



# **Aetna Better Health of Virginia Formulary Guide January 2024**

<http://www.aetnabetterhealth.com/Virginia>

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## What is the Aetna Better Health of Virginia Formulary?

This is a drug list created by Aetna Better Health of Virginia. The plan will cover drugs on this list. Some drugs may have coverage rules. If the rules for that drug are met, the plan will cover the drug. Drugs must also be filled at a plan network pharmacy.

## Can the Plan's Drug List change?

The plan may add or remove drugs on the list. All drug removals from the formulary will be sent to the state for review before the change is made. Utilizing members and their providers will be notified at least 30 days before a drug is removed from the formulary. All changes to the formulary will be posted on the plan's website.

## How do I use the Plan's Formulary?

- **Column #1:** lists the covered drug. Brand drugs are in upper case letters (e.g., DRUG). Generics are in lower case letters (e.g., drug).
- **Column #2:** shows brand drug for the generic; *brand drugs are not covered if generic equivalent is available.*
- **Column #3:** tells you if drug has a need for prior authorization or other restrictions

Drugs are also grouped by drug class. If you know what class your drug is in, please look for that class name in the table of contents. Then look under that page for your drug.

## What are generic drugs?

The plan covers both brand and generic drugs. Generic drugs cost less and are approved by the Food and Drug Administration (FDA).

## Are Over-The-Counter (OTC) drugs covered?

The plan will cover OTC drugs on the formulary. Some OTC drugs may have coverage rules. If the rules for that OTC drug are met, the plan will cover the OTC drug. Like other drugs, OTC drugs need a prescription from a doctor if they are to be covered by the plan.

## Are there Medication Copays?

Refer to member handbook for copay information.



### What are some types of coverage rules?

- **Prior Approval (PA):** This means your doctor will need to get approval from the plan first before the drug can be filled at the pharmacy. If it is not approved, the plan will not cover the drug.
- **Quantity Level Limits (QLL):** This means there is a limit on the amount of drug the plan will cover. For example, the plan provides 60 pills in 30 days for some drugs.
- **Step Therapy (ST):** This means you may need to try certain drugs first to treat your condition. After the first drug is tried, the plan will then cover the other drug for that same condition. For example, Drug A and Drug B may treat your condition. The plan may not cover Drug B unless you try Drug A first. If Drug A does not work for you, then Drug B will be covered.

### What if my drug is not on the plan's Formulary?

First, please call your doctor and ask if your drug is covered. If the plan does not cover the drug, then:

- Ask your doctor for a similar drug that is covered.
- Your doctor can ask the plan to cover your drug through the prior approval process.

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CURRENT AS OF 10/1/2023

| Formulary Drug Name  | Reference                   | Restrictions  |
|--|-----------------------------|---|
| <b>*Adhd/Anti-Narcolepsy/Anti-Obesity/Anorexiant*</b>  |                             |   |
| <b>*Adhd Agent - Selective Alpha Adrenergic Agonists***</b>  |                             |   |
| <i>clonidine hcl er oral tablet extended release 12 hour 0.1 mg</i>                                | Kapvay                      |   |
| <i>guanfacine hcl er oral tablet extended release 24 hour 1 mg, 2 mg, 3 mg, 4 mg</i>               | Intuniv                     |   |
| <b>*Adhd Agent - Selective Norepinephrine Reuptake Inhibitor***</b>                                |                             |   |
| <i>atomoxetine hcl oral capsule 10 mg, 100 mg, 18 mg, 25 mg, 40 mg, 60 mg, 80 mg</i>               | Strattera                   | QLL (1 EA per 1 day)                                    |
| <b>*Amphetamine Mixtures***</b>  |                             |   |
| <b>ADDERALL XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 15 MG, 5 MG</b>                        | amphetamine-dextroamphet er | QLL (1 EA per 1 day); AL (Min 4 Years and Max 17 Years) |
| <b>ADDERALL XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 20 MG, 25 MG, 30 MG</b>                       | amphetamine-dextroamphet er | QLL (2 EA per 1 day); AL (Min 4 Years and Max 17 Years) |
| <i>amphetamine-dextroamphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 20 mg, 30 mg, 5 mg, 7.5 mg</i> | Adderall                    | AL (Min 4 Years and Max 17 Years)                       |
| <b>*Amphetamines***</b>  |                             |   |
| <i>dextroamphetamine sulfate oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 5 mg</i>                      | Zenzedi                     | AL (Min 4 Years and Max 17 Years)                       |
| <b>VYVANSE ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG, 50 MG, 60 MG, 70 MG</b>                        | lisdexamfetamine dimesylate | QLL (1 EA per 1 day); AL (Min 4 Years and Max 17 Years) |
| <b>VYVANSE ORAL TABLET CHEWABLE 10 MG, 20 MG, 30 MG, 40 MG, 50 MG, 60 MG</b>                       | lisdexamfetamine dimesylate | QLL (1 EA per 1 day); AL (Min 4 Years and Max 17 Years) |
| <b>*Analeptics***</b>  |                             |   |
| <b>CAFFEINE ANHYDROUS POWDER</b>   |                             |   |
| <i>caffeine citrate oral solution 20 mg/ml, 60 mg/3ml</i>  |                             |   |
| <b>*Anorexiant Non-Amphetamine***</b>  |                             |   |
| <i>benzphetamine hcl oral tablet 25 mg, 50 mg</i>  |                             | PA  |

| <b>Formulary Drug Name</b>   | <b>Reference</b>             | <b>Restrictions</b>                                     |
|--|------------------------------|---|
| <i>diethylpropion hcl er oral tablet extended release 24 hour 75 mg</i>  |                              | PA  |
| <i>diethylpropion hcl oral tablet 25 mg</i>  |                              | PA  |
| <b>LOMAIRA ORAL TABLET 8 MG</b>  |                              | PA  |
| <i>phendimetrazine tartrate er oral capsule extended release 24 hour 105 mg</i>  |                              | PA  |
| <i>phendimetrazine tartrate oral tablet 35 mg</i>  |                              | PA  |
| <i>phentermine hcl oral capsule 15 mg, 30 mg, 37.5 mg</i>  |                              | PA  |
| <i>phentermine hcl oral tablet 37.5 mg</i>   | Adipex-P                     | PA  |
| <b>*Anti-Obesity - Glp-1 Receptor Agonists***</b>  |                              |   |
| <b>SAXENDA SUBCUTANEOUS SOLUTION PEN-INJECTOR 18 MG/3ML</b>  |                              | PA; AL (Min 12 Years)                                   |
| <b>WEGOVY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.25 MG/0.5ML, 0.5 MG/0.5ML, 1 MG/0.5ML, 1.7 MG/0.75ML, 2.4 MG/0.75ML</b>      |                              | PA; AL (Min 12 Years)                                   |
| <b>*Anti-Obesity Agent Combinations**</b>  |                              |   |
| <b>CONTRAVE ORAL TABLET EXTENDED RELEASE 12 HOUR 8-90 MG</b>   |                              | PA; AL (Min 18 Years)                                   |
| <b>*Lipase Inhibitors***</b>   |                              |   |
| <b>ALLI ORAL CAPSULE 60 MG</b>   |                              | PA; OTC   |
| <i>orlistat oral capsule 120 mg</i>  | Xenical                      | PA; AL (Min 12 Years)                                   |
| <b>XENICAL ORAL CAPSULE 120 MG</b>   | orlistat                     | PA; AL (Min 12 Years)                                   |
| <b>*Stimulants - Misc.***</b>  |                              |   |
| <b>CONCERTA ORAL TABLET EXTENDED RELEASE 18 MG, 27 MG, 54 MG</b>   | methylphenidate hcl er (osm) | QLL (1 EA per 1 day); AL (Min 4 Years and Max 17 Years) |
| <b>CONCERTA ORAL TABLET EXTENDED RELEASE 36 MG</b>   | methylphenidate hcl er (osm) | QLL (2 EA per 1 day); AL (Min 4 Years and Max 17 Years) |
| <b>DAYTRANA TRANSDERMAL PATCH 10 MG/9HR, 15 MG/9HR, 20 MG/9HR, 30 MG/9HR</b>   | methylphenidate              | QLL (1 EA per 1 day); AL (Min 4 Years and Max 17 Years) |
| <i>dexmethylphenidate hcl er oral capsule extended release 24 hour 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg, 5 mg</i> | Focalin XR                   | QLL (1 EA per 1 day); AL (Min 4 Years and Max 17 Years) |
| <i>dexmethylphenidate hcl oral tablet 10 mg, 2.5 mg, 5 mg</i>  | Focalin                      | AL (Min 4 Years and Max 17 Years)                       |
| <i>methylphenidate hcl oral solution 10 mg/5ml, 5 mg/5ml</i>   | Methylin                     | AL (Min 4 Years and Max 17 Years)                       |

| <b>Formulary Drug Name</b>                                      | <b>Reference</b>   | <b>Restrictions</b>               |
|---|--------------------|-----------------------------------|
| <i>methylphenidate hcl oral tablet 10 mg, 20 mg, 5 mg</i>       | Ritalin            | AL (Min 4 Years and Max 17 Years) |
| <b>*Alternative Medicines*</b>                                  |                    |                                   |
| <b>*Alternative Medicine - Co's***</b>                          |                    |                                   |
| <b>CHEW Q ORAL TABLET CHEWABLE 100 MG</b>                       | co q-10            | OTC                               |
| <i>co q 10 oral capsule 10 mg, 60 mg</i>                        |                    | OTC                               |
| <i>co q 10 oral capsule 100 mg</i>                              | Pronutrients CoQ10 | OTC                               |
| <i>co q10 maximum strength oral capsule 200 mg</i>              | Q-Sorb Co Q-10     | OTC                               |
| <i>co q-10 maximum strength oral capsule 400 mg</i>             |                    | OTC                               |
| <i>co q10 oral capsule 100 mg</i>                               | Pronutrients CoQ10 | OTC                               |
| <i>co q-10 oral capsule 100 mg</i>                              | Pronutrients CoQ10 | OTC                               |
| <i>co q-10 oral capsule 150 mg, 30 mg, 400 mg, 50 mg, 75 mg</i> |                    | OTC                               |
| <i>co q10 oral capsule 200 mg</i>                               | Q-Sorb Co Q-10     | OTC                               |
| <i>co q-10 oral capsule 200 mg</i>                              | Q-Sorb Co Q-10     | OTC                               |
| <i>co q10 oral capsule 30 mg, 60 mg</i>                         |                    | OTC                               |
| <b>CO Q-10 ORAL CAPSULE 300 MG</b>                              |                    | OTC                               |
| <i>coenzyme q10 oral capsule 10 mg, 30 mg, 50 mg, 60 mg</i>     |                    | OTC                               |
| <i>coenzyme q10 oral capsule 100 mg</i>                         | Pronutrients CoQ10 | OTC                               |
| <i>coenzyme q-10 oral capsule 100 mg</i>                        | Pronutrients CoQ10 | OTC                               |
| <i>co-enzyme q10 oral capsule 100 mg</i>                        | Pronutrients CoQ10 | OTC                               |
| <i>co-enzyme q-10 oral capsule 100 mg</i>                       | Pronutrients CoQ10 | OTC                               |
| <i>coenzyme q10 oral capsule 200 mg</i>                         | Q-Sorb Co Q-10     | OTC                               |
| <i>coenzyme q-10 oral capsule 200 mg</i>                        | Q-Sorb Co Q-10     | OTC                               |
| <i>co-enzyme q10 oral capsule 200 mg</i>                        | Q-Sorb Co Q-10     | OTC                               |
| <i>co-enzyme q-10 oral capsule 30 mg, 50 mg, 60 mg</i>          |                    | OTC                               |
| <i>coenzyme q-10 oral capsule 60 mg</i>                         |                    | OTC                               |
| <b>COENZYME Q10 ORAL TABLET 100 MG, 50 MG</b>                   |                    | OTC                               |
| <b>COQ10 GUMMIES ADULT ORAL TABLET CHEWABLE 50 MG</b>           |                    | OTC                               |
| <i>coq10 maximum strength oral capsule 400 mg</i>               |                    | OTC                               |
| <i>coq10 oral capsule 100 mg</i>                                | Pronutrients CoQ10 | OTC                               |
| <i>coq-10 oral capsule 100 mg</i>                               | Pronutrients CoQ10 | OTC                               |
| <i>coq-10 oral capsule 150 mg, 30 mg, 400 mg, 50 mg</i>         |                    | OTC                               |



| <b>Formulary Drug Name</b>                             | <b>Reference</b>   | <b>Restrictions</b> |
|--|--------------------|---------------------|
| <i>coq10 oral capsule 200 mg</i>                       | Q-Sorb Co Q-10     | OTC                 |
| <i>coq10 oral capsule 30 mg, 400 mg, 50 mg</i>         |                    | OTC                 |
| <b>COQ-10 ORAL CAPSULE EXTENDED RELEASE 100 MG</b>     |                    | OTC                 |
| <i>cvs coenzyme q-10 oral capsule 100 mg</i>           | Pronutrients CoQ10 | OTC                 |
| <i>cvs coq-10 oral capsule 200 mg</i>                  | Q-Sorb Co Q-10     | OTC                 |
| <i>cvs coq-10 oral capsule 400 mg</i>                  |                    | OTC                 |
| <i>eql coq10 oral capsule 100 mg</i>                   | Pronutrients CoQ10 | OTC                 |
| <i>eql coq10 oral capsule 200 mg</i>                   | Q-Sorb Co Q-10     | OTC                 |
| <i>eql coq10 oral capsule 400 mg</i>                   |                    | OTC                 |
| <i>gnp co q10 oral capsule 100 mg</i>                  | Pronutrients CoQ10 | OTC                 |
| <i>gnp co q10 oral capsule 200 mg</i>                  | Q-Sorb Co Q-10     | OTC                 |
| <i>gnp co q10 oral capsule 60 mg</i>                   |                    | OTC                 |
| <i>gnp coenzyme q-10 oral capsule 100 mg</i>           | Pronutrients CoQ10 | OTC                 |
| <i>h2q oral capsule 100 mg</i>                         | Pronutrients CoQ10 | OTC                 |
| <i>hm coq10 oral capsule 100 mg</i>                    | Pronutrients CoQ10 | OTC                 |
| <i>hm coq10 oral capsule 50 mg</i>                     |                    | OTC                 |
| <i>mega coq10 oral capsule 30 mg, 400 mg</i>           |                    | OTC                 |
| <b>NEOQ10 ORAL CAPSULE 125 MG</b>                      |                    | OTC                 |
| <i>pa coenzyme q-10 oral capsule 400 mg</i>            |                    | OTC                 |
| <i>pronutrients coq10 oral capsule 100 mg</i>          | Pronutrients CoQ10 | OTC                 |
| <i>q-gel forte oral capsule 30 mg</i>                  |                    | OTC                 |
| <i>q-gel mega oral capsule 100 mg</i>                  | Pronutrients CoQ10 | OTC                 |
| <i>q-gel ultra oral capsule 60 mg</i>                  |                    | OTC                 |
| <i>q-sorb co q-10 oral capsule 100 mg</i>              | Pronutrients CoQ10 | OTC                 |
| <i>q-sorb co q-10 oral capsule 200 mg</i>              | Q-Sorb Co Q-10     | OTC                 |
| <i>q-sorb oral capsule 150 mg, 30 mg, 50 mg, 75 mg</i> |                    | OTC                 |
| <i>q-sorb oral capsule 200 mg</i>                      | Q-Sorb Co Q-10     | OTC                 |
| <i>ra coenzyme q-10 oral capsule 100 mg</i>            | Pronutrients CoQ10 | OTC                 |
| <i>ra coenzyme q-10 oral capsule 200 mg</i>            | Q-Sorb Co Q-10     | OTC                 |
| <i>sm coenzyme q-10 oral capsule 100 mg</i>            | Pronutrients CoQ10 | OTC                 |
| <i>sm coq-10 oral capsule 50 mg</i>                    |                    | OTC                 |
| <i>yl coenzyme q10 oral capsule 30 mg</i>              |                    | OTC                 |
| <b>*Alternative Medicine - Cr's***</b>                 |                    |                     |
| <i>cranberry concentrate oral capsule 500 mg</i>       | Cran-Max           | OTC                 |
| <i>cranberry oral capsule 200 mg</i>                   | Ellura             | OTC                 |
| <i>cranberry oral capsule 250 mg, 425 mg</i>           |                    | OTC                 |
| <i>cranberry oral tablet 300 mg, 500 mg</i>            |                    | OTC                 |

| <b>Formulary Drug Name</b>                              | <b>Reference</b>   | <b>Restrictions</b> |
|---|--------------------|---------------------|
| <i>cvs cranberry oral capsule 500 mg</i>                | Cran-Max           | OTC                 |
| <b>ELLURA ORAL CAPSULE 200 MG</b>                       | cranberry          | OTC                 |
| <i>ra cranberry oral capsule 425 mg</i>                 |                    | OTC                 |
| <i>sm cranberry oral tablet 300 mg</i>                  |                    | OTC                 |
| <i>sm cranberry ultra strength oral tablet 500 mg</i>   |                    | OTC                 |
| <b>THERACRAN HP FOR KIDS ORAL TABLET CHEWABLE 50 MG</b> |                    | OTC                 |
| <b>THERACRAN HP ORAL CAPSULE 180 MG</b>                 |                    | OTC                 |
| <b>*Alternative Medicine - Ga's***</b>                  |                    |                     |
| <i>cvs garlic oral tablet delayed release 400 mg</i>    | Garlique           | OTC                 |
| <i>garlic oil 1500 oral capsule 3 mg</i>                |                    | OTC                 |
| <i>garlic oil oral capsule 2 mg, 3 mg, 500 mg</i>       |                    | OTC                 |
| <i>garlic oil oral tablet 500 mg</i>                    | SM Garlic          | OTC                 |
| <i>garlic oral capsule 1000 mg, 500 mg</i>              |                    | OTC                 |
| <i>garlic oral tablet 200 mg</i>                        |                    | OTC                 |
| <i>garlic oral tablet 400 mg</i>                        |                    | OTC                 |
| <i>garlic oral tablet delayed release 2000 mg</i>       |                    | OTC                 |
| <b>GARLIQUE ORAL TABLET DELAYED RELEASE 400 MG</b>      | cvs garlic         | OTC                 |
| <i>odor free garlic oral tablet 100 mg</i>              |                    | OTC                 |
| <i>odorless garlic oral capsule 300 mg</i>              |                    | OTC                 |
| <i>odorless garlic oral tablet 1250 mg</i>              |                    | OTC                 |
| <i>ra garlic oral capsule 580 mg</i>                    |                    | OTC                 |
| <b>SM GARLIC ORAL TABLET 150 MG</b>                     |                    | OTC                 |
| <b>SM GARLIC ORAL TABLET 500 MG</b>                     | garlic oil         | OTC                 |
| <b>*Alternative Medicine - GI's***</b>                  |                    |                     |
| <i>cidatrine oral tablet 500 mg</i>                     |                    | OTC                 |
| <i>cvs glucosamine sulfate oral capsule 1000 mg</i>     |                    | OTC                 |
| <i>dona oral tablet 750 mg</i>                          | OptiFlex-G         | OTC                 |
| <i>genicin oral capsule 500 mg</i>                      | Glucosamine Relief | OTC                 |
| <i>glucosamine oral capsule 500 mg</i>                  | Glucosamine Relief | OTC                 |
| <i>glucosamine relief oral capsule 500 mg</i>           | Glucosamine Relief | OTC                 |
| <i>glucosamine sulfate oral capsule 1000 mg</i>         |                    | OTC                 |
| <i>glucosamine sulfate oral capsule 500 mg</i>          | Glucosamine Relief | OTC                 |
| <i>glucosamine sulfate oral tablet 500 mg</i>           |                    | OTC                 |
| <i>glucosamine sulfate oral tablet 750 mg</i>           | OptiFlex-G         | OTC                 |
| <i>optiflex-g oral tablet 750 mg</i>                    | OptiFlex-G         | OTC                 |
| <i>ra glucosamine sulfate oral tablet 500 mg</i>        |                    | OTC                 |

| <b>Formulary Drug Name</b>                                       | <b>Reference</b>              | <b>Restrictions</b> |
|--|-------------------------------|---------------------|
| <i>synovacin oral capsule 500 mg</i>                             | Glucosamine Relief            | OTC                 |
| <b>*Alternative Medicine - Kr's***</b>                           |                               |                     |
| <i>krill oil oral capsule 300 mg</i>                             | SM MegaKrill                  | OTC                 |
| <b>*Alternative Medicine - Me's***</b>                           |                               |                     |
| <i>cvs melatonin extra strength oral liquid 5 mg/15ml</i>        |                               | OTC                 |
| <i>cvs melatonin oral capsule 10 mg, 5 mg</i>                    |                               | OTC                 |
| <i>cvs melatonin oral liquid 5 mg/15ml</i>                       |                               | OTC                 |
| <i>cvs melatonin oral tablet 3 mg, 5 mg</i>                      |                               | OTC                 |
| <b>CVS MELATONIN ORAL TABLET CHEWABLE 5 MG</b>                   |                               | OTC                 |
| <i>cvs melatonin oral tablet dispersible 10 mg</i>               |                               | OTC                 |
| <i>cvs melatonin sublingual tablet sublingual 10 mg, 5 mg</i>    |                               | OTC                 |
| <i>cvs quality sleep oral capsule 10 mg</i>                      |                               | OTC                 |
| <i>gnp melatonin maximum strength oral tablet 5 mg</i>           |                               | OTC                 |
| <i>gnp melatonin oral tablet 3 mg</i>                            |                               | OTC                 |
| <i>hm melatonin quick dissolve oral tablet dispersible 10 mg</i> |                               | OTC                 |
| <i>kp melatonin oral tablet 3 mg</i>                             |                               | OTC                 |
| <b>MELADOX ORAL TABLET EXTENDED RELEASE 3 MG</b>                 |                               | OTC                 |
| <i>melatonin er oral tablet extended release 10 mg</i>           |                               | OTC                 |
| <b>MELATONIN ER ORAL TABLET EXTENDED RELEASE 3 MG, 5 MG</b>      |                               | OTC                 |
| <i>melatonin extra strength oral liquid 5 mg/15ml</i>            |                               | OTC                 |
| <b>MELATONIN FAST MELTZ ORAL TABLET DISPERSIBLE 500 MCG</b>      |                               | OTC                 |
| <i>melatonin gummies oral tablet chewable 2.5 mg</i>             | VitaJoy Gummies               | OTC                 |
| <i>melatonin maximum strength oral tablet 5 mg</i>               |                               | OTC                 |
| <i>melatonin oral capsule 10 mg, 5 mg</i>                        |                               | OTC                 |
| <b>MELATONIN ORAL LIQUID 1 MG/4ML, 2.5 MG/10ML</b>               |                               | OTC                 |
| <i>melatonin oral liquid 1 mg/ml</i>                             | Zarbees Sleep Child/Melatonin | OTC                 |
| <i>melatonin oral tablet 1 mg, 10 mg, 3 mg, 300 mcg, 5 mg</i>    |                               | OTC                 |
| <i>melatonin oral tablet chewable 2.5 mg</i>                     | VitaJoy Gummies               | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b> | <b>Restrictions</b> |
|---|------------------|---------------------|
| <i>melatonin oral tablet dispersible 10 mg, 3 mg, 5 mg</i>            |                  | OTC                 |
| <b>MELATONIN SUBLINGUAL TABLET SUBLINGUAL 10 MG, 3 MG</b>             |                  | OTC                 |
| <i>melatonin sublingual tablet sublingual 5 mg</i>                    |                  | OTC                 |
| <b>MELATONIN TR ORAL TABLET EXTENDED RELEASE 1 MG</b>                 |                  | OTC                 |
| <i>melatonin tr oral tablet extended release 10 mg</i>                |                  | OTC                 |
| <i>pa melatonin oral tablet 5 mg</i>                                  |                  | OTC                 |
| <i>ra melatonin oral tablet 10 mg, 3 mg, 5 mg</i>                     |                  | OTC                 |
| <b>RA MELATONIN SUBLINGUAL TABLET SUBLINGUAL 1 MG</b>                 |                  | OTC                 |
| <i>sm melatonin oral tablet 3 mg</i>                                  |                  | OTC                 |
| <i>sm melatonin oral tablet dispersible 5 mg</i>                      |                  | OTC                 |
| <i>vitajoy gummies oral tablet chewable 2.5 mg</i>                    | VitaJoy Gummies  | OTC                 |
| <b>*Alternative Medicine - St's***</b>                                |                  |                     |
| <b>STEVIA ORAL PACKET 100 MG</b>                                      |                  | OTC                 |
| <b>*Alternative Medicine - Ub***</b>                                  |                  |                     |
| <b>ULTRA COQ10 ORAL CAPSULE 75 MG</b>                                 |                  | OTC                 |
| <b>*Alternative Medicine Combinations - Four Ingredients***</b>       |                  |                     |
| <i>cvs glucosamine-chondroitin oral tablet</i>                        | EZ Flex GC       | OTC                 |
| <i>ez flex gc oral tablet</i>   | EZ Flex GC       | OTC                 |
| <i>glucosamine chondroitin complx oral tablet</i>                     | EZ Flex GC       | OTC                 |
| <i>glucosamine-chondroitin oral tablet</i>                            | EZ Flex GC       | OTC                 |
| <i>sm glucosamine/chondroitin oral tablet 750-600 mg</i>              | EZ Flex GC       | OTC                 |
| <b>*Alternative Medicine Combinations - Three Ingredients***</b>      |                  |                     |
| <b>FLAX + DHA ORAL CAPSULE</b>  | flax + dha       | OTC                 |
| <b>GLUCOSAMINE-CHONDROITIN-VIT C ORAL LIQUID 2000-1200-60 MG/30ML</b> |                  | OTC                 |
| <b>HM OMEGA-3-6-9 FATTY ACIDS ORAL CAPSULE</b>                        | flax + dha       | OTC                 |
| <b>OMEGA 3-6-9 COMPLEX ORAL CAPSULE</b>                               | flax + dha       | OTC                 |
| <b>OMEGA 3-6-9 ORAL CAPSULE</b>                                       | flax + dha       | OTC                 |
| <b>OMEGA-3 &amp; OMEGA-6 FISH OIL ORAL CAPSULE</b>                    | flax + dha       | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b> | <b>Restrictions</b> |
|--|------------------|---------------------|
| <b>OMEGA-3-6-9 ORAL CAPSULE</b>                                    | flax + dha       | OTC                 |
| <b>RA OMEGA 3-6-9 ORAL CAPSULE</b>                                 | flax + dha       | OTC                 |
| <b>SM OMEGA-3 ORAL CAPSULE</b>                                     | flax + dha       | OTC                 |
| <b>SM OMEGA-3-6-9 FATTY ACIDS ORAL CAPSULE</b>                     | flax + dha       | OTC                 |
| <b>SUPER OMEGA-3 ORAL CAPSULE</b>                                  | flax + dha       | OTC                 |
| <b>TRIPLE OMEGA-3-6-9 ORAL CAPSULE</b>                             | flax + dha       | OTC                 |
| <b>*Alternative Medicine Combinations<br/>- Two Ingredients***</b> |                  |                     |
| <i>cidaflex oral tablet 500-400 mg</i>                             | Cidaflex         | OTC                 |
| <i>cosamin ds oral capsule 500-400 mg</i>                          | Cosamin DS       | OTC                 |
| <i>cosamin ds oral tablet 500-400 mg</i>                           | Cidaflex         | OTC                 |
| <i>cvs glucosamine-chondroitin oral capsule 500-400 mg</i>         | Cosamin DS       | OTC                 |
| <i>cvs glucosamine-chondroitin oral tablet 500-400 mg</i>          | Cidaflex         | OTC                 |
| <i>eql glucosamine chondroitin oral tablet 750-600 mg</i>          |                  | OTC                 |
| <i>eql melatonin/vitamin b-6 oral tablet 3-1 mg</i>                |                  | OTC                 |
| <i>glucosamine chondr complex oral capsule 500-400 mg</i>          | Cosamin DS       | OTC                 |
| <i>glucosamine-chondroitin ds oral tablet 500-400 mg</i>           | Cidaflex         | OTC                 |
| <i>glucosamine-chondroitin oral capsule 250-200 mg</i>             |                  | OTC                 |
| <i>glucosamine-chondroitin oral capsule 500-400 mg</i>             | Cosamin DS       | OTC                 |
| <i>glucosamine-chondroitin oral liquid 1500-1200 mg/30ml</i>       |                  | OTC                 |
| <i>glucosamine-chondroitin oral tablet 500-400 mg</i>              | Cidaflex         | OTC                 |
| <i>glucosamine-chondroitin oral tablet 750-600 mg</i>              |                  | OTC                 |
| <i>glucosamine-chondroitin pm oral tablet 500-400 mg</i>           | Cidaflex         | OTC                 |
| <i>gnp glucosamine/chondroitin oral tablet 500-400 mg</i>          | Cidaflex         | OTC                 |
| <i>kp glucosamine chondroitin oral tablet 750-600 mg</i>           |                  | OTC                 |
| <i>max glucosamine chondroitin oral tablet 500-400 mg</i>          | Cidaflex         | OTC                 |
| <i>melatin oral tablet 3-1 mg</i>                                  |                  | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>             | <b>Restrictions</b>                            |
|--|------------------------------|--|
| <b>MELATONEX ORAL TABLET EXTENDED RELEASE 3-10 MG</b>                    | melatonin tr with vitamin b6 | OTC  |
| <b>MELATONIN ORAL TABLET 3-10 MG</b>                                     |                              | OTC  |
| <i>melatonin oral tablet 3-2 mg</i>                                      |                              | OTC  |
| <i>melatonin tr with vitamin b6 oral tablet extended release 3-10 mg</i> | Melatonex                    | OTC  |
| <i>melatonin/vitamin b-6 ex st oral tablet 3-1 mg</i>                    |                              | OTC  |
| <b>PA GLUCOSAMINE-CHONDROITIN ORAL CAPSULE 166.7-133.3 MG</b>            |                              | OTC  |
| <i>pa glucosamine-chondroitin oral tablet 500-400 mg</i>                 | Cidaflex                     | OTC  |
| <i>pa glucosamine-chondroitin oral tablet 750-600 mg</i>                 |                              | OTC  |
| <i>px glucosamine-chondroitin ds oral tablet 500-400 mg</i>              | Cidaflex                     | OTC  |
| <i>px glucosamine-chondroitin oral tablet 500-400 mg</i>                 | Cidaflex                     | OTC  |
| <i>ra glucosamine-chondroitin ds oral tablet 500-400 mg</i>              | Cidaflex                     | OTC  |
| <b>RA GLUCOSAMINE-CHONDROITIN ORAL CAPSULE 166.7-133.3 MG</b>            |                              | OTC  |
| <i>ra glucosamine-chondroitin oral capsule 250-200 mg</i>                |                              | OTC  |
| <i>ra glucosamine-chondroitin oral tablet 500-400 mg</i>                 | Cidaflex                     | OTC  |
| <i>ra glucosamine-chondroitin oral tablet 750-600 mg</i>                 |                              | OTC  |
| <i>ra melatonin oral tablet 3-2 mg</i>                                   |                              | OTC  |
| <b>*Aminoglycosides*</b>   |                              |  |
| <b>*Aminoglycosides***</b>   |                              |  |
| <b>BETHKIS INHALATION NEBULIZATION SOLUTION 300 MG/4ML</b>               | tobramycin                   | QLL (224 ML per 28 days); AL (Min 6 Years)     |
| <b>KITABIS PAK INHALATION NEBULIZATION SOLUTION 300 MG/5ML</b>           | tobramycin                   | QLL (280 ML per 28 days); AL (Min 6 Years)     |
| <i>neomycin sulfate oral tablet 500 mg</i>                               |                              |  |
| <i>paromomycin sulfate oral capsule 250 mg</i>                           | Humatin                      |  |
| <b>TOBI PODHALER INHALATION CAPSULE 28 MG</b>                            |                              | ST; QLL (224 EA per 28 days); AL (Min 6 Years) |
| <i>tobramycin pak inhalation nebulization solution 300 mg/5ml</i>        | Kitabis Pak                  | QLL (280 ML per 28 days); AL (Min 6 Years)     |

| Formulary Drug Name  | Reference | Restrictions                             |
|--|-----------|--|
| <b>*Analgesics - Anti-Inflammatory*</b>  |           |  |
| <b>*Anti-Tnf-Alpha - Monoclonal Antibodies***</b>  |           |  |
| HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT 80 MG/0.8ML                 |           | QLL (3 EA per 28 days); AL (Min 2 Years) |
| HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT 80 MG/0.8ML & 40MG/0.4ML    |           | QLL (2 EA per 28 days); AL (Min 2 Years) |
| HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.4ML, 40 MG/0.8ML                            |           | QLL (2 EA per 28 days); AL (Min 2 Years) |
| HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML   |           | QLL (2 EA per 28 days); AL (Min 2 Years) |
| HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML                        |           | QLL (6 EA per 28 days); AL (Min 2 Years) |
| HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML                        |           | QLL (3 EA per 28 days); AL (Min 2 Years) |
| HUMIRA PEN-PEDIATRIC UC START SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML                      |           | QLL (4 EA per 28 days); AL (Min 2 Years) |
| HUMIRA PEN-PS/UV/ADOL HS START SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML                     |           | QLL (4 EA per 28 days); AL (Min 2 Years) |
| HUMIRA PEN-PS/UV/ADOL HS START SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML & 40MG/0.4ML        |           | QLL (3 EA per 28 days); AL (Min 2 Years) |
| HUMIRA PEN-PSOR/UEVIT STARTER SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML & 40MG/0.4ML         |           | QLL (3 EA per 28 days); AL (Min 2 Years) |
| HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.1ML, 20 MG/0.2ML, 40 MG/0.4ML, 40 MG/0.8ML |           | QLL (2 EA per 28 days); AL (Min 2 Years) |
| <b>*Cyclooxygenase 2 (Cox-2) Inhibitors***</b>   |           |  |
| <i>celecoxib oral capsule 100 mg, 200 mg, 400 mg, 50 mg</i>                                  | CeleBREX  |  |
| <b>*Gold Compounds***</b>  |           |  |
| RIDAURA ORAL CAPSULE 3 MG  |           |  |



| <b>Formulary Drug Name</b>   | <b>Reference</b>      | <b>Restrictions</b> |
|--|-----------------------|---------------------|
| <b>*Nonsteroidal Anti-Inflammatory Agents (Nsaids)***</b>                |                       |                     |
| <i>advil junior strength oral tablet 100 mg</i>                          | Advil Junior Strength | OTC                 |
| <i>advil junior strength oral tablet chewable 100 mg</i>                 | Advil Junior Strength | OTC                 |
| <i>childrens ibuprofen 100 oral suspension 100 mg/5ml</i>                | Childrens Medi-Profen | OTC                 |
| <i>childrens ibuprofen oral suspension 100 mg/5ml</i>                    | Childrens Medi-Profen | OTC                 |
| <i>childrens medi-profen oral suspension 100 mg/5ml</i>                  | Childrens Medi-Profen | OTC                 |
| <i>cvs childrens ibuprofen oral suspension 100 mg/5ml</i>                | Childrens Medi-Profen | OTC                 |
| <i>cvs ibuprofen childrens oral suspension 100 mg/5ml</i>                | Childrens Medi-Profen | OTC                 |
| <i>cvs ibuprofen junior strength oral tablet chewable 100 mg</i>         | Advil Junior Strength | OTC                 |
| <i>diclofenac potassium oral tablet 50 mg</i>                            |                       |                     |
| <i>diclofenac sodium er oral tablet extended release 24 hour 100 mg</i>  |                       |                     |
| <i>diclofenac sodium oral tablet delayed release 25 mg, 50 mg, 75 mg</i> |                       |                     |
| <i>eq ibuprofen childrens oral suspension 100 mg/5ml</i>                 | Childrens Medi-Profen | OTC                 |
| <i>eq ibuprofen junior oral tablet chewable 100 mg</i>                   | Advil Junior Strength | OTC                 |
| <i>eql childrens ibuprofen oral suspension 100 mg/5ml</i>                | Childrens Medi-Profen | OTC                 |
| <i>eql ibuprofen junior strength oral tablet chewable 100 mg</i>         | Advil Junior Strength | OTC                 |
| <i>etodolac oral capsule 200 mg, 300 mg</i>                              |                       |                     |
| <i>etodolac oral tablet 400 mg</i>                                       | Lodine                |                     |
| <i>etodolac oral tablet 500 mg</i>                                       |                       |                     |
| <i>flurbiprofen oral tablet 100 mg, 50 mg</i>                            |                       |                     |
| <i>gnp childrens ibuprofen oral suspension 100 mg/5ml</i>                | Childrens Medi-Profen | OTC                 |
| <i>gnp ibuprofen junior strength oral tablet chewable 100 mg</i>         | Advil Junior Strength | OTC                 |
| <i>goodsense ibuprofen childrens oral suspension 100 mg/5ml</i>          | Childrens Medi-Profen | OTC                 |
| <i>goodsense ibuprofen junior st oral tablet chewable 100 mg</i>         | Advil Junior Strength | OTC                 |



| <b>Formulary Drug Name</b>                                      | <b>Reference</b>      | <b>Restrictions</b> |
|---|-----------------------|---------------------|
| <i>hm ibuprofen childrens oral suspension 100 mg/5ml</i>        | Childrens Medi-Profen | OTC                 |
| <i>hm ibuprofen oral tablet chewable 100 mg</i>                 | Advil Junior Strength | OTC                 |
| <i>hyvee ibuprofen childrens oral suspension 100 mg/5ml</i>     | Childrens Medi-Profen | OTC                 |
| <i>ibuprofen childrens oral suspension 100 mg/5ml</i>           | Childrens Medi-Profen | OTC                 |
| <i>ibuprofen junior strength oral tablet chewable 100 mg</i>    | Advil Junior Strength | OTC                 |
| <i>ibuprofen oral capsule 200 mg</i>                            | Advil                 | OTC                 |
| <i>ibuprofen oral suspension 100 mg/5ml</i>                     | Childrens Medi-Profen |                     |
| <i>ibuprofen oral tablet 200 mg</i>                             | Medi-First Ibuprofen  | OTC                 |
| <i>ibuprofen oral tablet 400 mg, 600 mg, 800 mg</i>             | IBU                   |                     |
| <i>indomethacin er oral capsule extended release 75 mg</i>      |                       |                     |
| <i>indomethacin oral capsule 25 mg, 50 mg</i>                   |                       |                     |
| <i>infants ibuprofen oral suspension 50 mg/1.25ml</i>           | Infants Advil         | OTC                 |
| <i>ketorolac tromethamine oral tablet 10 mg</i>                 |                       |                     |
| <i>medi-first ibuprofen oral tablet 200 mg</i>                  | Medi-First Ibuprofen  | OTC                 |
| <i>meloxicam oral tablet 15 mg, 7.5 mg</i>                      |                       |                     |
| <i>nabumetone oral tablet 500 mg, 750 mg</i>                    |                       |                     |
| <i>naproxen oral suspension 125 mg/5ml</i>                      | Naprosyn              | ST                  |
| <i>naproxen oral tablet 250 mg, 375 mg</i>                      |                       |                     |
| <i>naproxen oral tablet 500 mg</i>                              | Naprosyn              |                     |
| <i>naproxen oral tablet delayed release 375 mg, 500 mg</i>      | EC-Naprosyn           |                     |
| <i>naproxen sodium oral capsule 220 mg</i>                      | Aleve                 | OTC                 |
| <i>naproxen sodium oral tablet 220 mg</i>                       | Aleve                 | OTC                 |
| <i>naproxen sodium oral tablet 275 mg</i>                       |                       |                     |
| <i>naproxen sodium oral tablet 550 mg</i>                       | Anaprox DS            |                     |
| <i>piroxicam oral capsule 10 mg, 20 mg</i>                      | Feldene               |                     |
| <i>px childrens profen ib oral suspension 100 mg/5ml</i>        | Childrens Medi-Profen | OTC                 |
| <i>px ibuprofen junior strength oral tablet chewable 100 mg</i> | Advil Junior Strength | OTC                 |
| <i>qc childrens ibuprofen oral suspension 100 mg/5ml</i>        | Childrens Medi-Profen | OTC                 |
| <i>ra ibuprofen childrens oral suspension 100 mg/5ml</i>        | Childrens Medi-Profen | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>      | <b>Restrictions</b>                            |
|--|-----------------------|--|
| <i>ra ibuprofen junior strength oral tablet chewable 100 mg</i>      | Advil Junior Strength | OTC  |
| <i>ra ibuprofen oral suspension 100 mg/5ml</i>                       | Childrens Medi-Profen | OTC  |
| <i>sm childrens ibuprofen oral suspension 100 mg/5ml</i>             | Childrens Medi-Profen | OTC  |
| <i>sm ibuprofen ib oral tablet chewable 100 mg</i>                   | Advil Junior Strength | OTC  |
| <i>sm ibuprofen jr oral tablet 100 mg</i>                            | Advil Junior Strength | OTC  |
| <i>sulindac oral tablet 150 mg, 200 mg</i>                           |                       |  |
| <i>tgt childrens ibuprofen oral suspension 100 mg/5ml</i>            | Childrens Medi-Profen | OTC  |
| <i>tgt ibuprofen childrens oral suspension 100 mg/5ml</i>            | Childrens Medi-Profen | OTC  |
| <i>tgt ibuprofen junior strength oral tablet chewable 100 mg</i>     | Advil Junior Strength | OTC  |
| <b>*Pyrimidine Synthesis Inhibitors***</b>                           |                       |  |
| <i>leflunomide oral tablet 10 mg, 20 mg</i>                          | Arava                 | QLL (30 EA per 30 days)                        |
| <b>*Soluble Tumor Necrosis Factor Receptor Agents***</b>             |                       |  |
| <b>ENBREL MINI SUBCUTANEOUS SOLUTION CARTRIDGE 50 MG/ML</b>          |                       | QLL (4 pens per 28 days); AL (Min 2 Years)     |
| <b>ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5ML</b>                      |                       | QLL (8 vials per 28 days); AL (Min 2 Years)    |
| <b>ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 25 MG/0.5ML</b>    |                       | QLL (8 syringes per 28 days); AL (Min 2 Years) |
| <b>ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/ML</b>       |                       | QLL (4 pens per 28 days); AL (Min 2 Years)     |
| <b>ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 50 MG/ML</b> |                       | QLL (4 pens per 28 days); AL (Min 2 Years)     |
| <b>*Analgesics - Nonnarcotic*</b>                                    |                       |  |
| <b>*Analgesic Combinations***</b>                                    |                       |  |
| <i>added strength headache relief oral tablet 250-250-65 mg</i>      | Pamprin Max           | OTC  |
| <i>aspirin-acetaminophen-caffeine oral tablet 250-250-65 mg</i>      | Pamprin Max           | OTC  |
| <i>bayer migraine oral tablet 250-250-65 mg</i>                      | Pamprin Max           | OTC  |
| <i>cvs headache relief oral tablet 250-250-65 mg</i>                 | Pamprin Max           | OTC  |
| <i>cvs migraine relief oral tablet 250-250-65 mg</i>                 | Pamprin Max           | OTC  |
| <i>eq headache relief oral tablet 250-250-65 mg</i>                  | Pamprin Max           | OTC  |
| <i>eq migraine relief oral tablet 250-250-65 mg</i>                  | Pamprin Max           | OTC  |

| <b>Formulary Drug Name</b>  | <b>Reference</b>               | <b>Restrictions</b> |
|---|--------------------------------|---------------------|
| <i>eql headache relief ex str oral tablet 250-250-65 mg</i>             | Pamprin Max                    | OTC                 |
| <i>eql migraine formula oral tablet 250-250-65 mg</i>                   | Pamprin Max                    | OTC                 |
| <b>EXCEDRIN EXTRA STRENGTH ORAL TABLET 250-250-65 MG</b>                | added strength headache relief | OTC                 |
| <b>EXCEDRIN MIGRAINE ORAL TABLET 250-250-65 MG</b>                      | added strength headache relief | OTC                 |
| <b>EXCEDRIN TENSION HEADACHE ORAL TABLET 500-65 MG</b>                  | ra tension headache            | OTC                 |
| <i>extraprin oral tablet 250-250-65 mg</i>                              | Pamprin Max                    | OTC                 |
| <i>gnp migraine relief oral tablet 250-250-65 mg</i>                    | Pamprin Max                    | OTC                 |
| <i>goodsense headache relief oral tablet 250-250-65 mg</i>              | Pamprin Max                    | OTC                 |
| <i>goodsense migraine formula oral tablet 250-250-65 mg</i>             | Pamprin Max                    | OTC                 |
| <b>GOODYS EXTRA STRENGTH ORAL PACKET 500-325-65 MG, 520-260-32.5 MG</b> |                                | OTC                 |
| <i>headache formula oral tablet 250-250-65 mg</i>                       | Pamprin Max                    | OTC                 |
| <i>headache relief oral tablet 250-250-65 mg</i>                        | Pamprin Max                    | OTC                 |
| <i>headrin ex strength pain rel oral tablet 250-250-65 mg</i>           | Pamprin Max                    | OTC                 |
| <i>hm migraine relief oral tablet 250-250-65 mg</i>                     | Pamprin Max                    | OTC                 |
| <i>meijer migraine formula oral tablet 250-250-65 mg</i>                | Pamprin Max                    | OTC                 |
| <i>migraine formula oral tablet 250-250-65 mg</i>                       | Pamprin Max                    | OTC                 |
| <i>migraine relief oral tablet 250-250-65 mg</i>                        | Pamprin Max                    | OTC                 |
| <i>pain reliever plus oral tablet 250-250-65 mg</i>                     | Pamprin Max                    | OTC                 |
| <i>pain-off oral tablet 250-250-65 mg</i>                               | Pamprin Max                    | OTC                 |
| <i>pamprin max oral tablet 250-250-65 mg</i>                            | Pamprin Max                    | OTC                 |
| <i>px headache relief added st oral tablet 250-250-65 mg</i>            | Pamprin Max                    | OTC                 |
| <i>px migraine relief oral tablet 250-250-65 mg</i>                     | Pamprin Max                    | OTC                 |
| <i>qc headache relief oral tablet 250-250-65 mg</i>                     | Pamprin Max                    | OTC                 |
| <i>ra headache formula ex st oral tablet 250-250-65 mg</i>              | Pamprin Max                    | OTC                 |
| <i>ra headache formula oral tablet 250-250-65 mg</i>                    | Pamprin Max                    | OTC                 |
| <i>ra migraine relief oral tablet 250-250-65 mg</i>                     | Pamprin Max                    | OTC                 |
| <i>ra pain reliever ex st oral tablet 250-250-65 mg</i>                 | Pamprin Max                    | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>              | <b>Restrictions</b>           |
|--|-------------------------------|-------------------------------|
| <i>ra tension headache oral tablet 500-65 mg</i>                             | Excedrin Tension Headache     | OTC                           |
| <i>sb pain relief x-str oral tablet 250-250-65 mg</i>                        | Pamprin Max                   | OTC                           |
| <i>sm migraine relief oral tablet 250-250-65 mg</i>                          | Pamprin Max                   | OTC                           |
| <i>tension headache oral tablet 500-65 mg</i>                                | Excedrin Tension Headache     | OTC                           |
| <i>tgt migraine relief oral tablet 250-250-65 mg</i>                         | Pamprin Max                   | OTC                           |
| <b>*Analgesics Other***</b>  |                               |                               |
| <i>8 hour arthritis pain reliever oral tablet extended release 650 mg</i>    | Tylenol 8 Hour                | OTC                           |
| <i>8 hour pain reliever oral tablet extended release 650 mg</i>              | Tylenol 8 Hour                | OTC                           |
| <i>acephen rectal suppository 120 mg</i>                                     | FeverAll Childrens            | OTC                           |
| <i>acephen rectal suppository 325 mg</i>                                     |                               | OTC                           |
| <i>acephen rectal suppository 650 mg</i>                                     | FeverAll Adults               | OTC                           |
| <i>acetaminophen childrens oral suspension 160 mg/5ml</i>                    | Panadol Childrens             | OTC; QLL (240 ML per 30 days) |
| <i>acetaminophen er oral tablet extended release 650 mg</i>                  | Tylenol 8 Hour                | OTC                           |
| <i>acetaminophen extra strength oral liquid 500 mg/15ml</i>                  | Mapap Acetaminophen Extra Str | OTC                           |
| <i>acetaminophen junior strength oral tablet dispersible 160 mg</i>          |                               | OTC                           |
| <i>acetaminophen oral liquid 160 mg/5ml</i>                                  | Little Remedies for Fever     | OTC; QLL (240 ML per 30 days) |
| <i>acetaminophen oral solution 160 mg/5ml, 325 mg/10.15ml, 650 mg/20.3ml</i> |                               | OTC                           |
| <i>acetaminophen oral tablet chewable 80 mg</i>                              | Childrens Medi-Tabs           | OTC                           |
| <i>acetaminophen rapid tabs child oral tablet dispersible 80 mg</i>          |                               | OTC                           |
| <i>acetaminophen rectal suppository 120 mg</i>                               | FeverAll Childrens            | OTC                           |
| <i>acetaminophen rectal suppository 650 mg</i>                               | FeverAll Adults               | OTC                           |
| <i>apap extra strength oral liquid 500 mg/15ml</i>                           | Mapap Acetaminophen Extra Str | OTC                           |
| <i>apra oral elixir 160 mg/5ml</i>   | Medi-Tabs Childrens           | OTC                           |
| <i>arthritis pain oral tablet extended release 650 mg</i>                    | Tylenol 8 Hour                | OTC                           |
| <i>arthritis pain relief oral tablet extended release 650 mg</i>             | Tylenol 8 Hour                | OTC                           |
| <i>arthritis pain reliever oral tablet extended release 650 mg</i>           | Tylenol 8 Hour                | OTC                           |
| <i>childrens acetaminophen oral tablet dispersible 80 mg</i>                 |                               | OTC                           |

| <b>Formulary Drug Name</b>  | <b>Reference</b>              | <b>Restrictions</b>           |
|---|-------------------------------|-------------------------------|
| <i>childrens apap oral tablet chewable 80 mg</i>                        | Childrens Medi-Tabs           | OTC                           |
| <i>childrens aspirin free oral elixir 80 mg/2.5ml</i>                   | Medi-Tabs Childrens           | OTC; QLL (240 ML per 30 days) |
| <i>childrens medi-tabs oral tablet chewable 80 mg</i>                   | Childrens Medi-Tabs           | OTC                           |
| <i>childrens non-aspirin oral tablet chewable 80 mg</i>                 | Childrens Medi-Tabs           | OTC                           |
| <i>childrens pain reliever oral tablet chewable 80 mg</i>               | Childrens Medi-Tabs           | OTC                           |
| <i>childrens pain reliever oral tablet dispersible 80 mg</i>            |                               | OTC                           |
| <i>childrens tactinal oral tablet chewable 80 mg</i>                    | Childrens Medi-Tabs           | OTC                           |
| <i>chloraseptic sore throat oral liquid 1000 mg/30ml</i>                | Mapap Acetaminophen Extra Str | OTC                           |
| <i>cvs acetaminophen oral capsule 325 mg</i>                            | Tylenol                       | OTC                           |
| <i>cvs arthritis pain relief oral tablet extended release 650 mg</i>    | Tylenol 8 Hour                | OTC                           |
| <i>cvs childs non-aspirin oral tablet chewable 80 mg</i>                | Childrens Medi-Tabs           | OTC                           |
| <i>cvs fever reducing childrens rectal suppository 120 mg</i>           | FeverAll Childrens            | OTC                           |
| <i>cvs non-aspirin childrens oral tablet chewable 80 mg</i>             | Childrens Medi-Tabs           | OTC                           |
| <i>cvs pain relief adult oral liquid 500 mg/15ml</i>                    | Mapap Acetaminophen Extra Str | OTC                           |
| <i>cvs pain relief oral tablet extended release 650 mg</i>              | Tylenol 8 Hour                | OTC                           |
| <i>eq 8hr arthritis pain relief oral tablet extended release 650 mg</i> | Tylenol 8 Hour                | OTC                           |
| <i>eq acetaminophen childrens oral tablet dispersible 80 mg</i>         |                               | OTC                           |
| <i>eq acetaminophen junior oral tablet dispersible 160 mg</i>           |                               | OTC                           |
| <i>eq arthritis pain oral tablet extended release 650 mg</i>            | Tylenol 8 Hour                | OTC                           |
| <i>eq childrens pain reliever oral tablet chewable 80 mg</i>            | Childrens Medi-Tabs           | OTC                           |
| <i>eq pain relief/rapid burst oral liquid 500 mg/15ml</i>               | Mapap Acetaminophen Extra Str | OTC                           |
| <i>eq pain reliever junior oral tablet chewable 160 mg</i>              | Mapap Childrens               | OTC                           |
| <i>eql acetaminophen oral tablet dispersible 160 mg</i>                 |                               | OTC                           |

| <b>Formulary Drug Name</b>   | <b>Reference</b>              | <b>Restrictions</b> |
|--|-------------------------------|---------------------|
| <i>eql acetaminophen rapid tabs oral tablet dispersible 160 mg</i>   |                               | OTC                 |
| <i>eql arthritis pain relief oral tablet extended release 650 mg</i> | Tylenol 8 Hour                | OTC                 |
| <i>fever reducer childrens rectal suppository 120 mg</i>             | FeverAll Childrens            | OTC                 |
| <i>feverall adults rectal suppository 650 mg</i>                     | FeverAll Adults               | OTC                 |
| <i>feverall childrens rectal suppository 120 mg</i>                  | FeverAll Childrens            | OTC                 |
| <b>FEVERALL INFANTS RECTAL SUPPOSITORY 80 MG</b>                     |                               | OTC                 |
| <i>feverall junior strength rectal suppository 325 mg</i>            |                               | OTC                 |
| <i>gnp 8 hour pain reliever oral tablet extended release 650 mg</i>  | Tylenol 8 Hour                | OTC                 |
| <i>gnp arthritis pain relief oral tablet extended release 650 mg</i> | Tylenol 8 Hour                | OTC                 |
| <i>gnp childrens easy-melts oral tablet dispersible 80 mg</i>        |                               | OTC                 |
| <i>gnp pain relief extra strength oral liquid 500 mg/15ml</i>        | Mapap Acetaminophen Extra Str | OTC                 |
| <i>goodsense arthritis pain oral tablet extended release 650 mg</i>  | Tylenol 8 Hour                | OTC                 |
| <i>goodsense pain relief oral tablet extended release 650 mg</i>     | Tylenol 8 Hour                | OTC                 |
| <i>hm acetaminophen childrens oral tablet chewable 160 mg</i>        | Mapap Childrens               | OTC                 |
| <i>hm arthritis pain relief oral tablet extended release 650 mg</i>  | Tylenol 8 Hour                | OTC                 |
| <i>hm pain relief oral tablet extended release 650 mg</i>            | Tylenol 8 Hour                | OTC                 |
| <i>hm rapid melts junior oral tablet dispersible 160 mg</i>          |                               | OTC                 |
| <i>mapap acetaminophen extra str oral liquid 500 mg/15ml</i>         | Mapap Acetaminophen Extra Str | OTC                 |
| <i>mapap arthritis pain oral tablet extended release 650 mg</i>      | Tylenol 8 Hour                | OTC                 |
| <i>mapap childrens oral tablet chewable 160 mg</i>                   | Mapap Childrens               | OTC                 |
| <i>mapap childrens oral tablet dispersible 80 mg</i>                 |                               | OTC                 |
| <i>mapap oral capsule 500 mg</i>                                     |                               | OTC                 |
| <i>mapap oral tablet chewable 80 mg</i>                              | Childrens Medi-Tabs           | OTC                 |
| <i>medi-tabs childrens oral elixir 80 mg/2.5ml</i>                   | Medi-Tabs Childrens           | OTC                 |
| <i>medi-tabs junior strength oral tablet chewable 160 mg</i>         | Mapap Childrens               | OTC                 |



| <b>Formulary Drug Name</b>  | <b>Reference</b>              | <b>Restrictions</b> |
|---|-------------------------------|---------------------|
| <i>meijer jr st aspirin free oral tablet chewable 160 mg</i>              | Mapap Childrens               | OTC                 |
| <i>non-aspirin jr strength oral tablet chewable 160 mg</i>                | Mapap Childrens               | OTC                 |
| <i>pain &amp; fever childrens oral solution 160 mg/5ml</i>                |                               | OTC                 |
| <i>pain relief 8 hour oral tablet extended release 650 mg</i>             | Tylenol 8 Hour                | OTC                 |
| <i>pain reliever oral liquid 500 mg/15ml</i>                              | Mapap Acetaminophen Extra Str | OTC                 |
| <i>pain reliever/fever reducer rectal suppository 120 mg</i>              | FeverAll Childrens            | OTC                 |
| <i>px arthritis pain relief oral tablet extended release 650 mg</i>       | Tylenol 8 Hour                | OTC                 |
| <i>qc acetaminophen 8 hours oral tablet extended release 650 mg</i>       | Tylenol 8 Hour                | OTC                 |
| <i>qc arthritis pain relief oral tablet extended release 650 mg</i>       | Tylenol 8 Hour                | OTC                 |
| <i>qc non-aspirin 8 hour oral tablet extended release 650 mg</i>          | Tylenol 8 Hour                | OTC                 |
| <i>qc non-aspirin jr strength oral tablet dispersible 160 mg</i>          |                               | OTC                 |
| <i>ra 8 hour pain relief oral tablet extended release 650 mg</i>          | Tylenol 8 Hour                | OTC                 |
| <i>ra acetaminophen oral tablet extended release 650 mg</i>               | Tylenol 8 Hour                | OTC                 |
| <i>ra acetaminophen rapid melts oral tablet dispersible 160 mg, 80 mg</i> |                               | OTC                 |
| <i>ra arthritis pain relief oral tablet extended release 650 mg</i>       | Tylenol 8 Hour                | OTC                 |
| <i>ra pain reliever ex st oral liquid 500 mg/15ml</i>                     | Mapap Acetaminophen Extra Str | OTC                 |
| <i>sb arthritis pain relief oral tablet extended release 650 mg</i>       | Tylenol 8 Hour                | OTC                 |
| <i>sb childrens non-aspirin oral tablet dispersible 80 mg</i>             |                               | OTC                 |
| <i>sb non-aspirin jr strength oral tablet dispersible 160 mg</i>          |                               | OTC                 |
| <i>sb non-aspirin oral tablet chewable 160 mg</i>                         | Mapap Childrens               | OTC                 |
| <i>sb non-aspirin oral tablet chewable 80 mg</i>                          | Childrens Medi-Tabs           | OTC                 |
| <i>sm 8 hour pain relief oral tablet extended release 650 mg</i>          | Tylenol 8 Hour                | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>        | <b>Restrictions</b>           |
|--|-------------------------|-------------------------------|
| <i>sm arthritis pain relief oral tablet extended release 650 mg</i>      | Tylenol 8 Hour          | OTC                           |
| <i>sm arthritis pain reliever oral tablet extended release 650 mg</i>    | Tylenol 8 Hour          | OTC                           |
| <i>sm pain reliever ex st oral capsule 500 mg</i>                        |                         | OTC                           |
| <i>sm pain reliever ex st oral tablet extended release 650 mg</i>        | Tylenol 8 Hour          | OTC                           |
| <i>sm pain reliever oral capsule 500 mg</i>                              |                         | OTC                           |
| <i>sm rapid melts junior oral tablet dispersible 160 mg</i>              |                         | OTC                           |
| <i>tgt arthritis pain relief oral tablet extended release 650 mg</i>     | Tylenol 8 Hour          | OTC                           |
| <i>tgt pain reliever jr st oral tablet dispersible 160 mg</i>            |                         | OTC                           |
| <b>TRIAMINIC FEVER REDUCER ORAL SYRUP 160 MG/5ML</b>                     |                         | OTC; QLL (240 ML per 30 days) |
| <b>TYLENOL 8 HOUR ARTHRITIS PAIN ORAL TABLET EXTENDED RELEASE 650 MG</b> | 8 hour pain reliever    | OTC                           |
| <b>TYLENOL 8 HOUR ORAL TABLET EXTENDED RELEASE 650 MG</b>                | 8 hour pain reliever    | OTC                           |
| <b>TYLENOL ORAL CAPSULE 325 MG</b>                                       | cvs acetaminophen       | OTC                           |
| <b>*Analgesics-Sedatives***</b>  |                         |                               |
| <i>butalbital-apap-caffeine oral tablet 50-325-40 mg</i>                 | Bac                     | QLL (2 EA per 1 day)          |
| <b>*Salicylate Combinations***</b>                                       |                         |                               |
| <b>BUFFERIN ORAL TABLET 325 MG</b>                                       | sm aspirin tri-buffered | OTC                           |
| <i>cvs buffered aspirin oral tablet 325 mg</i>                           | Bufferin                | OTC                           |
| <i>eq buffered aspirin oral tablet 325 mg</i>                            | Bufferin                | OTC                           |
| <i>ra tri-buffered aspirin oral tablet 325 mg</i>                        | Bufferin                | OTC                           |
| <i>sm aspirin tri-buffered oral tablet 325 mg</i>                        | Bufferin                | OTC                           |
| <i>tri-buffered aspirin oral tablet 325 mg</i>                           | Bufferin                | OTC                           |
| <b>*Salicylates***</b>   |                         |                               |
| <i>aspirin 81 oral tablet delayed release 81 mg</i>                      | Aspir-Low               | OTC                           |
| <i>aspirin adult low dose oral tablet delayed release 81 mg</i>          | Aspir-Low               | OTC                           |
| <i>aspirin adult low strength oral tablet chewable 81 mg</i>             | Bayer Low Dose          | OTC                           |
| <i>aspirin adult low strength oral tablet delayed release 81 mg</i>      | Aspir-Low               | OTC                           |
| <i>aspirin childrens oral tablet chewable 81 mg</i>                      | Bayer Low Dose          | OTC                           |



| <b>Formulary Drug Name</b>  | <b>Reference</b>              | <b>Restrictions</b> |
|---|-------------------------------|---------------------|
| <i>aspirin ec low dose oral tablet delayed release 81 mg</i>            | Aspir-Low                     | OTC                 |
| <i>aspirin ec low strength oral tablet delayed release 81 mg</i>        | Aspir-Low                     | OTC                 |
| <i>aspirin ec oral tablet delayed release 81 mg</i>                     | Aspir-Low                     | OTC                 |
| <i>aspirin low dose oral tablet chewable 81 mg</i>                      | Bayer Low Dose                | OTC                 |
| <i>aspirin low dose oral tablet delayed release 81 mg</i>               | Aspir-Low                     | OTC                 |
| <i>aspirin low strength oral tablet chewable 81 mg</i>                  | Bayer Low Dose                | OTC                 |
| <i>aspirin oral tablet 325 mg</i>                                       | Bayer Advanced Aspirin Reg St | OTC                 |
| <i>aspirin oral tablet chewable 81 mg</i>                               | Bayer Low Dose                | OTC                 |
| <i>aspirin oral tablet delayed release 81 mg</i>                        | Aspir-Low                     | OTC                 |
| <i>aspirin rectal suppository 300 mg</i>                                |                               | OTC                 |
| <i>aspir-low oral tablet delayed release 81 mg</i>                      | Aspir-Low                     | OTC                 |
| <i>aspirtab maximum strength oral tablet 500 mg</i>                     | Bayer Advanced Aspirin Ex St  | OTC                 |
| <i>bayer advanced aspirin ex st oral tablet 500 mg</i>                  | Bayer Advanced Aspirin Ex St  | OTC                 |
| <i>bayer advanced aspirin reg st oral tablet 325 mg</i>                 | Bayer Advanced Aspirin Reg St | OTC                 |
| <i>bayer aspirin ec low dose oral tablet delayed release 81 mg</i>      | Aspir-Low                     | OTC                 |
| <i>bayer aspirin extra strength oral tablet 500 mg</i>                  | Bayer Advanced Aspirin Ex St  | OTC                 |
| <i>bayer aspirin oral tablet 325 mg</i>                                 | Bayer Advanced Aspirin Reg St | OTC                 |
| <i>bayer low dose oral tablet chewable 81 mg</i>                        | Bayer Low Dose                | OTC                 |
| <i>bayer low dose oral tablet delayed release 81 mg</i>                 | Aspir-Low                     | OTC                 |
| <i>childrens aspirin low strength oral tablet chewable 81 mg</i>        | Bayer Low Dose                | OTC                 |
| <i>childrens aspirin oral tablet chewable 81 mg</i>                     | Bayer Low Dose                | OTC                 |
| <i>cvs aspirin adult low dose oral tablet chewable 81 mg</i>            | Bayer Low Dose                | OTC                 |
| <i>cvs aspirin adult low strength oral tablet delayed release 81 mg</i> | Aspir-Low                     | OTC                 |
| <i>cvs aspirin ec oral tablet delayed release 81 mg</i>                 | Aspir-Low                     | OTC                 |
| <i>cvs aspirin low dose oral tablet delayed release 81 mg</i>           | Aspir-Low                     | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>              | <b>Restrictions</b> |
|--|-------------------------------|---------------------|
| <i>cvs aspirin oral tablet 325 mg</i>                                  | Bayer Advanced Aspirin Reg St | OTC                 |
| <i>diflunisal oral tablet 500 mg</i>                                   |                               |                     |
| <i>ec-81 aspirin oral tablet delayed release 81 mg</i>                 | Aspir-Low                     | OTC                 |
| <i>ecotrin low strength oral tablet delayed release 81 mg</i>          | Aspir-Low                     | OTC                 |
| <i>eq adult aspirin low strength oral tablet delayed release 81 mg</i> | Aspir-Low                     | OTC                 |
| <i>eq aspirin adult low dose oral tablet delayed release 81 mg</i>     | Aspir-Low                     | OTC                 |
| <i>eq aspirin low dose oral tablet chewable 81 mg</i>                  | Bayer Low Dose                | OTC                 |
| <i>eq aspirin low dose oral tablet delayed release 81 mg</i>           | Aspir-Low                     | OTC                 |
| <i>eq aspirin oral tablet 325 mg</i>                                   | Bayer Advanced Aspirin Reg St | OTC                 |
| <i>eq childrens aspirin oral tablet chewable 81 mg</i>                 | Bayer Low Dose                | OTC                 |
| <i>eql aspirin low dose oral tablet chewable 81 mg</i>                 | Bayer Low Dose                | OTC                 |
| <i>eql aspirin low dose oral tablet delayed release 81 mg</i>          | Aspir-Low                     | OTC                 |
| <i>eql aspirin oral tablet 325 mg</i>                                  | Bayer Advanced Aspirin Reg St | OTC                 |
| <i>gnp adult aspirin low strength oral tablet chewable 81 mg</i>       | Bayer Low Dose                | OTC                 |
| <i>gnp aspirin low dose oral tablet delayed release 81 mg</i>          | Aspir-Low                     | OTC                 |
| <i>gnp aspirin oral tablet 325 mg</i>                                  | Bayer Advanced Aspirin Reg St | OTC                 |
| <i>gnp aspirin oral tablet delayed release 81 mg</i>                   | Aspir-Low                     | OTC                 |
| <i>goodsense aspirin adult low st oral tablet chewable 81 mg</i>       | Bayer Low Dose                | OTC                 |
| <i>goodsense aspirin low dose oral tablet delayed release 81 mg</i>    | Aspir-Low                     | OTC                 |
| <i>goodsense aspirin oral tablet 325 mg</i>                            | Bayer Advanced Aspirin Reg St | OTC                 |
| <i>goodsense aspirin oral tablet chewable 81 mg</i>                    | Bayer Low Dose                | OTC                 |
| <i>h-e-b aspirin oral tablet delayed release 81 mg</i>                 | Aspir-Low                     | OTC                 |
| <i>hm aspirin ec low dose oral tablet delayed release 81 mg</i>        | Aspir-Low                     | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>              | <b>Restrictions</b> |
|--|-------------------------------|---------------------|
| <i>hm aspirin oral tablet 325 mg</i>                                   | Bayer Advanced Aspirin Reg St | OTC                 |
| <i>hm aspirin oral tablet chewable 81 mg</i>                           | Bayer Low Dose                | OTC                 |
| <i>kls aspirin low dose oral tablet delayed release 81 mg</i>          | Aspir-Low                     | OTC                 |
| <i>kp aspirin oral tablet delayed release 81 mg</i>                    | Aspir-Low                     | OTC                 |
| <i>medi-first aspirin oral tablet 325 mg</i>                           | Bayer Advanced Aspirin Reg St | OTC                 |
| <i>medique aspirin oral tablet 325 mg</i>                              | Bayer Advanced Aspirin Reg St | OTC                 |
| <i>miniprin low dose oral tablet delayed release 81 mg</i>             | Aspir-Low                     | OTC                 |
| <i>mm aspirin oral tablet 325 mg</i>                                   | Bayer Advanced Aspirin Reg St | OTC                 |
| <i>norwich aspirin oral tablet 325 mg</i>                              | Bayer Advanced Aspirin Reg St | OTC                 |
| <i>px aspirin oral tablet 325 mg</i>                                   | Bayer Advanced Aspirin Reg St | OTC                 |
| <i>px aspirin oral tablet chewable 81 mg</i>                           | Bayer Low Dose                | OTC                 |
| <i>px enteric aspirin oral tablet delayed release 81 mg</i>            | Aspir-Low                     | OTC                 |
| <i>qc aspirin low dose oral tablet chewable 81 mg</i>                  | Bayer Low Dose                | OTC                 |
| <i>qc aspirin low dose oral tablet delayed release 81 mg</i>           | Aspir-Low                     | OTC                 |
| <i>qc aspirin oral tablet 325 mg</i>                                   | Bayer Advanced Aspirin Reg St | OTC                 |
| <i>qc childrens aspirin oral tablet chewable 81 mg</i>                 | Bayer Low Dose                | OTC                 |
| <i>ra aspirin adult low dose oral tablet chewable 81 mg</i>            | Bayer Low Dose                | OTC                 |
| <i>ra aspirin adult low strength oral tablet chewable 81 mg</i>        | Bayer Low Dose                | OTC                 |
| <i>ra aspirin adult low strength oral tablet delayed release 81 mg</i> | Aspir-Low                     | OTC                 |
| <i>ra aspirin childrens oral tablet chewable 81 mg</i>                 | Bayer Low Dose                | OTC                 |
| <i>ra aspirin ec adult low st oral tablet delayed release 81 mg</i>    | Aspir-Low                     | OTC                 |
| <i>ra aspirin ec oral tablet delayed release 81 mg</i>                 | Aspir-Low                     | OTC                 |
| <i>ra aspirin oral tablet 325 mg</i>                                   | Bayer Advanced Aspirin Reg St | OTC                 |
| <i>ra aspirin oral tablet 500 mg</i>                                   | Bayer Advanced Aspirin Ex St  | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>              | <b>Restrictions</b>                      |
|--|-------------------------------|--|
| <i>ra childrens aspirin oral tablet chewable 81 mg</i>                 | Bayer Low Dose                | OTC                                      |
| <i>salsalate oral tablet 500 mg, 750 mg</i>                            |                               |  |
| <i>sb aspirin adult low strength oral tablet delayed release 81 mg</i> | Aspir-Low                     | OTC                                      |
| <i>sb aspirin oral tablet 325 mg</i>                                   | Bayer Advanced Aspirin Reg St | OTC                                      |
| <i>sb aspirin oral tablet delayed release 81 mg</i>                    | Aspir-Low                     | OTC                                      |
| <i>sb childrens aspirin oral tablet chewable 81 mg</i>                 | Bayer Low Dose                | OTC                                      |
| <i>sb low dose asa ec oral tablet delayed release 81 mg</i>            | Aspir-Low                     | OTC                                      |
| <i>sm aspirin adult low strength oral tablet chewable 81 mg</i>        | Bayer Low Dose                | OTC                                      |
| <i>sm aspirin adult low strength oral tablet delayed release 81 mg</i> | Aspir-Low                     | OTC                                      |
| <i>sm aspirin ec low strength oral tablet delayed release 81 mg</i>    | Aspir-Low                     | OTC                                      |
| <i>sm aspirin oral tablet 325 mg</i>                                   | Bayer Advanced Aspirin Reg St | OTC                                      |
| <i>sm childrens aspirin oral tablet chewable 81 mg</i>                 | Bayer Low Dose                | OTC                                      |
| <i>st joseph aspirin oral tablet delayed release 81 mg</i>             | Aspir-Low                     | OTC                                      |
| <i>st joseph low dose oral tablet chewable 81 mg</i>                   | Bayer Low Dose                | OTC                                      |
| <i>tgt aspirin low dose oral tablet delayed release 81 mg</i>          | Aspir-Low                     | OTC                                      |
| <i>tgt aspirin oral tablet 325 mg</i>                                  | Bayer Advanced Aspirin Reg St | OTC                                      |
| <i>tgt aspirin oral tablet chewable 81 mg</i>                          | Bayer Low Dose                | OTC                                      |
| <i>tgt aspirin oral tablet delayed release 81 mg</i>                   | Aspir-Low                     | OTC                                      |
| <i>tgt childrens aspirin oral tablet chewable 81 mg</i>                | Bayer Low Dose                | OTC                                      |
| <b>*Analgesics - Opioid*</b>   |                               |  |
| <b>*Codeine Combinations***</b>  |                               |  |
| <i>acetaminophen-codeine #2 oral tablet 300-15 mg</i>                  |                               | QLL (10 EA per 1 day); AL (Min 12 Years) |
| <i>acetaminophen-codeine #3 oral tablet 300-30 mg</i>                  |                               | QLL (10 EA per 1 day); AL (Min 12 Years) |
| <i>acetaminophen-codeine #4 oral tablet 300-60 mg</i>                  |                               | QLL (10 EA per 1 day); AL (Min 12 Years) |

| <b>Formulary Drug Name</b>  | <b>Reference</b> | <b>Restrictions</b>                       |
|---|------------------|---|
| <i>acetaminophen-codeine oral solution 120-12 mg/5ml</i>                                      |                  | QLL (150 ML per 1 day); AL (Min 12 Years) |
| <i>acetaminophen-codeine oral tablet 300-15 mg, 300-30 mg, 300-60 mg</i>                      |                  | QLL (10 EA per 1 day); AL (Min 12 Years)  |
| <b>*Hydrocodone Combinations***</b>   |                  |   |
| <i>hydrocodone-acetaminophen oral solution 2.5-108 mg/5ml, 5-217 mg/10ml, 7.5-325 mg/15ml</i> |                  | QLL (180 ML per 1 day)                    |
| <i>hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg</i>                             |                  | QLL (9 EA per 1 day)                      |
| <i>hydrocodone-acetaminophen oral tablet 5-300 mg</i>   | Xodol            | QLL (12 EA per 1 day)                     |
| <i>hydrocodone-acetaminophen oral tablet 5-325 mg, 7.5-300 mg, 7.5-325 mg</i>                 |                  | QLL (12 EA per 1 day)                     |
| <i>hydrocodone-ibuprofen oral tablet 10-200 mg, 5-200 mg, 7.5-200 mg</i>                      |                  | QLL (5 EA per 1 day)                      |
| <b>*Opioid Agonists***</b>  |                  |   |
| <i>codeine sulfate oral tablet 15 mg</i>  |                  | QLL (24 EA per 1 day); AL (Min 12 Years)  |
| <i>codeine sulfate oral tablet 30 mg</i>  |                  | QLL (12 EA per 1 day); AL (Min 12 Years)  |
| <i>codeine sulfate oral tablet 60 mg</i>  |                  | QLL (6 EA per 1 day); AL (Min 12 Years)   |
| <i>fentanyl transdermal patch 72 hour 100 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr</i>         |                  | PA; QLL (0.334 EA per 1 day)              |
| <i>fentanyl transdermal patch 72 hour 12 mcg/hr</i>   |                  | PA; QLL (0.334 EA per 1 day)              |
| <i>hydromorphone hcl oral tablet 2 mg</i>   | Dilaudid         | QLL (11.2 EA per 1 day)                   |
| <i>hydromorphone hcl oral tablet 4 mg</i>   | Dilaudid         | QLL (5.6 EA per 1 day)                    |
| <i>hydromorphone hcl oral tablet 8 mg</i>   | Dilaudid         | QLL (2.8 EA per 1 day)                    |
| <b>HYDROMORPHONE HCL RECTAL SUPPOSITORY 3 MG</b>  |                  | QLL (4 EA per 1 day)                      |
| <i>methadone hcl oral solution 10 mg/5ml</i>  |                  | PA; QLL (15 ML per 1 day)                 |
| <i>methadone hcl oral solution 5 mg/5ml</i>   |                  | PA; QLL (30 ML per 1 day)                 |
| <i>methadone hcl oral tablet 10 mg</i>  |                  | PA; QLL (3 EA per 1 day)                  |
| <i>methadone hcl oral tablet 5 mg</i>   |                  | PA; QLL (6 EA per 1 day)                  |
| <i>morphine sulfate (concentrate) oral solution 100 mg/5ml, 20 mg/ml</i>                      |                  | QLL (4.5 ML per 1 day)                    |

| <b>Formulary Drug Name</b>   | <b>Reference</b>        | <b>Restrictions</b>                         |
|--|-------------------------|---|
| <i>morphine sulfate er oral tablet extended release 100 mg, 200 mg</i>             | MS Contin               | PA; QLL (1 EA per 1 day)                    |
| <i>morphine sulfate er oral tablet extended release 15 mg</i>                      | MS Contin               | PA; QLL (4 EA per 1 day)                    |
| <i>morphine sulfate er oral tablet extended release 30 mg</i>                      | MS Contin               | PA; QLL (3 EA per 1 day)                    |
| <i>morphine sulfate er oral tablet extended release 60 mg</i>                      | MS Contin               | PA; QLL (2 EA per 1 day)                    |
| <i>morphine sulfate oral solution 10 mg/5ml</i>                                    |                         | QLL (45 ML per 1 day)                       |
| <i>morphine sulfate oral solution 20 mg/5ml</i>                                    |                         | QLL (22.5 ML per 1 day)                     |
| <i>morphine sulfate oral tablet 15 mg</i>  |                         | QLL (6 EA per 1 day)                        |
| <i>morphine sulfate oral tablet 30 mg</i>  |                         | QLL (3 EA per 1 day)                        |
| <i>morphine sulfate rectal suppository 10 mg</i>                                   |                         | QLL (9 EA per 1 day)                        |
| <i>morphine sulfate rectal suppository 20 mg</i>                                   |                         | QLL (6 EA per 1 day)                        |
| <b>MORPHINE SULFATE RECTAL SUPPOSITORY 30 MG</b>                                   |                         | QLL (3 EA per 1 day)                        |
| <i>morphine sulfate rectal suppository 5 mg</i>                                    |                         | QLL (18 EA per 1 day)                       |
| <i>oxycodone hcl oral capsule 5 mg</i>   |                         | QLL (12 EA per 1 day)                       |
| <i>oxycodone hcl oral solution 5 mg/5ml</i>  |                         | QLL (60 ML per 1 day)                       |
| <i>oxycodone hcl oral tablet 10 mg</i>   |                         | QLL (6 EA per 1 day)                        |
| <i>oxycodone hcl oral tablet 15 mg</i>   | Roxicodone              | QLL (4 EA per 1 day)                        |
| <i>oxycodone hcl oral tablet 20 mg</i>   |                         | QLL (3 EA per 1 day)                        |
| <i>oxycodone hcl oral tablet 30 mg</i>   | Roxicodone              | QLL (2 EA per 1 day)                        |
| <i>oxycodone hcl oral tablet 5 mg</i>  | Oxaydo                  | QLL (12 EA per 1 day)                       |
| <i>tramadol hcl er oral tablet extended release 24 hour 100 mg, 200 mg, 300 mg</i> |                         | PA; QLL (1 EA per 1 day); AL (Min 12 Years) |
| <i>tramadol hcl oral tablet 100 mg</i>   |                         | QLL (4 EA per 1 day); AL (Min 12 Years)     |
| <i>tramadol hcl oral tablet 50 mg</i>  |                         | QLL (8 EA per 1 day); AL (Min 12 Years)     |
| <b>*Opioid Combinations***</b>   |                         |   |
| <b>ENDOCET ORAL TABLET 10-325 MG</b>   | oxycodone-acetaminophen | QLL (6 EA per 1 day)                        |
| <b>ENDOCET ORAL TABLET 2.5-325 MG, 5-325 MG</b>                                    | oxycodone-acetaminophen | QLL (12 EA per 1 day)                       |
| <b>ENDOCET ORAL TABLET 7.5-325 MG</b>  | oxycodone-acetaminophen | QLL (8 EA per 1 day)                        |
| <i>oxycodone-acetaminophen oral solution 5-325 mg/5ml</i>                          |                         | QLL (60 ML per 1 day)                       |
| <i>oxycodone-acetaminophen oral tablet 10-325 mg</i>                               | Endocet                 | QLL (6 EA per 1 day)                        |
| <i>oxycodone-acetaminophen oral tablet 2.5-325 mg, 5-325 mg</i>                    | Endocet                 | QLL (12 EA per 1 day)                       |



| <b>Formulary Drug Name</b>  | <b>Reference</b>               | <b>Restrictions</b>                         |
|---|--------------------------------|---|
| <i>oxycodone-acetaminophen oral tablet 7.5-325 mg</i>                               | Endocet                        | QLL (8 EA per 1 day)                        |
| <b>*Opioid Partial Agonists***</b>  |                                |   |
| <i>buprenorphine hcl sublingual tablet sublingual 2 mg</i>                          |                                | PA; QLL (3 EA per 1 day); AL (Min 16 Years) |
| <i>buprenorphine hcl sublingual tablet sublingual 8 mg</i>                          |                                | PA; QLL (2 EA per 1 day); AL (Min 16 Years) |
| <i>buprenorphine hcl-naloxone hcl sublingual tablet sublingual 2-0.5 mg, 8-2 mg</i> |                                | QLL (3 EA per 1 day); AL (Min 16 Years)     |
| <i>buprenorphine transdermal patch weekly 10 mcg/hr, 5 mcg/hr, 7.5 mcg/hr</i>       | Butrans                        | PA; QLL (0.29 EA per 1 day)                 |
| <i>buprenorphine transdermal patch weekly 15 mcg/hr, 20 mcg/hr</i>                  | Butrans                        | PA; QLL (0.15 EA per 1 day)                 |
| <i>butorphanol tartrate nasal solution 10 mg/ml</i>                                 |                                | QLL (5 ML per 1 day)                        |
| <b>BUTRANS TRANSDERMAL PATCH WEEKLY 10 MCG/HR, 5 MCG/HR, 7.5 MCG/HR</b>             | buprenorphine                  | PA; QLL (0.29 EA per 1 day)                 |
| <b>BUTRANS TRANSDERMAL PATCH WEEKLY 15 MCG/HR, 20 MCG/HR</b>                        | buprenorphine                  | PA; QLL (0.15 EA per 1 day)                 |
| <i>pentazocine-naloxone hcl oral tablet 50-0.5 mg</i>                               |                                | QLL (120 EA per 30 days)                    |
| <b>SUBLOCADE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.5ML, 300 MG/1.5ML</b> |                                | PA  |
| <b>SUBOXONE SUBLINGUAL FILM 12-3 MG</b>   | buprenorphine hcl-naloxone hcl | QLL (2 EA per 1 day); AL (Min 16 Years)     |
| <b>SUBOXONE SUBLINGUAL FILM 2-0.5 MG, 8-2 MG</b>                                    | buprenorphine hcl-naloxone hcl | QLL (3 EA per 1 day); AL (Min 16 Years)     |
| <b>SUBOXONE SUBLINGUAL FILM 4-1 MG</b>  | buprenorphine hcl-naloxone hcl | QLL (1 EA per 1 day); AL (Min 16 Years)     |
| <b>*Tramadol Combinations***</b>  |                                |   |
| <i>tramadol-acetaminophen oral tablet 37.5-325 mg</i>                               |                                | QLL (240 EA per 30 days); AL (Min 12 Years) |
| <b>*Androgens-Anabolic*</b>   |                                |   |
| <b>*Androgens***</b>  |                                |   |
| <b>ANDRODERM TRANSDERMAL PATCH 24 HOUR 2 MG/24HR, 4 MG/24HR</b>                     |                                | AL (Min 18 Years)                           |
| <b>ANDROGEL PUMP TRANSDERMAL GEL 20.25 MG/ACT (1.62%)</b>                           | testosterone                   | AL (Min 18 Years)                           |
| <i>danazol oral capsule 100 mg, 200 mg, 50 mg</i>                                   |                                |   |
| <i>testosterone cypionate intramuscular solution 100 mg/ml, 200 mg/ml</i>           | Depo-Testosterone              | AL (Min 18 Years)                           |

| <b>Formulary Drug Name</b>                                       | <b>Reference</b>               | <b>Restrictions</b> |
|--|--------------------------------|---------------------|
| <i>testosterone enanthate intramuscular solution 200 mg/ml</i>   |                                | AL (Min 18 Years)   |
| <i>testosterone transdermal gel 1.62 %, 20.25 mg/act (1.62%)</i> | AndroGel Pump                  | AL (Min 18 Years)   |
| <i>testosterone transdermal gel 10 mg/act (2%)</i>               | Fortesta                       | AL (Min 18 Years)   |
| <i>testosterone transdermal gel 12.5 mg/act (1%)</i>             | Vogelxo Pump                   | AL (Min 18 Years)   |
| <i>testosterone transdermal gel 25 mg/2.5gm (1%)</i>             |                                | AL (Min 18 Years)   |
| <i>testosterone transdermal gel 50 mg/5gm (1%)</i>               | Testim                         | AL (Min 18 Years)   |
| <i>testosterone transdermal solution 30 mg/act</i>               |                                | AL (Min 18 Years)   |
| <b>*Anorectal And Related Products*</b>                          |                                |                     |
| <b>*Intrarectal Steroids***</b>                                  |                                |                     |
| <i>colocort rectal enema 100 mg/60ml</i>                         | Cortenema                      |                     |
| <i>hydrocortisone rectal enema 100 mg/60ml</i>                   | Cortenema                      |                     |
| <b>*Nitrate Vasodilating Agents***</b>                           |                                |                     |
| <b>RECTIV RECTAL OINTMENT 0.4 %</b>                              |                                | PA                  |
| <b>*Rectal Anesthetic Combinations***</b>                        |                                |                     |
| <i>cvs hemorrhoidal rectal cream 1-0.25-14.4-15 %</i>            | Avedana Hemorrhoid Pain Relief | OTC                 |
| <i>eq hemorrhoidal max st rectal cream 1-0.25-14.4-15 %</i>      | Avedana Hemorrhoid Pain Relief | OTC                 |
| <i>eql hemorrhoidal rectal cream 1-0.25-14.4-15 %</i>            | Avedana Hemorrhoid Pain Relief | OTC                 |
| <i>hemorrhoidal max st/aloe rectal cream 1-0.25-14.4-15 %</i>    | Avedana Hemorrhoid Pain Relief | OTC                 |
| <i>hemorrhoidal max str rectal cream 1-0.25-14.4-15 %</i>        | Avedana Hemorrhoid Pain Relief | OTC                 |
| <i>hemorrhoidal rectal cream 1-0.25-14.4-15 %</i>                | Avedana Hemorrhoid Pain Relief | OTC                 |
| <i>px hemorrhoidal rectal cream 1-0.25-14.4-15 %</i>             | Avedana Hemorrhoid Pain Relief | OTC                 |
| <i>ra hemorrhoidal rectal cream 1-0.25-14.4-15 %</i>             | Avedana Hemorrhoid Pain Relief | OTC                 |
| <i>tgt hemorrhoidal rectal cream 1-0.25-14.4-15 %</i>            | Avedana Hemorrhoid Pain Relief | OTC                 |
| <b>*Rectal Anesthetic/Steroids***</b>                            |                                |                     |
| <b>PROCTOFOAM HC RECTAL FOAM 1-1 %</b>                           |                                |                     |
| <b>*Rectal Combinations - Misc.***</b>                           |                                |                     |
| <i>anu-med rectal suppository 88.7-0.25 %</i>                    |                                | OTC                 |



| <b>Formulary Drug Name</b>                                    | <b>Reference</b>         | <b>Restrictions</b> |
|---|--------------------------|---------------------|
| <i>cvs hemorrhoidal rectal ointment 0.25-14-74.9 %</i>        | Preparation H            | OTC                 |
| <i>eql hemorrhoidal rectal ointment 0.25-14-74.9 %</i>        | Preparation H            | OTC                 |
| <i>gnp hemorrhoidal rectal ointment 0.25-14-74.9 %</i>        | Preparation H            | OTC                 |
| <i>gnp hemorrhoidal rectal suppository 0.25 %</i>             |                          | OTC                 |
| <i>goodsense hemorrhoidal rectal ointment 0.25-14-74.9 %</i>  | Preparation H            | OTC                 |
| <i>hemorrhoidal rectal ointment 0.25-14-74.9 %</i>            | Preparation H            | OTC                 |
| <i>hemorrhoidal rectal suppository 0.25 %, 0.25-3-85.5 %</i>  |                          | OTC                 |
| <i>hm hemorrhoidal rectal ointment 0.25-14-74.9 %</i>         | Preparation H            | OTC                 |
| <i>major-prep hemorrhoidal rectal ointment 0.25-14-74.9 %</i> | Preparation H            | OTC                 |
| <i>medicone rectal suppository 0.25 %</i>                     |                          | OTC                 |
| <b>PREPARATION H RECTAL OINTMENT 0.25-14-74.9 %</b>           | gnp hemorrhoidal         | OTC                 |
| <i>px hemorrhoidal rectal ointment 0.25-3-14-71.9 %</i>       |                          | OTC                 |
| <i>px hemorrhoidal rectal suppository 0.25-3-85.5 %</i>       |                          | OTC                 |
| <i>ra hemorrhoidal rectal ointment 0.25-3-14-71.9 %</i>       |                          | OTC                 |
| <i>ra hemorrhoidal rectal suppository 0.25-3-85.5 %</i>       |                          | OTC                 |
| <i>rectacaine rectal suppository 88.7-0.25 %</i>              |                          | OTC                 |
| <i>sb hemorrhoid rectal ointment 0.25-3-14-71.9 %</i>         |                          | OTC                 |
| <i>sm hemorrhoidal rectal ointment 0.25-14-74.9 %</i>         | Preparation H            | OTC                 |
| <i>sm hemorrhoidal rectal suppository 0.25 %</i>              |                          | OTC                 |
| <i>tronolane rectal suppository 0.25 %</i>                    |                          | OTC                 |
| <b>*Rectal Local Anesthetics***</b>                           |                          |                     |
| <i>anecream5 external cream 5 %</i>                           | AneCream5                | OTC                 |
| <i>lc-5 lidocaine external cream 5 %</i>                      | AneCream5                | OTC                 |
| <i>lidocaine (anorectal) external cream 5 %</i>               | AneCream5                | OTC                 |
| <b>LMX 5 EXTERNAL CREAM 5 %</b>                               | lidocaine (anorectal)    | OTC                 |
| <i>pramoxine hcl rectal foam 1 %</i>                          | Proctofoam               | OTC                 |
| <b>PROCTOFOAM RECTAL FOAM 1 %</b>                             | pramoxine hcl (perianal) | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b>         | <b>Restrictions</b> |
|---|--------------------------|---------------------|
| <i>ra anorectal external cream 5 %</i>                                  | AneCream5                | OTC                 |
| <i>rectasmoothe external cream 5 %</i>                                  | AneCream5                | OTC                 |
| <b>RECTICARE EXTERNAL CREAM 5 %</b>                                     | lidocaine (anorectal)    | OTC                 |
| <b>*Rectal Protectants-Emollients***</b>                                |                          |                     |
| <b>CALMOL-4 RECTAL SUPPOSITORY 76-10 %</b>                              |                          | OTC                 |
| <b>*Rectal Steroids***</b>  |                          |                     |
| <i>procto-med hc rectal cream 2.5 %</i>                                 |                          |                     |
| <i>procto-pak rectal cream 1 %</i>                                      |                          |                     |
| <i>proctosol hc rectal cream 2.5 %</i>                                  |                          |                     |
| <i>proctozone-hc rectal cream 2.5 %</i>                                 |                          |                     |
| <b>*Antacids*</b>   |                          |                     |
| <b>*Antacid &amp; Simethicone***</b>                                    |                          |                     |
| <i>almacone double strength oral suspension 400-400-40 mg/5ml</i>       | Almacone Double Strength | OTC                 |
| <i>almacone oral suspension 200-200-20 mg/5ml</i>                       | Mintox                   | OTC                 |
| <i>almacone oral tablet chewable 200-200-25 mg</i>                      |                          | OTC                 |
| <i>aluminum-magnesium-simethicone oral suspension 200-200-20 mg/5ml</i> | Mintox                   | OTC                 |
| <i>antacid &amp; antigas oral suspension 200-200-20 mg/5ml</i>          | Mintox                   | OTC                 |
| <i>antacid advanced oral suspension 400-400-40 mg/5ml</i>               | Almacone Double Strength | OTC                 |
| <i>antacid anti-gas max strength oral suspension 400-400-40 mg/5ml</i>  | Almacone Double Strength | OTC                 |
| <i>antacid anti-gas oral suspension 200-200-20 mg/5ml</i>               | Mintox                   | OTC                 |
| <i>antacid anti-gas reg strength oral suspension 200-200-20 mg/5ml</i>  | Mintox                   | OTC                 |
| <i>antacid extra strength oral suspension 400-400-40 mg/5ml</i>         | Almacone Double Strength | OTC                 |
| <i>antacid fast acting oral suspension 200-200-20 mg/5ml</i>            | Mintox                   | OTC                 |
| <i>antacid fast relief oral suspension 200-200-20 mg/5ml</i>            | Mintox                   | OTC                 |
| <i>antacid i oral suspension 200-200-20 mg/5ml</i>                      | Mintox                   | OTC                 |
| <i>antacid iii oral suspension 400-400-40 mg/5ml</i>                    | Almacone Double Strength | OTC                 |
| <i>antacid liquid oral suspension 200-200-20 mg/5ml</i>                 | Mintox                   | OTC                 |
| <i>antacid m oral suspension 200-200-20 mg/5ml</i>                      | Mintox                   | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b>         | <b>Restrictions</b> |
|---|--------------------------|---------------------|
| <i>antacid maximum strength oral suspension 400-400-40 mg/5ml</i>           | Almacone Double Strength | OTC                 |
| <i>antacid oral suspension 200-200-20 mg/5ml</i>                            | Mintox                   | OTC                 |
| <i>antacid oral suspension 400-400-40 mg/5ml</i>                            | Almacone Double Strength | OTC                 |
| <i>antacid plus anti-gas fast act oral suspension 200-200-20 mg/5ml</i>     | Mintox                   | OTC                 |
| <i>antacid plus anti-gas relief oral suspension 200-200-20 mg/5ml</i>       | Mintox                   | OTC                 |
| <i>antacid plus anti-gas relief oral suspension 400-400-40 mg/5ml</i>       | Almacone Double Strength | OTC                 |
| <i>antacid regular strength oral suspension 200-200-20 mg/5ml</i>           | Mintox                   | OTC                 |
| <i>antacid/simethicone ds oral suspension 400-400-40 mg/5ml</i>             | Almacone Double Strength | OTC                 |
| <i>comfort gel antacid &amp; anti-gas oral suspension 200-200-20 mg/5ml</i> | Mintox                   | OTC                 |
| <i>comfort gel antacid anti-gas oral suspension 200-200-20 mg/5ml</i>       | Mintox                   | OTC                 |
| <i>comfort gel antacid anti-gas oral suspension 400-400-40 mg/5ml</i>       | Almacone Double Strength | OTC                 |
| <i>comfort gel oral suspension 200-200-20 mg/5ml</i>                        | Mintox                   | OTC                 |
| <i>cvs antacid &amp; anti-gas oral tablet chewable 1000-60 mg</i>           | Maalox Advanced Max St   | OTC                 |
| <i>cvs antacid plus antigas oral suspension 400-400-40 mg/5ml</i>           | Almacone Double Strength | OTC                 |
| <i>cvs antacid/anti-gas oral suspension 200-200-20 mg/5ml</i>               | Mintox                   | OTC                 |
| <i>cvs antacid/anti-gas oral suspension 400-400-40 mg/5ml</i>               | Almacone Double Strength | OTC                 |
| <i>eq antacid maximum strength oral suspension 400-400-40 mg/5ml</i>        | Almacone Double Strength | OTC                 |
| <i>eq antacid oral suspension 200-200-20 mg/5ml</i>                         | Mintox                   | OTC                 |
| <i>eq antacid/anti-gas oral suspension 200-200-20 mg/5ml</i>                | Mintox                   | OTC                 |
| <i>eql antacid advanced max st oral suspension 400-400-40 mg/5ml</i>        | Almacone Double Strength | OTC                 |
| <i>eql antacid/anti-gas oral suspension 200-200-20 mg/5ml</i>               | Mintox                   | OTC                 |
| <i>fast acting antacid/anti-gas oral suspension 400-400-40 mg/5ml</i>       | Almacone Double Strength | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b>         | <b>Restrictions</b> |
|---|--------------------------|---------------------|
| <b>GELUSIL ORAL TABLET CHEWABLE 200-200-25 MG</b>                     |                          | OTC                 |
| <i>geri-lanta maximum strength oral suspension 400-400-40 mg/5ml</i>  | Almacone Double Strength | OTC                 |
| <i>geri-lanta oral suspension 200-200-20 mg/5ml</i>                   | Mintox                   | OTC                 |
| <i>gnp antacid &amp; anti-gas oral tablet chewable 1000-60 mg</i>     | Maalox Advanced Max St   | OTC                 |
| <i>gnp antacid anti-gas oral suspension 200-200-20 mg/5ml</i>         | Mintox                   | OTC                 |
| <i>gnp antacid maximum strength oral suspension 400-400-40 mg/5ml</i> | Almacone Double Strength | OTC                 |
| <i>gnp masanti maximum strength oral suspension 400-400-40 mg/5ml</i> | Almacone Double Strength | OTC                 |
| <i>gnp masanti regular strength oral suspension 200-200-20 mg/5ml</i> | Mintox                   | OTC                 |
| <i>hm advanced antacid max st oral suspension 400-400-40 mg/5ml</i>   | Almacone Double Strength | OTC                 |
| <i>hm antacid anti-gas ex st oral suspension 400-400-40 mg/5ml</i>    | Almacone Double Strength | OTC                 |
| <i>hm antacid oral suspension 200-200-20 mg/5ml</i>                   | Mintox                   | OTC                 |
| <i>hm antacid/antigas oral suspension 200-200-20 mg/5ml</i>           | Mintox                   | OTC                 |
| <b>MAALOX ADVANCED MAX ST ORAL TABLET CHEWABLE 1000-60 MG</b>         | cvs antacid & anti-gas   | OTC                 |
| <i>maalox max oral suspension 400-400-40 mg/5ml</i>                   | Almacone Double Strength | OTC                 |
| <b>MAALOX MAX ORAL TABLET CHEWABLE 1000-60 MG</b>                     | cvs antacid & anti-gas   | OTC                 |
| <i>maalox multi symptom max st oral suspension 400-400-40 mg/5ml</i>  | Almacone Double Strength | OTC                 |
| <i>mag-al plus oral liquid 200-200-20 mg/5ml</i>                      | Mintox                   | OTC                 |
| <i>mag-al plus xs oral liquid 400-400-40 mg/5ml</i>                   | Almacone Double Strength | OTC                 |
| <i>meijer antacid anti-gas oral suspension 200-200-20 mg/5ml</i>      | Mintox                   | OTC                 |
| <i>meijer antacid oral suspension 400-400-40 mg/5ml</i>               | Almacone Double Strength | OTC                 |
| <i>mi-acid maximum strength oral suspension 400-400-40 mg/5ml</i>     | Almacone Double Strength | OTC                 |
| <i>mi-acid oral suspension 200-200-20 mg/5ml</i>                      | Mintox                   | OTC                 |
| <i>milantex extra strength oral suspension 400-400-40 mg/5ml</i>      | Almacone Double Strength | OTC                 |
| <i>milantex oral suspension 200-200-20 mg/5ml</i>                     | Mintox                   | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b>               | <b>Restrictions</b> |
|---|--------------------------------|---------------------|
| <i>mintox maximum strength oral suspension 400-400-40 mg/5ml</i>      | Almacone Double Strength       | OTC                 |
| <i>mintox oral suspension 200-200-20 mg/5ml</i>                       | Mintox                         | OTC                 |
| <i>mintox plus oral tablet chewable 200-200-25 mg</i>                 |                                | OTC                 |
| <i>mylanta maximum strength oral suspension 400-400-40 mg/5ml</i>     | Almacone Double Strength       | OTC                 |
| <b>MYLANTA ORAL SUSPENSION 200-200-20 MG/5ML</b>                      | aluminum-magnesium-simethicone | OTC                 |
| <i>px antacid maximum strength oral suspension 400-400-40 mg/5ml</i>  | Almacone Double Strength       | OTC                 |
| <i>px antacid regular strength oral suspension 200-200-20 mg/5ml</i>  | Mintox                         | OTC                 |
| <i>qc antacid oral suspension 200-200-20 mg/5ml</i>                   | Mintox                         | OTC                 |
| <i>qc antacid/anti-gas oral suspension 200-200-20 mg/5ml</i>          | Mintox                         | OTC                 |
| <i>qc antacid/anti-gas oral suspension 400-400-40 mg/5ml</i>          | Almacone Double Strength       | OTC                 |
| <i>ra antacid/anti-gas max st oral suspension 400-400-40 mg/5ml</i>   | Almacone Double Strength       | OTC                 |
| <i>ra antacid/anti-gas oral suspension 200-200-20 mg/5ml</i>          | Mintox                         | OTC                 |
| <i>ra antacid/gas relief max st oral suspension 400-400-40 mg/5ml</i> | Almacone Double Strength       | OTC                 |
| <i>ra liquid antacid oral suspension 200-200-20 mg/5ml</i>            | Mintox                         | OTC                 |
| <i>rulox oral suspension 200-200-20 mg/5ml</i>                        | Mintox                         | OTC                 |
| <i>sb antacid anti-gas oral suspension 200-200-20 mg/5ml</i>          | Mintox                         | OTC                 |
| <i>sm antacid advanced max st oral suspension 400-400-40 mg/5ml</i>   | Almacone Double Strength       | OTC                 |
| <i>sm antacid advanced oral suspension 200-200-20 mg/5ml</i>          | Mintox                         | OTC                 |
| <i>sm antacid anti-gas oral suspension 200-200-20 mg/5ml</i>          | Mintox                         | OTC                 |
| <i>sm antacid maximum strength oral suspension 400-400-40 mg/5ml</i>  | Almacone Double Strength       | OTC                 |
| <i>sm antacid/antigas oral suspension 200-200-20 mg/5ml</i>           | Mintox                         | OTC                 |
| <i>tgt antacid anti-gas oral suspension 200-200-20 mg/5ml</i>         | Mintox                         | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>            | <b>Restrictions</b> |
|--|-----------------------------|---------------------|
| <b>*Antacid Combinations***</b>                                      |                             |                     |
| <i>acid gone oral suspension 95-358 mg/15ml</i>                      | Acid Gone                   | OTC                 |
| <i>acid gone oral tablet chewable 160-105 mg</i>                     | Acid Gone                   | OTC                 |
| <b>CVS HEARTBURN RELIEF EX ST ORAL SUSPENSION 254-237.5 MG/5ML</b>   | cvs heartburn relief ex st  | OTC                 |
| <i>cvs heartburn relief oral tablet chewable 160-105 mg</i>          | Acid Gone                   | OTC                 |
| <i>eq antacid extra strength oral tablet chewable 160-105 mg</i>     | Acid Gone                   | OTC                 |
| <b>GAVISCON EXTRA RELIEF FORMULA ORAL SUSPENSION 508-475 MG/10ML</b> | cvs heartburn relief ex st  | OTC                 |
| <b>GAVISCON EXTRA STRENGTH ORAL SUSPENSION 254-237.5 MG/5ML</b>      | cvs heartburn relief ex st  | OTC                 |
| <b>GAVISCON EXTRA STRENGTH ORAL TABLET CHEWABLE 160-105 MG</b>       | cvs heartburn relief        | OTC                 |
| <b>GAVISCON ORAL SUSPENSION 95-358 MG/15ML</b>                       |                             | OTC                 |
| <i>gnp antacid extra strength oral tablet chewable 160-105 mg</i>    | Acid Gone                   | OTC                 |
| <i>gnp foaming antacid oral suspension 95-358 mg/15ml</i>            | Acid Gone                   | OTC                 |
| <i>gnp foaming antacid oral tablet chewable 80-20 mg</i>             |                             | OTC                 |
| <i>heartburn antacid ex st oral tablet chewable 160-105 mg</i>       | Acid Gone                   | OTC                 |
| <i>qc heartburn antacid oral tablet chewable 160-105 mg</i>          | Acid Gone                   | OTC                 |
| <i>sm foaming antacid oral tablet chewable 80-20 mg</i>              |                             | OTC                 |
| <b>*Antacids - Aluminum Salts***</b>                                 |                             |                     |
| <b>ALUMINUM HYDROXIDE GEL ORAL SUSPENSION 320 MG/5ML</b>             |                             | OTC                 |
| <b>*Antacids - Bicarbonate***</b>                                    |                             |                     |
| <b>SODIUM BICARBONATE ORAL POWDER</b>                                |                             |                     |
| <i>sodium bicarbonate oral tablet 325 mg, 650 mg</i>                 |                             | OTC                 |
| <b>*Antacids - Calcium Salts***</b>                                  |                             |                     |
| <i>antacid calcium extra strength oral tablet chewable 750 mg</i>    | CVS Chewy Not Chalky Flavor | OTC                 |
| <i>antacid calcium oral tablet chewable 500 mg</i>                   | Cal-Gest Antacid            | OTC                 |



| <b>Formulary Drug Name</b>   | <b>Reference</b>            | <b>Restrictions</b> |
|--|-----------------------------|---------------------|
| <i>antacid extra strength oral tablet chewable 750 mg</i>          | CVS Chewy Not Chalky Flavor | OTC                 |
| <i>antacid maximum oral tablet chewable 1000 mg</i>                | Tums Ultra 1000             | OTC                 |
| <b>ANTACID ORAL TABLET CHEWABLE 1177 MG</b>                        | antacid                     | OTC                 |
| <i>antacid oral tablet chewable 500 mg</i>                         | Cal-Gest Antacid            | OTC                 |
| <i>antacid ultra strength oral tablet chewable 1000 mg</i>         | Tums Ultra 1000             | OTC                 |
| <i>calcium antacid extra strength oral tablet chewable 750 mg</i>  | CVS Chewy Not Chalky Flavor | OTC                 |
| <i>calcium antacid oral tablet chewable 500 mg</i>                 | Cal-Gest Antacid            | OTC                 |
| <i>calcium antacid ultra max st oral tablet chewable 1000 mg</i>   | Tums Ultra 1000             | OTC                 |
| <i>calcium antacid ultra strength oral tablet chewable 1000 mg</i> | Tums Ultra 1000             | OTC                 |
| <i>calcium carbonate antacid oral suspension 1250 mg/5ml</i>       |                             | OTC                 |
| <i>calcium carbonate antacid oral tablet 648 mg</i>                |                             | OTC                 |
| <i>calcium carbonate antacid oral tablet chewable 500 mg</i>       | Cal-Gest Antacid            | OTC                 |
| <i>calcium carbonate antacid oral tablet chewable 750 mg</i>       | CVS Chewy Not Chalky Flavor | OTC                 |
| <i>cal-gest antacid oral tablet chewable 500 mg</i>                | Cal-Gest Antacid            | OTC                 |
| <i>childrens pepto oral tablet chewable 400 mg</i>                 | Childrens Soothe            | OTC                 |
| <i>childrens soothe oral tablet chewable 400 mg</i>                | Childrens Soothe            | OTC                 |
| <i>cvs antacid extra oral tablet chewable 750 mg</i>               | CVS Chewy Not Chalky Flavor | OTC                 |
| <i>cvs antacid extra strength oral tablet chewable 750 mg</i>      | CVS Chewy Not Chalky Flavor | OTC                 |
| <i>cvs antacid kids oral tablet chewable 750 mg</i>                | CVS Chewy Not Chalky Flavor | OTC                 |
| <i>cvs antacid maximum strength oral tablet chewable 1000 mg</i>   | Tums Ultra 1000             | OTC                 |
| <i>cvs antacid ultra strength oral tablet chewable 1000 mg</i>     | Tums Ultra 1000             | OTC                 |
| <i>cvs chewy not chalky flavor oral tablet chewable 750 mg</i>     | CVS Chewy Not Chalky Flavor | OTC                 |
| <i>cvs smooth antacid extra st oral tablet chewable 750 mg</i>     | CVS Chewy Not Chalky Flavor | OTC                 |
| <i>eq antacid extra strength oral tablet chewable 750 mg</i>       | CVS Chewy Not Chalky Flavor | OTC                 |
| <i>eq antacid oral tablet chewable 500 mg</i>                      | Cal-Gest Antacid            | OTC                 |

| <b>Formulary Drug Name</b>                                      | <b>Reference</b>            | <b>Restrictions</b> |
|---|-----------------------------|---------------------|
| <i>eq antacid ultra strength oral tablet chewable 1000 mg</i>   | Tums Ultra 1000             | OTC                 |
| <i>eql antacid extra strength oral tablet chewable 750 mg</i>   | CVS Chewy Not Chalky Flavor | OTC                 |
| <i>eql antacid oral tablet chewable 500 mg</i>                  | Cal-Gest Antacid            | OTC                 |
| <i>eql antacid ultra strength oral tablet chewable 1000 mg</i>  | Tums Ultra 1000             | OTC                 |
| <i>gnp antacid extra strength oral tablet chewable 750 mg</i>   | CVS Chewy Not Chalky Flavor | OTC                 |
| <i>gnp antacid oral tablet chewable 500 mg</i>                  | Cal-Gest Antacid            | OTC                 |
| <i>gnp antacid ultra strength oral tablet chewable 1000 mg</i>  | Tums Ultra 1000             | OTC                 |
| <i>healthy mama tame the flame oral tablet chewable 500 mg</i>  | Cal-Gest Antacid            | OTC                 |
| <i>hm calcium antacid ex st oral tablet chewable 750 mg</i>     | CVS Chewy Not Chalky Flavor | OTC                 |
| <i>hm calcium antacid oral tablet chewable 500 mg</i>           | Cal-Gest Antacid            | OTC                 |
| <i>hm calcium antacid oral tablet chewable 750 mg</i>           | CVS Chewy Not Chalky Flavor | OTC                 |
| <i>hm calcium antacid ultra st oral tablet chewable 1000 mg</i> | Tums Ultra 1000             | OTC                 |
| <i>long lasting antacid oral tablet chewable 500 mg</i>         | Cal-Gest Antacid            | OTC                 |
| <i>maalox childrens oral tablet chewable 400 mg</i>             | Childrens Soothe            | OTC                 |
| <i>px antacid extra strength oral tablet chewable 750 mg</i>    | CVS Chewy Not Chalky Flavor | OTC                 |
| <i>px antacid maximum strength oral tablet chewable 1000 mg</i> | Tums Ultra 1000             | OTC                 |
| <i>px calcium antacid oral tablet chewable 500 mg</i>           | Cal-Gest Antacid            | OTC                 |
| <i>qc antacid extra strength oral tablet chewable 750 mg</i>    | CVS Chewy Not Chalky Flavor | OTC                 |
| <i>qc antacid oral tablet chewable 500 mg</i>                   | Cal-Gest Antacid            | OTC                 |
| <i>ra antacid extra strength oral tablet chewable 750 mg</i>    | CVS Chewy Not Chalky Flavor | OTC                 |
| <i>ra antacid oral tablet chewable 500 mg</i>                   | Cal-Gest Antacid            | OTC                 |
| <i>ra antacid ultra strength oral tablet chewable 1000 mg</i>   | Tums Ultra 1000             | OTC                 |
| <i>ra smooth antacid ex st oral tablet chewable 750 mg</i>      | CVS Chewy Not Chalky Flavor | OTC                 |
| <i>ra stomach relief kids oral tablet chewable 400 mg</i>       | Childrens Soothe            | OTC                 |



| <b>Formulary Drug Name</b>                                      | <b>Reference</b>            | <b>Restrictions</b> |
|---|-----------------------------|---------------------|
| <i>sb antacid extra strength oral tablet chewable 750 mg</i>    | CVS Chewy Not Chalky Flavor | OTC                 |
| <i>sb antacid oral tablet chewable 500 mg</i>                   | Cal-Gest Antacid            | OTC                 |
| <i>sm calcium antacid ex st oral tablet chewable 750 mg</i>     | CVS Chewy Not Chalky Flavor | OTC                 |
| <i>sm calcium antacid oral tablet chewable 500 mg</i>           | Cal-Gest Antacid            | OTC                 |
| <i>sm calcium antacid ultra st oral tablet chewable 1000 mg</i> | Tums Ultra 1000             | OTC                 |
| <i>sm smooth antacid ex st oral tablet chewable 750 mg</i>      | CVS Chewy Not Chalky Flavor | OTC                 |
| <i>tgt antacid extra strength oral tablet chewable 750 mg</i>   | CVS Chewy Not Chalky Flavor | OTC                 |
| <i>tgt antacid oral tablet chewable 1000 mg</i>                 | Tums Ultra 1000             | OTC                 |
| <i>titralac oral tablet chewable 420 mg</i>                     |                             | OTC                 |
| <b>TUMS CHEWY BITES ORAL TABLET CHEWABLE 750 MG</b>             | antacid extra strength      | OTC                 |
| <b>TUMS CHEWY DELIGHTS ORAL TABLET CHEWABLE 1177 MG</b>         | antacid                     | OTC                 |
| <b>TUMS E-X 750 ORAL TABLET CHEWABLE 750 MG</b>                 | antacid extra strength      | OTC                 |
| <b>TUMS KIDS ORAL TABLET CHEWABLE 750 MG</b>                    | antacid extra strength      | OTC                 |
| <b>TUMS LASTING EFFECTS ORAL TABLET CHEWABLE 500 MG</b>         | antacid                     | OTC                 |
| <b>TUMS ORAL TABLET CHEWABLE 500 MG</b>                         | antacid                     | OTC                 |
| <b>TUMS SMOOTHIES ORAL TABLET CHEWABLE 750 MG</b>               | antacid extra strength      | OTC                 |
| <b>TUMS ULTRA 1000 ORAL TABLET CHEWABLE 1000 MG</b>             | antacid maximum             | OTC                 |
| <b>*Antacids - Magnesium Salts***</b>                           |                             |                     |
| <i>gnp magnesium oxide oral tablet 250 mg</i>                   |                             | OTC                 |
| <i>hm magnesium oral tablet 250 mg, 400 mg</i>                  |                             | OTC                 |
| <b>MAGNESIUM OXIDE (ANTACID) ORAL CAPSULE 500 MG</b>            |                             | OTC                 |
| <i>magnesium oxide oral tablet 250 mg, 400 mg</i>               |                             | OTC                 |
| <i>maox oral tablet 420 mg</i>                                  |                             | OTC                 |
| <b>URO-MAG ORAL CAPSULE 140 MG</b>                              |                             | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b>  | <b>Restrictions</b>                     |
|---|-------------------|---|
| <b>*Anthelmintics*</b>  |                   |   |
| <b>*Anthelmintics***</b>  |                   |   |
| <i>albendazole oral tablet 200 mg</i>   |                   | PA                                      |
| <i>ivermectin oral tablet 3 mg</i>  | Stromectol        |   |
| <i>pinworm medicine oral suspension 144 (50 base) mg/ml</i>                               |                   | OTC                                     |
| <i>praziquantel oral tablet 600 mg</i>  | Biltricide        |   |
| <i>reeses pinworm medicine oral suspension 144 (50 base) mg/ml</i>                        |                   | OTC                                     |
| <b>*Antianginal Agents*</b>   |                   |   |
| <b>*Nitrates***</b>   |                   |   |
| <i>isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg</i>                               |                   |   |
| <i>isosorbide dinitrate oral tablet 5 mg</i>  | Isordil Titradose |   |
| <i>isosorbide mononitrate er oral tablet extended release 24 hour 120 mg</i>              |                   | QLL (2 EA per 1 day)                    |
| <i>isosorbide mononitrate er oral tablet extended release 24 hour 30 mg, 60 mg</i>        |                   | QLL (1 EA per 1 day)                    |
| <i>isosorbide mononitrate oral tablet 10 mg, 20 mg</i>                                    |                   |   |
| <b>NITRO-BID TRANSDERMAL OINTMENT 2 %</b>   |                   |   |
| <i>nitroglycerin sublingual tablet sublingual 0.3 mg, 0.4 mg, 0.6 mg</i>                  | Nitrostat         |   |
| <i>nitroglycerin transdermal patch 24 hour 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr</i> | Nitro-Dur         |   |
| <i>nitro-time oral capsule extended release 2.5 mg, 6.5 mg, 9 mg</i>                      |                   |   |
| <b>*Antianxiety Agents*</b>   |                   |   |
| <b>*Antianxiety Agents - Misc.***</b>   |                   |   |
| <i>bupirone hcl oral tablet 10 mg</i>   |                   | QLL (6 EA per 1 day); AL (Min 6 Years)  |
| <i>bupirone hcl oral tablet 15 mg</i>   |                   | QLL (4 EA per 1 day); AL (Min 6 Years)  |
| <i>bupirone hcl oral tablet 30 mg</i>   |                   | QLL (2 EA per 1 day); AL (Min 6 Years)  |
| <i>bupirone hcl oral tablet 5 mg</i>  |                   | QLL (12 EA per 1 day); AL (Min 6 Years) |
| <i>bupirone hcl oral tablet 7.5 mg</i>  |                   | QLL (8 EA per 1 day); AL (Min 6 Years)  |
| <i>hydroxyzine hcl oral syrup 10 mg/5ml</i>   |                   |   |

| <b>Formulary Drug Name</b>   | <b>Reference</b>   | <b>Restrictions</b>                     |
|--|--------------------|---|
| <i>hydroxyzine hcl oral tablet 10 mg, 25 mg, 50 mg</i>                             |                    |   |
| <i>hydroxyzine pamoate oral capsule 100 mg</i>                                     |                    | QLL (4 EA per 1 day)                    |
| <i>hydroxyzine pamoate oral capsule 25 mg, 50 mg</i>                               | Vistaril           | QLL (4 EA per 1 day)                    |
| <b>*Benzodiazepines***</b>   |                    |   |
| <i>alprazolam er oral tablet extended release 24 hour 0.5 mg, 1 mg, 2 mg, 3 mg</i> | Xanax XR           | QLL (2 EA per 1 day); AL (Min 18 Years) |
| <i>alprazolam oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg</i>                          | Xanax              | QLL (3 EA per 1 day); AL (Min 18 Years) |
| <i>alprazolam xr oral tablet extended release 24 hour 0.5 mg, 1 mg, 2 mg, 3 mg</i> | Xanax XR           | QLL (2 EA per 1 day); AL (Min 18 Years) |
| <i>chlordiazepoxide hcl oral capsule 10 mg, 25 mg, 5 mg</i>                        |                    | QLL (4 EA per 1 day); AL (Min 6 Years)  |
| <i>diazepam oral solution 5 mg/5ml</i>   |                    | QLL (10 ML per 1 day)                   |
| <i>diazepam oral tablet 10 mg, 2 mg, 5 mg</i>                                      | Valium             | QLL (4 EA per 1 day)                    |
| <i>lorazepam intensol oral concentrate 2 mg/ml</i>                                 | LORazepam Intensol | QLL (2 ML per 1 day); AL (Min 12 Years) |
| <i>lorazepam oral concentrate 2 mg/ml</i>  | LORazepam Intensol | QLL (2 ML per 1 day); AL (Min 12 Years) |
| <i>lorazepam oral tablet 0.5 mg, 1 mg, 2 mg</i>                                    | Ativan             | QLL (3 EA per 1 day)                    |
| <i>oxazepam oral capsule 10 mg, 15 mg, 30 mg</i>                                   |                    | QLL (4 EA per 1 day); AL (Min 6 Years)  |
| <b>*Antiarrhythmics*</b>   |                    |   |
| <b>*Antiarrhythmics Type I-A***</b>  |                    |   |
| <i>disopyramide phosphate oral capsule 100 mg, 150 mg</i>                          | Norpace            |   |
| <b>*Antiarrhythmics Type I-C***</b>  |                    |   |
| <i>flecainide acetate oral tablet 100 mg, 150 mg, 50 mg</i>                        |                    |   |
| <i>propafenone hcl oral tablet 150 mg, 225 mg, 300 mg</i>                          |                    |   |
| <b>*Antiarrhythmics Type Iii***</b>  |                    |   |
| <i>amiodarone hcl oral tablet 200 mg</i>   | Pacerone           |   |
| <b>MULTAQ ORAL TABLET 400 MG</b>   |                    | ST; QLL (2 EA per 1 day)                |
| <b>PACERONE ORAL TABLET 200 MG</b>   | amiodarone hcl     |   |

| Formulary Drug Name   | Reference                      | Restrictions |
|---|--------------------------------|--------------|
| <b>*Antiasthmatic And Bronchodilator Agents*</b>  |                                |              |
| <b>*Adrenergic Combinations***</b>  |                                |              |
| ADVAIR DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100-50 MCG/DOSE, 250-50 MCG/DOSE, 500-50 MCG/DOSE            | fluticasone-salmeterol         |              |
| ADVAIR HFA INHALATION AEROSOL 115-21 MCG/ACT, 230-21 MCG/ACT, 45-21 MCG/ACT   | fluticasone-salmeterol         |              |
| ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5-25 MCG/ACT  |                                |              |
| COMBIVENT RESPIMAT INHALATION AEROSOL SOLUTION 20-100 MCG/ACT   |                                |              |
| DULERA INHALATION AEROSOL 100-5 MCG/ACT, 200-5 MCG/ACT, 50-5 MCG/ACT  |                                |              |
| <i>ipratropium-albuterol inhalation solution 0.5-2.5 (3) mg/3ml</i>   |                                |              |
| STIOLTO RESPIMAT INHALATION AEROSOL SOLUTION 2.5-2.5 MCG/ACT  |                                |              |
| SYMBICORT INHALATION AEROSOL 160-4.5 MCG/ACT, 80-4.5 MCG/ACT  | budesonide-formoterol fumarate |              |
| <b>*Anti-Ige Monoclonal Antibodies***</b>   |                                |              |
| XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML, 75 MG/0.5ML   |                                | PA           |
| XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED 150 MG   |                                | PA           |
| <b>*Anti-Inflammatory Agents***</b>   |                                |              |
| <i>cromolyn sodium inhalation nebulization solution 20 mg/2ml</i>   |                                |              |
| <b>*Beta Adrenergics***</b>   |                                |              |
| <i>albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act</i>  | Ventolin HFA                   |              |
| <i>albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, 0.63 mg/3ml, 1.25 mg/3ml, 2.5 mg/0.5ml</i> |                                |              |
| <i>albuterol sulfate oral syrup 2 mg/5ml</i>  |                                |              |
| <i>arformoterol tartrate inhalation nebulization solution 15 mcg/2ml</i>  | Brovana                        |              |

| <b>Formulary Drug Name</b>  | <b>Reference</b>               | <b>Restrictions</b> |
|---|--------------------------------|---------------------|
| <i>levalbuterol tartrate inhalation aerosol 45 mcg/act</i>                                | Xopenex HFA                    | ST                  |
| <b>PROAIR HFA INHALATION AEROSOL SOLUTION 108 (90 BASE) MCG/ACT</b>                       | albuterol sulfate hfa          |                     |
| <b>SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 50 MCG/DOSE</b>             |                                |                     |
| <b>STRIVERDI RESPIMAT INHALATION AEROSOL SOLUTION 2.5 MCG/ACT</b>                         |                                |                     |
| <b>VENTOLIN HFA INHALATION AEROSOL SOLUTION 108 (90 BASE) MCG/ACT</b>                     | albuterol sulfate hfa          |                     |
| <b>*Bronchodilators - Anticholinergics***</b>   |                                |                     |
| <b>ATROVENT HFA INHALATION AEROSOL SOLUTION 17 MCG/ACT</b>                                |                                |                     |
| <i>ipratropium bromide inhalation solution 0.02 %</i>                                     |                                |                     |
| <b>SPIRIVA HANDIHALER INHALATION CAPSULE 18 MCG</b>                                       | tiotropium bromide monohydrate |                     |
| <b>SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 1.25 MCG/ACT, 2.5 MCG/ACT</b>             |                                |                     |
| <b>*Leukotriene Receptor Antagonists***</b>   |                                |                     |
| <i>montelukast sodium oral packet 4 mg</i>  | Singulair                      |                     |
| <i>montelukast sodium oral tablet 10 mg</i>   | Singulair                      |                     |
| <i>montelukast sodium oral tablet chewable 4 mg, 5 mg</i>                                 | Singulair                      |                     |
| <b>*Mixed Adrenergics***</b>  |                                |                     |
| <i>asthmanefrin refill inhalation nebulization solution 2.25 %</i>                        |                                | OTC                 |
| <b>S2 (RACEPINEPHRINE) INHALATION NEBULIZATION SOLUTION 2.25 %</b>                        |                                | OTC                 |
| <b>*Steroid Inhalants***</b>  |                                |                     |
| <b>ASMANEX (120 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/ACT</b> |                                |                     |
| <b>ASMANEX (14 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/ACT</b>  |                                |                     |

| <b>Formulary Drug Name</b>  | <b>Reference</b>           | <b>Restrictions</b> |
|---|----------------------------|---------------------|
| <b>ASMANEX (30 METERED DOSES)<br/>INHALATION AEROSOL POWDER<br/>BREATH ACTIVATED 110 MCG/ACT,<br/>220 MCG/ACT</b> |                            |                     |
| <b>ASMANEX (60 METERED DOSES)<br/>INHALATION AEROSOL POWDER<br/>BREATH ACTIVATED 220 MCG/ACT</b>                  |                            |                     |
| <i>budesonide inhalation suspension 0.25<br/>mg/2ml, 0.5 mg/2ml, 1 mg/2ml</i>                                     | Pulmicort                  |                     |
| <b>FLOVENT DISKUS INHALATION<br/>AEROSOL POWDER BREATH<br/>ACTIVATED 100 MCG/ACT, 250<br/>MCG/ACT, 50 MCG/ACT</b> |                            |                     |
| <b>FLOVENT HFA INHALATION<br/>AEROSOL 110 MCG/ACT, 220<br/>MCG/ACT, 44 MCG/ACT</b>                                | fluticasone propionate hfa |                     |
| <b>PULMICORT FLEXHALER<br/>INHALATION AEROSOL POWDER<br/>BREATH ACTIVATED 180 MCG/ACT, 90<br/>MCG/ACT</b>         |                            |                     |
| <b>*Xanthines***</b>  |                            |                     |
| <i>theochron oral tablet extended release 12 hour<br/>300 mg</i>  |                            |                     |
| <i>theophylline er oral tablet extended release 12<br/>hour 300 mg, 450 mg</i>                                    |                            |                     |
| <i>theophylline er oral tablet extended release 24<br/>hour 400 mg, 600 mg</i>                                    |                            |                     |
| <i>theophylline oral solution 80 mg/15ml</i>  |                            |                     |
| <b>*Anticoagulants*</b>   |                            |                     |
| <b>*Coumarin Anticoagulants***</b>  |                            |                     |
| <i>jantoven oral tablet 1 mg, 10 mg, 2 mg, 2.5<br/>mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg</i>                         | Jantoven                   |                     |
| <i>warfarin sodium oral tablet 1 mg, 10 mg, 2<br/>mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg</i>                  | Jantoven                   |                     |
| <b>*Direct Factor Xa Inhibitors***</b>  |                            |                     |
| <b>ELIQUIS DVT/PE STARTER PACK<br/>ORAL TABLET THERAPY PACK 5 MG</b>  |                            |                     |
| <b>ELIQUIS ORAL TABLET 2.5 MG, 5 MG</b>   |                            |                     |
| <b>XARELTO ORAL SUSPENSION<br/>RECONSTITUTED 1 MG/ML</b>  |                            |                     |
| <b>XARELTO ORAL TABLET 10 MG, 15<br/>MG, 2.5 MG, 20 MG</b>  |                            |                     |

| Formulary Drug Name   | Reference                     | Restrictions                                   |
|---|-------------------------------|--|
| <b>XARELTO STARTER PACK ORAL TABLET THERAPY PACK 15 &amp; 20 MG</b>   |                               |  |
| <b>*Heparins And Heparinoid-Like Agents***</b>  |                               |  |
| <i>heparin sodium (porcine) injection solution 1000 unit/ml, 10000 unit/ml, 5000 unit/ml</i>  |                               |  |
| <b>*Low Molecular Weight Heparins***</b>  |                               |  |
| <i>enoxaparin sodium injection solution 300 mg/3ml</i>  | Lovenox                       |  |
| <i>enoxaparin sodium injection solution prefilled syringe 100 mg/ml, 120 mg/0.8ml, 150 mg/ml, 40 mg/0.4ml, 60 mg/0.6ml, 80 mg/0.8ml</i> | Lovenox                       |  |
| <i>enoxaparin sodium injection solution prefilled syringe 30 mg/0.3ml</i>   | Lovenox                       |  |
| <b>LOVENOX INJECTION SOLUTION PREFILLED SYRINGE 30 MG/0.3ML</b>   | enoxaparin sodium             |  |
| <b>*Thrombin Inhibitors - Selective Direct &amp; Reversible***</b>  |                               |  |
| <b>PRADAXA ORAL CAPSULE 110 MG</b>  |                               |  |
| <b>PRADAXA ORAL CAPSULE 150 MG, 75 MG</b>   | dabigatran etexilate mesylate |  |
| <b>*Anticonvulsants*</b>  |                               |  |
| <b>*Anticonvulsants - Benzodiazepines***</b>  |                               |  |
| <i>clobazam oral suspension 2.5 mg/ml</i>   | Onfi                          |  |
| <i>clobazam oral tablet 10 mg, 20 mg</i>  | Onfi                          |  |
| <i>clonazepam oral tablet 0.5 mg, 1 mg, 2 mg</i>  | KlonoPIN                      |  |
| <b>DIASTAT ACUDIAL RECTAL GEL 10 MG, 20 MG</b>  | diazepam                      | QLL (10 EA per 30 days); AL (Min 2 Years)      |
| <b>DIASTAT PEDIATRIC RECTAL GEL 2.5 MG</b>  | diazepam                      | QLL (10 EA per 30 days); AL (Min 2 Years)      |
| <i>diazepam rectal gel 10 mg, 20 mg</i>   | Diastat AcuDial               | QLL (10 EA per 30 days); AL (Min 2 Years)      |
| <i>diazepam rectal gel 2.5 mg</i>   | Diastat Pediatric             | QLL (10 EA per 30 days); AL (Min 2 Years)      |
| <b>NAYZILAM NASAL SOLUTION 5 MG/0.1ML</b>   |                               | PA; QLL (10 EA per 30 days); AL (Min 12 Years) |
| <b>VALTOCO 10 MG DOSE NASAL LIQUID 10 MG/0.1ML</b>  |                               | QLL (10 EA per 30 days)                        |
| <b>VALTOCO 15 MG DOSE NASAL LIQUID THERAPY PACK 7.5 MG/0.1ML</b>  |                               | QLL (10 EA per 30 days)                        |



| <b>Formulary Drug Name</b>  | <b>Reference</b> | <b>Restrictions</b>     |
|---|------------------|-------------------------|
| <b>VALTOCO 20 MG DOSE NASAL LIQUID THERAPY PACK 10 MG/0.1ML</b>   |                  | QLL (10 EA per 30 days) |
| <b>VALTOCO 5 MG DOSE NASAL LIQUID 5 MG/0.1ML</b>  |                  | QLL (10 EA per 30 days) |
| <b>*Anticonvulsants - Misc.***</b>  |                  |                         |
| <i>carbamazepine oral suspension 100 mg/5ml</i>   | TEGretol         |                         |
| <i>carbamazepine oral tablet 200 mg</i>   | Epitol           |                         |
| <i>carbamazepine oral tablet chewable 100 mg</i>  |                  |                         |
| <b>CARBATROL ORAL CAPSULE EXTENDED RELEASE 12 HOUR 100 MG, 200 MG, 300 MG</b>                                 | carbamazepine er |                         |
| <b>EPIDIOLEX ORAL SOLUTION 100 MG/ML</b>  |                  | PA; AL (Min 1 Years)    |
| <i>gabapentin oral capsule 100 mg, 300 mg, 400 mg</i>   | Neurontin        |                         |
| <i>gabapentin oral solution 250 mg/5ml, 300 mg/6ml</i>  | Neurontin        |                         |
| <i>gabapentin oral tablet 600 mg, 800 mg</i>  | Neurontin        |                         |
| <i>lacosamide oral solution 10 mg/ml</i>  | Vimpat           |                         |
| <i>lacosamide oral tablet 100 mg, 150 mg, 200 mg, 50 mg</i>   | Vimpat           |                         |
| <b>LAMICTAL ODT ORAL KIT 21 X 25 MG &amp; 7 X 50 MG, 25 &amp; 50 &amp; 100 MG, 42 X 50 MG &amp; 14X100 MG</b> | lamotrigine      |                         |
| <i>lamotrigine er oral tablet extended release 24 hour 100 mg, 200 mg, 25 mg, 250 mg, 300 mg, 50 mg</i>       | LaMICtal XR      |                         |
| <i>lamotrigine oral tablet 100 mg, 150 mg, 200 mg, 25 mg</i>  | LaMICtal         |                         |
| <i>lamotrigine oral tablet chewable 25 mg, 5 mg</i>   | LaMICtal         |                         |
| <i>lamotrigine oral tablet dispersible 100 mg, 200 mg, 25 mg, 50 mg</i>                                       | LaMICtal ODT     |                         |
| <i>levetiracetam er oral tablet extended release 24 hour 500 mg, 750 mg</i>                                   | Keppra XR        |                         |
| <i>levetiracetam oral solution 100 mg/ml</i>  | Keppra           |                         |
| <i>levetiracetam oral tablet 1000 mg, 250 mg, 500 mg, 750 mg</i>  | Keppra           |                         |
| <i>oxcarbazepine oral tablet 150 mg, 300 mg, 600 mg</i>   | Trileptal        |                         |
| <i>pregabalin oral capsule 100 mg, 150 mg, 200 mg, 225 mg, 25 mg, 300 mg, 50 mg, 75 mg</i>                    | Lyrica           |                         |
| <i>primidone oral tablet 125 mg</i>   |                  |                         |

| <b>Formulary Drug Name</b>  | <b>Reference</b>   | <b>Restrictions</b> |
|---|--------------------|---------------------|
| <i>primidone oral tablet 250 mg, 50 mg</i>                                      | Mysoline           |                     |
| <b>TEGRETOL-XR ORAL TABLET EXTENDED RELEASE 12 HOUR 100 MG, 200 MG, 400 MG</b>  | carbamazepine er   |                     |
| <i>topiramate oral capsule sprinkle 15 mg, 25 mg</i>                            | Topamax Sprinkle   |                     |
| <i>topiramate oral tablet 100 mg, 200 mg, 25 mg, 50 mg</i>                      | Topamax            |                     |
| <b>TRILEPTAL ORAL SUSPENSION 300 MG/5ML</b>                                     | oxcarbazepine      |                     |
| <i>zonisamide oral capsule 100 mg, 25 mg</i>                                    | Zonegran           |                     |
| <i>zonisamide oral capsule 50 mg</i>  |                    |                     |
| <b>*Gaba Modulators***</b>  |                    |                     |
| <b>GABITRIL ORAL TABLET 12 MG, 16 MG, 2 MG, 4 MG</b>                            | tiagabine hcl      |                     |
| <b>*Hydantoins***</b>   |                    |                     |
| <b>DILANTIN ORAL CAPSULE 30 MG</b>  |                    |                     |
| <i>phenytoin oral suspension 125 mg/5ml</i>                                     | Dilantin           |                     |
| <i>phenytoin oral tablet chewable 50 mg</i>                                     | Dilantin Infatabs  |                     |
| <i>phenytoin sodium extended oral capsule 100 mg</i>                            | Dilantin           |                     |
| <i>phenytoin sodium extended oral capsule 200 mg, 300 mg</i>                    | Phenytek           |                     |
| <b>*Succinimides***</b>   |                    |                     |
| <i>ethosuximide oral capsule 250 mg</i>   | Zarontin           |                     |
| <i>ethosuximide oral solution 250 mg/5ml</i>                                    | Zarontin           | AL (Min 3 Years)    |
| <b>*Valproic Acid***</b>  |                    |                     |
| <i>divalproex sodium er oral tablet extended release 24 hour 250 mg, 500 mg</i> | Depakote ER        |                     |
| <i>divalproex sodium oral capsule delayed release sprinkle 125 mg</i>           | Depakote Sprinkles |                     |
| <i>divalproex sodium oral tablet delayed release 125 mg, 250 mg, 500 mg</i>     | Depakote           |                     |
| <i>valproic acid oral capsule 250 mg</i>  |                    |                     |
| <i>valproic acid oral solution 250 mg/5ml</i>                                   |                    |                     |
| <b>*Antidepressants*</b>  |                    |                     |
| <b>*Alpha-2 Receptor Antagonists (Tetracyclics)***</b>                          |                    |                     |
| <i>mirtazapine oral tablet 15 mg, 30 mg</i>                                     | Remeron            |                     |
| <i>mirtazapine oral tablet 45 mg, 7.5 mg</i>                                    |                    |                     |

| <b>Formulary Drug Name</b>   | <b>Reference</b> | <b>Restrictions</b>  |
|--|------------------|----------------------|
| <i>mirtazapine oral tablet dispersible 15 mg, 30 mg, 45 mg</i>                               | Remeron SolTab   |                      |
| <b>*Antidepressants - Misc.***</b>   |                  |                      |
| <i>bupropion hcl er (sr) oral tablet extended release 12 hour 100 mg, 150 mg, 200 mg</i>     | Wellbutrin SR    |                      |
| <i>bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg</i>             | Wellbutrin XL    |                      |
| <i>bupropion hcl oral tablet 100 mg, 75 mg</i>   |                  |                      |
| <b>*Monoamine Oxidase Inhibitors (Maois)***</b>  |                  |                      |
| <i>phenelzine sulfate oral tablet 15 mg</i>  | Nardil           |                      |
| <b>*Selective Serotonin Reuptake Inhibitors (Ssris)***</b>                                   |                  |                      |
| <i>citalopram hydrobromide oral solution 10 mg/5ml</i>                                       |                  |                      |
| <i>citalopram hydrobromide oral tablet 10 mg, 20 mg, 40 mg</i>                               | CeleXA           |                      |
| <i>escitalopram oxalate oral solution 5 mg/5ml</i>   |                  | AL (Max 12 Years)    |
| <i>escitalopram oxalate oral tablet 10 mg, 20 mg, 5 mg</i>                                   | Lexapro          | QLL (1 EA per 1 day) |
| <i>fluoxetine hcl oral capsule 10 mg, 20 mg, 40 mg</i>                                       | PROzac           |                      |
| <i>fluoxetine hcl oral solution 20 mg/5ml</i>  |                  |                      |
| <i>fluvoxamine maleate oral tablet 100 mg, 25 mg, 50 mg</i>                                  |                  |                      |
| <i>paroxetine hcl oral tablet 10 mg, 20 mg, 30 mg, 40 mg</i>                                 | Paxil            |                      |
| <i>sertraline hcl oral concentrate 20 mg/ml</i>  | Zoloft           |                      |
| <i>sertraline hcl oral tablet 100 mg, 25 mg, 50 mg</i>                                       | Zoloft           |                      |
| <b>*Serotonin Modulators***</b>  |                  |                      |
| <i>trazodone hcl oral tablet 100 mg, 150 mg, 300 mg, 50 mg</i>                               |                  |                      |
| <b>VIIBRYD ORAL TABLET 10 MG, 20 MG, 40 MG</b>   | vilazodone hcl   |                      |
| <b>*Serotonin-Norepinephrine Reuptake Inhibitors (Snris)***</b>                              |                  |                      |
| <i>desvenlafaxine succinate er oral tablet extended release 24 hour 100 mg, 25 mg, 50 mg</i> | Pristiq          |                      |
| <i>duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg</i>             | Cymbalta         |                      |

| <b>Formulary Drug Name</b>   | <b>Reference</b> | <b>Restrictions</b>  |
|--|------------------|----------------------|
| <i>venlafaxine hcl er oral capsule extended release 24 hour 150 mg, 37.5 mg, 75 mg</i> | Effexor XR       | QLL (1 EA per 1 day) |
| <i>venlafaxine hcl oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg</i>                |                  |                      |
| <b>*Tricyclic Agents***</b>  |                  |                      |
| <i>amitriptyline hcl oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>        |                  |                      |
| <i>amoxapine oral tablet 100 mg, 150 mg, 25 mg, 50 mg</i>                              |                  |                      |
| <i>doxepin hcl oral capsule 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>             |                  |                      |
| <i>doxepin hcl oral concentrate 10 mg/ml</i>   |                  |                      |
| <i>imipramine hcl oral tablet 10 mg, 25 mg, 50 mg</i>                                  |                  |                      |
| <i>nortriptyline hcl oral capsule 10 mg, 25 mg, 50 mg, 75 mg</i>                       | Pamelor          |                      |
| <i>nortriptyline hcl oral solution 10 mg/5ml</i>                                       |                  | AL (Max 12 Years)    |
| <b>*Antidiabetics*</b>   |                  |                      |
| <b>*Alpha-Glucosidase Inhibitors***</b>  |                  |                      |
| <i>acarbose oral tablet 100 mg, 25 mg, 50 mg</i>                                       |                  |                      |
| <b>*Biguanides***</b>  |                  |                      |
| <i>metformin hcl er oral tablet extended release 24 hour 500 mg, 750 mg</i>            |                  | AL (Min 10 Years)    |
| <i>metformin hcl oral tablet 1000 mg, 500 mg, 850 mg</i>                               |                  | AL (Min 10 Years)    |
| <b>*Diabetic Other - Combinations***</b>   |                  |                      |
| <i>glucose oral tablet chewable 4-6 gm-mg</i>  | Dex4             | OTC                  |
| <b>*Diabetic Other***</b>  |                  |                      |
| <b>BAQSIMI ONE PACK NASAL POWDER 3 MG/DOSE</b>   |                  |                      |
| <b>BAQSIMI TWO PACK NASAL POWDER 3 MG/DOSE</b>   |                  |                      |
| <b>BD GLUCOSE ORAL TABLET CHEWABLE 5 GM</b>  |                  | OTC                  |
| <i>cvs glucose oral gel 15 gm/38gm, 40 %</i>   | ReliOn Glucose   | OTC                  |
| <b>CVS GLUCOSE ORAL TABLET CHEWABLE 4 GM</b>   | cvs glucose      | OTC                  |
| <i>cvs glucose shot oral liquid 15 gm/59ml</i>   | Dex4 Glucose     | OTC                  |
| <b>DEX4 QUICK DISSOLVE GLUCOSE ORAL TABLET CHEWABLE 4 GM</b>                           | cvs glucose      | OTC                  |

| <b>Formulary Drug Name</b>   | <b>Reference</b> | <b>Restrictions</b>                     |
|--|------------------|---|
| <i>glucagon emergency injection solution reconstituted 1 mg/ml</i>                       |                  |   |
| <i>gluco burst oral gel 40 %</i>   | ReliOn Glucose   | OTC                                     |
| <i>glucose oral gel 40 %</i>   | ReliOn Glucose   | OTC                                     |
| <i>glucose oral liquid 15 gm/59ml</i>  | Dex4 Glucose     | OTC                                     |
| <b>GLUCOSE ORAL TABLET CHEWABLE 4 GM</b>   | cvs glucose      | OTC                                     |
| <b>GNP GLUCOSE ORAL TABLET CHEWABLE 4 GM</b>   | cvs glucose      | OTC                                     |
| <b>GNP QUICK DISSOLVE GLUCOSE ORAL TABLET CHEWABLE 4 GM</b>                              | cvs glucose      | OTC                                     |
| <b>GVOKE HYPOPEN 1-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.5 MG/0.1ML, 1 MG/0.2ML</b> |                  |   |
| <b>GVOKE HYPOPEN 2-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.5 MG/0.1ML, 1 MG/0.2ML</b> |                  |   |
| <b>GVOKE HYPOPEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 1 MG/0.2ML</b>                      |                  |   |
| <b>GVOKE KIT SUBCUTANEOUS SOLUTION 1 MG/0.2ML</b>  |                  |   |
| <b>GVOKE PFS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 0.5 MG/0.1ML, 1 MG/0.2ML</b>        |                  |   |
| <b>INSTA-GLUCOSE ORAL GEL 77.4 %</b>   |                  | OTC                                     |
| <b>LEADER QUICK DISSOLVE GLUCOSE ORAL TABLET CHEWABLE 4 GM</b>                           | cvs glucose      | OTC                                     |
| <b>PROGLYCEM ORAL SUSPENSION 50 MG/ML</b>  | diazoxide        |   |
| <i>ra glucose oral gel 40 %</i>  | ReliOn Glucose   | OTC                                     |
| <i>relion glucose drink oral liquid 15 gm/59ml</i>                                       | Dex4 Glucose     | OTC                                     |
| <i>relion glucose oral gel 15 gm/38gm</i>  | ReliOn Glucose   | OTC                                     |
| <b>SM GLUCOSE ORAL TABLET CHEWABLE 4 GM</b>  | cvs glucose      | OTC                                     |
| <i>value plus glucose oral gel 40 %</i>  | ReliOn Glucose   | OTC                                     |
| <b>WALGREENS GLUCOSE ORAL TABLET CHEWABLE 4 GM</b>                                       | cvs glucose      | OTC                                     |
| <b>*Dipeptidyl Peptidase-4 (Dpp-4) Inhibitors***</b>                                     |                  |   |
| <b>JANUVIA ORAL TABLET 100 MG, 25 MG, 50 MG</b>  |                  | QLL (1 EA per 1 day); AL (Min 18 Years) |

| <b>Formulary Drug Name</b>   | <b>Reference</b>              | <b>Restrictions</b>                     |
|--|-------------------------------|---|
| <b>ONGLYZA ORAL TABLET 2.5 MG, 5 MG</b>  | saxagliptin hcl               | AL (Min 18 Years)                       |
| <b>TRADJENTA ORAL TABLET 5 MG</b>  |                               | QLL (1 EA per 1 day); AL (Min 18 Years) |
| <b>*Dipeptidyl Peptidase-4 Inhibitor-Biguanide Combinations***</b>                         |                               |   |
| <b>JANUMET ORAL TABLET 50-1000 MG, 50-500 MG</b>   |                               | QLL (2 EA per 1 day); AL (Min 18 Years) |
| <b>JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 100-1000 MG, 50-1000 MG, 50-500 MG</b>  |                               | AL (Min 18 Years)                       |
| <b>JENTADUETO ORAL TABLET 2.5-1000 MG, 2.5-500 MG, 2.5-850 MG</b>                          |                               | AL (Min 18 Years)                       |
| <b>JENTADUETO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG, 5-1000 MG</b>           |                               | AL (Min 18 Years)                       |
| <b>KOMBIGLYZE XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG, 5-1000 MG, 5-500 MG</b> | saxagliptin-metformin er      | AL (Min 18 Years)                       |
| <b>*Human Insulin***</b>   |                               |   |
| <b>ADMELOG INJECTION SOLUTION 100 UNIT/ML</b>  | insulin lispro                |   |
| <b>ADMELOG SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML</b>                     | insulin lispro (1 unit dial)  |   |
| <b>BASAGLAR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML</b>                     | insulin glargine solostar     |   |
| <b>HUMALOG INJECTION SOLUTION 100 UNIT/ML</b>  | insulin lispro                |   |
| <b>HUMALOG JUNIOR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML</b>               | insulin lispro junior kwikpen |   |
| <b>HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML</b>                      | insulin lispro (1 unit dial)  |   |
| <b>HUMALOG MIX 50/50 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (50-50) 100 UNIT/ML</b>  |                               |   |
| <b>HUMALOG MIX 50/50 SUBCUTANEOUS SUSPENSION (50-50) 100 UNIT/ML</b>                       |                               |   |
| <b>HUMALOG MIX 75/25 SUBCUTANEOUS SUSPENSION (75-25) 100 UNIT/ML</b>                       |                               |   |

| <b>Formulary Drug Name</b>   | <b>Reference</b>             | <b>Restrictions</b> |
|--|------------------------------|---------------------|
| <b>HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE 100 UNIT/ML</b>   |                              |                     |
| <b>HUMULIN 70/30 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (70-30) 100 UNIT/ML</b>              |                              | OTC                 |
| <b>HUMULIN 70/30 SUBCUTANEOUS SUSPENSION (70-30) 100 UNIT/ML</b>                                   |                              | OTC                 |
| <b>HUMULIN N KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR 100 UNIT/ML</b>                          |                              | OTC                 |
| <b>HUMULIN N SUBCUTANEOUS SUSPENSION 100 UNIT/ML</b>   |                              | OTC                 |
| <b>HUMULIN R INJECTION SOLUTION 100 UNIT/ML</b>  |                              | OTC                 |
| <b>HUMULIN R U-500 (CONCENTRATED) SUBCUTANEOUS SOLUTION 500 UNIT/ML</b>                            |                              |                     |
| <b>HUMULIN R U-500 KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 500 UNIT/ML</b>                      |                              |                     |
| <i>insulin asp prot &amp; asp flexpen subcutaneous suspension pen-injector (70-30) 100 unit/ml</i> | NovoLOG 70/30 FlexPen ReliOn |                     |
| <i>insulin aspart flexpen subcutaneous solution pen-injector 100 unit/ml</i>                       | NovoLOG FlexPen              |                     |
| <i>insulin aspart injection solution 100 unit/ml</i>   | NovoLOG                      |                     |
| <i>insulin aspart penfill subcutaneous solution cartridge 100 unit/ml</i>                          | NovoLOG PenFill              |                     |
| <i>insulin aspart prot &amp; aspart subcutaneous suspension (70-30) 100 unit/ml</i>                | NovoLOG Mix 70/30            |                     |
| <i>insulin glargine-yfgn subcutaneous solution 100 unit/ml</i>                                     | Semglee (yfgn)               |                     |
| <i>insulin glargine-yfgn subcutaneous solution pen-injector 100 unit/ml</i>                        | Semglee (yfgn)               |                     |
| <i>insulin lispro (1 unit dial) subcutaneous solution pen-injector 100 unit/ml</i>                 | Admelog SoloStar             |                     |
| <i>insulin lispro injection solution 100 unit/ml</i>   | Admelog                      |                     |
| <i>insulin lispro junior kwikpen subcutaneous solution pen-injector 100 unit/ml</i>                | HumaLOG Junior KwikPen       |                     |
| <i>insulin lispro prot &amp; lispro subcutaneous suspension pen-injector (75-25) 100 unit/ml</i>   | HumaLOG Mix 75/25 KwikPen    |                     |
| <b>LANTUS SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML</b>                              | insulin glargine solostar    |                     |



| <b>Formulary Drug Name</b>   | <b>Reference</b>          | <b>Restrictions</b> |
|--|---------------------------|---------------------|
| <b>LANTUS SUBCUTANEOUS SOLUTION 100 UNIT/ML</b>                              | insulin glargine          |                     |
| <b>LEVEMIR FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML</b>      |                           |                     |
| <b>LEVEMIR SUBCUTANEOUS SOLUTION 100 UNIT/ML</b>                             |                           |                     |
| <b>NOVOLIN 70/30 RELION SUBCUTANEOUS SUSPENSION (70-30) 100 UNIT/ML</b>      |                           | OTC                 |
| <b>NOVOLIN 70/30 SUBCUTANEOUS SUSPENSION (70-30) 100 UNIT/ML</b>             |                           | OTC                 |
| <b>NOVOLIN N RELION SUBCUTANEOUS SUSPENSION 100 UNIT/ML</b>                  |                           | OTC                 |
| <b>NOVOLIN N SUBCUTANEOUS SUSPENSION 100 UNIT/ML</b>                         |                           | OTC                 |
| <b>NOVOLIN R INJECTION SOLUTION 100 UNIT/ML</b>                              |                           | OTC                 |
| <b>NOVOLIN R RELION INJECTION SOLUTION 100 UNIT/ML</b>                       |                           | OTC                 |
| <b>NOVOLOG FLEXPEN RELION SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML</b> | insulin aspart flexpen    |                     |
| <b>NOVOLOG FLEXPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML</b>        | insulin aspart flexpen    |                     |
| <b>NOVOLOG INJECTION SOLUTION 100 UNIT/ML</b>                                | insulin aspart            |                     |
| <b>NOVOLOG PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE 100 UNIT/ML</b>           | insulin aspart penfill    |                     |
| <b>NOVOLOG RELION INJECTION SOLUTION 100 UNIT/ML</b>                         | insulin aspart            |                     |
| <b>SEMGLEE (YFGN) SUBCUTANEOUS SOLUTION 100 UNIT/ML</b>                      | insulin glargine-yfgn     |                     |
| <b>SEMGLEE (YFGN) SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML</b>         | insulin glargine-yfgn     |                     |
| <b>SEMGLEE SUBCUTANEOUS SOLUTION 100 UNIT/ML</b>                             | insulin glargine          |                     |
| <b>SEMGLEE SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML</b>                | insulin glargine solostar |                     |

| Formulary Drug Name   | Reference | Restrictions                                  |
|---|-----------|---|
| <b>*Incretin Mimetic Agents (Glp-1 Receptor Agonists)***</b>  |           |   |
| <b>BYETTA 10 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 10 MCG/0.04ML</b>                                     |           | PA; QLL (3 ML per 28 days); AL (Min 18 Years) |
| <b>BYETTA 5 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 5 MCG/0.02ML</b>                                       |           | PA; QLL (2 ML per 28 days); AL (Min 18 Years) |
| <b>TRULICITY SUBCUTANEOUS SOLUTION PEN-INJECTOR 0.75 MG/0.5ML, 1.5 MG/0.5ML, 3 MG/0.5ML, 4.5 MG/0.5ML</b>     |           | PA; QLL (4 EA per 28 days); AL (Min 18 Years) |
| <b>VICTOZA SUBCUTANEOUS SOLUTION PEN-INJECTOR 18 MG/3ML</b>   |           | PA; QLL (0.3 ML per 1 day); AL (Min 18 Years) |
| <b>*Meglitinide Analogues***</b>  |           |   |
| <i>nateglinide oral tablet 120 mg, 60 mg</i>  |           |   |
| <i>repaglinide oral tablet 0.5 mg, 1 mg, 2 mg</i>   |           |   |
| <b>*Sodium-Glucose Co-Transporter 2 (SglT2) Inhibitors***</b>   |           |   |
| <b>FARXIGA ORAL TABLET 10 MG, 5 MG</b>  |           | QLL (1 EA per 1 day); AL (Min 18 Years)       |
| <b>INVOKANA ORAL TABLET 100 MG</b>  |           | QLL (2 EA per 1 day); AL (Min 18 Years)       |
| <b>INVOKANA ORAL TABLET 300 MG</b>  |           | QLL (1 EA per 1 day); AL (Min 18 Years)       |
| <b>JARDIANCE ORAL TABLET 10 MG, 25 MG</b>   |           | QLL (1 EA per 1 day); AL (Min 10 Years)       |
| <b>*Sodium-Glucose Co-Transporter 2 Inhibitor-Biguanide Comb***</b>   |           |   |
| <b>INVOKAMET ORAL TABLET 150-1000 MG, 150-500 MG, 50-1000 MG, 50-500 MG</b>                                   |           | AL (Min 18 Years)                             |
| <b>SYNJARDY ORAL TABLET 12.5-1000 MG, 12.5-500 MG, 5-1000 MG, 5-500 MG</b>                                    |           | AL (Min 10 Years)                             |
| <b>XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-1000 MG, 10-500 MG, 2.5-1000 MG, 5-1000 MG, 5-500 MG</b> |           | AL (Min 18 Years)                             |
| <b>*Sulfonylurea-Biguanide Combinations***</b>  |           |   |
| <i>glipizide-metformin hcl oral tablet 2.5-250 mg, 2.5-500 mg, 5-500 mg</i>                                   |           |   |
| <i>glyburide-metformin oral tablet 1.25-250 mg, 2.5-500 mg, 5-500 mg</i>                                      |           |   |

| <b>Formulary Drug Name</b>   | <b>Reference</b> | <b>Restrictions</b> |
|--|------------------|---------------------|
| <b>*Sulfonylureas***</b>   |                  |                     |
| <i>glimepiride oral tablet 1 mg, 2 mg, 4 mg</i>                              |                  |                     |
| <i>glipizide er oral tablet extended release 24 hour 10 mg, 2.5 mg, 5 mg</i> | Glucotrol XL     |                     |
| <i>glipizide oral tablet 10 mg, 5 mg</i>                                     |                  |                     |
| <i>glipizide xl oral tablet extended release 24 hour 10 mg, 2.5 mg, 5 mg</i> | Glucotrol XL     |                     |
| <i>glyburide micronized oral tablet 1.5 mg, 3 mg, 6 mg</i>                   | Glynase          |                     |
| <i>glyburide oral tablet 1.25 mg, 2.5 mg, 5 mg</i>                           |                  |                     |
| <b>*Thiazolidinediones***</b>  |                  |                     |
| <i>pioglitazone hcl oral tablet 15 mg, 30 mg, 45 mg</i>                      | Actos            |                     |
| <b>*Antidiarrheal/Probiotic Agents*</b>                                      |                  |                     |
| <b>*Antidiarrheal/Probiotic Agents - Misc.***</b>                            |                  |                     |
| <b>4X PROBIOTIC ORAL TABLET</b>  | 4x probiotic     | OTC                 |
| <i>acidophilus oral capsule</i>  | Abatinex         | OTC                 |
| <i>acidophilus oral tablet</i>   | Floranex         | OTC                 |
| <b>ACIDOPHILUS PROBIOTIC BLEND ORAL TABLET</b>                               | 4x probiotic     | OTC                 |
| <b>ACIDOPHILUS PROBIOTIC COMPLEX ORAL TABLET</b>                             | 4x probiotic     | OTC                 |
| <i>acidophilus probiotic formula oral tablet</i>                             | Floranex         | OTC                 |
| <i>acidophilus probiotic oral tablet , 10 mg</i>                             | Floranex         | OTC                 |
| <b>ACIDOPHILUS XTRA ORAL TABLET</b>  | 4x probiotic     | OTC                 |
| <i>acidophilus/l-sporogenes oral tablet</i>                                  | Floranex         | OTC                 |
| <b>BACID ORAL TABLET</b>   | 4x probiotic     | OTC                 |
| <i>bismatrol oral suspension 262 mg/15ml</i>                                 | Pepto-Bismol     | OTC                 |
| <i>bismatrol oral tablet chewable 262 mg</i>                                 | Soothe           | OTC                 |
| <i>bismuth oral tablet chewable 262 mg</i>                                   | Soothe           | OTC                 |
| <i>bismuth subsalicylate oral tablet chewable 262 mg</i>                     | Soothe           | OTC                 |
| <b>CVS ACIDOPHILUS PROBIOTIC ORAL TABLET</b>                                 | acidophilus      | OTC                 |
| <i>cvs bismuth oral tablet chewable 262 mg</i>                               | Soothe           | OTC                 |
| <i>cvs stomach relief oral tablet chewable 262 mg</i>                        | Soothe           | OTC                 |
| <i>eq pink-bismuth oral tablet chewable 262 mg</i>                           | Soothe           | OTC                 |
| <i>eq stomach relief oral tablet chewable 262 mg</i>                         | Soothe           | OTC                 |

| <b>Formulary Drug Name</b>                                       | <b>Reference</b>              | <b>Restrictions</b> |
|--|-------------------------------|---------------------|
| <b>EQL 2 IN 1 PROBIOTIC ORAL TABLET</b>                          | 4x probiotic                  | OTC                 |
| <b>EQL 4X PROBIOTIC ORAL TABLET</b>                              | 4x probiotic                  | OTC                 |
| <i>eql stomach relief oral tablet chewable 262 mg</i>            | Soothe                        | OTC                 |
| <i>flora assist oral packet</i>                                  | Floranex                      | OTC                 |
| <i>floranex oral packet</i>                                      | Floranex                      | OTC                 |
| <i>floranex oral tablet</i>                                      | Floranex                      | OTC                 |
| <b>GNP 4X PROBIOTIC ORAL TABLET</b>                              | 4x probiotic                  | OTC                 |
| <i>gnp pink bismuth oral tablet 262 mg</i>                       | Pepto-Bismol                  | OTC                 |
| <i>gnp pink bismuth oral tablet chewable 262 mg</i>              | Soothe                        | OTC                 |
| <b>HM 4X PROBIOTIC ORAL TABLET</b>                               | 4x probiotic                  | OTC                 |
| <i>hm acidophilus probiotic oral tablet</i>                      | Floranex                      | OTC                 |
| <i>hm stomach relief oral tablet chewable 262 mg</i>             | Soothe                        | OTC                 |
| <b>LACTINEX ORAL PACKET</b>                                      | probiotic childrens           | OTC                 |
| <i>lactinex oral tablet chewable</i>                             | Culturelle Prenatal Wellness  | OTC                 |
| <i>lactobacillus oral tablet</i>                                 | Floranex                      | OTC                 |
| <i>medi-bismuth oral tablet chewable 262 mg</i>                  | Soothe                        | OTC                 |
| <b>PA PROBIOTIC COMPLEX ORAL TABLET</b>                          | 4x probiotic                  | OTC                 |
| <i>peptic relief oral tablet chewable 262 mg</i>                 | Soothe                        | OTC                 |
| <b>PEPTO-BISMOL MAX STRENGTH ORAL SUSPENSION 525 MG/15ML</b>     | pink bismuth maximum strength | OTC                 |
| <b>PEPTO-BISMOL ORAL SUSPENSION 262 MG/15ML</b>                  | bismatrol                     | OTC                 |
| <b>PEPTO-BISMOL ORAL TABLET 262 MG</b>                           | gnp pink bismuth              | OTC                 |
| <b>PEPTO-BISMOL ORAL TABLET CHEWABLE 262 MG</b>                  | bismatrol                     | OTC                 |
| <b>PEPTO-BISMOL TO-GO ORAL TABLET CHEWABLE 262 MG</b>            | bismatrol                     | OTC                 |
| <i>pink bismuth maximum strength oral suspension 525 mg/15ml</i> | Pepto-Bismol Max Strength     | OTC                 |
| <i>probiata oral tablet</i>                                      | Floranex                      | OTC                 |
| <i>probiotic acidophilus oral tablet</i>                         | Floranex                      | OTC                 |
| <i>probiotic childrens oral packet</i>                           | Floranex                      | OTC                 |
| <i>probiotic childrens oral tablet chewable</i>                  | Culturelle Prenatal Wellness  | OTC                 |
| <b>PROBIOTIC MULTI-ENZYME ORAL TABLET</b>                        | 4x probiotic                  | OTC                 |
| <b>PROVELLA ORAL TABLET</b>                                      | 4x probiotic                  | OTC                 |
| <i>px stomach relief oral tablet chewable 262 mg</i>             | Soothe                        | OTC                 |

| <b>Formulary Drug Name</b>                               | <b>Reference</b>          | <b>Restrictions</b> |
|--|---------------------------|---------------------|
| <i>qc pink bismuth oral tablet chewable 262 mg</i>       | Soothe                    | OTC                 |
| <i>ra pink bismuth oral tablet chewable 262 mg</i>       | Soothe                    | OTC                 |
| <b>RA PROBIOTIC COMPLEX ORAL TABLET</b>                  | 4x probiotic              | OTC                 |
| <b>RA PROBIOTIC DIGESTIVE CARE ORAL TABLET</b>           | 4x probiotic              | OTC                 |
| <i>ra stomach relief oral tablet chewable 262 mg</i>     | Soothe                    | OTC                 |
| <b>RISA-BID PROBIOTIC ORAL TABLET</b>                    | 4x probiotic              | OTC                 |
| <b>SM 4X PROBIOTIC ORAL TABLET</b>                       | 4x probiotic              | OTC                 |
| <i>sm stomach relief oral tablet chewable 262 mg</i>     | Soothe                    | OTC                 |
| <i>soothe oral tablet chewable 262 mg</i>                | Soothe                    | OTC                 |
| <i>stomach relief oral tablet chewable 262 mg</i>        | Soothe                    | OTC                 |
| <b>TRIPLE PROBIOTIC ORAL TABLET</b>                      | 4x probiotic              | OTC                 |
| <b>*Antidiarrheal/Probiotic Combinations***</b>          |                           |                     |
| <b>ACIDOPHILUS/CITRUS PECTIN ORAL TABLET</b>             | acidophilus/citrus pectin | OTC                 |
| <i>acidophilus/pectin oral capsule</i>                   |                           | OTC                 |
| <i>eql probiotic acidophilus oral capsule</i>            |                           | OTC                 |
| <b>KALA ORAL TABLET</b>                                  | acidophilus/citrus pectin | OTC                 |
| <i>probiotic formula oral capsule 1-250 billion-mg</i>   |                           | OTC                 |
| <i>probiotic-prebiotic oral capsule 1-250 billion-mg</i> |                           | OTC                 |
| <b>*Antiperistaltic Agents***</b>                        |                           |                     |
| <i>anti-diarrheal oral capsule 2 mg</i>                  | Imodium A-D               | OTC                 |
| <i>cvs anti-diarrheal oral capsule 2 mg</i>              | Imodium A-D               | OTC                 |
| <i>diphenoxylate-atropine oral tablet 2.5-0.025 mg</i>   | Lomotil                   |                     |
| <i>eq anti-diarrheal oral capsule 2 mg</i>               | Imodium A-D               | OTC                 |
| <i>gnp anti-diarrheal oral capsule 2 mg</i>              | Imodium A-D               | OTC                 |
| <i>hm loperamide hcl oral capsule 2 mg</i>               | Imodium A-D               | OTC                 |
| <b>IMODIUM A-D ORAL LIQUID 1 MG/7.5ML</b>                | loperamide hcl            | OTC                 |
| <b>IMODIUM A-D ORAL TABLET 2 MG</b>                      | loperamide hcl            | OTC                 |
| <i>loperamide hcl oral capsule 2 mg</i>                  | Imodium A-D               |                     |
| <i>loperamide hcl oral suspension 1 mg/7.5ml</i>         | Imodium A-D               | OTC                 |
| <i>loperamide hcl oral tablet 2 mg</i>                   | Imodium A-D               | OTC                 |
| <i>ra anti-diarrheal oral capsule 2 mg</i>               | Imodium A-D               | OTC                 |
| <i>sm anti-diarrheal oral capsule 2 mg</i>               | Imodium A-D               | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b>    | <b>Restrictions</b>         |
|---|---------------------|-----------------------------|
| <i>tgt loperamide hcl oral capsule 2 mg</i>                       | Imodium A-D         | OTC                         |
| <b>*Antidotes And Specific Antagonists*</b>                       |                     |                             |
| <b>*Antidotes - Chelating Agents***</b>                           |                     |                             |
| <b>CHEMET ORAL CAPSULE 100 MG</b>                                 |                     |                             |
| <b>*Opioid Antagonists***</b>                                     |                     |                             |
| <b>KLOXXADO NASAL LIQUID 8 MG/0.1ML</b>                           |                     |                             |
| <i>naloxone hcl injection solution 0.4 mg/ml, 4 mg/10ml</i>       |                     |                             |
| <i>naloxone hcl injection solution cartridge 0.4 mg/ml</i>        |                     |                             |
| <i>naloxone hcl injection solution prefilled syringe 2 mg/2ml</i> |                     |                             |
| <i>naloxone hcl nasal liquid 4 mg/0.1ml</i>                       | Narcan              |                             |
| <i>naltrexone hcl oral tablet 50 mg</i>                           |                     |                             |
| <b>NARCAN NASAL LIQUID 4 MG/0.1ML</b>                             | naloxone hcl        |                             |
| <b>VIVITROL INTRAMUSCULAR SUSPENSION RECONSTITUTED 380 MG</b>     |                     | QLL (2 EA per 30 days)      |
| <b>ZIMHI INJECTION SOLUTION PREFILLED SYRINGE 5 MG/0.5ML</b>      |                     |                             |
| <b>*Antiemetics*</b>  |                     |                             |
| <b>*5-Ht3 Receptor Antagonists***</b>                             |                     |                             |
| <i>granisetron hcl oral tablet 1 mg</i>                           |                     | ST; QLL (10 EA per 34 days) |
| <i>ondansetron hcl oral solution 4 mg/5ml</i>                     |                     |                             |
| <i>ondansetron hcl oral tablet 24 mg</i>                          |                     | QLL (15 EA per 34 days)     |
| <i>ondansetron hcl oral tablet 4 mg, 8 mg</i>                     |                     | QLL (60 EA per 1 Fill)      |
| <i>ondansetron oral tablet dispersible 4 mg, 8 mg</i>             |                     | QLL (60 EA per 1 Fill)      |
| <b>*Antiemetics - Anticholinergic***</b>                          |                     |                             |
| <i>cvs motion sickness relief oral tablet chewable 25 mg</i>      | Antivert            | OTC                         |
| <i>dimenhydrinate oral tablet 50 mg</i>                           | Driminate           | OTC                         |
| <b>DRAMAMINE ORAL TABLET 25 MG</b>                                | meclizine hcl       | OTC                         |
| <b>DRAMAMINE ORAL TABLET CHEWABLE 50 MG</b>                       |                     | OTC                         |
| <b>DRIMINATE ORAL TABLET 50 MG</b>                                | cvs motion sickness | OTC                         |
| <i>meclizine hcl oral tablet 12.5 mg</i>                          |                     |                             |
| <i>meclizine hcl oral tablet 25 mg</i>                            | Dramamine           |                             |
| <i>meclizine hcl oral tablet chewable 25 mg</i>                   | Antivert            |                             |

| <b>Formulary Drug Name</b>  | <b>Reference</b>       | <b>Restrictions</b>      |
|---|------------------------|--------------------------|
| <i>motion sickness relief oral tablet chewable 25 mg</i>              | Antivert               | OTC                      |
| <i>motion-time oral tablet chewable 25 mg</i>                         | Antivert               | OTC                      |
| <i>ra motion sickness relief oral tablet chewable 25 mg</i>           | Antivert               | OTC                      |
| <i>travel sickness oral tablet chewable 25 mg</i>                     | Antivert               | OTC                      |
| <b>*Antiemetics - Miscellaneous***</b>                                |                        |                          |
| <i>dronabinol oral capsule 10 mg, 5 mg</i>                            |                        | PA                       |
| <i>dronabinol oral capsule 2.5 mg</i>                                 | Marinol                | PA                       |
| <b>*Substance P/Neurokinin 1 (Nk1) Receptor Antagonists***</b>        |                        |                          |
| <i>aprepitant oral capsule 125 mg</i>                                 |                        | QLL (3 EA per 34 days)   |
| <i>aprepitant oral capsule 40 mg</i>                                  |                        | QLL (4 EA per 34 days)   |
| <i>aprepitant oral capsule 80 &amp; 125 mg</i>                        | Emend Tri-Pack         | QLL (3 Caps per 34 days) |
| <i>aprepitant oral capsule 80 mg</i>                                  | Emend                  | QLL (2 EA per 34 days)   |
| <b>*Antifungals*</b>  |                        |                          |
| <b>*Antifungals***</b>  |                        |                          |
| <i>griseofulvin microsize oral suspension 125 mg/5ml</i>              |                        |                          |
| <i>griseofulvin microsize oral tablet 500 mg</i>                      |                        | ST                       |
| <i>griseofulvin ultramicrosize oral tablet 125 mg, 250 mg</i>         |                        | ST                       |
| <i>nystatin oral tablet 500000 unit</i>                               |                        |                          |
| <i>terbinafine hcl oral tablet 250 mg</i>                             |                        |                          |
| <b>*Imidazoles***</b>   |                        |                          |
| <i>ketoconazole oral tablet 200 mg</i>                                |                        |                          |
| <b>*Triazoles***</b>  |                        |                          |
| <i>fluconazole oral suspension reconstituted 10 mg/ml, 40 mg/ml</i>   | Diflucan               |                          |
| <i>fluconazole oral tablet 100 mg, 150 mg, 200 mg</i>                 | Diflucan               |                          |
| <i>fluconazole oral tablet 50 mg</i>                                  |                        |                          |
| <i>itraconazole oral capsule 100 mg</i>                               | Sporanox               |                          |
| <i>voriconazole oral tablet 200 mg, 50 mg</i>                         | Vfend                  | PA                       |
| <b>*Antihistamines*</b>   |                        |                          |
| <b>*Antihistamines - Alkylamines***</b>                               |                        |                          |
| <i>chlorpheniramine maleate er oral tablet extended release 12 mg</i> | Chlor-Trimeton Allergy | OTC                      |
| <i>chlorpheniramine maleate oral tablet 4 mg</i>                      | Wal-finate             | OTC                      |



| <b>Formulary Drug Name</b>   | <b>Reference</b>               | <b>Restrictions</b>           |
|--|--------------------------------|-------------------------------|
| <b>CHLOR-TRIMETON ALLERGY ORAL TABLET EXTENDED RELEASE 12 MG</b>   | chlorpheniramine maleate er    | OTC                           |
| <b>CHLOR-TRIMETON ORAL TABLET 4 MG</b>                             | chlorpheniramine maleate       | OTC                           |
| <i>diabetic tussin allergy oral syrup 2 mg/5ml</i>                 | Diabetic Tussin Allergy        | OTC                           |
| <i>ed chlorped jr oral syrup 2 mg/5ml</i>                          | Diabetic Tussin Allergy        | OTC; QLL (120 ML per 30 days) |
| <b>HISTEX PD ORAL LIQUID 0.938 MG/ML</b>                           | triprolidine hcl               | OTC                           |
| <i>triprolidine hcl oral liquid 0.625 mg/ml</i>                    | PediaClear PD Childrens        | OTC                           |
| <i>triprolidine hcl oral liquid 0.938 mg/ml</i>                    | Histex PD                      | OTC                           |
| <i>triprolidine hcl oral syrup 2.5 mg/5ml</i>                      | Histex                         | OTC                           |
| <b>*Antihistamines - Ethanolamines***</b>                          |                                |                               |
| <i>allergy childrens oral liquid 12.5 mg/5ml</i>                   | Banophen                       | OTC                           |
| <i>allergy relief childrens oral liquid 12.5 mg/5ml</i>            | Banophen                       | OTC                           |
| <i>allergy relief childrens oral tablet dispersible 12.5 mg</i>    | Wal-Dryl Allergy Rel Childrens | OTC                           |
| <i>banophen oral capsule 50 mg</i>                                 | Banophen                       | OTC                           |
| <i>banophen oral liquid 12.5 mg/5ml</i>                            | Banophen                       | OTC                           |
| <b>BENADRYL ALLERGY ORAL CAPSULE 25 MG</b>                         | diphenhydramine hcl            | OTC                           |
| <b>BENADRYL ALLERGY ORAL TABLET 25 MG</b>                          | diphenhydramine hcl            | OTC                           |
| <i>childrens allergy oral liquid 12.5 mg/5ml</i>                   | Banophen                       | OTC                           |
| <i>clemastine fumarate oral tablet 1.34 mg</i>                     | Dayhist Allergy 12 Hour Relief | OTC                           |
| <i>cvs allergy relief adult oral liquid 50 mg/20ml</i>             | Banophen                       | OTC                           |
| <i>cvs allergy relief oral liquid 25 mg/10ml</i>                   | Banophen                       | OTC                           |
| <i>cvs childrens allergy oral liquid 12.5 mg/5ml</i>               | Banophen                       | OTC                           |
| <b>DAYHIST ALLERGY 12 HOUR RELIEF ORAL TABLET 1.34 MG</b>          | clemastine fumarate            | OTC                           |
| <i>diphenhist oral liquid 12.5 mg/5ml</i>                          | Banophen                       | OTC                           |
| <i>diphenhydramine hcl oral capsule 25 mg</i>                      | Benadryl Allergy               |                               |
| <i>diphenhydramine hcl oral capsule 50 mg</i>                      | Banophen                       |                               |
| <i>diphenhydramine hcl oral elixir 12.5 mg/5ml</i>                 |                                |                               |
| <i>diphenhydramine hcl oral liquid 6.25 mg/ml</i>                  |                                | OTC                           |
| <i>diphenhydramine hcl oral tablet 25 mg</i>                       | Benadryl Allergy               | OTC                           |
| <i>eq allergy relief childrens oral liquid 12.5 mg/5ml</i>         | Banophen                       | OTC                           |
| <i>eq allergy relief childrens oral tablet dispersible 12.5 mg</i> | Wal-Dryl Allergy Rel Childrens | OTC                           |

| <b>Formulary Drug Name</b>  | <b>Reference</b>               | <b>Restrictions</b> |
|---|--------------------------------|---------------------|
| <i>eql allergy relief childrens oral tablet dispersible 12.5 mg</i>   | Wal-Dryl Allergy Rel Childrens | OTC                 |
| <i>eql childrens allergy oral liquid 12.5 mg/5ml</i>                  | Banophen                       | OTC                 |
| <i>gnp allergy relief oral tablet chewable 12.5 mg</i>                | Benadryl Allergy Childrens     | OTC                 |
| <i>gnp childrens allergy oral liquid 12.5 mg/5ml</i>                  | Banophen                       | OTC                 |
| <i>hm allergy relief childrens oral liquid 12.5 mg/5ml</i>            | Banophen                       | OTC                 |
| <i>naramin oral liquid 12.5 mg/5ml</i>                                | Banophen                       | OTC                 |
| <i>pediacare childrens allergy oral liquid 12.5 mg/5ml</i>            | Banophen                       | OTC                 |
| <i>px allergy oral liquid 12.5 mg/5ml</i>                             | Banophen                       | OTC                 |
| <b>PX DAYHIST ALLERGY ORAL TABLET 1.34 MG</b>                         | clemastine fumarate            | OTC                 |
| <i>ra allergy medication oral liquid 12.5 mg/5ml</i>                  | Banophen                       | OTC                 |
| <i>ra allergy oral liquid 12.5 mg/5ml</i>                             | Banophen                       | OTC                 |
| <i>ra allergy relief childrens oral liquid 12.5 mg/5ml</i>            | Banophen                       | OTC                 |
| <i>ra allergy relief childrens oral tablet dispersible 12.5 mg</i>    | Wal-Dryl Allergy Rel Childrens | OTC                 |
| <i>ra diphedryl allergy oral liquid 12.5 mg/5ml</i>                   | Banophen                       | OTC                 |
| <i>sb allergy medicine oral liquid 12.5 mg/5ml</i>                    | Banophen                       | OTC                 |
| <i>siladryl allergy oral liquid 12.5 mg/5ml</i>                       | Banophen                       | OTC                 |
| <i>sm allergy relief childrens oral liquid 12.5 mg/5ml</i>            | Banophen                       | OTC                 |
| <i>sm allergy relief oral liquid 12.5 mg/5ml</i>                      | Banophen                       | OTC                 |
| <i>tgt allergy melts childrens oral tablet dispersible 12.5 mg</i>    | Wal-Dryl Allergy Rel Childrens | OTC                 |
| <i>tgt allergy relief childrens oral liquid 12.5 mg/5ml</i>           | Banophen                       | OTC                 |
| <i>total allergy medicine oral liquid 12.5 mg/5ml</i>                 | Banophen                       | OTC                 |
| <i>wal-dryl allergy childrens oral liquid 12.5 mg/5ml</i>             | Banophen                       | OTC                 |
| <i>wal-dryl allergy oral liquid 12.5 mg/5ml</i>                       | Banophen                       | OTC                 |
| <i>wal-dryl allergy rel childrens oral tablet dispersible 12.5 mg</i> | Wal-Dryl Allergy Rel Childrens | OTC                 |
| <b>*Antihistamines - Non-Sedating***</b>                              |                                |                     |
| <i>24hr allergy relief oral tablet 180 mg</i>                         | KLS Aller-Fex                  | OTC                 |
| <i>alavert oral tablet dispersible 10 mg</i>                          | Alavert                        | OTC                 |
| <b>ALLEGRA ALLERGY CHILDRENS ORAL TABLET DISPERSIBLE 30 MG</b>        |                                | OTC                 |

| <b>Formulary Drug Name</b>                                 | <b>Reference</b>             | <b>Restrictions</b>       |
|--|------------------------------|---------------------------|
| <i>allergy relief oral tablet 180 mg</i>                   | KLS Aller-Fex                | OTC                       |
| <i>allergy relief oral tablet dispersible 10 mg</i>        | Alavert                      | OTC                       |
| <i>allergy relief/indoor/outdoor oral tablet 180 mg</i>    | KLS Aller-Fex                | OTC                       |
| <i>cetirizine hcl childrens oral solution 5 mg/5ml</i>     | KLS Aller-Tec Childrens      | OTC                       |
| <i>cetirizine hcl oral solution 1 mg/ml</i>                | KLS Aller-Tec Childrens      |                           |
| <i>cetirizine hcl oral tablet 10 mg</i>                    | KLS Aller-Tec                | OTC                       |
| <i>cetirizine hcl oral tablet 5 mg</i>                     |                              | OTC                       |
| <b>CLARITIN CHILDRENS ORAL TABLET CHEWABLE 5 MG</b>        | cvs allergy relief childrens | OTC                       |
| <b>CLARITIN ORAL CAPSULE 10 MG</b>                         | loratadine                   | OTC                       |
| <b>CLARITIN ORAL TABLET CHEWABLE 5 MG</b>                  | cvs allergy relief childrens | OTC                       |
| <b>CLARITIN REDITABS ORAL TABLET DISPERSIBLE 5 MG</b>      | cvs allergy relief           | OTC                       |
| <i>cvs allergy relief oral tablet 180 mg</i>               | KLS Aller-Fex                | OTC                       |
| <i>cvs allergy relief oral tablet dispersible 10 mg</i>    | Alavert                      | OTC                       |
| <i>eq allergy relief oral tablet 180 mg</i>                | KLS Aller-Fex                | OTC                       |
| <i>eql aller-ease oral tablet 180 mg</i>                   | KLS Aller-Fex                | OTC                       |
| <i>fexofenadine hcl oral tablet 180 mg</i>                 | KLS Aller-Fex                | OTC                       |
| <i>gnp allergy relief oral tablet 180 mg</i>               | KLS Aller-Fex                | OTC                       |
| <i>gnp allergy relief oral tablet dispersible 10 mg</i>    | Alavert                      | OTC                       |
| <i>goodsense aller-ease oral tablet 180 mg</i>             | KLS Aller-Fex                | OTC                       |
| <i>hm allergy relief oral tablet dispersible 10 mg</i>     | Alavert                      | OTC                       |
| <i>hm fexofenadine hcl oral tablet 180 mg</i>              | KLS Aller-Fex                | OTC                       |
| <b>KLS ALLER-FEX ORAL TABLET 180 MG</b>                    | 24hr allergy relief          | OTC                       |
| <i>levocetirizine dihydrochloride oral tablet 5 mg</i>     | Xyzal Allergy 24HR           |                           |
| <i>loratadine oral capsule 10 mg</i>                       | Claritin                     | OTC                       |
| <i>loratadine oral tablet 10 mg</i>                        | Claritin                     | OTC                       |
| <i>loratadine oral tablet chewable 5 mg</i>                | Claritin                     | OTC; QLL (2 EA per 1 day) |
| <i>meijer allergy relief oral tablet dispersible 10 mg</i> | Alavert                      | OTC                       |
| <i>px allergy relief oral tablet 180 mg</i>                | KLS Aller-Fex                | OTC                       |
| <i>px allergy relief oral tablet dispersible 10 mg</i>     | Alavert                      | OTC                       |
| <i>qc allergy relief oral tablet dispersible 10 mg</i>     | Alavert                      | OTC                       |
| <i>ra allergy relief oral tablet 180 mg</i>                | KLS Aller-Fex                | OTC                       |
| <i>ra allergy relief oral tablet dispersible 10 mg</i>     | Alavert                      | OTC                       |
| <i>ra loratadine oral tablet dispersible 10 mg</i>         | Alavert                      | OTC                       |
| <i>sb allergy relief oral tablet dispersible 10 mg</i>     | Alavert                      | OTC                       |

| <b>Formulary Drug Name</b>  | <b>Reference</b>    | <b>Restrictions</b>      |
|---|---------------------|--------------------------|
| <i>sm allergy relief oral tablet dispersible 10 mg</i>            | Alavert             | OTC                      |
| <i>sm fexofenadine hcl oral tablet 180 mg</i>                     | KLS Aller-Fex       | OTC                      |
| <i>sm loratadine allergy relief oral tablet dispersible 10 mg</i> | Alavert             | OTC                      |
| <i>tgt allergy relief oral tablet dispersible 10 mg</i>           | Alavert             | OTC                      |
| <i>triaminic allerchews oral tablet dispersible 10 mg</i>         | Alavert             | OTC                      |
| <b>WAL-FEX ALLERGY ORAL TABLET 180 MG</b>                         | 24hr allergy relief | OTC                      |
| <i>wal-itin allergy reditabs oral tablet dispersible 10 mg</i>    | Alavert             | OTC                      |
| <i>wal-itin aller-melts oral tablet dispersible 10 mg</i>         | Alavert             | OTC                      |
| <i>wal-itin oral tablet dispersible 10 mg</i>                     | Alavert             | OTC                      |
| <i>wal-vert oral tablet dispersible 10 mg</i>                     | Alavert             | OTC                      |
| <b>*Antihistamines - Phenothiazines***</b>                        |                     |                          |
| <i>promethazine hcl oral solution 6.25 mg/5ml</i>                 |                     | AL (Min 2 Years)         |
| <i>promethazine hcl oral syrup 6.25 mg/5ml</i>                    |                     | AL (Min 2 Years)         |
| <i>promethazine hcl oral tablet 12.5 mg, 25 mg, 50 mg</i>         |                     | AL (Min 2 Years)         |
| <i>promethazine hcl rectal suppository 12.5 mg, 25 mg</i>         | Promethegan         | AL (Min 2 Years)         |
| <i>promethegan rectal suppository 12.5 mg, 25 mg</i>              | Promethegan         | AL (Min 2 Years)         |
| <i>promethegan rectal suppository 50 mg</i>                       |                     | AL (Min 2 Years)         |
| <b>*Antihistamines - Piperidines***</b>                           |                     |                          |
| <i>cyproheptadine hcl oral syrup 2 mg/5ml</i>                     |                     |                          |
| <i>cyproheptadine hcl oral tablet 4 mg</i>                        |                     |                          |
| <b>*Antihyperlipidemics*</b>                                      |                     |                          |
| <b>*Antihyperlipidemics - Misc.***</b>                            |                     |                          |
| <i>icosapent ethyl oral capsule 0.5 gm</i>                        | Vascepa             | PA; QLL (8 EA per 1 day) |
| <i>icosapent ethyl oral capsule 1 gm</i>                          | Vascepa             | PA; QLL (4 EA per 1 day) |
| <i>omega-3-acid ethyl esters oral capsule 1 gm</i>                | Lovaza              |                          |
| <b>*Bile Acid Sequestrants***</b>                                 |                     |                          |
| <i>cholestyramine light oral packet 4 gm</i>                      | Prevalite           |                          |
| <i>cholestyramine light oral powder 4 gm/dose</i>                 | Prevalite           |                          |
| <i>cholestyramine oral packet 4 gm</i>                            | Questran            |                          |
| <i>cholestyramine oral powder 4 gm/dose</i>                       | Questran            |                          |
| <i>colestipol hcl oral tablet 1 gm</i>                            | Colestid            |                          |

| <b>Formulary Drug Name</b>   | <b>Reference</b> | <b>Restrictions</b> |
|--|------------------|---------------------|
| <i>prevalite oral packet 4 gm</i>  | Prevalite        |                     |
| <i>prevalite oral powder 4 gm/dose</i>   | Prevalite        |                     |
| <b>*Fibric Acid Derivatives***</b>   |                  |                     |
| <i>fenofibrate micronized oral capsule 134 mg, 200 mg, 67 mg</i>                           |                  |                     |
| <i>fenofibrate oral tablet 145 mg, 48 mg</i>   | Tricor           |                     |
| <i>fenofibrate oral tablet 160 mg, 54 mg</i>   |                  |                     |
| <i>gemfibrozil oral tablet 600 mg</i>  | Lopid            |                     |
| <b>*Hmg Coa Reductase Inhibitors***</b>  |                  |                     |
| <i>atorvastatin calcium oral tablet 10 mg, 20 mg, 40 mg, 80 mg</i>                         | Lipitor          |                     |
| <i>fluvastatin sodium oral capsule 20 mg, 40 mg</i>  |                  | ST                  |
| <i>lovastatin oral tablet 10 mg, 20 mg, 40 mg</i>  |                  |                     |
| <i>pravastatin sodium oral tablet 10 mg, 20 mg, 40 mg, 80 mg</i>                           |                  |                     |
| <i>rosuvastatin calcium oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>                          | Crestor          |                     |
| <i>simvastatin oral tablet 10 mg, 20 mg, 40 mg</i>   | Zocor            |                     |
| <i>simvastatin oral tablet 5 mg, 80 mg</i>   |                  |                     |
| <b>*Intestinal Cholesterol Absorption Inhibitors***</b>                                    |                  |                     |
| <i>ezetimibe oral tablet 10 mg</i>   | Zetia            |                     |
| <b>*Nicotinic Acid Derivatives***</b>  |                  |                     |
| <i>niacin er (antihyperlipidemic) oral tablet extended release 1000 mg, 500 mg, 750 mg</i> |                  |                     |
| <b>*Pcsk9 Inhibitors***</b>  |                  |                     |
| <b>REPATHA PUSHTRONEX SYSTEM SUBCUTANEOUS SOLUTION CARTRIDGE 420 MG/3.5ML</b>              |                  | PA                  |
| <b>REPATHA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 140 MG/ML</b>                           |                  | PA                  |
| <b>REPATHA SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML</b>                     |                  | PA                  |
| <b>*Antihypertensives*</b>   |                  |                     |
| <b>*Ace Inhibitor &amp; Calcium Channel Blocker Combinations***</b>                        |                  |                     |
| <i>amlodipine besy-benazepril hcl oral capsule 10-20 mg, 10-40 mg, 5-10 mg, 5-20 mg</i>    | Lotrel           |                     |

| <b>Formulary Drug Name</b>  | <b>Reference</b> | <b>Restrictions</b> |
|---|------------------|---------------------|
| <i>amlodipine besy-benazepril hcl oral capsule<br/>2.5-10 mg, 5-40 mg</i>                 |                  |                     |
| <b>*Ace Inhibitors &amp; Thiazide/Thiazide-Like***</b>                                    |                  |                     |
| <b>ACCURETIC ORAL TABLET 10-12.5 MG</b>   |                  |                     |
| <i>benazepril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg</i>        | Lotensin HCT     |                     |
| <i>benazepril-hydrochlorothiazide oral tablet 5-6.25 mg</i>                               |                  |                     |
| <i>enalapril-hydrochlorothiazide oral tablet 10-25 mg</i>                                 | Vaseretic        |                     |
| <i>enalapril-hydrochlorothiazide oral tablet 5-12.5 mg</i>                                |                  |                     |
| <i>lisinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg</i>        | Zestoretic       |                     |
| <i>quinapril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg</i>                   | Accuretic        |                     |
| <i>quinapril-hydrochlorothiazide oral tablet 20-25 mg</i>                                 |                  |                     |
| <b>*Ace Inhibitors***</b>   |                  |                     |
| <i>benazepril hcl oral tablet 10 mg, 20 mg, 40 mg</i>                                     | Lotensin         |                     |
| <i>benazepril hcl oral tablet 5 mg</i>  |                  |                     |
| <i>enalapril maleate oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg</i>                           | Vasotec          |                     |
| <i>fosinopril sodium oral tablet 10 mg, 20 mg, 40 mg</i>                                  |                  |                     |
| <i>lisinopril oral tablet 10 mg, 2.5 mg, 20 mg, 30 mg, 40 mg, 5 mg</i>                    | Zestril          |                     |
| <i>quinapril hcl oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>                                | Accupril         |                     |
| <i>ramipril oral capsule 1.25 mg, 10 mg, 2.5 mg, 5 mg</i>                                 | Altace           |                     |
| <i>trandolapril oral tablet 1 mg, 2 mg, 4 mg</i>  |                  |                     |
| <b>*Angiotensin Ii Receptor Antag &amp; Ca Channel Blocker Comb***</b>                    |                  |                     |
| <i>amlodipine besylate-valsartan oral tablet 10-160 mg, 10-320 mg, 5-160 mg, 5-320 mg</i> | Exforge          |                     |
| <i>amlodipine-olmesartan oral tablet 10-20 mg, 10-40 mg, 5-20 mg, 5-40 mg</i>             | Azor             |                     |



| <b>Formulary Drug Name</b>  | <b>Reference</b> | <b>Restrictions</b> |
|---|------------------|---------------------|
| <b>*Angiotensin II Receptor Antag &amp; Thiazide/Thiazide-Like***</b>                                       |                  |                     |
| <i>candesartan cilexetil-hctz oral tablet 16-12.5 mg, 32-12.5 mg, 32-25 mg</i>                              | Atacand HCT      | ST                  |
| <i>irbesartan-hydrochlorothiazide oral tablet 150-12.5 mg, 300-12.5 mg</i>                                  | Avalide          |                     |
| <i>losartan potassium-hctz oral tablet 100-12.5 mg, 100-25 mg, 50-12.5 mg</i>                               | Hyzaar           |                     |
| <i>olmesartan medoxomil-hctz oral tablet 20-12.5 mg, 40-12.5 mg, 40-25 mg</i>                               | Benicar HCT      |                     |
| <i>valsartan-hydrochlorothiazide oral tablet 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg, 80-12.5 mg</i> | Diovan HCT       |                     |
| <b>*Angiotensin II Receptor Antagonists***</b>  |                  |                     |
| <i>candesartan cilexetil oral tablet 16 mg, 32 mg, 4 mg, 8 mg</i>   | Atacand          | ST                  |
| <i>irbesartan oral tablet 150 mg, 300 mg, 75 mg</i>   | Avapro           |                     |
| <i>losartan potassium oral tablet 100 mg, 25 mg, 50 mg</i>  | Cozaar           |                     |
| <i>olmesartan medoxomil oral tablet 20 mg, 40 mg, 5 mg</i>  | Benicar          |                     |
| <i>valsartan oral tablet 160 mg, 320 mg, 40 mg, 80 mg</i>   | Diovan           |                     |
| <b>*Antiadrenergics - Centrally Acting***</b>   |                  |                     |
| <b>CATAPRES-TTS-1 TRANSDERMAL PATCH WEEKLY 0.1 MG/24HR</b>  | clonidine        |                     |
| <b>CATAPRES-TTS-2 TRANSDERMAL PATCH WEEKLY 0.2 MG/24HR</b>  | clonidine        |                     |
| <b>CATAPRES-TTS-3 TRANSDERMAL PATCH WEEKLY 0.3 MG/24HR</b>  | clonidine        |                     |
| <i>clonidine hcl er oral tablet extended release 24 hour 0.17 mg</i>  | Nexiclon XR      |                     |
| <i>clonidine hcl oral tablet 0.1 mg, 0.2 mg, 0.3 mg</i>   |                  |                     |
| <i>clonidine transdermal patch weekly 0.1 mg/24hr</i>   | Catapres-TTS-1   |                     |
| <i>clonidine transdermal patch weekly 0.2 mg/24hr</i>   | Catapres-TTS-2   |                     |
| <i>clonidine transdermal patch weekly 0.3 mg/24hr</i>   | Catapres-TTS-3   |                     |
| <i>guanfacine hcl oral tablet 1 mg, 2 mg</i>  |                  |                     |



| <b>Formulary Drug Name</b>   | <b>Reference</b>    | <b>Restrictions</b>  |
|--|---------------------|----------------------|
| <i>methyldopa oral tablet 250 mg, 500 mg</i>   |                     |                      |
| <b>*Antiadrenergics - Peripherally Acting***</b>                                     |                     |                      |
| <i>doxazosin mesylate oral tablet 1 mg, 2 mg, 4 mg</i>                               | Cardura             | QLL (1 EA per 1 day) |
| <i>doxazosin mesylate oral tablet 8 mg</i>   | Cardura             | QLL (2 EA per 1 day) |
| <i>prazosin hcl oral capsule 1 mg, 2 mg, 5 mg</i>                                    | Minipress           | QLL (4 EA per 1 day) |
| <i>terazosin hcl oral capsule 1 mg, 5 mg</i>   |                     | QLL (1 EA per 1 day) |
| <i>terazosin hcl oral capsule 10 mg, 2 mg</i>  |                     | QLL (2 EA per 1 day) |
| <b>*Beta Blocker &amp; Diuretic Combinations***</b>                                  |                     |                      |
| <i>atenolol-chlorthalidone oral tablet 100-25 mg</i>                                 | Tenoretic 100       |                      |
| <i>atenolol-chlorthalidone oral tablet 50-25 mg</i>                                  | Tenoretic 50        |                      |
| <i>bisoprolol-hydrochlorothiazide oral tablet 10-6.25 mg, 2.5-6.25 mg, 5-6.25 mg</i> |                     |                      |
| <i>metoprolol-hydrochlorothiazide oral tablet 100-25 mg, 100-50 mg, 50-25 mg</i>     |                     |                      |
| <b>*Selective Aldosterone Receptor Antagonists (Saras)***</b>                        |                     |                      |
| <i>eplerenone oral tablet 25 mg, 50 mg</i>   | Inspira             |                      |
| <b>*Vasodilators***</b>  |                     |                      |
| <i>hydralazine hcl oral tablet 10 mg, 100 mg, 25 mg, 50 mg</i>                       |                     |                      |
| <i>minoxidil oral tablet 10 mg, 2.5 mg</i>   |                     |                      |
| <b>*Anti-Infective Agents - Misc.*</b>   |                     |                      |
| <b>*Anti-Infective Agents - Misc.***</b>   |                     |                      |
| <i>metronidazole oral tablet 250 mg, 500 mg</i>                                      |                     |                      |
| <i>trimethoprim oral tablet 100 mg</i>   |                     |                      |
| <b>*Anti-Infective Misc. - Combinations***</b>                                       |                     |                      |
| <i>sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml</i>                   | Sulfatrim Pediatric |                      |
| <i>sulfamethoxazole-trimethoprim oral tablet 400-80 mg</i>                           | Bactrim             |                      |
| <i>sulfamethoxazole-trimethoprim oral tablet 800-160 mg</i>                          | Bactrim DS          |                      |
| <i>sulfatrim pediatric oral suspension 200-40 mg/5ml</i>                             | Sulfatrim Pediatric |                      |

| <b>Formulary Drug Name</b>   | <b>Reference</b> | <b>Restrictions</b>  |
|--|------------------|----------------------|
| <b>*Glycopeptides***</b>   |                  |                      |
| <b>FIRVANQ ORAL SOLUTION RECONSTITUTED 25 MG/ML, 50 MG/ML</b>          | vancomycin hcl   |                      |
| <i>vancomycin hcl oral capsule 125 mg, 250 mg</i>                      | Vancocin         |                      |
| <b>*Leprostatics***</b>  |                  |                      |
| <i>dapsone oral tablet 100 mg, 25 mg</i>                               |                  |                      |
| <b>*Lincosamides***</b>  |                  |                      |
| <i>clindamycin hcl oral capsule 150 mg, 300 mg, 75 mg</i>              | Cleocin          |                      |
| <i>clindamycin palmitate hcl oral solution reconstituted 75 mg/5ml</i> | Cleocin          |                      |
| <b>*Oxazolidinones***</b>  |                  |                      |
| <i>linezolid oral tablet 600 mg</i>                                    | Zyvox            | PA                   |
| <b>*Urinary Anti-Infectives***</b>                                     |                  |                      |
| <i>methenamine hippurate oral tablet 1 gm</i>                          | Hiprex           |                      |
| <i>methenamine mandelate oral tablet 0.5 gm, 1 gm</i>                  |                  |                      |
| <i>nitrofurantoin macrocrystal oral capsule 100 mg, 25 mg, 50 mg</i>   | Macrochantin     |                      |
| <i>nitrofurantoin monohyd macro oral capsule 100 mg</i>                | Macrobid         |                      |
| <i>nitrofurantoin oral suspension 25 mg/5ml</i>                        |                  | AL (Max 12 Years)    |
| <b>*Antimalarials*</b>   |                  |                      |
| <b>*Antimalarial Combinations***</b>                                   |                  |                      |
| <i>atovaquone-proguanil hcl oral tablet 250-100 mg</i>                 | Malarone         | QLL (1 EA per 1 day) |
| <i>atovaquone-proguanil hcl oral tablet 62.5-25 mg</i>                 | Malarone         | QLL (3 EA per 1 day) |
| <b>*Antimalarials***</b>   |                  |                      |
| <i>chloroquine phosphate oral tablet 250 mg, 500 mg</i>                |                  |                      |
| <i>hydroxychloroquine sulfate oral tablet 200 mg</i>                   | Plaquenil        |                      |
| <i>mefloquine hcl oral tablet 250 mg</i>                               |                  |                      |
| <i>primaquine phosphate oral tablet 26.3 mg</i>                        |                  | QLL (2 EA per 1 day) |
| <i>pyrimethamine oral tablet 25 mg</i>                                 | Daraprim         | PA                   |

| Formulary Drug Name                               | Reference | Restrictions                 |
|---|-----------|------------------------------|
| <b>*Antimyasthenic/Cholinergic Agents*</b>        |           |                              |
| <b>*Antimyasthenic/Cholinergic Agents***</b>      |           |                              |
| <i>pyridostigmine bromide oral tablet 60 mg</i>   | Mestinon  |                              |
| <b>*Antimycobacterial Agents*</b>                 |           |                              |
| <b>*Antimycobacterial Agents***</b>               |           |                              |
| <i>ethambutol hcl oral tablet 100 mg</i>          |           |                              |
| <i>ethambutol hcl oral tablet 400 mg</i>          | Myambutol |                              |
| <i>isoniazid oral syrup 50 mg/5ml</i>             |           |                              |
| <i>isoniazid oral tablet 100 mg, 300 mg</i>       |           |                              |
| <b>PRIFTIN ORAL TABLET 150 MG</b>                 |           |                              |
| <i>pyrazinamide oral tablet 500 mg</i>            |           |                              |
| <i>rifabutin oral capsule 150 mg</i>              | Mycobutin |                              |
| <i>rifampin oral capsule 150 mg, 300 mg</i>       |           |                              |
| <b>*Antineoplastics And Adjunctive Therapies*</b> |           |                              |
| <b>*Alkylating Agents***</b>                      |           |                              |
| <b>MYLERAN ORAL TABLET 2 MG</b>                   |           |                              |
| <b>*Androgen Biosynthesis Inhibitors***</b>       |           |                              |
| <i>abiraterone acetate oral tablet 250 mg</i>     | Zytiga    | PA                           |
| <b>*Antiadrenals***</b>                           |           |                              |
| <b>LYSODREN ORAL TABLET 500 MG</b>                |           |                              |
| <b>*Antiandrogens***</b>                          |           |                              |
| <i>bicalutamide oral tablet 50 mg</i>             | Casodex   | QLL (1 EA per 1 day)         |
| <i>flutamide oral capsule 125 mg</i>              | Eulexin   |                              |
| <b>*Antiestrogens***</b>                          |           |                              |
| <b>SOLTAMOX ORAL SOLUTION 10 MG/5ML</b>           |           |                              |
| <i>tamoxifen citrate oral tablet 10 mg, 20 mg</i> |           |                              |
| <i>toremifene citrate oral tablet 60 mg</i>       | Fareston  |                              |
| <b>*Antimetabolites***</b>                        |           |                              |
| <i>capecitabine oral tablet 150 mg</i>            | Xeloda    | PA; QLL (140 EA per 21 days) |
| <i>capecitabine oral tablet 500 mg</i>            | Xeloda    | PA; QLL (154 EA per 21 days) |
| <i>mercaptopurine oral tablet 50 mg</i>           |           |                              |
| <i>methotrexate oral tablet 2.5 mg</i>            |           |                              |

| <b>Formulary Drug Name</b>   | <b>Reference</b> | <b>Restrictions</b>      |
|--|------------------|--------------------------|
| <i>methotrexate sodium (pf) injection solution 1 gm/40ml, 250 mg/10ml, 50 mg/2ml</i> |                  |                          |
| <i>methotrexate sodium injection solution 1000 mg/40ml, 250 mg/10ml, 50 mg/2ml</i>   |                  |                          |
| <i>methotrexate sodium injection solution reconstituted 1 gm</i>                     |                  |                          |
| <b>*Antineoplastic - Alk Inhibitors***</b>   |                  |                          |
| <b>ALECENSA ORAL CAPSULE 150 MG</b>  |                  | PA                       |
| <b>*Antineoplastic - Anti-Her2 Agents***</b>   |                  |                          |
| <b>TUKYSA ORAL TABLET 150 MG, 50 MG</b>  |                  | PA                       |
| <b>*Antineoplastic - Bcl-2 Inhibitors***</b>   |                  |                          |
| <b>VENCLEXTA ORAL TABLET 10 MG, 100 MG, 50 MG</b>                                    |                  | PA                       |
| <b>VENCLEXTA STARTING PACK ORAL TABLET THERAPY PACK 10 &amp; 50 &amp; 100 MG</b>     |                  | PA                       |
| <b>*Antineoplastic - Bcr-Abl Kinase Inhibitors***</b>                                |                  |                          |
| <i>imatinib mesylate oral tablet 100 mg</i>  | Gleevec          | PA; QLL (3 EA per 1 day) |
| <i>imatinib mesylate oral tablet 400 mg</i>  | Gleevec          | PA; QLL (2 EA per 1 day) |
| <b>SPRYCEL ORAL TABLET 100 MG, 140 MG, 20 MG, 50 MG, 70 MG, 80 MG</b>                |                  | PA; QLL (1 EA per 1 day) |
| <b>TASIGNA ORAL CAPSULE 150 MG, 200 MG, 50 MG</b>                                    |                  | PA; QLL (4 EA per 1 day) |
| <b>*Antineoplastic - Braf Kinase Inhibitors***</b>                                   |                  |                          |
| <b>TAFINLAR ORAL CAPSULE 50 MG, 75 MG</b>  |                  | PA                       |
| <b>TAFINLAR ORAL TABLET SOLUBLE 10 MG</b>  |                  | PA                       |
| <b>*Antineoplastic - Btk Inhibitors***</b>   |                  |                          |
| <b>IMBRUVICA ORAL CAPSULE 140 MG</b>   |                  | PA; QLL (4 EA per 1 day) |
| <b>IMBRUVICA ORAL CAPSULE 70 MG</b>  |                  | PA; QLL (1 EA per 1 day) |
| <b>IMBRUVICA ORAL SUSPENSION 70 MG/ML</b>  |                  | PA; QLL (6 ML per 1 day) |
| <b>IMBRUVICA ORAL TABLET 140 MG, 280 MG, 420 MG, 560 MG</b>                          |                  | PA; QLL (1 EA per 1 day) |
| <b>*Antineoplastic - Egfr Inhibitors***</b>  |                  |                          |
| <i>erlotinib hcl oral tablet 100 mg, 150 mg, 25 mg</i>                               | Tarceva          | PA; QLL (1 EA per 1 day) |

| <b>Formulary Drug Name</b>   | <b>Reference</b> | <b>Restrictions</b>      |
|--|------------------|--------------------------|
| <b>GILOTRIF ORAL TABLET 20 MG, 30 MG, 40 MG</b>  |                  | PA                       |
| <b>*Antineoplastic - Hedgehog Pathway Inhibitors***</b>                                      |                  |                          |
| <b>ERIVEDGE ORAL CAPSULE 150 MG</b>  |                  | PA                       |
| <b>*Antineoplastic - Mek Inhibitors***</b>   |                  |                          |
| <b>MEKINIST ORAL SOLUTION RECONSTITUTED 0.05 MG/ML</b>                                       |                  | PA                       |
| <b>MEKINIST ORAL TABLET 0.5 MG, 2 MG</b>   |                  | PA                       |
| <b>*Antineoplastic - Mtor Kinase Inhibitors***</b>   |                  |                          |
| <i>everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg</i>                                    | Afinitor         | PA; QLL (1 EA per 1 day) |
| <b>*Antineoplastic - Multikinase Inhibitors***</b>   |                  |                          |
| <b>CABOMETYX ORAL TABLET 20 MG, 40 MG, 60 MG</b>   |                  | PA; QLL (1 EA per 1 day) |
| <b>CAPRELSA ORAL TABLET 100 MG, 300 MG</b>   |                  | PA                       |
| <i>lapatinib ditosylate oral tablet 250 mg</i>   | Tykerb           | PA; QLL (6 EA per 1 day) |
| <b>RYDAPT ORAL CAPSULE 25 MG</b>   |                  | PA                       |
| <i>sunitinib malate oral capsule 12.5 mg, 25 mg, 37.5 mg, 50 mg</i>                          | Sutent           | PA; QLL (1 EA per 1 day) |
| <b>VOTRIENT ORAL TABLET 200 MG</b>   |                  | PA; QLL (4 EA per 1 day) |
| <b>*Antineoplastics Misc.***</b>   |                  |                          |
| <b>ACTIMMUNE SUBCUTANEOUS SOLUTION 2000000 UNIT/0.5ML</b>                                    |                  | PA                       |
| <i>hydroxyurea oral capsule 500 mg</i>   | Hydrea           |                          |
| <b>INTRON A INJECTION SOLUTION RECONSTITUTED 10000000 UNIT, 18000000 UNIT, 50000000 UNIT</b> |                  | PA                       |
| <b>MATULANE ORAL CAPSULE 50 MG</b>   |                  | PA                       |
| <b>*Aromatase Inhibitors***</b>  |                  |                          |
| <i>anastrozole oral tablet 1 mg</i>  | Arimidex         | QLL (1 EA per 1 day)     |
| <i>exemestane oral tablet 25 mg</i>  | Aromasin         | QLL (1 EA per 1 day)     |
| <i>letrozole oral tablet 2.5 mg</i>  | Femara           | QLL (1 EA per 1 day)     |
| <b>*Estrogens-Antineoplastic***</b>  |                  |                          |
| <b>EMCYT ORAL CAPSULE 140 MG</b>   |                  |                          |

| Formulary Drug Name  | Reference | Restrictions             |
|--|-----------|--------------------------|
| <b>*Folic Acid Antagonists Rescue Agents***</b>                              |           |                          |
| <i>leucovorin calcium oral tablet 10 mg, 15 mg, 25 mg, 5 mg</i>              |           |                          |
| <b>*Imidazotetrazines***</b>   |           |                          |
| <i>temozolomide oral capsule 100 mg, 140 mg, 180 mg, 20 mg, 250 mg, 5 mg</i> |           |                          |
| <b>*Janus Associated Kinase (Jak) Inhibitors***</b>                          |           |                          |
| <b>JAKAFI ORAL TABLET 10 MG, 15 MG, 20 MG, 25 MG, 5 MG</b>                   |           | PA                       |
| <b>*Lhrh Analogs***</b>  |           |                          |
| <b>ELIGARD SUBCUTANEOUS KIT 22.5 MG, 30 MG, 45 MG, 7.5 MG</b>                |           | PA                       |
| <i>leuprolide acetate injection kit 1 mg/0.2ml</i>                           |           | PA                       |
| <b>*Mitotic Inhibitors***</b>  |           |                          |
| <i>etoposide oral capsule 50 mg</i>  |           |                          |
| <b>*Nitrogen Mustards And Related Analogues***</b>                           |           |                          |
| <b>ALKERAN ORAL TABLET 2 MG</b>  | melphalan |                          |
| <i>cyclophosphamide oral capsule 25 mg</i>                                   |           |                          |
| <b>CYCLOPHOSPHAMIDE ORAL CAPSULE 50 MG</b>                                   |           |                          |
| <b>LEUKERAN ORAL TABLET 2 MG</b>   |           |                          |
| <b>*Poly (Adp-Ribose) Polymerase (Parp) Inhibitors***</b>                    |           |                          |
| <b>LYNPARZA ORAL TABLET 100 MG, 150 MG</b>                                   |           | PA; QLL (4 EA per 1 day) |
| <b>*Progestins-Antineoplastic***</b>   |           |                          |
| <i>megestrol acetate oral suspension 40 mg/ml, 400 mg/10ml</i>               |           |                          |
| <i>megestrol acetate oral tablet 20 mg, 40 mg</i>                            |           |                          |
| <b>*Retinoids***</b>   |           |                          |
| <i>tretinoin oral capsule 10 mg</i>  |           |                          |
| <b>*Selective Retinoid X Receptor Agonists***</b>                            |           |                          |
| <i>bexarotene oral capsule 75 mg</i>   | Targretin | PA                       |
| <b>*Urinary Tract Protective Agents***</b>                                   |           |                          |
| <b>MESNEX ORAL TABLET 400 MG</b>   |           |                          |

| Formulary Drug Name  | Reference | Restrictions             |
|--|-----------|--------------------------|
| <b>*Vascular Endothelial Growth Factor (Vegf) Inhibitors***</b>                |           |                          |
| INLYTA ORAL TABLET 1 MG, 5 MG  |           | PA; QLL (4 EA per 1 day) |
| LENVIMA (10 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 10 MG                     |           | PA                       |
| LENVIMA (12 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 3 X 4 MG                  |           | PA                       |
| LENVIMA (14 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 10 & 4 MG                 |           | PA                       |
| LENVIMA (18 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 10 MG & 2 X 4 MG          |           | PA                       |
| LENVIMA (20 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 2 X 10 MG                 |           | PA                       |
| LENVIMA (24 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 2 X 10 MG & 4 MG          |           | PA                       |
| LENVIMA (4 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 4 MG                       |           | PA                       |
| LENVIMA (8 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 2 X 4 MG                   |           | PA                       |
| <b>*Antiparkinson And Related Therapy Agents*</b>                              |           |                          |
| <b>*Antiparkinson Anticholinergics***</b>                                      |           |                          |
| <i>benztropine mesylate oral tablet 0.5 mg, 1 mg, 2 mg</i>                     |           |                          |
| <i>trihexyphenidyl hcl oral solution 0.4 mg/ml</i>                             |           |                          |
| <i>trihexyphenidyl hcl oral tablet 2 mg, 5 mg</i>                              |           |                          |
| <b>*Antiparkinson Dopaminergics***</b>   |           |                          |
| <i>amantadine hcl oral capsule 100 mg</i>                                      |           |                          |
| <i>amantadine hcl oral solution 50 mg/5ml</i>                                  |           |                          |
| <i>amantadine hcl oral tablet 100 mg</i>                                       |           |                          |
| <i>bromocriptine mesylate oral capsule 5 mg</i>                                | Parlodel  |                          |
| <i>bromocriptine mesylate oral tablet 2.5 mg</i>                               | Parlodel  |                          |
| <b>*Antiparkinson Monoamine Oxidase Inhibitors***</b>                          |           |                          |
| <i>selegiline hcl oral capsule 5 mg</i>  |           |                          |
| <i>selegiline hcl oral tablet 5 mg</i>   |           |                          |
| <b>*Levodopa Combinations***</b>   |           |                          |
| <i>carbidopa-levodopa er oral tablet extended release 25-100 mg, 50-200 mg</i> |           |                          |



| <b>Formulary Drug Name</b>  | <b>Reference</b> | <b>Restrictions</b>                     |
|---|------------------|---|
| <i>carbidopa-levodopa oral tablet 10-100 mg</i>   | Sinemet          |   |
| <i>carbidopa-levodopa oral tablet 25-100 mg</i>   | Dhivy            |   |
| <i>carbidopa-levodopa oral tablet 25-250 mg</i>   |                  |   |
| <i>carbidopa-levodopa oral tablet dispersible 10-100 mg, 25-100 mg, 25-250 mg</i>               |                  |   |
| <i>carbidopa-levodopa-entacapone oral tablet 12.5-50-200 mg</i>                                 | Stalevo 50       | QLL (9 EA per 1 day)                    |
| <i>carbidopa-levodopa-entacapone oral tablet 18.75-75-200 mg</i>                                | Stalevo 75       | QLL (9 EA per 1 day)                    |
| <i>carbidopa-levodopa-entacapone oral tablet 25-100-200 mg</i>                                  | Stalevo 100      | QLL (9 EA per 1 day)                    |
| <i>carbidopa-levodopa-entacapone oral tablet 31.25-125-200 mg</i>                               | Stalevo 125      | QLL (9 EA per 1 day)                    |
| <i>carbidopa-levodopa-entacapone oral tablet 37.5-150-200 mg</i>                                | Stalevo 150      | QLL (9 EA per 1 day)                    |
| <i>carbidopa-levodopa-entacapone oral tablet 50-200-200 mg</i>                                  | Stalevo 200      | QLL (9 EA per 1 day)                    |
| <b>*Nonergoline Dopamine Receptor Agonists***</b>   |                  |   |
| <i>pramipexole dihydrochloride oral tablet 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg</i> |                  |   |
| <i>ropinirole hcl er oral tablet extended release 24 hour 12 mg, 2 mg, 4 mg, 6 mg, 8 mg</i>     |                  | ST                                      |
| <i>ropinirole hcl oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg</i>                 |                  |   |
| <b>*Peripheral Comt Inhibitors***</b>   |                  |   |
| <i>entacapone oral tablet 200 mg</i>  | Comtan           | QLL (4 EA per 1 day)                    |
| <b>*Antipsychotics/Antimanic Agents*</b>  |                  |   |
| <b>*Antimanic Agents***</b>   |                  |   |
| <i>lithium carbonate er oral tablet extended release 300 mg</i>                                 | Lithobid         |   |
| <i>lithium carbonate er oral tablet extended release 450 mg</i>                                 |                  |   |
| <i>lithium carbonate oral capsule 150 mg, 300 mg, 600 mg</i>                                    |                  |   |
| <i>lithium carbonate oral tablet 300 mg</i>   |                  |   |
| <b>*Antipsychotics - Misc.***</b>   |                  |   |
| <i>lurasidone hcl oral tablet 120 mg, 20 mg, 40 mg, 60 mg, 80 mg</i>                            | Latuda           | QLL (1 EA per 1 day); AL (Min 18 Years) |
| <b>VRAYLAR ORAL CAPSULE 1.5 MG, 3 MG, 4.5 MG, 6 MG</b>  |                  | AL (Min 18 Years)                       |

| <b>Formulary Drug Name</b>  | <b>Reference</b> | <b>Restrictions</b>                       |
|---|------------------|---|
| <b>VRAYLAR ORAL CAPSULE THERAPY PACK 1.5 &amp; 3 MG</b>   |                  | AL (Min 18 Years)                         |
| <i>ziprasidone hcl oral capsule 20 mg, 40 mg, 60 mg, 80 mg</i>  | Geodon           | AL (Min 18 Years)                         |
| <b>*Benzisoxazoles***</b>   |                  |   |
| <b>INVEGA HAFYERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 1092 MG/3.5ML, 1560 MG/5ML</b>   |                  | AL (Min 18 Years)                         |
| <b>INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 117 MG/0.75ML, 156 MG/ML, 234 MG/1.5ML, 39 MG/0.25ML, 78 MG/0.5ML</b> |                  | AL (Min 18 Years)                         |
| <b>INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 273 MG/0.88ML, 410 MG/1.32ML, 546 MG/1.75ML, 819 MG/2.63ML</b>          |                  | AL (Min 18 Years)                         |
| <b>PERSERIS SUBCUTANEOUS PREFILLED SYRINGE 120 MG, 90 MG</b>  |                  | AL (Min 18 Years)                         |
| <b>RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 12.5 MG</b>   |                  | AL (Min 18 Years)                         |
| <b>RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 25 MG, 37.5 MG, 50 MG</b>   |                  | QLL (2 EA per 28 days); AL (Min 18 Years) |
| <i>risperidone oral solution 1 mg/ml</i>  | RisperDAL        | QLL (2 ML per 1 day); AL (Min 18 Years)   |
| <i>risperidone oral tablet 0.25 mg</i>  |                  | QLL (2 EA per 1 day); AL (Min 18 Years)   |
| <i>risperidone oral tablet 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i>   | RisperDAL        | QLL (2 EA per 1 day); AL (Min 18 Years)   |
| <i>risperidone oral tablet dispersible 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i>  |                  | QLL (2 EA per 1 day); AL (Min 18 Years)   |
| <b>*Butyrophenones***</b>   |                  |   |
| <i>haloperidol decanoate intramuscular solution 100 mg/ml</i>   | Haldol Decanoate |   |
| <i>haloperidol decanoate intramuscular solution 50 mg/ml</i>  | Haldol Decanoate | AL (Min 18 Years)                         |
| <i>haloperidol lactate injection solution 5 mg/ml</i>   |                  | AL (Min 18 Years)                         |
| <i>haloperidol lactate oral concentrate 2 mg/ml</i>   |                  | AL (Min 18 Years)                         |
| <i>haloperidol oral tablet 0.5 mg, 1 mg, 10 mg, 2 mg, 20 mg, 5 mg</i>   |                  | AL (Min 18 Years)                         |

| <b>Formulary Drug Name</b>   | <b>Reference</b> | <b>Restrictions</b>                     |
|--|------------------|---|
| <b>*Dibenzodiazepines***</b>   |                  |   |
| <i>clozapine oral tablet 100 mg, 200 mg, 25 mg, 50 mg</i>                                | Clozaril         | AL (Min 18 Years)                       |
| <b>*Dibenzothiazepines***</b>  |                  |   |
| <i>quetiapine fumarate er oral tablet extended release 24 hour 150 mg, 200 mg</i>        | SEROquel XR      | QLL (1 EA per 1 day); AL (Min 18 Years) |
| <i>quetiapine fumarate er oral tablet extended release 24 hour 300 mg, 400 mg, 50 mg</i> | SEROquel XR      | AL (Min 18 Years)                       |
| <i>quetiapine fumarate oral tablet 100 mg, 200 mg, 25 mg, 300 mg, 400 mg, 50 mg</i>      | SEROquel         | AL (Min 18 Years)                       |
| <i>quetiapine fumarate oral tablet 150 mg</i>  |                  | AL (Min 18 Years)                       |
| <b>*Dibenzoxazepines***</b>  |                  |   |
| <i>loxapine succinate oral capsule 10 mg, 25 mg, 5 mg, 50 mg</i>                         |                  | AL (Min 18 Years)                       |
| <b>*Phenothiazines***</b>  |                  |   |
| <b>CHLORPROMAZINE HCL INJECTION SOLUTION 25 MG/ML</b>                                    |                  | AL (Min 18 Years)                       |
| <i>chlorpromazine hcl injection solution 50 mg/2ml</i>                                   |                  | AL (Min 18 Years)                       |
| <i>chlorpromazine hcl oral concentrate 100 mg/ml, 30 mg/ml</i>                           |                  | AL (Min 18 Years)                       |
| <i>chlorpromazine hcl oral tablet 10 mg, 100 mg, 200 mg, 25 mg, 50 mg</i>                |                  | AL (Min 18 Years)                       |
| <i>compro rectal suppository 25 mg</i>   | Compro           |   |
| <i>fluphenazine decanoate injection solution 25 mg/ml</i>                                |                  | AL (Min 18 Years)                       |
| <i>fluphenazine hcl injection solution 2.5 mg/ml</i>                                     |                  | AL (Min 18 Years)                       |
| <i>fluphenazine hcl oral concentrate 5 mg/ml</i>   |                  | AL (Min 18 Years)                       |
| <i>fluphenazine hcl oral elixir 2.5 mg/5ml</i>   |                  | AL (Min 18 Years)                       |
| <i>fluphenazine hcl oral tablet 1 mg, 10 mg, 2.5 mg, 5 mg</i>                            |                  | AL (Min 18 Years)                       |
| <i>perphenazine oral tablet 16 mg, 2 mg, 4 mg, 8 mg</i>                                  |                  | AL (Min 18 Years)                       |
| <i>prochlorperazine maleate oral tablet 10 mg, 5 mg</i>                                  |                  |   |
| <i>prochlorperazine rectal suppository 25 mg</i>   | Compro           |   |
| <i>thioridazine hcl oral tablet 10 mg, 100 mg, 25 mg, 50 mg</i>                          |                  | AL (Min 18 Years)                       |
| <i>trifluoperazine hcl oral tablet 1 mg, 10 mg, 2 mg, 5 mg</i>                           |                  | AL (Min 18 Years)                       |

| Formulary Drug Name   | Reference                    | Restrictions                            |
|---|------------------------------|---|
| <b>*Quinolinone Derivatives***</b>  |                              |   |
| ABILIFY MAINTENA<br>INTRAMUSCULAR PREFILLED<br>SYRINGE 300 MG, 400 MG                                     |                              | AL (Min 18 Years)                       |
| ABILIFY MAINTENA<br>INTRAMUSCULAR SUSPENSION<br>RECONSTITUTED ER 300 MG, 400 MG                           |                              | AL (Min 18 Years)                       |
| <i>aripiprazole oral tablet 10 mg, 15 mg, 2 mg,<br/>20 mg, 30 mg, 5 mg</i>                                | Abilify                      | QLL (1 EA per 1 day); AL (Min 18 Years) |
| ARISTADA INITIO INTRAMUSCULAR<br>PREFILLED SYRINGE 675 MG/2.4ML   |                              | AL (Min 18 Years)                       |
| ARISTADA INTRAMUSCULAR<br>PREFILLED SYRINGE 1064 MG/3.9ML,<br>441 MG/1.6ML, 662 MG/2.4ML, 882<br>MG/3.2ML |                              | AL (Min 18 Years)                       |
| <b>*Thienbenzodiazepines***</b>   |                              |   |
| <i>olanzapine intramuscular solution<br/>reconstituted 10 mg</i>  | ZyPREXA                      | AL (Min 18 Years)                       |
| <i>olanzapine oral tablet 10 mg, 15 mg, 2.5 mg,<br/>20 mg, 5 mg, 7.5 mg</i>                               | ZyPREXA                      | AL (Min 18 Years)                       |
| <i>olanzapine oral tablet dispersible 10 mg, 15<br/>mg, 20 mg, 5 mg</i>                                   | ZyPREXA Zydis                | AL (Min 18 Years)                       |
| <b>*Thioxanthenes***</b>  |                              |   |
| <i>thiothixene oral capsule 1 mg, 10 mg, 2 mg, 5<br/>mg</i>   |                              | AL (Min 18 Years)                       |
| <b>*Antiseptics &amp; Disinfectants*</b>  |                              |   |
| <b>*Antiseptics &amp; Disinfectants***</b>  |                              |   |
| <i>cvs hydrogen peroxide external solution 3 %</i>  | Medi-First Hydrogen Peroxide | OTC                                     |
| <i>eql hydrogen peroxide external solution 3 %</i>  | Medi-First Hydrogen Peroxide | OTC                                     |
| <i>gnp hydrogen peroxide external solution 3 %</i>  | Medi-First Hydrogen Peroxide | OTC                                     |
| <i>goodsense hydrogen peroxide external<br/>solution 3 %</i>  | Medi-First Hydrogen Peroxide | OTC                                     |
| <i>hm hydrogen peroxide external solution 3 %</i>   | Medi-First Hydrogen Peroxide | OTC                                     |
| <i>hydrogen peroxide external solution 3 %</i>  | Medi-First Hydrogen Peroxide | OTC                                     |
| <i>meijer hydrogen peroxide external solution 3<br/>%</i>   | Medi-First Hydrogen Peroxide | OTC                                     |
| <b>PHENOL EXTERNAL LIQUID</b>   |                              | OTC                                     |
| <i>px hydrogen peroxide external solution 3 %</i>   | Medi-First Hydrogen Peroxide | OTC                                     |
| <i>qc hydrogen peroxide external solution 3 %</i>   | Medi-First Hydrogen Peroxide | OTC                                     |
| <i>ra hydrogen peroxide external solution 3 %</i>   | Medi-First Hydrogen Peroxide | OTC                                     |
| <i>sm hydrogen peroxide external solution 3 %</i>   | Medi-First Hydrogen Peroxide | OTC                                     |

| <b>Formulary Drug Name</b>                                | <b>Reference</b>             | <b>Restrictions</b> |
|---|------------------------------|---------------------|
| <i>tgt hydrogen peroxide external solution 3 %</i>        | Medi-First Hydrogen Peroxide | OTC                 |
| <b>*Chlorine Antiseptics***</b>                           |                              |                     |
| <b>AMERIWASH EXTERNAL LOTION</b>                          |                              | OTC                 |
| <b>ANASEPT ANTIMICROBIAL EXTERNAL GEL 0.057 %</b>         |                              | OTC                 |
| <i>antibacterial hand soap external liquid 0.15 %</i>     |                              | OTC                 |
| <i>antibacterial liquid soap external liquid 0.15 %</i>   |                              | OTC                 |
| <i>antiseptic skin cleanser external solution 4 %</i>     | Dyna-Hex 4                   | OTC                 |
| <i>betasept surgical scrub external liquid 4 %</i>        | Betasept Surgical Scrub      | OTC                 |
| <b>CA-REZZ EXTERNAL CREAM 0.3 %</b>                       | diabet-x daily prevention    | OTC                 |
| <b>CA-REZZ EXTERNAL LIQUID 0.25 %</b>                     |                              | OTC                 |
| <b>CA-REZZ GENTLE EXTERNAL LIQUID 0.2 %</b>               |                              | OTC                 |
| <b>CA-REZZ MOISTURE BARRIER EXTERNAL CREAM 0.3 %</b>      | diabet-x daily prevention    | OTC                 |
| <i>ca-rezz norisc external liquid 0.3 %</i>               |                              | OTC                 |
| <i>chlorhexidine gluconate external liquid 4 %</i>        | Betasept Surgical Scrub      | OTC                 |
| <i>cvs antiseptic skin cleanser external solution 4 %</i> | Dyna-Hex 4                   | OTC                 |
| <b>DAKINS (1/2 STRENGTH) EXTERNAL SOLUTION 0.25 %</b>     | dakins (1/2 strength)        | OTC                 |
| <b>DAKINS (1/4 STRENGTH) EXTERNAL SOLUTION 0.125 %</b>    | dakins (1/4 strength)        | OTC                 |
| <b>DIABET-X DAILY PREVENTION EXTERNAL CREAM 0.3 %</b>     | diabet-x daily prevention    | OTC                 |
| <b>DI-DAK-SOL EXTERNAL SOLUTION 0.0125 %</b>              |                              | OTC                 |
| <b>EQL ANTIBAC DEODORANT SOAP EXTERNAL BAR 0.3 %</b>      |                              | OTC                 |
| <i>exuviance facial cleanser external liquid 0.3 %</i>    |                              | OTC                 |
| <i>gnp antiseptic skin cleanser external solution 4 %</i> | Dyna-Hex 4                   | OTC                 |
| <i>h-chlor 12 external solution 0.125 %</i>               | H-Chlor 12                   | OTC                 |
| <b>H-CHLOR 6 EXTERNAL SOLUTION 0.062 %</b>                |                              | OTC                 |
| <b>HIBICLENS EXTERNAL LIQUID 4 %</b>                      |                              | OTC                 |
| <i>hm antiseptic skin cleanser external solution 4 %</i>  | Dyna-Hex 4                   | OTC                 |
| <i>hysept external solution 0.25 %</i>                    | HySept                       | OTC                 |

| <b>Formulary Drug Name</b>                                  | <b>Reference</b>    | <b>Restrictions</b> |
|---|---------------------|---------------------|
| <i>hysept external solution 0.5 %</i>                       |                     | OTC                 |
| <i>neostrata facial cleanser external liquid 0.3 %</i>      |                     | OTC                 |
| <i>ra antiseptic skin cleanser external solution 4 %</i>    | Dyna-Hex 4          | OTC                 |
| <i>ra renewal antibacterial soap external liquid 0.15 %</i> |                     | OTC                 |
| <i>ra renewal hand soap external liquid 0.15 %</i>          |                     | OTC                 |
| <i>sm antibacterial liquid soap external liquid 0.15 %</i>  |                     | OTC                 |
| <b>*Iodine Antiseptics***</b>                               |                     |                     |
| <b>BETADINE EXTERNAL SOLUTION 10 %</b>                      | cvs povidone-iodine | OTC                 |
| <b>BETADINE EXTERNAL SOLUTION 5 %</b>                       |                     | OTC                 |
| <b>BETADINE SURGICAL SCRUB EXTERNAL SOLUTION 7.5 %</b>      |                     | OTC                 |
| <b>BETADINE SWABSTICKS EXTERNAL SWAB 10 %</b>               | povidone-iodine     | OTC                 |
| <i>cvs povidone-iodine external solution 10 %</i>           | Betadine            | OTC                 |
| <i>eq first aid antiseptic external solution 10 %</i>       | Betadine            | OTC                 |
| <i>eq povidone-iodine external solution 10 %</i>            | Betadine            | OTC                 |
| <i>gnp povidone-iodine external solution 10 %</i>           | Betadine            | OTC                 |
| <i>hm povidone-iodine external solution 10 %</i>            | Betadine            | OTC                 |
| <b>KENDALL SKIN SCRUB PAK/SPONGES EXTERNAL KIT 1 %</b>      |                     | OTC                 |
| <b>KENDALL VAGINAL PREP PACK EXTERNAL KIT 1 %</b>           |                     | OTC                 |
| <b>KENDALL VAGINAL PREP TRAY EXTERNAL KIT 1 %</b>           |                     | OTC                 |
| <b>KENDALL WET SKIN SCRUB PACK EXTERNAL KIT 1 %</b>         |                     | OTC                 |
| <i>povidone-iodine external ointment 10 %</i>               |                     | OTC                 |
| <b>POVIDONE-IODINE EXTERNAL PAD 10 %</b>                    |                     | OTC                 |
| <i>povidone-iodine external solution 10 %</i>               | Betadine            | OTC                 |
| <i>povidone-iodine external swab 10 %</i>                   | Betadine Swabsticks | OTC                 |
| <i>povidone-iodine paint sponge external swab 10 %</i>      | Betadine Swabsticks | OTC                 |
| <b>POVIDONE-IODINE PREP EXTERNAL PAD 10 %</b>               |                     | OTC                 |
| <i>pvp prep external solution 10 %</i>                      | Betadine            | OTC                 |
| <i>qc povidone iodine external solution 10 %</i>            | Betadine            | OTC                 |



| <b>Formulary Drug Name</b>   | <b>Reference</b>               | <b>Restrictions</b>    |
|--|--------------------------------|------------------------|
| <i>ra antiseptic external solution 10 %</i>  | Betadine                       | OTC                    |
| <i>ra povidine iodine external ointment 10 %</i>   |                                | OTC                    |
| <i>sb povidone-iodine external solution 10 %</i>   | Betadine                       | OTC                    |
| <i>sm povidone-iodine external solution 10 %</i>   | Betadine                       | OTC                    |
| <b>*Antivirals*</b>  |                                |                        |
| <b>*Antiretroviral Combinations***</b>   |                                |                        |
| <i>abacavir sulfate-lamivudine oral tablet 600-300 mg</i>                                    | Epzicom                        | QLL (1 EA per 1 day)   |
| <i>abacavir-lamivudine-zidovudine oral tablet 300-150-300 mg</i>                             | Trizivir                       | QLL (2 EA per 1 day)   |
| <b>ATRIPLA ORAL TABLET 600-200-300 MG</b>  | efavirenz-emtricitab-tenofo df | QLL (1 EA per 1 day)   |
| <b>BIKTARVY ORAL TABLET 30-120-15 MG, 50-200-25 MG</b>                                       |                                | QLL (1 EA per 1 day)   |
| <i>cabenuva intramuscular suspension extended release 400 &amp; 600 mg/2ml</i>               |                                | QLL (4 ML per 28 days) |
| <i>cabenuva intramuscular suspension extended release 600 &amp; 900 mg/3ml</i>               |                                | QLL (6 ML per 28 days) |
| <b>CIMDUO ORAL TABLET 300-300 MG</b>   |                                | QLL (1 EA per 1 day)   |
| <b>COMBIVIR ORAL TABLET 150-300 MG</b>   | lamivudine-zidovudine          | QLL (2 EA per 1 day)   |
| <b>COMPLERA ORAL TABLET 200-25-300 MG</b>  |                                | QLL (1 EA per 1 day)   |
| <b>DELSTRIGO ORAL TABLET 100-300-300 MG</b>  |                                | QLL (1 EA per 1 day)   |
| <b>DESCOVY ORAL TABLET 120-15 MG, 200-25 MG</b>  |                                | QLL (1 EA per 1 day)   |
| <b>DOVATO ORAL TABLET 50-300 MG</b>  |                                | QLL (1 EA per 1 day)   |
| <i>efavirenz-emtricitab-tenofo df oral tablet 600-200-300 mg</i>                             | Atripla                        | QLL (1 EA per 1 day)   |
| <i>efavirenz-lamivudine-tenofovir oral tablet 400-300-300 mg</i>                             | Symfi Lo                       | QLL (1 EA per 1 day)   |
| <i>efavirenz-lamivudine-tenofovir oral tablet 600-300-300 mg</i>                             | Symfi                          | QLL (1 EA per 1 day)   |
| <i>emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg, 200-300 mg</i> | Truvada                        | QLL (1 EA per 1 day)   |
| <b>EPZICOM ORAL TABLET 600-300 MG</b>  | abacavir sulfate-lamivudine    | QLL (1 EA per 1 day)   |
| <b>EVOTAZ ORAL TABLET 300-150 MG</b>   |                                | QLL (1 EA per 1 day)   |
| <b>GENVOYA ORAL TABLET 150-150-200-10 MG</b>   |                                | QLL (1 EA per 1 day)   |
| <b>JULUCA ORAL TABLET 50-25 MG</b>   |                                | QLL (1 EA per 1 day)   |
| <b>KALETRA ORAL SOLUTION 400-100 MG/5ML</b>  | lopinavir-ritonavir            | QLL (4 ML per 1 day)   |



| <b>Formulary Drug Name</b>  | <b>Reference</b>               | <b>Restrictions</b>   |
|---|--------------------------------|-----------------------|
| <b>KALETRA ORAL TABLET 100-25 MG</b>                                      | lopinavir-ritonavir            | QLL (10 EA per 1 day) |
| <b>KALETRA ORAL TABLET 200-50 MG</b>                                      | lopinavir-ritonavir            | QLL (4 EA per 1 day)  |
| <i>lamivudine-zidovudine oral tablet 150-300 mg</i>                       | Combivir                       | QLL (2 EA per 1 day)  |
| <i>lopinavir-ritonavir oral solution 400-100 mg/5ml</i>                   | Kaletra                        | QLL (4 ML per 1 day)  |
| <i>lopinavir-ritonavir oral tablet 100-25 mg</i>                          | Kaletra                        | QLL (10 EA per 1 day) |
| <i>lopinavir-ritonavir oral tablet 200-50 mg</i>                          | Kaletra                        | QLL (4 EA per 1 day)  |
| <b>ODEFSEY ORAL TABLET 200-25-25 MG</b>                                   |                                | QLL (1 EA per 1 day)  |
| <b>PREZCOBIX ORAL TABLET 800-150 MG</b>                                   |                                | QLL (1 EA per 1 day)  |
| <b>STRIBILD ORAL TABLET 150-150-200-300 MG</b>                            |                                | QLL (1 EA per 1 day)  |
| <b>SYMFI LO ORAL TABLET 400-300-300 MG</b>                                | efavirenz-lamivudine-tenofovir | QLL (1 EA per 1 day)  |
| <b>SYMFI ORAL TABLET 600-300-300 MG</b>                                   | efavirenz-lamivudine-tenofovir | QLL (1 EA per 1 day)  |
| <b>SYMTUZA ORAL TABLET 800-150-200-10 MG</b>                              |                                | QLL (1 EA per 1 day)  |
| <b>TEMIXYS ORAL TABLET 300-300 MG</b>                                     |                                | QLL (1 EA per 1 day)  |
| <b>TRIUMEQ ORAL TABLET 600-50-300 MG</b>                                  |                                | QLL (1 EA per 1 day)  |
| <b>TRIUMEQ PD ORAL TABLET SOLUBLE 60-5-30 MG</b>                          |                                | QLL (6 EA per 1 day)  |
| <b>TRIZIVIR ORAL TABLET 300-150-300 MG</b>                                |                                | QLL (2 EA per 1 day)  |
| <b>TRUVADA ORAL TABLET 100-150 MG, 133-200 MG, 167-250 MG, 200-300 MG</b> | emtricitabine-tenofovir df     | QLL (1 EA per 1 day)  |
| <b>*Antiretrovirals - Capsid Inhibitors***</b>                            |                                |                       |
| <b>SUNLENCA ORAL TABLET THERAPY PACK 4 X 300 MG, 5 X 300 MG</b>           |                                | AL (Min 18 Years)     |
| <b>SUNLENCA SUBCUTANEOUS SOLUTION 463.5 MG/1.5ML</b>                      |                                | AL (Min 18 Years)     |
| <b>*Antiretrovirals - Ccr5 Antagonists (Entry Inhibitor)***</b>           |                                |                       |
| <i>maraviroc oral tablet 150 mg</i>                                       | Selzentry                      | QLL (2 EA per 1 day)  |
| <i>maraviroc oral tablet 300 mg</i>                                       | Selzentry                      | QLL (4 EA per 1 day)  |
| <b>SELZENTRY ORAL SOLUTION 20 MG/ML</b>                                   |                                | QLL (30 ML per 1 day) |
| <b>SELZENTRY ORAL TABLET 150 MG</b>                                       | maraviroc                      | QLL (2 EA per 1 day)  |
| <b>SELZENTRY ORAL TABLET 25 MG</b>  |                                | QLL (8 EA per 1 day)  |
| <b>SELZENTRY ORAL TABLET 300 MG</b>                                       | maraviroc                      | QLL (4 EA per 1 day)  |

| <b>Formulary Drug Name</b>   | <b>Reference</b>      | <b>Restrictions</b>    |
|--|-----------------------|------------------------|
| <b>SELZENTRY ORAL TABLET 75 MG</b>                                   |                       | QLL (2 EA per 1 day)   |
| <b>*Antiretrovirals - Fusion Inhibitors***</b>                       |                       |                        |
| <b>FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED 90 MG</b>              |                       | QLL (2 EA per 1 day)   |
| <b>*Antiretrovirals - Gp120-Directed Attachment Inhibitor***</b>     |                       |                        |
| <b>RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HOUR 600 MG</b>           |                       | QLL (2 EA per 1 day)   |
| <b>*Antiretrovirals - Integrase Inhibitors***</b>                    |                       |                        |
| <b>APRETUDE INTRAMUSCULAR SUSPENSION EXTENDED RELEASE 600 MG/3ML</b> |                       | QLL (3 ML per 28 days) |
| <b>ISENTRESS HD ORAL TABLET 600 MG</b>                               |                       | QLL (2 EA per 1 day)   |
| <b>ISENTRESS ORAL PACKET 100 MG</b>                                  |                       | QLL (2 EA per 1 day)   |
| <b>ISENTRESS ORAL TABLET 400 MG</b>                                  |                       | QLL (2 EA per 1 day)   |
| <b>ISENTRESS ORAL TABLET CHEWABLE 100 MG, 25 MG</b>                  |                       | QLL (6 EA per 1 day)   |
| <b>TIVICAY ORAL TABLET 10 MG, 25 MG, 50 MG</b>                       |                       | QLL (2 EA per 1 day)   |
| <b>TIVICAY PD ORAL TABLET SOLUBLE 5 MG</b>                           |                       | QLL (6 EA per 1 day)   |
| <b>*Antiretrovirals - Protease Inhibitors***</b>                     |                       |                        |
| <b>APTIVUS ORAL CAPSULE 250 MG</b>                                   |                       | QLL (4 EA per 1 day)   |
| <i>atazanavir sulfate oral capsule 150 mg</i>                        |                       | QLL (1 EA per 1 day)   |
| <i>atazanavir sulfate oral capsule 200 mg</i>                        | Reyataz               | QLL (2 EA per 1 day)   |
| <i>atazanavir sulfate oral capsule 300 mg</i>                        | Reyataz               | QLL (1 EA per 1 day)   |
| <i>darunavir oral tablet 600 mg</i>                                  | Prezista              | QLL (2 EA per 1 day)   |
| <i>darunavir oral tablet 800 mg</i>                                  | Prezista              | QLL (1 EA per 1 day)   |
| <i>fosamprenavir calcium oral tablet 700 mg</i>                      | Lexiva                | QLL (4 EA per 1 day)   |
| <b>LEXIVA ORAL SUSPENSION 50 MG/ML</b>                               |                       | QLL (56 ML per 1 day)  |
| <b>LEXIVA ORAL TABLET 700 MG</b>                                     | fosamprenavir calcium | QLL (4 EA per 1 day)   |
| <b>NORVIR ORAL PACKET 100 MG</b>                                     |                       | QLL (12 EA per 1 day)  |
| <b>NORVIR ORAL TABLET 100 MG</b>                                     | ritonavir             | QLL (12 EA per 1 day)  |
| <b>PREZISTA ORAL SUSPENSION 100 MG/ML</b>                            |                       | QLL (12 ML per 1 day)  |
| <b>PREZISTA ORAL TABLET 150 MG, 75 MG</b>                            |                       | QLL (2 EA per 1 day)   |

| <b>Formulary Drug Name</b>   | <b>Reference</b>   | <b>Restrictions</b>   |
|--|--------------------|-----------------------|
| <b>PREZISTA ORAL TABLET 600 MG</b>                                       | darunavir          | QLL (2 EA per 1 day)  |
| <b>PREZISTA ORAL TABLET 800 MG</b>                                       | darunavir          | QLL (1 EA per 1 day)  |
| <b>REYATAZ ORAL CAPSULE 200 MG</b>                                       | atazanavir sulfate | QLL (2 EA per 1 day)  |
| <b>REYATAZ ORAL CAPSULE 300 MG</b>                                       | atazanavir sulfate | QLL (1 EA per 1 day)  |
| <b>REYATAZ ORAL PACKET 50 MG</b>   |                    | QLL (6 EA per 1 day)  |
| <i>ritonavir oral tablet 100 mg</i>                                      | Norvir             | QLL (12 EA per 1 day) |
| <b>VIRACEPT ORAL TABLET 250 MG</b>                                       |                    | QLL (10 EA per 1 day) |
| <b>VIRACEPT ORAL TABLET 625 MG</b>                                       |                    | QLL (4 EA per 1 day)  |
| <b>*Antiretrovirals - Rti-Non-Nucleoside Analogues***</b>                |                    |                       |
| <b>EDURANT ORAL TABLET 25 MG</b>   |                    | QLL (2 EA per 1 day)  |
| <i>efavirenz oral capsule 200 mg</i>                                     |                    | QLL (2 EA per 1 day)  |
| <i>efavirenz oral capsule 50 mg</i>                                      |                    | QLL (3 EA per 1 day)  |
| <i>efavirenz oral tablet 600 mg</i>                                      | Sustiva            | QLL (1 EA per 1 day)  |
| <i>etravirine oral tablet 100 mg, 200 mg</i>                             | Intence            | QLL (2 EA per 1 day)  |
| <b>INTELENCE ORAL TABLET 100 MG, 200 MG</b>                              | etravirine         | QLL (2 EA per 1 day)  |
| <b>INTELENCE ORAL TABLET 25 MG</b>                                       |                    | QLL (4 EA per 1 day)  |
| <i>nevirapine er oral tablet extended release 24 hour 100 mg, 400 mg</i> |                    | QLL (1 EA per 1 day)  |
| <i>nevirapine oral suspension 50 mg/5ml</i>                              |                    | QLL (40 ML per 1 day) |
| <i>nevirapine oral tablet 200 mg</i>                                     |                    | QLL (2 EA per 1 day)  |
| <b>PIFELTRO ORAL TABLET 100 MG</b>                                       |                    | QLL (1 EA per 1 day)  |
| <b>SUSTIVA ORAL CAPSULE 200 MG</b>                                       | efavirenz          | QLL (2 EA per 1 day)  |
| <b>SUSTIVA ORAL CAPSULE 50 MG</b>  | efavirenz          | QLL (3 EA per 1 day)  |
| <b>SUSTIVA ORAL TABLET 600 MG</b>  | efavirenz          | QLL (1 EA per 1 day)  |
| <b>VIRAMUNE ORAL SUSPENSION 50 MG/5ML</b>                                | nevirapine         | QLL (40 ML per 1 day) |
| <b>VIRAMUNE XR ORAL TABLET EXTENDED RELEASE 24 HOUR 400 MG</b>           | nevirapine er      | QLL (1 EA per 1 day)  |
| <b>*Antiretrovirals - Rti-Nucleoside Analogues-Purines***</b>            |                    |                       |
| <i>abacavir sulfate oral solution 20 mg/ml</i>                           | Ziagen             | QLL (30 ML per 1 day) |
| <i>abacavir sulfate oral tablet 300 mg</i>                               | Ziagen             | QLL (2 EA per 1 day)  |
| <i>didanosine oral capsule delayed release 250 mg, 400 mg</i>            |                    | QLL (1 EA per 1 day)  |
| <b>ZIAGEN ORAL SOLUTION 20 MG/ML</b>                                     | abacavir sulfate   | QLL (30 ML per 1 day) |
| <b>ZIAGEN ORAL TABLET 300 MG</b>   | abacavir sulfate   | QLL (2 EA per 1 day)  |

| <b>Formulary Drug Name</b>  | <b>Reference</b>              | <b>Restrictions</b>                       |
|---|-------------------------------|---|
| <b>*Antiretrovirals - Rti-Nucleoside Analogues-Pyrimidines***</b>               |                               |   |
| <i>emtricitabine oral capsule 200 mg</i>  | Emtriva                       | QLL (24 EA per 1 day)                     |
| <b>EMTRIVA ORAL CAPSULE 200 MG</b>  | emtricitabine                 | QLL (24 EA per 1 day)                     |
| <b>EMTRIVA ORAL SOLUTION 10 MG/ML</b>   |                               | QLL (1 ML per 1 day)                      |
| <b>EPIVIR ORAL SOLUTION 10 MG/ML</b>  | lamivudine                    | QLL (30 ML per 1 day)                     |
| <b>EPIVIR ORAL TABLET 150 MG</b>  | lamivudine                    | QLL (2 EA per 1 day)                      |
| <b>EPIVIR ORAL TABLET 300 MG</b>  | lamivudine                    | QLL (1 EA per 1 day)                      |
| <i>lamivudine oral solution 10 mg/ml</i>  | Epivir                        | QLL (30 ML per 1 day)                     |
| <i>lamivudine oral tablet 150 mg</i>  | Epivir                        | QLL (2 EA per 1 day)                      |
| <i>lamivudine oral tablet 300 mg</i>  | Epivir                        | QLL (1 EA per 1 day)                      |
| <b>*Antiretrovirals - Rti-Nucleoside Analogues-Thymidines***</b>                |                               |   |
| <b>RETROVIR ORAL CAPSULE 100 MG</b>   | zidovudine                    | QLL (2 EA per 1 day)                      |
| <b>RETROVIR ORAL SYRUP 50 MG/5ML</b>  | zidovudine                    | QLL (60 ML per 1 day)                     |
| <i>stavudine oral capsule 15 mg, 20 mg</i>                                      |                               | QLL (1 EA per 1 day)                      |
| <i>stavudine oral capsule 40 mg</i>   |                               | QLL (2 EA per 1 day)                      |
| <i>zidovudine oral capsule 100 mg</i>   | Retrovir                      | QLL (2 EA per 1 day)                      |
| <i>zidovudine oral syrup 50 mg/5ml</i>  | Retrovir                      | QLL (60 ML per 1 day)                     |
| <i>zidovudine oral tablet 300 mg</i>  |                               | QLL (2 EA per 1 day)                      |
| <b>*Antiretrovirals - Rti-Nucleotide Analogues***</b>                           |                               |   |
| <i>tenofovir disoproxil fumarate oral tablet 300 mg</i>                         | Viread                        | QLL (1 EA per 1 day)                      |
| <b>VIREAD ORAL POWDER 40 MG/GM</b>  |                               | QLL (1 GM per 1 day)                      |
| <b>VIREAD ORAL TABLET 150 MG</b>  |                               | QLL (8 EA per 1 day)                      |
| <b>VIREAD ORAL TABLET 200 MG, 250 MG</b>  |                               | QLL (1 EA per 1 day)                      |
| <b>VIREAD ORAL TABLET 300 MG</b>  | tenofovir disoproxil fumarate | QLL (1 EA per 1 day)                      |
| <b>*Antiretrovirals Adjuvants***</b>  |                               |   |
| <b>TYBOST ORAL TABLET 150 MG</b>  |                               | QLL (1 EA per 1 day)                      |
| <b>*Antiviral Combinations***</b>   |                               |   |
| <b>PAXLOVID (150/100) ORAL TABLET THERAPY PACK 10 X 150 MG &amp; 10 X 100MG</b> |                               | QLL (20 EA per 5 days); AL (Min 12 Years) |
| <b>PAXLOVID (300/100) ORAL TABLET THERAPY PACK 20 X 150 MG &amp; 10 X 100MG</b> |                               | QLL (30 EA per 5 days); AL (Min 12 Years) |
| <b>PAXLOVID ORAL TABLET THERAPY PACK 20 X 150 MG &amp; 10 X 100MG</b>           |                               | QLL (30 EA per 5 days); AL (Min 12 Years) |

| <b>Formulary Drug Name</b>   | <b>Reference</b> | <b>Restrictions</b>                         |
|--|------------------|---|
| <b>*Cmv Agents***</b>  |                  |   |
| <i>valganciclovir hcl oral tablet 450 mg</i>                       | Valcyte          |   |
| <b>*Hepatitis B Agents***</b>                                      |                  |   |
| <i>entecavir oral tablet 0.5 mg, 1 mg</i>                          | Baraclude        | QLL (30 EA per 30 days)                     |
| <b>EPIVIR HBV ORAL SOLUTION 5 MG/ML</b>                            |                  | QLL (300 ML per 30 days)                    |
| <i>lamivudine oral tablet 100 mg</i>                               |                  | QLL (30 EA per 30 days)                     |
| <b>*Hepatitis C Agent - Combinations***</b>                        |                  |   |
| <b>MAVYRET ORAL PACKET 50-20 MG</b>                                |                  | QLL (84 EA per 365 days); AL (Min 3 Years)  |
| <b>MAVYRET ORAL TABLET 100-40 MG</b>                               |                  | QLL (84 EA per 365 days); AL (Min 12 Years) |
| <i>sofosbuvir-velpatasvir oral tablet 400-100 mg</i>               | Epclusa          | QLL (84 EA per 365 days); AL (Min 3 Years)  |
| <b>*Hepatitis C Agents***</b>                                      |                  |   |
| <i>ribasphere oral capsule 200 mg</i>                              |                  | ST  |
| <i>ribasphere oral tablet 200 mg</i>                               |                  | ST  |
| <i>ribavirin oral capsule 200 mg</i>                               |                  | ST  |
| <i>ribavirin oral tablet 200 mg</i>                                |                  | ST  |
| <b>*Herpes Agents - Purine Analogues***</b>                        |                  |   |
| <i>acyclovir oral capsule 200 mg</i>                               |                  |   |
| <i>acyclovir oral suspension 200 mg/5ml</i>                        |                  |   |
| <i>acyclovir oral tablet 400 mg, 800 mg</i>                        |                  |   |
| <i>valacyclovir hcl oral tablet 1 gm, 500 mg</i>                   | Valtrex          |   |
| <b>*Herpes Agents - Thymidine Analogues***</b>                     |                  |   |
| <i>famciclovir oral tablet 125 mg, 250 mg, 500 mg</i>              |                  |   |
| <b>*Misc. Antivirals***</b>  |                  |   |
| <b>LAGEVRIO ORAL CAPSULE 200 MG</b>                                |                  | QLL (40 EA per 5 days); AL (Min 18 Years)   |
| <i>molnupiravir oral capsule 200 mg</i>                            | Lagevrio         | QLL (40 EA per 5 days); AL (Min 18 Years)   |
| <b>*Neuraminidase Inhibitors***</b>                                |                  |   |
| <i>oseltamivir phosphate oral capsule 30 mg, 45 mg, 75 mg</i>      | Tamiflu          |   |
| <i>oseltamivir phosphate oral suspension reconstituted 6 mg/ml</i> | Tamiflu          |   |

| <b>Formulary Drug Name</b>   | <b>Reference</b> | <b>Restrictions</b>  |
|--|------------------|----------------------|
| <b>*Beta Blockers*</b>   |                  |                      |
| <b>*Alpha-Beta Blockers***</b>   |                  |                      |
| <i>carvedilol oral tablet 12.5 mg, 25 mg, 3.125 mg, 6.25 mg</i>                                  | Coreg            |                      |
| <i>labetalol hcl intravenous solution 5 mg/ml</i>  |                  |                      |
| <i>labetalol hcl oral tablet 100 mg, 200 mg, 300 mg</i>  |                  |                      |
| <b>*Beta Blockers Cardio-Selective***</b>  |                  |                      |
| <i>acebutolol hcl oral capsule 200 mg, 400 mg</i>  |                  |                      |
| <i>atenolol oral tablet 100 mg, 25 mg, 50 mg</i>   | Tenormin         |                      |
| <i>bisoprolol fumarate oral tablet 10 mg, 5 mg</i>   |                  |                      |
| <i>metoprolol succinate er oral tablet extended release 24 hour 100 mg, 200 mg, 25 mg, 50 mg</i> | Toprol XL        |                      |
| <i>metoprolol tartrate oral tablet 100 mg, 50 mg</i>   | Lopressor        |                      |
| <i>metoprolol tartrate oral tablet 25 mg, 37.5 mg, 75 mg</i>                                     |                  |                      |
| <i>nebivolol hcl oral tablet 10 mg, 2.5 mg, 5 mg</i>   | Bystolic         | QLL (1 EA per 1 day) |
| <i>nebivolol hcl oral tablet 20 mg</i>   | Bystolic         | QLL (2 EA per 1 day) |
| <b>*Beta Blockers Non-Selective***</b>   |                  |                      |
| <i>propranolol hcl er oral capsule extended release 24 hour 120 mg, 160 mg, 60 mg, 80 mg</i>     | Inderal LA       |                      |
| <i>propranolol hcl intravenous solution 1 mg/ml</i>  |                  |                      |
| <i>propranolol hcl oral solution 20 mg/5ml, 40 mg/5ml</i>  |                  |                      |
| <i>propranolol hcl oral tablet 10 mg, 20 mg, 40 mg, 60 mg, 80 mg</i>                             |                  |                      |
| <i>sorine oral tablet 120 mg, 160 mg, 80 mg</i>  | Betapace         |                      |
| <i>sorine oral tablet 240 mg</i>   |                  |                      |
| <i>sotalol hcl (af) oral tablet 120 mg, 160 mg, 80 mg</i>  | Betapace AF      |                      |
| <i>sotalol hcl oral tablet 120 mg, 160 mg, 80 mg</i>   | Betapace         |                      |
| <i>sotalol hcl oral tablet 240 mg</i>  |                  |                      |
| <i>timolol maleate oral tablet 10 mg, 20 mg, 5 mg</i>  |                  |                      |
| <b>*Calcium Channel Blockers*</b>  |                  |                      |
| <b>*Calcium Channel Blockers***</b>  |                  |                      |
| <i>afeditab cr oral tablet extended release 24 hour 30 mg, 60 mg</i>                             |                  |                      |

| <b>Formulary Drug Name</b>   | <b>Reference</b> | <b>Restrictions</b> |
|--|------------------|---------------------|
| <i>amlodipine besylate oral tablet 10 mg, 2.5 mg, 5 mg</i>   | Norvasc          |                     |
| <i>cartia xt oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg</i>                      | Cartia XT        |                     |
| <i>diltiazem hcl er beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg</i> | Taztia XT        |                     |
| <i>diltiazem hcl er beads oral capsule extended release 24 hour 420 mg</i>                                 | Tiadylt ER       |                     |
| <i>diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg</i>  | Cartia XT        |                     |
| <i>diltiazem hcl er coated beads oral capsule extended release 24 hour 360 mg</i>                          | Cardizem CD      |                     |
| <i>diltiazem hcl er oral capsule extended release 12 hour 120 mg, 60 mg, 90 mg</i>                         |                  |                     |
| <i>diltiazem hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg</i>                       |                  |                     |
| <i>diltiazem hcl intravenous solution 125 mg/25ml, 25 mg/5ml, 50 mg/10ml</i>                               |                  |                     |
| <i>diltiazem hcl oral tablet 120 mg, 30 mg, 60 mg</i>  | Cardizem         |                     |
| <i>diltiazem hcl oral tablet 90 mg</i>   |                  |                     |
| <i>dilt-xr oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg</i>                                |                  |                     |
| <i>felodipine er oral tablet extended release 24 hour 10 mg, 2.5 mg, 5 mg</i>                              |                  |                     |
| <i>nifedical xl oral tablet extended release 24 hour 60 mg</i>   | Procardia XL     |                     |
| <i>nifedipine er oral tablet extended release 24 hour 30 mg, 60 mg, 90 mg</i>                              |                  |                     |
| <i>nifedipine er osmotic release oral tablet extended release 24 hour 30 mg, 60 mg, 90 mg</i>              | Procardia XL     |                     |
| <i>nifedipine oral capsule 10 mg, 20 mg</i>  |                  |                     |
| <i>taztia xt oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg</i>              | Taztia XT        |                     |
| <i>verapamil hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 360 mg</i>               | Verelan          |                     |
| <i>verapamil hcl er oral tablet extended release 120 mg, 180 mg, 240 mg</i>                                |                  |                     |
| <i>verapamil hcl intravenous solution 2.5 mg/ml</i>  |                  |                     |
| <i>verapamil hcl oral tablet 120 mg, 40 mg, 80 mg</i>  |                  |                     |



| <b>Formulary Drug Name</b>   | <b>Reference</b> | <b>Restrictions</b>                        |
|--|------------------|--|
| <b>*Cardiotonics*</b>  |                  |  |
| <b>*Cardiac Glycosides***</b>  |                  |  |
| <i>digitek oral tablet 125 mcg, 250 mcg</i>                                | Digox            |  |
| <i>digox oral tablet 125 mcg, 250 mcg</i>                                  | Digox            |  |
| <i>digoxin oral solution 0.05 mg/ml</i>                                    |                  |  |
| <i>digoxin oral tablet 125 mcg, 250 mcg</i>                                | Digox            |  |
| <i>digoxin oral tablet 62.5 mcg</i>  | Lanoxin          |  |
| <b>*Cardiovascular Agents - Misc.*</b>                                     |                  |  |
| <b>*Neprilysin Inhib (Arni)-Angiotensin<br/>Ii Recept Antag Comb***</b>    |                  |  |
| <b>ENTRESTO ORAL TABLET 24-26 MG,<br/>49-51 MG, 97-103 MG</b>              |                  | QLL (2 EA per 1 day)                       |
| <b>*Prostaglandin Vasodilators***</b>                                      |                  |  |
| <b>VENTAVIS INHALATION SOLUTION 10<br/>MCG/ML, 20 MCG/ML</b>               |                  |  |
| <b>*Pulmonary Hypertension -<br/>Endothelin Receptor Antagonists***</b>    |                  |  |
| <i>ambrisentan oral tablet 10 mg, 5 mg</i>                                 | Letairis         | QLL (1 EA per 1 day); AL (Min<br>18 Years) |
| <i>bosentan oral tablet 125 mg, 62.5 mg</i>                                | Tracleer         | QLL (2 EA per 1 day)                       |
| <b>OPSUMIT ORAL TABLET 10 MG</b>   |                  |  |
| <b>TRACLEER ORAL TABLET 125 MG,<br/>62.5 MG</b>                            | bosentan         | QLL (2 EA per 1 day)                       |
| <b>*Pulmonary Hypertension -<br/>Phosphodiesterase Inhibitors***</b>       |                  |  |
| <b>ALYQ ORAL TABLET 20 MG</b>  | tadalafil (pah)  | PA; AL (Min 18 Years)                      |
| <i>sildenafil citrate oral suspension reconstituted<br/>10 mg/ml</i>       | Revatio          | PA   |
| <i>sildenafil citrate oral tablet 20 mg</i>                                | Revatio          | PA   |
| <i>tadalafil (pah) oral tablet 20 mg</i>                                   | Alyq             | PA; AL (Min 18 Years)                      |
| <b>*Cephalosporins*</b>  |                  |  |
| <b>*Cephalosporins - 1St Generation***</b>                                 |                  |  |
| <i>cefadroxil oral capsule 500 mg</i>                                      |                  |  |
| <i>cefadroxil oral suspension reconstituted 250<br/>mg/5ml, 500 mg/5ml</i> |                  | AL (Max 12 Years)                          |
| <i>cefadroxil oral tablet 1 gm</i>   |                  |  |
| <i>cephalexin oral capsule 250 mg, 500 mg</i>                              |                  |  |
| <i>cephalexin oral suspension reconstituted 125<br/>mg/5ml, 250 mg/5ml</i> |                  | AL (Max 12 Years)                          |

| <b>Formulary Drug Name</b>  | <b>Reference</b> | <b>Restrictions</b>    |
|---|------------------|------------------------|
| <b>*Cephalosporins - 2Nd Generation***</b>  |                  |                        |
| <i>cefaclor oral capsule 250 mg, 500 mg</i>   |                  |                        |
| <i>cefprozil oral suspension reconstituted 125 mg/5ml, 250 mg/5ml</i>                 |                  |                        |
| <i>cefprozil oral tablet 250 mg, 500 mg</i>   |                  |                        |
| <i>cefuroxime axetil oral tablet 250 mg, 500 mg</i>                                   |                  |                        |
| <b>*Cephalosporins - 3Rd Generation***</b>  |                  |                        |
| <i>cefдинир oral capsule 300 mg</i>   |                  |                        |
| <i>cefдинир oral suspension reconstituted 125 mg/5ml, 250 mg/5ml</i>                  |                  |                        |
| <i>cefixime oral capsule 400 mg</i>   | Suprax           | QLL (1 EA per 30 days) |
| <i>cefподoxime proxetil oral tablet 100 mg, 200 mg</i>                                |                  |                        |
| <i>ceftriaxone sodium injection solution reconstituted 1 gm, 2 gm, 250 mg, 500 mg</i> |                  | QLL (2 EA per 1 day)   |
| <b>*Chemicals*</b>  |                  |                        |
| <b>*Bulk Chemicals - Et's***</b>  |                  |                        |
| <b>ETHYL OLEATE LIQUID</b>  |                  |                        |
| <b>*Bulk Chemicals - La's***</b>  |                  |                        |
| <b>ACIDOPHILUS LACTOBACILLUS POWDER , 10 BIL UNT/GM, 10 BU/GM</b>                     |                  |                        |
| <b>*Bulk Chemicals - Le's***</b>  |                  |                        |
| <b>CALCIUM FOLINATE POWDER</b>  |                  |                        |
| <b>LEUCOVORIN CALCIUM POWDER</b>  |                  |                        |
| <b>*Bulk Chemicals - Py's***</b>  |                  |                        |
| <b>PYRIMETHAMINE POWDER</b>   |                  |                        |
| <b>*Bulk Chemicals - St's***</b>  |                  |                        |
| <b>STEVIA EXTRACT POWDER , 90 %</b>   |                  |                        |
| <b>STEVIOL GLYCOSIDES POWDER 95 %</b>   |                  |                        |
| <b>STEVIOSIDE FLUID EXTRACT 15 %</b>  |                  |                        |
| <b>*Fixed Oils***</b>   |                  |                        |
| <b>CASTOR OIL OIL</b>   |                  |                        |
| <b>COTTONSEED OIL OIL</b>   |                  |                        |
| <b>HM CASTOR OIL OIL</b>  |                  | OTC                    |
| <b>OLIVE OIL OIL</b>  |                  |                        |
| <b>QC CASTOR OIL OIL</b>  |                  | OTC                    |

| Formulary Drug Name   | Reference | Restrictions |
|---|-----------|--------------|
| QC SWEET OIL OIL  |           | OTC          |
| SESAME OIL OIL  |           |              |
| SM SWEET OIL OIL  |           | OTC          |
| SWEET OIL OIL   |           | OTC          |
| <b>*Liquids***</b>  |           |              |
| BENZYL BENZOATE LIQUID  |           |              |
| GLYCERIN LIQUID   |           |              |
| GLYCERINE LIQUID  |           |              |
| GLYCEROL FORMAL LIQUID  |           |              |
| <b>*Semi-Solids***</b>  |           |              |
| COAL TAR LIQUID   |           | OTC          |
| <b>*Solids***</b>   |           |              |
| SORBITOL POWDER   |           |              |
| <b>*Solvents***</b>   |           |              |
| ALCOHOL (RUBBING) SOLUTION 70 %   |           | OTC          |
| <i>cvs rubbing alcohol solution 70 %</i>                                  |           | OTC          |
| EQL ETHYL ALCOHOL (RUBBING) SOLUTION 70 %                                 |           | OTC          |
| <i>eql isopropyl rubbing alcohol solution 70 %</i>                        |           | OTC          |
| ETHYL ALCOHOL (RUBBING) SOLUTION 70 %                                     |           | OTC          |
| GNP RUBBING ALCOHOL SOLUTION 70 %   |           | OTC          |
| <i>isopropyl alcohol (rubbing) solution 70 %</i>                          |           | OTC          |
| <i>qc isopropyl rubbing alcohol solution 70 %</i>                         |           | OTC          |
| <i>ra isopropyl rubbing alcohol solution 70 %</i>                         |           | OTC          |
| SM ALCOHOL SOLUTION 70 %  |           | OTC          |
| SM ETHYL ALCOHOL (RUBBING) SOLUTION 70 %                                  |           | OTC          |
| <b>*Contraceptives*</b>   |           |              |
| <b>*Biphasic Contraceptives - Oral***</b>                                 |           |              |
| <i>azurette oral tablet 0.15-0.02/0.01 mg (21/5)</i>                      | Azurette  |              |
| <i>bekyree oral tablet 0.15-0.02/0.01 mg (21/5)</i>                       | Azurette  |              |
| <i>desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5)</i> | Azurette  |              |
| <i>kariva oral tablet 0.15-0.02/0.01 mg (21/5)</i>                        | Azurette  |              |
| <i>pimtree oral tablet 0.15-0.02/0.01 mg (21/5)</i>                       | Azurette  |              |
| <i>viorele oral tablet 0.15-0.02/0.01 mg (21/5)</i>                       | Azurette  |              |

| <b>Formulary Drug Name</b>                                      | <b>Reference</b> | <b>Restrictions</b> |
|---|------------------|---------------------|
| <b>*Combination Contraceptives - Oral***</b>                    |                  |                     |
| <i>altavera oral tablet 0.15-30 mg-mcg</i>                      | Altavera         |                     |
| <i>alyacen 1/35 oral tablet 1-35 mg-mcg</i>                     | Dasetta 1/35     |                     |
| <i>apri oral tablet 0.15-30 mg-mcg</i>                          | Apri             |                     |
| <i>aubra oral tablet 0.1-20 mg-mcg</i>                          | Aviane           |                     |
| <b>AUROVELA 24 FE ORAL TABLET 1-20 MG-MCG(24)</b>               |                  |                     |
| <i>aviane oral tablet 0.1-20 mg-mcg</i>                         | Aviane           |                     |
| <i>balziva oral tablet 0.4-35 mg-mcg</i>                        | Balziva          |                     |
| <b>BLISOVI 24 FE ORAL TABLET 1-20 MG-MCG(24)</b>                |                  |                     |
| <i>blisovi fe 1.5/30 oral tablet 1.5-30 mg-mcg</i>              |                  |                     |
| <i>blisovi fe 1/20 oral tablet 1-20 mg-mcg</i>                  | Blisovi FE 1/20  |                     |
| <i>briellyn oral tablet 0.4-35 mg-mcg</i>                       | Balziva          |                     |
| <i>chateal oral tablet 0.15-30 mg-mcg</i>                       | Altavera         |                     |
| <i>cryselle-28 oral tablet 0.3-30 mg-mcg</i>                    |                  |                     |
| <i>cyclafem 1/35 oral tablet 1-35 mg-mcg</i>                    | Dasetta 1/35     |                     |
| <i>cyred oral tablet 0.15-30 mg-mcg</i>                         | Apri             |                     |
| <i>dasetta 1/35 oral tablet 1-35 mg-mcg</i>                     | Dasetta 1/35     |                     |
| <i>delyla oral tablet 0.1-20 mg-mcg</i>                         | Aviane           |                     |
| <i>desogestrel-ethinyl estradiol oral tablet 0.15-30 mg-mcg</i> | Apri             |                     |
| <i>drospirenone-ethinyl estradiol oral tablet 3-0.02 mg</i>     | Loryna           |                     |
| <i>drospirenone-ethinyl estradiol oral tablet 3-0.03 mg</i>     | Ocella           |                     |
| <i>elinest oral tablet 0.3-30 mg-mcg</i>                        |                  |                     |
| <i>emoquette oral tablet 0.15-30 mg-mcg</i>                     | Apri             |                     |
| <i>enskyce oral tablet 0.15-30 mg-mcg</i>                       | Apri             |                     |
| <i>estarylla oral tablet 0.25-35 mg-mcg</i>                     | Estarylla        |                     |
| <i>ethynodiol diac-eth estradiol oral tablet 1-50 mg-mcg</i>    | Kelnor 1/50      |                     |
| <i>falmina oral tablet 0.1-20 mg-mcg</i>                        | Aviane           |                     |
| <i>femynor oral tablet 0.25-35 mg-mcg</i>                       | Estarylla        |                     |
| <i>gianvi oral tablet 3-0.02 mg</i>                             | Loryna           |                     |
| <i>gildess fe 1.5/30 oral tablet 1.5-30 mg-mcg</i>              |                  |                     |
| <i>gildess fe 1/20 oral tablet 1-20 mg-mcg</i>                  | Blisovi FE 1/20  |                     |
| <b>HAILEY 24 FE ORAL TABLET 1-20 MG-MCG(24)</b>                 |                  |                     |

| <b>Formulary Drug Name</b>                                      | <b>Reference</b> | <b>Restrictions</b> |
|---|------------------|---------------------|
| <i>isibloom oral tablet 0.15-30 mg-mcg</i>                      | Apri             |                     |
| <i>juleber oral tablet 0.15-30 mg-mcg</i>                       | Apri             |                     |
| <i>junel 1.5/30 oral tablet 1.5-30 mg-mcg</i>                   |                  |                     |
| <i>junel 1/20 oral tablet 1-20 mg-mcg</i>                       | Junel 1/20       |                     |
| <i>junel fe 1.5/30 oral tablet 1.5-30 mg-mcg</i>                |                  |                     |
| <i>junel fe 1/20 oral tablet 1-20 mg-mcg</i>                    | Blisovi FE 1/20  |                     |
| <b>JUNEL FE 24 ORAL TABLET 1-20 MG-MCG(24)</b>                  |                  |                     |
| <i>kelnor 1/35 oral tablet 1-35 mg-mcg</i>                      |                  |                     |
| <i>kurvelo oral tablet 0.15-30 mg-mcg</i>                       | Altavera         |                     |
| <i>larin 1.5/30 oral tablet 1.5-30 mg-mcg</i>                   |                  |                     |
| <i>larin 1/20 oral tablet 1-20 mg-mcg</i>                       | Junel 1/20       |                     |
| <b>LARIN 24 FE ORAL TABLET 1-20 MG-MCG(24)</b>                  |                  |                     |
| <i>larin fe 1.5/30 oral tablet 1.5-30 mg-mcg</i>                |                  |                     |
| <i>larin fe 1/20 oral tablet 1-20 mg-mcg</i>                    | Blisovi FE 1/20  |                     |
| <i>larissia oral tablet 0.1-20 mg-mcg</i>                       | Aviane           |                     |
| <i>lessina oral tablet 0.1-20 mg-mcg</i>                        | Aviane           |                     |
| <i>levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg</i>  | Aviane           |                     |
| <i>levonorgestrel-ethinyl estrad oral tablet 0.15-30 mg-mcg</i> | Altavera         |                     |
| <i>levora 0.15/30 (28) oral tablet 0.15-30 mg-mcg</i>           | Altavera         |                     |
| <i>loryna oral tablet 3-0.02 mg</i>                             | Loryna           |                     |
| <i>low-ogestrel oral tablet 0.3-30 mg-mcg</i>                   |                  |                     |
| <i>lutera oral tablet 0.1-20 mg-mcg</i>                         | Aviane           |                     |
| <i>marlissa oral tablet 0.15-30 mg-mcg</i>                      | Altavera         |                     |
| <i>microgestin 1.5/30 oral tablet 1.5-30 mg-mcg</i>             |                  |                     |
| <i>microgestin 1/20 oral tablet 1-20 mg-mcg</i>                 | Junel 1/20       |                     |
| <b>MICROGESTIN 24 FE ORAL TABLET 1-20 MG-MCG</b>                |                  |                     |
| <i>microgestin fe 1.5/30 oral tablet 1.5-30 mg-mcg</i>          |                  |                     |
| <i>microgestin fe 1/20 oral tablet 1-20 mg-mcg</i>              | Blisovi FE 1/20  |                     |
| <i>mono-linyah oral tablet 0.25-35 mg-mcg</i>                   | Estarylla        |                     |
| <i>mononessa oral tablet 0.25-35 mg-mcg</i>                     | Estarylla        |                     |
| <i>necon 0.5/35 (28) oral tablet 0.5-35 mg-mcg</i>              |                  |                     |
| <i>necon 1/35 (28) oral tablet 1-35 mg-mcg</i>                  | Dasetta 1/35     |                     |
| <i>nikki oral tablet 3-0.02 mg</i>                              | Loryna           |                     |

| <b>Formulary Drug Name</b>  | <b>Reference</b> | <b>Restrictions</b>    |
|---|------------------|------------------------|
| <i>norethin ace-eth estrad-fe oral tablet 1-20 mg-mcg</i>             | Blisovi FE 1/20  |                        |
| <i>norethindrone acet-ethinyl est oral tablet 1-20 mg-mcg</i>         | Junel 1/20       |                        |
| <i>norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg</i>          | Estarylla        |                        |
| <i>nortrel 0.5/35 (28) oral tablet 0.5-35 mg-mcg</i>                  |                  |                        |
| <i>nortrel 1/35 (21) oral tablet 1-35 mg-mcg</i>                      | Dasetta 1/35     |                        |
| <i>nortrel 1/35 (28) oral tablet 1-35 mg-mcg</i>                      | Dasetta 1/35     |                        |
| <i>ocella oral tablet 3-0.03 mg</i>                                   | Ocella           |                        |
| <i>orsythia oral tablet 0.1-20 mg-mcg</i>                             | Aviane           |                        |
| <i>philith oral tablet 0.4-35 mg-mcg</i>                              | Balziva          |                        |
| <i>pirmella 1/35 oral tablet 1-35 mg-mcg</i>                          | Dasetta 1/35     |                        |
| <i>portia-28 oral tablet 0.15-30 mg-mcg</i>                           | Altavera         |                        |
| <i>previfem oral tablet 0.25-35 mg-mcg</i>                            | Estarylla        |                        |
| <i>reclipsen oral tablet 0.15-30 mg-mcg</i>                           | Apri             |                        |
| <i>sprintec 28 oral tablet 0.25-35 mg-mcg</i>                         | Estarylla        |                        |
| <i>sronyx oral tablet 0.1-20 mg-mcg</i>                               | Aviane           |                        |
| <i>syeda oral tablet 3-0.03 mg</i>                                    | Ocella           |                        |
| <b>TARINA 24 FE ORAL TABLET 1-20 MG-MCG(24)</b>                       |                  |                        |
| <i>tarina fe 1/20 oral tablet 1-20 mg-mcg</i>                         | Blisovi FE 1/20  |                        |
| <b>TYBLUME ORAL TABLET CHEWABLE 0.1-20 MG-MCG</b>                     |                  |                        |
| <i>vestura oral tablet 3-0.02 mg</i>                                  | Loryna           |                        |
| <i>vienva oral tablet 0.1-20 mg-mcg</i>                               | Aviane           |                        |
| <i>vyfemla oral tablet 0.4-35 mg-mcg</i>                              | Balziva          |                        |
| <i>wera oral tablet 0.5-35 mg-mcg</i>                                 |                  |                        |
| <i>zarah oral tablet 3-0.03 mg</i>                                    | Ocella           |                        |
| <i>zovia 1/35e (28) oral tablet 1-35 mg-mcg</i>                       |                  |                        |
| <b>*Combination Contraceptives - Transdermal***</b>                   |                  |                        |
| <i>xulane transdermal patch weekly 150-35 mcg/24hr</i>                |                  | QLL (3 EA per 28 days) |
| <b>*Combination Contraceptives - Vaginal***</b>                       |                  |                        |
| <i>etonogestrel-ethinyl estradiol vaginal ring 0.12-0.015 mg/24hr</i> | EluRyng          | QLL (1 EA per 28 days) |

| <b>Formulary Drug Name</b>  | <b>Reference</b>              | <b>Restrictions</b>         |
|---|-------------------------------|-----------------------------|
| <b>*Continuous Contraceptives - Oral***</b>                             |                               |                             |
| <i>amethyst oral tablet 90-20 mcg</i>                                   | Amethyst                      |                             |
| <i>levonorgestrel-ethinyl estrad oral tablet 90-20 mcg</i>              | Amethyst                      |                             |
| <b>*Copper Contraceptives - Iud***</b>                                  |                               |                             |
| <b>PARAGARD INTRAUTERINE COPPER INTRAUTERINE INTRAUTERINE DEVICE</b>    |                               |                             |
| <b>*Emergency Contraceptives***</b>                                     |                               |                             |
| <b>AFTERA ORAL TABLET 1.5 MG</b>  | levonorgestrel                | OTC; QLL (3 EA per 90 days) |
| <b>ECONTRA EZ ORAL TABLET 1.5 MG</b>                                    | levonorgestrel                | OTC; QLL (3 EA per 90 days) |
| <b>ECONTRA ONE-STEP ORAL TABLET 1.5 MG</b>                              | levonorgestrel                | OTC; QLL (3 EA per 90 days) |
| <b>ELLA ORAL TABLET 30 MG</b>   |                               |                             |
| <i>levonorgestrel oral tablet 1.5 mg</i>                                | Aftera                        | OTC; QLL (3 EA per 90 days) |
| <b>MY CHOICE ORAL TABLET 1.5 MG</b>                                     | levonorgestrel                | OTC; QLL (3 EA per 90 days) |
| <b>MY WAY ORAL TABLET 1.5 MG</b>  | levonorgestrel                | OTC; QLL (3 EA per 90 days) |
| <b>NEW DAY ORAL TABLET 1.5 MG</b>                                       | levonorgestrel                | OTC; QLL (3 EA per 90 days) |
| <b>OPCICON ONE-STEP ORAL TABLET 1.5 MG</b>                              | levonorgestrel                | OTC; QLL (3 EA per 90 days) |
| <i>option 2 oral tablet 1.5 mg</i>                                      | Aftera                        | OTC; QLL (3 EA per 90 days) |
| <b>REACT ORAL TABLET 1.5 MG</b>   | levonorgestrel                | OTC; QLL (3 EA per 90 days) |
| <b>TAKE ACTION ORAL TABLET 1.5 MG</b>                                   | levonorgestrel                | OTC; QLL (3 EA per 90 days) |
| <b>*Extended-Cycle Contraceptives - Oral***</b>                         |                               |                             |
| <b>AMETHIA ORAL TABLET 0.15-0.03 &amp;0.01 MG</b>                       | levonorgest-eth estrad 91-day |                             |
| <b>ASHLYNA ORAL TABLET 0.15-0.03 &amp;0.01 MG</b>                       | levonorgest-eth estrad 91-day |                             |
| <b>CAMRESE ORAL TABLET 0.15-0.03 &amp;0.01 MG</b>                       | levonorgest-eth estrad 91-day |                             |
| <b>DAYSEE ORAL TABLET 0.15-0.03 &amp;0.01 MG</b>                        | levonorgest-eth estrad 91-day |                             |
| <i>introvale oral tablet 0.15-0.03 mg</i>                               | Introvale                     |                             |
| <b>JAIMIESS ORAL TABLET 0.15-0.03 &amp;0.01 MG</b>                      | levonorgest-eth estrad 91-day |                             |
| <i>jolessa oral tablet 0.15-0.03 mg</i>                                 | Introvale                     |                             |
| <i>levonorgest-eth estrad 91-day oral tablet 0.15-0.03 &amp;0.01 mg</i> | Amethia                       |                             |



| <b>Formulary Drug Name</b>  | <b>Reference</b>              | <b>Restrictions</b>      |
|---|-------------------------------|--------------------------|
| <i>levonorgest-eth estrad 91-day oral tablet 0.15-0.03 mg</i>                           | Introvale                     |                          |
| <i>quasense oral tablet 0.15-0.03 mg</i>  | Introvale                     |                          |
| <i>setlakin oral tablet 0.15-0.03 mg</i>  | Introvale                     |                          |
| <b>SIMPESSE ORAL TABLET 0.15-0.03 &amp; 0.01 MG</b>                                     | levonorgest-eth estrad 91-day |                          |
| <b>*Progestin Contraceptives - Implants***</b>  |                               |                          |
| <b>NEXPLANON SUBCUTANEOUS IMPLANT 68 MG</b>   |                               |                          |
| <b>*Progestin Contraceptives - Injectable***</b>  |                               |                          |
| <b>DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE 104 MG/0.65ML</b>    |                               |                          |
| <i>medroxyprogesterone acetate intramuscular suspension 150 mg/ml</i>                   | Depo-Provera                  |                          |
| <i>medroxyprogesterone acetate intramuscular suspension prefilled syringe 150 mg/ml</i> | Depo-Provera                  |                          |
| <b>*Progestin Contraceptives - Iud***</b>   |                               |                          |
| <b>KYLEENA INTRAUTERINE INTRAUTERINE DEVICE 19.5 MG</b>                                 |                               |                          |
| <b>LILETTA (52 MG) INTRAUTERINE INTRAUTERINE DEVICE 19.5 MCG/DAY</b>                    |                               |                          |
| <b>MIRENA (52 MG) INTRAUTERINE INTRAUTERINE DEVICE 20 MCG/24HR</b>                      |                               |                          |
| <b>SKYLA INTRAUTERINE INTRAUTERINE DEVICE 13.5 MG</b>                                   |                               |                          |
| <b>*Progestin Contraceptives - Oral***</b>  |                               |                          |
| <i>camila oral tablet 0.35 mg</i>   | Camila                        | ST; QLL (1 EA per 1 day) |
| <i>deblitane oral tablet 0.35 mg</i>  | Camila                        | ST; QLL (1 EA per 1 day) |
| <i>errin oral tablet 0.35 mg</i>  | Camila                        | ST; QLL (1 EA per 1 day) |
| <i>heather oral tablet 0.35 mg</i>  | Camila                        | ST; QLL (1 EA per 1 day) |
| <i>jencycla oral tablet 0.35 mg</i>   | Camila                        | ST; QLL (1 EA per 1 day) |
| <i>jolivette oral tablet 0.35 mg</i>  | Camila                        | ST; QLL (1 EA per 1 day) |
| <i>lyza oral tablet 0.35 mg</i>   | Camila                        | ST; QLL (1 EA per 1 day) |
| <i>nora-be oral tablet 0.35 mg</i>  | Camila                        | ST; QLL (1 EA per 1 day) |
| <i>norethindrone oral tablet 0.35 mg</i>  | Camila                        | ST; QLL (1 EA per 1 day) |
| <i>norlyda oral tablet 0.35 mg</i>  | Camila                        | ST; QLL (1 EA per 1 day) |
| <i>norlyroc oral tablet 0.35 mg</i>   | Camila                        | ST; QLL (1 EA per 1 day) |

| <b>Formulary Drug Name</b>  | <b>Reference</b> | <b>Restrictions</b>      |
|---|------------------|--------------------------|
| <i>sharobel oral tablet 0.35 mg</i>   | Camila           | ST; QLL (1 EA per 1 day) |
| <b>*Triphasic Contraceptives - Oral***</b>                                  |                  |                          |
| <i>alyacen 7/7/7 oral tablet 0.5/0.75/1-35 mg-mcg</i>                       | Dasetta 7/7/7    |                          |
| <i>aranelle oral tablet 0.5/1/0.5-35 mg-mcg</i>                             |                  |                          |
| <i>caziant oral tablet 0.1/0.125/0.15 -0.025 mg</i>                         |                  |                          |
| <i>cyclafem 7/7/7 oral tablet 0.5/0.75/1-35 mg-mcg</i>                      | Dasetta 7/7/7    |                          |
| <i>dasetta 7/7/7 oral tablet 0.5/0.75/1-35 mg-mcg</i>                       | Dasetta 7/7/7    |                          |
| <i>enpresse-28 oral tablet 50-30/75-40/ 125-30 mcg</i>                      |                  |                          |
| <i>leena oral tablet 0.5/1/0.5-35 mg-mcg</i>                                |                  |                          |
| <i>levonest oral tablet 50-30/75-40/ 125-30 mcg</i>                         |                  |                          |
| <i>norgestim-eth estrad triphasic oral tablet 0.18/0.215/0.25 mg-35 mcg</i> | Tri Femynor      |                          |
| <i>nortrel 7/7/7 oral tablet 0.5/0.75/1-35 mg-mcg</i>                       | Dasetta 7/7/7    |                          |
| <i>pirmella 7/7/7 oral tablet 0.5/0.75/1-35 mg-mcg</i>                      | Dasetta 7/7/7    |                          |
| <i>tilia fe oral tablet 1-20/1-30/1-35 mg-mcg</i>                           |                  |                          |
| <i>tri femynor oral tablet 0.18/0.215/0.25 mg-35 mcg</i>                    | Tri Femynor      |                          |
| <i>tri-estarylla oral tablet 0.18/0.215/0.25 mg-35 mcg</i>                  | Tri Femynor      |                          |
| <i>tri-legest fe oral tablet 1-20/1-30/1-35 mg-mcg</i>                      |                  |                          |
| <i>tri-linyah oral tablet 0.18/0.215/0.25 mg-35 mcg</i>                     | Tri Femynor      |                          |
| <i>trinessa (28) oral tablet 0.18/0.215/0.25 mg-35 mcg</i>                  | Tri Femynor      |                          |
| <i>tri-previfem oral tablet 0.18/0.215/0.25 mg-35 mcg</i>                   | Tri Femynor      |                          |
| <i>tri-sprintec oral tablet 0.18/0.215/0.25 mg-35 mcg</i>                   | Tri Femynor      |                          |
| <i>trivora (28) oral tablet 50-30/75-40/ 125-30 mcg</i>                     |                  |                          |
| <i>velivet oral tablet 0.1/0.125/0.15 -0.025 mg</i>                         |                  |                          |
| <b>*Corticosteroids*</b>  |                  |                          |
| <b>*Glucocorticosteroids***</b>   |                  |                          |
| <i>budesonide oral capsule delayed release particles 3 mg</i>               |                  |                          |
| <i>deltasone oral tablet 20 mg</i>  |                  |                          |

| <b>Formulary Drug Name</b>  | <b>Reference</b>          | <b>Restrictions</b> |
|---|---------------------------|---------------------|
| <b>DEXAMETHASONE INTENSOL ORAL CONCENTRATE 1 MG/ML</b>  |                           |                     |
| <i>dexamethasone oral elixir 0.5 mg/5ml</i>   |                           |                     |
| <i>dexamethasone oral solution 0.5 mg/5ml</i>   |                           |                     |
| <i>dexamethasone oral tablet 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg</i>                                |                           |                     |
| <i>dexamethasone sod phosphate pf injection solution 10 mg/ml</i>   |                           |                     |
| <i>dexamethasone sodium phosphate injection solution 10 mg/ml, 100 mg/10ml, 120 mg/30ml, 20 mg/5ml, 4 mg/ml</i> |                           |                     |
| <i>hydrocortisone oral tablet 10 mg, 20 mg, 5 mg</i>  | Cortef                    |                     |
| <i>methylprednisolone oral tablet 16 mg, 4 mg, 8 mg</i>   | Medrol                    |                     |
| <i>methylprednisolone oral tablet 32 mg</i>   |                           |                     |
| <i>methylprednisolone oral tablet therapy pack 4 mg</i>   | Medrol                    |                     |
| <i>prednisolone oral solution 15 mg/5ml</i>   |                           |                     |
| <i>prednisolone sodium phosphate oral solution 15 mg/5ml, 25 mg/5ml</i>   |                           |                     |
| <i>prednisolone sodium phosphate oral solution 6.7 (5 base) mg/5ml</i>  | Pediapred                 |                     |
| <i>prednisone oral solution 5 mg/5ml</i>  |                           |                     |
| <i>prednisone oral tablet 1 mg, 10 mg, 2.5 mg, 20 mg, 5 mg, 50 mg</i>   |                           |                     |
| <i>prednisone oral tablet therapy pack 10 mg (21), 10 mg (48), 5 mg (21), 5 mg (48)</i>                         |                           |                     |
| <b>SOLU-CORTEF INJECTION SOLUTION RECONSTITUTED 100 MG, 1000 MG, 250 MG, 500 MG</b>                             |                           |                     |
| <b>*Mineralocorticoids***</b>   |                           |                     |
| <i>fludrocortisone acetate oral tablet 0.1 mg</i>   |                           |                     |
| <b>*Cough/Cold/Allergy*</b>   |                           |                     |
| <b>*Antihistamine-Analgesics***</b>   |                           |                     |
| <b>CORICIDIN HBP COLD/FLU ORAL TABLET 2-325 MG</b>  | sb cold & flu hbp         | OTC                 |
| <i>percogesic extra strength oral tablet 12.5-500 mg</i>  | Percogesic Extra Strength | OTC                 |
| <b>PERCOGESIC ORAL TABLET 12.5-325 MG</b>   |                           | OTC                 |
| <i>qc cold relief oral tablet 12.5-500 mg</i>   | Percogesic Extra Strength | OTC                 |
| <i>qc severe allergy oral tablet 12.5-500 mg</i>  | Percogesic Extra Strength | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>             | <b>Restrictions</b> |
|--|------------------------------|---------------------|
| <i>ra cold &amp; flu oral tablet 2-325 mg</i>                                    | Coricidin HBP Cold/Flu       | OTC                 |
| <i>sb cold &amp; flu hbp oral tablet 2-325 mg</i>                                | Coricidin HBP Cold/Flu       | OTC                 |
| <i>severe allergy oral tablet 12.5-500 mg</i>                                    | Percogesic Extra Strength    | OTC                 |
| <b>*Antitussive - Nonnarcotic***</b>   |                              |                     |
| <i>benzonatate oral capsule 100 mg, 150 mg, 200 mg</i>                           |                              | AL (Min 6 Years)    |
| <i>cough dm childrens oral suspension extended release 30 mg/5ml</i>             | Robitussin 12 Hour Cough     | OTC                 |
| <i>cough dm oral suspension extended release 30 mg/5ml</i>                       | Robitussin 12 Hour Cough     | OTC                 |
| <i>cvs cough dm childrens oral suspension extended release 30 mg/5ml</i>         | Robitussin 12 Hour Cough     | OTC                 |
| <i>cvs cough dm oral suspension extended release 30 mg/5ml</i>                   | Robitussin 12 Hour Cough     | OTC                 |
| <i>cvs tussin long-acting oral liquid 15 mg/5ml</i>                              | Wal-Tussin Cough Long Acting | OTC                 |
| <i>cvs tussin maximum strength oral syrup 15 mg/5ml</i>                          | Wal-Tussin Cough Long Acting | OTC                 |
| <i>daytime cough oral liquid 15 mg/15ml</i>                                      | Vicks DayQuil Cough          | OTC                 |
| <b>DELSYM COUGH CHILDRENS ORAL SUSPENSION EXTENDED RELEASE 30 MG/5ML</b>         | cough dm                     | OTC                 |
| <b>DELSYM ORAL SUSPENSION EXTENDED RELEASE 30 MG/5ML</b>                         | cough dm                     | OTC                 |
| <i>dextromethorphan hbr oral capsule 15 mg</i>                                   | Wal-Tussin Cough             | OTC                 |
| <i>dextromethorphan polistirex er oral suspension extended release 30 mg/5ml</i> | Robitussin 12 Hour Cough     | OTC                 |
| <i>eq cough dm oral suspension extended release 30 mg/5ml</i>                    | Robitussin 12 Hour Cough     | OTC                 |
| <i>eql cough dm oral suspension extended release 30 mg/5ml</i>                   | Robitussin 12 Hour Cough     | OTC                 |
| <i>eql tussin cough long-acting oral syrup 15 mg/5ml</i>                         | Wal-Tussin Cough Long Acting | OTC                 |
| <i>father johns medicine oral syrup 10 mg/5ml</i>                                |                              | OTC                 |
| <i>gnp cough dm er oral suspension extended release 30 mg/5ml</i>                | Robitussin 12 Hour Cough     | OTC                 |
| <i>gnp cough relief oral liquid 15 mg/5ml</i>                                    | Wal-Tussin Cough Long Acting | OTC                 |
| <i>gnp tussin cough long acting oral syrup 15 mg/5ml</i>                         | Wal-Tussin Cough Long Acting | OTC                 |
| <i>goodsense cough dm childrens oral suspension extended release 30 mg/5ml</i>   | Robitussin 12 Hour Cough     | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>             | <b>Restrictions</b>           |
|--|------------------------------|-------------------------------|
| <i>goodsense cough dm oral suspension extended release 30 mg/5ml</i>             | Robitussin 12 Hour Cough     | OTC                           |
| <i>hm cough dm oral suspension extended release 30 mg/5ml</i>                    | Robitussin 12 Hour Cough     | OTC                           |
| <i>hm cough relief oral liquid 15 mg/5ml</i>                                     | Wal-Tussin Cough Long Acting | OTC                           |
| <i>px tussin max oral syrup 15 mg/5ml</i>  | Wal-Tussin Cough Long Acting | OTC                           |
| <i>qc cough relief oral liquid 15 mg/5ml</i>                                     | Wal-Tussin Cough Long Acting | OTC                           |
| <i>ra cough dm oral suspension extended release 30 mg/5ml</i>                    | Robitussin 12 Hour Cough     | OTC                           |
| <i>ra tussin long acting cough oral liquid 15 mg/5ml</i>                         | Wal-Tussin Cough Long Acting | OTC                           |
| <i>ra tussin maximum strength oral syrup 15 mg/5ml</i>                           | Wal-Tussin Cough Long Acting | OTC                           |
| <i>robitussin 12 hour cough child oral suspension extended release 30 mg/5ml</i> | Robitussin 12 Hour Cough     | OTC                           |
| <i>robitussin 12 hour cough oral suspension extended release 30 mg/5ml</i>       | Robitussin 12 Hour Cough     | OTC                           |
| <b>ROBITUSSIN CHILDRENS COUGH LA ORAL SYRUP 7.5 MG/5ML</b>                       |                              | OTC                           |
| <i>robitussin lingering la cough oral liquid 15 mg/5ml</i>                       | Wal-Tussin Cough Long Acting | OTC; QLL (120 ML per 30 days) |
| <b>SCOT-TUSSIN DIABETES ORAL LIQUID 10 MG/5ML</b>                                |                              | OTC                           |
| <i>silphen dm cough oral syrup 10 mg/5ml</i>                                     |                              | OTC                           |
| <i>sm cough relief oral syrup 15 mg/5ml</i>                                      | Wal-Tussin Cough Long Acting | OTC                           |
| <i>tussin cough oral capsule 15 mg</i>   | Wal-Tussin Cough             | OTC                           |
| <i>tussin cough oral syrup 15 mg/5ml</i>   | Wal-Tussin Cough Long Acting | OTC                           |
| <b>VICKS DAYQUIL COUGH ORAL LIQUID 15 MG/15ML</b>                                | daytime cough                | OTC                           |
| <i>wal-tussin cough long acting oral liquid 15 mg/5ml</i>                        | Wal-Tussin Cough Long Acting | OTC                           |
| <i>wal-tussin cough long acting oral syrup 15 mg/5ml</i>                         | Wal-Tussin Cough Long Acting | OTC                           |
| <i>wal-tussin cough oral syrup 15 mg/5ml</i>                                     | Wal-Tussin Cough Long Acting | OTC                           |
| <b>WAL-TUSSIN COUGH RELIEF ORAL TABLET CHEWABLE 7.5 MG</b>                       |                              | OTC                           |

| <b>Formulary Drug Name</b>   | <b>Reference</b>              | <b>Restrictions</b> |
|--|-------------------------------|---------------------|
| <b>*Antitussive - Opioid***</b>  |                               |                     |
| <i>hydrocodone bit-homatrop mbr oral solution 5-1.5 mg/5ml</i>           | Hycodan                       | AL (Min 18 Years)   |
| <i>hydrocodone bit-homatrop mbr oral tablet 5-1.5 mg</i>                 | Hycodan                       | AL (Min 18 Years)   |
| <i>hydromet oral solution 5-1.5 mg/5ml</i>                               | Hycodan                       | AL (Min 18 Years)   |
| <b>*Antitussive-Antihistamine-Analgesic***</b>                           |                               |                     |
| <i>all-nite cold &amp; flu nighttime oral liquid 30-12.5-650 mg/30ml</i> | Coricidin HBP Nighttime Cold  | OTC                 |
| <i>cold &amp; flu nighttime oral liquid 15-6.25-325 mg/15ml</i>          | Coricidin HBP Nighttime Cold  | OTC                 |
| <i>cold &amp; flu relief nighttime oral liquid 15-6.25-325 mg/15ml</i>   | Coricidin HBP Nighttime Cold  | OTC                 |
| <i>cold/flu relief nighttime oral liquid 15-6.25-325 mg/15ml</i>         | Coricidin HBP Nighttime Cold  | OTC                 |
| <i>coricidin hbp nighttime cold oral liquid 15-6.25-325 mg/15ml</i>      | Coricidin HBP Nighttime Cold  | OTC                 |
| <i>cvs nighttime cold/flu relief oral liquid 15-6.25-325 mg/15ml</i>     | Coricidin HBP Nighttime Cold  | OTC                 |
| <i>eq nitetime cold/flu ms relief oral liquid 15-6.25-325 mg/15ml</i>    | Coricidin HBP Nighttime Cold  | OTC                 |
| <i>eql nighttime cold &amp; flu oral liquid 15-6.25-325 mg/15ml</i>      | Coricidin HBP Nighttime Cold  | OTC                 |
| <i>eql nighttime cold/flu relief oral liquid 30-12.5-650 mg/30ml</i>     | Coricidin HBP Nighttime Cold  | OTC                 |
| <i>gnp night time cold &amp; flu oral liquid 15-6.25-325 mg/15ml</i>     | Coricidin HBP Nighttime Cold  | OTC                 |
| <i>hm night time cold &amp; flu oral liquid 15-6.25-325 mg/15ml</i>      | Coricidin HBP Nighttime Cold  | OTC                 |
| <i>nighttime cold &amp; flu max str oral liquid 15-6.25-325 mg/15ml</i>  | Coricidin HBP Nighttime Cold  | OTC                 |
| <i>nighttime cold/flu relief oral liquid 15-6.25-325 mg/15ml</i>         | Coricidin HBP Nighttime Cold  | OTC                 |
| <i>ra nighttime cold/flu relief oral liquid 30-12.5-650 mg/30ml</i>      | Coricidin HBP Nighttime Cold  | OTC                 |
| <i>sm nite time cold &amp; flu oral liquid 15-6.25-325 mg/15ml</i>       | Coricidin HBP Nighttime Cold  | OTC                 |
| <b>VICKS NYQUIL COLD &amp; FLU NIGHT ORAL LIQUID 15-6.25-325 MG/15ML</b> | all-nite cold & flu nighttime | OTC                 |
| <b>VICKS NYQUIL COLD &amp; FLU ORAL LIQUID 15-6.25-325 MG/15ML</b>       | all-nite cold & flu nighttime | OTC                 |



| <b>Formulary Drug Name</b>  | <b>Reference</b>               | <b>Restrictions</b> |
|---|--------------------------------|---------------------|
| <b>*Antitussive-Decongestant-Analgesic***</b>                         |                                |                     |
| <i>666 cold preparation oral liquid 10-5-325 mg/15ml</i>              | Theraflu ExpressMax            | OTC                 |
| <i>alka-seltzer pls sinus &amp; cough oral capsule 10-5-325 mg</i>    | Alka-Seltzer Pls Sinus & Cough | OTC                 |
| <i>alka-seltzer plus day cold/flu oral capsule 10-5-325 mg</i>        | Alka-Seltzer Pls Sinus & Cough | OTC                 |
| <i>cold head congestion daytime oral tablet 10-5-325 mg</i>           | Mapap Cold Formula Multi-Sympt | OTC                 |
| <i>cold multi-symptom daytime oral tablet 10-5-325 mg</i>             | Mapap Cold Formula Multi-Sympt | OTC                 |
| <i>cold relief oral tablet 10-5-325 mg</i>                            | Mapap Cold Formula Multi-Sympt | OTC                 |
| <i>cold/flu relief oral liquid 10-5-325 mg/15ml</i>                   | Theraflu ExpressMax            | OTC                 |
| <b>COMTREX COLD &amp; COUGH MAX ST ORAL TABLET 10-5-325 MG</b>        | cold multi-symptom daytime     | OTC                 |
| <i>cvs flu/severe cold daytime oral liquid 10-5-325 mg/15ml</i>       | Theraflu ExpressMax            | OTC                 |
| <i>daytime cold &amp; flu relief oral liquid 10-5-325 mg/15ml</i>     | Theraflu ExpressMax            | OTC                 |
| <i>daytime cold/flu relief oral capsule 10-5-325 mg</i>               | Alka-Seltzer Pls Sinus & Cough | OTC                 |
| <i>daytime cold/flu relief oral liquid 10-5-325 mg/15ml</i>           | Theraflu ExpressMax            | OTC                 |
| <i>day-time cold/flu relief oral liquid 10-5-325 mg/15ml</i>          | Theraflu ExpressMax            | OTC                 |
| <i>day-time pe cold/flu relief oral capsule 10-5-325 mg</i>           | Alka-Seltzer Pls Sinus & Cough | OTC                 |
| <i>eq cold multi-symptom daytime oral tablet 10-5-325 mg</i>          | Mapap Cold Formula Multi-Sympt | OTC                 |
| <i>eq daytime cold/flu ms relief oral capsule 10-5-325 mg</i>         | Alka-Seltzer Pls Sinus & Cough | OTC                 |
| <i>eq daytime cold/flu ms relief oral liquid 10-5-325 mg/15ml</i>     | Theraflu ExpressMax            | OTC                 |
| <i>eql cold multi-symptom daytime oral tablet 10-5-325 mg</i>         | Mapap Cold Formula Multi-Sympt | OTC                 |
| <i>eql daytime cold &amp; flu relief oral liquid 10-5-325 mg/15ml</i> | Theraflu ExpressMax            | OTC                 |
| <i>eql daytime cold/flu relief oral capsule 10-5-325 mg</i>           | Alka-Seltzer Pls Sinus & Cough | OTC                 |
| <i>flu/severe cold &amp; cough day oral packet 20-10-650 mg</i>       | Wal-Flu Severe Cold & Cough    | OTC                 |



| <b>Formulary Drug Name</b>   | <b>Reference</b>               | <b>Restrictions</b> |
|--|--------------------------------|---------------------|
| <i>gnp cold relief multi-symptom oral tablet 10-5-325 mg</i>       | Mapap Cold Formula Multi-Sympt | OTC                 |
| <i>gnp day time cold/flu oral capsule 10-5-325 mg</i>              | Alka-Seltzer Pls Sinus & Cough | OTC                 |
| <i>gnp day time cold/flu relief oral liquid 10-5-325 mg/15ml</i>   | Theraflu ExpressMax            | OTC                 |
| <i>gnp flu relief therapy daytime oral liquid 10-5-325 mg/15ml</i> | Theraflu ExpressMax            | OTC                 |
| <i>gnp flu/severe cold/cough day oral packet 20-10-650 mg</i>      | Wal-Flu Severe Cold & Cough    | OTC                 |
| <i>goodsense cold &amp; flu oral liquid 10-5-325 mg/15ml</i>       | Theraflu ExpressMax            | OTC                 |
| <i>goodsense daytime oral capsule 10-5-325 mg</i>                  | Alka-Seltzer Pls Sinus & Cough | OTC                 |
| <i>goodsense pressure/pain/cough oral tablet 10-5-325 mg</i>       | Mapap Cold Formula Multi-Sympt | OTC                 |
| <i>hm day time oral capsule 10-5-325 mg</i>                        | Alka-Seltzer Pls Sinus & Cough | OTC                 |
| <i>hm daytime cold &amp; flu oral liquid 10-5-325 mg/15ml</i>      | Theraflu ExpressMax            | OTC                 |
| <i>hm severe cold/cough/flu oral packet 20-10-650 mg</i>           | Wal-Flu Severe Cold & Cough    | OTC                 |
| <i>mapap cold formula multi-sympt oral tablet 10-5-325 mg</i>      | Mapap Cold Formula Multi-Sympt | OTC                 |
| <i>mucinex fast-max cold &amp; sinus oral capsule 10-5-325 mg</i>  | Alka-Seltzer Pls Sinus & Cough | OTC                 |
| <i>px daytime cold oral tablet 10-5-325 mg</i>                     | Mapap Cold Formula Multi-Sympt | OTC                 |
| <i>px daytime cold/flu relief oral liquid 10-5-325 mg/15ml</i>     | Theraflu ExpressMax            | OTC                 |
| <i>px daytime pe oral capsule 10-5-325 mg</i>                      | Alka-Seltzer Pls Sinus & Cough | OTC                 |
| <i>qc daytime cold/flu oral capsule 10-5-325 mg</i>                | Alka-Seltzer Pls Sinus & Cough | OTC                 |
| <i>qc flu relief therapy daytime oral liquid 10-5-325 mg/15ml</i>  | Theraflu ExpressMax            | OTC                 |
| <i>qc severe cold/cough daytime oral packet 20-10-650 mg</i>       | Wal-Flu Severe Cold & Cough    | OTC                 |
| <b>RA ACETAMINOPHEN FLU COLD ORAL TABLET 30-500-15 MG</b>          |                                | OTC                 |
| <i>ra cold multi-symptom daytime oral tablet 10-5-325 mg</i>       | Mapap Cold Formula Multi-Sympt | OTC                 |
| <i>ra cold/flu relief daytime oral capsule 10-5-325 mg</i>         | Alka-Seltzer Pls Sinus & Cough | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b>               | <b>Restrictions</b> |
|---|--------------------------------|---------------------|
| <i>ra day time cold/flu formula oral liquid 10-5-325 mg/15ml</i>      | Theraflu ExpressMax            | OTC                 |
| <i>ra daytime cold/flu relief oral liquid 10-5-325 mg/15ml</i>        | Theraflu ExpressMax            | OTC                 |
| <i>ra daytime multi-symp cold/flu oral capsule 10-5-325 mg</i>        | Alka-Seltzer Pls Sinus & Cough | OTC                 |
| <i>ra daytime multi-symptom cold oral capsule 10-5-325 mg</i>         | Alka-Seltzer Pls Sinus & Cough | OTC                 |
| <i>ra severe cold &amp; cough day oral packet 20-10-650 mg</i>        | Wal-Flu Severe Cold & Cough    | OTC                 |
| <i>robitussin cold+flu daytime oral capsule 10-5-325 mg</i>           | Alka-Seltzer Pls Sinus & Cough | OTC                 |
| <i>sb daytime oral liquid 10-5-325 mg/15ml</i>                        | Theraflu ExpressMax            | OTC                 |
| <i>sb flu relief therapy daytime oral liquid 10-5-325 mg/15ml</i>     | Theraflu ExpressMax            | OTC                 |
| <i>sm day time cold &amp; flu relief oral liquid 10-5-325 mg/15ml</i> | Theraflu ExpressMax            | OTC                 |
| <i>sm day time non drowsy oral capsule 10-5-325 mg</i>                | Alka-Seltzer Pls Sinus & Cough | OTC                 |
| <i>sm day time pe cold/flu relief oral capsule 10-5-325 mg</i>        | Alka-Seltzer Pls Sinus & Cough | OTC                 |
| <i>tgt cold/flu relief day time oral liquid 10-5-325 mg/15ml</i>      | Theraflu ExpressMax            | OTC                 |
| <i>theraflu expressmax oral liquid 20-10-650 mg/30ml</i>              | Theraflu ExpressMax            | OTC                 |
| <i>theraflu expressmax sev cld/cg oral tablet 10-5-325 mg</i>         | Mapap Cold Formula Multi-Sympt | OTC                 |
| <b>THERAFLU SEVERE COLD DAYTIME ORAL TABLET 15-5-325 MG</b>           |                                | OTC                 |
| <i>theraflu severe cold/cgh day oral tablet 10-5-325 mg</i>           | Mapap Cold Formula Multi-Sympt | OTC                 |
| <b>TYLENOL COLD MAX ORAL LIQUID 10-5-325 MG/15ML</b>                  | cvs flu/severe cold daytime    | OTC                 |
| <i>tylenol cold max oral tablet 10-5-325 mg</i>                       | Mapap Cold Formula Multi-Sympt | OTC                 |
| <i>vicks dayquil cold &amp; flu oral capsule 10-5-325 mg</i>          | Alka-Seltzer Pls Sinus & Cough | OTC                 |
| <i>vicks dayquil cold &amp; flu oral liquid 10-5-325 mg/15ml</i>      | Theraflu ExpressMax            | OTC                 |
| <i>wal-flu severe cold &amp; cough oral liquid 10-5-325 mg/15ml</i>   | Theraflu ExpressMax            | OTC                 |
| <i>wal-flu severe cold &amp; cough oral packet 20-10-650 mg</i>       | Wal-Flu Severe Cold & Cough    | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>               | <b>Restrictions</b> |
|--|--------------------------------|---------------------|
| <b>*Antitussive-Expectorant - Decongest-Analgesic***</b>               |                                |                     |
| <i>cold &amp; flu severe daytime oral liquid 5-10-200-325 mg/15ml</i>  | Theraflu ExpressMax Sev Cld/FI | OTC                 |
| <i>cold &amp; flu severe daytime oral tablet 5-10-200-325 mg</i>       | Theraflu ExpressMax Sev Cld/FI | OTC                 |
| <i>cold &amp; flu severe oral tablet 5-10-200-325 mg</i>               | Theraflu ExpressMax Sev Cld/FI | OTC                 |
| <i>cold head congestion severe oral tablet 5-10-200-325 mg</i>         | Theraflu ExpressMax Sev Cld/FI | OTC                 |
| <i>cvs multi-symptoms cold/fever oral liquid 5-10-200-325 mg/10ml</i>  | Robitussin Severe Multi-Symp   | OTC                 |
| <i>cvs sinus pe oral tablet 5-10-100-325 mg</i>                        | Wal-Phed PE Cold & Cough       | OTC                 |
| <i>daytime severe cold &amp; flu oral liquid 5-10-200-325 mg/15ml</i>  | Theraflu ExpressMax Sev Cld/FI | OTC                 |
| <i>delsym cough/cold daytime oral liquid 5-10-200-325 mg/10ml</i>      | Robitussin Severe Multi-Symp   | OTC                 |
| <i>eq cold flu &amp; sore throat oral tablet 5-10-200-325 mg</i>       | Theraflu ExpressMax Sev Cld/FI | OTC                 |
| <i>eq cold multi-symptom severe oral tablet 5-10-200-325 mg</i>        | Theraflu ExpressMax Sev Cld/FI | OTC                 |
| <i>eq mucus relief cold flu oral liquid 5-10-200-325 mg/10ml</i>       | Robitussin Severe Multi-Symp   | OTC                 |
| <i>eq multi-symp cold/fever child oral liquid 5-10-200-325 mg/10ml</i> | Robitussin Severe Multi-Symp   | OTC                 |
| <i>eql cold multi-symptom severe oral tablet 5-10-200-325 mg</i>       | Theraflu ExpressMax Sev Cld/FI | OTC                 |
| <i>eql daytime severe cold/flu oral liquid 5-10-200-325 mg/15ml</i>    | Theraflu ExpressMax Sev Cld/FI | OTC                 |
| <i>eql mucus relief max strength oral tablet 5-10-200-325 mg</i>       | Theraflu ExpressMax Sev Cld/FI | OTC                 |
| <i>eql pressure/pain pe plus cold oral tablet 5-10-100-325 mg</i>      | Wal-Phed PE Cold & Cough       | OTC                 |
| <i>gnp cold relief cold &amp; flu oral tablet 5-10-200-325 mg</i>      | Theraflu ExpressMax Sev Cld/FI | OTC                 |
| <i>gnp cold relief daytime oral tablet 5-10-200-325 mg</i>             | Theraflu ExpressMax Sev Cld/FI | OTC                 |
| <i>gnp cold relief multi-symptom oral tablet 5-10-200-325 mg</i>       | Theraflu ExpressMax Sev Cld/FI | OTC                 |
| <i>gnp cold severe congestion day oral tablet 5-10-200-325 mg</i>      | Theraflu ExpressMax Sev Cld/FI | OTC                 |
| <i>gnp mucus relief cold flu oral tablet 5-10-200-325 mg</i>           | Theraflu ExpressMax Sev Cld/FI | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b>               | <b>Restrictions</b> |
|---|--------------------------------|---------------------|
| <i>gnp multi-symptom cold daytime oral liquid 5-10-200-325 mg/15ml</i>    | Theraflu ExpressMax Sev Cld/FI | OTC                 |
| <i>goodsense cold &amp; flu oral tablet 5-10-200-325 mg</i>               | Theraflu ExpressMax Sev Cld/FI | OTC                 |
| <i>goodsense day time cold &amp; flu oral liquid 5-10-200-325 mg/15ml</i> | Theraflu ExpressMax Sev Cld/FI | OTC                 |
| <i>goodsense day time cold &amp; flu oral tablet 5-10-200-325 mg</i>      | Theraflu ExpressMax Sev Cld/FI | OTC                 |
| <i>goodsense pressure/pain/cold oral tablet 5-10-100-325 mg</i>           | Wal-Phed PE Cold & Cough       | OTC                 |
| <i>hm cold flu &amp; sore throat oral liquid 5-10-200-325 mg/10ml</i>     | Robitussin Severe Multi-Symp   | OTC                 |
| <i>hm mucus relief fm cold/flu oral tablet 5-10-200-325 mg</i>            | Theraflu ExpressMax Sev Cld/FI | OTC                 |
| <i>hm mucus relief fm severe oral tablet 5-10-200-325 mg</i>              | Theraflu ExpressMax Sev Cld/FI | OTC                 |
| <i>hm severe cold/flu oral tablet 5-10-200-325 mg</i>                     | Theraflu ExpressMax Sev Cld/FI | OTC                 |
| <b>MUCINEX CHILD MULTI-SYMPTOM ORAL LIQUID 5-10-200-325 MG/10ML</b>       | cvs multi-symptoms cold/fever  | OTC                 |
| <b>MUCINEX COLD CGH THROAT CHILD ORAL LIQUID 5-10-200-325 MG/10ML</b>     | cvs multi-symptoms cold/fever  | OTC                 |
| <b>MUCINEX FAST-MAX COLD FLU ORAL LIQUID 5-10-200-325 MG/10ML</b>         | cvs multi-symptoms cold/fever  | OTC                 |
| <i>mucinex fast-max cold flu oral tablet 5-10-200-325 mg</i>              | Theraflu ExpressMax Sev Cld/FI | OTC                 |
| <b>MUCINEX FAST-MAX ORAL CAPSULE 5-10-200-325 MG</b>                      | cold & flu                     | OTC                 |
| <b>MUCINEX FAST-MAX SEVERE COLD ORAL LIQUID 5-10-200-325 MG/10ML</b>      | cvs multi-symptoms cold/fever  | OTC                 |
| <i>mucinex fast-max severe cold oral tablet 5-10-200-325 mg</i>           | Theraflu ExpressMax Sev Cld/FI | OTC                 |
| <b>MUCINEX SINUS-MAX ORAL CAPSULE 5-10-200-325 MG</b>                     | cold & flu                     | OTC                 |
| <i>mucus relief cold flu throat oral liquid 5-10-200-325 mg/10ml</i>      | Robitussin Severe Multi-Symp   | OTC                 |
| <i>mucus relief plus oral tablet 5-10-200-325 mg</i>                      | Theraflu ExpressMax Sev Cld/FI | OTC                 |
| <i>mucus relief severe cold day oral liquid 5-10-200-325 mg/10ml</i>      | Robitussin Severe Multi-Symp   | OTC                 |
| <i>px severe cold oral tablet 5-10-200-325 mg</i>                         | Theraflu ExpressMax Sev Cld/FI | OTC                 |
| <i>qc cold head congestion day oral tablet 5-10-200-325 mg</i>            | Theraflu ExpressMax Sev Cld/FI | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>               | <b>Restrictions</b> |
|--|--------------------------------|---------------------|
| <i>qc cold multi-symptom daytime oral tablet 5-10-200-325 mg</i>       | Theraflu ExpressMax Sev Cld/Fl | OTC                 |
| <i>ra cold multi-symptom daytime oral tablet 5-10-200-325 mg</i>       | Theraflu ExpressMax Sev Cld/Fl | OTC                 |
| <i>ra cold/cough sinus relief pe oral tablet 5-10-100-325 mg</i>       | Wal-Phed PE Cold & Cough       | OTC                 |
| <i>ra cold/flu/sore throat max oral tablet 5-10-200-325 mg</i>         | Theraflu ExpressMax Sev Cld/Fl | OTC                 |
| <i>ra head congest cold daytime oral tablet 5-10-200-325 mg</i>        | Theraflu ExpressMax Sev Cld/Fl | OTC                 |
| <i>ra mucus relief plus oral tablet 5-10-200-325 mg</i>                | Theraflu ExpressMax Sev Cld/Fl | OTC                 |
| <i>ra severe congestion/cold max oral tablet 5-10-200-325 mg</i>       | Theraflu ExpressMax Sev Cld/Fl | OTC                 |
| <i>robitussin severe multi-symp oral liquid 5-10-200-325 mg/10ml</i>   | Robitussin Severe Multi-Symp   | OTC                 |
| <i>sb cold &amp; flu severe oral tablet 5-10-200-325 mg</i>            | Theraflu ExpressMax Sev Cld/Fl | OTC                 |
| <i>sb cold head congestion severe oral tablet 5-10-200-325 mg</i>      | Theraflu ExpressMax Sev Cld/Fl | OTC                 |
| <i>sb cold multi-symptom severe oral tablet 5-10-200-325 mg</i>        | Theraflu ExpressMax Sev Cld/Fl | OTC                 |
| <i>sm cold &amp; flu severe oral tablet 5-10-200-325 mg</i>            | Theraflu ExpressMax Sev Cld/Fl | OTC                 |
| <i>sudafed pe pressure+pain+cold oral tablet 5-10-100-325 mg</i>       | Wal-Phed PE Cold & Cough       | OTC                 |
| <i>theraflu expressmax sev cld/fl oral liquid 5-10-200-325 mg/15ml</i> | Theraflu ExpressMax Sev Cld/Fl | OTC                 |
| <i>theraflu expressmax sev cld/fl oral tablet 5-10-200-325 mg</i>      | Theraflu ExpressMax Sev Cld/Fl | OTC                 |
| <b>TYLENOL COLD MULTI-SYMPTOM DAY ORAL LIQUID 5-10-200-325 MG/15ML</b> | cold & flu severe daytime      | OTC                 |
| <b>TYLENOL COLD/FLU SEVERE ORAL TABLET 5-10-200-325 MG</b>             | cold & flu severe daytime      | OTC                 |
| <b>TYLENOL WARMING COUGH/CONGEST ORAL LIQUID 5-10-200-325 MG/15ML</b>  | cold & flu severe daytime      | OTC                 |
| <i>vicks dayquil severe cold/flu oral liquid 5-10-200-325 mg/15ml</i>  | Theraflu ExpressMax Sev Cld/Fl | OTC                 |
| <i>vicks dayquil severe cold/flu oral tablet 5-10-200-325 mg</i>       | Theraflu ExpressMax Sev Cld/Fl | OTC                 |
| <i>wal-phed pe cold &amp; cough oral tablet 5-10-100-325 mg</i>        | Wal-Phed PE Cold & Cough       | OTC                 |



| <b>Formulary Drug Name</b>  | <b>Reference</b>               | <b>Restrictions</b> |
|---|--------------------------------|---------------------|
| <i>wal-phed pe pressure+pain+cold oral tablet 5-10-100-325 mg</i> | Wal-Phed PE Cold & Cough       | OTC                 |
| <i>wal-tussin cf max oral liquid 5-10-200-325 mg/10ml</i>         | Robitussin Severe Multi-Symp   | OTC                 |
| <b>*Antitussive-Expectorant***</b>                                |                                |                     |
| <i>alka-seltzer plus mucus &amp; cong oral capsule 10-200 mg</i>  |                                | OTC                 |
| <i>altarussin dm oral syrup 100-10 mg/5ml</i>                     | Robafen DM Cough Clear         | OTC                 |
| <i>biocotron oral liquid 10-100 mg/5ml</i>                        | Diabetic Tussin DM             | OTC                 |
| <i>chest congestion/cough relief oral tablet 20-400 mg</i>        | Fenesin DM IR                  | OTC                 |
| <i>childrens cough oral liquid 5-100 mg/5ml</i>                   | Delsym Cgh/Chest Cong DM Child | OTC                 |
| <i>childrens mucus relief cough oral liquid 5-100 mg/5ml</i>      | Delsym Cgh/Chest Cong DM Child | OTC                 |
| <i>coricidin hbp congestion/cough oral capsule 10-200 mg</i>      |                                | OTC                 |
| <i>cvs chest congest/cough child oral liquid 5-100 mg/5ml</i>     | Delsym Cgh/Chest Cong DM Child | OTC                 |
| <i>cvs chest congestion relief dm oral tablet 20-400 mg</i>       | Fenesin DM IR                  | OTC                 |
| <i>cvs dm maximum adult oral liquid 5-100 mg/5ml</i>              | Delsym Cgh/Chest Cong DM Child | OTC                 |
| <i>cvs tussin dm oral liquid 200-20 mg/10ml</i>                   | Diabetic Tussin DM             | OTC                 |
| <i>delsym cgh/chest cong dm child oral liquid 5-100 mg/5ml</i>    | Delsym Cgh/Chest Cong DM Child | OTC                 |
| <i>delsym cough/chest congest dm oral liquid 5-100 mg/5ml</i>     | Delsym Cgh/Chest Cong DM Child | OTC                 |
| <i>dextromethorphan-guaifenesin oral syrup 10-100 mg/5ml</i>      | Robafen DM Cough Clear         | OTC                 |
| <i>dextromethorphan-guaifenesin oral tablet 20-400 mg</i>         | Fenesin DM IR                  | OTC                 |
| <i>diabetic siltussin-dm max st oral liquid 10-200 mg/5ml</i>     | Diabetic Tussin DM Max St      | OTC                 |
| <i>diabetic siltussin-dm oral liquid 100-10 mg/5ml</i>            | Diabetic Tussin DM             | OTC                 |
| <i>diabetic tussin dm oral liquid 100-10 mg/5ml</i>               | Diabetic Tussin DM             | OTC                 |
| <i>diabetic tussin for children oral liquid 10-100 mg/5ml</i>     | Diabetic Tussin DM             | OTC                 |
| <i>diabetic tussin max st oral liquid 10-200 mg/5ml</i>           | Diabetic Tussin DM Max St      | OTC                 |
| <b>DOUBLE-TUSSIN DM ORAL LIQUID 20-300 MG/5ML</b>                 | intense cough reliever         | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>               | <b>Restrictions</b>    |
|--|--------------------------------|------------------------|
| <i>eq cough childrens oral liquid 5-100 mg/5ml</i>                                   | Delsym Cgh/Chest Cong DM Child | OTC                    |
| <i>eq tussin dm cough/chest oral syrup 10-100 mg/5ml</i>                             | Robafen DM Cough Clear         | OTC                    |
| <i>eq tussin dm max oral liquid 10-200 mg/5ml</i>                                    | Diabetic Tussin DM Max St      | OTC                    |
| <i>eql mucus-dm maximum strength oral tablet extended release 12 hour 60-1200 mg</i> | Mucinex DM Maximum Strength    | OTC                    |
| <i>eql mucus-dm oral tablet extended release 12 hour 30-600 mg</i>                   | Mucinex DM                     | OTC                    |
| <i>eql tussin cough/chest dm max oral liquid 10-200 mg/5ml</i>                       | Diabetic Tussin DM Max St      | OTC                    |
| <i>eql tussin dm cough/chest cong oral syrup 100-10 mg/5ml</i>                       | Robafen DM Cough Clear         | OTC                    |
| <i>extra action cough oral syrup 100-10 mg/5ml</i>                                   | Robafen DM Cough Clear         | OTC                    |
| <i>fenesin dm ir oral tablet 20-400 mg</i>   | Fenesin DM IR                  | OTC                    |
| <i>geri-tussin dm oral syrup 100-10 mg/5ml</i>                                       | Robafen DM Cough Clear         | OTC                    |
| <i>g-fen dm oral tablet 20-400 mg</i>  | Fenesin DM IR                  | OTC                    |
| <i>gnp mucus relief cough child oral liquid 5-100 mg/5ml</i>                         | Delsym Cgh/Chest Cong DM Child | OTC                    |
| <i>gnp mucus relief dm max oral liquid 5-100 mg/5ml</i>                              | Delsym Cgh/Chest Cong DM Child | OTC                    |
| <i>gnp mucus relief dm oral tablet 20-400 mg</i>                                     | Fenesin DM IR                  | OTC                    |
| <i>gnp tab tussin dm oral tablet 20-400 mg</i>                                       | Fenesin DM IR                  | OTC                    |
| <i>gnp tussin dm cough oral liquid 100-10 mg/5ml</i>                                 | Diabetic Tussin DM             | OTC                    |
| <i>gnp tussin dm max oral liquid 10-200 mg/5ml</i>                                   | Diabetic Tussin DM Max St      | OTC                    |
| <i>gnp tussin dm oral liquid 100-10 mg/5ml</i>                                       | Diabetic Tussin DM             | OTC                    |
| <i>g-tron oral liquid 10-100 mg/5ml</i>  | Diabetic Tussin DM             | OTC                    |
| <i>guaiasorb dm oral liquid 100-10 mg/5ml</i>  | Diabetic Tussin DM             | OTC                    |
| <i>guaiatussin ac oral syrup 100-10 mg/5ml</i>                                       |                                | OTC; AL (Min 18 Years) |
| <i>guaicon dms oral syrup 100-10 mg/5ml</i>  | Robafen DM Cough Clear         | OTC                    |
| <i>guaifenesin ac oral syrup 100-10 mg/5ml</i>                                       |                                | OTC; AL (Min 18 Years) |
| <i>guaifenesin dm oral tablet 400-20 mg</i>  | Fenesin DM IR                  | OTC                    |
| <i>guaifenesin-codeine oral solution 100-10 mg/5ml</i>                               |                                | OTC; AL (Min 18 Years) |
| <i>guaifenesin-dm oral syrup 100-10 mg/5ml</i>                                       | Robafen DM Cough Clear         | OTC                    |
| <b>G-ZYNCOF ORAL SYRUP 20-400 MG/5ML</b>   |                                | OTC                    |
| <i>hm chest congestion relief dm oral tablet 20-400 mg</i>                           | Fenesin DM IR                  | OTC                    |



| <b>Formulary Drug Name</b>   | <b>Reference</b>               | <b>Restrictions</b>                              |
|--|--------------------------------|--|
| <i>hm mucus relief dm max st oral tablet extended release 12 hour 60-1200 mg</i>   | Mucinex DM Maximum Strength    | OTC  |
| <i>hm tussin adult dm oral liquid 100-10 mg/5ml</i>                                | Diabetic Tussin DM             | OTC  |
| <i>hm tussin adult dm oral liquid 10-200 mg/5ml</i>                                | Diabetic Tussin DM Max St      | OTC  |
| <i>intense cough reliever ex st oral liquid 20-300 mg/5ml</i>                      |                                | OTC  |
| <i>intense cough reliever oral liquid 20-300 mg/5ml, 30-200 mg/5ml</i>             |                                | OTC  |
| <i>m-clear wc oral solution 100-6.33 mg/5ml</i>                                    |                                | OTC; QLL (180 ML per 30 days); AL (Min 18 Years) |
| <i>medi-tussin dm double strength oral liquid 30-200 mg/5ml</i>                    |                                | OTC  |
| <i>medi-tussin dm oral syrup 100-10 mg/5ml</i>                                     | Robafen DM Cough Clear         | OTC  |
| <i>mucinex cough childrens oral liquid 5-100 mg/5ml</i>                            | Delsym Cgh/Chest Cong DM Child | OTC  |
| <b>MUCINEX COUGH FOR KIDS ORAL PACKET 5-100 MG</b>                                 |                                | OTC  |
| <b>MUCINEX DM MAXIMUM STRENGTH ORAL TABLET EXTENDED RELEASE 12 HOUR 60-1200 MG</b> | mucus relief dm                | OTC  |
| <b>MUCINEX DM ORAL TABLET EXTENDED RELEASE 12 HOUR 30-600 MG</b>                   | eql mucus-dm                   | OTC  |
| <i>mucinex fast-max dm max oral liquid 20-400 mg/20ml</i>                          | Delsym Cgh/Chest Cong DM Child | OTC  |
| <i>mucosa dm oral tablet 20-400 mg</i>   | Fenesin DM IR                  | OTC  |
| <i>mucus relief cough childrens oral liquid 5-100 mg/5ml</i>                       | Delsym Cgh/Chest Cong DM Child | OTC  |
| <i>mucus relief dm cough oral tablet 20-400 mg</i>                                 | Fenesin DM IR                  | OTC  |
| <i>mucus relief dm max oral liquid 20-400 mg/20ml, 5-100 mg/5ml</i>                | Delsym Cgh/Chest Cong DM Child | OTC  |
| <i>mucus relief dm oral tablet 20-400 mg</i>                                       | Fenesin DM IR                  | OTC  |
| <i>mucus relief dm oral tablet extended release 12 hour 60-1200 mg</i>             | Mucinex DM Maximum Strength    | OTC  |
| <i>mucus-dm max oral tablet extended release 12 hour 60-1200 mg</i>                | Mucinex DM Maximum Strength    | OTC  |
| <i>mucus-dm oral tablet extended release 12 hour 30-600 mg</i>                     | Mucinex DM                     | OTC  |
| <i>neotuss oral liquid 30-200 mg/5ml</i>   |                                | OTC; QLL (120 ML per 30 days)                    |
| <b>PEGGEN DMX ORAL LIQUID 10-187 MG/5ML, 15-125 MG/5ML</b>                         |                                | OTC  |

| <b>Formulary Drug Name</b>                                       | <b>Reference</b>               | <b>Restrictions</b>           |
|--|--------------------------------|-------------------------------|
| <i>pediacare cough/congestion oral liquid 5-100 mg/5ml</i>       | Delsym Cgh/Chest Cong DM Child | OTC                           |
| <i>pediatric formula cough/congst oral liquid 10-100 mg/5ml</i>  | Diabetic Tussin DM             | OTC                           |
| <i>px tussin dm oral liquid 100-10 mg/5ml</i>                    | Diabetic Tussin DM             | OTC                           |
| <i>qc medifin dm oral tablet 20-400 mg</i>                       | Fenesin DM IR                  | OTC                           |
| <i>ra tussin cgh/chest congest dm oral liquid 100-10 mg/5ml</i>  | Diabetic Tussin DM             | OTC                           |
| <i>ra tussin cough dm sugar free oral syrup 100-10 mg/5ml</i>    | Robafen DM Cough Clear         | OTC                           |
| <i>ra tussin cough oral liquid 10-100 mg/5ml</i>                 | Diabetic Tussin DM             | OTC                           |
| <i>ra tussin cough/chest dm max oral liquid 10-200 mg/5ml</i>    | Diabetic Tussin DM Max St      | OTC                           |
| <i>ra tussin dm oral liquid 100-10 mg/5ml</i>                    | Diabetic Tussin DM             | OTC                           |
| <i>recofen d oral liquid 5-100 mg/5ml</i>                        | Delsym Cgh/Chest Cong DM Child | OTC                           |
| <i>refenesen dm oral tablet 400-20 mg</i>                        | Fenesin DM IR                  | OTC                           |
| <i>robafen dm cgh/chest congest oral liquid 10-100 mg/5ml</i>    | Diabetic Tussin DM             | OTC                           |
| <i>robafen dm cough clear oral syrup 100-10 mg/5ml</i>           | Robafen DM Cough Clear         | OTC                           |
| <i>robafen dm oral syrup 100-10 mg/5ml</i>                       | Robafen DM Cough Clear         | OTC                           |
| <i>robitussin cold cough+ chest oral liquid 10-100 mg/5ml</i>    | Diabetic Tussin DM             | OTC                           |
| <i>robitussin cough+chest cong dm oral capsule 10-200 mg</i>     |                                | OTC                           |
| <i>robitussin cough+chest cong dm oral liquid 20-400 mg/20ml</i> | Delsym Cgh/Chest Cong DM Child | OTC                           |
| <i>robitussin cough+chest cong dm oral liquid 5-100 mg/5ml</i>   | Delsym Cgh/Chest Cong DM Child | OTC; QLL (120 ML per 30 days) |
| <i>robitussin to go cgh/chest dm oral liquid 100-10 mg/5ml</i>   | Diabetic Tussin DM             | OTC; QLL (120 ML per 30 days) |
| <i>safe tussin dm oral liquid 100-10 mg/5ml</i>                  | Diabetic Tussin DM             | OTC                           |
| <i>sb cough control dm max oral liquid 10-200 mg/5ml</i>         | Diabetic Tussin DM Max St      | OTC                           |
| <i>sb cough control dm oral liquid 100-10 mg/5ml</i>             | Diabetic Tussin DM             | OTC                           |
| <i>sb mucus relief dm oral tablet 20-400 mg</i>                  | Fenesin DM IR                  | OTC                           |
| <i>sb tab tussin dm oral tablet 20-400 mg</i>                    | Fenesin DM IR                  | OTC                           |
| <b>SCOT-TUSSIN SENIOR ORAL LIQUID 15-200 MG/5ML</b>              |                                | OTC                           |
| <i>siltussin dm das oral liquid 100-10 mg/5ml</i>                | Diabetic Tussin DM             | OTC                           |

| <b>Formulary Drug Name</b>                                       | <b>Reference</b>               | <b>Restrictions</b>    |
|--|--------------------------------|------------------------|
| <i>siltussin-dm alcohol free oral syrup 100-10 mg/5ml</i>        | Robafen DM Cough Clear         | OTC                    |
| <i>sm chest congestion relief dm oral tablet 20-400 mg</i>       | Fenesin DM IR                  | OTC                    |
| <i>sm mucus relief cough children oral liquid 5-100 mg/5ml</i>   | Delsym Cgh/Chest Cong DM Child | OTC                    |
| <i>sm tussin cough/chest congest oral liquid 20-200 mg/10ml</i>  | Diabetic Tussin DM             | OTC                    |
| <i>sm tussin cough/chest congest oral syrup 100-10 mg/5ml</i>    | Robafen DM Cough Clear         | OTC                    |
| <i>sm tussin dm max oral liquid 10-200 mg/5ml</i>                | Diabetic Tussin DM Max St      | OTC                    |
| <i>sm tussin dm oral syrup 100-10 mg/5ml</i>                     | Robafen DM Cough Clear         | OTC                    |
| <i>sorbugen nr oral liquid 15-150 mg/7.5ml</i>                   | Diabetic Tussin DM             | OTC                    |
| <b>SUPRESS DM PEDIATRIC ORAL LIQUID 5-50 MG/ML</b>               |                                | OTC                    |
| <i>tgt cough formula dm oral liquid 100-10 mg/5ml</i>            | Diabetic Tussin DM             | OTC                    |
| <i>tgt mucus/cough relief oral tablet 20-400 mg</i>              | Fenesin DM IR                  | OTC                    |
| <b>TRISPEC DMX ORAL LIQUID 10-187 MG/5ML, 15-125 MG/5ML</b>      |                                | OTC                    |
| <b>TRISPEC DMX PEDIATRIC ORAL LIQUID 10-187 MG/5ML</b>           |                                | OTC                    |
| <i>tusnel diabetic oral liquid 10-100 mg/5ml</i>                 | Diabetic Tussin DM             | OTC                    |
| <i>tussin dm max adult oral liquid 10-200 mg/5ml</i>             | Diabetic Tussin DM Max St      | OTC                    |
| <i>tussin dm max oral liquid 10-200 mg/5ml</i>                   | Diabetic Tussin DM Max St      | OTC                    |
| <i>tussin dm oral liquid 100-10 mg/5ml</i>                       | Diabetic Tussin DM             | OTC                    |
| <i>tussin dm oral syrup 100-10 mg/5ml</i>                        | Robafen DM Cough Clear         | OTC                    |
| <i>vicks dayquil mucus control dm oral liquid 10-200 mg/15ml</i> |                                | OTC                    |
| <i>virtussin ac w/alc oral liquid 100-10 mg/5ml</i>              |                                | OTC; AL (Min 18 Years) |
| <i>wal-tussin cough/chest dm max oral liquid 10-200 mg/5ml</i>   | Diabetic Tussin DM Max St      | OTC                    |
| <i>wal-tussin cough/chest dm oral syrup 100-10 mg/5ml</i>        | Robafen DM Cough Clear         | OTC                    |
| <i>wal-tussin dm cgh/chest cong oral liquid 100-10 mg/5ml</i>    | Diabetic Tussin DM             | OTC                    |
| <i>wal-tussin dm oral liquid 100-10 mg/5ml</i>                   | Diabetic Tussin DM             | OTC                    |
| <b>ZYNCOF ORAL SYRUP 20-400 MG/5ML</b>                           |                                | OTC                    |
| <i>zyncof oral tablet 20-400 mg</i>                              | Fenesin DM IR                  | OTC                    |

| <b>Formulary Drug Name</b>  | <b>Reference</b>       | <b>Restrictions</b> |
|---|------------------------|---------------------|
| <b>*Antitussive-Expectorants-Decongestant***</b>                  |                        |                     |
| <b>ACTIDOM DMX ORAL LIQUID 10-30-200 MG/5ML</b>                   |                        | OTC                 |
| <b>ACTINEL PEDIATRIC ORAL LIQUID 15-5-50 MG/5ML</b>               |                        | OTC                 |
| <i>ambi 10peh/400gfn/20dm oral tablet 10-400-20 mg</i>            | Tusicof                | OTC                 |
| <b>AQUANAZ ORAL TABLET 10-15-400 MG</b>                           |                        | OTC                 |
| <i>bio t pres oral liquid 5-10-200 mg/5ml</i>                     | Tussi-Pres             | OTC                 |
| <i>bio t pres pediatric oral liquid 2.5-5-75 mg/5ml</i>           | Tussi-Pres Pediatric   | OTC                 |
| <b>BIODESP DM ORAL SYRUP 5-15-100 MG/5ML</b>                      | biodesp dm             | OTC                 |
| <i>biogtuss oral liquid 10-28-388 mg/5ml</i>                      | Tusslin                | OTC                 |
| <i>broncotron ped drops oral liquid 2.5-5-100 mg/ml</i>           | G-Tron Pediatric Drops | OTC                 |
| <i>broncotron ped oral liquid 10-15-350 mg/5ml</i>                |                        | OTC                 |
| <b>CODITUSSIN DAC ORAL LIQUID 30-10-200 MG/5ML</b>                |                        | OTC                 |
| <i>cvs multi-symptoms cold child oral liquid 2.5-5-100 mg/5ml</i> | Mucinex Cold Childrens | OTC                 |
| <i>cvs severe cough/congest oral liquid 2.5-5-100 mg/5ml</i>      | Mucinex Cold Childrens | OTC                 |
| <i>cvs tussin cough/cold cf oral liquid 5-10-100 mg/5ml</i>       | Desgen DM              | OTC                 |
| <i>desgen dm oral liquid 5-10-100 mg/5ml</i>                      | Desgen DM              | OTC                 |
| <b>DESGEN DM ORAL SYRUP 5-15-100 MG/5ML</b>                       | biodesp dm             | OTC                 |
| <i>desgen pediatric oral liquid 2.5-5-50 mg/ml</i>                | Desgen Pediatric       | OTC                 |
| <i>despec dm oral syrup 5-10-100 mg/5ml</i>                       |                        | OTC                 |
| <i>despec dm-g oral syrup 5-10-100 mg/5ml</i>                     |                        | OTC                 |
| <i>despec eda oral liquid 2.5-5-50 mg/ml</i>                      | Desgen Pediatric       | OTC                 |
| <b>DOMETUSS-DMX ORAL LIQUID 10-30-200 MG/5ML</b>                  |                        | OTC                 |
| <i>eq mucus relief congest/cough oral liquid 2.5-5-100 mg/5ml</i> | Mucinex Cold Childrens | OTC                 |
| <i>eq multi-symptom cold children oral liquid 2.5-5-100 mg/ml</i> | G-Tron Pediatric Drops | OTC                 |
| <i>eq tussin cf cough &amp; cold oral liquid 5-10-100 mg/5ml</i>  | Desgen DM              | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>              | <b>Restrictions</b>    |
|--|-------------------------------|------------------------|
| <i>eq tussin cf multi-symptom oral liquid 5-10-200 mg/5ml</i>            | Tussi-Pres                    | OTC                    |
| <i>eql mucus relief childrens oral liquid 2.5-5-100 mg/5ml</i>           | Mucinex Cold Childrens        | OTC                    |
| <b>EXACTUSS TR ORAL TABLET 10-28-388 MG</b>                              |                               | OTC                    |
| <b>GILTUSS COUGH &amp; COLD CHILDRENS ORAL LIQUID 7.5-150-5 MG/2.5ML</b> | biogtuss                      | OTC                    |
| <b>GILTUSS COUGH &amp; COLD ORAL LIQUID 10-15-300 MG/5ML</b>             | biogtuss                      | OTC                    |
| <i>gnp mucus relief childrens oral liquid 2.5-5-100 mg/5ml</i>           | Mucinex Cold Childrens        | OTC                    |
| <i>gnp mucus relief congest/cough oral liquid 10-20-400 mg/20ml</i>      | Mucinex Cold Childrens        | OTC                    |
| <i>gnp tussin cf cough &amp; cold oral syrup 5-10-100 mg/5ml</i>         |                               | OTC                    |
| <i>gnp tussin cf max oral liquid 5-10-200 mg/5ml</i>                     | Tussi-Pres                    | OTC                    |
| <i>goodsense mucus relief child oral liquid 2.5-5-100 mg/5ml</i>         | Mucinex Cold Childrens        | OTC                    |
| <i>goodsense mucus/congest/cough oral liquid 2.5-5-100 mg/5ml</i>        | Mucinex Cold Childrens        | OTC                    |
| <i>goodsense tussin cf oral liquid 5-10-100 mg/5ml</i>                   | Desgen DM                     | OTC                    |
| <i>g-supress dx pediatric oral liquid 2.5-5-50 mg/ml</i>                 | Desgen Pediatric              | OTC                    |
| <i>g-tron ped oral liquid 10-15-350 mg/5ml</i>                           |                               | OTC                    |
| <i>g-tron pediatric drops oral liquid 2.5-5-100 mg/ml</i>                | G-Tron Pediatric Drops        | OTC                    |
| <b>G-TUSICOF ORAL LIQUID 10-20-400 MG/5ML</b>                            |                               | OTC                    |
| <i>guaifenesin dac oral solution 30-10-100 mg/5ml</i>                    |                               | OTC; AL (Min 18 Years) |
| <i>hm mucus relief multi-symptom oral liquid 2.5-5-100 mg/5ml</i>        | Mucinex Cold Childrens        | OTC                    |
| <i>hm severe congestion &amp; cough oral liquid 10-20-400 mg/20ml</i>    | Mucinex Cold Childrens        | OTC                    |
| <i>hm tussin adult multi-symptom oral liquid 5-10-100 mg/5ml</i>         | Desgen DM                     | OTC                    |
| <b>MUCINEX COLD CHILDRENS ORAL LIQUID 2.5-5-100 MG/5ML</b>               | cvs multi-symptoms cold child | OTC                    |
| <b>MUCINEX CONGEST &amp; COUGH CHILD ORAL LIQUID 2.5-5-100 MG/5ML</b>    | cvs multi-symptoms cold child | OTC                    |

| <b>Formulary Drug Name</b>   | <b>Reference</b>              | <b>Restrictions</b> |
|--|-------------------------------|---------------------|
| <b>MUCINEX FAST-MAX CONGEST COUGH ORAL LIQUID 10-20-400 MG/20ML, 2.5-5-100 MG/5ML</b>  | cvs multi-symptoms cold child | OTC                 |
| <b>MUCINEX FAST-MAX CONGEST COUGH ORAL TABLET 5-10-200 MG</b>                          |                               | OTC                 |
| <i>mucus congest &amp; cough child oral liquid 2.5-5-100 mg/5ml</i>                    | Mucinex Cold Childrens        | OTC                 |
| <i>mucus relief childrens oral liquid 2.5-5-100 mg/5ml</i>                             | Mucinex Cold Childrens        | OTC                 |
| <i>mucus relief multi symptom oral liquid 2.5-5-100 mg/5ml</i>                         | Mucinex Cold Childrens        | OTC                 |
| <i>mucus relief severe congest/cgh oral liquid 10-20-400 mg/20ml, 2.5-5-100 mg/5ml</i> | Mucinex Cold Childrens        | OTC                 |
| <i>multi-symptom cold childrens oral liquid 2.5-5-100 mg/5ml</i>                       | Mucinex Cold Childrens        | OTC                 |
| <i>nivanex dmx oral tablet 10-15-380 mg</i>  |                               | OTC                 |
| <i>phenylephrine-dm-gg oral tablet 10-17.5-385 mg</i>                                  |                               | OTC                 |
| <i>pres gen oral liquid 5-10-200 mg/5ml</i>  | Tussi-Pres                    | OTC                 |
| <i>pres gen pediatric oral liquid 2.5-5-75 mg/5ml</i>                                  | Tussi-Pres Pediatric          | OTC                 |
| <i>px tussin cf oral liquid 5-10-100 mg/5ml</i>  | Desgen DM                     | OTC                 |
| <i>qc tussin cf oral liquid 5-10-100 mg/5ml</i>  | Desgen DM                     | OTC                 |
| <i>ra tussin cf max oral liquid 5-10-200 mg/5ml</i>                                    | Tussi-Pres                    | OTC                 |
| <i>ra tussin cf oral liquid 5-10-100 mg/5ml</i>  | Desgen DM                     | OTC                 |
| <i>ra tussin cgh &amp; cold mucus cf oral liquid 5-10-200 mg/5ml</i>                   | Tussi-Pres                    | OTC                 |
| <i>robafen cf multi-symptom cold oral liquid 5-10-100 mg/5ml</i>                       | Desgen DM                     | OTC                 |
| <b>ROBITUSSIN CHILD COUGH/COLD CF ORAL LIQUID 2.5-5-50 MG/5ML</b>                      |                               | OTC                 |
| <i>robitussin multi-symptom max oral liquid 5-10-200 mg/5ml</i>                        | Tussi-Pres                    | OTC                 |
| <b>ROBITUSSIN PEAK COLD MULTI-SYM ORAL LIQUID 5-10-100 MG/5ML</b>                      | goodsense tussin cf           | OTC                 |
| <b>ROBITUSSIN TO GO COUGH/COLD CF ORAL LIQUID 5-10-100 MG/5ML</b>                      | goodsense tussin cf           | OTC                 |
| <i>sb cough control cf oral liquid 5-10-100 mg/5ml</i>                                 | Desgen DM                     | OTC                 |
| <i>sm mucus relief cold childrens oral liquid 2.5-5-100 mg/5ml</i>                     | Mucinex Cold Childrens        | OTC                 |
| <i>sm severe congestion &amp; cough oral liquid 10-20-400 mg/20ml</i>                  | Mucinex Cold Childrens        | OTC                 |
| <i>sm tussin cf oral liquid 5-10-100 mg/5ml</i>  | Desgen DM                     | OTC                 |



| <b>Formulary Drug Name</b>  | <b>Reference</b>    | <b>Restrictions</b>    |
|---|---------------------|------------------------|
| <i>supress-dx pediatric oral liquid 2.5-5-50 mg/ml</i>                | Desgen Pediatric    | OTC                    |
| <i>teo-tus oral liquid 5-10-200 mg/5ml</i>                            | Tussi-Pres          | OTC                    |
| <b>TUSICOF ORAL LIQUID 10-20-400 MG/5ML</b>                           |                     | OTC                    |
| <i>tusicof oral tablet 10-20-400 mg</i>                               | Tusicof             | OTC                    |
| <b>TUSNEL PEDIATRIC ORAL LIQUID 15-5-50 MG/5ML</b>                    |                     | OTC                    |
| <i>tussin cf cough &amp; cold oral liquid 5-10-100 mg/5ml</i>         | Desgen DM           | OTC                    |
| <i>tussin cf max multi-symptom oral liquid 5-10-200 mg/5ml</i>        | Tussi-Pres          | OTC                    |
| <i>tussin cf oral liquid 5-10-100 mg/5ml</i>                          | Desgen DM           | OTC                    |
| <i>tussin multi-symptom cold cf oral liquid 5-10-100 mg/5ml</i>       | Desgen DM           | OTC                    |
| <i>tussi-pres oral liquid 5-10-200 mg/5ml</i>                         | Tussi-Pres          | OTC                    |
| <b>TUSSI-PRES PEDIATRIC ORAL LIQUID 2.5-5-75 MG/5ML</b>               | pres gen pediatric  | OTC                    |
| <i>tusslin oral liquid 10-28-388 mg/5ml</i>                           | Tusslin             | OTC                    |
| <i>tusslin pediatric oral liquid 2.5-7.5-88 mg/ml</i>                 |                     | OTC                    |
| <b>VANACOF DM ORAL LIQUID 10-18-200 MG/15ML</b>                       | phenylephrine-dm-gg | OTC                    |
| <b>VANATAB DM ORAL TABLET 5-9-198 MG</b>                              |                     | OTC                    |
| <i>virtussin dac oral solution 30-10-100 mg/5ml</i>                   |                     | OTC; AL (Min 18 Years) |
| <i>wal-tussin cf max oral liquid 5-10-200 mg/5ml</i>                  | Tussi-Pres          | OTC                    |
| <i>wal-tussin cough/cold cf oral liquid 5-10-100 mg/5ml</i>           | Desgen DM           | OTC                    |
| <b>*Aromatic Inhalants***</b>   |                     |                        |
| <i>chest rub external ointment , 4.8-1.2-2.6 %</i>                    | Vicks VapoRub       | OTC                    |
| <i>chest rub hands-free medicated external ointment 4.8-1.2-2.6 %</i> | Vicks VapoRub       | OTC                    |
| <i>cvs chest rub medicated external ointment 4.7-1.2-2.6 %</i>        |                     | OTC                    |
| <i>eq medicated chest rub external ointment</i>                       |                     | OTC                    |
| <i>eql medicated chest rub external ointment 4.8-1.2-2.6 %</i>        | Vicks VapoRub       | OTC                    |
| <i>gnp chest rub external ointment 4.8-1.2-2.6 %</i>                  | Vicks VapoRub       | OTC                    |
| <i>hm chest rub external ointment 4.8-1.2-2.6 %</i>                   | Vicks VapoRub       | OTC                    |
| <i>medicated chest rub external ointment 4.8-1.2-2.6 %</i>            | Vicks VapoRub       | OTC                    |



| <b>Formulary Drug Name</b>   | <b>Reference</b>         | <b>Restrictions</b> |
|--|--------------------------|---------------------|
| <i>px medicated chestrub external ointment 4.8-1.2-2.6 %</i>                       | Vicks VapoRub            | OTC                 |
| <i>ra medicated chest rub external ointment 4.8-1.2-2.6 %</i>                      | Vicks VapoRub            | OTC                 |
| <i>sm medicated chest rub external ointment 4.73-1.2-2.6 %</i>                     |                          | OTC                 |
| <i>tgt cough suppress/analgesic external ointment 4.8-1.2-2.6 %</i>                | Vicks VapoRub            | OTC                 |
| <i>vaporizing chest rub external ointment 4.8-1.2-2.6 %</i>                        | Vicks VapoRub            | OTC                 |
| <b>VICKS VAPORUB EXTERNAL OINTMENT 4.7-1.2-2.6 %, 4.73-1.2-2.6 %</b>               | chest rub                | OTC                 |
| <b>*Decongestant &amp; Antihistamine***</b>  |                          |                     |
| <b>ALAHIST D ORAL TABLET 17.5-10 MG</b>  |                          | OTC                 |
| <i>all day allergy d oral tablet extended release 12 hour 5-120 mg</i>             | KLS Aller-Tec D          | OTC                 |
| <i>all day allergy d-12 oral tablet extended release 12 hour 5-120 mg</i>          | KLS Aller-Tec D          | OTC                 |
| <i>all day allergy-d oral tablet extended release 12 hour 5-120 mg</i>             | KLS Aller-Tec D          | OTC                 |
| <i>allergy d-12 oral tablet extended release 12 hour 5-120 mg</i>                  | KLS Aller-Tec D          | OTC                 |
| <i>aprodine oral tablet 2.5-60 mg</i>  | Aprodine                 | OTC                 |
| <b>BROHIST D ORAL TABLET 4-10 MG</b>   |                          | OTC                 |
| <i>cetirizine-pseudoephedrine er oral tablet extended release 12 hour 5-120 mg</i> | KLS Aller-Tec D          | OTC                 |
| <i>childrens cold &amp; allergy oral elixir 1-2.5 mg/5ml</i>                       |                          | OTC                 |
| <i>cold &amp; allergy childrens oral elixir 1-2.5 mg/5ml</i>                       |                          | OTC                 |
| <i>cold &amp; allergy oral elixir 1-2.5 mg/5ml</i>                                 |                          | OTC                 |
| <i>cold/allergy childrens oral elixir 1-2.5 mg/5ml</i>                             |                          | OTC                 |
| <i>cvs allergy relief-d oral tablet extended release 12 hour 5-120 mg</i>          | KLS Aller-Tec D          | OTC                 |
| <i>cvs cold &amp; allergy childrens oral elixir 1-2.5 mg/5ml</i>                   |                          | OTC                 |
| <i>dimaphen childrens oral elixir 1-2.5 mg/5ml</i>                                 |                          | OTC                 |
| <b>DIMETAPP COLD/ALLERGY ORAL ELIXIR 1-2.5 MG/5ML</b>                              | childrens cold & allergy | OTC                 |
| <i>ed a-hist pse oral tablet 2.5-60 mg</i>   | Aprodine                 | OTC                 |
| <i>eql all day allergy-d oral tablet extended release 12 hour 5-120 mg</i>         | KLS Aller-Tec D          | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b>   | <b>Restrictions</b> |
|---|--------------------|---------------------|
| <b>GLENMAX PEB ORAL LIQUID 4-10 MG/5ML</b>  |                    | OTC                 |
| <i>gnp all day allergy-d oral tablet extended release 12 hour 5-120 mg</i>          | KLS Aller-Tec D    | OTC                 |
| <i>gnp allergy/congestion relief oral tablet extended release 24 hour 10-240 mg</i> | Claritin-D 24 Hour | OTC                 |
| <i>gnp cold/allergy childrens oral elixir 1-2.5 mg/5ml</i>                          |                    | OTC                 |
| <i>hm allergy complete-d oral tablet extended release 12 hour 5-120 mg</i>          | KLS Aller-Tec D    | OTC                 |
| <i>hm cold &amp; allergy childrens oral elixir 1-2.5 mg/5ml</i>                     |                    | OTC                 |
| <i>kls aller-tec d oral tablet extended release 12 hour 5-120 mg</i>                | KLS Aller-Tec D    | OTC                 |
| <i>promethazine-phenylephrine oral syrup 6.25-5 mg/5ml</i>                          |                    | AL (Min 18 Years)   |
| <i>px allergy relief d oral tablet extended release 12 hour 5-120 mg</i>            | KLS Aller-Tec D    | OTC                 |
| <i>px dibromm cold/allergy child oral elixir 1-2.5 mg/5ml</i>                       |                    | OTC                 |
| <i>ra cetiri-d oral tablet extended release 12 hour 5-120 mg</i>                    | KLS Aller-Tec D    | OTC                 |
| <i>ra childrens cold &amp; allergy oral elixir 1-2.5 mg/5ml</i>                     |                    | OTC                 |
| <i>ra cold &amp; allergy oral elixir 1-2.5 mg/5ml</i>                               |                    | OTC                 |
| <b>RU-HIST D ORAL TABLET 4-10 MG</b>  |                    | OTC                 |
| <i>rynex pe oral elixir 1-2.5 mg/5ml</i>  |                    | OTC                 |
| <i>sb cold &amp; allergy childrens oral elixir 1-2.5 mg/5ml</i>                     |                    | OTC                 |
| <i>shopko allergy relief-d (ceti) oral tablet extended release 12 hour 5-120 mg</i> | KLS Aller-Tec D    | OTC                 |
| <i>sm all day allergy-d oral tablet extended release 12 hour 5-120 mg</i>           | KLS Aller-Tec D    | OTC                 |
| <i>sm cold &amp; allergy childrens oral elixir 1-2.5 mg/5ml</i>                     |                    | OTC                 |
| <i>sw allergy relief-d oral tablet extended release 12 hour 5-120 mg</i>            | KLS Aller-Tec D    | OTC                 |
| <i>tgt all day allergy-d oral tablet extended release 12 hour 5-120 mg</i>          | KLS Aller-Tec D    | OTC                 |
| <i>tgt allergy+ congestion relief oral tablet extended release 12 hour 5-120 mg</i> | KLS Aller-Tec D    | OTC                 |
| <i>triprolidine-pse oral tablet 2.5-60 mg</i>                                       | Aprodine           | OTC                 |
| <i>wal-act oral tablet 2.5-60 mg</i>  | Aprodine           | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>             | <b>Restrictions</b> |
|--|------------------------------|---------------------|
| <i>wal-zyr d oral tablet extended release 12 hour 5-120 mg</i>                     | KLS Aller-Tec D              | OTC                 |
| <b>*Decongestant W/ Expectorant***</b>   |                              |                     |
| <i>ambi 10peh/400gfn oral tablet 10-400 mg</i>                                     | QC Medifin PE                | OTC                 |
| <i>ambi 40pse/400gfn oral tablet 40-400 mg</i>                                     |                              | OTC                 |
| <i>chest congestion/sinus relief oral tablet 10-400 mg</i>                         | QC Medifin PE                | OTC                 |
| <i>cvs chest congestion relief pe oral tablet 10-400 mg</i>                        | QC Medifin PE                | OTC                 |
| <i>cvs mucus d extended release oral tablet extended release 12 hour 60-600 mg</i> | Mucinex D                    | OTC                 |
| <i>cvs stuffy nose &amp; cold child oral liquid 2.5-100 mg/5ml</i>                 | Tussi-Pres PE Pediatric      | OTC                 |
| <b>DECONEX IR ORAL TABLET 10-385 MG</b>  | gcon ir                      | OTC                 |
| <b>ED BRON GP ORAL LIQUID 5-100 MG/5ML</b>   |                              | OTC                 |
| <b>ENTEX T ORAL TABLET 60-375 MG</b>   |                              | OTC                 |
| <b>EXAPHEX TR ORAL TABLET 10-388 MG</b>  |                              | OTC                 |
| <i>fenesin pe ir oral tablet 10-400 mg</i>   | QC Medifin PE                | OTC                 |
| <i>gnp mucus d 12 hr oral tablet extended release 12 hour 60-600 mg</i>            | Mucinex D                    | OTC                 |
| <i>gnp mucus relief pe oral tablet 10-400 mg</i>                                   | QC Medifin PE                | OTC                 |
| <i>hm mucus relief d oral tablet extended release 12 hour 60-600 mg</i>            | Mucinex D                    | OTC                 |
| <b>MUCINEX D MAX STRENGTH ORAL TABLET EXTENDED RELEASE 12 HOUR 120-1200 MG</b>     | mucus d                      | OTC                 |
| <b>MUCINEX D ORAL TABLET EXTENDED RELEASE 12 HOUR 60-600 MG</b>                    | cvs mucus d extended release | OTC                 |
| <b>MUCINEX STUFFY NOSE/COLD CHILD ORAL LIQUID 2.5-100 MG/5ML</b>                   | cvs stuffy nose & cold child | OTC                 |
| <i>mucus d oral tablet extended release 12 hour 120-1200 mg</i>                    | Mucinex D Max Strength       | OTC                 |
| <i>mucus d oral tablet extended release 12 hour 60-600 mg</i>                      | Mucinex D                    | OTC                 |
| <i>mucus relief d oral tablet 40-400 mg</i>  |                              | OTC                 |
| <i>mucus relief d oral tablet extended release 12 hour 60-600 mg</i>               | Mucinex D                    | OTC                 |
| <i>mucus relief pe oral tablet 10-400 mg</i>                                       | QC Medifin PE                | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>              | <b>Restrictions</b> |
|--|-------------------------------|---------------------|
| <i>mucus relief pe sinus oral tablet 10-400 mg</i>                                     | QC Medifin PE                 | OTC                 |
| <i>mucus relief sinus oral tablet 10-400 mg</i>  | QC Medifin PE                 | OTC                 |
| <i>phenylephrine-guaifenesin oral tablet 10-400 mg</i>                                 | QC Medifin PE                 | OTC                 |
| <b>POLY-VENT IR ORAL TABLET 60-380 MG</b>  |                               | OTC                 |
| <i>pseudoephedrine-guaifenesin er oral tablet extended release 12 hour 60-600 mg</i>   | Mucinex D                     | OTC                 |
| <b>QC MEDIFIN PE ORAL TABLET 10-400 MG</b>   | chest congestion/sinus relief | OTC                 |
| <i>ra mucus relief d max strength oral tablet extended release 12 hour 120-1200 mg</i> | Mucinex D Max Strength        | OTC                 |
| <i>ra mucus relief d oral tablet extended release 12 hour 60-600 mg</i>                | Mucinex D                     | OTC                 |
| <i>ra mucus relief sinus oral tablet 10-400 mg</i>                                     | QC Medifin PE                 | OTC                 |
| <i>reeses onetab congest/cough oral tablet 10-400 mg</i>                               | QC Medifin PE                 | OTC                 |
| <i>refenesen pe oral tablet 10-400 mg</i>  | QC Medifin PE                 | OTC                 |
| <i>sb mucus relief pe oral tablet 10-400 mg</i>  | QC Medifin PE                 | OTC                 |
| <i>sm chest congestion relief pe oral tablet 10-400 mg</i>                             | QC Medifin PE                 | OTC                 |
| <i>sm mucus relief d oral tablet extended release 12 hour 60-600 mg</i>                | Mucinex D                     | OTC                 |
| <b>SUPRESS-PE PEDIATRIC ORAL LIQUID 2.5-50 MG/ML</b>                                   |                               | OTC                 |
| <b>TUSNEL PEDIATRIC ORAL LIQUID 7.5-50 MG/ML</b>                                       |                               | OTC                 |
| <i>tussi-pres pe pediatric oral liquid 2.5-100 mg/5ml</i>                              | Tussi-Pres PE Pediatric       | OTC                 |
| <b>*Decongestant-Analgesic***</b>  |                               |                     |
| <b>ADVIL COLD &amp; SINUS LIQUI-GELS ORAL CAPSULE 30-200 MG</b>                        | cold & sinus relief           | OTC                 |
| <b>ADVIL COLD/SINUS ORAL TABLET 30-200 MG</b>  | cvs cold & sinus relief       | OTC                 |
| <i>cold &amp; sinus relief oral tablet 30-200 mg</i>                                   | Wal-Profen Cold & Sinus       | OTC                 |
| <i>contac cold+flu max st oral tablet 5-500 mg</i>                                     | Contac Cold+Flu Max St        | OTC                 |
| <i>cvs cold &amp; sinus relief oral tablet 30-200 mg</i>                               | Wal-Profen Cold & Sinus       | OTC                 |
| <i>cvs sinus headache pe oral tablet 5-325 mg</i>                                      | Panadol Cold/Flu              | OTC                 |
| <i>cvs sinus pain/congestion day oral tablet 5-325 mg</i>                              | Panadol Cold/Flu              | OTC                 |
| <i>eq daytime sinus oral capsule 5-325 mg</i>  | Vicks Sinex Daytime           | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>        | <b>Restrictions</b> |
|--|-------------------------|---------------------|
| <i>eq sinus congestion &amp; pain day oral tablet 5-325 mg</i>           | Panadol Cold/Flu        | OTC                 |
| <i>eq suphedrine pe oral tablet 5-325 mg</i>                             | Panadol Cold/Flu        | OTC                 |
| <i>hm cold &amp; sinus relief oral tablet 30-200 mg</i>                  | Wal-Profen Cold & Sinus | OTC                 |
| <i>ibuprofen cold &amp; sinus oral tablet 30-200 mg</i>                  | Wal-Profen Cold & Sinus | OTC                 |
| <i>mapap sinus maximum strength oral tablet 5-325 mg</i>                 | Panadol Cold/Flu        | OTC                 |
| <i>medi-first sinus pain/pressure oral tablet 5-500 mg</i>               | Contac Cold+Flu Max St  | OTC                 |
| <b>NEXAFED SINUS PRESSURE + PAIN ORAL TABLET 30-325 MG</b>               |                         | OTC                 |
| <i>non-pseudo sinus pain/pressure oral tablet 5-500 mg</i>               | Contac Cold+Flu Max St  | OTC                 |
| <i>px ibuprofen cold &amp; sinus oral tablet 30-200 mg</i>               | Wal-Profen Cold & Sinus | OTC                 |
| <i>px sinus relief oral tablet 5-325 mg</i>                              | Panadol Cold/Flu        | OTC                 |
| <i>qc ibuprofen cold/sinus oral tablet 30-200 mg</i>                     | Wal-Profen Cold & Sinus | OTC                 |
| <i>qc sinus pain relief oral tablet 5-325 mg</i>                         | Panadol Cold/Flu        | OTC                 |
| <i>ra ibu-profen cold/sinus oral tablet 30-200 mg</i>                    | Wal-Profen Cold & Sinus | OTC                 |
| <i>ra sinus congestion/pain day oral tablet 5-325 mg</i>                 | Panadol Cold/Flu        | OTC                 |
| <i>ra suphedrine pe oral tablet 5-325 mg</i>                             | Panadol Cold/Flu        | OTC                 |
| <i>ra suphedrine pe sinus oral tablet 5-325 mg</i>                       | Panadol Cold/Flu        | OTC                 |
| <i>sb daytime sinus oral capsule 5-325 mg</i>                            | Vicks Sinex Daytime     | OTC                 |
| <i>sb sinus congestion/pain day oral tablet 5-325 mg</i>                 | Panadol Cold/Flu        | OTC                 |
| <i>sinus congestion/pain daytime oral tablet 5-325 mg</i>                | Panadol Cold/Flu        | OTC                 |
| <i>sinus pressure + pain oral tablet 5-325 mg</i>                        | Panadol Cold/Flu        | OTC                 |
| <i>sm pain reliever sinus pe oral tablet 5-500 mg</i>                    | Contac Cold+Flu Max St  | OTC                 |
| <i>vicks sinex daytime oral capsule 5-325 mg</i>                         | Vicks Sinex Daytime     | OTC                 |
| <i>wal-phed pe sinus headache oral tablet 5-325 mg</i>                   | Panadol Cold/Flu        | OTC                 |
| <i>wal-profen cold &amp; sinus oral tablet 30-200 mg</i>                 | Wal-Profen Cold & Sinus | OTC                 |
| <b>*Decongestant-Analgesic-Expectorant***</b>                            |                         |                     |
| <i>cvs cold &amp; sinus multi-symptom oral liquid 10-650-400 mg/20ml</i> | Mucinex Fast-Max        | OTC                 |
| <i>cvs severe congestion relief oral liquid 10-650-400 mg/20ml</i>       | Mucinex Fast-Max        | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b>               | <b>Restrictions</b> |
|---|--------------------------------|---------------------|
| <i>cvs sinus relief pressure/pain oral tablet 5-325-200 mg</i>          | Mucinex Fast-Max Cold & Sinus  | OTC                 |
| <i>eq sinus congestion &amp; pain oral tablet 5-325-200 mg</i>          | Mucinex Fast-Max Cold & Sinus  | OTC                 |
| <i>eql pressure &amp; pain pls/mucus oral tablet 5-325-200 mg</i>       | Mucinex Fast-Max Cold & Sinus  | OTC                 |
| <i>gnp mucus relief cold &amp; sinus oral tablet 5-325-200 mg</i>       | Mucinex Fast-Max Cold & Sinus  | OTC                 |
| <i>gnp sinus relief congest/pain oral tablet 5-325-200 mg</i>           | Mucinex Fast-Max Cold & Sinus  | OTC                 |
| <i>goodsense cold &amp; head congest oral tablet 5-325-200 mg</i>       | Mucinex Fast-Max Cold & Sinus  | OTC                 |
| <i>goodsense pressure/pain/mucus oral tablet 5-325-200 mg</i>           | Mucinex Fast-Max Cold & Sinus  | OTC                 |
| <i>goodsense sinus relief max st oral tablet 5-325-200 mg</i>           | Mucinex Fast-Max Cold & Sinus  | OTC                 |
| <i>goodsense sinus severe daytime oral tablet 5-325-200 mg</i>          | Mucinex Fast-Max Cold & Sinus  | OTC                 |
| <i>hm mucus relief fm cold/sinus oral tablet 5-325-200 mg</i>           | Mucinex Fast-Max Cold & Sinus  | OTC                 |
| <b>MUCINEX FAST-MAX COLD &amp; SINUS ORAL LIQUID 10-650-400 MG/20ML</b> | cvs cold & sinus multi-symptom | OTC                 |
| <i>mucinex fast-max cold &amp; sinus oral tablet 5-325-200 mg</i>       | Mucinex Fast-Max Cold & Sinus  | OTC                 |
| <i>mucinex fast-max oral liquid 10-650-400 mg/20ml</i>                  | Mucinex Fast-Max               | OTC                 |
| <i>mucinex sinus-max congestion oral liquid 10-650-400 mg/20ml</i>      | Mucinex Fast-Max               | OTC                 |
| <i>mucinex sinus-max congestion oral tablet 5-325-200 mg</i>            | Mucinex Fast-Max Cold & Sinus  | OTC                 |
| <i>mucinex sinus-max oral liquid 10-650-400 mg/20ml</i>                 | Mucinex Fast-Max               | OTC                 |
| <i>mucinex sinus-max press &amp; pain oral tablet 5-325-200 mg</i>      | Mucinex Fast-Max Cold & Sinus  | OTC                 |
| <i>mucus relief cold/sinus max st oral liquid 10-650-400 mg/20ml</i>    | Mucinex Fast-Max               | OTC                 |
| <i>mucus relief severe sinus oral tablet 5-325-200 mg</i>               | Mucinex Fast-Max Cold & Sinus  | OTC                 |
| <i>mucus relief sinus pressure oral tablet 5-325-200 mg</i>             | Mucinex Fast-Max Cold & Sinus  | OTC                 |
| <i>qc sinus congest/pain severe oral tablet 5-325-200 mg</i>            | Mucinex Fast-Max Cold & Sinus  | OTC                 |
| <i>ra cold/sinus max oral tablet 5-325-200 mg</i>                       | Mucinex Fast-Max Cold & Sinus  | OTC                 |



| <b>Formulary Drug Name</b>  | <b>Reference</b>               | <b>Restrictions</b> |
|---|--------------------------------|---------------------|
| <i>ra sinus congest/pain relief oral tablet 5-325-200 mg</i>          | Mucinex Fast-Max Cold & Sinus  | OTC                 |
| <i>sb sinus congestion/pain oral tablet 5-325-200 mg</i>              | Mucinex Fast-Max Cold & Sinus  | OTC                 |
| <i>sinus congestion/pain daytime oral tablet 5-325-200 mg</i>         | Mucinex Fast-Max Cold & Sinus  | OTC                 |
| <i>sudafed pe pressure+pain+mucus oral tablet 5-325-200 mg</i>        | Mucinex Fast-Max Cold & Sinus  | OTC                 |
| <b>TYLENOL COLD &amp; HEAD ORAL TABLET 5-325-200 MG</b>               | cvs sinus relief pressure/pain | OTC                 |
| <b>TYLENOL SINUS SEVERE ORAL TABLET 5-325-200 MG</b>                  | cvs sinus relief pressure/pain | OTC                 |
| <i>wal-phed pe triple relief oral tablet 5-325-200 mg</i>             | Mucinex Fast-Max Cold & Sinus  | OTC                 |
| <b>*Decongestant-Antihistamine-Analgesic***</b>                       |                                |                     |
| <i>cold &amp; flu relief nighttime oral liquid 12.5-5-325 mg/10ml</i> | Delsym Cgh/Cld Nighttime Child | OTC                 |
| <i>delsym cgh/cld nighttime child oral liquid 12.5-5-325 mg/10ml</i>  | Delsym Cgh/Cld Nighttime Child | OTC                 |
| <i>delsym cough/cold night time oral liquid 12.5-5-325 mg/10ml</i>    | Delsym Cgh/Cld Nighttime Child | OTC                 |
| <i>goodsense nighttime sinus oral capsule 6.25-5-325 mg</i>           |                                | OTC                 |
| <i>mucinex fast-max cold flu nght oral liquid 12.5-5-325 mg/10ml</i>  | Delsym Cgh/Cld Nighttime Child | OTC                 |
| <i>mucinex ms cold night children oral liquid 12.5-5-325 mg/10ml</i>  | Delsym Cgh/Cld Nighttime Child | OTC                 |
| <i>mucinex sinus-max night time oral liquid 12.5-5-325 mg/10ml</i>    | Delsym Cgh/Cld Nighttime Child | OTC                 |
| <i>robatussin severe nighttime oral liquid 12.5-5-325 mg/10ml</i>     | Delsym Cgh/Cld Nighttime Child | OTC                 |
| <i>sb nighttime sinus multi-sympt oral capsule 6.25-5-325 mg</i>      |                                | OTC                 |
| <b>*Expectorants***</b>   |                                |                     |
| <i>altarussin oral syrup 100 mg/5ml</i>                               |                                | OTC                 |
| <i>bidex oral tablet 400 mg</i>                                       | Xpect                          | OTC                 |
| <i>buckleys chest congestion oral liquid 100 mg/5ml</i>               | Buckleys Chest Congestion      | OTC                 |
| <i>chest congestion childrens oral liquid 100 mg/5ml</i>              | Buckleys Chest Congestion      | OTC                 |
| <i>chest congestion relief oral tablet 400 mg</i>                     | Xpect                          | OTC                 |



| <b>Formulary Drug Name</b>  | <b>Reference</b>          | <b>Restrictions</b> |
|---|---------------------------|---------------------|
| <i>childrens mucus relief expect oral liquid 100 mg/5ml</i>                       | Buckleys Chest Congestion | OTC                 |
| <i>cough syrup oral syrup 100 mg/5ml</i>  |                           | OTC                 |
| <i>coughtab oral tablet 200 mg</i>  |                           | OTC                 |
| <i>cvs chest congestion childrens oral liquid 100 mg/5ml</i>                      | Buckleys Chest Congestion | OTC                 |
| <i>cvs chest congestion relief oral tablet 400 mg</i>                             | Xpect                     | OTC                 |
| <i>cvs mucus extended release oral tablet extended release 12 hour 1200 mg</i>    | Mucinex Maximum Strength  | OTC                 |
| <i>cvs tussin adult chest congest oral liquid 100 mg/5ml</i>                      | Buckleys Chest Congestion | OTC                 |
| <i>diabetic siltussin das-na oral liquid 100 mg/5ml</i>                           | Buckleys Chest Congestion | OTC                 |
| <i>diabetic tussin ex oral syrup 100 mg/5ml</i>                                   |                           | OTC                 |
| <i>diabetic tussin oral liquid 100 mg/5ml</i>                                     | Buckleys Chest Congestion | OTC                 |
| <i>eq mucus er oral tablet extended release 12 hour 600 mg</i>                    | EQ Mucus ER               | OTC                 |
| <i>eql mucus-er maximum strength oral tablet extended release 12 hour 1200 mg</i> | Mucinex Maximum Strength  | OTC                 |
| <i>eql tussin mucus/chest congest oral liquid 100 mg/5ml</i>                      | Buckleys Chest Congestion | OTC                 |
| <i>fenesin ir oral tablet 400 mg</i>  | Xpect                     | OTC                 |
| <i>geri-tussin oral syrup 100 mg/5ml</i>  |                           | OTC                 |
| <i>g-fen ex oral tablet 400 mg</i>  | Xpect                     | OTC                 |
| <i>gnp mucus er oral tablet extended release 12 hour 1200 mg</i>                  | Mucinex Maximum Strength  | OTC                 |
| <i>gnp mucus relief childrens oral liquid 100 mg/5ml</i>                          | Buckleys Chest Congestion | OTC                 |
| <i>gnp mucus relief oral tablet 400 mg</i>  | Xpect                     | OTC                 |
| <i>gnp tab tussin oral tablet 400 mg</i>  | Xpect                     | OTC                 |
| <i>gnp tussin mucus &amp; chest cong oral liquid 100 mg/5ml</i>                   | Buckleys Chest Congestion | OTC                 |
| <i>goodsense mucus relief oral tablet 400 mg</i>                                  | Xpect                     | OTC                 |
| <i>guaifenesin er oral tablet extended release 12 hour 1200 mg</i>                | Mucinex Maximum Strength  | OTC                 |
| <i>guaifenesin er oral tablet extended release 12 hour 600 mg</i>                 | EQ Mucus ER               | OTC                 |
| <i>guaifenesin oral liquid 100 mg/5ml</i>   | Buckleys Chest Congestion | OTC                 |
| <i>guaifenesin oral solution 100 mg/5ml, 200 mg/10ml, 300 mg/15ml</i>             | Buckleys Chest Congestion | OTC                 |
| <i>guaifenesin oral syrup 100 mg/5ml</i>  |                           | OTC                 |
| <i>guaifenesin oral tablet 200 mg</i>   |                           | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>           | <b>Restrictions</b> |
|--|----------------------------|---------------------|
| <i>guaifenesin oral tablet 400 mg</i>  | Xpect                      | OTC                 |
| <i>hm chest congestion relief oral tablet 400 mg</i>                         | Xpect                      | OTC                 |
| <i>hm mucus er oral tablet extended release 12 hour 1200 mg</i>              | Mucinex Maximum Strength   | OTC                 |
| <i>hm tussin adult oral liquid 100 mg/5ml</i>                                | Buckleys Chest Congestion  | OTC                 |
| <i>kls mucus relief chest oral tablet 400 mg</i>                             | Xpect                      | OTC                 |
| <i>liquibid oral tablet 400 mg</i>   | Xpect                      | OTC                 |
| <i>mucinex chest congestion child oral liquid 100 mg/5ml</i>                 | Buckleys Chest Congestion  | OTC                 |
| <b>MUCINEX FOR KIDS ORAL PACKET 100 MG</b>                                   |                            | OTC                 |
| <b>MUCINEX MAXIMUM STRENGTH ORAL TABLET EXTENDED RELEASE 12 HOUR 1200 MG</b> | cvs mucus extended release | OTC                 |
| <i>mucosa oral tablet 400 mg</i>   | Xpect                      | OTC                 |
| <i>mucus relief chest congestion oral liquid 400 mg/20ml</i>                 | Buckleys Chest Congestion  | OTC                 |
| <i>mucus relief chest congestion oral tablet 200 mg</i>                      |                            | OTC                 |
| <i>mucus relief chest congestion oral tablet 400 mg</i>                      | Xpect                      | OTC                 |
| <i>mucus relief er oral tablet extended release 12 hour 1200 mg</i>          | Mucinex Maximum Strength   | OTC                 |
| <i>mucus relief er oral tablet extended release 12 hour 600 mg</i>           | EQ Mucus ER                | OTC                 |
| <i>mucus relief oral tablet 400 mg</i>                                       | Xpect                      | OTC                 |
| <i>organ-i nr oral tablet 200 mg</i>   |                            | OTC                 |
| <i>pa mucus relief oral tablet extended release 12 hour 600 mg</i>           | EQ Mucus ER                | OTC                 |
| <i>px tussin oral solution 100 mg/5ml</i>                                    | Buckleys Chest Congestion  | OTC                 |
| <i>qc medifin 400 oral tablet 400 mg</i>                                     | Xpect                      | OTC                 |
| <i>qc medifin mucus relief child oral liquid 100 mg/5ml</i>                  | Buckleys Chest Congestion  | OTC                 |
| <i>ra mucus relief chest oral tablet 400 mg</i>                              | Xpect                      | OTC                 |
| <i>ra mucus relief oral tablet 400 mg</i>                                    | Xpect                      | OTC                 |
| <i>ra mucus relief oral tablet extended release 12 hour 600 mg</i>           | EQ Mucus ER                | OTC                 |
| <i>ra tussin chest congestion oral liquid 100 mg/5ml</i>                     | Buckleys Chest Congestion  | OTC                 |
| <i>ra tussin chest congestion oral syrup 100 mg/5ml</i>                      |                            | OTC                 |
| <i>ra tussin oral syrup 100 mg/5ml</i>                                       |                            | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b>          | <b>Restrictions</b>           |
|---|---------------------------|-------------------------------|
| <i>refenesen 400 oral tablet 400 mg</i>                             | Xpect                     | OTC                           |
| <i>refenesen oral tablet 200 mg</i>                                 |                           | OTC                           |
| <i>robafen oral syrup 100 mg/5ml</i>                                |                           | OTC                           |
| <i>robitussin mucus+chest congest oral liquid 100 mg/5ml</i>        | Buckleys Chest Congestion | OTC                           |
| <i>sb cough control oral syrup 100 mg/5ml</i>                       |                           | OTC                           |
| <i>sb coughtab oral tablet 200 mg</i>                               |                           | OTC                           |
| <i>sb mucus relief oral tablet 400 mg</i>                           | Xpect                     | OTC                           |
| <i>scot-tussin expectorant oral liquid 100 mg/5ml</i>               | Buckleys Chest Congestion | OTC                           |
| <i>siltussin das oral liquid 100 mg/5ml</i>                         | Buckleys Chest Congestion | OTC                           |
| <i>siltussin sa oral syrup 100 mg/5ml</i>                           |                           | OTC                           |
| <i>sm chest congestion relief oral tablet 400 mg</i>                | Xpect                     | OTC                           |
| <i>sm mucus relief childrens oral liquid 100 mg/5ml</i>             | Buckleys Chest Congestion | OTC                           |
| <i>sm tussin mucus+chest congest oral liquid 100 mg/5ml</i>         | Buckleys Chest Congestion | OTC                           |
| <i>tussin mucus &amp; chest congest oral liquid 100 mg/5ml</i>      | Buckleys Chest Congestion | OTC                           |
| <i>tussin mucus+chest congestion oral liquid 100 mg/5ml</i>         | Buckleys Chest Congestion | OTC                           |
| <i>tussin mucus+chest congestion oral syrup 100 mg/5ml</i>          |                           | OTC; QLL (120 ML per 30 days) |
| <i>tussin oral liquid 100 mg/5ml</i>                                | Buckleys Chest Congestion | OTC                           |
| <i>tussin oral syrup 100 mg/5ml</i>                                 |                           | OTC                           |
| <i>wal-tussin chest congestion oral liquid 100 mg/5ml</i>           | Buckleys Chest Congestion | OTC                           |
| <i>wal-tussin oral syrup 100 mg/5ml</i>                             |                           | OTC                           |
| <i>xpect oral tablet 400 mg</i>                                     | Xpect                     | OTC                           |
| <b>*Misc. Respiratory Inhalants***</b>                              |                           |                               |
| <i>nasal mist inhalation aerosol solution 0.9 %</i>                 | Simply Saline Baby        | OTC                           |
| <i>nebusal inhalation nebulization solution 3 %</i>                 | Nebusal                   |                               |
| <i>pulmosal inhalation nebulization solution 7 %</i>                | PulmoSal                  |                               |
| <i>simply saline baby inhalation aerosol solution 0.9 %</i>         | Simply Saline Baby        | OTC                           |
| <i>sodium chloride inhalation nebulization solution 0.9 %, 10 %</i> |                           |                               |
| <i>sodium chloride inhalation nebulization solution 3 %</i>         | Nebusal                   |                               |
| <i>sodium chloride inhalation nebulization solution 7 %</i>         | PulmoSal                  |                               |

| <b>Formulary Drug Name</b>  | <b>Reference</b>         | <b>Restrictions</b> |
|---|--------------------------|---------------------|
| <b>*Mucolytics***</b>   |                          |                     |
| <i>acetylcysteine inhalation solution 10 %, 20 %</i>                |                          |                     |
| <b>*Non-Narc Antitussive-Analgesic***</b>                           |                          |                     |
| <i>sm cough/sore throat daytime oral liquid 1000-30 mg/30ml</i>     |                          | OTC                 |
| <b>TYLENOL CHILDRENS COLD/COUGH ORAL SUSPENSION 160-5 MG/5ML</b>    |                          | OTC                 |
| <b>*Non-Narc Antitussive-Antihistamine***</b>                       |                          |                     |
| <b>CORICIDIN HBP COUGH/COLD ORAL TABLET 4-30 MG</b>                 | cough & cold             | OTC                 |
| <i>cough &amp; cold oral tablet 4-30 mg</i>                         | Coricidin HBP Cough/Cold | OTC                 |
| <i>cvs nighttime cough oral liquid 6.25-15 mg/15ml</i>              | Vicks NyQuil Cough       | OTC                 |
| <i>cvs triacting cough/runny nose oral liquid 1-5 mg/5ml</i>        |                          | OTC                 |
| <i>eq night time cough oral liquid 6.25-15 mg/15ml</i>              | Vicks NyQuil Cough       | OTC                 |
| <i>eql cough &amp; cold relief hbp oral tablet 4-30 mg</i>          | Coricidin HBP Cough/Cold | OTC                 |
| <i>eql nighttime cough relief oral liquid 12.5-30 mg/30ml</i>       | Vicks NyQuil Cough       | OTC                 |
| <i>gnp night time cough oral liquid 6.25-15 mg/15ml</i>             | Vicks NyQuil Cough       | OTC                 |
| <i>nighttime cough oral liquid 12.5-30 mg/30ml, 6.25-15 mg/15ml</i> | Vicks NyQuil Cough       | OTC                 |
| <i>promethazine-dm oral syrup 6.25-15 mg/5ml</i>                    |                          | AL (Min 6 Years)    |
| <i>px nitetime cough oral liquid 6.25-15 mg/15ml</i>                | Vicks NyQuil Cough       | OTC                 |
| <i>qc nighttime cough oral liquid 6.25-15 mg/15ml</i>               | Vicks NyQuil Cough       | OTC                 |
| <i>ra nighttime cough relief oral liquid 6.25-15 mg/15ml</i>        | Vicks NyQuil Cough       | OTC                 |
| <i>ra nite time cough oral liquid 6.25-15 mg/15ml</i>               | Vicks NyQuil Cough       | OTC                 |
| <b>ROBITUSSIN CHILD COUGH/COLD LA ORAL LIQUID 1-7.5 MG/5ML</b>      |                          | OTC                 |
| <b>ROBITUSSIN NIGHTTIME COUGH ORAL LIQUID 1-7.5 MG/5ML</b>          |                          | OTC                 |
| <i>sb cold &amp; cough hbp oral tablet 4-30 mg</i>                  | Coricidin HBP Cough/Cold | OTC                 |
| <i>sb nighttime cough oral liquid 6.25-15 mg/15ml</i>               | Vicks NyQuil Cough       | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>       | <b>Restrictions</b>           |
|--|------------------------|-------------------------------|
| <b>SCOT-TUSSIN DM ORAL LIQUID 2-15 MG/5ML</b>                          |                        | OTC                           |
| <i>sm cough/runny nose childrens oral liquid 1-5 mg/5ml</i>            |                        | OTC                           |
| <b>VICKS NYQUIL CHILDRENS CLD/CGH ORAL LIQUID 2-15 MG/15ML</b>         |                        | OTC                           |
| <b>VICKS NYQUIL COUGH ORAL LIQUID 12.5-30 MG/30ML, 6.25-15 MG/15ML</b> | cvs nighttime cough    | OTC                           |
| <b>*Non-Narc Antitussive-Decongestant-Antihistamine***</b>             |                        |                               |
| <b>ALAHIST DM ORAL LIQUID 7.5-2-15 MG/5ML</b>                          |                        | OTC; AL (Min 6 Years)         |
| <i>bio t pres-b oral liquid 10-4-20 mg/5ml</i>                         | Presgen B              | OTC                           |
| <i>bio-rytuss oral liquid 5-2-10 mg/5ml</i>                            | Gencontuss             | OTC                           |
| <i>cold &amp; cough childrens oral liquid 2.5-1-5 mg/5ml</i>           | EndaCof-DM             | OTC                           |
| <b>DIMETAPP DM COLD/COUGH ORAL LIQUID 2.5-1-5 MG/5ML</b>               | cold & cough childrens | OTC                           |
| <b>ED A-HIST DM ORAL TABLET 10-4-10 MG</b>                             |                        | OTC                           |
| <i>ed-a-hist dm oral liquid 10-4-15 mg/5ml</i>                         |                        | OTC                           |
| <i>endacof-dm oral liquid 2.5-1-5 mg/5ml</i>                           | EndaCof-DM             | OTC                           |
| <i>eql cold/cough oral liquid 2.5-1-5 mg/5ml</i>                       | EndaCof-DM             | OTC                           |
| <i>gencontuss oral liquid 5-2-10 mg/5ml</i>                            | Gencontuss             | OTC                           |
| <i>glenmax peb dm forte oral liquid 10-4-20 mg/5ml</i>                 | Presgen B              | OTC                           |
| <b>GLENMAX PEB DM ORAL LIQUID 5-2-10 MG/5ML</b>                        |                        | OTC                           |
| <b>LOHIST-DM ORAL SYRUP 5-2-10 MG/5ML</b>                              |                        | OTC                           |
| <i>nohist-dm oral liquid 10-4-15 mg/5ml</i>                            |                        |                               |
| <i>presgen b oral liquid 10-4-20 mg/5ml</i>                            | Presgen B              | OTC                           |
| <i>pse-dexchlorphen-chlophedianol oral liquid 30-1-12.5 mg/5ml</i>     | Vanacof                | OTC; QLL (180 ML per 30 days) |
| <i>pseudoeph-bromphen-dm oral syrup 30-2-10 mg/5ml</i>                 | Bromfed DM             |                               |
| <i>qc dibromm childrens cold&amp;cgh oral liquid 2.5-1-5 mg/5ml</i>    | EndaCof-DM             | OTC                           |
| <b>RYCONTUSS ORAL LIQUID 5-2-10 MG/5ML</b>                             | bio-rytuss             | OTC                           |
| <i>rynex dm oral liquid 2.5-1-5 mg/5ml</i>                             | EndaCof-DM             | OTC                           |
| <i>tussi-pres b oral liquid 10-4-20 mg/5ml</i>                         | Presgen B              | OTC                           |

| <b>Formulary Drug Name</b>  | <b>Reference</b>               | <b>Restrictions</b>                         |
|---|--------------------------------|---|
| <b>VANACOF ORAL LIQUID 30-1-12.5 MG/5ML</b>                       | pse-dexchlorphen-chlophedianol | OTC; QLL (180 ML per 30 days)               |
| <b>*Opioid Antitussive-Antihistamine***</b>                       |                                |   |
| <i>promethazine-codeine oral syrup 6.25-10 mg/5ml</i>             |                                | AL (Min 18 Years)                           |
| <b>*Opioid Antitussive-Decongestant-Antihistamine***</b>          |                                |   |
| <i>promethazine vc/codeine oral syrup 6.25-5-10 mg/5ml</i>        |                                | AL (Min 18 Years)                           |
| <i>promethazine-phenyleph-codeine oral syrup 6.25-5-10 mg/5ml</i> |                                | AL (Min 18 Years)                           |
| <b>RYDEX ORAL LIQUID 10-1.33-6.33 MG/5ML</b>                      |                                | OTC   |
| <b>*Dermatologicals*</b>  |                                |   |
| <b>*Acne Antibiotics***</b>                                       |                                |   |
| <i>clindacin etz external swab 1 %</i>                            | Clindacin ETZ                  | AL (Max 18 Years)                           |
| <i>clindacin-p external swab 1 %</i>                              | Clindacin ETZ                  | AL (Max 18 Years)                           |
| <i>clindamycin phosphate external gel 1 %</i>                     | Clindagel                      | QLL (1 GM per 1 day); AL (Max 18 Years)     |
| <i>clindamycin phosphate external lotion 1 %</i>                  | Cleocin-T                      | QLL (2 ML per 1 day); AL (Max 18 Years)     |
| <i>clindamycin phosphate external solution 1 %</i>                |                                | AL (Max 18 Years)                           |
| <i>clindamycin phosphate external swab 1 %</i>                    | Clindacin ETZ                  | AL (Max 18 Years)                           |
| <i>ery external pad 2 %</i>                                       |                                | QLL (2 EA per 1 day); AL (Max 18 Years)     |
| <i>erythromycin external gel 2 %</i>                              | Erygel                         | QLL (1 GM per 1 day); AL (Max 18 Years)     |
| <i>erythromycin external pad 2 %</i>                              |                                | QLL (2 EA per 1 day); AL (Max 18 Years)     |
| <i>erythromycin external solution 2 %</i>                         |                                | AL (Max 18 Years)                           |
| <i>sulfacetamide sodium (acne) external lotion 10 %</i>           | Klaron                         | QLL (118 ML per 30 days); AL (Max 18 Years) |
| <b>*Acne Combinations***</b>                                      |                                |   |
| <i>clindamycin phos-benzoyl perox external gel 1.2-5 %</i>        | Neuac                          | AL (Max 18 Years)                           |
| <b>*Acne Products***</b>  |                                |   |
| <b>AC CUTANE ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG</b>          | isotretinoin                   | ST; QLL (2 EA per 1 day)                    |
| <i>acne foaming wash external liquid 10 %</i>                     | PanOxyl Foaming Wash           | OTC; AL (Max 18 Years)                      |
| <i>acne maximum strength external cream 10 %</i>                  | Clearasil Daily Clear Acne     | OTC; AL (Max 18 Years)                      |



| <b>Formulary Drug Name</b>                                       | <b>Reference</b>               | <b>Restrictions</b>      |
|--|--------------------------------|--------------------------|
| <b>ACNE MEDICATION 10 EXTERNAL LOTION 10 %</b>                   |                                | OTC; AL (Max 18 Years)   |
| <i>acne medication 5 external gel 5 %</i>                        | Medpura Benzoyl Peroxide       | OTC; AL (Max 18 Years)   |
| <b>ACNE MEDICATION 5 EXTERNAL LOTION 5 %</b>                     |                                | OTC; AL (Max 18 Years)   |
| <i>acne treatment external bar 10 %</i>                          |                                | OTC; AL (Max 18 Years)   |
| <i>adapalene external gel 0.1 %</i>                              | Differin                       | AL (Max 18 Years)        |
| <i>adapalene gel 0.1 % external (otc)</i>                        | Differin                       |                          |
| <b>ADVANCED ACNE WASH EXTERNAL LIQUID EXTENDED RELEASE 4.4 %</b> |                                | OTC; AL (Max 18 Years)   |
| <b>AMNESTEEM ORAL CAPSULE 10 MG, 20 MG</b>                       | isotretinoin                   | ST; QLL (2 EA per 1 day) |
| <i>avita external cream 0.025 %</i>                              | Avita                          | AL (Max 18 Years)        |
| <i>avita external gel 0.025 %</i>                                | Retin-A                        | AL (Max 18 Years)        |
| <i>benzoyl peroxide external gel 10 %</i>                        | Clean & Clear Persa-Gel Max St | AL (Max 18 Years)        |
| <i>benzoyl peroxide external gel 2.5 %</i>                       |                                | OTC; AL (Max 18 Years)   |
| <i>benzoyl peroxide external gel 5 %</i>                         | Medpura Benzoyl Peroxide       | OTC; AL (Max 18 Years)   |
| <i>benzoyl peroxide wash external liquid 10 %</i>                | PanOxyl Foaming Wash           | AL (Max 18 Years)        |
| <i>benzoyl peroxide wash external liquid 5 %</i>                 | Benzac AC Wash                 | OTC; AL (Max 18 Years)   |
| <i>bp gel external gel 5 %</i>                                   | Medpura Benzoyl Peroxide       | OTC; AL (Max 18 Years)   |
| <i>bp wash external liquid 10 %</i>                              | PanOxyl Foaming Wash           | OTC; AL (Max 18 Years)   |
| <i>bp wash external liquid 2.5 %</i>                             | PanOxyl                        | OTC; AL (Max 18 Years)   |
| <i>claravis oral capsule 10 mg</i>                               | Accutane                       | ST; QLL (2 EA per 1 day) |
| <b>CLARAVIS ORAL CAPSULE 20 MG, 30 MG, 40 MG</b>                 | isotretinoin                   | ST; QLL (2 EA per 1 day) |
| <i>clean &amp; clear continuous external cream 10 %</i>          | Clearasil Daily Clear Acne     | OTC; AL (Max 18 Years)   |
| <i>clearasil daily clear acne external cream 10 %</i>            | Clearasil Daily Clear Acne     | OTC; AL (Max 18 Years)   |
| <i>clearskin external cream 10 %</i>                             | Clearasil Daily Clear Acne     | OTC; AL (Max 18 Years)   |
| <i>cvs acne cleansing external bar 10 %</i>                      |                                | OTC; AL (Max 18 Years)   |
| <i>cvs acne control cleanser external cream 10 %</i>             | Clearasil Daily Clear Acne     | OTC; AL (Max 18 Years)   |
| <i>cvs acne external cream 10 %</i>                              | Clearasil Daily Clear Acne     | OTC; AL (Max 18 Years)   |
| <i>cvs acne foaming face wash external liquid 10 %</i>           | PanOxyl Foaming Wash           | OTC; AL (Max 18 Years)   |
| <i>cvs foaming acne face wash external liquid 10 %</i>           | PanOxyl Foaming Wash           | OTC; AL (Max 18 Years)   |
| <i>cvs targeted acne spot external cream 2.5 %</i>               | Neutrogena On-The-Spot         | OTC; AL (Max 18 Years)   |
| <i>gnp acne treatment external cream 10 %</i>                    | Clearasil Daily Clear Acne     | OTC; AL (Max 18 Years)   |
| <i>isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg</i>      | Accutane                       | ST; QLL (2 EA per 1 day) |



| <b>Formulary Drug Name</b>                              | <b>Reference</b>              | <b>Restrictions</b>      |
|---|-------------------------------|--------------------------|
| <i>myorisan oral capsule 10 mg, 20 mg, 30 mg, 40 mg</i> | Accutane                      | ST; QLL (2 EA per 1 day) |
| <b>NEUTROGENA ON-THE-SPOT EXTERNAL CREAM 2.5 %</b>      | cvs targeted acne spot        | OTC; AL (Max 18 Years)   |
| <b>PANOXYL CREAMY WASH EXTERNAL LIQUID 4 %</b>          | cvs creamy acne face wash     | OTC; AL (Min 18 Years)   |
| <b>PANOXYL EXTERNAL LIQUID 2.5 %</b>                    | bp wash                       | OTC; AL (Max 18 Years)   |
| <b>PANOXYL FOAMING WASH EXTERNAL LIQUID 10 %</b>        | acne foaming wash             | OTC; AL (Min 18 Years)   |
| <i>ra acne treatment external cream 10 %</i>            | Clearasil Daily Clear Acne    | OTC; AL (Max 18 Years)   |
| <i>ra vanishing acne treatment external cream 10 %</i>  | Clearasil Daily Clear Acne    | OTC; AL (Max 18 Years)   |
| <b>RETIN-A EXTERNAL CREAM 0.025 %, 0.05 %, 0.1 %</b>    | tretinoin                     | AL (Max 18 Years)        |
| <b>RETIN-A EXTERNAL GEL 0.01 %, 0.025 %</b>             | tretinoin                     | AL (Max 18 Years)        |
| <i>spot acne treatment external cream 2.5 %</i>         | Neutrogena On-The-Spot        | OTC; AL (Max 18 Years)   |
| <i>tretinoin external cream 0.025 %</i>                 | Avita                         | AL (Max 18 Years)        |
| <i>tretinoin external cream 0.05 %, 0.1 %</i>           | Retin-A                       | AL (Max 18 Years)        |
| <i>tretinoin external gel 0.01 %, 0.025 %</i>           | Retin-A                       | AL (Max 18 Years)        |
| <i>zenatane oral capsule 10 mg, 20 mg, 30 mg, 40 mg</i> | Accutane                      | ST; QLL (2 EA per 1 day) |
| <b>*Analgesics - Topical***</b>                         |                               |                          |
| <b>ASPERCREME HEAT EXTERNAL GEL 10 %</b>                |                               | OTC                      |
| <b>ASPERCREME MAX ROLL-ON EXTERNAL LIQUID 16 %</b>      | cool n heat maximum strength  | OTC                      |
| <b>BAMA FREEZE EXTERNAL GEL 3.7 %</b>                   |                               | OTC                      |
| <b>BENGAY COLD THERAPY EXTERNAL GEL 5 %</b>             |                               | OTC                      |
| <i>bengay ultra strength external patch 5 %</i>         | Bengay Ultra Strength         | OTC                      |
| <i>bengay vanishing scent external gel 2.5 %</i>        | Bengay Vanishing Scent        | OTC                      |
| <i>berri-freez pain relieving external gel 3.5 %</i>    | Fast Freeze Pro Style Therapy | OTC                      |
| <i>biofreeze colorless external gel 4 %</i>             | Biofreeze                     | OTC                      |
| <i>biofreeze external gel 4 %</i>                       | Biofreeze                     | OTC                      |
| <i>biofreeze roll-on colorless external gel 4 %</i>     | Biofreeze                     | OTC                      |
| <i>biofreeze roll-on external gel 4 %</i>               | Biofreeze                     | OTC                      |
| <i>blue gel external gel 2 %</i>                        | Mineral Ice                   | OTC                      |
| <i>cold/hot pain relief therapy external patch 5 %</i>  | Bengay Ultra Strength         | OTC                      |
| <i>cool &amp; heat external patch 5 %</i>               | Bengay Ultra Strength         | OTC                      |
| <i>cool n heat arm/neck/leg external patch 5 %</i>      | Bengay Ultra Strength         | OTC                      |

| <b>Formulary Drug Name</b>                                | <b>Reference</b>              | <b>Restrictions</b> |
|---|-------------------------------|---------------------|
| <i>cool n heat ex st external patch 5 %</i>               | Bengay Ultra Strength         | OTC                 |
| <i>cool n heat maximum strength external liquid 16 %</i>  | Icy Hot                       | OTC                 |
| <i>cool n heat/back external patch 5 %</i>                | Bengay Ultra Strength         | OTC                 |
| <i>cool therapy external gel 4 %</i>                      | Biofreeze                     | OTC                 |
| <i>cvs cold &amp; hot medicated external patch 5 %</i>    | Bengay Ultra Strength         | OTC                 |
| <i>cvs pain relieving ultra st external patch 5 %</i>     | Bengay Ultra Strength         | OTC                 |
| <i>cvs sore muscle rub external gel 2.5 %</i>             | Bengay Vanishing Scent        | OTC                 |
| <i>cvs therapeutic menthol external gel 2 %</i>           | Mineral Ice                   | OTC                 |
| <i>fast freeze pro style therapy external gel 3.5 %</i>   | Fast Freeze Pro Style Therapy | OTC                 |
| <i>gnp therapeutic blue external gel 2 %</i>              | Mineral Ice                   | OTC                 |
| <b>GOLD BOND PAIN RELIEVING FOOT EXTERNAL CREAM 16 %</b>  |                               | OTC                 |
| <b>GOLD BOND PAIN RELIEVING FOOT EXTERNAL LIQUID 16 %</b> | cool n heat maximum strength  | OTC                 |
| <i>hm pain relief therapy external patch 5 %</i>          | Bengay Ultra Strength         | OTC                 |
| <i>ice blue external gel 2 %</i>                          | Mineral Ice                   | OTC                 |
| <b>ICY HOT ADVANCED RELIEF EXTERNAL PATCH 7.5 %</b>       |                               | OTC                 |
| <i>icy hot back external patch 5 %</i>                    | Bengay Ultra Strength         | OTC                 |
| <i>icy hot external liquid 16 %</i>                       | Icy Hot                       | OTC                 |
| <i>icy hot external patch 5 %</i>                         | Bengay Ultra Strength         | OTC                 |
| <b>ICY HOT MEDICATED SPRAY EXTERNAL LIQUID 16 %</b>       | cool n heat maximum strength  | OTC                 |
| <b>ICY HOT NATURALS EXTERNAL CREAM 7.5 %</b>              |                               | OTC                 |
| <b>ICY HOT PAIN RELIEVING EXTERNAL GEL 2.5 %</b>          | cvs sore muscle rub           | OTC                 |
| <i>mineral freez external gel 2 %</i>                     | Mineral Ice                   | OTC                 |
| <i>mineral ice external gel 2 %</i>                       | Mineral Ice                   | OTC                 |
| <i>pain relieving external gel 3.5 %</i>                  | Fast Freeze Pro Style Therapy | OTC                 |
| <i>pain relieving ultra st external patch 5 %</i>         | Bengay Ultra Strength         | OTC                 |
| <i>perform pain relieving external gel 3.5 %</i>          | Fast Freeze Pro Style Therapy | OTC                 |
| <i>polar frost external gel 4 %</i>                       | Biofreeze                     | OTC                 |
| <i>ra cold &amp; hot sore muscle external liquid 16 %</i> | Icy Hot                       | OTC                 |
| <i>ra cold/hot medicated external patch 5 %</i>           | Bengay Ultra Strength         | OTC                 |
| <i>ra pain care muscle &amp; joint external gel 2.5 %</i> | Bengay Vanishing Scent        | OTC                 |
| <i>ra therapeutic blue external gel 2 %</i>               | Mineral Ice                   | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b>               | <b>Restrictions</b> |
|---|--------------------------------|---------------------|
| <b>SOMBRA COOL THERAPY EXTERNAL GEL 6 %</b>                       |                                | OTC                 |
| <i>stopain external gel 6 %</i>                                   |                                | OTC                 |
| <i>tgt cold &amp; hot medicated ex st external patch 5 %</i>      | Bengay Ultra Strength          | OTC                 |
| <i>thritex external patch 5 %</i>                                 | Bengay Ultra Strength          | OTC                 |
| <b>ULTRACIN M EXTERNAL GEL 5 %</b>                                |                                | OTC                 |
| <b>ULTRACIN-M EXTERNAL GEL 10 %</b>                               |                                | OTC                 |
| <b>ZIMS MAX-FREEZE EXTERNAL GEL 3.7 %</b>                         |                                | OTC                 |
| <b>*Antibiotic Mixtures Topical***</b>                            |                                |                     |
| <i>bacitracin-neomycin-polymyxin external ointment 400-5-5000</i> | Lanabiotic                     | OTC                 |
| <i>bacitracin-polymyxin b external ointment 500-10000 unit/gm</i> | Polysporin                     | OTC                 |
| <i>cvs antibiotic external ointment 3.5-400-5000</i>              | Lanabiotic                     | OTC                 |
| <i>cvs antibiotic plus external cream 3.5-10000-10</i>            | Neosporin Plus Pain Relief MS  | OTC                 |
| <i>cvs poly bacitracin external ointment 500-10000 unit/gm</i>    | Polysporin                     | OTC                 |
| <i>cvs triple antibiotic external ointment</i>                    | Lanabiotic                     | OTC                 |
| <i>double antibiotic external ointment 500-10000 unit/gm</i>      | Polysporin                     | OTC                 |
| <i>eq antibiotic + pain relief external cream 3.5-10000-10</i>    | Neosporin Plus Pain Relief MS  | OTC                 |
| <i>eq triple antibiotic external ointment 3.5-400-5000</i>        | Lanabiotic                     | OTC                 |
| <i>eql antibiotic + pain relief external cream 3.5-10000-10</i>   | Neosporin Plus Pain Relief MS  | OTC                 |
| <i>eql first aid antibiotic external ointment 1 %</i>             | Neosporin + Pain Relief Max St | OTC                 |
| <i>eql first aid antibiotic external ointment 3.5-400-5000</i>    | Lanabiotic                     | OTC                 |
| <i>first aid antibiotic external ointment 3.5-500-10000</i>       | Lanabiotic                     | OTC                 |
| <i>first aid antibiotic external ointment 4 %</i>                 |                                | OTC                 |
| <i>gnp antibiotic plus pramoxine external cream 3.5-10000-10</i>  | Neosporin Plus Pain Relief MS  | OTC                 |
| <i>gnp triple antibiotic plus external ointment 1 %</i>           | Neosporin + Pain Relief Max St | OTC                 |
| <i>hm double antibiotic external ointment 500-10000 unit/gm</i>   | Polysporin                     | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>               | <b>Restrictions</b> |
|--|--------------------------------|---------------------|
| <i>hm triple antibiotic external ointment 3.5-400-5000</i>               | Lanabiotic                     | OTC                 |
| <i>hm triple antibiotic max st external ointment 1 %</i>                 | Neosporin + Pain Relief Max St | OTC                 |
| <i>kp double antibiotic external ointment 500-10000 unit/gm</i>          | Polysporin                     | OTC                 |
| <i>lanabiotic external ointment 5-500-10000</i>                          | Lanabiotic                     | OTC                 |
| <i>medi-first triple antibiotic external ointment 5-400-5000 mg-unit</i> | Lanabiotic                     | OTC                 |
| <i>meijer triple antibiotic external ointment 3.5-400-5000</i>           | Lanabiotic                     | OTC                 |
| <i>multi antibiotic plus external cream 3.5-10000-10</i>                 | Neosporin Plus Pain Relief MS  | OTC                 |
| <i>neosporin + pain relief max st external ointment 1 %</i>              | Neosporin + Pain Relief Max St | OTC                 |
| <i>neosporin + pain/itch/scar external ointment 1 %</i>                  | Neosporin + Pain Relief Max St | OTC                 |
| <b>NEOSPORIN ORIGINAL EXTERNAL OINTMENT 3.5-400-5000</b>                 | cvs antibiotic                 | OTC                 |
| <b>NEOSPORIN PLUS MAX ST EXTERNAL OINTMENT 4 %</b>                       | first aid antibiotic           | OTC                 |
| <b>POLYSPORIN EXTERNAL OINTMENT 500-10000 UNIT/GM</b>                    | bacitracin-polymyxin b         | OTC                 |
| <i>procomycin external ointment 4 %</i>                                  |                                | OTC                 |
| <i>px triple external ointment 3.5-400-5000</i>                          | Lanabiotic                     | OTC                 |
| <i>ra antibiotic plus external cream 3.5-10000-10</i>                    | Neosporin Plus Pain Relief MS  | OTC                 |
| <i>ra antibiotic/pain relief external ointment 1 %</i>                   | Neosporin + Pain Relief Max St | OTC                 |
| <i>ra double antibiotic external ointment 500-10000 unit/gm</i>          | Polysporin                     | OTC                 |
| <i>ra triple antibiotic external ointment 3.5-400-5000</i>               | Lanabiotic                     | OTC                 |
| <i>ra triple antibiotic plus external ointment 1 %</i>                   | Neosporin + Pain Relief Max St | OTC                 |
| <i>sb triple antibiotic external ointment 3.5-400-5000</i>               | Lanabiotic                     | OTC                 |
| <i>sb triple antibiotic external ointment 4 %</i>                        |                                | OTC                 |
| <i>sm antibiotic plus pain relief external cream 3.5-10000-10</i>        | Neosporin Plus Pain Relief MS  | OTC                 |
| <i>sm double antibiotic external ointment 500-10000 unit/gm</i>          | Polysporin                     | OTC                 |
| <i>sm triple antibiotic external ointment 3.5-400-5000</i>               | Lanabiotic                     | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>               | <b>Restrictions</b> |
|--|--------------------------------|---------------------|
| <i>sm triple antibiotic max st external ointment 1 %</i>             | Neosporin + Pain Relief Max St | OTC                 |
| <i>tgt first aid antibiotic external cream 3.5-10000-10</i>          | Neosporin Plus Pain Relief MS  | OTC                 |
| <i>tri-biozene external ointment 1 %</i>                             | Neosporin + Pain Relief Max St | OTC                 |
| <i>triple antibiotic external ointment 3.5-400-5000 , 5-400-5000</i> | Lanabiotic                     | OTC                 |
| <i>triple antibiotic pain relief external ointment 1 %</i>           | Neosporin + Pain Relief Max St | OTC                 |
| <i>triple antibiotic plus external ointment 1 %</i>                  | Neosporin + Pain Relief Max St | OTC                 |
| <i>triple antibiotic plus max st external ointment 1 %</i>           | Neosporin + Pain Relief Max St | OTC                 |
| <i>wal-sporin external ointment 500-100000 unit/gm</i>               | Polysporin                     | OTC                 |
| <b>*Antibiotics - Topical***</b>                                     |                                |                     |
| <i>bacitracin external ointment 500 unit/gm</i>                      | Bacitraycin Plus               | OTC                 |
| <i>bacitracin zinc external ointment 500 unit/gm</i>                 |                                | OTC                 |
| <i>bacitraycin plus external ointment 500 unit/gm</i>                | Bacitraycin Plus               | OTC                 |
| <i>cvs bacitracin external ointment 500 unit/gm</i>                  |                                | OTC                 |
| <i>cvs bacitracin zinc external ointment 500 unit/gm</i>             |                                | OTC                 |
| <i>eql bacitracin zinc external ointment 500 unit/gm</i>             |                                | OTC                 |
| <i>gentamicin sulfate external cream 0.1 %</i>                       |                                |                     |
| <i>gentamicin sulfate external ointment 0.1 %</i>                    |                                |                     |
| <i>gnp bacitracin zinc external ointment 500 unit/gm</i>             |                                | OTC                 |
| <i>hm bacitracin external ointment 500 unit/gm</i>                   | Bacitraycin Plus               | OTC                 |
| <i>kp bacitracin zinc external ointment 500 unit/gm</i>              |                                | OTC                 |
| <i>mupirocin external ointment 2 %</i>                               |                                |                     |
| <i>qc bacitracin external ointment 500 unit/gm</i>                   | Bacitraycin Plus               | OTC                 |
| <i>ra bacitracin external ointment 500 unit/gm</i>                   |                                | OTC                 |
| <i>ra bacitracin zinc first aid external ointment 500 unit/gm</i>    |                                | OTC                 |
| <i>sb bacitracin external ointment 500 unit/gm</i>                   | Bacitraycin Plus               | OTC                 |
| <i>sm antibiotic external ointment 500 unit/gm</i>                   |                                | OTC                 |

| <b>Formulary Drug Name</b>                                | <b>Reference</b>               | <b>Restrictions</b>          |
|---|--------------------------------|------------------------------|
| <b>*Antifungals - Topical Combinations***</b>             |                                |                              |
| <i>castellani paint external liquid 1.5 %</i>             |                                | OTC                          |
| <i>castellani paint modified external liquid 1.5 %</i>    |                                | OTC                          |
| <i>clotrimazole-betamethasone external cream 1-0.05 %</i> |                                |                              |
| <i>dermazene external cream 1-1 %</i>                     |                                |                              |
| <i>hydrocortisone-iodoquinol external cream 1-1 %</i>     |                                |                              |
| <b>*Antifungals - Topical***</b>                          |                                |                              |
| <i>antifungal external aerosol 1 %</i>                    | Tinactin                       | OTC                          |
| <i>antifungal external cream 1 %</i>                      | Tinactin                       | OTC                          |
| <i>anti-fungal external powder 1 %</i>                    | Odor Eaters Antifungal         | OTC                          |
| <i>athletes foot af external cream 1 %</i>                | LamISIL AT                     | OTC                          |
| <i>athletes foot external cream 1 %</i>                   | LamISIL AT                     | OTC                          |
| <i>athletes foot spray external aerosol 1 %</i>           | Tinactin                       | OTC                          |
| <i>butenafine hcl external cream 1 %</i>                  | Lotrimin Ultra                 | OTC; QLL (30 GM per 30 days) |
| <i>ciclodan external solution 8 %</i>                     | Ciclodan                       |                              |
| <i>ciclopirox external shampoo 1 %</i>                    |                                | ST; QLL (120 ML per 30 days) |
| <i>ciclopirox external solution 8 %</i>                   | Ciclodan                       |                              |
| <i>ciclopirox olamine external cream 0.77 %</i>           |                                | ST; QLL (60 GM per 30 days)  |
| <i>ciclopirox olamine external suspension 0.77 %</i>      | Loprox                         | ST; QLL (30 ML per 30 days)  |
| <i>cvs af spray powder external aerosol powder 1 %</i>    | Odor Eaters Foot/Sneaker Spray | OTC                          |
| <i>cvs antifungal external cream 1 %</i>                  | Tinactin                       | OTC                          |
| <i>cvs athletes foot external cream 1 %</i>               | LamISIL AT                     | OTC                          |
| <i>cvs foot &amp; sneaker external aerosol powder 1 %</i> | Odor Eaters Foot/Sneaker Spray | OTC                          |
| <i>cvs jock itch external cream 1 %</i>                   | LamISIL AT                     | OTC                          |
| <i>eq athletes foot (terbinafine) external cream 1 %</i>  | LamISIL AT                     | OTC                          |
| <i>eq athletes foot (tolnaftate) external cream 1 %</i>   | Tinactin                       | OTC                          |
| <i>eq athletes foot external aerosol powder 1 %</i>       | Odor Eaters Foot/Sneaker Spray | OTC                          |
| <i>eq tolnaftate external aerosol 1 %</i>                 | Tinactin                       | OTC                          |
| <i>eql antifungal (tolnaftate) external cream 1 %</i>     | Tinactin                       | OTC                          |
| <i>eql athletes foot(terbinafine) external cream 1 %</i>  | LamISIL AT                     | OTC                          |
| <i>fungi-guard external cream 1 %</i>                     | Tinactin                       | OTC                          |



| <b>Formulary Drug Name</b>   | <b>Reference</b>               | <b>Restrictions</b> |
|--|--------------------------------|---------------------|
| <i>fungoid-d external cream 1 %</i>                                | Tinactin                       | OTC                 |
| <i>gnp terbinafine hydrochloride external cream 1 %</i>            | LamISIL AT                     | OTC                 |
| <i>gnp tolnaftate external cream 1 %</i>                           | Tinactin                       | OTC                 |
| <i>jock itch spray external aerosol powder 1 %</i>                 | Odor Eaters Foot/Sneaker Spray | OTC                 |
| <i>jock itch spray powder external aerosol powder 1 %</i>          | Odor Eaters Foot/Sneaker Spray | OTC                 |
| <i>kp terbinafine hydrochloride external cream 1 %</i>             | LamISIL AT                     | OTC                 |
| <i>kp tolnaftate external cream 1 %</i>                            | Tinactin                       | OTC                 |
| <i>lamisil af defense external aerosol powder 1 %</i>              | Odor Eaters Foot/Sneaker Spray | OTC                 |
| <i>nyamyc external powder 100000 unit/gm</i>                       | Nyamyc                         |                     |
| <i>nystatin external cream 100000 unit/gm</i>                      |                                |                     |
| <i>nystatin external ointment 100000 unit/gm</i>                   |                                |                     |
| <i>nystatin external powder 100000 unit/gm</i>                     | Nyamyc                         |                     |
| <i>nystop external powder 100000 unit/gm</i>                       | Nyamyc                         |                     |
| <i>odor control foot &amp; sneaker external aerosol powder 1 %</i> | Odor Eaters Foot/Sneaker Spray | OTC                 |
| <i>odor eaters antifungal external powder 1 %</i>                  | Odor Eaters Antifungal         | OTC                 |
| <i>odor eaters foot/sneaker spray external aerosol powder 1 %</i>  | Odor Eaters Foot/Sneaker Spray | OTC                 |
| <i>podactin external powder 1 %</i>                                | Odor Eaters Antifungal         | OTC                 |
| <i>qc athletes foot external cream 1 %</i>                         | LamISIL AT                     | OTC                 |
| <i>qc tolnaftate external cream 1 %</i>                            | Tinactin                       | OTC                 |
| <i>ra antifungal external aerosol 1 %</i>                          | Tinactin                       | OTC                 |
| <i>ra antifungal foot care external cream 1 %</i>                  | LamISIL AT                     | OTC                 |
| <i>ra athletes foot (tolnaftate) external cream 1 %</i>            | Tinactin                       | OTC                 |
| <i>ra foot care antifungal external cream 1 %</i>                  | LamISIL AT                     | OTC                 |
| <i>ra jock itch max st external aerosol powder 1 %</i>             | Odor Eaters Foot/Sneaker Spray | OTC                 |
| <i>sb anti-fungal external cream 1 %</i>                           | Tinactin                       | OTC                 |
| <i>sm antifungal tolnaftate external cream 1 %</i>                 | Tinactin                       | OTC                 |
| <i>sm athletes foot external cream 1 %</i>                         | LamISIL AT                     | OTC                 |
| <i>terbinafine hcl external cream 1 %</i>                          | LamISIL AT                     | OTC                 |
| <i>tgt antifungal external cream 1 %</i>                           | Tinactin                       | OTC                 |
| <i>tgt antifungal spray powder external aerosol powder 1 %</i>     | Odor Eaters Foot/Sneaker Spray | OTC                 |
| <i>tgt athletes foot external cream 1 %</i>                        | LamISIL AT                     | OTC                 |



| <b>Formulary Drug Name</b>                                    | <b>Reference</b>               | <b>Restrictions</b> |
|---|--------------------------------|---------------------|
| <i>tolnaftate external aerosol powder 1 %</i>                 | Odor Eaters Foot/Sneaker Spray | OTC                 |
| <i>tolnaftate external cream 1 %</i>                          | Tinactin                       | OTC                 |
| <i>tolnaftate external powder 1 %</i>                         | Odor Eaters Antifungal         | OTC                 |
| <b>*Antihistamines - Topical***</b>                           |                                |                     |
| <i>anti-itch maximum strength external solution 2 %</i>       | The Itch Eraser                | OTC                 |
| <i>benadryl itch stopping external gel 2 %</i>                | Benadryl Itch Stopping         | OTC                 |
| <i>cvs itch relief external gel 2 %</i>                       | Benadryl Itch Stopping         | OTC                 |
| <i>itch relief external cream 2 %</i>                         |                                | OTC                 |
| <i>ra anti-itch extra strength external gel 2 %</i>           | Benadryl Itch Stopping         | OTC                 |
| <i>sb itch relief max st external solution 2 %</i>            | The Itch Eraser                | OTC                 |
| <i>the itch eraser external gel 2 %</i>                       | Benadryl Itch Stopping         | OTC                 |
| <i>the itch eraser external solution 2 %</i>                  | The Itch Eraser                | OTC                 |
| <b>*Antihistamine-Topical Combinations***</b>                 |                                |                     |
| <i>anti-itch external cream 1-0.1 %</i>                       | Benadryl Itch Stopping         | OTC                 |
| <i>anti-itch external cream 2-0.1 %</i>                       | Banophen                       | OTC                 |
| <i>banophen external cream 2-0.1 %</i>                        | Banophen                       | OTC                 |
| <b>BENADRYL EXTRA STRENGTH EXTERNAL CREAM 2-0.1 %</b>         | anti-itch                      | OTC                 |
| <b>BENADRYL ITCH RELIEF EXTERNAL STICK 2-0.1 %</b>            |                                | OTC                 |
| <b>BENADRYL ITCH STOPPING EXTERNAL CREAM 1-0.1 %</b>          | anti-itch                      | OTC                 |
| <i>cvs instant itch relief external liquid 2-0.1 %</i>        | Wal-Dryl Anti-Itch             | OTC                 |
| <i>cvs itch relief external cream 1-0.1 %</i>                 | Benadryl Itch Stopping         | OTC                 |
| <i>cvs itch relief max st external liquid 2-0.1 %</i>         | Wal-Dryl Anti-Itch             | OTC                 |
| <i>diphenhydramine-zinc acetate external cream 2-0.1 %</i>    | Banophen                       | OTC                 |
| <i>eq anti-itch extra strength external cream 2-0.1 %</i>     | Banophen                       | OTC                 |
| <i>gnp anti-itch external cream 2-0.1 %</i>                   | Banophen                       | OTC                 |
| <i>gnp itch relief extra strength external liquid 2-0.1 %</i> | Wal-Dryl Anti-Itch             | OTC                 |
| <i>itch relief extra strength external cream 2-0.1 %</i>      | Banophen                       | OTC                 |
| <i>qc anti-itch extra strength external cream 2-0.1 %</i>     | Banophen                       | OTC                 |
| <i>ra allergy external cream 2-0.1 %</i>                      | Banophen                       | OTC                 |

| <b>Formulary Drug Name</b>                                   | <b>Reference</b>          | <b>Restrictions</b>       |
|--|---------------------------|---------------------------|
| <i>ra anti-itch extra strength external liquid 2-0.1 %</i>   | Wal-Dryl Anti-Itch        | OTC                       |
| <i>sb anti-itch maximum strength external cream 2-0.1 %</i>  | Banophen                  | OTC                       |
| <i>sm anti-itch extra strength external cream 2-0.1 %</i>    | Banophen                  | OTC                       |
| <i>tgt itch relief extra strength external cream 2-0.1 %</i> | Banophen                  | OTC                       |
| <i>wal-dryl anti-itch external liquid 2-0.1 %</i>            | Wal-Dryl Anti-Itch        | OTC                       |
| <i>wal-dryl external cream 2-0.1 %</i>                       | Banophen                  | OTC                       |
| <b>*Anti-Inflammatory Agents - Topical***</b>                |                           |                           |
| <i>diclofenac sodium external gel 1 %</i>                    | Aspercreme Arthritis Pain |                           |
| <i>diclofenac sodium transdermal solution 1.5 %</i>          |                           | ST; QLL (10 ML per 1 day) |
| <b>*Antineoplastic Antimetabolites - Topical***</b>          |                           |                           |
| <i>fluorouracil external cream 5 %</i>                       | Efudex                    |                           |
| <i>fluorouracil external solution 2 %, 5 %</i>               |                           |                           |
| <b>*Antipruritic Combinations - Topical***</b>               |                           |                           |
| <i>anti-itch external lotion 0.5-0.5 %</i>                   | Sarna                     | OTC                       |
| <i>cvs anti-itch external lotion 0.5-0.5 %</i>               | Sarna                     | OTC                       |
| <i>gnp anti-itch external lotion 0.5-0.5 %</i>               | Sarna                     | OTC                       |
| <i>men-phor external lotion 0.5-0.5 %</i>                    | Sarna                     | OTC                       |
| <b>SARNA EXTERNAL LOTION 0.5-0.5 %</b>                       | anti-itch                 | OTC                       |
| <b>*Antipsoriatics***</b>                                    |                           |                           |
| <i>calcipotriene external cream 0.005 %</i>                  |                           |                           |
| <i>calcipotriene external ointment 0.005 %</i>               | Calcitrene                |                           |
| <i>calcipotriene external solution 0.005 %</i>               |                           |                           |
| <i>calcitrene external ointment 0.005 %</i>                  | Calcitrene                |                           |
| <i>tazarotene external cream 0.1 %</i>                       | Tazorac                   | ST; AL (Max 18 Years)     |
| <b>*Antiseborrheic Combinations***</b>                       |                           |                           |
| <i>ala seb external shampoo 2-2 %</i>                        |                           | OTC                       |
| <b>DERMAZINC CREAM EXTERNAL CREAM</b>                        |                           | OTC                       |
| <i>sebex external shampoo 2-2 %</i>                          |                           | OTC                       |
| <b>SEBULEX EXTERNAL SHAMPOO 2-2 %</b>                        | sebex                     | OTC                       |
| <b>*Antiseborrheic Products***</b>                           |                           |                           |
| <i>anti-dandruff external shampoo 1 %</i>                    | Selsun Blue               | OTC                       |

| <b>Formulary Drug Name</b>                                     | <b>Reference</b>            | <b>Restrictions</b> |
|--|-----------------------------|---------------------|
| <i>beta med external shampoo 2 %</i>                           | DermaZinc Shampoo           | OTC                 |
| <i>cvs anti-dandruff external lotion 1 %</i>                   | Selsun Blue                 | OTC                 |
| <i>cvs dandruff everyday clean external shampoo 1 %</i>        | Selsun Blue Dry Scalp       | OTC                 |
| <i>dandruff 2 in 1 external shampoo 1 %</i>                    | Selsun Blue Dry Scalp       | OTC                 |
| <i>dandruff dry scalp care external shampoo 1 %</i>            | Selsun Blue Dry Scalp       | OTC                 |
| <i>dandruff everyday clean external shampoo 1 %</i>            | Selsun Blue Dry Scalp       | OTC                 |
| <i>dandruff shampoo external lotion 1 %</i>                    | Selsun Blue                 | OTC                 |
| <i>dandruff shampoo external shampoo 1 %</i>                   | Selsun Blue Dry Scalp       | OTC                 |
| <i>dermazinc shampoo external shampoo 2 %</i>                  | DermaZinc Shampoo           | OTC                 |
| <b>DERMAZINC SPRAY EXTERNAL LIQUID 0.25 %</b>                  |                             | OTC                 |
| <b>DERMAZINC ZINC THERAPY SOAP EXTERNAL BAR 2 %</b>            |                             | OTC                 |
| <b>DHS ZINC EXTERNAL SHAMPOO 2 %</b>                           | beta med                    | OTC                 |
| <i>eql dry scalp 2 in 1 external shampoo 1 %</i>               | Selsun Blue Dry Scalp       | OTC                 |
| <i>eql everyday clean 2 in 1 external shampoo 1 %</i>          | Selsun Blue Dry Scalp       | OTC                 |
| <i>eql everyday clean external shampoo 1 %</i>                 | Selsun Blue Dry Scalp       | OTC                 |
| <i>eql itchy scalp 2 in 1 external shampoo 1 %</i>             | Selsun Blue Dry Scalp       | OTC                 |
| <i>eql medicated dandruff external lotion 1 %</i>              | Selsun Blue                 | OTC                 |
| <i>eql smooth spice 2 in 1 external shampoo 1 %</i>            | Selsun Blue Dry Scalp       | OTC                 |
| <b>HEAD &amp; SHOULDERS 2 IN 1 EXTERNAL SHAMPOO 1 %</b>        | cvs dandruff everyday clean | OTC                 |
| <b>HEAD &amp; SHOULDERS CLASSIC CLEAN EXTERNAL SHAMPOO 1 %</b> | cvs dandruff everyday clean | OTC                 |
| <b>HEAD &amp; SHOULDERS DRY 2 IN 1 EXTERNAL SHAMPOO 1 %</b>    | cvs dandruff everyday clean | OTC                 |
| <i>neutrogena t/gel daily control external shampoo 1 %</i>     | Selsun Blue Dry Scalp       | OTC                 |
| <b>NOBLE FORMULA EXTERNAL BAR 2 %</b>                          |                             | OTC                 |
| <i>noble formula external liquid 0.25 %</i>                    |                             | OTC                 |
| <i>noble formula external shampoo 2 %</i>                      | DermaZinc Shampoo           | OTC                 |
| <i>ra dandruff shampoo external lotion 1 %</i>                 | Selsun Blue                 | OTC                 |
| <i>ra dandruff shampoo external shampoo 1 %</i>                | Selsun Blue Dry Scalp       | OTC                 |
| <i>ra renewal dandruff external shampoo 1 %</i>                | Selsun Blue                 | OTC                 |
| <i>selenium sulfide external lotion 2.5 %</i>                  |                             |                     |
| <b>SELSUN BLUE DAILY EXTERNAL LOTION 1 %</b>                   | anti-dandruff               | OTC                 |

| <b>Formulary Drug Name</b>                              | <b>Reference</b>      | <b>Restrictions</b> |
|---|-----------------------|---------------------|
| <i>selsun blue dry scalp external shampoo 1 %</i>       | Selsun Blue Dry Scalp | OTC                 |
| <b>SELSUN BLUE EXTERNAL LOTION 1 %</b>                  | anti-dandruff         | OTC                 |
| <b>SELSUN BLUE MEDICATED EXTERNAL LOTION 1 %</b>        | anti-dandruff         | OTC                 |
| <b>SELSUN BLUE MOISTURIZING EXTERNAL LOTION 1 %</b>     | anti-dandruff         | OTC                 |
| <i>selsun blue salon external shampoo 1 %</i>           | Selsun Blue Dry Scalp | OTC                 |
| <i>sm dandruff 2 in 1 external shampoo 1 %</i>          | Selsun Blue Dry Scalp | OTC                 |
| <i>sm dandruff shampoo external shampoo 1 %</i>         | Selsun Blue Dry Scalp | OTC                 |
| <i>theraplex z external shampoo 2 %</i>                 | DermaZinc Shampoo     | OTC                 |
| <i>zincon dandruff external shampoo 1 %</i>             | Selsun Blue Dry Scalp | OTC                 |
| <b>*Antivirals - Topical***</b>                         |                       |                     |
| <b>ABREVA EXTERNAL CREAM 10 %</b>                       | docosanol             | OTC                 |
| <i>acyclovir external ointment 5 %</i>                  | Zovirax               |                     |
| <i>docosanol external cream 10 %</i>                    | Abreva                | OTC                 |
| <b>*Astringents***</b>                                  |                       |                     |
| <i>a.e.r. traveler external pad</i>                     | A.E.R. Traveler       | OTC                 |
| <i>a.e.r. witch hazel external pad</i>                  | A.E.R. Traveler       | OTC                 |
| <i>alum sulfate-ca acetate external packet</i>          | Domeboro              | OTC                 |
| <i>baby diaper rash external cream 13 %</i>             | Desitin               | OTC                 |
| <i>boro-packs external packet 49-51 %</i>               | Domeboro              | OTC                 |
| <b>BOUDREAUXS BUTT PASTE EXTERNAL OINTMENT 16 %</b>     |                       | OTC                 |
| <i>boudreauxs butt paste external ointment 40 %</i>     | Boudreauxs Butt Paste | OTC                 |
| <b>CALAMINE EXTERNAL LOTION</b>                         |                       | OTC                 |
| <b>CALAMINE PHENOLATED EXTERNAL LOTION</b>              |                       | OTC                 |
| <i>cvs astringent solution external packet</i>          | Domeboro              | OTC                 |
| <i>cvs diaper rash external ointment 40 %</i>           | Boudreauxs Butt Paste | OTC                 |
| <i>cvs hygienic cleansing external pad</i>              | A.E.R. Traveler       | OTC                 |
| <i>cvs quick relief diaper rash external cream 13 %</i> | Desitin               | OTC                 |
| <i>cvs zinc oxide external ointment 20 %</i>            | Medpura Zinc Oxide    | OTC                 |
| <i>desitin daily defense external cream 13 %</i>        | Desitin               | OTC                 |
| <i>desitin external cream 13 %</i>                      | Desitin               | OTC                 |
| <i>desitin rapid relief external cream 13 %</i>         | Desitin               | OTC                 |
| <i>diaper rash external cream 10 %</i>                  | Secura Protective     | OTC                 |
| <i>diaper rash external ointment 40 %</i>               | Boudreauxs Butt Paste | OTC                 |

| <b>Formulary Drug Name</b>                                | <b>Reference</b>        | <b>Restrictions</b> |
|---|-------------------------|---------------------|
| <b>DOMEBORO EXTERNAL PACKET</b>                           | boro-packs              | OTC                 |
| <b>DR SMITHS ADULT BARRIER EXTERNAL AEROSOL 10 %</b>      |                         | OTC                 |
| <b>DR SMITHS DIAPER EXTERNAL OINTMENT 10 %</b>            |                         | OTC                 |
| <b>DR SMITHS DIAPER RASH EXTERNAL AEROSOL 10 %</b>        |                         | OTC                 |
| <b>DR SMITHS RASH + SKIN EXTERNAL AEROSOL 10 %</b>        |                         | OTC                 |
| <i>eql baby basics diaper rash external ointment 40 %</i> | Boudreauxs Butt Paste   | OTC                 |
| <b>GNP CALAMINE PHENOLATED EXTERNAL LOTION</b>            |                         | OTC                 |
| <i>gnp diaper rash creamy external ointment 10 %</i>      | Dr Smiths Adult Barrier | OTC                 |
| <i>gnp diaper rash external cream 13 %</i>                | Desitin                 | OTC                 |
| <i>gnp zinc oxide external ointment 20 %</i>              | Medpura Zinc Oxide      | OTC                 |
| <b>HUGGIES DIAPER RASH EXTERNAL CREAM 10 %</b>            | diaper rash             | OTC                 |
| <i>hygienic cleansing external pad 50 %</i>               | A.E.R. Traveler         | OTC                 |
| <i>medi pads external pad 50-10 %</i>                     | A.E.R. Traveler         | OTC                 |
| <i>meijer zinc oxide external ointment 20 %</i>           | Medpura Zinc Oxide      | OTC                 |
| <i>pedi-boro soak external packet</i>                     | Domeboro                | OTC                 |
| <b>PHARMABASE BARRIER EXTERNAL OINTMENT 9.38 %</b>        |                         | OTC                 |
| <b>QC CALAMINE EXTERNAL LOTION</b>                        |                         | OTC                 |
| <i>ra diaper rash external ointment 40 %</i>              | Boudreauxs Butt Paste   | OTC                 |
| <i>ra hemorrhoidal medicated external pad 50 %</i>        | A.E.R. Traveler         | OTC                 |
| <i>ra zinc oxide external ointment 20 %</i>               | Medpura Zinc Oxide      | OTC                 |
| <i>sb hemorrhoid external pad</i>                         | A.E.R. Traveler         | OTC                 |
| <i>secura protective external cream 10 %</i>              | Secura Protective       | OTC                 |
| <b>SKIN PROTECTANT EXTERNAL CREAM 12 %</b>                |                         | OTC                 |
| <b>SM CALAMINE PHENOLATED EXTERNAL LOTION</b>             |                         | OTC                 |
| <i>sm hygienic cleansing external pad 50 %</i>            | A.E.R. Traveler         | OTC                 |
| <i>tippy toes diaper rash external ointment 40 %</i>      | Boudreauxs Butt Paste   | OTC                 |
| <i>zinc oxide external ointment 20 %</i>                  | Medpura Zinc Oxide      | OTC                 |
| <i>zinc oxide external ointment 40 %</i>                  | Boudreauxs Butt Paste   | OTC                 |
| <b>ZINC OXIDE EXTERNAL PASTE 25 %</b>                     |                         | OTC                 |

| Formulary Drug Name   | Reference               | Restrictions                  |
|---|-------------------------|-------------------------------|
| <b>*Atopic Dermatitis - Monoclonal Antibodies***</b>                  |                         |                               |
| <b>DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR 200 MG/1.14ML</b>      |                         | PA; QLL (1.71 ML per 14 days) |
| <b>DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 MG/2ML</b>         |                         | PA; QLL (2 ML per 14 days)    |
| <b>DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.67ML</b> |                         | PA; QLL (2.01 ML per 14 days) |
| <b>DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/1.14ML</b> |                         | PA; QLL (1.71 ML per 14 days) |
| <b>DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/2ML</b>    |                         | PA; QLL (2 ML per 14 days)    |
| <b>*Burn Products***</b>  |                         |                               |
| <i>silver sulfadiazine external cream 1 %</i>                         | SSD                     |                               |
| <i>ssd external cream 1 %</i>   | SSD                     |                               |
| <b>*Corticosteroids - Topical***</b>                                  |                         |                               |
| <i>ala-cort external cream 1 %</i>                                    | Aveeno Anti-Itch Max St |                               |
| <i>ala-cort external cream 2.5 %</i>                                  |                         |                               |
| <i>alclometasone dipropionate external cream 0.05 %</i>               |                         |                               |
| <i>alclometasone dipropionate external ointment 0.05 %</i>            |                         |                               |
| <i>anti-itch intensive healing external lotion 1 %</i>                | Aquanil HC              | OTC                           |
| <i>anti-itch maximum strength external cream 1 %</i>                  | Aveeno Anti-Itch Max St | OTC                           |
| <i>aquanil hc external lotion 1 %</i>                                 | Aquanil HC              | OTC                           |
| <i>aveeno anti-itch max st external cream 1 %</i>                     | Aveeno Anti-Itch Max St | OTC                           |
| <i>beta hc external lotion 1 %</i>                                    | Aquanil HC              | OTC                           |
| <i>betamethasone dipropionate aug external cream 0.05 %</i>           |                         | QLL (50 GM per 30 days)       |
| <i>betamethasone dipropionate aug external gel 0.05 %</i>             |                         |                               |
| <i>betamethasone dipropionate aug external lotion 0.05 %</i>          |                         |                               |
| <i>betamethasone dipropionate aug external ointment 0.05 %</i>        | Diprolene               |                               |



| <b>Formulary Drug Name</b>                                  | <b>Reference</b>            | <b>Restrictions</b>      |
|---|-----------------------------|--------------------------|
| <i>betamethasone dipropionate external cream 0.05 %</i>     |                             | QLL (60 GM per 30 days)  |
| <i>betamethasone dipropionate external lotion 0.05 %</i>    |                             | QLL (120 ML per 30 days) |
| <i>betamethasone dipropionate external ointment 0.05 %</i>  |                             | QLL (60 GM per 30 days)  |
| <i>betamethasone valerate external cream 0.1 %</i>          |                             |                          |
| <i>betamethasone valerate external lotion 0.1 %</i>         |                             |                          |
| <i>betamethasone valerate external ointment 0.1 %</i>       |                             |                          |
| <i>clobetasol propionate e external cream 0.05 %</i>        |                             |                          |
| <i>clobetasol propionate external cream 0.05 %</i>          |                             |                          |
| <i>clobetasol propionate external gel 0.05 %</i>            |                             |                          |
| <i>clobetasol propionate external ointment 0.05 %</i>       |                             |                          |
| <i>clobetasol propionate external solution 0.05 %</i>       |                             |                          |
| <i>cortaid maximum strength external cream 1 %</i>          | Aveeno Anti-Itch Max St     | OTC                      |
| <i>cortizone-10 diabetics skin external lotion 1 %</i>      | Aquanil HC                  | OTC                      |
| <i>cortizone-10 eczema external lotion 1 %</i>              | Aquanil HC                  | OTC                      |
| <i>cortizone-10 external gel 1 %</i>                        |                             | OTC                      |
| <i>cortizone-10 external ointment 1 %</i>                   | Cortizone-10                | OTC                      |
| <i>cortizone-10 hydratensive external lotion 1 %</i>        | Aquanil HC                  | OTC                      |
| <i>cortizone-10 intensive healing external cream 1 %</i>    | Aveeno Anti-Itch Max St     | OTC                      |
| <i>cortizone-10 plus external cream 1 %</i>                 | Aveeno Anti-Itch Max St     | OTC                      |
| <i>cortizone-10/aloe external cream 1 %</i>                 | Aveeno Anti-Itch Max St     | OTC                      |
| <i>cvs anti-itch maximum strength external cream 1 %</i>    | Aveeno Anti-Itch Max St     | OTC                      |
| <i>cvs cortisone intense healing external cream 1 %</i>     | Aveeno Anti-Itch Max St     | OTC                      |
| <i>cvs cortisone maximum strength external cream 1 %</i>    | Aveeno Anti-Itch Max St     | OTC                      |
| <i>cvs cortisone maximum strength external ointment 1 %</i> | Cortizone-10                | OTC                      |
| <i>cvs eczema anti-itch external cream 1 %</i>              | Aveeno Anti-Itch Max St     | OTC                      |
| <i>cvs hydrocortisone anti-itch external cream 1 %</i>      | Aveeno Anti-Itch Max St     | OTC                      |
| <i>cvs hydrocortisone max st external cream 1 %</i>         | Aveeno Anti-Itch Max St     | OTC                      |
| <i>dermarest eczema external lotion 1 %</i>                 | Aquanil HC                  | OTC                      |
| <b>DERMA-SMOOTH/FS BODY EXTERNAL OIL 0.01 %</b>             | fluocinolone acetonide body | QLL (120 ML per 30 days) |



| <b>Formulary Drug Name</b>                                  | <b>Reference</b>        | <b>Restrictions</b>      |
|---|-------------------------|--------------------------|
| <i>eq hydrocortisone max st external cream 1 %</i>          | Aveeno Anti-Itch Max St | OTC                      |
| <i>eq hydrocortisone plus external cream 1 %</i>            | Aveeno Anti-Itch Max St | OTC                      |
| <i>eql anti-itch intensive heal external cream 1 %</i>      | Aveeno Anti-Itch Max St | OTC                      |
| <i>eql anti-itch maximum strength external cream 1 %</i>    | Aveeno Anti-Itch Max St | OTC                      |
| <i>eql anti-itch maximum strength external ointment 1 %</i> | Cortizone-10            | OTC                      |
| <i>fluocinolone acetonide body external oil 0.01 %</i>      | Derma-Smoothe/FS Body   | QLL (120 ML per 30 days) |
| <i>fluocinolone acetonide external cream 0.025 %</i>        | Synalar                 | QLL (60 GM per 30 days)  |
| <i>fluocinolone acetonide external ointment 0.025 %</i>     | Synalar                 | QLL (60 GM per 30 days)  |
| <b>FLUOCINOLONE ACETONIDE POWDER</b>                        |                         |                          |
| <i>fluocinonide external cream 0.05 %</i>                   |                         | QLL (60 GM per 30 days)  |
| <i>fluocinonide external cream 0.1 %</i>                    | Vanos                   | QLL (120 GM per 30 days) |
| <i>fluocinonide external gel 0.05 %</i>                     |                         |                          |
| <i>fluticasone propionate external cream 0.05 %</i>         |                         |                          |
| <i>fluticasone propionate external ointment 0.005 %</i>     |                         |                          |
| <i>gnp hydrocortisone external cream 0.5 %</i>              |                         | OTC                      |
| <i>gnp hydrocortisone max st external ointment 1 %</i>      | Cortizone-10            | OTC                      |
| <i>gnp hydrocortisone plus external cream 1 %</i>           | Aveeno Anti-Itch Max St | OTC                      |
| <i>gnp hydrocortisone/aloe external cream 1 %</i>           | Aveeno Anti-Itch Max St | OTC                      |
| <i>gynecort 10 external cream 1 %</i>                       |                         | OTC                      |
| <i>halobetasol propionate external cream 0.05 %</i>         |                         |                          |
| <i>hm hydrocortisone plus external cream 1 %</i>            | Aveeno Anti-Itch Max St | OTC                      |
| <i>hm hydrocortisone-aloe max st external cream 1 %</i>     | Aveeno Anti-Itch Max St | OTC                      |
| <i>hydrocortisone acetate external ointment 1 %</i>         |                         | OTC                      |
| <b>HYDROCORTISONE ACETATE POWDER</b>                        |                         |                          |
| <i>hydrocortisone external cream 0.5 %</i>                  |                         | OTC                      |
| <i>hydrocortisone external cream 1 %</i>                    | Aveeno Anti-Itch Max St |                          |
| <i>hydrocortisone external cream 2.5 %</i>                  |                         |                          |
| <i>hydrocortisone external lotion 1 %</i>                   | Aquanil HC              | OTC                      |
| <i>hydrocortisone external lotion 2.5 %</i>                 |                         |                          |
| <i>hydrocortisone external ointment 0.5 %</i>               |                         | OTC                      |
| <i>hydrocortisone external ointment 1 %</i>                 | Cortizone-10            |                          |

| <b>Formulary Drug Name</b>                                 | <b>Reference</b>        | <b>Restrictions</b>     |
|--|-------------------------|-------------------------|
| <i>hydrocortisone external ointment 2.5 %</i>              |                         |                         |
| <i>hydrocortisone intensive heal external cream 1 %</i>    | Aveeno Anti-Itch Max St | OTC                     |
| <i>hydrocortisone max st external cream 1 %</i>            | Aveeno Anti-Itch Max St | OTC                     |
| <i>hydrocortisone max st/12 moist external cream 1 %</i>   | Aveeno Anti-Itch Max St | OTC                     |
| <i>hydrocortisone plus external cream 1 %</i>              | Aveeno Anti-Itch Max St | OTC                     |
| <i>hydroskin external lotion 1 %</i>                       | Aquanil HC              | OTC                     |
| <i>instacort 5 external cream 0.5 %</i>                    |                         | OTC                     |
| <i>kericort 10 external cream 1 %</i>                      | Aveeno Anti-Itch Max St | OTC                     |
| <i>kls hydrocortisone plus external cream 1 %</i>          | Aveeno Anti-Itch Max St | OTC                     |
| <i>kp hydrocortisone external cream 1 %</i>                | Aveeno Anti-Itch Max St | OTC                     |
| <i>kp hydrocortisone max st external ointment 1 %</i>      | Cortizone-10            | OTC                     |
| <i>kp hydrocortisone-aloe external cream 0.5 %</i>         |                         | OTC                     |
| <i>lanacort 10 external cream 1 %</i>                      |                         | OTC                     |
| <i>meijer hydrocortisone external cream 1 %</i>            | Aveeno Anti-Itch Max St | OTC                     |
| <i>mg217 psoriasis anit-itch external gel 1 %</i>          |                         | OTC                     |
| <i>mometasone furoate external cream 0.1 %</i>             |                         |                         |
| <i>mometasone furoate external ointment 0.1 %</i>          |                         |                         |
| <i>mometasone furoate external solution 0.1 %</i>          |                         |                         |
| <i>noble formula hc external cream 1 %</i>                 | Aveeno Anti-Itch Max St | OTC                     |
| <i>prednicarbate external ointment 0.1 %</i>               |                         | QLL (60 GM per 30 days) |
| <i>preparation h external cream 1 %</i>                    | Aveeno Anti-Itch Max St | OTC                     |
| <i>px hydrocream external cream 1 %</i>                    | Aveeno Anti-Itch Max St | OTC                     |
| <i>qc hydrocortisone external cream 1 %</i>                | Aveeno Anti-Itch Max St | OTC                     |
| <i>qc hydrocortisone max st external cream 1 %</i>         | Aveeno Anti-Itch Max St | OTC                     |
| <i>ra anti-itch maximum strength external cream 1 %</i>    | Aveeno Anti-Itch Max St | OTC                     |
| <i>ra anti-itch maximum strength external ointment 1 %</i> | Cortizone-10            | OTC                     |
| <i>ra hydrocortisone max st external cream 1 %</i>         | Aveeno Anti-Itch Max St | OTC                     |
| <i>ra hydrocortisone plus 12 external cream 1 %</i>        | Aveeno Anti-Itch Max St | OTC                     |
| <i>ra hydrocortisone plus external cream 1 %</i>           | Aveeno Anti-Itch Max St | OTC                     |
| <i>recort plus external cream 1 %</i>                      | Aveeno Anti-Itch Max St | OTC                     |
| <i>sarnol-hc external lotion 1 %</i>                       | Aquanil HC              | OTC                     |
| <i>sb hydrocortisone external cream 1 %</i>                | Aveeno Anti-Itch Max St | OTC                     |
| <i>sb hydrocortisone max st external ointment 1 %</i>      | Cortizone-10            | OTC                     |
| <i>sb hydrocortisone plus external cream 1 %</i>           | Aveeno Anti-Itch Max St | OTC                     |

| <b>Formulary Drug Name</b>   | <b>Reference</b>        | <b>Restrictions</b> |
|--|-------------------------|---------------------|
| <i>sm hydrocortisone external cream 0.5 %</i>                            |                         | OTC                 |
| <i>sm hydrocortisone external cream 1 %</i>                              | Aveeno Anti-Itch Max St | OTC                 |
| <i>sm hydrocortisone external ointment 0.5 %</i>                         |                         | OTC                 |
| <i>sm hydrocortisone max st external ointment 1 %</i>                    | Cortizone-10            | OTC                 |
| <i>sm hydrocortisone plus external cream 1 %</i>                         | Aveeno Anti-Itch Max St | OTC                 |
| <i>sm hydrocortisone-aloe max st external cream 1 %</i>                  | Aveeno Anti-Itch Max St | OTC                 |
| <i>tgt anti-itch plus oatmeal external cream 1 %</i>                     | Aveeno Anti-Itch Max St | OTC                 |
| <i>tgt anti-itch/aloe max st external cream 1 %</i>                      | Aveeno Anti-Itch Max St | OTC                 |
| <i>tgt anti-itch/aloe/vit e external cream 1 %</i>                       | Aveeno Anti-Itch Max St | OTC                 |
| <i>triamcinolone acetamide external cream 0.025 % , 0.1 %</i>            |                         |                     |
| <i>triamcinolone acetamide external cream 0.5 %</i>                      | Triderm                 |                     |
| <i>triamcinolone acetamide external lotion 0.025 % , 0.1 %</i>           |                         |                     |
| <i>triamcinolone acetamide external ointment 0.025 % , 0.1 % , 0.5 %</i> |                         |                     |
| <i>triamcinolone acetamide external ointment 0.05 %</i>                  | Trianex                 |                     |
| <b>*Diaper Rash Products***</b>  |                         |                     |
| <b>A+D DIAPER RASH EXTERNAL CREAM</b>                                    | cvs diaper              | OTC                 |
| <b>BENSONS BOTTOM PAINT EXTERNAL CREAM</b>                               | cvs diaper              | OTC                 |
| <i>cvs all-purpose skin protect external ointment</i>                    | Flanders Buttocks       | OTC                 |
| <i>cvs pediatric ointment external ointment</i>                          | Flanders Buttocks       | OTC                 |
| <b>DR BOLDTS HINEY HEALER EXTERNAL CREAM</b>                             | cvs diaper              | OTC                 |
| <i>flanders buttocks external ointment</i>                               | Flanders Buttocks       | OTC                 |
| <i>medi-paste external ointment</i>                                      | Flanders Buttocks       | OTC                 |
| <i>paladin external ointment</i>   | Flanders Buttocks       | OTC                 |
| <i>pinxav external ointment</i>  | Flanders Buttocks       | OTC                 |
| <b>*Emollient Combinations***</b>  |                         |                     |
| <b>MINERAL OIL-HYDROPHIL PETROLAT EXTERNAL OINTMENT</b>                  |                         | OTC                 |
| <b>*Emollient/Keratolytic Agents***</b>                                  |                         |                     |
| <i>aqua care external cream 10 %</i>                                     |                         | OTC                 |
| <i>aqua care external lotion 10 %</i>                                    | Aqua Care               | OTC                 |

| <b>Formulary Drug Name</b>                               | <b>Reference</b>         | <b>Restrictions</b> |
|--|--------------------------|---------------------|
| <b>AQUAPHILIC/CARBAMIDE EXTERNAL OINTMENT 10 %, 20 %</b> |                          | OTC                 |
| <i>beta care betamide external lotion 25 %</i>           |                          | OTC                 |
| <b>CEROVEL EXTERNAL LOTION 40 %</b>                      | urea                     |                     |
| <i>gormel 10 external lotion 10 %</i>                    | Aqua Care                | OTC                 |
| <i>gormel external cream 20 %</i>                        |                          | OTC                 |
| <b>LANAPHILIC/UREA EXTERNAL OINTMENT 10 %, 20 %</b>      |                          | OTC                 |
| <i>nutraplus external cream 10 %</i>                     |                          | OTC                 |
| <i>nutraplus external lotion 10 %</i>                    | Aqua Care                | OTC                 |
| <b>ULTRA MIDE 25 EXTERNAL LOTION 25 %</b>                |                          | OTC                 |
| <i>urea 20 intensive hydrating external cream 20 %</i>   |                          | OTC                 |
| <i>urea external cream 39 %</i>                          | Uredeb                   |                     |
| <i>urea external lotion 40 %</i>                         | Cerovel                  |                     |
| <i>ureacin-10 external lotion 10 %</i>                   | Aqua Care                | OTC                 |
| <i>ureacin-20 external cream 20 %</i>                    |                          | OTC                 |
| <b>*Emollients***</b>                                    |                          |                     |
| <i>a+d prevent external ointment</i>                     | Medpura Vitamin A & D    | OTC                 |
| <i>advanced healing/baby external ointment</i>           | Hydrolatum               | OTC                 |
| <i>al12 external lotion 12 %</i>                         | AL12                     | OTC                 |
| <i>amlactin external lotion 12 %</i>                     | AL12                     | OTC                 |
| <i>ammonium lactate external cream 12 %</i>              |                          |                     |
| <i>ammonium lactate external lotion 12 %</i>             | AL12                     |                     |
| <i>baby vitamin a &amp; d external ointment</i>          | Medpura Vitamin A & D    | OTC                 |
| <i>beauty lotion external lotion</i>                     | DML                      | OTC                 |
| <i>cocoa butter skin external cream</i>                  | AmLactin Ultra Smoothing | OTC                 |
| <i>collagen external cream</i>                           | AmLactin Ultra Smoothing | OTC                 |
| <i>complete moisture external lotion</i>                 | DML                      | OTC                 |
| <i>cvs advanced healing external ointment</i>            | Hydrolatum               | OTC                 |
| <i>cvs dry skin care external lotion</i>                 | DML                      | OTC                 |
| <i>cvs extra moisturizing external lotion</i>            | DML                      | OTC                 |
| <i>cvs gentle skin cleanser external lotion</i>          | DML                      | OTC                 |
| <i>cvs hydrating skin treatment external lotion 12 %</i> | AL12                     | OTC                 |
| <b>CVS MOISTURIZING EXTERNAL CREAM</b>                   |                          | OTC                 |
| <i>cvs moisturizing external lotion</i>                  | DML                      | OTC                 |
| <i>cvs moisturizing extra dry external cream</i>         | AmLactin Ultra Smoothing | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b>          | <b>Restrictions</b> |
|---|---------------------------|---------------------|
| <i>cvs pure glycerin external liquid 99.5 %</i>                       |                           | OTC                 |
| <i>cvs skin treatment external lotion 12 %</i>                        | AL12                      | OTC                 |
| <i>cvs special care external lotion</i>                               | DML                       | OTC                 |
| <i>cvs vitamin e external oil 28000 unit/29ml</i>                     |                           | OTC                 |
| <i>cvs vitamin e moisturizing external cream</i>                      | Palmers Natural Vitamin E | OTC                 |
| <i>cvs vitamin e moisturizing external oil</i>                        |                           | OTC                 |
| <i>dermadaily external lotion</i>                                     | DML                       | OTC                 |
| <i>dermaphor external ointment</i>                                    | Hydrolatum                | OTC                 |
| <i>dermavantage external lotion</i>                                   | DML                       | OTC                 |
| <i>dml external lotion</i>  | DML                       | OTC                 |
| <i>dry skin treatment adv therapy external ointment</i>               | Hydrolatum                | OTC                 |
| <i>dry skin treatment external ointment</i>                           | Hydrolatum                | OTC                 |
| <i>e-oil external oil 100 unit/5drop, 30000 unit, 933.333 unit/ml</i> |                           | OTC                 |
| <i>e-ointment external ointment</i>                                   | Hydrolatum                | OTC                 |
| <i>eq vitamins a &amp; d external ointment</i>                        | Medpura Vitamin A & D     | OTC                 |
| <i>eql absolute moisture dry skin external lotion</i>                 | DML                       | OTC                 |
| <i>eql advanced healing external ointment 41 %</i>                    | Hydrolatum                | OTC                 |
| <i>eql advanced recovery external lotion</i>                          | DML                       | OTC                 |
| <i>eql advanced skin therapy external lotion</i>                      | DML                       | OTC                 |
| <i>eql aloe after sun external lotion</i>                             | DML                       | OTC                 |
| <i>eql vitamin e ultra strength external oil 20000 unit</i>           |                           | OTC                 |
| <i>geri-hydrolac 12 external cream 12 %</i>                           |                           | OTC                 |
| <i>geri-hydrolac 12 external lotion 12 %</i>                          | AL12                      | OTC                 |
| <i>geri-hydrolac 5 external lotion 5 %</i>                            |                           | OTC                 |
| <i>glycerin external liquid</i>                                       |                           | OTC                 |
| <i>gnp glycerin external liquid 99.5 %</i>                            |                           | OTC                 |
| <i>gnp vitamin a &amp; d external ointment 15.5-53.4 %</i>            | Medpura Vitamin A & D     | OTC                 |
| <i>gordomatic external lotion</i>                                     | DML                       | OTC                 |
| <b>GORDONS-VITE A EXTERNAL CREAM 100000 UNIT/GM</b>                   |                           | OTC                 |
| <b>GORDONS-VITE A EXTERNAL LOTION 100000 UNIT</b>                     |                           | OTC                 |
| <i>gordons-vite e external cream 1500 unit/30gm</i>                   | Palmers Natural Vitamin E | OTC                 |
| <i>grx vitamin e external cream</i>                                   | Palmers Natural Vitamin E | OTC                 |
| <i>hm glycerin external liquid</i>                                    |                           | OTC                 |
| <i>hydrolatum external ointment</i>                                   | Hydrolatum                | OTC                 |

| <b>Formulary Drug Name</b>                              | <b>Reference</b>           | <b>Restrictions</b> |
|---|----------------------------|---------------------|
| <i>hydrophor external ointment</i>                      | Hydrolatum                 | OTC                 |
| <i>lac-hydrin five external lotion 5 %</i>              |                            | OTC                 |
| <i>lubricating lotion external lotion</i>               | DML                        | OTC                 |
| <i>lubrisilk external lotion</i>                        | DML                        | OTC                 |
| <i>lubriska external lotion</i>                         | DML                        | OTC                 |
| <i>minerin external lotion</i>                          | DML                        | OTC                 |
| <i>moisture external lotion</i>                         | DML                        | OTC                 |
| <i>moisture recovery external lotion</i>                | DML                        | OTC                 |
| <i>moisturizing cream external cream</i>                | AmLactin Ultra Smoothing   | OTC                 |
| <i>moisturizing lotion external lotion</i>              | DML                        | OTC                 |
| <i>moisturizing sensitive skin external lotion</i>      | DML                        | OTC                 |
| <i>qc glycerin external liquid 99.5 %</i>               |                            | OTC                 |
| <i>ra advanced recovery external lotion</i>             | DML                        | OTC                 |
| <i>ra baby care vit a&amp;d to go external ointment</i> | Medpura Vitamin A & D      | OTC                 |
| <i>ra calming daily moisturizing external cream</i>     | AmLactin Ultra Smoothing   | OTC                 |
| <i>ra derma external lotion</i>                         | DML                        | OTC                 |
| <i>ra gentle skin external lotion</i>                   | DML                        | OTC                 |
| <i>ra glycerin external liquid</i>                      |                            | OTC                 |
| <i>ra hydrating healing external ointment</i>           | Hydrolatum                 | OTC                 |
| <i>ra moisturizing oatmeal external lotion</i>          | DML                        | OTC                 |
| <i>ra moisturizing therapy external cream</i>           | AmLactin Ultra Smoothing   | OTC                 |
| <i>ra renewal cocoa butter external lotion</i>          | DML                        | OTC                 |
| <i>ra renewal moisturizing external cream</i>           | AmLactin Ultra Smoothing   | OTC                 |
| <i>ra total moisture external lotion</i>                | DML                        | OTC                 |
| <i>ra vitamin a &amp; d external ointment</i>           | Medpura Vitamin A & D      | OTC                 |
| <i>ra vitamin e external oil 28000 unit, 4000 unit</i>  |                            | OTC                 |
| <i>ra vitamins a &amp; d external ointment</i>          | Medpura Vitamin A & D      | OTC                 |
| <i>refreshing aloe external lotion</i>                  | DML                        | OTC                 |
| <i>saratoga external ointment</i>                       | Hydrolatum                 | OTC                 |
| <i>sm dry skin therapy external lotion</i>              | DML                        | OTC                 |
| <i>sm glycerin external liquid 99.5 %</i>               |                            | OTC                 |
| <b>SUPER E DAY EXTERNAL CREAM</b>                       | cvs vitamin e moisturizing | OTC                 |
| <b>SUPER E EXTERNAL CREAM</b>                           | cvs vitamin e moisturizing | OTC                 |
| <b>SUPER E EYE EXTERNAL CREAM</b>                       | cvs vitamin e moisturizing | OTC                 |
| <b>SUPER E NIGHT EXTERNAL CREAM</b>                     | cvs vitamin e moisturizing | OTC                 |
| <i>thera-derm external lotion</i>                       | DML                        | OTC                 |
| <i>vitamin e beauty external oil 49000 unit/52ml</i>    |                            | OTC                 |
| <i>vitamin e external cream , 30000 unit/60gm</i>       | Palmer's Natural Vitamin E | OTC                 |



| <b>Formulary Drug Name</b>                                     | <b>Reference</b>            | <b>Restrictions</b> |
|--|-----------------------------|---------------------|
| <i>vitamin e external oil 28000 unit</i>                       |                             | OTC                 |
| <i>vitamin e skin external oil , 12000 unit, 56000 unit</i>    |                             | OTC                 |
| <i>vitamins a &amp; d external ointment , 76 %</i>             | Medpura Vitamin A & D       | OTC                 |
| <b>*Imidazole-Related Antifungals - Topical***</b>             |                             |                     |
| <i>anti-fungal external cream 1 %</i>                          | Desenex                     | OTC                 |
| <i>antifungal external cream 2 %</i>                           | Tineacide                   | OTC                 |
| <i>athletes foot external powder 2 %</i>                       | Desenex                     | OTC                 |
| <i>athletes foot powder spray external aerosol powder 2 %</i>  | Cruex Prescription Strength | OTC                 |
| <i>carrington antifungal external cream 2 %</i>                | Tineacide                   | OTC                 |
| <i>clotrimazole af external cream 1 %</i>                      | Desenex                     | OTC                 |
| <i>clotrimazole anti-fungal external cream 1 %</i>             | Desenex                     |                     |
| <i>clotrimazole external cream 1 %</i>                         | Desenex                     |                     |
| <i>clotrimazole external solution 1 %</i>                      |                             |                     |
| <i>cruex prescription strength external aerosol powder 2 %</i> | Cruex Prescription Strength | OTC                 |
| <i>cvs anti-fungal external powder 2 %</i>                     | Desenex                     | OTC                 |
| <i>cvs clotrimazole external cream 1 %</i>                     | Desenex                     | OTC                 |
| <i>cvs itch relief external cream 1 %</i>                      | Desenex                     | OTC                 |
| <i>cvs ringworm external cream 1 %</i>                         | Desenex                     | OTC                 |
| <i>dermafungal external ointment 2 %</i>                       |                             | OTC                 |
| <i>desenex external cream 1 %</i>                              | Desenex                     | OTC                 |
| <i>desenex external powder 2 %</i>                             | Desenex                     | OTC                 |
| <i>desenex jock itch external aerosol powder 2 %</i>           | Cruex Prescription Strength | OTC                 |
| <i>eq antifungal external cream 1 %</i>                        | Desenex                     | OTC                 |
| <i>eq athletes foot external cream 1 %</i>                     | Desenex                     | OTC                 |
| <i>eq athletes foot spray external aerosol powder 2 %</i>      | Cruex Prescription Strength | OTC                 |
| <i>eq jock itch external cream 1 %</i>                         | Desenex                     | OTC                 |
| <i>eql athletes foot external cream 1 %</i>                    | Desenex                     | OTC                 |
| <i>fungicure intensive/nailguard external solution 1 %</i>     |                             | OTC                 |
| <i>gnp athletes foot external cream 1 %</i>                    | Desenex                     | OTC                 |
| <i>gnp miconazole nitrate external aerosol powder 2 %</i>      | Cruex Prescription Strength | OTC                 |
| <i>gnp miconazorb af external powder 2 %</i>                   | Desenex                     | OTC                 |
| <i>jock itch external cream 1 %</i>                            | Desenex                     | OTC                 |
| <i>jock itch relief external cream 1 %</i>                     | Desenex                     | OTC                 |



| <b>Formulary Drug Name</b>                                      | <b>Reference</b>            | <b>Restrictions</b>     |
|---|-----------------------------|-------------------------|
| <i>ketoconazole external cream 2 %</i>                          |                             |                         |
| <i>ketoconazole external shampoo 2 %</i>                        |                             |                         |
| <i>kp miconazole nitrate external cream 2 %</i>                 | Tineacide                   | OTC                     |
| <i>lotrimin af deodorant powder external aerosol powder 2 %</i> | Cruex Prescription Strength | OTC                     |
| <b>LOTRIMIN AF EXTERNAL AEROSOL 2 %</b>                         | cvs athletes foot spray     | OTC                     |
| <i>lotrimin af external powder 2 %</i>                          | Desenex                     | OTC                     |
| <i>lotrimin af jock itch powder external aerosol powder 2 %</i> | Cruex Prescription Strength | OTC                     |
| <i>lotrimin af powder external aerosol powder 2 %</i>           | Cruex Prescription Strength | OTC                     |
| <i>micaderm external cream 2 %</i>                              | Tineacide                   | OTC                     |
| <i>miconazole nitrate external cream 2 %</i>                    | Tineacide                   |                         |
| <i>micro guard external powder 2 %</i>                          | Desenex                     | OTC                     |
| <i>pro-ex antifungal external cream 1 %</i>                     | Desenex                     | OTC                     |
| <i>px athletic foot external cream 1 %</i>                      | Desenex                     | OTC                     |
| <i>qc clotrimazole external cream 1 %</i>                       | Desenex                     | OTC                     |
| <i>ra antifungal external cream 2 %</i>                         | Tineacide                   | OTC                     |
| <i>ra atheletes foot external aerosol powder 2 %</i>            | Cruex Prescription Strength | OTC                     |
| <i>ra athletes foot external cream 1 %</i>                      | Desenex                     | OTC                     |
| <i>ra clotrimazole external cream 1 %</i>                       | Desenex                     | OTC                     |
| <i>ra jock itch external cream 1 %</i>                          | Desenex                     | OTC                     |
| <i>remedy antifungal clear external ointment 2 %</i>            |                             | OTC                     |
| <i>remedy antifungal external cream 2 %</i>                     | Tineacide                   | OTC                     |
| <i>remedy antifungal external powder 2 %</i>                    | Desenex                     | OTC                     |
| <i>remedy phytoplex antifungal external powder 2 %</i>          | Desenex                     | OTC                     |
| <i>sb clotrimazole foot external cream 1 %</i>                  | Desenex                     | OTC                     |
| <i>sm antifungal miconazole external cream 2 %</i>              | Tineacide                   | OTC                     |
| <i>soothe &amp; cool inzo antifungal external cream 2 %</i>     | Tineacide                   | OTC                     |
| <i>tetterine external ointment 2 %</i>                          |                             | OTC                     |
| <i>tgt clotrimazole external cream 1 %</i>                      | Desenex                     | OTC                     |
| <i>tineacide external cream 2 %</i>                             | Tineacide                   | OTC                     |
| <i>triple paste af external ointment 2 %</i>                    |                             | OTC                     |
| <i>zeasorb-af external powder 2 %</i>                           | Desenex                     | OTC                     |
| <b>*Immunomodulators</b>  |                             |                         |
| <b>Imidazoquinolinamines - Topical***</b>                       |                             |                         |
| <i>imiquimod external cream 5 %</i>                             |                             | QLL (12 EA per 30 days) |

| <b>Formulary Drug Name</b>                                     | <b>Reference</b>     | <b>Restrictions</b> |
|--|----------------------|---------------------|
| <b>*Insect Repellents***</b>                                   |                      |                     |
| <b>COLEMAN 100 MAX CONTINUOUS SPR EXTERNAL AEROSOL 98.11 %</b> | cvx insect repellent | OTC                 |
| <b>COLEMAN 100 MAX INSECT REPEL EXTERNAL LIQUID 98.11 %</b>    |                      | OTC                 |
| <b>COLEMAN INSECT REPEL HIGH&amp;DRY EXTERNAL AEROSOL 25 %</b> | cvx insect repellent | OTC                 |
| <b>COLEMAN INSECT REPEL SPORTSMEN EXTERNAL AEROSOL 40 %</b>    | cvx insect repellent | OTC                 |
| <b>CUTTER ALL FAMILY EXTERNAL AEROSOL 7 %</b>                  | cvx insect repellent | OTC                 |
| <b>CUTTER ALL FAMILY EXTERNAL LIQUID 7 %</b>                   |                      | OTC                 |
| <b>CUTTER BACKWOODS DRY EXTERNAL AEROSOL</b>                   | cvx insect repellent | OTC                 |
| <b>CUTTER BACKWOODS EXTERNAL AEROSOL</b>                       | cvx insect repellent | OTC                 |
| <b>CUTTER BACKWOODS EXTERNAL LIQUID</b>                        |                      | OTC                 |
| <b>CUTTER DRY EXTERNAL AEROSOL 10 %</b>                        | cvx insect repellent | OTC                 |
| <b>CUTTER EXTERNAL AEROSOL 10 %</b>                            | cvx insect repellent | OTC                 |
| <b>CUTTER SKINSATIONS EXTERNAL AEROSOL 7 %</b>                 | cvx insect repellent | OTC                 |
| <b>CUTTER SKINSATIONS EXTERNAL LIQUID 7 %</b>                  |                      | OTC                 |
| <b>CUTTER SPORT EXTERNAL AEROSOL 15 %</b>                      | cvx insect repellent | OTC                 |
| <b>CVS INSECT REPELLENT EXTERNAL AEROSOL 15 %</b>              | cvx insect repellent | OTC                 |
| <b>CVS TOTAL HOME INSECT REPEL EXTERNAL AEROSOL 30 %</b>       | cvx insect repellent | OTC                 |
| <b>MAXI DEET EXTERNAL LIQUID 98.11 %</b>                       |                      | OTC                 |
| <b>OFF ACTIVE EXTERNAL AEROSOL 15 %</b>                        | cvx insect repellent | OTC                 |
| <b>OFF DEEP WOODS DRY EXTERNAL AEROSOL</b>                     | cvx insect repellent | OTC                 |
| <b>OFF DEEP WOODS EXTERNAL AEROSOL</b>                         | cvx insect repellent | OTC                 |
| <b>OFF DEEP WOODS EXTERNAL LIQUID</b>                          |                      | OTC                 |

| <b>Formulary Drug Name</b>                                | <b>Reference</b>        | <b>Restrictions</b> |
|---|-------------------------|---------------------|
| <b>OFF DEEP WOODS SPORTSMEN EXTERNAL AEROSOL 30 %</b>     | cvs insect repellent    | OTC                 |
| <b>OFF DEEP WOODS SPORTSMEN EXTERNAL LIQUID , 98.25 %</b> |                         | OTC                 |
| <b>OFF FAMILYCARE CLEAN FEEL EXTERNAL LIQUID 5 %</b>      |                         | OTC                 |
| <b>OFF FAMILYCARE TROPICAL FRESH EXTERNAL LIQUID 5 %</b>  |                         | OTC                 |
| <b>OFF FAMILYCARE UNSCENTED EXTERNAL LIQUID 7 %</b>       |                         | OTC                 |
| <b>OFF SMOOTH &amp; DRY EXTERNAL AEROSOL 15 %</b>         | cvs insect repellent    | OTC                 |
| <b>REPEL 100 EXTERNAL LIQUID 98.11 %</b>                  |                         | OTC                 |
| <b>REPEL FAMILY DRY EXTERNAL AEROSOL 10 %</b>             | cvs insect repellent    | OTC                 |
| <b>REPEL FAMILY EXTERNAL AEROSOL 15 %</b>                 | cvs insect repellent    | OTC                 |
| <b>REPEL HUNTERS FORMULA EXTERNAL AEROSOL</b>             | cvs insect repellent    | OTC                 |
| <b>REPEL SPORTSMEN DRY EXTERNAL AEROSOL</b>               | cvs insect repellent    | OTC                 |
| <b>REPEL SPORTSMEN EXTERNAL AEROSOL</b>                   | cvs insect repellent    | OTC                 |
| <b>REPEL SPORTSMEN MAX EXTERNAL AEROSOL 40 %</b>          | cvs insect repellent    | OTC                 |
| <b>REPEL SPORTSMEN MAX EXTERNAL LIQUID 40 %</b>           |                         | OTC                 |
| <b>REPEL SPORTSMEN MAX EXTERNAL LOTION 40 %</b>           |                         | OTC                 |
| <b>SAWYER INSECT REPELLENT EXTERNAL AEROSOL 30 %</b>      | cvs insect repellent    | OTC                 |
| <b>SAWYER INSECT REPELLENT EXTERNAL LIQUID 20 %</b>       |                         | OTC                 |
| <b>SAWYER INSECT REPELLENT EXTERNAL LOTION 20 %</b>       |                         | OTC                 |
| <b>ULTRATHON INSECT REPELLENT 8 EXTERNAL AEROSOL 25 %</b> | cvs insect repellent    | OTC                 |
| <b>ULTRATHON INSECT REPELLENT EXTERNAL LOTION 34.34 %</b> |                         | OTC                 |
| <b>*Keratolytic/Antimitotic Agents***</b>                 |                         |                     |
| <i>acne external pad 2 %</i>                              | Neutrogena Rapid Clear  | OTC                 |
| <b>BETASAL EXTERNAL SHAMPOO 3 %</b>                       | cvs psoriasis medicated | OTC                 |
| <i>callus removers external pad 40 %</i>                  | Compound W              | OTC                 |

| <b>Formulary Drug Name</b>                                | <b>Reference</b>              | <b>Restrictions</b> |
|---|-------------------------------|---------------------|
| <i>callus removers extra thick external pad 40 %</i>      | Compound W                    | OTC                 |
| <i>clean &amp; clear acne treatment external gel 2 %</i>  | Clean & Clear Acne Treatment  | OTC                 |
| <i>clean &amp; clear advantage mark external gel 2 %</i>  | Clean & Clear Acne Treatment  | OTC                 |
| <b>CLEAR AWAY 1-STEP WART REMOVER EXTERNAL PAD 40 %</b>   | callus removers               | OTC                 |
| <b>CLEAR AWAY PLANTAR SYSTEM EXTERNAL PAD 40 %</b>        | callus removers               | OTC                 |
| <b>CLEAR AWAY WART REMOVER SYSTEM EXTERNAL PAD 40 %</b>   | callus removers               | OTC                 |
| <b>COMPOUND W EXTERNAL LIQUID 17 %</b>                    | cvs wart remover              | OTC                 |
| <i>compound w external pad 40 %</i>                       | Compound W                    | OTC                 |
| <i>compound w for kids external pad 40 %</i>              | Compound W                    | OTC                 |
| <b>COMPOUND W MAXIMUM STRENGTH EXTERNAL GEL 17 %</b>      | cvs wart remover pen          | OTC                 |
| <i>compound w one step external pad 40 %</i>              | Compound W                    | OTC                 |
| <i>compound w one step invisible external strip 40 %</i>  | Compound W One Step Invisible | OTC                 |
| <b>CORN REMOVER ONE STEP EXTERNAL PAD 40 %</b>            | callus removers               | OTC                 |
| <i>corn remover one-step external strip 40 %</i>          | Compound W One Step Invisible | OTC                 |
| <b>CORN REMOVER WATERPROOF EXTERNAL PAD 40 %</b>          | callus removers               | OTC                 |
| <i>cvs corn removers external pad 40 %</i>                | Compound W                    | OTC                 |
| <b>CVS CORN/CALLUS REMOVER EXTERNAL KIT 17 %</b>          |                               | OTC                 |
| <i>cvs medicated spot external gel 2 %</i>                | Clean & Clear Acne Treatment  | OTC                 |
| <i>cvs plantar wart remover external pad 40 %</i>         | Compound W                    | OTC                 |
| <b>CVS PSORIASIS MEDICATED EXTERNAL SHAMPOO 3 %</b>       | cvs psoriasis medicated       | OTC                 |
| <i>cvs wart remover external liquid 17 %</i>              | Gets-It Corn/Callus Remover   | OTC                 |
| <i>cvs wart remover external pad 40 %</i>                 | Compound W                    | OTC                 |
| <i>cvs wart remover one step external strip 40 %</i>      | Compound W One Step Invisible | OTC                 |
| <i>cvs wart remover pen external gel 17 %</i>             | Compound W Maximum Strength   | OTC                 |
| <b>DENOREX EXTRA STRENGTH 2-IN-1 EXTERNAL SHAMPOO 3 %</b> | cvs psoriasis medicated       | OTC                 |
| <b>DERMAREST PSORIASIS EXTERNAL GEL 3 %</b>               |                               | OTC                 |

| <b>Formulary Drug Name</b>                                   | <b>Reference</b>             | <b>Restrictions</b> |
|--|------------------------------|---------------------|
| <b>DERMAREST PSORIASIS EXTERNAL SHAMPOO 3 %</b>              | cvs psoriasis medicated      | OTC                 |
| <i>drs choice corn/callus remover external pad 40 %</i>      | Compound W                   | OTC                 |
| <i>eq wart remover external liquid 17 %</i>                  | Gets-It Corn/Callus Remover  | OTC                 |
| <i>eq1 callus remover extra thick external pad 40 %</i>      | Compound W                   | OTC                 |
| <i>eq1 scalp relief max strength external liquid 3 %</i>     | Scalpicin                    | OTC                 |
| <i>exuviance blemish treatment external gel 2 %</i>          | Clean & Clear Acne Treatment | OTC                 |
| <i>freezone callus remover external pad 40 %</i>             | Compound W                   | OTC                 |
| <i>gel callus removers external pad 40 %</i>                 | Compound W                   | OTC                 |
| <i>gets-it corn/callus remover external liquid 17 %</i>      | Gets-It Corn/Callus Remover  | OTC                 |
| <i>gnp scalp relief external liquid 3 %</i>                  | Scalpicin                    | OTC                 |
| <i>gnp wart remover external liquid 17 %</i>                 | Gets-It Corn/Callus Remover  | OTC                 |
| <b>KERALYT EXTERNAL GEL 3 %</b>                              |                              | OTC                 |
| <i>liquid corn &amp; callus remover external liquid 17 %</i> | Gets-It Corn/Callus Remover  | OTC                 |
| <i>medicated wart removers external pad 40 %</i>             | Compound W                   | OTC                 |
| <i>mediplast external pad 40 %</i>                           | Compound W                   | OTC                 |
| <i>mosco corn remover max str external pad 40 %</i>          | Compound W                   | OTC                 |
| <i>neutrogena rapid clear external pad 2 %</i>               | Neutrogena Rapid Clear       | OTC                 |
| <b>NEUTROGENA T/SAL EXTERNAL SHAMPOO 3 %</b>                 | cvs psoriasis medicated      | OTC                 |
| <b>P &amp; S EXTERNAL SHAMPOO 2 %</b>                        |                              | OTC                 |
| <i>podofilox external solution 0.5 %</i>                     |                              |                     |
| <i>psoriasin external liquid 3 %</i>                         | Scalpicin                    | OTC                 |
| <i>ra corn removers ultra thin external pad 40 %</i>         | Compound W                   | OTC                 |
| <i>ra one-step corn remover external pad 40 %</i>            | Compound W                   | OTC                 |
| <i>ra scalp itch/dandruff relief external liquid 3 %</i>     | Scalpicin                    | OTC                 |
| <i>ra wart remover external gel 17 %</i>                     | Compound W Maximum Strength  | OTC                 |
| <i>ra wart remover external pad 40 %</i>                     | Compound W                   | OTC                 |
| <i>sal-plant external gel 17 %</i>                           | Compound W Maximum Strength  | OTC                 |
| <i>scalpicin 2 in 1 external liquid 3 %</i>                  | Scalpicin                    | OTC                 |
| <i>scalpicin external liquid 3 %</i>                         | Scalpicin                    | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b>            | <b>Restrictions</b> |
|---|-----------------------------|---------------------|
| <b>SELSUN BLUE DEEP CLEANSING EXTERNAL SHAMPOO 3 %</b>              | cvs psoriasis medicated     | OTC                 |
| <b>SELSUN BLUE NATURALS DRY SCALP EXTERNAL SHAMPOO 3 %</b>          | cvs psoriasis medicated     | OTC                 |
| <i>sm medicated corn removers external pad 40 %</i>                 | Compound W                  | OTC                 |
| <i>stri-dex maximum strength external pad 2 %</i>                   | Neutrogena Rapid Clear      | OTC                 |
| <i>tgt wart remover external liquid 17 %</i>                        | Gets-It Corn/Callus Remover | OTC                 |
| <b>THERAPEUTIC T+PLUS MAX ST EXTERNAL SHAMPOO 3 %</b>               | cvs psoriasis medicated     | OTC                 |
| <i>ultra thin corn removers external pad 40 %</i>                   | Compound W                  | OTC                 |
| <i>wart remover external gel 17 %</i>                               | Compound W Maximum Strength | OTC                 |
| <i>wart remover maximum strength external gel 17 %</i>              | Compound W Maximum Strength | OTC                 |
| <i>wart remover maximum strength external liquid 17 %</i>           | Gets-It Corn/Callus Remover | OTC                 |
| <i>wart remover medicated external pad 40 %</i>                     | Compound W                  | OTC                 |
| <b>*Liniment Combinations***</b>                                    |                             |                     |
| <i>amplify relief mm external cream 10-30 %</i>                     | Icy Hot Extra Strength      | OTC                 |
| <b>BENGAY GREASELESS EXTERNAL CREAM 10-15 %</b>                     | amplify relief mm           | OTC                 |
| <i>calypxo external cream 3-10 %</i>                                | Icy Hot Extra Strength      | OTC                 |
| <b>CASTIVA COOLING EXTERNAL LOTION 5-14 %</b>                       | xoten                       | OTC                 |
| <i>cool &amp; heat extra strength external cream</i>                | Icy Hot Extra Strength      | OTC                 |
| <i>cool &amp; heat extra strength external ointment 7.6-29 %</i>    | Icy Hot Balm Extra Strength | OTC                 |
| <i>cool n heat external stick 10-30 %</i>                           | Icy Hot                     | OTC                 |
| <i>cool n heat extra strength external cream 10-30 %</i>            | Icy Hot Extra Strength      | OTC                 |
| <i>cool n heat muscle &amp; joint external cream 10-30 %</i>        | Icy Hot Extra Strength      | OTC                 |
| <i>cvs cold &amp; hot pain relieving external cream</i>             | Icy Hot Extra Strength      | OTC                 |
| <i>cvs muscle rub external cream 10-15 %</i>                        | Icy Hot Extra Strength      | OTC                 |
| <i>eql cool heat extra strength external cream</i>                  | Icy Hot Extra Strength      | OTC                 |
| <i>eql muscle rub pain relieving external cream 10-15 %</i>         | Icy Hot Extra Strength      | OTC                 |
| <i>gnp cold &amp; hot extra strength external ointment 7.6-29 %</i> | Icy Hot Balm Extra Strength | OTC                 |
| <i>gnp muscle rub external cream 10-15 %</i>                        | Icy Hot Extra Strength      | OTC                 |



| <b>Formulary Drug Name</b>                                      | <b>Reference</b>             | <b>Restrictions</b> |
|---|------------------------------|---------------------|
| <i>goodsense muscle rub external cream 8-30 %</i>               | Icy Hot Extra Strength       | OTC                 |
| <i>grx analgesic balm external ointment</i>                     | Icy Hot Balm Extra Strength  | OTC                 |
| <i>hm muscle rub external cream 10-15 %</i>                     | Icy Hot Extra Strength       | OTC                 |
| <i>icy hot balm extra strength external ointment 7.6-29 %</i>   | Icy Hot Balm Extra Strength  | OTC                 |
| <b>ICY HOT EXTERNAL STICK 10-30 %</b>                           | cool n heat                  | OTC                 |
| <i>icy hot extra strength external cream 10-30 %</i>            | Icy Hot Extra Strength       | OTC                 |
| <b>ICY HOT EXTRA STRENGTH EXTERNAL STICK 10-30 %</b>            | cool n heat                  | OTC                 |
| <i>menthoderm external ointment 10-15 %</i>                     | Icy Hot Balm Extra Strength  | OTC                 |
| <i>muscle rub external cream 10-15 %</i>                        | Icy Hot Extra Strength       | OTC                 |
| <i>pain relieving external cream</i>                            | Icy Hot Extra Strength       | OTC                 |
| <i>ra cool heat external cream</i>                              | Icy Hot Extra Strength       | OTC                 |
| <i>sm cold &amp; hot extra strength external cream</i>          | Icy Hot Extra Strength       | OTC                 |
| <i>sm muscle rub external cream 10-15 %</i>                     | Icy Hot Extra Strength       | OTC                 |
| <i>tgt cold &amp; hot pain relieving external cream 10-30 %</i> | Icy Hot Extra Strength       | OTC                 |
| <i>thera-gesic external cream 0.5-15 %, 1-15 %</i>              | Icy Hot Extra Strength       | OTC                 |
| <i>thera-gesic plus external cream</i>                          | Icy Hot Extra Strength       | OTC                 |
| <b>TIGER BALM LINIMENT EXTERNAL LIQUID 16-28 %</b>              |                              | OTC                 |
| <b>XOTEN EXTERNAL LOTION 12.5-6.25 %</b>                        | xoten                        | OTC                 |
| <b>*Local Anesthetics - Topical***</b>                          |                              |                     |
| <i>arthritis pain relieving external cream 0.075 %</i>          |                              | OTC                 |
| <b>ASPERCREME LIDOCAINE EXTERNAL CREAM 4 %</b>                  | gnp lidocaine pain relieving | OTC                 |
| <b>ASPERCREME W/LIDOCAINE EXTERNAL CREAM 4 %</b>                | gnp lidocaine pain relieving | OTC                 |
| <b>CAPSAICIN ARTHRITIS RELIEF EXTERNAL LIQUID 0.15 %</b>        | capsaicin arthritis relief   | OTC                 |
| <i>capsaicin external cream 0.025 %</i>                         | DermacinRx Penetral          | OTC                 |
| <i>capsaicin external cream 0.1 %</i>                           | Zostrix HP                   | OTC                 |
| <i>capsaicin heat patch external patch 0.025 %</i>              | Salonpas-Hot                 | OTC                 |
| <i>capsaicin hp external cream 0.1 %</i>                        | Zostrix HP                   | OTC                 |
| <i>capsimide external patch 0.025 %</i>                         | Salonpas-Hot                 | OTC                 |
| <b>CAPZASIN EXTERNAL LIQUID 0.15 %</b>                          | capsaicin arthritis relief   | OTC                 |
| <b>CAPZASIN-P EXTERNAL CREAM 0.035 %</b>                        |                              | OTC                 |



| <b>Formulary Drug Name</b>   | <b>Reference</b>           | <b>Restrictions</b>                            |
|--|----------------------------|--|
| <b>CVS ANTI-ITCH SENSITIVE EXTERNAL LOTION 1 %</b>                   | cvs anti-itch sensitive    | OTC  |
| <b>CVS CAPSAICIN EXTERNAL LIQUID 0.15 %</b>                          | capsaicin arthritis relief | OTC  |
| <i>cvs capsaicin hp external cream 0.1 %</i>                         | Zostrix HP                 | OTC  |
| <i>cvs feminine wipes max st external 1 %</i>                        | Luvena Feminine Wipes      | OTC  |
| <i>gnp capsaicin external cream 0.1 %</i>                            | Zostrix HP                 | OTC  |
| <b>GNP CAPSAICIN EXTERNAL LIQUID 0.15 %</b>                          | capsaicin arthritis relief | OTC  |
| <i>gnp lidocaine pain relieving external cream 4 %</i>               | Aspercreme Lidocaine       | OTC  |
| <i>lidocaine external ointment 5 %</i>                               |                            | QLL (50 GM per 30 days)                        |
| <i>lidocaine external patch 5 %</i>                                  | Lidocan                    | QLL (3 EA per 1 day)                           |
| <i>lidocaine hcl external cream 4 %</i>                              | Aspercreme Lidocaine       | OTC  |
| <i>lidocaine hcl urethral/mucosal external prefilled syringe 2 %</i> | Glydo                      |  |
| <i>lidocaine pain relief external patch 4 %</i>                      | Aspercreme Lidocaine       | OTC; QLL (1 EA per 1 day)                      |
| <i>lidocaine pain relief max st external cream 4 %</i>               | Aspercreme Lidocaine       | OTC  |
| <i>luvena feminine wipes external 1 %</i>                            | Luvena Feminine Wipes      | OTC  |
| <b>PRAX EXTERNAL LOTION 1 %</b>                                      | cvs anti-itch sensitive    | OTC  |
| <i>premium lidocaine external ointment 5 %</i>                       |                            | QLL (50 GM per 30 days)                        |
| <i>qc pain relieving + lidocaine external cream 4 %</i>              | Aspercreme Lidocaine       | OTC  |
| <b>RA SENSITIVE ANTI-ITCH EXTERNAL LOTION 1 %</b>                    | cvs anti-itch sensitive    | OTC  |
| <b>SARNA SENSITIVE EXTERNAL LOTION 1 %</b>                           | cvs anti-itch sensitive    | OTC  |
| <i>sure result sr relief external cream 0.025 %</i>                  | DermacinRx Penetral        | OTC  |
| <b>VAGISIL ANTI-ITCH MEDICATED EXTERNAL 1 %</b>                      | cvs feminine wipes max st  | OTC  |
| <b>VAGISIL MAXIMUM STRENGTH EXTERNAL 1 %</b>                         | cvs feminine wipes max st  | OTC  |
| <i>zostrix hp external cream 0.1 %</i>                               | Zostrix HP                 | OTC  |
| <b>*Macrolide Immunosuppressants - Topical***</b>                    |                            |  |
| <b>ELIDEL EXTERNAL CREAM 1 %</b>                                     | pimecrolimus               | PA; QLL (30 GM per 30 days); AL (Min 2 Years)  |
| <i>tacrolimus external ointment 0.03 %</i>                           |                            | PA; QLL (30 GM per 30 days); AL (Min 2 Years)  |
| <i>tacrolimus external ointment 0.1 %</i>                            |                            | PA; QLL (30 GM per 30 days); AL (Min 16 Years) |

| Formulary Drug Name                                   | Reference          | Restrictions |
|---|--------------------|--------------|
| <b>*Misc. Dermatological Products***</b>              |                    |              |
| ELETONE EXTERNAL CREAM                                | alevamax           |              |
| HYLATOPIC PLUS EXTERNAL LOTION                        | bromi-lotion       |              |
| <b>*Misc. Topical Combinations***</b>                 |                    |              |
| A & D ZINC OXIDE EXTERNAL CREAM                       |                    | OTC          |
| <i>caladrox external ointment 0.44-20 %</i>           |                    | OTC          |
| CALAMINE EXTERNAL LOTION 8-8 %                        |                    | OTC          |
| <i>cvs zinc oxide diaper external cream 1-10 %</i>    |                    | OTC          |
| GNP CALAMINE EXTERNAL LOTION 8-8 %                    |                    | OTC          |
| GOODSENSE CALAMINE EXTERNAL SUSPENSION 8-8 %          |                    | OTC          |
| HM CALAMINE EXTERNAL LOTION 8-8 %                     |                    | OTC          |
| <i>moisture barrier external ointment 0.44-20.6 %</i> | Calmoseptine       | OTC          |
| PX CALAMINE EXTERNAL LOTION                           |                    | OTC          |
| RA CALAMINE EXTERNAL SUSPENSION 8-8 %                 |                    | OTC          |
| RISAMINE EXTERNAL OINTMENT 0.44-20.625 %              | menthol-zinc oxide | OTC          |
| SM CALAMINE EXTERNAL LOTION                           |                    | OTC          |
| <i>zinc-oxycle plus external ointment 0.44-20 %</i>   |                    | OTC          |
| <b>*Misc. Topical***</b>                              |                    |              |
| <i>cvs medicated wipes external pad 50 %</i>          | Preparation H      | OTC          |
| DERMAGRAN EXTERNAL OINTMENT 0.275 %                   |                    | OTC          |
| DERMAGRAN SKIN PROTECTANT EXTERNAL OINTMENT           |                    | OTC          |
| <i>dermamed external ointment</i>                     |                    | OTC          |
| <i>eq hemorrhoidal external pad 50 %</i>              | Preparation H      | OTC          |
| <i>eq hygienic cleansing wipes external pad</i>       | Preparation H      | OTC          |
| <i>gnp hygienic cleansing external pad 50 %</i>       | Preparation H      | OTC          |
| <i>gnp medicated wipes external pad 50 %</i>          | Preparation H      | OTC          |
| <i>hemorrhoidal hygiene external pad 50 %</i>         | Preparation H      | OTC          |
| <i>hm medicated cooling external pad 50 %</i>         | Preparation H      | OTC          |
| <i>medicated cleansing external pad 50 %</i>          | Preparation H      | OTC          |
| <i>medicated wipes external pad 50 %</i>              | Preparation H      | OTC          |

| <b>Formulary Drug Name</b>                                 | <b>Reference</b>         | <b>Restrictions</b>                              |
|--|--------------------------|--|
| <i>pre-moistened witch hazel external pad 50 %</i>         | Preparation H            | OTC  |
| <i>preparation h external pad 50 %</i>                     | Preparation H            | OTC  |
| <i>preparation h for women external pad 20 %</i>           | Preparation H            | OTC  |
| <i>preparation h totables wipes external pad 50 %</i>      | Preparation H            | OTC  |
| <i>qc medicated pre-moistened external pad 50 %</i>        | Preparation H            | OTC  |
| <i>ra hemorrhoid relief medicated external pad 50 %</i>    | Preparation H            | OTC  |
| <i>ra medicated wipes external pad 50 %</i>                | Preparation H            | OTC  |
| <i>sm medicated wipes external pad 50 %</i>                | Preparation H            | OTC  |
| <i>tgt medicated hemorrhoidal external pad</i>             | Preparation H            | OTC  |
| <i>tgt medicated wipe/witch hazel external pad 50 %</i>    | Preparation H            | OTC  |
| <i>tn dickinsons witch hazel external pad , 50 %</i>       | Preparation H            | OTC  |
| <b>*Phosphodiesterase 4 (Pde4) Inhibitors - Topical***</b> |                          |  |
| <b>EUCRISA EXTERNAL OINTMENT 2 %</b>                       |                          | PA; QLL (300 GM per 365 days); AL (Min 3 Months) |
| <b>*Powders***</b>   |                          |  |
| <i>baby cornstarch external powder</i>                     | Johnsons Baby Cornstarch | OTC  |
| <i>baby powder external powder</i>                         | Zeasorb                  | OTC  |
| <i>cvs baby powder external powder</i>                     | Zeasorb                  | OTC  |
| <i>hm baby cornstarch external powder</i>                  | Johnsons Baby Cornstarch | OTC  |
| <i>johnsons baby cornstarch external powder</i>            | Johnsons Baby Cornstarch | OTC  |
| <i>johnsons baby powder external powder</i>                | Johnsons Baby Cornstarch | OTC  |
| <i>ra tugaboos baby (talc) external powder</i>             | Zeasorb                  | OTC  |
| <i>ra tugaboos baby external powder</i>                    | Johnsons Baby Cornstarch | OTC  |
| <i>sm baby powder external powder</i>                      | Zeasorb                  | OTC  |
| <i>soothe &amp; cool body external powder</i>              | Johnsons Baby Cornstarch | OTC  |
| <b>*Prostaglandins - Topical***</b>                        |                          |  |
| <i>bimatoprost external solution 0.03 %</i>                | Latisse                  | ST   |
| <b>*Rosacea Agents***</b>                                  |                          |  |
| <i>metronidazole external cream 0.75 %</i>                 | MetroCream               |  |
| <i>metronidazole external gel 0.75 %</i>                   |                          |  |
| <i>metronidazole external gel 1 %</i>                      | Metrogel                 |  |
| <i>metronidazole external lotion 0.75 %</i>                | MetroLotion              |  |
| <i>rosadan external gel 0.75 %</i>                         |                          |  |

| <b>Formulary Drug Name</b>  | <b>Reference</b>         | <b>Restrictions</b>           |
|---|--------------------------|-------------------------------|
| <b>*Scabicide Combinations***</b>                                 |                          |                               |
| <i>cvs lice killing external shampoo 0.33-4 %</i>                 | Rid Lice Killing Shampoo | OTC; QLL (240 ML per 30 days) |
| <i>eq lice killing max st external shampoo 0.33-4 %</i>           | Rid Lice Killing Shampoo | OTC; QLL (240 ML per 30 days) |
| <i>eql lice killing max st external shampoo 0.33-4 %</i>          | Rid Lice Killing Shampoo | OTC; QLL (240 ML per 30 days) |
| <i>gnp lice treatment external shampoo 0.33-4 %</i>               | Rid Lice Killing Shampoo | OTC; QLL (240 ML per 30 days) |
| <i>hm lice killing max st external shampoo 0.33-4 %</i>           | Rid Lice Killing Shampoo | OTC; QLL (240 ML per 30 days) |
| <i>lice killing external shampoo 4-0.33 %</i>                     | Rid Lice Killing Shampoo | OTC; QLL (240 ML per 30 days) |
| <i>lice killing maximum strength external shampoo 0.33-4 %</i>    | Rid Lice Killing Shampoo | OTC; QLL (240 ML per 30 days) |
| <i>licide external shampoo 0.33-4 %</i>                           | Rid Lice Killing Shampoo | OTC; QLL (240 ML per 30 days) |
| <b>NIX COMPLETE LICE TREATMENT COMBINATION KIT 1 &amp; 0.25 %</b> |                          | OTC                           |
| <i>ra lice maximum strength external shampoo 0.33-4 %</i>         | Rid Lice Killing Shampoo | OTC; QLL (240 ML per 30 days) |
| <i>ra lice solution combination kit 0.5-0.33-4 %</i>              | CVS Lice Solution        | OTC                           |
| <i>rid lice killing shampoo external shampoo 0.33-4 %</i>         | Rid Lice Killing Shampoo | OTC; QLL (240 ML per 30 days) |
| <i>sb lice killing max st external shampoo 0.33-4 %</i>           | Rid Lice Killing Shampoo | OTC; QLL (240 ML per 30 days) |
| <b>*Scabicides &amp; Pediculicides***</b>                         |                          |                               |
| <i>bedding spray lice treatment aerosol 0.5 %</i>                 |                          | OTC                           |
| <i>cvs bedding spray lice treat aerosol 0.5 %</i>                 |                          | OTC                           |
| <i>gnp lice bedding aerosol 0.5 %</i>                             |                          | OTC                           |
| <i>ivermectin external lotion 0.5 %</i>                           |                          | ST; QLL (117 GM per 30 days)  |
| <i>lice treatment external liquid 1 %</i>                         | Nix Creme Rinse          | OTC; QLL (118 ML per 30 days) |
| <i>lice treatment external lotion 1 %</i>                         |                          | OTC; QLL (120 ML per 30 days) |
| <i>licide aerosol 0.5 %</i>                                       |                          | OTC                           |
| <i>malathion external lotion 0.5 %</i>                            | Ovide                    | ST; QLL (59 ML per 180 days)  |
| <b>NIX CREME RINSE EXTERNAL LIQUID 1 %</b>                        | lice treatment           | OTC; QLL (118 ML per 30 days) |
| <i>permethrin external cream 5 %</i>                              |                          | QLL (60 GM per 30 days)       |
| <i>ra lice bedding aerosol 0.5 %</i>                              |                          | OTC                           |

| <b>Formulary Drug Name</b>                             | <b>Reference</b>             | <b>Restrictions</b>           |
|--|------------------------------|-------------------------------|
| <i>ra lice treatment external lotion 1 %</i>           |                              | OTC; QLL (120 ML per 30 days) |
| <b>RID AEROSOL 0.5 %</b>                               | bedding spray lice treatment | OTC                           |
| <i>sm bedding lice treatment aerosol 0.5 %</i>         |                              | OTC                           |
| <i>sm lice treatment external lotion 1 %</i>           |                              | OTC; QLL (120 ML per 30 days) |
| <i>spinosad external suspension 0.9 %</i>              | Natroba                      | ST                            |
| <i>stop lice aerosol 0.5 %</i>                         |                              | OTC                           |
| <i>stop lice step 3 aerosol 0.5 %</i>                  |                              | OTC                           |
| <b>*Skin Cleansers***</b>                              |                              |                               |
| <b>CVS ISOPROPYL ALCOHOL WIPES EXTERNAL 70 %</b>       | cvs isopropyl alcohol wipes  | OTC                           |
| <b>ESSENTRA WIPES 9X9" EXTERNAL 70 %</b>               | cvs isopropyl alcohol wipes  |                               |
| <b>GNP ISOPROPYL ALCOHOL WIPES EXTERNAL 70 %</b>       | cvs isopropyl alcohol wipes  | OTC                           |
| <b>ISOPROPYL ALCOHOL EXTERNAL 70 %</b>                 | cvs isopropyl alcohol wipes  | OTC                           |
| <b>ISOPROPYL ALCOHOL WIPES EXTERNAL 70 %</b>           | cvs isopropyl alcohol wipes  | OTC                           |
| <b>PHARMACIST CHOICE ALCOHOL EXTERNAL PAD 70 %</b>     | cvs isopropyl alcohol wipes  | OTC                           |
| <b>RA ISOPROPYL ALCOHOL WIPES EXTERNAL 70 %</b>        | cvs isopropyl alcohol wipes  | OTC                           |
| <b>*Skin Protectants***</b>                            |                              |                               |
| <b>4-N-1 EXTERNAL CREAM 1 %</b>                        |                              | OTC                           |
| <b>A+D FIRST AID EXTERNAL OINTMENT</b>                 | lip balm                     | OTC                           |
| <b>ABSORBASE EXTERNAL OINTMENT</b>                     | lip balm                     | OTC                           |
| <b>ALOE VESTA 2-N-1 PROTECTIVE EXTERNAL OINTMENT</b>   | lip balm                     | OTC                           |
| <b>ALOE VESTA PROTECTIVE EXTERNAL OINTMENT</b>         | lip balm                     | OTC                           |
| <b>ALOE VESTA SKIN CONDITIONER EXTERNAL LOTION 3 %</b> |                              | OTC                           |
| <i>americerin external cream</i>                       | AmeriCerin                   | OTC                           |
| <b>AMERIDERM PERISHIELD EXTERNAL OINTMENT 3.8 %</b>    | lip balm                     | OTC                           |
| <i>ameriphor external ointment</i>                     | AmeriPhor                    | OTC                           |
| <b>AQUAPHOR LIP REPAIR EXTERNAL OINTMENT</b>           | lip balm                     | OTC                           |

| <b>Formulary Drug Name</b>                                | <b>Reference</b>          | <b>Restrictions</b> |
|---|---------------------------|---------------------|
| <b>AVEENO BABY CALMING COMFORT EXTERNAL LOTION 1.25 %</b> | natural oatmeal           | OTC                 |
| <b>AVEENO DAILY MOISTURIZING EXTERNAL LOTION 1.25 %</b>   | natural oatmeal           | OTC                 |
| <b>AVEENO INTENSE RELIEF EXTERNAL CREAM 1.3 %</b>         |                           | OTC                 |
| <i>balmex skin protectant external ointment</i>           | AmeriPhor                 | OTC                 |
| <b>BASIS FACIAL MOISTURIZER EXTERNAL CREAM</b>            | hydrocerin                | OTC                 |
| <b>BASIS OVERNIGHT EXTERNAL CREAM</b>                     | hydrocerin                | OTC                 |
| <b>BOUDREAUXS RASH PREVENTOR EXTERNAL LIQUID 10 %</b>     |                           | OTC                 |
| <b>BOUDREAUXS RASH PROTECTOR EXTERNAL LIQUID 10 %</b>     |                           | OTC                 |
| <b>CARRINGTON MOIST BARRIER/ZINC EXTERNAL CREAM</b>       | hydrocerin                | OTC                 |
| <b>CARRINGTON MOISTURE BARRIER EXTERNAL CREAM</b>         | hydrocerin                | OTC                 |
| <b>CAVILON DURABLE BARRIER EXTERNAL CREAM 1.3 %</b>       |                           | OTC                 |
| <i>cerave baby external lotion 1 %</i>                    | TheraSeal Hand Protection | OTC                 |
| <b>CERAVE EXTERNAL OINTMENT</b>                           | lip balm                  | OTC                 |
| <b>CHAPSTICK OVERNIGHT EXTERNAL OINTMENT</b>              | lip balm                  | OTC                 |
| <b>CHAPSTICK ULTRA MOISTURE EXTERNAL OINTMENT</b>         | lip balm                  | OTC                 |
| <i>chapstick ultra renewal external cream 2 %</i>         | Chapstick Ultra Renewal   | OTC                 |
| <b>CHAPSTICK ULTRASMMOOTH FORTIFY EXTERNAL OINTMENT</b>   | lip balm                  | OTC                 |
| <b>CHAPSTICK ULTRASMMOOTH NOURISH EXTERNAL OINTMENT</b>   | lip balm                  | OTC                 |
| <b>CHAPSTICK ULTRASMMOOTH REJUVEN EXTERNAL OINTMENT</b>   | lip balm                  | OTC                 |
| <b>CHAPSTICK ULTRASMMOOTH SOOTHE EXTERNAL OINTMENT</b>    | lip balm                  | OTC                 |
| <b>COOL BOTTOMS EXTERNAL CREAM 1 %</b>                    |                           | OTC                 |
| <i>dermacerin external cream</i>                          | AmeriCerin                | OTC                 |
| <b>DERMADROX EXTERNAL OINTMENT</b>                        | lip balm                  | OTC                 |
| <i>dermafix external ointment</i>                         | AmeriPhor                 | OTC                 |
| <b>EUCERIN EXTERNAL CREAM</b>                             | hydrocerin                | OTC                 |

| <b>Formulary Drug Name</b>                                | <b>Reference</b>            | <b>Restrictions</b> |
|---|-----------------------------|---------------------|
| <b>EUCERIN ORIGINAL HEALING EXTERNAL CREAM</b>            | hydrocerin                  | OTC                 |
| <b>GERI PROTECT EXTERNAL OINTMENT 74 %</b>                | lip balm                    | OTC                 |
| <b>HYDROCERIN EXTERNAL CREAM</b>                          | hydrocerin                  | OTC                 |
| <i>hydrocerin plus external cream</i>                     | AmeriCerin                  | OTC                 |
| <i>kerodex-51 external cream</i>                          | AmeriCerin                  | OTC                 |
| <i>kerodex-71 external cream</i>                          | AmeriCerin                  | OTC                 |
| <b>LANTISEPTIC SKIN PROTECTANT EXTERNAL OINTMENT 50 %</b> | lip balm                    | OTC                 |
| <i>lip balm external ointment</i>                         | AmeriPhor                   | OTC                 |
| <i>lipmagik external ointment 70-6.3-0.5 %</i>            | AmeriPhor                   | OTC                 |
| <i>mederma pm external cream 2 %</i>                      | Chapstick Ultra Renewal     | OTC                 |
| <i>minerin creme external cream</i>                       | AmeriCerin                  | OTC                 |
| <b>MOISTURE GUARD EXTERNAL CREAM 5 %</b>                  |                             | OTC                 |
| <i>moisturel external lotion 3 %</i>                      |                             | OTC                 |
| <b>MOISTURIZING SKIN PROTECTANT EXTERNAL CREAM 8 %</b>    |                             | OTC                 |
| <b>MONISTAT COMPLETE CARE EXTERNAL GEL 1.2 %</b>          |                             | OTC                 |
| <i>natural oatmeal external lotion 1.25 %</i>             | Aveeno Baby Calming Comfort | OTC                 |
| <b>NEOSPORIN LIP HEALTH OVERNIGHT EXTERNAL OINTMENT</b>   | lip balm                    | OTC                 |
| <b>NEUTRAPHOR EXTERNAL CREAM 1 %</b>                      |                             | OTC                 |
| <b>NEUTRAPHORUS REX EXTERNAL CREAM 1 %</b>                |                             | OTC                 |
| <b>NORMLSHIELD EXTERNAL CREAM 4.5 %</b>                   |                             | OTC                 |
| <b>PALOMAR E EXTERNAL OINTMENT</b>                        | lip balm                    | OTC                 |
| <i>periguard external ointment</i>                        | AmeriPhor                   | OTC                 |
| <i>perishield external ointment</i>                       | AmeriPhor                   | OTC                 |
| <b>PETROLEUM JELLY LIP TREATMENT EXTERNAL OINTMENT</b>    | lip balm                    | OTC                 |
| <b>PROSHIELD PLUS SKIN PROTECTANT EXTERNAL CREAM 1 %</b>  |                             | OTC                 |
| <i>ra advanced healing external lotion 1 %</i>            | TheraSeal Hand Protection   | OTC                 |
| <b>RA RENEWAL ADVANCED HEALING EXTERNAL OINTMENT</b>      | lip balm                    | OTC                 |



| <b>Formulary Drug Name</b>                                    | <b>Reference</b>        | <b>Restrictions</b> |
|---|-------------------------|---------------------|
| <b>REMEDY CLEAR-AID EXTERNAL OINTMENT</b>                     | lip balm                | OTC                 |
| <b>REMEDY MOISTURE BARRIER EXTERNAL CREAM 5 %</b>             |                         | OTC                 |
| <b>REMEDY NUTRASHIELD EXTERNAL CREAM 1 %</b>                  |                         | OTC                 |
| <b>RESTORE CLEANSER &amp; MOISTURIZER EXTERNAL LIQUID 2 %</b> |                         | OTC                 |
| <i>restore dimethicreme external cream 2 %</i>                | Chapstick Ultra Renewal | OTC                 |
| <b>SENSI-CARE MOISTURIZING EXTERNAL CREAM</b>                 | hydrocerin              | OTC                 |
| <b>SOOTHE &amp; COOL FREE MEDSEPTIC EXTERNAL OINTMENT</b>     | lip balm                | OTC                 |
| <b>SOOTHE &amp; COOL FREE MOISTURE EXTERNAL OINTMENT</b>      | lip balm                | OTC                 |
| <b>SOOTHE &amp; COOL FREE SKIN PASTE EXTERNAL OINTMENT</b>    | lip balm                | OTC                 |
| <b>SOOTHE &amp; COOL MOISTURE BARRIER EXTERNAL OINTMENT</b>   | lip balm                | OTC                 |
| <b>SOOTHE &amp; COOL PROTECT MOISTURE EXTERNAL OINTMENT</b>   | lip balm                | OTC                 |
| <b>SORBIDON HYDRATE EXTERNAL CREAM</b>                        | hydrocerin              | OTC                 |
| <b>THERASEAL HAND PROTECTION EXTERNAL LOTION 1 %</b>          |                         | OTC                 |
| <b>*Soaps***</b>  |                         |                     |
| <b>ANTI-BACTERIAL HAND EXTERNAL LOTION</b>                    | anti-bacterial hand     | OTC                 |
| <b>AQUANIL SKIN CLEANSER EXTERNAL LOTION</b>                  | anti-bacterial hand     | OTC                 |
| <b>AVEENO ACTIVE NAT MAKEUP WIPES EXTERNAL PAD</b>            | castile soap towelettes | OTC                 |
| <b>AVEENO ACTIVE NAT ULT-CALMING EXTERNAL PAD</b>             | castile soap towelettes | OTC                 |
| <b>AVEENO POSITIVE RADIANT CLEANS EXTERNAL LOTION</b>         | anti-bacterial hand     | OTC                 |
| <b>AVEENO POSITIVELY RADIANT EXTERNAL PAD</b>                 | castile soap towelettes | OTC                 |
| <b>CLEAN &amp; CLEAR ABSORBING SHEETS EXTERNAL PAD</b>        | castile soap towelettes | OTC                 |
| <b>CLEAN &amp; CLEAR CLEANSING WIPES EXTERNAL PAD</b>         | castile soap towelettes | OTC                 |

| <b>Formulary Drug Name</b>                                 | <b>Reference</b>        | <b>Restrictions</b> |
|--|-------------------------|---------------------|
| <b>CLEAN &amp; CLEAR NIGHT RELAXING EXTERNAL PAD</b>       | castile soap towelettes | OTC                 |
| <b>DIABETIDERM CLEANSING EXTERNAL LOTION</b>               | anti-bacterial hand     | OTC                 |
| <b>DICKINSONS WITCH HAZEL EXTERNAL PAD</b>                 | castile soap towelettes | OTC                 |
| <b>GENTLE SKIN CLEANSER EXTERNAL LOTION</b>                | anti-bacterial hand     | OTC                 |
| <b>NIVEA MOISTURIZING BODY WASH EXTERNAL LOTION</b>        | anti-bacterial hand     | OTC                 |
| <b>NIVEA TOUCH OF SMOOTHNESS EXTERNAL LOTION</b>           | anti-bacterial hand     | OTC                 |
| <b>NIVEA VISAGE GENTLE CLEANSING EXTERNAL LOTION</b>       | anti-bacterial hand     | OTC                 |
| <b>OCUSOFT HAND SOAP EXTERNAL LOTION</b>                   | anti-bacterial hand     | OTC                 |
| <b>SM SKIN CLEANSER GENTLE EXTERNAL LOTION</b>             | anti-bacterial hand     | OTC                 |
| <b>*Tar Products***</b>                                    |                         |                     |
| <i>beta care betatar gel external shampoo 2.5 %</i>        | Beta Care Betatar Gel   | OTC                 |
| <i>cvs therapeutic external shampoo 0.5 %</i>              | Therapeutic T+PLUS      | OTC                 |
| <i>eql therapeutic external shampoo 0.5 %</i>              | Therapeutic T+PLUS      | OTC                 |
| <i>mg217 psoriasis multi-symptom external ointment 2 %</i> |                         | OTC                 |
| <i>pc-tar external shampoo 1 %</i>                         | Ionil-T                 | OTC                 |
| <b>PSORIASIN EXTERNAL OINTMENT 2 %</b>                     |                         | OTC                 |
| <i>ra therapeutic external shampoo 0.5 %</i>               | Therapeutic T+PLUS      | OTC                 |
| <i>ra therapeutic external shampoo 2.5 %</i>               | Beta Care Betatar Gel   | OTC                 |
| <b>SCYTERA EXTERNAL FOAM 2 %</b>                           |                         | OTC                 |
| <i>sm anti-dandruff coal tar external shampoo 0.5 %</i>    | Therapeutic T+PLUS      | OTC                 |
| <i>tera-gel tar external shampoo 0.5 %</i>                 | Therapeutic T+PLUS      | OTC                 |
| <i>therapeutic external shampoo 0.5 %</i>                  | Therapeutic T+PLUS      | OTC                 |
| <i>therapeutic t+plus external shampoo 0.5 %</i>           | Therapeutic T+PLUS      | OTC                 |
| <b>X-SEB T PEARL EXTERNAL SHAMPOO 10 %</b>                 |                         | OTC                 |
| <b>X-SEB T PLUS EXTERNAL SHAMPOO 10 %</b>                  |                         | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b>           | <b>Restrictions</b>       |
|---|----------------------------|---------------------------|
| <b>*Topical Anesthetic Combinations***</b>                                    |                            |                           |
| <b>DERMOPLAST EXTERNAL AEROSOL 20-0.5 %</b>                                   |                            | OTC                       |
| <i>lidocaine-prilocaine external cream 2.5-2.5 %</i>                          |                            | QLL (30 GM per 30 days)   |
| <b>*Wound Dressings***</b>  |                            |                           |
| <i>carracolloid 4"x4" external pad</i>  |                            | OTC                       |
| <i>carracolloid 6"x6" external pad</i>  |                            | OTC                       |
| <b>DOME-PASTE BANDAGE EXTERNAL PAD</b>  | cvs foam adhesive dressing | OTC                       |
| <i>drs choice blister care external pad</i>                                   |                            | OTC                       |
| <i>hydrocol external pad</i>  |                            | OTC                       |
| <b>TEGADERM ALGINATE AG DRESSING EXTERNAL PAD 2" X 2" , 4" X 5" , 6" X 6"</b> |                            | OTC                       |
| <b>*Diagnostic Products*</b>  |                            |                           |
| <b>*Diagnostic Tests***</b>   |                            |                           |
| <b>CHEMSTRIP 2 IN VITRO STRIP</b>   | ph strips                  | OTC                       |
| <b>CHEMSTRIP K IN VITRO STRIP</b>   | ketone test                | OTC                       |
| <b>CHEMSTRIP MICRAL IN VITRO STRIP</b>  |                            | OTC                       |
| <b>DIASTIX IN VITRO STRIP</b>   |                            | OTC                       |
| <b>KETOCARE IN VITRO STRIP</b>  | ketone test                | OTC                       |
| <b>KETONE TEST IN VITRO STRIP</b>   | ketone test                | OTC                       |
| <b>KETOSTIX IN VITRO STRIP</b>  | ketone test                | OTC                       |
| <b>NITRATEST PAPER IN VITRO DIAGNOSTIC TEST</b>                               | ph strips                  | OTC                       |
| <b>NOVA MAX PLUS KETONE TEST IN VITRO STRIP</b>                               |                            | OTC                       |
| <b>ONETOUCH ULTRA IN VITRO STRIP</b>  | blood glucose test         | OTC; QLL (5 EA per 1 day) |
| <b>ONETOUCH VERIO IN VITRO STRIP</b>  | blood glucose test         | OTC; QLL (5 EA per 1 day) |
| <b>PRECISION XTRA KETONE IN VITRO STRIP</b>                                   |                            | OTC                       |
| <b>PTS PANELS KETONE TEST IN VITRO STRIP</b>                                  |                            | OTC                       |
| <b>RELION KETONE IN VITRO STRIP</b>   | ketone test                | OTC                       |
| <b>RELION KETONE TEST IN VITRO STRIP</b>                                      | ketone test                | OTC                       |
| <b>UNIVERSAL PH IN VITRO STRIP</b>  | ph strips                  | OTC                       |

| <b>Formulary Drug Name</b>  | <b>Reference</b>               | <b>Restrictions</b>  |
|---|--------------------------------|--|
| <b>*Infection Tests***</b>  |                                |  |
| <b>BINAXNOW COVID-19 AG HOME TEST KIT IN VITRO</b>  | ellume covid-19 home test      | OTC; QLL (2 EA Max Qty Per Fill Retail); AL (Min 2 Years)  |
| <b>BINAXNOW COVID-19 AG HOME TEST KIT IN VITRO</b>  | ellume covid-19 home test      | OTC; QLL (2 EA Max Qty Per Fill Retail); AL (Min 4 Years)  |
| <i>ellume covid-19 home test in vitro kit</i>   | BinaxNOW COVID-19 Ag Home Test | OTC; QLL (2 EA Max Qty Per Fill Retail); AL (Min 2 Years)  |
| <b>FLOWFLEX COVID-19 AG HOME TEST IN VITRO KIT</b>  | ellume covid-19 home test      | OTC; QLL (2 EA Max Qty Per Fill Retail); AL (Min 2 Years)  |
| <b>IHEALTH COVID-19 RAPID TEST IN VITRO KIT</b>   | ellume covid-19 home test      | OTC; QLL (2 EA Max Qty Per Fill Retail); AL (Min 2 Years)  |
| <b>INTELISWAB COVID-19 RAPID TEST IN VITRO KIT</b>  | ellume covid-19 home test      | OTC; QLL (2 EA Max Qty Per Fill Retail); AL (Min 15 Years) |
| <b>QUICKVUE AT-HOME COVID-19 TEST IN VITRO KIT</b>  | ellume covid-19 home test      | OTC; QLL (2 EA Max Qty Per Fill Retail); AL (Min 2 Years)  |
| <b>*Multiple Urine Tests***</b>   |                                |  |
| <b>CHEMSTRIP 10 MD IN VITRO STRIP</b>   |                                | OTC  |
| <b>CHEMSTRIP 10/SG IN VITRO STRIP</b>   |                                | OTC  |
| <b>CHEMSTRIP 2 GP IN VITRO STRIP</b>  |                                | OTC  |
| <b>CHEMSTRIP 5 OB IN VITRO STRIP</b>  |                                | OTC  |
| <b>CHEMSTRIP 7 IN VITRO STRIP</b>   |                                | OTC  |
| <b>CHEMSTRIP 9 IN VITRO STRIP</b>   |                                | OTC  |
| <b>CHEMSTRIP UGK IN VITRO STRIP</b>   |                                | OTC  |
| <b>CVS KETONE CARE IN VITRO STRIP</b>   |                                | OTC  |
| <b>KETO-DIASTIX IN VITRO STRIP</b>  |                                | OTC  |
| <b>*Digestive Aids*</b>   |                                |  |
| <b>*Digestive Enzymes***</b>  |                                |  |
| <b>CREON ORAL CAPSULE DELAYED RELEASE PARTICLES 12000-38000 UNIT, 24000-76000 UNIT, 3000-9500 UNIT, 36000-114000 UNIT, 6000-19000 UNIT</b>                      |                                | PA   |
| <b>VIOKACE ORAL TABLET 10440-39150 UNIT, 20880-78300 UNIT</b>   |                                | PA   |
| <b>ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 10000-32000 UNIT, 15000-47000 UNIT, 20000-63000 UNIT, 25000-79000 UNIT, 3000-10000 UNIT, 40000-126000 UNIT</b> |                                | PA   |
| <b>ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 5000-24000 UNIT</b>  |                                | PA   |

| Formulary Drug Name  | Reference  | Restrictions           |
|--|------------|------------------------|
| <b>*Diuretics*</b>   |            |                        |
| <b>*Carbonic Anhydrase Inhibitors***</b>                     |            |                        |
| <i>acetazolamide oral tablet 125 mg, 250 mg</i>              |            |                        |
| <b>*Diuretic Combinations***</b>                             |            |                        |
| <i>amiloride-hydrochlorothiazide oral tablet 5-50 mg</i>     |            |                        |
| <i>spironolactone-hctz oral tablet 25-25 mg</i>              |            |                        |
| <i>triamterene-hctz oral capsule 37.5-25 mg</i>              |            |                        |
| <i>triamterene-hctz oral tablet 37.5-25 mg</i>               | Maxzide-25 |                        |
| <i>triamterene-hctz oral tablet 75-50 mg</i>                 | Maxzide    |                        |
| <b>*Loop Diuretics***</b>                                    |            |                        |
| <i>bumetanide oral tablet 0.5 mg</i>                         | Bumex      |                        |
| <i>bumetanide oral tablet 1 mg, 2 mg</i>                     |            |                        |
| <i>furosemide oral solution 10 mg/ml, 8 mg/ml</i>            |            |                        |
| <i>furosemide oral tablet 20 mg, 40 mg, 80 mg</i>            | Lasix      |                        |
| <i>torseamide oral tablet 10 mg, 100 mg, 5 mg</i>            |            |                        |
| <i>torseamide oral tablet 20 mg</i>                          | Soanz      |                        |
| <b>*Potassium Sparing Diuretics***</b>                       |            |                        |
| <i>amiloride hcl oral tablet 5 mg</i>                        |            |                        |
| <i>spironolactone oral tablet 100 mg, 25 mg, 50 mg</i>       | Aldactone  |                        |
| <b>*Thiazides And Thiazide-Like Diuretics***</b>             |            |                        |
| <i>chlorthalidone oral tablet 25 mg, 50 mg</i>               |            |                        |
| <i>hydrochlorothiazide oral capsule 12.5 mg</i>              |            |                        |
| <i>hydrochlorothiazide oral tablet 12.5 mg, 25 mg, 50 mg</i> |            |                        |
| <i>indapamide oral tablet 1.25 mg, 2.5 mg</i>                |            |                        |
| <i>metolazone oral tablet 10 mg, 2.5 mg, 5 mg</i>            |            |                        |
| <b>*Endocrine And Metabolic Agents - Misc.*</b>              |            |                        |
| <b>*Bisphosphonates***</b>                                   |            |                        |
| <i>alendronate sodium oral tablet 10 mg, 35 mg, 5 mg</i>     |            |                        |
| <i>alendronate sodium oral tablet 70 mg</i>                  | Fosamax    |                        |
| <i>ibandronate sodium intravenous solution 3 mg/3ml</i>      |            | QLL (3 ML per 84 days) |
| <i>ibandronate sodium oral tablet 150 mg</i>                 |            |                        |

| <b>Formulary Drug Name</b>  | <b>Reference</b> | <b>Restrictions</b>           |
|---|------------------|-------------------------------|
| <i>pamidronate disodium intravenous solution 30 mg/10ml, 90 mg/10ml</i>   |                  |                               |
| <b>PAMIDRONATE DISODIUM INTRAVENOUS SOLUTION 6 MG/ML</b>  |                  |                               |
| <b>*Calcimimetic Agents***</b>  |                  |                               |
| <i>cinacalcet hcl oral tablet 30 mg, 60 mg, 90 mg</i>   | Sensipar         | PA                            |
| <b>*Calcitonins***</b>  |                  |                               |
| <i>calcitonin (salmon) nasal solution 200 unit/act</i>  |                  |                               |
| <b>*Carnitine Replenisher - Agents***</b>   |                  |                               |
| <i>levocarnitine oral solution 1 gm/10ml</i>  | Carnitor         |                               |
| <i>levocarnitine oral tablet 330 mg</i>   | Carnitor         |                               |
| <b>*Dopamine Receptor Agonists***</b>   |                  |                               |
| <i>cabergoline oral tablet 0.5 mg</i>   |                  | QLL (16 EA per 30 days)       |
| <b>*Growth Hormones***</b>  |                  |                               |
| <b>GENOTROPIN MINIQUICK SUBCUTANEOUS PREFILLED SYRINGE 0.2 MG, 0.4 MG, 0.6 MG, 0.8 MG, 1 MG, 1.2 MG, 1.4 MG, 1.6 MG, 1.8 MG, 2 MG</b> |                  | PA                            |
| <b>GENOTROPIN SUBCUTANEOUS CARTRIDGE 12 MG, 5 MG</b>  |                  | PA                            |
| <b>NORDITROPIN FLEXPRO SUBCUTANEOUS SOLUTION PEN-INJECTOR 10 MG/1.5ML, 15 MG/1.5ML, 30 MG/3ML, 5 MG/1.5ML</b>                         |                  | PA                            |
| <b>*Hyperparathyroid Treatment - Vitamin D Analogs***</b>   |                  |                               |
| <i>calcitriol oral capsule 0.25 mcg, 0.5 mcg</i>  | Rocaltrol        |                               |
| <i>paricalcitol oral capsule 1 mcg, 2 mcg</i>   | Zemplar          | ST; QLL (1 EA per 1 day)      |
| <i>paricalcitol oral capsule 4 mcg</i>  |                  | ST; QLL (1 EA per 1 day)      |
| <b>*Lhrh/Gnrh Agonist Analog Pituitary Suppressants***</b>  |                  |                               |
| <b>SUPPRELIN LA SUBCUTANEOUS KIT 50 MG</b>  |                  | PA                            |
| <b>*Parathyroid Hormone And Derivatives***</b>  |                  |                               |
| <b>TYMLOS SUBCUTANEOUS SOLUTION PEN-INJECTOR 3120 MCG/1.56ML</b>  |                  | PA; QLL (1.56 ML per 30 days) |
| <b>*Rank Ligand (Rankl) Inhibitors***</b>   |                  |                               |
| <b>PROLIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 60 MG/ML</b>  |                  | PA; QLL (1 ML per 168 days)   |

| Formulary Drug Name   | Reference   | Restrictions            |
|---|-------------|-------------------------|
| <b>*Selective Estrogen Receptor Modulators (Serms)***</b>   |             |                         |
| <i>raloxifene hcl oral tablet 60 mg</i>   | Evista      |                         |
| <b>*Somatostatic Agents***</b>  |             |                         |
| <i>octreotide acetate injection solution 100 mcg/ml, 50 mcg/ml, 500 mcg/ml</i>                      | SandoSTATIN | PA                      |
| <i>octreotide acetate injection solution 1000 mcg/ml, 200 mcg/ml</i>                                |             | PA                      |
| <i>octreotide acetate subcutaneous solution prefilled syringe 100 mcg/ml, 50 mcg/ml, 500 mcg/ml</i> |             | PA                      |
| <b>SANDOSTATIN LAR DEPOT INTRAMUSCULAR KIT 10 MG, 20 MG, 30 MG</b>                                  |             | PA                      |
| <b>*Vasopressin***</b>  |             |                         |
| <i>desmopressin acetate oral tablet 0.1 mg, 0.2 mg</i>  | DDAVP       | QLL (3 EA per 1 day)    |
| <i>desmopressin acetate spray nasal solution 0.01 %</i>   |             | QLL (10 ML per 25 days) |
| <b>*Estrogens*</b>  |             |                         |
| <b>*Estrogen &amp; Progestin***</b>   |             |                         |
| <i>amabelz oral tablet 0.5-0.1 mg, 1-0.5 mg</i>   | Amabelz     | QLL (1 EA per 1 day)    |
| <b>CLIMARA PRO TRANSDERMAL PATCH WEEKLY 0.045-0.015 MG/DAY</b>                                      |             | QLL (4 EA per 28 days)  |
| <b>COMBIPATCH TRANSDERMAL PATCH TWICE WEEKLY 0.05-0.14 MG/DAY, 0.05-0.25 MG/DAY</b>                 |             | QLL (8 EA per 28 days)  |
| <i>estradiol-norethindrone acet oral tablet 0.5-0.1 mg, 1-0.5 mg</i>                                | Amabelz     | QLL (1 EA per 1 day)    |
| <i>fyavolv oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg</i>   | Fyavolv     | QLL (1 EA per 1 day)    |
| <i>jinteli oral tablet 1-5 mg-mcg</i>   | Fyavolv     | QLL (1 EA per 1 day)    |
| <i>lopreeza oral tablet 0.5-0.1 mg, 1-0.5 mg</i>  | Amabelz     | QLL (1 EA per 1 day)    |
| <i>mimvey lo oral tablet 0.5-0.1 mg</i>   | Amabelz     | QLL (1 EA per 1 day)    |
| <i>mimvey oral tablet 1-0.5 mg</i>  | Amabelz     | QLL (1 EA per 1 day)    |
| <i>norethindrone-eth estradiol oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg</i>                           | Fyavolv     | QLL (1 EA per 1 day)    |
| <b>*Estrogens***</b>  |             |                         |
| <i>estradiol oral tablet 0.5 mg, 1 mg, 2 mg</i>   | Estrace     |                         |



| <b>Formulary Drug Name</b>  | <b>Reference</b>           | <b>Restrictions</b>    |
|---|----------------------------|------------------------|
| <i>estradiol transdermal patch weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.06 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr</i> | Climara                    | QLL (4 EA per 30 days) |
| <b>*Fluoroquinolones*</b>   |                            |                        |
| <b>*Fluoroquinolones***</b>   |                            |                        |
| <b>BAXDELA INTRAVENOUS SOLUTION RECONSTITUTED 300 MG</b>  |                            |                        |
| <i>ciprofloxacin hcl oral tablet 100 mg, 750 mg</i>   |                            |                        |
| <i>ciprofloxacin hcl oral tablet 250 mg, 500 mg</i>   | Cipro                      |                        |
| <i>ciprofloxacin oral suspension reconstituted 250 mg/5ml (5%), 500 mg/5ml (10%)</i>  | Cipro                      |                        |
| <i>levofloxacin oral solution 25 mg/ml</i>  |                            | AL (Max 12 Years)      |
| <i>levofloxacin oral tablet 250 mg, 750 mg</i>  | Levaquin                   |                        |
| <i>levofloxacin oral tablet 500 mg</i>  |                            |                        |
| <b>*Gastrointestinal Agents - Misc.*</b>  |                            |                        |
| <b>*Antiflatulents***</b>   |                            |                        |
| <b>BICARSIM ORAL TABLET 80 MG</b>   |                            | OTC                    |
| <i>cvs gas relief drops ex st oral liquid 40 mg/0.6ml</i>   | Gas-X Infant Drops         | OTC                    |
| <i>cvs gas relief extra strength oral tablet chewable 125 mg</i>  | Phazyme                    | OTC                    |
| <i>cvs gas relief infants oral suspension 20 mg/0.3ml</i>   | Little Remedies for Tummys | OTC                    |
| <i>cvs gas relief oral capsule 125 mg</i>   | Gas-X Extra Strength       | OTC                    |
| <i>cvs gas relief oral tablet chewable 80 mg</i>  |                            | OTC                    |
| <i>cvs gas relief ultra strength oral capsule 180 mg</i>  | Gas-X Ultra Strength       | OTC                    |
| <i>cvs infants gas relief oral suspension 20 mg/0.3ml</i>   | Little Remedies for Tummys | OTC                    |
| <i>drxchoice gas relief oral tablet chewable 80 mg</i>  |                            | OTC                    |
| <i>eq gas relief extra strength oral tablet chewable 125 mg</i>   | Phazyme                    | OTC                    |
| <i>eq gas relief oral capsule 125 mg</i>  | Gas-X Extra Strength       | OTC                    |
| <i>eq gas relief oral tablet chewable 125 mg</i>  | Phazyme                    | OTC                    |
| <i>eq infants gas relief oral suspension 40 mg/0.6ml</i>  | Little Remedies for Tummys | OTC                    |
| <i>eql gas gone oral tablet chewable 125 mg</i>   | Phazyme                    | OTC                    |
| <i>eql gas relief oral capsule 125 mg</i>   | Gas-X Extra Strength       | OTC                    |
| <i>eql gas relief ultra strength oral capsule 180 mg</i>  | Gas-X Ultra Strength       | OTC                    |

| <b>Formulary Drug Name</b>   | <b>Reference</b>              | <b>Restrictions</b> |
|--|-------------------------------|---------------------|
| <i>eql infants gas relief oral suspension 20 mg/0.3ml</i>          | Little Remedies for Tummys    | OTC                 |
| <i>gas relief extra strength oral capsule 125 mg</i>               | Gas-X Extra Strength          | OTC                 |
| <i>gas relief extra strength oral tablet chewable 125 mg</i>       | Phazyme                       | OTC                 |
| <i>gas relief maximum strength oral tablet chewable 125 mg</i>     | Phazyme                       | OTC                 |
| <i>gas relief oral capsule 180 mg</i>                              | Gas-X Ultra Strength          | OTC                 |
| <i>gas relief oral liquid 40 mg/0.6ml</i>                          | Gas-X Infant Drops            | OTC                 |
| <i>gas relief oral suspension 20 mg/0.3ml</i>                      | Little Remedies for Tummys    | OTC                 |
| <i>gas relief oral tablet chewable 80 mg</i>                       |                               | OTC                 |
| <i>gas relief ultra strength oral capsule 180 mg</i>               | Gas-X Ultra Strength          | OTC                 |
| <i>gas-x extra strength oral capsule 125 mg</i>                    | Gas-X Extra Strength          | OTC                 |
| <b>GAS-X EXTRA STRENGTH ORAL STRIP 62.5 MG</b>                     |                               | OTC                 |
| <b>GAS-X EXTRA STRENGTH ORAL TABLET CHEWABLE 125 MG</b>            | cvs gas relief extra strength | OTC                 |
| <i>gas-x infant drops oral liquid 20 mg/0.3ml</i>                  | Gas-X Infant Drops            | OTC                 |
| <b>GAS-X ORAL TABLET CHEWABLE 80 MG</b>                            | cvs gas relief                | OTC                 |
| <i>gas-x ultra strength oral capsule 180 mg</i>                    | Gas-X Ultra Strength          | OTC                 |
| <i>gnp anti-gas oral capsule 180 mg</i>                            | Gas-X Ultra Strength          | OTC                 |
| <i>gnp gas relief extra strength oral capsule 125 mg</i>           | Gas-X Extra Strength          | OTC                 |
| <i>gnp gas relief extra strength oral tablet chewable 125 mg</i>   | Phazyme                       | OTC                 |
| <i>gnp gas relief max st oral tablet chewable 125 mg</i>           | Phazyme                       | OTC                 |
| <i>gnp gas relief oral tablet chewable 80 mg</i>                   |                               | OTC                 |
| <i>gnp infants gas relief oral suspension 20 mg/0.3ml</i>          | Little Remedies for Tummys    | OTC                 |
| <i>goodsense gas relief oral tablet chewable 125 mg</i>            | Phazyme                       | OTC                 |
| <i>hm gas relief extra strength oral capsule 125 mg</i>            | Gas-X Extra Strength          | OTC                 |
| <i>hm gas relief infants drops oral suspension 20 mg/0.3ml</i>     | Little Remedies for Tummys    | OTC                 |
| <i>hm gas relief oral tablet chewable 125 mg</i>                   | Phazyme                       | OTC                 |
| <i>hm gas relief oral tablet chewable 80 mg</i>                    |                               | OTC                 |
| <i>infants gas relief oral suspension 20 mg/0.3ml, 40 mg/0.6ml</i> | Little Remedies for Tummys    | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b>              | <b>Restrictions</b> |
|---|-------------------------------|---------------------|
| <i>infants simethicone oral suspension 20 mg/0.3ml</i>            | Little Remedies for Tummys    | OTC                 |
| <i>little remedies for tummys oral suspension 20 mg/0.3ml</i>     | Little Remedies for Tummys    | OTC                 |
| <i>little remedies gas relief oral suspension 20 mg/0.3ml</i>     | Little Remedies for Tummys    | OTC                 |
| <i>little tummys gas relief oral suspension 20 mg/0.3ml</i>       | Little Remedies for Tummys    | OTC                 |
| <i>mi-acid gas relief oral tablet chewable 80 mg</i>              |                               | OTC                 |
| <i>mytab gas oral tablet chewable 80 mg</i>                       |                               | OTC                 |
| <i>pediacare infants gas relief oral suspension 20 mg/0.3ml</i>   | Little Remedies for Tummys    | OTC                 |
| <b>PHAZYME MAXIMUM STRENGTH ORAL CAPSULE 250 MG</b>               | qc gas relief                 | OTC                 |
| <b>PHAZYME ORAL CAPSULE 180 MG</b>                                | cvs gas relief ultra strength | OTC                 |
| <i>phazyme oral tablet chewable 125 mg</i>                        | Phazyme                       | OTC                 |
| <b>PHAZYME ULTRA STRENGTH ORAL CAPSULE 180 MG</b>                 | cvs gas relief ultra strength | OTC                 |
| <i>px gas relief extra strength oral capsule 125 mg</i>           | Gas-X Extra Strength          | OTC                 |
| <i>px gas relief infants oral suspension 20 mg/0.3ml</i>          | Little Remedies for Tummys    | OTC                 |
| <i>px gas relief ultra strength oral capsule 180 mg</i>           | Gas-X Ultra Strength          | OTC                 |
| <i>qc anti-gas oral capsule 180 mg</i>                            | Gas-X Ultra Strength          | OTC                 |
| <i>qc gas relief extra strength oral tablet chewable 125 mg</i>   | Phazyme                       | OTC                 |
| <i>qc gas relief oral capsule 125 mg</i>                          | Gas-X Extra Strength          | OTC                 |
| <i>qc gas relief oral tablet chewable 80 mg</i>                   |                               | OTC                 |
| <i>ra gas relief extra strength oral capsule 125 mg</i>           | Gas-X Extra Strength          | OTC                 |
| <i>ra gas relief extra strength oral tablet chewable 125 mg</i>   | Phazyme                       | OTC                 |
| <i>ra gas relief maximum strength oral tablet chewable 125 mg</i> | Phazyme                       | OTC                 |
| <i>ra gas relief oral capsule 125 mg</i>                          | Gas-X Extra Strength          | OTC                 |
| <i>ra gas relief oral suspension 40 mg/0.6ml</i>                  | Little Remedies for Tummys    | OTC                 |
| <i>ra gas relief oral tablet chewable 80 mg</i>                   |                               | OTC                 |
| <i>ra gas relief ultra strength oral capsule 180 mg</i>           | Gas-X Ultra Strength          | OTC                 |
| <i>ra gas relief/infants oral suspension 20 mg/0.3ml</i>          | Little Remedies for Tummys    | OTC                 |

| <b>Formulary Drug Name</b>                                       | <b>Reference</b>           | <b>Restrictions</b>   |
|--|----------------------------|-----------------------|
| <i>sb anti-gas oral capsule 180 mg</i>                           | Gas-X Ultra Strength       | OTC                   |
| <i>sb gas relief oral suspension 40 mg/0.6ml</i>                 | Little Remedies for Tummys | OTC                   |
| <i>sb gas relief oral tablet chewable 125 mg</i>                 | Phazyme                    | OTC                   |
| <i>simeped oral suspension 40 mg/0.6ml</i>                       | Little Remedies for Tummys | OTC                   |
| <i>simethicone extra strength oral capsule 125 mg</i>            | Gas-X Extra Strength       | OTC                   |
| <i>simethicone oral capsule 125 mg</i>                           | Gas-X Extra Strength       | OTC                   |
| <i>simethicone oral capsule 180 mg</i>                           | Gas-X Ultra Strength       | OTC                   |
| <i>simethicone oral suspension 40 mg/0.6ml</i>                   | Little Remedies for Tummys | OTC                   |
| <i>simethicone oral tablet chewable 125 mg</i>                   | Phazyme                    | OTC                   |
| <i>simethicone oral tablet chewable 80 mg</i>                    |                            | OTC                   |
| <i>sm gas relief antifatulent oral capsule 180 mg</i>            | Gas-X Ultra Strength       | OTC                   |
| <i>sm gas relief extra strength oral capsule 125 mg</i>          | Gas-X Extra Strength       | OTC                   |
| <i>sm gas relief infants drops oral suspension 40 mg/0.6ml</i>   | Little Remedies for Tummys | OTC                   |
| <i>sm gas relief infants oral suspension 20 mg/0.3ml</i>         | Little Remedies for Tummys | OTC                   |
| <i>sm gas relief oral tablet chewable 125 mg</i>                 | Phazyme                    | OTC                   |
| <i>sm gas relief oral tablet chewable 80 mg</i>                  |                            | OTC                   |
| <i>tgt gas relief extra strength oral capsule 125 mg</i>         | Gas-X Extra Strength       | OTC                   |
| <i>tgt gas relief extra strength oral tablet chewable 125 mg</i> | Phazyme                    | OTC                   |
| <i>tgt gas relief infants oral liquid 20 mg/0.3ml</i>            | Gas-X Infant Drops         | OTC                   |
| <b>*Gallstone Solubilizing Agents***</b>                         |                            |                       |
| <i>ursodiol oral capsule 300 mg</i>                              |                            |                       |
| <i>ursodiol oral tablet 250 mg</i>                               | Urso 250                   |                       |
| <i>ursodiol oral tablet 500 mg</i>                               | Urso Forte                 |                       |
| <b>*Gastrointestinal Antiallergy Agents***</b>                   |                            |                       |
| <i>cromolyn sodium oral concentrate 100 mg/5ml</i>               | Gastrocrom                 |                       |
| <b>GASTROCROM ORAL CONCENTRATE 100 MG/5ML</b>                    | cromolyn sodium            |                       |
| <b>*Gastrointestinal Chloride Channel Activators***</b>          |                            |                       |
| <b>AMITIZA ORAL CAPSULE 24 MCG, 8 MCG</b>                        | lubiprostone               | PA; AL (Min 18 Years) |
| <i>lubiprostone oral capsule 24 mcg, 8 mcg</i>                   | Amitiza                    | PA; AL (Min 18 Years) |

| <b>Formulary Drug Name</b>  | <b>Reference</b>   | <b>Restrictions</b>   |
|---|--------------------|-----------------------|
| <b>*Gastrointestinal Stimulants***</b>                              |                    |                       |
| <i>metoclopramide hcl injection solution 5 mg/ml</i>                |                    |                       |
| <i>metoclopramide hcl oral solution 10 mg/10ml, 5 mg/5ml</i>        |                    |                       |
| <i>metoclopramide hcl oral tablet 10 mg, 5 mg</i>                   | Reglan             |                       |
| <b>*Ibs Agent - Guanylate Cyclase-C (Gc-C) Agonists***</b>          |                    |                       |
| <b>LINZESS ORAL CAPSULE 145 MCG, 290 MCG</b>                        |                    | PA; AL (Min 18 Years) |
| <b>LINZESS ORAL CAPSULE 72 MCG</b>                                  |                    | PA; AL (Min 6 Years)  |
| <b>*Inflammatory Bowel Agents***</b>                                |                    |                       |
| <b>APRISO ORAL CAPSULE EXTENDED RELEASE 24 HOUR 0.375 GM</b>        | mesalamine er      |                       |
| <i>balsalazide disodium oral capsule 750 mg</i>                     | Colazal            |                       |
| <i>mesalamine er oral capsule extended release 24 hour 0.375 gm</i> | Apriso             |                       |
| <i>mesalamine er oral capsule extended release 500 mg</i>           | Pentasa            |                       |
| <i>mesalamine oral capsule delayed release 400 mg</i>               | Delzicol           |                       |
| <i>mesalamine rectal enema 4 gm</i>                                 |                    |                       |
| <i>mesalamine rectal suppository 1000 mg</i>                        | Canasa             |                       |
| <b>PENTASA ORAL CAPSULE EXTENDED RELEASE 250 MG</b>                 |                    |                       |
| <b>PENTASA ORAL CAPSULE EXTENDED RELEASE 500 MG</b>                 | mesalamine er      |                       |
| <i>sulfasalazine oral tablet 500 mg</i>                             | Azulfidine         |                       |
| <i>sulfasalazine oral tablet delayed release 500 mg</i>             | Azulfidine EN-tabs |                       |
| <b>*Intestinal Acidifiers***</b>                                    |                    |                       |
| <i>enulose oral solution 10 gm/15ml</i>                             |                    |                       |
| <i>generlac oral solution 10 gm/15ml</i>                            |                    |                       |
| <i>lactulose encephalopathy oral solution 10 gm/15ml</i>            |                    |                       |
| <b>*Peripheral Opioid Receptor Antagonists***</b>                   |                    |                       |
| <b>MOVANTI<sup>K</sup> ORAL TABLET 12.5 MG, 25 MG</b>               |                    | PA; AL (Min 18 Years) |
| <b>*Phosphate Binder Agents***</b>                                  |                    |                       |
| <i>calcium acetate (phos binder) oral capsule 667 mg</i>            |                    |                       |

| <b>Formulary Drug Name</b>  | <b>Reference</b>      | <b>Restrictions</b> |
|---|-----------------------|---------------------|
| <i>calcium acetate (phos binder) oral tablet 667 mg</i>                   | Calphron              |                     |
| <i>calphron oral tablet 667 mg</i>  | Calphron              | OTC                 |
| <i>sevelamer carbonate oral tablet 800 mg</i>                             | Renvela               |                     |
| <b>*Tumor Necrosis Factor Alpha Blockers***</b>                           |                       |                     |
| <i>infliximab intravenous solution reconstituted 100 mg</i>               | Remicade              |                     |
| <b>*Genitourinary Agents - Miscellaneous*</b>                             |                       |                     |
| <b>*5-Alpha Reductase Inhibitors***</b>                                   |                       |                     |
| <i>dutasteride oral capsule 0.5 mg</i>                                    | Avodart               |                     |
| <i>finasteride oral tablet 5 mg</i>                                       | Proscar               |                     |
| <b>*Alpha 1-Adrenoceptor Antagonists***</b>                               |                       |                     |
| <i>alfuzosin hcl er oral tablet extended release 24 hour 10 mg</i>        | Uroxatral             |                     |
| <i>tamsulosin hcl oral capsule 0.4 mg</i>                                 | Flomax                |                     |
| <b>*Citrates***</b>   |                       |                     |
| <i>cytra k crystals oral packet 3300-1002 mg</i>                          |                       |                     |
| <i>cytra-2 oral solution 500-334 mg/5ml</i>                               |                       | OTC                 |
| <i>cytra-k oral solution 1100-334 mg/5ml</i>                              |                       | OTC                 |
| <i>potassium citrate er oral tablet extended release 10 meq (1080 mg)</i> | Urocit-K 10           |                     |
| <i>potassium citrate er oral tablet extended release 15 meq (1620 mg)</i> | Urocit-K 15           |                     |
| <i>potassium citrate er oral tablet extended release 5 meq (540 mg)</i>   | Urocit-K 5            |                     |
| <i>potassium citrate-citric acid oral solution 1100-334 mg/5ml</i>        |                       |                     |
| <i>sod citrate-citric acid oral solution 500-334 mg/5ml</i>               |                       |                     |
| <i>taron-crystals oral packet 3300-1002 mg</i>                            |                       |                     |
| <b>*Genitourinary Irrigants***</b>  |                       |                     |
| <i>argyle sterile saline irrigation solution 0.9 %</i>                    | Argyle Sterile Saline |                     |
| <i>curity sterile saline irrigation solution 0.9 %</i>                    | Argyle Sterile Saline |                     |
| <i>sodium chloride irrigation solution 0.9 %</i>                          | Argyle Sterile Saline |                     |
| <b>*Phosphates***</b>   |                       |                     |
| <b>K-PHOS NO 2 ORAL TABLET 305-700 MG</b>                                 |                       |                     |

| <b>Formulary Drug Name</b>   | <b>Reference</b>        | <b>Restrictions</b> |
|--|-------------------------|---------------------|
| <b>*Urinary Analgesics***</b>  |                         |                     |
| <i>phenazo oral tablet 200 mg</i>  | Phenazo                 |                     |
| <i>phenazopyridine hcl oral tablet 100 mg</i>  | Pyridium                |                     |
| <i>phenazopyridine hcl oral tablet 200 mg</i>  | Phenazo                 |                     |
| <i>phenazopyridine hcl oral tablet 95 mg</i>   | AZO Urinary Pain Relief | OTC                 |
| <b>*Gout Agents*</b>   |                         |                     |
| <b>*Gout Agent Combinations***</b>   |                         |                     |
| <i>colchicine-probenecid oral tablet 0.5-500 mg</i>  |                         |                     |
| <b>*Gout Agents***</b>   |                         |                     |
| <i>allopurinol oral tablet 100 mg, 300 mg</i>  | Zyloprim                |                     |
| <i>colchicine oral tablet 0.6 mg</i>   | Colcrys                 |                     |
| <i>febuxostat oral tablet 40 mg, 80 mg</i>   | Uloric                  | ST                  |
| <b>*Uricosurics***</b>   |                         |                     |
| <i>probenecid oral tablet 500 mg</i>   |                         |                     |
| <b>*Hematological Agents - Misc.*</b>  |                         |                     |
| <b>*Antihemophilic Products - Monoclonal Antibodies***</b>   |                         |                     |
| <b>HEMLIBRA SUBCUTANEOUS SOLUTION 105 MG/0.7ML, 150 MG/ML, 30 MG/ML, 60 MG/0.4ML</b>   |                         |                     |
| <b>*Antihemophilic Products***</b>   |                         |                     |
| <b>ADVATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT</b>   |                         |                     |
| <b>ADYNOVATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT, 750 UNIT</b> |                         |                     |
| <b>AFSTYLA INTRAVENOUS KIT 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 2500 UNIT, 3000 UNIT, 500 UNIT</b>                     |                         |                     |
| <b>ALPHANATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT</b>                      |                         |                     |
| <b>ALPHANINE SD INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 500 UNIT</b>  |                         |                     |



| <b>Formulary Drug Name</b>   | <b>Reference</b> | <b>Restrictions</b> |
|--|------------------|---------------------|
| <b>ALPROLIX INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT</b>  |                  |                     |
| <b>BENEFIX INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT</b>   |                  |                     |
| <b>COAGADEX INTRAVENOUS SOLUTION RECONSTITUTED 250 UNIT, 500 UNIT</b>  |                  |                     |
| <b>CORIFACT INTRAVENOUS KIT 1000-1600 UNIT</b>   |                  |                     |
| <b>ELOCTATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT, 5000 UNIT, 6000 UNIT, 750 UNIT</b> |                  |                     |
| <b>ESPEROCT INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 3000 UNIT, 500 UNIT</b>  |                  |                     |
| <b>FEIBA INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2500 UNIT, 500 UNIT</b>   |                  |                     |
| <b>HEMOFIL M INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1700 UNIT, 250 UNIT, 500 UNIT</b>   |                  |                     |
| <b>HUMATE-P INTRAVENOUS SOLUTION RECONSTITUTED 1000-2400 UNIT, 250-600 UNIT, 500-1200 UNIT</b>   |                  |                     |
| <b>IDELVION INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 3500 UNIT, 500 UNIT</b>   |                  |                     |
| <b>IXINITY INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT</b>  | rixubis          |                     |
| <b>IXINITY INTRAVENOUS SOLUTION RECONSTITUTED 1500 UNIT</b>  |                  |                     |
| <b>JIVI INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 3000 UNIT, 500 UNIT</b>   |                  |                     |
| <b>KOATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 250 UNIT, 500 UNIT</b>  |                  |                     |
| <b>KOATE-DVI INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 500 UNIT</b>  |                  |                     |

| <b>Formulary Drug Name</b>   | <b>Reference</b> | <b>Restrictions</b> |
|--|------------------|---------------------|
| <b>KOGENATE FS INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT</b>   |                  |                     |
| <b>KOVALTRY INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT</b>                               |                  |                     |
| <b>NOVOEIGHT INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT</b>                   |                  |                     |
| <b>NOVOSEVEN RT INTRAVENOUS SOLUTION RECONSTITUTED 1 MG, 2 MG, 5 MG, 8 MG</b>  |                  |                     |
| <b>NUWIQ INTRAVENOUS KIT 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 2500 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT</b>                    |                  |                     |
| <b>NUWIQ INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 2500 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT</b> |                  |                     |
| <b>OBIZUR INTRAVENOUS SOLUTION RECONSTITUTED 500 UNIT</b>  |                  |                     |
| <b>PROFILNINE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 500 UNIT</b>  |                  |                     |
| <b>REBINYN INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 3000 UNIT, 500 UNIT</b>  |                  |                     |
| <b>RECOMBINATE INTRAVENOUS SOLUTION RECONSTITUTED 1241-1800 UNIT, 1801-2400 UNIT, 220-400 UNIT, 401-800 UNIT, 801-1240 UNIT</b>      |                  |                     |
| <i>rixubis intravenous solution reconstituted 1000 unit, 2000 unit, 250 unit, 3000 unit, 500 unit</i>                                | Ixinity          |                     |
| <b>SEVENFACT INTRAVENOUS SOLUTION RECONSTITUTED 1 MG, 5 MG</b>   |                  |                     |
| <b>TRETTEN INTRAVENOUS SOLUTION RECONSTITUTED 2000-3125 UNIT</b>   |                  |                     |
| <b>VONVENDI INTRAVENOUS SOLUTION RECONSTITUTED 1300 UNIT, 650 UNIT</b>   |                  |                     |
| <b>WILATE INTRAVENOUS KIT 1000-1000 UNIT, 500-500 UNIT</b>   |                  |                     |

| Formulary Drug Name  | Reference | Restrictions                                 |
|--|-----------|--|
| <b>XYNTHA INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT</b>                     |           |  |
| <b>XYNTHA SOLOFUSE INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT</b> |           |  |
| <b>*C1 Esterase Inhibitors***</b>  |           |  |
| <b>BERINERT INTRAVENOUS KIT 500 UNIT</b>   |           | PA; QLL (4 EA per 2 days)                    |
| <b>CINRYZE INTRAVENOUS SOLUTION RECONSTITUTED 500 UNIT</b>                                 |           | PA; AL (Min 6 Years)                         |
| <b>*Direct-Acting P2y12 Inhibitors***</b>  |           |  |
| <b>BRILINTA ORAL TABLET 60 MG, 90 MG</b>   |           |  |
| <b>*Hematorheologic Agents***</b>  |           |  |
| <i>pentoxifylline er oral tablet extended release 400 mg</i>                               |           |  |
| <b>*Phosphodiesterase Iii Inhibitors***</b>  |           |  |
| <i>cilostazol oral tablet 100 mg, 50 mg</i>  |           |  |
| <b>*Plasma Kallikrein Inhibitors***</b>  |           |  |
| <b>KALBITOR SUBCUTANEOUS SOLUTION 10 MG/ML</b>   |           | PA; QLL (6 ML per 2 days); AL (Min 12 Years) |
| <b>*Platelet Aggregation Inhibitors***</b>   |           |  |
| <i>dipyridamole oral tablet 25 mg, 50 mg, 75 mg</i>  |           |  |
| <b>*Quinazoline Agents***</b>  |           |  |
| <i>anagrelide hcl oral capsule 0.5 mg</i>  | Agrylin   |  |
| <i>anagrelide hcl oral capsule 1 mg</i>  |           |  |
| <b>*Thienopyridine Derivatives***</b>  |           |  |
| <i>clopidogrel bisulfate oral tablet 300 mg</i>  |           |  |
| <i>clopidogrel bisulfate oral tablet 75 mg</i>   | Plavix    |  |
| <i>prasugrel hcl oral tablet 10 mg, 5 mg</i>   | Effient   |  |
| <b>*Hematopoietic Agents*</b>  |           |  |
| <b>*Amino Acids***</b>   |           |  |
| <b>ENDARI ORAL PACKET 5 GM</b>   |           | AL (Min 5 Years)                             |
| <b>*Cobalamin Combinations***</b>  |           |  |
| <b>B-12 SUBLINGUAL TABLET SUBLINGUAL 100-5000 MCG, 1000-400 MCG</b>                        |           | OTC  |

| <b>Formulary Drug Name</b>  | <b>Reference</b>              | <b>Restrictions</b> |
|---|-------------------------------|---------------------|
| <b>*Cobalamins***</b>   |                               |                     |
| <b>B-12 DOTS ORAL TABLET DISPERSIBLE 500 MCG</b>                                |                               | OTC                 |
| <i>b12 fast dissolve oral tablet dispersible 5000 mcg</i>                       |                               | OTC                 |
| <i>b-12 microlozenge sublingual tablet sublingual 500 mcg</i>                   | B-12 Microlozenge             | OTC                 |
| <i>b-12 oral tablet 100 mcg, 2000 mcg, 250 mcg, 50 mcg</i>                      |                               | OTC                 |
| <b>B-12 ORAL TABLET 2500 MCG</b>  |                               | OTC                 |
| <i>b-12 oral tablet 500 mcg</i>   | Finest Nutrition Vitamin B-12 | OTC                 |
| <b>B-12 ORAL TABLET DISPERSIBLE 5000 MCG</b>                                    |                               | OTC                 |
| <i>b-12 oral tablet extended release 1000 mcg</i>                               |                               | OTC                 |
| <i>b-12 sublingual tablet sublingual 1000 mcg, 2500 mcg, 3000 mcg, 5000 mcg</i> |                               | OTC                 |
| <i>b-12 sublingual tablet sublingual 500 mcg</i>                                | B-12 Microlozenge             | OTC                 |
| <b>B-12 SUPER STRENGTH SUBLINGUAL LIQUID 5000 MCG/ML</b>                        |                               | OTC                 |
| <i>b-12 tr oral tablet extended release 1000 mcg, 2000 mcg</i>                  |                               | OTC                 |
| <i>b-12-sl sublingual tablet sublingual 1000 mcg</i>                            |                               | OTC                 |
| <i>cvs b-12 oral liquid 1000 mcg/15ml</i>                                       |                               | OTC                 |
| <i>cvs b-12 oral tablet 500 mcg</i>   | Finest Nutrition Vitamin B-12 | OTC                 |
| <i>cvs b12 oral tablet chewable 2500 mcg</i>                                    |                               | OTC                 |
| <i>cvs b-12 oral tablet dispersible 1500 mcg</i>                                | VitaMelts Energy Vitamin B-12 | OTC                 |
| <i>cvs b-12 sublingual tablet sublingual 500 mcg</i>                            | B-12 Microlozenge             | OTC                 |
| <i>cvs b-12 sublingual tablet sublingual 5000 mcg</i>                           |                               | OTC                 |
| <i>cvs vitamin b12 oral tablet 1000 mcg</i>                                     |                               | OTC                 |
| <i>cvs vitamin b-12 oral tablet 1000 mcg</i>                                    |                               | OTC                 |
| <i>cvs vitamin b-12 sublingual tablet sublingual 5000 mcg</i>                   |                               | OTC                 |
| <i>cyanocobalamin injection solution 1000 mcg/ml</i>                            | Dodex                         |                     |
| <i>cyanocobalamin sublingual tablet sublingual 2500 mcg</i>                     |                               | OTC                 |
| <i>eql b-12 oral tablet 1000 mcg</i>  |                               | OTC                 |
| <i>eql vitamin b-12 oral tablet 500 mcg</i>                                     | Finest Nutrition Vitamin B-12 | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>              | <b>Restrictions</b> |
|--|-------------------------------|---------------------|
| <i>eql vitamin b-12 tr oral tablet extended release 1000 mcg</i>         |                               | OTC                 |
| <i>gnp b-12 sublingual tablet sublingual 2500 mcg</i>                    |                               | OTC                 |
| <i>gnp vitamin b-12 oral tablet 500 mcg</i>                              | Finest Nutrition Vitamin B-12 | OTC                 |
| <i>gnp vitamin b-12 oral tablet extended release 1000 mcg</i>            |                               | OTC                 |
| <i>gnp vitamin b-12 tr oral tablet extended release 1000 mcg</i>         |                               | OTC                 |
| <i>hm super vitamin b12 oral tablet chewable 2500 mcg</i>                |                               | OTC                 |
| <i>hm vitamin b12 oral tablet extended release 1000 mcg</i>              |                               | OTC                 |
| <i>hm vitamin b-12 tr oral tablet extended release 2000 mcg</i>          |                               | OTC                 |
| <i>hm vitamin b-12 ultra strength oral tablet dispersible 5000 mcg</i>   |                               | OTC                 |
| <i>kp vitamin b-12 oral tablet 1000 mcg</i>                              |                               | OTC                 |
| <i>pa vitamin b-12 tr oral tablet extended release 2000 mcg</i>          |                               | OTC                 |
| <b>RA VITAMIN B-12 ORAL LIQUID 1000 MCG/ML</b>                           |                               | OTC                 |
| <i>ra vitamin b-12 oral tablet 100 mcg</i>                               |                               | OTC                 |
| <i>ra vitamin b-12 oral tablet extended release 1000 mcg</i>             |                               | OTC                 |
| <i>ra vitamin b12 oral tablet extended release 2000 mcg</i>              |                               | OTC                 |
| <i>ra vitamin b-12 tr oral tablet extended release 1000 mcg</i>          |                               | OTC                 |
| <b>RAPID B-12 ENERGY ORAL LIQUID 200 MCG/SPRAY</b>                       |                               | OTC                 |
| <i>sm vitamin b-12 oral tablet 100 mcg</i>                               |                               | OTC                 |
| <i>sm vitamin b-12 oral tablet 500 mcg</i>                               | Finest Nutrition Vitamin B-12 | OTC                 |
| <i>sm vitamin b12 tr oral tablet extended release 1000 mcg, 2000 mcg</i> |                               | OTC                 |
| <i>vitamelts energy vitamin b-12 oral tablet dispersible 1500 mcg</i>    | VitaMelts Energy Vitamin B-12 | OTC                 |
| <b>VITAMIN B 12 ORAL LOZENGE 250 MCG</b>                                 |                               | OTC                 |
| <i>vitamin b-12 er oral tablet extended release 1000 mcg, 2000 mcg</i>   |                               | OTC                 |
| <i>vitamin b-12 oral liquid 1000 mcg/15ml</i>                            |                               | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>              | <b>Restrictions</b> |
|--|-------------------------------|---------------------|
| <b>VITAMIN B-12 ORAL LOZENGE 50 MCG</b>  |                               | OTC                 |
| <i>vitamin b-12 oral lozenge 500 mcg</i>   |                               | OTC                 |
| <i>vitamin b12 oral tablet 100 mcg</i>   |                               | OTC                 |
| <i>vitamin b-12 oral tablet 100 mcg, 1000 mcg, 250 mcg, 50 mcg</i>   |                               | OTC                 |
| <i>vitamin b-12 oral tablet 500 mcg</i>  | Finest Nutrition Vitamin B-12 | OTC                 |
| <i>vitamin b-12 oral tablet dispersible 5000 mcg</i>   |                               | OTC                 |
| <i>vitamin b12 oral tablet extended release 1000 mcg</i>   |                               | OTC                 |
| <i>vitamin b-12 sublingual tablet sublingual 1000 mcg, 2500 mcg, 3000 mcg, 5000 mcg</i>                                  |                               | OTC                 |
| <i>vitamin b12 sublingual tablet sublingual 3000 mcg</i>   |                               | OTC                 |
| <i>vitamin b-12 sublingual tablet sublingual 500 mcg</i>   | B-12 Microlozenge             | OTC                 |
| <i>vitamin b12 tr oral tablet extended release 1000 mcg</i>  |                               | OTC                 |
| <b>*Cytotoxic Agents***</b>  |                               |                     |
| <b>DROXIA ORAL CAPSULE 200 MG, 300 MG, 400 MG</b>  |                               | AL (Min 18 Years)   |
| <b>*Erythropoiesis-Stimulating Agents (Esas)***</b>  |                               |                     |
| <b>EPOGEN INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML</b>                  |                               |                     |
| <b>RETACRIT INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 40000 UNIT/ML</b> |                               |                     |
| <b>*Folic Acid/Folate Combinations***</b>  |                               |                     |
| <i>fa-vitamin b-6-vitamin b-12 oral tablet 2.2-25-0.5 mg</i>   |                               |                     |
| <i>folplex 2.2 oral tablet 2.2-25-0.5 mg</i>   |                               |                     |
| <b>*Folic Acid/Folates***</b>  |                               |                     |
| <i>cvs folic acid oral tablet 800 mcg</i>  |                               | OTC                 |
| <i>fa-8 oral capsule 0.8 mg</i>  | FA-8                          | OTC                 |
| <i>fa-8 oral tablet 800 mcg</i>  |                               | OTC                 |
| <i>folic acid oral capsule 0.8 mg</i>  | FA-8                          | OTC                 |
| <b>FOLIC ACID ORAL CAPSULE 20 MG</b>   |                               | OTC                 |
| <i>folic acid oral tablet 1 mg</i>   |                               |                     |

| <b>Formulary Drug Name</b>   | <b>Reference</b> | <b>Restrictions</b> |
|--|------------------|---------------------|
| <i>folic acid oral tablet 400 mcg, 800 mcg</i>                                     |                  | OTC                 |
| <i>gnp folic acid oral tablet 400 mcg</i>  |                  | OTC                 |
| <i>hm folic acid oral tablet 400 mcg</i>   |                  | OTC                 |
| <i>kp folic acid oral tablet 1 mg, 800 mcg</i>                                     |                  | OTC                 |
| <i>px folic acid oral tablet 400 mcg</i>   |                  | OTC                 |
| <i>ra folic acid oral tablet 400 mcg, 800 mcg</i>                                  |                  | OTC                 |
| <i>sm folic acid oral tablet 400 mcg</i>   |                  | OTC                 |
| <i>yl folic acid oral tablet 400 mcg</i>   |                  | OTC                 |
| <b>*Granulocyte Colony-Stimulating Factors (G-Csf)***</b>                          |                  |                     |
| <b>GRANIX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MCG/0.5ML, 480 MCG/0.8ML</b> |                  | PA                  |
| <b>ZARXIO INJECTION SOLUTION PREFILLED SYRINGE 300 MCG/0.5ML, 480 MCG/0.8ML</b>    |                  | PA                  |
| <b>ZIEXTENZO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6 MG/0.6ML</b>                |                  | PA                  |
| <b>*Granulocyte/Macrophage Colony-Stimulating Factor(Gm-Csf)***</b>                |                  |                     |
| <b>LEUKINE INTRAVENOUS SOLUTION RECONSTITUTED 250 MCG</b>                          |                  | PA                  |
| <b>*Hemoglobin S (Hbs) Polymerization Inhibitors***</b>                            |                  |                     |
| <b>OXBRYTA ORAL TABLET 300 MG</b>  |                  | AL (Min 12 Years)   |
| <b>OXBRYTA ORAL TABLET 500 MG</b>  |                  | AL (Min 4 Years)    |
| <b>OXBRYTA ORAL TABLET SOLUBLE 300 MG</b>  |                  | AL (Min 4 Years)    |
| <b>*Iron Combinations***</b>   |                  |                     |
| <i>fe c tab oral tablet 100-250 mg</i>   | Icar-C           | OTC                 |
| <i>fe c tab plus oral tablet 100-250-0.025-1 mg</i>                                | Icar-C Plus      | OTC                 |
| <b>FOLITAB 500 ORAL TABLET EXTENDED RELEASE 105-500-0.8 MG</b>                     |                  | OTC                 |
| <b>ICAR-C ORAL TABLET 100-250 MG</b>   | fe c tab         | OTC                 |
| <i>icar-c plus oral tablet 100-250-0.025-1 mg</i>                                  | Icar-C Plus      |                     |
| <i>iron 100 plus oral tablet 100-250-0.025-1 mg</i>                                | Icar-C Plus      | OTC                 |
| <i>iron 100/c oral tablet 100-250 mg</i>   | Icar-C           | OTC                 |
| <b>VITRON-C ORAL TABLET 65-125 MG</b>  |                  | OTC                 |



| <b>Formulary Drug Name</b>   | <b>Reference</b> | <b>Restrictions</b> |
|--|------------------|---------------------|
| <b>*Iron***</b>  |                  |                     |
| <i>cvs iron oral tablet 240 (27 fe) mg</i>                               | Ferate           | OTC                 |
| <i>cvs iron oral tablet 325 (65 fe) mg</i>                               | FeroSul          | OTC                 |
| <i>cvs slow release iron oral tablet extended release 143 (45 fe) mg</i> |                  | OTC                 |
| <i>eq slow-release iron oral tablet extended release 45 mg</i>           |                  | OTC                 |
| <i>eql iron supplement therapy oral tablet 325 mg</i>                    | FeroSul          | OTC                 |
| <i>eql slow release iron oral tablet extended release 160 (50 fe) mg</i> |                  | OTC                 |
| <i>ezfe 200 oral capsule 434.8 (200 fe) mg</i>                           |                  | OTC                 |
| <i>fe tabs oral tablet delayed release 325 (65 fe) mg</i>                |                  | OTC                 |
| <b>FEOSOL ORAL TABLET 200 (65 FE) MG</b>                                 | gnp iron         | OTC                 |
| <i>ferate oral tablet 240 (27 fe) mg</i>                                 | Ferate           | OTC                 |
| <b>FERGON ORAL TABLET 240 (27 FE) MG</b>                                 | cvs iron         | OTC                 |
| <i>ferosul oral elixir 220 (44 fe) mg/5ml</i>                            |                  | OTC                 |
| <b>FERRETT'S ORAL TABLET 325 (106 FE) MG</b>                             |                  | OTC                 |
| <b>FERREX 150 ORAL CAPSULE 150 MG</b>                                    | ferric x-150     | OTC                 |
| <i>ferric x-150 oral capsule 150 mg</i>                                  | Ferrex 150       | OTC                 |
| <b>FERRIMIN 150 ORAL TABLET 150 MG</b>                                   |                  | OTC                 |
| <i>ferrocite oral tablet 324 mg</i>                                      | Ferrocite        | OTC                 |
| <i>ferrotabs oral tablet 240 mg</i>                                      | Ferate           | OTC                 |
| <b>FERROUS FUMARATE ORAL TABLET 29 MG</b>                                |                  | OTC                 |
| <i>ferrous fumarate oral tablet 324 (106 fe) mg</i>                      | Ferrocite        | OTC                 |
| <i>ferrous gluconate oral tablet 240 (27 fe) mg</i>                      | Ferate           | OTC                 |
| <i>ferrous gluconate oral tablet 324 (37.5 fe) mg</i>                    |                  | OTC                 |
| <b>FERROUS GLUCONATE ORAL TABLET 324 (38 FE) MG</b>                      |                  | OTC                 |
| <b>FERROUS SULFATE ER ORAL TABLET EXTENDED RELEASE 140 (45 FE) MG</b>    |                  | OTC                 |
| <i>ferrous sulfate er oral tablet extended release 50 mg</i>             |                  | OTC                 |
| <i>ferrous sulfate oral elixir 220 (44 fe) mg/5ml</i>                    |                  | OTC                 |
| <b>FERROUS SULFATE ORAL LIQUID 220 (44 FE) MG/5ML</b>                    |                  | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b> | <b>Restrictions</b> |
|---|------------------|---------------------|
| <b>FERROUS SULFATE ORAL SYRUP 300 (60 FE) MG/5ML</b>                      |                  | OTC                 |
| <i>ferrous sulfate oral tablet 27 mg</i>                                  |                  | OTC                 |
| <i>ferrous sulfate oral tablet 325 (65 fe) mg</i>                         | FeroSul          | OTC                 |
| <b>FERROUS SULFATE ORAL TABLET DELAYED RELEASE 324 (65 FE) MG</b>         |                  | OTC                 |
| <i>ferrous sulfate oral tablet delayed release 325 (65 fe) mg</i>         |                  | OTC                 |
| <i>ferrousul oral tablet 325 (65 fe) mg</i>                               | FeroSul          | OTC                 |
| <i>gnp iron oral tablet 200 (65 fe) mg</i>                                | Feosol           | OTC                 |
| <i>gnp iron oral tablet 325 (65 fe) mg</i>                                | FeroSul          | OTC                 |
| <i>gnp iron oral tablet extended release 142 (45 fe) mg</i>               | Slow Fe          | OTC                 |
| <i>gnp slow release iron oral tablet extended release 47.5 mg</i>         |                  | OTC                 |
| <b>HEMOCYTE ORAL TABLET 324 (106 FE) MG</b>                               | ferrous fumarate | OTC                 |
| <i>hm iron oral tablet 200 (65 fe) mg</i>                                 | Feosol           | OTC                 |
| <i>hm iron slow release oral tablet extended release 142 (45 fe) mg</i>   | Slow Fe          | OTC                 |
| <i>hm slow release iron oral tablet extended release 45 mg</i>            |                  | OTC                 |
| <i>iron (ferrous sulfate) oral tablet extended release 142 (45 fe) mg</i> | Slow Fe          | OTC                 |
| <i>iron 27 oral tablet 240 (27 fe) mg</i>                                 | Ferate           | OTC                 |
| <i>iron high-potency oral tablet 325 mg</i>                               | FeroSul          | OTC                 |
| <i>iron high-potency oral tablet extended release 142 (45 fe) mg</i>      | Slow Fe          | OTC                 |
| <i>iron oral tablet 240 (27 fe) mg</i>                                    | Ferate           | OTC                 |
| <b>IRON ORAL TABLET 28 MG</b>   |                  | OTC                 |
| <i>iron oral tablet 325 (65 fe) mg</i>                                    | FeroSul          | OTC                 |
| <i>iron oral tablet extended release 142 (45 fe) mg</i>                   | Slow Fe          | OTC                 |
| <i>iron slow release oral tablet extended release 143 (45 fe) mg</i>      |                  | OTC                 |
| <b>IRON UP ORAL LIQUID 15 MG/0.5ML</b>                                    |                  | OTC                 |
| <i>kp ferrous gluconate oral tablet 324 (37.5 fe) mg</i>                  |                  | OTC                 |
| <i>kp ferrous sulfate oral tablet 325 (65 fe) mg</i>                      | FeroSul          | OTC                 |
| <i>meijer ferrous sulfate oral tablet 325 (65 fe) mg</i>                  | FeroSul          | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b> | <b>Restrictions</b>      |
|---|------------------|--------------------------|
| <b>NOVAFERRUM PEDIATRIC DROPS ORAL LIQUID 15 MG/ML</b>                                      |                  | OTC                      |
| <b>NU-IRON ORAL CAPSULE 150 MG</b>  | ferric x-150     | OTC                      |
| <b>POLY-IRON 150 ORAL CAPSULE 150 MG</b>  | ferric x-150     | OTC                      |
| <b>PROFE ORAL CAPSULE 391.3 (180 FE) MG</b>   |                  | OTC                      |
| <i>px iron oral tablet 200 (65 fe) mg</i>   | Feosol           | OTC                      |
| <i>px iron oral tablet 27 mg</i>  |                  | OTC                      |
| <i>qc ferrous sulfate oral tablet 325 (65 fe) mg</i>  | FeroSul          | OTC                      |
| <i>ra high potency iron oral tablet 27 mg</i>   |                  | OTC                      |
| <i>ra iron oral tablet 27 mg</i>  |                  | OTC                      |
| <i>ra iron oral tablet 325 (65 fe) mg</i>   | FeroSul          | OTC                      |
| <i>ra slow release iron oral tablet extended release 45 mg, 47.5 mg</i>                     |                  | OTC                      |
| <b>SLOW FE ORAL TABLET EXTENDED RELEASE 142 (45 FE) MG</b>                                  | gnp iron         | OTC                      |
| <i>slow iron oral tablet extended release 160 (50 fe) mg</i>                                |                  | OTC                      |
| <i>slow release iron oral tablet extended release 160 (50 fe) mg, 45 mg, 47.5 mg, 50 mg</i> |                  | OTC                      |
| <i>sm iron oral tablet 325 (65 fe) mg</i>   | FeroSul          | OTC                      |
| <i>sm iron slow release oral tablet extended release 160 (50 fe) mg</i>                     |                  | OTC                      |
| <i>sm slow release iron oral tablet extended release 142 (45 fe) mg</i>                     | Slow Fe          | OTC                      |
| <b>SM SLOW RELEASE IRON ORAL TABLET EXTENDED RELEASE 143 (45 FE) MG</b>                     |                  | OTC                      |
| <b>*Thrombopoietin (Tpo) Receptor Agonists***</b>   |                  |                          |
| <b>PROMACTA ORAL TABLET 12.5 MG, 25 MG, 50 MG, 75 MG</b>                                    |                  | PA; QLL (1 EA per 1 day) |
| <b>*Hemostatics*</b>  |                  |                          |
| <b>*Hemostatics - Systemic***</b>   |                  |                          |
| <i>tranexamic acid oral tablet 650 mg</i>   |                  | QLL (30 EA per 28 days)  |

| <b>Formulary Drug Name</b>  | <b>Reference</b>             | <b>Restrictions</b> |
|---|------------------------------|---------------------|
| <b>*Hypnotics/Sedatives/Sleep Disorder Agents*</b>                |                              |                     |
| <b>*Antihistamine Hypnotic Combinations***</b>                    |                              |                     |
| <i>acetaminophen pm ex st oral tablet 25-500 mg, 500-25 mg</i>    | Healthy Mama eaZZZe the Pain | OTC                 |
| <i>cvs non-aspirin pm oral tablet 500-25 mg</i>                   | Healthy Mama eaZZZe the Pain | OTC                 |
| <i>cvs pain relief pm ex st oral tablet 25-500 mg</i>             | Healthy Mama eaZZZe the Pain | OTC                 |
| <i>diphenhydramine-apap (sleep) oral tablet 25-500 mg</i>         | Healthy Mama eaZZZe the Pain | OTC                 |
| <i>eq acetaminophen pm oral tablet 500-25 mg</i>                  | Healthy Mama eaZZZe the Pain | OTC                 |
| <i>eql acetaminophen pm oral tablet 25-500 mg</i>                 | Healthy Mama eaZZZe the Pain | OTC                 |
| <i>eql pain relief pm ex st oral tablet 25-500 mg</i>             | Healthy Mama eaZZZe the Pain | OTC                 |
| <i>gnp headache pm oral tablet 500-25 mg</i>                      | Healthy Mama eaZZZe the Pain | OTC                 |
| <i>gnp pain relief pm ex st oral tablet 25-500 mg</i>             | Healthy Mama eaZZZe the Pain | OTC                 |
| <i>goodsense headache pm oral tablet 25-500 mg</i>                | Healthy Mama eaZZZe the Pain | OTC                 |
| <i>goodsense pain relief pm ex st oral tablet 25-500 mg</i>       | Healthy Mama eaZZZe the Pain | OTC                 |
| <i>headache pm formula oral tablet 500-25 mg</i>                  | Healthy Mama eaZZZe the Pain | OTC                 |
| <i>headache pm oral tablet 25-500 mg</i>                          | Healthy Mama eaZZZe the Pain | OTC                 |
| <i>healthy mama eazzze the pain oral tablet 500-25 mg</i>         | Healthy Mama eaZZZe the Pain | OTC                 |
| <i>hm acetaminophen pm ex st oral tablet 25-500 mg</i>            | Healthy Mama eaZZZe the Pain | OTC                 |
| <i>hm pain reliever pm ex st oral tablet 25-500 mg, 500-25 mg</i> | Healthy Mama eaZZZe the Pain | OTC                 |
| <i>mapap pm oral tablet 500-25 mg</i>                             | Healthy Mama eaZZZe the Pain | OTC                 |
| <i>medi-tabs pm extra strength oral tablet 25-500 mg</i>          | Healthy Mama eaZZZe the Pain | OTC                 |
| <i>night time pain medicine ex st oral tablet 25-500 mg</i>       | Healthy Mama eaZZZe the Pain | OTC                 |

| <b>Formulary Drug Name</b>                                     | <b>Reference</b>             | <b>Restrictions</b> |
|--|------------------------------|---------------------|
| <i>pain relief pm extra strength oral tablet 500-25 mg</i>     | Healthy Mama eaZZZe the Pain | OTC                 |
| <i>pain reliever pm ex st oral tablet 25-500 mg, 500-25 mg</i> | Healthy Mama eaZZZe the Pain | OTC                 |
| <i>pain reliever pm oral tablet 25-500 mg, 500-25 mg</i>       | Healthy Mama eaZZZe the Pain | OTC                 |
| <i>px pain relief pm ex st oral tablet 25-500 mg</i>           | Healthy Mama eaZZZe the Pain | OTC                 |
| <i>qc non-aspirin pm oral tablet 500-25 mg</i>                 | Healthy Mama eaZZZe the Pain | OTC                 |
| <i>ra acetaminophen pm ex st oral tablet 25-500 mg</i>         | Healthy Mama eaZZZe the Pain | OTC                 |
| <i>sb non-asa night time oral tablet 500-25 mg</i>             | Healthy Mama eaZZZe the Pain | OTC                 |
| <i>sb non-aspirin nighttime oral tablet 500-25 mg</i>          | Healthy Mama eaZZZe the Pain | OTC                 |
| <i>sb pain reliever pm oral tablet 500-25 mg</i>               | Healthy Mama eaZZZe the Pain | OTC                 |
| <i>sm pain reliever pm ex st oral tablet 25-500 mg</i>         | Healthy Mama eaZZZe the Pain | OTC                 |
| <i>tgt pain reliever pm oral tablet 500-25 mg</i>              | Healthy Mama eaZZZe the Pain | OTC                 |
| <b>TYLENOL PM EXTRA STRENGTH ORAL TABLET 500-25 MG</b>         | acetaminophen pm ex st       | OTC                 |
| <b>*Antihistamine Hypnotics***</b>                             |                              |                     |
| <i>compoz oral capsule 50 mg</i>                               | Unisom Sleepgels             | OTC                 |
| <i>cvs sleep aid nighttime oral capsule 50 mg</i>              | Unisom Sleepgels             | OTC                 |
| <i>cvs sleep aid nighttime oral tablet 25 mg</i>               | Simply Sleep                 | OTC                 |
| <i>cvs sleep aid oral tablet 25 mg</i>                         | Simply Sleep                 | OTC                 |
| <i>cvs sleep-aid nighttime oral tablet 25 mg</i>               | Unisom SleepTabs             | OTC                 |
| <i>cvs ultra sleep oral tablet 25 mg</i>                       | Unisom SleepTabs             | OTC                 |
| <i>diphenhydramine hcl (sleep) oral tablet 50 mg</i>           |                              | OTC                 |
| <i>eq nighttime sleep aid max st oral capsule 50 mg</i>        | Unisom Sleepgels             | OTC                 |
| <i>eq nighttime sleep aid oral tablet 25 mg</i>                | Simply Sleep                 | OTC                 |
| <i>eq sleep-aid nighttime oral capsule 25 mg</i>               | Wal-Sleep Z                  | OTC                 |
| <i>eql nighttime sleep aid oral capsule 25 mg</i>              | Wal-Sleep Z                  | OTC                 |
| <i>eql nighttime sleep aid oral tablet 25 mg</i>               | Simply Sleep                 | OTC                 |
| <i>eql sleep aid oral capsule 50 mg</i>                        | Unisom Sleepgels             | OTC                 |
| <i>eql sleep aid oral liquid 50 mg/30ml</i>                    | Wal-Sleep Z                  | OTC                 |
| <i>eql sleep aid oral tablet 25 mg</i>                         | Unisom SleepTabs             | OTC                 |

| <b>Formulary Drug Name</b>                              | <b>Reference</b> | <b>Restrictions</b> |
|---|------------------|---------------------|
| <i>gnp nighttime sleep aid oral tablet 25 mg</i>        | Simply Sleep     | OTC                 |
| <i>gnp sleep aid oral tablet 25 mg</i>                  | Unisom SleepTabs | OTC                 |
| <i>gnp sleep time oral liquid 50 mg/30ml</i>            | Wal-Sleep Z      | OTC                 |
| <i>goodsense sleeptime oral capsule 25 mg</i>           | Wal-Sleep Z      | OTC                 |
| <i>goodsense sleeptime oral liquid 50 mg/30ml</i>       | Wal-Sleep Z      | OTC                 |
| <i>hm nighttime sleep aid oral tablet 25 mg</i>         | Simply Sleep     | OTC                 |
| <i>hm sleep aid oral tablet 25 mg</i>                   | Unisom SleepTabs | OTC                 |
| <i>hm z-sleep oral capsule 25 mg</i>                    | Wal-Sleep Z      | OTC                 |
| <i>hm z-sleep oral liquid 50 mg/30ml</i>                | Wal-Sleep Z      | OTC                 |
| <i>night time sleep aid oral tablet 25 mg</i>           | Simply Sleep     | OTC                 |
| <i>nighttime sleep aid oral tablet 25 mg</i>            | Simply Sleep     | OTC                 |
| <i>nytol oral tablet 25 mg</i>                          | Simply Sleep     | OTC                 |
| <i>ormir oral capsule 50 mg</i>                         | Unisom Sleepgels | OTC                 |
| <i>qc rest simply oral tablet 25 mg</i>                 | Simply Sleep     | OTC                 |
| <i>qc sleep aid max st oral capsule 50 mg</i>           | Unisom Sleepgels | OTC                 |
| <i>ra night sleep aid oral tablet 25 mg</i>             | Unisom SleepTabs | OTC                 |
| <i>ra nighttime sleep aid oral capsule 50 mg</i>        | Unisom Sleepgels | OTC                 |
| <i>ra nighttime sleep aid oral tablet 25 mg</i>         | Simply Sleep     | OTC                 |
| <i>ra sleep aid (diphenhydramine) oral tablet 25 mg</i> | Simply Sleep     | OTC                 |
| <i>ra sleep aid oral capsule 50 mg</i>                  | Unisom Sleepgels | OTC                 |
| <i>ra sleep aid oral liquid 50 mg/30ml</i>              | Wal-Sleep Z      | OTC                 |
| <i>ra sleep aid oral tablet 25 mg</i>                   | Unisom SleepTabs | OTC                 |
| <i>ra sleep-aid nighttime oral capsule 25 mg</i>        | Wal-Sleep Z      | OTC                 |
| <i>sb sleep oral tablet 25 mg</i>                       | Simply Sleep     | OTC                 |
| <i>simply sleep oral tablet 25 mg</i>                   | Simply Sleep     | OTC                 |
| <i>sleep aid (diphenhydramine) oral tablet 25 mg</i>    | Simply Sleep     | OTC                 |
| <i>sleep aid (doxylamine) oral tablet 25 mg</i>         | Unisom SleepTabs | OTC                 |
| <i>sleep aid oral capsule 25 mg</i>                     | Wal-Sleep Z      | OTC                 |
| <i>sleep aid oral capsule 50 mg</i>                     | Unisom Sleepgels | OTC                 |
| <i>sleep aid oral tablet 25 mg</i>                      | Unisom SleepTabs | OTC                 |
| <i>sleep ii oral tablet 25 mg</i>                       | Simply Sleep     | OTC                 |
| <i>sleep tabs oral tablet 25 mg</i>                     | Simply Sleep     | OTC                 |
| <i>sleep-tabs oral tablet 25 mg</i>                     | Simply Sleep     | OTC                 |
| <i>sm nighttime sleep aid oral tablet 25 mg</i>         | Simply Sleep     | OTC                 |
| <i>sm sleep aid maximum strength oral capsule 50 mg</i> | Unisom Sleepgels | OTC                 |
| <i>sm sleep aid night time oral tablet 25 mg</i>        | Simply Sleep     | OTC                 |
| <i>sm sleep aid oral tablet 25 mg</i>                   | Unisom SleepTabs | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>       | <b>Restrictions</b>                     |
|--|------------------------|---|
| <i>sm z-sleep oral capsule 25 mg</i>   | Wal-Sleep Z            | OTC                                     |
| <i>sm z-sleep oral liquid 50 mg/30ml</i>   | Wal-Sleep Z            | OTC                                     |
| <i>tgt nighttime sleep aid oral tablet 25 mg</i>   | Simply Sleep           | OTC                                     |
| <i>tgt sleep aid max strength oral capsule 50 mg</i>   | Unisom Sleepgels       | OTC                                     |
| <b>UNISOM SLEEPMELTS ORAL TABLET DISPERSIBLE 25 MG</b>   | wal-som                | OTC                                     |
| <i>wal-sleep z oral capsule 25 mg</i>  | Wal-Sleep Z            | OTC                                     |
| <i>wal-sleep z oral liquid 50 mg/30ml</i>  | Wal-Sleep Z            | OTC                                     |
| <i>wal-sleep z oral tablet dispersible 25 mg</i>   | Wal-Sleep Z            | OTC                                     |
| <i>wal-som maximum strength oral capsule 50 mg</i>   | Unisom Sleepgels       | OTC                                     |
| <i>wal-som oral tablet 25 mg</i>   | Unisom SleepTabs       | OTC                                     |
| <i>wal-som oral tablet dispersible 25 mg</i>   | Wal-Sleep Z            | OTC                                     |
| <b>ZZZQUIL ORAL CAPSULE 25 MG</b>  | eq sleep-aid nighttime | OTC                                     |
| <b>ZZZQUIL ORAL LIQUID 50 MG/30ML</b>  | eql sleep aid          | OTC                                     |
| <b>*Barbiturate Hypnotics***</b>   |                        |   |
| <i>phenobarbital oral elixir 20 mg/5ml</i>   |                        |   |
| <i>phenobarbital oral tablet 100 mg, 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg</i> |                        |   |
| <b>*Benzodiazepine Hypnotics***</b>  |                        |   |
| <i>estazolam oral tablet 1 mg, 2 mg</i>  |                        | QLL (1 EA per 1 day); AL (Min 18 Years) |
| <i>flurazepam hcl oral capsule 15 mg, 30 mg</i>  |                        | QLL (1 EA per 1 day); AL (Min 15 Years) |
| <i>temazepam oral capsule 15 mg, 30 mg</i>   | Restoril               | QLL (1 EA per 1 day); AL (Min 18 Years) |
| <b>*Non-Benzodiazepine - Gaba-Receptor Modulators***</b>   |                        |   |
| <i>eszopiclone oral tablet 1 mg, 2 mg, 3 mg</i>  | Lunesta                | QLL (1 EA per 1 day); AL (Min 18 Years) |
| <i>zaleplon oral capsule 10 mg, 5 mg</i>   |                        | QLL (1 EA per 1 day); AL (Min 18 Years) |
| <i>zolpidem tartrate oral tablet 10 mg, 5 mg</i>   | Ambien                 | QLL (1 EA per 1 day); AL (Min 18 Years) |
| <b>*Selective Melatonin Receptor Agonists***</b>   |                        |   |
| <i>ramelteon oral tablet 8 mg</i>  | Rozerem                | ST; QLL (1 EA per 1 day)                |
| <b>*Laxatives*</b>   |                        |   |
| <b>*Bowel Evacuant Combinations***</b>   |                        |   |
| <i>gavilyte-c oral solution reconstituted 240 gm</i>   | GaviLyte-C             | QLL (4000 ML per 30 days)               |



| <b>Formulary Drug Name</b>  | <b>Reference</b>          | <b>Restrictions</b>       |
|---|---------------------------|---------------------------|
| <i>gavilyte-g oral solution reconstituted 236 gm</i>                  | GaviLyte-G                |                           |
| <i>gavilyte-n with flavor pack oral solution reconstituted 420 gm</i> |                           |                           |
| <i>peg 3350/electrolytes oral solution reconstituted 240 gm</i>       | GaviLyte-C                |                           |
| <i>peg 3350-kcl-na bicarb-nacl oral solution reconstituted 420 gm</i> |                           |                           |
| <i>peg-3350/electrolytes oral solution reconstituted 236 gm</i>       | GaviLyte-G                | QLL (4000 ML per 30 days) |
| <i>trilyte oral solution reconstituted 420 gm</i>                     |                           |                           |
| <b>*Bulk Laxatives***</b>   |                           |                           |
| <b>BENEFIBER DRINK MIX ORAL PACKET</b>                                |                           | OTC                       |
| <b>BENEFIBER FOR CHILDREN ORAL POWDER</b>                             | clear soluble fiber       | OTC                       |
| <b>BENEFIBER ON THE GO ORAL PACKET</b>                                |                           | OTC                       |
| <i>benefiber on the go oral powder</i>                                | Benefiber On The GO       | OTC                       |
| <b>BENEFIBER ORAL POWDER</b>  | clear soluble fiber       | OTC                       |
| <i>calcium polycarbophil oral tablet 625 mg</i>                       | FiberCon                  | OTC                       |
| <b>CITRUCEL ORAL POWDER</b>   |                           | OTC                       |
| <b>CITRUCEL ORAL TABLET 500 MG</b>                                    | cvs soluble fiber therapy | OTC                       |
| <i>clear soluble fiber oral powder</i>                                | Benefiber On The GO       | OTC                       |
| <i>cvs fiber laxative oral tablet 625 mg</i>                          | FiberCon                  | OTC                       |
| <i>cvs fiber oral capsule 0.52 gm</i>                                 | Medi-Mucil                | OTC                       |
| <i>cvs natural daily fiber oral powder 48.57 %</i>                    | Reguloid                  | OTC                       |
| <i>cvs natural daily fiber oral powder 58.6 %</i>                     | Metamucil Smooth Texture  | OTC                       |
| <b>CVS NATURAL FIBER SUPPLEMENT ORAL PACKET 58.6 %</b>                |                           | OTC                       |
| <i>cvs soluble fiber therapy oral tablet 500 mg</i>                   | Citrucel                  | OTC                       |
| <i>eq daily fiber oral capsule 400 mg</i>                             |                           | OTC                       |
| <i>eq fiber laxative oral tablet 625 mg</i>                           | FiberCon                  | OTC                       |
| <i>eq fiber powder oral powder</i>                                    | Benefiber On The GO       | OTC                       |
| <i>eq fiber therapy oral capsule 0.52 gm</i>                          | Medi-Mucil                | OTC                       |
| <i>eq fiber therapy oral powder 48.57 %</i>                           | Reguloid                  | OTC                       |
| <i>eq fiber therapy oral tablet 500 mg</i>                            | Citrucel                  | OTC                       |
| <i>eq fiber therapy oral tablet 625 mg</i>                            | FiberCon                  | OTC                       |
| <i>eq natural fiber laxative oral powder 28.3 %, 58.6 %</i>           | Metamucil Smooth Texture  | OTC                       |
| <i>eql fiber laxative oral tablet 625 mg</i>                          | FiberCon                  | OTC                       |

| <b>Formulary Drug Name</b>                           | <b>Reference</b>         | <b>Restrictions</b> |
|--|--------------------------|---------------------|
| <i>eql fiber therapy oral powder 28.3 %</i>          | Metamucil Smooth Texture | OTC                 |
| <i>eql fiber therapy oral tablet 500 mg</i>          | Citrucel                 | OTC                 |
| <i>eql natural fiber oral powder 28.3 %, 58.6 %</i>  | Metamucil Smooth Texture | OTC                 |
| <b>EQUALACTIN ORAL TABLET CHEWABLE 625 MG</b>        |                          | OTC                 |
| <b>EVAC ORAL POWDER</b>                              | natural psyllium seed    | OTC                 |
| <i>fiber laxative oral capsule 0.52 gm</i>           | Medi-Mucil               | OTC                 |
| <i>fiber laxative oral tablet 625 mg</i>             | FiberCon                 | OTC                 |
| <i>fiber oral tablet 625 mg</i>                      | FiberCon                 | OTC                 |
| <i>fiber therapy oral tablet 500 mg</i>              | Citrucel                 | OTC                 |
| <b>FIBERCON ORAL TABLET 625 MG</b>                   | cvs fiber laxative       | OTC                 |
| <i>fiber-lax oral tablet 625 mg</i>                  | FiberCon                 | OTC                 |
| <i>gnp best fiber oral powder</i>                    | Benefiber On The GO      | OTC                 |
| <i>gnp fiber therapy oral tablet 500 mg</i>          | Citrucel                 | OTC                 |
| <i>gnp fiber-caps oral tablet 625 mg</i>             | FiberCon                 | OTC                 |
| <i>gnp natural fiber oral capsule 0.52 gm</i>        | Medi-Mucil               | OTC                 |
| <i>gnp natural fiber oral powder 28.3 %</i>          | Metamucil Smooth Texture | OTC                 |
| <i>gnp natural fiber oral powder 48.57 %</i>         | Reguloid                 | OTC                 |
| <i>goodsense best fiber oral powder</i>              | Benefiber On The GO      | OTC                 |
| <i>goodsense fiber oral tablet 500 mg</i>            | Citrucel                 | OTC                 |
| <i>goodsense natural fiber oral powder 28.3 %</i>    | Metamucil Smooth Texture | OTC                 |
| <i>hm clear fiber oral powder</i>                    | Benefiber On The GO      | OTC                 |
| <i>hm fiber oral capsule 0.52 gm</i>                 | Medi-Mucil               | OTC                 |
| <i>hm fiber oral capsule 400 mg</i>                  |                          | OTC                 |
| <i>hm fiber oral powder 28.3 %, 58.6 %</i>           | Metamucil Smooth Texture | OTC                 |
| <i>hm fiber oral powder 30.9 %</i>                   |                          | OTC                 |
| <i>hm fiber oral powder 48.57 %</i>                  | Reguloid                 | OTC                 |
| <i>hm fiber oral tablet 500 mg</i>                   | Citrucel                 | OTC                 |
| <b>HYDROCIL ORAL PACKET 95 %</b>                     |                          | OTC                 |
| <b>HYDROCIL ORAL POWDER 95 %</b>                     | qc natural vegetable     | OTC                 |
| <i>kls fiber-tabs oral tablet 625 mg</i>             | FiberCon                 | OTC                 |
| <i>kls natural psyllium fiber oral powder 58.6 %</i> | Metamucil Smooth Texture | OTC                 |
| <b>KONSYL DAILY FIBER ORAL PACKET 100 %</b>          |                          | OTC                 |
| <b>KONSYL DAILY FIBER ORAL POWDER 100 %</b>          | natural psyllium seed    | OTC                 |
| <i>konsyl fiber oral tablet 625 mg</i>               | FiberCon                 | OTC                 |
| <b>KONSYL ORAL PACKET 60.3 %</b>                     |                          | OTC                 |
| <i>konsyl oral powder 30.9 %</i>                     |                          | OTC                 |

| <b>Formulary Drug Name</b>                                 | <b>Reference</b>         | <b>Restrictions</b> |
|--|--------------------------|---------------------|
| <b>KONSYL ORAL POWDER 60.3 %</b>                           | konsyl daily fiber       | OTC                 |
| <b>KONSYL-D ORAL POWDER 52.3 %</b>                         |                          | OTC                 |
| <i>medi-mucil oral capsule 0.52 gm</i>                     | Medi-Mucil               | OTC                 |
| <b>METAMUCIL 4 IN 1 FIBER ORAL POWDER 55.6 %</b>           |                          | OTC                 |
| <b>METAMUCIL FIBER ORAL PACKET 51.7 %</b>                  | daily fiber              | OTC                 |
| <b>METAMUCIL MULTIHEALTH FIBER ORAL PACKET 58.12 %</b>     |                          | OTC                 |
| <b>METAMUCIL MULTIHEALTH FIBER ORAL POWDER 63 %</b>        | eq daily fiber           | OTC                 |
| <b>METAMUCIL ORAL CAPSULE 0.52 GM</b>                      | cvs fiber                | OTC                 |
| <b>METAMUCIL ORAL POWDER 48.57 %</b>                       | cvs natural daily fiber  | OTC                 |
| <b>METAMUCIL ORAL WAFER</b>                                |                          | OTC                 |
| <b>METAMUCIL SMOOTH TEXTURE ORAL PACKET 28 %</b>           |                          | OTC                 |
| <i>metamucil smooth texture oral powder 28.3 %, 58.6 %</i> | Metamucil Smooth Texture | OTC                 |
| <i>natural fiber laxative oral powder 28.3 %, 58.6 %</i>   | Metamucil Smooth Texture | OTC                 |
| <i>natural fiber laxative oral powder 30.9 %</i>           |                          | OTC                 |
| <i>natural fiber laxative oral powder 48.57 %</i>          | Reguloid                 | OTC                 |
| <i>natural fiber oral powder 58.6 %</i>                    | Metamucil Smooth Texture | OTC                 |
| <i>natural fiber therapy oral powder 30 %</i>              |                          | OTC                 |
| <i>natural fiber therapy oral powder 48.57 %</i>           | Reguloid                 | OTC                 |
| <i>natural psyllium seed oral powder 100 %</i>             | Wal-Mucil                | OTC                 |
| <i>natural vegetable fiber oral powder 48.57 %</i>         | Reguloid                 | OTC                 |
| <i>psyl dex oral powder 30 %</i>                           |                          | OTC                 |
| <i>psyllium husk oral powder 100 %</i>                     | Wal-Mucil                | OTC                 |
| <i>px fiber oral capsule 0.52 gm</i>                       | Medi-Mucil               | OTC                 |
| <i>px fiber oral tablet 625 mg</i>                         | FiberCon                 | OTC                 |
| <i>qc fiber laxative oral capsule 0.52 gm</i>              | Medi-Mucil               | OTC                 |
| <i>qc natural vegetable oral powder 95 %</i>               | Hydrocil                 | OTC                 |
| <i>ra fiber laxative oral powder 48.57 %</i>               | Reguloid                 | OTC                 |
| <i>ra fiber oral capsule 0.52 gm</i>                       | Medi-Mucil               | OTC                 |
| <i>ra fiber oral powder 58.6 %</i>                         | Metamucil Smooth Texture | OTC                 |
| <i>ra fiber supplement oral powder 28.3 %</i>              | Metamucil Smooth Texture | OTC                 |
| <i>ra fiber supplement oral powder 48.57 %</i>             | Reguloid                 | OTC                 |
| <i>ra fiber therapy oral capsule 0.52 gm</i>               | Medi-Mucil               | OTC                 |
| <i>ra fiber therapy oral tablet 625 mg</i>                 | FiberCon                 | OTC                 |

| <b>Formulary Drug Name</b>                                     | <b>Reference</b>         | <b>Restrictions</b> |
|--|--------------------------|---------------------|
| <i>ra fiber-cap oral tablet 625 mg</i>                         | FiberCon                 | OTC                 |
| <i>ra fiber-tab oral tablet 625 mg</i>                         | FiberCon                 | OTC                 |
| <i>ra multihealth fiber oral powder 58.6 %</i>                 | Metamucil Smooth Texture | OTC                 |
| <i>ra soluble fiber oral tablet 500 mg</i>                     | Citrucel                 | OTC                 |
| <i>reguloid oral capsule 400 mg</i>                            |                          | OTC                 |
| <i>reguloid oral powder 28.3 %, 58.6 %</i>                     | Metamucil Smooth Texture | OTC                 |
| <i>reguloid oral powder 48.57 %</i>                            | Reguloid                 | OTC                 |
| <i>sb fib lax orange oral powder 30 %</i>                      |                          | OTC                 |
| <i>sb fiber laxative oral powder 48.57 %</i>                   | Reguloid                 | OTC                 |
| <i>sb fiber laxative oral tablet 625 mg</i>                    | FiberCon                 | OTC                 |
| <i>sb natural fiber laxative oral powder 49 %</i>              |                          | OTC                 |
| <i>sm fiber laxative oral tablet 500 mg</i>                    | Citrucel                 | OTC                 |
| <i>sm fiber oral capsule 400 mg</i>                            |                          | OTC                 |
| <i>sm fiber oral powder 28.3 %, 58.6 %</i>                     | Metamucil Smooth Texture | OTC                 |
| <i>sm fiber oral powder 48.57 %</i>                            | Reguloid                 | OTC                 |
| <i>sm fiber oral tablet 625 mg</i>                             | FiberCon                 | OTC                 |
| <i>soluble fiber therapy oral powder</i>                       |                          | OTC                 |
| <i>tgt fiber laxative oral tablet 625 mg</i>                   | FiberCon                 | OTC                 |
| <i>tgt fiber therapy oral powder 28.3 %, 58.6 %</i>            | Metamucil Smooth Texture | OTC                 |
| <i>tgt psyllium fiber oral capsule 520 mg</i>                  | Medi-Mucil               | OTC                 |
| <i>total fiber oral powder</i>                                 | Benefiber On The GO      | OTC                 |
| <i>wal-mucil oral capsule 0.52 gm</i>                          | Medi-Mucil               | OTC                 |
| <i>wal-mucil oral powder 100 %</i>                             | Wal-Mucil                | OTC                 |
| <i>wal-mucil oral powder 28.3 %, 58.6 %</i>                    | Metamucil Smooth Texture | OTC                 |
| <i>wal-mucil oral powder 48.57 %</i>                           | Reguloid                 | OTC                 |
| <b>*Laxatives - Miscellaneous***</b>                           |                          |                     |
| <i>clearlax oral powder 17 gm/scoop</i>                        | ClearLax                 | OTC                 |
| <i>constulose oral solution 10 gm/15ml</i>                     |                          |                     |
| <i>cvs glycerin adult rectal suppository 2 gm</i>              | Avedana Glycerin (Adult) | OTC                 |
| <i>cvs glycerin adult rectal suppository 2.1 gm</i>            |                          | OTC                 |
| <i>cvs glycerin child rectal suppository 1 gm</i>              |                          | OTC                 |
| <i>cvs purelax oral packet 17 gm</i>                           | CVS Purelax              | OTC                 |
| <i>cvs purelax oral powder 17 gm/scoop</i>                     | ClearLax                 | OTC                 |
| <i>eq clearlax oral powder 17 gm/scoop</i>                     | ClearLax                 | OTC                 |
| <i>eql clearlax oral powder 17 gm/scoop</i>                    | ClearLax                 | OTC                 |
| <b>FLEET LIQUID GLYCERIN SUPP<br/>RECTAL ENEMA 5.4 GM/DOSE</b> |                          | OTC                 |
| <i>gavilax oral powder 17 gm/scoop</i>                         | ClearLax                 | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>         | <b>Restrictions</b> |
|--|--------------------------|---------------------|
| <i>gentlelax oral powder 17 gm/scoop</i>                                 | ClearLax                 | OTC                 |
| <b>GLYCERIN (ADULT) RECTAL SUPPOSITORY 2 GM</b>                          |                          | OTC                 |
| <i>glycerin (adult) rectal suppository 2.1 gm</i>                        |                          | OTC                 |
| <i>glycerin (child) rectal suppository 1.2 gm</i>                        |                          | OTC                 |
| <i>glycerin (infants &amp; children) rectal suppository 1 gm, 1.2 gm</i> |                          | OTC                 |
| <i>glycerin (pediatric) rectal suppository 1 gm, 1.2 gm</i>              |                          | OTC                 |
| <i>glycerin adult rectal suppository 2 gm</i>                            | Avedana Glycerin (Adult) | OTC                 |
| <i>glycolax oral powder 17 gm/scoop</i>                                  | ClearLax                 | OTC                 |
| <i>gnp clearlax oral packet 17 gm</i>                                    | CVS Purelax              | OTC                 |
| <i>gnp clearlax oral powder 17 gm/scoop</i>                              | ClearLax                 | OTC                 |
| <i>gnp glycerin (adult) rectal suppository 2.1 gm</i>                    |                          | OTC                 |
| <i>gnp glycerin (infant) rectal suppository 1.2 gm</i>                   |                          | OTC                 |
| <i>gnp glycerin child rectal suppository 1.2 gm</i>                      |                          | OTC                 |
| <i>hm clearlax oral powder 17 gm/scoop</i>                               | ClearLax                 | OTC                 |
| <i>kls laxaclear oral powder 17 gm/scoop</i>                             | ClearLax                 | OTC                 |
| <i>lactulose oral solution 10 gm/15ml, 20 gm/30ml</i>                    |                          |                     |
| <b>PEDIA-LAX RECTAL SUPPOSITORY 1 GM</b>                                 | cvs glycerin child       | OTC                 |
| <b>PEDIA-LAX RECTAL SUPPOSITORY 2.8 GM</b>                               |                          | OTC                 |
| <i>peg 3350 oral packet 17 gm</i>  | CVS Purelax              | OTC                 |
| <i>peg 3350 oral powder 17 gm/scoop</i>                                  | ClearLax                 | OTC                 |
| <b>PEGYLAX ORAL POWDER 17 GM/SCOOP</b>                                   | gavilax                  |                     |
| <i>polyethylene glycol 3350 oral packet 17 gm</i>                        | CVS Purelax              |                     |
| <i>polyethylene glycol 3350 oral powder 17 gm/scoop</i>                  | ClearLax                 |                     |
| <i>px glycerin rectal suppository 2.1 gm</i>                             |                          | OTC                 |
| <i>qc natura-lax oral powder 17 gm/scoop</i>                             | ClearLax                 | OTC                 |
| <i>ra glycerin adult rectal suppository 80.7 %</i>                       |                          | OTC                 |
| <i>ra glycerin child rectal suppository 80.7 %</i>                       |                          | OTC                 |
| <i>ra laxative oral packet 17 gm</i>                                     | CVS Purelax              | OTC                 |
| <i>ra laxative oral powder 17 gm/scoop</i>                               | ClearLax                 | OTC                 |
| <i>sb glycerin adult rectal suppository 2.1 gm</i>                       |                          | OTC                 |
| <i>sb glycerin pediatric rectal suppository 1.2 gm</i>                   |                          | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b>      | <b>Restrictions</b> |
|---|-----------------------|---------------------|
| <i>sb polyethylene glycol 3350 oral powder 17 gm/scoop</i>            | ClearLax              | OTC                 |
| <i>sm clearlax oral powder 17 gm/scoop</i>                            | ClearLax              | OTC                 |
| <i>sm glycerin pediatric rectal suppository 1.2 gm, 80.7 %</i>        |                       | OTC                 |
| <i>smooth lax oral packet 17 gm</i>                                   | CVS Purelax           | OTC                 |
| <i>smooth lax oral powder 17 gm/scoop</i>                             | ClearLax              | OTC                 |
| <b>SORBITOL ORAL SOLUTION 70 %</b>                                    |                       | OTC                 |
| <b>SORBITOL RECTAL SOLUTION 70 %</b>                                  |                       | OTC                 |
| <i>tgt powderlax oral powder 17 gm/scoop</i>                          | ClearLax              | OTC                 |
| <b>*Laxatives &amp; Dss***</b>  |                       |                     |
| <i>medi-laxx oral capsule 8.6-50 mg</i>                               |                       | OTC                 |
| <b>*Lubricant Laxatives***</b>  |                       |                     |
| <i>cvs mineral oil enema rectal enema</i>                             | Fleet Oil             | OTC                 |
| <i>cvs mineral oil oral oil</i>                                       |                       | OTC                 |
| <i>enema mineral oil rectal enema</i>                                 | Fleet Oil             | OTC                 |
| <i>eq mineral oil oral oil</i>  |                       | OTC                 |
| <b>FLEET OIL RECTAL ENEMA</b>   | cvs mineral oil enema | OTC                 |
| <i>gnp mineral oil rectal enema</i>                                   | Fleet Oil             | OTC                 |
| <i>goodsense mineral oil oral oil</i>                                 |                       | OTC                 |
| <i>hm enema mineral oil rectal enema</i>                              | Fleet Oil             | OTC                 |
| <i>hm mineral oil oral oil</i>  |                       | OTC                 |
| <i>mineral oil oral oil</i>   |                       | OTC                 |
| <i>mineral oil rectal enema</i>                                       | Fleet Oil             | OTC                 |
| <i>qc mineral oil heavy oral oil</i>                                  |                       | OTC                 |
| <i>ra mineral oil oral oil</i>  |                       | OTC                 |
| <i>sm mineral oil oral oil</i>  |                       | OTC                 |
| <i>sm mineral oil rectal enema</i>                                    | Fleet Oil             | OTC                 |
| <b>*Saline Laxative Mixtures***</b>                                   |                       |                     |
| <i>cvs enema disposable rectal enema 19-7 gm/118ml, 7-19 gm/118ml</i> | Fleet Enema           | OTC                 |
| <i>enema disposable rectal enema</i>                                  | Fleet Enema           | OTC                 |
| <i>enema pediatric rectal enema 3.5-9.5 gm/59ml</i>                   | Fleet Pediatric       | OTC                 |
| <i>enema ready-to-use rectal enema 7-19 gm/118ml</i>                  | Fleet Enema           | OTC                 |
| <i>enema rectal enema , 7-19 gm/118ml</i>                             | Fleet Enema           | OTC                 |
| <i>eq enema rectal enema 19-7 gm/118ml</i>                            | Fleet Enema           | OTC                 |
| <i>eql ready-to-use enema rectal enema 7-19 gm/118ml</i>              | Fleet Enema           | OTC                 |



| <b>Formulary Drug Name</b>   | <b>Reference</b>          | <b>Restrictions</b> |
|--|---------------------------|---------------------|
| <b>FLEET ENEMA RECTAL ENEMA 7-19 GM/118ML</b>                        | cvs enema disposable      | OTC                 |
| <b>FLEET PEDIATRIC RECTAL ENEMA 3.5-9.5 GM/59ML</b>                  | enema pediatric           | OTC                 |
| <i>gnp enema rectal enema , 7-19 gm/118ml</i>                        | Fleet Enema               | OTC                 |
| <i>hm enema rectal enema 7-19 gm/118ml</i>                           | Fleet Enema               | OTC                 |
| <i>qc enema rectal enema 16-6 gm/133ml</i>                           | Fleet Enema               | OTC                 |
| <i>ra enema rectal enema 7-19 gm/118ml</i>                           | Fleet Enema               | OTC                 |
| <i>ra saline enema rectal enema 19-7 gm/118ml</i>                    | Fleet Enema               | OTC                 |
| <i>sm enema rectal enema , 7-19 gm/118ml</i>                         | Fleet Enema               | OTC                 |
| <i>tgt saline laxative rectal enema</i>                              | Fleet Enema               | OTC                 |
| <b>*Saline Laxatives***</b>  |                           |                     |
| <i>citrate of magnesia oral solution , 1.745 gm/30ml</i>             | Citroma                   | OTC                 |
| <i>citroma oral solution 1.745 gm/30ml</i>                           | Citroma                   | OTC                 |
| <i>cvs citrate of magnesia oral solution</i>                         | Citroma                   | OTC                 |
| <i>cvs laxative dietary supplement oral tablet 500 mg</i>            | Phillips                  | OTC                 |
| <i>cvs magnesium citrate oral solution 1.745 gm/30ml</i>             | Citroma                   | OTC                 |
| <i>cvs milk of magnesia oral suspension 1200 mg/15ml, 400 mg/5ml</i> | Dulcolax Milk of Magnesia | OTC                 |
| <i>dulcolax milk of magnesia oral suspension 400 mg/5ml</i>          | Dulcolax Milk of Magnesia | OTC                 |
| <i>eq magnesium citrate oral solution 1.745 gm/30ml</i>              | Citroma                   | OTC                 |
| <i>eql magnesium citrate oral solution 1.745 gm/30ml</i>             | Citroma                   | OTC                 |
| <i>eql milk of magnesia oral suspension 1200 mg/15ml, 400 mg/5ml</i> | Dulcolax Milk of Magnesia | OTC                 |
| <i>gnp magnesium citrate oral solution 1.745 gm/30ml</i>             | Citroma                   | OTC                 |
| <i>gnp milk of magnesia oral suspension 1200 mg/15ml</i>             | Dulcolax Milk of Magnesia | OTC                 |
| <i>goodsense magnesium citrate oral solution 1.745 gm/30ml</i>       | Citroma                   | OTC                 |
| <i>hm magnesium citrate oral solution 1.745 gm/30ml</i>              | Citroma                   | OTC                 |
| <i>hm milk of magnesia oral suspension 1200 mg/15ml</i>              | Dulcolax Milk of Magnesia | OTC                 |
| <i>magnesium citrate oral solution 1.745 gm/30ml</i>                 | Citroma                   | OTC                 |



| <b>Formulary Drug Name</b>   | <b>Reference</b>          | <b>Restrictions</b> |
|--|---------------------------|---------------------|
| <i>milk of magnesia oral suspension 1200 mg/15ml, 400 mg/5ml, 7.75 %</i> | Dulcolax Milk of Magnesia | OTC                 |
| <b>PEDIA-LAX ORAL TABLET CHEWABLE 400 MG</b>                             |                           | OTC                 |
| <i>phillips milk of magnesia oral suspension 400 mg/5ml</i>              | Dulcolax Milk of Magnesia | OTC                 |
| <i>px milk of magnesia oral suspension 1200 mg/15ml</i>                  | Dulcolax Milk of Magnesia | OTC                 |
| <i>qc magnesium citrate oral solution 1.745 gm/30ml</i>                  | Citroma                   | OTC                 |
| <i>qc milk of magnesia oral suspension 400 mg/5ml</i>                    | Dulcolax Milk of Magnesia | OTC                 |
| <i>ra magnesium citrate oral solution 1.745 gm/30ml</i>                  | Citroma                   | OTC                 |
| <i>ra milk of magnesia oral suspension 400 mg/5ml</i>                    | Dulcolax Milk of Magnesia | OTC                 |
| <i>sb magnesium citrate oral solution 1.745 gm/30ml</i>                  | Citroma                   | OTC                 |
| <i>sb milk of magnesia oral suspension 400 mg/5ml</i>                    | Dulcolax Milk of Magnesia | OTC                 |
| <i>sm magnesium citrate oral solution 1.745 gm/30ml</i>                  | Citroma                   | OTC                 |
| <i>sm milk of magnesia oral suspension 1200 mg/15ml</i>                  | Dulcolax Milk of Magnesia | OTC                 |
| <b>*Stimulant Laxatives***</b>   |                           |                     |
| <i>castor oil stimulant laxative oral oil 100 %</i>                      |                           | OTC                 |
| <i>chocolated laxative oral tablet chewable 15 mg</i>                    | Ex-Lax                    | OTC                 |
| <i>cvs castor oil oral oil 100 %</i>                                     |                           | OTC                 |
| <i>cvs chocolate laxative pieces oral tablet chewable 15 mg</i>          | Ex-Lax                    | OTC                 |
| <i>cvs c-lax laxative oral tablet delayed release 5 mg</i>               | Alophen                   | OTC                 |
| <i>cvs laxative pills oral tablet 25 mg</i>                              | Ex-Lax Maximum Strength   | OTC                 |
| <i>cvs senna-extra oral tablet 17.2 mg</i>                               | Senokot Extra Strength    | OTC                 |
| <i>eq laxative maximum strength oral tablet 25 mg</i>                    | Ex-Lax Maximum Strength   | OTC                 |
| <i>eq laxative oral tablet chewable 15 mg</i>                            | Ex-Lax                    | OTC                 |
| <i>eql castor oil oral oil 100 %</i>                                     |                           | OTC                 |
| <i>eql laxative maximum strength oral tablet 25 mg</i>                   | Ex-Lax Maximum Strength   | OTC                 |
| <i>eql laxative oral tablet 25 mg</i>                                    | Ex-Lax Maximum Strength   | OTC                 |

| <b>Formulary Drug Name</b>                            | <b>Reference</b>             | <b>Restrictions</b> |
|---|------------------------------|---------------------|
| <i>eql laxative oral tablet chewable 15 mg</i>        | Ex-Lax                       | OTC                 |
| <b>EX-LAX MAXIMUM STRENGTH ORAL TABLET 25 MG</b>      | eq laxative maximum strength | OTC                 |
| <b>EX-LAX ORAL TABLET 15 MG</b>                       | laxative regular strength    | OTC                 |
| <b>EX-LAX ORAL TABLET CHEWABLE 15 MG</b>              | chocolated laxative          | OTC                 |
| <i>gnp castor oil oral oil 100 %</i>                  |                              | OTC                 |
| <i>gnp laxative pills oral tablet 25 mg</i>           | Ex-Lax Maximum Strength      | OTC                 |
| <i>laxative oral tablet 25 mg</i>                     | Ex-Lax Maximum Strength      | OTC                 |
| <i>laxative pills oral tablet 15 mg</i>               | Medi-Lax                     | OTC                 |
| <i>laxative pills oral tablet 25 mg</i>               | Ex-Lax Maximum Strength      | OTC                 |
| <i>medi-lax oral tablet 15 mg</i>                     | Medi-Lax                     | OTC                 |
| <i>qc laxative oral tablet 25 mg</i>                  | Ex-Lax Maximum Strength      | OTC                 |
| <i>ra laxative extra strength oral tablet 17.2 mg</i> | Senokot Extra Strength       | OTC                 |
| <i>ra laxative maximum strength oral tablet 25 mg</i> | Ex-Lax Maximum Strength      | OTC                 |
| <i>ra laxative oral tablet 25 mg</i>                  | Ex-Lax Maximum Strength      | OTC                 |
| <i>ra laxative oral tablet chewable 15 mg</i>         | Ex-Lax                       | OTC                 |
| <i>ra senna oral capsule 8.6 mg</i>                   |                              | OTC                 |
| <i>senexon oral liquid 8.8 mg/5ml</i>                 | OneLAX Senna                 | OTC                 |
| <i>senna laxative oral tablet 25 mg</i>               | Ex-Lax Maximum Strength      | OTC                 |
| <i>senna oral capsule 8.6 mg</i>                      |                              | OTC                 |
| <b>SENNA ORAL SYRUP 176 MG/5ML</b>                    |                              | OTC                 |
| <i>senna oral syrup 8.8 mg/5ml</i>                    | OneLAX Senna                 |                     |
| <i>senna smooth oral tablet 15 mg</i>                 | Medi-Lax                     | OTC                 |
| <i>senna-grx oral syrup 8.8 mg/5ml</i>                | OneLAX Senna                 | OTC                 |
| <i>sennazon oral syrup 8.8 mg/5ml</i>                 | OneLAX Senna                 | OTC                 |
| <i>sennosides oral tablet 8.6 mg</i>                  | Evac-U-Gen                   | OTC                 |
| <i>senokot extra strength oral tablet 17.2 mg</i>     | Senokot Extra Strength       | OTC                 |
| <i>sm castor oil oral oil 100 %</i>                   |                              | OTC                 |
| <i>sm laxative maximum strength oral tablet 25 mg</i> | Ex-Lax Maximum Strength      | OTC                 |
| <i>sm senna laxative max st oral tablet 25 mg</i>     | Ex-Lax Maximum Strength      | OTC                 |
| <i>tgt laxative pills max st oral tablet 25 mg</i>    | Ex-Lax Maximum Strength      | OTC                 |
| <i>tgt natural laxative pills oral tablet 25 mg</i>   | Ex-Lax Maximum Strength      | OTC                 |
| <b>*Surfactant Laxatives***</b>                       |                              |                     |
| <b>COLACE CLEAR ORAL CAPSULE 50 MG</b>                | cvs stool softener           | OTC                 |
| <i>cvs mini enema kids rectal enema 100 mg/5ml</i>    | DocuSol Kids                 | OTC                 |

| <b>Formulary Drug Name</b>                           | <b>Reference</b>       | <b>Restrictions</b> |
|--|------------------------|---------------------|
| <i>cvs stool softener oral capsule 240 mg</i>        | Surfak                 | OTC                 |
| <i>cvs stool softener oral capsule 250 mg</i>        |                        | OTC                 |
| <i>cvs stool softener oral capsule 50 mg</i>         | Colace Clear           | OTC                 |
| <i>diocto oral liquid 50 mg/5ml</i>                  | OneLAX Docusate Sodium | OTC                 |
| <i>diocto oral syrup 60 mg/15ml</i>                  |                        | OTC                 |
| <i>docu oral liquid 50 mg/5ml</i>                    | OneLAX Docusate Sodium | OTC                 |
| <i>docuprene oral tablet 100 mg</i>                  | DOK                    | OTC                 |
| <i>docusate calcium oral capsule 240 mg</i>          | Surfak                 | OTC                 |
| <i>docusate sodium oral capsule 250 mg</i>           |                        |                     |
| <i>docusate sodium oral liquid 50 mg/5ml</i>         | OneLAX Docusate Sodium | OTC                 |
| <i>docusate sodium oral syrup 60 mg/15ml</i>         |                        | OTC                 |
| <i>docusate sodium oral tablet 100 mg</i>            | DOK                    | OTC                 |
| <b>DOCUSOL KIDS RECTAL ENEMA 100 MG/5ML</b>          | cvs mini enema kids    | OTC                 |
| <b>DOCUSOL MINI RECTAL ENEMA 283 MG/5ML</b>          | docusate mini          | OTC                 |
| <i>dok oral capsule 250 mg</i>                       |                        | OTC                 |
| <i>dok oral tablet 100 mg</i>                        | DOK                    | OTC                 |
| <i>dss oral capsule 250 mg</i>                       |                        | OTC                 |
| <b>ENEMEEZ MINI RECTAL ENEMA 283 MG/5ML</b>          | docusate mini          | OTC                 |
| <i>eq stool softener oral capsule 250 mg</i>         |                        | OTC                 |
| <i>gnp docusate calcium oral capsule 240 mg</i>      | Surfak                 | OTC                 |
| <i>gnp stool softener oral capsule 250 mg</i>        |                        | OTC                 |
| <i>gnp stool softener oral liquid 50 mg/5ml</i>      | OneLAX Docusate Sodium | OTC                 |
| <i>gnp stool softener oral syrup 60 mg/15ml</i>      |                        | OTC                 |
| <i>healthy mama move it along oral tablet 100 mg</i> | DOK                    | OTC                 |
| <i>hm stool softener oral capsule 250 mg</i>         |                        | OTC                 |
| <i>hm stool softener oral tablet 100 mg</i>          | DOK                    | OTC                 |
| <i>kao-tin oral capsule 240 mg</i>                   | Surfak                 | OTC                 |
| <b>PEDIA-LAX ORAL LIQUID 50 MG/15ML</b>              |                        | OTC                 |
| <i>promolaxin oral tablet 100 mg</i>                 | DOK                    | OTC                 |
| <i>qc docusate calcium oral capsule 240 mg</i>       | Surfak                 | OTC                 |
| <i>ra col-rite oral capsule 250 mg</i>               |                        | OTC                 |
| <i>ra col-rite oral capsule 50 mg</i>                | Colace Clear           | OTC                 |
| <i>sb stool softener oral capsule 240 mg</i>         | Surfak                 | OTC                 |
| <i>silace oral liquid 150 mg/15ml</i>                | OneLAX Docusate Sodium | OTC                 |
| <i>silace oral syrup 60 mg/15ml</i>                  |                        | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b>            | <b>Restrictions</b>       |
|---|-----------------------------|---------------------------|
| <i>sm docusate calcium oral capsule 240 mg</i>                              | Surfak                      | OTC                       |
| <i>sm stool softener oral capsule 240 mg</i>                                | Surfak                      | OTC                       |
| <i>sm stool softener oral capsule 250 mg</i>                                |                             | OTC                       |
| <i>stool softener oral capsule 240 mg</i>                                   | Surfak                      | OTC                       |
| <i>stool softener oral capsule 250 mg</i>                                   |                             | OTC                       |
| <i>stool softener oral tablet 100 mg</i>                                    | DOK                         | OTC                       |
| <i>surfak oral capsule 240 mg</i>   | Surfak                      | OTC                       |
| <b>*Macrolides*</b>   |                             |                           |
| <b>*Azithromycin***</b>   |                             |                           |
| <i>azithromycin oral packet 1 gm</i>  | Zithromax                   |                           |
| <i>azithromycin oral suspension reconstituted 100 mg/5ml, 200 mg/5ml</i>    | Zithromax                   |                           |
| <i>azithromycin oral tablet 250 mg, 500 mg</i>                              | Zithromax                   |                           |
| <i>azithromycin oral tablet 600 mg</i>                                      |                             |                           |
| <b>*Clarithromycin***</b>   |                             |                           |
| <i>clarithromycin oral suspension reconstituted 125 mg/5ml, 250 mg/5ml</i>  |                             |                           |
| <i>clarithromycin oral tablet 250 mg, 500 mg</i>                            |                             |                           |
| <b>*Erythromycins***</b>  |                             |                           |
| <b>E.E.S. GRANULES ORAL SUSPENSION RECONSTITUTED 200 MG/5ML</b>             | erythromycin ethylsuccinate |                           |
| <b>ERYPED 200 ORAL SUSPENSION RECONSTITUTED 200 MG/5ML</b>                  | erythromycin ethylsuccinate |                           |
| <i>erythromycin base oral capsule delayed release particles 250 mg</i>      |                             |                           |
| <i>erythromycin ethylsuccinate oral suspension reconstituted 200 mg/5ml</i> | E.E.S. Granules             |                           |
| <b>*Medical Devices And Supplies*</b>                                       |                             |                           |
| <b>*Applicators,Cotton Balls,Etc***</b>                                     |                             |                           |
| <b>ALCOHOL PADS PAD 70 %</b>  | alcohol prep                | OTC; QLL (5 EA per 1 day) |
| <i>alcohol prep pad</i>   | BD Swab Single Use Regular  | OTC; QLL (5 EA per 1 day) |
| <b>ALCOHOL SWABS PAD , 70 %</b>   | alcohol prep                | OTC; QLL (5 EA per 1 day) |
| <b>ALCOHOL WIPES PAD 70 %</b>   | alcohol prep                | OTC; QLL (5 EA per 1 day) |
| <b>BD SWAB SINGLE USE REGULAR PAD</b>                                       | alcohol prep                | OTC; QLL (5 EA per 1 day) |
| <b>BD SWABS SINGLE USE BUTTERFLY PAD</b>                                    | alcohol prep                | OTC; QLL (5 EA per 1 day) |
| <b>CARETOUCH ALCOHOL PREP PAD 70 %</b>                                      | alcohol prep                | OTC; QLL (5 EA per 1 day) |
| <b>CURITY ALCOHOL PREPS PAD 70 %</b>  | alcohol prep                | OTC; QLL (5 EA per 1 day) |

| <b>Formulary Drug Name</b>                       | <b>Reference</b>           | <b>Restrictions</b>          |
|--|----------------------------|------------------------------|
| <b>CURITY ALCOHOL SWABS PAD</b>                  | alcohol prep               | OTC; QLL (5 EA per 1 day)    |
| <b>CVS ALCOHOL PREP PADS PAD 70 %</b>            | alcohol prep               | OTC; QLL (5 EA per 1 day)    |
| <b>CVS PREP PAD 70 %</b>                         | alcohol prep               | OTC; QLL (5 EA per 1 day)    |
| <b>EASY TOUCH ALCOHOL PREP MEDIUM PAD 70 %</b>   | alcohol prep               | OTC; QLL (5 EA per 1 day)    |
| <b>EQL ALCOHOL SWABS PAD 70 %</b>                | alcohol prep               | OTC; QLL (5 EA per 1 day)    |
| <b>FIFTY50 ALCOHOL PREP PAD 70 %</b>             | alcohol prep               | OTC; QLL (5 EA per 1 day)    |
| <b>GLOBAL ALCOHOL PREP EASE PAD 70 %</b>         | alcohol prep               | OTC; QLL (5 EA per 1 day)    |
| <b>GNP ALCOHOL SWABS PAD 70 %</b>                | alcohol prep               | OTC; QLL (5 EA per 1 day)    |
| <b>H-E-B INCONTROL ALCOHOL PAD</b>               | alcohol prep               | OTC; QLL (5 EA per 1 day)    |
| <i>hm sterile alcohol prep pad</i>               | BD Swab Single Use Regular | OTC; QLL (5 EA per 1 day)    |
| <b>MEIJER ALCOHOL SWABS PAD 70 %</b>             | alcohol prep               | OTC; QLL (5 EA per 1 day)    |
| <b>QC ALCOHOL SWABS PAD 70 %</b>                 | alcohol prep               | OTC; QLL (5 EA per 1 day)    |
| <b>RA ALCOHOL SWABS PAD 70 %</b>                 | alcohol prep               | OTC; QLL (5 EA per 1 day)    |
| <b>REALITY SWABS PAD</b>                         | alcohol prep               | OTC; QLL (5 EA per 1 day)    |
| <b>RELION ALCOHOL SWABS PAD , 70 %</b>           | alcohol prep               | OTC; QLL (5 EA per 1 day)    |
| <b>SB ALCOHOL PREP PAD 70 %</b>                  | alcohol prep               | OTC; QLL (5 EA per 1 day)    |
| <b>SHOPKO ALCOHOL SWABS PAD 70 %</b>             | alcohol prep               | OTC; QLL (5 EA per 1 day)    |
| <b>SM ALCOHOL PREP PAD , 70 %</b>                | alcohol prep               | OTC; QLL (5 EA per 1 day)    |
| <b>SURE COMFORT ALCOHOL PREP PAD 70 %</b>        | alcohol prep               | OTC; QLL (5 EA per 1 day)    |
| <b>SURE-PREP ALCOHOL PREP PAD 70 %</b>           | alcohol prep               | OTC; QLL (5 EA per 1 day)    |
| <b>TGT ALCOHOL SWABS PAD 70 %</b>                | alcohol prep               | OTC; QLL (5 EA per 1 day)    |
| <i>true comfort alcohol prep pads pad 70 %</i>   | BD Swab Single Use Regular | OTC; QLL (5 EA per 1 day)    |
| <b>ULTICARE ALCOHOL SWABS PAD , 70 %</b>         | alcohol prep               | OTC; QLL (5 EA per 1 day)    |
| <b>ULTILET ALCOHOL SWABS PAD</b>                 | alcohol prep               | OTC; QLL (5 EA per 1 day)    |
| <b>WEBCOL ALCOHOL PREP LARGE PAD 70 %</b>        | alcohol prep               | OTC; QLL (5 EA per 1 day)    |
| <b>WEBCOL ALCOHOL PREP MEDIUM PAD 70 %</b>       | alcohol prep               | OTC; QLL (5 EA per 1 day)    |
| <b>*Cervical Caps***</b>                         |                            |                              |
| <b>FEMCAP VAGINAL DEVICE 22 MM, 26 MM, 30 MM</b> |                            |                              |
| <b>*Condoms - Male***</b>                        |                            |                              |
| <b>AIMSCO LUBRICATED</b>                         | aimsco lubricated          | OTC; QLL (12 EA per 30 days) |
| <b>DUREX EXTRA SENSITIVE DEVICE</b>              | aimsco lubricated          | OTC; QLL (12 EA per 30 days) |
| <b>DUREX EXTRA SENSITIVE THIN DEVICE</b>         | aimsco lubricated          | OTC; QLL (12 EA per 30 days) |

| <b>Formulary Drug Name</b>                  | <b>Reference</b>  | <b>Restrictions</b>          |
|---|-------------------|------------------------------|
| <b>FANTASY LUBRICATED</b>                   | aimsco lubricated | OTC; QLL (12 EA per 30 days) |
| <b>FANTASY LUBRICATED/SPERMICIDE</b>        | aimsco lubricated | OTC; QLL (12 EA per 30 days) |
| <b>KAMELEON LUBRICATED</b>                  | aimsco lubricated | OTC; QLL (12 EA per 30 days) |
| <b>KIMONO</b>                               | aimsco lubricated | OTC; QLL (12 EA per 30 days) |
| <b>KIMONO COLORS DEVICE</b>                 | aimsco lubricated | OTC; QLL (12 EA per 30 days) |
| <b>KIMONO MICRO THIN</b>                    | kimono micro thin | OTC; QLL (12 EA per 30 days) |
| <b>KIMONO MICRO THIN PLUS</b>               | aimsco lubricated | OTC; QLL (12 EA per 30 days) |
| <b>KIMONO PLUS</b>                          | aimsco lubricated | OTC; QLL (12 EA per 30 days) |
| <b>KIMONO PS</b>                            | aimsco lubricated | OTC; QLL (12 EA per 30 days) |
| <b>KIMONO PS PLUS</b>                       | aimsco lubricated | OTC; QLL (12 EA per 30 days) |
| <b>KIMONO SENSATION</b>                     | aimsco lubricated | OTC; QLL (12 EA per 30 days) |
| <b>KIMONO SENSATION PLUS</b>                | aimsco lubricated | OTC; QLL (12 EA per 30 days) |
| <b>KIMONO SPECIAL DEVICE</b>                | aimsco lubricated | OTC; QLL (12 EA per 30 days) |
| <b>MAXX</b>                                 | aimsco lubricated | OTC; QLL (12 EA per 30 days) |
| <b>MAXX PLUS</b>                            | aimsco lubricated | OTC; QLL (12 EA per 30 days) |
| <b>PREMIUM CONDOMS LUBRICATED</b>           | aimsco lubricated | OTC; QLL (12 EA per 30 days) |
| <b>REALITY LATEX CONDOMS</b>                | aimsco lubricated | OTC; QLL (12 EA per 30 days) |
| <b>REALITY LATEX/ULTRA TEXTURED DEVICE</b>  | aimsco lubricated | OTC; QLL (12 EA per 30 days) |
| <b>REALITY LATEX/ULTRA THIN DEVICE</b>      | aimsco lubricated | OTC; QLL (12 EA per 30 days) |
| <b>TRUSTEX COLOR CONDOMS + LUBE</b>         | aimsco lubricated | OTC; QLL (12 EA per 30 days) |
| <b>TRUSTEX LUB/RIBBED/STUDDED</b>           | aimsco lubricated | OTC; QLL (12 EA per 30 days) |
| <b>TRUSTEX LUB/SPERMICIDE EX ST</b>         | aimsco lubricated | OTC; QLL (12 EA per 30 days) |
| <b>TRUSTEX LUB/SPERMICIDE XL</b>            | aimsco lubricated | OTC; QLL (12 EA per 30 days) |
| <b>TRUSTEX LUBRICATED</b>                   | aimsco lubricated | OTC; QLL (12 EA per 30 days) |
| <b>TRUSTEX LUBRICATED EX LARGE</b>          | aimsco lubricated | OTC; QLL (12 EA per 30 days) |
| <b>TRUSTEX LUBRICATED EXTRA ST</b>          | aimsco lubricated | OTC; QLL (12 EA per 30 days) |
| <b>TRUSTEX LUBRICATED/SPERMICIDE</b>        | aimsco lubricated | OTC; QLL (12 EA per 30 days) |
| <b>TRUSTEX NATURAL CONDOMS + LUBE</b>       | aimsco lubricated | OTC; QLL (12 EA per 30 days) |
| <b>TRUSTEX NON-LUBRICATED</b>               | kimono micro thin | OTC; QLL (12 EA per 30 days) |
| <b>TRUSTEX RIA LUB/SPERMICIDE</b>           | aimsco lubricated | OTC; QLL (12 EA per 30 days) |
| <b>TRUSTEX RIA LUBRICATED</b>               | aimsco lubricated | OTC; QLL (12 EA per 30 days) |
| <b>TRUSTEX RIA NON-LUBRICATED</b>           | kimono micro thin | OTC; QLL (12 EA per 30 days) |
| <b>TRUSTEX-NONOXYNOL-9/RIB/STUD</b>         | aimsco lubricated | OTC; QLL (12 EA per 30 days) |
| <b>*Diaphragms***</b>                       |                   |                              |
| <b>OMNIFLEX DIAPHRAGM VAGINAL DIAPHRAGM</b> |                   |                              |



| <b>Formulary Drug Name</b>                                | <b>Reference</b>          | <b>Restrictions</b> |
|---|---------------------------|---------------------|
| <b>WIDE-SEAL DIAPHRAGM 60 VAGINAL DIAPHRAGM 2 %</b>       |                           |                     |
| <b>WIDE-SEAL DIAPHRAGM 65 VAGINAL DIAPHRAGM 2 %</b>       |                           |                     |
| <b>WIDE-SEAL DIAPHRAGM 70 VAGINAL DIAPHRAGM 2 %</b>       |                           |                     |
| <b>WIDE-SEAL DIAPHRAGM 75 VAGINAL DIAPHRAGM 2 %</b>       |                           |                     |
| <b>WIDE-SEAL DIAPHRAGM 80 VAGINAL DIAPHRAGM 2 %</b>       |                           |                     |
| <b>WIDE-SEAL DIAPHRAGM 85 VAGINAL DIAPHRAGM 2 %</b>       |                           |                     |
| <b>WIDE-SEAL DIAPHRAGM 90 VAGINAL DIAPHRAGM 2 %</b>       |                           |                     |
| <b>WIDE-SEAL DIAPHRAGM 95 VAGINAL DIAPHRAGM 2 %</b>       |                           |                     |
| <b>*Glucose Monitoring Test Supplies***</b>               |                           |                     |
| <b>ACCU-CHEK AVIVA IN VITRO SOLUTION</b>                  | element compact control 2 | OTC                 |
| <b>ACCU-CHEK COMPACT PLUS CONTROL IN VITRO SOLUTION</b>   | element compact control 2 | OTC                 |
| <b>ACCU-CHEK GUIDE CONTROL IN VITRO LIQUID</b>            | element compact control 2 | OTC                 |
| <b>ACCU-CHEK SMARTVIEW CONTROL IN VITRO LIQUID</b>        | element compact control 2 | OTC                 |
| <b>ACCUTREND GLUCOSE CONTROL IN VITRO SOLUTION</b>        | element compact control 2 | OTC                 |
| <b>ADVANCE INTUITION CONTROL IN VITRO LIQUID NORMAL</b>   | control                   | OTC                 |
| <b>ADVANCE MICRO-DRAW CONTROL IN VITRO LIQUID</b>         | element compact control 2 | OTC                 |
| <b>ADVANCE MICRO-DRAW NORMAL IN VITRO LIQUID</b>          | element compact control 2 | OTC                 |
| <b>ADVOCATE CONTROL SOLUTION IN VITRO LIQUID HIGH</b>     | diatrue control level 3   | OTC                 |
| <b>ADVOCATE CONTROL SOLUTION IN VITRO LIQUID LOW</b>      | diatrue control level 1   | OTC                 |
| <b>ADVOCATE REDI-CODE+ CONTROL IN VITRO SOLUTION HIGH</b> | diatrue control level 3   | OTC                 |
| <b>ADVOCATE REDI-CODE+ CONTROL IN VITRO SOLUTION LOW</b>  | diatrue control level 1   | OTC                 |



| <b>Formulary Drug Name</b>                                  | <b>Reference</b>              | <b>Restrictions</b> |
|---|-------------------------------|---------------------|
| <b>AGAMATRIX CONTROL IN VITRO SOLUTION</b>                  | element compact control 2     | OTC                 |
| <b>AGAMATRIX CONTROL IN VITRO SOLUTION HIGH</b>             | diatrue control level 3       | OTC                 |
| <b>AGAMATRIX CONTROL IN VITRO SOLUTION NORMAL</b>           | control                       | OTC                 |
| <b>ASSURE 3 CONTROL IN VITRO LIQUID</b>                     | element compact control 2     | OTC                 |
| <b>ASSURE 4 CONTROL LEVEL 1 &amp; 2 IN VITRO LIQUID</b>     | element compact control 2     | OTC                 |
| <b>ASSURE DOSE CONTROL IN VITRO SOLUTION NORMAL</b>         | control                       | OTC                 |
| <b>ASSURE DOSE NORM/HIGH CONTROL IN VITRO SOLUTION</b>      | element compact control 2     | OTC                 |
| <b>ASSURE II CONTROL IN VITRO LIQUID</b>                    | element compact control 2     | OTC                 |
| <b>ASSURE II CONTROL LEVEL 1 &amp; 2 IN VITRO LIQUID</b>    | element compact control 2     | OTC                 |
| <b>ASSURE PRISM CONTROL LEVEL 1&amp;2 IN VITRO SOLUTION</b> | element compact control 2     | OTC                 |
| <b>ASSURE PRO CONTROL LEVEL 1 &amp; 2 IN VITRO LIQUID</b>   | element compact control 2     | OTC                 |
| <b>BAYER BREEZE 2 CONTROL IN VITRO LIQUID HIGH</b>          | diatrue control level 3       | OTC                 |
| <b>BAYER BREEZE 2 CONTROL IN VITRO LIQUID LOW</b>           | diatrue control level 1       | OTC                 |
| <b>BAYER BREEZE 2 CONTROL IN VITRO LIQUID NORMAL</b>        | control                       | OTC                 |
| <b>BAYER CONTOUR IN VITRO LIQUID HIGH</b>                   | diatrue control level 3       | OTC                 |
| <b>BAYER CONTOUR IN VITRO LIQUID LOW</b>                    | diatrue control level 1       | OTC                 |
| <b>BAYER CONTOUR IN VITRO LIQUID NORMAL</b>                 | control                       | OTC                 |
| <b>CARESENS CONTROL A IN VITRO SOLUTION</b>                 | element compact control 2     | OTC                 |
| <b>CHEMSTRIP BG LOG BOOK</b>                                | supreme ii confidence paddles | OTC                 |
| <b>CLEVER CHOICE GLUCOSE CONTROL IN VITRO LIQUID HIGH</b>   | diatrue control level 3       | OTC                 |
| <b>CLEVER CHOICE GLUCOSE CONTROL IN VITRO LIQUID LOW</b>    | diatrue control level 1       | OTC                 |
| <b>CONTROL IN VITRO SOLUTION NORMAL</b>                     | control                       | OTC                 |

| <b>Formulary Drug Name</b>                                 | <b>Reference</b>          | <b>Restrictions</b>         |
|--|---------------------------|-----------------------------|
| <b>COOL CONTROL A IN VITRO SOLUTION</b>                    | element compact control 2 | OTC                         |
| <b>COOL CONTROL B IN VITRO SOLUTION</b>                    | element compact control 2 | OTC                         |
| <b>DEXCOM G5 MOB/G4 PLAT SENSOR</b>                        | freestyle libre 3 sensor  | PA; QLL (4 EA per 28 days)  |
| <b>DEXCOM G5 MOBILE RECEIVER DEVICE</b>                    |                           | PA; QLL (1 EA per 365 days) |
| <b>DEXCOM G5 MOBILE TRANSMITTER</b>                        |                           | PA; QLL (1 EA per 90 days)  |
| <b>DEXCOM G5 RECEIVER KIT DEVICE</b>                       |                           | PA; QLL (1 EA per 365 days) |
| <b>DEXCOM G6 RECEIVER DEVICE</b>                           |                           | PA; QLL (1 EA per 365 days) |
| <b>DEXCOM G6 SENSOR</b>                                    | freestyle libre 3 sensor  | PA; QLL (3 EA per 30 days)  |
| <b>DEXCOM G6 TRANSMITTER</b>                               |                           | PA; QLL (1 EA per 90 days)  |
| <b>DIATRUE CONTROL LEVEL 1 IN VITRO SOLUTION LOW</b>       | diatrue control level 1   | OTC                         |
| <b>DIATRUE CONTROL LEVEL 2 IN VITRO SOLUTION NORMAL</b>    | control                   | OTC                         |
| <b>DIATRUE CONTROL LEVEL 3 IN VITRO SOLUTION HIGH</b>      | diatrue control level 3   | OTC                         |
| <b>DUO-CARE CONTROL SOLUTION IN VITRO LIQUID</b>           | element compact control 2 | OTC                         |
| <b>EASY PLUS II CONTROL IN VITRO SOLUTION HIGH</b>         | diatrue control level 3   | OTC                         |
| <b>EASY PLUS II CONTROL IN VITRO SOLUTION LOW</b>          | diatrue control level 1   | OTC                         |
| <b>EASY STEP CONTROL IN VITRO SOLUTION HIGH</b>            | diatrue control level 3   | OTC                         |
| <b>EASY STEP CONTROL IN VITRO SOLUTION LOW</b>             | diatrue control level 1   | OTC                         |
| <b>EASY STEP CONTROL IN VITRO SOLUTION NORMAL</b>          | control                   | OTC                         |
| <b>EASY TALK CONTROL IN VITRO SOLUTION HIGH</b>            | diatrue control level 3   | OTC                         |
| <b>EASY TALK CONTROL IN VITRO SOLUTION LOW</b>             | diatrue control level 1   | OTC                         |
| <b>EASY TALK CONTROL IN VITRO SOLUTION NORMAL</b>          | control                   | OTC                         |
| <b>EASY TOUCH CONTROL HIGH &amp; LOW IN VITRO SOLUTION</b> | element compact control 2 | OTC                         |
| <b>EASY TOUCH HEALTHPRO CONTROL IN VITRO SOLUTION</b>      | element compact control 2 | OTC                         |
| <b>EASY TRAK CONTROL IN VITRO SOLUTION HIGH</b>            | diatrue control level 3   | OTC                         |

| <b>Formulary Drug Name</b>                                | <b>Reference</b>          | <b>Restrictions</b> |
|---|---------------------------|---------------------|
| <b>EASY TRAK CONTROL IN VITRO SOLUTION LOW</b>            | diatrue control level 1   | OTC                 |
| <b>EASY TRAK CONTROL IN VITRO SOLUTION NORMAL</b>         | control                   | OTC                 |
| <b>EASYGLUCO CONTROL IN VITRO SOLUTION HIGH</b>           | diatrue control level 3   | OTC                 |
| <b>EASYGLUCO CONTROL IN VITRO SOLUTION LOW</b>            | diatrue control level 1   | OTC                 |
| <b>EASYGLUCO CONTROL IN VITRO SOLUTION NORMAL</b>         | control                   | OTC                 |
| <b>EASYGLUCO PLUS LEVEL 1 IN VITRO SOLUTION</b>           | element compact control 2 | OTC                 |
| <b>EASYMAX 15 LEVEL 1 CONTROL IN VITRO SOLUTION</b>       | element compact control 2 | OTC                 |
| <b>EASYMAX 15 LEVEL 1-2 CONTROL IN VITRO SOLUTION</b>     | element compact control 2 | OTC                 |
| <b>EASYMAX 15 LEVEL 2 CONTROL IN VITRO SOLUTION</b>       | element compact control 2 | OTC                 |
| <b>EASYMAX CONTROL IN VITRO SOLUTION HIGH</b>             | diatrue control level 3   | OTC                 |
| <b>EASYMAX CONTROL IN VITRO SOLUTION LOW</b>              | diatrue control level 1   | OTC                 |
| <b>EASYMAX CONTROL IN VITRO SOLUTION NORMAL</b>           | control                   | OTC                 |
| <b>EASYMAX CONTROL NORMAL/LOW IN VITRO SOLUTION</b>       | element compact control 2 | OTC                 |
| <b>ELEMENT COMPACT CONTROL 2 IN VITRO SOLUTION</b>        | element compact control 2 | OTC                 |
| <b>ELEMENT COMPACT CONTROL 3 IN VITRO SOLUTION</b>        | element compact control 2 | OTC                 |
| <b>ELEMENT CONTROL IN VITRO LIQUID HIGH</b>               | diatrue control level 3   | OTC                 |
| <b>ELEMENT CONTROL IN VITRO LIQUID LOW</b>                | diatrue control level 1   | OTC                 |
| <b>ELEMENT CONTROL IN VITRO LIQUID NORMAL</b>             | control                   | OTC                 |
| <b>EMBRACE CONTROL IN VITRO SOLUTION LOW</b>              | diatrue control level 1   | OTC                 |
| <b>EMBRACE EVO CONTROL LEVEL 1 IN VITRO LIQUID LOW</b>    | diatrue control level 1   | OTC                 |
| <b>EMBRACE EVO CONTROL LEVEL 2 IN VITRO LIQUID NORMAL</b> | control                   | OTC                 |
| <b>EMBRACE GLUCOSE CONTROL IN VITRO LIQUID HIGH</b>       | diatrue control level 3   | OTC                 |

| <b>Formulary Drug Name</b>                            | <b>Reference</b>          | <b>Restrictions</b>         |
|---|---------------------------|-----------------------------|
| <b>EMBRACE PRO GLUCOSE CONTROL IN VITRO LIQUID</b>    | element compact control 2 | OTC                         |
| <b>EVENCARE CONTROL LOW/HIGH IN VITRO LIQUID</b>      | element compact control 2 | OTC                         |
| <b>EVENCARE G2 LOW/HIGH CONTROL IN VITRO SOLUTION</b> | element compact control 2 | OTC                         |
| <b>EVENCARE G3 LOW/HIGH CONTROL IN VITRO SOLUTION</b> | element compact control 2 | OTC                         |
| <b>EVENCARE MINI CONTROL IN VITRO SOLUTION NORMAL</b> | control                   | OTC                         |
| <b>EVOLUTION CONTROL IN VITRO SOLUTION NORMAL</b>     | control                   | OTC                         |
| <b>FORA CONTROL IN VITRO SOLUTION HIGH</b>            | diatrue control level 3   | OTC                         |
| <b>FORA CONTROL IN VITRO SOLUTION LOW</b>             | diatrue control level 1   | OTC                         |
| <b>FORA CONTROL IN VITRO SOLUTION NORMAL</b>          | control                   | OTC                         |
| <b>FORACARE GDH CONTROL IN VITRO SOLUTION HIGH</b>    | diatrue control level 3   | OTC                         |
| <b>FORACARE GDH CONTROL IN VITRO SOLUTION LOW</b>     | diatrue control level 1   | OTC                         |
| <b>FORACARE GDH CONTROL IN VITRO SOLUTION NORMAL</b>  | control                   | OTC                         |
| <b>FORTISCARE CONTROL IN VITRO SOLUTION HIGH</b>      | diatrue control level 3   | OTC                         |
| <b>FORTISCARE CONTROL IN VITRO SOLUTION LOW</b>       | diatrue control level 1   | OTC                         |
| <b>FORTISCARE CONTROL IN VITRO SOLUTION NORMAL</b>    | control                   | OTC                         |
| <b>FREESTYLE CONTROL SOLUTION IN VITRO LIQUID</b>     | element compact control 2 | OTC                         |
| <b>FREESTYLE LIBRE 14 DAY READER DEVICE</b>           |                           | PA; QLL (1 EA per 365 days) |
| <b>FREESTYLE LIBRE 14 DAY SENSOR</b>                  | freestyle libre 3 sensor  | PA; QLL (2 EA per 28 days)  |
| <b>FREESTYLE LIBRE 2 READER DEVICE</b>                |                           | PA; QLL (1 EA per 365 days) |
| <b>FREESTYLE LIBRE 2 SENSOR</b>                       | freestyle libre 3 sensor  | PA; QLL (2 EA per 28 days)  |
| <i>freestyle libre 3 sensor</i>                       | Dexcom G6 Sensor          | PA; QLL (2 EA per 28 days)  |
| <b>FREESTYLE LIBRE READER DEVICE</b>                  |                           | PA; QLL (1 EA per 365 days) |
| <b>FREESTYLE LIBRE SENSOR SYSTEM</b>                  | freestyle libre 3 sensor  | PA; QLL (3 EA per 30 days)  |
| <b>GE100 CONTROL IN VITRO SOLUTION NORMAL</b>         | control                   | OTC                         |

| <b>Formulary Drug Name</b>                                 | <b>Reference</b>              | <b>Restrictions</b> |
|--|-------------------------------|---------------------|
| <b>GLUCOCARD 01 CONTROL IN VITRO LIQUID</b>                | element compact control 2     | OTC                 |
| <b>GLUCOCARD 01 CONTROL IN VITRO SOLUTION NORMAL</b>       | control                       | OTC                 |
| <b>GLUCOCARD EXPRESSION CONTROL IN VITRO SOLUTION</b>      | element compact control 2     | OTC                 |
| <b>GLUCOCARD SHINE CONTROL IN VITRO SOLUTION</b>           | element compact control 2     | OTC                 |
| <b>GLUCOCARD X-SENSOR CONTROL IN VITRO SOLUTION NORMAL</b> | control                       | OTC                 |
| <b>GLUCOCOM AUTOLINK TELEMONITOR</b>                       | supreme ii confidence paddles | OTC                 |
| <b>GLUCOCOM CONTROL IN VITRO LIQUID HIGH</b>               | diatrue control level 3       | OTC                 |
| <b>GLUCOCOM CONTROL IN VITRO LIQUID NORMAL</b>             | control                       | OTC                 |
| <b>GLUCOSE CONTROL IN VITRO SOLUTION</b>                   | element compact control 2     | OTC                 |
| <b>GLUCOSE CONTROL IN VITRO SOLUTION NORMAL</b>            | control                       | OTC                 |
| <b>GNP EASY TOUCH CONT HIGH/LOW IN VITRO SOLUTION</b>      | element compact control 2     | OTC                 |
| <b>IN TOUCH</b>  | supreme ii confidence paddles | OTC                 |
| <b>IN TOUCH GLUCOSE CONTROL IN VITRO SOLUTION</b>          | element compact control 2     | OTC                 |
| <b>INFINITY CONTROL IN VITRO SOLUTION HIGH</b>             | diatrue control level 3       | OTC                 |
| <b>INFINITY CONTROL IN VITRO SOLUTION LOW</b>              | diatrue control level 1       | OTC                 |
| <b>INFINITY CONTROL IN VITRO SOLUTION NORMAL</b>           | control                       | OTC                 |
| <b>LIBERTY GLUCOSE CONTROL IN VITRO LIQUID NORMAL</b>      | control                       | OTC                 |
| <b>LIBERTY GLUCOSE CONTROL IN VITRO SOLUTION HIGH</b>      | diatrue control level 3       | OTC                 |
| <b>LIBERTY GLUCOSE CONTROL IN VITRO SOLUTION NORMAL</b>    | control                       | OTC                 |
| <b>LIBERTY GLUCOSE CONTROL MID IN VITRO SOLUTION</b>       | element compact control 2     | OTC                 |
| <b>MEDISENSE GLUCOSE KETONE CONTR IN VITRO LIQUID</b>      | element compact control 2     | OTC                 |
| <b>MEDISENSE HI/MID/LOW CONTROL IN VITRO LIQUID</b>        | element compact control 2     | OTC                 |

| <b>Formulary Drug Name</b>                             | <b>Reference</b>             | <b>Restrictions</b>           |
|--|------------------------------|-------------------------------|
| <b>MEDISENSE HIGH/LOW CONTROL IN VITRO LIQUID</b>      | element compact control 2    | OTC                           |
| <b>MEDISENSE MID CONTROL IN VITRO LIQUID</b>           | element compact control 2    | OTC                           |
| <b>MICRODOT CONTROL HIGH/LOW IN VITRO SOLUTION</b>     | element compact control 2    | OTC                           |
| <b>MYGLUCOHEALTH CONTROL IN VITRO SOLUTION</b>         | element compact control 2    | OTC                           |
| <b>NEUTEK 2TEK CONTROL IN VITRO SOLUTION</b>           | element compact control 2    | OTC                           |
| <b>NOVA MAX PLUS GLU/KET CONTROL IN VITRO LIQUID</b>   | element compact control 2    | OTC                           |
| <b>ON CALL EXPRESS GLUCOSE CONTR IN VITRO SOLUTION</b> | element compact control 2    | OTC                           |
| <b>ON CALL PLUS GLUCOSE CONTROL IN VITRO SOLUTION</b>  | element compact control 2    | OTC                           |
| <b>ON CALL VIVID GLUCOSE CONTROL IN VITRO SOLUTION</b> | element compact control 2    | OTC                           |
| <b>ONETOUCH DELICA LANCETS 30G</b>                     | acti-lance 28g               | OTC; QLL (5 EA per 1 day)     |
| <b>ONETOUCH DELICA LANCETS 33G</b>                     | acti-lance 28g               | OTC; QLL (5 EA per 1 day)     |
| <b>ONETOUCH DELICA LANCING DEV</b>                     | adjustable lancing device    | OTC                           |
| <b>ONETOUCH DELICA PLUS LANCET30G</b>                  | acti-lance 28g               | OTC; QLL (5 EA per 1 day)     |
| <b>ONETOUCH DELICA PLUS LANCET33G</b>                  | acti-lance 28g               | OTC; QLL (5 EA per 1 day)     |
| <b>ONETOUCH DELICA PLUS LANCING</b>                    | adjustable lancing device    | OTC                           |
| <b>ONETOUCH ULTRA 2 KIT W/DEVICE</b>                   | blood glucose monitor system | OTC; QLL (1 kit per 365 days) |
| <b>ONETOUCH ULTRA CONTROL IN VITRO SOLUTION</b>        | element compact control 2    | OTC                           |
| <b>ONETOUCH ULTRA MINI KIT W/DEVICE</b>                | blood glucose monitor system | OTC; QLL (1 kit per 365 days) |
| <b>ONETOUCH ULTRALINK KIT W/DEVICE</b>                 | blood glucose monitor system | OTC; QLL (1 kit per 365 days) |
| <b>ONETOUCH VERIO FLEX SYSTEM KIT W/DEVICE</b>         | blood glucose monitor system | OTC                           |
| <b>ONETOUCH VERIO IN VITRO SOLUTION</b>                | element compact control 2    | OTC                           |
| <b>ONETOUCH VERIO IN VITRO SOLUTION HIGH</b>           | diatrue control level 3      | OTC                           |
| <b>ONETOUCH VERIO IQ SYSTEM KIT W/DEVICE</b>           | blood glucose monitor system | OTC; QLL (1 kit per 365 days) |
| <b>ONETOUCH VERIO KIT W/DEVICE</b>                     | blood glucose monitor system | OTC; QLL (1 kit per 365 days) |

| <b>Formulary Drug Name</b>                              | <b>Reference</b>              | <b>Restrictions</b> |
|---|-------------------------------|---------------------|
| <b>ONETOUCH VERIO REFLECT KIT W/DEVICE</b>              | blood glucose monitor system  | OTC                 |
| <b>OPTUMRX GLUCOSE CONTROL IN VITRO SOLUTION</b>        | element compact control 2     | OTC                 |
| <b>POCKETCHEM EZ CONTROL IN VITRO SOLUTION</b>          | element compact control 2     | OTC                 |
| <b>PRECISION GLUCOSE CONTROL IN VITRO LIQUID</b>        | element compact control 2     | OTC                 |
| <b>PRECISION GLUCOSE CONTROL SOLN IN VITRO SOLUTION</b> | element compact control 2     | OTC                 |
| <b>PRECISION GLUCOSE KETONE CONTR IN VITRO LIQUID</b>   | element compact control 2     | OTC                 |
| <b>PRECISION GLUCOSE/KETONE CONTR IN VITRO LIQUID</b>   | element compact control 2     | OTC                 |
| <b>PRODIGY CONTROL SOLUTION IN VITRO SOLUTION HIGH</b>  | diatrue control level 3       | OTC                 |
| <b>PRODIGY CONTROL SOLUTION IN VITRO SOLUTION LOW</b>   | diatrue control level 1       | OTC                 |
| <b>QUICKTEK CONTROL SOLUTION IN VITRO LIQUID</b>        | element compact control 2     | OTC                 |
| <b>QUINTET CONTROL HIGH/NORMAL IN VITRO SOLUTION</b>    | element compact control 2     | OTC                 |
| <b>REFUAH PLUS GLUCOSE CONTROL IN VITRO SOLUTION</b>    | element compact control 2     | OTC                 |
| <b>RIGHTEST GC300 CONTROL IN VITRO LIQUID HIGH</b>      | diatrue control level 3       | OTC                 |
| <b>RIGHTEST GC300 CONTROL IN VITRO LIQUID NORMAL</b>    | control                       | OTC                 |
| <b>SMARTEST CONTROL MEDIUM IN VITRO SOLUTION</b>        | element compact control 2     | OTC                 |
| <b>SOLARTEK GLUCOSE CONTROL IN VITRO LIQUID</b>         | element compact control 2     | OTC                 |
| <b>SOLUS V2 CONTROL IN VITRO SOLUTION HIGH</b>          | diatrue control level 3       | OTC                 |
| <b>SOLUS V2 CONTROL IN VITRO SOLUTION LOW</b>           | diatrue control level 1       | OTC                 |
| <b>SUPREME II CONFIDENCE PADDLES</b>                    | supreme ii confidence paddles | OTC                 |
| <b>SUPREME II HIGH/LOW CONTROL IN VITRO LIQUID</b>      | element compact control 2     | OTC                 |
| <b>SURESTEP GLUCOSE CONTROL IN VITRO SOLUTION</b>       | element compact control 2     | OTC                 |
| <b>SURESTEP PRO HIGH GLUCOSE IN VITRO LIQUID</b>        | diatrue control level 3       | OTC                 |



| <b>Formulary Drug Name</b>  | <b>Reference</b>              | <b>Restrictions</b>           |
|---|-------------------------------|-------------------------------|
| <b>SURESTEP PRO LINEARITY KIT</b>   | supreme ii confidence paddles | OTC                           |
| <b>SURESTEP PRO LOW GLUCOSE IN VITRO LIQUID</b>   | diatrue control level 1       | OTC                           |
| <b>SURESTEP PRO NORMAL GLUCOSE IN VITRO LIQUID</b>  | control                       | OTC                           |
| <b>TAI DOC CONTROL IN VITRO SOLUTION NORMAL</b>   | control                       | OTC                           |
| <b>TELCARE GLUCOSE CONTROL IN VITRO SOLUTION</b>  | element compact control 2     | OTC                           |
| <b>TRACER II 3 VOLT BATTERY</b>   | supreme ii confidence paddles | OTC                           |
| <b>TRUE METRIX LEVEL 1 IN VITRO SOLUTION LOW</b>  | diatrue control level 1       | OTC                           |
| <b>TRUE METRIX LEVEL 2 IN VITRO SOLUTION NORMAL</b>   | control                       | OTC                           |
| <b>TRUE METRIX LEVEL 3 IN VITRO SOLUTION HIGH</b>   | diatrue control level 3       | OTC                           |
| <b>TRUECONTROL GLUCOSE CONT LEV 0 IN VITRO LIQUID</b>   | element compact control 2     | OTC                           |
| <b>TRUECONTROL GLUCOSE CONT LEV 1 IN VITRO LIQUID</b>   | element compact control 2     | OTC                           |
| <b>ULTRATRAK PRO CONTROL IN VITRO SOLUTION</b>  | element compact control 2     | OTC                           |
| <b>ULTRATRAK PRO CONTROL IN VITRO SOLUTION NORMAL</b>   | control                       | OTC                           |
| <b>ULTRATRAK ULTIMATE CONTROL IN VITRO SOLUTION</b>   | element compact control 2     | OTC                           |
| <b>UNISTRIP CONTROL IN VITRO SOLUTION HIGH</b>  | diatrue control level 3       | OTC                           |
| <b>UNISTRIP CONTROL IN VITRO SOLUTION LOW</b>   | diatrue control level 1       | OTC                           |
| <b>VICTORY CONTROL LEVEL 1/2 IN VITRO SOLUTION</b>  | element compact control 2     | OTC                           |
| <b>*Needles &amp; Syringes***</b>   |                               |                               |
| <b>ADVOCATE INSULIN SYRINGE 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 5/16" 0.3 ML</b> | eql insulin syringe           | OTC; QLL (200 EA per 30 days) |
| <b>ADVOCATE INSULIN SYRINGE 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML</b>                                      | easy comfort insulin syringe  | OTC; QLL (200 EA per 30 days) |
| <b>ADVOCATE INSULIN SYRINGE 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML</b>                  | careone insulin syringe       | OTC; QLL (200 EA per 30 days) |
| <b>BD ECLIPSE SYRINGE 25G X 5/8" 1 ML, 27G X 1/2" 1 ML</b>  | syringe luer slip             | OTC; QLL (200 EA per 30 days) |

| <b>Formulary Drug Name</b>   | <b>Reference</b>               | <b>Restrictions</b>           |
|--|--------------------------------|-------------------------------|
| <b>BD INSULIN SYR ULTRAFINE II 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML</b>                    | careone insulin syringe        | OTC; QLL (200 EA per 30 days) |
| <b>BD INSULIN SYRINGE 25G X 1" 1 ML, 25G X 5/8" 1 ML, 26G X 1/2" 1 ML, 27.5G X 5/8" 2 ML</b> |                                | OTC; QLL (200 EA per 30 days) |
| <b>BD INSULIN SYRINGE 27G X 1/2" 1 ML</b>  | insulin syringe-needle u-100   | OTC; QLL (200 EA per 30 days) |
| <b>BD INSULIN SYRINGE 29G X 1/2" 1 ML</b>  | eql insulin syringe            | OTC; QLL (200 EA per 30 days) |
| <b>BD INSULIN SYRINGE MICROFINE 27G X 5/8" 1 ML</b>  |                                | OTC; QLL (200 EA per 30 days) |
| <b>BD INSULIN SYRINGE MICROFINE 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML</b>                       | global inject ease insulin syr | OTC; QLL (200 EA per 30 days) |
| <b>BD INSULIN SYRINGE U/F 30G X 1/2" 1 ML, 31G X 5/16" 0.3 ML</b>                            | careone insulin syringe        | OTC; QLL (200 EA per 30 days) |
| <b>BD INSULIN SYRINGE U-100 1 ML</b>   | kmart valu insulin syringe 29g | OTC; QLL (200 EA per 30 days) |
| <b>BD INSULIN SYRINGE ULTRAFINE 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML</b>    | eql insulin syringe            | OTC; QLL (200 EA per 30 days) |
| <b>BD INSULIN SYRINGE ULTRAFINE 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 31G X 5/16" 0.5 ML</b> | careone insulin syringe        | OTC; QLL (200 EA per 30 days) |
| <b>BD LUER-LOK SYRINGE 20G X 1" 1 ML</b>   |                                | OTC; QLL (200 EA per 30 days) |
| <b>BD LUER-LOK SYRINGE 25G X 5/8" 1 ML</b>   | syringe luer slip              | OTC; QLL (200 EA per 30 days) |
| <b>BD PEN NEEDLE MINI U/F 31G X 5 MM</b>   | 1st tier unifine pentips       | OTC; QLL (200 EA per 30 days) |
| <b>BD PEN NEEDLE NANO 2ND GEN 32G X 4 MM</b>   | 1st tier unifine pentips       | OTC; QLL (200 EA per 30 days) |
| <b>BD PEN NEEDLE NANO U/F 32G X 4 MM</b>   | 1st tier unifine pentips       | QLL (200 EA per 30 days)      |
| <b>BD PEN NEEDLE ORIGINAL U/F 29G X 12.7MM</b>   | sure comfort pen needles       | OTC; QLL (200 EA per 30 days) |
| <b>BD PEN NEEDLE SHORT U/F 31G X 8 MM</b>  | 1st tier unifine pentips       | OTC; QLL (200 EA per 30 days) |
| <b>BD SAFETYGLIDE INSULIN SYRINGE 29G X 1/2" 0.5 ML</b>                                      | eql insulin syringe            | OTC; QLL (200 EA per 30 days) |
| <b>BD SAFETYGLIDE INSULIN SYRINGE 30G X 5/16" 0.5 ML</b>                                     | easy comfort insulin syringe   | OTC; QLL (200 EA per 30 days) |
| <b>BD SAFETYGLIDE INSULIN SYRINGE 31G X 15/64" 0.3 ML</b>                                    | global easy glide insulin syr  | QLL (200 EA per 30 days)      |

| <b>Formulary Drug Name</b>  | <b>Reference</b>               | <b>Restrictions</b>           |
|---|--------------------------------|-------------------------------|
| <b>BD SAFETYGLIDE INSULIN SYRINGE 31G X 15/64" 0.5 ML</b>   | global easy glide insulin syr  | OTC; QLL (200 EA per 30 days) |
| <b>BD SAFETYGLIDE INSULIN SYRINGE 31G X 5/16" 0.3 ML</b>  | careone insulin syringe        | OTC; QLL (200 EA per 30 days) |
| <b>BD SAFETYGLIDE SYRINGE/NEEDLE 27G X 5/8" 1 ML</b>  |                                | OTC; QLL (200 EA per 30 days) |
| <b>BD SAFETY-LOK INSULIN SYRINGE 29G X 1/2" 1 ML</b>  | eql insulin syringe            | OTC; QLL (200 EA per 30 days) |
| <b>BD SYRINGE/NEEDLE 25G X 5/8" 1 ML</b>  | syringe luer slip              | OTC; QLL (200 EA per 30 days) |
| <b>BD SYRINGE/NEEDLE SLIP TIP 25G X 5/8" 1 ML</b>   | syringe luer slip              | OTC; QLL (200 EA per 30 days) |
| <b>BD SYRINGE/NEEDLE SLIP TIP 26G X 5/8" 1 ML</b>   |                                | OTC; QLL (200 EA per 30 days) |
| <i>careone insulin syringe 30g x 1/2" 0.3 ml, 30g x 1/2" 0.5 ml</i>   | BD Insulin Syringe Ultrafine   | OTC; QLL (200 EA per 30 days) |
| <i>careone insulin syringe 30g x 1/2" 1 ml</i>  | BD Insulin Syringe U/F         | OTC; QLL (200 EA per 30 days) |
| <b>CAREONE INSULIN SYRINGE 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML</b>   | careone insulin syringe        | OTC; QLL (200 EA per 30 days) |
| <b>CARETOUCH INSULIN SYRINGE 28G X 5/16" 1 ML</b>   |                                | OTC; QLL (200 EA per 30 days) |
| <b>COMFORT ASSIST INSULIN SYRINGE 31G X 5/16" 0.3 ML</b>  | careone insulin syringe        | OTC; QLL (200 EA per 30 days) |
| <b>COMFORT EZ INSULIN SYRINGE 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML</b>  | global inject ease insulin syr | OTC; QLL (200 EA per 30 days) |
| <b>COMFORT EZ INSULIN SYRINGE 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 5/16" 0.3 ML</b>                                       | eql insulin syringe            | OTC; QLL (200 EA per 30 days) |
| <b>COMFORT EZ INSULIN SYRINGE 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</b> | careone insulin syringe        | OTC; QLL (200 EA per 30 days) |
| <b>COMFORT EZ INSULIN SYRINGE 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML</b>  | easy comfort insulin syringe   | OTC; QLL (200 EA per 30 days) |
| <i>easy comfort insulin syringe 30g x 1/2" 0.5 ml</i>   | BD Insulin Syringe Ultrafine   | OTC; QLL (200 EA per 30 days) |
| <i>easy comfort insulin syringe 30g x 1/2" 1 ml</i>   | BD Insulin Syringe U/F         | OTC; QLL (200 EA per 30 days) |
| <i>easy comfort insulin syringe 30g x 5/16" 0.5 ml</i>  | Advocate Insulin Syringe       | OTC; QLL (200 EA per 30 days) |
| <b>EASY COMFORT INSULIN SYRINGE 30G X 5/16" 1 ML</b>  | easy comfort insulin syringe   | OTC; QLL (200 EA per 30 days) |

| <b>Formulary Drug Name</b>  | <b>Reference</b>               | <b>Restrictions</b>           |
|---|--------------------------------|-------------------------------|
| <b>EASY COMFORT INSULIN SYRINGE 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML</b>  | careone insulin syringe        | OTC; QLL (200 EA per 30 days) |
| <b>EASY TOUCH FLIPLOCK INSULIN SY 29G X 1/2" 1 ML</b>   | eql insulin syringe            | OTC; QLL (200 EA per 30 days) |
| <b>EASY TOUCH FLIPLOCK INSULIN SY 30G X 1/2" 1 ML, 31G X 5/16" 1 ML</b>   | careone insulin syringe        | OTC; QLL (200 EA per 30 days) |
| <b>EASY TOUCH FLIPLOCK INSULIN SY 30G X 5/16" 1 ML</b>  | easy comfort insulin syringe   | OTC; QLL (200 EA per 30 days) |
| <b>EASY TOUCH FLIPLOCK SAFETY SYR 25G X 1" 1 ML</b>   |                                | OTC; QLL (200 EA per 30 days) |
| <b>EASY TOUCH FLIPLOCK SAFETY SYR 27G X 1/2" 1 ML</b>   | syringe luer slip              | OTC; QLL (200 EA per 30 days) |
| <b>EASY TOUCH FLURINGE 25G X 1" 1 ML</b>  |                                | OTC; QLL (200 EA per 30 days) |
| <b>EASY TOUCH FLURINGE 25G X 5/8" 1 ML</b>  | syringe luer slip              | OTC; QLL (200 EA per 30 days) |
| <b>EASY TOUCH FLURINGE FLIPLOCK 25G X 1" 1 ML</b>   |                                | OTC; QLL (200 EA per 30 days) |
| <b>EASY TOUCH FLURINGE FLIPLOCK 25G X 5/8" 1 ML</b>   | syringe luer slip              | OTC; QLL (200 EA per 30 days) |
| <b>EASY TOUCH FLURINGE SHEATHLOCK 25G X 1" 1 ML</b>   |                                | OTC; QLL (200 EA per 30 days) |
| <b>EASY TOUCH FLURINGE SHEATHLOCK 25G X 5/8" 1 ML</b>   | syringe luer slip              | OTC; QLL (200 EA per 30 days) |
| <b>EASY TOUCH INSULIN SAFETY SYR 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML</b>   | eql insulin syringe            | OTC; QLL (200 EA per 30 days) |
| <b>EASY TOUCH INSULIN SAFETY SYR 30G X 1/2" 1 ML</b>  | careone insulin syringe        | OTC; QLL (200 EA per 30 days) |
| <b>EASY TOUCH INSULIN SAFETY SYR 30G X 5/16" 0.5 ML</b>   | easy comfort insulin syringe   | OTC; QLL (200 EA per 30 days) |
| <b>EASY TOUCH INSULIN SYRINGE 27G X 1/2" 0.5 ML, 27G X 1/2" 1 ML</b>  | insulin syringe-needle u-100   | OTC; QLL (200 EA per 30 days) |
| <b>EASY TOUCH INSULIN SYRINGE 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML</b>  | global inject ease insulin syr | OTC; QLL (200 EA per 30 days) |
| <b>EASY TOUCH INSULIN SYRINGE 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 5/16" 0.3 ML</b>  | eql insulin syringe            | OTC; QLL (200 EA per 30 days) |
| <b>EASY TOUCH INSULIN SYRINGE 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</b> | careone insulin syringe        | OTC; QLL (200 EA per 30 days) |
| <b>EASY TOUCH INSULIN SYRINGE 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML</b>  | easy comfort insulin syringe   | OTC; QLL (200 EA per 30 days) |

| <b>Formulary Drug Name</b>  | <b>Reference</b>               | <b>Restrictions</b>           |
|---|--------------------------------|-------------------------------|
| <b>EASY TOUCH SAFETY SYRINGE 25G X 1" 1 ML</b>  |                                | OTC; QLL (200 EA per 30 days) |
| <b>EASY TOUCH SAFETY SYRINGE 25G X 5/8" 1 ML</b>  | syringe luer slip              | OTC; QLL (200 EA per 30 days) |
| <b>EASY TOUCH SHEATHLOCK SYRINGE 29G X 1/2" 1 ML</b>  | eql insulin syringe            | OTC; QLL (200 EA per 30 days) |
| <b>EASY TOUCH SHEATHLOCK SYRINGE 30G X 1/2" 1 ML, 31G X 5/16" 1 ML</b>  | careone insulin syringe        | OTC; QLL (200 EA per 30 days) |
| <b>EASY TOUCH SHEATHLOCK SYRINGE 30G X 5/16" 1 ML</b>   | easy comfort insulin syringe   | OTC; QLL (200 EA per 30 days) |
| <b>EASY TOUCH TB SHEATHLOCK SYR 26G X 5/8" 1 ML</b>   |                                | OTC; QLL (200 EA per 30 days) |
| <b>EQL INSULIN SYRINGE 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 30G X 5/16" 0.3 ML</b>                             | eql insulin syringe            | OTC; QLL (200 EA per 30 days) |
| <i>eql insulin syringe 29g x 1/2" 1 ml, 30g x 5/16" 0.5 ml</i>  | Advocate Insulin Syringe       | OTC; QLL (200 EA per 30 days) |
| <b>EQL INSULIN SYRINGE 30G X 5/16" 1 ML</b>   | easy comfort insulin syringe   | OTC; QLL (200 EA per 30 days) |
| <b>EQL INSULIN SYRINGE 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML</b>                             | careone insulin syringe        | OTC; QLL (200 EA per 30 days) |
| <b>EXEL COMFORT POINT INSULIN SYR 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML</b>  | global inject ease insulin syr | OTC; QLL (200 EA per 30 days) |
| <b>EXEL COMFORT POINT INSULIN SYR 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 5/16" 0.3 ML</b> | eql insulin syringe            | OTC; QLL (200 EA per 30 days) |
| <b>EXEL COMFORT POINT INSULIN SYR 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML</b>                                      | easy comfort insulin syringe   | OTC; QLL (200 EA per 30 days) |
| <b>FIFTY50 SUPERIOR COMFORT SYR 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML</b>                    | careone insulin syringe        | OTC; QLL (200 EA per 30 days) |
| <b>GLOBAL EASY GLIDE INSULIN SYR 31G X 5/16" 0.3 ML</b>   | careone insulin syringe        | OTC; QLL (200 EA per 30 days) |
| <i>global inject ease insulin syr 28g x 1/2" 0.5 ml, 28g x 1/2" 1 ml</i>  | BD Insulin Syringe MicroFine   | OTC; QLL (200 EA per 30 days) |
| <b>GLOBAL INJECT EASE INSULIN SYR 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 30G X 5/16" 0.3 ML</b>                  | eql insulin syringe            | OTC; QLL (200 EA per 30 days) |
| <i>global inject ease insulin syr 29g x 1/2" 1 ml, 30g x 5/16" 0.5 ml</i>                                       | Advocate Insulin Syringe       | OTC; QLL (200 EA per 30 days) |
| <i>global inject ease insulin syr 30g x 1/2" 0.3 ml, 30g x 1/2" 0.5 ml</i>                                      | BD Insulin Syringe Ultrafine   | OTC; QLL (200 EA per 30 days) |



| <b>Formulary Drug Name</b>  | <b>Reference</b>             | <b>Restrictions</b>           |
|---|------------------------------|-------------------------------|
| <i>global inject ease insulin syr 30g x 1/2" 1 ml</i>   | BD Insulin Syringe U/F       | OTC; QLL (200 EA per 30 days) |
| <b>GLOBAL INJECT EASE INSULIN SYR 30G X 5/16" 1 ML</b>  | easy comfort insulin syringe | OTC; QLL (200 EA per 30 days) |
| <b>GLOBAL INJECT EASE INSULIN SYR 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML</b>  | careone insulin syringe      | OTC; QLL (200 EA per 30 days) |
| <i>global insulin syringes 30g x 1/2" 0.3 ml</i>  | BD Insulin Syringe Ultrafine | OTC; QLL (200 EA per 30 days) |
| <b>GLOBAL INSULIN SYRINGES 30G X 5/16" 0.3 ML</b>   | eql insulin syringe          | OTC; QLL (200 EA per 30 days) |
| <b>GLUCOPRO INSULIN SYRINGE 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</b> | careone insulin syringe      | OTC; QLL (200 EA per 30 days) |
| <b>GLUCOPRO INSULIN SYRINGE 30G X 5/16" 0.3 ML</b>  | eql insulin syringe          | OTC; QLL (200 EA per 30 days) |
| <b>GLUCOPRO INSULIN SYRINGE 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML</b>  | easy comfort insulin syringe | OTC; QLL (200 EA per 30 days) |
| <i>gnp insulin syringe 28g x 1/2" 0.5 ml</i>  | BD Insulin Syringe MicroFine | OTC; QLL (200 EA per 30 days) |
| <b>GNP INSULIN SYRINGE 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 30G X 5/16" 0.3 ML</b>   | eql insulin syringe          | OTC; QLL (200 EA per 30 days) |
| <i>gnp insulin syringe 29g x 1/2" 1 ml, 30g x 5/16" 0.5 ml</i>  | Advocate Insulin Syringe     | OTC; QLL (200 EA per 30 days) |
| <b>GNP INSULIN SYRINGE 30G X 5/16" 1 ML</b>   | easy comfort insulin syringe | OTC; QLL (200 EA per 30 days) |
| <b>GNP INSULIN SYRINGE 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML</b>   | careone insulin syringe      | OTC; QLL (200 EA per 30 days) |
| <i>gnp ultra com insulin syringe 28g x 1/2" 1 ml</i>  | BD Insulin Syringe MicroFine | OTC; QLL (200 EA per 30 days) |
| <b>HM ULTICARE INSULIN SYRINGE 31G X 5/16" 0.3 ML</b>   | careone insulin syringe      | OTC; QLL (200 EA per 30 days) |
| <i>insulin syringe 27g x 1/2" 0.5 ml</i>  | Easy Touch Insulin Syringe   | OTC; QLL (200 EA per 30 days) |
| <i>insulin syringe 27g x 1/2" 1 ml</i>  | BD Insulin Syringe           | OTC; QLL (200 EA per 30 days) |
| <i>insulin syringe 28g x 1/2" 0.5 ml, 28g x 1/2" 1 ml</i>   | BD Insulin Syringe MicroFine | OTC; QLL (200 EA per 30 days) |
| <b>INSULIN SYRINGE 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 30G X 5/16" 0.3 ML</b>   | eql insulin syringe          | OTC; QLL (200 EA per 30 days) |

| <b>Formulary Drug Name</b>   | <b>Reference</b>               | <b>Restrictions</b>           |
|--|--------------------------------|-------------------------------|
| <i>insulin syringe 29g x 1/2" 1 ml, 30g x 5/16" 0.5 ml</i>                             | Advocate Insulin Syringe       | OTC; QLL (200 EA per 30 days) |
| <i>insulin syringe 30g x 1/2" 1 ml</i>   | BD Insulin Syringe U/F         | OTC; QLL (200 EA per 30 days) |
| <b>INSULIN SYRINGE 30G X 5/16" 1 ML</b>  | easy comfort insulin syringe   | OTC; QLL (200 EA per 30 days) |
| <b>INSULIN SYRINGE 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML</b>        | careone insulin syringe        | OTC; QLL (200 EA per 30 days) |
| <i>insulin syringe/needle 27g x 1/2" 0.5 ml</i>  | Easy Touch Insulin Syringe     | OTC; QLL (200 EA per 30 days) |
| <i>insulin syringe/needle 28g x 1/2" 0.5 ml, 28g x 1/2" 1 ml</i>                       | BD Insulin Syringe MicroFine   | OTC; QLL (200 EA per 30 days) |
| <i>insulin syringe-needle u-100 27g x 1/2" 0.5 ml</i>                                  | Easy Touch Insulin Syringe     | QLL (200 EA per 30 days)      |
| <i>insulin syringe-needle u-100 27g x 1/2" 1 ml</i>                                    | BD Insulin Syringe             | QLL (200 EA per 30 days)      |
| <i>insulin syringe-needle u-100 28g x 1/2" 0.5 ml, 28g x 1/2" 1 ml</i>                 | BD Insulin Syringe MicroFine   | QLL (200 EA per 30 days)      |
| <b>INSULIN SYRINGE-NEEDLE U-100 29G X 1/2" 0.5 ML</b>                                  | eql insulin syringe            | QLL (200 EA per 30 days)      |
| <i>insulin syringe-needle u-100 29g x 1/2" 1 ml, 30g x 5/16" 0.5 ml</i>                | Advocate Insulin Syringe       | QLL (200 EA per 30 days)      |
| <i>insulin syringe-needle u-100 30g x 1/2" 1 ml</i>                                    | BD Insulin Syringe U/F         | QLL (200 EA per 30 days)      |
| <b>INSULIN SYRINGE-NEEDLE U-100 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML</b>               | careone insulin syringe        | QLL (200 EA per 30 days)      |
| <b>KINRAY INSULIN SYRINGE 29G X 1/2" 0.5 ML</b>  | eql insulin syringe            | OTC; QLL (200 EA per 30 days) |
| <b>KINRAY INSULIN SYRINGE 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML</b> | careone insulin syringe        | OTC; QLL (200 EA per 30 days) |
| <b>KMART VALU INSULIN SYRINGE 29G U-100 0.5 ML</b>                                     |                                | OTC; QLL (200 EA per 30 days) |
| <b>KMART VALU INSULIN SYRINGE 29G U-100 1 ML</b>                                       | kmart valu insulin syringe 29g | OTC; QLL (200 EA per 30 days) |
| <b>KMART VALU INSULIN SYRINGE 30G U-100 0.3 ML, U-100 0.5 ML</b>                       |                                | OTC; QLL (200 EA per 30 days) |
| <b>KMART VALU INSULIN SYRINGE 30G U-100 1 ML</b>                                       | kmart valu insulin syringe 29g | OTC; QLL (200 EA per 30 days) |
| <b>KROGER INSULIN SYRINGE 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 30G X 5/16" 0.3 ML</b> | eql insulin syringe            | OTC; QLL (200 EA per 30 days) |
| <i>kroger insulin syringe 29g x 1/2" 1 ml, 30g x 5/16" 0.5 ml</i>                      | Advocate Insulin Syringe       | OTC; QLL (200 EA per 30 days) |
| <b>KROGER INSULIN SYRINGE 30G X 5/16" 1 ML</b>   | easy comfort insulin syringe   | OTC; QLL (200 EA per 30 days) |



| <b>Formulary Drug Name</b>   | <b>Reference</b>               | <b>Restrictions</b>           |
|--|--------------------------------|-------------------------------|
| <b>KROGER INSULIN SYRINGE 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML</b>                       | careone insulin syringe        | OTC; QLL (200 EA per 30 days) |
| <i>leader insulin syringe 28g x 1/2" 0.5 ml, 28g x 1/2" 1 ml</i>   | BD Insulin Syringe MicroFine   | OTC; QLL (200 EA per 30 days) |
| <b>LEADER INSULIN SYRINGE 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 30G X 5/16" 0.3 ML</b>                       | eql insulin syringe            | OTC; QLL (200 EA per 30 days) |
| <i>leader insulin syringe 29g x 1/2" 1 ml, 30g x 5/16" 0.5 ml</i>  | Advocate Insulin Syringe       | OTC; QLL (200 EA per 30 days) |
| <b>LEADER INSULIN SYRINGE 30G X 5/16" 1 ML</b>   | easy comfort insulin syringe   | OTC; QLL (200 EA per 30 days) |
| <b>LEADER INSULIN SYRINGE 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML</b>                       | careone insulin syringe        | OTC; QLL (200 EA per 30 days) |
| <b>LITETOUCH INSULIN SYRINGE 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML</b>  | global inject ease insulin syr | OTC; QLL (200 EA per 30 days) |
| <b>LITETOUCH INSULIN SYRINGE 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 5/16" 0.3 ML</b>   | eql insulin syringe            | OTC; QLL (200 EA per 30 days) |
| <b>LITETOUCH INSULIN SYRINGE 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML</b>  | easy comfort insulin syringe   | OTC; QLL (200 EA per 30 days) |
| <b>LITETOUCH INSULIN SYRINGE 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML</b>                    | careone insulin syringe        | OTC; QLL (200 EA per 30 days) |
| <b>LONGS INSULIN SYRINGE 31G X 5/16" 0.5 ML</b>  | careone insulin syringe        | OTC; QLL (200 EA per 30 days) |
| <b>MAGELLAN INSULIN SAFETY SYR 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 5/16" 0.3 ML</b> | eql insulin syringe            | QLL (200 EA per 30 days)      |
| <b>MAGELLAN INSULIN SAFETY SYR 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML</b>                                      | easy comfort insulin syringe   | QLL (200 EA per 30 days)      |
| <b>MAXI-COMFORT INSULIN SYRINGE 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML</b>                                       | global inject ease insulin syr | OTC; QLL (200 EA per 30 days) |
| <b>MEDIC INSULIN SYRINGE 30G X 5/16" 0.3 ML</b>  | eql insulin syringe            | OTC; QLL (200 EA per 30 days) |
| <i>medic insulin syringe 30g x 5/16" 0.5 ml</i>  | Advocate Insulin Syringe       | OTC; QLL (200 EA per 30 days) |
| <b>MONOJECT INSULIN SYRINGE 25G X 5/8" 1 ML</b>  |                                | OTC; QLL (200 EA per 30 days) |
| <b>MONOJECT INSULIN SYRINGE 27G X 1/2" 1 ML</b>  | insulin syringe-needle u-100   | QLL (200 EA per 30 days)      |
| <b>MONOJECT INSULIN SYRINGE 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML</b>   | global inject ease insulin syr | QLL (200 EA per 30 days)      |

| <b>Formulary Drug Name</b>  | <b>Reference</b>               | <b>Restrictions</b>           |
|---|--------------------------------|-------------------------------|
| <b>MONOJECT INSULIN SYRINGE 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 5/16" 0.3 ML</b>   | eql insulin syringe            | QLL (200 EA per 30 days)      |
| <b>MONOJECT INSULIN SYRINGE 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML</b>  | easy comfort insulin syringe   | QLL (200 EA per 30 days)      |
| <b>MONOJECT INSULIN SYRINGE 31G X 5/16" 1 ML</b>  | careone insulin syringe        | OTC; QLL (200 EA per 30 days) |
| <b>MONOJECT INSULIN SYRINGE U-100 1 ML</b>  | kmart valu insulin syringe 29g | QLL (200 EA per 30 days)      |
| <b>MONOJECT LIFESHIELD SYRINGE 18G X 1" 12 ML</b>   | syringe/hypodermic safety      | QLL (200 EA per 30 days)      |
| <b>MONOJECT MAGELLAN SYRINGE 18G X 1" 12 ML</b>   | syringe/hypodermic safety      | QLL (200 EA per 30 days)      |
| <b>MONOJECT MAGELLAN SYRINGE 20G X 1-1/2" 12 ML, 20G X 1-1/2" 6 ML, 21G X 1" 12 ML, 21G X 1" 6 ML, 21G X 1-1/2" 12 ML, 21G X 1-1/2" 6 ML, 22G X 1-1/2" 12 ML, 22G X 1-1/2" 6 ML, 23G X 1" 1 ML, 25G X 1" 1 ML</b> |                                | QLL (200 EA per 30 days)      |
| <b>MONOJECT MAGELLAN SYRINGE 25G X 5/8" 1 ML</b>  | syringe luer slip              | QLL (200 EA per 30 days)      |
| <b>MONOJECT SYRINGE 18G X 1" 12 ML</b>  | syringe/hypodermic safety      | QLL (200 EA per 30 days)      |
| <b>MONOJECT SYRINGE 20G X 1-1/2" 12 ML, 21G X 1-1/2" 12 ML</b>  |                                | OTC; QLL (200 EA per 30 days) |
| <b>MONOJECT SYRINGE 20G X 1-1/2" 6 ML, 21G X 1" 12 ML, 21G X 1" 6 ML, 21G X 1-1/2" 6 ML, 22G X 1-1/2" 6 ML</b>  |                                | QLL (200 EA per 30 days)      |
| <b>MONOJECT ULTRA COMFORT SYRINGE 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML</b>  | global inject ease insulin syr | QLL (200 EA per 30 days)      |
| <b>MONOJECT ULTRA COMFORT SYRINGE 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML</b>   | eql insulin syringe            | OTC; QLL (200 EA per 30 days) |
| <b>MONOJECT ULTRA COMFORT SYRINGE 30G X 5/16" 0.3 ML</b>  | eql insulin syringe            | QLL (200 EA per 30 days)      |
| <b>MONOJECT ULTRA COMFORT SYRINGE 30G X 5/16" 0.5 ML</b>  | easy comfort insulin syringe   | QLL (200 EA per 30 days)      |
| <b>MONOJECT ULTRA COMFORT SYRINGE 31G X 5/16" 0.5 ML</b>  | careone insulin syringe        | OTC; QLL (200 EA per 30 days) |
| <b>MS INSULIN SYRINGE 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML</b>  | careone insulin syringe        | OTC; QLL (200 EA per 30 days) |
| <b>PRECISION SURE-DOSE SYRINGE 30G X 5/16" 0.3 ML</b>   | eql insulin syringe            | OTC; QLL (200 EA per 30 days) |
| <i>preferred plus insulin syringe 28g x 1/2" 0.5 ml, 28g x 1/2" 1 ml</i>  | BD Insulin Syringe MicroFine   | OTC; QLL (200 EA per 30 days) |

| <b>Formulary Drug Name</b>   | <b>Reference</b>               | <b>Restrictions</b>           |
|--|--------------------------------|-------------------------------|
| <b>PREFERRED PLUS INSULIN SYRINGE<br/>29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML,<br/>30G X 5/16" 0.3 ML</b> | eql insulin syringe            | OTC; QLL (200 EA per 30 days) |
| <i>preferred plus insulin syringe 29g x 1/2" 1 ml,<br/>30g x 5/16" 0.5 ml</i>                          | Advocate Insulin Syringe       | OTC; QLL (200 EA per 30 days) |
| <b>PREFERRED PLUS INSULIN SYRINGE<br/>30G X 5/16" 1 ML</b>   | easy comfort insulin syringe   | OTC; QLL (200 EA per 30 days) |
| <b>PRODIGY INSULIN SYRINGE 28G X<br/>1/2" 1 ML</b>   | global inject ease insulin syr | OTC; QLL (200 EA per 30 days) |
| <b>PRODIGY INSULIN SYRINGE 31G X<br/>5/16" 0.5 ML</b>  | careone insulin syringe        | OTC; QLL (200 EA per 30 days) |
| <i>px insulin syringe 30g x 1/2" 0.5 ml</i>  | BD Insulin Syringe Ultrafine   | OTC; QLL (200 EA per 30 days) |
| <b>RA INSULIN SYRINGE 29G X 1/2" 0.5<br/>ML</b>  | eql insulin syringe            | OTC; QLL (200 EA per 30 days) |
| <i>ra insulin syringe 29g x 1/2" 1 ml, 30g x 5/16"<br/>0.5 ml</i>                                      | Advocate Insulin Syringe       | OTC; QLL (200 EA per 30 days) |
| <b>RA INSULIN SYRINGE 30G X 5/16" 1<br/>ML</b>   | easy comfort insulin syringe   | OTC; QLL (200 EA per 30 days) |
| <i>reality insulin syringe 28g x 1/2" 0.5 ml, 28g x<br/>1/2" 1 ml</i>                                  | BD Insulin Syringe MicroFine   | OTC; QLL (200 EA per 30 days) |
| <b>REALITY INSULIN SYRINGE 29G X<br/>1/2" 0.5 ML</b>   | eql insulin syringe            | OTC; QLL (200 EA per 30 days) |
| <i>reality insulin syringe 29g x 1/2" 1 ml</i>   | Advocate Insulin Syringe       | OTC; QLL (200 EA per 30 days) |
| <b>RELION INSULIN SYRINGE 29G X 1/2"<br/>0.5 ML</b>  | eql insulin syringe            | OTC; QLL (200 EA per 30 days) |
| <b>RELION INSULIN SYRINGE 31G X<br/>15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G<br/>X 15/64" 1 ML</b>      | global easy glide insulin syr  | OTC; QLL (200 EA per 30 days) |
| <b>RELION INSULIN SYRINGE 31G X 5/16"<br/>0.5 ML, 31G X 5/16" 1 ML</b>                                 | careone insulin syringe        | OTC; QLL (200 EA per 30 days) |
| <b>SAFETY SYRINGE/NEEDLE 25G X 5/8"<br/>1 ML, 27G X 1/2" 1 ML</b>                                      | syringe luer slip              | OTC; QLL (200 EA per 30 days) |
| <b>SB INSULIN SYRINGE 29G X 1/2" 0.5<br/>ML</b>  | eql insulin syringe            | OTC; QLL (200 EA per 30 days) |
| <i>sb insulin syringe 29g x 1/2" 1 ml</i>  | Advocate Insulin Syringe       | OTC; QLL (200 EA per 30 days) |
| <b>SB INSULIN SYRINGE 30G X 5/16" 1 ML</b>   | easy comfort insulin syringe   | OTC; QLL (200 EA per 30 days) |
| <b>SB INSULIN SYRINGE 31G X 5/16" 1 ML</b>   | careone insulin syringe        | OTC; QLL (200 EA per 30 days) |
| <i>sure comfort insulin syringe 28g x 1/2" 0.5 ml,<br/>28g x 1/2" 1 ml</i>                             | BD Insulin Syringe MicroFine   | QLL (200 EA per 30 days)      |

| <b>Formulary Drug Name</b>   | <b>Reference</b>               | <b>Restrictions</b>           |
|--|--------------------------------|-------------------------------|
| <b>SURE COMFORT INSULIN SYRINGE<br/>29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML,<br/>30G X 5/16" 0.3 ML</b>   | eql insulin syringe            | QLL (200 EA per 30 days)      |
| <i>sure comfort insulin syringe 29g x 1/2" 1 ml</i>  | Advocate Insulin Syringe       | QLL (200 EA per 30 days)      |
| <i>sure comfort insulin syringe 30g x 1/2" 0.3 ml,<br/>30g x 1/2" 0.5 ml</i>   | BD Insulin Syringe Ultrafine   | QLL (200 EA per 30 days)      |
| <i>sure comfort insulin syringe 30g x 1/2" 1 ml</i>  | BD Insulin Syringe U/F         | OTC; QLL (200 EA per 30 days) |
| <b>SURE COMFORT INSULIN SYRINGE<br/>30G X 5/16" 1 ML</b>   | easy comfort insulin syringe   | QLL (200 EA per 30 days)      |
| <b>SURE COMFORT INSULIN SYRINGE<br/>31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML</b>   | careone insulin syringe        | QLL (200 EA per 30 days)      |
| <b>SYRINGE 20G X 1" 12 ML, 20G X 1" 6<br/>ML, 20G X 1-1/2" 12 ML, 21G X 1" 12 ML,<br/>21G X 1" 6 ML, 21G X 1-1/2" 12 ML, 21G<br/>X 1-1/2" 6 ML, 21G X 1-1/4" 6 ML, 22G X<br/>1" 12 ML, 22G X 1" 6 ML, 22G X 1-1/2" 12<br/>ML, 22G X 1-1/2" 6 ML, 22G X 1-1/4" 6<br/>ML</b> |                                | OTC; QLL (200 EA per 30 days) |
| <b>SYRINGE LUER SLIP 25G X 5/8" 1 ML,<br/>27G X 1/2" 1 ML</b>  | syringe luer slip              | OTC; QLL (200 EA per 30 days) |
| <b>SYRINGE/HYPODERMIC SAFETY 18G<br/>X 1" 12 ML</b>  | syringe/hypodermic safety      | OTC; QLL (200 EA per 30 days) |
| <b>TOPCARE ULTRA COMFORT INS SYR<br/>29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML,<br/>30G X 5/16" 0.3 ML</b>  | eql insulin syringe            | OTC; QLL (200 EA per 30 days) |
| <i>topcare ultra comfort ins syr 29g x 1/2" 1 ml</i>   | Advocate Insulin Syringe       | OTC; QLL (200 EA per 30 days) |
| <b>TOPCARE ULTRA COMFORT INS SYR<br/>30G X 5/16" 1 ML</b>  | easy comfort insulin syringe   | OTC; QLL (200 EA per 30 days) |
| <b>TOPCARE ULTRA COMFORT INS SYR<br/>31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML</b>  | careone insulin syringe        | OTC; QLL (200 EA per 30 days) |
| <b>TRUEPLUS INSULIN SYRINGE 28G X<br/>1/2" 0.5 ML, 28G X 1/2" 1 ML</b>   | global inject ease insulin syr | OTC; QLL (200 EA per 30 days) |
| <b>TRUEPLUS INSULIN SYRINGE 29G X<br/>1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X<br/>1/2" 1 ML, 30G X 5/16" 0.3 ML</b>  | eql insulin syringe            | OTC; QLL (200 EA per 30 days) |
| <b>TRUEPLUS INSULIN SYRINGE 30G X<br/>5/16" 1 ML</b>   | easy comfort insulin syringe   | OTC; QLL (200 EA per 30 days) |
| <b>TRUEPLUS INSULIN SYRINGE 31G X<br/>5/16" 0.5 ML, 31G X 5/16" 1 ML</b>   | careone insulin syringe        | OTC; QLL (200 EA per 30 days) |
| <b>ULTICARE INSULIN SAFETY SYR 29G<br/>X 1/2" 0.5 ML, 29G X 1/2" 1 ML</b>  | eql insulin syringe            | QLL (200 EA per 30 days)      |
| <b>ULTICARE INSULIN SYRINGE 28G X<br/>1/2" 0.5 ML, 28G X 1/2" 1 ML</b>   | global inject ease insulin syr | OTC; QLL (200 EA per 30 days) |

| <b>Formulary Drug Name</b>  | <b>Reference</b>               | <b>Restrictions</b>           |
|---|--------------------------------|-------------------------------|
| <b>ULTICARE INSULIN SYRINGE 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 5/16" 0.3 ML</b>                   | eql insulin syringe            | OTC; QLL (200 EA per 30 days) |
| <b>ULTICARE INSULIN SYRINGE 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML</b> | careone insulin syringe        | OTC; QLL (200 EA per 30 days) |
| <b>ULTICARE INSULIN SYRINGE 30G X 5/16" 1 ML</b>  | easy comfort insulin syringe   | OTC; QLL (200 EA per 30 days) |
| <b>ULTICARE SYRINGE 22G X 1-1/2" 1 ML</b>   |                                | OTC; QLL (200 EA per 30 days) |
| <b>ULTRA COMFORT INSULIN SYRINGE 30G X 5/16" 0.3 ML</b>   | eql insulin syringe            | OTC; QLL (200 EA per 30 days) |
| <b>ULTRA-THIN II INS SYR SHORT 30G X 5/16" 0.3 ML</b>   | eql insulin syringe            | OTC; QLL (200 EA per 30 days) |
| <b>ULTRA-THIN II INS SYR SHORT 30G X 5/16" 1 ML</b>   | easy comfort insulin syringe   | OTC; QLL (200 EA per 30 days) |
| <b>ULTRA-THIN II INS SYR SHORT 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML</b>   | careone insulin syringe        | OTC; QLL (200 EA per 30 days) |
| <b>ULTRA-THIN II INSULIN SYRINGE 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML</b>   | eql insulin syringe            | OTC; QLL (200 EA per 30 days) |
| <b>VALUE HEALTH INSULIN SYRINGE 29G X 1/2" 0.5 ML</b>   | eql insulin syringe            | OTC; QLL (200 EA per 30 days) |
| <i>value health insulin syringe 29g x 1/2" 1 ml</i>   | Advocate Insulin Syringe       | OTC; QLL (200 EA per 30 days) |
| <b>VANISHPOINT INSULIN SYRINGE 29G X 1/2" 1 ML</b>  | eql insulin syringe            | OTC; QLL (200 EA per 30 days) |
| <b>VANISHPOINT INSULIN SYRINGE 29G X 5/16" 1 ML</b>   |                                | OTC; QLL (200 EA per 30 days) |
| <b>VANISHPOINT INSULIN SYRINGE 30G X 1/2" 0.5 ML</b>  | careone insulin syringe        | OTC; QLL (200 EA per 30 days) |
| <b>VANISHPOINT INSULIN SYRINGE 30G X 5/16" 1 ML</b>   | easy comfort insulin syringe   | OTC; QLL (200 EA per 30 days) |
| <b>VANISHPOINT SYRINGE 25G X 1" 1 ML</b>  |                                | OTC; QLL (200 EA per 30 days) |
| <b>VP INSULIN SYRINGE 29G X 1/2" 0.3 ML</b>   | eql insulin syringe            | OTC; QLL (200 EA per 30 days) |
| <b>*Peak Flow Meters***</b>   |                                |                               |
| <b>AIRZONE PEAK FLOW METER DEVICE</b>   | peak flow meter universal rang | OTC; QLL (2 EA per 1 Year)    |
| <b>ASSESS FULL RANGE PEAK METER DEVICE</b>  | peak flow meter universal rang | OTC; QLL (2 EA per 1 Year)    |
| <b>ASSESS LOW RANGE PEAK METER DEVICE</b>   | peak flow meter universal rang | OTC; QLL (2 EA per 1 Year)    |



| <b>Formulary Drug Name</b>                   | <b>Reference</b>               | <b>Restrictions</b>        |
|--|--------------------------------|----------------------------|
| <b>ASSESS PEAK FLOW METER DEVICE</b>         | peak flow meter universal rang | OTC; QLL (2 EA per 1 Year) |
| <b>ASTHMA CHECK METER-ZONE SYSTEM DEVICE</b> | peak flow meter universal rang | OTC; QLL (2 EA per 1 Year) |
| <b>ASTHMAMENTOR DEVICE</b>                   | peak flow meter universal rang | OTC; QLL (2 EA per 1 Year) |
| <b>MICROLIFE DIGITAL PEAK FLOW DEVICE</b>    | peak flow meter universal rang | OTC; QLL (2 EA per 1 Year) |
| <b>MINI WRIGHT PEAK FLOW METER DEVICE</b>    | peak flow meter universal rang | OTC; QLL (2 EA per 1 Year) |
| <b>PEAK AIR PEAK FLOW METER DEVICE</b>       | peak flow meter universal rang | OTC; QLL (2 EA per 1 Year) |
| <b>PEAK FLOW METER UNIVERSAL RANG DEVICE</b> | peak flow meter universal rang | OTC; QLL (2 EA per 1 Year) |
| <b>PERSONAL BEST FULL RANGE DEVICE</b>       | peak flow meter universal rang | OTC; QLL (2 EA per 1 Year) |
| <b>PERSONAL BEST LOW RANGE DEVICE</b>        | peak flow meter universal rang | OTC; QLL (2 EA per 1 Year) |
| <b>PIKO 1 DEVICE</b>                         | peak flow meter universal rang | OTC; QLL (2 EA per 1 Year) |
| <b>POCKET PEAK FLOW METER DEVICE</b>         | peak flow meter universal rang | OTC; QLL (2 EA per 1 Year) |
| <b>POCKETPEAK PEAK FLOW METER DEVICE</b>     | peak flow meter universal rang | OTC; QLL (2 EA per 1 Year) |
| <b>TRUZONE PEAK FLOW METER DEVICE</b>        | peak flow meter universal rang | QLL (2 EA per 1 Year)      |
| <b>*Respiratory Therapy Supplies***</b>      |                                |                            |
| <b>ADULT MASK DEVICE</b>                     | adult mask                     |                            |
| <b>AEROBIKA DEVICE</b>                       | adult mask                     | QLL (2 EA per 1 Year)      |
| <b>ALL FLOW 1000 PFT FILTER DEVICE</b>       | adult mask                     |                            |
| <b>ALL FLOW 2000 PFT FILTER DEVICE</b>       | adult mask                     |                            |
| <b>ALL FLOW 3000 PFT FILTER DEVICE</b>       | adult mask                     |                            |
| <b>ALL FLOW 4000 PFT FILTER DEVICE</b>       | adult mask                     |                            |
| <b>ALL FLOW 5000 PFT FILTER DEVICE</b>       | adult mask                     |                            |
| <b>ALL FLOW 6000 PFT FILTER DEVICE</b>       | adult mask                     |                            |
| <b>ALL FLOW 7000 PFT FILTER DEVICE</b>       | adult mask                     |                            |
| <b>CO MONITOR DEVICE</b>                     | adult mask                     |                            |
| <b>IN-CHECK DIAL FLOW TRAINER DEVICE</b>     | adult mask                     |                            |
| <b>IN-CHECK INSPIRATORY FLOW MTR DEVICE</b>  | adult mask                     |                            |
| <b>MISTASSIST DEVICE</b>                     | adult mask                     |                            |
| <b>ONE FLOW SPIROMETER DEVICE</b>            | adult mask                     |                            |

| <b>Formulary Drug Name</b>                                | <b>Reference</b>              | <b>Restrictions</b>        |
|---|-------------------------------|----------------------------|
| <b>PARI MANUAL INTERRUPTER DEVICE</b>                     | adult mask                    |                            |
| <b>PARI TREK S COMBO PACK DEVICE</b>                      | adult mask                    |                            |
| <b>PULMONEB LT DEVICE</b>                                 | adult mask                    |                            |
| <b>QUAKE DEVICE</b>                                       | adult mask                    |                            |
| <b>SPIRO PD DEVICE</b>                                    | adult mask                    |                            |
| <b>THRESHOLD PEP DEVICE</b>                               | adult mask                    |                            |
| <b>*Spacer/Aerosol-Holding Chambers &amp; Supplies***</b> |                               |                            |
| <b>AEROCHAMBER MINI CHAMBER DEVICE</b>                    | breathe comfort chamber/adult | QLL (2 EA per 1 Year)      |
| <b>AEROCHAMBER MV</b>                                     | breathe comfort chamber/adult | QLL (2 EA per 1 Year)      |
| <b>AEROCHAMBER PLUS FLO-VU</b>                            | breathe comfort chamber/adult | QLL (2 EA per 1 Year)      |
| <b>AEROCHAMBER PLUS FLO-VU LARGE</b>                      | breathe comfort chamber/adult | QLL (2 EA per 1 Year)      |
| <b>AEROCHAMBER PLUS FLO-VU MEDIUM</b>                     | breathe comfort chamber/adult | QLL (2 EA per 1 Year)      |
| <b>AEROCHAMBER PLUS FLO-VU SMALL</b>                      | breathe comfort chamber/adult | QLL (2 EA per 1 Year)      |
| <b>AEROCHAMBER PLUS FLO-VU W/MASK</b>                     | breathe comfort chamber/adult | QLL (2 EA per 1 Year)      |
| <b>AEROCHAMBER PLUS FLOW VU</b>                           | breathe comfort chamber/adult | QLL (2 EA per 1 Year)      |
| <b>AEROCHAMBER W/FLOWSIGNAL</b>                           | breathe comfort chamber/adult | QLL (2 EA per 1 Year)      |
| <b>AEROCHAMBER Z-STAT PLUS</b>                            | breathe comfort chamber/adult | QLL (2 EA per 1 Year)      |
| <b>AEROCHAMBER Z-STAT PLUS CHAMBR</b>                     | breathe comfort chamber/adult | QLL (2 EA per 1 Year)      |
| <b>AEROCHAMBER Z-STAT PLUS/LARGE</b>                      | breathe comfort chamber/adult | QLL (2 EA per 1 Year)      |
| <b>AEROCHAMBER Z-STAT PLUS/MEDIUM</b>                     | breathe comfort chamber/adult | QLL (2 EA per 1 Year)      |
| <b>AEROCHAMBER Z-STAT PLUS/SMALL</b>                      | breathe comfort chamber/adult | QLL (2 EA per 1 Year)      |
| <b>AEROVENT PLUS DEVICE</b>                               | breathe comfort chamber/adult | QLL (2 EA per 1 Year)      |
| <b>AIRIAL CHAMBER DEVICE</b>                              | breathe comfort chamber/adult | OTC; QLL (2 EA per 1 Year) |
| <b>ARIAL CHAMBER DEVICE</b>                               | breathe comfort chamber/adult | OTC; QLL (2 EA per 1 Year) |
| <b>BREATHERITE</b>  | breathe comfort chamber/adult | QLL (2 EA per 1 Year)      |
| <b>BREATHERITE COLL SPACER ADULT</b>                      | breathe comfort chamber/adult | QLL (2 EA per 1 Year)      |
| <b>BREATHERITE COLL SPACER CHILD</b>                      | breathe comfort chamber/adult | QLL (2 EA per 1 Year)      |
| <b>BREATHERITE COLL SPACER INFANT</b>                     | breathe comfort chamber/adult | QLL (2 EA per 1 Year)      |
| <b>BREATHERITE RIGID SPACER/MASK</b>                      | breathe comfort chamber/adult | QLL (2 EA per 1 Year)      |



| <b>Formulary Drug Name</b>                   | <b>Reference</b>              | <b>Restrictions</b>   |
|--|-------------------------------|-----------------------|
| <b>BREATHERITE SPACER NEONATE</b>            | breathe comfort chamber/adult | QLL (2 EA per 1 Year) |
| <b>BREATHERITE SPACER SMALL CHILD</b>        | breathe comfort chamber/adult | QLL (2 EA per 1 Year) |
| <b>BREATHERITE VALVED MDI CHAMBER DEVICE</b> | breathe comfort chamber/adult |                       |
| <b>BREATHERITE/LARGE MASK</b>                | breathe comfort chamber/adult | QLL (2 EA per 1 Year) |
| <b>BREATHERITE/MEDIUM MASK</b>               | breathe comfort chamber/adult | QLL (2 EA per 1 Year) |
| <b>BREATHERITE/SMALL MASK</b>                | breathe comfort chamber/adult | QLL (2 EA per 1 Year) |
| <b>CLEVER CHOICE HOLDING CHAMBER DEVICE</b>  | breathe comfort chamber/adult | QLL (2 EA per 1 Year) |
| <b>COMPACT SPACE CHAMBER DEVICE</b>          | breathe comfort chamber/adult | QLL (2 EA per 1 Year) |
| <b>COMPACT SPACE CHAMBER/LG MASK DEVICE</b>  | breathe comfort chamber/adult | QLL (2 EA per 1 Year) |
| <b>COMPACT SPACE CHAMBER/MED MASK DEVICE</b> | breathe comfort chamber/adult | QLL (2 EA per 1 Year) |
| <b>COMPACT SPACE CHAMBER/SM MASK DEVICE</b>  | breathe comfort chamber/adult | QLL (2 EA per 1 Year) |
| <b>EASIVENT</b>                              | breathe comfort chamber/adult | QLL (2 EA per 1 Year) |
| <b>EASIVENT MASK LARGE</b>                   | breathe comfort chamber/adult | QLL (2 EA per 1 Year) |
| <b>EASIVENT MASK MEDIUM</b>                  | breathe comfort chamber/adult | QLL (2 EA per 1 Year) |
| <b>EASIVENT MASK SMALL</b>                   | breathe comfort chamber/adult | QLL (2 EA per 1 Year) |
| <b>FLEXICHAMBER ADULT MASK/SMALL</b>         |                               |                       |
| <b>FLEXICHAMBER CHILD MASK/LARGE</b>         |                               |                       |
| <b>FLEXICHAMBER CHILD MASK/SMALL</b>         |                               |                       |
| <b>FLEXICHAMBER DEVICE</b>                   | breathe comfort chamber/adult | QLL (2 EA per 1 Year) |
| <b>INSPIRACHAMBER/LARGE DEVICE</b>           | breathe comfort chamber/adult | QLL (2 EA per 1 Year) |
| <b>INSPIRACHAMBER/MEDIUM DEVICE</b>          | breathe comfort chamber/adult | QLL (2 EA per 1 Year) |
| <b>INSPIRACHAMBER/MOUTHPIECE DEVICE</b>      | breathe comfort chamber/adult | QLL (2 EA per 1 Year) |
| <b>INSPIRACHAMBER/SMALL DEVICE</b>           | breathe comfort chamber/adult | QLL (2 EA per 1 Year) |
| <b>INSPIREASE</b>                            | breathe comfort chamber/adult | QLL (2 EA per 1 Year) |
| <b>LITEAIRE DEVICE</b>                       | breathe comfort chamber/adult | QLL (2 EA per 1 Year) |
| <b>MASK VORTEX</b>                           |                               | OTC                   |
| <b>MICROCHAMBER</b>                          | breathe comfort chamber/adult | QLL (2 EA per 1 Year) |
| <b>MICROSPACER</b>                           | breathe comfort chamber/adult | QLL (2 EA per 1 Year) |
| <b>OPTICHAMBER ADVANTAGE-LG MASK</b>         | breathe comfort chamber/adult | QLL (2 EA per 1 Year) |

| <b>Formulary Drug Name</b>                                       | <b>Reference</b>              | <b>Restrictions</b>                            |
|--|-------------------------------|--|
| <b>OPTICHAMBER ADVANTAGE-MED MASK</b>                            | breathe comfort chamber/adult | QLL (2 EA per 1 Year)                          |
| <b>OPTICHAMBER ADVANTAGE-SM MASK</b>                             | breathe comfort chamber/adult | QLL (2 EA per 1 Year)                          |
| <b>OPTICHAMBER DIAMOND</b>                                       | breathe comfort chamber/adult | QLL (2 EA per 1 Year)                          |
| <b>OPTICHAMBER DIAMOND-LG MASK DEVICE</b>                        | breathe comfort chamber/adult | QLL (2 EA per 1 Year)                          |
| <b>OPTICHAMBER DIAMOND-MD MASK</b>                               | breathe comfort chamber/adult | QLL (2 EA per 1 Year)                          |
| <b>OPTICHAMBER DIAMOND-SM MASK</b>                               | breathe comfort chamber/adult | QLL (2 EA per 1 Year)                          |
| <b>OPTICHAMBER FACE MASK-LARGE</b>                               | breathe comfort chamber/adult | OTC; QLL (2 EA per 1 Year)                     |
| <b>OPTICHAMBER FACE MASK-MEDIUM</b>                              | breathe comfort chamber/adult | OTC; QLL (2 EA per 1 Year)                     |
| <b>OPTICHAMBER FACE MASK-SMALL</b>                               | breathe comfort chamber/adult | OTC; QLL (2 EA per 1 Year)                     |
| <b>OPTIHALER</b>   | breathe comfort chamber/adult | QLL (2 EA per 1 Year)                          |
| <b>OPTIHALER DEVICE</b>  | breathe comfort chamber/adult | QLL (2 EA per 1 Year)                          |
| <b>PANDA MASK LARGE</b>  |                               | OTC  |
| <b>PANDA MASK MEDIUM</b>   |                               | OTC  |
| <b>PANDA MASK SMALL</b>  |                               | OTC  |
| <b>PEDIATRIC PANDA MASK</b>                                      |                               | OTC; QLL (2 EA per 1 Year)                     |
| <b>POCKET CHAMBER DEVICE</b>                                     | breathe comfort chamber/adult | QLL (2 EA per 1 Year)                          |
| <b>POCKET SPACER DEVICE</b>                                      | breathe comfort chamber/adult | QLL (2 EA per 1 Year)                          |
| <b>PRIMEAIRE HOLDING CHAMBER DEVICE</b>                          | breathe comfort chamber/adult |  |
| <b>RITEFLO DEVICE</b>  | breathe comfort chamber/adult | QLL (2 EA per 1 Year)                          |
| <b>VALVED HOLDING CHAMBER DEVICE</b>                             | breathe comfort chamber/adult | QLL (2 EA per 1 Year)                          |
| <b>VORTEX HOLDING CHAMBER/MASK DEVICE</b>                        | breathe comfort chamber/adult |  |
| <b>VORTEX VALVED HOLDING CHAMBER DEVICE</b>                      | breathe comfort chamber/adult | QLL (2 EA per 1 Year)                          |
| <b>WATCHHALER DEVICE</b>   | breathe comfort chamber/adult | QLL (2 EA per 1 Year)                          |
| <b>*Migraine Products*</b>                                       |                               |  |
| <b>*Calcitonin Gene-Related Peptide Receptor Antag (Cgrp)***</b> |                               |  |
| <b>NURTEC ORAL TABLET DISPERSIBLE 75 MG</b>                      |                               | ST; QLL (17 EA per 34 days); AL (Min 18 Years) |
| <b>UBRELVY ORAL TABLET 100 MG, 50 MG</b>                         |                               | ST; QLL (16 EA per 30 days); AL (Min 18 Years) |

| Formulary Drug Name  | Reference               | Restrictions                                    |
|--|-------------------------|---|
| <b>*Cgrp Receptor Antagonists - Monoclonal Antibodies***</b>                               |                         |   |
| <b>AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML, 70 MG/ML</b>                     |                         | PA; QLL (1 ML per 30 days); AL (Min 18 Years)   |
| <b>AJOVY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 225 MG/1.5ML</b>                              |                         | PA; QLL (1.5 ML per 30 days); AL (Min 18 Years) |
| <b>AJOVY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 225 MG/1.5ML</b>                          |                         | PA; QLL (1.5 ML per 30 days); AL (Min 18 Years) |
| <b>EMGALITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 120 MG/ML</b>                              |                         | PA; AL (Min 18 Years)                           |
| <b>EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 120 MG/ML</b>                          |                         | PA; AL (Min 18 Years)                           |
| <b>*Selective Serotonin Agonists 5-Ht(1)***</b>  |                         |   |
| <b>IMITREX NASAL SOLUTION 20 MG/ACT, 5 MG/ACT</b>  | sumatriptan             | QLL (6 EA per 30 days)                          |
| <i>naratriptan hcl oral tablet 1 mg, 2.5 mg</i>  |                         | QLL (9 EA per 34 days)                          |
| <i>rizatriptan benzoate oral tablet 10 mg</i>  | Maxalt                  | QLL (12 EA per 34 days)                         |
| <i>rizatriptan benzoate oral tablet 5 mg</i>   |                         | QLL (12 EA per 34 days)                         |
| <i>rizatriptan benzoate oral tablet dispersible 10 mg</i>                                  | Maxalt-MLT              | QLL (12 EA per 34 days)                         |
| <i>rizatriptan benzoate oral tablet dispersible 5 mg</i>                                   |                         | QLL (12 EA per 34 days)                         |
| <i>sumatriptan nasal solution 20 mg/act, 5 mg/act</i>                                      | Imitrex                 | QLL (6 EA per 30 days)                          |
| <i>sumatriptan succinate oral tablet 100 mg</i>  | Imitrex                 | QLL (9 EA per 34 days)                          |
| <i>sumatriptan succinate oral tablet 25 mg, 50 mg</i>                                      | Imitrex                 | QLL (18 EA per 34 days)                         |
| <i>sumatriptan succinate refill subcutaneous solution cartridge 4 mg/0.5ml, 6 mg/0.5ml</i> | Imitrex STATdose Refill | QLL (4 ML per 30 days)                          |
| <i>sumatriptan succinate subcutaneous solution 6 mg/0.5ml</i>                              |                         | QLL (4 ML per 30 days)                          |
| <i>sumatriptan succinate subcutaneous solution auto-injector 4 mg/0.5ml, 6 mg/0.5ml</i>    | Imitrex STATdose System |   |
| <b>*Minerals &amp; Electrolytes*</b>   |                         |   |
| <b>*Bicarbonates***</b>  |                         |   |
| <i>sodium bicarbonate intravenous solution 8.4 %</i>                                       |                         |   |

| <b>Formulary Drug Name</b>  | <b>Reference</b> | <b>Restrictions</b> |
|---|------------------|---------------------|
| <b>*Calcium Combinations***</b>   |                  |                     |
| <b>CALCET CREAMY BITES ORAL TABLET CHEWABLE 500-400 MG-UNIT</b>         |                  | OTC                 |
| <i>calcitrate oral tablet 315-6.25 mg-mcg</i>                           | Calcitrate       | OTC                 |
| <i>calcitrate plus d oral tablet 315-200 mg-unit</i>                    |                  | OTC                 |
| <i>calcium + d oral tablet 315-200 mg-unit</i>                          |                  | OTC                 |
| <i>calcium + d3 oral tablet 600-200 mg-unit</i>                         |                  | OTC                 |
| <i>calcium + d3 oral tablet 600-800 mg-unit</i>                         | Caltrate 600+D3  | OTC                 |
| <b>CALCIUM 1000 + D ORAL TABLET 1000-800 MG-UNIT</b>                    |                  | OTC                 |
| <i>calcium 500 + d oral tablet 500-125 mg-unit</i>                      |                  | OTC                 |
| <i>calcium 500 + d3 oral tablet 500-600 mg-unit</i>                     | Os-Cal Extra D3  | OTC                 |
| <i>calcium 500 +d oral tablet 500-400 mg-unit</i>                       |                  | OTC                 |
| <i>calcium 500/d oral tablet 500-200 mg-unit</i>                        | Oysco 500+D      | OTC                 |
| <i>calcium 500/d oral tablet chewable 500-400 mg-unit</i>               |                  | OTC                 |
| <i>calcium 500/vitamin d oral tablet 500-125 mg-unit</i>                |                  | OTC                 |
| <i>calcium 500+d high potency oral tablet 500-400 mg-unit</i>           |                  | OTC                 |
| <i>calcium 500+d oral tablet 500-200 mg-unit</i>                        | Oysco 500+D      | OTC                 |
| <i>calcium 500+d oral tablet 500-400 mg-unit</i>                        |                  | OTC                 |
| <i>calcium 500+d3 oral tablet 500-400 mg-unit</i>                       |                  | OTC                 |
| <i>calcium 600 + d oral tablet 600-200 mg-unit</i>                      |                  | OTC                 |
| <i>calcium 600 + minerals oral tablet 600-200 mg-unit</i>               |                  | OTC                 |
| <i>calcium 600/vitamin d oral tablet 600-400 mg-unit</i>                |                  | OTC                 |
| <i>calcium 600/vitamin d oral tablet chewable 600-400 mg-unit</i>       |                  | OTC                 |
| <i>calcium 600/vitamin d3 oral tablet 600-800 mg-unit</i>               | Caltrate 600+D3  | OTC                 |
| <i>calcium 600+d high potency oral tablet 600-400 mg-unit</i>           |                  | OTC                 |
| <i>calcium 600+d oral tablet 600-200 mg-unit, 600-400 mg-unit</i>       |                  | OTC                 |
| <i>calcium 600+d oral tablet 600-800 mg-unit</i>                        | Caltrate 600+D3  | OTC                 |
| <i>calcium 600+d plus minerals oral tablet 600-400 mg-unit</i>          |                  | OTC                 |
| <i>calcium 600+d plus minerals oral tablet chewable 600-400 mg-unit</i> |                  | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b>           | <b>Restrictions</b> |
|---|----------------------------|---------------------|
| <i>calcium 600+d3 oral tablet 600-200 mg-unit, 600-400 mg-unit</i>      |                            | OTC                 |
| <i>calcium 600+d3 oral tablet 600-800 mg-unit</i>                       | Caltrate 600+D3            | OTC                 |
| <i>calcium 600-d oral tablet 600-400 mg-unit</i>                        |                            | OTC                 |
| <i>calcium carbonate-vitamin d oral capsule 600-200 mg-unit</i>         |                            | OTC                 |
| <i>calcium carbonate-vitamin d oral tablet 600-400 mg-unit</i>          |                            | OTC                 |
| <i>calcium carbonate-vitamin d3 oral tablet 600-400 mg-unit</i>         |                            | OTC                 |
| <i>calcium citrate + d oral tablet 250-200 mg-unit, 315-200 mg-unit</i> |                            | OTC                 |
| <i>calcium citrate + d oral tablet 315-6.25 mg-mcg</i>                  | Calcitrate                 | OTC                 |
| <i>calcium citrate + d3 maximum oral tablet 315-6.25 mg-mcg</i>         | Calcitrate                 | OTC                 |
| <i>calcium citrate + d3 oral tablet 200-250 mg-unit</i>                 | Citracal Petites/Vitamin D | OTC                 |
| <i>calcium citrate + d3 oral tablet 250-200 mg-unit</i>                 |                            | OTC                 |
| <i>calcium citrate + d3 oral tablet 315-6.25 mg-mcg</i>                 | Calcitrate                 | OTC                 |
| <i>calcium citrate + oral tablet 315-200 mg-unit</i>                    |                            | OTC                 |
| <i>calcium citrate +d oral tablet 315-6.25 mg-mcg</i>                   | Calcitrate                 | OTC                 |
| <i>calcium citrate+d3 oral tablet 315-6.25 mg-mcg</i>                   | Calcitrate                 | OTC                 |
| <i>calcium citrate+d3 petites oral tablet 200-250 mg-unit</i>           | Citracal Petites/Vitamin D | OTC                 |
| <b>CALCIUM CITRATE-VITAMIN D ORAL TABLET 200-125 MG-UNIT</b>            |                            | OTC                 |
| <i>calcium citrate-vitamin d oral tablet 315-200 mg-unit</i>            |                            | OTC                 |
| <i>calcium citrate-vitamin d oral tablet 315-250 mg-unit</i>            | Calcitrate                 | OTC                 |
| <i>calcium citrate-vitamin d3 oral tablet 315-250 mg-unit</i>           | Calcitrate                 | OTC                 |
| <i>calcium creamies oral tablet chewable 600-400 mg-unit</i>            |                            | OTC                 |
| <i>calcium high potency/vitamin d oral tablet 600-200 mg-unit</i>       |                            | OTC                 |
| <i>calcium oral tablet chewable 500-100 mg-unit</i>                     |                            | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>           | <b>Restrictions</b> |
|--|----------------------------|---------------------|
| <b>CALCIUM PLUS D3 ABSORBABLE ORAL CAPSULE 600-2500 MG-UNIT</b>  |                            | OTC                 |
| <i>calcium plus vitamin d3 oral capsule 600-500 mg-unit</i>  |                            | OTC                 |
| <i>calcium plus vitamin d3 oral tablet 600-800 mg-unit</i>   | Caltrate 600+D3            | OTC                 |
| <b>CALCIUM/C/D ORAL TABLET CHEWABLE 500-10-250 MG-MG-UNIT</b>  |                            | OTC                 |
| <i>calcium+d3 oral tablet 600-800 mg-unit</i>  | Caltrate 600+D3            | OTC                 |
| <i>calcium-magnesium-zinc oral tablet 333-133-5 mg, 333.33-133.33-5 mg, 334-134-5 mg</i>                 |                            | OTC                 |
| <i>calcium-vitamin d oral tablet 500-200 mg-unit</i>   | Oysco 500+D                | OTC                 |
| <i>calcium-vitamin d oral tablet 500-400 mg-unit, 600-125 mg-unit, 600-400 mg-unit</i>                   |                            | OTC                 |
| <b>CALCIUM-VITAMIN D3 ORAL CAPSULE 600-400 MG-UNIT</b>   |                            | OTC                 |
| <i>calcium-vitamin d3 oral capsule 600-500 mg-unit</i>   |                            | OTC                 |
| <i>calcium-vitamin d3 oral tablet 250-125 mg-unit, 500-400 mg-unit, 600-125 mg-unit, 600-400 mg-unit</i> |                            | OTC                 |
| <i>calcium-vitamin d-minerals oral tablet chewable 600-400 mg-unit</i>                                   |                            | OTC                 |
| <b>CAL-QUICK ORAL LIQUID 500-400 MG-UNT/5ML</b>  |                            | OTC                 |
| <b>CALTRATE 600+D ORAL TABLET 600-800 MG-UNIT</b>  | 600+d3                     | OTC                 |
| <b>CALTRATE 600+D3 SOFT ORAL TABLET CHEWABLE 600-800 MG-UNIT</b>   |                            | OTC                 |
| <b>CITRACAL MAXIMUM ORAL TABLET 315-6.25 MG-MCG</b>  | calcium citrate + d3       | OTC                 |
| <b>CITRACAL PETITES/VITAMIN D ORAL TABLET 200-250 MG-UNIT</b>  | calcium citrate + d3       | OTC                 |
| <i>citrus calcium +d oral tablet 315-6.25 mg-mcg</i>   | Calcitrate                 | OTC                 |
| <i>citrus calcium/vitamin d oral tablet 200-250 mg-unit</i>  | Citracal Petites/Vitamin D | OTC                 |
| <i>cvs calcium 600 &amp; vitamin d3 oral tablet 600-800 mg-unit</i>                                      | Caltrate 600+D3            | OTC                 |
| <i>cvs calcium 600+d oral tablet 600-800 mg-unit</i>   | Caltrate 600+D3            | OTC                 |
| <i>cvs calcium citrate +d oral tablet 315-6.25 mg-mcg</i>  | Calcitrate                 | OTC                 |



| <b>Formulary Drug Name</b>   | <b>Reference</b>           | <b>Restrictions</b> |
|--|----------------------------|---------------------|
| <i>cvs calcium citrate +d3 mini oral tablet 200-250 mg-unit</i>            | Citracal Petites/Vitamin D | OTC                 |
| <i>cvs calcium-magnesium-zinc oral tablet 333-133-5 mg</i>                 |                            | OTC                 |
| <i>cvs oyster shell calcium+vit d oral tablet 500-125 mg-unit</i>          |                            | OTC                 |
| <i>eq calcium 500+d oral tablet 500-200 mg-unit</i>                        | Oysco 500+D                | OTC                 |
| <i>eq calcium 600+d oral tablet 600-800 mg-unit</i>                        | Caltrate 600+D3            | OTC                 |
| <i>eq calcium citrate+d oral tablet 315-6.25 mg-mcg</i>                    | Calcitrate                 | OTC                 |
| <i>eq calcium citrate+d3 oral tablet 315-6.25 mg-mcg</i>                   | Calcitrate                 | OTC                 |
| <i>eq calcium citrate+d3 petites oral tablet 200-250 mg-unit</i>           | Citracal Petites/Vitamin D | OTC                 |
| <i>eq calcium citrate/vitamin d oral tablet 315-6.25 mg-mcg</i>            | Calcitrate                 | OTC                 |
| <i>eq calcium citrate/vitamin d3 oral tablet 315-6.25 mg-mcg</i>           | Calcitrate                 | OTC                 |
| <b>EQL CALCIUM/VITAMIN D ORAL CAPSULE 600-100 MG-UNIT</b>                  |                            | OTC                 |
| <i>eq calcium/vitamin d oral tablet 600-400 mg-unit</i>                    |                            | OTC                 |
| <i>eq calcium/vitamin d3 oral tablet 600-800 mg-unit</i>                   | Caltrate 600+D3            | OTC                 |
| <i>gnp calcium 500 +d3 oral tablet 500-15 mg-mcg, 500-600 mg-unit</i>      | Os-Cal Extra D3            | OTC                 |
| <i>gnp calcium 500/d oral tablet 500-200 mg-unit</i>                       | Oysco 500+D                | OTC                 |
| <i>gnp calcium 600 +d3 oral tablet 600-800 mg-unit</i>                     | Caltrate 600+D3            | OTC                 |
| <i>gnp calcium 600 plus d/mineral oral tablet 600-400 mg-unit</i>          |                            | OTC                 |
| <i>gnp calcium 600/d oral tablet 600-400 mg-unit</i>                       |                            | OTC                 |
| <i>gnp calcium citrate +d3 oral tablet 315-6.25 mg-mcg</i>                 | Calcitrate                 | OTC                 |
| <i>gnp calcium citrate+d maximum oral tablet 315-6.25 mg-mcg</i>           | Calcitrate                 | OTC                 |
| <i>gnp calcium plus 600 +d oral tablet 600-200 mg-unit</i>                 |                            | OTC                 |
| <i>gnp calcium/vitamin d/minerals oral tablet chewable 600-400 mg-unit</i> |                            | OTC                 |
| <i>gnp calcium-magnesium-zinc oral tablet 333-133-5 mg</i>                 |                            | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>           | <b>Restrictions</b> |
|--|----------------------------|---------------------|
| <i>hm calcium 600 &amp; vitamin d3 oral tablet 600-800 mg-unit</i> | Caltrate 600+D3            | OTC                 |
| <i>hm calcium citrate+d3 petite oral tablet 200-250 mg-unit</i>    | Citracal Petites/Vitamin D | OTC                 |
| <i>hm calcium citrate+vitamin d oral tablet 315-6.25 mg-mcg</i>    | Calcitrate                 | OTC                 |
| <i>hm calcium magnesium &amp; zinc oral tablet 333-133-5 mg</i>    |                            | OTC                 |
| <i>hm calcium-vitamin d oral tablet 500-200 mg-unit</i>            | Oysco 500+D                | OTC                 |
| <i>hm calcium-vitamin d oral tablet 600-400 mg-unit</i>            |                            | OTC                 |
| <i>hm calcium-vitamin d-minerals oral tablet 600-400 mg-unit</i>   |                            | OTC                 |
| <i>kp calcium 600+d oral capsule 600-500 mg-unit</i>               |                            | OTC                 |
| <i>kp calcium 600+d oral tablet 600-400 mg-unit</i>                |                            | OTC                 |
| <i>kp calcium 600+d oral tablet 600-800 mg-unit</i>                | Caltrate 600+D3            | OTC                 |
| <i>kp calcium 600+d3 oral capsule 600-500 mg-unit</i>              |                            | OTC                 |
| <i>kp calcium citrate+d oral tablet 315-6.25 mg-mcg</i>            | Calcitrate                 | OTC                 |
| <i>kp calcium-magnesium-zinc oral tablet 333-133-5 mg</i>          |                            | OTC                 |
| <b>LIQUID CALCIUM WITH D3 ORAL CAPSULE 600-1000 MG-UNIT</b>        |                            | OTC                 |
| <i>liquid calcium with d3 oral capsule 600-500 mg-unit</i>         |                            | OTC                 |
| <i>liquid calcium/vitamin d oral capsule 600-200 mg-unit</i>       |                            | OTC                 |
| <i>oscal 500/200 d-3 oral tablet 500-200 mg-unit</i>               |                            | OTC                 |
| <i>os-cal calcium + d3 oral tablet 500-200 mg-unit</i>             | Oysco 500+D                | OTC                 |
| <i>os-cal extra d3 oral tablet 500-600 mg-unit</i>                 | Os-Cal Extra D3            | OTC                 |
| <i>oysco 500+d oral tablet 500-5 mg-mcg</i>                        | Oysco 500+D                | OTC                 |
| <i>oyster calcium + d oral tablet 250-125 mg-unit</i>              |                            | OTC                 |
| <i>oyster calcium/d3 oral tablet 500-200 mg-unit</i>               | Oysco 500+D                | OTC                 |
| <i>oyster shell calcium + d oral tablet 500-200 mg-unit</i>        | Oysco 500+D                | OTC                 |
| <i>oyster shell calcium + d oral tablet 500-400 mg-unit</i>        |                            | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b>           | <b>Restrictions</b> |
|---|----------------------------|---------------------|
| <i>oyster shell calcium + d3 oral tablet 500-400 mg-unit</i>                                |                            | OTC                 |
| <i>oyster shell calcium 250+d oral tablet 250-125 mg-unit</i>                               |                            | OTC                 |
| <i>oyster shell calcium 500+d oral tablet chewable 500-400 mg-unit</i>                      |                            | OTC                 |
| <i>oyster shell calcium oral tablet 500-400 mg-unit</i>                                     |                            | OTC                 |
| <i>oyster shell calcium plus d oral tablet 500-125 mg-unit</i>                              |                            | OTC                 |
| <i>oyster shell calcium plus d oral tablet 500-200 mg-unit</i>                              | Oysco 500+D                | OTC                 |
| <i>oyster shell calcium/d oral tablet 250-125 mg-unit, 500-200 mg-unit, 500-400 mg-unit</i> |                            | OTC                 |
| <i>oyster shell calcium/d3 oral tablet 500-400 mg-unit</i>                                  |                            | OTC                 |
| <i>oyster shell calcium/vitamin d oral tablet 250-125 mg-unit</i>                           |                            | OTC                 |
| <i>oyster shell calcium/vitamin d oral tablet 500-200 mg-unit</i>                           | Oysco 500+D                | OTC                 |
| <i>oyster shell/vitamin d oral tablet 600-125 mg-unit</i>                                   |                            | OTC                 |
| <i>oystercal-d oral tablet 500-400 mg-unit</i>  |                            | OTC                 |
| <i>pa calcium/vitamin d oral tablet 600-400 mg-unit</i>                                     |                            | OTC                 |
| <i>pronutrients calcium+d3 oral tablet 600-800 mg-unit</i>                                  | Caltrate 600+D3            | OTC                 |
| <i>px calcium&amp;d oral tablet 600-400 mg-unit</i>   |                            | OTC                 |
| <i>qc calcium/minerals/vitamin d oral tablet 600-400 mg-unit</i>                            |                            | OTC                 |
| <i>ra calcium 600/vit d/minerals oral tablet 600-200 mg-unit</i>                            |                            | OTC                 |
| <i>ra calcium 600/vit d/minerals oral tablet chewable 600-400 mg-unit</i>                   |                            | OTC                 |
| <i>ra calcium 600/vitamin d-3 oral tablet 600-400 mg-unit</i>                               |                            | OTC                 |
| <i>ra calcium cit plus vit d-3 oral tablet 315-6.25 mg-mcg</i>                              | Calcitrate                 | OTC                 |
| <i>ra calcium citrate plus vit d oral tablet 315-200 mg-unit</i>                            |                            | OTC                 |
| <i>ra calcium cit-vit d-3 petites oral tablet 200-250 mg-unit</i>                           | Citracal Petites/Vitamin D | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b>           | <b>Restrictions</b> |
|---|----------------------------|---------------------|
| <i>ra calcium plus vitamin d oral tablet 600-200 mg-unit, 600-400 mg-unit</i> |                            | OTC                 |
| <i>ra calcium plus vitamin d3 oral tablet 600-400 mg-unit</i>                 |                            | OTC                 |
| <i>ra calcium/vitamin d/minerals oral tablet 600-400 mg-unit</i>              |                            | OTC                 |
| <i>ra calcium-magnesium-zinc oral tablet 333-133-5 mg</i>                     |                            | OTC                 |
| <i>ra hi cal oral tablet 500-200 mg-unit</i>                                  | Oysco 500+D                | OTC                 |
| <i>ra hi-cal plus vitamin d oral tablet 500-200 mg-unit</i>                   | Oysco 500+D                | OTC                 |
| <b>RA OYSTER SHELL CALCIUM/D ORAL TABLET 250-125 MG-UNIT, 500-200 MG-UNIT</b> |                            | OTC                 |
| <i>risacal-d oral tablet 105-81-120 mg-mg-unit</i>                            |                            | OTC                 |
| <i>sb calcium + d oral tablet 600-200 mg-unit</i>                             |                            | OTC                 |
| <i>sm calcium 500/vitamin d3 oral tablet 500-400 mg-unit</i>                  |                            | OTC                 |
| <i>sm calcium 600/vitamin d oral tablet 600-400 mg-unit</i>                   |                            | OTC                 |
| <i>sm calcium 600+d3 oral tablet 600-800 mg-unit</i>                          | Caltrate 600+D3            | OTC                 |
| <i>sm calcium citrate w/vit d3 oral tablet 315-6.25 mg-mcg</i>                | Calcitrate                 | OTC                 |
| <i>sm calcium citrate+/vit d3 oral tablet 315-6.25 mg-mcg</i>                 | Calcitrate                 | OTC                 |
| <i>sm calcium citrate+d3 petite oral tablet 200-250 mg-unit</i>               | Citracal Petites/Vitamin D | OTC                 |
| <i>sm calcium citrate-vit d oral tablet 315-200 mg-unit</i>                   |                            | OTC                 |
| <i>sm calcium/vitamin d oral tablet 500-200 mg-unit</i>                       | Oysco 500+D                | OTC                 |
| <i>sm calcium/vitamin d oral tablet 600-800 mg-unit</i>                       | Caltrate 600+D3            | OTC                 |
| <i>sm calcium-magnesium-zinc oral tablet 333-133-5 mg</i>                     |                            | OTC                 |
| <i>sm calcium-vitamin d oral tablet 500-200 mg-unit</i>                       | Oysco 500+D                | OTC                 |
| <i>sm calcium-vitamin d oral tablet 600-400 mg-unit</i>                       |                            | OTC                 |
| <i>sm oyster shell calcium/vit d oral tablet 500-400 mg-unit</i>              |                            | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b>  | <b>Restrictions</b> |
|---|-------------------|---------------------|
| <i>sm oyster shell calcium/vit d3 oral tablet 500-400 mg-unit</i>               |                   | OTC                 |
| <i>super calcium 600 + d 400 oral tablet 600-400 mg-unit</i>                    |                   | OTC                 |
| <i>super calcium 600 + d3 oral tablet 600-400 mg-unit</i>                       |                   | OTC                 |
| <i>tgt calcium + vitamin d3 oral tablet 600-800 mg-unit</i>                     | Caltrate 600+D3   | OTC                 |
| <i>tgt calcium dietary supplement oral tablet chewable 600-400 mg-unit</i>      |                   | OTC                 |
| <b>UPCAL D ORAL PACKET 500-500 MG-UNIT</b>                                      |                   | OTC                 |
| <b>UPCAL D ORAL POWDER 500-500 MG-UNT/5GM</b>                                   |                   | OTC                 |
| <b>*Calcium***</b>  |                   |                     |
| <i>cal-carb forte oral tablet 1250 (500 ca) mg</i>                              |                   | OTC                 |
| <b>CALCI-CHEW ORAL TABLET CHEWABLE 1250 (500 CA) MG</b>                         | calcium carbonate | OTC                 |
| <i>calcitrate oral tablet 950 mg</i>  |                   | OTC                 |
| <i>calcium 600 high potency oral tablet 600 mg</i>                              |                   | OTC                 |
| <i>calcium 600 oral tablet 1500 (600 ca) mg, 600 mg</i>                         |                   | OTC                 |
| <i>calcium acetate oral tablet 668 (169 ca) mg</i>                              |                   | OTC                 |
| <b>CALCIUM CARBONATE ORAL POWDER 800 MG/2GM</b>                                 |                   | OTC                 |
| <i>calcium carbonate oral tablet 1250 (500 ca) mg, 1500 (600 ca) mg, 600 mg</i> |                   | OTC                 |
| <b>CALCIUM CARBONATE ORAL TABLET CHEWABLE 1250 (500 CA) MG</b>                  | calcium carbonate | OTC                 |
| <b>CALCIUM CARBONATE ORAL TABLET CHEWABLE 260 MG</b>                            |                   | OTC                 |
| <b>CALCIUM CITRATE ORAL GRANULES 760 MG/3.5GM</b>                               |                   | OTC                 |
| <b>CALCIUM CITRATE ORAL TABLET 250 MG</b>                                       |                   | OTC                 |
| <i>calcium high potency oral tablet 600 mg</i>                                  |                   | OTC                 |
| <i>calcium oral tablet 600 mg</i>   |                   | OTC                 |
| <i>calcium oyster shell oral tablet 1250 (500 ca) mg, 500 mg</i>                |                   | OTC                 |
| <b>CAL-MINT ORAL TABLET CHEWABLE 260 MG</b>                                     |                   | OTC                 |
| <i>caltrate 600 oral tablet 1500 (600 ca) mg</i>                                |                   | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b> | <b>Restrictions</b> |
|--|------------------|---------------------|
| <i>cvs calcium carbonate oral tablet 1250 (500 ca) mg</i>                                  |                  | OTC                 |
| <i>gnp calcium oral tablet 600 mg</i>  |                  | OTC                 |
| <i>high potency calcium oral tablet 600 mg</i>   |                  | OTC                 |
| <i>oysco 500 oral tablet 500 mg</i>  |                  | OTC                 |
| <i>oyster shell calcium oral tablet 500 mg</i>   |                  | OTC                 |
| <i>oystercal oral tablet 500 mg</i>  |                  | OTC                 |
| <i>qc calcium fast dissolution oral tablet 600 mg</i>                                      |                  | OTC                 |
| <i>ra calcium 600 oral tablet 600 mg</i>   |                  | OTC                 |
| <i>ra calcium hi-cal oral tablet 500 mg</i>  |                  | OTC                 |
| <i>ra calcium high potency oral tablet 600 mg</i>  |                  | OTC                 |
| <i>ra calcium oral tablet 500 mg</i>   |                  | OTC                 |
| <i>ra hi-cal oral tablet 500 mg</i>  |                  | OTC                 |
| <i>ra oyster shell calcium oral tablet 500 mg</i>  |                  | OTC                 |
| <i>sb oyster shell calcium oral tablet 500 mg</i>  |                  | OTC                 |
| <b>SM CORAL CALCIUM ORAL TABLET 1000 (390 CA) MG</b>                                       |                  | OTC                 |
| <i>super calcium oral tablet 600 mg</i>  |                  | OTC                 |
| <b>*Fluoride***</b>  |                  |                     |
| <i>fluoritab oral tablet chewable 0.55 (0.25 f) mg, 1.1 (0.5 f) mg, 2.2 (1 f) mg</i>       |                  |                     |
| <i>ludent oral tablet chewable 0.55 (0.25 f) mg, 1.1 (0.5 f) mg, 2.2 (1 f) mg</i>          |                  |                     |
| <i>nafrinse oral tablet chewable 2.2 (1 f) mg</i>  |                  |                     |
| <i>sodium fluoride oral solution 1.1 (0.5 f) mg/ml</i>                                     |                  |                     |
| <i>sodium fluoride oral tablet chewable 0.55 (0.25 f) mg, 1.1 (0.5 f) mg, 2.2 (1 f) mg</i> |                  |                     |
| <b>*Magnesium Combinations***</b>  |                  |                     |
| <b>BEELITH ORAL TABLET 362-20 MG</b>   |                  | OTC                 |
| <b>NU-MAG ORAL TABLET DELAYED RELEASE 71.5-119 MG</b>                                      |                  | OTC                 |
| <i>slow magnesium/calcium oral tablet delayed release 70-117 mg</i>                        |                  | OTC                 |
| <b>SLOW-MAG ORAL TABLET DELAYED RELEASE 71.5-119 MG</b>                                    |                  | OTC                 |
| <b>*Magnesium***</b>   |                  |                     |
| <i>cvs magnesium oral tablet 250 mg</i>  |                  | OTC                 |
| <i>cvs magnesium oxide oral tablet 500 mg</i>  |                  | OTC                 |
| <i>essential magnesium oral tablet 250 mg</i>  |                  | OTC                 |
| <i>gnp magnesium oral tablet 250 mg</i>  |                  | OTC                 |



| <b>Formulary Drug Name</b>  | <b>Reference</b>           | <b>Restrictions</b> |
|---|----------------------------|---------------------|
| <i>kp mag-oxide magnesium oral tablet 200 mg</i>                  | Mag-200                    | OTC                 |
| <b>MAG-200 ORAL TABLET 200 MG</b>                                 | kp mag-oxide magnesium     | OTC                 |
| <i>magnesium oral capsule 500 mg</i>                              |                            | OTC                 |
| <b>MAGNESIUM ORAL TABLET 200 MG, 30 MG</b>                        |                            | OTC                 |
| <i>magnesium oral tablet 250 mg, 400 mg</i>                       |                            | OTC                 |
| <b>MAGNESIUM OXIDE -MG SUPPLEMENT ORAL CAPSULE 400 MG</b>         |                            | OTC                 |
| <i>magnesium oxide -mg supplement oral capsule 500 mg</i>         |                            | OTC                 |
| <i>magnesium oxide -mg supplement oral tablet 250 mg, 500 mg</i>  |                            | OTC                 |
| <i>magnesium oxide -mg supplement oral tablet 400 (240 mg) mg</i> | MAGnesium-Oxide            | OTC                 |
| <i>natrul magnesium oral tablet 250 mg</i>                        |                            | OTC                 |
| <i>ra magnesium oral capsule 500 mg</i>                           |                            | OTC                 |
| <i>ra natural magnesium oral tablet 250 mg</i>                    |                            | OTC                 |
| <i>sm magnesium oral tablet 250 mg</i>                            |                            | OTC                 |
| <i>sm magnesium oxide oral tablet 250 mg</i>                      |                            | OTC                 |
| <b>*Phosphate***</b>  |                            |                     |
| <i>av-phos 250 neutral oral tablet 155-852-130 mg</i>             | Phospha 250 Neutral        |                     |
| <i>phospha 250 neutral oral tablet 155-852-130 mg</i>             | Phospha 250 Neutral        |                     |
| <i>phospho-trin 250 neutral oral tablet 155-852-130 mg</i>        | Phospha 250 Neutral        |                     |
| <b>PHOSPHO-TRIN K500 ORAL TABLET 500 MG</b>                       |                            |                     |
| <i>virt-phos 250 neutral oral tablet 155-852-130 mg</i>           | Phospha 250 Neutral        |                     |
| <b>*Potassium***</b>  |                            |                     |
| <i>effer-k oral tablet effervescent 25 meq</i>                    | Effer-K                    |                     |
| <i>k-effervescent oral tablet effervescent 25 meq</i>             | Effer-K                    |                     |
| <i>klor-con 10 oral tablet extended release 10 meq</i>            | Klor-Con 10                |                     |
| <i>klor-con m10 oral tablet extended release 10 meq</i>           | Klor-Con M10               |                     |
| <b>KLOR-CON M15 ORAL TABLET EXTENDED RELEASE 15 MEQ</b>           | potassium chloride crys er |                     |
| <i>klor-con m20 oral tablet extended release 20 meq</i>           | Klor-Con M20               |                     |

| <b>Formulary Drug Name</b>   | <b>Reference</b> | <b>Restrictions</b> |
|--|------------------|---------------------|
| <i>klor-con oral tablet extended release 8 meq</i>                       | Klor-Con         |                     |
| <i>klor-con/ef oral tablet effervescent 25 meq</i>                       | Effer-K          |                     |
| <i>k-prime oral tablet effervescent 25 meq</i>                           | Effer-K          |                     |
| <i>k-vescent oral tablet effervescent 25 meq</i>                         | Effer-K          |                     |
| <i>potassium bicarbonate oral tablet effervescent 25 meq</i>             | Effer-K          |                     |
| <i>potassium chloride crys er oral tablet extended release 10 meq</i>    | Klor-Con M10     |                     |
| <i>potassium chloride crys er oral tablet extended release 20 meq</i>    | Klor-Con M20     |                     |
| <i>potassium chloride er oral capsule extended release 10 meq, 8 meq</i> |                  |                     |
| <i>potassium chloride er oral tablet extended release 10 meq</i>         | Klor-Con 10      |                     |
| <i>potassium chloride er oral tablet extended release 20 meq</i>         | K-Tab            |                     |
| <i>potassium chloride er oral tablet extended release 8 meq</i>          | Klor-Con         |                     |
| <b>*Sodium***</b>  |                  |                     |
| <i>sodium chloride oral tablet 1 gm</i>                                  |                  | OTC                 |
| <b>*Zinc***</b>  |                  |                     |
| <i>chelated zinc oral tablet 50 mg</i>                                   | IS-ZC 50         | OTC                 |
| <i>eql natural zinc oral tablet 50 mg</i>                                | IS-ZC 50         | OTC                 |
| <i>gnp zinc chelated oral tablet 50 mg</i>                               | IS-ZC 50         | OTC                 |
| <i>gnp zinc oral tablet 50 mg</i>  |                  | OTC                 |
| <i>hm zinc oral tablet 50 mg</i>   | IS-ZC 50         | OTC                 |
| <i>m2 zinc-50 oral tablet 50 mg</i>                                      | IS-ZC 50         | OTC                 |
| <i>orazinc oral capsule 220 (50 zn) mg</i>                               | Orazinc          | OTC                 |
| <b>ORAZINC ORAL TABLET 110 MG</b>  |                  | OTC                 |
| <i>ra zinc oral tablet 50 mg</i>   |                  | OTC                 |
| <i>sm zinc gluconate oral tablet 50 mg</i>                               |                  | OTC                 |
| <b>VITAMELTS ZINC FAST DISSOLVE ORAL TABLET DISPERSIBLE 15 MG</b>        |                  | OTC                 |
| <b>ZINC 15 ORAL TABLET 66 MG</b>   |                  | OTC                 |
| <i>zinc chelated oral tablet 50 mg</i>                                   | IS-ZC 50         | OTC                 |
| <i>zinc gluconate oral tablet 100 mg, 30 mg, 50 mg</i>                   |                  | OTC                 |
| <b>ZINC MOUTH/THROAT LOZENGE 10 MG</b>                                   |                  | OTC                 |
| <i>zinc oral tablet 30 mg</i>  |                  | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b>     | <b>Restrictions</b>         |
|---|----------------------|-----------------------------|
| <i>zinc oral tablet 50 mg</i>   | IS-ZC 50             | OTC                         |
| <i>zinc sulfate oral capsule 220 (50 zn) mg</i>                           | Orazinc              | OTC                         |
| <i>zinc sulfate oral tablet 220 (50 zn) mg</i>                            |                      | OTC                         |
| <i>zinc-220 oral capsule 220 (50 zn) mg</i>                               | Orazinc              | OTC                         |
| <b>*Miscellaneous Therapeutic Classes*</b>                                |                      |                             |
| <b>*Chelating Agents***</b>   |                      |                             |
| <i>penicillamine oral tablet 250 mg</i>                                   | Depen Titratabs      | PA; QLL (8 EA per 1 day)    |
| <b>*Cyclosporine Analogs***</b>   |                      |                             |
| <i>cyclosporine modified oral capsule 100 mg, 25 mg</i>                   | Gengraf              |                             |
| <i>cyclosporine modified oral capsule 50 mg</i>                           |                      |                             |
| <i>cyclosporine modified oral solution 100 mg/ml</i>                      | Gengraf              |                             |
| <i>cyclosporine oral capsule 100 mg, 25 mg</i>                            | SandIMMUNE           |                             |
| <i>gengraf oral capsule 100 mg, 25 mg</i>                                 | Gengraf              |                             |
| <i>gengraf oral solution 100 mg/ml</i>                                    | Gengraf              |                             |
| <b>*Immunomodulators For Myelodysplastic Syndromes***</b>                 |                      |                             |
| <i>lenalidomide oral capsule 10 mg, 15 mg, 2.5 mg, 20 mg, 25 mg, 5 mg</i> | Revlimid             | PA; QLL (30 EA per 30 days) |
| <b>REVLIMID ORAL CAPSULE 10 MG, 15 MG, 2.5 MG, 20 MG, 25 MG, 5 MG</b>     | lenalidomide         | PA; QLL (30 EA per 30 days) |
| <b>*Inosine Monophosphate Dehydrogenase Inhibitors***</b>                 |                      |                             |
| <i>mycophenolate mofetil oral capsule 250 mg</i>                          | CellCept             |                             |
| <i>mycophenolate mofetil oral suspension reconstituted 200 mg/ml</i>      | CellCept             |                             |
| <i>mycophenolate mofetil oral tablet 500 mg</i>                           | CellCept             |                             |
| <b>*Irrigation Solutions***</b>   |                      |                             |
| <i>argyle sterile water irrigation solution</i>                           | Argyle Sterile Water |                             |
| <i>sterile water for irrigation irrigation solution</i>                   | Argyle Sterile Water |                             |
| <b>*Macrolide Immunosuppressants***</b>                                   |                      |                             |
| <i>sirolimus oral solution 1 mg/ml</i>                                    | Rapamune             |                             |
| <i>sirolimus oral tablet 0.5 mg, 1 mg, 2 mg</i>                           | Rapamune             |                             |
| <i>tacrolimus oral capsule 0.5 mg, 1 mg, 5 mg</i>                         | Prograf              |                             |
| <b>*Potassium Removing Agents***</b>                                      |                      |                             |
| <i>kionex oral suspension 15 gm/60ml</i>                                  | SPS                  |                             |
| <i>sodium polystyrene sulfonate oral powder</i>                           |                      |                             |
| <i>sodium polystyrene sulfonate oral suspension 15 gm/60ml</i>            | SPS                  |                             |

| <b>Formulary Drug Name</b>   | <b>Reference</b>          | <b>Restrictions</b> |
|--|---------------------------|---------------------|
| <i>sps oral suspension 15 gm/60ml</i>                              | SPS                       |                     |
| <b>*Purine Analogs***</b>  |                           |                     |
| <i>azathioprine oral tablet 50 mg</i>                              | Imuran                    |                     |
| <b>*Mouth/Throat/Dental Agents*</b>                                |                           |                     |
| <b>*Anesthetics Topical Oral - Combinations***</b>                 |                           |                     |
| <b>CEPACOL EXTRA STRENGTH MOUTH/THROAT LOZENGE 15-2.6 MG</b>       | cvs sore throat           | OTC                 |
| <b>CEPACOL SORE THROAT EX ST MOUTH/THROAT LOZENGE 15-3.6 MG</b>    | sore throat               | OTC                 |
| <b>CEPACOL SORE THROAT MAX NUMB MOUTH/THROAT LOZENGE 15-4 MG</b>   |                           | OTC                 |
| <b>CEPACOL SORE THROAT MOUTH/THROAT LOZENGE 15-2.6 MG</b>          | cvs sore throat           | OTC                 |
| <b>CEPACOL SORE THROAT MOUTH/THROAT LOZENGE 15-3.6 MG</b>          | sore throat               | OTC                 |
| <b>CHLORASEPTIC MOUTH/THROAT LOZENGE 6-10 MG</b>                   | sore throat               | OTC                 |
| <b>CHLORASEPTIC SORE THROAT MOUTH/THROAT LOZENGE 6-10 MG</b>       | sore throat               | OTC                 |
| <i>cvs sore throat max strength mouth/throat lozenge 15-2.6 mg</i> | Cepacol Extra Strength    | OTC                 |
| <i>cvs sore throat max strength mouth/throat lozenge 15-3.6 mg</i> | Cepacol Sore Throat Ex St | OTC                 |
| <i>gnp sore throat mouth/throat lozenge 6-10 mg</i>                | Chloraseptic              | OTC                 |
| <i>ra throat lozenges mouth/throat lozenge 6-10 mg</i>             | Chloraseptic              | OTC                 |
| <i>sore throat lozenges mouth/throat lozenge 6-10 mg</i>           | Chloraseptic              | OTC                 |
| <i>sore throat mouth/throat lozenge 15-3.6 mg</i>                  | Cepacol Sore Throat Ex St | OTC                 |
| <i>sore throat mouth/throat lozenge 6-10 mg</i>                    | Chloraseptic              | OTC                 |
| <i>tgt lozenges mouth/throat lozenge 6-10 mg</i>                   | Chloraseptic              | OTC                 |
| <i>ultra throat mouth/throat lozenge 6-10 mg</i>                   | Chloraseptic              | OTC                 |
| <b>*Anesthetics Topical Oral***</b>                                |                           |                     |
| <i>lidocaine viscous mouth/throat solution 2 %</i>                 |                           |                     |
| <b>*Anti-Infective Combinations - Throat***</b>                    |                           |                     |
| <b>ULCEREASE MOUTH/THROAT SOLUTION 0.6-1.5 %</b>                   |                           | OTC                 |
| <b>*Anti-Infectives - Throat***</b>                                |                           |                     |
| <i>cankaid mouth/throat solution 10 %</i>                          | Gly-Oxide                 | OTC                 |

| <b>Formulary Drug Name</b>                                     | <b>Reference</b>      | <b>Restrictions</b> |
|--|-----------------------|---------------------|
| <i>clotrimazole mouth/throat lozenge 10 mg</i>                 |                       |                     |
| <i>clotrimazole mouth/throat troche 10 mg</i>                  |                       |                     |
| <i>gly-oxide mouth/throat solution 10 %</i>                    | Gly-Oxide             | OTC                 |
| <i>nystatin mouth/throat suspension 100000 unit/ml</i>         |                       |                     |
| <i>ra antiseptic mouth cleanser mouth/throat solution 10 %</i> | Gly-Oxide             | OTC                 |
| <b>*Antiseptics - Mouth/Throat***</b>                          |                       |                     |
| <b>CHERACOL SORE THROAT MOUTH/THROAT LIQUID 1.4 %</b>          | cvs sore throat spray | OTC                 |
| <i>chloraseptic gargle mouth/throat liquid 1.4 %</i>           | Chloraseptic          | OTC                 |
| <i>chloraseptic mouth pain mouth/throat liquid 1.4 %</i>       | Chloraseptic          | OTC                 |
| <i>chloraseptic mouth/throat liquid 1.4 %</i>                  | Chloraseptic          | OTC                 |
| <i>chloraseptic warm sore throat mouth/throat liquid 1.4 %</i> | Chloraseptic          | OTC                 |
| <i>chlorhexidine gluconate mouth/throat solution 0.12 %</i>    | Peridex               |                     |
| <i>cvs sore throat spray mouth/throat liquid 1.4 %</i>         | Chloraseptic          | OTC                 |
| <i>diabetic tussin sore throat mouth/throat liquid 1.4 %</i>   | Chloraseptic          | OTC                 |
| <i>eql sore throat spray mouth/throat liquid 1.4 %</i>         | Chloraseptic          | OTC                 |
| <i>gnp sore throat spray mouth/throat liquid 1.4 %</i>         | Chloraseptic          | OTC                 |
| <i>goodsense sore throat spray mouth/throat liquid 1.4 %</i>   | Chloraseptic          | OTC                 |
| <i>ora relief mouth/throat liquid 1.4 %</i>                    | Chloraseptic          | OTC                 |
| <i>oral relief mouth/throat liquid 1.4 %</i>                   | Chloraseptic          | OTC                 |
| <i>oralseptic mouth/throat liquid 1.4 %</i>                    | Chloraseptic          | OTC                 |
| <b>PAIN-A-LAY MOUTH/THROAT LIQUID 1.4 %</b>                    | cvs sore throat spray | OTC                 |
| <i>paroex mouth/throat solution 0.12 %</i>                     | Peridex               |                     |
| <i>px sore throat mouth/throat liquid 1.4 %</i>                | Chloraseptic          | OTC                 |
| <i>qc sore throat spray mouth/throat liquid 1.4 %</i>          | Chloraseptic          | OTC                 |
| <i>ra sore throat mouth/throat liquid 1.4 %</i>                | Chloraseptic          | OTC                 |
| <i>sb sore throat spray mouth/throat liquid 1.4 %</i>          | Chloraseptic          | OTC                 |
| <i>sm sore throat spray mouth/throat liquid 1.4 %</i>          | Chloraseptic          | OTC                 |
| <i>sore throat mouth/throat liquid</i>                         | Chloraseptic          | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b>              | <b>Restrictions</b> |
|---|-------------------------------|---------------------|
| <i>sore throat spray mouth/throat liquid 1.4 %</i>                                      | Chloraseptic                  | OTC                 |
| <i>tgt sore throat spray mouth/throat liquid 1.4 %</i>                                  | Chloraseptic                  | OTC                 |
| <b>ULCEREASE MOUTH/THROAT LIQUID 0.6 %</b>  |                               | OTC                 |
| <b>*Dental Products - Combinations***</b>   |                               |                     |
| <i>sodium fluoride 5000 enamel dental gel 1.1-5 %</i>                                   | PreviDent 5000 Enamel Protect |                     |
| <i>sodium fluoride 5000 sensitive dental gel 1.1-5 %</i>                                | PreviDent 5000 Enamel Protect |                     |
| <b>*Fluoride Dental Products***</b>   |                               |                     |
| <i>cavarest dental gel 1.1 %</i>  | DentaGel                      |                     |
| <i>denta 5000 plus dental cream 1.1 %</i>   | Denta 5000 Plus               |                     |
| <i>dentagel dental gel 1.1 %</i>  | DentaGel                      |                     |
| <i>sf 5000 plus dental cream 1.1 %</i>  | Denta 5000 Plus               |                     |
| <i>sf dental gel 1.1 %</i>  | DentaGel                      |                     |
| <i>sodium fluoride 5000 ppm dental paste 1.1 %</i>                                      | Clinpro 5000                  |                     |
| <b>*Lozenge - Combinations***</b>   |                               |                     |
| <b>CEPACOL SORE THROAT &amp; COUGH MOUTH/THROAT LOZENGE 5-7.5 MG</b>                    | eql sore throat & cough       | OTC                 |
| <i>eql sore throat &amp; cough mouth/throat lozenge 5-7.5 mg</i>                        | Cepacol Sore Throat & Cough   | OTC                 |
| <i>sore throat &amp; cough lozenges mouth/throat lozenge 5-7.5 mg</i>                   | Cepacol Sore Throat & Cough   | OTC                 |
| <b>*Lozenges***</b>   |                               |                     |
| <b>CEPACOL SORE THROAT MOUTH/THROAT LOZENGE 5.4 MG</b>                                  | cough drops                   | OTC                 |
| <i>cherry cough drops mouth/throat lozenge 6.1 mg</i>                                   | Dentiva                       | OTC                 |
| <i>cough drops menthol mouth/throat lozenge</i>   | Dentiva                       | OTC                 |
| <i>cough drops mouth/throat lozenge 10 mg, 5 mg, 5.8 mg, 7 mg, 7.5 mg, 7.6 mg, 8 mg</i> |                               | OTC                 |
| <b>COUGH DROPS MOUTH/THROAT LOZENGE 2.7 MG</b>  |                               | OTC                 |
| <i>cough drops mouth/throat lozenge 5.4 mg</i>  | Cepacol Sore Throat           | OTC                 |
| <i>cough drops mouth/throat lozenge 8.4 mg</i>  | Dentiva                       | OTC                 |
| <i>cvs cherry menthol drops mouth/throat lozenge</i>                                    | Dentiva                       | OTC                 |
| <i>cvs cough drops sugar free mouth/throat lozenge 5.8 mg, 7.6 mg</i>                   |                               | OTC                 |
| <i>cvs honey lemon drops mouth/throat lozenge</i>                                       | Dentiva                       | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>          | <b>Restrictions</b> |
|--|---------------------------|---------------------|
| <i>cvs menthol drops mouth/throat lozenge</i>                              | Dentiva                   | OTC                 |
| <b>DENTIVA MOUTH/THROAT LOZENGE</b>  | cherry cough drops        | OTC                 |
| <b>DIABETIC TUSSIN COUGH DROPS MOUTH/THROAT LOZENGE 6 MG</b>               | cherry cough drops        | OTC                 |
| <i>eq cough sugar free mouth/throat lozenge 5.8 mg</i>                     |                           | OTC                 |
| <i>eql cough drops mouth/throat lozenge 5.8 mg, 7.5 mg, 7.6 mg</i>         |                           | OTC                 |
| <i>gnp cough drops mouth/throat lozenge 5.8 mg, 7 mg</i>                   |                           | OTC                 |
| <i>halls cough drops mouth/throat lozenge 5.8 mg, 7 mg, 7.6 mg</i>         |                           | OTC                 |
| <i>larynex mouth/throat lozenge</i>  | Dentiva                   | OTC                 |
| <i>medikoff drops mouth/throat lozenge 7.6 mg</i>                          |                           | OTC                 |
| <i>menthol cough drops mouth/throat lozenge 5 mg</i>                       | Dentiva                   | OTC                 |
| <i>natural herb cough drops mouth/throat lozenge 3 mg</i>                  | Dentiva                   | OTC                 |
| <i>nycoff mouth/throat lozenge</i>   | Dentiva                   | OTC                 |
| <i>qc sore throat mouth/throat lozenge 6-10 mg</i>                         | Dentiva                   | OTC                 |
| <i>ra cough drops mouth/throat lozenge 10 mg, 5 mg, 5.8 mg, 7 mg</i>       |                           | OTC                 |
| <b>SALESE MOUTH/THROAT LOZENGE</b>   | cherry cough drops        | OTC                 |
| <i>sm cough drops mouth/throat lozenge 10 mg, 5 mg, 5.8 mg, 7 mg, 8 mg</i> |                           | OTC                 |
| <i>tgt cough drops mouth/throat lozenge 7 mg</i>                           |                           | OTC                 |
| <i>throat discs mouth/throat lozenge</i>                                   | Dentiva                   | OTC                 |
| <b>VICKS VAPODROPS MOUTH/THROAT LOZENGE 1.7 MG, 3.3 MG</b>                 |                           | OTC                 |
| <b>ZINC W/A&amp;C MOUTH/THROAT LOZENGE</b>                                 | cherry cough drops        | OTC                 |
| <b>*Protectants - Mouth/Throat***</b>                                      |                           |                     |
| <i>anbesol cold sore therapy external ointment</i>                         | Anbesol Cold Sore Therapy | OTC                 |
| <b>BLISTEX MEDICATED EXTERNAL OINTMENT</b>                                 | l-lysine                  | OTC                 |
| <i>cold sore treatment external liquid</i>                                 |                           | OTC                 |
| <i>eql cold sore treatment external liquid 0.13-3 %</i>                    |                           | OTC                 |
| <i>gnp cold sore treatment external liquid 0.13 %</i>                      |                           | OTC                 |
| <b>LIP MEDEX EXTERNAL OINTMENT</b>   | l-lysine                  | OTC                 |
| <i>lip-guard external ointment</i>   | Anbesol Cold Sore Therapy | OTC                 |



| <b>Formulary Drug Name</b>                              | <b>Reference</b>          | <b>Restrictions</b> |
|---|---------------------------|---------------------|
| <i>l-lysine external ointment</i>                       | Anbesol Cold Sore Therapy | OTC                 |
| <i>ra cold sore treatment external liquid 0.13 %</i>    |                           | OTC                 |
| <b>*Saliva Stimulants***</b>                            |                           |                     |
| <i>pilocarpine hcl oral tablet 5 mg, 7.5 mg</i>         | Salagen                   |                     |
| <b>*Steroids - Mouth/Throat/Dental***</b>               |                           |                     |
| <i>oralone mouth/throat paste 0.1 %</i>                 | Oralone                   |                     |
| <i>triamcinolone acetonide mouth/throat paste 0.1 %</i> | Oralone                   |                     |
| <b>*Multivitamins*</b>                                  |                           |                     |
| <b>*B-Complex Vitamins***</b>                           |                           |                     |
| <i>b complex 50 oral tablet</i>                         |                           | OTC                 |
| <i>b complex oral capsule</i>                           |                           | OTC                 |
| <i>b complex oral tablet</i>                            |                           | OTC                 |
| <i>b complex vitamins oral capsule</i>                  |                           | OTC                 |
| <i>b complex-b12 oral tablet</i>                        |                           | OTC                 |
| <i>b-complex/b-12 oral tablet</i>                       |                           | OTC                 |
| <i>pa b-complex with b-12 oral tablet</i>               |                           | OTC                 |
| <i>ra b-complex oral tablet</i>                         |                           | OTC                 |
| <i>ra b-complex with b-12 oral tablet</i>               |                           | OTC                 |
| <i>vitamin b complex oral tablet</i>                    |                           | OTC                 |
| <i>vitamin b-complex oral tablet</i>                    |                           | OTC                 |
| <i>vitamin-b complex oral tablet</i>                    |                           | OTC                 |
| <b>*B-Complex W/ C &amp; Calcium***</b>                 |                           |                     |
| <i>gnp b-complex plus vitamin c oral tablet</i>         |                           | OTC                 |
| <b>*B-Complex W/ C &amp; E + Zn***</b>                  |                           |                     |
| <i>advanced stress formula/zinc oral tablet</i>         |                           | OTC                 |
| <i>bec/zinc oral tablet</i>                             |                           | OTC                 |
| <i>bee zee oral tablet</i>                              |                           | OTC                 |
| <i>cvs stress formula/zinc oral tablet</i>              |                           | OTC                 |
| <i>eql stress b-complex c/zinc oral tablet</i>          |                           | OTC                 |
| <i>stress b/zinc oral tablet</i>                        |                           | OTC                 |
| <i>stress b-complex/vit c/zinc oral tablet</i>          |                           | OTC                 |
| <i>stress plus zinc oral tablet</i>                     |                           | OTC                 |
| <i>zinc-vites oral tablet</i>                           |                           | OTC                 |
| <b>*B-Complex W/ C &amp; Folic Acid***</b>              |                           |                     |
| <i>b complex-c-folic acid oral tablet</i>               |                           | OTC                 |
| <i>b-complex balanced oral tablet</i>                   |                           | OTC                 |
| <i>b-complex/vitamin c oral tablet</i>                  |                           | OTC                 |

| <b>Formulary Drug Name</b>                                    | <b>Reference</b> | <b>Restrictions</b> |
|---|------------------|---------------------|
| <i>b-plex oral tablet</i>                                     |                  |                     |
| <i>eql super b complex/vitamin c oral tablet</i>              |                  | OTC                 |
| <i>folbee plus oral tablet</i>                                | Dexifol          |                     |
| <i>hm super vitamin b complex/c oral tablet</i>               |                  | OTC                 |
| <i>hm vitamin b complex/vitamin c oral tablet</i>             |                  | OTC                 |
| <i>kp b complex-c oral tablet</i>                             |                  | OTC                 |
| <i>px b complex/vitamin c oral tablet</i>                     |                  | OTC                 |
| <i>sm b super vitamin complex oral tablet</i>                 |                  | OTC                 |
| <i>super b-complex/vit c/fa oral tablet</i>                   |                  | OTC                 |
| <i>vita-bee/c oral tablet</i>                                 |                  | OTC                 |
| <b>*B-Complex W/ C***</b>                                     |                  |                     |
| <i>allbee/c oral tablet</i>                                   | Allbee/C         | OTC                 |
| <i>b complex-c oral capsule</i>                               |                  | OTC                 |
| <i>b complex-c oral tablet</i>                                | Allbee/C         | OTC                 |
| <i>b complex-vitamin c oral capsule</i>                       |                  | OTC                 |
| <i>balanced b complex cr oral tablet extended release</i>     |                  | OTC                 |
| <i>b-complex-c oral tablet</i>                                | Allbee/C         | OTC                 |
| <i>better b complex oral tablet</i>                           | Allbee/C         | OTC                 |
| <i>cvs b complex plus c oral tablet</i>                       | Allbee/C         | OTC                 |
| <i>cvs super b complex/c oral tablet</i>                      | Allbee/C         | OTC                 |
| <i>ra b-complex/vitamin c cr oral tablet extended release</i> |                  | OTC                 |
| <i>sm super b complex/c oral tablet</i>                       | Allbee/C         | OTC                 |
| <i>super b complex/vitamin c oral tablet</i>                  | Allbee/C         | OTC                 |
| <i>super b/c oral capsule</i>                                 |                  | OTC                 |
| <i>superplex-t oral tablet</i>                                | Allbee/C         | OTC                 |
| <i>total b/c oral tablet</i>                                  | Allbee/C         | OTC                 |
| <i>vitamin b complex-c oral capsule</i>                       |                  | OTC                 |
| <b>*B-Complex W/ C-Biotin-E &amp; Folic Acid***</b>           |                  |                     |
| <b>B COMPLEX-C-BIOTIN-E-FA ORAL TABLET 0.4 MG</b>             |                  | OTC                 |
| <b>*B-Complex W/ C-Zn &amp; Folic Acid***</b>                 |                  |                     |
| <b>DIALYVITE 800/ZINC ORAL TABLET 0.8 MG</b>                  |                  | OTC                 |
| <b>VITALINE BIOTIN FORTE/ZINC ORAL TABLET 0.8 MG</b>          |                  | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b> | <b>Restrictions</b> |
|--|------------------|---------------------|
| <b>*B-Complex W/ Folic Acid***</b>                                 |                  |                     |
| <i>b complex formula 1 oral tablet</i>                             | Big 100          | OTC                 |
| <i>b complex plus oral tablet</i>                                  | Big 100          | OTC                 |
| <i>b-50 cr oral tablet extended release</i>                        |                  | OTC                 |
| <i>balanced b-50 oral tablet extended release</i>                  |                  | OTC                 |
| <i>benfotiamine multi-b oral capsule</i>                           |                  | OTC                 |
| <i>big 100 oral tablet</i>   | Big 100          | OTC                 |
| <i>gnp b-100 balanced tr oral tablet extended release</i>          |                  | OTC                 |
| <i>kobee oral tablet</i>   | Big 100          | OTC                 |
| <i>m2 b125 oral tablet extended release</i>                        |                  | OTC                 |
| <i>sm balanced b-100 oral tablet</i>                               | Big 100          | OTC                 |
| <i>sm balanced b-50 oral tablet</i>                                | Big 100          | OTC                 |
| <i>super b complex maxi oral tablet</i>                            | Big 100          | OTC                 |
| <b>*B-Complex W/ Minerals***</b>                                   |                  |                     |
| <i>geriaton oral liquid</i>  | Eldertonic       | OTC                 |
| <i>rabano yodado oral liquid</i>                                   | Eldertonic       | OTC                 |
| <b>*B-Complex W/Biotin &amp; Folic Acid***</b>                     |                  |                     |
| <i>b complete oral tablet</i>                                      | Super DEC B-100  | OTC                 |
| <i>b complex 100 tr oral tablet extended release</i>               | Endur-B          | OTC                 |
| <i>b complex-biotin-fa oral tablet</i>                             | Super DEC B-100  | OTC                 |
| <i>b-100 complex cr oral tablet extended release</i>               | Endur-B          | OTC                 |
| <i>b-100 tr oral tablet extended release</i>                       | Endur-B          | OTC                 |
| <i>b-50 complex oral tablet extended release</i>                   | Endur-B          | OTC                 |
| <i>b50 complex tr oral tablet extended release</i>                 | Endur-B          | OTC                 |
| <i>balance b-50 oral tablet</i>                                    | Super DEC B-100  | OTC                 |
| <i>balanced b complex oral tablet</i>                              | Super DEC B-100  | OTC                 |
| <i>balanced b-100 oral tablet</i>                                  | Super DEC B-100  | OTC                 |
| <i>balanced b-100 oral tablet extended release</i>                 | Endur-B          | OTC                 |
| <i>b-compleet-100 oral tablet</i>                                  | Super DEC B-100  | OTC                 |
| <i>b-compleet-50 oral tablet</i>                                   | Super DEC B-100  | OTC                 |
| <i>b-complex oral tablet</i>                                       | Super DEC B-100  | OTC                 |
| <i>complex b-100 oral tablet extended release</i>                  | Endur-B          | OTC                 |
| <i>complex b-50 prolonged release oral tablet extended release</i> | Endur-B          | OTC                 |
| <i>eql b complex 50 oral tablet</i>                                | Super DEC B-100  | OTC                 |
| <i>eql b-100 complex oral tablet extended release</i>              | Endur-B          | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b> | <b>Restrictions</b> |
|--|------------------|---------------------|
| <i>extress oral tablet</i>   | Super DEC B-100  | OTC                 |
| <i>extress-super oral tablet</i>   | Super DEC B-100  | OTC                 |
| <i>gnp b-100 complex oral tablet extended release</i>                            | Endur-B          | OTC                 |
| <i>gnp b-50 balanced oral tablet</i>   | Super DEC B-100  | OTC                 |
| <i>gnp b-50 complex oral tablet extended release</i>                             | Endur-B          | OTC                 |
| <i>hm vitamin b100 complex oral tablet</i>                                       | Super DEC B-100  | OTC                 |
| <i>hm vitamin b50 complex oral tablet</i>  | Super DEC B-100  | OTC                 |
| <i>poten b-150 cr oral tablet extended release</i>                               | Endur-B          | OTC                 |
| <i>quin b strong b-25 oral tablet</i>  | Super DEC B-100  | OTC                 |
| <i>ra balanced b-100 cr oral tablet extended release</i>                         | Endur-B          | OTC                 |
| <i>ra balanced b-100 oral tablet</i>   | Super DEC B-100  | OTC                 |
| <i>ra balanced b-50 oral tablet</i>  | Super DEC B-100  | OTC                 |
| <i>ra balanced b-50 tr oral tablet extended release</i>                          | Endur-B          | OTC                 |
| <i>sm b100 complex oral tablet</i>   | Super DEC B-100  | OTC                 |
| <i>sm b-complex oral tablet</i>  | Super DEC B-100  | OTC                 |
| <i>super b-100 oral tablet</i>   | Super DEC B-100  | OTC                 |
| <i>super b-50 oral tablet</i>  | Super DEC B-100  | OTC                 |
| <i>super b-complex oral tablet</i>   | Super DEC B-100  | OTC                 |
| <i>super dec b-100 oral tablet</i>   | Super DEC B-100  | OTC                 |
| <i>super quints b-50 oral tablet</i>   | Super DEC B-100  | OTC                 |
| <i>vitamin b50 complex oral tablet extended release</i>                          | Endur-B          | OTC                 |
| <i>yl balanced b-100 oral tablet</i>   | Super DEC B-100  | OTC                 |
| <b>*Bioflavonoid Products***</b>   |                  |                     |
| <b>ADVANCED C PLUS ORAL TABLET</b>   | anti-allergy     | OTC                 |
| <i>anti-allergy oral tablet 100-100-50 mg</i>                                    | Easy-C           | OTC                 |
| <b>ASCOCID-1000 ORAL TABLET EXTENDED RELEASE</b>                                 | c complex        | OTC                 |
| <b>ASCOCID-500-D ORAL TABLET EXTENDED RELEASE</b>                                | c complex        | OTC                 |
| <i>bioflex oral tablet</i>   | Easy-C           | OTC                 |
| <i>c complex oral tablet extended release</i>                                    | Ester-C          | OTC                 |
| <i>c1000 tr/rose hip/bioflavonoid oral tablet extended release 1000-50-50 mg</i> | Ester-C          | OTC                 |
| <i>c1500 tr/rose hip/bioflavonoid oral tablet extended release 1500-50-50 mg</i> | Ester-C          | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b>         | <b>Restrictions</b> |
|---|--------------------------|---------------------|
| <i>c1500/rose hips/bioflavonoid oral tablet extended release</i>        | Ester-C                  | OTC                 |
| <b>CEMILL PLUS ORAL TABLET</b>  | anti-allergy             | OTC                 |
| <i>cemill/bioflavonoids oral tablet</i>                                 | Easy-C                   | OTC                 |
| <b>DAFLONEX-XL ORAL TABLET EXTENDED RELEASE</b>                         | c complex                | OTC                 |
| <i>easy-c oral tablet 500 mg</i>  | Easy-C                   | OTC                 |
| <i>ester-c oral tablet , 500-550 mg</i>                                 | Easy-C                   | OTC                 |
| <i>ester-c oral tablet extended release</i>                             | Ester-C                  | OTC                 |
| <i>flexgen oral tablet</i>  | Easy-C                   | OTC                 |
| <b>FRUIT C 200 ORAL TABLET CHEWABLE</b>                                 |                          | OTC                 |
| <i>hi c-500 oral tablet 500-100-50 mg</i>                               | Easy-C                   | OTC                 |
| <i>pan-c 500/bioflavonoids oral tablet</i>                              | Easy-C                   | OTC                 |
| <b>PERIDIN-C ORAL TABLET 200-50-150 MG</b>                              | anti-allergy             | OTC                 |
| <i>ra vitamin c cr oral tablet extended release</i>                     | Ester-C                  | OTC                 |
| <i>span c oral tablet</i>   | Easy-C                   | OTC                 |
| <b>SUPER C-500 COMPLEX ORAL TABLET EXTENDED RELEASE</b>                 | c complex                | OTC                 |
| <i>super c-500 oral tablet</i>  | Easy-C                   | OTC                 |
| <i>super-c 1000 oral tablet</i>   | Easy-C                   | OTC                 |
| <i>tri super flavons oral tablet</i>                                    | Easy-C                   | OTC                 |
| <i>vasoflex hd oral tablet</i>  | Easy-C                   | OTC                 |
| <i>vasoflex oral tablet</i>   | Easy-C                   | OTC                 |
| <i>vita c/bioflavonoids/rose hips oral tablet 1000-30-18 mg</i>         | Easy-C                   | OTC                 |
| <i>vitamin c er oral tablet extended release 1000-100 mg</i>            | Ester-C                  | OTC                 |
| <b>VITAMIN C ORAL TABLET CHEWABLE</b>                                   |                          | OTC                 |
| <i>vitamin c plus oral tablet 1000 mg, 500 mg</i>                       | Easy-C                   | OTC                 |
| <i>vitamin c/bioflavonoids oral tablet 1000-25 mg</i>                   | Easy-C                   | OTC                 |
| <i>vitamin c-bioflavonoids oral tablet extended release 1000-100 mg</i> | Ester-C                  | OTC                 |
| <b>*Brewers Yeast***</b>  |                          |                     |
| <i>brewers yeast oral tablet , 487.5 mg, 500 mg</i>                     |                          | OTC                 |
| <b>*Multiple Vitamins W/ Calcium***</b>                                 |                          |                     |
| <i>eql one daily womens oral tablet</i>                                 | One-A-Day Womens Formula | OTC                 |

| <b>Formulary Drug Name</b>                        | <b>Reference</b>              | <b>Restrictions</b> |
|---|-------------------------------|---------------------|
| <i>essential one daily multivit oral tablet</i>   | One-A-Day Womens Formula      | OTC                 |
| <i>gnp one daily womens health oral tablet</i>    | One-A-Day Womens Formula      | OTC                 |
| <i>hm one daily essential oral tablet</i>         | One-A-Day Womens Formula      | OTC                 |
| <i>hm vita-mini multi complete oral tablet</i>    | One-A-Day Womens Formula      | OTC                 |
| <i>multi-day/calcium/extra iron oral tablet</i>   | One-A-Day Womens Formula      | OTC                 |
| <b>ONE-A-DAY WOMENS FORMULA ORAL TABLET</b>       | eql one daily womens          | OTC                 |
| <i>signacal oral tablet</i>                       | One-A-Day Womens Formula      | OTC                 |
| <b>SM ONE DAILY ESSENTIAL ORAL TABLET</b>         | eql one daily womens          | OTC                 |
| <i>tgt daily multivitamin womens oral tablet</i>  | One-A-Day Womens Formula      | OTC                 |
| <b>*Multiple Vitamins W/ Iron***</b>              |                               |                     |
| <i>daily multiple vitamins/iron oral tablet</i>   | Tab-A-Vite/Iron/Beta Carotene | OTC                 |
| <i>daily vitamin formula+iron oral tablet</i>     | Tab-A-Vite/Iron/Beta Carotene | OTC                 |
| <i>daily vite multivitamin/iron oral tablet</i>   | Tab-A-Vite/Iron/Beta Carotene | OTC                 |
| <i>daily-vitamin/iron oral tablet</i>             | Tab-A-Vite/Iron/Beta Carotene | OTC                 |
| <i>daily-vite/iron/beta-carotene oral tablet</i>  | Tab-A-Vite/Iron/Beta Carotene | OTC                 |
| <i>gnp one daily plus iron oral tablet</i>        | Tab-A-Vite/Iron/Beta Carotene | OTC                 |
| <i>hm one daily/iron oral tablet</i>              | Tab-A-Vite/Iron/Beta Carotene | OTC                 |
| <i>multi-day plus iron oral tablet</i>            | Tab-A-Vite/Iron/Beta Carotene | OTC                 |
| <i>multiple vitamins/iron oral tablet</i>         | Tab-A-Vite/Iron/Beta Carotene | OTC                 |
| <i>multi-vitamin/iron oral tablet</i>             | Tab-A-Vite/Iron/Beta Carotene | OTC                 |
| <i>once daily/iron oral tablet</i>                | Tab-A-Vite/Iron/Beta Carotene | OTC                 |
| <i>one daily multivitamin/iron oral tablet</i>    | Tab-A-Vite/Iron/Beta Carotene | OTC                 |
| <i>one-daily/iron oral tablet</i>                 | Tab-A-Vite/Iron/Beta Carotene | OTC                 |
| <i>qc daily multivitamins/iron oral tablet</i>    | Tab-A-Vite/Iron/Beta Carotene | OTC                 |
| <i>ra one daily multi-vit plus fe oral tablet</i> | Tab-A-Vite/Iron/Beta Carotene | OTC                 |
| <i>sm multiple vitamins/iron oral tablet</i>      | Tab-A-Vite/Iron/Beta Carotene | OTC                 |
| <i>stress b complex/iron oral tablet</i>          | Tab-A-Vite/Iron/Beta Carotene | OTC                 |
| <i>stress formula/iron oral tablet</i>            | Tab-A-Vite/Iron/Beta Carotene | OTC                 |
| <i>tab-a-vite/iron oral tablet</i>                | Tab-A-Vite/Iron/Beta Carotene | OTC                 |
| <b>*Multiple Vitamins W/ Minerals***</b>          |                               |                     |
| <i>50+ adult eye health oral capsule</i>          | Amoryn Mood Booster           | OTC                 |
| <i>a thru z advanced adult oral tablet</i>        | Cerovite Senior               | OTC                 |
| <i>a thru z advanced oral tablet</i>              | Cerovite Senior               | OTC                 |
| <i>a thru z high potency oral tablet</i>          | Cerovite Senior               | OTC                 |
| <i>a thru z select 50+ advanced oral tablet</i>   | Cerovite Senior               | OTC                 |
| <i>a thru z select 50+ mens oral tablet</i>       | Cerovite Senior               | OTC                 |



| <b>Formulary Drug Name</b>                        | <b>Reference</b>      | <b>Restrictions</b> |
|---|-----------------------|---------------------|
| <i>a thru z select advanced oral tablet</i>       | Cerovite Senior       | OTC                 |
| <i>a thru z select oral tablet</i>                | Cerovite Senior       | OTC                 |
| <i>a thru z select oral tablet chewable</i>       | Advanced Multi EA     | OTC                 |
| <i>a thru z select ultimate women oral tablet</i> | Cerovite Senior       | OTC                 |
| <i>a thru z ultimate mens oral tablet</i>         | Cerovite Senior       | OTC                 |
| <i>abc plus oral tablet</i>                       | Cerovite Senior       | OTC                 |
| <i>abc plus senior adults 50+ oral tablet</i>     | Cerovite Senior       | OTC                 |
| <i>abc plus senior oral tablet</i>                | Cerovite Senior       | OTC                 |
| <i>actical oral capsule</i>                       | Amoryn Mood Booster   | OTC                 |
| <i>adult gummy oral tablet chewable</i>           | Advanced Multi EA     | OTC                 |
| <i>advanced eye health oral capsule</i>           | Amoryn Mood Booster   | OTC                 |
| <i>advanced multi ea oral tablet chewable</i>     | Advanced Multi EA     | OTC                 |
| <i>airborne gummies oral tablet chewable</i>      | Advanced Multi EA     | OTC                 |
| <i>airborne oral tablet chewable</i>              | Advanced Multi EA     | OTC                 |
| <i>amoryn mood booster oral capsule</i>           | Amoryn Mood Booster   | OTC                 |
| <i>antioxidant a/c/e/selenium oral tablet</i>     | Cerovite Senior       | OTC                 |
| <i>anti-oxidant formula oral capsule</i>          | Amoryn Mood Booster   | OTC                 |
| <i>antioxidant formula oral tablet</i>            | Cerovite Senior       | OTC                 |
| <i>antioxidant formula/minerals oral capsule</i>  | Amoryn Mood Booster   | OTC                 |
| <i>antioxidant oral capsule</i>                   | Amoryn Mood Booster   | OTC                 |
| <i>antioxidant protection formula oral tablet</i> | Cerovite Senior       | OTC                 |
| <i>antioxidant vitamins oral tablet</i>           | Cerovite Senior       | OTC                 |
| <i>antioxin 4000 oral capsule</i>                 | Amoryn Mood Booster   | OTC                 |
| <i>biocel oral tablet</i>                         | Cerovite Senior       |                     |
| <i>biotin plus/calcium/vit d3 oral tablet</i>     | Cerovite Senior       | OTC                 |
| <i>body/hair/skin/nails oral capsule</i>          | Amoryn Mood Booster   | OTC                 |
| <i>b-plex plus oral tablet</i>                    | Cerovite Senior       |                     |
| <i>bprotected multi-vite oral liquid</i>          | BProtected Multi-Vite | OTC                 |
| <i>b-redi/red hearts/red roosters oral tablet</i> | Cerovite Senior       | OTC                 |
| <i>carravite oral tablet</i>                      | Cerovite Senior       | OTC                 |
| <i>centamin oral liquid</i>                       | BProtected Multi-Vite | OTC                 |
| <i>centavite a-z complete-mineral oral tablet</i> | Cerovite Senior       | OTC                 |
| <i>centavite oral liquid</i>                      | BProtected Multi-Vite | OTC                 |
| <i>centravites 50 plus oral tablet</i>            | Cerovite Senior       | OTC                 |
| <i>centravites oral tablet</i>                    | Cerovite Senior       | OTC                 |
| <b>CENTRUM FLAVOR BURST DRINK ORAL PACKET</b>     | multi for her         | OTC                 |
| <i>century mature oral tablet</i>                 | Cerovite Senior       | OTC                 |



| <b>Formulary Drug Name</b>                           | <b>Reference</b>            | <b>Restrictions</b> |
|--|-----------------------------|---------------------|
| <i>century oral tablet</i>                           | Cerovite Senior             | OTC                 |
| <i>cerovite advanced formula oral tablet</i>         | Cerovite Senior             | OTC                 |
| <i>cerovite senior oral tablet</i>                   | Cerovite Senior             | OTC                 |
| <i>certa plus oral tablet</i>                        | Cerovite Senior             | OTC                 |
| <i>certagen oral tablet</i>                          | Cerovite Senior             | OTC                 |
| <i>certavite/antioxidants oral tablet</i>            | Cerovite Senior             | OTC                 |
| <i>companion oral tablet</i>                         | Cerovite Senior             | OTC                 |
| <i>compete oral tablet</i>                           | Cerovite Senior             | OTC                 |
| <i>complere oral tablet</i>                          | Cerovite Senior             | OTC                 |
| <i>complete daily/lutein oral tablet</i>             | Cerovite Senior             | OTC                 |
| <i>complete energy oral tablet</i>                   | Cerovite Senior             | OTC                 |
| <i>complete multivitamin/mineral oral liquid</i>     | BProtected Multi-Vite       | OTC                 |
| <i>complete oral tablet</i>                          | Cerovite Senior             | OTC                 |
| <i>complete pms support complex oral capsule</i>     | Amoryn Mood Booster         | OTC                 |
| <i>complete senior oral tablet</i>                   | Cerovite Senior             | OTC                 |
| <i>complete womens oral tablet</i>                   | Cerovite Senior             | OTC                 |
| <b>CONCEPTIONXR MOTILITY SUPPORT ORAL</b>            | cvs diabetes health support | OTC                 |
| <i>coral calcium plus oral capsule</i>               | Amoryn Mood Booster         | OTC                 |
| <i>corvite free oral tablet</i>                      | Cerovite Senior             |                     |
| <i>cvs daily gummies oral tablet chewable</i>        | Advanced Multi EA           | OTC                 |
| <i>cvs daily multiple for men oral tablet</i>        | Cerovite Senior             | OTC                 |
| <i>cvs daily multiple for women oral tablet</i>      | Cerovite Senior             | OTC                 |
| <i>cvs daily multiple women 50+ oral tablet</i>      | Cerovite Senior             | OTC                 |
| <b>CVS DIABETES HEALTH SUPPORT ORAL</b>              | cvs diabetes health support | OTC                 |
| <i>cvs mens daily gummies oral tablet chewable</i>   | Advanced Multi EA           | OTC                 |
| <i>cvs spectravite advanced oral tablet</i>          | Cerovite Senior             | OTC                 |
| <i>cvs spectravite senior oral tablet</i>            | Cerovite Senior             | OTC                 |
| <i>cvs spectravite ultra mens oral tablet</i>        | Cerovite Senior             | OTC                 |
| <i>cvs spectravite womens senior oral tablet</i>     | Cerovite Senior             | OTC                 |
| <i>cvs womens active daily oral tablet</i>           | Cerovite Senior             | OTC                 |
| <i>cvs womens daily gummies oral tablet chewable</i> | Advanced Multi EA           | OTC                 |
| <i>daily betic oral tablet</i>                       | Cerovite Senior             | OTC                 |
| <i>daily combo multi vitamins oral tablet</i>        | Cerovite Senior             | OTC                 |
| <b>DAILY HEART HEALTH SUPPORT ORAL</b>               | cvs diabetes health support | OTC                 |
| <i>daily mens health formula oral tablet</i>         | Cerovite Senior             | OTC                 |

| <b>Formulary Drug Name</b>                        | <b>Reference</b>            | <b>Restrictions</b> |
|---|-----------------------------|---------------------|
| <i>daily multi 50+ oral tablet</i>                | Cerovite Senior             | OTC                 |
| <i>daily multi oral tablet</i>                    | Cerovite Senior             | OTC                 |
| <i>daily multiple vitamins/min oral tablet</i>    | Cerovite Senior             | OTC                 |
| <i>daily multivitamin oral capsule</i>            | Amoryn Mood Booster         | OTC                 |
| <b>DAILY PAK MAXIMUM MULTIVITAMIN ORAL</b>        | cvs diabetes health support | OTC                 |
| <i>daily vitamin formula+minerals oral tablet</i> | Cerovite Senior             | OTC                 |
| <i>daily vitamin plus oral capsule</i>            | Amoryn Mood Booster         | OTC                 |
| <i>daily womens health formula oral tablet</i>    | Cerovite Senior             | OTC                 |
| <i>daily-vitamin maximum formula oral tablet</i>  | Cerovite Senior             | OTC                 |
| <i>diabetes health formula oral tablet</i>        | Cerovite Senior             | OTC                 |
| <b>DIABETES HEALTH ORAL</b>                       | cvs diabetes health support | OTC                 |
| <b>DIABETES SUPPORT ORAL</b>                      | cvs diabetes health support | OTC                 |
| <i>dialyvite 800/ultra d oral tablet</i>          | Cerovite Senior             | OTC                 |
| <i>doctors choice men oral tablet</i>             | Cerovite Senior             | OTC                 |
| <i>dry eye formula oral capsule</i>               | Amoryn Mood Booster         | OTC                 |
| <b>EMERGEN-C BLUE ORAL PACKET</b>                 | multi for her               | OTC                 |
| <b>EMERGEN-C FIVE ORAL PACKET</b>                 | multi for her               | OTC                 |
| <b>EMERGEN-C HEART HEALTH ORAL PACKET</b>         | multi for her               | OTC                 |
| <b>EMERGEN-C IMMUNE ORAL PACKET</b>               | multi for her               | OTC                 |
| <b>EMERGEN-C IMMUNE PLUS ORAL PACKET</b>          | multi for her               | OTC                 |
| <b>EMERGEN-C IMMUNE+WARMERS ORAL PACKET</b>       | multi for her               | OTC                 |
| <b>EMERGEN-C JOINT HEALTH ORAL PACKET</b>         | multi for her               | OTC                 |
| <b>EMERGEN-C KIDZ ORAL PACKET</b>                 | multi for her               | OTC                 |
| <b>EMERGEN-C MSM LITE ORAL PACKET</b>             | multi for her               | OTC                 |
| <b>EMERGEN-C PINK ORAL PACKET</b>                 | multi for her               | OTC                 |
| <b>EMERGEN-C SUPER FRUIT ORAL PACKET</b>          | multi for her               | OTC                 |
| <b>EMERGEN-C VITAMIN C LITE ORAL PACKET</b>       | multi for her               | OTC                 |
| <b>EMERGEN-C VITAMIN C ORAL PACKET</b>            | multi for her               | OTC                 |
| <b>EMERGEN-C VITAMIN D/CALCIUM ORAL PACKET</b>    | multi for her               | OTC                 |
| <b>ENERGY BOOSTER ORAL PACKET</b>                 | multi for her               | OTC                 |
| <i>enviro-stress oral tablet</i>                  | Cerovite Senior             | OTC                 |

| <b>Formulary Drug Name</b>                        | <b>Reference</b>    | <b>Restrictions</b> |
|---|---------------------|---------------------|
| <i>eq complete multivit adult 50+ oral tablet</i> | Cerovite Senior     | OTC                 |
| <i>eq one daily womens health oral tablet</i>     | Cerovite Senior     | OTC                 |
| <i>eq one daily womens pro-active oral tablet</i> | Cerovite Senior     | OTC                 |
| <i>eq vision formula 50+ oral capsule</i>         | Amoryn Mood Booster | OTC                 |
| <i>eql century mature men 50+ oral tablet</i>     | Cerovite Senior     | OTC                 |
| <i>eql century mature oral tablet</i>             | Cerovite Senior     | OTC                 |
| <i>eql century mature women 50+ oral tablet</i>   | Cerovite Senior     | OTC                 |
| <i>eql century oral tablet</i>                    | Cerovite Senior     | OTC                 |
| <i>eql one daily mens 50+ advance oral tablet</i> | Cerovite Senior     | OTC                 |
| <i>eql one daily mens health oral tablet</i>      | Cerovite Senior     | OTC                 |
| <i>eql one daily womens 50+ adv oral tablet</i>   | Cerovite Senior     | OTC                 |
| <i>eql vision formula oral tablet</i>             | Cerovite Senior     | OTC                 |
| <i>essentia oral tablet</i>                       | Cerovite Senior     | OTC                 |
| <i>essential balance oral tablet</i>              | Cerovite Senior     | OTC                 |
| <i>eye vitamins oral capsule</i>                  | Amoryn Mood Booster | OTC                 |
| <i>eyeprotect oral tablet</i>                     | Cerovite Senior     | OTC                 |
| <i>eye-vites oral tablet</i>                      | Cerovite Senior     | OTC                 |
| <i>gerivite complete oral tablet</i>              | Cerovite Senior     | OTC                 |
| <i>glucoten oral capsule</i>                      | Amoryn Mood Booster | OTC                 |
| <i>gnp century adult formula oral tablet</i>      | Cerovite Senior     | OTC                 |
| <i>gnp century adults 50+ senior oral tablet</i>  | Cerovite Senior     | OTC                 |
| <i>gnp century cardio health oral tablet</i>      | Cerovite Senior     | OTC                 |
| <i>gnp century mature oral tablet</i>             | Cerovite Senior     | OTC                 |
| <i>gnp century oral tablet</i>                    | Cerovite Senior     | OTC                 |
| <i>gnp century ultimate mens oral tablet</i>      | Cerovite Senior     | OTC                 |
| <i>gnp century ultimate womens oral tablet</i>    | Cerovite Senior     | OTC                 |
| <i>gnp diabetic support formula oral tablet</i>   | Cerovite Senior     | OTC                 |
| <i>gnp hair/skin/nails oral tablet</i>            | Cerovite Senior     | OTC                 |
| <i>gnp healthy eyes oral tablet</i>               | Cerovite Senior     | OTC                 |
| <i>gnp healthy eyes supervision oral capsule</i>  | Amoryn Mood Booster | OTC                 |
| <i>gnp maximum one daily oral tablet</i>          | Cerovite Senior     | OTC                 |
| <i>gnp mega multi for men oral tablet</i>         | Cerovite Senior     | OTC                 |
| <i>gnp mega multi for women oral tablet</i>       | Cerovite Senior     | OTC                 |
| <i>gnp one daily maximum oral tablet</i>          | Cerovite Senior     | OTC                 |
| <i>gnp one daily mens 50+advanced oral tablet</i> | Cerovite Senior     | OTC                 |
| <i>gnp one daily mens health 50+ oral tablet</i>  | Cerovite Senior     | OTC                 |
| <i>gnp one daily mens/lycopene oral tablet</i>    | Cerovite Senior     | OTC                 |
| <i>gnp one daily womens 50+ oral tablet</i>       | Cerovite Senior     | OTC                 |

| <b>Formulary Drug Name</b>                                  | <b>Reference</b>            | <b>Restrictions</b> |
|---|-----------------------------|---------------------|
| <i>gnp one daily womens oral tablet</i>                     | Cerovite Senior             | OTC                 |
| <i>gnp opti-vitamins oral tablet</i>                        | Cerovite Senior             | OTC                 |
| <i>gnp therapeutic-m oral tablet</i>                        | Cerovite Senior             | OTC                 |
| <i>gnp womens one daily oral tablet</i>                     | Cerovite Senior             | OTC                 |
| <i>hair formula extra strength oral tablet</i>              | Cerovite Senior             | OTC                 |
| <i>hair skin and nails formula oral tablet</i>              | Cerovite Senior             | OTC                 |
| <i>hair skin nails oral capsule</i>                         | Amoryn Mood Booster         | OTC                 |
| <i>hair vitamins oral tablet</i>                            | Cerovite Senior             | OTC                 |
| <i>hair/skin/nails oral capsule</i>                         | Amoryn Mood Booster         | OTC                 |
| <i>hair/skin/nails oral tablet</i>                          | Cerovite Senior             | OTC                 |
| <i>hair/skin/nails/biotin oral tablet</i>                   | Cerovite Senior             | OTC                 |
| <i>healthy eyes oral tablet</i>                             | Cerovite Senior             | OTC                 |
| <i>healthy eyes/lutein oral tablet</i>                      | Cerovite Senior             | OTC                 |
| <i>hi-kovite 2-part formula oral tablet</i>                 | Cerovite Senior             | OTC                 |
| <i>hi-potency multi-vitamin oral tablet</i>                 | Cerovite Senior             | OTC                 |
| <i>hm antioxidant vitamins oral tablet</i>                  | Cerovite Senior             | OTC                 |
| <i>hm complete 50+ oral tablet</i>                          | Cerovite Senior             | OTC                 |
| <i>hm complete oral tablet</i>                              | Cerovite Senior             | OTC                 |
| <i>hm complete women oral tablet</i>                        | Cerovite Senior             | OTC                 |
| <i>hm mens 50+ advanced one daily oral tablet</i>           | Cerovite Senior             | OTC                 |
| <i>hm multivitamin adult gummy oral tablet<br/>chewable</i> | Advanced Multi EA           | OTC                 |
| <i>hm womens 50+ advanced daily oral tablet</i>             | Cerovite Senior             | OTC                 |
| <i>icaps areds 2 oral capsule</i>                           | Amoryn Mood Booster         | OTC                 |
| <i>icaps lutein &amp; omega-3 oral capsule</i>              | Amoryn Mood Booster         | OTC                 |
| <i>icaps mv oral tablet</i>                                 | Cerovite Senior             | OTC                 |
| <i>icaps oral capsule</i>                                   | Amoryn Mood Booster         | OTC                 |
| <i>i-vite oral tablet</i>                                   | Cerovite Senior             | OTC                 |
| <i>i-vite protect oral tablet</i>                           | Cerovite Senior             | OTC                 |
| <i>kp adults 50+ daily formula oral tablet</i>              | Cerovite Senior             | OTC                 |
| <i>kp adults daily formula oral tablet</i>                  | Cerovite Senior             | OTC                 |
| <i>kp mens 50+ daily formula oral tablet</i>                | Cerovite Senior             | OTC                 |
| <i>kp mens daily formula oral tablet</i>                    | Cerovite Senior             | OTC                 |
| <b>KP MENS DAILY PACK ORAL</b>                              | cvs diabetes health support | OTC                 |
| <i>kp vision formula oral tablet</i>                        | Cerovite Senior             | OTC                 |
| <i>kp vision formula/lutein oral tablet</i>                 | Cerovite Senior             | OTC                 |
| <i>kp womens 50+ daily formula oral tablet</i>              | Cerovite Senior             | OTC                 |
| <i>kp womens daily formula oral tablet</i>                  | Cerovite Senior             | OTC                 |

| <b>Formulary Drug Name</b>                                | <b>Reference</b>            | <b>Restrictions</b> |
|---|-----------------------------|---------------------|
| <b>KP WOMENS DAILY ORAL</b>                               | cvs diabetes health support | OTC                 |
| <b>LIFE PACK MENS ORAL</b>                                | cvs diabetes health support | OTC                 |
| <b>LIFE PACK WOMENS ORAL</b>                              | cvs diabetes health support | OTC                 |
| <i>lysiplex plus oral liquid</i>                          | BProtected Multi-Vite       | OTC                 |
| <i>lysiplex plus oral tablet</i>                          | Cerovite Senior             |                     |
| <i>macular health formula oral capsule</i>                | Amoryn Mood Booster         | OTC                 |
| <i>macuvite eye care oral tablet</i>                      | Cerovite Senior             | OTC                 |
| <i>macuvite oral tablet</i>                               | Cerovite Senior             | OTC                 |
| <i>macuvite/lutein oral tablet</i>                        | Cerovite Senior             | OTC                 |
| <i>magnum-75 oral tablet extended release</i>             | Endur-VM                    | OTC                 |
| <b>MAXIMIN PACK ORAL PACKET</b>                           | multi for her               | OTC                 |
| <i>maximum blue label oral tablet</i>                     | Cerovite Senior             | OTC                 |
| <i>maximum daily green oral tablet</i>                    | Cerovite Senior             | OTC                 |
| <i>maximum green label oral tablet</i>                    | Cerovite Senior             | OTC                 |
| <i>maximum red label oral tablet</i>                      | Cerovite Senior             | OTC                 |
| <i>mediplex plus oral tablet</i>                          | Cerovite Senior             | OTC                 |
| <i>mega vm-80 oral tablet</i>                             | Cerovite Senior             | OTC                 |
| <i>mega-marathon 100 tr oral tablet extended release</i>  | Endur-VM                    | OTC                 |
| <i>meijer advanced formula oral tablet</i>                | Cerovite Senior             | OTC                 |
| <i>mens daily formula/lycopene oral capsule</i>           | Amoryn Mood Booster         | OTC                 |
| <i>mens hair formula ultra man oral tablet</i>            | Cerovite Senior             | OTC                 |
| <i>mens life pack oral tablet</i>                         | Cerovite Senior             | OTC                 |
| <b>MENS PACK ORAL</b>                                     | cvs diabetes health support | OTC                 |
| <b>MH MACULAR HEALTH ORAL</b>                             | cvs diabetes health support | OTC                 |
| <i>milltrium advanced formula oral tablet</i>             | Cerovite Senior             | OTC                 |
| <i>milltrium cardio oral tablet</i>                       | Cerovite Senior             | OTC                 |
| <i>milltrium senior oral tablet</i>                       | Cerovite Senior             | OTC                 |
| <i>multi + omega-3 adult gummies oral tablet chewable</i> | Advanced Multi EA           | OTC                 |
| <i>multi adult gummies oral tablet chewable</i>           | Advanced Multi EA           | OTC                 |
| <i>multi complete oral capsule</i>                        | Amoryn Mood Booster         | OTC                 |
| <i>multi complete/iron oral tablet</i>                    | Cerovite Senior             | OTC                 |
| <i>multi for her 50+ oral capsule</i>                     | Amoryn Mood Booster         | OTC                 |
| <i>multi for her 50+ oral tablet</i>                      | Cerovite Senior             | OTC                 |
| <i>multi for her oral capsule</i>                         | Amoryn Mood Booster         | OTC                 |
| <b>MULTI FOR HER ORAL PACKET</b>                          | multi for her               | OTC                 |
| <i>multi for her oral tablet</i>                          | Cerovite Senior             | OTC                 |
| <i>multi for him 50+ oral tablet</i>                      | Cerovite Senior             | OTC                 |

| <b>Formulary Drug Name</b>                                | <b>Reference</b>      | <b>Restrictions</b> |
|---|-----------------------|---------------------|
| <i>multi for him oral capsule</i>                         | Amoryn Mood Booster   | OTC                 |
| <b>MULTI FOR HIM ORAL PACKET</b>                          | multi for her         | OTC                 |
| <i>multi for him oral tablet</i>                          | Cerovite Senior       | OTC                 |
| <i>multi vitamin/minerals oral tablet</i>                 | Cerovite Senior       | OTC                 |
| <i>multi-day plus minerals oral tablet</i>                | Cerovite Senior       | OTC                 |
| <i>multi-day weight trim oral tablet</i>                  | Cerovite Senior       | OTC                 |
| <i>multi-lean oral tablet</i>                             | Cerovite Senior       | OTC                 |
| <i>multilex oral tablet</i>                               | Cerovite Senior       | OTC                 |
| <i>multilex-t&amp;m oral tablet</i>                       | Cerovite Senior       | OTC                 |
| <i>multimineral plus oral tablet</i>                      | Cerovite Senior       | OTC                 |
| <i>multiple vit/minerals/no iron oral tablet</i>          | Cerovite Senior       | OTC                 |
| <i>multiple vitamins/womens oral tablet</i>               | Cerovite Senior       | OTC                 |
| <i>multivitamin &amp; mineral oral liquid</i>             | BProtected Multi-Vite | OTC                 |
| <i>multivitamin adults 50+ oral tablet</i>                | Cerovite Senior       | OTC                 |
| <i>multivitamin adults oral tablet</i>                    | Cerovite Senior       | OTC                 |
| <i>multivitamin gummies adult oral tablet chewable</i>    | Advanced Multi EA     | OTC                 |
| <i>multivitamin gummies mens oral tablet chewable</i>     | Advanced Multi EA     | OTC                 |
| <i>multi-vitamin gummies oral tablet chewable</i>         | Advanced Multi EA     | OTC                 |
| <i>multivitamin gummies womens oral tablet chewable</i>   | Advanced Multi EA     | OTC                 |
| <i>multivitamin men 50+ oral tablet</i>                   | Cerovite Senior       | OTC                 |
| <i>multi-vitamin menopausal oral tablet</i>               | Cerovite Senior       | OTC                 |
| <i>multivitamin oral liquid</i>                           | BProtected Multi-Vite | OTC                 |
| <i>multivitamin women 50+ oral tablet</i>                 | Cerovite Senior       | OTC                 |
| <i>multivitamin women oral tablet</i>                     | Cerovite Senior       | OTC                 |
| <i>multivitamin/extra vitamin d3 oral tablet chewable</i> | Advanced Multi EA     | OTC                 |
| <i>multi-vitamin/minerals oral tablet</i>                 | Cerovite Senior       | OTC                 |
| <i>multivitamins/minerals adult oral liquid</i>           | BProtected Multi-Vite | OTC                 |
| <i>myamulti oral tablet</i>                               | Cerovite Senior       | OTC                 |
| <i>my-vitalife oral capsule</i>                           | Amoryn Mood Booster   | OTC                 |
| <i>nutrifac zx oral tablet</i>                            | Cerovite Senior       |                     |
| <i>ocutabs oral tablet</i>                                | Cerovite Senior       | OTC                 |
| <i>ocutabs-lutein oral tablet</i>                         | Cerovite Senior       | OTC                 |
| <i>ocuvite extra oral tablet</i>                          | Cerovite Senior       | OTC                 |
| <i>ocuvite eye + multi oral tablet</i>                    | Cerovite Senior       | OTC                 |
| <i>ocuvite eye health formula oral capsule</i>            | Amoryn Mood Booster   | OTC                 |



| <b>Formulary Drug Name</b>                             | <b>Reference</b>            | <b>Restrictions</b> |
|--|-----------------------------|---------------------|
| <i>ocuvite eye health gummies oral tablet chewable</i> | Advanced Multi EA           | OTC                 |
| <i>ocuvite-lutein oral tablet</i>                      | Cerovite Senior             | OTC                 |
| <i>one daily 50 plus oral tablet</i>                   | Cerovite Senior             | OTC                 |
| <i>one daily adults 50+ oral tablet</i>                | Cerovite Senior             | OTC                 |
| <i>one daily calcium/iron oral tablet</i>              | Cerovite Senior             | OTC                 |
| <i>one daily complete for men oral tablet</i>          | Cerovite Senior             | OTC                 |
| <i>one daily complete oral tablet</i>                  | Cerovite Senior             | OTC                 |
| <i>one daily for men 50+ advanced oral tablet</i>      | Cerovite Senior             | OTC                 |
| <i>one daily for men/lycopene oral tablet</i>          | Cerovite Senior             | OTC                 |
| <i>one daily for women 50+ adv oral tablet</i>         | Cerovite Senior             | OTC                 |
| <i>one daily for women oral tablet</i>                 | Cerovite Senior             | OTC                 |
| <i>one daily healthy weight adv oral tablet</i>        | Cerovite Senior             | OTC                 |
| <i>one daily healthy weight oral tablet</i>            | Cerovite Senior             | OTC                 |
| <i>one daily maximum oral tablet</i>                   | Cerovite Senior             | OTC                 |
| <i>one daily mens 50+ multivit oral tablet</i>         | Cerovite Senior             | OTC                 |
| <i>one daily mens 50+/lycopene oral tablet</i>         | Cerovite Senior             | OTC                 |
| <i>one daily mens health oral tablet</i>               | Cerovite Senior             | OTC                 |
| <i>one daily mens oral tablet</i>                      | Cerovite Senior             | OTC                 |
| <i>one daily multivit/iron-free oral tablet</i>        | Cerovite Senior             | OTC                 |
| <i>one daily multivitamin men oral tablet</i>          | Cerovite Senior             | OTC                 |
| <i>one daily multivitamin women oral tablet</i>        | Cerovite Senior             | OTC                 |
| <i>one daily plus iron oral tablet</i>                 | Cerovite Senior             | OTC                 |
| <i>one daily plus minerals oral tablet</i>             | Cerovite Senior             | OTC                 |
| <i>one daily womens 50 plus oral tablet</i>            | Cerovite Senior             | OTC                 |
| <i>one daily womens 50+ oral tablet</i>                | Cerovite Senior             | OTC                 |
| <i>one daily womens oral tablet</i>                    | Cerovite Senior             | OTC                 |
| <i>one daily/minerals oral tablet</i>                  | Cerovite Senior             | OTC                 |
| <i>one-a-day teen advantage/her oral tablet</i>        | Cerovite Senior             | OTC                 |
| <i>optic-vites oral tablet</i>                         | Cerovite Senior             | OTC                 |
| <i>optic-vites with lutein oral tablet</i>             | Cerovite Senior             | OTC                 |
| <i>optimum pms oral tablet</i>                         | Cerovite Senior             | OTC                 |
| <i>osteoprime ultra oral tablet</i>                    | Cerovite Senior             | OTC                 |
| <b>PA MENS 50 PLUS VITAPAK ORAL</b>                    | cvs diabetes health support | OTC                 |
| <b>PA MENS VITAPAK ORAL</b>                            | cvs diabetes health support | OTC                 |
| <b>PA WOMENS 50 PLUS VITAPAK ORAL</b>                  | cvs diabetes health support | OTC                 |
| <b>PA WOMENS VITAPAK ORAL</b>                          | cvs diabetes health support | OTC                 |
| <b>PREMIUM PACKETS ORAL</b>                            | cvs diabetes health support | OTC                 |



| <b>Formulary Drug Name</b>                           | <b>Reference</b>            | <b>Restrictions</b> |
|--|-----------------------------|---------------------|
| <b>PRESCRIPTIVE FORMULAS MENS ORAL</b>               | cvs diabetes health support | OTC                 |
| <b>PRESCRIPTIVE FORMULAS WOMENS ORAL</b>             | cvs diabetes health support | OTC                 |
| <i>prevent oral capsule</i>                          | Amoryn Mood Booster         | OTC                 |
| <i>prosight oral capsule</i>                         | Amoryn Mood Booster         | OTC                 |
| <i>prosight oral tablet</i>                          | Cerovite Senior             | OTC                 |
| <i>px advanced formula multivits oral tablet</i>     | Cerovite Senior             | OTC                 |
| <i>px complete senior multivits oral tablet</i>      | Cerovite Senior             | OTC                 |
| <i>px mens multivitamins oral tablet</i>             | Cerovite Senior             | OTC                 |
| <i>qc daily multivit/multimineral oral tablet</i>    | Cerovite Senior             | OTC                 |
| <i>qc mens daily multivitamin oral tablet</i>        | Cerovite Senior             | OTC                 |
| <i>qc multi-vite 50 &amp; over oral tablet</i>       | Cerovite Senior             | OTC                 |
| <i>qc multi-vite oral tablet</i>                     | Cerovite Senior             | OTC                 |
| <i>qc therin-m oral tablet</i>                       | Cerovite Senior             | OTC                 |
| <i>qc womens daily multivitamin oral tablet</i>      | Cerovite Senior             | OTC                 |
| <i>quintabs-m oral tablet</i>                        | Cerovite Senior             | OTC                 |
| <i>ra central-vite energy oral tablet</i>            | Cerovite Senior             | OTC                 |
| <i>ra central-vite mens mature oral tablet</i>       | Cerovite Senior             | OTC                 |
| <i>ra central-vite oral tablet</i>                   | Cerovite Senior             | OTC                 |
| <i>ra central-vite select oral tablet</i>            | Cerovite Senior             | OTC                 |
| <i>ra central-vite senior oral tablet</i>            | Cerovite Senior             | OTC                 |
| <i>ra central-vite womens mature oral tablet</i>     | Cerovite Senior             | OTC                 |
| <i>ra central-vite/antioxidants oral tablet</i>      | Cerovite Senior             | OTC                 |
| <b>RA ESSENCE-C ORAL PACKET</b>                      | multi for her               | OTC                 |
| <i>ra hair/skin/nails oral tablet</i>                | Cerovite Senior             | OTC                 |
| <i>ra mature womens dietary supp oral tablet</i>     | Cerovite Senior             | OTC                 |
| <i>ra one daily energy formula oral tablet</i>       | Cerovite Senior             | OTC                 |
| <i>ra one daily gummy vites oral tablet chewable</i> | Advanced Multi EA           | OTC                 |
| <i>ra one daily maximum oral tablet</i>              | Cerovite Senior             | OTC                 |
| <i>ra one daily mens 50+ w/vit d3 oral tablet</i>    | Cerovite Senior             | OTC                 |
| <i>ra one daily mens multi oral tablet</i>           | Cerovite Senior             | OTC                 |
| <i>ra one daily mens/vit d-3 oral tablet</i>         | Cerovite Senior             | OTC                 |
| <i>ra one daily womens oral tablet</i>               | Cerovite Senior             | OTC                 |
| <i>ra stress formula advanced oral tablet</i>        | Cerovite Senior             | OTC                 |
| <i>ra stress formula energy oral tablet</i>          | Cerovite Senior             | OTC                 |
| <i>ra therapeutic m plus beta car oral tablet</i>    | Cerovite Senior             | OTC                 |
| <i>ra vision vite plus zinc oral tablet</i>          | Cerovite Senior             | OTC                 |
| <i>ra whole source dietary mature oral tablet</i>    | Cerovite Senior             | OTC                 |

| <b>Formulary Drug Name</b>                           | <b>Reference</b>      | <b>Restrictions</b> |
|--|-----------------------|---------------------|
| <i>ra whole source dietary men oral tablet</i>       | Cerovite Senior       | OTC                 |
| <i>ra whole source dietary oral tablet</i>           | Cerovite Senior       | OTC                 |
| <i>ra whole source for men oral tablet</i>           | Cerovite Senior       | OTC                 |
| <i>ra whole source womens oral tablet</i>            | Cerovite Senior       | OTC                 |
| <i>renaplex oral tablet</i>                          | Cerovite Senior       | OTC                 |
| <i>savision oral tablet</i>                          | Cerovite Senior       | OTC                 |
| <i>sclerex oral tablet</i>                           | Cerovite Senior       | OTC                 |
| <i>senior tabs oral tablet</i>                       | Cerovite Senior       | OTC                 |
| <i>sentry adult oral tablet</i>                      | Cerovite Senior       | OTC                 |
| <i>sentry oral tablet</i>                            | Cerovite Senior       | OTC                 |
| <i>sentry senior oral tablet</i>                     | Cerovite Senior       | OTC                 |
| <b>SKIN BEAUTY &amp; WELLNESS ORAL PACKET</b>        | multi for her         | OTC                 |
| <i>sm antioxidant vitamins oral tablet</i>           | Cerovite Senior       | OTC                 |
| <i>sm complete 50+ oral tablet</i>                   | Cerovite Senior       | OTC                 |
| <i>sm complete 50+ ultimate mens oral tablet</i>     | Cerovite Senior       | OTC                 |
| <i>sm complete 50+ ultimate women oral tablet</i>    | Cerovite Senior       | OTC                 |
| <i>sm complete advanced formula oral tablet</i>      | Cerovite Senior       | OTC                 |
| <i>sm complete oral tablet</i>                       | Cerovite Senior       | OTC                 |
| <i>sm complete senior formula oral tablet</i>        | Cerovite Senior       | OTC                 |
| <i>sm daily diet support oral tablet</i>             | Cerovite Senior       | OTC                 |
| <i>sm hair/skin/nails oral tablet</i>                | Cerovite Senior       | OTC                 |
| <i>sm opti-vitamins oral tablet</i>                  | Cerovite Senior       | OTC                 |
| <i>stress b-complex/c/zinc oral tablet</i>           | Cerovite Senior       | OTC                 |
| <i>stress formula/zinc oral tablet</i>               | Cerovite Senior       | OTC                 |
| <i>stresstabs advanced oral tablet</i>               | Cerovite Senior       | OTC                 |
| <i>sunvite active adult 50+ oral tablet</i>          | Cerovite Senior       | OTC                 |
| <i>sunvite advanced oral tablet</i>                  | Cerovite Senior       | OTC                 |
| <i>super 28 formula oral tablet</i>                  | Cerovite Senior       | OTC                 |
| <i>super antioxidants protector oral capsule</i>     | Amoryn Mood Booster   | OTC                 |
| <i>super aytinal 50 plus oral tablet</i>             | Cerovite Senior       | OTC                 |
| <i>super aytinal oral tablet</i>                     | Cerovite Senior       | OTC                 |
| <i>super multiple oral capsule</i>                   | Amoryn Mood Booster   | OTC                 |
| <i>super multiple oral tablet</i>                    | Cerovite Senior       | OTC                 |
| <i>super natrul-100 oral tablet extended release</i> | Endur-VM              | OTC                 |
| <i>super nu-thera oral liquid</i>                    | BProtected Multi-Vite | OTC                 |
| <i>super nu-thera oral tablet</i>                    | Cerovite Senior       | OTC                 |
| <i>super thera vite m oral tablet</i>                | Cerovite Senior       | OTC                 |

| <b>Formulary Drug Name</b>                            | <b>Reference</b>            | <b>Restrictions</b> |
|---|-----------------------------|---------------------|
| <i>super vikaps oral tablet</i>                       | Cerovite Senior             | OTC                 |
| <i>super vita-mins oral tablet</i>                    | Cerovite Senior             | OTC                 |
| <i>superior 35 oral tablet extended release</i>       | Endur-VM                    | OTC                 |
| <i>tgt multivitamin/multimineral oral tablet</i>      | Cerovite Senior             | OTC                 |
| <i>thera vital m oral tablet</i>                      | Cerovite Senior             | OTC                 |
| <i>thera vital-m oral tablet</i>                      | Cerovite Senior             | OTC                 |
| <i>therabasic-m oral tablet</i>                       | Cerovite Senior             | OTC                 |
| <i>theradex m oral tablet</i>                         | Cerovite Senior             | OTC                 |
| <i>theradex m/beta carotene oral tablet</i>           | Cerovite Senior             | OTC                 |
| <i>thera-mill m oral tablet</i>                       | Cerovite Senior             | OTC                 |
| <i>theramill plus oral capsule</i>                    | Amoryn Mood Booster         | OTC                 |
| <b>THERANATAL LACTATION COMPLETE ORAL</b>             | cvs diabetes health support | OTC                 |
| <i>therapeutic formula/hematinics oral tablet</i>     | Cerovite Senior             | OTC                 |
| <i>therapeutic m oral tablet</i>                      | Cerovite Senior             | OTC                 |
| <i>therapeutic-m oral tablet</i>                      | Cerovite Senior             | OTC                 |
| <i>therapeutic-m/lutein oral tablet</i>               | Cerovite Senior             | OTC                 |
| <i>theratrum complete 50 plus oral tablet</i>         | Cerovite Senior             | OTC                 |
| <i>theratrum complete oral tablet</i>                 | Cerovite Senior             | OTC                 |
| <i>theravim-m oral tablet</i>                         | Cerovite Senior             | OTC                 |
| <i>thrive for life womens oral tablet</i>             | Cerovite Senior             | OTC                 |
| <i>total formula 2 oral tablet</i>                    | Cerovite Senior             | OTC                 |
| <i>total formula 3 oral tablet</i>                    | Cerovite Senior             | OTC                 |
| <i>total formula oral tablet</i>                      | Cerovite Senior             | OTC                 |
| <i>totalday multiple oral tablet extended release</i> | Endur-VM                    | OTC                 |
| <i>tropical liquid nutrition oral liquid</i>          | BProtected Multi-Vite       | OTC                 |
| <i>trueplus diabetic multivitamin oral tablet</i>     | Cerovite Senior             | OTC                 |
| <i>ultra antioxidant formula oral tablet</i>          | Cerovite Senior             | OTC                 |
| <i>ultra freeda oral tablet</i>                       | Cerovite Senior             | OTC                 |
| <i>ultra freeda/iron oral tablet</i>                  | Cerovite Senior             | OTC                 |
| <b>ULTRA MENS PACK ORAL</b>                           | cvs diabetes health support | OTC                 |
| <i>ultra multi formula/iron oral capsule</i>          | Amoryn Mood Booster         | OTC                 |
| <i>ultra vita-time oral tablet</i>                    | Cerovite Senior             | OTC                 |
| <b>ULTRA WOMENS PACK ORAL</b>                         | cvs diabetes health support | OTC                 |
| <i>ultrachoice adv formula mature oral tablet</i>     | Cerovite Senior             | OTC                 |
| <i>ultrachoice advanced formula oral tablet</i>       | Cerovite Senior             | OTC                 |
| <i>ultra-mega oral tablet extended release</i>        | Endur-VM                    | OTC                 |
| <i>v-c forte oral capsule</i>                         | Amoryn Mood Booster         |                     |

| <b>Formulary Drug Name</b>                         | <b>Reference</b>            | <b>Restrictions</b> |
|--|-----------------------------|---------------------|
| <i>vic-forte oral capsule</i>                      | Amoryn Mood Booster         |                     |
| <i>vision formula 2 oral tablet</i>                | Cerovite Senior             | OTC                 |
| <i>vision formula eye health oral capsule</i>      | Amoryn Mood Booster         | OTC                 |
| <i>vision formula/lutein oral tablet</i>           | Cerovite Senior             | OTC                 |
| <i>vision plus oral capsule</i>                    | Amoryn Mood Booster         | OTC                 |
| <i>vision vitamins oral tablet</i>                 | Cerovite Senior             | OTC                 |
| <i>visivites oral tablet</i>                       | Cerovite Senior             | OTC                 |
| <i>visivites/lutein oral tablet</i>                | Cerovite Senior             | OTC                 |
| <i>vita hair oral tablet</i>                       | Cerovite Senior             | OTC                 |
| <i>vita s forte oral tablet</i>                    | Cerovite Senior             |                     |
| <i>vitabasic complete oral tablet</i>              | Cerovite Senior             | OTC                 |
| <i>vitabasic senior oral tablet</i>                | Cerovite Senior             | OTC                 |
| <i>vitacel oral tablet</i>                         | Cerovite Senior             |                     |
| <b>VITAMENT ORAL PACKET</b>                        | multi for her               | OTC                 |
| <b>VITAMIN C EFFERVESCENT BLEND ORAL PACKET</b>    | multi for her               | OTC                 |
| <b>VITAMIN C-ELECTROLYTES ORAL PACKET</b>          | multi for her               | OTC                 |
| <i>vita-min oral capsule</i>                       | Amoryn Mood Booster         | OTC                 |
| <i>vitamins a-d-e/selenium oral tablet</i>         | Cerovite Senior             | OTC                 |
| <b>VITAMINS TO GO MAXIMUM ORAL</b>                 | cvs diabetes health support | OTC                 |
| <b>VITAMINS TO GO MEN ORAL</b>                     | cvs diabetes health support | OTC                 |
| <b>VITAMINS TO GO WOMEN ORAL</b>                   | cvs diabetes health support | OTC                 |
| <i>vitamins/minerals oral tablet</i>               | Cerovite Senior             | OTC                 |
| <i>vitatum complete oral tablet</i>                | Cerovite Senior             | OTC                 |
| <i>vitatum oral tablet chewable</i>                | Advanced Multi EA           | OTC                 |
| <i>viteyes areds advanced oral capsule</i>         | Amoryn Mood Booster         | OTC                 |
| <i>viteyes areds formula oral capsule</i>          | Amoryn Mood Booster         | OTC                 |
| <i>viteyes areds formula/lutein oral capsule</i>   | Amoryn Mood Booster         | OTC                 |
| <i>viteyes companion/lycopene oral tablet</i>      | Cerovite Senior             | OTC                 |
| <i>viteyes complete oral capsule</i>               | Amoryn Mood Booster         | OTC                 |
| <i>viteyes smokers advanced oral capsule</i>       | Amoryn Mood Booster         | OTC                 |
| <i>viteyes smokers formula/lutein oral capsule</i> | Amoryn Mood Booster         | OTC                 |
| <i>vitrum senior oral tablet</i>                   | Cerovite Senior             | OTC                 |
| <i>womens 50+ advanced oral capsule</i>            | Amoryn Mood Booster         | OTC                 |
| <i>womens daily form/fa/ca/fe oral tablet</i>      | Cerovite Senior             | OTC                 |
| <i>womens daily formula oral tablet</i>            | Cerovite Senior             | OTC                 |
| <i>womens life pack oral tablet</i>                | Cerovite Senior             | OTC                 |
| <i>womens multi oral capsule</i>                   | Amoryn Mood Booster         | OTC                 |

| <b>Formulary Drug Name</b>                                     | <b>Reference</b>            | <b>Restrictions</b> |
|--|-----------------------------|---------------------|
| <i>womens multivitamin oral tablet</i>                         | Cerovite Senior             | OTC                 |
| <i>womens one daily oral tablet</i>                            | Cerovite Senior             | OTC                 |
| <b>WOMENS PACK ORAL</b>  | cvs diabetes health support | OTC                 |
| <i>your life multi mens 50+ oral tablet</i>                    | Cerovite Senior             | OTC                 |
| <i>your life multi womens 50+ oral tablet</i>                  | Cerovite Senior             | OTC                 |
| <b>*Multivitamins***</b>                                       |                             |                     |
| <i>antioxidant formula oral capsule 250-10000-200</i>          | Chlorocaps                  | OTC                 |
| <i>multi-day vitamins oral tablet</i>                          | Amladex                     | OTC                 |
| <i>multiple vitamin oral tablet</i>                            | Amladex                     | OTC                 |
| <i>multivitamins oral capsule</i>                              | Chlorocaps                  | OTC                 |
| <i>mv-one oral capsule</i>                                     | Chlorocaps                  | OTC                 |
| <i>stress formula oral tablet</i>                              | Amladex                     | OTC                 |
| <i>vitamin e/folic acid/b-6/b-12 oral capsule</i>              | Chlorocaps                  | OTC                 |
| <b>*Ped Multi Vitamins W/Fl &amp; Fe***</b>                    |                             |                     |
| <i>multi-vit/iron/fluoride oral solution 0.25-10 mg/ml</i>     |                             | OTC                 |
| <i>multi-vitamin/fluoride/iron oral solution 0.25-10 mg/ml</i> |                             |                     |
| <b>*Ped Multiple Vitamins W/ Minerals***</b>                   |                             |                     |
| <i>alive gummies for children oral tablet chewable</i>         | Alive Gummies for Children  | OTC                 |
| <i>childrens gummies oral tablet chewable</i>                  | Alive Gummies for Children  | OTC                 |
| <i>complete multi-vitamin oral tablet chewable</i>             | Alive Gummies for Children  | OTC                 |
| <i>cvs gummy dinos oral tablet chewable</i>                    | Alive Gummies for Children  | OTC                 |
| <i>cvs gummy multivitamin kids oral tablet chewable</i>        | Alive Gummies for Children  | OTC                 |
| <i>disney cars gummies oral tablet chewable</i>                | Alive Gummies for Children  | OTC                 |
| <i>disney princess gummies oral tablet chewable</i>            | Alive Gummies for Children  | OTC                 |
| <i>eq multivitamin gummies oral tablet chewable</i>            | Alive Gummies for Children  | OTC                 |
| <i>eq multivitamins gummy child oral tablet chewable</i>       | Alive Gummies for Children  | OTC                 |
| <i>eql gummies childrens oral tablet chewable</i>              | Alive Gummies for Children  | OTC                 |
| <b>FLINTSTONES GUMMIES COMPLETE ORAL TABLET CHEWABLE</b>       | childrens gummies           | OTC                 |
| <b>FLINTSTONES GUMMIES ORAL TABLET CHEWABLE</b>                | childrens gummies           | OTC                 |
| <b>FLINTSTONES GUMMIES PLUS ORAL TABLET CHEWABLE</b>           | childrens gummies           | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b>              | <b>Restrictions</b> |
|---|-------------------------------|---------------------|
| <b>FLINTSTONES SOUR GUMMIES ORAL TABLET CHEWABLE</b>                    | childrens gummies             | OTC                 |
| <i>gnp zoochews gummies oral tablet chewable</i>                        | Alive Gummies for Children    | OTC                 |
| <i>gummi bear multivitamin/min oral tablet chewable</i>                 | Alive Gummies for Children    | OTC                 |
| <i>healthy kids overall health oral tablet chewable</i>                 | Alive Gummies for Children    | OTC                 |
| <b>ONE-A-DAY JOLLY RANCHER ORAL TABLET CHEWABLE</b>                     | childrens gummies             | OTC                 |
| <b>ONE-A-DAY SCOOPY-DOO GUMMIES ORAL TABLET CHEWABLE</b>                | childrens gummies             | OTC                 |
| <i>spider-man complete multi-vit oral tablet chewable</i>               | Alive Gummies for Children    | OTC                 |
| <i>spongebob squarepants gummies oral tablet chewable</i>               | Alive Gummies for Children    | OTC                 |
| <i>vitachew multiple vitamin oral tablet chewable</i>                   | Alive Gummies for Children    | OTC                 |
| <i>zoo friends gummies plus d oral tablet chewable</i>                  | Alive Gummies for Children    | OTC                 |
| <b>*Ped Mv W/ Fluoride***</b>   |                               |                     |
| <i>multi-vit/fluoride oral solution 0.25 mg/ml</i>                      | Floriva Plus                  |                     |
| <i>multivitamin/fluoride oral solution 0.25 mg/ml</i>                   | Floriva Plus                  | OTC                 |
| <i>multi-vitamin/fluoride oral solution 0.25 mg/ml</i>                  | Floriva Plus                  |                     |
| <i>multivitamin/fluoride oral solution 0.5 mg/ml</i>                    | Quflora Pediatric             | OTC                 |
| <i>multi-vitamin/fluoride oral solution 0.5 mg/ml</i>                   | Quflora Pediatric             |                     |
| <i>multivitamin/fluoride oral tablet chewable 0.25 mg, 0.5 mg, 1 mg</i> | Multi-Vit-Flor                |                     |
| <i>multivitamins/fluoride oral tablet chewable 0.5 mg</i>               | Multi-Vit-Flor                |                     |
| <i>mvc-fluoride oral tablet chewable 0.25 mg, 0.5 mg, 1 mg</i>          | Multi-Vit-Flor                |                     |
| <b>*Ped Mv W/ Iron***</b>   |                               |                     |
| <i>bite-a-mins/iron oral tablet chewable 15 mg</i>                      | Land Before Time Multivitamin | OTC                 |
| <i>bprotected pedia poly-vite/fe oral solution 10 mg/ml</i>             | BProtected Pedia Poly-Vite/Fe | OTC                 |
| <i>chewable vite/iron childrens oral tablet chewable 15 mg</i>          | Land Before Time Multivitamin | OTC                 |
| <i>child chewable vitamins/iron oral tablet chewable</i>                | Land Before Time Multivitamin | OTC                 |



| <b>Formulary Drug Name</b>                                       | <b>Reference</b>               | <b>Restrictions</b> |
|--|--------------------------------|---------------------|
| <i>childrens multivitamin/iron oral tablet chewable 15 mg</i>    | Land Before Time Multivitamin  | OTC                 |
| <i>childrens vitamins/iron oral tablet chewable 15 mg</i>        | Land Before Time Multivitamin  | OTC                 |
| <b>DINO-LIFE W/IRON-ZINC ORAL TABLET CHEWABLE 30-200-3</b>       |                                | OTC                 |
| <i>flintstones plus iron oral tablet chewable</i>                | Land Before Time Multivitamin  | OTC                 |
| <i>fruity chews/iron oral tablet chewable</i>                    | Land Before Time Multivitamin  | OTC                 |
| <i>gnp animal shapes plus iron oral tablet chewable 15 mg</i>    | Land Before Time Multivitamin  | OTC                 |
| <i>gnp childrens chewables/iron oral tablet chewable 15 mg</i>   | Land Before Time Multivitamin  | OTC                 |
| <b>HONEY BEARS W/IRON-ZINC ORAL TABLET CHEWABLE 30-200-3</b>     |                                | OTC                 |
| <i>land before time multivitamin oral tablet chewable 15 mg</i>  | Land Before Time Multivitamin  | OTC                 |
| <i>little animals plus iron oral tablet chewable 15 mg</i>       | Land Before Time Multivitamin  | OTC                 |
| <i>multivitamin drops/iron oral solution 11 mg/ml</i>            | Poly-Vi-Sol/Iron               | OTC                 |
| <i>poly-vitamin/iron oral solution 10 mg/ml</i>                  | BProtected Pedia Poly-Vite/Fe  | OTC                 |
| <i>qc childrens vitamins/iron oral tablet chewable 15 mg</i>     | Land Before Time Multivitamin  | OTC                 |
| <i>ra childrens chewable vit/iron oral tablet chewable 15 mg</i> | Land Before Time Multivitamin  | OTC                 |
| <b>SCOOBY-DOO ONE A DAY ORAL TABLET CHEWABLE</b>                 |                                | OTC                 |
| <i>zoo friends plus iron oral tablet chewable 15 mg</i>          | Land Before Time Multivitamin  | OTC                 |
| <b>*Ped Vitamins Acid W/ Fluoride***</b>                         |                                |                     |
| <i>tri-vitamin/fluoride oral solution 0.25 mg/ml, 0.5 mg/ml</i>  |                                |                     |
| <i>vitamins acid-fluoride oral solution 0.25 mg/ml</i>           |                                |                     |
| <b>*Pediatric Multiple Vitamins***</b>                           |                                |                     |
| <i>animal chews oral tablet chewable</i>                         | Flinstones Gummies Omega-3 DHA | OTC                 |
| <i>bite-a-mins oral tablet chewable</i>                          | Flinstones Gummies Omega-3 DHA | OTC                 |
| <i>bounty bears/c oral tablet chewable</i>                       | Flinstones Gummies Omega-3 DHA | OTC                 |

| <b>Formulary Drug Name</b>                                 | <b>Reference</b>               | <b>Restrictions</b> |
|--|--------------------------------|---------------------|
| <i>chewable vite childrens oral tablet chewable</i>        | Flinstones Gummies Omega-3 DHA | OTC                 |
| <i>childrens chewable multi vits oral tablet chewable</i>  | Flinstones Gummies Omega-3 DHA | OTC                 |
| <i>childrens chewable vitamins oral tablet chewable</i>    | Flinstones Gummies Omega-3 DHA | OTC                 |
| <i>childrens multivitamin oral tablet chewable</i>         | Flinstones Gummies Omega-3 DHA | OTC                 |
| <i>dino-life oral tablet chewable</i>                      | Flinstones Gummies Omega-3 DHA | OTC                 |
| <i>dino-life w/extra c oral tablet chewable</i>            | Flinstones Gummies Omega-3 DHA | OTC                 |
| <i>flinstones gummies omega-3 dha oral tablet chewable</i> | Flinstones Gummies Omega-3 DHA | OTC                 |
| <i>flintstones plus calcium oral tablet chewable</i>       | Flinstones Gummies Omega-3 DHA | OTC                 |
| <i>fruity chews oral tablet chewable</i>                   | Flinstones Gummies Omega-3 DHA | OTC                 |
| <i>gnp animal shapes oral tablet chewable</i>              | Flinstones Gummies Omega-3 DHA | OTC                 |
| <i>gnp animal shapes plus extra c oral tablet chewable</i> | Flinstones Gummies Omega-3 DHA | OTC                 |
| <i>gnp childrens chewables/ex c oral tablet chewable</i>   | Flinstones Gummies Omega-3 DHA | OTC                 |
| <i>gnp little ones childrens oral tablet chewable</i>      | Flinstones Gummies Omega-3 DHA | OTC                 |
| <i>little animals oral tablet chewable</i>                 | Flinstones Gummies Omega-3 DHA | OTC                 |
| <i>multi-delyn oral liquid</i>                             | NovaMV Pediatric Multi-Vitamin | OTC                 |
| <i>multivitamin childrens oral tablet chewable</i>         | Flinstones Gummies Omega-3 DHA | OTC                 |
| <i>pediavit oral liquid</i>                                | NovaMV Pediatric Multi-Vitamin | OTC                 |
| <i>poly vitamin oral tablet chewable</i>                   | Flinstones Gummies Omega-3 DHA | OTC                 |
| <i>qc childrens vitamins/extra c oral tablet chewable</i>  | Flinstones Gummies Omega-3 DHA | OTC                 |
| <i>sm animal shapes kids first oral tablet chewable</i>    | Flinstones Gummies Omega-3 DHA | OTC                 |
| <i>zoo friends gummies oral tablet chewable</i>            | Flinstones Gummies Omega-3 DHA | OTC                 |
| <i>zoo friends plus extra c oral tablet chewable</i>       | Flinstones Gummies Omega-3 DHA | OTC                 |

| <b>Formulary Drug Name</b>                                 | <b>Reference</b>               | <b>Restrictions</b> |
|--|--------------------------------|---------------------|
| <i>zoo friends/extra c oral tablet chewable</i>            | Flinstones Gummies Omega-3 DHA | OTC                 |
| <b>*Pediatric Vitamins A &amp; D W/ C***</b>               |                                |                     |
| <b>TRI-VI-SOL ORAL SOLUTION 750-400-35 UNIT-MG/ML</b>      | pc pediatric tri-vitamin drops | OTC                 |
| <b>*Pediatric Vitamins***</b>                              |                                |                     |
| <b>HONEY BEARS ORAL TABLET CHEWABLE</b>                    | multivitamin gummies childrens | OTC                 |
| <i>multivitamin gummies childrens oral tablet chewable</i> | Honey Bears                    | OTC                 |
| <b>*Prenatal Mv &amp; Min W/Fe-Fa***</b>                   |                                |                     |
| <b>CONCEPT DHA ORAL CAPSULE 53.5-38-1 MG</b>               | wescap-c dha                   |                     |
| <b>DOTHELLE DHA ORAL CAPSULE 53.5-38-1 MG</b>              | wescap-c dha                   |                     |
| <b>MULTI PRENATAL ORAL TABLET 27-0.8 MG</b>                | multi prenatal                 | OTC                 |
| <b>M-VIT ORAL TABLET</b>                                   | pnv prenatal plus multivitamin |                     |
| <b>MYNATAL PLUS ORAL TABLET</b>                            |                                |                     |
| <b>MYNATAL-Z ORAL TABLET</b>                               |                                |                     |
| <b>NIVA-PLUS ORAL TABLET 27-1 MG</b>                       | pnv prenatal plus multivitamin |                     |
| <b>O-CAL FA ORAL TABLET 27-1 MG</b>                        | pnv prenatal plus multivitamin |                     |
| <b>PNV FOLIC ACID + IRON ORAL TABLET 27-1 MG</b>           | pnv prenatal plus multivitamin |                     |
| <b>PNV PRENATAL PLUS MULTIVITAMIN ORAL TABLET 27-1 MG</b>  | pnv prenatal plus multivitamin |                     |
| <i>pnv-select oral tablet 27-0.6-0.4 mg</i>                |                                |                     |
| <i>prenatabs rx oral tablet 29-1 mg</i>                    |                                | OTC                 |
| <i>prenatal 19 oral tablet</i>                             |                                | OTC                 |
| <i>prenatal 19 oral tablet chewable</i>                    |                                |                     |
| <b>PRE-NATAL FORMULA ORAL TABLET</b>                       |                                | OTC                 |
| <b>PRENATAL FORTE ORAL TABLET</b>                          |                                | OTC                 |
| <b>PRENATAL LOW IRON ORAL TABLET 27-0.8 MG</b>             | multi prenatal                 | OTC                 |
| <b>PRENATAL ONE DAILY ORAL TABLET 27-0.8 MG</b>            | multi prenatal                 | OTC                 |
| <b>PRENATAL ORAL TABLET 27-0.8 MG</b>                      | multi prenatal                 |                     |
| <b>PRENATAL ORAL TABLET 27-1 MG</b>                        | pnv prenatal plus multivitamin |                     |
| <b>PRENATAL PLUS ORAL TABLET 27-1 MG</b>                   | pnv prenatal plus multivitamin |                     |

| Formulary Drug Name                                | Reference                      | Restrictions |
|--|--------------------------------|--------------|
| PRENATAL VITAMIN AND MINERAL ORAL TABLET 28-0.8 MG |                                | OTC          |
| PRENATAL VITAMIN ORAL TABLET 27-0.8 MG             | multi prenatal                 | OTC          |
| PRENATAL VITAMIN PLUS LOW IRON ORAL TABLET 27-1 MG | pnv prenatal plus multivitamin |              |
| PRENATAL/IRON ORAL TABLET                          |                                | OTC          |
| PRENATAL-U ORAL CAPSULE 106.5-1 MG                 |                                |              |
| PREPLUS ORAL TABLET 27-1 MG                        | pnv prenatal plus multivitamin |              |
| RIGHT STEP PRENATAL ORAL TABLET 27-0.8 MG          | multi prenatal                 | OTC          |
| SELECT-OB ORAL TABLET CHEWABLE 29-1 MG             |                                |              |
| TARON-C DHA ORAL CAPSULE 35-1 MG                   |                                |              |
| TARON-C DHA ORAL CAPSULE 53.5-38-1 MG              | wescap-c dha                   |              |
| THERANATAL CORE NUTRITION ORAL TABLET 27-1 MG      | pnv prenatal plus multivitamin | OTC          |
| TRICARE ORAL TABLET                                | pnv prenatal plus multivitamin |              |
| TRINATAL RX 1 ORAL TABLET 60-1 MG                  | trinatal rx 1                  |              |
| <i>trinate oral tablet</i>                         |                                |              |
| VINATE CARE ORAL TABLET CHEWABLE 40-1 MG           |                                | OTC          |
| VINATE II ORAL TABLET 29-1 MG                      |                                |              |
| VINATE ONE ORAL TABLET 60-1 MG                     | trinatal rx 1                  |              |
| VIRT-C DHA ORAL CAPSULE 53.5-38-1 MG               | wescap-c dha                   |              |
| VITAFOL-OB ORAL TABLET                             |                                |              |
| VOL-PLUS ORAL TABLET 27-1 MG                       | pnv prenatal plus multivitamin |              |
| <b>*Prenatal Mv &amp; Min W/Fe-Fa-Dha***</b>       |                                |              |
| <i>pnv-dha oral capsule 27-0.6-0.4-300 mg</i>      |                                |              |
| PNV-DHA+DOCUSATE ORAL CAPSULE 27-1.25-300 MG       |                                |              |
| SELECT-OB+DHA ORAL 29-1 & 250 MG                   |                                |              |
| <b>**Specialty Vitamins Products***</b>            |                                |              |
| <i>a thru z advantage oral tablet</i>              | Allerwell Allergy Formula      | OTC          |
| ADRENOID ORAL CAPSULE                              | immunicare                     | OTC          |

| <b>Formulary Drug Name</b>                         | <b>Reference</b>          | <b>Restrictions</b> |
|--|---------------------------|---------------------|
| <b>BILBERRY PLUS ORAL CAPSULE</b>                  | immunicare                | OTC                 |
| <b>CAL-CO3Y ORAL CAPSULE 200-100-30 MG-UNIT-MG</b> | immunicare                | OTC                 |
| <b>CARDIOPRESS ORAL CAPSULE</b>                    | immunicare                | OTC                 |
| <b>CAROZYME ORAL CAPSULE</b>                       | immunicare                | OTC                 |
| <b>CHOLASE CONTROL ORAL CAPSULE</b>                | immunicare                | OTC                 |
| <b>COLLAGEN ULTRA ORAL CAPSULE</b>                 | immunicare                | OTC                 |
| <b>CVS HAIR/SKIN/NAILS ORAL TABLET</b>             | a thru z advantage        | OTC                 |
| <i>cvs menopause support oral tablet</i>           | Allerwell Allergy Formula | OTC                 |
| <b>GLUCO COR ORAL CAPSULE</b>                      | immunicare                | OTC                 |
| <b>GLYCOTROL COMPLETE ORAL CAPSULE</b>             | immunicare                | OTC                 |
| <b>GLYCOTROL ORAL CAPSULE</b>                      | immunicare                | OTC                 |
| <b>HEART SAVIOR ORAL CAPSULE</b>                   | immunicare                | OTC                 |
| <i>immunicare oral capsule</i>                     | GlycoTrol                 | OTC                 |
| <b>INULOSE BLOOD SUGAR SUPPORT ORAL CAPSULE</b>    | immunicare                | OTC                 |
| <b>LIPOTRIAD VISION SUPPORT ORAL CAPSULE</b>       | immunicare                | OTC                 |
| <b>LIPOTRIAD VISION SUPPORT PLUS ORAL CAPSULE</b>  | immunicare                | OTC                 |
| <b>LIPOTRIAD VISIONARY ORAL CAPSULE</b>            | immunicare                | OTC                 |
| <b>LONGEVITY ORAL CAPSULE</b>                      | immunicare                | OTC                 |
| <b>LONGEVITY PLUS ORAL CAPSULE</b>                 | immunicare                | OTC                 |
| <i>milltrium stamina plus oral tablet</i>          | Allerwell Allergy Formula | OTC                 |
| <b>MPS ORAL CAPSULE 300-100 MG</b>                 | immunicare                | OTC                 |
| <i>ra central-vite cardio oral tablet</i>          | Allerwell Allergy Formula | OTC                 |
| <i>ra central-vite performance oral tablet</i>     | Allerwell Allergy Formula | OTC                 |
| <i>ra menopause support oral tablet</i>            | Allerwell Allergy Formula | OTC                 |
| <b>RETAINÉ VISION ORAL CAPSULE</b>                 | immunicare                | OTC                 |
| <b>SYNERTROPIN ORAL CAPSULE</b>                    | immunicare                | OTC                 |
| <i>ultimate fat burner oral tablet</i>             | Allerwell Allergy Formula | OTC                 |
| <i>urosex oral tablet</i>                          | Allerwell Allergy Formula |                     |
| <i>varisan vitality oral tablet</i>                | Allerwell Allergy Formula | OTC                 |
| <i>vigor oral capsule</i>                          | GlycoTrol                 | OTC                 |
| <i>vitamins for hair oral tablet</i>               | Allerwell Allergy Formula | OTC                 |
| <i>weight loss daily multi oral tablet</i>         | Allerwell Allergy Formula | OTC                 |
| <b>*Vitamins A &amp; D***</b>                      |                           |                     |
| <i>a &amp; d oral capsule 10000-400 unit</i>       |                           | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b> | <b>Restrictions</b> |
|---|------------------|---------------------|
| <b>COD LIVER OIL FOR KIDS ORAL OIL</b>  |                  | OTC                 |
| <i>cod liver oil oral capsule , 10 minim, 1000 mg, 1250-130 unit, 1250-133 unit, 1250-133.33 unit, 1250-135 unit, 4000-200 unit</i> |                  | OTC                 |
| <b>COD LIVER OIL ORAL OIL 5000-500 UNIT/5ML</b>   |                  | OTC                 |
| <i>cod liver oil w/vit a &amp; d oral capsule</i>   |                  | OTC                 |
| <i>cod liver oil/low vitamin a oral capsule</i>   |                  | OTC                 |
| <i>cod liver oil/vitamins a &amp; d oral capsule</i>  |                  | OTC                 |
| <i>cvs cod liver oil oral capsule</i>   |                  | OTC                 |
| <i>d 400 oral capsule</i>   |                  | OTC                 |
| <i>d-natural-5 oral capsule 10000-5000 unit</i>   |                  | OTC                 |
| <i>gnp cod liver oil oral capsule 1250-135 unit</i>   |                  | OTC                 |
| <i>gnp norwegian cod liver oil oral capsule 1250-135 unit</i>   |                  | OTC                 |
| <i>norwegian cod liver oil oral capsule</i>   |                  | OTC                 |
| <b>NORWEGIAN COD LIVER OIL ORAL OIL</b>   |                  | OTC                 |
| <b>QC COD LIVER OIL ORAL OIL</b>  |                  | OTC                 |
| <i>ra cod liver oil oral capsule 1250-133 unit</i>  |                  | OTC                 |
| <b>RA COD LIVER OIL ORAL OIL</b>  |                  | OTC                 |
| <i>ra vitamin a &amp; d oral capsule 5000-400 unit</i>  |                  | OTC                 |
| <i>sm cod liver oil oral capsule</i>  |                  | OTC                 |
| <i>vitamin a &amp; d oral capsule 5000-400 unit, 8000-400 unit</i>  |                  | OTC                 |
| <i>vitamins a &amp; d oral capsule 5000-400 unit</i>  |                  | OTC                 |
| <i>yl natural vitamin a &amp; d oral capsule 1250-135 unit</i>  |                  | OTC                 |
| <b>*Vitamins W/ Lipotropics***</b>  |                  |                     |
| <b>ACTIFLOVIT EAR HEALTH ORAL TABLET</b>  | balance b-100    | OTC                 |
| <i>b-100 complex oral tablet</i>  | Lipoflavovit     | OTC                 |
| <i>b-100 cr oral tablet extended release</i>  |                  | OTC                 |
| <i>b-100 oral tablet</i>  | Lipoflavovit     | OTC                 |
| <i>b-50 oral tablet</i>   | Lipoflavovit     | OTC                 |
| <i>balance b-100 oral tablet</i>  | Lipoflavovit     | OTC                 |
| <i>balanced b-100 complex cr oral tablet extended release</i>   |                  | OTC                 |
| <i>balanced b-50 complex oral capsule</i>   |                  | OTC                 |
| <i>balanced b-50 complex oral tablet</i>  | Lipoflavovit     | OTC                 |



| <b>Formulary Drug Name</b>   | <b>Reference</b> | <b>Restrictions</b>  |
|--|------------------|----------------------|
| <i>balanced b-50 oral tablet</i>   | Lipoflavovit     | OTC                  |
| <i>b-stress oral capsule</i>   |                  | OTC                  |
| <i>cvs inner ear plus oral tablet</i>                                      | Lipoflavovit     | OTC                  |
| <i>ear health formula oral tablet</i>                                      | Lipoflavovit     | OTC                  |
| <i>ear health plus oral tablet</i>   | Lipoflavovit     | OTC                  |
| <i>lipocomplex oral tablet</i>   | Lipoflavovit     | OTC                  |
| <i>lipoflavonoid oral tablet</i>   | Lipoflavovit     | OTC                  |
| <i>lipoflavovit oral tablet</i>  | Lipoflavovit     | OTC                  |
| <i>lipo-key oral tablet</i>  | Lipoflavovit     | OTC                  |
| <b>LIPOTRIAD ORAL TABLET</b>   | balance b-100    | OTC                  |
| <i>mega multiple/chelated mineral oral tablet</i>                          | Lipoflavovit     | OTC                  |
| <i>methacholine/liver oral capsule</i>                                     |                  | OTC                  |
| <i>multi-vitamin hp/minerals oral capsule</i>                              |                  | OTC                  |
| <i>nat-rul b-50 oral tablet</i>  | Lipoflavovit     | OTC                  |
| <i>px b-50 oral tablet</i>   | Lipoflavovit     | OTC                  |
| <i>risanoid plus oral tablet</i>   | Lipoflavovit     | OTC                  |
| <i>super stress b-complex cr oral tablet extended release</i>              |                  | OTC                  |
| <i>ultra b-100 complex oral tablet</i>                                     | Lipoflavovit     | OTC                  |
| <b>*Musculoskeletal Therapy Agents*</b>                                    |                  |                      |
| <b>*Central Muscle Relaxants***</b>  |                  |                      |
| <i>baclofen oral solution 5 mg/5ml</i>                                     | Ozobax           |                      |
| <i>baclofen oral tablet 10 mg, 20 mg, 5 mg</i>                             |                  |                      |
| <i>carisoprodol oral tablet 350 mg</i>                                     | Soma             | QLL (4 EA per 1 day) |
| <i>chlorzoxazone oral tablet 250 mg</i>                                    |                  |                      |
| <i>chlorzoxazone oral tablet 375 mg, 750 mg</i>                            | Lorzone          |                      |
| <i>chlorzoxazone oral tablet 500 mg</i>                                    |                  |                      |
| <i>cyclobenzaprine hcl oral tablet 10 mg, 5 mg</i>                         |                  |                      |
| <i>cyclobenzaprine hcl oral tablet 7.5 mg</i>                              | Fexmid           |                      |
| <i>methocarbamol oral tablet 500 mg, 750 mg</i>                            |                  |                      |
| <i>orphenadrine citrate er oral tablet extended release 12 hour 100 mg</i> |                  |                      |
| <i>tizanidine hcl oral tablet 2 mg</i>                                     |                  |                      |
| <i>tizanidine hcl oral tablet 4 mg</i>                                     | Zanaflex         |                      |
| <b>*Direct Muscle Relaxants***</b>   |                  |                      |
| <i>dantrolene sodium oral capsule 100 mg, 50 mg</i>                        |                  |                      |
| <i>dantrolene sodium oral capsule 25 mg</i>                                | Dantrium         |                      |

| Formulary Drug Name   | Reference               | Restrictions                            |
|---|-------------------------|---|
| <b>*Muscle Relaxant Combinations***</b>                               |                         |   |
| <i>carisoprodol-aspirin-codeine oral tablet 200-325-16 mg</i>         |                         | QLL (4 EA per 1 day); AL (Min 12 Years) |
| <b>*Viscosupplements***</b>   |                         |   |
| <b>GEL-ONE INTRA-ARTICULAR PREFILLED SYRINGE 30 MG/3ML</b>            |                         | PA                                      |
| <b>VISCO-3 INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 25 MG/2.5ML</b> |                         | PA                                      |
| <b>*Nasal Agents - Systemic And Topical*</b>                          |                         |   |
| <b>*Antihistamine-Steroid***</b>                                      |                         |   |
| <i>azelastine-fluticasone nasal suspension 137-50 mcg/act</i>         | Dymista                 | AL (Min 6 Years)                        |
| <b>DYMISTA NASAL SUSPENSION 137-50 MCG/ACT</b>                        | azelastine-fluticasone  | AL (Min 6 Years)                        |
| <b>*Nasal Agents - Misc.***</b>                                       |                         |   |
| <i>afrin saline nasal mist nasal solution 0.65 %</i>                  | Afrin Saline Nasal Mist | OTC                                     |
| <i>altamist spray nasal solution 0.65 %</i>                           | Afrin Saline Nasal Mist | OTC                                     |
| <b>AYR NASAL MIST ALLERGY/SINUS NASAL SOLUTION 2.65 %</b>             |                         | OTC                                     |
| <i>ayr nasal solution 0.65 %</i>                                      | Afrin Saline Nasal Mist | OTC                                     |
| <b>AYR SALINE NASAL DROPS NASAL SOLUTION 0.65 %</b>                   |                         | OTC                                     |
| <i>baby ayr saline nasal solution 0.65 %</i>                          | Afrin Saline Nasal Mist | OTC                                     |
| <i>cvs saline nasal spray nasal solution 0.65 %</i>                   | Afrin Saline Nasal Mist | OTC                                     |
| <i>cvs saline nose spray nasal solution 0.65 %</i>                    | Afrin Saline Nasal Mist | OTC                                     |
| <i>deep sea nasal spray nasal solution 0.65 %</i>                     | Afrin Saline Nasal Mist | OTC                                     |
| <i>eq saline nasal spray nasal solution 0.65 %</i>                    | Afrin Saline Nasal Mist | OTC                                     |
| <i>eql saline nasal spray nasal solution 0.65 %</i>                   | Afrin Saline Nasal Mist | OTC                                     |
| <i>gnp nasal moisturizing nasal solution 0.65 %</i>                   | Afrin Saline Nasal Mist | OTC                                     |
| <i>hm saline nasal spray nasal solution 0.65 %</i>                    | Afrin Saline Nasal Mist | OTC                                     |
| <i>little noses saline nasal solution 0.65 %</i>                      | Afrin Saline Nasal Mist | OTC                                     |
| <i>little noses stuffy nose kit nasal solution 0.65 %</i>             | Afrin Saline Nasal Mist | OTC                                     |
| <i>meijer saline nasal spray nasal solution 0.65 %</i>                | Afrin Saline Nasal Mist | OTC                                     |
| <b>NASADROPS SALINE ON THE GO NASAL SOLUTION 0.9 %</b>                |                         | OTC                                     |
| <i>nasal moist nasal solution 0.65 %</i>                              | Afrin Saline Nasal Mist | OTC                                     |

| <b>Formulary Drug Name</b>                                    | <b>Reference</b>        | <b>Restrictions</b>       |
|---|-------------------------|---------------------------|
| <i>nasal moisturizing spray nasal solution 0.65 %</i>         | Afrin Saline Nasal Mist | OTC                       |
| <b>NOZIN NASAL SANITIZER NASAL KIT 62 %</b>                   |                         | OTC                       |
| <b>NOZIN NASAL SANITIZER POPSWAB NASAL SWAB</b>               |                         | OTC; QLL (5 EA per 1 day) |
| <i>ocean for kids nasal solution 0.65 %</i>                   | Afrin Saline Nasal Mist | OTC                       |
| <b>OCEAN NASAL SPRAY NASAL SOLUTION 0.65 %</b>                | altamist spray          | OTC                       |
| <i>px saline nasal spray nasal solution 0.65 %</i>            | Afrin Saline Nasal Mist | OTC                       |
| <i>qc saline nasal relief nasal solution 0.65 %</i>           | Afrin Saline Nasal Mist | OTC                       |
| <i>ra saline nasal spray nasal solution 0.65 %</i>            | Afrin Saline Nasal Mist | OTC                       |
| <i>saline mist spray nasal solution 0.65 %</i>                | Afrin Saline Nasal Mist | OTC                       |
| <i>saline nasal gel</i>                                       | Ayr Saline Nasal        | OTC                       |
| <i>saline nasal spray nasal solution 0.65 %</i>               | Afrin Saline Nasal Mist | OTC                       |
| <i>sb saline nose nasal solution 0.65 %</i>                   | Afrin Saline Nasal Mist | OTC                       |
| <i>sm nasal spray saline nasal solution 0.65 %</i>            | Afrin Saline Nasal Mist | OTC                       |
| <i>sodium chloride nasal solution 0.65 %</i>                  | Afrin Saline Nasal Mist | OTC                       |
| <i>tgt nasal spray nasal solution 0.65 %</i>                  | Afrin Saline Nasal Mist | OTC                       |
| <i>tgt saline nasal spray nasal solution 0.65 %</i>           | Afrin Saline Nasal Mist | OTC                       |
| <b>*Nasal Anticholinergics***</b>                             |                         |                           |
| <i>ipratropium bromide nasal solution 0.03 %, 0.06 %</i>      |                         |                           |
| <b>*Nasal Antihistamines***</b>                               |                         |                           |
| <i>azelastine hcl nasal solution 0.1 %</i>                    |                         |                           |
| <b>*Nasal Mast Cell Stabilizers***</b>                        |                         |                           |
| <i>cromolyn sodium nasal aerosol solution 5.2 mg/act</i>      | NasalCrom               | OTC                       |
| <b>*Nasal Steroids***</b>                                     |                         |                           |
| <i>allergy relief nasal suspension 50 mcg/act</i>             | ClariSpray              | OTC                       |
| <i>allergy spray 24 hour nasal aerosol 55 mcg/act</i>         | KLS Aller-Cort          | OTC                       |
| <i>allergy spray 24 hour nasal suspension 50 mcg/act</i>      | ClariSpray              | OTC                       |
| <i>budesonide nasal suspension 32 mcg/act</i>                 |                         | OTC                       |
| <i>clarispray nasal suspension 50 mcg/act</i>                 | ClariSpray              | OTC                       |
| <i>cvs fluticasone propionate nasal suspension 50 mcg/act</i> | ClariSpray              | OTC                       |
| <i>cvs nasal allergy spray nasal aerosol 55 mcg/act</i>       | KLS Aller-Cort          | OTC                       |

| <b>Formulary Drug Name</b>  | <b>Reference</b>              | <b>Restrictions</b> |
|---|-------------------------------|---------------------|
| <i>eq allergy relief nasal suspension 50 mcg/act</i>                          | ClariSpray                    | OTC                 |
| <i>eq nasal allergy nasal aerosol 55 mcg/act</i>                              | KLS Aller-Cort                | OTC                 |
| <i>eql fluticasone childrens nasal suspension 50 mcg/act</i>                  | ClariSpray                    | OTC                 |
| <i>eql fluticasone propionate nasal suspension 50 mcg/act</i>                 | ClariSpray                    | OTC                 |
| <b>FLONASE ALLERGY RELIEF NASAL SUSPENSION 50 MCG/ACT</b>                     | allergy relief                | OTC                 |
| <b>FLONASE SENSIMIST NASAL SUSPENSION 27.5 MCG/SPRAY</b>                      |                               | OTC                 |
| <i>fluticasone propionate nasal suspension 50 mcg/act</i>                     | ClariSpray                    |                     |
| <i>gnp 24 hour nasal allergy nasal aerosol 55 mcg/act</i>                     | KLS Aller-Cort                | OTC                 |
| <i>gnp fluticasone propionate nasal suspension 50 mcg/act</i>                 | ClariSpray                    | OTC                 |
| <i>goodsense nasal allergy spray nasal aerosol 55 mcg/act</i>                 | KLS Aller-Cort                | OTC                 |
| <i>hm allergy relief nasal suspension 50 mcg/act</i>                          | ClariSpray                    | OTC                 |
| <i>cls aller-flo nasal suspension 50 mcg/act</i>                              | ClariSpray                    | OTC                 |
| <i>kp fluticasone propionate nasal suspension 50 mcg/act</i>                  | ClariSpray                    | OTC                 |
| <i>nasal allergy 24 hour nasal aerosol 55 mcg/act</i>                         | KLS Aller-Cort                | OTC                 |
| <i>ra budesonide nasal suspension 32 mcg/act</i>                              |                               | OTC                 |
| <i>ra nasal allergy nasal aerosol 55 mcg/act</i>                              | KLS Aller-Cort                | OTC                 |
| <i>rhinocort allergy nasal suspension 32 mcg/act</i>                          |                               | OTC                 |
| <i>sm allergy relief nasal suspension 50 mcg/act</i>                          | ClariSpray                    | OTC                 |
| <i>triamcinolone acetone nasal aerosol 55 mcg/act</i>                         | KLS Aller-Cort                | OTC                 |
| <b>*Systemic Decongestants***</b>   |                               |                     |
| <i>12 hour nasal decongestant oral tablet extended release 12 hour 120 mg</i> | Sudafed Sinus Congestion 12HR | OTC                 |
| <i>childrens silfedrine oral liquid 15 mg/5ml</i>                             | Sudafed Childrens             | OTC                 |
| <b>CVS NASAL DECONGESTANT ORAL CAPSULE 30 MG</b>                              |                               | OTC                 |
| <i>cvs nasal decongestant pe oral tablet 10 mg</i>                            | Sudogest PE                   | OTC                 |
| <i>cvs sinus pe decongestant oral tablet 10 mg</i>                            | Sudogest PE                   | OTC                 |
| <i>eq nasal decongestant pe oral tablet 10 mg</i>                             | Sudogest PE                   | OTC                 |
| <i>eql nasal decongestant pe oral tablet 10 mg</i>                            | Sudogest PE                   | OTC                 |
| <i>gnp nasal decongestant pe oral tablet 10 mg</i>                            | Sudogest PE                   | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>           | <b>Restrictions</b> |
|--|----------------------------|---------------------|
| <i>gnp suphedrin oral liquid 15 mg/5ml</i>                         | Sudafed Childrens          | OTC                 |
| <i>hm nasal decongestant pe oral tablet 10 mg</i>                  | Sudogest PE                | OTC                 |
| <i>kls suphedrine pe oral tablet 10 mg</i>                         | Sudogest PE                | OTC                 |
| <i>kp pseudoephedrine hcl oral tablet 60 mg</i>                    | SudoGest                   | OTC                 |
| <i>nasal decongestant pe max st oral tablet 10 mg</i>              | Sudogest PE                | OTC                 |
| <i>nasal decongestant pe oral tablet 10 mg</i>                     | Sudogest PE                | OTC                 |
| <i>nexafed oral tablet abuse-deterrent 30 mg</i>                   |                            | OTC                 |
| <i>non-pseudo sinus decongestant oral tablet 10 mg</i>             | Sudogest PE                | OTC                 |
| <i>phenylephrine hcl oral tablet 10 mg</i>                         | Sudogest PE                | OTC                 |
| <i>pseudoephedrine hcl oral tablet 60 mg</i>                       | SudoGest                   |                     |
| <i>px nasal decongestant pe oral tablet 10 mg</i>                  | Sudogest PE                | OTC                 |
| <i>qc suphedrine pe oral tablet 10 mg</i>                          | Sudogest PE                | OTC                 |
| <i>ra nasal decongestant pe oral tablet 10 mg</i>                  | Sudogest PE                | OTC                 |
| <i>ra sinus/congestion relief pe oral tablet 10 mg</i>             | Sudogest PE                | OTC                 |
| <i>sm nasal decongestant pe oral tablet 10 mg</i>                  | Sudogest PE                | OTC                 |
| <b>SUDAFED 24 HOUR ORAL TABLET EXTENDED RELEASE 24 HOUR 240 MG</b> |                            | OTC                 |
| <b>SUDAFED CHILDRENS ORAL LIQUID 15 MG/5ML</b>                     |                            | OTC                 |
| <b>SUDAFED PE CONGESTION ORAL TABLET 10 MG</b>                     | cvs sinus pe decongestant  | OTC                 |
| <b>SUDAFED PE MAXIMUM STRENGTH ORAL TABLET 10 MG</b>               | cvs sinus pe decongestant  | OTC                 |
| <i>sudogest oral tablet 60 mg</i>                                  | SudoGest                   |                     |
| <i>sudogest pe oral tablet 10 mg</i>                               | Sudogest PE                | OTC                 |
| <i>wal-phed pe oral tablet 10 mg</i>                               | Sudogest PE                | OTC                 |
| <i>zephrex-d oral tablet abuse-deterrent 30 mg</i>                 |                            | OTC                 |
| <b>*Topical Decongestants***</b>                                   |                            |                     |
| <i>12 hour nasal relief spray nasal solution 0.05 %</i>            | NRS Nasal Relief           | OTC                 |
| <i>12 hour nasal spray nasal solution 0.05 %</i>                   | NRS Nasal Relief           | OTC                 |
| <i>4-way fast acting nasal solution 1 %</i>                        | 4-Way Fast Acting          | OTC                 |
| <i>4-way menthol nasal solution 1 %</i>                            | 4-Way Fast Acting          | OTC                 |
| <b>AFRIN 12 HOUR NASAL SOLUTION 0.05 %</b>                         | 12 hour nasal relief spray | OTC                 |
| <b>AFRIN ALL NIGHT NODRIP NASAL SOLUTION 0.05 %</b>                | 12 hour nasal relief spray | OTC                 |
| <i>afrin childrens nasal solution 0.25 %</i>                       |                            | OTC                 |

| <b>Formulary Drug Name</b>                                | <b>Reference</b>           | <b>Restrictions</b> |
|---|----------------------------|---------------------|
| <b>AFRIN NASAL SPRAY NASAL SOLUTION 0.05 %</b>            | 12 hour nasal relief spray | OTC                 |
| <b>AFRIN NODRIP EXTRA MOISTURE NASAL SOLUTION 0.05 %</b>  | 12 hour nasal relief spray | OTC                 |
| <b>AFRIN NODRIP ORIGINAL NASAL SOLUTION 0.05 %</b>        | 12 hour nasal relief spray | OTC                 |
| <b>AFRIN NODRIP SEVERE CONGEST NASAL SOLUTION 0.05 %</b>  | 12 hour nasal relief spray | OTC                 |
| <b>AFRIN NODRIP SINUS NASAL SOLUTION 0.05 %</b>           | 12 hour nasal relief spray | OTC                 |
| <b>AFRIN SINUS NASAL SOLUTION 0.05 %</b>                  | 12 hour nasal relief spray | OTC                 |
| <i>anefrin spray nasal solution 0.05 %</i>                | NRS Nasal Relief           | OTC                 |
| <i>cvs nasal spray nasal solution 0.05 %</i>              | NRS Nasal Relief           | OTC                 |
| <i>cvs nose drops nasal solution 1 %</i>                  | 4-Way Fast Acting          | OTC                 |
| <b>DRISTAN SPRAY NASAL SOLUTION 0.05 %</b>                | 12 hour nasal relief spray | OTC                 |
| <b>DURATION 12 HOUR NASAL SPRAY NASAL SOLUTION 0.05 %</b> | 12 hour nasal relief spray | OTC                 |
| <b>DURATION SPRAY NASAL SOLUTION 0.05 %</b>               | 12 hour nasal relief spray | OTC                 |
| <i>eprhine nose drops nasal solution 1 %</i>              | 4-Way Fast Acting          | OTC                 |
| <i>eq nasal spray fast acting nasal solution 1 %</i>      | 4-Way Fast Acting          | OTC                 |
| <i>eq nasal spray nasal solution 0.05 %</i>               | NRS Nasal Relief           | OTC                 |
| <i>eql nasal spray 12 hour nasal solution 0.05 %</i>      | NRS Nasal Relief           | OTC                 |
| <i>eql nasal spray fast acting nasal solution 1 %</i>     | 4-Way Fast Acting          | OTC                 |
| <i>eql nasal spray no drip nasal solution 0.05 %</i>      | NRS Nasal Relief           | OTC                 |
| <i>gnp 12 hour nasal spray nasal solution 0.05 %</i>      | NRS Nasal Relief           | OTC                 |
| <i>gnp nasal spray extra moist nasal solution 0.05 %</i>  | NRS Nasal Relief           | OTC                 |
| <i>gnp nasal spray fast acting nasal solution 1 %</i>     | 4-Way Fast Acting          | OTC                 |
| <i>gnp nasal spray nasal solution 0.05 %</i>              | NRS Nasal Relief           | OTC                 |
| <i>gnp no drip nasal spray nasal solution 0.05 %</i>      | NRS Nasal Relief           | OTC                 |
| <i>gnp nose drops extra strength nasal solution 1 %</i>   | 4-Way Fast Acting          | OTC                 |
| <i>hm nasal spray nasal solution 0.05 %</i>               | NRS Nasal Relief           | OTC                 |
| <i>hm nose drops nasal solution 1 %</i>                   | 4-Way Fast Acting          | OTC                 |
| <i>hm sinus nasal spray nasal solution 0.05 %</i>         | NRS Nasal Relief           | OTC                 |
| <i>kls nasal decongestant spray nasal solution 0.05 %</i> | NRS Nasal Relief           | OTC                 |
| <i>long acting nasal spray nasal solution 0.05 %</i>      | NRS Nasal Relief           | OTC                 |
| <i>long lasting nasal spray nasal solution 0.05 %</i>     | NRS Nasal Relief           | OTC                 |



| <b>Formulary Drug Name</b>                                  | <b>Reference</b>           | <b>Restrictions</b> |
|---|----------------------------|---------------------|
| <i>mucinex nasal spray full force nasal solution 0.05 %</i> | NRS Nasal Relief           | OTC                 |
| <i>mucinex nasal spray moisture nasal solution 0.05 %</i>   | NRS Nasal Relief           | OTC                 |
| <i>mucinex sinus-max full force nasal solution 0.05 %</i>   | NRS Nasal Relief           | OTC                 |
| <i>nasal decongestant nasal solution 1 %</i>                | 4-Way Fast Acting          | OTC                 |
| <i>nasal decongestant spray nasal solution 0.05 %</i>       | NRS Nasal Relief           | OTC                 |
| <i>nasal four nasal solution 1 %</i>                        | 4-Way Fast Acting          | OTC                 |
| <i>nasal relief nasal solution 0.05 %</i>                   | NRS Nasal Relief           | OTC                 |
| <i>nasal spray 12 hour nasal solution 0.05 %</i>            | NRS Nasal Relief           | OTC                 |
| <i>nasal spray anti-drip nasal solution 0.05 %</i>          | NRS Nasal Relief           | OTC                 |
| <i>nasal spray extra moisturizing nasal solution 0.05 %</i> | NRS Nasal Relief           | OTC                 |
| <i>nasal spray max strength nasal solution 0.05 %</i>       | NRS Nasal Relief           | OTC                 |
| <i>nasal spray moisturizing 12 hr nasal solution 0.05 %</i> | NRS Nasal Relief           | OTC                 |
| <i>nasal spray nasal solution 0.05 %</i>                    | NRS Nasal Relief           | OTC                 |
| <i>nasal spray no drip nasal solution 0.05 %</i>            | NRS Nasal Relief           | OTC                 |
| <i>nasal spray sinus nasal solution 0.05 %</i>              | NRS Nasal Relief           | OTC                 |
| <b>NEO-SYNEPHRINE 12 HOUR SPRAY NASAL SOLUTION 0.05 %</b>   | 12 hour nasal relief spray | OTC                 |
| <b>NEO-SYNEPHRINE NASAL SOLUTION 0.25 %</b>                 |                            | OTC                 |
| <i>no drip nasal spray nasal solution 0.05 %</i>            | NRS Nasal Relief           | OTC                 |
| <i>nrs nasal relief nasal solution 0.05 %</i>               | NRS Nasal Relief           | OTC                 |
| <i>px nasal four nasal solution 1 %</i>                     | 4-Way Fast Acting          | OTC                 |
| <i>px nasal spray moisturizing nasal solution 0.05 %</i>    | NRS Nasal Relief           | OTC                 |
| <i>px no drip nasal spray nasal solution 0.05 %</i>         | NRS Nasal Relief           | OTC                 |
| <i>px original nasal spray nasal solution 0.05 %</i>        | NRS Nasal Relief           | OTC                 |
| <i>qc nasal relief moisturizing nasal solution 0.05 %</i>   | NRS Nasal Relief           | OTC                 |
| <i>qc no drip nasal relief nasal solution 0.05 %</i>        | NRS Nasal Relief           | OTC                 |
| <i>qlearquil nasal solution 0.05 %</i>                      | NRS Nasal Relief           | OTC                 |
| <i>ra 12 hour nasal spray nasal solution 0.05 %</i>         | NRS Nasal Relief           | OTC                 |
| <i>ra nasal decongestant nasal solution 1 %</i>             | 4-Way Fast Acting          | OTC                 |
| <i>ra nasal spray max st nasal solution 0.05 %</i>          | NRS Nasal Relief           | OTC                 |
| <i>ra nasal spray nasal solution 0.05 %</i>                 | NRS Nasal Relief           | OTC                 |

| <b>Formulary Drug Name</b>                                  | <b>Reference</b>           | <b>Restrictions</b> |
|---|----------------------------|---------------------|
| <i>ra nasal spray/moisturizing nasal solution 0.05 %</i>    | NRS Nasal Relief           | OTC                 |
| <i>ra nasal spray/sinus nasal solution 0.05 %</i>           | NRS Nasal Relief           | OTC                 |
| <i>ra nose drops extra strength nasal solution 1 %</i>      | 4-Way Fast Acting          | OTC                 |
| <i>ra severe congestion spray nasal solution 0.05 %</i>     | NRS Nasal Relief           | OTC                 |
| <i>sb 12hr nasal spray nasal solution 0.05 %</i>            | NRS Nasal Relief           | OTC                 |
| <i>sb nasal spray no-drip nasal solution 0.05 %</i>         | NRS Nasal Relief           | OTC                 |
| <i>sb sinus relief nasal solution 0.05 %</i>                | NRS Nasal Relief           | OTC                 |
| <i>sinus nasal spray 12 hour nasal solution 0.05 %</i>      | NRS Nasal Relief           | OTC                 |
| <i>sinus nasal spray nasal solution 0.05 %</i>              | NRS Nasal Relief           | OTC                 |
| <i>sinus relief mist nasal solution 0.05 %</i>              | NRS Nasal Relief           | OTC                 |
| <i>sinus relief nasal solution 0.05 %</i>                   | NRS Nasal Relief           | OTC                 |
| <i>sm nasal spray 12 hour nasal solution 0.05 %</i>         | NRS Nasal Relief           | OTC                 |
| <i>sm nasal spray moisturizing nasal solution 0.05 %</i>    | NRS Nasal Relief           | OTC                 |
| <i>sm nasal spray nasal solution 0.05 %</i>                 | NRS Nasal Relief           | OTC                 |
| <i>sm nasal spray sinus nasal solution 0.05 %</i>           | NRS Nasal Relief           | OTC                 |
| <i>sm nose drops nasal decongest nasal solution 1 %</i>     | 4-Way Fast Acting          | OTC                 |
| <i>tgt nasal decongestant 12-hour nasal solution 0.05 %</i> | NRS Nasal Relief           | OTC                 |
| <b>VICKS SINEX 12 HOUR DECONGEST NASAL SOLUTION 0.05 %</b>  | 12 hour nasal relief spray | OTC                 |
| <b>VICKS SINEX MOISTURIZING NASAL SOLUTION 0.05 %</b>       | 12 hour nasal relief spray | OTC                 |
| <b>VICKS SINEX SEVERE DECONGEST NASAL SOLUTION 0.05 %</b>   | 12 hour nasal relief spray | OTC                 |
| <i>wal-four nasal solution 1 %</i>                          | 4-Way Fast Acting          | OTC                 |
| <b>*Neuromuscular Agents*</b>                               |                            |                     |
| <b>*Benzothiazoles***</b>                                   |                            |                     |
| <i>riluzole oral tablet 50 mg</i>                           | Rilutek                    |                     |
| <b>*Nutrients*</b>  |                            |                     |
| <b>*Amino Acids-Single***</b>                               |                            |                     |
| <i>cvs l-lysine oral tablet 1000 mg, 500 mg</i>             |                            | OTC                 |
| <i>gnp l-lysine oral tablet 600 mg</i>                      |                            | OTC                 |
| <i>l-lysine hcl oral tablet 500 mg</i>                      |                            | OTC                 |
| <i>l-lysine oral tablet 1000 mg, 500 mg</i>                 |                            | OTC                 |

| <b>Formulary Drug Name</b>                                       | <b>Reference</b>          | <b>Restrictions</b> |
|--|---------------------------|---------------------|
| <i>lysine hcl oral tablet 1000 mg, 500 mg</i>                    |                           | OTC                 |
| <i>sm l-lysine oral tablet 500 mg</i>                            |                           | OTC                 |
| <b>*Lipotropic Combinations***</b>                               |                           |                     |
| <i>cvs lecithin oral capsule 1200 mg</i>                         |                           | OTC                 |
| <i>lecithin concentrate oral capsule 400 mg</i>                  |                           | OTC                 |
| <i>lecithin oral capsule 1200 mg</i>                             |                           | OTC                 |
| <b>*Misc. Nutritional Substances***</b>                          |                           |                     |
| <i>alp high3 oral capsule delayed release 600 mg</i>             |                           | OTC                 |
| <b>COROMEGA OMEGA 3 KIDS ORAL EMULSION</b>                       |                           | OTC                 |
| <b>COROMEGA OMEGA 3 SQUEEZE ORAL EMULSION</b>                    |                           | OTC                 |
| <i>cvs fish oil oral capsule 1000 mg</i>                         | Maximum EPA               | OTC                 |
| <i>cvs fish oil oral capsule 1200 mg</i>                         | Theragran-M Fish Oil Conc | OTC                 |
| <i>cvs fish oil oral capsule delayed release 1200 mg</i>         |                           | OTC                 |
| <i>cvs natural fish oil oral capsule 1000 mg</i>                 | Maximum EPA               | OTC                 |
| <i>cvs natural fish oil oral capsule 1200 mg</i>                 | Theragran-M Fish Oil Conc | OTC                 |
| <i>emulsified omega-3 oral liquid 712-1024 mg/15ml</i>           |                           | OTC                 |
| <i>epa oral capsule 1000 mg</i>                                  | Maximum EPA               | OTC                 |
| <i>eql fish oil oral capsule 1000 mg</i>                         | Maximum EPA               | OTC                 |
| <i>eql omega 3 fish oil oral capsule 1000 mg</i>                 | Maximum EPA               | OTC                 |
| <i>eql omega 3 fish oil oral capsule 1200 mg</i>                 | Theragran-M Fish Oil Conc | OTC                 |
| <i>eql omega 3 fish oil oral capsule delayed release 1000 mg</i> | OmegaPure 600 EC          | OTC                 |
| <i>eql omega 3 fish oil oral capsule delayed release 1200 mg</i> |                           | OTC                 |
| <i>eskimo purefa oral capsule 1000 mg</i>                        | Maximum EPA               | OTC                 |
| <i>fish oil burp-less oral capsule 1000 mg</i>                   | Maximum EPA               | OTC                 |
| <i>fish oil burp-less oral capsule 1200 mg</i>                   | Theragran-M Fish Oil Conc | OTC                 |
| <i>fish oil burp-less oral capsule 500 mg</i>                    | Ovega-3                   | OTC                 |
| <i>fish oil concentrate oral capsule 1000 mg</i>                 | Maximum EPA               | OTC                 |
| <i>fish oil concentrate oral capsule 300 mg</i>                  | Fish Oil Pearls           | OTC                 |
| <i>fish oil concentrate oral capsule 435 mg</i>                  |                           | OTC                 |
| <i>fish oil double strength oral capsule 1200 mg</i>             | Theragran-M Fish Oil Conc | OTC                 |
| <i>fish oil extra strength oral capsule 1200 mg</i>              | Theragran-M Fish Oil Conc | OTC                 |
| <i>fish oil extra strength oral capsule 435 mg</i>               |                           | OTC                 |
| <i>fish oil maximum strength oral capsule 1200 mg</i>            | Theragran-M Fish Oil Conc | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b>          | <b>Restrictions</b> |
|---|---------------------------|---------------------|
| <i>fish oil maximum strength oral capsule delayed release 1200 mg</i> |                           | OTC                 |
| <i>fish oil omega-3 oral capsule 1000 mg</i>                          | Maximum EPA               | OTC                 |
| <i>fish oil oral capsule 1000 mg</i>                                  | Maximum EPA               |                     |
| <i>fish oil oral capsule 1200 mg</i>                                  | Theragran-M Fish Oil Conc | OTC                 |
| <b>FISH OIL ORAL CAPSULE 1360 MG</b>                                  |                           | OTC                 |
| <i>fish oil oral capsule 435 mg</i>                                   |                           | OTC                 |
| <i>fish oil oral capsule 500 mg</i>                                   | Ovega-3                   | OTC                 |
| <i>fish oil oral capsule delayed release 1000 mg</i>                  | OmegaPure 600 EC          | OTC                 |
| <i>fish oil oral capsule delayed release 1200 mg</i>                  |                           | OTC                 |
| <b>FISH OIL ORAL TABLET CHEWABLE 875 MG</b>                           |                           | OTC                 |
| <b>FISH OIL PEARLS ORAL CAPSULE 150 MG, 180 MG, 183.33 MG</b>         |                           | OTC                 |
| <i>fish oil pearls oral capsule 300 mg</i>                            | Fish Oil Pearls           | OTC                 |
| <b>FISH OIL TRIPLE STRENGTH ORAL CAPSULE 1360 MG, 1400 MG</b>         |                           | OTC                 |
| <b>FISH OIL ULTRA ORAL CAPSULE 1400 MG</b>                            |                           | OTC                 |
| <i>fish oil/super potent/no burp oral capsule 1000 mg</i>             | Maximum EPA               | OTC                 |
| <i>gnp fish oil max st oral capsule delayed release 1200 mg</i>       |                           | OTC                 |
| <i>gnp fish oil oral capsule 1000 mg</i>                              | Maximum EPA               | OTC                 |
| <i>gnp fish oil oral capsule 435 mg</i>                               |                           | OTC                 |
| <i>gnp fish oil oral capsule delayed release 1000 mg</i>              | OmegaPure 600 EC          | OTC                 |
| <i>gnp fish oil oral capsule delayed release 1200 mg</i>              |                           | OTC                 |
| <b>GNP FISH OIL ORAL CAPSULE DELAYED RELEASE 840 MG</b>               |                           | OTC                 |
| <i>hm fish oil oral capsule 1000 mg</i>                               | Maximum EPA               | OTC                 |
| <i>hm fish oil oral capsule 1200 mg</i>                               | Theragran-M Fish Oil Conc | OTC                 |
| <b>HM FISH OIL ORAL CAPSULE 554 MG</b>                                |                           | OTC                 |
| <i>kp fish oil oral capsule 1200 mg</i>                               | Theragran-M Fish Oil Conc | OTC                 |
| <i>kp omega-3 fish oil oral capsule 1200 mg</i>                       | Theragran-M Fish Oil Conc | OTC                 |
| <i>kp omega-3 fish oil oral capsule delayed release 1200 mg</i>       |                           | OTC                 |
| <i>maxepa oral capsule 1000 mg</i>                                    | Maximum EPA               | OTC                 |
| <i>maximum epa oral capsule 1000 mg</i>                               | Maximum EPA               | OTC                 |
| <i>norwegian salmon oil oral capsule 1000 mg</i>                      | Maximum EPA               | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>          | <b>Restrictions</b> |
|--|---------------------------|---------------------|
| <i>omega 3 500 oral capsule 500 mg</i>                                   | Ovega-3                   | OTC                 |
| <i>omega 3 oral capsule 1000 mg</i>                                      | Maximum EPA               | OTC                 |
| <i>omega 3 oral capsule 1200 mg</i>                                      | Theragran-M Fish Oil Conc | OTC                 |
| <i>omega essentials basic oral liquid</i>                                |                           | OTC                 |
| <i>omega iii epa+dha oral capsule 1000 mg</i>                            | Maximum EPA               | OTC                 |
| <i>omega-3 cf oral capsule 1000 mg</i>                                   | Maximum EPA               | OTC                 |
| <i>omega-3 fish oil concentrate oral capsule delayed release 1000 mg</i> | OmegaPure 600 EC          | OTC                 |
| <b>OMEGA-3 FISH OIL EX ST ORAL CAPSULE 880 MG</b>                        |                           | OTC                 |
| <i>omega-3 fish oil oral capsule 1000 mg</i>                             | Maximum EPA               | OTC                 |
| <i>omega-3 fish oil oral capsule 1200 mg</i>                             | Theragran-M Fish Oil Conc | OTC                 |
| <i>omega-3 fish oil oral capsule 300 mg</i>                              | Fish Oil Pearls           | OTC                 |
| <i>omega-3 fish oil oral capsule 500 mg</i>                              | Ovega-3                   | OTC                 |
| <i>omega-3 oral capsule 1000 mg</i>                                      | Maximum EPA               | OTC                 |
| <b>OMEGA-3 ORAL CAPSULE 1400 MG</b>                                      |                           | OTC                 |
| <i>omega-3 oral capsule 300 mg</i>                                       | Fish Oil Pearls           | OTC                 |
| <b>OMEGA-3 ORAL CAPSULE DELAYED RELEASE 350 MG</b>                       |                           | OTC                 |
| <i>omega-3 plus oral capsule 1000 mg</i>                                 | Maximum EPA               | OTC                 |
| <b>OMEGAPURE 780 EC ORAL CAPSULE DELAYED RELEASE 1400 MG</b>             |                           | OTC                 |
| <i>omera oral capsule 1000 mg</i>  | Maximum EPA               | OTC                 |
| <i>ovega-3 oral capsule 500 mg</i>                                       | Ovega-3                   | OTC                 |
| <i>pa fish oil oral capsule 1000 mg</i>                                  | Maximum EPA               | OTC                 |
| <b>PRENATAL OMEGA BABY ORAL EMULSION</b>                                 |                           | OTC                 |
| <i>px fish oil oral capsule 1000 mg</i>                                  | Maximum EPA               | OTC                 |
| <i>ra fish oil oral capsule 1000 mg</i>                                  | Maximum EPA               | OTC                 |
| <i>ra fish oil oral capsule delayed release 1000 mg</i>                  | OmegaPure 600 EC          | OTC                 |
| <b>RA FISH OIL ORAL CAPSULE DELAYED RELEASE 1400 MG</b>                  |                           | OTC                 |
| <i>ra fish oil oral capsule delayed release 600 mg</i>                   |                           | OTC                 |
| <i>sam-e.p.a. oral capsule 200-300 mg</i>                                | Ovega-3                   | OTC                 |
| <i>sb omega-3 fish oil oral capsule 1000 mg</i>                          | Maximum EPA               | OTC                 |
| <i>sea-omega 30 oral capsule 1200 mg</i>                                 | Theragran-M Fish Oil Conc | OTC                 |
| <i>sea-omega oral capsule 1000 mg</i>                                    | Maximum EPA               | OTC                 |
| <i>sm fish oil oral capsule 1000 mg</i>                                  | Maximum EPA               | OTC                 |
| <i>sm fish oil oral capsule 1200 mg</i>                                  | Theragran-M Fish Oil Conc | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b>          | <b>Restrictions</b> |
|---|---------------------------|---------------------|
| <b>SM FISH OIL ORAL CAPSULE 554 MG</b>                            |                           | OTC                 |
| <i>sm omega-3 fish oil oral capsule 1200 mg</i>                   | Theragran-M Fish Oil Conc | OTC                 |
| <i>super dha gems oral capsule 1000 mg</i>                        | Maximum EPA               | OTC                 |
| <i>super omega 3 epa/dha oral capsule 1000 mg</i>                 | Maximum EPA               | OTC                 |
| <i>super omega 3 oral capsule 500 mg</i>                          | Ovega-3                   | OTC                 |
| <i>super omega-3 oral capsule 1000 mg</i>                         | Maximum EPA               | OTC                 |
| <i>the very finest fish oil oral liquid</i>                       |                           | OTC                 |
| <i>the very finest fish oil/kids oral liquid</i>                  |                           | OTC                 |
| <i>theragran-m fish oil conc oral capsule 1200 mg</i>             | Theragran-M Fish Oil Conc | OTC                 |
| <i>theromega oral capsule 1000 mg</i>                             | Maximum EPA               | OTC                 |
| <i>tyler eskimo-3 oral capsule 500 mg</i>                         | Ovega-3                   | OTC                 |
| <i>tyler eskimo-3 oral liquid</i>                                 |                           | OTC                 |
| <i>ultra omega 3 oral capsule 1000 mg</i>                         | Maximum EPA               | OTC                 |
| <b>ULTRA OMEGA-3 FISH OIL ORAL CAPSULE 1400 MG</b>                |                           | OTC                 |
| <b>*Ophthalmic Agents*</b>  |                           |                     |
| <b>*Artificial Tear And Lubricant Combinations***</b>             |                           |                     |
| <i>akwa tears ophthalmic ointment 83-15 %</i>                     | Altalube                  | OTC                 |
| <i>altalube ophthalmic ointment 85-15 %</i>                       | Altalube                  | OTC                 |
| <i>artificial tears ophthalmic ointment 83-15 %</i>               | Altalube                  | OTC                 |
| <i>artificial tears ophthalmic solution 0.1-0.3 %</i>             | GenTeal Tears             | OTC                 |
| <i>artificial tears ophthalmic solution 0.2-0.2-1 %</i>           |                           | OTC                 |
| <i>artificial tears ophthalmic solution 1-0.3 %</i>               | Moisture Eyes             | OTC                 |
| <i>cvs artificial tears ophthalmic solution 1-0.3 %</i>           | Moisture Eyes             | OTC                 |
| <i>cvs eye lubricant ophthalmic ointment</i>                      | Altalube                  | OTC                 |
| <i>cvs lubricant drops ophthalmic gel 0.25-0.3 %</i>              |                           | OTC                 |
| <i>cvs lubricant eye drops (pf) ophthalmic solution 0.4-0.3 %</i> | Systane Preservative Free | OTC                 |
| <i>cvs lubricant eye drops ophthalmic solution 0.4-0.3 %</i>      | Systane                   | OTC                 |
| <i>cvs lubricating/dry eye ophthalmic solution 0.5-0.9 %</i>      | Refresh Optive            | OTC                 |
| <i>cvs natural tears ophthalmic solution 0.1-0.3 %</i>            | Bion Tears PF             | OTC                 |
| <b>DAKRINA OPHTHALMIC SOLUTION 2.7-2 %</b>                        |                           | OTC                 |



| <b>Formulary Drug Name</b>   | <b>Reference</b>          | <b>Restrictions</b> |
|--|---------------------------|---------------------|
| <b>DWELLE OPHTHALMIC SOLUTION 2.7-2 %</b>                          |                           | OTC                 |
| <i>eq artificial tears ophthalmic solution 1-0.3 %</i>             | Moisture Eyes             | OTC                 |
| <i>eq lubricant eye drops ophthalmic solution 0.4-0.3 %</i>        | Systane                   | OTC                 |
| <i>eq lubricating eye drops ophthalmic solution 0.5-0.9 %</i>      | Refresh Optive            | OTC                 |
| <i>eye lubricant ophthalmic ointment</i>                           | Altalube                  | OTC                 |
| <i>for sty relief ophthalmic ointment 31.9-57.7 %</i>              | Altalube                  | OTC                 |
| <b>FRESHKOTE OPHTHALMIC SOLUTION 2.7-2 %</b>                       |                           | OTC                 |
| <b>GENTEAL OPHTHALMIC GEL 0.25-0.3 %</b>                           | cvs lubricant drops       | OTC                 |
| <i>genteal tears night-time ophthalmic ointment</i>                | Altalube                  | OTC                 |
| <i>genteal tears ophthalmic solution 0.1-0.3 %</i>                 | GenTeal Tears             | OTC                 |
| <i>gnp lubricant eye drops ophthalmic solution 0.4-0.3 %</i>       | Systane                   | OTC                 |
| <i>gnp lubricant pm ophthalmic ointment</i>                        | Altalube                  | OTC                 |
| <i>gnp ultra lubricant eye drops ophthalmic solution 0.4-0.3 %</i> | Systane                   | OTC                 |
| <i>goodsense lubricant eye drops ophthalmic solution 0.4-0.3 %</i> | Systane Preservative Free | OTC                 |
| <i>hm lubricating tears ophthalmic solution 0.4-0.3 %</i>          | Systane                   | OTC                 |
| <i>hypotears ophthalmic ointment</i>                               | Altalube                  | OTC                 |
| <i>lubricant drops/dual-action ophthalmic solution 0.5-0.9 %</i>   | Refresh Optive            | OTC                 |
| <i>lubricant eye drops (pf) ophthalmic solution 0.4-0.3 %</i>      | Systane Preservative Free | OTC                 |
| <i>lubricant eye drops ophthalmic solution 0.4-0.3 %</i>           | Systane                   | OTC                 |
| <i>lubricant eye fast acting ophthalmic ointment</i>               | Altalube                  | OTC                 |
| <i>lubricant eye nighttime ophthalmic ointment</i>                 | Altalube                  | OTC                 |
| <i>lubricant eye ophthalmic ointment</i>                           | Altalube                  | OTC                 |
| <i>lubricating eye drops ophthalmic solution 0.5-0.9 %</i>         | Refresh Optive            | OTC                 |
| <i>lubrifresh p.m. ophthalmic ointment</i>                         | Altalube                  | OTC                 |
| <i>natures tears ophthalmic solution 0.1-0.3 %</i>                 | GenTeal Tears             | OTC                 |
| <i>puralube ophthalmic ointment 85-15 %</i>                        | Altalube                  | OTC                 |
| <i>ra artificial tears ophthalmic solution 1-0.3 %</i>             | Moisture Eyes             | OTC                 |
| <i>ra lubricant eye ophthalmic solution 0.1-0.3 %</i>              | Bion Tears PF             | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b>             | <b>Restrictions</b> |
|---|------------------------------|---------------------|
| <i>ra lubricant eye ophthalmic solution 0.4-0.3 %</i>             | Systane                      | OTC                 |
| <i>ra lubricant eye ophthalmic solution 1-0.3 %</i>               | Moisture Eyes                | OTC                 |
| <i>refresh lacri-lube ophthalmic ointment</i>                     | Altalube                     | OTC                 |
| <b>REFRESH OPHTHALMIC SOLUTION 1.4-0.6 %</b>                      |                              | OTC                 |
| <b>REFRESH OPTIVE ADVANCED OPHTHALMIC SOLUTION 0.5-1-0.5 %</b>    |                              | OTC                 |
| <b>REFRESH OPTIVE MEGA-3 OPHTHALMIC SOLUTION 0.5-1-0.5 %</b>      |                              | OTC                 |
| <b>REFRESH OPTIVE OPHTHALMIC GEL 1-0.9 %</b>                      |                              | OTC                 |
| <b>REFRESH OPTIVE OPHTHALMIC SOLUTION 0.5-0.9 %</b>               | lubricant drops/dual-action  | OTC                 |
| <b>REFRESH OPTIVE SENSITIVE OPHTHALMIC SOLUTION 0.5-0.9 %</b>     |                              | OTC                 |
| <i>refresh p.m. ophthalmic ointment</i>                           | Altalube                     | OTC                 |
| <b>REFRESH RELIEVA PF OPHTHALMIC SOLUTION 0.5-1 %</b>             |                              | OTC                 |
| <i>retaine pm ophthalmic ointment</i>                             | Altalube                     | OTC                 |
| <i>sm lubricant eye drops ophthalmic solution 0.4-0.3 %</i>       | Systane                      | OTC                 |
| <i>sm lubricating tears ophthalmic solution 0.4-0.3 %</i>         | Systane                      | OTC                 |
| <i>soothe night time ophthalmic ointment</i>                      | Altalube                     | OTC                 |
| <i>stye ophthalmic ointment 31.9-57.7 %</i>                       | Altalube                     | OTC                 |
| <i>systane nighttime ophthalmic ointment</i>                      | Altalube                     | OTC                 |
| <b>SYSTANE OPHTHALMIC GEL 0.4-0.3 %</b>                           | dry eye relief               | OTC                 |
| <b>SYSTANE OPHTHALMIC SOLUTION 0.4-0.3 %</b>                      | cvs lubricant eye drops      | OTC                 |
| <b>SYSTANE PRESERVATIVE FREE OPHTHALMIC SOLUTION 0.4-0.3 %</b>    | cvs lubricant eye drops (pf) | OTC                 |
| <b>SYSTANE ULTRA HOME-AWAY PACK OPHTHALMIC SOLUTION 0.4-0.3 %</b> | cvs lubricant eye drops      | OTC                 |
| <b>SYSTANE ULTRA OPHTHALMIC SOLUTION 0.4-0.3 %</b>                | cvs lubricant eye drops      | OTC                 |
| <b>SYSTANE ULTRA PF OPHTHALMIC SOLUTION 0.4-0.3 %</b>             | cvs lubricant eye drops (pf) | OTC                 |
| <i>tears again ophthalmic ointment</i>                            | Altalube                     | OTC                 |
| <i>tears naturale free ophthalmic solution 0.1-0.3 %</i>          | Bion Tears PF                | OTC                 |
| <b>TEARS NATURALE PM OPHTHALMIC OINTMENT 3-94 %</b>               | cvs eye lubricant            | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>              | <b>Restrictions</b>          |
|--|-------------------------------|------------------------------|
| <i>tears pure ophthalmic solution 0.1-0.3 %</i>                    | GenTeal Tears                 | OTC                          |
| <i>tgt lubricant eye drops ophthalmic solution 1-0.3 %</i>         | Moisture Eyes                 | OTC; QLL (15 ML per 30 days) |
| <i>tgt lubricant eye nighttime ophthalmic ointment 83-15 %</i>     | Altalube                      | OTC                          |
| <i>ultra fresh pm ophthalmic ointment</i>                          | Altalube                      | OTC                          |
| <i>ultra lubricant eye drops ophthalmic solution 0.4-0.3 %</i>     | Systane                       | OTC                          |
| <i>wh petrol-mineral oil-lanolin ophthalmic ointment 0.1-0.1 %</i> | Altalube                      | OTC                          |
| <b>*Artificial Tear Solutions***</b>                               |                               |                              |
| <i>genteal tears ophthalmic solution 0.1-0.2-0.3 %</i>             | GenTeal Tears                 | OTC                          |
| <i>just tears eye drops ophthalmic solution</i>                    | GenTeal Tears                 | OTC                          |
| <i>sm artificial tears ophthalmic solution</i>                     | GenTeal Tears                 | OTC                          |
| <i>soothe hydration ophthalmic solution 1.25 %</i>                 | GenTeal Tears                 | OTC                          |
| <i>soothe xp ophthalmic solution</i>                               | GenTeal Tears                 | OTC                          |
| <i>soothe xp xtra protection ophthalmic solution</i>               | GenTeal Tears                 | OTC                          |
| <i>systane contacts ophthalmic solution</i>                        | GenTeal Tears                 | OTC; QLL (15 ML per 30 days) |
| <i>tears again advanced eyelid ophthalmic solution</i>             | GenTeal Tears                 | OTC                          |
| <i>tears again ophthalmic solution</i>                             | GenTeal Tears                 | OTC                          |
| <b>*Artificial Tears And Lubricants***</b>                         |                               |                              |
| <i>artificial tears ophthalmic solution 1.4 %</i>                  |                               | OTC; QLL (15 ML per 30 days) |
| <b>BIOLLE GEL TEARS OPHTHALMIC GEL 1 %</b>                         | carboxymethylcellulose sod pf | OTC                          |
| <i>biolle tears ophthalmic solution 0.5 %</i>                      | Biolle Tears                  | OTC; QLL (15 EA per 30 days) |
| <i>cvs lubricant drops ophthalmic gel 1 %</i>                      | Refresh Liquigel              | OTC                          |
| <i>cvs lubricant drops ophthalmic solution 0.6 %</i>               | Systane Balance               | OTC                          |
| <i>cvs lubricant eye drops ophthalmic solution 0.5 %</i>           | Ultra Fresh                   | OTC; QLL (15 ML per 30 days) |
| <i>eq gentle lubricant ophthalmic solution 0.3 %</i>               |                               | OTC                          |
| <i>eq restore plus lubricant eye ophthalmic solution 0.5 %</i>     | Biolle Tears                  | OTC; QLL (15 EA per 30 days) |
| <i>eq restore tears ophthalmic solution 0.5 %</i>                  | Ultra Fresh                   | OTC; QLL (15 ML per 30 days) |
| <i>eq revive plus lubricant eye ophthalmic solution 0.5 %</i>      | Biolle Tears                  | OTC; QLL (15 EA per 30 days) |
| <i>eq revive plus ophthalmic solution 0.5 %</i>                    | Biolle Tears                  | OTC; QLL (15 EA per 30 days) |
| <b>GENTEAL MILD TO MODERATE OPHTHALMIC SOLUTION 0.3 %</b>          |                               | OTC                          |

| <b>Formulary Drug Name</b>  | <b>Reference</b>              | <b>Restrictions</b>          |
|---|-------------------------------|------------------------------|
| <b>GENTEAL SEVERE OPHTHALMIC GEL 0.3 %</b>                            |                               | OTC                          |
| <i>gnp lubricating plus eye drops ophthalmic solution 0.5 %</i>       | Biolle Tears                  | OTC; QLL (15 EA per 30 days) |
| <i>goodsense lubricating eye drop ophthalmic solution 0.5 %</i>       | Biolle Tears                  | OTC; QLL (15 EA per 30 days) |
| <i>hm lubricating plus ophthalmic solution 0.5 %</i>                  | Biolle Tears                  | OTC; QLL (15 EA per 30 days) |
| <b>ISOPTO TEARS OPHTHALMIC SOLUTION 0.5 %</b>                         |                               | OTC                          |
| <i>liquitears ophthalmic solution 1.4 %</i>                           |                               | OTC                          |
| <i>lubricant eye drops ophthalmic solution 0.5 %</i>                  | Ultra Fresh                   | OTC; QLL (15 ML per 30 days) |
| <i>lubricant eye drops ophthalmic solution 0.6 %</i>                  | Systane Balance               | OTC                          |
| <i>lubricating plus eye drops ophthalmic solution 0.5 %</i>           | Biolle Tears                  | OTC; QLL (15 EA per 30 days) |
| <i>polyvinyl alcohol ophthalmic solution 1.4 %</i>                    |                               |                              |
| <i>pure &amp; gentle lubricant ophthalmic solution 3 mg/ml</i>        |                               | OTC                          |
| <i>ra lubricant eye drops ophthalmic solution 0.6 %</i>               | Systane Balance               | OTC; QLL (10 ML per 30 days) |
| <b>REFRESH LIQUIGEL OPHTHALMIC SOLUTION 1 %</b>                       | artificial tears              | OTC; QLL (15 ML per 30 days) |
| <i>retaine cmc ophthalmic solution 0.5 %</i>                          | Biolle Tears                  | OTC; QLL (15 EA per 30 days) |
| <i>sm lubricating plus ophthalmic solution 0.5 %</i>                  | Biolle Tears                  | OTC; QLL (15 EA per 30 days) |
| <b>STERILE LUBRICANT OPHTHALMIC LIQUID 0.7 %</b>                      |                               | OTC                          |
| <b>SYSTANE OVERNIGHT THERAPY OPHTHALMIC GEL 0.3 %</b>                 |                               | OTC                          |
| <b>THERATEARS OPHTHALMIC GEL 1 %</b>                                  | carboxymethylcellulose sod pf | OTC                          |
| <b>THERATEARS OPHTHALMIC SOLUTION 0.25 %</b>                          | cvs lubricant eye drops       | OTC; QLL (15 ML per 30 days) |
| <i>ultra fresh ophthalmic solution 0.5 %</i>                          | Ultra Fresh                   | OTC; QLL (15 ML per 30 days) |
| <b>*Beta-Blockers - Ophthalmic Combinations***</b>                    |                               |                              |
| <i>brimonidine tartrate-timolol ophthalmic solution 0.2-0.5 %</i>     | Combigan                      |                              |
| <b>COMBIGAN OPHTHALMIC SOLUTION 0.2-0.5 %</b>                         | brimonidine tartrate-timolol  |                              |
| <i>dorzolamide hcl-timolol mal ophthalmic solution 22.3-6.8 mg/ml</i> | Cosopt                        |                              |
| <b>*Beta-Blockers - Ophthalmic***</b>                                 |                               |                              |
| <i>betaxolol hcl ophthalmic solution 0.5 %</i>                        |                               |                              |

| <b>Formulary Drug Name</b>   | <b>Reference</b> | <b>Restrictions</b>      |
|--|------------------|--------------------------|
| <i>carteolol hcl ophthalmic solution 1 %</i>                         |                  |                          |
| <i>levobunolol hcl ophthalmic solution 0.5 %</i>                     |                  |                          |
| <i>timolol maleate ophthalmic gel forming solution 0.25 %, 0.5 %</i> |                  |                          |
| <i>timolol maleate ophthalmic solution 0.25 %, 0.5 %</i>             |                  |                          |
| <b>*Cycloplegic Mydriatics***</b>                                    |                  |                          |
| <i>altafrin ophthalmic solution 10 %</i>                             | Altafrin         |                          |
| <i>altafrin ophthalmic solution 2.5 %</i>                            | Altafrin         | QLL (2 ML per 30 days)   |
| <b>ATROPINE SULFATE OPHTHALMIC OINTMENT 1 %</b>                      |                  | QLL (3.5 GM per 30 days) |
| <i>cyclopentolate hcl ophthalmic solution 1 %, 2 %</i>               | Cyclogyl         | QLL (3 ML per 30 days)   |
| <b>ISOPTO ATROPINE OPHTHALMIC SOLUTION 1 %</b>                       | atropine sulfate | QLL (5 ML per 30 days)   |
| <i>phenylephrine hcl ophthalmic solution 10 %</i>                    | Altafrin         |                          |
| <i>phenylephrine hcl ophthalmic solution 2.5 %</i>                   | Altafrin         | QLL (2 ML per 30 days)   |
| <i>tropicamide ophthalmic solution 0.5 %</i>                         |                  | QLL (15 ML per 30 days)  |
| <i>tropicamide ophthalmic solution 1 %</i>                           | Mydriacyl        | QLL (15 ML per 30 days)  |
| <b>*Gonioscopic Solutions***</b>                                     |                  |                          |
| <b>GONAK OPHTHALMIC SOLUTION 2.5 %</b>                               |                  | OTC                      |
| <i>goniosoft ophthalmic solution 2.5 %</i>                           | Goniotaire       | OTC                      |
| <i>goniotaire ophthalmic solution 2.5 %</i>                          | Goniotaire       | OTC                      |
| <i>goniovisc ophthalmic solution 2.5 %</i>                           | Goniotaire       | OTC                      |
| <b>*Lymphocyte Function-Associated Antigen-1 (Lfa-1) Antag***</b>    |                  |                          |
| <b>XIIDRA OPHTHALMIC SOLUTION 5 %</b>                                |                  |                          |
| <b>*Miotics - Direct Acting***</b>                                   |                  |                          |
| <i>pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %</i>             |                  |                          |
| <b>*Ophthalmic Antiallergic***</b>                                   |                  |                          |
| <i>alaway childrens allergy ophthalmic solution 0.025 %</i>          | Alaway           | OTC                      |
| <i>alaway ophthalmic solution 0.025 %</i>                            | Alaway           | OTC                      |
| <i>azelastine hcl ophthalmic solution 0.05 %</i>                     |                  | QLL (6 ML per 30 days)   |
| <i>cromolyn sodium ophthalmic solution 4 %</i>                       |                  |                          |
| <i>eye allergy itch/redness rel ophthalmic solution 0.1 %</i>        | Pataday          | OTC                      |
| <i>eye itch relief ophthalmic solution 0.025 %</i>                   | Alaway           | OTC                      |

| <b>Formulary Drug Name</b>  | <b>Reference</b> | <b>Restrictions</b>      |
|---|------------------|--------------------------|
| <i>gnp eye itch relief ophthalmic solution 0.025 %</i>                  | Alaway           | OTC                      |
| <i>gnp itchy eye ophthalmic solution 0.025 %</i>                        | Alaway           | OTC                      |
| <i>gnp olopatadine hcl ophthalmic solution 0.1 %</i>                    | Pataday          | OTC                      |
| <i>hm eye allergy itch/red relief ophthalmic solution 0.1 %</i>         | Pataday          | OTC                      |
| <i>ketotifen fumarate ophthalmic solution 0.025 %</i>                   | Alaway           |                          |
| <i>kp ketotifen fumarate ophthalmic solution 0.025 %</i>                | Alaway           | OTC                      |
| <i>olopatadine hcl ophthalmic solution 0.1 %, 0.2 %</i>                 | Pataday          |                          |
| <b>PATADAY OPHTHALMIC SOLUTION 0.7 %</b>                                |                  | OTC                      |
| <i>sm eye itch relief ophthalmic solution 0.025 %</i>                   | Alaway           | OTC                      |
| <b>ZADITOR OPHTHALMIC SOLUTION 0.025 %</b>                              | eye itch relief  | OTC                      |
| <b>*Ophthalmic Antibiotics***</b>                                       |                  |                          |
| <i>bacitracin ophthalmic ointment 500 unit/gm</i>                       |                  | QLL (3.5 GM per 30 days) |
| <i>ciprofloxacin hcl ophthalmic solution 0.3 %</i>                      |                  |                          |
| <i>erythromycin ophthalmic ointment 5 mg/gm</i>                         |                  |                          |
| <i>gentak ophthalmic ointment 0.3 %</i>                                 |                  |                          |
| <i>gentamicin sulfate ophthalmic solution 0.3 %</i>                     |                  |                          |
| <i>moxifloxacin hcl ophthalmic solution 0.5 %</i>                       | Vigamox          |                          |
| <i>ofloxacin ophthalmic solution 0.3 %</i>                              | Ocuflox          |                          |
| <i>tobramycin ophthalmic solution 0.3 %</i>                             |                  |                          |
| <b>*Ophthalmic Antifungal***</b>  |                  |                          |
| <b>NATACYN OPHTHALMIC SUSPENSION 5 %</b>                                |                  | QLL (15 ML per 30 days)  |
| <b>*Ophthalmic Anti-Infective Combinations***</b>                       |                  |                          |
| <i>bacitracin-polymyxin b ophthalmic ointment 500-10000 unit/gm</i>     | Polycin          |                          |
| <i>neomycin-bacitracin zn-polymyx ophthalmic ointment 5-400-10000</i>   | Neo-Polycin      |                          |
| <i>neo-polycin ophthalmic ointment 3.5-400-10000</i>                    | Neo-Polycin      |                          |
| <i>polycin ophthalmic ointment 500-10000 unit/gm</i>                    | Polycin          |                          |
| <i>polymyxin b-trimethoprim ophthalmic solution 10000-0.1 unit/ml-%</i> | Polytrim         |                          |



| <b>Formulary Drug Name</b>                                      | <b>Reference</b>       | <b>Restrictions</b>      |
|---|------------------------|--------------------------|
| <b>*Ophthalmic Antivirals***</b>                                |                        |                          |
| <i>trifluridine ophthalmic solution 1 %</i>                     |                        | QLL (7.5 ML per 30 days) |
| <b>*Ophthalmic Carbonic Anhydrase Inhibitors***</b>             |                        |                          |
| <b>AZOPT OPHTHALMIC SUSPENSION 1 %</b>                          | brinzolamide           |                          |
| <i>brinzolamide ophthalmic suspension 1 %</i>                   | Azopt                  |                          |
| <i>dorzolamide hcl ophthalmic solution 2 %</i>                  |                        |                          |
| <b>*Ophthalmic Decongestant Combinations***</b>                 |                        |                          |
| <i>allergy eye ophthalmic solution 0.025-0.3 %</i>              | Naphcon-A              | OTC                      |
| <i>cvs eye allergy relief ophthalmic solution 0.025-0.3 %</i>   | Naphcon-A              | OTC                      |
| <i>eq eye allergy relief ophthalmic solution 0.027-0.315 %</i>  | Opcon-A                | OTC                      |
| <i>eql eye drops ac ophthalmic solution 0.05-0.25 %</i>         | Visine-AC              | OTC                      |
| <i>eye allergy relief ophthalmic solution 0.025-0.3 %</i>       | Naphcon-A              | OTC                      |
| <i>eye allergy relief ophthalmic solution 0.027-0.315 %</i>     | Opcon-A                | OTC                      |
| <i>eye drops allergy relief ophthalmic solution 0.05-0.25 %</i> | Visine-AC              | OTC                      |
| <i>eye drops ar ophthalmic solution 0.05-0.25 %</i>             | Visine-AC              | OTC                      |
| <b>NAPHCON-A OPHTHALMIC SOLUTION 0.025-0.3 %</b>                | allergy eye            | OTC                      |
| <b>OPCON-A OPHTHALMIC SOLUTION 0.027-0.315 %</b>                | eq eye allergy relief  | OTC                      |
| <i>ra eye allergy relief ophthalmic solution 0.027-0.315 %</i>  | Opcon-A                | OTC                      |
| <i>relief drops ophthalmic solution 0.05-0.25 %</i>             | Visine-AC              | OTC                      |
| <i>relief eye drops ophthalmic solution 0.05-0.25 %</i>         | Visine-AC              | OTC                      |
| <i>tgt eye allergy relief ophthalmic solution 0.027-0.315 %</i> | Opcon-A                | OTC                      |
| <i>visine-a ophthalmic solution 0.025-0.3 %</i>                 | Naphcon-A              | OTC                      |
| <i>visine-ac ophthalmic solution 0.05-0.25 %</i>                | Visine-AC              | OTC                      |
| <b>*Ophthalmic Decongestants***</b>                             |                        |                          |
| <i>cvs eye drops ophthalmic solution 0.05 %</i>                 | Visine Red Eye Comfort | OTC                      |
| <i>eq eye drops ophthalmic solution 0.05 %</i>                  | Visine Red Eye Comfort | OTC                      |
| <i>eql eye drops ophthalmic solution 0.05 %</i>                 | Visine Red Eye Comfort | OTC                      |

| <b>Formulary Drug Name</b>                                   | <b>Reference</b>       | <b>Restrictions</b> |
|--|------------------------|---------------------|
| <i>eye drops ophthalmic solution 0.05 %</i>                  | Visine Red Eye Comfort | OTC                 |
| <i>gnp eye drops ophthalmic solution 0.05 %</i>              | Visine Red Eye Comfort | OTC                 |
| <i>goodsense eye drops ophthalmic solution 0.05 %</i>        | Visine Red Eye Comfort | OTC                 |
| <i>hm eye drops ophthalmic solution 0.05 %</i>               | Visine Red Eye Comfort | OTC                 |
| <i>opti-clear ophthalmic solution 0.05 %</i>                 | Visine Red Eye Comfort | OTC                 |
| <i>px sterile eye drops ophthalmic solution 0.05 %</i>       | Visine Red Eye Comfort | OTC                 |
| <i>redness reliever eye drops ophthalmic solution 0.05 %</i> | Visine Red Eye Comfort | OTC                 |
| <i>sm eye drops ophthalmic solution 0.05 %</i>               | Visine Red Eye Comfort | OTC                 |
| <i>tetrahydrozoline hcl ophthalmic solution 0.05 %</i>       | Visine Red Eye Comfort | OTC                 |
| <b>VISINE OPHTHALMIC SOLUTION 0.05 %</b>                     | cvs eye drops          | OTC                 |
| <b>*Ophthalmic Hyperosmolar Products***</b>                  |                        |                     |
| <i>altachlore ophthalmic ointment 5 %</i>                    | Altachlore             | OTC                 |
| <i>altachlore ophthalmic solution 5 %</i>                    | Altachlore             | OTC                 |
| <i>cvs sodium chloride ophthalmic ointment 5 %</i>           | Altachlore             | OTC                 |
| <i>cvs sodium chloride ophthalmic solution 5 %</i>           | Altachlore             | OTC                 |
| <b>MURO 128 OPHTHALMIC OINTMENT 5 %</b>                      | cvs sodium chloride    | OTC                 |
| <b>MURO 128 OPHTHALMIC SOLUTION 2 %</b>                      |                        | OTC                 |
| <b>MURO 128 OPHTHALMIC SOLUTION 5 %</b>                      | cvs sodium chloride    | OTC                 |
| <i>ra ophthalmic ophthalmic solution 5 %</i>                 | Altachlore             | OTC                 |
| <i>sochlor ophthalmic solution 5 %</i>                       | Altachlore             | OTC                 |
| <i>sodium chloride (hypertonic) ophthalmic ointment 5 %</i>  | Altachlore             | OTC                 |
| <i>sodium chloride (hypertonic) ophthalmic solution 5 %</i>  | Altachlore             | OTC                 |
| <b>*Ophthalmic Immunomodulators***</b>                       |                        |                     |
| <b>RESTASIS OPHTHALMIC EMULSION 0.05 %</b>                   | cyclosporine           |                     |
| <b>*Ophthalmic Kinase Inhibitors - Combinations***</b>       |                        |                     |
| <b>ROCKLATAN OPHTHALMIC SOLUTION 0.02-0.005 %</b>            |                        |                     |

| <b>Formulary Drug Name</b>   | <b>Reference</b>         | <b>Restrictions</b>      |
|--|--------------------------|--------------------------|
| <b>*Ophthalmic Nonsteroidal Anti-Inflammatory Agents***</b>            |                          |                          |
| <i>diclofenac sodium ophthalmic solution 0.1 %</i>                     |                          |                          |
| <i>flurbiprofen sodium ophthalmic solution 0.03 %</i>                  |                          |                          |
| <i>ketorolac tromethamine ophthalmic solution 0.4 %</i>                | Acular LS                |                          |
| <i>ketorolac tromethamine ophthalmic solution 0.5 %</i>                | Acular                   |                          |
| <b>*Ophthalmic Rho Kinase Inhibitors***</b>                            |                          |                          |
| <b>RHOPRESSA OPHTHALMIC SOLUTION 0.02 %</b>                            |                          |                          |
| <b>*Ophthalmic Selective Alpha Adrenergic Agonists***</b>              |                          |                          |
| <b>ALPHAGAN P OPHTHALMIC SOLUTION 0.1 %, 0.15 %</b>                    | brimonidine tartrate     |                          |
| <i>brimonidine tartrate ophthalmic solution 0.15 %</i>                 | Alphagan P               |                          |
| <i>brimonidine tartrate ophthalmic solution 0.2 %</i>                  |                          |                          |
| <b>*Ophthalmic Steroid Combinations***</b>                             |                          |                          |
| <i>bacitra-neomycin-polymyxin-hc ophthalmic ointment 1 %</i>           | Neo-Polycin HC           | QLL (3.5 GM per 30 days) |
| <i>neomycin-polymyxin-dexameth ophthalmic ointment 3.5-10000-0.1</i>   | Maxitrol                 |                          |
| <i>neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1</i> | Maxitrol                 |                          |
| <i>neo-polycin hc ophthalmic ointment 1 %</i>                          | Neo-Polycin HC           | QLL (3.5 GM per 30 days) |
| <i>sulfacetamide-prednisolone ophthalmic solution 10-0.23 %</i>        |                          |                          |
| <b>TOBRADEX OPHTHALMIC OINTMENT 0.3-0.1 %</b>                          |                          |                          |
| <b>TOBRADEX OPHTHALMIC SUSPENSION 0.3-0.1 %</b>                        | tobramycin-dexamethasone |                          |
| <i>tobramycin-dexamethasone ophthalmic suspension 0.3-0.1 %</i>        | TobraDex                 |                          |
| <b>*Ophthalmic Steroids***</b>   |                          |                          |
| <i>dexamethasone sodium phosphate ophthalmic solution 0.1 %</i>        |                          |                          |
| <i>difluprednate ophthalmic emulsion 0.05 %</i>                        | Durezol                  |                          |

| <b>Formulary Drug Name</b>                                   | <b>Reference</b>      | <b>Restrictions</b>          |
|--|-----------------------|------------------------------|
| <b>DUREZOL OPHTHALMIC EMULSION 0.05 %</b>                    | difluprednate         |                              |
| <i>fluorometholone ophthalmic suspension 0.1 %</i>           | FML Liquifilm         |                              |
| <i>prednisolone acetate ophthalmic suspension 1 %</i>        | Pred Forte            |                              |
| <b>PREDNISOLONE SODIUM PHOSPHATE OPHTHALMIC SOLUTION 1 %</b> |                       |                              |
| <b>*Prostaglandins - Ophthalmic***</b>                       |                       |                              |
| <i>latanoprost ophthalmic solution 0.005 %</i>               | Xalatan               |                              |
| <b>TRAVATAN Z OPHTHALMIC SOLUTION 0.004 %</b>                | travoprost (bak free) |                              |
| <i>travoprost (bak free) ophthalmic solution 0.004 %</i>     | Travatan Z            |                              |
| <b>*Otic Agents*</b>   |                       |                              |
| <b>*Otic Agents - Miscellaneous***</b>                       |                       |                              |
| <i>acetic acid otic solution 2 %</i>                         |                       |                              |
| <i>auraphene-b otic solution 6.5 %</i>                       | Murine Ear            | OTC; QLL (15 ML per 30 days) |
| <i>cvs ear drops otic solution 6.5 %</i>                     | Murine Ear            | OTC; QLL (15 ML per 30 days) |
| <i>cvs ear wax removal system otic solution 6.5 %</i>        | Murine Ear            | OTC; QLL (15 ML per 30 days) |
| <b>DEBROX OTIC SOLUTION 6.5 %</b>                            | cvs ear drops         | OTC                          |
| <i>ear drops earwax aid otic solution 6.5 %</i>              | Murine Ear            | OTC; QLL (15 ML per 30 days) |
| <i>ear drops otic solution 6.5 %</i>                         | Murine Ear            | OTC; QLL (15 ML per 30 days) |
| <i>ear wax drops otic solution 6.5 %</i>                     | Murine Ear            | OTC; QLL (15 ML per 30 days) |
| <i>ear wax removal drops otic solution 6.5 %</i>             | Murine Ear            | OTC; QLL (15 ML per 30 days) |
| <i>ear wax removal kit otic solution 6.5 %</i>               | Murine Ear            | OTC; QLL (15 ML per 30 days) |
| <i>ear wax removal system otic solution 6.5 %</i>            | Murine Ear            | OTC; QLL (15 ML per 30 days) |
| <i>earwax removal kit otic solution 6.5 %</i>                | Murine Ear            | OTC; QLL (15 ML per 30 days) |
| <i>earwax treatment drops otic solution 6.5 %</i>            | Murine Ear            | OTC; QLL (15 ML per 30 days) |
| <i>eq ear wax removal aid otic solution 6.5 %</i>            | Murine Ear            | OTC; QLL (15 ML per 30 days) |
| <i>gnp ear drops otic solution 6.5 %</i>                     | Murine Ear            | OTC; QLL (15 ML per 30 days) |
| <i>gnp ear systems otic solution 6.5 %</i>                   | Murine Ear            | OTC; QLL (15 ML per 30 days) |
| <i>goodsense ear wax removal otic solution 6.5 %</i>         | Murine Ear            | OTC; QLL (15 ML per 30 days) |
| <i>hm earwax removal aid otic solution 6.5 %</i>             | Murine Ear            | OTC; QLL (15 ML per 30 days) |
| <i>hm earwax removal kit otic solution 6.5 %</i>             | Murine Ear            | OTC; QLL (15 ML per 30 days) |
| <i>instant ear-dry otic liquid 95-5 %</i>                    | Debrox Swimmers Ear   | OTC                          |
| <i>murine ear otic solution 6.5 %</i>                        | Murine Ear            | OTC; QLL (15 ML per 30 days) |
| <i>murine ear wax removal system otic solution 6.5 %</i>     | Murine Ear            | OTC; QLL (15 ML per 30 days) |

| <b>Formulary Drug Name</b>                                   | <b>Reference</b>            | <b>Restrictions</b>          |
|--|-----------------------------|------------------------------|
| <i>otix otic solution 6.5 %</i>                              | Murine Ear                  | OTC; QLL (15 ML per 30 days) |
| <i>qc ear wax removal otic solution 6.5 %</i>                | Murine Ear                  | OTC; QLL (15 ML per 30 days) |
| <i>ra ear drops otic solution 6.5 %</i>                      | Murine Ear                  | OTC; QLL (15 ML per 30 days) |
| <i>ra ear drying agent otic liquid 95-5 %</i>                | Debrox Swimmers Ear         | OTC                          |
| <i>ra earwax removal kit otic solution 6.5 %</i>             | Murine Ear                  | OTC; QLL (15 ML per 30 days) |
| <i>sb ear wax remover otic solution 6.5 %</i>                | Murine Ear                  | OTC; QLL (15 ML per 30 days) |
| <i>sm ear drops otic solution 6.5 %</i>                      | Murine Ear                  | OTC; QLL (15 ML per 30 days) |
| <i>sm swimmers ear drops otic liquid 95 %</i>                | Swim Ear                    | OTC                          |
| <b>SWIM EAR OTIC LIQUID 95 %</b>                             | sm swimmers ear drops       | OTC                          |
| <i>swimmers ear drops otic liquid 95 %</i>                   | Swim Ear                    | OTC                          |
| <i>swimmers instant ear dry otic liquid 95 %</i>             | Swim Ear                    | OTC                          |
| <b>*Otic Analgesic Combinations***</b>                       |                             |                              |
| <i>cortic-nd otic solution 10-10-1 mg/ml</i>                 | Cortic-ND                   |                              |
| <i>cyotic otic solution 10-10-1 mg/ml</i>                    | Cortic-ND                   |                              |
| <i>exotic-hc otic solution 10-10-1 mg/ml</i>                 | Cortic-ND                   |                              |
| <i>otomax-hc otic solution 10-10-1 mg/ml</i>                 | Cortic-ND                   |                              |
| <b>*Otic Anti-Infectives***</b>                              |                             |                              |
| <i>ciprofloxacin hcl otic solution 0.2 %</i>                 | Cetraxal                    |                              |
| <i>ofloxacin otic solution 0.3 %</i>                         |                             |                              |
| <b>*Otic Steroid-Anti-Infective Combinations***</b>          |                             |                              |
| <b>CIPRODEX OTIC SUSPENSION 0.3-0.1 %</b>                    | ciprofloxacin-dexamethasone |                              |
| <i>ciprofloxacin-dexamethasone otic suspension 0.3-0.1 %</i> | Ciprodex                    |                              |
| <i>neomycin-polymyxin-hc otic solution 1 %, 3.5-10000-1</i>  |                             |                              |
| <i>neomycin-polymyxin-hc otic suspension 3.5-10000-1</i>     |                             |                              |
| <b>*Otic Steroids***</b>                                     |                             |                              |
| <i>acetasol hc otic solution 2-1 %</i>                       | Acetasol HC                 | QLL (10 ML per 30 days)      |
| <i>fluocinolone acetonide otic oil 0.01 %</i>                | DermOtic                    | QLL (20 ML per 30 days)      |
| <i>hydrocortisone-acetic acid otic solution 1-2 %</i>        | Acetasol HC                 | QLL (10 ML per 30 days)      |
| <b>*Passive Immunizing And Treatment Agents*</b>             |                             |                              |
| <b>*Antiviral Monoclonal Antibodies***</b>                   |                             |                              |
| <b>SYNAGIS INTRAMUSCULAR SOLUTION 100 MG/ML, 50 MG/0.5ML</b> |                             | PA                           |

| <b>Formulary Drug Name</b>   | <b>Reference</b> | <b>Restrictions</b> |
|--|------------------|---------------------|
| <b>*Immune Serums***</b>   |                  |                     |
| <b>FLEBOGAMMA DIF INTRAVENOUS SOLUTION 20 GM/200ML</b>   |                  | PA                  |
| <b>GAMMAGARD INJECTION SOLUTION 1 GM/10ML, 10 GM/100ML, 2.5 GM/25ML, 20 GM/200ML, 30 GM/300ML, 5 GM/50ML</b> |                  | PA                  |
| <b>GAMMAGARD S/D LESS IGA INTRAVENOUS SOLUTION RECONSTITUTED 10 GM, 5 GM</b>                                 |                  | PA                  |
| <b>GAMMAKED INJECTION SOLUTION 2.5 GM/25ML</b>   |                  | PA                  |
| <b>GAMMAPLEX INTRAVENOUS SOLUTION 20 GM/200ML</b>  |                  | PA                  |
| <b>GAMUNEX-C INJECTION SOLUTION 1 GM/10ML, 10 GM/100ML, 2.5 GM/25ML, 20 GM/200ML, 40 GM/400ML, 5 GM/50ML</b> |                  | PA                  |
| <b>HEPAGAM B INJECTION SOLUTION 312 UNIT/ML</b>  |                  |                     |
| <b>HIZENTRA SUBCUTANEOUS SOLUTION 1 GM/5ML, 10 GM/50ML, 2 GM/10ML, 4 GM/20ML</b>                             |                  | PA                  |
| <b>HIZENTRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 1 GM/5ML, 2 GM/10ML, 4 GM/20ML</b>                       |                  | PA                  |
| <b>HYPERHEP B INTRAMUSCULAR SOLUTION 220 UNIT/ML</b>   |                  |                     |
| <b>HYPERHEP B INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 110 UNIT/0.5ML, 220 UNIT/ML</b>                       |                  |                     |
| <b>HYPERRHO S/D INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 1500 UNIT, 250 UNIT</b>                             |                  |                     |
| <b>MICRHOGAM ULTRA-FILTERED PLUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 250 UNIT</b>                       |                  |                     |
| <b>NABI-HB INTRAMUSCULAR SOLUTION 312 UNIT/ML</b>  |                  |                     |
| <b>OCTAGAM INTRAVENOUS SOLUTION 20 GM/200ML</b>  |                  | PA                  |
| <b>PRIVIGEN INTRAVENOUS SOLUTION 10 GM/100ML, 5 GM/50ML</b>  |                  | PA                  |
| <b>PRIVIGEN INTRAVENOUS SOLUTION 20 GM/200ML, 40 GM/400ML</b>  |                  | PA                  |



| <b>Formulary Drug Name</b>   | <b>Reference</b>         | <b>Restrictions</b>     |
|--|--------------------------|-------------------------|
| <b>RHOGAM ULTRA-FILTERED PLUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 1500 UNIT</b>                             |                          |                         |
| <b>RHOPHYLAC INJECTION SOLUTION PREFILLED SYRINGE 1500 UNIT/2ML</b>  |                          | QLL (2 ML per 1 Year)   |
| <b>*Penicillins*</b>   |                          |                         |
| <b>*Aminopenicillins***</b>  |                          |                         |
| <i>amoxicillin oral capsule 250 mg, 500 mg</i>   |                          |                         |
| <i>amoxicillin oral suspension reconstituted 125 mg/5ml, 200 mg/5ml, 250 mg/5ml, 400 mg/5ml</i>                  |                          |                         |
| <i>amoxicillin oral tablet 500 mg, 875 mg</i>  |                          |                         |
| <i>amoxicillin oral tablet chewable 125 mg, 250 mg</i>   |                          |                         |
| <i>ampicillin oral capsule 500 mg</i>  |                          |                         |
| <b>*Natural Penicillins***</b>   |                          |                         |
| <i>penicillin v potassium oral solution reconstituted 125 mg/5ml, 250 mg/5ml</i>                                 |                          |                         |
| <i>penicillin v potassium oral tablet 250 mg, 500 mg</i>   |                          |                         |
| <b>*Penicillin Combinations***</b>   |                          |                         |
| <i>amoxicillin-pot clavulanate oral suspension reconstituted 200-28.5 mg/5ml, 250-62.5 mg/5ml, 400-57 mg/5ml</i> |                          |                         |
| <i>amoxicillin-pot clavulanate oral suspension reconstituted 600-42.9 mg/5ml</i>                                 | Augmentin ES-600         |                         |
| <i>amoxicillin-pot clavulanate oral tablet 250-125 mg, 875-125 mg</i>  |                          | QLL (28 EA per 30 days) |
| <i>amoxicillin-pot clavulanate oral tablet 500-125 mg</i>  | Augmentin                | QLL (28 EA per 30 days) |
| <i>amoxicillin-pot clavulanate oral tablet chewable 200-28.5 mg, 400-57 mg</i>                                   |                          | QLL (28 EA per 30 days) |
| <b>*Penicillinase-Resistant Penicillins***</b>   |                          |                         |
| <i>dicloxacillin sodium oral capsule 250 mg, 500 mg</i>  |                          |                         |
| <b>*Pharmaceutical Adjuvants*</b>  |                          |                         |
| <b>*Antimicrobial Agents***</b>  |                          |                         |
| <b>BENZYL ALCOHOL LIQUID</b>   |                          |                         |
| <b>*Flavoring Agents***</b>  |                          |                         |
| <b>ALMOND OIL BITTER FLAVOR LIQUID</b>   | almond oil bitter flavor |                         |

| <b>Formulary Drug Name</b>                  | <b>Reference</b>         | <b>Restrictions</b> |
|---|--------------------------|---------------------|
| <b>ANISE EXTRACT LIQUID</b>                 | almond oil bitter flavor |                     |
| <b>APPLE FLAVOR LIQUID</b>                  | almond oil bitter flavor |                     |
| <b>APRICOT FLAVOR LIQUID</b>                | almond oil bitter flavor |                     |
| <b>BACON FLAVOR LIQUID</b>                  | almond oil bitter flavor |                     |
| <b>BANANA CONCENTRATE LIQUID</b>            | almond oil bitter flavor |                     |
| <b>BANANA CREAM FLAVOR LIQUID</b>           | almond oil bitter flavor |                     |
| <b>BANANA CREME FLAVOR LIQUID</b>           | almond oil bitter flavor |                     |
| <b>BANANA FLAVOR LIQUID</b>                 | almond oil bitter flavor |                     |
| <b>BEEF (GRILLED) FLAVOR OIL SOL LIQUID</b> | almond oil bitter flavor | OTC                 |
| <b>BEEF FLAVOR LIQUID</b>                   | almond oil bitter flavor |                     |
| <b>BEEF TYPE FLAVOR NATURAL LIQUID</b>      | almond oil bitter flavor |                     |
| <b>BITTER STOP FLAVOR LIQUID</b>            | almond oil bitter flavor |                     |
| <b>BITTERNESS MASK FLAVOR LIQUID</b>        | almond oil bitter flavor |                     |
| <b>BITTERNESS SUPPRESSOR FLAVOR LIQUID</b>  | almond oil bitter flavor |                     |
| <b>BLACKBERRY FLAVOR LIQUID</b>             | almond oil bitter flavor |                     |
| <b>BLUEBERRY FLAVOR LIQUID</b>              | almond oil bitter flavor |                     |
| <b>BUBBLE GUM CONCENTRATE LIQUID</b>        | almond oil bitter flavor |                     |
| <b>BUBBLE GUM FLAVOR LIQUID</b>             | almond oil bitter flavor |                     |
| <b>BUTTER FLAVOR LIQUID</b>                 | almond oil bitter flavor |                     |
| <b>BUTTER RUM FLAVOR LIQUID</b>             | almond oil bitter flavor |                     |
| <b>BUTTERSCOTCH FLAVOR LIQUID</b>           | almond oil bitter flavor |                     |
| <b>CARAMEL FLAVOR LIQUID</b>                | almond oil bitter flavor |                     |
| <b>CHEESECAKE FLAVOR LIQUID</b>             | almond oil bitter flavor |                     |
| <b>CHERRY FLAVOR LIQUID</b>                 | almond oil bitter flavor |                     |
| <b>CHICKEN (GRILLED) FLAVOR LIQUID</b>      | almond oil bitter flavor | OTC                 |
| <b>CHICKEN FLAVOR LIQUID</b>                | almond oil bitter flavor | OTC                 |
| <b>CHICKEN FLAVOR OIL MISCIBLE LIQUID</b>   | almond oil bitter flavor | OTC                 |
| <b>CHICKEN FLAVOR OIL SOLUBLE LIQUID</b>    | almond oil bitter flavor |                     |
| <b>CHICKEN FLAVOR WATER MISCIBLE LIQUID</b> | almond oil bitter flavor |                     |
| <b>CHICKEN ROASTED CONCENTRATE LIQUID</b>   | almond oil bitter flavor | OTC                 |
| <b>CHOCOLATE FLAVOR LIQUID</b>              | almond oil bitter flavor |                     |

| <b>Formulary Drug Name</b>               | <b>Reference</b>         | <b>Restrictions</b> |
|--|--------------------------|---------------------|
| <b>CHOCOLATE HAZELNUT FLAVOR LIQUID</b>  | almond oil bitter flavor |                     |
| <b>COCONUT FLAVOR LIQUID</b>             | almond oil bitter flavor |                     |
| <b>COFFEE FLAVOR LIQUID</b>              | almond oil bitter flavor |                     |
| <b>COLA FLAVOR LIQUID</b>                | almond oil bitter flavor |                     |
| <b>COTTON CANDY FLAVOR LIQUID</b>        | almond oil bitter flavor |                     |
| <b>CRAN-RASPBERRY FLAVOR LIQUID</b>      | almond oil bitter flavor |                     |
| <b>CREME DEMENTHE FLAVOR LIQUID</b>      | almond oil bitter flavor |                     |
| <b>ENGLISH TOFFEE FLAVOR LIQUID</b>      | almond oil bitter flavor |                     |
| <b>EUGENOL FLAVOR LIQUID</b>             | almond oil bitter flavor |                     |
| <b>FISH FLAVOR LIQUID</b>                | almond oil bitter flavor |                     |
| <b>FLAVORX LIQUID</b>                    | almond oil bitter flavor | OTC                 |
| <b>GRAPE FLAVOR LIQUID</b>               | almond oil bitter flavor |                     |
| <b>GUAVA FLAVOR LIQUID</b>               | almond oil bitter flavor |                     |
| <b>HAM FLAVOR LIQUID</b>                 | almond oil bitter flavor |                     |
| <b>HONEY FLAVOR LIQUID</b>               | almond oil bitter flavor |                     |
| <b>KAHLUA FLAVOR LIQUID</b>              | almond oil bitter flavor |                     |
| <b>LEMON EXTRACT LIQUID</b>              | almond oil bitter flavor |                     |
| <b>LEMON FLAVOR LIQUID</b>               | almond oil bitter flavor | OTC                 |
| <b>LICORICE FLAVOR LIQUID</b>            | almond oil bitter flavor |                     |
| <b>LIVER CONCENTRATE LIQUID</b>          | almond oil bitter flavor | OTC                 |
| <b>LIVER FLAVOR LIQUID</b>               | almond oil bitter flavor |                     |
| <b>MANGO FLAVOR LIQUID</b>               | almond oil bitter flavor |                     |
| <b>MAPLE FLAVOR LIQUID</b>               | almond oil bitter flavor |                     |
| <b>MARSHMALLOW FLAVOR LIQUID</b>         | almond oil bitter flavor |                     |
| <b>MINT CHOCOLATE CHIP FLAVOR LIQUID</b> | almond oil bitter flavor |                     |
| <b>ORANGE CONCENTRATE LIQUID</b>         | almond oil bitter flavor | OTC                 |
| <b>ORANGE CREAM FLAVOR LIQUID</b>        | almond oil bitter flavor |                     |
| <b>ORANGE FLAVOR LIQUID</b>              | almond oil bitter flavor |                     |
| <b>ORANGE OIL FLAVOR LIQUID</b>          | almond oil bitter flavor |                     |
| <b>PCCA SWEETNESS ENHANCER LIQUID</b>    | almond oil bitter flavor |                     |
| <b>PEACH FLAVOR LIQUID</b>               | almond oil bitter flavor |                     |
| <b>PEANUT BUTTER FLAVOR LIQUID</b>       | almond oil bitter flavor |                     |
| <b>PINA COLADA FLAVOR LIQUID</b>         | almond oil bitter flavor |                     |
| <b>PINEAPPLE FLAVOR LIQUID</b>           | almond oil bitter flavor |                     |
| <b>PRALINES AND CREAM FLAVOR LIQUID</b>  | almond oil bitter flavor |                     |

| <b>Formulary Drug Name</b>                    | <b>Reference</b>               | <b>Restrictions</b> |
|---|--------------------------------|---------------------|
| <b>PUMPKIN FLAVOR LIQUID</b>                  | almond oil bitter flavor       |                     |
| <b>RASPBERRY FLAVOR LIQUID</b>                | almond oil bitter flavor       |                     |
| <b>ROOT BEER FLAVOR LIQUID</b>                | almond oil bitter flavor       |                     |
| <b>SARDINE FLAVOR LIQUID</b>                  | almond oil bitter flavor       | OTC                 |
| <b>SHRIMP FLAVOR LIQUID</b>                   | almond oil bitter flavor       |                     |
| <b>STEVIA GLYCERITE EXTRACT LIQUID</b>        | almond oil bitter flavor       |                     |
| <b>STRAWBERRY FLAVOR LIQUID</b>               | almond oil bitter flavor       |                     |
| <b>SWEETENING ENHANCER LIQUID</b>             | almond oil bitter flavor       |                     |
| <b>TROPICAL PUNCH FLAVOR LIQUID</b>           | almond oil bitter flavor       |                     |
| <b>TUNA FLAVOR LIQUID</b>                     | almond oil bitter flavor       | OTC                 |
| <b>TUTTI FRUTTI FLAVOR LIQUID</b>             | almond oil bitter flavor       |                     |
| <b>TUTTI-FRUTTI FLAVOR LIQUID</b>             | almond oil bitter flavor       |                     |
| <b>VANILLA BUTTERNUT FLAVOR LIQUID</b>        | almond oil bitter flavor       |                     |
| <b>VANILLA FLAVOR LIQUID</b>                  | almond oil bitter flavor       |                     |
| <b>WATERMELON FLAVOR LIQUID</b>               | almond oil bitter flavor       |                     |
| <b>WILD CHERRY FLAVOR LIQUID</b>              | almond oil bitter flavor       |                     |
| <b>*Gelatin Capsules (Empty)***</b>           |                                |                     |
| <b>CAPSULE CONI-SNAP #0 BLU/WHITE CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #0 CLEAR CAPSULE</b>     | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #0 DARK BLUE CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #0 GREEN/CLR CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #0 PINK CAPSULE</b>      | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #0 RED/WHITE CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #0 WHITE CAPSULE</b>     | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #00 CLEAR CAPSULE</b>    | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #00 WHITE CAPSULE</b>    | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #000 CLEAR CAPSULE</b>   | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #1 AQUA BLUE CAPSULE</b> | capsule coni-snap #0 blu/white |                     |

| <b>Formulary Drug Name</b>                    | <b>Reference</b>               | <b>Restrictions</b> |
|---|--------------------------------|---------------------|
| <b>CAPSULE CONI-SNAP #1 BLUE CAPSULE</b>      | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #1 BLUE/PINK CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #1 BLUE/WHT CAPSULE</b>  | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #1 BROWN CAPSULE</b>     | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #1 BRWN/IVRY CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #1 CLEAR CAPSULE</b>     | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #1 DK GRN/OR CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #1 DRK GREEN CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #1 GREY/PINK CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #1 GRN/YLW CAPSULE</b>   | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #1 ORANGE CAPSULE</b>    | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #1 PINK CAPSULE</b>      | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #1 PINK/BLUE CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #1 PINK/CLR CAPSULE</b>  | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #1 PINK/WHIT CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #1 PINK/YLLW CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #1 PURPLE CAPSULE</b>    | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #1 RED/BLUE CAPSULE</b>  | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #1 RED/WHITE CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #1 WHITE CAPSULE</b>     | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #1 WHITE/GRN CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #1 WHT/CLR CAPSULE</b>   | capsule coni-snap #0 blu/white |                     |

| <b>Formulary Drug Name</b>                    | <b>Reference</b>               | <b>Restrictions</b> |
|---|--------------------------------|---------------------|
| <b>CAPSULE CONI-SNAP #1 YELLOW CAPSULE</b>    | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #1 YELLOW/GR CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #2 CLEAR CAPSULE</b>     | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #2 WHITE CAPSULE</b>     | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #3 BLU/CLEAR CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #3 BRN/BLUE CAPSULE</b>  | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #3 CLEAR CAPSULE</b>     | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #3 GRAY/YLW CAPSULE</b>  | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #3 GREEN/BLU CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #3 GREY/PINK CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #3 MARON/BLU CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #3 MINT GRN CAPSULE</b>  | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #3 OLIVE/CLR CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #3 ORANGE CAPSULE</b>    | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #3 PINK/PINK CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #3 PNK/CLEAR CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #3 RED/CLEAR CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #3 RED/RED CAPSULE</b>   | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #3 WHITE CAPSULE</b>     | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #3 WHT/CLR CAPSULE</b>   | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #3 YELLOW CAPSULE</b>    | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #4 BLACK/GRN CAPSULE</b> | capsule coni-snap #0 blu/white |                     |



| <b>Formulary Drug Name</b>                    | <b>Reference</b>               | <b>Restrictions</b> |
|---|--------------------------------|---------------------|
| <b>CAPSULE CONI-SNAP #4 CLEAR CAPSULE</b>     | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE CONI-SNAP #4 WHITE CAPSULE</b>     | capsule coni-snap #0 blu/white |                     |
| <b>CAPSULE SIZE 1 LACTOSE CAPSULE</b>         | capsule coni-snap #0 blu/white | OTC                 |
| <b>DRCAPS SIZE 0 CAPSULE</b>                  | capsule coni-snap #0 blu/white |                     |
| <b>DRCAPS SIZE 00 CAPSULE</b>                 | capsule coni-snap #0 blu/white |                     |
| <b>DRCAPS SIZE 1 CAPSULE</b>                  | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE #0 RED/WHITE CAPSULE</b>     | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE #00 BLACK/RED CAPSULE</b>    | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE #00 BLUE/WHITE CAPSULE</b>   | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE #00 PINK/PINK CAPSULE</b>    | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE #00 PURPLE CAPSULE</b>       | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE #00 PURPLE/WHITE CAPSULE</b> | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE #00 RED/WHITE CAPSULE</b>    | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE #00 YELLOW/YELLO CAPSULE</b> | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE CAPSULE</b>                  | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 0 BLUE CAPSULE</b>      | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 0 BLUE/WHT CAPSULE</b>  | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 0 CAPSULE</b>           | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 0 CLEAR CAPSULE</b>     | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 0 FUN CAPS CAPSULE</b>  | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 0 GREEN CAPSULE</b>     | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 0 GREEN/CLR CAPSULE</b> | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 0 GRN/CLEAR CAPSULE</b> | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 0 MAROON CAPSULE</b>    | capsule coni-snap #0 blu/white | OTC                 |

| <b>Formulary Drug Name</b>                    | <b>Reference</b>               | <b>Restrictions</b> |
|---|--------------------------------|---------------------|
| <b>EMPTY CAPSULE SIZE 0 ORANGE CAPSULE</b>    | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 0 PINK CAPSULE</b>      | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 0 PURP/WHT CAPSULE</b>  | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 0 PURPLE CAPSULE</b>    | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 0 RED CAPSULE</b>       | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 0 RED/CLEAR CAPSULE</b> | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 0 RED/WHITE CAPSULE</b> | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 0 WHITE CAPSULE</b>     | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 0 WHITE/CLR CAPSULE</b> | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 0 YELLOW CAPSULE</b>    | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 00 BLUE CAPSULE</b>     | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 00 BLUE OPQ CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 00 CLEAR CAPSULE</b>    | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 00 DRK GRN CAPSULE</b>  | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 00 GREEN CAPSULE</b>    | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 00 ORANGE CAPSULE</b>   | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 00 RED CAPSULE</b>      | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 00 WHITE CAPSULE</b>    | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 000 CLEAR CAPSULE</b>   | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 000 WHITE CAPSULE</b>   | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 1 AQUA BLUE CAPSULE</b> | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 1 BLUE CAPSULE</b>      | capsule coni-snap #0 blu/white | OTC                 |

| <b>Formulary Drug Name</b>                    | <b>Reference</b>               | <b>Restrictions</b> |
|---|--------------------------------|---------------------|
| <b>EMPTY CAPSULE SIZE 1 BLUE/PINK CAPSULE</b> | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 1 BLUE/RED CAPSULE</b>  | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 1 BLUE/WHT CAPSULE</b>  | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 1 BLUECLEAR CAPSULE</b> | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 1 BRN/IVORY CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 1 CLEAR CAPSULE</b>     | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 1 DRK GREEN CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 1 GREEN CAPSULE</b>     | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 1 GREY/PINK CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 1 GRN/ORNGE CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 1 GRN/WHITE CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 1 GRN/YLLW CAPSULE</b>  | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 1 IVORY CAPSULE</b>     | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 1 LGHT BLUE CAPSULE</b> | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 1 MAROON/CL CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 1 MINT GRN CAPSULE</b>  | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 1 ORANGE CAPSULE</b>    | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 1 ORGE/CLR CAPSULE</b>  | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 1 ORGE/YLLW CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 1 ORNGE/WHT CAPSULE</b> | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 1 PINK CAPSULE</b>      | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 1 PINK/BLUE CAPSULE</b> | capsule coni-snap #0 blu/white | OTC                 |

| <b>Formulary Drug Name</b>                    | <b>Reference</b>               | <b>Restrictions</b> |
|---|--------------------------------|---------------------|
| <b>EMPTY CAPSULE SIZE 1 PINK/CLR CAPSULE</b>  | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 1 PINK/YLLW CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 1 PNK/WHITE CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 1 PURPLE CAPSULE</b>    | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 1 PWDR BLUE CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 1 RED CAPSULE</b>       | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 1 RED/BLUE CAPSULE</b>  | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 1 RED/WHITE CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 1 WHITE CAPSULE</b>     | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 1 WHT/CLEAR CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 1 YELLOW CAPSULE</b>    | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 10 CLEAR CAPSULE</b>    | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 11 CLEAR CAPSULE</b>    | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 13 CLEAR CAPSULE</b>    | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 2 BLUE CAPSULE</b>      | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 2 CLEAR CAPSULE</b>     | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 2 GREEN CAPSULE</b>     | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 2 WHITE CAPSULE</b>     | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 3 BLACK/GRN CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 3 BLUE CAPSULE</b>      | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 3 BLUE OPQ CAPSULE</b>  | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 3 BLUE/CLR CAPSULE</b>  | capsule coni-snap #0 blu/white |                     |

| <b>Formulary Drug Name</b>                    | <b>Reference</b>               | <b>Restrictions</b> |
|---|--------------------------------|---------------------|
| <b>EMPTY CAPSULE SIZE 3 BLUE/WHT CAPSULE</b>  | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 3 CLEAR CAPSULE</b>     | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 3 DARK GRN CAPSULE</b>  | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 3 GRAY/PINK CAPSULE</b> | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 3 GRAY/YLLW CAPSULE</b> | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 3 GREEN CAPSULE</b>     | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 3 GREY/PINK CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 3 GREY/YLLW CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 3 GRN/BLUE CAPSULE</b>  | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 3 MARN/BLUE CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 3 MARN/CLR CAPSULE</b>  | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 3 MAROON CAPSULE</b>    | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 3 MINT GRN CAPSULE</b>  | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 3 OLIVE CAPSULE</b>     | capsule coni-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 3 OLIVE/CLR CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 3 ORANGE CAPSULE</b>    | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 3 ORANGE/WH CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 3 PINK CAPSULE</b>      | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 3 PINK/BLUE CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 3 PINK/WH CAPSULE</b>   | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 3 PINK/YLLW CAPSULE</b> | capsule coni-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 3 PNK/CLEAR CAPSULE</b> | capsule coni-snap #0 blu/white |                     |

| <b>Formulary Drug Name</b>                    | <b>Reference</b>                | <b>Restrictions</b> |
|---|---------------------------------|---------------------|
| <b>EMPTY CAPSULE SIZE 3 PRPLE/CLR CAPSULE</b> | capsule conic-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 3 PURPLE CAPSULE</b>    | capsule conic-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 3 PWDR BLUE CAPSULE</b> | capsule conic-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 3 RED CAPSULE</b>       | capsule conic-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 3 RED/CLEAR CAPSULE</b> | capsule conic-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 3 RED/WHITE CAPSULE</b> | capsule conic-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 3 WHITE CAPSULE</b>     | capsule conic-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 3 WHITE/CLR CAPSULE</b> | capsule conic-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 3 YELLOW CAPSULE</b>    | capsule conic-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 3 YELLW/CLR CAPSULE</b> | capsule conic-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 4 BLACK CAPSULE</b>     | capsule conic-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 4 BLUE/WHIT CAPSULE</b> | capsule conic-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 4 CLEAR CAPSULE</b>     | capsule conic-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 4 DARK BLUE CAPSULE</b> | capsule conic-snap #0 blu/white | OTC                 |
| <b>EMPTY CAPSULE SIZE 4 PURPLE CAPSULE</b>    | capsule conic-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 4 RED/WHITE CAPSULE</b> | capsule conic-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 4 WHITE CAPSULE</b>     | capsule conic-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 4 YELLOW CAPSULE</b>    | capsule conic-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 5 CLEAR CAPSULE</b>     | capsule conic-snap #0 blu/white |                     |
| <b>EMPTY CAPSULE SIZE 7 CLEAR CAPSULE</b>     | capsule conic-snap #0 blu/white |                     |
| <b>*Non Gelatin Capsules (Empty)***</b>       |                                 |                     |
| <b>AR CAPS #1 ACID RESISTANT CAPSULE</b>      | capsule 0 clear dr              | OTC                 |



| <b>Formulary Drug Name</b>                    | <b>Reference</b>   | <b>Restrictions</b> |
|---|--------------------|---------------------|
| <b>CAPSULE 0 CLEAR DR CAPSULE</b>             | capsule 0 clear dr |                     |
| <b>CAPSULE 0 CLEAR VEGGIE CAPSULE</b>         | capsule 0 clear dr | OTC                 |
| <b>CAPSULE 00 CLEAR VEGGIE CAPSULE</b>        | capsule 0 clear dr | OTC                 |
| <b>CAPSULE 1 CLEAR VEGGIE CAPSULE</b>         | capsule 0 clear dr | OTC                 |
| <b>CAPSULE 3 CLEAR VEGGIE CAPSULE</b>         | capsule 0 clear dr | OTC                 |
| <b>CAPSULE CONI-SNAP #1 VEGGIE CAPSULE</b>    | capsule 0 clear dr |                     |
| <b>EMPTY CAPSULE SIZE 1 VEG CLEAR CAPSULE</b> | capsule 0 clear dr |                     |
| <b>VEGETABLE CAPSULE #0 GREEN CAPSULE</b>     | capsule 0 clear dr |                     |
| <b>VEGETABLE CAPSULE #0 WHITE CAPSULE</b>     | capsule 0 clear dr |                     |
| <b>VEGETABLE CAPSULE #00 WHITE CAPSULE</b>    | capsule 0 clear dr |                     |
| <b>VEGETABLE CAPSULE #1 WHITE CAPSULE</b>     | capsule 0 clear dr |                     |
| <b>VEGETABLE CAPSULE #2 WHITE CAPSULE</b>     | capsule 0 clear dr |                     |
| <b>VEGETABLE CAPSULE #3 WHITE CAPSULE</b>     | capsule 0 clear dr |                     |
| <b>VEGETABLE CAPSULE #4 WHITE CAPSULE</b>     | capsule 0 clear dr |                     |
| <b>*Oral Vehicles***</b>                      |                    |                     |
| <b>CHERRY CONCENTRATE ORAL SYRUP</b>          |                    | OTC                 |
| <b>CHERRY ORAL SYRUP</b>                      |                    |                     |
| <b>FLAVOR BLEND ORAL SUSPENSION</b>           | suspension vehicle |                     |
| <b>FLAVOR PLUS ORAL LIQUID</b>                | flavor plus        |                     |
| <b>FLAVOR SWEET ORAL SYRUP</b>                | flavor sweet       |                     |
| <b>FLAVOR SWEET-SF ORAL SYRUP</b>             | flavor sweet       | OTC                 |
| <b>GERBER GOOD START WATER ORAL LIQUID</b>    |                    | OTC                 |
| <b>GOOD START STERILE WATER ORAL LIQUID</b>   |                    | OTC                 |
| <b>GRAPE SYRUP ORAL SYRUP</b>                 | flavor sweet       | OTC                 |
| <b>MX-SOL BLEND ORAL SUSPENSION</b>           | suspension vehicle | OTC                 |
| <b>MX-SOL BLEND SF ORAL SUSPENSION</b>        | suspension vehicle | OTC                 |
| <b>MX-SOL ORAL SYRUP</b>                      | flavor sweet       | OTC                 |

| <b>Formulary Drug Name</b>                            | <b>Reference</b>   | <b>Restrictions</b> |
|---|--------------------|---------------------|
| <b>MX-SOL SF ORAL SYRUP</b>                           | flavor sweet       | OTC                 |
| <b>MX-SOL SUSPEND ORAL SUSPENSION</b>                 | suspension vehicle | OTC                 |
| <b>ORA-BLEND ORAL SUSPENSION</b>                      | suspension vehicle |                     |
| <b>ORA-BLEND SF ORAL SUSPENSION</b>                   | suspension vehicle |                     |
| <b>ORAL MIX ORAL SUSPENSION</b>                       | suspension vehicle | OTC                 |
| <b>ORAL MIX SF ORAL SUSPENSION</b>                    | suspension vehicle | OTC                 |
| <b>ORAL SUSPEND ORAL LIQUID</b>                       | flavor plus        | OTC                 |
| <b>ORAL SYRUP ORAL SYRUP</b>                          | flavor sweet       | OTC                 |
| <b>ORAL SYRUP SF ORAL SYRUP</b>                       | flavor sweet       | OTC                 |
| <b>ORA-PLUS ORAL LIQUID</b>                           | flavor plus        |                     |
| <b>ORA-SWEET ORAL SYRUP</b>                           | flavor sweet       |                     |
| <b>ORA-SWEET SF ORAL SYRUP</b>                        | flavor sweet       |                     |
| <b>PCCA SWEET-SF ORAL SYRUP</b>                       | flavor sweet       |                     |
| <b>PCCA SYRUP VEHICLE ORAL SYRUP</b>                  | flavor sweet       |                     |
| <b>PCCA-PLUS ORAL SUSPENSION</b>                      | suspension vehicle |                     |
| <b>RASPBERRY SYRUP ORAL SYRUP</b>                     |                    |                     |
| <b>SIMILAC STERILIZED WATER ORAL LIQUID</b>           |                    | OTC                 |
| <b>SIMPLE SYRUP ORAL SYRUP</b>                        | simple syrup       |                     |
| <b>SOLVATECH PLUS ORAL SUSPENSION</b>                 | suspension vehicle |                     |
| <b>SOLVATECH SWEET SF ORAL SYRUP</b>                  | flavor sweet       |                     |
| <b>SORBITOL SOLUTION , 70 %</b>                       |                    |                     |
| <b>SUSPENSION VEHICLE ORAL SUSPENSION</b>             | suspension vehicle |                     |
| <b>SYRPALTA (RED) ORAL SYRUP</b>                      | flavor sweet       |                     |
| <b>SYRPALTA ORAL SYRUP</b>                            | flavor sweet       |                     |
| <b>SYRPALTA ORAL SYRUP 85 %</b>                       | simple syrup       |                     |
| <b>SYRSPEND SF ALKA ORAL SUSPENSION RECONSTITUTED</b> |                    | OTC                 |
| <b>SYRSPEND SF ORAL LIQUID</b>                        | flavor plus        |                     |
| <b>SYRSPEND SF ORAL SUSPENSION RECONSTITUTED</b>      |                    | OTC                 |
| <b>SYRSPEND SF PH4 ORAL SUSPENSION RECONSTITUTED</b>  |                    |                     |
| <b>SYRUP NF ORAL SYRUP 85 %</b>                       | simple syrup       | OTC                 |
| <b>SYRUP VEHICLE ORAL SYRUP</b>                       | flavor sweet       |                     |
| <b>SYRUP VEHICLE SF ORAL SYRUP</b>                    | flavor sweet       |                     |
| <b>VERSAFREE ORAL SYRUP</b>                           | flavor sweet       |                     |
| <b>VERSAPLUS ORAL SYRUP</b>                           | flavor sweet       |                     |

| <b>Formulary Drug Name</b>   | <b>Reference</b>          | <b>Restrictions</b> |
|--|---------------------------|---------------------|
| <b>*Parenteral Vehicles***</b>                                     |                           |                     |
| <i>sterile water for injection injection solution</i>              |                           |                     |
| <b>*Pharmaceutical Excipients***</b>                               |                           |                     |
| <b>LACTOSE MONOHYDRATE POWDER</b>                                  |                           |                     |
| <b>PCCA SORBITOL LOLLIPOP BASE FLAKES</b>                          |                           |                     |
| <b>XANTHAN GUM POWDER</b>  |                           |                     |
| <b>*Semi Solid Vehicles***</b>                                     |                           |                     |
| <i>cvs petroleum jelly external gel</i>                            |                           | OTC                 |
| <i>eq petroleum jelly external gel</i>                             |                           | OTC                 |
| <i>gnp petroleum jelly gel</i>                                     | Vaseline Pure Ultra White | OTC                 |
| <i>goodsense petroleum jelly gel</i>                               | Vaseline Pure Ultra White | OTC                 |
| <b>GRX WHITE PETROLATUM EXTERNAL OINTMENT</b>                      | petrolatum white          | OTC                 |
| <i>hm petroleum jelly gel</i>                                      | Vaseline Pure Ultra White | OTC                 |
| <i>petrolatum gel</i>  | Vaseline Pure Ultra White | OTC                 |
| <i>petrolatum white gel</i>  | Vaseline Pure Ultra White | OTC                 |
| <b>PETROLEUM JELLY EXTERNAL OINTMENT</b>                           |                           | OTC                 |
| <i>petroleum jelly gel</i>   | Vaseline Pure Ultra White | OTC                 |
| <i>polyethylene glycol 3350 powder</i>                             |                           |                     |
| <b>RA PETROLEUM JELLY EXTERNAL OINTMENT</b>                        |                           | OTC                 |
| <i>ra petroleum jelly gel</i>                                      | Vaseline Pure Ultra White | OTC                 |
| <i>ra tugaboos petroleum jelly external gel</i>                    |                           | OTC                 |
| <i>ra tugaboos petroleum jelly gel</i>                             | Vaseline Pure Ultra White | OTC                 |
| <i>sm petroleum jelly gel</i>                                      | Vaseline Pure Ultra White | OTC                 |
| <i>vaseline pure ultra white gel</i>                               | Vaseline Pure Ultra White | OTC                 |
| <i>white petroleum jelly external gel</i>                          |                           | OTC                 |
| <b>ZOE SCRIPTS IDEALBASE EXTERNAL CREAM</b>                        | 1st base                  |                     |
| <b>*Progestins*</b>  |                           |                     |
| <b>*Progestins***</b>  |                           |                     |
| <i>medroxyprogesterone acetate oral tablet 10 mg, 2.5 mg, 5 mg</i> | Provera                   |                     |
| <i>norethindrone acetate oral tablet 5 mg</i>                      |                           |                     |
| <i>progesterone intramuscular oil 50 mg/ml</i>                     |                           |                     |
| <i>progesterone oral capsule 100 mg, 200 mg</i>                    | Prometrium                |                     |

| Formulary Drug Name   | Reference | Restrictions                                |
|---|-----------|---|
| <b>*Psychotherapeutic And Neurological Agents - Misc.*</b>                                  |           |   |
| <b>*Alcohol Deterrents***</b>   |           |   |
| <i>acamprosate calcium oral tablet delayed release 333 mg</i>                               |           |   |
| <i>disulfiram oral tablet 250 mg, 500 mg</i>  |           |   |
| <b>*Benzodiazepines &amp; Tricyclic Agents***</b>   |           |   |
| <i>chlordiazepoxide-amitriptyline oral tablet 10-25 mg, 5-12.5 mg</i>                       |           |   |
| <b>*Cholinomimetics - Ache Inhibitors***</b>  |           |   |
| <i>donepezil hcl oral tablet 10 mg, 5 mg</i>  | Aricept   |   |
| <i>donepezil hcl oral tablet dispersible 10 mg, 5 mg</i>                                    |           |   |
| <i>galantamine hydrobromide er oral capsule extended release 24 hour 16 mg, 24 mg, 8 mg</i> |           |   |
| <i>galantamine hydrobromide oral tablet 12 mg, 4 mg, 8 mg</i>                               |           |   |
| <i>rivastigmine tartrate oral capsule 1.5 mg, 3 mg, 4.5 mg, 6 mg</i>                        |           |   |
| <i>rivastigmine transdermal patch 24 hour 13.3 mg/24hr, 4.6 mg/24hr, 9.5 mg/24hr</i>        | Exelon    |   |
| <b>*Fibromyalgia Agent - Snris***</b>   |           |   |
| <b>SAVELLA ORAL TABLET 100 MG, 12.5 MG, 25 MG, 50 MG</b>                                    |           | ST  |
| <b>SAVELLA TITRATION PACK ORAL 12.5 &amp; 25 &amp; 50 MG</b>                                |           | ST  |
| <b>*Movement Disorder Drug Therapy***</b>   |           |   |
| <b>AUSTEDO ORAL TABLET 12 MG, 6 MG, 9 MG</b>  |           | PA; QLL (4 EA per 1 day); AL (Min 18 Years) |
| <b>AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 12 MG, 24 MG, 6 MG</b>                   |           | PA; QLL (4 EA per 1 day); AL (Min 18 Years) |
| <b>INGREZZA ORAL CAPSULE 40 MG, 60 MG, 80 MG</b>  |           | PA; QLL (1 EA per 1 day); AL (Min 18 Years) |
| <b>INGREZZA ORAL CAPSULE THERAPY PACK 40 &amp; 80 MG</b>                                    |           | PA; QLL (1 EA per 1 day); AL (Min 18 Years) |
| <i>tetrabenazine oral tablet 12.5 mg, 25 mg</i>   | Xenazine  | PA; QLL (4 EA per 1 day); AL (Min 18 Years) |

| Formulary Drug Name   | Reference          | Restrictions                                |
|---|--------------------|---|
| XENAZINE ORAL TABLET 12.5 MG, 25 MG   | tetrabenazine      | PA; QLL (4 EA per 1 day); AL (Min 18 Years) |
| <b>*Ms Agents - Pyrimidine Synthesis Inhibitors***</b>                                    |                    |   |
| AUBAGIO ORAL TABLET 14 MG, 7 MG   | teriflunomide      |   |
| <b>*Multiple Sclerosis Agents - Interferons***</b>  |                    |   |
| AVONEX PEN INTRAMUSCULAR AUTO-INJECTOR KIT 30 MCG/0.5ML                                   |                    |   |
| AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT 30 MCG/0.5ML                         |                    |   |
| BETASERON SUBCUTANEOUS KIT 0.3 MG   |                    |   |
| <b>*Multiple Sclerosis Agents - Monoclonal Antibodies***</b>                              |                    |   |
| KESIMPTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 20 MG/0.4ML                                  |                    | ST; AL (Min 18 Years)                       |
| <b>*Multiple Sclerosis Agents - Nrf2 Pathway Activators***</b>                            |                    |   |
| <i>dimethyl fumarate oral capsule delayed release 120 mg, 240 mg</i>                      | Tecfidera          |   |
| <i>dimethyl fumarate starter pack oral 120 &amp; 240 mg</i>                               | Tecfidera          |   |
| <b>*Multiple Sclerosis Agents - Potassium Channel Blockers***</b>                         |                    |   |
| <i>dalfampridine er oral tablet extended release 12 hour 10 mg</i>                        | Ampyra             |   |
| <b>*Multiple Sclerosis Agents***</b>  |                    |   |
| COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML                                 | glatiramer acetate |   |
| <b>*N-Methyl-D-Aspartate (Nmda) Receptor Antagonists***</b>                               |                    |   |
| <i>memantine hcl oral tablet 10 mg, 5 mg</i>  | Namenda            |   |
| <b>*Phenothiazines &amp; Tricyclic Agents***</b>  |                    |   |
| <i>perphenazine-amitriptyline oral tablet 2-10 mg, 2-25 mg, 4-10 mg, 4-25 mg, 4-50 mg</i> |                    | AL (Min 18 Years)                           |

| <b>Formulary Drug Name</b>  | <b>Reference</b>     | <b>Restrictions</b> |
|---|----------------------|---------------------|
| <b>*Smoking Deterrents***</b>   |                      |                     |
| <i>bupropion hcl er (smoking det) oral tablet extended release 12 hour 150 mg</i> |                      |                     |
| <b>CHANTIX CONTINUING MONTH PAK ORAL TABLET 1 MG</b>                              | varenicline tartrate |                     |
| <b>CHANTIX ORAL TABLET 0.5 MG, 1 MG</b>   | varenicline tartrate |                     |
| <i>cvs nicotine mouth/throat lozenge 2 mg</i>                                     | KLS Quit2            | OTC                 |
| <i>cvs nicotine polacrilex mouth/throat gum 2 mg</i>                              | KLS Quit2            | OTC                 |
| <i>cvs nicotine polacrilex mouth/throat gum 4 mg</i>                              | KLS Quit4            | OTC                 |
| <i>cvs nicotine polacrilex mouth/throat lozenge 2 mg</i>                          | KLS Quit2            | OTC                 |
| <i>cvs nicotine polacrilex mouth/throat lozenge 4 mg</i>                          | KLS Quit4            | OTC                 |
| <i>cvs nicotine transdermal patch 24 hour 14 mg/24hr, 7 mg/24hr</i>               | Nicoderm CQ          | OTC                 |
| <i>eq nicotine mouth/throat gum 4 mg</i>  | KLS Quit4            | OTC                 |
| <i>eq nicotine mouth/throat lozenge 4 mg</i>                                      | KLS Quit4            | OTC                 |
| <i>eq nicotine polacrilex mouth/throat gum 2 mg</i>                               | KLS Quit2            | OTC                 |
| <i>eq nicotine polacrilex mouth/throat gum 4 mg</i>                               | KLS Quit4            | OTC                 |
| <i>eq nicotine polacrilex mouth/throat lozenge 2 mg</i>                           | KLS Quit2            | OTC                 |
| <i>eq nicotine polacrilex mouth/throat lozenge 4 mg</i>                           | KLS Quit4            | OTC                 |
| <i>eq nicotine step 3 transdermal patch 24 hour 7 mg/24hr</i>                     | Nicoderm CQ          | OTC                 |
| <i>eq nicotine transdermal patch 24 hour 14 mg/24hr, 7 mg/24hr</i>                | Nicoderm CQ          | OTC                 |
| <i>eq nicotine transdermal patch 24 hour 21 mg/24hr</i>                           | Habitrol             | OTC                 |
| <i>eql nicotine polacrilex mouth/throat gum 2 mg</i>                              | KLS Quit2            | OTC                 |
| <i>eql nicotine polacrilex mouth/throat gum 4 mg</i>                              | KLS Quit4            | OTC                 |
| <i>eql nicotine polacrilex mouth/throat lozenge 2 mg</i>                          | KLS Quit2            | OTC                 |
| <i>eql nicotine polacrilex mouth/throat lozenge 4 mg</i>                          | KLS Quit4            | OTC                 |
| <i>gnp nicotine mini mouth/throat lozenge 2 mg</i>                                | KLS Quit2            | OTC                 |
| <i>gnp nicotine polacrilex mouth/throat gum 2 mg</i>                              | KLS Quit2            | OTC                 |
| <i>gnp nicotine polacrilex mouth/throat gum 4 mg</i>                              | KLS Quit4            | OTC                 |
| <i>gnp nicotine polacrilex mouth/throat lozenge 2 mg</i>                          | KLS Quit2            | OTC                 |



| <b>Formulary Drug Name</b>   | <b>Reference</b> | <b>Restrictions</b> |
|--|------------------|---------------------|
| <i>gnp nicotine polacrilex mouth/throat lozenge 4 mg</i>           | KLS Quit4        | OTC                 |
| <i>gnp nicotine transdermal patch 24 hour 7 mg/24hr</i>            | Nicoderm CQ      | OTC                 |
| <i>goodsense nicotine mouth/throat gum 4 mg</i>                    | KLS Quit4        | OTC                 |
| <i>hm nicotine polacrilex mouth/throat gum 2 mg</i>                | KLS Quit2        | OTC                 |
| <i>hm nicotine polacrilex mouth/throat gum 4 mg</i>                | KLS Quit4        | OTC                 |
| <i>hm nicotine polacrilex mouth/throat lozenge 2 mg</i>            | KLS Quit2        | OTC                 |
| <i>hm nicotine polacrilex mouth/throat lozenge 4 mg</i>            | KLS Quit4        | OTC                 |
| <i>hm nicotine transdermal patch 24 hour 14 mg/24hr, 7 mg/24hr</i> | Nicoderm CQ      | OTC                 |
| <i>hm nicotine transdermal patch 24 hour 21 mg/24hr</i>            | Habitrol         | OTC                 |
| <i>kls quit2 mouth/throat gum 2 mg</i>                             | KLS Quit2        | OTC                 |
| <i>kls quit2 mouth/throat lozenge 2 mg</i>                         | KLS Quit2        | OTC                 |
| <i>kls quit4 mouth/throat gum 4 mg</i>                             | KLS Quit4        | OTC                 |
| <i>kls quit4 mouth/throat lozenge 4 mg</i>                         | KLS Quit4        | OTC                 |
| <i>nicorelief mouth/throat gum 2 mg</i>                            | KLS Quit2        | OTC                 |
| <i>nicorelief mouth/throat gum 4 mg</i>                            | KLS Quit4        | OTC                 |
| <i>nicotine mini mouth/throat lozenge 2 mg</i>                     | KLS Quit2        | OTC                 |
| <i>nicotine mini mouth/throat lozenge 4 mg</i>                     | KLS Quit4        | OTC                 |
| <i>nicotine polacrilex mouth/throat gum 2 mg</i>                   | KLS Quit2        | OTC                 |
| <i>nicotine polacrilex mouth/throat gum 4 mg</i>                   | KLS Quit4        | OTC                 |
| <i>nicotine polacrilex mouth/throat lozenge 2 mg</i>               | KLS Quit2        | OTC                 |
| <i>nicotine polacrilex mouth/throat lozenge 4 mg</i>               | KLS Quit4        | OTC                 |
| <i>nicotine step 1 transdermal patch 24 hour 21 mg/24hr</i>        | Habitrol         | OTC                 |
| <i>nicotine step 2 transdermal patch 24 hour 14 mg/24hr</i>        | Nicoderm CQ      | OTC                 |
| <i>nicotine step 3 transdermal patch 24 hour 7 mg/24hr</i>         | Nicoderm CQ      | OTC                 |
| <b>NICOTINE TRANSDERMAL KIT 21-14-7 MG/24HR</b>                    |                  | OTC                 |
| <i>nicotine transdermal patch 24 hour 14 mg/24hr, 7 mg/24hr</i>    | Nicoderm CQ      | OTC                 |
| <i>nicotine transdermal patch 24 hour 21 mg/24hr</i>               | Habitrol         | OTC                 |
| <i>px stop smoking aid mouth/throat gum 2 mg</i>                   | KLS Quit2        | OTC                 |
| <i>px stop smoking aid mouth/throat gum 4 mg</i>                   | KLS Quit4        | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b> | <b>Restrictions</b> |
|--|------------------|---------------------|
| <i>px stop smoking aid mouth/throat lozenge 2 mg</i>               | KLS Quit2        | OTC                 |
| <i>px stop smoking aid mouth/throat lozenge 4 mg</i>               | KLS Quit4        | OTC                 |
| <i>ra mini nicotine mouth/throat lozenge 2 mg</i>                  | KLS Quit2        | OTC                 |
| <i>ra mini nicotine mouth/throat lozenge 4 mg</i>                  | KLS Quit4        | OTC                 |
| <i>ra nicotine gum mouth/throat gum 2 mg</i>                       | KLS Quit2        | OTC                 |
| <i>ra nicotine gum mouth/throat gum 4 mg</i>                       | KLS Quit4        | OTC                 |
| <i>ra nicotine mouth/throat gum 2 mg</i>                           | KLS Quit2        | OTC                 |
| <i>ra nicotine mouth/throat gum 4 mg</i>                           | KLS Quit4        | OTC                 |
| <i>ra nicotine polacrilex mouth/throat gum 2 mg</i>                | KLS Quit2        | OTC                 |
| <i>ra nicotine polacrilex mouth/throat gum 4 mg</i>                | KLS Quit4        | OTC                 |
| <i>ra nicotine polacrilex mouth/throat lozenge 2 mg</i>            | KLS Quit2        | OTC                 |
| <i>ra nicotine polacrilex mouth/throat lozenge 4 mg</i>            | KLS Quit4        | OTC                 |
| <i>ra nicotine transdermal patch 24 hour 14 mg/24hr, 7 mg/24hr</i> | Nicoderm CQ      | OTC                 |
| <i>ra nicotine transdermal patch 24 hour 21 mg/24hr</i>            | Habitrol         | OTC                 |
| <i>sm nicotine mouth/throat gum 4 mg</i>                           | KLS Quit4        | OTC                 |
| <i>sm nicotine mouth/throat lozenge 2 mg</i>                       | KLS Quit2        | OTC                 |
| <i>sm nicotine polacrilex mouth/throat gum 2 mg</i>                | KLS Quit2        | OTC                 |
| <i>sm nicotine polacrilex mouth/throat gum 4 mg</i>                | KLS Quit4        | OTC                 |
| <i>sm nicotine polacrilex mouth/throat lozenge 4 mg</i>            | KLS Quit4        | OTC                 |
| <i>sm nicotine transdermal patch 24 hour 14 mg/24hr, 7 mg/24hr</i> | Nicoderm CQ      | OTC                 |
| <i>sm nicotine transdermal patch 24 hour 21 mg/24hr</i>            | Habitrol         | OTC                 |
| <i>sr nicotine mouth/throat gum 2 mg</i>                           | KLS Quit2        | OTC                 |
| <i>tgt nicotine mouth/throat gum 2 mg</i>                          | KLS Quit2        | OTC                 |
| <i>tgt nicotine mouth/throat gum 4 mg</i>                          | KLS Quit4        | OTC                 |
| <i>tgt nicotine polacrilex mouth/throat gum 2 mg</i>               | KLS Quit2        | OTC                 |
| <i>tgt nicotine polacrilex mouth/throat gum 4 mg</i>               | KLS Quit4        | OTC                 |
| <i>tgt nicotine polacrilex mouth/throat lozenge 2 mg</i>           | KLS Quit2        | OTC                 |
| <i>tgt nicotine polacrilex mouth/throat lozenge 4 mg</i>           | KLS Quit4        | OTC                 |
| <i>tgt nicotine step one transdermal patch 24 hour 21 mg/24hr</i>  | Habitrol         | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b> | <b>Restrictions</b>          |
|--|------------------|------------------------------|
| <i>tgt nicotine step three transdermal patch 24 hour 7 mg/24hr</i>                         | Nicoderm CQ      | OTC                          |
| <i>tgt nicotine step two transdermal patch 24 hour 14 mg/24hr</i>                          | Nicoderm CQ      | OTC                          |
| <i>thrive mouth/throat gum 2 mg</i>  | KLS Quit2        | OTC                          |
| <i>varenicline tartrate (starter) oral tablet therapy pack 0.5 mg x 11 &amp; 1 mg x 42</i> |                  |                              |
| <i>varenicline tartrate oral tablet 0.5 mg, 1 mg</i>                                       |                  |                              |
| <b>*Sphingosine 1-Phosphate (S1p) Receptor Modulators***</b>                               |                  |                              |
| <i>fingolimod hcl oral capsule 0.5 mg</i>  | Gilenya          | AL (Min 10 Years)            |
| <b>*Respiratory Agents - Misc.*</b>  |                  |                              |
| <b>*Cftr Potentiators***</b>   |                  |                              |
| <b>KALYDECO ORAL PACKET 13.4 MG, 25 MG, 50 MG, 75 MG</b>                                   |                  | PA                           |
| <b>KALYDECO ORAL TABLET 150 MG</b>   |                  | PA                           |
| <b>*Cystic Fibrosis Agent - Combinations***</b>  |                  |                              |
| <b>ORKAMBI ORAL PACKET 100-125 MG, 150-188 MG, 75-94 MG</b>                                |                  | PA                           |
| <b>ORKAMBI ORAL TABLET 100-125 MG, 200-125 MG</b>  |                  | PA                           |
| <b>SYMDEKO ORAL TABLET THERAPY PACK 100-150 &amp; 150 MG, 50-75 &amp; 75 MG</b>            |                  | PA                           |
| <b>TRIKAFTA ORAL TABLET THERAPY PACK 100-50-75 &amp; 150 MG, 50-25-37.5 &amp; 75 MG</b>    |                  | PA                           |
| <b>TRIKAFTA ORAL THERAPY PACK 100-50-75 &amp; 75 MG, 80-40-60 &amp; 59.5 MG</b>            |                  | PA                           |
| <b>*Hydrolytic Enzymes***</b>  |                  |                              |
| <b>PULMOZYME INHALATION SOLUTION 1 MG/ML</b>   |                  | PA; QLL (150 ML per 30 days) |
| <b>*Pulmonary Fibrosis Agents***</b>   |                  |                              |
| <i>pirfenidone oral tablet 267 mg, 801 mg</i>  | Esbriet          | PA                           |
| <b>*Sulfonamides*</b>  |                  |                              |
| <b>*Sulfonamides***</b>  |                  |                              |
| <b>SULFADIAZINE ORAL TABLET 500 MG</b>   |                  |                              |
| <b>*Tetracyclines*</b>   |                  |                              |
| <b>*Tetracyclines***</b>   |                  |                              |
| <i>doxycycline hyclate oral capsule 100 mg</i>   | Vibramycin       |                              |

| <b>Formulary Drug Name</b>   | <b>Reference</b>    | <b>Restrictions</b>  |
|--|---------------------|----------------------|
| <i>doxycycline hyclate oral capsule 50 mg</i>  |                     |                      |
| <i>doxycycline hyclate oral tablet 100 mg, 20 mg</i>   |                     |                      |
| <i>doxycycline monohydrate oral capsule 100 mg</i>   | Mondoxyne NL        |                      |
| <i>doxycycline monohydrate oral capsule 50 mg</i>  |                     |                      |
| <i>doxycycline monohydrate oral suspension reconstituted 25 mg/5ml</i>   | Vibramycin          | AL (Max 12 Years)    |
| <i>doxycycline monohydrate oral tablet 100 mg</i>  |                     |                      |
| <i>minocycline hcl oral capsule 100 mg, 50 mg, 75 mg</i>   |                     |                      |
| <i>mondoxyne nl oral capsule 100 mg</i>  | Mondoxyne NL        |                      |
| <i>mondoxyne nl oral capsule 50 mg</i>   |                     |                      |
| <b>MORGIDOX ORAL CAPSULE 100 MG</b>  | doxycycline hyclate |                      |
| <b>*Thyroid Agents*</b>  |                     |                      |
| <b>*Antithyroid Agents***</b>  |                     |                      |
| <i>methimazole oral tablet 10 mg, 5 mg</i>   |                     |                      |
| <i>propylthiouracil oral tablet 50 mg</i>  |                     |                      |
| <b>*Thyroid Hormones***</b>  |                     |                      |
| <i>levo-t oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg</i>               | Levo-T              | QLL (1 EA per 1 day) |
| <i>levothyroxine sodium oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg</i> | Levo-T              | QLL (1 EA per 1 day) |
| <i>levoxyl oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg</i>                       | Levo-T              | QLL (1 EA per 1 day) |
| <i>liothyronine sodium oral tablet 25 mcg, 50 mcg</i>  | Cytomel             | QLL (2 EA per 1 day) |
| <i>liothyronine sodium oral tablet 5 mcg</i>   | Cytomel             | QLL (4 EA per 1 day) |
| <b>NP THYROID ORAL TABLET 120 MG, 15 MG, 30 MG</b>   | thyroid             | QLL (1 EA per 1 day) |
| <i>np thyroid oral tablet 60 mg, 90 mg</i>   | NP Thyroid          | QLL (1 EA per 1 day) |
| <i>thyroid oral tablet 120 mg, 15 mg, 30 mg, 60 mg, 90 mg</i>  | NP Thyroid          | QLL (1 EA per 1 day) |
| <i>unithroid oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg</i>            | Levo-T              | QLL (1 EA per 1 day) |

| Formulary Drug Name   | Reference                    | Restrictions      |
|---|------------------------------|-------------------|
| <b>*Ulcer<br/>Drugs/Antispasmodics/Anticholinergics*</b>                    |                              |                   |
| <b>*Antispasmodics***</b>   |                              |                   |
| <i>dicyclomine hcl oral capsule 10 mg</i>                                   |                              |                   |
| <i>dicyclomine hcl oral solution 10 mg/5ml</i>                              |                              | AL (Max 12 Years) |
| <i>dicyclomine hcl oral tablet 20 mg</i>                                    |                              |                   |
| <b>*Belladonna Alkaloids***</b>   |                              |                   |
| <i>ed-spaz oral tablet dispersible 0.125 mg</i>                             | NuLev                        |                   |
| <i>hyoscyamine sulfate er oral tablet extended release 12 hour 0.375 mg</i> | Levbid                       |                   |
| <i>hyoscyamine sulfate oral elixir 0.125 mg/5ml</i>                         |                              |                   |
| <i>hyoscyamine sulfate oral tablet 0.125 mg</i>                             | Levsin                       |                   |
| <i>hyoscyamine sulfate oral tablet dispersible 0.125 mg</i>                 | NuLev                        |                   |
| <i>hyoscyamine sulfate sublingual tablet sublingual 0.125 mg</i>            | Levsin/SL                    |                   |
| <i>hyosyne oral elixir 0.125 mg/5ml</i>                                     |                              |                   |
| <i>nulev oral tablet dispersible 0.125 mg</i>                               | NuLev                        |                   |
| <i>oscimin oral tablet 0.125 mg</i>   | Levsin                       |                   |
| <i>oscimin oral tablet dispersible 0.125 mg</i>                             | NuLev                        |                   |
| <i>oscimin sr oral tablet extended release 12 hour 0.375 mg</i>             | Levbid                       |                   |
| <i>oscimin sublingual tablet sublingual 0.125 mg</i>                        | Levsin/SL                    |                   |
| <i>symax-sl sublingual tablet sublingual 0.125 mg</i>                       | Levsin/SL                    |                   |
| <i>symax-sr oral tablet extended release 12 hour 0.375 mg</i>               | Levbid                       |                   |
| <b>*H-2 Antagonists***</b>  |                              |                   |
| <i>cimetidine hcl oral solution 300 mg/5ml</i>                              |                              |                   |
| <i>cimetidine oral tablet 200 mg</i>  | Tagamet HB                   |                   |
| <i>cimetidine oral tablet 300 mg, 400 mg, 800 mg</i>                        |                              |                   |
| <i>famotidine oral suspension reconstituted 40 mg/5ml</i>                   |                              |                   |
| <i>famotidine oral tablet 10 mg</i>   | Pepcid AC                    | OTC               |
| <i>famotidine oral tablet 20 mg</i>   | MM Acid-Pep Maximum Strength |                   |
| <i>famotidine oral tablet 40 mg</i>   | Pepcid                       |                   |
| <i>gnp heartburn relief oral tablet 200 mg</i>                              | Tagamet HB                   | OTC               |
| <i>nizatidine oral capsule 150 mg, 300 mg</i>                               |                              |                   |

| <b>Formulary Drug Name</b>   | <b>Reference</b>               | <b>Restrictions</b> |
|--|--------------------------------|---------------------|
| <i>sm acid reducer oral tablet 200 mg</i>                                  | Tagamet HB                     | OTC                 |
| <b>*Misc. Anti-Ulcer***</b>  |                                |                     |
| <i>sucralfate oral tablet 1 gm</i>   | Carafate                       |                     |
| <b>*Proton Pump Inhibitors***</b>  |                                |                     |
| <i>esomeprazole magnesium oral capsule delayed release 20 mg</i>           | GoodSense Esomeprazole         |                     |
| <i>esomeprazole magnesium oral capsule delayed release 40 mg</i>           | NexIUM                         |                     |
| <i>esomeprazole magnesium oral tablet delayed release 20 mg</i>            | NexIUM 24HR                    | OTC                 |
| <i>lansoprazole oral capsule delayed release 15 mg</i>                     | Prevacid 24HR                  |                     |
| <i>lansoprazole oral capsule delayed release 30 mg</i>                     | Prevacid                       |                     |
| <i>omeprazole magnesium oral capsule delayed release 20.6 (20 base) mg</i> |                                | OTC                 |
| <i>omeprazole magnesium oral tablet delayed release 20 mg</i>              | PriLOSEC OTC                   | OTC                 |
| <i>omeprazole oral capsule delayed release 10 mg, 20 mg, 40 mg</i>         |                                |                     |
| <i>omeprazole oral tablet delayed release 20 mg</i>                        |                                | OTC                 |
| <i>omeprazole oral tablet delayed release dispersible 20 mg</i>            |                                | OTC                 |
| <i>pantoprazole sodium oral packet 40 mg</i>                               | Protonix                       |                     |
| <i>pantoprazole sodium oral tablet delayed release 20 mg, 40 mg</i>        | Protonix                       |                     |
| <b>PROTONIX ORAL PACKET 40 MG</b>  | pantoprazole sodium            |                     |
| <i>rabeprazole sodium oral tablet delayed release 20 mg</i>                | Aciphex                        |                     |
| <b>*Quaternary Anticholinergics***</b>                                     |                                |                     |
| <i>glycopyrrolate oral tablet 1 mg</i>                                     | Robinul                        |                     |
| <i>glycopyrrolate oral tablet 2 mg</i>                                     | Robinul-Forte                  |                     |
| <b>*Ulcer Anti-Infective W/ Bismuth Combinations***</b>                    |                                |                     |
| <i>bismuth/metronidaz/tetracyclin oral capsule 140-125-125 mg</i>          | Pylera                         |                     |
| <b>PYLERA ORAL CAPSULE 140-125-125 MG</b>                                  | bismuth/metronidaz/tetracyclin |                     |
| <b>*Ulcer Drugs - Prostaglandins***</b>                                    |                                |                     |
| <i>misoprostol oral tablet 100 mcg, 200 mcg</i>                            | Cytotec                        |                     |



| Formulary Drug Name   | Reference                 | Restrictions |
|---|---------------------------|--------------|
| <b>*Urinary Antispasmodics*</b>   |                           |              |
| <b>*Urinary Antispasmodic - Antimuscarinic (Anticholinergic)***</b>                   |                           |              |
| <i>fesoterodine fumarate er oral tablet extended release 24 hour 4 mg, 8 mg</i>       | Toviaz                    |              |
| <i>oxybutynin chloride er oral tablet extended release 24 hour 10 mg, 15 mg, 5 mg</i> |                           |              |
| <i>oxybutynin chloride oral solution 5 mg/5ml</i>                                     |                           |              |
| <i>oxybutynin chloride oral syrup 5 mg/5ml</i>  |                           |              |
| <i>oxybutynin chloride oral tablet 2.5 mg, 5 mg</i>                                   |                           |              |
| <i>solifenacin succinate oral tablet 10 mg, 5 mg</i>                                  | VESIcare                  |              |
| <i>tolterodine tartrate er oral capsule extended release 24 hour 2 mg, 4 mg</i>       | Detrol LA                 |              |
| <i>tolterodine tartrate oral tablet 1 mg, 2 mg</i>                                    | Detrol                    |              |
| <b>TOVIAZ ORAL TABLET EXTENDED RELEASE 24 HOUR 4 MG, 8 MG</b>                         | fesoterodine fumarate er  |              |
| <i>tropium chloride oral tablet 20 mg</i>   |                           |              |
| <b>*Urinary Antispasmodics - Cholinergic Agonists***</b>                              |                           |              |
| <i>bethanechol chloride oral tablet 10 mg, 25 mg, 5 mg, 50 mg</i>                     |                           |              |
| <b>*Urinary Antispasmodics - Direct Muscle Relaxants***</b>                           |                           |              |
| <i>flavoxate hcl oral tablet 100 mg</i>   |                           |              |
| <b>*Vaginal And Related Products*</b>   |                           |              |
| <b>*Imidazole-Related Antifungals***</b>  |                           |              |
| <i>3 day vaginal vaginal cream 2 %</i>  |                           | OTC          |
| <i>clotrimazole 3 vaginal cream 2 %</i>   |                           | OTC          |
| <i>clotrimazole vaginal cream 1 %</i>   |                           | OTC          |
| <i>clotrimazole vaginal cream 2 %</i>   |                           |              |
| <i>clotrimazole-7 vaginal cream 1 %</i>   |                           | OTC          |
| <i>cvs 3-day vaginal vaginal cream 2 %</i>  |                           | OTC          |
| <i>cvs miconazole 1 combo pack vaginal kit 1200 &amp; 2 mg &amp; %</i>                | Monistat 1 Combo Pack     | OTC          |
| <i>cvs miconazole 3 combo pack vaginal kit 200 &amp; 2 mg-% (9gm)</i>                 | Monistat 3 Combo Pack App | OTC          |
| <i>cvs miconazole 7 vaginal cream 2 %</i>   | Monistat 7 Simply Cure    | OTC          |
| <i>cvs tioconazole 1 vaginal ointment 6.5 %</i>                                       | Monistat 1-Day            | OTC          |
| <i>eq miconazole 1 vaginal kit 1200 &amp; 2 mg &amp; %</i>                            | Monistat 1 Combo Pack     | OTC          |

| <b>Formulary Drug Name</b>  | <b>Reference</b>            | <b>Restrictions</b> |
|---|-----------------------------|---------------------|
| <i>eq miconazole 3 combo pack vaginal kit 200 &amp; 2 mg-% (9gm)</i>  | Monistat 3 Combination Pack | OTC                 |
| <i>eq miconazole 7 day treatment vaginal cream 2 %</i>                | Monistat 7 Simply Cure      | OTC                 |
| <i>eq miconazole 7 vaginal cream 2 %</i>                              | Monistat 7 Simply Cure      | OTC                 |
| <i>eq tioconazole 1 vaginal ointment 6.5 %</i>                        | Monistat 1-Day              | OTC                 |
| <i>eql miconazole 3 vaginal kit 200 &amp; 2 mg-% (9gm)</i>            | Monistat 3 Combination Pack | OTC                 |
| <i>eql miconazole 7 vaginal cream 2 %</i>                             | Monistat 7 Simply Cure      | OTC                 |
| <i>eql tioconazole-1 vaginal ointment 6.5 %</i>                       | Monistat 1-Day              | OTC                 |
| <i>gnp clotrimazole 3 vaginal cream 2 %</i>                           |                             | OTC                 |
| <i>gnp miconazole 3 vaginal kit 200 &amp; 2 mg-% (9gm)</i>            | Monistat 3 Combination Pack | OTC                 |
| <i>gnp miconazole 7 vaginal cream 2 %</i>                             | Monistat 7 Simply Cure      | OTC                 |
| <i>gnp tioconazole 1 vaginal ointment 6.5 %</i>                       | Monistat 1-Day              | OTC                 |
| <b>GYNE-LOTRIMIN 3 VAGINAL CREAM 2 %</b>                              | 3 day vaginal               | OTC                 |
| <b>GYNE-LOTRIMIN VAGINAL CREAM 1 %</b>                                | clotrimazole                | OTC                 |
| <i>miconazole 1 vaginal kit 1200 &amp; 2 mg &amp; %</i>               | Monistat 1 Combo Pack       | OTC                 |
| <i>miconazole 3 applicator vaginal kit 200 &amp; 2 mg-% (9gm)</i>     | Monistat 3 Combo Pack App   | OTC                 |
| <i>miconazole 3 combo pack app vaginal kit 200 &amp; 2 mg-% (9gm)</i> | Monistat 3 Combo Pack App   | OTC                 |
| <i>miconazole 3 combo pack vaginal kit 200 &amp; 2 mg-% (9gm)</i>     | Monistat 3 Combo Pack App   | OTC                 |
| <i>miconazole 3 vaginal cream 4 %</i>                                 | Monistat 3                  | OTC                 |
| <i>miconazole 7 vaginal cream 2 %</i>                                 | Monistat 7 Simply Cure      | OTC                 |
| <i>miconazole 7 vaginal suppository 100 mg</i>                        |                             | OTC                 |
| <i>miconazole nitrate vaginal cream 2 %</i>                           | Monistat 7 Simply Cure      | OTC                 |
| <i>miconazole nitrate vaginal suppository 100 mg</i>                  |                             | OTC                 |
| <i>monistat 1-day vaginal ointment 6.5 %</i>                          | Monistat 1-Day              | OTC                 |
| <b>MONISTAT 3 COMBINATION PACK VAGINAL KIT 200 &amp; 2 MG-% (9GM)</b> | eql miconazole 3            | OTC                 |
| <b>MONISTAT 3 COMBO PACK APP VAGINAL KIT 200 &amp; 2 MG-% (9GM)</b>   | cvs miconazole 3 combo pack | OTC                 |
| <b>MONISTAT 3 VAGINAL CREAM 4 %</b>                                   | qc 3 day                    | OTC                 |
| <b>MONISTAT 7 COMBO PACK APP VAGINAL KIT 100 &amp; 2 MG-% (9GM)</b>   |                             | OTC                 |
| <b>MONISTAT 7 SIMPLY CURE VAGINAL CREAM 2 %</b>                       | cvs miconazole 7            | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>            | <b>Restrictions</b>          |
|--|-----------------------------|------------------------------|
| <i>px miconazole 3-day combo vaginal kit 200 &amp; 2 mg-% (9gm)</i>      | Monistat 3 Combination Pack | OTC                          |
| <i>qc 3 day vaginal cream 4 %</i>  | Monistat 3                  | OTC                          |
| <i>qc miconazole 7 vaginal cream 2 %</i>                                 | Monistat 7 Simply Cure      | OTC                          |
| <i>ra clotrimazole 3 vaginal cream 2 %</i>                               |                             | OTC                          |
| <i>ra clotrimazole 7 vaginal cream 1 %</i>                               |                             | OTC                          |
| <i>ra miconazole 3 combo pack app vaginal kit 200 &amp; 2 mg-% (9gm)</i> | Monistat 3 Combo Pack App   | OTC                          |
| <i>ra miconazole 3 combo pack vaginal kit 200 &amp; 2 mg-% (9gm)</i>     | Monistat 3 Combination Pack | OTC                          |
| <i>ra miconazole 7 vaginal cream 2 %</i>                                 | Monistat 7 Simply Cure      | OTC                          |
| <i>ra tioconazole 1 vaginal ointment 6.5 %</i>                           | Monistat 1-Day              | OTC                          |
| <i>sm 3-day vaginal vaginal cream 2 %</i>                                |                             | OTC                          |
| <i>sm clotrimazole vaginal vaginal cream 1 %</i>                         |                             | OTC                          |
| <i>sm miconazole 3 applicator vaginal kit 200 &amp; 2 mg-% (9gm)</i>     | Monistat 3 Combo Pack App   | OTC                          |
| <i>sm miconazole 3 vaginal kit 200 &amp; 2 mg-% (9gm)</i>                | Monistat 3 Combination Pack | OTC                          |
| <i>sm miconazole 7 vaginal cream 2 %</i>                                 | Monistat 7 Simply Cure      | OTC                          |
| <i>sm miconazole 7 vaginal suppository 100 mg</i>                        |                             | OTC                          |
| <i>sm tioconazole-1 vaginal ointment 6.5 %</i>                           | Monistat 1-Day              | OTC                          |
| <i>terconazole vaginal cream 0.4 %, 0.8 %</i>                            |                             |                              |
| <i>tgt miconazole 1 vaginal kit 1200 &amp; 2 mg &amp; %</i>              | Monistat 1 Combo Pack       | OTC                          |
| <i>tgt miconazole 3 combo pack vaginal kit 200 &amp; 2 mg-% (9gm)</i>    | Monistat 3 Combination Pack | OTC                          |
| <i>tgt miconazole 7 vaginal cream 2 %</i>                                | Monistat 7 Simply Cure      | OTC                          |
| <i>tgt tioconazole 1 vaginal ointment 6.5 %</i>                          | Monistat 1-Day              | OTC                          |
| <i>tgt tioconazole 1day vaginal ointment 6.5 %</i>                       | Monistat 1-Day              | OTC                          |
| <i>tioconazole-1 vaginal ointment 6.5 %</i>                              | Monistat 1-Day              | OTC                          |
| <b>*Spermicides***</b>   |                             |                              |
| <b>TODAY SPONGE VAGINAL 1000 MG</b>                                      |                             | OTC; QLL (3 EA per 30 days)  |
| <b>VCF VAGINAL CONTRACEPTIVE VAGINAL FILM 28 %</b>                       |                             | OTC; QLL (12 EA per 30 days) |
| <b>*Vaginal Anti-Infectives***</b>                                       |                             |                              |
| <b>CLEOCIN VAGINAL SUPPOSITORY 100 MG</b>                                |                             |                              |
| <i>clindamycin phosphate vaginal cream 2 %</i>                           | Cleocin                     |                              |
| <b>CLINDESSE VAGINAL CREAM 2 %</b>                                       |                             |                              |
| <i>cvs disposable douche vaginal solution 0.3 %</i>                      | Summers Eve Disp Medicated  | OTC                          |
| <i>medicated douche vaginal solution 0.3 %</i>                           | Summers Eve Disp Medicated  | OTC                          |

| <b>Formulary Drug Name</b>  | <b>Reference</b>           | <b>Restrictions</b>      |
|---|----------------------------|--------------------------|
| <i>metronidazole vaginal gel 0.75 %</i>   | Vandazole                  |                          |
| <b>NUVESSA VAGINAL GEL 1.3 %</b>  |                            |                          |
| <i>summers eve disp medicated vaginal solution 0.3 %</i>                        | Summers Eve Disp Medicated | OTC                      |
| <b>VANDAZOLE VAGINAL GEL 0.75 %</b>   | metronidazole              |                          |
| <b>*Vaginal Estrogens***</b>  |                            |                          |
| <i>estradiol vaginal cream 0.1 mg/gm</i>  | Estrace                    |                          |
| <b>PREMARIN VAGINAL CREAM 0.625 MG/GM</b>                                       |                            |                          |
| <b>VAGIFEM VAGINAL TABLET 10 MCG</b>  | estradiol                  |                          |
| <i>yuvafem vaginal tablet 10 mcg</i>  |                            |                          |
| <b>*Vasopressors*</b>   |                            |                          |
| <b>*Anaphylaxis Therapy Agents***</b>   |                            |                          |
| <i>epinephrine injection solution auto-injector 0.15 mg/0.15ml</i>              | Auvi-Q                     | QLL (12 EA per 365 days) |
| <i>epinephrine injection solution auto-injector 0.15 mg/0.3ml</i>               | EpiPen Jr 2-Pak            | QLL (12 EA per 365 days) |
| <i>epinephrine injection solution auto-injector 0.3 mg/0.3ml</i>                | EpiPen 2-Pak               | QLL (12 EA per 365 days) |
| <b>EPIPEN 2-PAK INJECTION SOLUTION AUTO-INJECTOR 0.3 MG/0.3ML</b>               | epinephrine                | QLL (12 EA per 365 days) |
| <b>EPIPEN JR 2-PAK INJECTION SOLUTION AUTO-INJECTOR 0.15 MG/0.3ML</b>           | epinephrine                | QLL (12 EA per 365 days) |
| <b>SYMJEPI INJECTION SOLUTION PREFILLED SYRINGE 0.15 MG/0.3ML, 0.3 MG/0.3ML</b> |                            | QLL (12 EA per 365 days) |
| <b>*Vasopressors***</b>   |                            |                          |
| <i>midodrine hcl oral tablet 10 mg, 2.5 mg, 5 mg</i>                            |                            |                          |
| <b>*Vitamins*</b>   |                            |                          |
| <b>*Biotin***</b>   |                            |                          |
| <i>biotin 5000 oral capsule 5 mg</i>  | Meribin                    | OTC                      |
| <i>biotin forte oral tablet 5 mg</i>  |                            | OTC                      |
| <b>BIOTIN MAXIMUM ORAL TABLET DISPERSIBLE 10000 MCG</b>                         |                            | OTC                      |
| <i>biotin maximum strength oral capsule 5000 mcg</i>                            | Meribin                    | OTC                      |
| <i>biotin maximum strength oral tablet 10000 mcg</i>                            |                            | OTC                      |
| <b>BIOTIN ORAL CAPSULE 1 MG</b>   |                            | OTC                      |
| <i>biotin oral capsule 10 mg</i>  |                            | OTC                      |

| <b>Formulary Drug Name</b>  | <b>Reference</b> | <b>Restrictions</b> |
|---|------------------|---------------------|
| <i>biotin oral capsule 2500 mcg</i>   | Hard Nails       | OTC                 |
| <i>biotin oral capsule 5 mg, 5000 mcg</i>                                     | Meribin          | OTC                 |
| <i>biotin oral tablet 10 mg, 1000 mcg, 10000 mcg, 300 mcg, 5 mg, 5000 mcg</i> |                  | OTC                 |
| <b>BIOTIN ORAL TABLET 800 MCG</b>   |                  | OTC                 |
| <b>BIOTIN ORAL TABLET CHEWABLE 1000 MCG</b>                                   |                  | OTC                 |
| <b>BIOTIN ORAL TABLET DISPERSIBLE 5 MG</b>                                    |                  | OTC                 |
| <i>cvs biotin high potency oral tablet 1000 mcg</i>                           |                  | OTC                 |
| <i>cvs biotin oral capsule 10 mg</i>  |                  | OTC                 |
| <i>cvs biotin oral capsule 5000 mcg</i>                                       | Meribin          | OTC                 |
| <b>CYTO B7 ORAL LIQUID 10 MG/ML</b>   |                  | OTC                 |
| <i>eql biotin oral capsule 5000 mcg</i>                                       | Meribin          | OTC                 |
| <i>gnp biotin oral capsule 5000 mcg</i>                                       | Meribin          | OTC                 |
| <b>HARD NAILS ORAL CAPSULE 2.5 MG</b>   | ra biotin        | OTC                 |
| <i>hm biotin oral tablet dispersible 10000 mcg</i>                            |                  | OTC                 |
| <b>MEGA BIOTIN ORAL CAPSULE 10 MG</b>   |                  | OTC                 |
| <i>meribin oral capsule 5 mg</i>  | Meribin          | OTC                 |
| <i>pa biotin oral capsule 5000 mcg</i>  | Meribin          | OTC                 |
| <i>pa biotin oral tablet 1000 mcg</i>   |                  | OTC                 |
| <i>ra biotin oral capsule 2500 mcg</i>  | Hard Nails       | OTC                 |
| <i>ra biotin oral tablet 1000 mcg</i>   |                  | OTC                 |
| <i>sm biotin oral tablet 5000 mcg</i>   |                  | OTC                 |
| <i>super biotin oral capsule 5000 mcg</i>                                     | Meribin          | OTC                 |
| <i>super biotin oral tablet 5000 mcg</i>                                      |                  | OTC                 |
| <b>*Vitamin A***</b>  |                  |                     |
| <i>a-10000 oral capsule 10000 unit</i>  |                  | OTC                 |
| <i>gnp vitamin a oral capsule 10000 unit, 8000 unit</i>                       |                  | OTC                 |
| <i>natural vitamin a oral capsule 10000 unit</i>                              |                  | OTC                 |
| <i>px vitamin a oral capsule 8000 unit</i>                                    |                  | OTC                 |
| <i>ra vitamin a oral capsule 10000 unit</i>                                   |                  | OTC                 |
| <i>vitamin a oral capsule 10000 unit, 8000 unit</i>                           |                  | OTC                 |
| <b>*Vitamin B-1***</b>  |                  |                     |
| <i>b-1 oral tablet 250 mg</i>   |                  | OTC                 |
| <b>B-1 ORAL TABLET 500 MG</b>   |                  | OTC                 |
| <i>gnp vitamin b1 oral tablet 100 mg</i>                                      |                  | OTC                 |
| <i>hm vitamin b1 oral tablet 100 mg</i>                                       |                  | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b> | <b>Restrictions</b> |
|--|------------------|---------------------|
| <i>ra vitamin b-1 oral tablet 100 mg</i>                             |                  | OTC                 |
| <i>sm vitamin b1 oral tablet 100 mg</i>                              |                  | OTC                 |
| <i>vitamin b1 oral tablet 100 mg</i>                                 |                  | OTC                 |
| <i>vitamin b-1 oral tablet 250 mg, 50 mg</i>                         |                  | OTC                 |
| <b>*Vitamin B-3***</b>   |                  |                     |
| <i>endur-acin oral tablet extended release 250 mg</i>                | Endur-Acin       | OTC                 |
| <i>gnp niacin oral tablet 250 mg</i>                                 |                  | OTC                 |
| <i>gnp niacin tr oral tablet extended release 250 mg</i>             | Endur-Acin       | OTC                 |
| <i>hm niacin oral tablet extended release 250 mg</i>                 | Endur-Acin       | OTC                 |
| <i>hm niacin tr oral tablet extended release 250 mg</i>              | Endur-Acin       | OTC                 |
| <i>kp niacin oral tablet 500 mg</i>                                  |                  | OTC                 |
| <i>niacin er oral capsule extended release 250 mg, 500 mg</i>        |                  | OTC                 |
| <i>niacin er oral tablet extended release 250 mg, 500 mg, 750 mg</i> | Endur-Acin       | OTC                 |
| <i>niacin oral tablet 100 mg, 250 mg, 50 mg, 500 mg</i>              |                  | OTC                 |
| <i>niacin-50 oral tablet 50 mg</i>                                   |                  | OTC                 |
| <b>NIACINAMIDE ER ORAL TABLET EXTENDED RELEASE 500 MG</b>            |                  | OTC                 |
| <i>niacinamide oral tablet 100 mg, 500 mg</i>                        |                  | OTC                 |
| <i>px niacin oral tablet 100 mg</i>                                  |                  | OTC                 |
| <i>ra niacin oral tablet 100 mg, 500 mg</i>                          |                  | OTC                 |
| <i>ra no flush niacin oral tablet 500 mg</i>                         |                  | OTC                 |
| <i>slo-niacin oral tablet extended release 250 mg</i>                | Endur-Acin       | OTC                 |
| <i>sm niacin cr oral tablet extended release 250 mg</i>              | Endur-Acin       | OTC                 |
| <b>*Vitamin B-6***</b>   |                  |                     |
| <i>b6 natural oral tablet 100 mg</i>                                 |                  | OTC                 |
| <i>b-6 oral tablet 100 mg, 250 mg, 50 mg, 500 mg</i>                 |                  | OTC                 |
| <b>B-NATAL MOUTH/THROAT LOZENGE 25 MG</b>                            |                  | OTC                 |
| <b>B-NATAL MOUTH/THROAT LOZENGE ON A HANDLE 25 MG</b>                |                  | OTC                 |
| <i>cvs b6 oral tablet 100 mg</i>                                     |                  | OTC                 |
| <i>eql b-6 oral tablet 100 mg</i>                                    |                  | OTC                 |
| <i>gnp vitamin b-6 oral tablet 100 mg</i>                            |                  | OTC                 |



| <b>Formulary Drug Name</b>                                      | <b>Reference</b>  | <b>Restrictions</b> |
|---|-------------------|---------------------|
| <i>hm vitamin b6 oral tablet 100 mg</i>                         |                   | OTC                 |
| <i>kp vitamin b-6 oral tablet 100 mg</i>                        |                   | OTC                 |
| <i>neuro-k-250 vitamin b6 oral tablet 250 mg</i>                |                   | OTC                 |
| <i>neuro-k-50 oral tablet 50 mg</i>                             |                   | OTC                 |
| <i>neuro-k-500 oral tablet 500 mg</i>                           |                   | OTC                 |
| <i>pyri 500 oral tablet 500 mg</i>                              |                   | OTC                 |
| <i>pyridoxine hcl oral tablet 100 mg, 25 mg, 50 mg</i>          |                   | OTC                 |
| <i>ra vitamin b-6 cr oral tablet extended release 200 mg</i>    |                   | OTC                 |
| <i>ra vitamin b-6 oral tablet 100 mg, 50 mg</i>                 |                   | OTC                 |
| <i>sm vitamin b-6 oral tablet 100 mg</i>                        |                   | OTC                 |
| <i>vitamin b-6 er oral tablet extended release 200 mg</i>       |                   | OTC                 |
| <i>vitamin b-6 oral tablet 100 mg, 25 mg, 50 mg</i>             |                   | OTC                 |
| <i>vitamin b6 oral tablet 250 mg</i>                            |                   | OTC                 |
| <i>yl vitamin b-6 oral tablet 100 mg</i>                        |                   | OTC                 |
| <b>*Vitamin C***</b>  |                   |                     |
| <b>ACEROLA C 500 ORAL WAFER 500 MG</b>                          |                   | OTC                 |
| <i>acerola c-500 oral tablet chewable 500 mg</i>                | Sunkist Vitamin C | OTC                 |
| <i>ascorbic acid oral tablet 1000 mg, 250 mg</i>                |                   | OTC                 |
| <i>ascorbic acid oral tablet 500 mg</i>                         | PureWay-C         | OTC                 |
| <i>ascorbic acid oral tablet chewable 250 mg</i>                |                   | OTC                 |
| <i>asco-tabs-1000 oral tablet 1000 mg</i>                       |                   | OTC                 |
| <i>c 1000 oral tablet 1000 mg</i>                               |                   | OTC                 |
| <i>c 250 oral tablet 250 mg</i>                                 |                   | OTC                 |
| <i>c 250 oral tablet chewable 250 mg</i>                        |                   | OTC                 |
| <i>c 500 oral tablet 500 mg</i>                                 | PureWay-C         | OTC                 |
| <i>c 500 oral tablet chewable 500 mg</i>                        | Sunkist Vitamin C | OTC                 |
| <i>c 500/rose hips oral tablet 500 mg</i>                       | PureWay-C         | OTC                 |
| <i>c-1000 oral tablet 1000 mg</i>                               |                   | OTC                 |
| <i>c-1000 oral tablet extended release 1000 mg</i>              | Endur-C           | OTC                 |
| <i>c-1000 sr oral tablet extended release 1000 mg</i>           | Endur-C           | OTC                 |
| <i>c-1000/rose hips oral tablet 1000 mg</i>                     |                   | OTC                 |
| <i>c-1000/rose hips sr oral tablet extended release 1000 mg</i> | Endur-C           | OTC                 |
| <i>c-1500/rose hips sr oral tablet extended release 1500 mg</i> |                   | OTC                 |
| <i>c-250 oral tablet 250 mg</i>                                 |                   | OTC                 |

| <b>Formulary Drug Name</b>                                  | <b>Reference</b>        | <b>Restrictions</b> |
|---|-------------------------|---------------------|
| <i>c-250 oral tablet chewable 250 mg</i>                    |                         | OTC                 |
| <i>c-500 oral tablet 500 mg</i>                             | PureWay-C               | OTC                 |
| <i>c-500 oral tablet chewable 500 mg</i>                    | Sunkist Vitamin C       | OTC                 |
| <i>c-500 oral tablet extended release 500 mg</i>            | Endur-C                 | OTC                 |
| <i>c-500 sr oral capsule extended release 500 mg</i>        |                         | OTC                 |
| <i>c-500 sr oral tablet extended release 500 mg</i>         | Endur-C                 | OTC                 |
| <i>c-500/rose hips oral tablet 500 mg</i>                   | PureWay-C               | OTC                 |
| <i>c-chewable oral tablet chewable 500 mg</i>               | Sunkist Vitamin C       | OTC                 |
| <i>cemill oral tablet extended release 500 mg</i>           | Endur-C                 | OTC                 |
| <i>cemill sr oral tablet extended release 1000 mg</i>       | Endur-C                 | OTC                 |
| <i>chew-c oral tablet chewable 500 mg</i>                   | Sunkist Vitamin C       | OTC                 |
| <i>crush vitamin c drops mouth/throat lozenge 60 mg</i>     | Crush Vitamin C Drops   | OTC                 |
| <i>c-time oral capsule extended release 500 mg</i>          |                         | OTC                 |
| <i>cvs vitamin c oral tablet 1000 mg, 250 mg</i>            |                         | OTC                 |
| <i>cvs vitamin c oral tablet 500 mg</i>                     | PureWay-C               | OTC                 |
| <i>cvs vitamin c-rose hips oral tablet 1000 mg</i>          |                         | OTC                 |
| <i>cvs vitamin c-rose hips oral tablet 500 mg</i>           | PureWay-C               | OTC                 |
| <i>eql vitamin c gummies oral tablet chewable 125 mg</i>    | VitaJoy Daily C Gummies | OTC                 |
| <i>eql vitamin c oral tablet 1000 mg</i>                    |                         | OTC                 |
| <i>eql vitamin c oral tablet 500 mg</i>                     | PureWay-C               | OTC                 |
| <i>eql vitamin c/rose hips oral tablet 1000 mg</i>          |                         | OTC                 |
| <i>eql vitamin c/rose hips oral tablet 500 mg</i>           | PureWay-C               | OTC                 |
| <i>fruit c 500 oral tablet chewable 500 mg</i>              | Sunkist Vitamin C       | OTC                 |
| <i>fruit c oral tablet chewable 100 mg</i>                  |                         | OTC                 |
| <i>fruity c oral tablet chewable 250 mg</i>                 |                         | OTC                 |
| <i>gnp vitamin c cr oral tablet extended release 500 mg</i> | Endur-C                 | OTC                 |
| <i>gnp vitamin c drops mouth/throat lozenge 60 mg</i>       | Crush Vitamin C Drops   | OTC                 |
| <i>gnp vitamin c oral tablet 1000 mg, 250 mg</i>            |                         | OTC                 |
| <i>gnp vitamin c oral tablet 500 mg</i>                     | PureWay-C               | OTC                 |
| <i>gnp vitamin c oral tablet chewable 500 mg</i>            | Sunkist Vitamin C       | OTC                 |
| <i>gnp vitamin c oral tablet extended release 500 mg</i>    | Endur-C                 | OTC                 |
| <i>gnp vitamin c w/rose hips oral tablet 500-37 mg</i>      | PureWay-C               | OTC                 |
| <i>gnp vitamin c/rose hips oral tablet 1000 mg</i>          |                         | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b>      | <b>Restrictions</b> |
|---|-----------------------|---------------------|
| <i>gnp vitamin c/rose hips tr oral tablet extended release 1000 mg</i>        | Endur-C               | OTC                 |
| <i>halls defense vitamin c drops mouth/throat lozenge 60 mg</i>               | Crush Vitamin C Drops | OTC                 |
| <i>hm vitamin c oral tablet 1000 mg</i>                                       |                       | OTC                 |
| <i>hm vitamin c oral tablet chewable 500 mg</i>                               | Sunkist Vitamin C     | OTC                 |
| <i>hm vitamin c tr oral tablet extended release 500 mg</i>                    | Endur-C               | OTC                 |
| <i>hm vitamin c/rose hips oral tablet 1000 mg</i>                             |                       | OTC                 |
| <i>meijer c oral tablet 500 mg</i>  | PureWay-C             | OTC                 |
| <i>natural c/rose hips oral tablet 1000 mg</i>                                |                       | OTC                 |
| <i>natural c/rose hips oral tablet 500 mg</i>                                 | PureWay-C             | OTC                 |
| <i>pure c 500 oral capsule extended release 500 mg</i>                        |                       | OTC                 |
| <b>PUREWAY-C ORAL TABLET 500 MG</b>   | ascorbic acid         | OTC                 |
| <i>px vitamin c oral tablet 500 mg</i>  | PureWay-C             | OTC                 |
| <i>ra vitamin c cr oral tablet extended release 500 mg</i>                    | Endur-C               | OTC                 |
| <i>ra vitamin c drops mouth/throat lozenge 60 mg</i>                          | Crush Vitamin C Drops | OTC                 |
| <i>ra vitamin c oral tablet 250 mg</i>  |                       | OTC                 |
| <i>ra vitamin c oral tablet 500 mg</i>  | PureWay-C             | OTC                 |
| <i>ra vitamin c oral tablet chewable 250 mg</i>                               |                       | OTC                 |
| <i>ra vitamin c oral tablet chewable 500 mg</i>                               | Sunkist Vitamin C     | OTC                 |
| <i>ra vitamin c/acerola oral tablet chewable 500 mg</i>                       | Sunkist Vitamin C     | OTC                 |
| <i>ra vitamin c/rose hips cr oral tablet extended release 1000 mg, 500 mg</i> | Endur-C               | OTC                 |
| <i>ra vitamin c/rose hips oral tablet 1000 mg</i>                             |                       | OTC                 |
| <i>ra vitamin c/rose hips oral tablet 500 mg</i>                              | PureWay-C             | OTC                 |
| <i>sb vitamin c oral tablet 500 mg</i>  | PureWay-C             | OTC                 |
| <i>sm chewable c oral tablet chewable 500 mg</i>                              | Sunkist Vitamin C     | OTC                 |
| <i>sm chewable vitamin c oral tablet chewable 500 mg</i>                      | Sunkist Vitamin C     | OTC                 |
| <i>sm vit c/rose hips oral tablet 1000 mg</i>                                 |                       | OTC                 |
| <i>sm vitamin c cr oral tablet extended release 500 mg</i>                    | Endur-C               | OTC                 |
| <i>sm vitamin c oral tablet 1000 mg, 250 mg</i>                               |                       | OTC                 |
| <i>sm vitamin c oral tablet 500 mg</i>  | PureWay-C             | OTC                 |
| <i>sm vitamin c oral tablet chewable 500 mg</i>                               | Sunkist Vitamin C     | OTC                 |
| <i>sm vitamin c/rose hips oral tablet 500 mg</i>                              | PureWay-C             | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>        | <b>Restrictions</b> |
|--|-------------------------|---------------------|
| <i>sunkist vitamin c oral tablet chewable 500 mg</i>                       | Sunkist Vitamin C       | OTC                 |
| <i>tgt vitamin c drops mouth/throat lozenge 60 mg</i>                      | Crush Vitamin C Drops   | OTC                 |
| <i>vitachew vit c citrus burst oral tablet chewable 125 mg</i>             | VitaJoy Daily C Gummies | OTC                 |
| <i>vitamin c adult gummies oral tablet chewable 125 mg</i>                 | VitaJoy Daily C Gummies | OTC                 |
| <i>vitamin c drops mouth/throat lozenge 60 mg</i>                          | Crush Vitamin C Drops   | OTC                 |
| <i>vitamin c er oral capsule extended release 500 mg</i>                   |                         | OTC                 |
| <i>vitamin c er oral tablet extended release 1000 mg, 500 mg</i>           | Endur-C                 | OTC                 |
| <i>vitamin c er oral tablet extended release 1500 mg</i>                   |                         | OTC                 |
| <i>vitamin c gummies oral tablet chewable 125 mg</i>                       | VitaJoy Daily C Gummies | OTC                 |
| <i>vitamin c immune health oral tablet chewable 500 mg</i>                 | Sunkist Vitamin C       | OTC                 |
| <i>vitamin c oral tablet 100 mg, 1000 mg, 250 mg</i>                       |                         | OTC                 |
| <i>vitamin c oral tablet 500 mg</i>  | PureWay-C               | OTC                 |
| <i>vitamin c oral tablet chewable 100 mg, 250 mg</i>                       |                         | OTC                 |
| <i>vitamin c oral tablet chewable 500 mg</i>                               | Sunkist Vitamin C       | OTC                 |
| <i>vitamin c plus wild rose hips oral tablet chewable 500 mg</i>           | Sunkist Vitamin C       | OTC                 |
| <i>vitamin c/rose hips oral tablet 500 mg</i>                              | PureWay-C               | OTC                 |
| <i>vitamin c/rose hips tr oral tablet extended release 1000 mg</i>         | Endur-C                 | OTC                 |
| <i>vitamin c-acerola oral tablet chewable 500 mg</i>                       | Sunkist Vitamin C       | OTC                 |
| <i>vitamin c-rose hips er oral tablet extended release 1000 mg, 500 mg</i> | Endur-C                 | OTC                 |
| <i>vitamin c-rose hips er oral tablet extended release 1500 mg</i>         |                         | OTC                 |
| <i>vitamin c-rose hips oral tablet 1000 mg</i>                             |                         | OTC                 |
| <i>vitamin c-rose hips oral tablet 500 mg</i>                              | PureWay-C               | OTC                 |
| <i>vitamin c-rose hips oral tablet chewable 500 mg</i>                     | Sunkist Vitamin C       | OTC                 |
| <i>vitamin c-rose hips tr oral tablet extended release 500 mg</i>          | Endur-C                 | OTC                 |
| <i>yl vitamin c oral tablet 1000 mg</i>                                    |                         | OTC                 |
| <i>yl vitamin c oral tablet 500 mg</i>                                     | PureWay-C               | OTC                 |
| <i>yl vitamin c-rose hips oral tablet 1000 mg</i>                          |                         | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>             | <b>Restrictions</b> |
|--|------------------------------|---------------------|
| <i>yl vitamin c-rose hips oral tablet 500 mg</i>                         | PureWay-C                    | OTC                 |
| <b>*Vitamin D***</b>   |                              |                     |
| <b>BABY DDROPS ORAL LIQUID 400 UNT/0.03ML</b>                            |                              | OTC                 |
| <b>BABY SUPER DAILY D3 ORAL LIQUID 400 UT/0.028ML</b>                    |                              | OTC                 |
| <b>BABY VITAMIN D3 ORAL LIQUID 400 UT/0.028ML</b>                        |                              | OTC                 |
| <i>calcidol oral solution 8000 unit/ml</i>                               | Calcidol                     | OTC                 |
| <i>calciferol oral solution 8000 unit/ml</i>                             | Calcidol                     | OTC                 |
| <i>cvs d3 oral capsule 10 mcg (400 unit), 50 mcg (2000 ut)</i>           |                              | OTC                 |
| <i>cvs d3 oral capsule 125 mcg (5000 ut)</i>                             | Dialyvite Vitamin D 5000     | OTC                 |
| <i>cvs d3 oral capsule 25 mcg (1000 ut)</i>                              | Pronutrients Vitamin D3      | OTC                 |
| <i>cvs d3 oral tablet chewable 25 mcg (1000 ut)</i>                      | VitaJoy Daily D Gummies      | OTC                 |
| <i>cvs vitamin d child gummies oral tablet chewable 25 mcg (1000 ut)</i> | VitaJoy Daily D Gummies      | OTC                 |
| <b>CVS VITAMIN D3 DROPS/INFANT ORAL LIQUID 400 UT/0.028ML</b>            |                              | OTC                 |
| <i>cvs vitamin d3 oral tablet chewable 25 mcg (1000 ut)</i>              | VitaJoy Daily D Gummies      | OTC                 |
| <i>d 1000 oral capsule 25 mcg (1000 ut)</i>                              | Pronutrients Vitamin D3      | OTC                 |
| <i>d 1000 oral tablet 25 mcg (1000 ut)</i>                               | Vitamin D-1000 Max St        | OTC                 |
| <i>d 1000 oral tablet chewable 25 mcg (1000 ut)</i>                      | VitaJoy Daily D Gummies      | OTC                 |
| <i>d 10000 oral capsule 250 mcg (10000 ut)</i>                           | IS-D 10,000                  | OTC                 |
| <i>d 2000 oral tablet 50 mcg (2000 ut)</i>                               | Thera-D 2000                 | OTC                 |
| <i>d 400 oral tablet 10 mcg (400 unit)</i>                               |                              | OTC                 |
| <i>d 400 oral tablet chewable 10 mcg (400 unit)</i>                      | Healthy Kids Vitamin D3      | OTC                 |
| <i>d 5000 oral capsule 125 mcg (5000 ut)</i>                             | Dialyvite Vitamin D 5000     | OTC                 |
| <i>d 5000 oral tablet 125 mcg (5000 ut)</i>                              | Radiance Platinum Vitamin D3 | OTC                 |
| <i>d-1000 extra strength oral tablet 25 mcg (1000 ut)</i>                | Vitamin D-1000 Max St        | OTC                 |
| <i>d-1000 oral tablet 25 mcg (1000 ut)</i>                               | Vitamin D-1000 Max St        | OTC                 |
| <i>d-2000 maximum strength oral tablet 50 mcg (2000 ut)</i>              | Thera-D 2000                 | OTC                 |
| <i>d2000 ultra strength oral capsule 50 mcg (2000 ut)</i>                |                              | OTC                 |
| <i>d3 adult oral tablet chewable 25 mcg (1000 ut)</i>                    | VitaJoy Daily D Gummies      | OTC                 |
| <i>d3 high potency oral capsule 25 mcg (1000 ut)</i>                     | Pronutrients Vitamin D3      | OTC                 |
| <i>d3 high potency oral capsule 50 mcg (2000 ut)</i>                     |                              | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>             | <b>Restrictions</b> |
|--|------------------------------|---------------------|
| <i>d3 high potency oral tablet 10 mcg (400 unit)</i>                   |                              | OTC                 |
| <i>d3 kids oral tablet chewable 10 mcg (400 unit)</i>                  | Healthy Kids Vitamin D3      | OTC                 |
| <i>d3 maximum strength oral capsule 125 mcg (5000 ut)</i>              | Dialyvite Vitamin D 5000     | OTC                 |
| <i>d3 maximum strength oral liquid 5000 unit/ml</i>                    |                              | OTC                 |
| <i>d3 super strength oral capsule 50 mcg (2000 ut)</i>                 |                              | OTC                 |
| <i>d3-1000 oral capsule 25 mcg (1000 ut)</i>                           | Pronutrients Vitamin D3      | OTC                 |
| <i>d3-1000 oral tablet 25 mcg (1000 ut)</i>                            | Vitamin D-1000 Max St        | OTC                 |
| <i>d-3-5 oral capsule 125 mcg (5000 ut)</i>                            | Dialyvite Vitamin D 5000     | OTC                 |
| <b>D3-50 ORAL CAPSULE 1.25 MG (50000 UT)</b>                           | vitamin d3                   | OTC                 |
| <i>d-400 oral tablet 10 mcg (400 unit)</i>                             |                              | OTC                 |
| <i>d-5000 oral tablet 125 mcg (5000 ut)</i>                            | Radiance Platinum Vitamin D3 | OTC                 |
| <b>DDROPS ORAL LIQUID 1000 UNT/0.03ML</b>                              |                              | OTC                 |
| <b>DDROPS ORAL LIQUID 1000 UT/0.028ML, 2000 UT/0.028ML</b>             | super daily d3               | OTC                 |
| <b>DECARA ORAL CAPSULE 1.25 MG (50000 UT)</b>                          | vitamin d3                   | OTC                 |
| <b>DECARA ORAL CAPSULE 625 MCG (25000 UT)</b>                          |                              | OTC                 |
| <i>delta d3 oral tablet 10 mcg (400 unit)</i>                          |                              | OTC                 |
| <i>dialyvite vitamin d 5000 oral capsule 125 mcg (5000 ut)</i>         | Dialyvite Vitamin D 5000     | OTC                 |
| <i>dialyvite vitamin d3 max oral tablet 1.25 mg (50000 ut)</i>         | Dialyvite Vitamin D3 Max     | OTC                 |
| <i>eql vitamin d3 gummies oral tablet chewable 25 mcg (1000 ut)</i>    | VitaJoy Daily D Gummies      | OTC                 |
| <i>eql vitamin d3 oral capsule 10 mcg (400 unit), 50 mcg (2000 ut)</i> |                              | OTC                 |
| <i>eql vitamin d3 oral capsule 125 mcg (5000 ut)</i>                   | Dialyvite Vitamin D 5000     | OTC                 |
| <i>eql vitamin d3 oral capsule 25 mcg (1000 ut)</i>                    | Pronutrients Vitamin D3      | OTC                 |
| <i>ergocalciferol oral solution 8000 unit/ml</i>                       | Calcidol                     | OTC                 |
| <i>gnp d 1000 oral capsule 25 mcg (1000 ut)</i>                        | Pronutrients Vitamin D3      | OTC                 |
| <i>gnp d 2000 oral tablet chewable 25 mcg (1000 ut)</i>                | VitaJoy Daily D Gummies      | OTC                 |
| <i>gnp vitamin d maximum strength oral tablet 50 mcg (2000 ut)</i>     | Thera-D 2000                 | OTC                 |
| <i>gnp vitamin d oral tablet 25 mcg (1000 ut)</i>                      | Vitamin D-1000 Max St        | OTC                 |
| <i>gnp vitamin d oral tablet chewable 10 mcg (400 unit)</i>            | Healthy Kids Vitamin D3      | OTC                 |



| <b>Formulary Drug Name</b>  | <b>Reference</b>             | <b>Restrictions</b> |
|---|------------------------------|---------------------|
| <i>gnp vitamin d super strength oral tablet 125 mcg (5000 ut)</i>     | Radiance Platinum Vitamin D3 | OTC                 |
| <i>gnp vitamin d3 extra strength oral tablet 25 mcg (1000 ut)</i>     | Vitamin D-1000 Max St        | OTC                 |
| <i>healthy kids vitamin d3 oral tablet chewable 10 mcg (400 unit)</i> | Healthy Kids Vitamin D3      | OTC                 |
| <i>hm vitamin d oral tablet 10 mcg (400 unit)</i>                     |                              | OTC                 |
| <i>hm vitamin d oral tablet 25 mcg (1000 ut)</i>                      | Vitamin D-1000 Max St        | OTC                 |
| <b>HM VITAMIN D3 ORAL CAPSULE 100 MCG (4000 UT)</b>                   |                              | OTC                 |
| <i>hm vitamin d3 oral capsule 50 mcg (2000 ut)</i>                    |                              | OTC                 |
| <i>kp vitamin d oral capsule 25 mcg (1000 ut)</i>                     | Pronutrients Vitamin D3      | OTC                 |
| <i>kp vitamin d oral tablet chewable 10 mcg (400 unit)</i>            | Healthy Kids Vitamin D3      | OTC                 |
| <i>kp vitamin d3 oral capsule 25 mcg (1000 ut)</i>                    | Pronutrients Vitamin D3      | OTC                 |
| <i>kp vitamin d3 oral capsule 50 mcg (2000 ut)</i>                    |                              | OTC                 |
| <i>nat-rul vitamin d oral tablet 125 mcg (5000 ut)</i>                | Radiance Platinum Vitamin D3 | OTC                 |
| <i>nat-rul vitamin d oral tablet 25 mcg (1000 ut)</i>                 | Vitamin D-1000 Max St        | OTC                 |
| <i>nat-rul vitamin d oral tablet 50 mcg (2000 ut)</i>                 | Thera-D 2000                 | OTC                 |
| <i>natural vitamin d-3 oral tablet 125 mcg (5000 ut)</i>              | Radiance Platinum Vitamin D3 | OTC                 |
| <b>OPTIMAL D3 M ORAL CAPSULE 350 MCG (14000 UT)</b>                   |                              | OTC                 |
| <b>OPTIMAL D3 ORAL CAPSULE 1.25 MG (50000 UT)</b>                     | vitamin d3                   | OTC                 |
| <i>pa vitamin d-3 gummy oral tablet chewable 10 mcg (400 unit)</i>    | Healthy Kids Vitamin D3      | OTC                 |
| <i>pa vitamin d-3 oral capsule 125 mcg (5000 ut)</i>                  | Dialyvite Vitamin D 5000     | OTC                 |
| <i>pa vitamin d-3 oral capsule 50 mcg (2000 ut)</i>                   |                              | OTC                 |
| <i>pa vitamin d-3 oral tablet 25 mcg (1000 ut)</i>                    | Vitamin D-1000 Max St        | OTC                 |
| <i>pronutrients vitamin d3 oral capsule 25 mcg (1000 ut)</i>          | Pronutrients Vitamin D3      | OTC                 |
| <i>ra vitamin d-3 oral capsule 125 mcg (5000 ut)</i>                  | Dialyvite Vitamin D 5000     | OTC                 |
| <i>ra vitamin d-3 oral capsule 50 mcg (2000 ut)</i>                   |                              | OTC                 |
| <i>ra vitamin d-3 oral tablet 25 mcg (1000 ut)</i>                    | Vitamin D-1000 Max St        | OTC                 |
| <b>REPLESTA CHILDRENS ORAL WAFER 350 MCG (14000 UT)</b>               |                              | OTC                 |
| <b>REPLESTA NX ORAL WAFER 350 MCG (14000 UT)</b>                      |                              | OTC                 |
| <b>REPLESTA ORAL WAFER 1.25 MG (50000 UT)</b>                         |                              | OTC                 |

| <b>Formulary Drug Name</b>  | <b>Reference</b>         | <b>Restrictions</b> |
|---|--------------------------|---------------------|
| <i>sm vitamin d oral tablet 10 mcg (400 unit)</i>                         |                          | OTC                 |
| <b>SM VITAMIN D3 ORAL CAPSULE 100 MCG (4000 UT)</b>                       |                          | OTC                 |
| <i>sm vitamin d3 oral capsule 50 mcg (2000 ut)</i>                        |                          | OTC                 |
| <i>sm vitamin d3 oral tablet 25 mcg (1000 ut)</i>                         | Vitamin D-1000 Max St    | OTC                 |
| <b>SUPER DAILY D3 ORAL LIQUID 1000 UNT/0.03ML</b>                         |                          | OTC                 |
| <b>SUPER DAILY D3 ORAL LIQUID 2000 UT/0.028ML</b>                         | super daily d3           | OTC                 |
| <i>thera-d 2000 oral tablet 50 mcg (2000 ut)</i>                          | Thera-D 2000             | OTC                 |
| <b>THERA-D 4000 ORAL TABLET 100 MCG (4000 UT)</b>                         |                          | OTC                 |
| <i>thera-d rapid repletion oral tablet 50 mcg (2000 ut)</i>               | Thera-D 2000             | OTC                 |
| <i>vitajoy daily d gummies oral tablet chewable 25 mcg (1000 ut)</i>      | VitaJoy Daily D Gummies  | OTC                 |
| <i>vitamin d (cholecalciferol) oral capsule 10 mcg (400 unit)</i>         |                          | OTC                 |
| <i>vitamin d (cholecalciferol) oral capsule 25 mcg (1000 ut)</i>          | Pronutrients Vitamin D3  | OTC                 |
| <i>vitamin d (cholecalciferol) oral tablet 10 mcg (400 unit)</i>          |                          | OTC                 |
| <i>vitamin d (cholecalciferol) oral tablet 25 mcg (1000 ut)</i>           | Vitamin D-1000 Max St    | OTC                 |
| <i>vitamin d (cholecalciferol) oral tablet chewable 10 mcg (400 unit)</i> | Healthy Kids Vitamin D3  | OTC                 |
| <i>vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut)</i>         | Drisdol                  |                     |
| <i>vitamin d high potency oral capsule 25 mcg (1000 ut)</i>               | Pronutrients Vitamin D3  | OTC                 |
| <i>vitamin d oral capsule 50 mcg (2000 ut)</i>                            |                          | OTC                 |
| <i>vitamin d oral tablet 1000 unit</i>                                    | Vitamin D-1000 Max St    | OTC                 |
| <i>vitamin d oral tablet 50 mcg (2000 ut)</i>                             | Thera-D 2000             | OTC                 |
| <i>vitamin d-1000 max st oral tablet 25 mcg (1000 ut)</i>                 | Vitamin D-1000 Max St    | OTC                 |
| <b>VITAMIN D2 ORAL TABLET 10 MCG (400 UNIT), 50 MCG (2000 UT)</b>         |                          | OTC                 |
| <i>vitamin d3 adult gummies oral tablet chewable 25 mcg (1000 ut)</i>     | VitaJoy Daily D Gummies  | OTC                 |
| <i>vitamin d3 maximum strength oral capsule 125 mcg (5000 ut)</i>         | Dialyvite Vitamin D 5000 | OTC                 |
| <i>vitamin d3 oral capsule 1.25 mg (50000 ut)</i>                         | D3-50                    | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>             | <b>Restrictions</b> |
|--|------------------------------|---------------------|
| <i>vitamin d3 oral capsule 10 mcg (400 unit), 50 mcg (2000 ut)</i>                         |                              | OTC                 |
| <i>vitamin d3 oral capsule 125 mcg (5000 ut)</i>   | Dialyvite Vitamin D 5000     | OTC                 |
| <i>vitamin d3 oral capsule 25 mcg (1000 ut)</i>  | Pronutrients Vitamin D3      | OTC                 |
| <i>vitamin d-3 oral capsule 25 mcg (1000 ut)</i>   | Pronutrients Vitamin D3      | OTC                 |
| <i>vitamin d3 oral capsule 250 mcg (10000 ut)</i>  | IS-D 10,000                  | OTC                 |
| <b>VITAMIN D3 ORAL LIQUID 1000 UNIT/SPRAY, 1200 UNIT/15ML</b>                              |                              | OTC                 |
| <i>vitamin d3 oral liquid 5000 unit/ml</i>   |                              | OTC                 |
| <i>vitamin d3 oral tablet 1.25 mg (50000 ut)</i>   | Dialyvite Vitamin D3 Max     | OTC                 |
| <i>vitamin d3 oral tablet 10 mcg (400 unit)</i>  |                              | OTC                 |
| <i>vitamin d3 oral tablet 125 mcg (5000 ut)</i>  | Radiance Platinum Vitamin D3 | OTC                 |
| <i>vitamin d-3 oral tablet 125 mcg (5000 ut)</i>   | Radiance Platinum Vitamin D3 | OTC                 |
| <i>vitamin d3 oral tablet 25 mcg (1000 ut)</i>   | Vitamin D-1000 Max St        | OTC                 |
| <b>VITAMIN D3 ORAL TABLET 250 MCG (10000 UT), 75 MCG (3000 UT)</b>                         |                              | OTC                 |
| <i>vitamin d3 oral tablet 50 mcg (2000 ut)</i>   | Thera-D 2000                 | OTC                 |
| <i>vitamin d3 oral tablet chewable 10 mcg (400 unit)</i>                                   | Healthy Kids Vitamin D3      | OTC                 |
| <i>vitamin d3 oral tablet chewable 25 mcg (1000 ut)</i>                                    | VitaJoy Daily D Gummies      | OTC                 |
| <i>vitamin d3 oral tablet chewable 50 mcg (2000 ut)</i>                                    |                              | OTC                 |
| <b>VITAMIN D3 ORAL TABLET DISPERSIBLE 125 MCG (5000 UT)</b>                                |                              | OTC                 |
| <i>vitamin d3 super strength oral tablet 50 mcg (2000 ut)</i>                              | Thera-D 2000                 | OTC                 |
| <i>vitamin d3 ultra potency oral tablet 1.25 mg (50000 ut)</i>                             | Dialyvite Vitamin D3 Max     | OTC                 |
| <i>vitamin d-400 oral tablet 10 mcg (400 unit)</i>   |                              | OTC                 |
| <b>*Vitamin E***</b>   |                              |                     |
| <i>alph-e oral capsule 400 unit</i>  |                              | OTC                 |
| <i>alph-e-mixed 1000 oral capsule 1000 unit</i>  |                              | OTC                 |
| <i>alph-e-mixed oral capsule 200 unit, 400 unit</i>  |                              | OTC                 |
| <i>cvs e oral capsule 200 unit, 90 mg (200 unit)</i>                                       |                              | OTC                 |
| <i>cvs vitamin e oral capsule 1000 unit, 180 mg (400 unit), 400 unit, 450 mg (1000 ut)</i> |                              | OTC                 |
| <i>e 1000 oral capsule 1000 unit</i>   |                              | OTC                 |
| <i>e1000 oral capsule 1000 unit</i>  |                              | OTC                 |
| <i>e-1000 oral capsule 1000 unit</i>   |                              | OTC                 |

| <b>Formulary Drug Name</b>   | <b>Reference</b>  | <b>Restrictions</b> |
|--|-------------------|---------------------|
| <i>e200 oral capsule 200 unit</i>  |                   | OTC                 |
| <i>e-200 oral capsule 200 unit</i>   |                   | OTC                 |
| <i>e400 mixed oral capsule 400 unit</i>  |                   | OTC                 |
| <i>e400 oral capsule 400 unit</i>  |                   | OTC                 |
| <i>e-400 oral capsule 400 unit</i>   |                   | OTC                 |
| <i>e-400-clear oral capsule 400 unit</i>   |                   | OTC                 |
| <i>e-400-mixed oral capsule 400 unit</i>   |                   | OTC                 |
| <i>e-max-1000 oral capsule 1000 unit</i>   |                   | OTC                 |
| <i>e-oil oral oil 100 unt/0.25ml</i>   |                   | OTC                 |
| <i>eql vitamin e oral capsule 1000 unit, 400 unit</i>  |                   | OTC                 |
| <i>ester-e oral capsule 400 unit</i>   |                   | OTC                 |
| <i>formula e 400 oral capsule 400 unit</i>   |                   | OTC                 |
| <i>gnp vitamin e oral capsule 1000 unit, 180 mg (400 unit), 200 unit, 400 unit, 450 mg (1000 ut), 90 mg (200 unit)</i> |                   | OTC                 |
| <i>hm e vitamin oral capsule 180 mg (400 unit)</i>   |                   | OTC                 |
| <i>hm vitamin e oral capsule 1000 unit, 200 unit, 400 unit</i>   |                   | OTC                 |
| <i>kp vitamin e oral capsule 100 unit</i>  |                   | OTC                 |
| <i>natural vitamin e oral capsule 100 unit, 1000 unit, 400 unit</i>  |                   | OTC                 |
| <i>pa vitamin e oral capsule 400 unit</i>  |                   | OTC                 |
| <i>px vitamin e oral capsule 400 unit</i>  |                   | OTC                 |
| <i>qc vitamin e oral capsule 180 mg (400 unit)</i>   |                   | OTC                 |
| <i>ra natural vitamin e oral capsule 400 unit</i>  |                   | OTC                 |
| <i>ra vitamin e blend oral capsule 400 unit</i>  |                   | OTC                 |
| <i>ra vitamin e natural oral capsule 1000 unit</i>   |                   | OTC                 |
| <i>ra vitamin e oral capsule 1000 unit, 200 unit, 400 unit</i>   |                   | OTC                 |
| <i>sm vitamin e oral capsule 1000 unit, 180 mg (400 unit), 200 unit, 400 unit, 450 mg (1000 ut), 90 mg (200 unit)</i>  |                   | OTC                 |
| <b>SOLUVITA E ORAL SOLUTION 15.8 MG/0.7ML</b>  | aqueous vitamin e | OTC                 |
| <i>vitamin e blend oral capsule 200 unit, 400 unit</i>   |                   | OTC                 |
| <i>vitamin e complex oral capsule 1000 unit, 400 unit</i>  |                   | OTC                 |
| <i>vitamin e oral capsule 100 unit, 1000 unit, 200 unit, 400 unit, 450 mg</i>  |                   | OTC                 |
| <i>vitamin e water soluble oral capsule 1000 unit, 400 unit</i>  |                   | OTC                 |

| <b>Formulary Drug Name</b>                                       | <b>Reference</b> | <b>Restrictions</b> |
|--|------------------|---------------------|
| <i>vitamin e/d-alpha natural oral capsule 200 unit, 400 unit</i> |                  | OTC                 |
| <i>vitamin e/d-alpha oral capsule 200 unit</i>                   |                  | OTC                 |
| <i>vitamin e-200 oral capsule 200 unit</i>                       |                  | OTC                 |
| <i>vitamin e-400 oral capsule 400 unit</i>                       |                  | OTC                 |
| <i>yl vitamin e oral capsule 400 unit</i>                        |                  | OTC                 |
| <b>*Vitamin K***</b>   |                  |                     |
| <i>phytonadione oral tablet 5 mg</i>                             |                  |                     |

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