<i>levofloxacin in d5w</i>	101
		<i>leucovorin calcium 10 mg, 15 mg, 25 mg, 5 mg</i>	53	<i>levonorgestrel</i>	77
				LEVORA-28 0.15-30 MG-MCG.....	74

<i>levorphanol tartrate</i>	7	LIPOFEN 150 MG, 50 MG...	40	LOPID 600 MG.....	41
LEVOTHROID 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 300 MCG, 50 MCG, 75 MCG, 88 MCG.....	138	LIPOSYN II 10 %, 20 %.....	121	LOPRESSOR 100 MG, 50 MG.....	66
<i>levothyroxine</i>	138	LIPOSYN III 10 %, 20 %, 30 %.....	121	LOPRESSOR 5 MG/5 ML....	66
<i>levothyroxine</i>	139	<i>lisinopril</i>	42	LOPRESSOR HCT 100-25 MG, 100-50 MG, 50-25 MG.....	44
LEVOXYL 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG.....	138	<i>lisinopril-hydrochlorothiazid e</i>	44	LOPROX 0.77 %.....	83
LEXAPRO 10 MG, 20 MG, 5 MG.....	29	<i>lisinopril-hydrochlorothiazid e</i>	45	LOPROX 0.77 %.....	84
LEXAPRO 5 MG/5 ML.....	29	<i>lithium carbonate</i>	56	LOPROX 1 %.....	83
LEXIVA 50 MG/ML.....	60	<i>lithium carbonate 150 mg, 300 mg, 600 mg</i>	56	LORCET 10/650 10-650 MG.....	10
LEXIVA 700 MG.....	60	<i>lithium carbonate 300 mg</i>	56	LORCET PLUS 7.5-650 MG.....	10
LIALDA 1.2 G.....	103	<i>lithium carbonate 450 mg</i>	56	LORTAB 10-500 MG, 5-500 MG, 7.5-500 MG.....	10
<i>lidocaine (pf)</i>	19	<i>lithium citrate 8 meq/5 ml</i>	56	LORTAB ELIXIR 7.5-500 MG/15 ML.....	10
<i>lidocaine (pf)</i>	110	LITHOBID 300 MG.....	56	LORYNA 3-20 MG-MCG....	74
<i>lidocaine (pf) 10 mg/ml (1 %)</i>	109	LIVALO 1 MG, 2 MG, 4 MG.....	41	<i>losartan</i>	42
<i>lidocaine (pf) 100 mg/5 ml (2 %), 50 mg/5 ml (1 %)</i>	19	LOCOID 0.1 %.....	88	<i>losartan-hydrochlorothiazide</i>	44
<i>lidocaine hcl</i>	91	LOCOID LIPOCREAM 0.1 %.....	88	LOTEMAX 0.5 %.....	127
<i>lidocaine hcl</i>	110	LODOSYN 25 MG.....	55	LOTENSIN 10 MG, 20 MG, 40 MG, 5 MG.....	42
<i>lidocaine hcl 10 mg/ml (1 %)</i>	109	LOESTRIN 1.5/30 (21) 1.5-30 MG-MCG.....	74	LOTENSIN HCT 10-12.5 MG, 20-12.5 MG, 20-25 MG, 5-6.25 MG.....	44
<i>lidocaine (pf) 100 mg/5 ml (2 %), 50 mg/5 ml (1 %)</i>	19	LOESTRIN 1/20 (21) 1-20 MG-MCG.....	74	LOTREL 10-20 MG, 10-40 MG, 2.5-10 MG, 5-10 MG, 5-20 MG, 5-40 MG.....	44
<i>lidocaine hcl</i>	91	LOESTRIN 24 FE 1-20 (24)-75(4) MG-MCG-MG....	74	LOTRISONE 1-0.05 %.....	84
<i>lidocaine hcl</i>	110	LOESTRIN FE 1.5/30 (28) 1.5-30 MG-MCG.....	74	LOTRONEX 0.5 MG, 1 MG.....	103
<i>lidocaine hcl 2 %</i>	90	LOESTRIN FE 1/20 (28) 1-20 MG-MCG.....	74	<i>lovastatin</i>	41
<i>lidocaine hcl 4 %</i>	91	LOFIBRA 134 MG, 200 MG, 67 MG.....	41	<i>lovastatin 10 mg</i>	41
<i>lidocaine hcl 5 %</i>	91	LOFIBRA 160 MG.....	40	LOVAZA 1 GRAM.....	40
LIDOCAINE VISCOUS 2 %.....	117	LOFIBRA 54 MG.....	41	LOVENOX 100 MG/ML, 120 MG/0.8 ML, 150 MG/ML, 30 MG/0.3 ML, 40 MG/0.4 ML, 60 MG/0.6 ML, 80 MG/0.8 ML.....	24
<i>lidocaine-epinephrine</i>	109	LOKARA 0.05 %.....	88	LOVENOX 300 MG/3 ML....	23
<i>lidocaine-prilocaine</i>	90	LOMOTIL 2.5-0.025 MG.....	35		
LIDODERM 5 %(700 MG/PATCH).....	91	LOMOTIL 2.5-0.025 MG/5 ML.....	35		
LIMBITROL 12.5-5 MG....	135	LONOX 2.5-0.025 MG.....	35		
LINCOCIN 300 MG/ML.....	16	LO-OVRAL (28) 0.3-30 MG-MCG.....	74		
<i>lindane 1 %</i>	91	<i>loperamide 2 mg</i>	35		
<i>liothyronine</i>	138				
<i>liothyronine</i>	139				

LOW-OGESTREL (28) 0.3-30 MG-MCG.....	74	<i>magnesium sulfate</i> 20 gram/500 ml, 40 gram/1,000 ml.....	116	MAXITROL 3.5-10,000-0.1 MG/ML-UNIT/ML-%.....	127
<i>loxapine succinate</i>	57	<i>magnesium sulfate</i> 4 meq/ml.....	116	MAXITROL 3.5-10,000-0.1 MG-UNIT/G-%.....	127
LOXITANE 10 MG, 25 MG, 5 MG, 50 MG.....	57	<i>magnesium sulfate</i> 50 % (4 meq/ml).....	116	MAXZIDE 75-50 MG.....	92
LUCENTIS 0.5 MG/0.05 ML.....	124	<i>magnesium sulfate in d5w</i> 1 gram/100 ml.....	116	MAXZIDE-25MG 37.5-25 MG.....	92
LUMIGAN 0.01 %, 0.03 %.....	129	MAKENA 250 MG/ML.....	134	<i>mebendazole</i> 100 mg.....	13
LUMIZYME 50 MG.....	97	MALARONE 250-100 MG, 62.5-25 MG.....	46	<i>meclizine</i>	36
LUNESTA 1 MG, 2 MG, 3 MG.....	107	<i>mannitol</i> 25 % 25 %.....	93	<i>meclofenamate</i> 100 mg, 50 mg.....	5
LUPRON 1 MG/0.2 ML.....	50	<i>maprotiline</i> 25 mg, 50 mg, 75 mg.....	28	MEDROL (PAK) 4 MG.....	79
LUPRON DEPOT (3 MONTH) 11.25 MG.....	50	MARCAINE (PF) 0.25 % (2.5 MG/ML), 0.5 % (5 MG/ML), 0.75 % (7.5 MG/ML).....	110	MEDROL 16 MG, 32 MG, 4 MG, 8 MG.....	79
LUPRON DEPOT (3 MONTH) 22.5 MG.....	50	MARCAINE 0.25 % (2.5 MG/ML).....	109	MEDROL 2 MG.....	79
LUPRON DEPOT (4 MONTH) 30 MG.....	50	MARCAINE 0.5 % (5 MG/ML).....	109	<i>medroxyprogesterone</i>	77
LUPRON DEPOT (6 MONTH) 45 MG.....	50	MARCAINE-EPINEPHRI NE (PF) 0.5 %-1:200,000....	109	<i>medroxyprogesterone</i>	134
LUPRON DEPOT 3.75 MG.....	50	MARGESIC-H 5-500 MG.....	10	<i>mefenamic acid</i>	5
LUPRON DEPOT 7.5 MG....	50	MARINOL 10 MG, 2.5 MG, 5 MG.....	37	<i>mefloquine</i>	46
LUPRON DEPOT-PED 11.25 MG, 15 MG, 7.5 MG (PED).....	97	MARPLAN 10 MG.....	28	MEFOXIN IN DEXTROSE (ISO-OSM) 1 GRAM/50 ML, 2 GRAM/50 ML.....	71
LUTERA (28) 0.1-20 MG-MCG.....	74	MATULANE 50 MG.....	52	MEGACE ES 625 MG/5 ML.....	134
LUVOX CR 100 MG, 150 MG.....	29	MATZIM LA 180 MG, 240 MG, 300 MG, 360 MG, 420 MG.....	68	MEGACE ORAL 400 MG/10 ML (40 MG/ML).....	50
LYBREL 90-20 MCG.....	74	MAVIK 1 MG, 2 MG, 4 MG.....	42	<i>megestrol</i>	50
LYRICA 100 MG, 150 MG, 200 MG, 225 MG, 25 MG, 300 MG, 50 MG, 75 MG.....	25	MAXIDEX 0.1 %.....	127	<i>megestrol</i> 20 mg, 40 mg.....	50
LYSODREN 500 MG.....	50	MAXIDONE 10-750 MG.....	10	<i>meloxicam</i>	5
LYSTEDA 650 MG.....	107	MAXIPIME 1 GRAM.....	72	<i>melfhalan</i>	47
MACROBID 100 MG.....	142	MAXIPIME 1 GRAM, 2 GRAM.....	73	MENACTRA (PF) 4 MCG/0.5 ML.....	143
MACRODANTIN 100 MG, 50 MG.....	142	MAXIPIME 2 GRAM.....	72	MENEST 0.3 MG, 0.625 MG, 1.25 MG, 2.5 MG.....	100
MACRODANTIN 25 MG... 142				MENOMUNE - A/C/Y/W-135 (PF) 50 MCG.....	143
<i>magnesium sulfate</i> 2 gram/50 ml, 4 gram/100 ml, 4 gram/50 ml.....	116			MENOMUNE - A/C/Y/W-135 50 MCG.....	143
				MENOSTAR 14 MCG/24 HR.....	100
				MENTAX 1 %.....	84

<i>mepерidine</i>	6	<i>methadone 10 mg/5 ml, 5 mg/5 ml</i>	8	<i>methylprednisolone sodium succ</i>	78
<i>mepерidine</i>	8	<i>methadone 10 mg/ml</i>	8	<i>methylprednisolone sodium succ</i>	80
<i>mepерidine (pf)</i>	7	METHADONE INTENSOL 10 MG/ML.....	8	<i>methylprednisolone sodium succ 125 mg</i>	79
<i>mepерidine (pf) 25 mg/ml, 75 mg/ml</i>	7	METHADOSE 10 MG.....	8	<i>metipranolol</i>	124
<i>mepерidine (pf) 500 mg/50 ml</i>	7	METHADOSE 10 MG/ML.....	8	<i>metoclopramide</i>	102
<i>mepерidine 10 mg/ml</i>	7	METHADOSE 40 MG.....	8	<i>metoclopramide 5 mg/5 ml</i>	102
<i>mepерidine 50 mg/5 ml</i>	7	<i>methamphetamine</i>	1	<i>metoclopramide 5 mg/ml</i>	102
MEPERITAB 100 MG, 50 MG.....	8	<i>methazolamide</i>	92	<i>metolazone</i>	94
<i>meprobamate 200 mg, 400 mg</i>	18	<i>methenamine hippurate</i>	142	<i>metoprolol succinate</i>	66
MEPROLONE UNIPAK 4 MG.....	79	METHERGINE 0.2 MG.....	130	<i>metoprolol tartrate</i>	66
MEPRON 750 MG/5 ML.....	15	<i>methimazole</i>	138	<i>metoprolol tartrate 25 mg</i>	66
<i>mercaptapurine</i>	48	METHITEST 10 MG.....	13	<i>metoprolol tartrate 5 mg/5 ml</i>	66
<i>meropenem</i>	15	<i>methocarbamol</i>	119	<i>metoprolol-hydrochlorothiazide</i>	44
MERREM 1 GRAM, 500 MG.....	15	<i>methotrexate sodium (pf) 1 gram</i>	48	METUZOLV ODT 10 MG, 5 MG.....	102
MERUVAX II (PF) 1,000 TCID50/0.5 ML.....	144	<i>methotrexate sodium (pf) 25 mg/ml</i>	48	METRO I.V. 500 MG/100 ML.....	14
<i>mesalamine</i>	103	<i>methotrexate sodium 2.5 mg</i>	48	METROCREAM 0.75 %.....	91
<i>mesna</i>	53	<i>methotrexate sodium 25 mg/ml</i>	48	METROGEL 1 %.....	91
MESNEX 100 MG/ML.....	53	<i>methotrexate sodium 250 mg/ml</i>	43	METROGEL VAGINAL 0.75 %.....	145
MESNEX 400 MG.....	53	<i>methotrexate sodium (pf) 250-15 mg, 250-25 mg</i>	44	METROLOTION 0.75 %.....	91
MESTINON 60 MG.....	46	<i>methotrexate sodium 250 mg/5 ml</i>	43	<i>metronidazole</i>	14
MESTINON 60 MG/5 ML.....	46	<i>methyldopa</i>	130	<i>metronidazole</i>	91
MESTINON TIMESPAN 180 MG.....	46	<i>methyldopa-hydrochlorothiazide 250-15 mg, 250-25 mg</i>	44	<i>metronidazole</i>	145
METADATE ER 10 MG.....	1	<i>methyldopate 250 mg/5 ml</i>	43	<i>metronidazole 0.75 %</i>	91
METADATE ER 20 MG.....	1	<i>methylergonovine</i>	130	<i>metronidazole in nacl (iso-os) 500 mg/100 ml</i>	14
METAGLIP 2.5-250 MG, 2.5-500 MG, 5-500 MG.....	31	METHYLIN 10 MG, 2.5 MG, 5 MG.....	2	MEVACOR 20 MG, 40 MG.....	41
<i>metaproterenol 10 mg, 20 mg</i>	21	METHYLIN 10 MG, 20 MG, 5 MG.....	2	<i>mexiletine 150 mg, 200 mg, 250 mg</i>	19
<i>metaproterenol 10 mg/5 ml</i>	21	METHYLIN 10 MG/5 ML, 5 MG/5 ML.....	2	MIACALCIN 200 UNIT/ACTUATION.....	94
<i>metformin</i>	31	METHYLIN ER 10 MG.....	2	MIACALCIN 200 UNIT/ML.....	94
METHADEX 3.5-10,000-0.1 MG/ML-UNIT/ML-%.....	127	METHYLIN ER 20 MG.....	2	MICARDIS 20 MG, 40 MG, 80 MG.....	42
<i>methadone</i>	7	<i>methylphenidate</i>	1		
<i>methadone</i>	8	<i>methylphenidate</i>	2		
		<i>methylprednisolone</i>	79		
		<i>methylprednisolone acetate</i> ...	79		

MICARDIS HCT 40-12.5 MG, 80-12.5 MG, 80-25 MG.....	44	<i>mirtazapine</i>	28	MOTOFEN 1-0.025 MG.....	35
MICONAZOLE-3 200 MG.....	145	<i>mirtazapine 7.5 mg</i>	28	MOVIPREP 100-7.5-2.691 GRAM.....	108
MICROGESTIN 1.5/30 (21) 1.5-30 MG-MCG.....	74	<i>misoprostol</i>	142	MOXEZA 0.5 %.....	126
MICROGESTIN 1/20 (21) 1-20 MG-MCG.....	75	<i>mitomycin 20 mg, 40 mg, 5 mg</i>	51	MOZOBIL 24 MG/1.2 ML (20 MG/ML).....	107
MICROGESTIN FE 1.5/30 (28) 1.5-30 MG-MCG.....	75	<i>mitoxantrone</i>	51	MS CONTIN 100 MG, 15 MG, 200 MG, 30 MG, 60 MG.....	8
MICROGESTIN FE 1/20 (28) 1-20 MG-MCG.....	75	M-M-R II (PF) 1,000-12,500 TCID50/0.5 ML.....	144	MULTAQ 400 MG.....	19
MICRO-K 10 MEQ, 8 MEQ.....	117	MOBAN 10 MG, 25 MG, 5 MG, 50 MG.....	58	MUMPSVAX (PF) 20,000 TCID50/0.5 ML.....	144
MICRONASE 2.5 MG, 5 MG.....	34	MOBIC 15 MG, 7.5 MG.....	5	<i>mupirocin</i>	83
MICROZIDE 12.5 MG.....	93	MOBIC 7.5 MG/5 ML.....	5	MUSTARGEN 10 MG.....	47
MIDAMOR 5 MG.....	93	MODICON (28) 0.5-35 MG-MCG.....	75	MYAMBUTOL 100 MG, 400 MG.....	46
<i>midodrine</i>	146	<i>moexipril</i>	42	MYCAMINE 100 MG, 50 MG.....	37
MIGERGOT 2-100 MG.....	113	<i>moexipril-hydrochlorothiazid e</i>	45	MYCELEX 10 MG.....	117
MILLIPRED 10 MG/5 ML....	79	<i>mometasone</i>	87	MYCOBUTIN 150 MG.....	46
MILLIPRED 5 MG.....	79	MONODOX 100 MG, 50 MG.....	138	<i>mycophenolate mofetil</i>	63
MILLIPRED DP 5 MG (21 TABS), 5 MG (48 TABS)....	80	MONOKET 10 MG, 20 MG.....	17	MYDRAL 0.5 %, 1 %.....	124
MIMVEY 1-0.5 MG.....	99	MONONESSA (28) 0.25-35 MG-MCG.....	75	MYDRIACYL 1 %.....	124
MINIPRESS 1 MG, 2 MG, 5 MG.....	43	MONOPRIL 10 MG, 20 MG, 40 MG.....	42	MYFORTIC 180 MG, 360 MG.....	63
MINITRAN 0.1 MG/HR, 0.2 MG/HR, 0.4 MG/HR, 0.6 MG/HR.....	17	MONOPRIL HCT 10-12.5 MG, 20-12.5 MG.....	44	MYLOTARG 5 MG.....	49
MINOCIN 100 MG.....	138	MORGIDOX 100 MG.....	138	MYOZYME 50 MG.....	97
MINOCIN 100 MG, 50 MG.....	138	<i>morphine</i>	8	MYSOLINE 250 MG, 50 MG.....	25
<i>minocycline</i>	138	<i>morphine (pf)</i>	6	MYTELASE 10 MG.....	46
<i>minocycline 75 mg</i>	138	<i>morphine (pf)</i>	7	<i>nabumetone 500 mg, 750 mg</i>	5
MINOXIDIL 10 mg, 2.5 mg.....	45	<i>morphine (pf) 30 mg/30 ml</i>	8	<i>nadolol</i>	66
MIRALAX 17 GRAM.....	109	<i>morphine (pf) 30 mg/30 ml (1 mg/ml), 50 mg/50 ml (1 mg/ml)</i>	8	<i>nafcillin 1 gram, 10 gram, 2 gram</i>	134
MIRALAX 17 GRAM/DOSE.....	109	<i>morphine 1 mg/ml</i>	8	<i>nafcillin 1 gram, 2 gram</i>	134
MIRAPEX 0.125 MG, 0.25 MG, 0.5 MG, 0.75 MG, 1 MG, 1.5 MG.....	55	<i>morphine 10 mg/5 ml, 20 mg/5 ml</i>	8	<i>nafcillin in d2.4w 1 gram/50 ml, 2 gram/100 ml</i>	134
MIRCETTE 0.15-0.02MG X21 /0.01 MG X 5.....	75	<i>morphine 15 mg, 30 mg</i>	8	NAFTIN 1 %.....	84
		<i>morphine 5 mg/ml</i>	8	NAGLAZYME 5 MG/5 ML.....	97
		<i>morphine concentrate 100 mg/5 ml (20 mg/ml)</i>	8	<i>nalbuphine 10 mg/ml, 20 mg/ml</i>	12
				NALFON 200 MG.....	5
				<i>naloxone 0.4 mg/ml</i>	35

<i>naloxone</i> 1 mg/ml.....	35	NECON 7/7/7 (28) 0.5/0.75/1	75	NEURONTIN 600 MG, 800	25
<i>naltrexone</i>	35	MG- 35 MCG.....	75	MG.....	25
NAMENDA 10 MG, 5		<i>nefazodone</i> 100 mg, 150 mg,	28	NEVANAC 0.1 %.....	129
MG.....	135	200 mg, 250 mg, 50 mg.....	28	NEXAVAR 200 MG.....	51
NAMENDA 10 MG/5		NEO-FRADIN 25 MG/ML.....	2	NEXICLON XR 0.09	
ML.....	135	<i>neomycin</i> 500 mg.....	2	MG/ML.....	43
NAMENDA TITRATION		<i>neomycin-bacitracin-poly-h</i>		NEXIUM IV 20 MG, 40	
PAK 5-10 MG.....	135	<i>c</i> 3.5-400-10,000		MG.....	141
NAPRELAN CR 375 MG, 500		<i>mg-unit/g-1%</i>	128	NEXT CHOICE 0.75 MG.....	77
MG.....	5	<i>neomycin-bacitracin-polym</i>		NIACOR 500 MG.....	146
NAPROSYN 125 MG/5 ML....	5	<i>yxin</i>	125	NIASPAN	
NAPROSYN 250 MG, 375		<i>neomycin-polymyxin b gu</i>	104	EXTENDED-RELEASE	
MG, 500 MG.....	5	<i>neomycin-polymyxin-dexam</i>		1,000 MG, 500 MG, 750	
<i>naproxen</i>	4	<i>eth</i>	127	MG.....	41
<i>naproxen</i>	5	<i>neomycin-polymyxin-dexam</i>		<i>nicardipine</i> 20 mg, 30 mg.....	68
<i>naproxen sodium</i>	4	<i>eth</i>	128	<i>nicardipine</i> 25 mg/10 ml.....	68
<i>naproxen sodium</i> 500 mg.....	5	<i>neomycin-polymyxin-grami</i>		NICOTROL 10 MG.....	136
<i>naratriptan</i>	113	<i>cidin</i>	126	NICOTROL NS 10	
NARDIL 15 MG.....	29	<i>neomycin-polymyxin-hc</i>	127	MG/ML.....	137
NASACORT AQ 55		<i>neomycin-polymyxin-hc</i>	130	NIFEDIAC CC 30 MG, 60	
MCG.....	120	NEORAL 100 MG, 25 MG..	63	MG, 90 MG.....	68
NASAREL 29 MCG (0.025		NEORAL 100 MG/ML.....	63	NIFEDICAL XL 30 MG, 60	
%).....	120	NEOSPORIN		MG.....	68
NASONEX 50		1.75-10K-0.025		<i>nifedipine</i>	67
MCG/ACTUATION.....	120	MG-UNIT-MG/ML.....	126	<i>nifedipine</i>	68
NATACYN 5 %.....	126	NEOSPORIN GU		<i>nifedipine</i> 20 mg.....	68
NATAZIA 3 MG/2 MG-2		IRRIGANT 40-200,000		NILANDRON 150 MG.....	50
MG/ 2 MG-3 MG/1 MG.....	75	MG-UNIT/ML.....	104	<i>nimodipine</i>	68
<i>nateglinide</i>	34	NEPHRAMINE 5.4 % 5.4		NIMOTOP 30 MG.....	68
NAVANE 10 MG, 2 MG, 5		%.....	123	NIPENT 10 MG.....	53
MG.....	59	NEPTAZANE 25 MG, 50		<i>nisoldipine</i>	68
NAVANE 20 MG.....	59	MG.....	92	NITRO-BID 2 %.....	17
NAVELBINE 10 MG/ML....	54	NEULASTA 6		NITRO-DUR 0.1 MG/HR,	
NEBUPENT 300 MG.....	14	MG/0.6ML.....	106	0.2 MG/HR, 0.4 MG/HR, 0.6	
NECON 0.5/35 (28) 0.5-35		NEUMEGA 5 MG.....	106	MG/HR.....	17
MG-MCG.....	75	NEUPOGEN 300 MCG/0.5		NITRO-DUR 0.3 MG/HR,	
NECON 1/35 (28) 1-35		ML, 480 MCG/0.8 ML.....	106	0.8 MG/HR.....	17
MG-MCG.....	75	NEUPOGEN 300		<i>nitrofurantoin</i>	
NECON 1/50 (28) 1-50		MCG/ML, 480 MCG/1.6		<i>macrocrystal</i>	142
MG-MCG.....	75	ML.....	106	<i>nitrofurantoin</i>	
NECON 10/11 (28)		NEURONTIN 100 MG, 300		<i>monohyd/m-cryst</i>	142
0.5-35/1-35		MG, 400 MG.....	25	<i>nitroglycerin</i>	17
MG-MCG/MG-MCG.....	75	NEURONTIN 250 MG/5		<i>nitroglycerin</i>	18
		ML.....	25		

<i>nitroglycerin 50 mg/10 ml (5 mg/ml)</i>	17	<i>norethindrone acetate</i>	134	NORVIR SOFT GELATIN 100 MG.....	60
<i>nitroglycerin in d5w 100 mg/250 ml (0.4 mg/ml), 200 mg/500 ml (0.4 mg/ml), 25 mg/250 ml (0.1 mg/ml), 50 mg/250 ml (0.2 mg/ml), 50 mg/500 ml (0.1 mg/ml)</i>	18	NORFLEX 30 MG/ML.....	118	NOVAMINE 15 % 15 %.....	123
NITROLINGUAL 0.4 MG/DOSE.....	18	<i>norgestimate-ethinyl estradiol</i>	75	NOVANATAL 29-1 MG....	118
NITROMIST 0.4 MG/DOSE.....	18	<i>norgestimate-ethinyl estradiol</i>	76	NOVANTRONE 2 MG/ML.....	51
NITROQUICK 0.4 MG, 0.6 MG.....	18	<i>norgestimate-ethinyl estradiol</i>	77	NOVAREL 10,000 UNIT.....	95
NITROSTAT 0.3 MG, 0.4 MG, 0.6 MG.....	18	<i>norgestrel-ethinyl estradiol</i>	73	NOVOLIN 70/30 100 UNIT/ML (70-30).....	33
<i>nizatidine</i>	141	<i>norgestrel-ethinyl estradiol</i>	74	NOVOLIN 70/30 INNOLET 100 UNIT/ML (70-30).....	33
NIZORAL 2 %.....	84	NORINYL 1+35 (28) 1-35 MG-MCG.....	75	NOVOLIN 70/30 PENFILL 100 UNIT/ML (70-30).....	33
NORA-BE 0.35 MG.....	78	NORINYL 1+50 (28) 1-50 MG-MCG.....	75	NOVOLIN N 100 UNIT/ML.....	33
NORCO 10-325 MG, 5-325 MG, 7.5-325 MG.....	10	NORITATE 1 %.....	91	NOVOLIN N INNOLET 100 UNIT/ML (3 ML).....	33
NORDETTE-28 0.15-30 MG-MCG.....	75	NORMOSOL-M IN D5W	115	NOVOLIN N PENFILL 100 UNIT/ML.....	33
NORDITROPIN CARTRIDGE 15 MG/1.5 ML (10 MG/ML).....	96	NORMOSOL-R	115	NOVOLIN R 100 UNIT/ML.....	33
NORDITROPIN CARTRIDGE 5 MG/1.5 ML (3.3 MG/ML).....	96	NORMOSOL-R IN D5W 5 %.....	116	NOVOLIN R INNOLET 100 UNIT/ML (3 ML).....	33
NORDITROPIN FLEXPRO 10 MG/1.5 ML (6.7 MG/ML), 5 MG/1.5 ML (3.3 MG/ML).....	96	NORMOSOL-R PH 7.4	116	NOVOLIN R PENFILL 100 UNIT/ML.....	34
NORDITROPIN FLEXPRO 15 MG/1.5 ML (10 MG/ML).....	96	NOROXIN 400 MG.....	102	NOVOLOG 100 UNIT/ML...	34
NORDITROPIN NORDIFLEX 10 MG/1.5 ML (6.7 MG/ML), 5 MG/1.5 ML (3.3 MG/ML).....	96	NORPACE 100 MG, 150 MG.....	18	NOVOLOG FLEXPEN 100 UNIT/ML.....	34
NORDITROPIN NORDIFLEX 15 MG/1.5 ML (10 MG/ML), 30 MG/3 ML (10 MG/ML).....	96	NORPACE CR 100 MG.....	18	NOVOLOG MIX 70-30 100 UNIT/ML (70-30).....	34
<i>norethindrone (contraceptive)</i>	78	NORPACE CR 150 MG.....	18	NOVOLOG MIX 70-30 FLEXPEN 100 UNIT/ML (70-30).....	34
		NORPRAMIN 10 MG, 100 MG, 150 MG, 25 MG, 50 MG, 75 MG.....	30	NOVOLOG PENFILL 100 UNIT/ML.....	34
		NOR-QD 0.35 MG.....	78	NOVOPEN 3	113
		NORTREL 0.5/35 (28) 0.5-35 MG-MCG.....	75	NOVOPEN 3 PENMATE	113
		NORTREL 1/35 (21) 1-35 MG-MCG.....	75	NOVOPEN JR	113
		NORTREL 1/35 (28) 1-35 MG-MCG.....	75	NOXAFIL 200 MG/5 ML (40 MG/ML).....	38
		NORTREL 7/7/7 (28) 0.5/0.75/1 MG- 35 MCG.....	75	<i>ns with potassium chloride 20 meq/l</i>	116
		<i>nortriptyline</i>	30	<i>ns with potassium chloride 40 meq/l</i>	116
		NORVASC 10 MG, 2.5 MG, 5 MG.....	68		
		NORVIR 100 MG.....	60		
		NORVIR 80 MG/ML.....	60		

NUCYNTA 100 MG, 50 MG, 75 MG.....	8	OCELLA 3-0.03 MG.....	75	ONGLYZA 2.5 MG, 5 MG...	32
NUEDEXTA 20-10 MG.....	136	OCTAGAM 5 %.....	131	ONSOLIS 1,200 MCG, 200 MCG, 400 MCG, 600 MCG, 800 MCG.....	8
NULOJIX 250 MG.....	63	<i>octreotide acetate</i>	98	ONTAK 150 MCG/ML.....	53
NULYTELY 420 G.....	108	<i>octreotide acetate 100 mcg/ml (1 ml)</i>	98	ONXOL 6 MG/ML.....	54
NULYTELY CHERRY 420 G.....	108	<i>octreotide acetate 50 mcg/ml (1 ml)</i>	98	OPANA 1 MG/ML.....	8
NULYTELY LEMON-LIME 420 G.....	108	<i>octreotide acetate 500 mcg/ml (1 ml)</i>	98	OPANA ER 10 MG, 20 MG, 30 MG, 40 MG, 5 MG.....	8
NULYTELY ORANGE 420 G.....	108	OCUFEN 0.03 %.....	129	OPANA ER 15 MG.....	8
NULYTELY WITH FLAVOR PACKS 420 G...	108	OCUFLOX 0.3 %.....	126	OPANA ER 7.5 MG.....	8
NUMORPHAN 1 MG/ML.....	8	<i>ofloxacin</i>	126	OPHTHETIC 0.5 %.....	127
NUTRILYTE 25-40.6-5 MEQ/20 ML.....	116	<i>ofloxacin</i>	129	OPTIPRANOLOL 0.3 %.....	124
NUTRILYTE II 35-20-5-4.5-35 MEQ/20 ML.....	116	<i>ofloxacin 200 mg, 300 mg, 400 mg</i>	102	OPTIVAR 0.05 %.....	129
NUTRISPIRE 29-1 MG.....	118	OGEN 0.625 0.75 MG.....	100	ORALONE 0.1 %.....	118
NUTROPIN 10 MG.....	96	OGEN 1.25 1.5 MG.....	100	ORAMORPH SR 100 MG, 15 MG, 30 MG, 60 MG.....	8
NUTROPIN 5 MG.....	96	OGEN 2.5 3 MG.....	100	ORAP 1 MG, 2 MG.....	136
NUTROPIN AQ 10 MG/2 ML (5 MG/ML).....	96	OGESTREL (28) 0.5-50 MG-MCG.....	75	ORAPRED 15 MG/5 ML.....	80
NUTROPIN AQ 10 MG/2 ML (5 MG/ML), 20 MG/2 ML (10 MG/ML).....	96	OLEPTRO ER 150 MG, 300 MG.....	28	ORAPRED ODT 10 MG, 15 MG, 30 MG.....	80
NUTROPIN AQ NUSPIN 10 MG/2 ML (5 MG/ML), 20 MG/2 ML (10 MG/ML).....	96	<i>omeprazole</i>	142	ORAVIG 50 MG.....	118
NUVARING 0.12-0.015 MG/24 HR.....	77	OMNARIS 50 MCG.....	120	ORENCIA 250 MG.....	6
NUVIGIL 150 MG, 250 MG, 50 MG.....	2	OMNICEF 125 MG/5 ML, 250 MG/5 ML.....	72	ORFADIN 10 MG, 2 MG, 5 MG.....	97
NYAMYC 100,000 UNIT/G.....	84	OMNICEF 300 MG.....	72	<i>orphenadrine citrate</i>	118
<i>nystatin</i>	84	OMNIPRED 1 %.....	128	<i>orphenadrine citrate 100 mg</i>	118
<i>nystatin 100,000 unit/g</i>	84	OMNITROPE 10 MG/1.5 ML, 5 MG/1.5 ML (3.3 MG/ML).....	96	ORPHENADRINE COMPOUND 25-385-30 MG.....	119
<i>nystatin 100,000 unit/ml</i>	117	OMNITROPE 5.8 MG.....	96	ORPHENADRINE COMPOUND-DS 50-770-60 MG.....	119
<i>nystatin 500,000 unit</i>	37	ONCASPAR 750 UNIT/ML.....	52	ORSYTHIA 0.1-20 MG-MCG.....	75
<i>nystatin-triamcinolone 100,000-0.1 unit/g-%</i>	84	<i>ondansetron</i>	36	ORTHO EVRA 150-20 MCG/24 HR.....	77
<i>nystatin-triamcinolone 100,000-0.1 unit/gram-%</i>	84	<i>ondansetron (pf) in dextrose</i>	36	ORTHO MICRONOR 0.35 MG.....	78
NYSTOP 100,000 UNIT/G... 84		<i>ondansetron (pf) in nacl (iso) 32 mg/50 ml</i>	36	ORTHO TRI-CYCLEN (28) 0.18/0.215/0.25 MG-35 MCG (28).....	75
		<i>ondansetron hcl</i>	36		
		<i>ondansetron hcl (pf)</i>	36		
		<i>ondansetron hcl (pf) 4 mg/2 ml</i>	36		
		<i>ondansetron hcl 24 mg</i>	36		

ORTHO TRI-CYCLEN LO 0.18/0.215/0.25 MG-25 MCG.....	76	<i>oxycodone 5 mg</i>	9	PARAFON FORTE DSC 500 MG.....	118
ORTHO-CEPT (28) 0.15-30 MG-MCG.....	76	<i>oxycodone hcl-oxycodone-asa 4.5-0.38-325 mg</i>	10	PARCAINE 0.5 %.....	127
ORTHOCLONE OKT3 1 MG/ML.....	63	<i>oxycodone-acetaminophen</i>	9	PARLODEL 2.5 MG.....	55
ORTHO-CYCLEN (28) 0.25-35 MG-MCG.....	76	<i>oxycodone-acetaminophen</i>	10	PARLODEL 5 MG.....	55
ORTHO-NOVUM 1/35 (28) 1-35 MG-MCG.....	76	<i>oxycodone-acetaminophen</i>	11	PARNATE 10 MG.....	29
ORTHO-NOVUM 1/50 (28) 1-50 MG-MCG.....	76	<i>oxycodone-aspirin</i>	9	<i>paromomycin 250 mg</i>	3
ORTHO-NOVUM 7/7/7 (28) 0.5/0.75/1 MG- 35 MCG.....	76	<i>oxycodone-aspirin</i>	10	<i>paroxetine hcl</i>	29
OSMOPREP 1.5 GRAM.....	109	OXYCONTIN 10 MG, 20 MG, 40 MG, 80 MG.....	9	PASER 4 GRAM.....	46
OVCON-35 (28) 0.4-35 MG-MCG.....	76	OXYCONTIN 15 MG, 30 MG, 60 MG.....	9	PATADAY 0.2 %.....	129
OVCON-50 (28) 1-50 MG-MCG.....	76	<i>oxymorphone</i>	8	PATANASE 0.6 %.....	119
<i>oxacillin 1 gram</i>	134	PACERONE 200 MG.....	19	PATANOL 0.1 %.....	129
<i>oxacillin 10 gram</i>	134	PACERONE 400 MG.....	19	PAXIL 10 MG, 20 MG, 30 MG, 40 MG.....	29
<i>oxacillin 2 gram</i>	134	<i>paclitaxel</i>	54	PAXIL 10 MG/5 ML.....	29
<i>oxacillin in dextrose, iso-osm 1 g/50 ml</i>	134	PALGIC 4 MG.....	39	PAXIL CR 12.5 MG, 25 MG, 37.5 MG.....	29
<i>oxacillin in dextrose, iso-osm 2 g/50 ml</i>	134	PALGIC 4 MG/5 ML.....	39	PEDIAPRED 5 MG BASE/5 ML (6.7 MG/5 ML).....	80
<i>oxaliplatin</i>	47	PAMELOR 10 MG, 25 MG, 50 MG, 75 MG.....	30	PEDIARIX (PF) 10-25-25-10-80 MCG-LF-MCG-LF-D.....	140
<i>oxaliplatin 100 mg, 50 mg</i>	47	PAMELOR 10 MG/5 ML.....	30	PEDI-DRI 100,000 UNIT/G.....	84
OXANDRIN 10 MG, 2.5 MG.....	12	<i>pamidronate</i>	94	PEDIOTIC 3.5-10,000-1 MG-UNIT/ML-%.....	130
<i>oxandrolone</i>	12	<i>pamidronate 30 mg/10 ml (3 mg/ml), 60 mg/10 ml (6 mg/ml)</i>	94	PEDVAX HIB (PF) 7.5 MCG/0.5 ML.....	143
<i>oxaprozin</i>	4	<i>pamidronate 90 mg/10 ml (9 mg/ml)</i>	94	<i>peg 3350-electrolytes</i>	107
<i>oxcarbazepine</i>	26	PAMINE 2.5 MG.....	140	<i>peg 3350-electrolytes</i>	108
OXISTAT 1 %.....	84	PAMINE FORTE 5 MG.....	140	PEG-3350 WITH FLAVOR PACKS 420 G.....	108
OXSORALEN ULTRA 10 MG.....	85	PANCREAZE 10,500-25,000 -43,750 UNIT, 16,800-40,000 -70,000 UNIT, 21,000-37,000 -61,000 UNIT, 4,200-10,000 -17,500 UNIT.....	92	PEGANONE 250 MG.....	27
<i>oxybutynin chloride</i>	142	PANCRELIPASE 5000 5,000-17,000 -27,000 UNIT.....	92	PEGASYS 180 MCG/ML.....	61
<i>oxybutynin chloride 5 mg/5 ml</i>	142	PANLOR SS 32-712.8-60 MG.....	10	PEGASYS CONVENIENCE PACK 180 MCG/0.5 ML.....	61
<i>oxycodone</i>	6	PANRETIN 0.1 %.....	85	<i>peg-electrolyte soln</i>	108
<i>oxycodone</i>	9	<i>pantoprazole</i>	142	PEGINTRON 120 MCG/0.5 ML, 150 MCG/0.5 ML, 50 MCG/0.5 ML, 80 MCG/0.5 ML.....	62
<i>oxycodone 10 mg</i>	9				
<i>oxycodone 20 mg/ml</i>	9				

PEGINTRON REDIPEN 120 MCG/0.5 ML, 150 MCG/0.5 ML, 50 MCG/0.5 ML, 80 MCG/0.5 ML.....	62	<i>perphenazine-amitriptyline</i> 2-10 mg, 2-25 mg, 4-10 mg, 4-25 mg, 4-50 mg.....	135	PLAN B ONE-STEP 1.5 MG.....	77
<i>penicillin g pot in dextrose</i> 1 million unit, 2 million unit/50 ml, 3 million unit/50 ml.....	132	PERSANTINE 25 MG, 50 MG, 75 MG.....	105	PLAQUENIL 200 MG.....	46
<i>penicillin g potassium</i>	132	PEXEVA 10 MG, 20 MG, 30 MG, 40 MG.....	29	PLASMA-LYTE 148	116
<i>penicillin g procaine</i> 1,200,000 unit, 600,000 unit.....	132	PFIZERPEN-G 20 MILLION UNIT, 5 MILLION UNIT.....	132	PLASMA-LYTE A	116
<i>penicillin g sodium</i> 5 million unit.....	132	PHENADOZ 12.5 MG, 25 MG.....	39	PLASMA-LYTE-56 IN D5W 5 %.....	116
<i>penicillin v potassium</i> 125 mg/5 ml, 250 mg/5 ml.....	132	<i>phenelzine</i>	29	PLAVIX 300 MG.....	105
<i>penicillin v potassium</i> 250 mg, 500 mg.....	132	PHENERGAN 25 MG/ML, 50 MG/ML.....	39	PLAVIX 75 MG.....	105
PENLAC 8 %.....	84	<i>phentolamine</i> 5 mg.....	42	PLENDIL 10 MG, 2.5 MG, 5 MG.....	68
PENTACEL 15-20-5 LF-MCG-LF.....	140	PHENYTEK 200 MG, 300 MG.....	27	PLETAL 100 MG.....	105
PENTAM 300 MG.....	14	<i>phenytoin</i>	27	PLETAL 50 MG.....	105
<i>pentamidine</i>	14	<i>phenytoin</i> 100 mg/4 ml.....	27	<i>podofilox</i>	90
<i>pentazocine-acetaminophen</i>	11	<i>phenytoin sodium</i> 50 mg/ml... ..	27	POLYCIN B 500-10,000 UNIT/G.....	126
<i>pentazocine-naloxone</i>	12	<i>phenytoin sodium extended</i>	27	POLY-DEX 3.5-10,000-0.1 MG/ML-UNIT/ML-%.....	128
<i>pentostatin</i>	53	PHISOHEX 3 %.....	59	POLY-DEX 3.5-10,000-0.1 MG-UNIT/G-%.....	128
<i>pentoxifylline</i>	105	PHOSLO 667 MG.....	103	<i>polyethylene glycol</i> 3350....	109
PENTOXIL 400 MG.....	105	PHOSPHOLINE IODIDE 0.125 %.....	124	POLYGESIC 5-500 MG.....	10
PEPCID 20 MG, 40 MG.....	141	PHOTOFRIN 75 MG.....	53	<i>polymyxin b sulfate</i> 500,000 unit.....	17
PEPCID 40 MG/5 ML.....	141	PHRENILIN W/CAFFEINE-CODEINE 30-50-325-40 MG.....	10	POLYTRIM 0.1-10,000 %-UNIT/ML.....	126
PERCOCET 10-325 MG, 10-650 MG, 2.5-325 MG, 5-325 MG, 7.5-325 MG, 7.5-500 MG.....	10	PHYSIOLYTE 140-5-3-98 MEQ/L.....	64	PONSTEL 250 MG.....	5
PERCODAN 4.8355-325 MG.....	10	PHYSIOSOL IRRIGATION 140-5-3-98 MEQ/L.....	64	PORTIA 0.15-30 MG-MCG.....	76
PERIDEX 0.12 %.....	118	<i>pilocarpine hcl</i>	118	<i>potassium acetate</i> 2 meq/ml.....	117
<i>perindopril erbumine</i>	41	PILOPINE HS 4 %.....	124	<i>potassium chloride</i>	116
PERIOGARD 0.12 %.....	118	<i>pindolol</i> 10 mg, 5 mg.....	66	<i>potassium chloride</i>	117
PERIOSTAT 20 MG.....	138	<i>piperacillin</i> 2 gram, 3 gram, 4 gram.....	132	<i>potassium chloride</i> 10 meq/100 ml, 10 meq/50 ml, 20 meq/100 ml, 30 meq/100 ml, 40 meq/100 ml.....	117
PERISOL 0.12 %.....	118	<i>piperacillin</i> 40 gram.....	132	<i>potassium chloride</i> 2 meq/ml.....	117
<i>permethrin</i>	91	<i>piperacillin-tazobactam</i>	134	<i>potassium chloride</i> 20 meq/50 ml.....	117
<i>perphenazine</i> 16 mg, 2 mg, 4 mg, 8 mg.....	58	<i>piroxicam</i>	4	<i>potassium citrate</i> 10 meq, 5 meq.....	103
		PLAN B 0.75 MG.....	77		

PRADAXA 150 MG, 75 MG.....	24	PREMPRO 0.3-1.5 MG, 0.45-1.5 MG, 0.625-2.5 MG, 0.625-5 MG.....	99	<i>prochlorperazine maleate</i> 10 mg, 5 mg.....	58
<i>pramipexole</i>	55	PREVACID 15 MG, 30 MG.....	141	PROCRIT 10,000 UNIT/ML, 2,000 UNIT/ML, 20,000 UNIT/2 ML, 20,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML, 40,000 UNIT/ML.....	106
PRANDIN 0.5 MG, 1 MG, 2 MG.....	34	PREVACID SOLUTAB 15 MG, 30 MG.....	142	PROCTOCORT 1 %.....	13
PRAVACHOL 10 MG, 20 MG, 40 MG, 80 MG.....	41	PREVALITE 4 GRAM.....	40	PROCTOCREAM-HC 2.5 %.....	13
<i>pravastatin</i>	41	PREVIFEM 0.25-35 MG-MCG.....	76	PROCTO-KIT 1 %.....	89
<i>prazosin</i>	43	PREZISTA 150 MG, 300 MG, 75 MG.....	60	PROCTO-KIT 2.5 %.....	13
PRECOSE 100 MG, 25 MG, 50 MG.....	30	PREZISTA 400 MG, 600 MG.....	60	PROCTO-PAK 1 %.....	13
PRED FORTE 1 %.....	128	PRIFTIN 150 MG.....	47	PROCTOSOL HC 2.5 %.....	13
PRED MILD 0.12 %.....	128	PRILOSEC 10 MG, 20 MG, 40 MG.....	142	PROCTOZONE-HC 2.5 %....	13
PRED-G 0.3-1 %.....	128	<i>primaquine</i> 26.3 mg.....	46	PROGLYCEM 50 MG/ML...	32
<i>prednicarbate</i>	87	PRIMAXIN IM 500 MG.....	15	PROGRAF 0.5 MG, 1 MG....	64
PREDNISOL 1 %.....	128	PRIMAXIN IV 250 MG, 500 MG.....	15	PROGRAF 5 MG.....	64
<i>prednisolone</i>	79	<i>primidone</i>	25	PROGRAF 5 MG/ML.....	63
<i>prednisolone</i>	80	PRIMSOL 50 MG/5 ML.....	14	PROLASTIN 1,000 MG.....	137
<i>prednisolone</i> 5 mg/5 ml.....	80	PRINIVIL 10 MG, 20 MG, 5 MG.....	42	PROLASTIN 500 MG.....	137
<i>prednisolone acetate</i>	128	PRINZIDE 10-12.5 MG, 20-12.5 MG.....	44	PROLASTIN C 1,000 MG.....	137
<i>prednisolone sodium phosphate</i>	80	PRISTIQ 100 MG, 50 MG....	30	PROLEUKIN 22 MILLION UNIT.....	53
<i>prednisolone sodium phosphate</i>	128	PRIVIGEN 10 %.....	131	PROLIA 60 MG/ML.....	94
<i>prednisone</i>	81	PROAIR HFA 90 MCG/ACTUATION.....	21	PROMACTA 25 MG, 50 MG, 75 MG.....	107
<i>prednisone</i> 1 mg, 10 mg, 2.5 mg, 20 mg, 5 mg, 50 mg.....	80	PROAMATINE 10 MG, 2.5 MG, 5 MG.....	146	<i>promethazine</i>	39
<i>prednisone</i> 5 mg/5 ml.....	80	<i>probenecid</i> 500 mg.....	104	<i>promethazine</i> 12.5 mg, 25 mg, 50 mg.....	39
PREDNISONE INTENSOL 5 MG/ML.....	80	<i>procainamide</i> 100 mg/ml, 500 mg/ml.....	19	<i>promethazine</i> 25 mg/ml.....	39
PREFEST 1/1-0.09 MG (15/15).....	99	PROCALAMINE 3% 3 %... ..	123	<i>promethazine</i> 6.25 mg/5 ml....	39
PREGNYL 10,000 UNIT.....	95	PROCARDIA 10 MG.....	68	PROMETHAZINE VC 6.25-5 MG/5 ML.....	81
PRELONE 15 MG/5 ML.....	80	PROCARDIA XL 30 MG, 60 MG, 90 MG.....	68	PROMETHEGAN 12.5 MG, 25 MG, 50 MG.....	39
PREMARIN 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG.....	100	<i>prochlorperazine</i>	58	PROMETRIUM 100 MG, 200 MG.....	134
PREMARIN 0.625 MG/G... ..	145	<i>prochlorperazine edisylate</i> 5 mg/ml.....	58	<i>propafenone</i>	19
PREMARIN 25 MG.....	100			<i>propantheline</i> 15 mg.....	140
PREMASOL 10 %	123			<i>proparacaine</i>	127
PREMASOL 6 %	123				
PREMPHASE 0.625 MG (14)/ 0.625MG-5MG(14).....	99				

PROPINE 0.1 %.....	125	PURINETHOL 50 MG.....	48	REBIF TITRATION PACK	
<i>propoxyphene</i>	6	<i>pyrazinamide 500 mg</i>	47	8.8MCG/0.2ML-22	
<i>propoxyphene-acetaminophe</i>		<i>pyridostigmine bromide</i>	46	MCG/0.5ML (6).....	136
<i>n 65-650 mg</i>	10	QUALAQUIN 324 MG.....	46	RECLAST 5 MG/100 ML.....	95
<i>propranolol</i>	66	QUASENSE 0.15-30		RECLIPSEN (28) 0.15-30	
<i>propranolol 1 mg/ml</i>	66	MG-MCG.....	76	MG-MCG.....	76
<i>propranolol 10 mg, 20 mg,</i>		QUESTRAN 4 GRAM.....	40	RECOMBIVAX HB (PF)	
<i>40 mg, 60 mg, 80 mg</i>	66	QUESTRAN LIGHT 4		10 MCG/ML.....	144
<i>propranolol 20 mg/5 ml, 40</i>		GRAM.....	40	RECOMBIVAX HB (PF)	
<i>mg/5 ml</i>	66	<i>quinapril</i>	41	10 MCG/ML, 40 MCG/ML,	
<i>propranolol-hydrochlorothia</i>		<i>quinapril-hydrochlorothiazid</i>		5 MCG/0.5 ML.....	144
<i>zid 40-25 mg, 80-25 mg</i>	44	<i>e</i>	43	REFLUDAN 50 MG.....	24
<i>propylthiouracil 50 mg</i>	138	<i>quinapril-hydrochlorothiazid</i>		REGLAN 10 MG, 5 MG.....	102
PROQUAD 10EXP3-4.3-3-		<i>e</i>	45	REGLAN 5 MG/ML.....	102
3.99 TCID50/0.5.....	144	QUINARETIC 10-12.5 MG,		REGONOL 5 MG/ML.....	46
PROQUIN XR 500 MG.....	102	20-12.5 MG, 20-25 MG.....	45	RELENZA DISKHALER 5	
PROSCAR 5 MG.....	104	<i>quinidine gluconate 324 mg...</i>	19	MG/ACTUATION.....	62
PROSOL 20%	123	<i>quinidine gluconate 80</i>		RELISTOR 12 MG/0.6	
PROSTIN VR PEDIATRIC		<i>mg/ml</i>	19	ML.....	103
500 MCG/ML.....	65	<i>quinidine sulfate 200 mg, 300</i>		REMERON 15 MG, 30 MG,	
<i>protamine 10 mg/ml</i>	105	<i>mg</i>	19	45 MG.....	28
PROTONIX 20 MG, 40		<i>quinidine sulfate 300 mg</i>	19	REMERON SOLTAB 15	
MG.....	142	QUIXIN 0.5 %.....	126	MG, 30 MG, 45 MG.....	28
PROTONIX 40 MG.....	142	QVAR 40		REMICADE 100 MG.....	103
PROTOPIC 0.03 %, 0.1 %....	90	MCG/ACTUATION, 80		REMODULIN 1 MG/ML, 10	
<i>protriptyline</i>	30	MCG/ACTUATION.....	21	MG/ML, 2.5 MG/ML, 5	
PROVENTIL HFA 90		RABAVERT (PF) 2.5		MG/ML.....	69
MCG/ACTUATION.....	21	UNIT.....	144	RENAMIN 6.5 % 6.5 %....	123
PROVERA 10 MG, 2.5		<i>ramipril</i>	42	REVELA 0.8 GRAM, 2.4	
MG, 5 MG.....	134	RANEXA 1,000 MG, 500		GRAM.....	103
PROZAC 10 MG, 20 MG, 40		MG.....	17	REVELA 800 MG.....	103
MG.....	29	<i>ranitidine hcl</i>	141	REPREXAIN 2.5-200 MG,	
PROZAC 20 MG/5 ML.....	29	<i>ranitidine hcl 300 mg</i>	141	5-200 MG.....	11
PROZAC WEEKLY 90		RAPAFLO 4 MG, 8 MG.....	104	REPREXAIN 7.5-200 MG....	11
MG.....	29	RAPAMUNE 0.5 MG, 1		REQUIP 0.25 MG, 0.5 MG,	
PRUDOXIN 5 %.....	85	MG, 2 MG.....	64	1 MG, 2 MG, 3 MG, 4 MG, 5	
PULMICORT 0.25 MG/2		RAPAMUNE 1 MG/ML.....	64	MG.....	55
ML, 0.5 MG/2 ML.....	20	RAPIFLUX 20 MG.....	29	RESCRIPTOR 100 MG.....	60
PULMICORT 1 MG/2 ML....	20	RAZADYNE 4 MG/ML.....	135	RESCRIPTOR 200 MG.....	60
PULMICORT FLEXHALER		REBETOL 200 MG.....	62	<i>reserpine 0.1 mg, 0.25 mg</i>	43
180 MCG/INHALATION,		REBETOL 40 MG/ML.....	62	RESTASIS 0.05 %.....	127
90 MCG/INHALATION.....	21	REBIF 22 MCG/0.5 ML, 44		RETIN-A 0.01 %, 0.025 %....	83
PULMOZYME 1		MCG/0.5 ML.....	136	RETIN-A 0.025 %, 0.05 %, 0.1 %.....	82
MG/ML.....	137				

RETROVIR 10 MG/ML.....	60	RITALIN 10 MG, 20 MG, 5		SAMSCA 15 MG, 30 MG....	99
RETROVIR 100 MG.....	60	MG.....	2	SANDIMMUNE 100 MG, 25	
RETROVIR 300 MG.....	60	RITALIN SR 20 MG.....	2	MG.....	64
REVATIO 10 MG/12.5		RITUXAN 10 MG/ML.....	49	SANDIMMUNE 100	
ML.....	70	<i>rivastigmine</i>	135	MG/ML.....	64
REVATIO 20 MG.....	70	ROBAXIN 100 MG/ML.....	118	SANDIMMUNE 250 MG/5	
REVIA 50 MG.....	35	ROBAXIN 500 MG.....	119	ML.....	64
REVLIMID 10 MG, 15 MG,		ROBAXIN-750 750 MG....	119	SANDOSTATIN 1,000	
25 MG, 5 MG.....	63	ROBINUL 0.2 MG/ML.....	140	MCG/ML, 500 MCG/ML.....	98
REYATAZ 100 MG, 150		ROBINUL 1 MG.....	140	SANDOSTATIN 100	
MG, 200 MG, 300 MG.....	60	ROBINUL FORTE 2 MG... 141		MCG/ML, 200 MCG/ML.....	98
RHEUMATREX 2.5 MG.....	3	ROCALTROL 0.25 MCG,		SANDOSTATIN 50	
RHINOCORT AQUA 32		0.5 MCG.....	98	MCG/ML.....	98
MCG/ACTUATION.....	120	ROCALTROL 1 MCG/ML... 98		SANDOSTATIN LAR	
RIBASPHERE 200 MG.....	62	ROCEPHIN 1 GRAM, 10		DEPOT 10 MG, 20 MG, 30	
<i>ribavirin</i>	61	GRAM, 2 GRAM, 250 MG,		MG.....	98
<i>ribavirin</i>	62	500 MG.....	72	SANTYL 250 UNIT/G.....	90
RIDAURA 3 MG.....	3	ROMAZICON 0.1 MG/ML... 35		SAPHRIS 10 MG, 5 MG.....	57
RIFADIN 150 MG, 300		ROMYCIN 5 MG/GRAM		SCALACORT 2 %.....	89
MG.....	47	(0.5 %).....	126	SEASONALE 0.15-30	
RIFADIN 600 MG.....	47	<i>ropinirole</i>	55	MG-MCG.....	76
<i>rifampin</i>	47	ROTARIX 10EXP6		SECTRAL 200 MG, 400	
RILUTEK 50 MG.....	120	CCID50/ML.....	144	MG.....	66
<i>rimantadine</i>	62	ROTATEQ VACCINE 2		<i>selegiline hcl</i>	56
<i>ringers</i>	64	ML.....	144	<i>selegiline hcl 5 mg</i>	56
<i>ringers</i>	116	ROWASA 4 GRAM/60		<i>selenium sulfide 2.5 %</i>	85
RIOMET 500 MG/5 ML.....	31	ML.....	103	SELZENTRY 150 MG, 300	
RISPERDAL 0.25 MG, 0.5		ROXICET 5-325 MG.....	11	MG.....	60
MG, 1 MG, 2 MG, 3 MG, 4		ROXICET 5-325 MG/5		SEMPREX-D 8-60 MG.....	81
MG.....	57	ML.....	11	SENSIPAR 30 MG.....	98
RISPERDAL 1 MG/ML.....	56	ROXICET 5-500 MG.....	11	SENSIPAR 60 MG, 90 MG... 98	
RISPERDAL CONSTA 12.5		ROXICODONE 15 MG, 30		SENSORCAINE 0.25 %	
MG/2 ML, 25 MG/2 ML.....	57	MG, 5 MG.....	9	(2.5 MG/ML).....	110
RISPERDAL CONSTA 37.5		ROZEREM 8 MG.....	107	SENSORCAINE 0.5 % (5	
MG/2 ML, 50 MG/2 ML.....	57	RYTHMOL 150 MG, 225		MG/ML).....	110
RISPERDAL M-TAB 0.5		MG, 300 MG.....	19	SENSORCAINE/EPINEPH	
MG, 1 MG, 2 MG, 3 MG, 4		RYTHMOL SR 225 MG,		RINE 0.5 %-1:200,000.....	109
MG.....	57	325 MG, 425 MG.....	19	SENSORCAINE-MPF 0.25	
<i>risperidone</i>	56	SABRIL 500 MG.....	26	% (2.5 MG/ML), 0.5 % (5	
<i>risperidone</i>	57	SAIZEN 5 MG, 8.8 MG.....	96	MG/ML), 0.75 % (7.5	
<i>risperidone 0.25 mg</i>	57	SAIZEN CLICK.EASY 8.8		MG/ML).....	110
RISPERIDONE M-TAB 0.5		MG/1.5 ML (FNL).....	96	SENSORCAINE-MPF/EPI	
MG, 1 MG, 2 MG, 3 MG, 4		SALAGEN 5 MG, 7.5		NEPHRINE 0.5	
MG.....	57	MG.....	118	%-1:200,000.....	109
				SEPTRA 400-80 MG.....	15

SEPTRA DS 800-160 MG.....	15	<i>sodium chloride 2.5 meq/ml</i>	117	SOMAVERT 10 MG, 15 MG, 20 MG.....	95
SEREVENT DISKUS 50 MCG/DOSE.....	22	<i>sodium chloride 3 % 3 %</i>	117	SONATA 10 MG, 5 MG.....	107
SEROMYCIN 250 MG.....	47	<i>sodium chloride 5 % 5 %</i>	117	SORIATANE 10 MG, 17.5 MG, 22.5 MG, 25 MG.....	85
SEROQUEL 100 MG, 200 MG, 25 MG, 300 MG, 400 MG, 50 MG.....	57	SODIUM EDECIN 50 MG.....	93	SORINE 120 MG, 160 MG, 240 MG, 80 MG.....	66
SEROQUEL XR 150 MG, 200 MG, 300 MG, 400 MG, 50 MG.....	57	<i>sodium fluoride 1 mg fluoride (2.2 mg)</i>	116	<i>sotalol</i>	66
SEROSTIM 4 MG, 5 MG, 6 MG.....	96	<i>sodium lactate 167 meq/l</i>	114	SOTALOL AF 120 MG, 160 MG, 80 MG.....	66
SEROSTIM 8.8 MG.....	96	<i>sodium lactate 5 meq/ml</i>	114	SOTRET 10 MG, 20 MG, 30 MG, 40 MG.....	83
<i>sertraline</i>	29	<i>sodium phosphate 3 mmole/ml</i>	116	SPIRIVA WITH HANDIHALER 18 MCG.....	20
SILENOR 3 MG, 6 MG.....	107	<i>sodium polystyrene sulfonate</i>	65	<i>spironolactone</i>	93
SILVADENE 1 %.....	86	<i>sodium polystyrene sulfonate 30 gram/120 ml, 50 gram/200 ml</i>	65	<i>spironolacton-hydrochlorothiaz</i>	92
<i>silver sulfadiazine</i>	86	SOLARAZE 3 %.....	85	SPORANOX 100 MG.....	38
SIMCOR 1,000-20 MG, 1,000-40 MG, 500-20 MG, 500-40 MG, 750-20 MG.....	41	SOLIA 0.15-30 MG-MCG.....	76	SPORANOX PULSEPAK 100 MG.....	38
SIMPONI 50 MG/0.5 ML.....	3	SOLTAMOX 10 MG/5 ML... ..	50	SPRINTEC (28) 0.25-35 MG-MCG.....	76
SIMULECT 10 MG, 20 MG.....	64	SOLU-CORTEF (PF) 1,000 MG/8 ML, 500 MG/4 ML.....	80	SPRIX 15.75 MG/SPRAY.....	5
<i>simvastatin</i>	41	SOLU-CORTEF (PF) 100 MG/2 ML, 250 MG/2 ML.....	80	SPRYCEL 100 MG, 140 MG, 20 MG, 50 MG, 70 MG, 80 MG.....	51
SINEMET 10-100 MG, 25-100 MG, 25-250 MG.....	55	SOLU-CORTEF 1,000 MG/8 ML, 500 MG/4 ML.....	80	SPS 15 G/60 ML.....	65
SINEMET CR 25-100 MG, 50-200 MG.....	55	SOLU-CORTEF 100 MG, 100 MG/2 ML, 250 MG/2 ML.....	80	SPS 30 GRAM/120 ML.....	65
SINGULAIR 10 MG.....	20	SOLU-MEDROL (PF) 1,000 MG/8 ML, 500 MG/4 ML.....	80	SRONYX 0.1-20 MG-MCG.....	76
SINGULAIR 4 MG.....	20	SOLU-MEDROL (PF) 125 MG/2 ML, 40 MG/ML.....	81	SSD 1 %.....	86
SINGULAIR 4 MG, 5 MG... ..	20	SOLU-MEDROL 1,000 MG, 500 MG.....	80	SSD AF 1 %.....	86
SKELID 240 MG.....	95	SOLU-MEDROL 1,000 MG/8 ML, 500 MG/4 ML.....	80	STAGESIC 5-500 MG.....	11
<i>sodium bicarbonate 7.5 %</i>	114	SOLU-MEDROL 125 MG/2 ML, 40 MG/ML.....	80	STALEVO 100 25-100-200 MG.....	55
<i>sodium bicarbonate 7.5 % (0.9 meq/ml)</i>	114	SOMA 350 MG.....	119	STALEVO 125 31.25-125-200 MG.....	55
<i>sodium bicarbonate 8.4 %</i>	114	SOMATULINE DEPOT 120 MG/0.5 ML, 60 MG/0.2 ML, 90 MG/0.3 ML.....	98	STALEVO 150 37.5-150-200 MG.....	55
<i>sodium bicarbonate 8.4 % (1 meq/ml)</i>	114			STALEVO 200 50-200-200 MG.....	56
<i>sodium chloride</i>	104			STALEVO 50 12.5-50-200 MG.....	56
<i>sodium chloride 0.45 % 0.45 %</i>	117			STALEVO 75 18.75-75-200 MG.....	56
<i>sodium chloride 0.9 % 0.9 %</i>	117				

STARLIX 120 MG, 60 MG... 34	SULFAZINE 500 MG..... 103	SYNERCID 500 MG..... 17
<i>stavudine</i> 61	SULFAZINE EC 500 MG... 103	SYNTHROID 100 MCG,
STAVZOR 125 MG, 250	<i>sulindac</i> 4	112 MCG, 125 MCG, 137
MG, 500 MG..... 27	<i>sulindac 150 mg</i> 5	MCG, 150 MCG, 175
STELARA 45 MG/0.5 ML... 85	<i>sumatriptan</i> 114	MCG, 200 MCG, 25 MCG,
STELARA 45 MG/0.5 ML,	<i>sumatriptan succinate</i> 114	300 MCG, 50 MCG, 75
90 MG/ML..... 85	<i>sumatriptan succinate 4</i>	MCG, 88 MCG..... 139
STERAPRED 5 MG..... 81	<i>mg/0.5 ml</i> 114	SYPRINE 250 MG..... 62
STERAPRED DS 10 MG..... 81	<i>sumatriptan succinate 6</i>	TABLOID 40 MG..... 48
STERILE SALINE 0.9 %... 104	<i>mg/0.5 ml</i> 114	<i>tacrolimus</i> 64
STIMATE 150	SUPRAX 100 MG/5 ML,	TALACEN 25-650 MG..... 11
MCG/SPRAY..... 98	200 MG/5 ML..... 72	TALADINE 150 MG..... 141
STRATTERA 10 MG, 100	SUPRAX 400 MG..... 72	TALWIN 30 MG/ML..... 12
MG, 18 MG, 25 MG, 40 MG,	SUPREP 17.5-3.13-1.6	TALWIN NX 50-0.5 MG..... 12
60 MG, 80 MG..... 1	GRAM..... 108	TAMBOCOR 100 MG, 150
<i>streptomycin 1 gram</i> 3	SURMONTIL 100 MG..... 30	MG, 50 MG..... 19
STROMECTOL 3 MG..... 13	SURMONTIL 25 MG, 50	TAMIFLU 12 MG/ML..... 62
SUBLIMAZE (P/F) 50	MG..... 30	TAMIFLU 30 MG, 45 MG,
MCG/ML..... 9	SUSTIVA 200 MG, 50 MG... 60	75 MG..... 62
SUBOXONE 2-0.5 MG, 8-2	SUSTIVA 600 MG..... 60	<i>tamoxifen 10 mg, 20 mg</i> 50
MG..... 12	SUTENT 12.5 MG, 25 MG,	<i>tamsulosin</i> 104
<i>sucralfate</i> 141	50 MG..... 52	TAPAZOLE 10 MG, 5
SULAR 17 MG, 25.5 MG, 34	SYEDA 3-0.03 MG..... 76	MG..... 138
MG, 8.5 MG..... 68	SYLATRON 296 MCG, 444	TARCEVA 100 MG, 150
SULFAC 10 %..... 126	MCG, 888 MCG..... 53	MG, 25 MG..... 52
<i>sulfacetamide sodium</i> 125	SYLATRON 4-PACK 296	TARGETIN 1 %..... 85
<i>sulfacetamide sodium</i> 126	MCG, 444 MCG, 888	TARGETIN 75 MG..... 53
<i>sulfacetamide sodium</i>	MCG..... 53	TARKA 1-240 MG, 2-180
(<i>acne</i>)..... 82	SYMBICORT 160-4.5	MG, 2-240 MG, 4-240 MG... 45
<i>sulfacetamide-prednisolone</i>	MCG/ACTUATION, 80-4.5	TASIGNA 150 MG, 200
<i>10 %-0.25 % (0.23 %)</i> 128	MCG/ACTUATION..... 22	MG..... 52
<i>sulfadiazine 500 mg</i> 137	SYMBYAX 12-25 MG,	TASMAR 100 MG..... 55
<i>sulfamethoxazole-trimethopri</i>	12-50 MG, 3-25 MG, 6-25	TASMAR 200 MG..... 55
<i>m</i> 15	MG, 6-50 MG..... 136	TAXOL 6 MG/ML..... 54
<i>sulfamethoxazole-trimethopri</i>	SYMLIN 600 MCG/ML..... 31	TAXOTERE 20 MG/2 ML
<i>m 400-80 mg/5 ml</i> 15	SYMLINPEN 120 2,700	(FINAL), 80 MG/8 ML
SULFAMIDE 10 %..... 126	MCG/2.7 ML..... 31	(FINAL)..... 54
SULFAMYLON 50	SYMLINPEN 60 1,500	TAXOTERE 20 MG/ML (1
GRAM..... 86	MCG/1.5 ML..... 31	ML), 80 MG/4 ML (20
SULFAMYLON 85 MG/G... 86	SYNAGIS 100 MG/ML, 50	MG/ML)..... 54
<i>sulfasalazine</i> 102	MG/0.5 ML..... 131	TAZICEF 1 GRAM, 2
<i>sulfasalazine</i> 103	SYNALGOS-DC	GRAM..... 72
SULFATRIM 200-40 MG/5	16-356.4-30 MG..... 11	TAZICEF 6 GRAM..... 72
ML..... 15	SYNAREL 2 MG/ML..... 97	TAZORAC 0.05 %, 0.1 %... 85

TAZTIA XT 120 MG, 180 MG, 240 MG, 300 MG, 360 MG.....	68	<i>tetanus-diphtheria toxoids-td 2-2 lf unit/0.5 ml</i>	140	<i>ticlopidine</i>	105
TEGRETOL 100 MG.....	25	<i>tetracycline 250 mg, 500 mg</i>	138	TIGAN 100 MG/ML.....	36
TEGRETOL 100 MG/5 ML.....	25	TEVETEN 400 MG, 600 MG.....	42	TIGAN 300 MG.....	36
TEGRETOL 200 MG.....	25	TEVETEN HCT 600-12.5 MG, 600-25 MG.....	45	TIKOSYN 125 MCG, 250 MCG, 500 MCG.....	19
TEGRETOL XR 100 MG.....	26	TEV-TROPIN 5 MG.....	96	TILIA FE 1-20(5)/1-30(7) /1MG-35MCG (9).....	76
TEGRETOL XR 200 MG, 400 MG.....	26	TEXACORT 2.5 %.....	89	TIMENTIN 3.1 G, 31 G.....	133
TEKTURNA 150 MG, 300 MG.....	45	THALITONE 15 MG.....	93	TIMENTIN 3.1 G/100 ML.....	133
TEKTURNA HCT 150-12.5 MG, 150-25 MG, 300-12.5 MG, 300-25 MG.....	45	THALOMID 100 MG, 150 MG, 200 MG, 50 MG.....	63	<i>timolol maleate</i>	124
TEMODAR 100 MG.....	47	THEO-24 100 MG, 200 MG, 300 MG, 400 MG.....	22	<i>timolol maleate 10 mg, 20 mg, 5 mg</i>	66
TEMOVATE 0.05 %.....	89	THEOCHRON 100 MG, 200 MG, 300 MG, 450 MG.....	22	TIMOPTIC 0.25 %, 0.5 %... 124	124
TEMOVATE E 0.05 %.....	89	<i>theophylline</i>	22	TIMOPTIC OCUDOSE 0.25 %, 0.5 %.....	124
TENEX 1 MG, 2 MG.....	43	<i>theophylline in d5w 400 mg/500 ml, 800 mg/l</i>	22	TIMOPTIC-XE 0.25 %, 0.5 %.....	124
TENORETIC 100 100-25 MG.....	45	THERACYS 81 MG.....	53	<i>tizanidine</i>	119
TENORETIC 50 50-25 MG... 45	45	THERMAZENE 1 %.....	86	TOBI 300 MG/5 ML.....	3
TENORMIN 100 MG, 25 MG, 50 MG.....	66	<i>thioridazine 10 mg, 100 mg, 25 mg, 50 mg</i>	58	TOBRADEX 0.3-0.1 %.....	128
TERAZOL 3 0.8 %.....	145	<i>thiotepa 15 mg</i>	48	TOBRADEX ST 0.3-0.05 %.....	128
TERAZOL 3 80 MG.....	145	<i>thiothixene</i>	59	<i>tobramycin in ns 60 mg/50 ml, 80 mg/100 ml</i>	3
TERAZOL 7 0.4 %.....	145	<i>thiothixene 1 mg</i>	59	<i>tobramycin sulfate</i>	125
<i>terazosin</i>	43	THYMOGLOBULIN 25 MG.....	64	<i>tobramycin sulfate</i>	126
<i>terazosin 1 mg, 10 mg, 5 mg</i>	43	THYROLAR-1 12.5-50 MCG.....	139	<i>tobramycin sulfate 1.2 g</i>	3
<i>terbinafine</i>	37	THYROLAR-1 25-100 MCG.....	139	<i>tobramycin sulfate 10 mg/ml</i>	3
<i>terbutaline 1 mg/ml</i>	22	THYROLAR-1/2 6.25-25 MCG.....	139	<i>tobramycin sulfate 40 mg/ml</i>	3
<i>terbutaline 2.5 mg, 5 mg</i>	22	THYROLAR-1/4 3.1-12.5 MCG.....	139	<i>tobramycin sulfate 80 mg/8ml</i>	3
<i>terconazole</i>	145	THYROLAR-2 25-100 MCG.....	139	<i>tobramycin-dexamethasone</i>	128
TESTIM 50 MG/5 GRAM (1 %).....	13	THYROLAR-3 37.5-150 MCG.....	139	TOBRASOL 0.3 %.....	126
<i>testosterone cypionate</i>	13	TIAZAC 120 MG, 180 MG, 240 MG, 300 MG, 360 MG, 420 MG.....	68	TOBREX 0.3 %.....	126
<i>testosterone enanthate</i>	13	TICE BCG 50 MG.....	53	TOFRANIL 10 MG, 25 MG, 50 MG.....	30
TESTRED 10 MG.....	13	TICLID 250 MG.....	105	TOFRANIL-PM 100 MG, 125 MG, 150 MG, 75 MG....	30
<i>tetanus toxoid,adsorbed (pf) 5 lf unit/0.5 ml</i>	140			<i>tolazamide 250 mg, 500 mg</i> ...	34
<i>tetanus,diphtheria toxd ped-pf 5-6.7 lf unit</i>	140			<i>tolbutamide 500 mg</i>	34
				<i>tolmetin 200 mg, 600 mg</i>	5
				<i>tolmetin 400 mg</i>	5

TOPAMAX 100 MG, 200 MG, 25 MG, 50 MG.....	26	TRAVASOL 8.5%-ELECTROLYTES 8.5 %.....	123	TRIBENZOR 20-5-12.5 MG, 40-10-12.5 MG, 40-10-25 MG, 40-5-12.5 MG, 40-5-25 MG.....	45
TOPAMAX 15 MG, 25 MG.....	26	TRAVATAN 0.004 %.....	129	TRICOR 145 MG, 48 MG....	41
TOPICORT 0.05 %.....	89	TRAVATAN Z 0.004 %....	129	TRIDERM 0.1 %.....	89
TOPICORT 0.25 %.....	89	<i>trazodone 100 mg, 150 mg, 300 mg, 50 mg.....</i>	28	<i>trifluoperazine 1 mg, 10 mg, 2 mg, 5 mg.....</i>	58
TOPICORT LP 0.05 %.....	89	TREANDA 100 MG, 25 MG.....	48	<i>trifluridine.....</i>	126
TOPIRAGEN 100 MG, 200 MG, 25 MG, 50 MG.....	26	TREATOR 250 MG.....	47	TRIGLIDE 160 MG, 50 MG.....	41
<i>topiramate.....</i>	26	TRELSTAR 11.25 MG/2 ML, 3.75 MG/2 ML.....	50	<i>trihexyphenidyl 0.4 mg/ml.....</i>	55
TOPOSAR 20 MG/ML.....	54	TRELSTAR 22.5 MG.....	50	<i>trihexyphenidyl 2 mg, 5 mg....</i>	55
<i>topotecan.....</i>	54	TRELSTAR 22.5 MG/2 ML.....	50	TRIHIBIT PRESERVATIVE FREE 6.7-46.8-5-10 LF-MCG-LF-MCG.....	140
<i>topotecan 4 mg/4 ml (1 mg/ml).....</i>	54	TRELSTAR DEPOT 3.75 MG.....	50	TRI-LEGEST FE 1-20(5)/1-30(7) /1MG-35MCG (9).....	76
TOPROL XL 100 MG, 200 MG, 25 MG, 50 MG.....	66	TRELSTAR LA 11.25 MG...	50	TRILEPTAL 150 MG, 300 MG, 600 MG.....	26
TORISEL 30 MG/3 ML (10 MG/ML) (FINAL).....	52	TRENTAL 400 MG.....	105	TRILEPTAL 300 MG/5 ML.....	26
<i>torseamide.....</i>	93	<i>tretinoin.....</i>	81	TRILIPIX 135 MG, 45 MG...	41
<i>torseamide 20 mg/2 ml (10 mg/ml).....</i>	93	<i>tretinoin.....</i>	82	TRI-LO-SPRINTEC 0.18/0.215/0.25 MG-25 MCG.....	76
<i>torseamide 50 mg/5 ml (10 mg/ml).....</i>	93	<i>tretinoin.....</i>	83	TRILYTE WITH FLAVOR PACKETS 420 G.....	108
TOVIAZ 4 MG, 8 MG.....	142	<i>tretinoin (chemotherapy).....</i>	53	<i>trimethobenzamide.....</i>	36
TPN ELECTROLYTES 35-20-5-4.5-35 MEQ/20 ML.....	116	TREXALL 10 MG, 15 MG, 5 MG, 7.5 MG.....	48	<i>trimethobenzamide 100 mg/ml.....</i>	36
TRACLEER 125 MG, 62.5 MG.....	69	TREXIMET 85-500 MG....	113	<i>trimethoprim 100 mg.....</i>	14
<i>tramadol.....</i>	9	<i>triamcinolone acetonide.....</i>	79	<i>trimethoprim-polymyxin b... </i>	126
<i>tramadol-acetaminophen.....</i>	11	<i>triamcinolone acetonide.....</i>	89	<i>trimipramine.....</i>	30
TRANDATE 100 MG, 200 MG, 300 MG.....	65	<i>triamcinolone acetonide.....</i>	118	TRINESSA (28) 0.18/0.215/0.25 MG-35 MCG (28).....	77
TRANDATE 5 MG/ML.....	65	<i>triamcinolone acetonide 0.025 %, 0.1 %.....</i>	89	TRI-NORINYL (28) 0.5/1/0.5-35 MG-MCG.....	76
<i>trandolapril.....</i>	42	<i>triamcinolone acetonide 0.025 %, 0.1 %, 0.5 %.....</i>	89	TRIOSTAT 10 MCG/ML....	139
<i>trandolapril-verapamil.....</i>	45	<i>triamcinolone acetonide 0.025 %, 0.5 %.....</i>	89	TRIPEDIA (PF) 6.7-46.8-5 LF-MCG-LF/0.5ML.....	140
TRANSDERM-SCOP 1.5 MG.....	36	<i>triamterene-hydrochlorothiazid.....</i>	92		
<i>tranlycypromine.....</i>	29	<i>triamterene-hydrochlorothiazid 50-25 mg.....</i>	92		
TRAVASOL 10 % 10 %....	123	TRIANEX 0.05 %.....	89		
TRAVASOL 3.5 %-ELECTROLYTES 3.5 %.....	123				

TRI-PREVIFEM (28) 0.18/0.215/0.25 MG-35 MCG (28).....	76	ULESFIA 5 %.....	91	VANCOCIN 125 MG, 250 MG.....	14
TRISENOX 10 MG/10 ML...	53	ULORIC 40 MG, 80 MG....	104	<i>vancomycin 1,000 mg, 500 mg</i>	14
TRI-SPRINTEC (28) 0.18/0.215/0.25 MG-35 MCG (28).....	77	ULTRACET 37.5-325 MG....	11	<i>vancomycin 10 gram, 5 gram, 750 mg</i>	14
TRIVORA (28) 50-30 (6)/75-40 (5)/125-30(10).....	77	ULTRAM 50 MG.....	9	<i>vancomycin in d5w 1 gram/200 ml, 500 mg/100 ml</i>	14
TRIZIVIR 300-150-300 MG.....	60	ULTRAVATE 0.05 %.....	89	<i>vancomycin in dextrose iso-osm 750 mg/150 ml</i>	15
TROPHAMINE 10 % 10 %.....	123	ULTRAVATE 0.05 %.....	90	VANDAZOLE 0.75 %.....	145
TROPHAMINE 6% 6 %.....	123	ULTRAVATE PAC 0.05-12 %.....	90	<i>vandetanib</i>	51
TROPICACYL 0.5 %, 1 %.....	124	UNASYN 1.5 GRAM, 15 GRAM.....	133	VANSPAR 7.5 MG.....	18
<i>tropicamide</i>	124	UNASYN 1.5 GRAM, 3 GRAM.....	133	VANTAS 50 MG.....	50
TRUSOPT 2 %.....	129	UNASYN 3 GRAM.....	133	VANTIN 200 MG.....	72
TRUVADA 200-300 MG.....	60	UNIPHYL 400 MG, 600 MG.....	22	VAPRISOL 20 MG/100 ML.....	99
TWINJECT AUTOINJECTOR 0.15 MG/0.15 ML, 0.3 MG/0.3 ML.....	146	UNIRETIC 15-12.5 MG, 15-25 MG, 7.5-12.5 MG.....	45	VAQTA (PF) 25 UNIT/0.5 ML, 50 UNIT/ML.....	144
TWINRIX (PF) 720-20 EL UNIT-MCG/ML.....	144	UNITHROID 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 300 MCG, 50 MCG, 75 MCG, 88 MCG.....	139	VAQTA (PF) 50 UNIT/ML.....	144
TYGACIL 50 MG.....	16	UNIVASC 15 MG, 7.5 MG... 42		VARIVAX (PF) 1,350 UNIT/0.5 ML.....	145
TYKERB 250 MG.....	52	URECHOLINE 10 MG, 25 MG, 5 MG, 50 MG.....	142	VASERETIC 10-25 MG.....	45
TYLENOL-CODEINE #3 300-30 MG.....	11	URISPAS 100 MG.....	142	VASOTEC 10 MG, 2.5 MG, 20 MG, 5 MG.....	42
TYLENOL-CODEINE #4 300-60 MG.....	11	UROXATRAL 10 MG.....	104	VECTIBIX 100 MG/5 ML (20 MG/ML), 200 MG/10 ML (20 MG/ML), 400 MG/20 ML (20 MG/ML).....	49
TYLOX 5-500 MG.....	11	URSO 250 250 MG.....	102	VECTICAL 3 MCG/GRAM.....	85
TYPHIM VI 25 MCG/0.5 ML.....	143	URSO FORTE 500 MG.....	102	<i>vecuronium bromide 10 mg</i>	120
TYSABRI 300 MG/15 ML.....	136	<i>ursodiol</i>	102	VELCADE 3.5 MG.....	52
TYVASO 1.74 MG/2.9 ML (0.6 MG/ML).....	69	UVADEx 20 MCG/ML.....	53	VELETRI 1.5 MG.....	69
TYVASO REFILL KIT 1.74 MG/2.9 ML (0.6 MG/ML)....	69	VAGIFEM 10 MCG.....	146	VELIVET 0.1/.125/.15-25 MG-MCG.....	77
TYVASO STARTER KIT 1.74 MG/2.9 ML.....	69	VAGIFEM 25 MCG.....	146	<i>venlafaxine</i>	29
TYZEKA 600 MG.....	62	<i>valacyclovir</i>	62	<i>venlafaxine</i>	30
TYZINE 0.1 %.....	120	VALCYTE 450 MG.....	61	<i>venlafaxine 150 mg, 225 mg, 37.5 mg, 75 mg</i>	30
U-CORT 1-10 %.....	89	VALCYTE 50 MG/ML.....	61	VENTAVIS 10 MCG/ML, 20 MCG/2 ML.....	69
		<i>valproate sodium</i>	27		
		<i>valproic acid</i>	27		
		<i>valproic acid (as sodium salt)</i>	27		
		VALTREX 1 G, 500 MG.....	62		
		VALTURNA 150-160 MG, 300-320 MG.....	45		

VENTAVIS 20 MCG/ML.....	69	VIDEX EC 125 MG, 200		VOLTAREN-XR 100 MG.....	5
VENTOLIN HFA 90		MG, 250 MG, 400 MG.....	60	<i>voriconazole</i>	38
MCG/ACTUATION.....	22	VIGAMOX 0.5 %.....	126	VOSOL 2 %.....	129
VERAMYST 27.5		VIIBRYD 10 MG, 20 MG,		VOSOL-HC 1-2 %.....	130
MCG/ACTUATION.....	120	40 MG.....	28	VOSPIRE ER 4 MG, 8 MG...	22
<i>verapamil</i>	67	VIMOVO 375-20 MG, 500-20		VOTRIENT 200 MG.....	52
<i>verapamil</i>	68	MG.....	5	VPRIV 400 UNIT.....	105
<i>verapamil</i>	69	VIMPAT 10 MG/ML.....	26	VUSION 0.25-15-81.35 %....	84
<i>verapamil 2.5 mg/ml</i>	68	VIMPAT 100 MG, 150 MG,		VYTORIN 10-10 10-10	
VERELAN 120 MG, 180		200 MG, 50 MG.....	26	MG.....	39
MG, 240 MG, 360 MG.....	68	VIMPAT 200 MG/20 ML.....	26	VYTORIN 10-20 10-20	
VERELAN PM 100 MG, 200		<i>vinblastine 1 mg/ml</i>	54	MG.....	39
MG, 300 MG.....	69	<i>vinblastine 10 mg</i>	54	VYTORIN 10-40 10-40	
VERIPRED 20 20 MG/5		<i>vincristine 1 mg/ml, 2 mg/2</i>		MG.....	40
ML.....	81	<i>ml</i>	54	VYTORIN 10-80 10-80	
VESANOID 10 MG.....	53	<i>vinorelbine</i>	54	MG.....	40
VESICARE 10 MG, 5		<i>vinorelbine 50 mg/5 ml</i>	54	<i>warfarin</i>	23
MG.....	142	VIRACEPT 250 MG, 625		<i>water for irrigation, sterile</i>	
VEXOL 1 %.....	128	MG.....	61	64
VFEND 200 MG, 50 MG.....	38	VIRACEPT 50 MG/G.....	61	WELLBUTRIN 100 MG, 75	
VFEND 200 MG/5 ML (40		VIRAMUNE 200 MG.....	61	MG.....	28
MG/ML).....	38	VIRAMUNE 50 MG/5 ML...	61	WELLBUTRIN SR 100 MG,	
VFEND IV 200 MG.....	38	VIRAMUNE XR 400 MG....	61	200 MG.....	28
VIBRAMYCIN 100 MG.....	138	VIREAD 300 MG.....	61	WELLBUTRIN SR 150	
VIBRAMYCIN 25 MG/5		VIROPTIC 1 %.....	126	MG.....	28
ML.....	138	VISICOL 1.5 GRAM.....	109	WELLBUTRIN XL 150 MG,	
VIBRAMYCIN 50 MG/5		VISTARIL 25 MG, 50 MG...	18	300 MG.....	28
ML.....	138	VISTIDE 75 MG/ML.....	61	WESTCORT 0.2 %.....	90
VIBRA-TABS 100 MG.....	138	VITAZOL 0.75 %.....	91	XALATAN 0.005 %.....	129
VICODIN 5-500 MG.....	11	VIVACTIL 10 MG, 5 MG....	30	XENAZINE 12.5 MG, 25	
VICODIN ES 7.5-750 MG....	11	VIVAGLOBIN 16 % (160		MG.....	136
VICODIN HP 10-660 MG....	11	MG/ML).....	131	XEOMIN 100 UNIT, 50	
VICOPROFEN 7.5-200		VIVELLE 0.05 MG/24 HR,		UNIT.....	120
MG.....	11	0.1 MG/24 HR.....	100	XERESE 5-1 %.....	85
VICTOZA 0.6 MG/0.1 ML		VIVELLE-DOT 0.025		XGEVA 120 MG/1.7 ML (70	
(18 MG/3 ML).....	32	MG/24 HR, 0.0375 MG/24		MG/ML).....	95
VIDAZA 100 MG.....	48	HR, 0.05 MG/24 HR, 0.075		XIAFLEX 0.9 MG.....	63
VIDEX 2 GRAM		MG/24 HR, 0.1 MG/24		XIFAXAN 550 MG.....	15
PEDIATRIC 10 MG/ML		HR.....	100	XODOL 10/300 10-300	
(FINAL).....	60	VIVITROL 380 MG.....	35	MG.....	11
VIDEX 4 GRAM		VOLTAREN 0.1 %.....	129	XODOL 5/300 5-300 MG.....	11
PEDIATRIC 10 MG/ML		VOLTAREN 1 %.....	83	XODOL 7.5/300 7.5-300	
(FINAL).....	60	VOLTAREN 75 MG.....	5	MG.....	11
				XOLAIR 150 MG.....	20

XOPENEX 0.31 MG/3 ML, 0.63 MG/3 ML, 1.25 MG/3 ML.....	22	ZANTAC IN 1/2 NS 50 MG/50 ML.....	141	ZINACEF 1.5 GRAM, 750 MG.....	71
XOPENEX CONCENTRATE 1.25 MG/0.5 ML.....	22	ZARAH 3-0.03 MG.....	77	ZINACEF 7.5 GRAM.....	71
XOPENEX HFA 45 MCG/ACTUATION.....	22	ZARONTIN 250 MG.....	27	ZINACEF IN DEXTROSE (ISO-OSM) 750 MG/50 ML.....	71
XYLOCAINE (CARDIAC) 20 MG/ML (2 %).	19	ZARONTIN 250 MG/5 ML... ..	27	ZINACEF IN STERILE WATER 1.5 GRAM/50 ML.....	71
XYLOCAINE 10 MG/ML (1 %), 20 MG/ML (2 %).....	110	ZAROXOLYN 10 MG, 2.5 MG, 5 MG.....	94	ZINACEF IN STERILE WATER 1.5 GRAM/50 ML.....	71
XYLOCAINE 4 %.....	91	ZAVESCA 100 MG.....	105	ZINECARD 250 MG, 500 MG.....	53
XYLOCAINE 5 MG/ML (0.5 %).	110	ZAZOLE 0.4 %, 0.8 %.....	145	ZITHROMAX 1 GRAM....	110
XYLOCAINE JELLY 2 %....	91	ZAZOLE 80 MG.....	145	ZITHROMAX 100 MG/5 ML.....	110
XYLOCAINE-EPINEPHRI NE 1 %-1:100,000.....	109	ZEBETA 10 MG, 5 MG.....	66	ZITHROMAX 200 MG/5 ML.....	110
XYLOCAINE-MPF 10 MG/ML (1 %), 20 MG/ML (2 %), 40 MG/ML (4 %).....	110	ZEMAIRA 1,000 MG.....	137	ZITHROMAX 250 MG, 500 MG, 600 MG.....	110
XYLOCAINE-MPF 5 MG/ML (0.5 %).	110	ZEMA-PAK 1.5 MG (21 TABS), 1.5 MG (35 TABS), 1.5 MG (51 TABS).	81	ZITHROMAX 500 MG.....	110
XYREM 500 MG/ML.....	135	ZEMPLAR 1 MCG, 2 MCG, 4 MCG.....	98	ZITHROMAX TRI-PAK 500 MG.....	110
XYZAL 2.5 MG/5 ML.....	39	ZEMPLAR 2 MCG/ML, 5 MCG/ML.....	98	ZITHROMAX Z-PAK 250 MG.....	111
XYZAL 5 MG.....	39	ZENAPAX 5 MG/ML.....	64	ZITHROMAX Z-PAK 250 MG.....	111
YASMIN 28 3-0.03 MG.....	77	ZENCHENT (28) 0.4-35 MG-MCG.....	77	ZMAX 2 GRAM/60 ML....	111
YAZ 28 3-20 MG-MCG.....	77	ZENPEP 10,000-34,000 -55,000 UNIT, 15,000-51,000 -82,000 UNIT, 20,000-68,000 -109,000 UNIT, 5,000-17,000 -27,000 UNIT.....	92	ZMAX ADULT-PEDIATRIC 2 GRAM/60 ML.....	111
YERVOY 200 MG/40 ML (5 MG/ML), 50 MG/10 ML (5 MG/ML).....	49	ZERIT 1 MG/ML.....	61	ZMAX PEDIATRIC 2 GRAM/60 ML.....	111
YF-VAX 10 EXP4.74 UNIT/0.5 ML.....	145	ZERIT 15 MG, 20 MG, 30 MG, 40 MG.....	61	ZOCOR 10 MG, 20 MG, 40 MG, 5 MG.....	41
<i>zafirlukast</i>	20	ZERLOR 32-712.8-60 MG....	12	ZOCOR 80 MG.....	41
<i>zaleplon</i>	107	ZESTORETIC 10-12.5 MG, 20-12.5 MG, 20-25 MG.....	45	ZOFRAN (PF) IN DEXTROSE 32 MG/50 ML.....	36
ZANAFLEX 2 MG, 4 MG.....	119	ZESTRIL 10 MG, 2.5 MG, 20 MG, 30 MG, 40 MG, 5 MG.....	42	ZOFRAN 2 MG/ML.....	36
ZANOSAR 1 GRAM.....	48	ZETIA 10 MG.....	41	ZOFRAN 4 MG, 8 MG.....	36
ZANTAC 15 MG/ML.....	141	ZIAC 10-6.25 MG, 2.5-6.25 MG, 5-6.25 MG.....	45	ZOFRAN 4 MG/2 ML.....	36
ZANTAC 150 MG, 300 MG.....	141	ZIAGEN 20 MG/ML.....	61	ZOFRAN 4 MG/5 ML.....	36
ZANTAC 25 EFFERDOSE 25 MG.....	141	ZIAGEN 300 MG.....	61	ZOFRAN ODT 4 MG, 8 MG.....	36
ZANTAC 25 MG/ML, 50 MG/2 ML (25 MG/ML).....	141	<i>zidovudine</i>	60	ZOLADEX 10.8 MG.....	50
				ZOLADEX 3.6 MG.....	50
				ZOLINZA 100 MG.....	52

ZOLOFT 100 MG, 25 MG, 50 MG.....	29	ZYPREXA 10 MG, 15 MG, 2.5 MG, 20 MG, 5 MG, 7.5 MG.....	58
ZOLOFT 20 MG/ML.....	29	ZYPREXA RELPREVV 210 MG, 300 MG, 405 MG.....	58
<i>zolpidem</i>	107	ZYPREXA ZYDIS 10 MG, 15 MG, 20 MG, 5 MG.....	58
ZOLPIMIST 5 MG/SPRAY (0.1 ML).....	107	ZYRTEC 1 MG/ML.....	39
ZOMETA 4 MG/5 ML.....	95	ZYTIGA 250 MG.....	50
ZONALON 5 %.....	85	ZYVOX 100 MG/5 ML.....	16
ZONEGRAN 100 MG, 25 MG, 50 MG.....	26	ZYVOX 200 MG/100 ML, 600 MG/300 ML.....	16
<i>zonisamide</i>	26	ZYVOX 600 MG.....	16
ZORBTIVE 8.8 MG.....	96		
ZORTRESS 0.25 MG.....	64		
ZORTRESS 0.5 MG, 0.75 MG.....	64		
ZOSTAVAX 19,400 UNIT.....	145		
ZOSYN 2.25 GRAM, 40.5 GRAM.....	134		
ZOSYN 3.375 GRAM, 4.5 GRAM.....	134		
ZOSYN IN DEXTROSE (ISO-OSM) 2.25 GRAM/50 ML, 3.375 GRAM/50 ML, 4.5 GRAM/100 ML.....	134		
ZOVIA 1/35E (28) 1-35 MG-MCG.....	77		
ZOVIA 1/50E (28) 1-50 MG-MCG.....	77		
ZOVIRAX 200 MG.....	62		
ZOVIRAX 200 MG/5 ML.....	62		
ZOVIRAX 400 MG, 800 MG.....	62		
ZOVIRAX 5 %.....	85		
ZUPLENZ 4 MG, 8 MG.....	36		
ZYBAN 150 MG.....	137		
ZYCLARA 3.75 %.....	90		
ZYFLO CR 600 MG.....	20		
ZYLET 0.3-0.5 %.....	128		
ZYLOPRIM 100 MG, 300 MG.....	104		
ZYMAR 0.3 %.....	126		
ZYMAXID 0.5 %.....	126		
ZYPREXA 10 MG.....	57		

