

00:00

Non-Classified Drugs

00:00 NON-CLASSIFIED DRUGS

00:00.02

(DIABETES SUPPLIES)**DIABETES SUPPLIES**

- 00000990072 BLOOD KETONE TEST STRIPS XXX \$ 0.0000
This product is a benefit for patients with diabetes when purchased from a licensed pharmacy.

Eligible individuals will have coverage for eligible diabetes supplies for each benefit year up to a maximum of:

- \$2,400 for patients with diabetes who are currently and regularly using insulin, OR
- \$320 for patients treated with diabetes medications with high risk of hypoglycemia, OR
- \$160 for patients treated with diabetes medications with low risk of hypoglycemia, OR
- \$160 for patients treated by diet and/or exercise.

- 00000999941 BLOOD LETTING LANCET XXX \$ 0.0000
This product is a benefit for patients with diabetes when purchased from a licensed pharmacy.

Eligible individuals will have coverage for eligible diabetes supplies for each benefit year up to a maximum of:

- \$2,400 for patients with diabetes who are currently and regularly using insulin, OR
- \$320 for patients treated with diabetes medications with high risk of hypoglycemia, OR
- \$160 for patients treated with diabetes medications with low risk of hypoglycemia, OR
- \$160 for patients treated by diet and/or exercise.

- 00000999985 INSULIN PEN NEEDLES XXX \$ 0.0000
This product is a benefit for patients with diabetes when purchased from a licensed pharmacy.

Eligible individuals will have coverage for eligible diabetes supplies for each benefit year up to a maximum of:

- \$2,400 for patients with diabetes who are currently and regularly using insulin, OR
- \$320 for patients treated with diabetes medications with high risk of hypoglycemia, OR
- \$160 for patients treated with diabetes medications with low risk of hypoglycemia, OR
- \$160 for patients treated by diet and/or exercise.

- 00000999952 INSULIN SYRINGES XXX \$ 0.0000
This product is a benefit for patients with diabetes when purchased from a licensed pharmacy.

Eligible individuals will have coverage for eligible diabetes supplies for each benefit year up to a maximum of:

- \$2,400 for patients with diabetes who are currently and regularly using insulin, OR
- \$320 for patients treated with diabetes medications with high risk of hypoglycemia, OR
- \$160 for patients treated with diabetes medications with low risk of hypoglycemia, OR
- \$160 for patients treated by diet and/or exercise.

- 00000999957 URINE KETONE TEST STRIPS XXX \$ 0.0000
This product is a benefit for patients with diabetes when purchased from a licensed pharmacy.

Eligible individuals will have coverage for eligible diabetes supplies for each benefit year up to a maximum of:

- \$2,400 for patients with diabetes who are currently and regularly using insulin, OR

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(DIABETES SUPPLIES)**DIABETES SUPPLIES**

-\$320 for patients treated with diabetes medications with high risk of hypoglycemia, OR
 -\$160 for patients treated with diabetes medications with low risk of hypoglycemia, OR
 -\$160 for patients treated by diet and/or exercise.

00000444992 CARESENS N MULTI TEST STRIPS SEN \$ 0.5000

This product is a benefit for patients with diabetes when purchased from a licensed pharmacy.

Eligible individuals will have coverage for eligible diabetes supplies for each benefit year up to a maximum of:

-\$2,400 for patients with diabetes who are currently and regularly using insulin, OR
 -\$320 for patients treated with diabetes medications with high risk of hypoglycemia, OR
 -\$160 for patients treated with diabetes medications with low risk of hypoglycemia, OR
 -\$160 for patients treated by diet and/or exercise.

00000444996 FIRST CANADIAN HEALTH SPIRIT TEST ARP \$ 0.5000
STRIPS

This product is a benefit for patients with diabetes when purchased from a licensed pharmacy.

Eligible individuals will have coverage for eligible diabetes supplies for each benefit year up to a maximum of:

-\$2,400 for patients with diabetes who are currently and regularly using insulin, OR
 -\$320 for patients treated with diabetes medications with high risk of hypoglycemia, OR
 -\$160 for patients treated with diabetes medications with low risk of hypoglycemia, OR
 -\$160 for patients treated by diet and/or exercise.

00000444982 GE200 TEST STRIPS BNE \$ 0.5100

This product is a benefit for patients with diabetes when purchased from a licensed pharmacy.

Eligible individuals will have coverage for eligible diabetes supplies for each benefit year up to a maximum of:

-\$2,400 for patients with diabetes who are currently and regularly using insulin, OR
 -\$320 for patients treated with diabetes medications with high risk of hypoglycemia, OR
 -\$160 for patients treated with diabetes medications with low risk of hypoglycemia, OR
 -\$160 for patients treated by diet and/or exercise.

This product is a benefit for patients with diabetes when purchased from a licensed pharmacy.

Eligible individuals will have coverage for eligible diabetes supplies for each benefit year up to a maximum of:

-\$2,400 for patients with diabetes who are currently and regularly using insulin, OR
 -\$320 for patients treated with diabetes medications with high risk of hypoglycemia, OR
 -\$160 for patients treated with diabetes medications with low risk of hypoglycemia, OR
 -\$160 for patients treated by diet and/or exercise.

00000444984 ACCU-CHEK GUIDE TEST STRIPS RDC \$ 0.6813

This product is a benefit for patients with diabetes when purchased from a licensed pharmacy.

The DBL is not a prescribing or a diagnostic tool. Prescribers should refer to drug monographs and utilize professional judgment.

00:00 NON-CLASSIFIED DRUGS

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(DIABETES SUPPLIES)**DIABETES SUPPLIES**

Eligible individuals will have coverage for eligible diabetes supplies for each benefit year up to a maximum of:

- \$2,400 for patients with diabetes who are currently and regularly using insulin, OR
- \$320 for patients treated with diabetes medications with high risk of hypoglycemia, OR
- \$160 for patients treated with diabetes medications with low risk of hypoglycemia, OR
- \$160 for patients treated by diet and/or exercise.

- 00000444988 FREESTYLE PRECISION TEST STRIPS ABD \$ 0.6890
This product is a benefit for patients with diabetes when purchased from a licensed pharmacy.

Eligible individuals will have coverage for eligible diabetes supplies for each benefit year up to a maximum of:

- \$2,400 for patients with diabetes who are currently and regularly using insulin, OR
- \$320 for patients treated with diabetes medications with high risk of hypoglycemia, OR
- \$160 for patients treated with diabetes medications with low risk of hypoglycemia, OR
- \$160 for patients treated by diet and/or exercise.

- 00000444987 FREESTYLE LITE TEST STRIPS ABD \$ 0.6900
This product is a benefit for patients with diabetes when purchased from a licensed pharmacy.

Eligible individuals will have coverage for eligible diabetes supplies for each benefit year up to a maximum of:

- \$2,400 for patients with diabetes who are currently and regularly using insulin, OR
- \$320 for patients treated with diabetes medications with high risk of hypoglycemia, OR
- \$160 for patients treated with diabetes medications with low risk of hypoglycemia, OR
- \$160 for patients treated by diet and/or exercise.

- 00000444994 ONE TOUCH ULTRA TEST STRIPS LIF \$ 0.6943
This product is a benefit for patients with diabetes when purchased from a licensed pharmacy.

Eligible individuals will have coverage for eligible diabetes supplies for each benefit year up to a maximum of:

- \$2,400 for patients with diabetes who are currently and regularly using insulin, OR
- \$320 for patients treated with diabetes medications with high risk of hypoglycemia, OR
- \$160 for patients treated with diabetes medications with low risk of hypoglycemia, OR
- \$160 for patients treated by diet and/or exercise.

- 00000444993 ONE TOUCH VERIO TEST STRIPS LIF \$ 0.6943
This product is a benefit for patients with diabetes when purchased from a licensed pharmacy.

Eligible individuals will have coverage for eligible diabetes supplies for each benefit year up to a maximum of:

- \$2,400 for patients with diabetes who are currently and regularly using insulin, OR
- \$320 for patients treated with diabetes medications with high risk of hypoglycemia, OR
- \$160 for patients treated with diabetes medications with low risk of hypoglycemia, OR
- \$160 for patients treated by diet and/or exercise.

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(DIABETES SUPPLIES)**DIABETES SUPPLIES**

- 00000444990 CONTOUR NEXT TEST STRIPS ADC \$ 0.6989
This product is a benefit for patients with diabetes when purchased from a licensed pharmacy.

Eligible individuals will have coverage for eligible diabetes supplies for each benefit year up to a maximum of:

- \$2,400 for patients with diabetes who are currently and regularly using insulin, OR
- \$320 for patients treated with diabetes medications with high risk of hypoglycemia, OR
- \$160 for patients treated with diabetes medications with low risk of hypoglycemia, OR
- \$160 for patients treated by diet and/or exercise.

- 00000444989 CONTOUR TEST STRIPS ADC \$ 0.6989
This product is a benefit for patients with diabetes when purchased from a licensed pharmacy.

Eligible individuals will have coverage for eligible diabetes supplies for each benefit year up to a maximum of:

- \$2,400 for patients with diabetes who are currently and regularly using insulin, OR
- \$320 for patients treated with diabetes medications with high risk of hypoglycemia, OR
- \$160 for patients treated with diabetes medications with low risk of hypoglycemia, OR
- \$160 for patients treated by diet and/or exercise.

- 00000444986 ACCU-CHEK AVIVA TEST STRIPS RDC \$ 0.7125
This product is a benefit for patients with diabetes when purchased from a licensed pharmacy.

Eligible individuals will have coverage for eligible diabetes supplies for each benefit year up to a maximum of:

- \$2,400 for patients with diabetes who are currently and regularly using insulin, OR
- \$320 for patients treated with diabetes medications with high risk of hypoglycemia, OR
- \$160 for patients treated with diabetes medications with low risk of hypoglycemia, OR
- \$160 for patients treated by diet and/or exercise.

- 00000444985 ACCU-CHEK COMPACT TEST STRIPS RDC \$ 0.7125
This product is a benefit for patients with diabetes when purchased from a licensed pharmacy.

Eligible individuals will have coverage for eligible diabetes supplies for each benefit year up to a maximum of:

- \$2,400 for patients with diabetes who are currently and regularly using insulin, OR
- \$320 for patients treated with diabetes medications with high risk of hypoglycemia, OR
- \$160 for patients treated with diabetes medications with low risk of hypoglycemia, OR
- \$160 for patients treated by diet and/or exercise.

- 00000444983 ACCU-CHEK MOBILE TEST STRIPS RDC \$ 0.7125
This product is a benefit for patients with diabetes when purchased from a licensed pharmacy.

Eligible individuals will have coverage for eligible diabetes supplies for each benefit year up to a maximum of:

- \$2,400 for patients with diabetes who are currently and regularly using insulin, OR

The DBL is not a prescribing or a diagnostic tool. Prescribers should refer to drug monographs and utilize professional judgment.

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(DIABETES SUPPLIES)

DIABETES SUPPLIES

- \$320 for patients treated with diabetes medications with high risk of hypoglycemia, OR
- \$160 for patients treated with diabetes medications with low risk of hypoglycemia, OR
- \$160 for patients treated by diet and/or exercise.

00000445003 TYKESS TEST STRIPS TTC \$ 0.9998

This product is a benefit for patients with diabetes when purchased from a licensed pharmacy.

Eligible individuals will have coverage for eligible diabetes supplies for each benefit year up to a maximum of:

- \$2,400 for patients with diabetes who are currently and regularly using insulin, OR
- \$320 for patients treated with diabetes medications with high risk of hypoglycemia, OR
- \$160 for patients treated with diabetes medications with low risk of hypoglycemia, OR
- \$160 for patients treated by diet and/or exercise.

00:00 NON-CLASSIFIED DRUGS

00:00.02

(DIABETES SUPPLIES)**GLUCOSE MONITORING TRANSMITTER**

00000999708 DEXCOM G6 TRANSMITTER COM \$ 29.0000

This product is a benefit for patients under the age of 18 with diabetes that require ongoing use of insulin or insulin pump therapy when prescribed by a Specialist in Endocrinology or Pediatrics*.

*A Specialist in Endocrinology or Pediatrics will need to evaluate the need to prescribe a continuous glucose monitor for the patient after a consideration of the clinical criteria that necessitate (or contraindicate) the use of continuous glucose monitors for patients.

Coverage will not be provided for the following:

- Requests made due to lifestyle choices (e.g. sports, personal preference, etc.);
- Components or devices that are not primarily part of the continuous glucose monitor composite device (e.g. batteries, insertion devices, adhesive removers, or other supplies).

Eligible individuals will have coverage for up to a maximum of 4 transmitters and 39 sensors for each benefit year.

00000999722 GUARDIAN CONNECT TRANSMITTER MET \$ 599.0000

"This product is a benefit for patients under the age of 18 with diabetes that require ongoing use of insulin or insulin pump therapy when prescribed by a Specialist in Endocrinology or Pediatrics*.

*A Specialist in Endocrinology or Pediatrics will need to evaluate the need to prescribe a continuous glucose monitor for the patient after a consideration of the clinical criteria that necessitate (or contraindicate) the use of continuous glucose monitors for patients.

Coverage will not be provided for the following:

- Requests made due to lifestyle choices (e.g. sports, personal preference, etc.);
- Components or devices that are not primarily part of the continuous glucose monitor composite device (e.g. batteries, insertion devices, adhesive removers, or other supplies).

Eligible individuals will have coverage for up to a maximum of 1 transmitter and 52 sensors for each benefit year."

00000999710 GUARDIAN LINK TRANSMITTER (670G PUMP) MET \$ 800.0000

This product is a benefit for patients under the age of 18 with diabetes that require ongoing use of insulin or insulin pump therapy when prescribed by a Specialist in Endocrinology or Pediatrics*.

*A Specialist in Endocrinology or Pediatrics will need to evaluate the need to prescribe a continuous glucose monitor for the patient after a consideration of the clinical criteria that necessitate (or contraindicate) the use of continuous glucose monitors for patients.

Coverage will not be provided for the following:

- Requests made due to lifestyle choices (e.g. sports, personal preference, etc.);
- Components or devices that are not primarily part of the continuous glucose monitor composite device (e.g. batteries, insertion devices, adhesive removers, or other supplies).

Eligible individuals will have coverage for up to a maximum of 1 transmitter and 55 sensors for each benefit year.

00:00 NON-CLASSIFIED DRUGS

00:00.02

(DIABETES SUPPLIES)

GLUCOSE MONITORING TRANSMITTER

00000999711 GUARDIAN LINK TRANSMITTER (770G AND MET 780G PUMP) \$ 800.0000

This product is a benefit for patients under the age of 18 with diabetes that require ongoing use of insulin or insulin pump therapy when prescribed by a Specialist in Endocrinology or Pediatrics*.

*A Specialist in Endocrinology or Pediatrics will need to evaluate the need to prescribe a continuous glucose monitor for the patient after a consideration of the clinical criteria that necessitate (or contraindicate) the use of continuous glucose monitors for patients.

Coverage will not be provided for the following:

- Requests made due to lifestyle choices (e.g. sports, personal preference, etc.);
- Components or devices that are not primarily part of the continuous glucose monitor composite device (e.g. batteries, insertion devices, adhesive removers, or other supplies).

Eligible individuals will have coverage for up to a maximum of 1 transmitter and 55 sensors for each benefit year.

00:00 NON-CLASSIFIED DRUGS

00:00.02

(DIABETES SUPPLIES)**GLUCOSE MONITORING TRANSMITTER SENSOR**

00000999712 GUARDIAN SENSOR MET \$ 79.8000

This product is a benefit for patients under the age of 18 with diabetes that require ongoing use of insulin or insulin pump therapy when prescribed by a Specialist in Endocrinology or Pediatrics*.

*A Specialist in Endocrinology or Pediatrics will need to evaluate the need to prescribe a continuous glucose monitor for the patient after a consideration of the clinical criteria that necessitate (or contraindicate) the use of continuous glucose monitors for patients.

Coverage will not be provided for the following:

- Requests made due to lifestyle choices (e.g. sports, personal preference, etc.);
- Components or devices that are not primarily part of the continuous glucose monitor composite device (e.g. batteries, insertion devices, adhesive removers, or other supplies).

Eligible individuals will have coverage for up to a maximum of 1 transmitter and 55 sensors for each benefit year.

00000999709 DEXCOM G6 SENSOR COM \$ 99.6700

This product is a benefit for patients under the age of 18 with diabetes that require ongoing use of insulin or insulin pump therapy when prescribed by a Specialist in Endocrinology or Pediatrics*.

*A Specialist in Endocrinology or Pediatrics will need to evaluate the need to prescribe a continuous glucose monitor for the patient after a consideration of the clinical criteria that necessitate (or contraindicate) the use of continuous glucose monitors for patients.

Coverage will not be provided for the following:

- Requests made due to lifestyle choices (e.g. sports, personal preference, etc.);
- Components or devices that are not primarily part of the continuous glucose monitor composite device (e.g. batteries, insertion devices, adhesive removers, or other supplies).

Eligible individuals will have coverage for up to a maximum of 4 transmitters and 39 sensors for each benefit year.

04:00

Antihistamine Drugs

ALBERTA DRUG BENEFIT LIST

04:00 ANTIHISTAMINE DRUGS

04:04.04 FIRST GENERATION ANTIHISTAMINES
(ETHANOLAMINE DERIVATIVES)

DIPHENHYDRAMINE HCL

50 MG / ML INJECTION

00000596612 DIPHENHYDRAMINE SDZ \$ 4.0400

04:00 ANTIHISTAMINE DRUGS

04:04.12 FIRST GENERATION ANTIHISTAMINES
(PHENOTHIAZINE DERIVATIVES)

TRIMEPRAZINE TARTRATE

5 MG (BASE) ORAL TABLET

00001926292 PANECTYL ERF \$ 0.4023

04:00 ANTIHISTAMINE DRUGS

04:92 OTHER ANTIHISTAMINES

KETOTIFEN FUMARATE

1 MG (BASE) ORAL TABLET

00000577308 ZADITEN TEV \$ 2.0130

08:00

Anti-Infective Agents

08:00 ANTI-INFECTIVE AGENTS

08:08 ANTHELMINTICS

MEBENDAZOLE

100 MG ORAL CHEWABLE TABLET

00000556734	VERMOX	JAI	\$	6.3379
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08:00 ANTI-INFECTIVE AGENTS08:12.02 ANTIBACTERIALS
(AMINOGLYCOSIDES)**GENTAMICIN SULFATE**

40 MG / ML (BASE) INJECTION

00002242652	GENTAMICIN	SDZ	\$	8.9447
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TOBRAMYCIN

28 MG INHALATION CAPSULE

00002365154	TOBI PODHALER	BGP	\$	14.0613
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TOBRAMYCIN SULFATE

60 MG / ML (BASE) INHALATION SOLUTION

00002389622	TEVA-TOBRAMYCIN	TEV	\$	8.2197
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00002239630	TOBI	BGP	\$	11.6428
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08:00 ANTI-INFECTIVE AGENTS08:12.06.04 ANTIBACTERIALS
CEPHALOSPORINS
(FIRST GENERATION CEPHALOSPORINS)**CEFADROXIL**

RESTRICTED BENEFIT - This product is a benefit when prescribed by a Specialist in Infectious Diseases or a designated prescriber.

(Refer to Section 3 - Criteria for Special Authorization of Select Drug Products of the Alberta Drug Benefit List for eligibility when the prescriber prescribing the medication is not a Specialist in Infectious Diseases or a designated prescriber.)

500 MG ORAL CAPSULE

00002240774	APO-CEFADROXIL	APX	\$	0.8421
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00002235134	TEVA-CEFADROXIL	TEV	\$	0.8421
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CEFAZOLIN SODIUM

This Drug Product is a benefit for use by Home Parenteral Therapy (HPT) programs only.

500 MG / VIAL (BASE) INJECTION

00002308932	CEFAZOLIN	SDZ	\$	2.5000
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1 G / VIAL (BASE) INJECTION

00002308959	CEFAZOLIN	SDZ	\$	2.6961
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00002465469	CEFAZOLIN SODIUM	STM	\$	2.6961
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00002108127	STERILE CEFAZOLIN SODIUM	TEV	\$	2.6961
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10 G / VIAL (BASE) INJECTION

00002237140	CEFAZOLIN	FKC	\$	30.1500
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00002308967	CEFAZOLIN	SDZ	\$	30.1500
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00002437120	CEFAZOLIN	TGT	\$	30.1500
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00002465477	CEFAZOLIN SODIUM	STM	\$	30.1500
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08:00 ANTI-INFECTIVE AGENTS

08:12.06.04 ANTIBACTERIALS
 CEPHALOSPORINS
 (FIRST GENERATION CEPHALOSPORINS)

CEFAZOLIN SODIUM

100 G / G INJECTION

00002401029	CEFAZOLIN	FKC	\$	3.0150
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CEPHALEXIN

250 MG ORAL TABLET

00000768723	APO-CEPHALEX	APX	\$	0.0866
00002470578	AURO-CEPHALEXIN	AUR	\$	0.0866
00002521253	CEPHALEXIN	SNS	\$	0.0866
00000583413	TEVA-CEPHALEXIN	TEV	\$	0.0866

500 MG ORAL TABLET

00000768715	APO-CEPHALEX	APX	\$	0.1731
00002470586	AURO-CEPHALEXIN	AUR	\$	0.1731
00002495651	CEPHALEXIN	SIV	\$	0.1731
00002521261	CEPHALEXIN	SNS	\$	0.1731
00000583421	TEVA-CEPHALEXIN	TEV	\$	0.1731

250 MG ORAL CAPSULE

00000342084	TEVA-CEPHALEXIN	TEV	\$	0.4440
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500 MG ORAL CAPSULE

00000342114	TEVA-CEPHALEXIN	TEV	\$	0.8396
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25 MG / ML ORAL SUSPENSION

00002497743	AURO-CEPHALEXIN	AUR	\$	0.1535
00002528436	JAMP CEPHALEXIN	JPC	\$	0.1535
00002469170	LUPIN-CEPHALEXIN	LPC	\$	0.1535
00000342106	TEVA-CEPHALEXIN 125	TEV	\$	0.1535

50 MG / ML ORAL SUSPENSION

00002528444	JAMP CEPHALEXIN	JPC	\$	0.2573
00002469189	LUPIN-CEPHALEXIN	LPC	\$	0.2573
00000342092	TEVA-CEPHALEXIN 250	TEV	\$	0.2573

08:00 ANTI-INFECTIVE AGENTS

08:12.06.08 ANTIBACTERIALS
 CEPHALOSPORINS
 (SECOND GENERATION CEPHALOSPORINS)

CEFPROZIL

250 MG ORAL TABLET

00002293528	RAN-CEFPROZIL	RAN	\$	1.7374
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500 MG ORAL TABLET

00002347253	AURO-CEFPROZIL	AUR	\$	2.0038
00002293536	RAN-CEFPROZIL	RAN	\$	2.0038

25 MG / ML ORAL SUSPENSION

00002329204	RAN-CEFPROZIL	RAN	\$	0.1716
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50 MG / ML ORAL SUSPENSION

00002293579	RAN-CEFPROZIL	RAN	\$	0.3427
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08:00 ANTI-INFECTIVE AGENTS

08:12.06.08 ANTIBACTERIALS
 CEPHALOSPORINS
 (SECOND GENERATION CEPHALOSPORINS)

CEFUROXIME AXETIL

250 MG (BASE) ORAL TABLET

00002244393 APO-CEFUROXIME APX \$ 0.8388

00002344823 AURO-CEFUROXIME AUR \$ 0.8388

500 MG (BASE) ORAL TABLET

00002244394 APO-CEFUROXIME APX \$ 1.6616

00002344831 AURO-CEFUROXIME AUR \$ 1.6616

08:00 ANTI-INFECTIVE AGENTS

08:12.06.12 ANTIBACTERIALS
 CEPHALOSPORINS
 (THIRD GENERATION CEPHALOSPORINS)

CEFIXIME

400 MG ORAL TABLET

00002432773 AURO-CEFIXIME AUR \$ 3.0796

00000868981 SUPRAX ODN \$ 3.0800

20 MG / ML ORAL SUSPENSION

00002468689 AURO-CEFIXIME AUR \$ 0.3899

00000868965 SUPRAX ODN \$ 0.3899

CEFOTAXIME SODIUM

1 G / VIAL (BASE) INJECTION

00002434091 CEFOTAXIME SODIUM STM \$ 9.1830

2 G / VIAL (BASE) INJECTION

00002434105 CEFOTAXIME SODIUM STM \$ 18.3660

CEFTRIAZONE SODIUM

0.25 G / VIAL (BASE) INJECTION

☒ 00002325594 CEFTRIAZONE SODIUM FOR INJECTION BP STM \$ 5.6430

1 G / VIAL (BASE) INJECTION

00002292270 CEFTRIAZONE FOR INJECTION USP SDZ \$ 12.4900

00002325616 CEFTRIAZONE SODIUM FOR INJECTION BP STM \$ 12.4900

2 G / VIAL (BASE) INJECTION

00002292289 CEFTRIAZONE FOR INJECTION USP SDZ \$ 34.4850

00002325624 CEFTRIAZONE SODIUM FOR INJECTION BP STM \$ 34.4850

10 G / VIAL (BASE) INJECTION

☒ 00002325632 CEFTRIAZONE SODIUM STM \$ 153.0000

08:00 ANTI-INFECTIVE AGENTS

08:12.07.08 ANTIBACTERIALS
 MISCELLANEOUS B-LACTAMS
 (CARBAPENEMS)

ERTAPENEM

RESTRICTED BENEFIT - This product is a benefit when prescribed by a Specialist in Infectious Diseases or a designated prescriber.

(Refer to Section 3 - Criteria for Special Authorization of Select Drug Products of the Alberta Drug Benefit List for eligibility when the prescriber prescribing the medication is not a Specialist in Infectious Diseases or a designated prescriber.)

1 G / VIAL INJECTION

<input checked="" type="checkbox"/> 00002247437	INVANZ	MFC	\$	59.5200
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MEROPENEM

RESTRICTED BENEFIT - This product is a benefit when prescribed by a Specialist in Infectious Diseases or Hematology, or a designated prescriber.

(Refer to Section 3 - Criteria for Special Authorization of Select Drug Products of the Alberta Drug Benefit List for eligibility when the prescriber prescribing the medication is not a Specialist in Infectious Diseases or Hematology, or a designated prescriber.)

500 MG / VIAL INJECTION

00002378787	MEROPENEM	SDZ	\$	9.2225
00002493330	MEROPENEM	STM	\$	9.2225
00002421518	TARO-MEROPENEM	SPG	\$	9.2225

1 G / VIAL INJECTION

00002378795	MEROPENEM	SDZ	\$	18.4450
00002493349	MEROPENEM FOR INJECTION	STM	\$	18.4450
00002421526	TARO-MEROPENEM	SPG	\$	18.4450

08:00 ANTI-INFECTIVE AGENTS

08:12.07.12 ANTIBACTERIALS
 MISCELLANEOUS B-LACTAMS
 (CEPHAMYCINS)

CEFOXITIN SODIUM

RESTRICTED BENEFIT - This product is a benefit when prescribed by a Specialist in Infectious Diseases or a designated prescriber.

(Refer to Section 3 - Criteria for Special Authorization of Select Drug Products of the Alberta Drug Benefit List for eligibility when the prescriber prescribing the medication is not a Specialist in Infectious Diseases or a designated prescriber.)

1 G / VIAL (BASE) INJECTION

00002128187	CEFOXITIN SODIUM	TEV	\$	10.6000
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2 G / VIAL (BASE) INJECTION

00002128195	CEFOXITIN SODIUM	TEV	\$	21.2500
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08:00 ANTI-INFECTIVE AGENTS

08:12.08 ANTIBACTERIALS
(CHLORAMPHENICOL)

CHLORAMPHENICOL SODIUM SUCCINATE

1 G / VIAL (BASE) INJECTION

00000312363	CHLOROMYCETIN	ERF	\$	21.2130
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08:00 ANTI-INFECTIVE AGENTS

08:12.12.04 ANTIBACTERIALS
MACROLIDES
(ERYTHROMYCINS)

ERYTHROMYCIN

250 MG ORAL TABLET

00000682020	ERYTHRO-BASE	AAP	\$	0.2112
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08:00 ANTI-INFECTIVE AGENTS

08:12.12.92 ANTIBACTERIALS
MACROLIDES
(OTHER MACROLIDES)

AZITHROMYCIN

250 MG ORAL TABLET

00002480700	AG-AZITHROMYCIN	AGP	\$	0.9410
00002415542	APO-AZITHROMYCIN Z	APX	\$	0.9410
00002330881	AZITHROMYCIN	SNS	\$	0.9410
00002442434	AZITHROMYCIN	SIV	\$	0.9410
00002452308	JAMP-AZITHROMYCIN	JPC	\$	0.9410
00002502038	M-AZITHROMYCIN	MTR	\$	0.9410
00002452324	MAR-AZITHROMYCIN	MAR	\$	0.9410
00002267845	NOVO-AZITHROMYCIN	TEV	\$	0.9410
00002479680	NRA-AZITHROMYCIN	NRA	\$	0.9410
00002261634	PMS-AZITHROMYCIN	PMS	\$	0.9410
00002275309	RIVA-AZITHROMYCIN	RIV	\$	0.9410
00002265826	SANDOZ AZITHROMYCIN	SDZ	\$	0.9410
00002212021	ZITHROMAX	PFI	\$	5.2318

600 MG ORAL TABLET

00002261642	PMS-AZITHROMYCIN	PMS	\$	10.6652
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RESTRICTED BENEFIT - This product is a benefit when prescribed by a Specialist in Infectious Diseases or a designated prescriber.

(Refer to Section 3 - Criteria for Special Authorization of Select Drug Products of the Alberta Drug Benefit List for eligibility when the prescriber prescribing the medication is not a Specialist in Infectious Diseases or a designated prescriber.)

20 MG / ML ORAL SUSPENSION

00002482363	AURO-AZITHROMYCIN	AUR	\$	0.5881
00002332388	SANDOZ AZITHROMYCIN	SDZ	\$	0.5881
00002223716	ZITHROMAX	PFI	\$	1.1310

08:00 ANTI-INFECTIVE AGENTS

08:12.12.92 ANTIBACTERIALS
 MACROLIDES
 (OTHER MACROLIDES)

AZITHROMYCIN

40 MG / ML ORAL SUSPENSION

00002482371	AURO-AZITHROMYCIN	AUR	\$	0.8330
00002332396	SANDOZ AZITHROMYCIN	SDZ	\$	0.8330
00002223724	ZITHROMAX	PFI	\$	1.6026

CLARITHROMYCIN

250 MG ORAL TABLET

00002442469	CLARITHROMYCIN	SIV	\$	0.4122
00002466120	CLARITHROMYCIN	SNS	\$	0.4122
00002247573	PMS-CLARITHROMYCIN	PMS	\$	0.4122
00002361426	RAN-CLARITHROMYCIN	RAN	\$	0.4122
00002266539	SANDOZ CLARITHROMYCIN	SDZ	\$	0.4122
00001984853	BIAXIN BID	BGP	\$	1.8311

500 MG ORAL TABLET

00002442485	CLARITHROMYCIN	SIV	\$	0.8318
00002466139	CLARITHROMYCIN	SNS	\$	0.8318
00002471396	M-CLARITHROMYCIN	MTR	\$	0.8318
00002247574	PMS-CLARITHROMYCIN	PMS	\$	0.8318
00002361434	RAN-CLARITHROMYCIN	RAN	\$	0.8318
00002266547	SANDOZ CLARITHROMYCIN	SDZ	\$	0.8318
00002126710	BIAXIN BID	BGP	\$	3.6192

500 MG ORAL EXTENDED-RELEASE TABLET

00002403196	ACT CLARITHROMYCIN XL	TEV	\$	1.2572
00002413345	APO-CLARITHROMYCIN XL	APX	\$	1.2572

25 MG / ML ORAL SUSPENSION

00002390442	TARO-CLARITHROMYCIN	TAR	\$	0.2388
00002146908	BIAXIN	BGP	\$	0.3297

50 MG / ML ORAL SUSPENSION

00002390450	TARO-CLARITHROMYCIN	TAR	\$	0.4685
00002244641	BIAXIN	BGP	\$	0.6466

08:00 ANTI-INFECTIVE AGENTS

08:12.16.04 ANTIBACTERIALS
 PENICILLINS
 (NATURAL PENICILLINS)

PENICILLIN G SODIUM

1,000,000 IU / VIAL INJECTION

00001930672	PENICILLIN G SODIUM	TEV	\$	2.4000
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5,000,000 IU / VIAL INJECTION

00000883751	PENICILLIN G SODIUM	TEV	\$	5.1000
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10,000,000 IU / VIAL INJECTION

00001930680	PENICILLIN G SODIUM	TEV	\$	8.9000
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PENICILLIN V POTASSIUM

300 MG ORAL TABLET

00000642215	PEN-VK	AAP	\$	0.2343
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08:00 ANTI-INFECTIVE AGENTS

08:12.16.08 ANTIBACTERIALS

PENICILLINS

(AMINOPENICILLINS)

AMOXICILLIN TRIHYDRATE

250 MG (BASE)	ORAL CHEWABLE TABLET			
00002036355	NOVAMOXIN	TEV	\$	0.8282
250 MG (BASE)	ORAL CAPSULE			
00002525348	AMOXICILLIN BP	SNS	\$	0.0672
00000628115	APO-AMOXI	APX	\$	0.0672
00002388073	AURO-AMOXICILLIN	AUR	\$	0.0672
00002433060	JAMP-AMOXICILLIN	JPC	\$	0.0672
00000406724	NOVAMOXIN	TEV	\$	0.0672
00002532042	PRZ-AMOXICILLIN	PCI	\$	0.0672
500 MG (BASE)	ORAL CAPSULE			
00002477726	AG-AMOXICILLIN	AGP	\$	0.1308
00002401509	AMOXICILLIN	SIV	\$	0.1308
00002525356	AMOXICILLIN BP	SNS	\$	0.1308
00000628123	APO-AMOXI	APX	\$	0.1308
00002388081	AURO-AMOXICILLIN	AUR	\$	0.1308
00002433079	JAMP-AMOXICILLIN	JPC	\$	0.1308
00000406716	NOVAMOXIN	TEV	\$	0.1308
00002532050	PRZ-AMOXICILLIN	PCI	\$	0.1308
25 MG / ML (BASE)	ORAL SUSPENSION			
00000628131	APO-AMOXI	APX	\$	0.0247
00002535793	JAMP-AMOXICILLIN	JPC	\$	0.0247
50 MG / ML (BASE)	ORAL SUSPENSION			
00002352753	AMOXICILLIN	SNS	\$	0.0540
00002401541	AMOXICILLIN	SIV	\$	0.0540
00002352788	AMOXICILLIN SUGAR-REDUCED	SNS	\$	0.0540
00000628158	APO-AMOXI	APX	\$	0.0540
00002535815	JAMP-AMOXICILLIN	JPC	\$	0.0540
00000452130	NOVAMOXIN	TEV	\$	0.0540
00001934163	NOVAMOXIN SUGAR-REDUCED	TEV	\$	0.0540

AMOXICILLIN TRIHYDRATE/ CLAVULANATE POTASSIUM

250 MG (BASE) * 125 MG (BASE)	ORAL TABLET			
00002243350	APO-AMOXI CLAV	APX	\$	0.2467
00002471671	AURO-AMOXICLAV	AUR	\$	0.2467
00002508249	JAMP AMOXI CLAV	JPC	\$	0.2467
500 MG (BASE) * 125 MG (BASE)	ORAL TABLET			
00002243351	APO-AMOXI CLAV	APX	\$	0.3778
00002471698	AURO-AMOXICLAV	AUR	\$	0.3778
00002508257	JAMP AMOXI CLAV	JPC	\$	0.3778
00002482576	SANDOZ AMOXI-CLAV	SDZ	\$	0.3778
875 MG (BASE) * 125 MG (BASE)	ORAL TABLET			
00002245623	APO-AMOXI CLAV	APX	\$	0.5551
00002471701	AURO-AMOXICLAV	AUR	\$	0.5551
00002508265	JAMP AMOXI CLAV	JPC	\$	0.5551
00002482584	SANDOZ AMOXI-CLAV	SDZ	\$	0.5551
40 MG / ML (BASE) * 5.7 MG / ML (BASE)	ORAL SUSPENSION			
00002238831	CLAVULIN-200	GSK	\$	0.1652
80 MG / ML (BASE) * 11.4 MG / ML (BASE)	ORAL SUSPENSION			
00002530694	M-AMOXI CLAV	MTR	\$	0.2386
00002238830	CLAVULIN-400	GSK	\$	0.3206

The DBL is not a prescribing or a diagnostic tool. Prescribers should refer to drug monographs and utilize professional judgment.

08:00 ANTI-INFECTIVE AGENTS

08:12.16.08 ANTIBACTERIALS

PENICILLINS

(AMINOPENICILLINS)

AMPICILLIN

RESTRICTED BENEFIT - This product is a benefit when prescribed by a Specialist in Infectious Diseases or a designated prescriber.

(Refer to Section 3 - Criteria for Special Authorization of Select Drug Products of the Alberta Drug Benefit List for eligibility when the prescriber prescribing the medication is not a Specialist in Infectious Diseases or a designated prescriber.)

250 MG ORAL CAPSULE				
00000020877	NOVO-AMPICILLIN	TEV	\$	0.4656
500 MG ORAL CAPSULE				
00000020885	NOVO-AMPICILLIN	TEV	\$	0.8826
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AMPICILLIN SODIUM				
250 MG / VIAL (BASE) INJECTION				
00000872644	AMPICILLIN SODIUM	TEV	\$	3.1830
500 MG / VIAL (BASE) INJECTION				
00000872652	AMPICILLIN SODIUM	TEV	\$	3.3384
1 G / VIAL (BASE) INJECTION				
00001933345	AMPICILLIN SODIUM	TEV	\$	5.5886
2 G / VIAL (BASE) INJECTION				
00001933353	AMPICILLIN SODIUM	TEV	\$	11.1781

08:00 ANTI-INFECTIVE AGENTS

08:12.16.12 ANTIBACTERIALS

PENICILLINS

(PENICILLINASE-RESISTANT PENICILLINS)

CLOXACILLIN SODIUM

250 MG (BASE) ORAL CAPSULE				
00002510731	JAMP CLOXACILLIN	JPC	\$	0.2141
00000337765	NOVO-CLOXIN	TEV	\$	0.2141
500 MG (BASE) ORAL CAPSULE				
00002510758	JAMP CLOXACILLIN	JPC	\$	0.4045
00000337773	NOVO-CLOXIN	TEV	\$	0.4045
25 MG / ML (BASE) ORAL LIQUID				
00000337757	TEVA-CLOXACILLIN	TEV	\$	0.1427
500 MG / VIAL (BASE) INJECTION				
00002367408	CLOXACILLIN	STM	\$	5.2780
1 G / VIAL (BASE) INJECTION				
00002367416	CLOXACILLIN	STM	\$	6.4820
2 G / VIAL (BASE) INJECTION				
00002367424	CLOXACILLIN	STM	\$	8.4610

08:00 ANTI-INFECTIVE AGENTS

08:12.16.16 ANTIBACTERIALS

PENICILLINS

(EXTENDED-SPECTRUM PENICILLINS)

PIPERACILLIN SODIUM/ TAZOBACTAM SODIUM

RESTRICTED BENEFIT - This product is a benefit when prescribed by a Specialist in Infectious Diseases or Hematology, or a designated prescriber.

(Refer to Section 3 - Criteria for Special Authorization of Select Drug Products of the Alberta Drug Benefit List for eligibility when the prescriber prescribing the medication is not a Specialist in Infectious Diseases or Hematology, or a designated prescriber.)

2 G / VIAL (BASE) * 250 MG / VIAL (BASE) INJECTION

00002308444	PIPERACILLIN AND TAZOBACTAM	APX	\$	4.1727
00002362619	PIPERACILLIN AND TAZOBACTAM	STM	\$	4.1727
00002299623	PIPERACILLIN SODIUM/TAZOBACTAM SODIUM	SDZ	\$	4.1727

3 G / VIAL (BASE) * 375 MG / VIAL (BASE) INJECTION

00002362627	PIPERACILLIN AND TAZOBACTAM	STM	\$	6.2591
00002299631	PIPERACILLIN SODIUM/TAZOBACTAM SODIUM	SDZ	\$	6.2591
00002370166	PIPERACILLIN/TAZOBACTAM	TEV	\$	6.2591

4 G / VIAL (BASE) * 500 MG / VIAL (BASE) INJECTION

00002308460	PIPERACILLIN AND TAZOBACTAM	APX	\$	8.3458
00002362635	PIPERACILLIN AND TAZOBACTAM	STM	\$	8.3458
00002299658	PIPERACILLIN SODIUM/TAZOBACTAM SODIUM	SDZ	\$	8.3458
00002370174	PIPERACILLIN/TAZOBACTAM	TEV	\$	8.3458

08:00 ANTI-INFECTIVE AGENTS

08:12.18 ANTIBACTERIALS

(QUINOLONES)

NORFLOXACIN

400 MG ORAL TABLET

00002229524	NORFLOXACIN	AAP	\$	1.8586
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08:00 ANTI-INFECTIVE AGENTS

08:12.20 ANTIBACTERIALS

(SULFONAMIDES)

SULFAMETHOXAZOLE/ TRIMETHOPRIM

100 MG * 20 MG ORAL TABLET

00000445266	SULFATRIM	AAP	\$	0.1078
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400 MG * 80 MG ORAL TABLET

00000445274	SULFATRIM	AAP	\$	0.0482
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800 MG * 160 MG ORAL TABLET

00000445282	SULFATRIM DS	AAP	\$	0.2074
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40 MG / ML * 8 MG / ML ORAL SUSPENSION

00000726540	TEVA-TRIMEL	TEV	\$	0.1309
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08:00 ANTI-INFECTIVE AGENTS

08:12.20 ANTIBACTERIALS
(SULFONAMIDES)

SULFASALAZINE

500 MG ORAL TABLET

00000598461	PMS-SULFASALAZINE	PMS	\$	0.2678
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500 MG ORAL ENTERIC-COATED TABLET

00000598488	PMS-SULFASALAZINE	PMS	\$	0.4074
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08:00 ANTI-INFECTIVE AGENTS

08:12.24 ANTIBACTERIALS
(TETRACYCLINES)

DOXYCYCLINE HYCLATE

100 MG (BASE) ORAL TABLET

00000874256	APO-DOXY	APX	\$	0.4560
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00002351242	DOXYCYCLINE	SNS	\$	0.4560
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00002536250	PRZ-DOXYCYCLINE	PCI	\$	0.4560
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00002158574	TEVA-DOXYCYCLINE	TEV	\$	0.4560
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100 MG (BASE) ORAL CAPSULE

00000740713	APO-DOXY	APX	\$	0.5860
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00002351234	DOXYCYCLINE	SNS	\$	0.5860
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00000725250	TEVA-DOXYCYCLINE	TEV	\$	0.5860
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MINOCYCLINE HCL

50 MG (BASE) ORAL CAPSULE

00002084090	MINOCYCLINE	AAP	\$	0.5616
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100 MG (BASE) ORAL CAPSULE

00002084104	MINOCYCLINE	AAP	\$	1.0836
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TETRACYCLINE HCL

250 MG ORAL CAPSULE

00000580929	TETRACYCLINE	AAP	\$	0.0838
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08:00 ANTI-INFECTIVE AGENTS

08:12.28.16 ANTIBACTERIALS
MISCELLANEOUS ANTIBACTERIALS
(GLYCOPEPTIDES)

VANCOMYCIN HCL

125 MG (BASE) ORAL CAPSULE

00002407744	JAMP-VANCOMYCIN	JPC	\$	5.1800
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00000800430	VANCOCIN	SLP	\$	5.1800
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250 MG (BASE) ORAL CAPSULE

00002407752	JAMP-VANCOMYCIN	JPC	\$	10.3600
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00000788716	VANCOCIN	SLP	\$	10.3600
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500 MG / VIAL (BASE) INJECTION

00002342855	VANCOMYCIN HCL	STM	\$	9.8669
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1 G / VIAL (BASE) INJECTION

00002342863	VANCOMYCIN HCL	STM	\$	18.7810
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08:00 ANTI-INFECTIVE AGENTS

08:12.28.16 ANTIBACTERIALS
 MISCELLANEOUS ANTIBACTERIALS
 (GLYCOPEPTIDES)

VANCOMYCIN HCL

10 G / VIAL INJECTION

00002241807	STERILE VANCOMYCIN HCL	FKC	\$	589.9000
00002405830	VANCOMYCIN HCL	STM	\$	589.9000

RESTRICTED BENEFIT

This Drug Product is a benefit for use by Home Parenteral Therapy (HPT) programs only.

08:00 ANTI-INFECTIVE AGENTS

08:12.28.20 ANTIBACTERIALS
 MISCELLANEOUS ANTIBACTERIALS
 (LINCOMYCINS)

CLINDAMYCIN HCL

150 MG (BASE) ORAL CAPSULE

00002436906	AURO-CLINDAMYCIN	AUR	\$	0.2217
00002400529	CLINDAMYCIN	SNS	\$	0.2217
00002483734	JAMP CLINDAMYCIN	JPC	\$	0.2217
00002479923	M-CLINDAMYCIN	MTR	\$	0.2217
00002462656	MED-CLINDAMYCIN	GMP	\$	0.2217
00002493748	NRA-CLINDAMYCIN	NRA	\$	0.2217
00002468476	RIVA-CLINDAMYCIN	RIV	\$	0.2217
00002241709	TEVA-CLINDAMYCIN	TEV	\$	0.2217

300 MG (BASE) ORAL CAPSULE

00002436914	AURO-CLINDAMYCIN	AUR	\$	0.4434
00002400537	CLINDAMYCIN	SNS	\$	0.4434
00002483742	JAMP CLINDAMYCIN	JPC	\$	0.4434
00002479931	M-CLINDAMYCIN	MTR	\$	0.4434
00002462664	MED-CLINDAMYCIN	GMP	\$	0.4434
00002493756	NRA-CLINDAMYCIN	NRA	\$	0.4434
00002468484	RIVA-CLINDAMYCIN	RIV	\$	0.4434
00002241710	TEVA-CLINDAMYCIN	TEV	\$	0.4434

CLINDAMYCIN PALMITATE HCL

15 MG / ML (BASE) ORAL SOLUTION

00000225851	DALACIN C PALMITATE	PFI	\$	0.3152
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CLINDAMYCIN PHOSPHATE

150 MG / ML (BASE) INJECTION

00002230540	CLINDAMYCIN	SDZ	\$	4.1580
00002230535	CLINDAMYCIN (60 & 120 ML)	SDZ	\$	4.1580
00000260436	DALACIN C PHOSPHATE	PFI	\$	4.4469

08:00 ANTI-INFECTIVE AGENTS

08:12.28.24 ANTIBACTERIALS
 MISCELLANEOUS ANTIBACTERIALS
 (OXAZOLIDINONES)

LINEZOLID

RESTRICTED BENEFIT - This product is a benefit when prescribed by a Specialist in Infectious Diseases or a designated prescriber.

(Refer to Section 3 - Criteria for Special Authorization of Select Drug Products of the Alberta Drug Benefit List for eligibility when the prescriber prescribing the medication is not a Specialist in Infectious Diseases or a designated prescriber.)

600 MG ORAL TABLET

00002426552	APO-LINEZOLID	APX	\$	19.3041
00002520354	JAMP LINEZOLID	JPC	\$	19.3041
00002422689	SANDOZ LINEZOLID	SDZ	\$	19.3041

08:00 ANTI-INFECTIVE AGENTS

08:12.28.28 ANTIBACTERIALS
 MISCELLANEOUS ANTIBACTERIALS
 (POLYMYXINS)

COLISTIMETHATE SODIUM

150 MG / VIAL INJECTION

<input checked="" type="checkbox"/> 00002244849	COLISTIMETHATE FOR INJECTION	STM	\$	33.7397
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08:00 ANTI-INFECTIVE AGENTS

08:14.04 ANTIFUNGALS
 (ALLYLAMINES)

TERBINAFINE HCL

250 MG (BASE) ORAL TABLET

00002254727	ACT TERBINAFINE	TEV	\$	0.7714
00002239893	APO-TERBINAFINE	APX	\$	0.7714
00002320134	AURO-TERBINAFINE	AUR	\$	0.7714
00002294273	PMS-TERBINAFINE	PMS	\$	0.7714
00002353121	TERBINAFINE	SNS	\$	0.7714
00002385279	TERBINAFINE	SIV	\$	0.7714
00002031116	LAMISIL	NOV	\$	4.6942
1% TOPICAL CREAM				
00002031094	LAMISIL	NOV	\$	0.5976
1% TOPICAL SOLUTION				
00002238703	LAMISIL	NOV	\$	0.6063

08:00 ANTI-INFECTIVE AGENTS**08:14.08 ANTIFUNGALS
(AZOLES)****FLUCONAZOLE****50 MG ORAL TABLET**

00002281260	ACT FLUCONAZOLE	TEV	\$	1.2904
00002237370	APO-FLUCONAZOLE	APX	\$	1.2904
00002517396	FLUCONAZOLE	SNS	\$	1.2904
00002534886	FLUCONAZOLE	SIV	\$	1.2904
00002245292	MYLAN-FLUCONAZOLE	MYP	\$	1.2904
00002236978	NOVO-FLUCONAZOLE	TEV	\$	1.2904
00002245643	PMS-FLUCONAZOLE	PMS	\$	1.2904

100 MG ORAL TABLET

00002281279	ACT FLUCONAZOLE	TEV	\$	2.2890
00002237371	APO-FLUCONAZOLE	APX	\$	2.2890
00002517418	FLUCONAZOLE	SNS	\$	2.2890
00002534894	FLUCONAZOLE	SIV	\$	2.2890
00002245293	MYLAN-FLUCONAZOLE	MYP	\$	2.2890
00002236979	NOVO-FLUCONAZOLE	TEV	\$	2.2890
00002245644	PMS-FLUCONAZOLE	PMS	\$	2.2890

10 MG / ML ORAL SUSPENSION

00002024152	DIFLUCAN	PFI	\$	1.2648
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RESTRICTED BENEFIT - This product is a benefit when prescribed by a Specialist in Infectious Diseases or a designated prescriber.

(Refer to Section 3 - Criteria for Special Authorization of Select Drug Products of the Alberta Drug Benefit List for eligibility when the prescriber prescribing the medication is not a Specialist in Infectious Diseases or a designated prescriber.)

2 MG / ML INJECTION

00000891835	DIFLUCAN	PFI	\$	0.4085
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ISAVUCONAZONIUM SULFATE

This product is a benefit when prescribed by a Specialist in Infectious Diseases or a designated prescriber.

(Refer to Section 3 - Criteria for Special Authorization of Select Drug Products of the Alberta Drug Benefit List for eligibility when the prescriber prescribing the medication is not a Specialist in Infectious Diseases or a designated prescriber.)

100 MG ORAL CAPSULE

00002483971	CRESEMBA	AVP	\$	78.8300
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200 MG / VIAL INJECTION

00002483998	CRESEMBA	AVP	\$	400.0000
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08:00 ANTI-INFECTIVE AGENTS**08:14.08 ANTIFUNGALS
(AZOLES)****ITRACONAZOLE****100 MG ORAL CAPSULE**

00002462559	MINT-ITRACONAZOLE	MPI	\$	4.2075
00002047454	SPORANOX	JAI	\$	5.2920

10 MG / ML ORAL SOLUTION

00002484315	JAMP ITRACONAZOLE	JPC	\$	0.4111
00002495988	ODAN ITRACONAZOLE	ODN	\$	0.4111

RESTRICTED BENEFIT - This product is a benefit when prescribed by a Specialist in Infectious Diseases or a designated prescriber.

(Refer to Section 3 - Criteria for Special Authorization of Select Drug Products of the Alberta Drug Benefit List for eligibility when the prescriber prescribing the medication is not a Specialist in Infectious Diseases or a designated prescriber.)

KETOCONAZOLE**200 MG ORAL TABLET**

00002237235	APO-KETOCONAZOLE	APX	\$	0.9393
00002231061	TEVA-KETOCONAZOLE	TEV	\$	0.9393

VORICONAZOLE

RESTRICTED BENEFIT - This product is a benefit when prescribed by a Specialist in Infectious Diseases or a designated prescriber.

(Refer to Section 3 - Criteria for Special Authorization of Select Drug Products of the Alberta Drug Benefit List for eligibility when the prescriber prescribing the medication is not a Specialist in Infectious Diseases or a designated prescriber.)

50 MG ORAL TABLET

00002525771	JAMP VORICONAZOLE	JPC	\$	3.3909
00002399245	SANDOZ VORICONAZOLE	SDZ	\$	3.3909
00002396866	TEVA-VORICONAZOLE	TEV	\$	3.3909
00002256460	VFEND	PFI	\$	13.4309

200 MG ORAL TABLET

00002525798	JAMP VORICONAZOLE	JPC	\$	13.2403
00002399253	SANDOZ VORICONAZOLE	SDZ	\$	13.2403
00002396874	TEVA-VORICONAZOLE	TEV	\$	13.2403
00002256479	VFEND	PFI	\$	53.7016

40 MG / ML ORAL SUSPENSION

00002279991	VFEND	PFI	\$	11.2664
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200 MG / VIAL INJECTION

00002477696	VORICONAZOLE INJECTION	JPC	\$	136.5800
00002256487	VFEND	PFI	\$	160.9700

08:00 ANTI-INFECTIVE AGENTS

08:14.16 ANTIFUNGALS
(ECHINOCANDINS)

CASPOFUNGIN

RESTRICTED BENEFIT - This product is a benefit when prescribed by a Specialist in Infectious Diseases or a designated prescriber.

(Refer to Section 3 - Criteria for Special Authorization of Select Drug Products of the Alberta Drug Benefit List for eligibility when the prescriber prescribing the medication is not a Specialist in Infectious Diseases or a designated prescriber.)

50 MG / VIAL INJECTION

00002460947	CASPOFUNGIN	JUN	\$ 188.7000
00002244265	CANCIDAS	MFC	\$ 222.0000

70 MG / VIAL INJECTION

00002460955	CASPOFUNGIN	JUN	\$ 188.7000
00002244266	CANCIDAS	MFC	\$ 222.0000

08:00 ANTI-INFECTIVE AGENTS

08:14.28 ANTIFUNGALS
(POLYENES)

AMPHOTERICIN B**50 MG / VIAL INJECTION**

<input checked="" type="checkbox"/> 00000029149	FUNGIZONE IV	CAG	\$ 87.3238
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NYSTATIN**100,000 UNIT / ML ORAL SUSPENSION**

00002433443	JAMP-NYSTATIN	JPC	\$ 0.0518
00000792667	PMS-NYSTATIN	PMS	\$ 0.0518
00002194201	TEVA-NYSTATIN	TEV	\$ 0.0518

08:00 ANTI-INFECTIVE AGENTS

08:16.92 ANTIMYCOBACTERIALS
(MISCELLANEOUS ANTIMYCOBACTERIALS)

DAPSONE**100 MG ORAL TABLET**

00002481227	MAR-DAPSONE	MAR	\$ 0.7031
00002489058	RIVA-DAPSONE	RIV	\$ 0.7031

RIFABUTIN

RESTRICTED BENEFIT - This product is a benefit when prescribed by a Specialist in Infectious Diseases or a designated prescriber.

(Refer to Section 3 - Criteria for Special Authorization of Select Drug Products of the Alberta Drug Benefit List for eligibility when the prescriber prescribing the medication is not a Specialist in Infectious Diseases or a designated prescriber.)

150 MG ORAL CAPSULE

00002063786	MYCOBUTIN	PFI	\$ 6.2161
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08:00 ANTI-INFECTIVE AGENTS

08:18.08.20 ANTIVIRALS

ANTIRETROVIRALS

(NUCLEOSIDE AND NUCLEOTIDE REVERSE
TRANSCRIPTASE INHIBITORS)**LAMIVUDINE**RESTRICTED BENEFIT - This product is a benefit when initiated by a Specialist in Internal
Medicine or a designated prescriber.

100 MG ORAL TABLET

00002393239	APO-LAMIVUDINE HBV	APX	\$	2.6154
00002512467	JAMP LAMIVUDINE HBV	JPC	\$	2.6154

TENOFOVIR DISOPROXIL FUMARATERESTRICTED BENEFIT - This product is a benefit for the treatment of chronic hepatitis B
when prescribed by a Specialist in Internal Medicine or a designated prescriber.

300 MG (BASE) ORAL TABLET

00002451980	APO-TENOFOVIR	APX	\$	4.8884
00002460173	AURO-TENOFOVIR	AUR	\$	4.8884
00002479087	JAMP-TENOFOVIR	JPC	\$	4.8884
00002512939	MINT-TENOFOVIR	MPI	\$	4.8884
00002452634	MYLAN-TENOFOVIR DISOPROXIL	MYP	\$	4.8884
00002472511	NAT-TENOFOVIR	NTP	\$	4.8884
00002453940	PMS-TENOFOVIR	PMS	\$	4.8884
00002512327	TENOFOVIR	SNS	\$	4.8884
00002523922	TENOFOVIR	SIV	\$	4.8884
00002403889	TEVA-TENOFOVIR	TEV	\$	4.8884
00002247128	VIREAD	GIL	\$	18.4879

08:00 ANTI-INFECTIVE AGENTS

08:18.20 ANTIVIRALS

(INTERFERONS)

PEGINTERFERON ALFA-2A

RESTRICTED BENEFIT

This product is a benefit for the treatment of chronic hepatitis B when prescribed by a Specialist
in Internal Medicine or a designated prescriber. (For eligibility for the treatment of chronic
hepatitis C refer to Criteria for Special Authorization of Select Drug Products of the List and
Criteria for Special Authorization of Select Drug Products of the Alberta Human Services Drug
Benefit Supplement for Alberta Human Services clients.)

180 MCG / SYR INJECTION SYRINGE

00002248077	PEGASYS (0.5 ML SYRINGE)	ACI	\$	436.0683
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08:00 ANTI-INFECTIVE AGENTS**08:18.32 ANTIVIRALS
(NUCLEOSIDES AND NUCLEOTIDES)****ACYCLOVIR****200 MG ORAL TABLET**

00002207621	APO-ACYCLOVIR	APX	\$	0.3511
00002524708	MINT-ACYCLOVIR	MPI	\$	0.3511
00002242784	MYLAN-ACYCLOVIR	MYP	\$	0.3511
00002285959	TEVA-ACYCLOVIR	TEV	\$	0.3511

400 MG ORAL TABLET

00002207648	APO-ACYCLOVIR	APX	\$	0.8890
00002524716	MINT-ACYCLOVIR	MPI	\$	0.8890
00002242463	MYLAN-ACYCLOVIR	MYP	\$	0.8890
00002285967	TEVA-ACYCLOVIR	TEV	\$	0.8890

800 MG ORAL TABLET

00002207656	APO-ACYCLOVIR	APX	\$	1.2673
00002524724	MINT-ACYCLOVIR	MPI	\$	1.2673
00002242464	MYLAN-ACYCLOVIR	MYP	\$	1.2673
00002285975	TEVA-ACYCLOVIR	TEV	\$	1.2673

40 MG / ML ORAL SUSPENSION

00000886157	ZOVIRAX	GSK	\$	0.2831
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ADEFOVIR DIPIVOXIL

RESTRICTED BENEFIT - This product is a benefit for the treatment of chronic hepatitis B when prescribed by a Specialist in Internal Medicine or a designated prescriber.

10 MG ORAL TABLET

00002420333	AA-ADEFOVIR	AAP	\$	18.2518
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ENTECAVIR

RESTRICTED BENEFIT - This product is a benefit for the treatment of chronic hepatitis B when prescribed by a Specialist in Internal Medicine or a designated prescriber.

0.5 MG ORAL TABLET

00002479907	ACCEL-ENTECAVIR	ACP	\$	4.4000
00002396955	APO-ENTECAVIR	APX	\$	5.5000
00002448777	AURO-ENTECAVIR	AUR	\$	5.5000
00002527154	ENTECAVIR	SNS	\$	5.5000
00002467232	JAMP-ENTECAVIR	JPC	\$	5.5000
00002485907	MINT-ENTECAVIR	MPI	\$	5.5000
00002430576	PMS-ENTECAVIR	PMS	\$	5.5000
00002282224	BARACLUDE	BMS	\$	22.6600

GANCICLOVIR SODIUM**500 MG / VIAL (BASE) INJECTION**

<input checked="" type="checkbox"/> 00002162695	CYTOVENE	CAG	\$	48.5996
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08:00 ANTI-INFECTIVE AGENTS**08:18.32 ANTIVIRALS
(NUCLEOSIDES AND NUCLEOTIDES)****VALACYCLOVIR****500 MG ORAL TABLET**

00002295822	APO-VALACYCLOVIR (CAPLET)	APX	\$	0.6198
00002405040	AURO-VALACYCLOVIR	AUR	\$	0.6198
00002440598	JAMP-VALACYCLOVIR	JPC	\$	0.6198
00002441454	JAMP-VALACYCLOVIR	JPC	\$	0.6198
00002351579	MYLAN-VALACYCLOVIR (CAPLET)	MYP	\$	0.6198
00002298457	PMS-VALACYCLOVIR (CAPLET)	PMS	\$	0.6198
00002347091	SANDOZ VALACYCLOVIR	SDZ	\$	0.6198
00002357534	TEVA-VALACYCLOVIR	TEV	\$	0.6198
00002442000	VALACYCLOVIR	SIV	\$	0.6198
00002454645	VALACYCLOVIR	SNS	\$	0.6198
00002219492	VALTrex (CAPLET)	GSK	\$	3.8882

1,000 MG ORAL TABLET

00002354705	APO-VALACYCLOVIR (CAPLET)	APX	\$	1.7218
00002351560	MYLAN-VALACYCLOVIR (CAPLET)	MYP	\$	1.7218
00002381230	PMS-VALACYCLOVIR (CAPLET)	PMS	\$	1.7218
00002519585	VALACYCLOVIR (CAPLET)	SNS	\$	1.7218

VALGANCICLOVIR HCL**450 MG (BASE) ORAL TABLET**

00002435179	AURO-VALGANCICLOVIR	AUR	\$	5.8553
00002495457	MINT-VALGANCICLOVIR	MPI	\$	5.8553
00002413825	TEVA-VALGANCICLOVIR	TEV	\$	5.8553
00002245777	VALCYTE	CAG	\$	26.9559

50 MG / ML ORAL SUSPENSION

00002535483	AURO-VALGANCICLOVIR	AUR	\$	2.0589
00002306085	VALCYTE	CAG	\$	2.9949

08:00 ANTI-INFECTIVE AGENTS**08:30.08 ANTIPROTOZOALS
(ANTIMALARIALS)****HYDROXYCHLOROQUINE SULFATE****200 MG ORAL TABLET**

00002246691	APO-HYDROXYQUINE	APX	\$	0.1576
00002519348	HYDROXYCHLOROQUINE	SNS	\$	0.1576
00002491427	JAMP HYDROXYCHLOROQUINE SULFATE	JPC	\$	0.1576
00002424991	MINT-HYDROXYCHLOROQUINE	MPI	\$	0.1576
00002511886	NRA-HYDROXYCHLOROQUINE	NRA	\$	0.1576
00002017709	PLAQUENIL SULFATE	SAV	\$	0.6516

PRIMAQUINE PHOSPHATE**15 MG (BASE) ORAL TABLET**

00002017776	PRIMAQUINE PHOSPHATE	SAV	\$	0.4720
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QUININE SULFATE**200 MG ORAL CAPSULE**

00002445190	JAMP-QUININE	JPC	\$	0.2390
00000021008	TEVA-QUININE	TEV	\$	0.2390

300 MG ORAL CAPSULE

00002445204	JAMP-QUININE	JPC	\$	0.3750
00000021016	TEVA-QUININE	TEV	\$	0.3750

The DBL is not a prescribing or a diagnostic tool. Prescribers should refer to drug monographs and utilize professional judgment.

08:00 ANTI-INFECTIVE AGENTS

08:30.92 ANTIPROTOZOALS
(MISCELLANEOUS ANTIPROTOZOALS)

ATOVAQUONE

150 MG / ML ORAL SUSPENSION

00002528495	GLN-ATOVAQUONE	GLM	\$	2.3785
00002217422	MEPRON	GSK	\$	3.1634

METRONIDAZOLE

250 MG ORAL TABLET

00000545066	METRONIDAZOLE	AAP	\$	0.0572
00002535807	MINT-METRONIDAZOLE	MPI	\$	0.0572

5 MG / ML INJECTION

00000870420	METRONIDAZOLE	BAX	\$	0.0293
00000649074	METRONIDAZOLE	PFI	\$	0.1740

08:00 ANTI-INFECTIVE AGENTS

08:36 URINARY ANTI-INFECTIVES

FOSFOMYCIN TROMETHAMINE

3 G (BASE) ORAL POWDER PACKET

00002473801	JAMP-FOSFOMYCIN	JPC	\$	14.0250
00002240335	MONUROL	PAL	\$	20.2523

NITROFURANTOIN

50 MG ORAL TABLET

00000319511	NITROFURANTOIN	AAP	\$	0.2130
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100 MG ORAL TABLET

00000312738	NITROFURANTOIN	AAP	\$	0.2842
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50 MG ORAL CAPSULE (MACROCRYSTALS)

00002231015	TEVA-NITROFURANTOIN	TEV	\$	0.4447
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100 MG ORAL CAPSULE (MACROCRYSTALS)

00002231016	TEVA-NITROFURANTOIN	TEV	\$	0.8556
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100 MG ORAL CAPSULE (MACROCRYSTALS/MONOHYDRATE)

00002455676	PMS-NITROFURANTOIN	PMS	\$	0.5974
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TRIMETHOPRIM

100 MG ORAL TABLET

00002243116	TRIMETHOPRIM	AAP	\$	0.3273
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200 MG ORAL TABLET

00002243117	TRIMETHOPRIM	AAP	\$	0.6727
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10:00

Antineoplastic Agents

10:00 ANTINEOPLASTIC AGENTS

10:00

5-FLUOROURACIL/ SALICYLIC ACID

0.5 % * 10 % TOPICAL SOLUTION

00002428946	ACTIKERALL	CIP	\$	1.7384
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METHOTREXATE

2.5 MG ORAL TABLET

00002509067	ACH-METHOTREXATE	AHI	\$	0.2513
00002182963	APO-METHOTREXATE	APX	\$	0.2513
00002524023	AURO-METHOTREXATE	AUR	\$	0.2513
00002170698	PMS-METHOTREXATE	PMS	\$	0.2513

10 MG ORAL TABLET

00002182750	METHOTREXATE	PFI	\$	2.7987
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METHOTREXATE SODIUM

25 MG / ML (BASE) INJECTION

00002099705	METHOTREXATE SOD.(UNPRESERVED)	TEV	\$	3.5101
00002182955	METHOTREXATE SOD.(UNPRESERVED)	PFI	\$	5.6250

25 MG / ML (BASE) INJECTION

00002464365	METHOTREXATE (PRESERVED)	AHI	\$	4.4600
00002182777	METHOTREXATE SOD. (PRESERVED)	PFI	\$	4.4600

7.5 MG / SYR (BASE) INJECTION SYRINGE

00002422166	METHOTREXATE INJECTION BP	PMS	\$	5.6000
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10 MG / SYR (BASE) INJECTION SYRINGE

<input checked="" type="checkbox"/> 00002422174	METHOTREXATE INJECTION BP	PMS	\$	7.0000
<input checked="" type="checkbox"/> 00002454831	METOJECT SUBCUTANEOUS	MDX	\$	29.6400

12.5 MG / SYR INJECTION SYRINGE

00002454750	METOJECT SUBCUTANEOUS	MDX	\$	31.2000
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15 MG / SYR (BASE) INJECTION SYRINGE

<input checked="" type="checkbox"/> 00002422182	METHOTREXATE (0.6 ML SYRINGE)	PMS	\$	8.4000
00002491311	METHOTREXATE SUBCUTANEOUS	AHI	\$	24.5700
00002454858	METOJECT SUBCUTANEOUS	MDX	\$	24.5700

17.5 MG / SYR (BASE) INJECTION SYRINGE

00002491338	METHOTREXATE SUBCUTANEOUS	AHI	\$	24.0000
00002454769	METOJECT SUBCUTANEOUS	MDX	\$	24.0000

20 MG / SYR (BASE) INJECTION SYRINGE

<input checked="" type="checkbox"/> 00002422190	METHOTREXATE (0.8 ML SYRINGE)	PMS	\$	11.2000
00002491346	METHOTREXATE SUBCUTANEOUS	AHI	\$	26.2500
00002454866	METOJECT SUBCUTANEOUS	MDX	\$	26.2500

22.5 MG / SYR (BASE) INJECTION SYRINGE

00002491354	METHOTREXATE SUBCUTANEOUS	AHI	\$	26.2500
00002454777	METOJECT SUBCUTANEOUS	MDX	\$	26.2500

25 MG / SYR (BASE) INJECTION SYRINGE

<input checked="" type="checkbox"/> 00002422204	METHOTREXATE INJECTION BP	PMS	\$	12.2000
00002491362	METHOTREXATE SUBCUTANEOUS	AHI	\$	29.2500
00002454874	METOJECT SUBCUTANEOUS	MDX	\$	29.2500

12:00

Autonomic Drugs

12:00 AUTONOMIC DRUGS**12:04 PARASYMPATHOMIMETIC (CHOLINERGIC) AGENTS****PILOCARPINE HCL**

5 MG ORAL TABLET

00002509571	JAMP PILOCARPINE	JPC	\$	0.7321
00002496119	M-PILOCARPINE	MTR	\$	0.7321
00002216345	SALAGEN	AMD	\$	0.7321

PYRIDOSTIGMINE BROMIDE

60 MG ORAL TABLET

00002508362	JAMP PYRIDOSTIGMINE BROMIDE	JPC	\$	0.2673
00002495643	RIVA-PYRIDOSTIGMINE	RIV	\$	0.2673
00000869961	MESTINON	VCL	\$	0.5439

180 MG ORAL SUSTAINED-RELEASE TABLET

00000869953	MESTINON-SR	VCL	\$	1.2068
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12:00 AUTONOMIC DRUGS**12:08.08 ANTICHOLINERGIC AGENTS
(ANTIMUSCARINICS / ANTISPASMODICS)****ACLIDINIUM BROMIDE**

400 MCG / DOSE INHALATION METERED INHALATION POWDER

00002409720	TUDORZA GENUAIR	COV	\$	0.9151
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ATROPINE SULFATE

0.4 MG / ML INJECTION

00000392782	ATROPINE SULFATE	SDZ	\$	2.2880
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0.6 MG / ML INJECTION

00000392693	ATROPINE SULFATE	SDZ	\$	2.4880
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GLYCOPYRROLATE

0.2 MG / ML INJECTION

00002039508	GLYCOPYRROLATE	SDZ	\$	2.7825
00002382857	GLYCOPYRROLATE	OMG	\$	2.7825
00002473879	GLYCOPYRROLATE (0.2 MG/1 ML)	STM	\$	2.7825
00002473895	GLYCOPYRROLATE (0.4 MG/2 ML)	STM	\$	2.7825
00002473887	GLYCOPYRROLATE (4 MG/20 ML)	STM	\$	2.7825
00002382849	GLYCOPYRROLATE MULTIDOSE	OMG	\$	2.7825

HYOSCINE BUTYLBROMIDE

10 MG ORAL TABLET

00002512335	ACCEL-HYOSCINE	ACP	\$	0.2711
00000363812	BUSCOPAN	SAV	\$	0.3465

20 MG / ML INJECTION

00000363839	BUSCOPAN	SAV	\$	4.6360
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IPRATROPIUM BROMIDE

20 MCG / DOSE INHALATION METERED DOSE AEROSOL

00002247686	ATROVENT HFA	BOE	\$	0.1024
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250 MCG / ML INHALATION SOLUTION

00002126222	AA-IPRAVENT	AAP	\$	0.3155
00002231136	PMS-IPRATROPIUM	PMS	\$	0.3155

0.03 % NASAL SPRAY

00002239627	PMS-IPRATROPIUM	PMS	\$	0.9127
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12:00 AUTONOMIC DRUGS

12:08.08 ANTICHOLINERGIC AGENTS
(ANTIMUSCARINICS / ANTISPASMODICS)

IPRATROPIUM BROMIDE/ SALBUTAMOL SULFATE

0.2 MG / ML * 1 MG / ML (BASE) INHALATION SOLUTION

00002483394	IPRATROPIUM BROMIDE/SALBUTAMOL SULPHATE	JUN	\$	0.3226
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00002272695	TEVA-COMBO STERINEBS	TEV	\$	0.3226
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TIOTROPIUM BROMIDE MONOHYDRATE

2.5 MCG / DOSE INHALATION SOLUTION

00002435381	SPIRIVA RESPIMAT	BOE	\$	0.9112
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18 MCG INHALATION CAPSULE

00002246793	SPIRIVA	BOE	\$	1.3715
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UMECLIDIUM BROMIDE

62.5 MCG / DOSE INHALATION METERED INHALATION POWDER

00002423596	INCRUSE ELLIPTA	GSK	\$	1.6667
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12:00 AUTONOMIC DRUGS

12:12.04 SYMPATHOMIMETIC (ADRENERGIC) AGENTS
(ALPHA-ADRENERGIC AGONISTS)

MIDODRINE HCL

2.5 MG ORAL TABLET

00002278677	APO-MIDODRINE	APX	\$	0.1153
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00002517701	JAMP MIDODRINE	JPC	\$	0.1153
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00002473984	MAR-MIDODRINE	MAR	\$	0.1153
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00002533200	MIDODRINE	SNS	\$	0.1153
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5 MG ORAL TABLET

00002278685	APO-MIDODRINE	APX	\$	0.1921
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00002517728	JAMP MIDODRINE	JPC	\$	0.1921
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00002473992	MAR-MIDODRINE	MAR	\$	0.1921
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00002533219	MIDODRINE	SNS	\$	0.1921
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12:00 AUTONOMIC DRUGS

12:12.08.12 SYMPATHOMIMETIC (ADRENERGIC) AGENTS
BETA-ADRENERGIC AGONISTS
(SELECTIVE BETA 2-ADRENERGIC AGONISTS)

FORMOTEROL FUMARATE DIHYDRATE

6 MCG / DOSE INHALATION METERED INHALATION POWDER

00002237225	OXEZE TURBUHALER	AZC	\$	0.6095
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12 MCG / DOSE INHALATION METERED INHALATION POWDER

00002237224	OXEZE TURBUHALER	AZC	\$	0.8122
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SALBUTAMOL

100 MCG / DOSE INHALATION METERED DOSE AEROSOL

<input checked="" type="checkbox"/> 00002326450	TEVA-SALBUTAMOL HFA	TEV	\$	0.0250
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00002245669	APO-SALBUTAMOL HFA	APX	\$	0.0273
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00002419858	SALBUTAMOL HFA	SNS	\$	0.0273
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00002241497	VENTOLIN HFA	GSK	\$	0.0327
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12:00 AUTONOMIC DRUGS

12:12.08.12 SYMPATHOMIMETIC (ADRENERGIC) AGENTS
 BETA-ADRENERGIC AGONISTS
 (SELECTIVE BETA 2-ADRENERGIC AGONISTS)

SALBUTAMOL SULFATE

0.5 MG / ML (BASE)	INHALATION SOLUTION			
00002208245	PMS-SALBUTAMOL	PMS	\$	0.1492
1 MG / ML (BASE)	INHALATION SOLUTION			
00002208229	PMS-SALBUTAMOL	PMS	\$	0.1446
00001926934	TEVA-SALBUTAMOL STERINEBS P.F.	TEV	\$	0.1446
5 MG / ML (BASE)	INHALATION SOLUTION			
00002213486	VENTOLIN	GSK	\$	0.2630
2 MG / ML (BASE)	INHALATION UNIT DOSE SOLUTION			
00002208237	PMS-SALBUTAMOL POLYNEB	PMS	\$	0.2700
00002173360	TEVA-SALBUTAMOL STERINEBS P.F.	TEV	\$	0.2700

SALMETEROL XINAFOATE

50 MCG / DOSE (BASE)	INHALATION METERED INHALATION POWDER			
00002231129	SEREVENT DISKUS	GSK	\$	1.1138

TERBUTALINE SULFATE

0.5 MG / DOSE	INHALATION METERED INHALATION POWDER			
00000786616	BRICANYL TURBUHALER	AZC	\$	0.0896

12:00 AUTONOMIC DRUGS

12:12.12 SYMPATHOMIMETIC (ADRENERGIC) AGENTS
 (ALPHA- AND BETA-ADRENERGIC AGONISTS)

EPINEPHRINE

0.15 MG / SYR	INJECTION SYRINGE			
00000578657	EPIPEN JR	MYS	\$	88.5588
0.3 MG / SYR	INJECTION SYRINGE			
<input checked="" type="checkbox"/> 00002458446	EMERADE	VCL	\$	81.0000
<input checked="" type="checkbox"/> 00000509558	EPIPEN	MYS	\$	88.5588
0.5 MG / SYR	INJECTION SYRINGE			
00002458454	EMERADE	VCL	\$	81.0000

12:00 AUTONOMIC DRUGS

12:16 SYMPATHOLYTIC (ADRENERGIC BLOCKING) AGENTS

DIHYDROERGOTAMINE MESYLATE

4 MG / ML	NASAL SPRAY			
00002228947	MIGRANAL	STM	\$	18.6013
1 MG / ML	INJECTION			
00000027243	DIHYDROERGOTAMINE (DHE)	STM	\$	14.9896

12:00 AUTONOMIC DRUGS

12:20.04 SKELETAL MUSCLE RELAXANTS
(CENTRALLY ACTING SKELETAL MUSCLE RELAXANTS)

CYCLOBENZAPRINE HCL

RESTRICTED BENEFIT - Coverage is limited to 126 tablets per plan participant per year as an adjunct to rest and physical therapy for the treatment of acute muscle spasm.

10 MG ORAL TABLET

00002485419	AG-CYCLOBENZAPRINE	AGP	\$	0.1022
00002177145	APO-CYCLOBENZAPRINE	APX	\$	0.1022
00002348853	AURO-CYCLOBENZAPRINE	AUR	\$	0.1022
00002287064	CYCLOBENZAPRINE	SNS	\$	0.1022
00002424584	CYCLOBENZAPRINE	SIV	\$	0.1022
00002495422	FLEXERIL	ORI	\$	0.1022
00002357127	JAMP-CYCLOBENZAPRINE	JPC	\$	0.1022
00002212048	PMS-CYCLOBENZAPRINE	PMS	\$	0.1022
00002242079	RIVA-CYCLOBENZAPRINE	RIV	\$	0.1022
00002080052	TEVA-CYCLOBENZAPRINE	TEV	\$	0.1022

12:00 AUTONOMIC DRUGS

12:20.08 SKELETAL MUSCLE RELAXANTS
(DIRECT-ACTING SKELETAL MUSCLE RELAXANTS)

DANTROLENE SODIUM

25 MG ORAL CAPSULE

00001997602	DANTRIUM	PAL	\$	0.4630
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12:00 AUTONOMIC DRUGS

12:20.12 SKELETAL MUSCLE RELAXANTS
(GABA-DERIVATIVE SKELETAL MUSCLE RELAXANTS)

BACLOFEN

10 MG ORAL TABLET

00002139332	APO-BACLOFEN	APX	\$	0.1595
00002287021	BACLOFEN	SNS	\$	0.1595
00002088398	MYLAN-BACLOFEN	MYP	\$	0.1595
00002063735	PMS-BACLOFEN	PMS	\$	0.1595

20 MG ORAL TABLET

00002139391	APO-BACLOFEN	APX	\$	0.3104
00002287048	BACLOFEN	SNS	\$	0.3104
00002088401	MYLAN-BACLOFEN	MYP	\$	0.3104
00002063743	PMS-BACLOFEN	PMS	\$	0.3104

0.05 MG / ML INJECTION

00002457059	BACLOFEN INJECTION	TGT	\$	7.5160
00002413620	BACLOFEN INTRATHECAL	STM	\$	7.5160

0.5 MG / ML INJECTION

00002457067	BACLOFEN INJECTION	TGT	\$	5.6328
00002413639	BACLOFEN INTRATHECAL	STM	\$	5.6328

2 MG / ML INJECTION

00002457075	BACLOFEN INJECTION	TGT	\$	22.5334
00002413647	BACLOFEN INTRATHECAL	STM	\$	22.5334

12:00 AUTONOMIC DRUGS**12:92 MISCELLANEOUS AUTONOMIC DRUGS****VARENICLINE TARTRATE**

RESTRICTED BENEFIT - This product is a benefit in patients 18 years of age and older for smoking cessation treatment in conjunction with smoking cessation counseling. Coverage will be granted for a total of 12 weeks."

0.5 MG (BASE) ORAL TABLET

00002419882	APO-VARENICLINE	APX	\$	0.9237
00002426226	TEVA-VARENICLINE	TEV	\$	0.9237
00002291177	CHAMPIX	PFI	\$	1.8437

1 MG (BASE) ORAL TABLET

00002419890	APO-VARENICLINE	APX	\$	0.9235
00002426234	TEVA-VARENICLINE	TEV	\$	0.9235
00002291185	CHAMPIX	PFI	\$	1.8432

VARENICLINE TARTRATE/ VARENICLINE TARTRATE

RESTRICTED BENEFIT - This product is a benefit in patients 18 years of age and older for smoking cessation treatment in conjunction with smoking cessation counseling. Coverage will be granted for a total of 12 weeks.

0.5 MG * 1 MG ORAL TABLET

00002435675	APO-VARENICLINE (STARTER PACK)	APX	\$	0.9203
00002426781	TEVA-VARENICLINE (STARTER PACK)	TEV	\$	0.9203
00002298309	CHAMPIX (STARTER PACK)	PFI	\$	1.8370

20:00

Blood Formulation, Coagulation
and Thrombosis

20:00 BLOOD FORMULATION, COAGULATION AND THROMBOSIS

20:12.04.08 ANTITHROMBOTIC AGENTS

ANTICOAGULANTS

(COUMARIN DERIVATIVES)

WARFARIN SODIUM**1 MG ORAL TABLET**

00002242924	APO-WARFARIN	APX	\$	0.0780
00002242680	TARO-WARFARIN	TAR	\$	0.0780

2 MG ORAL TABLET

00002242925	APO-WARFARIN	APX	\$	0.0825
00002242681	TARO-WARFARIN	TAR	\$	0.0825

2.5 MG ORAL TABLET

00002242926	APO-WARFARIN	APX	\$	0.0660
00002242682	TARO-WARFARIN	TAR	\$	0.0660

3 MG ORAL TABLET

00002245618	APO-WARFARIN	APX	\$	0.1023
00002242683	TARO-WARFARIN	TAR	\$	0.1023

4 MG ORAL TABLET

00002242927	APO-WARFARIN	APX	\$	0.1023
00002242684	TARO-WARFARIN	TAR	\$	0.1023

5 MG ORAL TABLET

00002242928	APO-WARFARIN	APX	\$	0.0662
00002242685	TARO-WARFARIN	TAR	\$	0.0662

6 MG ORAL TABLET

00002242686	TARO-WARFARIN	TAR	\$	0.4298
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10 MG ORAL TABLET

00002242929	APO-WARFARIN	APX	\$	0.1187
00002242687	TARO-WARFARIN	TAR	\$	0.1187

20:00 BLOOD FORMULATION, COAGULATION AND THROMBOSIS

20:12.04.14 ANTITHROMBOTIC AGENTS

ANTICOAGULANTS

(DIRECT FACTOR XA INHIBITORS)

APIXABAN**2.5 MG ORAL TABLET**

00002487713	ACH-APIXABAN	AHI	\$	0.4084
00002530708	APIXABAN	SIV	\$	0.4084
00002487381	APO-APIXABAN	APX	\$	0.4084
00002486806	AURO-APIXABAN	AUR	\$	0.4084
00002528924	JAMP APIXABAN	JPC	\$	0.4084
00002529009	M-APIXABAN	MTR	\$	0.4084
00002492369	MAR-APIXABAN	MAR	\$	0.4084
00002495430	MINT-APIXABAN	MPI	\$	0.4084
00002492814	NAT-APIXABAN	NTP	\$	0.4084
00002526050	NRA-APIXABAN	NRA	\$	0.4084
00002489228	SANDOZ APIXABAN SDZ	SDZ	\$	0.4084
00002510464	TARO-APIXABAN	TAR	\$	0.4084
00002484994	TEVA-APIXABAN	TEV	\$	0.4084
00002377233	ELIQUIS	BMS	\$	1.6337

5 MG ORAL TABLET

00002487721	ACH-APIXABAN	AHI	\$	0.4084
00002530716	APIXABAN	SIV	\$	0.4084
00002487403	APO-APIXABAN	APX	\$	0.4084
00002486814	AURO-APIXABAN	AUR	\$	0.4084
00002528932	JAMP APIXABAN	JPC	\$	0.4084
00002529017	M-APIXABAN	MTR	\$	0.4084
00002492377	MAR-APIXABAN	MAR	\$	0.4084
00002495449	MINT-APIXABAN	MPI	\$	0.4084
00002492822	NAT-APIXABAN	NTP	\$	0.4084
00002526069	NRA-APIXABAN	NRA	\$	0.4084
00002489236	SANDOZ APIXABAN SDZ	SDZ	\$	0.4084
00002510472	TARO-APIXABAN	TAR	\$	0.4084
00002485001	TEVA-APIXABAN	TEV	\$	0.4084
00002397714	ELIQUIS	BMS	\$	1.6337

RIVAROXABAN**2.5 MG ORAL TABLET**

00002541734	APO-RIVAROXABAN	APX	\$	0.3550
00002527537	PMS-RIVAROXABAN	PMS	\$	0.3550
00002524503	REDDY-RIVAROXABAN	DRL	\$	0.3550
00002541467	RIVAROXABAN	SIV	\$	0.3550
00002537877	SANDOZ RIVAROXABAN	SDZ	\$	0.3550
00002526786	TARO-RIVAROXABAN	TAR	\$	0.3550
00002480808	XARELTO	BAI	\$	1.4200

10 MG ORAL TABLET

00002470497	APO-RIVAROXABAN	APX	\$	0.7175
00002512041	PMS-RIVAROXABAN	PMS	\$	0.7175
00002472414	REDDY-RIVAROXABAN	DRL	\$	0.7175
00002541475	RIVAROXABAN	SIV	\$	0.7175
00002482223	SANDOZ RIVAROXABAN	SDZ	\$	0.7175
00002483807	TARO-RIVAROXABAN	TAR	\$	0.7175
00002507196	TEVA-RIVAROXABAN	TEV	\$	0.7175
00002316986	XARELTO	BAI	\$	2.8700

20:00 BLOOD FORMULATION, COAGULATION AND THROMBOSIS

20:12.04.14 ANTITHROMBOTIC AGENTS
 ANTICOAGULANTS
 (DIRECT FACTOR XA INHIBITORS)

RIVAROXABAN**15 MG ORAL TABLET**

00002470500	APO-RIVAROXABAN	APX	\$	0.7175
00002512068	PMS-RIVAROXABAN	PMS	\$	0.7175
00002472430	REDDY-RIVAROXABAN	DRL	\$	0.7175
00002541483	RIVAROXABAN	SIV	\$	0.7175
00002482231	SANDOZ RIVAROXABAN	SDZ	\$	0.7175
00002483815	TARO-RIVAROXABAN	TAR	\$	0.7175
00002507218	TEVA-RIVAROXABAN	TEV	\$	0.7175
00002378604	XARELTO	BAI	\$	2.8700

20 MG ORAL TABLET

00002470519	APO-RIVAROXABAN	APX	\$	0.7175
00002512076	PMS-RIVAROXABAN	PMS	\$	0.7175
00002472422	REDDY-RIVAROXABAN	DRL	\$	0.7175
00002541491	RIVAROXABAN	SIV	\$	0.7175
00002482258	SANDOZ RIVAROXABAN	SDZ	\$	0.7175
00002483823	TARO-RIVAROXABAN	TAR	\$	0.7175
00002507226	TEVA-RIVAROXABAN	TEV	\$	0.7175
00002378612	XARELTO	BAI	\$	2.8700

20:00 BLOOD FORMULATION, COAGULATION AND THROMBOSIS

20:12.04.16 ANTITHROMBOTIC AGENTS
 ANTICOAGULANTS
 (HEPARINS)

DALTEPARIN SODIUM**25,000 IU / ML INJECTION**

00002231171	FRAGMIN	PFI	\$	45.3053
2,500 IU / SYR INJECTION SYRINGE				
00002132621	FRAGMIN (0.2 ML SYRINGE)	PFI	\$	5.7390
3,500 IU / SYR INJECTION SYRINGE				
00002430789	FRAGMIN (0.28 ML SYRINGE)	PFI	\$	8.0330
5,000 IU / SYR INJECTION SYRINGE				
00002132648	FRAGMIN (0.2 ML SYRINGE)	PFI	\$	11.4770
7,500 IU / SYR INJECTION SYRINGE				
00002352648	FRAGMIN (0.3 ML SYRINGE)	PFI	\$	17.2140
10,000 IU / SYR INJECTION SYRINGE				
00002352656	FRAGMIN (0.4 ML SYRINGE)	PFI	\$	22.9540
12,500 IU / SYR INJECTION SYRINGE				
00002352664	FRAGMIN (0.5 ML SYRINGE)	PFI	\$	28.6940
15,000 IU / SYR INJECTION SYRINGE				
00002352672	FRAGMIN (0.6 ML SYRINGE)	PFI	\$	34.4320
16,500 IU / SYR INJECTION SYRINGE				
00002494582	FRAGMIN	PFI	\$	37.8760
18,000 IU / SYR INJECTION SYRINGE				
00002352680	FRAGMIN (0.72 ML SYRINGE)	PFI	\$	41.3180

20:00 BLOOD FORMULATION, COAGULATION AND THROMBOSIS

20:12.04.16 ANTITHROMBOTIC AGENTS

ANTICOAGULANTS

(HEPARINS)

ENOXAPARIN SODIUM**100 MG / ML INJECTION**

00002509121 REDESCA (3 ML VIAL) VLP \$ 16.5400

30 MG / SYR INJECTION SYRINGE 00002532247 ELONOX (0.3 ML SYRINGE) FKC \$ 4.9124 00002506459 NOROMBY (0.3 ML SYRINGE) JUN \$ 4.9124 00002507501 INCLUNOX (0.3 ML SYRINGE) SDZ \$ 4.9620 00002509075 REDESCA (0.3 ML SYRINGE) VLP \$ 4.9620**40 MG / SYR INJECTION SYRINGE** 00002532255 ELONOX (0.4 ML SYRINGE) FKC \$ 6.5498 00002506467 NOROMBY (0.4 ML SYRINGE) JUN \$ 6.5498 00002507528 INCLUNOX (0.4 ML SYRINGE) SDZ \$ 6.6160 00002509083 REDESCA (0.4 ML SYRINGE) VLP \$ 6.6160**60 MG / SYR INJECTION SYRINGE** 00002532263 ELONOX (0.6 ML SYRINGE) FKC \$ 9.8248 00002506475 NOROMBY (0.6 ML SYRINGE) JUN \$ 9.8248 00002507536 INCLUNOX (0.6 ML SYRINGE) SDZ \$ 9.9240 00002509091 REDESCA (0.6 ML SYRINGE) VLP \$ 9.9240**80 MG / SYR INJECTION SYRINGE** 00002532271 ELONOX (0.8 ML SYRINGE) FKC \$ 13.0997 00002506483 NOROMBY (0.8 ML SYRINGE) JUN \$ 13.0997 00002507544 INCLUNOX (0.8 ML SYRINGE) SDZ \$ 13.2320 00002509105 REDESCA (0.8 ML SYRINGE) VLP \$ 13.2320**100 MG / SYR INJECTION SYRINGE** 00002532298 ELONOX (1 ML SYRINGE) FKC \$ 16.3746 00002506491 NOROMBY (1 ML SYRINGE) JUN \$ 16.3746 00002507552 INCLUNOX (1 ML SYRINGE) SDZ \$ 16.5400 00002509113 REDESCA (1 ML SYRINGE) VLP \$ 16.5400**120 MG / SYR INJECTION SYRINGE** 00002532301 ELONOX HP (0.8 ML SYRINGE) FKC \$ 19.6495 00002506505 NOROMBY HP JUN \$ 19.6495 00002507560 INCLUNOX HP (0.8 ML SYRINGE) SDZ \$ 19.8480 00002509148 REDESCA HP (0.8 ML SYRINGE) VLP \$ 19.8480**150 MG / SYR INJECTION SYRINGE** 00002532328 ELONOX HP (1 ML SYRINGE) FKC \$ 24.5619 00002506513 NOROMBY HP JUN \$ 24.5619 00002507579 INCLUNOX HP (1 ML SYRINGE) SDZ \$ 24.8100 00002509156 REDESCA HP (1 ML SYRINGE) VLP \$ 24.8100**HEPARIN SODIUM****1,000 UNIT / ML INJECTION**

00000453811 HEPARIN LEO LEO \$ 0.5818

100 UNIT / ML INJECTION LOCK FLUSH

00000727520 HEPARIN LEO LEO \$ 0.4948

NADROPARIN CALCIUM**9,500 IU / SYR INJECTION SYRINGE**

00002236913 FRAXIPARINE (0.3 ML SYR) APC \$ 9.0580

19,000 IU / SYR INJECTION SYRINGE

00002240114 FRAXIPARINE FORTE (1 ML SYR) APC \$ 18.1170

20:00 BLOOD FORMULATION, COAGULATION AND THROMBOSIS

20:12.04.16 ANTITHROMBOTIC AGENTS

ANTICOAGULANTS

(HEPARINS)

TINZAPARIN SODIUM**10,000 IU / ML INJECTION**

00002167840 INNOHEP LEO \$ 19.8939

20,000 IU / ML INJECTION

00002229515 INNOHEP LEO \$ 40.4279

2,500 IU / SYR INJECTION SYRINGE

00002229755 INNOHEP (0.25 ML SYRINGE) LEO \$ 5.0194

3,500 IU / SYR INJECTION SYRINGE

00002358158 INNOHEP (0.35 ML SYRINGE) LEO \$ 7.0221

4,500 IU / SYR INJECTION SYRINGE

00002358166 INNOHEP (0.45 ML SYRINGE) LEO \$ 9.0305

8,000 IU / SYR INJECTION SYRINGE

00002429462 INNOHEP (0.4 ML SYRINGE) LEO \$ 16.4005

10,000 IU / SYR INJECTION SYRINGE

00002231478 INNOHEP (0.5 ML SYRINGE) LEO \$ 20.4878

12,000 IU / SYR INJECTION SYRINGE

00002429470 INNOHEP (0.6 ML SYRINGE) LEO \$ 24.6007

14,000 IU / SYR INJECTION SYRINGE

00002358174 INNOHEP (0.7 ML SYRINGE) LEO \$ 28.7009

16,000 IU / SYR INJECTION SYRINGE

00002429489 INNOHEP (0.8 ML SYRINGE) LEO \$ 32.8010

18,000 IU / SYR INJECTION SYRINGE

00002358182 INNOHEP (0.9 ML SYRINGE) LEO \$ 36.8951

20:00 BLOOD FORMULATION, COAGULATION AND THROMBOSIS

20:12.04.92 ANTITHROMBOTIC AGENTS

ANTICOAGULANTS

(MISCELLANEOUS ANTICOAGULANTS)

FONDAPARINUX SODIUM**2.5 MG / SYR INJECTION SYRINGE**

00002406853 FONDAPARINUX SODIUM (0.5 ML SYRINGE) DRL \$ 9.8620

00002245531 ARIXTRA (0.5 ML SYRINGE) APC \$ 12.2124

7.5 MG / SYR INJECTION SYRINGE

00002406896 FONDAPARINUX SODIUM (0.6 ML SYRINGE) DRL \$ 17.5000

00002258056 ARIXTRA (0.6 ML SYRINGE) APC \$ 21.6713

20:00 BLOOD FORMULATION, COAGULATION AND THROMBOSIS**20:12.18 ANTITHROMBOTIC AGENTS
(PLATELET AGGREGATION INHIBITORS)****CLOPIDOGREL BISULFATE**

75 MG (BASE) ORAL TABLET

00002252767	APO-CLOPIDOGREL	APX	\$	0.2631
00002416387	AURO-CLOPIDOGREL	AUR	\$	0.2631
00002385813	CLOPIDOGREL	SIV	\$	0.2631
00002400553	CLOPIDOGREL	SNS	\$	0.2631
00002415550	JAMP-CLOPIDOGREL	JPC	\$	0.2631
00002502283	M-CLOPIDOGREL	MTR	\$	0.2631
00002422255	MAR-CLOPIDOGREL	MAR	\$	0.2631
00002408910	MINT-CLOPIDOGREL	MPI	\$	0.2631
00002482037	NRA-CLOPIDOGREL	NRA	\$	0.2631
00002348004	PMS-CLOPIDOGREL	PMS	\$	0.2631
00002379813	RAN-CLOPIDOGREL	RAN	\$	0.2631
00002293161	TEVA-CLOPIDOGREL	TEV	\$	0.2631
00002238682	PLAVIX	SAV	\$	2.8180

DIPYRIDAMOLE/ ASA

200 MG * 25 MG ORAL CAPSULE

00002471051	TARO-DIPYRIDAMOLE/ASA	TAR	\$	0.6815
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TICAGRELOR

RESTRICTED BENEFIT - This product is a benefit for the treatment of Acute Coronary Syndrome, defined as unstable angina or myocardial infarction when initiated in hospital and prescribed by a Specialist in Cardiology, Cardiac Surgery, Cardiovascular & Thoracic Surgery, Internal Medicine or General Surgery. Treatment must be in combination with low dose ASA.

(Refer to Section 3 - Criteria for Special Authorization of Select Drug Products of the Alberta Drug Benefit List for eligibility when the initiating prescriber is not a Specialist in Cardiology, Cardiac Surgery, Cardiovascular & Thoracic Surgery, Internal Medicine or General Surgery.)

90 MG ORAL TABLET

00002482630	APO-TICAGRELOR	APX	\$	0.3960
00002529769	M-TICAGRELOR	MTR	\$	0.3960
00002492598	TARO-TICAGRELOR	TAR	\$	0.3960
00002368544	BRILINTA	AZC	\$	1.7041

20:00 BLOOD FORMULATION, COAGULATION AND THROMBOSIS**20:24 HEMORRHOLOGIC AGENTS****PENTOXIFYLLINE**

400 MG ORAL SUSTAINED-RELEASE TABLET

00002230090	PENTOXIFYLLINE SR	AAP	\$	0.9620
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20:00 BLOOD FORMULATION, COAGULATION AND THROMBOSIS

20:28.16 ANTIHEMORRHAGIC AGENTS
(HEMOSTATICS)

TRANEXAMIC ACID

500 MG ORAL TABLET

00002409097	GD-TRANEXAMIC ACID	GMD	\$	0.2967
00002496232	MAR-TRANEXAMIC ACID	MAR	\$	0.2967
00002401231	TRANEXAMIC ACID	STM	\$	0.2967
00002519194	TRANEXAMIC ACID	JPC	\$	0.2967

24:00

Cardiovascular Drugs

24:00 CARDIOVASCULAR DRUGS

24:04.04.04 CARDIAC DRUGS
 ANTIARRHYTHMIC AGENTS
 (CLASS IA ANTIARRYTHMICS)

DISOPYRAMIDE

100 MG ORAL CAPSULE

00002224801	RYTHMODAN	CAG	\$	0.3218
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24:00 CARDIOVASCULAR DRUGS

24:04.04.08 CARDIAC DRUGS
 ANTIARRHYTHMIC AGENTS
 (CLASS IB ANTIARRYTHMICS)

MEXILETINE HCL

100 MG ORAL CAPSULE

00002230359	NOVO-MEXILETINE	TEV	\$	1.6444
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200 MG ORAL CAPSULE

00002230360	NOVO-MEXILETINE	TEV	\$	2.0973
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24:00 CARDIOVASCULAR DRUGS

24:04.04.12 CARDIAC DRUGS
 ANTIARRHYTHMIC AGENTS
 (CLASS IC ANTIARRYTHMICS)

FLECAINIDE ACETATE

50 MG ORAL TABLET

00002275538	APO-FLECAINIDE	APX	\$	0.1389
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00002459957	AURO-FLECAINIDE	AUR	\$	0.1389
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00002534800	FLECAINIDE	SNS	\$	0.1389
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00002493705	JAMP FLECAINIDE	JPC	\$	0.1389
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00002476177	MAR-FLECAINIDE	MAR	\$	0.1389
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00002530066	NRA-FLECAINIDE	NRA	\$	0.1389
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100 MG ORAL TABLET

00002275546	APO-FLECAINIDE	APX	\$	0.2779
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00002459965	AURO-FLECAINIDE	AUR	\$	0.2779
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00002534819	FLECAINIDE	SNS	\$	0.2779
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00002493713	JAMP FLECAINIDE	JPC	\$	0.2779
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00002476185	MAR-FLECAINIDE	MAR	\$	0.2779
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00002530074	NRA-FLECAINIDE	NRA	\$	0.2779
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PROPAFENONE HCL

150 MG ORAL TABLET

00002243324	APO-PROPAFENONE	APX	\$	0.2965
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00002457172	MYLAN-PROPAFENONE	MYP	\$	0.2965
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00002343053	PROPAFENONE	SNS	\$	0.2965
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00000603708	RYTHMOL	BGP	\$	1.3695
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300 MG ORAL TABLET

00002243325	APO-PROPAFENONE	APX	\$	0.5227
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00002457164	MYLAN-PROPAFENONE	MYP	\$	0.5227
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00002343061	PROPAFENONE	SNS	\$	0.5227
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00000603716	RYTHMOL	BGP	\$	2.4140
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24:00 CARDIOVASCULAR DRUGS

24:04.04.20 **CARDIAC DRUGS**
 ANTIARRHYTHMIC AGENTS
 (CLASS III ANTIARRYTHMICS)

AMIODARONE HCL

100 MG ORAL TABLET

00002292173	PMS-AMIODARONE	PMS	\$	0.8593
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200 MG ORAL TABLET

00002364336	AMIODARONE	SNS	\$	0.3706
00002385465	AMIODARONE	SIV	\$	0.3706
00002246194	APO-AMIODARONE	APX	\$	0.3706
00002531844	JAMP AMIODARONE	JPC	\$	0.3706
00002242472	PMS-AMIODARONE	PMS	\$	0.3706
00002247217	RIVA-AMIODARONE	RIV	\$	0.3706
00002243836	SANDOZ AMIODARONE	SDZ	\$	0.3706
00002239835	TEVA-AMIODARONE	TEV	\$	0.3706

24:00 CARDIOVASCULAR DRUGS

24:04.08 **CARDIAC DRUGS**
 (CARDIOTONIC AGENTS)

DIGOXIN

0.0625 MG ORAL TABLET

00002498502	JAMP DIGOXIN	JPC	\$	0.1850
00002335700	PMS-DIGOXIN	PMS	\$	0.1850

0.125 MG ORAL TABLET

00002498510	JAMP DIGOXIN	JPC	\$	0.1751
00002335719	PMS-DIGOXIN	PMS	\$	0.1751

0.05 MG / ML ORAL SOLUTION

00002242320	PMS-DIGOXIN	PMS	\$	1.6732
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24:00 CARDIOVASCULAR DRUGS

24:06.04 **ANTILIPEMIC AGENTS**
 (BILE ACID SEQUESTRANTS)

CHOLESTYRAMINE RESIN

4 G ORAL POWDER PACKET

00002478595	JAMP-CHOLESTYRAMINE	JPC	\$	0.3693
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COLESEVELAM HCL

625 MG ORAL TABLET

<input checked="" type="checkbox"/> 00002373955	LODALIS	VCL	\$	1.2933
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3.75 G ORAL POWDER PACKET

00002432463	LODALIS	VCL	\$	7.7598
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COLESTIPOL HCL

1 G ORAL TABLET

00002132680	COLESTID	PFI	\$	0.3775
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24:00 CARDIOVASCULAR DRUGS

24:06.05 ANTILIPEMIC AGENTS
(CHOLESTEROL ABSORPTION INHIBITORS)

EZETIMIBE

10 MG ORAL TABLET

00002425610	ACH-EZETIMIBE	AHI	\$	0.1811
00002475898	AG-EZETIMIBE	AGP	\$	0.1811
00002427826	APO-EZETIMIBE	APX	\$	0.1811
00002469286	AURO-EZETIMIBE	AUR	\$	0.1811
00002429659	EZETIMIBE	SIV	\$	0.1811
00002431300	EZETIMIBE	SNS	\$	0.1811
00002460750	GLN-EZETIMIBE	GLM	\$	0.1811
00002423235	JAMP-EZETIMIBE	JPC	\$	0.1811
00002467437	M-EZETIMIBE	MTR	\$	0.1811
00002422662	MAR-EZETIMIBE	MAR	\$	0.1811
00002423243	MINT-EZETIMIBE	MPI	\$	0.1811
00002481669	NRA-EZETIMIBE	NRA	\$	0.1811
00002416409	PMS-EZETIMIBE	PMS	\$	0.1811
00002419548	RAN-EZETIMIBE	RAN	\$	0.1811
00002416778	SANDOZ EZETIMIBE	SDZ	\$	0.1811
00002354101	TEVA-EZETIMIBE	TEV	\$	0.1811
00002247521	EZETROL	ORC	\$	1.9900

24:00 CARDIOVASCULAR DRUGS

24:06.06 ANTILIPEMIC AGENTS
(FIBRIC ACID DERIVATIVES)

BEZAFIBRATE

400 MG ORAL SUSTAINED-RELEASE TABLET

00002453312	JAMP-BEZAFIBRATE	JPC	\$	1.7460
00002083523	BEZALIP	ALR	\$	2.4205

FENOFIBRATE

100 MG ORAL TABLET

00002246859	AA-FENO-SUPER	AAP	\$	0.9883
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67 MG ORAL CAPSULE

00002243180	AA-FENO-MICRO	AAP	\$	0.5758
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200 MG ORAL CAPSULE

00002239864	AA-FENO-MICRO	AAP	\$	0.9257
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160 MG ORAL CAPSULE/TABLET

00002246860	AA-FENO-SUPER (TABLET)	AAP	\$	1.0022
00002241602	LIPIDIL SUPRA (TABLET)	BGP	\$	1.3968

GEMFIBROZIL

600 MG ORAL TABLET

00002142074	TEVA-GEMFIBROZIL	TEV	\$	0.6911
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24:00 CARDIOVASCULAR DRUGS

24:06.08 ANTILIPEMIC AGENTS
(HMG-COA REDUCTASE INHIBITORS)

ATORVASTATIN CALCIUM**10 MG (BASE) ORAL TABLET**

00002457741	ACH-ATORVASTATIN	AHI	\$	0.1743
00002478145	AG-ATORVASTATIN	AGP	\$	0.1743
00002295261	APO-ATORVASTATIN	APX	\$	0.1743
00002348705	ATORVASTATIN	SNS	\$	0.1743
00002475022	ATORVASTATIN	RIV	\$	0.1743
00002411350	ATORVASTATIN-10	SIV	\$	0.1743
00002407256	AURO-ATORVASTATIN	AUR	\$	0.1743
00002504197	JAMP ATORVASTATIN CALCIUM	JPC	\$	0.1743
00002391058	JAMP-ATORVASTATIN	JPC	\$	0.1743
00002471167	M-ATORVASTATIN	MTR	\$	0.1743
00002454017	MAR-ATORVASTATIN	MAR	\$	0.1743
00002479508	MINT-ATORVASTATIN	MPI	\$	0.1743
00002392933	MYLAN-ATORVASTATIN	MYP	\$	0.1743
00002476517	NRA-ATORVASTATIN	NRA	\$	0.1743
00002477149	PMS-ATORVASTATIN	PMS	\$	0.1743
00002507234	PMSC-ATORVASTATIN	PMS	\$	0.1743
00002521555	PRZ-ATORVASTATIN	PCI	\$	0.1743
00002417936	REDDY-ATORVASTATIN	DRL	\$	0.1743
00002324946	SANDOZ ATORVASTATIN	SDZ	\$	0.1743
00002313707	TARO-ATORVASTATIN	SPG	\$	0.1743
00002310899	TEVA-ATORVASTATIN	TEV	\$	0.1743
00002230711	LIPITOR	BGP	\$	2.0489

20 MG (BASE) ORAL TABLET

00002457768	ACH-ATORVASTATIN	AHI	\$	0.2179
00002478153	AG-ATORVASTATIN	AGP	\$	0.2179
00002295288	APO-ATORVASTATIN	APX	\$	0.2179
00002348713	ATORVASTATIN	SNS	\$	0.2179
00002475030	ATORVASTATIN	RIV	\$	0.2179
00002411369	ATORVASTATIN-20	SIV	\$	0.2179
00002407264	AURO-ATORVASTATIN	AUR	\$	0.2179
00002504200	JAMP ATORVASTATIN CALCIUM	JPC	\$	0.2179
00002391066	JAMP-ATORVASTATIN	JPC	\$	0.2179
00002471175	M-ATORVASTATIN	MTR	\$	0.2179
00002454025	MAR-ATORVASTATIN	MAR	\$	0.2179
00002479516	MINT-ATORVASTATIN	MPI	\$	0.2179
00002392941	MYLAN-ATORVASTATIN	MYP	\$	0.2179
00002476525	NRA-ATORVASTATIN	NRA	\$	0.2179
00002477157	PMS-ATORVASTATIN	PMS	\$	0.2179
00002507242	PMSC-ATORVASTATIN	PMS	\$	0.2179
00002521563	PRZ-ATORVASTATIN	PCI	\$	0.2179
00002417944	REDDY-ATORVASTATIN	DRL	\$	0.2179
00002324954	SANDOZ ATORVASTATIN	SDZ	\$	0.2179
00002313715	TARO-ATORVASTATIN	SPG	\$	0.2179
00002310902	TEVA-ATORVASTATIN	TEV	\$	0.2179
00002230713	LIPITOR	BGP	\$	2.5611

24:00 CARDIOVASCULAR DRUGS

24:06.08 ANTILIPEMIC AGENTS
(HMG-COA REDUCTASE INHIBITORS)

ATORVASTATIN CALCIUM**40 MG (BASE) ORAL TABLET**

00002457776	ACH-ATORVASTATIN	AHI	\$	0.2342
00002478161	AG-ATORVASTATIN	AGP	\$	0.2342
00002295296	APO-ATORVASTATIN	APX	\$	0.2342
00002348721	ATORVASTATIN	SNS	\$	0.2342
00002475049	ATORVASTATIN	RIV	\$	0.2342
00002411377	ATORVASTATIN-40	SIV	\$	0.2342
00002407272	AURO-ATORVASTATIN	AUR	\$	0.2342
00002504219	JAMP ATORVASTATIN CALCIUM	JPC	\$	0.2342
00002391074	JAMP-ATORVASTATIN	JPC	\$	0.2342
00002471183	M-ATORVASTATIN	MTR	\$	0.2342
00002454033	MAR-ATORVASTATIN	MAR	\$	0.2342
00002479524	MINT-ATORVASTATIN	MPI	\$	0.2342
00002392968	MYLAN-ATORVASTATIN	MYP	\$	0.2342
00002476533	NRA-ATORVASTATIN	NRA	\$	0.2342
00002477165	PMS-ATORVASTATIN	PMS	\$	0.2342
00002507250	PMSC-ATORVASTATIN	PMS	\$	0.2342
00002521571	PRZ-ATORVASTATIN	PCI	\$	0.2342
00002417952	REDDY-ATORVASTATIN	DRL	\$	0.2342
00002324962	SANDOZ ATORVASTATIN	SDZ	\$	0.2342
00002313723	TARO-ATORVASTATIN	SPG	\$	0.2342
00002310910	TEVA-ATORVASTATIN	TEV	\$	0.2342
00002230714	LIPITOR	BGP	\$	2.7528

80 MG (BASE) ORAL TABLET

00002457784	ACH-ATORVASTATIN	AHI	\$	0.2342
00002478188	AG-ATORVASTATIN	AGP	\$	0.2342
00002295318	APO-ATORVASTATIN	APX	\$	0.2342
00002348748	ATORVASTATIN	SNS	\$	0.2342
00002475057	ATORVASTATIN	RIV	\$	0.2342
00002411385	ATORVASTATIN-80	SIV	\$	0.2342
00002407280	AURO-ATORVASTATIN	AUR	\$	0.2342
00002504235	JAMP ATORVASTATIN CALCIUM	JPC	\$	0.2342
00002391082	JAMP-ATORVASTATIN	JPC	\$	0.2342
00002471191	M-ATORVASTATIN	MTR	\$	0.2342
00002454041	MAR-ATORVASTATIN	MAR	\$	0.2342
00002479532	MINT-ATORVASTATIN	MPI	\$	0.2342
00002392976	MYLAN-ATORVASTATIN	MYP	\$	0.2342
00002476541	NRA-ATORVASTATIN	NRA	\$	0.2342
00002507269	PMSC-ATORVASTATIN	PMS	\$	0.2342
00002521598	PRZ-ATORVASTATIN	PCI	\$	0.2342
00002417960	REDDY-ATORVASTATIN	DRL	\$	0.2342
00002324970	SANDOZ ATORVASTATIN	SDZ	\$	0.2342
00002313758	TARO-ATORVASTATIN	SPG	\$	0.2342
00002310929	TEVA-ATORVASTATIN	TEV	\$	0.2342
00002243097	LIPITOR	BGP	\$	2.7529

24:00 CARDIOVASCULAR DRUGS
**24:06.08 ANTILIPEMIC AGENTS
(HMG-COA REDUCTASE INHIBITORS)**
FLUVASTATIN SODIUM

20 MG (BASE) ORAL CAPSULE

00002299224	TEVA-FLUVASTATIN	TEV	\$ 0.1354	\$	0.6882
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MAC pricing will be applied based on the LCA Price for rosuvastatin calcium 1 x 10 mg tablet or the LCA Price of atorvastatin 1 x 20 mg tablet whichever is lower.

40 MG (BASE) ORAL CAPSULE

00002299232	TEVA-FLUVASTATIN	TEV	\$ 0.1354	\$	0.9671
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MAC pricing will be applied based on the LCA Price for rosuvastatin calcium 1 x 10 mg tablet or the LCA Price of atorvastatin 1 x 20 mg tablet whichever is lower.

LOVASTATIN

20 MG ORAL TABLET

00002248572	ACT LOVASTATIN	TEV	\$ 0.1354	\$	1.0846
00002220172	LOVASTATIN	AAP	\$ 0.1354	\$	1.0846

MAC pricing will be applied based on the LCA Price for rosuvastatin calcium 1 x 10 mg tablet or the LCA Price of atorvastatin 1 x 20 mg tablet whichever is lower.

40 MG ORAL TABLET

00002248573	ACT LOVASTATIN	TEV	\$ 0.1354	\$	1.9812
00002220180	LOVASTATIN	AAP	\$ 0.1354	\$	1.9812

MAC pricing will be applied based on the LCA Price for rosuvastatin calcium 1 x 10 mg tablet or the LCA Price of atorvastatin 1 x 20 mg tablet whichever is lower.

24:00 CARDIOVASCULAR DRUGS**24:06.08 ANTILIPEMIC AGENTS
(HMG-COA REDUCTASE INHIBITORS)****PRAVASTATIN SODIUM****10 MG ORAL TABLET**

00002440644	ACH-PRAVASTATIN	AHI	\$ 0.1354	\$	0.2916
00002476142	AG-PRAVASTATIN	AGP	\$ 0.1354	\$	0.2916
00002243506	APO-PRAVASTATIN	APX	\$ 0.1354	\$	0.2916
00002330954	JAMP-PRAVASTATIN	JPC	\$ 0.1354	\$	0.2916
00002476274	M-PRAVASTATIN	MTR	\$ 0.1354	\$	0.2916
00002432048	MAR-PRAVASTATIN	MAR	\$ 0.1354	\$	0.2916
00002317451	MINT-PRAVASTATIN	MPI	\$ 0.1354	\$	0.2916
00002247655	PMS-PRAVASTATIN	PMS	\$ 0.1354	\$	0.2916
00002356546	PRAVASTATIN	SNS	\$ 0.1354	\$	0.2916
00002389703	PRAVASTATIN	SIV	\$ 0.1354	\$	0.2916
00002284421	RAN-PRAVASTATIN	RAN	\$ 0.1354	\$	0.2916
00002468700	SANDOZ PRAVASTATIN	SDZ	\$ 0.1354	\$	0.2916
00002247008	TEVA-PRAVASTATIN	TEV	\$ 0.1354	\$	0.2916

MAC pricing will be applied based on the LCA Price for rosuvastatin calcium 1 x 10 mg tablet or the LCA Price of atorvastatin 1 x 20 mg tablet whichever is lower.

20 MG ORAL TABLET

00002440652	ACH-PRAVASTATIN	AHI	\$ 0.1354	\$	0.3440
00002476150	AG-PRAVASTATIN	AGP	\$ 0.1354	\$	0.3440
00002243507	APO-PRAVASTATIN	APX	\$ 0.1354	\$	0.3440
00002330962	JAMP-PRAVASTATIN	JPC	\$ 0.1354	\$	0.3440
00002476282	M-PRAVASTATIN	MTR	\$ 0.1354	\$	0.3440
00002432056	MAR-PRAVASTATIN	MAR	\$ 0.1354	\$	0.3440
00002317478	MINT-PRAVASTATIN	MPI	\$ 0.1354	\$	0.3440
00002247656	PMS-PRAVASTATIN	PMS	\$ 0.1354	\$	0.3440
00002356554	PRAVASTATIN	SNS	\$ 0.1354	\$	0.3440
00002389738	PRAVASTATIN	SIV	\$ 0.1354	\$	0.3440
00002284448	RAN-PRAVASTATIN	RAN	\$ 0.1354	\$	0.3440
00002468719	SANDOZ PRAVASTATIN	SDZ	\$ 0.1354	\$	0.3440
00002247009	TEVA-PRAVASTATIN	TEV	\$ 0.1354	\$	0.3440

MAC pricing will be applied based on the LCA Price for rosuvastatin calcium 1 x 10 mg tablet or the LCA Price of atorvastatin 1 x 20 mg tablet whichever is lower.

40 MG ORAL TABLET

00002440660	ACH-PRAVASTATIN	AHI	\$ 0.1354	\$	0.4143
00002476169	AG-PRAVASTATIN	AGP	\$ 0.1354	\$	0.4143
00002243508	APO-PRAVASTATIN	APX	\$ 0.1354	\$	0.4143
00002330970	JAMP-PRAVASTATIN	JPC	\$ 0.1354	\$	0.4143
00002476290	M-PRAVASTATIN	MTR	\$ 0.1354	\$	0.4143
00002432064	MAR-PRAVASTATIN	MAR	\$ 0.1354	\$	0.4143
00002317486	MINT-PRAVASTATIN	MPI	\$ 0.1354	\$	0.4143
00002247657	PMS-PRAVASTATIN	PMS	\$ 0.1354	\$	0.4143
00002356562	PRAVASTATIN	SNS	\$ 0.1354	\$	0.4143
00002389746	PRAVASTATIN	SIV	\$ 0.1354	\$	0.4143
00002284456	RAN-PRAVASTATIN	RAN	\$ 0.1354	\$	0.4143
00002468727	SANDOZ PRAVASTATIN	SDZ	\$ 0.1354	\$	0.4143
00002247010	TEVA-PRAVASTATIN	TEV	\$ 0.1354	\$	0.4143

MAC pricing will be applied based on the LCA Price for rosuvastatin calcium 1 x 10 mg tablet or the LCA Price of atorvastatin 1 x 20 mg tablet whichever is lower.

24:00 CARDIOVASCULAR DRUGS

24:06.08

ANTILIPEMIC AGENTS**(HMG-COA REDUCTASE INHIBITORS)****ROSUVASTATIN CALCIUM****5 MG (BASE) ORAL TABLET**

00002438917	ACH-ROSUVASTATIN	AHI	\$	0.1284
00002477033	AG-ROSUVASTATIN	AGP	\$	0.1284
00002337975	APO-ROSUVASTATIN	APX	\$	0.1284
00002442574	AURO-ROSUVASTATIN	AUR	\$	0.1284
00002498332	JAMP ROSUVASTATIN CALCIUM	JPC	\$	0.1284
00002391252	JAMP-ROSUVASTATIN	JPC	\$	0.1284
00002496534	M-ROSUVASTATIN	MTR	\$	0.1284
00002413051	MAR-ROSUVASTATIN	MAR	\$	0.1284
00002397781	MINT-ROSUVASTATIN	MPI	\$	0.1284
00002477483	NRA-ROSUVASTATIN	NRA	\$	0.1284
00002536595	NRA-ROSUVASTATIN	NRA	\$	0.1284
00002378523	PMS-ROSUVASTATIN	PMS	\$	0.1284
00002505576	PRZ-ROSUVASTATIN	PCI	\$	0.1284
00002405628	ROSUVASTATIN	SNS	\$	0.1284
00002411628	ROSUVASTATIN-5	SIV	\$	0.1284
00002338726	SANDOZ ROSUVASTATIN	SDZ	\$	0.1284
00002382644	TARO-ROSUVASTATIN	SPG	\$	0.1284
00002354608	TEVA-ROSUVASTATIN	TEV	\$	0.1284
00002265540	CRESTOR	AZC	\$	1.4411

10 MG (BASE) ORAL TABLET

00002438925	ACH-ROSUVASTATIN	AHI	\$	0.1354
00002477041	AG-ROSUVASTATIN	AGP	\$	0.1354
00002337983	APO-ROSUVASTATIN	APX	\$	0.1354
00002442582	AURO-ROSUVASTATIN	AUR	\$	0.1354
00002498340	JAMP ROSUVASTATIN CALCIUM	JPC	\$	0.1354
00002391260	JAMP-ROSUVASTATIN	JPC	\$	0.1354
00002496542	M-ROSUVASTATIN	MTR	\$	0.1354
00002413078	MAR-ROSUVASTATIN	MAR	\$	0.1354
00002397803	MINT-ROSUVASTATIN	MPI	\$	0.1354
00002477491	NRA-ROSUVASTATIN	NRA	\$	0.1354
00002536609	NRA-ROSUVASTATIN	NRA	\$	0.1354
00002378531	PMS-ROSUVASTATIN	PMS	\$	0.1354
00002505584	PRZ-ROSUVASTATIN	PCI	\$	0.1354
00002405636	ROSUVASTATIN	SNS	\$	0.1354
00002411636	ROSUVASTATIN-10	SIV	\$	0.1354
00002338734	SANDOZ ROSUVASTATIN	SDZ	\$	0.1354
00002382652	TARO-ROSUVASTATIN	SPG	\$	0.1354
00002354616	TEVA-ROSUVASTATIN	TEV	\$	0.1354
00002247162	CRESTOR	AZC	\$	1.4969

24:00 CARDIOVASCULAR DRUGS

24:06.08

ANTILIPEMIC AGENTS**(HMG-COA REDUCTASE INHIBITORS)****ROSUVASTATIN CALCIUM****20 MG (BASE) ORAL TABLET**

00002438933	ACH-ROSUVASTATIN	AHI	\$	0.1692
00002477068	AG-ROSUVASTATIN	AGP	\$	0.1692
00002337991	APO-ROSUVASTATIN	APX	\$	0.1692
00002442590	AURO-ROSUVASTATIN	AUR	\$	0.1692
00002498359	JAMP ROSUVASTATIN CALCIUM	JPC	\$	0.1692
00002391279	JAMP-ROSUVASTATIN	JPC	\$	0.1692
00002496550	M-ROSUVASTATIN	MTR	\$	0.1692
00002413086	MAR-ROSUVASTATIN	MAR	\$	0.1692
00002397811	MINT-ROSUVASTATIN	MPI	\$	0.1692
00002477505	NRA-ROSUVASTATIN	NRA	\$	0.1692
00002536625	NRA-ROSUVASTATIN	NRA	\$	0.1692
00002378558	PMS-ROSUVASTATIN	PMS	\$	0.1692
00002505592	PRZ-ROSUVASTATIN	PCI	\$	0.1692
00002405644	ROSUVASTATIN	SNS	\$	0.1692
00002411644	ROSUVASTATIN-20	SIV	\$	0.1692
00002338742	SANDOZ ROSUVASTATIN	SDZ	\$	0.1692
00002382660	TARO-ROSUVASTATIN	SPG	\$	0.1692
00002354624	TEVA-ROSUVASTATIN	TEV	\$	0.1692
00002247163	CRESTOR	AZC	\$	1.8709

40 MG (BASE) ORAL TABLET

00002438941	ACH-ROSUVASTATIN	AHI	\$	0.1990
00002477076	AG-ROSUVASTATIN	AGP	\$	0.1990
00002338009	APO-ROSUVASTATIN	APX	\$	0.1990
00002442604	AURO-ROSUVASTATIN	AUR	\$	0.1990
00002498367	JAMP ROSUVASTATIN CALCIUM	JPC	\$	0.1990
00002391287	JAMP-ROSUVASTATIN	JPC	\$	0.1990
00002496569	M-ROSUVASTATIN	MTR	\$	0.1990
00002413108	MAR-ROSUVASTATIN	MAR	\$	0.1990
00002397838	MINT-ROSUVASTATIN	MPI	\$	0.1990
00002477513	NRA-ROSUVASTATIN	NRA	\$	0.1990
00002536633	NRA-ROSUVASTATIN	NRA	\$	0.1990
00002378566	PMS-ROSUVASTATIN	PMS	\$	0.1990
00002505606	PRZ-ROSUVASTATIN	PCI	\$	0.1990
00002405652	ROSUVASTATIN	SNS	\$	0.1990
00002411652	ROSUVASTATIN-40	SIV	\$	0.1990
00002338750	SANDOZ ROSUVASTATIN	SDZ	\$	0.1990
00002382679	TARO-ROSUVASTATIN	SPG	\$	0.1990
00002354632	TEVA-ROSUVASTATIN	TEV	\$	0.1990
00002247164	CRESTOR	AZC	\$	2.1902

24:00 CARDIOVASCULAR DRUGS
**24:06.08 ANTILIPEMIC AGENTS
(HMG-COA REDUCTASE INHIBITORS)**
SIMVASTATIN**5 MG ORAL TABLET**

00002480050	AG-SIMVASTATIN	AGP	\$	0.1023
00002247011	APO-SIMVASTATIN	APX	\$	0.1023
00002405148	AURO-SIMVASTATIN	AUR	\$	0.1023
00002375591	JAMP-SIMVASTATIN	JPC	\$	0.1023
00002372932	MINT-SIMVASTATIN	MPI	\$	0.1023
00002469979	PHARMA-SIMVASTATIN	PMS	\$	0.1023
00002329131	RAN-SIMVASTATIN	RAN	\$	0.1023
00002284723	SIMVASTATIN	SNS	\$	0.1023
00002386291	SIMVASTATIN	SIV	\$	0.1023
00002250144	TEVA-SIMVASTATIN	TEV	\$	0.1023

10 MG ORAL TABLET

00002480069	AG-SIMVASTATIN	AGP	\$ 0.1354	\$	0.2023
00002247012	APO-SIMVASTATIN	APX	\$ 0.1354	\$	0.2023
00002405156	AURO-SIMVASTATIN	AUR	\$ 0.1354	\$	0.2023
00002375605	JAMP-SIMVASTATIN	JPC	\$ 0.1354	\$	0.2023
00002375044	MAR-SIMVASTATIN	MAR	\$ 0.1354	\$	0.2023
00002372940	MINT-SIMVASTATIN	MPI	\$ 0.1354	\$	0.2023
00002469987	PHARMA-SIMVASTATIN	PMS	\$ 0.1354	\$	0.2023
00002329158	RAN-SIMVASTATIN	RAN	\$ 0.1354	\$	0.2023
00002284731	SIMVASTATIN	SNS	\$ 0.1354	\$	0.2023
00002386305	SIMVASTATIN	SIV	\$ 0.1354	\$	0.2023
00002250152	TEVA-SIMVASTATIN	TEV	\$ 0.1354	\$	0.2023
00000884332	ZOCOR	ORC	\$ 0.1354	\$	2.2268

MAC pricing will be applied based on the LCA Price for rosuvastatin calcium 1 x 10 mg tablet or the LCA Price of atorvastatin 1 x 20 mg tablet whichever is lower.

20 MG ORAL TABLET

00002480077	AG-SIMVASTATIN	AGP	\$ 0.1354	\$	0.2501
00002247013	APO-SIMVASTATIN	APX	\$ 0.1354	\$	0.2501
00002405164	AURO-SIMVASTATIN	AUR	\$ 0.1354	\$	0.2501
00002375613	JAMP-SIMVASTATIN	JPC	\$ 0.1354	\$	0.2501
00002375052	MAR-SIMVASTATIN	MAR	\$ 0.1354	\$	0.2501
00002372959	MINT-SIMVASTATIN	MPI	\$ 0.1354	\$	0.2501
00002469995	PHARMA-SIMVASTATIN	PMS	\$ 0.1354	\$	0.2501
00002329166	RAN-SIMVASTATIN	RAN	\$ 0.1354	\$	0.2501
00002284758	SIMVASTATIN	SNS	\$ 0.1354	\$	0.2501
00002386313	SIMVASTATIN	SIV	\$ 0.1354	\$	0.2501
00002250160	TEVA-SIMVASTATIN	TEV	\$ 0.1354	\$	0.2501
00000884340	ZOCOR	ORC	\$ 0.1354	\$	2.7521

MAC pricing will be applied based on the LCA Price for rosuvastatin calcium 1 x 10 mg tablet or the LCA Price of atorvastatin 1 x 20 mg tablet whichever is lower.

24:00 CARDIOVASCULAR DRUGS
**24:06.08 ANTILIPEMIC AGENTS
(HMG-COA REDUCTASE INHIBITORS)**
SIMVASTATIN**40 MG ORAL TABLET**

00002480085	AG-SIMVASTATIN	AGP	\$ 0.1354	\$	0.2501
00002247014	APO-SIMVASTATIN	APX	\$ 0.1354	\$	0.2501
00002405172	AURO-SIMVASTATIN	AUR	\$ 0.1354	\$	0.2501
00002375621	JAMP-SIMVASTATIN	JPC	\$ 0.1354	\$	0.2501
00002375060	MAR-SIMVASTATIN	MAR	\$ 0.1354	\$	0.2501
00002372967	MINT-SIMVASTATIN	MPI	\$ 0.1354	\$	0.2501
00002470004	PHARMA-SIMVASTATIN	PMS	\$ 0.1354	\$	0.2501
00002329174	RAN-SIMVASTATIN	RAN	\$ 0.1354	\$	0.2501
00002284766	SIMVASTATIN	SNS	\$ 0.1354	\$	0.2501
00002386321	SIMVASTATIN	SIV	\$ 0.1354	\$	0.2501
00002250179	TEVA-SIMVASTATIN	TEV	\$ 0.1354	\$	0.2501
00000884359	ZOCOR	ORC	\$ 0.1354	\$	2.7521

MAC pricing will be applied based on the LCA Price for rosuvastatin calcium 1 x 10 mg tablet or the LCA Price of atorvastatin 1 x 20 mg tablet whichever is lower.

80 MG ORAL TABLET

00002480093	AG-SIMVASTATIN	AGP	\$ 0.1354	\$	0.2501
00002247015	APO-SIMVASTATIN	APX	\$ 0.1354	\$	0.2501
00002405180	AURO-SIMVASTATIN	AUR	\$ 0.1354	\$	0.2501
00002375648	JAMP-SIMVASTATIN	JPC	\$ 0.1354	\$	0.2501
00002372975	MINT-SIMVASTATIN	MPI	\$ 0.1354	\$	0.2501
00002470012	PHARMA-SIMVASTATIN	PMS	\$ 0.1354	\$	0.2501
00002329182	RAN-SIMVASTATIN	RAN	\$ 0.1354	\$	0.2501
00002284774	SIMVASTATIN	SNS	\$ 0.1354	\$	0.2501
00002386348	SIMVASTATIN	SIV	\$ 0.1354	\$	0.2501
00002250187	TEVA-SIMVASTATIN	TEV	\$ 0.1354	\$	0.2501

MAC pricing will be applied based on the LCA Price for rosuvastatin calcium 1 x 10 mg tablet or the LCA Price of atorvastatin 1 x 20 mg tablet whichever is lower.

24:00 CARDIOVASCULAR DRUGS24:08.16 HYPOTENSIVE AGENTS
(CENTRAL ALPHA-AGONISTS)**CLONIDINE HCL**

0.025 MG ORAL TABLET

00002528207	JAMP CLONIDINE	JPC	\$	0.0680
00002524198	MAR-CLONIDINE	MAR	\$	0.0680
00002534738	MINT-CLONIDINE	MPI	\$	0.0680
00002516217	SANDOZ CLONIDINE	SDZ	\$	0.0680
00002304163	TEVA-CLONIDINE	TEV	\$	0.0680

0.1 MG ORAL TABLET

00002462192	MINT-CLONIDINE	MPI	\$	0.0679
00002515784	SANDOZ CLONIDINE	SDZ	\$	0.0679
00002046121	TEVA-CLONIDINE	TEV	\$	0.0679

0.2 MG ORAL TABLET

00002462206	MINT-CLONIDINE	MPI	\$	0.1212
00002515792	SANDOZ CLONIDINE	SDZ	\$	0.1212
00002046148	TEVA-CLONIDINE	TEV	\$	0.1212

METHYLDOPA

125 MG ORAL TABLET

00000360252	METHYLDOPA	AAP	\$	0.1261
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250 MG ORAL TABLET

00000360260	METHYLDOPA	AAP	\$	0.1889
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500 MG ORAL TABLET

00000426830	METHYLDOPA	AAP	\$	0.3236
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24:00 CARDIOVASCULAR DRUGS24:08.20 HYPOTENSIVE AGENTS
(DIRECT VASODILATORS)**HYDRALAZINE HCL**

10 MG ORAL TABLET

00000441619	APO-HYDRALAZINE	APX	\$	0.0355
00002457865	JAMP-HYDRALAZINE	JPC	\$	0.0355
00002468778	MINT-HYDRALAZINE	MPI	\$	0.0355

25 MG ORAL TABLET

00000441627	APO-HYDRALAZINE	APX	\$	0.0609
00002457873	JAMP-HYDRALAZINE	JPC	\$	0.0609
00002468786	MINT-HYDRALAZINE	MPI	\$	0.0609

50 MG ORAL TABLET

00000441635	APO-HYDRALAZINE	APX	\$	0.0956
00002457881	JAMP-HYDRALAZINE	JPC	\$	0.0956
00002468794	MINT-HYDRALAZINE	MPI	\$	0.0956

MINOXIDIL

2.5 MG ORAL TABLET

00000514497	LONITEN	PFI	\$	0.5250
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10 MG ORAL TABLET

00000514500	LONITEN	PFI	\$	1.1582
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24:00 CARDIOVASCULAR DRUGS

24:08.24.08 HYPOTENSIVE AGENTS
DIURETICS
(LOOP DIURETICS)

ETHACRYNIC ACID

25 MG ORAL TABLET

00002258528	EDECIN	VCL	\$	1.0425
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FUROSEMIDE

20 MG ORAL TABLET

00000396788	APO-FUROSEMIDE	APX	\$	0.0218
00002351420	FUROSEMIDE	SNS	\$	0.0218
00002466759	MINT-FUROSEMIDE	MPI	\$	0.0218
00000337730	TEVA-FUROSEMIDE	TEV	\$	0.0218

40 MG ORAL TABLET

00000362166	APO-FUROSEMIDE	APX	\$	0.0327
00002351439	FUROSEMIDE	SNS	\$	0.0327
00002466767	MINT-FUROSEMIDE	MPI	\$	0.0327
00000337749	TEVA-FUROSEMIDE	TEV	\$	0.0327

80 MG ORAL TABLET

00000707570	APO-FUROSEMIDE	APX	\$	0.0703
00002351447	FUROSEMIDE	SNS	\$	0.0703
00002466775	MINT-FUROSEMIDE	MPI	\$	0.0703
00000765953	TEVA-FUROSEMIDE	TEV	\$	0.0703

500 MG ORAL TABLET

00002224755	LASIX SPECIAL	SAV	\$	3.5700
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10 MG / ML ORAL SOLUTION

00002224720	LASIX	SAV	\$	0.3465
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10 MG / ML INJECTION

00000527033	FUROSEMIDE	SDZ	\$	0.6055
00002461404	FUROSEMIDE	STM	\$	0.6055
00002382539	FUROSEMIDE INJECTION SDZ	SDZ	\$	0.6055

24:00 CARDIOVASCULAR DRUGS

24:12.08 VASODILATING AGENTS
(NITRATES AND NITRITES)

ISOSORBIDE DINITRATE

10 MG ORAL TABLET

00000441686	ISDN	AAP	\$	0.0467
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30 MG ORAL TABLET

00000441694	ISDN	AAP	\$	0.1092
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ISOSORBIDE-5-MONONITRATE

60 MG ORAL EXTENDED-RELEASE TABLET

00002272830	APO-ISMN	APX	\$	0.3523
00002301288	PMS-ISMN	PMS	\$	0.3523
00002126559	IMDUR	JUN	\$	0.7350

NITROGLYCERIN

0.3 MG ORAL SUBLINGUAL TABLET

00000037613	NITROSTAT	BGP	\$	0.1737
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0.6 MG ORAL SUBLINGUAL TABLET

00000037621	NITROSTAT	BGP	\$	0.1737
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24:00 CARDIOVASCULAR DRUGS24:12.08 VASODILATING AGENTS
(NITRATES AND NITRITES)**NITROGLYCERIN**

0.4 MG / DOSE SUBLINGUAL METERED DOSE SPRAY

00002243588	MYLAN-NITRO	MYP	\$	0.0421
00002238998	RHO-NITRO PUMPSPRAY	SDZ	\$	0.0421
00002231441	NITROLINGUAL PUMPSPRAY	SAV	\$	0.0800

0.2 MG/HR TRANSDERMAL PATCH

00002407442	MYLAN-NITRO PATCH	MYP	\$	0.4463
00001911910	NITRO-DUR 0.2	DRL	\$	0.4463
<input checked="" type="checkbox"/> 00002230732	TRINIPATCH 0.2	PAL	\$	0.7127

0.4 MG/HR TRANSDERMAL PATCH

00002407450	MYLAN-NITRO PATCH	MYP	\$	0.4937
00001911902	NITRO-DUR 0.4	DRL	\$	0.4937
<input checked="" type="checkbox"/> 00002230733	TRINIPATCH 0.4	PAL	\$	0.8049

0.6 MG/HR TRANSDERMAL PATCH

00002407469	MYLAN-NITRO PATCH	MYP	\$	0.4937
00001911929	NITRO-DUR 0.6	DRL	\$	0.4937
<input checked="" type="checkbox"/> 00002230734	TRINIPATCH 0.6	PAL	\$	0.8049

0.8 MG/HR TRANSDERMAL PATCH

00002407477	MYLAN-NITRO PATCH	MYP	\$	0.8743
00002011271	NITRO-DUR 0.8	DRL	\$	0.8743

24:00 CARDIOVASCULAR DRUGS24:12.92 VASODILATING AGENTS
(MISCELLANEOUS VASODILATING AGENTS)**ALPROSTADIL**

500 MCG / ML INJECTION

00000559253	PROSTIN VR	PFI	\$	287.4864
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24:00 CARDIOVASCULAR DRUGS

24:20 ALPHA-ADRENERGIC BLOCKING AGENTS

DOXAZOSIN MESYLATE

1 MG (BASE) ORAL TABLET

00002240588	APO-DOXAZOSIN	APX	\$	0.1719
00002489937	JAMP-DOXAZOSIN	JPC	\$	0.1719
00002242728	TEVA-DOXAZOSIN	TEV	\$	0.1719

2 MG (BASE) ORAL TABLET

00002240589	APO-DOXAZOSIN	APX	\$	0.2062
00002489945	JAMP-DOXAZOSIN	JPC	\$	0.2062
00002242729	TEVA-DOXAZOSIN	TEV	\$	0.2062

4 MG (BASE) ORAL TABLET

00002240590	APO-DOXAZOSIN	APX	\$	0.2681
00002489953	JAMP-DOXAZOSIN	JPC	\$	0.2681
00002242730	TEVA-DOXAZOSIN	TEV	\$	0.2681

24:00 CARDIOVASCULAR DRUGS**24:20 ALPHA-ADRENERGIC BLOCKING AGENTS****PRAZOSIN HCL**

1 MG (BASE) ORAL TABLET			
00000882801	APO-PRAZO	APX	\$ 0.2743
00001934198	TEVA-PRAZOSIN	TEV	\$ 0.2743
2 MG (BASE) ORAL TABLET			
00000882828	APO-PRAZO	APX	\$ 0.3725
00001934201	TEVA-PRAZOSIN	TEV	\$ 0.3725
5 MG (BASE) ORAL TABLET			
00000882836	APO-PRAZO	APX	\$ 0.5121
00001934228	TEVA-PRAZOSIN	TEV	\$ 0.5121

TAMSULOSIN HCL

0.4 MG ORAL EXTENDED-RELEASE TABLET			
00002362406	APO-TAMSULOSIN CR	APX	\$ 0.1500
00002340208	SANDOZ TAMSULOSIN CR	SDZ	\$ 0.1500
00002427117	TAMSULOSIN CR	SNS	\$ 0.1500
00002429667	TAMSULOSIN CR	SIV	\$ 0.1500
00002368242	TEVA-TAMSULOSIN CR	TEV	\$ 0.1500
00002270102	FLOMAX CR	BOE	\$ 0.6700
0.4 MG ORAL SUSTAINED-RELEASE CAPSULE			
00002319217	SANDOZ TAMSULOSIN	SDZ	\$ 0.1500

TERAZOSIN HCL

1 MG (BASE) ORAL TABLET			
00002234502	APO-TERAZOSIN	APX	\$ 0.3938
00002243518	PMS-TERAZOSIN	PMS	\$ 0.3938
2 MG (BASE) ORAL TABLET			
00002234503	APO-TERAZOSIN	APX	\$ 0.5005
00002243519	PMS-TERAZOSIN	PMS	\$ 0.5005
5 MG (BASE) ORAL TABLET			
00002234504	APO-TERAZOSIN	APX	\$ 0.3168
00002243520	PMS-TERAZOSIN	PMS	\$ 0.3168
00002230807	TEVA-TERAZOSIN	TEV	\$ 0.3168
10 MG (BASE) ORAL TABLET			
00002234505	APO-TERAZOSIN	APX	\$ 0.9950
00002243521	PMS-TERAZOSIN	PMS	\$ 0.9950

24:00 CARDIOVASCULAR DRUGS**24:24 BETA-ADRENERGIC BLOCKING AGENTS****ACEBUTOLOL HCL**

100 MG (BASE) ORAL TABLET			
00002147602	APO-ACEBUTOLOL	APX	\$ 0.1871
00002204517	TEVA-ACEBUTOLOL	TEV	\$ 0.1871
200 MG (BASE) ORAL TABLET			
00002147610	APO-ACEBUTOLOL	APX	\$ 0.2808
00002204525	TEVA-ACEBUTOLOL	TEV	\$ 0.2808
400 MG (BASE) ORAL TABLET			
00002147629	APO-ACEBUTOLOL	APX	\$ 0.5348
00002204533	TEVA-ACEBUTOLOL	TEV	\$ 0.5348

24:00 CARDIOVASCULAR DRUGS**24:24 BETA-ADRENERGIC BLOCKING AGENTS****ATENOLOL****25 MG ORAL TABLET**

00002541564	ATENOLOL	SIV	\$	0.0441
00002367556	JAMP-ATENOLOL	JPC	\$	0.0441
00002371979	MAR-ATENOLOL	MAR	\$	0.0441
00002368013	MINT-ATENOL	MPI	\$	0.0441
00002246581	PMS-ATENOLOL	PMS	\$	0.0441
00002373963	RAN-ATENOLOL	RAN	\$	0.0441
00002266660	TEVA-ATENOLOL	TEV	\$	0.0441

50 MG ORAL TABLET

00002369184	AG-ATENOLOL	AGP	\$	0.0938
00000773689	APO-ATENOL	APX	\$	0.0938
00002238316	ATENOLOL	SIV	\$	0.0938
00002466465	ATENOLOL	SNS	\$	0.0938
00002367564	JAMP-ATENOLOL	JPC	\$	0.0938
00002371987	MAR-ATENOLOL	MAR	\$	0.0938
00002368021	MINT-ATENOL	MPI	\$	0.0938
00002237600	PMS-ATENOLOL	PMS	\$	0.0938
00002267985	RAN-ATENOLOL	RAN	\$	0.0938
00002171791	TEVA-ATENOLOL	TEV	\$	0.0938
00002039532	TENORMIN	SLP	\$	0.6363

100 MG ORAL TABLET

00002369192	AG-ATENOLOL	AGP	\$	0.1543
00000773697	APO-ATENOL	APX	\$	0.1543
00002238318	ATENOLOL	SIV	\$	0.1543
00002466473	ATENOLOL	SNS	\$	0.1543
00002367572	JAMP-ATENOLOL	JPC	\$	0.1543
00002371995	MAR-ATENOLOL	MAR	\$	0.1543
00002368048	MINT-ATENOL	MPI	\$	0.1543
00002237601	PMS-ATENOLOL	PMS	\$	0.1543
00002267993	RAN-ATENOLOL	RAN	\$	0.1543
00002171805	TEVA-ATENOLOL	TEV	\$	0.1543
00002039540	TENORMIN	SLP	\$	1.0461

ATENOLOL/ CHLORTHALIDONE**50 MG * 25 MG ORAL TABLET**

00002248763	AA-ATENIDONE	AAP	\$	0.5342
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100 MG * 25 MG ORAL TABLET

00002248764	AA-ATENIDONE	AAP	\$	0.8755
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24:00 CARDIOVASCULAR DRUGS**24:24 BETA-ADRENERGIC BLOCKING AGENTS****BISOPROLOL FUMARATE****5 MG ORAL TABLET**

00002256134	APO-BISOPROLOL	APX	\$	0.0606
00002391589	BISOPROLOL	SNS	\$	0.0606
00002495562	BISOPROLOL	SIV	\$	0.0606
00002518805	JAMP BISOPROLOL	JPC	\$	0.0606
00002465612	MINT-BISOPROLOL	MPI	\$	0.0606
00002494035	SANDOZ BISOPROLOL	SDZ	\$	0.0606
00002267470	TEVA-BISOPROLOL	TEV	\$	0.0606

10 MG ORAL TABLET

00002256177	APO-BISOPROLOL	APX	\$	0.0885
00002391597	BISOPROLOL	SNS	\$	0.0885
00002495570	BISOPROLOL	SIV	\$	0.0885
00002518791	JAMP BISOPROLOL	JPC	\$	0.0885
00002465620	MINT-BISOPROLOL	MPI	\$	0.0885
00002494043	SANDOZ BISOPROLOL	SDZ	\$	0.0885
00002267489	TEVA-BISOPROLOL	TEV	\$	0.0885

CARVEDILOL**3.125 MG ORAL TABLET**

00002247933	APO-CARVEDILOL	APX	\$	0.2060
00002418495	AURO-CARVEDILOL	AUR	\$	0.2060
00002248752	CARVEDILOL	SIV	\$	0.2060
00002364913	CARVEDILOL	SNS	\$	0.2060
00002368897	JAMP-CARVEDILOL	JPC	\$	0.2060
00002245914	PMS-CARVEDILOL	PMS	\$	0.2060
00002252309	TEVA-CARVEDILOL	TEV	\$	0.2060

6.25 MG ORAL TABLET

00002247934	APO-CARVEDILOL	APX	\$	0.2060
00002418509	AURO-CARVEDILOL	AUR	\$	0.2060
00002248753	CARVEDILOL	SIV	\$	0.2060
00002364921	CARVEDILOL	SNS	\$	0.2060
00002368900	JAMP-CARVEDILOL	JPC	\$	0.2060
00002245915	PMS-CARVEDILOL	PMS	\$	0.2060
00002252317	TEVA-CARVEDILOL	TEV	\$	0.2060

12.5 MG ORAL TABLET

00002247935	APO-CARVEDILOL	APX	\$	0.2060
00002418517	AURO-CARVEDILOL	AUR	\$	0.2060
00002248754	CARVEDILOL	SIV	\$	0.2060
00002364948	CARVEDILOL	SNS	\$	0.2060
00002368919	JAMP-CARVEDILOL	JPC	\$	0.2060
00002245916	PMS-CARVEDILOL	PMS	\$	0.2060
00002252325	TEVA-CARVEDILOL	TEV	\$	0.2060

25 MG ORAL TABLET

00002247936	APO-CARVEDILOL	APX	\$	0.2060
00002418525	AURO-CARVEDILOL	AUR	\$	0.2060
00002248755	CARVEDILOL	SIV	\$	0.2060
00002364956	CARVEDILOL	SNS	\$	0.2060
00002368927	JAMP-CARVEDILOL	JPC	\$	0.2060
00002245917	PMS-CARVEDILOL	PMS	\$	0.2060
00002252333	TEVA-CARVEDILOL	TEV	\$	0.2060

24:00 CARDIOVASCULAR DRUGS**24:24 BETA-ADRENERGIC BLOCKING AGENTS****LABETALOL HCL****100 MG ORAL TABLET**

00002243538	APO-LABETALOL	APX	\$	0.1983
00002489406	RIVA-LABETALOL	RIV	\$	0.1983
00002106272	TRANDATE	PAL	\$	0.3266

200 MG ORAL TABLET

00002243539	APO-LABETALOL	APX	\$	0.3504
00002489414	RIVA-LABETALOL	RIV	\$	0.3504
00002106280	TRANDATE	PAL	\$	0.5774

METOPROLOL TARTRATE**25 MG ORAL TABLET**

00002246010	APO-METOPROLOL	APX	\$	0.0643
00002356813	JAMP-METOPROLOL-L	JPC	\$	0.0643
00002248855	PMS-METOPROLOL-L	PMS	\$	0.0643

50 MG ORAL TABLET

00002481316	AG-METOPROLOL-L	AGP	\$	0.0624
00000618632	APO-METOPROLOL	APX	\$	0.0624
00000749354	APO-METOPROLOL (TYPE L)	APX	\$	0.0624
00002356821	JAMP-METOPROLOL-L	JPC	\$	0.0624
00002350394	METOPROLOL	SNS	\$	0.0624
00002442124	METOPROLOL-L	SIV	\$	0.0624
00002230803	PMS-METOPROLOL-L	PMS	\$	0.0624
00000842648	TEVA-METOPROL	TEV	\$	0.0624
00000648035	TEVA-METOPROL (FC)	TEV	\$	0.0624

100 MG ORAL TABLET

00002481324	AG-METOPROLOL-L	AGP	\$	0.1250
00000618640	APO-METOPROLOL	APX	\$	0.1250
00000751170	APO-METOPROLOL (TYPE L)	APX	\$	0.1250
00002356848	JAMP-METOPROLOL-L	JPC	\$	0.1250
00002350408	METOPROLOL	SNS	\$	0.1250
00002442132	METOPROLOL-L	SIV	\$	0.1250
00002230804	PMS-METOPROLOL-L	PMS	\$	0.1250
00000842656	TEVA-METOPROL	TEV	\$	0.1250
00000648043	TEVA-METOPROL (FC)	TEV	\$	0.1250

100 MG ORAL SUSTAINED-RELEASE TABLET

00002285169	AA-METOPROLOL SR	AAP	\$	0.1871
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200 MG (BASE) ORAL SUSTAINED-RELEASE TABLET

00002285177	AA-METOPROLOL SR	AAP	\$	0.3396
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NADOLOL**40 MG ORAL TABLET**

00000782505	APO-NADOLOL	APX	\$	0.2375
00002496380	MINT-NADOLOL	MPI	\$	0.2375

80 MG ORAL TABLET

00000782467	APO-NADOLOL	APX	\$	0.3410
00002496399	MINT-NADOLOL	MPI	\$	0.3410

160 MG ORAL TABLET

00000782475	APO-NADOLOL	APX	\$	1.3035
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PROPRANOLOL HCL**10 MG ORAL TABLET**

00000496480	TEVA-PROPRANOLOL	TEV	\$	0.0806
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20 MG ORAL TABLET

00000740675	TEVA-PROPRANOLOL	TEV	\$	0.1320
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The DBL is not a prescribing or a diagnostic tool. Prescribers should refer to drug monographs and utilize professional judgment.

24:00 CARDIOVASCULAR DRUGS**24:24 BETA-ADRENERGIC BLOCKING AGENTS****PROPRANOLOL HCL****40 MG ORAL TABLET**

00000496499 TEVA-PROPRANOLOL TEV \$ 0.1457

80 MG ORAL TABLET

00000496502 TEVA-PROPRANOLOL TEV \$ 0.2305

SOTALOL HCL**80 MG ORAL TABLET**

00002210428 APO-SOTALOL APX \$ 0.2966

00002368617 JAMP-SOTALOL JPC \$ 0.2966

00002238326 PMS-SOTALOL PMS \$ 0.2966

160 MG ORAL TABLET

00002167794 APO-SOTALOL APX \$ 0.1623

00002368625 JAMP-SOTALOL JPC \$ 0.1623

00002238327 PMS-SOTALOL PMS \$ 0.1623

24:00 CARDIOVASCULAR DRUGS**24:28.08 CALCIUM-CHANNEL BLOCKING AGENTS
(DIHYDROPYRIDINES)****AMLODIPINE BESYLATE****2.5 MG (BASE) ORAL TABLET**

00002419556 ACH-AMLODIPINE AHI \$ 0.0767

00002385783 AMLODIPINE SIV \$ 0.0767

00002478587 AMLODIPINE SNS \$ 0.0767

00002492199 AMLODIPINE JPC \$ 0.0767

00002357186 JAMP-AMLODIPINE JPC \$ 0.0767

00002468018 M-AMLODIPINE MTR \$ 0.0767

00002371707 MAR-AMLODIPINE MAR \$ 0.0767

00002476452 NRA-AMLODIPINE NRA \$ 0.0767

00002469022 PHARMA-AMLODIPINE PMS \$ 0.0767

00002295148 PMS-AMLODIPINE PMS \$ 0.0767

00002330474 SANDOZ AMLODIPINE SDZ \$ 0.0767

5 MG (BASE) ORAL TABLET

00002419564 ACH-AMLODIPINE AHI \$ 0.1343

00002297485 ACT AMLODIPINE TEV \$ 0.1343

00002331284 AMLODIPINE SNS \$ 0.1343

00002385791 AMLODIPINE SIV \$ 0.1343

00002429217 AMLODIPINE JPC \$ 0.1343

00002273373 APO-AMLODIPINE APX \$ 0.1343

00002397072 AURO-AMLODIPINE AUR \$ 0.1343

00002357194 JAMP-AMLODIPINE JPC \$ 0.1343

00002468026 M-AMLODIPINE MTR \$ 0.1343

00002371715 MAR-AMLODIPINE MAR \$ 0.1343

00002362651 MINT-AMLODIPINE MPI \$ 0.1343

00002272113 MYLAN-AMLODIPINE MYP \$ 0.1343

00002476460 NRA-AMLODIPINE NRA \$ 0.1343

00002469030 PHARMA-AMLODIPINE PMS \$ 0.1343

00002284065 PMS-AMLODIPINE PMS \$ 0.1343

00002522519 PRZ-AMLODIPINE PCI \$ 0.1343

00002321858 RAN-AMLODIPINE RAN \$ 0.1343

00002284383 SANDOZ AMLODIPINE SDZ \$ 0.1343

00002357712 SEPTA-AMLODIPINE SEP \$ 0.1343

00000878928 NORVASC BGP \$ 1.5812

24:00 CARDIOVASCULAR DRUGS**24:28.08 CALCIUM-CHANNEL BLOCKING AGENTS
(DIHYDROPYRIDINES)****AMLODIPINE BESYLATE****10 MG (BASE) ORAL TABLET**

00002419572	ACH-AMLODIPINE	AHI	\$	0.1993
00002297493	ACT AMLODIPINE	TEV	\$	0.1993
00002331292	AMLODIPINE	SNS	\$	0.1993
00002385805	AMLODIPINE	SIV	\$	0.1993
00002429225	AMLODIPINE	JPC	\$	0.1993
00002273381	APO-AMLODIPINE	APX	\$	0.1993
00002397080	AURO-AMLODIPINE	AUR	\$	0.1993
00002357208	JAMP-AMLODIPINE	JPC	\$	0.1993
00002468034	M-AMLODIPINE	MTR	\$	0.1993
00002371723	MAR-AMLODIPINE	MAR	\$	0.1993
00002362678	MINT-AMLODIPINE	MPI	\$	0.1993
00002272121	MYLAN-AMLODIPINE	MYP	\$	0.1993
00002476479	NRA-AMLODIPINE	NRA	\$	0.1993
00002469049	PHARMA-AMLODIPINE	PMS	\$	0.1993
00002284073	PMS-AMLODIPINE	PMS	\$	0.1993
00002522527	PRZ-AMLODIPINE	PCI	\$	0.1993
00002321866	RAN-AMLODIPINE	RAN	\$	0.1993
00002284391	SANDOZ AMLODIPINE	SDZ	\$	0.1993
00002357720	SEPTA-AMLODIPINE	SEP	\$	0.1993
00000878936	NORVASC	BGP	\$	2.3080

1 MG / ML ORAL SOLUTION

00002484706	PDP-AMLODIPINE	PPH	\$	1.2250
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FELODIPINE**2.5 MG ORAL EXTENDED-RELEASE TABLET**

00002452367	APO-FELODIPINE	APX	\$ 0.1993	\$ 0.4050
00002057778	PLENDIL	AZC	\$ 0.1993	\$ 0.5954

MAC pricing will be applied based on the LCA Price for amlodipine besylate 1 x 10 mg tablet.

5 MG ORAL EXTENDED-RELEASE TABLET

00002452375	APO-FELODIPINE	APX	\$ 0.1993	\$ 0.3565
00002280264	SANDOZ FELODIPINE	SDZ	\$ 0.1993	\$ 0.3565
00000851779	PLENDIL	AZC	\$ 0.1993	\$ 0.7857

MAC pricing will be applied based on the LCA Price for amlodipine besylate 1 x 10 mg tablet.

10 MG ORAL EXTENDED-RELEASE TABLET

00002452383	APO-FELODIPINE	APX	\$ 0.1993	\$ 0.5350
00002280272	SANDOZ FELODIPINE	SDZ	\$ 0.1993	\$ 0.5350
00000851787	PLENDIL	AZC	\$ 0.1993	\$ 1.1794

MAC pricing will be applied based on the LCA Price for amlodipine besylate 1 x 10 mg tablet.

24:00 CARDIOVASCULAR DRUGS**24:28.08 CALCIUM-CHANNEL BLOCKING AGENTS
(DIHYDROPYRIDINES)****NIFEDIPINE****30 MG ORAL EXTENDED-RELEASE TABLET**

00002155907	ADALAT XL	BAI	\$ 0.1993	\$	0.6171
00002349167	MYLAN-NIFEDIPINE ERT	MYP	\$ 0.1993	\$	0.6171

MAC pricing will be applied based on the LCA Price for amlodipine besylate 1 x 10 mg tablet.

60 MG ORAL EXTENDED-RELEASE TABLET

00002321149	MYLAN-NIFEDIPINE ERT	MYP	\$ 0.1993	\$	0.9374
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MAC pricing will be applied based on the LCA Price for amlodipine besylate 1 x 10 mg tablet.

5 MG ORAL CAPSULE

00000725110	NIFEDIPINE	AAP		\$	0.4600
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10 MG ORAL CAPSULE

00000755907	NIFEDIPINE	AAP		\$	0.5803
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24:00 CARDIOVASCULAR DRUGS**24:28.92 CALCIUM-CHANNEL BLOCKING AGENTS
(MISCELLANEOUS CALCIUM-CHANNEL BLOCKING AGENTS)****DILTIAZEM HCL****30 MG ORAL TABLET**

00000771376	AA-DILTIAZ	AAP		\$	0.1866
00000862924	TEVA-DILTIAZEM	TEV		\$	0.1866

60 MG ORAL TABLET

00000771384	AA-DILTIAZ	AAP		\$	0.3273
00000862932	TEVA-DILTIAZEM	TEV		\$	0.3273

120 MG ORAL EXTENDED-RELEASE TABLET

00002256738	TIAZAC XC	VCL		\$	0.9720
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180 MG ORAL EXTENDED-RELEASE TABLET

00002429322	TEVA-DILTIAZEM XC	TEV		\$	0.9195
00002256746	TIAZAC XC	VCL		\$	1.2916

240 MG ORAL EXTENDED-RELEASE TABLET

00002429330	TEVA-DILTIAZEM XC	TEV		\$	1.2212
00002256754	TIAZAC XC	VCL		\$	1.7167

300 MG ORAL EXTENDED-RELEASE TABLET

00002429349	TEVA-DILTIAZEM XC	TEV		\$	1.2175
00002256762	TIAZAC XC	VCL		\$	1.7133

360 MG ORAL EXTENDED-RELEASE TABLET

00002429357	TEVA-DILTIAZEM XC	TEV		\$	1.2211
00002256770	TIAZAC XC	VCL		\$	1.7140

24:00 CARDIOVASCULAR DRUGS

24:28.92 **CALCIUM-CHANNEL BLOCKING AGENTS**
(MISCELLANEOUS CALCIUM-CHANNEL BLOCKING AGENTS)

DILTIAZEM HCL**120 MG ORAL CONTROLLED-DELIVERY CAPSULE**

00002370611	ACT DILTIAZEM CD	TEV	\$	0.3529
00002230997	APO-DILTIAZ CD	APX	\$	0.3529
00002400421	DILTIAZEM CD	SNS	\$	0.3529
00002445999	DILTIAZEM CD	SIV	\$	0.3529
00002528037	JAMP DILTIAZEM CD	JPC	\$	0.3529
00002484064	MAR-DILTIAZEM CD	MAR	\$	0.3529
00002242538	TEVA-DILTIAZEM CD	TEV	\$	0.3529

180 MG ORAL CONTROLLED-DELIVERY CAPSULE

00002230998	APO-DILTIAZ CD	APX	\$	0.4684
00002400448	DILTIAZEM CD	SNS	\$	0.4684
00002446006	DILTIAZEM CD	SIV	\$	0.4684
00002528045	JAMP DILTIAZEM CD	JPC	\$	0.4684
00002484072	MAR-DILTIAZEM CD	MAR	\$	0.4684
00002242539	TEVA-DILTIAZEM CD	TEV	\$	0.4684

240 MG ORAL CONTROLLED-DELIVERY CAPSULE

00002370646	ACT DILTIAZEM CD	TEV	\$	0.6213
00002230999	APO-DILTIAZ CD	APX	\$	0.6213
00002400456	DILTIAZEM CD	SNS	\$	0.6213
00002446014	DILTIAZEM CD	SIV	\$	0.6213
00002528053	JAMP DILTIAZEM CD	JPC	\$	0.6213
00002484080	MAR-DILTIAZEM CD	MAR	\$	0.6213
00002242540	TEVA-DILTIAZEM CD	TEV	\$	0.6213

300 MG ORAL CONTROLLED-DELIVERY CAPSULE

00002370654	ACT DILTIAZEM CD	TEV	\$	0.7766
00002229526	APO-DILTIAZ CD	APX	\$	0.7766
00002400464	DILTIAZEM CD	SNS	\$	0.7766
00002446022	DILTIAZEM CD	SIV	\$	0.7766
00002528061	JAMP DILTIAZEM CD	JPC	\$	0.7766
00002484099	MAR-DILTIAZEM CD	MAR	\$	0.7766
00002242541	TEVA-DILTIAZEM CD	TEV	\$	0.7766

120 MG ORAL EXTENDED-RELEASE CAPSULE

00002516101	DILTIAZEM T	SNS	\$	0.2133
00002495376	JAMP DILTIAZEM T	JPC	\$	0.2133
00002465353	MAR-DILTIAZEM T	MAR	\$	0.2133
00002271605	TEVA-DILTIAZEM HCL ER	VTC	\$	0.2133
00002231150	TIAZAC	VCL	\$	1.0351

180 MG ORAL EXTENDED-RELEASE CAPSULE

00002516128	DILTIAZEM T	SNS	\$	0.2889
00002495384	JAMP DILTIAZEM T	JPC	\$	0.2889
00002465361	MAR-DILTIAZEM T	MAR	\$	0.2889
00002271613	TEVA-DILTIAZEM HCL ER	VTC	\$	0.2889
00002231151	TIAZAC	VCL	\$	1.3828

240 MG ORAL EXTENDED-RELEASE CAPSULE

00002516136	DILTIAZEM T	SNS	\$	0.3832
00002495392	JAMP DILTIAZEM T	JPC	\$	0.3832
00002465388	MAR-DILTIAZEM T	MAR	\$	0.3832
00002271621	TEVA-DILTIAZEM HCL ER	VTC	\$	0.3832
00002231152	TIAZAC	VCL	\$	1.7168

24:00 CARDIOVASCULAR DRUGS
**24:28.92 CALCIUM-CHANNEL BLOCKING AGENTS
(MISCELLANEOUS CALCIUM-CHANNEL BLOCKING AGENTS)**
DILTIAZEM HCL**300 MG ORAL EXTENDED-RELEASE CAPSULE**

00002516144	DILTIAZEM T	SNS	\$	0.4719
00002495406	JAMP DILTIAZEM T	JPC	\$	0.4719
00002465396	MAR-DILTIAZEM T	MAR	\$	0.4719
00002271648	TEVA-DILTIAZEM HCL ER	VTC	\$	0.4719
00002231154	TIAZAC	VCL	\$	2.2971

360 MG ORAL EXTENDED-RELEASE CAPSULE

00002516152	DILTIAZEM T	SNS	\$	0.5778
00002495414	JAMP DILTIAZEM T	JPC	\$	0.5778
00002465418	MAR-DILTIAZEM T	MAR	\$	0.5778
00002271656	TEVA-DILTIAZEM HCL ER	VTC	\$	0.5778
00002231155	TIAZAC	VCL	\$	2.7656

VERAPAMIL HCL**80 MG ORAL TABLET**

00000782483	APO-VERAP	APX	\$	0.2735
00002237921	MYLAN-VERAPAMIL	MYP	\$	0.2735

120 MG ORAL TABLET

00000782491	APO-VERAP	APX	\$	0.4250
00002237922	MYLAN-VERAPAMIL	MYP	\$	0.4250

120 MG ORAL SUSTAINED-RELEASE TABLET

00002246893	APO-VERAP SR	APX	\$	0.5078
00002210347	MYLAN-VERAPAMIL SR	MYP	\$	0.5078
00001907123	ISOPTIN SR	BGP	\$	1.6639

180 MG ORAL SUSTAINED-RELEASE TABLET

00002450488	MYLAN-VERAPAMIL SR	MYP	\$	0.5204
00001934317	ISOPTIN SR	BGP	\$	1.8788

240 MG ORAL SUSTAINED-RELEASE TABLET

00002246895	APO-VERAP SR	APX	\$	1.7143
00002450496	MYLAN-VERAPAMIL SR	MYP	\$	1.7143
00000742554	ISOPTIN SR	BGP	\$	2.5055

24:00 CARDIOVASCULAR DRUGS
**24:32.04 RENIN-ANGIOTENSIN-ALDOSTERONE SYSTEM INHIBITORS
(ANGIOTENSIN-CONVERTING ENZYME INHIBITORS)**
BENAZEPRIL HCL**5 MG ORAL TABLET**

00002290332	BENAZEPRIL	AAP	\$ 0.1945	\$ 0.9969
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MAC pricing will be applied based on the LCA Price for lisinopril 1 x 20 mg tablet.

10 MG ORAL TABLET

00002290340	BENAZEPRIL	AAP	\$ 0.1945	\$ 1.1807
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MAC pricing will be applied based on the LCA Price for lisinopril 1 x 20 mg tablet.

20 MG ORAL TABLET

00002273918	BENAZEPRIL	AAP	\$ 0.1945	\$ 1.3532
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MAC pricing will be applied based on the LCA Price for lisinopril 1 x 20 mg tablet.

24:00 CARDIOVASCULAR DRUGS**24:32.04 RENIN-ANGIOTENSIN-ALDOSTERONE SYSTEM INHIBITORS
(ANGIOTENSIN-CONVERTING ENZYME INHIBITORS)****CAPTOPRIL****12.5 MG ORAL TABLET**

00001942964 TEVA-CAPTOPRIL TEV \$ 0.1113

25 MG ORAL TABLET

00001942972 TEVA-CAPTOPRIL TEV \$ 0.1575

50 MG ORAL TABLET00001942980 TEVA-CAPTOPRIL TEV \$ **0.1945** \$ 0.2935*MAC pricing will be applied based on the LCA Price for Lisinopril 1 x 20 mg tablet or the current price or LCA price whichever is the lowest.***100 MG ORAL TABLET**00001942999 TEVA-CAPTOPRIL TEV \$ **0.1945** \$ 0.5458*MAC pricing will be applied based on the LCA Price for Lisinopril 1 x 20 mg tablet or the current price or LCA price whichever is the lowest.*

CILAZAPRIL**1 MG ORAL TABLET**00002283778 MYLAN-CILAZAPRIL MYP \$ **0.1945** \$ 0.3115*MAC pricing will be applied based on the LCA Price for lisinopril 1 x 20 mg tablet.***2.5 MG ORAL TABLET**00002291142 APO-CILAZAPRIL APX \$ **0.1945** \$ 0.429500002283786 MYLAN-CILAZAPRIL MYP \$ **0.1945** \$ 0.4295*MAC pricing will be applied based on the LCA Price for lisinopril 1 x 20 mg tablet.***5 MG ORAL TABLET**00002291150 APO-CILAZAPRIL APX \$ **0.1945** \$ 0.498900002283794 MYLAN-CILAZAPRIL MYP \$ **0.1945** \$ 0.498900001911481 INHIBACE CAG \$ **0.1945** \$ 1.0886*MAC pricing will be applied based on the LCA Price for Lisinopril 1 x 20 mg tablet.*

CILAZAPRIL/ HYDROCHLOROTHIAZIDE**5 MG * 12.5 MG ORAL TABLET**00002284987 APO-CILAZAPRIL/HCTZ APX \$ **0.2503** \$ 0.417000002313731 TEVA-CILAZAPRIL/HCTZ TEV \$ **0.2503** \$ 0.417000002181479 INHIBACE PLUS CAG \$ **0.2503** \$ 1.0882*MAC pricing will be applied based on the LCA Price for lisinopril/hydrochlorothiazide 1 x 20 mg/25 mg tablet.*

24:00 CARDIOVASCULAR DRUGS**24:32.04 RENIN-ANGIOTENSIN-ALDOSTERONE SYSTEM INHIBITORS
(ANGIOTENSIN-CONVERTING ENZYME INHIBITORS)****ENALAPRIL MALEATE****2.5 MG ORAL TABLET**

00002291878	ACT ENALAPRIL	TEV	\$	0.1863
00002020025	APO-ENALAPRIL	APX	\$	0.1863
00002400650	ENALAPRIL	SNS	\$	0.1863
00002442957	ENALAPRIL	SIV	\$	0.1863
00002474786	JAMP ENALAPRIL	JPC	\$	0.1863
00002459450	MAR-ENALAPRIL	MAR	\$	0.1863
00002352230	RAN-ENALAPRIL	RAN	\$	0.1863
00002299933	SANDOZ ENALAPRIL	SDZ	\$	0.1863

5 MG ORAL TABLET

00002291886	ACT ENALAPRIL	TEV	\$ 0.1945	\$	0.2203
00002019884	APO-ENALAPRIL	APX	\$ 0.1945	\$	0.2203
00002400669	ENALAPRIL	SNS	\$ 0.1945	\$	0.2203
00002442965	ENALAPRIL	SIV	\$ 0.1945	\$	0.2203
00002474794	JAMP ENALAPRIL	JPC	\$ 0.1945	\$	0.2203
00002459469	MAR-ENALAPRIL	MAR	\$ 0.1945	\$	0.2203
00002352249	RAN-ENALAPRIL	RAN	\$ 0.1945	\$	0.2203
00002299941	SANDOZ ENALAPRIL	SDZ	\$ 0.1945	\$	0.2203
00000708879	VASOTEC	ORC	\$ 0.1945	\$	1.0256

MAC pricing will be applied based on the LCA Price for lisinopril 1 x 20 mg tablet or the current price or LCA price whichever is the lowest.

10 MG ORAL TABLET

00002291894	ACT ENALAPRIL	TEV	\$ 0.1945	\$	0.2647
00002019892	APO-ENALAPRIL	APX	\$ 0.1945	\$	0.2647
00002400677	ENALAPRIL	SNS	\$ 0.1945	\$	0.2647
00002442973	ENALAPRIL	SIV	\$ 0.1945	\$	0.2647
00002474808	JAMP ENALAPRIL	JPC	\$ 0.1945	\$	0.2647
00002444771	MAR-ENALAPRIL	MAR	\$ 0.1945	\$	0.2647
00002352257	RAN-ENALAPRIL	RAN	\$ 0.1945	\$	0.2647
00002299968	SANDOZ ENALAPRIL	SDZ	\$ 0.1945	\$	0.2647
00000670901	VASOTEC	ORC	\$ 0.1945	\$	1.2325

MAC pricing will be applied based on the LCA Price for lisinopril 1 x 20 mg tablet or the current price or LCA price whichever is the lowest.

20 MG ORAL TABLET

00002291908	ACT ENALAPRIL	TEV	\$ 0.1945	\$	0.3195
00002019906	APO-ENALAPRIL	APX	\$ 0.1945	\$	0.3195
00002400685	ENALAPRIL	SNS	\$ 0.1945	\$	0.3195
00002442981	ENALAPRIL	SIV	\$ 0.1945	\$	0.3195
00002474816	JAMP ENALAPRIL	JPC	\$ 0.1945	\$	0.3195
00002444798	MAR-ENALAPRIL	MAR	\$ 0.1945	\$	0.3195
00002352265	RAN-ENALAPRIL	RAN	\$ 0.1945	\$	0.3195
00002299976	SANDOZ ENALAPRIL	SDZ	\$ 0.1945	\$	0.3195
00000670928	VASOTEC	ORC	\$ 0.1945	\$	1.4874

MAC pricing will be applied based on the LCA Price for lisinopril 1 x 20 mg tablet or the current price or LCA price whichever is the lowest.

24:00 CARDIOVASCULAR DRUGS**24:32.04 RENIN-ANGIOTENSIN-ALDOSTERONE SYSTEM INHIBITORS
(ANGIOTENSIN-CONVERTING ENZYME INHIBITORS)****ENALAPRIL MALEATE/ HYDROCHLOROTHIAZIDE****5 MG * 12.5 MG ORAL TABLET**00002352923 ENALAPRIL MALEATE/HCTZ AAP \$ **0.2503** \$ 0.7673*MAC pricing will be applied based on the LCA Price for lisinopril/hydrochlorothiazide 1 x 20 mg/25 mg tablet.***10 MG * 25 MG ORAL TABLET**00002352931 ENALAPRIL MALEATE/HCTZ AAP \$ **0.2503** \$ 1.074100000657298 VASERETIC ORC \$ **0.2503** \$ 1.2895*MAC pricing will be applied based on the LCA Price for lisinopril/hydrochlorothiazide 1 x 20 mg/25 mg tablet.*

FOSINOPRIL SODIUM**10 MG ORAL TABLET**00002266008 APO-FOSINOPRIL APX \$ **0.1945** \$ 0.217700002459388 FOSINOPRIL SNS \$ **0.1945** \$ 0.217700002331004 JAMP-FOSINOPRIL JPC \$ **0.1945** \$ 0.217700002247802 TEVA-FOSINOPRIL TEV \$ **0.1945** \$ 0.2177*MAC pricing will be applied based on the LCA Price for lisinopril 1 x 20 mg tablet.***20 MG ORAL TABLET**00002266016 APO-FOSINOPRIL APX \$ **0.1945** \$ 0.261900002459396 FOSINOPRIL SNS \$ **0.1945** \$ 0.261900002331012 JAMP-FOSINOPRIL JPC \$ **0.1945** \$ 0.261900002247803 TEVA-FOSINOPRIL TEV \$ **0.1945** \$ 0.2619*MAC pricing will be applied based on the LCA Price for lisinopril 1 x 20 mg tablet.*

24:00 CARDIOVASCULAR DRUGS

24:32.04 RENIN-ANGIOTENSIN-ALDOSTERONE SYSTEM INHIBITORS
(ANGIOTENSIN-CONVERTING ENZYME INHIBITORS)

LISINOPRIL**5 MG ORAL TABLET**

00002217481	APO-LISINOPRIL	APX	\$	0.1347
00002394472	AURO-LISINOPRIL	AUR	\$	0.1347
00002361531	JAMP-LISINOPRIL	JPC	\$	0.1347
00002386232	LISINOPRIL	SIV	\$	0.1347
00002525186	LISINOPRIL	SNS	\$	0.1347
00002285118	TEVA-LISINOPRIL (TYPE Z)	TEV	\$	0.1347
00002049333	ZESTRIL	SLP	\$	0.5969

10 MG ORAL TABLET

00002217503	APO-LISINOPRIL	APX	\$	0.1619
00002394480	AURO-LISINOPRIL	AUR	\$	0.1619
00002361558	JAMP-LISINOPRIL	JPC	\$	0.1619
00002386240	LISINOPRIL	SIV	\$	0.1619
00002525194	LISINOPRIL	SNS	\$	0.1619
00002285126	TEVA-LISINOPRIL (TYPE Z)	TEV	\$	0.1619
00002049376	ZESTRIL	SLP	\$	0.7172

20 MG ORAL TABLET

00002217511	APO-LISINOPRIL	APX	\$	0.1945
00002394499	AURO-LISINOPRIL	AUR	\$	0.1945
00002386259	LISINOPRIL	SIV	\$	0.1945
00002525208	LISINOPRIL	SNS	\$	0.1945
00002285134	TEVA-LISINOPRIL (TYPE Z)	TEV	\$	0.1945
00002049384	ZESTRIL	SLP	\$	0.8512

LISINOPRIL/ HYDROCHLOROTHIAZIDE**10 MG * 12.5 MG ORAL TABLET**

00002362945	LISINOPRIL/HCTZ (TYPE Z)	SNS	\$	0.2083
00002302365	SANDOZ LISINOPRIL HCT	SDZ	\$	0.2083
00002301768	TEVA-LISINOPRIL/HCTZ (TYPE Z)	TEV	\$	0.2083
00002103729	ZESTORETIC	SLP	\$	0.9707

20 MG * 12.5 MG ORAL TABLET

00002362953	LISINOPRIL/HCTZ (TYPE Z)	SNS	\$	0.2503
00002302373	SANDOZ LISINOPRIL HCT	SDZ	\$	0.2503
00002301776	TEVA-LISINOPRIL/HCTZ (TYPE Z)	TEV	\$	0.2503
00002045737	ZESTORETIC	SLP	\$	1.1666

20 MG * 25 MG ORAL TABLET

00002362961	LISINOPRIL/HCTZ (TYPE Z)	SNS	\$	0.2503
00002302381	SANDOZ LISINOPRIL HCT	SDZ	\$	0.2503
00002301784	TEVA-LISINOPRIL/HCTZ (TYPE Z)	TEV	\$	0.2503
00002045729	ZESTORETIC	SLP	\$	1.1666

24:00 CARDIOVASCULAR DRUGS**24:32.04 RENIN-ANGIOTENSIN-ALDOSTERONE SYSTEM INHIBITORS
(ANGIOTENSIN-CONVERTING ENZYME INHIBITORS)****PERINDOPRIL ERBUMINE****2 MG ORAL TABLET**

00002481677	AG-PERINDOPRIL	AGP	\$	0.1632
00002289261	APO-PERINDOPRIL	APX	\$	0.1632
00002459817	AURO-PERINDOPRIL	AUR	\$	0.1632
00002477009	JAMP PERINDOPRIL	JPC	\$	0.1632
00002527200	JAMP PERINDOPRIL ERBUMINE	JPC	\$	0.1632
00002482924	M-PERINDOPRIL ERBUMINE	MTR	\$	0.1632
00002474824	MAR-PERINDOPRIL	MAR	\$	0.1632
00002476762	MINT-PERINDOPRIL	MPI	\$	0.1632
00002489015	NRA-PERINDOPRIL	NRA	\$	0.1632
00002479877	PERINDOPRIL ERBUMINE	SIV	\$	0.1632
00002481634	PERINDOPRIL ERBUMINE	SNS	\$	0.1632
00002470675	PMS-PERINDOPRIL	PMS	\$	0.1632
00002470225	SANDOZ PERINDOPRIL ERBUMINE	SDZ	\$	0.1632
00002464985	TEVA-PERINDOPRIL	TEV	\$	0.1632
00002123274	COVERSYL	SEV	\$	0.7620

4 MG ORAL TABLET

00002481685	AG-PERINDOPRIL	AGP	\$ 0.1945	\$ 0.2042
00002289288	APO-PERINDOPRIL	APX	\$ 0.1945	\$ 0.2042
00002459825	AURO-PERINDOPRIL	AUR	\$ 0.1945	\$ 0.2042
00002477017	JAMP PERINDOPRIL	JPC	\$ 0.1945	\$ 0.2042
00002527219	JAMP PERINDOPRIL ERBUMINE	JPC	\$ 0.1945	\$ 0.2042
00002482932	M-PERINDOPRIL ERBUMINE	MTR	\$ 0.1945	\$ 0.2042
00002474832	MAR-PERINDOPRIL	MAR	\$ 0.1945	\$ 0.2042
00002476770	MINT-PERINDOPRIL	MPI	\$ 0.1945	\$ 0.2042
00002489023	NRA-PERINDOPRIL	NRA	\$ 0.1945	\$ 0.2042
00002479885	PERINDOPRIL ERBUMINE	SIV	\$ 0.1945	\$ 0.2042
00002481642	PERINDOPRIL ERBUMINE	SNS	\$ 0.1945	\$ 0.2042
00002470683	PMS-PERINDOPRIL	PMS	\$ 0.1945	\$ 0.2042
00002470233	SANDOZ PERINDOPRIL ERBUMINE	SDZ	\$ 0.1945	\$ 0.2042
00002464993	TEVA-PERINDOPRIL	TEV	\$ 0.1945	\$ 0.2042
00002123282	COVERSYL	SEV	\$ 0.1945	\$ 0.9540

MAC pricing will be applied based on the LCA Price for lisinopril 1 x 20 mg tablet.

8 MG ORAL TABLET

00002481693	AG-PERINDOPRIL	AGP	\$ 0.1945	\$ 0.2831
00002289296	APO-PERINDOPRIL	APX	\$ 0.1945	\$ 0.2831
00002459833	AURO-PERINDOPRIL	AUR	\$ 0.1945	\$ 0.2831
00002477025	JAMP PERINDOPRIL	JPC	\$ 0.1945	\$ 0.2831
00002527227	JAMP PERINDOPRIL ERBUMINE	JPC	\$ 0.1945	\$ 0.2831
00002482940	M-PERINDOPRIL ERBUMINE	MTR	\$ 0.1945	\$ 0.2831
00002474840	MAR-PERINDOPRIL	MAR	\$ 0.1945	\$ 0.2831
00002476789	MINT-PERINDOPRIL	MPI	\$ 0.1945	\$ 0.2831
00002489031	NRA-PERINDOPRIL	NRA	\$ 0.1945	\$ 0.2831
00002479893	PERINDOPRIL ERBUMINE	SIV	\$ 0.1945	\$ 0.2831
00002481650	PERINDOPRIL ERBUMINE	SNS	\$ 0.1945	\$ 0.2831
00002470691	PMS-PERINDOPRIL	PMS	\$ 0.1945	\$ 0.2831
00002470241	SANDOZ PERINDOPRIL ERBUMINE	SDZ	\$ 0.1945	\$ 0.2831
00002465000	TEVA-PERINDOPRIL	TEV	\$ 0.1945	\$ 0.2831
00002246624	COVERSYL	SEV	\$ 0.1945	\$ 1.3359

MAC pricing will be applied based on the LCA Price for lisinopril 1 x 20 mg tablet.

24:00 CARDIOVASCULAR DRUGS**24:32.04 RENIN-ANGIOTENSIN-ALDOSTERONE SYSTEM INHIBITORS
(ANGIOTENSIN-CONVERTING ENZYME INHIBITORS)****PERINDOPRIL ERBUMINE/ INDAPAMIDE HEMIHYDRATE****4 MG * 1.25 MG ORAL TABLET**

00002297574	APO-PERINDOPRIL-INDAPAMIDE	APX	\$ 0.2503	\$	0.2556
00002479834	PERINDOPRIL ERBUMINE/ INDAPAMIDE	SIV	\$ 0.2503	\$	0.2556
00002519720	PERINDOPRIL/INDAPAMIDE	SNS	\$ 0.2503	\$	0.2556
00002538008	PMS-PERINDOPRIL-INDAPAMIDE	PMS	\$ 0.2503	\$	0.2556
00002470438	SANDOZ PERINDOPRIL/INDAPAMIDE	SDZ	\$ 0.2503	\$	0.2556
00002464020	TEVA-PERINDOPRIL/INDAPAMIDE	TEV	\$ 0.2503	\$	0.2556
00002246569	COVERSYL PLUS	SEV	\$ 0.2503	\$	1.1499

MAC pricing will be applied based on the LCA Price for lisinopril/hydrochlorothiazide 1 x 20 mg/25 mg tablet.

8 MG * 2.5 MG ORAL TABLET

00002453061	APO-PERINDOPRIL-INDAPAMIDE	APX	\$ 0.2503	\$	0.2859
00002479842	PERINDOPRIL ERBUMINE/ INDAPAMIDE HD	SIV	\$ 0.2503	\$	0.2859
00002519739	PERINDOPRIL/INDAPAMIDE	SNS	\$ 0.2503	\$	0.2859
00002537982	PMS-PERINDOPRIL-INDAPAMIDE	PMS	\$ 0.2503	\$	0.2859
00002470446	SANDOZ PERINDOPRIL/INDAPAMIDE HD	SDZ	\$ 0.2503	\$	0.2859
00002464039	TEVA-PERINDOPRIL/INDAPAMIDE	TEV	\$ 0.2503	\$	0.2859
00002321653	COVERSYL PLUS HD	SEV	\$ 0.2503	\$	1.3359

MAC pricing will be applied based on the LCA Price for lisinopril/hydrochlorothiazide 1 x 20 mg/25 mg tablet.

24:00 CARDIOVASCULAR DRUGS**24:32.04 RENIN-ANGIOTENSIN-ALDOSTERONE SYSTEM INHIBITORS
(ANGIOTENSIN-CONVERTING ENZYME INHIBITORS)****QUINAPRIL****5 MG (BASE) ORAL TABLET**

00002248499	APO-QUINAPRIL	APX	\$ 0.1945	\$	0.4642
00002340550	PMS-QUINAPRIL	PMS	\$ 0.1945	\$	0.4642
00001947664	ACCUPRIL	PFI	\$ 0.1945	\$	1.0131

MAC pricing will be applied based on the LCA Price for Lisinopril 1 x 20 mg tablet.

10 MG (BASE) ORAL TABLET

00002248500	APO-QUINAPRIL	APX	\$ 0.1945	\$	0.2321
00002517450	JAMP QUINAPRIL	JPC	\$ 0.1945	\$	0.2321
00002340569	PMS-QUINAPRIL	PMS	\$ 0.1945	\$	0.2321
00001947672	ACCUPRIL	PFI	\$ 0.1945	\$	1.0131

MAC pricing will be applied based on the LCA Price for lisinopril 1 x 20 mg tablet.

20 MG (BASE) ORAL TABLET

00002248501	APO-QUINAPRIL	APX	\$ 0.1945	\$	0.2321
00002517469	JAMP QUINAPRIL	JPC	\$ 0.1945	\$	0.2321
00002340577	PMS-QUINAPRIL	PMS	\$ 0.1945	\$	0.2321
00001947680	ACCUPRIL	PFI	\$ 0.1945	\$	1.0131

MAC pricing will be applied based on the LCA Price for lisinopril 1 x 20 mg tablet.

40 MG (BASE) ORAL TABLET

00002248502	APO-QUINAPRIL	APX	\$ 0.1945	\$	0.2321
00002517477	JAMP QUINAPRIL	JPC	\$ 0.1945	\$	0.2321
00002340585	PMS-QUINAPRIL	PMS	\$ 0.1945	\$	0.2321
00001947699	ACCUPRIL	PFI	\$ 0.1945	\$	1.0131

MAC pricing will be applied based on the LCA Price for lisinopril 1 x 20 mg tablet.

QUINAPRIL/ HYDROCHLOROTHIAZIDE**10 MG (BASE) * 12.5 MG ORAL TABLET**

00002408767	APO-QUINAPRIL/HCTZ	APX	\$ 0.2503	\$	0.4786
00002473291	AURO-QUINAPRIL HCTZ	AUR	\$ 0.2503	\$	0.4786
00002237367	ACCURETIC 10/12.5	PFI	\$ 0.2503	\$	1.0091

MAC pricing will be applied based on the LCA Price for lisinopril/hydrochlorothiazide 1 x 20 mg/25 mg tablet.

20 MG (BASE) * 12.5 MG ORAL TABLET

00002408775	APO-QUINAPRIL/HCTZ	APX	\$ 0.2503	\$	0.4786
00002473305	AURO-QUINAPRIL HCTZ	AUR	\$ 0.2503	\$	0.4786
00002237368	ACCURETIC 20/12.5	PFI	\$ 0.2503	\$	1.0091

MAC pricing will be applied based on the LCA Price for lisinopril/hydrochlorothiazide 1 x 20 mg/25 mg tablet.

20 MG * 25 MG ORAL TABLET

00002408783	APO-QUINAPRIL/HCTZ	APX	\$ 0.2503	\$	0.4602
00002473321	AURO-QUINAPRIL HCTZ	AUR	\$ 0.2503	\$	0.4602
00002237369	ACCURETIC 20/25	PFI	\$ 0.2503	\$	0.9663

MAC pricing will be applied based on the LCA Price for lisinopril/hydrochlorothiazide 1 x 20 mg/25 mg tablet.

24:00 CARDIOVASCULAR DRUGS

24:32.04 **RENIN-ANGIOTENSIN-ALDOSTERONE SYSTEM INHIBITORS**
(ANGIOTENSIN-CONVERTING ENZYME INHIBITORS)

RAMIPRIL**1.25 MG ORAL CAPSULE/TABLET**

00002251515	APO-RAMIPRIL (CAPSULE)	APX	\$	0.0708
00002387387	AURO-RAMIPRIL (CAPSULE)	AUR	\$	0.0708
00002420457	MAR-RAMIPRIL (CAPSULE)	MAR	\$	0.0708
00002469057	PHARMA-RAMIPRIL (CAPSULE)	PMS	\$	0.0708
00002308363	RAMIPRIL (CAPSULE)	SIV	\$	0.0708
00002310503	RAN-RAMIPRIL (CAPSULE)	RAN	\$	0.0708
00002221829	ALTACE (CAPSULE)	VCL	\$	0.8461

2.5 MG ORAL CAPSULE/TABLET

00002477572	AG-RAMIPRIL (CAPSULE)	AGP	\$	0.0817
00002251531	APO-RAMIPRIL (CAPSULE)	APX	\$	0.0817
00002387395	AURO-RAMIPRIL (CAPSULE)	AUR	\$	0.0817
00002331128	JAMP-RAMIPRIL (CAPSULE)	JPC	\$	0.0817
00002420465	MAR-RAMIPRIL (CAPSULE)	MAR	\$	0.0817
00002421305	MINT-RAMIPRIL (CAPSULE)	MPI	\$	0.0817
00002486172	NRA-RAMIPRIL	NRA	\$	0.0817
00002469065	PHARMA-RAMIPRIL (CAPSULE)	PMS	\$	0.0817
00002287927	RAMIPRIL (CAPSULE)	SIV	\$	0.0817
00002374846	RAMIPRIL (CAPSULE)	SNS	\$	0.0817
00002310511	RAN-RAMIPRIL (CAPSULE)	RAN	\$	0.0817
00002247945	TEVA-RAMIPRIL (CAPSULE)	TEV	\$	0.0817
00002221837	ALTACE (CAPSULE)	VCL	\$	0.9519

5 MG ORAL CAPSULE/TABLET

00002477580	AG-RAMIPRIL (CAPSULE)	AGP	\$	0.0817
00002251574	APO-RAMIPRIL (CAPSULE)	APX	\$	0.0817
00002387409	AURO-RAMIPRIL (CAPSULE)	AUR	\$	0.0817
00002331136	JAMP-RAMIPRIL (CAPSULE)	JPC	\$	0.0817
00002420473	MAR-RAMIPRIL (CAPSULE)	MAR	\$	0.0817
00002421313	MINT-RAMIPRIL (CAPSULE)	MPI	\$	0.0817
00002486180	NRA-RAMIPRIL	NRA	\$	0.0817
00002469073	PHARMA-RAMIPRIL (CAPSULE)	PMS	\$	0.0817
00002287935	RAMIPRIL (CAPSULE)	SIV	\$	0.0817
00002374854	RAMIPRIL (CAPSULE)	SNS	\$	0.0817
00002310538	RAN-RAMIPRIL (CAPSULE)	RAN	\$	0.0817
00002247946	TEVA-RAMIPRIL (CAPSULE)	TEV	\$	0.0817
00002221845	ALTACE (CAPSULE)	VCL	\$	0.9768

10 MG ORAL CAPSULE/TABLET

00002477599	AG-RAMIPRIL (CAPSULE)	AGP	\$	0.1034
00002251582	APO-RAMIPRIL (CAPSULE)	APX	\$	0.1034
00002387417	AURO-RAMIPRIL (CAPSULE)	AUR	\$	0.1034
00002331144	JAMP-RAMIPRIL (CAPSULE)	JPC	\$	0.1034
00002420481	MAR-RAMIPRIL (CAPSULE)	MAR	\$	0.1034
00002421321	MINT-RAMIPRIL (CAPSULE)	MPI	\$	0.1034
00002486199	NRA-RAMIPRIL	NRA	\$	0.1034
00002469081	PHARMA-RAMIPRIL (CAPSULE)	PMS	\$	0.1034
00002287943	RAMIPRIL (CAPSULE)	SIV	\$	0.1034
00002374862	RAMIPRIL (CAPSULE)	SNS	\$	0.1034
00002310546	RAN-RAMIPRIL (CAPSULE)	RAN	\$	0.1034
00002247947	TEVA-RAMIPRIL (CAPSULE)	TEV	\$	0.1034
00002221853	ALTACE (CAPSULE)	VCL	\$	1.2547

24:00 CARDIOVASCULAR DRUGS**24:32.04 RENIN-ANGIOTENSIN-ALDOSTERONE SYSTEM INHIBITORS
(ANGIOTENSIN-CONVERTING ENZYME INHIBITORS)****RAMIPRIL/ HYDROCHLOROTHIAZIDE****2.5 MG * 12.5 MG ORAL TABLET**

00002449439	RAN-RAMIPRIL HCTZ	RAN	\$	0.2242
00002283131	ALTACE HCT	VCL	\$	0.3423

5 MG * 12.5 MG ORAL TABLET

00002449447	RAN-RAMIPRIL HCTZ	RAN	\$ 0.2503	\$	0.3016
00002283158	ALTACE HCT	VCL		\$	0.4386

MAC pricing will be applied based on the LCA Price for lisinopril/hydrochlorothiazide 1 x 20 mg/25 mg tablet.

5 MG * 25 MG ORAL TABLET

00002449463	RAN-RAMIPRIL HCTZ	RAN	\$ 0.2503	\$	0.2872
00002283174	ALTACE HCT	VCL	\$ 0.2503	\$	0.4386

MAC pricing will be applied based on the LCA Price for lisinopril/hydrochlorothiazide 1 x 20 mg/25 mg tablet.

10 MG * 12.5 MG ORAL TABLET

00002342154	PMS-RAMIPRIL-HCTZ	PMS	\$	0.2634
00002449455	RAN-RAMIPRIL HCTZ	RAN	\$	0.2634
00002283166	ALTACE HCT	VCL	\$	0.5744

10 MG * 25 MG ORAL TABLET

00002342170	PMS-RAMIPRIL-HCTZ	PMS	\$	0.2634
00002449471	RAN-RAMIPRIL HCTZ	RAN	\$	0.2634
00002283182	ALTACE HCT	VCL	\$	0.5744

TRANDOLAPRIL**0.5 MG ORAL CAPSULE**

00002471868	AURO-TRANDOLAPRIL	AUR	\$	0.0698
00002357755	PMS-TRANDOLAPRIL	PMS	\$	0.0698
00002325721	SANDOZ TRANDOLAPRIL	SDZ	\$	0.0698
00002231457	MAVIK	BGP	\$	0.2790

1 MG ORAL CAPSULE

00002471876	AURO-TRANDOLAPRIL	AUR	\$	0.1762
00002357763	PMS-TRANDOLAPRIL	PMS	\$	0.1762
00002325748	SANDOZ TRANDOLAPRIL	SDZ	\$	0.1762
00002525046	TRANDOLAPRIL	SNS	\$	0.1762
00002526565	TRANDOLAPRIL	SIV	\$	0.1762
00002231459	MAVIK	BGP	\$	0.7046

2 MG ORAL CAPSULE

00002471884	AURO-TRANDOLAPRIL	AUR	\$ 0.1945	\$	0.2025
00002357771	PMS-TRANDOLAPRIL	PMS	\$ 0.1945	\$	0.2025
00002325756	SANDOZ TRANDOLAPRIL	SDZ	\$ 0.1945	\$	0.2025
00002525054	TRANDOLAPRIL	SNS	\$ 0.1945	\$	0.2025
00002526573	TRANDOLAPRIL	SIV	\$ 0.1945	\$	0.2025
00002231460	MAVIK	BGP	\$ 0.1945	\$	0.8098

MAC pricing will be applied based on the LCA Price for lisinopril 1 x 20 mg tablet or the current price or LCA price whichever is the lowest.

24:00 CARDIOVASCULAR DRUGS24:32.04 RENIN-ANGIOTENSIN-ALDOSTERONE SYSTEM INHIBITORS
(ANGIOTENSIN-CONVERTING ENZYME INHIBITORS)**TRANDOLAPRIL****4 MG ORAL CAPSULE**

00002471892	AURO-TRANDOLAPRIL	AUR	\$ 0.1945	\$	0.2498
00002357798	PMS-TRANDOLAPRIL	PMS	\$ 0.1945	\$	0.2498
00002325764	SANDOZ TRANDOLAPRIL	SDZ	\$ 0.1945	\$	0.2498
00002525070	TRANDOLAPRIL	SNS	\$ 0.1945	\$	0.2498
00002526581	TRANDOLAPRIL	SIV	\$ 0.1945	\$	0.2498
00002239267	MAVIK	BGP	\$ 0.1945	\$	0.9990

MAC pricing will be applied based on the LCA Price for lisinopril 1 x 20 mg tablet or the current price or LCA price whichever is the lowest.

24:00 CARDIOVASCULAR DRUGS24:32.08 RENIN-ANGIOTENSIN-ALDOSTERONE SYSTEM INHIBITORS
(ANGIOTENSIN II RECEPTOR ANTAGONISTS)**CANDESARTAN CILEXETIL****8 MG ORAL TABLET**

00002365359	APO-CANDESARTAN	APX	\$	0.2281
00002445794	AURO-CANDESARTAN	AUR	\$	0.2281
00002388707	CANDESARTAN	SIV	\$	0.2281
00002388928	CANDESARTAN	SNS	\$	0.2281
00002379279	CANDESARTAN CILEXETIL	AHI	\$	0.2281
00002386518	JAMP-CANDESARTAN	JPC	\$	0.2281
00002476916	MINT-CANDESARTAN	MPI	\$	0.2281
00002527014	NRA-CANDESARTAN	NRA	\$	0.2281
00002391198	PMS-CANDESARTAN	PMS	\$	0.2281
00002380692	RAN-CANDESARTAN	RAN	\$	0.2281
00002326965	SANDOZ CANDESARTAN	SDZ	\$	0.2281
00002366312	TEVA-CANDESARTAN	TEV	\$	0.2281
00002239091	ATACAND	AZC	\$	1.3999

16 MG ORAL TABLET

00002365367	APO-CANDESARTAN	APX	\$	0.2281
00002445808	AURO-CANDESARTAN	AUR	\$	0.2281
00002388715	CANDESARTAN	SIV	\$	0.2281
00002388936	CANDESARTAN	SNS	\$	0.2281
00002379287	CANDESARTAN CILEXETIL	AHI	\$	0.2281
00002386526	JAMP-CANDESARTAN	JPC	\$	0.2281
00002476924	MINT-CANDESARTAN	MPI	\$	0.2281
00002527022	NRA-CANDESARTAN	NRA	\$	0.2281
00002391201	PMS-CANDESARTAN	PMS	\$	0.2281
00002380706	RAN-CANDESARTAN	RAN	\$	0.2281
00002326973	SANDOZ CANDESARTAN	SDZ	\$	0.2281
00002366320	TEVA-CANDESARTAN	TEV	\$	0.2281
00002239092	ATACAND	AZC	\$	1.3999

24:00 CARDIOVASCULAR DRUGS**24:32.08 RENIN-ANGIOTENSIN-ALDOSTERONE SYSTEM INHIBITORS
(ANGIOTENSIN II RECEPTOR ANTAGONISTS)****CANDESARTAN CILEXETIL****32 MG ORAL TABLET**

00002399105	APO-CANDESARTAN	APX	\$	0.2281
00002445816	AURO-CANDESARTAN	AUR	\$	0.2281
00002435845	CANDESARTAN	SNS	\$	0.2281
00002528266	CANDESARTAN	SIV	\$	0.2281
00002379295	CANDESARTAN CILEXETIL	AHI	\$	0.2281
00002386534	JAMP-CANDESARTAN	JPC	\$	0.2281
00002476932	MINT-CANDESARTAN	MPI	\$	0.2281
00002527030	NRA-CANDESARTAN	NRA	\$	0.2281
00002391228	PMS-CANDESARTAN	PMS	\$	0.2281
00002380714	RAN-CANDESARTAN	RAN	\$	0.2281
00002417340	SANDOZ CANDESARTAN	SDZ	\$	0.2281
00002366339	TEVA-CANDESARTAN	TEV	\$	0.2281
00002311658	ATACAND	AZC	\$	1.3999

CANDESARTAN CILEXETIL/ HYDROCHLOROTHIAZIDE**16 MG * 12.5 MG ORAL TABLET**

00002421038	AURO-CANDESARTAN HCT	AUR	\$	0.2156
00002394812	CANDESARTAN HCT	SIV	\$	0.2156
00002394804	CANDESARTAN/HCTZ	SNS	\$	0.2156
00002473240	JAMP CANDESARTAN-HCT	JPC	\$	0.2156
00002531240	NRA-CANDESARTAN HCTZ	NRA	\$	0.2156
00002391295	PMS-CANDESARTAN HCTZ	PMS	\$	0.2156
00002327902	SANDOZ CANDESARTAN PLUS	SDZ	\$	0.2156
00002395541	TEVA-CANDESARTAN/HCTZ	TEV	\$	0.2156
00002244021	ATACAND PLUS	AZC	\$	1.4252

32 MG * 12.5 MG ORAL TABLET

00002421046	AURO-CANDESARTAN HCT	AUR	\$	0.2156
00002473259	JAMP CANDESARTAN-HCT	JPC	\$	0.2156
00002531259	NRA-CANDESARTAN HCTZ	NRA	\$	0.2156
00002420732	SANDOZ CANDESARTAN PLUS	SDZ	\$	0.2156
00002395568	TEVA-CANDESARTAN/HCTZ	TEV	\$	0.2156
00002332922	ATACAND PLUS	AZC	\$	1.4252

32 MG * 25 MG ORAL TABLET

00002421054	AURO-CANDESARTAN HCT	AUR	\$	0.3008
00002473267	JAMP CANDESARTAN-HCT	JPC	\$	0.3008
00002531267	NRA-CANDESARTAN HCTZ	NRA	\$	0.3008
00002420740	SANDOZ CANDESARTAN PLUS	SDZ	\$	0.3008
00002332957	ATACAND PLUS	AZC	\$	1.4252

24:00 CARDIOVASCULAR DRUGS**24:32.08 RENIN-ANGIOTENSIN-ALDOSTERONE SYSTEM INHIBITORS
(ANGIOTENSIN II RECEPTOR ANTAGONISTS)****IRBESARTAN****75 MG ORAL TABLET**

00002406098	AURO-IRBESARTAN	AUR	\$	0.2281
00002372347	IRBESARTAN	SNS	\$	0.2281
00002385287	IRBESARTAN	SIV	\$	0.2281
00002524813	M-IRBESARTAN	MTR	\$	0.2281
00002422980	MINT-IRBESARTAN	MPI	\$	0.2281
00002317060	PMS-IRBESARTAN	PMS	\$	0.2281
00002406810	RAN-IRBESARTAN	RAN	\$	0.2281
00002328461	SANDOZ IRBESARTAN	SDZ	\$	0.2281
00002316390	TEVA-IRBESARTAN	TEV	\$	0.2281
00002237923	AVAPRO	SAV	\$	1.2671

150 MG ORAL TABLET

00002372371	IRBESARTAN	SNS	\$	0.2281
00002385295	IRBESARTAN	SIV	\$	0.2281
00002524821	M-IRBESARTAN	MTR	\$	0.2281
00002422999	MINT-IRBESARTAN	MPI	\$	0.2281
00002317079	PMS-IRBESARTAN	PMS	\$	0.2281
00002406829	RAN-IRBESARTAN	RAN	\$	0.2281
00002328488	SANDOZ IRBESARTAN	SDZ	\$	0.2281
00002316404	TEVA-IRBESARTAN	TEV	\$	0.2281
00002237924	AVAPRO	SAV	\$	1.2671

300 MG ORAL TABLET

00002406128	AURO-IRBESARTAN	AUR	\$	0.2281
00002372398	IRBESARTAN	SNS	\$	0.2281
00002385309	IRBESARTAN	SIV	\$	0.2281
00002524848	M-IRBESARTAN	MTR	\$	0.2281
00002423006	MINT-IRBESARTAN	MPI	\$	0.2281
00002317087	PMS-IRBESARTAN	PMS	\$	0.2281
00002406837	RAN-IRBESARTAN	RAN	\$	0.2281
00002328496	SANDOZ IRBESARTAN	SDZ	\$	0.2281
00002316412	TEVA-IRBESARTAN	TEV	\$	0.2281
00002237925	AVAPRO	SAV	\$	1.2671

IRBESARTAN/ HYDROCHLOROTHIAZIDE**150 MG * 12.5 MG ORAL TABLET**

00002447878	AURO-IRBESARTAN HCT	AUR	\$	0.2281
00002385317	IRBESARTAN HCT	SIV	\$	0.2281
00002372886	IRBESARTAN/HCTZ	SNS	\$	0.2281
00002328518	PMS-IRBESARTAN-HCTZ	PMS	\$	0.2281
00002337428	SANDOZ IRBESARTAN HCT	SDZ	\$	0.2281
00002330512	TEVA-IRBESARTAN HCTZ	TEV	\$	0.2281
00002241818	AVALIDE 150/12.5	SAV	\$	1.3165

300 MG * 12.5 MG ORAL TABLET

00002447886	AURO-IRBESARTAN HCT	AUR	\$	0.2281
00002385325	IRBESARTAN HCT	SIV	\$	0.2281
00002372894	IRBESARTAN/HCTZ	SNS	\$	0.2281
00002328526	PMS-IRBESARTAN-HCTZ	PMS	\$	0.2281
00002337436	SANDOZ IRBESARTAN HCT	SDZ	\$	0.2281
00002330520	TEVA-IRBESARTAN HCTZ	TEV	\$	0.2281
00002241819	AVALIDE 300/12.5	SAV	\$	1.3165

24:00 CARDIOVASCULAR DRUGS**24:32.08 RENIN-ANGIOTENSIN-ALDOSTERONE SYSTEM INHIBITORS
(ANGIOTENSIN II RECEPTOR ANTAGONISTS)****IRBESARTAN/ HYDROCHLOROTHIAZIDE**

300 MG * 25 MG ORAL TABLET

00002447894	AURO-IRBESARTAN HCT	AUR	\$	0.2184
00002385333	IRBESARTAN HCT	SIV	\$	0.2184
00002372908	IRBESARTAN/HCTZ	SNS	\$	0.2184
00002328534	PMS-IRBESARTAN-HCTZ	PMS	\$	0.2184
00002337444	SANDOZ IRBESARTAN HCT	SDZ	\$	0.2184
00002330539	TEVA-IRBESARTAN HCTZ	TEV	\$	0.2184

LOSARTAN POTASSIUM

25 MG ORAL TABLET

00002379058	APO-LOSARTAN	APX	\$	0.1616
00002403323	AURO-LOSARTAN	AUR	\$	0.1616
00002398834	JAMP-LOSARTAN	JPC	\$	0.1616
00002388790	LOSARTAN	SIV	\$	0.1616
00002388863	LOSARTAN	SNS	\$	0.1616
00002405733	MINT-LOSARTAN	MPI	\$	0.1616
00002309750	PMS-LOSARTAN	PMS	\$	0.1616
00002313332	SANDOZ LOSARTAN	SDZ	\$	0.1616
00002424967	SEPTA-LOSARTAN	SEP	\$	0.1616
00002380838	TEVA-LOSARTAN	TEV	\$	0.1616
00002182815	COZAAR	ORC	\$	1.4940

50 MG ORAL TABLET

00002353504	APO-LOSARTAN	APX	\$	0.1616
00002403331	AURO-LOSARTAN	AUR	\$	0.1616
00002398842	JAMP-LOSARTAN	JPC	\$	0.1616
00002388804	LOSARTAN	SIV	\$	0.1616
00002388871	LOSARTAN	SNS	\$	0.1616
00002405741	MINT-LOSARTAN	MPI	\$	0.1616
00002309769	PMS-LOSARTAN	PMS	\$	0.1616
00002313340	SANDOZ LOSARTAN	SDZ	\$	0.1616
00002424975	SEPTA-LOSARTAN	SEP	\$	0.1616
00002357968	TEVA-LOSARTAN	TEV	\$	0.1616
00002182874	COZAAR	ORC	\$	1.4940

100 MG ORAL TABLET

00002353512	APO-LOSARTAN	APX	\$	0.1616
00002403358	AURO-LOSARTAN	AUR	\$	0.1616
00002398850	JAMP-LOSARTAN	JPC	\$	0.1616
00002388812	LOSARTAN	SIV	\$	0.1616
00002388898	LOSARTAN	SNS	\$	0.1616
00002405768	MINT-LOSARTAN	MPI	\$	0.1616
00002309777	PMS-LOSARTAN	PMS	\$	0.1616
00002313359	SANDOZ LOSARTAN	SDZ	\$	0.1616
00002424983	SEPTA-LOSARTAN	SEP	\$	0.1616
00002357976	TEVA-LOSARTAN	TEV	\$	0.1616
00002182882	COZAAR	ORC	\$	1.4940

24:00 CARDIOVASCULAR DRUGS**24:32.08 RENIN-ANGIOTENSIN-ALDOSTERONE SYSTEM INHIBITORS
(ANGIOTENSIN II RECEPTOR ANTAGONISTS)****LOSARTAN POTASSIUM/ HYDROCHLOROTHIAZIDE****50 MG * 12.5 MG ORAL TABLET**

00002423642	AURO-LOSARTAN HCT	AUR	\$	0.3146
00002388960	LOSARTAN/HCT	SIV	\$	0.3146
00002427648	LOSARTAN/HCTZ	SNS	\$	0.3146
00002389657	MINT-LOSARTAN/HCTZ	MPI	\$	0.3146
00002392224	PMS-LOSARTAN-HCTZ	PMS	\$	0.3146
00002313375	SANDOZ LOSARTAN HCT	SDZ	\$	0.3146
00002230047	HYZAAR	ORC	\$	1.4940

100 MG * 12.5 MG ORAL TABLET

00002423650	AURO-LOSARTAN HCT	AUR	\$	0.3082
00002388979	LOSARTAN/HCT	SIV	\$	0.3082
00002427656	LOSARTAN/HCTZ	SNS	\$	0.3082
00002392232	PMS-LOSARTAN-HCTZ	PMS	\$	0.3082
00002362449	SANDOZ LOSARTAN HCT	SDZ	\$	0.3082
00002297841	HYZAAR	ORC	\$	1.4627

100 MG * 25 MG ORAL TABLET

00002423669	AURO-LOSARTAN HCT	AUR	\$	0.3146
00002388987	LOSARTAN/HCT	SIV	\$	0.3146
00002427664	LOSARTAN/HCTZ	SNS	\$	0.3146
00002389673	MINT-LOSARTAN/HCTZ DS	MPI	\$	0.3146
00002392240	PMS-LOSARTAN-HCTZ	PMS	\$	0.3146
00002313383	SANDOZ LOSARTAN HCT DS	SDZ	\$	0.3146
00002428547	SEPTA-LOSARTAN HCTZ	SEP	\$	0.3146
00002241007	HYZAAR DS	ORC	\$	1.4940

OLMESARTAN MEDOXOMIL**20 MG ORAL TABLET**

00002456311	ACH-OLMESARTAN	AHI	\$	0.3019
00002442191	ACT OLMESARTAN	TEV	\$	0.3019
00002453452	APO-OLMESARTAN	APX	\$	0.3019
00002443864	AURO-OLMESARTAN	AUR	\$	0.3019
00002469812	GLN-OLMESARTAN	GLM	\$	0.3019
00002461641	JAMP-OLMESARTAN	JPC	\$	0.3019
00002499258	NRA-OLMESARTAN	NRA	\$	0.3019
00002481057	OLMESARTAN	SNS	\$	0.3019
00002461307	PMS-OLMESARTAN	PMS	\$	0.3019
00002443414	SANDOZ OLMESARTAN	SDZ	\$	0.3019
00002318660	OLMETEC	ORC	\$	1.1607

40 MG ORAL TABLET

00002456338	ACH-OLMESARTAN	AHI	\$	0.3019
00002442205	ACT OLMESARTAN	TEV	\$	0.3019
00002453460	APO-OLMESARTAN	APX	\$	0.3019
00002443872	AURO-OLMESARTAN	AUR	\$	0.3019
00002469820	GLN-OLMESARTAN	GLM	\$	0.3019
00002461668	JAMP-OLMESARTAN	JPC	\$	0.3019
00002499266	NRA-OLMESARTAN	NRA	\$	0.3019
00002481065	OLMESARTAN	SNS	\$	0.3019
00002461315	PMS-OLMESARTAN	PMS	\$	0.3019
00002443422	SANDOZ OLMESARTAN	SDZ	\$	0.3019
00002318679	OLMETEC	ORC	\$	1.1607

24:00 CARDIOVASCULAR DRUGS

24:32.08 RENIN-ANGIOTENSIN-ALDOSTERONE SYSTEM INHIBITORS
(ANGIOTENSIN II RECEPTOR ANTAGONISTS)

OLMESARTAN MEDOXOMIL/ HYDROCHLOROTHIAZIDE**20 MG * 12.5 MG ORAL TABLET**

00002468948	ACH-OLMESARTAN HCTZ	AHI	\$	0.3019
00002443112	ACT OLMESARTAN HCT	TEV	\$	0.3019
00002453606	APO-OLMESARTAN/HCTZ	APX	\$	0.3019
00002476487	AURO-OLMESARTAN HCTZ	AUR	\$	0.3019
00002475707	GLN-OLMESARTAN HCTZ	GLM	\$	0.3019
00002508273	NRA-OLMESARTAN HCTZ	NRA	\$	0.3019
00002509601	OLMESARTAN/HCTZ	SNS	\$	0.3019
00002526468	PRZ-OLMESARTAN/HCTZ	PCI	\$	0.3019
00002319616	OLMETEC PLUS	ORC	\$	1.1607

40 MG * 12.5 MG ORAL TABLET

00002468956	ACH-OLMESARTAN HCTZ	AHI	\$	0.3019
00002443120	ACT OLMESARTAN HCT	TEV	\$	0.3019
00002453614	APO-OLMESARTAN/HCTZ	APX	\$	0.3019
00002476495	AURO-OLMESARTAN HCTZ	AUR	\$	0.3019
00002475715	GLN-OLMESARTAN HCTZ	GLM	\$	0.3019
00002508281	NRA-OLMESARTAN HCTZ	NRA	\$	0.3019
00002509636	OLMESARTAN/HCTZ	SNS	\$	0.3019
00002526476	PRZ-OLMESARTAN/HCTZ	PCI	\$	0.3019
00002319624	OLMETEC PLUS	ORC	\$	1.1607

40 MG * 25 MG ORAL TABLET

00002468964	ACH-OLMESARTAN HCTZ	AHI	\$	0.3019
00002443139	ACT OLMESARTAN HCT	TEV	\$	0.3019
00002453622	APO-OLMESARTAN/HCTZ	APX	\$	0.3019
00002476509	AURO-OLMESARTAN HCTZ	AUR	\$	0.3019
00002475723	GLN-OLMESARTAN HCTZ	GLM	\$	0.3019
00002508303	NRA-OLMESARTAN HCTZ	NRA	\$	0.3019
00002509628	OLMESARTAN/HCTZ	SNS	\$	0.3019
00002526484	PRZ-OLMESARTAN/HCTZ	PCI	\$	0.3019
00002319632	OLMETEC PLUS	ORC	\$	1.1607

24:00 CARDIOVASCULAR DRUGS**24:32.08 RENIN-ANGIOTENSIN-ALDOSTERONE SYSTEM INHIBITORS
(ANGIOTENSIN II RECEPTOR ANTAGONISTS)****TELMISARTAN****40 MG ORAL TABLET**

00002407485	ACH-TELMISARTAN	AHI	\$	0.2161
00002453568	AURO-TELMISARTAN	AUR	\$	0.2161
00002386755	JAMP TELMISARTAN	JPC	\$	0.2161
00002486369	MINT-TELMISARTAN	MPI	\$	0.2161
00002503794	NRA-TELMISARTAN	NRA	\$	0.2161
00002499622	PMS-TELMISARTAN	PMS	\$	0.2161
00002375958	SANDOZ TELMISARTAN	SDZ	\$	0.2161
00002388944	TELMISARTAN	SNS	\$	0.2161
00002390345	TELMISARTAN	SIV	\$	0.2161
00002320177	TEVA-TELMISARTAN	TEV	\$	0.2161
00002240769	MICARDIS	BOE	\$	1.3103

80 MG ORAL TABLET

00002407493	ACH-TELMISARTAN	AHI	\$	0.2161
00002453576	AURO-TELMISARTAN	AUR	\$	0.2161
00002386763	JAMP TELMISARTAN	JPC	\$	0.2161
00002486377	MINT-TELMISARTAN	MPI	\$	0.2161
00002503808	NRA-TELMISARTAN	NRA	\$	0.2161
00002499630	PMS-TELMISARTAN	PMS	\$	0.2161
00002375966	SANDOZ TELMISARTAN	SDZ	\$	0.2161
00002388952	TELMISARTAN	SNS	\$	0.2161
00002390353	TELMISARTAN	SIV	\$	0.2161
00002320185	TEVA-TELMISARTAN	TEV	\$	0.2161
00002240770	MICARDIS	BOE	\$	1.3103

TELMISARTAN/ AMLODIPINE BESYLATE**40 MG * 5 MG ORAL TABLET**

00002371022	TWYNSTA	BOE	\$	0.7664
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40 MG * 10 MG ORAL TABLET

00002371030	TWYNSTA	BOE	\$	0.7664
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80 MG * 5 MG ORAL TABLET

00002473488	APO-TELMISARTAN-AMLODIPINE	APX	\$	0.5472
00002371049	TWYNSTA	BOE	\$	0.7664

80 MG * 10 MG ORAL TABLET

00002473496	APO-TELMISARTAN-AMLODIPINE	APX	\$	0.5472
00002371057	TWYNSTA	BOE	\$	0.7664

24:00 CARDIOVASCULAR DRUGS**24:32.08 RENIN-ANGIOTENSIN-ALDOSTERONE SYSTEM INHIBITORS
(ANGIOTENSIN II RECEPTOR ANTAGONISTS)****TELMISARTAN/ HYDROCHLOROTHIAZIDE****80 MG * 12.5 MG ORAL TABLET**

00002419114	ACH-TELMISARTAN HCTZ	AHI	\$	0.2098
00002456389	AURO-TELMISARTAN HCTZ	AUR	\$	0.2098
00002389940	JAMP TELMISARTAN-HCT	JPC	\$	0.2098
00002504146	NRA-TELMISARTAN HCTZ	NRA	\$	0.2098
00002393557	SANDOZ TELMISARTAN HCT	SDZ	\$	0.2098
00002390302	TELMISARTAN HCTZ	SIV	\$	0.2098
00002395355	TELMISARTAN/HCTZ	SNS	\$	0.2098
00002330288	TEVA-TELMISARTAN HCTZ	TEV	\$	0.2098
00002244344	MICARDIS PLUS	BOE	\$	1.3103

80 MG * 25 MG ORAL TABLET

00002419122	ACH-TELMISARTAN HCTZ	AHI	\$	0.2098
00002456397	AURO-TELMISARTAN HCTZ	AUR	\$	0.2098
00002389959	JAMP TELMISARTAN-HCT	JPC	\$	0.2098
00002504138	NRA-TELMISARTAN HCTZ	NRA	\$	0.2098
00002393565	SANDOZ TELMISARTAN HCT	SDZ	\$	0.2098
00002390310	TELMISARTAN HCTZ	SIV	\$	0.2098
00002395363	TELMISARTAN/HCTZ	SNS	\$	0.2098
00002379252	TEVA-TELMISARTAN HCTZ	TEV	\$	0.2098
00002318709	MICARDIS PLUS	BOE	\$	1.3103

VALSARTAN**80 MG ORAL TABLET**

00002414228	AURO-VALSARTAN	AUR	\$	0.2159
00002524538	M-VALSARTAN	MTR	\$	0.2159
00002356759	SANDOZ VALSARTAN	SDZ	\$	0.2159
00002363100	TARO-VALSARTAN	SPG	\$	0.2159
00002356651	TEVA-VALSARTAN	TEV	\$	0.2159
00002366959	VALSARTAN	SNS	\$	0.2159
00002384531	VALSARTAN	SIV	\$	0.2159
00002244781	DIOVAN	NOV	\$	1.3989

160 MG ORAL TABLET

00002414236	AURO-VALSARTAN	AUR	\$	0.2159
00002524546	M-VALSARTAN	MTR	\$	0.2159
00002356767	SANDOZ VALSARTAN	SDZ	\$	0.2159
00002363119	TARO-VALSARTAN	SPG	\$	0.2159
00002356678	TEVA-VALSARTAN	TEV	\$	0.2159
00002366967	VALSARTAN	SNS	\$	0.2159
00002384558	VALSARTAN	SIV	\$	0.2159
00002244782	DIOVAN	NOV	\$	1.3989

320 MG ORAL TABLET

00002414244	AURO-VALSARTAN	AUR	\$	0.2098
00002356775	SANDOZ VALSARTAN	SDZ	\$	0.2098
00002356686	TEVA-VALSARTAN	TEV	\$	0.2098
00002366975	VALSARTAN	SNS	\$	0.2098
00002384566	VALSARTAN	SIV	\$	0.2098
00002289504	DIOVAN	NOV	\$	1.3475

24:00 CARDIOVASCULAR DRUGS**24:32.08 RENIN-ANGIOTENSIN-ALDOSTERONE SYSTEM INHIBITORS
(ANGIOTENSIN II RECEPTOR ANTAGONISTS)****VALSARTAN/ HYDROCHLOROTHIAZIDE****80 MG * 12.5 MG ORAL TABLET**

00002408112	AURO-VALSARTAN HCT	AUR	\$	0.2213
00002356694	SANDOZ VALSARTAN HCT	SDZ	\$	0.2213
00002356996	TEVA-VALSARTAN/HCTZ	TEV	\$	0.2213
00002367009	VALSARTAN HCT	SNS	\$	0.2213
00002384736	VALSARTAN HCT	SIV	\$	0.2213
00002241900	DIOVAN-HCT	NOV	\$	1.3914

160 MG * 12.5 MG ORAL TABLET

00002408120	AURO-VALSARTAN HCT	AUR	\$	0.2240
00002356708	SANDOZ VALSARTAN HCT	SDZ	\$	0.2240
00002357003	TEVA-VALSARTAN/HCTZ	TEV	\$	0.2240
00002367017	VALSARTAN HCT	SNS	\$	0.2240
00002384744	VALSARTAN HCT	SIV	\$	0.2240
00002241901	DIOVAN-HCT	NOV	\$	1.3964

160 MG * 25 MG ORAL TABLET

00002408139	AURO-VALSARTAN HCT	AUR	\$	0.2238
00002356716	SANDOZ VALSARTAN HCT	SDZ	\$	0.2238
00002357011	TEVA-VALSARTAN/HCTZ	TEV	\$	0.2238
00002367025	VALSARTAN HCT	SNS	\$	0.2238
00002384752	VALSARTAN HCT	SIV	\$	0.2238
00002246955	DIOVAN-HCT	NOV	\$	1.4014

320 MG * 12.5 MG ORAL TABLET

00002408147	AURO-VALSARTAN HCT	AUR	\$	0.2235
00002356724	SANDOZ VALSARTAN HCT	SDZ	\$	0.2235
00002357038	TEVA-VALSARTAN/HCTZ	TEV	\$	0.2235
00002367033	VALSARTAN HCT	SNS	\$	0.2235
00002384760	VALSARTAN HCT	SIV	\$	0.2235
00002308908	DIOVAN-HCT	NOV	\$	1.3796

320 MG * 25 MG ORAL TABLET

00002408155	AURO-VALSARTAN HCT	AUR	\$	0.2231
00002356732	SANDOZ VALSARTAN HCT	SDZ	\$	0.2231
00002357046	TEVA-VALSARTAN/HCTZ	TEV	\$	0.2231
00002367041	VALSARTAN HCT	SNS	\$	0.2231
00002308916	DIOVAN-HCT	NOV	\$	1.3796

24:00 CARDIOVASCULAR DRUGS**24:32.20 RENIN-ANGIOTENSIN-ALDOSTERONE SYSTEM INHIBITORS
(MINERALOCORTICOID (ALDOSTERONE) RECEPTOR
ANTAGONISTS)****HYDROCHLOROTHIAZIDE/ SPIRONOLACTONE****25 MG * 25 MG ORAL TABLET**

00000613231	TEVA-SPIRONOLACTONE/HCTZ	TEV	\$	0.1441
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50 MG * 50 MG ORAL TABLET

00000657182	TEVA-SPIRONOLACTONE/HCTZ	TEV	\$	0.3048
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24:00 CARDIOVASCULAR DRUGS

24:32.20 RENIN-ANGIOTENSIN-ALDOSTERONE SYSTEM INHIBITORS
(MINERALOCORTICOID (ALDOSTERONE) RECEPTOR
ANTAGONISTS)

SPIRONOLACTONE**25 MG ORAL TABLET**

00002518821	JAMP SPIRONOLACTONE	JPC	\$	0.0405
00002488140	MINT-SPIRONOLACTONE	MPI	\$	0.0405
00000613215	TEVA-SPIRONOLACTONE	TEV	\$	0.0405

100 MG ORAL TABLET

00002518848	JAMP SPIRONOLACTONE	JPC	\$	0.0955
00002488159	MINT-SPIRONOLACTONE	MPI	\$	0.0955
00000613223	TEVA-SPIRONOLACTONE	TEV	\$	0.0955

28:00

Central Nervous System Agents

28:00 CENTRAL NERVOUS SYSTEM AGENTS**28:08 ANALGESICS AND ANTIPYRETICS****COMPOUND PRESCRIPTION****TOPICAL**

00000999105	COMPD- NSAID/ ANALG/MUSCLE RELAX (NOT DICLOFENAC)-TOPICAL	XXX	\$	0.0000
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To determine eligibility of a compound, pharmacies can contact Alberta Blue Cross for verification.

In order for a compound to be eligible:

- the compounded prescription must contain in therapeutic dosage; one or more drug(s) identified as allowable Drug Benefits; or one or more chemical entities; and
- the compounded prescription must not duplicate a manufactured drug product, whether the drug product is or is not identified as an allowable Drug Benefit; and
- the compounded prescription must not include a chemical entity or drug product, with the exception of diluents or bases, specifically identified as not an allowable Drug Benefit.

To be used when the compound has been prepared and dispensed by a licensed community pharmacy.

TOPICAL

00000999205	COMPD-NSAID/ ANALG/MUSCLE RELAX (NOT DICLOFENAC)-TOPICAL	XXX	\$	0.0000
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To determine eligibility of a compound, pharmacies can contact Alberta Blue Cross for verification.

In order for a compound to be eligible:

- the compounded prescription must contain in therapeutic dosage; one or more drug(s) identified as allowable Drug Benefits; or one or more chemical entities; and
- the compounded prescription must not duplicate a manufactured drug product, whether the drug product is or is not identified as an allowable Drug Benefit; and
- the compounded prescription must not include a chemical entity or drug product, with the exception of diluents or bases, specifically identified as not an allowable Drug Benefit.

To be used when the compound has been procured from a licensed compound and repackaging pharmacy and dispensed by a licensed community pharmacy.

28:00 CENTRAL NERVOUS SYSTEM AGENTS**28:08.04 ANALGESICS AND ANTIPYRETICS
(NONSTEROIDAL ANTI-INFLAMMATORY AGENTS)****COMPOUND PRESCRIPTION****TOPICAL**

00000999102	COMPOUND-DICLOFENAC (TOPICAL)	XXX	\$	0.0000
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To determine eligibility of a compound, pharmacies can contact Alberta Blue Cross for verification.

In order for a compound to be eligible:

- the compounded prescription must contain in therapeutic dosage; one or more drug(s) identified as allowable Drug Benefits; or one or more chemical entities; and
- the compounded prescription must not duplicate a manufactured drug product, whether the drug product is or is not identified as an allowable Drug Benefit; and
- the compounded prescription must not include a chemical entity or drug product, with the exception of diluents or bases, specifically identified as not an allowable Drug Benefit.

To be used when the compound has been prepared and dispensed by a licensed community pharmacy.

TOPICAL

00000999202	COMPOUND-DICLOFENAC (TOPICAL)	XXX	\$	0.0000
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To determine eligibility of a compound, pharmacies can contact Alberta Blue Cross for verification.

In order for a compound to be eligible:

- the compounded prescription must contain in therapeutic dosage; one or more drug(s) identified as allowable Drug Benefits; or one or more chemical entities; and
- the compounded prescription must not duplicate a manufactured drug product, whether the drug product is or is not identified as an allowable Drug Benefit; and
- the compounded prescription must not include a chemical entity or drug product, with the exception of diluents or bases, specifically identified as not an allowable Drug Benefit.

To be used when the compound has been procured from a licensed compound and repackaging pharmacy and dispensed by a licensed community pharmacy.

28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:08.04.24 ANALGESICS AND ANTIPYRETICS
NONSTEROIDAL ANTI-INFLAMMATORY AGENTS
(SALICYLATES)

BUTALBITAL/ CAFFEINE/ ASA

50 MG * 40 MG * 330 MG ORAL TABLET

00000608211 TEVA-TECNAL TEV \$ 1.2753

50 MG * 40 MG * 330 MG ORAL CAPSULE

00000608238 TEVA-TECNAL TEV \$ 1.6192

00000226327 FIORINAL ARA \$ 1.8525

28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:08.04.92 ANALGESICS AND ANTIPYRETICS
NONSTEROIDAL ANTI-INFLAMMATORY AGENTS
(OTHER NONSTEROIDAL ANTI-INFLAMMATORY AGENTS)

DICLOFENAC SODIUM

75 MG ORAL SUSTAINED-RELEASE TABLET

00002162814 APO-DICLO SR APX \$ 0.4529

00002158582 TEVA-DICLOFENAC SR TEV \$ 0.4529

100 MG ORAL SUSTAINED-RELEASE TABLET

00002091194 APO-DICLO SR APX \$ 0.3124 \$ 0.4048

00002261944 SANDOZ DICLOFENAC SR SDZ \$ 0.3124 \$ 0.4048

MAC pricing has been applied based on the LCA Price for 4 X 25 mg oral enteric-coated tablets.

25 MG ORAL ENTERIC-COATED TABLET

00000839175 APO-DICLO APX \$ 0.0781

00002302616 PMS-DICLOFENAC PMS \$ 0.0781

00000808539 TEVA-DICLOFENAC EC TEV \$ 0.0781

50 MG ORAL ENTERIC-COATED TABLET

00000839183 APO-DICLO APX \$ 0.1562 \$ 0.2024

00002302624 PMS-DICLOFENAC PMS \$ 0.1562 \$ 0.2024

00000808547 TEVA-DICLOFENAC EC TEV \$ 0.1562 \$ 0.2024

MAC pricing has been applied based on the LCA Price for 2 x 25 mg oral enteric-coated tablets.

50 MG RECTAL SUPPOSITORY

00002261928 SANDOZ DICLOFENAC SDZ \$ 1.2818

00000632724 VOLTAREN NOV \$ 1.5650

DICLOFENAC SODIUM/ MISOPROSTOL

50 MG * 200 MCG ORAL ENTERIC-COATED TABLET

00002341689 GD-DICLOFENAC/MISOPROSTOL 50 GMD \$ 0.3149

00002413469 PMS-DICLOFENAC-MISOPROSTOL PMS \$ 0.3149

00001917056 ARTHROTEC-50 PFI \$ 0.7449

75 MG * 200 MCG ORAL ENTERIC-COATED TABLET

00002341697 GD-DICLOFENAC/MISOPROSTOL 75 GMD \$ 0.4286

00002413477 PMS-DICLOFENAC-MISOPROSTOL PMS \$ 0.4286

00002229837 ARTHROTEC-75 PFI \$ 1.0138

28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:08.04.92 ANALGESICS AND ANTIPYRETICS
 NONSTEROIDAL ANTI-INFLAMMATORY AGENTS
 (OTHER NONSTEROIDAL ANTI-INFLAMMATORY AGENTS)

FLURBIPROFEN**50 MG ORAL TABLET**

00001912046	FLURBIPROFEN	AAP	\$	0.4530
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100 MG ORAL TABLET

00001912038	FLURBIPROFEN	AAP	\$	0.5930
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IBUPROFEN**300 MG ORAL TABLET**

00000441651	APO-IBUPROFEN	APX	\$	0.1377
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400 MG ORAL TABLET

00000506052	APO-IBUPROFEN	APX	\$	0.0468
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600 MG ORAL TABLET

00000585114	APO-IBUPROFEN	APX	\$	0.1313
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INDOMETHACIN**25 MG ORAL CAPSULE**

00002461811	MINT-INDOMETHACIN	MPI	\$	0.1519
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00000337420	TEVA-INDOMETHACIN	TEV	\$	0.1519
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50 MG ORAL CAPSULE

00002461536	MINT-INDOMETHACIN	MPI	\$	0.1234
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00000337439	TEVA-INDOMETHACIN	TEV	\$	0.1234
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50 MG RECTAL SUPPOSITORY

00002231799	ODAN-INDOMETHACIN	ODN	\$	1.2500
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100 MG RECTAL SUPPOSITORY

00002231800	ODAN-INDOMETHACIN	ODN	\$	1.6700
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KETOPROFEN**200 MG ORAL SUSTAINED-RELEASE TABLET**

00002172577	KETOPROFEN SR	AAP	\$ 1.7410	\$ 1.7721
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MAC pricing has been applied based on the price for 2 x 100 mg oral enteric-coated tablets.

50 MG ORAL ENTERIC-COATED TABLET

00000790435	KETOPROFEN-E	AAP	\$	0.4302
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100 MG ORAL ENTERIC-COATED TABLET

00000842664	KETOPROFEN-E	AAP	\$	0.8705
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KETOROLAC TROMETHAMINE**10 MG ORAL TABLET**

00002229080	APO-KETOROLAC	APX	\$	0.1773
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00002510855	JAMP KETOROLAC	JPC	\$	0.1773
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00002465124	MAR-KETOROLAC	MAR	\$	0.1773
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00002461455	MINT-KETOROLAC	MPI	\$	0.1773
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00002162660	TORADOL	AAP	\$	0.7494
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10 MG / ML INJECTION

00002162644	TORADOL	AMP	\$	1.4240
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30 MG / ML INJECTION

00002239944	KETOROLAC TROMETHAMINE	SDZ	\$	3.0870
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00002244947	KETOROLAC TROMETHAMINE	FKC	\$	3.0870
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00002443376	KETOROLAC TROMETHAMINE	JUN	\$	3.0870
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28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:08.04.92 ANALGESICS AND ANTIPYRETICS
 NONSTEROIDAL ANTI-INFLAMMATORY AGENTS
 (OTHER NONSTEROIDAL ANTI-INFLAMMATORY AGENTS)

MEFENAMIC ACID

250 MG ORAL CAPSULE

00002229452	MEFENAMIC	AAP	\$	0.4774
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NABUMETONE

500 MG ORAL TABLET

00002238639	NABUMETONE	AAP	\$	0.6130
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NAPROXEN

250 MG ORAL TABLET

00000522651	APO-NAPROXEN	APX	\$	0.1068
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00000565350	TEVA-NAPROX	TEV	\$	0.1068
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375 MG ORAL TABLET

00000600806	APO-NAPROXEN	APX	\$	0.1458
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00000627097	TEVA-NAPROX	TEV	\$	0.1458
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500 MG ORAL TABLET

00000592277	APO-NAPROXEN	APX	\$	0.2110
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00000589861	TEVA-NAPROX	TEV	\$	0.2110
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750 MG ORAL SUSTAINED-RELEASE TABLET

00002162466	NAPROSYN SR	AMP	\$ 0.2916	\$ 1.4086
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MAC pricing has been applied based on the LCA price for 2 x 375 mg oral tablets.

250 MG ORAL ENTERIC-COATED TABLET

00002243312	TEVA-NAPROX EC	TEV	\$ 0.1068	\$ 0.1068
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MAC pricing has been applied based on the LCA price for 1 x 250 mg oral tablet.

375 MG ORAL ENTERIC-COATED TABLET

00002246700	APO-NAPROXEN EC	APX	\$ 0.1458	\$ 0.1458
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00002243313	TEVA-NAPROX EC	TEV	\$ 0.1458	\$ 0.1458
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00002162415	NAPROSYN E	AMP	\$ 0.1458	\$ 0.5841
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MAC pricing has been applied based on the LCA price for 1 x 375 mg oral tablet.

500 MG ORAL ENTERIC-COATED TABLET

00002246701	APO-NAPROXEN EC	APX	\$ 0.2110	\$ 0.2110
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00002243314	TEVA-NAPROX EC	TEV	\$ 0.2110	\$ 0.2110
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00002162423	NAPROSYN E	AMP	\$ 0.2110	\$ 1.0537
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MAC pricing has been applied based on the LCA price for 1 x 500 mg oral tablet.

NAPROXEN SODIUM

275 MG ORAL TABLET

00000784354	APO-NAPRO-NA	APX	\$	0.3422
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00002351013	NAPROXEN SODIUM	SNS	\$	0.3422
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00000778389	TEVA-NAPROX SODIUM	TEV	\$	0.3422
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00002162725	ANAPROX	AMP	\$	0.6652
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550 MG ORAL TABLET

00001940309	APO-NAPRO-NA DS	APX	\$	0.6667
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00002026600	TEVA-NAPROX SODIUM DS	TEV	\$	0.6667
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00002162717	ANAPROX DS	AMP	\$	1.2808
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28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:08.04.92 ANALGESICS AND ANTIPYRETICS
NONSTEROIDAL ANTI-INFLAMMATORY AGENTS
(OTHER NONSTEROIDAL ANTI-INFLAMMATORY AGENTS)

PIROXICAM

10 MG ORAL CAPSULE

00000695718 TEVA-PIROXICAM TEV \$ 0.2324

20 MG ORAL CAPSULE

00000695696 TEVA-PIROXICAM TEV \$ 0.3897

SULINDAC

150 MG ORAL TABLET

00000745588 TEVA-SULINDAC TEV \$ 0.4648

200 MG ORAL TABLET

00000745596 TEVA-SULINDAC TEV \$ 0.5792

TIAPROFENIC ACID

200 MG ORAL TABLET

00002179679 TEVA-TIAPROFENIC ACID TEV \$ 0.6014

300 MG ORAL TABLET

00002179687 TEVA-TIAPROFENIC ACID TEV \$ 0.8898

28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:08.08 ANALGESICS AND ANTIPYRETICS
(OPIATE AGONISTS)

BUTALBITAL/ CODEINE PHOSPHATE/ ASA/ CAFFEINE

50 MG * 15 MG * 330 MG * 40 MG ORAL CAPSULE

00000608203 TEVA-TECNAL-C 1/4 TEV \$ 1.7363

00000176192 FIORINAL-C 1/4 ARA \$ 1.9868

50 MG * 30 MG * 330 MG * 40 MG ORAL CAPSULE

00000608181 TEVA-TECNAL-C 1/2 TEV \$ 2.0249

00000176206 FIORINAL-C 1/2 ARA \$ 2.4327

CODEINE PHOSPHATE

15 MG ORAL TABLET

00000593435 TEVA-CODEINE TEV \$ 0.0906

30 MG ORAL TABLET

00000593451 TEVA-CODEINE TEV \$ 0.1522

CODEINE PHOSPHATE/ ACETAMINOPHEN

30 MG * 300 MG ORAL TABLET

00000608882 TEVA-EMTEC-30 TEV \$ 0.1738

60 MG * 300 MG ORAL TABLET

00000621463 TEVA-LENOLTEC NO.4 TEV \$ 0.1769

1.6 MG / ML * 32 MG / ML ORAL ELIXIR

00000816027 PMS-ACETAMINOPHEN WITH CODEINE PMS \$ 0.1370

RESTRICTED BENEFIT

This Drug Product is a benefit for patients 12 years of age and older

28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:08.08 ANALGESICS AND ANTIPYRETICS
(OPIATE AGONISTS)

CODEINE PHOSPHATE/ ACETAMINOPHEN/ CAFFEINE

15 MG * 300 MG * 15 MG ORAL TABLET

00000653241 TEVA-LENOLTEC NO.2

TEV

\$ 0.0933

30 MG * 300 MG * 15 MG ORAL TABLET

00000653276 TEVA-LENOLTEC NO.3

TEV

\$ 0.0980

28:00 CENTRAL NERVOUS SYSTEM AGENTS**28:08.08 ANALGESICS AND ANTIPYRETICS
(OPIATE AGONISTS)****COMPOUND PRESCRIPTION**

0000999108 COMPOUND NARCOTIC MIXTURES - ORAL XXX \$ 0.0000
AND INJECTION

To determine eligibility of a compound, pharmacies can contact Alberta Blue Cross for verification.

In order for a compound to be eligible:

- the compounded prescription must contain in therapeutic dosage; one or more drug(s) identified as allowable Drug Benefits; or one or more chemical entities; and
- the compounded prescription must not duplicate a manufactured drug product, whether the drug product is or is not identified as an allowable Drug Benefit; and
- the compounded prescription must not include a chemical entity or drug product, with the exception of diluents or bases, specifically identified as not an allowable Drug Benefit.

To be used when the compound has been prepared and dispensed by a licensed community pharmacy.

0000999208 COMPOUND NARCOTIC MIXTURES - ORAL XXX \$ 0.0000
AND INJECTION

To determine eligibility of a compound, pharmacies can contact Alberta Blue Cross for verification.

In order for a compound to be eligible:

- the compounded prescription must contain in therapeutic dosage; one or more drug(s) identified as allowable Drug Benefits; or one or more chemical entities; and
- the compounded prescription must not duplicate a manufactured drug product, whether the drug product is or is not identified as an allowable Drug Benefit; and
- the compounded prescription must not include a chemical entity or drug product, with the exception of diluents or bases, specifically identified as not an allowable Drug Benefit.

To be used when the compound has been procured from a licensed compound and repackaging pharmacy and dispensed by a licensed community pharmacy.

28:00 CENTRAL NERVOUS SYSTEM AGENTS**28:08.08 ANALGESICS AND ANTIPYRETICS
(OPIATE AGONISTS)****HYDROMORPHONE HCL****1 MG ORAL TABLET**

00002364115	APO-HYDROMORPHONE	APX	\$	0.0950
00000885444	PMS-HYDROMORPHONE	PMS	\$	0.0950
00000705438	DILAUDID	PUR	\$	0.0987

2 MG ORAL TABLET

00002364123	APO-HYDROMORPHONE	APX	\$	0.1416
00000885436	PMS-HYDROMORPHONE	PMS	\$	0.1416
00000125083	DILAUDID	PUR	\$	0.1471

4 MG ORAL TABLET

00002364131	APO-HYDROMORPHONE	APX	\$	0.2240
00000885401	PMS-HYDROMORPHONE	PMS	\$	0.2240
00000125121	DILAUDID	PUR	\$	0.2327

8 MG ORAL TABLET

00002364158	APO-HYDROMORPHONE	APX	\$	0.3528
00000885428	PMS-HYDROMORPHONE	PMS	\$	0.3528
00000786543	DILAUDID	PUR	\$	0.3666

3 MG ORAL CONTROLLED-RELEASE CAPSULE

00002125323	HYDROMORPH CONTIN	PUR	\$	0.6795
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4.5 MG ORAL CONTROLLED-RELEASE CAPSULE

00002359502	HYDROMORPH CONTIN	PUR	\$	0.8208
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6 MG ORAL CONTROLLED-RELEASE CAPSULE

00002125331	HYDROMORPH CONTIN	PUR	\$	1.0184
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9 MG ORAL CONTROLLED-RELEASE CAPSULE

00002359510	HYDROMORPH CONTIN	PUR	\$	1.3451
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12 MG ORAL CONTROLLED-RELEASE CAPSULE

00002125366	HYDROMORPH CONTIN	PUR	\$	1.7662
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18 MG ORAL CONTROLLED-RELEASE CAPSULE

00002243562	HYDROMORPH CONTIN	PUR	\$	2.5483
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24 MG ORAL CONTROLLED-RELEASE CAPSULE

00002125382	HYDROMORPH CONTIN	PUR	\$	2.9485
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30 MG ORAL CONTROLLED-RELEASE CAPSULE

00002125390	HYDROMORPH CONTIN	PUR	\$	3.5318
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1 MG / ML ORAL LIQUID

00001916386	PMS-HYDROMORPHONE	PMS	\$	0.0911
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2 MG / ML INJECTION

00002145901	HYDROMORPHONE	SDZ	\$	2.0591
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10 MG / ML INJECTION

00002145928	HYDROMORPHONE HP	SDZ	\$	4.3460
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20 MG / ML INJECTION

00002145936	HYDROMORPHONE HP 20	SDZ	\$	9.8440
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50 MG / ML INJECTION

00002469413	HYDROMORPHONE HCL HP	STM	\$	6.9525
00002146126	HYDROMORPHONE HP 50	SDZ	\$	6.9525

MEPERIDINE HCL**50 MG / ML INJECTION**

00000725765	MEPERIDINE HYDROCHLORIDE	SDZ	\$	3.0270
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28:00 CENTRAL NERVOUS SYSTEM AGENTS**28:08.08 ANALGESICS AND ANTIPYRETICS
(OPIATE AGONISTS)****METHADONE HCL****1 MG ORAL TABLET**

00002247698 METADOL PAL \$ 0.1865

5 MG ORAL TABLET

00002247699 METADOL PAL \$ 0.6212

10 MG ORAL TABLET

00002247700 METADOL PAL \$ 0.9939

25 MG ORAL TABLET

00002247701 METADOL PAL \$ 1.9021

1 MG / ML ORAL SOLUTION 00002247374 METADOL-D PAL \$ 0.0589 00002247694 METADOL PAL \$ 0.1240**10 MG / ML ORAL LIQUID**

00002495783 JAMP-METHADONE CONCENTRATE JPC \$ 0.0525

00002394596 METHADOSE MAL \$ 0.0525

00002394618 METHADOSE SUGAR FREE MAL \$ 0.0525

00002495872 ODAN-METHADONE (CHERRY FLAVOUR) ODN \$ 0.0525

00002495880 ODAN-METHADONE (UNFLAVOURED) ODN \$ 0.0525

 00002244290 METADOL-D PAL \$ 0.1553

00002241377 METADOL CONCENTRATE PAL \$ 0.4486

MORPHINE SULFATE**5 MG ORAL TABLET**

00002014203 MS.IR PUR \$ 0.1100

00000594652 STATEX PAL \$ 0.1247

10 MG ORAL TABLET

00002014211 MS.IR PUR \$ 0.1700

00000594644 STATEX PAL \$ 0.1929

20 MG ORAL TABLET

00002014238 MS.IR PUR \$ 0.3938

30 MG ORAL TABLET

00002014254 MS.IR PUR \$ 0.5051

15 MG ORAL SUSTAINED-RELEASE TABLET

00002244790 SANDOZ MORPHINE SR SDZ \$ 0.4145

00002302764 TEVA-MORPHINE SR TEV \$ 0.4145

00002015439 MS CONTIN PUR \$ 0.8286

30 MG ORAL SUSTAINED-RELEASE TABLET

00002244791 SANDOZ MORPHINE SR SDZ \$ 0.6580

00002302772 TEVA-MORPHINE SR TEV \$ 0.6580

00002014297 MS CONTIN PUR \$ 1.2540

100 MG ORAL SUSTAINED-RELEASE TABLET

00002478889 SANDOZ MORPHINE SR SDZ \$ 1.5395

00002302799 TEVA-MORPHINE SR TEV \$ 1.5395

00002014319 MS CONTIN PUR \$ 3.3626

200 MG ORAL SUSTAINED-RELEASE TABLET

00002478897 SANDOZ MORPHINE SR SDZ \$ 2.7718

00002302802 TEVA-MORPHINE SR TEV \$ 2.7718

00002014327 MS CONTIN PUR \$ 6.2631

10 MG ORAL EXTENDED-RELEASE CAPSULE

00002019930 M-ESLON ETP \$ 0.3416

15 MG ORAL EXTENDED-RELEASE CAPSULE

00002177749 M-ESLON ETP \$ 0.3941

The DBL is not a prescribing or a diagnostic tool. Prescribers should refer to drug monographs and utilize professional judgment.

28:00 CENTRAL NERVOUS SYSTEM AGENTS**28:08.08 ANALGESICS AND ANTIPYRETICS
(OPIATE AGONISTS)****MORPHINE SULFATE**

30 MG ORAL EXTENDED-RELEASE CAPSULE			
00002019949 M-ESLON	ETP	\$	0.5875
60 MG ORAL EXTENDED-RELEASE CAPSULE			
00002019957 M-ESLON	ETP	\$	1.0457
100 MG ORAL EXTENDED-RELEASE CAPSULE			
00002019965 M-ESLON	ETP	\$	2.2554
200 MG ORAL EXTENDED-RELEASE CAPSULE			
00002177757 M-ESLON	ETP	\$	4.5151
10 MG ORAL SUSTAINED-RELEASE CAPSULE			
00002242163 KADIAN	BGP	\$	0.4366
20 MG ORAL SUSTAINED-RELEASE CAPSULE			
00002184435 KADIAN	BGP	\$	0.8474
50 MG ORAL SUSTAINED-RELEASE CAPSULE			
00002184443 KADIAN	BGP	\$	1.5594
100 MG ORAL SUSTAINED-RELEASE CAPSULE			
00002184451 KADIAN	BGP	\$	2.7198
1 MG / ML INJECTION			
00002021048 MORPHINE LP EPIDURAL	SDZ	\$	7.0831
10 MG / ML INJECTION			
00000392588 MORPHINE SULFATE	SDZ	\$	2.7610
15 MG / ML INJECTION			
00000392561 MORPHINE SULFATE	SDZ	\$	3.0727
50 MG / ML INJECTION			
00000617288 MORPHINE HP 50	SDZ	\$	9.1387

OXYCODONE HCL

5 MG ORAL TABLET			
00000789739 SUPEUDOL	SDZ	\$	0.1505
00002319977 PMS-OXYCODONE	PMS	\$	0.1565
10 MG ORAL TABLET			
00000443948 SUPEUDOL	SDZ	\$	0.2397
00002319985 PMS-OXYCODONE	PMS	\$	0.2517
00002240131 OXY-IR	PUR	\$	0.4410
20 MG ORAL TABLET			
00002262983 SUPEUDOL	SDZ	\$	0.4163
00002319993 PMS-OXYCODONE	PMS	\$	0.4371
00002240132 OXY-IR	PUR	\$	0.7676
10 MG ORAL CONTROLLED-RELEASE TABLET			
00002372525 OXYNEO	PUR	\$	0.9740
15 MG ORAL CONTROLLED-RELEASE TABLET			
00002372533 OXYNEO	PUR	\$	1.1755
20 MG ORAL CONTROLLED-RELEASE TABLET			
00002372797 OXYNEO	PUR	\$	1.4610
30 MG ORAL CONTROLLED-RELEASE TABLET			
00002372541 OXYNEO	PUR	\$	1.9310
40 MG ORAL CONTROLLED-RELEASE TABLET			
00002372568 OXYNEO	PUR	\$	2.4920
60 MG ORAL CONTROLLED-RELEASE TABLET			
00002372576 OXYNEO	PUR	\$	3.4965
80 MG ORAL CONTROLLED-RELEASE TABLET			
00002372584 OXYNEO	PUR	\$	4.6785

The DBL is not a prescribing or a diagnostic tool. Prescribers should refer to drug monographs and utilize professional judgment.

28:00 CENTRAL NERVOUS SYSTEM AGENTS28:08.08 ANALGESICS AND ANTIPYRETICS
(OPIATE AGONISTS)**OXYCODONE HCL**

10 MG RECTAL SUPPOSITORY

00000392480 SUPEUDOL SDZ \$ 4.2037

20 MG RECTAL SUPPOSITORY

00000392472 SUPEUDOL SDZ \$ 6.0684

OXYCODONE HCL/ ACETAMINOPHEN

5 MG * 325 MG ORAL TABLET

00002324628 APO-OXYCODONE APX \$ 0.1285

00002307898 SANDOZ-OXYCODONE ACET SDZ \$ 0.1285

00000608165 TEVA-OXYCOCET TEV \$ 0.1285

OXYCODONE HCL/ ASA

5 MG * 325 MG ORAL TABLET

00000608157 TEVA-OXYCODAN TEV \$ 0.4829

28:00 CENTRAL NERVOUS SYSTEM AGENTS28:08.12 ANALGESICS AND ANTIPYRETICS
(OPIATE PARTIAL AGONISTS)**BUPRENORPHINE**

100 MG / SYR INJECTION SYRINGE

00002483084 SUBLOCADE IUK \$ 550.0000

300 MG / SYR INJECTION SYRINGE

00002483092 SUBLOCADE IUK \$ 550.0000

**BUPRENORPHINE HCL/ NALOXONE HYDROCHLORIDE
DIHYDRATE**

2 MG (BASE) * 0.5 MG (BASE) ORAL SUBLINGUAL TABLET

00002424851 PMS-BUPRENORPHINE/NALOXONE PMS \$ 1.3350

00002453908 TEVA-BUPRENORPHINE/NALOXONE TEV \$ 1.3350

00002295695 SUBOXONE IUK \$ 2.7261

8 MG (BASE) * 2 MG (BASE) ORAL SUBLINGUAL TABLET

00002424878 PMS-BUPRENORPHINE/NALOXONE PMS \$ 2.3650

00002453916 TEVA-BUPRENORPHINE/NALOXONE TEV \$ 2.3650

00002295709 SUBOXONE IUK \$ 4.8293

28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:10 OPIATE ANTAGONISTS

NALTREXONE HCL

50 MG ORAL TABLET

00002444275 APO-NALTREXONE APX \$ 2.8075

00002451883 NALTREXONE HYDROCHLORIDE JPC \$ 2.8075

00002213826 REVIA TEV \$ 2.8075

28:00 CENTRAL NERVOUS SYSTEM AGENTS28:12.04 ANTICONVULSANTS
(BARBITURATES)**PRIMIDONE****125 MG ORAL TABLET**

00000399310 PRIMIDONE AAP \$ 0.0698

250 MG ORAL TABLET

00000396761 PRIMIDONE AAP \$ 0.1098

28:00 CENTRAL NERVOUS SYSTEM AGENTS28:12.08 ANTICONVULSANTS
(BENZODIAZEPINES)**CLOBAZAM****10 MG ORAL TABLET**

00002244638 APO-CLOBAZAM APX \$ 0.2197

00002238334 TEVA-CLOBAZAM TEV \$ 0.2197

CLONAZEPAM**0.25 MG ORAL TABLET**

00002179660 PMS-CLONAZEPAM PMS \$ 0.0850

0.5 MG ORAL TABLET

00002177889 APO-CLONAZEPAM APX \$ 0.0418

00002048701 PMS-CLONAZEPAM PMS \$ 0.0418

00002207818 PMS-CLONAZEPAM-R PMS \$ 0.0418

00000382825 RIVOTRIL CAG \$ 0.2705

1 MG ORAL TABLET

00002048728 PMS-CLONAZEPAM PMS \$ 0.1721

2 MG ORAL TABLET

00002177897 APO-CLONAZEPAM APX \$ 0.0721

00002048736 PMS-CLONAZEPAM PMS \$ 0.0721

00000382841 RIVOTRIL CAG \$ 0.4663

28:00 CENTRAL NERVOUS SYSTEM AGENTS28:12.12 ANTICONVULSANTS
(HYDANTOINS)**PHENYTOIN****50 MG ORAL CHEWABLE TABLET**

00000023698 DILANTIN INFATABS BGP \$ 0.1000

6 MG / ML ORAL SUSPENSION

00000023442 DILANTIN-30 BGP \$ 0.0544

25 MG / ML ORAL SUSPENSION

00002250896 TARO-PHENYTOIN TAR \$ 0.0494

00000023450 DILANTIN-125 BGP \$ 0.0641

PHENYTOIN SODIUM**30 MG ORAL CAPSULE**

00000022772 DILANTIN BGP \$ 0.1576

100 MG ORAL CAPSULE

00002460912 PHENYTOIN SODIUM AAP \$ 0.0665

00000022780 DILANTIN BGP \$ 0.1002

28:00 CENTRAL NERVOUS SYSTEM AGENTS**28:12.20 ANTICONVULSANTS
(SUCCINIMIDES)****ETHOSUXIMIDE****250 MG ORAL CAPSULE**

00000022799 ZARONTIN ERF \$ 0.5250

50 MG / ML ORAL SYRUP

00000023485 ZARONTIN ERF \$ 0.0774

28:00 CENTRAL NERVOUS SYSTEM AGENTS**28:12.92 ANTICONVULSANTS
(MISCELLANEOUS ANTICONVULSANTS)****CARBAMAZEPINE****200 MG ORAL TABLET**

00002407515 TARO-CARBAMAZEPINE TAR \$ 0.3769

00000782718 TEVA-CARBAMAZ TEV \$ 0.3769

00000010405 TEGRETOL NOV \$ 0.4653

100 MG ORAL CHEWABLE TABLET

00002244403 TARO-CARBAMAZEPINE TAR \$ 0.1702

200 MG ORAL CHEWABLE TABLET

00002244404 TARO-CARBAMAZEPINE TAR \$ 0.3302

200 MG ORAL SUSTAINED-RELEASE TABLET

00002261839 SANDOZ CARBAMAZEPINE CR SDZ \$ 0.3845

00000773611 TEGRETOL CR NOV \$ 0.4692

400 MG ORAL SUSTAINED-RELEASE TABLET

00002261847 SANDOZ CARBAMAZEPINE CR SDZ \$ 0.7689

00000755583 TEGRETOL CR NOV \$ 0.9386

20 MG / ML ORAL SUSPENSION

00002367394 TARO-CARBAMAZEPINE TAR \$ 0.0802

00002194333 TEGRETOL NOV \$ 0.0900

DIVALPROEX SODIUM (VALPROIC ACID EQUIV.)**125 MG (BASE) ORAL ENTERIC-COATED TABLET**

00002239698 APO-DIVALPROEX APX \$ 0.1539

00002458926 MYLAN-DIVALPROEX MYP \$ 0.1539

00000596418 EPIVAL BGP \$ 0.3434

250 MG (BASE) ORAL ENTERIC-COATED TABLET

00002239699 APO-DIVALPROEX APX \$ 0.2767

00002458934 MYLAN-DIVALPROEX MYP \$ 0.2767

00000596426 EPIVAL BGP \$ 0.6172

500 MG (BASE) ORAL ENTERIC-COATED TABLET

00002239700 APO-DIVALPROEX APX \$ 0.5537

00002459019 MYLAN-DIVALPROEX MYP \$ 0.5537

00000596434 EPIVAL BGP \$ 1.2353

28:00 CENTRAL NERVOUS SYSTEM AGENTS
**28:12.92 ANTICONVULSANTS
(MISCELLANEOUS ANTICONVULSANTS)**
GABAPENTIN**100 MG ORAL CAPSULE**

00002477912	AG-GABAPENTIN	AGP	\$	0.0416
00002244304	APO-GABAPENTIN	APX	\$	0.0416
00002321203	AURO-GABAPENTIN	AUR	\$	0.0416
00002246314	GABAPENTIN	SIV	\$	0.0416
00002353245	GABAPENTIN	SNS	\$	0.0416
00002416840	GABAPENTIN	AHI	\$	0.0416
00002361469	JAMP-GABAPENTIN	JPC	\$	0.0416
00002391473	MAR-GABAPENTIN	MAR	\$	0.0416
00002408880	MINT-GABAPENTIN	MPI	\$	0.0416
00002243446	PMS-GABAPENTIN	PMS	\$	0.0416
00002244513	TEVA-GABAPENTIN	TEV	\$	0.0416
00002084260	NEURONTIN	BGP	\$	0.5260

300 MG ORAL CAPSULE

00002477920	AG-GABAPENTIN	AGP	\$	0.1012
00002244305	APO-GABAPENTIN	APX	\$	0.1012
00002321211	AURO-GABAPENTIN	AUR	\$	0.1012
00002246315	GABAPENTIN	SIV	\$	0.1012
00002353253	GABAPENTIN	SNS	\$	0.1012
00002416859	GABAPENTIN	AHI	\$	0.1012
00002361485	JAMP-GABAPENTIN	JPC	\$	0.1012
00002391481	MAR-GABAPENTIN	MAR	\$	0.1012
00002408899	MINT-GABAPENTIN	MPI	\$	0.1012
00002243447	PMS-GABAPENTIN	PMS	\$	0.1012
00002244514	TEVA-GABAPENTIN	TEV	\$	0.1012
00002084279	NEURONTIN	BGP	\$	1.2587

400 MG ORAL CAPSULE

00002477939	AG-GABAPENTIN	AGP	\$	0.1206
00002244306	APO-GABAPENTIN	APX	\$	0.1206
00002321238	AURO-GABAPENTIN	AUR	\$	0.1206
00002246316	GABAPENTIN	SIV	\$	0.1206
00002353261	GABAPENTIN	SNS	\$	0.1206
00002416867	GABAPENTIN	AHI	\$	0.1206
00002361493	JAMP-GABAPENTIN	JPC	\$	0.1206
00002391503	MAR-GABAPENTIN	MAR	\$	0.1206
00002408902	MINT-GABAPENTIN	MPI	\$	0.1206
00002243448	PMS-GABAPENTIN	PMS	\$	0.1206
00002244515	TEVA-GABAPENTIN	TEV	\$	0.1206
00002084287	NEURONTIN	BGP	\$	1.4999

28:00 CENTRAL NERVOUS SYSTEM AGENTS**28:12.92 ANTICONVULSANTS
(MISCELLANEOUS ANTICONVULSANTS)****LAMOTRIGINE****25 MG ORAL TABLET**

00002245208	APO-LAMOTRIGINE	APX	\$	0.0698
00002381354	AURO-LAMOTRIGINE	AUR	\$	0.0698
00002343010	LAMOTRIGINE	SNS	\$	0.0698
00002428202	LAMOTRIGINE	SIV	\$	0.0698
00002265494	MYLAN-LAMOTRIGINE	MYP	\$	0.0698
00002246897	PMS-LAMOTRIGINE	PMS	\$	0.0698
00002142082	LAMICTAL	GSK	\$	0.4443

100 MG ORAL TABLET

00002245209	APO-LAMOTRIGINE	APX	\$	0.2787
00002381362	AURO-LAMOTRIGINE	AUR	\$	0.2787
00002343029	LAMOTRIGINE	SNS	\$	0.2787
00002428210	LAMOTRIGINE	SIV	\$	0.2787
00002265508	MYLAN-LAMOTRIGINE	MYP	\$	0.2787
00002246898	PMS-LAMOTRIGINE	PMS	\$	0.2787
00002142104	LAMICTAL	GSK	\$	1.7736

150 MG ORAL TABLET

00002245210	APO-LAMOTRIGINE	APX	\$	0.4107
00002381370	AURO-LAMOTRIGINE	AUR	\$	0.4107
00002343037	LAMOTRIGINE	SNS	\$	0.4107
00002428229	LAMOTRIGINE	SIV	\$	0.4107
00002265516	MYLAN-LAMOTRIGINE	MYP	\$	0.4107
00002246899	PMS-LAMOTRIGINE	PMS	\$	0.4107
00002142112	LAMICTAL	GSK	\$	2.6136

5 MG ORAL CHEWABLE TABLET

00002240115	LAMICTAL	GSK	\$	0.1895
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28:00 CENTRAL NERVOUS SYSTEM AGENTS**28:12.92 ANTICONVULSANTS
(MISCELLANEOUS ANTICONVULSANTS)****LEVETIRACETAM****250 MG ORAL TABLET**

00002399776	ACH-LEVETIRACETAM	AHI	\$	0.3210
00002285924	APO-LEVETIRACETAM	APX	\$	0.3210
00002375249	AURO-LEVETIRACETAM	AUR	\$	0.3210
00002504553	JAMP LEVETIRACETAM	JPC	\$	0.3210
00002403005	JAMP-LEVETIRACETAM	JPC	\$	0.3210
00002353342	LEVETIRACETAM	SNS	\$	0.3210
00002442531	LEVETIRACETAM	SIV	\$	0.3210
00002524562	M-LEVETIRACETAM	MTR	\$	0.3210
00002442388	MINT-LEVETIRACETAM	MPI	\$	0.3210
00002440202	NAT-LEVETIRACETAM	NTP	\$	0.3210
00002499193	NRA-LEVETIRACETAM	NRA	\$	0.3210
00002296101	PMS-LEVETIRACETAM	PMS	\$	0.3210
00002482274	RIVA-LEVETIRACETAM	RIV	\$	0.3210
00002461986	SANDOZ LEVETIRACETAM	SDZ	\$	0.3210
00002274183	TEVA-LEVETIRACETAM	TEV	\$	0.3210
00002247027	KEPPRA	UCB	\$	1.7252

500 MG ORAL TABLET

00002399784	ACH-LEVETIRACETAM	AHI	\$	0.3911
00002285932	APO-LEVETIRACETAM	APX	\$	0.3911
00002375257	AURO-LEVETIRACETAM	AUR	\$	0.3911
00002504561	JAMP LEVETIRACETAM	JPC	\$	0.3911
00002403021	JAMP-LEVETIRACETAM	JPC	\$	0.3911
00002353350	LEVETIRACETAM	SNS	\$	0.3911
00002442558	LEVETIRACETAM	SIV	\$	0.3911
00002524570	M-LEVETIRACETAM	MTR	\$	0.3911
00002442396	MINT-LEVETIRACETAM	MPI	\$	0.3911
00002440210	NAT-LEVETIRACETAM	NTP	\$	0.3911
00002499207	NRA-LEVETIRACETAM	NRA	\$	0.3911
00002296128	PMS-LEVETIRACETAM	PMS	\$	0.3911
00002482282	RIVA-LEVETIRACETAM	RIV	\$	0.3911
00002461994	SANDOZ LEVETIRACETAM	SDZ	\$	0.3911
00002274191	TEVA-LEVETIRACETAM	TEV	\$	0.3911
00002247028	KEPPRA	UCB	\$	2.1213

750 MG ORAL TABLET

00002399792	ACH-LEVETIRACETAM	AHI	\$	0.5416
00002285940	APO-LEVETIRACETAM	APX	\$	0.5416
00002375265	AURO-LEVETIRACETAM	AUR	\$	0.5416
00002504588	JAMP LEVETIRACETAM	JPC	\$	0.5416
00002403048	JAMP-LEVETIRACETAM	JPC	\$	0.5416
00002353369	LEVETIRACETAM	SNS	\$	0.5416
00002442566	LEVETIRACETAM	SIV	\$	0.5416
00002524589	M-LEVETIRACETAM	MTR	\$	0.5416
00002442418	MINT-LEVETIRACETAM	MPI	\$	0.5416
00002440229	NAT-LEVETIRACETAM	NTP	\$	0.5416
00002499215	NRA-LEVETIRACETAM	NRA	\$	0.5416
00002296136	PMS-LEVETIRACETAM	PMS	\$	0.5416
00002482290	RIVA-LEVETIRACETAM	RIV	\$	0.5416
00002462001	SANDOZ LEVETIRACETAM	SDZ	\$	0.5416
00002274205	TEVA-LEVETIRACETAM	TEV	\$	0.5416
00002247029	KEPPRA	UCB	\$	2.9371

1,000 MG ORAL TABLET

00002462028	SANDOZ LEVETIRACETAM	SDZ	\$	0.7221
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The DBL is not a prescribing or a diagnostic tool. Prescribers should refer to drug monographs and utilize professional judgment.

28:00 CENTRAL NERVOUS SYSTEM AGENTS**28:12.92 ANTICONVULSANTS****(MISCELLANEOUS ANTICONVULSANTS)****LEVETIRACETAM**

100 MG / ML ORAL SOLUTION

00002490447	PDP-LEVETIRACETAM	PPH	\$	0.8460
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PREGABALIN

25 MG ORAL CAPSULE

00002449838	ACH-PREGABALIN	AHI	\$	0.1481
00002480727	AG-PREGABALIN	AGP	\$	0.1481
00002394235	APO-PREGABALIN	APX	\$	0.1481
00002433869	AURO-PREGABALIN	AUR	\$	0.1481
00002435977	JAMP-PREGABALIN	JPC	\$	0.1481
00002467291	M-PREGABALIN	MTR	\$	0.1481
00002417529	MAR-PREGABALIN	MAR	\$	0.1481
00002423804	MINT-PREGABALIN	MPI	\$	0.1481
00002494841	NAT-PREGABALIN	NTP	\$	0.1481
00002479117	NRA-PREGABALIN	NRA	\$	0.1481
00002359596	PMS-PREGABALIN	PMS	\$	0.1481
00002403692	PREGABALIN	SIV	\$	0.1481
00002405539	PREGABALIN	SNS	\$	0.1481
00002392801	RAN-PREGABALIN	RAN	\$	0.1481
00002390817	SANDOZ PREGABALIN	SDZ	\$	0.1481
00002361159	TEVA-PREGABALIN	TEV	\$	0.1481

50 MG ORAL CAPSULE

00002449846	ACH-PREGABALIN	AHI	\$	0.2324
00002480735	AG-PREGABALIN	AGP	\$	0.2324
00002394243	APO-PREGABALIN	APX	\$	0.2324
00002433877	AURO-PREGABALIN	AUR	\$	0.2324
00002435985	JAMP-PREGABALIN	JPC	\$	0.2324
00002467305	M-PREGABALIN	MTR	\$	0.2324
00002417537	MAR-PREGABALIN	MAR	\$	0.2324
00002423812	MINT-PREGABALIN	MPI	\$	0.2324
00002494868	NAT-PREGABALIN	NTP	\$	0.2324
00002479125	NRA-PREGABALIN	NRA	\$	0.2324
00002359618	PMS-PREGABALIN	PMS	\$	0.2324
00002403706	PREGABALIN	SIV	\$	0.2324
00002405547	PREGABALIN	SNS	\$	0.2324
00002392828	RAN-PREGABALIN	RAN	\$	0.2324
00002390825	SANDOZ PREGABALIN	SDZ	\$	0.2324
00002361175	TEVA-PREGABALIN	TEV	\$	0.2324

28:00 CENTRAL NERVOUS SYSTEM AGENTS
**28:12.92 ANTICONVULSANTS
(MISCELLANEOUS ANTICONVULSANTS)**
PREGABALIN**75 MG ORAL CAPSULE**

00002449854	ACH-PREGABALIN	AHI	\$	0.3007
00002480743	AG-PREGABALIN	AGP	\$	0.3007
00002394251	APO-PREGABALIN	APX	\$	0.3007
00002433885	AURO-PREGABALIN	AUR	\$	0.3007
00002435993	JAMP-PREGABALIN	JPC	\$	0.3007
00002467313	M-PREGABALIN	MTR	\$	0.3007
00002417545	MAR-PREGABALIN	MAR	\$	0.3007
00002424185	MINT-PREGABALIN	MPI	\$	0.3007
00002494876	NAT-PREGABALIN	NTP	\$	0.3007
00002479133	NRA-PREGABALIN	NRA	\$	0.3007
00002359626	PMS-PREGABALIN	PMS	\$	0.3007
00002403714	PREGABALIN	SIV	\$	0.3007
00002405555	PREGABALIN	SNS	\$	0.3007
00002392836	RAN-PREGABALIN	RAN	\$	0.3007
00002390833	SANDOZ PREGABALIN	SDZ	\$	0.3007
00002361183	TEVA-PREGABALIN	TEV	\$	0.3007

150 MG ORAL CAPSULE

00002449870	ACH-PREGABALIN	AHI	\$	0.4145
00002480751	AG-PREGABALIN	AGP	\$	0.4145
00002394278	APO-PREGABALIN	APX	\$	0.4145
00002433907	AURO-PREGABALIN	AUR	\$	0.4145
00002436000	JAMP-PREGABALIN	JPC	\$	0.4145
00002467321	M-PREGABALIN	MTR	\$	0.4145
00002417561	MAR-PREGABALIN	MAR	\$	0.4145
00002424207	MINT-PREGABALIN	MPI	\$	0.4145
00002494884	NAT-PREGABALIN	NTP	\$	0.4145
00002479168	NRA-PREGABALIN	NRA	\$	0.4145
00002359634	PMS-PREGABALIN	PMS	\$	0.4145
00002403722	PREGABALIN	SIV	\$	0.4145
00002405563	PREGABALIN	SNS	\$	0.4145
00002392844	RAN-PREGABALIN	RAN	\$	0.4145
00002390841	SANDOZ PREGABALIN	SDZ	\$	0.4145
00002361205	TEVA-PREGABALIN	TEV	\$	0.4145

300 MG ORAL CAPSULE

00002449900	ACH-PREGABALIN	AHI	\$	0.4145
00002480778	AG-PREGABALIN	AGP	\$	0.4145
00002394294	APO-PREGABALIN	APX	\$	0.4145
00002436019	JAMP-PREGABALIN	JPC	\$	0.4145
00002494906	NAT-PREGABALIN	NTP	\$	0.4145
00002479192	NRA-PREGABALIN	NRA	\$	0.4145
00002359642	PMS-PREGABALIN	PMS	\$	0.4145
00002403730	PREGABALIN	SIV	\$	0.4145
00002405598	PREGABALIN	SNS	\$	0.4145
00002392860	RAN-PREGABALIN	RAN	\$	0.4145
00002390868	SANDOZ PREGABALIN	SDZ	\$	0.4145
00002361248	TEVA-PREGABALIN	TEV	\$	0.4145

28:00 CENTRAL NERVOUS SYSTEM AGENTS**28:12.92 ANTICONVULSANTS
(MISCELLANEOUS ANTICONVULSANTS)****TOPIRAMATE****25 MG ORAL TABLET**

00002395738	ACH-TOPIRAMATE	AHI	\$	0.2433
00002475936	AG-TOPIRAMATE	AGP	\$	0.2433
00002279614	APO-TOPIRAMATE	APX	\$	0.2433
00002345803	AURO-TOPIRAMATE	AUR	\$	0.2433
00002287765	GLN-TOPIRAMATE	GLM	\$	0.2433
00002345250	JAMP TOPIRAMATE	JPC	\$	0.2433
00002435608	JAMP-TOPIRAMATE	JPC	\$	0.2433
00002315645	MINT-TOPIRAMATE	MPI	\$	0.2433
00002263351	MYLAN-TOPIRAMATE	MYP	\$	0.2433
00002262991	PMS-TOPIRAMATE	PMS	\$	0.2433
00002248860	TEVA-TOPIRAMATE	TEV	\$	0.2433
00002356856	TOPIRAMATE	SNS	\$	0.2433
00002389460	TOPIRAMATE	SIV	\$	0.2433
00002230893	TOPAMAX	JAI	\$	1.8000

50 MG ORAL TABLET

00002312085	PMS-TOPIRAMATE	PMS	\$	1.2434
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100 MG ORAL TABLET

00002395746	ACH-TOPIRAMATE	AHI	\$	0.4583
00002475944	AG-TOPIRAMATE	AGP	\$	0.4583
00002279630	APO-TOPIRAMATE	APX	\$	0.4583
00002345838	AURO-TOPIRAMATE	AUR	\$	0.4583
00002287773	GLN-TOPIRAMATE	GLM	\$	0.4583
00002435616	JAMP-TOPIRAMATE	JPC	\$	0.4583
00002315653	MINT-TOPIRAMATE	MPI	\$	0.4583
00002263378	MYLAN-TOPIRAMATE	MYP	\$	0.4583
00002263009	PMS-TOPIRAMATE	PMS	\$	0.4583
00002248861	TEVA-TOPIRAMATE	TEV	\$	0.4583
00002356864	TOPIRAMATE	SNS	\$	0.4583
00002389487	TOPIRAMATE	SIV	\$	0.4583
00002230894	TOPAMAX	JAI	\$	3.3700

200 MG ORAL TABLET

00002395754	ACH-TOPIRAMATE	AHI	\$	0.6748
00002279649	APO-TOPIRAMATE	APX	\$	0.6748
00002345846	AURO-TOPIRAMATE	AUR	\$	0.6748
00002287781	GLN-TOPIRAMATE	GLM	\$	0.6748
00002345277	JAMP TOPIRAMATE	JPC	\$	0.6748
00002435624	JAMP-TOPIRAMATE	JPC	\$	0.6748
00002315661	MINT-TOPIRAMATE	MPI	\$	0.6748
00002263386	MYLAN-TOPIRAMATE	MYP	\$	0.6748
00002263017	PMS-TOPIRAMATE	PMS	\$	0.6748
00002248862	TEVA-TOPIRAMATE	TEV	\$	0.6748
00002356872	TOPIRAMATE	SNS	\$	0.6748
00002230896	TOPAMAX	JAI	\$	4.9890

15 MG ORAL CAPSULE

00002239907	TOPAMAX SPRINKLE	JAI	\$	1.6835
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25 MG ORAL CAPSULE

00002239908	TOPAMAX SPRINKLE	JAI	\$	1.7544
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28:00 CENTRAL NERVOUS SYSTEM AGENTS28:12.92 ANTICONVULSANTS
(MISCELLANEOUS ANTICONVULSANTS)**VALPROIC ACID**

250 MG ORAL CAPSULE

00002238048	APO-VALPROIC	APX	\$	0.2905
00002230768	PMS-VALPROIC ACID	PMS	\$	0.2905

500 MG ORAL ENTERIC-COATED CAPSULE

00002229628	PMS-VALPROIC ACID E.C.	PMS	\$	0.8102
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50 MG / ML ORAL SYRUP

00002238370	APO-VALPROIC	APX	\$	0.0480
00002532441	JAMP VALPROIC ACID	JPC	\$	0.0480
00002236807	PMS-VALPROIC ACID	PMS	\$	0.0480
00000443832	DEPAKENE	BGP	\$	0.1351

VIGABATRIN

500 MG ORAL TABLET

00002065819	SABRIL	LUI	\$	0.9566
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500 MG ORAL POWDER PACKET

<input checked="" type="checkbox"/> 00002068036	SABRIL	LUI	\$	0.9566
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28:00 CENTRAL NERVOUS SYSTEM AGENTS28:16.04.12 PSYCHOTHERAPEUTIC AGENTS
ANTIDEPRESSANTS
(MONOAMINE OXIDASE INHIBITORS)**MOCLOBEMIDE**

100 MG ORAL TABLET

00002232148	MOCLOBEMIDE	AAP	\$	0.3482
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150 MG ORAL TABLET

00002232150	MOCLOBEMIDE	AAP	\$	0.5295
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300 MG ORAL TABLET

00002240456	MOCLOBEMIDE	AAP	\$	1.0399
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PHENELZINE SULFATE

15 MG (BASE) ORAL TABLET

00000476552	NARDIL	ERF	\$	0.4082
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TRANLYCYPROMINE SULFATE

10 MG (BASE) ORAL TABLET

00001919598	PARNATE	GSK	\$	0.4444
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28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:16.04.16 PSYCHOTHERAPEUTIC AGENTS

ANTIDEPRESSANTS

(SELECTIVE SEROTONIN- AND NOREPINEPHRINE-
REUPTAKE INHIBITORS)**DULOXETINE HYDROCHLORIDE****30 MG (BASE) ORAL DELAYED-RELEASE CAPSULE**

00002522861	ACCEL-DULOXETINE	ACP	\$ 0.3611
00002475308	AG-DULOXETINE	AGP	\$ 0.4814
00002440423	APO-DULOXETINE	APX	\$ 0.4814
00002436647	AURO-DULOXETINE	AUR	\$ 0.4814
00002453630	DULOXETINE	SIV	\$ 0.4814
00002490889	DULOXETINE	SNS	\$ 0.4814
00002451913	JAMP-DULOXETINE	JPC	\$ 0.4814
00002473208	M-DULOXETINE	MTR	\$ 0.4814
00002446081	MAR-DULOXETINE	MAR	\$ 0.4814
00002438984	MINT-DULOXETINE	MPI	\$ 0.4814
00002482126	NRA-DULOXETINE	NRA	\$ 0.4814
00002429446	PMS-DULOXETINE	PMS	\$ 0.4814
00002439948	SANDOZ DULOXETINE	SDZ	\$ 0.4814
00002456753	TEVA-DULOXETINE	TEV	\$ 0.4814
00002301482	CYMBALTA	LIL	\$ 2.2056

60 MG (BASE) ORAL DELAYED-RELEASE CAPSULE

00002522888	ACCEL-DULOXETINE	ACP	\$ 0.7327
00002475316	AG-DULOXETINE	AGP	\$ 0.9769
00002440431	APO-DULOXETINE	APX	\$ 0.9769
00002436655	AURO-DULOXETINE	AUR	\$ 0.9769
00002453649	DULOXETINE	SIV	\$ 0.9769
00002490897	DULOXETINE	SNS	\$ 0.9769
00002451921	JAMP-DULOXETINE	JPC	\$ 0.9769
00002473216	M-DULOXETINE	MTR	\$ 0.9769
00002446103	MAR-DULOXETINE	MAR	\$ 0.9769
00002438992	MINT-DULOXETINE	MPI	\$ 0.9769
00002482134	NRA-DULOXETINE	NRA	\$ 0.9769
00002429454	PMS-DULOXETINE	PMS	\$ 0.9769
00002439956	SANDOZ DULOXETINE	SDZ	\$ 0.9769
00002456761	TEVA-DULOXETINE	TEV	\$ 0.9769
00002301490	CYMBALTA	LIL	\$ 4.4757

28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:16.04.16 PSYCHOTHERAPEUTIC AGENTS

ANTIDEPRESSANTS

(SELECTIVE SEROTONIN- AND NOREPINEPHRINE-
REUPTAKE INHIBITORS)**VENLAFAXINE HCL**

37.5 MG (BASE) ORAL EXTENDED-RELEASE CAPSULE

00002304317	ACT VENLAFAXINE XR	TEV	\$	0.0913
00002452839	AURO-VENLAFAXINE XR	AUR	\$	0.0913
00002471280	M-VENLAFAXINE XR	MTR	\$	0.0913
00002278545	PMS-VENLAFAXINE XR	PMS	\$	0.0913
00002521466	PMSC-VENLAFAXINE XR	PMS	\$	0.0913
00002310317	SANDOZ VENLAFAXINE XR	SDZ	\$	0.0913
00002380072	TARO-VENLAFAXINE XR	SPG	\$	0.0913
00002354713	VENLAFAXINE XR	SNS	\$	0.0913
00002385929	VENLAFAXINE XR	SIV	\$	0.0913
00002516535	VENLAFAXINE XR	JPC	\$	0.0913
00002237279	EFFEXOR XR	BGP	\$	1.1249

75 MG (BASE) ORAL EXTENDED-RELEASE CAPSULE

00002304325	ACT VENLAFAXINE XR	TEV	\$	0.1825
00002452847	AURO-VENLAFAXINE XR	AUR	\$	0.1825
00002471299	M-VENLAFAXINE XR	MTR	\$	0.1825
00002521482	PMSC-VENLAFAXINE XR	PMS	\$	0.1825
00002310325	SANDOZ VENLAFAXINE XR	SDZ	\$	0.1825
00002380080	TARO-VENLAFAXINE XR	SPG	\$	0.1825
00002354721	VENLAFAXINE XR	SNS	\$	0.1825
00002385937	VENLAFAXINE XR	SIV	\$	0.1825
00002516543	VENLAFAXINE XR	JPC	\$	0.1825
00002237280	EFFEXOR XR	BGP	\$	2.2498

150 MG (BASE) ORAL EXTENDED-RELEASE CAPSULE

00002304333	ACT VENLAFAXINE XR	TEV	\$	0.1927
00002452855	AURO-VENLAFAXINE XR	AUR	\$	0.1927
00002471302	M-VENLAFAXINE XR	MTR	\$	0.1927
00002521474	PMSC-VENLAFAXINE XR	PMS	\$	0.1927
00002310333	SANDOZ VENLAFAXINE XR	SDZ	\$	0.1927
00002380099	TARO-VENLAFAXINE XR	SPG	\$	0.1927
00002275058	TEVA-VENLAFAXINE XR	TEV	\$	0.1927
00002354748	VENLAFAXINE XR	SNS	\$	0.1927
00002385945	VENLAFAXINE XR	SIV	\$	0.1927
00002516551	VENLAFAXINE XR	JPC	\$	0.1927
00002237282	EFFEXOR XR	BGP	\$	2.3751

28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:16.04.20 PSYCHOTHERAPEUTIC AGENTS

ANTIDEPRESSANTS

(SELECTIVE-SEROTONIN REUPTAKE INHIBITORS)

CITALOPRAM HYDROBROMIDE**10 MG (BASE) ORAL TABLET**

00002387948	CITALOPRAM	SIV	\$	0.0796
00002430517	CITALOPRAM	JPC	\$	0.0796
00002445719	CITALOPRAM	SNS	\$	0.0796
00002532123	M-CITALOPRAM	MTR	\$	0.0796
00002371871	MAR-CITALOPRAM	MAR	\$	0.0796
00002429691	MINT-CITALOPRAM	MPI	\$	0.0796
00002409003	NATCO-CITALOPRAM	NTP	\$	0.0796
00002477637	NRA-CITALOPRAM	NRA	\$	0.0796
00002270609	PMS-CITALOPRAM	PMS	\$	0.0796
00002303256	RIVA-CITALOPRAM	RIV	\$	0.0796
00002312336	TEVA-CITALOPRAM	TEV	\$	0.0796

20 MG (BASE) ORAL TABLET

00002246056	APO-CITALOPRAM	APX	\$	0.1332
00002275562	AURO-CITALOPRAM	AUR	\$	0.1332
00002459914	CCP-CITALOPRAM	CEL	\$	0.1332
00002353660	CITALOPRAM	SNS	\$	0.1332
00002387956	CITALOPRAM	SIV	\$	0.1332
00002430541	CITALOPRAM	JPC	\$	0.1332
00002467836	M-CITALOPRAM	MTR	\$	0.1332
00002371898	MAR-CITALOPRAM	MAR	\$	0.1332
00002429705	MINT-CITALOPRAM	MPI	\$	0.1332
00002409011	NAT-CITALOPRAM	NTP	\$	0.1332
00002443880	NATCO-CITALOPRAM	NTP	\$	0.1332
00002477645	NRA-CITALOPRAM	NRA	\$	0.1332
00002248010	PMS-CITALOPRAM	PMS	\$	0.1332
00002303264	RIVA-CITALOPRAM	RIV	\$	0.1332
00002355272	SEPTA-CITALOPRAM	SEP	\$	0.1332
00002293218	TEVA-CITALOPRAM	TEV	\$	0.1332
00002239607	CELEXA	LBC	\$	1.5828

30 MG (BASE) ORAL TABLET

00002296152	CTP 30	SUN	\$	0.8961
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40 MG (BASE) ORAL TABLET

00002246057	APO-CITALOPRAM	APX	\$	0.1332
00002275570	AURO-CITALOPRAM	AUR	\$	0.1332
00002459922	CCP-CITALOPRAM	CEL	\$	0.1332
00002353679	CITALOPRAM	SNS	\$	0.1332
00002387964	CITALOPRAM	SIV	\$	0.1332
00002430568	CITALOPRAM	JPC	\$	0.1332
00002467844	M-CITALOPRAM	MTR	\$	0.1332
00002371901	MAR-CITALOPRAM	MAR	\$	0.1332
00002429713	MINT-CITALOPRAM	MPI	\$	0.1332
00002409038	NAT-CITALOPRAM	NTP	\$	0.1332
00002443899	NATCO-CITALOPRAM	NTP	\$	0.1332
00002477653	NRA-CITALOPRAM	NRA	\$	0.1332
00002248011	PMS-CITALOPRAM	PMS	\$	0.1332
00002303272	RIVA-CITALOPRAM	RIV	\$	0.1332
00002355280	SEPTA-CITALOPRAM	SEP	\$	0.1332
00002293226	TEVA-CITALOPRAM	TEV	\$	0.1332
00002239608	CELEXA	LBC	\$	1.5828

28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:16.04.20 PSYCHOTHERAPEUTIC AGENTS

ANTIDEPRESSANTS

(SELECTIVE-SEROTONIN REUPTAKE INHIBITORS)

ESCITALOPRAM**10 MG ORAL TABLET**

00002434652	ACH-ESCITALOPRAM	AHI	\$	0.3109
00002295016	APO-ESCITALOPRAM	APX	\$	0.3109
00002397358	AURO-ESCITALOPRAM	AUR	\$	0.3109
00002429039	ESCITALOPRAM	SIV	\$	0.3109
00002430118	ESCITALOPRAM	SNS	\$	0.3109
00002508893	JAMP ESCITALOPRAM	JPC	\$	0.3109
00002429780	JAMP-ESCITALOPRAM	JPC	\$	0.3109
00002471418	M-ESCITALOPRAM	MTR	\$	0.3109
00002423480	MAR-ESCITALOPRAM	MAR	\$	0.3109
00002407418	MINT-ESCITALOPRAM	MPI	\$	0.3109
00002309467	MYLAN-ESCITALOPRAM	MYP	\$	0.3109
00002440296	NAT-ESCITALOPRAM	NTP	\$	0.3109
00002476851	NRA-ESCITALOPRAM	NRA	\$	0.3109
00002469243	PMS-ESCITALOPRAM	PMS	\$	0.3109
00002303949	PMSC-ESCITALOPRAM	PMS	\$	0.3109
00002385481	RAN-ESCITALOPRAM	RAN	\$	0.3109
00002364077	SANDOZ ESCITALOPRAM	SDZ	\$	0.3109
00002318180	TEVA-ESCITALOPRAM	TEV	\$	0.3109
00002263238	CIPRALEX	LBC	\$	2.0505

20 MG ORAL TABLET

00002434660	ACH-ESCITALOPRAM	AHI	\$	0.3310
00002295024	APO-ESCITALOPRAM	APX	\$	0.3310
00002397374	AURO-ESCITALOPRAM	AUR	\$	0.3310
00002429047	ESCITALOPRAM	SIV	\$	0.3310
00002430126	ESCITALOPRAM	SNS	\$	0.3310
00002508907	JAMP ESCITALOPRAM	JPC	\$	0.3310
00002429799	JAMP-ESCITALOPRAM	JPC	\$	0.3310
00002471426	M-ESCITALOPRAM	MTR	\$	0.3310
00002423502	MAR-ESCITALOPRAM	MAR	\$	0.3310
00002407434	MINT-ESCITALOPRAM	MPI	\$	0.3310
00002309475	MYLAN-ESCITALOPRAM	MYP	\$	0.3310
00002440318	NAT-ESCITALOPRAM	NTP	\$	0.3310
00002476878	NRA-ESCITALOPRAM	NRA	\$	0.3310
00002469251	PMS-ESCITALOPRAM	PMS	\$	0.3310
00002303965	PMSC-ESCITALOPRAM	PMS	\$	0.3310
00002385503	RAN-ESCITALOPRAM	RAN	\$	0.3310
00002364085	SANDOZ ESCITALOPRAM	SDZ	\$	0.3310
00002318202	TEVA-ESCITALOPRAM	TEV	\$	0.3310
00002263254	CIPRALEX	LBC	\$	2.1892

28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:16.04.20 PSYCHOTHERAPEUTIC AGENTS

ANTIDEPRESSANTS

(SELECTIVE-SEROTONIN REUPTAKE INHIBITORS)

FLUOXETINE HCL

10 MG (BASE) ORAL CAPSULE

00002485052	AG-FLUOXETINE	AGP	\$	0.3404
00002216353	APO-FLUOXETINE	APX	\$	0.3404
00002385627	AURO-FLUOXETINE	AUR	\$	0.3404
00002286068	FLUOXETINE	SNS	\$	0.3404
00002374447	FLUOXETINE	SIV	\$	0.3404
00002393441	FLUOXETINE BP	AHI	\$	0.3404
00002401894	JAMP-FLUOXETINE	JPC	\$	0.3404
00002529432	M-FLUOXETINE	MTR	\$	0.3404
00002380560	MINT-FLUOXETINE	MPI	\$	0.3404
00002503875	NRA-FLUOXETINE	NRA	\$	0.3404
00002177579	PMS-FLUOXETINE	PMS	\$	0.3404
00002216582	TEVA-FLUOXETINE	TEV	\$	0.3404
00002018985	PROZAC	LIL	\$	2.1203

20 MG (BASE) ORAL CAPSULE

00002485060	AG-FLUOXETINE	AGP	\$	0.3311
00002216361	APO-FLUOXETINE	APX	\$	0.3311
00002385635	AURO-FLUOXETINE	AUR	\$	0.3311
00002448432	BIO-FLUOXETINE	BMD	\$	0.3311
00002286076	FLUOXETINE	SNS	\$	0.3311
00002374455	FLUOXETINE	SIV	\$	0.3311
00002383241	FLUOXETINE BP	AHI	\$	0.3311
00002386402	JAMP-FLUOXETINE	JPC	\$	0.3311
00002529440	M-FLUOXETINE	MTR	\$	0.3311
00002380579	MINT-FLUOXETINE	MPI	\$	0.3311
00002503883	NRA-FLUOXETINE	NRA	\$	0.3311
00002177587	PMS-FLUOXETINE	PMS	\$	0.3311
00002216590	TEVA-FLUOXETINE	TEV	\$	0.3311
00000636622	PROZAC	LIL	\$	2.1203

4 MG / ML (BASE) ORAL LIQUID

00002231328	APO-FLUOXETINE	APX	\$	0.3084
00002459361	ODAN-FLUOXETINE	ODN	\$	0.3084

FLUVOXAMINE MALEATE

50 MG ORAL TABLET

00002255529	ACT FLUVOXAMINE	TEV	\$	0.2105
00002231329	APO-FLUVOXAMINE	APX	\$	0.2105
00001919342	LUVOX	BGP	\$	1.0819

100 MG ORAL TABLET

00002255537	ACT FLUVOXAMINE	TEV	\$	0.3783
00002231330	APO-FLUVOXAMINE	APX	\$	0.3783
00001919369	LUVOX	BGP	\$	1.9454

28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:16.04.20 PSYCHOTHERAPEUTIC AGENTS

ANTIDEPRESSANTS

(SELECTIVE-SEROTONIN REUPTAKE INHIBITORS)

PAROXETINE HCL

20 MG (BASE) ORAL TABLET

00002475545	AG-PAROXETINE	AGP	\$	0.3250
00002240908	APO-PAROXETINE	APX	\$	0.3250
00002383284	AURO-PAROXETINE	AUR	\$	0.3250
00002507781	JAMP PAROXETINE	JPC	\$	0.3250
00002368870	JAMP-PAROXETINE	JPC	\$	0.3250
00002467410	M-PAROXETINE	MTR	\$	0.3250
00002411954	MAR-PAROXETINE	MAR	\$	0.3250
00002421380	MINT-PAROXETINE	MPI	\$	0.3250
00002479761	NRA-PAROXETINE	NRA	\$	0.3250
00002282852	PAROXETINE	SNS	\$	0.3250
00002388235	PAROXETINE	SIV	\$	0.3250
00002247751	PMS-PAROXETINE	PMS	\$	0.3250
00002248557	TEVA-PAROXETINE	TEV	\$	0.3250
00001940481	PAXIL	GSK	\$	2.0683

30 MG (BASE) ORAL TABLET

00002475553	AG-PAROXETINE	AGP	\$	0.3453
00002240909	APO-PAROXETINE	APX	\$	0.3453
00002383292	AURO-PAROXETINE	AUR	\$	0.3453
00002507803	JAMP PAROXETINE	JPC	\$	0.3453
00002368889	JAMP-PAROXETINE	JPC	\$	0.3453
00002467429	M-PAROXETINE	MTR	\$	0.3453
00002411962	MAR-PAROXETINE	MAR	\$	0.3453
00002421399	MINT-PAROXETINE	MPI	\$	0.3453
00002479788	NRA-PAROXETINE	NRA	\$	0.3453
00002282860	PAROXETINE	SNS	\$	0.3453
00002388243	PAROXETINE	SIV	\$	0.3453
00002247752	PMS-PAROXETINE	PMS	\$	0.3453
00001940473	PAXIL	GSK	\$	2.1972

28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:16.04.20 PSYCHOTHERAPEUTIC AGENTS

ANTIDEPRESSANTS

(SELECTIVE-SEROTONIN REUPTAKE INHIBITORS)

SERTRALINE HCL**25 MG (BASE) ORAL CAPSULE**

00002477882	AG-SERTRALINE	AGP	\$	0.1516
00002238280	APO-SERTRALINE	APX	\$	0.1516
00002390906	AURO-SERTRALINE	AUR	\$	0.1516
00002530937	M-SERTRALINE	MTR	\$	0.1516
00002399415	MAR-SERTRALINE	MAR	\$	0.1516
00002402378	MINT-SERTRALINE	MPI	\$	0.1516
00002488434	NRA-SERTRALINE	NRA	\$	0.1516
00002244838	PMS-SERTRALINE	PMS	\$	0.1516
00002353520	SERTRALINE	SNS	\$	0.1516
00002386070	SERTRALINE	SIV	\$	0.1516
00002469626	SERTRALINE	JPC	\$	0.1516
00002240485	TEVA-SERTRALINE	TEV	\$	0.1516
00002132702	ZOLOFT	BGP	\$	0.9851

50 MG (BASE) ORAL CAPSULE

00002477890	AG-SERTRALINE	AGP	\$	0.3032
00002238281	APO-SERTRALINE	APX	\$	0.3032
00002390914	AURO-SERTRALINE	AUR	\$	0.3032
00002530945	M-SERTRALINE	MTR	\$	0.3032
00002399423	MAR-SERTRALINE	MAR	\$	0.3032
00002402394	MINT-SERTRALINE	MPI	\$	0.3032
00002488442	NRA-SERTRALINE	NRA	\$	0.3032
00002244839	PMS-SERTRALINE	PMS	\$	0.3032
00002353539	SERTRALINE	SNS	\$	0.3032
00002386089	SERTRALINE	SIV	\$	0.3032
00002469634	SERTRALINE	JPC	\$	0.3032
00002240484	TEVA-SERTRALINE	TEV	\$	0.3032
00001962817	ZOLOFT	BGP	\$	1.9700

100 MG (BASE) ORAL CAPSULE

00002477904	AG-SERTRALINE	AGP	\$	0.3303
00002238282	APO-SERTRALINE	APX	\$	0.3303
00002390922	AURO-SERTRALINE	AUR	\$	0.3303
00002530953	M-SERTRALINE	MTR	\$	0.3303
00002399431	MAR-SERTRALINE	MAR	\$	0.3303
00002402408	MINT-SERTRALINE	MPI	\$	0.3303
00002488450	NRA-SERTRALINE	NRA	\$	0.3303
00002244840	PMS-SERTRALINE	PMS	\$	0.3303
00002353547	SERTRALINE	SNS	\$	0.3303
00002386097	SERTRALINE	SIV	\$	0.3303
00002469642	SERTRALINE	JPC	\$	0.3303
00002240481	TEVA-SERTRALINE	TEV	\$	0.3303
00001962779	ZOLOFT	BGP	\$	2.0954

28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:16.04.24 PSYCHOTHERAPEUTIC AGENTS

ANTIDEPRESSANTS

(SEROTONIN MODULATORS)

TRAZODONE HCL**50 MG ORAL TABLET**

00002147637	APO-TRAZODONE	APX	\$	0.0554
00002442809	JAMP TRAZODONE	JPC	\$	0.0554
00001937227	PMS-TRAZODONE	PMS	\$	0.0554
00002144263	TEVA-TRAZODONE	TEV	\$	0.0554
00002348772	TRAZODONE	SNS	\$	0.0554

75 MG ORAL TABLET

00002237339	PMS-TRAZODONE	PMS	\$	0.4422
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100 MG ORAL TABLET

00002147645	APO-TRAZODONE	APX	\$	0.0989
00002442817	JAMP TRAZODONE	JPC	\$	0.0989
00001937235	PMS-TRAZODONE	PMS	\$	0.0989
00002144271	TEVA-TRAZODONE	TEV	\$	0.0989
00002348780	TRAZODONE	SNS	\$	0.0989

150 MG ORAL TABLET

00002147653	APO-TRAZODONE D	APX	\$	0.1453
00002442825	JAMP TRAZODONE	JPC	\$	0.1453
00002144298	TEVA-TRAZODONE	TEV	\$	0.1453
00002348799	TRAZODONE	SNS	\$	0.1453

VORTIOXETINE HYDROBROMIDE**5 MG ORAL TABLET**

00002432919	TRINTELLIX	LBC	\$	2.8824
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10 MG ORAL TABLET

00002432927	TRINTELLIX	LBC	\$	3.0192
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20 MG ORAL TABLET

00002432943	TRINTELLIX	LBC	\$	3.2779
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28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:16.04.28 PSYCHOTHERAPEUTIC AGENTS

ANTIDEPRESSANTS

(TRICYCLICS AND OTHER NOREPINEPHRINE-REUPTAKE INHIBITORS)

AMITRIPTYLINE HCL**10 MG ORAL TABLET**

00002403137	APO-AMITRIPTYLINE	APX	\$	0.0664
00000335053	ELAVIL	AAP	\$	0.0664

25 MG ORAL TABLET

00002403145	APO-AMITRIPTYLINE	APX	\$	0.1211
00000335061	ELAVIL	AAP	\$	0.1211

50 MG ORAL TABLET

00002403153	APO-AMITRIPTYLINE	APX	\$	0.2347
00000335088	ELAVIL	AAP	\$	0.2347

75 MG ORAL TABLET

00002403161	APO-AMITRIPTYLINE	APX	\$	0.3634
00000754129	ELAVIL	AAP	\$	0.3634

28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:16.04.28 PSYCHOTHERAPEUTIC AGENTS

ANTIDEPRESSANTS

(TRICYCLICS AND OTHER NOREPINEPHRINE-REUPTAKE
INHIBITORS)**CLOMIPRAMINE HCL****10 MG ORAL TABLET**

00000330566 ANAFRANIL APX \$ 0.3191

25 MG ORAL TABLET

00000324019 ANAFRANIL APX \$ 0.4349

50 MG ORAL TABLET

00000402591 ANAFRANIL APX \$ 0.8008

25 MG ORAL CAPSULE

00002497506 TARO-CLOMIPRAMINE TAR \$ 0.3417

50 MG ORAL CAPSULE

00002497514 TARO-CLOMIPRAMINE TAR \$ 0.6291

DESIPRAMINE HCL**10 MG ORAL TABLET**

00002216248 DESIPRAMINE AAP \$ 0.4852

25 MG ORAL TABLET

00002216256 DESIPRAMINE AAP \$ 0.4852

50 MG ORAL TABLET

00002216264 DESIPRAMINE AAP \$ 0.8553

75 MG ORAL TABLET

00002216272 DESIPRAMINE AAP \$ 1.1373

IMIPRAMINE HCL**10 MG ORAL TABLET**

00000360201 IMIPRAMINE AAP \$ 0.1747

25 MG ORAL TABLET

00000312797 IMIPRAMINE AAP \$ 0.3152

50 MG ORAL TABLET

00000326852 IMIPRAMINE AAP \$ 0.6152

75 MG ORAL TABLET

00000644579 IMIPRAMINE AAP \$ 0.8048

NORTRIPTYLINE HCL**10 MG (BASE) ORAL CAPSULE**

00000015229 AVENTYL AAP \$ 0.3148

25 MG (BASE) ORAL CAPSULE

00000015237 AVENTYL AAP \$ 0.6363

TRIMIPRAMINE MALEATE**12.5 MG (BASE) ORAL TABLET**

00000740799 TRIMIPRAMINE AAP \$ 0.2749

25 MG (BASE) ORAL TABLET

00000740802 TRIMIPRAMINE AAP \$ 0.3542

50 MG (BASE) ORAL TABLET

00000740810 TRIMIPRAMINE AAP \$ 0.6932

100 MG (BASE) ORAL TABLET

00000740829 TRIMIPRAMINE AAP \$ 1.1830

75 MG (BASE) ORAL CAPSULE

00002070987 TRIMIPRAMINE AAP \$ 0.9332

28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:16.04.92 PSYCHOTHERAPEUTIC AGENTS

ANTIDEPRESSANTS

(MISCELLANEOUS ANTIDEPRESSANTS)

BUPROPION HCL

100 MG ORAL SUSTAINED-RELEASE TABLET			
00002275074	ODAN BUPROPION SR	ODN	\$ 0.5260
150 MG ORAL SUSTAINED-RELEASE TABLET			
00002275082	ODAN BUPROPION SR	ODN	\$ 0.9169
150 MG ORAL EXTENDED-RELEASE TABLET			
00002475804	TARO-BUPROPION XL	SPG	\$ 0.2926
00002439654	TEVA-BUPROPION XL	TEV	\$ 0.2926
00002275090	WELLBUTRIN XL	VCL	\$ 0.5883
300 MG ORAL EXTENDED-RELEASE TABLET			
00002475812	TARO-BUPROPION XL	SPG	\$ 0.5853
00002439662	TEVA-BUPROPION XL	TEV	\$ 0.5853
00002275104	WELLBUTRIN XL	VCL	\$ 1.1769

L-TRYPTOPHAN

250 MG ORAL TABLET			
00002239326	TRYPTAN	VCL	\$ 0.4440
500 MG ORAL TABLET			
00002248538	APO-TRYPTOPHAN	APX	\$ 0.3563
00002240333	TEVA-TRYPTOPHAN	TEV	\$ 0.3563
00002029456	TRYPTAN	VCL	\$ 0.8883
750 MG ORAL TABLET			
00002458721	APO-TRYPTOPHAN	APX	\$ 0.9889
00002239327	TRYPTAN	VCL	\$ 1.3039
1 G ORAL TABLET			
00002248539	APO-TRYPTOPHAN	APX	\$ 0.7126
00002237250	TEVA-TRYPTOPHAN	TEV	\$ 0.7126
00000654531	TRYPTAN	VCL	\$ 1.7851
500 MG ORAL CAPSULE			
00002248540	APO-TRYPTOPHAN	APX	\$ 0.3955
00002240334	TEVA-TRYPTOPHAN	TEV	\$ 0.3955
00000718149	TRYPTAN	VCL	\$ 0.8883

28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:16.04.92 PSYCHOTHERAPEUTIC AGENTS

ANTIDEPRESSANTS

(MISCELLANEOUS ANTIDEPRESSANTS)

MIRTAZAPINE**15 MG ORAL TABLET**

00002286610	APO-MIRTAZAPINE	APX	\$	0.0974
00002411695	AURO-MIRTAZAPINE	AUR	\$	0.0974
00002496666	MIRTAZAPINE	SIV	\$	0.0974
00002532689	MIRTAZAPINE	SNS	\$	0.0974
00002256096	MYLAN-MIRTAZAPINE	MYP	\$	0.0974
00002273942	PMS-MIRTAZAPINE	PMS	\$	0.0974
00002250594	SANDOZ MIRTAZAPINE	SDZ	\$	0.0974

30 MG ORAL TABLET

00002286629	APO-MIRTAZAPINE	APX	\$	0.1950
00002411709	AURO-MIRTAZAPINE	AUR	\$	0.1950
00002370689	MIRTAZAPINE	SNS	\$	0.1950
00002496674	MIRTAZAPINE	SIV	\$	0.1950
00002256118	MYLAN-MIRTAZAPINE	MYP	\$	0.1950
00002534932	NRA-MIRTAZAPINE	NRA	\$	0.1950
00002248762	PMS-MIRTAZAPINE	PMS	\$	0.1950
00002250608	SANDOZ MIRTAZAPINE	SDZ	\$	0.1950
00002259354	TEVA-MIRTAZAPINE	TEV	\$	0.1950
00002243910	REMERON	ORC	\$	1.4662

45 MG ORAL TABLET

00002286637	APO-MIRTAZAPINE	APX	\$	0.6930
00002411717	AURO-MIRTAZAPINE	AUR	\$	0.6930
00002496682	MIRTAZAPINE	SIV	\$	0.6930
00002256126	MYLAN-MIRTAZAPINE	MYP	\$	0.6930

28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:16.08.04 PSYCHOTHERAPEUTIC AGENTS

ANTIPSYCHOTICS

(ATYPICAL ANTIPSYCHOTICS)

ARIPIPIRAZOLE**2 MG ORAL TABLET**

00002471086	APO-ARIPIPIRAZOLE	APX	\$	0.8092
00002506688	ARIPIPIRAZOLE	SNS	\$	0.8092
00002534320	ARIPIPIRAZOLE	SIV	\$	0.8092
00002460025	AURO-ARIPIPIRAZOLE	AUR	\$	0.8092
00002483556	MINT-ARIPIPIRAZOLE	MPI	\$	0.8092
00002466635	PMS-ARIPIPIRAZOLE	PMS	\$	0.8092
00002473658	SANDOZ ARIPIPIRAZOLE	SDZ	\$	0.8092
00002322374	ABILIFY	OTS	\$	3.1618

ALBERTA HEALTH RESTRICTED BENEFIT

This Drug Product is a benefit for patients 13 to 17 years of age inclusive.

5 MG ORAL TABLET

00002471094	APO-ARIPIPIRAZOLE	APX	\$	0.9046
00002506718	ARIPIPIRAZOLE	SNS	\$	0.9046
00002534339	ARIPIPIRAZOLE	SIV	\$	0.9046
00002460033	AURO-ARIPIPIRAZOLE	AUR	\$	0.9046
00002483564	MINT-ARIPIPIRAZOLE	MPI	\$	0.9046
00002466643	PMS-ARIPIPIRAZOLE	PMS	\$	0.9046
00002473666	SANDOZ ARIPIPIRAZOLE	SDZ	\$	0.9046
00002322382	ABILIFY	OTS	\$	3.5591

ALBERTA HEALTH RESTRICTED BENEFIT

This Drug Product is a benefit for patients 13 to 17 years of age inclusive.

10 MG ORAL TABLET

00002471108	APO-ARIPIPIRAZOLE	APX	\$	1.0754
00002506726	ARIPIPIRAZOLE	SNS	\$	1.0754
00002534347	ARIPIPIRAZOLE	SIV	\$	1.0754
00002460041	AURO-ARIPIPIRAZOLE	AUR	\$	1.0754
00002483572	MINT-ARIPIPIRAZOLE	MPI	\$	1.0754
00002466651	PMS-ARIPIPIRAZOLE	PMS	\$	1.0754
00002473674	SANDOZ ARIPIPIRAZOLE	SDZ	\$	1.0754
00002322390	ABILIFY	OTS	\$	4.1016

15 MG ORAL TABLET

00002471116	APO-ARIPIPIRAZOLE	APX	\$	1.2692
00002506734	ARIPIPIRAZOLE	SNS	\$	1.2692
00002534355	ARIPIPIRAZOLE	SIV	\$	1.2692
00002460068	AURO-ARIPIPIRAZOLE	AUR	\$	1.2692
00002483580	MINT-ARIPIPIRAZOLE	MPI	\$	1.2692
00002466678	PMS-ARIPIPIRAZOLE	PMS	\$	1.2692
00002473682	SANDOZ ARIPIPIRAZOLE	SDZ	\$	1.2692
00002322404	ABILIFY	OTS	\$	4.1016

28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:16.08.04 PSYCHOTHERAPEUTIC AGENTS

ANTIPSYCHOTICS

(ATYPICAL ANTIPSYCHOTICS)

ARIPIPIRAZOLE**20 MG ORAL TABLET**

00002471124	APO-ARIPIPIRAZOLE	APX	\$	1.0017
00002506750	ARIPIPIRAZOLE	SNS	\$	1.0017
00002534363	ARIPIPIRAZOLE	SIV	\$	1.0017
00002460076	AURO-ARIPIPIRAZOLE	AUR	\$	1.0017
00002483599	MINT-ARIPIPIRAZOLE	MPI	\$	1.0017
00002466686	PMS-ARIPIPIRAZOLE	PMS	\$	1.0017
00002473690	SANDOZ ARIPIPIRAZOLE	SDZ	\$	1.0017
00002322412	ABILIFY	OTS	\$	4.1016

30 MG ORAL TABLET

00002471132	APO-ARIPIPIRAZOLE	APX	\$	1.0017
00002506785	ARIPIPIRAZOLE	SNS	\$	1.0017
00002534371	ARIPIPIRAZOLE	SIV	\$	1.0017
00002460084	AURO-ARIPIPIRAZOLE	AUR	\$	1.0017
00002483602	MINT-ARIPIPIRAZOLE	MPI	\$	1.0017
00002466694	PMS-ARIPIPIRAZOLE	PMS	\$	1.0017
00002473704	SANDOZ ARIPIPIRAZOLE	SDZ	\$	1.0017
00002322455	ABILIFY	OTS	\$	4.1016

BREXPIPIRAZOLE**0.25 MG ORAL TABLET**

00002461749	REXULTI	OTS	\$	3.5000
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0.5 MG ORAL TABLET

00002461757	REXULTI	OTS	\$	3.5000
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1 MG ORAL TABLET

00002461765	REXULTI	OTS	\$	3.5000
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2 MG ORAL TABLET

00002461773	REXULTI	OTS	\$	3.5000
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3 MG ORAL TABLET

00002461781	REXULTI	OTS	\$	3.5000
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4 MG ORAL TABLET

00002461803	REXULTI	OTS	\$	3.5000
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CLOZAPINE**25 MG ORAL TABLET**

00002248034	AA-CLOZAPINE	AAP	\$	0.6594
00002247243	GEN-CLOZAPINE	MYP	\$	0.6594
00000894737	CLOZARIL	HLS	\$	0.9420

50 MG ORAL TABLET

00002458748	AA-CLOZAPINE	AAP	\$	1.3188
00002305003	GEN-CLOZAPINE	MYP	\$	1.3188
00002490668	CLOZARIL	HLS	\$	1.8840

100 MG ORAL TABLET

00002248035	AA-CLOZAPINE	AAP	\$	2.6446
00002247244	GEN-CLOZAPINE	MYP	\$	2.6446
00000894745	CLOZARIL	HLS	\$	3.7780

200 MG ORAL TABLET

00002458756	AA-CLOZAPINE	AAP	\$	5.2892
00002305011	GEN-CLOZAPINE	MYP	\$	5.2892
00002490676	CLOZARIL	HLS	\$	7.5560

The DBL is not a prescribing or a diagnostic tool. Prescribers should refer to drug monographs and utilize professional judgment.

28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:16.08.04 PSYCHOTHERAPEUTIC AGENTS

ANTIPSYCHOTICS

(ATYPICAL ANTIPSYCHOTICS)

LURASIDONE HCL**20 MG ORAL TABLET**

00002513986	AURO-LURASIDONE	AUR	\$	1.2250
00002516438	JAMP LURASIDONE	JPC	\$	1.2250
00002505878	PMS-LURASIDONE	PMS	\$	1.2250
00002521075	SANDOZ LURASIDONE	SDZ	\$	1.2250
00002504499	TARO-LURASIDONE	TAR	\$	1.2250
00002422050	LATUDA	SUN	\$	4.2500

40 MG ORAL TABLET

00002513994	AURO-LURASIDONE	AUR	\$	1.2250
00002516446	JAMP LURASIDONE	JPC	\$	1.2250
00002505886	PMS-LURASIDONE	PMS	\$	1.2250
00002521091	SANDOZ LURASIDONE	SDZ	\$	1.2250
00002504502	TARO-LURASIDONE	TAR	\$	1.2250
00002387751	LATUDA	SUN	\$	4.2500

60 MG ORAL TABLET

00002514001	AURO-LURASIDONE	AUR	\$	1.2250
00002516454	JAMP LURASIDONE	JPC	\$	1.2250
00002505894	PMS-LURASIDONE	PMS	\$	1.2250
00002521105	SANDOZ LURASIDONE	SDZ	\$	1.2250
00002504510	TARO-LURASIDONE	TAR	\$	1.2250
00002413361	LATUDA	SUN	\$	4.2500

80 MG ORAL TABLET

00002514028	AURO-LURASIDONE	AUR	\$	1.2250
00002516462	JAMP LURASIDONE	JPC	\$	1.2250
00002505908	PMS-LURASIDONE	PMS	\$	1.2250
00002521113	SANDOZ LURASIDONE	SDZ	\$	1.2250
00002504529	TARO-LURASIDONE	TAR	\$	1.2250
00002387778	LATUDA	SUN	\$	4.2500

120 MG ORAL TABLET

00002514036	AURO-LURASIDONE	AUR	\$	1.2250
00002516470	JAMP LURASIDONE	JPC	\$	1.2250
00002505916	PMS-LURASIDONE	PMS	\$	1.2250
00002521121	SANDOZ LURASIDONE	SDZ	\$	1.2250
00002504537	TARO-LURASIDONE	TAR	\$	1.2250
00002387786	LATUDA	SUN	\$	4.2500

28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:16.08.04 PSYCHOTHERAPEUTIC AGENTS

ANTIPSYCHOTICS

(ATYPICAL ANTIPSYCHOTICS)

OLANZAPINE**2.5 MG ORAL TABLET**

00002487608	AG-OLANZAPINE FC	AGP	\$	0.1772
00002281791	APO-OLANZAPINE	APX	\$	0.1772
00002417243	JAMP OLANZAPINE FC	JPC	\$	0.1772
00002410141	MINT-OLANZAPINE	MPI	\$	0.1772
00002372819	OLANZAPINE	SNS	\$	0.1772
00002385864	OLANZAPINE	SIV	\$	0.1772
00002303116	PMS-OLANZAPINE	PMS	\$	0.1772
00002310341	SANDOZ OLANZAPINE	SDZ	\$	0.1772
00002276712	TEVA-OLANZAPINE	TEV	\$	0.1772
00002229250	ZYPREXA	LIL	\$	2.0236

5 MG ORAL TABLET

00002487616	AG-OLANZAPINE FC	AGP	\$	0.3544
00002281805	APO-OLANZAPINE	APX	\$	0.3544
00002417251	JAMP OLANZAPINE FC	JPC	\$	0.3544
00002410168	MINT-OLANZAPINE	MPI	\$	0.3544
00002372827	OLANZAPINE	SNS	\$	0.3544
00002385872	OLANZAPINE	SIV	\$	0.3544
00002303159	PMS-OLANZAPINE	PMS	\$	0.3544
00002310368	SANDOZ OLANZAPINE	SDZ	\$	0.3544
00002276720	TEVA-OLANZAPINE	TEV	\$	0.3544
00002229269	ZYPREXA	LIL	\$	3.9807

7.5 MG ORAL TABLET

00002281813	APO-OLANZAPINE	APX	\$	0.5316
00002417278	JAMP OLANZAPINE FC	JPC	\$	0.5316
00002410176	MINT-OLANZAPINE	MPI	\$	0.5316
00002372835	OLANZAPINE	SNS	\$	0.5316
00002385880	OLANZAPINE	SIV	\$	0.5316
00002303167	PMS-OLANZAPINE	PMS	\$	0.5316
00002310376	SANDOZ OLANZAPINE	SDZ	\$	0.5316
00002276739	TEVA-OLANZAPINE	TEV	\$	0.5316
00002229277	ZYPREXA	LIL	\$	5.9711

10 MG (BASE) ORAL TABLET

00002487632	AG-OLANZAPINE FC	AGP	\$	0.7088
00002281821	APO-OLANZAPINE	APX	\$	0.7088
00002417286	JAMP OLANZAPINE FC	JPC	\$	0.7088
00002410184	MINT-OLANZAPINE	MPI	\$	0.7088
00002372843	OLANZAPINE	SNS	\$	0.7088
00002385899	OLANZAPINE	SIV	\$	0.7088
00002303175	PMS-OLANZAPINE	PMS	\$	0.7088
00002310384	SANDOZ OLANZAPINE	SDZ	\$	0.7088
00002276747	TEVA-OLANZAPINE	TEV	\$	0.7088
00002229285	ZYPREXA	LIL	\$	7.9618

28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:16.08.04 PSYCHOTHERAPEUTIC AGENTS

ANTIPSYCHOTICS

(ATYPICAL ANTIPSYCHOTICS)

OLANZAPINE**15 MG ORAL TABLET**

00002281848	APO-OLANZAPINE	APX	\$	1.0631
00002417294	JAMP OLANZAPINE FC	JPC	\$	1.0631
00002410192	MINT-OLANZAPINE	MPI	\$	1.0631
00002372851	OLANZAPINE	SNS	\$	1.0631
00002385902	OLANZAPINE	SIV	\$	1.0631
00002303183	PMS-OLANZAPINE	PMS	\$	1.0631
00002310392	SANDOZ OLANZAPINE	SDZ	\$	1.0631
00002276755	TEVA-OLANZAPINE	TEV	\$	1.0631
00002238850	ZYPREXA	LIL	\$	12.1457

5 MG ORAL DISINTEGRATING TABLET

00002360616	APO-OLANZAPINE ODT	APX	\$	0.3574
00002448726	AURO-OLANZAPINE ODT	AUR	\$	0.3574
00002406624	JAMP-OLANZAPINE ODT	JPC	\$	0.3574
00002436965	MINT-OLANZAPINE ODT	MPI	\$	0.3574
00002343665	OLANZAPINE ODT	SIV	\$	0.3574
00002352974	OLANZAPINE ODT	SNS	\$	0.3574
00002303191	PMS-OLANZAPINE ODT	PMS	\$	0.3574
00002327775	SANDOZ OLANZAPINE ODT	SDZ	\$	0.3574
00002243086	ZYPREXA ZYDIS	LIL	\$	3.9589

10 MG (BASE) ORAL DISINTEGRATING TABLET

00002360624	APO-OLANZAPINE ODT	APX	\$	0.7143
00002448734	AURO-OLANZAPINE ODT	AUR	\$	0.7143
00002406632	JAMP-OLANZAPINE ODT	JPC	\$	0.7143
00002436973	MINT-OLANZAPINE ODT	MPI	\$	0.7143
00002343673	OLANZAPINE ODT	SIV	\$	0.7143
00002352982	OLANZAPINE ODT	SNS	\$	0.7143
00002303205	PMS-OLANZAPINE ODT	PMS	\$	0.7143
00002327783	SANDOZ OLANZAPINE ODT	SDZ	\$	0.7143
00002243087	ZYPREXA ZYDIS	LIL	\$	7.9107

PALIPERIDONE**3 MG ORAL EXTENDED-RELEASE TABLET**

00002300273	INVEGA	JAI	\$	4.1370
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6 MG ORAL EXTENDED-RELEASE TABLET

00002300281	INVEGA	JAI	\$	6.1880
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9 MG ORAL EXTENDED-RELEASE TABLET

00002300303	INVEGA	JAI	\$	8.2480
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28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:16.08.04 PSYCHOTHERAPEUTIC AGENTS

ANTIPSYCHOTICS

(ATYPICAL ANTIPSYCHOTICS)

QUETIAPINE FUMARATE**25 MG (BASE) ORAL TABLET**

00002316080	ACT QUETIAPINE	TEV	\$	0.0494
00002475979	AG-QUETIAPINE	AGP	\$	0.0494
00002313901	APO-QUETIAPINE	APX	\$	0.0494
00002501635	APO-QUETIAPINE FUMARATE	APX	\$	0.0494
00002390205	AURO-QUETIAPINE	AUR	\$	0.0494
00002447193	BIO-QUETIAPINE	BMD	\$	0.0494
00002390140	JAMP QUETIAPINE FUMARATE	JPC	\$	0.0494
00002330415	JAMP-QUETIAPINE	JPC	\$	0.0494
00002399822	MAR-QUETIAPINE	MAR	\$	0.0494
00002438003	MINT-QUETIAPINE	MPI	\$	0.0494
00002439158	NAT-QUETIAPINE	NTP	\$	0.0494
00002486237	NRA-QUETIAPINE	NRA	\$	0.0494
00002296551	PMS-QUETIAPINE	PMS	\$	0.0494
00002317893	QUETIAPINE	SIV	\$	0.0494
00002353164	QUETIAPINE	SNS	\$	0.0494
00002387794	QUETIAPINE	AHI	\$	0.0494
00002236951	SEROQUEL	AZC	\$	0.5252

50 MG (BASE) ORAL TABLET

00002361892	PMS-QUETIAPINE	PMS	\$	0.5778
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100 MG (BASE) ORAL TABLET

00002316099	ACT QUETIAPINE	TEV	\$	0.1318
00002313928	APO-QUETIAPINE	APX	\$	0.1318
00002501643	APO-QUETIAPINE FUMARATE	APX	\$	0.1318
00002390213	AURO-QUETIAPINE	AUR	\$	0.1318
00002390159	JAMP QUETIAPINE FUMARATE	JPC	\$	0.1318
00002330423	JAMP-QUETIAPINE	JPC	\$	0.1318
00002399830	MAR-QUETIAPINE	MAR	\$	0.1318
00002438011	MINT-QUETIAPINE	MPI	\$	0.1318
00002439166	NAT-QUETIAPINE	NTP	\$	0.1318
00002296578	PMS-QUETIAPINE	PMS	\$	0.1318
00002317907	QUETIAPINE	SIV	\$	0.1318
00002353172	QUETIAPINE	SNS	\$	0.1318
00002387808	QUETIAPINE	AHI	\$	0.1318
00002236952	SEROQUEL	AZC	\$	1.4012

150 MG (BASE) ORAL TABLET

00002439174	NAT-QUETIAPINE	NTP	\$	1.0195
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28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:16.08.04 PSYCHOTHERAPEUTIC AGENTS

ANTIPSYCHOTICS

(ATYPICAL ANTIPSYCHOTICS)

QUETIAPINE FUMARATE

200 MG (BASE) ORAL TABLET

00002316110	ACT QUETIAPINE	TEV	\$	0.2647
00002313936	APO-QUETIAPINE	APX	\$	0.2647
00002501651	APO-QUETIAPINE FUMARATE	APX	\$	0.2647
00002390248	AURO-QUETIAPINE	AUR	\$	0.2647
00002390167	JAMP QUETIAPINE FUMARATE	JPC	\$	0.2647
00002330458	JAMP-QUETIAPINE	JPC	\$	0.2647
00002399849	MAR-QUETIAPINE	MAR	\$	0.2647
00002438046	MINT-QUETIAPINE	MPI	\$	0.2647
00002439182	NAT-QUETIAPINE	NTP	\$	0.2647
00002296594	PMS-QUETIAPINE	PMS	\$	0.2647
00002317923	QUETIAPINE	SIV	\$	0.2647
00002353199	QUETIAPINE	SNS	\$	0.2647
00002387824	QUETIAPINE	AHI	\$	0.2647
00002236953	SEROQUEL	AZC	\$	2.8136

300 MG (BASE) ORAL TABLET

00002316129	ACT QUETIAPINE	TEV	\$	0.3863
00002313944	APO-QUETIAPINE	APX	\$	0.3863
00002501678	APO-QUETIAPINE FUMARATE	APX	\$	0.3863
00002390256	AURO-QUETIAPINE	AUR	\$	0.3863
00002390175	JAMP QUETIAPINE FUMARATE	JPC	\$	0.3863
00002330466	JAMP-QUETIAPINE	JPC	\$	0.3863
00002399857	MAR-QUETIAPINE	MAR	\$	0.3863
00002438054	MINT-QUETIAPINE	MPI	\$	0.3863
00002439190	NAT-QUETIAPINE	NTP	\$	0.3863
00002296608	PMS-QUETIAPINE	PMS	\$	0.3863
00002317931	QUETIAPINE	SIV	\$	0.3863
00002353202	QUETIAPINE	SNS	\$	0.3863
00002387832	QUETIAPINE	AHI	\$	0.3863
00002244107	SEROQUEL	AZC	\$	4.1057

50 MG (BASE) ORAL EXTENDED-RELEASE TABLET

00002450860	ACH-QUETIAPINE FUMARATE XR	AHI	\$	0.2501
00002457229	APO-QUETIAPINE XR	APX	\$	0.2501
00002527928	M-QUETIAPINE FUMARATE XR	MTR	\$	0.2501
00002522187	MINT-QUETIAPINE XR	MPI	\$	0.2501
00002510677	NRA-QUETIAPINE XR	NRA	\$	0.2501
00002516616	QUETIAPINE FUMARATE XR	SNS	\$	0.2501
00002417359	QUETIAPINE XR	SIV	\$	0.2501
00002519607	QUETIAPINE XR	JPC	\$	0.2501
00002407671	SANDOZ QUETIAPINE XRT	SDZ	\$	0.2501
00002395444	TEVA-QUETIAPINE XR	TEV	\$	0.2501
00002300184	SEROQUEL XR	AZC	\$	1.0902

28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:16.08.04 PSYCHOTHERAPEUTIC AGENTS

ANTIPSYCHOTICS

(ATYPICAL ANTIPSYCHOTICS)

QUETIAPINE FUMARATE**150 MG (BASE) ORAL EXTENDED-RELEASE TABLET**

00002450879	ACH-QUETIAPINE FUMARATE XR	AHI	\$	0.4926
00002457237	APO-QUETIAPINE XR	APX	\$	0.4926
00002527936	M-QUETIAPINE FUMARATE XR	MTR	\$	0.4926
00002522195	MINT-QUETIAPINE XR	MPI	\$	0.4926
00002510685	NRA-QUETIAPINE XR	NRA	\$	0.4926
00002516624	QUETIAPINE FUMARATE XR	SNS	\$	0.4926
00002417367	QUETIAPINE XR	SIV	\$	0.4926
00002519615	QUETIAPINE XR	JPC	\$	0.4926
00002407698	SANDOZ QUETIAPINE XRT	SDZ	\$	0.4926
00002395452	TEVA-QUETIAPINE XR	TEV	\$	0.4926
00002321513	SEROQUEL XR	AZC	\$	2.1473

200 MG (BASE) ORAL EXTENDED-RELEASE TABLET

00002450887	ACH-QUETIAPINE FUMARATE XR	AHI	\$	0.6661
00002457245	APO-QUETIAPINE XR	APX	\$	0.6661
00002527944	M-QUETIAPINE FUMARATE XR	MTR	\$	0.6661
00002522209	MINT-QUETIAPINE XR	MPI	\$	0.6661
00002510693	NRA-QUETIAPINE XR	NRA	\$	0.6661
00002516632	QUETIAPINE FUMARATE XR	SNS	\$	0.6661
00002417375	QUETIAPINE XR	SIV	\$	0.6661
00002519623	QUETIAPINE XR	JPC	\$	0.6661
00002407701	SANDOZ QUETIAPINE XRT	SDZ	\$	0.6661
00002395460	TEVA-QUETIAPINE XR	TEV	\$	0.6661
00002300192	SEROQUEL XR	AZC	\$	2.9035

300 MG (BASE) ORAL EXTENDED-RELEASE TABLET

00002450895	ACH-QUETIAPINE FUMARATE XR	AHI	\$	0.9776
00002457253	APO-QUETIAPINE XR	APX	\$	0.9776
00002527952	M-QUETIAPINE FUMARATE XR	MTR	\$	0.9776
00002522217	MINT-QUETIAPINE XR	MPI	\$	0.9776
00002510707	NRA-QUETIAPINE XR	NRA	\$	0.9776
00002516640	QUETIAPINE FUMARATE XR	SNS	\$	0.9776
00002417383	QUETIAPINE XR	SIV	\$	0.9776
00002519747	QUETIAPINE XR	JPC	\$	0.9776
00002407728	SANDOZ QUETIAPINE XRT	SDZ	\$	0.9776
00002395479	TEVA-QUETIAPINE XR	TEV	\$	0.9776
00002300206	SEROQUEL XR	AZC	\$	4.2617

400 MG (BASE) ORAL EXTENDED-RELEASE TABLET

00002450909	ACH-QUETIAPINE FUMARATE XR	AHI	\$	1.3270
00002457261	APO-QUETIAPINE XR	APX	\$	1.3270
00002527960	M-QUETIAPINE FUMARATE XR	MTR	\$	1.3270
00002510715	NRA-QUETIAPINE XR	NRA	\$	1.3270
00002516659	QUETIAPINE FUMARATE XR	SNS	\$	1.3270
00002417391	QUETIAPINE XR	SIV	\$	1.3270
00002519763	QUETIAPINE XR	JPC	\$	1.3270
00002407736	SANDOZ QUETIAPINE XRT	SDZ	\$	1.3270
00002395487	TEVA-QUETIAPINE XR	TEV	\$	1.3270
00002300214	SEROQUEL XR	AZC	\$	5.7851

28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:16.08.04 PSYCHOTHERAPEUTIC AGENTS

ANTIPSYCHOTICS

(ATYPICAL ANTIPSYCHOTICS)

RISPERIDONE**0.25 MG ORAL TABLET**

00002282119	APO-RISPERIDONE	APX	\$	0.0878
00002359529	JAMP-RISPERIDONE	JPC	\$	0.0878
00002371766	MAR-RISPERIDONE	MAR	\$	0.0878
00002359790	MINT-RISPERIDONE	MPI	\$	0.0878
00002252007	PMS-RISPERIDONE	PMS	\$	0.0878
00002328305	RAN-RISPERIDONE	RAN	\$	0.0878
00002356880	RISPERIDONE	SNS	\$	0.0878
00002533804	RISPERIDONE	SIV	\$	0.0878
00002303655	SANDOZ RISPERIDONE	SDZ	\$	0.0878
00002282690	TEVA-RISPERIDONE	TEV	\$	0.0878

0.5 MG ORAL TABLET

00002282127	APO-RISPERIDONE	APX	\$	0.1470
00002359537	JAMP-RISPERIDONE	JPC	\$	0.1470
00002371774	MAR-RISPERIDONE	MAR	\$	0.1470
00002359804	MINT-RISPERIDONE	MPI	\$	0.1470
00002252015	PMS-RISPERIDONE	PMS	\$	0.1470
00002328313	RAN-RISPERIDONE	RAN	\$	0.1470
00002356899	RISPERIDONE	SNS	\$	0.1470
00002533928	RISPERIDONE	SIV	\$	0.1470
00002303663	SANDOZ RISPERIDONE	SDZ	\$	0.1470
00002264188	TEVA-RISPERIDONE	TEV	\$	0.1470

1 MG ORAL TABLET

00002282135	APO-RISPERIDONE	APX	\$	0.2031
00002359545	JAMP-RISPERIDONE	JPC	\$	0.2031
00002371782	MAR-RISPERIDONE	MAR	\$	0.2031
00002359812	MINT-RISPERIDON	MPI	\$	0.2031
00002252023	PMS-RISPERIDONE	PMS	\$	0.2031
00002328321	RAN-RISPERIDONE	RAN	\$	0.2031
00002356902	RISPERIDONE	SNS	\$	0.2031
00002533936	RISPERIDONE	SIV	\$	0.2031
00002279800	SANDOZ RISPERIDONE	SDZ	\$	0.2031
00002264196	TEVA-RISPERIDONE	TEV	\$	0.2031

2 MG ORAL TABLET

00002282143	APO-RISPERIDONE	APX	\$	0.4062
00002359553	JAMP-RISPERIDONE	JPC	\$	0.4062
00002371790	MAR-RISPERIDONE	MAR	\$	0.4062
00002359820	MINT-RISPERIDON	MPI	\$	0.4062
00002252031	PMS-RISPERIDONE	PMS	\$	0.4062
00002328348	RAN-RISPERIDONE	RAN	\$	0.4062
00002356910	RISPERIDONE	SNS	\$	0.4062
00002533944	RISPERIDONE	SIV	\$	0.4062
00002279819	SANDOZ RISPERIDONE	SDZ	\$	0.4062
00002264218	TEVA-RISPERIDONE	TEV	\$	0.4062

28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:16.08.04 PSYCHOTHERAPEUTIC AGENTS

ANTIPSYCHOTICS

(ATYPICAL ANTIPSYCHOTICS)

RISPERIDONE**3 MG ORAL TABLET**

00002282151	APO-RISPERIDONE	APX	\$	0.6083
00002359561	JAMP-RISPERIDONE	JPC	\$	0.6083
00002371804	MAR-RISPERIDONE	MAR	\$	0.6083
00002359839	MINT-RISPERIDON	MPI	\$	0.6083
00002252058	PMS-RISPERIDONE	PMS	\$	0.6083
00002328364	RAN-RISPERIDONE	RAN	\$	0.6083
00002356929	RISPERIDONE	SNS	\$	0.6083
00002533952	RISPERIDONE	SIV	\$	0.6083
00002279827	SANDOZ RISPERIDONE	SDZ	\$	0.6083
00002264226	TEVA-RISPERIDONE	TEV	\$	0.6083

4 MG ORAL TABLET

00002282178	APO-RISPERIDONE	APX	\$	0.8111
00002359588	JAMP-RISPERIDONE	JPC	\$	0.8111
00002371812	MAR-RISPERIDONE	MAR	\$	0.8111
00002359847	MINT-RISPERIDON	MPI	\$	0.8111
00002252066	PMS-RISPERIDONE	PMS	\$	0.8111
00002328372	RAN-RISPERIDONE	RAN	\$	0.8111
00002356937	RISPERIDONE	SNS	\$	0.8111
00002533960	RISPERIDONE	SIV	\$	0.8111
00002279835	SANDOZ RISPERIDONE	SDZ	\$	0.8111
00002264234	TEVA-RISPERIDONE	TEV	\$	0.8111

RISPERIDONE TARTRATE

RESTRICTED BENEFIT - This product is a benefit for patients 18 years of age and older for the management of the manifestations of schizophrenia and related psychotic disorders, as well as in severe dementia for the short-term symptomatic management of inappropriate behavior due to aggression and/or psychosis.

1 MG / ML (BASE) ORAL SOLUTION

00002454319	JAMP-RISPERIDONE	JPC	\$	0.7080
00002279266	PMS-RISPERIDONE	PMS	\$	0.7080

ZIPRASIDONE HYDROCHLORIDE MONOHYDRATE**20 MG (BASE) ORAL CAPSULE**

00002449544	AURO-ZIPRASIDONE	AUR	\$	1.3784
00002298597	ZELDOX	BGP	\$	2.0888

40 MG (BASE) ORAL CAPSULE

00002449552	AURO-ZIPRASIDONE	AUR	\$	1.5786
00002298600	ZELDOX	BGP	\$	2.3928

60 MG (BASE) ORAL CAPSULE

00002449560	AURO-ZIPRASIDONE	AUR	\$	1.5786
00002298619	ZELDOX	BGP	\$	2.3928

80 MG (BASE) ORAL CAPSULE

00002449579	AURO-ZIPRASIDONE	AUR	\$	1.5786
00002298627	ZELDOX	BGP	\$	2.3928

28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:16.08.08 PSYCHOTHERAPEUTIC AGENTS
ANTIPSYCHOTICS
(BUTYROPHENONES)

HALOPERIDOL**0.5 MG ORAL TABLET**

00000363685	TEVA-HALOPERIDOL	TEV	\$	0.1502
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1 MG ORAL TABLET

00000363677	TEVA-HALOPERIDOL	TEV	\$	0.2255
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2 MG ORAL TABLET

00000363669	TEVA-HALOPERIDOL	TEV	\$	0.3372
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5 MG ORAL TABLET

00000363650	TEVA-HALOPERIDOL	TEV	\$	0.5377
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10 MG ORAL TABLET

00000713449	TEVA-HALOPERIDOL	TEV	\$	0.7823
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5 MG / ML INJECTION

00000808652	HALOPERIDOL	SDZ	\$	4.8300
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HALOPERIDOL DECANOATE**100 MG / ML (BASE) INJECTION**

00002130300	HALOPERIDOL LA	SDZ	\$	20.5219
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28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:16.08.24 PSYCHOTHERAPEUTIC AGENTS
ANTIPSYCHOTICS
(PHENOTHIAZINES)

CHLORPROMAZINE HCL**25 MG (BASE) ORAL TABLET**

00000232823	TEVA-CHLORPROMAZINE	TEV	\$	0.2706
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50 MG (BASE) ORAL TABLET

00000232807	TEVA-CHLORPROMAZINE	TEV	\$	0.3095
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100 MG (BASE) ORAL TABLET

00000232831	TEVA-CHLORPROMAZINE	TEV	\$	0.7849
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FLUPHENAZINE HCL**1 MG ORAL TABLET**

00000405345	FLUPHENAZINE	AAP	\$	0.2234
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2 MG ORAL TABLET

00000410632	FLUPHENAZINE	AAP	\$	0.2872
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5 MG ORAL TABLET

00000405361	FLUPHENAZINE	AAP	\$	0.4466
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METHOTRIMEPRAZINE HCL**25 MG / ML (BASE) INJECTION**

00001927698	NOZINAN	XPI	\$	3.9544
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METHOTRIMEPRAZINE MALEATE**2 MG (BASE) ORAL TABLET**

00002238403	METHOPRAZINE	AAP	\$	0.0874
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5 MG (BASE) ORAL TABLET

00002238404	METHOPRAZINE	AAP	\$	0.1263
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25 MG (BASE) ORAL TABLET

00002238405	METHOPRAZINE	AAP	\$	0.3251
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The DBL is not a prescribing or a diagnostic tool. Prescribers should refer to drug monographs and utilize professional judgment.

28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:16.08.24 PSYCHOTHERAPEUTIC AGENTS
 ANTIPSYCHOTICS
 (PHENOTHIAZINES)

METHOTRIMEPRAZINE MALEATE

50 MG (BASE) ORAL TABLET

00002238406	METHOPRAZINE	AAP	\$	0.4920
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PERICIAZINE

10 MG ORAL CAPSULE

00001926772	NEULEPTIL	ERF	\$	0.3712
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10 MG / ML ORAL DROPS

00001926756	NEULEPTIL	ERF	\$	0.4497
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PERPHENAZINE

2 MG ORAL TABLET

00000335134	PERPHENAZINE	AAP	\$	0.0799
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4 MG ORAL TABLET

00000335126	PERPHENAZINE	AAP	\$	0.0967
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8 MG ORAL TABLET

00000335118	PERPHENAZINE	AAP	\$	0.1062
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16 MG ORAL TABLET

00000335096	PERPHENAZINE	AAP	\$	0.1626
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TRIFLUOPERAZINE HCL

1 MG (BASE) ORAL TABLET

00000345539	TRIFLUOPERAZINE	AAP	\$	0.1628
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2 MG (BASE) ORAL TABLET

00000312754	TRIFLUOPERAZINE	AAP	\$	0.2135
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5 MG (BASE) ORAL TABLET

00000312746	TRIFLUOPERAZINE	AAP	\$	0.2970
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10 MG (BASE) ORAL TABLET

00000326836	TRIFLUOPERAZINE	AAP	\$	0.3560
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20 MG (BASE) ORAL TABLET

00000595942	TRIFLUOPERAZINE	AAP	\$	0.7119
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28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:16.08.32 PSYCHOTHERAPEUTIC AGENTS
 ANTIPSYCHOTICS
 (THIOXANTHENES)

FLUPENTIXOL DECANOATE

20 MG / ML INJECTION

00002156032	FLUANXOL DEPOT	LBC	\$	8.5649
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100 MG / ML INJECTION

00002156040	FLUANXOL DEPOT	LBC	\$	42.8254
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FLUPENTIXOL DIHYDROCHLORIDE

0.5 MG ORAL TABLET

00002156008	FLUANXOL	LBC	\$	0.2959
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3 MG ORAL TABLET

00002156016	FLUANXOL	LBC	\$	0.6391
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28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:16.08.32 PSYCHOTHERAPEUTIC AGENTS
ANTIPSYCHOTICS
(THIOXANTHENES)

ZUCLOPENTHIXOL ACETATE

50 MG / ML INJECTION

00002230405	CLOPIXOL ACUPHASE	LBC	\$	17.7758
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ZUCLOPENTHIXOL DECANOATE

200 MG / ML INJECTION

00002230406	CLOPIXOL DEPOT	LBC	\$	17.7758
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ZUCLOPENTHIXOL DIHYDROCHLORIDE

10 MG (BASE) ORAL TABLET

00002230402	CLOPIXOL	LBC	\$	0.4573
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25 MG (BASE) ORAL TABLET

00002230403	CLOPIXOL	LBC	\$	1.1428
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28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:16.08.92 PSYCHOTHERAPEUTIC AGENTS
ANTIPSYCHOTICS
(MISCELLANEOUS ANTIPSYCHOTICS)

LOXAPINE SUCCINATE

2.5 MG (BASE) ORAL TABLET

00002242868	XYLAC	PPH	\$	0.2640
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10 MG (BASE) ORAL TABLET

00002230838	XYLAC	PPH	\$	0.3948
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25 MG (BASE) ORAL TABLET

00002230839	XYLAC	PPH	\$	0.6333
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PIMOZIDE

2 MG ORAL TABLET

00002245432	PIMOZIDE	AAP	\$	0.3943
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4 MG ORAL TABLET

00002245433	PIMOZIDE	AAP	\$	0.6008
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28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:20.04 ANOREXIGENIC AGENTS & RESPIRATORY AND CEREBRAL
STIMULANTS
(AMPHETAMINES)

**AMPHETAMINE SULFATE/ AMPHETAMINE ASPARTATE/
DEXTROAMPHETAMINE SULFATE/ DEXTROAMPHETAMINE
SACCHARATE**

RESTRICTED BENEFIT

For the treatment of Attention Deficit Hyperactivity Disorder (ADHD) as a restricted benefit for patients 6 years of age and older.

1.25 MG * 1.25 MG (BASE) * 1.25 MG * 1.25 MG ORAL EXTENDED-RELEASE CAPSULE			
00002445492	APO-AMPHETAMINE XR (5 MG)	APX	\$ 0.5372
00002457288	SANDOZ AMPHETAMINE XR (5 MG)	SDZ	\$ 0.5372
00002439239	TEVA-AMPHETAMINE XR (5 MG)	TEV	\$ 0.5372
2.5 MG * 2.5 MG (BASE) * 2.5 MG * 2.5 MG ORAL EXTENDED-RELEASE CAPSULE			
00002445506	APO-AMPHETAMINE XR (10 MG)	APX	\$ 0.6105
00002457296	SANDOZ AMPHETAMINE XR (10 MG)	SDZ	\$ 0.6105
00002439247	TEVA-AMPHETAMINE XR (10 MG)	TEV	\$ 0.6105
3.75 MG * 3.75 MG (BASE) * 3.75 MG * 3.75 MG ORAL EXTENDED-RELEASE CAPSULE			
00002445514	APO-AMPHETAMINE XR (15 MG)	APX	\$ 0.6838
00002457318	SANDOZ AMPHETAMINE XR (15 MG)	SDZ	\$ 0.6838
00002439255	TEVA-AMPHETAMINE XR (15 MG)	TEV	\$ 0.6838
5 MG * 5 MG (BASE) * 5 MG * 5 MG ORAL EXTENDED-RELEASE CAPSULE			
00002445522	APO-AMPHETAMINE XR (20 MG)	APX	\$ 0.7572
00002457326	SANDOZ AMPHETAMINE XR (20 MG)	SDZ	\$ 0.7572
00002439263	TEVA-AMPHETAMINE XR (20 MG)	TEV	\$ 0.7572
6.25 MG * 6.25 MG (BASE) * 6.25 MG * 6.25 MG ORAL EXTENDED-RELEASE CAPSULE			
00002445530	APO-AMPHETAMINE XR (25 MG)	APX	\$ 0.8305
00002457334	SANDOZ AMPHETAMINE XR (25 MG)	SDZ	\$ 0.8305
00002439271	TEVA-AMPHETAMINE XR (25 MG)	TEV	\$ 0.8305
7.5 MG * 7.5 MG (BASE) * 7.5 MG * 7.5 MG ORAL EXTENDED-RELEASE CAPSULE			
00002445549	APO-AMPHETAMINE XR (30 MG)	APX	\$ 0.9038
00002457342	SANDOZ AMPHETAMINE XR (30 MG)	SDZ	\$ 0.9038
00002439298	TEVA-AMPHETAMINE XR (30 MG)	TEV	\$ 0.9038

DEXTROAMPHETAMINE SULFATE

5 MG ORAL TABLET

00002443236	DEXTROAMPHETAMINE	AAP	\$ 0.5081
00001924516	DEXEDRINE	PAL	\$ 0.7012

10 MG ORAL SUSTAINED-RELEASE CAPSULE

00002448319	ACT DEXTROAMPHETAMINE SR	TEV	\$ 0.8096
00001924559	DEXEDRINE	PAL	\$ 1.0060

15 MG ORAL SUSTAINED-RELEASE CAPSULE

00002448327	ACT DEXTROAMPHETAMINE SR	TEV	\$ 0.9898
00001924567	DEXEDRINE	PAL	\$ 1.2299

LISDEXAMFETAMINE DIMESYLATE

RESTRICTED BENEFIT - For the treatment of Attention Deficit Hyperactivity Disorder (ADHD) as a restricted benefit for patients 6 years of age and older.

20 MG ORAL CAPSULE

00002347156	VYVANSE	TAK	\$ 2.8322
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30 MG ORAL CAPSULE

00002322951	VYVANSE	TAK	\$ 3.3875
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28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:20.04 ANOREXIGENIC AGENTS & RESPIRATORY AND CEREBRAL
STIMULANTS
(AMPHETAMINES)

LISDEXAMFETAMINE DIMESYLATE**40 MG ORAL CAPSULE**

00002347164	VYVANSE	TAK	\$	3.9429
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50 MG ORAL CAPSULE

00002322978	VYVANSE	TAK	\$	4.4982
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60 MG ORAL CAPSULE

00002347172	VYVANSE	TAK	\$	5.0535
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28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:20.92 ANOREXIGENIC AGENTS & RESPIRATORY AND CEREBRAL
STIMULANTS
(MISCELLANEOUS ANOREXIGENIC AGENTS & RESPIRATORY
AND CEREBRAL STIMULANTS)

METHYLPHENIDATE HCL**5 MG ORAL TABLET**

<input checked="" type="checkbox"/>	00002273950	APO-METHYLPHENIDATE	APX	\$	0.0947
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	00002234749	PMS-METHYLPHENIDATE	PMS	\$	0.0947
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10 MG ORAL TABLET

	00002249324	APO-METHYLPHENIDATE	APX	\$	0.2216
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	00000584991	PMS-METHYLPHENIDATE	PMS	\$	0.2216
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20 MG ORAL TABLET

	00002249332	APO-METHYLPHENIDATE	APX	\$	0.3387
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	00000585009	PMS-METHYLPHENIDATE	PMS	\$	0.3387
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20 MG ORAL EXTENDED-RELEASE TABLET

	00002266687	APO-METHYLPHENIDATE SR	APX	\$	0.6796
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10 MG ORAL CONTROLLED-RELEASE CAPSULE

	00002536943	PMS-METHYLPHENIDATE CR	PMS	\$	0.6993
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	00002277166	BIPHENTIN	ELV	\$	0.8275
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"For the treatment of Attention Deficit Hyperactivity Disorder (ADHD) as a restricted benefit for patients 6 years of age and older."

15 MG ORAL CONTROLLED-RELEASE CAPSULE

	00002536951	PMS-METHYLPHENIDATE CR	PMS	\$	1.0028
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	00002277131	BIPHENTIN	ELV	\$	1.1837
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"For the treatment of Attention Deficit Hyperactivity Disorder (ADHD) as a restricted benefit for patients 6 years of age and older."

20 MG ORAL CONTROLLED-RELEASE CAPSULE

	00002536978	PMS-METHYLPHENIDATE CR	PMS	\$	1.2923
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	00002277158	BIPHENTIN	ELV	\$	1.5300
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"For the treatment of Attention Deficit Hyperactivity Disorder (ADHD) as a restricted benefit for patients 6 years of age and older."

25 MG ORAL CONTROLLED-RELEASE CAPSULE

	00002470292	FOQUEST	ELV	\$	2.8151
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RESTRICTED BENEFIT

"For the treatment of Attention Deficit Hyperactivity Disorder (ADHD) as a restricted benefit for patients 6 years of age and older."

28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:20.92 ANOREXIGENIC AGENTS & RESPIRATORY AND CEREBRAL STIMULANTS
(MISCELLANEOUS ANOREXIGENIC AGENTS & RESPIRATORY AND CEREBRAL STIMULANTS)

METHYLPHENIDATE HCL**30 MG ORAL CONTROLLED-RELEASE CAPSULE**

00002536986	PMS-METHYLPHENIDATE CR	PMS	\$	1.7756
00002277174	BIPHENTIN	ELV	\$	2.1001

"For the treatment of Attention Deficit Hyperactivity Disorder (ADHD) as a restricted benefit for patients 6 years of age and older."

35 MG ORAL CONTROLLED-RELEASE CAPSULE

00002470306	FOQUEST	ELV	\$	3.0923
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RESTRICTED BENEFIT

"For the treatment of Attention Deficit Hyperactivity Disorder (ADHD) as a restricted benefit for patients 6 years of age and older."

40 MG ORAL CONTROLLED-RELEASE CAPSULE

00002536994	PMS-METHYLPHENIDATE CR	PMS	\$	2.2620
00002277182	BIPHENTIN	ELV	\$	2.6750

"For the treatment of Attention Deficit Hyperactivity Disorder (ADHD) as a restricted benefit for patients 6 years of age and older."

45 MG ORAL CONTROLLED-RELEASE CAPSULE

00002470314	FOQUEST	ELV	\$	3.3590
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RESTRICTED BENEFIT

"For the treatment of Attention Deficit Hyperactivity Disorder (ADHD) as a restricted benefit for patients 6 years of age and older."

50 MG ORAL CONTROLLED-RELEASE CAPSULE

00002537001	PMS-METHYLPHENIDATE CR	PMS	\$	2.7450
00002277190	BIPHENTIN	ELV	\$	3.2445

"For the treatment of Attention Deficit Hyperactivity Disorder (ADHD) as a restricted benefit for patients 6 years of age and older."

55 MG ORAL CONTROLLED-RELEASE CAPSULE

00002470322	FOQUEST	ELV	\$	3.6362
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RESTRICTED BENEFIT

"For the treatment of Attention Deficit Hyperactivity Disorder (ADHD) as a restricted benefit for patients 6 years of age and older."

60 MG ORAL CONTROLLED-RELEASE CAPSULE

00002537028	PMS-METHYLPHENIDATE CR	PMS	\$	3.1943
00002277204	BIPHENTIN	ELV	\$	3.7758

"For the treatment of Attention Deficit Hyperactivity Disorder (ADHD) as a restricted benefit for patients 6 years of age and older."

28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:20.92 ANOREXIGENIC AGENTS & RESPIRATORY AND CEREBRAL
STIMULANTS
(MISCELLANEOUS ANOREXIGENIC AGENTS & RESPIRATORY
AND CEREBRAL STIMULANTS)

METHYLPHENIDATE HCL**70 MG ORAL CONTROLLED-RELEASE CAPSULE**

00002470330	FOQUEST	ELV	\$	4.0520
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RESTRICTED BENEFIT

"For the treatment of Attention Deficit Hyperactivity Disorder (ADHD) as a restricted benefit for patients 6 years of age and older."

80 MG ORAL CONTROLLED-RELEASE CAPSULE

00002537036	PMS-METHYLPHENIDATE CR	PMS	\$	4.2113
00002277212	BIPHENTIN	ELV	\$	4.9835

"For the treatment of Attention Deficit Hyperactivity Disorder (ADHD) as a restricted benefit for patients 6 years of age and older."

85 MG ORAL CONTROLLED-RELEASE CAPSULE

00002470349	FOQUEST	ELV	\$	4.4573
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RESTRICTED BENEFIT

"For the treatment of Attention Deficit Hyperactivity Disorder (ADHD) as a restricted benefit for patients 6 years of age and older."

100 MG ORAL CONTROLLED-RELEASE CAPSULE

00002470357	FOQUEST	ELV	\$	4.8615
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RESTRICTED BENEFIT

"For the treatment of Attention Deficit Hyperactivity Disorder (ADHD) as a restricted benefit for patients 6 years of age and older."

28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:24.04 ANXIOLYTICS, SEDATIVES, AND HYPNOTICS
(BARBITURATES)

PHENOBARBITAL**15 MG ORAL TABLET**

00000178799	PHENOBARB	PPH	\$	0.1704
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30 MG ORAL TABLET

00000178802	PHENOBARB	PPH	\$	0.1580
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60 MG ORAL TABLET

00000178810	PHENOBARB	PPH	\$	0.2681
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100 MG ORAL TABLET

00000178829	PHENOBARB	PPH	\$	0.3853
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5 MG / ML ORAL ELIXIR

00000645575	PHENOBARB	PPH	\$	0.1489
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28:00 CENTRAL NERVOUS SYSTEM AGENTS**28:24.08 ANXIOLYTICS, SEDATIVES, AND HYPNOTICS
(BENZODIAZEPINES)****ALPRAZOLAM****0.25 MG ORAL TABLET**

00000865397	APO-ALPRAZ	APX	\$	0.0609
00001913484	TEVA-ALPRAZOL	TEV	\$	0.0609

0.5 MG ORAL TABLET

00000865400	APO-ALPRAZ	APX	\$	0.0728
00001913492	TEVA-ALPRAZOL	TEV	\$	0.0728

BROMAZEPAM**3 MG ORAL TABLET**

00002177161	APO-BROMAZEPAM	APX	\$	0.0897
00002230584	TEVA-BROMAZEPAM	TEV	\$	0.0897

6 MG ORAL TABLET

00002177188	APO-BROMAZEPAM	APX	\$	0.1310
00002230585	TEVA-BROMAZEPAM	TEV	\$	0.1310

CHLORDIAZEPOXIDE HCL**5 MG ORAL CAPSULE**

00000522724	CHLORDIAZEPOXIDE	AAP	\$	0.0867
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10 MG ORAL CAPSULE

00000522988	CHLORDIAZEPOXIDE	AAP	\$	0.1364
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25 MG ORAL CAPSULE

00000522996	CHLORDIAZEPOXIDE	AAP	\$	0.2117
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CHLORDIAZEPOXIDE HCL/ CLIDINIUM BROMIDE**5 MG * 2.5 MG ORAL CAPSULE**

00000115630	LIBRAX	VCL	\$	0.3783
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CLORAZEPATE DIPOTASSIUM**3.75 MG ORAL CAPSULE**

00000860689	CLORAZEPATE	AAP	\$	0.1884
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7.5 MG ORAL CAPSULE

00000860700	CLORAZEPATE	AAP	\$	0.2456
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15 MG ORAL CAPSULE

00000860697	CLORAZEPATE	AAP	\$	0.4919
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DIAZEPAM**2 MG ORAL TABLET**

00000405329	DIAZEPAM	AAP	\$	0.0551
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5 MG ORAL TABLET

00000362158	DIAZEPAM	AAP	\$	0.1662
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10 MG ORAL TABLET

00000405337	DIAZEPAM	AAP	\$	0.1204
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5 MG / ML INJECTION

00000399728	DIAZEPAM	SDZ	\$	2.0340
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FLURAZEPAM HCL**15 MG ORAL CAPSULE**

00000521698	FLURAZEPAM	AAP	\$	0.1458
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30 MG ORAL CAPSULE

00000521701	FLURAZEPAM	AAP	\$	0.1707
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28:00 CENTRAL NERVOUS SYSTEM AGENTS**28:24.08 ANXIOLYTICS, SEDATIVES, AND HYPNOTICS
(BENZODIAZEPINES)****LORAZEPAM****0.5 MG ORAL TABLET**

00000655740	APO-LORAZEPAM	APX	\$	0.0359
00000728187	PMS-LORAZEPAM	PMS	\$	0.0359
00000711101	TEVA-LORAZEPAM	TEV	\$	0.0359

1 MG ORAL TABLET

00000655759	APO-LORAZEPAM	APX	\$	0.0447
00000728195	PMS-LORAZEPAM	PMS	\$	0.0447
00000637742	TEVA-LORAZEPAM	TEV	\$	0.0447
00002041421	ATIVAN	PFI	\$	0.0565

2 MG ORAL TABLET

00000655767	APO-LORAZEPAM	APX	\$	0.0699
00000728209	PMS-LORAZEPAM	PMS	\$	0.0699
00000637750	TEVA-LORAZEPAM	TEV	\$	0.0699
00002041448	ATIVAN	PFI	\$	0.0885

0.5 MG ORAL SUBLINGUAL TABLET

00002410745	LORAZEPAM	AAP	\$	0.1010
00002041456	ATIVAN	PFI	\$	0.1373

1 MG ORAL SUBLINGUAL TABLET

00002410753	LORAZEPAM	AAP	\$	0.1272
00002041464	ATIVAN	PFI	\$	0.1726

2 MG ORAL SUBLINGUAL TABLET

00002410761	LORAZEPAM	AAP	\$	0.1974
00002041472	ATIVAN	PFI	\$	0.2710

MIDAZOLAM HCL**5 MG / ML (BASE) INJECTION**

00002240286	MIDAZOLAM	SDZ	\$	4.1000
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NITRAZEPAM**5 MG ORAL TABLET**

00000511528	MOGADON	AAP	\$	0.1919
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10 MG ORAL TABLET

00000511536	MOGADON	AAP	\$	0.2871
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OXAZEPAM**10 MG ORAL TABLET**

00000402680	APO-OXAZEPAM	APX	\$	0.0420
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15 MG ORAL TABLET

00000402745	APO-OXAZEPAM	APX	\$	0.0660
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30 MG ORAL TABLET

00000402737	APO-OXAZEPAM	APX	\$	0.0900
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TEMAZEPAM**15 MG ORAL CAPSULE**

00000604453	RESTORIL	AAP	\$	0.2587
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30 MG ORAL CAPSULE

00000604461	RESTORIL	AAP	\$	0.3132
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TRIAZOLAM**0.25 MG ORAL TABLET**

00000808571	TRIAZO	AAP	\$	0.4928
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28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:24.92 ANXIOLYTICS, SEDATIVES, AND HYPNOTICS
(MISCELLANEOUS ANXIOLYTICS, SEDATIVES, AND HYPNOTICS)

BUSPIRONE HCL**10 MG ORAL TABLET**

00002211076	APO-BUSPIRONE	APX	\$	0.2713
00002500213	AURO-BUSPIRONE	AUR	\$	0.2713
00002447851	BUSPIRONE	SNS	\$	0.2713
00002509911	JAMP BUSPIRONE	JPC	\$	0.2713
00002519054	MINT-BUSPIRONE	MPI	\$	0.2713
00002231492	NOVO-BUSPIRONE	TEV	\$	0.2713
00002230942	PMS-BUSPIRONE	PMS	\$	0.2713

HYDROXYZINE HCL**10 MG ORAL CAPSULE**

00000646059	HYDROXYZINE	AAP	\$	0.1237
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25 MG ORAL CAPSULE

00000738832	NOVO-HYDROXYZIN	TEV	\$	0.1425
00000646024	HYDROXYZINE	AAP	\$	0.1580

50 MG ORAL CAPSULE

00000738840	NOVO-HYDROXYZIN	TEV	\$	0.2068
00000646016	HYDROXYZINE	AAP	\$	0.2294

2 MG / ML ORAL SYRUP

00000024694	ATARAX	ERF	\$	0.0622
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ZOPICLONE**3.75 MG ORAL TABLET**

00002458543	PMS-ZOPICLONE	PMS	\$	0.0743
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5 MG ORAL TABLET

00002475839	AG-ZOPICLONE	AGP	\$	0.0990
00002245077	APO-ZOPICLONE	APX	\$	0.0990
00002406969	JAMP-ZOPICLONE	JPC	\$	0.0990
00002467941	M-ZOPICLONE	MTR	\$	0.0990
00002386771	MAR-ZOPICLONE	MAR	\$	0.0990
00002391716	MINT-ZOPICLONE	MPI	\$	0.0990
00002477378	NRA-ZOPICLONE	NRA	\$	0.0990
00002243426	PMS-ZOPICLONE	PMS	\$	0.0990
00002246534	RATIO-ZOPICLONE	TEV	\$	0.0990
00002344122	ZOPICLONE	SNS	\$	0.0990
00002385821	ZOPICLONE	SIV	\$	0.0990

7.5 MG ORAL TABLET

00002475847	AG-ZOPICLONE	AGP	\$	0.1250
00002218313	APO-ZOPICLONE	APX	\$	0.1250
00002406977	JAMP-ZOPICLONE	JPC	\$	0.1250
00002467968	M-ZOPICLONE	MTR	\$	0.1250
00002386798	MAR-ZOPICLONE	MAR	\$	0.1250
00002391724	MINT-ZOPICLONE	MPI	\$	0.1250
00002477386	NRA-ZOPICLONE	NRA	\$	0.1250
00002240606	PMS-ZOPICLONE	PMS	\$	0.1250
00002242481	RATIO-ZOPICLONE	TEV	\$	0.1250
00002282445	ZOPICLONE	SNS	\$	0.1250
00002385848	ZOPICLONE	SIV	\$	0.1250
00001926799	IMOVANE	SAV	\$	1.3677

28:00 CENTRAL NERVOUS SYSTEM AGENTS**28:28 ANTIMANIC AGENTS****LITHIUM CARBONATE****150 MG ORAL CAPSULE**

00002242837	APO-LITHIUM CARBONATE	APX	\$	0.0667
00002216132	PMS-LITHIUM CARBONATE	PMS	\$	0.0667
00000461733	CARBOLITH	VCL	\$	0.1420

150 MG ORAL CAPSULE

00002242837	APO-LITHIUM CARBONATE	APX	\$	0.0667
00002013231	LITHANE	ERF	\$	0.1232

300 MG ORAL CAPSULE

00002242838	APO-LITHIUM CARBONATE	APX	\$	0.0657
00002216140	PMS-LITHIUM CARBONATE	PMS	\$	0.0657
00000236683	CARBOLITH	VCL	\$	0.1104

300 MG ORAL CAPSULE

00002242838	APO-LITHIUM CARBONATE	APX	\$	0.0657
00000406775	LITHANE	ERF	\$	0.1227

600 MG ORAL CAPSULE

00002216159	PMS-LITHIUM CARBONATE	PMS	\$	0.1988
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28:00 CENTRAL NERVOUS SYSTEM AGENTS**28:32.28 ANTIMIGRAINE AGENTS****(SELECTIVE SEROTONIN AGONISTS)****ALMOTRIPTAN MALATE**

RESTRICTED BENEFIT - This product is a benefit for patients 18 to 64 years of age inclusive for the treatment of acute migraine attacks in patients where other standard therapy has failed. (Refer to Criteria for Special Authorization of Select Drug Products of the List for eligibility in patients 65 years of age and older, and Criteria for Special Authorization of Select Drug Products in the Alberta Human Services Drug Benefit Supplement for eligibility in Alberta Human Services clients.)

6.25 MG (BASE) ORAL TABLET

00002398435	MYLAN-ALMOTRIPTAN	MYP	\$	7.0433
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12.5 MG (BASE) ORAL TABLET

00002466821	ALMOTRIPTAN	SNS	\$	2.3478
00002398443	MYLAN-ALMOTRIPTAN	MYP	\$	2.3478
00002405334	SANDOZ ALMOTRIPTAN	SDZ	\$	2.3478
00002434849	TEVA-ALMOTRIPTAN	TEV	\$	2.3478

NARATRIPTAN HCL

RESTRICTED BENEFIT - This product is a benefit for patients 18 to 64 years of age inclusive for the treatment of acute migraine attacks in patients where other standard therapy has failed. (Refer to Criteria for Special Authorization of Select Drug Products of the List for eligibility in patients 65 years of age and older; and Criteria for Special Authorization of Select Drug Products in the Alberta Human Services Drug Benefit Supplement for eligibility in Alberta Human Services clients.)

1 MG (BASE) ORAL TABLET

00002314290	TEVA-NARATRIPTAN	TEV	\$	13.1237
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2.5 MG (BASE) ORAL TABLET

00002322323	SANDOZ NARATRIPTAN	SDZ	\$	6.1436
00002314304	TEVA-NARATRIPTAN	TEV	\$	6.1436

28:00 CENTRAL NERVOUS SYSTEM AGENTS**28:32.28 ANTIMIGRAINE AGENTS****(SELECTIVE SEROTONIN AGONISTS)****RIZATRIPTAN BENZOATE**

RESTRICTED BENEFIT - This product is a benefit for patients 18 to 64 years of age inclusive for the treatment of acute migraine attacks in patients where standard therapy has failed. (Refer to Criteria for Special Authorization of Select Drug Products of the List for eligibility in patients 65 years of age and older; and Criteria for Special Authorization of Select Drug Products of the Alberta Human Services Drug Benefit Supplement for eligibility in Alberta Human Services clients.)

5 MG (BASE) ORAL TABLET

00002393468	APO-RIZATRIPTAN	APX	\$	7.4100
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10 MG (BASE) ORAL TABLET

00002381702	ACT RIZATRIPTAN	TEV	\$	3.7050
00002393476	APO-RIZATRIPTAN	APX	\$	3.7050
00002380463	JAMP-RIZATRIPTAN	JPC	\$	3.7050
00002379678	MAR-RIZATRIPTAN	MAR	\$	3.7050
00002516756	RIZATRIPTAN	SNS	\$	3.7050
00002240521	MAXALT	ORC	\$	17.3420

5 MG (BASE) ORAL DISINTEGRATING TABLET

00002483270	ACCEL-RIZATRIPTAN ODT	ACP	\$	2.8150
00002458764	CCP-RIZATRIPTAN ODT	CEL	\$	2.9633
00002465086	JAMP-RIZATRIPTAN ODT	JPC	\$	3.7050
00002462788	MAR-RIZATRIPTAN ODT	MAR	\$	3.7050
00002379198	MYLAN-RIZATRIPTAN ODT	MYP	\$	3.7050
00002436604	NAT-RIZATRIPTAN ODT	NTP	\$	3.7050
00002393360	PMS-RIZATRIPTAN RDT	PMS	\$	3.7050
00002442906	RIZATRIPTAN ODT	SNS	\$	3.7050
00002446111	RIZATRIPTAN ODT	SIV	\$	3.7050
00002351870	SANDOZ RIZATRIPTAN ODT	SDZ	\$	3.7050
00002396661	TEVA-RIZATRIPTAN ODT	TEV	\$	3.7050
00002240518	MAXALT RPD	ORC	\$	17.3420

10 MG (BASE) ORAL DISINTEGRATING TABLET

00002483289	ACCEL-RIZATRIPTAN ODT	ACP	\$	2.8150
00002458772	CCP-RIZATRIPTAN ODT	CEL	\$	2.9633
00002492490	AG-RIZATRIPTAN ODT	AGP	\$	3.7050
00002465094	JAMP-RIZATRIPTAN ODT	JPC	\$	3.7050
00002462796	MAR-RIZATRIPTAN ODT	MAR	\$	3.7050
00002379201	MYLAN-RIZATRIPTAN ODT	MYP	\$	3.7050
00002436612	NAT-RIZATRIPTAN ODT	NTP	\$	3.7050
00002489384	NRA-RIZATRIPTAN ODT	NRA	\$	3.7050
00002393379	PMS-RIZATRIPTAN RDT	PMS	\$	3.7050
00002442914	RIZATRIPTAN ODT	SNS	\$	3.7050
00002446138	RIZATRIPTAN ODT	SIV	\$	3.7050
00002351889	SANDOZ RIZATRIPTAN ODT	SDZ	\$	3.7050
00002396688	TEVA-RIZATRIPTAN ODT	TEV	\$	3.7050
00002240519	MAXALT RPD	ORC	\$	17.3420

28:00 CENTRAL NERVOUS SYSTEM AGENTS**28:32.28 ANTIMIGRAINE AGENTS****(SELECTIVE SEROTONIN AGONISTS)****SUMATRIPTAN HEMISULFATE**

RESTRICTED BENEFIT - This product is a benefit for patients 18 to 64 years of age inclusive for the treatment of acute migraine attacks in patients where other standard therapy has failed. (Refer to Criteria for Special Authorization of Select Drug Products of the List for eligibility in patients 65 years of age and older; and Criteria for Special Authorization of Select Drug Products of the Alberta Human Services Drug Benefit Supplement for eligibility in Alberta Human Services clients.)

5 MG / DOSE (BASE) NASAL UNIT DOSE SPRAY

00002230418	IMITREX	GSK	\$	17.3952
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20 MG / DOSE (BASE) NASAL UNIT DOSE SPRAY

00002230420	IMITREX	GSK	\$	17.8971
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SUMATRIPTAN SUCCINATE

RESTRICTED BENEFIT - This product is a benefit for patients 18 to 64 years of age inclusive for the treatment of acute migraine attacks in patients where other standard therapy has failed. (Refer to Criteria for Special Authorization of Select Drug Products of the List for eligibility in patients 65 years of age and older, and Criteria for Special Authorization of Select Drug Products in the Alberta Human Services Drug Benefit Supplement for eligibility in Alberta Human Services clients.)

50 MG (BASE) ORAL TABLET

00002268388	APO-SUMATRIPTAN	APX	\$	2.7732
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00002268914	MYLAN-SUMATRIPTAN	MYP	\$	2.7732
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00002256436	PMS-SUMATRIPTAN	PMS	\$	2.7732
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00002286521	SUMATRIPTAN	SNS	\$	2.7732
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00002385570	SUMATRIPTAN DF	SIV	\$	2.7732
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00002286823	TEVA-SUMATRIPTAN DF	TEV	\$	2.7732
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00002212153	IMITREX DF	GSK	\$	17.6485
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100 MG (BASE) ORAL TABLET

00002268396	APO-SUMATRIPTAN	APX	\$	3.0549
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00002268922	MYLAN-SUMATRIPTAN	MYP	\$	3.0549
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00002256444	PMS-SUMATRIPTAN	PMS	\$	3.0549
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00002286548	SUMATRIPTAN	SNS	\$	3.0549
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00002385589	SUMATRIPTAN DF	SIV	\$	3.0549
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00002239367	TEVA-SUMATRIPTAN	TEV	\$	3.0549
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00002286831	TEVA-SUMATRIPTAN DF	TEV	\$	3.0549
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00002212161	IMITREX DF	GSK	\$	19.4417
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12 MG / SYR (BASE) INJECTION SYRINGE

00002361698	TARO-SUMATRIPTAN (0.5 ML)	TAR	\$	41.1185
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00002212188	IMITREX (0.5 ML)	GSK	\$	52.5214
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28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:32.28 ANTIMIGRAINE AGENTS
(SELECTIVE SEROTONIN AGONISTS)

ZOLMITRIPTAN

RESTRICTED BENEFIT - This product is a benefit for patients 18 to 64 years of age inclusive for the treatment of acute migraine attacks in patients where other standard therapy has failed. (Refer to Criteria for Special Authorization of Select Drug Products of the List for eligibility in patients 65 years of age and older; and Criteria for Special Authorization of Select Drug Products of the Alberta Human Services Drug Benefit Supplement for eligibility in Alberta Human Services clients.)

2.5 MG ORAL TABLET

00002481030	AURO-ZOLMITRIPTAN	AUR	\$	3.5375
00002458780	CCP-ZOLMITRIPTAN	CEL	\$	3.5375
00002477106	JAMP ZOLMITRIPTAN	JPC	\$	3.5375
00002421623	JAMP-ZOLMITRIPTAN	JPC	\$	3.5375
00002419521	MINT-ZOLMITRIPTAN	MPI	\$	3.5375
00002421534	NAT-ZOLMITRIPTAN	NTP	\$	3.5375
00002489392	NRA-ZOLMITRIPTAN	NRA	\$	3.5375
00002362988	SANDOZ ZOLMITRIPTAN	SDZ	\$	3.5375
00002313960	TEVA-ZOLMITRIPTAN	TEV	\$	3.5375
00002442655	ZOLMITRIPTAN	SNS	\$	3.5375
00002238660	ZOMIG	XPI	\$	16.3195

2.5 MG ORAL DISPERSIBLE TABLET

00002428474	SEPTA-ZOLMITRIPTAN-ODT	SEP	\$	1.7532
00002243045	ZOMIG RAPIMELT	XPI	\$	16.3195

5 MG / DOSE NASAL UNIT DOSE SPRAY

00002248993	ZOMIG	XPI	\$	16.3195
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28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:32.92 ANTIMIGRAINE AGENTS
(MISCELLANEOUS ANTIMIGRAINE AGENTS)

PIZOTIFEN MALATE**1 MG (BASE) ORAL TABLET**

00000511552	SANDOMIGRAN DS	PAL	\$	0.7850
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28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:36.04 ANTIPARKINSONIAN AGENTS
(ADAMANTANES)

AMANTADINE HCL**100 MG ORAL CAPSULE**

00001990403	PDP-AMANTADINE HYDROCHLORIDE	PPH	\$	0.6120
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10 MG / ML ORAL SYRUP

00002538601	ODAN-AMANTADINE	ODN	\$	0.0988
00002022826	PDP-AMANTADINE HYDROCHLORIDE	PPH	\$	0.0988

28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:36.08 ANTIPARKINSONIAN AGENTS
(ANTICHOLINERGIC AGENTS)

BENZTROPINE MESYLATE

1 MG ORAL TABLET

00000706531 PDP-BENZTROPINE PPH \$ 0.0522

1 MG / ML INJECTION

00002238903 BENZTROPINE OMEGA OMG \$ 11.0250

ETHOPROPAZINE HCL

50 MG (BASE) ORAL TABLET

00001927744 PARSITAN ERF \$ 0.2518

TRIHEXYPHENIDYL HCL

2 MG ORAL TABLET

00000545058 TRIHEXYPHENIDYL AAP \$ 0.0471

5 MG ORAL TABLET

00000545074 TRIHEXYPHENIDYL AAP \$ 0.0851

28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:36.12 ANTIPARKINSONIAN AGENTS
(CATECHOL-O-METHYLTRANSFERASE (COMT) INHIBITORS)

ENTACAPONE

200 MG ORAL TABLET

00002380005 SANDOZ ENTACAPONE SDZ \$ 0.4010

00002375559 TEVA-ENTACAPONE TEV \$ 0.4010

28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:36.16 ANTIPARKINSONIAN AGENTS
(DOPAMINE PRECURSORS)

LEVODOPA/ BENSERAZIDE HCL

50 MG * 12.5 MG (BASE) ORAL CAPSULE

00000522597 PROLOPA 50-12.5 HLR \$ 0.3357

100 MG * 25 MG (BASE) ORAL CAPSULE

00000386464 PROLOPA 100-25 HLR \$ 0.5528

200 MG * 50 MG (BASE) ORAL CAPSULE

00000386472 PROLOPA 200-50 HLR \$ 0.9281

LEVODOPA/ CARBIDOPA

100 MG * 10 MG ORAL TABLET

00002195933 APO-LEVOCARB APX \$ 0.1479

00002531593 AURO-LEVOCARB AUR \$ 0.1479

00002457954 MINT-LEVOCARB MPI \$ 0.1479

00002244494 TEVA-LEVOCARBIDOPA TEV \$ 0.1479

100 MG * 25 MG ORAL TABLET

00002195941 APO-LEVOCARB APX \$ 0.2209

00002531607 AURO-LEVOCARB AUR \$ 0.2209

00002457962 MINT-LEVOCARB MPI \$ 0.2209

00002244495 TEVA-LEVOCARBIDOPA TEV \$ 0.2209

28:00 CENTRAL NERVOUS SYSTEM AGENTS28:36.16 ANTIPARKINSONIAN AGENTS
(DOPAMINE PRECURSORS)**LEVODOPA/ CARBIDOPA**

250 MG * 25 MG ORAL TABLET

00002195968	APO-LEVOCARB	APX	\$	0.2466
00002531615	AURO-LEVOCARB	AUR	\$	0.2466
00002457970	MINT-LEVOCARB	MPI	\$	0.2466
00002244496	TEVA-LEVOCARBIDOPA	TEV	\$	0.2466

100 MG * 25 MG ORAL SUSTAINED-RELEASE TABLET

00002272873	AA-LEVOCARB CR	AAP	\$	0.7974
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200 MG * 50 MG ORAL SUSTAINED-RELEASE TABLET

00002245211	AA-LEVOCARB CR	AAP	\$	1.4282
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LEVODOPA/ CARBIDOPA/ ENTACAPONE

50 MG * 12.5 MG * 200 MG ORAL TABLET

00002305933	STALEVO	SDZ	\$	1.7726
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75 MG * 18.75 MG * 200 MG ORAL TABLET

00002337827	STALEVO	SDZ	\$	1.7726
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100 MG * 25 MG * 200 MG ORAL TABLET

00002305941	STALEVO	SDZ	\$	1.7726
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125 MG * 31.25 MG * 200 MG ORAL TABLET

00002337835	STALEVO	SDZ	\$	1.7726
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150 MG * 37.5 MG * 200 MG ORAL TABLET

00002305968	STALEVO	SDZ	\$	1.7726
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28:00 CENTRAL NERVOUS SYSTEM AGENTS28:36.20.04 ANTIPARKINSONIAN AGENTS
DOPAMINE RECEPTOR AGONISTS
(ERGOT-DERIVATIVE-DOPAMINE RECEPTOR AGONISTS)**BROMOCRIPTINE MESYLATE**

2.5 MG (BASE) ORAL TABLET

00002087324	BROMOCRIPTINE	AAP	\$	1.2481
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5 MG (BASE) ORAL CAPSULE

00002230454	BROMOCRIPTINE	AAP	\$	1.8684
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28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:36.20.08 ANTIPARKINSONIAN AGENTS

DOPAMINE RECEPTOR AGONISTS

(NONERGOT-DERIVATIVE DOPAMINE RECEPTOR AGONISTS)

PRAMIPEXOLE DIHYDROCHLORIDE

0.25 MG ORAL TABLET

00002297302	ACT PRAMIPEXOLE	TEV	\$	0.1950
00002292378	APO-PRAMIPEXOLE	APX	\$	0.1950
00002424061	AURO-PRAMIPEXOLE	AUR	\$	0.1950
00002309122	PRAMIPEXOLE	SIV	\$	0.1950
00002367602	PRAMIPEXOLE	SNS	\$	0.1950
00002315262	SANDOZ PRAMIPEXOLE	SDZ	\$	0.1950
00002237145	MIRAPEX	BOE	\$	1.2179

1 MG ORAL TABLET

00002297329	ACT PRAMIPEXOLE	TEV	\$	0.3901
00002292394	APO-PRAMIPEXOLE	APX	\$	0.3901
00002424096	AURO-PRAMIPEXOLE	AUR	\$	0.3901
00002309149	PRAMIPEXOLE	SIV	\$	0.3901
00002367629	PRAMIPEXOLE	SNS	\$	0.3901
00002315289	SANDOZ PRAMIPEXOLE	SDZ	\$	0.3901

1.5 MG ORAL TABLET

00002297337	ACT PRAMIPEXOLE	TEV	\$	0.3901
00002292408	APO-PRAMIPEXOLE	APX	\$	0.3901
00002424118	AURO-PRAMIPEXOLE	AUR	\$	0.3901
00002309157	PRAMIPEXOLE	SIV	\$	0.3901
00002367645	PRAMIPEXOLE	SNS	\$	0.3901
00002315297	SANDOZ PRAMIPEXOLE	SDZ	\$	0.3901

ROPINIROLE HCL

0.25 MG (BASE) ORAL TABLET

00002352338	JAMP-ROPINIROLE	JPC	\$	0.0709
00002314037	RAN-ROPINIROLE	RAN	\$	0.0709
00002316846	TEVA-ROPINIROLE	TEV	\$	0.0709

1 MG (BASE) ORAL TABLET

00002352346	JAMP-ROPINIROLE	JPC	\$	0.2838
00002314053	RAN-ROPINIROLE	RAN	\$	0.2838
00002316854	TEVA-ROPINIROLE	TEV	\$	0.2838

2 MG (BASE) ORAL TABLET

00002352354	JAMP-ROPINIROLE	JPC	\$	0.3122
00002314061	RAN-ROPINIROLE	RAN	\$	0.3122
00002316862	TEVA-ROPINIROLE	TEV	\$	0.3122

5 MG (BASE) ORAL TABLET

00002352362	JAMP-ROPINIROLE	JPC	\$	1.7450
00002314088	RAN-ROPINIROLE	RAN	\$	1.7450
00002316870	TEVA-ROPINIROLE	TEV	\$	1.7450

28:00 CENTRAL NERVOUS SYSTEM AGENTS

28:36.32 ANTIPARKINSONIAN AGENTS

(MONOAMINE OXIDASE B INHIBITORS)

SELEGILINE HCL

5 MG ORAL TABLET

00002068087	NOVO-SELEGILINE	TEV	\$	0.5021
00002230641	SELEGILINE	AAP	\$	0.5021

34:00

Dental Agents

34:00 DENTAL AGENTS

34:00

SODIUM FLUORIDE

2.21 MG ORAL CHEWABLE TABLET

00000575569 FLUOR-A-DAY

PMS

\$ 0.0880

36:00

Diagnostic Agents

36:00 DIAGNOSTIC AGENTS

36:60 THYROID FUNCTION

THYROTROPIN ALFA

0.9 MG / VIAL INJECTION

00002246016 THYROGEN

GZM

\$ 922.5000

40:00

Electrolytic, Caloric, and
Water Balance

40:00 ELECTROLYTIC, CALORIC, AND WATER BALANCE

40:10 AMMONIA DETOXICANTS

LACTULOSE

667 MG / ML ORAL SYRUP

00002295881	JAMP-LACTULOSE	JPC	\$	0.0145
00002412268	LACTULOSE	SNS	\$	0.0145
00000703486	PMS-LACTULOSE	PMS	\$	0.0145
00002469391	PMS-LACTULOSE-PHARMA	PMS	\$	0.0145
00000854409	RATIO-LACTULOSE	TEV	\$	0.0145
00002331551	TEVA-LACTULOSE	TEV	\$	0.0145

40:00 ELECTROLYTIC, CALORIC, AND WATER BALANCE

40:12 REPLACEMENT PREPARATIONS

MAGNESIUM GLUCOHEPTONATE

100 MG / ML ORAL SOLUTION

<input checked="" type="checkbox"/>	00080004109	MAGNESIUM-ODAN	ODN	\$	0.0199
<input checked="" type="checkbox"/>	00000026697	ROUGIER MAGNESIUM	TEV	\$	0.0200

MAGNESIUM GLUCONATE

500 MG ORAL TABLET

<input checked="" type="checkbox"/>	00080009539	JAMP MAGNESIUM GLUCONATE	JPC	\$	0.1088
<input checked="" type="checkbox"/>	00000555126	MAGLUCATE	PPH	\$	0.1183

POTASSIUM BICARBONATE

975 MG (BASE) ORAL EFFERVESCENT TABLET

00080033602	JAMP-K EFFERVESCENT (25 MEQ)	JPC	\$	0.4760
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POTASSIUM CHLORIDE (K+)

8 MEQ ORAL TABLET

00080035346	MK 8	MTR	\$	0.0432
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8 MEQ ORAL SUSTAINED-RELEASE TABLET

<input checked="" type="checkbox"/>	00002246734	SANDOZ K	SDZ	\$ 0.0400	\$	0.0400
<input checked="" type="checkbox"/>	00080013005	JAMP-K 8	JPC	\$ 0.0400	\$	0.0450

MAC pricing has been applied based on the lowest unit cost for an 8 mEq (K+) oral sustained-release tablet.

8 MEQ ORAL EXTENDED-RELEASE CAPSULE

00080062704	JAMP-POTASSIUM CHLORIDE ER	JPC	\$ 0.0822	\$	0.0822
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MAC pricing has been applied based on the lowest unit cost for an 8 mEq (K+) oral sustained-release capsules.

8 MEQ ORAL SUSTAINED-RELEASE CAPSULE

00002042304	MICRO-K EXTENCAPS	PAL	\$ 0.0822	\$	0.1066
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MAC pricing has been applied based on the lowest unit cost for an 8 mEq (K+) oral sustained-release capsules.

20 MEQ ORAL TABLET/SUSTAINED-RELEASE TABLET

<input checked="" type="checkbox"/>	00080013007	JAMP-K 20	JPC	\$ 0.1161	\$	0.1161
<input checked="" type="checkbox"/>	00080004415	ODAN K-20	ODN	\$ 0.1161	\$	0.1161
<input checked="" type="checkbox"/>	00002242261	SANDOZ K 20	SDZ	\$ 0.1161	\$	0.1161

MAC pricing has been applied based on the lowest unit cost for an 20 mEq (K+) oral tablet and / or sustained-release tablet.

40:00 ELECTROLYTIC, CALORIC, AND WATER BALANCE

40:12 REPLACEMENT PREPARATIONS

POTASSIUM CHLORIDE (K+)(CL-)

1.33 MEQ / ML ORAL LIQUID

<input checked="" type="checkbox"/>	00080024835	JAMP POTASSIUM CHLORIDE	JPC	\$ 0.0227	\$ 0.0227
<input checked="" type="checkbox"/>	00002238604	PMS-POTASSIUM CHLORIDE	PMS	\$ 0.0227	\$ 0.0227
<input checked="" type="checkbox"/>	00080046782	POTASSIUM CHLORIDE	ODN	\$ 0.0227	\$ 0.0227

MAC pricing has been applied based on the lowest unit cost for the 1.33 mEq / ml Oral Liquid.

**SODIUM ACID PHOSPHATE/ SODIUM BICARBONATE/
POTASSIUM BICARBONATE**

500 MG (BASE) * 469 MG (BASE) * 123 MG (BASE) ORAL EFFERVESCENT TABLET

00080047562	JAMP-SODIUM PHOSPHATE	JPC	\$ 1.4010
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40:00 ELECTROLYTIC, CALORIC, AND WATER BALANCE40:18.18 ION-REMOVING AGENTS
(POTASSIUM-REMOVING AGENTS)**CALCIUM POLYSTYRENE SULFONATE**

999 MG / G ORAL/RECTAL POWDER

00002502631	JAMP CALCIUM POLYSTYRENE SULFONATE	JPC	\$ 0.2398
00002017741	RESONIUM CALCIUM	SAV	\$ 0.3529

SODIUM POLYSTYRENE SULFONATE

250 MG / ML ORAL SUSPENSION

00000769541	SOLYSTAT	PPH	\$ 0.1409
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250 MG / ML ORAL/RECTAL SUSPENSION

00002473968	ODAN-SODIUM POLYSTYRENE SULFONATE	ODN	\$ 0.1409
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ORAL/RECTAL POWDER

00002497557	JAMP SODIUM POLYSTYRENE SULFONATE	JPC	\$ 0.0648
00002473941	ODAN-SODIUM POLYSTYRENE SULFONATE	ODN	\$ 0.0648
00000755338	SOLYSTAT	PPH	\$ 0.0648
00002026961	KAYEXALATE	SAV	\$ 0.1923

40:00 ELECTROLYTIC, CALORIC, AND WATER BALANCE40:28.16 DIURETICS
(POTASSIUM-SPARING DIURETICS)**AMILORIDE HCL**

5 MG ORAL TABLET

00002249510	MIDAMOR	AAP	\$ 0.3465
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40:00 ELECTROLYTIC, CALORIC, AND WATER BALANCE40:28.20 DIURETICS
(THIAZIDE DIURETICS)**AMILORIDE HCL/ HYDROCHLOROTHIAZIDE**

5 MG * 50 MG ORAL TABLET

00000784400	AA-AMILZIDE	AAP	\$ 0.0926
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40:00 ELECTROLYTIC, CALORIC, AND WATER BALANCE40:28.20 DIURETICS
(THIAZIDE DIURETICS)**HYDROCHLOROTHIAZIDE**

12.5 MG ORAL TABLET

<input checked="" type="checkbox"/>	00002327856	APO-HYDRO	APX	\$	0.0322
<input checked="" type="checkbox"/>	00002274086	PMS-HYDROCHLOROTHIAZIDE	PMS	\$	0.0322

25 MG ORAL TABLET

	00000326844	APO-HYDRO	APX	\$	0.0157
	00002360594	HYDROCHLOROTHIAZIDE	SNS	\$	0.0157
	00002247386	PMS-HYDROCHLOROTHIAZIDE	PMS	\$	0.0157
	00000021474	TEVA-HYDRAZIDE	TEV	\$	0.0157

50 MG ORAL TABLET

	00000312800	APO-HYDRO	APX	\$	0.0217
	00002360608	HYDROCHLOROTHIAZIDE	SNS	\$	0.0217
	00002247387	PMS-HYDROCHLOROTHIAZIDE	PMS	\$	0.0217
	00000021482	TEVA-HYDRAZIDE	TEV	\$	0.0217

HYDROCHLOROTHIAZIDE/ TRIAMTERENE

25 MG * 50 MG ORAL TABLET

	00000441775	APO-TRIAZIDE	APX	\$	0.0608
	00000532657	TEVA-TRIAMTERENE/HCTZ	TEV	\$	0.0608

40:00 ELECTROLYTIC, CALORIC, AND WATER BALANCE40:28.24 DIURETICS
(THIAZIDE-LIKE DIURETICS)**CHLORTHALIDONE**

50 MG ORAL TABLET

	00000360279	APO-CHLORTHALIDONE	APX	\$	0.1277
	00002523817	JAMP CHLORTHALIDONE	JPC	\$	0.1277

INDAPAMIDE HEMIHYDRATE

1.25 MG (BASE) ORAL TABLET

	00002245246	APO-INDAPAMIDE	APX	\$	0.1490
	00002240067	MYLAN-INDAPAMIDE	MYP	\$	0.1490

2.5 MG (BASE) ORAL TABLET

	00002223678	APO-INDAPAMIDE	APX	\$	0.2364
	00002153483	MYLAN-INDAPAMIDE	MYP	\$	0.2364

METOLAZONE

2.5 MG ORAL TABLET

	00000888400	ZAROXOLYN	SAV	\$	0.2294
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48:00

Respiratory Tract Agents

48:00 RESPIRATORY TRACT AGENTS**48:10.24 ANTI-INFLAMMATORY AGENTS
(LEUKOTRIENE MODIFIERS)****MONTELUKAST SODIUM****10 MG (BASE) ORAL TABLET**

00002379236	ACH-MONTELUKAST	AHI	\$	0.4231
00002374609	APO-MONTELUKAST	APX	\$	0.4231
00002401274	AURO-MONTELUKAST	AUR	\$	0.4231
00002391422	JAMP-MONTELUKAST	JPC	\$	0.4231
00002488183	M-MONTELUKAST	MTR	\$	0.4231
00002399997	MAR-MONTELUKAST	MAR	\$	0.4231
00002408643	MINT-MONTELUKAST	MPI	\$	0.4231
00002379333	MONTELUKAST	SNS	\$	0.4231
00002382474	MONTELUKAST	SIV	\$	0.4231
00002522136	NAT-MONTELUKAST	NTP	\$	0.4231
00002489821	NRA-MONTELUKAST	NRA	\$	0.4231
00002373947	PMS-MONTELUKAST FC	PMS	\$	0.4231
00002389517	RAN-MONTELUKAST	RAN	\$	0.4231
00002328593	SANDOZ MONTELUKAST	SDZ	\$	0.4231
00002355523	TEVA-MONTELUKAST	TEV	\$	0.4231
00002238217	SINGULAIR	ORC	\$	2.7000

RESTRICTED BENEFIT - This product is a benefit for patients 6 to 18 years of age inclusive for the prophylaxis and treatment of asthma. (For eligibility in patients over 18 years of age refer to Criteria for Special Authorization of Select Drug Products of the List, and Criteria for Special Authorization of Select Drug Products in the Alberta Human Services Drug Benefit Supplement for eligibility for Alberta Human Services clients.)

4 MG (BASE) ORAL CHEWABLE TABLET

00002377608	APO-MONTELUKAST	APX	\$	0.2758
00002514877	JAMP MONTELUKAST	JPC	\$	0.2758
00002399865	MAR-MONTELUKAST	MAR	\$	0.2758
00002408627	MINT-MONTELUKAST	MPI	\$	0.2758
00002382458	MONTELUKAST	SIV	\$	0.2758
00002522101	NAT-MONTELUKAST	NTP	\$	0.2758
00002354977	PMS-MONTELUKAST	PMS	\$	0.2758
00002330385	SANDOZ MONTELUKAST	SDZ	\$	0.2758
00002355507	TEVA-MONTELUKAST	TEV	\$	0.2758
00002243602	SINGULAIR	ORC	\$	1.6450

RESTRICTED BENEFIT - This product is a benefit for patients 2 to 18 years of age inclusive for the prophylaxis and treatment of asthma.

48:00 RESPIRATORY TRACT AGENTS

48:10.24 ANTI-INFLAMMATORY AGENTS
(LEUKOTRIENE MODIFIERS)

MONTELUKAST SODIUM

5 MG (BASE) ORAL CHEWABLE TABLET

00002377616	APO-MONTELUKAST	APX	\$	0.3082
00002514885	JAMP MONTELUKAST	JPC	\$	0.3082
00002399873	MAR-MONTELUKAST	MAR	\$	0.3082
00002408635	MINT-MONTELUKAST	MPI	\$	0.3082
00002379325	MONTELUKAST	SNS	\$	0.3082
00002382466	MONTELUKAST	SIV	\$	0.3082
00002522128	NAT-MONTELUKAST	NTP	\$	0.3082
00002354985	PMS-MONTELUKAST	PMS	\$	0.3082
00002330393	SANDOZ MONTELUKAST	SDZ	\$	0.3082
00002355515	TEVA-MONTELUKAST	TEV	\$	0.3082
00002238216	SINGULAIR	ORC	\$	1.8400

RESTRICTED BENEFIT - This product is a benefit for patients 6 to 18 years of age inclusive for the prophylaxis and treatment of asthma. (For eligibility in patients over 18 years of age refer to Criteria for Special Authorization of Select Drug Products of the List, and Criteria for Special Authorization of Select Drug Products in the Alberta Human Services Drug Benefit Supplement for eligibility for Alberta Human Services clients.)

4 MG (BASE) ORAL GRANULE

00002358611	SANDOZ MONTELUKAST	SDZ	\$	1.3139
00002247997	SINGULAIR	ORC	\$	1.6300

RESTRICTED BENEFIT - This product is a benefit for patients 2 to 18 years of age inclusive for the prophylaxis and treatment of asthma.

48:00 RESPIRATORY TRACT AGENTS

48:10.32 ANTI-INFLAMMATORY AGENTS
(MAST-CELL STABILIZERS)

SODIUM CROMOGLYATE

100 MG ORAL CAPSULE

00000500895	NALCROM	SAV	\$	1.6920
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48:00 RESPIRATORY TRACT AGENTS

48:12.08 BRONCHODILATORS
(ANTICHOLINERGIC AGENTS)

GLYCOPYRRONIUM BROMIDE

50 MCG INHALATION CAPSULE

00002394936	SEEBRI BREEZHALER	COV	\$	1.8302
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48:00 RESPIRATORY TRACT AGENTS

48:24 MUCOLYTIC AGENTS

ACETYL CYSTEINE

20 % INHALATION SOLUTION

00002243098	ACETYL CYSTEINE	SDZ	\$	2.7500
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52:00

Eye, Ear, Nose and Throat
(EENT) Preparations

52:00 EYE, EAR, NOSE, AND THROAT (EENT) PREPARATIONS**52:04.04 ANTI-INFECTIVES
(ANTIBACTERIALS)****CIPROFLOXACIN HCL**

0.3 % (BASE) OPHTHALMIC SOLUTION

00002387131	SANDOZ CIPROFLOXACIN	SDZ	\$	1.7600
00001945270	CILOXAN	NOV	\$	2.2240

ERYTHROMYCIN

0.5 % OPHTHALMIC OINTMENT

00001912755	PDP-ERYTHROMYCIN	PPH	\$	4.2000
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OFLOXACIN

0.3 % OPHTHALMIC SOLUTION

00002143291	OCUFLOX	ABV	\$	2.7245
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TOBRAMYCIN

0.3 % OPHTHALMIC SOLUTION

00002241755	SANDOZ TOBRAMYCIN	SDZ	\$	1.3620
00000513962	TOBEX	NOV	\$	1.8580

0.3 % OPHTHALMIC OINTMENT

00000614254	TOBEX	NOV	\$	2.6343
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52:00 EYE, EAR, NOSE, AND THROAT (EENT) PREPARATIONS**52:08.08 ANTI-INFLAMMATORY AGENTS
(CORTICOSTEROIDS)****BECLOMETHASONE DIPROPIONATE**

50 MCG / DOSE NASAL METERED DOSE SPRAY

00002238796	APO-BECLOMETHASONE	APX	\$	0.0613
00002172712	MYLAN-BECLO AQ.	MYP	\$	0.0613

BUDESONIDE

100 MCG / DOSE NASAL METERED DOSE SPRAY

00002230648	MYLAN-BUDESONIDE AQ	MYP	\$	0.1006
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CIPROFLOXACIN HCL/ DEXAMETHASONE

0.3 % * 0.1 % OTIC SUSPENSION

00002506882	SANDOZ CIPROFLOXACIN/DEXAMETHASONE	SDZ	\$	1.9227
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00002481901	TARO-CIPROFLOXACIN/DEXAMETHASONE	TAR	\$	1.9227
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00002252716	CIPRODEX	NOV	\$	4.0226
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DEXAMETHASONE

0.1 % OPHTHALMIC SUSPENSION

00000042560	MAXIDEX	NOV	\$	1.7180
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0.1 % OPHTHALMIC OINTMENT

00000042579	MAXIDEX	NOV	\$	2.6600
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FLUOROMETHOLONE

0.1 % OPHTHALMIC SUSPENSION

00000432814	SANDOZ FLUOROMETHOLONE	SDZ	\$	1.8774
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FLUOROMETHOLONE ACETATE

0.1 % OPHTHALMIC SUSPENSION

00000756784	FLAREX	NOV	\$	1.9920
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52:00 EYE, EAR, NOSE, AND THROAT (EENT) PREPARATIONS**52:08.08 ANTI-INFLAMMATORY AGENTS
(CORTICOSTEROIDS)****FLUTICASONE FUROATE**

100 MCG / DOSE	INHALATION	METERED INHALATION POWDER			
00002446561	ARNUIITY ELLIPTA		GSK	\$	1.4528
200 MCG / DOSE	INHALATION	METERED INHALATION POWDER			
00002446588	ARNUIITY ELLIPTA		GSK	\$	2.9057

MOMETASONE FUROATE

50 MCG / DOSE	NASAL	METERED DOSE SPRAY			
00002403587	APO-MOMETASONE		APX	\$	0.0752
00002519127	MOMETASONE		SNS	\$	0.0752
00002449811	SANDOZ MOMETASONE		SDZ	\$	0.0752
00002475863	TEVA-MOMETASONE		TEV	\$	0.0752
00002238465	NASONEX		ORC	\$	0.2148

PREDNISOLONE ACETATE

1 %	OPHTHALMIC	SUSPENSION			
00001916203	SANDOZ PREDNISOLONE ACETATE		SDZ	\$	1.9400
00000700401	TEVA-PREDNISOLONE		TEV	\$	1.9400
00000301175	PRED FORTE		ABV	\$	5.2880

52:00 EYE, EAR, NOSE, AND THROAT (EENT) PREPARATIONS**52:08.08.00 ANTI-INFLAMMATORY AGENTS
CORTICOSTEROIDS
(COMBINATION ANTI-INFECTIVE/CORTICOSTEROID AGENTS)****DEXAMETHASONE/ FRAMYCETIN SULFATE/ GRAMICIDIN**

0.5 MG / ML * 5 MG / ML * 0.05 MG / ML	OTIC/OPHTHALMIC	SOLUTION			
00002224623	SOFRACORT		SAV	\$	2.1263

**DEXAMETHASONE/ NEOMYCIN SULFATE/ POLYMYXIN B
SULFATE**

1 MG / ML * 3.5 MG / ML (BASE) * 6,000 UNIT / ML	OPHTHALMIC	SUSPENSION			
00000042676	MAXITROL		NOV	\$	2.3120
1 MG / G * 3.5 MG / G (BASE) * 6,000 UNIT / G	OPHTHALMIC	OINTMENT			
00000358177	MAXITROL		NOV	\$	3.2257

DEXAMETHASONE/ TOBRAMYCIN

0.1 % * 0.3 %	OPHTHALMIC	SUSPENSION			
00000778907	TOBRADEX		NOV	\$	2.1720
0.1 % * 0.3 %	OPHTHALMIC	OINTMENT			
00000778915	TOBRADEX		NOV	\$	3.2057

FLUMETHASONE PIVALATE/ CLIOQUINOL

0.02 % * 1 %	OTIC	SOLUTION			
00000074454	LOCACORTEN VIOFORM		PAL	\$	1.8044

52:00 EYE, EAR, NOSE, AND THROAT (EENT) PREPARATIONS**52:08.20 ANTI-INFLAMMATORY AGENTS
(NONSTEROIDAL ANTI-INFLAMMATORY AGENTS)****DICLOFENAC SODIUM****0.1 % OPHTHALMIC SOLUTION**

00002441020	APO-DICLOFENAC OPHTHALMIC	APX	\$	1.2397
00002475065	DICLOFENAC	PSL	\$	1.2397
00002475197	MINT-DICLOFENAC	MPI	\$	1.2397
00002454807	SANDOZ DICLOFENAC OPHTHA	SDZ	\$	1.2397
00001940414	VOLTAREN OPHTHA	NOV	\$	2.9280

KETOROLAC TROMETHAMINE**0.45 % OPHTHALMIC SOLUTION**

00002369362	ACUVAIL	ABV	\$	0.6533
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0.5 % OPHTHALMIC SOLUTION

00002245821	KETOROLAC	AAP	\$	3.0458
00001968300	ACULAR	ABV	\$	3.6490

52:00 EYE, EAR, NOSE, AND THROAT (EENT) PREPARATIONS**52:16 LOCAL ANESTHETICS****LIDOCAINE HCL****2 % ORAL LIQUID**

00001968823	LIDODAN VISCOUS	ODN	\$	0.2650
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PROPARACAINE HCL**0.5 % OPHTHALMIC SOLUTION**

00000035076	ALCAINE	ALC	\$	0.9790
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52:00 EYE, EAR, NOSE, AND THROAT (EENT) PREPARATIONS**52:24 MYDRIATICS****ATROPINE SULFATE****1 % OPHTHALMIC SOLUTION**

00000035017	ISOPTO ATROPINE	ALC	\$	0.8420
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CYCLOPENTOLATE HCL**1 % OPHTHALMIC SOLUTION**

00000252506	CYCLOGYL	ALC	\$	1.1560
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52:00 EYE, EAR, NOSE, AND THROAT (EENT) PREPARATIONS**52:28 MOUTHWASHES AND GARGLES****BENZYDAMINE HCL****0.15 % ORAL RINSE**

00002463105	ODAN-BENZYDAMINE	ODN	\$	0.0384
00002239537	PMS-BENZYDAMINE	PMS	\$	0.0384

52:00 EYE, EAR, NOSE, AND THROAT (EENT) PREPARATIONS**52:28 MOUTHWASHES AND GARGLES****COMPOUND PRESCRIPTION****ORAL**

00000999209	COMP-D-CHLORHEX. MOUTH RINSE (ANY CONCENTRATION, NOT 0.12%)	XXX	\$	0.0000
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To determine eligibility of a compound, pharmacies can contact Alberta Blue Cross for verification.

In order for a compound to be eligible:

- the compounded prescription must contain in therapeutic dosage; one or more drug(s) identified as allowable Drug Benefits; or one or more chemical entities; and
- the compounded prescription must not duplicate a manufactured drug product, whether the drug product is or is not identified as an allowable Drug Benefit; and
- the compounded prescription must not include a chemical entity or drug product, with the exception of diluents or bases, specifically identified as not an allowable Drug Benefit.

To be used when the compound has been procured from a licensed compound and repackaging pharmacy and dispensed by a licensed community pharmacy.

ORAL

00000999109	COMP-D-CHLORHEX. MOUTH RINSE (ANY CONCENTRATION, NOT .12%)	XXX	\$	0.0000
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To determine eligibility of a compound, pharmacies can contact Alberta Blue Cross for verification.

In order for a compound to be eligible:

- the compounded prescription must contain in therapeutic dosage; one or more drug(s) identified as allowable Drug Benefits; or one or more chemical entities; and
- the compounded prescription must not duplicate a manufactured drug product, whether the drug product is or is not identified as an allowable Drug Benefit; and
- the compounded prescription must not include a chemical entity or drug product, with the exception of diluents or bases, specifically identified as not an allowable Drug Benefit.

To be used when the compound has been prepared and dispensed by a licensed community pharmacy.

52:00 EYE, EAR, NOSE, AND THROAT (EENT) PREPARATIONS**52:32 VASOCONSTRICTORS****PHENYLEPHRINE HCL****2.5 % OPHTHALMIC SOLUTION**

00000465763	MYDFRIN	ALC	\$	1.3920
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52:00 EYE, EAR, NOSE, AND THROAT (EENT) PREPARATIONS

52:40.04 ANTIGLAUCOMA AGENTS
(ALPHA-ADRENERGIC AGONISTS)

BRIMONIDINE TARTRATE

0.2 % OPHTHALMIC SOLUTION

00002515377	BRIMONIDINE TARTRATE	TGT	\$	1.1550
00002449226	JAMP-BRIMONIDINE	JPC	\$	1.1550
00002507811	MED-BRIMONIDINE	GMP	\$	1.1550
00002305429	SANDOZ BRIMONIDINE	SDZ	\$	1.1550
00002236876	ALPHAGAN	ABV	\$	3.6899

52:00 EYE, EAR, NOSE, AND THROAT (EENT) PREPARATIONS

52:40.08 ANTIGLAUCOMA AGENTS
(BETA-ADRENERGIC AGENTS)

BETAXOLOL HCL

0.25 % (BASE) OPHTHALMIC SUSPENSION

00001908448	BETOPTIC S	NOV	\$	2.4520
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TIMOLOL MALEATE

0.25 % (BASE) OPHTHALMIC SOLUTION

00002166712	SANDOZ TIMOLOL MALEATE	SDZ	\$	2.3503
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0.5 % (BASE) OPHTHALMIC SOLUTION

00000755834	APO-TIMOP	APX	\$	1.2140
00002447800	JAMP-TIMOLOL	JPC	\$	1.2140
00002166720	SANDOZ TIMOLOL MALEATE	SDZ	\$	1.2140
00000451207	TIMOPTIC	ELV	\$	4.4533
00002171899	TIMOPTIC-XE	ELV	\$	5.6860

52:00 EYE, EAR, NOSE, AND THROAT (EENT) PREPARATIONS

52:40.12 ANTIGLAUCOMA AGENTS
(CARBONIC ANHYDRASE INHIBITORS)

ACETAZOLAMIDE

250 MG ORAL TABLET

00000545015	ACETAZOLAMIDE	AAP	\$	0.1580
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BRINZOLAMIDE

1 % OPHTHALMIC SUSPENSION

00002238873	AZOPT	NOV	\$	3.5460
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DORZOLAMIDE HCL

2 % (BASE) OPHTHALMIC SOLUTION

00002522373	DORZOLAMIDE	JPC	\$	1.4757
00002453347	JAMP-DORZOLAMIDE	JPC	\$	1.4757
00002457210	MED-DORZOLAMIDE	GMP	\$	1.4757
00002316307	SANDOZ DORZOLAMIDE	SDZ	\$	1.4757
00002216205	TRUSOPT	ELV	\$	4.7238
<input checked="" type="checkbox"/> 00002269090	TRUSOPT (PRESERVATIVE-FREE)	ELV	\$	4.7293

METHAZOLAMIDE

50 MG ORAL TABLET

00002245882	METHAZOLAMIDE	AAP	\$	0.6145
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52:00 EYE, EAR, NOSE, AND THROAT (EENT) PREPARATIONS

52:40.20 ANTIGLAUCOMA AGENTS
(MIOTICS)

PILOCARPINE HCL

2% OPHTHALMIC SOLUTION

00000000868	ISOPTO CARPINE	NOV	\$	0.2960
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52:00 EYE, EAR, NOSE, AND THROAT (EENT) PREPARATIONS

52:40.28 ANTIGLAUCOMA AGENTS
(PROSTAGLANDIN ANALOGS)

BIMATOPROST

OPHTHALMIC SOLUTION

00002429063	VISTITAN 0.03%	SDZ	\$	9.1936
00002324997	LUMIGAN RC 0.01%	ABV	\$	11.8871

LATANOPROST

0.005% OPHTHALMIC SOLUTION

00002296527	APO-LATANOPROST	APX	\$	3.6320
00002373041	GD-LATANOPROST	UJC	\$	3.6320
00002453355	JAMP-LATANOPROST	JPC	\$	3.6320
00002489570	LATANOPROST	TGT	\$	3.6320
00002513285	M-LATANOPROST	MTR	\$	3.6320
00002426935	MED-LATANOPROST	GMP	\$	3.6320
00002341085	RIVA-LATANOPROST	RIV	\$	3.6320
00002367335	SANDOZ LATANOPROST	SDZ	\$	3.6320
00002254786	TEVA-LATANOPROST	TEV	\$	3.6320
00002231493	XALATAN	BGP	\$	13.6642

LATANOPROSTENE BUNOD

0.024% OPHTHALMIC SOLUTION

00002484218	VYZULTA	BSH	\$	5.2500
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TRAVOPROST

0.003% OPHTHALMIC SOLUTION

00002457997	IZBA	NOV	\$	3.9400
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0.004% OPHTHALMIC SOLUTION

00002413167	SANDOZ TRAVOPROST	SDZ	\$	8.6280
00002318008	TRAVATAN Z	NOV	\$	11.6960

52:00 EYE, EAR, NOSE, AND THROAT (EENT) PREPARATIONS

52:40.92 ANTIGLAUCOMA AGENTS
(MISCELLANEOUS ANTIGLAUCOMA AGENTS)

BRIMONIDINE TARTRATE/ TIMOLOL MALEATE

0.2% * 0.5% (BASE) OPHTHALMIC SOLUTION

00002375311	APO-BRIMONIDINE TIMOP	APX	\$	2.3290
00002531704	JAMP BRIMONIDINE/TIMOLOL	JPC	\$	2.3290
00002248347	COMBIGAN	ABV	\$	4.5292

BRINZOLAMIDE/ BRIMONIDINE TARTRATE

1% * 0.2% OPHTHALMIC SUSPENSION

00002435411	SIMBRINZA	VLP	\$	5.0690
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52:00 EYE, EAR, NOSE, AND THROAT (EENT) PREPARATIONS**52:40.92 ANTIGLAUCOMA AGENTS****(MISCELLANEOUS ANTIGLAUCOMA AGENTS)****BRINZOLAMIDE/ TIMOLOL MALEATE**

1 % * 0.5 % (BASE) OPHTHALMIC SUSPENSION

00002331624	AZARGA	NOV	\$	4.0800
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DORZOLAMIDE HCL/ TIMOLOL MALEATE

2 % (BASE) * 0.5 % (BASE) OPHTHALMIC SOLUTION

00002299615	APO-DORZO-TIMOP	APX	\$	1.9887
00002489635	DORZOLAMIDE AND TIMOLOL	TGT	\$	1.9887
00002522020	DORZOLAMIDE-TIMOLOL	JPC	\$	1.9887
00002457539	JAMP DORZOLAMIDE-TIMOLOL	JPC	\$	1.9887
00002537796	M-DORZOLAMIDE-TIMOLOL	MTR	\$	1.9887
00002437686	MED-DORZOLAMIDE-TIMOLOL	GMP	\$	1.9887
00002441659	RIVA-DORZOLAMIDE/TIMOLOL	RIV	\$	1.9887
00002344351	SANDOZ DORZOLAMIDE/ TIMOLOL	SDZ	\$	1.9887
<input checked="" type="checkbox"/> 00002258692	COSOPT PRESERVATIVE-FREE	ELV	\$	2.9008
00002240113	COSOPT	ELV	\$	7.1621

LATANOPROST/ TIMOLOL MALEATE

0.005 % * 0.5 % (BASE) OPHTHALMIC SOLUTION

00002436256	ACT LATANOPROST/TIMOLOL	TEV	\$	4.4268
00002373068	GD-LATANOPROST/TIMOLOL	UJC	\$	4.4268
00002453770	JAMP-LATANOPROST/TIMOLOL	JPC	\$	4.4268
00002514516	M-LATANOPROST-TIMOLOL	MTR	\$	4.4268
00002454505	MED-LATANOPROST-TIMOLOL	GMP	\$	4.4268
00002246619	XALACOM	BGP	\$	15.4664

TRAVOPROST/ TIMOLOL MALEATE

0.004 % * 0.5 % (BASE) OPHTHALMIC SOLUTION

00002415305	APO-TRAVOPROST-TIMOP PQ	APX	\$	8.8425
00002278251	DUOTRAV PQ	NOV	\$	11.3400

52:00 EYE, EAR, NOSE, AND THROAT (EENT) PREPARATIONS**52:56 VASCULAR ENDOTHELIAL GROWTH FACTOR ANTAGONISTS****AFLIBERCEPT**

RESTRICTED BENEFIT

This Drug Product is a benefit to a member of an Alberta Government Sponsored Drug Plan when the Drug Product is prescribed by a registered prescriber and pursuant to the following criteria:

"For the treatment of neovascular (wet) age-related macular degeneration (AMD) if all of the following apply to the eye to be treated:

- The best corrected visual acuity (BCVA) is between 6/12 (20/40) and 6/96 (20/320); and
- There is active disease activity (choroidal neovascularization) and no permanent structural damage to the central fovea; and
- There is evidence of recent (< three (3) months) presumed disease progression (blood vessel growth, as indicated by fluorescein angiography, optical coherence tomography (OCT) or recent visual acuity changes); and
- No concurrent verteporfin PDT treatment; and
- The injection will be administered by a qualified ophthalmologist with experience in intravitreal injections.

Treatment with anti-VEGF agents should be continued only in patients who maintain adequate response to therapy.

The anti-VEGF agent should be discontinued if any of the following occur:

- Reduction in BCVA in the treated eye to less than fifteen (15) letters (absolute) on two (2) consecutive visits in the treated eye, attributed to AMD in the absence of other pathology; or
- Reduction in BCVA of thirty (30) letters or more compared to either baseline and/or best recorded level since baseline as this may indicate either poor treatment effect or adverse event or both; or
- There is evidence of deterioration of the lesion morphology despite optimum treatment over three (3) consecutive visits.

The interval between the doses should be no less than 1 month.

Coverage will not be provided for patients who have failed to respond to a previous anti-VEGF agent."

"For the treatment of diabetic macular edema (DME), in patients with severe visual impairment as defined by:

- Best-Corrected Visual Acuity (using the Early Treatment Diabetic Retinopathy Study visual acuity test) of seventy-eight (78) to twenty-four (24) letters and a central retinal thickness greater than or equal to three hundred (300) micrometres meeting all of the following criteria:
- clinically significant diabetic macular edema for whom laser photocoagulation is also indicated, and
 - a hemoglobin A1c of less than or equal to 12%.

Coverage will not be provided to patients who have failed to respond to a previous anti-VEGF agent."

"For the treatment of visual impairment due to macular edema secondary to central retinal vein occlusion (CRVO) or branch retinal vein occlusion (BRVO).

Aflibercept is administered by intravitreal injection once every month. The interval between doses should not be shorter than one month. The treatment interval may be extended up to 3 months based on visual and anatomic outcomes. Prescribers are advised to periodically assess the need for continued therapy.

52:00 EYE, EAR, NOSE, AND THROAT (EENT) PREPARATIONS**52:56 VASCULAR ENDOTHELIAL GROWTH FACTOR ANTAGONISTS****AFLIBERCEPT**

Clinical trial experience of a monthly dosing regimen of 2 mg aflibercept beyond 6 months in the CRVO and BRVO indications is limited. The dosing regimen of once every 4 weeks changed, at 24 weeks, to a regimen that allowed for extension of the treatment based on visual and anatomic outcomes in the CRVO clinical trials and to once every 8 weeks in the BRVO clinical trial.

Coverage will not be provided for patients who have failed to respond to a previous anti-VEGF agent."

2 MG / VIAL INJECTION

00002415992 EYLEA

BAI

\$ 1418.0000

52:00 EYE, EAR, NOSE, AND THROAT (EENT) PREPARATIONS**52:56 VASCULAR ENDOTHELIAL GROWTH FACTOR ANTAGONISTS****BROLUCIZUMAB**

This Drug Product is a benefit to a member of an Alberta Government Sponsored Drug Plan when the Drug Product is prescribed by a registered prescriber and pursuant to the following criteria:

"For the treatment of neovascular (wet) age-related macular degeneration (AMD) in anti-vascular endothelial growth factor (anti-VEGF) treatment naive patients if all of the following apply to the eye to be treated:

- The best corrected visual acuity (BCVA) is between 6/12 (20/40) and 6/96 (20/320); and
- There is active disease activity (choroidal neovascularization) and no permanent structural damage to the central fovea; and
- There is evidence of recent (< three (3) months) presumed disease progression (blood vessel growth, as indicated by fluorescein angiography, optical coherence tomography (OCT) or recent visual acuity changes); and
- No concurrent verteporfin PDT treatment; and
- The injection will be administered by a qualified ophthalmologist with experience in intravitreal injections.

Treatment with anti-VEGF agents should be continued only in patients who maintain adequate response to therapy.

The anti-VEGF agent should be discontinued if any of the following occur:

- Reduction in BCVA in the treated eye to less than fifteen (15) letters (absolute) on two (2) consecutive visits in the treated eye, attributed to AMD in the absence of other pathology; or
- Reduction in BCVA of thirty (30) letters or more compared to either baseline and/or best recorded level since baseline as this may indicate either poor treatment effect or adverse event or both; or
- There is evidence of deterioration of the lesion morphology despite optimum treatment over three (3) consecutive visits.

The interval between the maintenance doses should be no less than 8 weeks after the first three monthly doses.

Coverage will not be provided for patients who have failed to respond to a previous anti-VEGF agent."

"For the treatment of diabetic macular edema (DME), in patients with severe visual impairment as defined by:

Best-Corrected Visual Acuity (using the Early Treatment Diabetic Retinopathy Study visual acuity test) of seventy-eight (78) to twenty-four (24) letters and a central retinal thickness greater than or equal to three hundred (300) micrometres meeting all of the following criteria:

- clinically significant diabetic macular edema for whom laser photocoagulation is also indicated, and
- a hemoglobin A1c of less than or equal to 10%.

Coverage will not be provided for patients who have failed to respond to a previous anti-VEGF agent."

6 MG / SYR INJECTION SYRINGE

00002496976 BEOVU

NOV

\$ 1390.0000

52:00 EYE, EAR, NOSE, AND THROAT (EENT) PREPARATIONS**52:56 VASCULAR ENDOTHELIAL GROWTH FACTOR ANTAGONISTS****RANIBIZUMAB**

This Drug Product is a benefit to a member of an Alberta Government Sponsored Drug Plan when the Drug Product is prescribed by a registered prescriber and pursuant to the following criteria:

"For the treatment of visual impairment due to macular edema secondary to retinal vein occlusion (RVO).

Treatment to be given monthly and continued until maximum visual acuity is achieved, confirmed by stable visual acuity for three consecutive monthly assessments performed while on ranibizumab treatment. Thereafter patients should be monitored monthly for visual acuity.

Treatment is resumed with monthly injections when monitoring indicates a loss of visual acuity due to macular edema secondary to RVO and continued until stable visual acuity is reached again for three consecutive monthly assessments."

Coverage will not be provided for patients who have failed to respond to a previous anti-VEGF agent.

"For the treatment of diabetic macular edema (DME), in patients with severe visual impairment as defined by:

Best-Corrected Visual Acuity (using the Early Treatment Diabetic Retinopathy Study visual acuity test) of seventy-eight (78) to twenty-four (24) letters and a central retinal thickness greater than or equal to three hundred (300) micrometres meeting all of the following criteria:

- clinically significant diabetic macular edema for whom laser photocoagulation is also indicated, and
- a hemoglobin A1c of less than or equal to 11%."

Coverage will not be provided for patients who have failed to respond to a previous anti-VEGF agent.

"For the treatment of neovascular (wet) age-related macular degeneration (AMD) in anti-vascular endothelial growth factor (anti-VEGF) treatment naive patients if all of the following apply to the eye to be treated:

- The best corrected visual acuity (BCVA) is between 6/12 (20/40) and 6/96 (20/320); and
- There is active disease activity (choroidal neovascularization) and no permanent structural damage to the central fovea; and
- There is evidence of recent (< three (3) months) presumed disease progression (blood vessel growth, as indicated by fluorescein angiography, optical coherence tomography (OCT) or recent visual acuity changes); and
- No concurrent verteporfin PDT treatment; and
- The injection will be administered by a qualified ophthalmologist with experience in intravitreal injections.

Treatment with anti-VEGF agents should be continued only in patients who maintain adequate response to therapy.

The anti-VEGF agent should be discontinued if any of the following occur:

- Reduction in BCVA in the treated eye to less than fifteen (15) letters (absolute) on two (2) consecutive visits in the treated eye, attributed to AMD in the absence of other pathology; or
- Reduction in BCVA of thirty (30) letters or more compared to either baseline and/or best recorded level since baseline as this may indicate either poor treatment effect or adverse event or both; or
- There is evidence of deterioration of the lesion morphology despite optimum treatment over three (3) consecutive visits."

52:00 EYE, EAR, NOSE, AND THROAT (EENT) PREPARATIONS**52:56 VASCULAR ENDOTHELIAL GROWTH FACTOR ANTAGONISTS****RANIBIZUMAB**

The interval between the doses should be no less than 1 month.

Coverage will not be provided for patients who have failed to respond to a previous anti-VEGF agent.

2.3 MG / VIAL INJECTION

00002296810 LUCENTIS

NOV

\$ 1679.5900

For this product - pricing has been established on a per vial basis.

52:00 EYE, EAR, NOSE, AND THROAT (EENT) PREPARATIONS**52:92 MISCELLANEOUS EENT DRUGS****APRACLONIDINE HCL****0.5 % OPHTHALMIC SOLUTION**

00002076306 IOPIDINE

ESS

\$ 5.3700

56:00

Gastrointestinal Drugs

56:00 GASTROINTESTINAL DRUGS

56:08 ANTIDIARRHEA AGENTS

DIPHENOXYLATE HCL/ ATROPINE SULFATE

2.5 MG * 0.025 MG ORAL TABLET

00000036323	LOMOTIL	PFI	\$	0.5583
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56:00 GASTROINTESTINAL DRUGS

56:14 CHOLELITHOLYTIC AGENTS

URSODIOL

250 MG ORAL TABLET

00002505363	AG-URSODIOL	AGP	\$	0.3818
00002426900	GLN-URSODIOL	GLM	\$	0.3818
00002472392	JAMP-URSODIOL	JPC	\$	0.3818
00002273497	PMS-URSODIOL C	PMS	\$	0.3818
00002515520	URSODIOL C	SNS	\$	0.3818

500 MG ORAL TABLET

00002505371	AG-URSODIOL	AGP	\$	0.7242
00002426919	GLN-URSODIOL	GLM	\$	0.7242
00002472406	JAMP-URSODIOL	JPC	\$	0.7242
00002273500	PMS-URSODIOL C	PMS	\$	0.7242
00002515539	URSODIOL C	SNS	\$	0.7242

56:00 GASTROINTESTINAL DRUGS

56:16 DIGESTANTS

LIPASE/ AMYLASE/ PROTEASE

10,440 UNIT * 56,400 UNIT * 57,100 UNIT ORAL TABLET

00002230019	VIOKACE	NSA	\$	0.2821
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20,880 UNIT * 113,400 UNIT * 112,500 UNIT ORAL TABLET

00002241933	VIOKACE	NSA	\$	0.4327
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8,000 UNIT * 30,000 UNIT * 30,000 UNIT ORAL CAPSULE

00000263818	COTAZYM	ORC	\$	0.2209
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2,600 UNIT * 10,850 UNIT * 6,200 UNIT ORAL CAPSULE (ENTERIC-COATED PELLETT)

00002503433	PANCREASE MT 2	VPL	\$	0.3869
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4,000 UNIT * 12,000 UNIT * 12,000 UNIT ORAL CAPSULE (ENTERIC-COATED PELLETT)

00000789445	PANCREASE MT 4	VPL	\$	0.6250
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8,000 UNIT * 30,000 UNIT * 30,000 UNIT ORAL CAPSULE (ENTERIC-COATED PELLETT)

00000502790	COTAZYM ECS 8	ORC	\$	0.3988
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10,000 UNIT * 30,000 UNIT * 30,000 UNIT ORAL CAPSULE (ENTERIC-COATED PELLETT)

00000789437	PANCREASE MT 10	VPL	\$	1.5625
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10,000 UNIT * 33,200 UNIT * 37,500 UNIT ORAL CAPSULE (ENTERIC-COATED PELLETT)

00002200104	CREON 10 MINIMICROSPHERES	BGP	\$	0.2891
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16,000 UNIT * 48,000 UNIT * 48,000 UNIT ORAL CAPSULE (ENTERIC-COATED PELLETT)

00000789429	PANCREASE MT 16	VPL	\$	2.4997
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20,000 UNIT * 55,000 UNIT * 55,000 UNIT ORAL CAPSULE (ENTERIC-COATED PELLETT)

00000821373	COTAZYM ECS 20	ORC	\$	1.0453
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25,000 UNIT * 74,000 UNIT * 62,500 UNIT ORAL CAPSULE (ENTERIC-COATED PELLETT)

00001985205	CREON 25 MINIMICROSPHERES	BGP	\$	0.9031
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35,000 UNIT * 35,700 UNIT * 2,240 UNIT ORAL CAPSULE (ENTERIC-COATED PELLETT)

00002494639	CREON 35 MINIMICROSPHERES	BGP	\$	0.9531
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56:00 GASTROINTESTINAL DRUGS56:22.08 ANTIEMETICS
(ANTI-HISTAMINES)**DIMENHYDRINATE****10 MG / ML INJECTION**

00000392731 DIMENHYDRINATE I.V. SDZ \$ 1.1916

50 MG / ML INJECTION

00000392537 DIMENHYDRINATE I.M. SDZ \$ 1.4490

PROCHLORPERAZINE**5 MG ORAL TABLET**

00000886440 PROCHLORAZINE AAP \$ 0.2094

10 MG ORAL TABLET

00000886432 PROCHLORAZINE AAP \$ 0.2556

10 MG RECTAL SUPPOSITORY

00000789720 ODAN-PROCHLORPERAZINE ODN \$ 3.1000

56:00 GASTROINTESTINAL DRUGS56:22.20 ANTIEMETICS
(5-HT3 RECEPTOR ANTAGONISTS)**GRANISETRON HCL****1 MG (BASE) ORAL TABLET**

00002308894 APO-GRANISETRON APX \$ 4.5000

00002452359 NAT-GRANISETRON NTP \$ 4.5000

ONDANSETRON**4 MG ORAL DISINTEGRATING TABLET/FILM**

00002535319 ACCEL-ONDANSETRON ODT ACP \$ 2.5450

00002511282 AURO-ONDANSETRON ODT AUR \$ 3.2720

00002514966 MAR-ONDANSETRON ODT MAR \$ 3.2720

00002487330 MINT-ONDANSETRON ODT MPI \$ 3.2720

00002481723 ONDANSETRON ODT SDZ \$ 3.2720

00002519232 ONDANSETRON ODT JPC \$ 3.2720

00002524279 ONDANSETRON ODT SNS \$ 3.2720

00002389983 ONDISSOLVE ODF TAK \$ 3.2720

00002519445 PMS-ONDANSETRON ODT PMS \$ 3.2720

00002239372 ZOFTRAN ODT SDZ \$ 14.7040

8 MG ORAL DISINTEGRATING TABLET/FILM

00002535327 ACCEL-ONDANSETRON ODT ACP \$ 3.8840

00002511290 AURO-ONDANSETRON ODT AUR \$ 4.9930

00002514974 MAR-ONDANSETRON ODT MAR \$ 4.9930

00002487349 MINT-ONDANSETRON ODT MPI \$ 4.9930

00002481731 ONDANSETRON ODT SDZ \$ 4.9930

00002519240 ONDANSETRON ODT JPC \$ 4.9930

00002524287 ONDANSETRON ODT SNS \$ 4.9930

00002389991 ONDISSOLVE ODF TAK \$ 4.9930

00002519453 PMS-ONDANSETRON ODT PMS \$ 4.9930

00002239373 ZOFTRAN ODT SDZ \$ 22.4370

56:00 GASTROINTESTINAL DRUGS
**56:22.20 ANTIEMETICS
(5-HT3 RECEPTOR ANTAGONISTS)**
ONDANSETRON HCL DIHYDRATE**4 MG (BASE) ORAL TABLET**

00002478927	ACCEL-ONDANSETRON	ACP	\$ 2.5450
00002458810	CCP-ONDANSETRON	CEL	\$ 2.6790
00002288184	APO-ONDANSETRON	APX	\$ 3.2720
00002313685	JAMP-ONDANSETRON	JPC	\$ 3.2720
00002371731	MAR-ONDANSETRON	MAR	\$ 3.2720
00002305259	MINT-ONDANSETRON	MPI	\$ 3.2720
00002297868	MYLAN-ONDANSETRON	MYP	\$ 3.2720
00002417839	NAT-ONDANSETRON	NTP	\$ 3.2720
00002421402	ONDANSETRON	SNS	\$ 3.2720
00002258188	PMS-ONDANSETRON	PMS	\$ 3.2720
00002274310	SANDOZ ONDANSETRON	SDZ	\$ 3.2720
00002296349	TEVA-ONDANSETRON	TEV	\$ 3.2720

8 MG (BASE) ORAL TABLET

00002478935	ACCEL-ONDANSETRON	ACP	\$ 3.8840
00002458802	CCP-ONDANSETRON	CEL	\$ 4.0880
00002288192	APO-ONDANSETRON	APX	\$ 4.9930
00002313693	JAMP-ONDANSETRON	JPC	\$ 4.9930
00002371758	MAR-ONDANSETRON	MAR	\$ 4.9930
00002305267	MINT-ONDANSETRON	MPI	\$ 4.9930
00002297876	MYLAN-ONDANSETRON	MYP	\$ 4.9930
00002417847	NAT-ONDANSETRON	NTP	\$ 4.9930
00002421410	ONDANSETRON	SNS	\$ 4.9930
00002258196	PMS-ONDANSETRON	PMS	\$ 4.9930
00002274329	SANDOZ ONDANSETRON	SDZ	\$ 4.9930
00002296357	TEVA-ONDANSETRON	TEV	\$ 4.9930

0.8 MG / ML (BASE) ORAL SOLUTION

00002291967	APO-ONDANSETRON	APX	\$ 1.1360
00002490617	JAMP ONDANSETRON	JPC	\$ 1.1360

2 MG / ML (BASE) INJECTION

00002279428	ONDANSETRON (UNPRESERVED)	SDZ	\$ 3.4552
00002464578	ONDANSETRON USP (UNPRESERVED)	STM	\$ 3.4552

2 MG / ML (BASE) INJECTION

00002279436	ONDANSETRON (PRESERVED)	SDZ	\$ 3.4552
00002462257	ONDANSETRON (PRESERVED)	STM	\$ 3.4552
00002274418	ONDANSETRON HYDROCHLORIDE DIHYDRATE (PRESERVED)	SDZ	\$ 3.4552

56:00 GASTROINTESTINAL DRUGS
**56:22.92 ANTIEMETICS
(MISCELLANEOUS ANTIEMETICS)**
APREPITANT

RESTRICTED BENEFIT - This drug product must be prescribed by the Directors of Alberta Health Services - Cancer Care "Cancer Centres" (or their designates).

80 MG ORAL CAPSULE

00002298791	EMEND	MFC	\$ 35.6613
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56:00 GASTROINTESTINAL DRUGS
**56:22.92 ANTIEMETICS
(MISCELLANEOUS ANTIEMETICS)**
APREPITANT/ APREPITANT

RESTRICTED BENEFIT - This drug product must be prescribed by the Directors of Alberta Health Services - Cancer Care "Cancer Centres" (or their designates).

80 MG * 125 MG ORAL CAPSULE

00002298813	EMEND TRI-PACK	MFC	\$	35.6613
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DOXYLAMINE SUCCINATE/ PYRIDOXINE HCL

10 MG * 10 MG ORAL SUSTAINED-RELEASE TABLET

00002413248	APO-DOXYLAMINE/B6	APX	\$	0.6402
00002406187	PMS-DOXYLAMINE-PYRIDOXINE	PMS	\$	0.6402
00000609129	DICLECTIN	DUI	\$	1.2803

NABILONE

0.5 MG ORAL CAPSULE

00002380900	PMS-NABILONE	PMS	\$	1.8886
00002384884	TEVA-NABILONE	TEV	\$	1.8886
00002256193	CESAMET	VCL	\$	3.8043

1 MG ORAL CAPSULE

00002380919	PMS-NABILONE	PMS	\$	3.6669
00002384892	TEVA-NABILONE	TEV	\$	3.6669
00000548375	CESAMET	VCL	\$	7.6082

56:00 GASTROINTESTINAL DRUGS
**56:28.12 ANTIULCER AGENTS AND ACID SUPPRESSANTS
(HISTAMINE H2-ANTAGONISTS)**
CIMETIDINE

200 MG ORAL TABLET

00000584215	CIMETIDINE	AAP	\$	0.3929
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300 MG ORAL TABLET

00000487872	CIMETIDINE	AAP	\$	0.3543
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FAMOTIDINE

20 MG ORAL TABLET

00002022133	TEVA-FAMOTIDINE	TEV	\$	0.2657
00002507749	JAMP FAMOTIDINE	JPC	\$	0.2830

40 MG ORAL TABLET

00002022141	TEVA-FAMOTIDINE	TEV	\$	0.4833
00002507757	JAMP FAMOTIDINE	JPC	\$	0.5228

NIZATIDINE

150 MG ORAL CAPSULE

00000778338	AXID	PPH	\$	1.3470
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56:00 GASTROINTESTINAL DRUGS

56:28.12 ANTIULCER AGENTS AND ACID SUPPRESSANTS
(HISTAMINE H2-ANTAGONISTS)

RANITIDINE HCL

150 MG (BASE) ORAL TABLET

00000733059	APO-RANITIDINE	APX	\$	0.1197
00002463717	JAMP-RANITIDINE	JPC	\$	0.1197
00002443708	MAR-RANITIDINE	MAR	\$	0.1197
00002526379	MINT-RANITIDINE	MPI	\$	0.1197
00002242453	PMS-RANITIDINE	PMS	\$	0.1197
00002353016	RANITIDINE	SNS	\$	0.1197

300 MG (BASE) ORAL TABLET

00000733067	APO-RANITIDINE	APX	\$	0.2253
00002463725	JAMP-RANITIDINE	JPC	\$	0.2253
00002443716	MAR-RANITIDINE	MAR	\$	0.2253
00002526387	MINT-RANITIDINE	MPI	\$	0.2253
00002242454	PMS-RANITIDINE	PMS	\$	0.2253

15 MG / ML (BASE) ORAL SOLUTION

00002280833	APO-RANITIDINE	APX	\$	0.1480
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56:00 GASTROINTESTINAL DRUGS

56:28.28 ANTIULCER AGENTS AND ACID SUPPRESSANTS
(PROSTAGLANDINS)

MISOPROSTOL

100 MCG ORAL TABLET

00002244022	MISOPROSTOL	AAP	\$	0.3296
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200 MCG ORAL TABLET

00002244023	MISOPROSTOL	AAP	\$	0.5489
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56:00 GASTROINTESTINAL DRUGS

56:28.32 ANTIULCER AGENTS AND ACID SUPPRESSANTS
(PROTECTANTS)

SUCRALFATE

1 G ORAL TABLET

00002125250	APO-SUCRALFATE	APX	\$	0.3089
00002045702	TEVA-SUCRALFATE	TEV	\$	0.3089
00002100622	SULCRATE	AXC	\$	0.6695

200 MG / ML ORAL SUSPENSION

00002103567	SULCRATE SUSPENSION PLUS	AXC	\$	0.1203
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56:00 GASTROINTESTINAL DRUGS**56:28.36 ANTIULCER AGENTS AND ACID SUPPRESSANTS
(PROTON-PUMP INHIBITORS)****LANSOPRAZOLE****15 MG ORAL DELAYED-RELEASE CAPSULE**

00002293811	APO-LANSOPRAZOLE	APX	\$ 0.0669	\$	0.5000
00002357682	LANSOPRAZOLE	SNS	\$ 0.0669	\$	0.5000
00002385767	LANSOPRAZOLE	SIV	\$ 0.0669	\$	0.5000
00002433001	LANSOPRAZOLE	PMS	\$ 0.0669	\$	0.5000
00002353830	MYLAN-LANSOPRAZOLE	MYP	\$ 0.0669	\$	0.5000
00002385643	SANDOZ LANSOPRAZOLE	SDZ	\$ 0.0669	\$	0.5000
00002402610	TARO-LANSOPRAZOLE	SPG	\$ 0.0669	\$	0.5000
00002280515	TEVA-LANSOPRAZOLE	TEV	\$ 0.0669	\$	0.5000
00002165503	PREVACID	BGP	\$ 0.0669	\$	2.3425

MAC pricing will be applied based on the LCA Price for rabeprazole sodium 1 x 10 mg enteric-coated tablet.

30 MG ORAL DELAYED-RELEASE CAPSULE

00002293838	APO-LANSOPRAZOLE	APX	\$ 0.1875	\$	0.5000
00002357690	LANSOPRAZOLE	SNS	\$ 0.1875	\$	0.5000
00002410389	LANSOPRAZOLE	SIV	\$ 0.1875	\$	0.5000
00002433028	LANSOPRAZOLE	PMS	\$ 0.1875	\$	0.5000
00002353849	MYLAN-LANSOPRAZOLE	MYP	\$ 0.1875	\$	0.5000
00002385651	SANDOZ LANSOPRAZOLE	SDZ	\$ 0.1875	\$	0.5000
00002402629	TARO-LANSOPRAZOLE	SPG	\$ 0.1875	\$	0.5000
00002280523	TEVA-LANSOPRAZOLE	TEV	\$ 0.1875	\$	0.5000
00002165511	PREVACID	BGP	\$ 0.1875	\$	2.3425

MAC pricing will be applied based on the LCA Price for pantoprazole magnesium 1 x 40 mg enteric-coated tablet.

**LANSOPRAZOLE/ AMOXICILLIN TRIHYDRATE/
CLARITHROMYCIN****30 MG * 500 MG (BASE) * 500 MG ORAL TABLET/CAPSULE**

00002470780	AA-LANSOPRAZOLE-AMOXICILLIN- CLARITHROMYCIN	AAP		\$	67.9100
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OMEPRAZOLE**20 MG ORAL DELAYED-RELEASE TABLET**

00002242462	LOSEC MUPS	CAG	\$ 0.1875	\$	2.5764
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10 MG ORAL CAPSULE/SUSTAINED-RELEASE TABLET

00002295407	TEVA-OMEPRAZOLE (DELAYED-RELEASE TABLET)	TEV	\$ 0.0669	\$	0.9470
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MAC pricing will be applied based on the LCA Price for rabeprazole sodium 1 X 10 mg enteric-coated tablet.

56:00 GASTROINTESTINAL DRUGS**56:28.36 ANTIULCER AGENTS AND ACID SUPPRESSANTS
(PROTON-PUMP INHIBITORS)****OMEPRAZOLE****20 MG ORAL CAPSULE/SUSTAINED-RELEASE TABLET**

00002245058	APO-OMEPRAZOLE (DELAYED-RELEASE CAPSULE)	APX	\$ 0.1875	\$	0.2287
00002420198	JAMP-OMEPRAZOLE DR (DELAYED-RELEASE TABLET)	JPC	\$ 0.1875	\$	0.2287
00002439549	NAT-OMEPRAZOLE DR (DELAYED-RELEASE TABLET)	NTP	\$ 0.1875	\$	0.2287
00002348691	OMEPRAZOLE (DELAYED-RELEASE CAPSULE)	SNS	\$ 0.1875	\$	0.2287
00002416549	OMEPRAZOLE (DELAYED-RELEASE TABLET)	AHI	\$ 0.1875	\$	0.2287
00002504294	OMEPRAZOLE MAGNESIUM (SUSTAINED-RELEASE TABLET)	SNS	\$ 0.1875	\$	0.2287
00002411857	OMEPRAZOLE-20 (DELAYED-RELEASE CAPSULE)	SIV	\$ 0.1875	\$	0.2287
00002320851	PMS-OMEPRAZOLE (SUSTAINED-RELEASE CAP)	PMS	\$ 0.1875	\$	0.2287
00002296446	SANDOZ OMEPRAZOLE (SUSTAINED-RELEASE CAP)	SDZ	\$ 0.1875	\$	0.2287
00002295415	TEVA-OMEPRAZOLE (DELAYED-RELEASE TABLET)	TEV	\$ 0.1875	\$	0.2287
00000846503	LOSEC (SUSTAINED-RELEASE CAPSULE)	CAG	\$ 0.1875	\$	1.2350

MAC pricing will be applied based on the LCA Price for pantoprazole magnesium 1 X 40 mg enteric-coated tablet.

PANTOPRAZOLE MAGNESIUM**40 MG ORAL ENTERIC-COATED TABLET**

00002408570	MYLAN-PANTOPRAZOLE T	MYP	\$	0.1875
00002441853	PANTOPRAZOLE MAGNESIUM	ALH	\$	0.1875
00002466147	PANTOPRAZOLE T	SNS	\$	0.1875
00002519534	PANTOPRAZOLE T	SIV	\$	0.1875
00002440628	TEVA-PANTOPRAZOLE MAGNESIUM	TEV	\$	0.1875
00002267233	TECTA	TAK	\$	0.8170

56:00 GASTROINTESTINAL DRUGS**56:28.36 ANTIULCER AGENTS AND ACID SUPPRESSANTS
(PROTON-PUMP INHIBITORS)****PANTOPRAZOLE SODIUM****40 MG ORAL ENTERIC-COATED TABLET**

00002481588	AG-PANTOPRAZOLE SODIUM	AGP	\$ 0.1875	\$	0.2016
00002292920	APO-PANTOPRAZOLE	APX	\$ 0.1875	\$	0.2016
00002415208	AURO-PANTOPRAZOLE	AUR	\$ 0.1875	\$	0.2016
00002392623	JAMP PANTOPRAZOLE SODIUM	JPC	\$ 0.1875	\$	0.2016
00002357054	JAMP-PANTOPRAZOLE	JPC	\$ 0.1875	\$	0.2016
00002467372	M-PANTOPRAZOLE	MTR	\$ 0.1875	\$	0.2016
00002416565	MAR-PANTOPRAZOLE	MAR	\$ 0.1875	\$	0.2016
00002417448	MINT-PANTOPRAZOLE	MPI	\$ 0.1875	\$	0.2016
00002471825	NRA-PANTOPRAZOLE	NRA	\$ 0.1875	\$	0.2016
00002370808	PANTOPRAZOLE	SNS	\$ 0.1875	\$	0.2016
00002428180	PANTOPRAZOLE-40	SIV	\$ 0.1875	\$	0.2016
00002307871	PMS-PANTOPRAZOLE	PMS	\$ 0.1875	\$	0.2016
00002305046	RAN-PANTOPRAZOLE	RAN	\$ 0.1875	\$	0.2016
00002301083	SANDOZ PANTOPRAZOLE	SDZ	\$ 0.1875	\$	0.2016
00002285487	TEVA-PANTOPRAZOLE	TEV	\$ 0.1875	\$	0.2016
00002229453	PANTOLOC	TAK	\$ 0.1875	\$	2.0803

MAC pricing will be applied based on the LCA Price for pantoprazole magnesium 1 x 40 mg enteric-coated tablet.

RABEPRAZOLE SODIUM**10 MG ORAL ENTERIC-COATED TABLET**

00002415283	JAMP RABEPRAZOLE (DELAYED RELEASE)	JPC	\$	0.0669
00002385449	RABEPRAZOLE	SIV	\$	0.0669
00002356511	RABEPRAZOLE EC	SNS	\$	0.0669
00002298074	RAN-RABEPRAZOLE	RAN	\$	0.0669
00002314177	SANDOZ RABEPRAZOLE	SDZ	\$	0.0669
00002243796	PARIET	JAI	\$	1.0890

20 MG ORAL ENTERIC-COATED TABLET

00002415291	JAMP RABEPRAZOLE	JPC	\$	0.1338
00002310813	PMS-RABEPRAZOLE EC	PMS	\$	0.1338
00002385457	RABEPRAZOLE	SIV	\$	0.1338
00002356538	RABEPRAZOLE EC	SNS	\$	0.1338
00002298082	RAN-RABEPRAZOLE	RAN	\$	0.1338
00002314185	SANDOZ RABEPRAZOLE	SDZ	\$	0.1338
00002243797	PARIET	JAI	\$	2.1788

56:00 GASTROINTESTINAL DRUGS**56:32 PROKINETIC AGENTS****DOMPERIDONE MALEATE****10 MG (BASE) ORAL TABLET**

00002103613	APO-DOMPERIDONE	APX	\$	0.0428
00002238341	DOMPERIDONE	SIV	\$	0.0428
00002350440	DOMPERIDONE	SNS	\$	0.0428
00002369206	JAMP-DOMPERIDONE	JPC	\$	0.0428
00002403870	MAR-DOMPERIDONE	MAR	\$	0.0428
00002462834	PRZ-DOMPERIDONE	PCI	\$	0.0428
00002268078	RAN-DOMPERIDONE	RAN	\$	0.0428
00001912070	TEVA-DOMPERIDONE	TEV	\$	0.0428

56:00 GASTROINTESTINAL DRUGS**56:32 PROKINETIC AGENTS****METOCLOPRAMIDE HCL****5 MG ORAL TABLET**

00002517795	MAR-METOCLOPRAMIDE	MAR	\$	0.0514
00002230431	PMS-METOCLOPRAMIDE	PMS	\$	0.0514

1 MG / ML ORAL LIQUID

00002230433	PMS-METOCLOPRAMIDE	PMS	\$	0.0656
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5 MG / ML INJECTION

00002185431	METOCLOPRAMIDE HYDROCHLORIDE	SDZ	\$	3.3925
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56:00 GASTROINTESTINAL DRUGS**56:36 ANTI-INFLAMMATORY AGENTS****MESALAZINE****1.2 G ORAL DELAYED AND EXTENDED-RELEASE TABLET**

00002297558	MEZAVANT	TAK	\$	1.8445
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500 MG ORAL EXTENDED-RELEASE TABLET

00002099683	PENTASA	FEI	\$	0.6788
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1 G ORAL EXTENDED-RELEASE TABLET

00002399466	PENTASA	FEI	\$	1.3556
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500 MG ORAL DELAYED-RELEASE TABLET

00002524481	MEZERA	AVP	\$	0.6378
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400 MG ORAL ENTERIC-COATED TABLET

00002171929	NOVO-5 ASA	TEV	\$	0.4996
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500 MG ORAL ENTERIC-COATED TABLET

00002112787	SALOFALK	ABV	\$	0.6234
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500 MG RECTAL SUPPOSITORY

00002112760	SALOFALK	ABV	\$	1.4293
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1 G RECTAL SUPPOSITORY

<input checked="" type="checkbox"/> 00002474018	MEZERA	AVP	\$	1.8000
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<input checked="" type="checkbox"/> 00002153564	PENTASA	FEI	\$	2.0055
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<input checked="" type="checkbox"/> 00002242146	SALOFALK	ABV	\$	2.0922
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1 G / ENM RECTAL ENEMA

00002153521	PENTASA (1G/100ML)	FEI	\$	4.6377
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2 G / ENM RECTAL ENEMA

00002112795	SALOFALK (2G/60G)	ABV	\$	4.5749
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4 G / ENM RECTAL ENEMA

<input checked="" type="checkbox"/> 00002153556	PENTASA (4G/100 ML)	FEI	\$	5.5895
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<input checked="" type="checkbox"/> 00002112809	SALOFALK (4G/60G)	ABV	\$	7.7698
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OLSALAZINE SODIUM**250 MG ORAL CAPSULE**

00002063808	DIPENTUM	ATH	\$	0.6091
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56:00 GASTROINTESTINAL DRUGS**56:92 MISCELLANEOUS GI DRUGS****PINAVERIUM BROMIDE****50 MG ORAL TABLET**

00002469677 PINAVERIUM

AAP

\$ 0.3066

00001950592 DICETEL

BGP

\$ 0.4138

100 MG ORAL TABLET

00002469685 PINAVERIUM

AAP

\$ 0.5346

00002230684 DICETEL

BGP

\$ 0.7215

TRIMEBUTINE MALEATE**100 MG ORAL TABLET**

00002245663 TRIMEBUTINE

AAP

\$ 0.3265

200 MG ORAL TABLET

00002245664 TRIMEBUTINE

AAP

\$ 0.7143

60:00

Gold Compounds

60:00 GOLD COMPOUNDS

60:00

AURANOFIN

3 MG ORAL CAPSULE

00001916823 RIDAURA

XPI

\$ 6.7790

64:00

Heavy Metal Antagonists

64:00 HEAVY METAL ANTAGONISTS

64:00

DEFEROXAMINE MESYLATE

500 MG / VIAL INJECTION

00002241600	DEFEROXAMINE MESYLATE	PFI	\$	15.1690
00001981242	DEFERAL	NOV	\$	16.8420

2 G / VIAL INJECTION

00002247022	DEFEROXAMINE MESYLATE	PFI	\$	60.6800
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PENICILLAMINE

250 MG ORAL CAPSULE

00000016055	CUPRIMINE	VCL	\$	4.1227
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68:00

Hormones and
Synthetic Substitutes

68:00 HORMONES AND SYNTHETIC SUBSTITUTES

68:00

COMPOUND PRESCRIPTION

00000999111	COMPOUND HORMONES (ESTROGEN PROGEST TESTOSTERONE)	XXX	\$	0.0000
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To determine eligibility of a compound, pharmacies can contact Alberta Blue Cross for verification.

In order for a compound to be eligible:

- the compounded prescription must contain in therapeutic dosage; one or more drug(s) identified as allowable Drug Benefits; or one or more chemical entities; and
- the compounded prescription must not duplicate a manufactured drug product, whether the drug product is or is not identified as an allowable Drug Benefit; and
- the compounded prescription must not include a chemical entity or drug product, with the exception of diluents or bases, specifically identified as not an allowable Drug Benefit.

To be used when the compound has been prepared and dispensed by a licensed community pharmacy.

00000999212	COMPOUND HORMONES (ESTROGEN PROGEST TESTOSTERONE)	XXX	\$	0.0000
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To determine eligibility of a compound, pharmacies can contact Alberta Blue Cross for verification.

In order for a compound to be eligible:

- the compounded prescription must contain in therapeutic dosage; one or more drug(s) identified as allowable Drug Benefits; or one or more chemical entities; and
- the compounded prescription must not duplicate a manufactured drug product, whether the drug product is or is not identified as an allowable Drug Benefit; and
- the compounded prescription must not include a chemical entity or drug product, with the exception of diluents or bases, specifically identified as not an allowable Drug Benefit.

To be used when the compound has been procured from a licensed compound and repackaging pharmacy and dispensed by a licensed community pharmacy.

68:00 HORMONES AND SYNTHETIC SUBSTITUTES**68:04 ADRENALS****BECLOMETHASONE DIPROPIONATE**

50 MCG / DOSE	INHALATION	METERED DOSE AEROSOL			
00002242029	QVAR	CFC-FREE	VCL	\$	0.1823
100 MCG / DOSE	INHALATION	METERED DOSE AEROSOL			
00002242030	QVAR	CFC-FREE	VCL	\$	0.3519

BETAMETHASONE SODIUM PHOSPHATE/ BETAMETHASONE ACETATE

3 MG / ML (BASE) * 3 MG / ML	INJECTION				
00000028096	CELESTONE	SOLUSPAN	ORC	\$	13.9567

BUDESONIDE

100 MCG / DOSE	INHALATION	METERED INHALATION POWDER			
00000852074	PULMICORT	TURBUHALER	AZC	\$	0.1785
200 MCG / DOSE	INHALATION	METERED INHALATION POWDER			
00000851752	PULMICORT	TURBUHALER	AZC	\$	0.3649
400 MCG / DOSE	INHALATION	METERED INHALATION POWDER			
00000851760	PULMICORT	TURBUHALER	AZC	\$	0.5327
0.125 MG / ML	INHALATION	SUSPENSION			
00002494264	TARO-BUDESONIDE		TAR	\$	0.1143
00002465949	TEVA-BUDESONIDE		TEV	\$	0.1143
00002229099	PULMICORT	NEBUAMP	AZC	\$	0.2590
0.25 MG / ML	INHALATION	SUSPENSION			
00002494272	TARO-BUDESONIDE		TAR	\$	0.3593
00001978918	PULMICORT	NEBUAMP	AZC	\$	0.5182
0.5 MG / ML	INHALATION	SUSPENSION			
00002494280	TARO-BUDESONIDE		TAR	\$	0.4559
00002465957	TEVA-BUDESONIDE		TEV	\$	0.4559
00001978926	PULMICORT	NEBUAMP	AZC	\$	1.0335

CICLESONIDE

100 MCG / DOSE	INHALATION	METERED DOSE AEROSOL			
00002285606	ALVESCO		COV	\$	0.4238
200 MCG / DOSE	INHALATION	METERED DOSE AEROSOL			
00002285614	ALVESCO		COV	\$	0.7009

CORTISONE ACETATE

25 MG	ORAL TABLET				
00000280437	CORTISONE	ACETATE	VCL	\$	0.3939

DEXAMETHASONE

0.5 MG	ORAL TABLET				
00002261081	APO-DEXAMETHASONE		APX	\$	0.1564
00001964976	PMS-DEXAMETHASONE		PMS	\$	0.1564
0.75 MG	ORAL TABLET				
00001964968	PMS-DEXAMETHASONE		PMS	\$	0.6783
2 MG	ORAL TABLET				
00002279363	PMS-DEXAMETHASONE		PMS	\$	0.5530
4 MG	ORAL TABLET				
00002250055	APO-DEXAMETHASONE		APX	\$	0.6112
00001964070	PMS-DEXAMETHASONE		PMS	\$	0.6112

68:00 HORMONES AND SYNTHETIC SUBSTITUTES**68:04 ADRENALS****DEXAMETHASONE SODIUM PHOSPHATE**

4 MG / ML (BASE)	INJECTION			
00000664227	DEXAMETHASONE SODIUM PHOSPHATE	SDZ	\$	1.6900
00001977547	DEXAMETHASONE SODIUM PHOSPHATE	STM	\$	1.6900
10 MG / ML (BASE)	INJECTION			
00000783900	PMS-DEXAMETHASONE SODIUM PHOSP	PMS	\$	1.2830
00000874582	DEXAMETHASONE SODIUM PHOSPHATE	SDZ	\$	4.5600

FLUDROCORTISONE ACETATE

0.1 MG	ORAL TABLET			
00002086026	FLORINEF	PAL	\$	0.3011

FLUTICASONE PROPIONATE

50 MCG / DOSE	INHALATION METERED DOSE AEROSOL			
00002244291	FLOVENT HFA	GSK	\$	0.2321
125 MCG / DOSE	INHALATION METERED DOSE AEROSOL			
00002526557	APO-FLUTICASONE HFA	APX	\$	0.1951
00002503123	PMS-FLUTICASONE HFA	PMS	\$	0.1951
00002244292	FLOVENT HFA	GSK	\$	0.4004
250 MCG / DOSE	INHALATION METERED DOSE AEROSOL			
00002510987	APO-FLUTICASONE HFA	APX	\$	0.3752
00002503131	PMS-FLUTICASONE HFA	PMS	\$	0.3752
00002244293	FLOVENT HFA	GSK	\$	0.8008
55 MCG / DOSE	INHALATION METERED INHALATION POWDER			
00002467895	AERMONY RESPICLICK	TMP	\$	0.2826
113 MCG / DOSE	INHALATION METERED INHALATION POWDER			
00002467909	AERMONY RESPICLICK	TMP	\$	0.5160
232 MCG / DOSE	INHALATION METERED INHALATION POWDER			
00002467917	AERMONY RESPICLICK	TMP	\$	0.8025
250 MCG / DOSE	INHALATION METERED INHALATION POWDER			
00002237246	FLOVENT DISKUS	GSK	\$	0.8008
500 MCG / DOSE	INHALATION METERED INHALATION POWDER			
00002237247	FLOVENT DISKUS	GSK	\$	1.2257

HYDROCORTISONE

10 MG	ORAL TABLET			
00002524465	AURO-HYDROCORTISONE	AUR	\$	0.1639
00000030910	CORTEF	PFI	\$	0.2259
20 MG	ORAL TABLET			
00002524473	AURO-HYDROCORTISONE	AUR	\$	0.2958
00000030929	CORTEF	PFI	\$	0.4078

HYDROCORTISONE SODIUM SUCCINATE

100 MG / VIAL (BASE)	INJECTION			
00000030600	SOLU-CORTEF	PFI	\$	5.0370
250 MG / VIAL (BASE)	INJECTION			
00000030619	SOLU-CORTEF	PFI	\$	8.5240
500 MG / VIAL (BASE)	INJECTION			
00000030627	SOLU-CORTEF	PFI	\$	17.6200

METHYLPREDNISOLONE

4 MG	ORAL TABLET			
00000030988	MEDROL	PFI	\$	0.5364
16 MG	ORAL TABLET			
00000036129	MEDROL	PFI	\$	1.5464

68:00 HORMONES AND SYNTHETIC SUBSTITUTES**68:04 ADRENALS****METHYLPREDNISOLONE ACETATE****20 MG / ML INJECTION**

00001934325 DEPO-MEDROL PFI \$ 3.0180

40 MG / ML INJECTION

00000030759 DEPO-MEDROL PFI \$ 6.7480

80 MG / ML INJECTION

00000030767 DEPO-MEDROL PFI \$ 12.9359

40 MG / ML INJECTION

00001934333 DEPO-MEDROL (PRESERVED) PFI \$ 6.6700

80 MG / ML INJECTION

00001934341 DEPO-MEDROL (PRESERVED) PFI \$ 9.9904

METHYLPREDNISOLONE ACETATE/ LIDOCAINE HCL**40 MG / ML * 10 MG / ML INJECTION**

00000260428 DEPO-MEDROL WITH LIDOCAINE PFI \$ 7.5250

METHYLPREDNISOLONE SODIUM SUCCINATE**40 MG / VIAL (BASE) INJECTION**

00002367947 SOLU-MEDROL ACT-O-VIAL (PRESERVATIVE PFI FREE) PFI \$ 7.7690

125 MG / VIAL (BASE) INJECTION

00002367955 SOLU-MEDROL ACT-O-VIAL (PRESERVATIVE PFI FREE) PFI \$ 18.8880

500 MG / VIAL (BASE) INJECTION

00002367963 SOLU-MEDROL ACT-O-VIAL (PRESERVATIVE FREE) PFI \$ 46.2133

00000030678 SOLU-MEDROL PFI \$ 46.4040

1 G / VIAL (BASE) INJECTION

00002367971 SOLU-MEDROL ACT-O-VIAL (PRESERVATIVE FREE) PFI \$ 70.8500

00000036137 SOLU-MEDROL PFI \$ 71.1300

MOMETASONE FUROATE**100 MCG / DOSE INHALATION METERED INHALATION POWDER**

00002438690 ASMANEX TWISTHALER ORC \$ 1.2699

RESTRICTED BENEFIT - This Drug Product is a benefit for patients up to 11 years of age inclusive.

200 MCG / DOSE INHALATION METERED INHALATION POWDER

00002243595 ASMANEX TWISTHALER ORC \$ 0.6508

400 MCG / DOSE INHALATION METERED INHALATION POWDER

00002243596 ASMANEX TWISTHALER ORC \$ 1.3018

PREDNISOLONE SODIUM PHOSPHATE**1 MG / ML (BASE) ORAL LIQUID**

00002245532 PMS-PREDNISOLONE PMS \$ 0.1259

00002230619 PEDIAPRED SAV \$ 0.1500

PREDNISONE**1 MG ORAL TABLET**

00000271373 WINPRED AAP \$ 0.1341

5 MG ORAL TABLET

00000312770 APO-PREDNISONE APX \$ 0.0401

50 MG ORAL TABLET

00000550957 APO-PREDNISONE APX \$ 0.1735

 00000232378 TEVA-PREDNISONE TEV \$ 0.1735

68:00 HORMONES AND SYNTHETIC SUBSTITUTES**68:04 ADRENALS****TRIAMCINOLONE ACETONIDE**

10 MG / ML INJECTION

00001999761 KENALOG-10 WSD \$ 3.7590

40 MG / ML INJECTION

00001977563 TRIAMCINOLONE ACETONIDE USP STM \$ 5.7750

00001999869 KENALOG-40 WSD \$ 8.7324

68:00 HORMONES AND SYNTHETIC SUBSTITUTES**68:08 ANDROGENS****DANAZOL**

50 MG ORAL CAPSULE

00002018144 CYCLOMEN SAV \$ 1.0720

100 MG ORAL CAPSULE

00002018152 CYCLOMEN SAV \$ 1.5910

200 MG ORAL CAPSULE

00002018160 CYCLOMEN SAV \$ 2.5425

TESTOSTERONE CYPIONATE

100 MG / ML INJECTION

00002496003 TARO-TESTOSTERONE CYPIONATE TAR \$ 3.4878

00000030783 DEPO-TESTOSTERONE CYPIONATE PFI \$ 4.8130

TESTOSTERONE ENANTHATE

200 MG / ML INJECTION

00000029246 DELATESTRYL VCL \$ 11.5741

68:00 HORMONES AND SYNTHETIC SUBSTITUTES**68:12 CONTRACEPTIVES****DESOGESTREL/ ETHINYL ESTRADIOL**

0.15 MG * 0.03 MG ORAL TABLET

00002317192 APRI 21 TEV \$ 0.3700

00002396491 FREYA 21 MYP \$ 0.3700

00002410249 MIRVALA 21 APX \$ 0.3700

00002042487 MARVELON (21 DAY) ORC \$ 0.7289

0.15 MG * 0.03 MG ORAL TABLET

00002317206 APRI 28 TEV \$ 0.2775

00002396610 FREYA 28 MYP \$ 0.2775

00002410257 MIRVALA 28 APX \$ 0.2775

00002042479 MARVELON (28 DAY) ORC \$ 0.5467

**DESOGESTREL/ ETHINYL ESTRADIOL/ DESOGESTREL/
ETHINYL ESTRADIOL/ DESOGESTREL/ ETHINYL ESTRADIOL**

0.1 MG * 0.025 MG * 0.125 MG * 0.025 MG * 0.15 MG * 0.025 MG ORAL TABLET

00002272903 LINESSA 21 APC \$ 0.8559

0.1 MG * 0.025 MG * 0.125 MG * 0.025 MG * 0.15 MG * 0.025 MG ORAL TABLET

00002257238 LINESSA 28 APC \$ 0.6419

68:00 HORMONES AND SYNTHETIC SUBSTITUTES**68:12 CONTRACEPTIVES****DROSPIRENONE/ ETHINYL ESTRADIOL**

3 MG * 0.03 MG ORAL TABLET

00002421437	DROSPIRENONE AND ETHINYL ESTRADIOL	GLM	\$	0.2962
00002410788	ZAMINE 21	APX	\$	0.2962
00002261723	YASMIN 21	BAI	\$	0.5924

3 MG * 0.03 MG ORAL TABLET

00002421445	DROSPIRENONE AND ETHINYL ESTRADIOL	GLM	\$	0.2221
00002410796	ZAMINE 28	APX	\$	0.2221
00002261731	YASMIN 28	BAI	\$	0.4443

ETONOGESTREL

68 MG SUBDERMAL IMPLANT

00002499509	NEXPLANON	ORC	\$	296.0000
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LEVONORGESTREL

1.5 MG ORAL TABLET

00002433532	BACKUP PLAN ONESTEP	APX	\$	8.6000
00002425009	CONTINGENCY ONE	MYP	\$	8.6000
00002293854	PLAN B	MCP	\$	17.2000

19.5 MG INTRAUTERINE INSERT

00002459523	KYLEENA	BAI	\$	348.6100
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52 MG INTRAUTERINE INSERT

00002243005	MIRENA SYSTEM	BAI	\$	372.5500
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LEVONORGESTREL/ ETHINYL ESTRADIOL

100 MCG * 20 MCG ORAL TABLET

00002387875	ALYSENA 21	APX	\$	0.1877
00002532174	AUDRINA (21 DAY)	JPC	\$	0.1877
00002298538	AVIANE 21	TEV	\$	0.1877
00002236974	ALESSE (21 DAY)	PFI	\$	0.7470

150 MCG * 30 MCG ORAL TABLET

00002387085	OVIMA 21	APX	\$	0.3467
00002295946	PORTIA 21	TEV	\$	0.3467

100 MCG * 20 MCG ORAL TABLET

00002387883	ALYSENA 28	APX	\$	0.1408
00002532182	AUDRINA (28 DAY)	JPC	\$	0.1408
00002298546	AVIANE 28	TEV	\$	0.1408
00002236975	ALESSE (28 DAY)	PFI	\$	0.5604

150 MCG * 30 MCG ORAL TABLET

00002387093	OVIMA 28	APX	\$	0.2600
00002295954	PORTIA 28	TEV	\$	0.2600

**LEVONORGESTREL/ ETHINYL ESTRADIOL/ LEVONORGESTREL/
ETHINYL ESTRADIOL/ LEVONORGESTREL/ ETHINYL
ESTRADIOL**

50 MCG * 30 MCG * 75 MCG * 40 MCG * 125 MCG * 30 MCG ORAL TABLET

00000707600	TRIQUILAR (21 DAY)	BAI	\$	0.7500
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50 MCG * 30 MCG * 75 MCG * 40 MCG * 125 MCG * 30 MCG ORAL TABLET

00000707503	TRIQUILAR (28 DAY)	BAI	\$	0.5625
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NORETHINDRONE

0.35 MG ORAL TABLET

00002441306	JENCYCLA (28 DAY)	LPC	\$	0.3925
00002410303	MOVISSE (28 DAY)	MYP	\$	0.3925

68:00 HORMONES AND SYNTHETIC SUBSTITUTES**68:12 CONTRACEPTIVES****NORETHINDRONE/ ETHINYL ESTRADIOL/ NORETHINDRONE/
ETHINYL ESTRADIOL**

0.5 MG * 0.035 MG * 1 MG * 0.035 MG ORAL TABLET

00002187108 SYNPHASIC (21 DAY) PFI \$ 0.6494

0.5 MG * 0.035 MG * 1 MG * 0.035 MG ORAL TABLET

00002187116 SYNPHASIC (28 DAY) PFI \$ 0.4870

**NORGESTIMATE/ ETHINYL ESTRADIOL/ NORGESTIMATE/
ETHINYL ESTRADIOL/ NORGESTIMATE/ ETHINYL ESTRADIOL**

0.18 MG * 0.025 MG * 0.215 MG * 0.025 MG * 0.25 MG * 0.025 MG ORAL TABLET

00002401975 TRICIRA LO 28 APX \$ 0.5908

0.18 MG * 0.035 MG * 0.215 MG * 0.035 MG * 0.25 MG * 0.035 MG ORAL TABLET

00002508087 TRI-CIRA 21 APX \$ 0.6852

00002486296 TRI-JORDYNA (21 DAY) GLM \$ 0.6852

0.18 MG * 0.025 MG * 0.215 MG * 0.025 MG * 0.25 MG * 0.025 MG ORAL TABLET

00002401967 TRICIRA LO 21 APX \$ 0.7877

0.18 MG * 0.035 MG * 0.215 MG * 0.035 MG * 0.25 MG * 0.035 MG ORAL TABLET

00002508095 TRI-CIRA 28 APX \$ 0.5139

00002486318 TRI-JORDYNA 28 (28 DAY) GLM \$ 0.5139

68:00 HORMONES AND SYNTHETIC SUBSTITUTES**68:16.04 ESTROGENS AND ANTIESTROGENS
(ESTROGENS)****CONJUGATED ESTROGENS**

0.3 MG ORAL SUSTAINED-RELEASE TABLET

00002414678 PREMARIN PFI \$ 0.3892

0.625 MG ORAL SUSTAINED-RELEASE TABLET

00002414686 PREMARIN PFI \$ 0.4087

1.25 MG ORAL SUSTAINED-RELEASE TABLET

00002414694 PREMARIN PFI \$ 0.4260

0.625 MG / G VAGINAL CREAM

00002043440 PREMARIN PFI \$ 0.8280

ESTRADIOL-17B

0.5 MG ORAL TABLET

00002449048 LUPIN-ESTRADIOL LPC \$ 0.1199

1 MG ORAL TABLET

00002449056 LUPIN-ESTRADIOL LPC \$ 0.2313

2 MG ORAL TABLET

00002449064 LUPIN-ESTRADIOL LPC \$ 0.4083

0.06 % TRANSDERMAL GEL

00002238704 ESTROGEL ORC \$ 0.3710

0.1 % TRANSDERMAL GEL

 00002424924 DIVIGEL (0.25 MG PACK) SLP \$ 0.8696 00002424835 DIVIGEL (0.5 MG PACK) SLP \$ 0.8696 00002424843 DIVIGEL (1 MG PACK) SLP \$ 0.8696

25 MCG/DAY TRANSDERMAL PATCH

 00002243722 OESCLIM 25 (5 MG/PTH) SLP \$ 3.0219 00002245676 ESTRADOT 25 (0.39 MG/PTH) SDZ \$ 3.0850 00002247499 CLIMARA 25 (2 MG/PTH) BAI \$ 5.1600

37.5 MCG/DAY TRANSDERMAL PATCH

00002243999 ESTRADOT 37.5 (0.585 MG/PTH) SDZ \$ 3.1050

The DBL is not a prescribing or a diagnostic tool. Prescribers should refer to drug monographs and utilize professional judgment.

68:00 HORMONES AND SYNTHETIC SUBSTITUTES**68:16.04 ESTROGENS AND ANTIESTROGENS
(ESTROGENS)****ESTRADIOL-17B****50 MCG/DAY TRANSDERMAL PATCH**

00002246967	SANDOZ ESTRADIOL DERM 50 (4 MG/PTH)	SDZ	\$	2.6598
<input checked="" type="checkbox"/> 00002243724	OESCLIM 50 (10 MG/PTH)	SLP	\$	3.0349
00002244000	ESTRADOT 50 (0.78 MG/PTH)	SDZ	\$	3.3125
<input checked="" type="checkbox"/> 00002231509	CLIMARA 50 (3.9 MG/PTH)	BAI	\$	5.5118

75 MCG/DAY TRANSDERMAL PATCH

00002246968	SANDOZ ESTRADIOL DERM 75 (6 MG/PTH)	SDZ	\$	3.2900
00002244001	ESTRADOT 75 (1.17 MG/PTH)	SDZ	\$	3.5500
<input checked="" type="checkbox"/> 00002247500	CLIMARA 75 (5.7 MG/PTH)	BAI	\$	5.8764

100 MCG/DAY TRANSDERMAL PATCH

00002246969	SANDOZ ESTRADIOL DERM 100 (8 MG/PTH)	SDZ	\$	3.3175
00002244002	ESTRADOT 100 (1.56 MG/PTH)	SDZ	\$	3.7525

10 MCG VAGINAL TABLET

00002325462	VAGIFEM	NNA	\$	4.6933
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2 MG VAGINAL SLOW-RELEASE RING

00002168898	ESTRING	PAL	\$	79.7844
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4 MCG VAGINAL INSERT

00002503689	IMVEXXY	KTI	\$	3.6288
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10 MCG VAGINAL INSERT

00002503697	IMVEXXY	KTI	\$	3.6288
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ESTRADIOL-17B/ PROGESTERONE**1 MG * 100 MG ORAL CAPSULE**

00002505223	BIJUVA	KTI	\$	0.8962
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NORETHINDRONE ACETATE/ ESTRADIOL-17B**140 MCG/DAY * 50 MCG/DAY TRANSDERMAL PATCH**

00002241835	ESTALIS 140/50	SDZ	\$	3.6725
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250 MCG/DAY * 50 MCG/DAY TRANSDERMAL PATCH

00002241837	ESTALIS 250/50	SDZ	\$	3.6725
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68:00 HORMONES AND SYNTHETIC SUBSTITUTES**68:20.02 ANTIDIABETIC AGENTS
(ALPHA-GLUCOSIDASE INHIBITORS)****ACARBOSE****50 MG ORAL TABLET**

00002494078	MAR-ACARBOSE	MAR	\$	0.1348
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100 MG ORAL TABLET

00002494086	MAR-ACARBOSE	MAR	\$	0.1866
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68:00 HORMONES AND SYNTHETIC SUBSTITUTES68:20.04 ANTIDIABETIC AGENTS
(BIGUANIDES)**METFORMIN HCL**

500 MG ORAL TABLET

00002257726	ACT METFORMIN	TEV	\$	0.0247
00002438275	AURO-METFORMIN	AUR	\$	0.0247
00002380196	JAMP-METFORMIN	JPC	\$	0.0247
00002378620	MAR-METFORMIN	MAR	\$	0.0247
00002353377	METFORMIN	SNS	\$	0.0247
00002385341	METFORMIN FC	SIV	\$	0.0247
00002388766	MINT-METFORMIN	MPI	\$	0.0247
00002536439	NRA-METFORMIN	NRA	\$	0.0247
00002223562	PMS-METFORMIN	PMS	\$	0.0247
00002520303	PMSC-METFORMIN	PMS	\$	0.0247
00002531895	PRZ-METFORMIN	PCI	\$	0.0247
00002246820	SANDOZ METFORMIN FC	SDZ	\$	0.0247
00002099233	GLUCOPHAGE	SAV	\$	0.2821

850 MG ORAL TABLET

00002257734	ACT METFORMIN	TEV	\$	0.0339
00002438283	AURO-METFORMIN	AUR	\$	0.0339
00002380218	JAMP-METFORMIN	JPC	\$	0.0339
00002378639	MAR-METFORMIN	MAR	\$	0.0339
00002353385	METFORMIN	SNS	\$	0.0339
00002385368	METFORMIN FC	SIV	\$	0.0339
00002388774	MINT-METFORMIN	MPI	\$	0.0339
00002536447	NRA-METFORMIN	NRA	\$	0.0339
00002242589	PMS-METFORMIN	PMS	\$	0.0339
00002520311	PMSC-METFORMIN	PMS	\$	0.0339
00002531909	PRZ-METFORMIN	PCI	\$	0.0339
00002246821	SANDOZ METFORMIN FC	SDZ	\$	0.0339
00002162849	GLUCOPHAGE	SAV	\$	0.3815

1,000 MG ORAL TABLET

00002534673	PRZ-METFORMIN	PCI	\$	0.0399
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68:00 HORMONES AND SYNTHETIC SUBSTITUTES68:20.08 ANTIDIABETIC AGENTS
(INSULINS)**INSULIN ASPART**

100 UNIT / ML INJECTION

<input checked="" type="checkbox"/>	00002529254	TRURAPI	SAV	\$	2.2643
<input checked="" type="checkbox"/>	00002520974	KIRSTY (PEN)	BBC	\$	2.8475
<input checked="" type="checkbox"/>	00002506564	TRURAPI CARTRIDGE	SAV	\$	3.0000
<input checked="" type="checkbox"/>	00002506572	TRURAPI SOLOSTAR PEN	SAV	\$	3.0000

INSULIN DEGLUDEC

100 UNIT / ML INJECTION

<input checked="" type="checkbox"/>	00002467860	TRESIBA (PENFILL CARTRIDGE)	NNA	\$	7.4333
<input checked="" type="checkbox"/>	00002467879	TRESIBA FLEXTOUCH PEN	NNA	\$	7.4333

200 UNIT / ML INJECTION

00002467887	TRESIBA FLEXTOUCH PEN	NNA	\$	14.8666
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68:00 HORMONES AND SYNTHETIC SUBSTITUTES**68:20.08 ANTIDIABETIC AGENTS
(INSULINS)****INSULIN DETEMIR**

100 UNIT / ML INJECTION

<input checked="" type="checkbox"/>	00002271842	LEVEMIR CARTRIDGE	NNA	\$	7.4453
<input checked="" type="checkbox"/>	00002412829	LEVEMIR FLEXTOUCH	NNA	\$	7.6860

INSULIN GLARGINE

100 UNIT / ML INJECTION

<input checked="" type="checkbox"/>	00002526441	SEMGLEE PEN	BBC	\$	4.2556
<input checked="" type="checkbox"/>	00002444844	BASAGLAR CARTRIDGE	LIL	\$	5.0420
<input checked="" type="checkbox"/>	00002461528	BASAGLAR KWIKPEN (80 UNIT/INJ)	LIL	\$	5.0420

INSULIN GLULISINE (RDNA ORIGIN)

100 UNIT / ML INJECTION

<input checked="" type="checkbox"/>	00002279460	APIDRA	SAV	\$	2.7610
<input checked="" type="checkbox"/>	00002279479	APIDRA CARTRIDGE	SAV	\$	3.6469
<input checked="" type="checkbox"/>	00002294346	APIDRA PEN	SAV	\$	3.6815

INSULIN HUMAN BIOSYNTHETIC (ISOPHANE)

100 UNIT / ML INJECTION

<input checked="" type="checkbox"/>	00002024225	NOVOLIN GE NPH	NNA	\$	2.5180
<input checked="" type="checkbox"/>	00000587737	HUMULIN N	LIL	\$	2.5840
<input checked="" type="checkbox"/>	00002024268	NOVOLIN GE NPH CARTRIDGE	NNA	\$	3.3006
<input checked="" type="checkbox"/>	00001959239	HUMULIN N CARTRIDGE	LIL	\$	3.3820
<input checked="" type="checkbox"/>	00002403447	HUMULIN N KWIKPEN	LIL	\$	3.3820

INSULIN HUMAN BIOSYNTHETIC (REGULAR)

100 UNIT / ML INJECTION

<input checked="" type="checkbox"/>	00002024233	NOVOLIN GE TORONTO	NNA	\$	2.4620
<input checked="" type="checkbox"/>	00000586714	HUMULIN R	LIL	\$	2.5840
<input checked="" type="checkbox"/>	00002024284	NOVOLIN GE TORONTO CARTRIDGE	NNA	\$	3.2240
<input checked="" type="checkbox"/>	00001959220	HUMULIN R CARTRIDGE	LIL	\$	3.3820

INSULIN HUMAN BIOSYNTHETIC (REGULAR)/ INSULIN HUMAN BIOSYNTHETIC (ISOPHANE)

30 UNIT / ML * 70 UNIT / ML INJECTION

<input checked="" type="checkbox"/>	00002024217	NOVOLIN GE 30/70	NNA	\$	2.5310
<input checked="" type="checkbox"/>	00000795879	HUMULIN 30/70	LIL	\$	2.5840
<input checked="" type="checkbox"/>	00002025248	NOVOLIN GE 30/70 CARTRIDGE	NNA	\$	3.1900
<input checked="" type="checkbox"/>	00001959212	HUMULIN 30/70 CARTRIDGE	LIL	\$	3.3820

INSULIN LISPRO

100 UNIT / ML INJECTION

<input checked="" type="checkbox"/>	00002469901	ADMELOG	SAV	\$	2.2700
<input checked="" type="checkbox"/>	00002469898	ADMELOG CARTRIDGE	SAV	\$	3.0000
<input checked="" type="checkbox"/>	00002469871	ADMELOG PEN	SAV	\$	3.0000

200 UNIT / ML INJECTION

	00002439611	HUMALOG KWIKPEN	LIL	\$	7.7620
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INSULIN LISPRO/ INSULIN LISPRO PROTAMINE

25 % * 75 % INJECTION

<input checked="" type="checkbox"/>	00002403420	HUMALOG MIX 25 KWIKPEN	LIL	\$	4.2186
<input checked="" type="checkbox"/>	00002240294	HUMALOG MIX 25 CARTRIDGE	LIL	\$	4.2733

50 % * 50 % INJECTION

<input checked="" type="checkbox"/>	00002403439	HUMALOG MIX 50 KWIKPEN	LIL	\$	4.1480
<input checked="" type="checkbox"/>	00002240297	HUMALOG MIX 50 CARTRIDGE	LIL	\$	4.1853

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68:00 HORMONES AND SYNTHETIC SUBSTITUTES**68:20.16 ANTIDIABETIC AGENTS
(MEGLITINIDES)****REPAGLINIDE****0.5 MG ORAL TABLET**

00002321475	ACT REPAGLINIDE	TEV	\$	0.0808
00002424258	AURO-REPAGLINIDE	AUR	\$	0.0808
00002354926	JAMP REPAGLINIDE	JPC	\$	0.0808
00002357453	SANDOZ REPAGLINIDE	SDZ	\$	0.0808
00002239924	GLUCONORM	NNA	\$	0.3365

1 MG ORAL TABLET

00002321483	ACT REPAGLINIDE	TEV	\$	0.0840
00002424266	AURO-REPAGLINIDE	AUR	\$	0.0840
00002354934	JAMP REPAGLINIDE	JPC	\$	0.0840
00002357461	SANDOZ REPAGLINIDE	SDZ	\$	0.0840
00002239925	GLUCONORM	NNA	\$	0.3498

2 MG ORAL TABLET

00002321491	ACT REPAGLINIDE	TEV	\$	0.0873
00002424274	AURO-REPAGLINIDE	AUR	\$	0.0873
00002354942	JAMP REPAGLINIDE	JPC	\$	0.0873
00002357488	SANDOZ REPAGLINIDE	SDZ	\$	0.0873
00002239926	GLUCONORM	NNA	\$	0.3634

68:00 HORMONES AND SYNTHETIC SUBSTITUTES**68:20.18 ANTIDIABETIC AGENTS
(SODIUM-GLUCOSE COTRANSPORTER 2 (SGLT2)
INHIBITORS)****DAPAGLIFLOZIN****5 MG ORAL TABLET**

00002527189	APO-DAPAGLIFLOZIN	APX	\$	0.6825
00002531402	AURO-DAPAGLIFLOZIN	AUR	\$	0.6825
00002519852	GLN-DAPAGLIFLOZIN	GLM	\$	0.6825
00002531364	JAMP DAPAGLIFLOZIN	JPC	\$	0.6825
00002535297	M-DAPAGLIFLOZIN	MTR	\$	0.6825
00002538334	NRA-DAPAGLIFLOZIN	NRA	\$	0.6825
00002531550	PMS-DAPAGLIFLOZIN	PMS	\$	0.6825
00002518732	SANDOZ DAPAGLIFLOZIN	SDZ	\$	0.6825
00002435462	FORXIGA	AZC	\$	2.7300

10 MG ORAL TABLET

00002527197	APO-DAPAGLIFLOZIN	APX	\$	0.6825
00002531410	AURO-DAPAGLIFLOZIN	AUR	\$	0.6825
00002519860	GLN-DAPAGLIFLOZIN	GLM	\$	0.6825
00002531372	JAMP DAPAGLIFLOZIN	JPC	\$	0.6825
00002535300	M-DAPAGLIFLOZIN	MTR	\$	0.6825
00002538342	NRA-DAPAGLIFLOZIN	NRA	\$	0.6825
00002531569	PMS-DAPAGLIFLOZIN	PMS	\$	0.6825
00002518740	SANDOZ DAPAGLIFLOZIN	SDZ	\$	0.6825
00002435470	FORXIGA	AZC	\$	2.7300

68:00 HORMONES AND SYNTHETIC SUBSTITUTES**68:20.18 ANTIDIABETIC AGENTS****(SODIUM-GLUCOSE COTRANSPORTER 2 (SGLT2)
INHIBITORS)****DAPAGLIFLOZIN/ METFORMIN HCL****5 MG * 850 MG ORAL TABLET**

00002536153	APO-DAPAGLIFLOZIN-METFORMIN	APX	\$	0.6432
00002533073	AURO-DAPAGLIFLOZIN/METFORMIN	AUR	\$	0.6432
00002449935	XIGDUO	AZC	\$	1.2863

5 MG * 1,000 MG ORAL TABLET

00002536161	APO-DAPAGLIFLOZIN-METFORMIN	APX	\$	0.6432
00002533081	AURO-DAPAGLIFLOZIN/METFORMIN	AUR	\$	0.6432
00002449943	XIGDUO	AZC	\$	1.2863

68:00 HORMONES AND SYNTHETIC SUBSTITUTES**68:20.20 ANTIDIABETIC AGENTS****(SULFONYLUREAS)****GLICLAZIDE****80 MG ORAL TABLET**

00002245247	APO-GLICLAZIDE	APX	\$	0.0931
00002287072	GLICLAZIDE	SNS	\$	0.0931
00002238103	TEVA-GLICLAZIDE	TEV	\$	0.0931

30 MG ORAL SUSTAINED-RELEASE TABLET

00002297795	APO-GLICLAZIDE MR	APX	\$	0.0931
00002524856	GLICLAZIDE MR	SNS	\$	0.0931
00002423286	MINT-GLICLAZIDE MR	MPI	\$	0.0931
00002438658	MYLAN-GLICLAZIDE MR	MYP	\$	0.0931
00002461323	SANDOZ GLICLAZIDE MR	SDZ	\$	0.0931
00002463571	TARO-GLICLAZIDE MR	SPG	\$	0.0931
00002242987	DIAMICRON MR	SEV	\$	0.1593

60 MG ORAL SUSTAINED-RELEASE TABLET

00002407124	APO-GLICLAZIDE MR	APX	\$	0.0632
00002524864	GLICLAZIDE MR	SNS	\$	0.0632
00002423294	MINT-GLICLAZIDE MR	MPI	\$	0.0632
00002461331	SANDOZ GLICLAZIDE MR	SDZ	\$	0.0632
00002439328	TARO-GLICLAZIDE MR	SPG	\$	0.0632
00002356422	DIAMICRON MR	SEV	\$	0.2867

GLYBURIDE**2.5 MG ORAL TABLET**

00001913654	APO-GLYBURIDE	APX	\$	0.0321
00001913670	TEVA-GLYBURIDE	TEV	\$	0.0321

5 MG ORAL TABLET

00001913662	APO-GLYBURIDE	APX	\$	0.0573
00002350467	GLYBURIDE	SNS	\$	0.0573
00001913689	TEVA-GLYBURIDE	TEV	\$	0.0573

68:00 HORMONES AND SYNTHETIC SUBSTITUTES**68:22.12 ANTIHYPOGLYCEMIC AGENTS
(GLYCOGENOLYTIC AGENTS)****GLUCAGON**

3 MG / DOSE (BASE)	NASAL POWDER		
00002492415	BAQSIMI	LIL	\$ 142.9400

This product is a benefit for insulin treated patients with diabetes mellitus for the treatment of severe hypoglycemia reactions when impaired consciousness precludes oral carbohydrates.

GLUCAGON, RDNA ORIGIN

1 MG / VIAL	INJECTION		
<input checked="" type="checkbox"/> 00002333619	GLUCAGEN	NPA	\$ 90.4446
<input checked="" type="checkbox"/> 00002333627	GLUCAGEN HYPOKIT	NPA	\$ 94.0623

68:00 HORMONES AND SYNTHETIC SUBSTITUTES**68:24 PARATHYROID****SYNTHETIC CALCITONIN SALMON (SALCATONIN)**

200 IU / ML	INJECTION		
00001926691	CALCIMAR	SAV	\$ 32.7200

68:00 HORMONES AND SYNTHETIC SUBSTITUTES**68:28 PITUITARY****DESMOPRESSIN ACETATE**

0.1 MG	ORAL TABLET		
00002284030	APO-DESMOPRESSIN	APX	\$ 0.6609
00002304368	PMS-DESMOPRESSIN	PMS	\$ 0.6609
0.2 MG	ORAL TABLET		
00002284049	APO-DESMOPRESSIN	APX	\$ 1.3217
00002304376	PMS-DESMOPRESSIN	PMS	\$ 1.3217
10 MCG / DOSE	NASAL METERED DOSE SPRAY		
00002242465	DESMOPRESSIN	AAP	\$ 1.7728
4 MCG / ML	INJECTION		
00002513579	BIPAZEN	KVR	\$ 9.3314
00000873993	DDAVP	FEI	\$ 10.9781

68:00 HORMONES AND SYNTHETIC SUBSTITUTES**68:32 PROGESTINS****MEDROXYPROGESTERONE ACETATE**

2.5 MG	ORAL TABLET		
00002244726	APO-MEDROXY	APX	\$ 0.1183
00002221284	TEVA-MEDROXYPROGESTERONE	TEV	\$ 0.1183
5 MG	ORAL TABLET		
00002244727	APO-MEDROXY	APX	\$ 0.2365
00002221292	TEVA-MEDROXYPROGESTERONE	TEV	\$ 0.2365
10 MG	ORAL TABLET		
00002277298	APO-MEDROXY	APX	\$ 0.1670
00002221306	TEVA-MEDROXYPROGESTERONE	TEV	\$ 0.1670

68:00 HORMONES AND SYNTHETIC SUBSTITUTES**68:32 PROGESTINS****MEDROXYPROGESTERONE ACETATE****100 MG ORAL TABLET**

00002267640	APO-MEDROXY	APX	\$	1.2057
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150 MG / ML INJECTION

00002523493	DEPO-PROVERA	PFI	\$	32.9259
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PROGESTERONE

"Due to the high prevalence of peanut allergies within the population, Alberta Health has chosen to highlight the fact that Auro-Progesterone 100 mg capsules, Teva-Progesterone 100 mg capsules and Reddy-Progesterone 100 mg capsules contain peanut oil, while the Brand Name drug product Prometrium does not. Please note that the Expert Committee does not regularly review possible allergens within drug products listed in the Alberta Drug Benefit List (ADBL) and it remains the responsibility of the prescribing physician and dispensing pharmacist to review all patient allergies."

100 MG ORAL CAPSULE

00002493578	AURO-PROGESTERONE (PEANUT OIL)	AUR	\$	0.3762
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00002476576	PMS-PROGESTERONE	PMS	\$	0.3762
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00002516187	PROGESTERONE	SNS	\$	0.3762
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00002463113	REDDY-PROGESTERONE (PEANUT OIL)	DRL	\$	0.3762
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00002439913	TEVA-PROGESTERONE (PEANUT OIL)	TEV	\$	0.3762
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00002166704	PROMETRIUM	ORC	\$	1.2300
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68:00 HORMONES AND SYNTHETIC SUBSTITUTES**68:36.04 THYROID AND ANTITHYROID AGENTS
(THYROID AGENTS)****DESICCATED THYROID****30 MG ORAL TABLET**

00000023949	THYROID	ERF	\$	0.3500
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60 MG ORAL TABLET

00000023957	THYROID	ERF	\$	0.6000
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125 MG ORAL TABLET

00000023965	THYROID	ERF	\$	1.0800
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LEVOTHYROXINE SODIUM**0.025 MG ORAL TABLET**

00002172062	SYNTHROID	BGP	\$	0.1086
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0.05 MG ORAL TABLET

00002213192	ELTROXIN	APC	\$	0.0390
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00002172070	SYNTHROID	BGP	\$	0.0746
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0.075 MG ORAL TABLET

00002172089	SYNTHROID	BGP	\$	0.1174
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0.088 MG ORAL TABLET

00002172097	SYNTHROID	BGP	\$	0.1174
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0.1 MG ORAL TABLET

00002213206	ELTROXIN	APC	\$	0.0480
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00002172100	SYNTHROID	BGP	\$	0.0919
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0.112 MG ORAL TABLET

00002171228	SYNTHROID	BGP	\$	0.1238
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0.125 MG ORAL TABLET

00002172119	SYNTHROID	BGP	\$	0.1252
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The DBL is not a prescribing or a diagnostic tool. Prescribers should refer to drug monographs and utilize professional judgment.

68:00 HORMONES AND SYNTHETIC SUBSTITUTES**68:36.04 THYROID AND ANTITHYROID AGENTS
(THYROID AGENTS)****LEVOTHYROXINE SODIUM****0.137 MG ORAL TABLET**

00002233852 SYNTHROID BGP \$ 0.2119

0.15 MG ORAL TABLET**00002213214 ELTROXIN APC \$ 0.0528**

00002172127 SYNTHROID BGP \$ 0.0985

0.175 MG ORAL TABLET

00002172135 SYNTHROID BGP \$ 0.1345

0.2 MG ORAL TABLET**00002213222 ELTROXIN APC \$ 0.0560**

00002172143 SYNTHROID BGP \$ 0.1050

0.3 MG ORAL TABLET

00002172151 SYNTHROID BGP \$ 0.1449

LIOTHYRONINE SODIUM**5 MCG (BASE) ORAL TABLET****00002494337 TEVA-LIOTHYRONINE TEV \$ 1.1587**

00001919458 CYTOMEL PFI \$ 1.4133

25 MCG (BASE) ORAL TABLET**00002494345 TEVA-LIOTHYRONINE TEV \$ 1.2595**

00001919466 CYTOMEL PFI \$ 1.5362

68:00 HORMONES AND SYNTHETIC SUBSTITUTES**68:36.08 THYROID AND ANTITHYROID AGENTS
(ANTITHYROID AGENTS)****PROPYLTHIOURACIL****50 MG ORAL TABLET** 00002521059 HALYCIL ACI \$ 0.5000 00002523019 PROPYLTHIOURACIL PHE \$ 0.5000**THIAMAZOLE****5 MG ORAL TABLET****00002490625 JAMP METHIMAZOLE JPC \$ 0.1531****00002480107 MAR-METHIMAZOLE MAR \$ 0.1531**

00000015741 TAPAZOLE PAL \$ 0.3053

84:00

Skin and Mucous
Membrane Agents

84:00 SKIN AND MUCOUS MEMBRANE AGENTS

84:00

COMPOUND PRESCRIPTION**TOPICAL**

00000999119	COMPOUND - RETINOIC ACID (TRETINOIN) (TOPICAL)	XXX	\$	0.0000
00000999112	MISCELLANEOUS TOPICAL COMPOUND	XXX	\$	0.0000

To determine eligibility of a compound, pharmacies can contact Alberta Blue Cross for verification.

In order for a compound to be eligible:

- the compounded prescription must contain in therapeutic dosage; one or more drug(s) identified as allowable Drug Benefits; or one or more chemical entities; and
- the compounded prescription must not duplicate a manufactured drug product, whether the drug product is or is not identified as an allowable Drug Benefit; and
- the compounded prescription must not include a chemical entity or drug product, with the exception of diluents or bases, specifically identified as not an allowable Drug Benefit.

To be used when the compound has been prepared and dispensed by a licensed community pharmacy.

TOPICAL

00000999219	COMPOUND - RETINOIC ACID (TRETINOIN) (TOPICAL)	XXX	\$	0.0000
00000999213	MISCELLANEOUS TOPICAL COMPOUND	XXX	\$	0.0000

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- the compounded prescription must not include a chemical entity or drug product, with the exception of diluents or bases, specifically identified as not an allowable Drug Benefit.

To be used when the compound has been procured from a licensed compound and repackaging pharmacy and dispensed by a licensed community pharmacy.

84:00 SKIN AND MUCOUS MEMBRANE AGENTS**84:04 ANTI-INFECTIVES****COMPOUND PRESCRIPTION****TOPICAL**

00000999103 COMPOUND-ANTI-INFECTIVE (TOPICAL) XXX \$ 0.0000

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In order for a compound to be eligible:

- the compounded prescription must contain in therapeutic dosage; one or more drug(s) identified as allowable Drug Benefits; or one or more chemical entities; and
- the compounded prescription must not duplicate a manufactured drug product, whether the drug product is or is not identified as an allowable Drug Benefit; and
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To be used when the compound has been prepared and dispensed by a licensed community pharmacy.

TOPICAL

00000999203 COMPOUND-ANTI-INFECTIVE (TOPICAL) XXX \$ 0.0000

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- the compounded prescription must not duplicate a manufactured drug product, whether the drug product is or is not identified as an allowable Drug Benefit; and
- the compounded prescription must not include a chemical entity or drug product, with the exception of diluents or bases, specifically identified as not an allowable Drug Benefit.

To be used when the compound has been procured from a licensed compound and repackaging pharmacy and dispensed by a licensed community pharmacy.

84:00 SKIN AND MUCOUS MEMBRANE AGENTS

84:04.04 ANTI-INFECTIVES
(ANTIBACTERIALS)

FUSIDIC ACID

2% TOPICAL CREAM

00000586668	FUCIDIN	LEO	\$	0.7374
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METRONIDAZOLE

1% TOPICAL CREAM

00002156091	NORITATE	VCL	\$	0.6835
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1% TOPICAL GEL

00002297809	METROGEL	GAL	\$	0.7493
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10% VAGINAL CREAM

00001926861	FLAGYL	SAV	\$	0.2740
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METRONIDAZOLE/ NYSTATIN

500 MG * 100,000 UNIT VAGINAL OVULE

00001926829	FLAGYSTATIN	SAV	\$	3.6980
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MUPIROCIN

2% TOPICAL OINTMENT

00002279983	TARO-MUPIROCIN	TAR	\$	0.5378
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SODIUM FUSIDATE

2% TOPICAL OINTMENT

00000586676	FUCIDIN	LEO	\$	0.7374
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84:00 SKIN AND MUCOUS MEMBRANE AGENTS

84:04.08.08 ANTI-INFECTIVES
ANTIFUNGALS
(AZOLES)

KETOCONAZOLE

2% TOPICAL CREAM

00002245662	KETODERM	TPT	\$	0.4458
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84:00 SKIN AND MUCOUS MEMBRANE AGENTS

84:04.08.20 ANTI-INFECTIVES
ANTIFUNGALS
(HYDROXYPYRIDONES)

CICLOPIROX OLAMINE

1% TOPICAL CREAM

00002221802	LOPROX	VCL	\$	0.3513
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84:00 SKIN AND MUCOUS MEMBRANE AGENTS

84:04.92 ANTI-INFECTIVES
(MISCELLANEOUS LOCAL ANTI-INFECTIVES)

SILVER SULFADIAZINE

1% TOPICAL CREAM

00000323098	FLAMAZINE	SNE	\$	0.2415
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84:00 SKIN AND MUCOUS MEMBRANE AGENTS**84:06 ANTI-INFLAMMATORY AGENTS****AMCINONIDE**

0.1 % TOPICAL CREAM

00002246714	TARO-AMCINONIDE	TAR	\$	0.4522
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BECLOMETHASONE DIPROPIONATE

250 MCG / G TOPICAL CREAM

00002089602	PROPADERM	VCL	\$	0.5138
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BETAMETHASONE DIPROPIONATE

0.05 % (BASE) TOPICAL CREAM

00000804991	TEVA-TOPISONE	TEV	\$	0.2046
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00000323071	DIPROSONE	ORC	\$	0.2114
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0.05 % (BASE) TOPICAL GLYCOL CREAM

00000849650	TEVA-TOPILENE	TEV	\$	0.5186
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0.05 % (BASE) TOPICAL OINTMENT

00000805009	TEVA-TOPISONE	TEV	\$	0.2186
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00000344923	DIPROSONE	ORC	\$	0.2221
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0.05 % (BASE) TOPICAL GLYCOL OINTMENT

00000629367	DIPROLENE GLYCOL	ORC	\$	0.5186
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00000849669	TEVA-TOPILENE	TEV	\$	0.5186
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0.05 % (BASE) TOPICAL LOTION

00000809187	TEVA-TOPISONE	TEV	\$	0.2022
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00000417246	DIPROSONE	ORC	\$	0.2044
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0.05 % (BASE) TOPICAL GLYCOL LOTION

00001927914	TEVA-TOPILENE	TEV	\$	0.2832
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BETAMETHASONE DIPROPIONATE/ SALICYLIC ACID

0.5 MG / G (BASE) * 30 MG / G TOPICAL OINTMENT

00000578436	DIPROSALIC	ORC	\$	0.9084
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0.5 MG / ML (BASE) * 20 MG / ML TOPICAL LOTION

00002245688	RATIO-TOPISALIC	TEV	\$	0.4512
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BETAMETHASONE VALERATE

0.05 % (BASE) TOPICAL CREAM

00000716618	BETADERM MILD	TAR	\$	0.0596
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00000535427	TEVA-ECTOSONE MILD	TEV	\$	0.0596
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0.1 % (BASE) TOPICAL CREAM

00000716626	BETADERM REGULAR	TAR	\$	0.0889
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00000535435	TEVA-ECTOSONE REGULAR	TEV	\$	0.0889
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0.05 % (BASE) TOPICAL OINTMENT

00000716642	BETADERM MILD	TAR	\$	0.0781
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0.1 % (BASE) TOPICAL OINTMENT

00000716650	BETADERM REGULAR	TAR	\$	0.1165
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0.05 % (BASE) TOPICAL LOTION

00000653209	TEVA-ECTOSONE MILD	TEV	\$	0.2846
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0.1 % (BASE) TOPICAL LOTION

00000750050	TEVA-ECTOSONE REGULAR	TEV	\$	0.3529
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0.1 % (BASE) SCALP LOTION

00000653217	TEVA-ECTOSONE SCALP	TEV	\$	0.0853
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BUDESONIDE

2.3 MG / ENM RECTAL ENEMA

00002052431	ENTOCORT (115 ML)	TPG	\$	10.8035
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84:00 SKIN AND MUCOUS MEMBRANE AGENTS**84:06 ANTI-INFLAMMATORY AGENTS****CALCIPOTRIOL MONOHYDRATE/ BETAMETHASONE
DIPROPIONATE**

50 MCG / G (BASE) * 0.5 MG / G (BASE) TOPICAL OINTMENT

00002427419	TEVA-BETAMETHASONE/CALCIPOTRIOL	TEV	\$	1.2545
00002244126	DOVOBET	LEO	\$	1.6885

CLOBETASOL 17-PROPIONATE

0.05 % TOPICAL CREAM

00002024187	MYLAN-CLOBETASOL	MYP	\$	0.2279
00002245523	TARO-CLOBETASOL	TAR	\$	0.2279
00001910272	TEVA-CLOBETASOL	TEV	\$	0.2279
00002213265	DERMOVATE	TPT	\$	1.0353

0.05 % TOPICAL OINTMENT

00002026767	MYLAN-CLOBETASOL	MYP	\$	0.2279
00002245524	TARO-CLOBETASOL	TAR	\$	0.2279
00001910280	TEVA-CLOBETASOL	TEV	\$	0.2279
00002213273	DERMOVATE	TPT	\$	1.0353

0.05 % SCALP LOTION

00002216213	MYLAN-CLOBETASOL	MYP	\$	0.1990
00002245522	TARO-CLOBETASOL	TAR	\$	0.1990
00001910299	TEVA-CLOBETASOL	TEV	\$	0.1990
00002213281	DERMOVATE	TPT	\$	0.8303

84:00 SKIN AND MUCOUS MEMBRANE AGENTS**84:06 ANTI-INFLAMMATORY AGENTS****COMPOUND PRESCRIPTION****TOPICAL**

00000999107	COMPOUND-CORTICOSTEROIDS - TOPICAL XXX	\$	0.0000
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To determine eligibility of a compound, pharmacies can contact Alberta Blue Cross for verification.

In order for a compound to be eligible:

- the compounded prescription must contain in therapeutic dosage; one or more drug(s) identified as allowable Drug Benefits; or one or more chemical entities; and
- the compounded prescription must not duplicate a manufactured drug product, whether the drug product is or is not identified as an allowable Drug Benefit; and
- the compounded prescription must not include a chemical entity or drug product, with the exception of diluents or bases, specifically identified as not an allowable Drug Benefit.

To be used when the compound has been prepared and dispensed by a licensed community pharmacy.

TOPICAL

00000999207	COMPOUND-CORTICOSTEROIDS - TOPICAL XXX	\$	0.0000
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To determine eligibility of a compound, pharmacies can contact Alberta Blue Cross for verification.

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- the compounded prescription must contain in therapeutic dosage; one or more drug(s) identified as allowable Drug Benefits; or one or more chemical entities; and
- the compounded prescription must not duplicate a manufactured drug product, whether the drug product is or is not identified as an allowable Drug Benefit; and
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DESONIDE**0.05 % TOPICAL CREAM**

00002229315	PDP-DESONIDE	PPH	\$	0.4267
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0.05 % TOPICAL OINTMENT

00002229323	PDP-DESONIDE	PPH	\$	0.4526
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84:00 SKIN AND MUCOUS MEMBRANE AGENTS**84:06 ANTI-INFLAMMATORY AGENTS****DESOXIMETASONE****0.05 % TOPICAL CREAM**

00002221918 TOPICORT MILD VCL \$ 0.5687

0.25 % TOPICAL CREAM

00002221896 TOPICORT VCL \$ 0.8002

FLUOCINONIDE**0.05 % TOPICAL CREAM**

00000716863 LYDERM TPT \$ 0.2783

0.05 % TOPICAL EMOLLIENT CREAM

00000598933 TIAMOL TPT \$ 0.2468

0.05 % TOPICAL OINTMENT

00002236996 LYDERM TPT \$ 0.3645

0.05 % TOPICAL GEL

00002236997 LYDERM TPT \$ 0.3806

HALOBETASOL PROPIONATE**0.05 % TOPICAL CREAM**

00001962701 ULTRAVATE VCL \$ 1.0852

0.01 % TOPICAL LOTION

00002506262 BRYHALI VCL \$ 0.9816

HYDROCORTISONE**1 % TOPICAL CREAM**

00080057178 JAMP-HYDROCORTISONE ACETATE JPC \$ 0.0875

0.5 % TOPICAL OINTMENT

00000716685 CORTODERM MILD TAR \$ 0.2113

1 % TOPICAL OINTMENT

00000716693 CORTODERM REGULAR TAR \$ 0.0658

1 % TOPICAL LOTION

00080057191 JAMP-HYDROCORTISONE JPC \$ 0.1191

HYDROCORTISONE 17-VALERATE**0.2 % TOPICAL CREAM**

00002242984 HYDROVAL TPT \$ 0.1750

0.2 % TOPICAL OINTMENT

00002242985 HYDROVAL TPT \$ 0.1877

HYDROCORTISONE ACETATE**0.5 % TOPICAL CREAM**

00000716820 HYDERM TAR \$ 0.2150

1 % TOPICAL CREAM

00000716839 HYDERM TAR \$ 0.0533

HYDROCORTISONE ACETATE/ PRAMOXINE HCL**1 % * 1 % RECTAL FOAM**

00000363014 PROCTOFOAM-HC DUI \$ 1.7857

HYDROCORTISONE ACETATE/ PRAMOXINE HCL/ ZINC SULFATE**10 MG * 20 MG * 10 MG RECTAL SUPPOSITORY**

00002240851 PROCTODAN-HC ODN \$ 1.9847

0.5 % * 1 % * 0.5 % RECTAL OINTMENT

00002234466 PROCTODAN-HC ODN \$ 1.2861

84:00 SKIN AND MUCOUS MEMBRANE AGENTS**84:06 ANTI-INFLAMMATORY AGENTS****HYDROCORTISONE ACETATE/ UREA****1 % * 10 % TOPICAL CREAM**

<input checked="" type="checkbox"/>	00080061501	JAMP-HYDROCORTISONE ACETATE/UREA	JPC	\$	0.0915
<input checked="" type="checkbox"/>	00080073645	M-HC/UREA	MTR	\$	0.0915
<input checked="" type="checkbox"/>	00000681989	DERMAFLEX HC	PAL	\$	0.2021

1 % * 10 % TOPICAL LOTION

	00000681997	DERMAFLEX HC	PAL	\$	0.1137
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HYDROCORTISONE ACETATE/ ZINC SULFATE**10 MG * 10 MG RECTAL SUPPOSITORY**

	00002236399	ANODAN-HC	ODN	\$	0.9506
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0.5 % * 0.5 % RECTAL OINTMENT

	00002128446	ANODAN-HC	ODN	\$	0.3850
	00002387239	JAMPZINC-HC	JPC	\$	0.3850

MOMETASONE FUROATE**0.1 % TOPICAL CREAM**

	00002367157	TARO-MOMETASONE	TAR	\$	0.6296
	00000851744	ELOCOM	ORC	\$	0.7393

0.1 % TOPICAL OINTMENT

	00002248130	TEVA-MOMETASONE	TEV	\$	0.6013
	00000851736	ELOCOM	ORC	\$	0.6698

0.1 % TOPICAL LOTION

	00002266385	TARO-MOMETASONE	TAR	\$	0.4178
	00000871095	ELOCOM	ORC	\$	0.4992

TRIAMCINOLONE ACETONIDE**0.1 % TOPICAL CREAM**

	00000716960	TRIADERM REGULAR	TAR	\$	0.1177
	00002194058	ARISTOCORT R	VCL	\$	0.1549

0.5 % TOPICAL CREAM

	00002194066	ARISTOCORT C	VCL	\$	1.3702
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0.1 % TOPICAL OINTMENT

	00002194031	ARISTOCORT R	VCL	\$	0.1566
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0.1 % DENTAL PASTE

	00001964054	ORACORT	TAR	\$	1.6563
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84:00 SKIN AND MUCOUS MEMBRANE AGENTS**84:06.00 ANTI-INFLAMMATORY AGENTS**

(COMBINATION ANTI-INFECTIVE/ANTI-INFLAMMATORY AGENTS)

BETAMETHASONE DIPROPIONATE/ CLOTRIMAZOLE**0.05 % (BASE) * 1 % TOPICAL CREAM**

	00002496410	TARO-CLOTRIMAZOLE/BETAMETHASONE	TAR	\$	0.6964
	00000611174	LOTRIDERM	ORC	\$	0.8650

84:00 SKIN AND MUCOUS MEMBRANE AGENTS**84:06.00 ANTI-INFLAMMATORY AGENTS
(COMBINATION ANTI-INFECTIVE/ANTI-INFLAMMATORY AGENTS)****COMPOUND PRESCRIPTION**

00000999110	COMBINATION ANTI-INFECTIVE /CORTICOSTEROID	XXX	\$	0.0000
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To determine eligibility of a compound, pharmacies can contact Alberta Blue Cross for verification.

In order for a compound to be eligible:

- the compounded prescription must contain in therapeutic dosage; one or more drug(s) identified as allowable Drug Benefits; or one or more chemical entities; and
- the compounded prescription must not duplicate a manufactured drug product, whether the drug product is or is not identified as an allowable Drug Benefit; and
- the compounded prescription must not include a chemical entity or drug product, with the exception of diluents or bases, specifically identified as not an allowable Drug Benefit.

To be used when the compound has been prepared and dispensed by a licensed community pharmacy.

00000999211	COMBINATION ANTI- INFECTIVE/CORTICOSTEROID	XXX	\$	0.0000
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To determine eligibility of a compound, pharmacies can contact Alberta Blue Cross for verification.

In order for a compound to be eligible:

- the compounded prescription must contain in therapeutic dosage; one or more drug(s) identified as allowable Drug Benefits; or one or more chemical entities; and
- the compounded prescription must not duplicate a manufactured drug product, whether the drug product is or is not identified as an allowable Drug Benefit; and
- the compounded prescription must not include a chemical entity or drug product, with the exception of diluents or bases, specifically identified as not an allowable Drug Benefit.

To be used when the compound has been procured from a licensed compound and repackaging pharmacy and dispensed by a licensed community pharmacy.

84:00 SKIN AND MUCOUS MEMBRANE AGENTS

84:06.00 ANTI-INFLAMMATORY AGENTS

(COMBINATION ANTI-INFECTIVE/ANTI-INFLAMMATORY AGENTS)

HYDROCORTISONE/ CINCHOCAINE HCL/ FRAMYCETIN SULFATE/ ESCULIN

5 MG * 5 MG * 10 MG * 10 MG RECTAL SUPPOSITORY

00002247882 PROCTOL ODN \$ 1.3708

5 MG / G * 5 MG / G * 10 MG / G * 10 MG / G RECTAL OINTMENT

00002226383 TEVA-PROCTOSONE TEV \$ 0.4000

00002247322 PROCTOL ODN \$ 0.7712

00002223252 PROCTOSEDYL AXC \$ 0.9073

84:00 SKIN AND MUCOUS MEMBRANE AGENTS

84:08 ANTIPRURITICS AND LOCAL ANESTHETICS

LIDOCAINE

5 % TOPICAL OINTMENT

00002386836 JAMPOCAINE JPC \$ 0.1984

00002083795 LIDODAN ODN \$ 0.1984

00000001961 XYLOCAINE APC \$ 0.3983

LIDOCAINE HCL

2 % TOPICAL JELLY

00000001694 XYLOCAINE JELLY APC \$ 0.6721

84:00 SKIN AND MUCOUS MEMBRANE AGENTS**84:28 KERATOLYTIC AGENTS****COMPOUND PRESCRIPTION****TOPICAL**

00000999104	COMPOUND- SALICYLIC ACID (TOPICAL)	XXX	\$	0.0000
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To determine eligibility of a compound, pharmacies can contact Alberta Blue Cross for verification.

In order for a compound to be eligible:

- the compounded prescription must contain in therapeutic dosage; one or more drug(s) identified as allowable Drug Benefits; or one or more chemical entities; and
- the compounded prescription must not duplicate a manufactured drug product, whether the drug product is or is not identified as an allowable Drug Benefit; and
- the compounded prescription must not include a chemical entity or drug product, with the exception of diluents or bases, specifically identified as not an allowable Drug Benefit.

To be used when the compound has been prepared and dispensed by a licensed community pharmacy.

TOPICAL

00000999204	COMPOUND- SALICYLIC ACID (TOPICAL)	XXX	\$	0.0000
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To determine eligibility of a compound, pharmacies can contact Alberta Blue Cross for verification.

In order for a compound to be eligible:

- the compounded prescription must contain in therapeutic dosage; one or more drug(s) identified as allowable Drug Benefits; or one or more chemical entities; and
- the compounded prescription must not duplicate a manufactured drug product, whether the drug product is or is not identified as an allowable Drug Benefit; and
- the compounded prescription must not include a chemical entity or drug product, with the exception of diluents or bases, specifically identified as not an allowable Drug Benefit.

To be used when the compound has been procured from a licensed compound and repackaging pharmacy and dispensed by a licensed community pharmacy.

84:00 SKIN AND MUCOUS MEMBRANE AGENTS**84:92 MISCELLANEOUS SKIN AND MUCOUS MEMBRANE AGENTS****5-FLUOROURACIL****50 MG / G TOPICAL CREAM**

00000330582	EFUDEX	VCL	\$	1.0040
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84:00 SKIN AND MUCOUS MEMBRANE AGENTS**84:92 MISCELLANEOUS SKIN AND MUCOUS MEMBRANE AGENTS****ACITRETIN****10 MG ORAL CAPSULE**

00002468840	MINT-ACITRETIN	MPI	\$	1.2965
00002466074	TARO-ACITRETIN	TAR	\$	1.2965
00002070847	SORIATANE	ALR	\$	2.5805

25 MG ORAL CAPSULE

00002468859	MINT-ACITRETIN	MPI	\$	2.2770
00002466082	TARO-ACITRETIN	TAR	\$	2.2770
00002070863	SORIATANE	ALR	\$	4.5314

AZELAIC ACID**15 % TOPICAL GEL**

00002270811	FINACEA	LEO	\$	0.6680
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CALCIPOTRIOL**50 MCG / G TOPICAL OINTMENT**

00001976133	DOVONEX	LEO	\$	0.8550
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**CALCIPOTRIOL MONOHYDRATE/ BETAMETHASONE
DIPROPIONATE****50 MCG / G (BASE) * 0.5 MG / G (BASE) TOPICAL GEL**

00002525178	TARO-CALCIPOTRIOL / BETAMETHASONE GEL	TAR	\$	1.3142
00002319012	DOVOBET	LEO	\$	1.6539

50 MCG / G (BASE) * 0.5 MG / G (BASE) TOPICAL FOAM

00002457393	ENSTILAR	LEO	\$	1.6323
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COLLAGENASE**250 UNIT / G TOPICAL OINTMENT**

00002063670	SANTYL	SNE	\$	3.2480
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ISOTRETINOIN**10 MG ORAL CAPSULE**

00002257955	CLARUS	MYP	\$	0.9313
00000582344	ACCUTANE	HLR	\$	0.9547

40 MG ORAL CAPSULE

00002257963	CLARUS	MYP	\$	1.9003
00000582352	ACCUTANE	HLR	\$	1.9480

TAZAROTENE**0.045 % TOPICAL LOTION**

00002517868	ARAZLO	VCL	\$	1.4051
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86:00

Smooth Muscle Relaxants

86:00 SMOOTH MUSCLE RELAXANTS**86:12 GENITOURINARY SMOOTH MUSCLE RELAXANTS****OXYBUTYNIN CHLORIDE****2.5 MG ORAL TABLET**

00002240549	PMS-OXYBUTYNIN	PMS	\$	0.1736
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5 MG ORAL TABLET

00002163543	APO-OXYBUTYNIN	APX	\$	0.0986
00002350238	OXYBUTYNIN	SNS	\$	0.0986
00002240550	PMS-OXYBUTYNIN	PMS	\$	0.0986
00002230394	TEVA-OXYBUTYNIN	TEV	\$	0.0986

1 MG / ML ORAL SYRUP

00002223376	PMS-OXYBUTYNIN	PMS	\$	0.2084
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PROPIVERINE HYDROCHLORIDE**5 MG ORAL TABLET**

00002460289	MICTORYL PEDIATRIC	DUI	\$	0.3887
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This Drug Product is a restricted benefit for symptomatic treatment of urinary incontinence and/or increased urinary frequency and urgency in pediatric patients from 5-18 years old with overactive bladder.

SOLIFENACIN SUCCINATE**5 MG ORAL TABLET**

00002439344	ACH-SOLIFENACIN SUCCINATE	AHI	\$	0.3041
00002446375	AURO-SOLIFENACIN	AUR	\$	0.3041
00002424339	JAMP-SOLIFENACIN	JPC	\$	0.3041
00002529696	M-SOLIFENACIN SUCCINATE	MTR	\$	0.3041
00002417723	PMS-SOLIFENACIN	PMS	\$	0.3041
00002493039	PRZ-SOLIFENACIN	PCI	\$	0.3041
00002399032	SANDOZ SOLIFENACIN	SDZ	\$	0.3041
00002458241	SOLIFENACIN	SNS	\$	0.3041
00002437988	TARO-SOLIFENACIN	SPG	\$	0.3041
00002397900	TEVA-SOLIFENACIN	TEV	\$	0.3041
00002277263	VESICARE	ASP	\$	1.5135

10 MG ORAL TABLET

00002439352	ACH-SOLIFENACIN SUCCINATE	AHI	\$	0.3041
00002446383	AURO-SOLIFENACIN	AUR	\$	0.3041
00002424347	JAMP-SOLIFENACIN	JPC	\$	0.3041
00002529718	M-SOLIFENACIN SUCCINATE	MTR	\$	0.3041
00002417731	PMS-SOLIFENACIN	PMS	\$	0.3041
00002493047	PRZ-SOLIFENACIN	PCI	\$	0.3041
00002399040	SANDOZ SOLIFENACIN	SDZ	\$	0.3041
00002458268	SOLIFENACIN	SNS	\$	0.3041
00002437996	TARO-SOLIFENACIN	SPG	\$	0.3041
00002397919	TEVA-SOLIFENACIN	TEV	\$	0.3041
00002277271	VESICARE	ASP	\$	1.5135

TOLTERODINE L-TARTRATE**2 MG ORAL EXTENDED-RELEASE CAPSULE**

00002413140	SANDOZ TOLTERODINE LA	SDZ	\$	0.9822
00002412195	TEVA-TOLTERODINE LA	TEV	\$	0.9822
00002244612	DETROL LA	BGP	\$	2.2549

4 MG ORAL EXTENDED-RELEASE CAPSULE

00002413159	SANDOZ TOLTERODINE LA	SDZ	\$	0.9822
00002412209	TEVA-TOLTERODINE LA	TEV	\$	0.9822
00002244613	DETROL LA	BGP	\$	2.2549

86:00 SMOOTH MUSCLE RELAXANTS**86:16 RESPIRATORY SMOOTH MUSCLE RELAXANTS****THEOPHYLLINE**

100 MG ORAL SUSTAINED-RELEASE TABLET				
00000692689 AA-THEO LA		AAP	\$	0.1681
200 MG ORAL SUSTAINED-RELEASE TABLET				
00000692697 AA-THEO LA		AAP	\$	0.1868
300 MG ORAL SUSTAINED-RELEASE TABLET				
00000692700 AA-THEO LA		AAP	\$	0.2263

88:00

Vitamins

88:00 VITAMINS**88:08 VITAMIN B COMPLEX****CYANOCOBALAMIN**

1,000 MCG / ML INJECTION

00001987003	CYANOCOBALAMIN	STM	\$	0.3063
00002420147	JAMP-CYANOCOBALAMIN	JPC	\$	0.3063
00000521515	VITAMIN B12	SDZ	\$	0.3063

FOLIC ACID

5 MG ORAL TABLET

<input checked="" type="checkbox"/> 00002366061	JAMP-FOLIC ACID	JPC	\$	0.0208
<input checked="" type="checkbox"/> 00000426849	FOLIC ACID	AAP	\$	0.0418

THIAMINE HCL

100 MG / ML INJECTION

<input checked="" type="checkbox"/> 00002193221	THIAMJECT	OMG	\$	1.2474
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88:00 VITAMINS**88:16 VITAMIN D****ALFACALCIDOL**

0.25 MCG ORAL CAPSULE

00002533316	SANDOZ ALFACALCIDOL	SDZ	\$	0.4313
00000474517	ONE-ALPHA	CAG	\$	0.5297

1 MCG ORAL CAPSULE

00002533324	SANDOZ ALFACALCIDOL	SDZ	\$	1.2911
00000474525	ONE-ALPHA	CAG	\$	1.5854

2 MCG / ML ORAL DROPS

00002240329	ONE-ALPHA	CAG	\$	6.0571
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2 MCG / ML INJECTION

00002242502	ONE-ALPHA	CAG	\$	19.4241
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CALCITRIOL

0.25 MCG ORAL CAPSULE

00002431637	CALCITRIOL-ODAN	ODN	\$	0.2341
00002485710	TARO-CALCITRIOL	TAR	\$	0.2341
00000481823	ROCALTROL	SLP	\$	0.7363

0.5 MCG ORAL CAPSULE

00002431645	CALCITRIOL-ODAN	ODN	\$	0.3723
00002485729	TARO-CALCITRIOL	TAR	\$	0.3723
00000481815	ROCALTROL	SLP	\$	1.1710

1 MCG / ML INJECTION

00002399334	CALCITRIOL	STM	\$	9.4337
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88:00 VITAMINS**88:24 VITAMIN K ACTIVITY****PHYTONADIONE**

2 MG / ML INJECTION

00000781878	VITAMIN K1 PEDIATRIC	SDZ	\$	12.4800
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10 MG / ML INJECTION

00000804312	VITAMIN K1	SDZ	\$	6.9450
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92:00

Miscellaneous
Therapeutic Agents

92:00 MISCELLANEOUS THERAPEUTIC AGENTS

92:00

ALENDRONATE SODIUM**70 MG ORAL TABLET**

00002485184	AG-ALENDRONATE	AGP	\$	1.7804
00002299712	ALENDRONATE	SIV	\$	1.7804
00002352966	ALENDRONATE	SNS	\$	1.7804
00002381494	ALENDRONATE SODIUM	AHI	\$	1.7804
00002248730	APO-ALENDRONATE	APX	\$	1.7804
00002388553	AURO-ALENDRONATE	AUR	\$	1.7804
00002500175	JAMP ALENDRONATE SODIUM	JPC	\$	1.7804
00002385031	JAMP-ALENDRONATE	JPC	\$	1.7804
00002529394	M-ALENDRONATE	MTR	\$	1.7804
00002394871	MINT-ALENDRONATE	MPI	\$	1.7804
00002523116	NRA-ALENDRONATE	NRA	\$	1.7804
00002284006	PMS-ALENDRONATE-FC	PMS	\$	1.7804
00002270889	RIVA-ALENDRONATE	RIV	\$	1.7804
00002288109	SANDOZ ALENDRONATE	SDZ	\$	1.7804
00002261715	TEVA-ALENDRONATE	TEV	\$	1.7804
00002245329	FOSAMAX	ORC	\$	11.1325

ALENDRONATE SODIUM/ VITAMIN D3**70 MG * 5,600 UNIT ORAL TABLET**

00002454475	APO-ALENDRONATE/VITAMIN D3	APX	\$	2.4348
00002519836	JAMP ALENDRONATE/ VITAMIN D3	JPC	\$	2.4348
00002314940	FOSAVANCE	ORC	\$	5.0920

ALLOPURINOL**100 MG ORAL TABLET**

00002402769	APO-ALLOPURINOL	APX	\$	0.0780
00002396327	MAR-ALLOPURINOL	MAR	\$	0.0780
00000402818	ZYLOPRIM	AAP	\$	0.0780

200 MG ORAL TABLET

00002402777	APO-ALLOPURINOL	APX	\$	0.1300
00002396335	MAR-ALLOPURINOL	MAR	\$	0.1300
00000479799	ZYLOPRIM	AAP	\$	0.1300

300 MG ORAL TABLET

00002402785	APO-ALLOPURINOL	APX	\$	0.2125
00002396343	MAR-ALLOPURINOL	MAR	\$	0.2125
00000402796	ZYLOPRIM	AAP	\$	0.2125

AZATHIOPRINE**50 MG ORAL TABLET**

00002242907	APO-AZATHIOPRINE	APX	\$	0.2405
00002236819	TEVA-AZATHIOPRINE	TEV	\$	0.2405
00000004596	IMURAN	APC	\$	1.3353

92:00 MISCELLANEOUS THERAPEUTIC AGENTS

92:00

BETAHISTINE DIHYDROCHLORIDE**8 MG ORAL TABLET**

00002449145	AURO-BETAHISTINE	AUR	\$	0.0637
00002519682	M-BETAHISTINE	MTR	\$	0.0637
00002538121	MINT-BETAHISTINE	MPI	\$	0.0637
00002280183	TEVA-BETAHISTINE	TEV	\$	0.0637

16 MG ORAL TABLET

00002449153	AURO-BETAHISTINE	AUR	\$	0.1106
00002466449	BETAHISTINE	SNS	\$	0.1106
00002519690	M-BETAHISTINE	MTR	\$	0.1106
00002538148	MINT-BETAHISTINE	MPI	\$	0.1106
00002330210	PMS-BETAHISTINE	PMS	\$	0.1106
00002280191	TEVA-BETAHISTINE	TEV	\$	0.1106
00002243878	SERC	BGP	\$	0.5467

CLODRONATE DISODIUM**400 MG ORAL CAPSULE**

00002245828	CLASTEON	SUN	\$	1.2374
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COLCHICINE**0.6 MG ORAL TABLET**

00000572349	COLCHICINE	ODN	\$	0.2565
00002373823	JAMP-COLCHICINE	JPC	\$	0.2565
00002402181	PMS-COLCHICINE	PMS	\$	0.2565

92:00 MISCELLANEOUS THERAPEUTIC AGENTS

92:00

COMPOUND PRESCRIPTION**INJECTION**

00000999114 MISCELLANEOUS INJECTABLE COMPOUND XXX \$ 0.0000

To determine eligibility of a compound, pharmacies can contact Alberta Blue Cross for verification.

In order for a compound to be eligible:

- the compounded prescription must contain in therapeutic dosage; one or more drug(s) identified as allowable Drug Benefits; or one or more chemical entities; and
- the compounded prescription must not duplicate a manufactured drug product, whether the drug product is or is not identified as an allowable Drug Benefit; and
- the compounded prescription must not include a chemical entity or drug product, with the exception of diluents or bases, specifically identified as not an allowable Drug Benefit.

To be used when the compound has been prepared and dispensed by a licensed community pharmacy.

INJECTION

00000999215 MISCELLANEOUS INJECTABLE COMPOUND XXX \$ 0.0000

To determine eligibility of a compound, pharmacies can contact Alberta Blue Cross for verification.

In order for a compound to be eligible:

- the compounded prescription must contain in therapeutic dosage; one or more drug(s) identified as allowable Drug Benefits; or one or more chemical entities; and
- the compounded prescription must not duplicate a manufactured drug product, whether the drug product is or is not identified as an allowable Drug Benefit; and
- the compounded prescription must not include a chemical entity or drug product, with the exception of diluents or bases, specifically identified as not an allowable Drug Benefit.

To be used when the compound has been procured from a licensed compound and repackaging pharmacy and dispensed by a licensed community pharmacy.

92:00 MISCELLANEOUS THERAPEUTIC AGENTS

92:00

COMPOUND PRESCRIPTION

00000999999	MISCELLANEOUS COMPOUND	XXX	\$	0.0000
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To determine eligibility of a compound, pharmacies can contact Alberta Blue Cross for verification.

In order for a compound to be eligible:

- the compounded prescription must contain in therapeutic dosage; one or more drug(s) identified as allowable Drug Benefits; or one or more chemical entities; and
- the compounded prescription must not duplicate a manufactured drug product, whether the drug product is or is not identified as an allowable Drug Benefit; and
- the compounded prescription must not include a chemical entity or drug product, with the exception of diluents or bases, specifically identified as not an allowable Drug Benefit.

To be used when the compound has been prepared and dispensed by a licensed community pharmacy.

00000999216	MISCELLANEOUS COMPOUND	XXX	\$	0.0000
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To determine eligibility of a compound, pharmacies can contact Alberta Blue Cross for verification.

In order for a compound to be eligible:

- the compounded prescription must contain in therapeutic dosage; one or more drug(s) identified as allowable Drug Benefits; or one or more chemical entities; and
- the compounded prescription must not duplicate a manufactured drug product, whether the drug product is or is not identified as an allowable Drug Benefit; and
- the compounded prescription must not include a chemical entity or drug product, with the exception of diluents or bases, specifically identified as not an allowable Drug Benefit.

To be used when the compound has been procured from a licensed compound and repackaging pharmacy and dispensed by a licensed community pharmacy.

92:00 MISCELLANEOUS THERAPEUTIC AGENTS

92:00

COMPOUND PRESCRIPTION**ORAL**

00000999214	MISCELLANEOUS ORAL COMPOUND	XXX	\$	0.0000
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To determine eligibility of a compound, pharmacies can contact Alberta Blue Cross for verification.

In order for a compound to be eligible:

- the compounded prescription must contain in therapeutic dosage; one or more drug(s) identified as allowable Drug Benefits; or one or more chemical entities; and
- the compounded prescription must not duplicate a manufactured drug product, whether the drug product is or is not identified as an allowable Drug Benefit; and
- the compounded prescription must not include a chemical entity or drug product, with the exception of diluents or bases, specifically identified as not an allowable Drug Benefit.

To be used when the compound has been procured from a licensed compound and repackaging pharmacy and dispensed by a licensed community pharmacy.

ORAL

00000999113	MISCELLANEOUS ORAL COMPOUND	XXX	\$	0.0000
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To determine eligibility of a compound, pharmacies can contact Alberta Blue Cross for verification.

In order for a compound to be eligible:

- the compounded prescription must contain in therapeutic dosage; one or more drug(s) identified as allowable Drug Benefits; or one or more chemical entities; and
- the compounded prescription must not duplicate a manufactured drug product, whether the drug product is or is not identified as an allowable Drug Benefit; and
- the compounded prescription must not include a chemical entity or drug product, with the exception of diluents or bases, specifically identified as not an allowable Drug Benefit.

To be used when the compound has been prepared and dispensed by a licensed community pharmacy.

DIMETHYL SULFOXIDE**50 % BLADDER IRRIGATION SOLUTION**

00000493392	RIMSO-50	MYP	\$	1.9338
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FLUNARIZINE HCL**5 MG (BASE) ORAL CAPSULE**

00002246082	FLUNARIZINE	AAP	\$	0.9190
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92:00 MISCELLANEOUS THERAPEUTIC AGENTS

92:00

LEUCOVORIN CALCIUM

5 MG (BASE) ORAL TABLET

00002496828	MINT-LEUCOVORIN	MPI	\$	3.6776
00002493357	RIVA LEUCOVORIN	RIV	\$	3.6776
00002170493	LEDERLE LEUCOVORIN CALCIUM	PFI	\$	7.2466

10 MG / ML INJECTION

00002087316	LEUCOVORIN CALCIUM	TEV	\$	13.7886
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NAFARELIN ACETATE

2 MG / ML (BASE) NASAL SOLUTION

00002188783	SYNAREL	PFI	\$	53.3750
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PAMIDRONATE DISODIUM

For the products within the following three groupings, pricing has been established on a per millilitre basis.

3 MG / ML INJECTION

00002244550	PAMIDRONATE DISODIUM	PFI	\$	3.0317
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6 MG / ML INJECTION

00002244551	PAMIDRONATE DISODIUM	PFI	\$	9.0366
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9 MG / ML INJECTION

00002244552	PAMIDRONATE DISODIUM	PFI	\$	9.0953
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PENTOSAN POLYSULFATE SODIUM

100 MG ORAL CAPSULE

00002029448	ELMIRON	JAI	\$	2.7566
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RISEDRONATE SODIUM

35 MG ORAL TABLET

00002353687	APO-RISEDRONATE	APX	\$	1.6764
00002406306	AURO-RISEDRONATE	AUR	\$	1.6764
00002302209	PMS-RISEDRONATE	PMS	\$	1.6764
00002370255	RISEDRONATE	SNS	\$	1.6764
00002411407	RISEDRONATE-35	SIV	\$	1.6764
00002341077	RIVA-RISEDRONATE	RIV	\$	1.6764
00002327295	SANDOZ RISEDRONATE	SDZ	\$	1.6764
00002298392	TEVA-RISEDRONATE	TEV	\$	1.6764
00002246896	ACTONEL	ABV	\$	11.6009

92:00 MISCELLANEOUS THERAPEUTIC AGENTS

92:05

ALLERGENIC EXTRACTS**ALLERGY SERUM**

INJECTION

00000999981	ALLERGY SERUM	XXX	\$	0.0000
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92:00 MISCELLANEOUS THERAPEUTIC AGENTS**92:08 5 ALFA REDUCTASE INHIBITORS****DUTASTERIDE****0.5 MG ORAL CAPSULE**

00002404206	APO-DUTASTERIDE	APX	\$	0.2565
00002469308	AURO-DUTASTERIDE	AUR	\$	0.2565
00002429012	DUTASTERIDE	SIV	\$	0.2565
00002443058	DUTASTERIDE	SNS	\$	0.2565
00002484870	JAMP DUTASTERIDE	JPC	\$	0.2565
00002416298	MED-DUTASTERIDE	GMP	\$	0.2565
00002428873	MINT-DUTASTERIDE	MPI	\$	0.2565
00002490587	PRIVA-DUTASTERIDE	NRA	\$	0.2565
00002424444	SANDOZ DUTASTERIDE	SDZ	\$	0.2565
00002408287	TEVA-DUTASTERIDE	TEV	\$	0.2565
00002247813	AVODART	GSK	\$	1.8990

FINASTERIDE**5 MG ORAL TABLET**

00002365383	APO-FINASTERIDE	APX	\$	0.3506
00002405814	AURO-FINASTERIDE	AUR	\$	0.3506
00002355043	FINASTERIDE	AHI	\$	0.3506
00002445077	FINASTERIDE	SNS	\$	0.3506
00002447541	FINASTERIDE	SIV	\$	0.3506
00002357224	JAMP-FINASTERIDE	JPC	\$	0.3506
00002522489	M-FINASTERIDE	MTR	\$	0.3506
00002389878	MINT-FINASTERIDE	MPI	\$	0.3506
00002310112	PMS-FINASTERIDE	PMS	\$	0.3506
00002455013	RIVA-FINASTERIDE	RIV	\$	0.3506
00002322579	SANDOZ FINASTERIDE	SDZ	\$	0.3506
00002348500	TEVA-FINASTERIDE	TEV	\$	0.3506
00002010909	PROSCAR	ORC	\$	2.1045

92:00 MISCELLANEOUS THERAPEUTIC AGENTS**92:36 DISEASE-MODIFYING ANTIRHEUMATIC AGENTS****LEFLUNOMIDE**

RESTRICTED BENEFIT - This product is a benefit for the treatment of rheumatoid arthritis when the initial prescription is prescribed by a Specialist in Rheumatology or Internal Medicine.

10 MG ORAL TABLET

00002478862	ACCEL-LEFLUNOMIDE	ACP	\$	2.0000
00002256495	APO-LEFLUNOMIDE	APX	\$	2.6433
00002351668	LEFLUNOMIDE	SNS	\$	2.6433
00002283964	SANDOZ LEFLUNOMIDE	SDZ	\$	2.6433
00002261251	TEVA-LEFLUNOMIDE	TEV	\$	2.6433
00002241888	ARAVA	SAV	\$	11.4440

20 MG ORAL TABLET

00002478870	ACCEL-LEFLUNOMIDE	ACP	\$	2.0000
00002256509	APO-LEFLUNOMIDE	APX	\$	2.6433
00002351676	LEFLUNOMIDE	SNS	\$	2.6433
00002283972	SANDOZ LEFLUNOMIDE	SDZ	\$	2.6433
00002261278	TEVA-LEFLUNOMIDE	TEV	\$	2.6433
00002241889	ARAVA	SAV	\$	11.4443

92:00 MISCELLANEOUS THERAPEUTIC AGENTS**92:92 OTHER MISCELLANEOUS THERAPEUTIC AGENTS****ABOBOTULINUMTOXINA****300 IU / VIAL INJECTION**

00002460203	DYSPORT THERAPEUTIC	ISP	\$ 385.5600
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500 IU / VIAL INJECTION

00002456117	DYSPORT THERAPEUTIC	ISP	\$ 642.6000
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BOTULINUMTOXINA(150KD), FREE FROM COMPLEXING PROTEIN**50 UNIT / VIAL INJECTION**

00002371081	XEOMIN	MPC	\$ 165.0000
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100 UNIT / VIAL INJECTION

00002324032	XEOMIN	MPC	\$ 330.0000
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ONABOTULINUMTOXINA**50 UNIT INJECTION**

00002531577	BOTOX (50 UNIT/VIAL)	ABV	\$ 3.7485
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100 UNIT INJECTION

00001981501	BOTOX (100 UNIT/VIAL)	ABV	\$ 3.7485
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200 UNIT INJECTION

00002531585	BOTOX (200 UNIT/VIAL)	ABV	\$ 3.7485
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94:00

Devices

94:00 DEVICES

94:00

AEROSOL HOLDING CHAMBER

RESTRICTED BENEFIT - Coverage is limited to one aerosol holding chamber per plan participant per year.

DEVICE

00000999399	OPTICHAMBER DIAMOND (CHAMBER ONLY)	RNA	\$	18.0600
00000990080	VORTEX	KGH	\$	19.4977
00000990091	AEROCHAMBER PLUS FLOW-VU W/ MOUTHPIECE	TMI	\$	25.3200
00000990100	AEROCHAMBER PLUS FLOW-VU YOUTH W/ MOUTHPIECE	TMI	\$	25.3200

AEROSOL HOLDING CHAMBER/MASK

RESTRICTED BENEFIT - Coverage is limited to one of each size (infant, pediatric, adult) aerosol holding chamber mask or chamber w/ mask per plan participant per year.

INFANT DEVICE

00000990015	VORTEX TODDLER/INFANT MASK DEVICE	KGH	\$	13.0047
00000999398	OPTICHAMBER DIAMOND (WITH SMALL MASK)	RNA	\$	30.8700
00000990092	AEROCHAMBER PLUS FLOW-VU W/ SMALL MASK	TMI	\$	40.5000

PEDIATRIC DEVICE

00000990016	VORTEX CHILD/PEDIATRIC MASK DEVICE	KGH	\$	13.0047
00000999397	OPTICHAMBER DIAMOND (WITH MEDIUM MASK)	RNA	\$	30.8700
00000990093	AEROCHAMBER PLUS FLOW-VU W/ MEDIUM MASK	TMI	\$	40.5000

ADULT DEVICE

00000999396	OPTICHAMBER DIAMOND (WITH LARGE MASK)	RNA	\$	34.0200
00000990109	AEROCHAMBER PLUS FLOW-VU W/ ADULT SMALL MASK	TMI	\$	42.8500
00000990094	AEROCHAMBER PLUS FLOW-VU W/ LARGE MASK	TMI	\$	42.8500