PRICE LIST:

Items listed are for evaluation purposes. Price will be based on current Average Wholesale Price (AWP). AWP minus percent (%) discount plus dispensing fee (if applicable). *UOM (Unit of Measure)

ITEM #	DRUG DESCRIPTION	UOM	DRUG TYPE	QTY.	AWP PRICE	MINUS DISCOUNT	PLUS DISPENSING FEE	TOTAL PRICE
1	CIPRO. 500 MG	PACK	GENERIC	#30	$161.31	$148.81	$0	$12.50
2	VASOTEC, 10 MG	PACK	GENERIC	#30	$32.16	$27.17	$0	$4.99
3	ZOVIRAX, 400 MG	PACK	GENERIC	#30	$65.02	$57.03	$0	$7.99
4	HALDOL, 5MG/ML, 10 ML MULTIDOSE VIAL	VIAL	GENERIC	#2	$5.25	$3.83	$0	$1.42
5	DOXEPIN HC, 25 MG	PACK	GENERIC	#30	$14.09	$10.28	$0	$3.80
6	NORVASC, 10 MG	PACK	BRAND	#30	$71.21	$58.71	$0	$12.50
7	ZOLOFT. 100 MG	PACK	BRAND	#30	$85.56	$71.06	$0	$14.50
8	HALOPERIDOL, 10 MG	PACK	GENERIC	#30	$43.04	$31.42	$0	$11.62
9	GYLBURIDE, 5 MG	PACK	GENERIC	#30	$19.82	$14.46	$0	$5.35
10	EFFEXOR, 37 5 MG	PACK	BRAND	#30	$60.01	$43.81	$0	$16.20
11	GLIPIZIDE, 10 MG	PACK	GENERIC	#30	$17.57	$12.82	$0	$4.74
12	AMITRIPTYLINE, 100 MG	PACK	GENERIC	#30	$33.33	$24.33	$0	$9.00
13	PROZAC, 20 MG	PACK	GENERIC	#30	$78.44	$63.45	$0	$14.99
14	DOXYCYCLINE, 100 MG	PACK	GENERIC	#30	$34.17	$24.94	$0	$9.23
15	SULFAMETHOXAZOLE/ TRLMETHO-PRIM D.S	PACK	GENERIC	#30	$27.10	$19.78	$0	$7.32
16	TETRACYCLINE, 500 MG	PACK	GENERIC	#30	$2.68	$1.96	$0	$0.72
17	CEPHALEXIN. 500 MG	PACK	GENERIC	#30	$36.30	$26.50	$0	$9.80
18	AMOXICILLIN, 500 MG	PACK	GENERIC	#30	$11.51	$8.40	$0	$3.11
19	PROMETHAZINE, 25 MG	PACK	GENERIC	#30	$15.19	$11.09	$0	$4.10
20	ZANTAC, 150 MG	PACK	GENERIC	#30	$44.40	$32.41	$0	$11.99
21	LEVAQUIN 500 MG	PACK	BRAND	#30	$417.75	$104.66	$0	$313.09
22	CLONIDINE, .2 MG	PACK	GENERIC	#30	$9.26	$6.76	$0	$2.50
23	AUGMENTIN, 500 MG	PACK	GENERIC	#30	$113.54	$86.79	$0	$26.75
24	CLINDAMYCIN, 150 MG	PACK	GENERIC	#30	$35.75	$26.09	$0	$9.65
25	VALPROIC ACID, 250 MG	PACK	GENERIC	#30	$26.47	$19.32	$0	$7.15
26	GABAPENTIN, 100 MG	PACK	BRAND	#30	$15.95	$11.65	$0	$4.31
27	DILANTIN, 100MG	PACK	GENERIC	#30	$9.69	$7.07	$0	$2.62
28	PREDNISONE, 200 MG	PACK	GENERIC	#30	$3.04	$2.22	$0	$0.82
29	LEVOBID, 0.375	PACK	BRAND	#30	$10.65	$7.66	$0	$2.99
30	ZITHROMAX, 250 MG	PACK	GENERIC	#30	$233.32	$203.33	$0	$29.99
31	SEREQUEL, 100 MG	PACK	BRAND	#30	$135.44	$36.84	$0	$98.60
32	SEREQUEL 200 MG	PACK	BRAND	#30	$255.50	$103.60	$0	$151.90
33	SEREQUEL 300 MG	PACK	BRAND	#30	$335.00	$78.54	$0	$256.46
34	RISPERDAL 1 MG	PACK	BRAND	#30	$136.55	$97.05	$0	$39.50
35	RISPERDAL 3 MG	PACK	BRAND	#30	$268.04	$218.54	$0	$49.50
36	RISPERDAL 4 MG	PACK	BRAND	#30	$360.02	$300.52	$0	$59.50
37	PAXIL CR 37.5 MG	PACK	BRAND	#30	$110.14	$76.57	$0	$33.57
38	PAROXETINE 40 MG	PACK	GENERIC	#30	$89.21	$75.87	$0	$13.34
39	ABILIFY 10 MG	PACK	BRAND	#30	$437.61	$191.26	$0	$246.35
40	LEXAPRO 10 MG	PACK	BRAND	#30	$95.48	$56.78	$0	$38.70
41	MIRTAZEPINE 15 MG	PACK	GENERIC	#30	$81.30	$72.88	$0	$8.42
42	MIRTAZEPINE 45 MG	PACK	GENERIC	#30	$85.53	$75.26	$0	$10.27
43	GEODON 40 MG	PACK	BRAND	#30	$197.15	$53.07	$0	$144.08
44	GEODON 80 MG	PACK	BRAND	#30	$239.25	$66.04	$0	$173.21
45	ROCEPHIN 1 GM VIAL (10 PACK)	VIAL	BRAND	#30	$47.05	$43.06	$0	$3.99
							GRAND TOTAL	$1,893.12

PRICING AND GRAND TOTAL AMOUNT IS FOR EVALUATION PURPOSES ONLY.

Vendor Name:___Westwood Pharmacy_____

WILLIAMSON COUNTY CONFLICT OF INTEREST STATEMENT

I hereby acknowledge that I am aware of the Local Government Code of the State of Texas, Section 176.006 regarding conflicts of interest and will abide by all provisions as required by Texas law.

Printed name of person submitting form: **Jake Pasternak**
Name of Company: **Westwood Pharmacy**
Date: **September 19, 2008**
Signature of person submitting form:

Notarized:

Sworn and subscribed before me **by:** Jacob Pasternak **on** 9-19-08 **(date)**.

CALVIN HOLMES
Notary Public
Commonwealth of Virginia
7101680
My Commission Expires Sep 30, 2011

Notary

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September 19, 2008

Williamson County Purchasing Department
Attn: Jonathan Harris, Suite 106, Williamson County Inner Loop Annex
301 SE Inner Loop
Georgetown, TX 78626

Dear Mr. Harris:

Westwood Pharmacy is an offeror for the attached proposal for the Provision of Pharmaceutical Service/Supplies for the Williamson County Jail (Proposal Number: 09WCAP100).

Westwood Pharmacy got its start over 50 years ago as a customer-oriented retail business. Westwood Pharmacy is currently providing pharmacy services to correctional facilities in eleven states. We have been recognized as one of the fastest growing national providers of comprehensive pharmacy services to correctional facilities. We are currently providing pharmaceutical services to Cameron County, Texas and have reduced their pharmacy spending. We ask you to please contact them for a reference and have included their contact information in our RFP response. We understand the objective of the services to be performed and will commit to performing the services within the time period specified. Additionally we will comply with all applicable laws in carrying out the contract.

Our staff members work very closely with the medical departments of our facilities, seeking methods to stretch budgets that are constantly being lowered by tighter financial times. These methods may include regular drug utilization reviews, formulary reviews, or physician consultations. We commit to offering your facility 24-hour service, 7 days a week, in addition to offering the services of a pharmacist who will be available by phone immediately. We are also offering your facility our WebConnect system, which will allow your facility to go online and gain access to real-time patient profiles, medication ordering, and drug monographs. We are confident that our firm can provide Williamson County with superior customer service, accessibility, and competitive pricing.

Westwood Pharmacy greatly appreciates the opportunity to bid on the enclosed proposal.

Sincerely,
Mark A. Oley, RPh

President
Westwood Pharmacy

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About Westwood Pharmacy

Westwood Pharmacy has been committed to the superior supply and delivery of pharmaceutical products, service, and support ***since 1966***. Our company has provided services to assisted living communities since 1994 and correctional facilities since 1997. We are the premier provider to Virginia's regional, city and county jails. We have been recognized as one of the fastest growing national purveyors of comprehensive pharmacy services to correctional facilities. In addition to these correctional facilities, our company is providing high quality pharmacy services to over 100 long-term care facilities on a daily basis. We also have a chain of numerous retail stores.

At Westwood Pharmacy, we are excited about the possibility of providing pharmaceutical services to your facility. We are confident that we will not only meet all your needs, but exceed your expectations regarding both price and service. Some highlights of our proposal include the following points:

Experience

- Over 50 years experience in providing pharmacy services
- Providing pharmacy services to correctional facilities in 11 states
- Largest provider of pharmacy services to Virginia's regional jails

Customer Service

- Dedicated clinical pharmacist, available 24 hours a day
- Quarterly inspections

Pricing

- Very competitive pricing
- Return credit

Reporting

- Can generate any report required or requested
- Database experts on staff
- Reports help keep track of drug spending
- Quick turnaround times

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Formulary Management

- Sample correctional formulary provided
- Monthly in-house P&T committee
- Westwood Pharmacy's President is a member of the Virginia Medicaid, Wellpoint, and Cigna P&T committees
- Will design a custom formulary specific to your facility

WebConnect

- Scanners provided for easy reorder of medications
- Barcodes provided on all orders
- Electronically submit new orders and refills
- View and print patient profiles
- Review drug monographs

ARMCOP (After Release Medical Care Outreach Program)

- Coupons for free 30, 60, to 90 day supply of medications upon release
- Provided free of charge to the facility
- Helps medicate inmate until insurance or Medicaid coverage

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Westwood Services Overview

Westwood Pharmacy has a unique blend of clinical, management, and technical staff to assure the highest quality of care. We have built a long-standing reputation of dedication to our community and of providing quality pharmacy services that can be tailored to fit the needs of any facility or organization.

Westwood Pharmacy's highly skilled nurse consultants and pharmacists provide experience in immediate and long-term care, consultation, medication management, IV services, CPR, first aid training, and risk management. In addition, our medical staff guarantees and provides prompt attention to the needs of facility staff, inmates, and all responsible parties 24 hours a day, 365 days a year.

Our staffing strategies ensure that clients receive consistency and quality in the delivery of all of our programs. We are experienced in making recommendations on how to store, order, and administer medications in the most effective and efficient way possible to ensure that every inmate is getting the maximum benefit from his/her medication.

Westwood Pharmacy prides itself on pharmacist oriented, rather than technician oriented, service within the pharmacy. All medication questions are promptly directed to our pharmacists who will be in full-cooperation with the facilities' primary health care team in a courteous, professional manner. All medication orders are double checked by a pharmacist for accuracy, drug interactions, and duplication of therapy prior to dispensing to any facility.

Our clinical pharmacists provide quarterly health care oversights to ensure compliance with all standards and regulations. We contribute to improving patients' health and well being by designing and organizing health care services that help people receive the appropriate care as needed.

The rising cost of pharmaceuticals is a pervasive topic in today's health care debates. With over 50 years of pharmacy experience, we have seen the implications of greater expenditures on pharmaceuticals first-hand. We understand the financial pressure weighing upon state and federal agencies to provide appropriate health care with a minimal amount of subsidized funds, using only those products that offer the greatest benefits for the lowest cost.

Yet while pharmaceutical products seem overly expensive, many have been proven to be the safest and most cost-effective way to improve patient health outcomes and reduce the total costs of health care. Nonetheless, pharmaceuticals must be carefully examined against each other and against other treatment modalities to determine which therapy is most appropriate.

Our staff uses appropriate clinical protocols, guidelines and resources to determine appropriate management procedures and drug formularies. A formulary can be used as a means to reduce medical costs, improve patient accessibility to quality health care and enhance their quality of life. Our Pharmacy and Therapeutics Advisory Committee continuously reviews the new medication and medical equipment approvals and

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updates the formularies to better serve a front line, first choice state-of-the-art healthcare.

Westwood Pharmacy provides an array of medical and pharmaceutical packaging systems including blister packages, designed for your convenience and to meet the needs of your facility. We ensure that all the inmates are be provided with medications that are accurately packaged and delivered in a timely manner with written medical information for the inmates on self-administration of medications. Should an emergency arise, we assure that pharmacy services will be provided 24 hours a day, 365 days a year. Our 24 hours on-call service gives the security of knowing that emergency pharmacy service is only a phone call away.

Westwood Pharmacy is large enough to provide every possible service, yet small enough to guarantee the highest quality of care, individual attention to primary health care staff and inmates, and accurate service in a timely fashion. We, at Westwood Pharmacy, take pride in fulfilling our professional commitments.

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Response to Specifications

Westwood Pharmacy, in compliance with the intent of Request for Proposal (RFP) to obtain Pharmaceuticals and Pharmaceutical Service/Supplies necessary for the acceptable performance of the contract requirements agrees to the following proposal specifications:

1. ***Proposer agrees and understands that the awarded proposer will be the principal source of supply for pharmaceuticals during the term of the contract. However, Williamson County reserves the right to purchase these products from other sources of supply in case of emergency or when the vendor is out of stock and it becomes necessary for Williamson County to support its immediate operational requirements.***

Westwood Pharmacy agrees and understands that we will be the principal source of supply for pharmaceuticals during the term of the contract if awarded the contract. Westwood Pharmacy will provide a pre-arranged backup pharmacy, as we do for all our facilities. The chosen pharmacy will be open twenty-four (24) hours a day, 365 days a year, and will be subject to approval by Williamson County.

2. ***All pharmaceuticals, chemicals, and drugs provided under this contract shall conform to the standards set by the Federal Food and Drug Administration and the latest editions of the US Pharmacopoeia, the National Formulary, or the American Medical Association's publication, New Drugs, where applicable, whether or not this is specially indicated in the specification or proposal. In cases of multi-source drug products, names of manufacturers must be listed in the current FDA of approved drug products with therapeutic equivalence evaluations publication.***

Westwood Pharmacy agrees to all terms and conditions in the above paragraph.

3. ***Supplier must hold approved New Drug Application (NDA) or Abbreviated New Drug Application (ANDA) for all products.***

Westwood Pharmacy holds approved NDA and ANDA for all products.

4. ***Supplier must be a licensed Medicaid vendor.***

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Westwood Pharmacy is a licensed Medicaid vendor.

5. ***Supplier must be an approved pharmacy by the Texas Department of Health/HIV program.***

Westwood Pharmacy will comply as an approved pharmacy by the Texas Department of Health/HIV program.

6. ***All products must be packaged in a manner that will afford reasonable protection against moisture and contamination at all times.***
    a. ***Supplier shall utilize blister packs for dispensing of medications.***

Westwood Pharmacy will also provide medication packaging and administration systems suitable for the established programs of medication administration used in this correctional facility with clearly visible and legible labels. Every prescription or individual over-the-counter medication will be dispensed in blister packaging with a label affixed adhering to all regulations for labeling.

b. ***Labels shall be affixed to the blister packs and the Medication Administration Record (MAR). Labels shall contain all the necessary information required by law as well as the inmates housing unit and date of birth.***

Westwood Pharmacy will affix labels to the blister packs and MARs, and the labels will contain all the necessary information required by law as well as the inmates housing unit and date of birth.

c. ***Supplier shall furnish Keep on Person (KOP) medications in approved containers and label them as such.***

Westwood Pharmacy will furnish Keep on Person medications in approved containers and label them as such.

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d. ***Supplier shall furnish the County with four (4) medication carts for the dispensing of medications at no additional cost to the County.***

Westwood Pharmacy will furnish the County with four medication carts at no additional cost to the County

.

e. Supplier shall have ability to provide a stock-medication type inventory.

Westwood Pharmacy has the ability to provide a stock-medication type inventory.

f. Protocols must be updated often to stay abreast of community standards.

Our Pharmacy and Therapeutics Advisory Committee continuously reviews the new medication and medical equipment approvals and updates the formularies to better serve a front line, first choice state-of-the-art healthcare.

g. Supplier shall provide an on-call Pharmacist for emergencies at no additional charge to the County. The on-call Pharmacist shall be available 24 hours per day, seven days a week, 365 days per year.

Westwood Pharmacy will provide a consultant pharmacist that will be available to professionals at the Williamson County Jail by telephone or paging system on a twenty-four (24) hour, seven (7) day a week basis.

7. Unless exceptions are made, such as for biological, all shipments of pharmaceutical products, which incur expiration dates, must have a minimum of one-year dating as of delivery.

Westwood Pharmacy will provide pharmaceutical products that have a minimum of one-year dating as of delivery unless exceptions are made.

8. Items meeting the following criteria shall be exchangeable or creditable at the contracted price.

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a. Trademarked items in original unopened package in accordance with the vendor's return goods policy. Vendor shall provide a copy of the return goods policy.

b. Non-trademarked items in original unopened packages, in accordance with the vendor's return goods policy.

c. Outdated biological products returned within one year after expiration date.

d. Any product that arouses questionable physical properties or therapeutic activities. The County reserves the right to return such product to the vendor for credit or immediate replacement. Return of such products shall not require prior notification to the vendor, and shall be returned at the vendor's expense.

Westwood Pharmacy agrees to the preceding criteria in determining whether returns are exchangeable or creditable. Westwood Pharmacy will provide the Williamson County Jail Authority with labels that can be used to return unused medications. A schedule for shipping returns will be established with your facility. All shipping costs will be billed to Westwood Pharmacy at no cost to the Williamson County Jail Authority. After receiving the returned partial or full blister package of unused medication, we will issue credit at 100% of the billed amount, provided the medication is not within one month of expiration. This amount will appear on a subsequent invoice as credit.

9. ***The County reserves the right to submit samples of products of doubtful potency or composition to a competent independent laboratory for assay, and in such cases, the cost of such assay will be paid by the supplier if products are found to be below US Pharmacopoeia, National Formulary, or Federal Standards.***

Westwood Pharmacy acknowledges the right of Williamson County to submit questionable samples to an independent laboratory. In such a case where products are found to be below standard, Westwood Pharmacy will pay for any cost incurred in the analysis of samples.

10. ***Final inspection of all products and decision of acceptance or rejection will be made by the County. Final inspection shall be conclusive except with respect to latent defects, fraud, or such gross mistakes as shall amount to fraud. Final inspection resulting in acceptance or rejection of the products will be made as soon as practicable, but failure to inspect shall not be construed as a waiver by the County to claim reimbursement or damages***

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for such products which are later found to be in nonconformance with specifications.

Westwood Pharmacy agrees to the preceding terms and conditions regarding final inspection.

11. ***The County shall be billed on a monthly basis. The billing procedures shall allow for separate billing for inmates that are identified as I.N.S. or U.S. Marshall inmates and that billing should go directly to the respective agency.***

Westwood Pharmacy will bill the Williamson County on a monthly basis. Any costs for medications provided to I.N.S. or U.S. Marshall inmates will be billed to the respective agency.

12. ***Separate itemized billing and credit invoices, on-line or computerized program for billing and credits computerized inventory control in addition to on-line ordering must be provided and should be used for invoice reconciliation. In addition, the Williamson County Jail must be notified via e-mail and/or fax prior to shipment of partial orders. The email or gac must list what item(s) and quantity(s) are not being shipped and when these item(s) will be available for shipment to complete the order.***

Westwood Pharmacy agrees to the above request for invoicing as well as notification to Williamson County Jail should items ship incomplete due to vendor backorders.

13. ***Inventory must be controlled by scanning orders for delivery and return.***

Westwood Pharmacy offers scanning capabilities as a standard feature of WebConnect.

14. ***Supplier shall have the ability to generate the following reports:***

    a. ***Tracking of usage of medications by inmate, specific doctor, or specific medication.***
    b. ***On-line invoicing***
    c. ***Itemized incoming deliveries***
    d. ***On-line credits and on-line returns***
    e. ***Overall credit % per time period requested***

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Westwood has the ability to generate all of the preceding reports.

Westwood Pharmacy, with database experts on staff, will be able to generate any report requested by Williamson County. Westwood Pharmacy custom designs reports for all its facilities. If a custom designed report is needed, please contact Jake Pasternak and he will ensure that the utilization staff designs a report to your facility's specifications. We provide scheduled monthly formulary management reports and proper invoicing and printouts to facilitate full reconciliation of charges.

Sample reports are included in the section labeled "Sample Reports." The data for these reports were derived by combining patient profiles from several of our facilities. Therefore, the data are real, but not attributable to any one facility that we serve. The Excel files used to create the sample reports in this proposal are included on a cd inserted in the inside front pocket of each binder included for consideration of this proposal.

Our pharmacy uses Crystal Reports to custom design reports for our facilities. We can work collaboratively with your medical staff to redesign our reports and improve the transparency of medication ordering and management. Samples of Crystal Report documents are included in this proposal in the section entitled, "Sample Reports."

15. A computerized program interface linking the Williamson County Jail to the supplier must be available. Provide a detailed description of interface including any software and/or hardware that is required. If software and/or hardware are required, state whether it will be provided by the supplier or must be provided by the County.

Westwood Pharmacy will offer Williamson County WebConnect. WebConnect is offered exclusively through Westwood Pharmacy. Westwood completely automates the prescribing process. Below are a few of the features Web Connect offers:

1. Allows your facility to order New and Refills orders
2. Allows the jail to check drug to drug interactions
3. Real Time Mars-Through bar-coding and scanning
4. DC orders and release inmates
5. Check Drug to Drug interactions
6. Send Notes to the Pharmacy
7. Eliminates Handwriting MAR's

The only hardware required is a computer with a high speed internet connection, and handheld scanners, both of which will be supplied by Westwood Pharmacy.

16. Supplier shall provide on-site quarterly inspections by a registered Pharmacist at no additional charge to the County.

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Westwood Pharmacy will provide at a minimum, quarterly inspections of the Williamson County Jail facility area designated as the pharmacy storage to insure the proper storage of medication, medication procedures and compliance with federal and state regulations and compliance with National Commission on Correctional Health Care and American Correctional Association standards; drug security, drug storage and expiration date compliance and compliance with Pharmacy Policies and Procedures.

17. ***Award of Proposal, if any, will be made to the responsive or responsible Pharmaceutical Supplier submitting the lowest cost proposal consisting of the current average wholesale price (AWP) minus percent (%) discount plus dispensing fee (if applicable).***

    Our proposed price of services for the provision of this contract is as follows:

    For Brand Medications: **AWP less 20% with no dispensing fee**

    For Generic Medications: **AWP less 75% with no dispensing fee**

    This bid pricing is all-inclusive and contains all services with no extra charges for the forms, packaging, or the other services that will be provided by Westwood Pharmacy during the life of the contract.

18. ***Proposers overall mark-up prices shall include cost of shipping and delivery of the pharmaceutical item to the designated delivery point and shall not include Federal or State of Texas sales, excise, and use taxes.***

Westwood Pharmacy will incur all shipping costs due to the execution of this contract and will not include Federal or State of Texas sales, excise, and use taxes.

19. ***Proposer shall provide three (3) price list copies with their proposal.***

Westwood Pharmacy has provided three price list copies with our proposal (one in each copy of the proposal).

20. ***The preferred order method for new prescriptions and refills shall be online, however, orders placed by fax or phone shall be accepted. Additionally, emergency "stat" ordering shall be done by phone.***

Westwood Pharmacy agrees that the preferred order method for new prescriptions and refills shall be online, however, orders placed by fax or phone shall be accepted. Additionally, emergency "stat" ordering shall be done by phone.

21. ***Delivery of all items supplied under this contract shall be made FOB destination. The proposer shall provide next day delivery for all items ordered by 4:00 PM the previous day. Deliveries shall be made Monday***

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through Saturday. Orders received by vendor on Saturday shall be delivered on Monday.

Westwood Pharmacy will ship orders next day air. Orders placed before 4:00 p.m. will be received before 10:30 a.m. the following day, excluding Sundays.. Westwood Pharmacy and the backup pharmacy will be open seven (7) days a week. Any emergency medication orders that cannot wait until Monday will be filled through the backup pharmacy.

22. Supplier will be required to maintain all records for five years.

Westwood Pharmacy agrees that we shall maintain all records for five years in our electronic as well as paper data warehouse.

23. The proposer's representative must be available to respond to all calls from the using county agencies to assist in filling emergency orders, resolving complaints and problems regarding orders and deliveries and the return of goods.

Westwood Pharmacy provides a representative, Hunter Hoggatt, that will respond to all calls about pharmacy services. Mr. Hoggatt's contact information is listed below.

24. ***The proposer shall provide a local telephone number or a toll free number from Georgetown, Texas for the placement of calls against this contract and shall provide the name, title, and telephone number of a representative who may be contacted and available to provide around-the-clock, 24- hour, 7-days a week, customer service. Telephone numbers provided for this purpose shall not be serviced through an answering machine or other automatic answering device, or in any manner to impede immediate access to a representative capable of addressing emergencies and problems.***

Westwood Pharmacy Contact Name:

Hunter Hoggatt

Phone Number: (866) 996-7379

Emergency Order Phone Number: (804) 519-3383

Fax Number: (866) 288-6707

25. If the proposer cannot provide a certain medication to the Williamson County Jail, the proposer will contact the back-up pharmacy to have the

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medication filled and have the payment arrangements handled by the approved vendor.

26. ***All orders will be placed through the issuance of a purchase order. The purchase order must be referenced on all invoices submitted to Williamson County.***

Westwood Pharmacy will reference the purchase order on all invoices submitted to Williamson County.

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Contractor Background Information

Westwood Pharmacy has been committed to the superior supply and delivery of pharmaceutical products, service, and support ***since 1966***. Our company has provided services to assisted living communities since 1994 and correctional facilities since 1997. We are the premier provider to Virginia's regional, city and county jails. We have been recognized as one of the fastest growing national purveyors of comprehensive pharmacy services to correctional facilities. In addition to these correctional facilities, our company is providing high quality pharmacy services to over 100 long-term care facilities on a daily basis. We also have a chain of numerous retail stores.

We also currently hold SWAM certification with the Virginia Department of Minority Business Enterprise (SWAM# 668868).

A sample listing of our correctional facilities is outlined in the table below. For each of these facilities, we provide pharmacy services.

Facility	ADP	Year Started	Address	Phone	Contact Name
Cameron County Jail, TX	2,400	2007	7100 Old Alice Road Olmito, TX 78575	(956) 465-8888	Dean Garza Mike Leinhart Omar Lucia
Weber County Jail	1,100	2006	721 W. 12th Street, Ogden, UT 84404	(801) 778-6702	Julie Richesson
Middle River Regional Jail	750	2005	350 Technology Dr. Staunton, VA 24401	(540) 245-5420	Jack Lee, Superintendent
Richmond City Jail	2,000	2004	1701 Fairfield Way, Richmond, VA 23223	(804) 780-8630	C.T. Woody, Sheriff
Henrico County Sheriff's Office East/West	1,200	2000	4301 East Parham Rd Richmond, VA 23273	(804) 501-5860	Mike Wade, Sheriff
Rappahannock Regional Jail	1,100	2000	1020 Lafayette Blvd, Fredericksburg, VA 22401	(540) 371-3838	Joe Higgs, Superintendent
Western Tidewater Regional Jail	800	2004	2402 Godwin Blvd, Suffolk, VA 23434	(757) 539-3119	Bobby Dematteo, Medical Director
Barnstable County Correctional Facility	700	2005	6000 Sheriff's Place Bourne, MA 02532	(508) 563-4300	Lt. Kathy Porteous
Newport News City Jail	850	2005	224 26th St. Newport News, VA 23607	(757) 926-8165	Lt. Col. Sprinkle

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Piedmont Regional Jail	850	2003	676 Industrial Park Rd Farmville, VA 23901	(434) 392-1601	Lewis Barlow, Superintendent
Albemarle Charlottesville Regional Jail	550	2004	160 Peregory Lane Charlottesville, VA	(434) 977-6981 x224	Dr. Juanita Morris, Medical Director
Petersburg City Jail	300	2006	40 Henry Street Petersburg, VA	(804) 733-2369	Vanessa Crawford, Sheriff
Culpeper County Jail	125	2003	131 W. Cameron St. Culpeper, VA	(540) 727-3434	Karen Roberts, Medical Director
Northern Neck Regional Jail	450	2002	3908 Richmond Road Warsaw, VA	(804) 333-6914	Ted Hull, Deputy Superintendent
New River Valley Regional Jail	550	2002	104 Baker Road Dublin, VA	(540) 643-2000 X2238	Jennifer White HSA
Pamunkey Regional Jail	450	2003	7240 Courtland Farm Rd., Hanover, VA	(804) 537-6400	Sheri Wilson, HSA
Chesterfield County Jail	300	2005	P.O. Box 7 Chesterfield, VA	(804) 768-7325	Dr. Mantovani Gay, Medical Director
Central Virginia Regional Jail	450	2006	13021 James Madison Highway Orange, Va 22960	(540) 672-3222	Major Susan Fletcher
Peumansend Creek Regional Jail	300	2007	1103 Jefferson Davis Highway Bowling Green, VA 23434	(804) 633-0043	Diane Purks, HSA
Middle Peninsula Regional Jail	400	2007	PO Box 403 Saluda, VA 23149	(804) 758-2338	Terry Haywood, HSA
Baldwin County Jail	700	2007	201 Hand Ave. Bay Minette, AL	(251) 580-2529	Carla Wasdin, HSA
Hendry County Jail	350	2007	101 S. Bridge St. Labelle, FL 33975	(863) 674-4060	Major Susan English

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Facilities which are ACA Accredited:

- Northern Neck Regional Jail
- Henrico County Jail East
- Henrico County Jail West
- Middle Peninsula Regional Security Center
- Pamunkey Regional Jail
- Peumansend Creek Regional Jail

Company Achievements

- Largest provider of pharmacy services to Virginia correctional facilities
- Nation's leading provider to Virginia City, County, and Regional Jails
- Providing pharmacy services in 11 states
- 100% success in contract renewals, indicating customer satisfaction with our services provided
- Established a program (ARMCOP) to provide medications to inmates once they are released from jail
- Assisted facilities in achieving and maintaining ACA and NCCHC accreditation
- Successfully deployed technology enabling facilities to electronically order medications and keep track of patient profiles

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Experience and Staffing

The primary individuals responsible for implementing the contract are Mark Oley, Jake Pasternak, Hunter Hoggatt, Shannon Dowdy and Jill Hoggatt. A brief description of their roles and experience are detailed below:

- **Mark Oley, RPh., CEO & President**

  Mr. Oley is the CEO/President and founder of Westwood Pharmacy. Mr. Oley has a long and distinguished record of accomplishments in the pharmacy and correctional industry. Mr. Oley's company is currently the largest supplier of pharmacy services to Virginia's City, County, and Regional Jails. He has expertise in the pharmacy industry in several capacities (Retail, Assisted Living, Long Term Care and Corrections). Mr. Oley currently is owner of several pharmacies throughout the Richmond area. A list of some of Mr. Oley's accomplishments are listed below:

  - 1998 to 2002: Virginia Board of Pharmacy. (Governor Appointed Position)
  - 2002 to 2006: Reappointed to the Virginia Board of Pharmacy
  - 2002 to 2003: Vice Chair of the Virginia Board of Pharmacy
  - 2004 to 2006: Virginia Board of Pharmacy Chairman
  - 2003 to Present: Committee Member of the Medicaid Preferred Drug List (Governor Appointed Position)
  - 2004 to Present: Vice Chair of the Medicaid Preferred Drug list
  - 1998 to 2006: Member of the National Board of Pharmacy
  - 2000 to 2004: Member of Anthem National Pharmacy and Therapeutics Committee
  - 1999 to 2003: Member of Cigna National Pharmacy and Therapeutics Committee
  - 1999 to 2004: Member of Board of Governors for American Pharmacy Association Political Action Committee
  - 1997 to 2000: Board Member; Legislative Affairs for Commonwealth of Virginia
  - Publications: " The management of lower-extremity diabetic ulcers."
  - 1987- 1994; Consultant to Virginia Home for Boys
  - 1999-present: Clinical Assistant Professor, School of Pharmacy (Virginia Commonwealth University)

  Mr. Oley received Bachelor of Science in Pharmacy from Philadelphia College of Pharmacy and Science (Philadelphia, PA)

- **Jake Pasternak, CFO**

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Mr. Pasternak is responsible for the accounting and utilization departments of Westwood Pharmacy. Any requests for reports or billing inquiries should be directed to Mr. Pasternak, and he will ensure our staff will get your facilities the information you need. He has a strong background in Finance and Economics. He has a Masters Degree in Economics with a minor in Statistics from North Carolina State University and has Ph.D. level training in health economics at UNC and Duke.

- **Hunter Hoggatt COO/National Account Manager**

  Mr. Hoggatt is responsible for all activities associated with Westwood Pharmacies business development. He has a central role in ensuring effective company growth and establishing a satisfied client base. Mr.Hoggatt's departments consistently focus on understanding and supporting customer relations while developing solutions to meet clients' budget objectives. His team is responsible for making sure that all contracts have a smooth transition upon implementation. Mr. Hoggatt has helped guide Westwood Pharmacy to become the largest provider of pharmacy services to Virginia's City, County, and Regional jails as well as providing comprehensive pharmacy services to seven states throughout the United States. Mr. Hoggatt received his BA degree with a major in business from the Virginia Commonwealth University.

- **Shannon Dowdy, Pharm.D, Director of Pharmacy**

  Dr. Dowdy is responsible for all aspects of Westwood Pharmacy's program, including operations and procedures related to formulary management, as well as serving as Vice Chair of our Pharmacy & Therapeutics Committee. Shannon supervises the National Commission on Correctional Health Care (NCCHC) and American Correctional Association (ACA) accreditation process for Westwood Pharmacy.

  Dr. Dowdy has extensive experience in the clinical manifestations of HIV/Aids and how to help manage the virus. Dr. Dowdy spent one year at Duke University working with patients who had tested Positive for HIV. One of Dr. Dowdy's roles at Duke University was to discuss the patients antiretroviral therapy with the physician and then with the patient to be sure that they understood their drug regimen, dosing schedule, side effects and the importance of adherence to the medications. She would also schedule and clinically prepare for follow-up visits based on lab results.

  Dr. Dowdy's clinical focus is currently on HIV/AIDS in the Correctional Environment. She offers all of our facilities in service training on HIV/AIDS.

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Dr. Dowdy oversees all inspections for Westwood Pharmacy. She strives to make sure all facilities meet DOC, NCCHC, and ACA inspections standards with regards to medical and pharmacy.

- **Jill Hoggatt, Regional Account Manager/Operations Support**

  Ms. Hoggatt is very involved in day to day operations at Westwood Pharmacy. Jill is responsible for day to day communications between Westwood Pharmacy and the facility's medical staff. Ms. Hoggatt is a graduate from Radford University with a degree in Communications with a minor in Public Relations.

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Curriculum Vitae

Mark A. Oley

EDUCATION

1983	Bachelor of Science in Pharmacy Philadelphia College of Pharmacy and Science Philadelphia, Pennsylvania

PROFESSIONAL EXPERIENCE

1983 – present	President, Owner and Pharmacist Pharmacy, Inc. Westwood Pharmacy 5823 Patterson Avenue Richmond, VA
1997 – present	President and Owner Westwood Clinical Services, Inc. 5823 Patterson Avenue Richmond, VA
1997 – present	Owner, Consultant and Pharmacist Cedarfield Pharmacy 2300 Cedarfield Parkway Richmond, VA
1989 – present	Owner Lee Davis Pharmacy 7023 Lee Park Road Richmond, VA
1989 – present	Owner Westbury Apothecary 7702 East Parham Road Richmond, VA

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COMMITTEES

2004 – 2007	Chair, Virginia Board of Pharmacy (Appointed by Governor Warner)
2003 – present	Member, Medicaid Preferred Drug List (PDL) Committee (Appointed by Governor Warner)
2003 – present	Board Member, American Heart Association
2000 – present	Member, Wellpoint (formerly Trigon) BCBS Pharmacy and Therapeutics Committee
1999 – present	Member, Virginia Board of Disciplinary Hearings for the Commonwealth of Virginia
1999 – present	Member, National Association of Boards of Pharmacy
1998 – 2007	Member, Virginia Board of Pharmacy
1999 – present	Member, Advisory Committee of American Lung Association
1999 – 2004	Member, Board of Governors for American Pharmacy Association Political Action Committee
1987 – 1994	Consultant to Virginia Home for Boys
1997 – 2002	Member, Cigna Regional Pharmacy and Therapeutics Committee
1997 – 2000	Member, Board of Legislative Affairs for Commonwealth of Virginia
1997 – 2000	Member, American Arthritis Foundation

PUBLICATIONS

Gonzalez ER, Oley MA. The management of lower-extremity diabetic ulcers. *Manag Care Interface*. 2000 Nov;13(11):80-7.

PRESENTATIONS

"Applying outcomes research templates to identify undiagnosed hypertension, hypercholesterolemia, and diabetes for the development of a targeted disease management program for an employer group." Oley MA, Teat RD, Ostrosky JD. 1999 Annual Meeting of the Academy of Managed Care Pharmacists. Atlanta, GA. October 16, 1999.

HONORS AND AWARDS

Merck and Company, Inc. Award for Outstanding Service

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PROFESSIONAL SOCIETIES

Academy of Managed Care Pharmacy

American Pharmaceutical Association

Virginia Pharmaceutical Association

National Association of Community Pharmacists

National Association of Boards of Pharmacy

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ACADEMIC APPOINTMENTS

1999 – present Clinical Assistant Professor
School of Pharmacy
Virginia Commonwealth University
Richmond, VA

RESIDENCY PROGRAM

Major Preceptor, Commonwealth Health Benefit Management Residency Program
Specialized residency in managed care
Resident: Roderick D. Teat, Pharm. D. (1998-1999)

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SHANNON DOWDY, PharmD

EDUCATION

1998-2003	School of Pharmacy Campbell University Buies Creek, North Carolina Doctor of Pharmacy
1995-1998	Virginia Commonwealth University Richmond, Virginia Pre-Pharmacy Program

PROFESSIONAL ACTIVITIES

Presentations

2003	"Antiarrhythmic Pharmacotherapy in the New Millennium" Campbell University Doctor of Pharmacy Program
2002	"The Variability of Asthma" Glaxo Smith Kline Doctor of Pharmacy Program
1999	"Disease State Management" Scientific Literature Seminar Pharmaceutical Sciences Program
1998	"Zinc Gluconate for the Treatment of the Common Cold in Children" Scientific Literature Seminar Pharmaceutical Sciences Program

Research

2001-2003	"Patient Satisfaction With Pharmaceutical Services In A Retail Pharmacy Setting" Campbell University School of Pharmacy Research Coordinator

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Certifications

2004	Pharmacy-based Mass Immunization Certification Virginia Pharmacists Association

Professional Affiliations

2004	Virginia Pharmacists Association
2000-2003	North Carolina Association of Pharmacists Education Council (2000-2003)
2000-2003	Phi Lambda Sigma Pharmacy Leadership Society
1999-2003	Academy of Students of Pharmacy President (2001-2003) President Elect (1999-2000) Director, Patient Counseling Competition (2000) Representative, Bristol-Myers Squibb Leadership Institute (2000)
1999-2003	Student Society of Health-System Pharmacy Campbell University Chapter

WORK EXPERIENCE

May 2003 – Present	**Clinical Pharmacist** **Director of Pharmacy** Westwood Pharmacy Clinical Services Richmond, Virginia
Oct 1999 - May 2003	**Pharmacy Technician** CVS Pharmacy Dunn, North Carolina Raleigh, North Carolina Enter prescriptions and new customer information into the computer. Transmit third party billing via computer and help with ordering and stocking inventory.

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Dec 1995 - May 2003

Pharmacy Technician
Westwood Pharmacy
Richmond, Virginia

Assist pharmacist with refilling prescriptions and entering new prescriptions. Handle ordering and stocking inventory. Transmit third party billing, and filing of completed prescriptions.

Sept 1994 – Dec 1995

Pharmacy Technician
Beaverdam Pharmacy
Beaverdam, Virginia

Helped Pharmacist with prescription refills, entering new customer information in the computer, and third party billing.

AWARDS AND HONORS

2004

Outstanding Pharmacist Award
Westwood Pharmacy

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Jacob I. Pasternak

EXPERIENCE

Chief Financial Officer – Westwood Pharmacy, Richmond, VA. April 2004 to present

- Oversee the accounting and utilization departments
- Ensure accurate medication pricing and billing.
- Maintain vendor relationships.

Senior Economist – Chmura Economics and Analytics, Richmond, VA. April 2002 to April 2004.

- Responsible for econometric modeling and forecasting for the firm.
- Forecasted the impacts on the local economy for a proposed $80 million development on Browns Island. Results of the forecasts were presented to Richmond City Council and the development was approved.
- Critically assessed the methodology used by the State Council of Higher Education (SCHEV) for Virginia to project student enrollments and provided updated enrollment demand forecasts. Results were used as a basis for SCHEV's long-range planning.
- Estimated the savings to residential electricity customers in Virginia due to a legislatively imposed freeze on rates. Answered questions about the study at a General Assembly committee hearing. Savings estimates were the subject of a press release by Dominion Virginia Power.
- Created the methodology for several key components of the firm's economic development and workforce software, JobsEquilbrium.com.
- Provided economic commentary to various media outlets including Reuters, WRVA-1140, and the Richmond Times Dispatch.
- Prepared long-range sales forecasts for construction aggregates to support Luck Stone's strategic planning.

Visiting Professor – University of Richmond, August 1999 to May 2002.

- Courses taught included Economic Analysis for MBA students, Business Statistics, Quantitative Methods for Business, Macroeconomics, and Environmental Economics.
- Helped design content for the new Environmental Studies Program.

Research Assistant – North Carolina State University, August 1996 to May 1999.

- Worked on a cooperative research project evaluating cost-effectiveness of animal waste treatment system components.
- Created a user-friendly Excel workbook to assist policymakers and farmers in choosing the optimal sequence of waste treatment technologies based on conditions at a particular site.

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EDUCATION

ABD in Economics, North Carolina State University.
Completed all coursework for Ph.D. and passed the preliminary examinations Health Economics Ph.D. sequence at Duke and UNC.

Master of Economics, North Carolina State University, December 1995.
Minored in Statistics

Bachelor of Business Administration, James Madison University, May 1992.
Majored in Economics, History Minor, graduated Magna Cum Laude

SOFTWARE SKILLS

IMPLAN, SQL Server, RATS, STATA, Clustan, Excel, Crystal Reports, Access, Word, and PowerPoint.

Affiliations and Professional Activities

Beta Gamma Sigma, National Association for Business Economists, Richmond Association for Business Economists

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References

Dean Garza
HSA
Cameron County Jail
7100 Old Alice Road
Olmito, TX 78575
(956) 465-8888
(956) 554-6790

Mike Leinhart
Jail Administrator
(956) 554-6701

Omar Lucio
Sheriff
(956) 554-6700

Lt. Kathy Porteous
Barnstable County Correctional Facility
6000 Sheriff's Place
Bourne, MA 02532
(508) 563-4300

Ted Hull
Northern Neck Regional Jail
3908 Richmond Road
Warsaw, VA 22572
(804) 333-6419
(804) 333-6029 (fax)
Ted Hull is the Deputy Superintendent of the Northern Neck Regional Jail.

Mike Wade, Sheriff
Henrico County Sheriff's Office Jail System
4301 East Parham Road
Richmond, VA 23228
(804) 501-5860
(804) 501-5443 (fax)

Julie Richardson
Weber County Jail
721 W. 12th Street
Ogden, UT 84404
(801) 778-6702
(801) 778-6784

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Jack Lee
P.O. Box 2744
Staunton, VA 24402
(540) 245-5420
Jack Lee is the Superintendent of the Middle River Regional Jail.

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Cost Savings Incentives

One of the measures of success that we use to determine how well we are doing on a new contract is to calculate how much we have saved the facility over the previous vendor. In some cases, we have saved facilities over 50% in their pharmacy bill. Part of the savings is due to lower unit prices, but a large part of savings is to identify areas for therapeutic substitution that enables the lowering of medication costs. Below we have listed some areas where we create cost saving incentives for your facility.

Credits

Westwood Pharmacy will provide 100% credit on any full or partial blister cards that are returned as allowed by law, provided they are not within one month of expiration date.

WebConnect

WebConnect is our electronic patient ordering and profile system. Through the use of WebConnect your facility can reduce costs by:

- Prescribing new orders on line
- Refilling orders on line
- No need to handwrite MAR's
- Notify of drug to drug interactions at time of order entry
- Reduce drug errors

Formulary Management

Westwood Pharmacy provides your facility with a standard correctional formulary. Upon implementation of the contract, we can meet with your medical staff to revise the formulary and tailor it specifically to your facility. At Westwood Pharmacy, we conduct monthly Pharmacy & Therapeutics Committee meetings where updates to the formulary are considered. We encourage the attendance of your physicians at our P&T meetings.

Westwood Pharmacy's Founder, Mark Oley, has been a member of the following P&T Committees: Virginia Medicaid, Anthem, and Cigna. Mark brings his experience with outside P&T Committees to the monthly P&T Committee meetings at Westwood Pharmacy. Mark and/or Shannon will be happy to participate in with your facility's P&T Committee.

Westwood Pharmacy has had great success with implementing formularies at our facilities. The best way to implement the formulary is to have the physicians on board during the development of the formulary. By meeting with the physicians and creating formularies we have saved the majority of our jails over 20% in their prescription costs.

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We have included a sample of our Correctional Formulary in this proposal.

Prior Authorization

Westwood Pharmacy will provide your facilities with a Prior Authorization Form for ordering non-formulary medications. On this form, the Doctor will document why a non-formulary medication is being ordered. This form will then be faxed with the medication order to our facility. Any non-formulary medications will be billed at the same contract rate as formulary medications. This system of "Preauthorization" will be customized for your facility.

Inexpensive Medical Supplies

We stock a complete line of medical supplies that we can ship with your daily order. We offer very competitive pricing on medical supplies due to the discounts we are able to negotiate with suppliers.

Use of Generics

To lower the impact of drug prices on your budget, generics will be used whenever possible unless the doctor writes "dispense as written."

In-house IV and Specialty Pharmacy

By having in-house IV and specialty pharmacy services, we are able to provide these supplies and services at very competitive rates.

Monthly/Quarterly Analysis of Pharmacy Expenditures

Our team of pharmacists and utilization staff will provide the Williamson County Jail with monthly and quarterly reviews of pharmacy expenditures and utilization. We can offer recommendations on therapeutic substitution that will lower your pharmacy bill.

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WebConnect

Westwood Pharmacy will offer the Williamson County Jail WebConnect. WebConnect is offered exclusively through Westwood Pharmacy. Westwood completely automates the prescribing process. Below are a few of the features Web Connect offers:

- Allows your facility to order New and Refills orders
- Allows the jail to check drug to drug interactions
- Real Time Mars-Through bar-coding and scanning
- DC orders and release inmates
- Check Drug to Drug interactions
- Send Notes to the Pharmacy
- Eliminates Handwriting MAR's

Provide a safe and secure connection between your pharmacy and local LTC facilities with QS/1®'s WebConnect. The browser-based software helps pharmacies provide LTC facilities with secure access to their patients' medication information. The electronic access can improve patient safety, and both pharmacy and LTC facility productivity and efficiency.

Easy to Use

The easy-to-use browser based software allows authorized LTC facility employees to access, search, edit and print medication information quickly and easily. And WebConnect users have fast access to Help menus and 24/7 access to online tutorials and training materials.

Increase Access

Give LTC facilities the ability to access pharmacy data, submit new orders and refills, view the patient billing matrix and check on the status of deliveries. Facilities can also generate destruction reports with pre-populated prescription information.

Safe and Secure

WebConnect helps ensure patient information is shared only with authorized facility staff. Secure facility level logons control access and protect electronic patient data.

System Integration

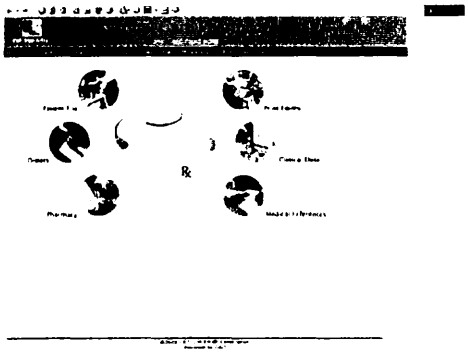
WebConnect connects the LTC facility to the PrimeCare® pharmacy management system.

- *Share data electronically between the pharmacy and facility*
- *Improve your level of customer service by providing access to facility-specific patient data*
- *Allow facilities to electronically submit new or refill medication orders that flow directly into the pharmacy filling queue*
- *Give facilities access to view their patient billing matrix*
- *Generate destruction reports with pre-populated prescription information*
- *Improve patient safety by reducing faxed refill orders*
- *Take advantage of wireless bar code scanning technology for safety and efficiency*

QS/1

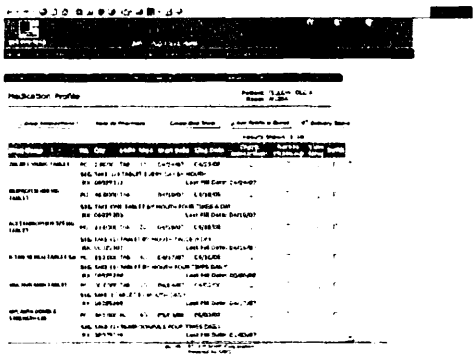
1-800-231-7776
www.qs1.com

Facility Access



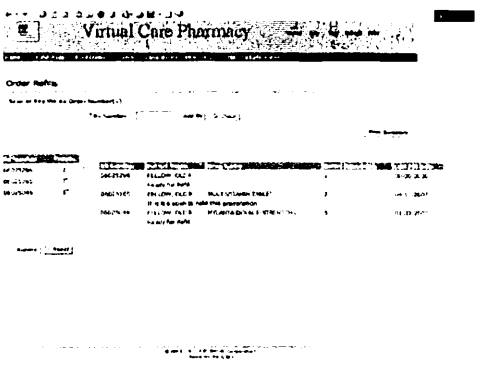
- Facility nurses can add, update or view new patients
- Look up patient active medication profiles
- Order new or refill medications
- View the patient billing matrix
- Print patient education monographs
- Check delivery status
- Receive deliveries
- Check for drug interactions
- View geriatric precautions

Facility Reporting



- Display and print refills submitted report
- Display and print report of daily facility deliveries
- Generate destruction reports with pre-populated information based on prescription data

Safe and Secure



- Control access with a secure facility-specific logon and pass code
- Patient information is only shared with authorized facility staff
- Establish intranet- or Internet-based communication between the LTC facility and pharmacy
- Utilize wireless bar code scanning technology for refill orders and delivery reconciliation

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ARMCOP (After Release Medical Care Outreach Program)

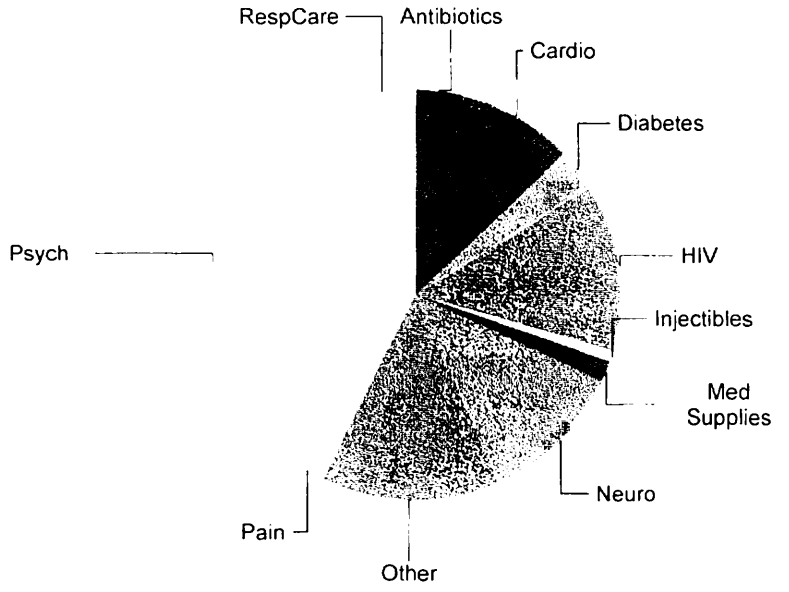
ARMCOP is a value added service offered exclusively by Westwood Pharmacy to the correctional facilities. By this program, we target the continuity of medical care for chronic diseases after the inmate's release. Jill Hoggatt, the manager of the program will be the liaison between the Medical Department of your facility and the pharmaceutical companies in order to provide a supply of chronic medications to the inmates after their release. She will make every good faith effort to supply the maintenance medications through our pharmaceutical industry partners in the following categories: Antipsychotics, diabetic, anticonvulsants, antidepressants, and HIV medications. ARMCOP is not just a humane effort to keep the individuals healthy. By providing maintenance medications without interruption, it is more likely that the individuals will avoid committing crimes and imprisonment through this service. This program is offered without any additional cost to all of our correctional facilities as a hallmark of our dedication to the community and correctional industry.

To give your facility an example of how ARMCOP is used, we offer a card for a free 30-day supply of blood pressure medicine. Upon release, a doctor at your facility would give an inmate the card, and the inmate can take the card to any pharmacy to get it filled for free. This will help ease the inmate's transition to Medicaid or third party insurance. If the inmate returns to your facility in the future, the inmate's baseline health will be much better than if he or she did not have access to these medications. This is just a sample of the dozens of medications that we have secured or are in the process of securing for released inmates. As we receive these coupons and cards, we will supply them to your facility at no cost.

Sur nary Utilization Report

February 2007 through January 2008

Spending by Drug Category



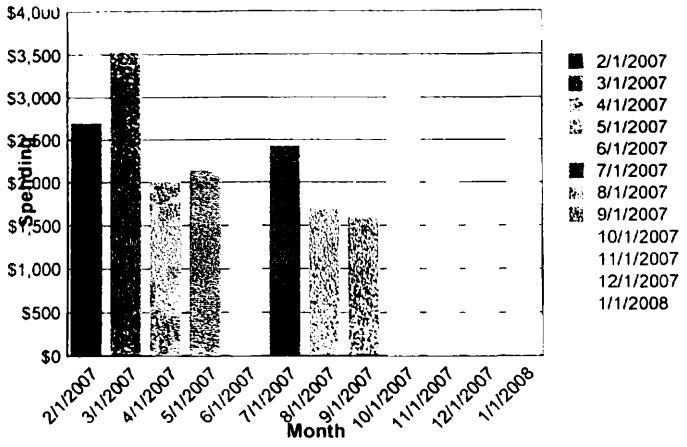
Antibiotics	3.5%
Cardio	9.2%
Diabetes	3.4%
HIV	13.3%
Injectibles	1.0%
Med Supplies	1.4%
Neuro	11.4%
Other	14.3%
Pain	2.6%
Psych	34.6%
RespCare	5.3%
Total:	100.0%

For Sample Facility

Antibiotics

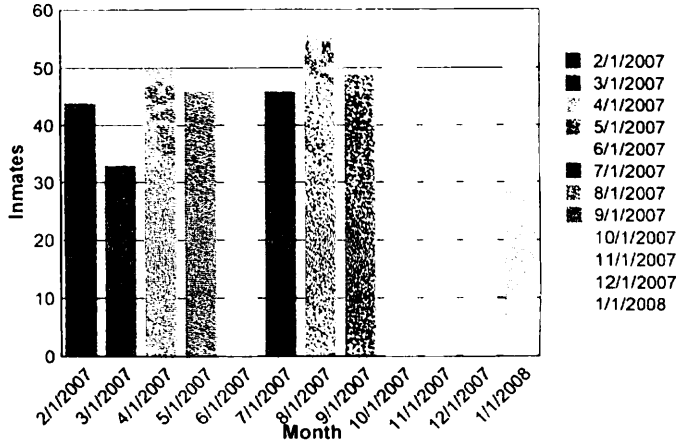
Prescription Spending

For Antibiotics



Inmates on Medication

For Antibiotics



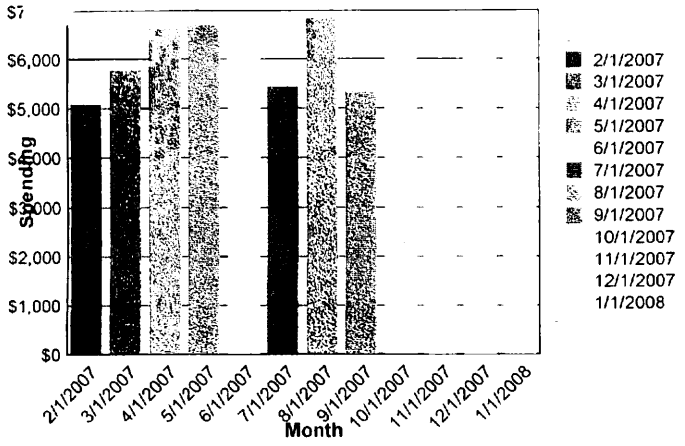
Antibiotics

	Inmates	Scripts	Spending
2/1/2007	44	84	$2,709.69
3/1/2007	33	71	$3,541.00
4/1/2007	50	78	$2,020.11
5/1/2007	46	72	$2,141.95
6/1/2007	47	81	$1,675.58
7/1/2007	46	86	$2,436.33
8/1/2007	56	85	$1,705.20
9/1/2007	49	76	$1,593.29
10/1/2007	53	98	$3,317.37
11/1/2007	45	70	$2,316.25
12/1/2007	47	60	$1,565.34
1/1/2008	58	87	$2,706.26
Total	377	948	$27,728.37

Cardio

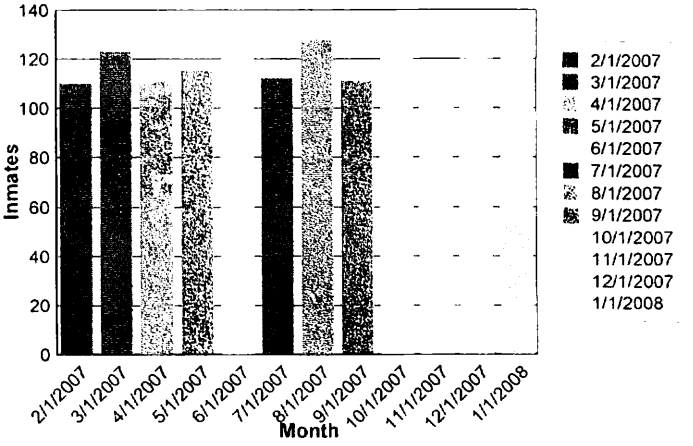
Prescription Spending

For Cardio



Inmates on Medication

For Cardio



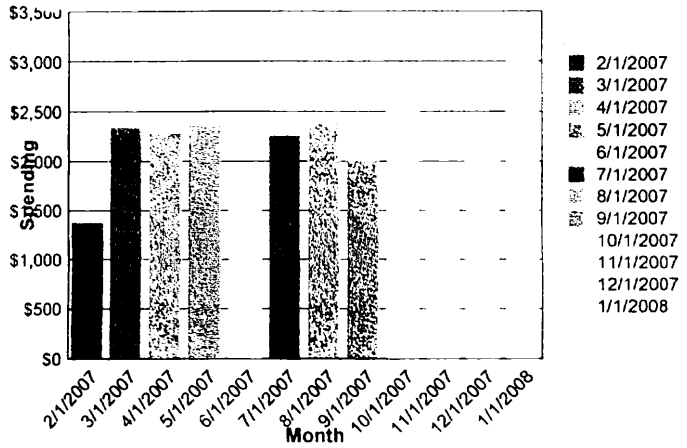
Cardio

	Inmates	Scripts	Spending
2/1/2007	**110**	**203**	**$5,088.59**
3/1/2007	**123**	**235**	**$5,779.38**
4/1/2007	**111**	**225**	**$6,651.20**
5/1/2007	**115**	**249**	**$6,705.64**
6/1/2007	**124**	**252**	**$6,405.79**
7/1/2007	**112**	**212**	**$5,431.00**
8/1/2007	**128**	**249**	**$6,859.59**
9/1/2007	**111**	**214**	**$5,327.94**
10/1/2007	**126**	**254**	**$6,438.70**
11/1/2007	**112**	**225**	**$5,823.09**
12/1/2007	**120**	**261**	**$6,000.39**
1/1/2008	**132**	**262**	**$6,319.64**
Total	**490**	**2,841**	**$72,830.95**

Diabetes

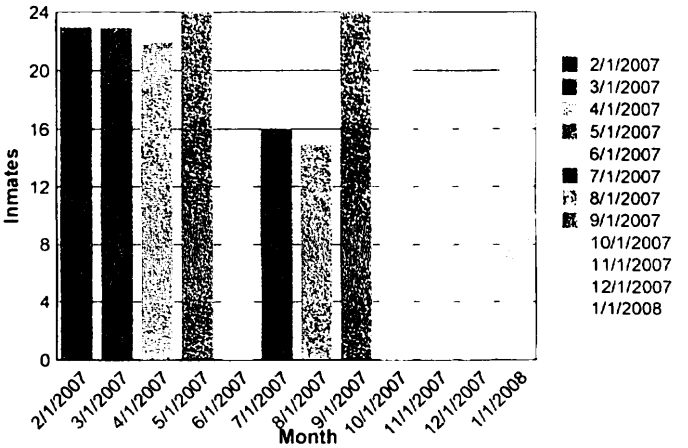
Prescription Spending

For Diabetes



Inmates on Medication

For Diabetes



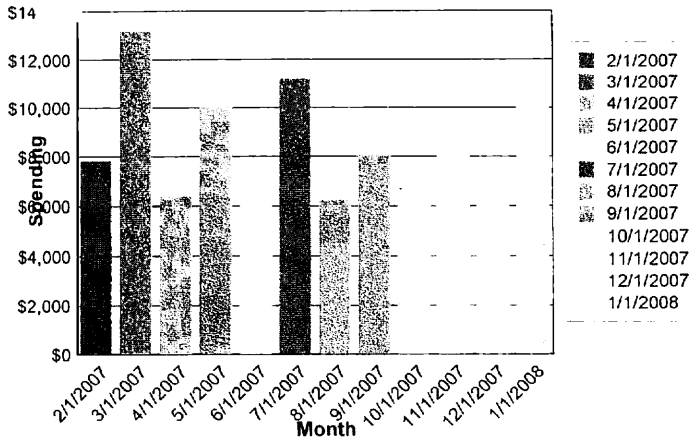
Diabetes

	Inmates	Scripts	Spending
2/1/2007	23	34	$1,379.30
3/1/2007	23	43	$2,349.61
4/1/2007	22	40	$2,288.24
5/1/2007	24	49	$2,371.53
6/1/2007	15	32	$1,781.46
7/1/2007	16	33	$2,264.71
8/1/2007	15	33	$2,396.24
9/1/2007	24	39	$2,011.09
10/1/2007	21	45	$2,680.30
11/1/2007	19	37	$1,736.85
12/1/2007	18	37	$2,269.07
1/1/2008	23	42	$3,429.35
Total	86	464	$26,957.75

HIV

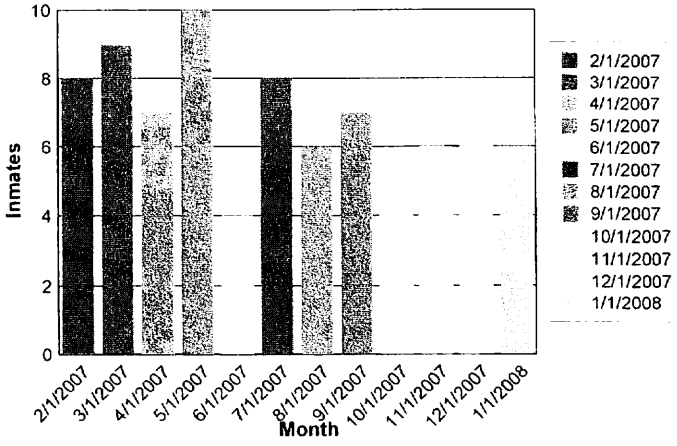
Prescription Spending

For HIV



Inmates on Medication

For HIV



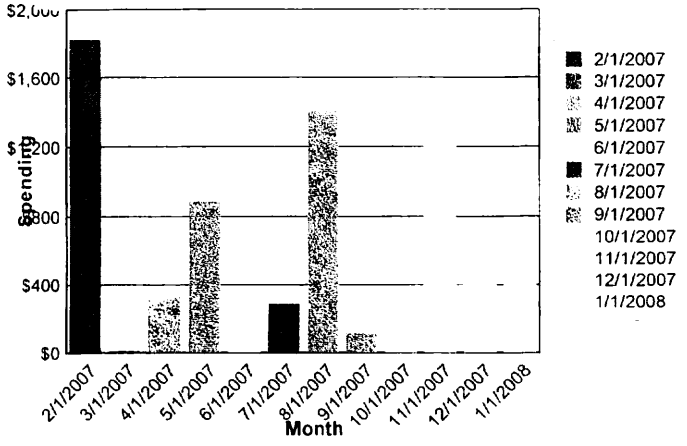
HIV

	Inmates	Scripts	Spending
2/1/2007	8	19	$7,846.15
3/1/2007	9	27	$13,218.64
4/1/2007	7	15	$6,404.97
5/1/2007	10	28	$10,061.41
6/1/2007	4	11	$6,306.62
7/1/2007	8	20	$11,226.11
8/1/2007	6	12	$6,258.79
9/1/2007	7	18	$8,096.25
10/1/2007	5	12	$7,478.65
11/1/2007	6	14	$8,752.90
12/1/2007	7	14	$7,993.25
1/1/2008	6	18	$11,070.62
Total	36	208	$104,714.36

Injectibles

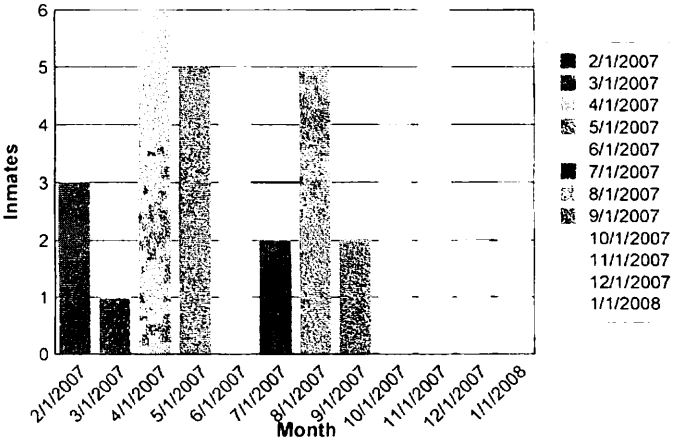
Prescription Spending

For Injectibles



Inmates on Medication

For Injectibles



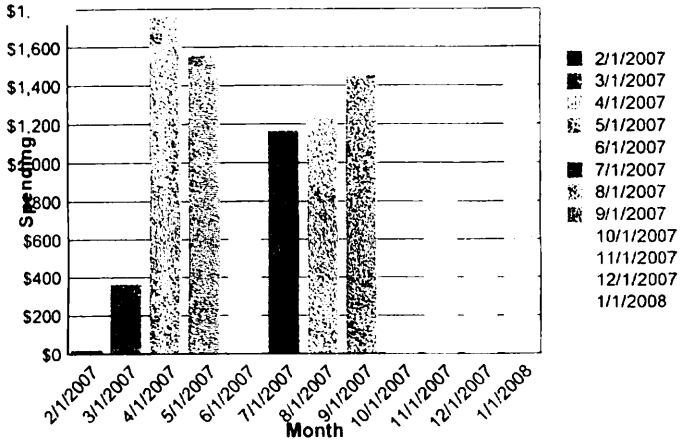
Injectibles

	Inmates	Scripts	Spending
2/1/2007	3	9	$1,825.65
3/1/2007	1	1	$17.49
4/1/2007	6	11	$335.98
5/1/2007	5	8	$891.88
6/1/2007	5	5	$202.74
7/1/2007	2	3	$293.14
8/1/2007	5	7	$1,406.61
9/1/2007	2	2	$119.69
10/1/2007	4	7	$68.77
11/1/2007	6	8	$1,359.30
12/1/2007	2	5	$660.39
1/1/2008	3	7	$737.00
Total	26	73	$7,918.64

Med Supplies

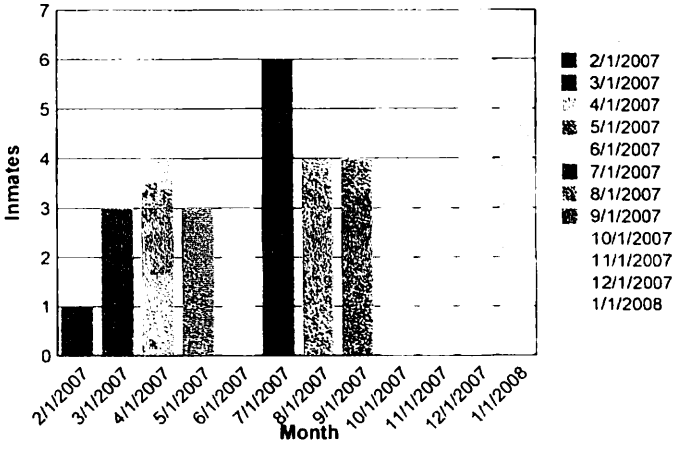
Prescription Spending

For Med Supplies



Inmates on Medication

For Med Supplies



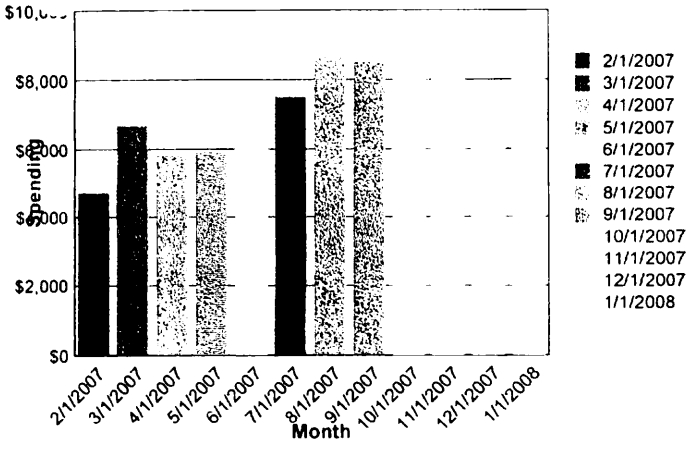
Med Supplies

	Inmates	Scripts	Spending
2/1/2007	1	1	$19.64
3/1/2007	3	3	$366.83
4/1/2007	4	9	$1,763.60
5/1/2007	3	12	$1,560.59
6/1/2007	3	5	$727.21
7/1/2007	6	9	$1,168.13
8/1/2007	4	10	$1,237.24
9/1/2007	4	11	$1,456.68
10/1/2007	3	7	$195.69
11/1/2007	3	11	$893.94
12/1/2007	7	8	$420.28
1/1/2008	6	13	$1,590.11
Total	32	99	$11,399.94

Neuro

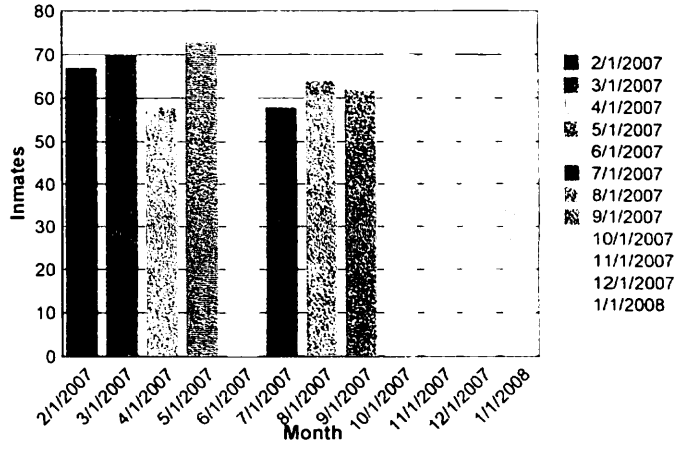
Prescription Spending

For Neuro



Inmates on Medication

For Neuro



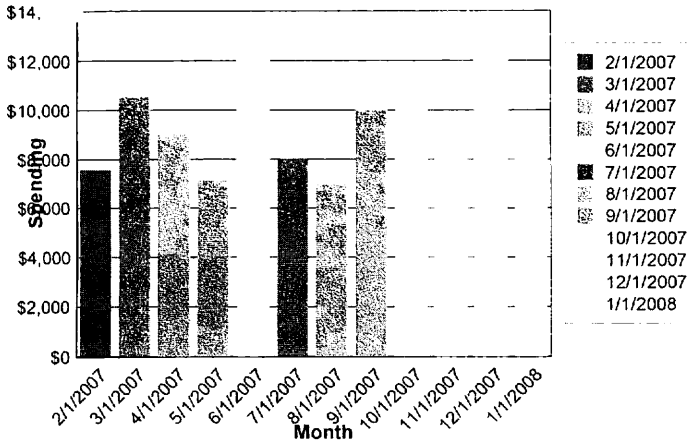
Neuro

	Inmates	Scripts	Spending
2/1/2007	67	102	$4,725.33
3/1/2007	70	112	$6,711.36
4/1/2007	58	99	$5,840.93
5/1/2007	73	112	$5,927.82
6/1/2007	66	103	$6,324.52
7/1/2007	58	103	$7,529.39
8/1/2007	64	110	$8,688.43
9/1/2007	62	100	$8,523.09
10/1/2007	70	118	$9,178.52
11/1/2007	78	135	$9,660.61
12/1/2007	67	106	$6,912.24
1/1/2008	75	129	$9,963.76
Total	287	1,329	$89,986.00

Other

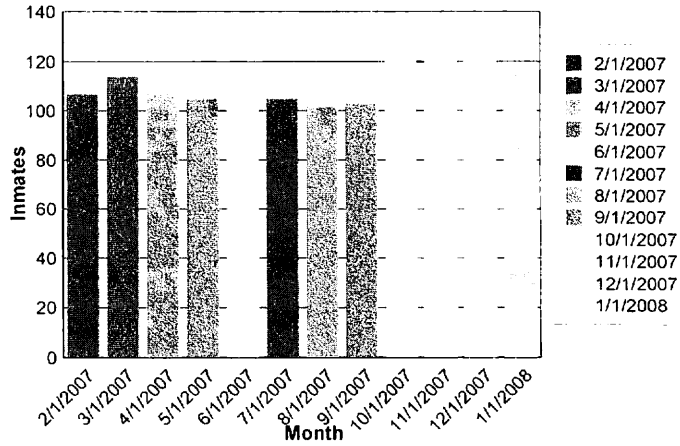
Prescription Spending

For Other



Inmates on Medication

For Other



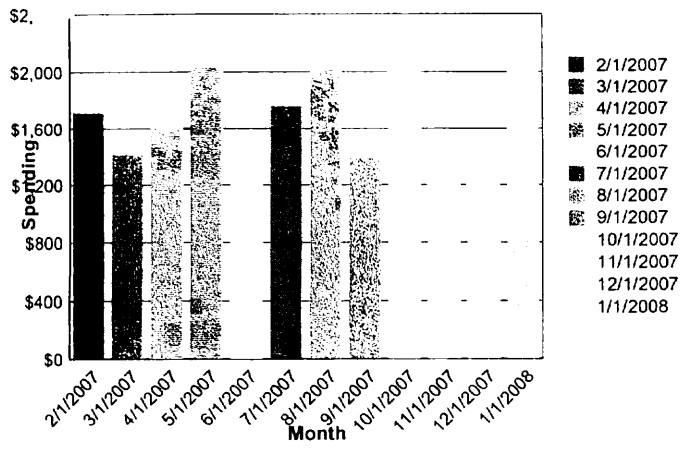
Other

	Inmates	Scripts	Spending
2/1/2007	**107**	**202**	**$7,585.04**
3/1/2007	**114**	**241**	**$10,573.75**
4/1/2007	**107**	**239**	**$9,037.64**
5/1/2007	**105**	**250**	**$7,151.38**
6/1/2007	**110**	**240**	**$12,027.79**
7/1/2007	**105**	**223**	**$7,994.39**
8/1/2007	**102**	**232**	**$6,988.89**
9/1/2007	**103**	**211**	**$10,016.52**
10/1/2007	**123**	**288**	**$10,345.48**
11/1/2007	**125**	**269**	**$9,295.43**
12/1/2007	**124**	**270**	**$12,809.95**
1/1/2008	**120**	**285**	**$8,786.44**
Total	**581**	**2,950**	**$112,612.70**

Pain

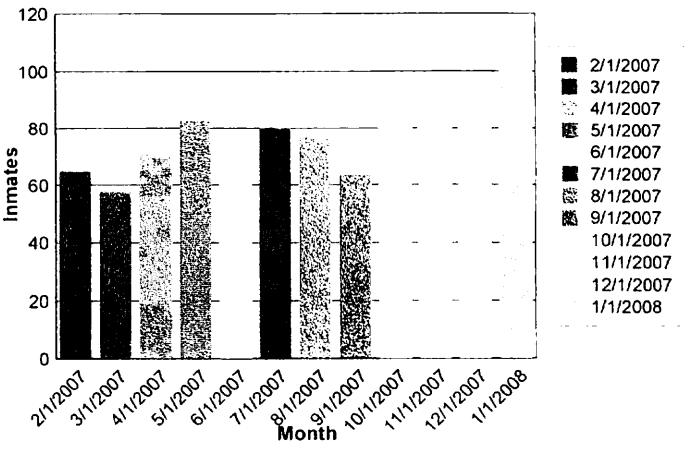
Prescription Spending

For Pain



Inmates on Medication

For Pain



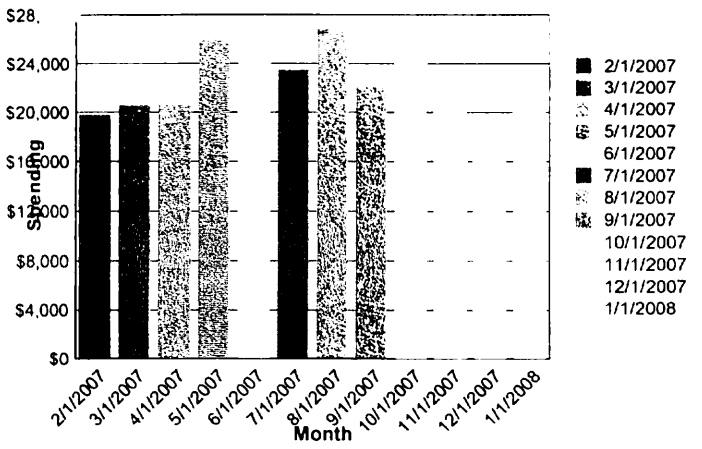
Pain

	Inmates	Scripts	Spending
2/1/2007	**65**	**77**	**$1,715.02**
3/1/2007	**58**	**76**	**$1,419.96**
4/1/2007	**71**	**93**	**$1,608.71**
5/1/2007	**83**	**109**	**$2,030.63**
6/1/2007	**72**	**96**	**$1,556.58**
7/1/2007	**80**	**110**	**$1,760.56**
8/1/2007	**77**	**105**	**$2,022.34**
9/1/2007	**64**	**82**	**$1,395.72**
10/1/2007	**85**	**114**	**$2,037.98**
11/1/2007	**83**	**99**	**$1,408.26**
12/1/2007	**85**	**113**	**$1,461.02**
1/1/2008	**106**	**136**	**$2,291.13**
Total	**509**	**1,210**	**$20,707.91**

Psych

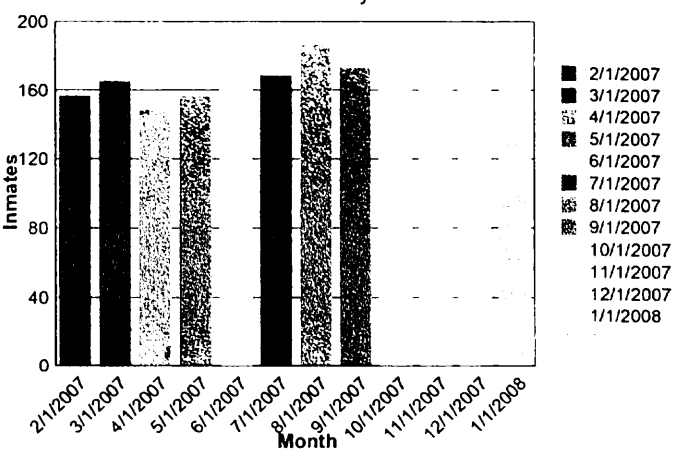
Prescription Spending

For Psych



Inmates on Medication

For Psych



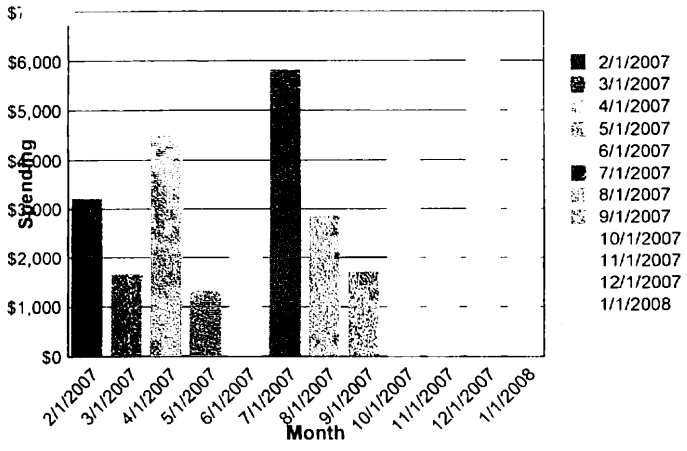
Psych

	Inmates	Scripts	Spending
2/1/2007	157	325	$19,830.98
3/1/2007	166	317	$20,659.30
4/1/2007	149	295	$20,639.30
5/1/2007	157	352	$26,018.03
6/1/2007	164	333	$25,412.10
7/1/2007	169	325	$23,542.03
8/1/2007	187	351	$26,870.73
9/1/2007	174	283	$22,224.96
10/1/2007	170	354	$24,888.76
11/1/2007	180	359	$22,433.36
12/1/2007	177	343	$18,842.14
1/1/2008	193	375	$21,781.19
Total	659	4,012	$273,142.88

RespCare

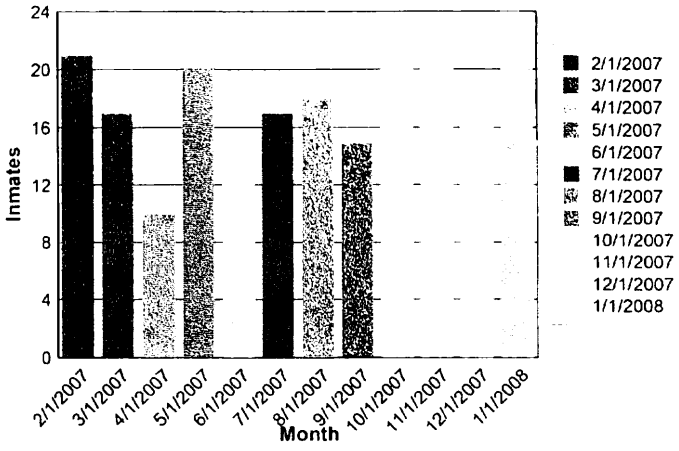
Prescription Spending

For RespCare



Inmates on Medication

For RespCare



RespCare

	Inmates	Scripts	Spending
2/1/2007	**21**	**41**	**$3,227.73**
3/1/2007	**17**	**23**	**$1,666.54**
4/1/2007	**10**	**18**	**$4,513.59**
5/1/2007	**20**	**28**	**$1,324.38**
6/1/2007	**15**	**24**	**$2,061.88**
7/1/2007	**17**	**37**	**$5,829.33**
8/1/2007	**18**	**26**	**$2,871.97**
9/1/2007	**15**	**25**	**$1,713.84**
10/1/2007	**22**	**32**	**$4,697.79**
11/1/2007	**21**	**35**	**$2,128.27**
12/1/2007	**19**	**36**	**$6,170.78**
1/1/2008	**24**	**55**	**$5,490.27**
Total	**126**	**380**	**$41,696.37**

Cumulative Reports - Sample Facility

January 2008

Top 50 Meds by Spending

	Total
FLUOXETINE 20MG CAPSULE	
HALOPERIDOL DEC 100MG/ML VL	
AZITHROMYCIN 250MG TAB	
AMITRIPTYLINE 100MG TABLET	
HALOPERIDOL 5MG TABLET	
AMITRIPTYLINE HCL 50MG	
CLONIDINE 0.2MG TAB	
HALOPERIDOL 2MG TABLET	
TRAZODONE 100MG TABLET	
TOPAMAX 100MG TAB	
AMLODIPINE BESYLATE 10MG	
DIPHENHYDRAMINE 50MG CAP	
HYDROCODONE/APAP 7.5/500	
BENZTROPINE MES 1MG TABLET	
TRAZADONE 150MG TABLET	
REYATAZ 150MG CAPSULE	
LOVASTATIN 40MG TABLETS	
ACYCLOVIR 800MG TABLET	
PHENYTEK 300MG CAPSULE	
HALOPERIDOL 10MG TABLET	
HALOPERIDOL 1MG	
PLAVIX 75MG TABLET	
LEVAQUIN 500MG TABLET	
SULFAMETH/TMP DS 800-160	
RANITIDINE 150MG TABLET	
HALOPERIDOL 20MG TABLET	
BICILLIN L-A 2,400,000U	
TOPAMAX 25MG TAB	
GLYBURIDE 5MG TAB	
PROPOXY-N/APAP 100/650	
LISINOPRIL 10MG TABLET	
BENZTROPINE MES 2MG TAB	
SOTALOL 80MG TABLET	
BUSPIRONE HCL 15MG TABLET	
CHLORPROMAZINE 100MG TAB	

Top 50 Meds by Utilization

	Total
ACETAMINOPHEN 325MG TAB	5,309.00
FLUOXETINE 20MG CAPSULE	1,954.00
DIPHENHYDRAMINE 50MG CAP	1,841.00
RANITIDINE 150MG TABLET	1,260.00
BENZTROPINE MES 1MG TABLET	1,170.00
CLONIDINE 0.2MG TAB	1,160.00
SULFAMETH/TMP DS 800-160	1,042.00
AMITRIPTYLINE HCL 50MG	928.00
AMOXICILLIN 500MG CAP	922.00
IBUPROFEN 800MG TABLET	894.00
HALOPERIDOL 2MG TABLET	877.00
HCTZ 25MG TABLET	874.00
NAPROXEN SODIUM 220MG TAB	872.00
HALOPERIDOL 5MG TABLET	810.00
TRAZODONE 100MG TABLET	700.00
AMITRIPTYLINE 100MG TABLET	630.00
ACETAMINOPHEN 500MG CAPLET	592.00
HYDROCODONE/APAP 7.5/500	536.00
AMITRIPTYLINE 50MG TABLET	510.00
HALOPERIDOL 1MG	510.00
BENZTROPINE MES 2MG TAB	480.00
*CHLORHEXIDINE 0.12% RINS	473.00
MICONAZOLE 2% VAG CR 45GM	405.00
IBUPROFEN 400MG TABLET	382.00
ACETAMINOPHEN/COD ELIXIR	360.00
PHENYTOIN SOD EXT 100MG CAP	360.00
DIPHENHYDRAMINE 25MG CAPS	328.00
PREDNISONE 10MG TABLET	324.00
DIAZEPAM 5MG TABLET	296.00
IBUPROFEN 600MG TABLET	270.00
METOPROLOL 50MG TABLET	246.00
CARBAMAZEPINE 200 MG TAB	240.00

	Total
CARVEDILOL 3.125MG	
METOPROLOL 50MG TABLET	
HCTZ 25MG TABLET	
LORAZEPAM 1MG TABLET	
HYDROXYZINE HCL 50MG TABLE	
ACETAMINOPHEN 325MG TAB	
MICONAZOLE 2% VAG CR 45GM	
PHENYTOIN SOD EXT 100MG CAF	
ATROVENT INHALER	
METRONIDAZOLE 500MG TABLET	
ISOSORBIDE MONO 60MG ER	
NAPROXEN SODIUM 220MG TAB	
IBUPROFEN 800MG TABLET	
DOXYCYCLINE 100MG CAPSULE	
NEO/POLYMYXIN/HC EAR SUSP	

	Total
GLYBURIDE 5MG TAB	240.00
PROPOXY-N/APAP 100/650	230.00
LISINOPRIL 10MG TABLET	225.00
PSEUDOEPHEDRINE 60MG TAB	224.00
DIAZEPAM 10MG TABLET	210.00
DOCUSATE SOD 100MGCAP	200.00
AMLODIPINE BESYLATE 10MG	196.00
PREDNISONE 10 MG TABLET	185.00
ASPIRIN 81MG TABLET EC	180.00
CHLORPROMAZINE 100MG TAB	180.00
HYDROXYZINE PAM 50MG CAP	180.00
TRAZADONE 150MG TABLET	180.00
CALCIUM/VITAMIND	150.00
HALOPERIDOL 10MG TABLET	150.00
LORAZEPAM 1MG TABLET	150.00
METOPROLOL 25MG TABLET	150.00
PHENYTEK 300MG CAPSULE	150.00
PRENATAL VITAMINS OTC	150.00

Top 20 Most Expensive Inmates

Total
$701.51
$477.02
$466.66
$450.50
$436.65
$412.02
$332.77
$276.11
$249.69
$193.96
$184.03
$168.65
$166.87

Total
$144.08
$143.21
$141.72
$141.33
$139.38
$131.10
$126.54

Formulary Analysis - Sample

		B/G	Cost	Scripts	Spending	Substitute
.1.0	Penicillins					
	AMOXICILLIN 250 MG TAB CHEW	G	$			
	AMOXICILLIN 250MG CAPSULE	G	$			
	AMOXICILLIN 250MG/5ML SUSP	G	$			
	AMOXICILLIN 500MG CAP	G	$			
	AMOXICILLIN 875MG TABLET	G	$			
	AMPICILLIN 1 GM VIAL	G	$			
	AMPICILLIN 2GM VIAL	G	$			
	AMPICILLIN 500MG CAP	G	$			
	AMPICILLIN 500MG VIAL	G	$			
	AMPICILLIN TR 250MG CAPSULE	G	$			
	DICLOXACILLIN 250MG CAPSU	G	$			
	DICLOXACILLIN 500MG CAP	G	$			
	PENICILLIN VK 500MG	G	$			
	PENICILLIN VK 250MG TABLET	G	$			
	PENICILLIN VK 500MG TAB	G	$			
	PENICILLIN VK SOL 250/5	G	$			
	PENICILLIN VK SOL 250MG/5ML	G	$			
	AMOXIL 250 MG/5 ML SUSPENSI	G	$$			
	X TR-K CLV 600-42.9/5 SU	G	$$$			
	AMOX/CLAV 500/125MG	G	$$$			
	AMOXICILLIN 500/125 TAB	G	$$$			
	AMOXICILLIN/CLAV 875MG TAB	G	$$$			
	AUGMENTIN 1000MG XR TABLETS	B	NF			AMOXICILLIN/CLAV 875MG TAB
	AUGMENTIN 200-28.5 SUSPEN	B	NF			
	AUGMENTIN 250-125 TABLET	B	NF			AMOXICILLIN 500/125 TAB
	AUGMENTIN 250-62.5 SUSPEN	B	NF			AMOXICILLIN/CLAV 875MG TAB
	AUGMENTIN 500-125 TABLET	B	NF			AMOXICILLIN 500/125 TAB
	AUGMENTIN 875-125 TABLET	B	NF			AMOXICILLIN/CLAV 875MG TAB
	AUGMENTIN ES600 SUSPENSION	B	NF			AMOX TR-K CLV 600-42.9/5 SU
.2.0	Tetracyclines					
	DOXYCYCLINE 100MG CAPSULE	G	$			
	DOXYCYCLINE 100MG TABLET	G	$			
	DOXYCYCLINE 20 MG TABLET	G	$			
	DOXYCYCLINE 50 MG TABLET	G	$			
	DOXYCYCLINE 50MG CAPSULE	G	$			
	TETRACYCLINE 250MG CAPSULE	G	$			
	TETRACYCLINE 500MG CAPSULE	G	$			
	TETRATCYCLINE 500	G	$			
	MINOCYCLINE 100MG CAPSULE	G	$$$			
	MINOCYCLINE 50MG CAPSULE	G	$$$			
.3	First Generation Cephalosporins					
	CEFADROXIL 500MG CAP	G	$			
	CEFUROXIME AXETIL 250MG TAB	G	$			

	F	Cost	Scripts	Spendi	Substitute
CEFUROXIME AXETIL500MG	C	$			
CEPHALEXIN 250MG CAPSULE	G	$			
CEPHALEXIN 250MG TABLET	G	$			
CEPHALEXIN 250MG/ 5ML	G	$			
HALEXIN 500MG CAP	G	$			
KEFLEX 250MG PULVULE	B	NF			CEPHALEXIN 250MG CAPSULE
KEFLEX 500MG PULVULE	B	NF			CEPHALEXIN 500MG CAP
.3.2 Second Generation Cephalosporins					
CEFTIN 250MG TABLET	B	NF			CEFUROXIME
CEFZIL 250MG TABLET	B	NF			AUGMENTIN 875-125 TABLET
VANTIN 100MG TABLET	B	NF			CEFPODOXIMINE
VANTIN 200MG TABLET	B	NF			CEFPODOXIMINE
.3.3 Third Generation Cephalosporins					
OMNICEF 300MG CAPSULE	B	$$$			
.4.1 Erythromycins & Other Macrolides					
E-MYCIN 250MG EC	G	$			
ERTHROMYCIN 500MG FLMTAB	G	$			
ERY-TAB 250MG TABLET EC	G	$			
ERY-TAB 333MG EC TBLET	G	$			
ERY-TAB 500MG TABLET EC	G	$			
ERYTHROMYCIN 250MG BASE	G	$			
ERYTHROMYCIN 250MGTAB	G	$			
ERYTHROMYCIN 400MGTAB	G	$			
ERYTHROMYCIN 500MG FILMTAB	G	$			
AZITHROMYCIN 250 MG TABLET	G	$$$			
AZITHROMYCIN 250MG TAB	G	$$$			
AZITHROMYCIN 600MG TAB	G	$$$			
BIAXIN XL 500 MG TABLET SA	B	$$$			
CLARITHROMYCIN 500 MG TABLE	G	$$$			
BIAXIN 250MG TAB	B	NF			CLARITHROMYCIN 500 MG TABLE
BIAXIN 500MG TABLET	B	NF			CLARITHROMYCIN 500 MG TABLE
ZITHROMAX 250MG TABLET	B	NF			AZITHROMYCIN 250MG TAB
ZITHROMAX 250MG Z-PAK TAB	B	NF			AZITHROMYCIN 250MG TAB
ZITHROMAX 500MG TABLET	B	NF			AZITHROMYCIN 250MG TAB
ZITHROMAX 600MG TABLET	B	NF			AZITHROMYCIN 600MG TAB
ZITHROMAX TRI-PACK	B	NF			AZITHROMYCIN 250MG TAB
ZITHROMAX TRI-PAK 500 MG TA	B	NF			AZITHROMYCIN 250MG TAB
.5.1 Fluoroquinolones					
CIPROFLOXACIN 250MG TAB	G	$			
CIPROFLOXACIN 500 TABLET	G	$			
CIPROFLOXACIN HCL 750 MG TA	G	$			
AVELOX 400MG TAB	B	$$$			
OFLOXACIN 200 MG TABLET	G	$$$			
OFLOXACIN 300 MG TABLET	G	$$$			
OFLOXACIN 400 MG TABLET	G	$$$			
TEQUIN 400MG TABLET	B	$$$			
CIPRO XR 500 TABS	B	$$$$			
CIPROFLOXACIN ER 1,000 MG T	B	$$$$			
LEVAQUIN 250MG TABLET	B	$$$$			

	P	Cost	Scripts	Spendir	Substitute
LEVAQUIN 500MG TABLET	B	$$$$			
LEVAQUIN 750 MG TABLET	B	$$$$			
CIPRO 250MG TABLET	B	NF			CIPROFLOXACIN 250MG TAB
C O 500MG TABLET	B	NF			CIPROFLOXACIN 500 TABLET
FLOXIN 200MG TABLET	B	NF			OFLOXACIN 200 MG TABLET
FLOXIN 400MG TABLET	B	NF			OFLOXACIN 400 MG TABLET
.6.0 Sulfas & Related Agents					
SULFAMETH/TMP DS 800-160	G	$			
SULFAMETHOXAZOLE W/TMP SUSP	G	$			
SULFAMETHOXAZOLE W/TMP VIAL	G	$			
SULFAMETHOXAZOLE/TMP SS TAB	G	$			
SULFADIAZINE 500MG TABLET	G	$$$$$			
BACTRIM DS TABLET	B	NF			
.7.0 Urinary Tract Agents					
PHENAZOPYRIDINE 200MG	G	$			
PHENAZOPYRIDINE 100MG TAB	G	$			
PHENAZOPYRIDINE 200MG TAB	G	$			
TRIMETHOPRIM 100MG TABLET	G	$			
NIRTO 100MG CP	G	$$			
NITROFURAN-MON MACRO 100MG	G	$$			
NITROFURANTOIN 100MG	G	$$			
NITROFURANTOIN MCR 50MG CAP	G	$$			
NITROFURANTOIN-MACRO 100MG	G	$$			
MACROBID 100MG CAPSULE	B	NF			NITROFURANTOIN-MACRO 100MG
MACRODANTIN 50MG	B	NF			NITROFURANTOIN MCR 50MG CAP
.8.1 Miscellaneous Antivirals					
ACYCLOVIR 200MG CAP	G	$			
ACYCLOVIR 200MG/5ML SUSP	G	$			
ACYCLOVIR 400MG TABLET	G	$			
ACYCLOVIR 800MG TABLET	G	$			
AMANTADINE 100MG CAPSULE	G	$$			
AMANTADINE 50MG/5ML SYRUP	G	$$			
TAMIFLU 75MG GELCAP	B	$$			
RIMANTADINE 100MG TABLET	G	$$$			
FAMVIR 125MG	B	$$$$			
FAMVIR 250MG TABLET	B	$$$$			
FAMVIR 500MG	B	$$$$			
VALTREX 1GM CAPLET	B	$$$$$			
VALTREX 500MG CAPLET	B	$$$$$			
COPEGUS 200 MG TABLET	B	$$$$$$			
EPIVIR HBV 100MG TABLET	B	$$$$$$			
REBETOL 200MG CAPSULE	B	$$$$$$			
CYTE 450MG TABLET	B	$$$$$$			
CAMPRAL 333 MG DR TABLET	B	NF			
ZOVIRAX 200MG CAPSULE	B	NF			ACYCLOVIR 200MG CAP

		Cost	Scripts	Spendi	Substitute
ZOVIRAX 400MG TABLET	L	NF			ACYCLOVIR 400MG TABLET
ZOVIRAX 800MG TABLET	B	NF			ACYCLOVIR 800MG TABLET

.8.2 HIV/AIDS Therapy

DIDANOSINE 250 MG DR CAPSUL	G	$$$			
DIDANOSINE 400 MG DR CAPSUL	G	$$$			
NORVIR 100MG CAPSULE	B	$$$			
ZIDOVUDINE 100 MG CAPSULE	G	$$$$			
ZIDOVUDINE 300 MG TABLET	G	$$$$			
ATRIPLA TABLET	B	$$$$$$			
COMBIVIR TABLET	B	$$$$$$			
CRIXIVAN 400MG CAPSULE	B	$$$$$$			
EMTRIVA 200MG CAPSULE	B	$$$$$$			
EPIVIR 10MG/ML ORAL SOLN	B	$$$$$$			
EPIVIR 150MG TABLET	B	$$$$$$			
EPIVIR 300MG TABLET	B	$$$$$$			
EPZICOM TAB	B	$$$$$$			
FORTOVASE 200MG SOFTGEL CAP	B	$$$$$$			
FUZEON 90MG	B	$$$$$$			
HIVID 0.750 MG TABLET	B	$$$$$$			
INVIRASE 200 MG CAPSULE	B	$$$$$$			
INVIRASE 500 MG TABLET	B	$$$$$$			
KALETRA SOFTGEL CAPSULE	B	$$$$$$			
KALETRA TAB 200/50	B	$$$$$$			
LEXIVA 700MG	B	$$$$$$			
REYATAZ 150MG CAPSULE	B	$$$$$$			
REYATAZ 200 MG CAPSULE	B	$$$$$$			
SUSTIVA 200MG CAPSULE	B	$$$$$$			
SUSTIVA 600MG TAB	B	$$$$$$			
TRIZIVIR TAB	B	$$$$$$			
TRUVADA TABLET	B	$$$$$$			
VIDEX 100MG TABLET CHEWABLE	B	$$$$$$			
VIDEX 25MG TABLET CHEWABLE	B	$$$$$$			
VIRACEPT 250MG TABLET	B	$$$$$$			
VIRACEPT 625 MG TABLET	B	$$$$$$			
VIRAMUNE 200MG TABLET	B	$$$$$$			
VIREAD 300MG TAB	B	$$$$$$			
ZERIT 20MG CAPSULE	B	$$$$$$			
ZERIT 30MG CAPSULE	B	$$$$$$			
ZERIT 40MG CAPSULE	B	$$$$$$			
ZIAGEN 300MG TABLET	B	$$$$$$			
RETROVIR 100MG CAPSULE	B	NF			
RETROVIR 300MG	B	NF			
VIDEX EC 125MG CAP SA	B	NF			DIDANOSINE 125 MG DR CAPSUL
VIDEX EC 200MG CAP SA	B	NF			DIDANOSINE 200 MG DR CAPSUL
VIDEX EC 250MG CAP SA	B	NF			DIDANOSINE 250 MG DR CAPSUL
VIDEX EC 400MG CAP SA	B	NF			DIDANOSINE 400 MG DR CAPSUL

.9.0 Antifungal Agents

CLOTRIMAZOLE 10 MG TROCHE	G	$			
FLUCONAZOLE 100MG TABLET	G	$			
FLUCONAZOLE 150MG TABLET	G	$			
FLUCONAZOLE 200MG TABLET	G	$			
NYSTATIN 100000U/ML SUSP	G	$			
NYSTATIN SUSP 100MUN/ML	G	$			
KETOCONAZOLE 200MG TABLET	G	$$			

	F	Cost	Scripts	Spendir	Substitute
MYCELEX 10MG TROCHE	E	$$			
MYCELEX TROCHES 10MG LOZ	B	$$			
GRIFULVIN V 500MG TABLET	B	$$$			
(-PEG 125MG TABLET	B	$$$			
GRIS-PEG 250MG TABLET	B	$$$			
LAMISIL 250MG TABLET	B	$$$$			
SPORANOX 10MG/ML SOLUTION	B	$$$$$			
DIFLUCAN 100MG TABLET	B	NF			FLUCONAZOLE 100MG TABLET
DIFLUCAN 150MG TABLET	B	NF			FLUCONAZOLE 150MG TABLET
DIFLUCAN 200MG TAB	B	NF			FLUCONAZOLE 200MG TABLET
SPORONAX 100MG CAP	B	NF			ITRACONAZOLE 100MG CAP
.10.0 Vancomycin					
VANCOCIN HCL 125MG PULVULE	B	$$$$			
VANCOCIN HCL 1GM ADD-VNTAGE	B	$$$$			
VANCOCIN HCL 250MG PULVULE	B	$$$$			
VANCOMYCIN 1GM ADD-VAN VIAL	B	$$$$			
VANCOMYCIN 2GM	B	$$$$			
VANCOMYCIN HCL 1GMINFUSION	B	$$$$			
VANCOMYCIN HCL 1GRIV VIAL	B	$$$$			
.11.1 Miscellaneous Anti-Infectives					
DAPSONE 100MG TABLET	B	$			
DAPSONE 25MG TABLET	B	$			
DAMYCIN 150MG CAP	G	$$$			
CLINDAMYCIN 300MG CAPSULE	G	$$$			
CLINDAMYCIN 300MG NS	G	$$$			
CLINDAMYCIN HCL 150MG	G	$$$			
NEOMYCIN 500MG TABLET	G	$$$			
ZYVOX 600MG TABLET	B	$$$$$$			
CLEOCIN HCL 150MG CAPSULE	B	NF			CLINDAMYCIN 150MG CAP
CLEOCIN HCL 300MG CAPSULE	B	NF			CLINDAMYCIN 300MG CAPSULE
.11.2 Antiparasitics					
METRONIDAZOLE 250MG	G	$			
METRONIDAZOLE 500MG TABLET	G	$			
STROMECTOL 3 MG TABLET	B	$$			
PAROMOMYCIN 250MG	G	$$$$			
PAROMOMYCIN 250MG CAPSULE	G	$$$$			
MEPRON 750MG/5ML SUSPENSI	B	$$$$$$			
FLAGYL 250MG TABLET	B	NF			METRONIDAZOLE 250MG
FLAGYL 500MG TABLET	B	NF			METRONIDAZOLE 500MG TABLET
.11.3 Antimalarials					
QUININE SULFATE 260MG TAB	G	$$			
QUININE SULFATE 325MG CAP	G	$$			

		F	Cost	Scripts	Spendir	Substitute
HYDROXYCHLOROQUINE 200MG TB		C	$$$			
DARAPRIM 25MG TABLET		B	$$$$			
I QUENIL 200MG TABLET		B	NF			HYDROXYCHLOROQUINE 200MG T
.11.4	Antimycobacterials					
ISONIAZID 100MG TABLET		G	$			
ISONIAZID 300MG TABLET		G	$			
PYRAZINAMIDE 500MG TABLET		G	$$$$			
RIFAMPIN 300MG CAPSULE		G	$$$$$			
ETHAMBUTOL HCL 400MG TABLET		G	$$$$$$			
MYCOBUTIN 150MG CAPSULE		B	$$$$$$			
RIFADIN 300MG CAPSULE		B	NF			RIFAMPIN 300MG CAPSULE
TRECATOR 250 MG TABLET		B	NF			
.1.2	Antimetabolites					
METHOTREXATE 2.5MG		G	$			
METHOTREXATE 25 MG/ML VIAL		G	$			
.1.3.3	Hormones					
MEGESTROL 20MG TABLET		G	$$			
MEGESTROL 40MG TABLET		G	$$			
MEGESTROL ACET 40MG/ML SUSP		G	$$			
.1.3.4	Antiestrogens					
TAMOXIFEN 10MG TABLET		G	$			
TAMOXIFEN 20 MG TABLET		G	$			
ARIMIDEX 1MG TABLET		B	$$$$			
.1.3.5	Antiandrogens					
CASODEX 50MG TAB		B	$$$$$			
CASODEX 50MG TABLET		B	$$$$$			
.1.5	Immunosuppresant Drugs					
AZATHIOPRINE 50MG TAB		G	$			
SANDIMMUNE 100MG/ML SOLN		B	$$$$			
CYCLOSPORINE 100MG CAPSULE		G	$$$$$			
CYCLOSPORINE 25MG CAPSULE		G	$$$$$			
CELLCEPT 250MG CAPSULE		B	$$$$$$			
CELLCEPT 500MG TAB		B	$$$$$$			
PROGRAF 0.5MG CAPSULE		B	$$$$$$			
PROGRAF 1MG CAPSULE		B	$$$$$$			
RAPAMUNE 1MG TAB		B	$$$$$$			
N. ORAL SOFT GEL 100MG		B	NF			CYCLOSPORINE 100MG CAPSULE
.1.6	Misc. Antineoplastic Drugs					

	r	Cost	Scripts	Spendi	Substitute
HYDROXYUREA 500MG	C	$			
GLEEVEC 400 MG TABLET	B	$$$$$$			
L[illegible]RON DEPOT 3.75MG KIT	B	$$$$$$			
[illegible]NOID 10MG CAP	B	$$$$$$			
SANDOSTATIN LAR 10MG KIT	B	NF			OCTREOTIDE ACET 10MG KIT
.2.1 Adjunctive Agents					
LEUCOVORIN CALCIUM 15MG TAB	G	$			
LEUCOVORIN CALCIUM 5MG TAB	G	$			
MEDROXYPROGESTERONE 10MG	G	$$			
MEDROXYPROGESTERONE150MG/ML	G	$$			
NEUPOGEN 300MCG/ML VIAL	B	$$$$$$			
DEPO-PROVERA 150MG/ML VIA	B	NF			MEDROXYPROGESTERONE150MG
PROVERA 10MG TABLETS	B	NF			MEDROXYPROGESTERONE 10MG
.1.1 Narcotics					
METHADONE 10MG/5ML SOLUTION	G	$			
METHADONE 40MG	G	$			
METHADONE 5MG/5ML SOLUTION	G	$			
METHADONE HCL 10MG TABLET	G	$			
METHADOSE 10 MG/ML ORAL CON	G	$			
METHADOSE 10MG TABLET	G	$			
METHADOSE 40MG TABLET DISPR	G	$			
METHADOSE 5MG TABLET	G	$			
[illegible]PHINE SULF 10 MG/5 ML SO	G	$			
MORPHINE SULF 100 MG TAB SA	G	$			
MORPHINE SULF 60MG TAB SA	G	$			
MORPHINE SULFATE 15MG TAB	G	$			
MORPHINE SULFATE 30MG	G	$			
OXYCODON HCL-APAP 10/325 MG	G	$			
OXYCODONE 5MG CAP	G	$			
OXYCODONE HCL 20 MG TAB SA	G	$			
OXYCODONE HCL 5 MG TABLET	G	$			
OXYCODONE HCL CR 80 MG TABL	G	$			
OXYCODONE W/APAP 5/325 TAB	G	$			
OXYCODONE W/APAP 5/500 CAP	G	$			
OXYCODONE/ASA 4.88/325 TAB	G	$			
OXYCONDONE 10MG CD	G	$			
CODEINE SULFATE 15MG TABLET	G	$$			
HYDROMORPHONE 2MG TABLET	G	$$			
HYDROMORPHONE 4MG TABLET	G	$$			
HYDROMORPHONE HCL 8 MG TAB	G	$$			
MEPERIDINE 50 MG TABLET	G	$$			
DILAUDID 1MG/ML AMPUL	B	$$$			
DILAUDID ORAL LIQ 1MG/1ML	B	$$$			
OXYCONTIN 10MG TABLET	B	$$$$			
OXYCONTIN 20MG TABLET SA	B	$$$$			
[illegible]CONTIN 40MG TABLET SA	B	$$$$			
[illegible] CONTIN 80MG TAB	B	$$$$			
DURAGESIC 100 MCG/HR PATCH	B	$$$$$			
DURAGESIC 25MCG PATCH	B	$$$$$			

	F	Cost	Scripts	Spendir	Substitute
DURAGESIC 50MCG/HR PATCH	B	$$$$$			
DURAGESIC 75MCG/HR PATCH	B	$$$$$			
FENTANYL 100 MCG/HR PATCH	G	$$$$$			
FENTANYL 25 MCG/HR PATCH	G	$$$$$			
FENTANYL 50 MCG/HR PATCH	G	$$$$$			
FENTANYL 75 MCG/HR PATCH	G	$$$$$			
DILAUDID 4MG TABLET	B	NF			HYDROMORPHONE 4MG TABLET
MS CONTIN 100 MG TABLET SA	B	NF			
MS CONTIN 15 TAB	B	NF			
MS CONTIN 30MG TABLET	B	NF			
MS CONTIN 60MG TABLET SA	B	NF			

.1.2 Combination Narcotic/Analgesics

ACET/CODEINE #3 120/12	G	$			
ACETAMINOPHEN/COD #3 TAB	G	$			
ACETAMINOPHEN/COD #4 TABLET	G	$			
ACETAMINOPHEN/COD ELIXIR	G	$			
ASA/APAP/CAFFEINE	G	$			
BUTA/CAFFEINE/ACET	G	$			
BUTALBITAL/APAP/CAFFEINE TB	G	$			
BUTALBITAL/ASA/ CAFFEINE	G	$			
BUTALBITAL/ASA/CAF/COD CAP	G	$			
BUTALBITAL/CAFF/APAP/COD CP	G	$			
EPIDRIN CAPSULE	G	$			
HYDRCODONE/APAP 10/500	G	$			
HYDROCOD 5MG/325MG	G	$			
HYDROCODONE BT-IBUPROFEN TB	G	$			
HYDROCODONE/APAP 5/500	G	$			
HYDROCODONE/APAP 7.5/500	G	$			
HYDROCODONE/APAP 10/325 TAB	G	$			
HYDROCODONE/APAP 10/500 TAB	G	$			
HYDROCODONE/APAP 10/650	G	$			
HYDROCODONE/APAP 2.5/500 TB	G	$			
HYDROCODONE/APAP 7.5/500MG	G	$			
HYDROCODONE/APAP 7.5/650	G	$			
HYDROCODONE/APAP 7.5/650 TB	G	$			
HYDROCODONE/APAP 7.5/750 TB	G	$			
HYDROCODONE/APP 7.5/325MG	G	$			
HYDROCODONE-APAP 7.5-500 MG	G	$			
HYDROCODONE-APAP SOLUTION	G	$			
ENDOCET 10/325MG TABLET	G	$$			
ENDOCET 10/650 MG TABLET	G	$$			
ENDOCET 5/325 TABLET	G	$$			
ENDOCET 7.5/500MG TABLET	G	$$			
OXYCODONE W/APAP 5/500 CAP	G	$$			
OXYCODONE-APAP 7.5-325MG TB	G	$$			
ROXICET 5/325 ORAL SOLUTION	B	$$			
ROXICET 5/325 TABLET	B	$$			
COMBUNOX TABLET	B	NF			OXYCODONE W/APAP 5/500 CAP
DOLGIC PLUS TAB	B	NF			
FIORINAL TABLETS	B	NF			BUTALBITAL/ASA/ CAFFEINE
LORCET 10/650 TABLET	B	NF			HYDROCODONE/APAP 10/650
LORTAB 5/500 TABLET	B	NF			HYDROCODONE/APAP 5/500
PROMETHAZINE(MEPERGANFORTIS)	B	NF			PROMETHAZINE 50MG TAB
PERCOCET 10MG/325MG TABLET	B	NF			
PERCOCET 5/325MG TABLET	B	NF			
TYLOX 5/500 CAPSULE	B	NF			OXYCODONE W/APAP 5/500 CAP

	F	Cost	Scripts	Spendir	Substitute
VICODIN 5/500 TABLET	B	NF			HYDROCODONE/APAP 5/500
VICOPROFEN 200/7.5 TABLET	B	NF			HYDROCODONE/APAP 5/500

.2.0 Propoxyphene

PROPOXY-N/APAP 100/650	G	$			
PROPOXY-N/APAP 50-325 TAB	G	$			
PROPOXYPHENE/APAP 65/650 TB	G	$			
DARVOCET-N 100 TABLET	B	$$			
DARVON-N 100 MG TABLET	B	$$			
DARVON COMPOUND 32 PULVULE	B	NF			

.3.1.1 NSAIDS

DICLOFENAC POT 50MG TABLET	G	$			
DICLOFENAC SOD 50MG TAB	G	$			
DICLOFENAC SOD 75MG TAB	G	$			
ETODOLAC 200MG CAPSULE	G	$			
ETODOLAC 300MG CAP	G	$			
ETODOLAC 400MG TAB	G	$			
ETODOLAC 500MG TABLET	G	$			
IBU 200MG + PSEUDO60MG	G	$			
IBU 600MG + PSEUDO60MG	G	$			
IBUP 200MG U/D UNIT DOSE	G	$			
IBUPROFEN 100 MG/5 ML SUSP	G	$			
IBUPROFEN 200 MG TABLET	G	$			
IBUPROFEN 200MG TABLET	G	$			
IBUPROFEN 200MG TABLET	G	$			
IBUPROFEN 400MG TABLET	G	$			
IBUPROFEN 600MG TABLET	G	$			
IBUPROFEN 800MG TABLET	G	$			
IBUPROFEN SUSP 100MG/5ML	G	$			
INDOMETHACIN 25MG CAPSULE	G	$			
INDOMETHACIN 50MG CAPSULE	G	$			
INDOMETHACIN 75MG CAP SA	G	$			
KETOPROFEN 50MG CAPSULE	G	$			
KETOPROFEN 75MG CAPSULE	G	$			
MOTRIN 400MG TABLET	G	$			
MOTRIN 600MG TABLET	G	$			
MOTRIN 800MG TAB	G	$			
MOTRIN 800MG TABLET	G	$			
NAPROXEN 250MG TABLET	G	$			
NAPROXEN 375MG	G	$			
NAPROXEN 500MG TABLET	G	$			
NAPROXEN 500MG TABLET EC	G	$			
NAPROXEN SOD. 275 MG TAB	G	$			
NAPROXEN SODIUM 220MG TAB	G	$			
NAPROXEN SODIUM 550MG	G	$			
PIROXICAM 10MG CAPSULE	G	$			
PIROXICAM 20MG CA P	G	$			
SULINDAC 150MG TABLET	G	$			
SULINDAC 200MG TABLET	G	$			
MECLOFENAMATE 100MG CAPSULE	G	$$			
OXAPROZIN 600MG TABLET	G	$$			
ETODOLAC 400MG SA	G	$$$			
ETODOLAC 500MG TABLET SA	G	$$$			
NABUMETONE 500MG TAB	G	$$$			
NABUMETONE 750MG TABLET	G	$$$			

	F	Cost	Scripts	Spendir	Substitute
MOBIC 15MG TABLET	B	$$$$			
MOBIC 7.5MG	B	$$$$			
ARTHROTEC 50 TABLET EC	B	NF			CELEBREX 200MG CA PSULE
ARTHROTEC EC 75MG TABS	B	NF			CELEBREX 200MG CA PSULE
DAYPRO 600MG CAPLET	B	NF			OXAPROZIN 600MG TABLET
INDOCIN 50MG CAPSULE	B	NF			INDOMETHACIN 50MG CAPSULE
LODINE 300MG CAP	B	NF			ETODOLAC 300MG CAP
NAPROSYN 500MG TABLET	B	NF			NAPROXEN 500MG TABLET
ORUDIS 50MG CAPSULE	B	NF			KETOPROFEN 50MG CAPSULE
ORUDIS 75MG CAPSULE	B	NF			KETOPROFEN 75MG CAPSULE
RELAFEN 500MG TAB	B	NF			NABUMETONE 500MG TAB
TORADOL 10MG TABLET	B	NF			IBUPROFEN 800MG TABLET
TORADOL 30MG/ML VIAL	B	NF			IBUPROFEN 800MG TABLET
VOLTAREN 75MG TABLET EC	B	NF			DICLOFENAC SOD 75MG TAB
.3.1.2 NSAIDS-Specific Cox-2 Inhibitors					
BEXTRA 10MG TAB	B	$$$$			
BEXTRA 20MG TABLET	B	$$$$			
CELEBREX 100MG CA PSULE	B	$$$$			
CELEBREX 200MG CA PSULE	B	$$$$			
VIOXX 12.5MG TABLET	B	$$$$			
VIOXX 25MG TABLET	B	$$$$			
VIOXX 50MG TABLET	B	$$$$			
.3.2 Salicylates					
CHOLINE MAG TRISAL 500 MG T	G	$			
CHOLINE MAG TRISAL 750MG TB	G	$			
SALCID 500MG TABLET	G	$			
SALSALATE 500MG TABLET	G	$			
DIFLUNISAL 500MG TABLET	G	$$$			
.3.3 Misc. Analgesics					
TRAMADOL HCL 50MG TAB	G	$$			
PENTAZOC/APAP 25/650MG	G	$$$			
TRAMADOL HCL-ACETAMINOPHEN	G	$$$			
TALACEN	B	NF			PENTAZOC/APAP 25/650MG
ULTRACET TABLET	B	NF			TRAMADOL HCL-ACETAMINOPHEN
ULTRAM 50MG TABLET	B	NF			TRAMADOL HCL 50MG TAB
.3.4 Narcotic Antagonists					
NALTREXONE 50MG TABLET	G	$$$$			
SUBOXONE 8MG TABLET	B	$$$$$$			
.4.1 Headache Therapy					
CAFERGOT TABLET	B	$			
RELPAX 40MG	B	$$$$			
IMITREX 100MG TABLET	B	$$$$$			
IMITREX 20MG NASAL SPRAY	B	$$$$$			
IMITREX 25 MG	B	$$$$$			

	F	Cost	Scripts	Spendin	Substitute
IMITREX 5 MG NASAL SPRAY	B	$$$$$			
IMITREX 50MG TABLET	B	$$$$$			
IMITREX 6MG/0.5ML VIAL	B	$$$$$			
M[illegible]ALT 10MG TABLET	B	$$$$$			
M[illegible]ALT 5 MG TABLET	B	$$$$$			
MAXALT MLT 5MG TABLET	B	$$$$$			
ZOMIG 2.5 MG TABLET	B	$$$$$			
ZOMIG 5 MG NASAL SPRAY	B	$$$$$			
ZOMIG 5MG TABLET	B	$$$$$			
MIDRIN	B	NF			
MIDRIN CAPSULE	B	NF			
.4.2 Antivertigo & Antiemetic Drugs					
MECLIZINE 25MG TABLET	G	$			
TEBAMIDE 200MG SUPPOSITORY	G	$			
TRIMETHOBENZAMIDE 100MG/ML	G	$			
TRIMETHOBENZAMIDE 200MG SUP	G	$			
PROCHLORPERAZINE 5 MG TAB	G	$$			
PROCHLORPERAZINE 10MG	G	$$			
PROCHLORPERAZINE 5MG/ML-10M	G	$$			
PROMETHAZINE 25MG TABLET	G	$$			
PROMETHAZINE 25MG/ML AMPUL	G	$$			
PROMETHAZINE 25MG/ML VL	G	$$			
PROMETHAZINE 50MG TAB	G	$$			
PROMETHAZINE 50MG/ML AMPUL	G	$$			
PROMETHAZINE 50MG/ML VIAL	G	$$			
PROMETHAZINE 6.25MG/5ML SYR	G	$$			
TR[illegible]NSDERM-SCOP 1.5MG/72HR	B	$$			
PROCHLORPERAZINE 25MG SUP	G	$$$			
PROMETHAZINE 25MG SUPP	G	$$$			
PROMETHEGAN 25MG SUPP	G	$$$			
PROMETHEGAN 50MG SUPP	G	$$$			
ZOFRAN 4MG TABLET	B	$$$$$$			
ZOFRAN 8MG TABLET	B	$$$$$$			
ZOFRAN ODT 8MG TABLET	B	$$$$$$			
COMPAZINE 10MG TABLET	B	NF			PROCHLORPERAZINE 10MG
COMPRO SUPP 25MG	B	NF			
PHENERGAN 12.5 SUPPOSITORY	B	NF			
PHENERGAN 25MG SU PP	B	NF			PROMETHAZINE 25MG SUPP
PHENERGAN 50MG SUPPOSITOR	B	NF			
.5.0 Antiparkinsonism Agents					
BENZTROPINE MES 0.5MG	G	$			
BENZTROPINE MES 1MG TABLET	G	$			
BENZTROPINE MES 2MG TAB	G	$			
TRIHEXYPHENIDYL 5MG TAB	G	$			
TRIHEXYPHENIDYL 2MG TABLET	G	$			
CARBIDOPA/LEVO 10/100 TAB	G	$$			
CARBIDOPA/LEVO 25/100MG	G	$$			
C[illegible]BIDOPA/LEVO 25/250 TAB	G	$$			
CARB/LEVO SR 25/100	G	$$$			
CARBI/LEVO 50/200 200 SA	G	$$$			
KEMADRIN 5 MG TABLET	B	$$$			

	F	Cost	Scripts	Spendir	Substitute
MIRAPEX 0.125 MG TABLET	B	$$$			
MIRAPEX 0.25 MG TABLET	B	$$$			
MIRAPEX 0.5 MG TABLET	B	$$$			
MIRAPEX 1.5 MG TABLET	B	$$$			
REQUIP 1MG TABLET	B	$$$$			
REQUIP 2MG TABLET	B	$$$$			
REQUIP 3MG TABLET	B	$$$$			
ARTANE 2MG TABLET	B	NF			TRIHEXYPHENIDYL 2MG TABLET
COGENTIN 1MG TABLET	B	NF			BENZTROPINE MES 1MG TABLET
COGENTIN 1MG/ML	B	NF			
CONGENTIN 1MG/ML	B	NF			

6.0 Anticonvulsants

ACETAZOLAMIDE 250M	G	$			
ACETAZOLAMIDE 250MG TABLET	G	$			
CARBAMAZEPINE 100/5ML	G	$			
CARBAMAZEPINE 200 MG TAB	G	$			
CARBAMZEPINE 100MG	G	$			
CARBAZEPINE 100MG	G	$			
CLONAZEPAM 0.5MG TABLET	G	$			
CLONAZEPAM 1MG	G	$			
CLONAZEPAM 1MG TABLET	G	$			
CLONAZEPAM 2MG	G	$			
DILANTIN 30MG KAPSEAL	B	$			
PHENOBARBITAL 100MG	G	$			
PHENOBARBITAL 130MG/ML VIAL	G	$			
PHENOBARBITAL 15MG TABLET	G	$			
PHENOBARBITAL 16.2MG TABLET	G	$			
PHENOBARBITAL 20MG/5ML ELIX	G	$			
PHENOBARBITAL 30M G TABLET	G	$			
PHENOBARBITAL 32.4MG TAB	G	$			
PHENOBARBITAL 60MG TAB	G	$			
PHENOBARBITAL 65MG/ML VIAL	G	$			
PHENOBARBITAL TABLT 30MG	G	$			
PHENYTEK 300MG CAPSULE	B	$			
PHENYTOIN 100MG CAPSULE	G	$			
PHENYTOIN 100MG/2ML	G	$			
PHENYTOIN 100MG/4ML SUSP	G	$			
PHENYTOIN 100MG/4ML SUSPENS	G	$			
PHENYTOIN 100MG/ML VIAL	G	$			
PHENYTOIN 125MG/5ML SUSPEN	G	$			
PHENYTOIN SOD EXT 100MG CAP	G	$			
VALPROIC ACID 250MG CAPSULE	G	$			
VALPROIC ACID 250MG/5ML SYR	G	$			
DILANTIN 100MG KAPSEAL	B	$$			
DILANTIN 125MG/5ML SUSP	B	$$			
DILANTIN 50MG	B	$$			
DILANTIN 50MG INFATAB	B	$$			
GABAPENTIN 100 MG CAPSULE	G	$$			
GABAPENTIN 100MG TAB	G	$$			
GABAPENTIN 300 MG CAP	G	$$			
GABAPENTIN 400 MG CAPSULE	G	$$			
GABAPENTIN 600MG TAB	G	$$			
APENTIN 800 MG TABLET	G	$$			
PRIMIDONE 250MG TABLET	G	$$			
PRIMIDONE 50 MG TABLET	G	$$			
TEGRETOL 200MG XR TAB	B	$$			

		Cost	Scripts	Spend	Substitute
TEGRETOL XR 100MG TABLET SA	[illegible]	$$			
TEGRETOL XR 400 MG TABLET S	B	$$			
C[illegible]BATROL 200MG CAPSULE SA	B	$$$			
[illegible]BATROL 300MG ER	B	$$$			
CARBATROL ER 100MG	B	$$$			
CARBOTROL 200MG CAPSULE	B	$$$			
CLONAZEPAM 0.125 MG DIS TAB	B	$$$			
CLONAZEPAM 0.25 MG DIS TAB	B	$$$			
DEPAKOTE 125 MG SPRINKLE CA	B	$$$$			
DEPAKOTE 125MG TABLET EC	B	$$$$			
DEPAKOTE 250MG TABLET	B	$$$$			
DEPAKOTE 250MG TABLET EC	B	$$$$			
DEPAKOTE 500MG TAB	B	$$$$			
DEPAKOTE ER 250MG TAB SA	B	$$$$			
DEPAKOTE ER 500MG TABLET	B	$$$$			
DIAMOX SEQUELS 500 MG CAP S	B	$$$$			
GABITRIL 12MG TABLET	B	$$$$			
GABITRIL 2MG TABLET	B	$$$$			
GABITRIL 4MG TAB	B	$$$$			
KEPPRA 250MG TABLET	B	$$$$			
KEPPRA 500MG TABLET	B	$$$$			
KEPPRA 750MG TABLET	B	$$$$			
OXCARBAZEPINE 150MG TAB	G	$$$$			
OXCARBAZEPINE 300MG TAB	G	$$$$			
OXCARBAZEPINE 600 MG TABLET	G	$$$$			
TOPAMAX 100MG TAB	B	$$$$			
TOPAMAX 100MG TABLET	B	$$$$			
TOPAMAX 200MG TABLET	B	$$$$			
T[illegible]AMAX 25MG TAB	B	$$$$			
[illegible] AMAX 50 MG TABLET	B	$$$$			
ZONISAMIDE 100MG	G	$$$$			
LAMICTAL 100MG TABLET	B	$$$$$$			
LAMICTAL 150MG TAB	B	$$$$$$			
LAMICTAL 200MG TABLET	B	$$$$$$			
LAMICTAL 25MG TABLET	B	$$$$$$			
DEPAKENE 250MG CAP	B	NF			VALPROIC ACID 250MG CAPSULE
NEURONTIN 100MG CAPSULE	B	NF			GABAPENTIN 100 MG CAPSULE
NEURONTIN 250MG/5ML SOLN	B	NF			
NEURONTIN 300MG CAPSULE	B	NF			GABAPENTIN 300 MG CAP
NEURONTIN 400MG CAPSULE	B	NF			GABAPENTIN 400 MG CAPSULE
NEURONTIN 600MG TAB	B	NF			GABAPENTIN 600MG TAB
NEURONTIN 800MG TAB	B	NF			GABAPENTIN 800 MG TABLET
TEGRETOL 100MG/5ML SUSP	B	NF			
TEGRETOL 200MG TABLET	B	NF			CARBAMAZEPINE 200 MG TAB
TRILEPTAL 150MG TAB	B	NF			
TRILEPTAL 300MG TAB	B	NF			
TRILEPTAL 600MG TABLET	B	NF			
ZONEGRAN 100 MG CAPSULE	B	NF			ZONISAMIDE 100MG

.8.1 Muscle Relaxants & Antispasmodic Agents

CARISOPRODOL 350	G	$
CARISOPRODOL COMPOUND TAB	G	$
[illegible]ISOPROLDOL/ASA 200/325	G	$
C[illegible]LORZOXAZONE 500 MG CAPLET	G	$
CHLORZOXAZONE 500MG CAPLET	G	$
CYCLOBENZAPRINE 10MG TABLET	G	$

		Cost	Scripts	Spendi	Substitute
DIAZEPAM 10MG TABLET	C	$			
DIAZEPAM 2MG TABLET	G	$			
DIAZEPAM 5 MG/ML SYRINGE	G	$			
D[illegible]EPAM 5MG TABLET	G	$			
L EPAM 5MG/ML VIAL	G	$			
DIAZEPAM 5MG/ML SYRINGE	G	$			
FLURAZEPAM 15MG CAPSULE	G	$			
FLURAZEPAM 30MG CAPSULE	G	$			
METHOCARBAMOL 500MG TABLET	G	$			
METHOCARBAMOL 750MG TABLET	G	$			
OXYBUTIN 5MG TABLET	G	$			
OXYBUTYNIN CL ER 10 MG TABL	G	$			
BACLOFEN 10MG TAB	G	$$			
ORPHENADRINE 100MG TAB SA	G	$$			
TIZANIDINE 2MG TAB	G	$$			
TIZANIDINE HCL 4MG TABLET	G	$$			
DETROL 2MG TABLET	B	$$$			
DETROL LA 2MG CAPSULE SA	B	$$$			
DETROL LA 4MG	B	$$$			
DITROPAN XL 10MG TABLET SA	B	$$$			
DITROPAN XL 5MG TABLET SA	B	$$$			
SKELAXIN 400MG TABLET	B	$$$$$			
SKELAXIN 800MG TABLET	B	$$$$$			
ROBAXIN 500MG TABLET	B	NF			METHOCARBAMOL 500MG TABLET
ROBAXIN 750MG TABLET	B	NF			METHOCARBAMOL 750MG TABLET
VALIUM 5MG TABLET	B	NF			DIAZEPAM 5MG TABLET
Z [illegible]AFLEX 4MG TABLET	B	NF			CYCLOBENZAPRINE 10MG TABLET
.8.2 Myasthenia Gravis					
MESTINON 60MG	B	$$			
PYRIDOSTIGMINE BR 60MG TAB	G	$$			
.9.1 Hypnotic Agents					
TEMAZEPAM 15MG CAPSULE	G	$			
TEMAZEPAM 30MG CAPSULE	G	$			
AMBIEN 10MG TABLET	B	$$$$			
AMBIEN 5 MG TAB	B	$$$$			
AMBIEN CR 12.5 MG TABLET	B	$$$$			
SONATA 10MG CAPSULE	B	$$$$			
.9.2.1 Tricyclics					
AMITRIP/CDP 12.5-5 TABLET	G	$			
AMITRIP/CDP 25-10 TABLET	G	$			
AMITRIP/PERPHEN 10-2 TABLET	G	$			
AMITRIP/PERPHEN 25-2 TABLET	G	$			
AMITRIP/PERPHEN 25-4 TABLET	G	$			
AMITRIPTYLINE 150MG	G	$			
AMITRIPTYLINE 100MG TABLET	G	$			
AMITRIPTYLINE 150MG TABLET	G	$			
A[illegible]TRIPTYLINE 50MG TABLET	G	$			
[illegible]RIPTYLINE 75MG TAB	G	$			
AMITRIPTYLINE HCL 50MG	G	$			
AMITRIPTYLINE HCL 10MG TAB	G	$			
AMITRYPTYLINE 25MG TABLET	G	$			

	F	Cost	Scripts	Spendir	Substitute
DOXEPIN 100MG CAPSULE	C	$			
DOXEPIN 10MG CAPSULE	G	$			
DOXEPIN 10MG/ML ORAL CONC	G	$			
DOXEPIN 150MG CAPSULE	G	$			
DOXEPIN 25MG CAPSULE	G	$			
DOXEPIN 50MG CAPSULE	G	$			
DOXEPIN 75MG CAPSULE	G	$			
IMIPRAMINE HCL 25MG TABLET	G	$			
IMIPRAMINE HCL 50MG TABLET	G	$			
NORTRIPTYLINE 50MG	G	$			
NORTRIPTYLINE 75MG	G	$			
NORTRIPTYLINE HCL 10MG CAP	G	$			
NORTRIPTYLINE HCL 25MG CAP	G	$			
AMOXAPINE 50MG	G	$$			
CLOMIPRAMINE 25MG CAP	G	$$			
CLOMIPRAMINE 50MG	G	$$			
CLOMIPRAMINE 75 MG CAPSULE	G	$$			
DESIPRAMINE 100MG TABLET	G	$$			
DESIPRAMINE 50MG TABLET	G	$$			
SURMONTIL 50MG CAPSULE	B	$$$$			
ELAVIL 50MG TABLET	B	NF			AMITRIPTYLINE 50MG TABLET
SINEQUAN 100MG CAPSULE	G	NF			DOXEPIN 100MG CAPSULE
SINEQUAN 50MG CAPSULE	G	NF			DOXEPIN 50MG CAPSULE

.9.2.2 Misc. Antidepressants

TRAZADONE 150MG TABLET	G	$			
TRAZADONE 300MG TAB	G	$			
TRAZODONE 100MG TABLET	G	$			
TRAZODONE 50MG TABLET	G	$			
BUPROPION 100MG TAB	G	$$			
BUPROPION 75MG TAB	G	$$			
BUPROPION HCL 100MG TABLET	G	$$			
MIRTAZAPINE 15MG SOLTAB	G	$$			
MIRTAZAPINE 15MG TABLET	G	$$			
MIRTAZAPINE 30 MG TAB	G	$$			
MIRTAZAPINE 30MG SOL TAB	G	$$			
MIRTAZAPINE 30MG TABLET	G	$$			
MIRTAZAPINE 45 MG	G	$$			
NEFAZODONE 100MG	G	$$			
NEFAZODONE HCL 150 MG TABLE	G	$$			
NEFAZODONE HCL 200MG TABLET	G	$$			
BUDEPRION XL 300MG	G	$$$			
EFFEXOR 100MG TAB	B	$$$$			
EFFEXOR 25MG TABLET	B	$$$$			
EFFEXOR 37.5MG TABLET	B	$$$$			
EFFEXOR 50 MG TABLET	B	$$$$			
EFFEXOR 75MG TABLET	B	$$$$			
VENLAFAXINE HCL 75 M	G	$$$$			
BUDEPRION SR 100 MG TABLET	G	$$$$$			
BUPROPION HCL SR 100MG TAB	G	$$$$$			
BUPROPION HCL SR 200 MG TAB	G	$$$$$			
BUPROPION SR 150MGTAB	G	$$$$$			
EFFEXOR XR 150MG CAPSULE SA	B	$$$$$			
EFFEXOR XR 37.5MG CAP SA	B	$$$$$			

	F	Cost	Scripts	Spendir	Substitute
EFFEXOR XR 75MG CAPSULE SA	E	$$$$$			
WELLBUTRIN XL 150MG	B	$$$$$			
DESYREL 100MG TABLET	B	NF			TRAZODONE 100MG TABLET
DESYREL 150MG TABLET	B	NF			TRAZADONE 150MG TABLET
DESYREL 50MG TABLET	B	NF			TRAZODONE 50MG TABLET
REMERON 15MG SOLTAB	B	NF			MIRTAZAPINE 15MG SOLTAB
REMERON 15MG TABLET	B	NF			MIRTAZAPINE 15MG TABLET
REMERON 30MG SOLTAB	B	NF			MIRTAZAPINE 30MG SOL TAB
REMERON 30MG TABLET	B	NF			MIRTAZAPINE 30MG TABLET
REMERON 45MG SOLTAB	B	NF			MIRTAZAPINE 45MG SOL TAB
REMERON 45MG TABLET	B	NF			MIRTAZAPINE 45 MG
SERZONE 100MG TABLET	B	NF			NEFAZODONE 100MG
SERZONE 150MG TABLET	B	NF			
SERZONE 200MG TABLET	B	NF			NEFAZODONE HCL 200MG TABLET
WELLBUTRIN 100MG TABLET	B	NF			BUPROPION 100MG TAB
WELLBUTRIN 75MG TABLET	B	NF			BUPROPION 75MG TAB
WELLBUTRIN SR 100MG TAB SA	B	NF			BUPROPION HCL SR 100MG TAB
WELLBUTRIN SR 150MG TAB SA	B	NF			BUPROPION SR 150MGTAB
WELLBUTRIN SR 200MG TAB SA	B	NF			BUPROPION HCL SR 200 MG TAB
WELLBUTRIN XL 300MG TABLET	B	NF			BUDEPRION XL 300MG

9.2.3 MAO Inhibitors

FLUOXETINE 10 MG CAP	G	$			
FLUOXETINE 10MG TAB	G	$			
FLUOXETINE 20MG CAPSULE	G	$			
FLUOXETINE 20MG/5ML SOLN	G	$			
FLUOXETINE HCL 20MG TABLET	G	$			
FLUOXETINE HCL 40MG CAPSULE	G	$			
PROZAC 20MG PULVULE	B	NF			FLUOXETINE 20MG CAPSULE
PROZAC 40MG PULVULE	B	NF			FLUOXETINE HCL 40MG CAPSULE
PROZAC 90 WEEKLY	B	NF			FLUOXETINE 20MG CAPSULE

9.2.4 Selective Serotoninn Reuptake Inhibitors

PAROXETINE 10MG TABLET	G	$$			
PAROXETINE 20MG TABLET	G	$$			
PAROXETINE 30MG TABLET	G	$$			
PAROXETINE 40MG TABLET	G	$$			
PAROXETINE HCL 40MG TABLET	G	$$			
CITALOPRAM 10 MG/5 ML SOLUT	G	$$$			
CITALOPRAM 20MG TABLET	G	$$$			
CITALOPRAM 40MG TAB	G	$$$			
CITALOPRAM HBR 10 MG TABLET	G	$$$			
FLUVOXAMINE 100MG TAB	G	$$$			
FLUVOXAMINE MALEATE 50MG TB	G	$$$			
LEXAPRO 10MG TAB	B	$$$			
LEXAPRO 20MG TAB	B	$$$			
LEXAPRO 5 MG/5 ML SOLUTION	B	$$$			
SERTRALINE 100MG	G	$$$			
SERTRALINE 50MG	G	$$$			
ZOLOFT 100MG TABLET	B	$$$			
ZOLOFT 25MG TABLET	B	$$$			
ZOLOFT 50MG TABLET	B	$$$			
CYMBALTA 20 MG CAPSULE	B	$$$$			
CYMBALTA 30 MG CAPSULE	B	$$$$			
CYMBALTA 60 MG CAPSULE	B	$$$$			
PAXIL 10MG/5ML	B	$$$$			

	F	Cost	Scripts	Spendir	Substitute
CELEXA 10MG TAB	B	NF			CITALOPRAM HBR 10 MG TABLET
CELEXA 20MG TABLET	B	NF			CITALOPRAM 20MG TABLET
CF' EXA 40MG TABLET	B	NF			CITALOPRAM 40MG TAB
L)X 100MG TABLET	B	NF			FLUVOXAMINE 100MG TAB
PAXIL 10MG TABLET	B	NF			PAROXETINE 10MG TABLET
PAXIL 20MG TABLET	B	NF			PAROXETINE 20MG TABLET
PAXIL 30MG TABLET	B	NF			PAROXETINE 30MG TABLET
PAXIL 40MG TABLET	B	NF			PAROXETINE 40MG TABLET
PAXIL CR 12.5MG	B	NF			PAROXETINE 20MG TABLET
PAXIL CR 25MG	B	NF			PAROXETINE 20MG TABLET
PAXIL CR 37.5	B	NF			PAROXETINE 20MG TABLET
.9.3.1 Phenothiazines					
CHLORPROMAZINE 100MG TAB	G	$			
CHLORPROMAZINE 10MG	G	$			
CHLORPROMAZINE 200MG TABLET	G	$			
CHLORPROMAZINE 25MG TAB	G	$			
CHLORPROMAZINE 25MG/ML AMP	G	$			
CHLORPROMAZINE 50 MG TAB	G	$			
CHLORPROMAZINE 50MG TAB	G	$			
FLUPHENAZINE 10MG TABLET	G	$			
FLUPHENAZINE 1MG TABLET	G	$			
FLUPHENAZINE 2.5MG TABLET	G	$			
FLUPHENAZINE 2.5MG/5 ML ELX	G	$			
FLUPHENAZINE 2.5MG/ML VIAL	G	$			
FLUPHENAZINE 5MG TABLET	G	$			
FLUPHENAZINE DEC 25MG/ML VL	G	$			
PERPHENAZINE 2MG TABLET	G	$			
P[illegible]PHENAZINE 4MG TABLET	G	$			
[illegible]PHENAZINE 8 MG TABLET	G	$			
TRIFLUOPERAZINE 10MG TABLET	G	$			
TRIFLUOPERAZINE 2MG TABLET	G	$			
TRIFLUOPERAZINE 5MG TABLET	G	$			
THIORIDAZINE HCL 25MG	G	$$			
SERENTIL 100MGTABS	B	$$$			
SERENTIL 10MG TABS	B	$$$			
PROLIXIN 5MG TABLET	B	NF			FLUPHENAZINE 5MG TABLET
PROLIXIN DECANOATE 25MG/ML	B	NF			FLUPHENAZINE DEC 25MG/ML VL
THORAZINE 50MG TABLET	B	NF			CHLORPROMAZINE 50 MG TAB
.9.3.2 Butyrophenones					
*HALOPERIDOL 1MG	G	$			
*HALOPERIDOL DEC 100MG/ML	G	$			
HALOPERIDOL 0.5 MG TABLET	G	$			
HALOPERIDOL 10MG TABLET	G	$			
HALOPERIDOL 1MG	G	$			
HALOPERIDOL 20MG TABLET	G	$			
HALOPERIDOL 2MG TABLET	G	$			
HALOPERIDOL 5MG TABLET	G	$			
HALOPERIDOL DEC 100MG/ML VL	G	$			
HALOPERIDOL DEC 50MG/ML	G	$			
[illegible] OPERIDOL DEC 50MG/ML VL	G	$			
HALOPERIDOL LAC 2 MG/ML CON	G	$$			
HALOPERIDOL LAC 5MG/ML VIAL	G	$$			

	F	Cost	Scripts	Spendir	Substitute
HALDOL 10MG TABLET	E	NF			HALOPERIDOL 10MG TABLET
HALDOL 5MG TABLET	B	NF			HALOPERIDOL 5MG TABLET
HALDOL 5MG/ML AMPUL	B	NF			
HALDOL DECANOATE 100 AMPUL	B	NF			HALOPERIDOL DEC 100MG/ML VL
HALDOL DECANOATE 50 AMPUL	B	NF			HALOPERIDOL DEC 50MG/ML VL

.9.3.3 Misc. Antipsychotics

THIOTHIXENE 10MG CAPSULE	G	$
THIOTHIXENE 1MG	G	$
THIOTHIXENE 2MG CAPSULE	G	$
THIOTHIXENE 5MG CAPSULE	G	$
ORAP 2MG TABLET	B	$$
LOXAPINE SUCCINATE 10 MG CA	G	$$$
LOXAPINE SUCCINATE 25MG CAP	G	$$$
LOXAPINE SUCCINATE 50MG CAP	G	$$$
LOXAPINE SUCCINATE 5MG CA	G	$$$
GEODON 20MG CAPSULE	B	$$$$
GEODON 40MG CAPSULE	B	$$$$
GEODON 60MG CAPSULE	B	$$$$
GEODON 80 MG	B	$$$$
RISPERDAL 0.25MG TABLET	B	$$$$
RISPERDAL 0.5 M-TAB	B	$$$$
RISPERDAL 0.5MG TABLET	B	$$$$
RISPERDAL 1MG TABLET	B	$$$$
RISPERDAL 2MG M-TAB	B	$$$$
RISPERDAL 2MG TABLET	B	$$$$
RISPERDAL 3MG TABLET	B	$$$$
RISPERDAL 4MG TABLET	B	$$$$
RISPERDAL CONSTA 25MG SYR	B	$$$$
RISPERDAL CONSTA 50 MG SYR	B	$$$$
RISPERDAL M 1MG	B	$$$$
SEROQUEL 100MG TABLET	B	$$$$
SEROQUEL 200MG TABLET	B	$$$$
SEROQUEL 25MG TABLET	B	$$$$
SEROQUEL 300MG TABLET	B	$$$$
SEROQUEL 400 MG TABLET	B	$$$$
SEROQUEL 50 MG TABLET	B	$$$$
SEROQUEL XR 300 MG TABLET	B	$$$$
SEROQUEL XR 400 MG TABLET	B	$$$$
SYMBYAX 12-25 MG CAPSULE	B	$$$$
SYMBYAX 12-50MG CAPSULE	B	$$$$
SYMBYAX 6-25MG CAPSULE	B	$$$$
SYMBYAX 6-50 MG CAPSULE	B	$$$$
SYMBYAX 6-50MG CAPSULE	B	$$$$
CLOZAPINE 100MG TAB	G	$$$$$$
CLOZAPINE 100MG TABLET	G	$$$$$$
CLOZAPINE 25 MG TABLET	G	$$$$$$
ZYPREXA 10MG TABLET	B	$$$$$$
ZYPREXA 15MG TABLET	B	$$$$$$
ZYPREXA 2.5MG TABLET	B	$$$$$$
ZYPREXA 20MG TABLET	B	$$$$$$
ZYPREXA 5MG TABLET	B	$$$$$$
ZYPREXA 7.5MG TABLET	B	$$$$$$
ZYPREXA ZYDIS 10MG TABLET	B	$$$$$$
ZYPREXA ZYDIS 15MG TAB	B	$$$$$$
ZYPREXA ZYDIS 20MG TAB	B	$$$$$$

		Cost	Scripts	Spendi	Substitute
ZYPREXA ZYDIS 5MG TABLET	L	$$$$$$			
ABILIFY 10MG TABLET	B	NF			
ABILIFY 15MG TABLET	B	NF			
ABILIFY 2 MG TABLET	B	NF			
ABILIFY 20MG TABLET	B	NF			
ABILIFY 30MG TABLET	B	NF			
ABILIFY 5MG TABLET	B	NF			
ABILIFY DISCMELT 15 MG TABL	B	NF			

.9.4 Misc. Psychotherapeutic Agents

LITH CARB 450MG CR TAB	G	$			
LITHIUM 300MG ER TABLET	G	$			
LITHIUM CARB 300MG TAB	G	$			
LITHIUM CARBONATE 300MG	G	$			
LITHIUM CARBONATE 150MG CAP	G	$			
LITHIUM CITRATE SYRUP 8MEQ	G	$			
METHYLPHENIDATE 10MG TABLET	G	$			
METHYLPHENIDATE 20MG TABLET	G	$			
METHYLPHENIDATE 5 MG TABLET	G	$			
ADDERALL XR 10MG CAPSULE SA	B	$$$			
ADDERALL XR 20MG CAPSULE SA	B	$$$			
ADDERALL XR 25 MG CAPSULE S	B	$$$			
ADDERALL XR 30MG CAPSULE SA	B	$$$			
AMPHETAMINE SALTS 10MG TAB	G	$$$			
AMPHETAMINE SALTS 15 MG TAB	G	$$$			
AMPHETAMINE SALTS 20MG TAB	G	$$$			
AMPHETAMINE SALTS 30MG TAB	G	$$$			
AMPHETAMINE SALTS 5MG	G	$$$			
CONCERTA 18MG TABLET SA	B	$$$			
CONCERTA 27MG TABLET SA	B	$$$			
CONCERTA 36MG TAB	B	$$$			
CONCERTA 54MG TABLET SA	B	$$$			
METADATE CD 30 MG CAPSULE	B	$$$			
STRATTERA 10MG CAPSULE	B	$$$$			
STRATTERA 18MG CAPSULE	B	$$$$			
STRATTERA 25MG CAPSULE	B	$$$$			
STRATTERA 40 MG CAPSULE	B	$$$$			
STRATTERA 60MG CAPSULE	B	$$$$			
STRATTERA CAPSULES40	B	$$$$			
PROVIGIL 100MG TABLET	B	$$$$$			
PROVIGIL 200MG TABLET	B	$$$$$			
ADDERALL 10MG TABLET	B	NF			AMPHETAMINE SALTS 10MG TAB
ADDERALL--30MG	B	NF			AMPHETAMINE SALTS 30MG TAB
DEXEDRINE SPA 10MGCAPS	B	NF			
ESKALITH CR 450MG TABLET SA	G	NF			LITH CARB 450MG CR TAB
LITHOBID 300MG TABLET SA	B	NF			LITHIUM CARBONATE 300MG
METHYLIN 10MG TABLET	B	NF			METHYLPHENIDATE 10MG TABLET
METHYLIN 20MG TABLET	B	NF			METHYLPHENIDATE 20MG TABLET
METHYLIN ER 20MG TABLET SA	B	NF			

.9.5 Anxiolytics

CHLORDIAZEPOXIDE 5MG CAP	G	$			
ALPRAZOLAM 0.25MG TABLET	G	$			
ALPRAZOLAM 0.5	G	$			
ALPRAZOLAM 0.5MG TABLET	G	$			

		Cost	Scripts	Spendi	Substitute
ALPRAZOLAM 1MG TABLET	G	$			
ALPRAZOLAM 2MG TA BLET	G	$			
CHLORDIAZEPOXIDE 25MG CAP	G	$			
CHLORDIAZEPOXIDE 10MG CP	G	$			
CHLORDIAZEPOXIDE 5MG	G	$			
LORAZEPAM 0.5MG TABLET	G	$			
LORAZEPAM 0.5MG TALET	G	$			
LORAZEPAM 1MG TABLET	G	$			
LORAZEPAM 2MG TABLET	G	$			
LORAZEPAM 2MG/ML CARPUJECT	G	$			
LORAZEPAM 2MG/ML CARPUJET	G	$			
LORAZEPAM 2MG/ML VIAL	G	$			
BUSPIRONE 10MG TABLET	G	$$			
BUSPIRONE 5MG TABLET	G	$$			
BUSPIRONE HCL 15MG TABLET	G	$$			
BUSPIRONE HCL 30MG TABLET	G	$$			
CLORAZEPATE 7.5MG TABLET	G	$$			
OXAZEPAM 10MG CAPSULE	G	$$			
OXAZEPAM 15MG CAPSULE	G	$$			
OXAZEPAM 30MG CAPSULE	G	$$			
ALPRAZOLAM XR 1 MG TABLET	G	$$$			
ALPRAZOLAM XR 2 MG TABLET	G	$$$			
BUSPAR 5MG TABLET	B	NF			BUSPIRONE 5MG TABLET
XANAX 0.5MG TABLET	B	NF			ALPRAZOLAM 0.5
XANAX 2MG TABLET	B	NF			ALPRAZOLAM 2MG TA BLET
XANAX XR 2MG TABLET	B	NF			ALPRAZOLAM 1MG TABLET
.1.0 Antiarrhythmic Agents					
AMIODARONE 200MG TABLET	G	$$			
DISOPYRAMIDE 100MG CAPSULE	G	$$			
PROCAINAMIDE 250MG CAPSULE	G	$$			
PROCAINAMIDE 500MG CAPSULE	G	$$			
FLECAINIDE ACETATE 100MG TB	G	$$$			
FLECAINIDE ACETATE 50 MG TA	G	$$$			
SOTALOL 120MG TABLET	G	$$$			
SOTALOL 80MG TABLET	G	$$$			
BETAPACE 80MG	B	NF			SOTALOL 80MG TABLET
TAMBOCOR 100MG TABLET	B	NF			FLECAINIDE ACETATE 100MG TB
TAMBOCOR 150MG TABLET	B	NF			
.2.0 Cardiac Glycosides					
DIGOXIN 0.125MG TAB	G	$$			
DIGOXIN 0.25 MG/ML AMPUL	G	$$			
DIGOXIN 0.25MG	G	$$			
DIGOXIN 0.25MG/ML SYRINGE	G	$$			
LANOXIN 125MCG TABLET	B	NF			DIGOXIN 0.125MG TAB
LANOXIN 250MCG TABLET	B	NF			DIGOXIN 0.25MG
.3.1 Rapid Acting Nitrates					
NITROQUICK 0.3 MG TABLET SL	G	$			
NITROQUICK 0.4%	G	$			
NITROLINGUAL 0.4MG SPRAY	B	$$$			

	F	Cost	Scripts	Spendir	Substitute
NITROSTAT 0.4MG TAB SL	E	$$$			
NITROSTAT 0.4MG TABLET SL	B	$$$			
NITROSTAT 0.6MG TABLET SL	B	$$$			
3. Long Acting Nitrates					
IMDUR 30MG TABLET SA	B	$			
ISOSORBIDE DINITRATE 40MG T	G	$			
ISOSORBIDE DN 10MG TABLET	G	$			
ISOSORBIDE DN 20MG TABLET	G	$			
ISOSORBIDE DN 30MG TABLET	G	$			
ISOSORBIDE DN 5 MG TABLET	G	$			
ISOSORBIDE MN 20MG TABLET	G	$			
ISOSORBIDE MN 30MG	G	$			
ISOSORBIDE MN 30MG TAB SA	G	$			
ISOSORBIDE MONO 60MG ER	G	$			
NITROGLYCERIN 2.5 MG CAP SA	G	$$			
NITROGLYCERIN 5MG/ML VIAL	G	$$			
NITROGLYCERIN 6.5 MG CAP	G	$$			
NITROGLYCERIN 6.5MG CAP SA	G	$$			
NITROGLYCERIN SL 1/150	G	$$			
NITROGLYCERIN .2MG/HR PATCH	G	$$$			
NITROGLYCERIN .4MG/HR PATCH	G	$$$			
NITROGLYCERIN 0.1MG/HR PTCH	G	$$$			
NITROBID 2% OINT	B	$$$$			
NITRO-BID 2% OINTMENT	B	$$$$			
NITRO-BID 2% OINTMENT UD	B	$$$$			
NITRO-DUR 0.1MG/HR PATCH	B	$$$$			
I O-DUR 0.2MG/HR PATCH	B	$$$$			
NITRO-DUR 0.3MG/HR PATCH	B	$$$$			
NITRODISC 0.2MG/H R PATCH	B	NF			NITRO-DUR 0.2MG/HR PATCH
4.1 Anticoagulants					
WARFARIN 10MG TABLET	G	$$			
WARFARIN 2.5MG TABLET	G	$$			
WARFARIN 2MG TAB	G	$$			
WARFARIN 5MG TAB	G	$$			
WARFARIN 5MG TABLE	G	$$			
WARFARIN 6MG TABLETS	G	$$			
WARFARIN 7.5MG TABLET	G	$$			
WARFARIN SODIUM 10MG TABLET	G	$$			
WARFARIN SODIUM 1MG TABLET	G	$$			
WARFARIN SODIUM 3MG TABLET	G	$$			
WARFARIN SODIUM 4MG TABLET	G	$$			
COUMADIN 10MG TAB	B	NF			WARFARIN 10MG TABLET
COUMADIN 1MG TABLET	B	NF			WARFARIN SODIUM 1MG TABLET
COUMADIN 2.5MG TABLET	B	NF			WARFARIN 2.5MG TABLET
COUMADIN 5MG TABLET	B	NF			WARFARIN 5MG TAB
COUMADIN 6MG TABLETS	B	NF			WARFARIN 6MG TABLETS
COUMADIN 7.5MG TABLET	B	NF			WARFARIN 7.5MG TABLET
4.2 Antiplatelet Drugs					
DIPRYIDAMOLE 25MG	G	$			
DIPYRIDAMOLE 25 MG TABLET	G	$			
DIPYRIDAMOLE 50 MG TABLET	G	$			

	F	Cost	Scripts	Spendir	Substitute
AGGRENOX CAPSULE SA	B	$$$$$			
CILOSTAZOL 100 MG TABLET	G	$$$$$			
CI' OSTAZOL 50 MG TABLET	G	$$$$$			
('IDOGREL 75MG	G	$$$$$			
PLAVIX 75MG TABLET	B	$$$$$			
PLETAL 100MG	B	NF			CILOSTAZOL 100 MG TABLET

.4.3 Heparin

HEPARIN 1000U/ML 5ML SYR	G	$$$$			
HEPARIN 5000U	G	$$$$			
HEPARIN NA 1,000U/ML VIAL	G	$$$$			
HEPARIN NA 5,000U/ML SYRING	G	$$$$			
HEPARIN NA 5,000U/ML VIAL	G	$$$$			
FRAGMIN 10000IU/ML VIAL	B	$$$$$$			
FRAGMIN 5000U SYRINGE	B	$$$$$$			
LOVENOX 100MG PREFILLED SYR	B	$$$$$$			
LOVENOX 100MG/ML	B	$$$$$$			
LOVENOX 120MG PREFILLED SYR	B	$$$$$$			
LOVENOX 150 MG PREFILLED SY	B	$$$$$$			
LOVENOX 30MG PREFILLED SYRN	B	$$$$$$			
LOVENOX 40MG PREFILLED SYRN	B	$$$$$$			
LOVENOX 60 MG PREFILLED SYR	B	$$$$$$			
LOVENOX 80MG PREFILLED SYRN	B	$$$$$$			

.4.4 Vitamin K

MEPHYTON 5MG TAB	B	$$			

.4.6 Misc. Coagulation Agents

PENTOXIFYLLINE 400MG TAB	G	$$			

.5.1 Thiazide & Related Diuretics

BUMETANIDE 0.5MG TABLET	G	$			
BUMETANIDE 1MG TABLET	G	$			
BUMETANIDE 2MG TABLET	G	$			
CHLORTHALIDONE 25 MG TABLET	G	$			
CHLORTHALIDONE 50MG TABLET	G	$			
FUROSEMIDE 10MG/ML SYRINGE	G	$			
FUROSEMIDE 10MG/ML VIAL	G	$			
FUROSEMIDE 20MG TABLET	G	$			
FUROSEMIDE 40MG TABLET	G	$			
FUROSEMIDE 80MG TABLET	G	$			
HCTZ 12.5MG CAPSULE	G	$			
HCTZ 25MG TABLET	G	$			
HCTZ 50MG TABLET	G	$			
INDAPAMIDE 1.25MG TABLET	G	$			
INDAPAMIDE 2.5MG TABLET	G	$			
SPIRONOLACT/HCTZ 25/25 TAB	G	$			
SPIRONOLACTONE 50MG TAB	G	$			
SPIRONOLACTONE 100MG TAB	G	$			
SPIRONOLACTONE 25	G	$			
TR'AM/HCT 37.5/25MG CAPS	G	$			
.M/HCTZ 37.5/2 5 TAB	G	$			
TRIAM/HCTZ 37.5/25	G	$			
TRIAMTERENE/HCTZ 50/25	G	$			
TRIAMTERENE/HCTZ 37.5/25	G	$			

	F	Cost	Scripts	Spendir	Substitute
TRIAMTERENE/HCTZ 75/50 TAB	G	$			
METOLAZONE 2.5 MG TABLET	G	$$			
METOLAZONE 5MG TABLET	G	$$			
TORSEMIDE 20MG TABLET	G	$$			
DEMADEX 20MG TAB	B	NF			TORSEMIDE 20MG TABLET
HYDRODIURIL 25MG TABLET	B	NF			HCTZ 25MG TABLET
HYDRODIURIL 50MG TABLET	B	NF			HCTZ 50MG TABLET
LASIX 40MG TABLET	B	NF			FUROSEMIDE 40MG TABLET
LASIX 80MG TABLET	B	NF			FUROSEMIDE 80MG TABLET
THALITONE 15MG TABLET	B	NF			
ZAROXOLYN 10MG TABLET	B	NF			METOLAZONE 10MG TABLET
ZAROXOLYN 5MG TABLET	B	NF			METOLAZONE 5MG TABLET
5.2 Beta Blockers					
ATEN/CHLORTHAL 100MG/25MG	G	$			
ATENOLOL 100MG TABLET	G	$			
ATENOLOL 25MG TABLET	G	$			
ATENOLOL 50MG TAB	G	$			
METOPROLOL 100MG TABLET	G	$			
METOPROLOL 25MG TABLET	G	$			
METOPROLOL 50MG TABLET	G	$			
METOPROLOL-HCTZ 50/25MG TAB	G	$			
NADOLOL 20MG	G	$			
NADOLOL 80 MG TABLET	G	$			
PROPRANOLOL 10MG TABLET	G	$			
PROPRANOLOL 20MG TAB	G	$			
PROPRANOLOL 60MG TAB	G	$			
PROPRANOLOL 80MG TAB	G	$			
PROPRANOLOL HCL 40MG TAB	G	$			
TIMOLOL MALEATE 10MG TABLET	G	$			
ACEBUTOLOL 200MG	G	$$			
ACEBUTOLOL 200MG CAPSULE	G	$$			
ACEBUTOLOL 400MG CAPSULE	G	$$			
LABETALOL 100MG TAB	G	$$			
LABETALOL 200MG TAB	G	$$			
LABETALOL 200MG TABLET	G	$$			
LABETALOL HCL 300MG TABLET	G	$$			
METOPROLOL SUCC ER 100 MG T	G	$$			
METOPROLOL SUCC ER 200 MG T	G	$$			
METOPROLOL SUCC ER 25 MG TA	G	$$			
METOPROLOL SUCC ER 50 MG TA	G	$$			
BISOPROLOL FUMARATE 10 MG T	G	$$$			
BISOPROLOL FUMARATE 5MG TAB	G	$$$			
CARVEDILOL 12.5	G	$$$			
CARVEDILOL 25MG	G	$$$			
CARVEDILOL 3.125MG	G	$$$			
CARVEDILOL 6.25MG	G	$$$			
INDERAL LA 120MG CAPSULE SA	B	$$$			
INDERAL LA 60MG CAPSULE SA	B	$$$			
INDERAL LA 80MG CAP	B	$$$			
COREG CR 20 MG CAPSULE	B	$$$$$			
COREG CR 40 MG CAPSULE	B	$$$$$			
COREG 12.5 MG	B	NF			
COREG 25MG TABLET	B	NF			

	F	Cost	Scripts	Spendir	Substitute
COREG 3.125MG TAB	B	NF			
COREG 6.25	B	NF			
INNOPRAN XL 80MG CAPSULE SA	B	NF			
L[illegible]RESSOR 100MG TABLET	B	NF			METOPROLOL 100MG TABLET
L [illegible]RESSOR 50MG TABLET	B	NF			METOPROLOL 50MG TABLET
NORMODYNE 100MG TABLET	B	NF			LABETALOL 100MG TAB
TENORMIN 25MG	B	NF			ATENOLOL 25MG TABLET
TENORMIN 50MG TABLET	B	NF			ATENOLOL 50MG TAB
TOPROL XL 100MG TABLET SA	B	NF			
TOPROL XL 200MG TABLET	B	NF			
TOPROL XL 25MG TABLET SA	B	NF			METOPROLOL SUCC ER 25 MG TA
TOPROL XL 50MG TABLET SA	B	NF			
ZEBETA 5MG TABLET	B	NF			BISOPROLOL FUMARATE 5MG TAB

.5.3.1 Calcium Channel Blockers/ Non-dihydropyridines

DILTIAZEM 120MG TABLET	G	$			
DILTIAZEM 30MG TABLET	G	$			
DILTIAZEM 60MG TABLET	G	$			
DILTIAZEM 90MG TABLET	G	$			
VERAPAMIL 120MG SR CAPLET	G	$			
VERAPAMIL 120MG TABLET	G	$			
VERAPAMIL 120MG TABLET SA	G	$			
VERAPAMIL 180MG CAP	G	$			
VERAPAMIL 180MG SRTAB	G	$			
VERAPAMIL 2.5MG/ML AMPUL	G	$			
VERAPAMIL 240MG SR TABLET	G	$			
VERAPAMIL 40MG TABLET	G	$			
VERAPAMIL 80MG TAB	G	$			
VERAPAMIL SR 360MG	G	$			
L [illegible]IAZEM 180MG ERCAP	G	$$			
DILTIAZEM 360MG ERCAP	G	$$			
DILTIAZEM ER 180MG CAP SA	G	$$			
DILTIAZEM ER 240MG CAP	G	$$			
DILTIAZEM ER 300MGCAPSULE	G	$$			
DILTIAZEM ER 90 MG CAP SA	G	$$			
DILTIAZEM HYDR 120MG ER	G	$$			
VERAPAMIL 180MG CAP PELLET	G	$$			
CALAN SR 180MG	G	NF			VERAPAMIL 180MG SRTAB
CARDIZEM 360MG CAP	B	NF			DILTIAZEM 360MG ERCAP
CARDIZEM CD 240MG CAP	B	NF			DILTIAZEM ER 240MG CAP
TAZTIA XT 360MG CAPSULE	B	NF			DILTIAZEM 360MG ERCAP
TIAZAC 420MG CAPSULE SA	B	NF			
VERELAN 360MG CAP PELLET	B	NF			

.5.3.2 Calcium Channel Blockers/ Dihydropyridines

NIFEDIPINE 10MG CAP	G	$			
NIFEDIPINE 20MG CAPSULE	G	$			
FELODIPINE ER 10 MG TABLET	G	$$			
FELODIPINE ER 2.5 MG TABLET	G	$$			
FELODIPINE ER 5 MG TABLET	G	$$			
AMLODIPINE BESYLATE 10MG	G	$$$			
A [illegible]ODIPINE BESYLATE 5MG	G	$$$			
N [illegible]DIPINE CC 60MG TAB ER	G	$$$			
NIFEDIPINE ER 30MG TAB SA	G	$$$			
NIFEDIPINE ER 60MG TABLET	G	$$$			
NIFEDIPINE ER 90MG TAB SA	G	$$$			

	F	Cost	Scripts	Spendir	Substitute
NORVASC 2.5MG TABLET	B	$$$			
AMLODIPINE BES. 2.5MG	B	$$$$			
AMLODIPINE BESYLATE 2.5 MG	B	$$$$			
ADALAT CC 30MG	B	NF			NIFEDIPINE ER 30MG TAB SA
ADALAT CC 90MG TABLET	B	NF			NIFEDIPINE ER 90MG TAB SA
DYNACIRC 2.5MG	B	NF			FELODIPINE ER 2.5 MG TABLET
DYNACIRC 5MG CAPSULE	B	NF			FELODIPINE ER 5 MG TABLET
DYNACIRC CR 10MG TABLET SA	B	NF			FELODIPINE ER 10 MG TABLET
DYNACIRC CR 5 MG TABLET SA	B	NF			
NORVASC 10MG TAB	B	NF			AMLODIPINE BESYLATE 10MG
NORVASC 5MG TABLE T	B	NF			AMLODIPINE BESYLATE 5MG
PLENDIL 10MG	B	NF			FELODIPINE ER 10 MG TABLET
PLENDIL 2.5MG TABLET SA	B	NF			FELODIPINE ER 2.5 MG TABLET
PLENDIL 5MG TABLET	B	NF			FELODIPINE ER 5 MG TABLET
PROCARDIA XL 30MG TABLET	B	NF			NIFEDIPINE ER 30MG TAB SA
PROCARDIA XL 60MG TABLET SA	B	NF			NIFEDIPINE ER 60MG TABLET
SULAR 20MG TABLET SA	B	NF			
SULAR 30 MG TABLET	B	NF			

.5.4 ACE Inhibitors

CAPTOPRIL 100MG	G	$			
CAPTOPRIL 12.5MG TABLET	G	$			
CAPTOPRIL 25MG TABLET	G	$			
CAPTOPRIL 50MG TABLET	G	$			
BENAZEPRIL 20MG TAB	G	$$			
BENAZEPRIL HCL 10MG TABLET	G	$$			
BENAZEPRIL HCL 20MG TABLET	G	$$			
AZEPRIL HCL 40MG TABLET	G	$$			
ENALAPRIL 10MG TABLET	G	$$			
ENALAPRIL 2.5MG	G	$$			
ENALAPRIL 20MG TABLET	G	$$			
ENALAPRIL 5MG TABLET	G	$$			
ENALAPRIL MALEATE 10MG TAB	G	$$			
FOSINOPRIL 10MG	G	$$			
FOSINOPRIL 20MG TAB	G	$$			
FOSINOPRIL 40MG	G	$$			
FOSINOPRIL SODIUM 20MG TAB	G	$$			
LISINOPRIL 10MG TABLET	G	$$			
LISINOPRIL 2.5MG TBLET	G	$$			
LISINOPRIL 20MG TALET	G	$$			
LISINOPRIL 40MG TABLET	G	$$			
LISINOPRIL 5MG TABLET	G	$$			
UNIVASC 15MG TABLET	B	$$			
UNIVASC 7.5MG TABLET	B	$$			
ACEON 4MG TABLET	B	$$$			
ALTACE 2.5MG CAPSULE	B	$$$			
QUINAPRIL 10 MG TABLET	G	$$$			
QUINAPRIL 20MG	G	$$$			
QUINAPRIL 40 MG TABLET	G	$$$			
RAMIPRIL 10 MG CAPSULE	G	$$$			
RAMIPRIL 5 MG CAPSULE	G	$$$			
UPRIL 10MG TABLET	B	NF			QUINAPRIL 10 MG TABLET
ACCUPRIL 20MG TABLET	B	NF			QUINAPRIL 20MG
ACCUPRIL 40MG TABLET	B	NF			QUINAPRIL 40 MG TABLET
ACCUPRIL 5MG TAB	B	NF			

	F	Cost	Scripts	Spendir	Substitute
ALTACE 10MG CAP	B	NF			
ALTACE 5MG CAPSULE	B	NF			
CAPOTEN 12.5MG TABLET	B	NF			CAPTOPRIL 12.5MG TABLET
CAPOTEN 25MG TABLET	B	NF			CAPTOPRIL 25MG TABLET
CAPOTEN 50MG TABLET	B	NF			CAPTOPRIL 50MG TABLET
LOTENSIN 10MG TABLET	B	NF			BENAZEPRIL HCL 10MG TABLET
LOTENSIN 20MG TAB LET	B	NF			BENAZEPRIL HCL 20MG TABLET
LOTENSIN 40 MG TAB	B	NF			BENAZEPRIL HCL 40MG TABLET
MAVIK 1MG TABLET	B	NF			
MAVIK 2MG	B	NF			
MAVIK 4MG TABLET	B	NF			
MONOPRIL 10MG TABLET	B	NF			FOSINOPRIL 10MG
MONOPRIL 20MG TABLET	B	NF			FOSINOPRIL 20MG TAB
MONOPRIL 40MG TAB	B	NF			FOSINOPRIL 40MG
MONOPRIL 40MG TABLET	B	NF			FOSINOPRIL 40MG
PRINIVIL 10MG TABLET	B	NF			LISINOPRIL 10MG TABLET
PRINIVIL 2.5MG TABLET	B	NF			LISINOPRIL 2.5MG TBLET
PRINIVIL 20MG TABLET	B	NF			LISINOPRIL 20MG TALET
PRINIVIL 40MG TABLET	B	NF			LISINOPRIL 40MG TABLET
PRINIVIL 5MG TABLET	B	NF			LISINOPRIL 5MG TABLET
ZESTRIL 10MG TABLET	B	NF			LISINOPRIL 10MG TABLET
ZESTRIL 20MG TABLET	B	NF			LISINOPRIL 20MG TALET
ZESTRIL 30MG TABLET	B	NF			
ZESTRIL 40MG TABLET	B	NF			LISINOPRIL 40MG TABLET
ZESTRIL 5MG TABLET	B	NF			LISINOPRIL 5MG TABLET

5.5 Adrenergeic Antagonists & Related Drugs

CLONIDINE 0.1MG TABLET	G	$			
CLONIDINE 0.2MG TAB	G	$			
CLONIDINE 0.3MG TAB	G	$			
DOXAZOSIN 1MG TAB	G	$			
DOXAZOSIN 1MG TABLET	G	$			
DOXAZOSIN 2MG TAB	G	$			
DOXAZOSIN 8MG TABLET	G	$			
DOXAZOSIN MESYLATE 4MG TAB	G	$			
DOXAZOSIN MESYLATE 8MG TAB	G	$			
GUANFACINE 1MG TABLET	G	$			
GUANFACINE 2MG TABLET	G	$			
METHYLDOPA 250MG TABLET	G	$			
METHYLDOPA 500MG TABLET	G	$			
PRAZOSIN 1MG CAPSULE	G	$			
Q-BID DM	G	$			
TERAZOSIN 1MG	G	$			
TERAZOSIN 1MG CAP	G	$			
TERAZOSIN 2 MG CAP	G	$			
TERAZOSIN 5MG CAP	G	$			
CATAPRES TTS-1 PATCH	B	$$$$			
CATAPRES-TTS 3 PATCH	B	$$$$			
CATATRES-TTS-2	B	$$$$			
CARDURA 1MG TABLET	B	NF			DOXAZOSIN 1MG TABLET
CARDURA 8MG TABLET	B	NF			DOXAZOSIN 8MG TABLET
HYTRIN 5MG CAPSULE	B	NF			TERAZOSIN 5MG CAP

5.7 Vasodilators

HYDRALAZINE 100 MG TABLET	G	$			
HYDRALAZINE 10MG TABLET	G	$			
HYDRALAZINE 25MG	G	$			

	P	Cost	Scripts	Spendin	Substitute
HYDRALAZINE 25MG TABLET	G	$			
HYDRALAZINE 50MG TABLET	G	$			
M''OXIDAL 2.5 TAB	G	$$			
I OXIDIL 10MG TABLET	G	$$			
BIDIL TABLET	B	NF			

.5.8 Other Antihypertensive Combinations

ATENOLOL/CHLORTHAL50/25	G	$			
CAPTOPRIL-HCTZ 50/25 TABLET	G	$			
BISOPROLOL/HCTZ 10/6.25 TAB	G	$$			
BISOPROLOL/HCTZ 2.5/6.25 TB	G	$$			
BISOPROLOL/HCTZ 5/6.25	G	$$			
ENALAPRIL/HCTZ 10-25MG TAB	G	$$			
ENALAPRIL/HCTZ 5-12.5MG TAB	G	$$			
LISINOPRIL/HCTZ 10/12.5MG	G	$$			
LISINOPRIL/HCTZ 20MG/12.5MG	G	$$			
LISINOPRIL-HCTZ 20-25 TAB	G	$$			
QUINARETIC 20/12.5	G	$$			
BENAZEPRIL/HCTZ 10/12.5	G	$$$			
BENAZEPRIL-HCTZ 20/12.5 TAB	G	$$$			
BENAZEPRIL-HCTZ 20/25MG TAB	G	$$$			
AMLODI/BENAZEP 10/20	G	$$$$			
AMLODIP/BENAZEP 5/10	G	$$$$			
AMLODIPINE-BENAZEPRIL 5/20	G	$$$$			
L EL 10/20MG CAPSULE	B	$$$$$			
LOTREL 10/40 MG CAPSULE	B	$$$$$			
LOTREL 2.5/10MG CAPSULE	B	$$$$$			
LOTREL 5/10MG CAPSULE	B	$$$$$			
LOTREL 5/20MG CAP	B	$$$$$			
LOTREL 5/40 MG CAPSULE	B	$$$$$			
CAPOZIDE 25/25 TABLET	B	NF			
LOTENSIN HCT 10/12.5 TABLET	B	NF			BENAZEPRIL/HCTZ 10/12.5
LOTENSIN HCT 20/12.5 TABLET	B	NF			
MONOPRIL 10/HCTZ 12.5	B	NF			
PRINZIDE 10/12.5 TABLET	B	NF			LISINOPRIL/HCTZ 10/12.5MG
PRINZIDE 20/12.5 TABLET	B	NF			LISINOPRIL/HCTZ 20MG/12.5MG
TARKA 1/240MG TABLET SA	B	NF			LOTREL 2.5/10MG CAPSULE
TARKA 2/180MG TABLET SA	B	NF			LOTREL 2.5/10MG CAPSULE
TARKA 2/240MG TABLET SA	B	NF			LOTREL 2.5/10MG CAPSULE
TARKA 4/240 MG TABLET SA	B	NF			LOTREL 2.5/10MG CAPSULE
ZESTORETIC 10/12.5 TABLET	B	NF			LISINOPRIL/HCTZ 10/12.5MG
ZESTORETIC 20/12.5 TABLET	B	NF			LISINOPRIL/HCTZ 20MG/12.5MG

.5.9 Angiotensin II Receptor Blockers

ATACAND 16MG TABLET	B	$$$			
ATACAND 32 MG TAB	B	$$$			
BENICAR 20MG TABLET	B	$$$			
BENICAR 40MG TABLET	B	$$$			
F ICAR 5 MG TABLET	B	$$$			
E ICAR HCT 20-12.5MG TAB	B	$$$			
BENICAR HCT 40-12.5MG TAB	B	$$$			
BENICAR HCT 40-25 MG TABLET	B	$$$			
MICARDIS 20 MG TABLET	B	$$$			

	F	Cost	Scripts	Spendir	Substitute
MICARDIS 40MG TABLET	B	$$$			
MICARDIS 80MG	B	$$$			
ATACAND HCT 16/12.5MG TAB	B	$$$$			
ATACAND HCT 32/12.5MG TAB	B	$$$$			
COZAAR 100 MG TABLET	B	$$$$			
COZAAR 25 MG TABLET	B	$$$$			
COZAAR 50MG	B	$$$$			
COZAAR 50MG TAB	B	$$$$			
DIOVAN 160MG TABLET	B	$$$$			
DIOVAN 320 MG TABLET	B	$$$$			
DIOVAN 40MG TABLET	B	$$$$			
DIOVAN 80MG TABLET	B	$$$$			
DIOVAN HCT 160/25MG TABLET	B	$$$$			
DIOVAN HCTZ80/12.5	B	$$$$			
DIOVAN-HCT 160/12.5MG	B	$$$$			
HYZAAR 100-12.5 TABLET	B	$$$$			
HYZAAR 100-25 TABLET	B	$$$$			
HYZAAR 50/12.5 MG TABLET	B	$$$$			
HYZAAR 50-12.5 TABLET	B	$$$$			
MICARDIS HCT 40/12.5 MG TAB	B	$$$$			
MICARDIS HCT 80/12.5MG TAB	B	$$$$			
AVALIDE 150-12.5MG TABLET	B	NF			
AVALIDE 300-12.5 MG TABLET	B	NF			
AVALIDE 300-25 MG TABLET	B	NF			
AVAPRO 150MG TABLET	B	NF			
AVAPRO 300MG TAB	B	NF			
TEVETEN 600MG TABLET	B	NF			

.6.' Lipid/Cholesterol Lowering Agents

GEMFIBROZIL 600MG TABLET	G	$			
NIACIN 100MG TABLET	G	$			
NIACIN 250MG	G	$			
NIACIN 500MG CAPSULE SA	G	$			
NIACIN 500MG TABLET	G	$			
LOVASTATIN 10MG TABLET	G	$$			
LOVASTATIN 20MG TAB	G	$$			
LOVASTATIN 40MG TABLETS	G	$$			
NIASPAN 1000MG TABLET SA	B	$$			
NIASPAN 500MG TABLET SA	B	$$			
NIASPAN 750 MG TABLET SA	B	$$			
SIMVASTATIN 10 MG TABLET	G	$$			
SIMVASTATIN 20 MG	G	$$			
SIMVASTATIN 20MG TABLET	G	$$			
SIMVASTATIN 40 MG	G	$$			
SIMVASTATIN 80 MG	G	$$			
ADVICOR 1000MG/20MG TABLET	B	$$$			
ADVICOR-500MG/20MG	B	$$$			
ALTOPREV 60 MG TABLET	B	$$$			
CHOLESTYRAMINE POWDER	G	$$$			
CHOLESTYRAMINE LIGHT PACKET	G	$$$			
CHOLESTYRAMINE LIGHT POWDER	G	$$$			
CRESTOR 10MG TAB	B	$$$			
CRESTOR 20 MG TABLET	B	$$$			
CRESTOR 40 MG TABLET	B	$$$			
CRESTOR 5 MG TABLET	B	$$$			
FENOFIBRATE 160 MG TABLET	G	$$$			

	F	Cost	Scripts	Spendir	Substitute
FENOFIBRATE 200 MG CAPSULE	G	$$$			
FENOFIBRATE 67 MG CAPSULE	G	$$$			
LIPITOR 10MG TABLET	B	$$$			
LIPITOR 20MG TABLET	B	$$$			
LIPITOR 40MG TABLET	B	$$$			
LIPITOR 80MG TAB	B	$$$			
TRICOR 145 MG TABLET	B	$$$			
TRICOR 160MG TAB	B	$$$			
TRICOR 48 MG TABLET	B	$$$			
TRICOR TABLET 54MG	B	$$$			
ZETIA 10MG	B	$$$			
VYTORIN 10/10 TABLET	B	$$$$			
VYTORIN 10/20 TABLET	B	$$$$			
VYTORIN 10/40 TABLET	B	$$$$			
VYTORIN 10/80 TABLET	B	$$$$			
ZOCOR 10MG	B	$$$$			
ZOCOR 20MG TABLET	B	$$$$			
ZOCOR 40MG TABLET	B	$$$$			
ZOCOR 5MG	B	$$$$			
ZOCOR 80MG TABLET	B	$$$$			
WELCHOL 625MG TABLET	B	$$$$$			
CADUET 10 MG/10 MG TABLET	B	NF			
CADUET 10 MG/20 MG TABLET	B	NF			
CADUET 5 MG/20 MG TABLET	B	NF			
COLESTID 1 GM TABLET	B	NF			
COLESTID GRANULES PACKET	B	NF			
LESCOL 20MG CAPSULE	B	NF			
LESCOL 40MG CAPSULE	B	NF			
LESCOL XL 80MG TABLET SA	B	NF			
MEVACOR 20 MG TAB	B	NF			LOVASTATIN 20MG TAB
MEVACOR 10MG TABLET	B	NF			LOVASTATIN 10MG TABLET
MEVACOR 40MG TABLET	B	NF			LOVASTATIN 40MG TABLETS
PRAVACHOL 10MG TAB	B	NF			
PRAVACHOL 20MG TABLET	B	NF			
PRAVACHOL 40MG TABLET	B	NF			
PRAVACHOL 80 MG TABLET	B	NF			
QUESTRAN LIGHT (1 CAN)	B	NF			CHOLESTYRAMINE LIGHT PACKET
QUESTRAN PACKETSX60-ORAL SU	B	NF			CHOLESTYRAMINE POWDER
QUESTRAN REG PWD	B	NF			CHOLESTYRAMINE POWDER
TRICOR 67MG CAPSULE	B	NF			

.1.1 Topical Corticosteroids Very High Potency

BETAMETHASONE DIP .05% OINT	G	$$			
BETAMETHASONE DP 0.05% GEL	G	$$			
BETAMETHASONE DP 0.05% OINT	G	$$			
CLOBETASOL 0.05% CREAM	G	$$			
CLOBETASOL 0.05% OINTMENT	G	$$			
CLOBETASOL 0.05% SOLUTION	G	$$			
CLOBETASOL CREAM	G	$$			
CLOBETASOL PROP OINT .05%	G	$$			
DIFLORASONE 0.05% OINTMENT	G	$$$			
HALOBETASOL .05% PROP OINT	G	$$$			
OBETASOL PROP 0.05% CR	G	$$$			
CLOBEX LOTION	B	NF			CLOBETASOL 0.05% SOLUTION
PSORCON 0.05% OINTMENT	B	NF			DIFLORASONE 0.05% OINTMENT

	F	Cost	Scripts	Spendir	Substitute
TEMOVATE 0.05%	E	NF			CLOBETASOL 0.05% SOLUTION
ULTRAVATE CREAM 0.05%	B	NF			HALOBETASOL PROP 0.05% CR
ULTRAVATE OINT .05%	B	NF			HALOBETASOL .05% PROP OINT

.1. Topical Corticosteroids High Potency

BETAMETHASONE DIP .05% CR	G	$			
BETAMETHASONE DP .05% CR	G	$			
BETAMETHASONE DP 0.05% LOT	G	$			
BETAMETHASONE VA 0.1% OINT	G	$			
TRIAMCINOLONE 0.025% CREAM	G	$			
TRIAMCINOLONE 0.025% OINT	G	$			
TRIAMCINOLONE 0.1% CREAM	G	$			
TRIAMCINOLONE 0.1% LOTION	G	$			
TRIAMCINOLONE 0.1% OINTMENT	G	$			
TRIAMCINOLONE 0.5% CREAM	G	$			
TRIAMCINOLONE 0.5% OINTMENT	G	$			
TRIAMCINOLONE ACE 0.5%	G	$			
DESOXIMETASONE OINT	G	$$			
DESOXIMETASONE 0.05% GEL	G	$$			
DESOXIMETASONE 0.25% OINT	G	$$			
DESOXIMETASONE CR .25%	G	$$			
FLUOCINONIDE 0.05% GEL	G	$$			
FLUOCINONIDE 0.05% OINTMENT	G	$$			
FLUOCINONIDE CREAM.05%	G	$$			
DIPROLENE 0.05% GEL	B	$$$$			
DIPROLENE 0.05% OINTMENT	B	$$$$			
DIPROLENE AF 0.05% CREAM	B	$$$$			
DIPROLENE LOTION 0.05% 60ML	B	$$$$			
CYCLOCORT 0.1% CREAM	B	NF			
LIDEX SHAKE SOL	B	NF			FLUOCINONIDE 0.05% SOLUTION
TOPICORT 0.05% GEL	B	NF			DESOXIMETASONE 0.05% GEL

.1.3 Topical Corticosteroids Medium Potency

BETAMETHASONE VA 0.1% CREAM	G	$			
BETAMETHASONE VA 0.1% LOT	G	$			
BETAMETHASONE VAL 1% CREAM	G	$			
BETAMETHAZONE VAL SARNA	G	$			
BETHAMETHASONE VAL .1% CR	G	$			
FLUOCINOLONE 0.025% CREAM	G	$			
FLUOCINOLONE 0.025% OINT	G	$			
CORDRAN 4MCG/SQ CM TAPE	B	$$			
CORDRAN 4MCG/SQ CM80"	B	$$			
DESOXIMETASONE 0.05% CREAM	G	$$			
FLUOCINOLONE 0.01% SOLUTION	G	$$			
FLUOCINONDE/HYDROPHOR OINT	G	$$			
FLUOCINONIDE 0.05% CREAM	G	$$			
FLUOCINONIDE 0.05% GEL	G	$$			
FLUOCINONIDE 0.05% SOLUTION	G	$$			
HYDROCORT/VAL 0.2% OINT	G	$$			
HYDROCORT/VALERATE0.2%	G	$$			
HYDROCORTISONE VAL 0.2% OIN	G	$$			
METASONE FUROATE 0.1% ONT	G	$$			
ELOCON CREAM 0.1%	B	NF			
TOPICORT LP 0.05% CREAM	B	NF			DESOXIMETASONE 0.05% CREAM

		r	Cost	Scripts	Spendi	Substitute
.1.4	Topical Corticosteroids Low Po..ncy					
	DESONIDE 0.05% CREAM	G	$			
	F' 'OCINOLONE 0.01% CREAM	G	$			
	(ERS GOO	G	$			
	H-CORTISONE/IODOQUINOL CRM	G	$			
	HYDROCORT/ALOE 1% CREAM	G	$			
	HYDROCORTISONE 1% CR	G	$			
	HYDROCORTISONE 1% CREAM	G	$			
	HYDROCORTISONE 1% LOTION	G	$			
	HYDROCORTISONE 1% OINTMENT	G	$			
	HYDROCORTISONE 2.5% CREAM	G	$			
	HYDROCORTISONE 2.5% OINT	G	$			
	HYDROCORTISONE 5 MG TABLET	G	$			
	HYDROCORTISONE BUTY 0.1% CR	G	$			
	HYDROCORTISONE CR 0.5%	G	$			
	HYDROCORTISONE CREAM 1LB	G	$			
	HYDROCORTISONE VAL .2% CR	G	$			
	CAPEX SHAMPOO .01%	B	$$			
	PANDEL 0.1%CREAM	B	NF			
	TRIDESILON 0.05% CREAM	B	NF			
.2.0	Topical Anesthetics					
	LIDOCAINE 2% VISC SOLN	G	$			
	LIDOCAINE 5% OINTMENT	G	$			
	LIDOCAINE HCL 2% JELLY	G	$			
	LIDODERM 5% PATCH	G	$			
	. OCAINE 2% JELLY	B	$$			
	XYLOCAINE 2% VISCOUS SOLN	B	$$			
.3.0	Therapy for Acne					
	BENZOYL PEROXIDE 10% GEL	G	$			
	BENZOYL PEROXIDE 5% LOTION	G	$			
	BENZOYL PEROXIDE TR CREAM	G	$			
	BENZOYL PEROXIDE 10% GEL	G	$			
	BENZOYL PEROXIDE 5% GEL	G	$			
	BENZOYL PEROXIDE 5% WASH	G	$			
	BENZOYL PEXOXIDE 10% WASH	G	$			
	ERYTHROMYCIN 2% GEL	G	$			
	ERYTHROMYCIN 2% TOPICAL S	G	$			
	CLINDAMYCIN PHOS 1% PLEDGET	G	$$			
	CLINDAMYCIN PHOS TOP LOTION	G	$$			
	CLINDAMYCIN T-GEL	G	$$			
	CLINDAMYCIN TOP SOLUTIN	G	$$			
	CLINDMYCIN LOTION	G	$$			
	TRIAZ 3% CLEANSER	B	$$			
	TRIAZ 6% CLEANSER	B	$$			
	AZELEX 20% CREAM	B	$$$			
	BENZACLIN GEL	B	$$$			
	TRETINOIN 0.01% GEL	G	$$$			
	TRETINOIN 0.025% CREAM	G	$$$			
	TINOIN 0.025% GEL	G	$$$			
	TRETINOIN 0.05% CREAM	G	$$$			
	TRETINOIN 0.1% CREAM	G	$$$			
	TRETINOIN GEL 0.025%	G	$$$			

	F	Cost	Scripts	Spendi	Substitute
DIFFERIN 0.1% GEL	B	$$$$			
DUAC GEL	B	$$$$			
ERYTHROMYCIN-BENZOYL GEL	G	$$$$			
ROCREAM 0.75% CREAM	B	$$$$			
METROGEL TOPICAL 0.75% GEL	B	$$$$			
METROGEL TOPICAL 1% GEL	B	$$$$			
METROGEL VAGINAL GEL .75%	B	$$$$			
RETIN A .1% MICRO GEL	B	$$$$			
RETIN-A MICRO 0.04% GEL	B	$$$$			
TAZORAC 0.1% CREAM	B	$$$$			
BENZAC WASH 10% LIQUID	B	NF			BENZOYL PEXOXIDE 10% WASH
BENZAMYCIN GEL	B	NF			ERYTHROMYCIN-BENZOYL GEL
BENZAMYCINPAK GEL	B	NF			ERYTHROMYCIN-BENZOYL GEL
BREVOXYL 4% GEL	B	NF			BENZOYL PEROXIDE 10% GEL
BREVOXYL-8 ACNE WASH KIT	B	NF			
CLEOCIN T TOPICAL SOLUTION	B	NF			CLINDAMYCIN TOP SOLUTIN
RETIN-A 0.025% CREAM	B	NF			TRETINOIN 0.025% CREAM
RETIN-A 0.1% CREAM	B	NF			TRETINOIN 0.1% CREAM
4.0 Topical Antibacterials					
GENTAMICIN .1% OINTMENT	G	$			
GENTAMICIN 90MG NSIN100MLNS	G	$			
MUPIROCIN 2% OINTMENT	G	$$$$			
BACTOBAN 2% CREAM	B	NF			
BACTROBAN 2% OINTMENT	B	NF			MUPIROCIN 2% OINTMENT
BACTROBAN CREAM 2%	B	NF			
TROBAN/TRIAMCIN CREAM	B	NF			
5.0 Topical Antifungals					
NYSTATIN 100000U/GM CREAM	G	$			
NYSTATIN/TRIAMCINOLONE CR	G	$			
KETOCONAZOLE 2% CREAM	G	$$$			
KETOCONAZOLE 2% SHAMPOO	G	$$$			
CLOT/B-METHASONE CR 45GM	G	$$$$			
CLOT/B-METHASONE CRM 15GM	G	$$$$			
CLOTR/HYDROCORT CREAM	G	$$$$			
CLOTRIMAZ/BETAM CR	G	$$$$			
CLOTRIMAZOLE 1% CREAM	G	$$$$			
CLOTRIMAZOLE 1% CREAM 30GM	G	$$$$			
CLOTRIMAZOLE 1% SOLUTION	G	$$$$			
CLOTRIMAZOLE 3 2% CREAM	G	$$$$			
CLOTRIMAZOLE/BETA LOTION	G	$$$$			
MENTAX 1% CREAM	B	$$$$			
PENLAC 8% SOLUTION	B	$$$$$$			
EXELDERM SOLUTION 1.0%	B	NF			
LOPROX 0.77% GEL	B	NF			
LOPROX CREAM	B	NF			
MYCOLOG II CREAM	B	NF			NYSTATIN/TRIAMCINOLONE CR
TIN 1% CREAM	B	NF			
NIZORAL 2% CREAM	B	NF			KETOCONAZOLE 2% CREAM
NIZORAL 2% SHAMPOO	B	NF			KETOCONAZOLE 2% SHAMPOO
NIZORAL A-D 1% SHAMPOO	B	NF			KETOCONAZOLE 2% SHAMPOO

		Cost	Scripts	Spendi	Substitute
OXISTAT 1% CREAM	L	NF			
.6.0 Topical Antivirals					
Z RAX 5% CREAM	B	$$$$			
ZOVIRAX 5% OINTMENT	B	$$$$			
.7.0 Burn Therapy					
SILVER SULFADIAZINE 1% CR	G	$			
SILVER SULFADIAZINE 1% CRM	G	$			
THERMAZINE 1% CR	G	$$			
SILVADENE 1% CREAM	B	NF			SILVER SULFADIAZINE 1% CRM
.8.0 Topical Enzymes					
ACCUZYME OINTMENT	B	NF			
SANTYL OINTMENT	B	NF			
.10.0 Antipsoriatic/Antiseborrheic					
SELENIUM SULF 2.5%LOTION	G	$			
SELENIUM SULFIDE 1% SHAM	G	$			
PRAMOSONE 1% CREAM	B	$$$			
PRAMOSONE 2.5% CREAM	B	$$$			
DOVONEX 0.005% CREAM	B	$$$$$$			
DOVONEX 0.005% OINTMENT	B	$$$$$$			
DOVONEX SCALP SOLUTION	B	$$$$$$			
SELSUN RX 2.5% SHAMPOO	B	NF			SELENIUM SULFIDE 1% SHAM
.11.0 Topical Scabicides/Pediculicides					
ACTICIN CREAM 5%	G	$$			
EURAX 10% CREAM	B	$$			
EURAX 10% LOTION	B	$$			
PERMETHRIN 1% LOTION	G	$$			
PERMETHRIN 5% CREAM	G	$$			
PERMETHRIN CREAM 1% RINSE	G	$$			
PERMETHRIN LOTION	G	$$			
LINDANE 1% LOTION	B	$$$$$			
LINDANE 1% SHAMPOO	B	$$$$$			
ELIMITE 5% CREAM	B	NF			PERMETHRIN 5% CREAM
NIX	B	NF			
NIX CREAM RINSE 1%	B	NF			
.12.0 Miscellaneous Dermatologicals					
ELIDEL 1% CREAM	B	$$$			
UREA 40 LOTION	G	$$$			
PROTOPIC 0.1% OINTMENT	B	$$$$			
CONDYLOX 0.5%	B	$$$$$			
ALDARA 5% CREAM	B	NF			

		Cost	Scripts	Spendi	Substitute
CARMOL 40 CREAM	L	NF			
LAC-HYDRIN 12% LOTION	B	NF			
.1.0 Intranasal Steroids					
FLUNISOLIDE 0.025% SPRAY	G	$$			
FLUTICASONE 50 MCG NASAL SP	G	$$			
NASACORT AQ NASAL SPRAY	B	$$$			
NASACORT NASAL INHALER	B	$$$			
NASONEX NASAL SPRAY	B	$$$			
RHINOCORT AQUA NASAL SPRAY	B	$$$			
FLONASE 0.05% NASAL SPRAY	B	NF			FLUTICASONE 50 MCG NASAL SP
NASALIDE	B	NF			FLUNISOLIDE 0.025% SPRAY
NASALIDE 25MCG	B	NF			FLUNISOLIDE 0.025% SPRAY
.2.0 Miscellaneous Otic Preperations					
ACETASOL HC EAR DROPS	G	$			
ACETIC ACID 2% OTIC SOL	G	$			
ACETIC ACID 2% EAR SOLUTION	G	$			
ACETIC ACID W/HC EAR DROPS	G	$			
ANTIPYR/BENZOCAINE EAR DROP	G	$			
ANTIPYRINE/BENZOCAINE OTIC	G	$			
CERUMENEX 10% EAR DROPS	B	$$$			
FLOXIN OTIC	B	$$$$			
A''RALGAN EAR DROPS	B	NF			ANTIPYRINE/BENZOCAINE OTIC
(TANE-B OTIC DROPS	B	NF			
.3.0 Otic Steroid/Antibiotic					
NEOMYCIN/POLY/BAC/HYDR OINT	G	$$			
NEOMYCIN/POLY/GRAM EYE DROP	G	$$			
CIPRODEX OTIC SUSP 7.5ML	B	$$$$			
CIPRO-HC EAR DROPS	B	$$$$$			
COLY-MYCIN S EAR DROPS	B	NF			
CORTISPORIN CREAM	B	NF			
CORTISPORIN EAR SOLUTION	B	NF			NEOMYCIN/POLY/BAC/HYDR OINT
CORTISPORIN EYE DROPS	B	NF			
CORTISPORIN OINTMENT	B	NF			
CORTISPORIN OTIC SUSP 10ML	B	NF			NEOMYCIN/POLY/BAC/HYDR OINT
.4.0 Miscellaneous Agents					
*CHLORHEXIDINE 0.12% RINS	G	$			
CHLORHEXIDINE GLUCONATE	G	$			
TRIAMCINOLONE 0.1%DENT PAST	G	$			
TRIAMCINOLONE DENTAL PASTE	G	$			
IPRATROP BROM 0.6%SPRAY	G	$$$			
ELIN NASAL SPRAY	B	$$$$			
PERIDEX 0.12% LIQUID	B	NF			CHLORHEXIDINE GLUCONATE

	r	Cost	Scripts	Spendi	Substitute
.1.0 Antithyroid Agents					
METHIMAZOLE 10 MG TABLET	G	$$			
PROPYLTHIOURACIL 50MG TABS	G	$$			
TAPAZOLE 10MG TABLET	B	NF			METHIMAZOLE 10 MG TABLET
TAPAZOLE5MG	B	NF			
.2.0 Thyroid Hormones					
LEVOTHROID 100MCG TABLET	G	$			
LEVOTHROID 125MCG TABLET	G	$			
LEVOTHROID 150 MCG	G	$			
LEVOTHROID 175MCG TABLET	G	$			
LEVOTHROID 300 MCG TABLET	G	$			
LEVOTHROID 50 MCG TABLET	G	$			
LEVOTHROID 50MCG	G	$			
LEVOTHROID 75MCG TABLET	G	$			
LEVOTHYROID 137MG	G	$			
LEVOTHYROXIN 100MCG TABLET	G	$			
LEVOTHYROXINE 0.1MG TABLET	G	$			
LEVOTHYROXINE 125MCG TAB	G	$			
LEVOTHYROXINE 137MCG TAB	G	$			
LEVOTHYROXINE 25MCG TAB	G	$			
LEVOTHYROXINE 50MCG TABLET	G	$			
L-THYROXINE 0.125 MG	G	$			
L-THYROXINE 75MCG TAB	G	$			
THYROID 60MG TAB	G	$			
LEVOXYL 0.075MG	B	$$			
LEVOXYL 100MCG TABLET	B	$$			
LEVOXYL 112MCG TABLET	B	$$			
LEVOXYL 125MCG TABLETS	B	$$			
LEVOXYL 137MCG TABLET	B	$$			
LEVOXYL 150MCG	B	$$			
LEVOXYL 175MCG TABLET	B	$$			
LEVOXYL 200MCG	B	$$			
LEVOXYL 25MCG TABLET	B	$$			
LEVOXYL 50MCG	B	$$			
LEVOXYL 88MCG	B	$$			
SYNTHROID 0.025MG TAB	B	$$$			
SYNTHROID 0.05MG	B	$$$			
SYNTHROID 0.125MG TAB	B	$$$			
SYNTHROID 0.1MG	B	$$$			
SYNTHROID 112MCG TABLET	B	$$$			
SYNTHROID 137MCG TABLET	B	$$$			
SYNTHROID 150MCG TABLET	B	$$$			
SYNTHROID 175MCG TABLET	B	$$$			
SYNTHROID 200MCG TABLET	B	$$$			
SYNTHROID 88 MCG TABLET	B	$$$			
SYNTHYROID 75MCG	B	$$$			
UNITHROID 125MCG TABLET	B	$$$			
ARMOUR THYROID 30MG TABLET	B	NF			
ARMOUR THYROID 90M TABLET	B	NF			
.3 Adrenal Hormones					
DEXAMETHASONE .75MG TABLET	G	$			
DEXAMETHASONE 0.5 MG/5 ML L	G	$			
DEXAMETHASONE 1MG TABLET	G	$			

		Cost	Scripts	Spendi	Substitute
DEXAMETHASONE 2 MG TABLET	C	$			
DEXAMETHASONE 4MG TABLET	G	$			
DEXAMETHASONE SP 4MG/ML VL	G	$			
HYDROCORTISONE 20MG TABLET	G	$			
METHYLPREDNISOLONE 40 MG/ML	G	$			
METHYLPREDNISOLONE4MG	G	$			
METHYLPREDNISOLONE4MG PK	G	$			
PREDNISONE 10 MG TABLET	G	$			
PREDNISONE 10MG TABLET	G	$			
PREDNISONE 1MG TAB	G	$			
PREDNISONE 20MG TABLET	G	$			
PREDNISONE 5 MG/5 ML SOLUTI	G	$			
PREDNISONE 5MG TAB	G	$			
FLUDROCORTISONE 0.1MG TAB	G	$$$			
CELESTONE SOLUSPAN 6MG/ML	B	NF			
CORTEF 10MG TABLET	B	NF			
CORTEF 5 MG TABLET	B	NF			
MEDROL DOSE PAK	B	NF			METHYLPREDNISOLONE4MG PK
4.1 Androgens					
DELATESTRYL 200MG/ML VIAL	B	$$$			
DEPO TESTOSTERONE 200MG/ML	B	$$$			
DEPO-TESTOSTERONE 100MG/ML	B	$$$			
DEPO-TESTOSTERONE 200MG/ML	B	$$$			
DANAZOL 50MG CAPSULE	G	$$$$			
TESTIM 1%(50MG) GEL	B	$$$$			
ANDRODERM 5MG/24HR PATCH	B	$$$$$			
ANDROGEL 1%(25MG) GEL PCKT	B	$$$$$			
ANDROGEL 1%(50MG) GEL PCKT	B	$$$$$			
4.3 Miscellaneous Agents					
CALCITRIOL 0.25 MCG CAPSULE	G	$$			
CALCITRIOL 0.5MCG CAPSULE	G	$$			
FINASTERIDE 5 MG TABLET	G	$$			
DESMOPRESSIN ACET 0.2 MG TA	G	$$$			
DOSTINEX 0.5MG TABLET	B	$$$$			
SENSIPAR 30MG TABLET	B	$$$$$			
PROSCAR 5MG TABLET	B	NF			FINASTERIDE 5 MG TABLET
ROCALTROL 0.25MCG CAPSULE	B	NF			CALCITRIOL 0.25 MCG CAPSULE
5.1 Insulin Therapy					
HUMULIN 70/30 INSULIN	B	$$			
HUMULIN L 100U/ML VIAL	B	$$			
HUMULIN N 100U/ML VIAL	B	$$			
HUMULIN NPH INSULIN	B	$$			
HUMULIN REGULAR INSULIN	B	$$			
HUMULIN U 100U/ML VIAL	B	$$			
NOVOLIN 70/30 INSULIN	B	$$			
NOVOLIN NPH INSULIN	B	$$			
NOVOLIN REG INSULIN	B	$$			

		Cost	Scripts	Spendi	Substitute
LANTUS INSULIN	E	$$$			
HUMALOG 100U/ML INSULIN	B	$$$$$			
H' 'MALOG 75/25 INSULIN	B	$$$$$			
OLOG 100/UN	B	$$$$$			
NOVOLOG 70/30	B	$$$$$			

.5.2 Non-Insulin Hypoglycemic Agents

FORTAMET ER 1,000 MG TABLET	G	$			
FORTAMET ER 500 MG TABLET	G	$			
GLIPIZIDE 10MG TABLET	G	$			
GLIPIZIDE 5MG TABLET	G	$			
GLIPIZIDE ER 10MG TABLET	G	$			
GLIPIZIDE ER 2.5MG TABLET	G	$			
GLIPIZIDE ER 5MG TABLET	G	$			
GLIPIZIDE-METFORMIN 5/500 M	G	$			
GLYBURIDE 1.25MG TABLET	G	$			
GLYBURIDE 2.5MG TABLET	G	$			
GLYBURIDE 5MG TAB	G	$			
GLYBURIDE MICRONIZED 3MG	G	$			
METFORMIN 1000MG TABLET	G	$			
METFORMIN 500MG TALET	G	$			
METFORMIN ER 500	G	$			
METFORMIN HCL 750 MG ER TAB	G	$			
METFROMIN 850MG TABLET	G	$			
AVANDARYL 4 MG/2 MG TABLET	B	$$$			
AVANDARYL 4 MG-4 MG TABLET	B	$$$			
GLIMEPIRIDE 1 MG TABLET	G	$$$			
C' 'MEPIRIDE 2 MG TABLET	G	$$$			
MEPRIDE 4MG	G	$$$			
GLYBUR/METFOR 1.25/250	G	$$$			
GLYBURIDE-METFORMIN 2.5/500	G	$$$			
GLYBURIDE-METFORMIN 5/500 M	G	$$$			
METAGL5/500	B	$$$			
METAGLIP 2.5/250MG TABLET	B	$$$			
METAGLIP 5MG/500MG	B	$$$			
STARLIX 120MG TAB	B	$$$			
STARLIX 60MG TABLET	B	$$$			
AVANDIA 2MG TABLET	B	$$$$			
AVANDIA 4MG TABLET	B	$$$$			
AVANDIA 8MG TAB	B	$$$$			
PRANDIN 1MG TABLET	B	$$$$			
PRANDIN 2MG TABLET	B	$$$$			
ACTOPLUS MET 15 MG/500 MG T	B	$$$$$			
ACTOPLUS MET 15 MG/850 MG T	B	$$$$$			
ACTOS 15MG TAB	B	$$$$$			
ACTOS 30MG TABLET	B	$$$$$			
ACTOS 45MG TABLET	B	$$$$$			
AMARYL 2MG TABLET	B	NF			GLIMEPIRIDE 2 MG TABLET
AMARYL 4MG TAB	B	NF			GLIMEPRIDE 4MG
GLUCOPHAGE 1000MG TABLET	B	NF			METFORMIN 1000MG TABLET
GLUCOPHAGE 500MG TABLET	B	NF			METFORMIN 500MG TALET
'COPHAGE 850MG TABLET	B	NF			METFROMIN 850MG TABLET
C_JCOPHAGE XR 500MG TAB SA	B	NF			METFORMIN ER 500
GLUCOPHAGE XR 750 MG TAB SA	B	NF			METFORMIN HCL 750 MG ER TAB
GLUCOTROL 10MG TABLET	B	NF			GLIPIZIDE 10MG TABLET

	r	Cost	Scripts	Spendi	Substitute
GLUCOTROL 5MG TABLET	E	NF			GLIPIZIDE 5MG TABLET
GLUCOTROL XL 10MG TABLET SA	B	NF			GLIPIZIDE ER 10MG TABLET
GLUCOTROL XL 2.5MG TAB SA	B	NF			GLIPIZIDE ER 2.5MG TABLET
G' 'COTROL XL 5MG TABLET SA	B	NF			GLIPIZIDE ER 5MG TABLET
L :OVANCE 1.25/250MG TAB	B	NF			
GLUCOVANCE 2.5/500MG TAB	B	NF			GLYBURIDE-METFORMIN 2.5/500
GLUCOVANCE 5/500MG TAB	B	NF			GLYBURIDE-METFORMIN 5/500 M
.5.3 Glucose Elevating Agents					
GLUCOGAN EMEGENCY KIT	B	$$$$$$			
GLUCOGON EMERGENCY KIT	B	$$$$$$			
.1.1 H2 Antagonists					
CIMETIDINE 200MG TABLET	G	$			
CIMETIDINE 300MG TABLET	G	$			
CIMETIDINE 400MG	G	$			
CIMETIDINE 800MG	G	$			
FAMOTIDINE 20MG TABLET	G	$			
FAMOTIDINE 40MG TABLET	G	$			
FAMOTIDINE AC	G	$			
RANITIDINE 150MG TABLET	G	$			
RANITIDINE 300MG TABLET	G	$			
RANITIDINE 75MG TABLET	G	$			
NIZATIDINE 150MG CAPSULE	G	$$$			
NIZATIDINE 300MG CAPSULE	G	$$$			
AXID 300MG CAPSULE	B	NF			NIZATIDINE 300MG CAPSULE
PEPCID AC 10 MG TABLET	B	NF			FAMOTIDINE AC
: :AC 150MG TABLET	B	NF			RANITIDINE 150MG TABLET
.1.2 Prostaglandins					
MISOPROSTOL 200 MCG TABLET	G	$$			
.1.3 Other Ulcer Therapy					
SUCRALFATE 1GM TAB	G	$			
CARAFATE SUS 1GR/10ML	B	$$$			
PREVPAC PATIENT PACK	B	$$$$$			
CARAFATE 1 GM TABLET	B	NF			SUCRALFATE 1GM TAB
.1.4 Propton Pump Inhibitors					
PRILOSEC 10MG CAP	B	$$			
PRILOSEC 20MG CAPSULE DR	B	$$			
PRILOSEC 20MG TAB OTC	B	$$			
PRILOSEC 40MG CAPSULE	B	$$			
PANTOPRAZOLE SOD 40 MG TAB	G	$$$			
NEXIUM 20MG CAPSULE	B	$$$$			
NEXIUM 40 CAPSULE	B	$$$$			
PRAZOLE 10 MG CAPSULE DR	G	$$$$			
OMEPRAZOLE 20MG CAPSULE	G	$$$$			
PREVACID 15MG CAPSULE DR	B	$$$$			
PREVACID 30MG CAPSULE DR	B	$$$$			

	F	Cost	Scripts	Spendir	Substitute
ACIPHEX 20MG TABLET EC	B	NF			
PROTONIX 20MG TABLET EC	B	NF			
PROTONIX 40MG TABLET EC	B	NF			
.2.1 Antidiarrheals					
DIPHENOXYLATE/ATROPIN SULF	G	$			
LOPERAMIDE 2MG CAPSULE	G	$			
IMODIUM A-D 2MG CAPLET	B	NF			LOPERAMIDE 2MG CAPSULE
.2.2 Antispasmodics					
BELLAMINE S	G	$			
DICYCLOMINE 10MG CAPSULE	G	$			
DICYCLOMINE 20MG TAB	G	$			
HYOSCYAMINE .125MGTAB SL	G	$			
HYOSCYAMINE 0.375MG CAP SA	G	$			
HYOSCYAMINE 0.375MG TAB SA	G	$			
HYOSCYAMINE SULFATE 0.125MG	G	$			
GLYCOPYRROLATE 1 MG TABLET	G	$$$			
GLYCOPYRROLATE 2 MG TABLET	G	$$$			
.2.3 Combination Anticholinergics					
BELLADONNA/PHENOBARB	G	$			
CHLORDIAZ 5MG/CLIDINI 2.5MG	G	$			
DONNATAL EXTENTABS	B	NF			BELLADONNA/PHENOBARB
[NATAL TABLET	B	NF			BELLADONNA/PHENOBARB
LIBRAX CAPSULE	B	NF			CHLORDIAZ 5MG/CLIDINI 2.5MG
.3.1 Bile Acids					
URSO 250MG TABLET	B	$$$$$			
ACTIGALL 300MG CAPSULE	B	NF			
.3.2 Digestive Enzymes					
VIOKASE 16 TABLET	B	$			
VIOKASE 8MG TAB	B	$			
PANCREASE ENTERIC COATED	B	$$			
LIPRAM 4500 CAPSULE	B	$$$			
LIPRAM-CR 10 CAPSULE EC	B	$$$			
LIPRAM-CR20 CAPSULE SA	B	$$$			
LIPRAM-PN10 CAPSULE EC	B	$$$			
LIPRAM-PN16 CAPSULE EC	B	$$$			
CREON 10 CAPSULE EC	B	$$$$			
CREON 20 CAPSULE SA	B	$$$$			
PANCREASE MT 10 CAPSULE EC	B	$$$$$			
PANCREASE MT 16 CAPSULE EC	B	$$$$$			
CREASE MT4 12,000	B	$$$$$			
PANCRELIPASE 8000 TABLET	B	NF			
PANCRELIPASE CAP4500UNIT	B	NF			

	P	Cost	Scripts	Spendin	Substitute
PANOKASE 8000U TABLET	B	NF			

.3.3 Miscellaneous Gastrointestinal Agents

' CORT-HC 25MG SUPPOSITORY	G	$			
ANU-MED SUPP HEMORRHOIDAL	G	$			
ANUMED-HC 25MG SUPPOSITORY	G	$			
ANUSERT SUPPOSITORY	G	$			
ANUSOL 2.5% HC CREAM	B	$			
ANUSOL HEMORRHOIDAL HC OINT	B	$			
ANUSOL SUPPOSITORY	B	$			
ANUSOL-HC	B	$			
ANUSOL-HC 25MG SUPPOSITORY	B	$			
GENERLAC 10GM/15ML SOLUTION	G	$			
LACTULOSE 10GM/15MSYRUP	G	$			
METOCLOPRAMIDE 10MG TABLET	G	$			
METOCLOPRAMIDE 5MG TABLET	G	$			
SULFASALAZINE 500MG	G	$			
SULFASALAZINE EC 500MG TAB	G	$			
HYDROCORTISONE 100MG ENEMA	G	$$			
ANALPRAM HC 1% CREAM	B	$$$			
ANALPRAM-HC 2.5% CREAM	B	$$$			
ANALPRAM-HC 2.5% LOTION	B	$$$			
KRISTALOSE 10GM PACKET	B	$$$			
KRISTALOSE 20GM PACKET	B	$$$			
CANASA 1,000 MG SUPPOSITORY	B	$$$$			
CANASA SUPPOS*500MG	B	$$$$			
PENTASA 250MG CAPSULE SA	B	$$$$			
PENTASA 500 MG CAPSULE	B	$$$$			
PROCTOFOAM 1%	B	$$$$			
PROCTOFOAM-HC FOAM	B	$$$$			
ASACOL 400MG CAPLET	B	$$$$$			
COLAZAL 750MG CAPSULE	B	$$$$$			
ENTOCORT EC 3MG CAPSULE	B	$$$$$			
AZULFIDINE 500MG TABLET	B	NF			SULFASALAZINE 500MG
REGLAN 10MG TABLET	B	NF			METOCLOPRAMIDE 10MG TABLET
ROWASA ENEMA	B	NF			

.3.5 Bowel Evacuants

PEG 3350/ELECTROLYTE SOLN	G	$			
GLYCOLAX POWDER	B	$$			
GOLYTLEY PEG 3350/ELECTROL	B	$$			
MIRALAX PACKET 17G	B	$$			
MIRALAX POWDER	B	$$			
MIRALAX POWDER OTC14DAY	B	$$			
NULYTELY	B	$$			

.1.1 Erythroid Stimulants

ARANESP 200 MCG/0.4 ML SYR	B	$$$$$			
' GEN 10000U/ML VIAL	B	NF			
EPOGEN 2,000 UNITS/ML VIAL	B	NF			
EPOGEN 4,000 UNITS/ML VIAL	B	NF			
EPOGEN S10 10,000UN/1ML	B	NF			

	B	Cost	Scripts	Spendin	Substitute
EPOGEN S3 3M UN/ML 10X1ML	B	NF			
.1.3 Interferons					
AXONE 20MG INJECTION KIT	B	$$$$			
INTRON A 18MMU VIAL	B	$$$$			
PEGASYS 180 MCG/0.5 ML CONV	B	$$$$$			
PEGASYS 180MCG/1ML	B	$$$$$			
PEG-INTRON 120MCG KIT	B	$$$$$			
PEG-INTRON REDIPEN 150 MCG	B	$$$$$			
0.2.0 Gout Therapy					
ALLOPURINOL 100MG TAB	G	$			
ALLOPURINOL 300MG TAB	G	$			
COLCHICINE 0.6MG TABLET	G	$			
PROBENECID 500MG TABLET	G	$$			
PROBENECID/COLCHICINE TABS	G	$$			
0.3.2 Miscellaneous Rheumatological Agents					
ENBREL 25MG KIT	B	$$$$$$			
ENBREL 50 MG/ML SYRINGE	B	$$$$$$			
0.4.0 Osteoporosis Therapy					
ESTRADIOL 0.5MG TABLET	G	$			
ESTRADIOL 1 MG TABLET	G	$			
ESTRADIOL 2MG TABLET	G	$			
CLIMARA 0.1%	B	$$			
CLIMARA 0.0375 MG/DAY PATCH	B	$$			
CLIMARA PATCH 0.05MG/DAY	B	$$			
CONJ ESTROGEN 0.625MG	B	$$			
CONJ ESTROGEN 1.25MG TAB	B	$$			
ESTRADERM 0.1MG PATCH	B	$$			
ESTRADIOL 0.05 MG/DAY PATCH	G	$$			
ESTRADIOL 0.1 MG/DAY PATCH	G	$$			
PREMARIN 0.3MG	B	$$			
PREMARIN 0.3MG TABLET	B	$$			
PREMARIN 0.625MG	B	$$			
PREMARIN 0.9MG TABLET	B	$$			
PREMARIN 1.25MG TABLET	B	$$			
VIVELLE 0.1MG/DAY	B	$$			
ACTONEL 30 MG TABLET	B	$$$			
ACTONEL 35MG TABLET	B	$$$			
FOSAMAX 10MG TABLET	B	$$$			
FOSAMAX 35 MG TABLET	B	$$$			
FOSAMAX 70MG TABLET	B	$$$			
MENEST 0.3 MG TABLET	B	$$$			
MENEST 1.25MG TABLET	B	$$$			
1.1.0 Oral Contraceptives & Related Agents					
APRI 28 DAY TABLET	G	$$			
1.1.1 Monophasic/Biphasic/Triphasic Agents					
CRYSELLE-28 TABLET	B	$$			

	E	Cost	Scripts	Spendin	Substitute
JUNEL FE 1.5/30 TABLET	B	$$			
LEVORA 0.15/0.03MG28 TABLET	B	$$			
LO/OVRAL TABLET 28	B	$$			
L[illegible]N-OGESTREL-28 TABLET	B	$$			
[illegible]OGESTIN FE 1.5/30 TAB	B	$$			
MIRCETTE 28 DAY TABLET	B	$$			
NECON 1/35-28 TABLET	B	$$			
NECON 7/7/7-28 TABLET	B	$$			
NORDETTE-28 TABLET	B	$$			
NORETHINDRONE 5 MG TABLET	G	$$			
NORTREL 1/35 TABLET	B	$$			
NORTREL 7/7/7-28 TABLET	B	$$			
OGESTREL-28DAY	B	$$			
ORTHO NORVUM 1/35	B	$$			
ORTHO TRI-CYCLEN LO TABLET	B	$$			
ORTHO-CEPT 28 DAY TABLET	B	$$			
ORTHOCYCLEN	B	$$			
ORTHO-NOVUM 7/7/7-28 TABLET	B	$$			
ORTHOTRI-CYCLEN 28 DAY	B	$$			
OVARL 28 DAY	B	$$			
PORTIA-28 TABLET	B	$$			
SPRINCTEC .25OMG/.035MG	B	$$			
SPRINTEC 28 DAY TABLET	B	$$			
TRINESSA /TRISPRINTEC	B	$$			
TRIPHASIL-28	B	$$			
YASMIN 28 TABLET	B	$$			
ESTROSTEP FE-28 TABLET	B	$$$			
OVCON-35 28 TABLET	B	NF			
[illegible] SONALE 0.15MG/0.03MG	B	NF			
1.2.0 Oxytocics					
METHERGINE 0.2MG TABLET	B	$$$$			
1.3.0 Estrogens & Progestins					
PROMETRIUM 100MG CAPSULE	B	$$			
PROMETRIUM 200MG CAPSULE	B	$$			
CENESTIN 1.25MG TABLET	B	NF			
1.3.3 Estrogen Combinations					
ESTRATEST TABLET	B	$$			
PREMPRO .625/5MG TAB	B	$$			
PREMPRO 0.3 MG/1.5 MG TABLE	B	$$			
PREMPRO 0.625/2.5 MG TAB	B	$$			
1.4.2 Vaginal Cleanser/Anti-Infectives					
CLINDESSE 2% VAGINAL CREAM	B	NF			
1.4.3 Vaginal Antifungals					
MICONAZOLE 2% VAG CR 45GM	G	$$$			
M[illegible]CONAZOLE 3 VAGINAL SUPP	G	$$$			
[illegible]NAZOLE 7 VAG SUPP	G	$$$			
TERAZOL 3 80MG SUPPOSITORY	B	$$$$			
TERAZOL 3 CREAM	B	$$$$			

		F	Cost	Scripts	Spendir	Substitute
TERAZOL 7 CREAM		B	$$$$			
TERCONAZOLE 0.8% CREAM		G	$$$$			
1.4 '	Specialized OB/GYN Drugs					
TERBUTALINE SULF 2.5MG TAB		G	$$$			
TERBUTALINE SULFATE 5MG TAB		G	$$$			
1.4.5	Diaphragms and Other Non-Oral Contraceptives					
NUVARING VAGINAL RING		B	$$			
ORTHO EVRA PATCH		B	$$$$			
2.1.0	Beta Blockers					
LEVOBUNOLOL 0.5% EYE DROPS		G	$			
TIMOLOL 0.25% EYE DROPS		G	$			
TIMOLOL 0.5% EYE DROPS		G	$			
TIMOLOL 0.5% GEL/SOLUTION		G	$			
TIMOLOL OPTH SOL 0.5%		G	$			
TIMOPTIC 0.5% EYE DROPS		G	$			
BETIMOL 0.5% EYE DROPS		B	$$			
TIMOPTIC-XE 0.25% EYE SOLN		B	$$			
TIMOPTIC-XE 0.5% EYE SOLN		B	$$			
BETOPTIC S 0.25% EYE DROPS		B	$$$$			
OCUPRESS OPTH SOL		B	NF			
2.'	Direct Acting Miotics					
PILOCARPINE 0.5% EYE DROPS		G	$			
PILOCARPINE 1% EYE DROPS		G	$			
PILOCARPINE 4% EYE DROPS		G	$			
2.4.0	Other Glaucoma Drugs					
LUMIGAN 0.03% EYE DROPS		B	$$$			
TRAVATAN 0.004% EYE DROP		B	$$$			
TRUSOPT 2% EYE DROPS		B	$$$			
XALATAN 0.005% EYE DROPS		B	$$$			
COSOPT OPTH SOL		B	$$$$			
2.5.0	Oral Drugs for Glaucoma					
METHAZOLAMIDE 50MG TABLET		G	$			
2.6.0	Cycloplegic Mydriates					
ATROPINE 1% EYE DROPS		G	$			
HOMATROPINE OPTH SOL 5%		G	$			
CYCLOGYL 0.5% EYE DROPS		B	NF			
CYCLOGYL 2% EYE DROPS		B	NF			
ISOPTO HOMATROPINE 2% DROPS		B	NF			
' 'TO HOMATROPINE 5% DROPS		B	NF			HOMATROPINE OPTH SOL 5%
2.7.0	Non-Steroidal Anti-Inflammatory Agents					
VOLTAREN OPTH SUSP		B	$$$$			

	F	Cost	Scripts	Spendir	Substitute
ACULAR 0.5% EYE DROPS	B	NF			
ACULAR LS 4% EYE DROPS	B	NF			
2. Antibiotics					
BACITRACIN OPTH OINT	G	$			
BACITRACIN-POLYMYXIN OPT.OI	G	$			
ERYTHROMYCIN OPHTALMIC OINT	G	$			
GENTAK 3 MG/GM EYE OINTMENT	G	$			
GENTAK 3MG/ML EYE DROPS	G	$			
GENTAMICIN 3 MG/ML EYE DROP	G	$			
GENTAMICIN 3MG/GM EYE OINT	G	$			
GENTAMICIN 3MG/ML EYE DROPS	G	$			
NEO/BACIT/POLY/HC EYE OINT	G	$			
NEO/POL/BAC OPTH OINT	G	$			
NEO/POLY/GRAM EYE DR	G	$			
NEO/POLY/HC OPTH SUS	G	$			
NEO/POLY/HC OTIC SUSP	G	$			
NEO/POLYMYXIN/HC EAR SOLN	G	$			
NEO/POLYMYXIN/HC EAR SUSP	G	$			
POLYMYXIN B/TMP EYE DROPS	G	$			
TOBRAMYCIN 0.3% EYE DROPS	G	$			
OFLOXACIN 0.3% EYE DROPS	B	$$$			
CIPROFLOXACIN 0.3% EYE DROP	G	$$$$			
CILOXN0.3%OINTMENT	B	$$$$$			
VIGAMOX 0.5% EYE DROPS	B	$$$$$			
)XAN 0.3% EYE DROPS	B	NF			CIPROFLOXACIN 0.3% EYE DROP
NEOSPORIN OPTH OINT	B	NF			NEO/POL/BAC OPTH OINT
NEOSPORIN OPTH SOL	B	NF			
OCUFLOX 0.3% EYE DROPS	B	NF			OFLOXACIN 0.3% EYE DROPS
POLYSPORIN OINTMENT	B	NF			POLYMYXIN B/TMP EYE DROPS
TOBREX OPTH OINT	B	NF			
2.10.0 Sulfonamides					
SULF-10 10% EYE DROPS	G	$			
SULFACETAMIDE 10% EYE DROPS	G	$			
BLEPH-10 10% EYE DROPS	B	NF			SULFACETAMIDE 10% EYE DROPS
BLEPH-10 10% EYE OINTMENT	B	NF			
2.11.0 Steroids					
FLUOROMETHOLONE 0.1% DROPS	G	$			
FLUOROMETHOLONE OPHT SUSP	G	$			
PREDNISOLONE AC 1% EYE DROP	G	$			
PREDNISOLONE AC 1%OPH SUSP	G	$			
PRED MILD 0.12% EYE DROPS	B	$$			
PREDNISOLONE SOD 1% EYE D	G	$$$			
PREDNISOLONE SOD 1% EYE DRO	G	$$$			
EX 0.2% EYE DROPS	B	$$$$			
PRED FORTE 1% EYE DROPS	B	NF			PREDNISOLONE AC 1% EYE DROP

		B	Cost	Scripts	Spendin	Substitute
2.12.0	Steroid-Antibiotic Combinations					
NEO/POLY/DEXAMET EYE OINT		G	$			
NEO/POLY/DEXAMETH EYE DROP		G	$			
TOBRADEX EYE DROPS		B	$$$$			
TOBRADEX EYE OINTMENT		B	$$$$			
PRED-G OPTH OINT		B	NF			
2.13.0	Steroid-Sulfonamide Combinations					
BLEPHAMIDE 5ML		B	$$$$$			
FML OPHTHALMIC SUSP		B	NF			
FML S.O.P. 0.1% OINTMENT		B	NF			
2.14.0	Sympathomimetics					
ALPHAGAN 0.2% EYE DROPS		G	$$$			BRIMONIDINE 0.2% EYE DROP
BRIMONIDINE 0.2% EYE DROP		G	$$$			
ALPHAGAN P 0.1% DROPS		B	$$$$			
ALPHAGAN P 0.15% EYE DROPS		B	$$$$			
2.15.0	Miscellaneous Ophthalmologics					
PROPARACAINE 0.5% EYE DROPS		G	$			
CROMOLYN 4% EYE DROPS		G	$$$			
/ \INE OPHTH.SOL 0.5%		B	$$$$			
O\ IVAR 0.05% DROPS		B	$$$$			
ZADITOR 0.025% EYE DROPS		B	$$$$			
PATANOL 0.1% 0/S		B	$$$$$			
2.16.0	Antivirals					
TRIFLURIDINE 1% EYE DROPS		G	$$$$$			
3.1.1	Antihistamines					
CLEMASTINE FUM 2.68MG TAB		G	$			
CYPROHEPTADINE HCL4MG TAB		G	$			
DIPHENHYDRAMINE 25MG		G	$			
DIPHENHYDRAMINE 25MG CAPS		G	$			
DIPHENHYDRAMINE 50MG CAP		G	$			
HYDROXYZINE PAM 25MG CAP		G	$			
HYDROXYZINE PAM 50MG CAP		G	$			
HYDROXYZINE HCL 10MG TABLET		G	$$			
HYDROXYZINE HCL 25MG TABLET		G	$$			
HYDROXYZINE HCL 50MG TABLET		G	$$			
CLARINEX 5MG TABLET		B	$$$			
FEXOFENADINE 60MG		G	$$$			
FEXOFENADINE 180MG		G	$$$			
')FENADINE 30MG		G	$$$			
Z\ RTEC 10MG TABLET		B	$$$			
ZYRTEC 5MG TAB		B	$$$			

WILLIAMSON COUNTY
PURCHASING DEPARTMENT
301 SE INNER LOOP - SUITE 106
GEORGETOWN, TEXAS 78626

http://wcportals.wilco.org/Procurement/

REQUEST FOR PROPOSAL

PHARMACEUTICALS AND PHARMACEUTICAL SERVICE/SUPPLIES FOR THE WILLIAMSON COUNTY JAIL

ANNUAL CONTRACT

PROPOSAL NUMBER: 09WCAP100

PROPOSAL MUST BE RECEIVED ON OR BEFORE: SEPTEMBER 23, 2008 - 1:30 PM

PROPOSAL WILL BE PUBLICLY ACKNOWLEDGED: SEPTEMBER 23, 2008 - 2:00 PM

PROPOSAL SUBMISSION

DEADLINE: Proposals must be received in the Williamson County Purchasing Department **at or before 1:30 pm on Tuesday, September 23, 2008**. **Proposals will be publicly acknowledged at 2:00 pm or soon thereafter** in the Williamson County Purchasing Dept., 301 SE Inner Loop, Suite 106, Georgetown, Texas.

METHODS: Sealed proposals may be hand-delivered or mailed to the *Williamson County Purchasing Department, Attn: Jonathan Harris, Suite 106, Williamson County Inner Loop Annex, 301 SE Inner Loop, Georgetown, Texas 78626.*

FAX/EMAIL: Facsimile and electronic mail transmittals will not be accepted.

PROPOSAL REQUIREMENTS

QUADRUPLICATE: All proposals must be submitted in quadruplicate (1 original complete proposal set and 3 copies of the proposal set). The proposal sets should be marked "original" or "copy". A "proposal set" consists of the COMPLETED AND SIGNED Proposal Form and any other required documentation. **All copies must have the same attachments as the original.**

SEALED: All proposals must be returned in a sealed envelope with the proposal name, number, opening date and time clearly marked on the outside of the envelope. If an overnight delivery service is used, the proposal name, number, opening date and time must be clearly marked on the outside of the delivery service envelope.

REFERENCES: Williamson County requires proposer to supply with this proposal, a list of at least three (3) references where like services have been supplied by their firm. Include name of firm, address, telephone number, and name of representative.

LEGIBLITY: Proposals must be legible and of a quality that can be reproduced.

FORMS: All proposals must be submitted on the forms provided in this proposal document. Changes to proposal forms made by proposers shall disqualify the proposal. Proposals cannot be altered or amended after submission deadline.

LATE PROPOSAL: Proposals received after submission deadline will not be opened and will be considered void and unacceptable. Williamson County is not responsible for lateness of mail, courier service, etc.

RESPONSIBILITY: A prospective proposer must affirmatively demonstrate proposer's responsibility. A prospective proposer must meet the following requirements:

a) have adequate financial resources, or the ability to obtain such resources as required;

	F	Cost	Scripts	Spendir	Substitute
ALLEGRA-D TABLET SA	B	$$$$			

3.3.1 Xanthines

IOPHYLLINE 250MG/10ML VL	G	$			
THEOPHYLLINE 100 MG TAB SA	G	$			
THEOPHYLLINE 200MG TAB SA	G	$			
THEOPHYLLINE 300MG TAB SA	G	$			
THEO-24 200MG CAPSULE SA	B	NF			
THEO-DUR 300MG TABLET SA	B	NF			THEOPHYLLINE 300MG TAB SA

3.3.2 Beta Agonists Oral

ALBUTEROL .083% SOLUTION	G	$			
ALBUTEROL 90MCG INHALER	G	$			
ALBUTEROL SULF INH	G	$			
ALBUTEROL SULFATE 4MG TAB	G	$			

3.3.3 Beta Agonist Inhalers

PROVENTIL INHALER	B	$			
MAXAIR AUTOHALER	B	$$$			
PROVENTAL INHALER HFA	B	$$$			
SEREVENT 21MCG INHALER	B	$$$$			
SEREVENT DISKUS 50MCG	B	$$$$			

3.3.4 Inhaled Corticosteroids

R 40MCG INHALER	B	$$$$			
QVAR 80MCG INHALER	B	$$$$			
FLOVENT 110MCG INHALER	B	$$$$$			
FLOVENT 220MCG INHALER	B	$$$$$			
FLOVENT 44MCG INHALER	B	$$$$$			
AZMACORT INHALER	B	$$$$$$			
PULMICORT .25MG/2ML RESPULE	B	$$$$$$			
PULMICORT 200MCG TURBUHALER	B	$$$$$$			
AEROBID INHALER 7GM	B	NF			
BECLOVENT INHALER	B	NF			

3.3.5 Intranasal Steroids

BECLOMETHASONE 0.42% NS	G	$$$			
BECONASE 42MCG INHALER	B	NF			
BECONASE AQ 0.042% SPRAY	B	NF			
BECONASE NASAL INH	B	NF			
NASAREL SPRAY 25MCG	B	NF			

3.3.6 Miscellaneous Pulmonary Agents

CROMOLYN SODIUM NASAL SPRAY	G	$$			
OLATE 20MG TABLET	B	$$$			
ATROVENT 0.06% SPRAY	B	$$$			
ATROVENT HFA INHALER	B	$$$			
ATROVENT INHALER	B	$$$			

	F	Cost	Scripts	Spendir	Substitute
ACETYLCYSTEINE 20% VIAL	G	$$$$			
ADVAIR 250/50	B	$$$$			
AD\'AIR DISKUS 500/50	B	$$$$			
ADVAIR100/50	B	$$$$			
COMBIVENT INHAL 15GM	B	$$$$			
INTAL INHALER	B	$$$$			
SINGULAIR 10MG TABLET	B	$$$$			
IPRATROPIUM BR 0.02% SOLN	G	$$$$$			
SPIRIVA HANDIHALER	B	$$$$$			
DUONEB 2.5-0.5MG/3ML SOLN	B	$$$$$$			
MUCOMYST-10 VIAL	B	NF			ACETYLCYSTEINE 20% VIAL
4.1.0 Cholinergic Stimulants					
BETHANECHOL 10 MG TABLET	G	$$$$			
BETHANECHOL 25MG TABLET	G	$$$$			
BETHANECHOL 50MG TABLET	G	$$$$			
ARICEPT 10MG	B	NF			
ARICEPT 5MG TABLET	B	NF			
URECHOLINE 25 MG	B	NF			BETHANECHOL 25MG TABLET
4.4.0 Miscellaneous Urologicals					
UROCIT-K 540 MG TABLET SA	B	$			
EI MIRON 100MG CAPSULE	B	$$$$$			
UKISED TABLET	B	NF			
4.5.0 Benign Prostatic Hyperpasia Therapy					
UROXATRAL 10MG TABLET	B	$$$			
AVODART 0.5MG SOFTGEL	B	$$$$			
FLOMAX 0.4MG CAPSULE SA	B	$$$$			
5.1.0 Vitamins & Hemantinics					
CYANOCOBALAMIN 1000MCG/ML	G	$			
FERREX FORTE 150MG CAP	G	$			
FERREX-150 CAPSULE	G	$			
FOLIC ACID 0.4MG TABLET	G	$			
FOLIC ACID 0.8 MG TABLET	G	$			
FOLIC ACID 1MG TABLET	G	$			
FOLIC ACID INJ 5MG/ML	G	$			
FOLTX TABLET	B	$			
IRON 325MG TAB	G	$			
PRENATAL 1+1 TAB	G	$			
PRENATAL PLUS TABLTS	G	$			
PRENATAL VITAMINS OTC	G	$			
PRENATE ELITE TABLET	B	$			
PRENAVITE TABLET	G	$			
UI TRA NATALCARE TABLET	G	$			
)-1 100MG	G	$			
VI1 B12 100 MCG TAB	G	$			
VIT B12 500MCG	G	$			
VIT B-6 50MG TAB	G	$			

	F	Cost	Scripts	Spendir	Substitute
VITAMIN B COMPLEX	G	$			
VITAMIN B12 1000MCG/ML VI	G	$			
VITAMIN B12 500MCGTAB	G	$			
VITAMIN B-6 25MG/PYRIDOXINE	G	$			
.MIN B-6 50MG TABLET	G	$			
VITAMIN C 500MG TAB	G	$			
VITAMIN D 50000IU SOFTGEL	G	$			
VITAMIN E 1000MG	G	$			
VITAMIN E 400IU CAP	G	$			
VITAMINE B COMPLEX	G	$			
VITAMINE D 400IU	G	$			
DEXFOL TABLET	B	$$			
DIATX TABLET	B	$$			
DIATX ZN TABLET	B	$$			
RENAL CAPS	B	$$			
VITAFOL-PN CAPLET	B	$$			
CENOGEN ULTRA CAPSULE	B	NF			
FOLGARD RX 2.2 TABLET	B	NF			
HEMOCYTE TABLET	B	NF			
NEPHROCAPS CAPSULE	B	NF			
NEPHRO-VITE TABLET	B	NF			
NIFEREX 100 MG/5 ML ELIXIR	B	NF			
NIFEREX 150 FORTE CAPS	B	NF			
NIFEREX-PN FORTE TABLET	B	NF			
PRECARE CHEWABLE TABLET	B	NF			
STROVITE ADVANCE CAPLET	B	NF			
VICON FORTE CAPSULE	B	NF			
5.? Potassium					
KCL 20MEQ IN D5W/NACL 0.9%	G	$			
KCL 20MEQ/NS 1000ML IV SOLN	G	$			
POTASSIUM CL 10% LIQUID S/F	G	$			
POTASSIUM CL 10MEQ CAP SA	G	$			
POTASSIUM CL 10MEQ SR TAB	G	$			
POTASSIUM CL 20MEQ PACKET	G	$			
POTASSIUM CL 20MEQ SR TAB	G	$			
POTASSIUM CL 8MEQ TABLET SA	G	$			
K-DUR 20MEQ TABLET SA	B	NF			
KLOR-CON 10MEQ TABLET SA	B	NF			
KLOR-CON 20 MEQ PACKET	B	NF			
KLOR-CON 8 MEQ TABLET	B	NF			
KLOR-CON M15 TABLET	B	NF			
KLOR-CON M20 TABLET SA	B	NF			
KLOR-CON/EF 25MEQ TAB EFF	B	NF			
5.3.2 Other Electrolytes					
ZINC SULFATE 220MG	G	$			
ZINC SULFATE 50MG TABLET	G	$			
6.1.0 Miscellaneous Agents					
ANTABUSE 250MG TABLET	B	$$			
.AGEL 400MG TABLET	B	$$$$			
RENAGEL 403MG CAPSULE	B	$$$$			
RENAGEL 800MG TABLETS	B	$$$$			

	r	Cost	Scripts	Spendir	Substitute
RILUTEK 50MG TABLET	E	$$$$$$			
KAYEXALATE 15GM/60ML SUSP	B	NF			
PROAMATINE 5MG TAB	B	NF			

	P	Cost	Scripts	Spendin	Substitute
ALLEGRA 180MG TABLET	B	NF			FEXOFENADINE 180MG
ALLEGRA 30MG TABLET	B	NF			FEXOFENADINE 30MG
ALLEGRA 60MG TABLET	B	NF			FEXOFENADINE 60MG
A[illegible]RAX 50MG TABLET	B	NF			HYDROXYZINE HCL 50MG TABLET
V[illegible]ARIL 25MG CAPSULE	B	NF			HYDROXYZINE PAM 25MG CAP
VISTARIL 50MG CAPSULE	B	NF			HYDROXYZINE PAM 50MG CAP

3.1.2 Andrenergics

EPIPEN 0.3MG AUTO-INJECTOR	B	$$$$$$			
EPIPEN AUTO-INJECTOR 0.3MG	B	$$$$$$			

3.2.1 Antitussive Combinations

*GUAIFEN/PPE 400/75 TAB	G	$			
BENYLIN ADULT FORMULA SYRUP	G	$			
BENZONATATE 100MG CAP	G	$			
BENZONATATE 200 MG CAPSULE	G	$			
BROMAXEFED RF SYRUP	G	$			
BROMETANE DX SYRUP	G	$			
BROMPHENR/P-EPHED 12/120 CP	G	$			
CRANTEX LA TABLET	G	$			
DEXROMETHORPHAN/GUAIFENESIN	G	$			
GUAIFEN PSE 600/120 TABLET	G	$			
GUAIFEN/P-PROP 400/75 TB SA	G	$			
GUAIFEN/PSEUDO 600/120MG	G	$			
GUAIFENESIN 200MG TABLET	G	$			
GUAIFENESIN 400 MG TABLET	G	$			
GUAIFENESIN 600MG	G	$			
GUAIFENESIN DM 100/10	G	$			
G[illegible]AIFENESIN DM SY R	G	$			
[illegible]AIFENESIN LA 600MG CAPLET	G	$			
GUAIFENESIN SYRUP	G	$			
GUAIFENESIN SYRUP 100MG/5CC	G	$			
GUAIFENESIN SYRUP 100MG/ML	G	$			
GUAIFENESIN W/CODEINE SYRUP	G	$			
GUAIFENESIN/DEXT 200/20	G	$			
GUAIFENEX DM TABLET SA	G	$			
HYDROCODONE/GUAIFENESIN SYR	G	$			
PHANASIN-GUAIFFENASSEN SYRP	G	$			
PHENYLPROPANOLAMINE/GUAIF	G	$			
PROMETH w/ CODEINE SYRUP	G	$			
PROMETHAZINE VC/COD SYRUP	G	$			
PROMETHAZINE W/DM SYRUP	G	$			
TUSSIN 100MG/5ML SYRUP	G	$			
TUSSIN CF SYRUP	G	$			
TUSSIN COUGH/COLD GELCAP	G	$			
TUSSIN DM CAPS	G	$			
TUSSIN DM CLEAR SYRUP	G	$			
TUSSIN DM SYRUP	G	$			
TUSSIN SYRUP	G	$			
ANAPLEX DM COUGH SYRUP	B	$$$			
TUSSIONEX PENNKINETIC SUSP	B	$$$$			
RONDEC SYRUP	B	NF			

3.2. Decongestant/Antihistamines

ZYRTEC-D 12 HOUR	B	$$$			