



Effective Jan. 1, 2024

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
Anesthetics		
Local Anesthetics		
CETACAINE EXTERNAL AEROSOL 2-2-14 %	2	
ethyl chloride external aerosol	1	
Anti-Addiction/Substance Abuse Treatment Agents		
Smoking Cessation Agents		
APO-VARENICLINE ORAL TABLET 0.5 MG, 1 MG	\$0	
bupropion hcl er (smoking det) oral tablet extended release 12 hour 150 mg	\$0	Y
CHANTIX CONTINUING MONTH PAK ORAL TABLET 1 MG	\$0	Y
CHANTIX ORAL TABLET 0.5 MG, 1 MG	\$0	Y
CHANTIX STARTING MONTH PAK ORAL TABLET THERAPY PACK 0.5 MG X 11 & 1 MG X 42	\$0	Y
cvs nicotine mouth/throat gum 2 mg, 4 mg	\$0	Y
cvs nicotine mouth/throat lozenge 2 mg	\$0	Y
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

Drug Name	Drug Tier	Quantity Limit
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
eq nicotine polacrilex mouth/throat gum 2 mg	\$0	Y
eq nicotine polacrilex mouth/throat lozenge 2 mg, 4 mg	\$0	Y
gnp nicotine mini mouth/throat lozenge 2 mg, 4 mg	\$0	Y
gnp nicotine polacrilex mouth/throat gum 2 mg, 4 mg	\$0	Y
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
habitrol transdermal patch 24 hour 21 mg/24hr	\$0	Y
hm nicotine polacrilex mouth/throat gum 2 mg, 4 mg	\$0	Y

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit
hm nicotine polacrilex mouth/throat lozenge 2 mg, 4 mg	\$0	Y	nicotine step 1 transdermal patch 24 hour 21 mg/24hr	\$0	Y
hm nicotine transdermal patch 24 hour 14 mg/24hr, 21 mg/24hr, 7 mg/24hr	\$0	Y	nicotine step 2 transdermal patch 24 hour 14 mg/24hr	\$0	Y
kls quit2 mouth/throat gum 2 mg	\$0	Y	nicotine step 3 transdermal patch 24 hour 7 mg/24hr	\$0	Y
kls quit2 mouth/throat lozenge 2 mg	\$0	Y	nicotine transdermal kit 21-14-7 mg/24hr	\$0	Y
kls quit4 mouth/throat gum 4 mg	\$0	Y	nicotine transdermal patch 24 hour 14 mg/24hr, 21 mg/24hr, 7 mg/24hr	\$0	Y
kls quit4 mouth/throat lozenge 4 mg	\$0	Y	NICOTROL INHALATION INHALER 10 MG	\$0	Y
NICODERM CQ TRANSDERMAL PATCH 24 HOUR 14 MG/24HR, 21 MG/24HR, 7 MG/24HR	\$0	Y	NICOTROL NS NASAL SOLUTION 10 MG/ML	\$0	Y
NICORETTE MINI MOUTH/THROAT LOZENGE 2 MG, 4 MG	\$0	Y	px stop smoking aid mouth/throat gum 2 mg, 4 mg	\$0	Y
NICORETTE MOUTH/THROAT GUM 2 MG, 4 MG	\$0	Y	px stop smoking aid mouth/throat lozenge 2 mg, 4 mg	\$0	Y
NICORETTE MOUTH/THROAT LOZENGE 2 MG, 4 MG	\$0	Y	qc nicotine transdermal system transdermal patch 24 hour 14 mg/24hr, 21 mg/24hr	\$0	Y
NICORETTE STARTER KIT MOUTH/THROAT GUM 2 MG, 4 MG	\$0	Y	ra mini nicotine mouth/throat lozenge 2 mg, 4 mg	\$0	Y
nicotine mini mouth/throat lozenge 2 mg, 4 mg	\$0	Y	ra nicotine gum mouth/throat gum 2 mg, 4 mg	\$0	Y
nicotine polacrilex mini mouth/throat lozenge 2 mg	\$0	Y	ra nicotine mouth/throat gum 2 mg, 4 mg	\$0	Y
nicotine polacrilex mouth/throat gum 2 mg, 4 mg	\$0	Y	ra nicotine polacrilex mouth/throat lozenge 2 mg, 4 mg	\$0	Y
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

Drug Name	Drug Tier	Quantity Limit
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
varenicline tartrate oral tablet 0.5 mg, 1 mg	\$0	Y
varenicline tartrate oral tablet therapy pack 0.5 mg x 11 & 1 mg x 42	\$0	Y
Antibacterials		
Antibacterials, Other		
IV PREP WIPES EXTERNAL PAD 70 %	\$0	
MICROCLENS WIPES EXTERNAL PAD 30 %	\$0	
UNI-SOLVE EXTERNAL PAD	\$0	
Antifungals		
ALA-QUIN EXTERNAL CREAM 3-0.5 %	2	
ALCORTIN A EXTERNAL GEL 1-2-1 %	2	
CORTI-SAV EXTERNAL CREAM 1-1 %	2	
DERMAZENE EXTERNAL CREAM 1-1 %	2	
hydrocortisone-iodoquinol external cream 1-1 %	1	
IDOQUIMEZ-HC EXTERNAL CREAM 1-1.9 %	2	

Drug Name	Drug Tier	Quantity Limit
iodoquinol-hc-aloe polysacch external gel 1-2-1 %	1	
iodoquinol-hydrocortisone-aloe external cream 1-1.9 %	1	
QUINJA EXTERNAL GEL 1.25-1 %	2	
VYTONE EXTERNAL CREAM 1-1.9 %	2	
Antineoplastics		
Alkylating Agents		
ALKERAN ORAL TABLET 2 MG	3	
melphalan oral tablet 2 mg	1	
MYLERAN ORAL TABLET 2 MG	2	
TEMODAR ORAL CAPSULE 100 MG, 140 MG, 180 MG, 20 MG, 250 MG	3	
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	

Drug Name	Drug Tier	Quantity Limit
gnp docosanol external cream 10 %	1	
hm docosanol external cream 10 %	1	
Blood Glucose Monitoring		
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 COMPACT PLUS CONTROL IN VITRO SOLUTION	\$0	
ACCU-CHEK FASTCLIX LANCET KIT KIT	\$0	
ACCU-CHEK FASTCLIX LANCETS	\$0	
ACCU-CHEK GUIDE CONTROL IN VITRO LIQUID	\$0	
ACCU-CHEK GUIDE IN VITRO STRIP	\$0	
ACCU-CHEK GUIDE KIT W/DEVICE	\$0	
ACCU-CHEK GUIDE ME KIT W/DEVICE	\$0	
ACCU-CHEK SAFE-T PRO LANCETS	\$0	
ACCU-CHEK SMARTVIEW CONTROL IN VITRO LIQUID	\$0	
ACCU-CHEK SMARTVIEW TEST STRIPS IN VITRO STRIP	\$0	
ACCU-CHEK SOFTCLIX LANCET DEVICE KIT KIT	\$0	
ACCU-CHEK SOFTCLIX LANCETS	\$0	
ACCUTREND GLUCOSE CONTROL IN VITRO SOLUTION	\$0	

Drug Name	Drug Tier	Quantity Limit
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	
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	

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit
ADVOCATE REDI-CODE+ CONTROL IN VITRO SOLUTION HIGH , LOW	\$0		ASSURE 3 CONTROL IN VITRO LIQUID	\$0	
ADVOCATE REDI-CODE+ DEVICE	\$0		ASSURE 3 METER KIT	\$0	
ADVOCATE REDI-CODE+ TALKING KIT W/DEVICE	\$0		ASSURE 3 TEST IN VITRO STRIP	\$0	
ADVOCATE REDI-CODE+ TEST IN VITRO STRIP	\$0		ASSURE 4 CONTROL LEVEL 1 & 2 IN VITRO LIQUID	\$0	
ADVOCATE TEST IN VITRO STRIP	\$0		ASSURE 4 METER DEVICE	\$0	
AGAMATRIX AMP DEVICE	\$0		ASSURE 4 TEST IN VITRO STRIP	\$0	
AGAMATRIX AMP TEST IN VITRO STRIP	\$0		ASSURE DOSE CONTROL IN VITRO SOLUTION NORMAL	\$0	
AGAMATRIX CONTROL IN VITRO SOLUTION , HIGH , NORMAL	\$0		ASSURE DOSE NORM/HIGH CONTROL IN VITRO SOLUTION	\$0	
AGAMATRIX CONTROL LEVEL 2 IN VITRO SOLUTION	\$0		ASSURE II CHECK IN VITRO STRIP	\$0	
AGAMATRIX CONTROL LEVEL 4 IN VITRO SOLUTION	\$0		ASSURE II CONTROL IN VITRO LIQUID	\$0	
AGAMATRIX JAZZ TEST IN VITRO STRIP	\$0		ASSURE II CONTROL LEVEL 1 & 2 IN VITRO LIQUID	\$0	
AGAMATRIX JAZZ WIRELESS 2 KIT W/DEVICE	\$0		ASSURE II IN VITRO STRIP	\$0	
AGAMATRIX KEYNOTE TEST IN VITRO STRIP	\$0		ASSURE PLATINUM IN VITRO STRIP	\$0	
AGAMATRIX PRESTO KIT W/DEVICE	\$0		ASSURE PLATINUM METER DEVICE	\$0	
AGAMATRIX PRESTO PRO METER DEVICE	\$0		ASSURE PRISM CONTROL LEVEL 1&2 IN VITRO SOLUTION	\$0	
AGAMATRIX PRESTO TEST IN VITRO STRIP	\$0		ASSURE PRISM MULTI METER DEVICE	\$0	
ALTERNATE SITE LANCING DEVICE	\$0		ASSURE PRISM MULTI TEST IN VITRO STRIP	\$0	
AQUA LANCE ADJUSTABLE LANCING DEVICE	\$0		ASSURE PRO BLOOD GLUCOSE METER DEVICE	\$0	
			ASSURE PRO CONTROL LEVEL 1 & 2 IN VITRO LIQUID	\$0	

Drug Name	Drug Tier	Quantity Limit
ASSURE PRO TEST IN VITRO STRIP	\$0	
AUTOLET II CLINISAFE KIT	\$0	
AUTOLET LANCING DEVICE	\$0	
AUTOLET LITE CLINISAFE KIT	\$0	
AUTOLET LITE STARTER PACK KIT	\$0	
AUTOLET MINI	\$0	
AUTOLET PLATFORMS	\$0	
AUTOLET PLUS	\$0	
AUTOPEN DEVICE	\$0	
BD LATITUDE DIABETES KIT	\$0	
BD LATITUDE DIABETES SYSTEM KIT	\$0	
BD LOGIC BLOOD GLUCOSE MONITOR KIT W/DEVICE	\$0	
BD MAGNI-GUIDE MAGNIFIER	\$0	
BD PEN	\$0	
BD PEN MINI	\$0	
BIOSCANNER GLUCOSE TEST IN VITRO STRIP	\$0	
BIOTEL CARE BLOOD GLUCOSE KIT W/DEVICE	\$0	
BIOTEL CARE BLOOD GLUCOSE SYST KIT W/DEVICE	\$0	
BLOOD GLUCOSE MONITOR SYSTEM KIT W/DEVICE	\$0	
BLOOD GLUCOSE SYSTEM PAK KIT	\$0	
BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
BLULINK CONTROL HIGH & LOW IN VITRO LIQUID	\$0	

Drug Name	Drug Tier	Quantity Limit
BLULINK GLUCOSE MONITORING SYS DEVICE	\$0	
BLULINK GLUCOSE TEST IN VITRO STRIP	\$0	
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 N GLUCOSE SYSTEM DEVICE	\$0	
CARESENS N GLUCOSE TEST IN VITRO STRIP	\$0	
CARESENS N VOICE SYSTEM DEVICE	\$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	
CARETOUCH TWIST MC LANCETS 30G	\$0	
CEQR SIMPLICITY 2U DEVICE	\$0	
CEQR SIMPLICITY STARTER KIT	\$0	
CHEMSTRIP K IN VITRO STRIP	\$0	
CHEMSTRIP UGK IN VITRO STRIP	\$0	

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit
CLEVER CHEK AUTO-CODE SYSTEM DEVICE	\$0		CONTOUR MONITOR KIT W/DEVICE KIT W/DEVICE	\$0	
CLEVER CHEK AUTO-CODE TEST IN VITRO STRIP	\$0		CONTOUR NEXT CONTROL IN VITRO SOLUTION LOW , NORMAL	\$0	
CLEVER CHEK AUTO-CODE VOICE DEVICE	\$0		CONTOUR NEXT EZ KIT W/DEVICE	\$0	
CLEVER CHEK AUTO-CODE VOICE IN VITRO STRIP	\$0		CONTOUR NEXT GEN MONITOR KIT W/DEVICE	\$0	
CLEVER CHEK SYSTEM KIT W/DEVICE	\$0		CONTOUR NEXT LINK KIT W/DEVICE	\$0	
CLEVER CHEK TEST IN VITRO STRIP	\$0		CONTOUR NEXT MONITOR KIT W/DEVICE	\$0	
CLEVER CHOICE AUTO-CODE SYSTEM DEVICE	\$0		CONTOUR NEXT ONE DEVICE	\$0	
CLEVER CHOICE AUTO-CODE TEST IN VITRO STRIP	\$0		CONTOUR NEXT ONE KIT	\$0	
CLEVER CHOICE GLUCOSE CONTROL IN VITRO LIQUID HIGH , LOW	\$0		CONTOUR NEXT TEST IN VITRO STRIP	\$0	
CLEVER CHOICE MICRO SYSTEM KIT W/DEVICE	\$0		CONTOUR TEST IN VITRO STRIP	\$0	
CLEVER CHOICE MICRO TEST IN VITRO STRIP	\$0		CONTROL IN VITRO SOLUTION NORMAL	\$0	
CLEVER CHOICE MINI SYSTEM DEVICE	\$0		COOL BLOOD GLUCOSE TEST STRIPS IN VITRO STRIP	\$0	
CLEVER CHOICE NO CODING IN VITRO STRIP	\$0		COOL CONTROL A IN VITRO SOLUTION	\$0	
CLEVER CHOICE TALK SYSTEM DEVICE	\$0		COOL CONTROL B IN VITRO SOLUTION	\$0	
CLEVER CHOICE TALK SYSTEM IN VITRO STRIP	\$0		COOL MONITOR DEVICE	\$0	
CONTOUR CONTROL IN VITRO LIQUID HIGH , LOW , NORMAL	\$0		COOL MONITOR KIT KIT W/DEVICE	\$0	
CONTOUR MONITOR DEVICE DEVICE	\$0		CVS ADVANCED GLUCOSE TEST IN VITRO STRIP	\$0	
			CVS BLOOD GLUCOSE METER KIT W/DEVICE	\$0	

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit
CVS GLUCOSE METER TEST STRIPS IN VITRO STRIP	\$0		DIATHRIVE GLUCOSE CONTROL SOLN IN VITRO LIQUID	\$0	
CVS KETONE CARE IN VITRO STRIP	\$0		DIATHRIVE GLUCOSE TEST IN VITRO STRIP	\$0	
CVS LANCING DEVICE	\$0		DIATHRIVE LANCING DEVICE	\$0	
D-CARE BLOOD GLUCOSE IN VITRO STRIP	\$0		DIATHRIVE+ GLUCOSE MONITOR DEVICE	\$0	
D-CARE GLUCOMETER KIT W/DEVICE	\$0		DIATHRIVE+ GLUCOSE TEST IN VITRO STRIP	\$0	
DEXCOM G4 PLAT PED RCV/SHARE DEVICE	\$0		DIATRUE CONTROL LEVEL 1 IN VITRO SOLUTION LOW	\$0	
DEXCOM G4 PLAT PED RECEIVER DEVICE	\$0		DIATRUE CONTROL LEVEL 2 IN VITRO SOLUTION NORMAL	\$0	
DEXCOM G4 PLATINUM RCV/SHARE DEVICE	\$0		DIATRUE CONTROL LEVEL 3 IN VITRO SOLUTION HIGH	\$0	
DEXCOM G4 PLATINUM RECEIVER DEVICE	\$0		DIATRUE PLUS BLOOD GLUCOSE DEVICE	\$0	
DEXCOM G4 PLATINUM TRANSMITTER	\$0		DIATRUE PLUS TEST IN VITRO STRIP	\$0	
DEXCOM G5 MOB/G4 PLAT SENSOR	\$0		DROPLET GENTEEL LANCING DEVICE	\$0	
DEXCOM G5 MOBILE RECEIVER DEVICE	\$0		DROPLET LANCING DEVICE	\$0	
DEXCOM G5 MOBILE TRANSMITTER	\$0		DRUG MART LANCING DEVICE	\$0	
DEXCOM G5 RECEIVER KIT DEVICE	\$0		DUO-CARE CONTROL SOLUTION IN VITRO LIQUID	\$0	
DEXCOM G6 RECEIVER DEVICE	\$0		DUO-CARE TEST IN VITRO STRIP	\$0	
DEXCOM G6 SENSOR	\$0		EASY MINI EJECT LANCING DEVICE	\$0	
DEXCOM G6 TRANSMITTER	\$0		EASY MINI LANCING DEVICE	\$0	
DIASTIX IN VITRO STRIP	\$0		EASY PLUS II CONTROL IN VITRO SOLUTION HIGH , LOW	\$0	
DIATHRIVE BLOOD GLUCOSE METER DEVICE	\$0		EASY PLUS II GLUCOSE SYSTEM DEVICE	\$0	
DIATHRIVE BLOOD GLUCOSE TEST IN VITRO STRIP	\$0				

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit
EASY PLUS II GLUCOSE TEST IN VITRO STRIP	\$0		EASY TRAK CONTROL IN VITRO SOLUTION HIGH , LOW , NORMAL	\$0	
EASY STEP CONTROL IN VITRO SOLUTION HIGH , LOW , NORMAL	\$0		EASY TRAK II BLOOD GLUCOSE SYS DEVICE	\$0	
EASY STEP GLUCOSE MONITOR DEVICE	\$0		EASY TRAK II CONTROL IN VITRO LIQUID NORMAL	\$0	
EASY STEP TEST IN VITRO STRIP	\$0		EASY TRAK II GLUCOSE TEST IN VITRO STRIP	\$0	
EASY TALK BLOOD GLUCOSE SYSTEM DEVICE	\$0		EASYGLUCO IN VITRO STRIP	\$0	
EASY TALK BLOOD GLUCOSE TEST IN VITRO STRIP	\$0		EASYGLUCO KIT	\$0	
EASY TALK CONTROL IN VITRO SOLUTION HIGH , LOW , NORMAL	\$0		EASYGLUCO PLUS IN VITRO STRIP	\$0	
EASY TALK PLUS II CONTROL IN VITRO SOLUTION HIGH , LOW	\$0		EASYMAX 15 LEVEL 2 CONTROL IN VITRO SOLUTION	\$0	
EASY TALK PLUS II TEST STRIPS IN VITRO STRIP	\$0		EASYMAX 15 LEVEL 2-3 CONTROL IN VITRO LIQUID	\$0	
EASY TOUCH CONTROL HIGH & LOW IN VITRO SOLUTION	\$0		EASYMAX 15 TEST IN VITRO STRIP	\$0	
EASY TOUCH GLUCOSE SYSTEM KIT W/DEVICE	\$0		EASYMAX CONTROL IN VITRO SOLUTION NORMAL	\$0	
EASY TOUCH HEALTHPRO GLUCOSE IN VITRO STRIP	\$0		EASYMAX CONTROL NORMAL/HIGH IN VITRO LIQUID	\$0	
EASY TOUCH LANCING DEVICE	\$0		EASYMAX NG BLOOD GLUCOSE DEVICE	\$0	
EASY TOUCH TEST IN VITRO STRIP	\$0		EASYMAX NG BLOOD GLUCOSE KIT W/DEVICE	\$0	
EASY TRAK BLOOD GLUCOSE SYSTEM DEVICE	\$0		EASYMAX TEST IN VITRO STRIP	\$0	
EASY TRAK BLOOD GLUCOSE 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	

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit
EASYPRO PLUS IN VITRO STRIP	\$0		EMBRACE EVO GLUCOSE MONITORING KIT W/DEVICE	\$0	
EASYPRO PLUS KIT W/DEVICE	\$0		EMBRACE GLUCOSE CONTROL IN VITRO LIQUID HIGH	\$0	
ELEMENT AUTOCODE SYSTEM KIT W/DEVICE	\$0		EMBRACE LANCING DEVICE/EJECTOR	\$0	
ELEMENT COMPACT CONTROL 2 IN VITRO SOLUTION	\$0		EMBRACE PRESSURE ACTIVATED 21G	\$0	
ELEMENT COMPACT CONTROL 3 IN VITRO SOLUTION	\$0		EMBRACE PRESSURE ACTIVATED 28G	\$0	
ELEMENT COMPACT GLUCOSE SYSTEM DEVICE	\$0		EMBRACE PRO GLUCOSE CONTROL IN VITRO LIQUID	\$0	
ELEMENT COMPACT TEST IN VITRO STRIP	\$0		EMBRACE PRO GLUCOSE METER DEVICE	\$0	
ELEMENT COMPACT V GLUCOSE SYS DEVICE	\$0		EMBRACE PRO GLUCOSE TEST IN VITRO STRIP	\$0	
ELEMENT CONTROL IN VITRO LIQUID HIGH , LOW , NORMAL	\$0		EMBRACE TALK BLOOD GLUCOSE DEVICE	\$0	
ELEMENT PLUS DEVICE	\$0		EMBRACE TALK GLUCOSE CONTROL IN VITRO SOLUTION HIGH , LOW	\$0	
ELEMENT TEST IN VITRO STRIP	\$0		EMBRACE TALK GLUCOSE TEST IN VITRO STRIP	\$0	
EMBRACE BLOOD GLUCOSE MONITOR DEVICE	\$0		EMBRACE TALK MONITORING SYSTEM KIT W/DEVICE	\$0	
EMBRACE BLOOD GLUCOSE TEST IN VITRO STRIP	\$0		ENLITE GLUCOSE SENSOR	\$0	
EMBRACE CONTROL IN VITRO SOLUTION LOW	\$0		EQ BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
EMBRACE EVO BLOOD GLUCOSE TEST IN VITRO STRIP	\$0		EVENCARE + BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
EMBRACE EVO CONTROL LEVEL 1 IN VITRO LIQUID LOW	\$0		EVENCARE BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
EMBRACE EVO GLUCOSE MONITOR DEVICE	\$0				

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit
EVENCARE CONTROL LOW/HIGH IN VITRO LIQUID	\$0		EXACTECH TEST IN VITRO STRIP	\$0	
EVENCARE G2 LOW/HIGH CONTROL IN VITRO SOLUTION	\$0		FIFTY50 GLUCOSE METER 2.0 KIT W/DEVICE	\$0	
EVENCARE G2 MONITOR DEVICE	\$0		FIFTY50 GLUCOSE TEST 2.0 IN VITRO STRIP	\$0	
EVENCARE G2 TEST IN VITRO STRIP	\$0		FORA 6 CONNECT IN VITRO STRIP	\$0	
EVENCARE G3 LOW/HIGH CONTROL IN VITRO SOLUTION	\$0		FORA BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
EVENCARE G3 MONITOR DEVICE	\$0		FORA CONTROL IN VITRO SOLUTION HIGH , LOW , NORMAL	\$0	
EVENCARE G3 TEST IN VITRO STRIP	\$0		FORA D15G BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
EVENCARE GLUCOSE MONITORING KIT	\$0		FORA D20 BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
EVENCARE MINI CONTROL IN VITRO SOLUTION NORMAL	\$0		FORA D40/G31 BLOOD GLUCOSE IN VITRO STRIP	\$0	
EVENCARE MINI GLUCOSE TEST IN VITRO STRIP	\$0		FORA G20 BLOOD GLUCOSE SYSTEM KIT W/DEVICE	\$0	
EVENCARE MINI MONITOR DEVICE	\$0		FORA G20 BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
EVENCARE PROVIEW GLUCOSE TEST IN VITRO STRIP	\$0		FORA G30/PREM V10 GLUCOSE TEST IN VITRO STRIP	\$0	
EVERSENSE SENSOR/HOLDER	\$0		FORA G30A BLOOD GLUCOSE SYSTEM DEVICE	\$0	
EVERSENSE SMART TRANSMITTER	\$0		FORA GD20 BLOOD GLUCOSE SYSTEM DEVICE	\$0	
EVOLUTION AUTOCODE DEVICE	\$0		FORA GD20 TEST IN VITRO STRIP	\$0	
EVOLUTION AUTOCODE IN VITRO STRIP	\$0		FORA GD50 BLOOD GLUCOSE SYSTEM DEVICE	\$0	
EVOLUTION CONTROL IN VITRO SOLUTION NORMAL	\$0				
EXACTECH R-S-G TEST IN VITRO STRIP	\$0				

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit
FORA GD50 BLOOD GLUCOSE TEST IN VITRO STRIP	\$0		FORA V30A BLOOD GLUCOSE SYSTEM KIT W/DEVICE	\$0	
FORA GTEL BLOOD GLUCOSE SYSTEM DEVICE	\$0		FORA V30A BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
FORA GTEL BLOOD GLUCOSE TEST IN VITRO STRIP	\$0		FORACARE GD40 MONITOR DEVICE	\$0	
FORA LANCING DEVICE	\$0		FORACARE GD40 TEST IN VITRO STRIP	\$0	
FORA PREMIUM V10 BLE SYSTEM DEVICE	\$0		FORACARE GDH CONTROL IN VITRO SOLUTION HIGH , LOW , NORMAL	\$0	
FORA TEST N' GO MONITOR DEVICE	\$0		FORACARE PREMIUM V10 DEVICE	\$0	
FORA TN'G ADVANCE PRO IN VITRO STRIP	\$0		FORACARE PREMIUM V10 TEST IN VITRO STRIP	\$0	
FORA TN'G VOICE KIT W/DEVICE	\$0		FORACARE TEST N GO MONITOR DEVICE	\$0	
FORA TN'G/TN'G VOICE IN VITRO STRIP	\$0		FORACARE TEST N GO TEST IN VITRO STRIP	\$0	
FORA V10 BLOOD GLUCOSE SYSTEM DEVICE	\$0		FORTISCARE CONTROL IN VITRO SOLUTION HIGH , LOW , NORMAL	\$0	
FORA V10 BLOOD GLUCOSE TEST IN VITRO STRIP	\$0		FORTISCARE G1 TEST STRIP IN VITRO STRIP	\$0	
FORA V10/V12/D10/D20 TEST KIT	\$0		FORTISCARE T1 GLUCOSE SYSTEM DEVICE	\$0	
FORA V12 BLOOD GLUCOSE SYSTEM DEVICE	\$0		FORTISCARE TEST IN VITRO STRIP	\$0	
FORA V12 BLOOD GLUCOSE TEST IN VITRO STRIP	\$0		FREDS PHARMACY AUTOLET LANCING	\$0	
FORA V20 BLOOD GLUCOSE SYSTEM DEVICE	\$0		FREESTYLE CONTROL SOLUTION IN VITRO LIQUID	\$0	
FORA V20 BLOOD GLUCOSE TEST IN VITRO STRIP	\$0		FREESTYLE FREEDOM KIT	\$0	
FORA V30A BLOOD GLUCOSE SYSTEM DEVICE	\$0		FREESTYLE FREEDOM LITE KIT W/DEVICE	\$0	
			FREESTYLE INSULINX SYSTEM KIT W/DEVICE	\$0	

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit
FREESTYLE INSULINX TEST IN VITRO STRIP	\$0		GENTEEL CONTACT TIPS (CLEAR)	\$0	
FREESTYLE LIBRE 14 DAY READER DEVICE	\$0		GENTEEL CONTACT TIPS (GREEN)	\$0	
FREESTYLE LIBRE 14 DAY SENSOR	\$0		GENTEEL CONTACT TIPS (ORANGE)	\$0	
FREESTYLE LIBRE 2 READER DEVICE	\$0		GENTEEL CONTACT TIPS (RAINBOW)	\$0	
FREESTYLE LIBRE 2 SENSOR	\$0		GENTEEL CONTACT TIPS (VIOLET)	\$0	
FREESTYLE LIBRE 3 SENSOR	\$0		GENTEEL CONTACT TIPS (YELLOW)	\$0	
FREESTYLE LIBRE READER DEVICE	\$0		GENTEEL LANCING KIT (BLUE) KIT	\$0	
FREESTYLE LITE DEVICE	\$0		GENTEEL NOZZLES	\$0	
FREESTYLE LITE KIT W/DEVICE	\$0		GENTEEL PLUS LANCING (BLACK)	\$0	
FREESTYLE LITE TEST IN VITRO STRIP	\$0		GENTEEL PLUS LANCING (PURPLE)	\$0	
FREESTYLE PRECISION NEO SYSTEM KIT W/DEVICE	\$0		GENTEEL PLUS LANCING (WHITE)	\$0	
FREESTYLE PRECISION NEO TEST IN VITRO STRIP	\$0		GENTEEL PLUS LANCING DEV(BLUE)	\$0	
FREESTYLE SIDEKICK II KIT	\$0		GENTEEL PLUS LANCING DEV(PINK)	\$0	
FREESTYLE TEST IN VITRO STRIP	\$0		GENTLE-LET PLATFORMS	\$0	
GE100 BLOOD GLUCOSE SYSTEM DEVICE	\$0		GENULTIMATE TEST IN VITRO STRIP	\$0	
GE100 BLOOD GLUCOSE SYSTEM KIT W/DEVICE	\$0		GHT BLOOD GLUCOSE MONITOR KIT W/DEVICE	\$0	
GE100 BLOOD GLUCOSE TEST IN VITRO STRIP	\$0		GHT TEST IN VITRO STRIP	\$0	
GE100 CONTROL IN VITRO SOLUTION NORMAL	\$0		GLOBAL LANCING DEVICE	\$0	
GENTEEL CONTACT TIPS (BLUE)	\$0		GLUCO PERFECT 3 METER DEVICE	\$0	
			GLUCO PERFECT 3 TEST IN VITRO STRIP	\$0	
			GLUCOCARD 01 BLOOD GLUCOSE DEVICE	\$0	

Drug Name	Drug Tier	Quantity Limit
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	
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	

Drug Name	Drug Tier	Quantity Limit
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	
GLUCOSE CONTROL IN VITRO SOLUTION , NORMAL	\$0	
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	

Drug Name	Drug Tier	Quantity Limit
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	
GOODSENSE LANCING DEVICE	\$0	
GUARDIAN CONNECT TRANSMITTER	\$0	
GUARDIAN LINK 3 TRANSMITTER	\$0	
GUARDIAN REAL-TIME CHARGER	\$0	
GUARDIAN REAL-TIME REPLACE PED DEVICE	\$0	
GUARDIAN REAL-TIME TEST PLUG	\$0	
GUARDIAN SENSOR (3)	\$0	
GUARDIAN SENSOR 3	\$0	
HARMONY BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	

Drug Name	Drug Tier	Quantity Limit
HEALTH CARE LANCING DEVICE	\$0	
HEALTHY ACCENTS LANCING DEVICE	\$0	
H-E-B INCONTROL ADV LANCING	\$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	
HYPOLANCE AST LANCING KIT	\$0	
IGLUCOSE MONITORING SYSTEM KIT W/DEVICE	\$0	
IGLUCOSE TEST STRIPS IN VITRO STRIP	\$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	
INFINITY BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	

Drug Name	Drug Tier	Quantity Limit
INFINITY CONTROL IN VITRO SOLUTION NORMAL	\$0	
INFINITY VOICE IN VITRO LIQUID NORMAL	\$0	
INFINITY VOICE IN VITRO STRIP	\$0	
INFINITY VOICE KIT W/DEVICE	\$0	
INPEN 100-BLUE-LILLY-HUMALOG DEVICE	\$0	
INPEN 100-BLUE-NOVOLOG-FIASP DEVICE	\$0	
INPEN 100-GREY-LILLY-HUMALOG DEVICE	\$0	
INPEN 100-GREY-NOVOLOG-FIASP DEVICE	\$0	
INPEN 100-PINK-LILLY-HUMALOG DEVICE	\$0	
INPEN 100-PINK-NOVOLOG-FIASP DEVICE	\$0	
INSUL-TOTE	\$0	
INSUL-TOTE JR	\$0	
KETO-DIASTIX IN VITRO STRIP	\$0	
KETONE TEST IN VITRO STRIP	\$0	
KETOSTIX IN VITRO STRIP	\$0	
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	

Drug Name	Drug Tier	Quantity Limit
KROGER HEALTHPRO GLUC MON SYS KIT W/DEVICE	\$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	
KROGER TEST IN VITRO STRIP	\$0	
LANCETS	\$0	
LANCETS IN VITRO STRIP	\$0	
LANCETS KIT	\$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	
LIBERTY GLUCOSE CONTROL IN VITRO SOLUTION HIGH , NORMAL	\$0	
LIBERTY GLUCOSE CONTROL MID IN VITRO SOLUTION	\$0	
LIBERTY MINI LANCING DEVICE	\$0	
LIBERTY NEXT GENERATION TEST IN VITRO STRIP	\$0	
LIBERTY NXT GENERATION MONITOR DEVICE	\$0	

Drug Name	Drug Tier	Quantity Limit
LIBERTY TEST IN VITRO STRIP	\$0	
LITE TOUCH LANCING PEN	\$0	
LIVE BETTER ADV LANCING DEVICE	\$0	
MEDISENSE GLUCOSE KETONE CONTR IN VITRO LIQUID	\$0	
MEDISENSE HI/MID/LOW CONTROL IN VITRO LIQUID	\$0	
MEDISENSE HIGH/LOW CONTROL IN VITRO LIQUID	\$0	
MEDISENSE MID CONTROL IN VITRO LIQUID	\$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	
MEIJER PREMIUM GLUCOSE TEST IN VITRO STRIP	\$0	
MEIJER TRUE2GO BLOOD GLUCOSE KIT W/DEVICE	\$0	
MEIJER TRUERESULT GLUCOSE SYS KIT W/DEVICE	\$0	
MEIJER TRUETEST TEST IN VITRO STRIP	\$0	

Drug Name	Drug Tier	Quantity Limit
MEIJER TRUETRACK GLUCOSE SYS KIT W/DEVICE	\$0	
MEIJER TRUETRACK TEST IN VITRO STRIP	\$0	
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	
MINI LANCING DEVICE	\$0	
MINILINK REAL-TIME TRANSMITTER	\$0	
MINIMED 630G GUARDIAN PRESS	\$0	
MM EASY TOUCH GLUCOSE IN VITRO STRIP	\$0	
MM EASY TOUCH GLUCOSE METER KIT W/DEVICE	\$0	
MM LANCING DEVICE	\$0	
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	
NOVA MAX BLOOD GLUCOSE SYSTEM DEVICE	\$0	

Drug Name	Drug Tier	Quantity Limit
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	
NOVOPEN ECHO DEVICE	\$0	
ONE DROP BLOOD GLUCOSE MONITOR KIT W/DEVICE	\$0	
ONE DROP TEST IN VITRO STRIP	\$0	
ONETOUCH CLUB LANCETS FINE PT	\$0	
ONETOUCH DELICA LANCETS 30G	\$0	
ONETOUCH DELICA LANCETS 33G	\$0	
ONETOUCH DELICA LANCING DEV	\$0	
ONETOUCH DELICA PLUS LANCET30G	\$0	
ONETOUCH DELICA PLUS LANCET33G	\$0	
ONETOUCH DELICA PLUS LANCING	\$0	
ONETOUCH DELICA SAFETY LANCING	\$0	
ONETOUCH FINEPOINT LANCETS	\$0	
ONETOUCH SOLUTIONS STARTER KIT KIT W/ WELL DEVICE	\$0	
ONETOUCH SURESOFT LANCING DEV	\$0	
ONETOUCH ULTRA 2 KIT W/DEVICE	\$0	

Drug Name	Drug Tier	Quantity Limit
ONETOUCH ULTRA CONTROL IN VITRO SOLUTION	\$0	
ONETOUCH ULTRA IN VITRO STRIP	\$0	
ONETOUCH ULTRA MINI KIT W/DEVICE	\$0	
ONETOUCH ULTRASOFT LANCETS	\$0	
ONETOUCH VERIO FLEX SYSTEM KIT W/DEVICE	\$0	
ONETOUCH VERIO IN VITRO SOLUTION , HIGH	\$0	
ONETOUCH VERIO IN VITRO STRIP	\$0	
ONETOUCH VERIO IQ SYSTEM KIT W/DEVICE	\$0	
ONETOUCH VERIO KIT W/DEVICE	\$0	
ONETOUCH VERIO REFLECT KIT W/DEVICE	\$0	
OPTIUM BLOOD GLUCOSE MONITOR KIT W/DEVICE	\$0	
OPTIUM GLUCOSE MONITOR SYSTEM DEVICE	\$0	
OPTIUM TEST IN VITRO STRIP	\$0	
OPTIUMEZ TEST IN VITRO STRIP	\$0	
OVAL TAPE	\$0	
PARADIGM REAL-TIME TRANSMITTER	\$0	
PENLET II BLOOD SAMPLER KIT	\$0	
PENLET II REPLACEMENT CAP	\$0	
PEN-TOTE	\$0	
PHARMACIST CHOICE AUTOCODE IN VITRO STRIP	\$0	

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit
PHARMACIST CHOICE AUTOCODE SYS KIT W/DEVICE	\$0		PRECISION QID TEST IN VITRO STRIP	\$0	
PHARMACIST CHOICE MINI SYSTEM DEVICE	\$0		PRECISION SOF-TACT MONITOR DEVICE	\$0	
PHARMACIST CHOICE NO CODING IN VITRO STRIP	\$0		PRECISION SOF-TACT TEST IN VITRO STRIP	\$0	
POCKETCHEM EZ CONTROL IN VITRO SOLUTION	\$0		PRECISION XTRA BLOOD GLUCOSE IN VITRO STRIP	\$0	
POCKETCHEM EZ SYSTEM KIT W/DEVICE	\$0		PRECISION XTRA DEVICE	\$0	
POCKETCHEM EZ TEST IN VITRO STRIP	\$0		PRECISION XTRA KIT , W/DEVICE	\$0	
POGO AUTOMATIC BLOOD GLUCOSE DEVICE	\$0		PRECISION XTRA MONITOR DEVICE	\$0	
POGO AUTOMATIC TEST CARTRIDGES IN VITRO DIAGNOSTIC TEST	\$0		PREMIUM BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
PRECISION GLUCOSE CONTROL IN VITRO LIQUID	\$0		PRO VOICE V8 GLUCOSE SYSTEM DEVICE	\$0	
PRECISION GLUCOSE CONTROL SOLN IN VITRO SOLUTION	\$0		PRO VOICE V8/V9 GLUCOSE IN VITRO STRIP	\$0	
PRECISION GLUCOSE KETONE CONTR IN VITRO LIQUID	\$0		PRO VOICE V9 GLUCOSE SYSTEM DEVICE	\$0	
PRECISION GLUCOSE/KETONE CONTR IN VITRO LIQUID	\$0		PRODIGY AUTOCODE BLOOD GLUCOSE DEVICE	\$0	
PRECISION LINK KIT	\$0		PRODIGY AUTOCODE BLOOD GLUCOSE KIT W/DEVICE	\$0	
PRECISION PCX IN VITRO STRIP	\$0		PRODIGY CONTROL SOLUTION IN VITRO SOLUTION HIGH , LOW	\$0	
PRECISION PCX PLUS TEST IN VITRO STRIP	\$0		PRODIGY LANCING DEVICE	\$0	
PRECISION POINT OF CARE TEST IN VITRO STRIP	\$0		PRODIGY NO CODING BLOOD GLUC IN VITRO STRIP	\$0	
PRECISION QID MONITOR DEVICE	\$0		PRODIGY NO CODING BLOOD GLUC KIT W/DEVICE	\$0	

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit
PRODIGY POCKET BLOOD GLUCOSE KIT W/DEVICE	\$0		REFUAH PLUS MONITORING SYSTEM KIT W/DEVICE	\$0	
PRODIGY VOICE BLOOD GLUCOSE KIT W/DEVICE	\$0		RELION BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
PSS SELECT PLATFORMS	\$0		RELION CONFIRM GLUCOSE MONITOR KIT W/DEVICE	\$0	
PTS PANELS EGLU TEST IN VITRO STRIP	\$0		RELION CONFIRM/MICRO TEST IN VITRO STRIP	\$0	
PTS PANELS GLUCOSE TEST IN VITRO STRIP	\$0		RELION KETONE TEST IN VITRO STRIP	\$0	
PX ADVANCED LANCING DEVICE	\$0		RELION LANCING DEVICE	\$0	
QC ADVANCED LANCING DEVICE	\$0		RELION LANCING DEVICE KIT	\$0	
QUICKTEK CONTROL SOLUTION IN VITRO LIQUID	\$0		RELION MICRO KIT W/DEVICE	\$0	
QUICKTEK KIT	\$0		RELION PREMIER BLU MONITOR DEVICE	\$0	
QUICKTEK TEST IN VITRO STRIP	\$0		RELION PREMIER CLASSIC DEVICE	\$0	
QUICKTEK/METER KIT	\$0		RELION PREMIER COMPACT SYSTEM KIT W/DEVICE	\$0	
QUINTET AC BLOOD GLUCOSE DEVICE	\$0		RELION PREMIER TEST IN VITRO STRIP	\$0	
QUINTET AC BLOOD GLUCOSE TEST IN VITRO STRIP	\$0		RELION PREMIER VOICE MONITOR DEVICE	\$0	
QUINTET BLOOD GLUCOSE SYSTEM DEVICE	\$0		RELION PRIME MONITOR DEVICE	\$0	
QUINTET BLOOD GLUCOSE TEST IN VITRO STRIP	\$0		RELION PRIME TEST IN VITRO STRIP	\$0	
QUINTET CONTROL HIGH/NORMAL IN VITRO SOLUTION	\$0		RELION TRUE MET AIR GLUC METER KIT W/DEVICE	\$0	
REFUAH PLUS BLOOD GLUCOSE TEST IN VITRO STRIP	\$0		RELION TRUE METRIX TEST STRIPS IN VITRO STRIP	\$0	
REFUAH PLUS GLUCOSE CONTROL IN VITRO SOLUTION	\$0		RELION ULTIMA GLUCOSE SYSTEM KIT W/DEVICE	\$0	

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit
RELION ULTIMA TEST IN VITRO STRIP	\$0		SM TRUEDRAW LANCING DEVICE	\$0	
REXALL BLOOD GLUCOSE SYSTEM KIT W/DEVICE	\$0		SMART DIABETES VANTAGE LANCING	\$0	
REXALL BLOOD GLUCOSE TEST IN VITRO STRIP	\$0		SMART SENSE PREMIUM SYSTEM KIT W/DEVICE	\$0	
RIGHTEST ALTERNATE SITE ADAPT	\$0		SMART SENSE PREMIUM TEST IN VITRO STRIP	\$0	
RIGHTEST GC300 CONTROL IN VITRO LIQUID HIGH , NORMAL	\$0		SMART SENSE VALUE GLUCOSE SYS KIT W/DEVICE	\$0	
RIGHTEST GD500 LANCING DEVICE	\$0		SMART SENSE VALUE TEST IN VITRO STRIP	\$0	
RIGHTEST GM100 BLOOD GLUCOSE KIT W/DEVICE	\$0		SMARTEST BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
RIGHTEST GM300 BLOOD GLUCOSE KIT W/DEVICE	\$0		SMARTEST CONTROL MEDIUM IN VITRO SOLUTION	\$0	
RIGHTEST GM550 BLOOD GLUCOSE KIT W/DEVICE	\$0		SMARTEST EJECT DEVICE	\$0	
RIGHTEST GS100 BLOOD GLUCOSE IN VITRO STRIP	\$0		SMARTEST EJECT STARTER KIT W/DEVICE	\$0	
RIGHTEST GS300 BLOOD GLUCOSE IN VITRO STRIP	\$0		SMARTEST PERSONA STARTER KIT W/DEVICE	\$0	
RIGHTEST GS550 BLOOD GLUCOSE IN VITRO STRIP	\$0		SMARTEST PRONTO STARTER KIT W/DEVICE	\$0	
RIGHTEST GT333 BLOOD GLUCOSE DEVICE	\$0		SMARTEST PROTEGE DEVICE	\$0	
RIGHTEST GT333 BLOOD GLUCOSE IN VITRO STRIP	\$0		SMARTEST PROTEGE STARTER KIT W/DEVICE	\$0	
SELECT-LITE LANCING DEVICE	\$0		SOLARTEK GLUCOSE CONTROL IN VITRO LIQUID	\$0	
SHOPKO AUTOLET LANCING DEVICE	\$0		SOLUS V2 BLOOD GLUCOSE SYSTEM DEVICE	\$0	
SIMPLE DIAGNOSTICS LANCING DEV	\$0		SOLUS V2 BLOOD GLUCOSE SYSTEM KIT W/DEVICE	\$0	

Drug Name	Drug Tier	Quantity Limit
SOLUS V2 CONTROL IN VITRO SOLUTION HIGH , LOW	\$0	
SOLUS V2 LANCING DEVICE	\$0	
SOLUS V2 TEST IN VITRO STRIP	\$0	
STERILANCE PA	\$0	
SUPREME II HIGH/LOW CONTROL IN VITRO LIQUID	\$0	
SUPREME TEST IN VITRO STRIP	\$0	
SURE COMFORT LANCING PEN	\$0	
SURE EDGE GLUCOSE MONITOR DEVICE	\$0	
SURE EDGE TEST IN VITRO STRIP	\$0	
SURECHEK BLOOD GLUCOSE MONITOR DEVICE	\$0	
SURECHEK BLOOD GLUCOSE MONITOR KIT W/DEVICE	\$0	
SURECHEK BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
SURE-PEN	\$0	
SURESTEP GLUCOSE CONTROL IN VITRO SOLUTION	\$0	
SURESTEP PRO HIGH GLUCOSE IN VITRO LIQUID	\$0	
SURESTEP PRO LOW GLUCOSE IN VITRO LIQUID	\$0	
SURESTEP PRO NORMAL GLUCOSE IN VITRO LIQUID	\$0	
SURE-TEST EASYPLUS MINI METER DEVICE	\$0	

Drug Name	Drug Tier	Quantity Limit
SURE-TEST EASYPLUS MINI TEST IN VITRO STRIP	\$0	
TAI DOC CONTROL IN VITRO SOLUTION NORMAL	\$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	
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	

Drug Name	Drug Tier	Quantity Limit
TRUE METRIX PRO BLOOD GLUCOSE IN VITRO STRIP	\$0	
TRUECONTROL GLUCOSE CONT LEV 0 IN VITRO LIQUID	\$0	
TRUECONTROL GLUCOSE CONT LEV 1 IN VITRO LIQUID	\$0	
TRUEDRAW LANCING DEVICE	\$0	
TRUERESULT BLOOD GLUCOSE KIT W/DEVICE	\$0	
TRUETEST TEST IN VITRO STRIP	\$0	
TRUETRACK BLOOD GLUCOSE DEVICE	\$0	
TRUETRACK BLOOD GLUCOSE KIT W/DEVICE	\$0	
TRUETRACK SMART SYSTEM KIT	\$0	
TRUETRACK TEST IN VITRO STRIP	\$0	
ULTI-LANCE AUTOMATIC	\$0	
ULTIMA KIT	\$0	
ULTRA TRAK PRO BLOOD GLUCOSE KIT W/DEVICE	\$0	
ULTRALANCE	\$0	
ULTRATRAK ACTIVE DEVICE	\$0	
ULTRATRAK PRO CONTROL IN VITRO SOLUTION , NORMAL	\$0	
ULTRATRAK PRO DEVICE	\$0	
ULTRATRAK PRO TEST IN VITRO STRIP	\$0	
ULTRATRAK ULTIMATE CONTROL IN VITRO SOLUTION	\$0	

Drug Name	Drug Tier	Quantity Limit
ULTRATRAK ULTIMATE MONITOR DEVICE	\$0	
ULTRATRAK ULTIMATE TEST IN VITRO STRIP	\$0	
UNISTIK NORMAL	\$0	
UNISTRIP CONTROL IN VITRO SOLUTION HIGH , LOW	\$0	
UNISTRIP1 GENERIC IN VITRO STRIP	\$0	
VALUE PLUS LANCING DEVICE	\$0	
VERASENS BLOOD GLUCOSE METER DEVICE	\$0	
VERASENS BLOOD GLUCOSE SYSTEM KIT W/DEVICE	\$0	
VERASENS BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	
VERASENS GLUCOSE CONTROL IN VITRO LIQUID	\$0	
VIDA MIA AUTOLET LANCING DEV	\$0	
VIVAGUARD INO CONTROL SOLUTION IN VITRO LIQUID	\$0	
VIVAGUARD INO GLUCOSE METER DEVICE	\$0	
VIVAGUARD INO SMART GLUC METER DEVICE	\$0	
VIVAGUARD INO TEST STRIPS IN VITRO STRIP	\$0	
VIVAGUARD LANCING DEVICE	\$0	
VOCAL POINT BLOOD GLUCOSE SYS DEVICE	\$0	
VOCAL POINT BLOOD GLUCOSE TEST IN VITRO STRIP	\$0	

Drug Name	Drug Tier	Quantity Limit
WAVESENSE AMP KIT W/DEVICE	\$0	
Cardiovascular Agents		
Cardiovascular Agents, Other		
isoxsuprine hcl oral tablet 10 mg, 20 mg	1	
Dyslipidemics, HMG CoA Reductase Inhibitors		
lovastatin oral tablet 10 mg, 20 mg, 40 mg	\$0	
Central Nervous System Agents		
Central Nervous System, Other		
ADIPEX-P ORAL CAPSULE 37.5 MG	3	
ADIPEX-P ORAL TABLET 37.5 MG	3	
CONTRAIVE 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	
phendimetrazine tartrate oral tablet 35 mg	1	
phentermine hcl oral capsule 15 mg, 30 mg, 37.5 mg	1	
phentermine hcl oral tablet 37.5 mg	1	
QSYMIA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 11.25-69 MG	2	

Drug Name	Drug Tier	Quantity Limit
QSYMIA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 15-92 MG, 3.75-23 MG, 7.5-46 MG	3	
Dermatological Agents		
blanche external cream 4 %	1	
CORTANE-B EXTERNAL LOTION 10-10-1 MG/ML	2	
hydrocortisone ace-pramoxine external cream 2.5-1 %	1	
hydroquinone external cream 4 %	1	
MUGARD MOUTH/THROAT LIQUID	3	
PRAMOSONE EXTERNAL CREAM 1-1 %, 1-2.5 %	2	
PRAMOSONE EXTERNAL OINTMENT 1-1 %, 1-2.5 %	2	
remergent hq external cream 4 %	1	
salicylic acid wart remover external liquid 27.5 %	1	
TRI-CHLOR EXTERNAL LIQUID 80 %	3	
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	
CORVITE 150 ORAL TABLET	2	

Drug Name	Drug Tier	Quantity Limit
CORVITE FE ORAL TABLET	2	
FERRALET 90 ORAL TABLET 90-1 MG	3	
FLORIVA ORAL LIQUID 0.25-400 MG-UNIT/ML	2	
FOLIVANE-F ORAL CAPSULE 125-1 MG	3	
FOLIVANE-PLUS ORAL CAPSULE	3	
FUSION 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	
K-PHOS-NEUTRAL ORAL TABLET 155-852-130 MG	2	
MULTIGEN FOLIC ORAL TABLET 70-150-2-1 MG	2	
MULTIGEN PLUS ORAL TABLET 50-101-1 MG	2	
NEPHRON FA ORAL TABLET	3	
NIFEREX ORAL TABLET	2	
NUFERA 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	

Drug Name	Drug Tier	Quantity Limit
VENOFER INTRAVENOUS SOLUTION 20 MG/ML	2	
VIRT-FEFA PLUS ORAL CAPSULE	3	
virt-phos 250 neutral oral tablet 155-852-130 mg	1	
WILZIN ORAL CAPSULE 25 MG	3	
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 SENIOR 50+ ORAL TABLET	2	
ABC COMPLETE SENIOR MENS 50+ ORAL TABLET	2	
ABC COMPLETE SENIOR WOMENS 50+ ORAL TABLET	2	
actical oral capsule	1	
ACTIVITE ORAL TABLET 1 MG	2	
ACTIVNUTRIENTS ORAL CAPSULE	2	

Drug Name	Drug Tier	Quantity Limit
ACTIVNUTRIENTS W/O IRON ORAL CAPSULE	2	
advanced diabetic multivitamin oral tablet	1	
advanced eye health oral capsule	1	
algae based calcium oral tablet	1	
ALIVE ENERGY 50+ ORAL TABLET	2	
ALIVE MENS ENERGY ORAL TABLET	2	
ALIVE ONCE DAILY WOMENS ORAL TABLET	2	
ALIVE ULTRA POTENCY WOMENS 50+ ORAL TABLET	2	
ALIVE WOMENS 50+ ORAL TABLET	2	
ALIVE WOMENS ENERGY ORAL TABLET	2	
AMORYN MOOD BOOSTER ORAL CAPSULE	2	
ANIMI-3 ORAL CAPSULE 1 MG	2	
ANIMI-3/VITAMIN D ORAL CAPSULE 1 MG	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 protection formula oral tablet	1	
antioxidant vitamins oral tablet	1	
AZO HORMONAL HEALTH CYCLE CARE ORAL TABLET	2	

Drug Name	Drug Tier	Quantity Limit
AZO HORMONAL HEALTH HAPPY CYCL ORAL TABLET	2	
BACMIN ORAL TABLET	2	
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	1	
biocel oral tablet	1	
body/hair/skin/nails oral capsule	1	
b-plex plus oral tablet	1	
CAL-DAY 1000 ORAL TABLET	2	
CARRAVITE ORAL TABLET	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	
CELLULAR SECURITY 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	

Drug Name	Drug Tier	Quantity Limit
CENTRUM ADULTS ORAL TABLET	2	
CENTRUM CARDIO ORAL TABLET	2	
CENTRUM MEN ORAL TABLET	2	
CENTRUM MINIS WOMEN 50+ ORAL TABLET	2	
CENTRUM SILVER 50+MEN ORAL TABLET	2	
CENTRUM SILVER 50+WOMEN ORAL TABLET	2	
CENTRUM SILVER ADULT 50+ ORAL TABLET	2	
CENTRUM SILVER ORAL TABLET	2	
CENTRUM SILVER ULTRA WOMENS ORAL TABLET	2	
CENTRUM SPECIALIST HEART ORAL TABLET	2	
CENTRUM SPECIALIST IMMUNE ORAL TABLET	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	
cerovite senior oral tablet	1	
certa plus oral tablet	1	
CERTAVITE SENIOR ORAL TABLET	2	
CERTAVITE SENIOR/ANTIOXIDANT ORAL TABLET	2	
CERTAVITE/ANTIOXIDANTS TABLET ORAL	2	

Drug Name	Drug Tier	Quantity Limit
certavite/antioxidants tablet oral	1	
CHOICEFUL MULTIVITAMIN ORAL CAPSULE	2	
CIFEREX ORAL CAPSULE 1-3775 MG-UNIT	2	
companion oral tablet	1	
COMPETE ORAL TABLET	2	
complete oral tablet	1	
complete senior oral tablet	1	
coral calcium plus oral capsule	1	
CORVITA ORAL TABLET	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 eye health & lutein oral tablet	1	
cvs eye health adult 50+ 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 spectravite adult 50+ oral tablet	1	
cvs spectravite adults oral tablet	1	
cvs spectravite advanced oral tablet	1	

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit
cvs spectravite men 50+ oral tablet	1		daily womens health formula oral tablet	1	
cvs spectravite men oral tablet	1		daily-vitamin maximum formula oral tablet	1	
cvs spectravite senior oral tablet	1		daily-vitamin/iron oral tablet	1	
cvs spectravite ultra men 50+ oral tablet	1		DAYAVITE ORAL TABLET	2	
cvs spectravite ultra mens oral tablet	1		DECUBI-VITE ORAL CAPSULE	2	
cvs spectravite ultra women oral tablet	1		DEKAS PLUS OCEAN ORAL CAPSULE	2	
cvs spectravite women 50+ oral tablet	1		DEKAS PLUS ORAL CAPSULE	2	
cvs spectravite women oral tablet	1		DERMACINRX MULTITAM ORAL TABLET	2	
cvs spectravite womens senior oral tablet	1		DERMACINRX RIBOTIN-E ORAL TABLET	2	
cvs vision health oral capsule	1		DERMACINRX ZINTREXYL-C ORAL TABLET	2	
cvs womens active daily oral tablet	1		DERMAVITE ORAL TABLET	2	
cyanocobalamin injection solution 1000 mcg/ml	1		diabetes health formula oral tablet	1	
daily betic oral tablet	1		dialyvite 800/ultra d oral tablet	1	
daily combo multi vitamins oral tablet	1		DIALYVITE ORAL TABLET	2	
daily mens health formula oral tablet	1		DIALYVITE SUPREME D ORAL TABLET	2	
daily multiple vitamins/min oral tablet	1		DIALYVITE/ZINC ORAL TABLET	3	
daily multivitamin oral capsule	1		DODDEX INJECTION SOLUTION 1000 MCG/ML	2	
daily vitamin formula+iron oral tablet	1		DRISDOL ORAL CAPSULE 1.25 MG (50000 UT)	3	
daily vitamin formula+minerals oral tablet	1		dry eye formula oral capsule	1	
daily vitamin plus oral capsule	1				
daily vite multivitamin/iron oral tablet	1				

Drug Name	Drug Tier	Quantity Limit
endur-acin oral tablet extended release 250 mg, 500 mg, 750 mg	1	
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	2	
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 vision formula oral tablet	1	
ergocalciferol oral capsule 1.25 mg (50000 ut)	1	

Drug Name	Drug Tier	Quantity Limit
ESSENTIA ORAL TABLET	2	
essential balance oral tablet	1	
ESTROVEN MENOPAUSE SUPPLEMENT ORAL TABLET	2	
eye health + lutein oral tablet	1	
eye health oral capsule	1	
eye multivitamin oral capsule	1	
eye multivitamin/lutein oral capsule	1	
eye multivitamin/lutein oral tablet	1	
eye multivitamin/sodium oral tablet	1	
eye vitamins oral capsule	1	
eyeprotect oral tablet	1	
eye-vites oral tablet	1	
fabb oral tablet 2.2-25-1 mg	1	
fa-vitamin b-6-vitamin b-12 oral tablet 2.2-25-0.5 mg	1	
FITNESS TABS FOR MEN AM/PM ORAL TABLET	2	
FITNESS TABS FOR WOMEN AM/PM ORAL TABLET	2	
FOLAGENT DHA ORAL CAPSULE	2	
FOLAMAX ORAL TABLET	2	
FOLAMED DHA ORAL CAPSULE	2	
folbee plus oral tablet	1	
FOLGARD OS ORAL TABLET 500-1.1 MG	3	
FOLGARD RX ORAL TABLET 2.2-25-1 MG	2	

Drug Name	Drug Tier	Quantity Limit
folic acid oral tablet 1 mg	1	
FOLIC D3 ORAL CAPSULE 1-3775 MG-UNIT	2	
FOLIFLEX ORAL TABLET	2	
FOLIKA-CI ORAL TABLET	2	
FOLIKA-MG ORAL TABLET	2	
FOLIKA-NC ORAL TABLET 1 MG	2	
FOLITIN-Z ORAL TABLET	2	
folplex 2.2 oral tablet 2.2-25-0.5 mg	1	
FOSFREE ORAL TABLET	2	
freedavite oral tablet	1	
GENADEK STEP 1 ORAL CAPSULE	2	
GENADEK STEP 2 ORAL CAPSULE	2	
GENICIN VITA-S ORAL TABLET 1 MG	2	
geri-freeda senior formula oral tablet	1	
gerivite complete oral tablet	1	
glucoten oral capsule	1	
gnp century adult formula oral tablet	1	
gnp century adults 50+ senior oral tablet	1	
gnp century cardio health oral tablet	1	
gnp century mature women's 50+ oral tablet	1	
gnp century ultimate mens oral tablet	1	
gnp hair/skin/nails oral tablet	1	

Drug Name	Drug Tier	Quantity Limit
gnp healthy eyes oral tablet	1	
gnp healthy eyes supervision 2 oral capsule	1	
gnp healthy eyes supervision 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/lycopene oral tablet	1	
gnp one daily plus iron oral tablet	1	
gnp one daily womens 50+ oral tablet	1	
gnp one daily womens oral tablet	1	
gnp therapeutic-m oral tablet	1	
hair formula extra strength oral tablet	1	
hair skin & nails advanced 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	
healthy eyes oral tablet	1	
healthy eyes supervision 2 oral capsule	1	
healthy eyes/lutein-zeaxanthin oral capsule	1	

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit
high pot multivitamin/beta-car oral tablet	1		kp womens 50+ daily formula oral tablet	1	
high potency multivit/fa oral tablet	1		kp womens daily formula oral tablet	1	
hi-kovite 2-part formula oral tablet	1		K-PAX IMMUNE PROFESSIONAL ST ORAL TABLET	2	
hi-potency multi-vitamin oral tablet	1		liver detox oral tablet	1	
hm complete men oral tablet	1		lutein-zeaxanthin oral tablet	1	
hm complete women oral tablet	1		lysiplex plus oral tablet	1	
hm hair/skin/nails oral tablet	1		MACULAR HEALTH FORMULA ORAL CAPSULE	2	
hm womens 50+ advanced daily oral tablet	1		macular vitamin benefit oral tablet	1	
HYLAZINC ORAL TABLET	2		macuvite eye care oral tablet	1	
ICAPS AREDS FORMULA ORAL TABLET	2		macuvite oral tablet	1	
ICAPS LUTEIN & OMEGA-3 ORAL CAPSULE	2		macuvite/lutein oral tablet	1	
ICAPS MV ORAL TABLET	2		maximum daily green oral tablet	1	
ICAPS ORAL CAPSULE	2		mega multi for women oral tablet	1	
i-vite oral tablet	1		MEGA MULTI MEN ORAL TABLET	2	
kp adults 50+ daily formula oral tablet	1		megavite fruits & veggies oral tablet	1	
kp adults daily formula oral tablet	1		megavite golden years 55+ oral tablet	1	
kp folic acid oral tablet 1 mg	1		meijer advanced formula oral tablet	1	
kp mens 50+ daily formula oral tablet	1		mens 50+ advanced oral capsule	1	
kp mens daily formula oral tablet	1		mens 50+ multi vitamin/min oral tablet	1	
kp vision formula oral tablet	1		mens daily formula/lycopene oral capsule	1	
kp vision formula/lutein oral tablet	1		mens life pack oral tablet	1	
			mens multi vitamin & mineral oral tablet	1	

Drug Name	Drug Tier	Quantity Limit
mens multivitamin oral tablet	1	
MEPHYTON ORAL TABLET 5 MG	3	
milltrium advanced formula oral tablet	1	
milltrium cardio oral tablet	1	
milltrium senior oral tablet	1	
MOOD FOOD ES ORAL CAPSULE	2	
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 vitamin/minerals oral tablet	1	
MULTI-BETIC DIABETES ORAL TABLET	2	
multi-lean oral tablet	1	
multiple vit/minerals/no iron oral tablet	1	
multiple vitamins/iron oral tablet	1	
multiple vitamins/womens oral tablet	1	
MULTIPRO ORAL CAPSULE	2	
multivitamin adult (minerals) oral tablet	1	

Drug Name	Drug Tier	Quantity Limit
multivitamin adults 50+ oral tablet	1	
multivitamin adults oral tablet	1	
multivitamin men 50+ oral tablet	1	
multivitamin men oral tablet	1	
multi-vitamin menopausal 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	
myamulti oral tablet	1	
mynephrocaps oral capsule 1 mg	1	

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit
MYNEPHRON ORAL CAPSULE 1 MG	2		OCUVITE ADULT FORMULA ORAL CAPSULE	2	
NASCOBAL NASAL SOLUTION 500 MCG/0.1ML	2		OCUVITE EXTRA ORAL TABLET	2	
nat-rul daily-vite+iron oral tablet	1		OCUVITE EYE + MULTI ORAL TABLET	2	
nat-rul theravite-m oral tablet	1		OCUVITE EYE HEALTH FORMULA ORAL CAPSULE	2	
natrul-vites oral tablet	1		OCUVITE-LUTEIN ORAL CAPSULE	2	
NEOVITE ORAL TABLET	2		OCUVITE-LUTEIN ORAL TABLET	2	
NEPHPLEX RX ORAL TABLET	3		once daily/iron oral tablet	1	
nephronex oral tablet	1		ONCOVITE ORAL TABLET	2	
NEPHRO-VITE RX ORAL TABLET 1 MG	2		one daily 50 plus oral tablet	1	
niacin er oral tablet extended release 1000 mg, 250 mg, 500 mg, 750 mg	1		one daily adults 50+ oral tablet	1	
NICADAN ORAL TABLET	2		one daily calcium/iron oral tablet	1	
NICAZEL FORTE ORAL TABLET	2		one daily complete for men oral tablet	1	
NICAZEL ORAL TABLET	2		one daily complete oral tablet	1	
NICOMIDE ORAL TABLET 750-27-2-0.5 MG	3		one daily for men 50+ advanced oral tablet	1	
no iron mult vitamin-minerals oral tablet	1		one daily for men/lycopene oral tablet	1	
NUTRICAP ORAL TABLET	2		one daily for women 50+ adv oral tablet	1	
nutrifac zx oral tablet	1		one daily for women oral tablet	1	
ocular vitamins oral tablet	1		one daily healthy weight adv oral tablet	1	
ocutabs oral tablet	1		one daily healthy weight oral tablet	1	
ocutabs-lutein oral tablet	1		one daily maximum oral tablet	1	
OCUVEL ORAL CAPSULE	2		one daily men formula w/o iron oral tablet	1	
OCUVITE ADULT 50+ ORAL CAPSULE	2				

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit
one daily mens 50+ multivit oral tablet	1		ONE-A-DAY PROACTIVE 65+ ORAL TABLET	2	
one daily mens 50+/lycopene oral tablet	1		ONE-A-DAY TEEN ADVANTAGE/HER ORAL TABLET	2	
one daily mens health oral tablet	1		ONE-A-DAY TEEN ADVANTAGE/HIM ORAL TABLET	2	
one daily mens oral tablet	1		ONE-A-DAY WEIGHT SMART ADVANCE ORAL TABLET	2	
one daily multivit/iron-free oral tablet	1		ONE-A-DAY WOMENS 50 PLUS ORAL TABLET	2	
one daily multivitamin men oral tablet	1		ONE-A-DAY WOMENS 50+ ADVANTAGE ORAL TABLET	2	
one daily multivitamin women oral tablet	1		ONE-A-DAY WOMENS 50+ ORAL TABLET	2	
one daily multivitamin/iron oral tablet	1		ONE-A-DAY WOMENS HEALTHY SKIN ORAL TABLET	2	
one daily womens 50 plus oral tablet	1		ONE-A-DAY WOMENS MIND & BODY ORAL TABLET	2	
one daily womens 50+ oral tablet	1		ONE-A-DAY WOMENS ORAL TABLET	2	
one daily womens oral tablet	1		ONE-A-DAY WOMENS PETITES ORAL TABLET	2	
one daily/minerals oral tablet	1		one-daily multi caps oral capsule	1	
ONE-A-DAY ENERGY ORAL TABLET	2		one-daily multi-vit/mineral oral tablet	1	
ONE-A-DAY MENOPAUSE FORMULA ORAL TABLET	2		one-daily multi-vitamin/iron oral tablet	1	
ONE-A-DAY MENS (MINERALS) ORAL TABLET	2		one-daily/iron oral tablet	1	
ONE-A-DAY MENS 50+ ADVANTAGE ORAL TABLET	2		ONEVITE ORAL TABLET	2	
ONE-A-DAY MENS 50+ ORAL TABLET	2		optic-vites oral tablet	1	
ONE-A-DAY MENS HEALTH FORMULA ORAL TABLET	2		optic-vites with lutein oral tablet	1	
ONE-A-DAY MENS PRO EDGE ORAL TABLET	2		optimum pms oral tablet	1	
			OPTIVITE P.M.T. ORAL TABLET	2	

Drug Name	Drug Tier	Quantity Limit
OPURITY ORAL TABLET	2	
ORTHO DF ORAL CAPSULE 1-3775 MG-UNIT	2	
OSTEOPRIME PLUS ORAL TABLET	2	
OSTEOPRIME ULTRA ORAL TABLET	2	
paba oral tablet 100 mg	1	
parvlex oral tablet	1	
PHYTOMULTI ORAL TABLET	2	
phytonadione injection solution 1 mg/0.5ml	1	
phytonadione oral tablet 5 mg	1	
POTABA ORAL CAPSULE 500 MG	2	
PRESERVISION AREDS 2 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	
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	

Drug Name	Drug Tier	Quantity Limit
PROTECT CARDIO AF ORAL CAPSULE	2	
PROTECT PLUS SO ORAL CAPSULE	2	
PROTEGRA ORAL CAPSULE	2	
PROVIT ORAL TABLET	2	
px advanced formula multivits oral tablet	1	
px complete senior multivits oral tablet	1	
px mens multivitamins oral tablet	1	
qc daily multivit/multimineral oral tablet	1	
qc daily multivitamins/iron oral tablet	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 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 one daily maximum oral tablet	1	

Drug Name	Drug Tier	Quantity Limit
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	
RAYAVIT ORAL TABLET	2	
REMEDIENT ORAL CAPSULE	2	
RENAL ORAL CAPSULE 1 MG	2	
RENAPLEX ORAL TABLET	2	
RENAPLEX-D ORAL TABLET	2	
rena-vite rx oral tablet 1 mg	1	
reno caps oral capsule 1 mg	1	
replace oral capsule	1	
REQ 49+ ORAL TABLET	2	
savision oral tablet	1	
senior tabs oral tablet	1	
sentry oral tablet	1	
sentry senior oral tablet	1	
sentry senior/lutein oral tablet	1	
SIDEROL ORAL TABLET	2	
SLO-NIACIN ORAL TABLET EXTENDED RELEASE 250 MG, 500 MG, 750 MG	2	
sm antioxidant vitamins oral tablet	1	
sm complete 50+ oral tablet	1	
sm complete 50+ ultimate mens oral tablet	1	
sm complete 50+ ultimate women oral tablet	1	

Drug Name	Drug Tier	Quantity Limit
sm complete advanced formula oral tablet	1	
sm complete oral tablet	1	
sm complete senior formula oral tablet	1	
sm daily diet support oral tablet	1	
sm hair/skin/nails oral tablet	1	
sm multiple vitamins/iron oral tablet	1	
sm niacin cr oral tablet extended release 250 mg	1	
sm one daily mens oral tablet	1	
sm one daily womens oral tablet	1	
sm opti-vitamins oral tablet	1	
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	
stress formula/zinc oral tablet	1	
STRESSTABS ADVANCED ORAL TABLET	2	
STROVITE FORTE ORAL TABLET	2	
STROVITE ONE ORAL TABLET	2	
super antioxidant oral capsule	1	
super antioxidants protector oral capsule	1	
super aytinal 50 plus oral tablet	1	

Drug Name	Drug Tier	Quantity Limit
super aytinal oral tablet	1	
super multiple oral tablet	1	
super nu-thera oral tablet	1	
super thera vite m oral tablet	1	
super vita-mins oral tablet	1	
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 M PLUS ORAL TABLET	2	
thera vital m oral tablet	1	
thera vital-m oral tablet	1	
therabasic-m oral tablet	1	
THERABETIC MULTI-VITAMIN ORAL TABLET	2	
theradex m oral tablet	1	
theradex m/beta carotene 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 oral tablet	1	

Drug Name	Drug Tier	Quantity Limit
THERAMILL FORTE ORAL CAPSULE	2	
thera-mill m oral tablet	1	
THERANATAL LACTATION ONE ORAL CAPSULE	2	
therapeutic formula/hematinics oral tablet	1	
therapeutic-m oral tablet	1	
therapeutic-m/lutein oral tablet	1	
thera-tabs m oral tablet	1	
theratrum complete 50 plus oral tablet	1	
theratrum complete oral tablet	1	
THEREMS-M ORAL TABLET	2	
thrive for life womens oral tablet	1	
THRIVITE 19 ORAL TABLET	2	
triphrocaps oral capsule 1 mg	1	
TRONVITE ORAL TABLET 1 MG	2	
t-vites oral tablet	1	
UDAMIN SP ORAL TABLET	2	
ultra antioxidant formula oral tablet	1	
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	
unicomplex-m oral tablet	1	
v-c forte oral capsule	1	

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit
VENEXA FE ORAL TABLET	2		vitamin k1 injection solution 1 mg/0.5ml	1	
VENEXA ORAL TABLET	2		vita-min oral capsule	1	
VENTRIXYL FE ORAL TABLET	2		vitamins a-d-e/selenium oral tablet	1	
VENTRIXYL ORAL TABLET	2		vitamins/minerals oral tablet	1	
vic-forte oral capsule	1		VITAROCA PLUS ORAL TABLET	2	
virt-caps oral capsule 1 mg	1		VITASANA ORAL TABLET	2	
virt-gard oral tablet 2.2-25-1 mg	1		VITASURE ORAL TABLET 1 MG	2	
vision formula 2 oral capsule	1		vitatrum complete oral tablet	1	
vision formula/lutein oral tablet	1		vitatrum oral tablet	1	
vision health oral capsule	1		VITEYES CLASSIC ADVANCED ORAL CAPSULE	2	
vision plus oral capsule	1		VITEYES CLASSIC MACULAR SUPPORT ORAL CAPSULE	2	
vision vitamins oral tablet	1		VITEYES CLASSIC MULTIVITAMIN ORAL TABLET	2	
visivites oral tablet	1		VITEYES CLASSIC+OMEGA-3 ORAL CAPSULE	2	
visivites/lutein oral tablet	1		VITEYES COMPLETE ORAL CAPSULE	2	
VISTA ADVANCED AREDS2 FORMULA ORAL CAPSULE	2		VITEYES OPTIC NERVE SUPPORT ORAL TABLET	2	
VISTA ADVANCED DRY EYE FORMULA ORAL CAPSULE	2		VITRAMYN ORAL TABLET	2	
vita hair oral tablet	1		VITRANOL FE ORAL TABLET	2	
vita s forte oral tablet	1		VITRANOL ORAL TABLET	2	
vitabasic complete oral tablet	1		VITREXATE FE ORAL TABLET	2	
vitabasic senior oral tablet	1		VITREXATE ORAL TABLET	2	
VITABEX ORAL CAPSULE	2				
vitabex plus oral capsule	1				
vitacel oral tablet	1				
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	1				
vitamin d3 complete oral tablet	1				

Drug Name	Drug Tier	Quantity Limit
VITREXYL + IRON ORAL TABLET	2	
VITREXYL ORAL TABLET	2	
vitrum 50+ adult-multi oral tablet	1	
vitrum 50+ senior multi oral tablet	1	
vitrum senior oral tablet	1	
vp-vite rx oral tablet 1 mg	1	
wescaps oral capsule 1 mg	1	
westab mini oral tablet 2.2-25-1 mg	1	
womens 50+ advanced oral capsule	1	
womens 50+ multi vitamin/min oral tablet	1	
womens daily form/fa/ca/fe oral tablet	1	
womens daily formula oral tablet	1	
womens life pack oral tablet	1	
womens multi oral capsule	1	
womens multi vitamin & mineral oral tablet	1	
womens multivitamin oral tablet	1	
XVITE ORAL TABLET 1 MG	2	
YELETS TEENAGE FORMULA ORAL TABLET	2	
ZYVANA ORAL CAPSULE	2	
Gastrointestinal Agents		
Antispasmodics, Gastrointestinal		
DONNATAL ORAL ELIXIR 16.2 MG/5ML	2	
DONNATAL ORAL TABLET 16.2 MG	2	

Drug Name	Drug Tier	Quantity Limit
hyoscyamine sulfate oral tablet dispersible 0.125 mg	1	
hyoscyamine sulfate sublingual tablet sublingual 0.125 mg	1	
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	
phenobarbital-belladonna alk oral elixir 16.2 mg/5ml	1	
phenobarbital-belladonna alk oral tablet 16.2 mg	1	
PHENOHYTRO ORAL ELIXIR 16.2 MG/5ML	2	
PHENOHYTRO ORAL TABLET 16.2 MG	2	
SYMAX-SL SUBLINGUAL TABLET SUBLINGUAL 0.125 MG	3	
Gastrointestinal Agents, Other		
chlordiazepoxide-clidinium oral capsule 5-2.5 mg	1	
Laxatives		
bisacodyl ec 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	\$0	
cvs bisacodyl oral tablet delayed release 5 mg	\$0	
cvs citrate of magnesia oral solution	\$0	

Drug Name	Drug Tier	Quantity Limit
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	\$0	
ducodyl oral tablet delayed release 5 mg	\$0	
eq clearlax oral powder 17 gm/scoop	\$0	
eq gentle laxative oral tablet delayed release 5 mg	\$0	
eq magnesium citrate oral solution 1.745 gm/30ml	\$0	
eql clearlax oral powder 17 gm/scoop	\$0	
eql gentle laxative oral tablet delayed release 5 mg	\$0	
eql laxative oral tablet delayed release 5 mg	\$0	
eql magnesium citrate oral solution 1.745 gm/30ml	\$0	
gavilax oral powder 17 gm/scoop	\$0	
gavilyte-c oral solution reconstituted 240 gm	\$0	
gavilyte-g oral solution reconstituted 236 gm	\$0	
gavilyte-n with flavor pack oral solution reconstituted 420 gm	\$0	
gentle laxative oral tablet delayed release 5 mg	\$0	

Drug Name	Drug Tier	Quantity Limit
gentlelax oral powder 17 gm/scoop	\$0	
glycolax oral powder 17 gm/scoop	\$0	
gnp bisa-lax oral tablet delayed release 5 mg	\$0	
gnp clearlax oral powder 17 gm/scoop	\$0	
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	
gnp womens laxative oral tablet delayed release 5 mg	\$0	
GOLYTELY ORAL SOLUTION RECONSTITUTED 236 GM	\$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	\$0	
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	\$0	
hm laxative oral tablet delayed release 5 mg	\$0	
hm magnesium citrate oral solution 1.745 gm/30ml	\$0	

Drug Name	Drug Tier	Quantity Limit
kls laxaclear oral powder 17 gm/scoop	\$0	
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	
MIRALAX ORAL POWDER 17 GM/SCOOP	\$0	
mm clearlax oral powder 17 gm/scoop	\$0	
NULYTELY LEMON-LIME ORAL SOLUTION RECONSTITUTED 420 GM	\$0	
NULYTELY WITH FLAVOR PACKS ORAL SOLUTION RECONSTITUTED 420 GM	\$0	
peg 3350 oral powder 17 gm/scoop	\$0	
peg 3350-kcl-na bicarb-nacl oral solution reconstituted 420 gm	\$0	
peg-3350/electrolytes oral solution reconstituted 236 gm	\$0	
polyethylene glycol 3350 oral powder 17 gm/scoop	\$0	
polyethylene glycol 3350-grx oral powder	\$0	
px laxative oral tablet delayed release 5 mg	\$0	
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	

Drug Name	Drug Tier	Quantity Limit
qc magnesium citrate oral solution 1.745 gm/30ml	\$0	
qc natura-lax oral powder 17 gm/scoop	\$0	
ra laxative oral powder 17 gm/scoop	\$0	
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	
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	\$0	
sm clearlax oral powder 17 gm/scoop	\$0	
sm gentle laxative oral tablet delayed release 5 mg	\$0	
sm magnesium citrate oral solution 1.745 gm/30ml	\$0	
smooth lax oral powder 17 gm/scoop	\$0	
trilyte oral solution reconstituted 420 gm	\$0	
veracolate oral tablet delayed release 5 mg	\$0	
womans laxative oral tablet delayed release 5 mg	\$0	

Drug Name	Drug Tier	Quantity Limit
womens laxative oral tablet delayed release 5 mg	\$0	
Proton Pump Inhibitors		
cvs lansoprazole oral capsule delayed release 15 mg	1	Y
cvs omeprazole-sodium bicarbonate oral capsule 20-1100 mg	1	Y
eq lansoprazole 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
hm lansoprazole oral capsule delayed release 15 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

Drug Name	Drug Tier	Quantity Limit
Genitourinary Agents		
Genitourinary Agents, Other		
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
MUSE URETHRAL PELLET 1000 MCG, 125 MCG, 250 MCG, 500 MCG	2	Y
sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg	1	Y
STENDRA ORAL TABLET 100 MG, 200 MG, 50 MG	3	
tadalafil oral tablet 10 mg, 20 mg	1	Y
TRIMO-SAN VAGINAL GEL 0.025 %	2	
varденаfil hcl oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg	1	Y
varденаfil hcl oral tablet dispersible 10 mg	1	Y
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	

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit
EEMT ORAL TABLET 1.25-2.5 MG	2		FLULAVAL QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	\$0	
est estrogens-methyltest ds oral tablet 1.25-2.5 mg	1		FLUMIST QUADRIVALENT NASAL SUSPENSION	\$0	
est estrogens-methyltest hs oral tablet 0.625-1.25 mg	1		FLUZONE HIGH-DOSE QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.7 ML	\$0	
est estrogens-methyltest oral tablet 0.625-1.25 mg, 1.25-2.5 mg	1		FLUZONE QUADRIVALENT INTRAMUSCULAR SUSPENSION , 0.5 ML	\$0	
Immunological Agents			FLUZONE QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	\$0	
Vaccines			PNEUMOVAX 23 INJECTION INJECTABLE 25 MCG/0.5ML	\$0	
AFLURIA QUADRIVALENT INTRAMUSCULAR SUSPENSION	\$0		PREVNAR 13 INTRAMUSCULAR SUSPENSION	\$0	
AFLURIA QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	\$0		PREVNAR 20 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	\$0	
FLUAD QUADRIVALENT INTRAMUSCULAR PREFILLED SYRINGE 0.5 ML	\$0		SHINGRIX INTRAMUSCULAR SUSPENSION RECONSTITUTED 50 MCG/0.5ML	\$0	
FLUARIX QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	\$0		VAXNEUVANCE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	\$0	
FLUBLOK QUADRIVALENT INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 0.5 ML	\$0				
FLUCELVAX QUADRIVALENT INTRAMUSCULAR SUSPENSION	\$0				
FLUCELVAX QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	\$0				

Drug Name	Drug Tier	Quantity Limit
Inflammatory Bowel Disease Agents		
Glucocorticoids		
ANALPRAM HC EXTERNAL CREAM 2.5-1 %	2	
ANALPRAM HC SINGLES EXTERNAL CREAM 2.5-1 %	2	
ANALPRAM-HC EXTERNAL LOTION 2.5-1 %	2	
anucort-hc rectal suppository 25 mg	1	
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	
hydrocort-pramoxine (perianal) external cream 2.5-1 %	1	
lidocaine-hydrocortisone ace rectal kit 3-2.5 %	1	
PROCTOCORT RECTAL SUPPOSITORY 30 MG	2	
Miscellaneous Therapeutic Agents		
ACCU-CHEK LINKASSIST	\$0	
ACCU-CHEK PLASTIC CARTRIDGE	\$0	
ACCU-CHEK SPIRIT CARTRIDGE	\$0	
ACCU-CHEK SPIRIT COMBO PACK	\$0	
ACCU-CHEK TENDER I SET 24"	\$0	
ACCU-CHEK TENDER I SET 31"	\$0	

Drug Name	Drug Tier	Quantity Limit
ACCU-CHEK ULTRAFLEX INF SET	\$0	
ACCU-CHEK ULTRAFLEX-1 INF SET	\$0	
AEROCHAMBER MINI CHAMBER DEVICE	2	
AEROCHAMBER MV	2	
AEROCHAMBER PLUS FLO-VU	2	
AEROCHAMBER PLUS FLO-VU LARGE	2	
AEROCHAMBER PLUS FLO-VU MEDIUM	2	
AEROCHAMBER PLUS FLO-VU SMALL	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	
AEROVENT PLUS DEVICE	2	
ALCOHOL PREP PADS PAD , 70 %	\$0	
AMIGO INSULIN PUMP DEVICE	\$0	
APLICARE ALCOHOL SWABSTICK PAD 70 %	\$0	
AQUASTAT INTRAVENOUS SOLUTION 0.9 %	\$0	

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit
AUM MINI INSULIN PEN NEEDLE 32G X 4 MM , 32G X 5 MM , 32G X 6 MM , 32G X 8 MM , 33G X 4 MM , 33G X 5 MM , 33G X 6 MM	\$0	Y	BD ULTRA-FINE INSULIN SYRINGES 25G X 1" 1 ML, 25G X 5/8" 1 ML, 26G X 1/2" 1 ML, 27.5G X 5/8" 2 ML, 27G X 1/2" 1 ML, 27G X 5/8" 1 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.5 ML, 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML, 31G X 6MM 0.5 ML, U-100 1 ML	\$0	Y
AUM READYGARD DUO PEN NEEDLE 32G X 4 MM	\$0	Y	BD ULTRA-FINE PEN NEEDLES 29G X 12.7MM , 31G X 5 MM , 31G X 8 MM , 32G X 4 MM , 32G X 6 MM	\$0	Y
AUM SAFETY PEN NEEDLE 31G X 4 MM , 31G X 5 MM	\$0	Y	BIOGUARD GAUZE SPONGES PAD 2"X2"	\$0	
AUTOSOFT 30 INFUSION SET	\$0		BREATHE COMFORT CHAMBER/ADULT DEVICE	2	
AUTOSOFT 90 INFUSION SET	\$0		BREATHE COMFORT CHAMBER/CHILD DEVICE	2	
AUTOSOFT XC INFUSION SET	\$0		BREATHE EASE LARGE DEVICE	2	
BAND-AID GAUZE SMALL PAD 2"X2"	\$0		BREATHE EASE MEDIUM DEVICE	2	
BD AUTOSHIELD DUO PEN NEEDLES 29G X 5MM , 29G X 8MM , 30G X 5 MM	\$0	Y	BREATHE EASE SMALL DEVICE	2	
bd heparin posiflush intravenous solution 10 unit/ml, 100 unit/ml	\$0		CLEVER CHOICE HOLDING CHAMBER DEVICE	2	
BD POSIFLUSH INTRAVENOUS SOLUTION 0.9 %	\$0		COMPACT SPACE CHAMBER DEVICE	2	
			COMPACT SPACE CHAMBER/LG MASK DEVICE	2	

Drug Name	Drug Tier	Quantity Limit
COMPACT SPACE CHAMBER/MED MASK DEVICE	2	
COMPACT SPACE CHAMBER/SM MASK DEVICE	2	
CURITY ALL PURPOSE SPONGES PAD 2"X2"	\$0	
CURITY AMD ANTIMICROBIAL SPNGE PAD 2"X2"	\$0	
CURITY GAUZE PAD 2"X2"	\$0	
CURITY GAUZE SPONGE PAD 2"X2"	\$0	
CURITY SPONGES PAD 2"X2"	\$0	
CVS GAUZE PAD 2"X2"	\$0	
DEPLIN 15 ORAL CAPSULE 15-90.314 MG	2	
DERMACEA GAUZE SPONGE PAD 2"X2"	\$0	
DERMACEA IV DRAIN SPONGES PAD 2"X2"	\$0	
DERMACEA IV SPONGES PAD 2"X2"	\$0	
DERMACEA NON-WOVEN SPONGES PAD 2"X2"	\$0	
DERMACEA TYPE VII GAUZE PAD 2"X2"	\$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	

Drug Name	Drug Tier	Quantity Limit
DIASCREEN 5	\$0	
DIASCREEN 6	\$0	
DIASCREEN 7	\$0	
DIASCREEN 8	\$0	
DIASCREEN 9	\$0	
DIASCREEN LIQUID URINE CONTROL	\$0	
DROPLET MICRON 34G X 3.5 MM	\$0	Y
DROPSAFE ALCOHOL PREP PAD 70 %	\$0	
EASIVENT	2	
EASIVENT MASK LARGE	2	
EASIVENT MASK MEDIUM	2	
EASIVENT MASK SMALL	2	
ELFOLATE PLUS ORAL TABLET 3-35-2 MG	2	
EQ SPACE CHAMBER ANTI-STATIC DEVICE	2	
EQ SPACE CHAMBER ANTI-STATIC L DEVICE	2	
EQ SPACE CHAMBER ANTI-STATIC M DEVICE	2	
EQ SPACE CHAMBER ANTI-STATIC S DEVICE	2	
EQL GAUZE PAD 2"X2"	\$0	
EXCILON IV SPONGES PAD 2"X2"	\$0	
EXTENDED INFUSION SET 23"/6MM	\$0	
EXTENDED INFUSION SET 23"/9MM	\$0	
EXTENDED RESERVOIR 3ML	\$0	
FLEXICHAMBER ADULT MASK/SMALL	2	
FLEXICHAMBER CHILD MASK/LARGE	2	
FLEXICHAMBER CHILD MASK/SMALL	2	

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit			
FLEXICHAMBER DEVICE	2		INSPIREASE RESERVOIR BAGS	2				
FOLBIC ORAL TABLET 2.5-25-2 MG	2		INSULIN PEN NEEDLES 29G X 10MM , 29G X 12.7MM , 29G X 12MM , 29G X 5MM , 29G X 8MM , 30G X 5 MM , 30G X 6 MM , 30G X 8 MM , 31G X 4 MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM , 32G X 5 MM , 32G X 6 MM , 32G X 8 MM , 33G X 4 MM , 33G X 5 MM , 33G X 6 MM , 33G X 8 MM	\$0	Y			
FOLTANX ORAL TABLET 3-35-2 MG	2							
FOLTANX RF ORAL CAPSULE 3-90.314-2-35 MG	2							
GAUZE PADS PAD 2"X2"	\$0							
GAUZE TYPE VII MEDI-PAK PAD 2"X2"	\$0							
GELFOAM SPONGE SIZE 100 EXTERNAL	3							
GELFOAM SPONGE SIZE 50 EXTERNAL	3							
GLUCOPRO SYR RES 3ML 22GX3/8"	\$0							
GNP STERILE GAUZE PAD 2"X2"	\$0							
GNP ULTIGUARD SAFEPACK NEEDLE 31G X 5 MM , 31G X 8 MM , 32G X 4 MM , 32G X 6 MM	\$0	Y						
heparin sod (pork) lock flush intravenous solution 1 unit/ml, 10 unit/ml, 100 unit/ml	\$0		INSULIN SYRINGES 25G X 5/8" 1 ML, 27G X 1/2" 0.5 ML, 27G X 1/2" 1 ML, 27G X 5/8" 1 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 28G X 5/16" 1 ML, 29G X 1" 0.3 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 29G X 5/16" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 30G X 15/64" 0.3 ML, 30G X 15/64" 0.5 ML, 30G X 15/64" 1 ML, 30G X 3/16" 0.5 ML, 30G X 3/16" 1 ML, 30G X 3/8" 0.5 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 1/4" 0.3 ML, 31G X 1/4" 0.5 ML, 31G X 1/4" 1 ML, 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML, 32G X 5/16" 0.5 ML, 32G X 5/16" 1 ML, U-100 0.3 ML, U-100 0.5 ML, U-100 1 ML	\$0	Y			
HM STERILE PADS PAD 2"X2"	\$0							
INCONTROL ULTICARE PEN NEEDLES 31G X 6 MM , 31G X 8 MM , 32G X 4 MM	\$0	Y						
INSPIRACHAMBER/LARGE DEVICE	2							
INSPIRACHAMBER/MEDIUM DEVICE	2							
INSPIRACHAMBER/MOUTHPIECE DEVICE	2							
INSPIRACHAMBER/SMALL DEVICE	2							
INSPIREASE	2					J & J GAUZE PAD 2"X2"	\$0	

Drug Name	Drug Tier	Quantity Limit
J-TIP KIT W/VIAL ADAPTERS KIT	\$0	
KENDALL HYDROPHILIC FOAM DRESS PAD 2"X2"	\$0	
KENDALL HYDROPHILIC FOAM PLUS PAD 2"X2"	\$0	
LIDOTREX (ALOE VERA) EXTERNAL GEL 2 %	3	
l-methylfolate forte oral capsule 15-90.314 mg	1	
l-methylfolate-algae oral capsule 15-90.314 mg	1	
l-methylfolate-algae-b12-b6 oral capsule 3-90.314-2-35 mg	1	
l-methylfolate-b6-b12 oral tablet 3-35-2 mg	1	
MASK VORTEX/CHILD/FROG	2	
MASK VORTEX/TODDLER/LA DYBUG	2	
METANX ORAL CAPSULE 3-90.314-2-35 MG	2	
MICROCHAMBER	2	
MICROCHAMBER DEVICE	2	
MICROSPACER	2	
MINIMED 630G INSULIN PUMP KIT	\$0	
MINIMED 670G INSULIN PUMP DEVICE	\$0	
MINIMED 770G INSULIN PUMP SYS KIT	\$0	
MINIMED MIO ADVANCE INFUSE SET	\$0	
MINIMED MIO INFUSION 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 RESERVOIR 1.8ML	\$0	
MINIMED RESERVOIR 3ML	\$0	
MINIMED SILHOUETTE INF SET 32"	\$0	
MINIMED SILHOUETTE INF SET 43"	\$0	
MIO INFUSION SET 18" 6MM	\$0	
MIO INFUSION SET 23" 6MM	\$0	
MIO INFUSION SET 32" 6MM	\$0	
MIO INFUSION SET 32" 9MM	\$0	
MIRASORB SPONGES 2"X2"	\$0	
MONOJECT FLUSH SYRINGE INTRAVENOUS SOLUTION 0.9 %	\$0	
MONOJECT SODIUM CHLORIDE FLUSH INTRAVENOUS SOLUTION 0.9 %	\$0	
niva-fol oral tablet 2.5-25-2 mg	1	
normal saline flush intravenous solution 0.9 %	\$0	
NOVOFINE AUTOCOVER PEN NEEDLE 30G X 8 MM	\$0	Y
NOVOFINE PEN NEEDLE 32G X 6 MM	\$0	Y

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit
NOVOFINE PLUS PEN NEEDLE 32G X 4 MM	\$0	Y	PANDA MASK LARGE	2	
NOVOTWIST PEN NEEDLE 32G X 5 MM	\$0	Y	PANDA MASK MEDIUM	2	
OMNIPOD 5 G6 INTRO (GEN 5) KIT	\$0	Y	PANDA MASK SMALL	2	
OMNIPOD 5 G6 POD (GEN 5)	\$0	Y	PARADIGM PUMP RESERVOIR 1.8ML	\$0	
OMNIPOD CLASSIC PDM (GEN 3) KIT	\$0	Y	PARADIGM PUMP RESERVOIR 3ML	\$0	
OMNIPOD CLASSIC PODS (GEN 3)	\$0	Y	PARADIGM QUICK-SET 18" 6MM	\$0	
OMNIPOD DASH INTRO (GEN 4) KIT	\$0	Y	PARADIGM QUICK-SET 23" 6MM	\$0	
OMNIPOD DASH PDM (GEN 4) KIT	\$0	Y	PARADIGM QUICK-SET 23" 9MM	\$0	
OMNIPOD DASH PODS (GEN 4)	\$0	Y	PARADIGM QUICK-SET 32" 6MM	\$0	
OMNIPOD POD PALS	\$0		PARADIGM QUICK-SET 32" 9MM	\$0	
OPTICHAMBER ADVANTAGE-LG MASK	2		PARADIGM QUICK-SET 43" 6MM	\$0	
OPTICHAMBER ADVANTAGE-MED MASK	2		PARADIGM QUICK-SET 43" 9MM	\$0	
OPTICHAMBER ADVANTAGE-SM MASK	2		PARADIGM SILHOUETTE 18" 13MM	\$0	
OPTICHAMBER DIAMOND	2		PARADIGM SILHOUETTE 32" 13MM	\$0	
OPTICHAMBER DIAMOND-LG MASK DEVICE	2		PARADIGM SILHOUETTE 32" 17MM	\$0	
OPTICHAMBER DIAMOND-MD MASK	2		PARADIGM SILHOUETTE COMBO 23"	\$0	
OPTICHAMBER DIAMOND-SM MASK	2		PARADIGM SILHOUETTE COMBO 43"	\$0	
OPTICHAMBER FACE MASK-LARGE	2		PARADIGM SILHOUETTE FULL 23"	\$0	
OPTICHAMBER FACE MASK-MEDIUM	2		PARADIGM SILHOUETTE FULL 43"	\$0	
OPTICHAMBER FACE MASK-SMALL	2		PARADIGM SURE-T 23" 8MM	\$0	
OPTIHALER	2		PEDIATRIC PANDA MASK	2	
OPTIHALER DEVICE	2		POCKET CHAMBER DEVICE	2	

Drug Name	Drug Tier	Quantity Limit
POCKET SPACER DEVICE	2	
PRO COMFORT SPACER ADULT	2	
PRO COMFORT SPACER CHILD	2	
PRO COMFORT SPACER INFANT DEVICE	2	
PROCARE SPACER/ADULT MASK DEVICE	2	
PROCARE SPACER/CHILD MASK DEVICE	2	
PURE COMFORT SPACER CHAMBER DEVICE	2	
QC BORDER ISLAND GAUZE PAD 2"X2"	\$0	
QC STERILE PADS PAD 2"X2"	\$0	
QUICK-SET INFUSION 23" 6MM	\$0	
RA STERILE PAD 2"X2"	\$0	
RAYA SURE PEN NEEDLE 29G X 12MM , 31G X 4 MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM	\$0	Y
REGENECARE EXTERNAL GEL 2 %	3	
RESTORE CONTACT LAYER PAD 2"X2"	\$0	
RITFLO DEVICE	2	
SAFETY PEN NEEDLES 30G X 5 MM , 30G X 8 MM	\$0	Y
saline flush intravenous solution 0.9 %	\$0	
saline flush zr intravenous solution 0.9 %	\$0	

Drug Name	Drug Tier	Quantity Limit
SAXENDA SUBCUTANEOUS SOLUTION PEN-INJECTOR 18 MG/3ML	3	
SILHOUETTE 23" INFUSION SET	\$0	
SILHOUETTE 43" INFUSION SET	\$0	
SILHOUETTE INFUSION SET 18"	\$0	
SM GAUZE PAD 2"X2"	\$0	
SM STERILE PAD 2"X2"	\$0	
sodium chloride flush intravenous solution 0.9 %	\$0	
STERILE GAUZE PAD 2"X2"	\$0	
STERILE PAD 2"X2"	\$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	
SURE T INFUSION SET 32"/6MM	\$0	
SURE T INFUSION SET 32"/8MM	\$0	
SURGICAL GAUZE SPONGE PAD 2"X2"	\$0	
swabflush saline flush intravenous solution 0.9 %	\$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	

Drug Name	Drug Tier	Quantity Limit
T:SLIM X2 BASAL-IQ PUMP DEVICE	\$0	
T:SLIM X2 CONTROL-IQ PUMP DEVICE	\$0	
T:SLIM X2 INS PUMP/CONTROL-IQ DEVICE	\$0	
T:SLIM X2 INSULIN PMP BASAL IQ DEVICE	\$0	
T:SLIM X2 INSULIN PMP BASAL6.4 DEVICE	\$0	
T:SLIM X2 INSULIN PMP/RFURB IQ DEVICE	\$0	
T:SLIM X2/CONTROL-IQ/REFURB DEVICE	\$0	
TEGADERM FOAM PAD 2"X2"	\$0	
THERAGAUZE PAD 2"X2"	\$0	
TRUSTEEL INFUSION SET	\$0	
ULTIGUARD SAFEPACK SYR/NEEDLE 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	\$0	Y
VALVED HOLDING CHAMBER DEVICE	2	
VARISOFT INFUSION SET	\$0	
V-GO 20 KIT	\$0	
V-GO 30 KIT	\$0	
V-GO 40 KIT	\$0	
VORTEX VALVED HOLDING CHAMBER DEVICE	2	
WESTAB MAX ORAL TABLET 2.5-25-2 MG	2	

Drug Name	Drug Tier	Quantity Limit
Ophthalmic Agents		
Ophthalmic Agents, Other		
CLEAR EYES TRAVELERS EYE REL OPHTHALMIC SOLUTION 0.05-0.5-0.6 %	2	
CLEAR EYES TRIPLE ACTION OPHTHALMIC SOLUTION 0.05-0.5-0.6 %	2	
eye irritation relief ophthalmic solution 0.05-0.5-0.6 %	1	
Ophthalmic Prostaglandin and Prostanamide Analogs		
bimatoprost external solution 0.03 %	1	
LATISSE EXTERNAL SOLUTION 0.03 %	3	
Otic Agents		
cortic-nd otic solution 10-10-1 mg/ml	1	
exotic-hc otic solution 10-10-1 mg/ml	1	
OTICIN HC NR OTIC SOLUTION 10-10-1 MG/ML	2	
Respiratory Tract/Pulmonary Agents		
Antihistamines		
12 hour allergy-d oral tablet extended release 12 hour 5-120 mg	1	
12hr allergy & congestion oral tablet extended release 12 hour 60-120 mg	1	
24hr allergy relief oral tablet 180 mg	1	

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

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit
allergy relief/nasal decongest oral tablet extended release 12 hour 5-120 mg	1		CLARITIN ORAL CAPSULE 10 MG	2	
allergy relief/nasal decongest oral tablet extended release 24 hour 10-240 mg	1		CLARITIN ORAL SYRUP 5 MG/5ML	2	
allergy relief-d oral tablet extended release 12 hour 5-120 mg	1		CLARITIN ORAL TABLET 10 MG	2	
allergy relief-d oral tablet extended release 24 hour 10-240 mg	1		CLARITIN ORAL TABLET CHEWABLE 5 MG	2	
allergy/congestion relief oral tablet extended release 12 hour 5-120 mg	1		CLARITIN REDITABS ORAL TABLET DISPERSIBLE 10 MG, 5 MG	2	
antihistamine & nasal deconges oral tablet extended release 12 hour 60-120 mg	1		CLARITIN-D 12 HOUR ORAL TABLET EXTENDED RELEASE 12 HOUR 5-120 MG	2	
cetirizine hcl allergy child oral solution 5 mg/5ml	1		CLARITIN-D 24 HOUR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-240 MG	2	
cetirizine hcl childrens alrgy oral solution 1 mg/ml	1		cold & allergy oral elixir 1-2.5 mg/5ml	1	
cetirizine hcl oral tablet 10 mg	1		cold multi-symptom severe day oral tablet 5-10-200-325 mg	1	
cetirizine-pseudoephedrine er oral tablet extended release 12 hour 5-120 mg	1		cvs allergy childrens oral syrup 5 mg/5ml	1	
childrens cold & allergy oral elixir 1-2.5 mg/5ml	1		cvs allergy relief childrens oral solution 5 mg/5ml	1	
childrens loratadine oral solution 5 mg/5ml	1		cvs allergy relief childrens oral syrup 5 mg/5ml	1	
childrens loratadine oral syrup 5 mg/5ml	1		cvs allergy relief childrens oral tablet chewable 5 mg	1	
CLARITIN ALLERGY CHILDRENS ORAL SYRUP 5 MG/5ML	2		cvs allergy relief d oral tablet extended release 12 hour 60-120 mg	1	
CLARITIN CHILDRENS ORAL TABLET CHEWABLE 5 MG	2		cvs allergy relief oral tablet 10 mg, 180 mg	1	
			cvs allergy relief oral tablet dispersible 10 mg	1	

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit
cvs allergy relief(cetirizine) oral tablet 10 mg	1		eq loratadine childrens oral tablet chewable 5 mg	1	
cvs allergy relief-d oral tablet extended release 12 hour 5-120 mg	1		eq loratadine oral tablet 10 mg	1	
cvs allergy relief-d oral tablet extended release 24 hour 10-240 mg	1		eq loratadine oral tablet dispersible 10 mg	1	
cvs allergy relief-d12 oral tablet extended release 12 hour 5-120 mg	1		eql all day allergy childrens oral solution 5 mg/5ml	1	
cvs indoor/outdoor allergy rlf oral tablet 10 mg	1		eql all day allergy oral tablet 10 mg	1	
DAYHIST ALLERGY 12 HOUR RELIEF ORAL TABLET 1.34 MG	2		eql all day allergy-d oral tablet extended release 12 hour 5-120 mg	1	
DIMETAPP COLD/ALLERGY ORAL ELIXIR 1-2.5 MG/5ML	2		eql aller-ease oral tablet 180 mg	1	
eq allergy & congestion relief oral tablet extended release 12 hour 5-120 mg	1		eql allergy relief oral tablet 10 mg	1	
eq allergy childrens oral syrup 5 mg/5ml	1		eql allergy/congestion relief oral tablet extended release 24 hour 10-240 mg	1	
eq allergy relief (cetirizine) oral solution 1 mg/ml	1		fexofenadine hcl oral tablet 180 mg	1	
eq allergy relief (cetirizine) oral tablet 10 mg	1		fexofenadine-pseudoephed er oral tablet extended release 12 hour 60-120 mg	1	
eq allergy relief childrens oral solution 5 mg/5ml	1		fexofenadine-pseudoephed er oral tablet extended release 24 hour 180-240 mg	1	
eq allergy relief childrens oral syrup 5 mg/5ml	1		gnp all day allergy childrens oral solution 1 mg/ml, 5 mg/5ml	1	
eq allergy relief nasal decong oral tablet extended release 24 hour 10-240 mg	1		gnp all day allergy oral tablet 10 mg	1	
eq allergy relief oral tablet 10 mg, 180 mg	1		gnp all day allergy-d oral tablet extended release 12 hour 5-120 mg	1	
eq allergy relief oral tablet extended release 12 hour 5-120 mg	1		gnp allergy & congestion oral tablet extended release 24 hour 10-240 mg	1	

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit
gnp allergy relief oral tablet 180 mg	1		hm allergy & congestion oral tablet extended release 12 hour 5-120 mg	1	
gnp allergy/congestion relief oral tablet extended release 24 hour 10-240 mg	1		hm allergy complete-d oral tablet extended release 12 hour 5-120 mg	1	
gnp allergy-d allergy & conges oral tablet extended release 12 hour 60-120 mg	1		hm allergy relief (cetirizine) oral tablet 10 mg	1	
gnp fexofenadine/pse er oral tablet extended release 12 hour 60-120 mg	1		hm allergy relief oral tablet 180 mg	1	
gnp loratadine childrens oral solution 5 mg/5ml	1		hm allergy relief/nasal decong oral tablet extended release 24 hour 10-240 mg	1	
gnp loratadine oral syrup 5 mg/5ml	1		hm cetirizine hcl childrens oral solution 5 mg/5ml	1	
gnp loratadine oral tablet 10 mg	1		hm cetirizine hcl oral tablet 10 mg	1	
gnp loratadine oral tablet dispersible 10 mg	1		hm fexofenadine hcl oral tablet 180 mg	1	
goodsense all day allergy oral solution 5 mg/5ml	1		hm loratadine childrens oral syrup 5 mg/5ml	1	
goodsense all day allergy oral tablet 10 mg	1		hm loratadine oral tablet 10 mg	1	
goodsense all day allergy-d oral tablet extended release 12 hour 5-120 mg	1		kls allerclear d-12hr oral tablet extended release 12 hour 5-120 mg	1	
goodsense aller-ease oral tablet 180 mg	1		kls allerclear d-24hr oral tablet extended release 24 hour 10-240 mg	1	
goodsense allergy relief oral capsule 10 mg	1		kls allerclear oral tablet 10 mg	1	
goodsense allergy relief oral tablet 10 mg	1		kls aller-fex oral tablet 180 mg	1	
hm all day allergy childrens oral solution 5 mg/5ml	1		kls aller-tec childrens oral solution 5 mg/5ml	1	
hm all day allergy oral solution 5 mg/5ml	1		kls aller-tec d oral tablet extended release 12 hour 5-120 mg	1	
hm all day allergy oral tablet 10 mg	1		kls aller-tec oral tablet 10 mg	1	

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit
kp cetirizine hcl oral tablet 10 mg	1		px allergy relief d (loratid) oral tablet extended release 12 hour 5-120 mg	1	
kp fexofenadine hcl oral tablet 180 mg	1		px allergy relief d oral tablet extended release 12 hour 5-120 mg	1	
loradamed oral tablet 10 mg	1		px allergy relief d oral tablet extended release 24 hour 10-240 mg	1	
loratadine childrens oral solution 5 mg/5ml	1		px allergy relief loratadine oral tablet 10 mg	1	
loratadine childrens oral syrup 5 mg/5ml	1		px allergy relief oral tablet 180 mg	1	
loratadine childrens oral tablet chewable 5 mg	1		px allergy relief oral tablet dispersible 10 mg	1	
loratadine oral capsule 10 mg	1		px childrens allergy oral solution 5 mg/5ml	1	
loratadine oral syrup 5 mg/5ml	1		PX DAYHIST ALLERGY ORAL TABLET 1.34 MG	2	
loratadine oral tablet 10 mg	1		px dibromm cold/allergy child oral elixir 1-2.5 mg/5ml	1	
loratadine oral tablet dispersible 10 mg	1		qc all day allergy oral tablet 10 mg	1	
loratadine-d 12hr oral tablet extended release 12 hour 5-120 mg	1		qc allergy relief childrens oral syrup 1 mg/ml, 5 mg/5ml	1	
loratadine-d 24hr oral tablet extended release 24 hour 10-240 mg	1		qc allergy relief oral capsule 10 mg	1	
maxi-tuss pe oral liquid 2-5 mg/5ml	1		qc allergy relief oral tablet 10 mg, 180 mg	1	
meijer allergy relief oral tablet 10 mg	1		qc allergy relief oral tablet dispersible 10 mg	1	
meijer allergy relief oral tablet dispersible 10 mg	1		qc cetirizine allergy relief oral tablet 10 mg	1	
meijer allergy relief-d oral tablet extended release 12 hour 5-120 mg	1		qc childrens allergy oral solution 5 mg/5ml	1	
meijer loratadine oral syrup 5 mg/5ml	1		qc fexofenadine hydrochloride oral tablet 180 mg	1	
mm cetirizine hcl oral tablet 10 mg	1		qc loratadine allergy relief oral tablet 10 mg	1	
mm fexofenadine hcl oral tablet 180 mg	1				
px allergy relief cetirizine oral tablet 10 mg	1				

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit
qc loratadine-d oral tablet extended release 24 hour 10-240 mg	1		ra loratadine oral tablet 10 mg	1	
ra allergy relief & nasal decong oral tablet extended release 24 hour 10-240 mg	1		rynex pe oral elixir 1-2.5 mg/5ml	1	
ra allergy relief (cetirizine) oral tablet 10 mg	1		sb allergy oral tablet 10 mg	1	
ra allergy relief (loratadine) oral tablet 10 mg	1		sb allergy relief oral tablet dispersible 10 mg	1	
ra allergy relief childrens oral solution 1 mg/ml, 5 mg/5ml	1		sb allergy relief/nasal decong oral tablet extended release 24 hour 10-240 mg	1	
ra allergy relief childrens oral syrup 5 mg/5ml	1		sb cetirizine hcl childrens oral solution 1 mg/ml	1	
ra allergy relief childrens oral tablet chewable 5 mg	1		sb cold & allergy childrens oral elixir 1-2.5 mg/5ml	1	
ra allergy relief oral tablet 180 mg	1		sb loratadine allergy relief oral tablet 10 mg	1	
ra allergy rlf/nasal decongest oral tablet extended release 24 hour 10-240 mg	1		sb loratadine oral syrup 5 mg/5ml	1	
ra allergy/congestion oral tablet extended release 12 hour 60-120 mg	1		sb loratadine oral tablet 10 mg	1	
ra allergy/congestion relief oral tablet extended release 12 hour 5-120 mg	1		sm all day allergy childrens oral solution 5 mg/5ml	1	
ra allergy/congestion relief-d oral tablet extended release 12 hour 5-120 mg	1		sm all day allergy oral tablet 10 mg	1	
ra cetiri-d oral tablet extended release 12 hour 5-120 mg	1		sm all day allergy relief oral tablet 10 mg	1	
ra lorata-d oral tablet extended release 24 hour 10-240 mg	1		sm all day allergy-d oral tablet extended release 12 hour 5-120 mg	1	
ra loratadine oral syrup 5 mg/5ml	1		sm allergy childrens oral syrup 5 mg/5ml	1	
			sm allergy relief oral tablet 1.34 mg	1	
			sm allergy relief oral tablet dispersible 10 mg	1	
			sm childrens loratadine oral syrup 5 mg/5ml	1	
			sm cold & allergy childrens oral elixir 1-2.5 mg/5ml	1	

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit
sm fexofenadine hcl oral tablet 180 mg	1		wal-itin d 24 hour oral tablet extended release 24 hour 10-240 mg	1	
sm loratadine allergy relief oral tablet dispersible 10 mg	1		wal-itin d oral tablet extended release 12 hour 5-120 mg	1	
sm loratadine d 12hr oral tablet extended release 12 hour 5-120 mg	1		wal-itin oral syrup 5 mg/5ml	1	
sm loratadine d oral tablet extended release 12 hour 5-120 mg	1		wal-itin oral tablet 10 mg	1	
sm lorata-dine d oral tablet extended release 24 hour 10-240 mg	1		wal-itin oral tablet dispersible 10 mg	1	
sm loratadine oral syrup 5 mg/5ml	1		wal-vert oral tablet dispersible 10 mg	1	
sm loratadine oral tablet 10 mg	1		wal-zyr all day allergy child oral solution 5 mg/5ml	1	
tgt allergy relief oral tablet 180 mg	1		wal-zyr allergy childrens oral solution 1 mg/ml	1	
TRIAMINIC ALLERCHEWS ORAL TABLET DISPERSIBLE 10 MG	2		wal-zyr childrens oral solution 1 mg/ml, 5 mg/5ml	1	
wal-fex allergy oral tablet 180 mg	1		wal-zyr d oral tablet extended release 12 hour 5-120 mg	1	
wal-fex d allergy & congestion oral tablet extended release 12 hour 60-120 mg	1		wal-zyr oral solution 5 mg/5ml	1	
wal-fex d allergy & congestion oral tablet extended release 24 hour 180-240 mg	1		wal-zyr oral tablet 10 mg	1	
wal-fex oral tablet 180 mg	1		ZYRTEC ALLERGY ORAL TABLET 10 MG	2	
wal-itin allergy childrens oral tablet chewable 5 mg	1		ZYRTEC CHILDRENS ALLERGY ORAL SOLUTION 1 MG/ML, 5 MG/5ML	2	
wal-itin allergy reditabs oral tablet dispersible 10 mg	1		ZYRTEC-D ALLERGY & CONGESTION ORAL TABLET EXTENDED RELEASE 12 HOUR 5-120 MG	2	
wal-itin aller-melts oral tablet dispersible 10 mg	1		Respiratory Tract Agents, Other		
wal-itin childrens oral solution 5 mg/5ml	1		actidom dmx oral liquid 10-30-200 mg/5ml	1	
			altarussin dm oral syrup 100-10 mg/5ml	1	

Drug Name	Drug Tier	Quantity Limit
benzonatate oral capsule 100 mg, 150 mg, 200 mg	1	
biocotron oral liquid 10-100 mg/5ml	1	
biogtuss oral liquid 10-15-300 mg/5ml	1	
chest congestion relief dm oral syrup 10-100 mg/5ml	1	
cough/chest congestion 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	1	
despec eda oral liquid 2.5-5-50 mg/ml	1	
dextromethorphan-guaifenesin oral liquid 10-100 mg/5ml, 20-200 mg/10ml	1	
dextromethorphan-guaifenesin oral syrup 10-100 mg/5ml	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	
eq 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 syrup 10-100 mg/5ml	1	
GILPHEX TR ORAL TABLET 10-388 MG	2	

Drug Name	Drug Tier	Quantity Limit
giltuss cough & chest children oral liquid 10-100 mg/5ml	1	
giltuss cough & chest oral liquid 20-200 mg/10ml	1	
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	
gnp tussin dm oral liquid 20-200 mg/10ml	1	
g-supress dx pediatric oral liquid 2.5-5-50 mg/ml	1	
guaiasorb dm oral liquid 10-100 mg/5ml	1	
guaiatussin ac oral syrup 100-10 mg/5ml	1	
guaicon dms oral syrup 100-10 mg/5ml	1	
guaifenesin ac oral syrup 100-10 mg/5ml	1	
guaifenesin-codeine oral solution 100-10 mg/5ml	1	
guaifenesin-dm oral liquid 10-100 mg/5ml	1	
guaifenesin-dm oral syrup 100-10 mg/5ml	1	
hm tussin adult dm oral liquid 100-10 mg/5ml	1	

Drug Name	Drug Tier	Quantity Limit	Drug Name	Drug Tier	Quantity Limit
HYCODAN ORAL SOLUTION 5-1.5 MG/5ML	3		promethazine-dm oral syrup 6.25-15 mg/5ml	1	
HYCODAN ORAL TABLET 5-1.5 MG	3		promethazine-phenyleph-codeine oral syrup 6.25-5-10 mg/5ml	1	
hydrocodone bit-homatrop mbr oral solution 5-1.5 mg/5ml	1		pseudoephedrine-bromphen-dm oral syrup 30-2-10 mg/5ml	1	
hydrocodone bit-homatrop mbr oral tablet 5-1.5 mg	1		px tussin dm oral liquid 100-10 mg/5ml	1	
hydrocodone polst-chlorphen polst er susp oral suspension extended release 10-8 mg/5ml	1		qc tussin dm cough/congestion oral liquid 10-100 mg/5ml, 20-200 mg/10ml	1	
hydromet oral solution 5-1.5 mg/5ml	1		ra tussin cgh/chest congest dm oral liquid 100-10 mg/5ml	1	
HYPERSAL INHALATION NEBULIZATION SOLUTION 3.5 %, 7 %	3		ra tussin cough dm sugar free oral syrup 100-10 mg/5ml	1	
maxi-tuss ac oral solution 100-10 mg/5ml	1		ra tussin cough oral liquid 10-100 mg/5ml	1	
maxi-tuss g oral liquid 10-100 mg/5ml	1		ra tussin dm oral liquid 100-10 mg/5ml	1	
M-CLEAR WC ORAL SOLUTION 100-6.3 MG/5ML	2		robafen dm cgh/chest congest oral liquid 10-100 mg/5ml	1	
medi-tussin dm oral syrup 100-10 mg/5ml	1		robafen dm cough oral liquid 10-100 mg/5ml	1	
NEBUSAL INHALATION NEBULIZATION SOLUTION 6 %	3		robafen dm peak cold cgh/cong oral liquid 10-100 mg/5ml	1	
NEOTUSS PLUS ORAL LIQUID 7.5-4-30 MG/5ML	2		SAFE TUSSIN DM ORAL LIQUID 100-10 MG/5ML	2	
promethazine vc/codeine oral syrup 6.25-5-10 mg/5ml	1		siltussin dm das oral liquid 100-10 mg/5ml	1	
promethazine-codeine oral solution 6.25-10 mg/5ml	1		siltussin-dm alcohol free oral syrup 100-10 mg/5ml	1	
promethazine-codeine oral syrup 6.25-10 mg/5ml	1		sm tussin cough/chest congest oral liquid 20-200 mg/10ml	1	
			sm tussin cough/chest congest oral syrup 100-10 mg/5ml	1	

Drug Name	Drug Tier	Quantity Limit
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	1	
sorbutuss nr oral liquid 10-100 mg/5ml	1	
SSKI ORAL SOLUTION 1 GM/ML	2	
supress-dx pediatric oral liquid 2.5-5-50 mg/ml	1	
TESSALON PERLES ORAL CAPSULE 100 MG	3	
TUSNEL C ORAL SYRUP 30-10-100 MG/5ML	2	
tusnel diabetic oral liquid 10-100 mg/5ml	1	
TUSSICAPS ORAL CAPSULE EXTENDED RELEASE 12 HOUR 10-8 MG	2	
tussin cough+chest cong 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 oral liquid 10-100 mg/5ml	1	
tussin dm oral liquid 100-10 mg/5ml, 20-200 mg/10ml	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	

Drug Name	Drug Tier	Quantity Limit
virtussin a/c oral solution 100-10 mg/5ml	1	
virtussin ac w/alc oral liquid 100-10 mg/5ml	1	
VIRTUSSIN DAC ORAL SOLUTION 30-10-100 MG/5ML	2	
wal-tussin cough/chest dm oral syrup 100-10 mg/5ml	1	
wal-tussin dm cgh/chest cong oral liquid 100-10 mg/5ml	1	

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200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201

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Multi-language interpreter services

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Please call the toll-free phone number listed on your identification card.

ATENCIÓN: Si habla **español (Spanish)**, hay servicios de asistencia de idiomas, sin cargo, a su disposición. Llame al número de teléfono gratuito que aparece en su tarjeta de identificación.

請注意：如果您說**中文 (Chinese)**，我們免費為您提供語言協助服務。請撥打會員卡所列的免付費會員電話號碼。

XIN LƯU Ý: Nếu quý vị nói tiếng **Việt (Vietnamese)**, quý vị sẽ được cung cấp dịch vụ trợ giúp về ngôn ngữ miễn phí. Vui lòng gọi số điện thoại miễn phí ở mặt sau thẻ hội viên của quý vị.

알림: 한국어(**Korean**)를 사용하시는 경우 언어 지원 서비스를 무료로 이용하실 수 있습니다. 귀하의 신분증 카드에 기재된 무료 회원 전화번호로 문의하십시오.

PAALALA: Kung nagsasalita ka ng **Tagalog (Tagalog)**, may makukuha kang mga libreng serbisyo ng tulong sa wika. Pakitawagan ang toll-free na numero ng telepono na nasa iyong identification card.

ВНИМАНИЕ: бесплатные услуги перевода доступны для людей, чей родной язык является **русском (Russian)**. Позвоните по бесплатному номеру телефона, указанному на вашей идентификационной карте.

تنبيه: إذا كنت تتحدث **العربية (Arabic)**، فإن خدمات المساعدة اللغوية المجانية متاحة لك. الرجاء الاتصال على رقم الهاتف المجاني الموجود على معرف العضوية.

ATANSYON: Si w pale **Kreyòl ayisyen (Haitian Creole)**, ou kapab benefisyè sèvis ki gratis pou ede w nan lang pa w. Tanpri rele nimewo gratis ki sou kat idantifikasyon w.

ATTENTION : Si vous parlez **français (French)**, des services d'aide linguistique vous sont proposés gratuitement. Veuillez appeler le numéro de téléphone gratuit figurant sur votre carte d'identification.

UWAGA: Jeżeli mówisz po **polsku (Polish)**, udostępniłiśmy darmowe usługi tłumacza. Prosimy zadzwonić pod bezpłatny numer telefonu podany na karcie identyfikacyjnej.

ATENÇÃO: Se você fala **português (Portuguese)**, contate o serviço de assistência de idiomas gratuito. Ligue gratuitamente para o número encontrado no seu cartão de identificação.

ATTENZIONE: in caso la lingua parlata sia l'**italiano (Italian)**, sono disponibili servizi di assistenza linguistica gratuiti. Per favore chiamate il numero di telefono verde indicato sulla vostra tessera identificativa.

ACHTUNG: Falls Sie **Deutsch (German)** sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Bitte rufen Sie die gebührenfreie Rufnummer auf der Rückseite Ihres Mitgliedsausweises an.

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をご利用いただけます。健康保険証に記載されているフリーダイヤルにお電話ください。

توجه: اگر زبان شما فارسی (**Farsi**) است، خدمات امداد زبانی به طور رایگان در اختیار شما می باشد. لطفا با شماره تلفن رایگانی که روی کارت شناسایی شما قید شده تماس بگیرید.

ध्यान दें: यदि आप **हिंदी (Hindi)** बोलते हैं, आपको भाषा सहायता सेवाएं, नःशुल्क उपलब्ध हैं। कृपया अपने पहचान पत्र पर सूचीबद्ध टोल-फ्री फोन नंबर पर काल करें।

CEEB TOOM: Yog koj hais Lus **Hmoob (Hmong)**, muaj kev pab txhais lus pub dawb rau koj. Thov hu rau tus xov tooj hu deb dawb uas teev muaj nyob rau ntawm koj daim yuaj cim qhia tus kheej.

ចំណាប់អារម្មណ៍: បើសិនអ្នកនិយាយភាសាខ្មែរ(**Khmer**)សម្រាប់ជំនួយភាសាដោយឥតគិតថ្លៃ គឺមានសំរាប់អ្នក។ សូមទូរស័ព្ទទៅលេខឥតគិតថ្លៃ ដល់មានលេខស័ព្ទសម្រាប់ជំនួយរបស់អ្នក។

PAKDAAR: Nu saritaem ti **Ilocano (Ilocano)**, ti serbisyo para ti baddang ti lengguahe nga awanan bayadna, ket sidadaan para kenyam. Maidawat nga awagan iti toll-free a numero ti telepono nga nakalista ayan iti identification card mo.

DÍÍ BAA'ÁKONÍNÍZIN: **Diné (Navajo)** bizaad bee yáníłti'go, saad bee áka'anída'awo'ígíí, t'áá jííł'eh, bee ná'ahóót'i'. T'áá shqódi ninaaltsoos nitł'izí bee nééhozinígíí bine'déę' t'áá jííł'ehgo béésh bee hane'í biká'ígíí bee hodíilnih.

OGOW: Haddii aad ku hadasho **Soomaali (Somali)**, adeegyada taageerada luqadda, oo bilaash ah, ayaad heli kartaa. Fadlan wac lambarka telefonka khadka bilaashka ee ku yaalla kaarkaaga aqoonsiga.



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