



CHIP Formulary

WellKids by PA Health & Wellness utilizes a CHIP Formulary which includes a list of covered drugs. The formulary is updated often and may change. You may view the latest formulary on our website at www.PAWellKids.com, or call us at 1-855-445-1920 (TTY/TDD: 711).

WellKids by PA Health & Wellness CHIP Formulary Medication Locator Instructions:

1. With the PDF open, click on the Edit menu, then click Find
2. In the Find box type the name of the drug or product you want to locate
3. Click the Next button until you find the drug or product(s) you are looking for

OR Search name of drug or product at <https://formulary-search.envolverx.com/pahw>

PA Health & Wellness Health Plan Pharmacy Program

PA Health & Wellness Health Plan, Inc. (PA Health & Wellness) is committed to providing appropriate, high quality, and cost-effective drug therapy to all WellKids by PA Health & Wellness members. WellKids by PA Health & Wellness works with providers and pharmacists to ensure that drugs and products used to treat a variety of conditions and diseases are covered according to the Federal Drug Administration (FDA). WellKids by PA Health & Wellness covers prescription drugs and products and certain over-the-counter (OTC) drugs when ordered by a provider. Some drugs and products require prior authorization (PA) or have limitations on age, dosage, and maximum quantities. This section provides an overview of the pharmacy program. For more detailed information, please visit our website at www.PAWellKids.com.

Phone Number for WellKids by PA Health & Wellness Member Services

WellKids by PA Health & Wellness Member Services may be reached at 1-855-445-1920 (TTY 711).

WellKids by PA Health & Wellness Formulary

The formulary is created and continually evaluated by PA Health & Wellness Pharmacy & Therapeutics (P&T) Committee to promote the appropriate and cost-effective use of drugs and products. The Committee is made up of PA Health & Wellness Medical Directors, Pharmacy Director, and several Pennsylvania physicians, pharmacists, specialists and a consumer representative.

Member Copay Responsibility

30-Day Supply Copay			
	Free CHIP	Low-Cost CHIP	Full-Cost CHIP
Brand	\$0	\$9	\$18
Generic	\$0	\$6	\$10
Select Preventative Drugs	\$0	\$0	\$0

90-Day Supply Copay			
	Free CHIP	Low-Cost CHIP	Full-Cost CHIP
Brand	\$0	\$18	\$36
Generic	\$0	\$12	\$20
Select Preventative Drugs	\$0	\$0	\$0

On the formulary, Brand name drugs are in capital letters (BRAND) and generic drugs are in *lowercase (generic)*.

Pharmacy Benefit Manager (PBM)

WellKids by PA Health & Wellness works with Express Scripts to pay for pharmacy claims. Express Scripts (ESI) is our Pharmacy Benefit Manager.

Filling a Prescription

You can have prescriptions filled at any network pharmacy. You can locate a pharmacy near you by using the Provider-Lookup tool on our website at

<https://www.pahealthwellness.com/FindaDoctor.html>. You may also contact Member Services to help you locate a pharmacy. At the pharmacy, you will need to provide the pharmacist with your prescription and your WellKids by PA Health & Wellness ID card.

Transition Period

Members new to WellKids by PA Health & Wellness will be able to receive their prescription with no new prior authorization for the first 60 days they are enrolled in our plan. This will allow you and your child's provider time to consider other drugs or products that do not require prior authorization or to learn the steps to getting prior authorization. The WellKids by PA Health & Wellness formulary identifies the drugs that will require prior authorization. If you are not sure when you will need to have your drug or product prior authorized or you have other questions about continuing to get your drugs or products, call member services at 1-855-445-1920 (TTY 711).

Prior Authorization (PA)

A prior authorization (PA) may be needed, which means your child's provider must request the drug or product before WellKids by PA Health & Wellness will cover it. This helps ensure proper use of these drugs or products. You should talk to your child's provider or pharmacist if prior authorization is needed. A prior authorization request can be sent by your child's provider using the secure electronic portal by Cover My Meds at www.covermymeds.com. A request can also be sent by your child's provider or pharmacy to Centene Pharmacy Services on the Medication Prior Authorization Form. This form is on our website at www.PAWellKids.com. The completed form and provider notes to show your child's history should be faxed to the Pharmacy Department at 1-844-205-3386.

The following situations may require prior authorization:

- Non-formulary drugs and products
- New to market drugs and products
- Drugs or products noted as **PA** on the formulary
- Exceeding plan limits: quantity limit (**QL**), days supply (**DS**) and cost
- Age Limits (**AL**)
- Prescriptions that exceed \$2000
- Compound drug
- Brand name drugs where there is a generic alternative
- Opioids over 5 day supply or 50 Morphine Milliequivalents

All requests will be completed within 24 hours. Clinical review staff use the standards set by PHW Pharmacy & Therapeutics Committee. If the request is approved, the Pharmacy Department sends your child's provider a fax. If it is not approved, the Pharmacy Department will send a letter to you and a fax to your child's provider. The letter will have a list of other similar drugs or products that are covered. It will also tell you about the appeal process.

Medical Necessity Requests

If your child requires a drug or product that does not appear on the formulary or is being used for a non-FDA approved diagnosis, you or your child's provider can make a medical necessity request for the drug or product by submitting a request for prior authorization.

Such reviews are performed by professionals using the criteria established by the PA Health & Wellness P&T Committee. If the clinical information provided does not meet the coverage criteria for the requested drug or product, a doctor will review the request to determine medical necessity. We will notify you and your child's provider of alternatives and provide information regarding the appeal process.

72-Hour Supply Policy

State and federal law requires that a pharmacy dispense a 72-hour (3-day) supply of drug or product to any patient awaiting prior authorization determination. The purpose is to avoid interruption of current therapy or delay in the initiation of therapy.

Centene Pharmacy Services

PA Health & Wellness works with Centene Pharmacy Services to review prior authorizations.

Follow these guidelines for efficient processing of your child authorization requests:

1. Complete the PA Health & Wellness Health Plan form: Medication Prior Authorization Request Form.
2. Prior authorization can be submitted in one of the following ways:
 - Fax for Pharmacy Requests: 844-205-3386
 - Fax for Physician Billing Requests: 833-541-2294
 - Mail: Pharmacy Department
5 River Park Place East, Suite 210
Fresno, CA 93720
 - Online: covermymeds.com
 - Phone: 1-866-399-0928
3. Prior Authorization decisions will be completed within 24 hours.
4. Once approved, notification will be sent to the prescriber and you.
5. If the clinical information provided does not explain the medical necessity for the requested Prior Authorization drug or product, the request will be denied, and the prescriber and you will be notified.
6. A pharmacy can provide up to a 72-hour supply of a new or ongoing drug or product.

Affordable Care Act (ACA)

There are free to you for preventative drugs that are part of the Affordable Care Act based on the recommendations of American Academy of Pediatrics (AAP) Bright Futures guidelines. The following drugs may be covered at no cost (not all available products will be covered at \$0).

- Aspirin 81mg
- Fluoride supplementation for up to 5 or 16 years old
- Folic Acid supplementation (0.4 or 0.8mg) for women
- HIV Pre-Exposure Prophylaxis
- Smoking Cessation Products
- Vaccinations/Immunizations for up to 18 years old
- Contraceptives
- Multivitamins
- Vitamin D3 for 0-12 months
- Iron supplementation 6-12 months
- Naloxone

Quantity Limit (QL)

PA Health & Wellness P&T Committee has created quantity limits on certain drugs and products to follow current clinical recommendations and FDA approved dosing. Quantity limits also promote appropriate use and prevent waste. If your child's provider feels your child needs the drug or product at the requested quantity, a prior authorization (PA) must be sent to the Pharmacy Department. If the request is not approved, the Pharmacy Department will send you a letter and a fax to your child's provider. The letter will tell you about the appeal process.

Age Limit (AL)

Some drugs on the formulary may have age limit. These are based on the FDA approved labeling and for your child's safety. If your child's provider feels your child needs the drug anyway, a prior authorization (PA) must be sent to the Pharmacy Department. If the request is not approved, the Pharmacy Department will send you a letter and a fax to your child's provider. The letter will tell you about the appeal process.

Newly Approved Products

We review new drugs for safety and effectiveness before adding them to the WellKids by PA Health & Wellness formulary. During this period, access to these drugs will need a prior authorization. If PA Health & Wellness does not grant prior authorization, we will notify you and your child's provider and provide information regarding the appeal process.

Dispensing Limits

Your child may receive up to a maximum 34-day supply for each new or refill. There are select drugs and products your child is able to get a 90 day-supply (see next section).

A total of 80 percent (80%) of the days supplied must have passed before the prescription for a non-controlled drug or products can be refilled. For example, with a 34-day supply, your child must have taken 28 days of the drug before you can get the next refill. A total of 90 percent (90%) of the days supplied must have passed before the prescription for a controlled drug can be refilled.

Opioids are subject to a cumulative daily morphine milligram equivalent (MME) limit of 50MME daily. Prescriptions exceeding that dose will require prior authorization. Note: all prescriptions for long-acting opioids require prior authorization. Exceptions to the above requirements will be made for those members with an active cancer, sickle cell with crisis, or those in hospice or palliative care.

Certain oral cancer drugs will be limited to a 15-day supply until you and your child's prescriber determine your child is able to tolerate the drug. A list of these drugs is located at www.PAWellKids.com.

Maintenance Products-90 Day Supply

WellKids by PA Health & Wellness offers members a longer day supply of maintenance drugs and products by mail and at certain retail pharmacies. Your child can receive up to 90 days of these drugs or products at a time. These drugs and products are used to treat long-term conditions or illnesses. You can find a list of covered drug and products in the Maintenance Drug Pharmacy Program document located on the WellKids by PA Health & Wellness website at www.PAWellKids.com. You can ask your child's provider to write for a 90 day-supply. Your child's provider may make sure your child does not have side effects, and the dose is correct before allowing for a 90-day supply.

Please contact a Member Service Representative if you have any questions.

Appropriate Use and Safety Edits

Your child's health and safety are a priority for WellKids by PA Health & Wellness. One of the ways we look out for your child's safety is through Point-of-Sale (POS) edits at the time a prescription is processed at the pharmacy. These edits are based on FDA recommendations and promote safe and effective drug utilization.

Items Not Covered

As part of Pennsylvania CHIP, the items below will not be covered (excluded) by the Department of Human Services (DHS):

- Drugs for weight loss or weight management
- Drugs used for fertility
- Drugs used for cosmetic reasons
- Drugs for sexual/erectile dysfunction

- Drugs from manufacturers that have not entered into a rebate agreement with a Federal Drug Rebate Program with the Center for Medicare and Medicaid Services (CMS)
- DESI (Drug Efficacy Study Implementation) drugs, drugs created before 1962 that have not shown to be effective
- Over-the-counter (OTC) drugs in the form of troches, lozenges, throat tablets, cough drops, chewing gum, mouthwashes and similar products (except tobacco cessation products)
- Pharmaceutical services provided during hospital stay
- Products classified as experimental or not approved by the FDA (Food Drug Administration)
- Placebos
- Soaps, cleaning agents, dentifrices, mouthwashes, douche solutions, diluents, ear wax removal agents, deodorants, liniments, antiseptics, irrigants and other personal care and medicine cabinet items
- Anything prescribed by a prescriber barred or suspended from participating in any federal or state programs, including Medical Assistance or CHIP.

Contacts for Pharmacy Appeals/Grievances

In the event that you disagree with the decision regarding coverage of a drug or product, you may file an appeal with PA Health & Wellness by calling Member Services at 1-855-445-1920 (TTY 711).

A decision will be made and your child's provider will be notified with a faxed response.

Formulary Abbreviations and Explanations

AL: Age limit - Describes the age requirement to receive the drug

EA: Each (unit) - Describes the amount of drug units (Ex. tablets, capsules, patches)

F: Formulary - Drugs that are covered on the CHIP formulary

Max Fills: Maximum Fills (per a designated time period)

MP: Maintenance Product - Drugs that are eligible for a 90-day supply

PA: Prior Authorization - The drug will need authorization before it can be received.

QL: Quantity Limit - The Quantity Limit describes how many drug units an enrollee can receive per a dispensing time frame.

RX/OTC: This drug is available both as a Prescription and Over-the-Counter, but will need a prescription to go through your pharmacy benefits.

SP: Specialty Drug - This drug may have special requirements for handling or dispensing.

ST: Step Therapy - You may need to try another drug first prior to receiving the listed drug.

Brand / Generic: lowercase = generic drug ALL CAPITALS = BRAND DRUG

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders			<i>armodafinil 50 MG</i>	F	QL(60 EA per 30 day(s) retail); PA
Amphetamines			<i>dexmethylphenidate hcl CP24 5 MG, 10 MG, 15 MG, 20 MG</i>	F	QL(60 EA per 30 day(s) retail)
<i>amphetamine-dextroamphetamine CP24 5 MG, 10 MG, 15 MG, 20 MG, 25 MG, 30 MG</i>	F	QL(30 EA per 30 day(s) retail)	<i>dexmethylphenidate hcl CP24 25 MG, 30 MG, 35 MG, 40 MG</i>	F	QL(30 EA per 30 day(s) retail)
<i>amphetamine-dextroamphetamine TABS</i>	F	QL(90 EA per 30 day(s) retail)	<i>dexmethylphenidate hcl TABS</i>	F	QL(120 EA per 30 day(s) retail)
<i>dextroamphetamine sulfate CP24</i>	F	QL(60 EA per 30 day(s) retail)	<i>methylphenidate hcl CHEW</i>	F	QL(180 EA per 30 day(s) retail)
<i>dextroamphetamine sulfate TABS 5 MG, 10 MG</i>	F	QL(90 EA per 30 day(s) retail)	<i>methylphenidate hcl CP24 20 MG, 30 MG</i>	F	QL(60 EA per 30 day(s) retail)
<i>lisdexamfetamine dimesylate CAPS</i>	F	QL(1 EA daily); PA	<i>methylphenidate hcl CP24 10 MG, 40 MG, 60 MG</i>	F	QL(30 EA per 30 day(s) retail)
<i>lisdexamfetamine dimesylate CHEW</i>	F	QL(1 EA daily); PA	<i>methylphenidate hcl CPCR 40 MG, 50 MG, 60 MG</i>	F	QL(30 EA per 30 day(s) retail)
<i>methamphetamine hcl</i>	F	QL(5 EA daily)	<i>methylphenidate hcl CPCR 10 MG, 20 MG, 30 MG</i>	F	QL(60 EA per 30 day(s) retail)
VYVANSE CAPS	F	QL(1 EA daily); PA	<i>methylphenidate hcl TABS 20 MG</i>	F	QL(90 EA per 30 day(s) retail)
VYVANSE CHEW	F	QL(1 EA daily); PA	<i>methylphenidate hcl TABS 5 MG, 10 MG</i>	F	QL(180 EA per 30 day(s) retail)
Analeptics			<i>methylphenidate hcl TBCR 54 MG</i>	F	QL(30 EA per 30 day(s) retail)
<i>caffeine citrate SOLN IV 60 MG/3ML</i>	F		<i>methylphenidate hcl TBCR 10 MG, 20 MG</i>	F	QL(90 EA per 30 day(s) retail)
Attention-Deficit/Hyperactivity Disorder (ADHD) Agents			<i>methylphenidate hcl TBCR 18 MG, 27 MG, 36 MG</i>	F	QL(60 EA per 30 day(s) retail)
<i>atomoxetine hcl 10 MG, 18 MG, 25 MG, 40 MG</i>	F	QL(60 EA per 30 day(s) retail)	<i>modafinil</i>	F	QL(60 EA per 30 day(s) retail); PA
<i>atomoxetine hcl 60 MG, 80 MG, 100 MG</i>	F	QL(30 EA per 30 day(s) retail)	ALTERNATIVE MEDICINES		
<i>clonidine hcl (adhd) TB12</i>	F	QL(4 EA daily); ST	Alternative Medicine - M's		
<i>guanfacine hcl (adhd)</i>	F	QL(1 EA daily)	<i>melatonin CAPS 5 MG, 10 MG</i>	F	
Stimulants - Misc.			<i>melatonin CHEW 1 MG, 5 MG</i>	F	
<i>armodafinil 150 MG, 200 MG, 250 MG</i>	F	QL(30 EA per 30 day(s) retail); PA			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>melatonin LIQD</i>	F	RX/OTC	ADALIMUMAB-AATY (2 SYRINGE) PSKT	F	SP; PA
MELATONIN LIQD 1 MG/4ML, 2.5 MG/10ML	F		ADALIMUMAB-AATY CD/UC/HS START AJKT 80 MG/0.8ML	F	SP; PA
<i>melatonin SUBL</i>	F		ADALIMUMAB-ADAZ SOAJ	F	SP; PA
MELATONIN SUBL	F		ADALIMUMAB-ADAZ SOSY	F	SP; PA
<i>melatonin TABS 1 MG, 3 MG, 5 MG, 10 MG</i>	F		ADALIMUMAB-ADBIM (2 PEN) AJKT	F	SP; PA
<i>melatonin TBCR</i>	F		ADALIMUMAB-ADBIM (2 SYRINGE) PSKT	F	SP; PA
<i>melatonin TBDP 3 MG, 5 MG, 10 MG</i>	F		ADALIMUMAB-ADBIM(CD/UC/HS STRT) AJKT	F	SP; PA
Alternative Medicine Combinations			ADALIMUMAB-ADBIM(PS/UV STARTER) AJKT	F	SP; PA
MELATONIN TABS 10 MG-3 MG	F		ADALIMUMAB-FKJP (2 PEN) AJKT	F	SP; PA
AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections			ADALIMUMAB-FKJP (2 SYRINGE) PSKT	F	SP; PA
Aminoglycosides			ADALIMUMAB-RYVK (1 PEN) AJKT 80 MG/0.8ML	F	PA
<i>amikacin sulfate SOLN 1 GM/4ML, 500 MG/2ML</i>	F		HADLIMA PUSHTOUCH SOAJ	F	SP; PA
<i>gentamicin sulfate IJ</i>	F		HADLIMA SOSY	F	SP; PA
<i>neomycin sulfate TABS</i>	F		SIMLANDI (1 PEN) AJKT	F	SP; PA
<i>streptomycin sulfate SOLR</i>	F		SIMLANDI (1 PEN) AJKT	F	PA
<i>tobramycin sulfate SOLN IJ 1.2 GM/30ML, 2 GM/50ML, 10 MG/ML, 80 MG/2ML</i>	F		SIMLANDI (1 SYRINGE) PSKT	F	SP; PA
<i>tobramycin NEBU</i>	F	SP; PA	SIMLANDI (2 PEN) AJKT	F	SP; PA
ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions			SIMLANDI (2 SYRINGE) PSKT 20 MG/0.2ML	F	SP; PA
Antirheumatic - Enzyme Inhibitors			YUSIMRY	F	SP; PA
XELJANZ XR TB24	F	SP; PA	Interleukin-6 Receptor Inhibitors		
XELJANZ SOLN	F	SP; PA	ACTEMRA ACTPEN SOAJ	F	SP; PA
XELJANZ TABS	F	SP; PA	ACTEMRA SOLN	F	SP; PA
Anti-TNF-alpha - Monoclonal Antibodies			ACTEMRA SOSY	F	SP; PA
ADALIMUMAB-AATY (1 PEN) AJKT	F	SP; PA			
ADALIMUMAB-AATY (2 PEN) AJKT	F	SP; PA			

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Drug Name	Drug Tier	Requirements/ Limits
Nonsteroidal Anti-inflammatory Agents (NSAIDs)		
<i>celecoxib 50 MG, 100 MG, 200 MG</i>	F	QL(60 EA per 30 day(s) retail; 180 EA per 90 days mail)
<i>diclofenac sodium TB24</i>	F	MP
<i>diclofenac sodium TBEC 50 MG, 75 MG</i>	F	MP
<i>etodolac CAPS</i>	F	MP
<i>etodolac TABS</i>	F	MP
<i>etodolac TB24</i>	F	MP
<i>flurbiprofen TABS</i>	F	MP
<i>ibuprofen CAPS</i>	F	MP
<i>ibuprofen SUSP 100 MG/5ML, 200 MG/10ML</i>	F	MP; RX/OTC
<i>ibuprofen TABS 200 MG, 400 MG, 600 MG, 800 MG</i>	F	MP
<i>indomethacin CAPS 25 MG, 50 MG</i>	F	QL(90 EA per 30 day(s) retail; 270 EA per 90 days mail); MP
<i>indomethacin CPCR</i>	F	QL(60 EA per 30 day(s) retail; 180 EA per 90 days mail); MP
<i>ketorolac tromethamine SOLN IM 60 MG/2ML</i>	F	
<i>ketorolac tromethamine TABS</i>	F	QL(20 EA per 30 day(s) retail)
<i>meloxicam TABS</i>	F	MP
<i>nabumetone</i>	F	MP
<i>naproxen TABS</i>	F	MP
<i>naproxen TBEC</i>	F	MP
<i>oxaprozin TABS</i>	F	MP
<i>piroxicam CAPS 20 MG</i>	F	QL(1 EA daily); MP
<i>piroxicam CAPS 10 MG</i>	F	QL(60 EA per 30 day(s) retail; 180 EA per 90 days mail); MP
<i>sulindac TABS</i>	F	MP

Drug Name	Drug Tier	Requirements/ Limits
Phosphodiesterase 4 (PDE4) Inhibitors		
OTEZLA TABS	F	SP; PA
OTEZLA TBPk	F	SP; PA
Pyrimidine Synthesis Inhibitors		
<i>leflunomide</i>	F	MP
ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions		
Analgesic Combinations		
<i>acetaminophen-caffeine TABS</i>	F	
<i>aspirin-acetaminophen-caffeine TABS</i>	F	
<i>butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG</i>	F	QL(6 EA daily)
<i>butalbital-acetaminophen TABS 50 MG-325 MG</i>	F	QL(6 EA daily)
<i>butalbital-aspirin-caffeine CAPS</i>	F	QL(6 EA daily)
Analgesics Other		
<i>acetaminophen CAPS 500 MG</i>	F	
<i>acetaminophen CHEW</i>	F	
<i>acetaminophen LIQD 160 MG/5ML</i>	F	
<i>acetaminophen SOLN PO 160 MG/5ML, 325 MG/10.15ML, 650 MG/20.3ML</i>	F	
<i>acetaminophen SUPP 120 MG, 650 MG</i>	F	
<i>acetaminophen SUSP 160 MG/5ML, 650 MG/20.3ML</i>	F	
<i>acetaminophen TABS 325 MG, 500 MG</i>	F	
FEVERALL INFANTS SUPP	F	

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Drug Name	Drug Tier	Requirements/ Limits
FEVERALL JUNIOR STRENGTH SUPP	F	
Salicylates		
<i>aspirin buffered (cal carb-mag carb-mag oxide)</i>	F	
<i>aspirin CHEW</i>	F	
<i>aspirin TABS 325 MG</i>	F	
<i>aspirin TBEC 81 MG, 325 MG</i>	F	
<i>diflunisal TABS</i>	F	MP
ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions		
Opioid Agonists		
<i>DEMEROL SOLN IJ 75 MG/ML</i>	F	4 max fill(s) per 30 day(s) retail
<i>fentanyl citrate LPOP 400 MCG, 600 MCG, 800 MCG, 1200 MCG</i>	F	QL(12 EA daily); 4 max fill(s) per 30 day(s) retail; PA
<i>fentanyl citrate LPOP 200 MCG, 1600 MCG</i>	F	QL(12 EA daily); PA
<i>fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR</i>	F	QL(15 EA per 30 day(s) retail); 4 max fill(s) per 30 day(s) retail
<i>hydromorphone hcl LIQD</i>	F	4 max fill(s) per 30 day(s) retail
<i>hydromorphone hcl SOLN IJ 1 MG/ML, 2 MG/ML, 4 MG/ML</i>	F	4 max fill(s) per 30 day(s) retail
<i>hydromorphone hcl TABS</i>	F	QL(6 EA daily); 4 max fill(s) per 30 day(s) retail
<i>hydromorphone hcl TB24</i>	F	QL(1 EA daily)
<i>methadone hcl SOLN PO</i>	F	4 max fill(s) per 30 day(s) retail
<i>methadone hcl TABS</i>	F	4 max fill(s) per 30 day(s) retail

Drug Name	Drug Tier	Requirements/ Limits
<i>morphine sulfate SOLN PO 10 MG/5ML, 20 MG/5ML, 20 MG/ML, 100 MG/5ML</i>	F	4 max fill(s) per 30 day(s) retail
<i>morphine sulfate SUPP 5 MG, 10 MG, 20 MG</i>	F	4 max fill(s) per 30 day(s) retail
<i>morphine sulfate TABS</i>	F	4 max fill(s) per 30 day(s) retail
<i>morphine sulfate TBCR 200 MG</i>	F	QL(2 EA daily); 4 max fill(s) per 30 day(s) retail
<i>morphine sulfate TBCR 30 MG, 60 MG, 100 MG</i>	F	4 max fill(s) per 30 day(s) retail
<i>morphine sulfate TBCR 15 MG</i>	F	QL(90 EA per 30 day(s) retail); 4 max fill(s) per 30 day(s) retail
<i>oxycodone hcl CAPS</i>	F	QL(180 EA per 30 day(s) retail); 4 max fill(s) per 30 day(s) retail
<i>oxycodone hcl CONC 100 MG/5ML</i>	F	4 max fill(s) per 30 day(s) retail
<i>oxycodone hcl SOLN</i>	F	4 max fill(s) per 30 day(s) retail; ST
<i>oxycodone hcl TABS 10 MG, 15 MG, 20 MG, 30 MG</i>	F	4 max fill(s) per 30 day(s) retail
<i>oxycodone hcl TABS 5 MG</i>	F	QL(180 EA per 30 day(s) retail); 4 max fill(s) per 30 day(s) retail
<i>oxymorphone hcl TB12</i>	F	QL(2 EA daily)
<i>tramadol hcl TABS 50 MG</i>	F	QL(8 EA daily); AL(At least 18 yrs old)
<i>tramadol hcl TB24</i>	F	QL(1 EA daily); 4 max fill(s) per 30 day(s) retail; PA
Opioid Combinations		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>acetaminophen w/ codeine SOLN</i>	F	QL(168 ML daily); AL(At least 12 yrs old)	<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 2 MG-8 MG</i>	F	QL(3 EA daily)
<i>acetaminophen w/ codeine TABS 15 MG-300 MG, 30 MG-300 MG, 60 MG-300 MG</i>	F	QL(10 EA daily); 4 max fill(s) per 30 day(s) retail; AL(At least 12 yrs old)	<i>buprenorphine hcl-naloxone hcl dihydrate SUBL 0.5 MG-2 MG</i>	F	QL(8 EA daily)
<i>hydrocodone-acetaminophen SOLN 325 MG/15ML-10 MG/15ML</i>	F	QL(118 ML daily)	<i>buprenorphine hcl-naloxone hcl dihydrate SUBL 2 MG-8 MG</i>	F	QL(3 EA daily)
<i>hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML</i>	F	QL(182 ML daily); 4 max fill(s) per 30 day(s) retail	<i>buprenorphine hcl SUBL 2 MG</i>	F	QL(8 EA daily)
<i>hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	F	QL(6 EA daily)	<i>buprenorphine hcl SUBL 8 MG</i>	F	QL(3 EA daily)
<i>hydrocodone-ibuprofen 7.5 MG-200 MG</i>	F	QL(5 EA daily); 4 max fill(s) per 30 day(s) retail	<i>butorphanol tartrate NA 10 MG/ML</i>	F	4 max fill(s) per 30 day(s) retail
<i>oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-2.5 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	F	QL(8 EA daily)	<i>pentazocine w/ naloxone hcl</i>	F	4 max fill(s) per 30 day(s) retail
<i>tramadol-acetaminophen</i>	F	QL(8 EA daily); 4 max fill(s) per 30 day(s) retail; AL(At least 18 yrs old)	ZUBSOLV SUBL 2.1 MG-8.6 MG	F	QL(2 EA daily)
Opioid Partial Agonists			ZUBSOLV SUBL 0.18 MG-0.7 MG, 0.36 MG-1.4 MG, 0.71 MG-2.9 MG, 1.4 MG-5.7 MG	F	QL(3 EA daily)
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG</i>	F	QL(2 EA daily)	ZUBSOLV SUBL 2.9 MG-11.4 MG	F	QL(1 EA daily)
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG</i>	F	QL(8 EA daily)	ANDROGENS-ANABOLIC - Drugs to Regulate Hormones		
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 1 MG-4 MG</i>	F	QL(4 EA daily)	Androgens		
			<i>danazol CAPS</i>	F	
			<i>methyltestosterone CAPS</i>	F	PA
			<i>methyltestosterone TABS</i>	F	PA
			<i>testosterone cypionate SOLN IM</i>	F	PA
			<i>testosterone enanthate SOLN IM</i>	F	PA
			<i>testosterone GEL TD 1 %, 1.62 %, 25 MG/2.5GM, 50 MG/5GM, 1.62 %</i>	F	PA
			ANORECTAL AND RELATED PRODUCTS - Rectal Drugs to Treat Pain, Swelling and Itching		
			Intrarectal Steroids		

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>hydrocortisone (intrarectal)</i>	F		<i>sodium bicarbonate (antacid) TABS 650 MG</i>	F	
Rectal Combinations			Antacids - Calcium Salts		
LIDOCAINE-HYDROCORTISONE ACE GEL	F		<i>calcium carbonate (antacid) CHEW 500 MG, 1000 MG</i>	F	
LIDOCAINE-HYDROCORTISONE ACE KIT 1 %-3 %	F	QL(3 EA per 30 day(s) retail)	<i>calcium carbonate (antacid) SUSP</i>	F	
<i>lidocaine-hydrocortisone acetate (rectal) CREA EX</i>	F		Antacids - Magnesium Salts		
<i>lidocaine-hydrocortisone acetate (rectal) KIT 0.5 %-3 %, 2.5 %-3 %</i>	F	QL(3 EA per 30 day(s) retail)	<i>magnesium oxide TABS</i>	F	
PROCTOFOAM HC FOAM EX	F	QL(30 GM per 30 day(s) retail)	ANTHELMINTICS - Drugs to Treat Worm Infections		
Rectal Steroids			Anthelmintics		
<i>hydrocortisone (rectal) EX</i>	F	QL(90 GM per 30 day(s) retail; 270 GM per 90 days mail)	<i>albendazole</i>	F	QL(4 EA per 365 day(s) retail; 4 EA per 365 days mail)
ANTACIDS			<i>ivermectin</i>	F	PA
Antacid Combinations			ANTIANGINAL AGENTS - Drugs to Treat Chest Pain		
ACID GONE SUSP 358 MG/15ML-95 MG/15ML	F		Antianginals-Other		
<i>alum & mag hydrox-simethicone LIQD</i>	F		<i>ranolazine TB12</i>	F	QL(60 EA per 30 day(s) retail); ST
<i>alum & mag hydrox-simethicone SUSP</i>	F		Nitrates		
<i>aluminum hydroxide-mag carb CHEW</i>	F		<i>isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG</i>	F	MP
<i>calcium carbonate-mag hydrox SUSP</i>	F		<i>isosorbide mononitrate TABS</i>	F	MP
GAVISCON SUSP 358 MG/15ML-95 MG/15ML	F		<i>isosorbide mononitrate TB24</i>	F	MP
Antacids - Aluminum Salts			NITRO-BID OINT	F	
ALUMINUM HYDROXIDE GEL SUSP	F		<i>nitroglycerin CPCR 6.5 MG, 9 MG</i>	F	MP
Antacids - Bicarbonate			<i>nitroglycerin PT24</i>	F	MP
			<i>nitroglycerin SUBL</i>	F	MP
			ANTIANXIETY AGENTS - Drugs to Treat Anxiety		

Drug Name	Drug Tier	Requirements/ Limits
Antianxiety Agents - Misc.		
<i>buspirone hcl</i>	F	MP
<i>hydroxyzine hcl SYRP</i>	F	
<i>hydroxyzine hcl TABS</i>	F	MP
<i>hydroxyzine pamoate CAPS</i>	F	
Benzodiazepines		
<i>alprazolam TABS</i>	F	QL(4 EA daily)
<i>alprazolam TB24</i>	F	QL(1 EA daily)
<i>chlordiazepoxide hcl CAPS</i>	F	QL(4 EA daily)
<i>diazepam CONC</i>	F	
<i>DIAZEPAM SOAJ</i>	F	
<i>diazepam SOLN IJ 5 MG/ML, 10 MG/2ML</i>	F	
<i>diazepam TABS</i>	F	QL(4 EA daily)
<i>lorazepam CONC</i>	F	
<i>lorazepam SOLN</i>	F	
<i>lorazepam TABS</i>	F	QL(4 EA daily)
<i>oxazepam CAPS</i>	F	QL(4 EA daily)
ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms		
Antiarrhythmics - Misc.		
<i>adenosine SOLN</i>	F	
Antiarrhythmics Type I-A		
<i>disopyramide phosphate CAPS</i>	F	MP
<i>NORPACE CR CP12</i>	F	
<i>quinidine sulfate TABS</i>	F	
Antiarrhythmics Type I-B		
<i>lidocaine hcl (cardiac) SOSY</i>	F	
<i>lidocaine in d5w 5 %-8 MG/ML</i>	F	
<i>mexiletine hcl</i>	F	MP
Antiarrhythmics Type I-C		

Drug Name	Drug Tier	Requirements/ Limits
<i>flecainide acetate</i>	F	MP
<i>propafenone hcl CP12</i>	F	MP
<i>propafenone hcl TABS</i>	F	MP
Antiarrhythmics Type III		
<i>amiodarone hcl SOLN 150 MG/3ML, 450 MG/9ML, 900 MG/18ML</i>	F	
<i>amiodarone hcl TABS 200 MG, 400 MG</i>	F	MP
<i>dofetilide</i>	F	PA
<i>MULTAQ</i>	F	PA
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions		
Antiasthmatic - Monoclonal Antibodies		
<i>FASENRA PEN SOAJ</i>	F	SP; PA
<i>FASENRA SOSY</i>	F	SP; PA
<i>XOLAIR SOAJ</i>	F	SP; PA
<i>XOLAIR SOLR</i>	F	SP; PA
<i>XOLAIR SOSY</i>	F	SP; PA
Anti-Inflammatory Agents		
<i>cromolyn sodium NEBU</i>	F	
Bronchodilators - Anticholinergics		
<i>ATROVENT HFA</i>	F	QL(26 GM per 30 day(s) retail)
<i>ipratropium bromide SOLN 0.02 %</i>	F	QL(313 ML per 30 day(s) retail; 939 ML per 90 days mail)
<i>SPIRIVA RESPIMAT AERS 1.25 MCG/ACT</i>	F	1 package(s) per 30 day(s) retail; AL(At least 6 yrs old)
<i>SPIRIVA RESPIMAT AERS 2.5 MCG/ACT</i>	F	QL(0.14 GM daily); 1 package(s) per 30 day(s) retail
<i>tiotropium bromide monohydrate CAPS</i>	F	
Leukotriene Modulators		

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Drug Name	Drug Tier	Requirements/ Limits
<i>montelukast sodium CHEW</i>	F	QL(1 EA daily); MP
<i>montelukast sodium PACK</i>	F	QL(1 EA daily); MP
<i>montelukast sodium TABS</i>	F	QL(1 EA daily); MP
<i>zafirlukast</i>	F	QL(2 EA daily); MP
Steroid Inhalants		
ASMANEX HFA AERO	F	QL(39 GM per 90 day(s) retail; 39 GM per 90 days mail); MP
<i>budesonide (inhalation) SUSP</i>	F	QL(360 ML per 90 day(s) retail; 360 ML per 90 days mail); AL(Up to 9 yrs old); MP
<i>fluticasone furoate (inhalation) 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT</i>	F	QL(1 EA daily); MP
<i>fluticasone propionate (inhalation) AEPB</i>	F	MP
<i>fluticasone propionate hfa</i>	F	MP
Sympathomimetics		
<i>albuterol sulfate AERS</i>	F	2 package(s) per 30 day(s) retail
<i>albuterol sulfate NEBU 0.083 %</i>	F	QL(375 ML per 30 day(s) retail; 1125 ML per 90 days mail)
<i>albuterol sulfate NEBU</i>	F	QL(540 EA per 30 day(s) retail; 1620 EA per 90 days mail)
<i>albuterol sulfate SYRP</i>	F	MP
<i>albuterol sulfate TABS</i>	F	

Drug Name	Drug Tier	Requirements/ Limits
<i>budesonide-formoterol fumarate dihydrate</i>	F	QL(0.7 GM daily); 6 package(s) per 90 day(s) retail; 6 package(s) per 90 day(s) mail; MP
COMBIVENT RESPIMAT AERS	F	QL(8 GM per 30 day(s) retail; 8 GM per 30 days mail)
DULERA	F	6 package(s) per 90 day(s) retail; 6 package(s) per 90 day(s) mail; MP
<i>fluticasone-salmeterol AEPB</i>	F	3 package(s) per 90 day(s) retail; 3 package(s) per 90 day(s) mail; MP
<i>ipratropium-albuterol SOLN</i>	F	QL(540 ML per 30 day(s) retail; 1620 ML per 90 days mail)
<i>levalbuterol hcl</i>	F	QL(288 ML per 30 day(s) retail); ST
<i>levalbuterol tartrate</i>	F	3 package(s) per 90 day(s) retail; 3 package(s) per 90 day(s) mail
PROAIR RESPICLIK AEPB	F	QL(2 EA per 30 day(s) retail; 6 EA per 90 days mail)
STIOLTO RESPIMAT	F	1 package(s) per 30 day(s) retail
STRIVERDI RESPIMAT	F	1 package(s) per 30 day(s) retail
<i>terbutaline sulfate TABS</i>	F	MP
TRELEGY ELLIPTA	F	QL(180 EA per 90 day(s) retail; 180 EA per 90 days mail); MP

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>umeclidinium-vilanterol</i>	F	1 package(s) per 30 day(s) retail	<i>fondaparinux sodium</i>	F	SP
Xanthines			HEPARIN (PORCINE) IN NACL SOLN IV 0.45 %-12500 UNIT/250ML	F	
<i>theophylline SOLN</i>	F	MP	<i>heparin (porcine) in sodium chloride SOLN IV 0.9 %-1000 UNIT/500ML, 0.9 %-2000 UNIT/L</i>	F	
<i>theophylline TB12 300 MG, 450 MG</i>	F	MP	<i>heparin sodium (porcine) lock flush 10 UNIT/ML, 100 UNIT/ML</i>	F	
<i>theophylline TB24</i>	F	MP	<i>heparin sodium (porcine) SOLN IJ 1000 UNIT/ML, 5000 UNIT/0.5ML, 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML</i>	F	
ANTICOAGULANTS - Blood Thinners			Thrombin Inhibitors		
Coumarin Anticoagulants			<i>dabigatran etexilate mesylate CAPS 110 MG</i>	F	QL(4 EA daily)
<i>warfarin sodium TABS</i>	F	MP	<i>dabigatran etexilate mesylate CAPS 75 MG, 150 MG</i>	F	QL(2 EA daily)
Direct Factor Xa Inhibitors			ANTICONVULSANTS - Drugs to Treat Seizures		
ELIQUIS DVT/PE STARTER PACK TBPB	F	QL(74 EA per 30 day(s) retail); 1 max fill(s) per 365 day(s) retail	Anticonvulsants - Benzodiazepines		
ELIQUIS TABS	F	QL(2 EA daily)	<i>clonazepam TABS</i>	F	
<i>rivaroxaban TABS 2.5 MG</i>	F	QL(60 EA per 30 day(s) retail; 180 EA per 90 days mail)	<i>diazepam (anticonvulsant) GEL</i>	F	
SAVAYSA	F	QL(1 EA daily)	NAYZILAM	F	QL(10 EA per 28 day(s) retail)
XARELTO STARTER PACK TBPB	F	QL(51 EA per 365 day(s) retail; 51 EA per 365 days mail)	VALTOCO 10 MG DOSE LIQD	F	QL(10 EA per 28 day(s) retail)
XARELTO TABS 2.5 MG, 15 MG	F	QL(60 EA per 30 day(s) retail; 180 EA per 90 days mail)	VALTOCO 15 MG DOSE LQPK 7.5 MG/0.1ML	F	QL(10 EA per 28 day(s) retail)
XARELTO TABS 2.5 MG, 15 MG (<i>Use rivaroxaban</i>)	F	QL(60 EA per 30 day(s) retail; 180 EA per 90 days mail)	VALTOCO 20 MG DOSE LQPK 10 MG/0.1ML	F	QL(10 EA per 28 day(s) retail)
XARELTO TABS 10 MG, 20 MG	F	QL(1 EA daily)	VALTOCO 5 MG DOSE LIQD	F	QL(10 EA per 28 day(s) retail)
Heparins And Heparinoid-Like Agents			Anticonvulsants - Misc.		
<i>enoxaparin sodium SOLN IJ 300 MG/3ML</i>	F	SP	<i>carbamazepine CHEW 100 MG</i>	F	MP
<i>enoxaparin sodium SOSY</i>	F	SP	<i>carbamazepine CP12</i>	F	MP

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Drug Name	Drug Tier	Requirements/ Limits
<i>carbamazepine SUSP</i>	F	MP
<i>carbamazepine TABS</i>	F	MP
<i>carbamazepine TB12</i>	F	MP
<i>gabapentin CAPS 100 MG</i>	F	QL(36 EA daily); MP
<i>gabapentin CAPS 300 MG</i>	F	QL(12 EA daily); MP
<i>gabapentin CAPS 400 MG</i>	F	QL(9 EA daily); MP
<i>gabapentin SOLN</i>	F	QL(70 ML daily); MP
<i>gabapentin TABS 600 MG</i>	F	QL(6 EA daily); MP
<i>gabapentin TABS 800 MG</i>	F	QL(4 EA daily); MP
<i>lamotrigine CHEW</i>	F	MP
<i>lamotrigine KIT 25 MG</i>	F	
<i>lamotrigine TABS</i>	F	MP
<i>lamotrigine TB24</i>	F	
<i>levetiracetam SOLN PO 100 MG/ML, 500 MG/5ML</i>	F	MP
<i>levetiracetam TABS</i>	F	MP
<i>levetiracetam TB24</i>	F	MP
<i>oxcarbazepine SUSP</i>	F	MP
<i>oxcarbazepine TABS</i>	F	MP
<i>pregabalin CAPS</i>	F	QL(90 EA per 30 day(s) retail); ST
<i>primidone 50 MG, 250 MG</i>	F	MP
<i>TEGRETOL SUSP (Use carbamazepine)</i>	F	MP
<i>TEGRETOL TABS (Use carbamazepine)</i>	F	MP
<i>TEGRETOL-XR TB12 (Use carbamazepine)</i>	F	MP
<i>topiramate CPSP</i>	F	
<i>topiramate TABS</i>	F	MP
<i>zonisamide CAPS</i>	F	MP
GABA Modulators		
<i>tiagabine hcl</i>	F	MP

Drug Name	Drug Tier	Requirements/ Limits
Hydantoins		
<i>DILANTIN (Use phenytoin sodium extended)</i>	F	MP
<i>DILANTIN</i>	F	
<i>DILANTIN INFATABS CHEW (Use phenytoin)</i>	F	MP
<i>DILANTIN-125 SUSP (Use phenytoin)</i>	F	MP
<i>DILANTIN SUSP (Use phenytoin)</i>	F	MP
<i>phenytoin sodium extended 100 MG, 200 MG, 300 MG</i>	F	MP
<i>phenytoin CHEW</i>	F	MP
<i>phenytoin SUSP</i>	F	MP
Succinimides		
<i>ethosuximide CAPS</i>	F	MP
<i>ethosuximide SOLN</i>	F	MP
<i>ZARONTIN CAPS (Use ethosuximide)</i>	F	MP
<i>ZARONTIN SOLN (Use ethosuximide)</i>	F	MP
Valproic Acid		
<i>divalproex sodium CSDR</i>	F	MP
<i>divalproex sodium TB24</i>	F	MP
<i>divalproex sodium TBEC</i>	F	MP
<i>valproate sodium SOLN IV 100 MG/ML, 500 MG/5ML</i>	F	
<i>valproic acid CAPS</i>	F	MP
ANTIDEPRESSANTS - Drugs to Treat Depression		
Alpha-2 Receptor Antagonists (Tetracyclics)		
<i>mirtazapine TABS</i>	F	
<i>mirtazapine TBDP</i>	F	
Antidepressants - Misc.		
<i>bupropion hcl TABS</i>	F	MP
<i>bupropion hcl TB12</i>	F	MP

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Drug Name	Drug Tier	Requirements/ Limits
<i>bupropion hcl TB24 150 MG, 300 MG</i>	F	MP
Monoamine Oxidase Inhibitors (MAOIs)		
<i>phenelzine sulfate</i>	F	
<i>tranylcypromine sulfate</i>	F	
Selective Serotonin Reuptake Inhibitors (SSRIs)		
<i>citalopram hydrobromide SOLN</i>	F	
<i>citalopram hydrobromide TABS</i>	F	MP
<i>escitalopram oxalate SOLN</i>	F	QL(20 ML daily)
<i>escitalopram oxalate TABS 5 MG, 20 MG</i>	F	QL(1 EA daily); MP
<i>escitalopram oxalate TABS 10 MG</i>	F	QL(1.5 EA daily); MP
<i>fluoxetine hcl CAPS</i>	F	MP
<i>fluoxetine hcl SOLN</i>	F	
<i>fluvoxamine maleate TABS</i>	F	
<i>paroxetine hcl SUSP</i>	F	
<i>paroxetine hcl TABS</i>	F	MP
<i>paroxetine hcl TB24</i>	F	
<i>sertraline hcl CONC</i>	F	
<i>sertraline hcl TABS</i>	F	MP
Serotonin Modulators		
<i>trazodone hcl TABS 50 MG, 100 MG, 150 MG</i>	F	MP
<i>vilazodone hcl TABS</i>	F	QL(30 EA per 30 day(s) retail)
Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)		
<i>desvenlafaxine succinate</i>	F	QL(1 EA daily); MP
<i>duloxetine hcl CPEP 20 MG, 30 MG, 60 MG</i>	F	QL(60 EA per 30 day(s) retail); MP
<i>venlafaxine hcl CP24</i>	F	MP
<i>venlafaxine hcl TABS</i>	F	MP

Drug Name	Drug Tier	Requirements/ Limits
Tricyclic Agents		
<i>amitriptyline hcl TABS</i>	F	MP
<i>desipramine hcl TABS</i>	F	
<i>doxepin hcl CAPS</i>	F	MP
<i>doxepin hcl CONC</i>	F	
<i>imipramine hcl TABS</i>	F	
<i>imipramine pamoate</i>	F	
<i>nortriptyline hcl CAPS</i>	F	
<i>nortriptyline hcl SOLN</i>	F	
ANTIDIABETICS - Drugs to Regulate Blood Sugar		
Alpha-Glucosidase Inhibitors		
<i>acarbose</i>	F	
Antidiabetic Combinations		
<i>alogliptin-metformin hcl</i>	F	QL(2 EA daily); ST; MP
<i>alogliptin-pioglitazone 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG</i>	F	QL(1 EA daily); ST; MP
<i>dapagliflozin propanediol-metformin hcl 1000 MG-10 MG</i>	F	QL(1 EA daily); MP
<i>dapagliflozin propanediol-metformin hcl 1000 MG-5 MG</i>	F	QL(2 EA daily); MP
<i>glipizide-metformin hcl 250 MG-2.5 MG, 500 MG-2.5 MG</i>	F	QL(2 EA daily); MP
<i>glipizide-metformin hcl 500 MG-5 MG</i>	F	QL(4 EA daily); MP
<i>glyburide-metformin 250 MG-1.25 MG</i>	F	QL(2 EA daily); MP
<i>glyburide-metformin 500 MG-2.5 MG, 500 MG-5 MG</i>	F	QL(4 EA daily); MP
<i>pioglitazone hcl-metformin hcl TABS</i>	F	QL(90 EA per 30 day(s) retail; 270 EA per 90 days mail); MP
<i>saxagliptin-metformin hcl</i>	F	QL(1 EA daily)

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Drug Name	Drug Tier	Requirements/ Limits
SITAGLIPTIN BASE-METFORMIN HCL TABS	1	QL(2 EA daily)
Biguanides		
<i>metformin hcl TABS 500 MG, 850 MG, 1000 MG</i>	F	MP
<i>metformin hcl TB24 500 MG, 750 MG</i>	F	MP
Diabetic Other		
CVS GLUCOSE CHEW	F	
CVS SOFT GLUCOSE CHEW	F	
DEX4	F	
DEX4 NATURALS	F	
<i>dextrose (diabetic use) GEL</i>	F	
<i>diazoxide</i>	F	PA
FT GLUCOSE CHEW 4 GM	F	
<i>glucagon (rdna)</i>	F	QL(2 EA per 30 day(s) retail; 6 EA per 90 days mail)
GLUCO TO GO CHEW	F	
GLUCOSE CHEW	F	
GNP GLUCOSE CHEW	F	
HY-VEE GLUCOSE	F	
KROGER GLUCOSE	F	
MEIJER GLUCOSE	F	
PX GLUCOSE	F	
RA GLUCOSE	F	
RELION GLUCOSE	F	
TGT GLUCOSE	F	
TRUEPLUS GLUCOSE ON THE GO CHEW	F	
TRUEPLUS GLUCOSE CHEW	F	
WALGREENS GLUCOSE	F	
Dipeptidyl Peptidase-4 (DPP-4) Inhibitors		

Drug Name	Drug Tier	Requirements/ Limits
<i>alogliptin benzoate</i>	F	QL(1 EA daily); ST; MP
<i>saxagliptin hcl</i>	F	QL(1 EA daily)
SITAGLIPTIN	1	QL(1 EA daily)
Incretin Mimetic Agents		
<i>liraglutide</i>	F	QL(0.3 ML daily); AL(At least 10 yrs old)
TRULICITY	F	QL(2 ML per 30 day(s) retail); AL(At least 10 yrs old); PA
Insulin		
HUMULIN 70/30 KWIKPEN SUPN	F	QL(45 ML per 30 day(s) retail; 135 ML per 90 days mail); MP
HUMULIN 70/30 SUSP	F	QL(45 ML per 30 day(s) retail; 135 ML per 90 days mail); MP
HUMULIN N KWIKPEN SUPN	F	QL(45 ML per 30 day(s) retail; 135 ML per 90 days mail); MP
HUMULIN N SUSP	F	QL(40 ML per 30 day(s) retail; 120 ML per 90 days mail); MP
HUMULIN R U-500 (CONCENTRATED) SOLN SC	F	QL(45 ML per 30 day(s) retail; 135 ML per 90 days mail); MP
HUMULIN R U-500 KWIKPEN SOPN SC	F	QL(45 ML per 30 day(s) retail; 135 ML per 90 days mail); MP
HUMULIN R SOLN IJ	F	QL(45 ML per 30 day(s) retail; 135 ML per 90 days mail); MP
INSULIN GLARGINE-YFGN SOLN	F	QL(40 ML per 30 day(s) retail); MP

Drug Name	Drug Tier	Requirements/ Limits
INSULIN GLARGINE-YFGN SOPN	F	QL(45 ML per 30 day(s) retail); MP
INSULIN LISPRO (1 UNIT DIAL) SOPN	F	QL(45 ML per 30 day(s) retail)
INSULIN LISPRO JUNIOR KWIKPEN SOPN	F	QL(45 ML per 30 day(s) retail; 135 ML per 90 days mail); MP
INSULIN LISPRO PROT & LISPRO SUPN	F	QL(45 ML per 30 day(s) retail; 135 ML per 90 days mail); MP
INSULIN LISPRO SOLN IJ	F	QL(40 ML per 30 day(s) retail; 120 ML per 90 days mail)
NOVOLIN 70/30 FLEXPEN SUPN	F	QL(45 ML per 30 day(s) retail; 135 ML per 90 days mail); MP
NOVOLIN 70/30 SUSP	F	QL(45 ML per 30 day(s) retail; 135 ML per 90 days mail); MP
NOVOLIN N FLEXPEN SUPN	F	QL(45 ML per 30 day(s) retail; 135 ML per 90 days mail); MP
NOVOLIN N SUSP	F	QL(40 ML per 30 day(s) retail; 120 ML per 90 days mail); MP
NOVOLIN R FLEXPEN SOPN IJ	F	QL(45 ML per 30 day(s) retail; 135 ML per 90 days mail)
NOVOLIN R SOLN IJ	F	QL(45 ML per 30 day(s) retail; 135 ML per 90 days mail); MP
Insulin Sensitizing Agents		
<i>pioglitazone hcl 30 MG</i>	F	QL(30 EA per 30 day(s) retail); MP
<i>pioglitazone hcl 15 MG, 45 MG</i>	F	QL(1 EA daily); MP
Meglitinide Analogues		

Drug Name	Drug Tier	Requirements/ Limits
<i>nateglinide</i>	F	MP
<i>repaglinide</i>	F	
Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors		
<i>dapagliflozin propanediol</i>	F	QL(1 EA daily); MP
Sulfonylureas		
<i>glimepiride 1 MG, 2 MG, 4 MG</i>	F	MP
<i>glipizide TABS 5 MG, 10 MG</i>	F	MP
<i>glipizide TB24</i>	F	MP
<i>glyburide micronized 1.5 MG, 3 MG, 6 MG</i>	F	MP
<i>glyburide TABS</i>	F	MP
ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea		
Antidiarrheal/Probiotic Agents - Misc.		
<i>bismuth subsalicylate CHEW 262 MG</i>	F	
<i>bismuth subsalicylate SUSP 262 MG/15ML, 525 MG/15ML, 525 MG/30ML, 1050 MG/30ML</i>	F	
<i>bismuth subsalicylate TABS</i>	F	
Antiperistaltic Agents		
<i>diphenoxylate w/ atropine LIQD</i>	F	PA
<i>diphenoxylate w/ atropine TABS</i>	F	PA
<i>loperamide hcl CAPS</i>	F	RX/OTC
<i>loperamide hcl SOLN 1 MG/7.5ML</i>	F	
<i>loperamide hcl TABS</i>	F	
MOTOFEN	F	
<i>opium tincture</i>	F	4 max fill(s) per 30 day(s) retail

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Drug Name	Drug Tier	Requirements/ Limits
ANTIDOTES AND SPECIFIC ANTAGONISTS		
Antidotes - Chelating Agents		
CHEMET	F	
<i>deferasirox PACK</i>	F	SP; PA
<i>deferasirox TABS</i>	F	SP; PA
<i>deferasirox TBSO</i>	F	SP; PA
Antidotes and Specific Antagonists		
<i>deferoxamine mesylate</i>	F	SP; PA
Opioid Antagonists		
<i>naloxone hcl LIQD</i>	F	RX/OTC
<i>naloxone hcl SOCT</i>	F	
<i>naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML</i>	F	
<i>naloxone hcl SOSY 2 MG/2ML</i>	F	
<i>naltrexone hcl</i>	F	
VIVITROL	F	QL(1 EA per 30 day(s) retail; 3 EA per 90 days mail); SP
ANTIEMETICS - Drugs to Treat Nausea and Vomiting		
5-HT3 Receptor Antagonists		
ANZEMET TABS 50 MG	F	QL(3 EA per 30 day(s) retail; 9 EA per 90 days mail)
<i>granisetron hcl SOLN IV 1 MG/ML</i>	F	
<i>granisetron hcl SOLN IV 4 MG/4ML</i>	F	QL(4 ML per 30 day(s) retail; 12 ML per 90 days mail)
<i>granisetron hcl TABS</i>	F	QL(6 EA per 15 day(s) retail)
<i>ondansetron hcl SOLN PO 4 MG/5ML</i>	F	QL(90 ML per 30 day(s) retail; 270 ML per 90 days mail)
<i>ondansetron hcl TABS</i>	F	

Drug Name	Drug Tier	Requirements/ Limits
<i>ondansetron TBDP</i>	F	
Antiemetics - Anticholinergic		
<i>dimenhydrinate TABS</i>	F	
<i>meclizine hcl CHEW</i>	F	RX/OTC
<i>meclizine hcl TABS 12.5 MG, 25 MG</i>	F	RX/OTC
<i>trimethobenzamide hcl CAPS</i>	F	
Antiemetics - Miscellaneous		
<i>doxylamine-pyridoxine TBEC</i>	F	PA
<i>dronabinol CAPS</i>	F	QL(60 EA per 30 day(s) retail; 180 EA per 90 days mail); PA
Substance P/Neurokinin 1 (NK1) Receptor Antagonists		
<i>aprepitant CAPS 40 MG</i>	F	PA
<i>aprepitant CAPS 125 MG</i>	F	QL(2 EA per 30 day(s) retail; 6 EA per 90 days mail); PA
<i>aprepitant CAPS</i>	F	QL(4 EA per 30 day(s) retail; 12 EA per 90 days mail); PA
ANTIFUNGALS - Drugs to Treat Fungal Infections		
Antifungal - Glucan Synthesis Inhibitors		
<i>caspofungin acetate 70 MG</i>	F	
CASPOFUNGIN ACETATE 70 MG	F	
Antifungals		
<i>amphotericin b IV</i>	F	
<i>amphotericin b liposome</i>	F	
<i>griseofulvin microsize SUSP</i>	F	
<i>griseofulvin microsize TABS</i>	F	
<i>griseofulvin ultramicrosize</i>	F	

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Drug Name	Drug Tier	Requirements/ Limits
<i>nystatin TABS</i>	F	
<i>terbinafine hcl TABS</i>	F	
Imidazole-Related Antifungals		
<i>fluconazole in nacl 0.9 %-400 MG/200ML</i>	F	
<i>fluconazole SUSR</i>	F	
<i>fluconazole TABS</i>	F	
<i>itraconazole CAPS</i>	F	PA
<i>itraconazole SOLN</i>	F	PA
<i>ketoconazole</i>	F	
<i>voriconazole SOLR</i>	F	
VORICONAZOLE SOLR	F	
<i>voriconazole TABS</i>	F	
ANTIHISTAMINES - Drugs to Treat Allergies		
Antihistamines - Alkylamines		
<i>chlorpheniramine maleate SYRP</i>	F	
<i>chlorpheniramine maleate TABS</i>	F	
Antihistamines - Ethanolamines		
<i>clemastine fumarate SYRP</i>	F	
<i>clemastine fumarate TABS 1.34 MG, 2.68 MG</i>	F	
<i>diphenhydramine hcl CAPS</i>	F	
<i>diphenhydramine hcl ELIX 12.5 MG/5ML</i>	F	
<i>diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML</i>	F	
<i>diphenhydramine hcl TABS 25 MG</i>	F	
Antihistamines - Non-Sedating		
<i>cetirizine hcl CHEW</i>	F	
<i>cetirizine hcl SOLN PO</i>	F	RX/OTC
<i>cetirizine hcl SYRP PO</i>	F	RX/OTC
<i>cetirizine hcl TABS</i>	F	

Drug Name	Drug Tier	Requirements/ Limits
<i>fexofenadine hcl TABS 60 MG, 180 MG</i>	F	
<i>levocetirizine dihydrochloride TABS</i>	F	QL(4 EA daily); RX/OTC
<i>loratadine SOLN</i>	F	
<i>loratadine TABS</i>	F	
Antihistamines - Phenothiazines		
<i>promethazine hcl SOLN PO 6.25 MG/5ML</i>	F	
<i>promethazine hcl SUPP 12.5 MG, 25 MG</i>	F	
<i>promethazine hcl TABS</i>	F	
Antihistamines - Piperidines		
<i>cycloheptadine hcl SYRP</i>	F	
<i>cycloheptadine hcl TABS</i>	F	
ANTIHYPERTENSIVES - Drugs to Treat High Cholesterol		
Antihyperlipidemics - Combinations		
<i>ezetimibe-simvastatin</i>	F	QL(1 EA daily)
Antihyperlipidemics - Misc.		
<i>icosapent ethyl</i>	F	
<i>omega-3-acid ethyl esters</i>	F	QL(4 EA daily)
Bile Acid Sequestrants		
<i>cholestyramine light PACK</i>	F	MP
<i>cholestyramine light POWD</i>	F	MP
<i>cholestyramine PACK</i>	F	MP
<i>cholestyramine POWD</i>	F	MP
<i>colestipol hcl GRAN</i>	F	MP
<i>colestipol hcl PACK</i>	F	MP
<i>colestipol hcl TABS</i>	F	MP
Fibric Acid Derivatives		
<i>fenofibrate micronized 67 MG, 134 MG, 200 MG</i>	F	MP

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Drug Name	Drug Tier	Requirements/ Limits
<i>fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG</i>	F	MP
<i>fenofibric acid</i>	F	
<i>gemfibrozil TABS</i>	F	MP
HMG CoA Reductase Inhibitors		
<i>atorvastatin calcium TABS</i>	F	QL(1 EA daily); MP
<i>lovastatin TABS</i>	F	QL(1 EA daily); MP
<i>pravastatin sodium</i>	F	QL(1 EA daily); MP
<i>rosuvastatin calcium TABS</i>	F	QL(1 EA daily); MP
<i>simvastatin TABS 80 MG</i>	F	QL(1 EA daily); MP; PA
<i>simvastatin TABS 5 MG, 10 MG, 20 MG, 40 MG</i>	F	QL(1 EA daily); MP
Intestinal Cholesterol Absorption Inhibitors		
<i>ezetimibe</i>	F	QL(1 EA daily)
Nicotinic Acid Derivatives		
<i>niacin (antihyperlipidemic) TABS</i>	F	MP
<i>niacin (antihyperlipidemic) TBCR</i>	F	MP
Proprotein Convertase Subtilisin/Kexin Type 9 Inhibitors		
<i>PRALUENT SOAJ</i>	F	SP; PA
ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure		
ACE Inhibitors		
<i>benazepril hcl</i>	F	MP
<i>captopril</i>	F	MP
<i>enalapril maleate TABS</i>	F	MP
<i>fosinopril sodium</i>	F	MP
<i>lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG</i>	F	MP
<i>quinapril hcl</i>	F	MP

Drug Name	Drug Tier	Requirements/ Limits
<i>ramipril CAPS</i>	F	MP
<i>trandolapril 2 MG, 4 MG</i>	F	MP
Agents for Pheochromocytoma		
<i>phenoxybenzamine hcl</i>	F	PA
Angiotensin II Receptor Antagonists		
<i>irbesartan</i>	F	QL(1 EA daily); MP
<i>losartan potassium</i>	F	MP
<i>olmesartan medoxomil</i>	F	QL(1 EA daily)
<i>telmisartan</i>	F	QL(1 EA daily)
<i>valsartan TABS</i>	F	QL(1 EA daily); MP
Antiadrenergic Antihypertensives		
<i>clonidine hcl TABS</i>	F	MP
<i>clonidine PTWK</i>	F	MP
<i>doxazosin mesylate</i>	F	MP
<i>guanfacine hcl</i>	F	MP
<i>methyldopa TABS</i>	F	MP
<i>prazosin hcl CAPS</i>	F	MP
<i>terazosin hcl</i>	F	MP
Antihypertensive Combinations		
<i>amlodipine besylate-benazepril hcl</i>	F	MP
<i>atenolol & chlorthalidone</i>	F	MP
<i>benazepril & hydrochlorothiazide</i>	F	MP
<i>bisoprolol & hydrochlorothiazide</i>	F	MP
<i>enalapril maleate & hydrochlorothiazide</i>	F	MP
<i>fosinopril sodium & hydrochlorothiazide</i>	F	MP
<i>irbesartan-hydrochlorothiazide</i>	F	QL(1 EA daily); MP
<i>lisinopril & hydrochlorothiazide</i>	F	MP
<i>losartan potassium & hydrochlorothiazide</i>	F	MP

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Drug Name	Drug Tier	Requirements/ Limits
<i>metoprolol & hydrochlorothiazide TABS</i>	F	MP
<i>olmesartan medoxomil-hydrochlorothiazide</i>	F	QL(1 EA daily)
<i>quinapril-hydrochlorothiazide</i>	F	
<i>telmisartan-hydrochlorothiazide</i>	F	QL(1 EA daily)
<i>valsartan-hydrochlorothiazide</i>	F	QL(1 EA daily); MP
Selective Aldosterone Receptor Antagonists (SARAs)		
<i>eplerenone</i>	F	
Vasodilators		
<i>hydralazine hcl TABS</i>	F	MP
ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections		
Anti-infective Agents - Misc.		
<i>metronidazole TABS 250 MG, 500 MG</i>	F	
<i>pentamidine isethionate IN</i>	F	
<i>tinidazole</i>	F	QL(20 EA per 5 day(s) retail); ST
<i>trimethoprim TABS</i>	F	
Anti-infective Misc. - Combinations		
<i>methenamine-hyosc-methylene blue-sod phospheryl sal TABS 81.6 MG</i>	F	
<i>sulfamethoxazole-trimethoprim SOLN</i>	F	
<i>sulfamethoxazole-trimethoprim SUSP</i>	F	
<i>sulfamethoxazole-trimethoprim TABS</i>	F	
<i>URIMAR-T TABS</i>	F	
Antiprotozoal Agents		

Drug Name	Drug Tier	Requirements/ Limits
ALINIA SUSR	F	
<i>atovaquone</i>	F	QL(10 ML daily)
<i>nitazoxanide TABS</i>	F	QL(6 EA per 30 day(s) retail)
Carbapenems		
<i>meropenem</i>	F	
Cyclic Lipopeptides		
<i>daptomycin 500 MG</i>	F	PA
DAPTOMYCIN 500 MG	F	PA
Glycopeptides		
<i>vancomycin hcl CAPS 125 MG</i>	F	QL(56 EA per 14 day(s) retail); 3 max fill(s) per 365 day(s) retail
<i>vancomycin hcl SOLR IV 1 GM, 5 GM, 10 GM, 500 MG</i>	F	
<i>vancomycin hcl SOLR PO 25 MG/ML, 50 MG/ML, 250 MG/5ML</i>	F	QL(150 ML per 14 day(s) retail); 3 max fill(s) per 365 day(s) retail
Leprostatics		
<i>dapsone</i>	F	
Lincosamides		
<i>clindamycin hcl 150 MG, 300 MG</i>	F	
<i>clindamycin palmitate hydrochloride</i>	F	
Monobactams		
CAYSTON	F	SP; PA
Oxazolidinones		
<i>linezolid SUSR</i>	F	PA
<i>linezolid TABS</i>	F	QL(60 EA per 30 day(s) retail)
Urinary Anti-infectives		

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Drug Name	Drug Tier	Requirements/ Limits
<i>fosfomycin tromethamine</i>	F	QL(3 EA per 21 day(s) retail)
<i>methenamine hippurate</i>	F	
<i>methenamine mandelate</i>	F	
<i>nitrofurantoin</i>	F	AL(Up to 10 yrs old)
<i>nitrofurantoin macrocrystal</i>	F	
<i>nitrofurantoin monohyd macro</i>	F	

ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)

Antimalarial Combinations

<i>atovaquone-proguanil hcl</i>	F	QL(23 EA per 180 day(s) retail; 23 EA per 180 days mail)
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Antimalarials

<i>chloroquine phosphate TABS</i>	F	QL(24 EA per 180 day(s) retail; 24 EA per 180 days mail)
<i>hydroxychloroquine sulfate 200 MG</i>	F	MP
<i>mefloquine hcl</i>	F	QL(8 EA per 180 day(s) retail; 8 EA per 180 days mail)
<i>primaquine phosphate TABS</i>	F	QL(1 EA daily)

ANTIMYASTHENIC/CHOLINERGIC AGENTS

Antimyasthenic/Cholinergic Agents

<i>pyridostigmine bromide SOLN PO</i>	F	
<i>pyridostigmine bromide TABS 60 MG</i>	F	
<i>pyridostigmine bromide TBCR</i>	F	

ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)

Drug Name	Drug Tier	Requirements/ Limits
Antimycobacterial Agents		
<i>cycloserine</i>	F	PA
<i>ethambutol hcl TABS</i>	F	MP
<i>isoniazid SOLN</i>	F	
<i>isoniazid SYRP</i>	F	MP
<i>isoniazid TABS</i>	F	MP
PRIFTIN	F	
<i>pyrazinamide</i>	F	
<i>rifabutin</i>	F	
<i>rifampin CAPS</i>	F	

ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer

Alkylating Agents

<i>carboplatin SOLN 50 MG/5ML, 150 MG/15ML, 450 MG/45ML, 600 MG/60ML</i>	F	SP
<i>carmustine</i>	F	
<i>cisplatin SOLN 50 MG/50ML, 100 MG/100ML, 200 MG/200ML</i>	F	SP
<i>cyclophosphamide CAPS</i>	F	
<i>cyclophosphamide SOLR IJ</i>	F	SP
GLEOSTINE 10 MG, 100 MG	F	
<i>ifosfamide SOLR</i>	F	
KEMOPLAT SOLN	F	SP
LEUKERAN	F	
<i>melphalan</i>	F	
<i>melphalan hcl IV</i>	F	SP; PA
MYLERAN TABS	F	
<i>temozolomide CAPS</i>	F	SP; PA
Antimetabolites		
<i>capecitabine</i>	F	SP; PA
<i>cladribine 10 MG/10ML</i>	F	SP

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>fludarabine phosphate SOLR</i>	F	SP; PA	<i>leuprolide acetate KIT IJ 1 MG/0.2ML</i>	F	SP; PA
<i>fluorouracil</i>	F		LUPRON DEPOT (1-MONTH) KIT IM	F	SP; PA
<i>gemcitabine hcl SOLR 1 GM, 200 MG</i>	F		LUPRON DEPOT (3-MONTH) KIT IM	F	SP; PA
<i>mercaptopurine TABS</i>	F		LUPRON DEPOT (4-MONTH) IM	F	SP; PA
<i>methotrexate sodium SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML</i>	F		LUPRON DEPOT (6-MONTH) IM	F	SP; PA
<i>methotrexate sodium SOLR</i>	F		LYSODREN	F	SP; PA
<i>methotrexate sodium TABS 2.5 MG</i>	F	MP	<i>megestrol acetate SUSP</i>	F	
TABLOID	F	SP	<i>megestrol acetate TABS</i>	F	
Antineoplastic - Angiogenesis Inhibitors			<i>nilutamide</i>	F	
CYRAMZA	F	SP; PA	<i>tamoxifen citrate TABS</i>	F	MP
Antineoplastic - Antibodies			<i>toremifene citrate</i>	F	
ARZERRA 100 MG/5ML	F	SP; PA	VABRINTY KIT SC 22.5 MG, 45 MG	F	SP; PA
LOQTORZI	F	SP; PA	Antineoplastic - Immunomodulators		
RUXIENCE	F	SP; PA	POMALYST	F	SP; PA
TRUXIMA	F	SP; PA	Antineoplastic Antibiotics		
Antineoplastic - EGFR Inhibitors			<i>daunorubicin hcl SOLN 20 MG/4ML</i>	F	SP; PA
<i>erlotinib hcl</i>	F	SP; PA	<i>daunorubicin hcl SOLN 50 MG/10ML</i>	F	SP
<i>gefitinib</i>	F	SP; PA	<i>doxorubicin hcl SOLN</i>	F	
GILOTRIF	F	SP; PA	<i>doxorubicin hcl SOLR 50 MG</i>	F	
Antineoplastic - Hedgehog Pathway Inhibitors			<i>idarubicin hcl</i>	F	
ERIVEDGE	F	SP; PA	Antineoplastic Combinations		
Antineoplastic - Hormonal and Related Agents			KISQALI FEMARA (200 MG DOSE)	F	QL(2 EA daily); SP; PA
<i>anastrozole</i>	F	MP	KISQALI FEMARA (400 MG DOSE)	F	QL(2.5 EA daily); SP; PA
<i>bicalutamide</i>	F		KISQALI FEMARA (600 MG DOSE)	F	QL(3.25 EA daily); SP; PA
ELIGARD SC	F	SP; PA	Antineoplastic Enzyme Inhibitors		
EMCYT	F	SP	BOSULIF TABS 100 MG	F	QL(3 EA daily); SP; PA
<i>exemestane</i>	F				
<i>fulvestrant SOSY</i>	F				
<i>letrozole</i>	F	MP			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
BOSULIF TABS 500 MG	F	QL(1 EA daily); SP; PA	SCEMBLIX 100 MG	F	QL(4 EA daily); SP; PA
<i>dasatinib 20 MG</i>	F	QL(2 EA daily); SP; PA	<i>sorafenib tosylate</i>	F	SP; PA
<i>dasatinib 50 MG, 70 MG, 80 MG, 100 MG, 140 MG</i>	F	QL(1 EA daily); SP; PA	<i>sunitinib malate 12.5 MG, 25 MG, 50 MG</i>	F	SP; PA
<i>everolimus TABS 5 MG, 10 MG</i>	F	SP; PA	TABRECTA	F	QL(4 EA daily); SP; PA
<i>imatinib mesylate TABS 400 MG</i>	F	QL(2 EA daily); SP; PA	TAFINLAR CAPS	F	QL(4 EA daily); SP; PA
<i>imatinib mesylate TABS 100 MG</i>	F	QL(3 EA daily); SP; PA	TAFINLAR TBSO	F	QL(30 EA daily); SP; PA
IMBRUVICA CAPS	F	SP; PA	VOTRIENT	F	SP; PA
IMBRUVICA SUSP	F	SP; PA	ZOLINZA	F	SP; PA
IMBRUVICA TABS	F	SP; PA	ZYKADIA TABS	F	QL(3 EA daily); SP; PA
KISQALI (200 MG DOSE)	F	QL(2 EA daily); SP; PA	Antineoplastic Enzymes		
KISQALI (400 MG DOSE)	F	QL(2 EA daily); SP; PA	ONCASPAR	F	SP; PA
KISQALI (600 MG DOSE)	F	QL(2.5 EA daily); SP; PA	Antineoplastics Misc.		
<i>lapatinib ditosylate</i>	F	SP; PA	ACTIMMUNE 100 MCG/0.5ML	F	SP; PA
LYNPARZA TABS	F	QL(4 EA daily); SP; PA	ALFERON N	F	SP; PA
MEKINIST SOLR	F	QL(40 ML daily); SP; PA	<i>bexarotene</i>	F	SP; PA
MEKINIST TABS 2 MG	F	QL(1 EA daily); SP; PA	<i>dacarbazine SOLR 200 MG</i>	F	
MEKINIST TABS 0.5 MG	F	QL(3 EA daily); SP; PA	<i>hydroxyurea</i>	F	
<i>nilotinib hcl 50 MG, 150 MG, 200 MG</i>	F	QL(4 EA daily); SP; PA	MATULANE	F	SP; PA
<i>pazopanib hcl</i>	F	SP; PA	PROLEUKIN	F	SP; PA
PIQRAY (200 MG DAILY DOSE)	F	QL(2 EA daily); SP; PA	<i>tretinoin (chemotherapy)</i>	F	SP; PA
PIQRAY (250 MG DAILY DOSE)	F	QL(2 EA daily); SP; PA	Chemotherapy Rescue/Antidote/Protective Agents		
PIQRAY (300 MG DAILY DOSE)	F	QL(2 EA daily); SP; PA	<i>dexrazoxane hcl 500 MG</i>	F	SP
RUBRACA	F	SP; PA	<i>dexrazoxane hcl 250 MG</i>	F	SP; PA
RYDAPT	F	QL(8 EA daily); SP; PA	<i>leucovorin calcium SOLN IJ 100 MG/10ML</i>	F	
SCEMBLIX 20 MG, 40 MG	F	QL(2 EA daily); SP; PA	<i>leucovorin calcium SOLR 50 MG, 100 MG, 500 MG</i>	F	
			<i>leucovorin calcium SOLR 200 MG, 350 MG</i>	F	PA
			<i>leucovorin calcium TABS</i>	F	
			<i>mesna SOLN</i>	F	SP
			<i>mesna TABS</i>	F	SP

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MESNEX TABS	F	SP	<i>carbidopa-levodopa-entacapone</i>	F	
Mitotic Inhibitors			<i>carbidopa-levodopa TABS</i>	F	MP
<i>docetaxel CONC 20 MG/ML, 80 MG/4ML</i>	F	SP; PA	<i>carbidopa-levodopa TBCR</i>	F	MP
DOCETAXEL CONC 20 MG/ML, 80 MG/4ML	F	SP; PA	<i>pramipexole dihydrochloride TABS</i>	F	
<i>etoposide CAPS</i>	F	SP	<i>pramipexole dihydrochloride TB24</i>	F	QL(60 EA per 30 day(s) retail)
<i>etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML</i>	F	SP	<i>ropinirole hydrochloride TABS</i>	F	MP
<i>paclitaxel 30 MG/5ML, 100 MG/16.7ML, 300 MG/50ML</i>	F		<i>ropinirole hydrochloride TB24</i>	F	QL(60 EA per 30 day(s) retail)
<i>vincristine sulfate</i>	F	SP	Antiparkinson Monoamine Oxidase Inhibitors		
<i>vinorelbine tartrate</i>	F		<i>rasagiline mesylate</i>	F	QL(1 EA daily)
Topoisomerase I Inhibitors			<i>selegiline hcl CAPS</i>	F	MP
<i>irinotecan hcl 40 MG/2ML, 100 MG/5ML</i>	F	SP	<i>selegiline hcl TABS</i>	F	MP
<i>topotecan hcl SOLR</i>	F	SP; PA	ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders		
ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease			Antimanic Agents		
Antiparkinson Anticholinergics			<i>lithium carbonate CAPS</i>	F	
<i>benztropine mesylate TABS</i>	F	MP	<i>lithium carbonate TABS</i>	F	
<i>trihexyphenidyl hcl SOLN</i>	F	MP	<i>lithium carbonate TBCR</i>	F	
<i>trihexyphenidyl hcl TABS</i>	F	MP	Antipsychotics - Misc.		
Antiparkinson COMT Inhibitors			<i>lurasidone hcl</i>	F	PA
<i>entacapone</i>	F		<i>ziprasidone hcl</i>	F	
<i>tolcapone</i>	F		Benzisoxazoles		
Antiparkinson Dopaminergics			ERZOFRI 39 MG/0.25ML, 78 MG/0.5ML, 117 MG/0.75ML, 156 MG/ML, 234 MG/1.5ML	F	SP; PA
<i>amantadine hcl CAPS</i>	F	MP	INVEGA HAFYERA	F	SP; PA
<i>amantadine hcl SOLN</i>	F	MP	INVEGA SUSTENNA	F	SP; PA
<i>amantadine hcl TABS</i>	F	MP	INVEGA TRINZA	F	SP; PA
<i>bromocriptine mesylate CAPS</i>	F		<i>paliperidone</i>	F	PA
<i>bromocriptine mesylate TABS 2.5 MG</i>	F		PERSERIS PRSY	F	SP; PA
			<i>risperidone microspheres</i>	F	SP; PA

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Drug Name	Drug Tier	Requirements/ Limits
<i>risperidone SOLN</i>	F	
<i>risperidone TABS</i>	F	
<i>risperidone TBDP</i>	F	
RYKINDO SRER	F	SP; PA
UZEDY SUSY	F	SP; PA
Butyrophenones		
<i>haloperidol decanoate</i>	F	
<i>haloperidol lactate CONC</i>	F	
<i>haloperidol lactate SOLN</i>	F	
<i>haloperidol TABS</i>	F	
Dibenzapines		
<i>asenapine maleate</i>	F	QL(60 EA per 30 day(s) retail); PA
<i>clozapine TABS</i>	F	
CLOZARIL TABS (Use <i>clozapine</i>)	F	
<i>loxapine succinate</i>	F	
<i>olanzapine TABS</i>	F	QL(60 EA per 30 day(s) retail; 180 EA per 90 days mail); AL(At least 18 yrs old)
<i>olanzapine TBDP</i>	F	QL(60 EA per 30 day(s) retail; 180 EA per 90 days mail); AL(At least 18 yrs old)
<i>quetiapine fumarate TABS 25 MG, 50 MG, 200 MG, 300 MG, 400 MG</i>	F	
<i>quetiapine fumarate TABS 100 MG</i>	F	QL(4 EA daily)
<i>quetiapine fumarate TB24 50 MG, 300 MG, 400 MG</i>	F	QL(60 EA per 30 day(s) retail; 180 EA per 90 days mail)
<i>quetiapine fumarate TB24 150 MG, 200 MG</i>	F	QL(1 EA daily)
ZYPREXA RELPREVV	F	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
Dihydroindolones		
<i>molindone hcl</i>	F	
Phenothiazines		
<i>chlorpromazine hcl SOLN</i>	F	
<i>chlorpromazine hcl TABS</i>	F	
<i>fluphenazine decanoate</i>	F	
<i>fluphenazine hcl CONC</i>	F	
<i>fluphenazine hcl ELIX</i>	F	
<i>fluphenazine hcl SOLN</i>	F	
<i>fluphenazine hcl TABS</i>	F	
<i>perphenazine TABS</i>	F	
<i>prochlorperazine</i>	F	
<i>prochlorperazine maleate TABS</i>	F	
<i>thioridazine hcl</i>	F	
<i>trifluoperazine hcl TABS</i>	F	
Quinolinone Derivatives		
ABILIFY ASIMTUFII PRSY	F	SP; PA
ABILIFY MAINTENA PRSY	F	SP; PA
ABILIFY MAINTENA SRER	F	SP; PA
<i>aripiprazole TABS</i>	F	QL(1 EA daily)
ARISTADA	F	SP; PA
ARISTADA INITIO	F	SP; PA
Thioxanthenes		
<i>thiothixene</i>	F	
ANTISEPTICS & DISINFECTANTS		
Chlorine Antiseptics		
CHLORHEXIDINE GLUCONATE SOLN XX	F	
ANTIVIRALS - Drugs to Treat Viral Infections		
Antiretrovirals		
<i>abacavir sulfate-lamivudine</i>	F	QL(1 EA daily)

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>abacavir sulfate SOLN</i>	F		FUZEON SOLR	F	QL(2 EA daily); SP
<i>abacavir sulfate TABS</i>	F	QL(2 EA daily)	GENVOYA	F	QL(1 EA daily)
APTIVUS CAPS	F	QL(4 EA daily); ST	INTELENCE 25 MG	F	QL(4 EA daily)
<i>atazanavir sulfate CAPS 300 MG</i>	F	QL(1 EA daily); ST	ISENTRESS HD TABS	F	QL(2 EA daily)
<i>atazanavir sulfate CAPS 150 MG</i>	F	QL(60 EA per 30 day(s) retail); ST	ISENTRESS CHEW	F	QL(180 EA per 30 day(s) retail)
<i>atazanavir sulfate CAPS 200 MG</i>	F	QL(2 EA daily)	ISENTRESS TABS	F	QL(2 EA daily)
BIKTARVY	F	QL(1 EA daily)	JULUCA	F	QL(1 EA daily)
CIMDUO	F	QL(1 EA daily)	KALETRA SOLN	F	
<i>darunavir TABS 600 MG</i>	F	QL(2 EA daily); ST	<i>lamivudine SOLN</i>	F	
<i>darunavir TABS 800 MG</i>	F	QL(30 EA per 30 day(s) retail); ST	<i>lamivudine TABS 150 MG</i>	F	QL(2 EA daily)
DELSTRIGO	F	QL(1 EA daily)	<i>lamivudine TABS 300 MG</i>	F	QL(1 EA daily)
DOVATO	F	QL(1 EA daily)	<i>lamivudine-zidovudine</i>	F	QL(2 EA daily)
EDURANT	F	QL(1 EA daily)	LEXIVA SUSP	F	
<i>efavirenz CAPS 50 MG</i>	F	QL(2 EA daily)	<i>lopinavir-ritonavir SOLN</i>	F	
<i>efavirenz CAPS 200 MG</i>	F	QL(3 EA daily)	<i>lopinavir-ritonavir TABS 50 MG-200 MG</i>	F	QL(4 EA daily)
<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>	F	QL(1 EA daily)	<i>lopinavir-ritonavir TABS 25 MG-100 MG</i>	F	QL(8 EA daily)
<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	F	QL(1 EA daily)	<i>maraviroc TABS 300 MG</i>	F	QL(4 EA daily)
<i>efavirenz TABS</i>	F	QL(1 EA daily)	<i>maraviroc TABS 150 MG</i>	F	QL(60 EA per 30 day(s) retail)
<i>emtricitabine CAPS</i>	F	QL(1 EA daily)	<i>nevirapine SUSP</i>	F	
<i>emtricitabine-rilpivirine-tenofovir disoproxil fumarate</i>	F	QL(1 EA daily)	<i>nevirapine TABS</i>	F	QL(2 EA daily)
<i>emtricitabine-tenofovir disoproxil fumarate</i>	F	QL(1 EA daily)	<i>nevirapine TB24 400 MG</i>	F	QL(1 EA daily)
EMTRIVA SOLN	F		NORVIR PACK	F	
<i>etravirine 200 MG</i>	F	QL(2 EA daily)	ODEFSEY	F	QL(1 EA daily)
<i>etravirine 100 MG</i>	F	QL(4 EA daily)	PIFELTRO	F	QL(1 EA daily)
EVOTAZ	F	QL(1 EA daily)	PREZCOBIX	F	QL(1 EA daily)
<i>fosamprenavir calcium TABS</i>	F	QL(4 EA daily)	PREZISTA SUSP	F	QL(12 ML daily); ST
			PREZISTA TABS 75 MG	F	QL(12 EA daily); ST
			PREZISTA TABS 150 MG	F	QL(6 EA daily); ST
			RETROVIR SOLN	F	
			REYATAZ PACK	F	QL(5 EA daily); ST
			<i>ritonavir TABS</i>	F	QL(4 EA daily)

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Drug Name	Drug Tier	Requirements/ Limits
RUKOBIA	F	QL(60 EA per 30 day(s) retail)
SELZENTRY SOLN	F	
SELZENTRY TABS 25 MG, 75 MG	F	
STRIBILD	F	QL(1 EA daily)
SYMTUZA	F	QL(1 EA daily)
<i>tenofovir disoproxil fumarate TABS</i>	F	QL(1 EA daily)
TIVICAY PD TBSO	F	QL(180 EA per 30 day(s) retail)
TIVICAY TABS 10 MG, 25 MG	F	QL(2 EA daily)
TIVICAY TABS 50 MG	F	QL(1 EA daily)
TRIUMEQ TABS	F	QL(1 EA daily)
TYBOST	F	QL(1 EA daily)
VIRACEPT TABS 625 MG	F	QL(4 EA daily)
VIRACEPT TABS 250 MG	F	QL(10 EA daily)
VIREAD POWD	F	
<i>zidovudine CAPS</i>	F	QL(2 EA daily)
<i>zidovudine SYRP</i>	F	
<i>zidovudine TABS</i>	F	QL(2 EA daily)
Antiviral Combinations		
PAXLOVID (150/100)	F	1 package(s) per 180 day(s) retail
PAXLOVID (300/100)	F	1 package(s) per 180 day(s) retail
CMV Agents		
<i>cidofovir</i>	F	
<i>foscarnet sodium 6000 MG/250ML</i>	F	
<i>ganciclovir sodium SOLR</i>	F	
<i>valganciclovir hcl SOLR</i>	F	
<i>valganciclovir hcl TABS</i>	F	
Hepatitis Agents		
<i>adefovir dipivoxil</i>	F	QL(1 EA daily)
BARACLUDE SOLN	F	

Drug Name	Drug Tier	Requirements/ Limits
<i>entecavir TABS</i>	F	QL(1 EA daily)
<i>lamivudine (hbm) TABS</i>	F	QL(3 EA daily)
MAVYRET PACK	F	SP; PA
MAVYRET TABS	F	SP; PA
PEGASYS SOLN	F	SP; PA
PEGASYS SOSY	F	SP; PA
<i>ribavirin (hepatitis c) CAPS</i>	F	SP; PA
<i>ribavirin (hepatitis c) TABS 200 MG</i>	F	SP; PA
SOFOSBUVIR-VELPATASVIR TABS	F	SP; PA
Herpes Agents		
<i>acyclovir sodium SOLN</i>	F	
<i>acyclovir CAPS</i>	F	
<i>acyclovir SUSP</i>	F	
<i>acyclovir TABS PO</i>	F	
<i>famciclovir</i>	F	
<i>valacyclovir hcl</i>	F	
Influenza Agents		
<i>oseltamivir phosphate CAPS 45 MG, 75 MG</i>	F	QL(10 EA per 180 day(s) retail; 10 EA per 180 days mail)
<i>oseltamivir phosphate CAPS 30 MG</i>	F	QL(20 EA per 180 day(s) retail; 20 EA per 180 days mail)
<i>oseltamivir phosphate SUSR</i>	F	
RELENZA DISKHALER	F	
<i>rimantadine hydrochloride TABS</i>	F	
XOFLUZA (40 MG DOSE) 40 MG	F	QL(1 EA per 180 day(s) retail; 1 EA per 180 days mail)

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Drug Name	Drug Tier	Requirements/ Limits
XOFLUZA (80 MG DOSE) 80 MG	F	QL(1 EA per 180 day(s) retail; 1 EA per 180 days mail)
Respiratory Syncytial Virus (RSV) Agents		
<i>ribavirin</i>	F	
BETA BLOCKERS - Drugs to Treat High Blood Pressure		
Alpha-Beta Blockers		
<i>carvedilol</i>	F	MP
<i>labetalol hcl TABS</i>	F	MP
Beta Blockers Cardio-Selective		
<i>acebutolol hcl CAPS</i>	F	MP
<i>atenolol TABS</i>	F	MP
<i>betaxolol hcl</i>	F	
<i>bisoprolol fumarate</i>	F	MP
<i>metoprolol succinate TB24</i>	F	MP
<i>metoprolol tartrate SOLN IV 5 MG/5ML</i>	F	
<i>metoprolol tartrate TABS 25 MG, 50 MG, 100 MG</i>	F	MP
<i>nebivolol hcl</i>	F	ST
Beta Blockers Non-Selective		
INDERAL XL	F	PA
INNOPRAN XL	F	PA
<i>nadolol TABS 20 MG, 40 MG, 80 MG</i>	F	MP
<i>pindolol TABS</i>	F	MP
<i>propranolol hcl CP24</i>	F	MP
<i>propranolol hcl SOLN PO 20 MG/5ML, 40 MG/5ML</i>	F	MP
<i>propranolol hcl SOLN IV 1 MG/ML</i>	F	
<i>propranolol hcl TABS</i>	F	MP
<i>sotalol hcl (afib/af)</i>	F	MP
<i>sotalol hcl TABS</i>	F	MP
<i>timolol maleate TABS</i>	F	MP

Drug Name	Drug Tier	Requirements/ Limits
CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure		
Calcium Channel Blockers		
<i>amlodipine besylate TABS</i>	F	MP
<i>diltiazem hcl coated beads CP24</i>	F	MP
<i>diltiazem hcl extended release beads</i>	F	MP
<i>diltiazem hcl CP12</i>	F	MP
<i>diltiazem hcl CP24</i>	F	MP
<i>diltiazem hcl SOLN</i>	F	
<i>diltiazem hcl TABS</i>	F	MP
<i>diltiazem hcl TB24 180 MG, 240 MG, 300 MG, 360 MG, 420 MG</i>	F	MP
<i>felodipine</i>	F	MP
<i>nicardipine hcl SOLN</i>	F	
<i>nifedipine TB24</i>	F	MP
<i>nimodipine CAPS</i>	F	QL(252 EA per 21 day(s) retail); 3 max fill(s) per 365 day(s) retail
<i>verapamil hcl CP24 120 MG, 180 MG, 240 MG</i>	F	MP
<i>verapamil hcl SOLN 2.5 MG/ML</i>	F	
<i>verapamil hcl TABS</i>	F	QL(3 EA daily); MP
<i>verapamil hcl TBCR</i>	F	MP
CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm		
Cardiac Glycosides		
<i>digoxin SOLN PO 0.05 MG/ML</i>	F	MP
<i>digoxin TABS 125 MCG, 250 MCG</i>	F	MP
LANOXIN PEDIATRIC SOLN IJ	F	

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Drug Name	Drug Tier	Requirements/ Limits
LANOXIN TABS 125 MCG, 250 MCG (Use digoxin)	F	MP
Inotropes		
<i>dobutamine hcl</i> 12.5 MG/ML, 250 MG/20ML	F	
<i>dopamine hcl</i> 40 MG/ML	F	
CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions		
Cardiovascular Agents Misc. - Combinations		
<i>amlodipine besylate-atorvastatin calcium</i> 10 MG-10 MG, 10 MG-20 MG, 10 MG-40 MG, 10 MG-80 MG, 5 MG-10 MG, 5 MG-20 MG, 5 MG-40 MG, 5 MG-80 MG	F	
<i>sacubitril-valsartan</i> TABS	F	QL(60 EA per 30 day(s) retail)
Prostaglandin Vasodilators		
<i>epoprostenol sodium</i>	F	SP; PA
ORENITRAM TBCR	F	SP; PA
REMODULIN SOLN IJ	F	SP; PA
<i>treprostinil</i> SOLN IJ	F	SP; PA
TYVASO REFILL KIT SOLN IN	F	SP; PA
TYVASO STARTER KIT SOLN IN	F	SP; PA
TYVASO SOLN IN	F	SP; PA
VENTAVIS IN	F	SP; PA
Pulmonary Hypertension - Endothelin Receptor Antagonists		
<i>ambrisentan</i>	F	SP; PA
<i>bosentan</i> TABS	F	SP; PA
OPSUMIT	F	SP; PA
Pulmonary Hypertension - Phosphodiesterase Inhibitors		

Drug Name	Drug Tier	Requirements/ Limits
<i>sildenafil citrate (pulmonary hypertension)</i> TABS	F	SP; PA
<i>tadalafil (pulmonary hypertension)</i> TABS	F	SP; PA
Sinus Node Inhibitors		
CORLANOR SOLN	F	QL(450 ML per 30 day(s) retail; 1350 ML per 90 days mail); SP
<i>ivabradine hcl</i> TABS	F	QL(60 EA per 30 day(s) retail; 180 EA per 90 days mail)
CEPHALOSPORINS - Drugs to Treat Bacterial Infections		
Cephalosporins - 1st Generation		
<i>cefadroxil</i> CAPS	F	
<i>cefadroxil</i> SUSR	F	
<i>cefadroxil</i> TABS	F	
CEFAZOLIN SODIUM-DEXTROSE SOLN 4 %-1 GM/50ML	F	
CEFAZOLIN SODIUM-DEXTROSE SOLR 4 %-1 GM	F	
<i>cefazolin sodium</i> SOLR IJ 1 GM, 10 GM, 500 MG	F	
<i>cephalexin</i> CAPS 250 MG, 500 MG	F	
<i>cephalexin</i> SUSR	F	
<i>cephalexin</i> TABS	F	
Cephalosporins - 2nd Generation		
<i>cefaclor</i> CAPS	F	
<i>cefaclor</i> SUSR 125 MG/5ML, 250 MG/5ML, 375 MG/5ML	F	
<i>cefotetan disodium</i> IJ 1 GM, 2 GM	F	
<i>cefoxitin sodium</i> IV	F	
<i>cefprozil</i> SUSR	F	

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>cefprozil TABS</i>	F		<i>desogestrel-ethinyl estradiol (triphasic)</i>	F	MP
<i>cefuroxime axetil TABS</i>	F		<i>drospirenone-ethinyl estradiol</i>	F	MP
<i>cefuroxime sodium IJ 750 MG</i>	F		<i>drospirenone-ethinyl estradiol-levomefolate calcium</i>	F	
Cephalosporins - 3rd Generation			<i>ethynodiol diacet & eth estrad</i>	F	MP
<i>cefdinir CAPS</i>	F		<i>levonorgestrel & eth estradiol TABS</i>	F	MP
<i>cefdinir SUSR</i>	F		<i>levonorgestrel-eth estradiol (triphasic)</i>	F	MP
<i>cefixime SUSR 100 MG/5ML</i>	F	1 max fill(s) per 365 day(s) retail	<i>levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG</i>	F	
<i>cefpodoxime proxetil SUSR</i>	F	QL(100 ML per 30 day(s) retail)	<i>levonorgestrel-ethinyl estradiol (continuous)</i>	F	
<i>cefpodoxime proxetil TABS</i>	F	QL(20 EA per 30 day(s) retail)	LO LOESTRIN FE TABS	F	QL(365 EA per 365 day(s) retail; 365 EA per 365 days mail)
<i>ceftazidime IJ 1 GM, 6 GM</i>	F		NATAZIA	F	QL(365 EA per 365 day(s) retail; 365 EA per 365 days mail)
<i>ceftriaxone sodium IJ 1 GM, 2 GM, 250 MG, 500 MG</i>	F		<i>norethin acet & estrad-fe CHEW</i>	F	
<i>ceftriaxone sodium in dextrose</i>	F		<i>norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG</i>	F	MP
Cephalosporins - 4th Generation			<i>norethindrone & eth estradiol</i>	F	MP
<i>cefepime hcl SOLR IJ 1 GM</i>	F		<i>norethindrone & ethinyl estradiol-fe</i>	F	
CHEMICALS			<i>norethindrone acet & eth estra TABS</i>	F	MP
Bulk Chemicals - H's			<i>norethindrone acetate-ethinyl estradiol-fe</i>	F	
HYDROCORTISONE ACETATE	F	PA	<i>norethindrone-eth estradiol (triphasic)</i>	F	MP
HYDROCORTISONE MICRONIZED	F	PA			
HYDROXYPROGESTERONE CAPROATE	F				
CONTRACEPTIVES - Drugs to Prevent Pregnancy					
Combination Contraceptives - Oral					
<i>desogestrel & ethinyl estradiol</i>	F	MP			
<i>desogestrel-ethinyl estradiol (biphasic)</i>	F	MP			

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Drug Name	Drug Tier	Requirements/ Limits
<i>norgestimate-ethinyl estradiol</i>	F	MP
<i>norgestimate-ethinyl estradiol (triphasic)</i>	F	MP
<i>norgestrel & ethinyl estradiol 30 MCG-0.3 MG</i>	F	MP
TYBLUME CHEW	F	
Combination Contraceptives - Transdermal		
<i>norelgestromin-ethinyl estradiol</i>	F	QL(0.15 EA daily)
Combination Contraceptives - Vaginal		
<i>etonogestrel-ethinyl estradiol</i>	F	QL(0.05 EA daily)
Copper Contraceptives - IUD		
MIUDELLA INTRAUTERINE COPPER	F	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); SP
PARAGARD INTRAUTERINE COPPER	F	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); SP
Emergency Contraceptives		
ELLA	F	QL(6 EA per 365 day(s) retail; 6 EA per 365 days mail)
<i>levonorgestrel (emergency oc) 1.5 MG</i>	F	QL(6 EA per 365 day(s) retail)
Progestin Contraceptives - Implants		
NEXPLANON	F	1 max fill(s) per 999 day(s) retail; SP
Progestin Contraceptives - Injectable		
DEPO-SUBQ PROVERA 104 SUSY SC	F	
<i>medroxyprogesterone acetate (contraceptive) SUSP IM</i>	F	

Drug Name	Drug Tier	Requirements/ Limits
<i>medroxyprogesterone acetate (contraceptive) SUSY IM</i>	F	
Progestin Contraceptives - IUD		
KYLEENA	F	QL(1 EA per 300 day(s) retail; 1 EA per 300 days mail); SP
LILETTA (52 MG)	F	QL(1 EA per 300 day(s) retail; 1 EA per 300 days mail); SP
MIRENA (52 MG)	F	QL(1 EA per 300 day(s) retail; 1 EA per 300 days mail); SP
SKYLA	F	QL(1 EA per 300 day(s) retail; 1 EA per 300 days mail); SP
Progestin Contraceptives - Oral		
<i>norethindrone (contraceptive)</i>	F	MP
OPILL	F	
CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions		
Glucocorticosteroids		
<i>budesonide CPEP</i>	F	QL(90 EA per 30 day(s) retail)
<i>dexamethasone ELIX</i>	F	
<i>dexamethasone SOLN</i>	F	
<i>dexamethasone TABS</i>	F	
<i>hydrocortisone sod succinate 100 MG</i>	F	QL(8 EA per 30 day(s) retail)
<i>hydrocortisone TABS</i>	F	
MEDROL TABS	F	
<i>methylprednisolone TABS</i>	F	
<i>methylprednisolone TBPk</i>	F	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>prednisolone sodium phosphate SOLN 5 MG/5ML, 15 MG/5ML</i>	F		<i>dextromethorphan-guaifenesin LIQD 100 MG/5ML-10 MG/5ML, 100 MG/5ML-5 MG/5ML, 150 MG/7.5ML-15 MG/7.5ML, 200 MG/10ML-20 MG/10ML, 200 MG/20ML-20 MG/20ML, 200 MG/5ML-10 MG/5ML, 200 MG/5ML-30 MG/5ML, 400 MG/20ML-20 MG/20ML</i>	F	
<i>prednisolone SOLN</i>	F		<i>dextromethorphan-guaifenesin SYRP 100 MG/5ML-10 MG/5ML, 200 MG/10ML-20 MG/10ML</i>	F	
<i>prednisone SOLN</i>	F		<i>dextromethorphan-guaifenesin TABS 400 MG-20 MG</i>	F	
<i>prednisone TABS</i>	F		<i>dextromethorphan-guaifenesin TB12 1200 MG-60 MG, 600 MG-30 MG</i>	F	
<i>prednisone TBPk</i>	F		<i>dextromethorphan-phenylephrine-acetaminophen LIQD</i>	F	
SOLU-CORTEF 250 MG, 500 MG, 1000 MG	F		<i>fexofenadine-pseudoephedrine TB12</i>	F	
SOLU-MEDROL (PF) 40 MG, 125 MG, 1000 MG	F		<i>fexofenadine-pseudoephedrine TB24</i>	F	
Mineralocorticoids			<i>guaifenesin-codeine SOLN</i>	F	QL(1800 ML per 30 day(s) retail); AL(At least 18 yrs old)
<i>fludrocortisone acetate TABS</i>	F		<i>guaifenesin-codeine SYRP</i>	F	QL(1800 ML per 30 day(s) retail); AL(At least 18 yrs old)
COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms			<i>loratadine & pseudoephedrine TB12</i>	F	
Antitussives			<i>loratadine & pseudoephedrine TB24</i>	F	
<i>benzonatate 100 MG, 200 MG</i>	F				
<i>dextromethorphan hbr SYRP 10 MG/5ML</i>	F				
<i>dextromethorphan polistirex SUER</i>	F				
Cough/Cold/Allergy Combinations					
<i>brompheniramine & pseudoeph ELIX</i>	F				
<i>brompheniramine & pseudoeph LIQD 15 MG/5ML-1 MG/5ML</i>	F				
<i>cetirizine-pseudoephedrine</i>	F				
<i>chlorpheniramine & pseudoeph TABS</i>	F				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>phenylephrine w/ dm-gg LIQD 10 MG/10ML-200 MG/10ML-20 MG/10ML, 5 MG/5ML-100 MG/5ML-10 MG/5ML</i>	F		<i>benzoyl peroxide GEL 2.5 %, 5 %, 10 %</i>	F	
<i>phenylephrine w/ dm-gg SYRP 5 MG/5ML-100 MG/5ML-10 MG/5ML</i>	F		<i>benzoyl peroxide LIQD 5 %, 10 %</i>	F	
<i>phenylephrine-brompheniramine-dm LIQD 2.5 MG/5ML-5 MG/5ML-1 MG/5ML, 5 MG/10ML-10 MG/10ML-2 MG/10ML</i>	F		<i>clindamycin phosphate (topical) GEL</i>	F	QL(75 ML per 30 day(s) retail)
<i>phenylephrine-guaifenesin TABS 10 MG-400 MG</i>	F		<i>clindamycin phosphate (topical) LOTN</i>	F	QL(60 ML per 30 day(s) retail)
<i>pseudoephedrine-guaifenesin TB12 600 MG-60 MG</i>	F		<i>clindamycin phosphate (topical) SOLN</i>	F	QL(60 ML per 30 day(s) retail)
<i>triprolidine & pseudoephedrine TABS</i>	F		<i>clindamycin phosphate (topical) SWAB</i>	F	QL(240 EA per 30 day(s) retail)
Expectorants			<i>erythromycin (acne aid) GEL</i>	F	QL(60 GM per 30 day(s) retail)
<i>guaifenesin LIQD</i>	F		<i>erythromycin (acne aid) SOLN</i>	F	QL(60 ML per 30 day(s) retail)
<i>guaifenesin TABS</i>	F		<i>isotretinoin</i>	F	PA
<i>guaifenesin TB12</i>	F		<i>tretinoin CREA 0.025 %, 0.05 %, 0.1 %</i>	F	QL(45 GM per 30 day(s) retail; 135 GM per 90 days mail); ST
<i>potassium iodide (expectorant) SOLN</i>	F		<i>tretinoin GEL 0.01 %, 0.025 %</i>	F	QL(45 GM per 30 day(s) retail; 135 GM per 90 days mail); ST
Misc. Respiratory Inhalants			Analgesics - Topical		
<i>sodium chloride (inhalant) NEBU 0.9 %, 3 %, 7 %, 10 %</i>	F		<i>menthol (topical analgesic) PTCH</i>	F	
Mucolytics			Antibiotics - Topical		
<i>acetylcysteine SOLN</i>	F		<i>bacitracin (topical) OINT</i>	F	
DERMATOLOGICALS - Drugs to Treat Skin Conditions			<i>bacitracin zinc OINT</i>	F	
Acne Products			<i>gentamicin sulfate (topical) CREA</i>	F	
<i>adapalene GEL 0.1 %</i>	F	QL(45 GM per 30 day(s) retail; 135 GM per 90 days mail); RX/OTC	<i>gentamicin sulfate (topical) OINT</i>	F	
			<i>mupirocin OINT</i>	F	
			<i>neomycin-bacitracin-polymyxin OINT</i>	F	PA
			Antifungals - Topical		
			<i>AZOLEN ANTI-FUNGAL WASH SOLN</i>	F	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
AZOLEN TINCTURE SOLN	F		<i>terbinafine hcl (topical) CREA</i>	F	
<i>butenafine hcl</i>	F		<i>tolnaftate AERP</i>	F	
<i>ciclopirox SOLN</i>	F	1 package(s) per 30 day(s) retail	<i>tolnaftate CREA</i>	F	
<i>clotrimazole (topical) CREA</i>	F	QL(120 GM per 30 day(s) retail); RX/OTC	<i>tolnaftate LIQD</i>	F	RX/OTC
<i>clotrimazole (topical) SOLN</i>	F	QL(120 ML per 30 day(s) retail); RX/OTC	<i>tolnaftate POWD EX</i>	F	
<i>clotrimazole w/ betamethasone CREA</i>	F		<i>tolnaftate SOLN</i>	F	RX/OTC
FUNGOID TINCTURE SOLN	F		Anti-inflammatory Agents - Topical		
<i>ketoconazole (topical) CREA</i>	F	QL(120 GM per 30 day(s) retail; 360 GM per 90 days mail)	<i>diclofenac sodium (topical) GEL EX</i>	F	QL(200 GM per 30 day(s) retail; 600 GM per 90 days mail); RX/OTC
<i>ketoconazole (topical) SHAM 2 %</i>	F		<i>diclofenac sodium (topical) SOLN EX 1.5 %</i>	F	QL(150 ML per 30 day(s) retail)
<i>miconazole nitrate (topical) CREA</i>	F		Antineoplastic or Premalignant Lesion Agents - Topical		
MICONAZOLE NITRATE SOLN	F		<i>bexarotene (topical)</i>	F	SP; PA
MICONI-AL SOLN	F		<i>fluorouracil (topical) CREA 5 %</i>	F	
<i>nystatin (topical) CREA</i>	F	QL(120 GM per 30 day(s) retail)	<i>fluorouracil (topical) SOLN</i>	F	
<i>nystatin (topical) OINT</i>	F	QL(120 GM per 30 day(s) retail)	VALCHLOR	F	SP; PA
<i>nystatin (topical) POWD EX</i>	F	QL(120 GM per 30 day(s) retail)	Antipsoriatics		
<i>nystatin-triamcinolone CREA</i>	F	QL(60 GM per 30 day(s) retail; 180 GM per 90 days mail); AL(Up to 5 yrs old); PA	<i>acitretin</i>	F	PA
<i>nystatin-triamcinolone OINT</i>	F	QL(60 GM per 30 day(s) retail; 180 GM per 90 days mail); AL(Up to 5 yrs old); PA	<i>calcipotriene CREA</i>	F	QL(60 GM per 30 day(s) retail)
			<i>calcipotriene OINT</i>	F	QL(60 GM per 30 day(s) retail; 180 GM per 90 days mail)
			<i>calcipotriene SOLN</i>	F	QL(60 ML per 30 day(s) retail)
			<i>methoxsalen rapid</i>	F	PA
			OTULFI SOSY SC 45 MG/0.5ML, 90 MG/ML	F	PA
			PYZCHIVA 45 MG/0.5ML, 90 MG/ML	F	SP; PA
			STEQEYMA	F	SP; PA
			YESINTEK SOLN 45 MG/0.5ML	F	SP; PA

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
YESINTEK SOSY	F	SP; PA	<i>betamethasone dipropionate augmented OINT</i>	F	QL(120 GM per 30 day(s) retail; 360 GM per 90 days mail)
Antiseborrheic Products			<i>betamethasone valerate CREA</i>	F	QL(120 GM per 30 day(s) retail; 360 GM per 90 days mail)
<i>selenium sulfide LOTN 2.5 %</i>	F		<i>betamethasone valerate LOTN</i>	F	QL(120 ML per 30 day(s) retail; 360 ML per 90 days mail)
Antivirals - Topical			<i>betamethasone valerate OINT</i>	F	QL(120 GM per 30 day(s) retail; 360 GM per 90 days mail)
<i>docosanol</i>	F		<i>clobetasol propionate emollient base 0.05 %</i>	F	QL(120 GM per 30 day(s) retail)
Burn Products			<i>clobetasol propionate CREA 0.05 %</i>	F	QL(120 GM per 30 day(s) retail)
<i>mafenide acetate PACK</i>	F		<i>clobetasol propionate GEL 0.05 %</i>	F	QL(60 GM per 30 day(s) retail)
<i>silver sulfadiazine</i>	F		<i>clobetasol propionate LIQD</i>	F	1 package(s) per 30 day(s) retail
Corticosteroids - Topical			<i>clobetasol propionate LOTN</i>	F	QL(120 ML per 30 day(s) retail; 360 ML per 90 days mail)
<i>alclometasone dipropionate CREA</i>	F	QL(120 GM per 30 day(s) retail; 360 GM per 90 days mail)	<i>clobetasol propionate OINT 0.05 %</i>	F	QL(120 GM per 30 day(s) retail)
<i>alclometasone dipropionate OINT</i>	F	QL(120 GM per 30 day(s) retail; 360 GM per 90 days mail)	<i>clobetasol propionate SOLN 0.05 %</i>	F	
<i>betamethasone dipropionate (topical) CREA</i>	F	QL(120 GM per 30 day(s) retail; 360 GM per 90 days mail)	<i>clo cortolone pivalate</i>	F	
<i>betamethasone dipropionate (topical) LOTN</i>	F	QL(120 ML per 30 day(s) retail; 360 ML per 90 days mail)	<i>fluocinolone acetonide CREA 0.01 %</i>	F	
<i>betamethasone dipropionate (topical) OINT</i>	F	QL(120 GM per 30 day(s) retail; 360 GM per 90 days mail)	<i>fluocinolone acetonide CREA 0.025 %</i>	F	QL(120 GM per 30 day(s) retail; 360 GM per 90 days mail)
<i>betamethasone dipropionate augmented CREA</i>	F	QL(120 GM per 30 day(s) retail; 360 GM per 90 days mail)	<i>fluocinolone acetonide OIL</i>	F	QL(355 ML per 30 day(s) retail)
<i>betamethasone dipropionate augmented GEL 0.05 %</i>	F	QL(120 GM per 30 day(s) retail; 360 GM per 90 days mail)	<i>fluocinolone acetonide OINT</i>	F	QL(120 GM per 30 day(s) retail; 360 GM per 90 days mail)
<i>betamethasone dipropionate augmented LOTN</i>	F	QL(120 ML per 30 day(s) retail; 360 ML per 90 days mail)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>fluocinolone acetonide SOLN</i>	F	QL(120 ML per 30 day(s) retail; 360 ML per 90 days mail)	<i>hydrocortisone (topical) OINT 1 %</i>	F	QL(150 GM per 30 day(s) retail; 450 GM per 90 days mail); RX/OTC
<i>fluocinonide emulsified base</i>	F		<i>hydrocortisone (topical) SOLN 1 %</i>	F	
<i>fluocinonide CREA 0.05 %</i>	F	QL(120 GM per 30 day(s) retail; 360 GM per 90 days mail)	<i>hydrocortisone acetate (topical) CREA 1 %</i>	F	QL(150 GM per 30 day(s) retail; 450 GM per 90 days mail)
<i>fluocinonide GEL</i>	F	QL(120 GM per 30 day(s) retail; 360 GM per 90 days mail)	<i>hydrocortisone acetate (topical) OINT</i>	F	QL(150 GM per 30 day(s) retail; 450 GM per 90 days mail)
<i>fluocinonide OINT</i>	F	QL(120 GM per 30 day(s) retail; 360 GM per 90 days mail)	<i>mometasone furoate CREA</i>	F	QL(120 GM per 30 day(s) retail; 360 GM per 90 days mail)
<i>fluocinonide SOLN</i>	F		<i>mometasone furoate OINT</i>	F	QL(120 GM per 30 day(s) retail; 360 GM per 90 days mail)
<i>fluticasone propionate CREA 0.05 %</i>	F	QL(120 GM per 30 day(s) retail; 360 GM per 90 days mail)	<i>mometasone furoate SOLN</i>	F	
<i>fluticasone propionate OINT</i>	F	QL(120 GM per 30 day(s) retail; 360 GM per 90 days mail)	<i>triamcinolone acetonide (topical) CREA</i>	F	
<i>halobetasol propionate CREA</i>	F	QL(120 GM per 30 day(s) retail; 360 GM per 90 days mail)	<i>triamcinolone acetonide (topical) LOTN</i>	F	
<i>halobetasol propionate OINT</i>	F	QL(120 GM per 30 day(s) retail; 360 GM per 90 days mail)	<i>triamcinolone acetonide (topical) OINT</i>	F	
<i>hydrocortisone (topical) CREA 0.5 %, 2.5 %</i>	F		Enzymes - Topical		
<i>hydrocortisone (topical) CREA 1 %</i>	F	QL(150 GM per 30 day(s) retail; 450 GM per 90 days mail); RX/OTC	SANTYL OINT	F	QL(120 GM per 30 day(s) retail); PA
<i>hydrocortisone (topical) LOTN 1 %, 2.5 %</i>	F		Immunomodulating Agents - Topical		
<i>hydrocortisone (topical) OINT 2.5 %</i>	F		<i>imiquimod 5 %</i>	F	QL(20 EA per 30 day(s) retail)
			Immunosuppressive Agents - Topical		
			<i>pimecrolimus</i>	F	QL(60 GM per 30 day(s) retail); PA
			<i>tacrolimus (topical) OINT</i>	F	QL(60 GM per 30 day(s) retail; 180 GM per 90 days mail); PA

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Keratolytic/Antimitotic/Vesicant Agents			<i>lidocaine PTCH 5 %</i>	F	QL(90 EA per 30 day(s) retail)
<i>podofilox SOLN</i>	F	QL(7 ML per 30 day(s) retail)	<i>lidocaine PTCH 4 %</i>	F	
Liniments			LIDOSYNC CREA	F	3 max fill(s) per 60 day(s) retail
<i>menthol-methyl salicylate (liniments) CREA</i>	F		LIDOTHOL PTCH	F	
Local Anesthetics - Topical			LM PLUS RELIEF PTCH	F	
ALIVIO PTCH	F	RX/OTC	MENCAPS PTCH	F	
AVADERM CREA	F	3 max fill(s) per 60 day(s) retail	ZOSTRIX NATURAL PAIN RELIEF CREA	F	
<i>benzocaine-isopropyl alcohol</i>	F		ZYLOTROL CREA	F	3 max fill(s) per 60 day(s) retail
<i>capsaicin CREA 0.075 %, 0.1 %</i>	F		Misc. Topical		
<i>capsaicin-menthol PTCH</i>	F		DRYSOL SOLN	F	
CAPSIDERM PTCH	F		<i>isopropyl alcohol (skin cleanser) MISC</i>	F	MP
CBD4 FREEZE PUMP VANISH SCENT CREA	F	3 max fill(s) per 60 day(s) retail	<i>skin protectants, misc. OINT</i>	F	
CMX PTCH	F		XERAC AC	F	
GEN7T PLUS PTCH	F		<i>zinc oxide (topical) OINT 20 %</i>	F	
ICY HOT LIDOCAINE PLUS MENTHOL CREA	F	3 max fill(s) per 60 day(s) retail	Rosacea Agents		
ICY HOT MAX LIDOCAINE CREA	F	3 max fill(s) per 60 day(s) retail	<i>metronidazole (topical) CREA</i>	F	
ICY HOT PM PTCH	F		<i>metronidazole (topical) GEL</i>	F	
LEVATIO PTCH	F	RX/OTC	<i>metronidazole (topical) LOTN</i>	F	
LEVIGOLT CREA	F	3 max fill(s) per 60 day(s) retail	Scabicides & Pediculicides		
<i>lidocaine hcl CREA 4 %</i>	F	3 max fill(s) per 60 day(s) retail	<i>ivermectin (pediculicide)</i>	F	
<i>lidocaine hcl GEL 2 %</i>	F	PA; RX/OTC	<i>malathion</i>	F	
<i>lidocaine hcl PRSY</i>	F	PA	<i>permethrin CREA</i>	F	
<i>lidocaine hcl SOLN</i>	F		<i>permethrin LIQD EX</i>	F	
<i>lidocaine CREA 4 %</i>	F	3 max fill(s) per 60 day(s) retail	<i>pyrethrins-piperonyl butoxide LIQD 3 %-2.4 %-0.3 %-1.2 %</i>	F	
<i>lidocaine-menthol PTCH 4 %-1 %</i>	F	RX/OTC	<i>pyrethrins-piperonyl butoxide-permethrin-nit remover 4 %-0.33 %-0.5 %</i>	F	
<i>lidocaine-prilocaine CREA</i>	F	QL(30 GM per 30 day(s) retail; 90 GM per 90 days mail)			

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Drug Name	Drug Tier	Requirements/ Limits
<i>pyrethrins-piperonyl butoxide SHAM 4 %-0.33 %</i>	F	
<i>spinosad</i>	F	ST
VANALICE GEL	F	
DIAGNOSTIC PRODUCTS		
Diagnostic Tests		
ACCU-CHEK GUIDE TEST STRP	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
BINAXNOW COVID-19 AG HOME TEST KIT	F	QL(2 EA per 30 day(s) retail)
CARESTART COVID-19 HOME TEST KIT	F	QL(2 EA per 30 day(s) retail)
CHEMSTRIP K STRP	F	
CHEMSTRIP UGK	F	QL(200 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
COVID-19 OTC ANTIGEN 1-PACK KIT	F	QL(4 EA per 30 day(s) retail)
COVID-19 OTC ANTIGEN 2-PACK KIT	F	QL(2 EA per 30 day(s) retail)
COVID-19 SPECIMEN COLLECTION	F	QL(4 EA per 30 day(s) retail)
COVID-19 TESTING BY PHARMACIST	F	QL(4 EA per 30 day(s) retail)
CVS KETONE CARE	F	QL(200 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
DIASTIX	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
DIASTIX REAGENT	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
FLOWFLEX COVID-19 AG HOME TEST KIT	F	QL(4 EA per 30 day(s) retail)

Drug Name	Drug Tier	Requirements/ Limits
FLOWFLEX COVID-19 AG HOME TEST KIT	F	QL(2 EA per 30 day(s) retail)
FORA GTEL BLOOD KETONE TEST	F	QL(100 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
FORA TEST N'GO ADV-VOICE-6 CON	F	QL(100 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
GOJJI BLOOD KETONE TEST	F	QL(100 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
IHEALTH COVID-19 RAPID TEST KIT	F	QL(2 EA per 30 day(s) retail)
INTELISWAB COVID-19 RAPID TEST KIT	F	QL(2 EA per 30 day(s) retail)
KETO-DIASTIX	F	QL(200 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
KETONE TEST STRP	F	
KETOSTIX STRP	F	
NOVA MAX PLUS KETONE TEST	F	QL(100 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
PRECISION XTRA KETONE	F	QL(100 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
QUICKVUE AT-HOME COVID-19 TEST KIT	F	QL(2 EA per 30 day(s) retail)
RELION KETONE TEST STRP	F	
RELION TRUE METRIX TEST STRIPS STRP	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TRUE METRIX BLOOD GLUCOSE TEST STRP	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	<i>furosemide SOLN PO 8 MG/ML, 10 MG/ML</i>	F	MP
DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes			<i>furosemide TABS</i>	F	MP
			<i>torsemide TABS</i>	F	MP
Digestive Enzymes			Potassium Sparing Diuretics		
CREON CPEP	F	PA	<i>amiloride hcl TABS</i>	F	
ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT-10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 252600 UNIT-189600 UNIT-60000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT	F	PA	<i>spironolactone TABS</i>	F	MP
DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure			Thiazides and Thiazide-Like Diuretics		
Carbonic Anhydrase Inhibitors			<i>chlorthalidone 25 MG, 50 MG</i>	F	MP
<i>acetazolamide CP12</i>	F	MP	<i>hydrochlorothiazide CAPS</i>	F	MP
<i>acetazolamide TABS</i>	F	MP	<i>hydrochlorothiazide TABS 25 MG, 50 MG</i>	F	MP
<i>methazolamide TABS</i>	F		<i>indapamide TABS 1.25 MG, 2.5 MG</i>	F	MP
Diuretic Combinations			<i>metolazone</i>	F	MP
<i>amiloride & hydrochlorothiazide</i>	F		ENDOCRINE AND METABOLIC AGENTS - MISC.		
<i>spironolactone & hydrochlorothiazide</i>	F	MP	- Drugs to Treat Bone Disease and Regulate Hormones		
<i>triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG</i>	F	MP	Bone Density Regulators		
<i>triamterene & hydrochlorothiazide TABS</i>	F	MP	<i>alendronate sodium TABS 5 MG, 10 MG</i>	F	MP
Loop Diuretics			<i>alendronate sodium TABS 35 MG, 70 MG</i>	F	QL(4 EA per 28 day(s) retail; 12 EA per 84 days mail); MP
<i>bumetanide TABS</i>	F	MP	<i>calcitonin (salmon) NA</i>	F	1 package(s) per 30 day(s) retail
			<i>ibandronate sodium TABS</i>	F	QL(1 EA per 30 day(s) retail; 3 EA per 90 days mail)
			<i>pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML</i>	F	SP; PA
			PAMIDRONATE DISODIUM SOLN	F	SP
			<i>risedronate sodium TABS 5 MG, 35 MG, 150 MG</i>	F	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>zoledronic acid CONC</i>	F	QL(5 ML per 30 day(s) retail; 15 ML per 90 days mail); SP; PA	<i>calcitriol CAPS</i>	F	
<i>zoledronic acid SOLN 5 MG/100ML</i>	F	SP	<i>calcitriol SOLN PO</i>	F	
<i>zoledronic acid SOLN 4 MG/100ML</i>	F	QL(100 ML per 30 day(s) retail); SP; PA	<i>cinacalcet hcl</i>	F	SP; PA
ZOLEDRONIC ACID SOLN	F	QL(100 ML per 30 day(s) retail); SP; PA	<i>doxercalciferol CAPS</i>	F	
Fertility Regulators			<i>doxercalciferol SOLN</i>	F	
<i>clomiphene citrate TABS</i>	F	QL(10 EA per 30 day(s) retail); 3 max fill(s) per 999 day(s) retail	<i>levocarnitine (metabolic modifiers) SOLN PO 1 GM/10ML</i>	F	
GnRH/LHRH Antagonists			<i>levocarnitine (metabolic modifiers) TABS</i>	F	
ORILISSA	F	SP; PA	<i>nitisinone CAPS 2 MG, 10 MG</i>	F	SP; PA
Growth Hormones			<i>paricalcitol CAPS 1 MCG, 2 MCG</i>	F	
NORDITROPIN FLEXPPO SOPN	F	SP; PA	<i>paricalcitol SOLN</i>	F	SP
OMNITROPE SOCT	F	SP; PA	<i>sapropterin dihydrochloride TABS</i>	F	SP; PA
SKYTROFA	F	SP; PA	<i>sodium phenylbutyrate POWD</i>	F	SP; PA
Insulin-Like Growth Factors (Somatomedins)			<i>sodium phenylbutyrate TABS</i>	F	SP; PA
INCRELEX	F	SP; PA	Posterior Pituitary Hormones		
LHRH/GnRH Agonist Analog Pituitary Suppressants			<i>desmopressin acetate spray</i>	F	
FENSOLVI (6 MONTH) SC	F	SP; PA	<i>desmopressin acetate spray refrigerated 0.01 %</i>	F	
LUPRON DEPOT-PED (1-MONTH)	F	SP; PA	<i>desmopressin acetate SOLN IJ</i>	F	SP
LUPRON DEPOT-PED (3-MONTH)	F	SP; PA	DESMOPRESSIN ACETATE SOLN NA	F	SP
LUPRON DEPOT-PED (6-MONTH) IM	F	SP; PA	<i>desmopressin acetate TABS 0.1 MG</i>	F	PA
SUPPRELIN LA	F	SP; PA	<i>desmopressin acetate TABS 0.2 MG</i>	F	
TRIPTODUR	F	SP; PA	Prolactin Inhibitors		
Metabolic Modifiers			<i>cabergoline</i>	F	QL(16 EA per 30 day(s) retail)
			Somatostatic Agents		
			<i>octreotide acetate KIT</i>	F	SP; PA
			<i>octreotide acetate SOLN</i>	F	SP; PA

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Drug Name	Drug Tier	Requirements/ Limits
<i>octreotide acetate SOSY</i>	F	SP; PA
ESTROGENS - Hormone Replacement/Modifying Drugs		
Estrogen Combinations		
<i>estradiol & norethindrone acetate TABS</i>	F	
<i>norethindrone acetate-ethinyl estradiol</i>	F	
PREMPHASE	F	
PREMPRO	F	
Estrogens		
ALORA PTTW 0.025 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR	F	QL(8 EA per 28 day(s) retail; 24 EA per 84 days mail); MP
<i>estradiol valerate</i>	F	
<i>estradiol PTTW</i>	F	QL(8 EA per 28 day(s) retail; 24 EA per 84 days mail); MP
<i>estradiol PTWK</i>	F	MP
<i>estradiol TABS</i>	F	MP
PREMARIN TABS	F	
FLUOROQUINOLONES - Drugs to Treat Bacterial Infections		
Fluoroquinolones		
<i>ciprofloxacin hcl TABS</i>	F	
<i>ciprofloxacin in d5w</i>	F	
CIPRO SUSR	F	
<i>levofloxacin in d5w</i>	F	
<i>levofloxacin SOLN PO</i>	F	
<i>levofloxacin TABS</i>	F	QL(1 EA daily)
<i>moxifloxacin hcl in sodium chloride</i>	F	
<i>moxifloxacin hcl TABS</i>	F	QL(10 EA per 30 day(s) retail)
GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs		

Drug Name	Drug Tier	Requirements/ Limits
Antiflatulents		
<i>simethicone CHEW</i>	F	
<i>simethicone SUSP</i>	F	
Gallstone Solubilizing Agents		
<i>ursodiol CAPS</i>	F	MP
<i>ursodiol TABS</i>	F	MP
Gastrointestinal Antiallergy Agents		
<i>cromolyn sodium (mastocytosis)</i>	F	
Gastrointestinal Chloride Channel Activators		
<i>lubiprostone</i>	F	PA
Gastrointestinal Stimulants		
<i>metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML</i>	F	
<i>metoclopramide hcl TABS</i>	F	
Inflammatory Bowel Agents		
AVSOLA	F	SP; PA
<i>balsalazide disodium CAPS</i>	F	
<i>mesalamine w/ cleanser</i>	F	
<i>mesalamine CP24</i>	F	
<i>mesalamine CPDR</i>	F	
<i>mesalamine ENEM</i>	F	
<i>mesalamine TBEC</i>	F	
OTULFI SOLN IV 130 MG/26ML	F	PA
PYZCHIVA 130 MG/26ML	F	SP; PA
SFROWASA ENEM	F	
STEQEYMA	F	SP; PA
<i>sulfasalazine TABS</i>	F	MP
<i>sulfasalazine TBEC</i>	F	MP
Intestinal Acidifiers		
<i>lactulose (encephalopathy)</i>	F	

Drug Name	Drug Tier	Requirements/ Limits
Peripheral Opioid Receptor Antagonists		
MOVANTIK	F	PA
Phosphate Binder Agents		
<i>calcium acetate (phosphate binder) CAPS</i>	F	
<i>calcium acetate (phosphate binder) TABS</i>	F	RX/OTC
<i>sevelamer carbonate PACK</i>	F	
<i>sevelamer carbonate TABS</i>	F	ST
GENERAL ANESTHETICS		
Anesthetics - Misc.		
<i>etomidate</i>	F	
GENITOURINARY AGENTS - MISCELLANEOUS - Miscellaneous Drugs to Treat Reproductive Organs and Urinary System		
Acidifiers		
K-PHOS NO 2	F	
Alkalinizers		
<i>pot & sod citrates w/citric ac SOLN</i>	F	
<i>potassium citrate (alkalinizer) TBCR</i>	F	
<i>potassium citrate-citric acid PACK</i>	F	
<i>potassium citrate-citric acid SOLN</i>	F	RX/OTC
<i>sodium citrate & citric acid</i>	F	RX/OTC
Cystinosis Agents		
CYSTAGON CAPS	F	SP; PA
Genitourinary Irrigants		
<i>sodium chloride (gu irrigant) 0.9 %</i>	F	
Interstitial Cystitis Agents		

Drug Name	Drug Tier	Requirements/ Limits
ELMIRON CAPS	F	QL(90 EA per 30 day(s) retail); PA
Prostatic Hypertrophy Agents		
<i>alfuzosin hcl</i>	F	QL(1 EA daily)
<i>dutasteride</i>	F	QL(1 EA daily); ST
<i>finasteride</i>	F	MP
<i>silodosin</i>	F	QL(1 EA daily); ST
<i>tamsulosin hcl</i>	F	MP
Urinary Analgesics		
<i>phenazopyridine hcl TABS 100 MG, 200 MG</i>	F	
Urinary Stone Agents		
LITHOSTAT	F	
GOUT AGENTS - Drugs to Treat Gout		
Gout Agent Combinations		
<i>colchicine w/ probenecid</i>	F	
Gout Agents		
<i>allopurinol 100 MG, 300 MG</i>	F	MP
<i>colchicine TABS</i>	F	QL(2 EA daily)
Uricosurics		
<i>probenecid</i>	F	
HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders		
Hematorheologic Agents		
<i>pentoxifylline</i>	F	QL(90 EA per 30 day(s) retail; 270 EA per 90 days mail); MP
Platelet Aggregation Inhibitors		
<i>anagrelide hcl 0.5 MG</i>	F	
<i>cilostazol</i>	F	MP
<i>clopidogrel bisulfate 75 MG</i>	F	MP

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Drug Name	Drug Tier	Requirements/ Limits
<i>dipyridamole</i>	F	MP
<i>prasugrel hcl</i>	F	QL(1 EA daily)
HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders		
Agents for Gaucher Disease		
CERDELGA	F	SP; PA
CEREZYME 400 UNIT	F	SP; PA
<i>miglustat</i>	F	QL(3 EA daily); SP; PA
Agents for Sickle Cell Disease		
DROXIA CAPS	F	
Cobalamins		
<i>cyanocobalamin SOLN IJ 1000 MCG/ML</i>	F	
<i>cyanocobalamin TABS 100 MCG, 500 MCG, 1000 MCG</i>	F	
<i>cyanocobalamin TBCR 1000 MCG</i>	F	
<i>hydroxocobalamin acetate SOLN</i>	F	
Folic Acid/Folates		
<i>folic acid TABS 1 MG, 400 MCG</i>	F	MP; RX/OTC
Hematopoietic Growth Factors		
<i>eltrombopag olamine PACK 12.5 MG, 25 MG</i>	F	QL(1 EA daily); SP; PA
<i>eltrombopag olamine TABS 12.5 MG, 25 MG, 50 MG, 75 MG</i>	F	QL(1 EA daily); SP; PA
NYVEPRIA	F	SP; PA
RETACRIT	F	SP; PA
UDENYCA ONBODY SOSY	F	SP; PA
UDENYCA SOAJ	F	SP; PA
UDENYCA SOSY	F	SP; PA
ZARXIO	F	SP; PA
Hematopoietic Mixtures		

Drug Name	Drug Tier	Requirements/ Limits
<i>iron polysaccharide complex-vit b12-folic acid CAPS</i>	F	RX/OTC
NEPHRON FA	F	
Iron		
<i>ferrous fumarate TABS</i>	F	
<i>ferrous gluconate TABS</i>	F	
FERROUS GLUCONATE TABS 324 MG	F	
<i>ferrous sulfate dried TABS</i>	F	
<i>ferrous sulfate dried TBCR</i>	F	
FERROUS SULFATE POWD	F	RX/OTC
<i>ferrous sulfate SOLN 15 MG/ML, 15 MG/ML</i>	F	
<i>ferrous sulfate TABS 325 MG, 65 MG, 325 MG</i>	F	MP
<i>ferrous sulfate TBEC</i>	F	MP
<i>polysaccharide iron complex CAPS</i>	F	
HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders		
Hemostatics - Systemic		
<i>aminocaproic acid SOLN PO 0.25 GM/ML</i>	F	SP
<i>aminocaproic acid TABS</i>	F	SP
<i>tranexamic acid SOLN 1000 MG/10ML</i>	F	
<i>tranexamic acid TABS</i>	F	QL(6 EA daily)
Hemostatics - Topical		
MONSELS FERRIC SUBSULFATE	F	
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
Antihistamine Hypnotics		
<i>diphenhydramine hcl (sleep) TABS</i>	F	

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Drug Name	Drug Tier	Requirements/ Limits
<i>doxylamine succinate (sleep)</i>	F	
Barbiturate Hypnotics		
<i>phenobarbital ELIX</i>	F	
<i>phenobarbital TABS</i>	F	
Non-Barbiturate Hypnotics		
<i>estazolam</i>	F	QL(1 EA daily)
<i>eszopiclone</i>	F	QL(1 EA daily)
<i>flurazepam hcl</i>	F	QL(1 EA daily)
<i>temazepam 15 MG, 30 MG</i>	F	QL(1 EA daily)
<i>zaleplon</i>	F	QL(1 EA daily)
<i>zolpidem tartrate TABS</i>	F	QL(1 EA daily)
<i>zolpidem tartrate TBCR</i>	F	QL(30 EA per 30 day(s) retail); ST
Selective Melatonin Receptor Agonists		
<i>ramelteon</i>	F	QL(1 EA daily)
LAXATIVES - Bowel Treatment Drugs		
Bulk Laxatives		
<i>calcium polycarbophil TABS</i>	F	
KONSYL DAILY FIBER PACK 100 %	F	
<i>methylcellulose (laxative) POWD</i>	F	
<i>methylcellulose (laxative) TABS</i>	F	
<i>psyllium CAPS 0.52 GM, 400 MG</i>	F	
<i>psyllium POWD 25 %, 28.3 %, 43 %, 48.57 %, 51.7 %, 100 %</i>	F	
Laxative Combinations		
<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR</i>	F	

Drug Name	Drug Tier	Requirements/ Limits
<i>peg 3350-potassium chloride-sod bicarbonate-sod chloride</i>	F	
<i>sennosides-docusate sodium TABS</i>	F	
Laxatives - Miscellaneous		
<i>glycerin (laxative) SUPP 1 GM</i>	F	
<i>lactulose SOLN</i>	F	
<i>polyethylene glycol 3350 PACK</i>	F	
<i>polyethylene glycol 3350 POWD</i>	F	
Lubricant Laxatives		
MINERAL OIL HEAVY OIL XX	F	RX/OTC
MINERAL OIL LIGHT XX	F	RX/OTC
<i>mineral oil OIL PO</i>	F	RX/OTC
MINERAL OIL OIL XX	F	RX/OTC
MURI-LUBE XX	F	RX/OTC
Saline Laxatives		
<i>magnesium citrate 1.745 GM/30ML</i>	F	
<i>magnesium hydroxide SUSP 7.75 %, 400 MG/5ML, 1200 MG/15ML, 2400 MG/30ML</i>	F	
<i>sodium phosphates ENEM</i>	F	
Stimulant Laxatives		
<i>bisacodyl SUPP</i>	F	
<i>bisacodyl TBEC</i>	F	
FLEET BISACODYL ENEM	F	
<i>sennosides LIQD</i>	F	
<i>sennosides SYRP 8.8 MG/5ML</i>	F	
<i>sennosides TABS 8.6 MG, 25 MG</i>	F	

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Drug Name	Drug Tier	Requirements/ Limits
Surfactant Laxatives		
<i>benzocaine-docusate sodium ENEM</i>	F	
<i>docusate sodium CAPS 100 MG, 250 MG</i>	F	
<i>docusate sodium ENEM 283 MG/5ML</i>	F	
<i>docusate sodium LIQD 50 MG/5ML, 100 MG/10ML</i>	F	
<i>docusate sodium TABS</i>	F	
LOCAL ANESTHETICS-Parenteral - Drugs for Numbing		
Local Anesthetics - Amides		
<i>lidocaine hcl (local anesth.) SOSY IJ 100 MG/5ML</i>	F	
MACROLIDES - Drugs to Treat Bacterial Infections		
Azithromycin		
<i>azithromycin PACK</i>	F	
<i>azithromycin SOLR</i>	F	
<i>azithromycin SUSR</i>	F	
<i>azithromycin TABS</i>	F	
ZITHROMAX PACK	F	
Clarithromycin		
<i>clarithromycin SUSR</i>	F	
<i>clarithromycin TABS</i>	F	
<i>clarithromycin TB24</i>	F	
Erythromycins		
<i>erythromycin base CPEP</i>	F	
<i>erythromycin base TABS</i>	F	
<i>erythromycin ethylsuccinate SUSR 200 MG/5ML</i>	F	
<i>erythromycin ethylsuccinate TABS</i>	F	
<i>erythromycin lactobionate 500 MG</i>	F	

Drug Name	Drug Tier	Requirements/ Limits
<i>erythromycin stearate TABS 250 MG</i>	F	
MEDICAL DEVICES AND SUPPLIES		
Bandages-Dressings-Tape		
BIOCLUSIVE DRESSING PADS	F	1 max fill(s) per 30 day(s) retail
BIOCLUSIVE MVP SELECT PADS	F	1 max fill(s) per 30 day(s) retail
BIOCLUSIVE SELECT PADS	F	1 max fill(s) per 30 day(s) retail
BIOCLUSIVE TRANSPARENT PADS	F	1 max fill(s) per 30 day(s) retail
CVS DRESSING 4"X4-3/4" MISC	F	1 max fill(s) per 30 day(s) retail
CVS MEPITEL TRANSPARENT FILM MISC	F	1 max fill(s) per 30 day(s) retail
CVS WINDOW BANDAGES MISC	F	1 max fill(s) per 30 day(s) retail
IV3000 1-HAND PEDIATRIC MISC	F	1 max fill(s) per 30 day(s) retail
IV3000 1-HAND MISC	F	1 max fill(s) per 30 day(s) retail
IV3000 FRAME DELIVERY MISC	F	1 max fill(s) per 30 day(s) retail
IV3000 STANDARD MISC	F	1 max fill(s) per 30 day(s) retail
KENDALL TRANSPARENT FILM DRESS MISC	F	1 max fill(s) per 30 day(s) retail
NEXCARE TEGADERM 2-3/8"X2-3/4" MISC	F	1 max fill(s) per 30 day(s) retail
NEXCARE TEGADERM 4"X4-3/4" MISC	F	1 max fill(s) per 30 day(s) retail
OPSITE 11"X11-3/4" MISC	F	1 max fill(s) per 30 day(s) retail
OPSITE 11"X17-3/4" MISC	F	1 max fill(s) per 30 day(s) retail
OPSITE 11"X6" MISC	F	1 max fill(s) per 30 day(s) retail
OPSITE 17-3/4"X21-5/8" MISC	F	1 max fill(s) per 30 day(s) retail

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
OPSITE 4"X5-1/2" MISC	F	1 max fill(s) per 30 day(s) retail	TEGADERM + PAD 3-1/2"X6" MISC	F	1 max fill(s) per 30 day(s) retail
OPSITE FLEXIGRID 2-3/8"X2-3/4" MISC	F	1 max fill(s) per 30 day(s) retail	TEGADERM + PAD 3-1/2"X8" MISC	F	1 max fill(s) per 30 day(s) retail
OPSITE FLEXIGRID 4"X4-3/4" MISC	F	1 max fill(s) per 30 day(s) retail	TEGADERM + PAD 6"X6" MISC	F	1 max fill(s) per 30 day(s) retail
OPSITE FLEXIGRID 4-3/4"X10" MISC	F	1 max fill(s) per 30 day(s) retail	TEGADERM ABSORBENT DRESSING MISC	F	1 max fill(s) per 30 day(s) retail
OPSITE FLEXIGRID 6"X8" MISC	F	1 max fill(s) per 30 day(s) retail	TEGADERM FILM 2-3/8"X2-3/4" MISC	F	1 max fill(s) per 30 day(s) retail
OPSITE IV 3000 MISC	F	1 max fill(s) per 30 day(s) retail	TEGADERM FILM 4"X10" MISC	F	1 max fill(s) per 30 day(s) retail
OPSITE POST-OP 10"X4" MISC	F	1 max fill(s) per 30 day(s) retail	TEGADERM FILM 4"X4-1/2" MISC	F	1 max fill(s) per 30 day(s) retail
OPSITE POST-OP 13-3/4"X4" MISC	F	1 max fill(s) per 30 day(s) retail	TEGADERM FILM 4"X4-3/4" MISC	F	1 max fill(s) per 30 day(s) retail
OPSITE POST-OP 4-3/4"X4" MISC	F	1 max fill(s) per 30 day(s) retail	TEGADERM FILM 6"X8" MISC	F	1 max fill(s) per 30 day(s) retail
OPSITE POST-OP 8"X4" MISC	F	1 max fill(s) per 30 day(s) retail	TEGADERM FILM 8"X12" MISC	F	1 max fill(s) per 30 day(s) retail
OPSITE POST-OP VISIBLE 10"X4" MISC	F	1 max fill(s) per 30 day(s) retail	TEGADERM HP 2-1/8"X2-1/2" MISC	F	1 max fill(s) per 30 day(s) retail
OPSITE POST-OP VISIBLE 4X3-1/8 MISC	F	1 max fill(s) per 30 day(s) retail	TEGADERM HP 2-3/8"X2-3/4" MISC	F	1 max fill(s) per 30 day(s) retail
OPSITE POST-OP VISIBLE 6"X4" MISC	F	1 max fill(s) per 30 day(s) retail	TEGADERM HP 2-3/8"X2-3/8" MISC	F	1 max fill(s) per 30 day(s) retail
OPSITE POST-OP VISIBLE MISC	F	1 max fill(s) per 30 day(s) retail	TEGADERM HP 4"X4-1/2" MISC	F	1 max fill(s) per 30 day(s) retail
POLYSKIN II DRESSING 2"X2.75" MISC	F	1 max fill(s) per 30 day(s) retail	TEGADERM HP 4"X4-3/4" MISC	F	1 max fill(s) per 30 day(s) retail
TEGADERM + PAD 2"X2-3/4" MISC	F	1 max fill(s) per 30 day(s) retail	TEGADERM HP 4-1/2"X4-3/4" MISC	F	1 max fill(s) per 30 day(s) retail
TEGADERM + PAD 2-3/8"X4" MISC	F	1 max fill(s) per 30 day(s) retail	TEGADERM HP 5-1/2"X6-1/2" MISC	F	1 max fill(s) per 30 day(s) retail
TEGADERM + PAD 3-1/2"X10" MISC	F	1 max fill(s) per 30 day(s) retail	TEGADERM I.V. 2"X2-1/4" MISC	F	1 max fill(s) per 30 day(s) retail
TEGADERM + PAD 3-1/2"X13-3/4" MISC	F	1 max fill(s) per 30 day(s) retail	TEGADERM I.V. 2-3/4"X3-1/4" MISC	F	1 max fill(s) per 30 day(s) retail
TEGADERM + PAD 3-1/2"X4" MISC	F	1 max fill(s) per 30 day(s) retail	TEGADERM I.V. 3-1/2"X4-1/2" MISC	F	1 max fill(s) per 30 day(s) retail
TEGADERM + PAD 3-1/2"X4-1/8" MISC	F	1 max fill(s) per 30 day(s) retail	TEGADERM I.V. 3-1/2"X4-1/4" MISC	F	1 max fill(s) per 30 day(s) retail

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TEGADERM I.V. ADVANCED MISC	F	1 max fill(s) per 30 day(s) retail	FC2 FEMALE CONDOM	F	3 max fill(s) per 60 day(s) retail
TEGADERM ROLL 2"X11YD MISC	F	1 max fill(s) per 30 day(s) retail	KAMELEON LUBRICATED MISC	F	3 max fill(s) per 60 day(s) retail
TEGADERM ROLL 4"X11YD MISC	F	1 max fill(s) per 30 day(s) retail	KIMONO COLORS DEVI	F	3 max fill(s) per 60 day(s) retail
TEGADERM ROLL 6"X11YD MISC	F	1 max fill(s) per 30 day(s) retail	KIMONO MAXX-LARGE FLARE MISC	F	3 max fill(s) per 60 day(s) retail
TELFA CLEAR DRESSING 39"X25YD MISC	F	1 max fill(s) per 30 day(s) retail	KIMONO MICRO THIN PLUS MISC	F	3 max fill(s) per 60 day(s) retail
TELFA CLEAR WOUND 12"X12" PADS	F	1 max fill(s) per 30 day(s) retail	KIMONO MICRO THIN MISC	F	3 max fill(s) per 60 day(s) retail
TELFA CLEAR WOUND 12"X24" MISC	F	1 max fill(s) per 30 day(s) retail	KIMONO PLUS MISC	F	3 max fill(s) per 60 day(s) retail
TELFA CLEAR WOUND 3"X3" PADS	F	1 max fill(s) per 30 day(s) retail	KIMONO PS PLUS MISC	F	3 max fill(s) per 60 day(s) retail
TELFA CLEAR WOUND 4"X5" PADS	F	1 max fill(s) per 30 day(s) retail	KIMONO PS MISC	F	3 max fill(s) per 60 day(s) retail
TRANS WATERPROOF DRESSINGS MISC	F	1 max fill(s) per 30 day(s) retail	KIMONO SENSATION PLUS MISC	F	3 max fill(s) per 60 day(s) retail
TRANSPARENT FILM DRESSING MISC	F	1 max fill(s) per 30 day(s) retail	KIMONO SENSATION MISC	F	3 max fill(s) per 60 day(s) retail
Contraceptives			KIMONO SPECIAL DEVI	F	3 max fill(s) per 60 day(s) retail
AIMSCO LUBRICATED MISC	F	3 max fill(s) per 60 day(s) retail	KIMONO MISC	F	3 max fill(s) per 60 day(s) retail
CAYA DPRH	F	2 max fill(s) per 180 day(s) retail	K-Y ME & YOU EXTRA LUBRICATED DEVI	F	3 max fill(s) per 60 day(s) retail
DUREX EXTRA SENSITIVE THIN DEVI	F	3 max fill(s) per 60 day(s) retail	K-Y ME & YOU INTENSE DEVI	F	3 max fill(s) per 60 day(s) retail
DUREX EXTRA SENSITIVE THIN MISC	F	3 max fill(s) per 60 day(s) retail	MAXX PLUS MISC	F	3 max fill(s) per 60 day(s) retail
DUREX REALFEEL	F	3 max fill(s) per 60 day(s) retail	MAXX MISC	F	3 max fill(s) per 60 day(s) retail
DUREX TROPICAL MISC	F	3 max fill(s) per 60 day(s) retail	OMNIFLEX DIAPHRAGM	F	2 max fill(s) per 180 day(s) retail
FANTASY LUBRICATED/SPERMICI DE MISC	F	3 max fill(s) per 60 day(s) retail	REALITY LATEX CONDOMS MISC	F	3 max fill(s) per 60 day(s) retail
FANTASY LUBRICATED MISC	F	3 max fill(s) per 60 day(s) retail	REALITY LATEX/ULTRA TEXTURED DEVI	F	3 max fill(s) per 60 day(s) retail
			REALITY LATEX/ULTRA THIN DEVI	F	3 max fill(s) per 60 day(s) retail
			TROJAN ENZ MISC	F	3 max fill(s) per 60 day(s) retail

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TROJAN MAGNUM MISC	F	3 max fill(s) per 60 day(s) retail	TRUSTEX-NONOXYNOL-9/RIB/STUD MISC	F	3 max fill(s) per 60 day(s) retail
TROJAN ULTRA THIN/SPERMICIDAL MISC	F	3 max fill(s) per 60 day(s) retail	WIDE-SEAL DIAPHRAGM 60	F	2 max fill(s) per 180 day(s) retail
TROJAN ULTRA THIN MISC	F	3 max fill(s) per 60 day(s) retail	WIDE-SEAL DIAPHRAGM 65	F	2 max fill(s) per 180 day(s) retail
TROJAN-ENZ LUBRICATED MISC	F	3 max fill(s) per 60 day(s) retail	WIDE-SEAL DIAPHRAGM 70	F	2 max fill(s) per 180 day(s) retail
TROJAN-ENZ/SPERMICIDAL MISC	F	3 max fill(s) per 60 day(s) retail	WIDE-SEAL DIAPHRAGM 75	F	2 max fill(s) per 180 day(s) retail
TRUE COVER DEVI	F	3 max fill(s) per 60 day(s) retail	WIDE-SEAL DIAPHRAGM 80	F	2 max fill(s) per 180 day(s) retail
TRUSTEX COLOR CONDOMS + LUBE MISC	F	3 max fill(s) per 60 day(s) retail	WIDE-SEAL DIAPHRAGM 85	F	2 max fill(s) per 180 day(s) retail
TRUSTEX LUB/RIBBED/STUDDERED MISC	F	3 max fill(s) per 60 day(s) retail	WIDE-SEAL DIAPHRAGM 90	F	2 max fill(s) per 180 day(s) retail
TRUSTEX LUB/SPERMICIDE EX ST MISC	F	3 max fill(s) per 60 day(s) retail	WIDE-SEAL DIAPHRAGM 95	F	2 max fill(s) per 180 day(s) retail
TRUSTEX LUB/SPERMICIDE XL MISC	F	3 max fill(s) per 60 day(s) retail	Diabetic Supplies		
TRUSTEX LUBRICATED EX LARGE MISC	F	3 max fill(s) per 60 day(s) retail	ACCU-CHEK AVIVA SOLN	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA
TRUSTEX LUBRICATED EXTRA ST MISC	F	3 max fill(s) per 60 day(s) retail	ACCU-CHEK FASTCLIX LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
TRUSTEX LUBRICATED/SPERMICIDE MISC	F	3 max fill(s) per 60 day(s) retail	ACCU-CHEK GUIDE CONTROL LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA
TRUSTEX LUBRICATED MISC	F	3 max fill(s) per 60 day(s) retail	ACCU-CHEK GUIDE ME KIT	F	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); RX/OTC
TRUSTEX NATURAL CONDOMS + LUBE MISC	F	3 max fill(s) per 60 day(s) retail			
TRUSTEX NON-LUBRICATED MISC	F	3 max fill(s) per 60 day(s) retail			
TRUSTEX RIA LUB/SPERMICIDE MISC	F	3 max fill(s) per 60 day(s) retail			
TRUSTEX RIA LUBRICATED MISC	F	3 max fill(s) per 60 day(s) retail			
TRUSTEX RIA NON-LUBRICATED MISC	F	3 max fill(s) per 60 day(s) retail			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ACCU-CHEK GUIDE KIT	F	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); RX/OTC	ADVANCE MICRO-DRAW CONTROL LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA
ACCU-CHEK SAFE-T PRO LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	ADVANCE MICRO-DRAW NORMAL LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA
ACCU-CHEK SMARTVIEW CONTROL LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	ADVANCED MOBILE LANCET	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
ACCU-CHEK SOFTCLIX LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	ADVOCATE LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
ACCUTREND GLUCOSE CONTROL SOLN	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	ADVOCATE LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
ACTI-LANCE 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	ADVOCATE LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
ACTI-LANCE LITE LANCETS 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	ADVOCATE RAPID-SAFE LANCING MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
ACTI-LANCE SPECIAL LANCETS 17G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	ADVOCATE SAFETY LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
ACTI-LANCE UNIVERSAL 23G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	ADVOCATE SAFETY LANCETS 21G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
ADJUSTABLE LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	ADVOCATE SAFETY LANCETS 23G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ADVOCATE SAFETY LANCETS 26G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	ASSURE 4 CONTROL LEVEL 1 & 2 LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA
ADVOCATE SAFETY LANCETS 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	ASSURE COMFORT LANCETS 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
AGAMATRIX CONTROL LEVEL 2 SOLN	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	ASSURE DOSE NORM/HIGH CONTROL SOLN	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA
AGAMATRIX CONTROL LEVEL 4 SOLN	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	ASSURE HAEMOLANCE PLUS HIGH	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
AGAMATRIX CONTROL NORMAL/HIGH SOLN	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	ASSURE HAEMOLANCE PLUS LOW	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
AGAMATRIX ULTRA-THIN LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	ASSURE HAEMOLANCE PLUS MICRO	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
AIMSCO TWIST LANCETS 32G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	ASSURE HAEMOLANCE PLUS NORMAL	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
AIMSCO TWIST LANCETS 33G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	ASSURE HAEMOLANCE PLUS PED	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
AQUALANCE LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	ASSURE II CONTROL LEVEL 1 & 2 LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA
ASSURE 3 CONTROL LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	ASSURE II CONTROL LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA

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ASSURE LANCE LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	AUTO-LANCET MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
ASSURE LANCE LANCETS 21G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	AUTOLET LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
ASSURE LANCE PLUS SAFETY 25G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	AUTOLET LITE LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
ASSURE LANCE PLUS SAFETY 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	AUTOLET MINI MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
ASSURE LANCE SAFETY LANCET 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	AUTOLET PLATFORMS MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
ASSURE PRISM CONTROL LEVEL 1&2 SOLN	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	AUTOLET PLUS MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
ASSURE PRO CONTROL LEVEL 1 & 2 LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	BD MICROTAINER LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
AURORA LANCET SUPER THIN 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	BLULINK CONTROL HIGH & LOW LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA
AURORA LANCET THIN 23G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	CARDIOCOM LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
AUTO-LANCET MINI MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	CAREONE ADVANCED LANCING DEV MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
			CAREONE LANCET SUPER THIN 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC

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CAREONE LANCET THIN 23G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	CARETOUCH TWIST LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
CARESENS CONTROL A SOLN	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	CARETOUCH TWIST LANCETS 33G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
CARESENS CONTROL SOLUTION A/B SOLN	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	CARETOUCH TWIST MC LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
CARESENS LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	CHOSEN LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
CARESENS LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	CHOSEN LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
CARETOUCH CONTROL SOL LEVEL 2 LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	CHOSEN SAFETY LANCETS 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
CARETOUCH LANCING/EJECTOR MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	CLEANLET LANCETS 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
CARETOUCH SAFETY LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	CLEVER CHEK LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
CARETOUCH SAFETY LANCETS 26G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	CLEVER CHOICE COMFORT EZ	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
CARETOUCH TWIST LANCETS 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	CLEVER CHOICE LANCETS 21G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CLEVER CHOICE LANCETS 23G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	COOL CONTROL B SOLN	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA
CLEVER CHOICE LANCETS 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	CVS LANCETS ORIGINAL	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
COAGUCHEK LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	CVS LANCETS THIN 26G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
COMFORT ASSURED LANCETS 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	CVS LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
COMFORT ASSURED LANCETS 33G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	CVS ULTRA THIN LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
COMFORT TOUCH LANCETS 31G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	DIASCREEN 10 MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
COMFORT TOUCH PLUS LANCETS 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	DIASCREEN 1B MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
COMFORT TOUCH PLUS LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	DIASCREEN 1G STRP	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
COMFORT TOUCH TWIST LANCET 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	DIASCREEN 1K MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
COOL CONTROL A SOLN	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	DIASCREEN 1K STRP	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
			DIASCREEN 2GK STRP	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
DIASCREEN 2GP MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	DIATHRIVE LANCET ULTRA THIN 30	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
DIASCREEN 3 MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	DIATHRIVE LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
DIASCREEN 4NL MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	DIATHRIVE LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
DIASCREEN 4OBL MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	DROPLET GENTEEL LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
DIASCREEN 4PH MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	DROPLET LANCETS ULTRA THIN 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
DIASCREEN 5 MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	DROPLET LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
DIASCREEN 6 MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	DROPLET PERSONAL LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
DIASCREEN 7 MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	DROPSAFE ACTI-LANCE 23G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
DIASCREEN 8 MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	DRUG MART LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
DIASCREEN 9 MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	DRUG MART ON-THE-GO LANCET 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
DIASCREEN LIQUID URINE CONTROL MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail			
DIATHRIVE GLUCOSE CONTROL SOLN LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
DRUG MART UNILET LANCETS 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	EASY TOUCH LANCETS 21G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
DRUG MART UNILET LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	EASY TOUCH LANCETS 23G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
DRUG MART UNILET LANCETS 33G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	EASY TOUCH LANCETS 26G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
DUO-CARE CONTROL SOLUTION LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	EASY TOUCH LANCETS 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
EASY COMFORT LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	EASY TOUCH LANCETS 28G/TWIST	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
EASY COMFORT LANCETS TWIST TOP	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	EASY TOUCH LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
EASY MINI EJECT LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	EASY TOUCH LANCETS 30G/TWIST	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
EASY MINI LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	EASY TOUCH LANCETS 32G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
EASY TOUCH CONTROL HIGH & LOW SOLN	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	EASY TOUCH LANCETS 32G/TWIST	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
EASY TOUCH HEALTHPRO HIGH/LOW LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	EASY TOUCH LANCETS 33G/TWIST	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
EASY TOUCH LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	EMBRACE LANCETS ULTRA THIN 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
EASY TOUCH SAFETY LANCETS 21G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	EMBRACE LANCING DEVICE/EJECTOR MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
EASY TOUCH SAFETY LANCETS 23G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	EMBRACE PRESSURE ACTIVATED 21G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
EASY TOUCH SAFETY LANCETS 26G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	EMBRACE PRESSURE ACTIVATED 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
EASY TOUCH SAFETY LANCETS 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	EMBRACE PRO GLUCOSE CONTROL LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA
EASYMAX 15 LEVEL 2 CONTROL SOLN	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	EZ-LETS LANCETS 21G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
EASYMAX 15 LEVEL 2-3 CONTROL LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	EZ-LETS LANCETS 26G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
EASYMAX CONTROL NORMAL/HIGH LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	EZ-LETS LANCETS 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
ELEMENT COMPACT CONTROL 2 SOLN	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	EZ-LETS LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
ELEMENT COMPACT CONTROL 3 SOLN	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	FIFTY50 SAFETY SEAL LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FIFTY50 UNILET LANCETS 33G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	FREESTYLE LIBRE 2 READER	F	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); PA
FINE 30	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	FREESTYLE LIBRE 2 SENSOR	F	QL(2 EA per 28 day(s) retail; 2 EA per 28 days mail); PA
FINGERSTIX LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	FREESTYLE LIBRE 3 PLUS SENSOR	F	QL(2 EA per 28 day(s) retail; 2 EA per 28 days mail); PA
FORA LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	FREESTYLE LIBRE 3 READER	F	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); PA
FORA LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	FREESTYLE LIBRE 3 SENSOR	F	QL(2 EA per 28 day(s) retail; 2 EA per 28 days mail); PA
FREESTYLE CONTROL SOLUTION LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	FREESTYLE LIBRE READER	F	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); PA
FREESTYLE LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	FREESTYLE UNISTICK II LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
FREESTYLE LIBRE 14 DAY READER	F	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); PA	GENTEEL BUTTERFLY TOUCH LANCET	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
FREESTYLE LIBRE 14 DAY SENSOR	F	QL(2 EA per 28 day(s) retail; 2 EA per 28 days mail); PA	GENTEEL CONTACT TIPS (BLUE) MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
FREESTYLE LIBRE 2 PLUS SENSOR	F	QL(2 EA per 28 day(s) retail; 2 EA per 28 days mail); PA	GENTEEL CONTACT TIPS (CLEAR) MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
			GENTEEL CONTACT TIPS (GREEN) MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
GENTEEL CONTACT TIPS (ORANGE) MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	GENTLE-LET PLATFORMS MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
GENTEEL CONTACT TIPS (RAINBOW) MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	GLOBAL INJECT EASE LANCETS 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
GENTEEL CONTACT TIPS (VIOLET) MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	GLOBAL INJECT EASE LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
GENTEEL CONTACT TIPS (YELLOW) MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	GLOBAL LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
GENTEEL NOZZLES MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	GLUCOCARD 01 CONTROL LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA
GENTEEL PLUS LANCING (BLACK) MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	GLUCOCARD EXPRESSION CONTROL SOLN	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA
GENTEEL PLUS LANCING (PURPLE) MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	GLUCOCARD SHINE CONTROL SOLN	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA
GENTEEL PLUS LANCING (WHITE) MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	GLUCOCOM LANCETS 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
GENTEEL PLUS LANCING DEV(BLUE) MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	GLUCOCOM LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
GENTEEL PLUS LANCING DEV(PINK) MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	GLUCOCOM LANCETS 33G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
GENTLE-LET GP LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC			
GENTLE-LET LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
GLUCOSE CONTROL SOLN	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	HAEMOLANCE LOW FLOW LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
GNP EASY TOUCH CONT HIGH/LOW LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	HAEMOLANCE PLUS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
GNP EASY TOUCH CONT HIGH/LOW SOLN	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	HAEMOLANCE PLUS HIGH FLOW	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
GNP LANCING SYSTEM DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	HAEMOLANCE PLUS LOW FLOW	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
GNP STERILE LANCETS 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	HAEMOLANCE PLUS MAX FLOW	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
GNP STERILE LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	HAEMOLANCE PLUS PEDIATRIC FLOW	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
GNP STERILE LANCETS 33G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	H-E-B INCONTROL ADV LANCING MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
GOJJI LANCING DEVICE/CLEAR CAP MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	H-E-B INCONTROL LANCETS 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
GOJJI STERILE LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	H-E-B INCONTROL LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
HAEMOLANCE	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	H-E-B INCONTROL LANCETS 33G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
HY-VEE LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	KROGER HEALTHPRO CONTROL HI/LO LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA
HY-VEE THIN LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	KROGER HEALTHPRO LANCET 26G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
IHEALTH CONTROL SOLUTION LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	KROGER LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
IHEALTH LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	KROGER LANCETS SUPER THIN	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
IN TOUCH GLUCOSE CONTROL SOLN	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	KROGER LANCETS THIN	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
IN TOUCH LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	LANCET DEVICE WITH EJECTOR MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
IN TOUCH STERILE LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	LANCET DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
KINNEY LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	LANCET TRANSPORTER CASE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
KINNEY THIN LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
KROGER AUTOLET LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	LANCETS 28G THIN	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	LEADER ADVANCED LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
LANCETS 33G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	LIBERTY GLUCOSE CONTROL MID SOLN	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA
LANCETS MICRO THIN 33G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	LIBERTY MEDICAL LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
LANCETS SUPER THIN	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	LIBERTY MINI LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
LANCETS SUPER THIN 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	LITE TOUCH LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
LANCETS THIN	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	LITE TOUCH LANCING PEN MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
LANCETS ULTRA THIN	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	LITETOUCH LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
LANCETS ULTRA THIN 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	LIVE BETTER LANCET SUPER THIN	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	MEDICHOICE SAFETY LANCET	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
LANZO MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	MEDICHOICE SAFETY LANCET EXTRA	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC

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MEDICHOICE SAFETY LANCET NORM	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	MEDLANCE PLUS UNIVERSAL 21G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
MEDISENSE GLUCOSE KETONE CONTR LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	MEDLANCE UNIVERSAL 21G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
MEDISENSE HI/MID/LOW CONTROL LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	MEIJER LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
MEDLANCE EXTRA 21G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	MEIJER LANCETS UNIVERSAL 21G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
MEDLANCE LITE 25G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	MEIJER LANCETS UNIVERSAL 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
MEDLANCE PLUS EXTRA 21G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	MEIJER LANCETS UNIVERSAL 33G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
MEDLANCE PLUS LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	MICRODOT CONTROL HIGH/LOW SOLN	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA
MEDLANCE PLUS LITE 25G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	MICROLET LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
MEDLANCE PLUS SPECIAL 0.8MM	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	MICROLET NEXT LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
MEDLANCE PLUS SUPERLITE 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	MINI LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail

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MM LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	MULTI-LANCET DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
MM TWIST LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	MYGLUCOHEALTH CONTROL SOLN	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA
MOBILE LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	MYGLUCOHEALTH LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
MONOLET LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	NEUTEK 2TEK CONTROL SOLN	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA
MONOLET OPD LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	NOVA MAX PLUS GLU/KET CONTROL LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA
MONOLETTOR SAFETY LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	NOVA SAFETY LANCETS 23G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
MPD SAFETY LANCET 21G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	NOVA SAFETY LANCETS 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
MPD SAFETY LANCET 23G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	NOVA SUREFLEX LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
MPD SAFETY LANCET 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	NOVA SUREFLEX LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
MPD SAFETY LANCET 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	ONETOUCH DELICA PLUS LANCET30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC

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ONETOUCH DELICA PLUS LANCET33G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	PIP GLUCOSE CONTROL SOLUTION LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA
ONETOUCH DELICA PLUS LANCING MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	PIP LANCETS 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
ONETOUCH DELICA SAFETY LANCING	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	PIP LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
ONETOUCH ULTRA CONTROL LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	POCKETCHEM EZ CONTROL SOLN	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA
ONETOUCH ULTRASOFT 2 LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	PRECISION GLUCOSE KETONE CONTR LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA
ONETOUCH VERIO LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	PRECISION THINS GP LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
PERFECT LANCETS 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	PRO COMFORT LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
PERFECT LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	PRO COMFORT LANCETS 31G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
PERFECT POINT SAFETY LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	PRO COMFORT SAFETY LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
PHARMACIST CHOICE LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	PRODIGY LANCETS 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PRODIGY LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	PX LANCETS ULTRA THIN 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
PRODIGY SAFETY LANCETS 26G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	QC ADVANCED LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
PRODIGY TWIST TOP LANCETS 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	QC LANCETS SUPER THIN 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
PSS SELECT GP LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	QC LANCETS ULTRA THIN	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
PSS SELECT PLATFORMS MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	QC UNILET LANCETS 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
PSS SELECT SAFETY LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	QC UNILET LANCETS MICRO THIN	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
PURE COMFORT LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	QUICKTEK CONTROL SOLUTION LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA
PX ADVANCED LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	QUINTET CONTROL HIGH/NORMAL SOLN	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA
PX LANCET AUTO INJECTOR MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	READYLANCE SAFETY LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
PX LANCETS MICROTHIN 33G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	REALITY LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC

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REALITY TRIGGER LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	RIGHTEST ALTERNATE SITE ADAPT MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
REFUAH PLUS GLUCOSE CONTROL SOLN	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	RIGHTEST GD500 LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
RELION LANCET DEVICES 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	RIGHTEST GL300 LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
RELION LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	SAFE-T-LANCE	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
RELION LANCETS MICRO-THIN 33G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	SAFE-T-LANCE PLUS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
RELION LANCETS THIN 26G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	SAFETY LANCET 30G/PRESSURE ACT	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
RELION LANCETS ULTRA-THIN 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	SAFETY LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
RELION LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	SAFETY LANCETS 21G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
RELION TRUE MET AIR GLUC METER KIT	F	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); RX/OTC	SAFETY LANCETS 23G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
RELION ULTRA THIN LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	SAFETY LANCETS 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SAPS HEALTH PLUS LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	SMART DIABETES VANTAGE LANCING MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
SAPS HEALTH TWIST TOP LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	SMARTEST CONTROL MEDIUM SOLN	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA
SAPS TWIST TOP LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	SMARTEST LANCETS 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
SAPSCARE TWIST TOP LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	SOLUS V2 LANCETS 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
SB LANCETS THIN	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	SOLUS V2 LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
SB LANCETS ULTRA THIN	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	SOLUS V2 TWIST LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
SELECT-LITE LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	STERILANCE PA MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
SIMPLE DIAGNOSTICS LANCING DEV MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	STERILANCE TL	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
SINGLE-LET	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	SUPER THIN LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
SM TRUEDRAW LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	SUPREME II HIGH/LOW CONTROL LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA

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SURE COMFORT LANCETS 18G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	TECHLITE LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
SURE COMFORT LANCETS 21G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	THINLETS GP LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
SURE COMFORT LANCETS 23G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	TODAYS HEALTH LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
SURE COMFORT LANCETS 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	TODAYS HEALTH THIN LANCETS 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
SURE COMFORT LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	TODAYS HEALTH THIN LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
SURE COMFORT LANCING PEN MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	TRAVEL LANCETS ADVANCED 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
SURELITE LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	TRUE COMFORT SAFETY LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
TECHLITE AST LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	TRUE COMFORT TWIST TOP LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
TECHLITE LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	TRUE METRIX AIR GLUCOSE METER KIT	F	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); RX/OTC
TECHLITE LANCETS 26G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	TRUE METRIX GO GLUCOSE METER KIT	F	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TRUE METRIX METER KIT	F	QL(1 EA per 365 day(s) retail; 1 EA per 365 days mail); RX/OTC	ULTI-LANCE AUTOMATIC MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
TRUECONTROL GLUCOSE CONT LEV 0 LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	ULTILET CLASSIC LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
TRUECONTROL GLUCOSE CONT LEV 1 LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	ULTILET LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
TRUEDRAW LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	ULTILET SAFETY LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
TRUEPLUS LANCETS 26G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	ULTILET SAFETY LANCETS 23G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
TRUEPLUS LANCETS 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	ULTRA THIN LANCETS 31G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
TRUEPLUS LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	ULTRA-CARE LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
TRUEPLUS LANCETS 33G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	ULTRA-THIN II AUTO LANCET	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
TRUEPLUS SAFETY LANCETS 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	ULTRA-THIN II LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
TWIST TOP LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	UNILET COMFORTOUCH LANCET	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC

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UNILET EXCELITE	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	UNISTIK 1	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
UNILET EXCELITE II	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	UNISTIK 2	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
UNILET G.P. LANCET	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	UNISTIK 2 COMFORT	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
UNILET G.P. SUPERLITE LANCET	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	UNISTIK 2 EXTRA	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
UNILET GP 28 ULTRA THIN	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	UNISTIK 2 NEONATAL	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
UNILET LANCET	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	UNISTIK 2 NORMAL	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
UNILET MICRO-THIN 33G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	UNISTIK 2 SUPER	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
UNILET SUPERLITE LANCET	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	UNISTIK 3	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
UNILET SUPER-THIN 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	UNISTIK 3 COMFORT	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
UNILET ULTRA-THIN 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	UNISTIK 3 EXTRA	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC

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UNISTIK 3 GENTLE	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	UNISTIK TOUCH SAFETY LANC 23G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
UNISTIK 3 NEONATAL	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	UNISTIK TOUCH SAFETY LANC 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
UNISTIK 3 NORMAL	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	UNISTIK TOUCH SAFETY LANC 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
UNISTIK CZT COMFORT	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	VERASENS GLUCOSE CONTROL LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA
UNISTIK CZT NORMAL	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	VERIFINE SAFE LANCET MINI 21G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
UNISTIK NORMAL	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	VERIFINE SAFE LANCET MINI 23G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
UNISTIK PRO SAFETY LANCET	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	VERIFINE SAFE LANCET MINI 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
UNISTIK SAFETY LANCETS 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	VERIFINE SAFE LANCET MINI 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
UNISTIK SAFETY LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	VERIFINE UNIVERSAL LANCETS 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC
UNISTIK TOUCH SAFETY LANC 21G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	VERIFINE UNIVERSAL LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
VERIFINE UNIVERSAL LANCETS 33G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	ALCOHOL PREP PADS	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC
VIVAGUARD INO CONTROL SOLUTION LIQD	F	QL(1 EA per 30 day(s) retail); 2 max fill(s) per 30 day(s) retail; PA	ALCOHOL SWABS	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC
VIVAGUARD LANCETS	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	ALCOHOL SWABSTICK	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC
VIVAGUARD LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	ALCOH-WIPE	F	3 max fill(s) per 60 day(s) retail
VIVAGUARD LANCING DEVICE MISC	F	QL(2 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail	AUM ALCOHOL PREP PADS	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC
VIVAGUARD SAFETY LANCETS 28G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	BD SWAB SINGLE USE REGULAR	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC
ZEVRX TWIST TOP LANCETS 30G	F	QL(300 EA per 30 day(s) retail; 900 EA per 90 days mail); MP; RX/OTC	CARETOUCH ALCOHOL PREP	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC
Misc. Devices			COMFORT TOUCH ALCOHOL PREP	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC
ADVOCATE ALCOHOL PREP PADS	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC	CURITY ALCOHOL PREPS	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC
ALCOH-GLOVE CONTOURED WIPE	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC	CVS ALCOHOL PREP PADS	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC
ALCOHOL PADS	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC	CVS PREP	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC
ALCOHOL PREP	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC	DROPSAFE ALCOHOL PREP	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC
			EASY COMFORT ALCOHOL PADS	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC
			EASY TOUCH ALCOHOL PREP MEDIUM	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC
			EQL ALCOHOL SWABS	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC
			ESSENTRA WIPES 9X9"	F	3 max fill(s) per 60 day(s) retail
			FIFTY50 ALCOHOL PREP	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC

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GLOBAL ALCOHOL PREP EASE	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC	SB ALCOHOL PREP	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC
GNP ALCOHOL SWABS	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC	SM ALCOHOL PREP	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC
GOODSENSE ALCOHOL SWABS	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC	SURE COMFORT ALCOHOL PREP	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC
H-E-B INCONTROL ALCOHOL	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC	TRUE COMFORT ALCOHOL PREP PADS	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC
HM STERILE ALCOHOL PREP	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC	TRUE COMFORT PRO ALCOHOL PREP	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC
MEIJER ALCOHOL SWABS	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC	ULTICARE ALCOHOL SWABS	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC
PHARMACIST CHOICE ALCOHOL	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC	ULTILET ALCOHOL SWABS	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC
PRO COMFORT ALCOHOL	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC	ULTRA-CARE ALCOHOL PREP PADS	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC
PURE COMFORT ALCOHOL PREP	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC	WEBCOL ALCOHOL PREP LARGE	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC
QC ALCOHOL SWABS	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC	WEBCOL ALCOHOL PREP MEDIUM	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC
RA ALCOHOL SWABS	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC	ZEVRX STERILE ALCOHOL PREP PAD	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC
REALITY SWABS	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC	Parenteral Therapy Supplies		
RELION ALCOHOL SWABS	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC	ADVOCATE INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
SAPS CARE ALCOHOL PREP	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC	AQ INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
SAPS HEALTH ALCOHOL PREP	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC	ASSURE ID INSULIN SAFETY SYR	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
SAPS HEALTH CARE ALCOHOL PREP	F	3 max fill(s) per 60 day(s) retail; MP; RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits
BARDIA BULB IRRIGATION SYRINGE	F	QL(200 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail; RX/OTC
BARDIA PISTON IRRIGATION SYR	F	QL(200 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail; RX/OTC
BD ALLERGIST TRAY KIT	F	QL(200 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail; RX/OTC
BD ALLERGY SYRINGE MISC	F	QL(200 EA per fill retail); 3 max fill(s) per 60 day(s) retail; RX/OTC
BD BLUNT FILL NEEDLE	F	RX/OTC
BD BLUNT FILL NEEDLE W/FILTER	F	RX/OTC
BD CONTROL SYRING LUER-LOK	F	QL(200 EA per fill retail); 3 max fill(s) per 60 day(s) retail; RX/OTC
BD DISP NEEDLE	F	RX/OTC
BD DISP NEEDLES	F	RX/OTC
BD ECLIPSE LUER-LOK NEEDLE	F	RX/OTC
BD ECLIPSE NEEDLE	F	RX/OTC
BD ECLIPSE SHIELDED NEEDLE	F	RX/OTC
BD ECLIPSE SYRINGE	F	RX/OTC
BD ECLIPSE SYRINGE/NEEDLE	F	RX/OTC
BD FILTER NEEDLE/5 MICRON	F	RX/OTC
BD HYPODERMIC NEEDLE	F	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
BD INS SYR ULTRAFINE 1/2UNIT	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
BD INSULIN SYR ULTRAFINE II	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
BD INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
BD INSULIN SYRINGE	F	QL(200 EA per fill retail); 3 max fill(s) per 60 day(s) retail; RX/OTC
BD INSULIN SYRINGE HALF-UNIT	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
BD INSULIN SYRINGE MICROFINE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
BD INSULIN SYRINGE U/F	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
BD INSULIN SYRINGE ULTRAFINE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP
BD INTEGRA NEEDLE	F	RX/OTC
BD INTEGRA SYRINGE	F	RX/OTC
BD LUER-LOCK SYRINGE	F	RX/OTC
BD LUER-LOK SYRINGE	F	RX/OTC
BD LUER-LOK SYRINGE	F	QL(200 EA per fill retail); 3 max fill(s) per 60 day(s) retail; RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits
BD NOKOR ADMIX NEEDLE	F	RX/OTC
BD PEN NEEDLE MICRO ULTRAFINE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP
BD PEN NEEDLE MINI ULTRAFINE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
BD PEN NEEDLE NANO 2ND GEN	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
BD PEN NEEDLE NANO ULTRAFINE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
BD PEN NEEDLE ORIG ULTRAFINE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP
BD PEN NEEDLE SHORT ULTRAFINE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
BD PLASTIPAK SYRINGE	F	RX/OTC
BD PRECISIONGLIDE NEEDLE	F	RX/OTC
BD SAFETYGLIDE ALLERGY SYRINGE MISC	F	RX/OTC
BD SAFETYGLIDE INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
BD SAFETYGLIDE NEEDLE	F	RX/OTC
BD SAFETYGLIDE SHIELDED NEEDLE	F	RX/OTC
BD SAFETYGLIDE SYRINGE/NEEDLE	F	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
BD SYRINGE	F	QL(200 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
BD SYRINGE BLUNT CANNULA 17G	F	QL(200 EA per fill retail); 3 max fill(s) per 60 day(s) retail; RX/OTC
BD SYRINGE DISPOSABLE	F	QL(200 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
BD SYRINGE DUAL CANNULA	F	QL(200 EA per fill retail); 3 max fill(s) per 60 day(s) retail; RX/OTC
BD SYRINGE LUER SLIP TIP	F	QL(200 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail
BD SYRINGE LUER SLIP TIP	F	RX/OTC
BD SYRINGE LUER-LOK	F	QL(200 EA per fill retail); 3 max fill(s) per 60 day(s) retail; RX/OTC
BD SYRINGE LUER-LOK	F	RX/OTC
BD SYRINGE SLIP TIP	F	QL(200 EA per fill retail); 3 max fill(s) per 60 day(s) retail; RX/OTC
BD SYRINGE SLIP TIP	F	RX/OTC
BD SYRINGE/NEEDLE	F	RX/OTC
BD TB SYRINGE MISC	F	RX/OTC
BD VEO INSULIN SYR ULTRAFINE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CAREONE INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP	CARETOUCH HYPODERMIC NEEDLE	F	RX/OTC
CAREPOINT POLY HUB NEEDLE	F	RX/OTC	CARETOUCH INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
CAREPOINT SAFETY 1ST NEEDLE	F	RX/OTC	CARETOUCH INSULIN SYRINGE	F	QL(200 EA per fill retail); 3 max fill(s) per 60 day(s) retail
CAREPOINT SAFETY1ST SYR/NEEDLE	F	RX/OTC	CARETOUCH LUER LOCK	F	RX/OTC
CAREPOINT SYRINGE CATHETER TIP	F	QL(200 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail; RX/OTC	CARETOUCH LUER LOCK	F	QL(200 EA per fill retail); 3 max fill(s) per 60 day(s) retail; RX/OTC
CAREPOINT SYRINGE LUER LOCK	F	QL(200 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail; RX/OTC	CARETOUCH LUER LOCK SYR/NEEDLE	F	RX/OTC
CAREPOINT SYRINGE LUER LOCK	F	QL(200 EA per fill retail); 3 max fill(s) per 60 day(s) retail; RX/OTC	CARETOUCH LUER SLIP	F	RX/OTC
CAREPOINT SYRINGE LUER LOCK	F	RX/OTC	CARETOUCH LUER SLIP	F	QL(200 EA per fill retail); 3 max fill(s) per 60 day(s) retail; RX/OTC
CAREPOINT SYRINGE LUER SLIP	F	QL(200 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail; RX/OTC	COMFORT EZ INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
CAREPOINT SYRINGE LUER SLIP	F	QL(200 EA per fill retail); 3 max fill(s) per 60 day(s) retail; RX/OTC	DROPLET INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
CAREPOINT TUBERCLN SYR/LUER SL MISC	F	RX/OTC	DROPSAFE SAFETY SYRINGE/NEEDLE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
CARETOUCH CATHETER TIP SYRINGE	F	QL(200 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail; RX/OTC	DROPSAFE SICURA	F	RX/OTC
			EASY COMFORT INSULIN SYRINGE	F	QL(200 EA per fill retail); 3 max fill(s) per 60 day(s) retail

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
EASY COMFORT INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC	EASY TOUCH INSULIN BARRELS	F	QL(200 EA per fill retail); 3 max fill(s) per 60 day(s) retail; RX/OTC
EASY GLIDE CATH TIP SYRINGE	F	QL(200 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail; RX/OTC	EASY TOUCH INSULIN SAFETY SYR	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
EASY GLIDE LUER LOCK SYRINGE	F	RX/OTC	EASY TOUCH INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP
EASY GLIDE LUER LOCK SYRINGE	F	QL(200 EA per fill retail); 3 max fill(s) per 60 day(s) retail; RX/OTC	EASY TOUCH SAFETY SYRINGE	F	RX/OTC
EASY GLIDE LUER LOCK SYRINGE	F	QL(200 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail; RX/OTC	EASY TOUCH SHEATHLOCK SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
EASY GLIDE SLIP LOCK SYRINGE	F	QL(200 EA per fill retail); 3 max fill(s) per 60 day(s) retail; RX/OTC	EASY TOUCH SHEATHLOCK SYRINGE	F	RX/OTC
EASY TOUCH ALLERGY SYRINGE MISC	F	RX/OTC	EASY TOUCH SYRINGE BARREL	F	QL(200 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail; RX/OTC
EASY TOUCH FLIPLOCK INSULIN SY	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC	EASY TOUCH SYRINGE BARREL	F	RX/OTC
EASY TOUCH FLIPLOCK NEEDLES	F	RX/OTC	EASY TOUCH SYRINGE BARREL	F	QL(200 EA per fill retail); 3 max fill(s) per 60 day(s) retail; RX/OTC
EASY TOUCH FLIPLOCK SAFETY SYR	F		EASY TOUCH TB FLIPLOCK SYRINGE MISC	F	RX/OTC
EASY TOUCH FLURINGE	F	RX/OTC	EASY TOUCH TB FLIPLOCK SYRINGE MISC	F	QL(200 EA per fill retail); 3 max fill(s) per 60 day(s) retail; RX/OTC
EASY TOUCH FLURINGE FLIPLOCK	F	RX/OTC	EASY TOUCH TB SHEATHLOCK SYR MISC	F	QL(200 EA per fill retail); 3 max fill(s) per 60 day(s) retail; RX/OTC
EASY TOUCH FLURINGE SHEATHLOCK	F	RX/OTC			
EASY TOUCH HYPODERMIC NEEDLE	F	RX/OTC			

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Drug Name	Drug Tier	Requirements/ Limits
EASY TOUCH TB SHEATHLOCK SYR MISC	F	RX/OTC
EASYPPOINT NEEDLE	F	RX/OTC
EASYPPOINT NEEDLE/SYRINGE	F	RX/OTC
EMBECTA AUTOSHIELD DUO	F	QL(6 EA daily; 200 EA per fill retail); RX/OTC
EMBECTA INS SYR U/F 1/2 UNIT	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
EMBECTA INSULIN SYR ULTRAFINE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP
EMBECTA INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
EMBECTA INSULIN SYRINGE U-100	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP
EMBECTA PEN NEEDLE NANO	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
EMBECTA PEN NEEDLE NANO 2 GEN	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
EMBECTA PEN NEEDLE ULTRAFINE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP
FIFTY50 SUPERIOR COMFORT SYR	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
GLOBAL EASY GLIDE INSULIN SYR	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
GLOBAL INJECT EASE INSULIN SYR	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
GLOBAL INSULIN SYRINGES	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
GLUCOPRO INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
GNP INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
GNP INSULIN SYRINGES	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
GNP INSULIN SYRINGES 28GX1/2"	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
GNP INSULIN SYRINGES 29GX1/2"	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
GNP INSULIN SYRINGES 30GX5/16"	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
GNP INSULIN SYRINGES 31GX5/16"	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
GNP ULTRA COM INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC	MAGELLAN TUBERCULIN SYRINGE MISC	F	QL(200 EA per fill retail); 3 max fill(s) per 60 day(s) retail; RX/OTC
HEALTHWISE INSULIN SYR/NEEDLE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC	MAXI-COMFORT INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
HM ULTICARE INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC	MAXICOMFORT SYR 27G X 1/2"	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
HYPODERMIC NEEDLE	F	RX/OTC	MEDIC INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC	MM INSULIN SYRINGE/NEEDLE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
INSULIN SYRINGE-NEEDLE U-100	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC	MONOJECT ALLERGIST TRAY KIT	F	QL(200 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail; RX/OTC
KINRAY INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC	MONOJECT BLUNTIP CANNULA	F	RX/OTC
LITETOUCH INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC	MONOJECT BLUNTIP SYR/CANNULA	F	RX/OTC
LUER LOCK SAFETY SYRINGES	F	RX/OTC	MONOJECT FILTER ASPIRATOR	F	RX/OTC
MAGELLAN INSULIN SAFETY SYR	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC	MONOJECT HYPODERMIC NEEDLE	F	RX/OTC
MAGELLAN TUBERCULIN SYRINGE MISC	F	RX/OTC	MONOJECT INSULIN SYRINGE	F	QL(200 EA per fill retail); 3 max fill(s) per 60 day(s) retail; RX/OTC
			MONOJECT INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MONOJECT MAGELLAN SAFETY NDL	F	RX/OTC	MONOJECT SYRINGE LUER-LOCK TIP	F	QL(200 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail; RX/OTC
MONOJECT MAGELLAN SYRINGE	F	RX/OTC			
MONOJECT PHARMACY TRAY	F	QL(200 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail; RX/OTC	MONOJECT SYRINGE PHARMACY TRAY	F	QL(200 EA per fill retail); 3 max fill(s) per 60 day(s) retail; RX/OTC
MONOJECT PHARMACY TRAY	F	RX/OTC	MONOJECT SYRINGE REG LUER	F	RX/OTC
MONOJECT PHARMACY TRAY	F	QL(200 EA per fill retail); 3 max fill(s) per 60 day(s) retail; RX/OTC	MONOJECT SYRINGE REGULAR TIP	F	QL(200 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail; RX/OTC
MONOJECT SOFTPACK/LLOCK	F	QL(200 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail; RX/OTC	MONOJECT SYRINGE REGULAR TIP	F	RX/OTC
MONOJECT SOFTPACK/RG LUER	F	QL(200 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail; RX/OTC	MONOJECT SYRINGE TOOMEY TYPE	F	QL(200 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail; RX/OTC
MONOJECT SYRINGE	F	RX/OTC	MONOJECT TB SAFETY SYRINGE MISC	F	QL(200 EA per fill retail); 3 max fill(s) per 60 day(s) retail; RX/OTC
MONOJECT SYRINGE CATH TIP	F	QL(200 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail; RX/OTC	MONOJECT TB SAFETY SYRINGE MISC	F	RX/OTC
MONOJECT SYRINGE ECCENTRIC TIP	F	QL(200 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail; RX/OTC	MONOJECT TB SYRINGE	F	QL(200 EA per fill retail); 3 max fill(s) per 60 day(s) retail; RX/OTC
MONOJECT SYRINGE LUER LOCK	F	QL(200 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail; RX/OTC	MONOJECT TB SYRINGE MISC	F	RX/OTC
			MONOJECT ULTRA COMFORT SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
			NOKOR VENTED NEEDLE	F	RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
NORM-JECT LUER LOCK SYRINGE	F	QL(200 EA per fill retail); 3 max fill(s) per 60 day(s) retail; RX/OTC	SB INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
NORM-JECT LUER SLIP SYRINGE	F	QL(200 EA per fill retail); 3 max fill(s) per 60 day(s) retail; RX/OTC	SECURESAFE HYPODERMIC NEEDLE	F	RX/OTC
PERFECT POINT SAFETY NEEDLE	F	RX/OTC	SECURESAFE INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
POLY HUB NEEDLE	F	RX/OTC	SECURESAFE SYRINGE/NEEDLE	F	RX/OTC
PRECISION SURE-DOSE SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC	SURE COMFORT INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
PRO COMFORT INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC	SYRINGE DISPOSABLE	F	QL(200 EA per fill retail); 3 max fill(s) per 60 day(s) retail; RX/OTC
PRODIGY INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC	SYRINGE ECCENTRIC TIP	F	QL(200 EA per fill retail); 3 max fill(s) per 60 day(s) retail; RX/OTC
PX INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP	SYRINGE LUER LOCK	F	QL(200 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail; RX/OTC
RA INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC	SYRINGE LUER LOCK	F	RX/OTC
REALITY INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC	SYRINGE LUER LOCK	F	QL(200 EA per fill retail); 3 max fill(s) per 60 day(s) retail; RX/OTC
RELION INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC	SYRINGE LUER SLIP	F	QL(200 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SYRINGE LUER SLIP	F	QL(200 EA per fill retail); 3 max fill(s) per 60 day(s) retail; RX/OTC	ULTRA FLO INSULIN SYR 1/2 UNIT	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
SYRINGE LUER SLIP	F	RX/OTC	ULTRA FLO INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
TECHLITE INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC	ULTRACARE INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
TRUE COMFORT INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC	ULTRA-THIN II INS SYR SHORT	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
TRUE COMFORT PRO INSULIN SYR	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC	ULTRA-THIN II INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
TRUEPLUS INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC	VANISHPOINT ALLERGY TRAY KIT	F	QL(200 EA per 30 day(s) retail); 3 max fill(s) per 60 day(s) retail; RX/OTC
ULTICARE INSULIN SAFETY SYR	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC	VANISHPOINT INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
ULTICARE INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC	VANISHPOINT INSULIN SYRINGE	F	QL(200 EA per fill retail); 3 max fill(s) per 60 day(s) retail
ULTICARE SYRINGE	F	RX/OTC	VANISHPOINT SAFETY SYRINGE	F	RX/OTC
ULTICARE TUBERCULIN SAFETY SYR	F		VANISHPOINT SYRINGE	F	RX/OTC
ULTIGUARD SAFEPACK SYR/NEEDLE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP	VANISHPOINT TUBERCULIN SYRINGE MISC	F	RX/OTC
ULTRA COMFORT INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits
VERIFINE INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
VERISAFE SAFETY STERILE NEEDLE	F	RX/OTC
ZEVRX INSULIN SYRINGE	F	QL(6 EA daily; 500 EA per fill retail; 500 per fill mail); MP; RX/OTC
Respiratory Therapy Supplies		
AEROCHAMBER HOLDING CHAMBER DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC
AEROCHAMBER MINI CHAMBER DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC
AEROCHAMBER MV MISC	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC
AEROCHAMBER PLS FLOVU MTHPIECE DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
AEROCHAMBER PLUS FLO-VU INTERM DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC
AEROCHAMBER PLUS FLO-VU LARGE DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC
AEROCHAMBER PLUS FLO-VU LARGE MISC	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC
AEROCHAMBER PLUS FLO-VU MEDIUM DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC
AEROCHAMBER PLUS FLO-VU MEDIUM MISC	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC
AEROCHAMBER PLUS FLO-VU SMALL DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
AEROCHAMBER PLUS FLO-VU SMALL MISC	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC	AEROCHAMBER Z-STAT PLUS/LARGE MISC	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC
AEROCHAMBER PLUS FLO-VU W/MASK MISC	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC	AEROCHAMBER Z-STAT PLUS/MEDIUM MISC	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC
AEROCHAMBER PLUS FLO-VU MISC	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC	AEROCHAMBER Z-STAT PLUS/SMALL MISC	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC
AEROCHAMBER PLUS FLOW VU MISC	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC	AEROCHAMBER Z-STAT PLUS MISC	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC
AEROCHAMBER W/FLOWSIGNAL MISC	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC	AEROCHAMBER2GO ANTI-STATIC DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC
AEROCHAMBER Z-STAT PLUS CHAMBR MISC	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC	AEROVENT PLUS DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
BREATHE COMFORT CHAMBER/ADULT DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC	CLEVER CHOICE HOLDING CHAMBER DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC
BREATHE COMFORT CHAMBER/CHILD DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC	COMPACT SPACE CHAMBER/LG MASK DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC
BREATHE EASE LARGE DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC	COMPACT SPACE CHAMBER/MED MASK DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC
BREATHE EASE MEDIUM DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC	COMPACT SPACE CHAMBER/SM MASK DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC
BREATHE EASE SMALL DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC	COMPACT SPACE CHAMBER DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC
BREATHRITE VALVED MDI CHAMBER DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC	EASIVENT MASK LARGE MISC	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
EASIVENT MASK MEDIUM MISC	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC	EQ SPACE CHAMBER ANTI-STATIC DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC
EASIVENT MASK SMALL MISC	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC	FLEXICHAMBER DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC
EASIVENT MISC	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC	INSPIREASE MISC	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC
EQ SPACE CHAMBER ANTI-STATIC L DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC	MICROCHAMBER DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC
EQ SPACE CHAMBER ANTI-STATIC M DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC	MICROCHAMBER MISC	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC
EQ SPACE CHAMBER ANTI-STATIC S DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC	MICROSPACER MISC	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
OPTICHAMBER DIAMOND DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC	POCKET SPACER DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC
OPTICHAMBER DIAMOND-LG MASK DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC	PRO COMFORT SPACER ADULT MISC	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC
OPTICHAMBER DIAMOND-MD MASK MISC	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC	PRO COMFORT SPACER CHILD MISC	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC
OPTICHAMBER DIAMOND MISC	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC	PRO COMFORT SPACER INFANT DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC
OPTICHAMBER DIAMOND-SM MASK MISC	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC	PROCARE SPACER/ADULT MASK DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC
POCKET CHAMBER DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC	PROCARE SPACER/CHILD MASK DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PROCHAMBER VHC DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC	VORTEX VALVED HOLDING CHAMBER DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC
PURE COMFORT SPACER CHAMBER DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC	MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches		
RITEFLO DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC	Calcitonin Gene-Related Peptide (CGRP) Receptor Antag		
VORTEX HOLD CHMBR/MASK/CHILD DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC	AIMOVIG	F	SP; PA
VORTEX HOLD CHMBR/MASK/TODDLER DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC	AJOVY SOAJ	F	SP; PA
VORTEX VALVE CHAMBER-PEDI MASK DEVI	F	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail; RX/OTC	AJOVY SOSY	F	SP; PA
			EMGALITY (300 MG DOSE) SOSY	F	SP; PA
			EMGALITY SOAJ	F	SP; PA
			EMGALITY SOSY	F	SP; PA
			Migraine Combinations		
			<i>ergotamine w/ caffeine TABS</i>	F	
			Serotonin Agonists		
			<i>almotriptan malate</i>	F	QL(12 EA per 30 day(s) retail)
			<i>eletriptan hydrobromide</i>	F	QL(6 EA per 30 day(s) retail); AL(At least 18 yrs old)
			<i>frovatriptan succinate</i>	F	
			<i>naratriptan hcl</i>	F	QL(12 EA per 30 day(s) retail); AL(At least 18 yrs old)
			<i>rizatriptan benzoate TABS</i>	F	QL(12 EA per 30 day(s) retail)
			<i>rizatriptan benzoate TBDP</i>	F	QL(12 EA per 30 day(s) retail)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>sumatriptan</i>	F	QL(12 EA per 30 day(s) retail); AL(At least 18 yrs old)	<i>calcium chloride (dihydrate) SOLN</i>	F	
<i>sumatriptan succinate SOAJ</i>	F	QL(4 ML per 30 day(s) retail); AL(At least 18 yrs old)	<i>calcium citrate TABS</i>	F	
<i>sumatriptan succinate SOCT</i>	F	QL(4 ML per 30 day(s) retail); AL(At least 18 yrs old)	<i>calcium citrate-vitamin d TABS</i>	F	
<i>sumatriptan succinate SOLN 6 MG/0.5ML</i>	F	QL(4 ML per 30 day(s) retail); AL(At least 18 yrs old)	<i>calcium gluconate SOLN</i>	F	
<i>sumatriptan succinate TABS</i>	F	QL(9 EA per 30 day(s) retail); AL(At least 18 yrs old)	<i>oyster shell</i>	F	
<i>zolmitriptan SOLN</i>	F	QL(6 EA per 30 day(s) retail); AL(At least 12 yrs old)	Electrolyte Mixtures		
<i>zolmitriptan TABS</i>	F	QL(6 EA per 30 day(s) retail)	<i>dextrose in lactated ringers</i>	F	
<i>zolmitriptan TBDP</i>	F	QL(6 EA per 30 day(s) retail)	<i>dextrose w/ sodium chloride 0.9 %-5 %, 5 %-0.45 %, 5 %-0.9 %</i>	F	
MINERALS & ELECTROLYTES			<i>lactated ringer's</i>	F	
Bicarbonates			<i>oral electrolytes SOLN</i>	F	
<i>sodium acetate SOLN</i>	F		Fluoride		
<i>sodium bicarbonate IV 4.2 %, 8.4 %</i>	F		<i>sodium fluoride CHEW</i>	F	
Calcium			<i>sodium fluoride SOLN 0.5 MG/ML</i>	F	RX/OTC
<i>calcium carbonate-cholecalciferol TABS</i>	F		<i>sodium fluoride TABS</i>	F	
<i>calcium carbonate TABS</i>	F		Magnesium		
<i>calcium carbonate-vitamin d w/ minerals CHEW</i>	F		<i>magnesium chloride TBEC</i>	F	
<i>calcium carbonate-vitamin d TABS 125 UNIT-250 MG, 250 MG-125 UNIT, 600 MG-200 UNIT</i>	F		<i>magnesium gluconate TABS 27.5 MG</i>	F	
			<i>magnesium oxide (mg supplement) TABS</i>	F	
			<i>magnesium TABS 250 MG</i>	F	
			Phosphate		
			<i>pot phosphate monobasic w/ sod phosphate dibasic & monobasic</i>	F	
			<i>potassium phosphate monobasic TABS</i>	F	
			<i>potassium phosphates 45 MMOLE/15ML</i>	F	

Drug Name	Drug Tier	Requirements/ Limits
<i>sodium phosphates (sodium phosphate dibasic & monobasic) 45 MMOLE/15ML</i>	F	
Potassium		
<i>potassium acetate SOLN 2 MEQ/ML</i>	F	
<i>potassium chloride microencapsulated crystals er 10 MEQ</i>	F	MP
<i>potassium chloride microencapsulated crystals er 20 MEQ</i>	F	QL(8 EA daily); MP
<i>potassium chloride CPCR</i>	F	MP
<i>potassium chloride SOLN PO 10 %, 10 %</i>	F	MP
<i>potassium chloride TBCR 20 MEQ</i>	F	QL(8 EA daily); MP
<i>potassium chloride TBCR 10 MEQ</i>	F	MP
<i>potassium gluconate TABS 595 MG, 550 MG, 595 MG</i>	F	
Sodium		
<i>sodium chloride flush</i>	F	
<i>sodium chloride SOLN IV 0.45 %, 0.9 %, 3 %, 4 MEQ/ML, 5 %</i>	F	
<i>sodium chloride TABS</i>	F	
Trace Minerals		
<i>selenium TABS 50 MCG</i>	F	
MISCELLANEOUS THERAPEUTIC CLASSES		
Chelating Agents		
<i>penicillamine TABS</i>	F	QL(16 EA daily); PA
Immunomodulators		
<i>lenalidomide</i>	F	SP; PA
REVLIMID	F	SP; PA
THALOMID	F	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
Immunosuppressive Agents		
<i>azathioprine TABS 50 MG</i>	F	
<i>cyclosporine modified (for microemulsion) CAPS</i>	F	
<i>cyclosporine modified (for microemulsion) SOLN</i>	F	
<i>cyclosporine CAPS</i>	F	
<i>mycophenolate mofetil CAPS</i>	F	
<i>mycophenolate mofetil SUSR</i>	F	
<i>mycophenolate mofetil TABS</i>	F	
SANDIMMUNE SOLN PO 100 MG/ML	F	
<i>sirolimus SOLN</i>	F	
<i>sirolimus TABS</i>	F	
<i>tacrolimus CAPS</i>	F	
Irrigation Solutions		
<i>water for irrigation, sterile</i>	F	QL(50000 ML per 30 day(s) retail)
Potassium Removing Agents		
<i>sodium polystyrene sulfonate POWD</i>	F	
<i>sodium polystyrene sulfonate SUSP CO 15 GM/60ML</i>	F	
MOUTH/THROAT/DENTAL AGENTS		
Anesthetics Topical Oral		
<i>lidocaine hcl (mouth-throat)</i>	F	
Anti-infectives - Throat		
<i>clotrimazole</i>	F	
<i>nystatin (mouth-throat)</i>	F	QL(24 ML daily)
Antiseptics - Mouth/Throat		

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Drug Name	Drug Tier	Requirements/ Limits
<i>chlorhexidine gluconate (mouth-throat)</i>	F	QL(32 ML daily)
Dental Products		
<i>sodium fluoride (dental) CREA</i>	F	
<i>sodium fluoride (dental) GEL</i>	F	
<i>sodium fluoride (dental) PSTE DT</i>	F	
<i>sodium fluoride (dental) SOLN 0.2 %</i>	F	
<i>stannous fluoride CONC</i>	F	RX/OTC
Steroids - Mouth/Throat/Dental		
<i>triamcinolone acetonide (mouth)</i>	F	
Throat Products - Misc.		
<i>cevimeline hcl</i>	F	
<i>pilocarpine hcl (oral)</i>	F	
MULTIVITAMINS		
B-Complex Vitamins		
<i>b-complex vitamins CAPS</i>	F	
<i>b-complex vitamins TABS</i>	F	
B-Complex w/ C		
<i>b complex w/ c TABS</i>	F	
<i>b-complex w/ c & calcium</i>	F	
<i>b-complex w/ c & e + zn</i>	F	
B-Complex w/ Folic Acid		
<i>b-complex w/ c & folic acid CAPS</i>	F	RX/OTC
<i>b-complex w/ c & folic acid TABS</i>	F	RX/OTC
<i>b-complex w/ folic acid CAPS</i>	F	RX/OTC
<i>b-complex w/ folic acid TABS</i>	F	
<i>b-complex w/biotin & folic acid TABS</i>	F	

Drug Name	Drug Tier	Requirements/ Limits
<i>b-complex w/biotin & folic acid TBCR</i>	F	
RENATABS	F	
B-Complex w/ Minerals		
<i>b-complex w/ minerals LIQD</i>	F	
Multiple Vitamins w/ Iron		
<i>multiple vitamins w/ iron TABS</i>	F	
Multiple Vitamins w/ Minerals		
ACTIVNUTRIENTS PERFORMANCE CAPS	F	RX/OTC
ACTIVNUTRIENTS W/O IRON CAPS	F	RX/OTC
ACTIVNUTRIENTS CAPS	F	RX/OTC
AIRBORNE+NATURAL ENERGY LIQD	F	RX/OTC
ALIVE EVERYDAY IMMUNE HEALTH CAPS	F	RX/OTC
ALIVE HAIR, SKIN & NAILS CAPS	F	RX/OTC
ALIVE MAX 6 POTENCY CAPS	F	RX/OTC
ALIVE MULTI-VITAMIN LIQD	F	RX/OTC
APETIBEX CAPS	F	RX/OTC
APPE-CURB CAPS	F	RX/OTC
BARIATRIC MULTIVITAMINS/IRON CAPS	F	RX/OTC
BARIATRIC MULTIVITAMINS CAPS	F	RX/OTC
BIO-35 GLUTEN-FREE CAPS	F	RX/OTC
BIO-35 IRON FREE CAPS	F	RX/OTC
BIOCAL CAPS	F	RX/OTC
BIOTECT PLUS CAPS	F	RX/OTC
BONEUP 3 PER DAY CAPS	F	RX/OTC
BONEUP CAPS	F	RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
BOOSTNOW IMMUNE SUPPORT CAPS	F	RX/OTC	HEALTHY EYES SUPERVISION 2 CAPS	F	RX/OTC
BURIED TREASURE ACTIVE 55 PLUS LIQD	F	RX/OTC	IMMUNE ESSENTIALS DAILY CAPS	F	RX/OTC
CELEBRATE MULTI-COMplete 18 CAPS	F	RX/OTC	LIVITA ADULTS LIQD	F	RX/OTC
CELEBRATE MULTI-COMplete 36 CAPS	F	RX/OTC	LYSIPLEX PLUS LIQD	F	RX/OTC
CELEBRATE MULTI-COMplete 45 CAPS	F	RX/OTC	MENATROL CAPS	F	RX/OTC
CELEBRATE MULTI-COMplete 60 CAPS	F	RX/OTC	MENS 50+ ADVANCED CAPS	F	RX/OTC
CENVITE LIQD	F	RX/OTC	MOOD FOOD ES CAPS	F	RX/OTC
CHOICEFUL MULTIVITAMIN CAPS	F	RX/OTC	MOOD FOOD CAPS	F	RX/OTC
CULTURELLE PROBIOTIC MEN DAILY CAPS	F	RX/OTC	MULTIA CAPS	F	RX/OTC
CVS ADULT 50+ EYE HEALTH CAPS	F	RX/OTC	<i>multiple vitamins w/ minerals CAPS</i>	F	RX/OTC
CVS EYE HEALTH ADULT 50+ CAPS	F	RX/OTC	<i>multiple vitamins w/ minerals CHEW</i>	F	
CVS IMMUNE SUPPORT CAPS	F	RX/OTC	<i>multiple vitamins w/ minerals LIQD</i>	F	RX/OTC
CVS VISION HEALTH CAPS	F	RX/OTC	<i>multiple vitamins w/ minerals TABS</i>	F	RX/OTC
DECUBI-VITE CAPS	F	RX/OTC	MULTI-VITE LIQD	F	RX/OTC
DEKAS PLUS OCEAN CAPS	F	RX/OTC	MVW COMPLETE FORMULATION D3000 CAPS	F	RX/OTC
DEKAS PLUS CAPS	F	RX/OTC	MVW COMPLETE FORMULATION D5000 CAPS	F	RX/OTC
DEPLIN MA CAPS	F	RX/OTC	MVW COMPLETE FORMULATION MINIS CAPS	F	RX/OTC
DEXATRAN CAPS	F	RX/OTC	MVW COMPLETE FORMULATION CAPS	F	RX/OTC
EYE HEALTH AREDS 2 CAPS	F	RX/OTC	MVW MODULATOR FORMULATION MINI CAPS	F	RX/OTC
EYE HEALTH CAPS	F	RX/OTC	MVW MODULATOR FORMULATION CAPS	F	RX/OTC
FOLAGENT DHA CAPS	F	RX/OTC	OCUVEL CAPS 250 MG-0.5 MG-5 MG-1 MG-40 MG-1 MG-200 UNIT	F	RX/OTC
FOLAMED DHA CAPS	F	RX/OTC	OCUVITE ADULT 50+ CAPS	F	RX/OTC
FT EYE HEALTH CAPS	F	RX/OTC			
GENADEK STEP 1 CAPS	F	RX/OTC			
GENADEK STEP 2 CAPS	F	RX/OTC			
HAIR/SKIN/NAILS CAPS	F	RX/OTC			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
OCUVITE ADULT FORMULA CAPS	F	RX/OTC	VISION OPTIMIZER CAPS	F	RX/OTC
OCUVITE-LUTEIN CAPS	F	RX/OTC	VISTA ADVANCED AREDS2 FORMULA CAPS	F	RX/OTC
ONE-DAILY MULTI CAPS CAPS	F	RX/OTC	VISTA ADVANCED DRY EYE FORMULA CAPS	F	RX/OTC
PRESCRIPTION SUPPORT MULTIVIT CAPS	F	RX/OTC	VITABEX PLUS CAPS	F	RX/OTC
PRESERVISION AREDS 2+MULTI VIT CAPS	F	RX/OTC	VITABEX CAPS	F	RX/OTC
PRESERVISION AREDS 2 CAPS	F	RX/OTC	VITEYES AREDS 2 FORMULA +MULTI CAPS	F	RX/OTC
PRESERVISION AREDS CAPS	F	RX/OTC	VITEYES AREDS 2 FORMULA CAPS	F	RX/OTC
PRESERVISION/LUTEIN CAPS	F	RX/OTC	VITEYES CLASSIC ADVANCED CAPS	F	RX/OTC
PROBIOTICS + BARIATRIC MULTI CAPS	F	RX/OTC	VITEYES CLASSIC MACULAR SUPPOR CAPS	F	RX/OTC
PRORENAL + D W/ OMEGA-3 CAPS	F	RX/OTC	VITEYES CLASSIC+OMEGA-3 CAPS	F	RX/OTC
PROTECT CARDIO AF CAPS	F	RX/OTC	Multivitamins		
PROTECT PLUS SO CAPS	F	RX/OTC	DEKAS ESSENTIAL LIQD	F	
PROTEGRA CAPS	F	RX/OTC	DIALYVITE 800 LIQD	F	
QC OCUHEALTH VISION SUPPORT 2 CAPS	F	RX/OTC	MOMMY'S BLISS MV ORGANIC DROPS LIQD	F	
REMEDIENT CAPS	F	RX/OTC	<i>multiple vitamin CAPS</i>	F	RX/OTC
SKIN HAIR & NAILS ADVANCED CAPS	F	RX/OTC	<i>multiple vitamin TABS</i>	F	RX/OTC
STROVITE FORTE SYRP	F		MULTIVITAMIN+ LIQD	F	
SUPER ANTIOXIDANT CAPS	F	RX/OTC	Ped Multi Vitamins w/FI & FE		
SUPPORT-500 CAPS	F	RX/OTC	<i>ped multivitamins w/fl & iron SOLN</i>	F	AL(Up to 16 yrs old); RX/OTC
SUPPORT LIQD	F	RX/OTC	Ped Multiple Vitamins w/ Minerals		
THERAMILL FORTE CAPS	F	RX/OTC	DEKAS PLUS LIQD	F	PA; RX/OTC
THERANATAL LACTATION ONE CAPS	F	RX/OTC	GENADEK LIQD	F	PA; RX/OTC
VISION HEALTH CAPS	F	RX/OTC	LIVITA CHILDREN LIQD	F	PA; RX/OTC
			MVW HI-D DROPS W/EXTRA VIT D LIQD	F	PA; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MVW MODULATOR FORMULATION PEDS LIQD	F	PA; RX/OTC	PC PEDIATRIC POLY-VITAMIN DROP SOLN PO	F	
UPSPRING BABY IRON-IMMUNITY LIQD	F	PA; RX/OTC	<i>pediatric multiple vitamins CHEW</i>	F	
UPSPRINGBABY MULTIVITAMIN/IRON LIQD	F	PA; RX/OTC	POLY-VI-SOL SOLN PO	F	
Ped MV w/ Fluoride			POLY-VITA SOLN PO	F	
MULTIVITAMIN/FLUORIDE CHEW	F	RX/OTC	POLY-VITE PEDIATRIC SOLN PO	F	
<i>pediatric multivitamins w/fl CHEW</i>	F	RX/OTC	Pediatric Vitamins		
<i>pediatric multivitamins w/fl CHEW 0.25 MG</i>	2	RX/OTC	<i>pediatric vitamins adc 400 UNIT/ML-750 UNIT/ML-35 MG/ML</i>	F	QL(50 ML per 30 day(s) retail; 150 ML per 90 days mail)
<i>pediatric multivitamins w/fl SOLN</i>	F	AL(Up to 16 yrs old); RX/OTC	VITAMIN A/C/D/ INFANT/TODDLER	F	QL(50 ML per 30 day(s) retail)
<i>pediatric vitamins acd w/ fluoride SOLN</i>	F	RX/OTC	VITAMIN A-C-D INFANT	F	QL(50 ML per 30 day(s) retail)
Ped MV w/ Iron			Prenatal Vitamins		
BPROTECTED PEDIA POLY-VITE/FE SOLN	F		ATABEX OB	F	
ENFAMIL POLY-VI-SOL-IRON SOLN 11 MG/ML	F		CITRANATAL BLOOM	F	QL(60 EA per 30 day(s) retail; 180 EA per 90 days mail)
MULTIVITAMIN DROPS/IRON SOLN	F		CLASSIC PRENATAL TABS	F	MP
<i>pediatric multiple vitamins w/ iron CHEW</i>	F		C-NATE DHA CAPS	F	
POLY-VITE/IRON SOLN	F		COMPLETE NATAL DHA	F	PA
Pediatric Multiple Vitamins			COMPLETENATE CHEW	F	
BPROTECTED PEDIA POLY-VITE SOLN PO	F		CONCEPT DHA	F	
BRAIN BUILDER KIDS CHEW	F		CVS PRENATAL TABS 100 MG-2.6 MG-800 MCG-400 UNIT-4 MCG-1.7 MG-18 MG-27 MG-1.5 MG-25 MG-263 MG-11 UNIT-4000 UNIT	F	MP
FT CHILDRENS MULTI PLUS IMMUNE CHEW	F		EQL PRENATAL FORMULA TABS	F	MP
GNP CHILDRENS/EXTRA C CHEW	F		FT PRENATAL TABS	F	MP
MULTIVITAMIN INFANT & TODDLER SOLN PO	F		GNP PRENATAL/FOLIC ACID TABS	F	MP
			GNP PRENATAL TABS	F	MP

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
KP PRENATAL MULTIVITAMINS TABS	F	MP	PRENATAL VITAMINS TABS 100 MG-800 MCG-1.84 MG-18 MG-2.6 MG-1.7 MG-27 MG-10 MCG-4.95 MG-25 MG-200 MG-160 MG-1200 MCG-4 MCG, 120 MG-2.6 MG-800 MCG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG-4000 UNIT-30 UNIT	F	MP
MASONATAL TABS	F	MP	<i>prenatal without a w/ fe fumarate-l methylfolate-fa-dha</i>	F	
MULTI PRENATAL TABS	F	MP	PRENATAL/IRON TABS	F	MP
NEONATAL PRENATAL TABS	F	MP	PRENATAL TABS	F	MP
NEONATAL VITAMIN TABS	F	MP	PRENATAL-U CAPS	F	
NESTABS	F	QL(1 EA daily)	PRENATVITE RX TABS	F	RX/OTC
NESTABS DHA	F		PROVIDA OB	F	
ONE VITE WOMENS TABS	F	MP	PX PRENATAL MULTIVITAMINS TABS	F	MP
PNV 27-CA/FE/FA TABS	F		QC PRENATAL TABS	F	MP
PNV PRENATAL PLUS MULTIVIT+DHA MISC	F		RA PRENATAL FORMULA TABS	F	MP
PNV-DHA+DOCUSATE	F		RA PRENATAL TABS	F	MP
PRENAISSANCE PLUS CAPS	F		SELECT-OB CHEW 60 MG-2.5 MG-1 MG-400 UNIT-5 MCG-1.8 MG-15 MG-1.6 MG-25 MG-15 MG-30 UNIT-29 MG-1700 UNIT	F	
PRENATAL (W/IRON & FA) TABS	F	RX/OTC	SE-NATAL 19 CHEW	F	
PRENATAL 19 CHEW	F		SE-NATAL 19 TABS	F	RX/OTC
PRENATAL 19 TABS	F	RX/OTC	SM PRENATAL VITAMINS TABS	F	MP
PRENATAL FORTE TABS	F	RX/OTC	TARON-C DHA	F	
PRENATAL ONE DAILY TABS	F	MP	THRIVITE RX TABS	F	MP; RX/OTC
<i>prenatal vit w/ docusate-iron carbonyl-folic acid TABS</i>	F		TRINATAL RX 1 TABS	F	
<i>prenatal vit w/ ferrous fumarate-folic acid CHEW</i>	F		VINATE II	F	
<i>prenatal vit w/ iron carbonyl-folic acid TABS 120 MG-3 MG-30 MCG-1 MG-400 UNIT-8 MCG-3 MG-20 MG-7 MG-3 MG-100 MG-15 MG-3 MG-4000 UNIT-200 MG-150 MCG-30 UNIT-29 MG</i>	F	MP; RX/OTC	VINATE ONE TABS	F	
PRENATAL VITAMIN AND MINERAL TABS	F	MP	VITAFOL-OB TABS	F	
			VITAFOL-ONE CAPS	F	

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Drug Name	Drug Tier	Requirements/ Limits
WESCAP-C DHA	F	
WESCAP-PN DHA	F	
WESNATAL DHA COMPLETE	F	PA
Vitamins w/ Lipotropics		
<i>vitamins w/ lipotropics CAPS</i>	F	
<i>vitamins w/ lipotropics TABS</i>	F	
MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms		
Central Muscle Relaxants		
<i>baclofen TABS</i>	F	
<i>carisoprodol TABS 350 MG</i>	F	QL(4 EA daily)
<i>chlorzoxazone TABS 500 MG</i>	F	
<i>cyclobenzaprine hcl TABS 5 MG, 10 MG</i>	F	
<i>methocarbamol TABS 500 MG, 750 MG</i>	F	
<i>tizanidine hcl TABS</i>	F	
Direct Muscle Relaxants		
<i>dantrolene sodium CAPS</i>	F	
<i>dantrolene sodium SOLR</i>	F	
NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus		
Nasal Agents - Misc.		
NOZIN NASAL SANITIZER POPSWAB SWAB	F	3 max fill(s) per 60 day(s) retail
NOZIN NASAL SANITIZER KIT	F	3 max fill(s) per 60 day(s) retail
<i>saline SOLN 0.65 %</i>	F	
Nasal Antiallergy		
<i>azelastine hcl 0.1 %, 137 MCG/SPRAY</i>	F	

Drug Name	Drug Tier	Requirements/ Limits
<i>cromolyn sodium (nasal) 5.2 MG/ACT</i>	F	
Nasal Anticholinergics		
<i>ipratropium bromide (nasal) 0.03 %</i>	F	1 package(s) per 30 day(s) retail
<i>ipratropium bromide (nasal) 0.06 %</i>	F	QL(45 ML per 30 day(s) retail; 135 ML per 90 days mail)
Nasal Steroids		
<i>budesonide (nasal)</i>	F	QL(16.86 ML per 30 day(s) retail; 30 ML per 90 days mail)
<i>fluticasone propionate (nasal) SUSP</i>	F	QL(32 ML per 30 day(s) retail); RX/OTC
<i>triamcinolone acetonide (nasal) AERO</i>	F	1 package(s) per 30 day(s) retail
Sympathomimetic Decongestants		
<i>oxymetazoline hcl SOLN 0.05 %</i>	F	
<i>phenylephrine hcl (oral) TABS</i>	F	
<i>pseudoephedrine hcl TABS 30 MG</i>	F	
NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles		
ALS Agents		
<i>riluzole TABS</i>	F	
NUTRIENTS		
Carbohydrates		
<i>dextrose SOLN 5 %</i>	F	
Misc. Nutritional Substances		
<i>omega-3 fatty acids CAPS 200 MG-300 MG, 300 MG, 435 MG, 500 MG, 1000 MG, 1200 MG</i>	F	

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Drug Name	Drug Tier	Requirements/ Limits
<i>omega-3 fatty acids CPDR</i>	F	
OPHTHALMIC AGENTS - Drugs to Treat the Eye		
Artificial Tears and Lubricants		
BION TEARS PF	F	
<i>carboxymethylcellulose sodium (ophth) GEL</i>	F	
<i>carboxymethylcellulose sodium (ophth) SOLN 0.25 %, 0.5 %</i>	F	
<i>carboxymethylcellulose-glycerin SOLN</i>	F	
<i>dextran 70-hypromellose 0.3 %-0.1 %</i>	F	
FRESHKOTE PF	F	
GENTEAL SEVERE GEL	F	
<i>glycerin-hypromellose-polyethylene glycol 400</i>	F	
<i>polyethylene glycol-propylene glycol (ophth) SOLN 0.3 %-0.4 %</i>	F	
<i>polyvinyl alcohol 1.4 %</i>	F	
<i>propylene glycol (ophth)</i>	F	
REFRESH	F	
REFRESH OPTIVE PF SOLN	F	
REFRESH RELIEVA PF SOLN 0.9 %-0.5 %	F	
REFRESH TEARS PF SOLN	F	
SYSTANE NIGHT GEL	F	
<i>white petrolatum-mineral oil</i>	F	
Beta-blockers - Ophthalmic		
<i>betaxolol hcl (ophth) SOLN</i>	F	
BETOPTIC-S SUSP	F	
<i>carteolol hcl (ophth)</i>	F	
<i>dorzolamide hcl-timolol maleate</i>	F	

Drug Name	Drug Tier	Requirements/ Limits
<i>levobunolol hcl 0.5 %</i>	F	
<i>timolol maleate (ophth) SOLN</i>	F	
Cycloplegic Mydriatics		
<i>atropine sulfate (ophthalmic) OINT</i>	F	
<i>atropine sulfate (ophthalmic) SOLN</i>	F	
ATROPINE SULFATE SOLN 1 %	F	
CYCLOGYL	F	
CYCLOMYDRIL	F	
<i>cyclopentolate hcl 1 %</i>	F	
<i>homatropine hbr</i>	F	
ISOPTO ATROPINE SOLN	F	
<i>phenylephrine hcl (mydriatic) SOLN</i>	F	
<i>tropicamide SOLN</i>	F	
Miotics		
PHOSPHOLINE IODIDE	F	
<i>pilocarpine hcl SOLN 1 %, 2 %, 4 %</i>	F	
Ophthalmic Adrenergic Agents		
<i>apraclonidine hcl</i>	F	
<i>brimonidine tartrate 0.2 %</i>	F	QL(10 ML per 30 day(s) retail; 30 ML per 90 days mail)
<i>brimonidine tartrate 0.1 %, 0.15 %</i>	F	QL(5 ML per 30 day(s) retail; 15 ML per 90 days mail)
IOPIDINE	F	
Ophthalmic Anti-infectives		
<i>bacitracin (ophthalmic)</i>	F	QL(7 GM per 7 day(s) retail)
<i>bacitracin-polymyxin b (ophth)</i>	F	

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>ciprofloxacin hcl (ophth) SOLN</i>	F		MAXIDEX SUSP OP	F	
<i>erythromycin (ophth)</i>	F		<i>neomycin-polymy-dexameth OINT</i>	F	
<i>gentamicin sulfate (ophth) SOLN</i>	F		<i>neomycin-polymy-dexameth SUSP 0.1 %-3.5 MG/ML-10000 UNIT/ML, 0.1 %</i>	F	
<i>levofloxacin (ophth) 0.5 %</i>	F		<i>neomycin-polymyxin-hc (ophth)</i>	F	
<i>moxifloxacin hcl (ophth) SOLN OP</i>	F	QL(6 ML per 30 day(s) retail)	PRED MILD	F	
<i>neomycin-bacitracin zn-polymyxin</i>	F		<i>prednisolone acetate (ophth)</i>	F	
<i>neomycin-polymyxin-gramicidin</i>	F		PREDNISOLONE SODIUM PHOSPHATE	F	
<i>ofloxacin (ophth)</i>	F		<i>sulfacetamide sod-prednisolone SOLN</i>	F	
<i>polymyxin b-trimethoprim</i>	F		TOBRADEX OINT	F	QL(7 GM per 14 day(s) retail)
<i>sulfacetamide sodium (ophth) SOLN</i>	F		<i>tobramycin-dexamethasone SUSP</i>	F	
<i>tobramycin (ophth) SOLN</i>	F		Ophthalmics - Misc.		
<i>trifluridine</i>	F		<i>azelastine hcl (ophth)</i>	F	
Ophthalmic Decongestants			<i>cromolyn sodium (ophth)</i>	F	
<i>naphazoline w/ pheniramine 0.3 %-0.025 %</i>	F		<i>diclofenac sodium (ophth)</i>	F	
Ophthalmic Immunomodulators			<i>dorzolamide hcl</i>	F	
<i>cyclosporine (ophth) EMUL</i>	F	PA	<i>epinastine hcl (ophth)</i>	F	
RESTASIS MULTIDOSE EMUL	F	PA	<i>flurbiprofen sodium</i>	F	
Ophthalmic Local Anesthetics			<i>ketorolac tromethamine (ophth)</i>	F	
<i>proparacaine hcl</i>	F		<i>ketotifen fumarate (ophth) 0.035 %</i>	F	
<i>tetracaine hcl (ophth)</i>	F		LASTACFT	F	
Ophthalmic Steroids			MURO 128 SOLN	F	
<i>bacitracin-poly-neomycin-hc</i>	F		<i>olopatadine hcl</i>	F	1 package(s) per 30 day(s) retail; RX/OTC
<i>dexamethasone sodium phosphate (ophth)</i>	F		PATADAY 0.7 %	F	
FLAREX	F		<i>sodium chloride hypertonic OINT</i>	F	
<i>fluorometholone (ophth) SUSP</i>	F		<i>sodium chloride hypertonic SOLN</i>	F	
FML FORTE SUSP	F				

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Drug Name	Drug Tier	Requirements/ Limits
Prostaglandins - Ophthalmic		
<i>bimatoprost SOLN</i>	F	QL(2.5 ML per 20 day(s) retail); ST
<i>latanoprost SOLN</i>	F	QL(2.5 ML per 20 day(s) retail)
<i>travoprost SOLN</i>	F	QL(2.5 ML per 20 day(s) retail); ST
OTIC AGENTS - Drugs to Treat the Ear		
Otic Agents - Miscellaneous		
<i>acetic acid (otic)</i>	F	
<i>carbamide peroxide (otic) 6.5 %</i>	F	
Otic Anti-infectives		
<i>ofloxacin (otic)</i>	F	
Otic Combinations		
<i>ciprofloxacin-dexamethasone</i>	F	QL(7.5 ML per 30 day(s) retail); PA
<i>neomycin-polymyxin-hc (otic) SOLN</i>	F	
<i>neomycin-polymyxin-hc (otic) SUSP</i>	F	
<i>pramoxine-hc-chloroxylenol</i>	F	
OXYTOCICS - Drugs to Prevent/Control Uterine Bleeding		
Abortifacients/Agents for Cervical Ripening		
<i>carboprost tromethamine SOLN</i>	F	
Oxytocics		
<i>methylergonovine maleate TABS</i>	F	
PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System		
Monoclonal Antibodies		

Drug Name	Drug Tier	Requirements/ Limits
SYNAGIS SOLN	F	SP; PA
PENICILLINS - Drugs to Treat Bacterial Infections		
Aminopenicillins		
<i>amoxicillin CAPS</i>	F	
<i>amoxicillin CHEW 125 MG, 250 MG</i>	F	
<i>amoxicillin SUSR</i>	F	
<i>amoxicillin TABS</i>	F	
<i>ampicillin sodium IV 1 GM, 2 GM, 10 GM</i>	F	
<i>ampicillin CAPS 500 MG</i>	F	
Natural Penicillins		
BICILLIN L-A SUSY	F	QL(12 ML per 30 day(s) retail)
PENICILLIN G POT IN DEXTROSE 40000 UNIT/ML, 60000 UNIT/ML	F	
<i>penicillin g potassium 5000000 UNIT, 20000000 UNIT</i>	F	
<i>penicillin g sodium</i>	F	
<i>penicillin v potassium SOLR</i>	F	
<i>penicillin v potassium TABS</i>	F	
Penicillin Combinations		
<i>amoxicillin & pot clavulanate CHEW</i>	F	
<i>amoxicillin & pot clavulanate SUSR</i>	F	
<i>amoxicillin & pot clavulanate TABS</i>	F	
<i>ampicillin & sulbactam sodium IV 1 GM-0.5 GM, 10 GM-5 GM, 2 GM-1 GM</i>	F	
BICILLIN C-R	F	
BICILLIN C-R 900/300	F	

Drug Name	Drug Tier	Requirements/ Limits
<i>piperacillin sodium-tazobactam sodium 2 GM-0.25 GM, 3 GM-0.375 GM, 36 GM-4.5 GM, 4 GM-0.5 GM</i>	F	
ZOSYN	F	
Penicillinase-Resistant Penicillins		
<i>dicloxacillin sodium</i>	F	
<i>nafcillin sodium IV 10 GM</i>	F	
NAFCILLIN SODIUM IN DEXTROSE 1 GM/50ML	F	
<i>oxacillin sodium IJ 1 GM, 2 GM</i>	F	
OXACILLIN SODIUM IN DEXTROSE 2 GM/50ML	F	
PHARMACEUTICAL ADJUVANTS		
Liquid Vehicles		
FLAVOR PLUS LIQD	F	RX/OTC
<i>glycine diluent</i>	F	SP; PA
ORAL SUSPEND LIQD	F	RX/OTC
ORAPENN SD ANHYD SWEETENED LIQD	F	RX/OTC
ORAPENN SD ANHYD UNSWEETEN LIQD	F	RX/OTC
ORA-PLUS LIQD	F	RX/OTC
STERILE DILUENT FLOLAN PH 12	F	SP; PA
SUSPENDOL-S	F	
SYRSPEND SF LIQD	F	RX/OTC
PROGESTINS - Hormone Replacement/Modifying Drugs		
Progestins		
<i>medroxyprogesterone acetate 2.5 MG, 5 MG, 10 MG</i>	F	MP
<i>norethindrone acetate TABS</i>	F	
<i>progesterone CAPS</i>	F	
<i>progesterone OIL</i>	F	

Drug Name	Drug Tier	Requirements/ Limits
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions		
Agents for Chemical Dependency		
<i>acamprosate calcium</i>	F	QL(6 EA daily)
<i>disulfiram</i>	F	
Antidementia Agents		
<i>donepezil hydrochloride TABS 23 MG</i>	F	QL(1 EA daily)
<i>donepezil hydrochloride TABS 5 MG, 10 MG</i>	F	MP
<i>donepezil hydrochloride TBDP</i>	F	
<i>galantamine hydrobromide CP24</i>	F	ST
<i>galantamine hydrobromide SOLN</i>	F	
<i>galantamine hydrobromide TABS</i>	F	
<i>memantine hcl CP24</i>	F	QL(1 EA daily); ST
<i>memantine hcl TABS</i>	F	QL(60 EA per 30 day(s) retail; 180 EA per 90 days mail); MP
<i>rivastigmine tartrate CAPS</i>	F	QL(60 EA per 30 day(s) retail)
Combination Psychotherapeutics		
<i>chlordiazepoxide-amitriptyline 10 MG-25 MG</i>	F	
<i>chlordiazepoxide-amitriptyline 5 MG-12.5 MG</i>	F	QL(4 EA daily)
<i>olanzapine-fluoxetine hcl</i>	F	QL(1 EA daily); AL(At least 18 yrs old)
<i>perphenazine-amitriptyline</i>	F	
Movement Disorder Drug Therapy		
<i>tetrabenazine</i>	F	SP; PA

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Drug Name	Drug Tier	Requirements/ Limits
Multiple Sclerosis Agents		
AVONEX PEN AJKT	F	SP; PA
AVONEX PREFILLED PSKT	F	SP; PA
<i>dimethyl fumarate CDPK</i>	F	SP
<i>dimethyl fumarate CPDR</i>	F	SP
<i>fingolimod hcl</i>	F	SP
<i>glatiramer acetate SOSY</i>	F	SP
PLEGRIDY STARTER PACK SOAJ	F	SP; PA
PLEGRIDY STARTER PACK SOSY SC	F	SP; PA
PLEGRIDY SOAJ	F	SP; PA
PLEGRIDY SOSY IM	F	SP; PA
REBIF REBIDOSE TITRATION PACK SOAJ	F	SP; PA
REBIF REBIDOSE SOAJ	F	SP; PA
REBIF TITRATION PACK SOSY	F	SP; PA
REBIF SOSY	F	SP; PA
<i>teriflunomide</i>	F	SP
Psychotherapeutic and Neurological Agents - Misc.		
<i>pimozide</i>	F	
Smoking Deterrents		
APO-VARENICLINE TABS	F	QL(60 EA per 30 day(s) retail); AL(At least 13 yrs old)
<i>bupropion hcl (smoking deterrent)</i>	F	QL(60 EA per 30 day(s) retail; 180 EA per 90 days mail); AL(At least 13 yrs old)
<i>nicotine polacrilex GUM</i>	F	QL(720 EA per 30 day(s) retail); AL(At least 13 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
<i>nicotine polacrilex LOZG</i>	F	QL(600 EA per 30 day(s) retail); AL(At least 13 yrs old)
<i>nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR</i>	F	QL(1 EA daily); AL(At least 13 yrs old)
NICOTROL NS SOLN	F	QL(120 ML per 30 day(s) retail; 360 ML per 90 days mail); AL(At least 13 yrs old)
NICOTROL INHA	F	QL(480 EA per 30 day(s) retail; 1440 EA per 90 days mail); AL(At least 13 yrs old)
<i>varenicline tartrate TABS</i>	F	QL(60 EA per 30 day(s) retail); AL(At least 13 yrs old)
<i>varenicline tartrate TBPK</i>	F	AL(At least 13 yrs old)
RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions		
Alpha-Proteinase Inhibitor (Human)		
ARALAST NP SOLR 500 MG	F	SP; PA
Cystic Fibrosis Agents		
PULMOZYME	F	SP; PA
SULFONAMIDES - Drugs to Treat Bacterial Infections		
Sulfonamides		
<i>sulfadiazine TABS</i>	F	
TETRACYCLINES - Drugs to Treat Bacterial Infections		
Glycylcyclines		
<i>tigecycline</i>	F	PA

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Drug Name	Drug Tier	Requirements/ Limits
TIGECYCLINE	F	PA
Tetracyclines		
<i>demeclocycline hcl TABS</i>	F	
<i>doxycycline (monohydrate) CAPS 50 MG, 100 MG</i>	F	
<i>doxycycline (monohydrate) SUSR</i>	F	QL(40 ML daily)
<i>doxycycline (monohydrate) TABS 50 MG, 100 MG</i>	F	
<i>doxycycline hyclate CAPS</i>	F	
<i>doxycycline hyclate SOLR</i>	F	
<i>doxycycline hyclate TABS 20 MG, 100 MG</i>	F	
MINOCIN SOLR	F	
<i>minocycline hcl CAPS</i>	F	
<i>tetracycline hcl CAPS</i>	F	PA
THYROID AGENTS - Drugs to Regulate Thyroid Hormones		
Antithyroid Agents		
<i>methimazole TABS</i>	F	MP
<i>propylthiouracil</i>	F	MP
Thyroid Hormones		
ADTHYZA TABS	F	
ARMOUR THYROID TABS	F	
<i>levothyroxine sodium TABS</i>	F	MP
<i>liothyronine sodium SOLN</i>	F	
<i>liothyronine sodium TABS</i>	F	MP
NIVA THYROID TABS	F	
NP THYROID TABS	F	
RENTHYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	F	
SYNTHROID TABS (<i>Use levothyroxine sodium</i>)	F	MP

Drug Name	Drug Tier	Requirements/ Limits
THYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	F	
TOXOIDS		
Toxoid Combinations		
ADACEL SUSP	F	
BOOSTRIX SUSP	F	
BOOSTRIX SUSY	F	
TDVAX SUSP	F	
TENIVAC INJ	F	
TETANUS-DIPHThERIA TOXOIDS TD SUSP	F	
ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions		
Antispasmodics		
<i>atropine sulfate SOLN IJ 0.4 MG/ML, 1 MG/ML</i>	F	
<i>dicyclomine hcl CAPS</i>	F	
<i>dicyclomine hcl SOLN IM</i>	F	QL(16 ML per 3 day(s) retail); PA
<i>dicyclomine hcl SOLN PO</i>	F	
<i>dicyclomine hcl TABS</i>	F	
<i>glycopyrrolate TABS 1 MG, 2 MG</i>	F	
<i>hyoscyamine sulfate ELIX</i>	F	
<i>hyoscyamine sulfate SOLN PO 0.125 MG/ML</i>	F	
<i>hyoscyamine sulfate SUBL 0.125 MG</i>	F	
<i>hyoscyamine sulfate TABS 0.125 MG</i>	F	
<i>hyoscyamine sulfate TB12 0.375 MG</i>	F	
<i>hyoscyamine sulfate TBDP 0.125 MG</i>	F	
H-2 Antagonists		
<i>cimetidine hcl PO 300 MG/5ML</i>	F	

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Drug Name	Drug Tier	Requirements/ Limits
<i>cimetidine TABS</i>	F	RX/OTC
<i>famotidine SOLN 20 MG/2ML, 40 MG/4ML, 200 MG/20ML</i>	F	
<i>famotidine SUSR</i>	F	QL(150 ML per 30 day(s) retail); AL(Up to 9 yrs old)
<i>famotidine TABS</i>	F	
<i>nizatidine CAPS</i>	F	
Misc. Anti-Ulcer		
<i>sucralfate TABS</i>	F	
Proton Pump Inhibitors		
<i>dexlansoprazole</i>	F	QL(90 EA per 120 day(s) retail; 270 EA per 360 days mail)
<i>esomeprazole magnesium CPDR 20 MG</i>	F	QL(2 EA daily); RX/OTC
<i>esomeprazole magnesium CPDR 40 MG</i>	F	QL(1 EA daily)
<i>esomeprazole magnesium TBEC</i>	F	QL(2 EA daily)
<i>lansoprazole CPDR 15 MG</i>	F	QL(60 EA per 30 day(s) retail); RX/OTC
<i>lansoprazole CPDR 30 MG</i>	F	QL(60 EA per 30 day(s) retail; 180 EA per 90 days mail)
NEXIUM 24HR TBEC 20 MG	F	QL(2 EA daily)
<i>omeprazole CPDR 20 MG, 40 MG</i>	F	QL(2 EA daily)
<i>omeprazole CPDR 10 MG</i>	F	QL(1 EA daily)
<i>pantoprazole sodium TBEC</i>	F	QL(60 EA per 30 day(s) retail; 180 EA per 90 days mail)
<i>rabeprazole sodium TBEC</i>	F	QL(1 EA daily)
Ulcer Drugs - Prostaglandins		
<i>misoprostol</i>	F	

Drug Name	Drug Tier	Requirements/ Limits
Ulcer Therapy Combinations		
<i>famotidine-calcium carbonate-magnesium hydroxide</i>	F	
<i>omeprazole-sodium bicarbonate CAPS 1100 MG-20 MG</i>	F	QL(60 EA per 30 day(s) retail; 180 EA per 90 days mail); RX/OTC
<i>omeprazole-sodium bicarbonate CAPS 1100 MG-40 MG</i>	F	QL(60 EA per 30 day(s) retail)
URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms		
Urinary Antispasmodic - Antimuscarinics (Anticholinergic)		
<i>darifenacin hydrobromide</i>	F	QL(1 EA daily); ST
<i>oxybutynin chloride TABS 5 MG</i>	F	MP
<i>oxybutynin chloride TB24</i>	F	MP
OXYTROL FOR WOMEN PTTW	F	RX/OTC
OXYTROL PTTW	F	RX/OTC
<i>solifenacin succinate TABS</i>	F	QL(1 EA daily)
<i>tolterodine tartrate CP24</i>	F	QL(1 EA daily)
<i>tolterodine tartrate TABS</i>	F	QL(2 EA daily)
<i>trospium chloride CP24</i>	F	QL(1 EA daily); ST
<i>trospium chloride TABS</i>	F	
Urinary Antispasmodics - Cholinergic Agonists		
<i>bethanechol chloride</i>	F	MP
VACCINES		
Bacterial Vaccines		
BEXSERO 0.5 ML	F	
CAPVAXIVE	F	AL(At least 18 yrs old)
MENACTRA	F	

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MENQUADFI 0.5 ML	F		FLUCELVAX SUSP	F	
MENVEO SOLR	F		FLUCELVAX SUSY	F	
PENBRAYA	F		FLULAVAL QUADRIVALENT SUSY	F	
PNEUMOVAX 23 SOLN	F		FLULAVAL SUSY	F	
PNEUMOVAX 23 SOSY	F		FLUMIST	F	
PREVNAR 13	F		FLUMIST QUADRIVALENT	F	
PREVNAR 20	F		FLUZONE HIGH-DOSE QUADRIVALENT	F	
TRUMENBA 0.5 ML	F		FLUZONE HIGH-DOSE SUSY	F	
VAXNEUVANCE	F		FLUZONE QUADRIVALENT SUSP	F	
Viral Vaccines			FLUZONE QUADRIVALENT SUSY	F	
AFLURIA PRESERVATIVE FREE SUSY	F		FLUZONE SUSP	F	
AFLURIA QUADRIVALENT SUSP	F		FLUZONE SUSY	F	
AFLURIA QUADRIVALENT SUSY 0.5 ML	F		GARDASIL 9 SUSP 0.5 ML	F	AL(Up to 45 yrs old)
AFLURIA SUSP	F		GARDASIL 9 SUSY 0.5 ML	F	AL(Up to 45 yrs old)
COMIRNATY 5-11 YEARS SUSP 10 MCG/0.3ML	F	AL(At least 5 yrs old - Up to 11 yrs old)	HAVRIX 1440 EL U/ML	F	
COMIRNATY SUSP	F	AL(At least 12 yrs old)	HAVRIX IM 720 EL U/0.5ML	F	
COMIRNATY SUSY	F	AL(At least 12 yrs old)	HEPLISAV-B SOSY	F	
ENGRIX-B SUSP 20 MCG/ML	F		IPOLE	F	
ENGRIX-B SUSY	F		M-M-R II SOLR	F	
FLUAD	F		MNEXSPIKE SUSY 10 MCG/0.2ML	F	AL(At least 12 yrs old)
FLUAD QUADRIVALENT	F		MODERNA COVID-19 BIVALENT	F	AL(Up to 11 yrs old)
FLUARIX QUADRIVALENT SUSY	F		MODERNA COVID-19 VAC 6M-11Y SUSP	F	AL(Up to 11 yrs old)
FLUARIX SUSY	F		MODERNA COVID-19 VAC 6M-11Y SUSY	F	AL(Up to 11 yrs old)
FLUBLOK QUADRIVALENT	F		MODERNA COVID-19 VACCINE SUSP	F	AL(At least 12 yrs old)
FLUBLOK SOSY	F		NOVAVAX COVID-19 VACCINE SUSP	F	AL(At least 12 yrs old)
FLUCELVAX QUADRIVALENT SUSP	F				
FLUCELVAX QUADRIVALENT SUSY	F				

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Drug Name	Drug Tier	Requirements/ Limits
NOVAVAX COVID-19 VACCINE SUSY	F	AL(At least 12 yrs old)
NUVAXOVID COVID-19 VACCINE SUSY 5 MCG/0.5ML	F	AL(At least 12 yrs old)
PFIZER COVID-19 VAC-TRIS 5-11Y SUSP	F	AL(At least 5 yrs old - Up to 11 yrs old)
PFIZER COVID-19 VAC-TRIS 6M-4Y SUSP	F	AL(Up to 4 yrs old)
PFIZER-BIONT COVID-19 VAC-TRIS SUSP	F	AL(At least 12 yrs old)
PFIZER-BIONTECH COVID-19 VACC SUSP	F	AL(At least 12 yrs old)
PREHEVBRIO	F	
PRIORIX SUSR	F	
PROQUAD SUSR	F	
RECOMBIVAX HB SUSP	F	
RECOMBIVAX HB SUSY	F	
SHINGRIX	F	AL(At least 50 yrs old)
SPIKEVAX 6M-11Y SUSY 25 MCG/0.25ML	F	AL(Up to 11 yrs old)
SPIKEVAX SUSP	F	AL(At least 12 yrs old)
SPIKEVAX SUSY	F	AL(At least 12 yrs old)
TWINRIX SUSY	F	
VAQTA	F	
VARIVAX SUSR	F	
VAGINAL AND RELATED PRODUCTS		
Spermicides		
TODAY SPONGE MISC	F	
VCF VAGINAL CONTRACEPTIVE FILM	F	
VCF VAGINAL CONTRACEPTIVE GEL	F	
Vaginal Anti-infectives		
CLEOCIN SUPP	F	
<i>clindamycin phosphate vaginal CREA</i>	F	

Drug Name	Drug Tier	Requirements/ Limits
<i>clotrimazole vaginal CREA 1 %</i>	F	
GYNAZOLE-1	F	
<i>metronidazole vaginal</i>	F	
<i>miconazole nitrate vaginal CREA 2 %</i>	F	
<i>miconazole nitrate vaginal KIT</i>	F	
<i>miconazole nitrate vaginal SUPP</i>	F	
<i>terconazole vaginal CREA</i>	F	
Vaginal Anti-inflammatory Agents		
<i>hydrocortisone acetate vaginal</i>	F	QL(150 GM per 30 day(s) retail; 450 GM per 90 days mail)
Vaginal Estrogens		
<i>estradiol vaginal CREA</i>	F	
<i>estradiol vaginal TABS</i>	F	
FEMRING	F	
PREMARIN	F	
VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions		
Anaphylaxis Therapy Agents		
<i>epinephrine (anaphylaxis) SOAJ</i>	F	QL(4 EA per fill retail; 10 EA per 365 day(s) retail; 10 EA per 365 days mail)
<i>epinephrine (anaphylaxis) SOAJ 0.15 MG/0.3ML</i>	F	QL(4 EA per fill retail; 10 EA per 365 day(s) retail)
Vasopressors		
<i>midodrine hcl</i>	F	
VITAMINS		
Oil Soluble Vitamins		

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
AQUA-E LIQD 75 UNIT/ML	F		<i>thiamine mononitrate</i> TABS 100 MG	F	
AQUASOL A SOLN 50000 UNIT/ML	F	QL(34 ML per 30 day(s) retail)			
<i>cholecalciferol</i> CAPS	F				
<i>cholecalciferol</i> LIQD PO 10 MCG/ML, 400 UNIT/ML	F				
<i>cholecalciferol</i> TABS 10 MCG, 1000 UNIT, 25 MCG, 400 UNIT, 25 MCG	F				
<i>ergocalciferol</i> CAPS	F				
<i>ergocalciferol</i> SOLN PO 200 MCG/ML	F				
<i>phytonadione</i> TABS 5 MG	F				
<i>vitamin a</i> CAPS 10000 UNIT, 3 MG, 3000 MCG, 10000 UNIT	F				
<i>vitamin e</i> CAPS 180 MG, 400 UNIT, 180 MG	F				
Water Soluble Vitamins					
<i>ascorbic acid</i> CHEW 250 MG, 500 MG	F				
<i>ascorbic acid</i> CPR	F				
<i>ascorbic acid</i> TABS	F				
<i>ascorbic acid</i> TBCR 500 MG, 1000 MG	F				
<i>biotin</i> CAPS 5 MG, 5000 MCG	F				
<i>biotin</i> TABS 5 MG, 5000 MCG	F				
<i>niacinamide</i> TABS 500 MG	F				
<i>niacin</i> CPR 500 MG	F				
<i>niacin</i> TABS 50 MG, 100 MG, 500 MG	F				
<i>niacin</i> TBCR 500 MG	F				
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bromocriptine mesylate TABS 2.5		butalbital-acetaminophen TABS 50	calcium citrate TABS
MG	21	MG-325 MG	calcium citrate-vitamin d TABS
brompheniramine & pseudoeph ELIX		butalbital-acetaminophen-caffeine	calcium gluconate SOLN
29		TABS 40 MG-50 MG-325 MG	calcium polycarbophil TABS
brompheniramine & pseudoeph LIQD		butalbital-aspirin-caffeine CAPS	capecitabine
15 MG/5ML-1 MG/5ML	29	butenafine hcl	capsaicin CREA 0.075 %, 0.1 %
budesonide (inhalation) SUSP	8	butorphanol tartrate NA 10 MG/ML	capsaicin-menthol PTCH
budesonide (nasal)	93	cabergoline	CAPSIDERM PTCH
budesonide CPEP	28	caffeine citrate SOLN IV 60 MG/3ML	captopril
budesonide-formoterol fumarate		1	CAPVAXIVE
dihydrate	8	calcipotriene CREA	carbamazepine CHEW 100 MG
bumetanide TABS	36	calcipotriene OINT	carbamazepine CP12
buprenorphine hcl SUBL 2 MG	5	calcipotriene SOLN	carbamazepine SUSP
buprenorphine hcl SUBL 8 MG	5	calcitonin (salmon) NA	carbamazepine TABS
buprenorphine hcl-naloxone hcl		calcitriol CAPS	carbamazepine TB12
dihydrate FILM SL 0.5 MG-2 MG	5	calcitriol SOLN PO	carbamide peroxide (otic) 6.5 %
buprenorphine hcl-naloxone hcl		calcium acetate (phosphate binder)	carbidopa-levodopa TABS
dihydrate FILM SL 1 MG-4 MG	5	CAPS	carbidopa-levodopa TBCR
buprenorphine hcl-naloxone hcl		calcium acetate (phosphate binder)	carbidopa-levodopa-entacapone
dihydrate FILM SL 2 MG-8 MG	5	TABS	carboplatin SOLN 50 MG/5ML, 150
buprenorphine hcl-naloxone hcl		calcium carbonate (antacid) CHEW	MG/15ML, 450 MG/45ML, 600
dihydrate FILM SL 3 MG-12 MG	5	500 MG, 1000 MG	MG/60ML
buprenorphine hcl-naloxone hcl		calcium carbonate (antacid) SUSP	carboprost tromethamine SOLN
dihydrate SUBL 0.5 MG-2 MG	5	calcium carbonate TABS	carboxymethylcellulose sodium
buprenorphine hcl-naloxone hcl		calcium carbonate-cholecalciferol	(ophth) GEL
dihydrate SUBL 2 MG-8 MG	5	TABS	carboxymethylcellulose sodium
bupropion hcl (smoking deterrent)	98	calcium carbonate-mag hydrox SUSP	(ophth) SOLN 0.25 %, 0.5 %
bupropion hcl TABS	10		carboxymethylcellulose-glycerin
bupropion hcl TB12	10	calcium carbonate-vitamin d TABS	SOLN
bupropion hcl TB24 150 MG, 300 MG		125 UNIT-250 MG, 250 MG-125	
	11	UNIT, 600 MG-200 UNIT	

CARDIOCOM LANCING DEVICE	NEEDLE	73	MG/5ML, 375 MG/5ML	26
MISC	CARETOUCH INSULIN SYRINGE		cefadroxil CAPS	26
CAREONE ADVANCED LANCING	73		cefadroxil SUSR	26
DEV MISC	CARETOUCH LANCING/EJECTOR		cefadroxil TABS	26
CAREONE INSULIN SYRINGE ...	MISC	49	cefazolin sodium SOLR IJ 1 GM, 10	
CAREONE LANCET SUPER THIN	CARETOUCH LUER LOCK	73	GM, 500 MG	26
30G	CARETOUCH LUER LOCK		CEFAZOLIN SODIUM-DEXTROSE	
CAREONE LANCET THIN 23G ...	SYR/NEEDLE	73	SOLN 4 %-1 GM/50ML	26
CAREPOINT POLY HUB NEEDLE	CARETOUCH LUER SLIP	73	CEFAZOLIN SODIUM-DEXTROSE	
73	CARETOUCH SAFETY LANCETS		SOLR 4 %-1 GM	26
CAREPOINT SAFETY 1ST NEEDLE	49		cefdinir CAPS	27
.....	CARETOUCH SAFETY LANCETS		cefdinir SUSR	27
CAREPOINT SAFETY1ST	26G	49	cefepime hcl SOLR IJ 1 GM	27
SYR/NEEDLE	CARETOUCH TWIST LANCETS		cefixime SUSR 100 MG/5ML	27
CAREPOINT SYRINGE CATHETER	28G	49	cefotetan disodium IJ 1 GM, 2 GM	26
TIP	CARETOUCH TWIST LANCETS		cefoxitin sodium IV	26
CAREPOINT SYRINGE LUER LOCK	30G	49	cefpodoxime proxetil SUSR	27
.....	CARETOUCH TWIST LANCETS		cefpodoxime proxetil TABS	27
CAREPOINT SYRINGE LUER SLIP	33G	49	cefprozil SUSR	26
73	CARETOUCH TWIST MC LANCETS		cefprozil TABS	27
CAREPOINT TUBERCLN	30G	49	ceftazidime IJ 1 GM, 6 GM	27
SYR/LUER SL MISC	carisoprodol TABS 350 MG	93	ceftriaxone sodium IJ 1 GM, 2 GM,	
CARESENS CONTROL A SOLN ...	carmustine	18	250 MG, 500 MG	27
CARESENS CONTROL SOLUTION	carteolol hcl (ophth)	94	ceftriaxone sodium in dextrose ...	27
A/B SOLN	carvedilol	25	cefuroxime axetil TABS	27
CARESENS LANCETS	caspofungin acetate 70 MG	14	cefuroxime sodium IJ 750 MG	27
CARESENS LANCETS 30G	CASPOFUNGIN ACETATE 70 MG		CELEBRATE MULTI-COMPLETE 18	
CARESTART COVID-19 HOME	14		CAPS	89
TEST KIT	CAYA DPRH	44	CELEBRATE MULTI-COMPLETE 36	
CARETOUCH ALCOHOL PREP ...	CAYSTON	17	CAPS	89
CARETOUCH CATHETER TIP	CBD4 FREEZE PUMP VANISH		CELEBRATE MULTI-COMPLETE 45	
SYRINGE	SCENT CREA	34	CAPS	89
CARETOUCH CONTROL SOL	cefaclor CAPS	26		
LEVEL 2 LIQD	cefaclor SUSR 125 MG/5ML, 250			
CARETOUCH HYPODERMIC				

CELEBRATE MULTI-COMPLETE 60 CAPS	89	chlorpheniramine maleate TABS ..	15	ciprofloxacin in d5w	38
celecoxib 50 MG, 100 MG, 200 MG	3	chlorpromazine hcl SOLN	22	ciprofloxacin-dexamethasone	96
CENVITE LIQD	89	chlorpromazine hcl TABS	22	cisplatin SOLN 50 MG/50ML, 100 MG/100ML, 200 MG/200ML	18
cephalexin CAPS 250 MG, 500 MG	26	chlorthalidone 25 MG, 50 MG	36	citalopram hydrobromide SOLN ...	11
cephalexin SUSR	26	chlorzoxazone TABS 500 MG	93	citalopram hydrobromide TABS ...	11
cephalexin TABS	26	CHOICEFUL MULTIVITAMIN CAPS .	89	CITRANATAL BLOOM	91
CERDELGA	40	cholecalciferol CAPS	103	cladribine 10 MG/10ML	18
CEREZYME 400 UNIT	40	cholecalciferol LIQD PO 10 MCG/ML, 400 UNIT/ML	103	clarithromycin SUSR	42
cetirizine hcl CHEW	15	cholecalciferol TABS 10 MCG, 1000 UNIT, 25 MCG, 400 UNIT, 25 MCG	103	clarithromycin TABS	42
cetirizine hcl SOLN PO	15	cholecalciferol TABS 10 MCG, 1000 UNIT, 25 MCG, 400 UNIT, 25 MCG	103	clarithromycin TB24	42
cetirizine hcl SYRP PO	15	cholestyramine light PACK	15	CLASSIC PRENATAL TABS	91
cetirizine hcl TABS	15	cholestyramine light POWD	15	CLEANLET LANCETS 28G	49
cetirizine-pseudoephedrine	29	cholestyramine PACK	15	clemastine fumarate SYRP	15
cevimeline hcl	88	cholestyramine POWD	15	clemastine fumarate TABS 1.34 MG, 2.68 MG	15
CHEMET	14	CHOSEN LANCETS 30G	49	CLEOCIN SUPP	102
CHEMSTRIP K STRP	35	CHOSEN LANCING DEVICE MISC	49	CLEVER CHEK LANCETS	49
CHEMSTRIP UGK	35	CHOSEN SAFETY LANCETS 28G	49	CLEVER CHOICE COMFORT EZ	49
chlordiazepoxide hcl CAPS	7	ciclopirox SOLN	31	CLEVER CHOICE HOLDING CHAMBER DEVI	82
chlordiazepoxide-amitriptyline 10 MG-25 MG	97	cidofovir	24	CLEVER CHOICE LANCETS 21G	49
chlordiazepoxide-amitriptyline 5 MG-12.5 MG	97	cilostazol	39	CLEVER CHOICE LANCETS 23G	50
chlorhexidine gluconate (mouth-throat)	88	CIMDUO	23	CLEVER CHOICE LANCETS 28G	50
CHLORHEXIDINE GLUCONATE SOLN XX	22	cimetidine hcl PO 300 MG/5ML ...	99	clindamycin hcl 150 MG, 300 MG .	17
chloroquine phosphate TABS	18	cimetidine TABS	100	clindamycin palmitate hydrochloride .	17
chlorpheniramine & pseudoeph TABS	29	cinacalcet hcl	37	clindamycin phosphate (topical) GEL	30
chlorpheniramine maleate SYRP ..	15	CIPRO SUSR	38		
		ciprofloxacin hcl (ophth) SOLN	95		
		ciprofloxacin hcl TABS	38		

clindamycin phosphate (topical) LOTN30	CLOZARIL TABS (Use clozapine) .22	COMPACT SPACE CHAMBER/MED MASK DEVI82
clindamycin phosphate (topical) SOLN30	CMX PTCH34	COMPACT SPACE CHAMBER/SM MASK DEVI82
clindamycin phosphate (topical) SWAB30	C-NATE DHA CAPS91	COMPLETE NATAL DHA91
clindamycin phosphate vaginal CREA102	COAGUCHEK LANCETS50	COMPLETENATE CHEW91
clobetasol propionate CREA 0.05 % . 32	colchicine TABS39	CONCEPT DHA91
clobetasol propionate emollient base 0.05 %32	colchicine w/ probenecid39	COOL CONTROL A SOLN50
clobetasol propionate GEL 0.05 % 32	colestipol hcl GRAN15	COOL CONTROL B SOLN50
clobetasol propionate LIQD32	colestipol hcl PACK15	CORLANOR SOLN26
clobetasol propionate LOTN32	colestipol hcl TABS15	COVID-19 OTC ANTIGEN 1-PACK KIT35
clobetasol propionate OINT 0.05 % 32	COMBIVENT RESPIMAT AERS ...8	COVID-19 OTC ANTIGEN 2-PACK KIT35
clobetasol propionate SOLN 0.05 % . 32	COMFORT ASSURED LANCETS 28G50	COVID-19 SPECIMEN COLLECTION35
clocortolone pivalate32	COMFORT ASSURED LANCETS 33G50	COVID-19 TESTING BY PHARMACIST35
clomiphene citrate TABS37	COMFORT EZ INSULIN SYRINGE . 73	CREON CPEP36
clonazepam TABS9	COMFORT TOUCH ALCOHOL PREP69	cromolyn sodium (mastocytosis) ..38
clonidine hcl (adhd) TB121	COMFORT TOUCH LANCETS 31G . 50	cromolyn sodium (nasal) 5.2 MG/ACT93
clonidine hcl TABS16	COMFORT TOUCH PLUS LANCETS 28G50	cromolyn sodium (ophth)95
clonidine PTWK16	COMFORT TOUCH PLUS LANCETS 30G50	cromolyn sodium NEBU7
clopidogrel bisulfate 75 MG39	COMFORT TOUCH TWIST LANCET 30G50	CULTURELLE PROBIOTIC MEN DAILY CAPS89
clotrimazole (topical) CREA31	COMIRNATY 5-11 YEARS SUSP 10 MCG/0.3ML101	CURITY ALCOHOL PREPS69
clotrimazole (topical) SOLN31	COMIRNATY SUSP101	CVS ADULT 50+ EYE HEALTH CAPS89
clotrimazole87	COMIRNATY SUSY101	CVS ALCOHOL PREP PADS69
clotrimazole vaginal CREA 1 % ..102	COMPACT SPACE CHAMBER DEVI82	CVS DRESSING 4"X4-3/4" MISC .42
clotrimazole w/ betamethasone CREA31	COMPACT SPACE CHAMBER/LG MASK DEVI82	CVS EYE HEALTH ADULT 50+ CAPS89
clozapine TABS22		

CVS GLUCOSE CHEW12	cyclosporine CAPS 87	daunorubicin hcl SOLN 50 MG/10ML 19
CVS IMMUNE SUPPORT CAPS ..89	cyclosporine modified (for microemulsion) CAPS 87	DECUBI-VITE CAPS89
CVS KETONE CARE35	cyclosporine modified (for microemulsion) SOLN 87	deferasirox PACK14
CVS LANCETS ORIGINAL 50	cyproheptadine hcl SYRP15	deferasirox TABS 14
CVS LANCETS THIN 26G50	cyproheptadine hcl TABS15	deferasirox TBSO14
CVS LANCING DEVICE MISC 50	CYRAMZA19	deferoxamine mesylate 14
CVS MEPITEL TRANSPARENT FILM MISC42	CYSTAGON CAPS 39	DEKAS ESSENTIAL LIQD90
CVS PRENATAL TABS 100 MG-2.6 MG-800 MCG-400 UNIT-4 MCG-1.7 MG-18 MG-27 MG-1.5 MG-25 MG- 263 MG-11 UNIT-4000 UNIT91	dabigatran etexilate mesylate CAPS 110 MG9	DEKAS PLUS CAPS89
CVS PREP69	dabigatran etexilate mesylate CAPS 75 MG, 150 MG 9	DEKAS PLUS LIQD90
CVS SOFT GLUCOSE CHEW 12	dacarbazine SOLR 200 MG 20	DEKAS PLUS OCEAN CAPS89
CVS ULTRA THIN LANCETS50	danazol CAPS5	DELSTRIGO 23
CVS VISION HEALTH CAPS89	dantrolene sodium CAPS93	demeclocycline hcl TABS99
CVS WINDOW BANDAGES MISC 42	dantrolene sodium SOLR93	DEMEROL SOLN IJ 75 MG/ML 4
cyanocobalamin SOLN IJ 1000 MCG/ML40	dapagliflozin propanediol13	DEPLIN MA CAPS89
cyanocobalamin TABS 100 MCG, 500 MCG, 1000 MCG40	dapagliflozin propanediol-metformin hcl 1000 MG-10 MG 11	DEPO-SUBQ PROVERA 104 SUSY SC28
cyanocobalamin TBCR 1000 MCG 40	dapagliflozin propanediol-metformin hcl 1000 MG-5 MG11	desipramine hcl TABS 11
cyclobenzaprine hcl TABS 5 MG, 10 MG93	dapsone 17	desmopressin acetate SOLN IJ ...37
CYCLOGYL94	daptomycin 500 MG17	DESMOPRESSIN ACETATE SOLN NA37
CYCLOMYDRIL94	DAPTOMYCIN 500 MG17	desmopressin acetate spray37
cyclopentolate hcl 1 %94	darifenacin hydrobromide100	desmopressin acetate spray refrigerated 0.01 %37
cyclophosphamide CAPS18	darunavir TABS 600 MG23	desmopressin acetate TABS 0.1 MG 37
cyclophosphamide SOLR IJ 18	darunavir TABS 800 MG23	desmopressin acetate TABS 0.2 MG 37
cycloserine 18	dasatinib 20 MG20	desogestrel & ethinyl estradiol27
cyclosporine (ophth) EMUL95	dasatinib 50 MG, 70 MG, 80 MG, 100 MG, 140 MG 20	desogestrel-ethinyl estradiol (biphasic)27
	daunorubicin hcl SOLN 20 MG/4ML 19	desogestrel-ethinyl estradiol (triphasic)27

desvenlafaxine succinate	11	100 MG/5ML-10 MG/5ML, 200	DIASTIX	35
DEX4	12	MG/10ML-20 MG/10ML	DIASTIX REAGENT	35
DEX4 NATURALS	12	dextromethorphan-guaifenesin TABS	DIATHRIVE GLUCOSE CONTROL	
dexamethasone ELIX	28	400 MG-20 MG	SOLN LIQD	51
dexamethasone sodium phosphate		dextromethorphan-guaifenesin TB12	DIATHRIVE LANCET ULTRA THIN	
(ophth)	95	1200 MG-60 MG, 600 MG-30 MG	30	51
dexamethasone SOLN	28	dextromethorphan-phenylephrine-	DIATHRIVE LANCETS	51
dexamethasone TABS	28	acetaminophen LIQD	DIATHRIVE LANCING DEVICE	
DEXATRAN CAPS	89	dextrose (diabetic use) GEL	MISC	51
dexlansoprazole	100	dextrose in lactated ringers	diazepam (anticonvulsant) GEL	9
dexmethylphenidate hcl CP24 25		dextrose SOLN 5 %	diazepam CONC	7
MG, 30 MG, 35 MG, 40 MG	1	dextrose w/ sodium chloride 0.9 %-5	DIAZEPAM SOAJ	7
dexmethylphenidate hcl CP24 5 MG,		%, 5 %-0.45 %, 5 %-0.9 %	diazepam SOLN IJ 5 MG/ML, 10	
10 MG, 15 MG, 20 MG	1	DIALYVITE 800 LIQD	MG/2ML	7
dexmethylphenidate hcl TABS	1	DIASCREEN 10 MISC	diazepam TABS	7
dexrazoxane hcl 250 MG	20	DIASCREEN 1B MISC	diazoxide	12
dexrazoxane hcl 500 MG	20	DIASCREEN 1G STRP	diclofenac sodium (ophth)	95
dextran 70-hypromellose 0.3 %-0.1		DIASCREEN 1K MISC	diclofenac sodium (topical) GEL EX	
%	94	DIASCREEN 1K STRP	31	
dextroamphetamine sulfate CP24	1	DIASCREEN 2GK STRP	diclofenac sodium (topical) SOLN EX	
dextroamphetamine sulfate TABS 5		DIASCREEN 2GP MISC	1.5 %	31
MG, 10 MG	1	DIASCREEN 3 MISC	diclofenac sodium TB24	3
dextromethorphan hbr SYRP 10		DIASCREEN 4NL MISC	diclofenac sodium TBEC 50 MG, 75	
MG/5ML	29	DIASCREEN 4OBL MISC	MG	3
dextromethorphan polistirex SUER		DIASCREEN 4PH MISC	dicloxacillin sodium	97
29		DIASCREEN 5 MISC	dicyclomine hcl CAPS	99
dextromethorphan-guaifenesin LIQD		DIASCREEN 6 MISC	dicyclomine hcl SOLN IM	99
100 MG/5ML-10 MG/5ML, 100		DIASCREEN 7 MISC	dicyclomine hcl SOLN PO	99
MG/5ML-5 MG/5ML, 150 MG/7.5ML-		DIASCREEN 8 MISC	dicyclomine hcl TABS	99
15 MG/7.5ML, 200 MG/10ML-20		DIASCREEN 9 MISC	diflunisal TABS	4
MG/10ML, 200 MG/20ML-20		DIASCREEN LIQUID URINE	digoxin SOLN PO 0.05 MG/ML	25
MG/20ML, 200 MG/5ML-10 MG/5ML,		CONTROL MISC	digoxin TABS 125 MCG, 250 MCG	
200 MG/5ML-30 MG/5ML, 400			25	
MG/20ML-20 MG/20ML	29			
dextromethorphan-guaifenesin SYRP				

DILANTIN (Use phenytoin sodium extended)	10	disopyramide phosphate CAPS	7	doxercalciferol SOLN	37
DILANTIN	10	disulfiram	97	doxorubicin hcl SOLN	19
DILANTIN INFATABS CHEW (Use phenytoin)	10	divalproex sodium CSDR	10	doxorubicin hcl SOLR 50 MG	19
DILANTIN SUSP (Use phenytoin) .	10	divalproex sodium TB24	10	doxycycline (monohydrate) CAPS 50 MG, 100 MG	99
DILANTIN-125 SUSP (Use phenytoin)	10	divalproex sodium TBEC	10	doxycycline (monohydrate) SUSR .	99
diltiazem hcl coated beads CP24 ..	25	dobutamine hcl 12.5 MG/ML, 250 MG/20ML	26	doxycycline (monohydrate) TABS 50 MG, 100 MG	99
diltiazem hcl CP12	25	docetaxel CONC 20 MG/ML, 80 MG/4ML	21	doxycycline hyclate CAPS	99
diltiazem hcl CP24	25	DOCETAXEL CONC 20 MG/ML, 80 MG/4ML	21	doxycycline hyclate SOLR	99
diltiazem hcl extended release beads	25	docosanol	32	doxycycline hyclate TABS 20 MG, 100 MG	99
diltiazem hcl SOLN	25	docusate sodium CAPS 100 MG, 250 MG	42	doxylamine succinate (sleep)	41
diltiazem hcl TABS	25	docusate sodium ENEM 283 MG/5ML	42	doxylamine-pyridoxine TBEC	14
diltiazem hcl TB24 180 MG, 240 MG, 300 MG, 360 MG, 420 MG	25	docusate sodium LIQD 50 MG/5ML, 100 MG/10ML	42	dronabinol CAPS	14
dimenhydrinate TABS	14	docusate sodium TABS	42	DROPLET GENTEEL LANCING DEVICE MISC	51
dimethyl fumarate CDPK	98	dofetilide	7	DROPLET INSULIN SYRINGE ...	73
dimethyl fumarate CPDR	98	donepezil hydrochloride TABS 23 MG	97	DROPLET LANCETS ULTRA THIN 30G	51
diphenhydramine hcl (sleep) TABS 40		donepezil hydrochloride TABS 5 MG, 10 MG	97	DROPLET LANCING DEVICE MISC .	51
diphenhydramine hcl CAPS	15	donepezil hydrochloride TBDP	97	DROPLET PERSONAL LANCETS 30G	51
diphenhydramine hcl ELIX 12.5 MG/5ML	15	dopamine hcl 40 MG/ML	26	DROPSAFE ACTI-LANCE 23G ...	51
diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML	15	dorzolamide hcl	95	DROPSAFE ALCOHOL PREP ...	69
diphenhydramine hcl TABS 25 MG 15		dorzolamide hcl-timolol maleate ..	94	DROPSAFE SAFETY SYRINGE/NEEDLE	73
diphenoxylate w/ atropine LIQD ...	13	DOVATO	23	DROPSAFE SICURA	73
diphenoxylate w/ atropine TABS ...	13	doxazosin mesylate	16	drospirenone-ethinyl estradiol	27
dipyridamole	40	doxepin hcl CAPS	11	drospirenone-ethinyl estradiol-levomefolate calcium	27
		doxepin hcl CONC	11	DROXIA CAPS	40
		doxercalciferol CAPS	37		

DRUG MART LANCING DEVICE	EASY COMFORT LANCETS TWIST	SYR74
MISC51	TOP52	EASY TOUCH INSULIN SYRINGE
DRUG MART ON-THE-GO LANCET	EASY GLIDE CATH TIP SYRINGE	74
30G51	74	EASY TOUCH LANCETS 21G ...52
DRUG MART UNILET LANCETS	EASY GLIDE LUER LOCK SYRINGE	EASY TOUCH LANCETS 23G ...52
28G52	74	EASY TOUCH LANCETS 26G ...52
DRUG MART UNILET LANCETS	EASY GLIDE SLIP LOCK SYRINGE	EASY TOUCH LANCETS 28G ...52
30G52	74	EASY TOUCH LANCETS
DRUG MART UNILET LANCETS	EASY MINI EJECT LANCING	28G/TWIST52
33G52	DEVICE MISC52	EASY TOUCH LANCETS 30G ...52
DRYSOL SOLN34	EASY MINI LANCING DEVICE MISC	EASY TOUCH LANCETS
DULERA8	52	30G/TWIST52
duloxetine hcl CPEP 20 MG, 30 MG,	EASY TOUCH ALCOHOL PREP	EASY TOUCH LANCETS 32G ...52
60 MG11	MEDIUM69	EASY TOUCH LANCETS
DUO-CARE CONTROL SOLUTION	EASY TOUCH ALLERGY SYRINGE	32G/TWIST52
LIQD52	MISC74	EASY TOUCH LANCETS
DUREX EXTRA SENSITIVE THIN	EASY TOUCH CONTROL HIGH &	33G/TWIST52
DEVI44	LOW SOLN52	EASY TOUCH LANCING DEVICE
DUREX EXTRA SENSITIVE THIN	EASY TOUCH FLIPLOCK INSULIN	MISC53
MISC44	SY74	EASY TOUCH SAFETY LANCETS
DUREX REALFEEL44	EASY TOUCH FLIPLOCK NEEDLES	21G53
DUREX TROPICAL MISC44	74	EASY TOUCH SAFETY LANCETS
dutasteride39	EASY TOUCH FLIPLOCK SAFETY	23G53
EASIVENT MASK LARGE MISC ..82	SYR74	EASY TOUCH SAFETY LANCETS
EASIVENT MASK MEDIUM MISC 83	EASY TOUCH FLURINGE74	26G53
EASIVENT MASK SMALL MISC ..83	FLIPLOCK74	EASY TOUCH SAFETY LANCETS
EASIVENT MISC83	EASY TOUCH FLURINGE	28G53
EASY COMFORT ALCOHOL PADS	SHEATHLOCK74	EASY TOUCH SAFETY SYRINGE
69	EASY TOUCH HEALTHPRO	74
EASY COMFORT INSULIN	HIGH/LOW LIQD52	EASY TOUCH SHEATHLOCK
SYRINGE73	EASY TOUCH HYPODERMIC	SYRINGE74
EASY COMFORT INSULIN	NEEDLE74	EASY TOUCH SYRINGE BARREL
SYRINGE74	EASY TOUCH INSULIN BARRELS .	74
EASY COMFORT LANCETS52	74	EASY TOUCH TB FLIPLOCK
	EASY TOUCH INSULIN SAFETY	SYRINGE MISC74

EASY TOUCH TB SHEATHLOCK SYR MISC	74	25 MG, 50 MG, 75 MG	40	EMTRIVA SOLN	23
EASY TOUCH TB SHEATHLOCK SYR MISC	75	EMBECTA AUTOSHIELD DUO ...	75	enalapril maleate & hydrochlorothiazide	16
EASYMAX 15 LEVEL 2 CONTROL SOLN	53	EMBECTA INS SYR U/F 1/2 UNIT 75		enalapril maleate TABS	16
EASYMAX 15 LEVEL 2-3 CONTROL LIQD	53	EMBECTA INSULIN SYR ULTRAFINE	75	ENFAMIL POLY-VI-SOL-IRON SOLN 11 MG/ML	91
EASYMAX CONTROL NORMAL/HIGH LIQD	53	EMBECTA INSULIN SYRINGE ...	75	ENERGIX-B SUSP 20 MCG/ML .	101
EASYPOINT NEEDLE	75	EMBECTA INSULIN SYRINGE U- 100	75	ENERGIX-B SUSY	101
EASYPOINT NEEDLE/SYRINGE .	75	EMBECTA PEN NEEDLE NANO .	75	enoxaparin sodium SOLN IJ 300 MG/3ML	9
EDURANT	23	EMBECTA PEN NEEDLE NANO 2 GEN	75	enoxaparin sodium SOSY	9
efavirenz CAPS 200 MG	23	EMBECTA PEN NEEDLE ULTRAFINE	75	entacapone	21
efavirenz CAPS 50 MG	23	EMBRACE LANCETS ULTRA THIN 30G	53	entecavir TABS	24
efavirenz TABS	23	EMBRACE LANCING DEVICE/EJECTOR MISC	53	epinastine hcl (ophth)	95
efavirenz-emtricitabine-tenofovir disoproxil fumarate	23	EMBRACE PRESSURE ACTIVATED 21G	53	epinephrine (anaphylaxis) SOAJ 0.15 MG/0.3ML	102
efavirenz-lamivudine-tenofovir disoproxil fumarate	23	EMBRACE PRESSURE ACTIVATED 28G	53	epinephrine (anaphylaxis) SOAJ .	102
ELEMENT COMPACT CONTROL 2 SOLN	53	EMBRACE PRO GLUCOSE CONTROL LIQD	53	eplerenone	17
ELEMENT COMPACT CONTROL 3 SOLN	53	EMCYT	19	epoprostenol sodium	26
eletriptan hydrobromide	85	EMGALITY (300 MG DOSE) SOSY 85		EQ SPACE CHAMBER ANTI- STATIC DEVI	83
ELIGARD SC	19	EMGALITY SOAJ	85	EQ SPACE CHAMBER ANTI- STATIC L DEVI	83
ELIQUIS DVT/PE STARTER PACK TBPK	9	EMGALITY SOSY	85	EQ SPACE CHAMBER ANTI- STATIC M DEVI	83
ELIQUIS TABS	9	emtricitabine CAPS	23	EQ SPACE CHAMBER ANTI- STATIC S DEVI	83
ELLA	28	emtricitabine-rilpivirine-tenofovir disoproxil fumarate	23	EQL ALCOHOL SWABS	69
ELMIRON CAPS	39	emtricitabine-tenofovir disoproxil fumarate	23	EQL PRENATAL FORMULA TABS 91	
eltrombopag olamine PACK 12.5 MG, 25 MG	40			ergocalciferol CAPS	103
eltrombopag olamine TABS 12.5 MG,				ergocalciferol SOLN PO 200 MCG/ML	103

ergotamine w/ caffeine TABS85	estradiol TABS38	famciclovir24
ERIVEDGE19	estradiol vaginal CREA102	famotidine SOLN 20 MG/2ML, 40 MG/4ML, 200 MG/20ML100
erlotinib hcl19	estradiol vaginal TABS102	famotidine SUSR100
erythromycin (acne aid) GEL30	estradiol valerate38	famotidine TABS100
erythromycin (acne aid) SOLN30	eszopiclone41	famotidine-calcium carbonate- magnesium hydroxide100
erythromycin (ophth)95	ethambutol hcl TABS18	FANTASY LUBRICATED MISC ...44
erythromycin base CPEP42	ethosuximide CAPS10	FANTASY
erythromycin base TABS42	ethosuximide SOLN10	LUBRICATED/SPERMICIDE MISC 44
erythromycin ethylsuccinate SUSR 200 MG/5ML42	ethynodiol diacet & eth estrad27	FASENRA PEN SOAJ7
erythromycin ethylsuccinate TABS 42	etodolac CAPS3	FASENRA SOSY7
erythromycin lactobionate 500 MG 42	etodolac TABS3	FC2 FEMALE CONDOM44
erythromycin stearate TABS 250 MG 42	etodolac TB243	felodipine25
ERZOFRI 39 MG/0.25ML, 78 MG/0.5ML, 117 MG/0.75ML, 156 MG/ML, 234 MG/1.5ML21	etomidate39	FEMRING102
escitalopram oxalate SOLN11	etonogestrel-ethinyl estradiol28	fenofibrate micronized 67 MG, 134 MG, 200 MG15
escitalopram oxalate TABS 10 MG 11	etoposide CAPS21	fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG16
escitalopram oxalate TABS 5 MG, 20 MG11	etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML21	fenofibric acid16
esomeprazole magnesium CPDR 20 MG100	etravirine 100 MG23	FENSOLVI (6 MONTH) SC37
esomeprazole magnesium CPDR 40 MG100	etravirine 200 MG23	fentanyl citrate LPOP 200 MCG, 1600 MCG4
esomeprazole magnesium TBEC 100	everolimus TABS 5 MG, 10 MG ...20	fentanyl citrate LPOP 400 MCG, 600 MCG, 800 MCG, 1200 MCG4
ESSENTA WIPES 9X9"69	EVOTAZ23	fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR4
estazolam41	exemestane19	ferrous fumarate TABS40
estradiol & norethindrone acetate TABS38	EYE HEALTH AREDS 2 CAPS ...89	FERROUS GLUCONATE TABS 324 MG40
estradiol PTTW38	EYE HEALTH CAPS89	ferrous gluconate TABS40
estradiol PTWK38	ezetimibe16	ferrous sulfate dried TABS40
	ezetimibe-simvastatin15	
	EZ-LETS LANCETS 21G53	
	EZ-LETS LANCETS 26G53	
	EZ-LETS LANCETS 28G53	
	EZ-LETS LANCETS 30G53	

ferrous sulfate dried TBCR	40	FLUAD	101	fluocinonide emulsified base	33
FERROUS SULFATE POWD	40	FLUAD QUADRIVALENT	101	fluocinonide GEL	33
ferrous sulfate SOLN 15 MG/ML, 15 MG/ML	40	FLUARIX QUADRIVALENT SUSY 101		fluocinonide OINT	33
ferrous sulfate TABS 325 MG, 65 MG, 325 MG	40	FLUARIX SUSY	101	fluocinonide SOLN	33
ferrous sulfate TBEC	40	FLUBLOK QUADRIVALENT	101	fluorometholone (ophth) SUSP	95
FEVERALL INFANTS SUPP	3	FLUBLOK SOSY	101	fluorouracil (topical) CREA 5 %	31
FEVERALL JUNIOR STRENGTH SUPP	4	FLUCELVAX QUADRIVALENT SUSP	101	fluorouracil (topical) SOLN	31
fexofenadine hcl TABS 60 MG, 180 MG	15	FLUCELVAX QUADRIVALENT SUSY	101	fluorouracil	19
fexofenadine-pseudoephedrine TB12	29	FLUCELVAX QUADRIVALENT SUSY	101	fluoxetine hcl CAPS	11
fexofenadine-pseudoephedrine TB24	29	FLUCELVAX SUSP	101	fluoxetine hcl SOLN	11
FIFTY50 ALCOHOL PREP	69	FLUCELVAX SUSY	101	fluphenazine decanoate	22
FIFTY50 SAFETY SEAL LANCETS . 53		fluconazole in nacl 0.9 %-400 MG/200ML	15	fluphenazine hcl CONC	22
FIFTY50 SUPERIOR COMFORT SYR	75	fluconazole SUSR	15	fluphenazine hcl ELIX	22
FIFTY50 UNILET LANCETS 33G .54		fluconazole TABS	15	fluphenazine hcl SOLN	22
finasteride	39	fludarabine phosphate SOLR	19	fluphenazine hcl TABS	22
FINE 30	54	fludrocortisone acetate TABS	29	flurazepam hcl	41
FINGERSTIX LANCETS	54	FLULAVAL QUADRIVALENT SUSY . 101		flurbiprofen sodium	95
fingolimod hcl	98	FLULAVAL SUSY	101	flurbiprofen TABS	3
FLAREX	95	FLUMIST	101	fluticasone furoate (inhalation) 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT	8
FLAVOR PLUS LIQD	97	FLUMIST QUADRIVALENT	101	fluticasone propionate (inhalation) AEPB	8
flecainide acetate	7	fluocinolone acetonide CREA 0.01 % 32		fluticasone propionate (nasal) SUSP . 93	
FLEET BISACODYL ENEM	41	fluocinolone acetonide CREA 0.025 %	32	fluticasone propionate CREA 0.05 % 33	
FLEXICHAMBER DEVI	83	fluocinolone acetonide OIL	32	fluticasone propionate hfa	8
FLOWFLEX COVID-19 AG HOME TEST KIT	35	fluocinolone acetonide OINT	32	fluticasone propionate OINT	33
		fluocinolone acetonide SOLN	33	fluticasone-salmeterol AEPB	8
		fluocinonide CREA 0.05 %	33	fluvoxamine maleate TABS	11
				FLUZONE HIGH-DOSE	

QUADRIVALENT	101	FREESTYLE LIBRE 2 PLUS SENSOR	54	galantamine hydrobromide TABS ..	97
FLUZONE HIGH-DOSE SUSY ...	101	FREESTYLE LIBRE 2 READER ..	54	ganciclovir sodium SOLR	24
FLUZONE QUADRIVALENT SUSP 101		FREESTYLE LIBRE 2 SENSOR ..	54	GARDASIL 9 SUSP 0.5 ML	101
FLUZONE QUADRIVALENT SUSY 101		FREESTYLE LIBRE 3 PLUS SENSOR	54	GARDASIL 9 SUSY 0.5 ML	101
FLUZONE SUSP	101	FREESTYLE LIBRE 3 READER ..	54	GAVISCON SUSP 358 MG/15ML-95 MG/15ML	6
FLUZONE SUSY	101	FREESTYLE LIBRE 3 SENSOR ..	54	gefitinib	19
FML FORTE SUSP	95	FREESTYLE LIBRE READER	54	gemcitabine hcl SOLR 1 GM, 200 MG	19
FOLAGENT DHA CAPS	89	FREESTYLE UNISTICK II LANCETS	54	gemfibrozil TABS	16
FOLAMED DHA CAPS	89	FRESHKOTE PF	94	GEN7T PLUS PTCH	34
folic acid TABS 1 MG, 400 MCG ..	40	frovatriptan succinate	85	GENADEK LIQD	90
fondaparinux sodium	9	FT CHILDRENS MULTI PLUS IMMUNE CHEW	91	GENADEK STEP 1 CAPS	89
FORA GTEL BLOOD KETONE TEST	35	FT EYE HEALTH CAPS	89	GENADEK STEP 2 CAPS	89
FORA LANCETS	54	FT GLUCOSE CHEW 4 GM	12	gentamicin sulfate (ophth) SOLN ..	95
FORA LANCING DEVICE MISC ..	54	FT PRENATAL TABS	91	gentamicin sulfate (topical) CREA ..	30
FORA TEST N'GO ADV-VOICE-6 CON	35	fulvestrant SOSY	19	gentamicin sulfate (topical) OINT ..	30
fosamprenavir calcium TABS	23	FUNGOID TINCTURE SOLN	31	gentamicin sulfate IJ	2
foscarnet sodium 6000 MG/250ML 24		furosemide SOLN PO 8 MG/ML, 10 MG/ML	36	GENTEAL SEVERE GEL	94
fosfomycin tromethamine	18	furosemide TABS	36	GENTEEL BUTTERFLY TOUCH LANCET	54
fosinopril sodium & hydrochlorothiazide	16	FUZEON SOLR	23	GENTEEL CONTACT TIPS (BLUE) MISC	54
fosinopril sodium	16	gabapentin CAPS 100 MG	10	GENTEEL CONTACT TIPS (CLEAR) MISC	54
FREESTYLE CONTROL SOLUTION LIQD	54	gabapentin CAPS 300 MG	10	GENTEEL CONTACT TIPS (GREEN) MISC	54
FREESTYLE LANCETS	54	gabapentin CAPS 400 MG	10	GENTEEL CONTACT TIPS (ORANGE) MISC	55
FREESTYLE LIBRE 14 DAY READER	54	gabapentin SOLN	10	GENTEEL CONTACT TIPS (RAINBOW) MISC	55
FREESTYLE LIBRE 14 DAY SENSOR	54	gabapentin TABS 600 MG	10	GENTEEL CONTACT TIPS (VIOLET) MISC	55
		gabapentin TABS 800 MG	10		
		galantamine hydrobromide CP24 ..	97		
		galantamine hydrobromide SOLN ..	97		

GENTEEL CONTACT TIPS (YELLOW) MISC	55	28G	55	GNP CHILDRENS/EXTRA C CHEW .	91
GENTEEL NOZZLES MISC	55	GLOBAL INJECT EASE LANCETS 30G	55	GNP EASY TOUCH CONT HIGH/LOW LIQD	56
GENTEEL PLUS LANCING (BLACK) MISC	55	GLOBAL INSULIN SYRINGES ...	75	GNP EASY TOUCH CONT HIGH/LOW SOLN	56
GENTEEL PLUS LANCING (PURPLE) MISC	55	GLOBAL LANCING DEVICE MISC 55		GNP GLUCOSE CHEW	12
GENTEEL PLUS LANCING (WHITE) MISC	55	glucagon (rdna)	12	GNP INSULIN SYRINGE	75
GENTEEL PLUS LANCING DEV(BLUE) MISC	55	GLUCO TO GO CHEW	12	GNP INSULIN SYRINGES	75
GENTEEL PLUS LANCING DEV(PINK) MISC	55	GLUCOCARD 01 CONTROL LIQD 55		GNP INSULIN SYRINGES 28GX1/2"	75
GENTLE-LET GP LANCETS	55	GLUCOCARD EXPRESSION CONTROL SOLN	55	GNP INSULIN SYRINGES 29GX1/2"	75
GENTLE-LET LANCETS	55	GLUCOCARD SHINE CONTROL SOLN	55	GNP INSULIN SYRINGES 30GX5/16"	75
GENTLE-LET PLATFORMS MISC 55		GLUCOCOM LANCETS 28G	55	GNP INSULIN SYRINGES 31GX5/16"	75
GENVOYA	23	GLUCOCOM LANCETS 30G	55	GNP LANCING SYSTEM DEVICE MISC	56
GILOTRIF	19	GLUCOCOM LANCETS 33G	55	GNP PRENATAL TABS	91
glatiramer acetate SOSY	98	GLUCOPRO INSULIN SYRINGE .	75	GNP PRENATAL/FOLIC ACID TABS	91
GLEOSTINE 10 MG, 100 MG	18	GLUCOSE CHEW	12	GNP STERILE LANCETS 28G ...	56
glimepiride 1 MG, 2 MG, 4 MG	13	GLUCOSE CONTROL SOLN	56	GNP STERILE LANCETS 30G ...	56
glipizide TABS 5 MG, 10 MG	13	glyburide micronized 1.5 MG, 3 MG, 6 MG	13	GNP STERILE LANCETS 33G ...	56
glipizide TB24	13	glyburide TABS	13	GNP ULTRA COM INSULIN SYRINGE	76
glipizide-metformin hcl 250 MG-2.5 MG, 500 MG-2.5 MG	11	glyburide-metformin 250 MG-1.25 MG	11	GOJJI BLOOD KETONE TEST ...	35
glipizide-metformin hcl 500 MG-5 MG	11	glyburide-metformin 500 MG-2.5 MG, 500 MG-5 MG	11	GOJJI LANCING DEVICE/CLEAR CAP MISC	56
GLOBAL ALCOHOL PREP EASE 70		glycerin (laxative) SUPP 1 GM	41	GOJJI STERILE LANCETS	56
GLOBAL EASY GLIDE INSULIN SYR	75	glycerin-hypromellose-polyethylene glycol 400	94	GOODSENSE ALCOHOL SWABS 70	
GLOBAL INJECT EASE INSULIN SYR	75	glycine diluent	97	granisetron hcl SOLN IV 1 MG/ML	14
GLOBAL INJECT EASE LANCETS		glycopyrrolate TABS 1 MG, 2 MG .	99		
		GNP ALCOHOL SWABS	70		

granisetron hcl SOLN IV 4 MG/4ML 14	haloperidol lactate CONC22	HUMULIN 70/30 KWIKPEN SUPN 12
granisetron hcl TABS 14	haloperidol lactate SOLN 22	HUMULIN 70/30 SUSP 12
griseofulvin microsize SUSP14	haloperidol TABS 22	HUMULIN N KWIKPEN SUPN 12
griseofulvin microsize TABS 14	HAVRIX 1440 EL U/ML101	HUMULIN N SUSP 12
griseofulvin ultramicrosize14	HAVRIX IM 720 EL U/0.5ML 101	HUMULIN R SOLN IJ12
guaifenesin LIQD 30	HEALTHWISE INSULIN	HUMULIN R U-500
guaifenesin TABS30	SYR/NEEDLE 76	(CONCENTRATED) SOLN SC 12
guaifenesin TB12 30	HEALTHY EYES SUPERVISION 2	HUMULIN R U-500 KWIKPEN SOPN
guaifenesin-codeine SOLN29	CAPS89	SC12
guaifenesin-codeine SYRP29	H-E-B INCONTROL ADV LANCING	hydralazine hcl TABS17
guanfacine hcl (adhd)1	MISC 56	hydrochlorothiazide CAPS36
guanfacine hcl16	H-E-B INCONTROL ALCOHOL ...70	hydrochlorothiazide TABS 25 MG, 50
GYNAZOLE-1102	H-E-B INCONTROL LANCETS 28G . 56	MG 36
HADLIMA PUSHTOUCH SOAJ2	H-E-B INCONTROL LANCETS 30G . 56	hydrocodone-acetaminophen SOLN
HADLIMA SOSY 2	H-E-B INCONTROL LANCETS 33G . 56	108 MG/5ML-2.5 MG/5ML, 217
HAEMOLANCE56	HEPARIN (PORCINE) IN NACL	MG/10ML-5 MG/10ML, 325
HAEMOLANCE LOW FLOW	SOLN IV 0.45 %-12500 UNIT/250ML	MG/15ML-7.5 MG/15ML 5
LANCETS 56	9	hydrocodone-acetaminophen SOLN
HAEMOLANCE PLUS 56	heparin (porcine) in sodium chloride	325 MG/15ML-10 MG/15ML 5
HAEMOLANCE PLUS HIGH FLOW . 56	SOLN IV 0.9 %-1000 UNIT/500ML,	hydrocodone-acetaminophen TABS
HAEMOLANCE PLUS LOW FLOW . 56	0.9 %-2000 UNIT/L9	325 MG-10 MG, 325 MG-5 MG, 325
HAEMOLANCE PLUS MAX FLOW 56	heparin sodium (porcine) lock flush	MG-7.5 MG5
HAEMOLANCE PLUS PEDIATRIC FLOW56	10 UNIT/ML, 100 UNIT/ML9	hydrocodone-ibuprofen 7.5 MG-200
HAIR/SKIN/NAILS CAPS89	heparin sodium (porcine) SOLN IJ	MG5
halobetasol propionate CREA33	1000 UNIT/ML, 5000 UNIT/0.5ML,	hydrocortisone (intrarectal)6
halobetasol propionate OINT33	5000 UNIT/ML, 10000 UNIT/ML,	hydrocortisone (rectal) EX 6
haloperidol decanoate22	20000 UNIT/ML 9	hydrocortisone (topical) CREA 0.5 %, 2.5 %33
	HEPLISAV-B SOSY101	hydrocortisone (topical) CREA 1 % 33
	HM STERILE ALCOHOL PREP .. 70	hydrocortisone (topical) LOTN 1 %, 2.5 %33
	HM ULTICARE INSULIN SYRINGE . 76	hydrocortisone (topical) OINT 1 % .33
	homatropine hbr94	hydrocortisone (topical) OINT 2.5 % . 33

hydrocortisone (topical) SOLN 1 % 33	hyoscyamine sulfate TB12 0.375 MG 99	imipramine pamoate11
hydrocortisone acetate (topical) CREA 1 %33	hyoscyamine sulfate TBDP 0.125 MG99	imiquimod 5 % 33
hydrocortisone acetate (topical) OINT33	HYPODERMIC NEEDLE76	IMMUNE ESSENTIALS DAILY CAPS89
HYDROCORTISONE ACETATE . 27	HY-VEE GLUCOSE12	IN TOUCH GLUCOSE CONTROL SOLN57
hydrocortisone acetate vaginal ..102	HY-VEE LANCETS57	IN TOUCH LANCING DEVICE MISC 57
HYDROCORTISONE MICRONIZED27	HY-VEE THIN LANCETS57	IN TOUCH STERILE LANCETS 30G57
hydrocortisone sod succinate 100 MG28	ibandronate sodium TABS36	INCRELEX 37
hydrocortisone TABS28	ibuprofen CAPS3	indapamide TABS 1.25 MG, 2.5 MG . 36
hydromorphone hcl LIQD4	ibuprofen SUSP 100 MG/5ML, 200 MG/10ML3	INDERAL XL 25
hydromorphone hcl SOLN IJ 1 MG/ML, 2 MG/ML, 4 MG/ML4	ibuprofen TABS 200 MG, 400 MG, 600 MG, 800 MG3	indomethacin CAPS 25 MG, 50 MG 3
hydromorphone hcl TABS4	icosapent ethyl 15	indomethacin CPCR3
hydromorphone hcl TB244	ICY HOT LIDOCAINE PLUS MENTHOL CREA34	INNOPRAN XL25
hydroxocobalamin acetate SOLN . 40	ICY HOT MAX LIDOCAINE CREA 34	INSPIREASE MISC83
hydroxychloroquine sulfate 200 MG 18	ICY HOT PM PTCH34	INSULIN GLARGINE-YFGN SOLN 12
HYDROXYPROGESTERONE CAPROATE27	idarubicin hcl 19	INSULIN GLARGINE-YFGN SOPN 13
hydroxyurea20	ifosfamide SOLR18	INSULIN LISPRO (1 UNIT DIAL) SOPN 13
hydroxyzine hcl SYRP7	IHEALTH CONTROL SOLUTION LIQD57	INSULIN LISPRO JUNIOR KWIKPEN SOPN13
hydroxyzine hcl TABS7	IHEALTH COVID-19 RAPID TEST KIT35	INSULIN LISPRO PROT & LISPRO SUPN13
hydroxyzine pamoate CAPS7	IHEALTH LANCING DEVICE MISC 57	INSULIN LISPRO SOLN IJ 13
hyoscyamine sulfate ELIX99	imatinib mesylate TABS 100 MG ..20	INSULIN SYRINGE 76
hyoscyamine sulfate SOLN PO 0.125 MG/ML99	imatinib mesylate TABS 400 MG ..20	INSULIN SYRINGE-NEEDLE U-100 76
hyoscyamine sulfate SUBL 0.125 MG99	IMBRUVICA CAPS20	INTELENCE 25 MG23
hyoscyamine sulfate TABS 0.125 MG99	IMBRUVICA SUSP20	INTELISWAB COVID-19 RAPID
	IMBRUVICA TABS20	
	imipramine hcl TABS11	

TEST KIT	35	itraconazole CAPS	15	KIMONO MICRO THIN PLUS MISC .	44
INVEGA HAFYERA	21	itraconazole SOLN	15	KIMONO MISC	44
INVEGA SUSTENNA	21	IV3000 1-HAND MISC	42	KIMONO PLUS MISC	44
INVEGA TRINZA	21	IV3000 1-HAND PEDIATRIC MISC	42	KIMONO PS MISC	44
IOPIDINE	94	IV3000 FRAME DELIVERY MISC .	42	KIMONO PS PLUS MISC	44
IPOL	101	IV3000 STANDARD MISC	42	KIMONO SENSATION MISC	44
ipratropium bromide (nasal) 0.03 %	93	ivabradine hcl TABS	26	KIMONO SENSATION PLUS MISC	44
ipratropium bromide (nasal) 0.06 %	93	ivermectin (pediculicide)	34	KIMONO SPECIAL DEVI	44
ipratropium bromide SOLN 0.02 % .	7	ivermectin	6	KINNEY LANCETS	57
ipratropium-albuterol SOLN	8	JULUCA	23	KINNEY THIN LANCETS	57
irbesartan	16	KALETRA SOLN	23	KINRAY INSULIN SYRINGE	76
irbesartan-hydrochlorothiazide	16	KAMELEON LUBRICATED MISC .	44	KISQALI (200 MG DOSE)	20
irinotecan hcl 40 MG/2ML, 100		KEMOPLAT SOLN	18	KISQALI (400 MG DOSE)	20
MG/5ML	21	KENDALL TRANSPARENT FILM		KISQALI (600 MG DOSE)	20
iron polysaccharide complex-vit b12-		DRESS MISC	42	KISQALI FEMARA (200 MG DOSE) .	19
folic acid CAPS	40	ketoconazole (topical) CREA	31	KISQALI FEMARA (400 MG DOSE) .	19
ISENTRESS CHEW	23	ketoconazole (topical) SHAM 2 % .	31	KISQALI FEMARA (600 MG DOSE) .	19
ISENTRESS HD TABS	23	ketoconazole	15	KISQALI FEMARA (600 MG DOSE) .	19
ISENTRESS TABS	23	KETO-DIASTIX	35	KONSYL DAILY FIBER PACK 100 %	41
isoniazid SOLN	18	KETONE TEST STRP	35		41
isoniazid SYRP	18	ketorolac tromethamine (ophth) ...	95	KP PRENATAL MULTIVITAMINS	
isoniazid TABS	18	ketorolac tromethamine SOLN IM 60		TABS	92
isopropyl alcohol (skin cleanser)		MG/2ML	3	K-PHOS NO 2	39
MISC	34	ketorolac tromethamine TABS	3	KROGER AUTOLET LANCING	
ISOPTO ATROPINE SOLN	94	KETOSTIX STRP	35	DEVICE MISC	57
isosorbide dinitrate TABS 5 MG, 10		ketotifen fumarate (ophth) 0.035 %		KROGER GLUCOSE	12
MG, 20 MG, 30 MG	6	95		KROGER HEALTHPRO CONTROL	
isosorbide mononitrate TABS	6	KIMONO COLORS DEVI	44	HI/LO LIQD	57
isosorbide mononitrate TB24	6	KIMONO MAXX-LARGE FLARE		KROGER HEALTHPRO LANCET	
isotretinoin	30	MISC	44		
		KIMONO MICRO THIN MISC	44		

26G	57	LANCETS MICRO THIN 33G	58	levalbuterol tartrate	8
KROGER LANCETS	57	LANCETS SUPER THIN	58	LEVATIO PTCH	34
KROGER LANCETS SUPER THIN 57		LANCETS SUPER THIN 28G	58	levetiracetam SOLN PO 100 MG/ML, 500 MG/5ML	10
KROGER LANCETS THIN	57	LANCETS THIN	58	levetiracetam TABS	10
K-Y ME & YOU EXTRA LUBRICATED DEVI	44	LANCETS ULTRA THIN	58	levetiracetam TB24	10
K-Y ME & YOU INTENSE DEVI ...	44	LANCETS ULTRA THIN 30G	58	LEVIGOLT CREA	34
KYLEENA	28	LANCING DEVICE MISC	58	levobunolol hcl 0.5 %	94
labetalol hcl TABS	25	LANOXIN PEDIATRIC SOLN IJ ...	25	levocarnitine (metabolic modifiers) SOLN PO 1 GM/10ML	37
lactated ringer's	86	LANOXIN TABS 125 MCG, 250 MCG (Use digoxin)	26	levocarnitine (metabolic modifiers) TABS	37
lactulose (encephalopathy)	38	lansoprazole CPDR 15 MG	100	levocetirizine dihydrochloride TABS 15	
lactulose SOLN	41	lansoprazole CPDR 30 MG	100	levofloxacin (ophth) 0.5 %	95
lamivudine (hbv) TABS	24	LANZO MISC	58	levofloxacin in d5w	38
lamivudine SOLN	23	lapatinib ditosylate	20	levofloxacin SOLN PO	38
lamivudine TABS 150 MG	23	LASTACFT	95	levofloxacin TABS	38
lamivudine TABS 300 MG	23	latanoprost SOLN	96	levonorgestrel & eth estradiol TABS 27	
lamivudine-zidovudine	23	LEADER ADVANCED LANCING DEVICE MISC	58	levonorgestrel (emergency oc) 1.5 MG	28
lamotrigine CHEW	10	leflunomide	3	levonorgestrel-eth estradiol (triphasic)	27
lamotrigine KIT 25 MG	10	lenalidomide	87	levonorgestrel-ethinyl estradiol (91- day) 0.03 MG-0.15 MG	27
lamotrigine TABS	10	letrozole	19	levonorgestrel-ethinyl estradiol (continuous)	27
lamotrigine TB24	10	leucovorin calcium SOLN IJ 100 MG/10ML	20	levothyroxine sodium TABS	99
LANCET DEVICE MISC	57	leucovorin calcium SOLR 200 MG, 350 MG	20	LEXIVA SUSP	23
LANCET DEVICE WITH EJECTOR MISC	57	leucovorin calcium SOLR 50 MG, 100 MG, 500 MG	20	LIBERTY GLUCOSE CONTROL MID SOLN	58
LANCET TRANSPORTER CASE MISC	57	leucovorin calcium TABS	20	LIBERTY MEDICAL LANCETS ...	58
LANCETS	57	LEUKERAN	18		
LANCETS 28G THIN	57	leuprolide acetate KIT IJ 1 MG/0.2ML	19		
LANCETS 30G	58	levalbuterol hcl	8		
LANCETS 33G	58				

LIBERTY MINI LANCING DEVICE	lisdexamphetamine dimesylate CAPS 1	loratadine & pseudoephedrine TB24 .
MISC58	lisdexamphetamine dimesylate CHEW .	29
lidocaine CREA 4 %34	1	loratadine SOLN15
lidocaine hcl (cardiac) SOSY7	lisinopril & hydrochlorothiazide16	loratadine TABS15
lidocaine hcl (local anesth.) SOSY IJ	lisinopril TABS 2.5 MG, 5 MG, 10	lorazepam CONC7
100 MG/5ML42	MG, 20 MG, 30 MG, 40 MG16	lorazepam SOLN7
lidocaine hcl (mouth-throat)87	LITE TOUCH LANCETS58	lorazepam TABS7
lidocaine hcl CREA 4 %34	LITE TOUCH LANCING PEN MISC	losartan potassium &
lidocaine hcl GEL 2 %34	58	hydrochlorothiazide16
lidocaine hcl PRSY34	LITETOUCH INSULIN SYRINGE .76	losartan potassium16
lidocaine hcl SOLN34	LITETOUCH LANCETS58	lovastatin TABS16
lidocaine in d5w 5 %-8 MG/ML7	lithium carbonate CAPS21	loxapine succinate22
lidocaine PTCH 4 %34	lithium carbonate TABS21	lubiprostone38
lidocaine PTCH 5 %34	lithium carbonate TBCR21	LUER LOCK SAFETY SYRINGES
LIDOCAINE-HYDROCORTISONE	LITHOSTAT39	76
ACE GEL6	LIVE BETTER LANCET SUPER	LUPRON DEPOT (1-MONTH) KIT IM
LIDOCAINE-HYDROCORTISONE	THIN58	19
ACE KIT 1 %-3 %6	LIVITA ADULTS LIQD89	LUPRON DEPOT (3-MONTH) KIT IM
lidocaine-hydrocortisone acetate	LIVITA CHILDREN LIQD90	19
(rectal) CREA EX6	LM PLUS RELIEF PTCH34	LUPRON DEPOT (4-MONTH) IM .19
lidocaine-hydrocortisone acetate	LO LOESTRIN FE TABS27	LUPRON DEPOT (6-MONTH) IM .19
(rectal) KIT 0.5 %-3 %, 2.5 %-3 % ..6	loperamide hcl CAPS13	LUPRON DEPOT-PED (1-MONTH) .
lidocaine-menthol PTCH 4 %-1 % .34	loperamide hcl SOLN 1 MG/7.5ML 13	37
lidocaine-prilocaine CREA34	loperamide hcl TABS13	LUPRON DEPOT-PED (3-MONTH) .
LIDOSYNC CREA34	lopinavir-ritonavir SOLN23	37
LIDOTHOL PTCH34	lopinavir-ritonavir TABS 25 MG-100	LUPRON DEPOT-PED (6-MONTH)
LILETTA (52 MG)28	MG23	IM37
linezolid SUSR17	lopinavir-ritonavir TABS 50 MG-200	lurasidone hcl21
linezolid TABS17	MG23	LYNPARZA TABS20
liothyronine sodium SOLN99	LOQTORZI19	LYSIPLEX PLUS LIQD89
liothyronine sodium TABS99	loratadine & pseudoephedrine TB12 .	LYSODREN19
liraglutide12	29	mafenide acetate PACK32
		MAGELLAN INSULIN SAFETY SYR .

76	MEDICHOICE SAFETY LANCET	MEIJER LANCETS UNIVERSAL 21G
MAGELLAN TUBERCULIN	EXTRA58	59
SYRINGE MISC76	MEDICHOICE SAFETY LANCET	MEIJER LANCETS UNIVERSAL 30G
magnesium chloride TBEC 86	NORM 59	59
magnesium citrate 1.745 GM/30ML	MEDISENSE GLUCOSE KETONE	MEIJER LANCETS UNIVERSAL 33G
41	CONTR LIQD 59	59
magnesium gluconate TABS 27.5	MEDISENSE HI/MID/LOW	MEKINIST SOLR 20
MG 86	CONTROL LIQD 59	MEKINIST TABS 0.5 MG20
magnesium hydroxide SUSP 7.75 %,	MEDLANCE EXTRA 21G 59	MEKINIST TABS 2 MG20
400 MG/5ML, 1200 MG/15ML, 2400	MEDLANCE LITE 25G 59	melatonin CAPS 5 MG, 10 MG1
MG/30ML41	MEDLANCE PLUS EXTRA 21G ..59	melatonin CHEW 1 MG, 5 MG1
magnesium oxide (mg supplement)	MEDLANCE PLUS LANCETS59	MELATONIN LIQD 1 MG/4ML, 2.5
TABS86	MEDLANCE PLUS LITE 25G59	MG/10ML2
magnesium oxide TABS6	MEDLANCE PLUS SPECIAL 0.8MM	melatonin LIQD2
magnesium TABS 250 MG 86	59	melatonin SUBL2
malathion34	MEDLANCE PLUS SUPERLITE 30G	MELATONIN SUBL 2
maraviroc TABS 150 MG23	59	melatonin TABS 1 MG, 3 MG, 5 MG,
maraviroc TABS 300 MG23	MEDLANCE PLUS UNIVERSAL 21G	10 MG 2
MASONATAL TABS92	59	MELATONIN TABS 10 MG-3 MG ..2
MATULANE20	MEDLANCE UNIVERSAL 21G ...59	melatonin TBCR2
MAVYRET PACK24	MEDROL TABS28	melatonin TBDP 3 MG, 5 MG, 10 MG
MAVYRET TABS24	medroxyprogesterone acetate	 2
MAXI-COMFORT INSULIN	(contraceptive) SUSP IM 28	meloxicam TABS3
SYRINGE76	medroxyprogesterone acetate	melphalan 18
MAXICOMFORT SYR 27G X 1/2" 76	(contraceptive) SUSY IM 28	melphalan hcl IV 18
MAXIDEX SUSP OP95	medroxyprogesterone acetate 2.5	memantine hcl CP2497
MAXX MISC44	MG, 5 MG, 10 MG 97	memantine hcl TABS 97
MAXX PLUS MISC44	mefloquine hcl18	MENACTRA100
meclizine hcl CHEW 14	megestrol acetate SUSP19	MENATROL CAPS 89
meclizine hcl TABS 12.5 MG, 25 MG	megestrol acetate TABS19	MENCAPS PTCH34
14	MEIJER ALCOHOL SWABS70	MENQUADFI 0.5 ML 101
MEDIC INSULIN SYRINGE76	MEIJER GLUCOSE12	MENS 50+ ADVANCED CAPS89
MEDICHOICE SAFETY LANCET .58	MEIJER LANCETS59	

menthol (topical analgesic) PTCH .30	methotrexate sodium SOLR 19	metoprolol & hydrochlorothiazide TABS 17
menthol-methyl salicylate (liniments) CREA 34	methotrexate sodium TABS 2.5 MG 19	metoprolol succinate TB24 25
MENVEO SOLR 101	methoxsalen rapid 31	metoprolol tartrate SOLN IV 5 MG/5ML 25
mercaptopurine TABS 19	methylcellulose (laxative) POWD .. 41	metoprolol tartrate TABS 25 MG, 50 MG, 100 MG 25
meropenem 17	methylcellulose (laxative) TABS ... 41	metronidazole (topical) CREA 34
mesalamine CP24 38	methyldopa TABS 16	metronidazole (topical) GEL 34
mesalamine CPDR 38	methylergonovine maleate TABS .. 96	metronidazole (topical) LOTN 34
mesalamine ENEM 38	methylphenidate hcl CHEW 1	metronidazole TABS 250 MG, 500 MG 17
mesalamine TBEC 38	methylphenidate hcl CP24 10 MG, 40 MG, 60 MG 1	metronidazole vaginal 102
mesalamine w/ cleanser 38	methylphenidate hcl CP24 20 MG, 30 MG 1	mexiletine hcl 7
mesna SOLN 20	methylphenidate hcl CPCR 10 MG, 20 MG, 30 MG 1	miconazole nitrate (topical) CREA .31
mesna TABS 20	methylphenidate hcl CPCR 40 MG, 50 MG, 60 MG 1	MICONAZOLE NITRATE SOLN ... 31
MESNEX TABS 21	methylphenidate hcl TABS 20 MG .. 1	miconazole nitrate vaginal CREA 2 % 102
metformin hcl TABS 500 MG, 850 MG, 1000 MG 12	methylphenidate hcl TABS 5 MG, 10 MG 1	miconazole nitrate vaginal KIT ... 102
metformin hcl TB24 500 MG, 750 MG 12	methylphenidate hcl TBCR 10 MG, 20 MG 1	miconazole nitrate vaginal SUPP 102
methadone hcl SOLN PO 4	methylphenidate hcl TBCR 18 MG, 27 MG, 36 MG 1	MICONI-AL SOLN 31
methadone hcl TABS 4	methylphenidate hcl TBCR 54 MG .. 1	MICROCHAMBER DEVI 83
methamphetamine hcl 1	methylprednisolone TABS 28	MICROCHAMBER MISC 83
methazolamide TABS 36	methylprednisolone TBPK 28	MICRODOT CONTROL HIGH/LOW SOLN 59
methenamine hippurate 18	methyltestosterone CAPS 5	MICROLET LANCETS 59
methenamine mandelate 18	methyltestosterone TABS 5	MICROLET NEXT LANCING DEVICE MISC 59
methenamine-hyosc-methylene blue- sod phos-phenyl sal TABS 81.6 MG . 17	metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML 38	MICROSPACER MISC 83
methimazole TABS 99	metoclopramide hcl TABS 38	midodrine hcl 102
methocarbamol TABS 500 MG, 750 MG 93	metolazone 36	miglustat 40
methotrexate sodium SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML 19		MINERAL OIL HEAVY OIL XX 41

MINERAL OIL LIGHT XX	41	MOMMY'S BLISS MV ORGANIC DROPS LIQD	90	TIP	77
mineral oil OIL PO	41	MONOJECT ALLERGIST TRAY KIT .	76	MONOJECT SYRINGE TOOMEY TYPE	77
MINERAL OIL OIL XX	41	MONOJECT BLUNTIP CANNULA	76	MONOJECT TB SAFETY SYRINGE MISC	77
MINI LANCING DEVICE MISC	59	MONOJECT BLUNTIP SYR/CANNULA	76	MONOJECT TB SYRINGE	77
MINOCIN SOLR	99	MONOJECT FILTER ASPIRATOR	76	MONOJECT TB SYRINGE MISC .	77
minocycline hcl CAPS	99	MONOJECT HYPODERMIC NEEDLE	76	MONOJECT ULTRA COMFORT SYRINGE	77
MIRENA (52 MG)	28	MONOJECT INSULIN SYRINGE .	76	MONOLET LANCETS	60
mirtazapine TABS	10	MONOJECT MAGELLAN SAFETY NDL	77	MONOLET OPD LANCETS	60
mirtazapine TBDP	10	MONOJECT MAGELLAN SYRINGE	77	MONOLETTOR SAFETY LANCETS	60
misoprostol	100	MONOJECT PHARMACY TRAY .	77	MONSELS FERRIC SUBSULFATE .	40
MIUDELLA INTRAUTERINE COPPER	28	MONOJECT SOFTPACK/LLOCK .	77	montelukast sodium CHEW	8
MM INSULIN SYRINGE/NEEDLE	76	MONOJECT SOFTPACK/RG LUER	77	montelukast sodium PACK	8
MM LANCING DEVICE MISC	60	MONOJECT SYRINGE	77	montelukast sodium TABS	8
MM TWIST LANCETS	60	MONOJECT SYRINGE CATH TIP	77	MOOD FOOD CAPS	89
M-M-R II SOLR	101	MONOJECT SYRINGE ECCENTRIC TIP	77	MOOD FOOD ES CAPS	89
MNEXSPIKE SUSY 10 MCG/0.2ML .	101	MONOJECT SYRINGE LUER LOCK	77	morphine sulfate SOLN PO 10 MG/5ML, 20 MG/5ML, 20 MG/ML, 100 MG/5ML	4
MOBILE LANCETS 30G	60	MONOJECT SYRINGE LUER-LOCK TIP	77	morphine sulfate SUPP 5 MG, 10 MG, 20 MG	4
modafinil	1	MONOJECT SYRINGE PHARMACY TRAY	77	morphine sulfate TABS	4
MODERNA COVID-19 BIVALENT 101		MONOJECT SYRINGE REG LUER .	77	morphine sulfate TBCR 15 MG	4
MODERNA COVID-19 VAC 6M-11Y SUSP	101	MONOJECT SYRINGE REGULAR		morphine sulfate TBCR 200 MG	4
MODERNA COVID-19 VAC 6M-11Y SUSY	101			morphine sulfate TBCR 30 MG, 60 MG, 100 MG	4
MODERNA COVID-19 VACCINE SUSP	101			MOTOFEN	13
molindone hcl	22			MOVANTIK	39
mometasone furoate CREA	33			moxifloxacin hcl (ophth) SOLN OP	95
mometasone furoate OINT	33				
mometasone furoate SOLN	33				

moxifloxacin hcl in sodium chloride 38	MVW COMPLETE FORMULATION CAPS89	naloxone hcl SOSY 2 MG/2ML 14
moxifloxacin hcl TABS38	MVW COMPLETE FORMULATION D3000 CAPS89	naltrexone hcl 14
MPD SAFETY LANCET 21G60	MVW COMPLETE FORMULATION D5000 CAPS89	naphazoline w/ pheniramine 0.3 %- 0.025 % 95
MPD SAFETY LANCET 23G60	MVW COMPLETE FORMULATION MINIS CAPS89	naproxen TABS 3
MPD SAFETY LANCET 28G60	MVW HI-D DROPS W/EXTRA VIT D LIQD90	naproxen TBEC 3
MPD SAFETY LANCET 30G60	MVW MODULATOR FORMULATION CAPS89	naratriptan hcl85
MULTAQ7	MVW MODULATOR FORMULATION MINI CAPS89	NATAZIA 27
MULTI PRENATAL TABS 92	MVW MODULATOR FORMULATION PEDS LIQD91	nateglinide13
MULTIA CAPS89	mycophenolate mofetil CAPS87	NAYZILAM9
MULTI-LANCET DEVICE MISC ...60	mycophenolate mofetil SUSR 87	nebivolol hcl25
multiple vitamin CAPS90	MYGLUCOHEALTH CONTROL SOLN60	neomycin sulfate TABS 2
multiple vitamin TABS 90	MYGLUCOHEALTH LANCETS 30G 60	neomycin-bacitracin zn-polymyxin 95
multiple vitamins w/ iron TABS 88	MYLERAN TABS18	neomycin-bacitracin-polymyxin OINT 30
multiple vitamins w/ minerals CAPS 89	nabumetone 3	neomycin-polymy-dexameth OINT 95
multiple vitamins w/ minerals CHEW . 89	nadolol TABS 20 MG, 40 MG, 80 MG25	neomycin-polymy-dexameth SUSP 0.1 %-3.5 MG/ML-10000 UNIT/ML, 0.1 %95
multiple vitamins w/ minerals LIQD 89	NAFCILLIN SODIUM IN DEXTROSE 1 GM/50ML97	neomycin-polymyxin-gramicidin ...95
multiple vitamins w/ minerals TABS 89	nafcilin sodium IV 10 GM97	neomycin-polymyxin-hc (ophth) ..95
MULTIVITAMIN DROPS/IRON SOLN91	naloxone hcl LIQD 14	neomycin-polymyxin-hc (otic) SOLN . 96
MULTIVITAMIN INFANT & TODDLER SOLN PO91	naloxone hcl SOCT 14	neomycin-polymyxin-hc (otic) SUSP . 96
MULTIVITAMIN/FLUORIDE CHEW 91	naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML14	NEONATAL PRENATAL TABS92
MULTIVITAMIN+ LIQD90		NEONATAL VITAMIN TABS92
MULTI-VITE LIQD89		NEPHRON FA 40
mupirocin OINT30		NESTABS 92
MURI-LUBE XX41		NESTABS DHA 92
MURO 128 SOLN95		NEUTEK 2TEK CONTROL SOLN .60
		nevirapine SUSP23

nevirapine TABS	23	nitrofurantoin monohyd macro	18	NORM-JECT LUER SLIP SYRINGE	78
nevirapine TB24 400 MG	23	nitroglycerin CPCR 6.5 MG, 9 MG ..	6	NORPACE CR CP12	7
NEXCARE TEGADERM 2-3/8"X2-3/4" MISC	42	nitroglycerin PT24	6	nortriptyline hcl CAPS	11
NEXCARE TEGADERM 4"X4-3/4" MISC	42	nitroglycerin SUBL	6	nortriptyline hcl SOLN	11
NEXIUM 24HR TBEC 20 MG	100	NIVA THYROID TABS	99	NORVIR PACK	23
NEXPLANON	28	nizatidine CAPS	100	NOVA MAX PLUS GLU/KET CONTROL LIQD	60
niacin (antihyperlipidemic) TABS ..	16	NOKOR VENTED NEEDLE	77	NOVA MAX PLUS KETONE TEST	35
niacin (antihyperlipidemic) TBCR ..	16	NORDITROPIN FLEXPPO SOPN ..	37	NOVA SAFETY LANCETS 23G ..	60
niacin CPCR 500 MG	103	norelgestromin-ethinyl estradiol ...	28	NOVA SAFETY LANCETS 28G ..	60
niacin TABS 50 MG, 100 MG, 500 MG	103	norethin acet & estrad-fe CHEW ..	27	NOVA SUREFLEX LANCETS	60
niacin TBCR 500 MG	103	norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG	27	NOVA SUREFLEX LANCING DEVICE MISC	60
niacinamide TABS 500 MG	103	norethindrone & eth estradiol	27	NOVAVAX COVID-19 VACCINE SUSP	101
nicardipine hcl SOLN	25	norethindrone & ethinyl estradiol-fe	27	NOVAVAX COVID-19 VACCINE SUSY	102
nicotine polacrilex GUM	98	norethindrone (contraceptive)	28	NOVOLIN 70/30 FLEXPEN SUPN	13
nicotine polacrilex LOZG	98	norethindrone acet & eth estra TABS	27	NOVOLIN 70/30 SUSP	13
nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR	98	norethindrone acetate TABS	97	NOVOLIN N FLEXPEN SUPN	13
NICOTROL INHA	98	norethindrone acetate-ethinyl estradiol	38	NOVOLIN N SUSP	13
NICOTROL NS SOLN	98	norethindrone acetate-ethinyl estradiol-fe	27	NOVOLIN R FLEXPEN SOPN IJ ..	13
nifedipine TB24	25	norethindrone-eth estradiol (triphasic)	27	NOVOLIN R SOLN IJ	13
nilotinib hcl 50 MG, 150 MG, 200 MG	20	norgestimate-ethinyl estradiol (triphasic)	28	NOZIN NASAL SANITIZER KIT ...	93
nilutamide	19	norgestimate-ethinyl estradiol	28	NOZIN NASAL SANITIZER	
nimodipine CAPS	25	norgestrel & ethinyl estradiol 30 MCG-0.3 MG	28	POPSWAB SWAB	93
nitazoxanide TABS	17	NORM-JECT LUER LOCK SYRINGE	78	NP THYROID TABS	99
nitisinone CAPS 2 MG, 10 MG	37			NUVAXOVID COVID-19 VACCINE SUSY 5 MCG/0.5ML	102
NITRO-BID OINT	6			nystatin (mouth-throat)	87
nitrofurantoin	18			nystatin (topical) CREA	31
nitrofurantoin macrocrystal	18				

nystatin (topical) OINT	31	100	OPSITE 4"X5-1/2" MISC	43
nystatin (topical) POWD EX	31	omeprazole-sodium bicarbonate	OPSITE FLEXIGRID 2-3/8"X2-3/4"	
nystatin TABS	15	CAPS 1100 MG-20 MG	100	MISC
nystatin-triamcinolone CREA	31	omeprazole-sodium bicarbonate	OPSITE FLEXIGRID 4"X4-3/4" MISC	
nystatin-triamcinolone OINT	31	CAPS 1100 MG-40 MG	100	43
NYVEPRIA	40	OMNIFLEX DIAPHRAGM	44	OPSITE FLEXIGRID 4-3/4"X10"
octreotide acetate KIT	37	OMNITROPE SOCT	37	MISC
octreotide acetate SOLN	37	ONCASPAR	20	43
octreotide acetate SOSY	38	ondansetron hcl SOLN PO 4		OPSITE IV 3000 MISC
OCUVEL CAPS 250 MG-0.5 MG-5		MG/5ML	14	43
MG-1 MG-40 MG-1 MG-200 UNIT	89	ondansetron hcl TABS	14	OPSITE POST-OP 10"X4" MISC ..
OCUVITE ADULT 50+ CAPS	89	ondansetron TBDP	14	43
OCUVITE ADULT FORMULA CAPS .	90	ONE VITE WOMENS TABS	92	43
90		ONE-DAILY MULTI CAPS CAPS .	90	OPSITE POST-OP 8"X4" MISC ...
OCUVITE-LUTEIN CAPS	90	ONETOUCH DELICA PLUS		43
ODEFSEY	23	LANCET30G	60	OPSITE POST-OP VISIBLE 10"X4"
ofloxacin (ophth)	95	ONETOUCH DELICA PLUS		MISC
ofloxacin (otic)	96	LANCET33G	61	43
olanzapine TABS	22	ONETOUCH DELICA PLUS		OPSITE POST-OP VISIBLE 4X3-1/8
olanzapine TBDP	22	LANCING MISC	61	MISC
olanzapine-fluoxetine hcl	97	ONETOUCH DELICA SAFETY		43
olmesartan medoxomil	16	LANCING	61	MISC 43
olmesartan medoxomil-		ONETOUCH ULTRA CONTROL		OPSUMIT
hydrochlorothiazide	17	LIQD	61	26
olopatadine hcl	95	ONETOUCH ULTRASOFT 2		OPTICHAMBER DIAMOND DEVI .
omega-3 fatty acids CAPS 200 MG-		LANCETS	61	84
300 MG, 300 MG, 435 MG, 500 MG,		ONETOUCH VERIO LIQD	61	OPTICHAMBER DIAMOND MISC .
1000 MG, 1200 MG	93	OPILL	28	84
omega-3 fatty acids CPDR	94	opium tincture	13	OPTICHAMBER DIAMOND-LG
omega-3-acid ethyl esters	15	OPSITE 11"X11-3/4" MISC	42	MASK DEVI
omeprazole CPDR 10 MG	100	OPSITE 11"X17-3/4" MISC	42	84
omeprazole CPDR 20 MG, 40 MG		OPSITE 11"X6" MISC	42	OPTICHAMBER DIAMOND-MD
		OPSITE 17-3/4"X21-5/8" MISC ...	42	MASK MISC
				84
				oral electrolytes SOLN
				86
				ORAL SUSPEND LIQD
				97
				ORAPENN SD ANHYD

SWEETENED LIQD	97	325 MG-10 MG, 325 MG-2.5 MG, 325 MG-5 MG, 325 MG-7.5 MG	5	pediatric multivitamins w/fl CHEW 0.25 MG	91
ORAPENN SD ANHYD					
UNSWEETEN LIQD	97	oxymetazoline hcl SOLN 0.05 % ..	93	pediatric multivitamins w/fl CHEW ..	91
ORA-PLUS LIQD	97	oxymorphone hcl TB12	4	pediatric multivitamins w/fl SOLN ..	91
ORENITRAM TBCR	26	OXYTROL FOR WOMEN PTTW ..	100	pediatric vitamins acd w/ fluoride SOLN	91
ORILISSA	37	OXYTROL PTTW	100		
oseltamivir phosphate CAPS 30 MG . 24		oyster shell	86	pediatric vitamins adc 400 UNIT/ML-750 UNIT/ML-35 MG/ML	91
oseltamivir phosphate CAPS 45 MG, 75 MG	24	paclitaxel 30 MG/5ML, 100 MG/16.7ML, 300 MG/50ML	21	peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR	41
oseltamivir phosphate SUSR	24	paliperidone	21	peg 3350-potassium chloride-sod bicarbonate-sod chloride	41
OTEZLA TABS	3	pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML	36	PEGASYS SOLN	24
OTEZLA TBPk	3	PAMIDRONATE DISODIUM SOLN 36		PEGASYS SOSY	24
OTULFI SOLN IV 130 MG/26ML ..	38	pantoprazole sodium TBEC	100	PENBRAYA	101
OTULFI SOSY SC 45 MG/0.5ML, 90 MG/ML	31	PARAGARD INTRAUTERINE COPPER	28	penicillamine TABS	87
oxacillin sodium IJ 1 GM, 2 GM	97	paricalcitol CAPS 1 MCG, 2 MCG ..	37	PENICILLIN G POT IN DEXTROSE 40000 UNIT/ML, 60000 UNIT/ML ..	96
OXACILLIN SODIUM IN DEXTROSE 2 GM/50ML	97	paricalcitol SOLN	37	penicillin g potassium 5000000 UNIT, 20000000 UNIT	96
oxaprozin TABS	3	paroxetine hcl SUSP	11	penicillin g sodium	96
oxazepam CAPS	7	paroxetine hcl TABS	11	penicillin v potassium SOLR	96
oxcarbazepine SUSP	10	paroxetine hcl TB24	11	penicillin v potassium TABS	96
oxcarbazepine TABS	10	PATADAY 0.7 %	95	pentamidine isethionate IN	17
oxybutynin chloride TABS 5 MG .	100	PAXLOVID (150/100)	24	pentazocine w/ naloxone hcl	5
oxybutynin chloride TB24	100	PAXLOVID (300/100)	24	pentoxifylline	39
oxycodone hcl CAPS	4	pazopanib hcl	20	PERFECT LANCETS 28G	61
oxycodone hcl CONC 100 MG/5ML	4	PC PEDIATRIC POLY-VITAMIN DROP SOLN PO	91	PERFECT LANCETS 30G	61
oxycodone hcl SOLN	4			PERFECT POINT SAFETY LANCETS	61
oxycodone hcl TABS 10 MG, 15 MG, 20 MG, 30 MG	4	ped multivitamins w/fl & iron SOLN 90		PERFECT POINT SAFETY NEEDLE	78
oxycodone hcl TABS 5 MG	4	pediatric multiple vitamins CHEW ..	91		
oxycodone w/ acetaminophen TABS		pediatric multiple vitamins w/ iron CHEW	91	permethrin CREA	34

permethrin LIQD EX	34	MG/10ML	30	PLEGRIDY SOAJ	98
perphenazine TABS	22	phenylephrine-guaifenesin TABS 10		PLEGRIDY SOSY IM	98
perphenazine-amitriptyline	97	MG-400 MG	30	PLEGRIDY STARTER PACK SOAJ .	
PERSERIS PRSY	21	phenytoin CHEW	10	98	
PFIZER COVID-19 VAC-TRIS 5-11Y		phenytoin sodium extended 100 MG,		PLEGRIDY STARTER PACK SOSY	
SUSP	102	200 MG, 300 MG	10	SC	98
PFIZER COVID-19 VAC-TRIS 6M-4Y		phenytoin SUSP	10	PNEUMOVAX 23 SOLN	101
SUSP	102	PHOSPHOLINE IODIDE	94	PNEUMOVAX 23 SOSY	101
PFIZER-BIONT COVID-19 VAC-		phytonadione TABS 5 MG	103	PNV 27-CA/FE/FA TABS	92
TRIS SUSP	102	PIFELTRO	23	PNV PRENATAL PLUS	
PFIZER-BIONTECH COVID-19		pilocarpine hcl (oral)	88	MULTIVIT+DHA MISC	92
VACC SUSP	102	pilocarpine hcl SOLN 1 %, 2 %, 4 % .		PNV-DHA+DOCUSATE	92
PHARMACIST CHOICE ALCOHOL .		94		POCKET CHAMBER DEVI	84
70		pimecrolimus	33	POCKET SPACER DEVI	84
PHARMACIST CHOICE LANCETS .		pimozide	98	POCKETCHEM EZ CONTROL	
61		pindolol TABS	25	SOLN	61
phenazopyridine hcl TABS 100 MG,		pioglitazone hcl 15 MG, 45 MG	13	podofilox SOLN	34
200 MG	39	pioglitazone hcl 30 MG	13	POLY HUB NEEDLE	78
phenelzine sulfate	11	pioglitazone hcl-metformin hcl TABS .		polyethylene glycol 3350 PACK ...	41
phenobarbital ELIX	41	11		polyethylene glycol 3350 POWD ..	41
phenobarbital TABS	41	PIP GLUCOSE CONTROL		polyethylene glycol-propylene glycol	
phenoxybenzamine hcl	16	SOLUTION LIQD	61	(ophth) SOLN 0.3 %-0.4 %	94
phenylephrine hcl (mydriatic) SOLN		PIP LANCETS 28G	61	polymyxin b-trimethoprim	95
94		PIP LANCETS 30G	61	polysaccharide iron complex CAPS	
phenylephrine hcl (oral) TABS	93	piperacillin sodium-tazobactam		40	
phenylephrine w/ dm-gg LIQD 10		sodium 2 GM-0.25 GM, 3 GM-0.375		POLYSKIN II DRESSING 2"X2.75"	
MG/10ML-200 MG/10ML-20		GM, 36 GM-4.5 GM, 4 GM-0.5 GM		MISC	43
MG/10ML, 5 MG/5ML-100 MG/5ML-		97		polyvinyl alcohol 1.4 %	94
10 MG/5ML	30	PIQRAY (200 MG DAILY DOSE) .20		POLY-VI-SOL SOLN PO	91
phenylephrine w/ dm-gg SYRP 5		PIQRAY (250 MG DAILY DOSE) .20		POLY-VITA SOLN PO	91
MG/5ML-100 MG/5ML-10 MG/5ML		PIQRAY (300 MG DAILY DOSE) .20		POLY-VITE PEDIATRIC SOLN PO	
30		piroxicam CAPS 10 MG	3	91	
phenylephrine-brompheniramine-dm		piroxicam CAPS 20 MG	3	POLY-VITE/IRON SOLN	91
LIQD 2.5 MG/5ML-5 MG/5ML-1					
MG/5ML, 5 MG/10ML-10 MG/10ML-2					

POMALYST	19	prasugrel hcl	40	PRENATAL ONE DAILY TABS	92
pot & sod citrates w/citric ac SOLN 39		pravastatin sodium	16	PRENATAL TABS	92
pot phosphate monobasic w/ sod phosphate dibasic & monobasic ..	86	prazosin hcl CAPS	16	prenatal vit w/ docusate-iron carbonyl-folic acid TABS	92
potassium acetate SOLN 2 MEQ/ML .	87	PRECISION GLUCOSE KETONE CONTR LIQD	61	prenatal vit w/ ferrous fumarate-folic acid CHEW	92
potassium chloride CPCR	87	PRECISION SURE-DOSE SYRINGE	78	prenatal vit w/ iron carbonyl-folic acid TABS 120 MG-3 MG-30 MCG-1 MG-400 UNIT-8 MCG-3 MG-20 MG-7 MG-3 MG-100 MG-15 MG-3 MG-4000 UNIT-200 MG-150 MCG-30 UNIT-29 MG	92
potassium chloride microencapsulated crystals er 10 MEQ	87	PRECISION THINS GP LANCETS 61		PRENATAL VITAMIN AND MINERAL TABS	92
potassium chloride microencapsulated crystals er 20 MEQ	87	PRECISION XTRA KETONE	35	PRENATAL VITAMINS TABS 100 MG-800 MCG-1.84 MG-18 MG-2.6 MG-1.7 MG-27 MG-10 MCG-4.95 MG-25 MG-200 MG-160 MG-1200 MCG-4 MCG, 120 MG-2.6 MG-800 MCG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG-4000 UNIT-30 UNIT	92
potassium chloride SOLN PO 10 %, 10 %	87	PRED MILD	95	prenatal without a w/ fe fumarate-l methylfolate-fa-dha	92
potassium chloride TBCR 10 MEQ 87		prednisolone acetate (ophth)	95	PRENATAL/IRON TABS	92
potassium chloride TBCR 20 MEQ 87		PREDNISOLONE SODIUM PHOSPHATE	95	PRENATAL-U CAPS	92
potassium citrate (alkalinizer) TBCR . 39		prednisolone sodium phosphate SOLN 5 MG/5ML, 15 MG/5ML	29	PRENATVITE RX TABS	92
potassium citrate-citric acid PACK .39		prednisolone SOLN	29	PRESCRIPTION SUPPORT MULTIVIT CAPS	90
potassium citrate-citric acid SOLN .39		prednisone SOLN	29	PRESERVISION AREDS 2 CAPS .90	
potassium gluconate TABS 595 MG, 550 MG, 595 MG	87	prednisone TABS	29	PRESERVISION AREDS 2+MULTI VIT CAPS	90
potassium iodide (expectorant) SOLN	30	prednisone TBPk	29	PRESERVISION AREDS CAPS ..	90
potassium phosphate monobasic TABS	86	pregabalin CAPS	10	PRESERVISION/LUTEIN CAPS ..	90
potassium phosphates 45 MMOLE/15ML	86	PREHEVBRIO	102	PREVNAR 13	101
PRALUENT SOAJ	16	PREMARIN	102	PREVNAR 20	101
pramipexole dihydrochloride TABS 21		PREMARIN TABS	38		
pramipexole dihydrochloride TB24 21		PREMPHASE	38		
pramoxine-hc-chloroxylenol	96	PREMPRO	38		
		PRENAISSANCE PLUS CAPS	92		
		PRENATAL (W/IRON & FA) TABS 92			
		PRENATAL 19 CHEW	92		
		PRENATAL 19 TABS	92		
		PRENATAL FORTE TABS	92		

PREZCOBIX	23	PRODIGY INSULIN SYRINGE ...	78	PROVIDA OB	92
PREZISTA SUSP	23	PRODIGY LANCETS 28G	61	pseudoephedrine hcl TABS 30 MG	93
PREZISTA TABS 150 MG	23	PRODIGY LANCING DEVICE MISC .	62	pseudoephedrine-guaifenesin TB12	
PREZISTA TABS 75 MG	23	PRODIGY SAFETY LANCETS 26G .	62	600 MG-60 MG	30
PRIFTIN	18	PRODIGY TWIST TOP LANCETS		PSS SELECT GP LANCETS	62
primaquine phosphate TABS	18	28G	62	PSS SELECT PLATFORMS MISC	62
primidone 50 MG, 250 MG	10	progesterone CAPS	97	PSS SELECT SAFETY LANCETS	62
PRIORIX SUSR	102	progesterone OIL	97	psyllium CAPS 0.52 GM, 400 MG .	41
PRO COMFORT ALCOHOL	70	PROLEUKIN	20	psyllium POWD 25 %, 28.3 %, 43 %, 48.57 %, 51.7 %, 100 %	41
PRO COMFORT INSULIN SYRINGE	78	promethazine hcl SOLN PO 6.25		PULMOZYME	98
PRO COMFORT LANCETS 30G .	61	MG/5ML	15	PURE COMFORT ALCOHOL PREP	70
PRO COMFORT LANCETS 31G .	61	promethazine hcl SUPP 12.5 MG, 25	15	PURE COMFORT LANCETS 30G	62
PRO COMFORT SAFETY LANCETS		MG	15	PURE COMFORT SPACER	
30G	61	promethazine hcl TABS	15	CHAMBER DEVI	85
PRO COMFORT SPACER ADULT		propafenone hcl CP12	7	PX ADVANCED LANCING DEVICE	
MISC	84	propafenone hcl TABS	7	MISC	62
PRO COMFORT SPACER CHILD		proparacaine hcl	95	PX GLUCOSE	12
MISC	84	propranolol hcl CP24	25	PX INSULIN SYRINGE	78
PRO COMFORT SPACER INFANT		propranolol hcl SOLN IV 1 MG/ML	25	PX LANCET AUTO INJECTOR MISC	62
DEVI	84	propranolol hcl SOLN PO 20		PX LANCETS MICROTHIN 33G .	62
PROAIR RESPICLICK AEPB	8	MG/5ML, 40 MG/5ML	25	PX LANCETS ULTRA THIN 28G .	62
probenecid	39	propranolol hcl TABS	25	PX PRENATAL MULTIVITAMINS	
PROBIOTICS + BARIATRIC MULTI		propylene glycol (ophth)	94	TABS	92
CAPS	90	propylthiouracil	99	pyrazinamide	18
PROCARE SPACER/ADULT MASK		PROQUAD SUSR	102	pyrethrins-piperonyl butoxide LIQD 3	
DEVI	84	PRORENAL + D W/ OMEGA-3		%-2.4 %-0.3 %-1.2 %	34
PROCARE SPACER/CHILD MASK		CAPS	90	pyrethrins-piperonyl butoxide SHAM	
DEVI	84	PROTECT CARDIO AF CAPS	90		
PROCHAMBER VHC DEVI	85	PROTECT PLUS SO CAPS	90		
prochlorperazine	22	PROTEGRA CAPS	90		
prochlorperazine maleate TABS ...	22				
PROCTOFOAM HC FOAM EX	6				

4 %-0.33 %	35	QUICKVUE AT-HOME COVID-19 TEST KIT	35	REBIF SOSY	98
pyrethrins-piperonyl butoxide- permethrin-nit remover 4 %-0.33 %- 0.5 %	34	quinapril hcl	16	REBIF TITRATION PACK SOSY ..	98
pyridostigmine bromide SOLN PO .	18	quinapril-hydrochlorothiazide	17	RECOMBIVAX HB SUSP	102
pyridostigmine bromide TABS 60 MG	18	quinidine sulfate TABS	7	RECOMBIVAX HB SUSY	102
pyridostigmine bromide TBCR	18	QUINTET CONTROL HIGH/NORMAL SOLN	62	REFRESH	94
pyridoxine hcl TABS 25 MG, 50 MG, 100 MG	103	RA ALCOHOL SWABS	70	REFRESH OPTIVE PF SOLN	94
PYZCHIVA 130 MG/26ML	38	RA GLUCOSE	12	REFRESH RELIEVA PF SOLN 0.9 %-0.5 %	94
PYZCHIVA 45 MG/0.5ML, 90 MG/ML	31	RA INSULIN SYRINGE	78	REFRESH TEARS PF SOLN	94
QC ADVANCED LANCING DEVICE MISC	62	RA PRENATAL FORMULA TABS .	92	REFUAH PLUS GLUCOSE CONTROL SOLN	63
QC ALCOHOL SWABS	70	RA PRENATAL TABS	92	RELENZA DISKHALER	24
QC LANCETS SUPER THIN 30G .	62	rabeprazole sodium TBEC	100	RELION ALCOHOL SWABS	70
QC LANCETS ULTRA THIN	62	ramelteon	41	RELION GLUCOSE	12
QC OCUHEALTH VISION SUPPORT 2 CAPS	90	ramipril CAPS	16	RELION INSULIN SYRINGE	78
QC PRENATAL TABS	92	ranolazine TB12	6	RELION KETONE TEST STRP ...	35
QC UNILET LANCETS 28G	62	rasagiline mesylate	21	RELION LANCET DEVICES 30G .	63
QC UNILET LANCETS MICRO THIN	62	READYLANCE SAFETY LANCETS . 62		RELION LANCETS	63
quetiapine fumarate TABS 100 MG 22		REALITY INSULIN SYRINGE	78	RELION LANCETS MICRO-THIN 33G	63
quetiapine fumarate TABS 25 MG, 50 MG, 200 MG, 300 MG, 400 MG ...	22	REALITY LANCETS	62	RELION LANCETS THIN 26G	63
quetiapine fumarate TB24 150 MG, 200 MG	22	REALITY LATEX CONDOMS MISC . 44		RELION LANCETS ULTRA-THIN 30G	63
quetiapine fumarate TB24 50 MG, 300 MG, 400 MG	22	REALITY LATEX/ULTRA TEXTURED DEVI	44	RELION LANCING DEVICE MISC	63
QUICKTEK CONTROL SOLUTION LIQD	62	REALITY LATEX/ULTRA THIN DEVI 44		RELION TRUE MET AIR GLUC METER KIT	63
		REALITY SWABS	70	RELION TRUE METRIX TEST STRIPS STRP	35
		REALITY TRIGGER LANCETS ...	63	RELION ULTRA THIN LANCETS 30G	63
		REBIF REBIDOSE SOAJ	98	REMEDIENT CAPS	90
		REBIF REBIDOSE TITRATION PACK SOAJ	98	REMODULIN SOLN IJ	26

RENATABS	88	rizatriptan benzoate TABS	85	SAPS TWIST TOP LANCETS	64
RENTHYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	99	rizatriptan benzoate TBDP	85	SAPSCARE TWIST TOP LANCETS 64	
repaglinide	13	ropinirole hydrochloride TABS	21	SAVAYSA	9
RESTASIS MULTIDOSE EMUL	95	ropinirole hydrochloride TB24	21	saxagliptin hcl	12
RETACRIT	40	rosuvastatin calcium TABS	16	saxagliptin-metformin hcl	11
RETROVIR SOLN	23	RUBRACA	20	SB ALCOHOL PREP	70
REVLIMID	87	RUKOBIA	24	SB INSULIN SYRINGE	78
REYATAZ PACK	23	RUXIENCE	19	SB LANCETS THIN	64
ribavirin (hepatitis c) CAPS	24	RYDAPT	20	SB LANCETS ULTRA THIN	64
ribavirin (hepatitis c) TABS 200 MG 24		RYKINDO SRER	22	SCEMBLIX 100 MG	20
ribavirin	25	sacubitril-valsartan TABS	26	SCEMBLIX 20 MG, 40 MG	20
rifabutin	18	SAFE-T-LANCE	63	SECURESAFE HYPODERMIC NEEDLE	78
rifampin CAPS	18	SAFE-T-LANCE PLUS	63	SECURESAFE INSULIN SYRINGE . 78	
RIGHTEST ALTERNATE SITE ADAPT MISC	63	SAFETY LANCET 30G/PRESSURE ACT	63	SECURESAFE SYRINGE/NEEDLE . 78	
RIGHTEST GD500 LANCING DEVICE MISC	63	SAFETY LANCETS	63	SELECT-LITE LANCING DEVICE MISC	64
RIGHTEST GL300 LANCETS	63	SAFETY LANCETS 21G	63	SELECT-OB CHEW 60 MG-2.5 MG- 1 MG-400 UNIT-5 MCG-1.8 MG-15 MG-1.6 MG-25 MG-15 MG-30 UNIT- 29 MG-1700 UNIT	92
riluzole TABS	93	SAFETY LANCETS 23G	63	selegiline hcl CAPS	21
rimantadine hydrochloride TABS ..	24	SAFETY LANCETS 28G	63	selegiline hcl TABS	21
risedronate sodium TABS 5 MG, 35 MG, 150 MG	36	saline SOLN 0.65 %	93	selenium sulfide LOTN 2.5 %	32
risperidone microspheres	21	SANDIMMUNE SOLN PO 100 MG/ML	87	selenium TABS 50 MCG	87
risperidone SOLN	22	SANTYL OINT	33	SELZENTRY SOLN	24
risperidone TABS	22	sapropterin dihydrochloride TABS .	37	SELZENTRY TABS 25 MG, 75 MG 24	
risperidone TBDP	22	SAPS CARE ALCOHOL PREP ...	70	SE-NATAL 19 CHEW	92
RITEFLO DEVI	85	SAPS HEALTH ALCOHOL PREP 70		SE-NATAL 19 TABS	92
ritonavir TABS	23	SAPS HEALTH CARE ALCOHOL PREP	70		
rivaroxaban TABS 2.5 MG	9	SAPS HEALTH PLUS LANCETS .	64		
rivastigmine tartrate CAPS	97	SAPS HEALTH TWIST TOP LANCETS	64		

sennosides LIQD41	HCL TABS 12	sodium fluoride (dental) SOLN 0.2 % 88
sennosides SYRP 8.8 MG/5ML ...41	SKIN HAIR & NAILS ADVANCED CAPS90	sodium fluoride CHEW86
sennosides TABS 8.6 MG, 25 MG .41	skin protectants, misc. OINT34	sodium fluoride SOLN 0.5 MG/ML .86
sennosides-docusate sodium TABS 41	SKYLA28	sodium fluoride TABS86
sertraline hcl CONC11	SKYTROFA37	sodium phenylbutyrate POWD37
sertraline hcl TABS 11	SM ALCOHOL PREP 70	sodium phenylbutyrate TABS37
sevelamer carbonate PACK 39	SM PRENATAL VITAMINS TABS .92	sodium phosphates (sodium phosphate dibasic & monobasic) 45 MMOLE/15ML 87
sevelamer carbonate TABS 39	SM TRUEDRAW LANCING DEVICE MISC 64	sodium phosphates ENEM 41
SFROWASA ENEM38	SMART DIABETES VANTAGE LANCING MISC64	sodium polystyrene sulfonate POWD 87
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sildenafil citrate (pulmonary hypertension) TABS 26	SMARTEST LANCETS 28G64	SOFOSBUVIR-VELPATASVIR TABS24
silodosin39	sodium acetate SOLN 86	solifenacin succinate TABS 100
silver sulfadiazine 32	sodium bicarbonate (antacid) TABS 650 MG6	SOLU-CORTEF 250 MG, 500 MG, 1000 MG 29
simethicone CHEW38	sodium bicarbonate IV 4.2 %, 8.4 % . 86	SOLU-MEDROL (PF) 40 MG, 125 MG, 1000 MG29
simethicone SUSP38	sodium chloride (gu irrigant) 0.9 % 39	SOLUS V2 LANCETS 28G64
SIMLANDI (1 PEN) AJKT2	sodium chloride (inhalant) NEBU 0.9 %, 3 %, 7 %, 10 %30	SOLUS V2 LANCING DEVICE MISC 64
SIMLANDI (1 SYRINGE) PSKT2	sodium chloride flush87	SOLUS V2 TWIST LANCETS 30G 64
SIMLANDI (2 PEN) AJKT2	sodium chloride hypertonic OINT ..95	
SIMLANDI (2 SYRINGE) PSKT 20 MG/0.2ML2	sodium chloride hypertonic SOLN .95	
SIMPLE DIAGNOSTICS LANCING DEV MISC64	sodium chloride SOLN IV 0.45 %, 0.9 %, 3 %, 4 MEQ/ML, 5 %87	
simvastatin TABS 5 MG, 10 MG, 20 MG, 40 MG16	sodium chloride TABS87	
simvastatin TABS 80 MG 16	sodium citrate & citric acid 39	
SINGLE-LET 64	sodium fluoride (dental) CREA 88	
sirolimus SOLN 87	sodium fluoride (dental) GEL 88	
sirolimus TABS87	sodium fluoride (dental) PSTE DT .88	
SITAGLIPTIN12		
SITAGLIPTIN BASE-METFORMIN		

spinosad	35	sulfasalazine TBEC	38	SUSPENDOL-S	97
SPIRIVA RESPIMAT AERS 1.25 MCG/ACT	7	sulindac TABS	3	SYMTUZA	24
SPIRIVA RESPIMAT AERS 2.5 MCG/ACT	7	sumatriptan	86	SYNAGIS SOLN	96
spironolactone & hydrochlorothiazide	36	sumatriptan succinate SOAJ	86	SYNTHROID TABS (Use levothyroxine sodium)	99
spironolactone TABS	36	sumatriptan succinate SOCT	86	SYRINGE DISPOSABLE	78
stannous fluoride CONC	88	sumatriptan succinate SOLN 6 MG/0.5ML	86	SYRINGE ECCENTRIC TIP	78
STEQEYMA	31	sumatriptan succinate TABS	86	SYRINGE LUER LOCK	78
STEQEYMA	38	sunitinib malate 12.5 MG, 25 MG, 50 MG	20	SYRINGE LUER SLIP	78
STERILANCE PA MISC	64	SUPER ANTIOXIDANT CAPS	90	SYRINGE LUER SLIP	79
STERILANCE TL	64	SUPER THIN LANCETS	64	SYRSPEND SF LIQD	97
STERILE DILUENT FLOLAN PH 12 97		SUPPORT LIQD	90	SYSTANE NIGHT GEL	94
STIOLTO RESPIMAT	8	SUPPORT-500 CAPS	90	TABLOID	19
streptomycin sulfate SOLR	2	SUPPRELIN LA	37	TABRECTA	20
STRIBILD	24	SUPREME II HIGH/LOW CONTROL LIQD	64	tacrolimus (topical) OINT	33
STRIVERDI RESPIMAT	8	SURE COMFORT ALCOHOL PREP	70	tacrolimus CAPS	87
STROVITE FORTE SYRP	90	SURE COMFORT INSULIN SYRINGE	78	tadalafil (pulmonary hypertension) TABs	26
sucralfate TABS	100	SURE COMFORT LANCETS 18G 65		TAFINLAR CAPS	20
sulfacetamide sodium (ophth) SOLN 95		SURE COMFORT LANCETS 21G 65		TAFINLAR TBSO	20
sulfacetamide sod-prednisolone SOLN	95	SURE COMFORT LANCETS 23G 65		tamoxifen citrate TABS	19
sulfadiazine TABS	98	SURE COMFORT LANCETS 28G 65		tamsulosin hcl	39
sulfamethoxazole-trimethoprim SOLN	17	SURE COMFORT LANCETS 30G 65		TARON-C DHA	92
sulfamethoxazole-trimethoprim SUSP	17	SURE COMFORT LANCING PEN MISC	65	TDVAX SUSP	99
sulfamethoxazole-trimethoprim TABS	17	SURELITE LANCETS	65	TECHLITE AST LANCETS	65
sulfasalazine TABS	38			TECHLITE INSULIN SYRINGE ...	79
				TECHLITE LANCETS	65
				TECHLITE LANCETS 26G	65
				TECHLITE LANCETS 30G	65
				TEGADERM + PAD 2"X2-3/4" MISC 43	

TEGADERM + PAD 2-3/8"X4" MISC . 43	43	telmisartan-hydrochlorothiazide ...17
TEGADERM + PAD 3-1/2"X10" MISC . 43	43	temazepam 15 MG, 30 MG41
TEGADERM + PAD 3-1/2"X13-3/4" MISC43	43	temozolomide CAPS18
TEGADERM + PAD 3-1/2"X4" MISC . 43	43	TENIVAC INJ 99
TEGADERM + PAD 3-1/2"X4-1/8" MISC43	43	tenofovir disoproxil fumarate TABS 24
TEGADERM + PAD 3-1/2"X6" MISC . 43	43	terazosin hcl16
TEGADERM + PAD 3-1/2"X8" MISC . 43	43	terbinafine hcl (topical) CREA 31
TEGADERM + PAD 6"X6" MISC ..43	43	terbinafine hcl TABS 15
TEGADERM ABSORBENT DRESSING MISC43	43	terbutaline sulfate TABS 8
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TEGADERM FILM 4"X10" MISC .. 43	43	teriflunomide98
TEGADERM FILM 4"X4-1/2" MISC 43	43	testosterone cypionate SOLN IM ... 5
TEGADERM FILM 4"X4-3/4" MISC 43	43	testosterone enanthate SOLN IM ...5
TEGADERM FILM 6"X8" MISC ...43	43	testosterone GEL TD 1 %, 1.62 %, 25 MG/2.5GM, 50 MG/5GM, 1.62 % . 5
TEGADERM FILM 8"X12" MISC .. 43	43	TETANUS-DIPHTHERIA TOXOIDS TD SUSP99
TEGADERM HP 2-1/8"X2-1/2" MISC 43	43	tetrabenazine97
TEGADERM HP 2-3/8"X2-3/4" MISC 43	43	tetracaine hcl (ophth)95
TEGADERM HP 2-3/8"X2-3/8" MISC 43	43	tetracycline hcl CAPS99
TEGADERM HP 4"X4-1/2" MISC ..43	43	TGT GLUCOSE 12
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		theophylline TB12 300 MG, 450 MG . 9
		theophylline TB249
		THERAMILL FORTE CAPS 90
		THERANATAL LACTATION ONE CAPS90
		thiamine hcl TABS 50 MG, 100 MG

103	TODAYS HEALTH THIN LANCETS	trazodone hcl TABS 50 MG, 100 MG, 150 MG
thiamine mononitrate TABS 100 MG . 103	28G65	11
THINLETS GP LANCETS65	TODAYS HEALTH THIN LANCETS	TRELEGY ELLIPTA8
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thiothixene22	tolcapone21	tretinoin (chemotherapy)20
THRIVITE RX TABS92	tolnaftate AERP31	tretinoin CREA 0.025 %, 0.05 %, 0.1 %30
THYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG99	tolnaftate CREA31	tretinoin GEL 0.01 %, 0.025 %30
tiagabine hcl10	tolnaftate LIQD31	triamcinolone acetonide (mouth) ..88
tigecycline98	tolnaftate POWD EX31	triamcinolone acetonide (nasal) AERO93
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timolol maleate (ophth) SOLN94	tolterodine tartrate TABS100	triamcinolone acetonide (topical) LOTN33
timolol maleate TABS25	topiramate CPSP10	triamcinolone acetonide (topical) OINT33
tinidazole17	topiramate TABS10	triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG36
tiotropium bromide monohydrate CAPS7	topotecan hcl SOLR21	triamterene & hydrochlorothiazide TABS36
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TIVICAY TABS 50 MG24	tramadol hcl TABS 50 MG4	trihexyphenidyl hcl SOLN21
tizanidine hcl TABS93	tramadol hcl TB244	trihexyphenidyl hcl TABS21
TOBRADEX OINT95	tramadol-acetaminophen5	trimethobenzamide hcl CAPS14
tobramycin (ophth) SOLN95	trandolapril 2 MG, 4 MG16	trimethoprim TABS17
tobramycin NEBU2	tranexamic acid SOLN 1000 MG/10ML40	TRINATAL RX 1 TABS92
tobramycin sulfate SOLN IJ 1.2 GM/30ML, 2 GM/50ML, 10 MG/ML, 80 MG/2ML2	tranexamic acid TABS40	triprolidine & pseudoephedrine TABS30
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TROJAN ULTRA THIN MISC	45	TRUEPLUS GLUCOSE CHEW	12	TRUSTEX RIA LUBRICATED MISC .	45
TROJAN ULTRA THIN/SPERMICIDAL MISC	45	TRUEPLUS GLUCOSE ON THE GO CHEW	12	TRUSTEX RIA NON-LUBRICATED MISC	45
TROJAN-ENZ LUBRICATED MISC 45		TRUEPLUS INSULIN SYRINGE ..	79	TRUSTEX-NONNOXYNOL- 9/RIB/STUD MISC	45
TROJAN-ENZ/SPERMICIDAL MISC .	45	TRUEPLUS LANCETS 26G	66	TRUXIMA	19
tropicamide SOLN	94	TRUEPLUS LANCETS 28G	66	TWINRIX SUSY	102
tropium chloride CP24	100	TRUEPLUS LANCETS 30G	66	TWIST TOP LANCETS 30G	66
tropium chloride TABS	100	TRUEPLUS LANCETS 33G	66	TYBLUME CHEW	28
TRUE COMFORT ALCOHOL PREP PADS	70	TRUEPLUS SAFETY LANCETS 28G	66	TYBOST	24
TRUE COMFORT INSULIN SYRINGE	79	TRULICITY	12	TYVASO REFILL KIT SOLN IN ...	26
TRUE COMFORT PRO ALCOHOL PREP	70	TRUMENBA 0.5 ML	101	TYVASO SOLN IN	26
TRUE COMFORT PRO INSULIN SYR	79	TRUSTEX COLOR CONDOMS + LUBE MISC	45	TYVASO STARTER KIT SOLN IN	26
TRUE COMFORT SAFETY LANCETS	65	TRUSTEX LUB/RIBBED/STUDED MISC	45	UDENYCA ONBODY SOSY	40
TRUE COMFORT TWIST TOP LANCETS	65	TRUSTEX LUB/SPERMICIDE EX ST MISC	45	UDENYCA SOAJ	40
TRUE COVER DEVI	45	TRUSTEX LUB/SPERMICIDE XL MISC	45	UDENYCA SOSY	40
TRUE METRIX AIR GLUCOSE METER KIT	65	TRUSTEX LUBRICATED EX LARGE MISC	45	ULTICARE ALCOHOL SWABS ...	70
TRUE METRIX BLOOD GLUCOSE TEST STRP	36	TRUSTEX LUBRICATED EXTRA ST MISC	45	ULTICARE INSULIN SAFETY SYR .	79
TRUE METRIX GO GLUCOSE METER KIT	65	TRUSTEX LUBRICATED MISC ...	45	ULTICARE INSULIN SYRINGE ...	79
TRUE METRIX METER KIT	66	TRUSTEX LUBRICATED/SPERMICIDE MISC	45	ULTICARE SYRINGE	79
TRUECONTROL GLUCOSE CONT LEV 0 LIQD	66	TRUSTEX NATURAL CONDOMS + LUBE MISC	45	ULTICARE TUBERCULIN SAFETY SYR	79
TRUECONTROL GLUCOSE CONT LEV 1 LIQD	66	TRUSTEX NON-LUBRICATED MISC	45	ULTIGUARD SAFEPAK SYR/NEEDLE	79
				ULTI-LANCE AUTOMATIC MISC .	66
				ULTILET ALCOHOL SWABS	70
				ULTILET CLASSIC LANCETS	66
				ULTILET LANCETS	66

ULTILET SAFETY LANCETS66	UNISTIK 167	URIMAR-T TABS 17
ULTILET SAFETY LANCETS 23G 66	UNISTIK 267	ursodiol CAPS 38
ULTRA COMFORT INSULIN SYRINGE79	UNISTIK 2 COMFORT67	ursodiol TABS38
ULTRA FLO INSULIN SYR 1/2 UNIT79	UNISTIK 2 EXTRA67	UZEDY SUSY22
ULTRA FLO INSULIN SYRINGE .79	UNISTIK 2 NEONATAL67	VABRINTY KIT SC 22.5 MG, 45 MG . 19
ULTRA THIN LANCETS 31G66	UNISTIK 2 NORMAL67	valacyclovir hcl24
ULTRA-CARE ALCOHOL PREP PADS70	UNISTIK 2 SUPER67	VALCHLOR31
ULTRACARE INSULIN SYRINGE 79	UNISTIK 367	valganciclovir hcl SOLR24
ULTRA-CARE LANCETS 30G66	UNISTIK 3 COMFORT67	valganciclovir hcl TABS24
ULTRA-THIN II AUTO LANCET ..66	UNISTIK 3 EXTRA67	valproate sodium SOLN IV 100 MG/ML, 500 MG/5ML10
ULTRA-THIN II INS SYR SHORT .79	UNISTIK 3 GENTLE68	valproic acid CAPS 10
ULTRA-THIN II INSULIN SYRINGE . 79	UNISTIK 3 NEONATAL68	valsartan TABS 16
ULTRA-THIN II LANCETS66	UNISTIK 3 NORMAL68	valsartan-hydrochlorothiazide17
umeclidinium-vilanterol9	UNISTIK CZT COMFORT68	VALTOCO 10 MG DOSE LIQD9
UNILET COMFORTOUCH LANCET 66	UNISTIK CZT NORMAL68	VALTOCO 15 MG DOSE LQPK 7.5 MG/0.1ML9
UNILET EXCELITE67	UNISTIK NORMAL68	VALTOCO 20 MG DOSE LQPK 10 MG/0.1ML9
UNILET EXCELITE II67	UNISTIK PRO SAFETY LANCET .68	VALTOCO 5 MG DOSE LIQD9
UNILET G.P. LANCET67	UNISTIK SAFETY LANCETS 28G 68	VANALICE GEL35
UNILET G.P. SUPERLITE LANCET . 67	UNISTIK SAFETY LANCETS 30G 68	vancomycin hcl CAPS 125 MG17
UNILET GP 28 ULTRA THIN67	UNISTIK TOUCH SAFETY LANC 21G68	vancomycin hcl SOLR IV 1 GM, 5 GM, 10 GM, 500 MG17
UNILET LANCET67	UNISTIK TOUCH SAFETY LANC 23G68	vancomycin hcl SOLR PO 25 MG/ML, 50 MG/ML, 250 MG/5ML .17
UNILET MICRO-THIN 33G67	UNISTIK TOUCH SAFETY LANC 28G68	VANISHPOINT ALLERGY TRAY KIT79
UNILET SUPERLITE LANCET ...67	UNISTIK TOUCH SAFETY LANC 30G68	VANISHPOINT INSULIN SYRINGE . 79
UNILET SUPER-THIN 30G67	UPSPRING BABY IRON-IMMUNITY LIQD91	VANISHPOINT SAFETY SYRINGE . 79
UNILET ULTRA-THIN 28G67	UPSPRINGBABY MULTIVITAMIN/IRON LIQD91	

VANISHPOINT SYRINGE	79	VERIFINE UNIVERSAL LANCETS 30G	68	VITEYES AREDS 2 FORMULA +MULTI CAPS	90
VANISHPOINT TUBERCULIN SYRINGE MISC	79	VERIFINE UNIVERSAL LANCETS 33G	69	VITEYES AREDS 2 FORMULA CAPS	90
VAQTA	102	VERISAFE SAFETY STERILE NEEDLE	80	VITEYES CLASSIC ADVANCED CAPS	90
varenicline tartrate TABS	98	vilazodone hcl TABS	11	VITEYES CLASSIC MACULAR SUPPOR CAPS	90
varenicline tartrate TBPK	98	VINATE II	92	VITEYES CLASSIC+OMEGA-3 CAPS	90
VARIVAX SUSR	102	VINATE ONE TABS	92	VIVAGUARD INO CONTROL SOLUTION LIQD	69
VAXNEUVANCE	101	vincristine sulfate	21	VIVAGUARD LANCETS	69
VCF VAGINAL CONTRACEPTIVE FILM	102	vinorelbine tartrate	21	VIVAGUARD LANCETS 30G	69
VCF VAGINAL CONTRACEPTIVE GEL	102	VIRACEPT TABS 250 MG	24	VIVAGUARD LANCING DEVICE MISC	69
venlafaxine hcl CP24	11	VIRACEPT TABS 625 MG	24	VIVAGUARD SAFETY LANCETS 28G	69
venlafaxine hcl TABS	11	VIREAD POWD	24	VIVITROL	14
VENTAVIS IN	26	VISION HEALTH CAPS	90	voriconazole SOLR	15
verapamil hcl CP24 120 MG, 180 MG, 240 MG	25	VISION OPTIMIZER CAPS	90	VORICONAZOLE SOLR	15
verapamil hcl SOLN 2.5 MG/ML ...	25	VISTA ADVANCED AREDS2 FORMULA CAPS	90	voriconazole TABS	15
verapamil hcl TABS	25	VISTA ADVANCED DRY EYE FORMULA CAPS	90	VORTEX HOLD CHMBR/MASK/CHILD DEVI	85
verapamil hcl TBCR	25	VITABEX CAPS	90	VORTEX HOLD CHMBR/MASK/TODDLER DEVI ..	85
VERASENS GLUCOSE CONTROL LIQD	68	VITABEX PLUS CAPS	90	VORTEX VALVE CHAMBER-PEDI MASK DEVI	85
VERIFINE INSULIN SYRINGE ...	80	VITAFOL-OB TABS	92	VORTEX VALVED HOLDING CHAMBER DEVI	85
VERIFINE SAFE LANCET MINI 21G	68	VITAFOL-ONE CAPS	92	VOTRIENT	20
VERIFINE SAFE LANCET MINI 23G	68	vitamin a CAPS 10000 UNIT, 3 MG, 3000 MCG, 10000 UNIT	103	VYVANSE CAPS	1
VERIFINE SAFE LANCET MINI 28G	68	VITAMIN A/C/D/ INFANT/TODDLER	91	VYVANSE CHEW	1
VERIFINE SAFE LANCET MINI 30G	68	VITAMIN A-C-D INFANT	91	WALGREENS GLUCOSE	12
VERIFINE UNIVERSAL LANCETS 28G	68	vitamin e CAPS 180 MG, 400 UNIT, 180 MG	103		
		vitamins w/ lipotropics CAPS	93		
		vitamins w/ lipotropics TABS	93		

warfarin sodium TABS	9	XOLAIR SOSY	7	zoledronic acid SOLN 5 MG/100ML	37
water for irrigation, sterile	87	YESINTEK SOLN 45 MG/0.5ML ..	31	ZOLEDRONIC ACID SOLN	37
WEBCOL ALCOHOL PREP LARGE		YESINTEK SOSY	32	ZOLINZA	20
70		YUSIMRY	2	zolmitriptan SOLN	86
WEBCOL ALCOHOL PREP		zafirlukast	8	zolmitriptan TABS	86
MEDIUM	70	zaleplon	41	zolmitriptan TBDP	86
WESCAP-C DHA	93	ZARONTIN CAPS (Use		zolpidem tartrate TABS	41
WESCAP-PN DHA	93	ethosuximide)	10	zolpidem tartrate TBCR	41
WESNATAL DHA COMPLETE ...	93	ZARONTIN SOLN (Use		zonisamide CAPS	10
white petrolatum-mineral oil	94	ethosuximide)	10	ZOSTRIX NATURAL PAIN RELIEF	
WIDE-SEAL DIAPHRAGM 60	45	ZARXIO	40	CREA	34
WIDE-SEAL DIAPHRAGM 65	45	ZENPEP CPEP 105000 UNIT-79000		ZOSYN	97
WIDE-SEAL DIAPHRAGM 70	45	UNIT-25000 UNIT, 14000 UNIT-		ZUBSOLV SUBL 0.18 MG-0.7 MG,	
WIDE-SEAL DIAPHRAGM 75	45	10000 UNIT-3000 UNIT, 168000		0.36 MG-1.4 MG, 0.71 MG-2.9 MG,	
WIDE-SEAL DIAPHRAGM 80	45	UNIT-126000 UNIT-40000 UNIT,		1.4 MG-5.7 MG	5
WIDE-SEAL DIAPHRAGM 85	45	24000 UNIT-17000 UNIT-5000 UNIT,		ZUBSOLV SUBL 2.1 MG-8.6 MG ...	5
WIDE-SEAL DIAPHRAGM 90	45	252600 UNIT-189600 UNIT-60000		ZUBSOLV SUBL 2.9 MG-11.4 MG .	5
WIDE-SEAL DIAPHRAGM 95	45	UNIT, 42000 UNIT-32000 UNIT-		ZYKADIA TABS	20
XARELTO STARTER PACK TBPK .	9	10000 UNIT, 63000 UNIT-47000		ZYLOTROL CREA	34
XARELTO TABS 10 MG, 20 MG ...	9	UNIT-15000 UNIT, 84000 UNIT-		ZYPREXA RELPREVV	22
XARELTO TABS 2.5 MG, 15 MG		63000 UNIT-20000 UNIT	36		
(Use rivaroxaban)	9	ZEVRX INSULIN SYRINGE	80		
XARELTO TABS 2.5 MG, 15 MG ...	9	ZEVRX STERILE ALCOHOL PREP			
XELJANZ SOLN	2	PAD	70		
XELJANZ TABS	2	ZEVRX TWIST TOP LANCETS 30G			
XELJANZ XR TB24	2	69			
XERAC AC	34	zidovudine CAPS	24		
XOFLUZA (40 MG DOSE) 40 MG .	24	zidovudine SYRP	24		
XOFLUZA (80 MG DOSE) 80 MG .	25	zidovudine TABS	24		
XOLAIR SOAJ	7	zinc oxide (topical) OINT 20 %	34		
XOLAIR SOLR	7	ziprasidone hcl	21		
		ZITHROMAX PACK	42		
		zoledronic acid CONC	37		
		zoledronic acid SOLN 4 MG/100ML			
		37			