



Preferred Drug List (PDL)

New Jersey

Effective Date: October 1, 2024





UnitedHealthcare Community Plan does not treat members differently because of sex, age, race, color, disability or national origin.

If you think you were treated unfairly because of your sex, age, race, color, disability or national origin, you can send a complaint to:

Civil Rights Coordinator
UnitedHealthcare Civil Rights Grievance
P.O. Box 30608
Salt Lake City, UT 84130
UHC_Civil_Rights@uhc.com

You must send the complaint within 60 days of when you found out about it. A decision will be sent to you within 30 days. If you disagree with the decision, you have 15 days to ask us to look at it again.

If you need help with your complaint, please call the toll-free member phone number listed on your health plan member ID card, TTY 711, 24 hours a day, 7 days a week.

You can also file a complaint with the U.S. Dept. of Health and Human Services.



Online:

ocrportal.hhs.gov/ocr/portal/lobby.jsf

Complaint forms are available at hhs.gov/ocr/office/file/index.html



Phone:

800-368-1019, 800-537-7697 (TDD)



Mail:

U.S. Dept. of Health and Human Services
200 Independence Avenue SW
Room 509F, HHH Building
Washington, D.C. 20201

If you need help with your complaint, please call the toll-free member phone number listed on your member ID card.

We provide free services to help you communicate with us, such as letters in other languages or large print. You can also ask for an interpreter. To ask for help, please call the toll-free member phone number listed on your health plan member ID card, TTY 711, 24 hours a day, 7 days a week.



UnitedHealthcare Community Plan no da un tratamiento diferente a sus miembros en base a su sexo, edad, raza, color, discapacidad u origen nacional.

Si usted piensa que ha sido tratado injustamente por razones como su sexo, edad, raza, color, discapacidad o origen nacional, puede enviar una queja a:

Civil Rights Coordinator
UnitedHealthcare Civil Rights Grievance
P.O. Box 30608
Salt Lake City, UT 84130
UHC_Civil_Rights@uhc.com

Usted tiene que enviar la queja dentro de los 60 días de la fecha cuando se enteró de ella. Se le enviará la decisión en un plazo de 30 días. Si no está de acuerdo con la decisión, tiene 15 días para solicitar que la consideremos de nuevo.

Si usted necesita ayuda con su queja, por favor llame al número de teléfono gratuito para miembros que aparece en su tarjeta de identificación del plan de salud, TTY 711, 24 horas al día, 7 días a la semana.

Usted también puede presentar una queja con el Departamento de Salud y Servicios Humanos de los Estados Unidos.



Internet:

ocrportal.hhs.gov/ocr/portal/lobby.jsf

Complaint forms are available at hhs.gov/ocr/office/file/index.html



Teléfono:

800-368-1019, 800-537-7697 (TDD)



Correo:

U.S. Dept. of Health and Human Services
200 Independence Avenue SW
Room 509F, HHH Building
Washington, D.C. 20201

Si necesita ayuda para presentar su queja, por favor llame al número gratuito para miembros anotado en su tarjeta de identificación como miembro.

Ofrecemos servicios gratuitos para ayudarle a comunicarse con nosotros, tales como, cartas en otros idiomas o en letra grande. O bien, puede solicitar un intérprete. Para pedir ayuda, por favor llame al número de teléfono gratuito para miembros que aparece en su tarjeta de identificación del plan de salud, TTY 711, 24 horas al día, 7 días a la semana.

Preferred drug list

Introduction

UnitedHealthcare Community Plan is pleased to provide this Preferred Drug List (PDL) to be used when prescribing for patients covered by the pharmacy benefit plan offered by UnitedHealthcare Community Plan. The drugs listed in this PDL are intended to provide sufficient options to treat patients who require treatment with a drug from that pharmacologic or therapeutic class. The drugs listed in the UnitedHealthcare Community Plan PDL have been reviewed and approved by the Pharmacy and Therapeutics Committee. The drugs have been selected to provide the most clinically appropriate and cost-effective medications for patients who have their drug benefit administered through UnitedHealthcare Community Plan. It is also recognized there may be occasions where an unlisted drug is desired for proper medical management of a specific patient. In those infrequent instances, the unlisted medication may be requested through the prior authorization process.

The drugs represented have been reviewed by the Pharmacy and Therapeutics (P&T) Committee and are approved for inclusion. The PDL is reflective of current medical practice as of the date of review.

This edition incorporates drugs added to the PDL since the last edition as well as numerous revisions to the prescribing information based on changes in pharmacotherapy. Comments and suggestions from practicing physicians have also been incorporated to ensure that the UnitedHealthcare Community Plan PDL is reflective of current medical practice.

Notice

The information contained in this PDL and its appendices is provided by UnitedHealthcare Community Plan, solely for the convenience of medical providers. UnitedHealthcare Community Plan does not warrant or assure accuracy of such information nor is it intended to be comprehensive in nature.

This PDL is not intended to be a substitute for the knowledge, expertise, skill and judgment of the medical provider in their choice of prescription drugs.

UnitedHealthcare Community Plan assumes no responsibility for the actions or omissions of any medical provider based upon reliance, in whole or in part, on the information contained herein. The medical provider should consult the drug manufacturer's product literature or standard references for more detailed information.

Preface

The UnitedHealthcare Community Plan PDL is organized by sections. Each section includes therapeutic groups identified by either a drug class or disease state.

Products are listed by generic name. Brand names are included as a reference to assist in product recognition. Unless exceptions are noted, generally all applicable dosage forms and strengths of the drug cited are included in the PDL. Generics should be considered the first line of prescribing.

The UnitedHealthcare Community Plan PDL covers selected over-the-counter (OTC) products. You are encouraged to prescribe OTC medications when clinically appropriate.

Drug tiers

The drugs listed in the PDL have different tiers. The tiers are listed in the grid below.

Tier Name	Drug Tier
Tier 1	Generic
Tier 2	Brand

Generic substitution

The UnitedHealthcare Community Plan PDL **requires** generic substitution on the majority of products when a generic equivalent is available.

Generic substitution is a pharmacy action whereby a generic equivalent is dispensed rather than the brand name product. The PDL indicates generic availability in the “Covered Drug” column.

If a brand name drug is medically necessary, please submit a prior authorization request.

The UnitedHealthcare Community Plan MAC list sets a ceiling price for the reimbursement of certain multisource prescription drugs. This price will typically cover the acquisition of most generics but not branded versions of the same drug. The products selected for inclusion on the MAC list are commonly prescribed and dispensed and have usually gone through the FDA’s review and approval process. An important consideration for generic substitution is the knowledge that all approvals of generic drugs by the FDA since 1984, and many generic approvals prior to 1984, have a showing of bioequivalence between the generic versions and the reference brand product. To gain FDA approval:

1. The generic drug must contain the same active ingredient(s), be the same strength and the same dosage form as the brand name product.
2. The FDA has given the generic an “A” rating compared to the branded product indicating bioequivalence and has determined the generic is therapeutically equivalent to the reference brand. The ratings of generic drugs are available by referring to the FDA reference, Approved Drug Products with Therapeutic Equivalence Evaluations (Orange Book).

When the above two criteria are met, a generic can be substituted with the full expectation that the substituted product will produce the same clinical effect and safety profile as the prescribed product. Drug products that have a narrow therapeutic index (NTI) can also be guided by these principles. It is not necessary for the health care provider to approach any one therapeutic class of drug products (e.g., NTI drugs) differently from any other class, when there has been a determination of therapeutic equivalence by the FDA for the drug products under consideration. Also, additional clinical tests or examinations by the physician are not needed when a therapeutically equivalent generic drug product is substituted for the brand name product.

There are now many brand name products that are repackaged or distributed under a generic label. The generic label version should always be considered therapeutically equivalent and substitutable for the source branded product.

Drug efficacy study implementation (DESI) drugs

Drugs first marketed between 1938 and 1962 were approved as safe but required no showing of effectiveness for FDA approval. Beginning in 1962, all new drugs were required to be both safe and effective before they could be marketed. This legislation also applied retroactively to all drugs approved as safe from 1938-1962.

The DESI program was established by the FDA to review the effectiveness of these pre-1962 drugs for their labeled indications, and a determination of “fully effective” was made for most of these products and they remain in the marketplace. A few DESI products remain classified as “less than fully effective” while awaiting final administrative disposition. Also, classified as DESI are many products listed as identical, similar, or related to actual DESI products. UnitedHealthcare Community Plan’s PDL does not cover DESI “less than fully effective” drug products.

Plan exclusions

The following drug categories are excluded from coverage under the outpatient pharmacy benefit and are not part of the UnitedHealthcare Community Plan PDL.

- DESI drugs
- Anti-obesity agents
- Experimental / research drugs
- Cosmetic drugs
- Nutritional / diet supplements
- Blood and blood plasma products
- Agents used to promote fertility
- Agents used for erectile dysfunction
- Agents used for cosmetic hair growth
- Drugs from manufacturers that do not participate in the FFS Medicaid Drug Rebate Program
- Diagnostic products
- Medical supplies and DME except as listed: insulin syringes, insulin needles, lancets, alcohol swabs, spacers, preferred diabetes test strips, peak flow meters (Astech, Assess, Peak Air brands, max two per year), vaporizer (limit of 1 per 3 years), humidifier (limit of 1 per 3 years)

Days supply dispensing limitations

UnitedHealthcare Community Plan members may receive up to a one-month supply of a specific medication per prescription order or prescription refill. Plans refill thresholds may vary. Refill thresholds for controlled substances and non-controlled substances may also vary. Please check with your member's individual plan. Certain medications may be prescribed for extended days' supply, such as medications for chronic conditions (e.g., hypertension). Use the drug lookup tool to see which medications are eligible for an extended days' supply.

Mandatory generic substitution

The UnitedHealthcare Community Plan PDL requires mandatory generic substitution on the vast majority of products when a generic equivalent is available; however, brand name drugs may be covered in certain situations by requesting a prior authorization. The UnitedHealthcare Community Plan PDL prior authorization (PA) list does not include branded items where a generic equivalent is covered.

Prior authorization of non-PDL medications

The drugs in the UnitedHealthcare Community Plan PDL have been selected to provide the most clinically appropriate and cost-effective medications for patients who have their drug benefit administered through UnitedHealthcare Community Plan. It is also recognized that there may be occasions where an unlisted drug is desired for the proper medical management of a specific patient. In those infrequent instances, the prior authorization process reviews requests for unlisted medications the physician may consider medically necessary for patient management.

Requests for these exceptions should be either made in writing by the physician and faxed or called into:

UnitedHealthcare Community Plan
Pharmacy Services Department
Fax: 866-940-7328
Phone: 800-310-6826

A prior authorization request form is available in the UnitedHealthcare Community Plan provider manual and should be used for all prior authorization requests if possible. Appropriate documentation must be provided to support the medical necessity of the non-PDL request. The UnitedHealthcare Community Plan Pharmacy Department will respond to all requests in accordance with state requirements.

Physicians are requested to adhere to this PDL when prescribing for patients covered by their pharmacy benefit plan offered by UnitedHealthcare Community Plan. If a pharmacist receives a prescription for a non-PDL drug, the pharmacist should contact the prescribing physician and request that the prescription be changed to a medication included in this PDL. If a PDL alternative is not appropriate the physician should then be instructed to contact the Plan for a prior authorization.

Please contact the UnitedHealthcare Community Plan Pharmacy Prior Notification Service at

800-310-6826 with questions concerning the prior authorization process.

Non-PDL drugs 3-day temporary supply overrides

To ensure the use of PDL drugs, all non- PDL drugs should be discussed with the prescribing physician. **If you cannot speak to the physician immediately, and there is an immediate need for the medication, the claim processing system will accept an override to permit a one-time dispensing of a 3-day supply of the newly prescribed non-PDL drug.** The pharmacy should submit a claim for a 3-day supply, with a PA Type of 8 and Prior Authorization number of "00000000120". Please note that non-preferred drugs are available for a 3-day supply, however availability is subject to the benefit design. For assistance, pharmacies may call 800-310-6826.

The pharmacy should contact the physician to discuss a PDL drug or if a prior authorization request is warranted. If the prescribing physician feels a drug is medically necessary, the physician may fax a request for prior authorization to UnitedHealthcare Community Plan at 800-310-6826.

Quantity limitations (QL)

Prescriptions for monthly quantities greater than the indicated limit require a prior authorization request.

Quantity limits based on Efficient Medication Dosing

The Efficient Medication Dosing Program is designed to consolidate medication dosage to the most efficient daily quantity to increase adherence to therapy and also promote the efficient use of health care dollars.

The limits for the program are established based on FDA approval for dosing and the availability of the total daily dose in the least amount of tablets or capsules daily. Quantity Limits in the prescription claims processing system will limit the dispensing to consolidate dosing. The pharmacy claims processing system will prompt the pharmacist to request a new prescription order from the physician.

Specialty pharmaceutical management program

UnitedHealthcare Community Plan is continuously looking for ways to provide high-quality, cost-effective care for Plan members. The Specialty Pharmaceutical Management Program helps UnitedHealthcare Community Plan to achieve these goals. Injectable medications that are part of this program require plan authorization and are not available through the retail pharmacy network.

To obtain authorization, the provider must submit the appropriate Prior Authorization form to the UnitedHealthcare Community Plan Pharmacy Department via fax at 866-940-7328.

The UnitedHealthcare Community Plan Pharmacy Department will review and respond to all requests in accordance with state requirements, and if authorized for payment, UnitedHealthcare Community Plan will coordinate the delivery of the product to the member or provider.

Drugs that are part of this program and are on the PDL are identified in this booklet by the designation "SP".

Prior Authorization request forms can be requested by calling the UnitedHealthcare Community Plan Pharmacy Department at **800-310-6826**.

Medications requiring diagnosis

UnitedHealthcare Community Plan requires that the diagnosis for prescriptions in certain classes match the FDA-approved use or a use supported by current published evidence. Drugs in scope will list "Diagnosis required" in the Requirements and Limits or with the drug class name on the PDL.

The diagnosis will be verified at the point-of-sale by the pharmacy claims processing system. If a matching diagnosis is not found in the medical claim file or on the pharmacy drug claim, the prescription will be rejected at the pharmacy. The pharmacist may then contact the prescriber to verify the diagnosis and submit it on the claim.

If the diagnosis provided still does not match the approved use, prior authorization may be requested through the standard process by faxing a request to 866-940-7328.

Step therapy (ST)

The following PDL drugs are routinely covered only after a sufficient trial of an indicated first-line agent has been adequately tried and failed. These medications may also be requested through the Prior authorization process.

While lower cost PDL alternatives may be appropriate in many instances, other non- PDL alternatives are available with prior authorization (PA).

STEP Drug	First-Line Agent(s)
Amerge	Trial at a minimum dose of 50mg of sumatriptan tablets.
Aricept 23mg	90-day trial of Aricept 10mg daily
calcipotriene cream & oint 0.005%	Trial of two medium to high potency corticosteroids
calcitriol 3mcg/gm	Trial of two medium to high potency corticosteroids
DPP4 Inhibitors (Nesina, Kazano, Oseni)	At least a 90-day trial of 1500mg/day of metformin.
Elidel	Minimum age of 2. Trial of one topical corticosteroid.
Eucrisa	Trial of a topical steroid AND one of the following: Elidel cream or tacrolimus ointment
GLP-1 Agonists (Adlyxin, Victoza 2 pen pack)	At least a 90-day trial of 1500mg/day of metformin
GLP-1/Insulin Combinations (Soliqua)	Trial of one drug from the following classes: GLP-1 or Basal Insulin
lubiprostone	For opioid-induced constipation or chronic idiopathic constipation, trial of lactulose or polyethylene glycol
Motegrity	For chronic idiopathic constipation, trial of lactulose or polyethylene glycol and trial of lubiprostone (authorized generic of Amitiza)
Movantik	For opioid-induced constipation, trial of lactulose or polyethylene glycol and trial of lubiprostone (authorized generic of Amitiza)
Optivar	14-day trial of ketotifen within previous 90 days required first.
Renvela	8-week trial of calcium acetate
SGLT-2 Inhibitors (Steglatro, Segluromet)	At least a 90-day trial of 1500mg/day of metformin
tacrolimus 0.03%	Minimum age of 2. Trial of one topical corticosteroid.
tacrolimus 0.1%	Minimum age of 16. Trial of one topical corticosteroid.
tolterodine	30-day trial of oxybutynin immediate or extended release. Step Therapy only applies to members less than 65 years of age.
tropium	30-day trial of oxybutynin immediate or extended release. Step Therapy only applies to members less than 65 years of age.
Trulance	For chronic idiopathic constipation or irritable bowel syndrome-constipation, trial of lactulose or polyethylene glycol and trial of lubiprostone (authorized generic of Amitiza)
Uloric	8-week trial of up to 600mg of allopurinol required first
Xopenex Respules	30-day trial of Albuterol .083% or .5% respules

PDL suggestions

Providers who wish to propose PDL suggestions should forward the information to the UnitedHealthcare Community Plan Director of Pharmacy Services by either mail or fax.

Attn: Director of Pharmacy Services
UnitedHealthcare Community Plan
2 Allegheny Center
Suite 600
Pittsburgh, PA 15212
Phone: 800-310-6826
Email: pdl_management@uhc.com

Providers should furnish adequate documentation, such as clinical studies from the medical literature, in order for the request to be considered for PDL addition. This literature should include information documenting clinical necessity as well as therapeutic advantages over current PDL products. Suggestions received by UnitedHealthcare Community Plan will be reviewed by the Pharmacy and Therapeutics Committee at the subsequent P&T Committee meeting.

Editor

Your comments and suggestions regarding the UnitedHealthcare Community Plan PDL are encouraged. Your input is vital to this PDL's continued success. All responses will be reviewed and considered. Please send your comments to:

UnitedHealthcare Community Plan by UnitedHealthcare
Director of Pharmacy Services
2 Allegheny Center
Suite 600
Pittsburgh, PA 15212
Phone: 800-310-6826

Legend

#	Only the dosage forms/strengths of the brand name products noted are on the PDL
OTC	over-the-counter
delayed-rel	delayed-release (also known as enteric coated)
EC	enteric-coated
ext-rel	extended-release (also known as sustained-release)
PA	Prior Authorization required
QL	Quantity Limits apply
ST	Step Therapy, see pages V-VI for details
SP	Specialty Pharmaceuticals, see pages IV-V for details

Notice

The information contained in this document is proprietary information. The information may not be copied in whole or in part without the written permission of UnitedHealthcare Community Plan. All rights reserved. The drug names listed here are the registered and/or unregistered trademarks of third-party pharmaceutical companies unrelated to and unaffiliated with UnitedHealthcare Community Plan. These trademarked brand names are included here for informational purposes only and are not intended to imply or suggest any affiliation between UnitedHealthcare Community Plan and such third-party pharmaceutical companies.

If viewing this PDL via the Internet, please be advised that the PDL is updated periodically and changes may appear prior to their effective date to allow for notification.

New Jersey – MLTSS

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Preferred Agents

Non-Preferred Agents

Analgesics

Nonsteroidal Anti-inflammatory Drugs

addaprin (generic for ADDAPRIN) - Tier 1; QL
ADVIL JUNIOR STRENGTH (brand for cvs ibuprofen childrens) - Tier 2; QL
ADVIL ORAL TABLET (brand for cvs ibuprofen) - Tier 2; QL
ALEVE ORAL TABLET (brand for all day pain relief) - Tier 2; QL
all day pain relief oral tablet 220 mg (generic for MEDIPROXEN) - Tier 1; QL
all day relief (generic for MEDIPROXEN) - Tier 1; QL
diclofenac sodium gel 1 % external (rx) (generic for ALEVE ARTHRITIS PAIN) - Tier 1; Brand OTC and Generic; QL
FLANAX (brand for all day pain relief) - Tier 2; QL
ft all day pain relief (generic for MEDIPROXEN) - Tier 1; QL
ft ibuprofen ib childrens (generic for ADVIL JUNIOR STRENGTH) - Tier 1; QL
ft ibuprofen oral tablet (generic for ADDAPRIN) - Tier 1; QL
ft pain relief oral tablet 200 mg (generic for ADDAPRIN) - Tier 1; QL
ibuprofen childrens oral tablet chewable 100 mg (generic for ADVIL JUNIOR STRENGTH) - Tier 1; QL
ibuprofen ib childrens (generic for ADVIL JUNIOR STRENGTH) - Tier 1; QL
ibuprofen ib oral tablet 200 mg (generic for ADDAPRIN) - Tier 1; QL
ibuprofen infants oral suspension 50 mg/1.25ml (generic for INFANTS ADVIL) - Tier 1; QL
ibuprofen jr oral tablet 100 mg (generic for ADVIL JUNIOR STRENGTH) - Tier 1; QL
ibuprofen junior (generic for ADVIL JUNIOR STRENGTH) - Tier 1; QL
ibuprofen junior strength (generic for ADVIL JUNIOR STRENGTH) - Tier 1; QL

Tier 1: Generic; Tier 2: Brand; ^: Medical Office Attestation Needed if Prescribed by Behavioral Health Provider, Full Prior Authorization Needed if Prescribed by Non-Behavioral Health Provider; *: Available without PA for participating Behavioral Health Prescribers; AL: Limited to members of a certain age; DX2RX: Diagnosis Required; GE: Gender Limit; PA: Prior Auth Required; QL: Quantity Limit; SP: Specialty Medication; ST: Step Therapy

Preferred Agents	Non-Preferred Agents
<p><i>ibuprofen oral tablet 200 mg (generic for ADDAPRIN) - Tier 1; QL</i> <i>INFANTS ADVIL (brand for cvs ibuprofen infants) - Tier 2; QL</i> <i>infants ibuprofen (generic for INFANTS ADVIL) - Tier 1; QL</i> <i>medi-first ibuprofen (generic for ADDAPRIN) - Tier 1; QL</i> <i>mediproxen (generic for MEDIPROXEN) - Tier 1; QL</i> <i>mm ibuprofen (generic for ADDAPRIN) - Tier 1; QL</i> <i>MOTRIN CHILDRENS (brand for cvs ibuprofen childrens) - Tier 2; QL</i> <i>MOTRIN IB ORAL TABLET (brand for cvs ibuprofen) - Tier 2; QL</i> <i>MOTRIN INFANTS DROPS (brand for cvs ibuprofen infants) - Tier 2; QL</i> <i>naproxen sodium oral tablet 220 mg (generic for MEDIPROXEN) - Tier 1; QL</i></p>	
<p>Opioid Analgesics, Long-acting</p>	<p><i>ROXYBOND ORAL TABLET ABUSE-DETERRENT 15 MG (brand for oxycodone hcl) - Tier 2; PA; QL</i> <i>ROXYBOND ORAL TABLET ABUSE-DETERRENT 30 MG - Tier 2; PA; QL</i></p>
<p>Opioid Analgesics, Short-acting</p> <p><i>hydromorphone hcl rectal - Tier 1; QL</i> <i>morphine sulfate rectal - Tier 1; QL</i> OXYCODONE-ACETAMINOPHEN ORAL SOLUTION 5-325 MG/5ML - Tier 2; QL</p>	

Tier 1: Generic; Tier 2: Brand; ^: Medical Office Attestation Needed if Prescribed by Behavioral Health Provider, Full Prior Authorization Needed if Prescribed by Non-Behavioral Health Provider; *: Available without PA for participating Behavioral Health Prescribers; AL: Limited to members of a certain age; DX2RX: Diagnosis Required; GE: Gender Limit; PA: Prior Auth Required; QL: Quantity Limit; SP: Specialty Medication; ST: Step Therapy

Preferred Agents**Non-Preferred Agents****Analgesics - Drugs to Treat Pain, Inflammation, and Muscle and Joint Conditions****Analgesics - Miscellaneous Analgesics**

8 hour arthritis pain (generic for TYLENOL 8 HOUR) - Tier 1; QL
8 hour arthritis relief (generic for TYLENOL 8 HOUR) - Tier 1; QL
8 hour pain relief oral tablet extended release 650 mg (generic for TYLENOL 8 HOUR) - Tier 1; QL
8 hour pain reliever (generic for TYLENOL 8 HOUR) - Tier 1; QL
8 hr arthritis pain relief (generic for TYLENOL 8 HOUR) - Tier 1; QL
8hr arthritis pain relief (generic for TYLENOL 8 HOUR) - Tier 1; QL
8hr muscle aches & pain (generic for TYLENOL 8 HOUR) - Tier 1; QL
acetaminophen 8 hour (generic for TYLENOL 8 HOUR) - Tier 1; QL
acetaminophen 8 hours (generic for TYLENOL 8 HOUR) - Tier 1; QL
acetaminophen 8hr arth pain (generic for TYLENOL 8 HOUR) - Tier 1; QL
acetaminophen 8hr musc ache (generic for TYLENOL 8 HOUR) - Tier 1; QL
acetaminophen childrens (generic for MAPAP CHILDRENS) - Tier 1; QL
acetaminophen childrens oral suspension 160 mg/5ml (generic for MAX RELIEF JR CHILD PAIN/FEVER) - Tier 1; QL
acetaminophen er (generic for TYLENOL 8 HOUR) - Tier 1; QL
acetaminophen ex st oral liquid 500 mg/15ml (generic for MAPAP ACETAMINOPHEN EXTRA STR) - Tier 1
acetaminophen ex st oral tablet 500 mg (generic for MM ACETAMINOPHEN EX STR) - Tier 1; QL
acetaminophen extra strength (generic for MM ACETAMINOPHEN EX STR) - Tier 1; QL
acetaminophen infants (generic for MAX RELIEF JR CHILD PAIN/FEVER) - Tier 1; QL

Tier 1: Generic; Tier 2: Brand; ^: Medical Office Attestation Needed if Prescribed by Behavioral Health Provider, Full Prior Authorization Needed if Prescribed by Non-Behavioral Health Provider; *: Available without PA for participating Behavioral Health Prescribers; AL: Limited to members of a certain age; DX2RX: Diagnosis Required; GE: Gender Limit; PA: Prior Auth Required; QL: Quantity Limit; SP: Specialty Medication; ST: Step Therapy

Preferred Agents

acetaminophen oral liquid 160 mg/5ml (generic for MAX RELIEF JR CHILD PAIN/FEVER) - Tier 1; QL

acetaminophen oral solution 160 mg/5ml, 325 mg/10.15ml, 650 mg/20.3ml - Tier 1; QL

acetaminophen oral suspension 160 mg/5ml, 650 mg/20.3ml (generic for MAX RELIEF JR CHILD PAIN/FEVER) - Tier 1; QL

acetaminophen oral tablet 325 mg (generic for PHARBETOL) - Tier 1; QL

acetaminophen oral tablet 500 mg (generic for MM ACETAMINOPHEN EX STR) - Tier 1; QL

acetaminophen oral tablet chewable 160 mg (generic for MAPAP CHILDRENS) - Tier 1; QL

acetaminophen rectal suppository 120 mg (generic for FEVERALL CHILDRENS) - Tier 1; QL

acetaminophen rectal suppository 650 mg (generic for FEVERALL ADULTS) - Tier 1; QL

aminofen (generic for PHARBETOL) - Tier 1; QL

apra (generic for MAX RELIEF JUNIOR) - Tier 1; QL

arthritis pain oral tablet extended release 650 mg (generic for TYLENOL 8 HOUR) - Tier 1; QL

arthritis pain relief oral tablet extended release 650 mg (generic for TYLENOL 8 HOUR) - Tier 1; QL

arthritis pain reliever oral (generic for TYLENOL 8 HOUR) - Tier 1; QL

betatemp childrens (generic for MAX RELIEF JR CHILD PAIN/FEVER) - Tier 1; QL

childrens acetaminophen (generic for MAX RELIEF JR CHILD PAIN/FEVER) - Tier 1; QL

childrens apap (generic for MAPAP CHILDRENS) - Tier 1; QL

Non-Preferred Agents

Tier 1: Generic; Tier 2: Brand; ^: Medical Office Attestation Needed if Prescribed by Behavioral Health Provider, Full Prior Authorization Needed if Prescribed by Non-Behavioral Health Provider; *: Available without PA for participating Behavioral Health Prescribers; AL: Limited to members of a certain age; DX2RX: Diagnosis Required; GE: Gender Limit; PA: Prior Auth Required; QL: Quantity Limit; SP: Specialty Medication; ST: Step Therapy

Preferred Agents

childrens non-aspirin (generic for MAPAP CHILDRENS) - Tier 1; QL
childs non-aspirin (generic for MAPAP CHILDRENS) - Tier 1; QL
CURANOL (brand for acetaminophen) - Tier 2; QL
ed-apap (generic for MAX RELIEF JR CHILD PAIN/FEVER) - Tier 1; QL
EXCEDRIN EXTRA STRENGTH (brand for cvs headache relief) - Tier 2
EXCEDRIN MIGRAINE (brand for cvs headache relief) - Tier 2
fever reducer/pain reliever (generic for MAX RELIEF JR CHILD PAIN/FEVER) - Tier 1; QL
fever reducing childrens (generic for FEVERALL CHILDRENS) - Tier 1; QL
feverall adults (generic for FEVERALL ADULTS) - Tier 1; QL
feverall childrens (generic for FEVERALL CHILDRENS) - Tier 1; QL
FEVERALL INFANTS - Tier 2; QL
FEVERALL JUNIOR STRENGTH - Tier 2; QL
ft 8 hour pain relief (generic for TYLENOL 8 HOUR) - Tier 1; QL
ft arthritis pain reliever (generic for TYLENOL 8 HOUR) - Tier 1; QL
ft children's pain/fever (generic for MAPAP CHILDRENS) - Tier 1; QL
ft migraine relief (generic for EXCEDRIN EXTRA STRENGTH) - Tier 1
ft pain & fever childrens (generic for MAX RELIEF JR CHILD PAIN/FEVER) - Tier 1; QL
ft pain & fever infants (generic for MAX RELIEF JR CHILD PAIN/FEVER) - Tier 1; QL
ft pain relief adult extra st (generic for MM ACETAMINOPHEN EX STR) - Tier 1; QL
ft pain relief extra strength (generic for MM ACETAMINOPHEN EX STR) - Tier 1; QL

Non-Preferred Agents

Tier 1: Generic; Tier 2: Brand; ^: Medical Office Attestation Needed if Prescribed by Behavioral Health Provider, Full Prior Authorization Needed if Prescribed by Non-Behavioral Health Provider; *: Available without PA for participating Behavioral Health Prescribers; AL: Limited to members of a certain age; DX2RX: Diagnosis Required; GE: Gender Limit; PA: Prior Auth Required; QL: Quantity Limit; SP: Specialty Medication; ST: Step Therapy

Preferred Agents

ft pain relief oral tablet 325 mg (generic for PHARBETOL) - Tier 1; QL
ft pain reliever ex str adult (generic for MM ACETAMINOPHEN EX STR) - Tier 1; QL
headache formula (generic for EXCEDRIN EXTRA STRENGTH) - Tier 1
headache relief extra str (generic for EXCEDRIN EXTRA STRENGTH) - Tier 1
headache relief oral tablet 250-250-65 mg (generic for EXCEDRIN EXTRA STRENGTH) - Tier 1
infants pain & fever (generic for MAX RELIEF JR CHILD PAIN/FEVER) - Tier 1; QL
infants pain relief drops (generic for MAX RELIEF JR CHILD PAIN/FEVER) - Tier 1; QL
infants pain/fever (generic for MAX RELIEF JR CHILD PAIN/FEVER) - Tier 1; QL
liquid acetaminophen (generic for MAX RELIEF JR CHILD PAIN/FEVER) - Tier 1; QL
liquid pain relief (generic for MAX RELIEF JR CHILD PAIN/FEVER) - Tier 1; QL
mapap acetaminophen extra str (generic for MAPAP ACETAMINOPHEN EXTRA STR) - Tier 1
mapap childrens (generic for MAPAP CHILDRENS) - Tier 1; QL
mapap oral capsule - Tier 1; QL
MAX RELIEF JR CHILD PAIN/FEVER ORAL LIQUID (brand for acetaminophen) - Tier 2; QL
max relief jr child pain/fever suspension 160 mg/5ml oral (generic for MAX RELIEF JR CHILD PAIN/FEVER) - Tier 1; QL

Non-Preferred Agents

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Preferred Agents

MAX RELIEF JR CHILD PAIN/FEVER SUSPENSION 160 MG/5ML ORAL (brand for acetaminophen) - Tier 2; QL
MAX RELIEF JUNIOR (brand for apra) - Tier 2; QL
migraine formula oral tablet 250-250-65 mg (generic for EXCEDRIN EXTRA STRENGTH) - Tier 1
migraine headache relief (generic for EXCEDRIN EXTRA STRENGTH) - Tier 1
migraine relief oral tablet 250-250-65 mg (generic for EXCEDRIN EXTRA STRENGTH) - Tier 1
mm acetaminophen ex str (generic for MM ACETAMINOPHEN EX STR) - Tier 1; QL
mm arthritis pain (generic for TYLENOL 8 HOUR) - Tier 1; QL
m-pap (generic for MAX RELIEF JR CHILD PAIN/FEVER) - Tier 1; QL
non-aspirin (generic for MM ACETAMINOPHEN EX STR) - Tier 1; QL
non-aspirin 8 hour (generic for TYLENOL 8 HOUR) - Tier 1; QL
non-aspirin childrens (generic for MAPAP CHILDRENS) - Tier 1; QL
non-aspirin extra strength (generic for MM ACETAMINOPHEN EX STR) - Tier 1; QL
non-aspirin jr strength (generic for MAPAP CHILDRENS) - Tier 1; QL
non-aspirin pain relief (generic for PHARBETOL) - Tier 1; QL
pain & fever child (generic for MAX RELIEF JR CHILD PAIN/FEVER) - Tier 1; QL
pain & fever childrens oral suspension 160 mg/5ml (generic for MAX RELIEF JR CHILD PAIN/FEVER) - Tier 1; QL
pain & fever childrens oral tablet chewable 160 mg (generic for MAPAP CHILDRENS) - Tier 1; QL
pain & fever infants oral suspension 160 mg/5ml (generic for MAX RELIEF JR CHILD PAIN/FEVER) - Tier 1; QL

Non-Preferred Agents

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Preferred Agents

pain and fever relief kids (generic for MAX RELIEF JR CHILD PAIN/FEVER) - Tier 1; QL

pain relief childrens oral elixir 160 mg/5ml (generic for MAX RELIEF JUNIOR) - Tier 1; QL

pain relief childrens oral suspension (generic for MAX RELIEF JR CHILD PAIN/FEVER) - Tier 1; QL

pain relief childrens oral tablet chewable 160 mg (generic for MAPAP CHILDRENS) - Tier 1; QL

pain relief extra st (generic for MM ACETAMINOPHEN EX STR) - Tier 1; QL

pain relief extra strength oral capsule 500 mg - Tier 1; QL

pain relief extra strength oral liquid 500 mg/15ml (generic for MAPAP ACETAMINOPHEN EXTRA STR) - Tier 1

pain relief extra strength oral tablet 500 mg (generic for MM ACETAMINOPHEN EX STR) - Tier 1; QL

pain relief oral liquid 500 mg/15ml (generic for MAPAP ACETAMINOPHEN EXTRA STR) - Tier 1

pain relief oral tablet 325 mg (generic for PHARBETOL) - Tier 1; QL

pain relief oral tablet extended release 650 mg (generic for TYLENOL 8 HOUR) - Tier 1; QL

pain relief regular strength (generic for PHARBETOL) - Tier 1; QL

pain relief/rapid burst (generic for MAPAP ACETAMINOPHEN EXTRA STR) - Tier 1

pain reliever ex st oral liquid 500 mg/15ml (generic for MAPAP ACETAMINOPHEN EXTRA STR) - Tier 1

pain reliever ex st oral tablet 500 mg (generic for MM ACETAMINOPHEN EX STR) - Tier 1; QL

Non-Preferred Agents

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Preferred Agents

pain reliever extra strength oral tablet 250-250-65 mg (generic for EXCEDRIN EXTRA STRENGTH) - Tier 1

pain reliever extra strength oral tablet 500 mg (generic for MM ACETAMINOPHEN EX STR) - Tier 1; QL

pain reliever oral suspension 160 mg/5ml (generic for MAX RELIEF JR CHILD PAIN/FEVER) - Tier 1; QL

pain reliever oral tablet 325 mg (generic for PHARBETOL) - Tier 1; QL

pain reliever oral tablet 500 mg (generic for MM ACETAMINOPHEN EX STR) - Tier 1; QL

pain reliever plus (generic for EXCEDRIN EXTRA STRENGTH) - Tier 1

pain-off (generic for EXCEDRIN EXTRA STRENGTH) - Tier 1

PANADOL CHILDRENS (brand for acetaminophen) - Tier 2; QL

PANADOL EXTRA STRENGTH (brand for acetaminophen) - Tier 2; QL

PANADOL INFANTS (brand for acetaminophen) - Tier 2; QL

PHARBETOL (brand for acetaminophen) - Tier 2; QL

PHARBETOL EXTRA STRENGTH (brand for acetaminophen) - Tier 2; QL

sb arthritis pain relief (generic for TYLENOL 8 HOUR) - Tier 1; QL

sb pain reliever childrens (generic for MAX RELIEF JR CHILD PAIN/FEVER) - Tier 1; QL

TYLENOL FOR CHILDREN + ADULTS (brand for acetaminophen) - Tier 2; QL

TYLENOL ORAL SUSPENSION 160 MG/5ML (brand for acetaminophen) - Tier 2; QL

TYLENOL ORAL TABLET 325 MG, 500 MG (brand for acetaminophen) - Tier 2; QL

TYLENOL ORAL TABLET CHEWABLE 160 MG (brand for acetaminophen) - Tier 2; QL

TYLENOL ORAL TABLET EXTENDED RELEASE 650 MG (brand for 8 hour arthritis pain) - Tier 2; QL

Non-Preferred Agents

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Preferred Agents	Non-Preferred Agents
Nonsteroidal Anti-Inflammatory Drugs - Pain/Anti-Inflammatory Drugs	
<i>salsalate oral - Tier 1; QL</i>	
Anesthetics	
Local Anesthetics	
<i>ANECREAM EXTERNAL CREAM (brand for lidocaine) - Tier 2; QL</i> <i>ASPERFLEX LIDOCAINE EXTERNAL CREAM (brand for lidocaine) - Tier 2; QL</i> <i>lidocaine external cream 4 % (generic for ANECREAM) - Tier 1; QL</i> <i>lidocaine hcl external cream 3 % - Tier 1; QL</i> <i>lidopin external cream 3 % - Tier 1; QL</i> <i>LMX 4 (brand for lidocaine) - Tier 2; QL</i> <i>PROXIVOL (brand for burn gel) - Tier 2; QL</i>	
Anti-Addiction/Substance Abuse Treatment Agents	
Opioid Reversal Agents	
REXTOVY - Tier 2; ^; QL	ZIMHI - Tier 2; PA; ^; QL
Smoking Cessation Agents	
<i>habitrol (generic for HABITROL) - Tier 1; QL</i> <i>NICODERM CQ (brand for cvs nicotine) - Tier 2; QL</i> <i>nicotine step 1 (generic for HABITROL) - Tier 1; QL</i> <i>nicotine step 2 (generic for NICODERM CQ) - Tier 1; QL</i> <i>nicotine step 3 (generic for NICODERM CQ) - Tier 1; QL</i> <i>nicotine transdermal patch 24 hour 14 mg/24hr, 7 mg/24hr (generic for NICODERM CQ) - Tier 1; QL</i> <i>nicotine transdermal patch 24 hour 21 mg/24hr (generic for HABITROL) - Tier 1; QL</i> <i>nicotine transdermal system (generic for HABITROL) - Tier 1; QL</i>	

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Preferred Agents	Non-Preferred Agents
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Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence	
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Smoking Cessation Agents - Deterrents	
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<p><i>ft nicotine (generic for KLS QUIT2) - Tier 1; QL</i></p> <p><i>ft nicotine mini (generic for KLS QUIT2) - Tier 1; QL</i></p> <p><i>mini nicotine (generic for KLS QUIT2) - Tier 1; QL</i></p> <p><i>NICORETTE (brand for cvs nicotine) - Tier 2; QL</i></p> <p><i>NICORETTE MINI (brand for cvs nicotine) - Tier 2; QL</i></p> <p><i>NICORETTE STARTER KIT (brand for cvs nicotine) - Tier 2; QL</i></p> <p><i>nicotine gum mouth/throat gum 2 mg (generic for KLS QUIT2) - Tier 1; QL</i></p> <p><i>nicotine gum mouth/throat gum 4 mg (generic for KLS QUIT4) - Tier 1; QL</i></p> <p><i>nicotine gum mouth/throat lozenge 2 mg (generic for KLS QUIT2) - Tier 1; QL</i></p> <p><i>nicotine gum mouth/throat lozenge 4 mg (generic for KLS QUIT4) - Tier 1; QL</i></p> <p><i>nicotine mini (generic for KLS QUIT2) - Tier 1; QL</i></p> <p><i>nicotine mouth/throat gum 2 mg (generic for KLS QUIT2) - Tier 1; QL</i></p> <p><i>nicotine mouth/throat gum 4 mg (generic for KLS QUIT4) - Tier 1; QL</i></p> <p><i>nicotine mouth/throat lozenge 2 mg (generic for KLS QUIT2) - Tier 1; QL</i></p> <p><i>nicotine mouth/throat lozenge 4 mg (generic for KLS QUIT4) - Tier 1; QL</i></p> <p><i>nicotine polacrilex mini (generic for KLS QUIT2) - Tier 1; QL</i></p> <p><i>nicotine polacrilex mouth/throat (generic for KLS QUIT2) - Tier 1; QL</i></p> <p><i>quit2 (generic for KLS QUIT2) - Tier 1; QL</i></p> <p><i>quit4 (generic for KLS QUIT4) - Tier 1; QL</i></p> <p><i>THRIVE (brand for cvs nicotine) - Tier 2; QL</i></p>	
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Antibacterials	
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Beta-lactam, Cephalosporins	
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<p><i>cefepime hcl solution reconstituted 2 gm intravenous - Tier 1</i></p>	
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Tier 1: Generic; Tier 2: Brand; ^: Medical Office Attestation Needed if Prescribed by Behavioral Health Provider, Full Prior Authorization Needed if Prescribed by Non-Behavioral Health Provider; *: Available without PA for participating Behavioral Health Prescribers; AL: Limited to members of a certain age; DX2RX: Diagnosis Required; GE: Gender Limit; PA: Prior Auth Required; QL: Quantity Limit; SP: Specialty Medication; ST: Step Therapy

Preferred Agents	Non-Preferred Agents
Antibacterials - Drugs to Treat Bacterial Infections	
Antibacterials, Other - Antibiotics	
<i>antibiotic (generic for NEOSPORIN ORIGINAL) - Tier 1; QL</i> <i>first aid antibiotic external ointment , 3.5-400-5000 (generic for NEOSPORIN ORIGINAL) - Tier 1; QL</i> <i>ft triple antibiotic (generic for NEOSPORIN ORIGINAL) - Tier 1; QL</i> <i>medi-first triple antibiotic (generic for NEOSPORIN ORIGINAL) - Tier 1; QL</i> <i>NEOSPORIN ORIGINAL (brand for cvs antibiotic) - Tier 2; QL</i> <i>triple antibiotic external ointment , 3.5-400-5000 , 5-400-5000 , 5-400-5000 mg-unit (generic for NEOSPORIN ORIGINAL) - Tier 1; QL</i> <i>triple antibiotic original (generic for NEOSPORIN ORIGINAL) - Tier 1; QL</i>	
Antidepressants	
Antidepressants, Other	
ZULRESSO - Tier 2; ^	
Antiemetics	
Antiemetics, Other	
<i>BONINE (brand for cvs motion sickness relief) - Tier 2</i> <i>driminate (generic for DRIMINATE) - Tier 1</i> <i>ft motion sickness oral tablet 50 mg (generic for DRIMINATE) - Tier 1</i> <i>meclizine hcl oral tablet chewable (generic for BONINE) - Tier 1</i> <i>motion sickness oral tablet 50 mg (generic for DRIMINATE) - Tier 1</i> <i>motion sickness relief oral tablet 50 mg (generic for DRIMINATE) - Tier 1</i> <i>motion sickness relief oral tablet chewable 25 mg (generic for BONINE) - Tier 1</i> <i>motion-time (generic for BONINE) - Tier 1</i> <i>travel ease (generic for BONINE) - Tier 1</i>	

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Preferred Agents	Non-Preferred Agents
Antiemetics - Drugs to Treat Nausea and Vomiting	
Antiemetics, Other - Nausea and Vomiting Drugs	
<i>anti-nausea (generic for EMETROL) - Tier 1</i> <i>anti-nausea relief (generic for EMETROL) - Tier 1</i> <i>EMETROL ORAL SOLUTION (brand for anti-nausea) - Tier 2</i> <i>nausea control (generic for EMETROL) - Tier 1</i> <i>nausea relief oral solution 1.87-1.87-21.5 (generic for EMETROL) - Tier 1</i>	
Antifungals	
<i>3 day (generic for MONISTAT 3) - Tier 1; QL</i> <i>ft miconazole 3 combo pack (generic for MONISTAT 3 COMBO PACK APP) - Tier 1; QL</i> <i>ft miconazole 7 (generic for MONISTAT 7 SIMPLY CURE) - Tier 1; QL</i> <i>miconazole 3 applicator vaginal kit 200 & 2 mg-% (9gm) (generic for MONISTAT 3 COMBO PACK APP) - Tier 1; QL</i> <i>miconazole 3 combo pack (generic for MONISTAT 3 COMBO PACK APP) - Tier 1; QL</i> <i>miconazole 7 vaginal cream 2 % (generic for MONISTAT 7 SIMPLY CURE) - Tier 1; QL</i> <i>miconazole 7 vaginal suppository 100 mg - Tier 1</i> <i>miconazole nitrate vaginal (generic for MONISTAT 7 SIMPLY CURE) - Tier 1; QL</i>	

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Preferred Agents**Non-Preferred Agents****Antifungals - Drugs to Treat Fungal Infections****Antifungals - Fungal Infection Drugs**

3 day vaginal - Tier 1; QL
 3-day vaginal vaginal cream 2 % - Tier 1; QL
 antifungal (generic for DESENEX) - Tier 1; QL
 antifungal foot care (generic for LAMISIL AT) - Tier 1; QL
 antifungal miconazole (generic for MICATIN) - Tier 1; QL
 athlete's foot (generic for CRUEX PRESCRIPTION STRENGTH) - Tier 1; QL
 athlete's foot (terbinafine) (generic for LAMISIL AT) - Tier 1; QL
 athlete's foot external aerosol powder 2 % (generic for CRUEX PRESCRIPTION STRENGTH) - Tier 1; QL
 athlete's foot external cream 1 % (generic for LAMISIL AT) - Tier 1; QL
 athlete's foot external powder 2 % (generic for DESENEX) - Tier 1; QL
 athlete's foot powder spray external aerosol powder 2 % (generic for CRUEX PRESCRIPTION STRENGTH) - Tier 1; QL
 athlete's foot spray external aerosol 2 % (generic for LOTRIMIN AF) - Tier 1; QL
 baza antifungal (generic for MICATIN) - Tier 1; QL
 clotrimazole 3 vaginal cream 2 % - Tier 1; QL
 clotrimazole 7 - Tier 1; QL
 clotrimazole vaginal - Tier 1; QL
 clotrimazole vaginal cream 1 % - Tier 1; QL
 CRITIC-AID CLEAR AF - Tier 2; QL
 CRUEX PRESCRIPTION STRENGTH (brand for athlete's foot powder spray) - Tier 2; QL
 DESENEX EXTERNAL POWDER (brand for antifungal) - Tier 2; QL
 DESENEX JOCK ITCH (brand for athlete's foot powder spray) - Tier 2; QL
 foot care (terbinafine) (generic for LAMISIL AT) - Tier 1; QL

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Preferred Agents

ft antifungal external cream 2 % (generic for MICATIN) - Tier 1; QL
ft athletes foot (terbinafine) (generic for LAMISIL AT) - Tier 1; QL
ft clotrimazole - Tier 1; QL
ft clotrimazole 3 - Tier 1; QL
jock itch external cream 1 % (generic for LAMISIL AT) - Tier 1; QL
LAMISIL AT EXTERNAL CREAM (brand for athletes foot (terbinafine)) - Tier 2; QL
LAMISIL AT JOCK ITCH (brand for athletes foot (terbinafine)) - Tier 2; QL
micaderm (generic for MICATIN) - Tier 1; QL
MICATIN (brand for antifungal) - Tier 2; QL
miconazole antifungal (generic for MICATIN) - Tier 1; QL
miconazole nitrate external cream (generic for MICATIN) - Tier 1; QL
miconazorb af (generic for DESENEX) - Tier 1; QL
MICOTRIN AP (brand for antifungal) - Tier 2; QL
MICRO GUARD (brand for antifungal) - Tier 2; QL
terbinafine hcl external (generic for LAMISIL AT) - Tier 1; QL
terbinafine hydrochloride external cream 1 % (generic for LAMISIL AT) - Tier 1; QL
ZEASORB-AF (brand for antifungal) - Tier 2; QL

Non-Preferred Agents

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Preferred Agents	Non-Preferred Agents
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Antiparasitics - Drugs to Treat Parasitic Infections	
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Pediculicides/Scabicides - Scabies and Lice Drugs	
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<p><i>ft lice killing max st (generic for RID LICE KILLING SHAMPOO) - Tier 1; QL</i></p> <p><i>lice killing (generic for RID LICE KILLING SHAMPOO) - Tier 1; QL</i></p> <p><i>lice killing max st external shampoo 0.33-4 % (generic for RID LICE KILLING SHAMPOO) - Tier 1; QL</i></p> <p><i>lice killing max str (generic for RID LICE KILLING SHAMPOO) - Tier 1; QL</i></p> <p><i>lice killing max strength (generic for RID LICE KILLING SHAMPOO) - Tier 1; QL</i></p> <p><i>lice killing maximum strength (generic for RID LICE KILLING SHAMPOO) - Tier 1; QL</i></p> <p><i>lice killing shampoo max str (generic for RID LICE KILLING SHAMPOO) - Tier 1; QL</i></p> <p><i>lice maximum strength (generic for RID LICE KILLING SHAMPOO) - Tier 1; QL</i></p> <p><i>lice treatment external shampoo 0.33-4 % (generic for RID LICE KILLING SHAMPOO) - Tier 1; QL</i></p> <p><i>sb lice killing max st (generic for RID LICE KILLING SHAMPOO) - Tier 1; QL</i></p>	
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Anxiolytics - Drugs to Treat Anxiety	
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Benzodiazepines - Anxiety Drugs	
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	<p><i>DORAL (brand for quazepam) - Tier 2; PA; QL</i></p> <p><i>quazepam (generic for DORAL) - Tier 1; PA; QL</i></p>
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Bipolar Agents	
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Mood Stabilizers	
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<p><i>lithium - Tier 1; QL</i></p>	
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Preferred Agents	Non-Preferred Agents
Blood Glucose Regulators	
Glycemic Agents	
GVOKE KIT - Tier 2; QL	
Insulins	
<p>HUMULIN 70/30 VIAL - Tier 2; QL HUMULIN N VIAL - Tier 2; QL <i>INSULIN ASPART PROT & ASPART (brand for insulin aspart prot & aspart) - Tier 2; QL</i> <i>LANTUS U-100 VIAL (brand for insulin glargine) - Tier 2; QL</i> NOVOLIN 70/30 RELION - Tier 2; QL NOVOLIN 70/30 VIAL - Tier 2; QL NOVOLIN N RELION - Tier 2; QL NOVOLIN N VIAL - Tier 2; QL</p>	<p>HUMALOG MIX 75/25 - Tier 2; PA; QL LEVEMIR U-100 VIAL - Tier 2; PA; QL <i>NOVOLOG MIX 70/30 VIAL (brand for insulin aspart prot & aspart) - Tier 2; PA; QL</i></p>
Blood Glucose Regulators - Drugs to Regulate Blood Sugar	
Glycemic Agents - Diabetic Drugs	
<p><i>GLUCO TO GO (brand for cvs glucose) - Tier 2; QL</i> <i>glucose oral tablet chewable 4 gm (generic for GLUCO TO GO) - Tier 1; QL</i> <i>soft glucose (generic for GLUCO TO GO) - Tier 1; QL</i> <i>TRUEPLUS GLUCOSE ON THE GO (brand for cvs glucose) - Tier 2; QL</i> <i>TRUEPLUS GLUCOSE ORAL TABLET CHEWABLE (brand for cvs glucose) - Tier 2; QL</i></p>	
Blood Products and Modifiers	
Blood Products and Modifiers, Other	
	RELEUKO - Tier 2; PA; SP

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Preferred Agents	Non-Preferred Agents
Cardiovascular Agents	
Cardiovascular Agents, Other	
<i>captopril-hydrochlorothiazide - Tier 1; QL</i>	
Central Nervous System Agents	
Central Nervous System, Other	
INGREZZA ORAL CAPSULE SPRINKLE - Tier 2; PA; SP; QL	
Dermatological Agents	
Acne and Rosacea Agents	
<i>DIFFERIN EXTERNAL GEL 0.1 % (brand for adapalene) - Tier 2; QL</i>	
Dermatitis and Pruitus Agents	
<i>anti-itch aloe (generic for MEDI-FIRST HYDROCORTISONE) - Tier 1; QL</i> <i>anti-itch intensive heal (generic for MEDI-FIRST HYDROCORTISONE) - Tier 1; QL</i> <i>anti-itch max str external cream 1 % (generic for MEDI-FIRST HYDROCORTISONE) - Tier 1; QL</i> <i>anti-itch maximum strength external cream 1 % (generic for MEDI-FIRST HYDROCORTISONE) - Tier 1; QL</i> <i>cortisone maximum strength external cream (generic for MEDI-FIRST HYDROCORTISONE) - Tier 1; QL</i> <i>ft itch relief max strength external cream (generic for MEDI-FIRST HYDROCORTISONE) - Tier 1; QL</i> <i>ft itch relief/aloe max str (generic for MEDI-FIRST HYDROCORTISONE) - Tier 1; QL</i>	

Tier 1: Generic; Tier 2: Brand; ^: Medical Office Attestation Needed if Prescribed by Behavioral Health Provider, Full Prior Authorization Needed if Prescribed by Non-Behavioral Health Provider; *: Available without PA for participating Behavioral Health Prescribers; AL: Limited to members of a certain age; DX2RX: Diagnosis Required; GE: Gender Limit; PA: Prior Auth Required; QL: Quantity Limit; SP: Specialty Medication; ST: Step Therapy

Preferred Agents	Non-Preferred Agents
<p><i>hydrocortisone anti-itch (generic for MEDI-FIRST HYDROCORTISONE) - Tier 1; QL</i></p> <p><i>hydrocortisone cream 1 % external (otc) (generic for MEDI-FIRST HYDROCORTISONE) - Tier 1; QL</i></p> <p><i>hydrocortisone external cream 0.5 % - Tier 1; QL</i></p> <p><i>hydrocortisone external cream 1 % (generic for MEDI-FIRST HYDROCORTISONE) - Tier 1; QL</i></p> <p><i>hydrocortisone external ointment 0.5 % - Tier 1; QL</i></p> <p><i>hydrocortisone max st external cream (generic for MEDI-FIRST HYDROCORTISONE) - Tier 1; QL</i></p> <p><i>hydrocortisone max st/12 moist (generic for MEDI-FIRST HYDROCORTISONE) - Tier 1; QL</i></p> <p><i>hydrocortisone plus external cream 1 % (generic for MEDI-FIRST HYDROCORTISONE) - Tier 1; QL</i></p> <p><i>hydrocortisone/aloe (generic for MEDI-FIRST HYDROCORTISONE) - Tier 1; QL</i></p> <p><i>hydrocortisone/aloe max str (generic for MEDI-FIRST HYDROCORTISONE) - Tier 1; QL</i></p> <p><i>instacort 5 - Tier 1; QL</i></p> <p>LAC-HYDRIN FIVE - Tier 2; QL</p> <p><i>medi-first hydrocortisone (generic for MEDI-FIRST HYDROCORTISONE) - Tier 1; QL</i></p>	
Pediculicides/Scabicides	
<p>CROTAN LOTION 10 % EXTERNAL - Tier 2; QL</p> <p>CROTAN LOTION 10 % EXTERNAL - Tier 2; PA; QL</p> <p><i>lice killing (generic for NIX CREME RINSE) - Tier 1; QL</i></p> <p><i>lice treatment external liquid 1 % (generic for NIX CREME RINSE) - Tier 1; QL</i></p>	
Topical Anti-infectives	
<p><i>clotrimazole external solution 1 % - Tier 1; QL</i></p> <p><i>tgt clotrimazole external cream 1 % (generic for DESENEX) - Tier 1; QL</i></p>	

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Preferred Agents

Non-Preferred Agents

Dermatological Agents - Drugs to Treat Skin Conditions

advanced healing external ointment (generic for HYDROLATUM) - Tier 1; QL
astringent (generic for DOMEBORO) - Tier 1; QL
astringent solution (generic for DOMEBORO) - Tier 1; QL
AVAR-E EMOLLIENT (brand for sss 10-5) - Tier 2; QL
AVAR-E GREEN (brand for sss 10-5) - Tier 2; QL
baby basics diaper rash (generic for BOUDREAUXS BUTT PASTE) - Tier 1; QL
beauty 360 pure glycerin - Tier 1
beauty 360 soothing bath (generic for AVEENO BABY BATH TREATMENT) - Tier 1; QL
boro-packs (generic for DOMEBORO) - Tier 1; QL
boudreauxs butt paste ointment 40 % external (generic for BOUDREAUXS BUTT PASTE) - Tier 1; QL
BOUDREAUXS BUTT PASTE OINTMENT 40 % EXTERNAL (brand for cvs diaper rash) - Tier 2; QL
bp 10-1 - Tier 1; QL
diaper rash external ointment (generic for BOUDREAUXS BUTT PASTE) - Tier 1; QL
DR SMITHS DIAPER - Tier 2; QL
glycerin external liquid , 99.5 % - Tier 1
hydrolatum (generic for HYDROLATUM) - Tier 1; QL
hydrophor (generic for HYDROLATUM) - Tier 1; QL
ointment base (generic for HYDROLATUM) - Tier 1; QL
renewal soothing bath (generic for AVEENO BABY BATH TREATMENT) - Tier 1; QL
sss 10-5 external cream (generic for AVAR-E EMOLLIENT) - Tier 1; QL

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Preferred Agents	Non-Preferred Agents
<p>sulfacetamide sodium-sulfur external cream 10-5 % (generic for AVAR-E EMOLLIENT) - Tier 1; QL</p> <p>sulfacetamide sodium-sulfur external liquid 9-4.5 % (generic for SUMADAN WASH) - Tier 1; QL</p> <p>sulfacetamide sod-sulfur wash external liquid 9-4.5 % (generic for SUMADAN WASH) - Tier 1; QL</p> <p>sulfamez wash - Tier 1; QL</p> <p>SUMADAN WASH (brand for sulfacetamide sod-sulfur wash) - Tier 2; QL</p> <p>zinc oxide external ointment 40 % (generic for BOUDREAUXS BUTT PASTE) - Tier 1; QL</p>	
Dermatological Agents - Skin Agents	
<p>ABREVA (brand for docosanol) - Tier 2; QL</p> <p>docosanol external (generic for ABREVA) - Tier 1; QL</p> <p>ft docosanol (generic for ABREVA) - Tier 1; QL</p> <p>gormel - Tier 1; QL</p> <p>gormel 10 (generic for NUTRAPLUS) - Tier 1; QL</p> <p>hemorrhoidal rectal suppository 0.25-3-85.5 % - Tier 1</p> <p>NUTRAPLUS (brand for gormel 10) - Tier 2; QL</p> <p>urea 20 intensive hydrating - Tier 1; QL</p> <p>urea external cream 10 % (generic for NUTRAPLUS) - Tier 1; QL</p> <p>urea external cream 20 % - Tier 1; QL</p> <p>urea external lotion (generic for NUTRAPLUS) - Tier 1; QL</p> <p>ureacin-10 (generic for NUTRAPLUS) - Tier 1; QL</p> <p>ureacin-20 - Tier 1; QL</p> <p>XERAC AC - Tier 2; QL</p>	

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Preferred Agents	Non-Preferred Agents
Diabetes - Glucose Monitoring	
<i>BD AUTOSHIELD DUO PEN NEEDLES (brand for pen needles) - Tier 2; QL</i> <i>BD ULTRA-FINE INSULIN SYRINGES - Tier 2; QL</i> <i>BD ULTRA-FINE PEN NEEDLES (brand for 1st tier unifine pentips) - Tier 2; QL</i> <i>DEXCOM G6 RECEIVER - Tier 2; PA; QL</i> <i>DEXCOM G6 SENSOR (brand for guardian sensor 3) - Tier 2; PA; QL</i> <i>DEXCOM G7 RECEIVER - Tier 2; PA; QL</i> <i>DEXCOM G7 SENSOR (brand for guardian sensor 3) - Tier 2; PA; QL</i> <i>FREESTYLE LIBRE 14 DAY READER - Tier 2; PA; QL</i> <i>FREESTYLE LIBRE 14 DAY SENSOR (brand for guardian sensor 3) - Tier 2; PA; QL</i> <i>FREESTYLE LIBRE 2 READER - Tier 2; PA; QL</i> <i>FREESTYLE LIBRE 2 SENSOR (brand for guardian sensor 3) - Tier 2; PA; QL</i> <i>FREESTYLE LIBRE READER - Tier 2; PA; QL</i>	<i>FREESTYLE LIBRE 3 SENSOR (brand for guardian sensor 3) - Tier 2; PA; QL</i> <i>GUARDIAN SENSOR (3) (brand for guardian sensor 3) - Tier 2; PA; QL</i> <i>GUARDIAN SENSOR 3 (brand for guardian sensor 3) - Tier 2; PA; QL</i>
Electrolyte/Mineral Replacement - Vitamin, Mineral and Body Fluid Deficiency Drugs	
Therapeutic Nutrients/Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies	
	ACCRUFER - Tier 2; PA; QL
Electrolytes/Minerals/Metals/Vitamins	
Electrolyte/Mineral Replacement	
<i>easygel - Tier 1; QL</i> <i>fluoridex daily renewal - Tier 1; QL</i>	

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Preferred Agents

Non-Preferred Agents

Electrolyte/Mineral Replacement - Vitamin, Mineral and Body Fluid Deficiency Drugs

BPROTECTED PEDIA IRON (brand for fe-vite iron) - Tier 2; QL
cal mag zinc +d3 (generic for ADVANCED CALCIUM/DIMAGNESIUM) - Tier 1; QL
calcium + vitamin d3 oral tablet 500-5 mg-mcg (generic for OYSCO 500+D) - Tier 1; QL
calcium 600/vit d/minerals oral tablet 600-200 mg-unit - Tier 1; QL
calcium 600/vit d/minerals oral tablet chewable 600-400 mg-unit - Tier 1
calcium 600/vitamin d - Tier 1; QL
calcium 600/vitamin d-3 - Tier 1; QL
calcium 600+d oral tablet 600-10 mg-mcg - Tier 1; QL
calcium carb-cholecalciferol oral tablet 600-10 mg-mcg, 600-5 mg-mcg - Tier 1; QL
calcium cit plus vit d-3 (generic for CALCITRATE) - Tier 1
calcium citrate + d3 maximum (generic for CALCITRATE) - Tier 1
calcium citrate +d3 (generic for CALCITRATE) - Tier 1
calcium citrate oral tablet 950 (200 ca) mg - Tier 1
calcium citrate plus vit d - Tier 1; QL
calcium citrate+d oral tablet 315-6.25 mg-mcg (generic for CALCITRATE) - Tier 1
calcium citrate+d3 oral tablet (generic for ADVANCED CALCIUM/DIMAGNESIUM) - Tier 1; QL
calcium citrate+d3 w/magne (generic for ADVANCED CALCIUM/DIMAGNESIUM) - Tier 1; QL
calcium citrate-vit d - Tier 1; QL
calcium citrate-vitamin d oral tablet 315-5 mg-mcg - Tier 1; QL
calcium high potency/vitamin d - Tier 1; QL
calcium plus vitamin d (generic for OYSCO 500+D) - Tier 1; QL

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Preferred Agents**Non-Preferred Agents**

calcium plus vitamin d3 - Tier 1; QL
calcium/minerals/vitamin d - Tier 1
calcium-magnesium-zinc oral tablet 333-133-5 mg, 333.33-133.33-5 mg - Tier 1
electrolyte (generic for ORALYTE) - Tier 1; QL
electrolyte adv care (generic for ORALYTE) - Tier 1; QL
electrolyte solution (generic for ORALYTE) - Tier 1; QL
ENFAMIL ENFALYTE (brand for cvs electrolyte solution) - Tier 2; QL
EZFE 200 - Tier 2
ferate (generic for FERATE) - Tier 1
FER-IN-SOL (brand for fe-vite iron) - Tier 2; QL
ferocon (generic for TRICON) - Tier 1
ferosul (generic for FEROSUL) - Tier 1; QL
ferotrinsic (generic for TRICON) - Tier 1
ferretts - Tier 1
ferrex 150 capsule 150 mg oral (generic for FERREX 150) - Tier 1
FERREX 150 CAPSULE 150 MG ORAL (brand for polysaccharide iron complex) - Tier 2
FERRIC X-150 (brand for polysaccharide iron complex) - Tier 2
ferrous fumarate oral tablet 324 (106 fe) mg, 324 mg (generic for FERROCITE) - Tier 1
ferrous gluconate - Tier 1
ferrous gluconate oral tablet 240 (27 fe) mg (generic for FERATE) - Tier 1
ferrous gluconate oral tablet 324 (37.5 fe) mg - Tier 1
ferrous gluconate oral tablet 324 (38 fe) mg - Tier 1; QL
ferrous sulfate (generic for FEROSUL) - Tier 1; QL

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Preferred Agents

ferrous sulfate oral solution 75 (15 fe) mg/ml (generic for BPROTECTED PEDIA IRON) - Tier 1; QL
ferrous sulfate oral tablet 325 (65 fe) mg (generic for FEROSUL) - Tier 1; QL
ferrous sulfate oral tablet delayed release - Tier 1; QL
fe-vite iron (generic for BPROTECTED PEDIA IRON) - Tier 1; QL
foltrin (generic for TRICON) - Tier 1
ft magnesium oxide (generic for MAGNESIUM-OXIDE) - Tier 1
hi cal (generic for OYSCO 500+D) - Tier 1; QL
iferex 150 (generic for FERREX 150) - Tier 1
iferex 150 forte (generic for IFEREX 150 FORTE) - Tier 1
iron (ferrous sulfate) oral solution (generic for BPROTECTED PEDIA IRON) - Tier 1; QL
iron infant/toddler (generic for BPROTECTED PEDIA IRON) - Tier 1; QL
iron oral tablet 240 (27 fe) mg (generic for FERATE) - Tier 1
iron oral tablet 325 (65 fe) mg (generic for FEROSUL) - Tier 1; QL
K-PHOS - Tier 2; QL
magnesium oral tablet 500 mg - Tier 1
magnesium oxide -mg supplement oral tablet 400 (240 mg) mg (generic for MAGNESIUM-OXIDE) - Tier 1
magnesium oxide -mg supplement oral tablet 500 mg - Tier 1
magnesium-oxide (generic for MAGNESIUM-OXIDE) - Tier 1
NU-IRON (brand for polysaccharide iron complex) - Tier 2
oralyte (generic for ORALYTE) - Tier 1; QL
OS-CAL CALCIUM + D3 (brand for calcium + vitamin d3) - Tier 2; QL
oysco 500+d (generic for OYSCO 500+D) - Tier 1; QL

Non-Preferred Agents

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Preferred Agents

oyster shell calcium plus d (generic for OYSCO 500+D) - Tier 1; QL
oyster shell calcium w/d (generic for OYSCO 500+D) - Tier 1; QL
oyster shell calcium/d oral tablet 250-6.25 mg-mcg - Tier 1
oyster shell calcium/vit d (generic for OYSCO 500+D) - Tier 1; QL
oyster shell calcium/vit d3 oral tablet 500-5 mg-mcg (generic for OYSCO 500+D) - Tier 1; QL
oyster shell calcium/vitamin d oral tablet 500-5 mg-mcg (generic for OYSCO 500+D) - Tier 1; QL
ped electrolyte freeze pop (generic for ORALYTE) - Tier 1; QL
PEDIALYTE FREEZER POPS (brand for cvs electrolyte solution) - Tier 2; QL
PEDIALYTE IMMUNE SUPPORT (brand for cvs electrolyte solution) - Tier 2; QL
PEDIALYTE ORAL SOLUTION (brand for cvs electrolyte solution) - Tier 2; QL
PEDIALYTE SINGLES (brand for cvs electrolyte solution) - Tier 2; QL
pediatric electrolyte oral solution (generic for ORALYTE) - Tier 1; QL
PHOSPHA 250 NEUTRAL (brand for phosphorous) - Tier 2; QL
phosphorous (generic for PHOSPHO-TRIN 250 NEUTRAL) - Tier 1; QL
phospho-trin 250 neutral (generic for PHOSPHO-TRIN 250 NEUTRAL) - Tier 1; QL
PHOSPHO-TRIN K500 - Tier 2; QL
poly-iron 150 (generic for FERREX 150) - Tier 1
poly-iron 150 forte (generic for IFEREX 150 FORTE) - Tier 1
polysaccharide iron complex (generic for FERREX 150) - Tier 1
polysaccharide iron forte (generic for IFEREX 150 FORTE) - Tier 1

Non-Preferred Agents

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Preferred Agents	Non-Preferred Agents
<p> <i>polysaccharide-iron complex (generic for FERREX 150) - Tier 1</i> <i>potassium citrate-citric acid - Tier 1</i> <i>REHYDRALYTE (brand for cvs electrolyte solution) - Tier 2; QL</i> <i>sod citrate-citric acid oral solution 500-334 mg/5ml - Tier 1</i> <i>TRICON (brand for ferocon) - Tier 2</i> <i>TRUE FERROUS SULFATE - Tier 2; QL</i> <i>TRUE MAGNESIUM OXIDE (brand for ft magnesium oxide) - Tier 2</i> <i>ultra calcium + vitamin d3 - Tier 1; QL</i> <i>wes-phos 250 neutral (generic for PHOSPHO-TRIN 250 NEUTRAL) - Tier 1; QL</i> </p>	
Vitamins	
<p> <i>a-25 - Tier 1; QL</i> <i>ALTRIXA (brand for daily multiple vitamins) - Tier 2</i> <i>AMLADEX (brand for daily multiple vitamins) - Tier 2</i> <i>aqueous vitamin d (generic for BPROTECTED PEDIA D-VITE) - Tier 1; QL</i> <i>b complex-b12 - Tier 1</i> <i>b-complex oral tablet - Tier 1</i> <i>b-complex with b-12 - Tier 1</i> <i>b-complex/b-12 oral - Tier 1</i> <i>BPROTECTED PEDIA D-VITE (brand for aqueous vitamin d) - Tier 2; QL</i> <i>CENTRUM SPECIALIST PRENATAL - Tier 2</i> <i>classic prenatal - Tier 1; QL</i> <i>CO-NATAL FA (brand for neonatal complete) - Tier 2; QL</i> </p>	

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Preferred Agents

d3 high potency oral capsule 25 mcg, 25 mcg (1000 ut) (generic for PRONUTRIENTS VITAMIN D3) - Tier 1
d3 high potency oral capsule 250 mcg (10000 ut) (generic for IS-D 10,000) - Tier 1
d3 max st oral capsule 250 mcg (generic for IS-D 10,000) - Tier 1
d3 oral capsule 10 mcg (400 unit), 50 mcg (2000 ut) - Tier 1; QL
d3 oral capsule 125 mcg (5000 ut) (generic for DIALYVITE VITAMIN D 5000) - Tier 1
d3 oral capsule 25 mcg (1000 ut) (generic for PRONUTRIENTS VITAMIN D3) - Tier 1
d3 oral capsule 250 mcg, 250 mcg (10000 ut) (generic for IS-D 10,000) - Tier 1
d-3-5 (generic for DIALYVITE VITAMIN D 5000) - Tier 1
d3-50 (generic for D3-50) - Tier 1; QL
daily multiple vitamins (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
daily vitamins (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
daily vite (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
daily vites (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
daily-vite (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
DECARA ORAL CAPSULE 1.25 MG (50000 UT) (brand for vitamin d3) - Tier 2; QL
DECARA ORAL CAPSULE 625 MCG (25000 UT) - Tier 2
DIALYVITE 800 ORAL TABLET (brand for full spectrum b/vitamin c) - Tier 2; QL
DIALYVITE VITAMIN D 5000 (brand for cvs d3) - Tier 2
D-VI-SOL (brand for aqueous vitamin d) - Tier 2; QL

Non-Preferred Agents

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Preferred Agents

d-vite pediatric (generic for BPROTECTED PEDIA D-VITE) - Tier 1; QL
ENFAMIL EXPECTA - Tier 2; QL
essential one daily (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
essentials (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
FOLCYTEINE (brand for daily multiple vitamins) - Tier 2
ft vitamin d3 oral tablet (generic for THERA-D 2000) - Tier 1; QL
full spectrum bl/vitamin c (generic for DIALYVITE 800) - Tier 1; QL
healthy hair/skin/nails (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
INFUVITE ADULT - Tier 2
multi vitamin (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
multi vitamin w/d-3 (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
multiple vitamin-folic acid (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
multiple vitamins essential (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
multi-vitamin (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
multi-vitamin/fluoride (generic for FLORIVA PLUS) - Tier 1; QL
multi-vitamin/fluorideliron - Tier 1; QL
mynephrocaps oral capsule 1 mg (generic for MYNEPHRON) - Tier 1
MYNEPHRON (brand for triphrocaps) - Tier 2
NEOMULTIVITE (brand for daily multiple vitamins) - Tier 2
NEONATAL PLUS (brand for one vite womens plus) - Tier 2; QL
nephro vitamins (generic for DIALYVITE 800) - Tier 1; QL

Non-Preferred Agents

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Preferred Agents

NEPHRO-VITE (brand for full spectrum b/vitamin c) - Tier 2; QL
niacin er oral capsule extended release 250 mg - Tier 1; QL
niacin er oral capsule extended release 500 mg - Tier 1
niacin er oral tablet extended release 1000 mg - Tier 1
niacin er oral tablet extended release 250 mg, 500 mg (generic for SLO-NIACIN) - Tier 1
niacin oral tablet 100 mg, 250 mg, 50 mg - Tier 1
OBSTETRIX DHA - Tier 2; QL
once daily (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
one daily (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
ONE DAILY ESSENTIALS (brand for daily multiple vitamins) - Tier 2
ONE VITE DAILY MULTIVITAMIN (brand for daily multiple vitamins) - Tier 2
ONE VITE WOMENS - Tier 2; QL
ONE VITE WOMENS PLUS (brand for one vite womens plus) - Tier 2; QL
one-daily multi vitamins (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
one-daily multi-vitamin (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
phytonadione injection solution 10 mg/ml - Tier 1; QL
phytonadione oral - Tier 1; QL
prenatal 19 oral tablet - Tier 1; QL
prenatal formula - Tier 1
prenatal formula oral tablet 28-0.8 mg - Tier 1; QL
prenatal gummy oral tablet chewable 0.4-25 mg (generic for ONE A DAY PRENATAL) - Tier 1; QL
prenatal multi+dha - Tier 1; QL

Non-Preferred Agents

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Preferred Agents**Non-Preferred Agents**

prenatal multivitamins - Tier 1; QL
prenatal oral tablet 27-0.8 mg (generic for NEONATAL VITAMIN) - Tier 1; QL
prenatal oral tablet 28-0.8 mg - Tier 1; QL
prenatal vitamins oral tablet 28-0.8 mg - Tier 1; QL
prenataliron - Tier 1; QL
PRONUTRIENTS VITAMIN D3 (brand for cvs d3) - Tier 2
QUFLORA PEDIATRIC ORAL SOLUTION 0.5 MG/ML (brand for multi-vitamin/fluoride) - Tier 2; QL
radiance platinum vitamin d3 (generic for RADIANCE PLATINUM VITAMIN D3) - Tier 1
RENAL (brand for triphrocaps) - Tier 2
rena-vite (generic for DIALYVITE 800) - Tier 1; QL
SLO-NIACIN (brand for niacin er) - Tier 2
stress formula (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
stress formula/zinc/energy (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
STUART ONE - Tier 2
sv vitamin d3 oral capsule 25 mcg (generic for PRONUTRIENTS VITAMIN D3) - Tier 1
sv vitamin d3 oral capsule 50 mcg - Tier 1; QL
sv vitamin d3 oral tablet chewable (generic for KIDS FIRST VITAMIN D3 GUMMIES) - Tier 1
tab-a-vite/beta carotene (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
THERA (brand for daily multiple vitamins) - Tier 2
thera-tabs (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
thiamine mononitrate oral - Tier 1; QL

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Preferred Agents

triphrocaps (generic for MYNEPHRON) - Tier 1
tri-vite pediatric - Tier 1; QL
TRUE DAILY VITE (brand for daily multiple vitamins) - Tier 2
TRUE MULTIVITAMIN (brand for daily multiple vitamins) - Tier 2
TRUE VITAMIN A - Tier 2; QL
TRUE VITAMIN B1 ORAL TABLET 100 MG - Tier 2; QL
TRUE VITAMIN B3 ORAL TABLET 100 MG, 250 MG, 50 MG - Tier 2
TRUE VITAMIN D3 ORAL CAPSULE 1.25 MG (50000 UT) (brand for vitamin d3) - Tier 2; QL
TRUE VITAMIN D3 ORAL CAPSULE 10 MCG (400 UNIT), 50 MCG (2000 UT) - Tier 2; QL
TRUE VITAMIN D3 ORAL CAPSULE 125 MCG (5000 UT), 25 MCG (1000 UT) (brand for cvs d3) - Tier 2
TRUE VITAMIN D3 ORAL CAPSULE 250 MCG (10000 UT) - Tier 2
TRUE VITAMIN D3 ORAL TABLET 10 MCG (400 UNIT) - Tier 2; QL
TRUE VITAMIN D3 ORAL TABLET 125 MCG (5000 UT) (brand for vitamin d3) - Tier 2
vitachew vitamin d3 (generic for KIDS FIRST VITAMIN D3 GUMMIES) - Tier 1
vitamin a oral capsule 2400 mcg (8000 ut), 3 mg, 3 mg (10000 ut) - Tier 1; QL
vitamin b complex w/b-12 - Tier 1
vitamin b-1 oral tablet 100 mg - Tier 1; QL
vitamin d (cholecalciferol) oral tablet 10 mcg (400 unit) - Tier 1; QL
vitamin d (cholecalciferol) oral tablet 25 mcg (1000 ut) (generic for VITAMIN D-1000 MAX ST) - Tier 1
vitamin d oral capsule 25 mcg (1000 ut) (generic for PRONUTRIENTS VITAMIN D3) - Tier 1

Non-Preferred Agents

Tier 1: Generic; Tier 2: Brand; ^: Medical Office Attestation Needed if Prescribed by Behavioral Health Provider, Full Prior Authorization Needed if Prescribed by Non-Behavioral Health Provider; *: Available without PA for participating Behavioral Health Prescribers; AL: Limited to members of a certain age; DX2RX: Diagnosis Required; GE: Gender Limit; PA: Prior Auth Required; QL: Quantity Limit; SP: Specialty Medication; ST: Step Therapy

Preferred Agents**Non-Preferred Agents**

vitamin d oral liquid (generic for BPROTECTED PEDIA D-VITE) - Tier 1; QL

vitamin d oral tablet chewable 10 mcg (400 unit) - Tier 1

vitamin d3 oral capsule 1.25 mg (50000 ut) (generic for D3-50) - Tier 1; QL

vitamin d3 oral capsule 125 mcg (5000 ut) (generic for DIALYVITE VITAMIN D 5000) - Tier 1

vitamin d-3 oral capsule 125 mcg (5000 ut) (generic for DIALYVITE VITAMIN D 5000) - Tier 1

vitamin d3 oral capsule 25 mcg (1000 ut) (generic for PRONUTRIENTS VITAMIN D3) - Tier 1

vitamin d3 oral capsule 250 mcg (10000 ut) (generic for IS-D 10,000) - Tier 1

vitamin d3 oral capsule 50 mcg (2000 ut) - Tier 1; QL

vitamin d-3 oral capsule 50 mcg (2000 ut) - Tier 1; QL

vitamin d3 oral liquid 10 mcg/ml (generic for BPROTECTED PEDIA D-VITE) - Tier 1; QL

vitamin d3 oral tablet 10 mcg (400 unit) - Tier 1; QL

vitamin d3 oral tablet 125 mcg (5000 ut) (generic for RADIANCE PLATINUM VITAMIN D3) - Tier 1

vitamin d3 oral tablet 25 mcg (1000 ut) (generic for VITAMIN D-1000 MAX ST) - Tier 1

vitamin d-3 oral tablet 25 mcg (1000 ut) (generic for VITAMIN D-1000 MAX ST) - Tier 1

vitamin d3 oral tablet 50 mcg (2000 ut) (generic for THERA-D 2000) - Tier 1; QL

vitamin d3 oral tablet chewable 10 mcg (400 unit) - Tier 1

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Preferred Agents	Non-Preferred Agents
<p>vitamin d3 oral tablet chewable 25 mcg (1000 ut) (generic for KIDS FIRST VITAMIN D3 GUMMIES) - Tier 1</p> <p>vitamin d-400 oral tablet 10 mcg (400 unit) - Tier 1; QL</p> <p>vitamin k1 injection solution 10 mg/ml - Tier 1; QL</p> <p>vitamin-b complex - Tier 1</p> <p>weekly-d (generic for D3-50) - Tier 1; QL</p> <p>wescaps (generic for MYNEPHRON) - Tier 1</p> <p>womens prenatal+dha - Tier 1; QL</p>	
Gastrointestinal Agents	
Anti-Diarrheal Agents	
<p>anti-diarrheal oral tablet 2 mg (generic for IMODIUM A-D) - Tier 1</p> <p>diamode (generic for IMODIUM A-D) - Tier 1</p> <p>ft anti-diarrheal oral tablet (generic for IMODIUM A-D) - Tier 1</p> <p>IMODIUM A-D ORAL TABLET (brand for anti-diarrheal) - Tier 2</p> <p>loperamide hcl oral capsule (generic for IMODIUM A-D) - Tier 1; QL</p> <p>loperamide hcl oral tablet (generic for IMODIUM A-D) - Tier 1</p> <p>meijer anti-diarrheal (generic for IMODIUM A-D) - Tier 1</p>	
Histamine2 (H2) Receptor Antagonists	
<p>acid controller (generic for PEPCID AC) - Tier 1; QL</p> <p>acid reducer oral tablet 10 mg (generic for PEPCID AC) - Tier 1; QL</p> <p>acid reducer oral tablet 200 mg (generic for TAGAMET HB 200) - Tier 1</p> <p>cimetidine oral tablet 200 mg (generic for TAGAMET HB 200) - Tier 1</p> <p>famotidine acid reducer oral tablet 10 mg (generic for PEPCID AC) - Tier 1; QL</p> <p>famotidine oral tablet 10 mg (generic for PEPCID AC) - Tier 1; QL</p> <p>famotidine orig st (generic for PEPCID AC) - Tier 1; QL</p> <p>famotidine tablet 20 mg oral (rx) (generic for MM ACID-PEP MAXIMUM STRENGTH) - Tier 1; QL</p> <p>ft acid reducer oral tablet (generic for PEPCID AC) - Tier 1; QL</p> <p>heartburn prevention oral tablet 10 mg (generic for PEPCID AC) - Tier 1; QL</p>	

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Preferred Agents	Non-Preferred Agents
<p><i>heartburn relief oral tablet 10 mg (generic for PEPCID AC) - Tier 1; QL</i> <i>heartburn relief oral tablet 200 mg (generic for TAGAMET HB 200) - Tier 1</i> <i>PEPCID AC (brand for acid controller) - Tier 2; QL</i> <i>TAGAMET HB 200 (brand for cvs heartburn relief) - Tier 2</i></p>	

Proton Pump Inhibitors

<p><i>acid reducer oral capsule delayed release 20.6 (20 base) mg - Tier 1; QL</i> <i>ft acid reducer oral capsule delayed release 15 mg (generic for PREVACID 24HR) - Tier 1; QL</i> <i>lansoprazole capsule delayed release 15 mg oral (otc) (generic for PREVACID 24HR) - Tier 1; QL</i> <i>lansoprazole oral capsule delayed release 15 mg (generic for PREVACID 24HR) - Tier 1; QL</i> <i>lansoprazole oral tablet delayed release dispersible 15 mg (generic for PREVACID SOLUTAB) - Tier 1; QL; AL</i> <i>omeprazole capsule delayed release 20 mg oral - Tier 1; QL</i> <i>omeprazole magnesium - Tier 1; QL</i> <i>omeprazole magnesium oral capsule delayed release - Tier 1; QL</i> <i>omeprazole oral capsule delayed release 20.6 (20 base) mg - Tier 1; QL</i> <i>PREVACID 24HR (brand for eq lansoprazole) - Tier 2; QL</i></p>	
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Preferred Agents**Non-Preferred Agents****Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions****Gastrointestinal Agents, Other - Miscellaneous Gastrointestinal Drugs**

abatine (generic for ABATINEX) - Tier 1
acid gone (generic for ACID GONE) - Tier 1
acidophilus lactobacillus oral (generic for ABATINEX) - Tier 1
acidophilus oral capsule , 10 mg (generic for ABATINEX) - Tier 1
acidophilus probiotic oral capsule 10 mg (generic for ABATINEX) - Tier 1
acidophilus probiotic oral tablet , 0.5 mg (generic for FLORANEX) - Tier 1
adult 50+ probiotic (generic for FLORA VANCE) - Tier 1; QL
adult probiotic (generic for FLORA VANCE) - Tier 1; QL
advanced antacid (generic for MINTOX) - Tier 1; QL
almacone double strength (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
alum & mag hydroxide-simeth (generic for MINTOX) - Tier 1; QL
antacid & anti-gas max str (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
antacid & anti-gas oral suspension 200-200-20 mg/5ml (generic for MINTOX) - Tier 1; QL
antacid & antigas oral suspension 2400-2400-240 mg/30ml (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
antacid & anti-gas oral suspension 400-400-40 mg/5ml (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
antacid & gas relief (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
antacid advanced (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
antacid advanced max st oral suspension 400-400-40 mg/5ml (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL

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Preferred Agents

antacid anti-gas (generic for MINTOX) - Tier 1; QL
antacid anti-gas max strength (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
antacid calcium (generic for CAL-GEST ANTACID) - Tier 1
antacid calcium rich (generic for CAL-GEST ANTACID) - Tier 1
antacid extra str (generic for CVS CHEWY NOT CHALKY FLAVOR) - Tier 1
antacid extra strength oral suspension (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
antacid extra strength oral tablet chewable 160-105 mg (generic for ACID GONE) - Tier 1
antacid extra strength oral tablet chewable 750 mg (generic for CVS CHEWY NOT CHALKY FLAVOR) - Tier 1
antacid fast relief (generic for MINTOX) - Tier 1; QL
antacid i (generic for MINTOX) - Tier 1; QL
antacid iii (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
antacid kids (generic for CVS CHEWY NOT CHALKY FLAVOR) - Tier 1
antacid liquid (generic for MINTOX) - Tier 1; QL
antacid m (generic for MINTOX) - Tier 1; QL
antacid maximum (generic for TUMS ULTRA 1000) - Tier 1
antacid maximum strength (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
antacid maximum strength oral tablet chewable 1000 mg (generic for TUMS ULTRA 1000) - Tier 1
antacid oral suspension 200-200-20 mg/5ml, 400-400-40 mg/10ml (generic for MINTOX) - Tier 1; QL
antacid oral suspension 400-135 mg/5ml - Tier 1

Non-Preferred Agents

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Preferred Agents

antacid oral tablet chewable 1000 mg (generic for TUMS ULTRA 1000) - Tier 1

antacid oral tablet chewable 500 mg (generic for CAL-GEST ANTACID) - Tier 1

antacid oral tablet chewable 750 mg (generic for CVS CHEWY NOT CHALKY FLAVOR) - Tier 1

antacid plus antigas (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL

antacid regular strength oral suspension 200-200-20 mg/5ml (generic for MINTOX) - Tier 1; QL

antacid ultra strength (generic for TUMS ULTRA 1000) - Tier 1

antacid ultra strength oral tablet chewable 1000 mg (generic for TUMS ULTRA 1000) - Tier 1

antacid/anti-gas max st (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL

antacid/anti-gas oral suspension 200-200-20 mg/5ml, 400-400-40 mg/10ml (generic for MINTOX) - Tier 1; QL

antacid/antigas oral suspension 400-400-40 mg/10ml (generic for MINTOX) - Tier 1; QL

antacid/anti-gas oral suspension 400-400-40 mg/5ml (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL

antacid/gas relief max st (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL

anti-diarr/ant-gas (generic for IMODIUM MULTI-SYMPTOM RELIEF) - Tier 1

anti-diarrheal anti-gas oral tablet 2-125 mg (generic for IMODIUM MULTI-SYMPTOM RELIEF) - Tier 1

Non-Preferred Agents

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Preferred Agents

anti-diarrheal oral suspension 262 mg/15ml (generic for SOOTHE) - Tier 1
anti-diarrheal/anti-gas (generic for IMODIUM MULTI-SYMPTOM RELIEF) - Tier 1
anti-gas oral capsule 180 mg (generic for GAS-X ULTRA STRENGTH) - Tier 1
biotinex (generic for ABATINEX) - Tier 1
bismuth (generic for SOOTHE) - Tier 1; QL
bismuth subsalicylate oral (generic for SOOTHE) - Tier 1; QL
calcium antacid (generic for CAL-GEST ANTACID) - Tier 1
calcium antacid ex st oral tablet chewable 750 mg (generic for CVS CHEWY NOT CHALKY FLAVOR) - Tier 1
calcium antacid extra strength (generic for CVS CHEWY NOT CHALKY FLAVOR) - Tier 1
calcium carbonate antacid oral suspension - Tier 1; QL
calcium carbonate antacid oral tablet - Tier 1
calcium carbonate antacid oral tablet chewable (generic for CAL-GEST ANTACID) - Tier 1
cal-gest antacid (generic for CAL-GEST ANTACID) - Tier 1
chewy not chalky flavor (generic for CVS CHEWY NOT CHALKY FLAVOR) - Tier 1
childrens soothe - Tier 1
comfort gel (generic for MINTOX) - Tier 1; QL
comfort gel antacid anti-gas oral suspension 400-400-40 mg/5ml (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
diarrhea (generic for SOOTHE) - Tier 1
diarrhea relief (generic for SOOTHE) - Tier 1

Non-Preferred Agents

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Preferred Agents

digestive probiotic oral capsule (generic for FLORA VANCE) - Tier 1; QL
digestive probiotic oral capsule 250 mg (generic for FLORASTOR) - Tier 1
enema (generic for FLEET ENEMA) - Tier 1; QL
enema disposable (generic for FLEET ENEMA) - Tier 1; QL
enema ready-to-use (generic for FLEET ENEMA) - Tier 1; QL
enema rectal enema 16-6 gm/133ml (generic for FLEET ENEMA) - Tier 1; QL
FLEET ENEMA (brand for cvs enema disposable) - Tier 2; QL
FLEET PEDIATRIC (brand for enema pediatric) - Tier 2; QL
FLORA VANCE (brand for cvs adult 50+ probiotic) - Tier 2; QL
floranex tablet oral (generic for FLORANEX) - Tier 1
FLORANEX TABLET ORAL (brand for cvs acidophilus probiotic) - Tier 2
foaming antacid oral tablet chewable 80-20 mg - Tier 1
freeze dried acidophilus (generic for ABATINEX) - Tier 1
ft antacid & antigas (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
ft antacid extra strength (generic for CVS CHEWY NOT CHALKY FLAVOR) - Tier 1
ft antacid regular strength (generic for CAL-GEST ANTACID) - Tier 1
ft anti-diarrheal/anti-gas (generic for IMODIUM MULTI-SYMPTOM RELIEF) - Tier 1
ft enema saline (generic for FLEET ENEMA) - Tier 1; QL
ft gas relief - Tier 1

Non-Preferred Agents

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Preferred Agents

ft gas relief extra strength (generic for GAS-X EXTRA STRENGTH) - Tier 1

ft gas relief infants (generic for MYLICON INFANTS GAS RELIEF) - Tier 1; QL

ft gas relief ultra strength (generic for GAS-X ULTRA STRENGTH) - Tier 1

ft milk of magnesia (generic for DULCOLAX) - Tier 1

ft stomach relief oral suspension (generic for SOOTHE) - Tier 1

ft stomach relief oral tablet (generic for KAOPECTATE) - Tier 1

ft stomach relief oral tablet chewable (generic for SOOTHE) - Tier 1; QL

gas relief extra st (generic for GAS-X EXTRA STRENGTH) - Tier 1

gas relief extra strength (generic for GAS-X EXTRA STRENGTH) - Tier 1

gas relief extra strength oral tablet chewable 125 mg (generic for GAS-X EXTRA STRENGTH) - Tier 1

gas relief extstrength (generic for GAS-X EXTRA STRENGTH) - Tier 1

gas relief infants (generic for MYLICON INFANTS GAS RELIEF) - Tier 1; QL

gas relief infants drops oral suspension 40 mg/0.6ml (generic for MYLICON INFANTS GAS RELIEF) - Tier 1; QL

gas relief infants oral suspension 20 mg/0.3ml (generic for MYLICON INFANTS GAS RELIEF) - Tier 1; QL

gas relief oral capsule 125 mg (generic for GAS-X EXTRA STRENGTH) - Tier 1

gas relief oral capsule 180 mg (generic for GAS-X ULTRA STRENGTH) - Tier 1

Non-Preferred Agents

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Preferred Agents**Non-Preferred Agents**

gas relief oral tablet chewable 125 mg (generic for GAS-X EXTRA STRENGTH) - Tier 1

gas relief oral tablet chewable 80 mg - Tier 1

gas relief ultra strength (generic for GAS-X ULTRA STRENGTH) - Tier 1

gas relief ultstrength (generic for GAS-X ULTRA STRENGTH) - Tier 1

GAS-X EXTRA STRENGTH ORAL CAPSULE (brand for eq gas relief) - Tier 2

GAS-X EXTRA STRENGTH ORAL TABLET CHEWABLE (brand for cvs gas relief extra strength) - Tier 2

GAS-X ULTRA STRENGTH (brand for cvs gas relief ultra strength) - Tier 2

GAVICON - Tier 2

GAVICON EXTRA RELIEF FORMULA (brand for cvs heartburn relief ex st) - Tier 2

GAVICON EXTRA STRENGTH (brand for antacid extra strength) - Tier 2

GELUSIL - Tier 2

gentle laxative oral suspension (generic for DULCOLAX) - Tier 1

geri-lanta maximum strength (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL

geri-lanta oral suspension 200-200-20 mg/5ml (generic for MINTOX) - Tier 1; QL

geri-lanta supreme - Tier 1

geri-mox (generic for MINTOX) - Tier 1; QL

geri-mox maximum strength (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL

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Preferred Agents

heartburn antacid (generic for ACID GONE) - Tier 1
heartburn antacid ex st (generic for ACID GONE) - Tier 1
heartburn relief ex st (generic for GAVISCON EXTRA RELIEF FORMULA) - Tier 1
heartburn relief oral tablet chewable 160-105 mg (generic for ACID GONE) - Tier 1
heartland gas relief - Tier 1
IMODIUM MULTI-SYMPTOM RELIEF (brand for eqi anti-diarrheal anti-gas) - Tier 2
infant gas relief (generic for MYLICON INFANTS GAS RELIEF) - Tier 1; QL
infants gas relief (generic for MYLICON INFANTS GAS RELIEF) - Tier 1; QL
intestinex (generic for ABATINEX) - Tier 1
lactobacillus oral tablet (generic for FLORANEX) - Tier 1
lacto-pectin (generic for FLORA VANCE) - Tier 1; QL
long lasting antacid (generic for CAL-GEST ANTACID) - Tier 1
loperamide-simethicone (generic for IMODIUM MULTI-SYMPTOM RELIEF) - Tier 1
MAALOX - Tier 2
MAALOX CHILDRENS (brand for childrens pepto) - Tier 2
MAALOX MAX ORAL SUSPENSION (brand for antacid & anti-gas max str) - Tier 2; QL
MAALOX MULTI SYMPTOM MAX ST (brand for antacid & anti-gas max str) - Tier 2; QL
mag-al plus (generic for MINTOX) - Tier 1; QL
mag-al plus xs (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL

Non-Preferred Agents

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Preferred Agents

mega probiotic (generic for FLORA VANCE) - Tier 1; QL
meijer antacid (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
milk of magnesia (generic for DULCOLAX) - Tier 1
milk of magnesia oral suspension 1200 mg/15ml (generic for DULCOLAX) - Tier 1
mintox maximum strength (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
mintox plus - Tier 1
mood support probiotic (generic for FLORA VANCE) - Tier 1; QL
MYLICON INFANTS GAS RELIEF (brand for cvs gas relief infants) - Tier 2; QL
NEWFLORA PROBIOTIC (brand for acidophilus) - Tier 2; PA
PEPTO-BISMOL ORAL SUSPENSION 524 MG/30ML (brand for cvs anti-diarrheal) - Tier 2
PHAZYME (brand for cvs gas relief extra strength) - Tier 2
PHAZYME ULTRA STRENGTH (brand for cvs gas relief ultra strength) - Tier 2
pink bismuth maximum strength (generic for SOOTHE MAXIMUM STRENGTH) - Tier 1
pink bismuth oral suspension 262 mg/15ml (generic for SOOTHE) - Tier 1
pink bismuth oral suspension 525 mg/15ml (generic for SOOTHE MAXIMUM STRENGTH) - Tier 1
pink bismuth oral tablet 262 mg (generic for KAOPECTATE) - Tier 1
pink bismuth oral tablet chewable 262 mg (generic for SOOTHE) - Tier 1; QL

Non-Preferred Agents

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Preferred Agents

pink bismuth ultra str (generic for SOOTHE MAXIMUM STRENGTH) - Tier 1
pink-bismuth (generic for SOOTHE) - Tier 1; QL
probiotic acidophilus oral capsule (generic for ABATINEX) - Tier 1
probiotic blend (generic for FLORA VANCE) - Tier 1; QL
probiotic colon care (generic for FLORA VANCE) - Tier 1; QL
probiotic complex (generic for FLORA VANCE) - Tier 1; QL
probiotic maximum strength (generic for FLORA VANCE) - Tier 1; QL
probiotic oral capsule (generic for FLORA VANCE) - Tier 1; QL
probiotic oral capsule 250 mg (generic for FLORASTOR) - Tier 1
probiotic pearls ex st (generic for FLORA VANCE) - Tier 1; QL
ready-to-use enema rectal enema (generic for FLEET ENEMA) - Tier 1; QL
REJUVAFLOR (brand for acidophilus) - Tier 2; PA
RESTORA (brand for cvs adult 50+ probiotic) - Tier 2; QL
REVITAFLO (brand for acidophilus) - Tier 2
RISAQUAD (brand for cvs adult 50+ probiotic) - Tier 2; QL
RISAQUAD-2 (brand for cvs adult 50+ probiotic) - Tier 2; QL
saccharomyces boulardii (generic for FLORASTOR) - Tier 1
saline enema (generic for FLEET ENEMA) - Tier 1; QL
senior probiotic (generic for FLORA VANCE) - Tier 1; QL
simeped (generic for MYLICON INFANTS GAS RELIEF) - Tier 1; QL
simethicone drops infants (generic for MYLICON INFANTS GAS RELIEF) - Tier 1; QL
simethicone oral capsule (generic for GAS-X EXTRA STRENGTH) - Tier 1
simethicone oral suspension (generic for MYLICON INFANTS GAS RELIEF) - Tier 1; QL

Non-Preferred Agents

Tier 1: Generic; Tier 2: Brand; ^: Medical Office Attestation Needed if Prescribed by Behavioral Health Provider, Full Prior Authorization Needed if Prescribed by Non-Behavioral Health Provider; *: Available without PA for participating Behavioral Health Prescribers; AL: Limited to members of a certain age; DX2RX: Diagnosis Required; GE: Gender Limit; PA: Prior Auth Required; QL: Quantity Limit; SP: Specialty Medication; ST: Step Therapy

Preferred Agents

simethicone oral tablet chewable (generic for GAS-X EXTRA STRENGTH) - Tier 1

simethicone ultra strength (generic for GAS-X ULTRA STRENGTH) - Tier 1

smooth antacid ex st oral tablet chewable 750 mg (generic for CVS CHEWY NOT CHALKY FLAVOR) - Tier 1

smooth antacid extra st (generic for CVS CHEWY NOT CHALKY FLAVOR) - Tier 1

smooth antacid extra strength (generic for CVS CHEWY NOT CHALKY FLAVOR) - Tier 1

sodium bicarbonate oral tablet - Tier 1

soothe maximum strength (generic for SOOTHE MAXIMUM STRENGTH) - Tier 1

soothe oral suspension (generic for SOOTHE) - Tier 1

soothe oral tablet chewable (generic for SOOTHE) - Tier 1; QL

stomach relief extra strength (generic for SOOTHE MAXIMUM STRENGTH) - Tier 1

stomach relief max st oral suspension 525 mg/15ml (generic for SOOTHE MAXIMUM STRENGTH) - Tier 1

stomach relief oral suspension 1050 mg/30ml, 525 mg/15ml (generic for SOOTHE MAXIMUM STRENGTH) - Tier 1

stomach relief oral suspension 262 mg/15ml, 525 mg/30ml, 527 mg/30ml (generic for SOOTHE) - Tier 1

stomach relief oral tablet 262 mg (generic for KAOPECTATE) - Tier 1

stomach relief oral tablet chewable 262 mg (generic for SOOTHE) - Tier 1; QL

stomach relief plus (generic for SOOTHE MAXIMUM STRENGTH) - Tier 1

Non-Preferred Agents

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Preferred Agents	Non-Preferred Agents
<p><i>stomach relief ultra (generic for SOOTHE MAXIMUM STRENGTH) - Tier 1</i></p> <p><i>TEENY TUMMY GAS RELIEF DROPS (brand for cvs gas relief infants) - Tier 2; QL</i></p> <p><i>TUMS (brand for antacid) - Tier 2</i></p> <p><i>TUMS CHEWY BITES (brand for antacid) - Tier 2</i></p> <p><i>TUMS E-X 750 (brand for antacid) - Tier 2</i></p> <p><i>TUMS EXTRA STRENGTH 750 (brand for antacid) - Tier 2</i></p> <p><i>TUMS LASTING EFFECTS (brand for antacid) - Tier 2</i></p> <p><i>TUMS SMOOTHIES (brand for antacid) - Tier 2</i></p> <p><i>TUMS ULTRA 1000 (brand for antacid maximum) - Tier 2</i></p> <p><i>ZELAC (brand for cvs adult 50+ probiotic) - Tier 2; QL</i></p>	

Laxatives - Bowel Treatment Drugs

<p><i>clearlax oral powder 17 gm/scoop (generic for CLEARLAX) - Tier 1; ONLY powder bottle; QL</i></p> <p><i>daily fiber oral capsule 0.52 gm (generic for MEDI-MUCIL) - Tier 1</i></p> <p><i>enema mineral oil (generic for FLEET OIL) - Tier 1; QL</i></p> <p><i>EVAC (brand for cvs natural fiber supplement) - Tier 2; QL</i></p> <p><i>fiber laxative oral capsule 0.52 gm (generic for MEDI-MUCIL) - Tier 1</i></p> <p><i>fiber oral capsule 0.52 gm (generic for MEDI-MUCIL) - Tier 1</i></p> <p><i>fiber oral powder 28.3 %, 58.6 % (generic for METAMUCIL SMOOTH TEXTURE) - Tier 1; QL</i></p> <p><i>fiber therapy oral capsule 0.52 gm (generic for MEDI-MUCIL) - Tier 1</i></p> <p><i>fiber therapy oral powder 28.3 % (generic for METAMUCIL SMOOTH TEXTURE) - Tier 1; QL</i></p> <p><i>FLEET OIL (brand for cvs mineral oil enema) - Tier 2; QL</i></p> <p><i>ft clearlax (generic for CLEARLAX) - Tier 1; ONLY powder bottle; QL</i></p>	
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Preferred Agents

ft enema mineral oil (generic for FLEET OIL) - Tier 1; QL
ft mineral oil - Tier 1
gavilax oral powder (generic for CLEARLAX) - Tier 1; ONLY powder bottle; QL
gentlelax (generic for CLEARLAX) - Tier 1; ONLY powder bottle; QL
glycolax (generic for CLEARLAX) - Tier 1; ONLY powder bottle; QL
laxaclear (generic for CLEARLAX) - Tier 1; ONLY powder bottle; QL
laxative oral powder 17 gm/scoop (generic for CLEARLAX) - Tier 1; ONLY powder bottle; QL
mineral oil enema (generic for FLEET OIL) - Tier 1; QL
mineral oil heavy oral - Tier 1
mineral oil oral oil - Tier 1
mineral oil rectal enema (generic for FLEET OIL) - Tier 1; QL
MIRALAX ORAL POWDER (brand for ft clearlax) - Tier 2; ONLY powder bottle; QL
mm clearlax (generic for CLEARLAX) - Tier 1; ONLY powder bottle; QL
natural daily fiber oral powder 58.6 % (generic for METAMUCIL SMOOTH TEXTURE) - Tier 1; QL
natural fiber oral capsule 0.52 gm (generic for MEDI-MUCIL) - Tier 1
natural fiber oral powder 28.3 %, 58.6 % (generic for METAMUCIL SMOOTH TEXTURE) - Tier 1; QL
natural fiber supplement (generic for EVAC) - Tier 1; QL
natural vegetable (generic for HYDROCIL) - Tier 1; QL
natura-lax (generic for CLEARLAX) - Tier 1; ONLY powder bottle; QL
peg 3350 oral powder (generic for CLEARLAX) - Tier 1; ONLY powder bottle; QL

Non-Preferred Agents

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Preferred Agents	Non-Preferred Agents
<p>polyethylene glycol 3350 oral powder (generic for CLEARLAX) - Tier 1; ONLY powder bottle; QL</p> <p>polyethylene glycol 3350-grx oral powder (generic for CLEARLAX) - Tier 1; ONLY powder bottle; QL</p> <p>psyldex - Tier 1; QL</p> <p>purelax oral powder (generic for CLEARLAX) - Tier 1; ONLY powder bottle; QL</p> <p>smooth lax oral powder (generic for CLEARLAX) - Tier 1; ONLY powder bottle; QL</p> <p>sorbitol oral - Tier 1</p> <p>TRUE LAXATIVE (brand for ft clearlax) - Tier 2; ONLY powder bottle; QL</p>	

Laxatives - Drugs to treat Constipation	
<p>AVEDANA GLYCERIN (ADULT) (brand for cvs glycerin adult) - Tier 2</p> <p>citroma (generic for CITROMA) - Tier 1</p> <p>CITRUCCEL ORAL POWDER - Tier 2; QL</p> <p>CITRUCCEL ORAL TABLET (brand for cvs fiber therapy) - Tier 2</p> <p>COLACE (brand for cvs stool softener) - Tier 2; QL</p> <p>col-rite oral capsule 250 mg - Tier 1; QL</p> <p>docusate calcium (generic for SURFAK) - Tier 1</p> <p>docusate mini (generic for DOCUSOL MINI) - Tier 1; QL</p> <p>docusate sodium oral capsule (generic for COLACE) - Tier 1; QL</p> <p>docusate sodium oral liquid (generic for ONELAX DOCUSATE SODIUM) - Tier 1; QL</p> <p>docusate sodium oral syrup - Tier 1</p> <p>DOCUSOL MINI (brand for docusate mini) - Tier 2; QL</p> <p>docuzen (generic for SENOKOT S) - Tier 1</p>	

Tier 1: Generic; Tier 2: Brand; ^: Medical Office Attestation Needed if Prescribed by Behavioral Health Provider, Full Prior Authorization Needed if Prescribed by Non-Behavioral Health Provider; *: Available without PA for participating Behavioral Health Prescribers; AL: Limited to members of a certain age; DX2RX: Diagnosis Required; GE: Gender Limit; PA: Prior Auth Required; QL: Quantity Limit; SP: Specialty Medication; ST: Step Therapy

Preferred Agents

dss (generic for COLACE) - Tier 1; QL
easy-lax plus (generic for SENOKOT S) - Tier 1
ENEMEEZ MINI (brand for docusate mini) - Tier 2; QL
EX-LAX MAXIMUM STRENGTH (brand for cvs laxative pills max st) - Tier 2
fiber laxative + calcium (generic for FIBERCON) - Tier 1
fiber laxative oral tablet 500 mg (generic for CITRUCEL) - Tier 1
fiber oral tablet 500 mg (generic for CITRUCEL) - Tier 1
fiber oral tablet 625 mg (generic for FIBERCON) - Tier 1
fiber therapy oral tablet 500 mg (generic for CITRUCEL) - Tier 1
fiber therapy oral tablet 625 mg (generic for FIBERCON) - Tier 1
fiber-caps (generic for FIBERCON) - Tier 1
fiber-lax (generic for FIBERCON) - Tier 1
FRESKARO MAGNESIUM CITRATE (brand for cvs magnesium citrate) - Tier 2
ft fiber laxative (generic for CITRUCEL) - Tier 1
ft magnesium citrate (generic for CITROMA) - Tier 1
ft senna laxative (generic for SENOKOT) - Tier 1; QL
ft senna laxatives (generic for SENOKOT) - Tier 1; QL
ft senna-s (generic for SENOKOT S) - Tier 1
ft stool softener oral capsule (generic for COLACE) - Tier 1; QL
ft stool softener oral tablet 50-8.6 mg (generic for SENOKOT S) - Tier 1
geri-kot (generic for SENOKOT) - Tier 1; QL
glycerin (adult) rectal suppository 2 gm (generic for AVEDANA GLYCERIN (ADULT)) - Tier 1
glycerin (infants & children) rectal suppository 1 gm - Tier 1

Non-Preferred Agents

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Preferred Agents

glycerin adult rectal suppository 2 gm (generic for AVEDANA GLYCERIN (ADULT)) - Tier 1
glycerin child rectal suppository 1 gm, 1.2 gm - Tier 1
glycerin childrens - Tier 1
glycerin pediatric rectal suppository 1.2 gm - Tier 1
laxacin (generic for SENOKOT S) - Tier 1
laxative max str (generic for EX-LAX MAXIMUM STRENGTH) - Tier 1
laxative pills max st (generic for EX-LAX MAXIMUM STRENGTH) - Tier 1
laxative pills oral tablet 25 mg (generic for EX-LAX MAXIMUM STRENGTH) - Tier 1
laxative regular strength (generic for SENNA SMOOTH) - Tier 1
magnesium citrate oral solution (generic for CITROMA) - Tier 1
mm stool softener (generic for COLACE) - Tier 1; QL
mm stool softener laxative (generic for COLACE) - Tier 1; QL
natural senna laxative (generic for SENOKOT) - Tier 1; QL
natural vegetable laxative oral tablet 8.6 mg (generic for SENOKOT) - Tier 1; QL
ONELAX DOCUSATE SODIUM (brand for docusate sodium) - Tier 2; QL
ONELAX MAGNESIUM CITRATE (brand for cvs magnesium citrate) - Tier 2
ONELAX SENNA (brand for senna) - Tier 2
p col-rite (generic for SENOKOT S) - Tier 1
PEDIA-LAX ORAL LIQUID - Tier 2
PERDIEM OVERNIGHT RELIEF (brand for laxative regular strength) - Tier 2
sb docusate sodium/senna (generic for SENOKOT S) - Tier 1

Non-Preferred Agents

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Preferred Agents

senexon-s (generic for SENOKOT S) - Tier 1
senna lax (generic for SENOKOT) - Tier 1; QL
senna laxative (generic for SENOKOT) - Tier 1; QL
senna oral liquid 8.8 mg/5ml (generic for ONELAX SENNA) - Tier 1
senna oral syrup 176 mg/5ml - Tier 1
senna oral syrup 8.8 mg/5ml (generic for ONELAX SENNA) - Tier 1
senna oral tablet 8.6 mg (generic for SENOKOT) - Tier 1; QL
senna plus oral tablet (generic for SENOKOT S) - Tier 1
senna s (generic for SENOKOT S) - Tier 1
senna smooth (generic for SENNA SMOOTH) - Tier 1
senna-docusate sodium (generic for SENOKOT S) - Tier 1
senna-lax (generic for SENOKOT) - Tier 1; QL
senna-plus (generic for SENOKOT S) - Tier 1
senna-s (generic for SENOKOT S) - Tier 1
senna-tabs (generic for SENOKOT) - Tier 1; QL
senna-time (generic for SENOKOT) - Tier 1; QL
senna-time s (generic for SENOKOT S) - Tier 1
sennazon (generic for ONELAX SENNA) - Tier 1
sennosides-docusate sodium (generic for SENOKOT S) - Tier 1
SENOKOT (brand for cvs senna) - Tier 2; QL
SENOKOT S (brand for cvs senna plus) - Tier 2
soluble fiber therapy - Tier 1; QL
stimulant lax plus (generic for SENOKOT S) - Tier 1
stimulant laxative (generic for SENOKOT S) - Tier 1
stool softener extra str - Tier 1; QL
stool softener laxative oral capsule (generic for COLACE) - Tier 1; QL
stool softener oral capsule 100 mg (generic for COLACE) - Tier 1; QL
stool softener oral capsule 240 mg (generic for SURFAK) - Tier 1

Non-Preferred Agents

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Preferred Agents	Non-Preferred Agents
<p><i>stool softener oral capsule 250 mg - Tier 1; QL</i></p> <p><i>stool softener oral capsule 50 mg (generic for COLACE CLEAR) - Tier 1</i></p> <p><i>stool softener pls laxative (generic for SENOKOT S) - Tier 1</i></p> <p><i>stool softener plus laxative (generic for SENOKOT S) - Tier 1</i></p> <p><i>stool softener/laxative (generic for SENOKOT S) - Tier 1</i></p> <p><i>stool softener/laxative oral tablet (generic for SENOKOT S) - Tier 1</i></p> <p><i>vegetable lax+stool softener (generic for SENOKOT S) - Tier 1</i></p> <p><i>vegetable laxative (generic for SENOKOT) - Tier 1; QL</i></p>	
Genitourinary Agents	
Antispasmodics, Urinary	
OXYTROL FOR WOMEN - Tier 2; QL	
Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions	
Genitourinary Agents, Other - Miscellaneous Bladder, Genital, and Kidney Conditions Drugs	
<p><i>azo (generic for PHENAZO) - Tier 1</i></p> <p><i>phenazo oral tablet 200 mg (generic for PHENAZO) - Tier 1; QL</i></p> <p><i>phenazo oral tablet 95 mg (generic for PHENAZO) - Tier 1</i></p> <p><i>phenazopyridine hcl oral tablet 100 mg (generic for PYRIDIUM) - Tier 1; QL</i></p> <p><i>phenazopyridine hcl oral tablet 200 mg (generic for PHENAZO) - Tier 1; QL</i></p> <p><i>phenazopyridine hcl oral tablet 95 mg (generic for PHENAZO) - Tier 1</i></p> <p><i>PYRIDIUM (brand for phenazopyridine hcl) - Tier 2; QL</i></p> <p><i>urinary pain relief oral tablet 95 mg (generic for PHENAZO) - Tier 1</i></p> <p><i>URO-PAIN (brand for cvs urinary pain relief) - Tier 2</i></p>	

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Preferred Agents	Non-Preferred Agents
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) - Drugs to Regulate Hormones	
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) - Hormone Replacement/Modifying Drugs	
OVIDREL - Tier 2; DX2RX	
Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)	
Estrogens	
	MENEST ORAL TABLET 2.5 MG - Tier 2; PA; QL
Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) - Drugs to Regulate Hormones	
Progestins - Hormone Replacement/Modifying Drugs	
<i>aftera (generic for AFTERA) - Tier 1; QL; GE</i> <i>curae (generic for AFTERA) - Tier 1; QL; GE</i> <i>econtra one-step (generic for AFTERA) - Tier 1; QL; GE</i> <i>her style (generic for AFTERA) - Tier 1; QL; GE</i> <i>levonorgestrel (generic for AFTERA) - Tier 1; QL; GE</i> <i>my choice (generic for AFTERA) - Tier 1; QL; GE</i> <i>my way (generic for AFTERA) - Tier 1; QL; GE</i> <i>new day (generic for AFTERA) - Tier 1; QL; GE</i> <i>opcicon one-step (generic for AFTERA) - Tier 1; QL; GE</i> <i>option 2 (generic for AFTERA) - Tier 1; QL; GE</i> <i>PLAN B ONE-STEP (brand for levonorgestrel) - Tier 2; QL; GE</i> <i>react (generic for AFTERA) - Tier 1; QL; GE</i> <i>take action (generic for AFTERA) - Tier 1; QL; GE</i>	

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Preferred Agents	Non-Preferred Agents
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) - Drugs to Replace Thyroid Hormones	
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) - Thyroid Replacement Drugs	
	<i>ARMOUR THYROID (brand for niva thyroid) - Tier 2; PA; QL</i>
Metabolic Bone Disease Agents	
	<i>FORTEO (brand for teriparatide) - Tier 2; PA; SP; QL</i>
Miscellaneous Therapeutic Agents	
<i>acne control cleanser (generic for CLEARASIL RAPID RESCUE DEEP) - Tier 1; QL</i> <i>acne medication 10 external lotion - Tier 1; QL</i> <i>acne medication 5 external lotion - Tier 1; QL</i> <i>acne treatment external cream 10 % (generic for CLEARSKIN) - Tier 1; QL</i> ADALIMUMAB-ADB (2 PEN) AUTO-INJECTOR KIT 40 MG/0.4ML SUBCUTANEOUS - Tier 2; PA; SP; QL ADALIMUMAB-ADB (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.4ML - Tier 2; PA; SP; QL ADALIMUMAB-ADB(CD/UC/HS STRT) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML - Tier 2; PA; SP; QL ADALIMUMAB-ADB(PS/UV STARTER) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML - Tier 2; PA; SP; QL	GUARDIAN CONNECT TRANSMITTER - Tier 2; PA; QL GUARDIAN LINK 3 TRANSMITTER - Tier 2; PA; QL

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Preferred Agents

ADALIMUMAB-FKJP (2 PEN) - Tier 2; PA; SP; QL
ADALIMUMAB-FKJP (2 SYRINGE) - Tier 2; PA; SP; QL
adv acne spot treatment (generic for CLEARASIL RAPID RESCUE DEEP) - Tier 1; QL
ANASPAZ (brand for hyoscyamine sulfate) - Tier 2; QL
antibiotic (generic for BACITRAYCIN PLUS) - Tier 1; QL
antifungal (tolnaftate) external cream 1 % (generic for TINACTIN) - Tier 1; QL
antifungal maximum strength (generic for FORMULA 3 THE TREATMENT) - Tier 1; QL
antifungal tolnaftate (generic for TINACTIN) - Tier 1; QL
arthritis pain relieving - Tier 1; QL
aspirin adults (generic for MEDI-FIRST ASPIRIN) - Tier 1; QL
aspirin childrens (generic for BAYER LOW DOSE) - Tier 1; QL
aspirin ec adult low dose (generic for BAYER ASPIRIN EC LOW DOSE) - Tier 1; QL
aspirin ec oral tablet 325 mg (generic for MEDI-FIRST ASPIRIN) - Tier 1; QL
aspirin ec oral tablet delayed release 325 mg (generic for BAYER ASPIRIN) - Tier 1; QL
aspirin ec oral tablet delayed release 81 mg (generic for BAYER ASPIRIN EC LOW DOSE) - Tier 1; QL
aspirin oral tablet 325 mg (generic for MEDI-FIRST ASPIRIN) - Tier 1; QL
aspirin oral tablet chewable 81 mg (generic for BAYER LOW DOSE) - Tier 1; QL
aspirin oral tablet delayed release 325 mg (generic for BAYER ASPIRIN) - Tier 1; QL

Non-Preferred Agents

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Preferred Agents

aspirin oral tablet delayed release 81 mg (generic for BAYER ASPIRIN EC LOW DOSE) - Tier 1; QL
ASPIRIN ORAL TABLET DELAYED RELEASE 81 MG (brand for aspirin) - Tier 2; QL
aspirin rectal suppository 300 mg - Tier 1
aspirin regimen (generic for BAYER ASPIRIN EC LOW DOSE) - Tier 1; QL
athletes foot (tolnaftate) external aerosol powder 1 % (generic for ODOR EATERS FOOT/SNEAKER SPRAY) - Tier 1; QL
athletes foot (tolnaftate) external cream 1 % (generic for TINACTIN) - Tier 1; QL
athletes foot powder spray external aerosol powder 1 % (generic for ODOR EATERS FOOT/SNEAKER SPRAY) - Tier 1; QL
athletes foot relief (generic for TINACTIN) - Tier 1; QL
bacitracin external (generic for BACITRAYCIN PLUS) - Tier 1; QL
bacitracin zinc external - Tier 1; QL
bacitracin zinc first aid - Tier 1; QL
bacitracin zinc-aloe - Tier 1; QL
BAYER ASPIRIN (brand for aspirin) - Tier 2; QL
BAYER LOW DOSE ORAL TABLET CHEWABLE (brand for aspirin) - Tier 2; QL
BENZAC AC WASH (brand for benzoyl peroxide wash) - Tier 2; QL
benzoyl peroxide external gel 2.5 % - Tier 1; QL
benzoyl peroxide external liquid (generic for MEDPURA BENZOYL PEROXIDE) - Tier 1; QL
benzoyl peroxide wash external liquid 5 % (generic for BENZAC AC WASH) - Tier 1; QL
bisacodyl ec (generic for EX-LAX ULTRA) - Tier 1; QL

Non-Preferred Agents

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Preferred Agents

bisacodyl laxative (generic for EX-LAX ULTRA) - Tier 1; QL
bisacodyl oral (generic for EX-LAX ULTRA) - Tier 1; QL
bisacodyl rectal (generic for THE MAGIC BULLET) - Tier 1; QL
bp wash external liquid 2.5 % (generic for PANOXYL) - Tier 1; QL
BREATHE COMFORT HUMIDIFIER (brand for breathe ease humidifier) - Tier 2; QL
BREATHE EASE HUMIDIFIER (brand for breathe ease humidifier) - Tier 2; QL
calamine external lotion - Tier 1; QL
capsaicin external cream (generic for DERMACINRX PENETRAL) - Tier 1; QL
capsaicin hp (generic for ZOSTRIX HP) - Tier 1; QL
capsaicin pain relief (generic for ZOSTRIX HP) - Tier 1; QL
capzix (generic for ZOSTRIX HP) - Tier 1; QL
CASTIVA WARMING - Tier 2; QL
CAYA - Tier 2; QL
childrens aspirin oral tablet chewable 81 mg (generic for BAYER LOW DOSE) - Tier 1; QL
c-lax laxative (generic for EX-LAX ULTRA) - Tier 1; QL
CLEARASIL RAPID RESCUE DEEP (brand for cvs acne control cleanser) - Tier 2; QL
clearskin (generic for CLEARSKIN) - Tier 1; QL
CONDOMS - Tier 2; QL
COOL MIST HUMIDIFER (brand for breathe ease humidifier) - Tier 2; QL
corn & callus remover (generic for COMPOUND W) - Tier 1; QL
corn and callus remover (generic for COMPOUND W) - Tier 1; QL

Non-Preferred Agents

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Preferred Agents

daily acne wash (generic for CLEARASIL RAPID RESCUE DEEP) - Tier 1; QL
DERMACINRX ATRIX ANTIBAC WASH (brand for cvs acne control cleanser) - Tier 2; QL
DERMACINRX ATRIX CLARIFY TONER (brand for cvs acne control cleanser) - Tier 2; QL
DERMACINRX PENETRAL (brand for capsaicin) - Tier 2; QL
DERMELEVE ADVANCED FORMULA - Tier 2; QL
DERMELEVE ANTI-ITCH SCALP (brand for aluminum acetate) - Tier 2
DEXCOM G6 TRANSMITTER - Tier 2; PA; QL
double antibiotic external ointment 500-10000 unit/gm (generic for POLYSPORIN) - Tier 1; QL
DUREX EXTRA SENSITIVE THIN (brand for true cover) - Tier 2; QL
DUREX TROPICAL (brand for true cover) - Tier 2; QL
enteric aspirin (generic for BAYER ASPIRIN) - Tier 1; QL
EX-LAX ULTRA (brand for bisacodyl) - Tier 2; QL
fast relief laxative (generic for THE MAGIC BULLET) - Tier 1; QL
FLEET BISACODYL - Tier 2; QL
folic acid oral tablet 1 mg - Tier 1; QL
folic acid oral tablet 400 mcg, 800 mcg - Tier 1
foot & sneaker (generic for ODOR EATERS FOOT/SNEAKER SPRAY) - Tier 1; QL
FORMULA 3 THE TREATMENT (brand for antifungal maximum strength) - Tier 2; QL
FORMULA 7 THE SOLUTION (brand for antifungal maximum strength) - Tier 2; QL
ft antibiotic - Tier 1; QL

Non-Preferred Agents

Tier 1: Generic; Tier 2: Brand; ^: Medical Office Attestation Needed if Prescribed by Behavioral Health Provider, Full Prior Authorization Needed if Prescribed by Non-Behavioral Health Provider; *: Available without PA for participating Behavioral Health Prescribers; AL: Limited to members of a certain age; DX2RX: Diagnosis Required; GE: Gender Limit; PA: Prior Auth Required; QL: Quantity Limit; SP: Specialty Medication; ST: Step Therapy

Preferred Agents

ft antifungal external cream 1 % (generic for TINACTIN) - Tier 1; QL
ft aspirin (generic for BAYER LOW DOSE) - Tier 1; QL
ft aspirin low dose (generic for BAYER ASPIRIN EC LOW DOSE) - Tier 1; QL
ft double antibiotic (generic for POLYSPORIN) - Tier 1; QL
ft enteric coated aspirin (generic for BAYER ASPIRIN) - Tier 1; QL
ft folic acid - Tier 1
ft gentle laxative (generic for THE MAGIC BULLET) - Tier 1; QL
ft laxative (generic for EX-LAX ULTRA) - Tier 1; QL
FUNGICURE (brand for antifungal maximum strength) - Tier 2; QL
fungi-guard (generic for TINACTIN) - Tier 1; QL
gentle laxative oral tablet delayed release (generic for EX-LAX ULTRA) - Tier 1; QL
gentle laxative rectal (generic for THE MAGIC BULLET) - Tier 1; QL
gentle laxative womens (generic for EX-LAX ULTRA) - Tier 1; QL
genuine aspirin (generic for MEDI-FIRST ASPIRIN) - Tier 1; QL
h-e-b aspirin (generic for BAYER ASPIRIN EC LOW DOSE) - Tier 1; QL
hydrocodone bit-homatrop mbr (generic for HYCODAN) - Tier 1; QL; AL
hydromet (generic for HYCODAN) - Tier 1; QL; AL
hyoscyamine sulfate er (generic for LEVBID) - Tier 1; QL
hyoscyamine sulfate oral (generic for ANASPAZ) - Tier 1; QL
hyoscyamine sulfate sublingual (generic for LEVSIN/SL) - Tier 1; QL
hyosyne - Tier 1; QL
jock itch max st (generic for ODOR EATERS FOOT/SNEAKER SPRAY) - Tier 1; QL

Non-Preferred Agents

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Preferred Agents

jock itch spray powder (generic for ODOR EATERS FOOT/SNEAKER SPRAY) - Tier 1; QL
laxative oral tablet delayed release 5 mg (generic for EX-LAX ULTRA) - Tier 1; QL
laxative rectal suppository 10 mg (generic for THE MAGIC BULLET) - Tier 1; QL
LEVBIID (brand for hyoscyamine sulfate er) - Tier 2; QL
liquid corn & callus rem (generic for COMPOUND W) - Tier 1; QL
liquid wart remover (generic for COMPOUND W) - Tier 1; QL
liquid wart remover max st (generic for COMPOUND W) - Tier 1; QL
magnesium oxide oral tablet 400 mg - Tier 1
magnesium oxide oral tablet 420 mg (generic for MAOX) - Tier 1
MAOX (brand for magnesium oxide) - Tier 2
medi-first aspirin (generic for MEDI-FIRST ASPIRIN) - Tier 1; QL
medique aspirin (generic for MEDI-FIRST ASPIRIN) - Tier 1; QL
MEDPURA BENZOYL PEROXIDE (brand for acne medication 10) - Tier 2; QL
MICOMITIN (brand for antifungal maximum strength) - Tier 2; QL
MICOTRIN AL (brand for antifungal maximum strength) - Tier 2; QL
mm aspirin (generic for BAYER ASPIRIN EC LOW DOSE) - Tier 1; QL
NEODOT THERMOMETER - Tier 2; QL
NEUTROGENA OIL-FREE ACNE WASH (brand for cvs acne control cleanser) - Tier 2; QL
NULEV (brand for hyoscyamine sulfate) - Tier 2; QL
OMNIFLEX DIAPHRAGM - Tier 2; QL; GE
ONELAX (brand for bisacodyl) - Tier 2; QL
OPILL - Tier 2; QL

Non-Preferred Agents

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Preferred Agents**Non-Preferred Agents**

OVACE PLUS WASH EXTERNAL LIQUID (brand for sodium sulfacetamide wash) - Tier 2; QL
OVACE WASH (brand for sodium sulfacetamide wash) - Tier 2; QL
PANOXYL (brand for bp wash) - Tier 2; QL
poly bacitracin (generic for POLYSPORIN) - Tier 1; QL
POLYSPORIN (brand for cvs poly bacitracin) - Tier 2; QL
scalp relief external liquid 3 % (generic for SCALPICIN) - Tier 1; QL
sodium sulfacetamide wash (generic for OVACE PLUS WASH) - Tier 1; QL
ST JOSEPH LOW DOSE (brand for aspirin) - Tier 2; QL
sulfacetamide sodium external (generic for OVACE PLUS WASH) - Tier 1; QL
sure result sr relief (generic for DERMACINRX PENETRAL) - Tier 1; QL
the magic bullet (generic for THE MAGIC BULLET) - Tier 1; QL
TINACTIN EXTERNAL CREAM (brand for antifungal (tolnaftate)) - Tier 2; QL
tinaspore (generic for FORMULA 3 THE TREATMENT) - Tier 1; QL
TM-TOLNAFTATE (brand for antifungal maximum strength) - Tier 2; QL
TM-TOLNAFTATE LR (brand for antifungal maximum strength) - Tier 2; QL
toe area treatment max str (generic for FORMULA 3 THE TREATMENT) - Tier 1; QL
TOLNAFI-AL (brand for antifungal maximum strength) - Tier 2; QL
tolnaftate antifungal external cream (generic for TINACTIN) - Tier 1; QL
tolnaftate external cream (generic for TINACTIN) - Tier 1; QL

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Preferred Agents	Non-Preferred Agents
<p><i>tolnaftate external powder (generic for LOTRIMIN AF) - Tier 1; QL</i> <i>TRITOLNACIDE C (brand for antifungal (tolnaftate)) - Tier 2; QL</i> <i>TRITOLNACIDE S (brand for antifungal maximum strength) - Tier 2; QL</i> <i>TRUE COVER (brand for true cover) - Tier 2; QL</i> <i>TRUE FOLIC ACID ORAL TABLET 1 MG - Tier 2; QL</i> <i>TRUE FOLIC ACID ORAL TABLET 400 MCG - Tier 2</i> <i>TYENNE SUBCUTANEOUS - Tier 2; PA; SP; QL</i> <i>VAPORIZER WARM STEAM - Tier 2; QL</i> <i>VAXELIS - Tier 2; QL</i> <i>wart remover external liquid 17 % (generic for COMPOUND W) - Tier 1; QL</i> <i>wart remover maximum strength external liquid (generic for COMPOUND W) - Tier 1; QL</i> <i>WIDE-SEAL DIAPHRAGM 60 - Tier 2; QL</i> <i>WIDE-SEAL DIAPHRAGM 65 - Tier 2; QL</i> <i>WIDE-SEAL DIAPHRAGM 70 - Tier 2; QL</i> <i>WIDE-SEAL DIAPHRAGM 75 - Tier 2; QL</i> <i>WIDE-SEAL DIAPHRAGM 80 - Tier 2; QL</i> <i>WIDE-SEAL DIAPHRAGM 85 - Tier 2; QL</i> <i>WIDE-SEAL DIAPHRAGM 90 - Tier 2; QL</i> <i>WIDE-SEAL DIAPHRAGM 95 - Tier 2; QL</i> <i>womans laxative (generic for EX-LAX ULTRA) - Tier 1; QL</i> <i>womens gentle laxative (generic for EX-LAX ULTRA) - Tier 1; QL</i> <i>womens laxative oral tablet delayed release 5 mg (generic for EX-LAX ULTRA) - Tier 1; QL</i> <i>ZOSTRIX HP (brand for capsaicin) - Tier 2; QL</i></p>	
Ophthalmic Agents	
Ophthalmic Agents, Other	
<p><i>atropine sulfate ophthalmic ointment - Tier 1</i></p>	

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Preferred Agents	Non-Preferred Agents
Ophthalmic Anti-allergy Agents	
<i>olopatadine hcl ophthalmic (generic for PATADAY) - Tier 1; QL</i> <i>PATADAY OPHTHALMIC SOLUTION 0.1 %, 0.2 % (brand for olopatadine hcl) - Tier 2; QL</i>	
Ophthalmic Intraocular Pressure Lowering Agents, Other	
PHOSPHOLINE IODIDE - Tier 2	
Ophthalmic Agents - Drugs to Treat Eye Conditions	
Ophthalmic Agents, Other - Miscellaneous Eye Drugs	
<i>altachlore (generic for ALTACHLORE) - Tier 1; QL</i> <i>altalube (generic for ALTALUBE) - Tier 1; QL</i> <i>artificial tears ophthalmic solution (generic for GENTEAL TEARS) - Tier 1; QL</i> <i>astringent eye drops (generic for VISINE-AC) - Tier 1; QL</i> <i>BIOLLE TEARS (brand for cvs lubricant eye drops (pf)) - Tier 2; QL</i> <i>BION TEARS PF (brand for cvs natural tears pf) - Tier 2; QL</i> <i>carboxymethylcellulose sodium ophthalmic solution (generic for ULTRA FRESH) - Tier 1; QL</i> <i>dry-eye relief nighttime (generic for ALTALUBE) - Tier 1; QL</i> <i>eye drops adv relief - Tier 1; QL</i> <i>eye drops advanced relief - Tier 1; QL</i> <i>eye drops long lasting (generic for SYSTANE) - Tier 1; QL</i>	

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Preferred Agents

eye drops ophthalmic solution 0.05 % (generic for VISINE RED EYE COMFORT) - Tier 1; QL
eye drops ophthalmic solution 0.05-0.1-1-1 % - Tier 1; QL
eye drops ophthalmic solution 0.05-0.25 % (generic for VISINE-AC) - Tier 1; QL
eye irritation relief drops ophthalmic solution 0.05-0.25 % (generic for VISINE-AC) - Tier 1; QL
eye lubricant (generic for ALTALUBE) - Tier 1; QL
eye lubricant nighttime (generic for ALTALUBE) - Tier 1; QL
EYES ALIVE (brand for cvs lubricant eye drops (pf)) - Tier 2; QL
for sty relief (generic for ALTALUBE) - Tier 1; QL
ft eye drops (generic for VISINE RED EYE COMFORT) - Tier 1; QL
ft lubricant eye drops (generic for BIOLLE TEARS) - Tier 1; QL
GENTEAL SEVERE - Tier 2; QL
GENTEAL TEARS MODERATE PF (brand for cvs natural tears pf) - Tier 2; QL
GENTEAL TEARS NIGHT-TIME (brand for cvs dry-eye relief nighttime) - Tier 2; QL
GENTEAL TEARS OPHTHALMIC SOLUTION 0.1-0.2-0.3 % (brand for artificial tears) - Tier 2; QL
GENTEAL TEARS PF (brand for cvs natural tears pf) - Tier 2; QL
GENTEAL TEARS SEVERE DAY/NIGHT - Tier 2; QL
HYPOTEARs (brand for cvs dry-eye relief nighttime) - Tier 2; QL
lubricant drops fast act (generic for SYSTANE) - Tier 1; QL
lubricant drops ophthalmic gel 0.25-0.3 % - Tier 1; QL
lubricant drops ophthalmic solution (generic for SYSTANE BALANCE) - Tier 1; QL
lubricant eye drops (pf) (generic for BIOLLE TEARS) - Tier 1; QL

Non-Preferred Agents

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Preferred Agents

lubricant eye drops (pf) ophthalmic solution 0.4-0.3 % (generic for SYSTANE HYDRATION PF) - Tier 1; QL
lubricant eye drops ophthalmic solution 0.4-0.3 % (generic for SYSTANE) - Tier 1; QL
lubricant eye drops ophthalmic solution 0.5 % (generic for ULTRA FRESH) - Tier 1; QL
lubricant eye drops ophthalmic solution 0.6 % (generic for SYSTANE BALANCE) - Tier 1; QL
lubricant eye drops pf (generic for BIOLLE TEARS) - Tier 1; QL
lubricant eye nighttime (generic for ALTALUBE) - Tier 1; QL
lubricant eye ophthalmic solution 0.4-0.3 % (generic for SYSTANE) - Tier 1; QL
lubricant eye pm (generic for ALTALUBE) - Tier 1; QL
lubricant pm (generic for ALTALUBE) - Tier 1; QL
lubricating eye drop (generic for BIOLLE TEARS) - Tier 1; QL
lubricating eye drops (generic for SYSTANE) - Tier 1; QL
lubricating eyelovernight (generic for ALTALUBE) - Tier 1; QL
lubricating plus eye drops (generic for BIOLLE TEARS) - Tier 1; QL
lubricating plus ophthalmic solution 0.5 % (generic for BIOLLE TEARS) - Tier 1; QL
lubricating plus pf (generic for BIOLLE TEARS) - Tier 1; QL
lubricating tears ophthalmic solution 0.4-0.3 % (generic for SYSTANE) - Tier 1; QL
lubrifresh p.m. (generic for ALTALUBE) - Tier 1; QL
MURO 128 OPHTHALMIC OINTMENT (brand for cvs sod chloride hypertonicity) - Tier 2; QL
MURO 128 OPHTHALMIC SOLUTION 5 % (brand for cvs sodium chloride) - Tier 2; QL

Non-Preferred Agents

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Preferred Agents

natural tears pf (generic for BION TEARS PF) - Tier 1; QL
nighttime dry-eye relief (generic for ALTALUBE) - Tier 1; QL
nighttime relief lub eye (generic for ALTALUBE) - Tier 1; QL
polyvinyl alcohol ophthalmic - Tier 1; QL
pure & gentle lubricant - Tier 1; QL
REFRESH LACRI-LUBE (brand for cvs dry-eye relief nighttime) - Tier 2; QL
REFRESH PLUS (brand for cvs lubricant eye drops (pf)) - Tier 2; QL
REFRESH TEARS (brand for carboxymethylcellulose sodium) - Tier 2; QL
relief eye drops (generic for VISINE-AC) - Tier 1; QL
restore plus lubricant eye (generic for BIOLLE TEARS) - Tier 1; QL
restore pm (generic for ALTALUBE) - Tier 1; QL
SENTIA (brand for cvs lubricant drops) - Tier 2; QL
sod chloride hypertonicity (generic for ALTACHLORE) - Tier 1; QL
sodium chloride (generic for ALTACHLORE) - Tier 1; QL
sodium chloride (hypertonic) (generic for ALTACHLORE) - Tier 1; QL
SYSTANE (brand for cvs lubricant drops fast act) - Tier 2; QL
SYSTANE BALANCE (brand for cvs lubricant drops) - Tier 2; QL
SYSTANE COMPLETE (brand for cvs lubricant drops) - Tier 2; QL
SYSTANE CONTACTS (brand for artificial tears) - Tier 2; QL
SYSTANE HYDRATION PF (brand for cvs lubricant eye drops (pf)) - Tier 2; QL
SYSTANE NIGHTTIME (brand for cvs dry-eye relief nighttime) - Tier 2; QL
SYSTANE PRESERVATIVE FREE (brand for cvs lubricant eye drops (pf)) - Tier 2; QL
SYSTANE ULTRA (brand for cvs lubricant drops fast act) - Tier 2; QL

Non-Preferred Agents

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Preferred Agents	Non-Preferred Agents
<p><i>SYSTANE ULTRA PF (brand for cvs lubricant eye drops (pf)) - Tier 2; QL</i></p> <p><i>ultra fresh (generic for ULTRA FRESH) - Tier 1; QL</i></p> <p><i>ultra fresh pm (generic for ALTALUBE) - Tier 1; QL</i></p> <p><i>ultra lubricant drop (generic for SYSTANE) - Tier 1; QL</i></p> <p><i>ultra lubricating eye drops (generic for SYSTANE) - Tier 1; QL</i></p> <p><i>ultra lubricating eye drops pf (generic for SYSTANE HYDRATION PF) - Tier 1; QL</i></p>	
<p>Ophthalmic Anti-allergy Agents - Allergy, Infection and Inflammation Drugs</p>	
<p><i>NAPHCON-A (brand for allergy eye) - Tier 2; QL</i></p> <p><i>VASOCLEAR-A - Tier 2; QL</i></p> <p><i>VISINE (brand for allergy eye) - Tier 2; QL</i></p>	
<p>Ophthalmic Anti-Inflammatories - Allergy, Infection and Inflammation Drugs</p>	
<p><i>ALAWAY (brand for cvs allergy eye drops) - Tier 2; QL</i></p> <p><i>ALAWAY CHILDRENS ALLERGY (brand for cvs allergy eye drops) - Tier 2; QL</i></p> <p><i>allergy eye drops (generic for ALAWAY) - Tier 1; QL</i></p> <p><i>eye itch relief ophthalmic solution 0.035 % (generic for ALAWAY) - Tier 1; QL</i></p> <p><i>ketotifen fumarate ophthalmic (generic for ALAWAY) - Tier 1; QL</i></p> <p><i>ZADITOR (brand for cvs allergy eye drops) - Tier 2; QL</i></p>	

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Preferred Agents**Non-Preferred Agents****Otic Agents - Drugs to Treat Ear Conditions****Otic Agents - Drugs for the Ear**

CLEARCANAL EARWAX SOFTENER (brand for cvs ear drops) - Tier 2; QL

CLINERE EARWAX REMOVAL KIT OTIC SOLUTION (brand for cvs ear drops) - Tier 2; QL

ear drops otic solution 6.5 % (generic for CLEARCANAL EARWAX SOFTENER) - Tier 1; QL

ear wax kit (generic for CLEARCANAL EARWAX SOFTENER) - Tier 1; QL

ear wax removal (generic for CLEARCANAL EARWAX SOFTENER) - Tier 1; QL

ear wax removal system (generic for CLEARCANAL EARWAX SOFTENER) - Tier 1; QL

earwax removal (generic for CLEARCANAL EARWAX SOFTENER) - Tier 1; QL

earwax removal drops (generic for CLEARCANAL EARWAX SOFTENER) - Tier 1; QL

earwax removal kit otic solution 6.5 % (generic for CLEARCANAL EARWAX SOFTENER) - Tier 1; QL

ft earwax removal (generic for CLEARCANAL EARWAX SOFTENER) - Tier 1; QL

ft earwax removal kit (generic for CLEARCANAL EARWAX SOFTENER) - Tier 1; QL

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Preferred Agents**Non-Preferred Agents**

Respiratory Tract/Pulmonary Agents

Antihistamines

all day allergy oral tablet 10 mg (generic for KLS ALLER-TEC) - Tier 1; QL
allergy (cetirizine) (generic for KLS ALLER-TEC) - Tier 1; QL
allergy 24hour indoor/outdoor (generic for KLS ALLER-TEC) - Tier 1; QL
allergy childrens oral liquid (generic for RA DIPHEDRYL ALLERGY) - Tier 1; QL
allergy medication (generic for BANOPHEN) - Tier 1; QL
allergy medicine (generic for BANOPHEN) - Tier 1; QL
allergy oral capsule 25 mg (generic for BANOPHEN) - Tier 1; QL
allergy oral liquid 12.5 mg/5ml (generic for RA DIPHEDRYL ALLERGY) - Tier 1; QL
allergy oral tablet 25 mg (generic for BANOPHEN) - Tier 1; QL
allergy relief (cetirizine) oral tablet 10 mg (generic for KLS ALLER-TEC) - Tier 1; QL
allergy relief adult (generic for RA DIPHEDRYL ALLERGY) - Tier 1; QL
allergy relief cetirizine (generic for KLS ALLER-TEC) - Tier 1; QL
allergy relief childrens oral liquid 12.5 mg/5ml (generic for RA DIPHEDRYL ALLERGY) - Tier 1; QL
allergy relief childrens oral tablet chewable 12.5 mg (generic for BENADRYL ALLERGY CHILDRENS) - Tier 1; QL
allergy relief max st (generic for RA DIPHEDRYL ALLERGY) - Tier 1; QL
allergy relief oral capsule 25 mg (generic for BANOPHEN) - Tier 1; QL
allergy relief oral liquid 25 mg/10ml (generic for RA DIPHEDRYL ALLERGY) - Tier 1; QL

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Preferred Agents

allergy relief oral tablet 25 mg (generic for BANOPHEN) - Tier 1; QL
allergy relief oral tablet chewable 12.5 mg (generic for BENADRYL ALLERGY CHILDRENS) - Tier 1; QL
allergy relief(cetirizine) (generic for KLS ALLER-TEC) - Tier 1; QL
allergy relief/indoor/outdoor oral tablet 10 mg (generic for KLS ALLER-TEC) - Tier 1; QL
aller-tec (generic for KLS ALLER-TEC) - Tier 1; QL
anti-hist allergy (generic for BANOPHEN) - Tier 1; QL
banophen oral capsule 25 mg (generic for BANOPHEN) - Tier 1; QL
banophen oral tablet (generic for BANOPHEN) - Tier 1; QL
BENADRYL ALLERGY CHILDRENS ORAL LIQUID (brand for allergy childrens) - Tier 2; QL
BENADRYL ALLERGY CHILDRENS ORAL TABLET CHEWABLE (brand for cvs allergy relief childrens) - Tier 2; QL
BENADRYL ALLERGY ORAL TABLET (brand for allergy relief) - Tier 2; QL
BENADRYL ALLERGY ULTRATABS (brand for allergy relief) - Tier 2; QL
cetirizine allergy relief (generic for KLS ALLER-TEC) - Tier 1; QL
cetirizine hcl oral tablet (generic for KLS ALLER-TEC) - Tier 1; QL
cetirizine hcl solution 5 mg/5ml oral (rx) (generic for KLS ALLER-TEC CHILDRENS) - Tier 1; QL
childrens allergy oral liquid 12.5 mg/5ml (generic for RA DIPHEDRYL ALLERGY) - Tier 1; QL
complete allergy (generic for BANOPHEN) - Tier 1; QL
complete allergy medicine (generic for BANOPHEN) - Tier 1; QL
complete allergy medicine oral capsule (generic for BANOPHEN) - Tier 1; QL

Non-Preferred Agents

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Preferred Agents

complete allergy relief (generic for BANOPHEN) - Tier 1; QL
CURELIEF (brand for allergy childrens) - Tier 2; QL
DAYHIST ALLERGY 12 HOUR RELIEF - Tier 2; QL
diphenhydramine hcl oral capsule (generic for BANOPHEN) - Tier 1; QL
diphenhydramine hcl oral elixir - Tier 1; QL
diphenhydramine hcl oral liquid (generic for RA DIPHEDRYL ALLERGY) - Tier 1; QL
diphenhydramine hcl oral tablet (generic for BANOPHEN) - Tier 1; QL
ft all day allergy (generic for KLS ALLER-TEC) - Tier 1; QL
ft all day allergy 24 hour (generic for KLS ALLER-TEC) - Tier 1; QL
ft allergy relief cetirizine (generic for KLS ALLER-TEC) - Tier 1; QL
ft allergy relief childrens oral liquid (generic for RA DIPHEDRYL ALLERGY) - Tier 1; QL
ft allergy relief oral capsule (generic for BANOPHEN) - Tier 1; QL
ft allergy relief oral tablet 25 mg (generic for BANOPHEN) - Tier 1; QL
geri-dryl (generic for BANOPHEN) - Tier 1; QL
h-e-b childrens allergy (generic for RA DIPHEDRYL ALLERGY) - Tier 1; QL
indoor/outdoor allergy rlf (generic for KLS ALLER-TEC) - Tier 1; QL
liquid allergy relief (generic for RA DIPHEDRYL ALLERGY) - Tier 1; QL
MAXALLERGY KIDS (brand for allergy childrens) - Tier 2; QL
m-dryl (generic for RA DIPHEDRYL ALLERGY) - Tier 1; QL

Non-Preferred Agents

Tier 1: Generic; Tier 2: Brand; ^: Medical Office Attestation Needed if Prescribed by Behavioral Health Provider, Full Prior Authorization Needed if Prescribed by Non-Behavioral Health Provider; *: Available without PA for participating Behavioral Health Prescribers; AL: Limited to members of a certain age; DX2RX: Diagnosis Required; GE: Gender Limit; PA: Prior Auth Required; QL: Quantity Limit; SP: Specialty Medication; ST: Step Therapy

Preferred Agents	Non-Preferred Agents
<p>MM ALLER-BEN (brand for allergy relief) - Tier 2; QL NARAMIN (brand for allergy childrens) - Tier 2; QL pharbedryl (generic for BANOPHEN) - Tier 1; QL siladryl allergy (generic for RA DIPHEDRYL ALLERGY) - Tier 1; QL total allergy (generic for BANOPHEN) - Tier 1; QL total allergy medicine (generic for RA DIPHEDRYL ALLERGY) - Tier 1; QL ZYRTEC ALLERGY ORAL TABLET (brand for all day allergy) - Tier 2; QL</p>	
Phosphodiesterase Inhibitors, Airways Disease	
<p>theophylline er oral tablet extended release 12 hour 100 mg, 200 mg - Tier 1; QL</p>	
Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions	
<p>4-WAY FAST ACTING (brand for cvs nasal spray) - Tier 2; QL 4-WAY MENTHOL NASAL SOLUTION 1 % (brand for cvs nasal spray) - Tier 2; QL AFRIN SALINE NASAL MIST (brand for altamist spray) - Tier 2; QL altamist spray (generic for AFRIN SALINE NASAL MIST) - Tier 1; QL altarussin (generic for TUSNEL-EX) - Tier 1; QL; AL AYR (brand for altamist spray) - Tier 2; QL AYR NASAL MIST ALLERGY/SINUS - Tier 2; QL AYR SALINE NASAL DROPS - Tier 2; QL BABY AYR SALINE (brand for altamist spray) - Tier 2; QL BUCKLEYS CHEST CONGESTION (brand for altarussin) - Tier 2; QL; AL chest congestion relief oral liquid (generic for TUSNEL-EX) - Tier 1; QL; AL</p>	

Tier 1: Generic; Tier 2: Brand; ^: Medical Office Attestation Needed if Prescribed by Behavioral Health Provider, Full Prior Authorization Needed if Prescribed by Non-Behavioral Health Provider; *: Available without PA for participating Behavioral Health Prescribers; AL: Limited to members of a certain age; DX2RX: Diagnosis Required; GE: Gender Limit; PA: Prior Auth Required; QL: Quantity Limit; SP: Specialty Medication; ST: Step Therapy

Preferred Agents

chest congestion relief oral tablet (generic for XPECT) - Tier 1
CORICIDIN HBP COUGH/COLD (brand for cough & cold) - Tier 2; AL
cough & cold (generic for CORICIDIN HBP COUGH/COLD) - Tier 1;
AL
cough & cold hbp (generic for CORICIDIN HBP COUGH/COLD) - Tier
1; AL
cough relief oral syrup 15 mg/5ml (generic for WAL-TUSSIN COUGH
LONG ACTING) - Tier 1; AL
cough/cold hbp (generic for CORICIDIN HBP COUGH/COLD) - Tier 1;
AL
deep sea nasal spray (generic for AFRIN SALINE NASAL MIST) - Tier
1; QL
ed bron gp - Tier 1; AL
ephrine nose drops (generic for 4-WAY FAST ACTING) - Tier 1; QL
ft chest congestion relief (generic for XPECT) - Tier 1
ft mucus relief 12hr oral tablet extended release 12 hour 1200 mg
(generic for EQ MUCUS ER) - Tier 1; QL; AL
ft nasal decongestant pe (generic for SUDAFED PE SINUS
CONGESTION) - Tier 1
ft tussin adult (generic for TUSNEL-EX) - Tier 1; QL; AL
geri-tussin oral liquid (generic for TUSNEL-EX) - Tier 1; QL; AL
guaifenesin er oral tablet extended release 12 hour 1200 mg (generic
for EQ MUCUS ER) - Tier 1; QL; AL
guaifenesin oral liquid (generic for TUSNEL-EX) - Tier 1; QL; AL
guaifenesin oral tablet 400 mg (generic for XPECT) - Tier 1
MAX TUSSIN MUCUS & CHEST CONG (brand for altarussin) - Tier 2;
QL; AL
maxi-tuss pe max - Tier 1; AL

Non-Preferred Agents

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Preferred Agents

Non-Preferred Agents

medifin 400 (generic for XPECT) - Tier 1
medifin mucus relief child (generic for TUSNEL-EX) - Tier 1; QL; AL
MUCINEX FAST-MAX CHEST CONG MS (brand for altarusin) - Tier 2; QL; AL
MUCINEX MAXIMUM STRENGTH (brand for cvs mucus extended release) - Tier 2; QL; AL
mucus & chest congestion (generic for TUSNEL-EX) - Tier 1; QL; AL
mucus er maximum str (generic for EQ MUCUS ER) - Tier 1; QL; AL
mucus er oral tablet extended release 12 hour 1200 mg (generic for EQ MUCUS ER) - Tier 1; QL; AL
mucus extended release oral tablet extended release 12 hour 1200 mg (generic for EQ MUCUS ER) - Tier 1; QL; AL
mucus relief 12 hour max st (generic for EQ MUCUS ER) - Tier 1; QL; AL
mucus relief chest congestion oral liquid (generic for TUSNEL-EX) - Tier 1; QL; AL
mucus relief chest oral tablet 400 mg (generic for XPECT) - Tier 1
mucus relief childrens oral liquid 100 mg/5ml (generic for TUSNEL-EX) - Tier 1; QL; AL
mucus relief er (generic for EQ MUCUS ER) - Tier 1; QL; AL
mucus relief er oral tablet extended release 12 hour 1200 mg (generic for EQ MUCUS ER) - Tier 1; QL; AL
mucus relief max st (generic for EQ MUCUS ER) - Tier 1; QL; AL
mucus relief max strength oral tablet extended release 12 hour 1200 mg (generic for EQ MUCUS ER) - Tier 1; QL; AL
mucus relief oral tablet (generic for XPECT) - Tier 1
mucus+chest congestion (generic for TUSNEL-EX) - Tier 1; QL; AL

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Preferred Agents

mucus-er oral tablet extended release 12 hour 1200 mg (generic for EQ MUCUS ER) - Tier 1; QL; AL
nasal decongestant pe max st (generic for SUDAFED PE SINUS CONGESTION) - Tier 1
nasal decongestant pe oral tablet 10 mg (generic for SUDAFED PE SINUS CONGESTION) - Tier 1
nasal four (generic for 4-WAY FAST ACTING) - Tier 1; QL
nasal four spray (generic for 4-WAY FAST ACTING) - Tier 1; QL
NASAL MOIST NASAL SOLUTION (brand for altamist spray) - Tier 2; QL
nasal moisturizing spray (generic for AFRIN SALINE NASAL MIST) - Tier 1; QL
nasal spray fast acting (generic for 4-WAY FAST ACTING) - Tier 1; QL
nasal spray nasal solution 1 % (generic for 4-WAY FAST ACTING) - Tier 1; QL
nasal spray saline (generic for AFRIN SALINE NASAL MIST) - Tier 1; QL
NEO-SYNEPHRINE COLD/ALLRG MILD - Tier 2; QL
NEO-SYNEPHRINE COLD/ALLRGY EXT (brand for cvs nasal spray) - Tier 2; QL
NEO-SYNEPHRINE COLD/ALLRGY REG - Tier 2; QL
non-pseudo sinus decongestant (generic for SUDAFED PE SINUS CONGESTION) - Tier 1
nose drops extstrength (generic for 4-WAY FAST ACTING) - Tier 1; QL
OCEAN FOR KIDS (brand for altamist spray) - Tier 2; QL
OCEAN NASAL SPRAY (brand for altamist spray) - Tier 2; QL

Non-Preferred Agents

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Preferred Agents**Non-Preferred Agents**

pharbinex (generic for XPECT) - Tier 1
phenylephrine hcl oral (generic for SUDAFED PE SINUS CONGESTION) - Tier 1
pseudoephedrine-bromphen-dm - Tier 1; QL; AL
refenesen 400 (generic for XPECT) - Tier 1
 ROBITUSSIN CHILD COUGH/COLD LA - Tier 2; AL
 ROBITUSSIN CHILDRENS COUGH LA - Tier 2; AL
 ROBITUSSIN NIGHTTIME COUGH - Tier 2; AL
saline mist spray (generic for AFRIN SALINE NASAL MIST) - Tier 1; QL
saline nasal spray (generic for AFRIN SALINE NASAL MIST) - Tier 1; QL
sb mucus relief (generic for XPECT) - Tier 1
siltussin sa (generic for TUSNEL-EX) - Tier 1; QL; AL
sinus pe decongestant (generic for SUDAFED PE SINUS CONGESTION) - Tier 1
sinus relief extra strength (generic for 4-WAY FAST ACTING) - Tier 1; QL
sinus/congestion relief pe (generic for SUDAFED PE SINUS CONGESTION) - Tier 1
SUDAFED PE CONGESTION ORAL TABLET 10 MG (brand for cvs sinus pe decongestant) - Tier 2
SUDAFED PE SINUS CONGESTION (brand for cvs sinus pe decongestant) - Tier 2
tab tussin (generic for XPECT) - Tier 1
TRUE NASAL MOISTURIZING (brand for altamist spray) - Tier 2; QL
tusnel-ex (generic for TUSNEL-EX) - Tier 1; QL; AL
tussin adult chest congest (generic for TUSNEL-EX) - Tier 1; QL; AL

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Preferred Agents**Non-Preferred Agents**

tussin chest congestion oral liquid 100 mg/5ml (generic for TUSNEL-EX) - Tier 1; QL; AL

tussin cough long acting (generic for WAL-TUSSIN COUGH LONG ACTING) - Tier 1; AL

tussin cough oral syrup (generic for WAL-TUSSIN COUGH LONG ACTING) - Tier 1; AL

tussin expectorant adult (generic for TUSNEL-EX) - Tier 1; QL; AL

tussin maximum strength oral syrup 15 mg/5ml (generic for WAL-TUSSIN COUGH LONG ACTING) - Tier 1; AL

tussin mucus & chest cong (generic for TUSNEL-EX) - Tier 1; QL; AL

tussin mucus & chest congest (generic for TUSNEL-EX) - Tier 1; QL; AL

tussin mucus/chest congest (generic for TUSNEL-EX) - Tier 1; QL; AL

tussin mucus/congestion (generic for TUSNEL-EX) - Tier 1; QL; AL

tussin mucus+chest congest (generic for TUSNEL-EX) - Tier 1; QL; AL

tussin mucus+chest congestion (generic for TUSNEL-EX) - Tier 1; QL; AL

tussin oral liquid 100 mg/5ml (generic for TUSNEL-EX) - Tier 1; QL; AL

XPECT (brand for chest congestion relief) - Tier 2

Antihistamines - Allergy Drugs

12 hour allergy-d (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL

all day allergy d (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL

all day allergy-d oral tablet extended release 12 hour 5-120 mg (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL

allergy relief d oral tablet extended release 12 hour 5-120 mg (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL

allergy relief nasal decong oral tablet extended release 12 hour (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL

allergy relief oral tablet extended release 12 hour 5-120 mg (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL

allergy relief/nasal decong oral tablet extended release 12 hour (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL

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Preferred Agents**Non-Preferred Agents**

allergy relief-d oral tablet extended release 12 hour 5-120 mg (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL
aller-tec d (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL
cetiri-d (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL
cetirizine-pseudoephedrine er (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL
desgen dm oral liquid (generic for DESGEN DM) - Tier 1; AL
ED A-HIST ORAL LIQUID (brand for nohist-lq) - Tier 2; QL; AL
ft all day allergy-d (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL
ft tussin cf adult (generic for DESGEN DM) - Tier 1; AL
nohist-lq (generic for ED A-HIST) - Tier 1; QL; AL
ROBAFEN CF MULTI-SYMPTOM COLD (brand for ft tussin cf adult) - Tier 2; AL
ROBITUSSIN PEAK COLD MULTI-SYM (brand for ft tussin cf adult) - Tier 2; AL
tussin cf oral liquid 5-10-100 mg/5ml (generic for DESGEN DM) - Tier 1; AL
tussin multi-symptom cold cf (generic for DESGEN DM) - Tier 1; AL
ZYRTEC-D ALLERGY & CONGESTION (brand for 12 hour allergy-d) - Tier 2; QL; AL
ZYRTEC-D ALLERGY & SINUS (brand for 12 hour allergy-d) - Tier 2; QL; AL

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Preferred Agents

Non-Preferred Agents

Antihistamines - Drugs to Treat Allergies

12hr allergy relief (generic for ALLEGRA ALLERGY) - Tier 1; QL
 24hr allergy relief (generic for KLS ALLER-FEX) - Tier 1; QL
 all day allergy relief oral tablet 10 mg (generic for KLS ALLERCLEAR) - Tier 1; QL
 ALLEGRA ALLERGY (brand for 12hr allergy relief) - Tier 2; QL
 ALLEGRA HIVES 24HR (brand for 24hr allergy relief) - Tier 2; QL
 allerclear (generic for KLS ALLERCLEAR) - Tier 1; QL
 aller-ease oral tablet 180 mg (generic for KLS ALLER-FEX) - Tier 1; QL
 aller-fex (generic for KLS ALLER-FEX) - Tier 1; QL
 allerg rel child (lorat) (generic for CLARITIN ALLERGY CHILDRENS) - Tier 1; QL
 allerg relief child (lorat) (generic for CLARITIN ALLERGY CHILDRENS) - Tier 1; QL
 allergy 24-hr (generic for KLS ALLER-FEX) - Tier 1; QL
 allergy childrens oral solution (generic for CLARITIN ALLERGY CHILDRENS) - Tier 1; QL
 allergy rel child (loratadine) (generic for CLARITIN ALLERGY CHILDRENS) - Tier 1; QL
 allergy relief (loratadine) oral tablet (generic for KLS ALLERCLEAR) - Tier 1; QL
 allergy relief child (generic for CLARITIN ALLERGY CHILDRENS) - Tier 1; QL
 allergy relief childrens oral solution 5 mg/5ml (generic for CLARITIN ALLERGY CHILDRENS) - Tier 1; QL
 allergy relief oral tablet 10 mg (generic for KLS ALLERCLEAR) - Tier 1; QL

Tier 1: Generic; Tier 2: Brand; ^: Medical Office Attestation Needed if Prescribed by Behavioral Health Provider, Full Prior Authorization Needed if Prescribed by Non-Behavioral Health Provider; *: Available without PA for participating Behavioral Health Prescribers; AL: Limited to members of a certain age; DX2RX: Diagnosis Required; GE: Gender Limit; PA: Prior Auth Required; QL: Quantity Limit; SP: Specialty Medication; ST: Step Therapy

Preferred Agents**Non-Preferred Agents**

allergy relief oral tablet 180 mg (generic for KLS ALLER-FEX) - Tier 1; QL

allergy relief oral tablet 60 mg (generic for ALLEGRA ALLERGY) - Tier 1; QL

allergy relief oral tablet dispersible 10 mg (generic for CLARITIN REDITABS) - Tier 1; QL

allergy relief oral tablet extended release 12 mg (generic for CHLOR-TRIMETON ALLERGY) - Tier 1; QL

allergy relief indoor/outdoor oral tablet 180 mg (generic for KLS ALLER-FEX) - Tier 1; QL

childrens loratadine (generic for CLARITIN ALLERGY CHILDRENS) - Tier 1; QL

chlorpheniramine maleate er (generic for CHLOR-TRIMETON ALLERGY) - Tier 1; QL

CHLOR-TRIMETON ALLERGY (brand for chlorpheniramine maleate er) - Tier 2; QL

CLARITIN ALLERGY CHILDRENS (brand for allergy childrens) - Tier 2; QL

CLARITIN ORAL TABLET (brand for allergy relief) - Tier 2; QL

CLARITIN REDITABS ORAL TABLET DISPERSIBLE 10 MG (brand for cvs allergy relief) - Tier 2; QL

ed chlorped jr (generic for DIABETIC TUSSIN ALLERGY) - Tier 1; QL

loratadine (generic for KLS ALLERCLEAR) - Tier 1; QL

fexofenadine hcl (generic for ALLEGRA ALLERGY) - Tier 1; QL

fexofenadine hcl oral (generic for ALLEGRA ALLERGY) - Tier 1; QL

ft all day allergy relief (generic for KLS ALLERCLEAR) - Tier 1; QL

ft allergy childrens (generic for CLARITIN ALLERGY CHILDRENS) - Tier 1; QL

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Preferred Agents**Non-Preferred Agents**

ft allergy relief 12 hour (generic for ALLEGRA ALLERGY) - Tier 1; QL
ft allergy relief 24 hour (generic for KLS ALLER-FEX) - Tier 1; QL
ft allergy relief loratadine (generic for KLS ALLERCLEAR) - Tier 1; QL
ft allergy relief oral tablet 10 mg (generic for KLS ALLERCLEAR) - Tier 1; QL
ft allergy relief oral tablet 180 mg (generic for KLS ALLER-FEX) - Tier 1; QL
loradamed (generic for KLS ALLERCLEAR) - Tier 1; QL
loratadine allergy relief oral tablet 10 mg (generic for KLS ALLERCLEAR) - Tier 1; QL
loratadine allergy relief oral tablet dispersible 10 mg (generic for CLARITIN REDITABS) - Tier 1; QL
loratadine childrens oral solution (generic for CLARITIN ALLERGY CHILDRENS) - Tier 1; QL
loratadine oral solution 5 mg/5ml (generic for CLARITIN ALLERGY CHILDRENS) - Tier 1; QL
loratadine oral tablet 10 mg (generic for KLS ALLERCLEAR) - Tier 1; QL
loratadine oral tablet dispersible 10 mg (generic for CLARITIN REDITABS) - Tier 1; QL
mm allergy relief 24 hour (generic for KLS ALLER-FEX) - Tier 1; QL
TRIAMINIC ALLERCHEWS (brand for cvs allergy relief) - Tier 2; QL

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Preferred Agents

Non-Preferred Agents

Anti-Inflammatories, Inhaled Corticosteroids - Asthma/Lung
Drugs

24 hour nasal allergy (generic for NASACORT ALLERGY 24HR) - Tier 1; QL
allergy spray 24 hour nasal aerosol (generic for NASACORT ALLERGY 24HR) - Tier 1; QL
ft 24 hour nasal allergy (generic for NASACORT ALLERGY 24HR) - Tier 1; QL
NASACORT ALLERGY 24HR (brand for allergy spray 24 hour) - Tier 2; QL
nasal allergy 24 hour (generic for NASACORT ALLERGY 24HR) - Tier 1; QL
nasal allergy nasal aerosol 55 mcg/lact (generic for NASACORT ALLERGY 24HR) - Tier 1; QL
nasal allergy spray (generic for NASACORT ALLERGY 24HR) - Tier 1; QL
triamcinolone acetonide nasal (generic for NASACORT ALLERGY 24HR) - Tier 1; QL

Mast Cell Stabilizers - Drugs for the Lungs

cromolyn sodium nasal (generic for NASALCROM) - Tier 1; QL
NASALCROM (brand for cromolyn sodium) - Tier 2; QL

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Preferred Agents

Non-Preferred Agents

Respiratory Tract Agents, Other - Asthma/Lung Drugs

12 hour decongestant nasal (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
 12 hour decongestant oral (generic for SUDAFED SINUS CONGESTION 12HR) - Tier 1
 12 hour nasal decongestant (generic for SUDAFED SINUS CONGESTION 12HR) - Tier 1
 12 hour nasal decongestant nasal (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
 12 hour nasal decongestant oral (generic for SUDAFED SINUS CONGESTION 12HR) - Tier 1
 12 hour nasal relief spray (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
 12 hour nasal spray (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
 ADVIL COLD/SINUS (brand for cold & sinus) - Tier 2; AL
 AFRIN NODRIP ORIGINAL (brand for 12 hour decongestant) - Tier 2; QL
 allerclear d-12hr (generic for KLS ALLERCLEAR D-12HR) - Tier 1; QL; AL
 allerclear d-24hr (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL
 allergy & congestion oral tablet extended release 24 hour 10-240 mg (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL
 allergy & congestion relief (generic for KLS ALLERCLEAR D-12HR) - Tier 1; QL; AL
 allergy nasal mist no drip (generic for GILTUSS SEVERE SINUS) - Tier 1; QL

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Preferred Agents

allergy relief d-12 (generic for KLS ALLERCLEAR D-12HR) - Tier 1; QL; AL
allergy relief d-24 (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL
allergy relief nasal decong oral tablet extended release 24 hour (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL
allergy relief/nasal decong (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL
allergy relief/nasal decongest oral tablet extended release 24 hour (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL
allergy relief-d oral tablet extended release 12 hour 5-120 mg (generic for KLS ALLERCLEAR D-12HR) - Tier 1; QL; AL
allergy relief-d oral tablet extended release 24 hour 10-240 mg (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL
allergy relief-d12 (generic for KLS ALLERCLEAR D-12HR) - Tier 1; QL; AL
allergy/congestion relief (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL
altarussin dm (generic for ROBAFEN DM COUGH CLEAR) - Tier 1; QL; AL
altarussin-pe - Tier 1; AL
anefrin spray (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
APRODINE (brand for cold & allergy d max strength) - Tier 2; AL
benzonatate oral capsule 100 mg, 200 mg - Tier 1; QL; AL
chest congest/cough child (generic for DELSYM CGH/CHEST CONG DM CHILD) - Tier 1
chest congestion relief dm oral syrup (generic for ROBAFEN DM COUGH CLEAR) - Tier 1; QL; AL

Non-Preferred Agents

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Preferred Agents

childrens cold & allergy - Tier 1; AL
childrens cough (generic for DELSYM CGH/CHEST CONG DM CHILD) - Tier 1
childrens mucus relief cough (generic for DELSYM CGH/CHEST CONG DM CHILD) - Tier 1
CLARITIN-D 12 HOUR (brand for allergy relief d-12) - Tier 2; QL; AL
CLARITIN-D 24 HOUR (brand for allergy relief d-24) - Tier 2; QL; AL
cold & allergy - Tier 1; AL
cold & allergy childrens oral elixir 1-15 mg/5ml - Tier 1; AL
cold & allergy d max strength (generic for APRODINE) - Tier 1; AL
cold & cough childrens oral liquid 1-5-2.5 mg/5ml, 2.5-1-5 mg/5ml (generic for DIMAPHEN DM COLD/COUGH) - Tier 1; QL; AL
cold & sinus (generic for ADVIL COLD/SINUS) - Tier 1; AL
cold & sinus relief oral tablet 30-200 mg (generic for ADVIL COLD/SINUS) - Tier 1; AL
cold/cough (generic for DIMAPHEN DM COLD/COUGH) - Tier 1; QL; AL
cold/cough childrens (generic for DIMAPHEN DM COLD/COUGH) - Tier 1; QL; AL
cold/cough dm childrens oral liquid 2.5-1-5 mg/5ml (generic for DIMAPHEN DM COLD/COUGH) - Tier 1; QL; AL
cold/cough dm oral liquid 2.5-1-5 mg/5ml (generic for DIMAPHEN DM COLD/COUGH) - Tier 1; QL; AL
cough & chest congestion (generic for DELSYM CGH/CHEST CONG DM CHILD) - Tier 1
cough childrens (generic for DELSYM CGH/CHEST CONG DM CHILD) - Tier 1

Non-Preferred Agents

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Preferred Agents**Non-Preferred Agents**

cough dm childrens (generic for DELSYM) - Tier 1; QL; AL
 cough dm er (generic for DELSYM) - Tier 1; QL; AL
 cough dm oral suspension extended release 30 mg/5ml (generic for DELSYM) - Tier 1; QL; AL
 DELSYM CGH/CHEST CONG DM CHILD (brand for childrens cough) - Tier 2
 DELSYM COUGH CHILDRENS (brand for cough dm) - Tier 2; QL; AL
 DELSYM COUGH/CHEST CONGEST DM (brand for childrens cough) - Tier 2
 DELSYM ORAL SUSPENSION EXTENDED RELEASE (brand for cough dm) - Tier 2; QL; AL
 dextromethorphan polistirex er (generic for DELSYM) - Tier 1; QL; AL
 dextromethorphan-guaifenesin oral liquid 5-100 mg/5ml (generic for DELSYM CGH/CHEST CONG DM CHILD) - Tier 1
 dextromethorphan-guaifenesin oral syrup (generic for ROBAFEN DM COUGH CLEAR) - Tier 1; QL; AL
 dibromm childrens cold/cgh (generic for DIMAPHEN DM COLD/COUGH) - Tier 1; QL; AL
 dimaphen dm cold/cough (generic for DIMAPHEN DM COLD/COUGH) - Tier 1; QL; AL
 dm maximum adult (generic for DELSYM CGH/CHEST CONG DM CHILD) - Tier 1
 ENDACOF-DM (brand for cold & cough childrens) - Tier 2; QL; AL
 ft 12 hour cough relief (generic for DELSYM) - Tier 1; QL; AL
 ft allergy d-12 hour (generic for KLS ALLERCLEAR D-12HR) - Tier 1; QL; AL
 ft allergy relief-d (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL

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Preferred Agents**Non-Preferred Agents**

ft cold & cough relief dm (generic for DIMAPHEN DM COLD/COUGH) - Tier 1; QL; AL

ft mucus relief d 12 hour (generic for MUCINEX D) - Tier 1; AL

ft mucus relief dm oral tablet extended release 12 hour 30-600 mg (generic for MUCINEX DM) - Tier 1; QL; AL

ft nasal decongestant max str oral tablet (generic for SUDOGEST) - Tier 1; QL

ft nasal decongestant max str oral tablet extended release 12 hour (generic for SUDAFED SINUS CONGESTION 12HR) - Tier 1

ft nasal spray (generic for GILTUSS SEVERE SINUS) - Tier 1; QL

ft tussin dm max adult (generic for DELSYM CGHICHEST CONG DM CHILD) - Tier 1

g tussin ac - Tier 1; QL; AL

geri-tussin dm oral syrup (generic for ROBAFEN DM COUGH CLEAR) - Tier 1; QL; AL

giltuss severe sinus (generic for GILTUSS SEVERE SINUS) - Tier 1; QL

guaifenesin-codeine - Tier 1; QL; AL

guaifenesin-dm oral syrup (generic for ROBAFEN DM COUGH CLEAR) - Tier 1; QL; AL

ibuprofen cold & sinus (generic for ADVIL COLD/SINUS) - Tier 1; AL

ibuprofen cold/sinus oral tablet 30-200 mg (generic for ADVIL COLD/SINUS) - Tier 1; AL

ibu-profen cold/sinus oral tablet 30-200 mg (generic for ADVIL COLD/SINUS) - Tier 1; AL

long acting nasal spray (generic for GILTUSS SEVERE SINUS) - Tier 1; QL

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Preferred Agents**Non-Preferred Agents**

long lasting nasal spray (generic for GILTUSS SEVERE SINUS) - Tier 1; QL

lorata-d (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL

lorata-dine d (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL

loratadine d 12hr (generic for KLS ALLERCLEAR D-12HR) - Tier 1; QL; AL

loratadine-d (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL

loratadine-d 12hr (generic for KLS ALLERCLEAR D-12HR) - Tier 1; QL; AL

loratadine-d 24hr (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL

maxi-tuss ac - Tier 1; QL; AL

maxi-tuss gmx (generic for DIABETIC TUSSIN DM MAX ST) - Tier 1; AL

meijer allergy relief-d (generic for KLS ALLERCLEAR D-12HR) - Tier 1; QL; AL

MUCINEX COUGH CHILDRENS (brand for childrens cough) - Tier 2

MUCINEX D (brand for cvs mucus d extended release) - Tier 2; AL

MUCINEX D MAX STRENGTH (brand for cvs mucus d max st er) - Tier 2; AL

MUCINEX DM (brand for cvs mucus dm extended release) - Tier 2; QL; AL

MUCINEX FAST-MAX DM MAX (brand for childrens cough) - Tier 2

MUCINEX FAST-MAX SEVERE CONICG ORAL LIQUID (brand for childrens cough) - Tier 2

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Preferred Agents

MUCINEX SINUS-MAX CLEAR & COOL (brand for 12 hour decongestant) - Tier 2; QL
MUCINEX SINUS-MAX SINUS/ALLERGY (brand for 12 hour decongestant) - Tier 2; QL
mucus & cough relief child (generic for DELSYM CGH/CHEST CONG DM CHILD) - Tier 1
mucus d (generic for MUCINEX D MAX STRENGTH) - Tier 1; AL
mucus d extended release (generic for MUCINEX D) - Tier 1; AL
mucus d max strength (generic for MUCINEX D MAX STRENGTH) - Tier 1; AL
mucus dm (generic for MUCINEX DM) - Tier 1; QL; AL
mucus dm extended release oral tablet extended release 12 hour 30-600 mg (generic for MUCINEX DM) - Tier 1; QL; AL
mucus relief cough childrens (generic for DELSYM CGH/CHEST CONG DM CHILD) - Tier 1
mucus relief d max strength (generic for MUCINEX D MAX STRENGTH) - Tier 1; AL
mucus relief d oral tablet extended release 12 hour 120-1200 mg (generic for MUCINEX D MAX STRENGTH) - Tier 1; AL
mucus relief d oral tablet extended release 12 hour 60-600 mg (generic for MUCINEX D) - Tier 1; AL
mucus relief dm max oral liquid 20-400 mg/20ml, 5-100 mg/5ml (generic for DELSYM CGH/CHEST CONG DM CHILD) - Tier 1
mucus relief dm oral liquid 20-400 mg/20ml (generic for DELSYM CGH/CHEST CONG DM CHILD) - Tier 1
mucus relief dm oral tablet extended release 12 hour 30-600 mg (generic for MUCINEX DM) - Tier 1; QL; AL

Non-Preferred Agents

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Preferred Agents

mucus-d oral tablet extended release 12 hour 60-600 mg (generic for MUCINEX D) - Tier 1; AL
mucus-dm (generic for MUCINEX DM) - Tier 1; QL; AL
nasal decongestant 12hr (generic for SUDAFED SINUS CONGESTION 12HR) - Tier 1
nasal decongestant max st (generic for SUDOGEST) - Tier 1; QL
nasal decongestant oral tablet 30 mg (generic for SUDOGEST) - Tier 1; QL
nasal decongestant oral tablet extended release 12 hour 120 mg (generic for SUDAFED SINUS CONGESTION 12HR) - Tier 1
nasal decongestant pe oral tablet 30 mg (generic for SUDOGEST) - Tier 1; QL
nasal decongestant spray (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
nasal mist nasal solution (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
nasal mist no drip (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
nasal relief (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
nasal spray 12 hour (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
nasal spray extra moist (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
nasal spray extra moisturizing (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
nasal spray nasal solution 0.05 % (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
nasal spray no drip (generic for GILTUSS SEVERE SINUS) - Tier 1; QL

Non-Preferred Agents

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Preferred Agents

Non-Preferred Agents

nasal spray sinus (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
 no drip extra moisturizing (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
 no drip nasal relief (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
 no drip nasal spray (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
 no drip original 12 hours (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
 promethazine-codeine oral solution - Tier 1; QL; AL
 promethazine-dm - Tier 1; QL; AL
 pseudoephedrine hcl 12 hr (generic for SUDAFED SINUS CONGESTION 12HR) - Tier 1
 pseudoephedrine hcl er (generic for SUDAFED SINUS CONGESTION 12HR) - Tier 1
 pseudoephedrine hcl oral tablet 30 mg (generic for SUDOGEST) - Tier 1; QL
 pseudoephedrine-guaifenesin er (generic for MUCINEX D) - Tier 1; AL
 ROBITUSSIN 12 HOUR COUGH (brand for cough dm) - Tier 2; QL; AL
 ROBITUSSIN 12 HOUR COUGH CHILD (brand for cough dm) - Tier 2; QL; AL
 ROBITUSSIN COUGH+CHEST CONG DM ORAL LIQUID 20-400 MG/20ML (brand for childrens cough) - Tier 2
 rynex dm (generic for DIMAPHEN DM COLD/COUGH) - Tier 1; QL; AL
 rynex pe - Tier 1; AL
 rynex pse - Tier 1; AL

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Preferred Agents

sinus & congestion max str (generic for SUDOGEST) - Tier 1; QL
sinus 12 hour (generic for SUDAFED SINUS CONGESTION 12HR) - Tier 1
sinus 12-hour (generic for SUDAFED SINUS CONGESTION 12HR) - Tier 1
sinus congestion max strength (generic for SUDOGEST) - Tier 1; QL
sinus nasal spray (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
SUDAFED (brand for cvs nasal decongestant) - Tier 2; QL
SUDAFED CHILDRENS - Tier 2; QL
SUDAFED SINUS CONGESTION (brand for cvs nasal decongestant) - Tier 2; QL
SUDAFED SINUS CONGESTION 12HR (brand for 12 hour decongestant) - Tier 2
sudogest maximum strength (generic for SUDOGEST) - Tier 1; QL
sudogest oral tablet 30 mg (generic for SUDOGEST) - Tier 1; QL
suphedrine 12hour (generic for SUDAFED SINUS CONGESTION 12HR) - Tier 1
suphedrine maximum strength (generic for SUDAFED SINUS CONGESTION 12HR) - Tier 1
suphedrine oral tablet 30 mg (generic for SUDOGEST) - Tier 1; QL
suphedrine oral tablet extended release 12 hour 120 mg (generic for SUDAFED SINUS CONGESTION 12HR) - Tier 1
tussin cf oral liquid 30-10-100 mg/5ml - Tier 1
tussin cough dm sugar free (generic for ROBAFEN DM COUGH CLEAR) - Tier 1; QL; AL
tussin cough/chest dm max oral liquid 10-200 mg/5ml (generic for DIABETIC TUSSIN DM MAX ST) - Tier 1; AL

Non-Preferred Agents

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Preferred Agents**Non-Preferred Agents**

tussin cough/chest dm max oral liquid 20-400 mg/20ml (generic for DELSYM CGH/CHEST CONG DM CHILD) - Tier 1

tussin dm cough + chest oral liquid 20-400 mg/20ml (generic for DELSYM CGH/CHEST CONG DM CHILD) - Tier 1

tussin dm cough/chest cong (generic for ROBAFEN DM COUGH CLEAR) - Tier 1; QL; AL

tussin dm cough/chest oral syrup 10-100 mg/5ml (generic for ROBAFEN DM COUGH CLEAR) - Tier 1; QL; AL

tussin dm max adult (generic for DELSYM CGH/CHEST CONG DM CHILD) - Tier 1

tussin dm max daytime (generic for DELSYM CGH/CHEST CONG DM CHILD) - Tier 1

tussin dm max oral liquid 20-400 mg/20ml (generic for DELSYM CGH/CHEST CONG DM CHILD) - Tier 1

tussin dm max st (generic for DELSYM CGH/CHEST CONG DM CHILD) - Tier 1

tussin dm oral syrup 100-10 mg/5ml (generic for ROBAFEN DM COUGH CLEAR) - Tier 1; QL; AL

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Preferred Agents**Non-Preferred Agents**

Therapeutic Nutrients/Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies

Electrolyte/Mineral Replacement - Vitamin, Mineral and Body Fluid Deficiency Drugs

adclf (0.5mg/ml) oral solution 0.5 mg/ml - Tier 1; QL
animal shapes complete (generic for CEROVITE JR) - Tier 1; QL
ascorbic acid oral tablet 500 mg (generic for EASY-C IMMUNE HEALTH) - Tier 1; QL
biocel (generic for LYSIPLEX PLUS) - Tier 1; QL
b-plex plus (generic for LYSIPLEX PLUS) - Tier 1; QL
BPROTECTED PEDIA POLY-VITE/FE (brand for pc pediatric poly-vitalfe drop) - Tier 2; QL
BPROTECTED VITAMIN C (brand for vitamin c) - Tier 2; QL
c 500/rose hips (generic for EASY-C IMMUNE HEALTH) - Tier 1; QL
 CADEAU DHA - Tier 2
calcidol (generic for CALCIDOL) - Tier 1; QL
calcium 600 - Tier 1; QL
calcium 600+d oral tablet 600-5 mg-mcg - Tier 1; QL
calcium 600-vitamin d3 - Tier 1; QL
calcium carbonate - Tier 1; QL
calcium carbonate oral tablet 1500 (600 ca) mg - Tier 1; QL
calcium carbonate oral tablet chewable 1250 (500 ca) mg - Tier 1; QL
calcium fast dissolution - Tier 1; QL
calcium high potency - Tier 1; QL
calcium oral tablet 1500 (600 ca) mg - Tier 1; QL
calcium oyster shell oral tablet 1250 (500 ca) mg - Tier 1; QL
calcium soft chews oral tablet chewable 500-200-40 mg-unt-mcg - Tier 1
cerovite jr (generic for CEROVITE JR) - Tier 1; QL
chewable c (generic for SUNKIST VITAMIN C) - Tier 1; QL
chewable c with rose hips (generic for SUNKIST VITAMIN C) - Tier 1; QL

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Preferred Agents**Non-Preferred Agents**

chewable childrens vitamin (generic for CEROVITE JR) - Tier 1; QL
childrens animal shapes (generic for CEROVITE JR) - Tier 1; QL
childrens chewables/iron (generic for LAND BEFORE TIME MULTIVITAMIN) - Tier 1; QL
childrens complete oral tablet chewable 18 mg (generic for CEROVITE JR) - Tier 1; QL
childrens vitamins/iron (generic for LAND BEFORE TIME MULTIVITAMIN) - Tier 1; QL
daily multivitamins/iron (generic for TAB-A-VITE/IRON/BETA CAROTENE) - Tier 1; QL
EASY-C IMMUNE HEALTH (brand for ascorbic acid) - Tier 2; QL
effer-k oral tablet effervescent 25 meq - Tier 1; QL
ergocalciferol oral (generic for CALCIDOL) - Tier 1; QL
FOLAGENT DHA (brand for v-c forte) - Tier 2
FOLAMED DHA (brand for v-c forte) - Tier 2
fruity c - Tier 1; QL
ft vitamin close hips - Tier 1; QL
klor-con/ef - Tier 1; QL
k-prime - Tier 1; QL
LIVITA ADULTS (brand for support) - Tier 2; QL
lysiplex plus oral tablet (generic for LYSIPLEX PLUS) - Tier 1; QL
MENATROL (brand for v-c forte) - Tier 2
multiple vitamins/iron (generic for TAB-A-VITE/IRON/BETA CAROTENE) - Tier 1; QL
MULTIPRO (brand for v-c forte) - Tier 2
multi-vitamin/iron (generic for TAB-A-VITE/IRON/BETA CAROTENE) - Tier 1; QL
NOVAMV PEDIATRIC MULTI-VITAMIN - Tier 2; QL

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Preferred Agents

nutrifac zx (generic for LYSIPLEX PLUS) - Tier 1; QL
OBTREX - Tier 2
OCUVEL (brand for v-c forte) - Tier 2
one-daily multi-vitamin/iron (generic for TAB-A-VITE/IRON/BETA CAROTENE) - Tier 1; QL
one-daily/iron (generic for TAB-A-VITE/IRON/BETA CAROTENE) - Tier 1; QL
oyster shell calcium oral tablet 500 mg - Tier 1; QL
oyster shell calcium/d oral tablet 250-3.125 mg-mcg - Tier 1; QL
oyster shell calcium/vitamin d oral tablet 250-3.125 mg-mcg - Tier 1; QL
prenatal gummy oral tablet chewable 0.4-113.5 mg - Tier 1
REMIAGENT (brand for v-c forte) - Tier 2
stress formulaliron (generic for TAB-A-VITE/IRON/BETA CAROTENE) - Tier 1; QL
SUPPORT (brand for support) - Tier 2; QL
tri-vitelfluoride (generic for SOLUVITA ACD WITH FLUORIDE) - Tier 1; QL
true oyster shell calcium - Tier 1; QL
TRUE VITAMIN C (brand for ascorbic acid) - Tier 2; QL
v-c forte (generic for VIC-FORTE) - Tier 1
vic-forte (generic for VIC-FORTE) - Tier 1
vit close hips - Tier 1; QL
vita s forte (generic for LYSIPLEX PLUS) - Tier 1; QL
vitacel (generic for LYSIPLEX PLUS) - Tier 1; QL
vitamin c cr oral tablet extended release 500 mg (generic for ENDUR-C) - Tier 1; QL

Non-Preferred Agents

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Preferred Agents

vitamin c er oral tablet extended release 1500 mg - Tier 1; QL
vitamin c oral liquid 500 mg/5ml (generic for BPROTECTED VITAMIN C) - Tier 1; QL
vitamin c oral tablet 1000 mg, 250 mg - Tier 1; QL
vitamin c oral tablet 500 mg (generic for EASY-C IMMUNE HEALTH) - Tier 1; QL
vitamin c oral tablet chewable 100 mg, 250 mg - Tier 1; QL
vitamin c oral tablet chewable 500 mg (generic for SUNKIST VITAMIN C) - Tier 1; QL
vitamin c/acerola (generic for SUNKIST VITAMIN C) - Tier 1; QL
vitamin c/rose hips oral tablet 1000 mg - Tier 1; QL
vitamin c/rose hips oral tablet 500 mg (generic for EASY-C IMMUNE HEALTH) - Tier 1; QL
vitamin c-rose hips (generic for EASY-C IMMUNE HEALTH) - Tier 1; QL
vitamin c-rose hips oral tablet (generic for EASY-C IMMUNE HEALTH) - Tier 1; QL
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit (generic for DRISDOL) - Tier 1; QL
vitamins acd-fluoride oral solution 0.25 mg/ml (generic for SOLUVITA ACD WITH FLUORIDE) - Tier 1; QL
vitamins complete childrens (generic for CEROVITE JR) - Tier 1; QL
zinc oral tablet 50 mg (generic for IS-ZC 50) - Tier 1; QL

Non-Preferred Agents

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Preferred Agents

Non-Preferred Agents

Vitamins - Vitamin, Mineral and Body Fluid Deficiency Drugs

b-1 - Tier 1; QL
b-12 oral tablet extended release - Tier 1
b6 - Tier 1; QL
cyanocobalamin injection solution 1000 mcg/ml (generic for DODEX) - Tier 1; QL
DODEX (brand for cyanocobalamin) - Tier 2; QL
e - Tier 1
e-400-clear - Tier 1; QL
natural vitamin e - Tier 1; QL
pyridoxine hcl oral - Tier 1; QL
thiamine hcl oral - Tier 1; QL
 TRUE VITAMIN B6 ORAL TABLET 100 MG, 25 MG, 50 MG - Tier 2; QL
 TRUE VITAMIN E ORAL CAPSULE 450 MG, 90 MG - Tier 2
vitamin b1 - Tier 1; QL
vitamin b-1 oral tablet 250 mg - Tier 1; QL
vitamin b-12 er oral tablet extended release 1000 mcg - Tier 1
vitamin b12 oral tablet extended release 1000 mcg - Tier 1
vitamin b-12 tr oral tablet extended release 1000 mcg - Tier 1
vitamin b-6 - Tier 1; QL
vitamin b-6 er - Tier 1; QL
vitamin e natural - Tier 1
vitamin e oral capsule 134 mg (200 unit), 45 mg (100 unit), 450 mg (1000 ut), 90 mg (200 unit) - Tier 1
vitamin e oral capsule 268 mg (400 unit) - Tier 1; QL

NASCOBAL (brand for cyanocobalamin) - Tier 2; PA; QL

Vitamins

Electrolytes/Minerals/Metals/Vitamins

prenatal gummy oral tablet chewable 0.4 mg - Tier 1; QL

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Prior Authorization / Class Criteria

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12 hour nasal spray.....	86	acetaminophen oral tablet 325 mg.....	6	adult probiotic.....	38
12hr allergy relief.....	82	acetaminophen oral tablet 500 mg.....	6	adv acne spot treatment.....	58
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3-day vaginal vaginal cream 2 %.....	16	acid gone.....	38	ADVIL ORAL TABLET.....	3
4-WAY FAST ACTING.....	75	acid reducer oral capsule delayed release 20.6 (20 base) mg.....	37	AFRIN NODRIP ORIGINAL.....	86
4-WAY MENTHOL NASAL SOLUTION 1 %.....	75	acid reducer oral tablet 10 mg.....	36	AFRIN SALINE NASAL MIST.....	75
8 hour arthritis pain.....	5	acid reducer oral tablet 200 mg.....	36	aftera.....	56
8 hour arthritis relief.....	5	acidophilus lactobacillus oral.....	38	ALAWAY.....	70
8 hour pain relief oral tablet extended release 650 mg.....	5	acidophilus oral capsule , 10 mg.....	38	ALAWAY CHILDRENS ALLERGY.....	70
8 hour pain reliever.....	5	acidophilus probiotic oral capsule 10 mg.....	38	ALEVE ORAL TABLET.....	3
8 hr arthritis pain relief.....	5	acidophilus probiotic oral tablet , 0.5 mg.....	38	all day allergy d.....	80
8hr arthritis pain relief.....	5	acne control cleanser.....	57	all day allergy oral tablet 10 mg.....	72
8hr muscle aches & pain.....	5	acne medication 10 external lotion.....	57	all day allergy relief oral tablet 10 mg.....	82
a-25.....	29	acne medication 5 external lotion.....	57	all day allergy-d oral tablet extended release 12 hour 5-120 mg.....	80
abatine.....	38	acne treatment external cream 10 %.....	57	all day pain relief oral tablet 220 mg.....	3
ABREVA.....	23	ADALIMUMAB-ADB(M (2 PEN) AUTO-INJECTOR KIT 40 MG/0.4ML SUBCUTANEOUS.....	57	all day relief.....	3
ACCRUFER.....	24	ADALIMUMAB-ADB(M (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.4ML.....	57	ALLEGRA ALLERGY.....	82
acetaminophen 8 hour.....	5			ALLEGRA HIVES 24HR.....	82
acetaminophen 8 hours.....	5			allerclear.....	82
acetaminophen 8hr arth pain.....	5			allerclear d-12hr.....	86
acetaminophen 8hr musc ache.....	5			allerclear d-24hr.....	86
acetaminophen childrens.....	5			aller-ease oral tablet 180 mg.....	82
acetaminophen childrens oral suspension 160 mg/5ml.....	5			aller-fex.....	82
acetaminophen er.....	5				

<i>antacid oral suspension 400-135 mg/5ml</i>	39	<i>apra</i>	6	<i>athletes foot external aerosol powder 2 %</i> ...	16
<i>antacid oral tablet chewable 1000 mg</i>	39	APRODINE.....	87	<i>athletes foot external cream 1 %</i>	16
<i>antacid oral tablet chewable 500 mg</i>	40	<i>aqueous vitamin d</i>	29	<i>athletes foot external powder 2 %</i>	16
<i>antacid oral tablet chewable 750 mg</i>	40	ARMOUR THYROID.....	57	<i>athletes foot powder spray external aerosol</i>	
<i>antacid plus antigas</i>	40	<i>arthritis pain oral tablet extended release</i>		<i>powder 1 %</i>	59
<i>antacid regular strength oral suspension</i>		<i>650 mg</i>	6	<i>athletes foot powder spray external aerosol</i>	
<i>200-200-20 mg/5ml</i>	40	<i>arthritis pain relief oral tablet extended</i>		<i>powder 2 %</i>	16
<i>antacid ultra strength</i>	40	<i>release 650 mg</i>	6	<i>athletes foot relief</i>	59
<i>antacid ultra strength oral tablet chewable</i>		<i>arthritis pain reliever oral</i>	6	<i>athletes foot spray external aerosol 2 %</i>	16
<i>1000 mg</i>	40	<i>arthritis pain relieving</i>	58	<i>atropine sulfate ophthalmic ointment</i>	65
<i>antacid/anti-gas max st</i>	40	<i>artificial tears ophthalmic solution</i>	66	AVAR-E EMOLLIENT	22
<i>antacid/anti-gas oral suspension 200-200-</i>		<i>ascorbic acid oral tablet 500 mg</i>	97	AVAR-E GREEN.....	22
<i>20 mg/5ml, 400-400-40 mg/10ml</i>	40	ASPERFLEX LIDOCAINE EXTERNAL		AVEDANA GLYCERIN (ADULT).....	51
<i>antacid/antigas oral suspension 400-400-</i>		CREAM.....	12	AYR.....	75
<i>40 mg/10ml</i>	40	<i>aspirin adults</i>	58	AYR NASAL MIST ALLERGY/SINUS.....	75
<i>antacid/anti-gas oral suspension 400-400-</i>		<i>aspirin childrens</i>	58	AYR SALINE NASAL DROPS.....	75
<i>40 mg/5ml</i>	40	<i>aspirin ec adult low dose</i>	58	<i>azo</i>	55
<i>antacid/gas relief max st</i>	40	<i>aspirin ec oral tablet 325 mg</i>	58	<i>b complex-b12</i>	29
<i>antibiotic</i>	14, 58	<i>aspirin ec oral tablet delayed release 325</i>		<i>b-1</i>	101
<i>anti-diarr/ant-gas</i>	40	<i>mg</i>	58	<i>b-12 oral tablet extended release</i>	101
<i>anti-diarrheal anti-gas oral tablet 2-125 mg</i>	40	<i>aspirin ec oral tablet delayed release 81</i>		<i>b6</i>	101
<i>anti-diarrheal oral suspension 262 mg/15ml</i>	40	<i>mg</i>	58	BABY AYR SALINE.....	75
<i>anti-diarrheal oral tablet 2 mg</i>	36	<i>aspirin oral tablet 325 mg</i>	58	<i>baby basics diaper rash</i>	22
<i>anti-diarrheal/anti-gas</i>	41	<i>aspirin oral tablet chewable 81 mg</i>	58	<i>bacitracin external</i>	59
<i>antifungal</i>	16	<i>aspirin oral tablet delayed release 325 mg</i> ..	58	<i>bacitracin zinc external</i>	59
<i>antifungal (tolnaftate) external cream 1 %</i> ...	58	<i>aspirin oral tablet delayed release 81 mg</i>	58	<i>bacitracin zinc first aid</i>	59
<i>antifungal foot care</i>	16	ASPIRIN ORAL TABLET DELAYED		<i>bacitracin zinc-aloe</i>	59
<i>antifungal maximum strength</i>	58	RELEASE 81 MG.....	59	<i>banophen oral capsule 25 mg</i>	73
<i>antifungal miconazole</i>	16	<i>aspirin rectal suppository 300 mg</i>	59	<i>banophen oral tablet</i>	73
<i>antifungal tolnaftate</i>	58	<i>aspirin regimen</i>	59	BAYER ASPIRIN.....	59
<i>anti-gas oral capsule 180 mg</i>	41	<i>astrigent</i>	22	BAYER LOW DOSE ORAL TABLET	
<i>anti-hist allergy</i>	73	<i>astrigent eye drops</i>	66	CHEWABLE.....	59
<i>anti-itch aloe</i>	20	<i>astrigent solution</i>	22	<i>baza antifungal</i>	16
<i>anti-itch intensive heal</i>	20	<i>atheletes foot</i>	16	<i>b-complex oral tablet</i>	29
<i>anti-itch max str external cream 1 %</i>	20	<i>athletes foot (terbinafine)</i>	16	<i>b-complex with b-12</i>	29
<i>anti-itch maximum strength external cream</i>		<i>athletes foot (tolnaftate) external aerosol</i>		<i>b-complex/b-12 oral</i>	29
<i>1 %</i>	20	<i>powder 1 %</i>	59	BD AUTOSHIELD DUO PEN NEEDLES.....	24
<i>anti-nausea</i>	15	<i>athletes foot (tolnaftate) external cream 1</i>		BD ULTRA-FINE INSULIN SYRINGES.....	24
<i>anti-nausea relief</i>	15	<i>%</i>	59	BD ULTRA-FINE PEN NEEDLES.....	24

<i>beauty 360 pure glycerin</i>	22	BUCKLEYS CHEST CONGESTION.....	75	<i>calcium citrate+d oral tablet 315-6.25 mg-mcg</i>	25
<i>beauty 360 soothing bath</i>	22	<i>c 500/rose hips</i>	97	<i>calcium citrate+d3 oral tablet</i>	25
BENADRYL ALLERGY CHILDRENS ORAL LIQUID.....	73	CADEAU DHA.....	97	<i>calcium citrate+d3 w/magne</i>	25
BENADRYL ALLERGY CHILDRENS ORAL TABLET CHEWABLE.....	73	<i>cal mag zinc +d3</i>	25	<i>calcium citrate-vit d</i>	25
BENADRYL ALLERGY ORAL TABLET.....	73	<i>calamine external lotion</i>	60	<i>calcium citrate-vitamin d oral tablet 315-5 mg-mcg</i>	25
BENADRYL ALLERGY ULTRATABS.....	73	<i>calcidol</i>	97	<i>calcium fast dissolution</i>	97
BENZAC AC WASH.....	59	<i>calcium + vitamin d3 oral tablet 500-5 mg-mcg</i>	25	<i>calcium high potency</i>	97
<i>benzonatate oral capsule 100 mg, 200 mg</i> ..	87	<i>calcium 600</i>	97	<i>calcium high potency/vitamin d</i>	25
<i>benzoyl peroxide external gel 2.5 %</i>	59	<i>calcium 600/vit d/minerals oral tablet 600-200 mg-unit</i>	25	<i>calcium oral tablet 1500 (600 ca) mg</i>	97
<i>benzoyl peroxide external liquid</i>	59	<i>calcium 600/vit d/minerals oral tablet chewable 600-400 mg-unit</i>	25	<i>calcium oyster shell oral tablet 1250 (500 ca) mg</i>	97
<i>benzoyl peroxide wash external liquid 5 %</i> ..	59	<i>calcium 600/vitamin d</i>	25	<i>calcium plus vitamin d</i>	25
<i>betatemp childrens</i>	6	<i>calcium 600/vitamin d-3</i>	25	<i>calcium plus vitamin d3</i>	25
<i>biocel</i>	97	<i>calcium 600+d oral tablet 600-10 mg-mcg</i> ...	25	<i>calcium soft chews oral tablet chewable 500-200-40 mg-unt-mcg</i>	97
BIOLLE TEARS.....	66	<i>calcium 600+d oral tablet 600-5 mg-mcg</i>	97	<i>calcium/minerals/vitamin d</i>	26
BION TEARS PF.....	66	<i>calcium 600-vitamin d3</i>	97	<i>calcium-magnesium-zinc oral tablet 333-133-5 mg, 333.33-133.33-5 mg</i>	26
<i>biotinex</i>	41	<i>calcium antacid</i>	41	<i>cal-gest antacid</i>	41
<i>bisacodyl ec</i>	59	<i>calcium antacid ex st oral tablet chewable 750 mg</i>	41	<i>capsaicin external cream</i>	60
<i>bisacodyl laxative</i>	59	<i>calcium antacid extra strength</i>	41	<i>capsaicin hp</i>	60
<i>bisacodyl oral</i>	60	<i>calcium carb-cholecalciferol oral tablet 600-10 mg-mcg, 600-5 mg-mcg</i>	25	<i>capsaicin pain relief</i>	60
<i>bisacodyl rectal</i>	60	<i>calcium carbonate</i>	97	<i>captopril-hydrochlorothiazide</i>	20
<i>bismuth</i>	41	<i>calcium carbonate antacid oral suspension</i> ..	41	<i>capzix</i>	60
<i>bismuth subsalicylate oral</i>	41	<i>calcium carbonate antacid oral tablet chewable</i>	41	<i>carboxymethylcellulose sodium ophthalmic solution</i>	66
BONINE.....	14	<i>calcium carbonate oral tablet 1500 (600 ca) mg</i>	97	CASTIVA WARMING.....	60
<i>boro-packs</i>	22	<i>calcium carbonate oral tablet chewable 1250 (500 ca) mg</i>	97	CAYA.....	60
<i>boudreauxs butt paste ointment 40 % external</i>	22	<i>calcium cit plus vit d-3</i>	25	<i>cefepime hcl solution reconstituted 2 gm intravenous</i>	13
BOUDREAUXS BUTT PASTE OINTMENT 40 % EXTERNAL.....	22	<i>calcium citrate + d3 maximum</i>	25	CENTRUM SPECIALIST PRENATAL.....	29
<i>bp 10-1</i>	22	<i>calcium citrate +d3</i>	25	<i>cerovite jr</i>	97
<i>bp wash external liquid 2.5 %</i>	60	<i>calcium citrate oral tablet 950 (200 ca) mg</i> ..	25	<i>cetiri-d</i>	81
<i>b-plex plus</i>	97	<i>calcium citrate plus vit d</i>	25	<i>cetirizine allergy relief</i>	73
BPROTECTED PEDIA D-VITE.....	29			<i>cetirizine hcl oral tablet</i>	73
BPROTECTED PEDIA IRON.....	25			<i>cetirizine hcl solution 5 mg/5ml oral (rx)</i>	73
BPROTECTED PEDIA POLY-VITE/FE.....	97			<i>cetirizine-pseudoephedrine er</i>	81
BPROTECTED VITAMIN C.....	97				
BREATHE COMFORT HUMIDIFIER.....	60				
BREATHE EASE HUMIDIFIER.....	60				

<i>chest congest/cough child</i>	87	CLEARASIL RAPID RESCUE DEEP.....	60	<i>cortisone maximum strength external cream</i>	20
<i>chest congestion relief dm oral syrup</i>	87	CLEARCANAL EARWAX SOFTENER.....	71	<i>cough & chest congestion</i>	88
<i>chest congestion relief oral liquid</i>	75	<i>clearlax oral powder 17 gm/scoop</i>	49	<i>cough & cold</i>	76
<i>chest congestion relief oral tablet</i>	75	<i>clearskin</i>	60	<i>cough & cold hbp</i>	76
<i>chewable c</i>	97	CLINERE EARWAX REMOVAL KIT OTIC SOLUTION.....	71	<i>cough childrens</i>	88
<i>chewable c with rose hips</i>	97	<i>clotrimazole 3 vaginal cream 2 %</i>	16	<i>cough dm childrens</i>	88
<i>chewable childrens vitamin</i>	97	<i>clotrimazole 7</i>	16	<i>cough dm er</i>	89
<i>chewy not chalky flavor</i>	41	<i>clotrimazole external solution 1 %</i>	21	<i>cough dm oral suspension extended release 30 mg/5ml</i>	89
<i>childrens acetaminophen</i>	6	<i>clotrimazole vaginal</i>	16	<i>cough relief oral syrup 15 mg/5ml</i>	76
<i>childrens allergy oral liquid 12.5 mg/5ml</i>	73	<i>clotrimazole vaginal cream 1 %</i>	16	<i>cough/cold hbp</i>	76
<i>childrens animal shapes</i>	98	COLACE.....	51	CRITIC-AID CLEAR AF.....	16
<i>childrens apap</i>	6	<i>cold & allergy</i>	88	<i>cromolyn sodium nasal</i>	85
<i>childrens aspirin oral tablet chewable 81 mg</i>	60	<i>cold & allergy childrens oral elixir 1-15 mg/5ml</i>	88	CROTAN LOTION 10 % EXTERNAL.....	21
<i>childrens chewables/iron</i>	98	<i>cold & allergy d max strength</i>	88	CRUEX PRESCRIPTION STRENGTH.....	16
<i>childrens cold & allergy</i>	87	<i>cold & cough childrens oral liquid 1-5-2.5 mg/5ml, 2.5-1-5 mg/5ml</i>	88	<i>curae</i>	56
<i>childrens complete oral tablet chewable 18 mg</i>	98	<i>cold & sinus</i>	88	CURANOL.....	7
<i>childrens cough</i>	88	<i>cold & sinus relief oral tablet 30-200 mg</i>	88	CURELIEF.....	74
<i>childrens loratadine</i>	83	<i>cold/cough</i>	88	<i>cyanocobalamin injection solution 1000 mcg/ml</i>	101
<i>childrens mucus relief cough</i>	88	<i>cold/cough childrens</i>	88	<i>d3 high potency oral capsule 25 mcg, 25 mcg (1000 ut)</i>	29
<i>childrens non-aspirin</i>	6	<i>cold/cough dm childrens oral liquid 2.5-1-5 mg/5ml</i>	88	<i>d3 high potency oral capsule 250 mcg (10000 ut)</i>	30
<i>childrens soothe</i>	41	<i>cold/cough dm oral liquid 2.5-1-5 mg/5ml</i>	88	<i>d3 max st oral capsule 250 mcg</i>	30
<i>childrens vitamins/iron</i>	98	<i>col-rite oral capsule 250 mg</i>	51	<i>d3 oral capsule 10 mcg (400 unit), 50 mcg (2000 ut)</i>	30
<i>childs non-aspirin</i>	7	<i>comfort gel</i>	41	<i>d3 oral capsule 125 mcg (5000 ut)</i>	30
<i>chlorpheniramine maleate er</i>	83	<i>comfort gel antacid anti-gas oral suspension 400-400-40 mg/5ml</i>	41	<i>d3 oral capsule 25 mcg (1000 ut)</i>	30
CHLOR-TRIMETON ALLERGY.....	83	<i>complete allergy</i>	73	<i>d3 oral capsule 250 mcg, 250 mcg (10000 ut)</i>	30
<i>cimetidine oral tablet 200 mg</i>	36	<i>complete allergy medicine</i>	73	<i>d-3-5</i>	30
<i>citroma</i>	51	<i>complete allergy medicine oral capsule</i>	73	<i>d3-50</i>	30
CITRUCEL ORAL POWDER.....	51	<i>complete allergy relief</i>	73	<i>daily acne wash</i>	60
CITRUCEL ORAL TABLET.....	51	CO-NATAL FA.....	29	<i>daily fiber oral capsule 0.52 gm</i>	49
CLARITIN ALLERGY CHILDRENS.....	83	CONDOMS.....	60	<i>daily multiple vitamins</i>	30
CLARITIN ORAL TABLET.....	83	COOL MIST HUMIDIFER.....	60	<i>daily multivitamins/iron</i>	98
CLARITIN REDITABS ORAL TABLET DISPERSIBLE 10 MG.....	83	CORICIDIN HBP COUGH/COLD.....	76	<i>daily vitamins</i>	30
CLARITIN-D 12 HOUR.....	88	<i>corn & callus remover</i>	60		
CLARITIN-D 24 HOUR.....	88	<i>corn and callus remover</i>	60		
<i>classic prenatal</i>	29				
<i>c-lax laxative</i>	60				

<i>daily vite</i>	30	DIFFERIN EXTERNAL GEL 0.1 %.....	20	<i>earwax removal drops</i>	71
<i>daily vites</i>	30	<i>digestive probiotic oral capsule</i>	41	<i>earwax removal kit otic solution 6.5 %</i>	71
<i>daily-vite</i>	30	<i>digestive probiotic oral capsule 250 mg</i>	42	EASY-C IMMUNE HEALTH.....	98
DAYHIST ALLERGY 12 HOUR RELIEF	74	<i>dimaphen dm cold/cough</i>	89	<i>easygel</i>	24
DECARA ORAL CAPSULE 1.25 MG (50000 UT).....	30	<i>diphedryl allergy</i>	74	<i>easy-lax plus</i>	52
DECARA ORAL CAPSULE 625 MCG (25000 UT).....	30	<i>diphen</i>	74	<i>econtra one-step</i>	56
<i>deep sea nasal spray</i>	76	<i>diphenhydramine hcl childrens</i>	74	ED A-HIST ORAL LIQUID	81
DELSYM CGH/CHEST CONG DM CHILD ..	89	<i>diphenhydramine hcl oral capsule</i>	74	<i>ed bron gp</i>	76
DELSYM COUGH CHILDRENS.....	89	<i>diphenhydramine hcl oral elixir</i>	74	<i>ed chlorped jr</i>	83
DELSYM COUGH/CHEST CONGEST DM ..	89	<i>diphenhydramine hcl oral liquid</i>	74	<i>ed-apap</i>	7
DELSYM ORAL SUSPENSION		<i>diphenhydramine hcl oral tablet</i>	74	<i>effer-k oral tablet effervescent 25 meq</i>	98
EXTENDED RELEASE.....	89	<i>dm maximum adult</i>	89	<i>electrolyte</i>	26
DERMACINRX ATRIX ANTIBAC WASH.....	61	<i>docosanol external</i>	23	<i>electrolyte adv care</i>	26
DERMACINRX ATRIX CLARIFY TONER....	61	<i>docusate calcium</i>	51	<i>electrolyte solution</i>	26
DERMACINRX PENETRAL.....	61	<i>docusate mini</i>	51	EMETROL ORAL SOLUTION.....	15
DERMELEVE ADVANCED FORMULA.....	61	<i>docusate sodium oral capsule</i>	51	ENDACOF-DM.....	89
DERMELEVE ANTI-ITCH SCALP	61	<i>docusate sodium oral liquid</i>	51	<i>enema</i>	42
DESENEX EXTERNAL POWDER.....	16	<i>docusate sodium oral syrup</i>	51	<i>enema disposable</i>	42
DESENEX JOCK ITCH.....	16	DOCUSOL MINI.....	51	<i>enema mineral oil</i>	49
<i>desgen dm oral liquid</i>	81	<i>docuzen</i>	51	<i>enema ready-to-use</i>	42
DEXCOM G6 RECEIVER.....	24	DODEX.....	101	<i>enema rectal enema 16-6 gm/133ml</i>	42
DEXCOM G6 SENSOR.....	24	DORAL.....	18	ENEMEEZ MINI.....	52
DEXCOM G6 TRANSMITTER.....	61	<i>double antibiotic external ointment 500- 10000 unit/gm</i>	61	ENFAMIL ENFALYTE.....	26
DEXCOM G7 RECEIVER.....	24	DR SMITHS DIAPER.....	22	ENFAMIL EXPECTA.....	31
DEXCOM G7 SENSOR.....	24	<i>driminate</i>	14	<i>enteric aspirin</i>	61
<i>dextromethorphan polistirex er</i>	89	<i>dry-eye relief nighttime</i>	66	<i>ephrine nose drops</i>	76
<i>dextromethorphan-guaifenesin oral liquid 5-100 mg/5ml</i>	89	<i>dss</i>	51	<i>ergocalciferol oral</i>	98
<i>dextromethorphan-guaifenesin oral syrup</i>	89	DUREX EXTRA SENSITIVE THIN.....	61	<i>essential one daily</i>	31
DIALYVITE 800 ORAL TABLET.....	30	DUREX TROPICAL.....	61	<i>essentials</i>	31
DIALYVITE VITAMIN D 5000.....	30	D-VI-SOL.....	30	EVAC.....	49
<i>diamode</i>	36	<i>d-vite pediatric</i>	30	EXCEDRIN EXTRA STRENGTH.....	7
<i>diaper rash external ointment</i>	22	<i>e</i>	101	EXCEDRIN MIGRAINE.....	7
<i>diarrhea</i>	41	<i>e-400-clear</i>	101	EX-LAX MAXIMUM STRENGTH.....	52
<i>diarrhea relief</i>	41	<i>ear drops otic solution 6.5 %</i>	71	EX-LAX ULTRA.....	61
<i>dibromm childrens cold/cgh</i>	89	<i>ear wax kit</i>	71	<i>eye drops adv relief</i>	66
<i>diclofenac sodium gel 1 % external (rx)</i>	3	<i>ear wax removal</i>	71	<i>eye drops advanced relief</i>	66
		<i>ear wax removal system</i>	71	<i>eye drops long lasting</i>	66
		<i>earwax removal</i>	71	<i>eye drops ophthalmic solution 0.05 %</i>	66

eye drops ophthalmic solution 0.05-0.1-1-1 %.....	67	feverall childrens.....	7	foot care (terbinafine).....	16
eye drops ophthalmic solution 0.05-0.25 %..	67	FEVERALL INFANTS.....	7	for sty relief.....	67
eye irritation relief drops ophthalmic solution 0.05-0.25 %.....	67	FEVERALL JUNIOR STRENGTH.....	7	FORMULA 3 THE TREATMENT.....	61
eye itch relief ophthalmic solution 0.035 %..	70	fe-vite iron.....	27	FORMULA 7 THE SOLUTION.....	61
eye lubricant.....	67	fexofenadine hcl.....	83	FORTEO.....	57
eye lubricant nighttime.....	67	fexofenadine hcl oral.....	83	FREESTYLE LIBRE 14 DAY READER.....	24
EYES ALIVE.....	67	fiber laxative + calcium.....	52	FREESTYLE LIBRE 14 DAY SENSOR.....	24
EZFE 200.....	26	fiber laxative oral capsule 0.52 gm.....	49	FREESTYLE LIBRE 2 READER.....	24
famotidine acid reducer oral tablet 10 mg....	36	fiber laxative oral tablet 500 mg.....	52	FREESTYLE LIBRE 2 SENSOR.....	24
famotidine oral tablet 10 mg.....	36	fiber oral capsule 0.52 gm.....	49	FREESTYLE LIBRE 3 SENSOR.....	24
famotidine orig st.....	36	fiber oral powder 28.3 %, 58.6 %.....	49	FREESTYLE LIBRE READER.....	24
famotidine tablet 20 mg oral (rx).....	36	fiber oral tablet 500 mg.....	52	freeze dried acidophilus.....	42
fast relief laxative.....	61	fiber oral tablet 625 mg.....	52	FRESKARO MAGNESIUM CITRATE.....	52
ferate.....	26	fiber therapy oral capsule 0.52 gm.....	49	fruity c.....	98
FER-IN-SOL.....	26	fiber therapy oral powder 28.3 %.....	49	ft 12 hour cough relief.....	89
ferocon.....	26	fiber therapy oral tablet 500 mg.....	52	ft 24 hour nasal allergy.....	85
ferosul.....	26	fiber therapy oral tablet 625 mg.....	52	ft 8 hour pain relief.....	7
ferotinsic.....	26	fiber-caps.....	52	ft acid reducer oral capsule delayed release 15 mg.....	37
ferretts.....	26	fiber-lax.....	52	ft acid reducer oral tablet.....	36
ferrex 150 capsule 150 mg oral.....	26	first aid antibiotic external ointment , 3.5-400-5000.....	14	ft all day allergy.....	74
FERREX 150 CAPSULE 150 MG ORAL.....	26	FLANAX.....	3	ft all day allergy 24 hour.....	74
FERRIC X-150.....	26	FLEET BISACODYL.....	61	ft all day allergy relief.....	83
ferrous fumarate oral tablet 324 (106 fe) mg, 324 mg.....	26	FLEET ENEMA.....	42	ft all day allergy-d.....	81
ferrous gluconate.....	26	FLEET OIL.....	49	ft all day pain relief.....	3
ferrous gluconate oral tablet 240 (27 fe) mg	26	FLEET PEDIATRIC.....	42	ft allergy childrens.....	83
ferrous gluconate oral tablet 324 (37.5 fe) mg.....	26	FLORA VANCE.....	42	ft allergy d-12 hour.....	89
ferrous gluconate oral tablet 324 (38 fe) mg	26	floranex tablet oral.....	42	ft allergy relief 12 hour.....	83
ferrous sulfate.....	26	FLORANEX TABLET ORAL.....	42	ft allergy relief 24 hour.....	84
ferrous sulfate oral solution 75 (15 fe) mg/ml.....	26	fluoridex daily renewal.....	24	ft allergy relief cetirizine.....	74
ferrous sulfate oral tablet 325 (65 fe) mg....	27	foaming antacid oral tablet chewable 80-20 mg.....	42	ft allergy relief childrens oral liquid.....	74
ferrous sulfate oral tablet delayed release...	27	FOLAGENT DHA.....	98	ft allergy relief loratadine.....	84
fever reducer/pain reliever.....	7	FOLAMED DHA.....	98	ft allergy relief oral capsule.....	74
fever reducing childrens.....	7	FOLCYTEINE.....	31	ft allergy relief oral tablet 10 mg.....	84
feverall adults.....	7	folic acid oral tablet 1 mg.....	61	ft allergy relief oral tablet 180 mg.....	84
		folic acid oral tablet 400 mcg, 800 mcg.....	61	ft allergy relief oral tablet 25 mg.....	74
		foltrin.....	27	ft allergy relief-d.....	89
		foot & sneaker.....	61	ft antacid & antigas.....	42
				ft antacid extra strength.....	42

<i>ft antacid regular strength</i>	42	<i>ft magnesium oxide</i>	27	<i>ft vitamin d3 oral tablet</i>	31
<i>ft antibiotic</i>	61	<i>ft miconazole 3 combo pack</i>	15	<i>full spectrum b/vitamin c</i>	31
<i>ft anti-diarrheal oral tablet</i>	36	<i>ft miconazole 7</i>	15	FUNGICURE.....	62
<i>ft anti-diarrheal/anti-gas</i>	42	<i>ft migraine relief</i>	7	<i>fungi-guard</i>	62
<i>ft antifungal external cream 1 %</i>	61	<i>ft milk of magnesia</i>	43	<i>g tussin ac</i>	90
<i>ft antifungal external cream 2 %</i>	16	<i>ft mineral oil</i>	50	<i>gas relief extra st</i>	43
<i>ft arthritis pain reliever</i>	7	<i>ft motion sickness oral tablet 50 mg</i>	14	<i>gas relief extra strength</i>	43
<i>ft aspirin</i>	62	<i>ft mucus relief 12hr oral tablet extended</i>		<i>gas relief extra strength oral tablet</i>	
<i>ft aspirin low dose</i>	62	<i>release 12 hour 1200 mg</i>	76	<i>chewable 125 mg</i>	43
<i>ft athletes foot (terbinafine)</i>	17	<i>ft mucus relief d 12 hour</i>	90	<i>gas relief extstrength</i>	43
<i>ft chest congestion relief</i>	76	<i>ft mucus relief dm oral tablet extended</i>		<i>gas relief infants</i>	43
<i>ft children's pain/fever</i>	7	<i>release 12 hour 30-600 mg</i>	90	<i>gas relief infants drops oral suspension 40</i>	
<i>ft clearlax</i>	49	<i>ft nasal decongestant max str oral tablet</i>	90	<i>mg/0.6ml</i>	43
<i>ft clotrimazole</i>	17	<i>ft nasal decongestant max str oral tablet</i>		<i>gas relief infants oral suspension 20</i>	
<i>ft clotrimazole 3</i>	17	<i>extended release 12 hour</i>	90	<i>mg/0.3ml</i>	43
<i>ft cold & cough relief dm</i>	89	<i>ft nasal decongestant pe</i>	76	<i>gas relief oral capsule 125 mg</i>	43
<i>ft docosanol</i>	23	<i>ft nasal spray</i>	90	<i>gas relief oral capsule 180 mg</i>	43
<i>ft double antibiotic</i>	62	<i>ft nicotine</i>	13	<i>gas relief oral tablet chewable 125 mg</i>	43
<i>ft earwax removal</i>	71	<i>ft nicotine mini</i>	13	<i>gas relief oral tablet chewable 80 mg</i>	44
<i>ft earwax removal kit</i>	71	<i>ft pain & fever childrens</i>	7	<i>gas relief ultra strength</i>	44
<i>ft enema mineral oil</i>	49	<i>ft pain & fever infants</i>	7	<i>gas relief ultstrength</i>	44
<i>ft enema saline</i>	42	<i>ft pain relief adult extra st</i>	7	GAS-X EXTRA STRENGTH ORAL	
<i>ft enteric coated aspirin</i>	62	<i>ft pain relief extra strength</i>	7	CAPSULE.....	44
<i>ft eye drops</i>	67	<i>ft pain relief oral tablet 200 mg</i>	3	GAS-X EXTRA STRENGTH ORAL	
<i>ft fiber laxative</i>	52	<i>ft pain relief oral tablet 325 mg</i>	7	TABLET CHEWABLE.....	44
<i>ft folic acid</i>	62	<i>ft pain reliever ex str adult</i>	8	GAS-X ULTRA STRENGTH.....	44
<i>ft gas relief</i>	42	<i>ft senna laxative</i>	52	<i>gavilax oral powder</i>	50
<i>ft gas relief extra strength</i>	42	<i>ft senna laxatives</i>	52	GAVISCON.....	44
<i>ft gas relief infants</i>	43	<i>ft senna-s</i>	52	GAVISCON EXTRA RELIEF FORMULA.....	44
<i>ft gas relief ultra strength</i>	43	<i>ft stomach relief oral suspension</i>	43	GAVISCON EXTRA STRENGTH.....	44
<i>ft gentle laxative</i>	62	<i>ft stomach relief oral tablet</i>	43	GELUSIL.....	44
<i>ft ibuprofen ib childrens</i>	3	<i>ft stomach relief oral tablet chewable</i>	43	GENTEAL SEVERE.....	67
<i>ft ibuprofen oral tablet</i>	3	<i>ft stool softener oral capsule</i>	52	GENTEAL TEARS MODERATE PF.....	67
<i>ft itch relief max strength external cream</i>	20	<i>ft stool softener oral tablet 50-8.6 mg</i>	52	GENTEAL TEARS NIGHT-TIME.....	67
<i>ft itch relief/aloe max str</i>	20	<i>ft triple antibiotic</i>	14	GENTEAL TEARS OPHTHALMIC	
<i>ft laxative</i>	62	<i>ft tussin adult</i>	76	SOLUTION 0.1-0.2-0.3 %.....	67
<i>ft lice killing max st</i>	18	<i>ft tussin cf adult</i>	81	GENTEAL TEARS PF.....	67
<i>ft lubricant eye drops</i>	67	<i>ft tussin dm max adult</i>	90	GENTEAL TEARS SEVERE DAY/NIGHT..	67
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<i>gentle laxative oral tablet delayed release</i> ...	62	GUARDIAN SENSOR 3.....	24	<i>hydrophor</i>	22
<i>gentle laxative rectal</i>	62	GVOKE KIT.....	19	<i>hyoscyamine sulfate er</i>	62
<i>gentle laxative womens</i>	62	<i>habitrol</i>	12	<i>hyoscyamine sulfate oral</i>	62
<i>gentlelax</i>	50	<i>headache formula</i>	8	<i>hyoscyamine sulfate sublingual</i>	62
<i>genuine aspirin</i>	62	<i>headache relief extra str</i>	8	<i>hyosyne</i>	62
<i>geri-dryl</i>	74	<i>headache relief oral tablet 250-250-65 mg</i> ...	8	HYPOTEARs.....	67
<i>geri-kot</i>	52	<i>healthy hair/skin/nails</i>	31	<i>ibuprofen childrens oral tablet chewable</i>	
<i>geri-lanta maximum strength</i>	44	<i>heartburn antacid</i>	44	<i>100 mg</i>	3
<i>geri-lanta oral suspension 200-200-20</i>		<i>heartburn antacid ex st</i>	45	<i>ibuprofen cold & sinus</i>	90
<i>mg/5ml</i>	44	<i>heartburn prevention oral tablet 10 mg</i>	36	<i>ibuprofen cold/sinus oral tablet 30-200 mg</i> ..	90
<i>geri-lanta supreme</i>	44	<i>heartburn relief ex st</i>	45	<i>ibu-profen cold/sinus oral tablet 30-200 mg</i> ..	90
<i>geri-mox</i>	44	<i>heartburn relief oral tablet 10 mg</i>	36	<i>ibuprofen ib childrens</i>	3
<i>geri-mox maximum strength</i>	44	<i>heartburn relief oral tablet 200 mg</i>	37	<i>ibuprofen ib oral tablet 200 mg</i>	3
<i>geri-tussin dm oral syrup</i>	90	<i>heartburn relief oral tablet chewable 160-</i>		<i>ibuprofen infants oral suspension 50</i>	
<i>geri-tussin oral liquid</i>	76	<i>105 mg</i>	45	<i>mg/1.25ml</i>	3
<i>giltuss severe sinus</i>	90	<i>heartland gas relief</i>	45	<i>ibuprofen jr oral tablet 100 mg</i>	3
GLUCO TO GO.....	19	<i>h-e-b aspirin</i>	62	<i>ibuprofen junior</i>	3
<i>glucose oral tablet chewable 4 gm</i>	19	<i>h-e-b childrens allergy</i>	74	<i>ibuprofen junior strength</i>	3
<i>glycerin (adult) rectal suppository 2 gm</i>	52	<i>hemorrhoidal rectal suppository 0.25-3-</i>		<i>ibuprofen oral tablet 200 mg</i>	3
<i>glycerin (infants & children) rectal</i>		<i>85.5.%</i>	23	<i>iferex 150</i>	27
<i>suppository 1 gm</i>	52	<i>her style</i>	56	<i>iferex 150 forte</i>	27
<i>glycerin adult rectal suppository 2 gm</i>	52	<i>hi cal</i>	27	IMODIUM A-D ORAL TABLET.....	36
<i>glycerin child rectal suppository 1 gm, 1.2</i>		HUMALOG MIX 75/25.....	19	IMODIUM MULTI-SYMPATOM RELIEF.....	45
<i>gm</i>	53	HUMULIN 70/30 VIAL.....	19	<i>indoor/outdoor allergy rlf</i>	74
<i>glycerin childrens</i>	53	HUMULIN N VIAL.....	19	<i>infant gas relief</i>	45
<i>glycerin external liquid , 99.5 %</i>	22	<i>hydrocodone bit-homatrop mbr</i>	62	INFANTS ADVIL.....	4
<i>glycerin pediatric rectal suppository 1.2 gm</i> ..	53	<i>hydrocortisone anti-itch</i>	20	<i>infants gas relief</i>	45
<i>glycolax</i>	50	<i>hydrocortisone cream 1 % external (otc)</i>	21	<i>infants ibuprofen</i>	4
<i>gormel</i>	23	<i>hydrocortisone external cream 0.5 %</i>	21	<i>infants pain & fever</i>	8
<i>gormel 10</i>	23	<i>hydrocortisone external cream 1 %</i>	21	<i>infants pain relief drops</i>	8
<i>guaifenesin er oral tablet extended release</i>		<i>hydrocortisone external ointment 0.5 %</i>	21	<i>infants pain/fever</i>	8
<i>12 hour 1200 mg</i>	76	<i>hydrocortisone max st external cream</i>	21	INFUVITE ADULT.....	31
<i>guaifenesin oral liquid</i>	76	<i>hydrocortisone max st/12 moist</i>	21	INGREZZA ORAL CAPSULE SPRINKLE...20	
<i>guaifenesin oral tablet 400 mg</i>	76	<i>hydrocortisone plus external cream 1 %</i>	21	<i>instacort 5</i>	21
<i>guaifenesin-codeine</i>	90	<i>hydrocortisone/aloe</i>	21	INSULIN ASPART PROT & ASPART.....	19
<i>guaifenesin-dm oral syrup</i>	90	<i>hydrocortisone/aloe max str</i>	21	<i>intestinex</i>	45
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GUARDIAN SENSOR (3).....	24	<i>hydromorphone hcl rectal</i>	4	<i>iron oral tablet 240 (27 fe) mg</i>	27

<i>iron oral tablet 325 (65 fe) mg</i>	27	<i>lice maximum strength</i>	18	<i>lubricant eye drops (pf)</i>	67
<i>jock itch external cream 1 %</i>	17	<i>lice treatment external liquid 1 %</i>	21	<i>lubricant eye drops (pf) ophthalmic solution</i>	
<i>jock itch max st</i>	62	<i>lice treatment external shampoo 0.33-4 %</i> ... 18		<i>0.4-0.3 %</i>	67
<i>jock itch spray powder</i>	62	<i>lidocaine external cream 4 %</i>	12	<i>lubricant eye drops ophthalmic solution</i>	
<i>ketotifen fumarate ophthalmic</i>	70	<i>lidocaine hcl external cream 3 %</i>	12	<i>0.4-0.3 %</i>	68
<i>klor-con/ef</i>	98	<i>lidopin external cream 3 %</i>	12	<i>lubricant eye drops ophthalmic solution 0.5</i>	
<i>K-PHOS</i>	27	<i>liquid acetaminophen</i>	8	<i>%</i>	68
<i>k-prime</i>	98	<i>liquid allergy relief</i>	74	<i>lubricant eye drops ophthalmic solution 0.6</i>	
<i>LAC-HYDRIN FIVE</i>	21	<i>liquid corn & callus rem</i>	63	<i>%</i>	68
<i>lactobacillus oral tablet</i>	45	<i>liquid pain relief</i>	8	<i>lubricant eye drops pf</i>	68
<i>lacto-pectin</i>	45	<i>liquid wart remover</i>	63	<i>lubricant eye nighttime</i>	68
<i>LAMISIL AT EXTERNAL CREAM</i>	17	<i>liquid wart remover max st</i>	63	<i>lubricant eye ophthalmic solution 0.4-0.3 %</i> .. 68	
<i>LAMISIL AT JOCK ITCH</i>	17	<i>lithium</i>	18	<i>lubricant eye pm</i>	68
<i>lansoprazole capsule delayed release 15</i>		<i>LIVITA ADULTS</i>	98	<i>lubricant pm</i>	68
<i>mg oral (otc)</i>	37	<i>LMX 4</i>	12	<i>lubricating eye drop</i>	68
<i>lansoprazole oral capsule delayed release</i>		<i>long acting nasal spray</i>	90	<i>lubricating eye drops</i>	68
<i>15 mg</i>	37	<i>long lasting antacid</i>	45	<i>lubricating eyel/overnight</i>	68
<i>lansoprazole oral tablet delayed release</i>		<i>long lasting nasal spray</i>	90	<i>lubricating plus eye drops</i>	68
<i>dispersible 15 mg</i>	37	<i>loperamide hcl oral capsule</i>	36	<i>lubricating plus ophthalmic solution 0.5 %</i> ... 68	
<i>LANTUS U-100 VIAL</i>	19	<i>loperamide hcl oral tablet</i>	36	<i>lubricating plus pf</i>	68
<i>laxacin</i>	53	<i>loperamide-simethicone</i>	45	<i>lubricating tears ophthalmic solution 0.4-</i>	
<i>laxaclear</i>	50	<i>loradamed</i>	84	<i>0.3 %</i>	68
<i>laxative max str</i>	53	<i>lorata-d</i>	91	<i>lubrifresh p.m.</i>	68
<i>laxative oral powder 17 gm/scoop</i>	50	<i>loratadine</i>	83	<i>lysiplex plus oral tablet</i>	98
<i>laxative oral tablet delayed release 5 mg</i> 63		<i>loratadine allergy relief oral tablet 10 mg</i> 84		<i>MAALOX</i>	45
<i>laxative pills max st</i>	53	<i>loratadine allergy relief oral tablet</i>		<i>MAALOX CHILDRENS</i>	45
<i>laxative pills oral tablet 25 mg</i>	53	<i>dispersible 10 mg</i>	84	<i>MAALOX MAX ORAL SUSPENSION</i>	45
<i>laxative rectal suppository 10 mg</i>	63	<i>loratadine childrens oral solution</i>	84	<i>MAALOX MULTI SYMPTOM MAX ST</i>	45
<i>laxative regular strength</i>	53	<i>lorata-dine d</i>	91	<i>mag-al plus</i>	45
<i>LEVBIID</i>	63	<i>loratadine d 12hr</i>	91	<i>mag-al plus xs</i>	45
<i>LEVEMIR U-100 VIAL</i>	19	<i>loratadine oral solution 5 mg/5ml</i>	84	<i>magnesium citrate oral solution</i>	53
<i>levonorgestrel</i>	56	<i>loratadine oral tablet 10 mg</i>	84	<i>magnesium oral tablet 500 mg</i>	27
<i>lice killing</i>	18, 21	<i>loratadine oral tablet dispersible 10 mg</i> 84		<i>magnesium oxide -mg supplement oral</i>	
<i>lice killing max st external shampoo 0.33-4</i>		<i>loratadine-d</i>	91	<i>tablet 400 (240 mg) mg</i>	27
<i>%</i>	18	<i>loratadine-d 12hr</i>	91	<i>magnesium oxide -mg supplement oral</i>	
<i>lice killing max str</i>	18	<i>loratadine-d 24hr</i>	91	<i>tablet 500 mg</i>	27
<i>lice killing max strength</i>	18	<i>lubricant drops fast act</i>	67	<i>magnesium oxide oral tablet 400 mg</i>	63
<i>lice killing maximum strength</i>	18	<i>lubricant drops ophthalmic gel 0.25-0.3 %</i> ... 67		<i>magnesium oxide oral tablet 420 mg</i>	63
<i>lice killing shampoo max str</i>	18	<i>lubricant drops ophthalmic solution</i>	67	<i>magnesium-oxide</i>	27

MAOX.....	63	<i>miconazole 7 vaginal cream 2 %</i>	15	MOTRIN CHILDRENS.....	4
<i>mapap acetaminophen extra str</i>	8	<i>miconazole 7 vaginal suppository 100 mg</i> ...	15	MOTRIN IB ORAL TABLET.....	4
<i>mapap childrens</i>	8	<i>miconazole antifungal</i>	17	MOTRIN INFANTS DROPS.....	4
<i>mapap oral capsule</i>	8	<i>miconazole nitrate external cream</i>	17	<i>m-pap</i>	9
MAX RELIEF JR CHILD PAIN/FEVER		<i>miconazole nitrate vaginal</i>	15	MUCINEX COUGH CHILDRENS.....	91
ORAL LIQUID.....	8	<i>miconazorb af</i>	17	MUCINEX D.....	91
<i>max relief jr child pain/fever suspension</i>		MICOTRIN AL.....	63	MUCINEX D MAX STRENGTH.....	91
<i>160 mg/5ml oral</i>	8	MICOTRIN AP.....	17	MUCINEX DM.....	91
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SUSPENSION 160 MG/5ML ORAL.....	8	<i>migraine formula oral tablet 250-250-65 mg</i> ..	9	MUCINEX FAST-MAX DM MAX.....	91
MAX RELIEF JUNIOR.....	9	<i>migraine headache relief</i>	9	MUCINEX FAST-MAX SEVERE CON/CG	
MAX TUSSIN MUCUS & CHEST CONG.....	76	<i>migraine relief oral tablet 250-250-65 mg</i>	9	ORAL LIQUID.....	91
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<i>maxi-tuss gmx</i>	91	<i>mg/15ml</i>	46	MUCINEX SINUS-MAX SINUS/ALLRGY	92
<i>maxi-tuss pe max</i>	76	<i>mineral oil enema</i>	50	<i>mucus & chest congestion</i>	77
<i>m-dryl</i>	74	<i>mineral oil heavy oral</i>	50	<i>mucus & cough relief child</i>	92
<i>meclizine hcl oral tablet chewable</i>	14	<i>mineral oil oral oil</i>	50	<i>mucus d</i>	92
<i>medifin 400</i>	76	<i>mineral oil rectal enema</i>	50	<i>mucus d extended release</i>	92
<i>medifin mucus relief child</i>	77	<i>mini nicotine</i>	13	<i>mucus d max st er</i>	92
<i>medi-first aspirin</i>	63	<i>mintox maximum strength</i>	46	<i>mucus dm</i>	92
<i>medi-first hydrocortisone</i>	21	<i>mintox plus</i>	46	<i>mucus dm extended release oral tablet</i>	
<i>medi-first ibuprofen</i>	4	MIRALAX ORAL POWDER.....	50	<i>extended release 12 hour 30-600 mg</i>	92
<i>medi-first triple antibiotic</i>	14	<i>mm acetaminophen ex str</i>	9	<i>mucus er maximum str</i>	77
<i>mediproxen</i>	4	MM ALLER-BEN.....	74	<i>mucus er oral tablet extended release 12</i>	
<i>medique aspirin</i>	63	<i>mm allergy relief 24 hour</i>	84	<i>hour 1200 mg</i>	77
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<i>mega probiotic</i>	45	<i>mm aspirin</i>	63	<i>extended release 12 hour 1200 mg</i>	77
<i>meijer allergy relief-d</i>	91	<i>mm clearlax</i>	50	<i>mucus relief 12 hour max st</i>	77
<i>meijer antacid</i>	46	<i>mm ibuprofen</i>	4	<i>mucus relief chest congestion oral liquid</i>	77
<i>meijer anti-diarrheal</i>	36	<i>mm stool softener</i>	53	<i>mucus relief chest oral tablet 400 mg</i>	77
MENATROL.....	98	<i>mm stool softener laxative</i>	53	<i>mucus relief childrens oral liquid 100</i>	
MENEST ORAL TABLET 2.5 MG.....	56	<i>mood support probiotic</i>	46	<i>mg/5ml</i>	77
<i>micaderm</i>	17	<i>morphine sulfate rectal</i>	4	<i>mucus relief cough childrens</i>	92
MICATIN.....	17	<i>motion sickness oral tablet 50 mg</i>	14	<i>mucus relief d max strength</i>	92
MICOMITIN.....	63	<i>motion sickness relief oral tablet 50 mg</i>	14	<i>mucus relief d oral tablet extended release</i>	
<i>miconazole 3 applicator vaginal kit 200 & 2</i>		<i>motion sickness relief oral tablet chewable</i>		<i>12 hour 120-1200 mg</i>	92
<i>mg-% (9gm)</i>	15	<i>25 mg</i>	14	<i>mucus relief d oral tablet extended release</i>	
<i>miconazole 3 combo pack</i>	15	<i>motion-time</i>	14	<i>12 hour 60-600 mg</i>	92

<i>mucus relief dm max oral liquid 20-400 mg/20ml, 5-100 mg/5ml</i>	92	NASACORT ALLERGY 24HR.....	85	<i>natural vegetable laxative oral tablet 8.6 mg</i>	53
<i>mucus relief dm oral liquid 20-400 mg/20ml</i>	92	<i>nasal allergy 24 hour</i>	85	<i>natural vitamin e</i>	101
<i>mucus relief dm oral tablet extended release 12 hour 30-600 mg</i>	92	<i>nasal allergy nasal aerosol 55 mcg/act</i>	85	<i>natura-lax</i>	50
<i>mucus relief er</i>	77	<i>nasal allergy spray</i>	85	<i>nausea control</i>	15
<i>mucus relief er oral tablet extended release 12 hour 1200 mg</i>	77	<i>nasal decongestant 12hr</i>	93	<i>nausea relief oral solution 1.87-1.87-21.5</i> ...	15
<i>mucus relief max st</i>	77	<i>nasal decongestant max st</i>	93	NEODOT THERMOMETER.....	63
<i>mucus relief max strength oral tablet extended release 12 hour 1200 mg</i>	77	<i>nasal decongestant oral tablet 30 mg</i>	93	NEOMULTIVITE.....	31
<i>mucus relief oral tablet</i>	77	<i>nasal decongestant oral tablet extended release 12 hour 120 mg</i>	93	NEONATAL PLUS.....	31
<i>mucus+chest congestion</i>	77	<i>nasal decongestant pe max st</i>	78	NEOSPORIN ORIGINAL.....	14
<i>mucus-d oral tablet extended release 12 hour 60-600 mg</i>	92	<i>nasal decongestant pe oral tablet 10 mg</i>	78	NEO-SYNEPHRINE COLD/ALLRG MILD ...	78
<i>mucus-dm</i>	93	<i>nasal decongestant pe oral tablet 30 mg</i>	93	NEO-SYNEPHRINE COLD/ALLRGY EXT ...	78
<i>mucus-er oral tablet extended release 12 hour 1200 mg</i>	77	<i>nasal decongestant spray</i>	93	NEO-SYNEPHRINE COLD/ALLRGY REG ..	78
<i>multi vitamin</i>	31	<i>nasal four</i>	78	<i>nephro vitamins</i>	31
<i>multi vitamin w/d-3</i>	31	<i>nasal four spray</i>	78	NEPHRO-VITE.....	31
<i>multiple vitamin-folic acid</i>	31	<i>nasal mist nasal solution</i>	93	NEUTROGENA OIL-FREE ACNE WASH...	63
<i>multiple vitamins essential</i>	31	<i>nasal mist no drip</i>	93	<i>new day</i>	56
<i>multiple vitamins/iron</i>	98	NASAL MOIST NASAL SOLUTION.....	78	NEWFLORA PROBIOTIC.....	46
MULTIPRO.....	98	<i>nasal moisturizing spray</i>	78	<i>niacin er oral capsule extended release 250 mg</i>	32
<i>multi-vitamin</i>	31	<i>nasal relief</i>	93	<i>niacin er oral capsule extended release 500 mg</i>	32
<i>multi-vitamin/fluoride</i>	31	<i>nasal spray 12 hour</i>	93	<i>niacin er oral tablet extended release 1000 mg</i>	32
<i>multi-vitamin/fluoride/iron</i>	31	<i>nasal spray extra moist</i>	93	<i>niacin er oral tablet extended release 250 mg, 500 mg</i>	32
<i>multi-vitamin/iron</i>	98	<i>nasal spray extra moisturizing</i>	93	<i>niacin oral tablet 100 mg, 250 mg, 50 mg</i>	32
MURO 128 OPHTHALMIC OINTMENT.....	68	<i>nasal spray fast acting</i>	78	NICODERM CQ.....	12
MURO 128 OPHTHALMIC SOLUTION 5 %.....	68	<i>nasal spray nasal solution 0.05 %</i>	93	NICORETTE.....	13
<i>my choice</i>	56	<i>nasal spray nasal solution 1 %</i>	78	NICORETTE MINI.....	13
<i>my way</i>	56	<i>nasal spray no drip</i>	93	NICORETTE STARTER KIT.....	13
MYLICON INFANTS GAS RELIEF.....	46	<i>nasal spray saline</i>	78	<i>nicotine gum mouth/throat gum 2 mg</i>	13
<i>mynephrocaps oral capsule 1 mg</i>	31	<i>nasal spray sinus</i>	93	<i>nicotine gum mouth/throat gum 4 mg</i>	13
MYNEPHRON.....	31	NASALCROM.....	85	<i>nicotine gum mouth/throat lozenge 2 mg</i>	13
NAPHCON-A.....	70	NASCOBAL.....	101	<i>nicotine gum mouth/throat lozenge 4 mg</i>	13
<i>naproxen sodium oral tablet 220 mg</i>	4	<i>natural daily fiber oral powder 58.6 %</i>	50	<i>nicotine mini</i>	13
NARAMIN.....	75	<i>natural fiber oral capsule 0.52 gm</i>	50	<i>nicotine mouth/throat gum 2 mg</i>	13
		<i>natural fiber oral powder 28.3 %, 58.6 %</i>	50	<i>nicotine mouth/throat gum 4 mg</i>	13
		<i>natural fiber supplement</i>	50	<i>nicotine mouth/throat lozenge 2 mg</i>	13
		<i>natural senna laxative</i>	53		
		<i>natural tears pf</i>	68		
		<i>natural vegetable</i>	50		

<i>nicotine mouth/throat lozenge 4 mg</i>	13	OCEAN NASAL SPRAY.....	78	<i>oyster shell calcium plus d</i>	27
<i>nicotine polacrilex mini</i>	13	OCUVEL.....	99	<i>oyster shell calcium w/d</i>	28
<i>nicotine polacrilex mouth/throat</i>	13	<i>ointment base</i>	22	<i>oyster shell calcium/d oral tablet 250-3.125</i>	
<i>nicotine step 1</i>	12	<i>olopatadine hcl ophthalmic</i>	66	<i>mg-mcg</i>	99
<i>nicotine step 2</i>	12	<i>omeprazole capsule delayed release 20</i>		<i>oyster shell calcium/d oral tablet 250-6.25</i>	
<i>nicotine step 3</i>	12	<i>mg oral</i>	37	<i>mg-mcg</i>	28
<i>nicotine transdermal patch 24 hour 14</i>		<i>omeprazole magnesium</i>	37	<i>oyster shell calcium/vit d</i>	28
<i>mg/24hr, 7 mg/24hr</i>	12	<i>omeprazole magnesium oral capsule</i>		<i>oyster shell calcium/vit d3 oral tablet 500-5</i>	
<i>nicotine transdermal patch 24 hour 21</i>		<i>delayed release</i>	37	<i>mg-mcg</i>	28
<i>mg/24hr</i>	12	<i>omeprazole oral capsule delayed release</i>		<i>oyster shell calcium/vitamin d oral tablet</i>	
<i>nicotine transdermal system</i>	12	<i>20.6 (20 base) mg</i>	37	<i>250-3.125 mg-mcg</i>	99
<i>nighttime dry-eye relief</i>	69	OMNIFLEX DIAPHRAGM.....	63	<i>oyster shell calcium/vitamin d oral tablet</i>	
<i>nighttime relief lub eye</i>	69	<i>once daily</i>	32	<i>500-5 mg-mcg</i>	28
<i>no drip extra moisturizing</i>	94	<i>one daily</i>	32	<i>p col-rite</i>	53
<i>no drip nasal relief</i>	94	ONE DAILY ESSENTIALS.....	32	<i>pain & fever child</i>	9
<i>no drip nasal spray</i>	94	ONE VITE DAILY MULTIVITAMIN.....	32	<i>pain & fever childrens oral suspension 160</i>	
<i>no drip original 12 hours</i>	94	ONE VITE WOMENS.....	32	<i>mg/5ml</i>	9
<i>nohist-lq</i>	81	ONE VITE WOMENS PLUS.....	32	<i>pain & fever childrens oral tablet chewable</i>	
<i>non-aspirin</i>	9	<i>one-daily multi vitamins</i>	32	<i>160 mg</i>	9
<i>non-aspirin 8 hour</i>	9	<i>one-daily multi-vitamin</i>	32	<i>pain & fever infants oral suspension 160</i>	
<i>non-aspirin childrens</i>	9	<i>one-daily multi-vitamin/iron</i>	99	<i>mg/5ml</i>	9
<i>non-aspirin extra strength</i>	9	<i>one-daily/iron</i>	99	<i>pain and fever relief kids</i>	9
<i>non-aspirin jr strength</i>	9	ONELAX.....	63	<i>pain relief childrens oral elixir 160 mg/5ml</i> ...	10
<i>non-aspirin pain relief</i>	9	ONELAX DOCUSATE SODIUM.....	53	<i>pain relief childrens oral suspension</i>	10
<i>non-pseudo sinus decongestant</i>	78	ONELAX MAGNESIUM CITRATE.....	53	<i>pain relief childrens oral tablet chewable</i>	
<i>nose drops extstrength</i>	78	ONELAX SENNA.....	53	<i>160 mg</i>	10
NOVAMV PEDIATRIC MULTI-VITAMIN.....	98	<i>opcicon one-step</i>	56	<i>pain relief extra st</i>	10
NOVOLIN 70/30 RELION.....	19	OPILL.....	63	<i>pain relief extra strength oral capsule 500</i>	
NOVOLIN 70/30 VIAL.....	19	<i>option 2</i>	56	<i>mg</i>	10
NOVOLIN N RELION.....	19	<i>oralyte</i>	27	<i>pain relief extra strength oral liquid 500</i>	
NOVOLIN N VIAL.....	19	OS-CAL CALCIUM + D3.....	27	<i>mg/15ml</i>	10
NOVOLOG MIX 70/30 VIAL.....	19	OVACE PLUS WASH EXTERNAL LIQUID.....	63	<i>pain relief extra strength oral tablet 500 mg</i>	10
NU-IRON.....	27	OVACE WASH.....	64	<i>pain relief oral liquid 500 mg/15ml</i>	10
NULEV.....	63	OVIDREL.....	56	<i>pain relief oral tablet 325 mg</i>	10
NUTRAPLUS.....	23	OXYCODONE-ACETAMINOPHEN ORAL		<i>pain relief oral tablet extended release 650</i>	
<i>nutrifac zx</i>	98	<i>SOLUTION 5-325 MG/5ML</i>	4	<i>mg</i>	10
OBSTETRIX DHA.....	32	OXYTROL FOR WOMEN.....	55	<i>pain relief regular strength</i>	10
OBTREX.....	99	<i>oysco 500+d</i>	27	<i>pain relief rapid burst</i>	10
OCEAN FOR KIDS.....	78	<i>oyster shell calcium oral tablet 500 mg</i>	99	<i>pain reliever ex st oral liquid 500 mg/15ml</i> ...	10

<i>pain reliever ex st oral tablet 500 mg</i>	10	<i>phenylephrine hcl oral</i>	79	<i>prenatal oral tablet 28-0.8 mg</i>	33
<i>pain reliever extra strength oral tablet 250-250-65 mg</i>	10	PHOSPHA 250 NEUTRAL.....	28	<i>prenatal vitamins oral tablet 28-0.8 mg</i>	33
<i>pain reliever extra strength oral tablet 500 mg</i>	11	PHOSPHOLINE IODIDE.....	66	<i>prenatal/iron</i>	33
<i>pain reliever oral suspension 160 mg/5ml</i>	11	<i>phosphorous</i>	28	PREVACID 24HR.....	37
<i>pain reliever oral tablet 325 mg</i>	11	<i>phospho-trin 250 neutral</i>	28	<i>probiotic acidophilus oral capsule</i>	47
<i>pain reliever oral tablet 500 mg</i>	11	PHOSPHO-TRIN K500.....	28	<i>probiotic blend</i>	47
<i>pain reliever plus</i>	11	<i>phytonadione injection solution 10 mg/ml</i>	32	<i>probiotic colon care</i>	47
<i>pain-off</i>	11	<i>phytonadione oral</i>	32	<i>probiotic complex</i>	47
PANADOL CHILDRENS.....	11	<i>pink bismuth maximum strength</i>	46	<i>probiotic maximum strength</i>	47
PANADOL EXTRA STRENGTH.....	11	<i>pink bismuth oral suspension 262 mg/15ml</i> .46	46	<i>probiotic oral capsule</i>	47
PANADOL INFANTS.....	11	<i>pink bismuth oral suspension 525 mg/15ml</i> .46	46	<i>probiotic oral capsule 250 mg</i>	47
PANOXYL.....	64	<i>pink bismuth oral tablet 262 mg</i>	46	<i>probiotic pearls ex st</i>	47
PATADAY OPHTHALMIC SOLUTION 0.1 % , 0.2 %.....	66	<i>pink bismuth oral tablet chewable 262 mg</i> ...46	46	<i>promethazine-codeine oral solution</i>	94
<i>ped electrolyte freeze pop</i>	28	<i>pink bismuth ultra str</i>	46	<i>promethazine-dm</i>	94
PEDIA-LAX ORAL LIQUID.....	53	<i>pink-bismuth</i>	47	PRONUTRIENTS VITAMIN D3.....	33
PEDIALYTE FREEZER POPS.....	28	PLAN B ONE-STEP.....	56	PROXIVOL.....	12
PEDIALYTE IMMUNE SUPPORT.....	28	<i>poly bacitracin</i>	64	<i>pseudoephedrine hcl 12 hr</i>	94
PEDIALYTE ORAL SOLUTION.....	28	<i>polyethylene glycol 3350 oral powder</i>	50	<i>pseudoephedrine hcl er</i>	94
PEDIALYTE SINGLES.....	28	<i>polyethylene glycol 3350-grx oral powder</i> ..51	51	<i>pseudoephedrine hcl oral tablet 30 mg</i>	94
<i>pediatric electrolyte oral solution</i>	28	<i>poly-iron 150</i>	28	<i>pseudoephedrine-bromphen-dm</i>	79
<i>peg 3350 oral powder</i>	50	<i>poly-iron 150 forte</i>	28	<i>pseudoephedrine-guaifenesin er</i>	94
PEPCID AC.....	37	<i>polysaccharide iron complex</i>	28	<i>psyldex</i>	51
PEPTO-BISMOL ORAL SUSPENSION 524 MG/30ML.....	46	<i>polysaccharide iron forte</i>	28	<i>pure & gentle lubricant</i>	69
PERDIEM OVERNIGHT RELIEF.....	53	<i>polysaccharide-iron complex</i>	28	<i>purelax oral powder</i>	51
<i>pharbedryl</i>	75	POLYSPORIN.....	64	PYRIDIDIUM.....	55
PHARBETOL.....	11	<i>polyvinyl alcohol ophthalmic</i>	69	<i>pyridoxine hcl oral</i>	101
PHARBETOL EXTRA STRENGTH.....	11	<i>potassium citrate-citric acid</i>	29	<i>quazepam</i>	18
<i>pharbinex</i>	78	<i>prenatal 19 oral tablet</i>	32	QUFLORA PEDIATRIC ORAL SOLUTION 0.5 MG/ML.....	33
PHAZYME.....	46	<i>prenatal formula</i>	32	<i>quit2</i>	13
PHAZYME ULTRA STRENGTH.....	46	<i>prenatal formula oral tablet 28-0.8 mg</i>	32	<i>quit4</i>	13
<i>phenazo oral tablet 200 mg</i>	55	<i>prenatal gummy oral tablet chewable 0.4 mg</i>	101	<i>radiance platinum vitamin d3</i>	33
<i>phenazo oral tablet 95 mg</i>	55	<i>prenatal gummy oral tablet chewable 0.4-113.5 mg</i>	99	<i>react</i>	56
<i>phenazopyridine hcl oral tablet 100 mg</i>	55	<i>prenatal gummy oral tablet chewable 0.4-25 mg</i>	32	<i>ready-to-use enema rectal enema</i>	47
<i>phenazopyridine hcl oral tablet 200 mg</i>	55	<i>prenatal gummy oral tablet chewable 0.4-25 mg</i>	32	<i>refenesen 400</i>	79
<i>phenazopyridine hcl oral tablet 95 mg</i>	55	<i>prenatal multi+dha</i>	32	REFRESH LACRI-LUBE.....	69
		<i>prenatal multivitamins</i>	32	REFRESH PLUS.....	69
		<i>prenatal oral tablet 27-0.8 mg</i>	33	REFRESH TEARS.....	69
				REHYDRALYTE.....	29

REJUVAFLOR.....	47	<i>sb pain reliever childrens</i>	11	<i>sinus relief extra strength</i>	79
RELEUKO.....	19	<i>scalp relief external liquid 3 %</i>	64	<i>sinus/congestion relief pe</i>	79
<i>relief eye drops</i>	69	<i>senexon-s</i>	53	SLO-NIACIN.....	33
REMEDIENT.....	99	<i>senior probiotic</i>	47	<i>smooth antacid ex st oral tablet chewable</i>	
RENAL.....	33	<i>senna lax</i>	54	<i>750 mg</i>	48
<i>rena-vite</i>	33	<i>senna laxative</i>	54	<i>smooth antacid extra st</i>	48
<i>renewal soothing bath</i>	22	<i>senna oral liquid 8.8 mg/5ml</i>	54	<i>smooth antacid extra strength</i>	48
RESTORA.....	47	<i>senna oral syrup 176 mg/5ml</i>	54	<i>smooth lax oral powder</i>	51
<i>restore plus lubricant eye</i>	69	<i>senna oral syrup 8.8 mg/5ml</i>	54	<i>sod chloride hypertonicity</i>	69
<i>restore pm</i>	69	<i>senna oral tablet 8.6 mg</i>	54	<i>sod citrate-citric acid oral solution 500-334</i>	
REVITAFLO.....	47	<i>senna plus oral tablet</i>	54	<i>mg/5ml</i>	29
REXTOVY.....	12	<i>senna s</i>	54	<i>sodium bicarbonate oral tablet</i>	48
RISAQUAD.....	47	<i>senna smooth</i>	54	<i>sodium chloride</i>	69
RISAQUAD-2.....	47	<i>senna-docusate sodium</i>	54	<i>sodium chloride (hypertonic)</i>	69
ROBAFEN CF MULTI-SYMPTOM COLD....	81	<i>senna-lax</i>	54	<i>sodium sulfacetamide wash</i>	64
ROBITUSSIN 12 HOUR COUGH.....	94	<i>senna-plus</i>	54	<i>soft glucose</i>	19
ROBITUSSIN 12 HOUR COUGH CHILD....	94	<i>senna-s</i>	54	<i>soluble fiber therapy</i>	54
ROBITUSSIN CHILD COUGH/COLD LA....	79	<i>senna-tabs</i>	54	<i>soothe maximum strength</i>	48
ROBITUSSIN CHILDRENS COUGH LA....	79	<i>senna-time</i>	54	<i>soothe oral suspension</i>	48
ROBITUSSIN COUGH+CHEST CONG		<i>senna-time s</i>	54	<i>soothe oral tablet chewable</i>	48
DM ORAL LIQUID 20-400 MG/20ML.....	94	<i>sennazon</i>	54	<i>sorbitol oral</i>	51
ROBITUSSIN NIGHTTIME COUGH.....	79	<i>sennosides-docusate sodium</i>	54	<i>sss 10-5 external cream</i>	22
ROBITUSSIN PEAK COLD MULTI-SYM....	81	SENOKOT.....	54	ST JOSEPH LOW DOSE.....	64
ROXYBOND ORAL TABLET ABUSE-		SENOKOT S.....	54	<i>stimulant lax plus</i>	54
DETERRENT 15 MG.....	4	SENTIA.....	69	<i>stimulant laxative</i>	54
ROXYBOND ORAL TABLET ABUSE-		<i>siladryl allergy</i>	75	<i>stomach relief extra strength</i>	48
DETERRENT 30 MG.....	4	<i>siltussin sa</i>	79	<i>stomach relief max st oral suspension 525</i>	
<i>rynex dm</i>	94	<i>simeped</i>	47	<i>mg/15ml</i>	48
<i>rynex pe</i>	94	<i>simethicone drops infants</i>	47	<i>stomach relief oral suspension 1050</i>	
<i>rynex pse</i>	94	<i>simethicone oral capsule</i>	47	<i>mg/30ml, 525 mg/15ml</i>	48
<i>saccharomyces boulardii</i>	47	<i>simethicone oral suspension</i>	47	<i>stomach relief oral suspension 262</i>	
<i>saline enema</i>	47	<i>simethicone oral tablet chewable</i>	47	<i>mg/15ml, 525 mg/30ml, 527 mg/30ml</i>	48
<i>saline mist spray</i>	79	<i>simethicone ultra strength</i>	48	<i>stomach relief oral tablet 262 mg</i>	48
<i>saline nasal spray</i>	79	<i>sinus & congestion max str</i>	94	<i>stomach relief oral tablet chewable 262 mg</i>	48
<i>salsalate oral</i>	12	<i>sinus 12 hour</i>	95	<i>stomach relief plus</i>	48
<i>sb arthritis pain relief</i>	11	<i>sinus 12-hour</i>	95	<i>stomach relief ultra</i>	48
<i>sb docusate sodium/senna</i>	53	<i>sinus congestion max strength</i>	95	<i>stool softener extra str</i>	54
<i>sb lice killing max st</i>	18	<i>sinus nasal spray</i>	95	<i>stool softener laxative oral capsule</i>	54
<i>sb mucus relief</i>	79	<i>sinus pe decongestant</i>	79	<i>stool softener oral capsule 100 mg</i>	54

<i>stool softener oral capsule 240 mg</i>	54	SYSTANE.....	69	TRIAMINIC ALLERCHEWS.....	84
<i>stool softener oral capsule 250 mg</i>	54	SYSTANE BALANCE.....	69	TRICON.....	29
<i>stool softener oral capsule 50 mg</i>	55	SYSTANE COMPLETE.....	69	<i>triphrocaps</i>	33
<i>stool softener pls laxative</i>	55	SYSTANE CONTACTS.....	69	<i>triple antibiotic external ointment , 3.5-400-5000 , 5-400-5000 , 5-400-5000 mg-unit</i>	14
<i>stool softener plus laxative</i>	55	SYSTANE HYDRATION PF.....	69	<i>triple antibiotic original</i>	14
<i>stool softener/laxative</i>	55	SYSTANE NIGHTTIME.....	69	TRITOLNACIDE C.....	65
<i>stool softener/laxative oral tablet</i>	55	SYSTANE PRESERVATIVE FREE.....	69	TRITOLNACIDE S.....	65
<i>stress formula</i>	33	SYSTANE ULTRA.....	69	<i>tri-vite pediatric</i>	34
<i>stress formula/iron</i>	99	SYSTANE ULTRA PF.....	69	<i>tri-vite/fluoride</i>	99
<i>stress formula/zinc/energy</i>	33	<i>tab tussin</i>	79	TRUE COVER.....	65
STUART ONE.....	33	<i>tab-a-vite/beta carotene</i>	33	TRUE DAILY VITE.....	34
SUDAFED.....	95	TAGAMET HB 200.....	37	TRUE FERROUS SULFATE.....	29
SUDAFED CHILDRENS.....	95	<i>take action</i>	56	TRUE FOLIC ACID ORAL TABLET 1 MG... 65	65
SUDAFED PE CONGESTION ORAL TABLET 10 MG.....	79	TEENY TUMMY GAS RELIEF DROPS.....	49	TRUE FOLIC ACID ORAL TABLET 400 MCG.....	65
SUDAFED PE SINUS CONGESTION.....	79	<i>terbinafine hcl external</i>	17	TRUE LAXATIVE.....	51
SUDAFED SINUS CONGESTION.....	95	<i>terbinafine hydrochloride external cream 1 %</i>	17	TRUE MAGNESIUM OXIDE.....	29
SUDAFED SINUS CONGESTION 12HR.....	95	<i>tgt clotrimazole external cream 1 %</i>	21	TRUE MULTIVITAMIN.....	34
<i>sudogest maximum strength</i>	95	<i>the magic bullet</i>	64	TRUE NASAL MOISTURIZING.....	79
<i>sudogest oral tablet 30 mg</i>	95	<i>theophylline er oral tablet extended release 12 hour 100 mg, 200 mg</i>	75	<i>true oyster shell calcium</i>	99
<i>sulfacetamide sodium external</i>	64	THERA.....	33	TRUE VITAMIN A.....	34
<i>sulfacetamide sodium-sulfur external cream 10-5 %</i>	22	<i>thera-tabs</i>	33	TRUE VITAMIN B1 ORAL TABLET 100 MG.....	34
<i>sulfacetamide sodium-sulfur external liquid 9-4.5 %</i>	23	<i>thiamine hcl oral</i>	101	TRUE VITAMIN B3 ORAL TABLET 100 MG, 250 MG, 50 MG.....	34
<i>sulfacetamide sod-sulfur wash external liquid 9-4.5 %</i>	23	<i>thiamine mononitrate oral</i>	33	TRUE VITAMIN B6 ORAL TABLET 100 MG, 25 MG, 50 MG.....	101
<i>sulfamez wash</i>	23	THRIVE.....	13	TRUE VITAMIN C.....	99
SUMADAN WASH.....	23	TINACTIN EXTERNAL CREAM.....	64	TRUE VITAMIN D3 ORAL CAPSULE 1.25 MG (50000 UT).....	34
<i>suphedrine 12hour</i>	95	<i>tinaspore</i>	64	TRUE VITAMIN D3 ORAL CAPSULE 10 MCG (400 UNIT), 50 MCG (2000 UT).....	34
<i>suphedrine maximum strength</i>	95	TM-TOLNAFTATE.....	64	TRUE VITAMIN D3 ORAL CAPSULE 125 MCG (5000 UT), 25 MCG (1000 UT).....	34
<i>suphedrine oral tablet 30 mg</i>	95	TM-TOLNAFTATE LR.....	64	TRUE VITAMIN D3 ORAL CAPSULE 250 MCG (10000 UT).....	34
<i>suphedrine oral tablet extended release 12 hour 120 mg</i>	95	<i>toe area treatment max str</i>	64	TRUE VITAMIN D3 ORAL TABLET 10 MCG (400 UNIT).....	34
SUPPORT.....	99	TOLNAFI-AL.....	64		
<i>sure result sr relief</i>	64	<i>tolnaftate antifungal external cream</i>	64		
<i>sv vitamin d3 oral capsule 25 mcg</i>	33	<i>tolnaftate external cream</i>	64		
<i>sv vitamin d3 oral capsule 50 mcg</i>	33	<i>tolnaftate external powder</i>	64		
<i>sv vitamin d3 oral tablet chewable</i>	33	<i>total allergy</i>	75		
		<i>total allergy medicine</i>	75		
		<i>travel ease</i>	14		
		<i>triamcinolone acetonide nasal</i>	85		

TRUE VITAMIN D3 ORAL TABLET 125 MCG (5000 UT).....	34	tussin maximum strength oral syrup 15 mg/5ml.....	80	vegetable laxative.....	55
TRUE VITAMIN E ORAL CAPSULE 450 MG, 90 MG.....	101	tussin mucus & chest cong.....	80	vic-forte.....	99
TRUEPLUS GLUCOSE ON THE GO.....	19	tussin mucus & chest congest.....	80	VISINE.....	70
TRUEPLUS GLUCOSE ORAL TABLET CHEWABLE.....	19	tussin mucus/chest congest.....	80	vit c/rose hips.....	99
TUMS.....	49	tussin mucus/congestion.....	80	vita s forte.....	99
TUMS CHEWY BITES.....	49	tussin mucus+chest congest.....	80	vitacel.....	99
TUMS E-X 750.....	49	tussin mucus+chest congestion.....	80	vitachew vitamin d3.....	34
TUMS EXTRA STRENGTH 750.....	49	tussin multi-symptom cold cf.....	81	vitamin a oral capsule 2400 mcg (8000 ut), 3 mg, 3 mg (10000 ut).....	34
TUMS LASTING EFFECTS.....	49	tussin oral liquid 100 mg/5ml.....	80	vitamin b complex w/b-12.....	34
TUMS SMOOTHIES.....	49	TYENNE SUBCUTANEOUS.....	65	vitamin b1.....	101
TUMS ULTRA 1000.....	49	TYLENOL FOR CHILDREN + ADULTS.....	11	vitamin b-1 oral tablet 100 mg.....	34
tusnel-ex.....	79	TYLENOL ORAL SUSPENSION 160 MG/5ML.....	11	vitamin b-1 oral tablet 250 mg.....	101
tussin adult chest congest.....	79	TYLENOL ORAL TABLET 325 MG, 500 MG.....	11	vitamin b-12 er oral tablet extended release 1000 mcg.....	101
tussin cf oral liquid 30-10-100 mg/5ml.....	95	TYLENOL ORAL TABLET CHEWABLE 160 MG.....	11	vitamin b12 oral tablet extended release 1000 mcg.....	101
tussin cf oral liquid 5-10-100 mg/5ml.....	81	TYLENOL ORAL TABLET EXTENDED RELEASE 650 MG.....	11	vitamin b-12 tr oral tablet extended release 1000 mcg.....	101
tussin chest congestion oral liquid 100 mg/5ml.....	79	ultra calcium + vitamin d3.....	29	vitamin b-6.....	101
tussin cough dm sugar free.....	95	ultra fresh.....	70	vitamin b-6 er.....	101
tussin cough long acting.....	80	ultra fresh pm.....	70	vitamin c cr oral tablet extended release 500 mg.....	99
tussin cough oral syrup.....	80	ultra lubricant drop.....	70	vitamin c er oral tablet extended release 1500 mg.....	99
tussin cough/chest dm max oral liquid 10- 200 mg/5ml.....	95	ultra lubricating eye drops.....	70	vitamin c oral liquid 500 mg/5ml.....	100
tussin cough/chest dm max oral liquid 20- 400 mg/20ml.....	95	ultra lubricating eye drops pf.....	70	vitamin c oral tablet 1000 mg, 250 mg.....	100
tussin dm cough + chest oral liquid 20-400 mg/20ml.....	96	urea 20 intensive hydrating.....	23	vitamin c oral tablet 500 mg.....	100
tussin dm cough/chest cong.....	96	urea external cream 10 %.....	23	vitamin c oral tablet chewable 100 mg, 250 mg.....	100
tussin dm cough/chest oral syrup 10-100 mg/5ml.....	96	urea external cream 20 %.....	23	vitamin c oral tablet chewable 500 mg.....	100
tussin dm max adult.....	96	urea external lotion.....	23	vitamin c/oral tablet chewable 1000 mg.....	100
tussin dm max daytime.....	96	ureacin-10.....	23	vitamin c/oral tablet 500 mg.....	100
tussin dm max oral liquid 20-400 mg/20ml.....	96	ureacin-20.....	23	vitamin c/rose hips oral tablet 1000 mg.....	100
tussin dm max st.....	96	urinary pain relief oral tablet 95 mg.....	55	vitamin c/rose hips oral tablet 500 mg.....	100
tussin dm oral syrup 100-10 mg/5ml.....	96	URO-PAIN.....	55	vitamin c-rose hips.....	100
tussin expectorant adult.....	80	VAPORIZER WARM STEAM.....	65	vitamin c-rose hips oral tablet.....	100
		VASOCLEAR-A.....	70	vitamin d (cholecalciferol) oral tablet 10 mcg (400 unit).....	34
		VAXELIS.....	65		
		v-c forte.....	99		
		vegetable lax+stool softener.....	55		

<i>vitamin d (cholecalciferol) oral tablet 25 mcg (1000 ut)</i>	34	<i>weekly-d</i>	36
<i>vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit</i>	100	<i>wescaps</i>	36
<i>vitamin d oral capsule 25 mcg (1000 ut)</i>	34	<i>wes-phos 250 neutral</i>	29
<i>vitamin d oral liquid</i>	34	<i>WIDE-SEAL DIAPHRAGM 60</i>	65
<i>vitamin d oral tablet chewable 10 mcg (400 unit)</i>	35	<i>WIDE-SEAL DIAPHRAGM 65</i>	65
<i>vitamin d3 oral capsule 1.25 mg (50000 ut)</i> ..	35	<i>WIDE-SEAL DIAPHRAGM 70</i>	65
<i>vitamin d3 oral capsule 125 mcg (5000 ut)</i> ..	35	<i>WIDE-SEAL DIAPHRAGM 75</i>	65
<i>vitamin d-3 oral capsule 125 mcg (5000 ut)</i> ..	35	<i>WIDE-SEAL DIAPHRAGM 80</i>	65
<i>vitamin d3 oral capsule 25 mcg (1000 ut)</i>	35	<i>WIDE-SEAL DIAPHRAGM 85</i>	65
<i>vitamin d3 oral capsule 250 mcg (10000 ut)</i>	35	<i>WIDE-SEAL DIAPHRAGM 90</i>	65
<i>vitamin d3 oral capsule 50 mcg (2000 ut)</i>	35	<i>WIDE-SEAL DIAPHRAGM 95</i>	65
<i>vitamin d-3 oral capsule 50 mcg (2000 ut)</i> ...	35	<i>womans laxative</i>	65
<i>vitamin d3 oral liquid 10 mcg/ml</i>	35	<i>womens gentle laxative</i>	65
<i>vitamin d3 oral tablet 10 mcg (400 unit)</i>	35	<i>womens laxative oral tablet delayed release 5 mg</i>	65
<i>vitamin d3 oral tablet 125 mcg (5000 ut)</i>	35	<i>womens prenatal+dha</i>	36
<i>vitamin d3 oral tablet 25 mcg (1000 ut)</i>	35	<i>XERAC AC</i>	23
<i>vitamin d-3 oral tablet 25 mcg (1000 ut)</i>	35	<i>XPECT</i>	80
<i>vitamin d3 oral tablet 50 mcg (2000 ut)</i>	35	<i>ZADITOR</i>	70
<i>vitamin d3 oral tablet chewable 10 mcg (400 unit)</i>	35	<i>ZEASORB-AF</i>	17
<i>vitamin d3 oral tablet chewable 25 mcg (1000 ut)</i>	35	<i>ZELAC</i>	49
<i>vitamin d-400 oral tablet 10 mcg (400 unit)</i> ..	36	<i>ZIMHI</i>	12
<i>vitamin e natural</i>	101	<i>zinc oral tablet 50 mg</i>	100
<i>vitamin e oral capsule 134 mg (200 unit), 45 mg (100 unit), 450 mg (1000 ut), 90 mg (200 unit)</i>	101	<i>zinc oxide external ointment 40 %</i>	23
<i>vitamin e oral capsule 268 mg (400 unit)</i> ...	101	<i>ZOSTRIX HP</i>	65
<i>vitamin k1 injection solution 10 mg/ml</i>	36	<i>ZULRESSO</i>	14
<i>vitamin-b complex</i>	36	<i>ZYRTEC ALLERGY ORAL TABLET</i>	75
<i>vitamins acd-fluoride oral solution 0.25 mg/ml</i>	100	<i>ZYRTEC-D ALLERGY & CONGESTION</i>	81
<i>vitamins complete childrens</i>	100	<i>ZYRTEC-D ALLERGY & SINUS</i>	81
<i>wart remover external liquid 17 %</i>	65		
<i>wart remover maximum strength external liquid</i>	65		