



Effective Jan. 1, 2026

State of Michigan Wrap Coverage

Please read: This document contains information about the drugs covered under your pharmacy benefit plan.

For a complete list of covered drugs or if you have questions:



Call the toll-free member phone number on your ID card.



Visit your plan's member website listed on your ID card to:

- Locate a participating retail pharmacy by zip code.
- Look up possible lower-cost medication alternatives.
- Compare medication pricing and options.

State of Michigan

Drug Name	Drug Tier	Quantity Limit
Analgesics		
Nonsteroidal Anti-inflammatory Drugs		
adult aspirin regimen oral tablet delayed release 81 mg	1	
aspirin 81 oral tablet chewable 81 mg	1	
aspirin 81 oral tablet delayed release 81 mg	1	
aspirin adult low dose oral tablet delayed release 81 mg	1	
aspirin adult low strength oral tablet delayed release 81 mg	1	
aspirin childrens oral tablet chewable 81 mg	1	
aspirin ec adult low dose oral tablet delayed release 81 mg	1	
aspirin ec adult low strength oral tablet delayed release 81 mg	1	
aspirin ec low dose oral tablet delayed release 81 mg	1	
aspirin ec low strength oral tablet delayed release 81 mg	1	
aspirin low dose oral tablet chewable 81 mg	1	
aspirin low dose oral tablet delayed release 81 mg	1	
aspirin oral tablet chewable 81 mg	1	
aspirin oral tablet delayed release 81 mg	1	
aspirin regimen oral tablet delayed release 81 mg	1	

Drug Name	Drug Tier	Quantity Limit
BAYER ASPIRIN EC LOW DOSE ORAL TABLET DELAYED RELEASE 81 MG	2	
BAYER LOW DOSE ORAL TABLET CHEWABLE 81 MG	2	
BAYER LOW DOSE ORAL TABLET DELAYED RELEASE 81 MG	2	
childrens aspirin oral tablet chewable 81 mg	1	
cvs aspirin adult low dose oral tablet chewable 81 mg	1	
cvs aspirin adult low strength oral tablet delayed release 81 mg	1	
cvs aspirin ec oral tablet delayed release 81 mg	1	
cvs aspirin low dose oral tablet delayed release 81 mg	1	
cvs aspirin low strength oral tablet delayed release 81 mg	1	
ECOTRIN LOW STRENGTH ORAL TABLET DELAYED RELEASE 81 MG	2	
eq aspirin adult low dose oral tablet delayed release 81 mg	1	
eq aspirin low dose oral tablet chewable 81 mg	1	
eq aspirin low dose oral tablet delayed release 81 mg	1	
eql aspirin low dose oral tablet chewable 81 mg	1	
eql aspirin low dose oral tablet delayed release 81 mg	1	

Effective 1/1/2026

Drug Name	Drug Tier	Quantity Limit
ft aspirin low dose oral tablet delayed release 81 mg	1	
ft aspirin oral tablet chewable 81 mg	1	
gnp adult aspirin low strength oral tablet chewable 81 mg	1	
gnp aspirin low dose oral tablet delayed release 81 mg	1	
gnp aspirin oral tablet delayed release 81 mg	1	
goodsense aspirin low dose oral tablet delayed release 81 mg	1	
goodsense aspirin oral tablet chewable 81 mg	1	
h-e-b aspirin oral tablet delayed release 81 mg	1	
kls aspirin low dose oral tablet delayed release 81 mg	1	
kp aspirin oral tablet delayed release 81 mg	1	
mm aspirin oral tablet delayed release 81 mg	1	
qc aspirin low dose oral tablet chewable 81 mg	1	
qc aspirin low dose oral tablet delayed release 81 mg	1	
qc childrens aspirin oral tablet chewable 81 mg	1	
ra aspirin adult low dose oral tablet chewable 81 mg	1	
ra aspirin adult low strength oral tablet chewable 81 mg	1	
ra aspirin childrens oral tablet chewable 81 mg	1	

Drug Name	Drug Tier	Quantity Limit
ra aspirin ec adult low st oral tablet delayed release 81 mg	1	
ra aspirin ec oral tablet delayed release 81 mg	1	
sb childrens aspirin oral tablet chewable 81 mg	1	
sb low dose asa ec oral tablet delayed release 81 mg	1	
sm aspirin adult low strength oral tablet delayed release 81 mg	1	
sm aspirin low dose oral tablet chewable 81 mg	1	
sm childrens aspirin oral tablet chewable 81 mg	1	
ST JOSEPH ASPIRIN ORAL TABLET DELAYED RELEASE 81 MG	2	
ST JOSEPH LOW DOSE ORAL TABLET CHEWABLE 81 MG	2	
ST JOSEPH LOW DOSE ORAL TABLET DELAYED RELEASE 81 MG	2	
Anesthetics		
Local Anesthetics		
CETACAINE EXTERNAL AEROSOL 2-2-14 %	2	
ethyl chloride external aerosol	1	
Anti-Addiction/Substance Abuse Treatment Agents		
Smoking Cessation Agents		
cvs nicotine mouth/throat gum 2 mg, 4 mg	\$0	Y
cvs nicotine mouth/throat lozenge 2 mg	\$0	Y

Drug Name	Drug Tier	Quantity Limit
cvs nicotine polacrilex mouth/throat gum 2 mg, 4 mg	\$0	Y
cvs nicotine polacrilex mouth/throat lozenge 2 mg, 4 mg	\$0	Y
cvs nicotine transdermal patch 24 hour 14 mg/24hr, 21 mg/24hr, 7 mg/24hr	\$0	Y
eq nicotine mouth/throat gum 4 mg	\$0	Y
eq nicotine mouth/throat lozenge 4 mg	\$0	Y
eq nicotine polacrilex mouth/throat gum 2 mg, 4 mg	\$0	Y
eq nicotine polacrilex mouth/throat lozenge 2 mg, 4 mg	\$0	Y
eq nicotine step 3 transdermal patch 24 hour 7 mg/24hr	\$0	Y
eq nicotine transdermal patch 24 hour 14 mg/24hr, 21 mg/24hr	\$0	Y
ft nicotine mini mouth/throat lozenge 2 mg, 4 mg	\$0	Y
ft nicotine mouth/throat gum 2 mg, 4 mg	\$0	Y
ft nicotine mouth/throat lozenge 2 mg, 4 mg	\$0	Y
ft nicotine transdermal patch 24 hour 14 mg/24hr, 21 mg/24hr, 7 mg/24hr	\$0	Y
gnp nicotine mini mouth/throat lozenge 2 mg, 4 mg	\$0	Y
gnp nicotine polacrilex mouth/throat gum 2 mg	\$0	Y

Drug Name	Drug Tier	Quantity Limit
gnp nicotine polacrilex mouth/throat lozenge 2 mg, 4 mg	\$0	Y
gnp nicotine transdermal patch 24 hour 14 mg/24hr, 21 mg/24hr, 7 mg/24hr	\$0	Y
goodsense nicotine mouth/throat gum 2 mg, 4 mg	\$0	Y
goodsense nicotine mouth/throat lozenge 2 mg, 4 mg	\$0	Y
goodsense nicotine polacrilex mouth/throat gum 4 mg	\$0	Y
habitrol transdermal patch 24 hour 21 mg/24hr	\$0	Y
hm nicotine polacrilex mouth/throat gum 2 mg, 4 mg	\$0	Y
hm nicotine polacrilex mouth/throat lozenge 2 mg	\$0	Y
kls quit2 mouth/throat gum 2 mg	\$0	Y
kls quit2 mouth/throat lozenge 2 mg	\$0	Y
kls quit4 mouth/throat gum 4 mg	\$0	Y
kls quit4 mouth/throat lozenge 4 mg	\$0	Y
NICODERM CQ TRANSDERMAL PATCH 24 HOUR 14 MG/24HR, 21 MG/24HR, 7 MG/24HR	\$0	Y
NICORETTE MINI MOUTH/THROAT LOZENGE 2 MG, 4 MG	\$0	Y
NICORETTE MOUTH/THROAT GUM 2 MG, 4 MG	\$0	Y

Drug Name	Drug Tier	Quantity Limit
NICORETTE MOUTH/THROAT LOZENGE 2 MG, 4 MG	\$0	Y
NICORETTE STARTER KIT MOUTH/THROAT GUM 2 MG, 4 MG	\$0	Y
nicotine mini mouth/throat lozenge 2 mg, 4 mg	\$0	Y
nicotine polacrilex mini mouth/throat lozenge 2 mg	\$0	Y
nicotine polacrilex mouth/throat gum 2 mg, 4 mg	\$0	Y
nicotine polacrilex mouth/throat lozenge 2 mg, 4 mg	\$0	Y
nicotine step 1 transdermal patch 24 hour 21 mg/24hr	\$0	Y
nicotine step 2 transdermal patch 24 hour 14 mg/24hr	\$0	Y
nicotine step 3 transdermal patch 24 hour 7 mg/24hr	\$0	Y
nicotine transdermal kit 21-14-7 mg/24hr	\$0	Y
nicotine transdermal patch 24 hour 14 mg/24hr, 21 mg/24hr, 7 mg/24hr	\$0	Y
qc nicotine transdermal system transdermal patch 24 hour 14 mg/24hr, 21 mg/24hr	\$0	Y
ra mini nicotine mouth/throat lozenge 2 mg, 4 mg	\$0	Y
ra nicotine gum mouth/throat gum 2 mg, 4 mg	\$0	Y
ra nicotine mouth/throat gum 2 mg, 4 mg	\$0	Y

Effective 1/1/2026

Drug Name	Drug Tier	Quantity Limit
ra nicotine polacrilex mouth/throat lozenge 2 mg, 4 mg	\$0	Y
ra nicotine transdermal patch 24 hour 14 mg/24hr, 21 mg/24hr	\$0	Y
sm nicotine mouth/throat gum 4 mg	\$0	Y
sm nicotine mouth/throat lozenge 2 mg	\$0	Y
sm nicotine polacrilex mouth/throat gum 2 mg, 4 mg	\$0	Y
sm nicotine polacrilex mouth/throat lozenge 2 mg, 4 mg	\$0	Y
sm nicotine transdermal patch 24 hour 14 mg/24hr, 21 mg/24hr, 7 mg/24hr	\$0	Y
THRIVE MOUTH/THROAT GUM 2 MG	\$0	Y
Antibacterials		
Antibacterials, Other		
IV PREP WIPES EXTERNAL PAD 70 %	\$0	
MICROCLENS WIPES EXTERNAL PAD 30 %	\$0	
UNI-SOLVE EXTERNAL PAD	\$0	
Antifungals		
hydrocortisone-iodoquinol external cream 1-1 %	1	
IDOQUIMEZ-HC EXTERNAL CREAM 1-1.9 %	2	
iodoquinol-hc-aloe polysacch external gel 1-2-1 %	1	
iodoquinol-hydrocortisone-aloe external cream 1-1.9 %	1	

Drug Name	Drug Tier	Quantity Limit
VYTONE EXTERNAL CREAM 1-1.9 %	2	
Antineoplastics		
Alkylating Agents		
melphalan oral tablet 2 mg	1	
MYLERAN ORAL TABLET 2 MG	2	
temozolomide oral capsule 100 mg, 140 mg, 180 mg, 20 mg, 250 mg, 5 mg	1	
Antimetabolites		
capecitabine oral tablet 150 mg, 500 mg	1	
XELODA ORAL TABLET 150 MG, 500 MG	3	
Enzyme Inhibitors		
etoposide oral capsule 50 mg	1	
HYCAMTIN ORAL CAPSULE 0.25 MG, 1 MG	2	
Antivirals		
Antiherpetic Agents		
ABREVA EXTERNAL CREAM 10 %	2	
docosanol external cream 10 %	1	
eq docosanol external cream 10 %	1	
ft docosanol external cream 10 %	1	
gnp docosanol external cream 10 %	1	
Anti-HIV Agents, Integrase Inhibitors (INSTI)		
APRETUDE INTRAMUSCULAR SUSPENSION EXTENDED RELEASE 600 MG/3ML	2	

Drug Name	Drug Tier	Quantity Limit
Anti-HIV Agents, Other		
YEZTUGO ORAL TABLET 300 MG	2	
YEZTUGO SUBCUTANEOUS SOLUTION 463.5 MG/1.5ML	2	
Central Nervous System Agents		
Central Nervous System, Other		
ADIPEX-P ORAL TABLET 37.5 MG	3	
CONTRACE ORAL TABLET EXTENDED RELEASE 12 HOUR 8-90 MG	3	
diethylpropion hcl er oral tablet extended release 24 hour 75 mg	1	
diethylpropion hcl oral tablet 25 mg	1	
phendimetrazine tartrate er oral capsule extended release 24 hour 105 mg	1	
phentermine hcl oral capsule 15 mg, 30 mg, 37.5 mg	1	
phentermine hcl oral tablet 37.5 mg	1	
phentermine-topiramate er oral capsule extended release 24 hour 11.25-69 mg, 15-92 mg, 3.75-23 mg, 7.5-46 mg	1	
QSYMIA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 11.25-69 MG, 15-92 MG, 3.75-23 MG, 7.5-46 MG	3	
Dental and Oral Agents		
MUGARD MOUTH/THROAT LIQUID	3	

Effective 1/1/2026

Drug Name	Drug Tier	Quantity Limit
Dermatological Agents		
Dermatological Agents, Other		
ANALPRAM HC EXTERNAL CREAM 2.5-1 %	2	
ANALPRAM HC SINGLES EXTERNAL CREAM 2.5-1 %	2	
CORTANE-B EXTERNAL LOTION 10-10-1 MG/ML	2	
hydrocortisone ace-pramoxine external cream 2.5-1 %	1	
hydrocort-pramoxine (perianal) external cream 2.5-1 %	1	
hydroquinone external cream 4 %	1	
lidocaine-hydrocortisone ace rectal kit 3-2.5 %	1	
PRAMOSONE EXTERNAL CREAM 1-1 %, 1-2.5 %	2	
PRAMOSONE EXTERNAL OINTMENT 1-1 %, 1-2.5 %	2	
REGENECARE EXTERNAL GEL 2 %	3	
salicylic acid wart remover external liquid 27.5 %	1	
TRI-LUMA EXTERNAL CREAM 0.01-4-0.05 %	3	
VIRASAL EXTERNAL LIQUID 27.5 %	3	
Electrolytes/Minerals/Minerals/Vitamins		
Electrolyte/Mineral Replacement		
CHROMAGEN ORAL CAPSULE	2	

Drug Name	Drug Tier	Quantity Limit
CORVITE 150 ORAL TABLET	2	
CORVITE FE ORAL TABLET	2	
FERRALET 90 ORAL TABLET 90-1 MG	3	
FLORICAL ORAL CAPSULE 8.3-364 MG	2	
FLORICAL ORAL TABLET 8.3-364 MG	2	
FLORIVA ORAL LIQUID 0.25-400 MG-UNIT/ML	2	
FOLIVANE-F ORAL CAPSULE 125-1 MG	3	
FOLIVANE-PLUS ORAL CAPSULE	3	
GALZIN ORAL CAPSULE 25 MG	3	
HEMATOGEN ORAL CAPSULE	2	
INTEGRA F ORAL CAPSULE 125-1 MG	3	
INTEGRA PLUS ORAL CAPSULE	3	
iron complex oral capsule	1	
IRON FOLATE PLUS ORAL CAPSULE	3	
IRON FOLATE-F ORAL CAPSULE 125-1 MG	3	
iron sucrose intravenous solution 20 mg/ml	1	
K-PHOS-NEUTRAL ORAL TABLET 155-852-130 MG	2	
MONOCAL ORAL TABLET 625-22.75 MG	2	
MULTIGEN FOLIC ORAL TABLET 70-150-2-1 MG	2	
MULTIGEN PLUS ORAL TABLET	2	
NEPHRON FA ORAL TABLET	3	

Drug Name	Drug Tier	Quantity Limit
NIFEREX ORAL TABLET	2	
PHOSPHA 250 NEUTRAL ORAL TABLET 155-852-130 MG	2	
phosphorous oral tablet 155-852-130 mg	1	
phospho-trin 250 neutral oral tablet 155-852-130 mg	1	
SOLUVITA ORAL SOLUTION 0.5 MG/ML	2	
VENOFER INTRAVENOUS SOLUTION 20 MG/ML	3	
wes-phos 250 neutral oral tablet 155-852-130 mg	1	
Vitamins		
50+ adult eye health oral capsule	1	
a thru z advanced adult oral tablet	1	
a thru z advanced oral tablet	1	
a thru z high potency oral tablet	1	
a thru z select 50+ advanced oral tablet	1	
a thru z select 50+ mens oral tablet	1	
a thru z select advanced oral tablet	1	
a thru z select oral tablet	1	
a thru z select ultimate women oral tablet	1	
a thru z ultimate mens oral tablet	1	
ABC COMPLETE ADULT ORAL TABLET	2	
ABC COMPLETE MENS ORAL TABLET	2	

Drug Name	Drug Tier	Quantity Limit
ABC COMPLETE SENIOR 50+ ORAL TABLET	2	
ABC COMPLETE SENIOR MENS 50+ ORAL TABLET	2	
ABC COMPLETE SENIOR WOMENS 50+ ORAL TABLET	2	
ABC COMPLETE WOMENS ORAL TABLET	2	
actical oral capsule	1	
ACTIVNUTRIENTS ORAL CAPSULE	2	
ACTIVNUTRIENTS PERFORMANCE ORAL CAPSULE	2	
ACTIVNUTRIENTS W/O IRON ORAL CAPSULE	2	
advanced eye health oral capsule	1	
AFLORA ORAL TABLET	2	
ALIVE CALCIUM BONE SUPPORT ORAL TABLET	2	
ALIVE DAILY ENERGY ORAL TABLET	2	
ALIVE DIABETIC MULTIVITAMIN ORAL TABLET	2	
ALIVE ENERGY 50+ ORAL TABLET	2	
ALIVE EVERYDAY IMMUNE HEALTH ORAL CAPSULE	2	
ALIVE GARDEN GOODNESS ORAL TABLET	2	
ALIVE HAIR, SKIN & NAILS ORAL CAPSULE	2	
ALIVE MAX 6 POTENCY ORAL CAPSULE	2	

Effective 1/1/2026

Drug Name	Drug Tier	Quantity Limit
ALIVE MENS 50+ ORAL TABLET	2	
ALIVE MENS 50+ ULTRA ORAL TABLET	2	
ALIVE MENS COMPLETE MULTI ORAL TABLET	2	
ALIVE MENS ULTRA ORAL TABLET	2	
ALIVE ONCE DAILY WOMENS ORAL TABLET	2	
ALIVE ULTRA POTENCY ADULT ORAL TABLET	2	
ALIVE ULTRA POTENCY WOMENS 50+ ORAL TABLET	2	
ALIVE WOMENS 50+ COMPLETE MV ORAL TABLET	2	
ALIVE WOMENS ENERGY ORAL TABLET	2	
ALPHA BETIC ORAL TABLET	2	
AMORYN MOOD BOOSTER ORAL CAPSULE	2	
antioxidant a/c/e/selenium oral tablet	1	
antioxidant formula oral tablet	1	
antioxidant formula/minerals oral capsule	1	
antioxidant oral capsule	1	
antioxidant vitamins oral tablet	1	
APETIBEX ORAL CAPSULE	2	
APPE-CURB ORAL CAPSULE	2	

Drug Name	Drug Tier	Quantity Limit
ATABEX ORAL TABLET CHEWABLE 18-0.8 MG	2	
AZO HORMONAL HEALTH CYCLE CARE ORAL TABLET	2	
AZO HORMONAL HEALTH HAPPY CYCL ORAL TABLET	2	
BACMIN ORAL TABLET	2	
bariatric multivitamins oral capsule	1	
bariatric multivitamins oral tablet	1	
bariatric multivitamins/iron oral capsule	1	
basic am oral tablet	1	
basic pm oral tablet	1	
BIO-35 GLUTEN-FREE ORAL CAPSULE	2	
BIO-35 IRON FREE ORAL CAPSULE	2	
BIOCAL ORAL CAPSULE	2	
BIOCEL ORAL TABLET	2	
BIOTECT PLUS ORAL CAPSULE	2	
BLADDER 2.2 ORAL TABLET	2	
BLOOD SUGAR MANAGER ORAL TABLET	2	
body/hair/skin/nails oral capsule	1	
BONEUP 3 PER DAY ORAL CAPSULE	2	
BONEUP ORAL CAPSULE	2	
BONEUP VEGETARIAN ORAL TABLET	2	
BOOSTNOW IMMUNE SUPPORT ORAL CAPSULE	2	

Drug Name	Drug Tier	Quantity Limit
b-plex plus oral tablet	1	
CADEAU DHA ORAL CAPSULE 29-0.4-0.8-375 MG	2	
CELEBRATE MULTI-COMplete 18 ORAL CAPSULE	2	
CELEBRATE MULTI-COMplete 36 ORAL CAPSULE	2	
CELEBRATE MULTI-COMplete 45 ORAL CAPSULE	2	
CELEBRATE MULTI-COMplete 60 ORAL CAPSULE	2	
centavite a-z complete-mineral oral tablet	1	
centravites 50 plus oral tablet	1	
centravites adults oral tablet	1	
centravites oral tablet	1	
CENTRUM ADULTS ORAL TABLET	2	
CENTRUM CARDIO ORAL TABLET	2	
CENTRUM MEN ORAL TABLET	2	
CENTRUM MENOPAUSE HOT FLASH ORAL TABLET	2	
CENTRUM MINIS ADULTS 50+ ORAL TABLET	2	
CENTRUM MINIS MEN 50+ ORAL TABLET	2	
CENTRUM MINIS WOMEN 50+ ORAL TABLET	2	
CENTRUM MINIS WOMEN IMMUNE SUP ORAL TABLET	2	

Drug Name	Drug Tier	Quantity Limit
CENTRUM SILVER 50+MEN ORAL TABLET	2	
CENTRUM SILVER 50+WOMEN ORAL TABLET	2	
CENTRUM SILVER ADULT 50+ ORAL TABLET	2	
CENTRUM SILVER MEN 50+ ORAL TABLET	2	
CENTRUM SILVER ORAL TABLET	2	
CENTRUM SILVER ULTRA WOMENS ORAL TABLET	2	
CENTRUM SILVER WOMEN 50+ ORAL TABLET	2	
CENTRUM SPECIALIST HEART ORAL TABLET	2	
CENTRUM SPECIALIST IMMUNE ORAL TABLET	2	
CENTRUM SPECIALIST PRENATAL ORAL 27-0.8 & 200 MG	2	
CENTRUM SPECIALIST VISION ORAL TABLET	2	
CENTRUM ULTRA WOMENS ORAL TABLET	2	
CENTRUM WOMEN ORAL TABLET	2	
century mature oral tablet	1	
century oral tablet	1	
cervovite senior oral tablet	1	
CERTAVITE SENIOR ORAL TABLET	2	
CERTAVITE SENIOR/ANTIOXIDANT ORAL TABLET	2	
CERTAVITE/ANTIOXIDANTS ORAL TABLET	2	

Drug Name	Drug Tier	Quantity Limit
CHOICEFUL MULTIVITAMIN ORAL CAPSULE	2	
CIFEREX ORAL CAPSULE 1-3775 MG-UNIT	2	
CITRACAL +D3 ORAL TABLET	2	
classic prenatal oral tablet 28-0.8 mg	1	
COMPANION ORAL TABLET	2	
COMPETE ORAL TABLET	2	
COMPLETIA DIABETIC MULTIVIT ORAL TABLET	2	
coral calcium plus oral capsule	1	
CORVITA ORAL TABLET	2	
CULTURELLE PROBIOTIC MEN DAILY ORAL CAPSULE	2	
cvs adult 50+ eye health oral capsule	1	
cvs daily multiple for men oral tablet	1	
cvs daily multiple women 50+ oral tablet	1	
cvs daily multiv/mineral mens oral tablet	1	
cvs daily multivitamin mens oral tablet	1	
cvs daily multivitamin womens oral tablet	1	
cvs eye health & lutein oral tablet	1	
cvs eye health adult 50+ oral capsule	1	
cvs folic acid oral tablet 800 mcg	1	

Drug Name	Drug Tier	Quantity Limit
cvs immune support oral capsule	1	
cvs one daily essential oral tablet	1	
cvs one daily mens 50+ adv oral tablet	1	
cvs one daily mens formula oral tablet	1	
cvs one daily womens 50+ adv oral tablet	1	
cvs one daily womens formula oral tablet	1	
cvs prenatal gummy oral tablet chewable 0.4 mg, 0.4-113.5 mg	1	
cvs prenatal multi+dha oral capsule 27-0.8-250 mg	1	
cvs prenatal multivitamin oral capsule 27-0.8-250 mg	1	
cvs prenatal oral tablet 27-0.8 mg	1	
cvs spectravite adult 50+ oral tablet	1	
cvs spectravite adults oral tablet	1	
cvs spectravite advanced oral tablet	1	
cvs spectravite men 50+ oral tablet	1	
cvs spectravite men oral tablet	1	
cvs spectravite senior oral tablet	1	
cvs spectravite ultra men 50+ oral tablet	1	
cvs spectravite ultra mens oral tablet	1	
cvs spectravite ultra women oral tablet	1	
cvs spectravite women 50+ oral tablet	1	

Drug Name	Drug Tier	Quantity Limit
cvs spectravite women oral tablet	1	
cvs spectravite womens senior oral tablet	1	
cvs vision health oral capsule	1	
cvs womens active daily oral tablet	1	
cyanocobalamin injection solution 1000 mcg/ml	1	
cyanocobalamin nasal solution 500 mcg/0.1ml	1	
daily betic oral tablet	1	
daily combo multi vitamins oral tablet	1	
daily multiple vitamins/min oral tablet	1	
daily multivitamin oral capsule	1	
daily vite multivitamin/iron oral tablet	1	
DAYAVITE ORAL TABLET	2	
DECUBI-VITE ORAL CAPSULE	2	
DEKAS PLUS OCEAN ORAL CAPSULE	2	
DEKAS PLUS ORAL CAPSULE	2	
DEPLIN MA ORAL CAPSULE	2	
DEPLINPRO MOOD HEALTH ORAL CAPSULE	2	
DERMACINRX MULTITAM ORAL TABLET	2	
DERMACINRX RIBOTIN-E ORAL TABLET	2	

Drug Name	Drug Tier	Quantity Limit
DERMACINRX ZINTREXYL-C ORAL TABLET	2	
DERMAVITE ORAL TABLET	2	
destress-iron oral tablet	1	
DEXATRAN ORAL CAPSULE	2	
diabetes health formula oral tablet	1	
dialyvite 800/ultra d oral tablet	1	
DIALYVITE SUPREME D ORAL TABLET	2	
DIALYVITE/ZINC ORAL TABLET	3	
DIATROL ORAL TABLET	2	
DODEX INJECTION SOLUTION 1000 MCG/ML	2	
DRISDOL ORAL CAPSULE 1.25 MG (50000 UT)	3	
dry eye formula oral capsule	1	
ELFOLATE PLUS ORAL TABLET 3-35-2 MG	2	
endur-acin oral tablet extended release 250 mg, 500 mg, 750 mg	1	
ENFAMIL EXPECTA ORAL 28-0.8 & 200 MG	2	
eq complete multivit adult 50+ oral tablet	1	
eq complete multivitamin-adult oral tablet	1	
eq one daily mens 50+ oral tablet	1	
eq one daily mens health oral tablet	1	
eq one daily womens 50+ oral tablet	1	

Drug Name	Drug Tier	Quantity Limit
eq one daily womens health oral tablet	1	
eq vision formula 50+ oral capsule	1	
eql century mature adults 50+ oral tablet	1	
eql century mature men 50+ oral tablet	1	
eql century mature oral tablet	1	
eql century mature women 50+ oral tablet	1	
eql century mens oral tablet	1	
eql century oral tablet	1	
eql century womens oral tablet	1	
eql one daily mens 50+ advance oral tablet	1	
eql one daily mens health oral tablet	1	
eql one daily mens oral tablet	1	
eql one daily womens 50+ adv oral tablet	1	
eql prenatal formula oral tablet 28-0.8 mg	1	
eql vision formula oral tablet	1	
ergocalciferol oral capsule 1.25 mg (50000 ut)	1	
ESSENTIA ORAL TABLET	2	
essential balance oral tablet	1	
eye health + lutein oral tablet	1	
eye health areds 2 oral capsule	1	
eye health oral capsule	1	

Drug Name	Drug Tier	Quantity Limit
eye multivitamin/sodium oral tablet	1	
eye vitamins oral capsule	1	
eye-vites oral tablet	1	
fa-8 oral capsule 0.8 mg	1	
FINAZOL ORAL TABLET	2	
FITNESS TABS FOR MEN AM/PM ORAL TABLET	2	
FITNESS TABS FOR WOMEN AM/PM ORAL TABLET	2	
FLORRAVITE ORAL TABLET	2	
FLORRAXYL ORAL TABLET	2	
FOLAGENT DHA ORAL CAPSULE	2	
FOLAMAX ORAL TABLET	2	
FOLAMED DHA ORAL CAPSULE	2	
FOLAPRIME ORAL TABLET	2	
folate oral tablet 400 mcg	1	
FOLBIC ORAL TABLET 2.5-25-2 MG	2	
FOLGARD OS ORAL TABLET 500-1.1 MG	3	
FOLGARD RX ORAL TABLET 2.2-25-1 MG	2	
folic acid oral capsule 0.8 mg	1	
folic acid oral tablet 1 mg, 400 mcg, 800 mcg	1	
FOLIC D3 ORAL CAPSULE 1-3775 MG-UNIT	2	
FOLIFLEX ORAL TABLET	2	
FOLITIN-Z ORAL TABLET	2	

Drug Name	Drug Tier	Quantity Limit
FOLIXIA ORAL TABLET	2	
FOLPLEX 2.2 ORAL TABLET 2.2-25-0.5 MG	2	
FOLTANX ORAL TABLET 3-35-2 MG	2	
FOLTANX RF ORAL CAPSULE 3-90.314-2-35 MG	2	
freedavite oral tablet	1	
ft century 50+ oral tablet	1	
ft century adults oral tablet	1	
ft century men 50+ oral tablet	1	
ft century men oral tablet	1	
ft century women 50+ oral tablet	1	
ft century women oral tablet	1	
ft eye health oral capsule	1	
ft eye health oral tablet	1	
ft folic acid oral tablet 400 mcg, 800 mcg	1	
ft hair skin & nails extra str oral tablet	1	
ft one daily mens 50+ oral tablet	1	
ft one daily mens oral tablet	1	
ft one daily womens 50+ oral tablet	1	
ft one daily womens oral tablet	1	
ft prenatal oral tablet 28-0.8 mg	1	
FUSION PLUS ORAL CAPSULE	3	
GENADEK STEP 1 ORAL CAPSULE	2	
GENADEK STEP 2 ORAL CAPSULE	2	

Drug Name	Drug Tier	Quantity Limit
geri-freeda senior formula oral tablet	1	
gerivite complete oral tablet	1	
gnp century adult formula oral tablet	1	
gnp century adult oral tablet	1	
gnp century adults men oral tablet	1	
gnp century adults women oral tablet	1	
gnp century mature adults 50+ oral tablet	1	
gnp century mature men's 50+ oral tablet	1	
gnp century mature women's 50+ oral tablet	1	
gnp folic acid oral tablet 400 mcg	1	
gnp hair skin & nails extra st oral tablet	1	
gnp hair/skin/nails oral tablet	1	
gnp healthy eyes oral tablet	1	
gnp healthy eyes supervision 2 oral capsule	1	
gnp mega multi for men oral tablet	1	
gnp mega multi for women oral tablet	1	
gnp one daily maximum oral tablet	1	
gnp one daily mens health 50+ oral tablet	1	
gnp one daily mens health oral tablet	1	
gnp one daily mens/lycopene oral tablet	1	

Drug Name	Drug Tier	Quantity Limit
gnp one daily womens 50+ oral tablet	1	
gnp one daily womens oral tablet	1	
gnp prenatal oral tablet 28-0.8 mg	1	
gnp prenatal/folic acid oral tablet 28-0.8 mg	1	
gnp therapeutic-m oral tablet	1	
hair skin & nails advanced oral tablet	1	
hair skin & nails oral tablet	1	
hair skin and nails formula oral tablet	1	
hair skin nails oral capsule	1	
hair/skin/nails oral capsule	1	
hair/skin/nails oral tablet	1	
HEAD CARE PROACTIVE HEALTH ORAL TABLET	2	
healthy eyes oral tablet	1	
healthy eyes supervision 2 oral capsule	1	
healthy eyes/lutein-zeaxanthin oral capsule	1	
high potency multivit/fa oral tablet	1	
hi-kovite 2-part formula oral tablet	1	
HYLAZINC ORAL TABLET	2	
ICAPS AREDS FORMULA ORAL TABLET	2	
ICAPS LUTEIN & OMEGA-3 ORAL CAPSULE	2	
ICAPS MV ORAL TABLET	2	

Drug Name	Drug Tier	Quantity Limit
ICAPS ORAL CAPSULE	2	
IMMUNE ESSENTIALS DAILY ORAL CAPSULE	2	
i-vite oral tablet	1	
JOINT HEALTH & BONE STRENGTH ORAL TABLET	2	
KEYFOLIC ORAL TABLET	2	
KEYLOSA ORAL TABLET	2	
kp adults 50+ daily formula oral tablet	1	
kp adults daily formula oral tablet	1	
kp folic acid oral tablet 1 mg, 800 mcg	1	
kp mens 50+ daily formula oral tablet	1	
kp mens daily formula oral tablet	1	
kp prenatal multivitamins oral tablet 28-0.8 mg	1	
kp vision formula oral tablet	1	
kp vision formula/lutein oral tablet	1	
kp womens 50+ daily formula oral tablet	1	
kp womens daily formula oral tablet	1	
K-PAX IMMUNE PROFESSIONAL ST ORAL TABLET	2	
liver detox oral tablet	1	
l-methylfolate-algae-b12-b6 oral capsule 3-90.314-2-35 mg	1	
lutein-zeaxanthin oral tablet	1	
LYSIPLEX PLUS ORAL TABLET	2	

Effective 1/1/2026

Drug Name	Drug Tier	Quantity Limit
MACULAR HEALTH FORMULA ORAL CAPSULE	2	
macuvite eye care oral tablet	1	
macuvite oral tablet	1	
macuvite/lutein oral tablet	1	
MASONATAL ORAL TABLET 28-0.8 MG	2	
maximum daily green oral tablet	1	
MEDI TAB ORAL TABLET	2	
mega multi for women oral tablet	1	
MEGA MULTI MEN ORAL TABLET	2	
megavite fruits & veggies oral tablet	1	
meijer advanced formula oral tablet	1	
MENATROL ORAL CAPSULE	2	
mens 50+ advanced oral capsule	1	
mens 50+ multivitamin oral tablet	1	
mens life pack oral tablet	1	
mens multi health formula oral tablet	1	
mens multivitamin oral tablet	1	
METANX ORAL CAPSULE 3-90.314-2-35 MG	2	
mini multi vitamins/iron oral tablet	1	
MOOD FOOD ES ORAL CAPSULE	2	
MOOD FOOD ORAL CAPSULE	2	

Drug Name	Drug Tier	Quantity Limit
multi complete oral capsule	1	
multi complete/iron oral tablet	1	
multi for her 50+ oral capsule	1	
multi for her 50+ oral tablet	1	
multi for her oral capsule	1	
multi for her oral tablet	1	
multi for him 50+ oral tablet	1	
multi for him oral capsule	1	
multi for him oral tablet	1	
multi prenatal oral tablet 27-0.8 mg	1	
multi vitamin/minerals oral tablet	1	
MULTIA ORAL CAPSULE	2	
multiple vit/minerals/no iron oral tablet	1	
multiple vitamins/iron oral tablet	1	
multiple vitamins/womens oral tablet	1	
MULTIPRO ORAL CAPSULE	2	
MULTITOL-M ORAL TABLET	2	
multivitamin adult (minerals) oral tablet	1	
multivitamin adults 50+ oral tablet	1	
multivitamin adults oral tablet	1	
multivitamin health form/ca/fe oral tablet	1	
multivitamin men 50+ oral tablet	1	

Drug Name	Drug Tier	Quantity Limit
multivitamin men oral tablet	1	
multi-vitamin monocaps oral tablet	1	
multivitamin plus iron adult oral tablet	1	
multivitamin women 50+ oral tablet	1	
multivitamin women oral tablet	1	
multivitamin womens 50+ adv oral tablet	1	
multi-vitamin/iron oral tablet	1	
multi-vitamin/minerals oral tablet	1	
multivitamin/zinc stress oral tablet	1	
multivitamin-minerals oral tablet	1	
MVW COMPLETE FORMULATION D3000 ORAL CAPSULE	2	
MVW COMPLETE FORMULATION D5000 ORAL CAPSULE	2	
MVW COMPLETE FORMULATION MINIS ORAL CAPSULE	2	
MVW COMPLETE FORMULATION ORAL CAPSULE	2	
MVW MODULATOR FORMULATION MINI ORAL CAPSULE	2	
MVW MODULATOR FORMULATION ORAL CAPSULE	2	
myamulti oral tablet	1	
mynephrocaps oral capsule 1 mg	1	
MYNEPHRON ORAL CAPSULE 1 MG	2	

Drug Name	Drug Tier	Quantity Limit
NASCOBAL NASAL SOLUTION 500 MCG/0.1ML	3	
nat-rul daily-vite+iron oral tablet	1	
nat-rul theravite-m oral tablet	1	
natrul-vites oral tablet	1	
NEONATAL PRENATAL ORAL TABLET 27-0.8 MG	2	
NEONATAL VITAMIN ORAL TABLET 27-0.8 MG	2	
NEOVITE ORAL TABLET	2	
NEPHPLEX RX ORAL TABLET	3	
niacin er oral tablet extended release 1000 mg, 250 mg, 500 mg	1	
NIAVASC 750 ORAL TABLET EXTENDED RELEASE 750 MG	2	
NIAVASC ORAL TABLET EXTENDED RELEASE 500 MG	2	
NICADAN ORAL TABLET	2	
NICAZEL FORTE ORAL TABLET	2	
NICAZEL ORAL TABLET	2	
NICOMIDE ORAL TABLET 750-27-2-0.5 MG	3	
NIVA-FOL ORAL TABLET 2.5-25-2 MG	2	
no iron mult vitamin-minerals oral tablet	1	
NUTRALYN ORAL TABLET	2	
NUTRIFAC ZX ORAL TABLET	2	

Drug Name	Drug Tier	Quantity Limit
ocular vitamins oral tablet	1	
ocutabs oral tablet	1	
ocutabs-lutein oral tablet	1	
OCUVEL ORAL CAPSULE	2	
OCUVITE ADULT 50+ ORAL CAPSULE	2	
OCUVITE ADULT FORMULA ORAL CAPSULE	2	
OCUVITE EXTRA ORAL TABLET	2	
OCUVITE EYE + MULTI ORAL TABLET	2	
OCUVITE EYE HEALTH FORMULA ORAL CAPSULE	2	
OCUVITE EYE PERFORMANCE ORAL CAPSULE	2	
OCUVITE-LUTEIN ORAL CAPSULE	2	
OCUVITE-LUTEIN ORAL TABLET	2	
ONCOVITE ORAL TABLET	2	
ONE A DAY ENERGY ORAL TABLET	2	
ONE A DAY MEN 50 PLUS ORAL TABLET	2	
ONE A DAY TRIPLE IMMUNE SUPPRT ORAL TABLET	2	
ONE A DAY WOMEN 50 PLUS ORAL TABLET	2	
one daily 50 plus oral tablet	1	
one daily calcium/iron oral tablet	1	
one daily complete for men oral tablet	1	
one daily complete oral tablet	1	

Drug Name	Drug Tier	Quantity Limit
one daily for men 50+ advanced oral tablet	1	
one daily for men/lycopene oral tablet	1	
one daily for women 50+ adv oral tablet	1	
one daily for women oral tablet	1	
one daily healthy weight adv oral tablet	1	
one daily healthy weight oral tablet	1	
one daily maximum oral tablet	1	
one daily men formula w/o iron oral tablet	1	
one daily mens 50+ multivit oral tablet	1	
one daily mens 50+/lycopene oral tablet	1	
one daily mens health oral tablet	1	
one daily mens oral tablet	1	
one daily multivit/iron-free oral tablet	1	
one daily multivitamin men oral tablet	1	
one daily multivitamin women oral tablet	1	
one daily multivitamin/iron oral tablet	1	
one daily womens 50 plus oral tablet	1	
one daily womens 50+ oral tablet	1	
one daily womens oral tablet	1	
one daily/minerals oral tablet	1	

Effective 1/1/2026

Drug Name	Drug Tier	Quantity Limit
ONE VITE WOMENS ORAL TABLET 27-0.8 MG	2	
ONE-A-DAY ENERGY ORAL TABLET	2	
ONE-A-DAY MENOPAUSE FORMULA ORAL TABLET	2	
ONE-A-DAY MENS (MINERALS) ORAL TABLET	2	
ONE-A-DAY MENS 50+ ADVANTAGE ORAL TABLET	2	
ONE-A-DAY MENS 50+ ORAL TABLET	2	
ONE-A-DAY MENS HEALTH FORMULA ORAL TABLET	2	
ONE-A-DAY MENS PRO EDGE ORAL TABLET	2	
ONE-A-DAY PROACTIVE 65+ ORAL TABLET	2	
ONE-A-DAY TEEN ADVANTAGE/HER ORAL TABLET	2	
ONE-A-DAY TEEN ADVANTAGE/HIM ORAL TABLET	2	
ONE-A-DAY WEIGHT SMART ADVANCE ORAL TABLET	2	
ONE-A-DAY WOMENS 50 PLUS ORAL TABLET	2	
ONE-A-DAY WOMENS 50+ ADVANTAGE ORAL TABLET	2	
ONE-A-DAY WOMENS 50+ ORAL TABLET	2	
ONE-A-DAY WOMENS HEALTHY SKIN ORAL TABLET	2	

Drug Name	Drug Tier	Quantity Limit
ONE-A-DAY WOMENS MIND & BODY ORAL TABLET	2	
ONE-A-DAY WOMENS ORAL TABLET	2	
ONE-A-DAY WOMENS PETITES ORAL TABLET	2	
ONE-A-DAY WOMENS PRENATAL 1 ORAL CAPSULE 28-0.8-235 MG	2	
ONE-A-DAY WOMENS PRENATAL ORAL 28-0.8 & 223 MG, 28-0.8 & 440 MG	2	
one-daily multi caps oral capsule	1	
one-daily multi-vit/mineral oral tablet	1	
one-daily multi-vitamin/iron oral tablet	1	
one-daily/iron oral tablet	1	
ONEVITE ORAL TABLET	2	
optic-vites oral tablet	1	
optic-vites with lutein oral tablet	1	
optimum pms oral tablet	1	
OPTIVITE P.M.T. ORAL TABLET	2	
OPURITY ORAL TABLET	2	
ORTHO DF ORAL CAPSULE 1-3775 MG-UNIT	2	
OSTEOPRIME PLUS ORAL TABLET	2	
OSTEOPRIME ULTRA ORAL TABLET	2	
parvlex oral tablet	1	
PHYTOMULTI ORAL TABLET	2	

Drug Name	Drug Tier	Quantity Limit
phytonadione injection solution 1 mg/0.5ml	1	
phytonadione oral tablet 5 mg	1	
prenatal (w/iron & fa) oral tablet 27-0.8 mg	1	
prenatal complete oral tablet 14-0.4 mg	1	
prenatal formula oral capsule 28-0.8-235 mg	1	
prenatal forte oral tablet	1	
prenatal gummies/dha & fa oral tablet chewable 0.4-32.5 mg	1	
prenatal multi +dha oral capsule 27-0.8-200 mg, 27-0.8-228 mg, 27-0.8-250 mg	1	
prenatal multivit plus folate oral tablet 0.8 mg	1	
PRENATAL MULTIVITAMIN + DHA ORAL 28-0.8 & 200 MG	2	
prenatal multivitamin plus dha oral capsule 27-0.8-250 mg	1	
prenatal one daily oral tablet 27-0.8 mg	1	
prenatal oral tablet 27-0.8 mg, 28-0.8 mg	1	
prenatal vitamin and mineral oral tablet 28-0.8 mg	1	
prenatal vitamins oral tablet 27-0.8 mg, 28-0.8 mg	1	
prenatal/folic acid+dha oral capsule 27-0.8-200 mg	1	
prenatal/iron oral tablet , 28-0.8 mg	1	
PRESCRIPTION SUPPORT MULTIVIT ORAL CAPSULE	2	

Drug Name	Drug Tier	Quantity Limit
PRESERVISION AREDS 2 ORAL CAPSULE	2	
PRESERVISION AREDS 2+COQ10 ORAL CAPSULE	2	
PRESERVISION AREDS 2+MULTI VIT ORAL CAPSULE	2	
PRESERVISION AREDS ORAL CAPSULE	2	
PRESERVISION AREDS ORAL TABLET	2	
PRESERVISION/LUTEIN ORAL CAPSULE	2	
prevent oral capsule	1	
PREV-RX ORAL TABLET	2	
probiotics + bariatric multi oral capsule	1	
PRO-CAL ORAL TABLET	2	
PROCERV HP ORAL TABLET	2	
PROFOLA ORAL TABLET	2	
PRORENAL + D ORAL TABLET	2	
PRORENAL + D W/ OMEGA-3 ORAL CAPSULE	2	
prosight oral tablet	1	
PROTECT CARDIO AF ORAL CAPSULE	2	
PROTECT PLUS SO ORAL CAPSULE	2	
PROTEGRA ORAL CAPSULE	2	
PROVIT ORAL TABLET	2	
qc daily multivit/multimineral oral tablet	1	

Effective 1/1/2026

Drug Name	Drug Tier	Quantity Limit
qc daily multivitamins/iron oral tablet	1	
qc folic acid oral tablet 800 mcg	1	
qc hair skin & nails oral tablet	1	
qc mens daily multivitamin oral tablet	1	
qc multi-vite 50 & over oral tablet	1	
qc multi-vite oral tablet	1	
QC OCUHEALTH VISION SUPPORT 2 ORAL CAPSULE	2	
qc prenatal oral tablet 28-0.8 mg	1	
qc therin-m oral tablet	1	
qc womens daily multivitamin oral tablet	1	
quin b strong oral tablet	1	
quintabs-m oral tablet	1	
ra central-vite mens mature oral tablet	1	
RA CENTRAL-VITE ORAL TABLET	2	
ra central-vite womens mature oral tablet	1	
ra folic acid oral tablet 400 mcg, 800 mcg	1	
ra one daily maximum oral tablet	1	
ra one daily mens 50+ w/vit d3 oral tablet	1	
ra one daily mens multi oral tablet	1	
ra one daily mens/vit d-3 oral tablet	1	
ra prenatal formula oral tablet 28-0.8 mg	1	
ra prenatal oral tablet 28-0.8 mg	1	

Drug Name	Drug Tier	Quantity Limit
RAYAVIT ORAL TABLET	2	
REMEDIENT ORAL CAPSULE	2	
renal multivitamin oral tablet	1	
RENAL ORAL CAPSULE 1 MG	2	
RENAPLEX ORAL TABLET	2	
RENAPLEX-D ORAL TABLET	2	
reno caps oral capsule 1 mg	1	
senior tabs oral tablet	1	
SENTRY ORAL TABLET	2	
SENTRY SENIOR MENS 50+ ORAL TABLET	2	
SENTRY SENIOR ORAL TABLET	2	
SENTRY SENIOR/LUTEIN ORAL TABLET	2	
SIDEROL ORAL TABLET	2	
SIMILAC PRENATAL EARLY SHIELD ORAL 27-0.8 & 200 MG	2	
skin hair & nails advanced oral capsule	1	
SLO-NIACIN ORAL TABLET EXTENDED RELEASE 250 MG, 500 MG, 750 MG	2	
SOLO ORAL TABLET	2	
SPECTRAVITE ORAL TABLET	2	
stress b complex/antioxid/zinc oral tablet	1	
stress b complex/iron oral tablet	1	
stress formula/iron oral tablet	1	

Drug Name	Drug Tier	Quantity Limit
stress formula/iron/energy oral tablet	1	
STRESSTABS ADVANCED ORAL TABLET	2	
STROVITE ONE ORAL TABLET	2	
STUART ONE ORAL CAPSULE 27-0.8-200 MG	2	
super antioxidant oral capsule	1	
super antioxidants protector oral capsule	1	
super aytinal 50 plus oral tablet	1	
super aytinal oral tablet	1	
super d-zinc-selenium-copper oral tablet	1	
super multiple oral tablet	1	
super thera vite m oral tablet	1	
super vita-mins oral tablet	1	
SUPERIOR MENS MULTI ORAL TABLET	2	
SUPERIOR WOMENS MULTI ORAL TABLET	2	
SUPPORT-500 ORAL CAPSULE	2	
SYSTANE ICAPS AREDS2 ORAL CAPSULE	2	
SYSTANE ICAPS AREDS2 ORAL TABLET	2	
tab-a-vite/iron oral tablet	1	
tab-a-vite/iron/beta carotene tablet oral	1	
TAB-A-VITE/IRON/BETA CAROTENE TABLET ORAL	2	
thera vital m oral tablet	1	

Drug Name	Drug Tier	Quantity Limit
thera vital-m oral tablet	1	
therabasic-m oral tablet	1	
THERAGRAN-M ADVANCED 50 PLUS ORAL TABLET	2	
THERAGRAN-M ADVANCED ORAL TABLET	2	
THERAGRAN-M ORAL TABLET	2	
THERAGRAN-M PREMIER 50 PLUS ORAL TABLET	2	
THERAGRAN-M PREMIER ORAL TABLET	2	
thera-m plus mv w/beta-carot oral tablet	1	
THERAMILL FORTE ORAL CAPSULE	2	
THERANATAL LACTATION ONE ORAL CAPSULE	2	
therapeutic formula/hematinics oral tablet	1	
therapeutic-m oral tablet	1	
thera-tabs m oral tablet	1	
theratrum complete 50 plus oral tablet	1	
theratrum complete oral tablet	1	
thera-vite max-m oral tablet	1	
thrive for life womens oral tablet	1	
triphrocaps oral capsule 1 mg	1	
TRUE FOLIC ACID ORAL TABLET 1 MG, 400 MCG	2	
t-vites oral tablet	1	

Effective 1/1/2026

Drug Name	Drug Tier	Quantity Limit
UDAMIN SP ORAL TABLET	2	
ULTRA BONEUP ORAL TABLET	2	
ultra freeda oral tablet	1	
ultra freeda/iron oral tablet	1	
ultra multi formula/iron oral capsule	1	
ultrachoice adv formula mature oral tablet	1	
ultrachoice advanced formula oral tablet	1	
v-c forte oral capsule	1	
VENEXA FE ORAL TABLET	2	
VENEXA ORAL TABLET	2	
VENTRIXYL FE ORAL TABLET	2	
VENTRIXYL ORAL TABLET	2	
vic-forte oral capsule	1	
virt-caps oral capsule 1 mg	1	
vision formula 2 oral capsule	1	
vision formula/lutein oral tablet	1	
vision health oral capsule	1	
VISION OPTIMIZER ORAL CAPSULE	2	
vision plus oral capsule	1	
vision vitamins oral tablet	1	
VISTA ADVANCED AREDS2 FORMULA ORAL CAPSULE	2	
VISTA ADVANCED DRY EYE FORMULA ORAL CAPSULE	2	
vita hair oral tablet	1	
VITA S FORTE ORAL TABLET	2	

Drug Name	Drug Tier	Quantity Limit
vitabasic complete oral tablet	1	
vitabasic senior oral tablet	1	
VITABEX ORAL CAPSULE	2	
vitabex plus oral capsule	1	
VITACEL ORAL TABLET	2	
VITACORE ORAL TABLET	2	
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	1	
vitamin k1 injection solution 1 mg/0.5ml	1	
vita-min oral capsule	1	
vitamins a-d-e/selenium oral tablet	1	
VITAROCA PLUS ORAL TABLET	2	
VITASANA ORAL TABLET	2	
VITEYES AREDS 2 FORMULA +MULTI ORAL CAPSULE	2	
VITEYES AREDS 2 FORMULA ORAL CAPSULE	2	
VITEYES CLASSIC ADVANCED ORAL CAPSULE	2	
VITEYES CLASSIC MACULAR SUPPORT ORAL CAPSULE	2	
VITEYES CLASSIC MULTIVITAMIN ORAL TABLET	2	
VITEYES CLASSIC+OMEGA-3 ORAL CAPSULE	2	
VITEYES COMPLETE ORAL CAPSULE	2	

Effective 1/1/2026

Drug Name	Drug Tier	Quantity Limit
VITEYES OPTIC NERVE SUPPORT ORAL TABLET	2	
VITRAMYN ORAL TABLET	2	
VITRANOL FE ORAL TABLET	2	
VITRANOL ORAL TABLET	2	
VITREXATE FE ORAL TABLET	2	
VITREXATE ORAL TABLET	2	
VITREXYL + IRON ORAL TABLET	2	
VITREXYL ORAL TABLET	2	
WELLFOLA ORAL TABLET	2	
wescaps oral capsule 1 mg	1	
WESTAB MAX ORAL TABLET 2.5-25-2 MG	2	
womens 50+ advanced oral capsule	1	
womens 50+ multi vitamin oral tablet	1	
womens daily formula oral tablet	1	
womens life pack oral tablet	1	
womens multi oral capsule	1	
womens multivitamin oral tablet	1	
YELETS TEENAGE FORMULA ORAL TABLET	2	
yl folic acid oral tablet 400 mcg	1	

Drug Name	Drug Tier	Quantity Limit
Gastrointestinal Agents		
Anti-Constipation Agents		
bisacodyl ec oral tablet delayed release 5 mg	\$0	
bisacodyl oral tablet delayed release 5 mg	\$0	
citrate of magnesia oral solution	\$0	
citroma oral solution 1.745 gm/30ml	\$0	
clearlax oral powder 17 gm/scoop	1	
cvs c-lax laxative oral tablet delayed release 5 mg	\$0	
cvs gentle laxative oral tablet delayed release 5 mg	\$0	
cvs gentle laxative womens oral tablet delayed release 5 mg	\$0	
cvs magnesium citrate oral solution 1.745 gm/30ml	\$0	
cvs purelax oral powder 17 gm/scoop	1	
eq clearlax oral powder 17 gm/scoop	1	
eq gentle laxative oral tablet delayed release 5 mg	\$0	
eq magnesium citrate oral solution 1.745 gm/30ml	\$0	
eq clearlax oral powder 17 gm/scoop	1	
eq gentle laxative oral tablet delayed release 5 mg	\$0	
eq laxative oral tablet delayed release 5 mg	\$0	

Drug Name	Drug Tier	Quantity Limit
eql magnesium citrate oral solution 1.745 gm/30ml	\$0	
ft clearlax oral powder 17 gm/scoop	1	
ft laxative oral tablet delayed release 5 mg	\$0	
ft magnesium citrate oral solution 1.745 gm/30ml	\$0	
gavilax oral powder 17 gm/scoop	1	
gentle laxative oral tablet delayed release 5 mg	\$0	
gentlelax oral powder 17 gm/scoop	1	
glycolax oral powder 17 gm/scoop	1	
gnp clearlax oral powder 17 gm/scoop	1	
gnp gentle laxative oral tablet delayed release 5 mg	\$0	
gnp magnesium citrate oral solution 1.745 gm/30ml	\$0	
gnp womens gentle laxative oral tablet delayed release 5 mg	\$0	
goodsense bisacodyl ec oral tablet delayed release 5 mg	\$0	
goodsense bisacodyl laxative oral tablet delayed release 5 mg	\$0	
goodsense clearlax oral powder 17 gm/scoop	1	
goodsense magnesium citrate oral solution 1.745 gm/30ml	\$0	
goodsense womens laxative oral tablet delayed release 5 mg	\$0	
hm clearlax oral powder 17 gm/scoop	1	

Drug Name	Drug Tier	Quantity Limit
kls laxaclear oral powder 17 gm/scoop	1	
kp bisacodyl oral tablet delayed release 5 mg	\$0	
laxative oral tablet delayed release 5 mg	\$0	
magnesium citrate oral solution 1.745 gm/30ml	\$0	
mm clearlax oral powder 17 gm/scoop	1	
peg 3350 oral powder 17 gm/scoop	1	
polyethylene glycol 3350 oral powder 17 gm/scoop	1	
polyethylene glycol 3350-grx oral powder	1	
qc gentle laxative oral tablet delayed release 5 mg	\$0	
qc gentle laxative womens oral tablet delayed release 5 mg	\$0	
qc laxative oral tablet delayed release 5 mg	\$0	
qc magnesium citrate oral solution 1.745 gm/30ml	\$0	
qc natura-lax oral powder 17 gm/scoop	1	
ra laxative oral powder 17 gm/scoop	1	
ra laxative oral tablet delayed release 5 mg	\$0	
ra magnesium citrate oral solution 1.745 gm/30ml	\$0	
ra womens laxative oral tablet delayed release 5 mg	\$0	
sb bisacodyl laxative ec oral tablet delayed release 5 mg	\$0	

Effective 1/1/2026

Drug Name	Drug Tier	Quantity Limit
sb gentle lax-women oral tablet delayed release 5 mg	\$0	
sb magnesium citrate oral solution 1.745 gm/30ml	\$0	
sb polyethylene glycol 3350 oral powder 17 gm/scoop	1	
sm clearlax oral powder 17 gm/scoop	1	
smooth lax oral powder 17 gm/scoop	1	
true laxative oral powder 17 gm/scoop	1	
womans laxative oral tablet delayed release 5 mg	\$0	
womens laxative oral tablet delayed release 5 mg	\$0	
Antispasmodics, Gastrointestinal		
DONNATAL ORAL ELIXIR 16.2 MG/5ML	2	
DONNATAL ORAL TABLET 16.2 MG	2	
hyosyne oral solution 0.125 mg/ml	1	
pb-hyoscy-atropine-scopolamine oral elixir 16.2 mg/5ml	1	
pb-hyoscy-atropine-scopolamine oral tablet 16.2 mg	1	
PHENOHYTRO ORAL ELIXIR 16.2 MG/5ML	2	
PHENOHYTRO ORAL TABLET 16.2 MG	2	
Proton Pump Inhibitors		
cvs omeprazole-sod bicarbonate oral capsule 20-1100 mg	1	Y

Drug Name	Drug Tier	Quantity Limit
eq lansoprazole oral capsule delayed release 15 mg	1	Y
eqi lansoprazole oral capsule delayed release 15 mg	1	Y
ft acid reducer oral capsule delayed release 15 mg	1	Y
gnp lansoprazole oral capsule delayed release 15 mg	1	Y
goodsense lansoprazole oral capsule delayed release 15 mg	1	Y
goodsense omeprazole-sod bicarb oral capsule 20-1100 mg	1	Y
kls lansoprazole oral capsule delayed release 15 mg	1	Y
lansoprazole oral capsule delayed release 15 mg	1	Y
omeprazole-sodium bicarbonate oral capsule 20-1100 mg	1	Y
PREVACID 24HR ORAL CAPSULE DELAYED RELEASE 15 MG	2	Y
qc lansoprazole oral capsule delayed release 15 mg	1	Y
ra omeprazole-sodium bicarb oral capsule 20-1100 mg	1	Y
sm lansoprazole oral capsule delayed release 15 mg	1	Y
ZEGERID OTC ORAL CAPSULE 20-1100 MG	2	Y

Drug Name	Drug Tier	Quantity Limit
Genitourinary Agents		
Benign Prostatic Hypertrophy Agents		
tadalafil oral tablet 10 mg, 20 mg	1	Y
Genitourinary Agents, Other		
avanafil oral tablet 100 mg, 200 mg	1	
CAVERJECT IMPULSE INTRACAVERNOSAL KIT 10 MCG, 20 MCG	2	Y
CAVERJECT INTRACAVERNOSAL SOLUTION RECONSTITUTED 20 MCG, 40 MCG	2	Y
EDEX INTRACAVERNOSAL KIT 10 MCG, 20 MCG, 40 MCG	2	Y
ENCARE VAGINAL SUPPOSITORY 100 MG	2	
MUSE URETHRAL PELLET 1000 MCG, 250 MCG, 500 MCG	2	Y
OPTIONS GYNOL II CONTRACEPTIVE VAGINAL GEL 3 %	2	
sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg	1	Y
TODAY SPONGE VAGINAL 1000 MG	2	
varafenafil hcl oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg	1	Y
varafenafil hcl oral tablet dispersible 10 mg	1	Y
VCF VAGINAL CONTRACEPTIVE VAGINAL FILM 28 %	2	

Drug Name	Drug Tier	Quantity Limit
VCF VAGINAL CONTRACEPTIVE VAGINAL GEL 4 %	2	
Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)		
Estrogens		
COVARYX HS ORAL TABLET 0.625-1.25 MG	2	
COVARYX ORAL TABLET 1.25-2.5 MG	2	
EEMT HS ORAL TABLET 0.625-1.25 MG	2	
EEMT ORAL TABLET 1.25-2.5 MG	2	
est estrogens-methyltest ds oral tablet 1.25-2.5 mg	1	
est estrogens-methyltest hs oral tablet 0.625-1.25 mg	1	
est estrogens-methyltest oral tablet 1.25-2.5 mg	1	
estratest f.s. oral tablet 1.25-2.5 mg	1	
ESTRATEST H.S. ORAL TABLET 0.625-1.25 MG	2	
Progestins		
aftera oral tablet 1.5 mg	1	
AFTERPILL ORAL TABLET 1.5 MG	2	
curae oral tablet 1.5 mg	1	
econtra one-step oral tablet 1.5 mg	1	
her style oral tablet 1.5 mg	1	
levonorgestrel oral tablet 1.5 mg	1	
my choice oral tablet 1.5 mg	1	
my way oral tablet 1.5 mg	1	

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit
new day oral tablet 1.5 mg	1		COMIRNATY INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 30 MCG/0.3ML	\$0	
opcicon one-step oral tablet 1.5 mg	1		FLUAD INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	\$0	
OPILL ORAL TABLET 0.075 MG	2		FLUARIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	\$0	
option 2 oral tablet 1.5 mg	1		FLUBLOK INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 0.5 ML	\$0	
PLAN B ONE-STEP ORAL TABLET 1.5 MG	2		FLUCELVAX INTRAMUSCULAR SUSPENSION	\$0	
react oral tablet 1.5 mg	1		FLUCELVAX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	\$0	
shewise oral tablet 1.5 mg	1		FLULAVAL INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	\$0	
take action oral tablet 1.5 mg	1		FLUMIST NASAL LIQUID	\$0	
Immunological Agents			FLUZONE HIGH-DOSE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	\$0	
Vaccines			FLUZONE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	\$0	
AFLURIA INTRAMUSCULAR SUSPENSION	\$0				
AFLURIA PRESERVATIVE FREE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	\$0				
AUDENZ INTRAMUSCULAR EMULSION	\$0				
AUDENZ INTRAMUSCULAR PREFILLED SYRINGE 0.5 ML	\$0				
CAPVAXIVE INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 0.5 ML	\$0				
COMIRNATY 5-11 YEARS INTRAMUSCULAR SUSPENSION 10 MCG/0.3ML	\$0				

Drug Name	Drug Tier	Quantity Limit
MNEXSPIKE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 10 MCG/0.2ML	\$0	
NUVAXOVID COVID-19 VACCINE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 5 MCG/0.5ML	\$0	
PNEUMOVAX 23 INJECTION SOLUTION 25 MCG/0.5ML	\$0	
PNEUMOVAX 23 INJECTION SOLUTION PREFILLED SYRINGE 25 MCG/0.5ML	\$0	
PREVNAR 13 INTRAMUSCULAR SUSPENSION	\$0	
PREVNAR 20 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	\$0	
SPIKEVAX 6M-11Y INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 25 MCG/0.25ML	\$0	
SPIKEVAX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 50 MCG/0.5ML	\$0	
VAXNEUVANCE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	\$0	
Inflammatory Bowel Disease Agents		
Glucocorticoids		
ANUCORT-HC RECTAL SUPPOSITORY 25 MG	2	

Drug Name	Drug Tier	Quantity Limit
ANUSOL-HC RECTAL SUPPOSITORY 25 MG	2	
HEMMOREX-HC RECTAL SUPPOSITORY 25 MG, 30 MG	2	
hydrocortisone acetate rectal suppository 25 mg, 30 mg	1	
PROCTOCORT RECTAL SUPPOSITORY 30 MG	2	
Miscellaneous Therapeutic Agents		
ACCU-CHEK AVIVA IN VITRO SOLUTION	\$0	
ACCU-CHEK AVIVA PLUS IN VITRO STRIP	\$0	
ACCU-CHEK AVIVA PLUS KIT W/DEVICE	\$0	
ACCU-CHEK FASTCLIX LANCET KIT KIT	\$0	
ACCU-CHEK GUIDE CONTROL IN VITRO LIQUID	\$0	
ACCU-CHEK GUIDE KIT W/DEVICE	\$0	
ACCU-CHEK GUIDE ME KIT W/DEVICE	\$0	
ACCU-CHEK GUIDE TEST IN VITRO STRIP	\$0	
ACCU-CHEK LINKASSIST	\$0	
ACCU-CHEK PLASTIC CARTRIDGE	\$0	
ACCU-CHEK SMARTVIEW CONTROL IN VITRO LIQUID	\$0	
ACCU-CHEK SMARTVIEW TEST STRIPS IN VITRO STRIP	\$0	
ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	\$0	

Drug Name	Drug Tier	Quantity Limit
ACCU-CHEK SPIRIT CARTRIDGE	\$0	
ACCU-CHEK TENDER I SET 24"	\$0	
ACCU-CHEK TENDER I SET 31"	\$0	
ACCU-CHEK ULTRAFLEX INF SET	\$0	
ACCU-CHEK ULTRAFLEX-1 INF SET	\$0	
ACCUTREND GLUCOSE CONTROL IN VITRO SOLUTION	\$0	
ACCUTREND GLUCOSE IN VITRO STRIP	\$0	
ADJUSTABLE LANCING DEVICE	\$0	
ADVANCE INTUITION CONTROL IN VITRO LIQUID NORMAL	\$0	
ADVANCE INTUITION METER DEVICE	\$0	
ADVANCE INTUITION MONITOR KIT	\$0	
ADVANCE INTUITION TEST IN VITRO STRIP	\$0	
ADVANCE MICRO-DRAW CONTROL IN VITRO LIQUID	\$0	
ADVANCE MICRO-DRAW METER DEVICE	\$0	
ADVANCE MICRO-DRAW NORMAL IN VITRO LIQUID	\$0	
ADVANCE MICRO-DRAW TEST IN VITRO STRIP	\$0	
ADVOCATE BLOOD GLUCOSE MONITOR DEVICE	\$0	
ADVOCATE BLOOD GLUCOSE SYSTEM KIT W/DEVICE	\$0	

Drug Name	Drug Tier	Quantity Limit
ADVOCATE CONTROL SOLUTION IN VITRO LIQUID HIGH , LOW	\$0	
ADVOCATE LANCING DEVICE	\$0	
ADVOCATE RAPID-SAFE LANCING	\$0	
ADVOCATE REDI-CODE DEVICE	\$0	
ADVOCATE REDI-CODE IN VITRO STRIP	\$0	
ADVOCATE REDI-CODE KIT W/DEVICE	\$0	
ADVOCATE REDI-CODE+ CONTROL IN VITRO SOLUTION HIGH , LOW	\$0	
ADVOCATE REDI-CODE+ DEVICE	\$0	
ADVOCATE REDI-CODE+ TEST IN VITRO STRIP	\$0	
ADVOCATE SAFETY LANCETS 21G	\$0	
ADVOCATE SAFETY LANCETS 23G	\$0	
ADVOCATE SAFETY LANCETS 28G	\$0	
ADVOCATE TEST IN VITRO STRIP	\$0	
AEROCHAMBER HOLDING CHAMBER DEVICE	2	
AEROCHAMBER MINI CHAMBER DEVICE	2	
AEROCHAMBER MV	2	
AEROCHAMBER PLS FLOVU MTHPIECE DEVICE	2	
AEROCHAMBER PLUS FLO-VU	2	

Effective 1/1/2026

Drug Name	Drug Tier	Quantity Limit
AEROCHAMBER PLUS FLO-VU INTERM DEVICE	2	
AEROCHAMBER PLUS FLO-VU LARGE	2	
AEROCHAMBER PLUS FLO-VU LARGE DEVICE	2	
AEROCHAMBER PLUS FLO-VU MEDIUM	2	
AEROCHAMBER PLUS FLO-VU MEDIUM DEVICE	2	
AEROCHAMBER PLUS FLO-VU SMALL	2	
AEROCHAMBER PLUS FLO-VU SMALL DEVICE	2	
AEROCHAMBER PLUS FLO-VU W/MASK	2	
AEROCHAMBER PLUS FLOW VU	2	
AEROCHAMBER W/FLOWSIGNAL	2	
AEROCHAMBER Z-STAT PLUS	2	
AEROCHAMBER Z-STAT PLUS CHAMBR	2	
AEROCHAMBER Z-STAT PLUS/LARGE	2	
AEROCHAMBER Z-STAT PLUS/MEDIUM	2	
AEROCHAMBER Z-STAT PLUS/SMALL	2	
AEROCHAMBER2GO ANTI-STATIC DEVICE	2	
AEROVENT PLUS DEVICE	2	
AGAMATRIX AMP TEST IN VITRO STRIP	\$0	
AGAMATRIX CONTROL IN VITRO SOLUTION HIGH , NORMAL	\$0	

Drug Name	Drug Tier	Quantity Limit
AGAMATRIX CONTROL LEVEL 2 IN VITRO SOLUTION	\$0	
AGAMATRIX CONTROL LEVEL 4 IN VITRO SOLUTION	\$0	
AGAMATRIX CONTROL NORMAL/HIGH IN VITRO SOLUTION	\$0	
AGAMATRIX JAZZ TEST IN VITRO STRIP	\$0	
AGAMATRIX JAZZ WIRELESS 2 KIT W/DEVICE	\$0	
AGAMATRIX PRESTO KIT W/DEVICE	\$0	
AGAMATRIX PRESTO TEST IN VITRO STRIP	\$0	
AIMSCO LUBRICATED	2	
AQUASTAT INTRAVENOUS SOLUTION 0.9 %	\$0	
AQUASTAT SFR INTRAVENOUS SOLUTION 0.9 %	\$0	
ASSURE 3 CONTROL IN VITRO LIQUID	\$0	
ASSURE 3 METER KIT	\$0	
ASSURE 3 TEST IN VITRO STRIP	\$0	
ASSURE 4 CONTROL LEVEL 1 & 2 IN VITRO LIQUID	\$0	
ASSURE 4 METER DEVICE	\$0	
ASSURE 4 TEST IN VITRO STRIP	\$0	
ASSURE CONTROL SOLUTION 2/3 IN VITRO LIQUID	\$0	
ASSURE DOSE CONTROL IN VITRO SOLUTION NORMAL	\$0	

Drug Name	Drug Tier	Quantity Limit
ASSURE DOSE NORM/HIGH CONTROL IN VITRO SOLUTION	\$0	
ASSURE II CHECK IN VITRO STRIP	\$0	
ASSURE II CONTROL IN VITRO LIQUID	\$0	
ASSURE II CONTROL LEVEL 1 & 2 IN VITRO LIQUID	\$0	
ASSURE II IN VITRO STRIP	\$0	
ASSURE PLATINUM IN VITRO STRIP	\$0	
ASSURE PLATINUM METER DEVICE	\$0	
ASSURE PRISM CONTROL LEVEL 1&2 IN VITRO SOLUTION	\$0	
ASSURE PRISM MULTI METER DEVICE	\$0	
ASSURE PRISM MULTI TEST IN VITRO STRIP	\$0	
ASSURE PRO BLOOD GLUCOSE METER DEVICE	\$0	
ASSURE PRO CONTROL LEVEL 1 & 2 IN VITRO LIQUID	\$0	
ASSURE PRO TEST IN VITRO STRIP	\$0	
ASSURE TITANIUM BLOOD GLUCOSE DEVICE	\$0	
ASSURE TITANIUM IN VITRO STRIP	\$0	
AUTOLET II CLINISAFE KIT	\$0	
AUTOLET LANCING DEVICE	\$0	
AUTOLET LITE CLINISAFE KIT	\$0	

Drug Name	Drug Tier	Quantity Limit
AUTOLET LITE LANCING DEVICE	\$0	
AUTOLET LITE STARTER PACK KIT	\$0	
AUTOLET MINI	\$0	
AUTOLET PLUS	\$0	
AUTOSOFT 30 INFUSION SET	\$0	
AUTOSOFT 90 INFUSION SET	\$0	
AUTOSOFT XC INFUSION SET	\$0	
bd heparin posiflush intravenous solution 10 unit/ml, 100 unit/ml	\$0	
BD LATITUDE DIABETES KIT	\$0	
BD LOGIC BLOOD GLUCOSE MONITOR KIT W/DEVICE	\$0	
BD POSIFLUSH INTRAVENOUS SOLUTION 0.9 %	\$0	
BD POSIFLUSH SAFESCRUB INTRAVENOUS SOLUTION 0.9 %	\$0	
BIOTEL CARE BLOOD GLUCOSE KIT W/DEVICE	\$0	
BIOTEL CARE BLOOD GLUCOSE SYST KIT W/DEVICE	\$0	
BIOTEL CARE TEST STRIPS IN VITRO STRIP	\$0	
BLOOD GLUCOSE MONITOR SYSTEM KIT W/DEVICE	\$0	
BLOOD GLUCOSE MONITORING 333 DEVICE	\$0	
BLOOD GLUCOSE SYSTEM PAK KIT	\$0	

Drug Name	Drug Tier	Quantity Limit
BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
BLOOD GLUCOSE TEST STRIPS 333 IN VITRO STRIP	\$0	
BLULINK CONTROL HIGH & LOW IN VITRO LIQUID	\$0	
BLULINK GLUCOSE MONITORING SYS DEVICE	\$0	
BLULINK GLUCOSE TEST IN VITRO STRIP	\$0	
BREATHE COMFORT CHAMBER/ADULT DEVICE	2	
BREATHE COMFORT CHAMBER/CHILD DEVICE	2	
BREATHE EASE LARGE DEVICE	2	
BREATHE EASE MEDIUM DEVICE	2	
BREATHE EASE SMALL DEVICE	2	
BREATHERITE VALVED MDI CHAMBER DEVICE	2	
CARDIOCOM LANCING DEVICE	\$0	
CAREONE ADVANCED LANCING DEV	\$0	
CAREONE BLOOD GLUCOSE SYSTEM KIT W/DEVICE	\$0	
CAREONE BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
CARESENS CONTROL A IN VITRO SOLUTION	\$0	
CARESENS CONTROL SOLUTION A/B IN VITRO SOLUTION	\$0	
CARESENS LANCETS 30G	\$0	

Drug Name	Drug Tier	Quantity Limit
CARESENS N FELIZ BT DEVICE	\$0	
CARESENS N FELIZ DEVICE	\$0	
CARESENS N GLUCOSE SYSTEM DEVICE	\$0	
CARESENS N GLUCOSE TEST IN VITRO STRIP	\$0	
CARESENS N PLUS BT KIT W/DEVICE	\$0	
CARESENS N VOICE SYSTEM DEVICE	\$0	
CARESENS S CONTROL SOLN A/B IN VITRO LIQUID	\$0	
CARESENS S FIT BLOOD GLUC MON DEVICE	\$0	
CARESENS S FIT BT BLOOD GLUC DEVICE	\$0	
CARESENS S GLUCOSE TEST IN VITRO STRIP	\$0	
CARETOUCH CONTROL SOL LEVEL 2 IN VITRO LIQUID	\$0	
CARETOUCH LANCING/EJECTOR	\$0	
CARETOUCH MONITOR SYSTEM KIT W/DEVICE	\$0	
CARETOUCH TEST IN VITRO STRIP	\$0	
CAYA VAGINAL DIAPHRAGM	2	
CHEMSTRIP K IN VITRO STRIP	\$0	
CHEMSTRIP UGK IN VITRO STRIP	\$0	
CHOSEN LANCETS 30G	\$0	
CHOSEN LANCING DEVICE	\$0	

Effective 1/1/2026

Drug Name	Drug Tier	Quantity Limit
CHOSEN SAFETY LANCETS 28G	\$0	
CLEVER CHEK AUTO-CODE SYSTEM DEVICE	\$0	
CLEVER CHEK AUTO-CODE TEST IN VITRO STRIP	\$0	
CLEVER CHEK AUTO-CODE VOICE DEVICE	\$0	
CLEVER CHEK AUTO-CODE VOICE IN VITRO STRIP	\$0	
CLEVER CHEK SYSTEM KIT W/DEVICE	\$0	
CLEVER CHEK TEST IN VITRO STRIP	\$0	
CLEVER CHOICE AUTO-CODE SYSTEM DEVICE	\$0	
CLEVER CHOICE AUTO-CODE TEST IN VITRO STRIP	\$0	
CLEVER CHOICE COMFORT EZ	\$0	
CLEVER CHOICE GLUCOSE CONTROL IN VITRO LIQUID HIGH , LOW	\$0	
CLEVER CHOICE HOLDING CHAMBER DEVICE	2	
CLEVER CHOICE MICRO SYSTEM KIT W/DEVICE	\$0	
CLEVER CHOICE MICRO TEST IN VITRO STRIP	\$0	
CLEVER CHOICE MINI SYSTEM DEVICE	\$0	
CLEVER CHOICE NO CODING IN VITRO STRIP	\$0	
CLEVER CHOICE TALK SYSTEM DEVICE	\$0	

Drug Name	Drug Tier	Quantity Limit
CLEVER CHOICE TALK SYSTEM IN VITRO STRIP	\$0	
COMFORT TOUCH TWIST LANCET 30G	\$0	
COMPACT SPACE CHAMBER DEVICE	2	
COMPACT SPACE CHAMBER/LG MASK DEVICE	2	
COMPACT SPACE CHAMBER/MED MASK DEVICE	2	
COMPACT SPACE CHAMBER/SM MASK DEVICE	2	
CONDOMS	2	
CONTOUR CONTROL IN VITRO LIQUID HIGH , LOW , NORMAL	\$0	
CONTOUR MONITOR DEVICE DEVICE	\$0	
CONTOUR MONITOR KIT W/DEVICE KIT W/DEVICE	\$0	
CONTOUR NEXT CONTROL IN VITRO SOLUTION LOW , NORMAL	\$0	
CONTOUR NEXT EZ KIT W/DEVICE	\$0	
CONTOUR NEXT GEN MONITOR KIT W/DEVICE	\$0	
CONTOUR NEXT LINK KIT W/DEVICE	\$0	
CONTOUR NEXT MONITOR KIT W/DEVICE	\$0	
CONTOUR NEXT ONE KIT , W/DEVICE	\$0	
CONTOUR NEXT TEST IN VITRO STRIP	\$0	

Effective 1/1/2026

Drug Name	Drug Tier	Quantity Limit
CONTOUR PLUS BLUE KIT W/DEVICE	\$0	
CONTOUR PLUS CONTROL SOLUTION IN VITRO LIQUID	\$0	
CONTOUR PLUS TEST IN VITRO STRIP	\$0	
CONTOUR TEST IN VITRO STRIP	\$0	
CONTROL IN VITRO SOLUTION NORMAL	\$0	
COOL BLOOD GLUCOSE TEST STRIPS IN VITRO STRIP	\$0	
COOL CONTROL A IN VITRO SOLUTION	\$0	
COOL CONTROL B IN VITRO SOLUTION	\$0	
COOL MONITOR DEVICE	\$0	
COOL MONITOR KIT KIT W/DEVICE	\$0	
CVS ADVANCED GLUCOSE TEST IN VITRO STRIP	\$0	
CVS BLOOD GLUCOSE METER DEVICE	\$0	
CVS BLOOD GLUCOSE METER KIT W/DEVICE	\$0	
CVS GLUCOSE METER TEST STRIPS IN VITRO STRIP	\$0	
CVS LANCING DEVICE	\$0	
CVS TRUE METRIX GLUCOSE TEST IN VITRO STRIP	\$0	
D-CARE BLOOD GLUCOSE IN VITRO STRIP	\$0	
D-CARE GLUCOMETER KIT W/DEVICE	\$0	

Drug Name	Drug Tier	Quantity Limit
DEPLIN 15 ORAL CAPSULE 15-90.314 MG	2	
DEXCOM G6 RECEIVER DEVICE	\$0	
DEXCOM G6 SENSOR	\$0	
DEXCOM G6 TRANSMITTER	\$0	
DEXCOM G7 15 DAY SENSOR	\$0	
DEXCOM G7 RECEIVER DEVICE	\$0	
DEXCOM G7 SENSOR	\$0	
DIASCREEN 10	\$0	
DIASCREEN 1B	\$0	
DIASCREEN 1G STRIP	\$0	
DIASCREEN 1K	\$0	
DIASCREEN 1K STRIP	\$0	
DIASCREEN 2GK STRIP	\$0	
DIASCREEN 2GP	\$0	
DIASCREEN 3	\$0	
DIASCREEN 4NL	\$0	
DIASCREEN 4OBL	\$0	
DIASCREEN 4PH	\$0	
DIASCREEN 5	\$0	
DIASCREEN 6	\$0	
DIASCREEN 7	\$0	
DIASCREEN 8	\$0	
DIASCREEN 9	\$0	
DIASCREEN LIQUID URINE CONTROL	\$0	
DIASTIX IN VITRO STRIP	\$0	
DIASTIX REAGENT IN VITRO STRIP	\$0	
DIATHRIVE BLOOD GLUCOSE METER DEVICE	\$0	
DIATHRIVE BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit
DIATHRIVE GLUCOSE CONTROL SOLN IN VITRO LIQUID	\$0		DUREX REALFEEL DEVICE	2	
DIATHRIVE GLUCOSE TEST IN VITRO STRIP	\$0		DUREX TROPICAL	2	
DIATHRIVE LANCING DEVICE	\$0		EASIVENT	2	
DIATHRIVE+ GLUCOSE MONITOR DEVICE	\$0		EASIVENT MASK LARGE	2	
DIATHRIVE+ GLUCOSE TEST IN VITRO STRIP	\$0		EASIVENT MASK MEDIUM	2	
DIATRUE CONTROL LEVEL 1 IN VITRO SOLUTION LOW	\$0		EASIVENT MASK SMALL	2	
DIATRUE CONTROL LEVEL 2 IN VITRO SOLUTION NORMAL	\$0		EASY MAX BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
DIATRUE CONTROL LEVEL 3 IN VITRO SOLUTION HIGH	\$0		EASY MAX T1 GLUCOSE SYSTEM KIT W/DEVICE	\$0	
DIATRUE PLUS BLOOD GLUCOSE DEVICE	\$0		EASY MINI EJECT LANCING DEVICE	\$0	
DIATRUE PLUS TEST IN VITRO STRIP	\$0		EASY MINI LANCING DEVICE	\$0	
DROPLET GENTEEL LANCING DEVICE	\$0		EASY PLUS II CONTROL IN VITRO SOLUTION HIGH , LOW	\$0	
DROPLET LANCING DEVICE	\$0		EASY PLUS II GLUCOSE SYSTEM DEVICE	\$0	
DROPSAFE ACTI-LANCE 23G	\$0		EASY PLUS II GLUCOSE TEST IN VITRO STRIP	\$0	
DRUG MART LANCING DEVICE	\$0		EASY STEP CONTROL IN VITRO SOLUTION HIGH , LOW , NORMAL	\$0	
DUO-CARE CONTROL SOLUTION IN VITRO LIQUID	\$0		EASY STEP GLUCOSE MONITOR DEVICE	\$0	
DUO-CARE TEST IN VITRO STRIP	\$0		EASY STEP TEST IN VITRO STRIP	\$0	
DUREX EXTRA SENSITIVE THIN	2		EASY TALK BLOOD GLUCOSE SYSTEM DEVICE	\$0	
DUREX EXTRA SENSITIVE THIN DEVICE	2		EASY TALK BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	

Drug Name	Drug Tier	Quantity Limit
EASY TALK CONTROL IN VITRO SOLUTION HIGH , LOW , NORMAL	\$0	
EASY TALK PLUS II CONTROL IN VITRO SOLUTION HIGH , LOW	\$0	
EASY TALK PLUS II TEST STRIPS IN VITRO STRIP	\$0	
EASY TOUCH CONTROL HIGH & LOW IN VITRO SOLUTION	\$0	
EASY TOUCH GLUCOSE SYSTEM KIT W/DEVICE	\$0	
EASY TOUCH HEALTHPRO GLUCOSE IN VITRO STRIP	\$0	
EASY TOUCH HEALTHPRO GLUCOSE KIT W/DEVICE	\$0	
EASY TOUCH HEALTHPRO HIGH/LOW IN VITRO LIQUID	\$0	
EASY TOUCH LANCING DEVICE	\$0	
EASY TOUCH TEST IN VITRO STRIP	\$0	
EASY TRAK BLOOD GLUCOSE SYSTEM DEVICE	\$0	
EASY TRAK BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
EASY TRAK CONTROL IN VITRO SOLUTION HIGH , LOW , NORMAL	\$0	
EASY TRAK II BLOOD GLUCOSE SYS DEVICE	\$0	
EASY TRAK II CONTROL IN VITRO LIQUID NORMAL	\$0	

Drug Name	Drug Tier	Quantity Limit
EASY TRAK II GLUCOSE TEST IN VITRO STRIP	\$0	
EASYGLUCO IN VITRO STRIP	\$0	
EASYGLUCO KIT	\$0	
EASYMAX 15 LEVEL 2 CONTROL IN VITRO SOLUTION	\$0	
EASYMAX 15 LEVEL 2-3 CONTROL IN VITRO LIQUID	\$0	
EASYMAX 15 TEST IN VITRO STRIP	\$0	
EASYMAX CONTROL IN VITRO SOLUTION NORMAL	\$0	
EASYMAX CONTROL NORMAL/HIGH IN VITRO LIQUID	\$0	
EASYMAX NG BLOOD GLUCOSE DEVICE	\$0	
EASYMAX NG BLOOD GLUCOSE KIT W/DEVICE	\$0	
EASYMAX TEST IN VITRO STRIP	\$0	
EASYMAX V BLOOD GLUCOSE DEVICE	\$0	
EASYPRO BLOOD GLUCOSE MONITOR KIT W/DEVICE	\$0	
EASYPRO BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
EASYPRO PLUS IN VITRO STRIP	\$0	
EASYPRO PLUS KIT W/DEVICE	\$0	
ELEMENT AUTOCODE SYSTEM KIT W/DEVICE	\$0	
ELEMENT COMPACT CONTROL 2 IN VITRO SOLUTION	\$0	

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit
ELEMENT COMPACT CONTROL 3 IN VITRO SOLUTION	\$0		EMBRACE PRO GLUCOSE CONTROL IN VITRO LIQUID	\$0	
ELEMENT COMPACT GLUCOSE SYSTEM DEVICE	\$0		EMBRACE PRO GLUCOSE METER DEVICE	\$0	
ELEMENT COMPACT TEST IN VITRO STRIP	\$0		EMBRACE PRO GLUCOSE TEST IN VITRO STRIP	\$0	
ELEMENT COMPACT V GLUCOSE SYS DEVICE	\$0		EMBRACE TALK BLOOD GLUCOSE DEVICE	\$0	
ELEMENT CONTROL IN VITRO LIQUID HIGH , LOW , NORMAL	\$0		EMBRACE TALK GLUCOSE CONTROL IN VITRO SOLUTION HIGH , LOW	\$0	
ELEMENT PLUS DEVICE	\$0		EMBRACE TALK GLUCOSE TEST IN VITRO STRIP	\$0	
ELEMENT TEST IN VITRO STRIP	\$0		EMBRACE TALK MONITORING SYSTEM KIT W/DEVICE	\$0	
EMBRACE BLOOD GLUCOSE MONITOR DEVICE	\$0		EMBRACE WAVE BLOOD GLUCOSE DEVICE	\$0	
EMBRACE BLOOD GLUCOSE TEST IN VITRO STRIP	\$0		EMBRACE WAVE BLOOD GLUCOSE IN VITRO STRIP	\$0	
EMBRACE CONTROL IN VITRO SOLUTION LOW	\$0		EMBRACE WAVE GLUCOSE METER DEVICE	\$0	
EMBRACE EVO BLOOD GLUCOSE TEST IN VITRO STRIP	\$0		ENLITE GLUCOSE SENSOR	\$0	
EMBRACE EVO CONTROL LEVEL 1 IN VITRO LIQUID LOW	\$0		ENLITE SERTER	\$0	
EMBRACE EVO GLUCOSE MONITOR DEVICE	\$0		EQ BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
EMBRACE EVO GLUCOSE MONITORING KIT W/DEVICE	\$0		EQ SPACE CHAMBER ANTI-STATIC DEVICE	2	
EMBRACE GLUCOSE CONTROL IN VITRO LIQUID HIGH	\$0		EQ SPACE CHAMBER ANTI-STATIC L DEVICE	2	
EMBRACE LANCING DEVICE/EJECTOR	\$0		EQ SPACE CHAMBER ANTI-STATIC M DEVICE	2	
			EQ SPACE CHAMBER ANTI-STATIC S DEVICE	2	

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit
EVERSENSE 365 SENSOR/HOLDER	\$0		FIFTY50 GLUCOSE TEST 2.0 IN VITRO STRIP	\$0	
EVERSENSE 365 SMART TRANSMIT	\$0		FLEXICHAMBER ADULT MASK/SMALL	2	
EVERSENSE E3 SENSOR/HOLDER	\$0		FLEXICHAMBER CHILD MASK/LARGE	2	
EVERSENSE E3 SMART TRANSMITTER	\$0		FLEXICHAMBER CHILD MASK/SMALL	2	
EVERSENSE SENSOR/HOLDER	\$0		FLEXICHAMBER DEVICE	2	
EVERSENSE SMART TRANSMITTER	\$0		FONDCIRCLE BLOOD GLUCOSE MONIT KIT W/DEVICE	\$0	
EVOLUTION AUTOCODE DEVICE	\$0		FONDCIRCLE BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
EVOLUTION AUTOCODE IN VITRO STRIP	\$0		FONDCIRCLE CONTROL SOLUTION IN VITRO LIQUID NORMAL	\$0	
EVOLUTION CONTROL IN VITRO SOLUTION NORMAL	\$0		FONDCIRCLE LANCING DEVICE	\$0	
EXTENDED INFUSION SET 23"/6MM	\$0		FONDCIRCLE SINGLE USE LANCETS	\$0	
EXTENDED INFUSION SET 23"/9MM	\$0		FORA 6 CONNECT IN VITRO STRIP	\$0	
EXTENDED INFUSION SET 32"/6MM	\$0		FORA 6 CONNECT/GTEL TEST IN VITRO STRIP	\$0	
EXTENDED INFUSION SET 32"/9MM	\$0		FORA BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
EXTENDED RESERVOIR 3ML	\$0		FORA CONTROL IN VITRO SOLUTION HIGH , LOW , NORMAL	\$0	
FANTASY LUBRICATED	2		FORA D15G BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
FANTASY LUBRICATED/SPERMIC IDE	2		FORA D20 BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
FC2 FEMALE CONDOM	2				
FEMCAP VAGINAL DEVICE 22 MM, 26 MM, 30 MM	2				
FIFTY50 GLUCOSE METER 2.0 KIT W/DEVICE	\$0				

Drug Name	Drug Tier	Quantity Limit
FORA D40/G31 BLOOD GLUCOSE IN VITRO STRIP	\$0	
FORA G20 BLOOD GLUCOSE SYSTEM KIT W/DEVICE	\$0	
FORA G20 BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
FORA G30/PREM V10 GLUCOSE TEST IN VITRO STRIP	\$0	
FORA G30A BLOOD GLUCOSE SYSTEM DEVICE	\$0	
FORA GD20 BLOOD GLUCOSE SYSTEM DEVICE	\$0	
FORA GD20 TEST IN VITRO STRIP	\$0	
FORA GD50 BLOOD GLUCOSE SYSTEM DEVICE	\$0	
FORA GD50 BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
FORA GTEL BLOOD GLUCOSE SYSTEM DEVICE	\$0	
FORA GTEL BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
FORA LANCING DEVICE	\$0	
FORA PREMIUM V10 BLE SYSTEM DEVICE	\$0	
FORA TEST N' GO MONITOR DEVICE	\$0	
FORA TN'G ADVANCE PRO IN VITRO STRIP	\$0	
FORA TN'G VOICE KIT W/DEVICE	\$0	
FORA TN'G/TN'G VOICE IN VITRO STRIP	\$0	

Drug Name	Drug Tier	Quantity Limit
FORA V10 BLOOD GLUCOSE SYSTEM DEVICE	\$0	
FORA V10 BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
FORA V10/V12/D10/D20 TEST KIT	\$0	
FORA V12 BLOOD GLUCOSE SYSTEM DEVICE	\$0	
FORA V12 BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
FORA V20 BLOOD GLUCOSE SYSTEM DEVICE	\$0	
FORA V20 BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
FORA V30A BLOOD GLUCOSE SYSTEM DEVICE	\$0	
FORA V30A BLOOD GLUCOSE SYSTEM KIT W/DEVICE	\$0	
FORA V30A BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
FORACARE GD40 MONITOR DEVICE	\$0	
FORACARE GD40 TEST IN VITRO STRIP	\$0	
FORACARE GDH CONTROL IN VITRO SOLUTION HIGH , LOW , NORMAL	\$0	
FORACARE PREMIUM V10 DEVICE	\$0	
FORACARE PREMIUM V10 TEST IN VITRO STRIP	\$0	
FORACARE TEST N GO MONITOR DEVICE	\$0	

Effective 1/1/2026

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit
FORACARE TEST N GO TEST IN VITRO STRIP	\$0		FREESTYLE LITE TEST IN VITRO STRIP	\$0	
FORTISCARE CONTROL IN VITRO SOLUTION HIGH , LOW , NORMAL	\$0		FREESTYLE PRECISION NEO SYSTEM KIT W/DEVICE	\$0	
FORTISCARE G1 TEST STRIP IN VITRO STRIP	\$0		FREESTYLE PRECISION NEO TEST IN VITRO STRIP	\$0	
FORTISCARE T1 GLUCOSE SYSTEM DEVICE	\$0		FREESTYLE TEST IN VITRO STRIP	\$0	
FORTISCARE TEST IN VITRO STRIP	\$0		GE100 BLOOD GLUCOSE SYSTEM DEVICE	\$0	
FREESTYLE CONTROL SOLUTION IN VITRO LIQUID	\$0		GE100 BLOOD GLUCOSE SYSTEM KIT W/DEVICE	\$0	
FREESTYLE FREEDOM LITE KIT W/DEVICE	\$0		GE100 BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
FREESTYLE INSULINX TEST IN VITRO STRIP	\$0		GE100 CONTROL IN VITRO SOLUTION NORMAL	\$0	
FREESTYLE LIBRE 14 DAY READER DEVICE	\$0		GELFOAM SPONGE SIZE 50 EXTERNAL	3	
FREESTYLE LIBRE 14 DAY SENSOR	\$0		GENTEEL LANCING KIT (BLUE) KIT	\$0	
FREESTYLE LIBRE 2 PLUS SENSOR	\$0		GENTEEL PLUS LANCING (BLACK)	\$0	
FREESTYLE LIBRE 2 READER DEVICE	\$0		GENTEEL PLUS LANCING (PURPLE)	\$0	
FREESTYLE LIBRE 2 SENSOR	\$0		GENTEEL PLUS LANCING (WHITE)	\$0	
FREESTYLE LIBRE 3 PLUS SENSOR	\$0		GENTEEL PLUS LANCING DEV(BLUE)	\$0	
FREESTYLE LIBRE 3 READER DEVICE	\$0		GENTEEL PLUS LANCING DEV(PINK)	\$0	
FREESTYLE LIBRE 3 SENSOR	\$0		GENULTIMATE TEST IN VITRO STRIP	\$0	
FREESTYLE LIBRE READER DEVICE	\$0		GHT BLOOD GLUCOSE MONITOR KIT W/DEVICE	\$0	
FREESTYLE LITE DEVICE	\$0		GHT TEST IN VITRO STRIP	\$0	
FREESTYLE LITE KIT W/DEVICE	\$0				

Drug Name	Drug Tier	Quantity Limit
GLOBAL LANCING DEVICE	\$0	
GLUCO PERFECT 3 METER DEVICE	\$0	
GLUCO PERFECT 3 TEST IN VITRO STRIP	\$0	
GLUCOCARD 01 BLOOD GLUCOSE DEVICE	\$0	
GLUCOCARD 01 BLOOD GLUCOSE KIT W/DEVICE	\$0	
GLUCOCARD 01 CONTROL IN VITRO LIQUID	\$0	
GLUCOCARD 01 CONTROL IN VITRO SOLUTION NORMAL	\$0	
GLUCOCARD 01 SENSOR PLUS IN VITRO STRIP	\$0	
GLUCOCARD 01-MINI GLUCOSE KIT W/DEVICE	\$0	
GLUCOCARD EXPRESSION CONTROL IN VITRO SOLUTION	\$0	
GLUCOCARD EXPRESSION MONITOR KIT W/DEVICE	\$0	
GLUCOCARD EXPRESSION TEST IN VITRO STRIP	\$0	
GLUCOCARD SHINE CONNEX KIT W/DEVICE	\$0	
GLUCOCARD SHINE CONTROL IN VITRO SOLUTION	\$0	
GLUCOCARD SHINE DEVICE	\$0	

Drug Name	Drug Tier	Quantity Limit
GLUCOCARD SHINE EXPRESS KIT W/DEVICE	\$0	
GLUCOCARD SHINE KIT W/DEVICE	\$0	
GLUCOCARD SHINE TEST IN VITRO STRIP	\$0	
GLUCOCARD SHINE XL DEVICE	\$0	
GLUCOCARD VITAL MONITOR KIT W/DEVICE	\$0	
GLUCOCARD VITAL TEST IN VITRO STRIP	\$0	
GLUCOCARD X-METER KIT W/DEVICE	\$0	
GLUCOCARD X-SENSOR CONTROL IN VITRO SOLUTION NORMAL	\$0	
GLUCOCARD X-SENSOR IN VITRO STRIP	\$0	
GLUCOCOM BLOOD GLUCOSE MONITOR DEVICE	\$0	
GLUCOCOM CONTROL IN VITRO LIQUID HIGH , NORMAL	\$0	
GLUCOCOM MONITOR KIT W/DEVICE	\$0	
GLUCOCOM TEST IN VITRO STRIP	\$0	
GLUCONAVII BLOOD GLUCOSE SYS KIT W/DEVICE	\$0	
GLUCONAVII BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
GLUCOPRO SYR RES 3ML 22GX3/8"	\$0	
GLUCOSE CONTROL IN VITRO SOLUTION , NORMAL	\$0	

Drug Name	Drug Tier	Quantity Limit
GLUCOSE METER TEST IN VITRO STRIP	\$0	
GNP EASY TOUCH CONT HIGH/LOW IN VITRO LIQUID	\$0	
GNP EASY TOUCH CONT HIGH/LOW IN VITRO SOLUTION	\$0	
GNP EASY TOUCH GLUCOSE METER DEVICE	\$0	
GNP EASY TOUCH GLUCOSE TEST IN VITRO STRIP	\$0	
GNP LANCING SYSTEM DEVICE	\$0	
GNP TRUE METRIX AIR METER KIT W/DEVICE	\$0	
GNP TRUE METRIX GLUCOSE METER KIT W/DEVICE	\$0	
GNP TRUE METRIX GLUCOSE STRIPS IN VITRO STRIP	\$0	
GNP TRUETRACK SMART SYSTEM IN VITRO STRIP	\$0	
GNP TRUETRACK TEST STRIPS IN VITRO STRIP	\$0	
GOJJI BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
GOJJI CONTROL IN VITRO SOLUTION NORMAL	\$0	
GOJJI LANCING DEVICE/CLEAR CAP	\$0	
GOODSENSE BLOOD GLUCOSE IN VITRO STRIP	\$0	
GOODSENSE BLOOD GLUCOSE KIT W/DEVICE	\$0	

Drug Name	Drug Tier	Quantity Limit
GOODSENSE LANCING DEVICE	\$0	
GUARDIAN 4 GLUCOSE SENSOR	\$0	
GUARDIAN 4 TRANSMITTER	\$0	
GUARDIAN CONNECT TRANSMITTER	\$0	
GUARDIAN LINK 3 TRANSMITTER	\$0	
GUARDIAN REAL-TIME CHARGER	\$0	
GUARDIAN REAL-TIME TEST PLUG	\$0	
GUARDIAN SENSOR 3	\$0	
HEALTH CARE LANCING DEVICE	\$0	
HEALTHPRO BLOOD GLUCOSE MONITOR KIT W/DEVICE	\$0	
H-E-B INCONTROL ADV LANCING	\$0	
heparin na (pork) lock flush intravenous solution 1 unit/ml, 10 unit/ml, 100 unit/ml	\$0	
heparin sod (pork) lock flush intravenous solution 10 unit/ml, 100 unit/ml	\$0	
HM EMBRACE TALK SYSTEM KIT W/DEVICE	\$0	
HW EMBRACE PRO GLUCOSE METER DEVICE	\$0	
HW EMBRACE PRO GLUCOSE TEST IN VITRO STRIP	\$0	
HW EMBRACE TALK BLOOD GLUCOSE DEVICE	\$0	
HW EMBRACE TALK GLUCOSE TEST IN VITRO STRIP	\$0	

Drug Name	Drug Tier	Quantity Limit
HYPOLANCE AST LANCING KIT	\$0	
IGLUCOSE MONITORING SYSTEM KIT W/DEVICE	\$0	
IGLUCOSE TEST STRIPS IN VITRO STRIP	\$0	
IHEALTH BLOOD GLUCOSE TEST STR IN VITRO STRIP	\$0	
IHEALTH CONTROL SOLUTION IN VITRO LIQUID	\$0	
IHEALTH LANCING DEVICE	\$0	
ILET CONTACT DETACH 23" 6MM	\$0	
ILET INFUSION-INSET 23" 6MM	\$0	
ILET INFUSION-INSET 32" 6MM	\$0	
ILET INSULIN PUMP DEVICE	\$0	
ILET STARTER - CONTACT DETACH	\$0	
ILET STARTER KIT - INSET 23"	\$0	
ILET STARTER KIT - INSET 32"	\$0	
IN TOUCH BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
IN TOUCH DEVICE	\$0	
IN TOUCH GLUCOSE CONTROL IN VITRO SOLUTION	\$0	
IN TOUCH LANCING DEVICE	\$0	
INFINITY BLOOD GLUCOSE SYSTEM KIT W/DEVICE	\$0	

Drug Name	Drug Tier	Quantity Limit
INFINITY BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
INFINITY CONTROL IN VITRO SOLUTION HIGH , LOW , NORMAL	\$0	
INFINITY VOICE IN VITRO LIQUID NORMAL	\$0	
INFINITY VOICE IN VITRO STRIP	\$0	
INFINITY VOICE KIT W/DEVICE	\$0	
INSPIREASE	2	
INSPIREASE RESERVOIR BAGS	2	
J-TIP KIT W/VIAL ADAPTERS KIT	\$0	
KAMELEON LUBRICATED	2	
KETO-DIASTIX IN VITRO STRIP	\$0	
KETONE CARE IN VITRO STRIP	\$0	
KETONE TEST IN VITRO STRIP	\$0	
KETOSTIX IN VITRO STRIP	\$0	
KIMONO	2	
KIMONO COLORS DEVICE	2	
KIMONO MAXX-LARGE FLARE	2	
KIMONO MICRO THIN	2	
KIMONO MICRO THIN PLUS	2	
KIMONO PLUS	2	
KIMONO PS	2	
KIMONO PS PLUS	2	
KIMONO SENSATION	2	
KIMONO SENSATION PLUS	2	

Drug Name	Drug Tier	Quantity Limit
KIMONO SPECIAL DEVICE	2	
KROGER AUTOLET LANCING DEVICE	\$0	
KROGER BLOOD GLUCOSE KIT W/DEVICE	\$0	
KROGER BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
KROGER HEALTHPRO CONTROL HI/LO IN VITRO LIQUID	\$0	
KROGER HEALTHPRO GLUCOSE TEST IN VITRO STRIP	\$0	
KROGER LANCING DEVICE	\$0	
KROGER PREMIUM BLOOD GLUCOSE KIT W/DEVICE	\$0	
KROGER PREMIUM GLUCOSE TEST IN VITRO STRIP	\$0	
KT TAPE CGM PATCH	\$0	
LANCETS	\$0	
LANCETS 28G THIN	\$0	
LANCETS IN VITRO STRIP	\$0	
LANCETS KIT	\$0	
LANCETS SUPER THIN	\$0	
LANCING DEVICE	\$0	
LANZO	\$0	
LEADER ADVANCED LANCING DEVICE	\$0	
LIBERTY BLOOD GLUCOSE METER DEVICE	\$0	
LIBERTY GLUCOSE CONTROL IN VITRO LIQUID NORMAL	\$0	

Drug Name	Drug Tier	Quantity Limit
LIBERTY GLUCOSE CONTROL MID IN VITRO SOLUTION	\$0	
LIBERTY MINI LANCING DEVICE	\$0	
LIBERTY TEST IN VITRO STRIP	\$0	
LITE TOUCH LANCING PEN	\$0	
l-methylfolate forte oral capsule 15-90.314 mg	1	
l-methylfolate-algae oral capsule 15-90.314 mg	1	
MASK VORTEX/CHILD/FROG	2	
MASK VORTEX/TODDLER/LA DYBUG	2	
MAXX	2	
MAXX PLUS	2	
MEDISENSE GLUCOSE KETONE CONTR IN VITRO LIQUID	\$0	
MEDISENSE HI/MID/LOW CONTROL IN VITRO LIQUID	\$0	
MEDTRONIC MINIMED 780G KIT	\$0	
MEIJER BLOOD GLUCOSE KIT W/DEVICE	\$0	
MEIJER BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
MEIJER ESSENTIAL BLOOD GLUCOSE KIT W/DEVICE	\$0	
MEIJER ESSENTIAL GLUCOSE TEST IN VITRO STRIP	\$0	
MEIJER PREMIUM BLOOD GLUCOSE KIT W/DEVICE	\$0	

Drug Name	Drug Tier	Quantity Limit
MEIJER TRUE2GO BLOOD GLUCOSE KIT W/DEVICE	\$0	
MEIJER TRUERESULT GLUCOSE SYS KIT W/DEVICE	\$0	
MEIJER TRUETEST TEST IN VITRO STRIP	\$0	
MEIJER TRUETRACK GLUCOSE SYS KIT W/DEVICE	\$0	
MEIJER TRUETRACK TEST IN VITRO STRIP	\$0	
MICROCHAMBER	2	
MICROCHAMBER DEVICE	2	
MICRODOT BLOOD GLUCOSE SYSTEM KIT W/DEVICE	\$0	
MICRODOT CONTROL HIGH/LOW IN VITRO SOLUTION	\$0	
MICRODOT TEST IN VITRO STRIP	\$0	
MICROLET NEXT LANCING DEVICE	\$0	
MICROSPACER	2	
MINIMED 630G GUARDIAN PRESS	\$0	
MINIMED 630G INSULIN PUMP KIT	\$0	
MINIMED 770G INSULIN PUMP SYS KIT	\$0	
MINIMED 780G INSULIN PUMP KIT	\$0	
MINIMED INSTINCT GLUC SENSOR	\$0	
MINIMED MIO ADVANCE INFUSE SET	\$0	
MINIMED PUMP RESERVOIR 3ML	\$0	

Drug Name	Drug Tier	Quantity Limit
MINIMED QUICK SET INF SET 18"	\$0	
MINIMED QUICK SET INF SET 23"	\$0	
MINIMED QUICK SET INF SET 32"	\$0	
MINIMED QUICK SET INF SET 43"	\$0	
MINIMED QUICK-SERTER	\$0	
MINIMED RESERVOIR 1.8ML	\$0	
MINIMED RESERVOIR 3ML	\$0	
MINIMED SILHOUETTE INF SET 32"	\$0	
MINIMED SILHOUETTE INF SET 43"	\$0	
MM BLOOD GLUCOSE SYSTEM KIT W/DEVICE	\$0	
MM BLOOD GLUCOSE SYSTEM REFILL KIT	\$0	
MM BLULINK GLUCOSE MONIT SYS DEVICE	\$0	
MM BLULINK GLUCOSE TEST IN VITRO STRIP	\$0	
MM EASY TOUCH GLUCOSE IN VITRO STRIP	\$0	
MM EASY TOUCH GLUCOSE METER KIT W/DEVICE	\$0	
MM LANCING DEVICE	\$0	
MOBI 2ML CARTRIDGE	\$0	
MOBILE LANCETS 30G	\$0	
MONOJECT FLUSH SYRINGE INTRAVENOUS SOLUTION 0.9 %	\$0	
MONOJECT SODIUM CHLORIDE FLUSH INTRAVENOUS SOLUTION 0.9 %	\$0	

Drug Name	Drug Tier	Quantity Limit
MYGLUCOHEALTH BLOOD GLUCOSE KIT W/DEVICE	\$0	
MYGLUCOHEALTH CONTROL IN VITRO SOLUTION	\$0	
MYGLUCOHEALTH TEST IN VITRO STRIP	\$0	
NEUTEK 2TEK CONTROL IN VITRO SOLUTION	\$0	
NEUTEK 2TEK TEST IN VITRO STRIP	\$0	
normal saline flush intravenous solution 0.9 %	\$0	
NOVA MAX BLOOD GLUCOSE SYSTEM DEVICE	\$0	
NOVA MAX BLOOD GLUCOSE SYSTEM KIT W/DEVICE	\$0	
NOVA MAX GLUCOSE TEST IN VITRO STRIP	\$0	
NOVA MAX PLUS GLU/KET CONTROL IN VITRO LIQUID	\$0	
NOVA SUREFLEX LANCING DEVICE	\$0	
OMNIFLEX DIAPHRAGM VAGINAL DIAPHRAGM	2	
OMNIPOD POD PALS	\$0	
ON CALL EXPRESS BLOOD GLUCOSE IN VITRO STRIP	\$0	
ON CALL EXPRESS MONITORING SYS KIT W/DEVICE	\$0	
ONE DROP BLOOD GLUCOSE MONITOR KIT W/DEVICE	\$0	
ONE DROP TEST IN VITRO STRIP	\$0	

Drug Name	Drug Tier	Quantity Limit
ONETOUCH DELICA PLUS LANCING	\$0	
ONETOUCH DELICA SAFETY LANCING	\$0	
ONETOUCH ULTRA 2 KIT W/DEVICE	\$0	
ONETOUCH ULTRA BLUE TEST IN VITRO STRIP	\$0	
ONETOUCH ULTRA CONTROL IN VITRO LIQUID	\$0	
ONETOUCH ULTRA IN VITRO LIQUID	\$0	
ONETOUCH ULTRA IN VITRO STRIP	\$0	
ONETOUCH ULTRA TEST IN VITRO STRIP	\$0	
ONETOUCH VERIO FLEX SYSTEM DEVICE	\$0	
ONETOUCH VERIO FLEX SYSTEM KIT W/DEVICE	\$0	
ONETOUCH VERIO IN VITRO LIQUID , HIGH	\$0	
ONETOUCH VERIO TEST STRIPS	\$0	
ONETOUCH VERIO REFLECT KIT W/DEVICE	\$0	
OPTICHAMBER DIAMOND	2	
OPTICHAMBER DIAMOND-LG MASK DEVICE	2	
OPTICHAMBER DIAMOND-MD MASK	2	
OPTICHAMBER DIAMOND-SM MASK	2	
OPTIUMEZ TEST IN VITRO STRIP	\$0	
OVAL TAPE	\$0	
paba oral tablet 100 mg	1	

Effective 1/1/2026

Drug Name	Drug Tier	Quantity Limit
PANDA MASK LARGE	2	
PANDA MASK MEDIUM	2	
PANDA MASK SMALL	2	
PARADIGM SILHOUETTE COMBO 23"	\$0	
PARADIGM SILHOUETTE COMBO 43"	\$0	
PARI VORTEX ADULT MASK	2	
PARI VORTEX PEDIATRIC MASK	2	
PEDIATRIC PANDA MASK	2	
PERFECT POINT SAFETY LANCETS	\$0	
PHARMACIST CHOICE AUTOCODE IN VITRO STRIP	\$0	
PHARMACIST CHOICE AUTOCODE SYS KIT W/DEVICE	\$0	
PHARMACIST CHOICE MINI SYSTEM DEVICE	\$0	
PHARMACIST CHOICE NO CODING IN VITRO STRIP	\$0	
phendimetrazine tartrate oral tablet 35 mg	1	
PIP BLOOD GLUCOSE MONITORING DEVICE	\$0	
PIP BLOOD GLUCOSE TEST STRIP IN VITRO STRIP	\$0	
PIP GLUCOSE CONTROL SOLUTION IN VITRO LIQUID	\$0	
POCKET CHAMBER DEVICE	2	
POCKET SPACER DEVICE	2	

Drug Name	Drug Tier	Quantity Limit
POCKETCHEM EZ CONTROL IN VITRO SOLUTION	\$0	
POCKETCHEM EZ SYSTEM KIT W/DEVICE	\$0	
POCKETCHEM EZ TEST IN VITRO STRIP	\$0	
POGO AUTOMATIC BLOOD GLUCOSE DEVICE	\$0	
POGO AUTOMATIC TEST CARTRIDGES IN VITRO DIAGNOSTIC TEST	\$0	
PRECISION GLUCOSE KETONE CONTR IN VITRO LIQUID	\$0	
PRECISION XTRA BLOOD GLUCOSE IN VITRO STRIP	\$0	
PRECISION XTRA KIT W/DEVICE	\$0	
PREMIUM BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
PRO COMFORT SPACER ADULT	2	
PRO COMFORT SPACER CHILD	2	
PRO COMFORT SPACER INFANT DEVICE	2	
PRO VOICE V8 GLUCOSE SYSTEM DEVICE	\$0	
PRO VOICE V8/V9 GLUCOSE IN VITRO STRIP	\$0	
PRO VOICE V9 GLUCOSE SYSTEM DEVICE	\$0	
PROCARE SPACER/ADULT MASK DEVICE	2	

Drug Name	Drug Tier	Quantity Limit
PROCARE SPACER/CHILD MASK DEVICE	2	
PROCHAMBER VHC DEVICE	2	
PRODIGY AUTOCODE BLOOD GLUCOSE DEVICE	\$0	
PRODIGY AUTOCODE BLOOD GLUCOSE KIT W/DEVICE	\$0	
PRODIGY CONTROL SOLUTION IN VITRO SOLUTION HIGH , LOW	\$0	
PRODIGY LANCING DEVICE	\$0	
PRODIGY NO CODING BLOOD GLUC IN VITRO STRIP	\$0	
PRODIGY NO CODING BLOOD GLUC KIT W/DEVICE	\$0	
PRODIGY POCKET BLOOD GLUCOSE KIT W/DEVICE	\$0	
PRODIGY VOICE BLOOD GLUCOSE KIT W/DEVICE	\$0	
PTS PANELS EGLU TEST IN VITRO STRIP	\$0	
PURE COMFORT SPACER CHAMBER DEVICE	2	
PX ADVANCED LANCING DEVICE	\$0	
QC ADVANCED LANCING DEVICE	\$0	
QUICK TOUCH BLOOD GLUCOSE KIT W/DEVICE	\$0	
QUICK TOUCH BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	

Drug Name	Drug Tier	Quantity Limit
QUICK-SERTER INSERTION DEVICE	\$0	
QUICKTEK CONTROL SOLUTION IN VITRO LIQUID	\$0	
QUICKTEK KIT	\$0	
QUICKTEK TEST IN VITRO STRIP	\$0	
QUICKTEK/METER KIT	\$0	
QUINTET AC BLOOD GLUCOSE DEVICE	\$0	
QUINTET AC BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
QUINTET BLOOD GLUCOSE SYSTEM DEVICE	\$0	
QUINTET BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
QUINTET CONTROL HIGH/NORMAL IN VITRO SOLUTION	\$0	
REALITY LATEX CONDOMS	2	
REALITY LATEX/ULTRA TEXTURED DEVICE	2	
REALITY LATEX/ULTRA THIN DEVICE	2	
REFUAH PLUS BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
REFUAH PLUS GLUCOSE CONTROL IN VITRO SOLUTION	\$0	
REFUAH PLUS MONITORING SYSTEM KIT W/DEVICE	\$0	
RELION BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
RELION CONFIRM GLUCOSE MONITOR KIT W/DEVICE	\$0	

Drug Name	Drug Tier	Quantity Limit
RELION CONFIRM/MICRO TEST IN VITRO STRIP	\$0	
RELION GLUCOSE TEST STRIPS IN VITRO STRIP	\$0	
RELION KETONE TEST IN VITRO STRIP	\$0	
RELION LANCING DEVICE	\$0	
RELION LANCING DEVICE KIT	\$0	
RELION MICRO KIT W/DEVICE	\$0	
RELION PREMIER BLU MONITOR DEVICE	\$0	
RELION PREMIER CLASSIC DEVICE	\$0	
RELION PREMIER COMPACT SYSTEM KIT W/DEVICE	\$0	
RELION PREMIER TEST IN VITRO STRIP	\$0	
RELION PREMIER VOICE MONITOR DEVICE	\$0	
RELION PRIME MONITOR DEVICE	\$0	
RELION PRIME TEST IN VITRO STRIP	\$0	
RELION TRUE MET AIR GLUC METER KIT W/DEVICE	\$0	
RELION TRUE METRIX TEST STRIPS IN VITRO STRIP	\$0	
RELION ULTIMA GLUCOSE SYSTEM KIT W/DEVICE	\$0	
RELION ULTIMA TEST IN VITRO STRIP	\$0	
REXALL BLOOD GLUCOSE SYSTEM KIT W/DEVICE	\$0	

Drug Name	Drug Tier	Quantity Limit
REXALL BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
RIGHTEST GC300 CONTROL IN VITRO LIQUID HIGH , NORMAL	\$0	
RIGHTEST GD500 LANCING DEVICE	\$0	
RIGHTEST GM100 BLOOD GLUCOSE KIT W/DEVICE	\$0	
RIGHTEST GM300 BLOOD GLUCOSE KIT W/DEVICE	\$0	
RIGHTEST GM550 BLOOD GLUCOSE KIT W/DEVICE	\$0	
RIGHTEST GS100 BLOOD GLUCOSE IN VITRO STRIP	\$0	
RIGHTEST GS300 BLOOD GLUCOSE IN VITRO STRIP	\$0	
RIGHTEST GS550 BLOOD GLUCOSE IN VITRO STRIP	\$0	
RIGHTEST GT333 BLOOD GLUCOSE DEVICE	\$0	
RIGHTEST GT333 BLOOD GLUCOSE IN VITRO STRIP	\$0	
RIGHTEST GT333 GLUCOSE TEST IN VITRO STRIP	\$0	
RITEFLO DEVICE	2	
saline flush intravenous solution 0.9 %	\$0	
SELECT-LITE LANCING DEVICE	\$0	
SEN-SERTER	\$0	
SILHOUETTE 23" INFUSION SET	\$0	

Effective 1/1/2026

Drug Name	Drug Tier	Quantity Limit
SILHOUETTTE 43" INFUSION SET	\$0	
SILHOUETTTE INFUSION SET 18"	\$0	
SIL-SERTER INSERTION DEVICE	\$0	
SIMPLE DIAGNOSTICS LANCING DEV	\$0	
SIMPLERA SENSOR	\$0	
SIMPLERA SYNC SENSOR	\$0	
SIMPLERA SYSTEM	\$0	
SMART DIABETES VANTAGE LANCING	\$0	
SMART SENSE PREMIUM SYSTEM KIT W/DEVICE	\$0	
SMART SENSE PREMIUM TEST IN VITRO STRIP	\$0	
SMART SENSE VALUE GLUCOSE SYS KIT W/DEVICE	\$0	
SMART SENSE VALUE TEST IN VITRO STRIP	\$0	
SMARTEST BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
SMARTEST CONTROL MEDIUM IN VITRO SOLUTION	\$0	
SMARTEST EJECT DEVICE	\$0	
SMARTEST EJECT STARTER KIT W/DEVICE	\$0	
SMARTEST PERSONA STARTER KIT W/DEVICE	\$0	
SMARTEST PRONTO STARTER KIT W/DEVICE	\$0	

Drug Name	Drug Tier	Quantity Limit
SMARTEST PROTEGE DEVICE	\$0	
SMARTEST PROTEGE STARTER KIT W/DEVICE	\$0	
sodium chloride flush solution 0.9 % intravenous	\$0	
SODIUM CHLORIDE FLUSH SOLUTION 0.9 % INTRAVENOUS	\$0	
SOLUS V2 BLOOD GLUCOSE SYSTEM DEVICE	\$0	
SOLUS V2 BLOOD GLUCOSE SYSTEM KIT W/DEVICE	\$0	
SOLUS V2 CONTROL IN VITRO SOLUTION HIGH , LOW	\$0	
SOLUS V2 LANCING DEVICE	\$0	
SOLUS V2 TEST IN VITRO STRIP	\$0	
SSKI ORAL SOLUTION 1 GM/ML	2	
SUPREME II HIGH/LOW CONTROL IN VITRO LIQUID	\$0	
SUPREME TEST IN VITRO STRIP	\$0	
SURE COMFORT LANCING PEN	\$0	
SURE T INFUSION SET 18"/6MM	\$0	
SURE T INFUSION SET 23"/10MM	\$0	
SURE T INFUSION SET 23"/6MM	\$0	
SURE T INFUSION SET 23"/8MM	\$0	
SURE T INFUSION SET 32"/10MM	\$0	

Drug Name	Drug Tier	Quantity Limit
SURE T INFUSION SET 32"/6MM	\$0	
SURE T INFUSION SET 32"/8MM	\$0	
T: SLIM X2 INS PMP/CONTROL 7.4 DEVICE	\$0	
T:FLEX T:LOCK CARTRIDGE 4.8ML	\$0	
T:SLIM X2 3ML CARTRIDGE	\$0	
T:SLIM X2 BASAL-IQ PUMP DEVICE	\$0	
T:SLIM X2 CONTROL-IQ 7.7 PUMP DEVICE	\$0	
T:SLIM X2 CONTROL-IQ 7.8 PUMP DEVICE	\$0	
T:SLIM X2 CONTROL-IQ PUMP DEVICE	\$0	
T:SLIM X2 INSULIN PMP BASAL6.4 DEVICE	\$0	
T:SLIM X2 INSULIN PUMP DEVICE	\$0	
T:SLIM X2/BASAL-IQ/ACC/INSTR	\$0	
T:SLIM X2/CONTROL-IQ/ACC/INSTR	\$0	
TAI DOC CONTROL IN VITRO SOLUTION NORMAL	\$0	
TANDEM MOBI AUTOSOFT 30 KIT	\$0	
TANDEM MOBI AUTOSOFT XC KIT	\$0	
TANDEM MOBI AUTOSOFT30 14PK23"	\$0	
TANDEM MOBI AUTOSOFTXC 14PK23"	\$0	
TANDEM MOBI AUTOSOFTXC 14PK5"	\$0	
TANDEM MOBI CARTRIDGE 2ML	\$0	

Drug Name	Drug Tier	Quantity Limit
TANDEM MOBI SYSTEM STARTER KIT	\$0	
TANDEM MOBI TRUSTEEL SUPP KIT	\$0	
TANDEM T:SLIM ASFT 30 PK10 23"	\$0	
TANDEM T:SLIM ASFT 30 PK14 23"	\$0	
TANDEM T:SLIM ASFT XC PK10 23"	\$0	
TANDEM T:SLIM ASFT XC PK14 23"	\$0	
TANDEM T:SLIM TRUSTL PK10 23"	\$0	
TECHLITE LANCETS 26G	\$0	
TEMPO REFILL KIT	\$0	
TEMPO WELCOME KIT W/DEVICE	\$0	
TGT BLOOD GLUCOSE MONITORING KIT W/DEVICE	\$0	
TGT BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
TGT LANCING DEVICE	\$0	
TODAYS HEALTH LANCING DEVICE	\$0	
TROJAN BARESKIN DEVICE	2	
TROJAN ENZ	2	
TROJAN MAGNUM	2	
TROJAN ULTRA RIBBED LUBRICATED DEVICE	2	
TROJAN ULTRA THIN	2	
TROJAN ULTRA THIN/SPERMICIDAL	2	
TROJAN-ENZ LUBRICATED	2	
TROJAN-ENZ/SPERMICIDAL	2	
TRUE COVER DEVICE	2	

Drug Name	Drug Tier	Quantity Limit
TRUE FOCUS BLOOD GLUCOSE METER DEVICE	\$0	
TRUE FOCUS BLOOD GLUCOSE STRIP IN VITRO STRIP	\$0	
TRUE METRIX AIR GLUCOSE METER DEVICE	\$0	
TRUE METRIX AIR GLUCOSE METER KIT W/DEVICE	\$0	
TRUE METRIX BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
TRUE METRIX GO GLUCOSE METER KIT W/DEVICE	\$0	
TRUE METRIX LEVEL 1 IN VITRO SOLUTION LOW	\$0	
TRUE METRIX LEVEL 2 IN VITRO SOLUTION NORMAL	\$0	
TRUE METRIX LEVEL 3 IN VITRO SOLUTION HIGH	\$0	
TRUE METRIX METER DEVICE	\$0	
TRUE METRIX METER KIT W/DEVICE	\$0	
TRUE METRIX PRO BLOOD GLUCOSE IN VITRO STRIP	\$0	
TRUEDRAW LANCING DEVICE	\$0	
TRUERESULT BLOOD GLUCOSE KIT W/DEVICE	\$0	
TRUETEST TEST IN VITRO STRIP	\$0	
TRUETRACK BLOOD GLUCOSE DEVICE	\$0	

Drug Name	Drug Tier	Quantity Limit
TRUETRACK BLOOD GLUCOSE KIT W/DEVICE	\$0	
TRUETRACK SMART SYSTEM KIT	\$0	
TRUETRACK TEST IN VITRO STRIP	\$0	
TRUSTEEL INFUSION SET	\$0	
TRUSTEX COLOR CONDOMS + LUBE	2	
TRUSTEX LUB/RIBBED/STUDDER	2	
TRUSTEX LUB/SPERMICIDE EX ST	2	
TRUSTEX LUB/SPERMICIDE XL	2	
TRUSTEX LUBRICATED	2	
TRUSTEX LUBRICATED EX LARGE	2	
TRUSTEX LUBRICATED EXTRA ST	2	
TRUSTEX LUBRICATED/SPERMICIDE	2	
TRUSTEX NATURAL CONDOMS + LUBE	2	
TRUSTEX NON-LUBRICATED	2	
TRUSTEX RIA LUB/SPERMICIDE	2	
TRUSTEX RIA LUBRICATED	2	
TRUSTEX RIA NON-LUBRICATED	2	
TRUSTEX-NONNOXYNOL-9/RIB/STUD	2	
ULTI-LANCE AUTOMATIC	\$0	
UNISTIK NORMAL	\$0	

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit
UNISTRIP CONTROL IN VITRO SOLUTION HIGH , LOW	\$0		VIVAGUARD LANCETS 30G	\$0	
UNISTRIP1 GENERIC IN VITRO STRIP	\$0		VIVAGUARD LANCING DEVICE	\$0	
VALUE PLUS LANCING DEVICE	\$0		VIVAGUARD SAFETY LANCETS 28G	\$0	
VARISOFT INFUSION SET	\$0		VORTEX HOLD CHMBR/MASK/CHILD DEVICE	2	
VERASENS BLOOD GLUCOSE METER DEVICE	\$0		VORTEX HOLD CHMBR/MASK/TODDLER DEVICE	2	
VERASENS BLOOD GLUCOSE SYSTEM KIT W/DEVICE	\$0		VORTEX VALVE CHAMBER-PEDI MASK DEVICE	2	
VERASENS BLOOD GLUCOSE TEST IN VITRO STRIP	\$0		VORTEX VALVED HOLDING CHAMBER DEVICE	2	
VERASENS GLUCOSE CONTROL IN VITRO LIQUID	\$0		WIDE-SEAL DIAPHRAGM 60 VAGINAL DIAPHRAGM 2 %	2	
VERIFINE SAFE LANCET MINI 21G	\$0		WIDE-SEAL DIAPHRAGM 65 VAGINAL DIAPHRAGM 2 %	2	
VERIFINE SAFE LANCET MINI 23G	\$0		WIDE-SEAL DIAPHRAGM 70 VAGINAL DIAPHRAGM 2 %	2	
VERIFINE SAFE LANCET MINI 28G	\$0		WIDE-SEAL DIAPHRAGM 75 VAGINAL DIAPHRAGM 2 %	2	
VERIFINE SAFE LANCET MINI 30G	\$0		WIDE-SEAL DIAPHRAGM 80 VAGINAL DIAPHRAGM 2 %	2	
VIVAGUARD INO CONTROL SOLUTION IN VITRO LIQUID	\$0		WIDE-SEAL DIAPHRAGM 85 VAGINAL DIAPHRAGM 2 %	2	
VIVAGUARD INO GLUCOSE METER DEVICE	\$0				
VIVAGUARD INO GLUCOSE METER KIT	\$0				
VIVAGUARD INO SMART GLUC METER DEVICE	\$0				
VIVAGUARD INO TEST STRIPS IN VITRO STRIP	\$0				

Drug Name	Drug Tier	Quantity Limit
WIDE-SEAL DIAPHRAGM 90 VAGINAL DIAPHRAGM 2 %	2	
WIDE-SEAL DIAPHRAGM 95 VAGINAL DIAPHRAGM 2 %	2	
Ophthalmic Agents		
Ophthalmic Agents, Other		
CLEAR EYES TRIPLE ACTION OPHTHALMIC SOLUTION 0.05-0.5-0.6 %	2	
Ophthalmic Prostaglandin and Prostamide Analogs		
bimatoprost external solution 0.03 %	1	
LATISSE EXTERNAL SOLUTION 0.03 %	3	
Respiratory Tract/Pulmonary Agents		
Antihistamines		
12 hour allergy-d oral tablet extended release 12 hour 5-120 mg	1	
24hr allergy & congestion relief oral tablet extended release 24 hour 180-240 mg	1	
24hr allergy relief oral tablet 180 mg	1	
ALAVERT ALLERGY/SINUS ORAL TABLET EXTENDED RELEASE 12 HOUR 5- 120 MG	2	
ALAVERT D-12 HOUR ALLERGY/CONG ORAL TABLET EXTENDED RELEASE 12 HOUR 5- 120 MG	2	

Drug Name	Drug Tier	Quantity Limit
ALAVERT ORAL TABLET DISPERSIBLE 10 MG	2	
all day allergy childrens oral solution 5 mg/5ml	1	
all day allergy d oral tablet extended release 12 hour 5-120 mg	1	
all day allergy oral tablet 10 mg	1	
all day allergy-d oral tablet extended release 12 hour 5-120 mg	1	
all-day allergy childrens oral solution 5 mg/5ml	1	
ALLEGRA ALLERGY ORAL TABLET 180 MG	2	
ALLEGRA HIVES 24HR ORAL TABLET 180 MG	2	
ALLEGRA-D ALLERGY & CONGESTION ORAL TABLET EXTENDED RELEASE 12 HOUR 60- 120 MG	2	
ALLEGRA-D ALLERGY & CONGESTION ORAL TABLET EXTENDED RELEASE 24 HOUR 180-240 MG	2	
allergy (cetirizine) oral tablet 10 mg	1	
allergy 24hour indoor/outdoor oral tablet 10 mg	1	
allergy 24-hr oral tablet 180 mg	1	
allergy childrens oral solution 5 mg/5ml	1	
allergy d-12 oral tablet extended release 12 hour 5-120 mg	1	
allergy relief child (loratadine) oral solution 5 mg/5ml	1	

Effective 1/1/2026

Drug Name	Drug Tier	Quantity Limit
allergy rel d12 (cetirizine) oral tablet extended release 12 hour 5-120 mg	1	
allergy relief (cetirizine) oral tablet 10 mg	1	
allergy relief (loratadine) oral capsule 10 mg	1	
allergy relief (loratadine) oral tablet 10 mg	1	
allergy relief cetirizine oral tablet 10 mg	1	
allergy relief childrens 24-hr oral solution 1 mg/ml	1	
allergy relief childrens oral solution 1 mg/ml, 5 mg/5ml	1	
allergy relief d oral tablet extended release 12 hour 5-120 mg	1	
allergy relief d oral tablet extended release 24 hour 10-240 mg, 180-240 mg	1	
allergy relief d-12 oral tablet extended release 12 hour 5-120 mg	1	
allergy relief d12 oral tablet extended release 12 hour 5-120 mg, 60-120 mg	1	
allergy relief d-24 oral tablet extended release 24 hour 10-240 mg	1	
allergy relief oral tablet 10 mg, 180 mg	1	
allergy relief/indoor/outdoor oral tablet 180 mg	1	
allergy relief/nasal decongest oral tablet extended release 12 hour 5-120 mg	1	

Drug Name	Drug Tier	Quantity Limit
allergy relief/nasal decongest oral tablet extended release 24 hour 10-240 mg	1	
allergy relief-d oral tablet extended release 12 hour 5-120 mg	1	
allergy relief-d oral tablet extended release 24 hour 10-240 mg	1	
allergy/congestion relief oral tablet extended release 12 hour 5-120 mg	1	
allergy-d 12hr oral tablet extended release 12 hour 5-120 mg	1	
cetirizine hcl allergy child oral solution 5 mg/5ml	1	
cetirizine hcl childrens allergy oral solution 1 mg/ml	1	
cetirizine hcl oral tablet 10 mg	1	
cetirizine-pseudoephedrine er oral tablet extended release 12 hour 5-120 mg	1	
childrens 24 hour allergy oral solution 1 mg/ml	1	
childrens cold & allergy oral elixir 1-2.5 mg/5ml	1	
childrens loratadine oral solution 5 mg/5ml	1	
CLARITIN ALLERGY CHILDRENS ORAL SOLUTION 5 MG/5ML	2	
CLARITIN CHILDRENS ORAL TABLET CHEWABLE 5 MG	2	
CLARITIN ORAL CAPSULE 10 MG	2	
CLARITIN ORAL SOLUTION 5 MG/5ML	2	

Drug Name	Drug Tier	Quantity Limit
CLARITIN ORAL TABLET 10 MG	2	
CLARITIN ORAL TABLET CHEWABLE 5 MG	2	
CLARITIN REDITABS JUNIORS ORAL TABLET DISPERSIBLE 10 MG	2	
CLARITIN REDITABS ORAL TABLET DISPERSIBLE 10 MG, 5 MG	2	
CLARITIN-D 12 HOUR ORAL TABLET EXTENDED RELEASE 12 HOUR 5-120 MG	2	
CLARITIN-D 24 HOUR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-240 MG	2	
cold & allergy oral elixir 1-2.5 mg/5ml	1	
cold multi-symptom severe day oral tablet 5-10-200-325 mg	1	
cvs allerg rel child (lorat) oral solution 5 mg/5ml	1	
cvs allergy & hives relief oral tablet 180 mg	1	
cvs allergy childrens oral solution 5 mg/5ml	1	
cvs allergy relief childrens oral solution 5 mg/5ml	1	
cvs allergy relief childrens oral tablet chewable 5 mg	1	
cvs allergy relief d oral tablet extended release 12 hour 5-120 mg, 60-120 mg	1	
cvs allergy relief d24 oral tablet extended release 24 hour 180-240 mg	1	

Drug Name	Drug Tier	Quantity Limit
cvs allergy relief oral tablet 10 mg, 180 mg	1	
cvs allergy relief oral tablet dispersible 10 mg, 5 mg	1	
cvs allergy relief(cetirizine) oral tablet 10 mg	1	
cvs allergy relief-d oral tablet extended release 12 hour 5-120 mg	1	
cvs allergy relief-d oral tablet extended release 24 hour 10-240 mg	1	
cvs allergy relief-d12 oral tablet extended release 12 hour 5-120 mg	1	
cvs indoor/outdoor allergy rlf oral tablet 10 mg	1	
DAYHIST ALLERGY 12 HOUR RELIEF ORAL TABLET 1.34 MG	2	
eq all day allergy relief oral tablet 10 mg	1	
eq allerg relief child (cetir) oral solution 5 mg/5ml	1	
eq allerg relief child (lorat) oral solution 5 mg/5ml	1	
eq allergy & congestion relief oral tablet extended release 12 hour 5-120 mg	1	
eq allergy childrens oral solution 5 mg/5ml	1	
eq allergy relief (cetirizine) oral solution 1 mg/ml	1	
eq allergy relief (cetirizine) oral tablet 10 mg	1	

Effective 1/1/2026

Drug Name	Drug Tier	Quantity Limit
eq allergy relief d 12 hour oral tablet extended release 12 hour 60-120 mg	1	
eq allergy relief nasal decong oral tablet extended release 12 hour 5-120 mg	1	
eq allergy relief nasal decong oral tablet extended release 24 hour 10-240 mg	1	
eq allergy relief oral tablet 10 mg, 180 mg	1	
eq allergy relief oral tablet extended release 12 hour 5-120 mg	1	
eq cetirizine hcl oral solution 5 mg/5ml	1	
eq loratadine childrens oral tablet chewable 5 mg	1	
eq loratadine childrens oral tablet dispersible 10 mg	1	
eq loratadine oral tablet 10 mg	1	
eq all day allergy childrens oral solution 5 mg/5ml	1	
eq all day allergy oral tablet 10 mg	1	
eq allergy relief oral tablet 10 mg, 180 mg	1	
eq allergy/congestion relief oral tablet extended release 24 hour 10-240 mg	1	
fexofenadine hcl oral tablet 180 mg	1	
fexofenadine-pseudoephed er oral tablet extended release 12 hour 60-120 mg	1	

Drug Name	Drug Tier	Quantity Limit
fexofenadine-pseudoephed er oral tablet extended release 24 hour 180-240 mg	1	
ft all day allergy 24 hour oral tablet 10 mg	1	
ft all day allergy childrens oral solution 5 mg/5ml	1	
ft all day allergy oral tablet 10 mg	1	
ft all day allergy relief oral tablet 10 mg	1	
ft all day allergy-d oral tablet extended release 12 hour 5-120 mg	1	
ft allergy & congestion-d 12hr oral tablet extended release 12 hour 60-120 mg	1	
ft allergy childrens oral solution 5 mg/5ml	1	
ft allergy d-12 hour oral tablet extended release 12 hour 5-120 mg	1	
ft allergy relief 24 hour oral tablet 180 mg	1	
ft allergy relief cetirizine oral tablet 10 mg	1	
ft allergy relief childrens oral solution 5 mg/5ml	1	
ft allergy relief childrens oral tablet chewable 5 mg	1	
ft allergy relief loratadine oral tablet 10 mg	1	
ft allergy relief oral tablet 10 mg, 180 mg	1	
ft allergy relief-d oral tablet extended release 24 hour 10-240 mg	1	
gnp all day allergy childrens oral solution 1 mg/ml, 5 mg/5ml	1	

Drug Name	Drug Tier	Quantity Limit
gnp all day allergy oral tablet 10 mg	1	
gnp all day allergy-d oral tablet extended release 12 hour 5-120 mg	1	
gnp allergy & congestion oral tablet extended release 24 hour 10-240 mg	1	
gnp allergy relief oral tablet 180 mg	1	
gnp allergy/congestion relief oral tablet extended release 24 hour 10-240 mg	1	
gnp allergy-d allergy & congestion oral tablet extended release 12 hour 60-120 mg	1	
gnp fexofenadine hcl oral tablet 180 mg	1	
gnp fexofenadine/pseudoephedrine oral tablet extended release 12 hour 60-120 mg	1	
gnp loratadine childrens oral solution 5 mg/5ml	1	
gnp loratadine oral solution 5 mg/5ml	1	
gnp loratadine oral tablet 10 mg	1	
gnp loratadine oral tablet dispersible 10 mg	1	
gnp loratadine-d 12hr oral tablet extended release 12 hour 5-120 mg	1	
goodsense all day allergy oral solution 5 mg/5ml	1	
goodsense all day allergy oral tablet 10 mg	1	

Drug Name	Drug Tier	Quantity Limit
goodsense all day allergy-d oral tablet extended release 12 hour 5-120 mg	1	
goodsense aller-ease oral tablet 180 mg	1	
goodsense allergy relief child oral solution 5 mg/5ml	1	
goodsense allergy relief oral capsule 10 mg	1	
goodsense allergy relief oral tablet 10 mg	1	
hm all day allergy childrens oral solution 5 mg/5ml	1	
hm fexofenadine hcl oral tablet 180 mg	1	
hm loratadine oral tablet 10 mg	1	
kls allerclear d-12hr oral tablet extended release 12 hour 5-120 mg	1	
kls allerclear d-24hr oral tablet extended release 24 hour 10-240 mg	1	
kls allerclear oral tablet 10 mg	1	
kls aller-fex oral tablet 180 mg	1	
kls aller-tec childrens oral solution 5 mg/5ml	1	
kls aller-tec d oral tablet extended release 12 hour 5-120 mg	1	
kls aller-tec oral tablet 10 mg	1	
loradamed oral tablet 10 mg	1	
loratadine childrens oral solution 5 mg/5ml	1	
loratadine childrens oral tablet chewable 5 mg	1	

Drug Name	Drug Tier	Quantity Limit
loratadine oral capsule 10 mg	1	
loratadine oral solution 5 mg/5ml	1	
loratadine oral tablet 10 mg	1	
loratadine oral tablet dispersible 10 mg	1	
loratadine-d 12hr oral tablet extended release 12 hour 5-120 mg	1	
loratadine-d 24hr oral tablet extended release 24 hour 10-240 mg	1	
maxi-tuss pe oral liquid 2-5 mg/5ml	1	
meijer allergy relief oral tablet 10 mg	1	
meijer allergy relief oral tablet dispersible 10 mg	1	
meijer allergy relief-d oral tablet extended release 12 hour 5-120 mg	1	
meijer loratadine oral solution 5 mg/5ml	1	
mm allergy relief 24 hour oral tablet 180 mg	1	
mm fexofenadine hcl oral tablet 180 mg	1	
qc all day allergy oral tablet 10 mg	1	
qc allergy relief childrens oral solution 5 mg/5ml	1	
qc allergy relief childrens oral syrup 1 mg/ml	1	
qc allergy relief oral capsule 10 mg	1	
qc allergy relief oral tablet 10 mg, 180 mg	1	
qc allergy relief oral tablet dispersible 10 mg	1	
qc cetirizine allergy relief oral tablet 10 mg	1	

Drug Name	Drug Tier	Quantity Limit
qc childrens allergy oral solution 5 mg/5ml	1	
qc loratadine allergy relief oral tablet 10 mg	1	
qc loratadine-d oral tablet extended release 24 hour 10-240 mg	1	
ra allergy relief & nasal decong oral tablet extended release 24 hour 10-240 mg	1	
ra allergy relief (cetirizine) oral tablet 10 mg	1	
ra allergy relief (loratadine) oral tablet 10 mg	1	
ra allergy relief childrens oral solution 1 mg/ml, 5 mg/5ml	1	
ra allergy relief childrens oral syrup 5 mg/5ml	1	
ra allergy relief childrens oral tablet chewable 5 mg	1	
ra allergy relief oral tablet 180 mg	1	
ra allergy relief/nasal decongest oral tablet extended release 24 hour 10-240 mg	1	
ra allergy/congestion oral tablet extended release 12 hour 60-120 mg	1	
ra allergy/congestion relief oral tablet extended release 12 hour 5-120 mg	1	
ra allergy/congestion relief-d oral tablet extended release 12 hour 5-120 mg	1	
ra cetiri-d oral tablet extended release 12 hour 5-120 mg	1	

Effective 1/1/2026

Drug Name	Drug Tier	Quantity Limit
ra lorata-d oral tablet extended release 24 hour 10-240 mg	1	
ra loratadine oral solution 5 mg/5ml	1	
ra loratadine oral tablet 10 mg	1	
RYNEX PE ORAL ELIXIR 1-2.5 MG/5ML	2	
sb allergy oral tablet 10 mg	1	
sb allergy relief oral tablet dispersible 10 mg	1	
sb allergy relief/nasal decong oral tablet extended release 24 hour 10-240 mg	1	
sb cetirizine hcl childrens oral solution 1 mg/ml	1	
sb cold & allergy childrens oral elixir 1-2.5 mg/5ml	1	
sb loratadine allergy relief oral tablet 10 mg	1	
sb loratadine oral solution 5 mg/5ml	1	
sb loratadine oral tablet 10 mg	1	
sm all day allergy childrens oral solution 5 mg/5ml	1	
sm all day allergy oral tablet 10 mg	1	
sm all day allergy relief oral tablet 10 mg	1	
sm all day allergy-d oral tablet extended release 12 hour 5-120 mg	1	
sm allergy childrens oral solution 5 mg/5ml	1	
sm allergy relief oral tablet dispersible 10 mg	1	

Drug Name	Drug Tier	Quantity Limit
sm fexofenadine hcl oral tablet 180 mg	1	
sm loratadine d 12hr oral tablet extended release 12 hour 5-120 mg	1	
sm loratadine oral solution 5 mg/5ml	1	
sm loratadine oral tablet 10 mg	1	
wal-fex allergy oral tablet 180 mg	1	
wal-fex d allergy & congestion oral tablet extended release 12 hour 60-120 mg	1	
wal-fex d allergy & congestion oral tablet extended release 24 hour 180-240 mg	1	
wal-fex oral tablet 180 mg	1	
wal-itin allergy childrens oral tablet chewable 5 mg	1	
wal-itin allergy reditabs oral tablet dispersible 10 mg	1	
wal-itin aller-melts oral tablet dispersible 10 mg	1	
wal-itin childrens oral solution 5 mg/5ml	1	
wal-itin d 24 hour oral tablet extended release 24 hour 10-240 mg	1	
wal-itin d oral tablet extended release 12 hour 5-120 mg	1	
wal-itin oral solution 5 mg/5ml	1	
wal-itin oral tablet 10 mg	1	
wal-itin oral tablet dispersible 10 mg	1	
wal-vert oral tablet dispersible 10 mg	1	

Drug Name	Drug Tier	Quantity Limit
wal-zyr all day allergy child oral solution 5 mg/5ml	1	
wal-zyr allergy childrens oral solution 1 mg/ml	1	
wal-zyr childrens oral solution 1 mg/ml, 5 mg/5ml	1	
wal-zyr d oral tablet extended release 12 hour 5-120 mg	1	
wal-zyr oral solution 5 mg/5ml	1	
wal-zyr oral tablet 10 mg	1	
ZYRTEC ALLERGY ORAL TABLET 10 MG	2	
ZYRTEC CHILDRENS ALLERGY ORAL SOLUTION 1 MG/ML, 5 MG/5ML	2	
ZYRTEC-D ALLERGY & CONGESTION ORAL TABLET EXTENDED RELEASE 12 HOUR 5-120 MG	2	
ZYRTEC-D ALLERGY & SINUS ORAL TABLET EXTENDED RELEASE 12 HOUR 5-120 MG	2	
Respiratory Tract Agents, Other		
actidom dmx oral liquid 10-30-200 mg/5ml	1	
altarussin dm oral syrup 100-10 mg/5ml	1	
ALTITUSS ORAL LIQUID 10-100 MG/5ML	2	
benzonatate oral capsule 100 mg, 150 mg, 200 mg	1	
BIOCOTRON ORAL LIQUID 10-100 MG/5ML	2	
BROMFED DM ORAL SYRUP 2-30-10 MG/5ML	2	

Drug Name	Drug Tier	Quantity Limit
chest congestion relief dm oral syrup 10-100 mg/5ml	1	
cvs tussin dm oral liquid 10-100 mg/5ml, 20-200 mg/10ml, 200-20 mg/10ml	1	
DESGEN PEDIATRIC ORAL LIQUID 2.5-5-50 MG/ML	2	
DESPEC EDA ORAL LIQUID 2.5-5-50 MG/ML	2	
dextromethorphan-guaifenesin oral liquid 10-100 mg/5ml, 20-200 mg/10ml	1	
dextromethorphan-guaifenesin oral syrup 10-100 mg/5ml, 20-200 mg/10ml	1	
DIABETIC TUSSIN DM ORAL LIQUID 100-10 MG/5ML	2	
dometuss-dmx oral liquid 10-30-200 mg/5ml	1	
eq tussin dm cough/chest oral syrup 10-100 mg/5ml	1	
eqi tussin dm cough/chest cong oral syrup 100-10 mg/5ml	1	
g tussin ac oral solution 100-10 mg/5ml	1	
geri-tussin dm oral liquid 10-100 mg/5ml	1	
geri-tussin dm oral syrup 10-100 mg/5ml	1	
giltuss cough & chest children oral liquid 10-100 mg/5ml	1	
giltuss cough & chest oral liquid 20-200 mg/10ml	1	

Drug Name	Drug Tier	Quantity Limit
giltuss cough & cold childrens oral liquid 7.5-150-5 mg/2.5ml	1	
giltuss cough & cold oral liquid 10-15-300 mg/5ml	1	
giltuss diabetic cough & cold oral liquid 10-100 mg/5ml	1	
giltuss honey cgh/chest conges oral liquid 20-200 mg/10ml	1	
giltuss honey cgh/chst child oral liquid 10-100 mg/5ml	1	
GILTUSS SINUS & CONGESTION ORAL TABLET 10-388 MG	2	
gnp tussin dm cough oral liquid 100-10 mg/5ml	1	
g-supress dx pediatric oral liquid 2.5-5-50 mg/ml	1	
guaiasorb dm oral liquid 10-100 mg/5ml, 20-200 mg/10ml	1	
guaifed-dm oral liquid 10-100 mg/5ml	1	
guaifenesin ac oral syrup 100-10 mg/5ml	1	
guaifenesin dm oral liquid 10-100 mg/5ml	1	
guaifenesin-codeine oral solution 100-10 mg/5ml, 200-20 mg/10ml	1	
guaifenesin-dm oral syrup 100-10 mg/5ml	1	
HYCODAN ORAL SOLUTION 5-1.5 MG/5ML	3	
HYCODAN ORAL TABLET 5-1.5 MG	3	
hydrocod poli-chlorphe poli er oral suspension extended release 10-8 mg/5ml	1	

Drug Name	Drug Tier	Quantity Limit
hydrocodone bit-homatrop mbr oral solution 5-1.5 mg/5ml	1	
hydrocodone bit-homatrop mbr oral tablet 5-1.5 mg	1	
hydromet oral solution 5-1.5 mg/5ml	1	
HYPERSAL INHALATION NEBULIZATION SOLUTION 3.5 %, 7 %	2	
IGUALTUSS ORAL LIQUID 10-28-388 MG/5ML	2	
MAX TUSSIN DM COUGH&CHEST CONG ORAL LIQUID 20-200 MG/10ML	2	
maxi-tuss ac oral solution 100-10 mg/5ml	1	
maxi-tuss g oral liquid 10-100 mg/5ml	1	
medi-tussin dm oral syrup 100-10 mg/5ml	1	
NEBUSAL INHALATION NEBULIZATION SOLUTION 3 %, 6 %	2	
NEOTUSS PLUS ORAL LIQUID 7.5-4-30 MG/5ML	2	
promethazine vc/codeine oral syrup 6.25-5-10 mg/5ml	1	
promethazine-codeine oral solution 6.25-10 mg/5ml	1	
promethazine-dm oral syrup 6.25-15 mg/5ml	1	
pseudoephedrine-bromphen-dm oral syrup 30-2-10 mg/5ml	1	

Effective 1/1/2026

Drug Name	Drug Tier	Quantity Limit
PULMOSAL INHALATION NEBULIZATION SOLUTION 7 %	2	
qc tussin dm cough/congestion oral liquid 10-100 mg/5ml, 20-200 mg/10ml	1	
ra tussin cgh/chest congest dm oral liquid 100-10 mg/5ml	1	
ra tussin cough dm sugar free oral syrup 100-10 mg/5ml	1	
ra tussin cough oral liquid 10-100 mg/5ml	1	
ra tussin dm oral liquid 100-10 mg/5ml	1	
SAFETUSSIN DM COUGH/CHEST CONG ORAL LIQUID 10-100 MG/5ML	2	
siltussin dm das oral liquid 100-10 mg/5ml	1	
siltussin-dm alcohol free oral syrup 100-10 mg/5ml	1	
sm tussin cough/chest congest oral syrup 100-10 mg/5ml	1	
sm tussin dm oral syrup 100-10 mg/5ml	1	
sodium chloride inhalation nebulization solution 0.9 %, 10 %, 3 %, 7 %	1	
SORBUGEN NR ORAL LIQUID 15-150 MG/7.5ML	2	
sorbutuss nr oral liquid 10-100 mg/5ml	1	
supress-dx pediatric oral liquid 2.5-5-50 mg/ml	1	
tusnel diabetic oral liquid 10-100 mg/5ml	1	

Drug Name	Drug Tier	Quantity Limit
tussin cough+chest congest dm sf oral liquid 10-100 mg/5ml	1	
tussin cough+chest congest dm oral liquid 10-100 mg/5ml	1	
tussin dm cough & chest congest oral liquid 20-200 mg/10ml	1	
tussin dm cough + chest oral liquid 200-20 mg/10ml	1	
tussin dm oral liquid 10-100 mg/5ml, 100-10 mg/5ml	1	
tussin dm oral syrup 100-10 mg/5ml	1	
TUSSLIN ORAL LIQUID 10-28-388 MG/5ML	2	
TUSSLIN PEDIATRIC ORAL LIQUID 2.5-7.5-88 MG/ML	2	
wal-tussin cough/chest dm oral syrup 100-10 mg/5ml	1	
wal-tussin dm cgh/chest congest oral liquid 100-10 mg/5ml	1	

NOTICE OF NONDISCRIMINATION

OptumRx®, Inc. complies with applicable civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex (including pregnancy, sexual orientation, and gender identity). We do not exclude people or treat them less favorably because of race, color, national origin, age, disability, or sex.

We provide free aids and services to help you communicate with us. You can ask for interpreters and/or for communications in other languages or formats such as large print. We also provide reasonable modifications for persons with disabilities.

If you need these services, call the toll-free number on your member ID card. (TTY **711**).

If you believe that we failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can send a complaint to the Civil Rights Coordinator:

Optum Civil Rights Coordinator
1 Optum Circle
Eden Prairie, MN 55344
Optum_Civil_Rights@optum.com

If you need help filing a complaint, call the toll-free number **1-888-445-8745**. (TTY **711**).

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights:

Online: ocrportal.hhs.gov/ocr/portal/lobby.jsf
Phone: **1-800-368-1019, 1-800-537-7697** (TDD)
Mail: U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201

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

This notice is available at optum.com/en/language-assistance-nondiscrimination.html.

This information is available in other formats like large print.
To ask for another format, please call the telephone number
listed on your member plan ID card.

Notice of Availability of Language Assistance Services and Alternate Formats

ATTENTION: Free language assistance services and free communications in other formats, such as large print, are available to you. Call the toll-free number on your member identification card. TTY: 711

ATENCIÓN: Si habla **español (Spanish)**, hay servicios de asistencia de idiomas y comunicaciones en otros formatos como letra grande, sin cargo, a su disposición. Llame al número gratuito que figura en su tarjeta de identificación de miembro. TTY: 711

ملاحظة: إذا كنت تتحدث **اللغة العربية (Arabic)**، ستتوفر لك خدمات المساعدة اللغوية المجانية والمراسلات المجانية بتنسيقات أخرى، مثل الطباعة بأحرف كبيرة. اتصل بالرقم المجاني المدون على بطاقة تعريف العضو خاصتك.

ចំណាំ: ប្រសិនបើអ្នកនិយាយ**ភាសាខ្មែរ (Khmer)** សេវាជំនួយភាសាឥតគិតថ្លៃ និងការផ្ញើតាមអ៊ីម៉ែលឥតគិតថ្លៃក្នុងទម្រង់ផ្សេងទៀត ដូចជាពុម្ពអក្សរធំ មានសម្រាប់អ្នក។ ទូរសព្ទមកលេខឥតគិតថ្លៃនៅលើប័ណ្ណសម្គាល់សមាជិករបស់អ្នក។

请注意：如果您说**中文 (Chinese)**，我们可以为您提供免费语言协助服务以及大字印刷本等其他格式的免费通信。请致电您的会员身份卡上的免付费电话号码。

請注意：如果您說**中文 (Chinese)**，您可以獲得免費語言協助服務和大字體等其他格式的免費通訊。請致電您的會員身份卡上的免付費電話號碼。

ATTENTION: Si vous parlez **français (French)**, des services d'assistance linguistique et des communications dans d'autres formats, notamment en gros caractères, sont mis à votre disposition gratuitement. Appelez le numéro gratuit figurant sur votre carte de membre.

ATANSYON: Si w pale **Kreyòl Ayisyen (Haitian Creole)**, gen sèvis lang gratis ak kominikasyon nan lòt fòm lo disponib, tankou sa ki enprime ak gwo lèt. Rele nimewo gratis ki sou kat idantifikasyon manm ou an.

ACHTUNG: Falls Sie **Deutsch (German)** sprechen, stehen Ihnen kostenlose Sprachassistenzen und kostenlose Kommunikation in anderen Formaten, wie zum Beispiel große Schrift, zur Verfügung. Rufen Sie die gebührenfreie Nummer auf Ihrer Mitgliedskarte an.

ध्यान दें: यदि आप **हिंदी (Hindi)** बोलते हैं, तो आपके लिए मुफ्त भाषा सहायता सेवाएँ और अन्य प्रारूपों में मुफ्त संचार, जैसे कि बड़े प्रिंट, उपलब्ध हैं। अपने सदस्य पहचान पत्र पर दिए गए टोल-फ्री नंबर पर कॉल करें।

LUS TSEEM CEEB: Yog tias koj hais **lus Hmoob (Hmong)**, muaj cov kev pab cuam txhais lus thiab muaj kev sib txuas lus pab dawb ua lwm hom ntawv, xws li luam ua ntawv loj rau koj. Thov hu rau tus xov tooj hu dawb ntawm koj daim npav ID.

ATENSION: No agsasaoka iti **Ilocano (Ilocano)**, magun-odmo dagiti libre a serbisio ti tulong iti pagsasao ken libre a komunikasion iti dadduma a pormat, kas iti dadakkel a letra. Tawagan ti awan-bayadna a numero a masarakan iti kard a pakabigbigam kas miembro.

ATTENZIONE: se parla **italiano (Italian)**, può usufruire di servizi di assistenza linguistica gratuiti e comunicazioni gratuite in altri formati, come ad esempio la stampa a caratteri grandi. Chiami il numero verde riportato sul Suo tesserino identificativo.

注意事項：日本語 (**Japanese**) を話される場合、無料の言語支援サービスや、拡大文字など他の形式での無料のコミュニケーションをご利用いただけます。会員証に記載されているフリーダイヤルにお電話ください。

알림 사항: 한국어(**Korean**)를 사용하시는 경우 무료 언어 지원 서비스와 대형 활자체 등 다른 형식으로 된 의사 소통 매체를 이용하실 수 있습니다. 회원 ID 카드에 나와 있는 무료 전화번호로 전화해 주십시오.

BAA'ÁKONÍNÍZIN: Diné (Navajo) saad bee yánílti'go, t'áá jíík'eh saad bee áka'e'eyeed bee áka'anída'wo'í dóó nááná łahgo át'éego bee hadadilyaa bee ahxíl hane'í, díí nitsaago bee ak'eda'ashchínígíí, náhóló. Bee atah nil'íní ninaaltsoos nítł'izí bee nééhoziní bąąh t'áá hiik'eh bee hane'í námboo bee hodílnih.

توجه: اگر به زبان **فارسی (Farsi)** صحبت می‌کنید، خدمات رایگان کمک زبانی و ارتباطات رایگان در قالب‌های دیگر، مانند چاپ بزرگ، در دسترس شما هستند. با شماره رایگان مندرج روی کارت شناسایی عضویت‌تان تماس بگیرید.

UWAGA: Dla osób mówiących po **polsku (Polish)** dostępne są bezpłatne usługi pomocy językowej i bezpłatne komunikaty w innych formatach, takich jak duży druk. Prosimy zadzwonić pod bezpłatny numer podany na karcie identyfikacyjnej.

ATENÇÃO: se você fala **português (Portuguese)**, tem à sua disposição serviços gratuitos de assistência linguística e comunicações gratuitas em outros formatos, como caracteres grandes. Ligue para o número gratuito que se encontra no seu cartão de identificação de membro.

ВНИМАНИЕ! Если вы говорите на **русском языке (Russian)**, вам доступны бесплатные услуги языковой поддержки и бесплатные материалы в других форматах, например напечатанные крупным шрифтом. Звоните по бесплатному номеру телефона, указанному на вашей идентификационной карте участника.

FIIRO GAAR AH: Haddii aad ku hadasho **Soomaali (Somali)**, adeegyada taageerada luqadda bilaashka ah iyo isgaarsiino bilaash ah oo qaabab kale ah, sida far waaweyn, ayaa diyaar kuu ah. Ka wac lambarka wicitaanka bilaashka ah kaarkaaga aqoonsiga xubinta.

PAUNAWA: Kung nagsasalita ka ng **Tagalog (Tagalog)**, may makukuha kang mga libreng serbisyo ng tulong sa wika at libreng komunikasyon sa ibang mga format, tulad ng malalaking print. Tawagan ang walang bayad na numero na nasa iyong ID card ng miyembro.

LƯU Ý: Nếu quý vị nói **Tiếng Việt (Vietnamese)**, quý vị sẽ được cung cấp các dịch vụ hỗ trợ ngôn ngữ miễn phí và các phương tiện trao đổi liên lạc miễn phí ở các định dạng khác, chẳng hạn như bản in chữ lớn. Gọi đến số điện thoại miễn phí có trên thẻ định danh thành viên của quý vị.



All Optum trademarks and logos are owned by Optum, Inc. in the U.S. and other jurisdictions. All other trademarks are the property of their respective owners.

© 2026 OptumRx, Inc. All rights reserved. WF20043865_ORX_SOM_Formulary booklet_01012026

Premium