

Anne Arundel Medical Center

Chargemaster - Drugs

December 2022

The file posted here reflects charges for items and services provided by Anne Arundel Medical Center as of January 1, 2023. This type of file is commonly referred to as the hospitals "charge master." In Maryland, the Maryland Health Services Cost Review Commission (HSCRC) regulates the average rate for hospital services.

Though the HSCRC sets rates as of a certain date, hospital charges are allowed to fluctuate during the course of the year, and detailed charges for certain items may be different than the average approved rate that covers a larger group of services. This is both permissible and normal as hospitals adjust charges frequently to comply with other HSCRC regulations.

Inpatient or Outpatient	Medication Description	NDC	HCPCS	Charge Per Unit	Self Pay discount if paid at time of discharge	Self Pay discount if paid within 30 days of discharge	Min Negotiated Charge	Max Negotiated Charge
Inpatient/Outpatient	ACETAMINOPHEN 80 MG PO CHEW	0904-5256-46	A9150	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	ACETAMINOPHEN 80 MG PO CHEW	0904-5791-46	A9150	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	ACETAMINOPHEN 650 MG/20.3 ML PO SOLN	0121-0657-21	A9150	\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	ACETAMINOPHEN 650 MG/20.3 ML PO SOLN	0121-1971-21	A9150	\$0.24	\$0.24	\$0.24	\$0.22	\$0.24
Inpatient/Outpatient	ACETAMINOPHEN 650 MG/20.3 ML PO SOLN	0904-6820-76	A9150	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	ACETAMINOPHEN 650 MG/20.3 ML PO SOLN	66689-056-01	A9150	\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	ACETAMINOPHEN 650 MG/20.3 ML PO SOLN	60687-571-24	A9150	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	ACETAMINOPHEN 650 MG/20.3 ML PO SOLN	99999-7014-2	A9150	\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	ACETAMINOPHEN 325 MG PO TABS	50580-501-80	A9270	\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	ACETAMINOPHEN 325 MG PO TABS	57896-101-01	A9270	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	ACETAMINOPHEN 325 MG PO TABS	63739-440-01	A9270	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	ACETAMINOPHEN 325 MG PO TABS	0045-0496-60	A9270	\$0.34	\$0.33	\$0.34	\$0.31	\$0.33
Inpatient/Outpatient	ACETAMINOPHEN 325 MG PO TABS	37864-00101	A9270	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	ACETAMINOPHEN 325 MG PO TABS	50580-501-30	A9270	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	ACETAMINOPHEN 325 MG PO TABS	50580-600-02	A9270	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	ACETAMINOPHEN 325 MG PO TABS	0904-1982-80	A9270	\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	ACETAMINOPHEN 325 MG PO TABS	0904-6773-61	A9270	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	ACETAMINOPHEN 325 MG PO TABS	50580-458-11	A9270	\$0.67	\$0.66	\$0.66	\$0.62	\$0.66
Inpatient/Outpatient	ACETAMINOPHEN 325 MG PO TABS	49483-340-10	A9270	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	ACETAMINOPHEN 325 MG PO TABS	57896-101-10	A9270	\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	ACETAMINOPHEN 325 MG PO TABS	50580-496-98	A9270	\$0.61	\$0.60	\$0.60	\$0.56	\$0.60
Inpatient/Outpatient	DAPTOMYCIN 350 MG IV SOLR	16729-434-05	J0878	\$165.39	\$162.08	\$163.74	\$152.65	\$162.08
Inpatient/Outpatient	ACETAMINOPHEN 120 MG RE SUPP	45802-732-00	A9150	\$1.50	\$1.47	\$1.49	\$1.38	\$1.47
Inpatient/Outpatient	ACETAMINOPHEN 120 MG RE SUPP	0713-0118-12	A9150	\$1.67	\$1.64	\$1.65	\$1.54	\$1.64
Inpatient/Outpatient	ACETAMINOPHEN 120 MG RE SUPP	51672-2115-2	A9150	\$3.16	\$3.10	\$3.13	\$2.92	\$3.10
Inpatient/Outpatient	ACETAMINOPHEN 325 MG RE SUPP	51672-2116-4	A9150	\$1.93	\$1.89	\$1.91	\$1.78	\$1.89
Inpatient/Outpatient	ACETAMINOPHEN 325 MG RE SUPP	0713-0164-12	A9150	\$2.04	\$2.00	\$2.02	\$1.88	\$2.00
Inpatient/Outpatient	ACETAMINOPHEN 650 MG RE SUPP	45802-730-30	A9150	\$1.59	\$1.56	\$1.57	\$1.47	\$1.56
Inpatient/Outpatient	ACETAMINOPHEN 650 MG RE SUPP	0713-0165-50	A9150	\$0.87	\$0.85	\$0.86	\$0.80	\$0.85
Inpatient/Outpatient	ACETAMINOPHEN 650 MG RE SUPP	0713-0165-12	A9150	\$2.01	\$1.97	\$1.99	\$1.86	\$1.97
Inpatient/Outpatient	ACETAMINOPHEN 650 MG RE SUPP	45802-730-33	A9150	\$0.99	\$0.97	\$0.98	\$0.91	\$0.97
Inpatient/Outpatient	ACETAMINOPHEN 650 MG RE SUPP	0713-0165-06	A9150	\$2.38	\$2.33	\$2.36	\$2.20	\$2.33
Inpatient/Outpatient	ACETAMINOPHEN 650 MG RE SUPP	51672-2117-4	A9150	\$2.45	\$2.40	\$2.43	\$2.26	\$2.40
Inpatient/Outpatient	ACETAMINOPHEN 650 MG RE SUPP	45802-730-32	A9150	\$1.25	\$1.23	\$1.24	\$1.15	\$1.23
Inpatient/Outpatient	ACETAMINOPHEN 650 MG RE SUPP	45802-730-00	A9150	\$1.26	\$1.23	\$1.25	\$1.16	\$1.23
Inpatient/Outpatient	ACETAZOLAMIDE 250 MG PO TABS	51672-4023-1	A9270	\$3.30	\$3.23	\$3.27	\$3.05	\$3.23
Inpatient/Outpatient	ACETAZOLAMIDE 250 MG PO TABS	64380-834-06	A9270	\$1.24	\$1.22	\$1.23	\$1.14	\$1.22
Inpatient/Outpatient	ACETAZOLAMIDE 250 MG PO TABS	23155-288-01	A9270	\$1.69	\$1.66	\$1.67	\$1.56	\$1.66
Inpatient/Outpatient	ACETAZOLAMIDE SODIUM 500 MG IJ SOLR	0143-9503-01	J1120	\$196.64	\$192.71	\$194.67	\$181.50	\$192.71
Inpatient/Outpatient	ACETAZOLAMIDE SODIUM 500 MG IJ SOLR	39822-0190-7	J1120	\$56.42	\$55.29	\$55.86	\$52.08	\$55.29
Inpatient/Outpatient	ACETAZOLAMIDE SODIUM 500 MG IJ SOLR	39822-0191-9	J1120	\$187.40	\$183.65	\$185.53	\$172.97	\$183.65
Inpatient/Outpatient	ACETAZOLAMIDE SODIUM 500 MG IJ SOLR	67457-853-50	J1120	\$180.89	\$177.27	\$179.08	\$166.96	\$177.27
Inpatient/Outpatient	ACETAZOLAMIDE SODIUM 500 MG IJ SOLR	39822-0190-1	J1120	\$50.88	\$49.86	\$50.37	\$46.96	\$49.86
Inpatient/Outpatient	ACETAZOLAMIDE SODIUM 500 MG IJ SOLR	23155-313-31	J1120	\$50.45	\$49.44	\$49.95	\$46.57	\$49.44
Inpatient/Outpatient	AZTREONAM 2 G IJ SOLR	0003-2570-16	J3490	\$262.35	\$257.10	\$259.73	\$242.15	\$257.10
Inpatient/Outpatient	AZTREONAM 2 G IJ SOLR	63323-402-20	J3490	\$244.61	\$239.72	\$242.16	\$225.78	\$239.72
Inpatient/Outpatient	AZTREONAM 2 G IJ SOLR	63323-402-24	J3490	\$244.61	\$239.72	\$242.16	\$225.78	\$239.72
Inpatient/Outpatient	AZTREONAM 2 G IJ SOLR	63323-402-01	J3490	\$245.75	\$240.84	\$243.29	\$226.83	\$240.84
Inpatient/Outpatient	AZTREONAM 2 G IJ SOLR	63323-402-41	J3490	\$244.61	\$239.72	\$242.16	\$225.78	\$239.72
Inpatient/Outpatient	AZTREONAM 2 G IJ SOLR	0409-0830-11	J3490	\$288.13	\$282.37	\$285.25	\$265.94	\$282.37
Inpatient/Outpatient	ADENOSINE INFUSION 90 MG IN NS 90 ML (PREMIX) (IR/CATH)	0469-0871-30	J0153	\$50.24	\$49.24	\$49.74	\$46.37	\$49.24
Inpatient/Outpatient	ACETYLCYSTEINE 20 % IN SOLN	0517-7604-25		\$6.73	\$6.60	\$6.66	\$6.21	\$6.60
Inpatient/Outpatient	ACETYLCYSTEINE 20 % IN SOLN	99999-7604-4		\$6.73	\$6.60	\$6.66	\$6.21	\$6.60
Inpatient/Outpatient	ACETYLCYSTEINE 20 % IN SOLN	63323-694-04		\$4.68	\$4.59	\$4.63	\$4.32	\$4.59
Inpatient/Outpatient	ACETYLCYSTEINE 20 % IN SOLN	63323-692-10		\$2.82	\$2.76	\$2.79	\$2.60	\$2.76
Inpatient/Outpatient	ACETYLCYSTEINE 20 % IN SOLN	63323-694-41		\$4.69	\$4.60	\$4.64	\$4.33	\$4.60
Inpatient/Outpatient	ACETYLCYSTEINE 20 % IN SOLN	63323-690-41		\$1.00	\$0.98	\$0.99	\$0.92	\$0.98

Inpatient/Outpatient	ACETYLCYSTEINE 20 % IN SOLN	0409-3308-11		\$1.47	\$1.44	\$1.46	\$1.36	\$1.44
Inpatient/Outpatient	ACETYLCYSTEINE 20 % IN SOLN	0517-7604-01		\$6.73	\$6.60	\$6.66	\$6.21	\$6.60
Inpatient/Outpatient	KETAMINE HCL 10 MG/ML IJ SOLN (PEDS)	69374-982-33		\$6.48	\$6.35	\$6.42	\$5.98	\$6.35
Inpatient/Outpatient	ALBUTEROL SULFATE 2 MG PO TABS	51079-657-01	A9270	\$1.56	\$1.53	\$1.54	\$1.44	\$1.53
Inpatient/Outpatient	ALBUTEROL SULFATE 2 MG PO TABS	51079-657-20	A9270	\$21.34	\$20.91	\$21.13	\$19.70	\$20.91
Inpatient/Outpatient	ALLOPURINOL 100 MG PO TABS	62584-988-01	A9270	\$0.93	\$0.91	\$0.92	\$0.86	\$0.91
Inpatient/Outpatient	ALLOPURINOL 100 MG PO TABS	51079-205-20	A9270	\$0.73	\$0.72	\$0.72	\$0.67	\$0.72
Inpatient/Outpatient	ALLOPURINOL 100 MG PO TABS	51079-205-01	A9270	\$0.24	\$0.24	\$0.24	\$0.22	\$0.24
Inpatient/Outpatient	ALLOPURINOL 100 MG PO TABS	62584-988-11	A9270	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	ALLOPURINOL 100 MG PO TABS	0904-6571-61	A9270	\$0.79	\$0.77	\$0.78	\$0.73	\$0.77
Inpatient/Outpatient	ALLOPURINOL 100 MG PO TABS	63739-410-10	A9270	\$0.86	\$0.84	\$0.85	\$0.79	\$0.84
Inpatient/Outpatient	ALLOPURINOL 100 MG PO TABS	16714-041-10	A9270	\$0.64	\$0.63	\$0.63	\$0.59	\$0.63
Inpatient/Outpatient	ALLOPURINOL 100 MG PO TABS	0904-7041-61	A9270	\$0.83	\$0.81	\$0.82	\$0.77	\$0.81
Inpatient/Outpatient	ALLOPURINOL 300 MG PO TABS	62584-713-11	A9270	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	ALLOPURINOL 300 MG PO TABS	51079-206-01	A9270	\$2.95	\$2.89	\$2.92	\$2.72	\$2.89
Inpatient/Outpatient	ALLOPURINOL 300 MG PO TABS	0904-6572-61	A9270	\$1.61	\$1.58	\$1.59	\$1.49	\$1.58
Inpatient/Outpatient	ALLOPURINOL 300 MG PO TABS	55111-730-01	A9270	\$0.42	\$0.41	\$0.42	\$0.39	\$0.41
Inpatient/Outpatient	ALLOPURINOL 300 MG PO TABS	16714-042-10	A9270	\$0.64	\$0.63	\$0.63	\$0.59	\$0.63
Inpatient/Outpatient	ALLOPURINOL 300 MG PO TABS	63739-796-10	A9270	\$1.54	\$1.51	\$1.52	\$1.42	\$1.51
Inpatient/Outpatient	ALPRAZOLAM 0.25 MG PO TABS	68084-647-11	A9270	\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	ALPRAZOLAM 0.25 MG PO TABS	0781-1061-10	A9270	\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	ALPRAZOLAM 0.25 MG PO TABS	59762-3719-1	A9270	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	ALPRAZOLAM 0.25 MG PO TABS	0781-1061-01	A9270	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	ALPRAZOLAM 0.25 MG PO TABS	51079-788-20	A9270	\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	ALPRAZOLAM 0.25 MG PO TABS	65862-676-05	A9270	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	ALUM AMMONIUM POWD	0395-0049-12	A9270	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	ALUM AMMONIUM POWD	0395-0049-96	A9270	\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	ALUM AMMONIUM POWD	51552-218-06	A9270	\$1.79	\$1.77	\$1.77	\$1.65	\$1.75
Inpatient/Outpatient	ALUMINUM HYDROXIDE GEL 320 MG/5ML PO SUSP	0536-0091-85	A9270	\$0.04	\$0.04	\$0.04	\$0.04	\$0.04
Inpatient/Outpatient	AMANTADINE HCL 100 MG PO CAPS	0781-2048-01	A9270	\$6.02	\$5.90	\$5.96	\$5.56	\$5.90
Inpatient/Outpatient	AMANTADINE HCL 100 MG PO CAPS	0832-1015-00	A9270	\$3.92	\$3.84	\$3.88	\$3.62	\$3.84
Inpatient/Outpatient	AMANTADINE HCL 100 MG PO CAPS	0904-6630-61	A9270	\$4.49	\$4.40	\$4.45	\$4.14	\$4.40
Inpatient/Outpatient	AMANTADINE HCL 100 MG PO CAPS	51079-247-20	A9270	\$13.36	\$13.09	\$13.23	\$12.33	\$13.09
Inpatient/Outpatient	AMANTADINE HCL 100 MG PO CAPS	62332-246-31	A9270	\$1.60	\$1.57	\$1.58	\$1.48	\$1.57
Inpatient/Outpatient	AMANTADINE HCL 100 MG PO CAPS	0904-7042-61	A9270	\$4.08	\$4.00	\$4.04	\$3.77	\$4.00
Inpatient/Outpatient	AMANTADINE HCL 50 MG/5ML PO SOLN	0121-0646-16	A9270	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	AMIKACIN SULFATE 500 MG/2ML IJ SOLN	0703-9032-03	J0278	\$29.78	\$29.18	\$29.48	\$27.49	\$29.18
Inpatient/Outpatient	AMINOCAPROIC ACID 250 MG/ML IV SOLN	0517-9120-25	J3490	\$1.58	\$1.55	\$1.56	\$1.46	\$1.55
Inpatient/Outpatient	AMINOCAPROIC ACID 250 MG/ML IV SOLN	0409-4346-73	J3490	\$1.01	\$0.99	\$1.00	\$0.93	\$0.99
Inpatient/Outpatient	AMINOCAPROIC ACID 250 MG/ML IV SOLN	0409-4346-16	J3490	\$1.29	\$1.26	\$1.28	\$1.19	\$1.26
Inpatient/Outpatient	AMINOCAPROIC ACID 250 MG/ML IV SOLN	0517-9120-01	J3490	\$1.58	\$1.55	\$1.56	\$1.46	\$1.55
Inpatient/Outpatient	AMINOPHYLLINE 25 MG/ML IV SOLN	0409-5922-01	J0280	\$1.81	\$1.77	\$1.79	\$1.67	\$1.77
Inpatient/Outpatient	AMINOPHYLLINE 25 MG/ML IV SOLN	0409-5921-16	J0280	\$5.38	\$5.27	\$5.33	\$4.97	\$5.27
Inpatient/Outpatient	AMINOPHYLLINE 25 MG/ML IV SOLN	0409-5921-01	J0280	\$5.90	\$5.78	\$5.84	\$5.45	\$5.78
Inpatient/Outpatient	AMINOPHYLLINE 25 MG/ML IV SOLN	0409-5922-16	J0280	\$1.65	\$1.62	\$1.63	\$1.52	\$1.62
Inpatient/Outpatient	AMITRIPTYLINE HCL 10 MG PO TABS	51079-131-01	A9270	\$0.87	\$0.85	\$0.86	\$0.80	\$0.85
Inpatient/Outpatient	AMITRIPTYLINE HCL 10 MG PO TABS	51079-131-20	A9270	\$0.43	\$0.42	\$0.43	\$0.40	\$0.42
Inpatient/Outpatient	AMITRIPTYLINE HCL 10 MG PO TABS	0603-2212-32	A9270	\$0.62	\$0.61	\$0.61	\$0.57	\$0.61
Inpatient/Outpatient	AMITRIPTYLINE HCL 10 MG PO TABS	16714-446-01	A9270	\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	AMITRIPTYLINE HCL 10 MG PO TABS	16729-171-01	A9270	\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	AMITRIPTYLINE HCL 25 MG PO TABS	51079-107-01	A9270	\$1.78	\$1.74	\$1.76	\$1.64	\$1.74
Inpatient/Outpatient	AMITRIPTYLINE HCL 25 MG PO TABS	51079-107-20	A9270	\$1.39	\$1.36	\$1.38	\$1.28	\$1.36
Inpatient/Outpatient	AMITRIPTYLINE HCL 25 MG PO TABS	0904-0201-61	A9270	\$2.01	\$1.97	\$1.99	\$1.86	\$1.97
Inpatient/Outpatient	AMITRIPTYLINE HCL 25 MG PO TABS	60687-433-11	A9270	\$0.70	\$0.69	\$0.69	\$0.65	\$0.69
Inpatient/Outpatient	AMITRIPTYLINE HCL 50 MG PO TABS	51079-133-01	A9270	\$3.15	\$3.09	\$3.12	\$2.91	\$3.09
Inpatient/Outpatient	AMITRIPTYLINE HCL 50 MG PO TABS	51079-133-20	A9270	\$1.72	\$1.69	\$1.70	\$1.59	\$1.69
Inpatient/Outpatient	AMITRIPTYLINE HCL 50 MG PO TABS	0904-0202-61	A9270	\$2.12	\$2.08	\$2.10	\$1.96	\$2.08
Inpatient/Outpatient	AMITRIPTYLINE HCL 50 MG PO TABS	60687-444-11	A9270	\$1.57	\$1.54	\$1.55	\$1.45	\$1.54
Inpatient/Outpatient	AMITRIPTYLINE HCL 75 MG PO TABS	51079-147-01	A9270	\$4.35	\$4.26	\$4.31	\$4.02	\$4.26
Inpatient/Outpatient	AMITRIPTYLINE HCL 75 MG PO TABS	51079-147-20	A9270	\$2.59	\$2.54	\$2.56	\$2.39	\$2.54
Inpatient/Outpatient	AMITRIPTYLINE HCL 75 MG PO TABS	0603-2215-21	A9270	\$2.80	\$2.74	\$2.77	\$2.58	\$2.74
Inpatient/Outpatient	AMITRIPTYLINE HCL 75 MG PO TABS	16714-449-01	A9270	\$2.43	\$2.38	\$2.41	\$2.24	\$2.38
Inpatient/Outpatient	AMITRIPTYLINE HCL 75 MG PO TABS	16729-174-01	A9270	\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	AMOXICILLIN 250 MG PO CAPS	62584-237-11	A9270	\$0.50	\$0.49	\$0.50	\$0.46	\$0.49
Inpatient/Outpatient	AMOXICILLIN 250 MG PO CAPS	0781-2020-01	A9270	\$0.32	\$0.31	\$0.32	\$0.30	\$0.31
Inpatient/Outpatient	AMOXICILLIN 250 MG PO CAPS	0093-3107-01	A9270	\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	AMOXICILLIN 250 MG PO CAPS	16714-298-01	A9270	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	AMOXICILLIN 500 MG PO CAPS	62584-238-01	A9270	\$2.39	\$2.34	\$2.37	\$2.21	\$2.34

Inpatient/Outpatient	AMOXICILLIN 500 MG PO CAPS	16714-299-03	A9270	\$0.42	\$0.41	\$0.42	\$0.39	\$0.41
Inpatient/Outpatient	AMOXICILLIN 500 MG PO CAPS	0781-2613-01	A9270	\$0.48	\$0.47	\$0.48	\$0.44	\$0.47
Inpatient/Outpatient	AMOXICILLIN 500 MG PO CAPS	57237-031-01	A9270	\$0.24	\$0.24	\$0.24	\$0.22	\$0.24
Inpatient/Outpatient	AMOXICILLIN 125 MG/5ML PO SUSR	0781-6039-55	A9270	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	AMOXICILLIN 250 MG/5ML PO SUSR	0143-9889-80	A9270	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	AMOXICILLIN 250 MG/5ML PO SUSR	0093-4155-79	A9270	\$0.20	\$0.20	\$0.20	\$0.18	\$0.20
Inpatient/Outpatient	AMOXICILLIN 250 MG/5ML PO SUSR	0781-6041-58	A9270	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	AMOXICILLIN 250 MG/5ML PO SUSR	99999-6041-5	A9270	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	AMOXICILLIN 250 MG/5ML PO SUSR	65862-707-80	A9270	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	AMPHOTERICIN B 50 MG IV SOLR	39822-1055-5	J0285	\$171.66	\$168.23	\$169.94	\$158.44	\$168.23
Inpatient/Outpatient	AMPICILLIN 500 MG PO CAPS	0781-2145-01	A9270	\$2.02	\$1.98	\$2.00	\$1.86	\$1.98
Inpatient/Outpatient	AMPICILLIN 500 MG PO CAPS	67253-181-10	A9270	\$0.53	\$0.52	\$0.52	\$0.49	\$0.52
Inpatient/Outpatient	AMPICILLIN SODIUM 1 G IJ SOLR	63323-389-10	J0290	\$28.67	\$28.10	\$28.38	\$26.46	\$28.10
Inpatient/Outpatient	AMPICILLIN SODIUM 1 G IJ SOLR	25021-136-10	J0290	\$10.66	\$10.45	\$10.55	\$9.84	\$10.45
Inpatient/Outpatient	AMPICILLIN SODIUM 1 G IJ SOLR	0781-9261-85	J0290	\$40.96	\$40.14	\$40.55	\$37.81	\$40.14
Inpatient/Outpatient	AMPICILLIN SODIUM 1 G IJ SOLR	0409-3726-10	J0290	\$10.61	\$10.40	\$10.50	\$9.79	\$10.40
Inpatient/Outpatient	AMPICILLIN SODIUM 1 G IJ SOLR	0781-3404-85	J0290	\$6.61	\$6.48	\$6.54	\$6.10	\$6.48
Inpatient/Outpatient	AMPICILLIN SODIUM 1 G IJ SOLR	55150-113-10	J0290	\$8.65	\$8.48	\$8.56	\$7.98	\$8.48
Inpatient/Outpatient	AMPICILLIN SODIUM 1 G IJ SOLR	44567-102-10	J0290	\$27.14	\$26.60	\$26.87	\$25.05	\$26.60
Inpatient/Outpatient	AMPICILLIN SODIUM 2 G IJ SOLR	55150-114-20	J0290	\$13.23	\$12.97	\$13.10	\$12.21	\$12.97
Inpatient/Outpatient	AMPICILLIN SODIUM 2 G IJ SOLR	0781-9273-95	J0290	\$9.94	\$9.74	\$9.84	\$9.17	\$9.74
Inpatient/Outpatient	AMPICILLIN SODIUM 2 G IJ SOLR	0781-9273-80	J0290	\$82.37	\$80.72	\$81.55	\$76.03	\$80.72
Inpatient/Outpatient	AMPICILLIN SODIUM 2 G IJ SOLR	0781-3408-80	J0290	\$12.98	\$12.72	\$12.85	\$11.98	\$12.72
Inpatient/Outpatient	AMPICILLIN SODIUM 2 G IJ SOLR	67457-352-02	J0290	\$11.00	\$10.78	\$10.89	\$10.15	\$10.78
Inpatient/Outpatient	AMPICILLIN SODIUM 2 G IJ SOLR	25021-137-20	J0290	\$36.45	\$35.72	\$36.09	\$33.64	\$35.72
Inpatient/Outpatient	AMPICILLIN SODIUM 500 MG IJ SOLR	0781-3407-95	J0290	\$4.08	\$4.00	\$4.04	\$3.77	\$4.00
Inpatient/Outpatient	AMPICILLIN SODIUM 500 MG IJ SOLR	63323-388-10	J0290	\$11.96	\$11.72	\$11.84	\$11.04	\$11.72
Inpatient/Outpatient	AMPICILLIN SODIUM 500 MG IJ SOLR	25021-135-10	J0290	\$6.79	\$6.65	\$6.72	\$6.27	\$6.65
Inpatient/Outpatient	AMPICILLIN SODIUM 500 MG IJ SOLR	0781-3407-78	J0290	\$4.15	\$4.07	\$4.11	\$3.83	\$4.07
Inpatient/Outpatient	AMPICILLIN SODIUM 500 MG IJ SOLR	0781-9250-95	J0290	\$4.08	\$4.00	\$4.04	\$3.77	\$4.00
Inpatient/Outpatient	AMPICILLIN SODIUM 500 MG IJ SOLR	0781-9250-78	J0290	\$3.57	\$3.50	\$3.53	\$3.30	\$3.50
Inpatient/Outpatient	AQUAPHOR EX OINT	72140-03147	A9270	\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	AQUAPHOR EX OINT	72140-45231	A9270	\$0.38	\$0.37	\$0.38	\$0.35	\$0.37
Inpatient/Outpatient	AQUAPHOR EX OINT	72140-63608	A9270	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	KETAMINE HCL 10 MG/ML IN NS IV SOSY (PEDS)	99999-9508-5		\$0.99	\$0.97	\$0.98	\$0.91	\$0.97
Inpatient/Outpatient	ASPIRIN 81 MG PO CHEW	63739-434-03	A9150	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	ASPIRIN 81 MG PO CHEW	63739-434-01	A9150	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	ASPIRIN 81 MG PO CHEW	0280-2160-36	A9150	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	ASPIRIN 81 MG PO CHEW	66553-002-01	A9150	\$0.36	\$0.35	\$0.36	\$0.33	\$0.35
Inpatient/Outpatient	ASPIRIN 81 MG PO CHEW	0904-6288-89	A9150	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	ASPIRIN 81 MG PO CHEW	0904-6794-89	A9150	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	ASPIRIN 81 MG PO CHEW	0536-1008-36	A9150	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	ASPIRIN 325 MG PO TABS	0603-0031-21	A9150	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	ASPIRIN 325 MG PO TABS	49348-001-23	A9150	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	ASPIRIN 325 MG PO TABS	0904-2009-40	A9150	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	ASPIRIN 325 MG PO TABS	66553-001-01	A9150	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	ASPIRIN 300 MG RE SUPP	0574-7034-12	A9150	\$5.00	\$4.90	\$4.95	\$4.62	\$4.90
Inpatient/Outpatient	ASPIRIN 600 MG RE SUPP	0574-7036-12	A9150	\$5.44	\$5.33	\$5.39	\$5.02	\$5.33
Inpatient/Outpatient	ATROPINE SULFATE 1 MG/10ML IJ SOSY	0409-4911-34	J0461	\$5.42	\$5.31	\$5.37	\$5.00	\$5.31
Inpatient/Outpatient	ATROPINE SULFATE 1 MG/10ML IJ SOSY	0409-4911-11	J0461	\$3.97	\$3.89	\$3.93	\$3.66	\$3.89
Inpatient/Outpatient	ATROPINE SULFATE 1 MG/10ML IJ SOSY	76329-3339-1	J0461	\$3.91	\$3.83	\$3.87	\$3.61	\$3.83
Inpatient/Outpatient	ATROPINE SULFATE 1 MG/10ML IJ SOSY	76329-3340-1	J0461	\$3.92	\$3.84	\$3.88	\$3.62	\$3.84
Inpatient/Outpatient	ATROPINE SULFATE 1 MG/ML IJ SOLN (WRAP)	0517-1010-25	J0461	\$33.84	\$33.16	\$33.50	\$31.23	\$33.16
Inpatient/Outpatient	ATROPINE SULFATE 1 MG/ML IJ SOLN (WRAP)	0517-1001-01	J0461	\$33.84	\$33.16	\$33.50	\$31.23	\$33.16
Inpatient/Outpatient	ATROPINE SULFATE 1 % OP OINT	24208-825-55	A9270	\$23.77	\$23.29	\$23.53	\$21.94	\$23.29
Inpatient/Outpatient	ATROPINE SULFATE 1 % OP SOLN	24208-750-60	A9270	\$7.43	\$7.28	\$7.36	\$6.86	\$7.28
Inpatient/Outpatient	ATROPINE SULFATE 1 % OP SOLN	17478-215-15	A9270	\$34.75	\$34.06	\$34.40	\$32.07	\$34.06
Inpatient/Outpatient	ATROPINE SULFATE 1 % OP SOLN	17478-215-02	A9270	\$84.10	\$82.42	\$83.26	\$77.62	\$82.42
Inpatient/Outpatient	ATROPINE SULFATE 1 % OP SOLN	0065-0303-55	A9270	\$43.73	\$42.86	\$43.29	\$40.36	\$42.86
Inpatient/Outpatient	ATROPINE SULFATE 1 % OP SOLN	17478-215-05	A9270	\$33.60	\$32.93	\$33.26	\$31.01	\$32.93
Inpatient/Outpatient	ATROPINE SULFATE 1 % OP SOLN	60505-6226-1	A9270	\$30.00	\$29.40	\$29.70	\$27.69	\$29.40
Inpatient/Outpatient	BSS PLUS IO SOLN	0065-0800-50		\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	BACITRA-NEOMYCIN-POLYMYXIN-HC 1 % OP OINT	24208-785-55	A9270	\$21.97	\$21.53	\$21.75	\$20.28	\$21.53
Inpatient/Outpatient	BACITRACIN 50000 UNITS IM SOLR	39822-0277-2		\$29.51	\$28.92	\$29.21	\$27.24	\$28.92
Inpatient/Outpatient	BACITRACIN 50000 UNITS IM SOLR	39822-0277-5		\$30.38	\$29.77	\$30.08	\$28.04	\$29.77
Inpatient/Outpatient	BACITRACIN 50000 UNITS IM SOLR	63323-329-30		\$20.80	\$20.38	\$20.59	\$19.20	\$20.38
Inpatient/Outpatient	BACITRACIN 50000 UNITS IM SOLR	39822-0278-5		\$20.21	\$19.81	\$20.01	\$18.65	\$19.81
Inpatient/Outpatient	BACITRACIN 50000 UNITS IM SOLR	63323-329-31		\$40.66	\$39.85	\$40.25	\$37.53	\$39.85

Inpatient/Outpatient	BACITRACIN 50000 UNITS IM SOLR	70594-026-01	\$45.15	\$44.25	\$44.70	\$41.67	\$44.25
Inpatient/Outpatient	BACITRACIN 50000 UNITS IM SOLR	0009-0233-03	\$53.90	\$52.82	\$53.36	\$49.75	\$52.82
Inpatient/Outpatient	BACITRACIN 50000 UNITS IM SOLR	0009-0233-01	\$54.19	\$53.11	\$53.65	\$50.02	\$53.11
Inpatient/Outpatient	BACITRACIN 50000 UNITS IM SOLR	0009-0241-01	\$1.01	\$0.99	\$1.00	\$0.93	\$0.99
Inpatient/Outpatient	BACITRACIN 50000 UNITS IM SOLR	70594-026-03	\$153.09	\$150.03	\$151.56	\$141.30	\$150.03
Inpatient/Outpatient	BACITRACIN 50000 UNITS IM SOLR	70594-026-02	\$45.23	\$44.33	\$44.78	\$41.75	\$44.33
Inpatient/Outpatient	BACITRACIN 500 UNIT/GM OP OINT	0574-4022-35 A9270	\$128.15	\$125.59	\$126.87	\$118.28	\$125.59
Inpatient/Outpatient	AMIODARONE INFUSION 6 HOUR - 1.8 MG/ML IN D5W 200 ML PREMIX	99999-360-20 J0282	\$0.56	\$0.55	\$0.55	\$0.52	\$0.55
Inpatient/Outpatient	BACLOFEN 10 MG PO TABS	0603-2406-21 A9270	\$0.41	\$0.40	\$0.41	\$0.38	\$0.40
Inpatient/Outpatient	BACLOFEN 10 MG PO TABS	0172-4096-60 A9270	\$0.96	\$0.94	\$0.95	\$0.89	\$0.94
Inpatient/Outpatient	BACLOFEN 10 MG PO TABS	0904-6475-61 A9270	\$1.51	\$1.48	\$1.49	\$1.39	\$1.48
Inpatient/Outpatient	BACLOFEN 10 MG PO TABS	16714-071-04 A9270	\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	BACLOFEN 10 MG PO TABS	63739-479-10 A9270	\$1.22	\$1.20	\$1.21	\$1.13	\$1.20
Inpatient/Outpatient	BACLOFEN 10 MG PO TABS	68084-855-11 A9270	\$1.58	\$1.55	\$1.56	\$1.46	\$1.55
Inpatient/Outpatient	BENZONATATE 100 MG PO CAPS	69452-143-20 A9270	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	BENZONATATE 100 MG PO CAPS	63739-029-10 A9270	\$2.08	\$2.04	\$2.06	\$1.92	\$2.04
Inpatient/Outpatient	BENZONATATE 100 MG PO CAPS	60687-346-11 A9270	\$2.26	\$2.21	\$2.24	\$2.09	\$2.21
Inpatient/Outpatient	BENZONATATE 100 MG PO CAPS	65162-536-10 A9270	\$1.29	\$1.26	\$1.28	\$1.19	\$1.26
Inpatient/Outpatient	BENZONATATE 100 MG PO CAPS	42806-714-01 A9270	\$0.42	\$0.41	\$0.42	\$0.39	\$0.41
Inpatient/Outpatient	BENZONATATE 100 MG PO CAPS	0904-6564-61 A9270	\$1.37	\$1.34	\$1.36	\$1.26	\$1.34
Inpatient/Outpatient	BENZONATATE 100 MG PO CAPS	42806-714-05 A9270	\$0.34	\$0.33	\$0.34	\$0.31	\$0.33
Inpatient/Outpatient	BENZONATATE 100 MG PO CAPS	64380-712-07 A9270	\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	BENZTROPINE MESYLATE 1 MG PO TABS	0603-2438-21 A9270	\$0.36	\$0.35	\$0.36	\$0.33	\$0.35
Inpatient/Outpatient	BENZTROPINE MESYLATE 1 MG PO TABS	60687-368-11 A9270	\$1.77	\$1.73	\$1.75	\$1.63	\$1.73
Inpatient/Outpatient	BENZTROPINE MESYLATE 1 MG PO TABS	69315-137-01 A9270	\$0.34	\$0.33	\$0.34	\$0.31	\$0.33
Inpatient/Outpatient	BETAMETHASONE VALERATE 0.1 % EX CREA	0168-0040-15 A9270	\$3.96	\$3.88	\$3.92	\$3.66	\$3.88
Inpatient/Outpatient	BETAMETHASONE VALERATE 0.1 % EX CREA	51672-1269-1 A9270	\$4.64	\$4.55	\$4.59	\$4.28	\$4.55
Inpatient/Outpatient	BETAMETHASONE VALERATE 0.1 % EX CREA	0713-0326-15 A9270	\$3.75	\$3.68	\$3.71	\$3.46	\$3.68
Inpatient/Outpatient	BETAMETHASONE VALERATE 0.1 % EX LOTN	0168-0041-60 A9270	\$2.77	\$2.71	\$2.74	\$2.56	\$2.71
Inpatient/Outpatient	BETAMETHASONE VALERATE 0.1 % EX LOTN	54879-004-60 A9270	\$3.37	\$3.30	\$3.34	\$3.11	\$3.30
Inpatient/Outpatient	BETAMETHASONE VALERATE 0.1 % EX OINT	0168-0033-15 A9270	\$2.68	\$2.63	\$2.65	\$2.47	\$2.63
Inpatient/Outpatient	BETHANECHOL CHLORIDE 10 MG PO TABS	0832-0511-00 A9270	\$1.42	\$1.39	\$1.41	\$1.31	\$1.39
Inpatient/Outpatient	BETHANECHOL CHLORIDE 10 MG PO TABS	0832-0511-01 A9270	\$1.38	\$1.35	\$1.37	\$1.27	\$1.35
Inpatient/Outpatient	BETHANECHOL CHLORIDE 10 MG PO TABS	0832-0511-89 A9270	\$2.78	\$2.72	\$2.75	\$2.57	\$2.72
Inpatient/Outpatient	BETHANECHOL CHLORIDE 25 MG PO TABS	65162-573-10 A9270	\$1.95	\$1.91	\$1.93	\$1.80	\$1.91
Inpatient/Outpatient	BETHANECHOL CHLORIDE 25 MG PO TABS	50268-114-15 A9270	\$1.35	\$1.32	\$1.34	\$1.25	\$1.32
Inpatient/Outpatient	BETHANECHOL CHLORIDE 25 MG PO TABS	0832-0512-89 A9270	\$2.00	\$1.96	\$1.98	\$1.85	\$1.96
Inpatient/Outpatient	BISACODYL 10 MG RE SUPP	0574-7050-50 A9150	\$1.16	\$1.14	\$1.15	\$1.07	\$1.14
Inpatient/Outpatient	BISACODYL 10 MG RE SUPP	0713-0109-50 A9150	\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	BISACODYL 10 MG RE SUPP	0904-5058-12 A9150	\$0.38	\$0.37	\$0.38	\$0.35	\$0.37
Inpatient/Outpatient	BISACODYL 10 MG RE SUPP	0574-7050-12 A9150	\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	BISACODYL 10 MG RE SUPP	0713-0109-06 A9150	\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	BISACODYL 10 MG RE SUPP	0536-1355-01 A9150	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	BISACODYL 10 MG RE SUPP	81421-02103 A9150	\$3.58	\$3.51	\$3.54	\$3.30	\$3.51
Inpatient/Outpatient	BISACODYL 10 MG RE SUPP	57896-444-05 A9150	\$0.34	\$0.33	\$0.34	\$0.31	\$0.33
Inpatient/Outpatient	BISMUTH SUBSALICYLATE 262 MG/15ML PO SUSP	01490-03904 A9150	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	BISMUTH SUBSALICYLATE 262 MG/15ML PO SUSP	99999-032-15 A9150	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	BISMUTH SUBSALICYLATE 262 MG/15ML PO SUSP	17856-1313-3 A9150	\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	BISMUTH SUBSALICYLATE 262 MG/15ML PO SUSP	01490-03908 A9150	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	POTASSIUM PHOSPHATES 45 MMOLE/15ML IV SOLN	63323-086-15	\$6.41	\$6.28	\$6.35	\$5.92	\$6.28
Inpatient/Outpatient	POTASSIUM PHOSPHATES 45 MMOLE/15ML IV SOLN	0409-7295-11	\$4.17	\$4.09	\$4.13	\$3.85	\$4.09
Inpatient/Outpatient	POTASSIUM PHOSPHATES 45 MMOLE/15ML IV SOLN	65219-054-09	\$12.06	\$11.82	\$11.94	\$11.13	\$11.82
Inpatient/Outpatient	BUPIVACAINE-EPINEPHRINE (PF) 0.5% -1:200000 IJ SOLN	0409-9045-01	\$0.95	\$0.93	\$0.94	\$0.88	\$0.93
Inpatient/Outpatient	BUPIVACAINE-EPINEPHRINE (PF) 0.5% -1:200000 IJ SOLN	0409-9045-17	\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	BUPIVACAINE-EPINEPHRINE (PF) 0.5% -1:200000 IJ SOLN	0409-1749-29	\$0.71	\$0.70	\$0.70	\$0.66	\$0.70
Inpatient/Outpatient	BUPIVACAINE-EPINEPHRINE (PF) 0.5% -1:200000 IJ SOLN	0409-1749-70	\$1.54	\$1.51	\$1.52	\$1.42	\$1.51
Inpatient/Outpatient	BUPIVACAINE-EPINEPHRINE (PF) 0.5% -1:200000 IJ SOLN	63323-462-31	\$0.93	\$0.91	\$0.92	\$0.86	\$0.91
Inpatient/Outpatient	BUPIVACAINE-EPINEPHRINE (PF) 0.5% -1:200000 IJ SOLN	0409-9045-16	\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	BUPIVACAINE-EPINEPHRINE (PF) 0.5% -1:200000 IJ SOLN	63323-462-37	\$1.03	\$1.03	\$1.02	\$0.95	\$1.01
Inpatient/Outpatient	BUPIVACAINE-EPINEPHRINE (PF) 0.5% -1:200000 IJ SOLN	63323-462-17	\$1.86	\$1.82	\$1.84	\$1.72	\$1.82
Inpatient/Outpatient	BUPIVACAINE-EPINEPHRINE (PF) 0.5% -1:200000 IJ SOLN	63323-462-04	\$2.47	\$2.42	\$2.45	\$2.28	\$2.42
Inpatient/Outpatient	BUPIVACAINE-EPINEPHRINE (PF) 0.5% -1:200000 IJ SOLN	63323-462-01	\$0.94	\$0.92	\$0.93	\$0.87	\$0.92
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.75 % IJ SOLN	0409-1165-01 J3490	\$0.72	\$0.71	\$0.71	\$0.66	\$0.71
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.75 % IJ SOLN	55150-171-10 J3490	\$0.58	\$0.57	\$0.57	\$0.54	\$0.57
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.75 % IJ SOLN	63323-472-17 J3490	\$0.58	\$0.57	\$0.57	\$0.54	\$0.57
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.75 % IJ SOLN	0409-1165-18 J3490	\$0.87	\$0.85	\$0.86	\$0.80	\$0.85
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.75 % IJ SOLN	63323-472-37 J3490	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.75 % IJ SOLN	0409-1165-19 J3490	\$0.46	\$0.45	\$0.46	\$0.42	\$0.45

Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.75 % IJ SOLN	63323-472-03	J3490	\$0.58	\$0.57	\$0.57	\$0.54	\$0.57
Inpatient/Outpatient	CAFFEINE-SODIUM BENZOATE 125-125 MG/ML IJ SOLN	0517-2502-10	A9270	\$52.37	\$51.32	\$51.85	\$48.34	\$51.32
Inpatient/Outpatient	CAFFEINE-SODIUM BENZOATE 125-125 MG/ML IJ SOLN	0517-2502-01	A9270	\$42.83	\$41.97	\$42.40	\$39.53	\$41.97
Inpatient/Outpatient	CALAMINE 8-8 % EX LOTN	0904-2533-21	A9150	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	CALCIUM 500 MG (CALCIUM CARBONATE 1250 MG) (OS-CAL) PO TAB (WRAP)	0904-1883-61	A9150	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	CALCIUM 500 MG (CALCIUM CARBONATE 1250 MG) (OS-CAL) PO TAB (WRAP)	37864-82799	A9150	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	CALCIUM 500 MG (CALCIUM CARBONATE 1250 MG) (OS-CAL) PO TAB (WRAP)	0904-1883-72	A9150	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	CARBAMAZEPINE ER 100 MG PO TB12	0078-0510-05	A9270	\$6.44	\$6.31	\$6.38	\$5.94	\$6.31
Inpatient/Outpatient	CARBAMAZEPINE ER 100 MG PO TB12	51672-4123-1	A9270	\$1.75	\$1.72	\$1.73	\$1.62	\$1.72
Inpatient/Outpatient	CARBAMAZEPINE ER 100 MG PO TB12	0781-8016-01	A9270	\$1.04	\$1.02	\$1.03	\$0.96	\$1.02
Inpatient/Outpatient	CARBAMAZEPINE ER 100 MG PO TB12	16571-680-01	A9270	\$1.14	\$1.12	\$1.13	\$1.05	\$1.12
Inpatient/Outpatient	CALCIUM CHLORIDE 10 % IV SOLN	0517-2710-25		\$3.61	\$3.54	\$3.57	\$3.33	\$3.54
Inpatient/Outpatient	CALCIUM CHLORIDE 10 % IV SOLN	0517-6710-01		\$3.65	\$3.58	\$3.61	\$3.37	\$3.58
Inpatient/Outpatient	CALCIUM CHLORIDE 10 % IV SOLN	76329-3304-1		\$3.87	\$3.79	\$3.83	\$3.57	\$3.79
Inpatient/Outpatient	CALCIUM CHLORIDE 10 % IV SOLN	0409-1631-10		\$3.71	\$3.64	\$3.67	\$3.42	\$3.64
Inpatient/Outpatient	CALCIUM CHLORIDE 10 % IV SOLN	0409-4928-34		\$4.94	\$4.84	\$4.89	\$4.56	\$4.84
Inpatient/Outpatient	CALCIUM CHLORIDE 10 % IV SOLN	0409-1631-40		\$3.07	\$3.01	\$3.04	\$2.83	\$3.01
Inpatient/Outpatient	CALCIUM CITRATE 950 (200 CA) MG PO TABS (WRAP)	0904-5062-60	A9150	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	CALCIUM CITRATE 950 (200 CA) MG PO TABS (WRAP)	80681-14000	A9150	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	CALCIUM GLUCONATE 10 % IV SOLN	63323-360-03	J0610	\$1.22	\$1.20	\$1.21	\$1.13	\$1.20
Inpatient/Outpatient	CALCIUM GLUCONATE 10 % IV SOLN	69374-950-10	J0610	\$3.65	\$3.58	\$3.61	\$3.37	\$3.58
Inpatient/Outpatient	CALCIUM GLUCONATE 10 % IV SOLN	63323-360-01	J0610	\$3.72	\$3.65	\$3.68	\$3.43	\$3.65
Inpatient/Outpatient	CAPSAICIN 0.025 % EX CREA	0536-2525-25	A9270	\$0.21	\$0.21	\$0.21	\$0.19	\$0.21
Inpatient/Outpatient	CARBAMAZEPINE 100 MG PO CHEW	51672-4041-1	A9270	\$1.22	\$1.20	\$1.21	\$1.13	\$1.20
Inpatient/Outpatient	CARBAMAZEPINE 100 MG PO CHEW	57664-342-88	A9270	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	CARBAMAZEPINE 100 MG PO CHEW	0093-0778-01	A9270	\$1.78	\$1.74	\$1.76	\$1.64	\$1.74
Inpatient/Outpatient	CARBAMAZEPINE 100 MG PO CHEW	0904-3854-61	A9270	\$1.60	\$1.57	\$1.58	\$1.48	\$1.57
Inpatient/Outpatient	CARBAMAZEPINE 100 MG PO CHEW	13668-271-01	A9270	\$1.11	\$1.09	\$1.10	\$1.02	\$1.09
Inpatient/Outpatient	CARBAMAZEPINE 100 MG PO CHEW	60687-479-11	A9270	\$1.54	\$1.51	\$1.52	\$1.42	\$1.51
Inpatient/Outpatient	CARBAMAZEPINE 100 MG/5ML PO SUSP	51672-4047-9	A9270	\$0.68	\$0.67	\$0.67	\$0.63	\$0.67
Inpatient/Outpatient	CARBAMAZEPINE 100 MG/5ML PO SUSP	60432-129-16	A9270	\$1.58	\$1.55	\$1.56	\$1.46	\$1.55
Inpatient/Outpatient	CARBAMAZEPINE 200 MG PO TABS	51672-4005-3	A9270	\$1.19	\$1.17	\$1.18	\$1.10	\$1.17
Inpatient/Outpatient	CARBAMAZEPINE 200 MG PO TABS	51672-4005-1	A9270	\$1.13	\$1.11	\$1.12	\$1.04	\$1.11
Inpatient/Outpatient	CARBAMAZEPINE 200 MG PO TABS	60505-0183-0	A9270	\$1.98	\$1.94	\$1.96	\$1.83	\$1.94
Inpatient/Outpatient	CARBAMAZEPINE 200 MG PO TABS	68084-444-11	A9270	\$2.40	\$2.35	\$2.38	\$2.22	\$2.35
Inpatient/Outpatient	CARBAMAZEPINE 200 MG PO TABS	0904-6172-61	A9270	\$2.20	\$2.16	\$2.18	\$2.03	\$2.16
Inpatient/Outpatient	CARBAMAZEPINE 200 MG PO TABS	75834-221-01	A9270	\$0.73	\$0.72	\$0.72	\$0.67	\$0.72
Inpatient/Outpatient	CARBAMIDE PEROXIDE 6.5 % OT SOLN	0904-6627-35	A9270	\$0.32	\$0.31	\$0.32	\$0.30	\$0.31
Inpatient/Outpatient	CARBAMIDE PEROXIDE 6.5 % OT SOLN	42037-10478	A9270	\$1.35	\$1.32	\$1.34	\$1.25	\$1.32
Inpatient/Outpatient	CARBAMIDE PEROXIDE 6.5 % OT SOLN	42037-10479	A9270	\$2.05	\$2.01	\$2.03	\$1.89	\$2.01
Inpatient/Outpatient	CARBAMIDE PEROXIDE 6.5 % OT SOLN	32953-52330	A9270	\$1.77	\$1.73	\$1.75	\$1.63	\$1.73
Inpatient/Outpatient	CARBAMIDE PEROXIDE 6.5 % OT SOLN	78112-73623	A9270	\$1.20	\$1.18	\$1.19	\$1.11	\$1.18
Inpatient/Outpatient	CARISOPRODOL 350 MG PO TABS	0603-2582-21	A9270	\$0.44	\$0.43	\$0.44	\$0.41	\$0.43
Inpatient/Outpatient	CARISOPRODOL 350 MG PO TABS	63739-049-10	A9270	\$0.51	\$0.50	\$0.50	\$0.47	\$0.50
Inpatient/Outpatient	CARISOPRODOL 350 MG PO TABS	68084-380-11	A9270	\$0.63	\$0.62	\$0.62	\$0.58	\$0.62
Inpatient/Outpatient	CARISOPRODOL 350 MG PO TABS	0591-5513-01	A9270	\$0.47	\$0.46	\$0.47	\$0.43	\$0.46
Inpatient/Outpatient	CARISOPRODOL 350 MG PO TABS	16714-510-01	A9270	\$0.34	\$0.33	\$0.34	\$0.31	\$0.33
Inpatient/Outpatient	CARISOPRODOL 350 MG PO TABS	58657-645-01	A9270	\$0.38	\$0.37	\$0.38	\$0.35	\$0.37
Inpatient/Outpatient	CARISOPRODOL 350 MG PO TABS	61442-451-01	A9270	\$0.39	\$0.38	\$0.39	\$0.36	\$0.38
Inpatient/Outpatient	CARISOPRODOL 350 MG PO TABS	69584-111-10	A9270	\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	CEFAZOLIN SODIUM 1 G IJ SOLR	0781-3451-96	J0690	\$4.74	\$4.65	\$4.69	\$4.38	\$4.65
Inpatient/Outpatient	CEFAZOLIN SODIUM 1 G IJ SOLR	25021-101-10	J0690	\$7.78	\$7.62	\$7.70	\$7.18	\$7.62
Inpatient/Outpatient	CEFAZOLIN SODIUM 1 G IJ SOLR	60505-0749-5	J0690	\$4.08	\$4.00	\$4.04	\$3.77	\$4.00
Inpatient/Outpatient	CEFAZOLIN SODIUM 1 G IJ SOLR	0409-0805-01	J0690	\$4.98	\$4.88	\$4.93	\$4.60	\$4.88
Inpatient/Outpatient	CEFAZOLIN SODIUM 1 G IJ SOLR	60505-6093-5	J0690	\$5.38	\$5.27	\$5.33	\$4.97	\$5.27
Inpatient/Outpatient	CEFAZOLIN SODIUM 1 G IJ SOLR	60505-0749-1	J0690	\$9.17	\$8.99	\$9.08	\$8.46	\$8.99
Inpatient/Outpatient	CEFAZOLIN SODIUM 1 G IJ SOLR	0143-9262-01	J0690	\$4.57	\$4.48	\$4.52	\$4.22	\$4.48
Inpatient/Outpatient	CEFAZOLIN SODIUM 1 G IJ SOLR	0409-0805-11	J0690	\$4.83	\$4.73	\$4.78	\$4.46	\$4.73
Inpatient/Outpatient	CEFAZOLIN SODIUM 1 G IJ SOLR	44567-707-25	J0690	\$7.46	\$7.31	\$7.39	\$6.89	\$7.31
Inpatient/Outpatient	CEFAZOLIN SODIUM 1 G IJ SOLR	0143-9924-90	J0690	\$5.57	\$5.46	\$5.51	\$5.14	\$5.46
Inpatient/Outpatient	CEFAZOLIN SODIUM 1 G IJ SOLR	60505-6142-0	J0690	\$3.79	\$3.71	\$3.75	\$3.50	\$3.71
Inpatient/Outpatient	CEFAZOLIN SODIUM 1 G IJ SOLR	0781-3451-70	J0690	\$4.76	\$4.66	\$4.71	\$4.39	\$4.66
Inpatient/Outpatient	CEFAZOLIN SODIUM 1 G IJ SOLR	25021-101-67	J0690	\$3.68	\$3.61	\$3.64	\$3.40	\$3.61
Inpatient/Outpatient	CEFAZOLIN SODIUM 10 G IJ SOLR	0781-3452-95	J0690	\$54.27	\$53.18	\$53.73	\$50.09	\$53.18
Inpatient/Outpatient	CEFAZOLIN SODIUM 10 G IJ SOLR	0781-3452-46	J0690	\$6.03	\$5.91	\$5.97	\$5.57	\$5.91
Inpatient/Outpatient	CEFAZOLIN SODIUM 10 G IJ SOLR	25021-102-69	J0690	\$22.67	\$22.22	\$22.44	\$20.92	\$22.22
Inpatient/Outpatient	CEFAZOLIN SODIUM 10 G IJ SOLR	25021-102-99	J0690	\$58.32	\$57.15	\$57.74	\$53.83	\$57.15
Inpatient/Outpatient	CEFAZOLIN SODIUM 10 G IJ SOLR	0409-0806-01	J0690	\$24.97	\$24.47	\$24.72	\$23.05	\$24.47

Inpatient/Outpatient	CEFAZOLIN SODIUM 10 G IJ SOLR	0409-0806-11	J0690	\$27.09	\$26.55	\$26.82	\$25.00	\$26.55
Inpatient/Outpatient	CEFAZOLIN SODIUM 10 G IJ SOLR	60505-0769-1	J0690	\$49.24	\$48.26	\$48.75	\$45.45	\$48.26
Inpatient/Outpatient	CEFAZOLIN SODIUM 10 G IJ SOLR	63323-238-61	J0690	\$51.77	\$50.73	\$51.25	\$47.78	\$50.73
Inpatient/Outpatient	CEFAZOLIN SODIUM 10 G IJ SOLR	0143-9261-01	J0690	\$53.70	\$52.63	\$53.16	\$49.57	\$52.63
Inpatient/Outpatient	CEFAZOLIN SODIUM 10 G IJ SOLR	60505-6143-0	J0690	\$54.48	\$53.39	\$53.94	\$50.29	\$53.39
Inpatient/Outpatient	CEFAZOLIN SODIUM 10 G IJ SOLR	0143-9983-91	J0690	\$45.01	\$44.11	\$44.56	\$41.54	\$44.11
Inpatient/Outpatient	CEFUROXIME SODIUM 1.5 G IV SOLR	0143-9977-90	J0697	\$26.44	\$25.91	\$26.18	\$24.40	\$25.91
Inpatient/Outpatient	CEFUROXIME SODIUM 1.5 G IV SOLR	25021-119-20	J0697	\$16.60	\$16.27	\$16.43	\$15.32	\$16.27
Inpatient/Outpatient	CEFUROXIME SODIUM 750 MG IJ SOLR	0143-9979-22	J0697	\$11.91	\$11.67	\$11.79	\$10.99	\$11.67
Inpatient/Outpatient	CHERRY PO SYRP	0395-2662-16	A9150	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	OXIDIZED CELLULOSE (SURGICEL) 0.5X2 INCH {#1955}	63713-01955		\$187.66	\$183.91	\$185.78	\$173.21	\$183.91
Inpatient/Outpatient	CAFFEINE CITRATE 60 MG/3ML PO SOLN (NICU/INFANT)	51754-0501-3	J0706	\$8.29	\$8.12	\$8.21	\$7.65	\$8.12
Inpatient/Outpatient	CAFFEINE CITRATE 60 MG/3ML PO SOLN (NICU/INFANT)	47335-290-40	J0706	\$8.29	\$8.12	\$8.21	\$7.65	\$8.12
Inpatient/Outpatient	CHLOROPROCAINE HCL (PF) 3 % IJ SOLN	63323-478-27	J2400	\$4.55	\$4.46	\$4.50	\$4.20	\$4.46
Inpatient/Outpatient	CHLOROPROCAINE HCL (PF) 3 % IJ SOLN	0143-9210-01	J2400	\$3.03	\$2.97	\$3.00	\$2.80	\$2.97
Inpatient/Outpatient	CHLOROPROCAINE HCL (PF) 3 % IJ SOLN	63323-478-01	J2400	\$4.55	\$4.46	\$4.50	\$4.20	\$4.46
Inpatient/Outpatient	CHLORPHENIRAMINE MALEATE 4 MG PO TABS	0904-0012-59	A9150	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	CHLORPROMAZINE HCL 25 MG/ML IJ SOLN (WRAP)	0641-1397-31	J3230	\$30.72	\$30.11	\$30.41	\$28.35	\$30.11
Inpatient/Outpatient	CHLORPROMAZINE HCL 25 MG/ML IJ SOLN (WRAP)	0641-1397-35	J3230	\$117.60	\$115.25	\$116.42	\$108.54	\$115.25
Inpatient/Outpatient	CHLORPROMAZINE HCL 25 MG/ML IJ SOLN (WRAP)	55150-318-01	J3230	\$114.44	\$109.21	\$110.33	\$102.86	\$109.21
Inpatient/Outpatient	CHLORPROMAZINE HCL 10 MG PO TABS	0832-0300-00	Q0161	\$2.88	\$2.82	\$2.85	\$2.66	\$2.82
Inpatient/Outpatient	CHLORPROMAZINE HCL 10 MG PO TABS	51079-518-01	Q0161	\$1.71	\$1.68	\$1.69	\$1.58	\$1.68
Inpatient/Outpatient	CHLORPROMAZINE HCL 10 MG PO TABS	51079-518-20	Q0161	\$13.13	\$12.87	\$13.00	\$12.12	\$12.87
Inpatient/Outpatient	CHLORPROMAZINE HCL 10 MG PO TABS	69238-1054-1	Q0161	\$2.70	\$2.65	\$2.67	\$2.49	\$2.65
Inpatient/Outpatient	CHLORPROMAZINE HCL 10 MG PO TABS	16714-047-01	Q0161	\$2.40	\$2.35	\$2.38	\$2.22	\$2.35
Inpatient/Outpatient	CHLORPROMAZINE HCL 10 MG PO TABS	60687-419-11	Q0161	\$10.94	\$10.72	\$10.83	\$10.10	\$10.72
Inpatient/Outpatient	CHLORPROMAZINE HCL 100 MG PO TABS	0832-0303-00	Q0161	\$11.70	\$11.47	\$11.58	\$10.80	\$11.47
Inpatient/Outpatient	CHLORPROMAZINE HCL 100 MG PO TABS	51079-516-01	Q0161	\$1.97	\$1.93	\$1.95	\$1.82	\$1.93
Inpatient/Outpatient	CHLORPROMAZINE HCL 100 MG PO TABS	51079-516-20	Q0161	\$33.49	\$32.82	\$33.16	\$30.91	\$32.82
Inpatient/Outpatient	CHLORPROMAZINE HCL 100 MG PO TABS	69238-1060-1	Q0161	\$10.23	\$10.03	\$10.13	\$9.44	\$10.03
Inpatient/Outpatient	CHLORPROMAZINE HCL 100 MG PO TABS	16714-050-01	Q0161	\$9.30	\$9.11	\$9.21	\$8.58	\$9.11
Inpatient/Outpatient	CHLORPROMAZINE HCL 25 MG PO TABS	51079-519-01	Q0161	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	CHLORPROMAZINE HCL 25 MG PO TABS	51079-519-20	Q0161	\$19.63	\$19.24	\$19.43	\$18.12	\$19.24
Inpatient/Outpatient	CHLORPROMAZINE HCL 25 MG PO TABS	0832-0301-89	Q0161	\$16.80	\$16.46	\$16.63	\$15.51	\$16.46
Inpatient/Outpatient	CHLORPROMAZINE HCL 25 MG PO TABS	69238-1056-1	Q0161	\$3.85	\$3.77	\$3.81	\$3.55	\$3.77
Inpatient/Outpatient	CHLORPROMAZINE HCL 25 MG PO TABS	50268-163-11	Q0161	\$9.33	\$9.14	\$9.24	\$8.61	\$9.14
Inpatient/Outpatient	CHLORPROMAZINE HCL 25 MG PO TABS	51079-058-01	A9270	\$0.88	\$0.86	\$0.87	\$0.81	\$0.86
Inpatient/Outpatient	CHLORPROMAZINE HCL 25 MG PO TABS	51079-058-20	A9270	\$6.92	\$6.78	\$6.85	\$6.39	\$6.78
Inpatient/Outpatient	CHLORPROMAZINE HCL 25 MG PO TABS	16714-800-01	A9270	\$1.99	\$1.95	\$1.97	\$1.84	\$1.95
Inpatient/Outpatient	CHLORPROMAZINE HCL 25 MG PO TABS	50268-167-11	A9270	\$4.68	\$4.59	\$4.63	\$4.32	\$4.59
Inpatient/Outpatient	CHROMIUM 200 MCG PO TABS	0904-4314-60	A9270	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	CLOPIDOGREL BISULFATE 300 MG PO TABS	63653-1332-2	A9270	\$114.70	\$114.70	\$115.87	\$108.03	\$114.70
Inpatient/Outpatient	CLOPIDOGREL BISULFATE 300 MG PO TABS	55111-671-06	A9270	\$88.13	\$86.37	\$87.25	\$81.34	\$86.37
Inpatient/Outpatient	CLOPIDOGREL BISULFATE 300 MG PO TABS	0904-6467-07	A9270	\$35.67	\$34.96	\$35.31	\$32.92	\$34.96
Inpatient/Outpatient	CLINDAMYCIN HCL 150 MG PO CAPS	51079-598-01	A9270	\$5.59	\$5.48	\$5.53	\$5.16	\$5.48
Inpatient/Outpatient	CLINDAMYCIN HCL 150 MG PO CAPS	51079-598-20	A9270	\$1.52	\$1.49	\$1.50	\$1.40	\$1.49
Inpatient/Outpatient	CLINDAMYCIN HCL 150 MG PO CAPS	63739-059-10	A9270	\$0.76	\$0.74	\$0.75	\$0.70	\$0.74
Inpatient/Outpatient	CLINDAMYCIN HCL 150 MG PO CAPS	0904-5959-61	A9270	\$0.62	\$0.61	\$0.61	\$0.57	\$0.61
Inpatient/Outpatient	CLINDAMYCIN HCL 150 MG PO CAPS	68084-243-11	A9270	\$1.07	\$1.05	\$1.06	\$0.99	\$1.05
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE 300 MG/2ML IJ SOLN	0409-4050-01		\$5.98	\$5.86	\$5.92	\$5.52	\$5.86
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE 300 MG/2ML IJ SOLN	63323-282-02		\$6.99	\$6.85	\$6.92	\$6.45	\$6.85
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE 300 MG/2ML IJ SOLN	67457-814-00		\$2.66	\$2.61	\$2.63	\$2.46	\$2.61
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE 300 MG/2ML IJ SOLN	0009-0870-21		\$3.84	\$3.76	\$3.80	\$3.54	\$3.76
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE 300 MG/2ML IJ SOLN	0009-0302-02		\$3.84	\$3.76	\$3.80	\$3.54	\$3.76
Inpatient/Outpatient	CLOMIPRAMINE HCL 50 MG PO CAPS	0378-3050-01	A9270	\$43.05	\$42.19	\$42.62	\$39.74	\$42.19
Inpatient/Outpatient	CLOMIPRAMINE HCL 50 MG PO CAPS	16714-850-02	A9270	\$11.53	\$11.30	\$11.41	\$10.64	\$11.30
Inpatient/Outpatient	CLOMIPRAMINE HCL 50 MG PO CAPS	16714-850-03	A9270	\$2.16	\$2.12	\$2.14	\$1.99	\$2.12
Inpatient/Outpatient	CLOMIPRAMINE HCL 50 MG PO CAPS	70756-406-11	A9270	\$2.04	\$2.00	\$2.02	\$1.88	\$2.00
Inpatient/Outpatient	CLONIDINE HCL 0.1 MG PO TABS	51079-299-20	A9270	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	CLONIDINE HCL 0.1 MG PO TABS	0904-5656-61	A9270	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	CLONIDINE HCL 0.1 MG PO TABS	51079-299-01	A9270	\$0.21	\$0.21	\$0.21	\$0.19	\$0.21
Inpatient/Outpatient	CLONIDINE HCL 0.1 MG PO TABS	62584-657-11	A9270	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	CLONIDINE HCL 0.1 MG PO TABS	63739-060-10	A9270	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	CLONIDINE HCL 0.1 MG PO TABS	29300-135-01	A9270	\$0.24	\$0.24	\$0.24	\$0.22	\$0.24
Inpatient/Outpatient	CLONIDINE HCL 0.1 MG PO TABS	29300-135-05	A9270	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	CLONIDINE HCL 0.1 MG PO TABS	0228-2127-10	A9270	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	CLONIDINE HCL 0.1 MG PO TABS	10135-708-01	A9270	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	CLONIDINE HCL 0.2 MG PO TABS	51079-300-20	A9270	\$0.25	\$0.25	\$0.25	\$0.23	\$0.25

Inpatient/Outpatient	CLONIDINE HCL 0.2 MG PO TABS	0904-5657-61	A9270	\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	CLONIDINE HCL 0.2 MG PO TABS	62584-339-11	A9270	\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	CLONIDINE HCL 0.2 MG PO TABS	51079-300-01	A9270	\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	CLONIDINE HCL 0.2 MG PO TABS	29300-136-01	A9270	\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	CLONIDINE HCL 0.2 MG PO TABS	62332-055-31	A9270	\$0.22	\$0.22	\$0.22	\$0.20	\$0.22
Inpatient/Outpatient	CLONIDINE HCL 0.2 MG PO TABS	10135-709-01	A9270	\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	CLONIDINE HCL 0.3 MG PO TABS	51079-301-01	A9270	\$2.32	\$2.27	\$2.30	\$2.14	\$2.27
Inpatient/Outpatient	CLONIDINE HCL 0.3 MG PO TABS	51079-301-20	A9270	\$0.62	\$0.61	\$0.61	\$0.57	\$0.61
Inpatient/Outpatient	CLONIDINE HCL 0.3 MG PO TABS	0904-5658-61	A9270	\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	CLONIDINE HCL 0.3 MG PO TABS	62584-659-11	A9270	\$0.44	\$0.43	\$0.44	\$0.41	\$0.43
Inpatient/Outpatient	CLONIDINE HCL 0.3 MG PO TABS	29300-137-01	A9270	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	CLOTTRIMAZOLE 1 % EX CREA	0904-7822-31	A9270	\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	CLOTTRIMAZOLE 1 % EX CREA	0904-7822-36	A9270	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	CLOTTRIMAZOLE 1 % EX CREA	51672-2002-2	A9270	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	CLOTTRIMAZOLE 1 % EX CREA	0168-0133-15	A9270	\$5.37	\$5.26	\$5.32	\$4.96	\$5.26
Inpatient/Outpatient	CLOTTRIMAZOLE 1 % EX CREA	68462-181-35	A9270	\$1.81	\$1.77	\$1.79	\$1.67	\$1.77
Inpatient/Outpatient	CLOTTRIMAZOLE 1 % EX CREA	0536-1272-22	A9270	\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	CLOTTRIMAZOLE 1 % VA CREA	0472-0220-41	A9150	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	CLOTTRIMAZOLE 1 % VA CREA	0472-0220-63	A9150	\$0.40	\$0.39	\$0.40	\$0.37	\$0.39
Inpatient/Outpatient	CLOTTRIMAZOLE 1 % VA CREA	51672-2003-6	A9150	\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	CODEINE SULFATE 15 MG PO TABS	0054-0243-24	A9270	\$3.21	\$3.15	\$3.18	\$2.96	\$3.15
Inpatient/Outpatient	CODEINE SULFATE 30 MG PO TABS	0054-0244-24	A9270	\$1.99	\$1.95	\$1.97	\$1.84	\$1.95
Inpatient/Outpatient	CODEINE SULFATE 30 MG PO TABS	0054-0244-25	A9270	\$3.06	\$3.00	\$3.03	\$2.82	\$3.00
Inpatient/Outpatient	COLCHICINE 0.6 MG PO TABS	64764-119-01	A9270	\$32.52	\$31.87	\$32.19	\$30.02	\$31.87
Inpatient/Outpatient	COLCHICINE 0.6 MG PO TABS	66993-165-02	A9270	\$25.35	\$24.84	\$25.10	\$23.40	\$24.84
Inpatient/Outpatient	COLCHICINE 0.6 MG PO TABS	0254-2008-01	A9270	\$25.61	\$25.10	\$25.35	\$23.64	\$25.10
Inpatient/Outpatient	COLCHICINE 0.6 MG PO TABS	65162-710-09	A9270	\$3.51	\$3.44	\$3.47	\$3.24	\$3.44
Inpatient/Outpatient	COLCHICINE 0.6 MG PO TABS	42292-054-01	A9270	\$15.66	\$15.35	\$15.50	\$14.45	\$15.35
Inpatient/Outpatient	CORTISONE ACETATE 25 MG PO TABS	0143-9700-01	A9270	\$10.97	\$10.75	\$10.86	\$10.13	\$10.75
Inpatient/Outpatient	SODIUM CHLORIDE 2 MEQ/ML ORAL SOLUTION	99999-020-10	A9270	\$0.38	\$0.37	\$0.38	\$0.35	\$0.37
Inpatient/Outpatient	SODIUM CHLORIDE 2 MEQ/ML ORAL SOLUTION	99999-020-05	A9270	\$0.38	\$0.37	\$0.38	\$0.35	\$0.37
Inpatient/Outpatient	SODIUM CHLORIDE 2 MEQ/ML ORAL SOLUTION	99999-020-00	A9270	\$0.38	\$0.37	\$0.38	\$0.35	\$0.37
Inpatient/Outpatient	CYANOCOBALAMIN 1000 MCG/ML IJ SOLN	0517-0031-25	J3420	\$11.04	\$10.82	\$10.93	\$10.19	\$10.82
Inpatient/Outpatient	CYANOCOBALAMIN 1000 MCG/ML IJ SOLN	70069-005-01	J3420	\$33.03	\$32.37	\$32.70	\$30.49	\$32.37
Inpatient/Outpatient	CYANOCOBALAMIN 1000 MCG/ML IJ SOLN	63323-044-01	J3420	\$9.77	\$9.57	\$9.67	\$9.02	\$9.57
Inpatient/Outpatient	CYANOCOBALAMIN 1000 MCG/ML IJ SOLN	63323-044-00	J3420	\$10.44	\$10.23	\$10.34	\$9.64	\$10.23
Inpatient/Outpatient	CYANOCOBALAMIN 1000 MCG/ML IJ SOLN	0517-0031-01	J3420	\$10.35	\$10.14	\$10.25	\$9.55	\$10.14
Inpatient/Outpatient	CYANOCOBALAMIN 1000 MCG/ML IJ SOLN	63323-044-41	J3420	\$9.77	\$9.57	\$9.67	\$9.02	\$9.57
Inpatient/Outpatient	CYCLOBENZAPRINE HCL 10 MG PO TABS	0591-5658-10	A9270	\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	CYCLOBENZAPRINE HCL 10 MG PO TABS	51079-644-01	A9270	\$4.71	\$4.62	\$4.66	\$4.35	\$4.62
Inpatient/Outpatient	CYCLOBENZAPRINE HCL 10 MG PO TABS	51079-644-20	A9270	\$0.21	\$0.21	\$0.21	\$0.19	\$0.21
Inpatient/Outpatient	CYCLOBENZAPRINE HCL 10 MG PO TABS	0904-7809-61	A9270	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	CYCLOBENZAPRINE HCL 10 MG PO TABS	63739-531-10	A9270	\$0.20	\$0.20	\$0.20	\$0.18	\$0.20
Inpatient/Outpatient	CYCLOBENZAPRINE HCL 10 MG PO TABS	0591-5658-01	A9270	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	CYCLOBENZAPRINE HCL 10 MG PO TABS	52817-332-50	A9270	\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	CYCLOBENZAPRINE HCL 10 MG PO TABS	43547-400-10	A9270	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	CYCLOBENZAPRINE HCL 10 MG PO TABS	0093-3422-01	A9270	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	CYCLOPENTOLATE HCL 1 % OP SOLN	24208-735-01	A9270	\$29.40	\$28.81	\$29.11	\$27.14	\$28.81
Inpatient/Outpatient	CYCLOPENTOLATE HCL 1 % OP SOLN	61314-396-01	A9270	\$28.84	\$28.26	\$28.55	\$26.62	\$28.26
Inpatient/Outpatient	POTASSIUM CHLORIDE 2 MEQ/ML ORAL SOLN (NICU)	99999-021-05	A9270	\$0.76	\$0.74	\$0.75	\$0.70	\$0.74
Inpatient/Outpatient	POTASSIUM CHLORIDE 2 MEQ/ML ORAL SOLN (NICU)	99999-021-10	A9270	\$0.76	\$0.74	\$0.75	\$0.70	\$0.74
Inpatient/Outpatient	POTASSIUM CHLORIDE 2 MEQ/ML ORAL SOLN (NICU)	99999-021-00	A9270	\$0.76	\$0.74	\$0.75	\$0.70	\$0.74
Inpatient/Outpatient	DAPSONE 25 MG PO TABS	49938-102-30	A9270	\$10.32	\$10.11	\$10.22	\$9.53	\$10.11
Inpatient/Outpatient	DAPSONE 25 MG PO TABS	47781-333-31	A9270	\$6.47	\$6.34	\$6.41	\$5.97	\$6.34
Inpatient/Outpatient	DAPSONE 25 MG PO TABS	70954-135-10	A9270	\$3.72	\$3.65	\$3.68	\$3.43	\$3.65
Inpatient/Outpatient	DAPSONE 25 MG PO TABS	13925-504-30	A9270	\$3.72	\$3.65	\$3.68	\$3.43	\$3.65
Inpatient/Outpatient	DESIPRAMINE HCL 10 MG PO TABS	0781-1971-01	A9270	\$2.94	\$2.88	\$2.91	\$2.71	\$2.88
Inpatient/Outpatient	DESIPRAMINE HCL 10 MG PO TABS	23155-578-01	A9270	\$4.28	\$4.19	\$4.24	\$3.95	\$4.19
Inpatient/Outpatient	DESIPRAMINE HCL 10 MG PO TABS	50742-112-01	A9270	\$0.55	\$0.54	\$0.54	\$0.51	\$0.54
Inpatient/Outpatient	DESIPRAMINE HCL 25 MG PO TABS	0781-1972-01	A9270	\$4.78	\$4.68	\$4.73	\$4.41	\$4.68
Inpatient/Outpatient	DESIPRAMINE HCL 25 MG PO TABS	45963-342-02	A9270	\$5.24	\$5.14	\$5.19	\$4.84	\$5.14
Inpatient/Outpatient	DESIPRAMINE HCL 25 MG PO TABS	50742-113-01	A9270	\$0.73	\$0.72	\$0.72	\$0.67	\$0.72
Inpatient/Outpatient	DESONIDE 0.05 % EX CREA	45802-422-35	A9270	\$4.68	\$4.59	\$4.63	\$4.32	\$4.59
Inpatient/Outpatient	DESONIDE 0.05 % EX CREA	16714-729-01	A9270	\$9.82	\$9.62	\$9.72	\$9.06	\$9.62
Inpatient/Outpatient	DEXAMETHASONE 0.5 MG/5ML PO SOLN	0054-3177-63	J8540	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	MORPHINE IV SYRINGE 0.5 MG/ML (NICU/INFANT)(DOSES 0.05 MG - 0.19 MG)	99999-1890-1	J2270	\$8.60	\$8.51	\$8.51	\$7.94	\$8.43
Inpatient/Outpatient	DEXAMETHASONE 4 MG PO TABS	0054-4184-25	J8540	\$4.48	\$4.39	\$4.44	\$4.14	\$4.39
Inpatient/Outpatient	DEXAMETHASONE 4 MG PO TABS	0054-8175-25	J8540	\$4.30	\$4.21	\$4.26	\$3.97	\$4.21

Inpatient/Outpatient	DEXAMETHASONE SOD PHOSPHATE PF 10 MG/ML IJ SOLN	63323-506-01	J1100		\$7.82	\$7.66	\$7.74	\$7.22	\$7.66
Inpatient/Outpatient	DEXAMETHASONE SOD PHOSPHATE PF 10 MG/ML IJ SOLN	63323-506-16	J1100		\$7.82	\$7.66	\$7.74	\$7.22	\$7.66
Inpatient/Outpatient	DEXAMETHASONE SOD PHOSPHATE PF 10 MG/ML IJ SOLN	70069-021-01	J1100		\$23.66	\$23.19	\$23.42	\$21.84	\$23.19
Inpatient/Outpatient	DEXAMETHASONE SODIUM PHOSPHATE 4 MG/ML IJ SOLN	63323-165-01	J1100		\$3.21	\$3.15	\$3.18	\$2.96	\$3.15
Inpatient/Outpatient	DEXAMETHASONE SODIUM PHOSPHATE 4 MG/ML IJ SOLN	63323-165-16	J1100		\$3.21	\$3.15	\$3.18	\$2.96	\$3.15
Inpatient/Outpatient	DEXAMETHASONE SODIUM PHOSPHATE 4 MG/ML IJ SOLN	55150-237-01	J1100		\$3.53	\$3.46	\$3.49	\$3.26	\$3.46
Inpatient/Outpatient	DEXAMETHASONE SODIUM PHOSPHATE 4 MG/ML IJ SOLN	63323-165-02	J1100		\$2.98	\$2.92	\$2.95	\$2.75	\$2.92
Inpatient/Outpatient	DEXAMETHASONE SODIUM PHOSPHATE 4 MG/ML IJ SOLN	67457-423-00	J1100		\$3.53	\$3.46	\$3.49	\$3.26	\$3.46
Inpatient/Outpatient	DEXAMETHASONE SODIUM PHOSPHATE 4 MG/ML IJ SOLN	0641-6145-01	J1100		\$3.94	\$3.86	\$3.90	\$3.64	\$3.86
Inpatient/Outpatient	DEXTROSE 10 % IV SOLN	0338-0023-02			\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	DEXTROSE 10 % IV SOLN	0338-0023-03			\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	DEXTROSE 10 % IV SOLN	0338-0023-04			\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	DEXTROSE 5 % IV SOLN	0264-7510-10			\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	DEXTROSE 5 % IV SOLN	0264-7510-20			\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	DEXTROSE 5 % IV SOLN	0338-0017-02			\$0.04	\$0.04	\$0.04	\$0.04	\$0.04
Inpatient/Outpatient	DEXTROSE 5 % IV SOLN	0338-0017-03			\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	DEXTROSE 5 % IV SOLN	0338-0017-10			\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	DEXTROSE 5 % IV SOLN	0338-0017-31			\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	DEXTROSE 5 % IV SOLN	0338-0017-41			\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	DEXTROSE 5 % IV SOLN	0338-0017-48			\$0.08	\$0.08	\$0.08	\$0.07	\$0.08
Inpatient/Outpatient	DEXTROSE 5 % IV SOLN	0338-0017-38			\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	DEXTROSE 5 % IV SOLN	0338-0017-04			\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	DEXTROSE 5 % IV SOLN	0338-0551-18			\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	DEXTROSE 5 % IV SOLN	0409-7922-02			\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	DEXTROSE 5 % IV SOLN	0338-0062-30			\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	DEXTROSE 5 % IV SOLN	0338-0066-20			\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	DEXTROSE 5 % IV SOLN	63323-624-74			\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	DEXTROSE 5 % IV SOLN	0990-7922-02			\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	DEXTROSE 5 % IV SOLN	0990-7923-11			\$0.24	\$0.24	\$0.24	\$0.22	\$0.24
Inpatient/Outpatient	DEXTROSE 5 % IV SOLN	0264-1510-32			\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	DEXTROSE 5 % IV SOLN	0990-7923-06			\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	DEXTROSE 5 % IV SOLN	0990-7922-25			\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	DEXTROSE 50 % IV SOLN	0409-4902-34			\$0.98	\$0.96	\$0.97	\$0.90	\$0.96
Inpatient/Outpatient	DEXTROSE 50 % IV SOLN	0409-6648-02			\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	DEXTROSE 50 % IV SOLN	99999-793-25			\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	DEXTROSE 50 % IV SOLN	0409-7936-19			\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	DEXTROSE 50 % IV SOLN	69374-953-50			\$1.46	\$1.43	\$1.45	\$1.35	\$1.43
Inpatient/Outpatient	DEXTROSE 50 % IV SOLN	0409-7517-16			\$0.96	\$0.94	\$0.95	\$0.89	\$0.94
Inpatient/Outpatient	DEXTROSE 50 % IV SOLN	76329-3301-1			\$1.05	\$1.03	\$1.04	\$0.97	\$1.03
Inpatient/Outpatient	DEXTROSE 50 % IV SOLN	0409-4902-64			\$0.77	\$0.75	\$0.76	\$0.71	\$0.75
Inpatient/Outpatient	DEXTROSE 50 % IV SOLN	0409-7517-66			\$0.75	\$0.74	\$0.74	\$0.69	\$0.74
Inpatient/Outpatient	DEXTROSE 50 % IV SOLN	0409-6648-16			\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	DEXTROSE 50 % IV SOLN	0990-7936-19			\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	DEXTROSE 50 % IV SOLN	76329-3302-1			\$1.05	\$1.03	\$1.04	\$0.97	\$1.03
Inpatient/Outpatient	DIAZEPAM 5 MG/ML IJ SOLN	0409-1273-32	J3360		\$53.83	\$52.75	\$53.29	\$49.69	\$52.75
Inpatient/Outpatient	DIAZEPAM 5 MG/ML IJ SOLN	0409-1273-03	J3360		\$50.11	\$49.11	\$49.61	\$46.25	\$49.11
Inpatient/Outpatient	DIAZEPAM 5 MG/ML IJ SOLN	0409-3213-12	J3360		\$15.71	\$15.40	\$15.55	\$14.50	\$15.40
Inpatient/Outpatient	DIAZEPAM 5 MG/ML IJ SOLN	99999-3212-2	J3360		\$15.71	\$15.40	\$15.55	\$14.50	\$15.40
Inpatient/Outpatient	DIAZEPAM 5 MG/ML IJ SOLN	69339-136-03	J3360		\$39.74	\$38.95	\$39.34	\$36.68	\$38.95
Inpatient/Outpatient	DIAZEPAM 2 MG PO TABS	51079-284-20	A9270		\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	DIAZEPAM 2 MG PO TABS	51079-284-01	A9270		\$1.18	\$1.16	\$1.17	\$1.09	\$1.16
Inpatient/Outpatient	DIAZEPAM 2 MG PO TABS	0172-3925-60	A9270		\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	DIAZEPAM 5 MG PO TABS	63739-073-10	A9270		\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	DIAZEPAM 5 MG PO TABS	51079-285-20	A9270		\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	DIAZEPAM 5 MG PO TABS	51079-285-01	A9270		\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	DIAZEPAM 5 MG PO TABS	0172-3926-60	A9270		\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	DICLOXACILLIN SODIUM 250 MG PO CAPS	0781-2248-01	A9270		\$1.04	\$1.02	\$1.03	\$0.96	\$1.02
Inpatient/Outpatient	DICLOXACILLIN SODIUM 250 MG PO CAPS	0093-3123-01	A9270		\$1.83	\$1.79	\$1.81	\$1.69	\$1.79
Inpatient/Outpatient	DICYCLOMINE HCL 10 MG PO CAPS	0591-0794-01	A9270		\$0.81	\$0.79	\$0.80	\$0.75	\$0.79
Inpatient/Outpatient	DICYCLOMINE HCL 10 MG PO CAPS	51079-118-01	A9270		\$1.29	\$1.26	\$1.28	\$1.19	\$1.26
Inpatient/Outpatient	DICYCLOMINE HCL 10 MG PO CAPS	51079-118-20	A9270		\$1.81	\$1.77	\$1.79	\$1.67	\$1.77
Inpatient/Outpatient	DICYCLOMINE HCL 10 MG PO CAPS	0143-3126-01	A9270		\$0.90	\$0.88	\$0.89	\$0.83	\$0.88
Inpatient/Outpatient	DICYCLOMINE HCL 10 MG PO CAPS	0378-1610-01	A9270		\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	DICYCLOMINE HCL 10 MG PO CAPS	0527-0586-01	A9270		\$0.29	\$0.28	\$0.29	\$0.27	\$0.28
Inpatient/Outpatient	DICYCLOMINE HCL 10 MG PO CAPS	58914-012-10	A9270		\$2.49	\$2.44	\$2.47	\$2.30	\$2.44
Inpatient/Outpatient	DICYCLOMINE HCL 10 MG PO CAPS	60687-369-11	A9270		\$2.11	\$2.07	\$2.09	\$1.95	\$2.07
Inpatient/Outpatient	DICYCLOMINE HCL 10 MG PO CAPS	0904-6987-61	A9270		\$2.15	\$2.11	\$2.13	\$1.98	\$2.11
Inpatient/Outpatient	DICYCLOMINE HCL 20 MG PO TABS	51079-119-01	A9270		\$1.69	\$1.66	\$1.67	\$1.56	\$1.66

Inpatient/Outpatient	DICYCLOMINE HCL 20 MG PO TABS	51079-119-20	A9270	\$1.80	\$1.76	\$1.78	\$1.66	\$1.76
Inpatient/Outpatient	DICYCLOMINE HCL 20 MG PO TABS	0378-1620-05	A9270	\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	DICYCLOMINE HCL 20 MG PO TABS	0378-1620-01	A9270	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	DICYCLOMINE HCL 20 MG PO TABS	0527-1282-01	A9270	\$0.78	\$0.76	\$0.77	\$0.72	\$0.76
Inpatient/Outpatient	DICYCLOMINE HCL 20 MG PO TABS	0904-6988-61	A9270	\$1.60	\$1.57	\$1.58	\$1.48	\$1.57
Inpatient/Outpatient	DIGOXIN 0.25 MG/ML IJ SOLN	0641-1410-35	J1160	\$7.51	\$7.36	\$7.43	\$6.93	\$7.36
Inpatient/Outpatient	DIGOXIN 0.25 MG/ML IJ SOLN	0781-3059-95	J1160	\$9.67	\$9.48	\$9.57	\$8.93	\$9.48
Inpatient/Outpatient	DIGOXIN 0.25 MG/ML IJ SOLN	0781-3059-72	J1160	\$13.72	\$13.45	\$13.58	\$12.66	\$13.45
Inpatient/Outpatient	DIGOXIN 0.25 MG/ML IJ SOLN	0641-1410-31	J1160	\$1.39	\$1.36	\$1.38	\$1.28	\$1.36
Inpatient/Outpatient	DIGOXIN 125 MCG PO TABS	0904-5921-61	A9270	\$3.42	\$3.35	\$3.39	\$3.16	\$3.35
Inpatient/Outpatient	DIGOXIN 125 MCG PO TABS	0527-1324-01	A9270	\$5.76	\$5.64	\$5.70	\$5.32	\$5.64
Inpatient/Outpatient	DIGOXIN 125 MCG PO TABS	0115-9811-01	A9270	\$5.76	\$5.64	\$5.70	\$5.32	\$5.64
Inpatient/Outpatient	DIGOXIN 125 MCG PO TABS	24987-242-56	A9270	\$0.90	\$0.88	\$0.89	\$0.83	\$0.88
Inpatient/Outpatient	DIGOXIN 125 MCG PO TABS	16714-590-01	A9270	\$0.87	\$0.85	\$0.86	\$0.80	\$0.85
Inpatient/Outpatient	DIGOXIN 250 MCG PO TABS	62584-990-11	A9270	\$0.73	\$0.72	\$0.72	\$0.67	\$0.72
Inpatient/Outpatient	DIGOXIN 250 MCG PO TABS	24987-249-56	A9270	\$33.19	\$32.53	\$32.86	\$30.63	\$32.53
Inpatient/Outpatient	DIGOXIN 250 MCG PO TABS	0904-5922-61	A9270	\$4.02	\$3.94	\$3.98	\$3.71	\$3.94
Inpatient/Outpatient	DIGOXIN 250 MCG PO TABS	0143-1241-01	A9270	\$0.87	\$0.85	\$0.86	\$0.80	\$0.85
Inpatient/Outpatient	DILTIAZEM HCL 30 MG PO TABS	0378-0023-01	A9270	\$0.61	\$0.60	\$0.60	\$0.56	\$0.60
Inpatient/Outpatient	DILTIAZEM HCL 30 MG PO TABS	51079-745-01	A9270	\$2.18	\$2.14	\$2.16	\$2.01	\$2.14
Inpatient/Outpatient	DILTIAZEM HCL 30 MG PO TABS	51079-745-20	A9270	\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	DILTIAZEM HCL 30 MG PO TABS	51079-745-17	A9270	\$2.19	\$2.15	\$2.17	\$2.02	\$2.15
Inpatient/Outpatient	DILTIAZEM HCL 30 MG PO TABS	63739-079-10	A9270	\$0.53	\$0.52	\$0.52	\$0.49	\$0.52
Inpatient/Outpatient	DILTIAZEM HCL 30 MG PO TABS	0093-0318-01	A9270	\$0.43	\$0.42	\$0.43	\$0.40	\$0.42
Inpatient/Outpatient	DILTIAZEM HCL 30 MG PO TABS	60687-562-11	A9270	\$0.75	\$0.74	\$0.74	\$0.69	\$0.74
Inpatient/Outpatient	DILTIAZEM HCL 60 MG PO TABS	51079-746-01	A9270	\$3.42	\$3.35	\$3.39	\$3.16	\$3.35
Inpatient/Outpatient	DILTIAZEM HCL 60 MG PO TABS	51079-746-20	A9270	\$0.41	\$0.40	\$0.41	\$0.38	\$0.40
Inpatient/Outpatient	DILTIAZEM HCL 60 MG PO TABS	63629-3649-1	A9270	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	DILTIAZEM HCL 60 MG PO TABS	63739-080-10	A9270	\$0.85	\$0.83	\$0.84	\$0.78	\$0.83
Inpatient/Outpatient	DILTIAZEM HCL 60 MG PO TABS	0093-0319-01	A9270	\$0.75	\$0.74	\$0.74	\$0.69	\$0.74
Inpatient/Outpatient	DIPHENHYDRAMINE HCL 50 MG/ML IJ SOLN	0641-0376-25	J1200	\$2.67	\$2.62	\$2.64	\$2.46	\$2.62
Inpatient/Outpatient	DIPHENHYDRAMINE HCL 50 MG/ML IJ SOLN	0641-0376-21	J1200	\$2.51	\$2.46	\$2.48	\$2.32	\$2.46
Inpatient/Outpatient	DIPHENHYDRAMINE HCL 50 MG/ML IJ SOLN	63323-664-01	J1200	\$3.62	\$3.55	\$3.58	\$3.34	\$3.55
Inpatient/Outpatient	DIPHENHYDRAMINE HCL 50 MG/ML IJ SOLN	63323-664-16	J1200	\$3.62	\$3.55	\$3.58	\$3.34	\$3.55
Inpatient/Outpatient	DIPHENHYDRAMINE HCL 50 MG/ML IJ SOLN	63323-664-41	J1200	\$3.62	\$3.55	\$3.58	\$3.34	\$3.55
Inpatient/Outpatient	DIPHENHYDRAMINE HCL 50 MG/ML IJ SOLN	63323-664-00	J1200	\$3.62	\$3.55	\$3.58	\$3.34	\$3.55
Inpatient/Outpatient	DIPHENHYDRAMINE HCL 50 MG/ML IJ SOLN	72485-101-01	J1200	\$22.62	\$22.17	\$22.39	\$20.88	\$22.17
Inpatient/Outpatient	POVIDONE-IODINE 10 % EX SOLN	52380-0001-3	A9270	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	POVIDONE-IODINE 10 % EX SOLN	65517-0035-1	A9270	\$0.34	\$0.33	\$0.34	\$0.31	\$0.33
Inpatient/Outpatient	DIPHENHYDRAMINE HCL 12.5 MG/5ML PO ELIX	0121-0489-10	Q0163	\$0.51	\$0.50	\$0.50	\$0.47	\$0.50
Inpatient/Outpatient	DIPHENHYDRAMINE HCL 12.5 MG/5ML PO ELIX	0121-0978-10	Q0163	\$0.51	\$0.50	\$0.50	\$0.47	\$0.50
Inpatient/Outpatient	DIPHENHYDRAMINE HCL 25 MG PO TABS	51079-967-20	Q0163	\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	DIPHENHYDRAMINE HCL 25 MG PO TABS	51079-967-01	Q0163	\$1.94	\$1.90	\$1.92	\$1.79	\$1.90
Inpatient/Outpatient	DIPHENHYDRAMINE HCL 25 MG PO TABS	0536-3597-01	Q0163	\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	DIPHENHYDRAMINE HCL 25 MG PO TABS	0904-5551-59	Q0163	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	DIPHENHYDRAMINE HCL 25 MG PO TABS	0536-1016-01	Q0163	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	DIPHENHYDRAMINE HCL 25 MG PO TABS	0536-1214-29	Q0163	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	DIPHENOXYLATE-ATROPINE 2.5-0.025 MG/5ML PO LIQD	0054-3194-46	A9270	\$4.69	\$4.60	\$4.64	\$4.33	\$4.60
Inpatient/Outpatient	DIPHENOXYLATE-ATROPINE 2.5-0.025 MG/5ML PO LIQD	99999-3194-5	A9270	\$4.69	\$4.64	\$4.64	\$4.33	\$4.60
Inpatient/Outpatient	DIPHENOXYLATE-ATROPINE 2.5-0.025 MG PO TABS	51079-067-01	A9270	\$2.32	\$2.27	\$2.30	\$2.14	\$2.27
Inpatient/Outpatient	DIPHENOXYLATE-ATROPINE 2.5-0.025 MG PO TABS	51079-067-20	A9270	\$0.91	\$0.89	\$0.90	\$0.84	\$0.89
Inpatient/Outpatient	DIPHENOXYLATE-ATROPINE 2.5-0.025 MG PO TABS	0378-0415-01	A9270	\$3.25	\$3.19	\$3.22	\$3.00	\$3.19
Inpatient/Outpatient	DIPHENOXYLATE-ATROPINE 2.5-0.025 MG PO TABS	59762-1061-1	A9270	\$1.40	\$1.37	\$1.39	\$1.29	\$1.37
Inpatient/Outpatient	DIPHENOXYLATE-ATROPINE 2.5-0.025 MG PO TABS	0832-0590-11	A9270	\$0.51	\$0.50	\$0.50	\$0.47	\$0.50
Inpatient/Outpatient	MORPHINE 0.4 MG/ML ORAL SOLN (NAS) (NICU/INFANT)	99999-023-00	A9270	\$0.56	\$0.55	\$0.55	\$0.52	\$0.55
Inpatient/Outpatient	MORPHINE 0.4 MG/ML ORAL SOLN (NAS) (NICU/INFANT)	99999-023-10	A9270	\$0.56	\$0.55	\$0.55	\$0.52	\$0.55
Inpatient/Outpatient	MORPHINE 0.4 MG/ML ORAL SOLN (NAS) (NICU/INFANT)	99999-023-05	A9270	\$0.56	\$0.55	\$0.55	\$0.52	\$0.55
Inpatient/Outpatient	DIPYRIDAMOLE 75 MG PO TABS	0904-1088-61	A9270	\$1.89	\$1.85	\$1.87	\$1.74	\$1.85
Inpatient/Outpatient	DIPYRIDAMOLE 75 MG PO TABS	0555-0286-02	A9270	\$4.98	\$4.88	\$4.93	\$4.60	\$4.88
Inpatient/Outpatient	DIPYRIDAMOLE 75 MG PO TABS	64980-135-01	A9270	\$11.55	\$11.32	\$11.43	\$10.66	\$11.32
Inpatient/Outpatient	DIPYRIDAMOLE 75 MG PO TABS	0115-1072-01	A9270	\$5.23	\$5.13	\$5.18	\$4.83	\$5.13
Inpatient/Outpatient	DISOPYRAMIDE PHOSPHATE 100 MG PO CAPS	0093-3127-01	A9270	\$7.28	\$7.13	\$7.21	\$6.72	\$7.13
Inpatient/Outpatient	DISOPYRAMIDE PHOSPHATE 100 MG PO CAPS	0591-5560-01	A9270	\$2.81	\$2.75	\$2.78	\$2.59	\$2.75
Inpatient/Outpatient	DISOPYRAMIDE PHOSPHATE 100 MG PO CAPS	59762-0386-1	A9270	\$3.21	\$3.15	\$3.18	\$2.96	\$3.15
Inpatient/Outpatient	DIAZEPAM 1 MG/ML PO SOLN	68094-750-62		\$2.99	\$2.93	\$2.96	\$2.76	\$2.93
Inpatient/Outpatient	TRANEXAMIC ACID 650 MG PO TABS	0591-3720-30	A9270	\$14.99	\$14.69	\$14.84	\$13.84	\$14.69
Inpatient/Outpatient	TRANEXAMIC ACID 650 MG PO TABS	69918-301-30	A9270	\$18.35	\$17.98	\$18.17	\$16.94	\$17.98
Inpatient/Outpatient	TRANEXAMIC ACID 650 MG PO TABS	62559-265-30	A9270	\$9.22	\$9.04	\$9.13	\$8.51	\$9.04

Inpatient/Outpatient	DISULFIRAM 250 MG PO TABS	51285-523-02	A9270	\$39.70	\$38.91	\$39.30	\$36.64	\$38.91
Inpatient/Outpatient	DISULFIRAM 250 MG PO TABS	64980-171-03	A9270	\$9.67	\$9.48	\$9.57	\$8.93	\$9.48
Inpatient/Outpatient	DISULFIRAM 250 MG PO TABS	47781-607-30	A9270	\$4.30	\$4.21	\$4.26	\$3.97	\$4.21
Inpatient/Outpatient	DISULFIRAM 250 MG PO TABS	0054-0356-13	A9270	\$12.77	\$12.51	\$12.64	\$11.79	\$12.51
Inpatient/Outpatient	DIVALPROEX SODIUM 125 MG PO TBEC	0074-6212-13	A9270	\$8.06	\$7.90	\$7.98	\$7.44	\$7.90
Inpatient/Outpatient	DIVALPROEX SODIUM 125 MG PO TBEC	0245-0180-01	A9270	\$0.60	\$0.59	\$0.59	\$0.55	\$0.59
Inpatient/Outpatient	DIVALPROEX SODIUM 125 MG PO TBEC	57237-106-01	A9270	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	DIVALPROEX SODIUM 125 MG PO TBEC	62756-796-88	A9270	\$0.30	\$0.29	\$0.30	\$0.28	\$0.29
Inpatient/Outpatient	DIVALPROEX SODIUM 125 MG PO TBEC	29300-138-01	A9270	\$0.20	\$0.20	\$0.20	\$0.18	\$0.20
Inpatient/Outpatient	DIVALPROEX SODIUM 250 MG PO TBEC	0245-0181-01	A9270	\$0.75	\$0.74	\$0.74	\$0.69	\$0.74
Inpatient/Outpatient	DIVALPROEX SODIUM 250 MG PO TBEC	0245-0181-89	A9270	\$0.76	\$0.74	\$0.75	\$0.70	\$0.74
Inpatient/Outpatient	DIVALPROEX SODIUM 250 MG PO TBEC	68084-776-95	A9270	\$1.30	\$1.27	\$1.29	\$1.20	\$1.27
Inpatient/Outpatient	DIVALPROEX SODIUM 250 MG PO TBEC	68084-776-11	A9270	\$0.79	\$0.77	\$0.78	\$0.73	\$0.77
Inpatient/Outpatient	DIVALPROEX SODIUM 250 MG PO TBEC	62756-797-88	A9270	\$0.42	\$0.41	\$0.42	\$0.39	\$0.41
Inpatient/Outpatient	DIVALPROEX SODIUM 250 MG PO TBEC	0832-7123-89	A9270	\$0.54	\$0.53	\$0.53	\$0.50	\$0.53
Inpatient/Outpatient	DIVALPROEX SODIUM 500 MG PO TBEC	0074-6215-13	A9270	\$29.20	\$28.62	\$28.91	\$26.95	\$28.62
Inpatient/Outpatient	DIVALPROEX SODIUM 500 MG PO TBEC	0245-0182-01	A9270	\$0.97	\$0.95	\$0.96	\$0.90	\$0.95
Inpatient/Outpatient	DIVALPROEX SODIUM 500 MG PO TBEC	0245-0182-89	A9270	\$1.15	\$1.13	\$1.14	\$1.06	\$1.13
Inpatient/Outpatient	DIVALPROEX SODIUM 500 MG PO TBEC	51079-475-01	A9270	\$1.05	\$1.03	\$1.04	\$0.97	\$1.03
Inpatient/Outpatient	DIVALPROEX SODIUM 500 MG PO TBEC	57237-048-01	A9270	\$1.17	\$1.15	\$1.16	\$1.08	\$1.15
Inpatient/Outpatient	DIVALPROEX SODIUM 500 MG PO TBEC	68084-782-11	A9270	\$1.36	\$1.33	\$1.35	\$1.26	\$1.33
Inpatient/Outpatient	DIVALPROEX SODIUM 500 MG PO TBEC	62756-798-88	A9270	\$1.17	\$1.15	\$1.16	\$1.08	\$1.15
Inpatient/Outpatient	DIVALPROEX SODIUM 500 MG PO TBEC	29300-140-01	A9270	\$0.55	\$0.54	\$0.54	\$0.51	\$0.54
Inpatient/Outpatient	DIVALPROEX SODIUM 500 MG PO TBEC	0832-7124-89	A9270	\$0.68	\$0.67	\$0.67	\$0.63	\$0.67
Inpatient/Outpatient	DOCUSATE SODIUM 100 MG PO CAPS	0904-2244-61	A9150	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	DOCUSATE SODIUM 100 MG PO CAPS	63739-478-10	A9150	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	DOCUSATE SODIUM 100 MG PO CAPS	57896-401-01	A9150	\$0.08	\$0.08	\$0.08	\$0.07	\$0.08
Inpatient/Outpatient	DOCUSATE SODIUM 100 MG PO CAPS	0904-6455-61	A9150	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	DOCUSATE SODIUM 100 MG PO CAPS	0904-6457-60	A9150	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	DOCUSATE SODIUM 100 MG PO CAPS	70677-0034-1	A9150	\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	DOCUSATE SODIUM 100 MG PO CAPS	0904-6998-60	A9150	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	DOCUSATE SODIUM 100 MG PO CAPS	0904-7115-61	A9150	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	DOCUSATE SODIUM 100 MG PO CAPS	10135-111-01	A9150	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	DOPAMINE HCL 40 MG/ML IV SOLN	0517-1805-25	J1265	\$1.70	\$1.67	\$1.68	\$1.57	\$1.67
Inpatient/Outpatient	DOPAMINE HCL 40 MG/ML IV SOLN	0409-9104-20	J1265	\$1.03	\$1.01	\$1.02	\$0.95	\$1.01
Inpatient/Outpatient	DOPAMINE HCL 40 MG/ML IV SOLN	0409-5820-01	J1265	\$2.51	\$2.46	\$2.48	\$2.32	\$2.46
Inpatient/Outpatient	DOPAMINE HCL 40 MG/ML IV SOLN	0143-9254-25	J1265	\$2.38	\$2.33	\$2.36	\$2.20	\$2.33
Inpatient/Outpatient	DOPAMINE HCL 40 MG/ML IV SOLN	0143-9254-01	J1265	\$2.39	\$2.34	\$2.37	\$2.21	\$2.34
Inpatient/Outpatient	DOPAMINE HCL 40 MG/ML IV SOLN	0143-9252-01	J1265	\$2.39	\$2.34	\$2.37	\$2.21	\$2.34
Inpatient/Outpatient	DOPAMINE HCL 40 MG/ML IV SOLN	0409-5820-11	J1265	\$2.51	\$2.46	\$2.48	\$2.32	\$2.46
Inpatient/Outpatient	DOXAPRAM HCL 20 MG/ML IV SOLN	55390-035-01		\$10.17	\$9.97	\$10.07	\$9.39	\$9.97
Inpatient/Outpatient	DOXAPRAM HCL 20 MG/ML IV SOLN	60977-144-02		\$1.60	\$1.57	\$1.58	\$1.48	\$1.57
Inpatient/Outpatient	DOXAPRAM HCL 20 MG/ML IV SOLN	60977-144-63		\$1.60	\$1.57	\$1.58	\$1.48	\$1.57
Inpatient/Outpatient	DOXAPRAM HCL 20 MG/ML IV SOLN	0641-6018-01		\$9.39	\$9.20	\$9.30	\$8.67	\$9.20
Inpatient/Outpatient	DOXEPIN HCL 10 MG PO CAPS	51079-436-20	A9270	\$1.93	\$1.89	\$1.91	\$1.78	\$1.89
Inpatient/Outpatient	DOXEPIN HCL 10 MG PO CAPS	51079-436-01	A9270	\$1.58	\$1.55	\$1.56	\$1.46	\$1.55
Inpatient/Outpatient	DOXEPIN HCL 10 MG PO CAPS	0378-1049-01	A9270	\$1.80	\$1.76	\$1.78	\$1.66	\$1.76
Inpatient/Outpatient	DOXEPIN HCL 25 MG PO CAPS	51079-437-01	A9270	\$2.08	\$2.04	\$2.06	\$1.92	\$2.04
Inpatient/Outpatient	DOXEPIN HCL 25 MG PO CAPS	51079-437-20	A9270	\$2.54	\$2.49	\$2.51	\$2.34	\$2.49
Inpatient/Outpatient	DOXEPIN HCL 25 MG PO CAPS	0378-3125-01	A9270	\$2.51	\$2.46	\$2.48	\$2.32	\$2.46
Inpatient/Outpatient	DOXEPIN HCL 50 MG PO CAPS	51079-438-01	A9270	\$2.77	\$2.71	\$2.74	\$2.56	\$2.71
Inpatient/Outpatient	DOXEPIN HCL 50 MG PO CAPS	51079-438-20	A9270	\$3.52	\$3.45	\$3.48	\$3.25	\$3.45
Inpatient/Outpatient	DOXEPIN HCL 50 MG PO CAPS	0378-4250-01	A9270	\$3.39	\$3.32	\$3.36	\$3.13	\$3.32
Inpatient/Outpatient	DOXEPIN HCL 10 MG/ML PO CONC	60432-651-04	A9270	\$1.02	\$1.00	\$1.01	\$0.94	\$1.00
Inpatient/Outpatient	DOXEPIN HCL 10 MG/ML PO CONC	54838-512-40	A9270	\$1.22	\$1.20	\$1.21	\$1.13	\$1.20
Inpatient/Outpatient	DOXORUBICIN HCL 2 MG/ML IV SOLN	0703-5040-01	J9000	\$6.37	\$6.24	\$6.31	\$5.88	\$6.24
Inpatient/Outpatient	DOXORUBICIN HCL 2 MG/ML IV SOLN	55390-237-01	J9000	\$9.61	\$9.42	\$9.51	\$8.87	\$9.42
Inpatient/Outpatient	DOXORUBICIN HCL 2 MG/ML IV SOLN	63323-883-30	J9000	\$3.49	\$3.42	\$3.46	\$3.22	\$3.42
Inpatient/Outpatient	DOXORUBICIN HCL 2 MG/ML IV SOLN	25021-207-51	J9000	\$6.76	\$6.62	\$6.69	\$6.24	\$6.62
Inpatient/Outpatient	DOXORUBICIN HCL 2 MG/ML IV SOLN	0143-9546-01	J9000	\$2.00	\$1.96	\$1.98	\$1.85	\$1.96
Inpatient/Outpatient	DOXORUBICIN HCL 2 MG/ML IV SOLN	45963-733-60	J9000	\$6.80	\$6.66	\$6.73	\$6.28	\$6.66
Inpatient/Outpatient	DOXORUBICIN HCL 2 MG/ML IV SOLN	0143-9547-01	J9000	\$2.31	\$2.26	\$2.29	\$2.13	\$2.26
Inpatient/Outpatient	DOXORUBICIN HCL 2 MG/ML IV SOLN	0069-3034-20	J9000	\$1.61	\$1.58	\$1.59	\$1.49	\$1.58
Inpatient/Outpatient	DOXORUBICIN HCL 2 MG/ML IV SOLN	25021-207-25	J9000	\$1.08	\$1.06	\$1.07	\$1.00	\$1.06
Inpatient/Outpatient	DOXORUBICIN HCL 2 MG/ML IV SOLN	0069-4026-25	J9000	\$2.37	\$2.32	\$2.35	\$2.19	\$2.32
Inpatient/Outpatient	DOXORUBICIN HCL 2 MG/ML IV SOLN	0069-4037-01	J9000	\$1.56	\$1.53	\$1.54	\$1.44	\$1.53
Inpatient/Outpatient	DOXORUBICIN HCL 2 MG/ML IV SOLN	0069-3032-20	J9000	\$3.81	\$3.73	\$3.77	\$3.52	\$3.73
Inpatient/Outpatient	DOXORUBICIN HCL 2 MG/ML IV SOLN	0143-9086-01	J9000	\$2.31	\$2.26	\$2.29	\$2.13	\$2.26

Inpatient/Outpatient	DOXYCYCLINE HYCLATE 100 MG IV SOLR	55390-110-10		\$51.76	\$50.72	\$51.24	\$47.77	\$50.72
Inpatient/Outpatient	DOXYCYCLINE HYCLATE 100 MG IV SOLR	63323-130-11		\$74.64	\$73.15	\$73.89	\$68.89	\$73.15
Inpatient/Outpatient	DOXYCYCLINE HYCLATE 100 MG IV SOLR	0069-0104-01		\$36.35	\$35.62	\$35.99	\$33.55	\$35.62
Inpatient/Outpatient	DOXYCYCLINE HYCLATE 100 MG IV SOLR	67457-437-00		\$88.46	\$86.69	\$87.58	\$81.65	\$86.69
Inpatient/Outpatient	DOXYCYCLINE HYCLATE 100 MG IV SOLR	63323-130-17		\$74.64	\$73.15	\$73.89	\$68.89	\$73.15
Inpatient/Outpatient	DOXYCYCLINE HYCLATE 100 MG IV SOLR	0143-9381-10		\$80.97	\$79.35	\$80.16	\$74.74	\$79.35
Inpatient/Outpatient	DOXYCYCLINE HYCLATE 100 MG IV SOLR	63323-130-02		\$74.64	\$73.15	\$73.89	\$68.89	\$73.15
Inpatient/Outpatient	DOXYCYCLINE HYCLATE 100 MG IV SOLR	63323-130-41		\$74.64	\$73.15	\$73.89	\$68.89	\$73.15
Inpatient/Outpatient	LAMIVUDINE 100 MG PO TABS	0173-0662-00	A9270	\$73.59	\$72.12	\$72.85	\$67.92	\$72.12
Inpatient/Outpatient	DOXYCYCLINE HYCLATE 50 MG PO CAPS	0143-3141-50	A9270	\$5.83	\$5.71	\$5.77	\$5.38	\$5.71
Inpatient/Outpatient	DOXYCYCLINE HYCLATE 50 MG PO CAPS	53489-118-02	A9270	\$1.91	\$1.87	\$1.89	\$1.76	\$1.87
Inpatient/Outpatient	DOXYCYCLINE HYCLATE 50 MG PO CAPS	47781-489-50	A9270	\$1.01	\$0.99	\$1.00	\$0.93	\$0.99
Inpatient/Outpatient	DOXYCYCLINE HYCLATE 50 MG PO CAPS	50268-277-11	A9270	\$5.31	\$5.20	\$5.26	\$4.90	\$5.20
Inpatient/Outpatient	DOXYCYCLINE HYCLATE 100 MG PO TABS	0143-2112-05	A9270	\$5.83	\$5.71	\$5.77	\$5.38	\$5.71
Inpatient/Outpatient	DOXYCYCLINE HYCLATE 100 MG PO TABS	62584-693-11	A9270	\$27.15	\$26.61	\$26.88	\$25.06	\$26.61
Inpatient/Outpatient	DOXYCYCLINE HYCLATE 100 MG PO TABS	63739-168-33	A9270	\$7.48	\$7.33	\$7.41	\$6.90	\$7.33
Inpatient/Outpatient	DOXYCYCLINE HYCLATE 100 MG PO TABS	50268-279-11	A9270	\$7.27	\$7.12	\$7.20	\$6.71	\$7.12
Inpatient/Outpatient	DOXYCYCLINE HYCLATE 100 MG PO TABS	0904-0430-61	A9270	\$0.34	\$0.33	\$0.34	\$0.31	\$0.33
Inpatient/Outpatient	DOXYCYCLINE HYCLATE 100 MG PO TABS	0904-0430-06	A9270	\$5.49	\$5.38	\$5.44	\$5.07	\$5.38
Inpatient/Outpatient	DOXYCYCLINE HYCLATE 100 MG PO TABS	42806-312-50	A9270	\$0.95	\$0.93	\$0.94	\$0.88	\$0.93
Inpatient/Outpatient	DOXYCYCLINE HYCLATE 100 MG PO TABS	42806-312-05	A9270	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	DROPERIDOL 2.5 MG/ML IJ SOLN	0409-1187-01	J1790	\$4.52	\$4.43	\$4.47	\$4.17	\$4.43
Inpatient/Outpatient	DROPERIDOL 2.5 MG/ML IJ SOLN	0517-9702-25	J1790	\$16.93	\$16.59	\$16.76	\$15.63	\$16.59
Inpatient/Outpatient	DROPERIDOL 2.5 MG/ML IJ SOLN	0517-9702-01	J1790	\$16.13	\$15.81	\$15.97	\$14.89	\$15.81
Inpatient/Outpatient	EPHEDRINE SULFATE 50 MG/ML IJ SOLN	66758-008-02		\$48.05	\$47.08	\$47.57	\$44.35	\$47.09
Inpatient/Outpatient	EPHEDRINE SULFATE 50 MG/ML IJ SOLN	66758-008-01		\$4.08	\$4.00	\$4.04	\$3.77	\$4.00
Inpatient/Outpatient	EPHEDRINE SULFATE 50 MG/ML IJ SOLN	14789-014-01		\$59.89	\$58.69	\$59.29	\$55.28	\$58.69
Inpatient/Outpatient	EPHEDRINE SULFATE 50 MG/ML IJ SOLN	17478-515-00		\$79.56	\$77.97	\$78.76	\$73.43	\$77.97
Inpatient/Outpatient	EPINEPHRINE 1 MG/10ML IJ SOSY	0409-4921-34	J0171	\$2.14	\$2.10	\$2.12	\$1.98	\$2.10
Inpatient/Outpatient	EPINEPHRINE 1 MG/10ML IJ SOSY	0409-4921-20	J0171	\$2.00	\$1.96	\$1.98	\$1.85	\$1.96
Inpatient/Outpatient	EPINEPHRINE 1 MG/10ML IJ SOSY	0409-4901-18	J0171	\$4.30	\$4.21	\$4.26	\$3.97	\$4.21
Inpatient/Outpatient	EPINEPHRINE 1 MG/10ML IJ SOSY	76329-3316-1	J0171	\$3.40	\$3.33	\$3.37	\$3.14	\$3.33
Inpatient/Outpatient	EPINEPHRINE 1 MG/ML IJ SOLN (WRAP)	42023-159-01	J0171	\$63.42	\$62.15	\$62.79	\$58.54	\$62.15
Inpatient/Outpatient	EPINEPHRINE 1 MG/ML IJ SOLN (WRAP)	42023-159-25	J0171	\$63.33	\$62.06	\$62.70	\$58.45	\$62.06
Inpatient/Outpatient	EPINEPHRINE 1 MG/ML IJ SOLN (WRAP)	54288-103-01	J0171	\$45.30	\$44.39	\$44.85	\$41.81	\$44.39
Inpatient/Outpatient	EPINEPHRINE 1 MG/ML IJ SOLN (WRAP)	42023-168-01	J0171	\$25.60	\$25.09	\$25.34	\$23.63	\$25.09
Inpatient/Outpatient	EPINEPHRINE 1 MG/ML IJ SOLN (WRAP)	42023-168-89	J0171	\$25.63	\$25.12	\$25.37	\$23.66	\$25.12
Inpatient/Outpatient	EPINEPHRINE 1 MG/ML IJ SOLN (WRAP)	76329-9060-0	J0171	\$36.45	\$35.72	\$36.09	\$33.64	\$35.72
Inpatient/Outpatient	RACEPINEPHRINE HCL 2.25 % IN NEBU	0487-5901-99	A9270	\$6.33	\$6.20	\$6.27	\$5.84	\$6.20
Inpatient/Outpatient	ERYTHROMYCIN 5 MG/GM OP OINT	24208-910-55	A9270	\$14.11	\$13.83	\$13.97	\$13.02	\$13.83
Inpatient/Outpatient	ERYTHROMYCIN 5 MG/GM OP OINT	24208-910-19	A9270	\$42.73	\$41.88	\$42.30	\$39.44	\$41.88
Inpatient/Outpatient	ERYTHROMYCIN 5 MG/GM OP OINT	0574-4024-50	A9270	\$34.25	\$33.52	\$33.91	\$31.61	\$33.52
Inpatient/Outpatient	ERYTHROMYCIN 5 MG/GM OP OINT	17478-824-01	A9270	\$37.14	\$36.40	\$36.77	\$34.28	\$36.40
Inpatient/Outpatient	ERYTHROMYCIN 5 MG/GM OP OINT	0574-4024-11	A9270	\$28.26	\$27.69	\$27.98	\$26.08	\$27.69
Inpatient/Outpatient	ERYTHROMYCIN 5 MG/GM OP OINT	0574-4024-35	A9270	\$12.83	\$12.57	\$12.70	\$11.84	\$12.57
Inpatient/Outpatient	ERYTHROMYCIN 5 MG/GM OP OINT	17478-070-35	A9270	\$8.19	\$8.03	\$8.11	\$7.56	\$8.03
Inpatient/Outpatient	ERYTHROMYCIN 5 MG/GM OP OINT	17478-070-31	A9270	\$20.89	\$20.47	\$20.68	\$19.28	\$20.47
Inpatient/Outpatient	ERYTHROMYCIN BASE 250 MG PO TABS	24338-102-13	A9270	\$36.70	\$35.97	\$36.33	\$33.87	\$35.97
Inpatient/Outpatient	ERYTHROMYCIN BASE 250 MG PO TABS	52536-103-13	A9270	\$45.68	\$44.77	\$45.22	\$42.16	\$44.77
Inpatient/Outpatient	ERYTHROMYCIN BASE 250 MG PO TABS	24338-102-03	A9270	\$26.24	\$25.72	\$25.98	\$24.22	\$25.72
Inpatient/Outpatient	ERYTHROMYCIN BASE 250 MG PO TBEC	24338-122-13	A9270	\$33.40	\$32.73	\$33.07	\$30.83	\$32.73
Inpatient/Outpatient	ERYTHROMYCIN BASE 250 MG PO TBEC	69238-1471-1	A9270	\$27.32	\$26.77	\$27.05	\$25.22	\$26.77
Inpatient/Outpatient	ERYTHROMYCIN BASE 250 MG PO TBEC	52536-180-03	A9270	\$24.25	\$23.77	\$24.01	\$22.38	\$23.77
Inpatient/Outpatient	ERYTHROMYCIN BASE 250 MG PO TBEC	13668-586-30	A9270	\$16.66	\$16.33	\$16.49	\$15.38	\$16.33
Inpatient/Outpatient	ERYTHROMYCIN BASE 333 MG PO TBEC	24338-124-13	A9270	\$42.06	\$41.22	\$41.64	\$38.82	\$41.22
Inpatient/Outpatient	ERYTHROMYCIN BASE 333 MG PO TBEC	24338-124-03	A9270	\$29.31	\$28.72	\$29.02	\$27.05	\$28.72
Inpatient/Outpatient	ERYTHROMYCIN BASE 333 MG PO TBEC	69238-1472-1	A9270	\$34.40	\$33.71	\$34.06	\$31.75	\$33.71
Inpatient/Outpatient	ERYTHROMYCIN BASE 333 MG PO TBEC	52536-183-03	A9270	\$27.17	\$26.63	\$26.90	\$25.08	\$26.63
Inpatient/Outpatient	GENTAMICIN FORTIFIED OPHTHALMIC DROPS 9.1 MG/ML	99999-4081-9	A9270	\$4.08	\$4.00	\$4.04	\$3.77	\$4.00
Inpatient/Outpatient	ERYTHROMYCIN ETHYLSUCCINATE 200 MG/5ML PO SUSR	24338-132-13	A9270	\$17.08	\$16.74	\$16.91	\$15.76	\$16.74
Inpatient/Outpatient	ERYTHROMYCIN ETHYLSUCCINATE 200 MG/5ML PO SUSR	24338-134-02	A9270	\$11.06	\$10.84	\$10.95	\$10.21	\$10.84
Inpatient/Outpatient	ERYTHROMYCIN ETHYLSUCCINATE 200 MG/5ML PO SUSR	62559-630-01	A9270	\$6.82	\$6.68	\$6.75	\$6.29	\$6.68
Inpatient/Outpatient	ERYTHROMYCIN ETHYLSUCCINATE 200 MG/5ML PO SUSR	69238-1503-1	A9270	\$6.04	\$5.92	\$5.98	\$5.57	\$5.92
Inpatient/Outpatient	ERYTHROMYCIN ETHYLSUCCINATE 200 MG/5ML PO SUSR	0254-1020-47	A9270	\$4.68	\$4.59	\$4.63	\$4.32	\$4.59
Inpatient/Outpatient	ERYTHROMYCIN LACTOBIONATE 500 MG IV SOLR	0409-6482-01	J1364	\$352.53	\$345.48	\$349.00	\$325.39	\$345.48
Inpatient/Outpatient	ERYTHROMYCIN LACTOBIONATE 500 MG IV SOLR	0409-6482-11	J1364	\$321.68	\$315.25	\$318.46	\$296.91	\$315.25
Inpatient/Outpatient	ERYTHROMYCIN LACTOBIONATE 500 MG IV SOLR	14789-116-05	J1364	\$316.63	\$310.30	\$313.46	\$292.25	\$310.30
Inpatient/Outpatient	ESTROGENS CONJUGATED 1.25 MG PO TABS	0046-1104-81	A9270	\$28.88	\$28.30	\$28.59	\$26.66	\$28.30

Inpatient/Outpatient	ETHYL CHLORIDE EX AERO	0386-0001-02	A9270	\$1.08	\$1.06	\$1.07	\$1.00	\$1.06
Inpatient/Outpatient	EYE STREAM OP SOLN	0065-0530-04	A9270	\$1.08	\$1.06	\$1.07	\$1.00	\$1.06
Inpatient/Outpatient	FENTANYL CITRATE 50 MCG/ML II SOLN (WRAP)	0409-9094-28	J3010	\$1.09	\$1.07	\$1.08	\$1.01	\$1.07
Inpatient/Outpatient	FENTANYL CITRATE 50 MCG/ML II SOLN (WRAP)	0409-9093-32	J3010	\$1.45	\$1.42	\$1.44	\$1.34	\$1.42
Inpatient/Outpatient	FENTANYL CITRATE 50 MCG/ML II SOLN (WRAP)	0409-9093-37	J3010	\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	FENTANYL CITRATE 50 MCG/ML II SOLN (WRAP)	0409-9094-22	J3010	\$1.52	\$1.49	\$1.50	\$1.40	\$1.49
Inpatient/Outpatient	FENTANYL CITRATE 50 MCG/ML II SOLN (WRAP)	0409-9094-12	J3010	\$1.11	\$1.09	\$1.10	\$1.02	\$1.09
Inpatient/Outpatient	FENTANYL CITRATE 50 MCG/ML II SOLN (WRAP)	0641-6028-01	J3010	\$2.00	\$1.96	\$1.98	\$1.85	\$1.96
Inpatient/Outpatient	FENTANYL CITRATE 50 MCG/ML II SOLN (WRAP)	0641-6025-10	J3010	\$2.18	\$2.14	\$2.16	\$2.01	\$2.14
Inpatient/Outpatient	FENTANYL CITRATE 50 MCG/ML II SOLN (WRAP)	9999-9094-42	J3010	\$1.45	\$1.42	\$1.44	\$1.34	\$1.42
Inpatient/Outpatient	FENTANYL CITRATE 50 MCG/ML II SOLN (WRAP)	9999-9094-52	J3010	\$1.45	\$1.42	\$1.44	\$1.34	\$1.42
Inpatient/Outpatient	FENTANYL CITRATE 50 MCG/ML II SOLN (WRAP)	99999-9093-2	J3010	\$1.45	\$1.42	\$1.44	\$1.34	\$1.42
Inpatient/Outpatient	FENTANYL CITRATE 50 MCG/ML II SOLN (WRAP)	0409-9093-35	J3010	\$0.92	\$0.90	\$0.91	\$0.85	\$0.90
Inpatient/Outpatient	FENTANYL CITRATE 50 MCG/ML II SOLN (WRAP)	17478-030-55	J3010	\$2.31	\$2.26	\$2.29	\$2.13	\$2.26
Inpatient/Outpatient	FENTANYL CITRATE 50 MCG/ML II SOLN (WRAP)	17478-030-05	J3010	\$2.05	\$2.01	\$2.03	\$1.89	\$2.01
Inpatient/Outpatient	FENTANYL CITRATE 50 MCG/ML II SOLN (WRAP)	0641-6030-01	J3010	\$1.52	\$1.49	\$1.50	\$1.40	\$1.49
Inpatient/Outpatient	FENTANYL CITRATE 50 MCG/ML II SOLN (WRAP)	0409-9094-61	J3010	\$0.82	\$0.80	\$0.81	\$0.76	\$0.80
Inpatient/Outpatient	FENTANYL CITRATE 50 MCG/ML II SOLN (WRAP)	0409-9093-45	J3010	\$0.93	\$0.91	\$0.92	\$0.86	\$0.91
Inpatient/Outpatient	FENTANYL CITRATE 50 MCG/ML II SOLN (WRAP)	63323-806-14	J3010	\$0.82	\$0.80	\$0.81	\$0.76	\$0.80
Inpatient/Outpatient	FENTANYL CITRATE 50 MCG/ML II SOLN (WRAP)	0409-9094-18	J3010	\$1.70	\$1.67	\$1.68	\$1.57	\$1.67
Inpatient/Outpatient	FENTANYL CITRATE 50 MCG/ML II SOLN (WRAP)	0409-9094-41	J3010	\$0.41	\$0.40	\$0.41	\$0.38	\$0.40
Inpatient/Outpatient	FENTANYL CITRATE 50 MCG/ML II SOLN (WRAP)	0641-6027-01	J3010	\$3.47	\$3.40	\$3.44	\$3.20	\$3.40
Inpatient/Outpatient	FENTANYL CITRATE 50 MCG/ML II SOLN (WRAP)	63323-806-12	J3010	\$3.08	\$3.02	\$3.05	\$2.84	\$3.02
Inpatient/Outpatient	FENTANYL CITRATE 50 MCG/ML II SOLN (WRAP)	63323-806-13	J3010	\$1.32	\$1.29	\$1.31	\$1.22	\$1.29
Inpatient/Outpatient	FENTANYL CITRATE 50 MCG/ML II SOLN (WRAP)	0641-6027-25	J3010	\$3.47	\$3.40	\$3.44	\$3.20	\$3.40
Inpatient/Outpatient	MONSELS FERRIC SUBSULFATE EX SOLN (WRAP)	10481-0112-8		\$6.55	\$6.42	\$6.48	\$6.05	\$6.42
Inpatient/Outpatient	MONSELS FERRIC SUBSULFATE EX SOLN (WRAP)	10481-0112-2		\$1.28	\$1.25	\$1.27	\$1.18	\$1.25
Inpatient/Outpatient	FERROUS GLUCONATE 324 (38 FE) MG PO TABS	0574-0508-01	A9150	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	FERROUS GLUCONATE 324 (38 FE) MG PO TABS	0574-0508-11	A9150	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	FERROUS SULFATE 300 (60 FE) MG/5ML PO SYRP	0121-0530-05	A9150	\$2.95	\$2.89	\$2.92	\$2.72	\$2.89
Inpatient/Outpatient	FERROUS SULFATE 300 (60 FE) MG/5ML PO SYRP	39328-157-05	A9150	\$1.39	\$1.36	\$1.38	\$1.28	\$1.36
Inpatient/Outpatient	FLEET ENEMA 7-19 GM/118ML RE ENEM	0132-0201-40	A9150	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	FLEET ENEMA 7-19 GM/118ML RE ENEM	0536-7415-51	A9150	\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	FLEET ENEMA 7-19 GM/118ML RE ENEM	0904-6320-78	A9150	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	FLEET ENEMA 7-19 GM/118ML RE ENEM	49348-186-20	A9150	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	FLEET PEDIATRIC 3.5-9.5 GM/59ML RE ENEM	0132-0202-20	A9150	\$0.08	\$0.08	\$0.08	\$0.07	\$0.08
Inpatient/Outpatient	FLUOCINONIDE 0.05 % EX CREA	0168-0139-30	A9270	\$10.97	\$10.75	\$10.86	\$10.13	\$10.75
Inpatient/Outpatient	FLUOCINONIDE 0.05 % EX CREA	51672-1253-1	A9270	\$7.98	\$7.82	\$7.90	\$7.37	\$7.82
Inpatient/Outpatient	FLUOCINONIDE 0.05 % EX CREA	51672-1253-2	A9270	\$7.98	\$7.82	\$7.90	\$7.37	\$7.82
Inpatient/Outpatient	FLUOCINONIDE 0.05 % EX CREA	51672-1253-3	A9270	\$7.98	\$7.82	\$7.90	\$7.37	\$7.82
Inpatient/Outpatient	FLUOCINONIDE 0.05 % EX CREA	0093-0262-15	A9270	\$3.87	\$3.79	\$3.83	\$3.57	\$3.79
Inpatient/Outpatient	FLUOCINONIDE 0.05 % EX CREA	51672-1386-1	A9270	\$2.64	\$2.59	\$2.61	\$2.44	\$2.59
Inpatient/Outpatient	FLUOCINONIDE 0.05 % EX CREA	69238-1534-5	A9270	\$2.44	\$2.39	\$2.42	\$2.25	\$2.39
Inpatient/Outpatient	ACETAZOLAMIDE 25 MG/ML ORAL SUSPENSION	99999-025-00	A9270	\$4.91	\$4.81	\$4.86	\$4.53	\$4.81
Inpatient/Outpatient	FLUOCINONIDE 0.05 % EX OINT	0093-0264-15	A9270	\$5.81	\$5.69	\$5.75	\$5.36	\$5.69
Inpatient/Outpatient	FLUOCINONIDE 0.05 % EX OINT	52959-315-01	A9270	\$7.18	\$7.04	\$7.11	\$6.63	\$7.04
Inpatient/Outpatient	FLUOCINONIDE 0.05 % EX OINT	51672-1264-1	A9270	\$3.89	\$3.81	\$3.85	\$3.59	\$3.81
Inpatient/Outpatient	FLUOCINONIDE 0.05 % EX OINT	43199-029-15	A9270	\$12.42	\$12.17	\$12.30	\$11.46	\$12.17
Inpatient/Outpatient	FLUOCINONIDE 0.05 % EX OINT	16714-502-01	A9270	\$3.38	\$3.31	\$3.35	\$3.12	\$3.31
Inpatient/Outpatient	FLUOROMETHOLONE 0.1 % OP SUSP	60758-880-05	A9270	\$64.04	\$62.76	\$63.40	\$59.11	\$62.76
Inpatient/Outpatient	FLUPHENAZINE HCL 1 MG PO TABS	0378-6004-01	A9270	\$0.87	\$0.85	\$0.86	\$0.80	\$0.85
Inpatient/Outpatient	FLUPHENAZINE HCL 1 MG PO TABS	0527-1788-01	A9270	\$7.20	\$7.06	\$7.13	\$6.65	\$7.06
Inpatient/Outpatient	FLUPHENAZINE HCL 1 MG PO TABS	0904-7157-61	A9270	\$9.54	\$9.35	\$9.44	\$8.81	\$9.35
Inpatient/Outpatient	FLUPHENAZINE HCL 2.5 MG PO TABS	51079-486-01	A9270	\$4.35	\$4.26	\$4.31	\$4.02	\$4.26
Inpatient/Outpatient	FLUPHENAZINE HCL 2.5 MG PO TABS	51079-486-20	A9270	\$2.39	\$2.34	\$2.37	\$2.21	\$2.34
Inpatient/Outpatient	FLUPHENAZINE HCL 2.5 MG PO TABS	0378-6009-01	A9270	\$1.34	\$1.31	\$1.33	\$1.24	\$1.31
Inpatient/Outpatient	FLUPHENAZINE HCL 2.5 MG PO TABS	0527-1789-01	A9270	\$11.14	\$10.92	\$11.03	\$10.28	\$10.92
Inpatient/Outpatient	FLUPHENAZINE HCL 2.5 MG PO TABS	69238-1679-1	A9270	\$10.41	\$10.20	\$10.31	\$9.61	\$10.20
Inpatient/Outpatient	FLUPHENAZINE HCL 2.5 MG PO TABS	16714-003-01	A9270	\$4.93	\$4.83	\$4.88	\$4.55	\$4.83
Inpatient/Outpatient	FLUPHENAZINE HCL 2.5 MG PO TABS	10135-726-01	A9270	\$6.97	\$6.83	\$6.90	\$6.43	\$6.83
Inpatient/Outpatient	FLUPHENAZINE HCL 2.5 MG PO TABS	70954-274-10	A9270	\$1.49	\$1.46	\$1.48	\$1.38	\$1.46
Inpatient/Outpatient	FLUPHENAZINE HCL 2.5 MG PO TABS	0904-7158-61	A9270	\$11.92	\$11.68	\$11.80	\$11.00	\$11.68
Inpatient/Outpatient	IMIPENEM-CILASTATIN 250 MG IV SOLR	63323-349-94	J0743	\$26.82	\$26.28	\$26.55	\$24.75	\$26.28
Inpatient/Outpatient	FOLIC ACID 5 MG/ML II SOLN	63323-184-10		\$10.42	\$10.21	\$10.32	\$9.62	\$10.21
Inpatient/Outpatient	FOLIC ACID 5 MG/ML II SOLN	39822-1100-1		\$9.50	\$9.31	\$9.41	\$8.77	\$9.31
Inpatient/Outpatient	FOLIC ACID 1 MG PO TABS	51079-105-01	A9270	\$0.43	\$0.42	\$0.43	\$0.40	\$0.42
Inpatient/Outpatient	FOLIC ACID 1 MG PO TABS	62584-897-11	A9270	\$0.59	\$0.58	\$0.58	\$0.54	\$0.58
Inpatient/Outpatient	FOLIC ACID 1 MG PO TABS	63739-537-10	A9270	\$0.20	\$0.20	\$0.20	\$0.18	\$0.20

Inpatient/Outpatient	FOLIC ACID 1 MG PO TABS	55154-2538-7	A9270	\$0.29	\$0.28	\$0.29	\$0.27	\$0.28
Inpatient/Outpatient	FOLIC ACID 1 MG PO TABS	11534-165-03	A9270	\$0.08	\$0.08	\$0.08	\$0.07	\$0.08
Inpatient/Outpatient	FOLIC ACID 1 MG PO TABS	65162-361-10	A9270	\$0.21	\$0.21	\$0.21	\$0.19	\$0.21
Inpatient/Outpatient	FOLIC ACID 1 MG PO TABS	69315-127-10	A9270	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	FOLIC ACID 1 MG PO TABS	53746-361-01	A9270	\$0.21	\$0.21	\$0.21	\$0.19	\$0.21
Inpatient/Outpatient	FOLIC ACID 1 MG PO TABS	0904-7224-61	A9270	\$0.54	\$0.53	\$0.53	\$0.50	\$0.53
Inpatient/Outpatient	FOLIC ACID 1 MG PO TABS	60687-681-11	A9270	\$0.55	\$0.54	\$0.54	\$0.51	\$0.54
Inpatient/Outpatient	FUROSEMIDE 10 MG/ML IJ SOLN	0409-6102-04	J1940	\$2.35	\$2.30	\$2.33	\$2.17	\$2.30
Inpatient/Outpatient	FUROSEMIDE 10 MG/ML IJ SOLN	63323-280-04	J1940	\$1.03	\$1.01	\$1.02	\$0.95	\$1.01
Inpatient/Outpatient	FUROSEMIDE 10 MG/ML IJ SOLN	63323-280-26	J1940	\$1.03	\$1.01	\$1.02	\$0.95	\$1.01
Inpatient/Outpatient	FUROSEMIDE 10 MG/ML IJ SOLN	63323-280-36	J1940	\$0.62	\$0.61	\$0.61	\$0.57	\$0.61
Inpatient/Outpatient	FUROSEMIDE 10 MG/ML IJ SOLN	23155-473-32	J1940	\$2.73	\$2.68	\$2.70	\$2.52	\$2.68
Inpatient/Outpatient	FUROSEMIDE 10 MG/ML IJ SOLN	63323-280-03	J1940	\$1.04	\$1.02	\$1.03	\$0.96	\$1.02
Inpatient/Outpatient	FUROSEMIDE 10 MG/ML IJ SOLN	36000-284-25	J1940	\$1.18	\$1.16	\$1.17	\$1.09	\$1.16
Inpatient/Outpatient	FUROSEMIDE 10 MG/ML IJ SOLN	0409-6102-18	J1940	\$3.28	\$3.21	\$3.25	\$3.03	\$3.21
Inpatient/Outpatient	FUROSEMIDE 10 MG/ML IJ SOLN	63323-280-05	J1940	\$0.84	\$0.82	\$0.83	\$0.78	\$0.82
Inpatient/Outpatient	FUROSEMIDE 10 MG/ML IJ SOLN	55150-324-01	J1940	\$0.92	\$0.90	\$0.91	\$0.85	\$0.90
Inpatient/Outpatient	FUROSEMIDE 10 MG/ML IJ SOLN	36000-283-25	J1940	\$2.71	\$2.66	\$2.68	\$2.50	\$2.66
Inpatient/Outpatient	FUROSEMIDE 10 MG/ML IJ SOLN	0409-6102-20	J1940	\$0.51	\$0.50	\$0.50	\$0.47	\$0.50
Inpatient/Outpatient	FUROSEMIDE 10 MG/ML IJ SOLN	71288-203-10	J1940	\$0.68	\$0.67	\$0.67	\$0.63	\$0.67
Inpatient/Outpatient	FUROSEMIDE 10 MG/ML PO SOLN (NICUJ/INFANT/PEDS)	0054-3294-46	A9270	\$0.39	\$0.38	\$0.39	\$0.36	\$0.38
Inpatient/Outpatient	FUROSEMIDE 10 MG/ML PO SOLN (NICUJ/INFANT/PEDS)	0054-3294-50	A9270	\$0.37	\$0.36	\$0.37	\$0.34	\$0.36
Inpatient/Outpatient	FUROSEMIDE 10 MG/ML PO SOLN (NICUJ/INFANT/PEDS)	60432-613-60	A9270	\$0.55	\$0.54	\$0.54	\$0.51	\$0.54
Inpatient/Outpatient	BUPIVACAINE-EPINEPHRINE 0.5% -1:200000 IJ SOLN	63323-463-57		\$0.99	\$0.97	\$0.98	\$0.91	\$0.97
Inpatient/Outpatient	FUROSEMIDE 20 MG PO TABS	51079-072-20	A9270	\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	FUROSEMIDE 20 MG PO TABS	63739-111-01	A9270	\$0.20	\$0.20	\$0.20	\$0.18	\$0.20
Inpatient/Outpatient	FUROSEMIDE 20 MG PO TABS	63739-111-10	A9270	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	FUROSEMIDE 20 MG PO TABS	51079-072-01	A9270	\$0.71	\$0.70	\$0.70	\$0.66	\$0.70
Inpatient/Outpatient	FUROSEMIDE 20 MG PO TABS	0054-4297-25	A9270	\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	FUROSEMIDE 20 MG PO TABS	43547-401-10	A9270	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	FUROSEMIDE 20 MG PO TABS	0054-8297-25	A9270	\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	FUROSEMIDE 40 MG PO TABS	51079-073-20	A9270	\$0.33	\$0.33	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	FUROSEMIDE 40 MG PO TABS	63739-112-01	A9270	\$0.21	\$0.21	\$0.21	\$0.19	\$0.21
Inpatient/Outpatient	FUROSEMIDE 40 MG PO TABS	63739-112-10	A9270	\$0.21	\$0.21	\$0.21	\$0.19	\$0.21
Inpatient/Outpatient	FUROSEMIDE 40 MG PO TABS	51079-073-01	A9270	\$0.82	\$0.80	\$0.81	\$0.76	\$0.80
Inpatient/Outpatient	FUROSEMIDE 40 MG PO TABS	30698-060-01	A9270	\$4.97	\$4.87	\$4.92	\$4.59	\$4.87
Inpatient/Outpatient	FUROSEMIDE 40 MG PO TABS	0172-2907-00	A9270	\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	FUROSEMIDE 40 MG PO TABS	0054-8299-25	A9270	\$0.21	\$0.21	\$0.21	\$0.19	\$0.21
Inpatient/Outpatient	FUROSEMIDE 40 MG PO TABS	0054-4299-25	A9270	\$0.55	\$0.54	\$0.54	\$0.51	\$0.54
Inpatient/Outpatient	FUROSEMIDE 80 MG PO TABS	51079-527-01	A9270	\$2.19	\$2.15	\$2.17	\$2.02	\$2.15
Inpatient/Outpatient	FUROSEMIDE 80 MG PO TABS	51079-527-20	A9270	\$0.52	\$0.51	\$0.51	\$0.48	\$0.51
Inpatient/Outpatient	FUROSEMIDE 80 MG PO TABS	63739-113-10	A9270	\$0.32	\$0.31	\$0.32	\$0.30	\$0.31
Inpatient/Outpatient	FUROSEMIDE 80 MG PO TABS	0054-8301-25	A9270	\$0.68	\$0.67	\$0.67	\$0.63	\$0.67
Inpatient/Outpatient	FUROSEMIDE 80 MG PO TABS	43547-403-10	A9270	\$0.20	\$0.20	\$0.20	\$0.18	\$0.20
Inpatient/Outpatient	GEMFIBROZIL 600 MG PO TABS	50268-350-11	A9270	\$0.91	\$0.89	\$0.90	\$0.84	\$0.89
Inpatient/Outpatient	GEMFIBROZIL 600 MG PO TABS	0093-0670-05	A9270	\$0.79	\$0.77	\$0.78	\$0.73	\$0.77
Inpatient/Outpatient	GEMFIBROZIL 600 MG PO TABS	60687-224-11	A9270	\$0.83	\$0.81	\$0.82	\$0.77	\$0.81
Inpatient/Outpatient	GENTAMICIN SULFATE 0.1 % EX CREA	0168-0071-15	A9270	\$1.06	\$1.04	\$1.05	\$0.98	\$1.04
Inpatient/Outpatient	GENTAMICIN SULFATE 0.1 % EX CREA	52565-085-15	A9270	\$4.17	\$4.09	\$4.13	\$3.85	\$4.09
Inpatient/Outpatient	GENTAMICIN SULFATE 0.1 % EX CREA	45802-056-35	A9270	\$2.05	\$2.01	\$2.03	\$1.89	\$2.01
Inpatient/Outpatient	GENTAMICIN SULFATE 10 MG/ML IJ SOLN	63323-513-02	J1580	\$9.80	\$9.60	\$9.70	\$9.05	\$9.60
Inpatient/Outpatient	GENTAMICIN SULFATE 10 MG/ML IJ SOLN	63323-173-02	J1580	\$4.07	\$3.99	\$4.03	\$3.76	\$3.99
Inpatient/Outpatient	GENTAMICIN SULFATE 10 MG/ML IJ SOLN	63323-173-94	J1580	\$4.28	\$4.19	\$4.24	\$3.95	\$4.19
Inpatient/Outpatient	GENTAMICIN SULFATE 40 MG/ML IJ SOLN	0409-1207-03	J1580	\$2.44	\$2.39	\$2.42	\$2.25	\$2.39
Inpatient/Outpatient	GENTAMICIN SULFATE 40 MG/ML IJ SOLN	63323-010-02	J1580	\$2.38	\$2.33	\$2.36	\$2.20	\$2.33
Inpatient/Outpatient	GENTAMICIN SULFATE 40 MG/ML IJ SOLN	63323-010-20	J1580	\$4.89	\$4.79	\$4.84	\$4.51	\$4.79
Inpatient/Outpatient	GENTAMICIN SULFATE 40 MG/ML IJ SOLN	63323-010-95	J1580	\$5.13	\$5.03	\$5.08	\$4.73	\$5.03
Inpatient/Outpatient	GENTAMICIN SULFATE 40 MG/ML IJ SOLN	63323-010-94	J1580	\$2.38	\$2.33	\$2.36	\$2.20	\$2.33
Inpatient/Outpatient	GENTAMICIN SULFATE 40 MG/ML IJ SOLN	63323-010-42	J1580	\$4.89	\$4.79	\$4.84	\$4.51	\$4.79
Inpatient/Outpatient	GENTAMICIN SULFATE 40 MG/ML IJ SOLN	63323-010-01	J1580	\$1.45	\$1.42	\$1.44	\$1.34	\$1.42
Inpatient/Outpatient	GENTAMICIN SULFATE 40 MG/ML IJ SOLN	63323-010-03	J1580	\$4.89	\$4.79	\$4.84	\$4.51	\$4.79
Inpatient/Outpatient	GENTIAN VIOLET 1 % EX SOLN	0395-1003-92	A9270	\$0.48	\$0.47	\$0.48	\$0.44	\$0.47
Inpatient/Outpatient	GLYBURIDE 5 MG PO TABS	51079-873-01	A9270	\$2.58	\$2.53	\$2.55	\$2.38	\$2.53
Inpatient/Outpatient	GLYBURIDE 5 MG PO TABS	51079-873-20	A9270	\$1.17	\$1.15	\$1.16	\$1.08	\$1.15
Inpatient/Outpatient	GLYBURIDE 5 MG PO TABS	63739-119-10	A9270	\$0.52	\$0.51	\$0.51	\$0.48	\$0.51
Inpatient/Outpatient	METHADONE HCL 10 MG/ML IJ SOLN	17478-380-20	J1230	\$62.72	\$61.47	\$62.09	\$57.89	\$61.47
Inpatient/Outpatient	METHADONE HCL 10 MG/ML IJ SOLN	67457-217-20	J1230	\$55.57	\$54.46	\$55.01	\$51.29	\$54.46
Inpatient/Outpatient	METHADONE HCL 10 MG/ML IJ SOLN	99999-380-01	J1230	\$62.72	\$61.47	\$62.09	\$57.89	\$61.47

Inpatient/Outpatient	GLYCINE UROLOGIC 1.5 % IR SOLN	0338-0289-47		\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	GLYCOPYRROLATE 0.2 MG/ML IJ SOLN	10019-016-39		\$0.73	\$0.72	\$0.72	\$0.67	\$0.72
Inpatient/Outpatient	GLYCOPYRROLATE 0.2 MG/ML IJ SOLN	10019-016-81		\$2.62	\$2.57	\$2.59	\$2.42	\$2.57
Inpatient/Outpatient	GLYCOPYRROLATE 0.2 MG/ML IJ SOLN	54868-3231-1		\$6.11	\$5.99	\$6.05	\$5.64	\$5.99
Inpatient/Outpatient	GLYCOPYRROLATE 0.2 MG/ML IJ SOLN	60977-155-01		\$6.21	\$6.09	\$6.15	\$5.73	\$6.09
Inpatient/Outpatient	GLYCOPYRROLATE 0.2 MG/ML IJ SOLN	0517-4601-25		\$8.82	\$8.64	\$8.73	\$8.14	\$8.64
Inpatient/Outpatient	GLYCOPYRROLATE 0.2 MG/ML IJ SOLN	63323-578-41		\$11.04	\$10.82	\$10.93	\$10.19	\$10.82
Inpatient/Outpatient	GLYCOPYRROLATE 0.2 MG/ML IJ SOLN	0781-3825-71		\$5.84	\$5.72	\$5.78	\$5.39	\$5.72
Inpatient/Outpatient	GUAIFENESIN 100 MG/5ML PO SYRP	0536-0825-97	A9150	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	GUAIFENESIN 100 MG/5ML PO SYRP	0536-1314-85	A9150	\$0.04	\$0.04	\$0.04	\$0.04	\$0.04
Inpatient/Outpatient	GUAIFENESIN 100 MG/5ML PO SYRP	54838-117-80	A9150	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	HALOPERIDOL 1 MG PO TABS	51079-734-20	A9270	\$1.86	\$1.82	\$1.84	\$1.72	\$1.82
Inpatient/Outpatient	HALOPERIDOL 1 MG PO TABS	51079-734-01	A9270	\$0.44	\$0.43	\$0.44	\$0.41	\$0.43
Inpatient/Outpatient	HALOPERIDOL 1 MG PO TABS	0781-1392-13	A9270	\$0.66	\$0.65	\$0.65	\$0.61	\$0.65
Inpatient/Outpatient	HALOPERIDOL 1 MG PO TABS	0904-5923-61	A9270	\$1.32	\$1.29	\$1.31	\$1.22	\$1.29
Inpatient/Outpatient	HALOPERIDOL 1 MG PO TABS	0781-1392-01	A9270	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	HALOPERIDOL 5 MG PO TABS	0781-1396-13	A9270	\$1.42	\$1.39	\$1.41	\$1.31	\$1.39
Inpatient/Outpatient	HALOPERIDOL 5 MG PO TABS	51079-736-20	A9270	\$2.09	\$2.05	\$2.07	\$1.93	\$2.05
Inpatient/Outpatient	HALOPERIDOL 5 MG PO TABS	51079-736-01	A9270	\$0.60	\$0.59	\$0.59	\$0.55	\$0.59
Inpatient/Outpatient	HALOPERIDOL 5 MG PO TABS	60687-161-11	A9270	\$2.53	\$2.48	\$2.50	\$2.34	\$2.48
Inpatient/Outpatient	HALOPERIDOL 5 MG PO TABS	0781-1396-01	A9270	\$3.72	\$3.65	\$3.68	\$3.43	\$3.65
Inpatient/Outpatient	HALOPERIDOL 5 MG PO TABS	68382-079-01	A9270	\$2.83	\$2.77	\$2.80	\$2.61	\$2.77
Inpatient/Outpatient	HALOPERIDOL 5 MG PO TABS	0378-0327-10	A9270	\$3.92	\$3.84	\$3.88	\$3.62	\$3.84
Inpatient/Outpatient	HALOPERIDOL LACTATE 5 MG/ML IJ SOLN	63323-474-01	J1630	\$3.57	\$3.50	\$3.53	\$3.30	\$3.50
Inpatient/Outpatient	HALOPERIDOL LACTATE 5 MG/ML IJ SOLN	67457-426-00	J1630	\$3.11	\$3.05	\$3.08	\$2.87	\$3.05
Inpatient/Outpatient	HALOPERIDOL LACTATE 5 MG/ML IJ SOLN	50458-255-01	J1630	\$93.38	\$91.51	\$92.45	\$86.19	\$91.51
Inpatient/Outpatient	HALOPERIDOL LACTATE 5 MG/ML IJ SOLN	25021-806-01	J1630	\$6.44	\$6.31	\$6.38	\$5.94	\$6.31
Inpatient/Outpatient	HALOPERIDOL LACTATE 5 MG/ML IJ SOLN	0143-9501-01	J1630	\$2.50	\$2.45	\$2.48	\$2.31	\$2.45
Inpatient/Outpatient	HALOPERIDOL LACTATE 5 MG/ML IJ SOLN	0143-9319-01	J1630	\$1.81	\$1.77	\$1.79	\$1.67	\$1.77
Inpatient/Outpatient	HALOPERIDOL LACTATE 5 MG/ML IJ SOLN	63323-474-00	J1630	\$27.09	\$26.55	\$26.82	\$25.00	\$26.55
Inpatient/Outpatient	HALOPERIDOL LACTATE 2 MG/ML PO CONC	0121-0581-04	A9270	\$0.87	\$0.85	\$0.86	\$0.80	\$0.85
Inpatient/Outpatient	HALOPERIDOL LACTATE 2 MG/ML PO CONC	54838-501-40	A9270	\$0.83	\$0.81	\$0.82	\$0.77	\$0.81
Inpatient/Outpatient	HALOPERIDOL LACTATE 2 MG/ML PO CONC	0121-0581-05	A9270	\$1.97	\$1.93	\$1.95	\$1.82	\$1.93
Inpatient/Outpatient	HEPARIN SOD (PORK) LOCK FLUSH 100 UNIT/ML IV SOLN	8290-306516	J1642	\$0.89	\$0.87	\$0.88	\$0.82	\$0.87
Inpatient/Outpatient	HEPARIN SOD (PORK) LOCK FLUSH 100 UNIT/ML IV SOLN	8290-306423	J1642	\$0.55	\$0.54	\$0.54	\$0.51	\$0.54
Inpatient/Outpatient	HYDRALAZINE HCL 20 MG/ML IJ SOLN	0517-0901-25	J0360	\$29.90	\$29.30	\$29.60	\$27.60	\$29.30
Inpatient/Outpatient	HYDRALAZINE HCL 20 MG/ML IJ SOLN	63323-614-01	J0360	\$15.41	\$15.10	\$15.26	\$14.22	\$15.10
Inpatient/Outpatient	HYDRALAZINE HCL 20 MG/ML IJ SOLN	63323-614-16	J0360	\$15.33	\$15.02	\$15.18	\$14.15	\$15.02
Inpatient/Outpatient	HYDRALAZINE HCL 20 MG/ML IJ SOLN	63323-614-00	J0360	\$10.39	\$10.18	\$10.29	\$9.59	\$10.18
Inpatient/Outpatient	HYDRALAZINE HCL 20 MG/ML IJ SOLN	0517-0901-01	J0360	\$67.85	\$66.49	\$67.17	\$62.63	\$66.49
Inpatient/Outpatient	HYDRALAZINE HCL 20 MG/ML IJ SOLN	17478-934-01	J0360	\$206.36	\$202.23	\$204.30	\$190.47	\$202.23
Inpatient/Outpatient	HYDRALAZINE HCL 20 MG/ML IJ SOLN	0641-6231-01	J0360	\$27.37	\$26.82	\$27.10	\$25.26	\$26.82
Inpatient/Outpatient	HYDRALAZINE HCL 10 MG PO TABS	0182-0905-00	A9270	\$0.81	\$0.79	\$0.80	\$0.75	\$0.79
Inpatient/Outpatient	HYDRALAZINE HCL 10 MG PO TABS	0182-0905-89	A9270	\$1.03	\$1.01	\$1.02	\$0.95	\$1.01
Inpatient/Outpatient	HYDRALAZINE HCL 10 MG PO TABS	68084-447-11	A9270	\$0.70	\$0.69	\$0.69	\$0.65	\$0.69
Inpatient/Outpatient	HYDRALAZINE HCL 10 MG PO TABS	0904-6440-61	A9270	\$0.36	\$0.35	\$0.36	\$0.33	\$0.35
Inpatient/Outpatient	HYDRALAZINE HCL 25 MG PO TABS	0182-0554-89	A9270	\$0.74	\$0.73	\$0.73	\$0.68	\$0.73
Inpatient/Outpatient	HYDRALAZINE HCL 25 MG PO TABS	51079-075-20	A9270	\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	HYDRALAZINE HCL 25 MG PO TABS	0182-0554-00	A9270	\$1.27	\$1.24	\$1.26	\$1.17	\$1.24
Inpatient/Outpatient	HYDRALAZINE HCL 25 MG PO TABS	62584-733-11	A9270	\$0.84	\$0.82	\$0.83	\$0.78	\$0.82
Inpatient/Outpatient	HYDRALAZINE HCL 25 MG PO TABS	62584-733-01	A9270	\$0.54	\$0.53	\$0.53	\$0.50	\$0.53
Inpatient/Outpatient	HYDRALAZINE HCL 25 MG PO TABS	50111-327-01	A9270	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	HYDRALAZINE HCL 25 MG PO TABS	63739-126-10	A9270	\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	HYDRALAZINE HCL 25 MG PO TABS	0904-6441-61	A9270	\$0.43	\$0.42	\$0.43	\$0.40	\$0.42
Inpatient/Outpatient	HYDRALAZINE HCL 25 MG PO TABS	51079-075-01	A9270	\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	HYDRALAZINE HCL 25 MG PO TABS	63739-327-10	A9270	\$0.39	\$0.38	\$0.39	\$0.36	\$0.38
Inpatient/Outpatient	HYDRALAZINE HCL 25 MG PO TABS	76282-310-01	A9270	\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	HYDRALAZINE HCL 50 MG PO TABS	0182-0555-00	A9270	\$1.14	\$1.12	\$1.13	\$1.05	\$1.12
Inpatient/Outpatient	HYDRALAZINE HCL 50 MG PO TABS	51079-076-20	A9270	\$0.67	\$0.66	\$0.66	\$0.62	\$0.66
Inpatient/Outpatient	HYDRALAZINE HCL 50 MG PO TABS	0182-0555-89	A9270	\$1.64	\$1.61	\$1.62	\$1.51	\$1.61
Inpatient/Outpatient	HYDRALAZINE HCL 50 MG PO TABS	62584-734-01	A9270	\$0.80	\$0.78	\$0.79	\$0.74	\$0.78
Inpatient/Outpatient	HYDRALAZINE HCL 50 MG PO TABS	63739-127-10	A9270	\$0.51	\$0.50	\$0.50	\$0.47	\$0.50
Inpatient/Outpatient	HYDRALAZINE HCL 50 MG PO TABS	62584-734-11	A9270	\$1.07	\$1.05	\$1.06	\$0.99	\$1.05
Inpatient/Outpatient	HYDRALAZINE HCL 50 MG PO TABS	0904-6442-61	A9270	\$0.40	\$0.39	\$0.40	\$0.37	\$0.39
Inpatient/Outpatient	HYDRALAZINE HCL 50 MG PO TABS	50111-328-01	A9270	\$0.20	\$0.20	\$0.20	\$0.18	\$0.20
Inpatient/Outpatient	HYDRALAZINE HCL 50 MG PO TABS	64380-735-06	A9270	\$0.22	\$0.22	\$0.22	\$0.20	\$0.22
Inpatient/Outpatient	HYDRALAZINE HCL 50 MG PO TABS	31722-521-01	A9270	\$0.92	\$0.90	\$0.91	\$0.85	\$0.90
Inpatient/Outpatient	HYDRALAZINE HCL 50 MG PO TABS	63739-328-10	A9270	\$0.42	\$0.41	\$0.42	\$0.39	\$0.41

Inpatient/Outpatient	HYDRALAZINE HCL 50 MG PO TABS	76282-311-01	A9270	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	HYDRALAZINE HCL 50 MG PO TABS	51079-076-01	A9270	\$0.67	\$0.66	\$0.66	\$0.62	\$0.66
Inpatient/Outpatient	HYDROCHLOROTHIAZIDE 25 MG PO TABS	16729-183-01	A9270	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	HYDROCHLOROTHIAZIDE 25 MG PO TABS	29300-128-01	A9270	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	HYDROCHLOROTHIAZIDE 25 MG PO TABS	0172-2083-60	A9270	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	HYDROCHLOROTHIAZIDE 50 MG PO TABS	16729-184-01	A9270	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	HYDROCODONE BIT-HOMATROP MBR 5-1.5 MG/5ML PO SOLN	0121-4811-05	A9270	\$2.38	\$2.33	\$2.36	\$2.20	\$2.33
Inpatient/Outpatient	HYDROCODONE BIT-HOMATROP MBR 5-1.5 MG/5ML PO SOLN	0472-1030-16	A9270	\$0.67	\$0.66	\$0.66	\$0.62	\$0.66
Inpatient/Outpatient	HYDROCODONE BIT-HOMATROP MBR 5-1.5 MG/5ML PO SOLN	99999-0455-5	A9270	\$0.72	\$0.71	\$0.71	\$0.66	\$0.71
Inpatient/Outpatient	HYDROCODONE BIT-HOMATROP MBR 5-1.5 MG/5ML PO SOLN	64950-342-05	A9270	\$6.04	\$5.92	\$5.98	\$5.57	\$5.92
Inpatient/Outpatient	HYDROCODONE BIT-HOMATROP MBR 5-1.5 MG/5ML PO SOLN	60432-455-16	A9270	\$0.72	\$0.71	\$0.71	\$0.66	\$0.71
Inpatient/Outpatient	HYDROCORTISONE 0.5 % EX CREA	0168-0014-31	A9150	\$0.38	\$0.37	\$0.38	\$0.35	\$0.37
Inpatient/Outpatient	HYDROCORTISONE 2.5 % EX LOTN	0168-0288-02	A9270	\$0.86	\$0.84	\$0.85	\$0.79	\$0.84
Inpatient/Outpatient	HYDROCORTISONE 2.5 % EX LOTN	0603-7785-52	A9270	\$1.29	\$1.26	\$1.28	\$1.19	\$1.26
Inpatient/Outpatient	HYDROCORTISONE 2.5 % EX LOTN	45802-937-16	A9270	\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	HYDROCORTISONE 2.5 % EX LOTN	45802-937-26	A9270	\$1.26	\$1.23	\$1.25	\$1.16	\$1.23
Inpatient/Outpatient	HYDROCORTISONE 0.5 % EX OINT	0168-0016-31	A9150	\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	HYDROCORTISONE 1 % EX OINT	0168-0020-31	A9150	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	HYDROCORTISONE 1 % EX OINT	11822-3143-20	A9150	\$1.19	\$1.17	\$1.18	\$1.10	\$1.17
Inpatient/Outpatient	HYDROCORTISONE 1 % EX OINT	0472-0345-56	A9150	\$0.21	\$0.21	\$0.21	\$0.19	\$0.21
Inpatient/Outpatient	HYDROCORTISONE 1 % EX OINT	0472-1326-26	A9150	\$0.50	\$0.49	\$0.50	\$0.46	\$0.49
Inpatient/Outpatient	HYDROCORTISONE 1 % EX OINT	0168-0181-31	A9150	\$0.48	\$0.47	\$0.48	\$0.44	\$0.47
Inpatient/Outpatient	HYDROCORTISONE 1 % EX OINT	45802-276-03	A9150	\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	HYDROCORTISONE 1 % EX OINT	61269-345-56	A9150	\$0.21	\$0.21	\$0.21	\$0.19	\$0.21
Inpatient/Outpatient	HYDROCORTISONE 2.5 % EX OINT	45802-014-02	A9270	\$0.38	\$0.37	\$0.38	\$0.35	\$0.37
Inpatient/Outpatient	HYDROCORTISONE 2.5 % EX OINT	0168-0146-30	A9270	\$0.49	\$0.48	\$0.49	\$0.45	\$0.48
Inpatient/Outpatient	HYDROCORTISONE 10 MG PO TABS	0009-0031-01	A9270	\$7.68	\$7.53	\$7.60	\$7.09	\$7.53
Inpatient/Outpatient	HYDROCORTISONE 10 MG PO TABS	0603-3900-21	A9270	\$2.20	\$2.16	\$2.18	\$2.03	\$2.16
Inpatient/Outpatient	HYDROCORTISONE 10 MG PO TABS	42543-141-01	A9270	\$0.93	\$0.91	\$0.92	\$0.86	\$0.91
Inpatient/Outpatient	HYDROCORTISONE 10 MG PO TABS	64380-971-06	A9270	\$1.35	\$1.32	\$1.34	\$1.25	\$1.32
Inpatient/Outpatient	HYDROCORTISONE 10 MG PO TABS	59762-0074-1	A9270	\$1.07	\$1.05	\$1.06	\$0.99	\$1.05
Inpatient/Outpatient	HYDROCORTISONE 10 MG PO TABS	60687-582-11	A9270	\$6.20	\$6.08	\$6.14	\$5.72	\$6.08
Inpatient/Outpatient	HYDROCORTISONE 10 MG PO TABS	0904-7188-61	A9270	\$5.81	\$5.69	\$5.75	\$5.36	\$5.69
Inpatient/Outpatient	HYDROCORTISONE 20 MG PO TABS	0143-1254-01	A9270	\$4.10	\$4.02	\$4.06	\$3.78	\$4.02
Inpatient/Outpatient	HYDROCORTISONE 20 MG PO TABS	0904-2674-60	A9270	\$2.20	\$2.16	\$2.18	\$2.03	\$2.16
Inpatient/Outpatient	HYDROCORTISONE 20 MG PO TABS	0603-3901-21	A9270	\$3.88	\$3.80	\$3.84	\$3.58	\$3.80
Inpatient/Outpatient	HYDROCORTISONE 20 MG PO TABS	59762-0075-1	A9270	\$1.72	\$1.69	\$1.70	\$1.59	\$1.69
Inpatient/Outpatient	HYDROCORTISONE 20 MG PO TABS	42543-142-01	A9270	\$2.50	\$2.45	\$2.48	\$2.31	\$2.45
Inpatient/Outpatient	HYDROCORTISONE ACETATE 25 MG RE SUPP	0713-0503-01	A9270	\$32.09	\$31.45	\$31.77	\$29.62	\$31.45
Inpatient/Outpatient	HYDROCORTISONE ACETATE 25 MG RE SUPP	0713-0503-24	A9270	\$49.94	\$48.94	\$49.44	\$46.09	\$48.94
Inpatient/Outpatient	HYDROCORTISONE ACETATE 25 MG RE SUPP	0713-0503-06	A9270	\$38.27	\$37.50	\$37.89	\$35.32	\$37.50
Inpatient/Outpatient	HYDROCORTISONE ACETATE 25 MG RE SUPP	42494-301-12	A9270	\$8.24	\$8.08	\$8.16	\$7.61	\$8.08
Inpatient/Outpatient	HYDROCORTISONE ACETATE 25 MG RE SUPP	50268-411-12	A9270	\$17.15	\$16.81	\$16.98	\$15.83	\$16.81
Inpatient/Outpatient	HYDROCORTISONE ACETATE 25 MG RE SUPP	39328-029-12	A9270	\$7.54	\$7.39	\$7.46	\$6.96	\$7.39
Inpatient/Outpatient	HYDROCORTISONE SOD SUC (PF) 100 MG IJ SOLR	0009-0011-03	J1720	\$82.18	\$80.54	\$81.36	\$75.85	\$80.54
Inpatient/Outpatient	HYDROCORTISONE SOD SUC (PF) 100 MG IJ SOLR	0009-0825-01	J1720	\$60.41	\$59.20	\$59.81	\$55.76	\$59.20
Inpatient/Outpatient	HYDROGEN PEROXIDE 3 % EX SOLN	49348-031-34	A9150	\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	HYDROGEN PEROXIDE 3 % EX SOLN	49348-031-37	A9150	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	LEVONORGESTREL 1.5 MG PO TABS	52544-065-54	A9270	\$106.48	\$104.35	\$105.42	\$98.28	\$104.35
Inpatient/Outpatient	LEVONORGESTREL 1.5 MG PO TABS	62756-718-60	A9270	\$67.75	\$66.40	\$67.07	\$62.53	\$66.40
Inpatient/Outpatient	LEVONORGESTREL 1.5 MG PO TABS	68180-852-11	A9270	\$97.30	\$95.35	\$96.33	\$89.81	\$95.35
Inpatient/Outpatient	LEVONORGESTREL 1.5 MG PO TABS	16714-809-01	A9270	\$25.86	\$25.34	\$25.60	\$23.87	\$25.34
Inpatient/Outpatient	LEVONORGESTREL 1.5 MG PO TABS	62756-720-60	A9270	\$22.94	\$22.48	\$22.71	\$21.17	\$22.48
Inpatient/Outpatient	HYDROMORPHONE HCL 2 MG/ML IJ SOLN	0641-0121-25	J1170	\$3.18	\$3.12	\$3.15	\$2.94	\$3.12
Inpatient/Outpatient	HYDROMORPHONE HCL 2 MG/ML IJ SOLN	0641-0121-21	J1170	\$3.44	\$3.37	\$3.41	\$3.18	\$3.37
Inpatient/Outpatient	HYDROMORPHONE HCL 2 MG/ML IJ SOLN	0409-3365-01	J1170	\$4.29	\$4.20	\$4.25	\$3.96	\$4.20
Inpatient/Outpatient	HYDROMORPHONE HCL 2 MG/ML IJ SOLN	0409-3365-11	J1170	\$4.29	\$4.20	\$4.25	\$3.96	\$4.20
Inpatient/Outpatient	HYDROMORPHONE HCL 2 MG/ML IJ SOLN	0641-6151-01	J1170	\$12.21	\$11.97	\$12.09	\$11.27	\$11.97
Inpatient/Outpatient	HYDROMORPHONE HCL 2 MG/ML IJ SOLN	0641-6151-25	J1170	\$12.21	\$11.97	\$12.09	\$11.27	\$11.97
Inpatient/Outpatient	HYDROMORPHONE HCL 2 MG PO TABS	0406-3243-01	A9270	\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	HYDROMORPHONE HCL 2 MG PO TABS	59011-452-10	A9270	\$2.10	\$2.06	\$2.08	\$1.94	\$2.06
Inpatient/Outpatient	HYDROMORPHONE HCL 2 MG PO TABS	42858-301-25	A9270	\$0.60	\$0.59	\$0.59	\$0.55	\$0.59
Inpatient/Outpatient	HYDROMORPHONE HCL 2 MG PO TABS	59011-452-01	A9270	\$1.94	\$1.90	\$1.92	\$1.79	\$1.90
Inpatient/Outpatient	HYDROMORPHONE HCL 2 MG PO TABS	63739-275-10	A9270	\$0.50	\$0.49	\$0.50	\$0.46	\$0.49
Inpatient/Outpatient	LIDOCAINE HCL (PF) 2 % IJ SOLN	0409-4282-02	J2001	\$0.95	\$0.93	\$0.94	\$0.88	\$0.93
Inpatient/Outpatient	LIDOCAINE HCL (PF) 2 % IJ SOLN	0409-4282-01	J2001	\$2.19	\$2.15	\$2.17	\$2.02	\$2.15
Inpatient/Outpatient	LIDOCAINE HCL (PF) 2 % IJ SOLN	63323-495-07	J2001	\$1.15	\$1.13	\$1.14	\$1.06	\$1.13
Inpatient/Outpatient	LIDOCAINE HCL (PF) 2 % IJ SOLN	0409-4282-12	J2001	\$0.97	\$0.95	\$0.96	\$0.90	\$0.95

Inpatient/Outpatient	LIDOCAINE HCL (PF) 2 % IJ SOLN	63323-495-26	J2001	\$1.15	\$1.13	\$1.14	\$1.06	\$1.13
Inpatient/Outpatient	LIDOCAINE HCL (PF) 2 % IJ SOLN	55150-160-72	J2001	\$2.14	\$2.10	\$2.12	\$1.98	\$2.10
Inpatient/Outpatient	LIDOCAINE HCL (PF) 2 % IJ SOLN	55150-165-05	J2001	\$1.08	\$1.06	\$1.07	\$1.00	\$1.06
Inpatient/Outpatient	LIDOCAINE HCL (PF) 2 % IJ SOLN	0143-9594-01	J2001	\$0.85	\$0.83	\$0.84	\$0.78	\$0.83
Inpatient/Outpatient	LIDOCAINE HCL (PF) 2 % IJ SOLN	0409-4282-11	J2001	\$4.18	\$4.10	\$4.14	\$3.86	\$4.10
Inpatient/Outpatient	LIDOCAINE HCL (PF) 2 % IJ SOLN	63323-495-27	J2001	\$3.76	\$3.68	\$3.72	\$3.47	\$3.68
Inpatient/Outpatient	LIDOCAINE HCL (PF) 2 % IJ SOLN	55150-164-02	J2001	\$2.58	\$2.53	\$2.55	\$2.38	\$2.53
Inpatient/Outpatient	LIDOCAINE HCL (PF) 2 % IJ SOLN	63323-495-04	J2001	\$1.15	\$1.13	\$1.14	\$1.06	\$1.13
Inpatient/Outpatient	LIDOCAINE HCL (PF) 2 % IJ SOLN	63323-496-03	J2001	\$1.37	\$1.34	\$1.36	\$1.26	\$1.34
Inpatient/Outpatient	LIDOCAINE HCL (PF) 2 % IJ SOLN	0409-2066-10	J2001	\$1.19	\$1.17	\$1.18	\$1.10	\$1.17
Inpatient/Outpatient	LIDOCAINE HCL (PF) 2 % IJ SOLN	63323-495-41	J2001	\$1.15	\$1.13	\$1.14	\$1.06	\$1.13
Inpatient/Outpatient	LIDOCAINE HCL (PF) 2 % IJ SOLN	63323-495-09	J2001	\$3.75	\$3.68	\$3.71	\$3.46	\$3.68
Inpatient/Outpatient	HYDROXYZINE HCL 10 MG/5ML PO SYRP	50383-796-16	A9270	\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	HYDROXYZINE HCL 10 MG/5ML PO SYRP	60432-150-16	A9270	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	HYDROXYZINE HCL 10 MG/5ML PO SYRP	54838-502-80	A9270	\$0.41	\$0.40	\$0.41	\$0.38	\$0.40
Inpatient/Outpatient	HYDROXYZINE HCL 10 MG PO TABS	0591-5522-01	A9270	\$3.03	\$2.97	\$3.00	\$2.80	\$2.97
Inpatient/Outpatient	HYDROXYZINE HCL 10 MG PO TABS	50111-307-01	A9270	\$0.52	\$0.51	\$0.51	\$0.48	\$0.51
Inpatient/Outpatient	HYDROXYZINE HCL 10 MG PO TABS	68462-360-01	A9270	\$2.93	\$2.87	\$2.90	\$2.70	\$2.87
Inpatient/Outpatient	HYDROXYZINE HCL 10 MG PO TABS	63739-483-10	A9270	\$0.61	\$0.60	\$0.60	\$0.56	\$0.60
Inpatient/Outpatient	HYDROXYZINE HCL 10 MG PO TABS	68084-253-11	A9270	\$0.71	\$0.70	\$0.70	\$0.66	\$0.70
Inpatient/Outpatient	HYDROXYZINE HCL 25 MG PO TABS	0591-5523-01	A9270	\$1.67	\$1.64	\$1.65	\$1.54	\$1.64
Inpatient/Outpatient	HYDROXYZINE HCL 25 MG PO TABS	50111-308-01	A9270	\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	HYDROXYZINE HCL 25 MG PO TABS	68462-361-01	A9270	\$4.14	\$4.06	\$4.10	\$3.82	\$4.06
Inpatient/Outpatient	HYDROXYZINE HCL 25 MG PO TABS	68084-254-01	A9270	\$0.74	\$0.73	\$0.73	\$0.68	\$0.73
Inpatient/Outpatient	HYDROXYZINE HCL 25 MG PO TABS	51079-806-01	A9270	\$0.92	\$0.90	\$0.91	\$0.85	\$0.90
Inpatient/Outpatient	HYDROXYZINE HCL 25 MG PO TABS	68084-254-11	A9270	\$0.99	\$0.97	\$0.98	\$0.91	\$0.97
Inpatient/Outpatient	HYDROXYZINE HCL 25 MG PO TABS	16714-082-10	A9270	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	HYDROXYZINE HCL 25 MG PO TABS	16714-082-11	A9270	\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	HYDROXYZINE HCL 25 MG PO TABS	0904-6617-61	A9270	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	HYDROXYZINE HCL 25 MG PO TABS	63739-486-10	A9270	\$0.70	\$0.69	\$0.69	\$0.65	\$0.69
Inpatient/Outpatient	HYOSCYAMINE SULFATE 0.125 MG/5ML PO ELIX	39328-048-16	A9270	\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	HYOSCYAMINE SULFATE 0.125 MG/5ML PO ELIX	54838-511-80	A9270	\$0.20	\$0.20	\$0.20	\$0.18	\$0.20
Inpatient/Outpatient	HYOSCYAMINE SULFATE 0.125 MG/5ML PO ELIX	58657-427-16	A9270	\$0.67	\$0.66	\$0.66	\$0.62	\$0.66
Inpatient/Outpatient	IBUPROFEN 200 MG PO TABS	0573-0165-20	A9270	\$0.61	\$0.60	\$0.60	\$0.56	\$0.60
Inpatient/Outpatient	IBUPROFEN 200 MG PO TABS	0904-7915-40	A9270	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	IBUPROFEN 200 MG PO TABS	0904-7915-70	A9270	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	IBUPROFEN 200 MG PO TABS	57896-941-01	A9270	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	IBUPROFEN 200 MG PO TABS	63739-134-01	A9270	\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	IBUPROFEN 200 MG PO TABS	50580-110-51	A9270	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	IBUPROFEN 200 MG PO TABS	0904-7912-59	A9270	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	IBUPROFEN 200 MG PO TABS	0904-7914-61	A9270	\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	IBUPROFEN 200 MG PO TABS	0904-7915-59	A9270	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	IBUPROFEN 200 MG PO TABS	50580-230-02	A9270	\$0.08	\$0.08	\$0.08	\$0.07	\$0.08
Inpatient/Outpatient	IBUPROFEN 200 MG PO TABS	0904-6747-59	A9270	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	IBUPROFEN 400 MG PO TABS	63739-442-10	A9270	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	IBUPROFEN 400 MG PO TABS	65162-464-50	A9270	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	IBUPROFEN 400 MG PO TABS	60687-446-11	A9270	\$0.47	\$0.46	\$0.47	\$0.43	\$0.46
Inpatient/Outpatient	IBUPROFEN 400 MG PO TABS	63739-672-10	A9270	\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	IBUPROFEN 400 MG PO TABS	0904-5853-61	A9270	\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	IBUPROFEN 400 MG PO TABS	63739-672-01	A9270	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	IBUPROFEN 400 MG PO TABS	65162-464-10	A9270	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	IBUPROFEN 600 MG PO TABS	62584-747-11	A9270	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	IBUPROFEN 600 MG PO TABS	62584-747-01	A9270	\$0.24	\$0.24	\$0.24	\$0.22	\$0.24
Inpatient/Outpatient	IBUPROFEN 600 MG PO TABS	0904-5854-61	A9270	\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	IBUPROFEN 600 MG PO TABS	63739-443-01	A9270	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	IBUPROFEN 600 MG PO TABS	67877-320-01	A9270	\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	IBUPROFEN 600 MG PO TABS	63739-684-10	A9270	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	IBUPROFEN 600 MG PO TABS	65162-465-10	A9270	\$0.32	\$0.31	\$0.32	\$0.30	\$0.31
Inpatient/Outpatient	IBUPROFEN 600 MG PO TABS	60687-457-01	A9270	\$0.76	\$0.74	\$0.75	\$0.70	\$0.74
Inpatient/Outpatient	IBUPROFEN 600 MG PO TABS	60687-457-11	A9270	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	IBUPROFEN 800 MG PO TABS	0904-5855-61	A9270	\$0.30	\$0.29	\$0.30	\$0.28	\$0.29
Inpatient/Outpatient	IBUPROFEN 800 MG PO TABS	63739-444-10	A9270	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	IBUPROFEN 800 MG PO TABS	62584-748-11	A9270	\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	IBUPROFEN 800 MG PO TABS	63739-444-01	A9270	\$0.24	\$0.24	\$0.24	\$0.22	\$0.24
Inpatient/Outpatient	IBUPROFEN 800 MG PO TABS	67877-296-05	A9270	\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	IBUPROFEN 800 MG PO TABS	65162-466-50	A9270	\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	IBUPROFEN 800 MG PO TABS	63739-691-10	A9270	\$0.32	\$0.31	\$0.32	\$0.30	\$0.31
Inpatient/Outpatient	IBUPROFEN 800 MG PO TABS	60687-468-11	A9270	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68

Inpatient/Outpatient	IBUPROFEN 800 MG PO TABS	64380-807-06	A9270	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	IBUPROFEN 800 MG PO TABS	65162-466-10	A9270	\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	IMIPRAMINE HCL 10 MG PO TABS	49884-054-01	A9270	\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	IMIPRAMINE HCL 10 MG PO TABS	68180-311-01	A9270	\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	IMIPRAMINE HCL 10 MG PO TABS	69315-133-01	A9270	\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	IMIPRAMINE HCL 25 MG PO TABS	0781-1764-13	A9270	\$1.38	\$1.35	\$1.37	\$1.27	\$1.35
Inpatient/Outpatient	IMIPRAMINE HCL 25 MG PO TABS	49884-055-01	A9270	\$0.59	\$0.58	\$0.58	\$0.54	\$0.58
Inpatient/Outpatient	IMIPRAMINE HCL 25 MG PO TABS	0781-1764-01	A9270	\$0.55	\$0.54	\$0.54	\$0.51	\$0.54
Inpatient/Outpatient	IMIPRAMINE HCL 25 MG PO TABS	69584-426-10	A9270	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	IMIPRAMINE HCL 50 MG PO TABS	0781-1766-13	A9270	\$2.08	\$2.04	\$2.06	\$1.92	\$2.04
Inpatient/Outpatient	IMIPRAMINE HCL 50 MG PO TABS	0781-1766-01	A9270	\$2.49	\$2.44	\$2.47	\$2.30	\$2.44
Inpatient/Outpatient	IMIPRAMINE HCL 50 MG PO TABS	69315-135-01	A9270	\$1.51	\$1.48	\$1.49	\$1.39	\$1.48
Inpatient/Outpatient	IMIPRAMINE HCL 50 MG PO TABS	49884-056-01	A9270	\$0.77	\$0.75	\$0.76	\$0.71	\$0.75
Inpatient/Outpatient	IMIPRAMINE HCL 50 MG PO TABS	64380-171-01	A9270	\$0.84	\$0.82	\$0.83	\$0.78	\$0.82
Inpatient/Outpatient	HYDROXOCOBALAMIN (CYANOKIT) 5 G IN 200 ML SOLR	50633-310-11		\$2,738.88	\$2,684.10	\$2,711.49	\$2,527.99	\$2,684.10
Inpatient/Outpatient	INDOMETHACIN 25 MG PO CAPS	51079-190-01	A9270	\$1.95	\$1.91	\$1.93	\$1.80	\$1.91
Inpatient/Outpatient	INDOMETHACIN 25 MG PO CAPS	51079-190-20	A9270	\$0.78	\$0.76	\$0.77	\$0.72	\$0.76
Inpatient/Outpatient	INDOMETHACIN 25 MG PO CAPS	51079-190-56	A9270	\$0.65	\$0.64	\$0.64	\$0.60	\$0.64
Inpatient/Outpatient	INDOMETHACIN 25 MG PO CAPS	0378-0143-01	A9270	\$0.75	\$0.74	\$0.74	\$0.69	\$0.74
Inpatient/Outpatient	INDOMETHACIN 25 MG PO CAPS	0093-4029-01	A9270	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	INDOMETHACIN 25 MG PO CAPS	0093-4029-19	A9270	\$0.72	\$0.71	\$0.71	\$0.66	\$0.71
Inpatient/Outpatient	INDOMETHACIN 25 MG PO CAPS	23155-010-01	A9270	\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	INDOMETHACIN 25 MG PO CAPS	50268-430-11	A9270	\$1.20	\$1.18	\$1.19	\$1.11	\$1.18
Inpatient/Outpatient	INDOMETHACIN 25 MG PO CAPS	68462-406-01	A9270	\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	INDOMETHACIN 50 MG PO CAPS	0378-0147-05	A9270	\$0.85	\$0.83	\$0.84	\$0.78	\$0.83
Inpatient/Outpatient	INDOMETHACIN 50 MG PO CAPS	51079-191-01	A9270	\$3.30	\$3.23	\$3.27	\$3.05	\$3.23
Inpatient/Outpatient	INDOMETHACIN 50 MG PO CAPS	51079-191-20	A9270	\$0.90	\$0.88	\$0.89	\$0.83	\$0.88
Inpatient/Outpatient	INDOMETHACIN 50 MG PO CAPS	51079-191-56	A9270	\$0.77	\$0.75	\$0.76	\$0.71	\$0.75
Inpatient/Outpatient	INDOMETHACIN 50 MG PO CAPS	68462-302-01	A9270	\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	INDOMETHACIN 50 MG PO CAPS	50268-431-11	A9270	\$1.04	\$1.02	\$1.03	\$0.96	\$1.02
Inpatient/Outpatient	INDOMETHACIN 50 MG RE SUPP	42211-102-43	A9270	\$541.50	\$530.67	\$536.09	\$499.80	\$530.67
Inpatient/Outpatient	INDOMETHACIN 50 MG RE SUPP	69344-102-33	A9270	\$1,094.92	\$1,073.02	\$1,083.97	\$1,010.61	\$1,073.02
Inpatient/Outpatient	IODINE STRONG 5 % PO SOLN	48433-230-15	A9270	\$9.82	\$9.62	\$9.72	\$9.06	\$9.62
Inpatient/Outpatient	IODINE STRONG 5 % PO SOLN	99999-230-14	A9270	\$0.78	\$0.76	\$0.77	\$0.72	\$0.76
Inpatient/Outpatient	IRON DEXTRAN 50 MG/ML IJ SOLN	52544-931-02	J1750	\$63.15	\$61.89	\$62.52	\$58.29	\$61.89
Inpatient/Outpatient	IRON DEXTRAN 50 MG/ML IJ SOLN	52544-931-07	J1750	\$55.54	\$54.43	\$54.98	\$51.26	\$54.43
Inpatient/Outpatient	IRON DEXTRAN 50 MG/ML IJ SOLN	0517-0234-10	J1750	\$59.05	\$57.87	\$58.46	\$54.50	\$57.87
Inpatient/Outpatient	IRON DEXTRAN 50 MG/ML IJ SOLN	0023-6082-01	J1750	\$62.78	\$61.52	\$62.15	\$57.95	\$61.52
Inpatient/Outpatient	ISOFLURANE IN SOLN	0409-3292-01		\$0.54	\$0.53	\$0.53	\$0.50	\$0.53
Inpatient/Outpatient	ISOFLURANE IN SOLN	10019-360-40		\$1.09	\$1.07	\$1.08	\$1.01	\$1.07
Inpatient/Outpatient	ISOFLURANE IN SOLN	66794-011-10		\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	ISOFLURANE IN SOLN	66794-017-10		\$0.63	\$0.62	\$0.62	\$0.58	\$0.62
Inpatient/Outpatient	ISONIAZID 50 MG/5ML PO SYRP	46287-009-01	A9270	\$2.79	\$2.73	\$2.76	\$2.58	\$2.73
Inpatient/Outpatient	ISONIAZID 100 MG PO TABS	0555-0066-02	A9270	\$0.39	\$0.38	\$0.39	\$0.36	\$0.38
Inpatient/Outpatient	ISONIAZID 300 MG PO TABS	51079-083-20	A9270	\$3.74	\$3.67	\$3.70	\$3.45	\$3.67
Inpatient/Outpatient	ISONIAZID 300 MG PO TABS	51079-083-01	A9270	\$0.53	\$0.52	\$0.52	\$0.49	\$0.52
Inpatient/Outpatient	ISONIAZID 300 MG PO TABS	60687-158-11	A9270	\$3.57	\$3.50	\$3.53	\$3.30	\$3.50
Inpatient/Outpatient	ISONIAZID 300 MG PO TABS	60687-553-11	A9270	\$3.36	\$3.29	\$3.33	\$3.10	\$3.29
Inpatient/Outpatient	PALIVIZUMAB IM SYRINGE (NICU/INFANT/PEDS)	99999-4114-1		\$6,006.42	\$5,886.29	\$5,946.36	\$5,543.93	\$5,886.29
Inpatient/Outpatient	ISOPROTERENOL HCL 0.2 MG/ML IJ SOLN	0409-1410-01		\$178.86	\$175.28	\$177.07	\$165.09	\$175.28
Inpatient/Outpatient	ISOPROTERENOL HCL 0.2 MG/ML IJ SOLN	0409-1410-05		\$42.67	\$41.82	\$42.24	\$39.38	\$41.82
Inpatient/Outpatient	ISOPROTERENOL HCL 0.2 MG/ML IJ SOLN	42998-402-05		\$1,158.10	\$1,134.94	\$1,146.52	\$1,068.93	\$1,134.94
Inpatient/Outpatient	ISOPROTERENOL HCL 0.2 MG/ML IJ SOLN	0187-4330-05		\$624.54	\$612.05	\$618.29	\$576.45	\$612.05
Inpatient/Outpatient	ISOPROTERENOL HCL 0.2 MG/ML IJ SOLN	14789-015-05		\$98.16	\$96.20	\$97.18	\$90.60	\$96.20
Inpatient/Outpatient	ISOPROTERENOL HCL 0.2 MG/ML IJ SOLN	0187-4330-01		\$2,819.61	\$2,763.22	\$2,791.41	\$2,602.50	\$2,763.22
Inpatient/Outpatient	ISOPROTERENOL HCL 0.2 MG/ML IJ SOLN	69097-522-35		\$361.76	\$354.52	\$358.14	\$333.90	\$354.52
Inpatient/Outpatient	ISOPROTERENOL HCL 0.2 MG/ML IJ SOLN	14789-015-07		\$88.44	\$86.67	\$87.56	\$81.63	\$86.67
Inpatient/Outpatient	ISOPROTERENOL HCL 0.2 MG/ML IJ SOLN	70121-1605-1		\$72.87	\$71.41	\$72.14	\$67.26	\$71.41
Inpatient/Outpatient	ISOPROTERENOL HCL 0.2 MG/ML IJ SOLN	69918-735-01		\$45.58	\$44.67	\$45.12	\$42.07	\$44.67
Inpatient/Outpatient	ISOSORBIDE DINITRATE 10 MG PO TABS	0904-2151-61	A9270	\$3.88	\$3.80	\$3.84	\$3.58	\$3.80
Inpatient/Outpatient	ISOSORBIDE DINITRATE 10 MG PO TABS	0143-1771-01	A9270	\$2.34	\$2.29	\$2.32	\$2.16	\$2.29
Inpatient/Outpatient	ISOSORBIDE DINITRATE 10 MG PO TABS	0781-1556-01	A9270	\$2.04	\$2.00	\$2.02	\$1.88	\$2.00
Inpatient/Outpatient	ISOSORBIDE DINITRATE 10 MG PO TABS	63739-569-10	A9270	\$1.97	\$1.93	\$1.95	\$1.82	\$1.93
Inpatient/Outpatient	ISOSORBIDE DINITRATE 10 MG PO TABS	0904-6619-61	A9270	\$2.05	\$2.01	\$2.03	\$1.89	\$2.01
Inpatient/Outpatient	ISOSORBIDE DINITRATE 10 MG PO TABS	16714-008-01	A9270	\$1.73	\$1.70	\$1.71	\$1.60	\$1.70
Inpatient/Outpatient	ISOSORBIDE DINITRATE 20 MG PO TABS	0781-1695-01	A9270	\$2.39	\$2.34	\$2.37	\$2.21	\$2.34
Inpatient/Outpatient	ISOSORBIDE DINITRATE 20 MG PO TABS	0904-2154-61	A9270	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	ISOSORBIDE DINITRATE 20 MG PO TABS	63739-367-10	A9270	\$2.53	\$2.48	\$2.50	\$2.34	\$2.48

Inpatient/Outpatient	ISOSORBIDE DINITRATE 20 MG PO TABS	68084-083-11	A9270	\$2.72	\$2.67	\$2.69	\$2.51	\$2.67
Inpatient/Outpatient	ISOSORBIDE DINITRATE 20 MG PO TABS	0904-6620-61	A9270	\$2.10	\$2.06	\$2.08	\$1.94	\$2.06
Inpatient/Outpatient	ISOSORBIDE DINITRATE 5 MG PO TABS	0143-1769-01	A9270	\$2.12	\$2.08	\$2.10	\$1.96	\$2.08
Inpatient/Outpatient	ISOSORBIDE DINITRATE 5 MG PO TABS	0781-1635-01	A9270	\$1.65	\$1.62	\$1.63	\$1.52	\$1.62
Inpatient/Outpatient	ISOSORBIDE DINITRATE 5 MG PO TABS	49884-020-01	A9270	\$2.22	\$2.18	\$2.20	\$2.05	\$2.18
Inpatient/Outpatient	ISOSORBIDE DINITRATE 5 MG PO TABS	16714-007-01	A9270	\$1.73	\$1.70	\$1.71	\$1.60	\$1.70
Inpatient/Outpatient	CAFFEINE CITRATE IV SYRINGE 20 MG/ML (NICU)	99999-049-00	J0706	\$7.58	\$7.43	\$7.50	\$7.00	\$7.43
Inpatient/Outpatient	KETAMINE HCL 100 MG/ML IJ SOLN	0409-2051-05		\$7.39	\$7.24	\$7.32	\$6.82	\$7.24
Inpatient/Outpatient	KETAMINE HCL 100 MG/ML IJ SOLN	0143-9509-01		\$9.44	\$9.25	\$9.35	\$8.71	\$9.25
Inpatient/Outpatient	KETAMINE HCL 100 MG/ML IJ SOLN	0409-2051-15		\$7.08	\$6.94	\$7.01	\$6.53	\$6.94
Inpatient/Outpatient	KETAMINE HCL 100 MG/ML IJ SOLN	42023-115-10		\$11.76	\$11.52	\$11.64	\$10.85	\$11.52
Inpatient/Outpatient	LACTATED RINGERS IV SOLN	0338-0117-03		\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	LACTATED RINGERS IV SOLN	0338-0117-04		\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	EPHEDRINE SULFATE 5 MG/ML IV SOSY (WRAP)	62295-3084-5		\$7.29	\$7.14	\$7.22	\$6.73	\$7.14
Inpatient/Outpatient	EPHEDRINE SULFATE 5 MG/ML IV SOSY (WRAP)	62295-3084-7		\$3.65	\$3.58	\$3.61	\$3.37	\$3.58
Inpatient/Outpatient	EPHEDRINE SULFATE 5 MG/ML IV SOSY (WRAP)	69374-901-05		\$16.48	\$16.15	\$16.32	\$15.21	\$16.15
Inpatient/Outpatient	EPHEDRINE SULFATE 5 MG/ML IV SOSY (WRAP)	71449-010-11		\$11.18	\$10.96	\$11.07	\$10.32	\$10.96
Inpatient/Outpatient	EPHEDRINE SULFATE 5 MG/ML IV SOSY (WRAP)	71449-106-11		\$15.07	\$14.77	\$14.92	\$13.91	\$14.77
Inpatient/Outpatient	EPHEDRINE SULFATE 5 MG/ML IV SOSY (WRAP)	70092-1478-44		\$20.06	\$19.66	\$19.86	\$18.52	\$19.66
Inpatient/Outpatient	ALDACTAZIDE 5 MG/ML ORAL SUSPENSION	99999-026-00	A9270	\$0.97	\$0.95	\$0.96	\$0.90	\$0.95
Inpatient/Outpatient	LEUCOVORIN CALCIUM 5 MG PO TABS	51079-581-01	A9270	\$15.80	\$15.48	\$15.64	\$14.58	\$15.48
Inpatient/Outpatient	LEUCOVORIN CALCIUM 5 MG PO TABS	51079-581-06	A9270	\$5.31	\$5.20	\$5.26	\$4.90	\$5.20
Inpatient/Outpatient	LEUCOVORIN CALCIUM 5 MG PO TABS	0054-8496-19	A9270	\$7.84	\$7.68	\$7.76	\$7.24	\$7.68
Inpatient/Outpatient	LEUCOVORIN CALCIUM 5 MG PO TABS	0555-0484-01	A9270	\$4.60	\$4.51	\$4.55	\$4.25	\$4.51
Inpatient/Outpatient	LEUCOVORIN CALCIUM 5 MG PO TABS	0054-4496-25	A9270	\$3.08	\$3.02	\$3.05	\$2.84	\$3.02
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 25 MCG PO TABS	0378-1800-01	A9270	\$1.56	\$1.53	\$1.54	\$1.44	\$1.53
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 25 MCG PO TABS	0781-5180-92	A9270	\$1.30	\$1.27	\$1.29	\$1.20	\$1.27
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 25 MCG PO TABS	0074-4341-90	A9270	\$5.88	\$5.76	\$5.82	\$5.43	\$5.76
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 25 MCG PO TABS	0378-1800-77	A9270	\$1.28	\$1.25	\$1.27	\$1.18	\$1.25
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 25 MCG PO TABS	51079-444-01	A9270	\$1.63	\$1.60	\$1.61	\$1.50	\$1.60
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 25 MCG PO TABS	68180-965-09	A9270	\$0.50	\$0.49	\$0.50	\$0.46	\$0.49
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 50 MCG PO TABS	0074-4552-11	A9270	\$6.47	\$6.34	\$6.41	\$5.97	\$6.34
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 50 MCG PO TABS	51079-440-01	A9270	\$0.60	\$0.59	\$0.59	\$0.55	\$0.59
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 50 MCG PO TABS	51079-440-20	A9270	\$1.36	\$1.33	\$1.35	\$1.26	\$1.33
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 50 MCG PO TABS	0378-1803-77	A9270	\$1.59	\$1.56	\$1.57	\$1.47	\$1.56
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 50 MCG PO TABS	60687-464-11	A9270	\$1.45	\$1.42	\$1.44	\$1.34	\$1.42
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 75 MCG PO TABS	0074-5182-11	A9270	\$6.47	\$6.34	\$6.41	\$5.97	\$6.34
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 75 MCG PO TABS	51079-441-01	A9270	\$0.66	\$0.65	\$0.65	\$0.61	\$0.65
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 75 MCG PO TABS	51079-441-20	A9270	\$1.63	\$1.60	\$1.61	\$1.50	\$1.60
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 75 MCG PO TABS	60687-475-11	A9270	\$1.77	\$1.73	\$1.75	\$1.63	\$1.73
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 100 MCG PO TABS	0074-6624-11	A9270	\$6.47	\$6.34	\$6.41	\$5.97	\$6.34
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 100 MCG PO TABS	51079-442-01	A9270	\$0.67	\$0.66	\$0.66	\$0.62	\$0.66
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 100 MCG PO TABS	51079-442-20	A9270	\$1.71	\$1.68	\$1.69	\$1.58	\$1.68
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 100 MCG PO TABS	0781-5184-92	A9270	\$1.43	\$1.40	\$1.42	\$1.32	\$1.40
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 100 MCG PO TABS	60687-497-11	A9270	\$1.81	\$1.77	\$1.79	\$1.67	\$1.77
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 125 MCG PO TABS	0074-7068-11	A9270	\$6.47	\$6.34	\$6.41	\$5.97	\$6.34
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 125 MCG PO TABS	51079-443-01	A9270	\$0.79	\$0.77	\$0.78	\$0.73	\$0.77
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 125 MCG PO TABS	51079-443-20	A9270	\$2.46	\$2.41	\$2.44	\$2.27	\$2.41
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 125 MCG PO TABS	60687-519-11	A9270	\$2.13	\$2.09	\$2.11	\$1.97	\$2.09
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 150 MCG PO TABS	0074-7069-11	A9270	\$6.47	\$6.34	\$6.41	\$5.97	\$6.34
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 150 MCG PO TABS	51079-445-01	A9270	\$0.81	\$0.79	\$0.80	\$0.75	\$0.79
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 150 MCG PO TABS	51079-445-20	A9270	\$2.53	\$2.48	\$2.50	\$2.34	\$2.48
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 150 MCG PO TABS	60687-530-11	A9270	\$2.19	\$2.15	\$2.17	\$2.02	\$2.15
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 200 MCG PO TABS	0074-7148-11	A9270	\$6.47	\$6.34	\$6.41	\$5.97	\$6.34
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 200 MCG PO TABS	0781-5189-92	A9270	\$2.54	\$2.49	\$2.51	\$2.34	\$2.49
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 200 MCG PO TABS	60687-552-01	A9270	\$3.78	\$3.70	\$3.74	\$3.49	\$3.70
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 300 MCG PO TABS	0074-7149-90	A9270	\$6.47	\$6.34	\$6.41	\$5.97	\$6.34
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 300 MCG PO TABS	0378-1821-01	A9270	\$1.54	\$1.51	\$1.52	\$1.42	\$1.51
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 300 MCG PO TABS	0781-5190-92	A9270	\$3.41	\$3.34	\$3.38	\$3.15	\$3.34
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 300 MCG PO TABS	16729-458-15	A9270	\$0.43	\$0.42	\$0.43	\$0.40	\$0.42
Inpatient/Outpatient	LIDOCAINE HCL 4 % EX SOLN	0054-3505-47	A9270	\$3.63	\$3.56	\$3.59	\$3.35	\$3.56
Inpatient/Outpatient	LIDOCAINE HCL 4 % EX SOLN	60432-465-50	A9270	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	LIDOCAINE HCL 4 % EX SOLN	52565-009-50	A9270	\$1.82	\$1.78	\$1.80	\$1.68	\$1.78
Inpatient/Outpatient	LIDOCAINE HCL 4 % EX SOLN	63739-997-64	A9270	\$3.62	\$3.55	\$3.58	\$3.34	\$3.55
Inpatient/Outpatient	LIDOCAINE HCL 4 % EX SOLN	0527-6004-80	A9270	\$1.74	\$1.71	\$1.72	\$1.61	\$1.71
Inpatient/Outpatient	LIDOCAINE HCL 4 % EX SOLN	70954-518-10	A9270	\$1.60	\$1.57	\$1.58	\$1.48	\$1.57
Inpatient/Outpatient	LIDOCAINE HCL 0.5 % IJ SOLN	0409-4275-01	J2001	\$0.38	\$0.37	\$0.38	\$0.35	\$0.37
Inpatient/Outpatient	LIDOCAINE HCL 1 % IJ SOLN	0409-4276-01	J2001	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19

Inpatient/Outpatient	LIDOCAINE HCL 1 % IJ SOLN	0409-4276-02	J2001	\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	LIDOCAINE HCL 1 % IJ SOLN	63323-485-27	J2001	\$0.24	\$0.24	\$0.24	\$0.22	\$0.24
Inpatient/Outpatient	LIDOCAINE HCL 1 % IJ SOLN	0409-4276-17	J2001	\$0.24	\$0.24	\$0.24	\$0.22	\$0.24
Inpatient/Outpatient	LIDOCAINE HCL 1 % IJ SOLN	99999-485-10	J2001	\$0.24	\$0.24	\$0.24	\$0.22	\$0.24
Inpatient/Outpatient	LIDOCAINE HCL 1 % IJ SOLN	55150-252-20	J2001	\$0.22	\$0.22	\$0.22	\$0.20	\$0.22
Inpatient/Outpatient	LIDOCAINE HCL 1 % IJ SOLN	63323-485-26	J2001	\$0.24	\$0.24	\$0.24	\$0.22	\$0.24
Inpatient/Outpatient	LIDOCAINE HCL 1 % IJ SOLN	63323-485-03	J2001	\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	LIDOCAINE HCL 1 % IJ SOLN	63323-485-41	J2001	\$0.34	\$0.33	\$0.34	\$0.31	\$0.33
Inpatient/Outpatient	LIDOCAINE HCL 1 % IJ SOLN	55150-251-10	J2001	\$1.26	\$1.23	\$1.25	\$1.16	\$1.23
Inpatient/Outpatient	LIDOCAINE HCL 1 % IJ SOLN	55150-253-50	J2001	\$0.58	\$0.57	\$0.57	\$0.54	\$0.57
Inpatient/Outpatient	LIDOCAINE HCL (PF) 1.5 % IJ SOLN	0409-4776-01	J2001	\$1.50	\$1.47	\$1.49	\$1.38	\$1.47
Inpatient/Outpatient	LIDOCAINE HCL (PF) 1.5 % IJ SOLN	63323-493-01	J2001	\$1.67	\$1.64	\$1.65	\$1.54	\$1.64
Inpatient/Outpatient	LIDOCAINE HCL (PF) 1.5 % IJ SOLN	63323-493-03	J2001	\$1.66	\$1.63	\$1.64	\$1.53	\$1.63
Inpatient/Outpatient	LIDOCAINE HCL 2 % IJ SOLN	0409-4277-01	J2001	\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	LIDOCAINE HCL 2 % IJ SOLN	0409-4277-02	J2001	\$0.20	\$0.20	\$0.20	\$0.18	\$0.20
Inpatient/Outpatient	LIDOCAINE HCL 2 % IJ SOLN	63323-486-26	J2001	\$0.36	\$0.35	\$0.36	\$0.33	\$0.35
Inpatient/Outpatient	LIDOCAINE HCL 2 % IJ SOLN	55150-256-50	J2001	\$0.68	\$0.67	\$0.67	\$0.63	\$0.67
Inpatient/Outpatient	LIDOCAINE HCL 2 % IJ SOLN	63323-486-27	J2001	\$0.36	\$0.35	\$0.36	\$0.33	\$0.35
Inpatient/Outpatient	LIDOCAINE HCL 2 % IJ SOLN	55150-255-20	J2001	\$0.20	\$0.20	\$0.20	\$0.18	\$0.20
Inpatient/Outpatient	LIDOCAINE HCL 2 % IJ SOLN	0143-9575-01	J2001	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	LIDOCAINE HCL 2 % IJ SOLN	63323-486-02	J2001	\$0.36	\$0.35	\$0.36	\$0.33	\$0.35
Inpatient/Outpatient	LIDOCAINE HCL 2 % IJ SOLN	0409-4277-17	J2001	\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	LIDOCAINE HCL 2 % IJ SOLN	0409-4277-16	J2001	\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	LIDOCAINE HCL 2 % IJ SOLN	63323-202-02	J2001	\$4.00	\$3.92	\$3.96	\$3.69	\$3.92
Inpatient/Outpatient	LIDOCAINE HCL 2 % IJ SOLN	55150-254-10	J2001	\$0.49	\$0.48	\$0.49	\$0.45	\$0.48
Inpatient/Outpatient	LIDOCAINE HCL (PF) 4 % IJ SOLN	0409-4283-01	J2001	\$3.14	\$3.08	\$3.11	\$2.90	\$3.08
Inpatient/Outpatient	LIDOCAINE HCL (PF) 4 % IJ SOLN	0409-4283-11	J2001	\$3.90	\$3.82	\$3.86	\$3.60	\$3.82
Inpatient/Outpatient	LIDOCAINE HCL (CARDIAC) 100 MG/5 ML IV SOSY (WRAP)	0409-1323-05	J2001	\$3.49	\$3.42	\$3.46	\$3.22	\$3.42
Inpatient/Outpatient	LIDOCAINE HCL (CARDIAC) 100 MG/5 ML IV SOSY (WRAP)	63323-208-05	J2001	\$1.41	\$1.38	\$1.40	\$1.30	\$1.38
Inpatient/Outpatient	LIDOCAINE HCL (CARDIAC) 100 MG/5 ML IV SOSY (WRAP)	0409-4903-34	J2001	\$3.17	\$3.11	\$3.14	\$2.93	\$3.11
Inpatient/Outpatient	LIDOCAINE HCL (CARDIAC) 100 MG/5 ML IV SOSY (WRAP)	76329-3390-1	J2001	\$4.32	\$4.23	\$4.28	\$3.99	\$4.23
Inpatient/Outpatient	LIDOCAINE HCL (CARDIAC) 100 MG/5 ML IV SOSY (WRAP)	0409-4903-11	J2001	\$0.64	\$0.63	\$0.63	\$0.59	\$0.63
Inpatient/Outpatient	LIDOCAINE HCL (CARDIAC) 100 MG/5 ML IV SOSY (WRAP)	0409-1323-15	J2001	\$2.89	\$2.83	\$2.86	\$2.67	\$2.83
Inpatient/Outpatient	LIDOCAINE VISCOUS HCL 2 % MT SOLN	0054-3500-49	A9270	\$0.52	\$0.51	\$0.51	\$0.48	\$0.51
Inpatient/Outpatient	LIDOCAINE VISCOUS HCL 2 % MT SOLN	0054-8500-16	A9270	\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	LIDOCAINE VISCOUS HCL 2 % MT SOLN	60432-464-00	A9270	\$0.36	\$0.35	\$0.36	\$0.33	\$0.35
Inpatient/Outpatient	LIDOCAINE VISCOUS HCL 2 % MT SOLN	0603-1393-64	A9270	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	LIDOCAINE VISCOUS HCL 2 % MT SOLN	50383-775-04	A9270	\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	LIDOCAINE VISCOUS HCL 2 % MT SOLN	50383-775-15	A9270	\$0.22	\$0.22	\$0.22	\$0.20	\$0.22
Inpatient/Outpatient	LIDOCAINE VISCOUS HCL 2 % MT SOLN	50383-775-17	A9270	\$0.22	\$0.22	\$0.22	\$0.20	\$0.22
Inpatient/Outpatient	LIDOCAINE VISCOUS HCL 2 % MT SOLN	16714-097-01	A9270	\$0.30	\$0.29	\$0.30	\$0.28	\$0.29
Inpatient/Outpatient	LIDOCAINE VISCOUS HCL 2 % MT SOLN	99999-350-15	A9270	\$0.52	\$0.51	\$0.51	\$0.48	\$0.51
Inpatient/Outpatient	LIDOCAINE VISCOUS HCL 2 % MT SOLN	0121-0903-15	A9270	\$0.64	\$0.63	\$0.63	\$0.59	\$0.63
Inpatient/Outpatient	LIOETHYRONINE SODIUM 25 MCG PO TABS	60793-116-01	A9270	\$11.40	\$11.17	\$11.29	\$10.52	\$11.17
Inpatient/Outpatient	LIOETHYRONINE SODIUM 25 MCG PO TABS	42794-019-02	A9270	\$3.25	\$3.19	\$3.22	\$3.00	\$3.19
Inpatient/Outpatient	LIOETHYRONINE SODIUM 25 MCG PO TABS	59762-1207-1	A9270	\$2.24	\$2.20	\$2.22	\$2.07	\$2.20
Inpatient/Outpatient	LISINAPRIL 20 MG PO TABS	51079-983-20	A9270	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	LISINAPRIL 20 MG PO TABS	51079-983-56	A9270	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	LISINAPRIL 20 MG PO TABS	0904-5809-61	A9270	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	LISINAPRIL 20 MG PO TABS	0172-3760-00	A9270	\$0.24	\$0.24	\$0.24	\$0.22	\$0.24
Inpatient/Outpatient	LISINAPRIL 20 MG PO TABS	63739-350-10	A9270	\$0.24	\$0.24	\$0.24	\$0.22	\$0.24
Inpatient/Outpatient	LISINAPRIL 20 MG PO TABS	0172-3760-10	A9270	\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	LISINAPRIL 20 MG PO TABS	51079-983-01	A9270	\$0.29	\$0.28	\$0.29	\$0.27	\$0.28
Inpatient/Outpatient	LISINAPRIL 20 MG PO TABS	68084-198-11	A9270	\$0.49	\$0.48	\$0.49	\$0.45	\$0.48
Inpatient/Outpatient	LISINAPRIL 20 MG PO TABS	0904-6486-61	A9270	\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	LISINAPRIL 20 MG PO TABS	43547-354-10	A9270	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	LISINAPRIL 20 MG PO TABS	68180-981-01	A9270	\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	LISINAPRIL 20 MG PO TABS	0904-6799-61	A9270	\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	LISINAPRIL 20 MG PO TABS	60687-333-11	A9270	\$0.50	\$0.49	\$0.50	\$0.46	\$0.49
Inpatient/Outpatient	LITHIUM CARBONATE 150 MG PO CAPS	0054-2526-25	A9270	\$0.48	\$0.47	\$0.48	\$0.44	\$0.47
Inpatient/Outpatient	LITHIUM CARBONATE 150 MG PO CAPS	0054-8526-25	A9270	\$0.40	\$0.39	\$0.40	\$0.37	\$0.39
Inpatient/Outpatient	LITHIUM CARBONATE 300 MG PO CAPS	63739-265-10	A9270	\$0.49	\$0.48	\$0.49	\$0.45	\$0.48
Inpatient/Outpatient	LITHIUM CARBONATE 300 MG PO CAPS	60505-2504-3	A9270	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	LITHIUM CARBONATE 300 MG PO CAPS	0054-2527-25	A9270	\$0.36	\$0.35	\$0.36	\$0.33	\$0.35
Inpatient/Outpatient	LITHIUM CARBONATE 300 MG PO CAPS	0054-8527-25	A9270	\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	LITHIUM CARBONATE 300 MG PO CAPS	31722-545-01	A9270	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	INSULIN REGULAR HUMAN 100 UNIT/ML (NICU COMPOUNDS)	0002-8215-17	J1815	\$7.29	\$7.14	\$7.22	\$6.73	\$7.14
Inpatient/Outpatient	LOPERAMIDE HCL 2 MG PO CAPS	51079-690-20	A9270	\$2.21	\$2.17	\$2.19	\$2.04	\$2.17

Inpatient/Outpatient	LOPERAMIDE HCL 2 MG PO CAPS	51079-690-01	A9270	\$0.56	\$0.55	\$0.55	\$0.52	\$0.55
Inpatient/Outpatient	LOPERAMIDE HCL 2 MG PO CAPS	0093-0311-01	A9270	\$1.21	\$1.19	\$1.20	\$1.12	\$1.19
Inpatient/Outpatient	LOPERAMIDE HCL 2 MG PO CAPS	60687-229-11	A9270	\$2.64	\$2.59	\$2.61	\$2.44	\$2.59
Inpatient/Outpatient	LORAZEPAM 2 MG/ML PO CONC	0121-0770-01	A9270	\$1.21	\$1.19	\$1.20	\$1.12	\$1.19
Inpatient/Outpatient	LORAZEPAM 2 MG/ML PO CONC	99999-3532-5	A9270	\$3.65	\$3.58	\$3.61	\$3.37	\$3.58
Inpatient/Outpatient	LORAZEPAM 2 MG/ML PO CONC	0054-3532-44	A9270	\$3.65	\$3.58	\$3.61	\$3.37	\$3.58
Inpatient/Outpatient	LORAZEPAM 2 MG/ML PO CONC	65162-687-84	A9270	\$3.87	\$3.79	\$3.83	\$3.57	\$3.79
Inpatient/Outpatient	LORAZEPAM 1 MG PO TABS	51079-386-20	A9270	\$0.64	\$0.63	\$0.63	\$0.59	\$0.63
Inpatient/Outpatient	LORAZEPAM 1 MG PO TABS	51079-386-01	A9270	\$0.29	\$0.28	\$0.29	\$0.27	\$0.28
Inpatient/Outpatient	LORAZEPAM 1 MG PO TABS	0591-0241-01	A9270	\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	LORAZEPAM 1 MG PO TABS	0591-0241-05	A9270	\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	LORAZEPAM 1 MG PO TABS	69315-905-01	A9270	\$0.40	\$0.39	\$0.40	\$0.37	\$0.39
Inpatient/Outpatient	LORAZEPAM 1 MG PO TABS	0904-6008-61	A9270	\$0.32	\$0.31	\$0.32	\$0.30	\$0.31
Inpatient/Outpatient	LORAZEPAM 1 MG PO TABS	60687-355-11	A9270	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	LORAZEPAM 1 MG PO TABS	60687-638-11	A9270	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	MAGNESIUM CITRATE 1.745 GM/30ML PO SOLN	49348-696-49	A9150	\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	MAGNESIUM CITRATE 1.745 GM/30ML PO SOLN	0869-0686-38	A9150	\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	MAGNESIUM CITRATE 1.745 GM/30ML PO SOLN	0869-0667-38	A9150	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	MAGNESIUM CITRATE 1.745 GM/30ML PO SOLN	70677-0051-1	A9150	\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	MAGNESIUM CITRATE 1.745 GM/30ML PO SOLN	0904-6787-44	A9150	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	MAGNESIUM CITRATE 1.745 GM/30ML PO SOLN	0869-0166-38	A9150	\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	MAGNESIUM SULFATE 40 MG/ML IV SOLN (WRAP)	0409-6729-09	J3475	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	MAGNESIUM SULFATE 40 MG/ML IV SOLN (WRAP)	63323-106-10	J3475	\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	MAGNESIUM SULFATE 40 MG/ML IV SOLN (WRAP)	0409-6729-03	J3475	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	MAGNESIUM SULFATE 50 % IJ SOLN	0409-2168-02	J3475	\$0.86	\$0.84	\$0.85	\$0.79	\$0.84
Inpatient/Outpatient	MAGNESIUM SULFATE 50 % IJ SOLN	51764-1000-3	J3475	\$38.88	\$38.10	\$38.49	\$35.89	\$38.10
Inpatient/Outpatient	MAGNESIUM SULFATE 50 % IJ SOLN	63323-642-20	J3475	\$1.04	\$1.02	\$1.03	\$0.96	\$1.02
Inpatient/Outpatient	MAGNESIUM SULFATE 50 % IJ SOLN	63323-064-03	J3475	\$2.60	\$2.55	\$2.57	\$2.40	\$2.55
Inpatient/Outpatient	MAGNESIUM SULFATE 50 % IJ SOLN	63323-642-50	J3475	\$1.68	\$1.65	\$1.66	\$1.55	\$1.65
Inpatient/Outpatient	MAGNESIUM SULFATE 50 % IJ SOLN	63323-064-04	J3475	\$0.78	\$0.76	\$0.77	\$0.72	\$0.76
Inpatient/Outpatient	MAGNESIUM SULFATE 50 % IJ SOLN	63323-064-01	J3475	\$2.60	\$2.55	\$2.57	\$2.40	\$2.55
Inpatient/Outpatient	MAGNESIUM SULFATE 50 % IJ SOLN	63323-064-41	J3475	\$2.60	\$2.55	\$2.57	\$2.40	\$2.55
Inpatient/Outpatient	MAGNESIUM SULFATE 50 % IJ SOLN	0409-2168-17	J3475	\$0.90	\$0.88	\$0.89	\$0.83	\$0.88
Inpatient/Outpatient	MAGNESIUM SULFATE 50 % IJ SOLN	63323-642-01	J3475	\$1.04	\$1.02	\$1.03	\$0.96	\$1.02
Inpatient/Outpatient	MANNITOL 20 % IV SOLN	0338-0357-03		\$0.29	\$0.28	\$0.29	\$0.27	\$0.28
Inpatient/Outpatient	MANNITOL 20 % IV SOLN	0409-7715-03		\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	MANNITOL 20 % IV SOLN	0409-7715-13		\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	MANNITOL 20 % IV SOLN	0990-7715-13		\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	MANNITOL 25 % IV SOLN	63323-024-25	J2150	\$0.41	\$0.40	\$0.41	\$0.38	\$0.40
Inpatient/Outpatient	MANNITOL 25 % IV SOLN	0409-4031-01	J2150	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	MANNITOL 25 % IV SOLN	0517-4050-25	J2150	\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	MANNITOL 25 % IV SOLN	0409-4031-16	J2150	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	DEXAMETHASONE 0.5 MG/ML ORAL SOLN (NICU)	99999-029-00	J8540	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	MEDROXYPROGESTERONE ACETATE 10 MG PO TABS	0555-0779-02	A9270	\$0.71	\$0.70	\$0.70	\$0.66	\$0.70
Inpatient/Outpatient	MEDROXYPROGESTERONE ACETATE 2.5 MG PO TABS	59762-3740-1	A9270	\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	MEDROXYPROGESTERONE ACETATE 2.5 MG PO TABS	0555-0872-02	A9270	\$0.41	\$0.40	\$0.41	\$0.38	\$0.40
Inpatient/Outpatient	MEDROXYPROGESTERONE ACETATE 2.5 MG PO TABS	59762-0055-1	A9270	\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	MEGESTROL ACETATE 20 MG PO TABS	49884-289-01	A9270	\$0.37	\$0.36	\$0.37	\$0.34	\$0.36
Inpatient/Outpatient	MEGESTROL ACETATE 20 MG PO TABS	51079-434-01	A9270	\$1.68	\$1.66	\$1.66	\$1.55	\$1.65
Inpatient/Outpatient	MEGESTROL ACETATE 40 MG PO TABS	0904-3571-61	A9270	\$0.91	\$0.89	\$0.90	\$0.84	\$0.89
Inpatient/Outpatient	MEGESTROL ACETATE 40 MG PO TABS	63739-165-10	A9270	\$0.93	\$0.91	\$0.92	\$0.86	\$0.91
Inpatient/Outpatient	MEGESTROL ACETATE 40 MG PO TABS	49884-290-04	A9270	\$0.79	\$0.77	\$0.78	\$0.73	\$0.77
Inpatient/Outpatient	MEPERIDINE HCL 25 MG/ML IJ SOLN	0409-1176-03	J2175	\$26.75	\$26.22	\$26.48	\$24.69	\$26.22
Inpatient/Outpatient	MEPERIDINE HCL 25 MG/ML IJ SOLN	0409-1176-30	J2175	\$26.81	\$26.27	\$26.54	\$24.75	\$26.27
Inpatient/Outpatient	MEPERIDINE HCL 25 MG/ML IJ SOLN	0641-6052-01	J2175	\$4.39	\$4.30	\$4.35	\$4.05	\$4.30
Inpatient/Outpatient	MEPERIDINE HCL 25 MG/ML IJ SOLN	0641-6052-25	J2175	\$11.47	\$11.24	\$11.36	\$10.59	\$11.24
Inpatient/Outpatient	MEPERIDINE HCL 25 MG/ML IJ SOLN	0409-1362-11	J2175	\$26.55	\$26.02	\$26.28	\$24.51	\$26.02
Inpatient/Outpatient	MEPERIDINE HCL 50 MG/ML IJ SOLN	0409-1178-03	J2175	\$27.10	\$26.56	\$26.83	\$25.01	\$26.56
Inpatient/Outpatient	MEPERIDINE HCL 50 MG/ML IJ SOLN	0641-6053-25	J2175	\$11.95	\$11.71	\$11.83	\$11.03	\$11.71
Inpatient/Outpatient	MEPERIDINE HCL 50 MG/ML IJ SOLN	0409-1253-11	J2175	\$16.03	\$15.71	\$15.87	\$14.80	\$15.71
Inpatient/Outpatient	MEPERIDINE HCL 50 MG/ML IJ SOLN	0641-6053-01	J2175	\$11.95	\$11.71	\$11.83	\$11.03	\$11.71
Inpatient/Outpatient	MEPERIDINE HCL 50 MG/ML IJ SOLN	0409-1178-30	J2175	\$26.51	\$25.98	\$26.24	\$24.47	\$25.98
Inpatient/Outpatient	HYDROMORPHONE HCL PF 4 MG/ML IJ SOLN	63323-854-03	J1170	\$14.76	\$14.46	\$14.61	\$13.62	\$14.46
Inpatient/Outpatient	MEPIVACAINE HCL 1 % IJ SOLN	0409-1038-50	J0670	\$0.60	\$0.59	\$0.59	\$0.55	\$0.59
Inpatient/Outpatient	BUPIVACAINE-EPINEPHRINE (PF) 0.25% -1:200000 IJ SOLN	0409-9042-17		\$0.41	\$0.40	\$0.41	\$0.38	\$0.40
Inpatient/Outpatient	BUPIVACAINE-EPINEPHRINE (PF) 0.25% -1:200000 IJ SOLN	0409-9042-01		\$1.72	\$1.69	\$1.70	\$1.59	\$1.69
Inpatient/Outpatient	BUPIVACAINE-EPINEPHRINE (PF) 0.25% -1:200000 IJ SOLN	0409-1746-70		\$1.45	\$1.42	\$1.44	\$1.34	\$1.42
Inpatient/Outpatient	BUPIVACAINE-EPINEPHRINE (PF) 0.25% -1:200000 IJ SOLN	0409-1746-71		\$1.18	\$1.16	\$1.17	\$1.09	\$1.16

Inpatient/Outpatient	BUPIVACAINE-EPINEPHRINE (PF) 0.25% -1:200000 IJ SOLN	0409-9042-11	\$1.72	\$1.69	\$1.70	\$1.59	\$1.69
Inpatient/Outpatient	BUPIVACAINE-EPINEPHRINE (PF) 0.25% -1:200000 IJ SOLN	63323-468-37	\$0.96	\$0.94	\$0.95	\$0.89	\$0.94
Inpatient/Outpatient	BUPIVACAINE-EPINEPHRINE (PF) 0.25% -1:200000 IJ SOLN	63323-468-17	\$1.82	\$1.78	\$1.80	\$1.68	\$1.78
Inpatient/Outpatient	BUPIVACAINE-EPINEPHRINE (PF) 0.25% -1:200000 IJ SOLN	63323-468-01	\$1.65	\$1.62	\$1.63	\$1.52	\$1.62
Inpatient/Outpatient	BUPIVACAINE-EPINEPHRINE (PF) 0.25% -1:200000 IJ SOLN	63323-468-02	\$0.96	\$0.94	\$0.95	\$0.89	\$0.94
Inpatient/Outpatient	METHADONE HCL 10 MG PO TABS	0054-8554-24 A9270	\$1.70	\$1.67	\$1.68	\$1.57	\$1.67
Inpatient/Outpatient	METHADONE HCL 10 MG PO TABS	0406-5771-62 A9270	\$0.84	\$0.82	\$0.83	\$0.78	\$0.82
Inpatient/Outpatient	METHADONE HCL 10 MG PO TABS	68084-738-11 A9270	\$1.13	\$1.11	\$1.12	\$1.04	\$1.11
Inpatient/Outpatient	METHADONE HCL 10 MG PO TABS	0904-6530-61 A9270	\$1.03	\$1.01	\$1.02	\$0.95	\$1.01
Inpatient/Outpatient	METHADONE HCL 10 MG PO TABS	0406-5771-23 A9270	\$0.84	\$0.82	\$0.83	\$0.78	\$0.82
Inpatient/Outpatient	METHADONE HCL 5 MG PO TABS	0054-8553-24 A9270	\$0.87	\$0.85	\$0.86	\$0.80	\$0.85
Inpatient/Outpatient	METHADONE HCL 5 MG PO TABS	60687-214-11 A9270	\$1.07	\$1.05	\$1.06	\$0.99	\$1.05
Inpatient/Outpatient	METHADONE HCL 5 MG PO TABS	0406-5755-23 A9270	\$0.74	\$0.73	\$0.73	\$0.68	\$0.73
Inpatient/Outpatient	MEPERIDINE HCL 100 MG PO TABS	0054-4596-25	\$6.58	\$6.45	\$6.51	\$6.07	\$6.45
Inpatient/Outpatient	METHOCARBAMOL 750 MG PO TABS	0143-1292-01 A9270	\$0.54	\$0.53	\$0.53	\$0.50	\$0.53
Inpatient/Outpatient	METHOCARBAMOL 750 MG PO TABS	63739-167-10 A9270	\$0.80	\$0.78	\$0.79	\$0.74	\$0.78
Inpatient/Outpatient	METHOCARBAMOL 750 MG PO TABS	31722-534-01 A9270	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	METHOCARBAMOL 750 MG PO TABS	31722-534-05 A9270	\$0.65	\$0.64	\$0.64	\$0.60	\$0.64
Inpatient/Outpatient	METHOCARBAMOL 750 MG PO TABS	70010-770-01 A9270	\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	METHOTREXATE 2.5 MG PO TABS	0555-0572-02 J8610	\$11.45	\$11.22	\$11.34	\$10.57	\$11.22
Inpatient/Outpatient	METHOTREXATE 2.5 MG PO TABS	67253-320-10 J8610	\$6.74	\$6.61	\$6.67	\$6.22	\$6.61
Inpatient/Outpatient	METHOTREXATE 2.5 MG PO TABS	51079-670-01 J8610	\$3.52	\$3.45	\$3.48	\$3.25	\$3.45
Inpatient/Outpatient	METHOTREXATE 2.5 MG PO TABS	0054-8550-25 J8610	\$6.15	\$6.03	\$6.09	\$5.68	\$6.03
Inpatient/Outpatient	METHOTREXATE SODIUM 50 MG/2ML IJ SOLN	61703-350-38 J9250	\$11.31	\$11.08	\$11.20	\$10.44	\$11.08
Inpatient/Outpatient	METHOTREXATE SODIUM 1 G IJ SOLR	55390-143-01 J9260	\$293.45	\$287.58	\$290.52	\$270.85	\$287.58
Inpatient/Outpatient	METHYLDOPA 250 MG PO TABS	51079-200-01 A9270	\$0.70	\$0.69	\$0.69	\$0.65	\$0.69
Inpatient/Outpatient	METHYLDOPA 250 MG PO TABS	51079-200-20 A9270	\$0.71	\$0.70	\$0.70	\$0.66	\$0.70
Inpatient/Outpatient	METHYLDOPA 250 MG PO TABS	0093-2931-01 A9270	\$0.32	\$0.31	\$0.32	\$0.30	\$0.31
Inpatient/Outpatient	METHYLDOPATE HCL 250 MG/5ML IV SOLN	0517-8905-10 J0210	\$38.88	\$38.10	\$38.49	\$35.89	\$38.10
Inpatient/Outpatient	METHYLPHENIDATE HCL 10 MG PO TABS	53014-530-07 A9270	\$3.20	\$3.14	\$3.17	\$2.95	\$3.14
Inpatient/Outpatient	METHYLPHENIDATE HCL 10 MG PO TABS	0781-5749-01 A9270	\$3.82	\$3.74	\$3.78	\$3.53	\$3.74
Inpatient/Outpatient	METHYLPHENIDATE HCL 10 MG PO TABS	0078-0440-05 A9270	\$4.25	\$4.17	\$4.21	\$3.92	\$4.17
Inpatient/Outpatient	METHYLPHENIDATE HCL 10 MG PO TABS	0591-5883-01 A9270	\$3.82	\$3.74	\$3.78	\$3.53	\$3.74
Inpatient/Outpatient	METHYLPHENIDATE HCL 10 MG PO TABS	0406-1144-01 A9270	\$2.64	\$2.59	\$2.61	\$2.44	\$2.59
Inpatient/Outpatient	METHYLPHENIDATE HCL 10 MG PO TABS	16714-822-01 A9270	\$0.30	\$0.29	\$0.30	\$0.28	\$0.29
Inpatient/Outpatient	METHYLPHENIDATE HCL 5 MG PO TABS	0781-5748-01 A9270	\$2.74	\$2.69	\$2.71	\$2.53	\$2.69
Inpatient/Outpatient	METHYLPHENIDATE HCL 5 MG PO TABS	0406-1142-01 A9270	\$0.95	\$0.93	\$0.94	\$0.88	\$0.93
Inpatient/Outpatient	METHYLPHENIDATE HCL 5 MG PO TABS	31722-173-01 A9270	\$0.22	\$0.22	\$0.22	\$0.20	\$0.22
Inpatient/Outpatient	METHYLPHENIDATE HCL 5 MG PO TABS	16714-821-01 A9270	\$0.20	\$0.20	\$0.20	\$0.18	\$0.20
Inpatient/Outpatient	METHYLPREDNISOLONE 4 MG PO TABS	0781-5022-01 J7509	\$3.98	\$3.90	\$3.94	\$3.67	\$3.90
Inpatient/Outpatient	METHYLPREDNISOLONE 4 MG PO TABS	59746-001-06 J7509	\$1.56	\$1.53	\$1.54	\$1.44	\$1.53
Inpatient/Outpatient	METHYLPREDNISOLONE 4 MG PO TABS	0904-6574-61 J7509	\$6.04	\$5.92	\$5.98	\$5.57	\$5.92
Inpatient/Outpatient	METHYLPREDNISOLONE 4 MG PO TABS	68084-149-11 J7509	\$6.88	\$6.74	\$6.81	\$6.35	\$6.74
Inpatient/Outpatient	METHYLPREDNISOLONE 4 MG PO TABS	0904-6914-61 J7509	\$6.74	\$6.61	\$6.67	\$6.22	\$6.61
Inpatient/Outpatient	METHYLPREDNISOLONE ACETATE 40 MG/ML IJ SUSP	0009-3073-01 J1030	\$47.82	\$46.86	\$47.34	\$44.14	\$46.86
Inpatient/Outpatient	METHYLPREDNISOLONE ACETATE 40 MG/ML IJ SUSP	0009-3073-03 J1030	\$48.05	\$47.09	\$47.57	\$44.35	\$47.09
Inpatient/Outpatient	METHYLPREDNISOLONE ACETATE 40 MG/ML IJ SUSP	0703-0031-01 J1030	\$27.12	\$26.58	\$26.85	\$25.03	\$26.58
Inpatient/Outpatient	METHYLPREDNISOLONE ACETATE 40 MG/ML IJ SUSP	0703-0031-04 J1030	\$30.39	\$29.78	\$30.09	\$28.05	\$29.78
Inpatient/Outpatient	METHYLPREDNISOLONE ACETATE 40 MG/ML IJ SUSP	16714-088-01 J1030	\$42.38	\$41.53	\$41.96	\$39.12	\$41.53
Inpatient/Outpatient	METHYLPREDNISOLONE ACETATE 40 MG/ML IJ SUSP	70121-1573-1 J1030	\$33.34	\$32.67	\$33.01	\$30.77	\$32.67
Inpatient/Outpatient	METHYLPREDNISOLONE ACETATE 40 MG/ML IJ SUSP	60219-1573-1 J1030	\$33.34	\$32.67	\$33.01	\$30.77	\$32.67
Inpatient/Outpatient	METHYLPREDNISOLONE ACETATE 80 MG/ML IJ SUSP	0009-3475-01 J1040	\$64.78	\$63.48	\$64.13	\$59.79	\$63.48
Inpatient/Outpatient	METHYLPREDNISOLONE ACETATE 80 MG/ML IJ SUSP	0703-0051-01 J1040	\$51.52	\$50.49	\$51.00	\$47.55	\$50.49
Inpatient/Outpatient	METHYLPREDNISOLONE ACETATE 80 MG/ML IJ SUSP	70121-1574-1 J1040	\$38.93	\$38.15	\$38.54	\$35.93	\$38.15
Inpatient/Outpatient	METOCLOPRAMIDE HCL 5 MG/ML IJ SOLN	0703-4502-04 J2765	\$5.21	\$5.11	\$5.16	\$4.81	\$5.11
Inpatient/Outpatient	METOCLOPRAMIDE HCL 5 MG/ML IJ SOLN	0409-3414-01 J2765	\$1.97	\$1.93	\$1.95	\$1.82	\$1.93
Inpatient/Outpatient	METOCLOPRAMIDE HCL 5 MG/ML IJ SOLN	0703-4502-01 J2765	\$0.83	\$0.81	\$0.82	\$0.77	\$0.81
Inpatient/Outpatient	METOCLOPRAMIDE HCL 5 MG/ML IJ SOLN	0409-3414-18 J2765	\$2.49	\$2.44	\$2.47	\$2.30	\$2.44
Inpatient/Outpatient	METOCLOPRAMIDE HCL 5 MG/ML IJ SOLN	23155-240-31 J2765	\$2.33	\$2.28	\$2.31	\$2.15	\$2.28
Inpatient/Outpatient	METOCLOPRAMIDE HCL 10 MG PO TABS	0093-2203-01 A9270	\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	METOCLOPRAMIDE HCL 10 MG PO TABS	0093-2203-05 A9270	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	METOCLOPRAMIDE HCL 10 MG PO TABS	51079-888-20 A9270	\$0.59	\$0.58	\$0.58	\$0.54	\$0.58
Inpatient/Outpatient	METOCLOPRAMIDE HCL 10 MG PO TABS	68084-676-11 A9270	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	METOCLOPRAMIDE HCL 10 MG PO TABS	51079-888-01 A9270	\$0.59	\$0.58	\$0.58	\$0.54	\$0.58
Inpatient/Outpatient	METOCLOPRAMIDE HCL 10 MG PO TABS	60687-631-11 A9270	\$2.22	\$2.18	\$2.20	\$2.05	\$2.18
Inpatient/Outpatient	METOCLOPRAMIDE HCL 5 MG PO TABS	63739-171-10 A9270	\$0.42	\$0.41	\$0.42	\$0.39	\$0.41
Inpatient/Outpatient	METOCLOPRAMIDE HCL 5 MG PO TABS	63739-103-10 A9270	\$0.41	\$0.40	\$0.41	\$0.38	\$0.40
Inpatient/Outpatient	METOCLOPRAMIDE HCL 5 MG PO TABS	51079-886-01 A9270	\$2.74	\$2.69	\$2.71	\$2.53	\$2.69

Inpatient/Outpatient	METOCLOPRAMIDE HCL 5 MG PO TABS	60687-620-11	A9270	\$2.13	\$2.09	\$2.11	\$1.97	\$2.09
Inpatient/Outpatient	METOPROLOL TARTRATE 5 MG/5ML IV SOLN	55390-073-10		\$1.80	\$1.76	\$1.78	\$1.66	\$1.76
Inpatient/Outpatient	METOPROLOL TARTRATE 5 MG/5ML IV SOLN	0143-9873-10		\$2.62	\$2.57	\$2.59	\$2.42	\$2.57
Inpatient/Outpatient	METOPROLOL TARTRATE 5 MG/5ML IV SOLN	0781-3071-95		\$2.18	\$2.14	\$2.16	\$2.01	\$2.14
Inpatient/Outpatient	METOPROLOL TARTRATE 5 MG/5ML IV SOLN	0409-1778-05		\$0.53	\$0.52	\$0.52	\$0.49	\$0.52
Inpatient/Outpatient	METOPROLOL TARTRATE 5 MG/5ML IV SOLN	36000-033-10		\$0.64	\$0.63	\$0.63	\$0.59	\$0.63
Inpatient/Outpatient	METOPROLOL TARTRATE 5 MG/5ML IV SOLN	0143-9660-10		\$2.44	\$2.39	\$2.42	\$2.25	\$2.39
Inpatient/Outpatient	METOPROLOL TARTRATE 5 MG/5ML IV SOLN	0143-9660-01		\$0.44	\$0.43	\$0.44	\$0.41	\$0.43
Inpatient/Outpatient	METOPROLOL TARTRATE 5 MG/5ML IV SOLN	0409-1778-15		\$0.66	\$0.65	\$0.65	\$0.61	\$0.65
Inpatient/Outpatient	METOPROLOL TARTRATE 5 MG/5ML IV SOLN	47781-587-17		\$0.67	\$0.66	\$0.66	\$0.62	\$0.66
Inpatient/Outpatient	METOPROLOL TARTRATE 5 MG/5ML IV SOLN	70860-300-05		\$1.63	\$1.60	\$1.61	\$1.50	\$1.60
Inpatient/Outpatient	METOPROLOL TARTRATE 5 MG/5ML IV SOLN	47781-587-20		\$0.54	\$0.53	\$0.53	\$0.50	\$0.53
Inpatient/Outpatient	METOPROLOL TARTRATE 5 MG/5ML IV SOLN	0143-9873-25		\$0.49	\$0.48	\$0.49	\$0.45	\$0.48
Inpatient/Outpatient	METOPROLOL TARTRATE 5 MG/5ML IV SOLN	72266-122-01		\$0.71	\$0.70	\$0.70	\$0.66	\$0.70
Inpatient/Outpatient	METOPROLOL TARTRATE 5 MG/5ML IV SOLN	72611-740-01		\$0.67	\$0.66	\$0.66	\$0.62	\$0.66
Inpatient/Outpatient	METOPROLOL TARTRATE 100 MG PO TABS	51079-802-01	A9270	\$0.36	\$0.35	\$0.36	\$0.33	\$0.35
Inpatient/Outpatient	METOPROLOL TARTRATE 100 MG PO TABS	51079-802-20	A9270	\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	METOPROLOL TARTRATE 100 MG PO TABS	62584-267-11	A9270	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	METOPROLOL TARTRATE 100 MG PO TABS	0904-6342-61	A9270	\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	METOPROLOL TARTRATE 100 MG PO TABS	0378-0047-01	A9270	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	METOPROLOL TARTRATE 100 MG PO TABS	57237-102-01	A9270	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	METOPROLOL TARTRATE 100 MG PO TABS	65862-064-01	A9270	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	METOPROLOL TARTRATE 50 MG PO TABS	51079-801-01	A9270	\$2.78	\$2.72	\$2.75	\$2.57	\$2.72
Inpatient/Outpatient	METOPROLOL TARTRATE 50 MG PO TABS	62584-266-11	A9270	\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	METOPROLOL TARTRATE 50 MG PO TABS	51079-801-20	A9270	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	METOPROLOL TARTRATE 50 MG PO TABS	65862-063-01	A9270	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	METOPROLOL TARTRATE 50 MG PO TABS	0378-0032-01	A9270	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	METRONIDAZOLE 250 MG PO TABS	0904-1453-61	A9270	\$1.12	\$1.10	\$1.11	\$1.03	\$1.10
Inpatient/Outpatient	METRONIDAZOLE 250 MG PO TABS	50111-333-01	A9270	\$1.09	\$1.07	\$1.08	\$1.01	\$1.07
Inpatient/Outpatient	METRONIDAZOLE 250 MG PO TABS	68084-216-11	A9270	\$1.51	\$1.48	\$1.49	\$1.39	\$1.48
Inpatient/Outpatient	METRONIDAZOLE 250 MG PO TABS	29300-226-01	A9270	\$0.78	\$0.76	\$0.77	\$0.72	\$0.76
Inpatient/Outpatient	METRONIDAZOLE 250 MG PO TABS	0904-7156-61	A9270	\$1.04	\$1.02	\$1.03	\$0.96	\$1.02
Inpatient/Outpatient	METRONIDAZOLE 250 MG PO TABS	16571-665-01	A9270	\$0.32	\$0.31	\$0.32	\$0.30	\$0.31
Inpatient/Outpatient	METRONIDAZOLE 250 MG PO TABS	60687-526-11	A9270	\$1.00	\$0.98	\$0.99	\$0.92	\$0.98
Inpatient/Outpatient	METRONIDAZOLE 500 MG PO TABS	63739-176-10	A9270	\$0.37	\$0.36	\$0.37	\$0.34	\$0.36
Inpatient/Outpatient	METRONIDAZOLE 500 MG PO TABS	50111-334-02	A9270	\$2.35	\$2.30	\$2.33	\$2.17	\$2.30
Inpatient/Outpatient	METRONIDAZOLE 500 MG PO TABS	50111-334-01	A9270	\$2.44	\$2.39	\$2.42	\$2.25	\$2.39
Inpatient/Outpatient	METRONIDAZOLE 500 MG PO TABS	51079-217-20	A9270	\$2.72	\$2.67	\$2.69	\$2.51	\$2.67
Inpatient/Outpatient	METRONIDAZOLE 500 MG PO TABS	42292-001-20	A9270	\$3.22	\$3.16	\$3.19	\$2.97	\$3.16
Inpatient/Outpatient	METRONIDAZOLE 500 MG PO TABS	29300-227-01	A9270	\$1.66	\$1.63	\$1.64	\$1.53	\$1.63
Inpatient/Outpatient	METRONIDAZOLE 500 MG PO TABS	60687-424-11	A9270	\$2.17	\$2.13	\$2.15	\$2.00	\$2.13
Inpatient/Outpatient	METRONIDAZOLE 500 MG PO TABS	60687-550-11	A9270	\$2.05	\$2.01	\$2.03	\$1.89	\$2.01
Inpatient/Outpatient	METRONIDAZOLE 500 MG PO TABS	16571-664-01	A9270	\$0.30	\$0.29	\$0.30	\$0.28	\$0.29
Inpatient/Outpatient	METRONIDAZOLE 500 MG PO TABS	0904-7126-61	A9270	\$2.07	\$2.03	\$2.05	\$1.91	\$2.03
Inpatient/Outpatient	METRONIDAZOLE IVPB 500 MG/100ML PREMIX	0338-1055-48	J3490	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	METRONIDAZOLE IVPB 500 MG/100ML PREMIX	0338-9541-24	J3490	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	METRONIDAZOLE IVPB 500 MG/100ML PREMIX	0409-7811-24	J3490	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	MICONAZOLE NITRATE 2 % EX CREA	51672-2001-1	A9270	\$0.79	\$0.77	\$0.78	\$0.73	\$0.77
Inpatient/Outpatient	MICONAZOLE NITRATE 2 % EX CREA	0472-0735-14	A9270	\$0.59	\$0.58	\$0.58	\$0.54	\$0.58
Inpatient/Outpatient	MICONAZOLE NITRATE 2 % EX CREA	65197-103-05	A9270	\$1.36	\$1.33	\$1.35	\$1.26	\$1.33
Inpatient/Outpatient	MICONAZOLE NITRATE 2 % EX CREA	61269-735-14	A9270	\$0.58	\$0.57	\$0.57	\$0.54	\$0.57
Inpatient/Outpatient	MICONAZOLE NITRATE 2 % VA CREA	0472-0730-41	A9270	\$0.32	\$0.31	\$0.32	\$0.30	\$0.31
Inpatient/Outpatient	MICONAZOLE NITRATE 2 % VA CREA	0713-0252-37	A9270	\$0.29	\$0.28	\$0.29	\$0.27	\$0.28
Inpatient/Outpatient	MICONAZOLE NITRATE 2 % VA CREA	0904-7734-57	A9270	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	MICONAZOLE NITRATE 2 % VA CREA	49348-530-77	A9270	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	MICONAZOLE NITRATE 2 % VA CREA	51672-2035-6	A9270	\$0.36	\$0.35	\$0.36	\$0.33	\$0.35
Inpatient/Outpatient	MICONAZOLE NITRATE 2 % VA CREA	63736-44263	A9270	\$37.96	\$37.20	\$37.58	\$35.04	\$37.20
Inpatient/Outpatient	MINERAL OIL PO OIL	0363-0831-43	A9150	\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	MINERAL OIL PO OIL	48433-202-30	A9150	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	MINERAL OIL PO OIL	0869-0831-43	A9150	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	MINERAL OIL RE ENEM	0132-0301-40	A9150	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	MINERAL OIL RE ENEM	49348-185-20	A9150	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	CEFTAZIDIME 2 G IV SOLR	25021-128-50	J0713	\$53.46	\$52.39	\$52.93	\$49.34	\$52.39
Inpatient/Outpatient	CEFTAZIDIME 2 G IV SOLR	25021-128-67	J0713	\$27.16	\$26.62	\$26.89	\$25.07	\$26.62
Inpatient/Outpatient	CEFTAZIDIME 2 G IV SOLR	44567-236-10	J0713	\$25.87	\$25.35	\$25.61	\$23.88	\$25.35
Inpatient/Outpatient	MINOCYCLINE HCL 100 MG PO CAPS	0093-3167-53	A9270	\$0.98	\$0.96	\$0.97	\$0.90	\$0.96
Inpatient/Outpatient	MINOCYCLINE HCL 100 MG PO CAPS	0115-7018-06	A9270	\$1.13	\$1.11	\$1.12	\$1.04	\$1.11
Inpatient/Outpatient	MINOCYCLINE HCL 100 MG PO CAPS	68084-623-11	A9270	\$2.14	\$2.10	\$2.12	\$1.98	\$2.10

Inpatient/Outpatient	MINOCYCLINE HCL 100 MG PO CAPS	50268-569-11	A9270	\$3.67	\$3.60	\$3.63	\$3.39	\$3.60
Inpatient/Outpatient	MINOCYCLINE HCL 100 MG PO CAPS	65862-211-50	A9270	\$1.92	\$1.88	\$1.90	\$1.77	\$1.88
Inpatient/Outpatient	MINOCYCLINE HCL 100 MG PO CAPS	57664-853-85	A9270	\$2.71	\$2.66	\$2.68	\$2.50	\$2.66
Inpatient/Outpatient	SODIUM ZIRCONIUM CYCLOSILICATE 5 G PO PACK	0310-1105-30	A9270	\$86.91	\$85.17	\$86.04	\$80.22	\$85.17
Inpatient/Outpatient	SODIUM ZIRCONIUM CYCLOSILICATE 5 G PO PACK	0310-1105-01	A9270	\$86.91	\$85.17	\$86.04	\$80.22	\$85.17
Inpatient/Outpatient	MINOXIDIL 10 MG PO TABS	0591-5643-01	A9270	\$1.05	\$1.03	\$1.04	\$0.97	\$1.03
Inpatient/Outpatient	MINOXIDIL 10 MG PO TABS	68084-205-11	A9270	\$2.46	\$2.41	\$2.44	\$2.27	\$2.41
Inpatient/Outpatient	MINOXIDIL 2.5 MG PO TABS	0591-5642-01	A9270	\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	MINOXIDIL 2.5 MG PO TABS	53489-386-01	A9270	\$0.96	\$0.94	\$0.95	\$0.89	\$0.94
Inpatient/Outpatient	MINOXIDIL 2.5 MG PO TABS	68084-204-11	A9270	\$2.01	\$1.97	\$1.99	\$1.86	\$1.97
Inpatient/Outpatient	FLUCYTOSINE 10 MG/ML ORAL SUSPENSION	99999-030-00	A9270	\$106.15	\$104.00	\$105.09	\$97.98	\$104.03
Inpatient/Outpatient	MORPHINE SULFATE 10 MG/5ML PO SOLN	0054-0237-63	A9270	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	MORPHINE SULFATE 10 MG/5ML PO SOLN	66689-032-01	A9270	\$2.63	\$2.58	\$2.60	\$2.43	\$2.58
Inpatient/Outpatient	MORPHINE SULFATE 10 MG/5ML PO SOLN	99999-237-05	A9270	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	MORPHINE SULFATE 10 MG/5ML PO SOLN	66689-032-50	A9270	\$0.52	\$0.51	\$0.51	\$0.48	\$0.51
Inpatient/Outpatient	MORPHINE SULFATE 10 MG/5ML PO SOLN	68094-001-59	A9270	\$1.19	\$1.17	\$1.18	\$1.10	\$1.17
Inpatient/Outpatient	MORPHINE SULFATE 10 MG/5ML PO SOLN	0121-0904-05	A9270	\$0.93	\$0.91	\$0.92	\$0.86	\$0.91
Inpatient/Outpatient	MORPHINE SULFATE 10 MG/5ML PO SOLN	0054-0237-49	A9270	\$0.41	\$0.40	\$0.41	\$0.38	\$0.40
Inpatient/Outpatient	MORPHINE SULFATE 15 MG PO TABS	0054-0235-24	A9270	\$1.73	\$1.70	\$1.71	\$1.60	\$1.70
Inpatient/Outpatient	MORPHINE SULFATE 15 MG PO TABS	0054-0235-25	A9270	\$0.93	\$0.91	\$0.92	\$0.86	\$0.91
Inpatient/Outpatient	MORPHINE SULFATE 15 MG PO TABS	60687-617-11	A9270	\$5.02	\$4.92	\$4.97	\$4.63	\$4.92
Inpatient/Outpatient	MORPHINE SULFATE 10 MG RE SUPP	0574-7112-12	A9270	\$21.47	\$21.04	\$21.26	\$19.82	\$21.04
Inpatient/Outpatient	INSULIN REGULAR INFUSION 1 UNIT/ML (HYPERGLYCEMIC EMERGENCY) PREMIX	99999-8215-1	J1817	\$18.23	\$17.87	\$18.05	\$16.83	\$17.87
Inpatient/Outpatient	HYDROCORTISONE 2 MG/ML ORAL SUSPENSION	99999-031-00	A9270	\$7.57	\$7.42	\$7.49	\$6.99	\$7.42
Inpatient/Outpatient	NALOXONE HCL 0.4 MG/ML IJ SOLN	67457-599-00	J2310	\$14.70	\$14.41	\$14.55	\$13.57	\$14.41
Inpatient/Outpatient	NALOXONE HCL 0.4 MG/ML IJ SOLN	67457-292-00	J2310	\$14.70	\$14.41	\$14.55	\$13.57	\$14.41
Inpatient/Outpatient	NALOXONE HCL 0.4 MG/ML IJ SOLN	36000-308-10	J2310	\$22.62	\$22.17	\$22.39	\$20.88	\$22.17
Inpatient/Outpatient	NALOXONE HCL 0.4 MG/ML IJ SOLN	17478-041-01	J2310	\$63.64	\$62.37	\$63.00	\$58.74	\$62.37
Inpatient/Outpatient	NALOXONE HCL 0.4 MG/ML IJ SOLN	0409-1215-01	J2310	\$69.51	\$68.12	\$68.81	\$64.16	\$68.12
Inpatient/Outpatient	NALOXONE HCL 0.4 MG/ML IJ SOLN	0641-6132-01	J2310	\$50.68	\$49.67	\$50.17	\$46.78	\$49.67
Inpatient/Outpatient	HYDROCORTISONE 5 MG/ML ORAL SOLUTION	99999-032-00	A9270	\$7.57	\$7.42	\$7.49	\$6.99	\$7.42
Inpatient/Outpatient	NAPROXEN 250 MG PO TABS	51079-793-01	A9270	\$3.89	\$3.81	\$3.85	\$3.59	\$3.81
Inpatient/Outpatient	NAPROXEN 250 MG PO TABS	0093-0147-19	A9270	\$0.56	\$0.55	\$0.55	\$0.52	\$0.55
Inpatient/Outpatient	NAPROXEN 250 MG PO TABS	51079-793-20	A9270	\$0.86	\$0.84	\$0.85	\$0.79	\$0.84
Inpatient/Outpatient	NAPROXEN 250 MG PO TABS	0093-0147-93	A9270	\$0.56	\$0.55	\$0.55	\$0.52	\$0.55
Inpatient/Outpatient	NAPROXEN 250 MG PO TABS	0904-6069-61	A9270	\$0.30	\$0.29	\$0.30	\$0.28	\$0.29
Inpatient/Outpatient	NAPROXEN 250 MG PO TABS	65162-188-10	A9270	\$0.24	\$0.24	\$0.24	\$0.22	\$0.24
Inpatient/Outpatient	NAPROXEN 250 MG PO TABS	68462-188-01	A9270	\$0.38	\$0.37	\$0.38	\$0.35	\$0.37
Inpatient/Outpatient	NAPROXEN 250 MG PO TABS	50268-594-11	A9270	\$1.00	\$0.98	\$0.99	\$0.92	\$0.98
Inpatient/Outpatient	NAPROXEN 375 MG PO TABS	0093-0148-05	A9270	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	NAPROXEN 375 MG PO TABS	0093-0148-01	A9270	\$0.39	\$0.38	\$0.39	\$0.36	\$0.38
Inpatient/Outpatient	NAPROXEN 375 MG PO TABS	51079-794-01	A9270	\$5.33	\$5.24	\$5.28	\$4.92	\$5.22
Inpatient/Outpatient	NAPROXEN 375 MG PO TABS	50268-595-11	A9270	\$0.87	\$0.85	\$0.86	\$0.80	\$0.85
Inpatient/Outpatient	NAPROXEN 375 MG PO TABS	65162-189-10	A9270	\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	LANSOPRAZOLE 3 MG/ML ORAL SUSPENSION (INFANT/PEDS)	99999-033-00	A9270	\$2.43	\$2.38	\$2.41	\$2.24	\$2.38
Inpatient/Outpatient	NEOMYCIN SULFATE 500 MG PO TABS	51079-015-01	A9270	\$9.60	\$9.41	\$9.50	\$8.86	\$9.41
Inpatient/Outpatient	NEOMYCIN SULFATE 500 MG PO TABS	51079-015-20	A9270	\$2.02	\$1.98	\$2.00	\$1.86	\$1.98
Inpatient/Outpatient	NEOMYCIN SULFATE 500 MG PO TABS	39822-0310-7	A9270	\$3.54	\$3.47	\$3.50	\$3.27	\$3.47
Inpatient/Outpatient	NEOMYCIN SULFATE 500 MG PO TABS	0093-1177-01	A9270	\$3.84	\$3.76	\$3.80	\$3.54	\$3.76
Inpatient/Outpatient	NEOMYCIN SULFATE POWD	51552-969-03	A9270	\$9.11	\$8.93	\$9.02	\$8.41	\$8.93
Inpatient/Outpatient	NEOMYCIN SULFATE POWD	51552-969-04	A9270	\$4.28	\$4.19	\$4.24	\$3.95	\$4.19
Inpatient/Outpatient	NEOMYCIN SULFATE POWD	51552-969-05	A9270	\$3.81	\$3.73	\$3.77	\$3.52	\$3.73
Inpatient/Outpatient	NEOMYCIN-POLYMYXIN-GRAMICIDIN 1.75-10000-.025 OP SOLN	24208-790-62	A9270	\$16.48	\$16.15	\$16.32	\$15.21	\$16.15
Inpatient/Outpatient	NEOSTIGMINE METHYLSULFATE 1 MG/ML IJ SOLN (WRAP)	63323-415-10	J2710	\$1.90	\$1.86	\$1.88	\$1.75	\$1.86
Inpatient/Outpatient	NEOSTIGMINE METHYLSULFATE 1 MG/ML IJ SOLN (WRAP)	0641-6149-10	J2710	\$0.90	\$0.88	\$0.89	\$0.83	\$0.88
Inpatient/Outpatient	NEOSTIGMINE METHYLSULFATE 1 MG/ML IJ SOLN (WRAP)	69374-902-05	J2710	\$19.93	\$19.53	\$19.73	\$18.40	\$19.53
Inpatient/Outpatient	NEOSTIGMINE METHYLSULFATE 1 MG/ML IJ SOLN (WRAP)	42023-189-01	J2710	\$11.51	\$11.28	\$11.39	\$10.62	\$11.28
Inpatient/Outpatient	NEOSTIGMINE METHYLSULFATE 1 MG/ML IJ SOLN (WRAP)	0641-6149-01	J2710	\$2.70	\$2.65	\$2.67	\$2.49	\$2.65
Inpatient/Outpatient	NEOSTIGMINE METHYLSULFATE 1 MG/ML IJ SOLN (WRAP)	62295-3324-5	J2710	\$7.63	\$7.48	\$7.55	\$7.04	\$7.48
Inpatient/Outpatient	NEOSTIGMINE METHYLSULFATE 1 MG/ML IJ SOLN (WRAP)	71449-125-11	J2710	\$7.63	\$7.48	\$7.55	\$7.04	\$7.48
Inpatient/Outpatient	NEOSTIGMINE METHYLSULFATE 1 MG/ML IJ SOLN (WRAP)	63323-415-36	J2710	\$1.90	\$1.86	\$1.88	\$1.75	\$1.86
Inpatient/Outpatient	NEOSTIGMINE METHYLSULFATE 1 MG/ML IJ SOLN (WRAP)	71288-501-10	J2710	\$4.01	\$3.93	\$3.97	\$3.70	\$3.93
Inpatient/Outpatient	NEOSTIGMINE METHYLSULFATE 1 MG/ML IJ SOLN (WRAP)	43598-529-11	J2710	\$1.81	\$1.77	\$1.79	\$1.67	\$1.77
Inpatient/Outpatient	NEOSTIGMINE METHYLSULFATE 1 MG/ML IJ SOLN (WRAP)	70069-806-01	J2710	\$1.64	\$1.61	\$1.62	\$1.51	\$1.61
Inpatient/Outpatient	TRIPHROCAPS 1 MG PO CAPS	0256-0185-04	A9270	\$2.83	\$2.77	\$2.80	\$2.61	\$2.77
Inpatient/Outpatient	TRIPHROCAPS 1 MG PO CAPS	0256-0185-05	A9270	\$2.97	\$2.91	\$2.94	\$2.74	\$2.91
Inpatient/Outpatient	TRIPHROCAPS 1 MG PO CAPS	63044-622-01	A9270	\$0.68	\$0.67	\$0.67	\$0.63	\$0.67
Inpatient/Outpatient	TRIPHROCAPS 1 MG PO CAPS	60258-162-01	A9270	\$2.29	\$2.24	\$2.27	\$2.11	\$2.24

Inpatient/Outpatient	TRIPHROCAPS 1 MG PO CAPS	13811-525-01	A9270	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	TRIPHROCAPS 1 MG PO CAPS	68084-065-11	A9270	\$3.07	\$3.01	\$3.04	\$2.83	\$3.01
Inpatient/Outpatient	TRIPHROCAPS 1 MG PO CAPS	0187-5268-02	A9270	\$26.33	\$25.80	\$26.07	\$24.30	\$25.80
Inpatient/Outpatient	TRIPHROCAPS 1 MG PO CAPS	63044-622-90	A9270	\$3.31	\$3.24	\$3.28	\$3.06	\$3.24
Inpatient/Outpatient	TRIPHROCAPS 1 MG PO CAPS	69543-260-10	A9270	\$0.55	\$0.54	\$0.54	\$0.51	\$0.54
Inpatient/Outpatient	ISAVUCONAZONIUM SULFATE 186 MG PO CAPS	0469-0520-14		\$456.53	\$447.40	\$451.96	\$421.38	\$447.40
Inpatient/Outpatient	GELATIN ABSORBABLE 100 EX MISC	0009-0342-01	A9270	\$86.26	\$84.53	\$85.40	\$79.62	\$84.53
Inpatient/Outpatient	GELATIN ABSORBABLE 100 EX MISC	63713-01974	A9270	\$174.91	\$171.41	\$173.16	\$161.44	\$171.41
Inpatient/Outpatient	FENTANYL INFUSION 50 MCG/ML (ANES)	0409-9093-35	J3010	\$0.92	\$0.90	\$0.91	\$0.85	\$0.90
Inpatient/Outpatient	NIFEDIPINE 10 MG PO CAPS	0228-2497-10	A9270	\$3.87	\$3.79	\$3.83	\$3.57	\$3.79
Inpatient/Outpatient	NIFEDIPINE 10 MG PO CAPS	43386-440-24	A9270	\$1.94	\$1.94	\$1.92	\$1.79	\$1.90
Inpatient/Outpatient	NIFEDIPINE 10 MG PO CAPS	50268-600-11	A9270	\$4.57	\$4.48	\$4.52	\$4.22	\$4.48
Inpatient/Outpatient	NIFEDIPINE 10 MG PO CAPS	69315-211-01	A9270	\$2.62	\$2.57	\$2.59	\$2.42	\$2.57
Inpatient/Outpatient	NIFEDIPINE 10 MG PO CAPS	60687-425-11	A9270	\$4.34	\$4.25	\$4.30	\$4.01	\$4.25
Inpatient/Outpatient	NIFEDIPINE 10 MG PO CAPS	23155-194-01	A9270	\$1.77	\$1.73	\$1.75	\$1.63	\$1.73
Inpatient/Outpatient	NIFEDIPINE 10 MG PO CAPS	59762-1004-1	A9270	\$1.81	\$1.77	\$1.79	\$1.67	\$1.77
Inpatient/Outpatient	DEXAMETHASONE 0.7 MG IZ IMPL	0023-3348-07	J7312	\$2,732.65	\$2,678.00	\$2,705.32	\$2,522.24	\$2,678.00
Inpatient/Outpatient	NITROFURANTOIN MACROCRYSTAL 50 MG PO CAPS	51079-584-01	A9270	\$1.86	\$1.82	\$1.84	\$1.72	\$1.82
Inpatient/Outpatient	NITROFURANTOIN MACROCRYSTAL 50 MG PO CAPS	0093-2130-01	A9270	\$3.31	\$3.24	\$3.28	\$3.06	\$3.24
Inpatient/Outpatient	NITROFURANTOIN MACROCRYSTAL 50 MG PO CAPS	51079-584-20	A9270	\$7.86	\$7.70	\$7.78	\$7.25	\$7.70
Inpatient/Outpatient	NITROFURANTOIN MACROCRYSTAL 50 MG PO CAPS	47781-307-01	A9270	\$2.60	\$2.55	\$2.57	\$2.40	\$2.55
Inpatient/Outpatient	NITROFURANTOIN MACROCRYSTAL 50 MG PO CAPS	68382-559-01	A9270	\$2.25	\$2.21	\$2.23	\$2.08	\$2.21
Inpatient/Outpatient	NITROFURANTOIN MACROCRYSTAL 50 MG PO CAPS	60687-472-11	A9270	\$6.33	\$6.20	\$6.27	\$5.84	\$6.20
Inpatient/Outpatient	NITROGLYCERIN 5 MG/ML IV SOLN	0517-4810-25		\$5.41	\$5.30	\$5.36	\$4.99	\$5.30
Inpatient/Outpatient	NITROGLYCERIN 0.3 MG SL SUBL	0071-0417-24	A9270	\$2.84	\$2.78	\$2.81	\$2.62	\$2.78
Inpatient/Outpatient	NITROGLYCERIN 0.3 MG SL SUBL	43598-435-01	A9270	\$1.15	\$1.13	\$1.14	\$1.06	\$1.13
Inpatient/Outpatient	NITROGLYCERIN 0.3 MG SL SUBL	68462-638-01	A9270	\$1.00	\$0.98	\$0.99	\$0.92	\$0.98
Inpatient/Outpatient	NITROGLYCERIN 0.4 MG SL SUBL	0071-0418-24	A9270	\$2.60	\$2.55	\$2.57	\$2.40	\$2.55
Inpatient/Outpatient	NITROGLYCERIN 0.4 MG SL SUBL	0071-0418-13	A9270	\$6.21	\$6.09	\$6.15	\$5.73	\$6.09
Inpatient/Outpatient	NITROGLYCERIN 0.4 MG SL SUBL	43598-436-11	A9270	\$0.86	\$0.84	\$0.85	\$0.79	\$0.84
Inpatient/Outpatient	NITROGLYCERIN 0.4 MG SL SUBL	68462-639-45	A9270	\$1.66	\$1.63	\$1.64	\$1.53	\$1.63
Inpatient/Outpatient	NITROGLYCERIN 0.4 MG SL SUBL	68462-639-25	A9270	\$1.25	\$1.23	\$1.24	\$1.15	\$1.23
Inpatient/Outpatient	NITROGLYCERIN 0.4 MG SL SUBL	43598-436-35	A9270	\$1.97	\$1.93	\$1.95	\$1.82	\$1.93
Inpatient/Outpatient	NITROGLYCERIN 0.4 MG SL SUBL	59762-3304-3	A9270	\$2.26	\$2.21	\$2.24	\$2.09	\$2.21
Inpatient/Outpatient	NITROGLYCERIN 0.6 MG SL SUBL	0071-0419-24	A9270	\$2.84	\$2.78	\$2.81	\$2.62	\$2.78
Inpatient/Outpatient	NITROGLYCERIN 0.6 MG SL SUBL	68462-640-01	A9270	\$1.00	\$0.98	\$0.99	\$0.92	\$0.98
Inpatient/Outpatient	NORTRIPTYLINE HCL 10 MG PO CAPS	68084-031-01	A9270	\$1.44	\$1.41	\$1.43	\$1.33	\$1.41
Inpatient/Outpatient	NORTRIPTYLINE HCL 10 MG PO CAPS	51672-4001-5	A9270	\$0.20	\$0.20	\$0.20	\$0.18	\$0.20
Inpatient/Outpatient	NORTRIPTYLINE HCL 25 MG PO CAPS	68084-032-11	A9270	\$0.38	\$0.37	\$0.38	\$0.35	\$0.37
Inpatient/Outpatient	NORTRIPTYLINE HCL 25 MG PO CAPS	68084-032-01	A9270	\$1.65	\$1.62	\$1.63	\$1.52	\$1.62
Inpatient/Outpatient	NORTRIPTYLINE HCL 25 MG PO CAPS	51672-4002-1	A9270	\$0.29	\$0.28	\$0.29	\$0.27	\$0.28
Inpatient/Outpatient	NORTRIPTYLINE HCL 25 MG PO CAPS	51672-4002-5	A9270	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	NORTRIPTYLINE HCL 25 MG PO CAPS	50268-604-11	A9270	\$1.56	\$1.53	\$1.54	\$1.44	\$1.53
Inpatient/Outpatient	NORTRIPTYLINE HCL 75 MG PO CAPS	0093-0813-01	A9270	\$2.04	\$2.00	\$2.02	\$1.88	\$2.00
Inpatient/Outpatient	NORTRIPTYLINE HCL 75 MG PO CAPS	0591-5789-01	A9270	\$1.06	\$1.04	\$1.05	\$0.98	\$1.04
Inpatient/Outpatient	NORTRIPTYLINE HCL 75 MG PO CAPS	51672-4004-1	A9270	\$0.87	\$0.85	\$0.86	\$0.80	\$0.85
Inpatient/Outpatient	NYSTATIN 100000 UNIT/GM EX CREA	0168-0054-15	A9270	\$1.08	\$1.06	\$1.07	\$1.00	\$1.06
Inpatient/Outpatient	NYSTATIN 100000 UNIT/GM EX CREA	51672-1289-2	A9270	\$2.08	\$2.04	\$2.06	\$1.92	\$2.04
Inpatient/Outpatient	NYSTATIN 100000 UNIT/GM EX CREA	51672-1289-1	A9270	\$1.41	\$1.38	\$1.40	\$1.30	\$1.38
Inpatient/Outpatient	NYSTATIN 100000 UNIT/GM EX CREA	0603-7818-74	A9270	\$4.17	\$4.09	\$4.13	\$3.85	\$4.09
Inpatient/Outpatient	NYSTATIN 100000 UNIT/GM EX CREA	45802-059-35	A9270	\$1.24	\$1.22	\$1.23	\$1.14	\$1.22
Inpatient/Outpatient	NYSTATIN 100000 UNIT/GM EX CREA	45802-059-11	A9270	\$0.84	\$0.82	\$0.83	\$0.78	\$0.82
Inpatient/Outpatient	NYSTATIN 100000 UNIT/GM EX OINT	45802-048-35	A9270	\$0.97	\$0.95	\$0.96	\$0.90	\$0.95
Inpatient/Outpatient	NYSTATIN 100000 UNIT/GM EX OINT	0168-0007-15	A9270	\$1.56	\$1.53	\$1.54	\$1.44	\$1.53
Inpatient/Outpatient	NYSTATIN 100000 UNIT/GM EX OINT	0472-0166-15	A9270	\$2.90	\$2.84	\$2.87	\$2.68	\$2.84
Inpatient/Outpatient	NYSTATIN 100000 UNIT/GM EX OINT	0713-0686-15	A9270	\$4.22	\$4.14	\$4.18	\$3.90	\$4.14
Inpatient/Outpatient	NYSTATIN 100000 UNIT/ML MT SUSP	60432-537-16	A9270	\$0.24	\$0.24	\$0.24	\$0.22	\$0.24
Inpatient/Outpatient	NYSTATIN 100000 UNIT/ML MT SUSP	51672-4117-4	A9270	\$0.43	\$0.42	\$0.43	\$0.40	\$0.42
Inpatient/Outpatient	NYSTATIN 100000 UNIT/ML MT SUSP	99999-1481-1	A9270	\$0.95	\$0.94	\$0.94	\$0.88	\$0.93
Inpatient/Outpatient	NYSTATIN 100000 UNIT/ML MT SUSP	68094-599-59	A9270	\$5.15	\$5.05	\$5.10	\$4.75	\$5.05
Inpatient/Outpatient	NYSTATIN 100000 UNIT/ML MT SUSP	68094-599-61	A9270	\$0.75	\$0.74	\$0.74	\$0.69	\$0.74
Inpatient/Outpatient	NYSTATIN 100000 UNIT/ML MT SUSP	66689-037-01	A9270	\$2.94	\$2.88	\$2.91	\$2.71	\$2.88
Inpatient/Outpatient	NYSTATIN 100000 UNIT/ML MT SUSP	0121-4785-05	A9270	\$0.81	\$0.79	\$0.80	\$0.75	\$0.79
Inpatient/Outpatient	NYSTATIN 100000 UNIT/ML MT SUSP	50383-587-66	A9270	\$1.03	\$1.01	\$1.02	\$0.95	\$1.01
Inpatient/Outpatient	NYSTATIN 100000 UNIT/ML MT SUSP	0121-4810-05	A9270	\$0.62	\$0.61	\$0.61	\$0.57	\$0.61
Inpatient/Outpatient	NYSTATIN 100000 UNIT/ML MT SUSP	63739-634-56	A9270	\$0.75	\$0.74	\$0.74	\$0.69	\$0.74
Inpatient/Outpatient	NYSTATIN 100000 UNIT/ML MT SUSP	60432-537-60	A9270	\$0.49	\$0.48	\$0.49	\$0.45	\$0.48
Inpatient/Outpatient	NYSTATIN 100000 UNIT/ML MT SUSP	99999-4814-2	A9270	\$0.95	\$0.93	\$0.94	\$0.88	\$0.93

Inpatient/Outpatient	NYSTATIN 100000 UNIT/ML MT SUSP	0121-0810-02	A9270	\$0.64	\$0.63	\$0.63	\$0.59	\$0.63
Inpatient/Outpatient	NYSTATIN 100000 UNIT/ML MT SUSP	0121-0868-02	A9270	\$0.49	\$0.48	\$0.49	\$0.45	\$0.48
Inpatient/Outpatient	NYSTATIN 100000 UNIT/ML MT SUSP	0121-0868-05	A9270	\$0.65	\$0.64	\$0.64	\$0.60	\$0.64
Inpatient/Outpatient	NYSTATIN 100000 UNIT/ML MT SUSP	0121-0868-50	A9270	\$0.62	\$0.61	\$0.61	\$0.57	\$0.61
Inpatient/Outpatient	NYSTATIN-TRIAMCINOLONE 100000-0.1 UNIT/GM-% EX CREA	68462-314-17	A9270	\$4.41	\$4.32	\$4.37	\$4.07	\$4.32
Inpatient/Outpatient	NYSTATIN-TRIAMCINOLONE 100000-0.1 UNIT/GM-% EX CREA	45802-880-14	A9270	\$1.13	\$1.11	\$1.12	\$1.04	\$1.11
Inpatient/Outpatient	NYSTATIN-TRIAMCINOLONE 100000-0.1 UNIT/GM-% EX CREA	51672-1263-1	A9270	\$6.77	\$6.63	\$6.70	\$6.25	\$6.63
Inpatient/Outpatient	NYSTATIN-TRIAMCINOLONE 100000-0.1 UNIT/GM-% EX OINT	0168-0089-15	A9270	\$16.17	\$15.85	\$16.01	\$14.92	\$15.85
Inpatient/Outpatient	NYSTATIN-TRIAMCINOLONE 100000-0.1 UNIT/GM-% EX OINT	51672-1272-1	A9270	\$4.38	\$4.29	\$4.34	\$4.04	\$4.29
Inpatient/Outpatient	NYSTATIN-TRIAMCINOLONE 100000-0.1 UNIT/GM-% EX OINT	51672-1272-2	A9270	\$4.56	\$4.47	\$4.51	\$4.21	\$4.47
Inpatient/Outpatient	NYSTATIN-TRIAMCINOLONE 100000-0.1 UNIT/GM-% EX OINT	68462-799-17	A9270	\$1.98	\$1.94	\$1.96	\$1.83	\$1.94
Inpatient/Outpatient	NYSTATIN-TRIAMCINOLONE 100000-0.1 UNIT/GM-% EX OINT	52565-042-15	A9270	\$1.81	\$1.77	\$1.79	\$1.67	\$1.77
Inpatient/Outpatient	NYSTATIN-TRIAMCINOLONE 100000-0.1 UNIT/GM-% EX OINT	45802-244-14	A9270	\$1.13	\$1.11	\$1.12	\$1.04	\$1.11
Inpatient/Outpatient	HYDROXYCHLOROQUINE SULFATE 25 MG/ML PO SUSP	99999-753-08	A9270	\$0.39	\$0.38	\$0.39	\$0.36	\$0.38
Inpatient/Outpatient	ALTEPLASE (PE) INFUSION 1 MG/ML - 0.5 MG/KG	50242-044-13	J2997	\$8,395.26	\$8,227.35	\$8,311.31	\$7,748.82	\$8,227.35
Inpatient/Outpatient	OPIUM 10 MG/ML (1%) PO TINC	42998-203-01	A9270	\$29.25	\$28.67	\$28.96	\$27.00	\$28.67
Inpatient/Outpatient	OPIUM 10 MG/ML (1%) PO TINC	42799-217-01	A9270	\$15.29	\$14.98	\$15.14	\$14.11	\$14.98
Inpatient/Outpatient	ORA-PLUS PO LIQD	0574-0303-16	A9270	\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	OXACILLIN SODIUM 2 G IJ SOLR	0781-3101-95	J2700	\$104.73	\$102.64	\$103.68	\$96.67	\$102.64
Inpatient/Outpatient	OXACILLIN SODIUM 2 G IJ SOLR	0781-3101-80	J2700	\$95.16	\$93.26	\$94.21	\$87.83	\$93.26
Inpatient/Outpatient	OXACILLIN SODIUM 2 G IJ SOLR	25021-162-67	J2700	\$66.83	\$65.49	\$66.16	\$61.68	\$65.49
Inpatient/Outpatient	OXACILLIN SODIUM 2 G IJ SOLR	55150-128-24	J2700	\$40.20	\$39.40	\$39.80	\$37.10	\$39.40
Inpatient/Outpatient	OXACILLIN SODIUM 2 G IJ SOLR	64679-699-02	J2700	\$42.09	\$41.25	\$41.67	\$38.85	\$41.25
Inpatient/Outpatient	OXACILLIN SODIUM 2 G IJ SOLR	25021-162-24	J2700	\$109.35	\$107.16	\$108.26	\$100.93	\$107.16
Inpatient/Outpatient	OXACILLIN SODIUM 2 G IJ SOLR	70655-109-80	J2700	\$42.99	\$42.13	\$42.56	\$39.68	\$42.13
Inpatient/Outpatient	OXACILLIN SODIUM 2 G IJ SOLR	63323-812-01	J2700	\$34.60	\$33.91	\$34.25	\$31.94	\$33.91
Inpatient/Outpatient	FENTANYL 10 MCG/ML BOLUS FROM INFUSION	33216-2823-0	J3010	\$0.63	\$0.62	\$0.62	\$0.58	\$0.62
Inpatient/Outpatient	OXYCODONE-ACETAMINOPHEN 5-325 MG PO TABS	0406-0512-01	A9270	\$0.87	\$0.85	\$0.86	\$0.80	\$0.85
Inpatient/Outpatient	OXYCODONE-ACETAMINOPHEN 5-325 MG PO TABS	0406-0512-05	A9270	\$0.80	\$0.78	\$0.79	\$0.74	\$0.78
Inpatient/Outpatient	OXYCODONE-ACETAMINOPHEN 5-325 MG PO TABS	0406-0512-62	A9270	\$0.81	\$0.79	\$0.80	\$0.75	\$0.79
Inpatient/Outpatient	OXYCODONE-ACETAMINOPHEN 5-325 MG PO TABS	63481-623-75	A9270	\$0.70	\$0.69	\$0.69	\$0.65	\$0.69
Inpatient/Outpatient	OXYCODONE-ACETAMINOPHEN 5-325 MG PO TABS	0406-0512-23	A9270	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	OXYCODONE-ACETAMINOPHEN 5-325 MG PO TABS	68084-355-11	A9270	\$0.59	\$0.58	\$0.58	\$0.54	\$0.58
Inpatient/Outpatient	OXYCODONE-ACETAMINOPHEN 5-325 MG PO TABS	68084-355-01	A9270	\$1.56	\$1.53	\$1.54	\$1.44	\$1.53
Inpatient/Outpatient	OXYCODONE-ACETAMINOPHEN 5-325 MG PO TABS	0904-6437-61	A9270	\$0.70	\$0.69	\$0.69	\$0.65	\$0.69
Inpatient/Outpatient	OXYCODONE-ACETAMINOPHEN 5-325 MG PO TABS	31722-949-01	A9270	\$0.30	\$0.29	\$0.30	\$0.28	\$0.29
Inpatient/Outpatient	OXYCODONE-ACETAMINOPHEN 5-325 MG PO TABS	0904-7093-61	A9270	\$0.90	\$0.88	\$0.89	\$0.83	\$0.88
Inpatient/Outpatient	OXYMETAZOLINE HCL 0.05 % NA SOLN	45802-410-59	A9270	\$0.21	\$0.21	\$0.21	\$0.19	\$0.21
Inpatient/Outpatient	OXYMETAZOLINE HCL 0.05 % NA SOLN	49348-230-27	A9270	\$0.29	\$0.28	\$0.29	\$0.27	\$0.28
Inpatient/Outpatient	OXYMETAZOLINE HCL 0.05 % NA SOLN	51672-2030-3	A9270	\$1.12	\$1.10	\$1.11	\$1.03	\$1.10
Inpatient/Outpatient	OXYMETAZOLINE HCL 0.05 % NA SOLN	0904-5711-30	A9270	\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	OXYMETAZOLINE HCL 0.05 % NA SOLN	0904-5711-35	A9270	\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	OXYMETAZOLINE HCL 0.05 % NA SOLN	0085-0756-05	A9270	\$1.55	\$1.52	\$1.53	\$1.43	\$1.52
Inpatient/Outpatient	OXYMETAZOLINE HCL 0.05 % NA SOLN	41100-81119	A9270	\$1.50	\$1.47	\$1.49	\$1.38	\$1.47
Inpatient/Outpatient	OXYMETAZOLINE HCL 0.05 % NA SOLN	41100-01511	A9270	\$1.63	\$1.60	\$1.61	\$1.50	\$1.60
Inpatient/Outpatient	OXYMETAZOLINE HCL 0.05 % NA SOLN	23900-01252	A9270	\$1.35	\$1.32	\$1.34	\$1.25	\$1.32
Inpatient/Outpatient	OXYMETAZOLINE HCL 0.05 % NA SOLN	0904-6761-30	A9270	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	OXYMETAZOLINE HCL 0.05 % NA SOLN	0904-7006-35	A9270	\$0.34	\$0.33	\$0.34	\$0.31	\$0.33
Inpatient/Outpatient	OXYTOCIN 10 UNIT/ML IJ SOLN	63323-012-03	J2590	\$13.51	\$13.24	\$13.37	\$12.47	\$13.24
Inpatient/Outpatient	OXYTOCIN 10 UNIT/ML IJ SOLN	42023-116-25	J2590	\$7.06	\$6.92	\$6.99	\$6.52	\$6.92
Inpatient/Outpatient	OXYTOCIN 10 UNIT/ML IJ SOLN	63323-012-02	J2590	\$5.95	\$5.83	\$5.89	\$5.49	\$5.83
Inpatient/Outpatient	PAPAVERINE HCL 30 MG/ML IJ SOLN	66758-015-01	J2440	\$0.92	\$0.90	\$0.91	\$0.85	\$0.90
Inpatient/Outpatient	PAPAVERINE HCL 30 MG/ML IJ SOLN	0517-4002-25	J2440	\$57.11	\$55.97	\$56.54	\$52.71	\$55.97
Inpatient/Outpatient	LEUCOVORIN CALCIUM 350 MG IJ SOLR	55390-054-01	J0640	\$136.27	\$133.54	\$134.91	\$125.78	\$133.54
Inpatient/Outpatient	LEUCOVORIN CALCIUM 350 MG IJ SOLR	0703-5145-01	J0640	\$92.10	\$90.26	\$91.18	\$85.01	\$90.26
Inpatient/Outpatient	LEUCOVORIN CALCIUM 350 MG IJ SOLR	25021-816-30	J0640	\$54.48	\$53.39	\$53.94	\$50.29	\$53.39
Inpatient/Outpatient	LEUCOVORIN CALCIUM 350 MG IJ SOLR	25021-816-67	J0640	\$50.84	\$49.82	\$50.33	\$46.93	\$49.82
Inpatient/Outpatient	LEUCOVORIN CALCIUM 350 MG IJ SOLR	0143-9552-01	J0640	\$67.85	\$66.49	\$67.17	\$62.63	\$66.49
Inpatient/Outpatient	LEUCOVORIN CALCIUM 350 MG IJ SOLR	67457-530-35	J0640	\$56.38	\$55.25	\$55.82	\$52.04	\$55.25
Inpatient/Outpatient	PENICILLIN G POTASSIUM 20000000 UNITS IJ SOLR	0049-0530-28	J2540	\$106.92	\$104.78	\$105.85	\$98.69	\$104.78
Inpatient/Outpatient	PENICILLIN G POTASSIUM 20000000 UNITS IJ SOLR	0781-6136-94	J2540	\$453.53	\$444.46	\$448.99	\$418.61	\$444.46
Inpatient/Outpatient	PENICILLIN G POTASSIUM 20000000 UNITS IJ SOLR	0049-0430-20	J2540	\$101.77	\$99.73	\$100.75	\$93.93	\$99.73
Inpatient/Outpatient	PENICILLIN G POTASSIUM 5000000 UNITS IJ SOLR	0049-0520-83	J2540	\$18.40	\$18.03	\$18.22	\$16.98	\$18.03
Inpatient/Outpatient	PENICILLIN G POTASSIUM 5000000 UNITS IJ SOLR	0049-0520-84	J2540	\$23.26	\$22.79	\$23.03	\$21.47	\$22.79
Inpatient/Outpatient	PENICILLIN G POTASSIUM 5000000 UNITS IJ SOLR	0781-6135-94	J2540	\$29.87	\$29.27	\$29.57	\$27.57	\$29.27
Inpatient/Outpatient	PENICILLIN G POTASSIUM 5000000 UNITS IJ SOLR	0049-0420-05	J2540	\$57.16	\$56.02	\$56.59	\$52.76	\$56.02
Inpatient/Outpatient	PENICILLIN G POTASSIUM 5000000 UNITS IJ SOLR	70860-126-41	J2540	\$58.82	\$57.64	\$58.23	\$54.29	\$57.64
Inpatient/Outpatient	PENICILLIN V POTASSIUM 125 MG/5ML PO SOLR	67253-202-10	A9270	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17

Inpatient/Outpatient	PENICILLIN V POTASSIUM 125 MG/5ML PO SOLR	0093-4125-73	A9270	\$0.29	\$0.28	\$0.29	\$0.27	\$0.28
Inpatient/Outpatient	PENICILLIN V POTASSIUM 250 MG/5ML PO SOLR	0093-4127-73	A9270	\$0.29	\$0.28	\$0.29	\$0.27	\$0.28
Inpatient/Outpatient	PENICILLIN V POTASSIUM 250 MG/5ML PO SOLR	67253-203-10	A9270	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	PENICILLIN V POTASSIUM 250 MG PO TABS	0093-1172-01	A9270	\$2.63	\$2.58	\$2.60	\$2.43	\$2.58
Inpatient/Outpatient	PENICILLIN V POTASSIUM 250 MG PO TABS	0781-1205-01	A9270	\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	PENICILLIN V POTASSIUM 250 MG PO TABS	16714-234-01	A9270	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	PENICILLIN V POTASSIUM 250 MG PO TABS	59762-1534-1	A9270	\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	PENICILLIN V POTASSIUM 250 MG PO TABS	57237-040-01	A9270	\$0.39	\$0.38	\$0.39	\$0.36	\$0.38
Inpatient/Outpatient	PENICILLIN V POTASSIUM 500 MG PO TABS	67253-201-10	A9270	\$3.43	\$3.36	\$3.40	\$3.17	\$3.36
Inpatient/Outpatient	PENICILLIN V POTASSIUM 500 MG PO TABS	67253-201-50	A9270	\$2.07	\$2.03	\$2.05	\$1.91	\$2.03
Inpatient/Outpatient	PENICILLIN V POTASSIUM 500 MG PO TABS	0781-1655-01	A9270	\$0.54	\$0.53	\$0.53	\$0.50	\$0.53
Inpatient/Outpatient	PERPHENAZINE 4 MG PO TABS	0603-5061-21	Q0175	\$4.95	\$4.85	\$4.90	\$4.57	\$4.85
Inpatient/Outpatient	PERPHENAZINE 4 MG PO TABS	0781-1047-13	Q0175	\$7.28	\$7.13	\$7.21	\$6.72	\$7.13
Inpatient/Outpatient	PERPHENAZINE 4 MG PO TABS	68084-602-11	Q0175	\$4.21	\$4.13	\$4.17	\$3.89	\$4.13
Inpatient/Outpatient	PERPHENAZINE 4 MG PO TABS	0904-6600-61	Q0175	\$4.26	\$4.17	\$4.22	\$3.93	\$4.17
Inpatient/Outpatient	PERPHENAZINE 4 MG PO TABS	0591-4102-01	Q0175	\$0.90	\$0.88	\$0.89	\$0.83	\$0.88
Inpatient/Outpatient	PERPHENAZINE 4 MG PO TABS	64980-291-01	Q0175	\$2.11	\$2.07	\$2.09	\$1.95	\$2.07
Inpatient/Outpatient	PHENAZOPYRIDINE HCL 100 MG PO TABS	51293-801-01	A9270	\$7.85	\$7.69	\$7.77	\$7.25	\$7.69
Inpatient/Outpatient	PHENAZOPYRIDINE HCL 100 MG PO TABS	51293-810-01	A9270	\$1.16	\$1.14	\$1.15	\$1.07	\$1.14
Inpatient/Outpatient	PHENAZOPYRIDINE HCL 100 MG PO TABS	75826-114-10	A9270	\$3.89	\$3.81	\$3.85	\$3.59	\$3.81
Inpatient/Outpatient	PHENAZOPYRIDINE HCL 100 MG PO TABS	42192-801-01	A9270	\$1.08	\$1.06	\$1.07	\$1.00	\$1.06
Inpatient/Outpatient	PHENAZOPYRIDINE HCL 100 MG PO TABS	65162-681-10	A9270	\$1.04	\$1.02	\$1.03	\$0.96	\$1.02
Inpatient/Outpatient	PHENAZOPYRIDINE HCL 200 MG PO TABS	65162-520-10	A9270	\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	PHENAZOPYRIDINE HCL 200 MG PO TABS	42192-802-01	A9270	\$1.63	\$1.60	\$1.61	\$1.50	\$1.60
Inpatient/Outpatient	PHENAZOPYRIDINE HCL 200 MG PO TABS	51293-811-01	A9270	\$2.45	\$2.40	\$2.43	\$2.26	\$2.40
Inpatient/Outpatient	PHENAZOPYRIDINE HCL 200 MG PO TABS	65162-682-10	A9270	\$1.56	\$1.53	\$1.54	\$1.44	\$1.53
Inpatient/Outpatient	PHENOBARBITAL 20 MG/5ML PO ELIX	0603-1508-58	A9270	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	PHENOBARBITAL 20 MG/5ML PO ELIX	13517-107-16	A9270	\$0.71	\$0.70	\$0.70	\$0.66	\$0.70
Inpatient/Outpatient	PHENOBARBITAL 20 MG/5ML PO ELIX	54932-501-81	A9270	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	PHENOBARBITAL 20 MG/5ML PO ELIX	16571-675-16	A9270	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	PHENOBARBITAL 100 MG PO TABS	0143-1458-05	A9270	\$1.50	\$1.47	\$1.49	\$1.38	\$1.47
Inpatient/Outpatient	HYDROCODONE-ACETAMINOPHEN 7.5-325 MG/15ML PO SOLN	99999-023-15	A9270	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	HYDROCODONE-ACETAMINOPHEN 7.5-325 MG/15ML PO SOLN	66689-023-16	A9270	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	HYDROCODONE-ACETAMINOPHEN 7.5-325 MG/15ML PO SOLN	66689-023-50	A9270	\$1.12	\$1.10	\$1.11	\$1.03	\$1.10
Inpatient/Outpatient	HYDROCODONE-ACETAMINOPHEN 7.5-325 MG/15ML PO SOLN	66689-023-01	A9270	\$9.82	\$9.62	\$9.72	\$9.06	\$9.62
Inpatient/Outpatient	HYDROCODONE-ACETAMINOPHEN 7.5-325 MG/15ML PO SOLN	60687-417-44	A9270	\$0.86	\$0.84	\$0.85	\$0.79	\$0.84
Inpatient/Outpatient	PHENOBARBITAL 16.2 MG PO TABS	0603-5165-21	A9270	\$2.08	\$2.04	\$2.06	\$1.92	\$2.04
Inpatient/Outpatient	PHENOBARBITAL 16.2 MG PO TABS	63739-200-10	A9270	\$2.11	\$2.07	\$2.09	\$1.95	\$2.07
Inpatient/Outpatient	PHENOBARBITAL 16.2 MG PO TABS	13517-110-01	A9270	\$2.07	\$2.03	\$2.05	\$1.91	\$2.03
Inpatient/Outpatient	PHENOBARBITAL 16.2 MG PO TABS	63739-192-10	A9270	\$2.17	\$2.13	\$2.15	\$2.00	\$2.13
Inpatient/Outpatient	PHENOBARBITAL 16.2 MG PO TABS	51293-625-01	A9270	\$0.37	\$0.36	\$0.37	\$0.34	\$0.36
Inpatient/Outpatient	PHENOBARBITAL 16.2 MG PO TABS	75826-137-10	A9270	\$0.36	\$0.35	\$0.36	\$0.33	\$0.35
Inpatient/Outpatient	PHENOBARBITAL SODIUM 65 MG/ML IJ SOLN	0641-0476-25	J2560	\$92.11	\$90.27	\$91.19	\$85.02	\$90.27
Inpatient/Outpatient	PHENOBARBITAL SODIUM 65 MG/ML IJ SOLN	0641-0476-21	J2560	\$6.21	\$6.09	\$6.15	\$5.73	\$6.09
Inpatient/Outpatient	PHENYLEPHRINE HCL 10 MG/ML IV SOLN	76014-004-25	J2370	\$16.58	\$16.25	\$16.41	\$15.30	\$16.25
Inpatient/Outpatient	PHENYLEPHRINE HCL 10 MG/ML IV SOLN	76014-004-32	J2370	\$23.47	\$23.00	\$23.24	\$21.66	\$23.00
Inpatient/Outpatient	PHENYLEPHRINE HCL 10 MG/ML IV SOLN	76014-004-30	J2370	\$23.47	\$23.00	\$23.24	\$21.66	\$23.00
Inpatient/Outpatient	PHENYLEPHRINE HCL 10 MG/ML IV SOLN	42023-214-01	J2370	\$8.91	\$8.73	\$8.82	\$8.22	\$8.73
Inpatient/Outpatient	PHENYLEPHRINE HCL 10 MG/ML IV SOLN	42023-214-10	J2370	\$8.86	\$8.68	\$8.77	\$8.18	\$8.68
Inpatient/Outpatient	PHENYLEPHRINE HCL 10 MG/ML IV SOLN	0641-6142-01	J2370	\$25.35	\$24.84	\$25.10	\$23.40	\$24.84
Inpatient/Outpatient	PHENYLEPHRINE HCL 10 MG/ML IV SOLN	0641-6188-10	J2370	\$5.88	\$5.76	\$5.82	\$5.43	\$5.76
Inpatient/Outpatient	PHENYLEPHRINE HCL 10 MG/ML IV SOLN	0641-6229-01	J2370	\$13.80	\$13.52	\$13.66	\$12.74	\$13.52
Inpatient/Outpatient	PHENYLEPHRINE HCL 10 MG/ML IV SOLN	0781-3458-95	J2370	\$21.38	\$20.95	\$21.17	\$19.73	\$20.95
Inpatient/Outpatient	PHENYLEPHRINE HCL 10 MG/ML IV SOLN	0781-3422-71	J2370	\$9.41	\$9.22	\$9.32	\$8.69	\$9.22
Inpatient/Outpatient	PHENYLEPHRINE HCL 10 MG/ML IV SOLN	25021-315-99	J2370	\$17.11	\$16.77	\$16.94	\$15.79	\$16.77
Inpatient/Outpatient	PHENYLEPHRINE HCL 10 MG/ML IV SOLN	51754-4000-1	J2370	\$6.33	\$6.20	\$6.27	\$5.84	\$6.20
Inpatient/Outpatient	PHENYLEPHRINE HCL 10 MG/ML IV SOLN	0641-6188-01	J2370	\$5.88	\$5.76	\$5.82	\$5.43	\$5.76
Inpatient/Outpatient	PHENYLEPHRINE HCL 10 MG/ML IV SOLN	61990-0212-0	J2370	\$4.52	\$4.43	\$4.47	\$4.17	\$4.43
Inpatient/Outpatient	PHENYLEPHRINE HCL 10 MG/ML IV SOLN	71288-808-75	J2370	\$5.34	\$5.23	\$5.29	\$4.93	\$5.23
Inpatient/Outpatient	PHENYLEPHRINE HCL 0.25 % NA SOLN	0024-1348-03	A9150	\$1.00	\$0.98	\$0.99	\$0.92	\$0.98
Inpatient/Outpatient	PHENYLEPHRINE HCL 0.25 % NA SOLN	69536-025-15	A9150	\$0.96	\$0.94	\$0.95	\$0.89	\$0.94
Inpatient/Outpatient	PHENYLEPHRINE HCL 0.25 % NA SOLN	0225-0800-47	A9150	\$0.99	\$0.97	\$0.98	\$0.91	\$0.97
Inpatient/Outpatient	PHENYLEPHRINE HCL 0.5 % NA SOLN	69536-050-15	A9270	\$0.96	\$0.94	\$0.95	\$0.89	\$0.94
Inpatient/Outpatient	PHENYLEPHRINE HCL 0.5 % NA SOLN	0225-0805-47	A9270	\$0.99	\$0.97	\$0.98	\$0.91	\$0.97
Inpatient/Outpatient	PHENYLEPHRINE HCL 1 % NA SOLN	49348-197-27	A9270	\$0.37	\$0.36	\$0.37	\$0.34	\$0.36
Inpatient/Outpatient	PHENYLEPHRINE HCL 1 % NA SOLN	37205-483-10	A9270	\$7.78	\$7.70	\$7.70	\$7.18	\$7.62
Inpatient/Outpatient	PHENYLEPHRINE HCL 1 % NA SOLN	0024-1355-05	A9270	\$1.12	\$1.10	\$1.11	\$1.03	\$1.10
Inpatient/Outpatient	PHENYLEPHRINE HCL 1 % NA SOLN	69536-100-15	A9270	\$1.07	\$1.05	\$1.06	\$0.99	\$1.05

Inpatient/Outpatient	PHENYLEPHRINE HCL 1 % NA SOLN	0225-0810-47	A9270	\$1.11	\$1.09	\$1.10	\$1.02	\$1.09
Inpatient/Outpatient	PHENYLEPHRINE HCL 1 % NA SOLN	0067-2086-01	A9270	\$0.80	\$0.78	\$0.79	\$0.74	\$0.78
Inpatient/Outpatient	PHENYLEPHRINE HCL 2.5 % OP SOLN	17478-200-12	A9270	\$1.87	\$1.83	\$1.85	\$1.73	\$1.83
Inpatient/Outpatient	PHENYLEPHRINE HCL 2.5 % OP SOLN	17478-200-20	A9270	\$9.14	\$8.96	\$9.05	\$8.44	\$8.96
Inpatient/Outpatient	PHENYLEPHRINE HCL 2.5 % OP SOLN	24208-740-59	A9270	\$24.83	\$24.33	\$24.58	\$22.92	\$24.33
Inpatient/Outpatient	PHENYLEPHRINE HCL 2.5 % OP SOLN	17478-201-15	A9270	\$24.33	\$23.84	\$24.09	\$22.46	\$23.84
Inpatient/Outpatient	PHENYLEPHRINE HCL 2.5 % OP SOLN	61314-342-01	A9270	\$16.49	\$16.16	\$16.33	\$15.22	\$16.16
Inpatient/Outpatient	PHENYLEPHRINE HCL 2.5 % OP SOLN	17478-201-02	A9270	\$69.77	\$68.37	\$69.07	\$64.40	\$68.37
Inpatient/Outpatient	PHENYLEPHRINE HCL 2.5 % OP SOLN	42702-102-15	A9270	\$27.12	\$26.58	\$26.85	\$25.03	\$26.58
Inpatient/Outpatient	PHENYTOIN 125 MG/5ML PO SUSP (100 MG/4ML)	60432-131-08	A9270	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	PHENYTOIN 125 MG/5ML PO SUSP (100 MG/4ML)	0071-2214-20	A9270	\$3.24	\$3.18	\$3.21	\$2.99	\$3.18
Inpatient/Outpatient	PHENYTOIN 125 MG/5ML PO SUSP (100 MG/4ML)	99999-2214-5	A9270	\$3.24	\$3.18	\$3.21	\$2.99	\$3.18
Inpatient/Outpatient	PHENYTOIN 125 MG/5ML PO SUSP (100 MG/4ML)	66689-036-01	A9270	\$2.27	\$2.22	\$2.25	\$2.10	\$2.22
Inpatient/Outpatient	PHENYTOIN 125 MG/5ML PO SUSP (100 MG/4ML)	0121-0892-63	A9270	\$3.40	\$3.33	\$3.37	\$3.14	\$3.33
Inpatient/Outpatient	PHENYTOIN SODIUM 50 MG/ML IJ SOLN	0641-2555-45	J1165	\$1.62	\$1.59	\$1.60	\$1.50	\$1.59
Inpatient/Outpatient	PHENYTOIN SODIUM 50 MG/ML IJ SOLN	0641-0493-25	J1165	\$2.83	\$2.77	\$2.80	\$2.61	\$2.77
Inpatient/Outpatient	PHENYTOIN SODIUM 50 MG/ML IJ SOLN	0641-0493-21	J1165	\$2.58	\$2.53	\$2.55	\$2.38	\$2.53
Inpatient/Outpatient	PHENYTOIN SODIUM 50 MG/ML IJ SOLN	0641-2555-41	J1165	\$1.48	\$1.45	\$1.47	\$1.37	\$1.45
Inpatient/Outpatient	PHENYTOIN SODIUM EXTENDED 100 MG PO CAPS	0071-0369-40	A9270	\$7.12	\$6.98	\$7.05	\$6.57	\$6.98
Inpatient/Outpatient	PHENYTOIN SODIUM EXTENDED 100 MG PO CAPS	51079-905-01	A9270	\$1.20	\$1.18	\$1.19	\$1.11	\$1.18
Inpatient/Outpatient	PHENYTOIN SODIUM EXTENDED 100 MG PO CAPS	0904-6187-61	A9270	\$1.93	\$1.89	\$1.91	\$1.78	\$1.89
Inpatient/Outpatient	PHENYTOIN SODIUM EXTENDED 100 MG PO CAPS	68084-376-11	A9270	\$1.72	\$1.69	\$1.70	\$1.59	\$1.69
Inpatient/Outpatient	PHYTONADIONE 1 MG/0.5ML IJ SOLN (NICU/INFANT/PEDS)	0409-9157-01	J3430	\$36.63	\$35.90	\$36.26	\$33.81	\$35.90
Inpatient/Outpatient	PHYTONADIONE 1 MG/0.5ML IJ SOLN (NICU/INFANT/PEDS)	76329-1240-1	J3430	\$188.35	\$184.58	\$186.47	\$173.85	\$184.58
Inpatient/Outpatient	PILOCARPINE HCL 1 % OP SOLN	61314-203-15	A9270	\$24.90	\$24.40	\$24.65	\$22.98	\$24.40
Inpatient/Outpatient	PILOCARPINE HCL 1 % OP SOLN	17478-223-12	A9270	\$13.30	\$13.03	\$13.17	\$12.28	\$13.03
Inpatient/Outpatient	PILOCARPINE HCL 1 % OP SOLN	70069-181-01	A9270	\$12.06	\$11.82	\$11.94	\$11.13	\$11.82
Inpatient/Outpatient	PILOCARPINE HCL 2 % OP SOLN	61314-204-15	A9270	\$21.13	\$20.71	\$20.92	\$19.50	\$20.71
Inpatient/Outpatient	PILOCARPINE HCL 2 % OP SOLN	17478-224-12	A9270	\$13.54	\$13.27	\$13.40	\$12.50	\$13.27
Inpatient/Outpatient	OXYTOCIN-LACTATED RINGERS 30 UNIT/500ML IV SOLN	61553-766-03	J2590	\$0.08	\$0.08	\$0.08	\$0.07	\$0.08
Inpatient/Outpatient	PILOCARPINE HCL 4 % OP SOLN	61314-206-15	A9270	\$25.63	\$25.12	\$25.37	\$23.66	\$25.12
Inpatient/Outpatient	PILOCARPINE HCL 4 % OP SOLN	17478-226-12	A9270	\$13.97	\$13.69	\$13.83	\$12.89	\$13.69
Inpatient/Outpatient	PILOCARPINE HCL 4 % OP SOLN	70069-201-01	A9270	\$13.27	\$13.00	\$13.14	\$12.25	\$13.00
Inpatient/Outpatient	METRONIDAZOLE 50 MG/ML ORAL SUSPENSION (PEDS)	99999-034-00	A9270	\$1.07	\$1.05	\$1.06	\$0.99	\$1.05
Inpatient/Outpatient	ARIPIPRAZOLE 1 MG/ML PO SOLN	65162-893-74		\$6.59	\$6.46	\$6.52	\$6.08	\$6.46
Inpatient/Outpatient	ARIPIPRAZOLE 1 MG/ML PO SOLN	60505-0404-5		\$6.22	\$6.10	\$6.16	\$5.74	\$6.10
Inpatient/Outpatient	PLASMA PROTEIN FRACTION 5 % IV SOLN	13533-613-25	P9048	\$0.85	\$0.83	\$0.84	\$0.78	\$0.83
Inpatient/Outpatient	POLY-VI-SOL PO SOLN	0087-0402-03	A9150	\$0.74	\$0.73	\$0.73	\$0.68	\$0.73
Inpatient/Outpatient	POLYMYXIN B SULFATE 500000 UNITS IJ SOLR	39822-0166-5		\$32.37	\$31.72	\$32.05	\$29.88	\$31.72
Inpatient/Outpatient	POLYMYXIN B SULFATE 500000 UNITS IJ SOLR	25021-117-10		\$58.32	\$57.15	\$57.74	\$53.83	\$57.15
Inpatient/Outpatient	POLYMYXIN B SULFATE 500000 UNITS IJ SOLR	63323-367-41		\$18.77	\$18.39	\$18.58	\$17.32	\$18.39
Inpatient/Outpatient	POLYMYXIN B SULFATE 500000 UNITS IJ SOLR	63323-367-11		\$18.86	\$18.48	\$18.67	\$17.41	\$18.48
Inpatient/Outpatient	POLYMYXIN B SULFATE 500000 UNITS IJ SOLR	55150-234-10		\$48.60	\$47.63	\$48.11	\$44.86	\$47.63
Inpatient/Outpatient	POLYMYXIN B SULFATE 500000 UNITS IJ SOLR	63323-321-01		\$18.77	\$18.39	\$18.58	\$17.32	\$18.39
Inpatient/Outpatient	POTASSIUM ACETATE 2 MEQ/ML IV SOLN	0409-8183-01		\$0.76	\$0.74	\$0.75	\$0.70	\$0.74
Inpatient/Outpatient	POTASSIUM ACETATE 2 MEQ/ML IV SOLN	0517-2053-25		\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	POTASSIUM ACETATE 2 MEQ/ML IV SOLN	51754-2001-4		\$1.02	\$1.00	\$1.01	\$0.94	\$1.00
Inpatient/Outpatient	POTASSIUM ACETATE 2 MEQ/ML IV SOLN	0409-8183-11		\$0.77	\$0.75	\$0.76	\$0.71	\$0.75
Inpatient/Outpatient	POTASSIUM CHLORIDE 2 MEQ/ML IV SOLN	63323-965-20	J3480	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	POTASSIUM CHLORIDE 2 MEQ/ML IV SOLN	0409-6653-05	J3480	\$0.76	\$0.74	\$0.75	\$0.70	\$0.74
Inpatient/Outpatient	POTASSIUM CHLORIDE 2 MEQ/ML IV SOLN	0409-6651-06	J3480	\$1.28	\$1.25	\$1.27	\$1.18	\$1.25
Inpatient/Outpatient	POTASSIUM CHLORIDE 2 MEQ/ML IV SOLN	0409-6635-18	J3480	\$3.23	\$3.17	\$3.20	\$2.98	\$3.17
Inpatient/Outpatient	POTASSIUM CHLORIDE 2 MEQ/ML IV SOLN	69374-958-05	J3480	\$3.40	\$3.33	\$3.37	\$3.14	\$3.33
Inpatient/Outpatient	POTASSIUM CHLORIDE 2 MEQ/ML IV SOLN	69623-263-35	J3480	\$1.28	\$1.25	\$1.27	\$1.18	\$1.25
Inpatient/Outpatient	POTASSIUM CHLORIDE 2 MEQ/ML IV SOLN	63323-965-02	J3480	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	POTASSIUM CHLORIDE 2 MEQ/ML IV SOLN	0409-6653-18	J3480	\$0.93	\$0.91	\$0.92	\$0.86	\$0.91
Inpatient/Outpatient	MAGNESIUM SULFATE IVPB 4 GM/100ML PREMIX SOLN	0409-6729-22	J3475	\$0.32	\$0.31	\$0.32	\$0.30	\$0.31
Inpatient/Outpatient	MAGNESIUM SULFATE IVPB 4 GM/100ML PREMIX SOLN	0409-6729-23	J3475	\$0.32	\$0.31	\$0.32	\$0.30	\$0.31
Inpatient/Outpatient	MAGNESIUM SULFATE IVPB 4 GM/100ML PREMIX SOLN	63323-106-01	J3475	\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	MAGNESIUM SULFATE IVPB 4 GM/100ML PREMIX SOLN	63323-106-00	J3475	\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	MAGNESIUM SULFATE IVPB 4 GM/100ML PREMIX SOLN	47335-992-02	J3475	\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	POTASSIUM BICARBONATE-CITRIC ACID 10 MEQ PO TBEF	51801-013-30	A9270	\$1.96	\$1.92	\$1.94	\$1.81	\$1.92
Inpatient/Outpatient	POTASSIUM BICARBONATE-CITRIC ACID 10 MEQ PO TBEF	51801-013-01	A9270	\$1.96	\$1.92	\$1.94	\$1.81	\$1.92
Inpatient/Outpatient	POTASSIUM IODIDE (EXPECTORANT) 1 GM/ML PO SOLN	0245-0003-31	A9270	\$1.69	\$1.66	\$1.67	\$1.56	\$1.66
Inpatient/Outpatient	POTASSIUM IODIDE (EXPECTORANT) 1 GM/ML PO SOLN	71740-112-30	A9270	\$59.22	\$58.04	\$58.63	\$54.66	\$58.04
Inpatient/Outpatient	POTASSIUM PHOSPHATES 15 MMOLE/5ML IV SOLN	63323-086-05		\$7.82	\$7.66	\$7.74	\$7.22	\$7.66
Inpatient/Outpatient	POTASSIUM PHOSPHATES 15 MMOLE/5ML IV SOLN	99999-086-05		\$3.86	\$3.78	\$3.82	\$3.56	\$3.78
Inpatient/Outpatient	POTASSIUM PHOSPHATES 15 MMOLE/5ML IV SOLN	99999-086-10		\$3.86	\$3.78	\$3.82	\$3.56	\$3.78

Inpatient/Outpatient	POTASSIUM PHOSPHATES 15 MMOLE/5ML IV SOLN	65219-052-09		\$18.08	\$17.72	\$17.90	\$16.69	\$17.72
Inpatient/Outpatient	POVIDONE-IODINE 10 % EX OINT	0904-1102-31	A9270	\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	POVIDONE-IODINE 10 % EX OINT	0536-1271-80	A9270	\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	ALTEPLASE (PE) IV BOLUS DOSE - 10 MG	50242-085-27	J2997	\$12,940.99	\$12,682.17	\$12,811.58	\$11,944.53	\$12,682.17
Inpatient/Outpatient	PRAZOSIN HCL 1 MG PO CAPS	51079-630-01	A9270	\$1.43	\$1.40	\$1.42	\$1.32	\$1.40
Inpatient/Outpatient	PRAZOSIN HCL 1 MG PO CAPS	51079-630-20	A9270	\$4.69	\$4.60	\$4.64	\$4.33	\$4.60
Inpatient/Outpatient	PRAZOSIN HCL 1 MG PO CAPS	59762-5310-1	A9270	\$0.97	\$0.95	\$0.96	\$0.90	\$0.95
Inpatient/Outpatient	PRAZOSIN HCL 1 MG PO CAPS	0378-1101-01	A9270	\$1.46	\$1.43	\$1.45	\$1.35	\$1.43
Inpatient/Outpatient	PRAZOSIN HCL 1 MG PO CAPS	68084-996-11	A9270	\$5.06	\$4.96	\$5.01	\$4.67	\$4.96
Inpatient/Outpatient	PRAZOSIN HCL 1 MG PO CAPS	70954-019-10	A9270	\$0.71	\$0.70	\$0.70	\$0.66	\$0.70
Inpatient/Outpatient	PRAZOSIN HCL 1 MG PO CAPS	0904-7020-61	A9270	\$4.34	\$4.25	\$4.30	\$4.01	\$4.25
Inpatient/Outpatient	PRAZOSIN HCL 5 MG PO CAPS	51079-632-01	A9270	\$3.18	\$3.12	\$3.15	\$2.94	\$3.12
Inpatient/Outpatient	PRAZOSIN HCL 5 MG PO CAPS	51079-632-20	A9270	\$13.00	\$12.74	\$12.87	\$12.00	\$12.74
Inpatient/Outpatient	PRAZOSIN HCL 5 MG PO CAPS	59762-5350-1	A9270	\$1.91	\$1.87	\$1.89	\$1.76	\$1.87
Inpatient/Outpatient	HYPROMELLOSE 0.5 % OP SOLN	0998-0408-15	A9270	\$8.03	\$7.87	\$7.95	\$7.41	\$7.87
Inpatient/Outpatient	PREDNISOLONE ACETATE 1 % OP SUSP	61314-637-05	A9270	\$39.72	\$38.93	\$39.32	\$36.66	\$38.93
Inpatient/Outpatient	PREDNISOLONE ACETATE 1 % OP SUSP	60758-119-05	A9270	\$22.41	\$21.96	\$22.19	\$20.68	\$21.96
Inpatient/Outpatient	PREDNISOLONE ACETATE 1 % OP SUSP	11980-180-05	A9270	\$117.53	\$115.18	\$116.35	\$108.48	\$115.18
Inpatient/Outpatient	PREDNISOLONE SODIUM PHOSPHATE 1 % OP SOLN	24208-715-10	A9270	\$23.79	\$23.31	\$23.55	\$21.96	\$23.31
Inpatient/Outpatient	PREDNISON 5 MG/5ML PO SOLN	0054-3722-63	J7512	\$2.64	\$2.59	\$2.61	\$2.44	\$2.59
Inpatient/Outpatient	PREDNISON 1 MG PO TABS	0054-4741-25	J7512	\$0.73	\$0.72	\$0.72	\$0.67	\$0.72
Inpatient/Outpatient	PREDNISON 1 MG PO TABS	0054-8739-25	J7512	\$0.77	\$0.75	\$0.76	\$0.71	\$0.75
Inpatient/Outpatient	PREDNISON 1 MG PO TABS	0603-5335-21	J7512	\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	PREDNISON 1 MG PO TABS	0603-5335-32	J7512	\$0.64	\$0.63	\$0.63	\$0.59	\$0.63
Inpatient/Outpatient	PREDNISON 10 MG PO TABS	0054-0017-20	J7512	\$0.59	\$0.58	\$0.58	\$0.54	\$0.58
Inpatient/Outpatient	PREDNISON 10 MG PO TABS	0054-0017-25	J7512	\$0.63	\$0.62	\$0.62	\$0.58	\$0.62
Inpatient/Outpatient	PREDNISON 10 MG PO TABS	63739-208-10	J7512	\$0.20	\$0.20	\$0.20	\$0.18	\$0.20
Inpatient/Outpatient	PREDNISON 10 MG PO TABS	0603-5338-21	J7512	\$0.61	\$0.60	\$0.60	\$0.56	\$0.60
Inpatient/Outpatient	PREDNISON 10 MG PO TABS	0143-9739-01	J7512	\$0.55	\$0.54	\$0.54	\$0.51	\$0.54
Inpatient/Outpatient	PREDNISON 10 MG PO TABS	59746-173-06	J7512	\$0.62	\$0.61	\$0.61	\$0.57	\$0.61
Inpatient/Outpatient	PREDNISON 10 MG PO TABS	60687-134-11	J7512	\$0.80	\$0.78	\$0.79	\$0.74	\$0.78
Inpatient/Outpatient	PREDNISON 10 MG PO TABS	59746-173-10	J7512	\$0.48	\$0.47	\$0.48	\$0.44	\$0.47
Inpatient/Outpatient	PREDNISON 10 MG PO TABS	0054-0017-29	J7512	\$0.63	\$0.62	\$0.62	\$0.58	\$0.62
Inpatient/Outpatient	PREDNISON 10 MG PO TABS	0904-6923-61	J7512	\$0.50	\$0.49	\$0.50	\$0.46	\$0.49
Inpatient/Outpatient	PREDNISON 20 MG PO TABS	0054-0018-20	J7512	\$0.70	\$0.69	\$0.69	\$0.65	\$0.69
Inpatient/Outpatient	PREDNISON 20 MG PO TABS	63739-209-10	J7512	\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	PREDNISON 20 MG PO TABS	0591-5443-01	J7512	\$0.99	\$0.97	\$0.98	\$0.91	\$0.97
Inpatient/Outpatient	PREDNISON 20 MG PO TABS	63739-520-10	J7512	\$0.63	\$0.62	\$0.62	\$0.58	\$0.62
Inpatient/Outpatient	PREDNISON 20 MG PO TABS	0143-9738-10	J7512	\$0.52	\$0.51	\$0.51	\$0.48	\$0.51
Inpatient/Outpatient	PREDNISON 20 MG PO TABS	0054-0018-29	J7512	\$1.00	\$0.98	\$0.99	\$0.92	\$0.98
Inpatient/Outpatient	PREDNISON 20 MG PO TABS	63739-588-10	J7512	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	PREDNISON 20 MG PO TABS	60687-145-11	J7512	\$0.73	\$0.72	\$0.72	\$0.67	\$0.72
Inpatient/Outpatient	PREDNISON 20 MG PO TABS	0603-5339-32	J7512	\$0.67	\$0.66	\$0.66	\$0.62	\$0.66
Inpatient/Outpatient	PREDNISON 20 MG PO TABS	0904-7127-61	J7512	\$0.54	\$0.53	\$0.53	\$0.50	\$0.53
Inpatient/Outpatient	PREDNISON 5 MG PO TABS	0054-8724-25	J7512	\$0.49	\$0.48	\$0.49	\$0.45	\$0.48
Inpatient/Outpatient	PREDNISON 5 MG PO TABS	63739-207-10	J7512	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	PREDNISON 5 MG PO TABS	0143-1475-01	J7512	\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	PREDNISON 5 MG PO TABS	60687-122-11	J7512	\$0.56	\$0.55	\$0.55	\$0.52	\$0.55
Inpatient/Outpatient	PREDNISON 5 MG PO TABS	59746-172-06	J7512	\$0.42	\$0.41	\$0.42	\$0.39	\$0.41
Inpatient/Outpatient	PREDNISON 5 MG PO TABS	0603-5337-32	J7512	\$0.78	\$0.76	\$0.77	\$0.72	\$0.76
Inpatient/Outpatient	PRIMAQUINE PHOSPHATE 26.3 (15 BASE) MG PO TABS	0024-1596-01	A9270	\$8.84	\$8.66	\$8.75	\$8.16	\$8.66
Inpatient/Outpatient	PRIMAQUINE PHOSPHATE 26.3 (15 BASE) MG PO TABS	76385-102-01	A9270	\$6.50	\$6.37	\$6.44	\$6.00	\$6.37
Inpatient/Outpatient	PRIMIDONE 250 MG PO TABS	0115-1031-01	A9270	\$4.15	\$4.07	\$4.11	\$3.83	\$4.07
Inpatient/Outpatient	PRIMIDONE 250 MG PO TABS	65162-545-10	A9270	\$0.63	\$0.62	\$0.62	\$0.58	\$0.62
Inpatient/Outpatient	PRIMIDONE 250 MG PO TABS	68084-203-11	A9270	\$2.67	\$2.62	\$2.64	\$2.46	\$2.62
Inpatient/Outpatient	PROBENECID 500 MG PO TABS	0591-5347-01	A9270	\$2.48	\$2.43	\$2.46	\$2.29	\$2.43
Inpatient/Outpatient	PROBENECID 500 MG PO TABS	0527-1367-01	A9270	\$5.39	\$5.28	\$5.34	\$4.97	\$5.28
Inpatient/Outpatient	PROBENECID 500 MG PO TABS	10135-541-10	A9270	\$2.84	\$2.78	\$2.81	\$2.62	\$2.78
Inpatient/Outpatient	PROBENECID 500 MG PO TABS	10135-541-01	A9270	\$3.26	\$3.19	\$3.23	\$3.01	\$3.19
Inpatient/Outpatient	PROCAINAMIDE HCL 100 MG/ML IJ SOLN	0409-1902-01	J2690	\$25.78	\$25.26	\$25.52	\$23.79	\$25.26
Inpatient/Outpatient	PROCAINAMIDE HCL 100 MG/ML IJ SOLN	14789-900-10	J2690	\$27.91	\$27.35	\$27.63	\$25.76	\$27.35
Inpatient/Outpatient	PROCAINAMIDE HCL 100 MG/ML IJ SOLN	14789-901-07	J2690	\$32.71	\$32.06	\$32.38	\$30.19	\$32.06
Inpatient/Outpatient	PROCAINAMIDE HCL 100 MG/ML IJ SOLN	14789-901-10	J2690	\$237.47	\$232.72	\$235.10	\$219.18	\$232.72
Inpatient/Outpatient	PROCAINAMIDE HCL 500 MG/ML IJ SOLN	0409-1903-01	J2690	\$113.08	\$110.82	\$111.95	\$104.37	\$110.82
Inpatient/Outpatient	PROCHLORPERAZINE EDISYLATE 10 MG/2ML IJ SOLN	23155-294-42	J0780	\$9.48	\$9.29	\$9.39	\$8.75	\$9.29
Inpatient/Outpatient	PROCHLORPERAZINE EDISYLATE 10 MG/2ML IJ SOLN	23155-294-31	J0780	\$27.65	\$27.10	\$27.37	\$25.52	\$27.10
Inpatient/Outpatient	PROCHLORPERAZINE EDISYLATE 10 MG/2ML IJ SOLN	23155-523-31	J0780	\$27.66	\$27.11	\$27.38	\$25.53	\$27.11
Inpatient/Outpatient	PROCHLORPERAZINE EDISYLATE 10 MG/2ML IJ SOLN	67457-640-00	J0780	\$9.94	\$9.74	\$9.84	\$9.17	\$9.74

Inpatient/Outpatient	PROCHLORPERAZINE EDISYLATE 10 MG/2ML IJ SOLN	67457-640-99	J0780	\$9.94	\$9.74	\$9.84	\$9.17	\$9.74
Inpatient/Outpatient	PROCHLORPERAZINE EDISYLATE 10 MG/2ML IJ SOLN	43066-090-01	J0780	\$7.41	\$7.26	\$7.34	\$6.84	\$7.26
Inpatient/Outpatient	PROCHLORPERAZINE EDISYLATE 10 MG/2ML IJ SOLN	25021-790-02	J0780	\$11.99	\$11.75	\$11.87	\$11.07	\$11.75
Inpatient/Outpatient	PROCHLORPERAZINE EDISYLATE 10 MG/2ML IJ SOLN	0713-0351-25	J0780	\$8.58	\$8.41	\$8.49	\$7.92	\$8.41
Inpatient/Outpatient	PROCHLORPERAZINE MALEATE 5 MG PO TABS	51079-541-01	Q0164	\$2.98	\$2.92	\$2.95	\$2.75	\$2.92
Inpatient/Outpatient	PROCHLORPERAZINE MALEATE 5 MG PO TABS	51079-541-20	Q0164	\$1.39	\$1.36	\$1.38	\$1.28	\$1.36
Inpatient/Outpatient	PROCHLORPERAZINE MALEATE 5 MG PO TABS	0781-5020-01	Q0164	\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	PROCHLORPERAZINE MALEATE 5 MG PO TABS	0378-5105-01	Q0164	\$0.21	\$0.21	\$0.21	\$0.19	\$0.21
Inpatient/Outpatient	PROCHLORPERAZINE MALEATE 5 MG PO TABS	59746-113-06	Q0164	\$1.26	\$1.23	\$1.25	\$1.16	\$1.23
Inpatient/Outpatient	PROCHLORPERAZINE MALEATE 5 MG PO TABS	50268-684-11	Q0164	\$4.93	\$4.83	\$4.88	\$4.55	\$4.83
Inpatient/Outpatient	PROMETHAZINE HCL 25 MG/ML IJ SOLN	0641-0928-21	J2550	\$2.03	\$2.01	\$2.01	\$1.87	\$1.99
Inpatient/Outpatient	PROMETHAZINE HCL 25 MG/ML IJ SOLN	0641-0928-25	J2550	\$7.52	\$7.37	\$7.44	\$6.94	\$7.37
Inpatient/Outpatient	PROMETHAZINE HCL 25 MG/ML IJ SOLN	0641-1495-31	J2550	\$5.96	\$5.84	\$5.90	\$5.50	\$5.84
Inpatient/Outpatient	PROMETHAZINE HCL 25 MG/ML IJ SOLN	0641-6082-01	J2550	\$14.51	\$14.22	\$14.36	\$13.39	\$14.22
Inpatient/Outpatient	PROMETHAZINE HCL 25 MG/ML IJ SOLN	0641-6208-01	J2550	\$4.07	\$3.99	\$4.03	\$3.76	\$3.99
Inpatient/Outpatient	PROMETHAZINE HCL 25 MG/ML IJ SOLN	39822-5525-2	J2550	\$8.85	\$8.67	\$8.76	\$8.17	\$8.67
Inpatient/Outpatient	PROMETHAZINE HCL 25 MG/ML IJ SOLN	69623-119-31	J2550	\$39.37	\$38.58	\$38.98	\$36.34	\$38.58
Inpatient/Outpatient	PROMETHAZINE HCL 12.5 MG PO TABS	68084-154-01	Q0169	\$1.92	\$1.88	\$1.90	\$1.77	\$1.88
Inpatient/Outpatient	PROMETHAZINE HCL 12.5 MG PO TABS	68084-154-11	Q0169	\$1.92	\$1.88	\$1.90	\$1.77	\$1.88
Inpatient/Outpatient	PROMETHAZINE HCL 12.5 MG PO TABS	65162-745-10	Q0169	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	PROMETHAZINE HCL 25 MG PO TABS	0603-5438-21	Q0169	\$0.59	\$0.58	\$0.58	\$0.54	\$0.58
Inpatient/Outpatient	PROMETHAZINE HCL 25 MG PO TABS	51079-895-01	Q0169	\$1.00	\$0.98	\$0.99	\$0.92	\$0.98
Inpatient/Outpatient	PROMETHAZINE HCL 25 MG PO TABS	51079-895-20	Q0169	\$1.02	\$1.00	\$1.01	\$0.94	\$1.00
Inpatient/Outpatient	PROMETHAZINE HCL 25 MG PO TABS	0904-5840-61	Q0169	\$0.85	\$0.83	\$0.84	\$0.78	\$0.83
Inpatient/Outpatient	PROMETHAZINE HCL 25 MG PO TABS	0904-6461-61	Q0169	\$0.44	\$0.43	\$0.44	\$0.41	\$0.43
Inpatient/Outpatient	PROMETHAZINE HCL 25 MG PO TABS	65162-521-10	Q0169	\$0.30	\$0.29	\$0.30	\$0.28	\$0.29
Inpatient/Outpatient	PROMETHAZINE HCL 25 MG PO TABS	68084-155-11	Q0169	\$0.89	\$0.87	\$0.88	\$0.82	\$0.87
Inpatient/Outpatient	PROMETHAZINE-CODEINE 6.25-10 MG/5ML PO SYRP	0121-0547-05	A9270	\$0.47	\$0.46	\$0.47	\$0.43	\$0.46
Inpatient/Outpatient	PROMETHAZINE-CODEINE 6.25-10 MG/5ML PO SYRP	0603-1585-58	A9270	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	PROMETHAZINE-CODEINE 6.25-10 MG/5ML PO SYRP	0472-1627-16	A9270	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	PROMETHAZINE-CODEINE 6.25-10 MG/5ML PO SYRP	0472-1627-04	A9270	\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	PROMETHAZINE-CODEINE 6.25-10 MG/5ML PO SYRP	99999-804-05	A9270	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	PROMETHAZINE-CODEINE 6.25-10 MG/5ML PO SYRP	27808-065-02	A9270	\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	PROMETHAZINE-CODEINE 6.25-10 MG/5ML PO SYRP	60432-606-16	A9270	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	PROMETHAZINE-CODEINE 6.25-10 MG/5ML PO SYRP	50383-804-16	A9270	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	PROPACARCAINE HCL 0.5 % OP SOLN	61314-016-01	A9270	\$8.32	\$8.15	\$8.24	\$7.68	\$8.15
Inpatient/Outpatient	PROPACARCAINE HCL 0.5 % OP SOLN	17478-263-12	A9270	\$10.47	\$10.26	\$10.37	\$9.66	\$10.26
Inpatient/Outpatient	PROPACARCAINE HCL 0.5 % OP SOLN	0998-0016-15	A9270	\$10.94	\$10.72	\$10.83	\$10.10	\$10.72
Inpatient/Outpatient	PROPACARCAINE HCL 0.5 % OP SOLN	24208-730-06	A9270	\$7.91	\$7.75	\$7.83	\$7.30	\$7.75
Inpatient/Outpatient	VITAMIN D 10 MCG/ML PO LIQD	0087-0866-44	A9152	\$0.74	\$0.73	\$0.73	\$0.68	\$0.73
Inpatient/Outpatient	VITAMIN D 10 MCG/ML PO LIQD	54838-006-50	A9152	\$0.21	\$0.21	\$0.21	\$0.19	\$0.21
Inpatient/Outpatient	VITAMIN D 10 MCG/ML PO LIQD	50383-917-50	A9152	\$0.33	\$0.33	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	VITAMIN D 10 MCG/ML PO LIQD	71399-7401-5	A9152	\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	PROPRANOLOL HCL 20 MG/5ML PO SOLN	0054-3727-63	A9270	\$0.39	\$0.38	\$0.39	\$0.36	\$0.38
Inpatient/Outpatient	PROPRANOLOL HCL 10 MG PO TABS	0904-0411-61	A9270	\$1.17	\$1.15	\$1.16	\$1.08	\$1.15
Inpatient/Outpatient	PROPRANOLOL HCL 10 MG PO TABS	51079-277-20	A9270	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	PROPRANOLOL HCL 10 MG PO TABS	50111-467-01	A9270	\$0.81	\$0.79	\$0.80	\$0.75	\$0.79
Inpatient/Outpatient	PROPRANOLOL HCL 10 MG PO TABS	0904-6550-61	A9270	\$0.79	\$0.77	\$0.78	\$0.73	\$0.77
Inpatient/Outpatient	PROPRANOLOL HCL 10 MG PO TABS	51079-277-01	A9270	\$0.99	\$0.97	\$0.98	\$0.91	\$0.97
Inpatient/Outpatient	PROPRANOLOL HCL 10 MG PO TABS	0115-1659-01	A9270	\$0.96	\$0.94	\$0.95	\$0.89	\$0.94
Inpatient/Outpatient	PROPRANOLOL HCL 10 MG PO TABS	0603-5482-21	A9270	\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	PROPRANOLOL HCL 10 MG PO TABS	0591-5554-01	A9270	\$1.32	\$1.29	\$1.31	\$1.22	\$1.29
Inpatient/Outpatient	PROPRANOLOL HCL 10 MG PO TABS	60687-587-11	A9270	\$0.66	\$0.65	\$0.65	\$0.61	\$0.65
Inpatient/Outpatient	PROPRANOLOL HCL 20 MG PO TABS	51079-278-01	A9270	\$1.32	\$1.29	\$1.31	\$1.22	\$1.29
Inpatient/Outpatient	PROPRANOLOL HCL 20 MG PO TABS	51079-278-20	A9270	\$0.22	\$0.22	\$0.22	\$0.20	\$0.22
Inpatient/Outpatient	PROPRANOLOL HCL 20 MG PO TABS	0115-1660-01	A9270	\$1.19	\$1.17	\$1.18	\$1.10	\$1.17
Inpatient/Outpatient	PROPRANOLOL HCL 20 MG PO TABS	0603-5483-21	A9270	\$0.81	\$0.79	\$0.80	\$0.75	\$0.79
Inpatient/Outpatient	PROPRANOLOL HCL 20 MG PO TABS	0591-5555-01	A9270	\$0.84	\$0.82	\$0.83	\$0.78	\$0.82
Inpatient/Outpatient	PROPRANOLOL HCL 20 MG PO TABS	63629-2276-1	A9270	\$0.58	\$0.57	\$0.57	\$0.54	\$0.57
Inpatient/Outpatient	PROPRANOLOL HCL 40 MG PO TABS	51079-279-01	A9270	\$1.99	\$1.95	\$1.97	\$1.84	\$1.95
Inpatient/Outpatient	PROPRANOLOL HCL 40 MG PO TABS	51079-279-20	A9270	\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	PROPRANOLOL HCL 40 MG PO TABS	23155-112-01	A9270	\$1.15	\$1.13	\$1.14	\$1.06	\$1.13
Inpatient/Outpatient	PROPRANOLOL HCL 40 MG PO TABS	0591-5556-01	A9270	\$2.21	\$2.17	\$2.19	\$2.04	\$2.17
Inpatient/Outpatient	PROPRANOLOL HCL 40 MG PO TABS	50111-469-01	A9270	\$1.50	\$1.47	\$1.49	\$1.38	\$1.47
Inpatient/Outpatient	PROPRANOLOL HCL 40 MG PO TABS	0115-1661-01	A9270	\$1.51	\$1.48	\$1.49	\$1.39	\$1.48
Inpatient/Outpatient	PROPRANOLOL HCL 40 MG PO TABS	0603-5484-21	A9270	\$1.14	\$1.13	\$1.13	\$1.05	\$1.12
Inpatient/Outpatient	PROPRANOLOL HCL 40 MG PO TABS	0378-0184-01	A9270	\$2.04	\$2.00	\$2.02	\$1.88	\$2.00
Inpatient/Outpatient	PROPRANOLOL HCL 40 MG PO TABS	60687-295-11	A9270	\$3.92	\$3.84	\$3.88	\$3.62	\$3.84

Inpatient/Outpatient	PROPRANOLOL HCL 40 MG PO TABS	60687-609-11	A9270	\$1.64	\$1.61	\$1.62	\$1.51	\$1.61
Inpatient/Outpatient	PROPYLTHIOURACIL 50 MG PO TABS	0143-1480-01	A9270	\$1.80	\$1.76	\$1.78	\$1.66	\$1.76
Inpatient/Outpatient	PROPYLTHIOURACIL 50 MG PO TABS	0228-2348-10	A9270	\$2.93	\$2.87	\$2.90	\$2.70	\$2.87
Inpatient/Outpatient	PROPYLTHIOURACIL 50 MG PO TABS	67253-651-10	A9270	\$3.42	\$3.35	\$3.39	\$3.16	\$3.35
Inpatient/Outpatient	PROPYLTHIOURACIL 50 MG PO TABS	68084-964-95	A9270	\$9.89	\$9.69	\$9.79	\$9.13	\$9.69
Inpatient/Outpatient	PROTAMINE SULFATE 10 MG/ML IV SOLN	63323-229-05	J2720	\$8.58	\$8.41	\$8.49	\$7.92	\$8.41
Inpatient/Outpatient	PROTAMINE SULFATE 10 MG/ML IV SOLN	63323-229-41	J2720	\$7.72	\$7.57	\$7.64	\$7.13	\$7.57
Inpatient/Outpatient	PROTAMINE SULFATE 10 MG/ML IV SOLN	63323-229-95	J2720	\$5.15	\$5.05	\$5.10	\$4.75	\$5.05
Inpatient/Outpatient	PROTAMINE SULFATE 10 MG/ML IV SOLN	63323-229-30	J2720	\$5.15	\$5.05	\$5.10	\$4.75	\$5.05
Inpatient/Outpatient	PSEUDOEPHEDRINE HCL 15 MG/5ML PO LIQD	50580-536-04	A9150	\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	PSEUDOEPHEDRINE HCL 30 MG PO TABS	0904-5053-59	A9150	\$0.08	\$0.08	\$0.08	\$0.07	\$0.08
Inpatient/Outpatient	PSEUDOEPHEDRINE HCL 30 MG PO TABS	0904-6338-60	A9150	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	PYRAZINAMIDE 500 MG PO TABS	61748-012-11	A9270	\$18.66	\$18.29	\$18.47	\$17.22	\$18.29
Inpatient/Outpatient	PYRAZINAMIDE 500 MG PO TABS	61748-012-01	A9270	\$20.05	\$19.65	\$19.85	\$18.51	\$19.65
Inpatient/Outpatient	PYRIDOXINE HCL 100 MG/ML IJ SOLN	63323-180-01	J3415	\$38.40	\$37.63	\$38.02	\$35.44	\$37.63
Inpatient/Outpatient	PYRIDOXINE HCL 100 MG/ML IJ SOLN	63323-180-00	J3415	\$38.40	\$37.63	\$38.02	\$35.44	\$37.63
Inpatient/Outpatient	PYRIDOXINE HCL 50 MG PO TABS	10135-139-01	A9150	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	PYRIDOXINE HCL 50 MG PO TABS	0536-4408-01	A9150	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	PYRIDOXINE HCL 50 MG PO TABS	0904-0520-60	A9150	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	PYRIDOXINE HCL 50 MG PO TABS	37864-90901	A9150	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	PYRIDOXINE HCL 50 MG PO TABS	50268-858-15	A9150	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	PYRIDOXINE HCL 50 MG PO TABS	50268-858-11	A9150	\$1.14	\$1.12	\$1.13	\$1.05	\$1.12
Inpatient/Outpatient	PYRIDOXINE HCL 50 MG PO TABS	77333-940-25	A9150	\$0.59	\$0.58	\$0.58	\$0.54	\$0.58
Inpatient/Outpatient	PYRIDOXINE HCL 50 MG PO TABS	10006-70012	A9150	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	HYPROMELLOSE 2 % IO SOLN	57770-055-00		\$116.64	\$114.31	\$115.47	\$107.66	\$114.31
Inpatient/Outpatient	QUININE SULFATE 324 MG PO CAPS	13310-153-07	A9270	\$30.26	\$29.65	\$29.96	\$27.93	\$29.65
Inpatient/Outpatient	QUININE SULFATE 324 MG PO CAPS	53489-700-07	A9270	\$20.39	\$19.98	\$20.19	\$18.82	\$19.98
Inpatient/Outpatient	QUININE SULFATE 324 MG PO CAPS	68180-560-06	A9270	\$12.59	\$12.34	\$12.46	\$11.62	\$12.34
Inpatient/Outpatient	QUININE SULFATE 324 MG PO CAPS	50742-238-30	A9270	\$7.33	\$7.18	\$7.26	\$6.77	\$7.18
Inpatient/Outpatient	WARFARIN SODIUM 0.5 MG PO HALF TABS	99999-402-05	A9270	\$0.48	\$0.47	\$0.48	\$0.44	\$0.47
Inpatient/Outpatient	WARFARIN SODIUM 0.5 MG PO HALF TABS	99999-169-05	A9270	\$9.33	\$9.14	\$9.24	\$8.61	\$9.14
Inpatient/Outpatient	SALINE SPRAY 0.65 % NA SOLN	45802-357-58	A4217	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	SALINE SPRAY 0.65 % NA SOLN	0603-0380-46	A4217	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	SALINE SPRAY 0.65 % NA SOLN	0904-3865-75	A4217	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	LIDOCAINE HCL (PF) 1 % IJ SOLN (ANES SPINAL KIT)	99999-4713-5	J2001	\$0.88	\$0.86	\$0.87	\$0.81	\$0.86
Inpatient/Outpatient	SILVER SULFADIAZINE 1 % EX CREA	0591-0810-55	A9270	\$1.21	\$1.19	\$1.20	\$1.12	\$1.19
Inpatient/Outpatient	SILVER SULFADIAZINE 1 % EX CREA	0591-0810-83	A9270	\$1.46	\$1.43	\$1.45	\$1.35	\$1.43
Inpatient/Outpatient	SILVER SULFADIAZINE 1 % EX CREA	43598-210-50	A9270	\$1.21	\$1.19	\$1.20	\$1.12	\$1.19
Inpatient/Outpatient	SILVER SULFADIAZINE 1 % EX CREA	43598-210-55	A9270	\$0.62	\$0.61	\$0.61	\$0.57	\$0.61
Inpatient/Outpatient	SILVER SULFADIAZINE 1 % EX CREA	43598-210-40	A9270	\$0.38	\$0.37	\$0.38	\$0.35	\$0.37
Inpatient/Outpatient	SILVER SULFADIAZINE 1 % EX CREA	61570-131-25	A9270	\$0.47	\$0.46	\$0.47	\$0.43	\$0.46
Inpatient/Outpatient	SILVER SULFADIAZINE 1 % EX CREA	61570-131-40	A9270	\$0.36	\$0.35	\$0.36	\$0.33	\$0.35
Inpatient/Outpatient	SILVER SULFADIAZINE 1 % EX CREA	61570-131-55	A9270	\$0.77	\$0.75	\$0.76	\$0.71	\$0.75
Inpatient/Outpatient	SILVER SULFADIAZINE 1 % EX CREA	67877-124-05	A9270	\$1.19	\$1.17	\$1.18	\$1.10	\$1.17
Inpatient/Outpatient	SILVER SULFADIAZINE 1 % EX CREA	67877-124-25	A9270	\$1.02	\$1.00	\$1.01	\$0.94	\$1.00
Inpatient/Outpatient	SILVER SULFADIAZINE 1 % EX CREA	67877-124-40	A9270	\$0.42	\$0.41	\$0.42	\$0.39	\$0.41
Inpatient/Outpatient	SILVER SULFADIAZINE 1 % EX CREA	43598-210-25	A9270	\$0.77	\$0.75	\$0.76	\$0.71	\$0.75
Inpatient/Outpatient	SIMETHICONE 80 MG PO CHEW	63739-225-10	A9150	\$0.37	\$0.36	\$0.37	\$0.34	\$0.36
Inpatient/Outpatient	SIMETHICONE 80 MG PO CHEW	37864-86001	A9150	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	SIMETHICONE 80 MG PO CHEW	0904-5068-60	A9150	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	SIMETHICONE 80 MG PO CHEW	69618-033-01	A9150	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	SIMETHICONE 80 MG PO CHEW	57896-791-01	A9150	\$0.08	\$0.08	\$0.08	\$0.07	\$0.08
Inpatient/Outpatient	SIMETHICONE 80 MG PO CHEW	57896-799-01	A9150	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	SIMETHICONE 80 MG PO CHEW	49348-188-10	A9150	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	SIMETHICONE 80 MG PO CHEW	0904-7206-60	A9150	\$0.08	\$0.08	\$0.08	\$0.07	\$0.08
Inpatient/Outpatient	SIMETHICONE 40 MG/0.6ML PO SUSP	0603-0894-50	A9150	\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	SIMETHICONE 40 MG/0.6ML PO SUSP	0536-2220-75	A9150	\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	SIMETHICONE 40 MG/0.6ML PO SUSP	37205-119-10	A9150	\$0.72	\$0.71	\$0.71	\$0.66	\$0.71
Inpatient/Outpatient	SIMETHICONE 40 MG/0.6ML PO SUSP	0904-5894-30	A9150	\$0.22	\$0.22	\$0.22	\$0.20	\$0.22
Inpatient/Outpatient	SIMETHICONE 40 MG/0.6ML PO SUSP	99999-5067-3	A9150	\$0.22	\$0.22	\$0.22	\$0.20	\$0.22
Inpatient/Outpatient	SIMETHICONE 40 MG/0.6ML PO SUSP	99999-5067-6	A9150	\$0.22	\$0.22	\$0.22	\$0.20	\$0.22
Inpatient/Outpatient	SIMETHICONE 40 MG/0.6ML PO SUSP	49348-740-27	A9150	\$0.50	\$0.49	\$0.50	\$0.46	\$0.49
Inpatient/Outpatient	SIMETHICONE 40 MG/0.6ML PO SUSP	69618-059-51	A9150	\$0.37	\$0.36	\$0.37	\$0.34	\$0.36
Inpatient/Outpatient	SIMPLE SYRUP PO SYRP	0395-2661-16	A9150	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	SODIUM ACETATE 2 MEQ/ML IV SOLN	0517-2096-25		\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	SODIUM ACETATE 2 MEQ/ML IV SOLN	63323-066-20		\$0.42	\$0.41	\$0.42	\$0.39	\$0.41
Inpatient/Outpatient	SODIUM ACETATE 2 MEQ/ML IV SOLN	0409-3299-06		\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	SODIUM ACETATE 2 MEQ/ML IV SOLN	0409-7299-73		\$0.68	\$0.67	\$0.67	\$0.63	\$0.67

Inpatient/Outpatient	SODIUM ACETATE 2 MEQ/ML IV SOLN	0409-7299-45		\$0.68	\$0.67	\$0.67	\$0.63	\$0.67
Inpatient/Outpatient	SODIUM ACETATE 2 MEQ/ML IV SOLN	0409-3299-15		\$0.40	\$0.39	\$0.40	\$0.37	\$0.39
Inpatient/Outpatient	SODIUM ACETATE 2 MEQ/ML IV SOLN	0409-7299-83		\$0.68	\$0.67	\$0.67	\$0.63	\$0.67
Inpatient/Outpatient	SODIUM BICARBONATE 4.2 % IV SOLN	0409-5534-34		\$4.41	\$4.32	\$4.37	\$4.07	\$4.32
Inpatient/Outpatient	SODIUM BICARBONATE 4.2 % IV SOLN	99999-8625-1		\$4.41	\$4.32	\$4.37	\$4.07	\$4.32
Inpatient/Outpatient	SODIUM BICARBONATE 4.2 % IV SOLN	63323-083-05		\$7.38	\$7.23	\$7.31	\$6.81	\$7.23
Inpatient/Outpatient	SODIUM BICARBONATE 4.2 % IV SOLN	0409-5534-24		\$4.42	\$4.33	\$4.38	\$4.08	\$4.33
Inpatient/Outpatient	SODIUM BICARBONATE 8.4 % IV SOLN	0409-6625-02	J3490	\$0.79	\$0.77	\$0.78	\$0.73	\$0.77
Inpatient/Outpatient	SODIUM BICARBONATE 8.4 % IV SOLN	0409-6637-34	J3490	\$0.98	\$0.96	\$0.97	\$0.90	\$0.96
Inpatient/Outpatient	SODIUM BICARBONATE 8.4 % IV SOLN	69623-232-39	J3490	\$1.55	\$1.52	\$1.53	\$1.43	\$1.52
Inpatient/Outpatient	SODIUM BICARBONATE 8.4 % IV SOLN	63323-089-50	J3490	\$0.54	\$0.53	\$0.53	\$0.50	\$0.53
Inpatient/Outpatient	SODIUM BICARBONATE 8.4 % IV SOLN	69374-914-50	J3490	\$0.97	\$0.95	\$0.96	\$0.90	\$0.95
Inpatient/Outpatient	SODIUM BICARBONATE 8.4 % IV SOLN	33216-741-99	J3490	\$0.80	\$0.78	\$0.79	\$0.74	\$0.78
Inpatient/Outpatient	SODIUM BICARBONATE 8.4 % IV SOLN	76329-3352-1	J3490	\$1.06	\$1.04	\$1.05	\$0.98	\$1.04
Inpatient/Outpatient	SODIUM BICARBONATE 8.4 % IV SOLN	0409-6637-24	J3490	\$0.75	\$0.74	\$0.74	\$0.69	\$0.74
Inpatient/Outpatient	SODIUM BICARBONATE 8.4 % IV SOLN	51754-5001-1	J3490	\$0.52	\$0.51	\$0.51	\$0.48	\$0.51
Inpatient/Outpatient	SODIUM BICARBONATE 8.4 % IV SOLN	0409-6625-22	J3490	\$0.79	\$0.77	\$0.78	\$0.73	\$0.77
Inpatient/Outpatient	SODIUM BICARBONATE 650 MG PO TABS	0536-4544-10	A9150	\$0.04	\$0.04	\$0.04	\$0.04	\$0.04
Inpatient/Outpatient	SODIUM BICARBONATE 650 MG PO TABS	64980-182-10	A9150	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	SODIUM BICARBONATE 650 MG PO TABS	55154-6815-4	A9150	\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	SODIUM BICARBONATE 650 MG PO TABS	64980-294-10	A9150	\$0.04	\$0.04	\$0.04	\$0.04	\$0.04
Inpatient/Outpatient	SODIUM BICARBONATE 650 MG PO TABS	66553-008-01	A9150	\$0.42	\$0.41	\$0.42	\$0.39	\$0.41
Inpatient/Outpatient	SODIUM BICARBONATE 650 MG PO TABS	77333-831-25	A9150	\$0.63	\$0.62	\$0.62	\$0.58	\$0.62
Inpatient/Outpatient	SODIUM CHLORIDE 0.45 % IV SOLN	0338-0043-04		\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	SODIUM CHLORIDE 0.45 % IV SOLN	0338-0043-03		\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	SODIUM CHLORIDE 0.45 % IV SOLN	0990-7985-02		\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	SODIUM CHLORIDE (PF) 0.9 % IJ SOLN	0409-4888-10		\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	SODIUM CHLORIDE (PF) 0.9 % IJ SOLN	0409-4888-02		\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	SODIUM CHLORIDE (PF) 0.9 % IJ SOLN	63323-186-01		\$0.32	\$0.31	\$0.32	\$0.30	\$0.31
Inpatient/Outpatient	SODIUM CHLORIDE (PF) 0.9 % IJ SOLN	0409-4888-03		\$0.22	\$0.22	\$0.22	\$0.20	\$0.22
Inpatient/Outpatient	SODIUM CHLORIDE 3 % IV SOLN	0338-0054-03		\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	SODIUM CHLORIDE 3 % IV SOLN	0264-7805-10		\$0.04	\$0.04	\$0.04	\$0.04	\$0.04
Inpatient/Outpatient	SODIUM CHLORIDE 4 MEQ/ML IV SOLN	9999-1234-05		\$0.38	\$0.37	\$0.38	\$0.35	\$0.37
Inpatient/Outpatient	SODIUM CHLORIDE 4 MEQ/ML IV SOLN	63323-187-30		\$0.38	\$0.37	\$0.38	\$0.35	\$0.37
Inpatient/Outpatient	SODIUM CHLORIDE 4 MEQ/ML IV SOLN	0409-1141-02		\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	SODIUM CHLORIDE 4 MEQ/ML IV SOLN	63323-088-61		\$0.30	\$0.29	\$0.30	\$0.28	\$0.29
Inpatient/Outpatient	SODIUM CHLORIDE 4 MEQ/ML IV SOLN	0409-1141-12		\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	SODIUM CHLORIDE 4 MEQ/ML IV SOLN	63323-093-01		\$0.49	\$0.48	\$0.49	\$0.45	\$0.48
Inpatient/Outpatient	SODIUM CHLORIDE 3 % IN NEBU	50190-142-63	A9270	\$0.71	\$0.70	\$0.70	\$0.66	\$0.70
Inpatient/Outpatient	SODIUM CHLORIDE 3 % IN NEBU	0487-9003-60	A9270	\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	SODIUM CHLORIDE (HYPERTONIC) 5 % OP OINT	17478-622-35	A9150	\$13.53	\$13.26	\$13.39	\$12.49	\$13.26
Inpatient/Outpatient	SODIUM CHLORIDE (HYPERTONIC) 5 % OP OINT	0904-6489-38	A9150	\$9.55	\$9.36	\$9.45	\$8.81	\$9.36
Inpatient/Outpatient	SODIUM CHLORIDE (HYPERTONIC) 5 % OP OINT	24208-385-55	A9150	\$20.59	\$20.18	\$20.38	\$19.00	\$20.18
Inpatient/Outpatient	SODIUM CHLORIDE (HYPERTONIC) 5 % OP OINT	0536-1253-91	A9150	\$9.68	\$9.49	\$9.58	\$8.93	\$9.49
Inpatient/Outpatient	SODIUM CHLORIDE (HYPERTONIC) 5 % OP SOLN	17478-623-12	J7131	\$1.79	\$1.75	\$1.77	\$1.65	\$1.75
Inpatient/Outpatient	SODIUM CHLORIDE (HYPERTONIC) 5 % OP SOLN	0904-6490-35	J7131	\$0.86	\$0.84	\$0.85	\$0.79	\$0.84
Inpatient/Outpatient	SODIUM CHLORIDE (HYPERTONIC) 5 % OP SOLN	24208-277-15	J7131	\$4.81	\$4.71	\$4.76	\$4.44	\$4.71
Inpatient/Outpatient	SODIUM CHLORIDE (HYPERTONIC) 5 % OP SOLN	0536-1254-94	J7131	\$1.07	\$1.05	\$1.06	\$0.99	\$1.05
Inpatient/Outpatient	SODIUM PHOSPHATES 15 MMOLE/5ML IV SOLN	63323-170-05		\$7.82	\$7.66	\$7.74	\$7.22	\$7.66
Inpatient/Outpatient	IMMUNE GLOBULIN (GAMUNEX-C) IV SYRINGE (NICU)	13533-800-12	J1561	\$62.57	\$61.32	\$61.94	\$57.75	\$61.32
Inpatient/Outpatient	SULFACETAMIDE SODIUM 10 % OP SOLN	24208-670-04	A9270	\$14.41	\$14.12	\$14.27	\$13.30	\$14.12
Inpatient/Outpatient	SULFACETAMIDE SODIUM 10 % OP SOLN	61314-701-01	A9270	\$10.04	\$9.84	\$9.94	\$9.27	\$9.84
Inpatient/Outpatient	SODIUM THIOSULFATE 250 MG/ML IV SOLN	60267-705-50		\$8.94	\$8.76	\$8.85	\$8.25	\$8.76
Inpatient/Outpatient	SORBITOL 70 % SOLN (WRAP)	54162-700-16	A9150	\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	SPIRONOLACTONE 25 MG PO TABS	51079-103-01	A9270	\$0.41	\$0.40	\$0.41	\$0.38	\$0.40
Inpatient/Outpatient	SPIRONOLACTONE 25 MG PO TABS	51079-103-20	A9270	\$0.71	\$0.70	\$0.70	\$0.66	\$0.70
Inpatient/Outpatient	SPIRONOLACTONE 25 MG PO TABS	53746-511-01	A9270	\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	SPIRONOLACTONE 25 MG PO TABS	53489-143-01	A9270	\$0.92	\$0.90	\$0.91	\$0.85	\$0.90
Inpatient/Outpatient	SPIRONOLACTONE 25 MG PO TABS	0378-2146-01	A9270	\$0.78	\$0.76	\$0.77	\$0.72	\$0.76
Inpatient/Outpatient	SPIRONOLACTONE 25 MG PO TABS	53746-511-10	A9270	\$0.21	\$0.21	\$0.21	\$0.19	\$0.21
Inpatient/Outpatient	SPIRONOLACTONE 25 MG PO TABS	63739-544-10	A9270	\$0.44	\$0.43	\$0.44	\$0.41	\$0.43
Inpatient/Outpatient	SPIRONOLACTONE 25 MG PO TABS	68382-660-10	A9270	\$0.20	\$0.20	\$0.20	\$0.18	\$0.20
Inpatient/Outpatient	SPIRONOLACTONE 25 MG PO TABS	60687-465-11	A9270	\$0.49	\$0.48	\$0.49	\$0.45	\$0.48
Inpatient/Outpatient	SPIRONOLACTONE 25 MG PO TABS	53746-511-05	A9270	\$0.22	\$0.22	\$0.22	\$0.20	\$0.22
Inpatient/Outpatient	SPIRONOLACTONE 25 MG PO TABS	16714-084-01	A9270	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	STERILE WATER FOR INJECTION IJ SOLN	0517-3050-25		\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	STERILE WATER FOR INJECTION IJ SOLN	0409-4887-10		\$0.34	\$0.33	\$0.34	\$0.31	\$0.33
Inpatient/Outpatient	STERILE WATER FOR INJECTION IJ SOLN	0409-4887-50		\$0.17	\$0.17	\$0.17	\$0.16	\$0.17

Inpatient/Outpatient	STERILE WATER FOR INJECTION IJ SOLN	0409-4887-99		\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	STERILE WATER FOR INJECTION IJ SOLN	0409-4887-25		\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	STERILE WATER FOR INJECTION IJ SOLN	63323-185-50		\$0.53	\$0.52	\$0.52	\$0.49	\$0.52
Inpatient/Outpatient	STERILE WATER FOR INJECTION IJ SOLN	63323-185-20		\$1.03	\$1.01	\$1.02	\$0.95	\$1.01
Inpatient/Outpatient	STERILE WATER FOR INJECTION IJ SOLN	63323-185-05		\$1.05	\$1.03	\$1.04	\$0.97	\$1.03
Inpatient/Outpatient	STERILE WATER FOR INJECTION IJ SOLN	0409-4887-17		\$0.34	\$0.33	\$0.34	\$0.31	\$0.33
Inpatient/Outpatient	STERILE WATER FOR INJECTION IJ SOLN	63323-185-09		\$0.58	\$0.57	\$0.57	\$0.54	\$0.57
Inpatient/Outpatient	STERILE WATER FOR IRRIGATION IR SOLN VIAFLEX BAG	0338-0003-46		\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	SUCCINYLCHOLINE CHLORIDE 20 MG/ML IJ SOLN (WRAP)	71019-341-15	J0330	\$13.17	\$12.91	\$13.04	\$12.16	\$12.91
Inpatient/Outpatient	SUCCINYLCHOLINE CHLORIDE 20 MG/ML IJ SOLN (WRAP)	69374-919-10	J0330	\$9.60	\$9.41	\$9.50	\$8.86	\$9.41
Inpatient/Outpatient	SUCCINYLCHOLINE CHLORIDE 20 MG/ML IJ SOLN (WRAP)	0409-6629-02	J0330	\$8.67	\$8.50	\$8.58	\$8.00	\$8.50
Inpatient/Outpatient	SUCCINYLCHOLINE CHLORIDE 20 MG/ML IJ SOLN (WRAP)	0781-3411-70	J0330	\$7.00	\$6.86	\$6.93	\$6.46	\$6.86
Inpatient/Outpatient	SUCCINYLCHOLINE CHLORIDE 20 MG/ML IJ SOLN (WRAP)	62295-3323-7	J0330	\$9.60	\$9.41	\$9.50	\$8.86	\$9.41
Inpatient/Outpatient	SUCCINYLCHOLINE CHLORIDE 20 MG/ML IJ SOLN (WRAP)	69918-700-02	J0330	\$3.95	\$3.87	\$3.91	\$3.65	\$3.87
Inpatient/Outpatient	SUCCINYLCHOLINE CHLORIDE 20 MG/ML IJ SOLN (WRAP)	71449-126-15	J0330	\$4.37	\$4.28	\$4.33	\$4.03	\$4.28
Inpatient/Outpatient	SUCCINYLCHOLINE CHLORIDE 20 MG/ML IJ SOLN (WRAP)	14789-104-07	J0330	\$1.54	\$1.51	\$1.52	\$1.42	\$1.51
Inpatient/Outpatient	SUCCINYLCHOLINE CHLORIDE 20 MG/ML IJ SOLN (WRAP)	70069-301-01	J0330	\$2.44	\$2.39	\$2.42	\$2.25	\$2.39
Inpatient/Outpatient	SUCCINYLCHOLINE CHLORIDE 20 MG/ML IJ SOLN (WRAP)	70092-1087-46	J0330	\$14.68	\$14.39	\$14.53	\$13.55	\$14.39
Inpatient/Outpatient	SUCCINYLCHOLINE CHLORIDE 20 MG/ML IJ SOLN (WRAP)	0409-6629-12	J0330	\$8.67	\$8.50	\$8.58	\$8.00	\$8.50
Inpatient/Outpatient	SUCCINYLCHOLINE CHLORIDE 20 MG/ML IJ SOLN (WRAP)	31722-981-10	J0330	\$2.33	\$2.28	\$2.31	\$2.15	\$2.28
Inpatient/Outpatient	SUCCINYLCHOLINE CHLORIDE 20 MG/ML IJ SOLN (WRAP)	31722-981-31	J0330	\$1.92	\$1.88	\$1.90	\$1.77	\$1.88
Inpatient/Outpatient	SUCCINYLCHOLINE CHLORIDE 20 MG/ML IJ SOLN (WRAP)	69918-700-01	J0330	\$3.95	\$3.87	\$3.91	\$3.65	\$3.87
Inpatient/Outpatient	SUCCINYLCHOLINE CHLORIDE 20 MG/ML IJ SOLN (WRAP)	71288-719-10	J0330	\$1.76	\$1.72	\$1.74	\$1.62	\$1.72
Inpatient/Outpatient	SUCCINYLCHOLINE CHLORIDE 20 MG/ML IJ SOLN (WRAP)	71288-719-11	J0330	\$1.76	\$1.72	\$1.74	\$1.62	\$1.72
Inpatient/Outpatient	SULFAMETHOXAZOLE-TRIMETHOPRIM 800-160 MG PO TABS	0904-2725-61	A9270	\$0.53	\$0.52	\$0.52	\$0.49	\$0.52
Inpatient/Outpatient	SULFAMETHOXAZOLE-TRIMETHOPRIM 800-160 MG PO TABS	68084-230-01	A9270	\$0.66	\$0.65	\$0.65	\$0.61	\$0.65
Inpatient/Outpatient	SULFAMETHOXAZOLE-TRIMETHOPRIM 800-160 MG PO TABS	63739-228-10	A9270	\$0.70	\$0.69	\$0.69	\$0.65	\$0.69
Inpatient/Outpatient	SULFAMETHOXAZOLE-TRIMETHOPRIM 800-160 MG PO TABS	51079-128-01	A9270	\$0.67	\$0.66	\$0.66	\$0.62	\$0.66
Inpatient/Outpatient	SULFAMETHOXAZOLE-TRIMETHOPRIM 800-160 MG PO TABS	68084-230-11	A9270	\$0.68	\$0.67	\$0.67	\$0.63	\$0.67
Inpatient/Outpatient	SULFAMETHOXAZOLE-TRIMETHOPRIM 800-160 MG PO TABS	65162-272-10	A9270	\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	SULFAMETHOXAZOLE-TRIMETHOPRIM 400-80 MG/5ML IV SOLN	0703-9503-03	A9270	\$3.97	\$3.89	\$3.93	\$3.66	\$3.89
Inpatient/Outpatient	SULFAMETHOXAZOLE-TRIMETHOPRIM 400-80 MG/5ML IV SOLN	0703-9526-01	A9270	\$3.38	\$3.31	\$3.35	\$3.12	\$3.31
Inpatient/Outpatient	SULFAMETHOXAZOLE-TRIMETHOPRIM 400-80 MG/5ML IV SOLN	0703-9514-81	A9270	\$4.19	\$4.11	\$4.15	\$3.87	\$4.11
Inpatient/Outpatient	SULFAMETHOXAZOLE-TRIMETHOPRIM 400-80 MG/5ML IV SOLN	0703-9514-01	A9270	\$4.20	\$4.12	\$4.16	\$3.88	\$4.12
Inpatient/Outpatient	SULFAMETHOXAZOLE-TRIMETHOPRIM 400-80 MG/5ML IV SOLN	70069-362-10	A9270	\$3.18	\$3.12	\$3.15	\$2.94	\$3.12
Inpatient/Outpatient	SULFAMETHOXAZOLE-TRIMETHOPRIM 400-80 MG/5ML IV SOLN	70069-362-01	A9270	\$3.18	\$3.12	\$3.15	\$2.94	\$3.12
Inpatient/Outpatient	SULFAMETHOXAZOLE-TRIMETHOPRIM 400-80 MG PO TABS	0603-5780-21	A9270	\$0.42	\$0.41	\$0.42	\$0.39	\$0.41
Inpatient/Outpatient	SULFAMETHOXAZOLE-TRIMETHOPRIM 400-80 MG PO TABS	53746-271-01	A9270	\$0.48	\$0.47	\$0.48	\$0.44	\$0.47
Inpatient/Outpatient	SULFAMETHOXAZOLE-TRIMETHOPRIM 400-80 MG PO TABS	53489-145-01	A9270	\$0.86	\$0.84	\$0.85	\$0.79	\$0.84
Inpatient/Outpatient	SULFAMETHOXAZOLE-TRIMETHOPRIM 400-80 MG PO TABS	65862-419-01	A9270	\$0.22	\$0.22	\$0.22	\$0.20	\$0.22
Inpatient/Outpatient	SULFAMETHOXAZOLE-TRIMETHOPRIM 400-80 MG PO TABS	50268-728-11	A9270	\$0.95	\$0.93	\$0.94	\$0.88	\$0.93
Inpatient/Outpatient	SULFASALAZINE 500 MG PO TBEC	0603-5803-21	A9270	\$1.56	\$1.53	\$1.54	\$1.44	\$1.53
Inpatient/Outpatient	SULFASALAZINE 500 MG PO TBEC	59762-0104-1	A9270	\$0.99	\$0.97	\$0.98	\$0.91	\$0.97
Inpatient/Outpatient	SULFASALAZINE 500 MG PO TBEC	0013-0102-01	A9270	\$8.91	\$8.73	\$8.82	\$8.22	\$8.73
Inpatient/Outpatient	SULFASALAZINE 500 MG PO TBEC	59762-0104-5	A9270	\$0.63	\$0.62	\$0.62	\$0.58	\$0.62
Inpatient/Outpatient	SULFASALAZINE 500 MG PO TBEC	0013-0102-50	A9270	\$9.32	\$9.13	\$9.23	\$8.60	\$9.13
Inpatient/Outpatient	TAMOXIFEN CITRATE 10 MG PO TABS	0093-0784-06	A9270	\$3.79	\$3.71	\$3.75	\$3.50	\$3.71
Inpatient/Outpatient	TAMOXIFEN CITRATE 10 MG PO TABS	63739-269-10	A9270	\$1.74	\$1.71	\$1.72	\$1.61	\$1.71
Inpatient/Outpatient	TAMOXIFEN CITRATE 10 MG PO TABS	0591-2472-60	A9270	\$1.82	\$1.78	\$1.80	\$1.68	\$1.78
Inpatient/Outpatient	TAMOXIFEN CITRATE 10 MG PO TABS	0378-0144-91	A9270	\$0.58	\$0.57	\$0.57	\$0.54	\$0.57
Inpatient/Outpatient	TAMOXIFEN CITRATE 10 MG PO TABS	51862-447-60	A9270	\$0.91	\$0.89	\$0.90	\$0.84	\$0.89
Inpatient/Outpatient	TAMOXIFEN CITRATE 10 MG PO TABS	68382-826-14	A9270	\$1.73	\$1.70	\$1.71	\$1.60	\$1.70
Inpatient/Outpatient	TAMOXIFEN CITRATE 10 MG PO TABS	59651-299-60	A9270	\$0.53	\$0.52	\$0.52	\$0.49	\$0.52
Inpatient/Outpatient	TANNIC ACID POWD	51552-127-02		\$1.20	\$1.18	\$1.19	\$1.11	\$1.18
Inpatient/Outpatient	TANNIC ACID POWD	38779-0604-5		\$0.48	\$0.47	\$0.48	\$0.44	\$0.47
Inpatient/Outpatient	IOFLUPANE I-123 (DATSCAN) 185 MBQ/2.5ML IV SOLN	17156-210-01		\$2,455.20	\$2,406.10	\$2,430.65	\$2,266.15	\$2,406.10
Inpatient/Outpatient	TESTOSTERONE CYPIONATE 100 MG/ML IM SOLN	0781-3073-70	J1071	\$13.48	\$13.21	\$13.35	\$12.44	\$13.21
Inpatient/Outpatient	TETANUS IMMUNE GLOBULIN 250 UNIT/ML IM SOSY	13533-634-02	J1670	\$1,538.22	\$1,507.46	\$1,522.84	\$1,419.78	\$1,507.46
Inpatient/Outpatient	TETANUS IMMUNE GLOBULIN 250 UNIT/ML IM SOSY	13533-634-20	J1670	\$1,355.48	\$1,328.37	\$1,341.93	\$1,251.11	\$1,328.37
Inpatient/Outpatient	RIFAXIMIN 550 MG PO TABS	65649-303-03	A9270	\$224.30	\$219.81	\$222.06	\$207.03	\$219.81
Inpatient/Outpatient	RIFAXIMIN 550 MG PO TABS	65649-303-02	A9270	\$224.30	\$219.81	\$222.06	\$207.03	\$219.81
Inpatient/Outpatient	TETRACAINE HCL 0.5 % OP SOLN	0065-0741-12	A9270	\$9.68	\$9.49	\$9.58	\$8.93	\$9.49
Inpatient/Outpatient	TETRACAINE HCL 0.5 % OP SOLN	24208-920-64	A9270	\$2.33	\$2.28	\$2.31	\$2.15	\$2.28
Inpatient/Outpatient	TETRACAINE HCL 0.5 % OP SOLN	0065-0741-14	A9270	\$11.98	\$11.74	\$11.86	\$11.06	\$11.74
Inpatient/Outpatient	TETRACAINE HCL 0.5 % OP SOLN	68682-920-05	A9270	\$20.62	\$20.21	\$20.41	\$19.03	\$20.21
Inpatient/Outpatient	TETRAHYDROZOLINE HCL 0.05 % OP SOLN	0904-2992-35	A9270	\$0.39	\$0.39	\$0.39	\$0.36	\$0.38
Inpatient/Outpatient	TETRAHYDROZOLINE HCL 0.05 % OP SOLN	49348-037-29	A9270	\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	TETRAHYDROZOLINE HCL 0.05 % OP SOLN	0904-6334-35	A9270	\$0.36	\$0.35	\$0.36	\$0.33	\$0.35

Inpatient/Outpatient	TETRAHYDROZOLINE HCL 0.05 % OP SOLN	0536-1002-94	A9270	\$0.30	\$0.29	\$0.30	\$0.28	\$0.29
Inpatient/Outpatient	TETRAHYDROZOLINE HCL 0.05 % OP SOLN	74300-00803	A9270	\$0.99	\$0.97	\$0.98	\$0.91	\$0.97
Inpatient/Outpatient	TETRAHYDROZOLINE HCL 0.05 % OP SOLN	0536-1217-94	A9270	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	TETRAHYDROZOLINE HCL 0.05 % OP SOLN	12547-49380	A9270	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	THEOPHYLLINE 80 MG/15ML PO SOLN	27808-033-01	A9270	\$0.56	\$0.55	\$0.55	\$0.52	\$0.55
Inpatient/Outpatient	THEOPHYLLINE 80 MG/15ML PO SOLN	10135-604-08	A9270	\$0.65	\$0.64	\$0.64	\$0.60	\$0.64
Inpatient/Outpatient	THERA PO TABS	0904-0539-61	A9150	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	THERAPEUTIC MULTIVIT/MINERAL PO TABS	0904-5492-80	A9150	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	THERAPEUTIC MULTIVIT/MINERAL PO TABS	0904-5492-13	A9150	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	THERAPEUTIC MULTIVIT/MINERAL PO TABS	0904-5492-61	A9150	\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	THIAMINE HCL 100 MG/ML IJ SOLN	63323-013-02	J3411	\$11.40	\$11.17	\$11.29	\$10.52	\$11.17
Inpatient/Outpatient	THIAMINE HCL 100 MG/ML IJ SOLN	63323-013-26	J3411	\$11.40	\$11.17	\$11.29	\$10.52	\$11.17
Inpatient/Outpatient	THIAMINE HCL 100 MG/ML IJ SOLN	67457-196-00	J3411	\$19.08	\$18.70	\$18.89	\$17.61	\$18.70
Inpatient/Outpatient	THIAMINE HCL 100 MG/ML IJ SOLN	63323-013-01	J3411	\$12.67	\$12.42	\$12.54	\$11.69	\$12.42
Inpatient/Outpatient	THIAMINE HCL 100 MG/ML IJ SOLN	0641-6228-01	J3411	\$20.25	\$19.85	\$20.05	\$18.69	\$19.85
Inpatient/Outpatient	THIAMINE (VITAMIN B1) 100 MG PO TAB (WRAP)	10135-132-10	A9150	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	THIAMINE (VITAMIN B1) 100 MG PO TAB (WRAP)	0536-4680-10	A9150	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	THIAMINE (VITAMIN B1) 100 MG PO TAB (WRAP)	0904-0544-80	A9150	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	THIAMINE (VITAMIN B1) 100 MG PO TAB (WRAP)	37864-90501	A9150	\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	THIAMINE (VITAMIN B1) 100 MG PO TAB (WRAP)	54629-057-01	A9150	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	THIAMINE (VITAMIN B1) 100 MG PO TAB (WRAP)	50268-851-11	A9150	\$0.80	\$0.78	\$0.79	\$0.74	\$0.78
Inpatient/Outpatient	THIAMINE (VITAMIN B1) 100 MG PO TAB (WRAP)	37864-90599	A9150	\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	THIAMINE (VITAMIN B1) 100 MG PO TAB (WRAP)	48433-108-01	A9150	\$0.51	\$0.50	\$0.50	\$0.47	\$0.50
Inpatient/Outpatient	THIAMINE (VITAMIN B1) 100 MG PO TAB (WRAP)	31604-01281	A9150	\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	THIAMINE (VITAMIN B1) 100 MG PO TAB (WRAP)	77333-934-25	A9150	\$0.55	\$0.54	\$0.54	\$0.51	\$0.54
Inpatient/Outpatient	IMIPENEM-CILASTATIN 500 MG IV SOLR	63323-322-94	J0743	\$48.31	\$47.34	\$47.83	\$44.59	\$47.34
Inpatient/Outpatient	IMIPENEM-CILASTATIN 500 MG IV SOLR	63323-322-41	J0743	\$48.31	\$47.34	\$47.83	\$44.59	\$47.34
Inpatient/Outpatient	ALTEPLASE (PE) INFUSION 1 MG/ML - 90 MG	50242-085-27	J2997	\$12,940.99	\$12,682.17	\$12,811.58	\$11,944.53	\$12,682.17
Inpatient/Outpatient	VANCOMYCIN IVPB 1000 MG IN D5W 250 ML PREMIX	99999-6533-1	J3370	\$72.48	\$71.03	\$71.76	\$66.90	\$71.03
Inpatient/Outpatient	THYROID 30 MG PO TABS	0456-0458-01	A9270	\$3.95	\$3.87	\$3.91	\$3.65	\$3.87
Inpatient/Outpatient	THYROID 30 MG PO TABS	42192-329-01	A9270	\$2.55	\$2.50	\$2.52	\$2.35	\$2.50
Inpatient/Outpatient	TOBRAMYCIN SULFATE 80 MG/2ML IJ SOLN	63323-306-02	J3260	\$3.16	\$3.10	\$3.13	\$2.92	\$3.10
Inpatient/Outpatient	TOBRAMYCIN SULFATE 80 MG/2ML IJ SOLN	63323-306-26	J3260	\$3.16	\$3.10	\$3.13	\$2.92	\$3.10
Inpatient/Outpatient	TOBRAMYCIN SULFATE 80 MG/2ML IJ SOLN	67457-473-00	J3260	\$4.47	\$4.38	\$4.43	\$4.13	\$4.38
Inpatient/Outpatient	TOBRAMYCIN SULFATE 80 MG/2ML IJ SOLN	36000-244-01	J3260	\$2.27	\$2.22	\$2.25	\$2.10	\$2.22
Inpatient/Outpatient	TOBRAMYCIN SULFATE 80 MG/2ML IJ SOLN	0409-3578-01	J3260	\$5.41	\$5.30	\$5.36	\$4.99	\$5.30
Inpatient/Outpatient	TOBRAMYCIN 0.3 % OP SOLN	24208-290-05	A9270	\$11.42	\$11.19	\$11.31	\$10.54	\$11.19
Inpatient/Outpatient	TOBRAMYCIN 0.3 % OP SOLN	61314-643-05	A9270	\$9.47	\$9.28	\$9.38	\$8.74	\$9.28
Inpatient/Outpatient	TOBRAMYCIN 0.3 % OP SOLN	70069-131-01	A9270	\$4.52	\$4.43	\$4.47	\$4.17	\$4.43
Inpatient/Outpatient	TOBRAMYCIN 0.3 % OP SOLN	17478-290-10	A9270	\$3.78	\$3.70	\$3.74	\$3.49	\$3.70
Inpatient/Outpatient	TOBRAMYCIN 0.3 % OP SOLN	72266-196-01	A9270	\$12.08	\$11.84	\$11.96	\$11.15	\$11.84
Inpatient/Outpatient	TOLNAFTATE 1 % EX CREA	51672-2020-1	A9150	\$0.56	\$0.55	\$0.55	\$0.52	\$0.55
Inpatient/Outpatient	TOLNAFTATE 1 % EX CREA	0904-0722-36	A9150	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	TOLNAFTATE 1 % EX CREA	51672-2020-2	A9150	\$0.47	\$0.46	\$0.47	\$0.43	\$0.46
Inpatient/Outpatient	TOLNAFTATE 1 % EX CREA	49348-155-29	A9150	\$0.65	\$0.64	\$0.64	\$0.60	\$0.64
Inpatient/Outpatient	TRAZODONE HCL 50 MG PO TABS	50111-433-01	A9270	\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	TRAZODONE HCL 50 MG PO TABS	60505-2653-1	A9270	\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	TRAZODONE HCL 50 MG PO TABS	0904-6868-61	A9270	\$0.43	\$0.42	\$0.43	\$0.40	\$0.42
Inpatient/Outpatient	TRAZODONE HCL 50 MG PO TABS	60687-443-11	A9270	\$0.43	\$0.42	\$0.43	\$0.40	\$0.42
Inpatient/Outpatient	TRAZODONE HCL 50 MG PO TABS	50111-560-01	A9270	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	TRAZODONE HCL 50 MG PO TABS	68382-805-05	A9270	\$0.22	\$0.22	\$0.22	\$0.20	\$0.22
Inpatient/Outpatient	TRIAMCINOLONE ACETONIDE 0.025 % EX CREA	0168-0003-15	A9270	\$0.65	\$0.64	\$0.64	\$0.60	\$0.64
Inpatient/Outpatient	TRIAMCINOLONE ACETONIDE 0.025 % EX CREA	0168-0003-80	A9270	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	TRIAMCINOLONE ACETONIDE 0.025 % EX CREA	0603-7861-74	A9270	\$0.81	\$0.79	\$0.80	\$0.75	\$0.79
Inpatient/Outpatient	TRIAMCINOLONE ACETONIDE 0.025 % EX CREA	45802-063-36	A9270	\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	TRIAMCINOLONE ACETONIDE 0.025 % EX CREA	45802-063-35	A9270	\$0.61	\$0.60	\$0.60	\$0.56	\$0.60
Inpatient/Outpatient	TRIAMCINOLONE ACETONIDE 0.1 % EX CREA	0168-0004-15	A9270	\$0.83	\$0.81	\$0.82	\$0.77	\$0.81
Inpatient/Outpatient	TRIAMCINOLONE ACETONIDE 0.1 % EX CREA	0168-0004-80	A9270	\$0.36	\$0.35	\$0.36	\$0.33	\$0.35
Inpatient/Outpatient	TRIAMCINOLONE ACETONIDE 0.1 % EX CREA	45802-064-36	A9270	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	TRIAMCINOLONE ACETONIDE 0.1 % EX CREA	0603-7862-74	A9270	\$1.00	\$0.98	\$0.99	\$0.92	\$0.98
Inpatient/Outpatient	TRIAMCINOLONE ACETONIDE 0.1 % EX CREA	67877-251-15	A9270	\$1.38	\$1.35	\$1.37	\$1.27	\$1.35
Inpatient/Outpatient	TRIAMCINOLONE ACETONIDE 0.1 % EX CREA	45802-064-35	A9270	\$0.29	\$0.28	\$0.29	\$0.27	\$0.28
Inpatient/Outpatient	TRIAMCINOLONE ACETONIDE 0.1 % EX CREA	52565-056-15	A9270	\$0.97	\$0.95	\$0.96	\$0.90	\$0.95
Inpatient/Outpatient	TRIAMCINOLONE ACETONIDE 0.1 % EX LOTN	0168-0337-60	A9150	\$5.45	\$5.34	\$5.40	\$5.03	\$5.34
Inpatient/Outpatient	TRIAMCINOLONE ACETONIDE 0.1 % EX LOTN	60432-561-60	A9150	\$1.61	\$1.58	\$1.59	\$1.49	\$1.58
Inpatient/Outpatient	TRIAMCINOLONE ACETONIDE 0.1 % EX LOTN	0603-7864-49	A9150	\$2.56	\$2.51	\$2.53	\$2.36	\$2.51
Inpatient/Outpatient	TRIAMCINOLONE ACETONIDE 0.1 % EX LOTN	61748-220-60	A9150	\$1.34	\$1.31	\$1.33	\$1.24	\$1.31
Inpatient/Outpatient	TRIAMCINOLONE ACETONIDE 0.1 % EX LOTN	0713-0676-53	A9150	\$1.28	\$1.25	\$1.27	\$1.18	\$1.25

Inpatient/Outpatient	BORTEZOMIB CHEMO IV SYRINGE 1 MG/ML	63020-049-01	J9041	\$3,286.15	\$3,220.43	\$3,253.29	\$3,033.12	\$3,220.43
Inpatient/Outpatient	TRIAMCINOLONE ACETONIDE 0.1 % EX OINT	0168-0006-15	A9270	\$0.61	\$0.60	\$0.60	\$0.56	\$0.60
Inpatient/Outpatient	TRIAMCINOLONE ACETONIDE 0.1 % EX OINT	0168-0006-80	A9270	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	TRIAMCINOLONE ACETONIDE 0.1 % EX OINT	0713-0228-15	A9270	\$1.20	\$1.18	\$1.19	\$1.11	\$1.18
Inpatient/Outpatient	TRIAMCINOLONE ACETONIDE 0.1 % EX OINT	45802-055-35	A9270	\$0.63	\$0.62	\$0.62	\$0.58	\$0.62
Inpatient/Outpatient	TRIAMCINOLONE ACETONIDE 0.1 % EX OINT	51672-1284-2	A9270	\$0.77	\$0.75	\$0.76	\$0.71	\$0.75
Inpatient/Outpatient	TRIAMCINOLONE ACETONIDE 0.1 % EX OINT	45802-055-36	A9270	\$0.63	\$0.62	\$0.62	\$0.58	\$0.62
Inpatient/Outpatient	TRIAMCINOLONE ACETONIDE 40 MG/ML IJ SUSP	0003-0293-05	J3301	\$42.33	\$41.48	\$41.91	\$39.07	\$41.48
Inpatient/Outpatient	TRIAMCINOLONE ACETONIDE 40 MG/ML IJ SUSP	70121-1657-1	J3301	\$16.23	\$15.91	\$16.07	\$14.98	\$15.91
Inpatient/Outpatient	TRIAMCINOLONE ACETONIDE 40 MG/ML IJ SUSP	0003-0293-20	J3301	\$43.00	\$42.14	\$42.57	\$39.69	\$42.14
Inpatient/Outpatient	TRIAMCINOLONE ACETONIDE 40 MG/ML IJ SUSP	0703-0241-01	J3301	\$38.44	\$37.67	\$38.06	\$35.48	\$37.67
Inpatient/Outpatient	TRIAMCINOLONE ACETONIDE 40 MG/ML IJ SUSP	70121-1049-1	J3301	\$16.22	\$15.90	\$16.06	\$14.97	\$15.90
Inpatient/Outpatient	TRIAMCINOLONE ACETONIDE 0.1 % MT PSTE	51672-1267-5	A9270	\$28.64	\$28.07	\$28.35	\$26.43	\$28.07
Inpatient/Outpatient	TRIAMCINOLONE ACETONIDE 0.1 % MT PSTE	64980-320-05	A9270	\$33.55	\$32.88	\$33.21	\$30.97	\$32.88
Inpatient/Outpatient	TRIAMCINOLONE ACETONIDE 0.1 % MT PSTE	0713-0655-40	A9270	\$28.46	\$27.89	\$28.18	\$26.27	\$27.89
Inpatient/Outpatient	TRIAMTERENE-HCTZ 75-50 MG PO TABS	51079-433-01	A9270	\$0.44	\$0.43	\$0.44	\$0.41	\$0.43
Inpatient/Outpatient	TRIAMTERENE-HCTZ 75-50 MG PO TABS	51079-433-20	A9270	\$2.43	\$2.38	\$2.41	\$2.24	\$2.38
Inpatient/Outpatient	TRIAMTERENE-HCTZ 75-50 MG PO TABS	60505-2657-1	A9270	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	BORTEZOMIB CHEMO SQ SYRINGE 2.5 MG/ML	63020-049-01	J9041	\$3,286.15	\$3,220.43	\$3,253.29	\$3,033.12	\$3,220.43
Inpatient/Outpatient	TRIHEXYPHENIDYL HCL 2 MG PO TABS	0143-1764-01	A9270	\$0.53	\$0.52	\$0.52	\$0.49	\$0.52
Inpatient/Outpatient	TRIHEXYPHENIDYL HCL 2 MG PO TABS	0603-6240-21	A9270	\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	TRIHEXYPHENIDYL HCL 2 MG PO TABS	16571-160-10	A9270	\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	TRIHEXYPHENIDYL HCL 2 MG PO TABS	0591-5335-01	A9270	\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	TRIHEXYPHENIDYL HCL 2 MG PO TABS	70954-212-10	A9270	\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	TRIMETHOBENZAMIDE HCL 100 MG/ML IM SOLN	42023-119-25	J3250	\$97.18	\$95.24	\$96.21	\$89.70	\$95.24
Inpatient/Outpatient	TRIMETHOPRIM 100 MG PO TABS	0093-2158-01	A9270	\$1.84	\$1.80	\$1.82	\$1.70	\$1.80
Inpatient/Outpatient	TRIMETHOPRIM 100 MG PO TABS	0591-5571-01	A9270	\$0.81	\$0.79	\$0.80	\$0.75	\$0.79
Inpatient/Outpatient	TRIMETHOPRIM 100 MG PO TABS	50268-775-11	A9270	\$1.02	\$1.00	\$1.01	\$0.94	\$1.00
Inpatient/Outpatient	TRIMETHOPRIM 100 MG PO TABS	43386-330-01	A9270	\$0.79	\$0.77	\$0.78	\$0.73	\$0.77
Inpatient/Outpatient	TRIMETHOPRIM 100 MG PO TABS	51862-486-01	A9270	\$9.05	\$8.87	\$8.96	\$8.35	\$8.87
Inpatient/Outpatient	TROPICAMIDE 0.5 % OP SOLN	61314-354-01	A9270	\$0.98	\$0.96	\$0.97	\$0.90	\$0.96
Inpatient/Outpatient	TROPICAMIDE 0.5 % OP SOLN	17478-101-12	A9270	\$1.49	\$1.46	\$1.48	\$1.38	\$1.46
Inpatient/Outpatient	TROPICAMIDE 1 % OP SOLN	61314-355-02	A9270	\$1.49	\$1.46	\$1.48	\$1.38	\$1.46
Inpatient/Outpatient	TROPICAMIDE 1 % OP SOLN	24208-585-64	A9270	\$9.72	\$9.53	\$9.62	\$8.97	\$9.53
Inpatient/Outpatient	TROPICAMIDE 1 % OP SOLN	61314-355-01	A9270	\$11.89	\$11.65	\$11.77	\$10.97	\$11.65
Inpatient/Outpatient	TROPICAMIDE 1 % OP SOLN	17478-102-12	A9270	\$1.52	\$1.49	\$1.50	\$1.40	\$1.49
Inpatient/Outpatient	TROPICAMIDE 1 % OP SOLN	0998-0355-15	A9270	\$25.14	\$24.64	\$24.89	\$23.20	\$24.64
Inpatient/Outpatient	TUBERCULIN PPD 5 UNIT/0.1ML ID SOLN	49281-752-21		\$426.12	\$417.60	\$421.86	\$393.31	\$417.60
Inpatient/Outpatient	TUBERCULIN PPD 5 UNIT/0.1ML ID SOLN	49281-752-22		\$330.45	\$323.84	\$327.15	\$305.01	\$323.84
Inpatient/Outpatient	TUBERCULIN PPD 5 UNIT/0.1ML ID SOLN	42023-104-01		\$372.13	\$364.69	\$368.41	\$343.48	\$364.69
Inpatient/Outpatient	TUBERCULIN PPD 5 UNIT/0.1ML ID SOLN	42023-104-05		\$289.94	\$284.14	\$287.04	\$267.61	\$284.14
Inpatient/Outpatient	TUBERCULIN PPD 5 UNIT/0.1ML ID SOLN	99999-104-99		\$372.13	\$364.69	\$368.41	\$343.48	\$364.69
Inpatient/Outpatient	TUBERCULIN PPD 5 UNIT/0.1ML ID SOLN	49281-752-78		\$265.26	\$259.95	\$262.61	\$244.83	\$259.95
Inpatient/Outpatient	TUBERCULIN PPD 5 UNIT/0.1ML ID SOLN	49281-752-98		\$193.63	\$189.76	\$191.69	\$178.72	\$189.76
Inpatient/Outpatient	VALPROIC ACID 250 MG PO CAPS	51079-298-01	A9270	\$3.86	\$3.78	\$3.82	\$3.56	\$3.78
Inpatient/Outpatient	VALPROIC ACID 250 MG PO CAPS	69452-150-20	A9270	\$1.70	\$1.67	\$1.68	\$1.57	\$1.67
Inpatient/Outpatient	VALPROIC ACID 250 MG PO CAPS	63739-251-10	A9270	\$1.94	\$1.90	\$1.92	\$1.79	\$1.90
Inpatient/Outpatient	VALPROIC ACID 250 MG PO CAPS	0832-0310-11	A9270	\$0.62	\$0.61	\$0.61	\$0.57	\$0.61
Inpatient/Outpatient	VALPROIC ACID 250 MG PO CAPS	0591-4012-01	A9270	\$1.12	\$1.10	\$1.11	\$1.03	\$1.10
Inpatient/Outpatient	VANCOMYCIN HCL 500 MG IV SOLR	67457-339-00	J3370	\$30.86	\$30.24	\$30.55	\$28.48	\$30.24
Inpatient/Outpatient	VANCOMYCIN HCL 500 MG IV SOLR	63323-221-33	J3370	\$31.56	\$30.93	\$31.24	\$29.13	\$30.93
Inpatient/Outpatient	VANCOMYCIN HCL 500 MG IV SOLR	63323-221-43	J3370	\$10.18	\$9.98	\$10.08	\$9.40	\$9.98
Inpatient/Outpatient	VANCOMYCIN HCL 500 MG IV SOLR	0409-4332-01	J3370	\$36.28	\$35.55	\$35.92	\$33.49	\$35.55
Inpatient/Outpatient	VANCOMYCIN HCL 500 MG IV SOLR	63323-221-41	J3370	\$10.18	\$9.98	\$10.08	\$9.40	\$9.98
Inpatient/Outpatient	VANCOMYCIN HCL 500 MG IV SOLR	72611-761-01	J3370	\$9.72	\$9.53	\$9.62	\$8.97	\$9.53
Inpatient/Outpatient	VANCOMYCIN HCL 500 MG IV SOLR	63323-221-01	J3370	\$10.18	\$9.98	\$10.08	\$9.40	\$9.98
Inpatient/Outpatient	VANCOMYCIN HCL 500 MG IV SOLR	70594-045-02	J3370	\$31.66	\$31.03	\$31.34	\$29.22	\$31.03
Inpatient/Outpatient	VANCOMYCIN HCL 5000 MG IV SOLR	63323-295-61	J3370	\$90.40	\$88.59	\$89.50	\$83.44	\$88.59
Inpatient/Outpatient	VANCOMYCIN HCL 5000 MG IV SOLR	0409-6509-01	J3370	\$401.10	\$393.08	\$397.09	\$370.22	\$393.08
Inpatient/Outpatient	VANCOMYCIN HCL 5000 MG IV SOLR	25021-157-99	J3370	\$242.95	\$238.09	\$240.52	\$224.24	\$238.09
Inpatient/Outpatient	VANCOMYCIN HCL 5000 MG IV SOLR	63323-295-66	J3370	\$90.40	\$88.59	\$89.50	\$83.44	\$88.59
Inpatient/Outpatient	VANCOMYCIN HCL 5000 MG IV SOLR	0143-9358-01	J3370	\$361.63	\$354.40	\$358.01	\$333.78	\$354.40
Inpatient/Outpatient	VANCOMYCIN HCL 5000 MG IV SOLR	67457-341-05	J3370	\$399.98	\$391.98	\$395.98	\$369.18	\$391.98
Inpatient/Outpatient	VASOPRESSIN 20 UNIT/ML IV SOLN	42023-164-01		\$294.01	\$288.13	\$291.07	\$271.37	\$288.13
Inpatient/Outpatient	VASOPRESSIN 20 UNIT/ML IV SOLN	42023-164-25		\$294.01	\$288.13	\$291.07	\$271.37	\$288.13
Inpatient/Outpatient	VASOPRESSIN 20 UNIT/ML IV SOLN	42367-570-87		\$538.94	\$528.16	\$533.55	\$497.44	\$528.16
Inpatient/Outpatient	VASOPRESSIN 20 UNIT/ML IV SOLN	42367-570-22		\$538.94	\$528.16	\$533.55	\$497.44	\$528.16
Inpatient/Outpatient	VASOPRESSIN 20 UNIT/ML IV SOLN	43598-085-11		\$424.01	\$415.53	\$419.77	\$391.36	\$415.53

Inpatient/Outpatient	VASOPRESSIN 20 UNIT/ML IV SOLN	0517-1020-25		\$321.15	\$314.73	\$317.94	\$296.42	\$314.73
Inpatient/Outpatient	VASOPRESSIN 20 UNIT/ML IV SOLN	0517-1020-01		\$460.92	\$451.70	\$456.31	\$425.43	\$451.70
Inpatient/Outpatient	VERAPAMIL HCL 2.5 MG/ML IV SOLN	0409-1144-01		\$1.51	\$1.48	\$1.49	\$1.39	\$1.48
Inpatient/Outpatient	VERAPAMIL HCL 2.5 MG/ML IV SOLN	51754-0203-1		\$52.98	\$51.92	\$52.45	\$48.90	\$51.92
Inpatient/Outpatient	VERAPAMIL HCL 2.5 MG/ML IV SOLN	70069-271-25		\$17.44	\$17.09	\$17.27	\$16.10	\$17.09
Inpatient/Outpatient	VERAPAMIL HCL 2.5 MG/ML IV SOLN	42571-313-87		\$23.83	\$23.35	\$23.59	\$22.00	\$23.35
Inpatient/Outpatient	VERAPAMIL HCL 2.5 MG/ML IV SOLN	70069-272-05		\$8.37	\$8.20	\$8.29	\$7.73	\$8.20
Inpatient/Outpatient	VERAPAMIL HCL 2.5 MG/ML IV SOLN	70069-271-01		\$28.94	\$28.36	\$28.65	\$26.71	\$28.36
Inpatient/Outpatient	VERAPAMIL HCL 2.5 MG/ML IV SOLN	70069-271-05		\$28.94	\$28.36	\$28.65	\$26.71	\$28.36
Inpatient/Outpatient	VERAPAMIL HCL 2.5 MG/ML IV SOLN	51754-0204-1		\$36.34	\$35.61	\$35.98	\$33.54	\$35.61
Inpatient/Outpatient	VERAPAMIL HCL 2.5 MG/ML IV SOLN	0409-1144-62		\$18.58	\$18.21	\$18.39	\$17.15	\$18.21
Inpatient/Outpatient	VERAPAMIL HCL 2.5 MG/ML IV SOLN	55150-342-25		\$48.60	\$47.63	\$48.11	\$44.86	\$47.63
Inpatient/Outpatient	VERAPAMIL HCL 2.5 MG/ML IV SOLN	70121-1585-1		\$10.80	\$10.58	\$10.69	\$9.97	\$10.58
Inpatient/Outpatient	VERAPAMIL HCL 2.5 MG/ML IV SOLN	43066-031-01		\$10.54	\$10.33	\$10.43	\$9.73	\$10.33
Inpatient/Outpatient	VERAPAMIL HCL 40 MG PO TABS	0591-0404-01	A9270	\$0.54	\$0.53	\$0.53	\$0.50	\$0.53
Inpatient/Outpatient	VERAPAMIL HCL 40 MG PO TABS	23155-059-01	A9270	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	VERAPAMIL HCL 80 MG PO TABS	0904-2920-61	A9270	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	VERAPAMIL HCL 80 MG PO TABS	23155-026-01	A9270	\$0.20	\$0.20	\$0.20	\$0.18	\$0.20
Inpatient/Outpatient	VINBLASTINE SULFATE 1 MG/ML IV SOLN	63323-278-10	J9360	\$18.00	\$17.64	\$17.82	\$16.61	\$17.64
Inpatient/Outpatient	VINCRISTINE SULFATE 1 MG/ML IV SOLN	61703-309-16	J9370	\$22.96	\$22.50	\$22.73	\$21.19	\$22.50
Inpatient/Outpatient	VINCRISTINE SULFATE 1 MG/ML IV SOLN	0703-4412-11	J9370	\$48.58	\$47.61	\$48.09	\$44.84	\$47.61
Inpatient/Outpatient	VINCRISTINE SULFATE 1 MG/ML IV SOLN	61703-309-06	J9370	\$24.69	\$24.20	\$24.44	\$22.79	\$24.20
Inpatient/Outpatient	VINCRISTINE SULFATE 1 MG/ML IV SOLN	0703-4402-11	J9370	\$68.09	\$66.73	\$67.41	\$62.85	\$66.73
Inpatient/Outpatient	VITAMIN A 3 MG (10000 UT) PO CAPS	0904-2085-60	A9150	\$0.08	\$0.08	\$0.08	\$0.07	\$0.08
Inpatient/Outpatient	B-COMPLEX PO TABS (WRAP)	30768-00601	A9270	\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	B-COMPLEX PO TABS (WRAP)	31604-02727	A9270	\$0.40	\$0.39	\$0.40	\$0.37	\$0.39
Inpatient/Outpatient	B-COMPLEX PO TABS (WRAP)	10939-80844	A9270	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	B-COMPLEX PO TABS (WRAP)	0904-0262-52	A9270	\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	VITAMIN B-12 100 MCG PO TABS	0536-3542-01	A9150	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	VITAMIN B-12 100 MCG PO TABS	57896-856-01	A9150	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	VITAMIN B-12 100 MCG PO TABS	50268-852-11	A9150	\$0.78	\$0.76	\$0.77	\$0.72	\$0.76
Inpatient/Outpatient	VITAMIN B-12 100 MCG PO TABS	10006-73035	A9150	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	VITAMIN B-12 100 MCG PO TABS	80681-07100	A9150	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	PHENAZOPYRIDINE 10 MG/ML ORAL SUSPENSION	99999-036-00	A9270	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	VITAMIN B-12 500 MCG PO TABS	0536-3551-01	A9150	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	VITAMIN B-12 500 MCG PO TABS	50268-854-15	A9150	\$0.61	\$0.60	\$0.60	\$0.56	\$0.60
Inpatient/Outpatient	VITAMIN B-12 500 MCG PO TABS	50268-854-11	A9150	\$0.81	\$0.79	\$0.80	\$0.75	\$0.79
Inpatient/Outpatient	VITAMIN B-12 500 MCG PO TABS	37864-91301	A9150	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	VITAMIN B-12 500 MCG PO TABS	30768-12608	A9150	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	VITAMIN B-12 500 MCG PO TABS	77333-937-25	A9150	\$0.55	\$0.54	\$0.54	\$0.51	\$0.54
Inpatient/Outpatient	VITAMIN B-12 500 MCG PO TABS	40093-10646	A9150	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	VITAMIN B-12 500 MCG PO TABS	10006-70164	A9150	\$0.71	\$0.70	\$0.70	\$0.66	\$0.70
Inpatient/Outpatient	CLONAZEPAM 0.125 MG PO TBDP	49884-306-02	A9270	\$2.38	\$2.33	\$2.36	\$2.20	\$2.33
Inpatient/Outpatient	CLONAZEPAM 0.125 MG PO TBDP	49884-306-52	A9270	\$3.30	\$3.23	\$3.27	\$3.05	\$3.23
Inpatient/Outpatient	CLONAZEPAM 0.125 MG PO TBDP	0555-0094-96	A9270	\$4.23	\$4.15	\$4.19	\$3.90	\$4.15
Inpatient/Outpatient	CLONAZEPAM 0.125 MG PO TBDP	57664-783-86	A9270	\$1.89	\$1.85	\$1.87	\$1.74	\$1.85
Inpatient/Outpatient	POTASSIUM ACETATE 2 MEQ/ML ORAL SOLUTION	99999-037-00	A9150	\$0.76	\$0.74	\$0.75	\$0.70	\$0.74
Inpatient/Outpatient	ASCORBIC ACID 500 MG PO TABS	10939-52144	A9150	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	ASCORBIC ACID 500 MG PO TABS	0904-0523-61	A9150	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	ASCORBIC ACID 500 MG PO TABS	37864-00059	A9150	\$0.08	\$0.08	\$0.08	\$0.07	\$0.08
Inpatient/Outpatient	ASCORBIC ACID 500 MG PO TABS	0904-0523-80	A9150	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	ASCORBIC ACID 500 MG PO TABS	57896-841-01	A9150	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	VITAMIN D (ERGOCALCIFEROL) 1.25 MG (50000 UT) PO CAPS	50111-990-01	A9152	\$2.51	\$2.46	\$2.48	\$2.32	\$2.46
Inpatient/Outpatient	VITAMIN D (ERGOCALCIFEROL) 1.25 MG (50000 UT) PO CAPS	64380-737-06	A9152	\$0.73	\$0.72	\$0.72	\$0.67	\$0.72
Inpatient/Outpatient	VITAMIN D (CHOLECALCIFEROL) 10 MCG (400 UNIT) PO TABS	43292-55881	A9150	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	VITAMIN D (CHOLECALCIFEROL) 10 MCG (400 UNIT) PO TABS	0904-5823-60	A9150	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	VITAMIN E 45 MG (100 UNITS) PO CAPS (WRAP)	0904-0270-60	A9270	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	VITAMIN E 45 MG (100 UNITS) PO CAPS (WRAP)	80681-13400	A9270	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	VITAMIN E 45 MG (100 UNITS) PO CAPS (WRAP)	54629-100-01	A9270	\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	VITAMIN E 180 MG (400 UNITS) PO CAPS (WRAP)	0904-0274-60	A9150	\$0.20	\$0.20	\$0.20	\$0.18	\$0.20
Inpatient/Outpatient	VITAMIN E 180 MG (400 UNITS) PO CAPS (WRAP)	0904-0274-61	A9150	\$0.42	\$0.41	\$0.42	\$0.39	\$0.41
Inpatient/Outpatient	VITAMIN E 180 MG (400 UNITS) PO CAPS (WRAP)	57896-752-01	A9150	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	VITAMIN E 180 MG (400 UNITS) PO CAPS (WRAP)	77333-951-25	A9150	\$0.79	\$0.77	\$0.78	\$0.73	\$0.77
Inpatient/Outpatient	VITAMIN K1 10 MG/ML IJ SOLN	0409-9158-01	J3430	\$207.79	\$203.63	\$205.71	\$191.79	\$203.63
Inpatient/Outpatient	VITAMIN K1 10 MG/ML IJ SOLN	43598-405-16	J3430	\$102.23	\$100.19	\$101.21	\$94.36	\$100.19
Inpatient/Outpatient	VITAMIN K1 10 MG/ML IJ SOLN	0409-9158-31	J3430	\$208.11	\$203.95	\$206.03	\$192.09	\$203.95
Inpatient/Outpatient	VITAMIN K1 10 MG/ML IJ SOLN	43598-405-11	J3430	\$169.42	\$166.03	\$167.73	\$156.37	\$166.03
Inpatient/Outpatient	VITAMINS A & D EX OINT	0168-0035-45	A9150	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17

Inpatient/Outpatient	VITAMINS A & D EX OINT	0168-0035-01	A9150	\$0.21	\$0.21	\$0.21	\$0.19	\$0.21
Inpatient/Outpatient	VITAMINS A & D EX OINT	45802-395-04	A9150	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	VITAMINS A & D EX OINT	0168-0035-04	A9150	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	VITAMINS A & D EX OINT	41100-81124	A9150	\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	VITAMINS A & D EX OINT	53329-090-16	A9150	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	WARFARIN SODIUM 10 MG PO TABS	0056-0174-70	A9270	\$14.33	\$14.04	\$14.19	\$13.23	\$14.04
Inpatient/Outpatient	WARFARIN SODIUM 10 MG PO TABS	0056-0174-75	A9270	\$14.47	\$14.18	\$14.33	\$13.36	\$14.18
Inpatient/Outpatient	WARFARIN SODIUM 10 MG PO TABS	0056-0174-01	A9270	\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	WARFARIN SODIUM 10 MG PO TABS	0832-1219-89	A9270	\$0.93	\$0.91	\$0.92	\$0.86	\$0.91
Inpatient/Outpatient	WARFARIN SODIUM 2 MG PO TABS	0056-0170-75	A9270	\$9.73	\$9.54	\$9.63	\$8.98	\$9.54
Inpatient/Outpatient	WARFARIN SODIUM 2 MG PO TABS	0056-0170-01	A9270	\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	WARFARIN SODIUM 2 MG PO TABS	62584-984-11	A9270	\$1.04	\$1.02	\$1.03	\$0.96	\$1.02
Inpatient/Outpatient	WARFARIN SODIUM 2 MG PO TABS	0832-1212-89	A9270	\$0.61	\$0.60	\$0.60	\$0.56	\$0.60
Inpatient/Outpatient	WARFARIN SODIUM 2.5 MG PO TABS	0056-0176-75	A9270	\$10.05	\$9.85	\$9.95	\$9.28	\$9.85
Inpatient/Outpatient	WARFARIN SODIUM 2.5 MG PO TABS	0056-0176-01	A9270	\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	WARFARIN SODIUM 2.5 MG PO TABS	68084-027-11	A9270	\$1.09	\$1.07	\$1.08	\$1.01	\$1.07
Inpatient/Outpatient	WARFARIN SODIUM 2.5 MG PO TABS	65162-763-10	A9270	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	WARFARIN SODIUM 2.5 MG PO TABS	0832-1213-89	A9270	\$0.61	\$0.60	\$0.60	\$0.56	\$0.60
Inpatient/Outpatient	WARFARIN SODIUM 5 MG PO TABS	0056-0172-75	A9270	\$10.47	\$10.26	\$10.37	\$9.66	\$10.26
Inpatient/Outpatient	WARFARIN SODIUM 5 MG PO TABS	0056-0172-01	A9270	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	WARFARIN SODIUM 5 MG PO TABS	0056-0172-70	A9270	\$10.35	\$10.14	\$10.25	\$9.55	\$10.14
Inpatient/Outpatient	WARFARIN SODIUM 5 MG PO TABS	62584-994-11	A9270	\$1.13	\$1.11	\$1.12	\$1.04	\$1.11
Inpatient/Outpatient	WARFARIN SODIUM 5 MG PO TABS	0832-1216-89	A9270	\$0.61	\$0.60	\$0.60	\$0.56	\$0.60
Inpatient/Outpatient	WARFARIN SODIUM 5 MG PO TABS	51672-4032-1	A9270	\$0.42	\$0.41	\$0.42	\$0.39	\$0.41
Inpatient/Outpatient	WARFARIN SODIUM 7.5 MG PO TABS	0056-0173-01	A9270	\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	WARFARIN SODIUM 7.5 MG PO TABS	0056-0173-75	A9270	\$13.96	\$13.68	\$13.82	\$12.89	\$13.68
Inpatient/Outpatient	WARFARIN SODIUM 7.5 MG PO TABS	0056-0173-70	A9270	\$13.82	\$13.54	\$13.68	\$12.76	\$13.54
Inpatient/Outpatient	WARFARIN SODIUM 7.5 MG PO TABS	0832-1218-89	A9270	\$0.94	\$0.92	\$0.93	\$0.87	\$0.92
Inpatient/Outpatient	ZINC OXIDE 20 % EX OINT	0168-0062-02	A9150	\$0.34	\$0.33	\$0.34	\$0.31	\$0.33
Inpatient/Outpatient	ZINC OXIDE 20 % EX OINT	0168-0062-31	A9150	\$0.32	\$0.31	\$0.32	\$0.30	\$0.31
Inpatient/Outpatient	ZINC OXIDE 20 % EX OINT	0536-5700-98	A9150	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	ZINC OXIDE 20 % EX OINT	75834-170-02	A9150	\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	ZINC OXIDE 20 % EX OINT	75834-170-01	A9150	\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	ZINC SULFATE 220 (50 ZN) MG PO CAPS	0574-9167-01	A9150	\$0.64	\$0.63	\$0.63	\$0.59	\$0.63
Inpatient/Outpatient	ZINC SULFATE 220 (50 ZN) MG PO CAPS	37864-99101	A9150	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	ZINC SULFATE 220 (50 ZN) MG PO CAPS	77333-983-25	A9150	\$0.67	\$0.66	\$0.66	\$0.62	\$0.66
Inpatient/Outpatient	ZINC SULFATE 220 (50 ZN) MG PO CAPS	68585-00801	A9150	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	ZINC SULFATE 220 (50 ZN) MG PO CAPS	80681-13500	A9150	\$0.08	\$0.08	\$0.08	\$0.07	\$0.08
Inpatient/Outpatient	GEMCITABINE HCL 1 GM/26.3ML IV SOLN	0409-0181-01	J9201	\$7.44	\$7.29	\$7.37	\$6.87	\$7.29
Inpatient/Outpatient	GEMCITABINE HCL 1 GM/26.3ML IV SOLN	67457-617-30	J9201	\$4.92	\$4.82	\$4.87	\$4.54	\$4.82
Inpatient/Outpatient	GEMCITABINE HCL 1 GM/26.3ML IV SOLN	45963-624-58	J9201	\$2.83	\$2.77	\$2.80	\$2.61	\$2.77
Inpatient/Outpatient	ACETAMINOPHEN 160 MG/5ML PO SUSP (PEDS)	0904-5116-20	A9150	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	ACETAMINOPHEN 160 MG/5ML PO SUSP (PEDS)	68094-593-61	A9150	\$4.62	\$4.53	\$4.57	\$4.26	\$4.53
Inpatient/Outpatient	ACETAMINOPHEN 160 MG/5ML PO SUSP (PEDS)	68094-593-59	A9150	\$1.94	\$1.90	\$1.92	\$1.79	\$1.90
Inpatient/Outpatient	ACETAMINOPHEN 160 MG/5ML PO SUSP (PEDS)	68094-593-58	A9150	\$1.08	\$1.06	\$1.07	\$1.00	\$1.06
Inpatient/Outpatient	ACETAMINOPHEN 160 MG/5ML PO SUSP (PEDS)	0045-0167-62	A9150	\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	ACETAMINOPHEN 160 MG/5ML PO SUSP (PEDS)	0121-1781-00	A9150	\$0.52	\$0.51	\$0.51	\$0.48	\$0.51
Inpatient/Outpatient	ACETAMINOPHEN 160 MG/5ML PO SUSP (PEDS)	0121-1781-05	A9150	\$0.60	\$0.59	\$0.59	\$0.55	\$0.59
Inpatient/Outpatient	ACETAMINOPHEN 160 MG/5ML PO SUSP (PEDS)	68094-587-59	A9150	\$2.91	\$2.85	\$2.88	\$2.69	\$2.85
Inpatient/Outpatient	ACETAMINOPHEN 160 MG/5ML PO SUSP (PEDS)	68094-231-59	A9150	\$0.54	\$0.53	\$0.53	\$0.50	\$0.53
Inpatient/Outpatient	CEFTOLOZANE-TAZOBACTAM 1.5 (1-0.5) G IV SOLR	67919-030-01	J0695	\$416.86	\$408.52	\$412.69	\$384.76	\$408.52
Inpatient/Outpatient	EMTRICITABINE-TENOFOVIR AF 200-25 MG PO TABS	61958-2002-1	A9270	\$320.38	\$313.97	\$317.18	\$295.71	\$313.97
Inpatient/Outpatient	BUTALBITAL-APAP-CAFFEINE 50-325-40 MG PO TABS	68084-396-11	A9270	\$0.47	\$0.46	\$0.47	\$0.43	\$0.46
Inpatient/Outpatient	BUTALBITAL-APAP-CAFFEINE 50-325-40 MG PO TABS	68084-396-01	A9270	\$0.89	\$0.87	\$0.88	\$0.82	\$0.87
Inpatient/Outpatient	BUTALBITAL-APAP-CAFFEINE 50-325-40 MG PO TABS	6063-2544-21	A9270	\$4.35	\$4.26	\$4.31	\$4.02	\$4.26
Inpatient/Outpatient	BUTALBITAL-APAP-CAFFEINE 50-325-40 MG PO TABS	0591-3369-01	A9270	\$3.21	\$3.15	\$3.18	\$2.96	\$3.15
Inpatient/Outpatient	BUTALBITAL-APAP-CAFFEINE 50-325-40 MG PO TABS	10702-253-01	A9270	\$0.92	\$0.90	\$0.91	\$0.85	\$0.90
Inpatient/Outpatient	BUTALBITAL-APAP-CAFFEINE 50-325-40 MG PO TABS	0527-1695-01	A9270	\$1.27	\$1.24	\$1.26	\$1.17	\$1.24
Inpatient/Outpatient	BUTALBITAL-APAP-CAFFEINE 50-325-40 MG PO TABS	69367-203-01	A9270	\$0.85	\$0.83	\$0.84	\$0.78	\$0.83
Inpatient/Outpatient	ACETAZOLAMIDE ER 500 MG PO CP12	51285-754-02	A9270	\$41.99	\$41.15	\$41.57	\$38.76	\$41.15
Inpatient/Outpatient	ACETAZOLAMIDE ER 500 MG PO CP12	0555-0513-02	A9270	\$13.96	\$13.68	\$13.82	\$12.89	\$13.68
Inpatient/Outpatient	ACETAZOLAMIDE ER 500 MG PO CP12	50742-233-01	A9270	\$1.36	\$1.33	\$1.35	\$1.26	\$1.33
Inpatient/Outpatient	ACETAZOLAMIDE ER 500 MG PO CP12	29033-030-01	A9270	\$1.24	\$1.22	\$1.23	\$1.14	\$1.22
Inpatient/Outpatient	ARTEMETHER-LUMEFANTRINE 20-120 MG PO TABS	0078-0568-45	A9270	\$23.11	\$22.65	\$22.88	\$21.33	\$22.65
Inpatient/Outpatient	ACYCLOVIR 200 MG PO CAPS	0904-5789-61	A9270	\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	ACYCLOVIR 200 MG PO CAPS	0093-8940-01	A9270	\$0.55	\$0.54	\$0.54	\$0.51	\$0.54
Inpatient/Outpatient	ACYCLOVIR 200 MG PO CAPS	23155-146-01	A9270	\$2.89	\$2.83	\$2.86	\$2.67	\$2.83
Inpatient/Outpatient	ACYCLOVIR 200 MG PO CAPS	0093-8940-93	A9270	\$0.47	\$0.46	\$0.47	\$0.43	\$0.46

Inpatient/Outpatient	ACYCLOVIR 200 MG PO CAPS	0093-8940-19	A9270	\$0.47	\$0.46	\$0.47	\$0.43	\$0.46
Inpatient/Outpatient	ACYCLOVIR 200 MG/5ML PO SUSP	0472-0082-16	A9270	\$3.38	\$3.31	\$3.35	\$3.12	\$3.31
Inpatient/Outpatient	ACYCLOVIR 200 MG/5ML PO SUSP	50383-810-16	A9270	\$0.60	\$0.59	\$0.59	\$0.55	\$0.59
Inpatient/Outpatient	ACYCLOVIR 200 MG/5ML PO SUSP	0378-8712-73	A9270	\$1.72	\$1.69	\$1.70	\$1.59	\$1.69
Inpatient/Outpatient	ACYCLOVIR 200 MG/5ML PO SUSP	70954-188-10	A9270	\$0.79	\$0.77	\$0.78	\$0.73	\$0.77
Inpatient/Outpatient	ACYCLOVIR 800 MG PO TABS	0093-8947-01	A9270	\$1.45	\$1.42	\$1.44	\$1.34	\$1.42
Inpatient/Outpatient	ACYCLOVIR 800 MG PO TABS	31722-778-01	A9270	\$1.11	\$1.09	\$1.10	\$1.02	\$1.09
Inpatient/Outpatient	ACYCLOVIR 800 MG PO TABS	61442-113-01	A9270	\$0.49	\$0.48	\$0.49	\$0.45	\$0.48
Inpatient/Outpatient	POTASSIUM PHOSPHATE 2 MEQ/ML ORAL SOLUTION	99999-038-00	A9150	\$1.28	\$1.25	\$1.27	\$1.18	\$1.25
Inpatient/Outpatient	GLYCERIN (LAXATIVE) 2 G RE SUPP	0132-0079-12	A9150	\$0.43	\$0.42	\$0.43	\$0.40	\$0.42
Inpatient/Outpatient	GLYCERIN (LAXATIVE) 2 G RE SUPP	58980-410-12	A9150	\$0.73	\$0.72	\$0.72	\$0.67	\$0.72
Inpatient/Outpatient	ALBENDAZOLE 200 MG PO TABS	52054-550-22	A9270	\$773.71	\$758.24	\$765.97	\$714.13	\$758.24
Inpatient/Outpatient	ALBENDAZOLE 200 MG PO TABS	52054-550-28	A9270	\$229.94	\$225.34	\$227.64	\$212.23	\$225.34
Inpatient/Outpatient	ALBENDAZOLE 200 MG PO TABS	16714-907-01	A9270	\$346.73	\$339.80	\$343.26	\$320.03	\$339.80
Inpatient/Outpatient	ALBENDAZOLE 200 MG PO TABS	42799-110-02	A9270	\$258.38	\$253.21	\$255.80	\$238.48	\$253.21
Inpatient/Outpatient	ALBENDAZOLE 200 MG PO TABS	69097-237-72	A9270	\$157.95	\$154.79	\$156.37	\$145.79	\$154.79
Inpatient/Outpatient	ALBENDAZOLE 200 MG PO TABS	72205-051-08	A9270	\$23.18	\$22.72	\$22.95	\$21.40	\$22.72
Inpatient/Outpatient	ALBUMIN HUMAN 25 % IV SOLN	44206-251-05	P9047	\$5.05	\$4.95	\$5.00	\$4.66	\$4.95
Inpatient/Outpatient	ALBUMIN HUMAN 25 % IV SOLN	68516-5213-2	P9047	\$4.62	\$4.53	\$4.57	\$4.26	\$4.53
Inpatient/Outpatient	ALBUMIN HUMAN 25 % IV SOLN	44206-251-90	P9047	\$0.65	\$0.64	\$0.64	\$0.60	\$0.64
Inpatient/Outpatient	ALBUMIN HUMAN 25 % IV SOLN	76125-792-25	P9047	\$3.26	\$3.19	\$3.23	\$3.01	\$3.19
Inpatient/Outpatient	ALBUMIN HUMAN 25 % IV SOLN	76125-792-26	P9047	\$3.02	\$2.96	\$2.99	\$2.79	\$2.96
Inpatient/Outpatient	ALBUMIN HUMAN 25 % IV SOLN	68516-5216-3	P9047	\$3.47	\$3.40	\$3.44	\$3.20	\$3.40
Inpatient/Outpatient	ALBUMIN HUMAN 5 % IV SOLN	13533-690-20	P9041	\$2.88	\$2.82	\$2.85	\$2.66	\$2.82
Inpatient/Outpatient	ALBUMIN HUMAN 5 % IV SOLN	76125-785-25	P9045	\$0.87	\$0.85	\$0.86	\$0.80	\$0.85
Inpatient/Outpatient	ALBUMIN HUMAN 5 % IV SOLN	68982-623-02	P9045	\$0.89	\$0.87	\$0.88	\$0.82	\$0.87
Inpatient/Outpatient	ALBUMIN HUMAN 5 % IV SOLN	68516-5214-4	P9045	\$0.99	\$0.97	\$0.98	\$0.91	\$0.97
Inpatient/Outpatient	ALBUMIN HUMAN 5 % IV SOLN	68982-623-03	P9045	\$0.89	\$0.87	\$0.88	\$0.82	\$0.87
Inpatient/Outpatient	ALBUMIN HUMAN 5 % IV SOLN	76125-790-26	P9045	\$0.61	\$0.60	\$0.60	\$0.56	\$0.60
Inpatient/Outpatient	ALBUMIN HUMAN 5 % IV SOLN	68516-5214-3	P9045	\$1.20	\$1.18	\$1.19	\$1.11	\$1.18
Inpatient/Outpatient	ALBUMIN HUMAN 5 % IV SOLN	0944-0491-01	P9045	\$1.17	\$1.15	\$1.16	\$1.08	\$1.15
Inpatient/Outpatient	ALBUMIN HUMAN 5 % IV SOLN	76125-790-25	P9045	\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	ALBUMIN HUMAN 5 % IV SOLN	44206-310-50	P9045	\$1.01	\$0.99	\$1.00	\$0.93	\$0.99
Inpatient/Outpatient	ALPROSTADIL 500 MCG/ML IJ SOLN	0009-3169-06	J0270	\$397.23	\$389.29	\$393.26	\$366.64	\$389.29
Inpatient/Outpatient	ALPROSTADIL 500 MCG/ML IJ SOLN	0703-1501-01	J0270	\$117.40	\$115.05	\$116.23	\$108.36	\$115.05
Inpatient/Outpatient	ALPROSTADIL 500 MCG/ML IJ SOLN	0703-1501-02	J0270	\$344.01	\$337.13	\$340.57	\$317.52	\$337.13
Inpatient/Outpatient	ALPROSTADIL 500 MCG/ML IJ SOLN	0009-3169-01	J0270	\$397.23	\$389.29	\$393.26	\$366.64	\$389.29
Inpatient/Outpatient	ALTEPLASE 100 MG IV SOLR	50242-085-27	J2997	\$12,940.99	\$12,682.17	\$12,811.58	\$11,944.53	\$12,682.17
Inpatient/Outpatient	ALTEPLASE 50 MG IV SOLR	50242-044-13	J2997	\$8,395.26	\$8,227.35	\$8,311.31	\$7,748.82	\$8,227.35
Inpatient/Outpatient	ALUM & MAG HYDROXIDE-SIMETH 200-200-20 MG/5ML PO SUSP	0121-1761-30	A9270	\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	ALUM & MAG HYDROXIDE-SIMETH 200-200-20 MG/5ML PO SUSP	0904-5721-14	A9270	\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	ALUM & MAG HYDROXIDE-SIMETH 200-200-20 MG/5ML PO SUSP	17856-5721-3	A9270	\$0.24	\$0.24	\$0.24	\$0.22	\$0.24
Inpatient/Outpatient	ALUM & MAG HYDROXIDE-SIMETH 200-200-20 MG/5ML PO SUSP	99999-629-30	A9270	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	ALUM & MAG HYDROXIDE-SIMETH 200-200-20 MG/5ML PO SUSP	57896-629-12	A9270	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	ALUM & MAG HYDROXIDE-SIMETH 200-200-20 MG/5ML PO SUSP	0904-6764-14	A9270	\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	ALUM & MAG HYDROXIDE-SIMETH 200-200-20 MG/5ML PO SUSP	66689-060-99	A9270	\$0.24	\$0.24	\$0.24	\$0.22	\$0.24
Inpatient/Outpatient	ALUM & MAG HYDROXIDE-SIMETH 200-200-20 MG/5ML PO SUSP	66689-060-01	A9270	\$0.24	\$0.24	\$0.24	\$0.22	\$0.24
Inpatient/Outpatient	ALUM & MAG HYDROXIDE-SIMETH 200-200-20 MG/5ML PO SUSP	63739-159-10	A9270	\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	RISPERIDONE MICROSPHERES ER 12.5 MG IM SRER	50458-309-01	J2794	\$828.77	\$812.19	\$820.48	\$764.95	\$812.19
Inpatient/Outpatient	RISPERIDONE MICROSPHERES ER 12.5 MG IM SRER	50458-309-11	J2794	\$869.41	\$852.02	\$860.72	\$802.47	\$852.02
Inpatient/Outpatient	SODIUM PHOSPHATE 2 MEQ/ML ORAL SOLUTION	99999-039-00	A9150	\$6.64	\$6.51	\$6.57	\$6.13	\$6.51
Inpatient/Outpatient	AMINOCAPROIC ACID 0.25 GM/ML PO SOLN	49411-052-08	A9270	\$53.40	\$52.33	\$52.87	\$49.29	\$52.33
Inpatient/Outpatient	AMINOCAPROIC ACID 0.25 GM/ML PO SOLN	17478-447-08	A9270	\$21.19	\$20.77	\$20.98	\$19.56	\$20.77
Inpatient/Outpatient	AMINOCAPROIC ACID 0.25 GM/ML PO SOLN	52817-815-08	A9270	\$14.59	\$14.30	\$14.44	\$13.47	\$14.30
Inpatient/Outpatient	AMINOCAPROIC ACID 500 MG PO TABS	61748-045-01	A9270	\$20.22	\$19.82	\$20.02	\$18.66	\$19.82
Inpatient/Outpatient	AMINOCAPROIC ACID 500 MG PO TABS	66479-021-82	A9270	\$4.66	\$4.57	\$4.61	\$4.30	\$4.57
Inpatient/Outpatient	AMINOCAPROIC ACID 500 MG PO TABS	49411-050-30	A9270	\$97.16	\$95.22	\$96.19	\$89.68	\$95.22
Inpatient/Outpatient	AMINOCAPROIC ACID 500 MG PO TABS	69680-115-30	A9270	\$29.00	\$28.42	\$28.71	\$26.77	\$28.42
Inpatient/Outpatient	AMINOCAPROIC ACID 500 MG PO TABS	60219-1637-3	A9270	\$51.92	\$50.88	\$51.40	\$47.92	\$50.88
Inpatient/Outpatient	AMINOCAPROIC ACID 500 MG PO TABS	72205-049-30	A9270	\$11.34	\$11.11	\$11.23	\$10.47	\$11.11
Inpatient/Outpatient	AMIODARONE HCL 150 MG/3ML IV SOLN	67457-153-03	J0282	\$5.10	\$5.00	\$5.05	\$4.71	\$5.00
Inpatient/Outpatient	AMIODARONE HCL 150 MG/3ML IV SOLN	0143-9875-10	J0282	\$1.99	\$1.95	\$1.95	\$1.84	\$1.95
Inpatient/Outpatient	AMIODARONE HCL 150 MG/3ML IV SOLN	63323-616-03	J0282	\$1.66	\$1.63	\$1.64	\$1.53	\$1.63
Inpatient/Outpatient	AMIODARONE HCL 150 MG/3ML IV SOLN	67457-153-00	J0282	\$5.11	\$5.01	\$5.06	\$4.72	\$5.01
Inpatient/Outpatient	AMIODARONE HCL 150 MG/3ML IV SOLN	0143-9875-01	J0282	\$1.27	\$1.24	\$1.26	\$1.17	\$1.24
Inpatient/Outpatient	AMIODARONE HCL 200 MG PO TABS	51079-906-20	A9270	\$1.23	\$1.21	\$1.22	\$1.14	\$1.21
Inpatient/Outpatient	AMIODARONE HCL 200 MG PO TABS	0245-0147-89	A9270	\$1.80	\$1.76	\$1.78	\$1.66	\$1.76
Inpatient/Outpatient	AMIODARONE HCL 200 MG PO TABS	0245-0147-01	A9270	\$0.87	\$0.85	\$0.86	\$0.80	\$0.85

Inpatient/Outpatient	AMIODARONE HCL 200 MG PO TABS	51079-906-01	A9270	\$1.17	\$1.15	\$1.16	\$1.08	\$1.15
Inpatient/Outpatient	AMIODARONE HCL 200 MG PO TABS	63739-387-10	A9270	\$0.93	\$0.91	\$0.92	\$0.86	\$0.91
Inpatient/Outpatient	AMIODARONE HCL 200 MG PO TABS	68084-371-11	A9270	\$9.75	\$9.56	\$9.65	\$9.00	\$9.56
Inpatient/Outpatient	AMIODARONE HCL 200 MG PO TABS	0904-6556-61	A9270	\$0.76	\$0.74	\$0.75	\$0.70	\$0.74
Inpatient/Outpatient	AMIODARONE HCL 200 MG PO TABS	63739-051-10	A9270	\$0.89	\$0.87	\$0.88	\$0.82	\$0.87
Inpatient/Outpatient	AMIODARONE HCL 200 MG PO TABS	51862-241-90	A9270	\$1.22	\$1.20	\$1.21	\$1.13	\$1.20
Inpatient/Outpatient	AMIODARONE HCL 200 MG PO TABS	0904-6993-61	A9270	\$0.85	\$0.83	\$0.84	\$0.78	\$0.83
Inpatient/Outpatient	AMLODIPINE BESYLATE 10 MG PO TABS	51079-452-20	A9270	\$1.22	\$1.20	\$1.21	\$1.13	\$1.20
Inpatient/Outpatient	AMLODIPINE BESYLATE 10 MG PO TABS	59762-1540-5	A9270	\$0.37	\$0.36	\$0.37	\$0.34	\$0.36
Inpatient/Outpatient	AMLODIPINE BESYLATE 10 MG PO TABS	59762-1540-4	A9270	\$1.17	\$1.15	\$1.16	\$1.08	\$1.15
Inpatient/Outpatient	AMLODIPINE BESYLATE 10 MG PO TABS	68382-123-16	A9270	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	AMLODIPINE BESYLATE 10 MG PO TABS	68382-123-05	A9270	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	AMLODIPINE BESYLATE 10 MG PO TABS	0904-5993-61	A9270	\$0.50	\$0.49	\$0.50	\$0.46	\$0.49
Inpatient/Outpatient	AMLODIPINE BESYLATE 10 MG PO TABS	51079-452-01	A9270	\$0.87	\$0.85	\$0.86	\$0.80	\$0.85
Inpatient/Outpatient	AMLODIPINE BESYLATE 10 MG PO TABS	50268-085-15	A9270	\$0.34	\$0.33	\$0.34	\$0.31	\$0.33
Inpatient/Outpatient	AMLODIPINE BESYLATE 10 MG PO TABS	50268-082-15	A9270	\$0.60	\$0.59	\$0.59	\$0.55	\$0.59
Inpatient/Outpatient	AMLODIPINE BESYLATE 10 MG PO TABS	50268-085-11	A9270	\$0.95	\$0.93	\$0.94	\$0.88	\$0.93
Inpatient/Outpatient	AMLODIPINE BESYLATE 10 MG PO TABS	63739-631-10	A9270	\$0.29	\$0.28	\$0.29	\$0.27	\$0.28
Inpatient/Outpatient	AMLODIPINE BESYLATE 10 MG PO TABS	0904-6371-61	A9270	\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	AMLODIPINE BESYLATE 10 MG PO TABS	69097-128-05	A9270	\$0.08	\$0.08	\$0.08	\$0.07	\$0.08
Inpatient/Outpatient	AMLODIPINE BESYLATE 10 MG PO TABS	60687-496-11	A9270	\$0.50	\$0.49	\$0.50	\$0.46	\$0.49
Inpatient/Outpatient	AMLODIPINE BESYLATE 2.5 MG PO TABS	59762-1520-1	A9270	\$0.90	\$0.88	\$0.89	\$0.83	\$0.88
Inpatient/Outpatient	AMLODIPINE BESYLATE 2.5 MG PO TABS	60505-0193-3	A9270	\$0.38	\$0.37	\$0.38	\$0.35	\$0.37
Inpatient/Outpatient	AMLODIPINE BESYLATE 2.5 MG PO TABS	68382-121-16	A9270	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	AMLODIPINE BESYLATE 2.5 MG PO TABS	64679-421-01	A9270	\$0.62	\$0.61	\$0.61	\$0.57	\$0.61
Inpatient/Outpatient	AMLODIPINE BESYLATE 2.5 MG PO TABS	68084-498-11	A9270	\$0.50	\$0.49	\$0.50	\$0.46	\$0.49
Inpatient/Outpatient	AMLODIPINE BESYLATE 2.5 MG PO TABS	51079-450-01	A9270	\$0.51	\$0.50	\$0.50	\$0.47	\$0.50
Inpatient/Outpatient	AMLODIPINE BESYLATE 2.5 MG PO TABS	0904-6369-61	A9270	\$0.36	\$0.35	\$0.36	\$0.33	\$0.35
Inpatient/Outpatient	AMLODIPINE BESYLATE 5 MG PO TABS	51079-451-20	A9270	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	AMLODIPINE BESYLATE 5 MG PO TABS	59762-1530-6	A9270	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	AMLODIPINE BESYLATE 5 MG PO TABS	59762-1530-5	A9270	\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	AMLODIPINE BESYLATE 5 MG PO TABS	51079-451-01	A9270	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	AMLODIPINE BESYLATE 5 MG PO TABS	68382-122-05	A9270	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	AMLODIPINE BESYLATE 5 MG PO TABS	68382-122-16	A9270	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	AMLODIPINE BESYLATE 5 MG PO TABS	50268-084-15	A9270	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	AMLODIPINE BESYLATE 5 MG PO TABS	0069-1530-41	A9270	\$32.51	\$31.86	\$32.18	\$30.01	\$31.86
Inpatient/Outpatient	AMLODIPINE BESYLATE 5 MG PO TABS	0904-6370-61	A9270	\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	AMLODIPINE BESYLATE 5 MG PO TABS	67877-198-90	A9270	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	GLYCOPYRROLATE 0.4 MG/2ML IJ SOLN	0517-4602-25		\$7.94	\$7.78	\$7.86	\$7.33	\$7.78
Inpatient/Outpatient	GLYCOPYRROLATE 0.4 MG/2ML IJ SOLN	10019-016-37		\$0.76	\$0.74	\$0.75	\$0.70	\$0.74
Inpatient/Outpatient	GLYCOPYRROLATE 0.4 MG/2ML IJ SOLN	0641-6034-01		\$3.85	\$3.77	\$3.81	\$3.55	\$3.77
Inpatient/Outpatient	GLYCOPYRROLATE 0.4 MG/2ML IJ SOLN	70121-1395-1		\$25.76	\$25.24	\$25.50	\$23.78	\$25.24
Inpatient/Outpatient	GLYCOPYRROLATE 0.4 MG/2ML IJ SOLN	70069-012-01		\$21.81	\$21.37	\$21.59	\$20.13	\$21.37
Inpatient/Outpatient	GLYCOPYRROLATE 0.4 MG/2ML IJ SOLN	63323-578-04		\$11.03	\$10.81	\$10.92	\$10.18	\$10.81
Inpatient/Outpatient	GLYCOPYRROLATE 0.4 MG/2ML IJ SOLN	66794-203-02		\$8.60	\$8.43	\$8.51	\$7.94	\$8.43
Inpatient/Outpatient	GLYCOPYRROLATE 0.4 MG/2ML IJ SOLN	63323-578-42		\$11.07	\$10.85	\$10.96	\$10.22	\$10.85
Inpatient/Outpatient	GLYCOPYRROLATE 0.4 MG/2ML IJ SOLN	60505-6180-0		\$31.62	\$30.99	\$31.30	\$29.19	\$30.99
Inpatient/Outpatient	GLYCOPYRROLATE 0.4 MG/2ML IJ SOLN	0143-9681-01		\$5.06	\$4.96	\$5.01	\$4.67	\$4.96
Inpatient/Outpatient	GLYCOPYRROLATE 0.4 MG/2ML IJ SOLN	0781-3827-72		\$7.06	\$6.92	\$6.99	\$6.52	\$6.92
Inpatient/Outpatient	GLYCOPYRROLATE 0.4 MG/2ML IJ SOLN	43547-544-01		\$12.31	\$12.06	\$12.19	\$11.36	\$12.06
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE 250-62.5 MG/5ML PO SUSR	43598-004-53	A9270	\$3.72	\$3.65	\$3.68	\$3.43	\$3.65
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE 250-62.5 MG/5ML PO SUSR	60432-065-47	A9270	\$2.78	\$2.72	\$2.75	\$2.57	\$2.72
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE 250-62.5 MG/5ML PO SUSR	72508-204-15	A9270	\$1.55	\$1.52	\$1.53	\$1.43	\$1.52
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE 250-62.5 MG/5ML PO SUSR	60432-065-00	A9270	\$1.45	\$1.42	\$1.44	\$1.34	\$1.42
Inpatient/Outpatient	SUFENTANIL CITRATE 100 MCG/2ML IV SOLN	0641-6111-10	J3490	\$18.40	\$18.03	\$18.22	\$16.98	\$18.03
Inpatient/Outpatient	APRACLONIDINE HCL 0.5 % OP SOLN	0065-0665-05	A9270	\$151.49	\$148.46	\$149.98	\$139.83	\$148.46
Inpatient/Outpatient	APRACLONIDINE HCL 0.5 % OP SOLN	17478-716-10	A9270	\$40.02	\$39.22	\$39.62	\$36.94	\$39.22
Inpatient/Outpatient	APRACLONIDINE HCL 0.5 % OP SOLN	61314-665-05	A9270	\$34.40	\$33.71	\$34.06	\$31.75	\$33.71
Inpatient/Outpatient	APRACLONIDINE HCL 1 % OP SOLN	0065-0660-10	A9270	\$125.42	\$122.91	\$124.17	\$115.76	\$122.91
Inpatient/Outpatient	SPIRONOLACTONE 4 MG/ML ORAL SUSPENSION	99999-040-00	A9270	\$0.97	\$0.95	\$0.96	\$0.90	\$0.95
Inpatient/Outpatient	DOCETAXEL 80 MG/4ML IV CONC	0955-1021-04	J9171	\$132.72	\$130.07	\$131.39	\$122.50	\$130.07
Inpatient/Outpatient	DOCETAXEL 80 MG/4ML IV CONC	16729-267-64	J9171	\$62.32	\$61.07	\$61.70	\$57.52	\$61.07
Inpatient/Outpatient	URSODIOL 25 MG/ML ORAL SUSPENSION	99999-041-00	A9270	\$1.61	\$1.58	\$1.59	\$1.49	\$1.58
Inpatient/Outpatient	AZATHIOPRINE 50 MG PO TABS	0054-4084-25	J7500	\$1.53	\$1.50	\$1.51	\$1.41	\$1.50
Inpatient/Outpatient	AZATHIOPRINE 50 MG PO TABS	0054-8084-25	J7500	\$1.82	\$1.78	\$1.80	\$1.68	\$1.78
Inpatient/Outpatient	AZATHIOPRINE 50 MG PO TABS	0378-1005-01	J7500	\$0.91	\$0.89	\$0.90	\$0.84	\$0.89
Inpatient/Outpatient	AZATHIOPRINE 50 MG PO TABS	68382-003-01	J7500	\$1.27	\$1.24	\$1.26	\$1.17	\$1.24
Inpatient/Outpatient	AZATHIOPRINE 50 MG PO TABS	60219-1076-1	J7500	\$1.25	\$1.23	\$1.24	\$1.15	\$1.23

Inpatient/Outpatient	AZATHIOPRINE 50 MG PO TABS	67877-493-01	J7500	\$1.18	\$1.16	\$1.17	\$1.09	\$1.16
Inpatient/Outpatient	AZTREONAM 1 G IJ SOLR	0003-2560-16	J3490	\$131.03	\$128.41	\$129.72	\$120.94	\$128.41
Inpatient/Outpatient	AZTREONAM 1 G IJ SOLR	63323-401-20	J3490	\$122.31	\$119.86	\$121.09	\$112.89	\$119.86
Inpatient/Outpatient	AZTREONAM 1 G IJ SOLR	63323-401-24	J3490	\$122.31	\$119.86	\$121.09	\$112.89	\$119.86
Inpatient/Outpatient	AZTREONAM 1 G IJ SOLR	63323-401-41	J3490	\$122.31	\$119.86	\$121.09	\$112.89	\$119.86
Inpatient/Outpatient	AZTREONAM 1 G IJ SOLR	0409-0829-11	J3490	\$108.56	\$106.39	\$107.47	\$100.20	\$106.39
Inpatient/Outpatient	INSULIN REGULAR HUMAN (CONC) 500 UNIT/ML (U-500) FOR PUMP BASAL	0002-8501-01	J1815	\$334.15	\$327.47	\$330.81	\$308.42	\$327.47
Inpatient/Outpatient	DOLUTEGRAVIR SODIUM 50 MG PO TABS	49702-228-13	A9270	\$316.07	\$309.75	\$312.91	\$291.73	\$309.75
Inpatient/Outpatient	FLUORESCIN SODIUM 1 MG OP STRP	17238-900-11		\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	FLUORESCIN SODIUM 1 MG OP STRP	17238-900-30		\$0.37	\$0.36	\$0.37	\$0.34	\$0.36
Inpatient/Outpatient	DEXAMETHASONE SODIUM PHOSPHATE 20 MG/5ML IJ SOLN	0069-4543-01	J1100	\$3.02	\$2.96	\$2.99	\$2.79	\$2.96
Inpatient/Outpatient	DEXAMETHASONE SODIUM PHOSPHATE 20 MG/5ML IJ SOLN	63323-165-05	J1100	\$0.79	\$0.77	\$0.78	\$0.73	\$0.77
Inpatient/Outpatient	DEXAMETHASONE SODIUM PHOSPHATE 20 MG/5ML IJ SOLN	63323-165-26	J1100	\$0.79	\$0.77	\$0.78	\$0.73	\$0.77
Inpatient/Outpatient	DEXAMETHASONE SODIUM PHOSPHATE 20 MG/5ML IJ SOLN	55150-238-05	J1100	\$0.94	\$0.92	\$0.93	\$0.87	\$0.92
Inpatient/Outpatient	DEXAMETHASONE SODIUM PHOSPHATE 20 MG/5ML IJ SOLN	0517-4905-25	J1100	\$0.64	\$0.63	\$0.63	\$0.59	\$0.63
Inpatient/Outpatient	DEXAMETHASONE SODIUM PHOSPHATE 20 MG/5ML IJ SOLN	67457-422-00	J1100	\$0.55	\$0.54	\$0.54	\$0.51	\$0.54
Inpatient/Outpatient	DEXAMETHASONE SODIUM PHOSPHATE 20 MG/5ML IJ SOLN	63323-165-03	J1100	\$0.68	\$0.67	\$0.67	\$0.63	\$0.67
Inpatient/Outpatient	BENZTROPINE MESYLATE 1 MG/ML IJ SOLN	0143-9729-05	J0515	\$63.98	\$62.70	\$63.34	\$59.05	\$62.70
Inpatient/Outpatient	BENZTROPINE MESYLATE 1 MG/ML IJ SOLN	63323-970-02	J0515	\$124.82	\$122.32	\$123.57	\$115.21	\$122.32
Inpatient/Outpatient	BENZTROPINE MESYLATE 1 MG/ML IJ SOLN	0143-9729-01	J0515	\$63.87	\$62.59	\$63.23	\$58.95	\$62.59
Inpatient/Outpatient	BENZTROPINE MESYLATE 1 MG/ML IJ SOLN	68382-860-02	J0515	\$52.24	\$51.20	\$51.72	\$48.22	\$51.20
Inpatient/Outpatient	BETAMETHASONE SOD PHOS & ACET 6 (3-3) MG/ML IJ SUSP	0085-0566-05	J0702	\$32.48	\$31.83	\$32.16	\$29.98	\$31.83
Inpatient/Outpatient	BETAMETHASONE SOD PHOS & ACET 6 (3-3) MG/ML IJ SUSP	0517-0720-01	J0702	\$31.66	\$31.03	\$31.34	\$29.22	\$31.03
Inpatient/Outpatient	BETAMETHASONE SOD PHOS & ACET 6 (3-3) MG/ML IJ SUSP	0085-4320-01	J0702	\$33.85	\$33.17	\$33.51	\$31.24	\$33.17
Inpatient/Outpatient	BETAMETHASONE SOD PHOS & ACET 6 (3-3) MG/ML IJ SUSP	51754-5060-1	J0702	\$36.19	\$35.47	\$35.83	\$33.40	\$35.47
Inpatient/Outpatient	BETAMETHASONE SOD PHOS & ACET 6 (3-3) MG/ML IJ SUSP	0517-0799-01	J0702	\$44.72	\$43.83	\$44.27	\$41.28	\$43.83
Inpatient/Outpatient	BETAMETHASONE SOD PHOS & ACET 6 (3-3) MG/ML IJ SUSP	78206-118-01	J0702	\$35.44	\$34.73	\$35.09	\$32.71	\$34.73
Inpatient/Outpatient	BETAXOLOL HCL 0.5 % OP SOLN	61314-245-01	A9270	\$33.35	\$32.68	\$33.02	\$30.78	\$32.68
Inpatient/Outpatient	BETAXOLOL HCL 0.5 % OP SOLN	17478-705-10	A9270	\$45.92	\$45.00	\$45.46	\$42.38	\$45.00
Inpatient/Outpatient	BETAXOLOL HCL 0.5 % OP SOLN	61314-245-03	A9270	\$26.40	\$25.87	\$26.14	\$24.37	\$25.87
Inpatient/Outpatient	TRACE MINERALS CU-MN-SE-ZN 300-55-60-3000 MCG/ML IV SOLN	0517-9305-25		\$76.89	\$75.35	\$76.12	\$70.97	\$75.35
Inpatient/Outpatient	BISMUTH SUBSALICYLATE 262 MG PO CHEW	37000-477-10	A9150	\$0.53	\$0.52	\$0.52	\$0.49	\$0.52
Inpatient/Outpatient	BISMUTH SUBSALICYLATE 262 MG PO CHEW	01490-32642	A9150	\$0.52	\$0.51	\$0.51	\$0.48	\$0.51
Inpatient/Outpatient	BISMUTH SUBSALICYLATE 262 MG PO CHEW	01490-03979	A9150	\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	BISMUTH SUBSALICYLATE 262 MG PO CHEW	0904-7205-46	A9150	\$0.29	\$0.28	\$0.29	\$0.27	\$0.28
Inpatient/Outpatient	BLEOMYCIN SULFATE 15 UNITS IJ SOLR	0703-3154-01	J9040	\$121.55	\$119.12	\$120.33	\$112.19	\$119.12
Inpatient/Outpatient	BROMOCRIPTINE MESYLATE 2.5 MG PO TABS	0378-2042-93	A9270	\$19.93	\$19.53	\$19.73	\$18.40	\$19.53
Inpatient/Outpatient	BROMOCRIPTINE MESYLATE 2.5 MG PO TABS	0574-0106-03	A9270	\$7.46	\$7.31	\$7.39	\$6.89	\$7.31
Inpatient/Outpatient	BROMOCRIPTINE MESYLATE 2.5 MG PO TABS	0781-5325-31	A9270	\$6.65	\$6.52	\$6.58	\$6.14	\$6.52
Inpatient/Outpatient	BROMOCRIPTINE MESYLATE 2.5 MG PO TABS	0574-0106-01	A9270	\$3.32	\$3.25	\$3.29	\$3.06	\$3.25
Inpatient/Outpatient	BROMOCRIPTINE MESYLATE 2.5 MG PO TABS	63304-962-01	A9270	\$7.23	\$7.09	\$7.16	\$6.67	\$7.09
Inpatient/Outpatient	BUMETANIDE 0.25 MG/ML IJ SOLN	10019-506-10	J3490	\$0.53	\$0.56-10	\$0.52	\$0.49	\$0.52
Inpatient/Outpatient	BUMETANIDE 0.25 MG/ML IJ SOLN	55390-500-10	J3490	\$2.08	\$2.04	\$2.06	\$1.92	\$2.04
Inpatient/Outpatient	BUMETANIDE 0.25 MG/ML IJ SOLN	0409-1412-10	J3490	\$1.36	\$1.33	\$1.35	\$1.26	\$1.33
Inpatient/Outpatient	BUMETANIDE 0.25 MG/ML IJ SOLN	55390-500-02	J3490	\$2.87	\$2.84	\$2.84	\$2.65	\$2.81
Inpatient/Outpatient	BUMETANIDE 0.25 MG/ML IJ SOLN	10019-506-36	J3490	\$0.53	\$0.52	\$0.52	\$0.49	\$0.52
Inpatient/Outpatient	BUMETANIDE 0.25 MG/ML IJ SOLN	10019-506-37	J3490	\$0.75	\$0.74	\$0.74	\$0.69	\$0.74
Inpatient/Outpatient	BUMETANIDE 0.25 MG/ML IJ SOLN	0641-6008-01	J3490	\$3.01	\$2.95	\$2.98	\$2.78	\$2.95
Inpatient/Outpatient	BUMETANIDE 0.25 MG/ML IJ SOLN	0641-6007-10	J3490	\$1.22	\$1.20	\$1.21	\$1.13	\$1.20
Inpatient/Outpatient	BUMETANIDE 0.25 MG/ML IJ SOLN	0641-6007-01	J3490	\$1.34	\$1.31	\$1.33	\$1.24	\$1.31
Inpatient/Outpatient	BUMETANIDE 0.25 MG/ML IJ SOLN	0409-1412-04	J3490	\$1.11	\$1.09	\$1.10	\$1.02	\$1.09
Inpatient/Outpatient	BUMETANIDE 0.25 MG/ML IJ SOLN	0409-1412-34	J3490	\$1.11	\$1.09	\$1.10	\$1.02	\$1.09
Inpatient/Outpatient	BUMETANIDE 0.25 MG/ML IJ SOLN	0409-1412-40	J3490	\$1.36	\$1.33	\$1.35	\$1.26	\$1.33
Inpatient/Outpatient	BUMETANIDE 0.25 MG/ML IJ SOLN	70860-405-41	J3490	\$3.10	\$3.04	\$3.07	\$2.86	\$3.04
Inpatient/Outpatient	BUMETANIDE 0.5 MG PO TABS	51079-891-01	A9270	\$1.41	\$1.38	\$1.40	\$1.30	\$1.38
Inpatient/Outpatient	BUMETANIDE 0.5 MG PO TABS	0185-0128-01	A9270	\$1.58	\$1.55	\$1.56	\$1.46	\$1.55
Inpatient/Outpatient	BUMETANIDE 0.5 MG PO TABS	51079-891-20	A9270	\$0.84	\$0.82	\$0.83	\$0.78	\$0.82
Inpatient/Outpatient	BUMETANIDE 0.5 MG PO TABS	42799-119-01	A9270	\$1.36	\$1.33	\$1.35	\$1.26	\$1.33
Inpatient/Outpatient	BUMETANIDE 0.5 MG PO TABS	16714-831-01	A9270	\$1.25	\$1.23	\$1.24	\$1.15	\$1.23
Inpatient/Outpatient	BUMETANIDE 0.5 MG PO TABS	0832-0540-11	A9270	\$1.22	\$1.20	\$1.21	\$1.13	\$1.20
Inpatient/Outpatient	BUMETANIDE 1 MG PO TABS	51079-892-01	A9270	\$1.99	\$1.95	\$1.97	\$1.84	\$1.95
Inpatient/Outpatient	BUMETANIDE 1 MG PO TABS	42799-120-01	A9270	\$1.40	\$1.37	\$1.39	\$1.29	\$1.37
Inpatient/Outpatient	BUMETANIDE 1 MG PO TABS	51079-892-20	A9270	\$0.73	\$0.72	\$0.72	\$0.67	\$0.72
Inpatient/Outpatient	BUMETANIDE 1 MG PO TABS	0185-0129-01	A9270	\$1.60	\$1.57	\$1.58	\$1.48	\$1.57
Inpatient/Outpatient	BUMETANIDE 1 MG PO TABS	16714-832-01	A9270	\$1.28	\$1.25	\$1.27	\$1.18	\$1.25
Inpatient/Outpatient	BUMETANIDE 1 MG PO TABS	60687-384-95	A9270	\$6.23	\$6.11	\$6.17	\$5.75	\$6.11
Inpatient/Outpatient	BUMETANIDE 1 MG PO TABS	0904-7016-04	A9270	\$6.57	\$6.44	\$6.50	\$6.06	\$6.44
Inpatient/Outpatient	BUMETANIDE 1 MG PO TABS	0832-0541-11	A9270	\$1.22	\$1.20	\$1.21	\$1.13	\$1.20

Inpatient/Outpatient	BUPIVACAINE IN DEXTROSE 0.75-8.25 % IT SOLN	0409-3613-01	\$4.91	\$4.81	\$4.86	\$4.53	\$4.81
Inpatient/Outpatient	BUPIVACAINE IN DEXTROSE 0.75-8.25 % IT SOLN	0409-1761-02	\$9.41	\$9.22	\$9.32	\$8.69	\$9.22
Inpatient/Outpatient	BUPIVACAINE IN DEXTROSE 0.75-8.25 % IT SOLN	63323-473-02	\$2.87	\$2.81	\$2.84	\$2.65	\$2.81
Inpatient/Outpatient	BUPIVACAINE IN DEXTROSE 0.75-8.25 % IT SOLN	36000-092-01	\$4.37	\$4.28	\$4.33	\$4.03	\$4.28
Inpatient/Outpatient	BUPIVACAINE IN DEXTROSE 0.75-8.25 % IT SOLN	0409-3613-11	\$4.91	\$4.81	\$4.86	\$4.53	\$4.81
Inpatient/Outpatient	MEPIVACAINE HCL (PF) 2 % IJ SOLN	0409-1067-20 J0670	\$1.10	\$1.08	\$1.09	\$1.02	\$1.08
Inpatient/Outpatient	MEPIVACAINE HCL (PF) 2 % IJ SOLN	63323-294-27 J0670	\$1.54	\$1.51	\$1.52	\$1.42	\$1.51
Inpatient/Outpatient	MEPIVACAINE HCL (PF) 2 % IJ SOLN	63323-294-01 J0670	\$1.54	\$1.51	\$1.52	\$1.42	\$1.51
Inpatient/Outpatient	BUPROPION HCL 100 MG PO TABS	51079-944-01 A9270	\$4.71	\$4.62	\$4.66	\$4.35	\$4.62
Inpatient/Outpatient	BUPROPION HCL 100 MG PO TABS	51079-944-20 A9270	\$5.62	\$5.51	\$5.56	\$5.19	\$5.51
Inpatient/Outpatient	BUPROPION HCL 100 MG PO TABS	0781-1064-01 A9270	\$1.22	\$1.20	\$1.21	\$1.13	\$1.20
Inpatient/Outpatient	BUPROPION HCL 100 MG PO TABS	0378-0435-01 A9270	\$2.75	\$2.70	\$2.72	\$2.54	\$2.70
Inpatient/Outpatient	BUPROPION HCL 100 MG PO TABS	60505-0157-1 A9270	\$0.52	\$0.51	\$0.51	\$0.48	\$0.51
Inpatient/Outpatient	BUPROPION HCL 100 MG PO TABS	23155-192-01 A9270	\$1.80	\$1.76	\$1.78	\$1.66	\$1.76
Inpatient/Outpatient	BUPROPION HCL 100 MG PO TABS	24689-120-01 A9270	\$0.48	\$0.47	\$0.48	\$0.44	\$0.47
Inpatient/Outpatient	BUPROPION HCL 75 MG PO TABS	51079-943-01 A9270	\$3.55	\$3.48	\$3.51	\$3.28	\$3.48
Inpatient/Outpatient	BUPROPION HCL 75 MG PO TABS	51079-943-20 A9270	\$4.20	\$4.12	\$4.16	\$3.88	\$4.12
Inpatient/Outpatient	BUPROPION HCL 75 MG PO TABS	63739-706-10 A9270	\$3.97	\$3.89	\$3.93	\$3.66	\$3.89
Inpatient/Outpatient	BUPROPION HCL 75 MG PO TABS	60505-0158-1 A9270	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	BUPROPION HCL 75 MG PO TABS	0904-6635-61 A9270	\$3.72	\$3.65	\$3.68	\$3.43	\$3.65
Inpatient/Outpatient	BUSPIRONE HCL 10 MG PO TABS	0591-0658-01 A9270	\$0.29	\$0.28	\$0.29	\$0.27	\$0.28
Inpatient/Outpatient	BUSPIRONE HCL 10 MG PO TABS	0093-0054-01 A9270	\$0.22	\$0.22	\$0.22	\$0.20	\$0.22
Inpatient/Outpatient	BUSPIRONE HCL 10 MG PO TABS	51079-986-01 A9270	\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	BUSPIRONE HCL 10 MG PO TABS	0115-1691-02 A9270	\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	BUSPIRONE HCL 10 MG PO TABS	64380-742-07 A9270	\$0.21	\$0.21	\$0.21	\$0.19	\$0.21
Inpatient/Outpatient	BUSPIRONE HCL 10 MG PO TABS	64380-742-06 A9270	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	BUSPIRONE HCL 10 MG PO TABS	0904-7121-61 A9270	\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	BUSPIRONE HCL 5 MG PO TABS	51079-985-20 A9270	\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	BUSPIRONE HCL 5 MG PO TABS	60429-291-01 A9270	\$0.29	\$0.28	\$0.29	\$0.27	\$0.28
Inpatient/Outpatient	BUSPIRONE HCL 5 MG PO TABS	16729-200-01 A9270	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	BUSPIRONE HCL 5 MG PO TABS	0093-0053-01 A9270	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	BUSPIRONE HCL 5 MG PO TABS	64380-741-08 A9270	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	BUSPIRONE HCL 5 MG PO TABS	99999-742-05 A9270	\$0.21	\$0.21	\$0.21	\$0.19	\$0.21
Inpatient/Outpatient	BUSPIRONE HCL 5 MG PO TABS	68382-180-05 A9270	\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	BUSPIRONE HCL 5 MG PO TABS	51079-985-01 A9270	\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	BUTAMBEN-TETRACAINE-BENZOCAINE 2-2-14 % EX AERO	16781-113-60 A9270	\$3.30	\$3.23	\$3.27	\$3.05	\$3.23
Inpatient/Outpatient	BUTAMBEN-TETRACAINE-BENZOCAINE 2-2-14 % EX AERO	10223-0201-1 A9270	\$3.69	\$3.62	\$3.65	\$3.41	\$3.62
Inpatient/Outpatient	BUTAMBEN-TETRACAINE-BENZOCAINE 2-2-14 % EX AERO	10223-0201-3 A9270	\$25.57	\$25.06	\$25.31	\$23.60	\$25.06
Inpatient/Outpatient	BUTORPHANOL TARTRATE 2 MG/ML IJ SOLN	0409-1626-02 J0595	\$18.71	\$18.34	\$18.52	\$17.27	\$18.34
Inpatient/Outpatient	BUTORPHANOL TARTRATE 2 MG/ML IJ SOLN	0409-1626-01 J0595	\$26.55	\$26.02	\$26.28	\$24.51	\$26.02
Inpatient/Outpatient	BUTORPHANOL TARTRATE 2 MG/ML IJ SOLN	55390-184-01 J0595	\$12.94	\$12.68	\$12.81	\$11.94	\$12.68
Inpatient/Outpatient	BUTORPHANOL TARTRATE 2 MG/ML IJ SOLN	0409-1626-21 J0595	\$21.11	\$20.69	\$20.90	\$19.48	\$20.69
Inpatient/Outpatient	BUTORPHANOL TARTRATE 2 MG/ML IJ SOLN	0409-1626-42 J0595	\$18.71	\$18.34	\$18.52	\$17.27	\$18.34
Inpatient/Outpatient	PEG 3350-KCL-NA BICARB-NACL 420 G PO SOLR	64380-769-21	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	PEG 3350-KCL-NA BICARB-NACL 420 G PO SOLR	52268-302-01	\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	CALCITRIOL 1 MCG/ML IV SOLN	63323-731-01 J0636	\$17.79	\$17.43	\$17.61	\$16.42	\$17.43
Inpatient/Outpatient	CALCITRIOL 0.25 MCG PO CAPS	0093-0657-01 A9270	\$3.27	\$3.20	\$3.24	\$3.02	\$3.20
Inpatient/Outpatient	CALCITRIOL 0.25 MCG PO CAPS	0054-0007-25 A9270	\$2.01	\$1.97	\$1.99	\$1.86	\$1.97
Inpatient/Outpatient	CALCITRIOL 0.25 MCG PO CAPS	23155-118-01 A9270	\$1.34	\$1.31	\$1.33	\$1.24	\$1.31
Inpatient/Outpatient	CALCITRIOL 0.25 MCG PO CAPS	0093-7352-01 A9270	\$4.65	\$4.56	\$4.60	\$4.29	\$4.56
Inpatient/Outpatient	CALCITRIOL 0.25 MCG PO CAPS	64380-723-06 A9270	\$1.22	\$1.20	\$1.21	\$1.13	\$1.20
Inpatient/Outpatient	CALCITRIOL 0.25 MCG PO CAPS	23155-662-01 A9270	\$1.32	\$1.29	\$1.31	\$1.22	\$1.29
Inpatient/Outpatient	CALCITRIOL 0.25 MCG PO CAPS	60687-345-11 A9270	\$2.31	\$2.26	\$2.29	\$2.13	\$2.26
Inpatient/Outpatient	CALCIUM CARBONATE ANTACID 500 MG PO CHEW	0135-0070-27 A9150	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	CALCIUM CARBONATE ANTACID 500 MG PO CHEW	0135-0071-27 A9150	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	CALCIUM CARBONATE ANTACID 500 MG PO CHEW	0766-0741-52 A9150	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	CALCIUM CARBONATE ANTACID 500 MG PO CHEW	0766-0740-52 A9150	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	CALCIUM CARBONATE ANTACID 500 MG PO CHEW	0536-1048-15 A9150	\$0.04	\$0.04	\$0.04	\$0.04	\$0.04
Inpatient/Outpatient	CALCIUM CARBONATE ANTACID 500 MG PO CHEW	66553-004-01 A9150	\$0.37	\$0.36	\$0.37	\$0.34	\$0.36
Inpatient/Outpatient	ADENOSINE-LIDOCAINE-MAGNESIUM IN NS CARDIOPLEGIA SOLN	70092-1593-50	\$18.23	\$17.87	\$18.05	\$16.83	\$17.87
Inpatient/Outpatient	CARBIDOPA-LEVODOPA 10-100 MG PO TABS	0904-7718-61 A9270	\$1.11	\$1.09	\$1.10	\$1.02	\$1.09
Inpatient/Outpatient	CARBIDOPA-LEVODOPA 10-100 MG PO TABS	63739-046-10 A9270	\$1.07	\$1.05	\$1.06	\$0.99	\$1.05
Inpatient/Outpatient	CARBIDOPA-LEVODOPA 10-100 MG PO TABS	0093-0292-01 A9270	\$1.19	\$1.17	\$1.18	\$1.10	\$1.17
Inpatient/Outpatient	CARBIDOPA-LEVODOPA 10-100 MG PO TABS	0378-0078-01 A9270	\$0.65	\$0.64	\$0.64	\$0.60	\$0.64
Inpatient/Outpatient	CARBIDOPA-LEVODOPA 10-100 MG PO TABS	0228-2538-10 A9270	\$0.43	\$0.42	\$0.43	\$0.40	\$0.42
Inpatient/Outpatient	CARBIDOPA-LEVODOPA 10-100 MG PO TABS	42291-465-01 A9270	\$0.36	\$0.35	\$0.36	\$0.33	\$0.35
Inpatient/Outpatient	CARBIDOPA-LEVODOPA 25-100 MG PO TABS	51079-756-20 A9270	\$1.30	\$1.27	\$1.29	\$1.20	\$1.27
Inpatient/Outpatient	CARBIDOPA-LEVODOPA 25-100 MG PO TABS	63739-047-10 A9270	\$0.68	\$0.67	\$0.67	\$0.63	\$0.67

Inpatient/Outpatient	CARBIDOPA-LEVODOPA 25-100 MG PO TABS	0904-6237-61	A9270	\$0.66	\$0.65	\$0.65	\$0.61	\$0.65
Inpatient/Outpatient	CARBIDOPA-LEVODOPA 25-100 MG PO TABS	63739-017-10	A9270	\$0.81	\$0.79	\$0.80	\$0.75	\$0.79
Inpatient/Outpatient	CARBIDOPA-LEVODOPA 25-100 MG PO TABS	51079-884-01	A9270	\$1.51	\$1.48	\$1.49	\$1.39	\$1.48
Inpatient/Outpatient	CARBIDOPA-LEVODOPA 25-100 MG PO TABS	51862-856-01	A9270	\$1.44	\$1.41	\$1.43	\$1.33	\$1.41
Inpatient/Outpatient	CARBIDOPA-LEVODOPA 25-100 MG PO TABS	42291-466-01	A9270	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	CARBIDOPA-LEVODOPA 25-100 MG PO TABS	68084-093-11	A9270	\$0.76	\$0.74	\$0.75	\$0.70	\$0.74
Inpatient/Outpatient	CARBIDOPA-LEVODOPA 25-100 MG PO TABS	62756-518-88	A9270	\$0.47	\$0.46	\$0.47	\$0.43	\$0.46
Inpatient/Outpatient	CARBIDOPA-LEVODOPA 25-100 MG PO TABS	60687-661-11	A9270	\$0.76	\$0.74	\$0.75	\$0.70	\$0.74
Inpatient/Outpatient	CARBIDOPA-LEVODOPA 25-100 MG PO TABS	50228-458-01	A9270	\$0.49	\$0.48	\$0.49	\$0.45	\$0.48
Inpatient/Outpatient	CARBIDOPA-LEVODOPA 25-100 MG PO TABS	63739-108-10	A9270	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	CARBIDOPA-LEVODOPA 25-100 MG PO TABS	0904-7257-61	A9270	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	CARBIDOPA-LEVODOPA 25-250 MG PO TABS	0228-2540-10	A9270	\$1.15	\$1.13	\$1.14	\$1.06	\$1.13
Inpatient/Outpatient	CARBIDOPA-LEVODOPA 25-250 MG PO TABS	63739-048-10	A9270	\$0.81	\$0.79	\$0.80	\$0.75	\$0.79
Inpatient/Outpatient	CARBIDOPA-LEVODOPA 25-250 MG PO TABS	0904-6238-61	A9270	\$0.84	\$0.82	\$0.83	\$0.78	\$0.82
Inpatient/Outpatient	CARBOPROST TROMETHAMINE 250 MCG/ML IM SOLN	0009-0856-05		\$888.63	\$879.86	\$879.74	\$820.21	\$870.86
Inpatient/Outpatient	CARBOPROST TROMETHAMINE 250 MCG/ML IM SOLN	0009-0856-08		\$888.63	\$870.86	\$879.74	\$820.21	\$870.86
Inpatient/Outpatient	CARBOPROST TROMETHAMINE 250 MCG/ML IM SOLN	43598-698-11		\$786.61	\$770.88	\$778.74	\$726.04	\$770.88
Inpatient/Outpatient	CARBOPROST TROMETHAMINE 250 MCG/ML IM SOLN	43598-919-11		\$685.20	\$671.50	\$678.35	\$632.44	\$671.50
Inpatient/Outpatient	INSULIN REGULAR HUMAN (CONC) 500 UNIT/ML (U-500) FOR PUMP BOLUS	0002-8501-01	J1815	\$334.15	\$327.47	\$330.81	\$308.42	\$327.47
Inpatient/Outpatient	CLATANOFF DIAPER RASH PASTE	99999-044-00	A9150	\$0.34	\$0.33	\$0.34	\$0.31	\$0.33
Inpatient/Outpatient	CEFOTAXIME SODIUM 1 G IJ SOLR	0143-9931-01	J0698	\$6.75	\$6.62	\$6.68	\$6.23	\$6.62
Inpatient/Outpatient	CEFOXITIN SODIUM 1 G IV SOLR	60505-0759-5	J0694	\$31.96	\$31.32	\$31.64	\$29.50	\$31.32
Inpatient/Outpatient	CEFOXITIN SODIUM 1 G IV SOLR	63323-341-25	J0694	\$12.53	\$12.28	\$12.40	\$11.57	\$12.28
Inpatient/Outpatient	CEFOXITIN SODIUM 1 G IV SOLR	25021-109-10	J0694	\$17.62	\$17.27	\$17.44	\$16.26	\$17.27
Inpatient/Outpatient	CEFOXITIN SODIUM 1 G IV SOLR	0143-9878-25	J0694	\$31.54	\$30.91	\$31.22	\$29.11	\$30.91
Inpatient/Outpatient	CEFOXITIN SODIUM 1 G IV SOLR	63323-341-29	J0694	\$12.53	\$12.28	\$12.40	\$11.57	\$12.28
Inpatient/Outpatient	CEFOXITIN SODIUM 1 G IV SOLR	44567-245-25	J0694	\$44.96	\$44.06	\$44.51	\$41.50	\$44.06
Inpatient/Outpatient	CEFOXITIN SODIUM 1 G IV SOLR	63323-341-41	J0694	\$12.67	\$12.42	\$12.54	\$11.69	\$12.42
Inpatient/Outpatient	CEFOXITIN SODIUM 2 G IV SOLR	60505-0760-5	J0694	\$56.79	\$55.65	\$56.22	\$52.42	\$55.65
Inpatient/Outpatient	CEFOXITIN SODIUM 2 G IV SOLR	0143-9877-25	J0694	\$56.79	\$55.65	\$56.22	\$52.42	\$55.65
Inpatient/Outpatient	CEFOXITIN SODIUM 2 G IV SOLR	25021-110-20	J0694	\$35.30	\$34.59	\$34.95	\$32.58	\$34.59
Inpatient/Outpatient	CEFOXITIN SODIUM 2 G IV SOLR	63323-342-29	J0694	\$26.28	\$25.75	\$26.02	\$24.26	\$25.75
Inpatient/Outpatient	CEFOXITIN SODIUM 2 G IV SOLR	44567-246-25	J0694	\$90.29	\$88.48	\$89.39	\$83.34	\$88.48
Inpatient/Outpatient	CEFOXITIN SODIUM 2 G IV SOLR	60505-0760-1	J0694	\$88.28	\$86.51	\$87.40	\$81.48	\$86.51
Inpatient/Outpatient	CEFOXITIN SODIUM 2 G IV SOLR	63323-342-25	J0694	\$26.28	\$25.75	\$26.02	\$24.26	\$25.75
Inpatient/Outpatient	CEFOXITIN SODIUM 2 G IV SOLR	0143-9877-01	J0694	\$84.99	\$83.29	\$84.14	\$78.45	\$83.29
Inpatient/Outpatient	CEFPROZIL 125 MG/5ML PO SUSR	0781-6202-91	A9270	\$0.90	\$0.88	\$0.89	\$0.83	\$0.88
Inpatient/Outpatient	CEFPROZIL 125 MG/5ML PO SUSR	16714-396-01	A9270	\$0.50	\$0.49	\$0.50	\$0.46	\$0.49
Inpatient/Outpatient	CEFPROZIL 125 MG/5ML PO SUSR	16714-396-03	A9270	\$0.22	\$0.22	\$0.22	\$0.20	\$0.22
Inpatient/Outpatient	CEFPROZIL 250 MG/5ML PO SUSR	0781-6203-91	A9270	\$1.68	\$1.65	\$1.66	\$1.55	\$1.65
Inpatient/Outpatient	CEFPROZIL 250 MG/5ML PO SUSR	16714-397-01	A9270	\$1.52	\$1.49	\$1.50	\$1.40	\$1.49
Inpatient/Outpatient	CEFPROZIL 250 MG PO TABS	0781-5043-01	A9270	\$15.96	\$15.64	\$15.80	\$14.73	\$15.64
Inpatient/Outpatient	CEFPROZIL 250 MG PO TABS	16714-208-01	A9270	\$3.47	\$3.40	\$3.44	\$3.20	\$3.40
Inpatient/Outpatient	CEFPROZIL 250 MG PO TABS	16714-398-01	A9270	\$3.69	\$3.62	\$3.65	\$3.41	\$3.62
Inpatient/Outpatient	CEFTAZIDIME 1 G IJ SOLR	0781-3177-96	J0713	\$17.09	\$16.75	\$16.92	\$15.77	\$16.75
Inpatient/Outpatient	CEFTAZIDIME 1 G IJ SOLR	0781-3177-80	J0713	\$16.88	\$16.54	\$16.71	\$15.58	\$16.54
Inpatient/Outpatient	CEFTRIAXONE SODIUM 1 G IJ SOLR	0781-3208-85	J0696	\$7.97	\$7.81	\$7.89	\$7.36	\$7.81
Inpatient/Outpatient	CEFTRIAXONE SODIUM 1 G IJ SOLR	0781-3208-95	J0696	\$6.09	\$5.97	\$6.03	\$5.62	\$5.97
Inpatient/Outpatient	CEFTRIAXONE SODIUM 1 G IJ SOLR	0143-9857-25	J0696	\$6.39	\$6.26	\$6.33	\$5.90	\$6.26
Inpatient/Outpatient	CEFTRIAXONE SODIUM 1 G IJ SOLR	25021-106-10	J0696	\$10.86	\$10.64	\$10.75	\$10.02	\$10.64
Inpatient/Outpatient	CEFTRIAXONE SODIUM 1 G IJ SOLR	64679-983-01	J0696	\$4.97	\$4.87	\$4.92	\$4.59	\$4.87
Inpatient/Outpatient	CEFTRIAXONE SODIUM 1 G IJ SOLR	60505-0752-3	J0696	\$24.70	\$24.21	\$24.45	\$22.80	\$24.21
Inpatient/Outpatient	CEFTRIAXONE SODIUM 1 G IJ SOLR	60505-6148-0	J0696	\$5.35	\$5.24	\$5.30	\$4.94	\$5.24
Inpatient/Outpatient	CEFTRIAXONE SODIUM 1 G IJ SOLR	25021-106-67	J0696	\$4.75	\$4.66	\$4.70	\$4.38	\$4.66
Inpatient/Outpatient	CEFTRIAXONE SODIUM 1 G IJ SOLR	0409-7332-11	J0696	\$6.48	\$6.35	\$6.42	\$5.98	\$6.35
Inpatient/Outpatient	CEFTRIAXONE SODIUM 2 G IJ SOLR	0781-3209-90	J0696	\$47.26	\$46.31	\$46.79	\$43.62	\$46.31
Inpatient/Outpatient	CEFTRIAXONE SODIUM 2 G IJ SOLR	10019-688-04	J0696	\$36.16	\$35.44	\$35.80	\$33.38	\$35.44
Inpatient/Outpatient	CEFTRIAXONE SODIUM 2 G IJ SOLR	10019-688-27	J0696	\$394.88	\$386.98	\$390.93	\$364.47	\$386.98
Inpatient/Outpatient	CEFTRIAXONE SODIUM 2 G IJ SOLR	0781-3209-95	J0696	\$10.81	\$10.59	\$10.70	\$9.98	\$10.59
Inpatient/Outpatient	CEFTRIAXONE SODIUM 2 G IJ SOLR	55390-312-10	J0696	\$18.16	\$17.80	\$17.98	\$16.76	\$17.80
Inpatient/Outpatient	CEFTRIAXONE SODIUM 2 G IJ SOLR	0409-7335-03	J0696	\$12.47	\$12.22	\$12.35	\$11.51	\$12.22
Inpatient/Outpatient	CEFTRIAXONE SODIUM 2 G IJ SOLR	0143-9856-25	J0696	\$8.68	\$8.51	\$8.59	\$8.01	\$8.51
Inpatient/Outpatient	CEFTRIAXONE SODIUM 2 G IJ SOLR	0143-9856-01	J0696	\$21.87	\$21.43	\$21.65	\$20.19	\$21.43
Inpatient/Outpatient	CEFTRIAXONE SODIUM 2 G IJ SOLR	60505-0753-3	J0696	\$27.09	\$26.55	\$26.82	\$25.00	\$26.55
Inpatient/Outpatient	CEFTRIAXONE SODIUM 2 G IJ SOLR	0409-7335-13	J0696	\$12.27	\$12.02	\$12.15	\$11.33	\$12.02
Inpatient/Outpatient	CEFTRIAXONE SODIUM 2 G IJ SOLR	60505-0753-4	J0696	\$27.24	\$26.70	\$26.97	\$25.14	\$26.70
Inpatient/Outpatient	CEFTRIAXONE SODIUM 2 G IJ SOLR	60505-6149-0	J0696	\$10.96	\$10.74	\$10.85	\$10.12	\$10.74
Inpatient/Outpatient	CEFTRIAXONE SODIUM 2 G IJ SOLR	25021-107-68	J0696	\$8.14	\$7.98	\$8.06	\$7.51	\$7.98

Inpatient/Outpatient	CEFTRIAZONE SODIUM 2 G IJ SOLR	25021-107-20	J0696	\$19.90	\$19.50	\$19.70	\$18.37	\$19.50
Inpatient/Outpatient	CEFTRIAZONE SODIUM 2 G IJ SOLR	44567-702-25	J0696	\$27.14	\$26.60	\$26.87	\$25.05	\$26.60
Inpatient/Outpatient	CEFTRIAZONE SODIUM 250 MG IJ SOLR	0781-3206-85	J0696	\$12.54	\$12.29	\$12.41	\$11.57	\$12.29
Inpatient/Outpatient	CEFTRIAZONE SODIUM 250 MG IJ SOLR	0781-3206-95	J0696	\$6.03	\$5.91	\$5.97	\$5.57	\$5.91
Inpatient/Outpatient	CEFTRIAZONE SODIUM 250 MG IJ SOLR	60505-0750-0	J0696	\$4.18	\$4.10	\$4.14	\$3.86	\$4.10
Inpatient/Outpatient	CEFTRIAZONE SODIUM 250 MG IJ SOLR	60505-0750-1	J0696	\$3.37	\$3.30	\$3.34	\$3.11	\$3.30
Inpatient/Outpatient	CEFTRIAZONE SODIUM 250 MG IJ SOLR	0409-7337-11	J0696	\$3.28	\$3.21	\$3.25	\$3.03	\$3.21
Inpatient/Outpatient	CEFTRIAZONE SODIUM 500 MG IJ SOLR	0781-3207-85	J0696	\$10.06	\$9.86	\$9.96	\$9.29	\$9.86
Inpatient/Outpatient	CEFTRIAZONE SODIUM 500 MG IJ SOLR	0781-3207-95	J0696	\$4.81	\$4.71	\$4.76	\$4.44	\$4.71
Inpatient/Outpatient	CEFTRIAZONE SODIUM 500 MG IJ SOLR	0409-7338-11	J0696	\$4.17	\$4.09	\$4.13	\$3.85	\$4.09
Inpatient/Outpatient	CEFTRIAZONE SODIUM 500 MG IJ SOLR	60505-6152-4	J0696	\$2.48	\$2.43	\$2.46	\$2.29	\$2.43
Inpatient/Outpatient	CEFTRIAZONE SODIUM 10 G IV SOLR	0781-3210-46	J0696	\$57.98	\$56.82	\$57.40	\$53.52	\$56.82
Inpatient/Outpatient	CEFTRIAZONE SODIUM 10 G IV SOLR	25021-108-69	J0696	\$52.49	\$51.44	\$51.97	\$48.45	\$51.44
Inpatient/Outpatient	CEFTRIAZONE SODIUM 10 G IV SOLR	25021-108-99	J0696	\$52.49	\$51.44	\$51.97	\$48.45	\$51.44
Inpatient/Outpatient	CEFTRIAZONE SODIUM 10 G IV SOLR	0143-9678-01	J0696	\$56.72	\$55.59	\$56.15	\$52.35	\$55.59
Inpatient/Outpatient	CEFTRIAZONE SODIUM 10 G IV SOLR	0409-7334-10	J0696	\$74.80	\$73.30	\$74.05	\$69.04	\$73.30
Inpatient/Outpatient	CEFTRIAZONE SODIUM 10 G IV SOLR	60505-6150-5	J0696	\$46.36	\$45.43	\$45.90	\$42.79	\$45.43
Inpatient/Outpatient	MULTIVITAMIN PO LIQD	0904-5023-15	A9270	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	MULTIVITAMIN PO LIQD	0005-4344-62	A9270	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	MULTIVITAMIN PO LIQD	54629-800-98	A9270	\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	MULTIVITAMIN PO LIQD	99999-4344-5	A9270	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	MULTIVITAMIN PO LIQD	69618-00858	A9270	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	FORMOTEROL FUMARATE 20 MCG/2ML IN NEBU	49502-605-30		\$10.63	\$10.42	\$10.52	\$9.81	\$10.42
Inpatient/Outpatient	FORMOTEROL FUMARATE 20 MCG/2ML IN NEBU	49502-605-95		\$10.63	\$10.42	\$10.52	\$9.81	\$10.42
Inpatient/Outpatient	CEFUROXIME AXETIL 250 MG PO TABS	68180-302-60	A9270	\$8.20	\$8.04	\$8.12	\$7.57	\$8.04
Inpatient/Outpatient	CEFUROXIME AXETIL 250 MG PO TABS	65862-699-60	A9270	\$2.11	\$2.07	\$2.09	\$1.95	\$2.07
Inpatient/Outpatient	CEFUROXIME AXETIL 250 MG PO TABS	16714-232-02	A9270	\$1.45	\$1.42	\$1.44	\$1.34	\$1.42
Inpatient/Outpatient	CEFUROXIME AXETIL 250 MG PO TABS	57237-058-60	A9270	\$0.90	\$0.88	\$0.89	\$0.83	\$0.88
Inpatient/Outpatient	CEFUROXIME AXETIL 250 MG PO TABS	16714-400-02	A9270	\$1.68	\$1.65	\$1.66	\$1.55	\$1.65
Inpatient/Outpatient	CEFUROXIME AXETIL 250 MG PO TABS	67877-215-60	A9270	\$0.89	\$0.87	\$0.88	\$0.82	\$0.87
Inpatient/Outpatient	METRONIDAZOLE IVPB 250 MG/50ML PREMIX	99999-057-00	J3490	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	OXYCODONE HCL 15 MG PO TABS	68084-184-01	A9270	\$2.67	\$2.62	\$2.64	\$2.46	\$2.62
Inpatient/Outpatient	OXYCODONE HCL 15 MG PO TABS	0406-8515-62	A9270	\$2.46	\$2.41	\$2.44	\$2.27	\$2.41
Inpatient/Outpatient	OXYCODONE HCL 15 MG PO TABS	0904-6445-61	A9270	\$4.18	\$4.10	\$4.14	\$3.86	\$4.10
Inpatient/Outpatient	OXYCODONE HCL 15 MG PO TABS	68094-005-59	A9270	\$2.73	\$2.68	\$2.70	\$2.52	\$2.68
Inpatient/Outpatient	OXYCODONE HCL 15 MG PO TABS	0406-8515-23	A9270	\$2.27	\$2.22	\$2.25	\$2.10	\$2.22
Inpatient/Outpatient	OXYCODONE HCL 15 MG PO TABS	42858-003-01	A9270	\$0.53	\$0.52	\$0.52	\$0.49	\$0.52
Inpatient/Outpatient	CEPHALEXIN 250 MG PO CAPS	0143-9898-01	A9270	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	CEPHALEXIN 250 MG PO CAPS	62584-235-01	A9270	\$1.50	\$1.47	\$1.49	\$1.38	\$1.47
Inpatient/Outpatient	CEPHALEXIN 250 MG PO CAPS	0093-3145-01	A9270	\$0.30	\$0.29	\$0.30	\$0.28	\$0.29
Inpatient/Outpatient	CEPHALEXIN 250 MG PO CAPS	0093-3145-05	A9270	\$0.61	\$0.60	\$0.60	\$0.56	\$0.60
Inpatient/Outpatient	CEPHALEXIN 250 MG PO CAPS	50268-151-11	A9270	\$1.26	\$1.23	\$1.25	\$1.16	\$1.23
Inpatient/Outpatient	CEPHALEXIN 250 MG PO CAPS	60687-152-11	A9270	\$1.46	\$1.43	\$1.45	\$1.35	\$1.43
Inpatient/Outpatient	CEPHALEXIN 250 MG PO CAPS	67877-220-01	A9270	\$0.30	\$0.29	\$0.30	\$0.28	\$0.29
Inpatient/Outpatient	CEPHALEXIN 250 MG PO CAPS	65862-018-01	A9270	\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	CEPHALEXIN 500 MG PO CAPS	0143-9897-01	A9270	\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	CEPHALEXIN 500 MG PO CAPS	16714-642-02	A9270	\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	CEPHALEXIN 500 MG PO CAPS	62584-236-01	A9270	\$16.93	\$16.59	\$16.76	\$15.63	\$16.59
Inpatient/Outpatient	CEPHALEXIN 500 MG PO CAPS	0093-3147-01	A9270	\$1.06	\$1.04	\$1.05	\$0.98	\$1.04
Inpatient/Outpatient	CEPHALEXIN 500 MG PO CAPS	60687-163-11	A9270	\$1.67	\$1.64	\$1.65	\$1.54	\$1.64
Inpatient/Outpatient	CEPHALEXIN 500 MG PO CAPS	50268-152-15	A9270	\$1.10	\$1.08	\$1.09	\$1.02	\$1.08
Inpatient/Outpatient	CEPHALEXIN 500 MG PO CAPS	50268-152-11	A9270	\$1.35	\$1.32	\$1.34	\$1.25	\$1.32
Inpatient/Outpatient	CEPHALEXIN 500 MG PO CAPS	68180-122-01	A9270	\$0.40	\$0.39	\$0.40	\$0.37	\$0.39
Inpatient/Outpatient	CEPHALEXIN 250 MG/5ML PO SUSR	0093-4177-73	A9270	\$0.59	\$0.58	\$0.58	\$0.54	\$0.58
Inpatient/Outpatient	CEPHALEXIN 250 MG/5ML PO SUSR	68180-124-01	A9270	\$1.12	\$1.10	\$1.11	\$1.03	\$1.10
Inpatient/Outpatient	CEPHALEXIN 250 MG/5ML PO SUSR	68180-441-01	A9270	\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	CEPHALEXIN 250 MG/5ML PO SUSR	24979-155-14	A9270	\$0.43	\$0.42	\$0.43	\$0.40	\$0.42
Inpatient/Outpatient	CETIRIZINE HCL 10 MG PO TABS	60505-2633-1	A9270	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	CETIRIZINE HCL 10 MG PO TABS	51079-597-01	A9270	\$0.53	\$0.52	\$0.52	\$0.49	\$0.52
Inpatient/Outpatient	CETIRIZINE HCL 10 MG PO TABS	45802-919-87	A9270	\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	CETIRIZINE HCL 10 MG PO TABS	16714-271-02	A9270	\$0.20	\$0.20	\$0.20	\$0.18	\$0.20
Inpatient/Outpatient	CETIRIZINE HCL 10 MG PO TABS	16571-402-10	A9270	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	CETIRIZINE HCL 10 MG PO TABS	0904-5852-61	A9270	\$0.53	\$0.52	\$0.52	\$0.49	\$0.52
Inpatient/Outpatient	CETIRIZINE HCL 10 MG PO TABS	55154-6675-7	A9270	\$0.60	\$0.59	\$0.59	\$0.55	\$0.59
Inpatient/Outpatient	CETIRIZINE HCL 10 MG PO TABS	70677-0006-2	A9270	\$0.58	\$0.57	\$0.57	\$0.54	\$0.57
Inpatient/Outpatient	CETIRIZINE HCL 10 MG PO TABS	0904-6717-61	A9270	\$0.41	\$0.40	\$0.41	\$0.38	\$0.40
Inpatient/Outpatient	CETIRIZINE HCL 10 MG PO TABS	16714-799-02	A9270	\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	CHLORAMBUCIL 2 MG PO TABS	0173-0635-35	A9270	\$21.62	\$21.19	\$21.40	\$19.96	\$21.19

Inpatient/Outpatient	CHLORAMBUCIL 2 MG PO TABS	76388-635-25	A9270		\$118.74	\$116.37	\$117.55	\$109.60	\$116.37
Inpatient/Outpatient	CHLORHEXIDINE GLUCONATE 0.12 % MT SOLN	0116-2001-16	A9270		\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	CHLORHEXIDINE GLUCONATE 0.12 % MT SOLN	0116-2001-15	A9270		\$0.42	\$0.41	\$0.42	\$0.39	\$0.41
Inpatient/Outpatient	CHLORHEXIDINE GLUCONATE 0.12 % MT SOLN	50383-720-16	A9270		\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	CHLORHEXIDINE GLUCONATE 0.12 % MT SOLN	0121-0893-15	A9270		\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	CHLORHEXIDINE GLUCONATE 0.12 % MT SOLN	63739-052-74	A9270		\$0.37	\$0.36	\$0.37	\$0.34	\$0.36
Inpatient/Outpatient	CHLORHEXIDINE GLUCONATE 0.12 % MT SOLN	63739-052-69	A9270		\$0.32	\$0.31	\$0.32	\$0.30	\$0.31
Inpatient/Outpatient	DIAZEPAM 10 MG PO TABS	0172-3927-60			\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	CHLOROTHIAZIDE SODIUM 500 MG IV SOLR	67386-711-55	J1205		\$1,430.09	\$1,401.49	\$1,415.79	\$1,319.97	\$1,401.49
Inpatient/Outpatient	CHLOROTHIAZIDE SODIUM 500 MG IV SOLR	63323-658-94	J1205		\$192.21	\$188.37	\$190.29	\$177.41	\$188.37
Inpatient/Outpatient	CHLOROTHIAZIDE SODIUM 500 MG IV SOLR	25021-305-20	J1205		\$235.32	\$232.97	\$232.97	\$217.20	\$230.61
Inpatient/Outpatient	CHLOROTHIAZIDE SODIUM 500 MG IV SOLR	0517-1820-01	J1205		\$196.30	\$192.37	\$194.34	\$181.18	\$192.37
Inpatient/Outpatient	CHLOROTHIAZIDE SODIUM 500 MG IV SOLR	63323-658-20	J1205		\$192.21	\$188.37	\$190.29	\$177.41	\$188.37
Inpatient/Outpatient	CHLOROTHIAZIDE SODIUM 500 MG IV SOLR	67457-263-30	J1205		\$139.73	\$136.94	\$138.33	\$128.97	\$136.94
Inpatient/Outpatient	CHLOROTHIAZIDE SODIUM 500 MG IV SOLR	47335-330-40	J1205		\$142.50	\$139.65	\$141.08	\$131.53	\$139.65
Inpatient/Outpatient	BUPRENORPHINE HCL-NALOXONE HCL 2-0.5 MG SL FILM	12496-1202-1	A9270		\$15.84	\$15.52	\$15.68	\$14.62	\$15.52
Inpatient/Outpatient	BUPRENORPHINE HCL-NALOXONE HCL 2-0.5 MG SL FILM	47781-355-03	A9270		\$7.94	\$7.78	\$7.86	\$7.33	\$7.78
Inpatient/Outpatient	BUPRENORPHINE HCL-NALOXONE HCL 2-0.5 MG SL FILM	43598-579-01	A9270		\$9.61	\$9.42	\$9.51	\$8.87	\$9.42
Inpatient/Outpatient	BUPRENORPHINE HCL-NALOXONE HCL 2-0.5 MG SL FILM	47781-355-11	A9270		\$8.74	\$8.57	\$8.65	\$8.07	\$8.57
Inpatient/Outpatient	CHOLESTYRAMINE 4 G PO PACK	0185-0940-98	A9270		\$7.31	\$7.16	\$7.24	\$6.75	\$7.16
Inpatient/Outpatient	CHOLESTYRAMINE 4 G PO PACK	49884-465-65	A9270		\$9.98	\$9.78	\$9.88	\$9.21	\$9.78
Inpatient/Outpatient	CHOLESTYRAMINE 4 G PO PACK	49884-465-64	A9270		\$3.52	\$3.45	\$3.48	\$3.25	\$3.45
Inpatient/Outpatient	CHOLESTYRAMINE 4 G PO PACK	0245-0536-89	A9270		\$6.95	\$6.81	\$6.88	\$6.41	\$6.81
Inpatient/Outpatient	CHOLESTYRAMINE 4 G PO PACK	68382-528-60	A9270		\$4.80	\$4.70	\$4.75	\$4.43	\$4.70
Inpatient/Outpatient	CHOLESTYRAMINE 4 G PO PACK	42806-265-98	A9270		\$2.81	\$2.75	\$2.78	\$2.59	\$2.75
Inpatient/Outpatient	FLUPHENAZINE HCL 2.5 MG/ML IJ SOLN	63323-281-10			\$43.15	\$42.29	\$42.72	\$39.83	\$42.29
Inpatient/Outpatient	SODIUM CHLORIDE 0.45% FLUSH SOLUTION 2 ML (NICU)	99999-053-00			\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	CIPROFLOXACIN HCL 0.3 % OP SOLN	61314-656-25	A9270		\$7.10	\$6.96	\$7.03	\$6.55	\$6.96
Inpatient/Outpatient	CIPROFLOXACIN HCL 0.3 % OP SOLN	61314-656-05	A9270		\$3.52	\$3.45	\$3.48	\$3.25	\$3.45
Inpatient/Outpatient	CIPROFLOXACIN HCL 0.3 % OP SOLN	17478-714-25	A9270		\$13.53	\$13.26	\$13.39	\$12.49	\$13.26
Inpatient/Outpatient	CIPROFLOXACIN HCL 0.3 % OP SOLN	50383-282-02	A9270		\$22.59	\$22.14	\$22.36	\$20.85	\$22.14
Inpatient/Outpatient	CIPROFLOXACIN HCL 0.3 % OP SOLN	0065-0656-05	A9270		\$109.39	\$107.20	\$108.30	\$100.97	\$107.20
Inpatient/Outpatient	CIPROFLOXACIN HCL 0.3 % OP SOLN	69315-308-05	A9270		\$13.61	\$13.34	\$13.47	\$12.56	\$13.34
Inpatient/Outpatient	CIPROFLOXACIN HCL 0.3 % OP SOLN	69315-308-02	A9270		\$9.66	\$9.47	\$9.56	\$8.92	\$9.47
Inpatient/Outpatient	CIPROFLOXACIN IN D5W 400 MG/200ML IV SOLN	36000-009-24	J0744		\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	CIPROFLOXACIN IN D5W 400 MG/200ML IV SOLN	0409-4777-02	J0744		\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	CIPROFLOXACIN IN D5W 400 MG/200ML IV SOLN	0409-4777-50	J0744		\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	CIPROFLOXACIN IN D5W 400 MG/200ML IV SOLN	25021-114-87	J0744		\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	CLARITHROMYCIN 250 MG PO TABS	0054-0036-21	A9270		\$4.75	\$4.66	\$4.70	\$4.38	\$4.66
Inpatient/Outpatient	CLARITHROMYCIN 250 MG PO TABS	59746-742-60	A9270		\$1.85	\$1.81	\$1.83	\$1.71	\$1.81
Inpatient/Outpatient	CLARITHROMYCIN 250 MG PO TABS	0527-1931-06	A9270		\$1.50	\$1.47	\$1.49	\$1.38	\$1.47
Inpatient/Outpatient	CLARITHROMYCIN 250 MG PO TABS	50268-178-11	A9270		\$14.12	\$14.12	\$14.27	\$13.30	\$14.12
Inpatient/Outpatient	CLARITHROMYCIN 500 MG PO TABS	0054-0037-21	A9270		\$14.16	\$13.88	\$14.02	\$13.07	\$13.88
Inpatient/Outpatient	CLARITHROMYCIN 500 MG PO TABS	68084-437-11	A9270		\$18.47	\$18.10	\$18.29	\$17.05	\$18.10
Inpatient/Outpatient	CLARITHROMYCIN 500 MG PO TABS	51079-673-01	A9270		\$4.98	\$4.88	\$4.93	\$4.60	\$4.88
Inpatient/Outpatient	CLARITHROMYCIN 500 MG PO TABS	50268-179-11	A9270		\$17.56	\$17.21	\$17.38	\$16.21	\$17.21
Inpatient/Outpatient	CLARITHROMYCIN 500 MG PO TABS	60687-435-11	A9270		\$10.56	\$10.35	\$10.45	\$9.75	\$10.35
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE IN D5W 300 MG/50ML IV SOLN	0009-3381-02			\$1.03	\$1.01	\$1.02	\$0.95	\$1.01
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE IN D5W 300 MG/50ML IV SOLN	0009-3381-01			\$0.71	\$0.70	\$0.70	\$0.66	\$0.70
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE IN D5W 300 MG/50ML IV SOLN	99999-3381-2			\$1.03	\$1.01	\$1.02	\$0.95	\$1.01
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE IN D5W 600 MG/50ML IV SOLN	17478-121-50	J3490		\$0.60	\$0.59	\$0.59	\$0.55	\$0.59
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE IN D5W 600 MG/50ML IV SOLN	0009-3375-01	J3490		\$1.58	\$1.55	\$1.56	\$1.46	\$1.55
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE IN D5W 600 MG/50ML IV SOLN	0781-3289-91	J3490		\$0.68	\$0.67	\$0.67	\$0.63	\$0.67
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE IN D5W 600 MG/50ML IV SOLN	0338-3612-50	J3490		\$0.40	\$0.39	\$0.40	\$0.37	\$0.39
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE IN D5W 600 MG/50ML IV SOLN	0338-3616-50	J3490		\$0.96	\$0.94	\$0.95	\$0.89	\$0.94
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE IN D5W 600 MG/50ML IV SOLN	99999-3375-2	J3490		\$1.03	\$1.01	\$1.02	\$0.95	\$1.01
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE IN D5W 900 MG/50ML IV SOLN	17478-122-50	J3490		\$0.70	\$0.69	\$0.69	\$0.65	\$0.69
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE IN D5W 900 MG/50ML IV SOLN	0009-3382-01	J3490		\$1.93	\$1.89	\$1.91	\$1.78	\$1.89
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE IN D5W 900 MG/50ML IV SOLN	0781-3290-91	J3490		\$0.83	\$0.81	\$0.82	\$0.77	\$0.81
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE IN D5W 900 MG/50ML IV SOLN	0338-3814-50	J3490		\$0.50	\$0.49	\$0.50	\$0.46	\$0.49
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE IN D5W 900 MG/50ML IV SOLN	0338-4114-50	J3490		\$0.50	\$0.49	\$0.50	\$0.46	\$0.49
Inpatient/Outpatient	CLOMIPRAMINE HCL 25 MG PO CAPS	0378-3025-01	A9270		\$43.05	\$42.19	\$42.62	\$39.74	\$42.19
Inpatient/Outpatient	CLOMIPRAMINE HCL 25 MG PO CAPS	51672-4011-6	A9270		\$1.48	\$1.45	\$1.47	\$1.37	\$1.45
Inpatient/Outpatient	CLOMIPRAMINE HCL 25 MG PO CAPS	16714-849-01	A9270		\$6.58	\$6.45	\$6.51	\$6.07	\$6.45
Inpatient/Outpatient	CLONAZEPAM 0.5 MG PO TABS	0093-0832-01	A9270		\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	CLONAZEPAM 0.5 MG PO TABS	51079-881-01	A9270		\$3.88	\$3.80	\$3.84	\$3.58	\$3.80
Inpatient/Outpatient	CLONAZEPAM 0.5 MG PO TABS	51079-881-20	A9270		\$0.44	\$0.43	\$0.44	\$0.41	\$0.43
Inpatient/Outpatient	CLONAZEPAM 0.5 MG PO TABS	57664-273-08	A9270		\$0.09	\$0.09	\$0.09	\$0.08	\$0.09

Inpatient/Outpatient	CLONAZEPAM 0.5 MG PO TABS	0904-6101-61	A9270	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	CLONAZEPAM 0.5 MG PO TABS	16714-752-01	A9270	\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	CLONAZEPAM 0.5 MG PO TABS	16729-136-16	A9270	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	CLONAZEPAM 0.5 MG PO TABS	0228-3003-11	A9270	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	CLONAZEPAM 0.5 MG PO TABS	16729-136-00	A9270	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	CLONAZEPAM 0.5 MG PO TABS	60687-544-11	A9270	\$1.80	\$1.76	\$1.78	\$1.66	\$1.76
Inpatient/Outpatient	CLONAZEPAM 1 MG PO TABS	51079-882-01	A9270	\$4.40	\$4.31	\$4.36	\$4.06	\$4.31
Inpatient/Outpatient	CLONAZEPAM 1 MG PO TABS	51079-882-20	A9270	\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	CLONAZEPAM 1 MG PO TABS	57664-274-08	A9270	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	CLONAZEPAM 1 MG PO TABS	16729-137-00	A9270	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	CLONAZEPAM 1 MG PO TABS	60687-555-11	A9270	\$1.10	\$1.08	\$1.09	\$1.02	\$1.08
Inpatient/Outpatient	CLOTTRIMAZOLE 10 MG MT TROC	0054-8146-22	A9150	\$13.36	\$13.09	\$13.23	\$12.33	\$13.09
Inpatient/Outpatient	CLOTTRIMAZOLE 10 MG MT TROC	0574-0107-70	A9150	\$1.26	\$1.23	\$1.25	\$1.16	\$1.23
Inpatient/Outpatient	CLOTTRIMAZOLE 10 MG MT TROC	0054-4146-22	A9150	\$1.33	\$1.30	\$1.32	\$1.23	\$1.30
Inpatient/Outpatient	CLOTTRIMAZOLE 10 MG MT TROC	0574-0107-14	A9150	\$1.12	\$1.10	\$1.11	\$1.03	\$1.10
Inpatient/Outpatient	CLOZAPINE 100 MG PO TABS	0378-0860-01	A9270	\$3.27	\$3.20	\$3.24	\$3.02	\$3.20
Inpatient/Outpatient	CLOZAPINE 100 MG PO TABS	0093-7772-19	A9270	\$5.03	\$4.93	\$4.98	\$4.64	\$4.93
Inpatient/Outpatient	CLOZAPINE 100 MG PO TABS	60429-990-01	A9270	\$2.13	\$2.09	\$2.11	\$1.97	\$2.09
Inpatient/Outpatient	CLOZAPINE 100 MG PO TABS	51079-922-01	A9270	\$3.39	\$3.32	\$3.36	\$3.13	\$3.32
Inpatient/Outpatient	CLOZAPINE 100 MG PO TABS	60687-415-11	A9270	\$3.00	\$2.94	\$2.97	\$2.77	\$2.94
Inpatient/Outpatient	CLOZAPINE 25 MG PO TABS	0378-0825-01	A9270	\$1.31	\$1.28	\$1.30	\$1.21	\$1.28
Inpatient/Outpatient	CLOZAPINE 25 MG PO TABS	51079-921-01	A9270	\$1.31	\$1.28	\$1.30	\$1.21	\$1.28
Inpatient/Outpatient	CLOZAPINE 25 MG PO TABS	60687-404-11	A9270	\$1.15	\$1.13	\$1.14	\$1.06	\$1.13
Inpatient/Outpatient	COLCHICINE-PROBENECID 0.5-500 MG PO TABS	0591-5325-01	A9270	\$3.07	\$3.01	\$3.04	\$2.83	\$3.01
Inpatient/Outpatient	COLCHICINE-PROBENECID 0.5-500 MG PO TABS	64980-149-01	A9270	\$3.92	\$3.84	\$3.88	\$3.62	\$3.84
Inpatient/Outpatient	COLCHICINE-PROBENECID 0.5-500 MG PO TABS	50742-263-01	A9270	\$4.77	\$4.67	\$4.72	\$4.40	\$4.67
Inpatient/Outpatient	COLISTIMETHATE SODIUM (CBA) 150 MG IJ SOLR	39822-0615-1	J0770	\$127.09	\$124.55	\$125.82	\$117.30	\$124.55
Inpatient/Outpatient	COLISTIMETHATE SODIUM (CBA) 150 MG IJ SOLR	63323-393-06	J0770	\$49.67	\$48.68	\$49.17	\$45.85	\$48.68
Inpatient/Outpatient	COLISTIMETHATE SODIUM (CBA) 150 MG IJ SOLR	42023-107-01	J0770	\$126.70	\$124.17	\$125.43	\$116.94	\$124.17
Inpatient/Outpatient	COLISTIMETHATE SODIUM (CBA) 150 MG IJ SOLR	39822-0617-1	J0770	\$127.09	\$124.55	\$125.82	\$117.30	\$124.55
Inpatient/Outpatient	COLISTIMETHATE SODIUM (CBA) 150 MG IJ SOLR	70594-023-04	J0770	\$52.05	\$51.01	\$51.53	\$48.04	\$51.01
Inpatient/Outpatient	COLISTIMETHATE SODIUM (CBA) 150 MG IJ SOLR	70594-023-01	J0770	\$52.02	\$50.98	\$51.50	\$48.01	\$50.98
Inpatient/Outpatient	COLLAGENASE 250 UNIT/GM EX OINT	0064-5010-30	A9270	\$30.21	\$29.61	\$29.91	\$27.88	\$29.61
Inpatient/Outpatient	COLLAGENASE 250 UNIT/GM EX OINT	50484-010-30	A9270	\$40.52	\$39.71	\$40.11	\$37.40	\$39.71
Inpatient/Outpatient	COLLAGENASE 250 UNIT/GM EX OINT	99999-010-01	A9270	\$40.52	\$39.71	\$40.11	\$37.40	\$39.71
Inpatient/Outpatient	COSYNTROPIN 0.25 MG IJ SOLR	0548-5900-00	J0834	\$81.42	\$79.79	\$80.61	\$75.15	\$79.79
Inpatient/Outpatient	COSYNTROPIN 0.25 MG IJ SOLR	0781-3440-71	J0834	\$110.86	\$108.64	\$109.75	\$102.32	\$108.64
Inpatient/Outpatient	CYCLOPENTOLATE HCL 2 % OP SOLN	0065-0397-05	A9270	\$53.95	\$52.87	\$53.41	\$49.80	\$52.87
Inpatient/Outpatient	CYCLOPENTOLATE HCL 2 % OP SOLN	17478-097-10	A9270	\$11.77	\$11.53	\$11.65	\$10.86	\$11.53
Inpatient/Outpatient	CYCLOPENTOLATE HCL 2 % OP SOLN	0065-0397-02	A9270	\$81.58	\$79.95	\$80.76	\$75.30	\$79.95
Inpatient/Outpatient	CYCLOPHOSPHAMIDE 25 MG PO CAPS	0054-0382-25	J8530	\$24.94	\$24.44	\$24.69	\$23.02	\$24.44
Inpatient/Outpatient	CYCLOPHOSPHAMIDE 25 MG PO CAPS	54879-021-01	J8530	\$8.81	\$8.63	\$8.72	\$8.13	\$8.63
Inpatient/Outpatient	CYCLOPHOSPHAMIDE 50 MG PO CAPS	0054-0383-25	J8530	\$49.77	\$48.77	\$49.27	\$45.94	\$48.77
Inpatient/Outpatient	CYCLOPHOSPHAMIDE 50 MG PO CAPS	54879-022-01	J8530	\$15.38	\$15.07	\$15.23	\$14.20	\$15.07
Inpatient/Outpatient	CYCLOSPORINE 50 MG/ML IV SOLN	0574-0866-10	J7516	\$28.92	\$28.34	\$28.63	\$26.69	\$28.34
Inpatient/Outpatient	CYCLOSPORINE 50 MG/ML IV SOLN	0078-0109-01	J7516	\$51.80	\$50.76	\$51.28	\$47.81	\$50.76
Inpatient/Outpatient	CYCLOSPORINE 50 MG/ML IV SOLN	0517-0866-01	J7516	\$28.78	\$28.20	\$28.49	\$26.56	\$28.20
Inpatient/Outpatient	CYCLOSPORINE 100 MG PO CAPS	0078-0241-15	J7502	\$76.44	\$74.91	\$75.68	\$70.55	\$74.91
Inpatient/Outpatient	CYCLOSPORINE 100 MG PO CAPS	60505-0134-0	J7502	\$37.22	\$36.48	\$36.85	\$34.35	\$36.48
Inpatient/Outpatient	CYCLOSPORINE 100 MG PO CAPS	0078-0241-61	J7502	\$72.80	\$71.34	\$72.07	\$67.19	\$71.34
Inpatient/Outpatient	CYCLOSPORINE 100 MG PO CAPS	68084-921-95	J7502	\$51.42	\$50.39	\$50.91	\$47.46	\$50.39
Inpatient/Outpatient	CYCLOSPORINE 25 MG PO CAPS	0078-0240-15	J7515	\$19.15	\$18.77	\$18.96	\$17.68	\$18.77
Inpatient/Outpatient	CYCLOSPORINE 25 MG PO CAPS	68084-879-95	J7515	\$8.86	\$8.68	\$8.77	\$8.18	\$8.68
Inpatient/Outpatient	CYCLOSPORINE 25 MG PO CAPS	0078-0240-61	J7515	\$17.57	\$17.22	\$17.39	\$16.22	\$17.22
Inpatient/Outpatient	CYCLOSPORINE 100 MG/ML PO SOLN	0078-0110-22	J7502	\$74.23	\$73.49	\$73.49	\$68.51	\$72.75
Inpatient/Outpatient	OXIDIZED CELLULOSE (SURGICEL NU-KNIT) 3X4 INCH	63713-01943		\$384.63	\$376.94	\$380.78	\$355.01	\$376.94
Inpatient/Outpatient	OXIDIZED CELLULOSE (SURGICEL NU-KNIT) 3X4 INCH	63713-01952		\$456.00	\$446.88	\$451.44	\$420.89	\$446.88
Inpatient/Outpatient	CYTARABINE (PF) 20 MG/ML IJ SOLN	61703-305-38	J9100	\$4.26	\$4.17	\$4.22	\$3.93	\$4.17
Inpatient/Outpatient	CYTARABINE (PF) 20 MG/ML IJ SOLN	61703-303-46	J9100	\$1.71	\$1.68	\$1.69	\$1.58	\$1.68
Inpatient/Outpatient	CYTARABINE (PF) 20 MG/ML IJ SOLN	67457-454-50	J9100	\$1.29	\$1.26	\$1.28	\$1.19	\$1.26
Inpatient/Outpatient	CYTARABINE (PF) 20 MG/ML IJ SOLN	61703-305-58	J9100	\$4.26	\$4.17	\$4.22	\$3.93	\$4.17
Inpatient/Outpatient	DANTROLENE SODIUM 20 MG IV SOLR	27505-003-67		\$314.69	\$308.40	\$311.54	\$290.46	\$308.40
Inpatient/Outpatient	DANTROLENE SODIUM 20 MG IV SOLR	27505-003-68		\$314.69	\$308.40	\$311.54	\$290.46	\$308.40
Inpatient/Outpatient	DANTROLENE SODIUM 25 MG PO CAPS	0115-4411-01	A9270	\$3.14	\$3.08	\$3.11	\$2.90	\$3.08
Inpatient/Outpatient	DANTROLENE SODIUM 25 MG PO CAPS	68084-300-11	A9270	\$6.88	\$6.74	\$6.81	\$6.35	\$6.74
Inpatient/Outpatient	DEFEROXAMINE MESYLATE 500 MG IJ SOLR	0078-0467-91	J0895	\$154.54	\$151.45	\$152.99	\$142.64	\$151.45
Inpatient/Outpatient	DEFEROXAMINE MESYLATE 500 MG IJ SOLR	0409-2336-10	J0895	\$42.78	\$41.92	\$42.35	\$39.49	\$41.92
Inpatient/Outpatient	DEFEROXAMINE MESYLATE 500 MG IJ SOLR	63323-597-10	J0895	\$50.59	\$49.58	\$50.08	\$46.69	\$49.58

Inpatient/Outpatient	DEMECLOXYCLINE HCL 150 MG PO TABS	0115-2111-01	A9270	\$21.63	\$21.20	\$21.41	\$19.96	\$21.20
Inpatient/Outpatient	DEMECLOXYCLINE HCL 150 MG PO TABS	62584-159-11	A9270	\$14.30	\$14.01	\$14.16	\$13.20	\$14.01
Inpatient/Outpatient	DEMECLOXYCLINE HCL 150 MG PO TABS	0904-6180-61	A9270	\$13.60	\$13.33	\$13.46	\$12.55	\$13.33
Inpatient/Outpatient	DESFLURANE IN SOLN	10019-641-34	A9270	\$2.65	\$2.60	\$2.62	\$2.45	\$2.60
Inpatient/Outpatient	DESFLURANE IN SOLN	10019-641-64	A9270	\$2.65	\$2.60	\$2.62	\$2.45	\$2.60
Inpatient/Outpatient	DESMOPRESSIN ACETATE 4 MCG/ML IJ SOLN (WRAP)	0409-2265-01	J2597	\$44.21	\$43.33	\$43.77	\$40.81	\$43.33
Inpatient/Outpatient	DESMOPRESSIN ACETATE 4 MCG/ML IJ SOLN (WRAP)	0703-5054-01	J2597	\$209.23	\$205.05	\$207.14	\$193.12	\$205.05
Inpatient/Outpatient	DESMOPRESSIN ACETATE 4 MCG/ML IJ SOLN (WRAP)	55566-5040-1	J2597	\$277.56	\$272.01	\$274.78	\$256.19	\$272.01
Inpatient/Outpatient	DESMOPRESSIN ACETATE 4 MCG/ML IJ SOLN (WRAP)	0703-5051-01	J2597	\$15.36	\$15.05	\$15.21	\$14.18	\$15.05
Inpatient/Outpatient	DESMOPRESSIN ACETATE 4 MCG/ML IJ SOLN (WRAP)	0703-5051-03	J2597	\$224.18	\$219.70	\$221.94	\$206.92	\$219.70
Inpatient/Outpatient	DESMOPRESSIN ACETATE 4 MCG/ML IJ SOLN (WRAP)	55566-2200-0	J2597	\$227.55	\$223.00	\$225.27	\$210.03	\$223.00
Inpatient/Outpatient	DESMOPRESSIN ACETATE 4 MCG/ML IJ SOLN (WRAP)	55566-2300-0	J2597	\$230.38	\$225.77	\$228.08	\$212.64	\$225.77
Inpatient/Outpatient	DESMOPRESSIN ACETATE 4 MCG/ML IJ SOLN (WRAP)	69918-901-10	J2597	\$101.09	\$99.07	\$100.08	\$93.31	\$99.07
Inpatient/Outpatient	DESMOPRESSIN ACETATE 4 MCG/ML IJ SOLN (WRAP)	69918-899-10	J2597	\$101.09	\$99.07	\$100.08	\$93.31	\$99.07
Inpatient/Outpatient	DESMOPRESSIN ACETATE 4 MCG/ML IJ SOLN (WRAP)	69918-899-01	J2597	\$183.72	\$180.05	\$181.88	\$169.57	\$180.05
Inpatient/Outpatient	DESMOPRESSIN ACETATE 4 MCG/ML IJ SOLN (WRAP)	43598-931-11	J2597	\$139.89	\$137.09	\$138.49	\$129.12	\$137.09
Inpatient/Outpatient	DESMOPRESSIN ACETATE 4 MCG/ML IJ SOLN (WRAP)	62756-529-40	J2597	\$101.30	\$99.27	\$100.29	\$93.50	\$99.27
Inpatient/Outpatient	DESMOPRESSIN ACETATE 4 MCG/ML IJ SOLN (WRAP)	16714-015-01	J2597	\$122.23	\$119.79	\$121.01	\$112.82	\$119.79
Inpatient/Outpatient	DESMOPRESSIN ACETATE 4 MCG/ML IJ SOLN (WRAP)	70860-454-41	J2597	\$237.47	\$232.72	\$235.10	\$219.18	\$232.72
Inpatient/Outpatient	DEXTROSE IN LACTATED RINGERS 5 % IV SOLN	0338-0125-04	J7121	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	DIHYDROERGOTAMINE MESYLATE 1 MG/ML IJ SOLN	0574-0850-10	J1110	\$238.37	\$233.60	\$235.99	\$220.02	\$233.60
Inpatient/Outpatient	DIHYDROERGOTAMINE MESYLATE 1 MG/ML IJ SOLN	55390-013-10	J1110	\$122.48	\$120.03	\$121.26	\$113.05	\$120.03
Inpatient/Outpatient	DIHYDROERGOTAMINE MESYLATE 1 MG/ML IJ SOLN	66490-041-01	J1110	\$611.60	\$599.37	\$605.48	\$564.51	\$599.37
Inpatient/Outpatient	DIHYDROERGOTAMINE MESYLATE 1 MG/ML IJ SOLN	0143-9273-01	J1110	\$320.56	\$314.15	\$317.35	\$295.88	\$314.15
Inpatient/Outpatient	DIHYDROERGOTAMINE MESYLATE 1 MG/ML IJ SOLN	0574-0850-05	J1110	\$393.01	\$385.15	\$389.08	\$362.75	\$385.15
Inpatient/Outpatient	DILTIAZEM HCL 25 MG/5ML IV SOLN	55390-565-05		\$1.85	\$1.81	\$1.83	\$1.71	\$1.81
Inpatient/Outpatient	DILTIAZEM HCL 25 MG/5ML IV SOLN	0409-1171-01		\$1.87	\$1.83	\$1.85	\$1.73	\$1.83
Inpatient/Outpatient	DILTIAZEM HCL 25 MG/5ML IV SOLN	0641-6013-01		\$0.51	\$0.50	\$0.50	\$0.47	\$0.50
Inpatient/Outpatient	DILTIAZEM HCL 25 MG/5ML IV SOLN	17478-937-05		\$2.54	\$2.49	\$2.51	\$2.34	\$2.49
Inpatient/Outpatient	DILTIAZEM HCL 25 MG/5ML IV SOLN	70860-301-41		\$2.94	\$2.88	\$2.91	\$2.71	\$2.88
Inpatient/Outpatient	EPOETIN ALFA-EPBX 40000 UNIT/ML IJ SOLN	0069-1309-04	Q5106	\$1,256.19	\$1,231.07	\$1,243.63	\$1,159.46	\$1,231.07
Inpatient/Outpatient	EPOETIN ALFA-EPBX 40000 UNIT/ML IJ SOLN	0069-1309-01	Q5106	\$1,239.14	\$1,214.36	\$1,226.75	\$1,143.73	\$1,214.36
Inpatient/Outpatient	DINOPROSTONE 20 MG VA SUPP	0009-0827-03	A9150	\$4,526.65	\$4,436.12	\$4,481.38	\$4,178.10	\$4,436.12
Inpatient/Outpatient	DOXAZOSIN MESYLATE 1 MG PO TABS	51079-957-20	A9270	\$11.39	\$11.16	\$11.28	\$10.51	\$11.16
Inpatient/Outpatient	DOXAZOSIN MESYLATE 1 MG PO TABS	51079-957-01	A9270	\$0.41	\$0.40	\$0.41	\$0.38	\$0.40
Inpatient/Outpatient	DOXAZOSIN MESYLATE 1 MG PO TABS	0093-8120-19	A9270	\$0.39	\$0.38	\$0.39	\$0.36	\$0.38
Inpatient/Outpatient	DOXAZOSIN MESYLATE 1 MG PO TABS	16729-211-01	A9270	\$0.43	\$0.42	\$0.43	\$0.40	\$0.42
Inpatient/Outpatient	DOXAZOSIN MESYLATE 1 MG PO TABS	0904-5522-61	A9270	\$2.23	\$2.19	\$2.21	\$2.06	\$2.19
Inpatient/Outpatient	DOXAZOSIN MESYLATE 1 MG PO TABS	68084-836-11	A9270	\$2.16	\$2.12	\$2.14	\$1.99	\$2.12
Inpatient/Outpatient	DOXAZOSIN MESYLATE 2 MG PO TABS	51079-958-01	A9270	\$4.49	\$4.40	\$4.45	\$4.14	\$4.40
Inpatient/Outpatient	DOXAZOSIN MESYLATE 2 MG PO TABS	51079-958-20	A9270	\$11.34	\$11.11	\$11.23	\$10.47	\$11.11
Inpatient/Outpatient	DOXAZOSIN MESYLATE 2 MG PO TABS	0904-5523-61	A9270	\$2.43	\$2.38	\$2.41	\$2.24	\$2.38
Inpatient/Outpatient	DOXAZOSIN MESYLATE 4 MG PO TABS	51079-959-01	A9270	\$4.71	\$4.62	\$4.66	\$4.35	\$4.62
Inpatient/Outpatient	DOXAZOSIN MESYLATE 4 MG PO TABS	51079-959-20	A9270	\$11.90	\$11.66	\$11.78	\$10.98	\$11.66
Inpatient/Outpatient	DOXAZOSIN MESYLATE 4 MG PO TABS	0904-5524-61	A9270	\$2.48	\$2.43	\$2.46	\$2.29	\$2.43
Inpatient/Outpatient	DOXAZOSIN MESYLATE 4 MG PO TABS	68084-862-11	A9270	\$2.31	\$2.26	\$2.29	\$2.13	\$2.26
Inpatient/Outpatient	DOXYCYCLINE MONOHYDRATE 25 MG/5ML PO SUSR	0069-0970-65	A9270	\$3.12	\$3.06	\$3.09	\$2.88	\$3.06
Inpatient/Outpatient	DOXYCYCLINE MONOHYDRATE 25 MG/5ML PO SUSR	69097-228-43	A9270	\$1.74	\$1.71	\$1.72	\$1.61	\$1.71
Inpatient/Outpatient	DOXYCYCLINE MONOHYDRATE 25 MG/5ML PO SUSR	68180-657-01	A9270	\$1.31	\$1.28	\$1.30	\$1.21	\$1.28
Inpatient/Outpatient	DOXYCYCLINE MONOHYDRATE 25 MG/5ML PO SUSR	62135-417-46	A9270	\$1.38	\$1.35	\$1.37	\$1.27	\$1.35
Inpatient/Outpatient	DRONABINOL 2.5 MG PO CAPS	0051-0021-21	Q0167	\$49.57	\$48.58	\$49.07	\$45.75	\$48.58
Inpatient/Outpatient	DRONABINOL 2.5 MG PO CAPS	49884-867-02	Q0167	\$13.99	\$13.71	\$13.85	\$12.91	\$13.71
Inpatient/Outpatient	DRONABINOL 2.5 MG PO CAPS	0378-8170-91	Q0167	\$28.64	\$28.07	\$28.35	\$26.43	\$28.07
Inpatient/Outpatient	DRONABINOL 2.5 MG PO CAPS	68084-174-11	Q0167	\$17.91	\$17.55	\$17.73	\$16.53	\$17.55
Inpatient/Outpatient	DRONABINOL 2.5 MG PO CAPS	68084-174-01	Q0167	\$25.04	\$24.54	\$24.79	\$23.11	\$24.54
Inpatient/Outpatient	DRONABINOL 2.5 MG PO CAPS	17478-761-06	Q0167	\$7.26	\$7.11	\$7.19	\$6.70	\$7.11
Inpatient/Outpatient	DRONABINOL 2.5 MG PO CAPS	0904-6745-61	Q0167	\$13.93	\$13.65	\$13.79	\$12.86	\$13.65
Inpatient/Outpatient	DRONABINOL 2.5 MG PO CAPS	0904-7144-61	Q0167	\$13.24	\$12.98	\$13.11	\$12.22	\$12.98
Inpatient/Outpatient	ENALAPRIL MALEATE 10 MG PO TABS	51079-952-01	A9270	\$5.21	\$5.11	\$5.16	\$4.81	\$5.11
Inpatient/Outpatient	ENALAPRIL MALEATE 10 MG PO TABS	51079-952-20	A9270	\$3.14	\$3.08	\$3.11	\$2.90	\$3.08
Inpatient/Outpatient	ENALAPRIL MALEATE 10 MG PO TABS	0904-5610-61	A9270	\$1.60	\$1.57	\$1.58	\$1.48	\$1.57
Inpatient/Outpatient	ENALAPRIL MALEATE 2.5 MG PO TABS	51079-950-01	A9270	\$3.90	\$3.82	\$3.86	\$3.60	\$3.82
Inpatient/Outpatient	ENALAPRIL MALEATE 2.5 MG PO TABS	51079-950-20	A9270	\$2.18	\$2.14	\$2.16	\$2.01	\$2.14
Inpatient/Outpatient	ENALAPRIL MALEATE 2.5 MG PO TABS	0904-5609-61	A9270	\$1.98	\$1.94	\$1.96	\$1.83	\$1.94
Inpatient/Outpatient	ENALAPRIL MALEATE 2.5 MG PO TABS	68682-710-01	A9270	\$1.18	\$1.16	\$1.17	\$1.09	\$1.16
Inpatient/Outpatient	ENALAPRIL MALEATE 20 MG PO TABS	51079-953-01	A9270	\$7.41	\$7.26	\$7.34	\$6.84	\$7.26
Inpatient/Outpatient	ENALAPRIL MALEATE 20 MG PO TABS	51079-953-20	A9270	\$4.47	\$4.38	\$4.43	\$4.13	\$4.38
Inpatient/Outpatient	ENALAPRIL MALEATE 20 MG PO TABS	68084-392-11	A9270	\$0.34	\$0.33	\$0.34	\$0.31	\$0.33

Inpatient/Outpatient	ENALAPRIL MALEATE 20 MG PO TABS	0904-5611-61	A9270	\$2.39	\$2.34	\$2.37	\$2.21	\$2.34
Inpatient/Outpatient	ENALAPRIL MALEATE 5 MG PO TABS	51079-951-01	A9270	\$4.96	\$4.86	\$4.91	\$4.58	\$4.86
Inpatient/Outpatient	ENALAPRIL MALEATE 5 MG PO TABS	51079-951-20	A9270	\$2.99	\$2.93	\$2.96	\$2.76	\$2.93
Inpatient/Outpatient	ENALAPRIL MALEATE 5 MG PO TABS	0904-5502-61	A9270	\$1.62	\$1.59	\$1.60	\$1.50	\$1.59
Inpatient/Outpatient	ENALAPRILAT 1.25 MG/ML IV INJ	55390-010-10		\$13.87	\$13.59	\$13.73	\$12.80	\$13.59
Inpatient/Outpatient	ENALAPRILAT 1.25 MG/ML IV INJ	0409-2122-01		\$7.39	\$7.24	\$7.32	\$6.82	\$7.24
Inpatient/Outpatient	ENALAPRILAT 1.25 MG/ML IV INJ	55390-011-10		\$13.40	\$13.13	\$13.27	\$12.37	\$13.13
Inpatient/Outpatient	ENALAPRILAT 1.25 MG/ML IV INJ	0143-9786-10		\$19.30	\$18.91	\$19.11	\$17.81	\$18.91
Inpatient/Outpatient	ENALAPRILAT 1.25 MG/ML IV INJ	0143-9787-10		\$21.61	\$21.18	\$21.39	\$19.95	\$21.18
Inpatient/Outpatient	ENALAPRILAT 1.25 MG/ML IV INJ	0143-9787-01		\$5.28	\$5.17	\$5.23	\$4.87	\$5.17
Inpatient/Outpatient	ENALAPRILAT 1.25 MG/ML IV INJ	0143-9786-01		\$4.73	\$4.64	\$4.68	\$4.37	\$4.64
Inpatient/Outpatient	TEMAZEPAM 7.5 MG PO CAPS	53489-648-01	A9270	\$33.82	\$33.14	\$33.48	\$31.22	\$33.14
Inpatient/Outpatient	TEMAZEPAM 7.5 MG PO CAPS	0904-6436-04	A9270	\$12.59	\$12.34	\$12.46	\$11.62	\$12.34
Inpatient/Outpatient	EPOETIN ALFA 10000 UNIT/ML IJ SOLN	59676-310-01	J0885	\$477.35	\$467.80	\$472.58	\$440.59	\$467.80
Inpatient/Outpatient	EPOETIN ALFA 10000 UNIT/ML IJ SOLN	59676-310-00	J0885	\$449.89	\$440.89	\$445.39	\$415.25	\$440.89
Inpatient/Outpatient	EPOETIN ALFA 2000 UNIT/ML IJ SOLN (NICU/INFANT)	59676-302-01	J0885	\$249.50	\$244.51	\$247.01	\$230.29	\$244.51
Inpatient/Outpatient	EPOETIN ALFA 2000 UNIT/ML IJ SOLN (NICU/INFANT)	59676-302-02	J0885	\$171.76	\$168.32	\$170.04	\$158.53	\$168.32
Inpatient/Outpatient	ESMOLOL HCL 100 MG/10ML IV SOLN	0641-2965-45		\$1.41	\$1.38	\$1.40	\$1.30	\$1.38
Inpatient/Outpatient	ESMOLOL HCL 100 MG/10ML IV SOLN	10019-115-01		\$9.68	\$9.49	\$9.58	\$8.93	\$9.49
Inpatient/Outpatient	ESMOLOL HCL 100 MG/10ML IV SOLN	55390-062-10		\$2.53	\$2.48	\$2.50	\$2.34	\$2.48
Inpatient/Outpatient	ESMOLOL HCL 100 MG/10ML IV SOLN	10019-115-39		\$9.32	\$9.13	\$9.23	\$8.60	\$9.13
Inpatient/Outpatient	ESMOLOL HCL 100 MG/10ML IV SOLN	0641-2965-41		\$1.42	\$1.39	\$1.41	\$1.31	\$1.39
Inpatient/Outpatient	ESMOLOL HCL 100 MG/10ML IV SOLN	67457-182-00		\$1.18	\$1.16	\$1.17	\$1.09	\$1.16
Inpatient/Outpatient	ESMOLOL HCL 100 MG/10ML IV SOLN	55150-194-10		\$1.05	\$1.03	\$1.04	\$0.97	\$1.03
Inpatient/Outpatient	ESMOLOL HCL 100 MG/10ML IV SOLN	63323-652-10		\$1.21	\$1.19	\$1.20	\$1.12	\$1.19
Inpatient/Outpatient	ESMOLOL HCL 100 MG/10ML IV SOLN	10019-120-39		\$5.50	\$5.39	\$5.45	\$5.08	\$5.39
Inpatient/Outpatient	ESTRADIOL 1 MG PO TABS	0591-0487-01	A9270	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	ESTRADIOL 1 MG PO TABS	0555-0886-02	A9270	\$0.50	\$0.49	\$0.50	\$0.46	\$0.49
Inpatient/Outpatient	ESTROGENS CONJUGATED 25 MG IJ SOLR	0046-0749-05	J1410	\$1,080.05	\$1,058.45	\$1,069.25	\$996.89	\$1,058.45
Inpatient/Outpatient	ESTROGENS CONJUGATED 0.3 MG PO TABS	0046-1100-81	A9270	\$28.88	\$28.30	\$28.59	\$26.66	\$28.30
Inpatient/Outpatient	ESTROGENS CONJUGATED 0.625 MG PO TABS	0046-1102-81	A9270	\$28.88	\$28.30	\$28.59	\$26.66	\$28.30
Inpatient/Outpatient	MAGIC MOUTHWASH (LH RX IP CMPD) DIPHENHYDRAMINE/LIDOCAINE/MYLANTA/NYSTATIN	99999-4089-5	A9270	\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	ESTROGENS CONJUGATED 0.625 MG/GM VA CREA	0046-0872-93	A9270	\$12.38	\$12.13	\$12.26	\$11.43	\$12.13
Inpatient/Outpatient	ESTROGENS CONJUGATED 0.625 MG/GM VA CREA	0046-0872-21	A9270	\$62.74	\$61.49	\$62.11	\$57.91	\$61.49
Inpatient/Outpatient	ETHACRYNATE SODIUM 50 MG IV SOLR	25010-210-27		\$9,572.78	\$9,381.32	\$9,477.05	\$8,835.68	\$9,381.32
Inpatient/Outpatient	ETHACRYNATE SODIUM 50 MG IV SOLR	42023-157-01		\$4,345.43	\$4,258.52	\$4,301.98	\$4,010.83	\$4,258.52
Inpatient/Outpatient	ETHACRYNATE SODIUM 50 MG IV SOLR	42023-157-89		\$2,694.75	\$2,640.86	\$2,667.80	\$2,487.25	\$2,640.86
Inpatient/Outpatient	ETHACRYNATE SODIUM 50 MG IV SOLR	67457-297-50		\$2,744.06	\$2,689.18	\$2,716.62	\$2,532.77	\$2,689.18
Inpatient/Outpatient	ETHACRYNIC ACID 25 MG PO TABS	25010-205-15	A9270	\$18.49	\$18.12	\$18.31	\$17.07	\$18.12
Inpatient/Outpatient	ETHACRYNIC ACID 25 MG PO TABS	25010-215-15	A9270	\$111.03	\$108.81	\$109.92	\$102.48	\$108.81
Inpatient/Outpatient	ETHACRYNIC ACID 25 MG PO TABS	68682-011-10	A9270	\$40.73	\$39.92	\$40.32	\$37.59	\$39.92
Inpatient/Outpatient	ETHACRYNIC ACID 25 MG PO TABS	42799-405-01	A9270	\$34.94	\$34.24	\$34.59	\$32.25	\$34.24
Inpatient/Outpatient	ETHACRYNIC ACID 25 MG PO TABS	69238-1126-1	A9270	\$10.18	\$9.98	\$10.08	\$9.40	\$9.98
Inpatient/Outpatient	ETHAMBUTOL HCL 400 MG PO TABS	68850-012-02	A9270	\$2.31	\$2.26	\$2.29	\$2.13	\$2.26
Inpatient/Outpatient	ETHAMBUTOL HCL 400 MG PO TABS	0555-0923-02	A9270	\$6.25	\$6.13	\$6.19	\$5.77	\$6.13
Inpatient/Outpatient	ETHAMBUTOL HCL 400 MG PO TABS	68084-280-11	A9270	\$5.71	\$5.60	\$5.65	\$5.27	\$5.60
Inpatient/Outpatient	ETOPOSIDE 100 MG/5ML IV SOLN	55390-291-01	J9181	\$6.93	\$6.79	\$6.86	\$6.40	\$6.79
Inpatient/Outpatient	ETOPOSIDE 100 MG/5ML IV SOLN	0703-5653-01	J9181	\$8.48	\$8.31	\$8.40	\$7.83	\$8.31
Inpatient/Outpatient	ETOPOSIDE 100 MG/5ML IV SOLN	16729-114-31	J9181	\$4.37	\$4.28	\$4.33	\$4.03	\$4.28
Inpatient/Outpatient	ETOPOSIDE 100 MG/5ML IV SOLN	0143-9510-01	J9181	\$4.21	\$4.13	\$4.17	\$3.89	\$4.13
Inpatient/Outpatient	FAMOTIDINE (PF) 20 MG/2ML IV SOLN	0641-6022-01	J3490	\$2.21	\$2.17	\$2.19	\$2.04	\$2.17
Inpatient/Outpatient	FAMOTIDINE (PF) 20 MG/2ML IV SOLN	63323-739-16	J3490	\$1.58	\$1.55	\$1.56	\$1.46	\$1.55
Inpatient/Outpatient	FAMOTIDINE (PF) 20 MG/2ML IV SOLN	67457-433-00	J3490	\$2.60	\$2.55	\$2.57	\$2.40	\$2.55
Inpatient/Outpatient	FAMOTIDINE (PF) 20 MG/2ML IV SOLN	99999-738-20	J3490	\$0.88	\$0.86	\$0.87	\$0.81	\$0.86
Inpatient/Outpatient	FAMOTIDINE (PF) 20 MG/2ML IV SOLN	63323-739-12	J3490	\$1.58	\$1.55	\$1.56	\$1.46	\$1.55
Inpatient/Outpatient	FAMOTIDINE (PF) 20 MG/2ML IV SOLN	63323-739-11	J3490	\$1.58	\$1.55	\$1.56	\$1.46	\$1.55
Inpatient/Outpatient	FAMOTIDINE (PF) 20 MG/2ML IV SOLN	70860-751-02	J3490	\$15.07	\$14.77	\$14.92	\$13.91	\$14.77
Inpatient/Outpatient	FAMOTIDINE 40 MG/5ML PO SUSR	68180-150-01	A9270	\$2.53	\$2.48	\$2.50	\$2.34	\$2.48
Inpatient/Outpatient	FAMOTIDINE 40 MG/5ML PO SUSR	99999-211-05	A9270	\$2.53	\$2.48	\$2.50	\$2.34	\$2.48
Inpatient/Outpatient	FAMOTIDINE 40 MG/5ML PO SUSR	70954-316-10	A9270	\$2.59	\$2.54	\$2.56	\$2.39	\$2.54
Inpatient/Outpatient	FAMOTIDINE 40 MG/5ML PO SUSR	16714-244-01	A9270	\$4.34	\$4.25	\$4.30	\$4.01	\$4.25
Inpatient/Outpatient	FAMOTIDINE 20 MG PO TABS	51079-966-01	A9270	\$0.41	\$0.40	\$0.41	\$0.38	\$0.40
Inpatient/Outpatient	FAMOTIDINE 20 MG PO TABS	63739-325-10	A9270	\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	FAMOTIDINE 20 MG PO TABS	51079-966-20	A9270	\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	FAMOTIDINE 20 MG PO TABS	63739-484-10	A9270	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	FAMOTIDINE 20 MG PO TABS	16714-361-05	A9270	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	FAMOTIDINE 20 MG PO TABS	16714-361-06	A9270	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	FAMOTIDINE 20 MG PO TABS	68084-172-11	A9270	\$0.24	\$0.24	\$0.24	\$0.22	\$0.24

Inpatient/Outpatient	FAMOTIDINE 20 MG PO TABS	68084-172-01	A9270	\$0.22	\$0.22	\$0.22	\$0.20	\$0.22
Inpatient/Outpatient	FAMOTIDINE 20 MG PO TABS	0904-5553-61	A9270	\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	FAMOTIDINE 20 MG PO TABS	61442-121-01	A9270	\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	FAMOTIDINE 20 MG PO TABS	0172-5728-60	A9270	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	FAMOTIDINE 20 MG PO TABS	0378-3020-05	A9270	\$0.20	\$0.20	\$0.20	\$0.18	\$0.20
Inpatient/Outpatient	FAMOTIDINE 20 MG PO TABS	63739-645-10	A9270	\$0.44	\$0.43	\$0.44	\$0.41	\$0.43
Inpatient/Outpatient	FAMOTIDINE 20 MG PO TABS	61442-121-10	A9270	\$0.30	\$0.29	\$0.30	\$0.28	\$0.29
Inpatient/Outpatient	FAMOTIDINE 20 MG PO TABS	50268-303-11	A9270	\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	FAMOTIDINE 20 MG PO TABS	0172-5728-80	A9270	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	FAMOTIDINE 20 MG PO TABS	64679-936-02	A9270	\$0.47	\$0.46	\$0.47	\$0.43	\$0.46
Inpatient/Outpatient	FAMOTIDINE 20 MG PO TABS	65862-859-01	A9270	\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	FAMOTIDINE 20 MG PO TABS	60687-595-11	A9270	\$0.74	\$0.73	\$0.73	\$0.68	\$0.73
Inpatient/Outpatient	FAMOTIDINE 20 MG PO TABS	49348-817-09	A9270	\$0.50	\$0.49	\$0.50	\$0.46	\$0.49
Inpatient/Outpatient	FAT EMULSION PLANT BASED (SOY) 20 % IV EMUL	0338-0519-13		\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	FAT EMULSION PLANT BASED (SOY) 20 % IV EMUL	0338-0519-09		\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	HYDROMORPHONE HCL 0.5 MG/0.5 ML IJ SOLN	0409-1283-04	J1170	\$17.88	\$17.52	\$17.70	\$16.50	\$17.52
Inpatient/Outpatient	HYDROMORPHONE HCL 0.5 MG/0.5 ML IJ SOLN	76045-009-05	J1170	\$32.35	\$31.70	\$32.03	\$29.86	\$31.70
Inpatient/Outpatient	HYDROMORPHONE HCL 0.5 MG/0.5 ML IJ SOLN	76045-009-96	J1170	\$32.50	\$31.85	\$32.18	\$30.00	\$31.85
Inpatient/Outpatient	FILGRASTIM 300 MCG/ML IJ SOLN	55513-530-01	J1442	\$795.95	\$780.03	\$787.99	\$734.66	\$780.03
Inpatient/Outpatient	FILGRASTIM 300 MCG/ML IJ SOLN	55513-530-10	J1442	\$1,040.33	\$1,019.52	\$1,029.93	\$960.22	\$1,019.52
Inpatient/Outpatient	FINASTERIDE 5 MG PO TABS	16714-522-04	A9270	\$0.91	\$0.89	\$0.90	\$0.84	\$0.89
Inpatient/Outpatient	FINASTERIDE 5 MG PO TABS	50268-323-15	A9270	\$4.97	\$4.87	\$4.92	\$4.59	\$4.87
Inpatient/Outpatient	FINASTERIDE 5 MG PO TABS	16729-090-10	A9270	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	FINASTERIDE 5 MG PO TABS	51079-520-01	A9270	\$4.01	\$3.93	\$3.97	\$3.70	\$3.93
Inpatient/Outpatient	FINASTERIDE 5 MG PO TABS	51079-321-01	A9270	\$4.14	\$4.06	\$4.10	\$3.82	\$4.06
Inpatient/Outpatient	FINASTERIDE 5 MG PO TABS	50268-323-11	A9270	\$3.07	\$3.01	\$3.04	\$2.83	\$3.01
Inpatient/Outpatient	FINASTERIDE 5 MG PO TABS	16729-090-01	A9270	\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	FINASTERIDE 5 MG PO TABS	0904-6830-06	A9270	\$2.14	\$2.10	\$2.12	\$1.98	\$2.10
Inpatient/Outpatient	FINASTERIDE 5 MG PO TABS	60687-428-11	A9270	\$2.04	\$2.00	\$2.02	\$1.88	\$2.00
Inpatient/Outpatient	FINASTERIDE 5 MG PO TABS	50268-314-11	A9270	\$1.80	\$1.76	\$1.78	\$1.66	\$1.76
Inpatient/Outpatient	FLECAINIDE ACETATE 100 MG PO TABS	0054-0011-25	A9270	\$4.56	\$4.47	\$4.51	\$4.21	\$4.47
Inpatient/Outpatient	FLECAINIDE ACETATE 100 MG PO TABS	65162-642-10	A9270	\$4.25	\$4.17	\$4.21	\$3.92	\$4.17
Inpatient/Outpatient	FLECAINIDE ACETATE 100 MG PO TABS	43199-057-01	A9270	\$3.18	\$3.12	\$3.15	\$2.94	\$3.12
Inpatient/Outpatient	FLECAINIDE ACETATE 100 MG PO TABS	50268-321-11	A9270	\$2.82	\$2.76	\$2.79	\$2.60	\$2.76
Inpatient/Outpatient	FLECAINIDE ACETATE 50 MG PO TABS	65162-641-10	A9270	\$2.60	\$2.55	\$2.57	\$2.40	\$2.55
Inpatient/Outpatient	FLECAINIDE ACETATE 50 MG PO TABS	0054-0010-25	A9270	\$2.79	\$2.73	\$2.76	\$2.58	\$2.73
Inpatient/Outpatient	FLECAINIDE ACETATE 50 MG PO TABS	43199-056-01	A9270	\$1.94	\$1.90	\$1.92	\$1.79	\$1.90
Inpatient/Outpatient	FLECAINIDE ACETATE 50 MG PO TABS	53746-641-01	A9270	\$1.12	\$1.10	\$1.11	\$1.03	\$1.10
Inpatient/Outpatient	FLECAINIDE ACETATE 50 MG PO TABS	0054-0010-20	A9270	\$2.12	\$2.08	\$2.10	\$1.96	\$2.08
Inpatient/Outpatient	FLUCONAZOLE 100 MG PO TABS	0172-5411-00	A9270	\$0.53	\$0.52	\$0.52	\$0.49	\$0.52
Inpatient/Outpatient	FLUCONAZOLE 100 MG PO TABS	68462-102-30	A9270	\$3.09	\$3.03	\$3.06	\$2.85	\$3.03
Inpatient/Outpatient	FLUCONAZOLE 100 MG PO TABS	0172-5411-10	A9270	\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	FLUCONAZOLE 100 MG PO TABS	0904-6500-61	A9270	\$4.64	\$4.55	\$4.59	\$4.28	\$4.55
Inpatient/Outpatient	FLUCONAZOLE 100 MG PO TABS	16714-691-01	A9270	\$1.74	\$1.71	\$1.72	\$1.61	\$1.71
Inpatient/Outpatient	FLUCONAZOLE 200 MG PO TABS	0172-5413-10	A9270	\$0.76	\$0.74	\$0.75	\$0.70	\$0.74
Inpatient/Outpatient	FLUCONAZOLE 200 MG PO TABS	0172-5413-00	A9270	\$0.76	\$0.74	\$0.75	\$0.70	\$0.74
Inpatient/Outpatient	FLUCONAZOLE 200 MG PO TABS	68462-104-30	A9270	\$5.06	\$4.96	\$5.01	\$4.67	\$4.96
Inpatient/Outpatient	FLUCONAZOLE 200 MG PO TABS	16714-693-01	A9270	\$2.69	\$2.64	\$2.66	\$2.48	\$2.64
Inpatient/Outpatient	FLUCONAZOLE 200 MG PO TABS	0904-6501-61	A9270	\$6.80	\$6.66	\$6.73	\$6.28	\$6.66
Inpatient/Outpatient	FLUCONAZOLE 200 MG PO TABS	50268-339-11	A9270	\$5.46	\$5.35	\$5.41	\$5.04	\$5.35
Inpatient/Outpatient	FLUCONAZOLE 50 MG PO TABS	0172-5410-46	A9270	\$5.09	\$4.99	\$5.04	\$4.70	\$4.99
Inpatient/Outpatient	FLUCONAZOLE 50 MG PO TABS	68462-101-30	A9270	\$0.42	\$0.41	\$0.42	\$0.39	\$0.41
Inpatient/Outpatient	FLUCONAZOLE 50 MG PO TABS	16714-694-01	A9270	\$1.29	\$1.26	\$1.28	\$1.19	\$1.26
Inpatient/Outpatient	FLUCONAZOLE IN SODIUM CHLORIDE 200-0.9 MG/100ML-% IV SOLN	55390-012-01	J1450	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	FLUCONAZOLE IN SODIUM CHLORIDE 200-0.9 MG/100ML-% IV SOLN	0338-6046-48	J1450	\$0.21	\$0.21	\$0.21	\$0.19	\$0.21
Inpatient/Outpatient	FLUCONAZOLE IN SODIUM CHLORIDE 200-0.9 MG/100ML-% IV SOLN	25021-113-82	J1450	\$0.44	\$0.43	\$0.44	\$0.41	\$0.43
Inpatient/Outpatient	FLUCONAZOLE IN SODIUM CHLORIDE 200-0.9 MG/100ML-% IV SOLN	25021-184-82	J1450	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	FLUCONAZOLE IN SODIUM CHLORIDE 200-0.9 MG/100ML-% IV SOLN	25021-184-66	J1450	\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	FLUCONAZOLE IN SODIUM CHLORIDE 200-0.9 MG/100ML-% IV SOLN	70655-002-06	J1450	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	FLUCONAZOLE IN SODIUM CHLORIDE 200-0.9 MG/100ML-% IV SOLN	0409-4688-22	J1450	\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	FLUCONAZOLE IN SODIUM CHLORIDE 400-0.9 MG/200ML-% IV SOLN	0338-6045-37	J1450	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	FLUCONAZOLE IN SODIUM CHLORIDE 400-0.9 MG/200ML-% IV SOLN	0409-4688-02	J1450	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	FLUCONAZOLE IN SODIUM CHLORIDE 400-0.9 MG/200ML-% IV SOLN	36000-003-10	J1450	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	FLUCONAZOLE IN SODIUM CHLORIDE 400-0.9 MG/200ML-% IV SOLN	0069-0045-02	J1450	\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	FLUCONAZOLE IN SODIUM CHLORIDE 400-0.9 MG/200ML-% IV SOLN	25021-184-87	J1450	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	FLUCONAZOLE IN SODIUM CHLORIDE 400-0.9 MG/200ML-% IV SOLN	70655-088-10	J1450	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	FLUCONAZOLE IN SODIUM CHLORIDE 400-0.9 MG/200ML-% IV SOLN	70655-088-06	J1450	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	FLUCONAZOLE IN SODIUM CHLORIDE 400-0.9 MG/200ML-% IV SOLN	0409-4688-16	J1450	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09

Inpatient/Outpatient	FLUCONAZOLE IN SODIUM CHLORIDE 400-0.9 MG/200ML-% IV SOLN	69784-003-06	J1450	\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	FLUCYTOSINE 250 MG PO CAPS	0187-3554-10	A9270	\$105.98	\$103.86	\$104.92	\$97.82	\$103.86
Inpatient/Outpatient	FLUCYTOSINE 250 MG PO CAPS	64980-179-01	A9270	\$254.10	\$249.02	\$251.56	\$234.53	\$249.02
Inpatient/Outpatient	FLUCYTOSINE 250 MG PO CAPS	42494-339-01	A9270	\$54.77	\$53.67	\$54.22	\$50.55	\$53.67
Inpatient/Outpatient	FLUCYTOSINE 250 MG PO CAPS	42794-009-08	A9270	\$135.55	\$132.84	\$134.19	\$125.11	\$132.84
Inpatient/Outpatient	FLUCYTOSINE 250 MG PO CAPS	0054-0427-25	A9270	\$50.95	\$49.93	\$50.44	\$47.03	\$49.93
Inpatient/Outpatient	FLUCYTOSINE 250 MG PO CAPS	42494-339-03	A9270	\$54.77	\$53.67	\$54.22	\$50.55	\$53.67
Inpatient/Outpatient	ETONOGESTREL 68 MG SC IMPL	78206-145-01	J7307	\$2,112.81	\$2,070.55	\$2,091.68	\$1,950.12	\$2,070.55
Inpatient/Outpatient	FLUDROCORTISONE ACETATE 0.1 MG PO TABS	0115-7033-01	A9270	\$2.12	\$2.08	\$2.10	\$1.96	\$2.08
Inpatient/Outpatient	FLUDROCORTISONE ACETATE 0.1 MG PO TABS	0555-0997-02	A9270	\$1.96	\$1.92	\$1.94	\$1.81	\$1.92
Inpatient/Outpatient	FLUDROCORTISONE ACETATE 0.1 MG PO TABS	68084-288-11	A9270	\$2.03	\$1.99	\$2.01	\$1.87	\$1.99
Inpatient/Outpatient	FLUDROCORTISONE ACETATE 0.1 MG PO TABS	50268-330-11	A9270	\$2.77	\$2.71	\$2.74	\$2.56	\$2.71
Inpatient/Outpatient	FLUMAZENIL 0.1 MG/ML IV SOLN (WRAP)	63323-424-05		\$2.98	\$2.92	\$2.95	\$2.75	\$2.92
Inpatient/Outpatient	FLUMAZENIL 0.1 MG/ML IV SOLN (WRAP)	0143-9784-01		\$6.32	\$6.19	\$6.26	\$5.83	\$6.19
Inpatient/Outpatient	FLUMAZENIL 0.1 MG/ML IV SOLN (WRAP)	67457-447-00		\$2.22	\$2.18	\$2.20	\$2.05	\$2.18
Inpatient/Outpatient	FLUMAZENIL 0.1 MG/ML IV SOLN (WRAP)	36000-148-01		\$2.55	\$2.50	\$2.52	\$2.35	\$2.50
Inpatient/Outpatient	FLUMAZENIL 0.1 MG/ML IV SOLN (WRAP)	0143-9783-01		\$6.32	\$6.19	\$6.26	\$5.83	\$6.19
Inpatient/Outpatient	FLUMAZENIL 0.1 MG/ML IV SOLN (WRAP)	63323-424-10		\$4.30	\$4.21	\$4.26	\$3.97	\$4.21
Inpatient/Outpatient	EPOETIN ALFA-EPBX 10000 UNIT/ML IJ SOLN	0069-1308-10	Q5106	\$447.59	\$438.64	\$443.11	\$413.13	\$438.64
Inpatient/Outpatient	EPOETIN ALFA-EPBX 10000 UNIT/ML IJ SOLN	0069-1308-01	Q5106	\$447.58	\$438.63	\$443.10	\$413.12	\$438.63
Inpatient/Outpatient	FLUORESCIN SODIUM 10 % IV SOLN	17478-253-10		\$24.12	\$23.64	\$23.88	\$22.26	\$23.64
Inpatient/Outpatient	FLUORESCIN-BENOXINATE 0.25-0.4 % OP SOLN	24208-732-05	A9270	\$38.28	\$37.51	\$37.90	\$35.33	\$37.51
Inpatient/Outpatient	FLUORESCIN-BENOXINATE 0.25-0.4 % OP SOLN	54799-508-05	A9270	\$33.28	\$32.61	\$32.95	\$30.72	\$32.61
Inpatient/Outpatient	FLUOROMETHOLONE ACETATE 0.1 % OP SUSP	0065-0096-05	A9270	\$81.68	\$80.05	\$80.86	\$75.39	\$80.05
Inpatient/Outpatient	FLUOXETINE HCL 10 MG PO CAPS	50111-647-01	A9270	\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	FLUOXETINE HCL 10 MG PO CAPS	0904-5784-61	A9270	\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	FLUOXETINE HCL 10 MG PO CAPS	65862-192-01	A9270	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	FLUOXETINE HCL 20 MG PO CAPS	50111-648-02	A9270	\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	FLUOXETINE HCL 20 MG PO CAPS	68084-605-11	A9270	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	FLUOXETINE HCL 20 MG PO CAPS	65862-193-99	A9270	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	FLUOXETINE HCL 20 MG PO CAPS	0904-5785-61	A9270	\$0.32	\$0.31	\$0.32	\$0.30	\$0.31
Inpatient/Outpatient	FLUOXETINE HCL 20 MG PO CAPS	50111-648-01	A9270	\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	FLURBIPROFEN SODIUM 0.03 % OP SOLN	69292-722-25	A9270	\$54.08	\$53.00	\$53.54	\$49.92	\$53.00
Inpatient/Outpatient	OXYCODONE HCL 20 MG PO TABS	42858-004-01	A9270	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	LEVONORGESTREL 20 MCG/DAY IU IUD	50419-423-01	J7298	\$3,251.47	\$3,186.44	\$3,218.96	\$3,001.11	\$3,186.44
Inpatient/Outpatient	DESMOPRESSIN ACETATE 0.2 MG PO TABS	68462-276-01	A9270	\$3.07	\$3.01	\$3.04	\$2.83	\$3.01
Inpatient/Outpatient	GANCICLOVIR SODIUM 500 MG IV SOLR	0004-6940-03	J1570	\$440.02	\$431.22	\$435.62	\$406.14	\$431.22
Inpatient/Outpatient	GANCICLOVIR SODIUM 500 MG IV SOLR	63323-315-94	J1570	\$185.59	\$181.88	\$183.73	\$171.30	\$181.88
Inpatient/Outpatient	EPOETIN ALFA-EPBX 4000 UNIT/ML IJ SOLN	0069-1307-01	Q5106	\$179.03	\$175.45	\$177.24	\$165.24	\$175.45
Inpatient/Outpatient	EPOETIN ALFA-EPBX 4000 UNIT/ML IJ SOLN	0069-1307-10	Q5106	\$179.03	\$175.45	\$177.24	\$165.24	\$175.45
Inpatient/Outpatient	OXIDIZED CELLULOSE (SURGICEL NU-KNIT) 6X9 INCH	63713-01946		\$915.65	\$897.34	\$906.49	\$845.14	\$897.34
Inpatient/Outpatient	GLIPIZIDE 5 MG PO TABS	51079-810-01	A9270	\$1.80	\$1.76	\$1.78	\$1.66	\$1.76
Inpatient/Outpatient	GLIPIZIDE 5 MG PO TABS	51079-810-20	A9270	\$0.97	\$0.95	\$0.96	\$0.90	\$0.95
Inpatient/Outpatient	GLIPIZIDE 5 MG PO TABS	0904-6637-61	A9270	\$1.06	\$1.04	\$1.05	\$0.98	\$1.04
Inpatient/Outpatient	GLYBURIDE 1.25 MG PO TABS	0093-8342-01	A9270	\$0.38	\$0.37	\$0.38	\$0.35	\$0.37
Inpatient/Outpatient	GLYBURIDE 2.5 MG PO TABS	51079-872-01	A9270	\$1.51	\$1.48	\$1.49	\$1.39	\$1.48
Inpatient/Outpatient	GLYBURIDE 2.5 MG PO TABS	51079-872-20	A9270	\$1.15	\$1.13	\$1.14	\$1.06	\$1.13
Inpatient/Outpatient	GLYBURIDE 2.5 MG PO TABS	0093-8343-01	A9270	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	GLYCOPYRROLATE 1 MG PO TABS	59630-200-10	A9270	\$27.29	\$26.74	\$27.02	\$25.19	\$26.74
Inpatient/Outpatient	GLYCOPYRROLATE 1 MG PO TABS	49884-065-01	A9270	\$1.73	\$1.70	\$1.71	\$1.60	\$1.70
Inpatient/Outpatient	GLYCOPYRROLATE 1 MG PO TABS	0677-1931-01	A9270	\$4.69	\$4.60	\$4.64	\$4.33	\$4.60
Inpatient/Outpatient	GLYCOPYRROLATE 1 MG PO TABS	55111-648-01	A9270	\$0.80	\$0.78	\$0.79	\$0.74	\$0.78
Inpatient/Outpatient	GLYCOPYRROLATE 1 MG PO TABS	0603-3180-21	A9270	\$1.76	\$1.72	\$1.74	\$1.62	\$1.72
Inpatient/Outpatient	GLYCOPYRROLATE 1 MG PO TABS	51079-700-01	A9270	\$2.79	\$2.73	\$2.76	\$2.58	\$2.73
Inpatient/Outpatient	GLYCOPYRROLATE 1 MG PO TABS	0904-6521-61	A9270	\$3.56	\$3.49	\$3.52	\$3.29	\$3.49
Inpatient/Outpatient	GLYCOPYRROLATE 1 MG PO TABS	60687-270-11	A9270	\$3.56	\$3.49	\$3.52	\$3.29	\$3.49
Inpatient/Outpatient	GLYCOPYRROLATE 1 MG PO TABS	13107-014-01	A9270	\$0.78	\$0.76	\$0.77	\$0.72	\$0.76
Inpatient/Outpatient	GLYCOPYRROLATE 1 MG PO TABS	60687-458-11	A9270	\$3.74	\$3.67	\$3.70	\$3.45	\$3.67
Inpatient/Outpatient	GLYCOPYRROLATE 1 MG PO TABS	0904-6709-61	A9270	\$3.42	\$3.35	\$3.39	\$3.16	\$3.35
Inpatient/Outpatient	GUAIFENESIN 200 MG PO TABS	0603-4886-21	A9270	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	GUAIFENESIN 200 MG PO TABS	0904-5154-60	A9270	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	HALOBETASOL PROPIONATE 0.05 % EX CREA	0713-0640-15	A9270	\$20.63	\$20.22	\$20.42	\$19.04	\$20.22
Inpatient/Outpatient	HALOBETASOL PROPIONATE 0.05 % EX CREA	45802-129-35	A9270	\$2.42	\$2.37	\$2.40	\$2.23	\$2.37
Inpatient/Outpatient	HALOBETASOL PROPIONATE 0.05 % EX CREA	0168-0355-15	A9270	\$20.63	\$20.22	\$20.42	\$19.04	\$20.22
Inpatient/Outpatient	HALOBETASOL PROPIONATE 0.05 % EX OINT	45802-131-35	A9270	\$8.66	\$8.49	\$8.57	\$7.99	\$8.49
Inpatient/Outpatient	HALOBETASOL PROPIONATE 0.05 % EX OINT	51672-1322-1	A9270	\$15.81	\$15.49	\$15.65	\$14.59	\$15.49
Inpatient/Outpatient	HALOBETASOL PROPIONATE 0.05 % EX OINT	0713-0339-15	A9270	\$8.05	\$7.89	\$7.97	\$7.43	\$7.89
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 1000 UNIT/ML IJ SOLN	63323-540-01	J1644	\$8.32	\$8.15	\$8.24	\$7.68	\$8.15

Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 1000 UNIT/ML IJ SOLN	63323-540-11	J1644	\$1.48	\$1.45	\$1.47	\$1.37	\$1.45
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 1000 UNIT/ML IJ SOLN	63323-540-31	J1644	\$0.96	\$0.94	\$0.95	\$0.89	\$0.94
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 1000 UNIT/ML IJ SOLN	25021-400-01	J1644	\$4.11	\$4.03	\$4.07	\$3.79	\$4.03
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 1000 UNIT/ML IJ SOLN	0409-2720-03	J1644	\$0.61	\$0.60	\$0.60	\$0.56	\$0.60
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 1000 UNIT/ML IJ SOLN	63739-942-15	J1644	\$0.65	\$0.64	\$0.64	\$0.60	\$0.64
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 1000 UNIT/ML IJ SOLN	0409-2720-32	J1644	\$0.49	\$0.48	\$0.49	\$0.45	\$0.48
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 1000 UNIT/ML IJ SOLN	0409-2720-30	J1644	\$2.99	\$2.93	\$2.96	\$2.76	\$2.93
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 1000 UNIT/ML IJ SOLN	67457-384-31	J1644	\$0.43	\$0.42	\$0.43	\$0.40	\$0.42
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 1000 UNIT/ML IJ SOLN	67457-372-12	J1644	\$3.04	\$2.98	\$3.01	\$2.81	\$2.98
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 1000 UNIT/ML IJ SOLN	63739-920-11	J1644	\$12.20	\$11.96	\$12.08	\$11.26	\$11.96
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 1000 UNIT/ML IJ SOLN	67457-948-01	J1644	\$10.91	\$10.69	\$10.80	\$10.07	\$10.69
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 1000 UNIT/ML IJ SOLN	67457-948-00	J1644	\$3.05	\$2.99	\$3.02	\$2.82	\$2.99
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 1000 UNIT/ML IJ SOLN	99999-540-10	J1644	\$1.48	\$1.45	\$1.47	\$1.37	\$1.45
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 1000 UNIT/ML IJ SOLN	0069-0137-03	J1644	\$0.94	\$0.92	\$0.93	\$0.87	\$0.92
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 1000 UNIT/ML IJ SOLN	71288-402-01	J1644	\$5.16	\$5.06	\$5.11	\$4.76	\$5.06
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 1000 UNIT/ML IJ SOLN	71288-402-30	J1644	\$5.16	\$5.06	\$5.11	\$4.76	\$5.06
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 1000 UNIT/ML IJ SOLN	71288-421-95	J1644	\$0.77	\$0.75	\$0.76	\$0.71	\$0.75
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 1000 UNIT/ML IJ SOLN	63323-540-36	J1644	\$0.80	\$0.78	\$0.79	\$0.74	\$0.78
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 1000 UNIT/ML IJ SOLN	63323-540-33	J1644	\$1.06	\$1.04	\$1.05	\$0.98	\$1.04
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 1000 UNIT/ML IJ SOLN	71288-419-95	J1644	\$5.16	\$5.06	\$5.11	\$4.76	\$5.06
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 1000 UNIT/ML IJ SOLN	25021-400-30	J1644	\$1.03	\$1.01	\$1.02	\$0.95	\$1.01
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 10000 UNIT/ML IJ SOLN	63323-542-01	J1644	\$15.16	\$14.86	\$15.01	\$13.99	\$14.86
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 5000 UNIT/ML IJ SOLN	63323-047-10	J1644	\$3.65	\$3.58	\$3.61	\$3.37	\$3.58
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 5000 UNIT/ML IJ SOLN	63323-262-01	J1644	\$7.37	\$7.22	\$7.30	\$6.80	\$7.22
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 5000 UNIT/ML IJ SOLN	0409-2723-01	J1644	\$4.25	\$4.17	\$4.21	\$3.92	\$4.17
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 5000 UNIT/ML IJ SOLN	0069-0059-04	J1644	\$6.15	\$6.03	\$6.09	\$5.68	\$6.03
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 5000 UNIT/ML IJ SOLN	25021-402-01	J1644	\$12.64	\$12.39	\$12.51	\$11.67	\$12.39
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 5000 UNIT/ML IJ SOLN	25021-402-66	J1644	\$5.90	\$5.78	\$5.84	\$5.45	\$5.78
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 5000 UNIT/ML IJ SOLN	67457-374-12	J1644	\$3.17	\$3.11	\$3.14	\$2.93	\$3.11
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 5000 UNIT/ML IJ SOLN	0409-2723-30	J1644	\$3.91	\$3.83	\$3.87	\$3.61	\$3.83
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 5000 UNIT/ML IJ SOLN	67457-949-01	J1644	\$11.76	\$11.52	\$11.64	\$10.85	\$11.52
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 5000 UNIT/ML IJ SOLN	63739-953-11	J1644	\$16.38	\$16.05	\$16.22	\$15.12	\$16.05
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 5000 UNIT/ML IJ SOLN	0641-0400-37	J1644	\$4.25	\$4.17	\$4.21	\$3.92	\$4.17
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 5000 UNIT/ML IJ SOLN	71288-403-01	J1644	\$6.07	\$5.95	\$6.01	\$5.60	\$5.95
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 5000 UNIT/ML IJ SOLN	0641-0400-12	J1644	\$11.60	\$11.37	\$11.48	\$10.71	\$11.37
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 5000 UNIT/ML IJ SOLN	63323-262-06	J1644	\$5.88	\$5.76	\$5.82	\$5.43	\$5.76
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 5000 UNIT/ML IJ SOLN	63323-262-03	J1644	\$5.88	\$5.76	\$5.82	\$5.43	\$5.76
Inpatient/Outpatient	HYDROCORTISONE 5 MG PO TABS	0009-0012-01	A9270	\$4.55	\$4.46	\$4.50	\$4.20	\$4.46
Inpatient/Outpatient	HYDROCORTISONE 5 MG PO TABS	59762-0073-1	A9270	\$0.63	\$0.62	\$0.62	\$0.58	\$0.62
Inpatient/Outpatient	HYDROCORTISONE 5 MG PO TABS	99999-0031-5	A9270	\$3.78	\$3.70	\$3.74	\$3.49	\$3.70
Inpatient/Outpatient	HYDROCORTISONE 5 MG PO TABS	64380-970-25	A9270	\$1.54	\$1.51	\$1.52	\$1.42	\$1.51
Inpatient/Outpatient	HYDROCORTISONE 100 MG/60ML RE ENEM	0574-2020-07	A9270	\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	HYDROCORTISONE 100 MG/60ML RE ENEM	62559-138-07	A9270	\$1.61	\$1.58	\$1.59	\$1.49	\$1.58
Inpatient/Outpatient	HYDROCORTISONE 100 MG/60ML RE ENEM	62559-111-07	A9270	\$1.76	\$1.72	\$1.74	\$1.62	\$1.72
Inpatient/Outpatient	NALOXONE HCL 2 MG/2ML IJ SOSY	76329-3369-1	J2310	\$31.72	\$31.09	\$31.40	\$29.28	\$31.09
Inpatient/Outpatient	NALOXONE HCL 2 MG/2ML IJ SOSY	76329-3469-1	J2310	\$31.72	\$31.09	\$31.40	\$29.28	\$31.09
Inpatient/Outpatient	NALOXONE HCL 2 MG/2ML IJ SOSY	43598-750-11	J2310	\$39.54	\$38.75	\$39.14	\$36.50	\$38.75
Inpatient/Outpatient	HYDROMORPHONE HCL 3 MG RE SUPP	0574-7224-06	A9270	\$44.30	\$43.41	\$43.86	\$40.89	\$43.41
Inpatient/Outpatient	HYDROXYCHLOROQUINE SULFATE 200 MG PO TABS	0378-0373-01	A9270	\$1.60	\$1.57	\$1.58	\$1.48	\$1.57
Inpatient/Outpatient	HYDROXYCHLOROQUINE SULFATE 200 MG PO TABS	68084-269-11	A9270	\$1.37	\$1.34	\$1.36	\$1.26	\$1.34
Inpatient/Outpatient	HYDROXYCHLOROQUINE SULFATE 200 MG PO TABS	66993-057-02	A9270	\$4.32	\$4.23	\$4.28	\$3.99	\$4.23
Inpatient/Outpatient	HYDROXYCHLOROQUINE SULFATE 200 MG PO TABS	68382-096-01	A9270	\$7.95	\$7.79	\$7.87	\$7.34	\$7.79
Inpatient/Outpatient	HYDROXYCHLOROQUINE SULFATE 200 MG PO TABS	63304-296-01	A9270	\$2.46	\$2.41	\$2.44	\$2.27	\$2.41
Inpatient/Outpatient	HYDROXYCHLOROQUINE SULFATE 200 MG PO TABS	16714-753-01	A9270	\$5.34	\$5.23	\$5.29	\$4.93	\$5.23
Inpatient/Outpatient	HYDROXYCHLOROQUINE SULFATE 200 MG PO TABS	68382-096-05	A9270	\$1.39	\$1.36	\$1.38	\$1.28	\$1.36
Inpatient/Outpatient	HYDROXYCHLOROQUINE SULFATE 200 MG PO TABS	0781-5994-01	A9270	\$1.45	\$1.42	\$1.44	\$1.34	\$1.42
Inpatient/Outpatient	HYDROXYCHLOROQUINE SULFATE 200 MG PO TABS	16714-110-01	A9270	\$1.35	\$1.32	\$1.34	\$1.25	\$1.32
Inpatient/Outpatient	HYDROXYCHLOROQUINE SULFATE 200 MG PO TABS	69238-1544-1	A9270	\$0.84	\$0.82	\$0.83	\$0.78	\$0.82
Inpatient/Outpatient	HYDROXYCHLOROQUINE SULFATE 200 MG PO TABS	16571-687-01	A9270	\$0.90	\$0.88	\$0.89	\$0.83	\$0.88
Inpatient/Outpatient	HYDROXYUREA 500 MG PO CAPS	0003-0830-50	A9270	\$6.18	\$6.06	\$6.12	\$5.70	\$6.06
Inpatient/Outpatient	HYDROXYUREA 500 MG PO CAPS	49884-724-01	A9270	\$1.20	\$1.18	\$1.19	\$1.11	\$1.18
Inpatient/Outpatient	HYDROXYUREA 500 MG PO CAPS	0555-0882-02	A9270	\$2.82	\$2.76	\$2.79	\$2.60	\$2.76
Inpatient/Outpatient	HYDROXYUREA 500 MG PO CAPS	68084-284-11	A9270	\$3.08	\$3.02	\$3.05	\$2.84	\$3.02
Inpatient/Outpatient	MIDAZOLAM HCL 5 MG/ML NA SOLN (PEDS)	0409-2308-21	J2250	\$3.80	\$3.72	\$3.76	\$3.51	\$3.72
Inpatient/Outpatient	IBUPROFEN 100 MG/5ML PO SUSP	0904-5309-20	A9150	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	IBUPROFEN 100 MG/5ML PO SUSP	0904-5577-20	A9150	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	IBUPROFEN 100 MG/5ML PO SUSP	45802-952-43	A9150	\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	IBUPROFEN 100 MG/5ML PO SUSP	50383-584-16	A9150	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10

Inpatient/Outpatient	IBUPROFEN 100 MG/5ML PO SUSP	68094-503-59	A9150	\$0.48	\$0.47	\$0.48	\$0.44	\$0.47
Inpatient/Outpatient	IBUPROFEN 100 MG/5ML PO SUSP	0573-0290-30	A9150	\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	IBUPROFEN 100 MG/5ML PO SUSP	59651-032-47	A9150	\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	IBUPROFEN 100 MG/5ML PO SUSP	99999-577-20	A9150	\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	IFOSFAMIDE 1 G IV SOLR	63323-142-10	J9208	\$117.56	\$115.21	\$116.38	\$108.51	\$115.21
Inpatient/Outpatient	IFOSFAMIDE 1 G IV SOLR	10019-925-01	J9208	\$166.80	\$163.46	\$165.13	\$153.96	\$163.46
Inpatient/Outpatient	IFOSFAMIDE 3 G IV SOLR	10019-926-02	J9208	\$388.99	\$381.21	\$385.10	\$359.04	\$381.21
Inpatient/Outpatient	IFOSFAMIDE 3 G IV SOLR	0338-3993-01	J9208	\$474.97	\$465.47	\$470.22	\$438.40	\$465.47
Inpatient/Outpatient	IFOSFAMIDE 3 G IV SOLR	10019-926-16	J9208	\$424.96	\$416.46	\$420.71	\$392.24	\$416.46
Inpatient/Outpatient	OXIDIZED CELLULOSE (SURGICEL FIBRILLAR) 1X2 INCH	63713-01961		\$353.68	\$346.61	\$350.14	\$326.45	\$346.61
Inpatient/Outpatient	EPOETIN ALFA-EPBX 3000 UNIT/ML IJ SOLN	0069-1306-10	Q5106	\$134.28	\$131.59	\$132.94	\$123.94	\$131.59
Inpatient/Outpatient	EPOETIN ALFA-EPBX 3000 UNIT/ML IJ SOLN	0069-1306-01	Q5106	\$134.28	\$131.59	\$132.94	\$123.94	\$131.59
Inpatient/Outpatient	INDIGOTINDISULFONATE SODIUM 8 MG/ML IJ SOLN	0517-0375-10	A9270	\$2.97	\$2.91	\$2.94	\$2.74	\$2.91
Inpatient/Outpatient	INDIGOTINDISULFONATE SODIUM 8 MG/ML IJ SOLN	0517-0375-05	A9270	\$144.03	\$141.15	\$142.59	\$132.94	\$141.15
Inpatient/Outpatient	INDIGOTINDISULFONATE SODIUM 8 MG/ML IJ SOLN	0517-0375-01	A9270	\$144.03	\$141.15	\$142.59	\$132.94	\$141.15
Inpatient/Outpatient	INDOCYANINE GREEN 25 MG IV SOLR	17478-701-02		\$446.14	\$437.22	\$441.68	\$411.79	\$437.22
Inpatient/Outpatient	INDOCYANINE GREEN 25 MG IV SOLR	25431-424-01		\$323.02	\$316.56	\$319.79	\$298.15	\$316.56
Inpatient/Outpatient	INDOCYANINE GREEN 25 MG IV SOLR	17238-424-06		\$314.56	\$308.27	\$311.41	\$290.34	\$308.27
Inpatient/Outpatient	INDOCYANINE GREEN 25 MG IV SOLR	17238-424-25		\$316.08	\$309.76	\$312.92	\$291.74	\$309.76
Inpatient/Outpatient	INDOCYANINE GREEN 25 MG IV SOLR	70100-424-01		\$313.59	\$307.32	\$310.45	\$289.44	\$307.32
Inpatient/Outpatient	INDOMETHACIN SODIUM 1 MG IV SOLR	67386-511-51		\$1,736.58	\$1,701.85	\$1,719.21	\$1,602.86	\$1,701.85
Inpatient/Outpatient	INDOMETHACIN SODIUM 1 MG IV SOLR	0409-1113-01		\$628.74	\$622.05	\$628.39	\$585.87	\$622.05
Inpatient/Outpatient	INDOMETHACIN SODIUM 1 MG IV SOLR	63323-659-94		\$1,120.87	\$1,098.45	\$1,109.66	\$1,034.56	\$1,098.45
Inpatient/Outpatient	INDOMETHACIN SODIUM 1 MG IV SOLR	63323-659-03		\$1,120.87	\$1,098.45	\$1,109.66	\$1,034.56	\$1,098.45
Inpatient/Outpatient	INSULIN NPH (HUMAN) (ISOPHANE) 100 UNIT/ML SC SUSP	0169-1834-11	J1815	\$6.41	\$6.28	\$6.35	\$5.92	\$6.28
Inpatient/Outpatient	INSULIN NPH (HUMAN) (ISOPHANE) 100 UNIT/ML SC SUSP	0002-8315-17	J1815	\$7.29	\$7.14	\$7.22	\$6.73	\$7.14
Inpatient/Outpatient	INSULIN NPH ISOPHANE & REGULAR (70-30) 100 UNIT/ML SC SUPN	0002-8770-01	J1815	\$17.26	\$16.91	\$17.09	\$15.93	\$16.91
Inpatient/Outpatient	DARUNAVIR 600 MG PO TABS	59676-562-01	A9270	\$157.69	\$154.54	\$156.11	\$145.55	\$154.54
Inpatient/Outpatient	INSULIN REGULAR HUMAN 100 UNIT/ML IJ SOLN	0002-8215-17	J1815	\$7.29	\$7.14	\$7.22	\$6.73	\$7.14
Inpatient/Outpatient	INSULIN REGULAR HUMAN 100 UNIT/ML IJ SOLN	0002-8215-01	J1815	\$6.77	\$6.63	\$6.70	\$6.25	\$6.63
Inpatient/Outpatient	INSULIN REGULAR HUMAN 100 UNIT/ML IJ SOLN	0169-1833-11	J1815	\$7.07	\$6.93	\$7.00	\$6.53	\$6.93
Inpatient/Outpatient	OXIDIZED CELLULOSE (SURGICEL FIBRILLAR) 2X4 INCH	63713-01962		\$650.94	\$637.92	\$644.43	\$600.82	\$637.92
Inpatient/Outpatient	ISOSORBIDE MONONITRATE 20 MG PO TABS	0228-2620-11	A9270	\$0.36	\$0.35	\$0.36	\$0.33	\$0.35
Inpatient/Outpatient	ISOSULFAN BLUE 1 % SC SOLN	63261-250-21		\$465.99	\$456.67	\$461.33	\$430.11	\$456.67
Inpatient/Outpatient	ISOSULFAN BLUE 1 % SC SOLN	67457-220-00		\$611.70	\$599.47	\$605.58	\$564.60	\$599.47
Inpatient/Outpatient	EPOETIN ALFA-EPBX 2000 UNIT/ML IJ SOLN	0069-1305-10	Q5106	\$89.52	\$87.73	\$88.62	\$82.63	\$87.73
Inpatient/Outpatient	EPOETIN ALFA-EPBX 2000 UNIT/ML IJ SOLN	0069-1305-01	Q5106	\$89.47	\$87.68	\$88.58	\$82.58	\$87.68
Inpatient/Outpatient	ITRACONAZOLE 100 MG PO CAPS	0185-0550-30	A9270	\$32.03	\$31.39	\$31.71	\$29.56	\$31.39
Inpatient/Outpatient	ITRACONAZOLE 100 MG PO CAPS	10147-1700-3	A9270	\$36.07	\$35.35	\$35.71	\$33.29	\$35.35
Inpatient/Outpatient	ITRACONAZOLE 100 MG PO CAPS	10147-1700-7	A9270	\$20.61	\$20.20	\$20.40	\$19.02	\$20.20
Inpatient/Outpatient	ITRACONAZOLE 100 MG PO CAPS	16714-743-02	A9270	\$10.24	\$10.04	\$10.14	\$9.45	\$10.04
Inpatient/Outpatient	ITRACONAZOLE 100 MG PO CAPS	49884-239-11	A9270	\$5.95	\$5.83	\$5.89	\$5.49	\$5.83
Inpatient/Outpatient	KETOCONAZOLE 2 % EX CREA	51672-1298-1	A9270	\$5.24	\$5.14	\$5.19	\$4.84	\$5.14
Inpatient/Outpatient	KETOCONAZOLE 2 % EX CREA	0093-0840-15	A9270	\$1.24	\$1.22	\$1.23	\$1.14	\$1.22
Inpatient/Outpatient	KETOCONAZOLE 2 % EX CREA	0168-0099-15	A9270	\$4.30	\$4.21	\$4.26	\$3.97	\$4.21
Inpatient/Outpatient	KETOCONAZOLE 2 % EX CREA	16714-955-01	A9270	\$4.00	\$3.92	\$3.96	\$3.69	\$3.92
Inpatient/Outpatient	KETOCONAZOLE 200 MG PO TABS	60505-0092-0	A9270	\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	KETOCONAZOLE 200 MG PO TABS	0093-0900-01	A9270	\$0.75	\$0.74	\$0.74	\$0.69	\$0.74
Inpatient/Outpatient	KETOCONAZOLE 200 MG PO TABS	51672-4026-1	A9270	\$3.07	\$3.01	\$3.04	\$2.83	\$3.01
Inpatient/Outpatient	KETOCONAZOLE 200 MG PO TABS	64380-827-06	A9270	\$3.27	\$3.20	\$3.24	\$3.02	\$3.20
Inpatient/Outpatient	OXIDIZED CELLULOSE (SURGICEL FIBRILLAR) 4X4 INCH	63713-01963		\$590.58	\$578.77	\$584.67	\$545.11	\$578.77
Inpatient/Outpatient	LABELALOL HCL 5 MG/ML IV SOLN	0409-2267-54		\$0.82	\$0.80	\$0.81	\$0.76	\$0.80
Inpatient/Outpatient	LABELALOL HCL 5 MG/ML IV SOLN	0143-9622-01		\$0.42	\$0.41	\$0.42	\$0.39	\$0.41
Inpatient/Outpatient	LABELALOL HCL 5 MG/ML IV SOLN	47781-586-29		\$2.09	\$2.05	\$2.07	\$1.93	\$2.05
Inpatient/Outpatient	LABELALOL HCL 5 MG/ML IV SOLN	51991-934-98		\$0.63	\$0.62	\$0.62	\$0.58	\$0.62
Inpatient/Outpatient	LABELALOL HCL 5 MG/ML IV SOLN	47781-586-56		\$1.70	\$1.67	\$1.68	\$1.57	\$1.67
Inpatient/Outpatient	LABELALOL HCL 5 MG/ML IV SOLN	0143-9320-01		\$0.42	\$0.41	\$0.42	\$0.39	\$0.41
Inpatient/Outpatient	LABELALOL HCL 5 MG/ML IV SOLN	99999-2267-4		\$0.82	\$0.80	\$0.81	\$0.76	\$0.80
Inpatient/Outpatient	LABELALOL HCL 5 MG/ML IV SOLN	0409-2267-20		\$0.74	\$0.73	\$0.73	\$0.68	\$0.73
Inpatient/Outpatient	LABELALOL HCL 5 MG/ML IV SOLN	0409-2339-34		\$7.97	\$7.81	\$7.89	\$7.36	\$7.81
Inpatient/Outpatient	LABELALOL HCL 5 MG/ML IV SOLN	0143-9623-01		\$0.52	\$0.51	\$0.51	\$0.48	\$0.51
Inpatient/Outpatient	LABELALOL HCL 5 MG/ML IV SOLN	51991-935-98		\$0.63	\$0.62	\$0.62	\$0.58	\$0.62
Inpatient/Outpatient	LABELALOL HCL 5 MG/ML IV SOLN	69374-946-04		\$7.31	\$7.16	\$7.24	\$6.75	\$7.16
Inpatient/Outpatient	LABELALOL HCL 5 MG/ML IV SOLN	33216-7641-9		\$7.04	\$6.90	\$6.97	\$6.50	\$6.90
Inpatient/Outpatient	LABELALOL HCL 5 MG/ML IV SOLN	0409-2339-24		\$7.97	\$7.81	\$7.89	\$7.36	\$7.81
Inpatient/Outpatient	LABELALOL HCL 5 MG/ML IV SOLN	72266-103-01		\$0.53	\$0.52	\$0.52	\$0.49	\$0.52
Inpatient/Outpatient	LABELALOL HCL 5 MG/ML IV SOLN	72266-102-01		\$0.86	\$0.84	\$0.85	\$0.79	\$0.84
Inpatient/Outpatient	LABELALOL HCL 5 MG/ML IV SOLN	36000-322-01		\$3.96	\$3.88	\$3.92	\$3.66	\$3.88

Inpatient/Outpatient	LABELALOL HCL 5 MG/ML IV SOLN	36000-320-01		\$3.96	\$3.88	\$3.92	\$3.66	\$3.88
Inpatient/Outpatient	LABELALOL HCL 100 MG PO TABS	51079-928-01	A9270	\$0.66	\$0.65	\$0.65	\$0.61	\$0.65
Inpatient/Outpatient	LABELALOL HCL 100 MG PO TABS	60687-114-11	A9270	\$0.66	\$0.65	\$0.65	\$0.61	\$0.65
Inpatient/Outpatient	LABELALOL HCL 100 MG PO TABS	0904-5928-61	A9270	\$1.15	\$1.13	\$1.14	\$1.06	\$1.13
Inpatient/Outpatient	LABELALOL HCL 100 MG PO TABS	23155-723-01	A9270	\$1.39	\$1.36	\$1.38	\$1.28	\$1.36
Inpatient/Outpatient	LABELALOL HCL 100 MG PO TABS	68382-798-01	A9270	\$1.30	\$1.27	\$1.29	\$1.20	\$1.27
Inpatient/Outpatient	LABELALOL HCL 100 MG PO TABS	0185-0010-01	A9270	\$1.96	\$1.92	\$1.94	\$1.81	\$1.92
Inpatient/Outpatient	LABELALOL HCL 100 MG PO TABS	58657-602-01	A9270	\$1.99	\$1.95	\$1.97	\$1.84	\$1.95
Inpatient/Outpatient	LABELALOL HCL 100 MG PO TABS	71247-126-01	A9270	\$1.59	\$1.56	\$1.57	\$1.47	\$1.56
Inpatient/Outpatient	LABELALOL HCL 100 MG PO TABS	0904-7109-61	A9270	\$1.08	\$1.06	\$1.07	\$1.00	\$1.06
Inpatient/Outpatient	LABELALOL HCL 200 MG PO TABS	51079-929-20	A9270	\$3.09	\$3.03	\$3.06	\$2.85	\$3.03
Inpatient/Outpatient	LABELALOL HCL 200 MG PO TABS	51079-929-01	A9270	\$1.10	\$1.08	\$1.09	\$1.02	\$1.08
Inpatient/Outpatient	LABELALOL HCL 200 MG PO TABS	63739-366-10	A9270	\$1.43	\$1.40	\$1.42	\$1.32	\$1.40
Inpatient/Outpatient	LABELALOL HCL 200 MG PO TABS	68084-456-11	A9270	\$1.77	\$1.73	\$1.75	\$1.63	\$1.73
Inpatient/Outpatient	LABELALOL HCL 200 MG PO TABS	60687-125-11	A9270	\$1.68	\$1.65	\$1.66	\$1.55	\$1.65
Inpatient/Outpatient	LABELALOL HCL 200 MG PO TABS	0904-5929-61	A9270	\$1.38	\$1.35	\$1.37	\$1.27	\$1.35
Inpatient/Outpatient	LABELALOL HCL 200 MG PO TABS	49884-123-01	A9270	\$0.86	\$0.84	\$0.85	\$0.79	\$0.84
Inpatient/Outpatient	LABELALOL HCL 200 MG PO TABS	23155-724-01	A9270	\$1.98	\$1.94	\$1.96	\$1.83	\$1.94
Inpatient/Outpatient	LABELALOL HCL 200 MG PO TABS	68382-799-01	A9270	\$1.53	\$1.50	\$1.51	\$1.41	\$1.50
Inpatient/Outpatient	LABELALOL HCL 200 MG PO TABS	71247-127-01	A9270	\$1.05	\$1.03	\$1.04	\$0.97	\$1.03
Inpatient/Outpatient	LABELALOL HCL 200 MG PO TABS	63629-2214-1	A9270	\$0.73	\$0.72	\$0.72	\$0.67	\$0.72
Inpatient/Outpatient	LABELALOL HCL 200 MG PO TABS	0904-7110-61	A9270	\$1.38	\$1.35	\$1.37	\$1.27	\$1.35
Inpatient/Outpatient	AMMONIUM LACTATE 12 % EX LOTN	0245-0023-22	A9270	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	AMMONIUM LACTATE 12 % EX LOTN	0574-2021-08	A9270	\$0.43	\$0.42	\$0.43	\$0.40	\$0.42
Inpatient/Outpatient	AMMONIUM LACTATE 12 % EX LOTN	0245-0023-89	A9270	\$2.38	\$2.33	\$2.36	\$2.20	\$2.33
Inpatient/Outpatient	AMMONIUM LACTATE 12 % EX LOTN	45802-52555	A9270	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	AMMONIUM LACTATE 12 % EX LOTN	92771-61208	A9270	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	AMMONIUM LACTATE 12 % EX LOTN	0904-5984-26	A9270	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	AMMONIUM LACTATE 12 % EX LOTN	63044-484-09	A9270	\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	DEXMEDETOMIDINE INFUSION 4 MCG/ML IN NS (STANDARD CONC) PREMIX	99999-3297-1		\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	DEXMEDETOMIDINE INFUSION 4 MCG/ML IN NS (STANDARD CONC) PREMIX	0781-3495-46		\$1.09	\$1.07	\$1.08	\$1.01	\$1.07
Inpatient/Outpatient	DEXMEDETOMIDINE INFUSION 4 MCG/ML IN NS (STANDARD CONC) PREMIX	0338-9557-12		\$1.15	\$1.13	\$1.14	\$1.06	\$1.13
Inpatient/Outpatient	DEXMEDETOMIDINE INFUSION 4 MCG/ML IN NS (STANDARD CONC) PREMIX	0143-9525-01		\$1.30	\$1.27	\$1.29	\$1.20	\$1.27
Inpatient/Outpatient	DEXMEDETOMIDINE INFUSION 4 MCG/ML IN NS (STANDARD CONC) PREMIX	0143-9525-10		\$1.30	\$1.27	\$1.29	\$1.20	\$1.27
Inpatient/Outpatient	DEXMEDETOMIDINE INFUSION 4 MCG/ML IN NS (STANDARD CONC) PREMIX	0409-1660-35		\$0.82	\$0.80	\$0.81	\$0.76	\$0.80
Inpatient/Outpatient	LORAZEPAM 2 MG/ML IJ SOLN (NICU/INFANT)(DOSES => 0.2 MG)	0409-6778-02	J2060	\$3.98	\$3.90	\$3.94	\$3.67	\$3.90
Inpatient/Outpatient	LORAZEPAM 2 MG/ML IJ SOLN (NICU/INFANT)(DOSES => 0.2 MG)	0409-6778-15	J2060	\$3.98	\$3.90	\$3.94	\$3.67	\$3.90
Inpatient/Outpatient	LORAZEPAM 2 MG/ML IJ SOLN (NICU/INFANT)(DOSES => 0.2 MG)	0641-6046-10	J2060	\$4.34	\$4.25	\$4.30	\$4.01	\$4.25
Inpatient/Outpatient	LORAZEPAM 2 MG/ML IJ SOLN (NICU/INFANT)(DOSES => 0.2 MG)	0641-6207-01	J2060	\$2.22	\$2.18	\$2.20	\$2.05	\$2.18
Inpatient/Outpatient	LORAZEPAM 2 MG/ML IJ SOLN (NICU/INFANT)(DOSES => 0.2 MG)	17478-040-01	J2060	\$12.36	\$12.11	\$12.24	\$11.41	\$12.11
Inpatient/Outpatient	LORAZEPAM 2 MG/ML IJ SOLN (NICU/INFANT)(DOSES => 0.2 MG)	99999-6046-1	J2060	\$4.34	\$4.25	\$4.30	\$4.01	\$4.25
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 88 MCG PO TABS	0378-1807-01	A9270	\$0.78	\$0.76	\$0.77	\$0.72	\$0.76
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 88 MCG PO TABS	0527-1344-01	A9270	\$2.04	\$2.00	\$2.02	\$1.88	\$2.00
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 88 MCG PO TABS	0781-5183-92	A9270	\$1.38	\$1.35	\$1.37	\$1.27	\$1.35
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 88 MCG PO TABS	60793-853-01	A9270	\$4.01	\$3.93	\$3.97	\$3.70	\$3.93
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 88 MCG PO TABS	0378-1807-77	A9270	\$1.81	\$1.77	\$1.79	\$1.67	\$1.77
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 88 MCG PO TABS	68180-968-01	A9270	\$0.71	\$0.70	\$0.70	\$0.66	\$0.70
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 112 MCG PO TABS	0781-5185-92	A9270	\$1.75	\$1.72	\$1.73	\$1.62	\$1.72
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 112 MCG PO TABS	0378-1811-01	A9270	\$0.87	\$0.85	\$0.86	\$0.80	\$0.85
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 112 MCG PO TABS	0074-9296-90	A9270	\$6.47	\$6.34	\$6.41	\$5.97	\$6.34
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 112 MCG PO TABS	0378-1811-77	A9270	\$1.01	\$0.99	\$1.00	\$0.93	\$0.99
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 112 MCG PO TABS	68180-970-01	A9270	\$0.80	\$0.78	\$0.79	\$0.74	\$0.78
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 112 MCG PO TABS	68180-970-09	A9270	\$0.80	\$0.78	\$0.79	\$0.74	\$0.78
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 112 MCG PO TABS	16729-452-15	A9270	\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 112 MCG PO TABS	60687-508-11	A9270	\$2.09	\$2.05	\$2.07	\$1.93	\$2.05
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 137 MCG PO TABS	0378-1823-01	A9270	\$0.94	\$0.92	\$0.93	\$0.87	\$0.92
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 137 MCG PO TABS	0527-1638-01	A9270	\$2.44	\$2.39	\$2.42	\$2.25	\$2.39
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 137 MCG PO TABS	0074-3727-90	A9270	\$5.62	\$5.51	\$5.56	\$5.19	\$5.51
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 137 MCG PO TABS	0378-1823-77	A9270	\$2.16	\$2.12	\$2.14	\$1.99	\$2.12
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 137 MCG PO TABS	69238-1837-1	A9270	\$1.64	\$1.61	\$1.62	\$1.51	\$1.61
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 137 MCG PO TABS	68180-972-01	A9270	\$0.71	\$0.70	\$0.70	\$0.66	\$0.70
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 175 MCG PO TABS	0781-5188-92	A9270	\$2.56	\$2.51	\$2.53	\$2.36	\$2.51
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 175 MCG PO TABS	0527-1350-01	A9270	\$3.04	\$2.98	\$3.01	\$2.81	\$2.98
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 175 MCG PO TABS	42292-040-01	A9270	\$2.73	\$2.68	\$2.70	\$2.52	\$2.68
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 175 MCG PO TABS	0074-7070-90	A9270	\$6.46	\$6.33	\$6.40	\$5.96	\$6.33
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 175 MCG PO TABS	68180-974-01	A9270	\$1.13	\$1.11	\$1.12	\$1.04	\$1.11
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 175 MCG PO TABS	69238-1839-1	A9270	\$1.89	\$1.85	\$1.87	\$1.74	\$1.85
Inpatient/Outpatient	LIDOCAINE-EPINEPHRINE 0.5 %-1:20000 IJ SOLN	0409-3177-01		\$0.31	\$0.30	\$0.31	\$0.29	\$0.30

Inpatient/Outpatient	LIDOCAINE-EPINEPHRINE 2 %-1:100000 IJ SOLN	0409-3182-01	\$0.37	\$0.36	\$0.37	\$0.34	\$0.36
Inpatient/Outpatient	LIDOCAINE-EPINEPHRINE 2 %-1:100000 IJ SOLN	63323-483-57	\$0.32	\$0.31	\$0.32	\$0.30	\$0.31
Inpatient/Outpatient	LIDOCAINE-EPINEPHRINE 2 %-1:100000 IJ SOLN	63323-483-27	\$0.36	\$0.35	\$0.36	\$0.33	\$0.35
Inpatient/Outpatient	LIDOCAINE-EPINEPHRINE 2 %-1:100000 IJ SOLN	63323-483-03	\$0.36	\$0.35	\$0.36	\$0.33	\$0.35
Inpatient/Outpatient	LIDOCAINE-EPINEPHRINE 2 %-1:100000 IJ SOLN	0409-3182-11	\$0.39	\$0.38	\$0.39	\$0.36	\$0.38
Inpatient/Outpatient	LIDOCAINE-EPINEPHRINE 2 %-1:100000 IJ SOLN	63323-483-01	\$0.32	\$0.31	\$0.32	\$0.30	\$0.31
Inpatient/Outpatient	LIDOCAINE-PRILOCAINE 2.5-2.5 % EX CREA	0168-0357-55 A9270	\$3.31	\$3.24	\$3.28	\$3.06	\$3.24
Inpatient/Outpatient	LIDOCAINE-PRILOCAINE 2.5-2.5 % EX CREA	0168-0357-30 A9270	\$2.42	\$2.37	\$2.40	\$2.23	\$2.37
Inpatient/Outpatient	LIDOCAINE-PRILOCAINE 2.5-2.5 % EX CREA	0781-7058-39 A9270	\$7.81	\$7.65	\$7.73	\$7.21	\$7.65
Inpatient/Outpatient	LIDOCAINE-PRILOCAINE 2.5-2.5 % EX CREA	0115-1468-60 A9270	\$2.55	\$2.50	\$2.52	\$2.35	\$2.50
Inpatient/Outpatient	LIDOCAINE-PRILOCAINE 2.5-2.5 % EX CREA	0591-2070-72 A9270	\$4.07	\$3.99	\$4.03	\$3.76	\$3.99
Inpatient/Outpatient	LIDOCAINE-PRILOCAINE 2.5-2.5 % EX CREA	0591-2070-26 A9270	\$4.09	\$4.01	\$4.05	\$3.78	\$4.01
Inpatient/Outpatient	LIDOCAINE-PRILOCAINE 2.5-2.5 % EX CREA	0115-1468-53 A9270	\$2.55	\$2.50	\$2.52	\$2.35	\$2.50
Inpatient/Outpatient	LIDOCAINE-PRILOCAINE 2.5-2.5 % EX CREA	52565-007-07 A9270	\$4.81	\$4.71	\$4.76	\$4.44	\$4.71
Inpatient/Outpatient	LIDOCAINE-PRILOCAINE 2.5-2.5 % EX CREA	99999-667-05 A9270	\$4.40	\$4.31	\$4.36	\$4.06	\$4.31
Inpatient/Outpatient	LIOETHYRONINE SODIUM 5 MCG PO TABS	60793-115-01 A9270	\$8.70	\$8.53	\$8.61	\$8.03	\$8.53
Inpatient/Outpatient	LIOETHYRONINE SODIUM 5 MCG PO TABS	0574-0220-01 A9270	\$2.61	\$2.56	\$2.58	\$2.41	\$2.56
Inpatient/Outpatient	LIOETHYRONINE SODIUM 5 MCG PO TABS	42794-018-02 A9270	\$1.78	\$1.74	\$1.76	\$1.64	\$1.74
Inpatient/Outpatient	LIOETHYRONINE SODIUM 5 MCG PO TABS	51862-320-01 A9270	\$4.44	\$4.35	\$4.40	\$4.10	\$4.35
Inpatient/Outpatient	LIOETHYRONINE SODIUM 5 MCG PO TABS	59762-1206-1 A9270	\$3.24	\$3.18	\$3.21	\$2.99	\$3.18
Inpatient/Outpatient	LIOETHYRONINE SODIUM 5 MCG PO TABS	0093-2179-01 A9270	\$2.67	\$2.62	\$2.64	\$2.46	\$2.62
Inpatient/Outpatient	LIOETHYRONINE SODIUM 5 MCG PO TABS	62756-589-88 A9270	\$1.44	\$1.41	\$1.43	\$1.33	\$1.41
Inpatient/Outpatient	LISINAPRIL 10 MG PO TABS	60505-2685-1 A9270	\$0.53	\$0.52	\$0.52	\$0.49	\$0.52
Inpatient/Outpatient	LISINAPRIL 10 MG PO TABS	0172-3759-10 A9270	\$0.20	\$0.20	\$0.20	\$0.18	\$0.20
Inpatient/Outpatient	LISINAPRIL 10 MG PO TABS	63739-349-10 A9270	\$0.21	\$0.21	\$0.21	\$0.19	\$0.21
Inpatient/Outpatient	LISINAPRIL 10 MG PO TABS	0172-3759-00 A9270	\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	LISINAPRIL 10 MG PO TABS	0904-6485-61 A9270	\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	LISINAPRIL 10 MG PO TABS	43547-416-10 A9270	\$0.34	\$0.33	\$0.34	\$0.31	\$0.33
Inpatient/Outpatient	LISINAPRIL 10 MG PO TABS	43547-353-10 A9270	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	LISINAPRIL 10 MG PO TABS	0904-6798-61 A9270	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	LISINAPRIL 10 MG PO TABS	68180-980-01 A9270	\$0.22	\$0.22	\$0.22	\$0.20	\$0.22
Inpatient/Outpatient	LISINAPRIL 10 MG PO TABS	60687-325-11 A9270	\$0.50	\$0.49	\$0.50	\$0.46	\$0.49
Inpatient/Outpatient	LISINAPRIL 40 MG PO TABS	51079-984-20 A9270	\$0.59	\$0.58	\$0.58	\$0.54	\$0.58
Inpatient/Outpatient	LISINAPRIL 40 MG PO TABS	0904-5810-61 A9270	\$0.48	\$0.47	\$0.48	\$0.44	\$0.47
Inpatient/Outpatient	LISINAPRIL 40 MG PO TABS	51079-984-01 A9270	\$0.66	\$0.65	\$0.65	\$0.61	\$0.65
Inpatient/Outpatient	LISINAPRIL 40 MG PO TABS	68180-517-01 A9270	\$0.59	\$0.58	\$0.58	\$0.54	\$0.58
Inpatient/Outpatient	LISINAPRIL 40 MG PO TABS	0904-6487-61 A9270	\$0.54	\$0.53	\$0.53	\$0.50	\$0.53
Inpatient/Outpatient	LISINAPRIL 40 MG PO TABS	68084-199-11 A9270	\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	LISINAPRIL 40 MG PO TABS	43547-356-10 A9270	\$0.38	\$0.37	\$0.38	\$0.35	\$0.37
Inpatient/Outpatient	LISINAPRIL 40 MG PO TABS	0904-6800-61 A9270	\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	LISINAPRIL 5 MG PO TABS	0904-5811-61 A9270	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	LISINAPRIL 5 MG PO TABS	0172-3758-00 A9270	\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	LISINAPRIL 5 MG PO TABS	64679-928-01 A9270	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	LISINAPRIL 5 MG PO TABS	0378-2073-01 A9270	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	LISINAPRIL 5 MG PO TABS	51079-981-01 A9270	\$0.41	\$0.40	\$0.41	\$0.38	\$0.40
Inpatient/Outpatient	LISINAPRIL 5 MG PO TABS	68180-513-01 A9270	\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	LISINAPRIL 5 MG PO TABS	68084-196-11 A9270	\$0.42	\$0.41	\$0.42	\$0.39	\$0.41
Inpatient/Outpatient	LISINAPRIL 5 MG PO TABS	51079-981-56 A9270	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	LISINAPRIL 5 MG PO TABS	43547-352-10 A9270	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	LISINAPRIL 5 MG PO TABS	0904-6797-61 A9270	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	LITHIUM CARBONATE ER 300 MG PO TBCR	0054-0021-25 A9270	\$1.43	\$1.40	\$1.42	\$1.32	\$1.40
Inpatient/Outpatient	LITHIUM CARBONATE ER 300 MG PO TBCR	0378-1300-01 A9270	\$1.60	\$1.57	\$1.58	\$1.48	\$1.57
Inpatient/Outpatient	LITHIUM CARBONATE ER 300 MG PO TBCR	68462-223-01 A9270	\$0.59	\$0.58	\$0.58	\$0.54	\$0.58
Inpatient/Outpatient	LITHIUM CARBONATE ER 300 MG PO TBCR	51079-180-01 A9270	\$1.36	\$1.33	\$1.35	\$1.26	\$1.33
Inpatient/Outpatient	LITHIUM CARBONATE ER 450 MG PO TBCR	0054-0020-25 A9270	\$1.85	\$1.81	\$1.83	\$1.71	\$1.81
Inpatient/Outpatient	LITHIUM CARBONATE ER 450 MG PO TBCR	68084-548-11 A9270	\$2.12	\$2.08	\$2.10	\$1.96	\$2.08
Inpatient/Outpatient	LITHIUM CARBONATE ER 450 MG PO TBCR	51079-142-20 A9270	\$1.54	\$1.51	\$1.52	\$1.42	\$1.51
Inpatient/Outpatient	CEFAZOLIN SODIUM 500 MG IJ SOLR	0015-7338-12 J0690	\$15.70	\$15.39	\$15.54	\$14.49	\$15.39
Inpatient/Outpatient	CEFAZOLIN SODIUM 500 MG IJ SOLR	0781-3450-70 J0690	\$9.74	\$9.55	\$9.64	\$8.99	\$9.55
Inpatient/Outpatient	TOLVAPTAN 15 MG PO TABS	59148-020-50 A9270	\$1,765.00	\$1,729.70	\$1,747.35	\$1,629.10	\$1,729.70
Inpatient/Outpatient	LORAZEPAM 2 MG/ML IJ SOLN	0409-6778-02 J2060	\$3.98	\$3.90	\$3.94	\$3.67	\$3.90
Inpatient/Outpatient	LORAZEPAM 2 MG/ML IJ SOLN	17478-040-01 J2060	\$12.36	\$12.11	\$12.24	\$11.41	\$12.11
Inpatient/Outpatient	LORAZEPAM 2 MG/ML IJ SOLN	0641-6046-10 J2060	\$4.34	\$4.25	\$4.30	\$4.01	\$4.25
Inpatient/Outpatient	LORAZEPAM 2 MG/ML IJ SOLN	99999-6046-1 J2060	\$4.34	\$4.25	\$4.30	\$4.01	\$4.25
Inpatient/Outpatient	LORAZEPAM 2 MG/ML IJ SOLN	0641-6207-01 J2060	\$2.22	\$2.18	\$2.20	\$2.05	\$2.18
Inpatient/Outpatient	LORAZEPAM 2 MG/ML IJ SOLN	0409-6778-15 J2060	\$3.98	\$3.90	\$3.94	\$3.67	\$3.90
Inpatient/Outpatient	LORAZEPAM 2 MG/ML IJ SOLN	0409-6778-11 J2060	\$3.99	\$3.91	\$3.95	\$3.68	\$3.91
Inpatient/Outpatient	LORAZEPAM 2 MG/ML IJ SOLN	0641-6044-01 J2060	\$2.23	\$2.19	\$2.21	\$2.06	\$2.19

Inpatient/Outpatient	LORAZEPAM 2 MG/ML IJ SOLN	0641-6044-25	J2060		\$4.79	\$4.69	\$4.74	\$4.42	\$4.69
Inpatient/Outpatient	LORAZEPAM 2 MG/ML IJ SOLN	0409-1985-30	J2060		\$31.59	\$30.96	\$31.27	\$29.16	\$30.96
Inpatient/Outpatient	LORAZEPAM 2 MG/ML IJ SOLN	76329-8261-0	J2060		\$4.86	\$4.76	\$4.81	\$4.49	\$4.76
Inpatient/Outpatient	LORAZEPAM 2 MG/ML IJ SOLN	0641-6046-01	J2060		\$4.34	\$4.25	\$4.30	\$4.01	\$4.25
Inpatient/Outpatient	LORAZEPAM 4 MG/ML IJ SOLN	0409-6781-02	J2060		\$4.86	\$4.76	\$4.81	\$4.49	\$4.76
Inpatient/Outpatient	LORAZEPAM 4 MG/ML IJ SOLN	10019-103-10	J2060		\$2.62	\$2.57	\$2.59	\$2.42	\$2.57
Inpatient/Outpatient	LORAZEPAM 4 MG/ML IJ SOLN	0641-6045-01	J2060		\$4.19	\$4.11	\$4.15	\$3.87	\$4.11
Inpatient/Outpatient	LORAZEPAM 4 MG/ML IJ SOLN	0641-6002-01	J2060		\$4.19	\$4.11	\$4.15	\$3.87	\$4.11
Inpatient/Outpatient	LORAZEPAM 4 MG/ML IJ SOLN	0409-6779-11	J2060		\$7.67	\$7.52	\$7.59	\$7.08	\$7.52
Inpatient/Outpatient	LORAZEPAM 4 MG/ML IJ SOLN	0641-6047-01	J2060		\$2.70	\$2.65	\$2.67	\$2.49	\$2.65
Inpatient/Outpatient	TOLVAPTAN 30 MG PO TABS	59148-021-50	A9270		\$1,830.98	\$1,794.36	\$1,812.67	\$1,689.99	\$1,794.36
Inpatient/Outpatient	TOLVAPTAN 30 MG PO TABS	67877-636-02	A9270		\$1,052.02	\$1,030.98	\$1,041.50	\$971.01	\$1,030.98
Inpatient/Outpatient	MAGNESIUM OXIDE (MAG-OX) 400 MG PO TABS (WRAP)	0603-0209-22	A9150		\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	MAGNESIUM OXIDE (MAG-OX) 400 MG PO TABS (WRAP)	63739-354-10	A9150		\$0.29	\$0.28	\$0.29	\$0.27	\$0.28
Inpatient/Outpatient	MAGNESIUM OXIDE (MAG-OX) 400 MG PO TABS (WRAP)	68585-00641	A9150		\$0.48	\$0.47	\$0.48	\$0.44	\$0.47
Inpatient/Outpatient	MAGNESIUM OXIDE (MAG-OX) 400 MG PO TABS (WRAP)	0904-6609-61	A9150		\$0.20	\$0.20	\$0.20	\$0.18	\$0.20
Inpatient/Outpatient	MAGNESIUM OXIDE (MAG-OX) 400 MG PO TABS (WRAP)	60258-171-01	A9150		\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	MAGNESIUM OXIDE (MAG-OX) 400 MG PO TABS (WRAP)	10006-70028	A9150		\$0.20	\$0.20	\$0.20	\$0.18	\$0.20
Inpatient/Outpatient	MAGNESIUM OXIDE (MAG-OX) 400 MG PO TABS (WRAP)	64980-339-01	A9150		\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	MAGNESIUM OXIDE (MAG-OX) 400 MG PO TABS (WRAP)	64980-339-90	A9150		\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	MAGNESIUM OXIDE (MAG-OX) 400 MG PO TABS (WRAP)	10006-73038	A9150		\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	MAGNESIUM OXIDE (MAG-OX) 400 MG PO TABS (WRAP)	63739-058-02	A9150		\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	MEASLES, MUMPS & RUBELLA VAC IJ SOLR	0006-4681-00		90707	\$406.48	\$398.35	\$402.42	\$375.18	\$398.35
Inpatient/Outpatient	MEASLES, MUMPS & RUBELLA VAC IJ SOLR	0006-4681-01		90707	\$276.10	\$270.58	\$273.34	\$254.84	\$270.58
Inpatient/Outpatient	MELPHALAN 2 MG PO TABS	52609-0001-5	A9270		\$51.23	\$50.21	\$50.72	\$47.29	\$50.21
Inpatient/Outpatient	MELPHALAN 2 MG PO TABS	47781-200-50	A9270		\$37.78	\$37.02	\$37.40	\$34.87	\$37.02
Inpatient/Outpatient	MERCAPTOPURINE 50 MG PO TABS	0054-4581-27	A9270		\$5.54	\$5.43	\$5.48	\$5.11	\$5.43
Inpatient/Outpatient	MERCAPTOPURINE 50 MG PO TABS	0054-4581-11	A9270		\$3.84	\$3.76	\$3.80	\$3.54	\$3.76
Inpatient/Outpatient	MERCAPTOPURINE 50 MG PO TABS	69076-913-02	A9270		\$15.41	\$15.10	\$15.26	\$14.22	\$15.10
Inpatient/Outpatient	MESALAMINE ER 250 MG PO CPDR	54092-189-81	A9270		\$13.73	\$13.46	\$13.59	\$12.67	\$13.46
Inpatient/Outpatient	MESALAMINE 400 MG PO CPDR	0430-0753-27	A9270		\$13.40	\$13.13	\$13.27	\$12.37	\$13.13
Inpatient/Outpatient	MESALAMINE 400 MG PO CPDR	0023-5853-18	A9270		\$17.55	\$17.20	\$17.37	\$16.20	\$17.20
Inpatient/Outpatient	MESALAMINE 400 MG PO CPDR	59762-0117-1	A9270		\$8.54	\$8.37	\$8.45	\$7.88	\$8.37
Inpatient/Outpatient	MESALAMINE 400 MG PO CPDR	60687-556-33	A9270		\$15.83	\$15.51	\$15.67	\$14.61	\$15.51
Inpatient/Outpatient	MESALAMINE 4 G RE ENEM	45802-098-51	A9270		\$0.61	\$0.60	\$0.60	\$0.56	\$0.60
Inpatient/Outpatient	MESALAMINE 4 G RE ENEM	62559-420-07	A9270		\$0.98	\$0.96	\$0.97	\$0.90	\$0.96
Inpatient/Outpatient	MESNA 100 MG/ML IV SOLN	55390-045-01	J9209		\$22.85	\$22.39	\$22.62	\$21.09	\$22.39
Inpatient/Outpatient	MESNA 100 MG/ML IV SOLN	63323-733-10	J9209		\$32.22	\$31.58	\$31.90	\$29.74	\$31.58
Inpatient/Outpatient	MESNA 100 MG/ML IV SOLN	63323-733-11	J9209		\$30.00	\$29.40	\$29.70	\$27.69	\$29.40
Inpatient/Outpatient	MESNA 100 MG/ML IV SOLN	10019-953-62	J9209		\$14.98	\$14.68	\$14.83	\$13.83	\$14.68
Inpatient/Outpatient	MESNA 100 MG/ML IV SOLN	25021-201-10	J9209		\$3.69	\$3.62	\$3.65	\$3.41	\$3.62
Inpatient/Outpatient	METFORMIN HCL 500 MG PO TABS	60505-0190-1	A9270		\$0.43	\$0.42	\$0.43	\$0.40	\$0.42
Inpatient/Outpatient	METFORMIN HCL 500 MG PO TABS	62584-259-11	A9270		\$0.49	\$0.48	\$0.49	\$0.45	\$0.48
Inpatient/Outpatient	METFORMIN HCL 500 MG PO TABS	23155-102-01	A9270		\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	METFORMIN HCL 500 MG PO TABS	55154-3586-7	A9270		\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	METFORMIN HCL 500 MG PO TABS	0904-6689-61	A9270		\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	METFORMIN HCL 500 MG PO TABS	0904-7162-61	A9270		\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	METFORMIN HCL 500 MG PO TABS	65862-008-01	A9270		\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	OXAZEPAM 30 MG PO CAPS	0228-2073-10			\$8.52	\$8.35	\$8.43	\$7.86	\$8.35
Inpatient/Outpatient	OXAZEPAM 30 MG PO CAPS	62584-814-11			\$8.34	\$8.17	\$8.26	\$7.70	\$8.17
Inpatient/Outpatient	METHIMAZOLE 10 MG PO TABS	0185-0210-01	A9270		\$2.35	\$2.30	\$2.33	\$2.17	\$2.30
Inpatient/Outpatient	METHIMAZOLE 10 MG PO TABS	23155-071-01	A9270		\$0.64	\$0.63	\$0.63	\$0.59	\$0.63
Inpatient/Outpatient	METHIMAZOLE 10 MG PO TABS	51293-821-01	A9270		\$0.41	\$0.40	\$0.41	\$0.38	\$0.40
Inpatient/Outpatient	METHIMAZOLE 10 MG PO TABS	60687-370-11	A9270		\$2.33	\$2.28	\$2.31	\$2.15	\$2.28
Inpatient/Outpatient	METHIMAZOLE 5 MG PO TABS	0185-0205-01	A9270		\$1.36	\$1.33	\$1.35	\$1.26	\$1.33
Inpatient/Outpatient	METHIMAZOLE 5 MG PO TABS	49884-640-01	A9270		\$0.56	\$0.55	\$0.55	\$0.52	\$0.55
Inpatient/Outpatient	METHIMAZOLE 5 MG PO TABS	68084-275-11	A9270		\$1.24	\$1.22	\$1.23	\$1.14	\$1.22
Inpatient/Outpatient	METHIMAZOLE 5 MG PO TABS	60687-357-11	A9270		\$1.67	\$1.64	\$1.65	\$1.54	\$1.64
Inpatient/Outpatient	METHIMAZOLE 5 MG PO TABS	51293-820-01	A9270		\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	METHIMAZOLE 5 MG PO TABS	23155-070-01	A9270		\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	METHYLERGONOVINE MALEATE 0.2 MG/ML IJ SOLN	0517-0740-20	J2210		\$91.54	\$89.71	\$90.62	\$84.49	\$89.71
Inpatient/Outpatient	METHYLERGONOVINE MALEATE 0.2 MG/ML IJ SOLN	0078-0053-61	J2210		\$28.81	\$28.23	\$28.52	\$26.59	\$28.23
Inpatient/Outpatient	METHYLERGONOVINE MALEATE 0.2 MG/ML IJ SOLN	0517-0740-01	J2210		\$62.59	\$61.34	\$61.96	\$57.77	\$61.34
Inpatient/Outpatient	METHYLERGONOVINE MALEATE 0.2 MG/ML IJ SOLN	0078-0053-03	J2210		\$31.66	\$31.03	\$31.34	\$29.22	\$31.03
Inpatient/Outpatient	METHYLERGONOVINE MALEATE 0.2 MG/ML IJ SOLN	51991-144-99	J2210		\$48.54	\$47.57	\$48.05	\$44.80	\$47.57
Inpatient/Outpatient	METHYLERGONOVINE MALEATE 0.2 MG PO TABS	0078-0054-05	A9270		\$5.74	\$5.63	\$5.68	\$5.30	\$5.63
Inpatient/Outpatient	METHYLERGONOVINE MALEATE 0.2 MG PO TABS	43386-140-01	A9270		\$24.76	\$24.26	\$24.51	\$22.85	\$24.26
Inpatient/Outpatient	METHYLERGONOVINE MALEATE 0.2 MG PO TABS	43386-140-07	A9270		\$86.47	\$84.74	\$85.61	\$79.81	\$84.74

Inpatient/Outpatient	METHYLERGONOVINE MALEATE 0.2 MG PO TABS	27437-050-56	A9270	\$281.11	\$275.49	\$278.30	\$259.46	\$275.49
Inpatient/Outpatient	METHYLERGONOVINE MALEATE 0.2 MG PO TABS	27437-050-57	A9270	\$281.72	\$276.09	\$278.90	\$260.03	\$276.09
Inpatient/Outpatient	METHYLERGONOVINE MALEATE 0.2 MG PO TABS	43386-140-12	A9270	\$261.39	\$256.16	\$258.78	\$241.26	\$256.16
Inpatient/Outpatient	METHYLERGONOVINE MALEATE 0.2 MG PO TABS	43386-140-28	A9270	\$261.24	\$256.02	\$258.63	\$241.12	\$256.02
Inpatient/Outpatient	METHYLERGONOVINE MALEATE 0.2 MG PO TABS	69238-1605-8	A9270	\$73.71	\$72.24	\$72.97	\$68.03	\$72.24
Inpatient/Outpatient	METHYLERGONOVINE MALEATE 0.2 MG PO TABS	0093-3655-28	A9270	\$58.32	\$57.15	\$57.74	\$53.83	\$57.15
Inpatient/Outpatient	METHYLERGONOVINE MALEATE 0.2 MG PO TABS	0093-3655-22	A9270	\$90.29	\$88.48	\$89.39	\$83.34	\$88.48
Inpatient/Outpatient	METHYLERGONOVINE MALEATE 0.2 MG PO TABS	0054-0639-05	A9270	\$54.03	\$52.95	\$53.49	\$49.87	\$52.95
Inpatient/Outpatient	METHYLERGONOVINE MALEATE 0.2 MG PO TABS	69238-1605-2	A9270	\$57.66	\$56.51	\$57.08	\$53.22	\$56.51
Inpatient/Outpatient	RASBURICASE 7.5 MG IV SOLR	0024-5151-75	J2783	\$8,621.40	\$8,448.97	\$8,535.19	\$7,957.55	\$8,448.97
Inpatient/Outpatient	METHYLPREDNISOLONE SODIUM SUCC 1000 MG II SOLR	0009-0698-01	J2930	\$88.31	\$86.54	\$87.43	\$81.51	\$86.54
Inpatient/Outpatient	METHYLPREDNISOLONE SODIUM SUCC 1000 MG II SOLR	63323-265-30	J2930	\$53.90	\$52.82	\$53.36	\$49.75	\$52.82
Inpatient/Outpatient	METHYLPREDNISOLONE SODIUM SUCC 1000 MG II SOLR	0009-0018-20	J2930	\$206.11	\$201.99	\$204.05	\$190.24	\$201.99
Inpatient/Outpatient	METHYLPREDNISOLONE SODIUM SUCC 1000 MG II SOLR	25021-810-30	J2930	\$113.48	\$111.21	\$112.35	\$104.74	\$111.21
Inpatient/Outpatient	METHYLPREDNISOLONE SODIUM SUCC 1000 MG II SOLR	0009-0698-02	J2930	\$198.92	\$194.94	\$196.93	\$183.60	\$194.94
Inpatient/Outpatient	METHYLPREDNISOLONE SODIUM SUCC 1000 MG II SOLR	0143-9851-01	J2930	\$94.77	\$92.87	\$93.82	\$87.47	\$92.87
Inpatient/Outpatient	METHYLPREDNISOLONE SODIUM SUCC 125 MG II SOLR	0009-0047-25	J2930	\$11.86	\$11.62	\$11.74	\$10.95	\$11.62
Inpatient/Outpatient	METHYLPREDNISOLONE SODIUM SUCC 125 MG II SOLR	63323-258-03	J2930	\$52.68	\$51.63	\$52.15	\$48.62	\$51.63
Inpatient/Outpatient	METHYLPREDNISOLONE SODIUM SUCC 125 MG II SOLR	0009-0047-22	J2930	\$44.03	\$43.15	\$43.59	\$40.64	\$43.15
Inpatient/Outpatient	METHYLPREDNISOLONE SODIUM SUCC 125 MG II SOLR	0009-0047-03	J2930	\$34.99	\$34.29	\$34.64	\$32.30	\$34.29
Inpatient/Outpatient	METHYLPREDNISOLONE SODIUM SUCC 125 MG II SOLR	43598-129-25	J2930	\$11.76	\$11.52	\$11.64	\$10.85	\$11.52
Inpatient/Outpatient	METHYLPREDNISOLONE SODIUM SUCC 125 MG II SOLR	43598-129-01	J2930	\$11.76	\$11.52	\$11.64	\$10.85	\$11.52
Inpatient/Outpatient	METHYLPREDNISOLONE SODIUM SUCC 40 MG II SOLR	63323-255-03	J2920	\$27.56	\$27.01	\$27.28	\$25.44	\$27.01
Inpatient/Outpatient	METHYLPREDNISOLONE SODIUM SUCC 40 MG II SOLR	0009-0039-28	J2920	\$27.34	\$26.79	\$27.07	\$25.23	\$26.79
Inpatient/Outpatient	METHYLPREDNISOLONE SODIUM SUCC 40 MG II SOLR	0009-0039-30	J2920	\$7.63	\$7.48	\$7.55	\$7.04	\$7.48
Inpatient/Outpatient	METHYLPREDNISOLONE SODIUM SUCC 40 MG II SOLR	0009-0039-05	J2920	\$21.99	\$21.55	\$21.77	\$20.30	\$21.55
Inpatient/Outpatient	METHYLPREDNISOLONE SODIUM SUCC 40 MG II SOLR	43598-127-25	J2920	\$11.31	\$11.08	\$11.20	\$10.44	\$11.08
Inpatient/Outpatient	METHYLPREDNISOLONE SODIUM SUCC 40 MG II SOLR	43598-127-45	J2920	\$11.30	\$11.07	\$11.19	\$10.43	\$11.07
Inpatient/Outpatient	METOLAZONE 2.5 MG PO TABS	51079-023-20	A9270	\$9.91	\$9.71	\$9.81	\$9.15	\$9.71
Inpatient/Outpatient	METOLAZONE 2.5 MG PO TABS	51079-023-01	A9270	\$2.13	\$2.09	\$2.11	\$1.97	\$2.09
Inpatient/Outpatient	METOLAZONE 2.5 MG PO TABS	0527-2215-37	A9270	\$3.40	\$3.33	\$3.37	\$3.14	\$3.33
Inpatient/Outpatient	METOLAZONE 2.5 MG PO TABS	0185-5050-01	A9270	\$2.68	\$2.63	\$2.65	\$2.47	\$2.63
Inpatient/Outpatient	METOLAZONE 2.5 MG PO TABS	69292-562-01	A9270	\$2.46	\$2.41	\$2.44	\$2.27	\$2.41
Inpatient/Outpatient	METRONIDAZOLE 0.75 % VA GEL	0245-0860-70	A9270	\$2.75	\$2.70	\$2.72	\$2.54	\$2.70
Inpatient/Outpatient	METRONIDAZOLE 0.75 % VA GEL	45802-139-70	A9270	\$1.12	\$1.10	\$1.11	\$1.03	\$1.10
Inpatient/Outpatient	MEXILETINE HCL 150 MG PO CAPS	0093-8739-01	A9270	\$2.50	\$2.45	\$2.48	\$2.31	\$2.45
Inpatient/Outpatient	MEXILETINE HCL 150 MG PO CAPS	62559-820-01	A9270	\$2.32	\$2.27	\$2.30	\$2.14	\$2.27
Inpatient/Outpatient	MEXILETINE HCL 200 MG PO CAPS	0093-8740-01	A9270	\$3.44	\$3.37	\$3.41	\$3.18	\$3.37
Inpatient/Outpatient	MEXILETINE HCL 200 MG PO CAPS	62559-821-01	A9270	\$4.61	\$4.52	\$4.56	\$4.26	\$4.52
Inpatient/Outpatient	MEXILETINE HCL 250 MG PO CAPS	0093-8741-01	A9270	\$4.12	\$4.04	\$4.08	\$3.80	\$4.04
Inpatient/Outpatient	MICONAZOLE NITRATE 100 MG VA SUPP	0713-0197-57	A9150	\$2.17	\$2.13	\$2.15	\$2.00	\$2.13
Inpatient/Outpatient	MICONAZOLE NITRATE 100 MG VA SUPP	49348-833-61	A9150	\$5.17	\$5.12	\$5.12	\$4.77	\$5.07
Inpatient/Outpatient	MICONAZOLE NITRATE 100 MG VA SUPP	0472-1736-07	A9150	\$4.20	\$4.12	\$4.16	\$3.88	\$4.12
Inpatient/Outpatient	MICONAZOLE NITRATE 100 MG VA SUPP	61269-736-07	A9150	\$5.67	\$5.56	\$5.61	\$5.23	\$5.56
Inpatient/Outpatient	MICROFIBRILLAR COLL HEMOSTAT EX PADS	53276-1010-9		\$554.80	\$543.70	\$549.25	\$512.08	\$543.70
Inpatient/Outpatient	MIDAZOLAM HCL 1 MG/ML II SOLN (WRAP)	0409-2305-17	J2250	\$1.04	\$1.02	\$1.03	\$0.96	\$1.02
Inpatient/Outpatient	MIDAZOLAM HCL 1 MG/ML II SOLN (WRAP)	63323-411-18	J2250	\$2.76	\$2.70	\$2.73	\$2.55	\$2.70
Inpatient/Outpatient	MIDAZOLAM HCL 1 MG/ML II SOLN (WRAP)	63323-411-25	J2250	\$2.57	\$2.52	\$2.54	\$2.37	\$2.52
Inpatient/Outpatient	MIDAZOLAM HCL 1 MG/ML II SOLN (WRAP)	0409-2305-05	J2250	\$0.77	\$0.75	\$0.76	\$0.71	\$0.75
Inpatient/Outpatient	MIDAZOLAM HCL 1 MG/ML II SOLN (WRAP)	0641-6056-01	J2250	\$4.40	\$4.31	\$4.36	\$4.06	\$4.31
Inpatient/Outpatient	MIDAZOLAM HCL 1 MG/ML II SOLN (WRAP)	0409-2587-05	J2250	\$0.99	\$0.97	\$0.98	\$0.91	\$0.97
Inpatient/Outpatient	MIDAZOLAM HCL 1 MG/ML II SOLN (WRAP)	0409-2305-50	J2250	\$0.77	\$0.75	\$0.76	\$0.71	\$0.75
Inpatient/Outpatient	MIDAZOLAM HCL 1 MG/ML II SOLN (WRAP)	0409-2305-04	J2250	\$0.77	\$0.75	\$0.76	\$0.71	\$0.75
Inpatient/Outpatient	MIDAZOLAM HCL 1 MG/ML II SOLN (WRAP)	0409-2305-16	J2250	\$1.04	\$1.02	\$1.03	\$0.96	\$1.02
Inpatient/Outpatient	MIDAZOLAM HCL 1 MG/ML II SOLN (WRAP)	0641-6210-01	J2250	\$0.47	\$0.46	\$0.47	\$0.43	\$0.46
Inpatient/Outpatient	MIDAZOLAM HCL 1 MG/ML II SOLN (WRAP)	0409-2587-04	J2250	\$0.99	\$0.97	\$0.98	\$0.91	\$0.97
Inpatient/Outpatient	MIDAZOLAM HCL 1 MG/ML II SOLN (WRAP)	0641-6209-01	J2250	\$0.67	\$0.66	\$0.66	\$0.62	\$0.66
Inpatient/Outpatient	MIDAZOLAM HCL 1 MG/ML II SOLN (WRAP)	76045-001-20	J2250	\$3.57	\$3.50	\$3.53	\$3.30	\$3.50
Inpatient/Outpatient	MIDAZOLAM HCL 1 MG/ML II SOLN (WRAP)	0641-6057-01	J2250	\$0.67	\$0.66	\$0.66	\$0.62	\$0.66
Inpatient/Outpatient	MIDODRINE HCL 2.5 MG PO TABS	0378-1901-01	A9270	\$2.01	\$1.97	\$1.99	\$1.86	\$1.97
Inpatient/Outpatient	MIDODRINE HCL 2.5 MG PO TABS	0115-4211-01	A9270	\$2.19	\$2.15	\$2.17	\$2.02	\$2.15
Inpatient/Outpatient	MIDODRINE HCL 2.5 MG PO TABS	0185-0040-01	A9270	\$5.25	\$5.15	\$5.20	\$4.85	\$5.15
Inpatient/Outpatient	MIDODRINE HCL 2.5 MG PO TABS	50268-564-15	A9270	\$4.16	\$4.08	\$4.12	\$3.84	\$4.08
Inpatient/Outpatient	MIDODRINE HCL 2.5 MG PO TABS	60505-1320-1	A9270	\$0.62	\$0.61	\$0.61	\$0.57	\$0.61
Inpatient/Outpatient	MIDODRINE HCL 2.5 MG PO TABS	64980-433-01	A9270	\$1.46	\$1.43	\$1.45	\$1.35	\$1.43
Inpatient/Outpatient	MISOPROSTOL 100 MCG PO TABS	0025-1451-20	A9270	\$8.34	\$8.17	\$8.26	\$7.70	\$8.17
Inpatient/Outpatient	MISOPROSTOL 100 MCG PO TABS	0025-1451-34	A9270	\$16.72	\$16.39	\$16.55	\$15.43	\$16.39
Inpatient/Outpatient	MISOPROSTOL 100 MCG PO TABS	68084-040-11	A9270	\$4.98	\$4.88	\$4.93	\$4.60	\$4.88

Inpatient/Outpatient	MISOPROSTOL 100 MCG PO TABS	43386-160-06	A9270	\$1.91	\$1.87	\$1.89	\$1.76	\$1.87
Inpatient/Outpatient	MISOPROSTOL 200 MCG PO TABS	0025-1461-34	A9270	\$26.26	\$25.73	\$26.00	\$24.24	\$25.73
Inpatient/Outpatient	MISOPROSTOL 200 MCG PO TABS	43386-161-01	A9270	\$3.38	\$3.31	\$3.35	\$3.12	\$3.31
Inpatient/Outpatient	MISOPROSTOL 200 MCG PO TABS	68084-041-01	A9270	\$7.19	\$7.05	\$7.12	\$6.64	\$7.05
Inpatient/Outpatient	MISOPROSTOL 200 MCG PO TABS	68084-041-11	A9270	\$7.18	\$7.04	\$7.11	\$6.63	\$7.04
Inpatient/Outpatient	MISOPROSTOL 200 MCG PO TABS	59762-5008-1	A9270	\$3.69	\$3.62	\$3.65	\$3.41	\$3.62
Inpatient/Outpatient	MISOPROSTOL 200 MCG PO TABS	43386-161-06	A9270	\$3.28	\$3.21	\$3.25	\$3.03	\$3.21
Inpatient/Outpatient	MITOMYCIN 20 MG IV SOLR	67457-519-20	J9280	\$325.43	\$318.92	\$322.18	\$300.37	\$318.92
Inpatient/Outpatient	MITOMYCIN 40 MG IV SOLR	67457-520-40	J9280	\$809.30	\$793.11	\$801.21	\$746.98	\$793.11
Inpatient/Outpatient	MITOMYCIN 5 MG IV SOLR	16729-115-05	J9280	\$772.02	\$756.58	\$764.30	\$712.57	\$756.58
Inpatient/Outpatient	MITOMYCIN 5 MG IV SOLR	67457-518-05	J9280	\$251.31	\$246.28	\$248.80	\$231.96	\$246.28
Inpatient/Outpatient	EPINEPHRINE INFUSION 20 MCG/ML IN D5W 250 ML (STANDARD CONC) PREMIX	99999-159-25	J0171	\$1.29	\$1.26	\$1.28	\$1.19	\$1.26
Inpatient/Outpatient	MORPHINE SULFATE (CONCENTRATE) 10 MG/0.5ML PO SOLN	68094-754-58	J2270	\$20.36	\$19.95	\$20.16	\$18.79	\$19.95
Inpatient/Outpatient	MORPHINE SULFATE (CONCENTRATE) 10 MG/0.5ML PO SOLN	68094-754-01	J2270	\$7.86	\$7.70	\$7.78	\$7.25	\$7.70
Inpatient/Outpatient	MORPHINE SULFATE (CONCENTRATE) 10 MG/0.5ML PO SOLN	68094-045-01	J2270	\$21.24	\$20.82	\$21.03	\$19.60	\$20.82
Inpatient/Outpatient	MORPHINE SULFATE (CONCENTRATE) 10 MG/0.5ML PO SOLN	99999-0517-5	J2270	\$1.21	\$1.19	\$1.20	\$1.12	\$1.19
Inpatient/Outpatient	MORPHINE SULFATE (CONCENTRATE) 10 MG/0.5ML PO SOLN	0054-0517-44	J2270	\$1.21	\$1.19	\$1.20	\$1.12	\$1.19
Inpatient/Outpatient	MUPIROCIIN 2 % EX OINT	0093-1010-42	A9270	\$7.08	\$6.94	\$7.01	\$6.53	\$6.94
Inpatient/Outpatient	MUPIROCIIN 2 % EX OINT	0168-0352-22	A9270	\$6.65	\$6.52	\$6.58	\$6.14	\$6.52
Inpatient/Outpatient	MUPIROCIIN 2 % EX OINT	45802-112-22	A9270	\$0.59	\$0.58	\$0.58	\$0.54	\$0.58
Inpatient/Outpatient	MUPIROCIIN 2 % EX OINT	51672-1312-0	A9270	\$0.62	\$0.61	\$0.61	\$0.57	\$0.61
Inpatient/Outpatient	MUPIROCIIN 2 % EX OINT	51672-1312-1	A9270	\$2.88	\$2.82	\$2.85	\$2.66	\$2.82
Inpatient/Outpatient	MUPIROCIIN 2 % EX OINT	68462-180-22	A9270	\$0.79	\$0.77	\$0.78	\$0.73	\$0.77
Inpatient/Outpatient	MUPIROCIIN 2 % EX OINT	99999-180-01	A9270	\$0.79	\$0.77	\$0.78	\$0.73	\$0.77
Inpatient/Outpatient	MUPIROCIIN 2 % EX OINT	50268-568-11	A9270	\$11.31	\$11.08	\$11.20	\$10.44	\$11.08
Inpatient/Outpatient	MUPIROCIIN 2 % EX OINT	81033-020-50	A9270	\$10.94	\$10.72	\$10.83	\$10.10	\$10.72
Inpatient/Outpatient	NABUMETONE 500 MG PO TABS	51079-989-20	A9270	\$2.73	\$2.68	\$2.70	\$2.52	\$2.68
Inpatient/Outpatient	NABUMETONE 500 MG PO TABS	51079-989-01	A9270	\$2.95	\$2.89	\$2.92	\$2.72	\$2.89
Inpatient/Outpatient	NABUMETONE 500 MG PO TABS	60687-374-01	A9270	\$4.42	\$4.33	\$4.38	\$4.08	\$4.33
Inpatient/Outpatient	NABUMETONE 500 MG PO TABS	60687-374-11	A9270	\$3.81	\$3.73	\$3.77	\$3.52	\$3.73
Inpatient/Outpatient	NABUMETONE 500 MG PO TABS	76282-257-01	A9270	\$2.94	\$2.88	\$2.91	\$2.71	\$2.88
Inpatient/Outpatient	NABUMETONE 750 MG PO TABS	0093-1016-01	A9270	\$1.68	\$1.65	\$1.66	\$1.55	\$1.65
Inpatient/Outpatient	NABUMETONE 750 MG PO TABS	0185-0146-01	A9270	\$0.70	\$0.69	\$0.69	\$0.65	\$0.69
Inpatient/Outpatient	NABUMETONE 750 MG PO TABS	0591-3671-01	A9270	\$1.83	\$1.79	\$1.81	\$1.69	\$1.79
Inpatient/Outpatient	NABUMETONE 750 MG PO TABS	50228-466-01	A9270	\$0.59	\$0.58	\$0.58	\$0.54	\$0.58
Inpatient/Outpatient	NALTREXONE HCL 50 MG PO TABS	0406-1170-01	A9270	\$3.09	\$3.03	\$3.06	\$2.85	\$3.03
Inpatient/Outpatient	NALTREXONE HCL 50 MG PO TABS	0406-1170-03	A9270	\$3.15	\$3.09	\$3.12	\$2.91	\$3.09
Inpatient/Outpatient	NALTREXONE HCL 50 MG PO TABS	0555-0902-01	A9270	\$18.28	\$17.91	\$18.10	\$16.87	\$17.91
Inpatient/Outpatient	NALTREXONE HCL 50 MG PO TABS	68094-853-62	A9270	\$8.55	\$8.38	\$8.46	\$7.89	\$8.38
Inpatient/Outpatient	NALTREXONE HCL 50 MG PO TABS	68084-291-11	A9270	\$7.69	\$7.54	\$7.61	\$7.10	\$7.54
Inpatient/Outpatient	NAPROXEN 125 MG/5ML PO SUSP	0054-3630-63	A9150	\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	NAPROXEN 125 MG/5ML PO SUSP	68134-201-16	A9150	\$4.24	\$4.16	\$4.20	\$3.91	\$4.16
Inpatient/Outpatient	NAPROXEN 125 MG/5ML PO SUSP	70954-151-10	A9150	\$1.91	\$1.87	\$1.89	\$1.76	\$1.87
Inpatient/Outpatient	NICOTINE POLACRILEX 4 MG MT GUM	0113-0422-25	A9150	\$1.36	\$1.33	\$1.35	\$1.26	\$1.33
Inpatient/Outpatient	NICOTINE POLACRILEX 4 MG MT GUM	49348-788-10	A9150	\$1.19	\$1.17	\$1.18	\$1.10	\$1.17
Inpatient/Outpatient	NICOTINE POLACRILEX 4 MG MT GUM	49348-692-36	A9150	\$0.88	\$0.86	\$0.87	\$0.81	\$0.86
Inpatient/Outpatient	NICOTINE POLACRILEX 4 MG MT GUM	0536-1372-23	A9150	\$0.71	\$0.70	\$0.70	\$0.66	\$0.70
Inpatient/Outpatient	NIMODIPINE 30 MG PO CAPS	57664-135-65	A9270	\$31.35	\$30.72	\$31.04	\$28.94	\$30.72
Inpatient/Outpatient	NIMODIPINE 30 MG PO CAPS	0555-0980-40	A9270	\$23.06	\$22.60	\$22.83	\$21.28	\$22.60
Inpatient/Outpatient	NIMODIPINE 30 MG PO CAPS	23155-108-11	A9270	\$32.17	\$31.53	\$31.85	\$29.69	\$31.53
Inpatient/Outpatient	NIMODIPINE 30 MG PO CAPS	23155-512-30	A9270	\$4.77	\$4.67	\$4.72	\$4.40	\$4.67
Inpatient/Outpatient	NIMODIPINE 30 MG PO CAPS	63739-797-33	A9270	\$4.40	\$4.31	\$4.36	\$4.06	\$4.31
Inpatient/Outpatient	NITROFURANTOIN 25 MG/5ML PO SUSP	59630-450-08	A9270	\$18.29	\$17.92	\$18.11	\$16.88	\$17.92
Inpatient/Outpatient	NITROFURANTOIN 25 MG/5ML PO SUSP	65162-689-88	A9270	\$9.56	\$9.37	\$9.46	\$8.82	\$9.37
Inpatient/Outpatient	NITROFURANTOIN 25 MG/5ML PO SUSP	70408-239-32	A9270	\$35.94	\$35.22	\$35.58	\$33.17	\$35.22
Inpatient/Outpatient	NITROFURANTOIN MONOHYD MACRO 100 MG PO CAPS	51079-348-01	A9270	\$2.24	\$2.20	\$2.22	\$2.07	\$2.20
Inpatient/Outpatient	NITROFURANTOIN MONOHYD MACRO 100 MG PO CAPS	51079-348-20	A9270	\$9.64	\$9.45	\$9.54	\$8.90	\$9.45
Inpatient/Outpatient	NITROFURANTOIN MONOHYD MACRO 100 MG PO CAPS	0185-0122-01	A9270	\$1.63	\$1.60	\$1.61	\$1.50	\$1.60
Inpatient/Outpatient	NITROFURANTOIN MONOHYD MACRO 100 MG PO CAPS	47781-303-01	A9270	\$3.79	\$3.71	\$3.75	\$3.50	\$3.71
Inpatient/Outpatient	NITROFURANTOIN MONOHYD MACRO 100 MG PO CAPS	16714-439-01	A9270	\$3.18	\$3.12	\$3.15	\$2.94	\$3.12
Inpatient/Outpatient	NITROFURANTOIN MONOHYD MACRO 100 MG PO CAPS	68084-446-11	A9270	\$11.09	\$10.87	\$10.98	\$10.24	\$10.87
Inpatient/Outpatient	NOREPINEPHRINE BITARTRATE 1 MG/ML IV SOLN	0703-1153-03		\$5.66	\$5.55	\$5.60	\$5.22	\$5.55
Inpatient/Outpatient	NOREPINEPHRINE BITARTRATE 1 MG/ML IV SOLN	0703-1153-01		\$1.69	\$1.66	\$1.67	\$1.56	\$1.66
Inpatient/Outpatient	NOREPINEPHRINE BITARTRATE 1 MG/ML IV SOLN	36000-162-10		\$1.70	\$1.67	\$1.68	\$1.57	\$1.67
Inpatient/Outpatient	NOREPINEPHRINE BITARTRATE 1 MG/ML IV SOLN	0409-3375-04		\$6.44	\$6.31	\$6.38	\$5.94	\$6.31
Inpatient/Outpatient	NOREPINEPHRINE BITARTRATE 1 MG/ML IV SOLN	36000-162-01		\$9.93	\$9.73	\$9.83	\$9.17	\$9.73
Inpatient/Outpatient	NOREPINEPHRINE BITARTRATE 1 MG/ML IV SOLN	67457-852-00		\$8.41	\$8.24	\$8.33	\$7.76	\$8.24
Inpatient/Outpatient	NOREPINEPHRINE BITARTRATE 1 MG/ML IV SOLN	0143-9318-01		\$6.95	\$6.81	\$6.88	\$6.41	\$6.81

Inpatient/Outpatient	NOREPINEPHRINE BITARTRATE 1 MG/ML IV SOLN	0703-1153-81	\$6.67	\$6.54	\$6.60	\$6.16	\$6.54
Inpatient/Outpatient	NOREPINEPHRINE BITARTRATE 1 MG/ML IV SOLN	63323-940-21	\$5.67	\$5.56	\$5.61	\$5.23	\$5.56
Inpatient/Outpatient	NOREPINEPHRINE BITARTRATE 1 MG/ML IV SOLN	70121-1576-1	\$6.56	\$6.43	\$6.49	\$6.05	\$6.43
Inpatient/Outpatient	NOREPINEPHRINE BITARTRATE 1 MG/ML IV SOLN	0409-3375-14	\$6.44	\$6.31	\$6.38	\$5.94	\$6.31
Inpatient/Outpatient	NOREPINEPHRINE BITARTRATE 1 MG/ML IV SOLN	43066-997-01	\$4.70	\$4.61	\$4.65	\$4.34	\$4.61
Inpatient/Outpatient	NORETHINDRONE ACETATE 5 MG PO TABS	0555-0211-10 A9270	\$7.81	\$7.65	\$7.73	\$7.21	\$7.65
Inpatient/Outpatient	NORETHINDRONE ACETATE 5 MG PO TABS	68462-304-50 A9270	\$2.58	\$2.53	\$2.55	\$2.38	\$2.53
Inpatient/Outpatient	CLONIDINE HCL (ANALGESIA) 100 MCG/ML EP SOLN	63323-405-10 J0735	\$9.08	\$8.90	\$8.99	\$8.38	\$8.90
Inpatient/Outpatient	NORGESTREL-ETHINYL ESTRADIOL 0.3-30 MG-MCG PO TABS	0555-9049-58 A9270	\$1.90	\$1.86	\$1.88	\$1.75	\$1.86
Inpatient/Outpatient	NORGESTREL-ETHINYL ESTRADIOL 0.3-30 MG-MCG PO TABS	0555-9049-79 A9270	\$1.90	\$1.86	\$1.88	\$1.75	\$1.86
Inpatient/Outpatient	NORGESTREL-ETHINYL ESTRADIOL 0.5-50 MG-MCG PO TABS	52544-848-28 A9270	\$4.44	\$4.35	\$4.40	\$4.10	\$4.35
Inpatient/Outpatient	NORTRIPTYLINE HCL 10 MG/5ML PO SOLN	0121-0678-16 A9270	\$1.18	\$1.16	\$1.17	\$1.09	\$1.16
Inpatient/Outpatient	LEVOFLOXACIN IN D5W 750 MG/150ML IV SOLN	0781-3343-55 J1956	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	LEVOFLOXACIN IN D5W 750 MG/150ML IV SOLN	25021-132-83 J1956	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	LEVOFLOXACIN IN D5W 750 MG/150ML IV SOLN	36000-048-24 J1956	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	LEVOFLOXACIN IN D5W 750 MG/150ML IV SOLN	55150-245-52 J1956	\$0.21	\$0.21	\$0.21	\$0.19	\$0.21
Inpatient/Outpatient	LEVOFLOXACIN IN D5W 750 MG/150ML IV SOLN	0143-9720-01 J1956	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	LEVOFLOXACIN IN D5W 750 MG/150ML IV SOLN	36000-296-24 J1956	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	LEVOFLOXACIN IN D5W 750 MG/150ML IV SOLN	63323-355-60 J1956	\$0.39	\$0.38	\$0.39	\$0.36	\$0.38
Inpatient/Outpatient	BARICITINIB 2 MG PO TABS (COVID-19)	0002-4182-30	\$392.41	\$384.56	\$388.49	\$362.19	\$384.56
Inpatient/Outpatient	OXYCHLOROSENE SODIUM POWD	0327-0001-10	\$11.66	\$11.43	\$11.54	\$10.76	\$11.43
Inpatient/Outpatient	OXYCODONE HCL 5 MG/5ML PO SOLN	66689-024-01 A9270	\$5.18	\$5.08	\$5.13	\$4.78	\$5.08
Inpatient/Outpatient	OXYCODONE HCL 5 MG/5ML PO SOLN	66689-401-01 A9270	\$2.28	\$2.23	\$2.26	\$2.10	\$2.23
Inpatient/Outpatient	OXYCODONE HCL 5 MG/5ML PO SOLN	0121-4839-05 A9270	\$3.94	\$3.86	\$3.90	\$3.64	\$3.86
Inpatient/Outpatient	OXYCODONE HCL 5 MG/5ML PO SOLN	0121-4827-05 A9270	\$3.27	\$3.20	\$3.24	\$3.02	\$3.20
Inpatient/Outpatient	OXYCODONE HCL 5 MG PO TABS	0406-0552-01 A9270	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	OXYCODONE HCL 5 MG PO TABS	0406-0552-62 A9270	\$1.52	\$1.49	\$1.50	\$1.40	\$1.49
Inpatient/Outpatient	OXYCODONE HCL 5 MG PO TABS	10702-018-01 A9270	\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	OXYCODONE HCL 5 MG PO TABS	57664-223-88 A9270	\$1.24	\$1.22	\$1.23	\$1.14	\$1.22
Inpatient/Outpatient	OXYCODONE HCL 5 MG PO TABS	13107-055-01 A9270	\$0.22	\$0.22	\$0.22	\$0.20	\$0.22
Inpatient/Outpatient	OXYCODONE HCL 5 MG PO TABS	0406-0552-23 A9270	\$2.21	\$2.17	\$2.19	\$2.04	\$2.17
Inpatient/Outpatient	OXYCODONE HCL 5 MG PO TABS	0904-6966-61 A9270	\$0.84	\$0.82	\$0.83	\$0.78	\$0.82
Inpatient/Outpatient	OXYCODONE HCL 5 MG PO TABS	42858-001-10 A9270	\$0.86	\$0.84	\$0.85	\$0.79	\$0.84
Inpatient/Outpatient	OXYCODONE HCL 5 MG PO TABS	68084-354-11 A9270	\$1.36	\$1.33	\$1.35	\$1.26	\$1.33
Inpatient/Outpatient	PEG 3350-KCL-NACB-NACL-NASULF 236 G PO SOLR	52268-100-01 A9270	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	PEG 3350-KCL-NACB-NACL-NASULF 236 G PO SOLR	43386-090-19 A9270	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	PEG 3350-KCL-NACB-NACL-NASULF 236 G PO SOLR	52268-101-01 A9270	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	PEG 3350-KCL-NACB-NACL-NASULF 236 G PO SOLR	10572-101-01 A9270	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	PEG 3350-KCL-NACB-NACL-NASULF 236 G PO SOLR	64380-766-21 A9270	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	PACLITAXEL 300 MG/50ML IV CONC	0703-4768-01 J9267	\$2.97	\$2.91	\$2.94	\$2.74	\$2.91
Inpatient/Outpatient	PACLITAXEL 300 MG/50ML IV CONC	0703-4768-81 J9267	\$2.97	\$2.91	\$2.94	\$2.74	\$2.91
Inpatient/Outpatient	PACLITAXEL 300 MG/50ML IV CONC	47781-595-07 J9267	\$5.35	\$5.24	\$5.30	\$4.94	\$5.24
Inpatient/Outpatient	PACLITAXEL 300 MG/50ML IV CONC	45963-613-59 J9267	\$2.98	\$2.92	\$2.95	\$2.75	\$2.92
Inpatient/Outpatient	PACLITAXEL 300 MG/50ML IV CONC	63323-763-50 J9267	\$11.70	\$11.47	\$11.58	\$10.80	\$11.47
Inpatient/Outpatient	PACLITAXEL 300 MG/50ML IV CONC	61703-342-50 J9267	\$5.04	\$4.94	\$4.99	\$4.65	\$4.94
Inpatient/Outpatient	PACLITAXEL 300 MG/50ML IV CONC	0703-3218-01 J9267	\$2.13	\$2.09	\$2.11	\$1.97	\$2.09
Inpatient/Outpatient	PACLITAXEL 300 MG/50ML IV CONC	0703-3218-81 J9267	\$2.13	\$2.09	\$2.11	\$1.97	\$2.09
Inpatient/Outpatient	DAPAGLIFLOZIN PROPANEDIOL 5 MG PO TABS	0310-6205-30	\$80.71	\$79.10	\$79.90	\$74.50	\$79.10
Inpatient/Outpatient	PAROXETINE HCL 20 MG PO TABS	51079-774-20 A9270	\$0.82	\$0.80	\$0.81	\$0.76	\$0.80
Inpatient/Outpatient	PAROXETINE HCL 20 MG PO TABS	51079-774-01 A9270	\$1.07	\$1.05	\$1.06	\$0.99	\$1.05
Inpatient/Outpatient	PAROXETINE HCL 20 MG PO TABS	0904-5677-61 A9270	\$0.68	\$0.67	\$0.67	\$0.63	\$0.67
Inpatient/Outpatient	PAROXETINE HCL 20 MG PO TABS	68084-045-01 A9270	\$0.75	\$0.74	\$0.74	\$0.69	\$0.74
Inpatient/Outpatient	PAROXETINE HCL 20 MG PO TABS	68084-045-11 A9270	\$0.99	\$0.97	\$0.98	\$0.91	\$0.97
Inpatient/Outpatient	PAROXETINE HCL 20 MG PO TABS	55154-6673-7 A9270	\$0.87	\$0.85	\$0.86	\$0.80	\$0.85
Inpatient/Outpatient	PAROXETINE HCL 20 MG PO TABS	63739-963-10 A9270	\$0.75	\$0.74	\$0.74	\$0.69	\$0.74
Inpatient/Outpatient	PAROXETINE HCL 20 MG PO TABS	43547-348-09 A9270	\$0.21	\$0.21	\$0.21	\$0.19	\$0.21
Inpatient/Outpatient	PAROXETINE HCL 30 MG PO TABS	68382-099-06 A9270	\$0.94	\$0.92	\$0.93	\$0.87	\$0.92
Inpatient/Outpatient	PAROXETINE HCL 30 MG PO TABS	13107-156-30 A9270	\$0.39	\$0.38	\$0.39	\$0.36	\$0.38
Inpatient/Outpatient	PAROXETINE HCL 30 MG PO TABS	0904-5678-61 A9270	\$2.37	\$2.32	\$2.35	\$2.19	\$2.32
Inpatient/Outpatient	PAROXETINE HCL 30 MG PO TABS	68084-046-11 A9270	\$2.35	\$2.30	\$2.33	\$2.17	\$2.30
Inpatient/Outpatient	PAROXETINE HCL 30 MG PO TABS	60505-0084-1 A9270	\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	PENICILLIN G BENZATHINE 600000 UNIT/ML IM SUSY	60793-700-10 J0561	\$381.70	\$374.07	\$377.88	\$352.31	\$374.07
Inpatient/Outpatient	PENICILLIN G BENZATHINE 600000 UNIT/ML IM SUSY	60793-700-01 J0561	\$452.59	\$443.54	\$448.06	\$417.74	\$443.54
Inpatient/Outpatient	PENICILLIN G BENZATHINE & PROC 1200000 UNIT/2ML IM SUSP	60793-601-10 J0558	\$310.48	\$304.27	\$307.38	\$286.57	\$304.27
Inpatient/Outpatient	PENICILLIN G PROCAINE 600000 UNIT/ML IM SUSP	60793-130-10 J2510	\$188.95	\$185.17	\$187.06	\$174.40	\$185.17
Inpatient/Outpatient	PENICILLIN G PROCAINE 600000 UNIT/ML IM SUSP	60793-131-01 J2510	\$158.77	\$155.59	\$157.18	\$146.54	\$155.59
Inpatient/Outpatient	PHENTOLAMINE MESYLATE 5 MG IJ SOLR	55390-113-01 J2760	\$388.06	\$380.30	\$384.18	\$358.18	\$380.30
Inpatient/Outpatient	PHENTOLAMINE MESYLATE 5 MG IJ SOLR	0143-9564-01 J2760	\$1,399.50	\$1,371.51	\$1,385.51	\$1,291.74	\$1,371.51

Inpatient/Outpatient	LIDOCAINE-EPINEPHRINE-TETRACAINE (LET) TOPICAL SOLN	99999-047-03	A9270		\$4.22	\$4.14	\$4.18	\$3.90	\$4.14
Inpatient/Outpatient	PHENYTOIN 50 MG PO CHEW	0071-0007-24	A9270		\$5.77	\$5.65	\$5.71	\$5.33	\$5.65
Inpatient/Outpatient	PHENYTOIN 50 MG PO CHEW	0071-0007-40	A9270		\$8.58	\$8.41	\$8.49	\$7.92	\$8.41
Inpatient/Outpatient	PHENYTOIN 50 MG PO CHEW	60687-156-95	A9270		\$4.15	\$4.07	\$4.11	\$3.83	\$4.07
Inpatient/Outpatient	PHYTONADIONE 5 MG PO TABS	70710-1014-1	J3430		\$87.81	\$86.05	\$86.93	\$81.05	\$86.05
Inpatient/Outpatient	PHYTONADIONE 5 MG PO TABS	0187-1704-05	J3430		\$265.78	\$260.46	\$263.12	\$245.31	\$260.46
Inpatient/Outpatient	PHYTONADIONE 5 MG PO TABS	16714-973-01	J3430		\$123.11	\$120.65	\$121.88	\$113.63	\$120.65
Inpatient/Outpatient	TORSEMIDE 10 MG PO TABS	50111-916-01	A9270		\$0.37	\$0.36	\$0.37	\$0.34	\$0.36
Inpatient/Outpatient	TORSEMIDE 10 MG PO TABS	31722-530-01	A9270		\$0.77	\$0.75	\$0.76	\$0.71	\$0.75
Inpatient/Outpatient	TORSEMIDE 10 MG PO TABS	50268-755-11	A9270		\$0.97	\$0.95	\$0.96	\$0.90	\$0.95
Inpatient/Outpatient	PNEUMOCOCCAL VAC POLYVALENT 25 MCG/0.5ML IJ INJ	0006-4739-00		90732	\$406.62	\$398.49	\$402.55	\$375.31	\$398.49
Inpatient/Outpatient	PNEUMOCOCCAL VAC POLYVALENT 25 MCG/0.5ML IJ INJ	0006-4943-00		90732	\$743.15	\$728.29	\$735.72	\$685.93	\$728.29
Inpatient/Outpatient	PNEUMOCOCCAL VAC POLYVALENT 25 MCG/0.5ML IJ INJ	0006-4943-01		90732	\$650.39	\$637.38	\$643.89	\$600.31	\$637.38
Inpatient/Outpatient	POLYSACCHARIDE IRON COMPLEX 150 MG PO CAPS	0904-5395-61	A9150		\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	POLYSACCHARIDE IRON COMPLEX 150 MG PO CAPS	51991-203-11	A9150		\$0.39	\$0.38	\$0.39	\$0.36	\$0.38
Inpatient/Outpatient	POLYSACCHARIDE IRON COMPLEX 150 MG PO CAPS	60258-185-01	A9150		\$0.58	\$0.57	\$0.57	\$0.54	\$0.57
Inpatient/Outpatient	POLYSACCHARIDE IRON COMPLEX 150 MG PO CAPS	63044-203-61	A9150		\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	FENTANYL IV SYRINGE 5 MCG/ML (NICU)(DOSES 0.5 MCG - 4.9 MCG)	99999-002-10	J3010		\$1.45	\$1.42	\$1.44	\$1.34	\$1.42
Inpatient/Outpatient	FENTANYL IV SYRINGE 5 MCG/ML (NICU)(DOSES 0.5 MCG - 4.9 MCG)	99999-002-05	J3010		\$1.45	\$1.42	\$1.44	\$1.34	\$1.42
Inpatient/Outpatient	POTASSIUM CHLORIDE IVPB 10 MEQ/100ML PREMIX	0338-0709-48	J3480		\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	CITALOPRAM HYDROBROMIDE 10 MG PO TABS	0904-6084-61	A9270		\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	CITALOPRAM HYDROBROMIDE 10 MG PO TABS	68084-737-11	A9270		\$0.72	\$0.71	\$0.71	\$0.66	\$0.71
Inpatient/Outpatient	CHLOROPROCAINE HCL 50 MG/5ML IT SOLN	0264-7055-10			\$13.55	\$13.28	\$13.41	\$12.51	\$13.28
Inpatient/Outpatient	CHLOROPROCAINE HCL 50 MG/5ML IT SOLN	0264-7055-05			\$13.62	\$13.35	\$13.48	\$12.57	\$13.35
Inpatient/Outpatient	METHYLDOPA 500 MG PO TABS	51079-201-20	A9270		\$1.22	\$1.20	\$1.21	\$1.13	\$1.20
Inpatient/Outpatient	METHYLDOPA 500 MG PO TABS	51079-201-01	A9270		\$1.22	\$1.20	\$1.21	\$1.13	\$1.20
Inpatient/Outpatient	DOBUTAMINE INFUSION 2000 MCG/ML (NICU/INFANT) PREMIX	0338-1075-96	J1250		\$0.59	\$0.58	\$0.58	\$0.54	\$0.58
Inpatient/Outpatient	DOBUTAMINE INFUSION 2000 MCG/ML (NICU/INFANT) PREMIX	0338-1075-92	J1250		\$0.59	\$0.58	\$0.58	\$0.54	\$0.58
Inpatient/Outpatient	DOBUTAMINE INFUSION 2000 MCG/ML (NICU/INFANT) PREMIX	0338-1075-90	J1250		\$0.59	\$0.58	\$0.58	\$0.54	\$0.58
Inpatient/Outpatient	DOBUTAMINE INFUSION 2000 MCG/ML (NICU/INFANT) PREMIX	0338-1075-95	J1250		\$0.59	\$0.58	\$0.58	\$0.54	\$0.58
Inpatient/Outpatient	PRAVASTATIN SODIUM 20 MG PO TABS	0093-7201-98	A9270		\$0.22	\$0.22	\$0.22	\$0.20	\$0.22
Inpatient/Outpatient	PRAVASTATIN SODIUM 20 MG PO TABS	51079-458-20	A9270		\$2.62	\$2.57	\$2.59	\$2.42	\$2.57
Inpatient/Outpatient	PRAVASTATIN SODIUM 20 MG PO TABS	51079-458-01	A9270		\$1.00	\$0.98	\$0.99	\$0.92	\$0.98
Inpatient/Outpatient	PRAVASTATIN SODIUM 20 MG PO TABS	0904-5892-61	A9270		\$2.28	\$2.23	\$2.26	\$2.10	\$2.23
Inpatient/Outpatient	PRAVASTATIN SODIUM 20 MG PO TABS	68462-196-90	A9270		\$1.58	\$1.55	\$1.56	\$1.46	\$1.55
Inpatient/Outpatient	PRAVASTATIN SODIUM 20 MG PO TABS	60505-0169-9	A9270		\$0.20	\$0.20	\$0.20	\$0.18	\$0.20
Inpatient/Outpatient	PRAVASTATIN SODIUM 20 MG PO TABS	63739-649-10	A9270		\$1.64	\$1.61	\$1.62	\$1.51	\$1.61
Inpatient/Outpatient	PRAVASTATIN SODIUM 20 MG PO TABS	60687-178-11	A9270		\$1.94	\$1.90	\$1.92	\$1.79	\$1.90
Inpatient/Outpatient	PRAVASTATIN SODIUM 40 MG PO TABS	0093-7202-98	A9270		\$3.26	\$3.19	\$3.23	\$3.01	\$3.19
Inpatient/Outpatient	PRAVASTATIN SODIUM 40 MG PO TABS	51079-782-01	A9270		\$1.36	\$1.33	\$1.35	\$1.26	\$1.33
Inpatient/Outpatient	PRAVASTATIN SODIUM 40 MG PO TABS	51079-782-20	A9270		\$3.26	\$3.19	\$3.23	\$3.01	\$3.19
Inpatient/Outpatient	PRAVASTATIN SODIUM 40 MG PO TABS	0904-6115-61	A9270		\$0.88	\$0.86	\$0.87	\$0.81	\$0.86
Inpatient/Outpatient	PRAVASTATIN SODIUM 40 MG PO TABS	0904-5893-61	A9270		\$2.32	\$2.27	\$2.30	\$2.14	\$2.27
Inpatient/Outpatient	PRAVASTATIN SODIUM 40 MG PO TABS	68462-197-90	A9270		\$2.77	\$2.71	\$2.74	\$2.56	\$2.71
Inpatient/Outpatient	PRAVASTATIN SODIUM 40 MG PO TABS	60687-190-11	A9270		\$5.87	\$5.75	\$5.81	\$5.42	\$5.75
Inpatient/Outpatient	PRAVASTATIN SODIUM 40 MG PO TABS	60505-0170-9	A9270		\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	PRAVASTATIN SODIUM 40 MG PO TABS	55111-231-90	A9270		\$0.92	\$0.90	\$0.91	\$0.85	\$0.90
Inpatient/Outpatient	PRIMIDONE 50 MG PO TABS	0603-5371-21	A9270		\$1.10	\$1.08	\$1.09	\$1.02	\$1.08
Inpatient/Outpatient	PRIMIDONE 50 MG PO TABS	0115-1030-01	A9270		\$1.76	\$1.72	\$1.74	\$1.62	\$1.72
Inpatient/Outpatient	PRIMIDONE 50 MG PO TABS	68084-202-11	A9270		\$2.08	\$2.04	\$2.06	\$1.92	\$2.04
Inpatient/Outpatient	PRIMIDONE 50 MG PO TABS	53746-544-01	A9270		\$0.67	\$0.66	\$0.66	\$0.62	\$0.66
Inpatient/Outpatient	PRIMIDONE 50 MG PO TABS	69584-684-10	A9270		\$0.62	\$0.61	\$0.61	\$0.57	\$0.61
Inpatient/Outpatient	PRIMIDONE 50 MG PO TABS	50268-686-11	A9270		\$1.58	\$1.55	\$1.56	\$1.46	\$1.55
Inpatient/Outpatient	PROCHLORPERAZINE 25 MG RE SUPP	0713-0135-12	A9270		\$39.68	\$38.89	\$39.28	\$36.62	\$38.89
Inpatient/Outpatient	PROCHLORPERAZINE 25 MG RE SUPP	0713-0135-06	A9270		\$43.82	\$42.94	\$43.38	\$40.45	\$42.94
Inpatient/Outpatient	PROCHLORPERAZINE 25 MG RE SUPP	0574-7226-12	A9270		\$28.58	\$28.01	\$28.29	\$26.38	\$28.01
Inpatient/Outpatient	PROMETHAZINE HCL 12.5 MG RE SUPP	0713-0536-12	A9270		\$47.38	\$46.43	\$46.91	\$43.73	\$46.43
Inpatient/Outpatient	PROMETHAZINE HCL 12.5 MG RE SUPP	0591-2160-39	A9270		\$48.37	\$47.40	\$47.89	\$44.65	\$47.40
Inpatient/Outpatient	PROMETHAZINE HCL 12.5 MG RE SUPP	0591-2985-39	A9270		\$25.38	\$24.87	\$25.13	\$23.43	\$24.87
Inpatient/Outpatient	PROMETHAZINE HCL 12.5 MG RE SUPP	51672-5296-1	A9270		\$16.16	\$15.84	\$16.00	\$14.92	\$15.84
Inpatient/Outpatient	PROMETHAZINE HCL 12.5 MG RE SUPP	45802-758-00	A9270		\$14.89	\$14.59	\$14.74	\$13.74	\$14.59
Inpatient/Outpatient	PROMETHAZINE HCL 12.5 MG RE SUPP	0713-0536-06	A9270		\$47.38	\$46.43	\$46.91	\$43.73	\$46.43
Inpatient/Outpatient	PROMETHAZINE HCL 25 MG RE SUPP	45802-759-30	A9270		\$18.54	\$18.17	\$18.35	\$17.11	\$18.17
Inpatient/Outpatient	PROMETHAZINE HCL 25 MG RE SUPP	0574-7234-12	A9270		\$47.43	\$46.48	\$46.96	\$43.78	\$46.48
Inpatient/Outpatient	PROMETHAZINE HCL 25 MG RE SUPP	0713-0526-12	A9270		\$47.38	\$46.43	\$46.91	\$43.73	\$46.43
Inpatient/Outpatient	PROMETHAZINE HCL 25 MG RE SUPP	0591-2992-39	A9270		\$16.68	\$16.35	\$16.51	\$15.40	\$16.35
Inpatient/Outpatient	PROMETHAZINE HCL 25 MG RE SUPP	45802-759-00	A9270		\$17.95	\$17.59	\$17.77	\$16.57	\$17.59
Inpatient/Outpatient	PROMETHAZINE HCL 25 MG RE SUPP	51672-5297-1	A9270		\$47.38	\$46.43	\$46.91	\$43.73	\$46.43

Inpatient/Outpatient	PROPAFENONE HCL 150 MG PO TABS	0603-5448-21	A9270		\$1.13	\$1.11	\$1.12	\$1.04	\$1.11
Inpatient/Outpatient	PROPAFENONE HCL 150 MG PO TABS	0591-0582-01	A9270		\$0.74	\$0.73	\$0.73	\$0.68	\$0.73
Inpatient/Outpatient	PROPAFENONE HCL 150 MG PO TABS	68084-361-01	A9270		\$1.45	\$1.42	\$1.44	\$1.34	\$1.42
Inpatient/Outpatient	PROPAFENONE HCL 150 MG PO TABS	62559-230-01	A9270		\$1.22	\$1.20	\$1.21	\$1.13	\$1.20
Inpatient/Outpatient	PROPAFENONE HCL 225 MG PO TABS	0603-5449-21	A9270		\$1.31	\$1.28	\$1.30	\$1.21	\$1.28
Inpatient/Outpatient	PROPAFENONE HCL 225 MG PO TABS	53489-552-01	A9270		\$4.70	\$4.61	\$4.65	\$4.34	\$4.61
Inpatient/Outpatient	PROPAFENONE HCL 225 MG PO TABS	0591-0583-01	A9270		\$0.94	\$0.92	\$0.93	\$0.87	\$0.92
Inpatient/Outpatient	PROPAFENONE HCL 225 MG PO TABS	59651-257-01	A9270		\$0.91	\$0.89	\$0.90	\$0.84	\$0.89
Inpatient/Outpatient	PROPOFOL 200 MG/20ML IV EMUL	63323-269-29	J2704		\$0.51	\$0.50	\$0.50	\$0.47	\$0.50
Inpatient/Outpatient	PROPOFOL 200 MG/20ML IV EMUL	0409-4699-50	J2704		\$0.41	\$0.40	\$0.41	\$0.38	\$0.40
Inpatient/Outpatient	PROPOFOL 200 MG/20ML IV EMUL	63323-269-37	J2704		\$0.51	\$0.50	\$0.50	\$0.47	\$0.50
Inpatient/Outpatient	PROPOFOL 200 MG/20ML IV EMUL	0641-6194-01	J2704		\$0.38	\$0.37	\$0.38	\$0.35	\$0.37
Inpatient/Outpatient	PROPOFOL 200 MG/20ML IV EMUL	63323-269-94	J2704		\$0.51	\$0.50	\$0.50	\$0.47	\$0.50
Inpatient/Outpatient	BUPRENORPHINE HCL-NALOXONE HCL 8-2 MG SL FILM	12496-1208-1	A9270		\$28.40	\$27.83	\$28.12	\$26.21	\$27.83
Inpatient/Outpatient	BUPRENORPHINE HCL-NALOXONE HCL 8-2 MG SL FILM	47781-357-03	A9270		\$12.62	\$12.37	\$12.49	\$11.65	\$12.37
Inpatient/Outpatient	BUPRENORPHINE HCL-NALOXONE HCL 8-2 MG SL FILM	47781-357-11	A9270		\$13.56	\$13.29	\$13.42	\$12.52	\$13.29
Inpatient/Outpatient	BUPRENORPHINE HCL-NALOXONE HCL 8-2 MG SL FILM	43598-582-01	A9270		\$14.76	\$14.46	\$14.61	\$13.62	\$14.46
Inpatient/Outpatient	PSYLLIUM 100 % PO PACK	0224-1801-35	A9150		\$1.32	\$1.29	\$1.31	\$1.22	\$1.29
Inpatient/Outpatient	PYRIDOSTIGMINE BROMIDE 60 MG PO TABS	0187-3010-30	A9270		\$69.32	\$67.93	\$68.63	\$63.98	\$67.93
Inpatient/Outpatient	PYRIDOSTIGMINE BROMIDE 60 MG PO TABS	0115-3511-01	A9270		\$0.97	\$0.95	\$0.96	\$0.90	\$0.95
Inpatient/Outpatient	PYRIDOSTIGMINE BROMIDE 60 MG PO TABS	68682-302-10	A9270		\$4.61	\$4.52	\$4.56	\$4.26	\$4.52
Inpatient/Outpatient	PYRIDOSTIGMINE BROMIDE 60 MG PO TABS	68084-494-01	A9270		\$3.82	\$3.74	\$3.78	\$3.53	\$3.74
Inpatient/Outpatient	PYRIDOSTIGMINE BROMIDE 60 MG PO TABS	68084-494-11	A9270		\$4.07	\$3.99	\$4.03	\$3.76	\$3.99
Inpatient/Outpatient	PYRIDOSTIGMINE BROMIDE 60 MG PO TABS	63739-969-40	A9270		\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	PYRIDOSTIGMINE BROMIDE 60 MG PO TABS	60687-502-11	A9270		\$4.07	\$3.99	\$4.03	\$3.76	\$3.99
Inpatient/Outpatient	PYRIDOSTIGMINE BROMIDE 60 MG PO TABS	0904-6622-61	A9270		\$3.90	\$3.82	\$3.86	\$3.60	\$3.82
Inpatient/Outpatient	METHYLNALTREXONE BROMIDE 8 MG/0.4ML SC SOLN	65649-552-04	J2212		\$1,151.56	\$1,128.53	\$1,140.04	\$1,062.89	\$1,128.53
Inpatient/Outpatient	RABIES VIRUS VACCINE, HDC IM INJ	49281-250-51		90675	\$956.27	\$937.14	\$946.71	\$882.64	\$937.14
Inpatient/Outpatient	RABIES VIRUS VACCINE, HDC IM INJ	49281-248-58		90675	\$947.88	\$928.92	\$938.40	\$874.89	\$928.92
Inpatient/Outpatient	RABIES VIRUS VACCINE, HDC IM INJ	49281-252-51		90675	\$1,230.40	\$1,205.79	\$1,218.10	\$1,135.66	\$1,205.79
Inpatient/Outpatient	RAMIPRIL 1.25 MG PO CAPS	61570-110-01	A9270		\$22.94	\$22.48	\$22.71	\$21.17	\$22.48
Inpatient/Outpatient	RAMIPRIL 1.25 MG PO CAPS	0054-0106-25	A9270		\$0.77	\$0.75	\$0.76	\$0.71	\$0.75
Inpatient/Outpatient	RAMIPRIL 1.25 MG PO CAPS	31722-271-01	A9270		\$0.71	\$0.70	\$0.70	\$0.66	\$0.70
Inpatient/Outpatient	RAMIPRIL 1.25 MG PO CAPS	60687-321-11	A9270		\$5.83	\$5.71	\$5.77	\$5.38	\$5.71
Inpatient/Outpatient	RAMIPRIL 1.25 MG PO CAPS	68382-144-06	A9270		\$0.43	\$0.42	\$0.43	\$0.40	\$0.42
Inpatient/Outpatient	RAMIPRIL 10 MG PO CAPS	61570-120-01	A9270		\$33.24	\$32.58	\$32.91	\$30.68	\$32.58
Inpatient/Outpatient	RAMIPRIL 10 MG PO CAPS	16252-573-01	A9270		\$2.43	\$2.38	\$2.41	\$2.24	\$2.38
Inpatient/Outpatient	RAMIPRIL 10 MG PO CAPS	0054-0109-25	A9270		\$0.95	\$0.93	\$0.94	\$0.88	\$0.93
Inpatient/Outpatient	RAMIPRIL 10 MG PO CAPS	68180-591-01	A9270		\$1.84	\$1.80	\$1.82	\$1.70	\$1.80
Inpatient/Outpatient	RAMIPRIL 10 MG PO CAPS	65862-477-01	A9270		\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	RAMIPRIL 10 MG PO CAPS	60687-354-11	A9270		\$1.76	\$1.72	\$1.74	\$1.62	\$1.72
Inpatient/Outpatient	RAMIPRIL 2.5 MG PO CAPS	68084-266-01	A9270		\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	RAMIPRIL 2.5 MG PO CAPS	0054-0107-20	A9270		\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	RAMIPRIL 2.5 MG PO CAPS	0054-0107-25	A9270		\$0.92	\$0.90	\$0.91	\$0.85	\$0.90
Inpatient/Outpatient	RAMIPRIL 2.5 MG PO CAPS	65862-475-01	A9270		\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	RAMIPRIL 5 MG PO CAPS	68084-267-01	A9270		\$0.49	\$0.48	\$0.49	\$0.45	\$0.48
Inpatient/Outpatient	RAMIPRIL 5 MG PO CAPS	68084-267-11	A9270		\$0.95	\$0.93	\$0.94	\$0.88	\$0.93
Inpatient/Outpatient	RAMIPRIL 5 MG PO CAPS	0054-0108-20	A9270		\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	RAMIPRIL 5 MG PO CAPS	60687-343-11	A9270		\$0.60	\$0.59	\$0.59	\$0.55	\$0.59
Inpatient/Outpatient	RAMIPRIL 5 MG PO CAPS	68382-146-01	A9270		\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	ONDANSETRON HCL 40 MG/20ML II SOLN	0781-3057-80	J2405		\$7.30	\$7.15	\$7.23	\$6.74	\$7.15
Inpatient/Outpatient	ONDANSETRON HCL 40 MG/20ML II SOLN	63323-374-20	J2405		\$4.76	\$4.66	\$4.71	\$4.39	\$4.66
Inpatient/Outpatient	ONDANSETRON HCL 40 MG/20ML II SOLN	55390-121-01	J2405		\$2.31	\$2.26	\$2.29	\$2.13	\$2.26
Inpatient/Outpatient	ONDANSETRON HCL 40 MG/20ML II SOLN	0143-9890-01	J2405		\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	ONDANSETRON HCL 40 MG/20ML II SOLN	0409-4759-01	J2405		\$1.49	\$1.46	\$1.48	\$1.38	\$1.46
Inpatient/Outpatient	ONDANSETRON HCL 40 MG/20ML II SOLN	23155-377-31	J2405		\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	ONDANSETRON HCL 40 MG/20ML II SOLN	23155-549-31	J2405		\$0.86	\$0.84	\$0.85	\$0.79	\$0.84
Inpatient/Outpatient	ONDANSETRON HCL 40 MG/20ML II SOLN	23155-550-31	J2405		\$0.86	\$0.84	\$0.85	\$0.79	\$0.84
Inpatient/Outpatient	RIFABUTIN 150 MG PO CAPS	0013-5301-17	A9270		\$86.74	\$85.01	\$85.87	\$80.06	\$85.01
Inpatient/Outpatient	RIFABUTIN 150 MG PO CAPS	59762-1350-1	A9270		\$48.95	\$47.97	\$48.46	\$45.18	\$47.97
Inpatient/Outpatient	RIFAMPIN 600 MG IV SOLR	55390-123-01	J3490		\$394.83	\$386.93	\$390.88	\$364.43	\$386.93
Inpatient/Outpatient	RIFAMPIN 600 MG IV SOLR	0068-0597-01	J3490		\$396.53	\$388.60	\$392.56	\$366.00	\$388.60
Inpatient/Outpatient	RIFAMPIN 600 MG IV SOLR	67457-445-60	J3490		\$276.24	\$270.72	\$273.48	\$254.97	\$270.72
Inpatient/Outpatient	RIFAMPIN 600 MG IV SOLR	63323-351-20	J3490		\$485.55	\$475.84	\$480.69	\$448.16	\$475.84
Inpatient/Outpatient	RIFAMPIN 150 MG PO CAPS	0185-0801-01	A9270		\$12.42	\$12.17	\$12.30	\$11.46	\$12.17
Inpatient/Outpatient	RIFAMPIN 150 MG PO CAPS	0527-1393-01	A9270		\$3.15	\$3.09	\$3.12	\$2.91	\$3.09
Inpatient/Outpatient	RIFAMPIN 150 MG PO CAPS	0527-1393-30	A9270		\$2.41	\$2.36	\$2.39	\$2.22	\$2.36
Inpatient/Outpatient	RIFAMPIN 150 MG PO CAPS	68180-658-06	A9270		\$3.29	\$3.22	\$3.26	\$3.04	\$3.22

Inpatient/Outpatient	RIFAMPIN 300 MG PO CAPS	0185-0799-01	A9270		\$11.69	\$11.46	\$11.57	\$10.79	\$11.46
Inpatient/Outpatient	RIFAMPIN 300 MG PO CAPS	61748-018-01	A9270		\$2.21	\$2.17	\$2.19	\$2.04	\$2.17
Inpatient/Outpatient	RIFAMPIN 300 MG PO CAPS	0904-5282-61	A9270		\$2.76	\$2.70	\$2.73	\$2.55	\$2.70
Inpatient/Outpatient	RIFAMPIN 300 MG PO CAPS	63739-415-10	A9270		\$2.90	\$2.84	\$2.87	\$2.68	\$2.84
Inpatient/Outpatient	RIFAMPIN 300 MG PO CAPS	0527-1315-01	A9270		\$2.03	\$1.99	\$2.01	\$1.87	\$1.99
Inpatient/Outpatient	RIFAMPIN 300 MG PO CAPS	68180-659-07	A9270		\$2.43	\$2.38	\$2.41	\$2.24	\$2.38
Inpatient/Outpatient	SERTRALINE HCL 100 MG PO TABS	59762-4910-3	A9270		\$0.48	\$0.47	\$0.48	\$0.44	\$0.47
Inpatient/Outpatient	SERTRALINE HCL 100 MG PO TABS	51079-151-01	A9270		\$0.82	\$0.80	\$0.81	\$0.76	\$0.80
Inpatient/Outpatient	SERTRALINE HCL 100 MG PO TABS	16714-613-05	A9270		\$0.44	\$0.43	\$0.44	\$0.41	\$0.43
Inpatient/Outpatient	SERTRALINE HCL 100 MG PO TABS	68180-353-09	A9270		\$0.88	\$0.86	\$0.87	\$0.81	\$0.86
Inpatient/Outpatient	SERTRALINE HCL 100 MG PO TABS	60687-253-11	A9270		\$0.66	\$0.65	\$0.65	\$0.61	\$0.65
Inpatient/Outpatient	SERTRALINE HCL 100 MG PO TABS	65862-013-30	A9270		\$0.34	\$0.33	\$0.34	\$0.31	\$0.33
Inpatient/Outpatient	SERTRALINE HCL 100 MG PO TABS	0904-6926-61	A9270		\$1.36	\$1.33	\$1.35	\$1.26	\$1.33
Inpatient/Outpatient	SERTRALINE HCL 100 MG PO TABS	16714-613-04	A9270		\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	SERTRALINE HCL 100 MG PO TABS	68180-353-06	A9270		\$1.13	\$1.11	\$1.12	\$1.04	\$1.11
Inpatient/Outpatient	SERTRALINE HCL 100 MG PO TABS	0049-4910-41	A9270		\$58.23	\$57.07	\$57.65	\$53.75	\$57.07
Inpatient/Outpatient	SERTRALINE HCL 50 MG PO TABS	59762-4900-3	A9270		\$0.49	\$0.48	\$0.49	\$0.45	\$0.48
Inpatient/Outpatient	SERTRALINE HCL 50 MG PO TABS	68084-181-01	A9270		\$0.74	\$0.73	\$0.73	\$0.68	\$0.73
Inpatient/Outpatient	SERTRALINE HCL 50 MG PO TABS	51079-763-20	A9270		\$0.53	\$0.52	\$0.52	\$0.49	\$0.52
Inpatient/Outpatient	SERTRALINE HCL 50 MG PO TABS	68084-181-11	A9270		\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	SERTRALINE HCL 50 MG PO TABS	51079-150-20	A9270		\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	SERTRALINE HCL 50 MG PO TABS	68180-352-09	A9270		\$0.88	\$0.86	\$0.87	\$0.81	\$0.86
Inpatient/Outpatient	SERTRALINE HCL 50 MG PO TABS	60687-242-11	A9270		\$0.74	\$0.73	\$0.73	\$0.68	\$0.73
Inpatient/Outpatient	SERTRALINE HCL 50 MG PO TABS	16714-612-04	A9270		\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	SERTRALINE HCL 50 MG PO TABS	16729-216-15	A9270		\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	SERTRALINE HCL 50 MG PO TABS	0049-4900-41	A9270		\$55.51	\$54.40	\$54.95	\$51.24	\$54.40
Inpatient/Outpatient	SILVER NITRATE-POT NITRATE 75-25 % EX MISC	12870-0001-1	A9270		\$2.65	\$2.60	\$2.62	\$2.45	\$2.60
Inpatient/Outpatient	SILVER NITRATE-POT NITRATE 75-25 % EX MISC	12870-0001-2	A9270		\$2.51	\$2.46	\$2.48	\$2.32	\$2.46
Inpatient/Outpatient	SODIUM CHLORIDE 0.9% BOLUS (INFANT/PEDS)	0264-7800-10	J7050		\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	SODIUM CHLORIDE 0.9% BOLUS (INFANT/PEDS)	0338-0049-03	J7050		\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	SODIUM CHLORIDE 0.9% BOLUS (INFANT/PEDS)	0338-0049-38	J7050		\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	SODIUM CHLORIDE 0.9% BOLUS (INFANT/PEDS)	0338-0049-48	J7050		\$0.08	\$0.08	\$0.08	\$0.07	\$0.08
Inpatient/Outpatient	SODIUM CHLORIDE 0.9% BOLUS (INFANT/PEDS)	0338-0553-18	J7050		\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	SODIUM CHLORIDE 0.9% BOLUS (INFANT/PEDS)	0338-0049-04	J7030		\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	SINCALIDE 5 MCG U SOLR	0270-0556-15	J2805		\$382.84	\$375.18	\$379.01	\$353.36	\$375.18
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IR SOLN VIAFLEX BAG	0338-0047-44			\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IR SOLN VIAFLEX BAG	0338-0047-47			\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IR SOLN VIAFLEX BAG	0338-0050-47			\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	SOTALOL HCL 160 MG PO TABS	60505-0081-0	A9270		\$0.43	\$0.42	\$0.43	\$0.40	\$0.42
Inpatient/Outpatient	SOTALOL HCL 160 MG PO TABS	50419-106-10	A9270		\$30.41	\$29.80	\$30.11	\$28.07	\$29.80
Inpatient/Outpatient	SOTALOL HCL 160 MG PO TABS	0093-1062-01	A9270		\$1.08	\$1.06	\$1.07	\$1.00	\$1.06
Inpatient/Outpatient	SOTALOL HCL 160 MG PO TABS	69584-843-10	A9270		\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	SOTALOL HCL 80 MG PO TABS	60505-0080-0	A9270		\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	SOTALOL HCL 80 MG PO TABS	0603-5769-21	A9270		\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	SOTALOL HCL 80 MG PO TABS	0093-1061-01	A9270		\$1.27	\$1.24	\$1.26	\$1.17	\$1.24
Inpatient/Outpatient	SOTALOL HCL 80 MG PO TABS	0185-0171-01	A9270		\$1.49	\$1.46	\$1.48	\$1.38	\$1.46
Inpatient/Outpatient	SOTALOL HCL 80 MG PO TABS	68084-654-11	A9270		\$4.31	\$4.22	\$4.27	\$3.98	\$4.22
Inpatient/Outpatient	SOTALOL HCL 80 MG PO TABS	76385-114-01	A9270		\$1.39	\$1.36	\$1.38	\$1.28	\$1.36
Inpatient/Outpatient	SOTALOL HCL 80 MG PO TABS	69584-841-10	A9270		\$0.24	\$0.24	\$0.24	\$0.22	\$0.24
Inpatient/Outpatient	SPIRONOLACTONE 100 MG PO TABS	0228-2673-11	A9270		\$1.29	\$1.26	\$1.28	\$1.19	\$1.26
Inpatient/Outpatient	SPIRONOLACTONE 100 MG PO TABS	51079-980-20	A9270		\$2.19	\$2.15	\$2.17	\$2.02	\$2.15
Inpatient/Outpatient	SPIRONOLACTONE 100 MG PO TABS	51079-980-01	A9270		\$3.56	\$3.49	\$3.52	\$3.29	\$3.49
Inpatient/Outpatient	SPIRONOLACTONE 100 MG PO TABS	68084-208-11	A9270		\$2.61	\$2.56	\$2.58	\$2.41	\$2.56
Inpatient/Outpatient	SPIRONOLACTONE 100 MG PO TABS	60687-487-11	A9270		\$2.26	\$2.21	\$2.24	\$2.09	\$2.21
Inpatient/Outpatient	SPIRONOLACTONE 100 MG PO TABS	59746-218-01	A9270		\$1.89	\$1.85	\$1.87	\$1.74	\$1.85
Inpatient/Outpatient	SPIRONOLACTONE 50 MG PO TABS	51079-979-20	A9270		\$1.64	\$1.61	\$1.62	\$1.51	\$1.61
Inpatient/Outpatient	SPIRONOLACTONE 50 MG PO TABS	51079-979-01	A9270		\$2.07	\$2.03	\$2.05	\$1.91	\$2.03
Inpatient/Outpatient	SPIRONOLACTONE 50 MG PO TABS	63739-545-10	A9270		\$1.13	\$1.11	\$1.12	\$1.04	\$1.11
Inpatient/Outpatient	SUCRALFATE 1 G PO TABS	51079-871-01	A9270		\$3.75	\$3.68	\$3.71	\$3.46	\$3.68
Inpatient/Outpatient	SUCRALFATE 1 G PO TABS	63739-261-10	A9270		\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	SUCRALFATE 1 G PO TABS	51079-871-20	A9270		\$0.95	\$0.93	\$0.94	\$0.88	\$0.93
Inpatient/Outpatient	SUCRALFATE 1 G PO TABS	29033-003-01	A9270		\$0.96	\$0.94	\$0.95	\$0.89	\$0.94
Inpatient/Outpatient	SUCRALFATE 1 G PO TABS	29033-003-05	A9270		\$0.99	\$0.97	\$0.98	\$0.91	\$0.97
Inpatient/Outpatient	SUCRALFATE 1 G PO TABS	68084-593-01	A9270		\$1.86	\$1.82	\$1.84	\$1.72	\$1.82
Inpatient/Outpatient	SUCRALFATE 1 G PO TABS	0093-2210-05	A9270		\$0.97	\$0.95	\$0.96	\$0.90	\$0.95
Inpatient/Outpatient	SUCRALFATE 1 G PO TABS	0093-2210-01	A9270		\$1.26	\$1.23	\$1.25	\$1.16	\$1.23
Inpatient/Outpatient	SUCRALFATE 1 G PO TABS	63739-943-10	A9270		\$1.16	\$1.14	\$1.15	\$1.07	\$1.14
Inpatient/Outpatient	SUCRALFATE 1 G PO TABS	51079-753-01	A9270		\$0.96	\$0.94	\$0.95	\$0.89	\$0.94

Inpatient/Outpatient	SUCRALFATE 1 G PO TABS	59762-0401-1	A9270	\$1.11	\$1.09	\$1.10	\$1.02	\$1.09
Inpatient/Outpatient	SUFENTANIL CITRATE 50 MCG/ML IV SOLN	17478-050-01	J3490	\$10.00	\$9.80	\$9.90	\$9.23	\$9.80
Inpatient/Outpatient	SULFACETAMIDE-PREDNISOLONE 10-0.2 % OP OINT	0023-0313-04	A9270	\$197.41	\$193.46	\$195.44	\$182.21	\$193.46
Inpatient/Outpatient	HEPARIN SOD (PORK) LOCK FLUSH 10 UNIT/ML IV SOLN	9999-3065-30	J1642	\$0.58	\$0.57	\$0.57	\$0.54	\$0.57
Inpatient/Outpatient	HEPARIN SOD (PORK) LOCK FLUSH 10 UNIT/ML IV SOLN	8290-306512	J1642	\$0.81	\$0.79	\$0.80	\$0.75	\$0.79
Inpatient/Outpatient	HEPARIN SOD (PORK) LOCK FLUSH 10 UNIT/ML IV SOLN	64253-222-23	J1642	\$0.63	\$0.62	\$0.62	\$0.58	\$0.62
Inpatient/Outpatient	HEPARIN SOD (PORK) LOCK FLUSH 10 UNIT/ML IV SOLN	64253-222-35	J1642	\$0.43	\$0.42	\$0.43	\$0.40	\$0.42
Inpatient/Outpatient	TERBUTALINE SULFATE 1 MG/ML IJ SOLN	55390-101-10	J3105	\$11.09	\$10.87	\$10.98	\$10.24	\$10.87
Inpatient/Outpatient	TERBUTALINE SULFATE 1 MG/ML IJ SOLN	0703-1271-04	J3105	\$6.14	\$6.02	\$6.08	\$5.67	\$6.02
Inpatient/Outpatient	TERBUTALINE SULFATE 1 MG/ML IJ SOLN	0143-9746-10	J3105	\$6.78	\$6.64	\$6.71	\$6.26	\$6.64
Inpatient/Outpatient	TERBUTALINE SULFATE 1 MG/ML IJ SOLN	63323-665-01	J3105	\$6.10	\$5.98	\$6.04	\$5.63	\$5.98
Inpatient/Outpatient	TERBUTALINE SULFATE 1 MG/ML IJ SOLN	0143-9746-01	J3105	\$5.20	\$5.10	\$5.15	\$4.80	\$5.10
Inpatient/Outpatient	TERBUTALINE SULFATE 2.5 MG PO TABS	0115-2611-01	A9270	\$19.77	\$19.37	\$19.57	\$18.25	\$19.37
Inpatient/Outpatient	TERBUTALINE SULFATE 5 MG PO TABS	0115-2622-01	A9270	\$24.06	\$23.58	\$23.82	\$22.21	\$23.58
Inpatient/Outpatient	TERBUTALINE SULFATE 5 MG PO TABS	0527-1311-01	A9270	\$25.84	\$25.32	\$25.58	\$23.85	\$25.32
Inpatient/Outpatient	TERBUTALINE SULFATE 5 MG PO TABS	62559-722-01	A9270	\$8.50	\$8.33	\$8.42	\$7.85	\$8.33
Inpatient/Outpatient	TERBUTALINE SULFATE 5 MG PO TABS	24979-133-01	A9270	\$9.27	\$9.08	\$9.18	\$8.56	\$9.08
Inpatient/Outpatient	TETRACAINE HCL 1 % IJ SOLN	0409-1846-02		\$7.40	\$7.25	\$7.33	\$6.83	\$7.25
Inpatient/Outpatient	THROMBIN 5000 UNITS EX SOLR	60793-215-05		\$253.21	\$248.15	\$250.68	\$233.71	\$248.15
Inpatient/Outpatient	THROMBIN 5000 UNITS EX SOLR	60793-315-01		\$253.21	\$248.15	\$250.68	\$233.71	\$248.15
Inpatient/Outpatient	TIMOLOL MALEATE 0.25 % OP SOLN	61314-226-05	A9270	\$4.68	\$4.59	\$4.63	\$4.32	\$4.59
Inpatient/Outpatient	TIMOLOL MALEATE 0.25 % OP SOLN	60505-0552-2	A9270	\$2.52	\$2.47	\$2.49	\$2.33	\$2.47
Inpatient/Outpatient	TIMOLOL MALEATE 0.25 % OP SOLN	16571-140-50	A9270	\$2.05	\$2.01	\$2.03	\$1.89	\$2.01
Inpatient/Outpatient	TIMOLOL MALEATE 0.25 % OP SOLN	64980-513-05	A9270	\$3.94	\$3.86	\$3.90	\$3.64	\$3.86
Inpatient/Outpatient	TIMOLOL MALEATE 0.25 % OP SOLN	60758-802-05	A9270	\$2.90	\$2.84	\$2.87	\$2.68	\$2.84
Inpatient/Outpatient	TIMOLOL MALEATE 0.25 % OP SOLN	60505-0597-1	A9270	\$2.05	\$2.01	\$2.03	\$1.89	\$2.01
Inpatient/Outpatient	TIMOLOL MALEATE 0.25 % OP SOLN	64980-513-01	A9270	\$2.17	\$2.13	\$2.15	\$2.00	\$2.13
Inpatient/Outpatient	TIMOLOL MALEATE 0.5 % OP SOLN	61314-227-05	A9270	\$8.73	\$8.56	\$8.64	\$8.06	\$8.56
Inpatient/Outpatient	TIMOLOL MALEATE 0.5 % OP SOLN	64980-514-05	A9270	\$5.32	\$5.21	\$5.27	\$4.91	\$5.21
Inpatient/Outpatient	TIMOLOL MALEATE 0.5 % OP SOLN	16571-141-50	A9270	\$3.38	\$3.31	\$3.35	\$3.12	\$3.31
Inpatient/Outpatient	TIMOLOL MALEATE 0.5 % OP SOLN	17478-288-10	A9270	\$4.38	\$4.29	\$4.34	\$4.04	\$4.29
Inpatient/Outpatient	TIMOLOL MALEATE 0.5 % OP SOLN	68682-813-05	A9270	\$10.69	\$10.48	\$10.58	\$9.87	\$10.48
Inpatient/Outpatient	TIMOLOL MALEATE 0.5 % OP SOLN	60758-801-05	A9270	\$4.95	\$4.85	\$4.90	\$4.57	\$4.85
Inpatient/Outpatient	TOBRAMYCIN SULFATE 1.2 G IJ SOLR	39822-0412-1	J3260	\$248.78	\$243.80	\$246.29	\$229.62	\$243.80
Inpatient/Outpatient	TOBRAMYCIN SULFATE 1.2 G IJ SOLR	39822-0412-6	J3260	\$212.64	\$217.21	\$219.42	\$204.57	\$217.21
Inpatient/Outpatient	TOBRAMYCIN SULFATE 1.2 G IJ SOLR	63323-303-51	J3260	\$377.28	\$369.73	\$373.51	\$348.23	\$369.73
Inpatient/Outpatient	CABERGOLINE 0.5 MG PO TABS	49884-673-14	J8515	\$106.90	\$104.76	\$105.83	\$98.67	\$104.76
Inpatient/Outpatient	CABERGOLINE 0.5 MG PO TABS	0093-5420-88	J8515	\$13.45	\$13.18	\$13.32	\$12.41	\$13.18
Inpatient/Outpatient	CABERGOLINE 0.5 MG PO TABS	50742-118-08	J8515	\$15.19	\$14.89	\$15.04	\$14.02	\$14.89
Inpatient/Outpatient	CABERGOLINE 0.5 MG PO TABS	59762-1005-1	J8515	\$18.86	\$18.48	\$18.67	\$17.41	\$18.48
Inpatient/Outpatient	CABERGOLINE 0.5 MG PO TABS	23155-823-73	J8515	\$9.87	\$9.67	\$9.77	\$9.11	\$9.67
Inpatient/Outpatient	TRIAMTERENE 50 MG PO CAPS	65197-002-01	A9270	\$44.21	\$43.33	\$43.77	\$40.81	\$43.33
Inpatient/Outpatient	TRIAMTERENE 50 MG PO CAPS	59212-002-01	A9270	\$50.03	\$49.03	\$49.53	\$46.18	\$49.03
Inpatient/Outpatient	TRIAMTERENE 50 MG PO CAPS	66993-831-02	A9270	\$33.84	\$33.16	\$33.50	\$31.23	\$33.16
Inpatient/Outpatient	TRIFLURIDINE 1 % OP SOLN	61314-044-75	A9270	\$107.44	\$105.29	\$106.37	\$99.17	\$105.29
Inpatient/Outpatient	TRIFLURIDINE 1 % OP SOLN	61570-037-75	A9270	\$224.49	\$220.00	\$222.25	\$207.20	\$220.00
Inpatient/Outpatient	TRIFLURIDINE 1 % OP SOLN	59762-0040-1	A9270	\$114.10	\$111.82	\$112.96	\$105.31	\$111.82
Inpatient/Outpatient	POLYMYXIN B-TRIMETHOPRIM 10000-0.1 UNIT/ML-% OP SOLN	24208-315-10	A9270	\$2.67	\$2.62	\$2.64	\$2.46	\$2.62
Inpatient/Outpatient	POLYMYXIN B-TRIMETHOPRIM 10000-0.1 UNIT/ML-% OP SOLN	61314-628-10	A9270	\$1.83	\$1.79	\$1.81	\$1.69	\$1.79
Inpatient/Outpatient	POLYMYXIN B-TRIMETHOPRIM 10000-0.1 UNIT/ML-% OP SOLN	0023-7824-10	A9270	\$36.13	\$35.41	\$35.77	\$33.35	\$35.41
Inpatient/Outpatient	URSODIOL 300 MG PO CAPS	0527-1326-01	A9270	\$22.67	\$22.22	\$22.44	\$20.92	\$22.22
Inpatient/Outpatient	URSODIOL 300 MG PO CAPS	50268-796-15	A9270	\$24.36	\$23.87	\$24.12	\$22.48	\$23.87
Inpatient/Outpatient	URSODIOL 300 MG PO CAPS	42806-503-01	A9270	\$2.35	\$2.30	\$2.33	\$2.17	\$2.30
Inpatient/Outpatient	URSODIOL 300 MG PO CAPS	0591-3159-01	A9270	\$4.53	\$4.44	\$4.48	\$4.18	\$4.44
Inpatient/Outpatient	URSODIOL 300 MG PO CAPS	69238-1540-1	A9270	\$2.05	\$2.01	\$2.03	\$1.89	\$2.01
Inpatient/Outpatient	LIDOCAINE HCL 2 % (TOPICAL) EX GEL	17478-711-30		\$10.93	\$10.71	\$10.82	\$10.09	\$10.71
Inpatient/Outpatient	LIDOCAINE HCL 2 % (TOPICAL) EX GEL	17478-711-10		\$6.04	\$5.92	\$5.98	\$5.57	\$5.92
Inpatient/Outpatient	LIDOCAINE HCL 2 % (TOPICAL) EX GEL	25021-673-76		\$2.93	\$2.87	\$2.90	\$2.70	\$2.87
Inpatient/Outpatient	LIDOCAINE HCL 2 % (TOPICAL) EX GEL	25021-673-77		\$2.05	\$2.01	\$2.03	\$1.89	\$2.01
Inpatient/Outpatient	VECURONIUM BROMIDE 10 MG IV SOLR	0703-2914-03		\$30.62	\$30.01	\$30.31	\$28.26	\$30.01
Inpatient/Outpatient	VECURONIUM BROMIDE 10 MG IV SOLR	55390-037-10		\$29.16	\$28.58	\$28.87	\$26.91	\$28.58
Inpatient/Outpatient	VECURONIUM BROMIDE 10 MG IV SOLR	0703-2914-01		\$8.51	\$8.34	\$8.42	\$7.85	\$8.34
Inpatient/Outpatient	VECURONIUM BROMIDE 20 MG IV SOLR	63323-782-20		\$39.58	\$38.79	\$39.18	\$36.53	\$38.79
Inpatient/Outpatient	VECURONIUM BROMIDE 20 MG IV SOLR	47335-932-40		\$78.49	\$76.92	\$77.71	\$72.45	\$76.92
Inpatient/Outpatient	VECURONIUM BROMIDE 20 MG IV SOLR	25021-658-20		\$23.09	\$22.63	\$22.86	\$21.31	\$22.63
Inpatient/Outpatient	VECURONIUM BROMIDE 20 MG IV SOLR	0409-1634-01		\$59.55	\$58.36	\$58.95	\$54.96	\$58.36
Inpatient/Outpatient	WARFARIN SODIUM 1 MG PO TABS	0056-0169-75	A9270	\$9.33	\$9.14	\$9.24	\$8.61	\$9.14
Inpatient/Outpatient	WARFARIN SODIUM 1 MG PO TABS	51672-4027-1	A9270	\$0.48	\$0.47	\$0.48	\$0.44	\$0.47

Inpatient/Outpatient	WARFARIN SODIUM 1 MG PO TABS	0056-0169-01	A9270		\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	WARFARIN SODIUM 1 MG PO TABS	0056-0169-70	A9270		\$9.22	\$9.04	\$9.13	\$8.51	\$9.04
Inpatient/Outpatient	WARFARIN SODIUM 1 MG PO TABS	0832-1211-89	A9270		\$1.39	\$1.36	\$1.38	\$1.28	\$1.36
Inpatient/Outpatient	WARFARIN SODIUM 1 MG PO TABS	0093-1712-01	A9270		\$0.43	\$0.42	\$0.43	\$0.40	\$0.42
Inpatient/Outpatient	WARFARIN SODIUM 1 MG PO TABS	0832-1211-00	A9270		\$0.52	\$0.51	\$0.51	\$0.48	\$0.51
Inpatient/Outpatient	WITCH HAZEL-GLYCERIN EX PADS	0904-5059-60	A9150		\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	WITCH HAZEL-GLYCERIN EX PADS	49348-459-59	A9150		\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	WITCH HAZEL-GLYCERIN EX PADS	41388-007-32	A9150		\$0.39	\$0.38	\$0.39	\$0.36	\$0.38
Inpatient/Outpatient	WITCH HAZEL-GLYCERIN EX PADS	50289-3250-1	A9150		\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	ZIDOVUDINE 10 MG/ML IV SOLN	49702-213-05	J3485		\$6.73	\$6.60	\$6.66	\$6.21	\$6.60
Inpatient/Outpatient	ZIDOVUDINE 10 MG/ML IV SOLN	49702-213-01	J3485		\$6.59	\$6.46	\$6.52	\$6.08	\$6.46
Inpatient/Outpatient	ZIDOVUDINE 10 MG/ML PO SYRP	49702-212-48	A9270		\$1.22	\$1.20	\$1.21	\$1.13	\$1.20
Inpatient/Outpatient	ZOLPIDEM TARTRATE 5 MG PO TABS	51079-724-20	A9270		\$0.36	\$0.35	\$0.36	\$0.33	\$0.35
Inpatient/Outpatient	ZOLPIDEM TARTRATE 5 MG PO TABS	60505-2604-0	A9270		\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	ZOLPIDEM TARTRATE 5 MG PO TABS	51079-724-01	A9270		\$0.41	\$0.40	\$0.41	\$0.38	\$0.40
Inpatient/Outpatient	ZOLPIDEM TARTRATE 5 MG PO TABS	0904-6082-61	A9270		\$0.20	\$0.20	\$0.20	\$0.18	\$0.20
Inpatient/Outpatient	ZOLPIDEM TARTRATE 5 MG PO TABS	0378-5305-05	A9270		\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	ZOLPIDEM TARTRATE 5 MG PO TABS	0378-5305-01	A9270		\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	ZOLPIDEM TARTRATE 5 MG PO TABS	68084-189-01	A9270		\$0.51	\$0.50	\$0.50	\$0.47	\$0.50
Inpatient/Outpatient	ZOLPIDEM TARTRATE 5 MG PO TABS	68084-189-11	A9270		\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	ZOLPIDEM TARTRATE 5 MG PO TABS	16714-621-01	A9270		\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	DILTIAZEM HCL ER 120 MG PO CP12	0378-6120-01	A9270		\$14.46	\$14.17	\$14.32	\$13.35	\$14.17
Inpatient/Outpatient	DILTIAZEM HCL ER 120 MG PO CP12	51079-926-01	A9270		\$19.67	\$19.28	\$19.47	\$18.16	\$19.28
Inpatient/Outpatient	HAEMOPHILUS B POLYSAC CONJ VAC IM SOLR	49281-545-05		90648	\$132.98	\$130.32	\$131.65	\$122.74	\$130.32
Inpatient/Outpatient	HAEMOPHILUS B POLYSAC CONJ VAC IM SOLR	49281-547-58		90648	\$133.07	\$130.41	\$131.74	\$122.82	\$130.41
Inpatient/Outpatient	HAEMOPHILUS B POLYSAC CONJ VAC IM SOLR	49281-545-03		90648	\$82.49	\$80.84	\$81.67	\$76.14	\$80.84
Inpatient/Outpatient	LIDOCAINE-EPINEPHRINE 1.5 %-1:200000 IJ SOLN (ANES EPIDURAL KIT)	99999-1209-1			\$2.32	\$2.27	\$2.30	\$2.14	\$2.27
Inpatient/Outpatient	MECLIZINE HCL 12.5 MG PO TABS	51079-089-20	A9270		\$2.28	\$2.23	\$2.26	\$2.10	\$2.23
Inpatient/Outpatient	MECLIZINE HCL 12.5 MG PO TABS	51079-089-01	A9270		\$2.23	\$2.19	\$2.21	\$2.06	\$2.19
Inpatient/Outpatient	MECLIZINE HCL 12.5 MG PO TABS	0536-1017-01	A9270		\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	MECLIZINE HCL 12.5 MG PO TABS	69618-027-01	A9270		\$0.08	\$0.08	\$0.08	\$0.07	\$0.08
Inpatient/Outpatient	MECLIZINE HCL 12.5 MG PO TABS	65162-441-10	A9270		\$0.77	\$0.75	\$0.76	\$0.71	\$0.75
Inpatient/Outpatient	MECLIZINE HCL 12.5 MG PO TABS	0536-1178-01	A9270		\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	MECLIZINE HCL 25 MG PO TABS	49884-035-01	A9270		\$1.47	\$1.44	\$1.46	\$1.36	\$1.44
Inpatient/Outpatient	MECLIZINE HCL 25 MG PO TABS	51079-090-20	A9270		\$2.94	\$2.88	\$2.91	\$2.71	\$2.88
Inpatient/Outpatient	MECLIZINE HCL 25 MG PO TABS	51079-090-01	A9270		\$2.67	\$2.62	\$2.64	\$2.46	\$2.62
Inpatient/Outpatient	MECLIZINE HCL 25 MG PO TABS	0781-1375-01	A9270		\$0.55	\$0.54	\$0.54	\$0.51	\$0.54
Inpatient/Outpatient	MECLIZINE HCL 25 MG PO TABS	0904-6517-61	A9270		\$1.92	\$1.88	\$1.90	\$1.77	\$1.88
Inpatient/Outpatient	THEOPHYLLINE ER 100 MG PO TB12	50111-483-01	A9270		\$1.60	\$1.57	\$1.58	\$1.48	\$1.57
Inpatient/Outpatient	THEOPHYLLINE ER 100 MG PO TB12	50111-483-02	A9270		\$0.48	\$0.47	\$0.48	\$0.44	\$0.47
Inpatient/Outpatient	THEOPHYLLINE ER 200 MG PO TB12	0904-5888-61	A9270		\$2.23	\$2.19	\$2.21	\$2.06	\$2.19
Inpatient/Outpatient	QUINIDINE GLUCONATE ER 324 MG PO TBCR	51079-027-20	A9270		\$4.21	\$4.13	\$4.17	\$3.89	\$4.13
Inpatient/Outpatient	QUINIDINE GLUCONATE ER 324 MG PO TBCR	53489-141-01	A9270		\$24.57	\$24.08	\$24.32	\$22.68	\$24.08
Inpatient/Outpatient	QUINIDINE GLUCONATE ER 324 MG PO TBCR	51079-027-01	A9270		\$6.65	\$6.52	\$6.58	\$6.14	\$6.52
Inpatient/Outpatient	VENLAFAXINE HCL 25 MG PO TABS	0093-0199-01	A9270		\$0.63	\$0.62	\$0.62	\$0.58	\$0.62
Inpatient/Outpatient	VENLAFAXINE HCL 25 MG PO TABS	16714-311-01	A9270		\$1.09	\$1.07	\$1.08	\$1.01	\$1.07
Inpatient/Outpatient	VENLAFAXINE HCL 25 MG PO TABS	57664-392-88	A9270		\$0.43	\$0.42	\$0.43	\$0.40	\$0.42
Inpatient/Outpatient	VENLAFAXINE HCL 25 MG PO TABS	16714-655-01	A9270		\$0.50	\$0.49	\$0.50	\$0.46	\$0.49
Inpatient/Outpatient	VENLAFAXINE HCL 25 MG PO TABS	57237-172-01	A9270		\$0.61	\$0.60	\$0.60	\$0.56	\$0.60
Inpatient/Outpatient	VENLAFAXINE HCL 50 MG PO TABS	0093-7381-01	A9270		\$1.09	\$1.07	\$1.08	\$1.01	\$1.07
Inpatient/Outpatient	VENLAFAXINE HCL 50 MG PO TABS	16714-313-01	A9270		\$1.19	\$1.17	\$1.18	\$1.10	\$1.17
Inpatient/Outpatient	VENLAFAXINE HCL 50 MG PO TABS	57664-394-88	A9270		\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	VENLAFAXINE HCL 50 MG PO TABS	68084-900-25	A9270		\$3.42	\$3.35	\$3.39	\$3.16	\$3.35
Inpatient/Outpatient	VENLAFAXINE HCL 50 MG PO TABS	68084-900-95	A9270		\$3.42	\$3.35	\$3.39	\$3.16	\$3.35
Inpatient/Outpatient	VENLAFAXINE HCL 50 MG PO TABS	50268-800-11	A9270		\$3.40	\$3.33	\$3.37	\$3.14	\$3.33
Inpatient/Outpatient	VENLAFAXINE HCL 75 MG PO TABS	0093-7382-01	A9270		\$1.59	\$1.56	\$1.57	\$1.47	\$1.56
Inpatient/Outpatient	VENLAFAXINE HCL 75 MG PO TABS	16714-314-01	A9270		\$1.15	\$1.13	\$1.14	\$1.06	\$1.13
Inpatient/Outpatient	VENLAFAXINE HCL 75 MG PO TABS	68084-331-11	A9270		\$3.90	\$3.82	\$3.86	\$3.60	\$3.82
Inpatient/Outpatient	VENLAFAXINE HCL 75 MG PO TABS	68084-856-11	A9270		\$1.78	\$1.74	\$1.76	\$1.64	\$1.74
Inpatient/Outpatient	VENLAFAXINE HCL 75 MG PO TABS	50268-801-11	A9270		\$1.96	\$1.92	\$1.94	\$1.81	\$1.92
Inpatient/Outpatient	VENLAFAXINE HCL 75 MG PO TABS	57664-395-88	A9270		\$0.49	\$0.48	\$0.49	\$0.45	\$0.48
Inpatient/Outpatient	VENLAFAXINE HCL 37.5 MG PO TABS	0093-7380-01	A9270		\$1.12	\$1.10	\$1.11	\$1.03	\$1.10
Inpatient/Outpatient	VENLAFAXINE HCL 37.5 MG PO TABS	16714-312-01	A9270		\$0.91	\$0.89	\$0.90	\$0.84	\$0.89
Inpatient/Outpatient	VENLAFAXINE HCL 37.5 MG PO TABS	68084-844-01	A9270		\$1.83	\$1.79	\$1.81	\$1.69	\$1.79
Inpatient/Outpatient	VENLAFAXINE HCL 37.5 MG PO TABS	68084-844-11	A9270		\$1.66	\$1.63	\$1.64	\$1.53	\$1.63
Inpatient/Outpatient	ONABOTULINUMTOXINA 100 UNITS IJ SOLR	0023-1145-01	J0585		\$2,161.94	\$2,118.70	\$2,140.32	\$1,995.47	\$2,118.70
Inpatient/Outpatient	BENZYL ALCOHOL 10 % MT GEL	50486-46802	A9150		\$3.40	\$3.33	\$3.37	\$3.14	\$3.33
Inpatient/Outpatient	NICARDIPINE HCL 2.5 MG/ML IV SOLN	0781-3204-70			\$84.66	\$82.97	\$83.81	\$78.14	\$82.97

Inpatient/Outpatient	NICARDIPINE HCL 2.5 MG/ML IV SOLN	67457-224-10	\$6.64	\$6.51	\$6.57	\$6.13	\$6.51
Inpatient/Outpatient	NICARDIPINE HCL 2.5 MG/ML IV SOLN	0143-9542-01	\$7.37	\$7.22	\$7.30	\$6.80	\$7.22
Inpatient/Outpatient	NICARDIPINE HCL 2.5 MG/ML IV SOLN	0143-9689-10	\$4.52	\$4.43	\$4.47	\$4.17	\$4.43
Inpatient/Outpatient	NICARDIPINE HCL 2.5 MG/ML IV SOLN	0143-9689-01	\$7.22	\$7.08	\$7.15	\$6.66	\$7.08
Inpatient/Outpatient	NICARDIPINE HCL 2.5 MG/ML IV SOLN	55150-183-01	\$10.32	\$10.11	\$10.22	\$9.53	\$10.11
Inpatient/Outpatient	FLUTICASONE-SALMETEROL 250-50 MCG/ACT IN AEPB	0173-0696-04 A9270	\$36.29	\$35.56	\$35.93	\$33.50	\$35.56
Inpatient/Outpatient	FLUTICASONE-SALMETEROL 250-50 MCG/ACT IN AEPB	0173-0696-00 A9270	\$29.40	\$28.81	\$29.11	\$27.14	\$28.81
Inpatient/Outpatient	FLUTICASONE-SALMETEROL 250-50 MCG/ACT IN AEPB	0054-0327-56 A9270	\$7.95	\$7.79	\$7.87	\$7.34	\$7.79
Inpatient/Outpatient	DIPHENHYDRAMINE HCL 12.5 MG/5ML PO LIQD	0536-0770-97 Q0163	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	DIPHENHYDRAMINE HCL 12.5 MG/5ML PO LIQD	0603-0823-94 Q0163	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	DIPHENHYDRAMINE HCL 12.5 MG/5ML PO LIQD	68094-024-59 Q0163	\$0.70	\$0.69	\$0.69	\$0.65	\$0.69
Inpatient/Outpatient	DIPHENHYDRAMINE HCL 12.5 MG/5ML PO LIQD	49348-045-34 Q0163	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	DIPHENHYDRAMINE HCL 12.5 MG/5ML PO LIQD	50580-535-04 Q0163	\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	IPRATROPIUM BROMIDE 0.02 % IN SOLN	0487-9801-01	\$0.40	\$0.39	\$0.40	\$0.37	\$0.39
Inpatient/Outpatient	IPRATROPIUM BROMIDE 0.02 % IN SOLN	0591-3798-30	\$0.29	\$0.28	\$0.29	\$0.27	\$0.28
Inpatient/Outpatient	IPRATROPIUM BROMIDE 0.02 % IN SOLN	76204-100-01	\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	CHLORDIAZEPOXIDE HCL 25 MG PO CAPS	51079-141-20 A9270	\$2.40	\$2.35	\$2.38	\$2.22	\$2.35
Inpatient/Outpatient	CHLORDIAZEPOXIDE HCL 25 MG PO CAPS	51079-141-01 A9270	\$2.40	\$2.35	\$2.38	\$2.22	\$2.35
Inpatient/Outpatient	CHLORDIAZEPOXIDE HCL 25 MG PO CAPS	0555-0159-04 A9270	\$0.63	\$0.62	\$0.62	\$0.58	\$0.62
Inpatient/Outpatient	CHLORDIAZEPOXIDE HCL 25 MG PO CAPS	0555-0159-02 A9270	\$0.75	\$0.74	\$0.74	\$0.69	\$0.74
Inpatient/Outpatient	TRIAMTERENE-HCTZ 37.5-25 MG PO CAPS	51079-935-01 A9270	\$0.22	\$0.22	\$0.22	\$0.20	\$0.22
Inpatient/Outpatient	TRIAMTERENE-HCTZ 37.5-25 MG PO CAPS	51079-935-20 A9270	\$1.22	\$1.20	\$1.21	\$1.13	\$1.20
Inpatient/Outpatient	TRIAMTERENE-HCTZ 37.5-25 MG PO CAPS	0007-3650-30 A9270	\$9.38	\$9.19	\$9.29	\$8.66	\$9.19
Inpatient/Outpatient	TRIAMTERENE-HCTZ 37.5-25 MG PO CAPS	0781-2074-01 A9270	\$0.32	\$0.31	\$0.32	\$0.30	\$0.31
Inpatient/Outpatient	ROCURONIUM BROMIDE 100 MG/10ML IV SOLN	67457-228-10	\$2.02	\$1.98	\$2.00	\$1.86	\$1.98
Inpatient/Outpatient	ROCURONIUM BROMIDE 100 MG/10ML IV SOLN	39822-4200-5	\$3.39	\$3.32	\$3.36	\$3.13	\$3.32
Inpatient/Outpatient	ROCURONIUM BROMIDE 100 MG/10ML IV SOLN	0409-9558-10	\$2.75	\$2.70	\$2.72	\$2.54	\$2.70
Inpatient/Outpatient	ROCURONIUM BROMIDE 100 MG/10ML IV SOLN	25021-662-10	\$5.43	\$5.32	\$5.38	\$5.01	\$5.32
Inpatient/Outpatient	ROCURONIUM BROMIDE 100 MG/10ML IV SOLN	0781-3220-70	\$3.94	\$3.86	\$3.90	\$3.64	\$3.86
Inpatient/Outpatient	PILOCARPINE HCL 5 MG PO TABS	0054-0056-25 A9270	\$3.32	\$3.25	\$3.29	\$3.06	\$3.25
Inpatient/Outpatient	PILOCARPINE HCL 5 MG PO TABS	0527-1313-01 A9270	\$1.75	\$1.72	\$1.73	\$1.62	\$1.72
Inpatient/Outpatient	PILOCARPINE HCL 5 MG PO TABS	0115-5922-01 A9270	\$4.33	\$4.24	\$4.29	\$4.00	\$4.24
Inpatient/Outpatient	PILOCARPINE HCL 5 MG PO TABS	16714-121-01 A9270	\$1.64	\$1.61	\$1.62	\$1.51	\$1.61
Inpatient/Outpatient	PILOCARPINE HCL 5 MG PO TABS	0574-0792-01 A9270	\$0.51	\$0.50	\$0.50	\$0.47	\$0.50
Inpatient/Outpatient	FENTANYL IV SYRINGE 1 MCG/ML (NICU)(DOSES < 0.5 MCG)	99999-003-05 J3010	\$1.45	\$1.42	\$1.44	\$1.34	\$1.42
Inpatient/Outpatient	CADEXOMER IODINE 0.9 % EX GEL	40565-12249 A9270	\$9.20	\$9.02	\$9.11	\$8.49	\$9.02
Inpatient/Outpatient	CADEXOMER IODINE 0.9 % EX GEL	99999-123-01 A9270	\$9.20	\$9.02	\$9.11	\$8.49	\$9.02
Inpatient/Outpatient	LAN-O-SOOTHE EX CREA	92771-59007 A9270	\$0.99	\$0.97	\$0.98	\$0.91	\$0.97
Inpatient/Outpatient	LAN-O-SOOTHE EX CREA	44677-10202 A9270	\$1.36	\$1.33	\$1.35	\$1.26	\$1.33
Inpatient/Outpatient	CLARITHROMYCIN 125 MG/5ML PO SUSR	68774-302-35 A9270	\$1.16	\$1.14	\$1.15	\$1.07	\$1.14
Inpatient/Outpatient	CLARITHROMYCIN 125 MG/5ML PO SUSR	0781-6022-46 A9270	\$3.95	\$3.87	\$3.91	\$3.65	\$3.87
Inpatient/Outpatient	CLARITHROMYCIN 250 MG/5ML PO SUSR	0781-6023-46 A9270	\$5.45	\$5.34	\$5.40	\$5.03	\$5.34
Inpatient/Outpatient	PENTOSAN POLYSULFATE SODIUM 100 MG PO CAPS	50458-098-01 A9270	\$47.61	\$46.66	\$47.13	\$43.94	\$46.66
Inpatient/Outpatient	TACROLIMUS 1 MG PO CAPS	0781-2103-01 J7507	\$0.82	\$0.80	\$0.81	\$0.76	\$0.80
Inpatient/Outpatient	TACROLIMUS 1 MG PO CAPS	0469-0617-73 J7507	\$28.44	\$27.87	\$28.16	\$26.25	\$27.87
Inpatient/Outpatient	TACROLIMUS 1 MG PO CAPS	16729-042-01 J7507	\$3.51	\$3.44	\$3.47	\$3.24	\$3.44
Inpatient/Outpatient	TACROLIMUS 1 MG PO CAPS	68084-450-11 J7507	\$18.66	\$18.29	\$18.47	\$17.22	\$18.29
Inpatient/Outpatient	TACROLIMUS 1 MG PO CAPS	0904-6425-61 J7507	\$8.39	\$8.22	\$8.31	\$7.74	\$8.22
Inpatient/Outpatient	TACROLIMUS 1 MG PO CAPS	51079-818-01 J7507	\$2.80	\$2.74	\$2.77	\$2.58	\$2.74
Inpatient/Outpatient	TACROLIMUS 5 MG PO CAPS	0469-0657-73 J7507	\$155.10	\$152.00	\$153.55	\$143.16	\$152.00
Inpatient/Outpatient	TACROLIMUS 5 MG PO CAPS	0781-2104-01 J7507	\$14.32	\$14.03	\$14.18	\$13.22	\$14.03
Inpatient/Outpatient	TACROLIMUS 5 MG PO CAPS	16729-043-01 J7507	\$4.24	\$4.16	\$4.20	\$3.91	\$4.16
Inpatient/Outpatient	TACROLIMUS 5 MG PO CAPS	69452-155-20 J7507	\$20.69	\$20.28	\$20.48	\$19.10	\$20.28
Inpatient/Outpatient	TACROLIMUS 5 MG PO CAPS	0378-2047-01 J7507	\$10.07	\$9.87	\$9.97	\$9.29	\$9.87
Inpatient/Outpatient	TACROLIMUS 5 MG PO CAPS	64380-722-06 J7507	\$3.39	\$3.32	\$3.36	\$3.13	\$3.32
Inpatient/Outpatient	VERAPAMIL HCL ER 240 MG PO TBCR	51079-869-01 A9270	\$0.59	\$0.58	\$0.58	\$0.54	\$0.58
Inpatient/Outpatient	VERAPAMIL HCL ER 240 MG PO TBCR	51079-869-20 A9270	\$7.67	\$7.52	\$7.59	\$7.08	\$7.52
Inpatient/Outpatient	VERAPAMIL HCL ER 240 MG PO TBCR	57664-118-88 A9270	\$0.52	\$0.51	\$0.51	\$0.48	\$0.51
Inpatient/Outpatient	VERAPAMIL HCL ER 240 MG PO TBCR	0025-1891-31 A9270	\$40.23	\$39.43	\$39.83	\$37.13	\$39.43
Inpatient/Outpatient	VERAPAMIL HCL ER 240 MG PO TBCR	68462-260-01 A9270	\$1.39	\$1.36	\$1.38	\$1.28	\$1.36
Inpatient/Outpatient	VERAPAMIL HCL ER 240 MG PO TBCR	75834-159-01 A9270	\$0.79	\$0.77	\$0.78	\$0.73	\$0.77
Inpatient/Outpatient	LISINAPRIL 2.5 MG PO TABS	0172-3757-60 A9270	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	LISINAPRIL 2.5 MG PO TABS	63304-531-01 A9270	\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	LISINAPRIL 2.5 MG PO TABS	0172-3757-10 A9270	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	LISINAPRIL 2.5 MG PO TABS	0143-1265-01 A9270	\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	LISINAPRIL 2.5 MG PO TABS	64679-927-01 A9270	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	LISINAPRIL 2.5 MG PO TABS	68180-512-02 A9270	\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	LISINAPRIL 2.5 MG PO TABS	0378-2072-01 A9270	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05

Inpatient/Outpatient	LISINOPRIL 2.5 MG PO TABS	68180-512-01	A9270	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	LISINOPRIL 2.5 MG PO TABS	0185-0602-01	A9270	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	LISINOPRIL 2.5 MG PO TABS	43547-414-10	A9270	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	LISINOPRIL 2.5 MG PO TABS	43547-351-10	A9270	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	VALACYCLOVIR HCL 500 MG PO TABS	0173-0933-56	A9270	\$59.67	\$58.48	\$59.07	\$55.08	\$58.48
Inpatient/Outpatient	VALACYCLOVIR HCL 500 MG PO TABS	0173-0933-08	A9270	\$55.22	\$54.12	\$54.67	\$50.97	\$54.12
Inpatient/Outpatient	VALACYCLOVIR HCL 500 MG PO TABS	68084-408-11	A9270	\$15.54	\$15.23	\$15.38	\$14.34	\$15.23
Inpatient/Outpatient	VALACYCLOVIR HCL 500 MG PO TABS	51079-093-01	A9270	\$12.55	\$12.30	\$12.42	\$11.58	\$12.30
Inpatient/Outpatient	VALACYCLOVIR HCL 500 MG PO TABS	0904-6565-61	A9270	\$5.43	\$5.32	\$5.38	\$5.01	\$5.32
Inpatient/Outpatient	VALACYCLOVIR HCL 500 MG PO TABS	63739-525-10	A9270	\$4.93	\$4.83	\$4.88	\$4.55	\$4.83
Inpatient/Outpatient	VALACYCLOVIR HCL 500 MG PO TABS	68084-215-11	A9270	\$6.02	\$5.90	\$5.96	\$5.56	\$5.90
Inpatient/Outpatient	VALACYCLOVIR HCL 500 MG PO TABS	65862-448-90	A9270	\$1.11	\$1.09	\$1.10	\$1.02	\$1.09
Inpatient/Outpatient	VALACYCLOVIR HCL 500 MG PO TABS	63739-077-10	A9270	\$4.51	\$4.42	\$4.46	\$4.16	\$4.42
Inpatient/Outpatient	VERAPAMIL HCL ER 120 MG PO TBCR	0172-4285-10	A9270	\$1.06	\$1.04	\$1.05	\$0.98	\$1.04
Inpatient/Outpatient	VERAPAMIL HCL ER 120 MG PO TBCR	51079-894-01	A9270	\$4.57	\$4.48	\$4.52	\$4.22	\$4.48
Inpatient/Outpatient	VERAPAMIL HCL ER 120 MG PO TBCR	51079-894-20	A9270	\$7.01	\$6.87	\$6.94	\$6.47	\$6.87
Inpatient/Outpatient	VERAPAMIL HCL ER 120 MG PO TBCR	0172-4285-00	A9270	\$1.09	\$1.07	\$1.08	\$1.01	\$1.07
Inpatient/Outpatient	VERAPAMIL HCL ER 120 MG PO TBCR	68462-292-01	A9270	\$1.16	\$1.14	\$1.15	\$1.07	\$1.14
Inpatient/Outpatient	FLUTICASONE-SALMETEROL 500-50 MCG/ACT IN AEPB	0173-0697-04	A9270	\$47.74	\$46.79	\$47.26	\$44.06	\$46.79
Inpatient/Outpatient	FAMCICLOVIR 500 MG PO TABS	0078-0368-15	A9270	\$72.12	\$70.68	\$71.40	\$66.57	\$70.68
Inpatient/Outpatient	FAMCICLOVIR 500 MG PO TABS	0093-8119-56	A9270	\$2.52	\$2.47	\$2.49	\$2.33	\$2.47
Inpatient/Outpatient	FAMCICLOVIR 500 MG PO TABS	16714-305-01	A9270	\$7.78	\$7.62	\$7.70	\$7.18	\$7.62
Inpatient/Outpatient	FAMCICLOVIR 500 MG PO TABS	60687-103-95	A9270	\$10.58	\$10.37	\$10.47	\$9.77	\$10.37
Inpatient/Outpatient	FAMCICLOVIR 500 MG PO TABS	16714-616-01	A9270	\$13.17	\$12.91	\$13.04	\$12.16	\$12.91
Inpatient/Outpatient	FAMCICLOVIR 500 MG PO TABS	60505-3247-3	A9270	\$1.87	\$1.83	\$1.85	\$1.73	\$1.83
Inpatient/Outpatient	SUMATRIPTAN SUCCINATE 100 MG PO TABS	0093-0224-90	A9270	\$18.20	\$17.84	\$18.02	\$16.80	\$17.84
Inpatient/Outpatient	SUMATRIPTAN SUCCINATE 100 MG PO TABS	0173-0737-01	A9270	\$293.55	\$287.68	\$290.61	\$270.95	\$287.68
Inpatient/Outpatient	SUMATRIPTAN SUCCINATE 100 MG PO TABS	55111-293-09	A9270	\$8.61	\$8.44	\$8.52	\$7.95	\$8.44
Inpatient/Outpatient	SUMATRIPTAN SUCCINATE 100 MG PO TABS	16714-533-11	A9270	\$2.20	\$2.16	\$2.18	\$2.03	\$2.16
Inpatient/Outpatient	SUMATRIPTAN SUCCINATE 100 MG PO TABS	16714-533-10	A9270	\$2.40	\$2.35	\$2.38	\$2.22	\$2.35
Inpatient/Outpatient	SUMATRIPTAN SUCCINATE 100 MG PO TABS	59762-1852-9	A9270	\$10.44	\$10.23	\$10.34	\$9.64	\$10.23
Inpatient/Outpatient	SUMATRIPTAN SUCCINATE 100 MG PO TABS	16714-798-01	A9270	\$2.29	\$2.24	\$2.27	\$2.11	\$2.24
Inpatient/Outpatient	FLUCONAZOLE 150 MG PO TABS	0049-3500-79	A9270	\$271.42	\$265.99	\$268.71	\$250.52	\$265.99
Inpatient/Outpatient	FLUCONAZOLE 150 MG PO TABS	0172-5412-11	A9270	\$12.71	\$12.46	\$12.58	\$11.73	\$12.46
Inpatient/Outpatient	FLUCONAZOLE 150 MG PO TABS	0172-5412-79	A9270	\$0.89	\$0.87	\$0.88	\$0.82	\$0.87
Inpatient/Outpatient	FLUCONAZOLE 150 MG PO TABS	59762-5017-1	A9270	\$9.36	\$9.17	\$9.27	\$8.64	\$9.17
Inpatient/Outpatient	FLUCONAZOLE 150 MG PO TABS	57237-005-11	A9270	\$13.61	\$13.34	\$13.47	\$12.56	\$13.34
Inpatient/Outpatient	FLUCONAZOLE 150 MG PO TABS	55111-145-71	A9270	\$67.71	\$66.36	\$67.03	\$62.50	\$66.36
Inpatient/Outpatient	FLUCONAZOLE 150 MG PO TABS	16714-692-10	A9270	\$4.59	\$4.50	\$4.54	\$4.24	\$4.50
Inpatient/Outpatient	FLUCONAZOLE 150 MG PO TABS	68462-119-40	A9270	\$3.49	\$3.42	\$3.46	\$3.22	\$3.42
Inpatient/Outpatient	FLUCONAZOLE 150 MG PO TABS	67405-603-01	A9270	\$3.98	\$3.90	\$3.94	\$3.67	\$3.90
Inpatient/Outpatient	FLUCONAZOLE 150 MG PO TABS	62559-992-12	A9270	\$3.77	\$3.69	\$3.73	\$3.48	\$3.69
Inpatient/Outpatient	BISACODYL 5 MG PO TBEC	0603-2483-21	A9150	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	BISACODYL 5 MG PO TBEC	0904-7927-17	A9150	\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	BISACODYL 5 MG PO TBEC	0904-7927-60	A9150	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	BISACODYL 5 MG PO TBEC	0904-7927-61	A9150	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	BISACODYL 5 MG PO TBEC	0904-7927-80	A9150	\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	BISACODYL 5 MG PO TBEC	57896-441-01	A9150	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	BISACODYL 5 MG PO TBEC	0904-6407-61	A9150	\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	BISACODYL 5 MG PO TBEC	38485-14001	A9150	\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	BISACODYL 5 MG PO TBEC	0904-6748-80	A9150	\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	ASPIRIN 325 MG PO TBEC	10135-126-13		\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	ASPIRIN 325 MG PO TBEC	63739-523-01		\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	ASPIRIN 325 MG PO TBEC	0904-2011-59		\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	ASPIRIN 325 MG PO TBEC	63739-023-01		\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	ASPIRIN 325 MG PO TBEC	68084-848-95		\$2.16	\$2.12	\$2.14	\$1.99	\$2.12
Inpatient/Outpatient	ASPIRIN 325 MG PO TBEC	69618-015-01		\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	ASPIRIN 325 MG PO TBEC	0536-1232-01		\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	THEOPHYLLINE ER 300 MG PO TB12	0904-5889-61	A9270	\$1.95	\$1.91	\$1.93	\$1.80	\$1.91
Inpatient/Outpatient	THEOPHYLLINE ER 300 MG PO TB12	62332-025-31	A9270	\$13.23	\$12.97	\$13.10	\$12.21	\$12.97
Inpatient/Outpatient	THEOPHYLLINE ER 300 MG PO TB12	68462-721-01	A9270	\$12.93	\$12.67	\$12.80	\$11.93	\$12.67
Inpatient/Outpatient	GUAIFENESIN 100 MG/5ML PO LIQD	61787-063-04	A9150	\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	GUAIFENESIN 100 MG/5ML PO LIQD	0121-1488-10	A9150	\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	GUAIFENESIN 100 MG/5ML PO LIQD	0536-1182-85	A9150	\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	BACITRACIN (ZINC) 500 UNIT/GM EX OINT (WRAP)	59390-026-17	A9150	\$0.77	\$0.75	\$0.76	\$0.71	\$0.75
Inpatient/Outpatient	BACITRACIN (ZINC) 500 UNIT/GM EX OINT (WRAP)	45802-060-70	A9150	\$0.60	\$0.59	\$0.59	\$0.55	\$0.59
Inpatient/Outpatient	BACITRACIN (ZINC) 500 UNIT/GM EX OINT (WRAP)	0168-0011-31	A9150	\$0.55	\$0.54	\$0.54	\$0.51	\$0.54
Inpatient/Outpatient	BACITRACIN (ZINC) 500 UNIT/GM EX OINT (WRAP)	0168-0111-09	A9150	\$0.73	\$0.72	\$0.72	\$0.67	\$0.72

Inpatient/Outpatient	BACITRACIN (ZINC) 500 UNIT/GM EX OINT (WRAP)	37205-275-10	A9150	\$0.56	\$0.55	\$0.55	\$0.52	\$0.55
Inpatient/Outpatient	BACITRACIN (ZINC) 500 UNIT/GM EX OINT (WRAP)	49348-154-72	A9150	\$0.39	\$0.38	\$0.39	\$0.36	\$0.38
Inpatient/Outpatient	BACITRACIN (ZINC) 500 UNIT/GM EX OINT (WRAP)	51672-2075-2	A9150	\$0.43	\$0.42	\$0.43	\$0.40	\$0.42
Inpatient/Outpatient	BACITRACIN (ZINC) 500 UNIT/GM EX OINT (WRAP)	54162-017-09	A9150	\$0.36	\$0.35	\$0.36	\$0.33	\$0.35
Inpatient/Outpatient	BACITRACIN (ZINC) 500 UNIT/GM EX OINT (WRAP)	54162-017-15	A9150	\$0.37	\$0.36	\$0.37	\$0.34	\$0.36
Inpatient/Outpatient	BACITRACIN (ZINC) 500 UNIT/GM EX OINT (WRAP)	0904-6679-67	A9150	\$0.62	\$0.61	\$0.61	\$0.57	\$0.61
Inpatient/Outpatient	BACITRACIN (ZINC) 500 UNIT/GM EX OINT (WRAP)	11527-163-51	A9150	\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	BACITRACIN (ZINC) 500 UNIT/GM EX OINT (WRAP)	45802-060-01	A9150	\$0.32	\$0.31	\$0.32	\$0.30	\$0.31
Inpatient/Outpatient	BACITRACIN (ZINC) 500 UNIT/GM EX OINT (WRAP)	0472-1105-56	A9150	\$0.30	\$0.29	\$0.30	\$0.28	\$0.29
Inpatient/Outpatient	BACITRACIN (ZINC) 500 UNIT/GM EX OINT (WRAP)	58980-011-10	A9150	\$0.32	\$0.31	\$0.32	\$0.30	\$0.31
Inpatient/Outpatient	BACITRACIN (ZINC) 500 UNIT/GM EX OINT (WRAP)	0904-8804-67	A9150	\$0.44	\$0.44	\$0.44	\$0.41	\$0.43
Inpatient/Outpatient	BACITRACIN (ZINC) 500 UNIT/GM EX OINT (WRAP)	57896-111-09	A9150	\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	BACITRACIN (ZINC) 500 UNIT/GM EX OINT (WRAP)	61269-105-56	A9150	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	BACITRACIN (ZINC) 500 UNIT/GM EX OINT (WRAP)	0904-7023-67	A9150	\$0.39	\$0.38	\$0.39	\$0.36	\$0.38
Inpatient/Outpatient	ASCORBIC ACID 25000 MG/50ML IV SOLN	67157-101-50		\$22.25	\$21.81	\$22.03	\$20.54	\$21.81
Inpatient/Outpatient	ASCORBIC ACID 25000 MG/50ML IV SOLN	67157-101-51		\$17.39	\$17.04	\$17.22	\$16.05	\$17.04
Inpatient/Outpatient	LAMOTRIGINE 25 MG PO TABS	0173-0633-02	A9270	\$57.40	\$56.25	\$56.83	\$52.98	\$56.25
Inpatient/Outpatient	LAMOTRIGINE 25 MG PO TABS	0093-0039-01	A9270	\$0.97	\$0.95	\$0.96	\$0.90	\$0.95
Inpatient/Outpatient	LAMOTRIGINE 25 MG PO TABS	16714-371-02	A9270	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	LAMOTRIGINE 25 MG PO TABS	51672-4130-1	A9270	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	LAMOTRIGINE 25 MG PO TABS	63739-670-10	A9270	\$0.49	\$0.48	\$0.49	\$0.45	\$0.48
Inpatient/Outpatient	LAMOTRIGINE 25 MG PO TABS	16714-700-01	A9270	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	LAMOTRIGINE 25 MG PO TABS	68084-318-11	A9270	\$0.72	\$0.71	\$0.71	\$0.66	\$0.71
Inpatient/Outpatient	LAMOTRIGINE 25 MG PO TABS	0904-7007-61	A9270	\$0.55	\$0.54	\$0.54	\$0.51	\$0.54
Inpatient/Outpatient	LAMOTRIGINE 100 MG PO TABS	0173-0642-55	A9270	\$65.57	\$64.26	\$64.91	\$60.52	\$64.26
Inpatient/Outpatient	LAMOTRIGINE 100 MG PO TABS	0093-0463-01	A9270	\$1.05	\$1.03	\$1.04	\$0.97	\$1.03
Inpatient/Outpatient	LAMOTRIGINE 100 MG PO TABS	59746-246-01	A9270	\$0.32	\$0.31	\$0.32	\$0.30	\$0.31
Inpatient/Outpatient	LAMOTRIGINE 100 MG PO TABS	16714-372-02	A9270	\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	LAMOTRIGINE 100 MG PO TABS	51079-499-01	A9270	\$0.50	\$0.49	\$0.50	\$0.46	\$0.49
Inpatient/Outpatient	LAMOTRIGINE 100 MG PO TABS	68084-319-11	A9270	\$0.77	\$0.75	\$0.76	\$0.71	\$0.75
Inpatient/Outpatient	LAMOTRIGINE 100 MG PO TABS	63739-179-10	A9270	\$0.48	\$0.47	\$0.48	\$0.44	\$0.47
Inpatient/Outpatient	LAMOTRIGINE 100 MG PO TABS	0904-7008-61	A9270	\$0.44	\$0.43	\$0.44	\$0.41	\$0.43
Inpatient/Outpatient	LAMOTRIGINE 100 MG PO TABS	68084-319-01	A9270	\$0.72	\$0.71	\$0.71	\$0.66	\$0.71
Inpatient/Outpatient	LAMOTRIGINE 200 MG PO TABS	0093-7248-06	A9270	\$1.25	\$1.23	\$1.24	\$1.15	\$1.23
Inpatient/Outpatient	LAMOTRIGINE 200 MG PO TABS	0173-0644-60	A9270	\$78.23	\$76.67	\$77.45	\$72.21	\$76.67
Inpatient/Outpatient	LAMOTRIGINE 200 MG PO TABS	59746-248-60	A9270	\$0.51	\$0.50	\$0.50	\$0.47	\$0.50
Inpatient/Outpatient	LAMOTRIGINE 200 MG PO TABS	16714-374-04	A9270	\$0.43	\$0.42	\$0.43	\$0.40	\$0.42
Inpatient/Outpatient	LAMOTRIGINE 200 MG PO TABS	16714-703-01	A9270	\$0.37	\$0.36	\$0.37	\$0.34	\$0.36
Inpatient/Outpatient	LAMOTRIGINE 200 MG PO TABS	29300-114-16	A9270	\$0.52	\$0.51	\$0.51	\$0.48	\$0.51
Inpatient/Outpatient	LAMOTRIGINE 200 MG PO TABS	69102-320-01	A9270	\$0.50	\$0.49	\$0.50	\$0.46	\$0.49
Inpatient/Outpatient	LAMOTRIGINE 200 MG PO TABS	51672-4133-4	A9270	\$0.24	\$0.24	\$0.24	\$0.22	\$0.24
Inpatient/Outpatient	MAGNESIUM CHLORIDE 64 MG PO TBEC	68585-00575	A9150	\$0.29	\$0.28	\$0.29	\$0.27	\$0.28
Inpatient/Outpatient	ACETAMINOPHEN-CODEINE #3 300-30 MG PO TABS	0406-0484-62	A9270	\$0.54	\$0.53	\$0.53	\$0.50	\$0.53
Inpatient/Outpatient	ACETAMINOPHEN-CODEINE #3 300-30 MG PO TABS	63739-004-10	A9270	\$2.60	\$2.55	\$2.57	\$2.40	\$2.55
Inpatient/Outpatient	ACETAMINOPHEN-CODEINE #3 300-30 MG PO TABS	0406-0484-23	A9270	\$0.54	\$0.53	\$0.53	\$0.50	\$0.53
Inpatient/Outpatient	ACETAMINOPHEN-CODEINE #3 300-30 MG PO TABS	0406-0484-01	A9270	\$0.42	\$0.41	\$0.42	\$0.39	\$0.41
Inpatient/Outpatient	MOISTURIZING EX CREAM	72140-00022	A9150	\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	MOISTURIZING EX CREAM	10356-090-04	A9150	\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	MOISTURIZING EX CREAM	54162-600-02	A9150	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	MOISTURIZING EX CREAM	54162-600-01	A9150	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	MOISTURIZING EX CREAM	61924-174-04	A9150	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	MOISTURIZING EX CREAM	61924-178-04	A9150	\$0.21	\$0.21	\$0.21	\$0.19	\$0.21
Inpatient/Outpatient	MOISTURIZING EX CREAM	72140-00021	A9150	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	MOISTURIZING EX CREAM	72140-03868	A9150	\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	MOISTURIZING EX CREAM	0904-7751-27	A9150	\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	MOISTURIZING EX CREAM	71399-0544-4	A9150	\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	DILTIAZEM HCL ER 60 MG PO CP12	51079-924-01	A9270	\$3.67	\$3.60	\$3.63	\$3.39	\$3.60
Inpatient/Outpatient	DILTIAZEM HCL ER 60 MG PO CP12	51079-924-20	A9270	\$11.98	\$11.74	\$11.86	\$11.06	\$11.74
Inpatient/Outpatient	DILTIAZEM HCL ER 60 MG PO CP12	0378-6060-01	A9270	\$12.33	\$12.08	\$12.21	\$11.38	\$12.08
Inpatient/Outpatient	DILTIAZEM HCL ER 90 MG PO CP12	0378-6090-01	A9270	\$14.09	\$13.81	\$13.95	\$13.01	\$13.81
Inpatient/Outpatient	DILTIAZEM HCL ER 90 MG PO CP12	68462-851-01	A9270	\$11.53	\$11.30	\$11.41	\$10.64	\$11.30
Inpatient/Outpatient	ASPIRIN 81 MG PO TBEC	63739-522-10	A9150	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	ASPIRIN 81 MG PO TBEC	63739-272-01	A9150	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	ASPIRIN 81 MG PO TBEC	63739-522-01	A9150	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	ASPIRIN 81 MG PO TBEC	0904-7704-18	A9150	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	ASPIRIN 81 MG PO TBEC	0904-6751-80	A9150	\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	ASPIRIN 81 MG PO TBEC	0904-6713-18	A9150	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	ASPIRIN 81 MG PO TBEC	49483-481-12	A9150	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06

Inpatient/Outpatient	ASPIRIN 81 MG PO TBEC	10135-173-62	A9150		\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	ASPIRIN 81 MG PO TBEC	12843-53637	A9150		\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	ASPIRIN 81 MG PO TBEC	10135-689-62	A9150		\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	ASPIRIN 81 MG PO TBEC	0536-1234-41	A9150		\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	ASPIRIN 81 MG PO TBEC	57896-981-12	A9150		\$0.04	\$0.04	\$0.04	\$0.04	\$0.04
Inpatient/Outpatient	ASPIRIN 81 MG PO TBEC	10135-729-62	A9150		\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	KETOCONAZOLE 2 % EX SHAM	0781-7090-04	A9270		\$1.11	\$1.09	\$1.10	\$1.02	\$1.09
Inpatient/Outpatient	KETOCONAZOLE 2 % EX SHAM	45802-465-64	A9270		\$0.42	\$0.41	\$0.42	\$0.39	\$0.41
Inpatient/Outpatient	KETOCONAZOLE 2 % EX SHAM	63646-010-04	A9270		\$0.39	\$0.38	\$0.39	\$0.36	\$0.38
Inpatient/Outpatient	PHENYLEPHRINE-COCOA BUTTER 0.25-88.44 % RE SUPP	0573-2880-31	A9150		\$2.00	\$1.96	\$1.98	\$1.85	\$1.96
Inpatient/Outpatient	PHENYLEPHRINE-COCOA BUTTER 0.25-88.44 % RE SUPP	0573-2883-20	A9150		\$2.41	\$2.36	\$2.39	\$2.22	\$2.36
Inpatient/Outpatient	FLUCONAZOLE 10 MG/ML PO SUSR (NICU/INFANT/PEDS)	0054-0002-85	A9270		\$3.00	\$2.94	\$2.97	\$2.77	\$2.94
Inpatient/Outpatient	FLUCONAZOLE 10 MG/ML PO SUSR (NICU/INFANT/PEDS)	57237-149-35	A9270		\$2.78	\$2.72	\$2.75	\$2.57	\$2.72
Inpatient/Outpatient	FLUCONAZOLE 10 MG/ML PO SUSR (NICU/INFANT/PEDS)	16714-695-01	A9270		\$0.65	\$0.64	\$0.64	\$0.60	\$0.64
Inpatient/Outpatient	FLUCONAZOLE 40 MG/ML PO SUSR	0054-0003-85	A9270		\$7.26	\$7.11	\$7.19	\$6.70	\$7.11
Inpatient/Outpatient	FLUCONAZOLE 40 MG/ML PO SUSR	57237-150-35	A9270		\$5.55	\$5.44	\$5.49	\$5.12	\$5.44
Inpatient/Outpatient	FLUCONAZOLE 40 MG/ML PO SUSR	16714-696-01	A9270		\$1.36	\$1.33	\$1.35	\$1.26	\$1.33
Inpatient/Outpatient	FLUCONAZOLE 40 MG/ML PO SUSR	0049-3450-19	A9270		\$2.71	\$2.66	\$2.68	\$2.50	\$2.66
Inpatient/Outpatient	ABCIXIMAB 2 MG/ML IV SOLN	0002-7140-01	J0130		\$800.41	\$784.40	\$792.41	\$738.78	\$784.40
Inpatient/Outpatient	ABCIXIMAB 2 MG/ML IV SOLN	57894-200-01	J0130		\$850.28	\$833.27	\$841.78	\$784.81	\$833.27
Inpatient/Outpatient	ACETAMINOPHEN-CODEINE 120-12 MG/5ML PO SOLN	0121-0504-12	A9270		\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	ACETAMINOPHEN-CODEINE 120-12 MG/5ML PO SOLN	0121-1008-12	A9270		\$0.44	\$0.43	\$0.44	\$0.41	\$0.43
Inpatient/Outpatient	ACETAMINOPHEN-CODEINE 120-12 MG/5ML PO SOLN	50383-079-12	A9270		\$0.42	\$0.41	\$0.42	\$0.39	\$0.41
Inpatient/Outpatient	ACETAMINOPHEN-CODEINE 120-12 MG/5ML PO SOLN	50383-079-16	A9270		\$0.04	\$0.04	\$0.04	\$0.04	\$0.04
Inpatient/Outpatient	ACETAMINOPHEN-CODEINE 120-12 MG/5ML PO SOLN	50383-339-12	A9270		\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	DORZOLAMIDE HCL 2 % OP SOLN	0006-3519-36	A9270		\$34.30	\$33.61	\$33.96	\$31.66	\$33.61
Inpatient/Outpatient	DORZOLAMIDE HCL 2 % OP SOLN	24208-485-10	A9270		\$16.05	\$15.73	\$15.89	\$14.81	\$15.73
Inpatient/Outpatient	DORZOLAMIDE HCL 2 % OP SOLN	61314-019-10	A9270		\$12.00	\$11.76	\$11.88	\$11.08	\$11.76
Inpatient/Outpatient	DORZOLAMIDE HCL 2 % OP SOLN	60429-114-10	A9270		\$4.15	\$4.07	\$4.11	\$3.83	\$4.07
Inpatient/Outpatient	DORZOLAMIDE HCL 2 % OP SOLN	50383-232-10	A9270		\$4.66	\$4.57	\$4.61	\$4.30	\$4.57
Inpatient/Outpatient	DORZOLAMIDE HCL 2 % OP SOLN	42571-141-26	A9270		\$5.53	\$5.42	\$5.47	\$5.10	\$5.42
Inpatient/Outpatient	VERAPAMIL HCL ER 180 MG PO TBCR	0172-4286-60	A9270		\$2.26	\$2.21	\$2.24	\$2.09	\$2.21
Inpatient/Outpatient	VERAPAMIL HCL ER 180 MG PO TBCR	51079-899-01	A9270		\$5.84	\$5.72	\$5.78	\$5.39	\$5.72
Inpatient/Outpatient	VERAPAMIL HCL ER 180 MG PO TBCR	51079-899-20	A9270		\$7.54	\$7.39	\$7.46	\$6.96	\$7.39
Inpatient/Outpatient	VERAPAMIL HCL ER 180 MG PO TBCR	0172-4286-00	A9270		\$0.81	\$0.79	\$0.80	\$0.75	\$0.79
Inpatient/Outpatient	VERAPAMIL HCL ER 180 MG PO TBCR	57664-117-88	A9270		\$0.43	\$0.42	\$0.43	\$0.40	\$0.42
Inpatient/Outpatient	VERAPAMIL HCL ER 180 MG PO TBCR	68462-293-01	A9270		\$1.53	\$1.50	\$1.51	\$1.41	\$1.50
Inpatient/Outpatient	VERAPAMIL HCL ER 180 MG PO TBCR	75834-158-01	A9270		\$0.82	\$0.80	\$0.81	\$0.76	\$0.80
Inpatient/Outpatient	INDOMETHACIN ER 75 MG PO CPCR	0185-0720-01	A9270		\$6.96	\$6.82	\$6.89	\$6.42	\$6.82
Inpatient/Outpatient	INDOMETHACIN ER 75 MG PO CPCR	59746-379-90	A9270		\$2.15	\$2.11	\$2.13	\$1.98	\$2.11
Inpatient/Outpatient	INDOMETHACIN ER 75 MG PO CPCR	68462-325-90	A9270		\$1.02	\$1.00	\$1.01	\$0.94	\$1.00
Inpatient/Outpatient	INDOMETHACIN ER 75 MG PO CPCR	65162-506-09	A9270		\$2.72	\$2.67	\$2.69	\$2.51	\$2.67
Inpatient/Outpatient	TRAMADOL HCL 50 MG PO TABS	51079-991-20	A9270		\$0.20	\$0.20	\$0.20	\$0.18	\$0.20
Inpatient/Outpatient	TRAMADOL HCL 50 MG PO TABS	51079-991-01	A9270		\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	TRAMADOL HCL 50 MG PO TABS	0378-4151-01	A9270		\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	TRAMADOL HCL 50 MG PO TABS	68084-808-11	A9270		\$0.59	\$0.58	\$0.58	\$0.54	\$0.58
Inpatient/Outpatient	TRAMADOL HCL 50 MG PO TABS	0904-6365-61	A9270		\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	TRAMADOL HCL 50 MG PO TABS	57664-377-08	A9270		\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	TRAMADOL HCL 50 MG PO TABS	0093-0058-01	A9270		\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	TRAMADOL HCL 50 MG PO TABS	65162-627-10	A9270		\$0.53	\$0.52	\$0.52	\$0.49	\$0.52
Inpatient/Outpatient	EPOETIN ALFA 20000 UNIT/ML IJ SOLN	59676-320-04	J0885		\$954.70	\$935.61	\$945.15	\$881.19	\$935.61
Inpatient/Outpatient	TYPHOID VI POLYSACCHARIDE VACC 25 MCG/0.5ML IM SOSY	49281-790-51		90690	\$507.34	\$497.19	\$502.27	\$468.27	\$497.19
Inpatient/Outpatient	ACETAMINOPHEN 10 MG/ML IV SOLN	43825-102-01	J0131		\$2.14	\$2.10	\$2.12	\$1.98	\$2.10
Inpatient/Outpatient	ACETAMINOPHEN 10 MG/ML IV SOLN	0781-3156-06	J0131		\$0.40	\$0.39	\$0.40	\$0.37	\$0.39
Inpatient/Outpatient	METFORMIN HCL 850 MG PO TABS	55154-3587-7	A9270		\$0.42	\$0.41	\$0.42	\$0.39	\$0.41
Inpatient/Outpatient	METFORMIN HCL 850 MG PO TABS	0093-1049-01	A9270		\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	METFORMIN HCL 850 MG PO TABS	23155-103-01	A9270		\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	METFORMIN HCL 850 MG PO TABS	60687-143-11	A9270		\$0.81	\$0.79	\$0.80	\$0.75	\$0.79
Inpatient/Outpatient	POLY-VI-SOL/IRON 11 MG/ML PO SOLN	99999-704-25	A9150		\$0.74	\$0.73	\$0.73	\$0.68	\$0.73
Inpatient/Outpatient	POLY-VI-SOL/IRON 11 MG/ML PO SOLN	99999-704-10	A9150		\$0.74	\$0.73	\$0.73	\$0.68	\$0.73
Inpatient/Outpatient	POLY-VI-SOL/IRON 11 MG/ML PO SOLN	99999-704-05	A9150		\$0.74	\$0.73	\$0.73	\$0.68	\$0.73
Inpatient/Outpatient	POLY-VI-SOL/IRON 11 MG/ML PO SOLN	0087-0405-01	A9150		\$0.74	\$0.73	\$0.73	\$0.68	\$0.73
Inpatient/Outpatient	VARICELLA VIRUS VACCINE LIVE 1350 PFU/0.5ML SC INJ	0006-4826-00		90716	\$479.39	\$469.80	\$474.60	\$442.48	\$469.80
Inpatient/Outpatient	VARICELLA VIRUS VACCINE LIVE 1350 PFU/0.5ML SC INJ	0006-4827-00		90716	\$545.57	\$534.66	\$540.11	\$503.56	\$534.66
Inpatient/Outpatient	VARICELLA VIRUS VACCINE LIVE 1350 PFU/0.5ML SC INJ	0006-4827-01		90716	\$439.81	\$431.01	\$435.41	\$405.94	\$431.01
Inpatient/Outpatient	GLYBURIDE MICRONIZED 1.5 MG PO TABS	0143-9918-01	A9270		\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	GLYBURIDE MICRONIZED 1.5 MG PO TABS	0093-8034-01	A9270		\$0.74	\$0.73	\$0.73	\$0.68	\$0.73
Inpatient/Outpatient	GLYBURIDE MICRONIZED 3 MG PO TABS	0143-9919-01	A9270		\$0.11	\$0.11	\$0.11	\$0.10	\$0.11

Inpatient/Outpatient	GLYBURIDE MICRONIZED 3 MG PO TABS	67253-461-10	A9270		\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	GLYBURIDE MICRONIZED 3 MG PO TABS	0093-8035-01	A9270		\$0.95	\$0.93	\$0.94	\$0.88	\$0.93
Inpatient/Outpatient	TIZANIDINE HCL 4 MG PO TABS	51079-998-20	A9270		\$1.83	\$1.79	\$1.81	\$1.69	\$1.79
Inpatient/Outpatient	TIZANIDINE HCL 4 MG PO TABS	55111-180-15	A9270		\$0.50	\$0.49	\$0.50	\$0.46	\$0.49
Inpatient/Outpatient	TIZANIDINE HCL 4 MG PO TABS	51079-998-01	A9270		\$1.24	\$1.22	\$1.23	\$1.14	\$1.22
Inpatient/Outpatient	TIZANIDINE HCL 4 MG PO TABS	57664-503-89	A9270		\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	TIZANIDINE HCL 4 MG PO TABS	0904-6418-61	A9270		\$1.74	\$1.71	\$1.72	\$1.61	\$1.71
Inpatient/Outpatient	TIZANIDINE HCL 4 MG PO TABS	68084-645-11	A9270		\$2.17	\$2.13	\$2.15	\$2.00	\$2.13
Inpatient/Outpatient	TIZANIDINE HCL 4 MG PO TABS	42291-809-15	A9270		\$0.29	\$0.28	\$0.29	\$0.27	\$0.28
Inpatient/Outpatient	LOSARTAN POTASSIUM 25 MG PO TABS	0006-0951-82	A9270		\$9.30	\$9.11	\$9.21	\$8.58	\$9.11
Inpatient/Outpatient	LOSARTAN POTASSIUM 25 MG PO TABS	0006-0951-54	A9270		\$12.57	\$12.32	\$12.44	\$11.60	\$12.32
Inpatient/Outpatient	LOSARTAN POTASSIUM 25 MG PO TABS	0904-6391-61	A9270		\$1.32	\$1.29	\$1.31	\$1.22	\$1.29
Inpatient/Outpatient	LOSARTAN POTASSIUM 25 MG PO TABS	63739-673-10	A9270		\$1.20	\$1.18	\$1.19	\$1.11	\$1.18
Inpatient/Outpatient	LOSARTAN POTASSIUM 25 MG PO TABS	68084-346-11	A9270		\$1.51	\$1.48	\$1.49	\$1.39	\$1.48
Inpatient/Outpatient	LOSARTAN POTASSIUM 25 MG PO TABS	31722-700-90	A9270		\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	LOSARTAN POTASSIUM 25 MG PO TABS	68382-135-16	A9270		\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	LOSARTAN POTASSIUM 25 MG PO TABS	0904-7047-61	A9270		\$1.33	\$1.30	\$1.32	\$1.23	\$1.30
Inpatient/Outpatient	LOSARTAN POTASSIUM 25 MG PO TABS	31722-700-10	A9270		\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	LOSARTAN POTASSIUM 50 MG PO TABS	0006-0952-54	A9270		\$16.84	\$16.50	\$16.67	\$15.54	\$16.50
Inpatient/Outpatient	LOSARTAN POTASSIUM 50 MG PO TABS	0904-6390-61	A9270		\$1.02	\$1.00	\$1.01	\$0.94	\$1.00
Inpatient/Outpatient	LOSARTAN POTASSIUM 50 MG PO TABS	63739-686-10	A9270		\$1.08	\$1.06	\$1.07	\$1.00	\$1.06
Inpatient/Outpatient	LOSARTAN POTASSIUM 50 MG PO TABS	65862-202-90	A9270		\$0.43	\$0.42	\$0.43	\$0.40	\$0.42
Inpatient/Outpatient	LOSARTAN POTASSIUM 50 MG PO TABS	31722-701-90	A9270		\$0.40	\$0.39	\$0.40	\$0.37	\$0.39
Inpatient/Outpatient	LOSARTAN POTASSIUM 50 MG PO TABS	68084-347-11	A9270		\$1.58	\$1.55	\$1.56	\$1.46	\$1.55
Inpatient/Outpatient	LOSARTAN POTASSIUM 50 MG PO TABS	0904-7048-61	A9270		\$1.22	\$1.20	\$1.21	\$1.13	\$1.20
Inpatient/Outpatient	FOSFOMYCIN TROMETHAMINE 3 G PO PACK	0456-4300-08	A9270		\$393.37	\$385.50	\$389.44	\$363.08	\$385.50
Inpatient/Outpatient	FOSFOMYCIN TROMETHAMINE 3 G PO PACK	0456-4300-01	A9270		\$317.89	\$311.53	\$314.71	\$293.41	\$311.53
Inpatient/Outpatient	FOSFOMYCIN TROMETHAMINE 3 G PO PACK	70700-268-99	A9270		\$310.55	\$304.34	\$307.44	\$286.64	\$304.34
Inpatient/Outpatient	FOSFOMYCIN TROMETHAMINE 3 G PO PACK	67877-749-57	A9270		\$265.21	\$259.91	\$262.56	\$244.79	\$259.91
Inpatient/Outpatient	DOPAMINE INFUSION 1600 MCG/ML IN D5W IV SOLN PREMIX (PEDS)	0338-1007-02	J1265		\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	DOPAMINE INFUSION 1600 MCG/ML IN D5W IV SOLN PREMIX (PEDS)	0409-7809-24	J1265		\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	DOPAMINE INFUSION 1600 MCG/ML IN D5W IV SOLN PREMIX (PEDS)	0409-7809-11	J1265		\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	KCL IN DEXTROSE-NACL 30-5-0.45 MEQ/L-% IV SOLN	0338-0673-04			\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	KCL IN DEXTROSE-NACL 20-5-0.45 MEQ/L-% IV SOLN	0338-0671-04			\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	KCL IN DEXTROSE-NACL 40-5-0.45 MEQ/L-% IV SOLN	0338-0675-04			\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	LIDOCAINE INFUSION 4 MG/ML IN D5W PREMIX	0338-0409-03	J2001		\$0.04	\$0.04	\$0.04	\$0.04	\$0.04
Inpatient/Outpatient	LIDOCAINE INFUSION 4 MG/ML IN D5W PREMIX	0264-9594-10	J2001		\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	LIDOCAINE INFUSION 4 MG/ML IN D5W PREMIX	0338-9586-24	J2001		\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	ATOVAQUONE 750 MG/5ML PO SUSP	0173-0665-18	A9270		\$32.40	\$31.75	\$32.08	\$29.91	\$31.75
Inpatient/Outpatient	ATOVAQUONE 750 MG/5ML PO SUSP	66993-062-72	A9270		\$14.90	\$14.60	\$14.75	\$13.75	\$14.60
Inpatient/Outpatient	ATOVAQUONE 750 MG/5ML PO SUSP	31722-629-21	A9270		\$7.15	\$7.01	\$7.08	\$6.60	\$7.01
Inpatient/Outpatient	ATOVAQUONE 750 MG/5ML PO SUSP	16714-900-01	A9270		\$8.42	\$8.25	\$8.34	\$7.77	\$8.25
Inpatient/Outpatient	ATOVAQUONE 750 MG/5ML PO SUSP	68462-421-21	A9270		\$5.71	\$5.60	\$5.65	\$5.27	\$5.60
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.25 % IJ SOLN	0409-1159-02	J3490		\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.25 % IJ SOLN	0409-1559-30	J3490		\$0.53	\$0.52	\$0.52	\$0.49	\$0.52
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.25 % IJ SOLN	0409-1159-01	J3490		\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.25 % IJ SOLN	0409-1559-10	J3490		\$1.39	\$1.36	\$1.38	\$1.28	\$1.36
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.25 % IJ SOLN	63323-464-37	J3490		\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.25 % IJ SOLN	63323-464-17	J3490		\$0.44	\$0.43	\$0.44	\$0.41	\$0.43
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.25 % IJ SOLN	0409-1559-18	J3490		\$1.29	\$1.26	\$1.28	\$1.19	\$1.26
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.25 % IJ SOLN	0409-1159-18	J3490		\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.25 % IJ SOLN	0409-1159-19	J3490		\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.25 % IJ SOLN	0409-1159-09	J3490		\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.25 % IJ SOLN	55150-167-10	J3490		\$0.49	\$0.48	\$0.49	\$0.45	\$0.48
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.25 % IJ SOLN	55150-168-30	J3490		\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.25 % IJ SOLN	0409-1559-19	J3490		\$0.53	\$0.52	\$0.52	\$0.49	\$0.52
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.25 % IJ SOLN	0143-9330-01	J3490		\$0.86	\$0.84	\$0.85	\$0.79	\$0.84
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.25 % IJ SOLN	0143-9333-01	J3490		\$0.40	\$0.39	\$0.40	\$0.37	\$0.39
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.25 % IJ SOLN	63323-464-01	J3490		\$0.44	\$0.44	\$0.44	\$0.41	\$0.43
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.25 % IJ SOLN	63323-464-02	J3490		\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.5 % IJ SOLN	0409-1162-01	J3490		\$0.61	\$0.60	\$0.60	\$0.56	\$0.60
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.5 % IJ SOLN	0409-1162-02	J3490		\$0.20	\$0.20	\$0.20	\$0.18	\$0.20
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.5 % IJ SOLN	0409-1560-29	J3490		\$0.59	\$0.58	\$0.58	\$0.54	\$0.58
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.5 % IJ SOLN	63323-466-17	J3490		\$0.48	\$0.47	\$0.48	\$0.44	\$0.47
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.5 % IJ SOLN	0409-1162-18	J3490		\$0.61	\$0.60	\$0.60	\$0.56	\$0.60
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.5 % IJ SOLN	0409-1162-19	J3490		\$0.21	\$0.21	\$0.21	\$0.19	\$0.21
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.5 % IJ SOLN	55150-169-10	J3490		\$0.52	\$0.51	\$0.51	\$0.48	\$0.51
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.5 % IJ SOLN	55150-170-30	J3490		\$0.18	\$0.18	\$0.18	\$0.17	\$0.18

Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.5 % IJ SOLN	63323-466-37	J3490	\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.5 % IJ SOLN	0409-1560-19	J3490	\$0.59	\$0.58	\$0.58	\$0.54	\$0.58
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.5 % IJ SOLN	63323-466-03	J3490	\$0.48	\$0.47	\$0.48	\$0.44	\$0.47
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.5 % IJ SOLN	0143-9331-01	J3490	\$1.02	\$1.00	\$1.01	\$0.94	\$1.00
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.5 % IJ SOLN	0143-9331-10	J3490	\$1.02	\$1.00	\$1.01	\$0.94	\$1.00
Inpatient/Outpatient	BUPIVACAINE HCL (PF) 0.5 % IJ SOLN	63323-466-01	J3490	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	NAPHAZOLINE-PHENIRAMINE 0.027-0.315 % OP SOLN	10119-02090	A9270	\$1.45	\$1.42	\$1.44	\$1.34	\$1.42
Inpatient/Outpatient	MYCOPHENOLATE MOFETIL 250 MG PO CAPS	0004-0259-01	J7517	\$42.41	\$41.56	\$41.99	\$39.14	\$41.56
Inpatient/Outpatient	MYCOPHENOLATE MOFETIL 250 MG PO CAPS	0054-0163-25	J7517	\$1.11	\$1.09	\$1.10	\$1.02	\$1.09
Inpatient/Outpatient	MYCOPHENOLATE MOFETIL 250 MG PO CAPS	67877-266-01	J7517	\$1.63	\$1.60	\$1.61	\$1.50	\$1.60
Inpatient/Outpatient	MYCOPHENOLATE MOFETIL 250 MG PO CAPS	0093-7334-01	J7517	\$0.87	\$0.85	\$0.86	\$0.80	\$0.85
Inpatient/Outpatient	MYCOPHENOLATE MOFETIL 250 MG PO CAPS	16729-094-01	J7517	\$0.63	\$0.62	\$0.62	\$0.58	\$0.62
Inpatient/Outpatient	MYCOPHENOLATE MOFETIL 250 MG PO CAPS	64380-726-06	J7517	\$0.63	\$0.62	\$0.62	\$0.58	\$0.62
Inpatient/Outpatient	MYCOPHENOLATE MOFETIL 250 MG PO CAPS	60687-494-11	J7517	\$2.01	\$1.97	\$1.99	\$1.86	\$1.97
Inpatient/Outpatient	SEVOFLURANE IN SOLN	0074-4456-04	A9270	\$3.41	\$3.34	\$3.38	\$3.15	\$3.34
Inpatient/Outpatient	SEVOFLURANE IN SOLN	10019-651-64	A9270	\$1.36	\$1.33	\$1.35	\$1.26	\$1.33
Inpatient/Outpatient	SENNOSIDES 8.8 MG/5ML PO SYRP	54162-007-08	A9150	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	SENNOSIDES 8.8 MG/5ML PO SYRP	57896-452-08	A9150	\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	SENNOSIDES 8.8 MG/5ML PO SYRP	99999-462-05	A9150	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	SENNOSIDES 8.8 MG/5ML PO SYRP	54859-808-08	A9150	\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	SENNOSIDES 8.8 MG/5ML PO SYRP	39328-020-08	A9150	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	SUMATRIPTAN SUCCINATE 25 MG PO TABS	0173-0735-00	A9270	\$134.67	\$131.98	\$133.32	\$124.30	\$131.98
Inpatient/Outpatient	SUMATRIPTAN SUCCINATE 25 MG PO TABS	16252-590-99	A9270	\$8.61	\$8.44	\$8.52	\$7.95	\$8.44
Inpatient/Outpatient	SUMATRIPTAN SUCCINATE 25 MG PO TABS	55111-291-36	A9270	\$4.57	\$4.48	\$4.52	\$4.22	\$4.48
Inpatient/Outpatient	SUMATRIPTAN SUCCINATE 25 MG PO TABS	16714-796-01	A9270	\$2.01	\$1.97	\$1.99	\$1.86	\$1.97
Inpatient/Outpatient	SUMATRIPTAN SUCCINATE 50 MG PO TABS	0173-0736-01	A9270	\$293.55	\$287.68	\$290.61	\$270.95	\$287.68
Inpatient/Outpatient	SUMATRIPTAN SUCCINATE 50 MG PO TABS	0173-0736-00	A9270	\$293.55	\$287.68	\$290.61	\$270.95	\$287.68
Inpatient/Outpatient	SUMATRIPTAN SUCCINATE 50 MG PO TABS	16714-532-11	A9270	\$8.00	\$7.84	\$7.92	\$7.38	\$7.84
Inpatient/Outpatient	SUMATRIPTAN SUCCINATE 50 MG PO TABS	62756-521-88	A9270	\$8.18	\$8.02	\$8.10	\$7.55	\$8.02
Inpatient/Outpatient	SUMATRIPTAN SUCCINATE 50 MG PO TABS	42043-221-09	A9270	\$2.16	\$2.12	\$2.14	\$1.99	\$2.12
Inpatient/Outpatient	ADENOSINE (DIAGNOSTIC) 3 MG/ML IV SOLN	0703-8777-01	J0153	\$7.70	\$7.55	\$7.62	\$7.11	\$7.55
Inpatient/Outpatient	ADENOSINE (DIAGNOSTIC) 3 MG/ML IV SOLN	17478-544-30	J0153	\$4.52	\$4.43	\$4.47	\$4.17	\$4.43
Inpatient/Outpatient	ADENOSINE (DIAGNOSTIC) 3 MG/ML IV SOLN	0409-1932-01	J0153	\$4.88	\$4.78	\$4.83	\$4.50	\$4.78
Inpatient/Outpatient	ADENOSINE (DIAGNOSTIC) 3 MG/ML IV SOLN	0409-1932-02	J0153	\$3.32	\$3.25	\$3.29	\$3.06	\$3.25
Inpatient/Outpatient	ADENOSINE (DIAGNOSTIC) 3 MG/ML IV SOLN	55150-192-01	J0153	\$23.33	\$22.86	\$23.10	\$21.53	\$22.86
Inpatient/Outpatient	ADENOSINE (DIAGNOSTIC) 3 MG/ML IV SOLN	0703-8776-01	J0153	\$7.70	\$7.55	\$7.62	\$7.11	\$7.55
Inpatient/Outpatient	ADENOSINE (DIAGNOSTIC) 3 MG/ML IV SOLN	17478-544-20	J0153	\$4.57	\$4.48	\$4.52	\$4.22	\$4.48
Inpatient/Outpatient	ADENOSINE (DIAGNOSTIC) 3 MG/ML IV SOLN	23155-258-31	J0153	\$4.41	\$4.32	\$4.37	\$4.07	\$4.32
Inpatient/Outpatient	ADENOSINE (DIAGNOSTIC) 3 MG/ML IV SOLN	23155-258-32	J0153	\$3.49	\$3.42	\$3.46	\$3.22	\$3.42
Inpatient/Outpatient	CETIRIZINE HCL 5 MG PO TABS	60505-2632-1	A9150	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	CETIRIZINE HCL 5 MG PO TABS	0378-3635-01	A9150	\$0.37	\$0.36	\$0.37	\$0.34	\$0.36
Inpatient/Outpatient	CETIRIZINE HCL 5 MG PO TABS	16571-401-10	A9150	\$0.22	\$0.22	\$0.22	\$0.20	\$0.22
Inpatient/Outpatient	AYR SALINE NASAL NA GEL	0225-0525-47	A9270	\$0.85	\$0.83	\$0.84	\$0.78	\$0.83
Inpatient/Outpatient	LEUCOVORIN CALCIUM 100 MG IJ SOLR	25021-814-67	J0640	\$25.47	\$24.96	\$25.22	\$23.51	\$24.96
Inpatient/Outpatient	LEUCOVORIN CALCIUM 100 MG IJ SOLR	25021-814-30	J0640	\$27.36	\$26.81	\$27.09	\$25.25	\$26.81
Inpatient/Outpatient	LEUCOVORIN CALCIUM 100 MG IJ SOLR	0703-5140-01	J0640	\$97.20	\$95.26	\$96.23	\$89.72	\$95.26
Inpatient/Outpatient	LEUCOVORIN CALCIUM 100 MG IJ SOLR	67457-528-10	J0640	\$22.94	\$22.48	\$22.71	\$21.17	\$22.48
Inpatient/Outpatient	LEUCOVORIN CALCIUM 100 MG IJ SOLR	0143-9554-01	J0640	\$34.85	\$34.15	\$34.50	\$32.17	\$34.15
Inpatient/Outpatient	DOPAMINE INFUSION 1600 MCG/ML (NICU/INFANT) PREMIX	0338-1007-90	J1265	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	DOPAMINE INFUSION 1600 MCG/ML (NICU/INFANT) PREMIX	0338-1007-92	J1265	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	DOPAMINE INFUSION 1600 MCG/ML (NICU/INFANT) PREMIX	0338-1007-96	J1265	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	DOPAMINE INFUSION 1600 MCG/ML (NICU/INFANT) PREMIX	0338-1007-95	J1265	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	SOD CITRATE-CITRIC ACID 500-334 MG/5ML PO SOLN	0121-0595-16	A9270	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	SOD CITRATE-CITRIC ACID 500-334 MG/5ML PO SOLN	99999-595-30	A9270	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	SOD CITRATE-CITRIC ACID 500-334 MG/5ML PO SOLN	0121-1190-30	A9270	\$0.22	\$0.22	\$0.22	\$0.20	\$0.22
Inpatient/Outpatient	SOD CITRATE-CITRIC ACID 500-334 MG/5ML PO SOLN	58657-31016	A9270	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	SOTALOL HCL 120 MG PO TABS	60505-0159-0	A9270	\$0.37	\$0.36	\$0.37	\$0.34	\$0.36
Inpatient/Outpatient	SOTALOL HCL 120 MG PO TABS	0185-0170-01	A9270	\$1.99	\$1.95	\$1.97	\$1.84	\$1.95
Inpatient/Outpatient	SOTALOL HCL 120 MG PO TABS	0093-1060-01	A9270	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	SOTALOL HCL 120 MG PO TABS	69584-842-10	A9270	\$0.32	\$0.31	\$0.32	\$0.30	\$0.31
Inpatient/Outpatient	CALCITONIN (SALMON) 200 UNIT/ACT NA SOLN	0245-0008-35	A9270	\$68.96	\$67.58	\$68.27	\$63.65	\$67.58
Inpatient/Outpatient	CALCITONIN (SALMON) 200 UNIT/ACT NA SOLN	60505-0823-6	A9270	\$16.17	\$15.85	\$16.01	\$14.92	\$15.85
Inpatient/Outpatient	CALCITONIN (SALMON) 200 UNIT/ACT NA SOLN	49884-161-11	A9270	\$16.73	\$16.40	\$16.56	\$15.44	\$16.40
Inpatient/Outpatient	BICALUTAMIDE 50 MG PO TABS	0904-6019-46	A9270	\$1.04	\$1.02	\$1.03	\$0.96	\$1.02
Inpatient/Outpatient	BICALUTAMIDE 50 MG PO TABS	16714-816-02	A9270	\$0.84	\$0.82	\$0.83	\$0.78	\$0.82
Inpatient/Outpatient	BICALUTAMIDE 50 MG PO TABS	16714-816-01	A9270	\$0.96	\$0.94	\$0.95	\$0.89	\$0.94
Inpatient/Outpatient	BICALUTAMIDE 50 MG PO TABS	62559-890-30	A9270	\$0.72	\$0.71	\$0.71	\$0.66	\$0.71
Inpatient/Outpatient	CARVEDILOL 6.25 MG PO TABS	0007-4140-20	A9270	\$22.21	\$21.77	\$21.99	\$20.50	\$21.77

Inpatient/Outpatient	CARVEDILOL 6.25 MG PO TABS	55111-253-01	A9270	\$0.86	\$0.84	\$0.85	\$0.79	\$0.84
Inpatient/Outpatient	CARVEDILOL 6.25 MG PO TABS	0093-0135-01	A9270	\$0.29	\$0.28	\$0.29	\$0.27	\$0.28
Inpatient/Outpatient	CARVEDILOL 6.25 MG PO TABS	51079-930-01	A9270	\$0.49	\$0.48	\$0.49	\$0.45	\$0.48
Inpatient/Outpatient	CARVEDILOL 6.25 MG PO TABS	0904-6099-61	A9270	\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	CARVEDILOL 6.25 MG PO TABS	0904-6301-61	A9270	\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	CARVEDILOL 6.25 MG PO TABS	68382-093-01	A9270	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	CARVEDILOL 6.25 MG PO TABS	51079-930-20	A9270	\$0.36	\$0.35	\$0.36	\$0.33	\$0.35
Inpatient/Outpatient	CARVEDILOL 25 MG PO TABS	0007-4142-20	A9270	\$22.21	\$21.77	\$21.99	\$20.50	\$21.77
Inpatient/Outpatient	CARVEDILOL 25 MG PO TABS	51079-932-20	A9270	\$0.36	\$0.35	\$0.36	\$0.33	\$0.35
Inpatient/Outpatient	CARVEDILOL 25 MG PO TABS	55111-255-01	A9270	\$0.86	\$0.84	\$0.85	\$0.79	\$0.84
Inpatient/Outpatient	CARVEDILOL 25 MG PO TABS	51079-932-01	A9270	\$0.47	\$0.46	\$0.47	\$0.43	\$0.46
Inpatient/Outpatient	CARVEDILOL 25 MG PO TABS	68084-876-11	A9270	\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	CARVEDILOL 25 MG PO TABS	0904-6303-61	A9270	\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	CARVEDILOL 25 MG PO TABS	68382-095-05	A9270	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	CARVEDILOL 25 MG PO TABS	68382-095-01	A9270	\$0.24	\$0.24	\$0.24	\$0.22	\$0.24
Inpatient/Outpatient	CARVEDILOL 12.5 MG PO TABS	0007-4141-20	A9270	\$22.21	\$21.77	\$21.99	\$20.50	\$21.77
Inpatient/Outpatient	CARVEDILOL 12.5 MG PO TABS	55111-254-01	A9270	\$0.86	\$0.84	\$0.85	\$0.79	\$0.84
Inpatient/Outpatient	CARVEDILOL 12.5 MG PO TABS	51079-931-01	A9270	\$0.49	\$0.48	\$0.49	\$0.45	\$0.48
Inpatient/Outpatient	CARVEDILOL 12.5 MG PO TABS	51079-931-20	A9270	\$0.36	\$0.35	\$0.36	\$0.33	\$0.35
Inpatient/Outpatient	CARVEDILOL 12.5 MG PO TABS	0904-6302-61	A9270	\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	CARVEDILOL 12.5 MG PO TABS	68084-865-11	A9270	\$0.58	\$0.57	\$0.57	\$0.54	\$0.57
Inpatient/Outpatient	CARVEDILOL 12.5 MG PO TABS	0093-7295-01	A9270	\$0.29	\$0.28	\$0.29	\$0.27	\$0.28
Inpatient/Outpatient	TICAGRELOR 90 MG PO TABS	0186-0777-60	A9270	\$28.30	\$27.73	\$28.02	\$26.12	\$27.73
Inpatient/Outpatient	TICAGRELOR 90 MG PO TABS	0186-0777-39	A9270	\$32.06	\$31.42	\$31.74	\$29.59	\$31.42
Inpatient/Outpatient	AZITHROMYCIN 200 MG/SML PO SUSR	0093-7149-23	A9270	\$3.08	\$3.02	\$3.05	\$2.84	\$3.02
Inpatient/Outpatient	AZITHROMYCIN 200 MG/SML PO SUSR	59762-3120-1	A9270	\$2.30	\$2.25	\$2.28	\$2.12	\$2.25
Inpatient/Outpatient	AZITHROMYCIN 200 MG/SML PO SUSR	59762-3140-1	A9270	\$1.64	\$1.61	\$1.62	\$1.51	\$1.61
Inpatient/Outpatient	AZITHROMYCIN 200 MG/SML PO SUSR	42806-149-32	A9270	\$2.30	\$2.25	\$2.28	\$2.12	\$2.25
Inpatient/Outpatient	AZITHROMYCIN 200 MG/SML PO SUSR	0093-2026-23	A9270	\$3.69	\$3.62	\$3.65	\$3.41	\$3.62
Inpatient/Outpatient	AZITHROMYCIN 200 MG/SML PO SUSR	42806-151-34	A9270	\$1.43	\$1.40	\$1.42	\$1.32	\$1.40
Inpatient/Outpatient	GUAIFENESIN-DM 100-10 MG/SML PO LIQD (WRAP)	0121-0638-10	A9270	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	GUAIFENESIN-DM 100-10 MG/SML PO LIQD (WRAP)	0121-1276-10	A9270	\$0.63	\$0.62	\$0.62	\$0.58	\$0.62
Inpatient/Outpatient	GUAIFENESIN-DM 100-10 MG/SML PO LIQD (WRAP)	99999-276-10	A9270	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	GUAIFENESIN-DM 100-10 MG/SML PO LIQD (WRAP)	69339-150-01	A9270	\$0.71	\$0.70	\$0.70	\$0.66	\$0.70
Inpatient/Outpatient	GUAIFENESIN-DM 100-10 MG/SML PO LIQD (WRAP)	0904-6844-70	A9270	\$1.16	\$1.14	\$1.15	\$1.07	\$1.14
Inpatient/Outpatient	HEPARIN INFUSION 50 UNITS/ ML IN D5W 500 ML PREMIX	0264-9577-10	J1644	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	HEPARIN INFUSION 50 UNITS/ ML IN D5W 500 ML PREMIX	61553-402-46	J1644	\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	HEPARIN INFUSION 50 UNITS/ ML IN D5W 500 ML PREMIX	63323-522-77	J1644	\$0.08	\$0.08	\$0.08	\$0.07	\$0.08
Inpatient/Outpatient	MORPHINE SULFATE (PF) 1 MG/ML IJ SOLN	0641-6019-10	J2274	\$13.10	\$12.84	\$12.97	\$12.09	\$12.84
Inpatient/Outpatient	MORPHINE SULFATE (PF) 1 MG/ML IJ SOLN	0641-6019-01	J2274	\$6.31	\$6.18	\$6.25	\$5.82	\$6.18
Inpatient/Outpatient	MORPHINE SULFATE (PF) 1 MG/ML IJ SOLN	0409-3815-11	J2274	\$3.10	\$3.04	\$3.07	\$2.86	\$3.04
Inpatient/Outpatient	NITROGLYCERIN IN D5W 200-5 MCG/ML-% IV SOLN	0338-1049-02		\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	NITROGLYCERIN IN D5W 200-5 MCG/ML-% IV SOLN	0409-1482-02		\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	DEXTROSE-NACL 5-0.45 % IV SOLN	0409-7926-03		\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	DEXTROSE-NACL 5-0.45 % IV SOLN	0338-0085-03		\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	DEXTROSE-NACL 5-0.45 % IV SOLN	0338-0085-04		\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	DEXTROSE-NACL 5-0.2 % IV SOLN	0338-0077-03		\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	DEXTROSE-NACL 5-0.2 % IV SOLN	0338-0077-02		\$0.04	\$0.04	\$0.04	\$0.04	\$0.04
Inpatient/Outpatient	DEXTROSE-NACL 5-0.2 % IV SOLN	0338-0077-04		\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	DEXTROSE-NACL 5-0.33 % IV SOLN	0338-0081-03		\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	TOBRAMYCIN SULFATE 2 GM/50ML IJ SOLN	63323-307-51	J3260	\$3.78	\$3.70	\$3.74	\$3.49	\$3.70
Inpatient/Outpatient	LAMIVUDINE 150 MG PO TABS	60505-3251-6	A9270	\$2.45	\$2.40	\$2.43	\$2.26	\$2.40
Inpatient/Outpatient	LAMIVUDINE 150 MG PO TABS	0904-6583-04	A9270	\$21.62	\$21.19	\$21.40	\$19.96	\$21.19
Inpatient/Outpatient	LAMIVUDINE 10 MG/ML PO SOLN	49702-205-48	A9270	\$2.09	\$2.05	\$2.07	\$1.93	\$2.05
Inpatient/Outpatient	LAMIVUDINE 10 MG/ML PO SOLN	54838-566-70	A9270	\$1.26	\$1.23	\$1.25	\$1.16	\$1.23
Inpatient/Outpatient	DEXTROSE-NACL 5-0.9 % IV SOLN	0338-0089-03		\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	DEXTROSE-NACL 5-0.9 % IV SOLN	0338-0089-04		\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	GENTAMICIN IVPB 80 MG IN NS 100 ML PREMIX	0338-0503-48	J1580	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	GENTAMICIN IVPB 80 MG IN NS 100 ML PREMIX	0409-7884-23	J1580	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	GENTAMICIN IVPB 100 MG IN NS 100 ML PREMIX	0338-0505-48	J1580	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	GENTAMICIN IVPB 100 MG IN NS 100 ML PREMIX	0409-7889-23	J1580	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	GENTAMICIN IVPB 120 MG IN NS 100 ML PREMIX	0338-0507-48	J1580	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	BUPRENORPHINE HCL 0.3 MG/ML IJ SOLN	42023-179-01		\$59.81	\$58.61	\$59.21	\$55.20	\$58.61
Inpatient/Outpatient	BUPRENORPHINE HCL 0.3 MG/ML IJ SOLN	42023-179-05		\$59.54	\$58.35	\$58.94	\$54.96	\$58.35
Inpatient/Outpatient	LIDOCAINE-EPINEPHRINE 1 %-1:100000 IJ SOLN	0409-3178-03		\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	LIDOCAINE-EPINEPHRINE 1 %-1:100000 IJ SOLN	0409-3178-01		\$0.44	\$0.43	\$0.44	\$0.41	\$0.43
Inpatient/Outpatient	LIDOCAINE-EPINEPHRINE 1 %-1:100000 IJ SOLN	63323-482-57		\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	LIDOCAINE-EPINEPHRINE 1 %-1:100000 IJ SOLN	0409-3178-02		\$0.45	\$0.44	\$0.45	\$0.42	\$0.44

Inpatient/Outpatient	LIDOCAINE-EPINEPHRINE 1 %-1:100000 IJ SOLN	63323-482-03		\$0.41	\$0.40	\$0.41	\$0.38	\$0.40
Inpatient/Outpatient	LIDOCAINE-EPINEPHRINE 1 %-1:100000 IJ SOLN	0409-3178-16		\$0.48	\$0.47	\$0.48	\$0.44	\$0.47
Inpatient/Outpatient	LIDOCAINE-EPINEPHRINE 1 %-1:100000 IJ SOLN	63323-482-26		\$0.41	\$0.40	\$0.41	\$0.38	\$0.40
Inpatient/Outpatient	LIDOCAINE-EPINEPHRINE 1 %-1:100000 IJ SOLN	0409-3178-18		\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	LIDOCAINE-EPINEPHRINE 1 %-1:100000 IJ SOLN	63323-482-05		\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	LIDOCAINE-EPINEPHRINE 1 %-1:100000 IJ SOLN	0409-3178-17		\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	LORAZEPAM IV SYRINGE 0.25 MG/ML (NICU/INFANT)(DOSES < 0.2 MG)	99999-004-05 J2060		\$4.91	\$4.81	\$4.86	\$4.53	\$4.81
Inpatient/Outpatient	METHADONE HCL 10 MG/ML PO CONC	0054-3553-44 A9270		\$2.91	\$2.85	\$2.88	\$2.69	\$2.85
Inpatient/Outpatient	METHADONE HCL 10 MG/ML PO CONC	0406-0527-10 A9270		\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	DESMOPRESSIN ACETATE 0.1 MG PO TABS	0075-0016-00 A9270		\$23.16	\$22.70	\$22.93	\$21.38	\$22.70
Inpatient/Outpatient	DESMOPRESSIN ACETATE 0.1 MG PO TABS	50268-220-15 A9270		\$6.07	\$5.95	\$6.01	\$5.60	\$5.95
Inpatient/Outpatient	DESMOPRESSIN ACETATE 0.1 MG PO TABS	0093-7316-01 A9270		\$7.99	\$7.83	\$7.91	\$7.37	\$7.83
Inpatient/Outpatient	DESMOPRESSIN ACETATE 0.1 MG PO TABS	50268-220-11 A9270		\$6.54	\$6.41	\$6.47	\$6.04	\$6.41
Inpatient/Outpatient	DESMOPRESSIN ACETATE 0.1 MG PO TABS	68084-606-11 A9270		\$5.64	\$5.53	\$5.58	\$5.21	\$5.53
Inpatient/Outpatient	DESMOPRESSIN ACETATE 0.1 MG PO TABS	16714-883-01 A9270		\$1.92	\$1.88	\$1.90	\$1.77	\$1.88
Inpatient/Outpatient	IPRATROPIUM BROMIDE 0.03 % NA SOLN	0054-0045-44 A9270		\$3.99	\$3.91	\$3.95	\$3.68	\$3.91
Inpatient/Outpatient	FAMCICLOVIR 250 MG PO TABS	0093-8118-56 A9270		\$1.38	\$1.35	\$1.37	\$1.27	\$1.35
Inpatient/Outpatient	FAMCICLOVIR 250 MG PO TABS	0078-0367-15 A9270		\$35.91	\$35.19	\$35.55	\$33.14	\$35.19
Inpatient/Outpatient	FAMCICLOVIR 250 MG PO TABS	16714-304-01 A9270		\$3.77	\$3.69	\$3.73	\$3.48	\$3.69
Inpatient/Outpatient	FAMCICLOVIR 250 MG PO TABS	0054-0197-13 A9270		\$15.53	\$15.22	\$15.37	\$14.33	\$15.22
Inpatient/Outpatient	FAMCICLOVIR 250 MG PO TABS	33342-025-07 A9270		\$1.18	\$1.16	\$1.17	\$1.09	\$1.16
Inpatient/Outpatient	FAMCICLOVIR 250 MG PO TABS	16714-615-01 A9270		\$6.42	\$6.29	\$6.36	\$5.93	\$6.29
Inpatient/Outpatient	FAMCICLOVIR 250 MG PO TABS	60505-3246-3 A9270		\$1.03	\$1.01	\$1.02	\$0.95	\$1.01
Inpatient/Outpatient	FAMCICLOVIR 125 MG PO TABS	0093-8117-56 A9270		\$1.15	\$1.13	\$1.14	\$1.06	\$1.13
Inpatient/Outpatient	FAMCICLOVIR 125 MG PO TABS	0078-0366-15 A9270		\$33.03	\$32.37	\$32.70	\$30.49	\$32.37
Inpatient/Outpatient	FAMCICLOVIR 125 MG PO TABS	16714-300-01 A9270		\$3.46	\$3.39	\$3.43	\$3.19	\$3.39
Inpatient/Outpatient	FAMCICLOVIR 125 MG PO TABS	60505-3245-3 A9270		\$0.73	\$0.72	\$0.72	\$0.67	\$0.72
Inpatient/Outpatient	AMPHETAMINE-DEXTRAMPHETAMINE 15 MG PO TABS	0555-0777-02 A9270		\$3.95	\$3.87	\$3.91	\$3.65	\$3.87
Inpatient/Outpatient	AMPHETAMINE-DEXTRAMPHETAMINE 15 MG PO TABS	13107-072-01 A9270		\$1.69	\$1.66	\$1.67	\$1.56	\$1.66
Inpatient/Outpatient	AMPHETAMINE-DEXTRAMPHETAMINE 15 MG PO TABS	16714-952-01 A9270		\$2.35	\$2.30	\$2.33	\$2.17	\$2.30
Inpatient/Outpatient	AMPHETAMINE-DEXTRAMPHETAMINE 15 MG PO TABS	16714-806-01 A9270		\$2.35	\$2.30	\$2.33	\$2.17	\$2.30
Inpatient/Outpatient	AMPHETAMINE-DEXTRAMPHETAMINE 15 MG PO TABS	42806-343-01 A9270		\$1.66	\$1.63	\$1.64	\$1.53	\$1.63
Inpatient/Outpatient	ANASTROZOLE 1 MG PO TABS	0310-0201-30 A9270		\$78.97	\$77.39	\$78.18	\$72.89	\$77.39
Inpatient/Outpatient	ANASTROZOLE 1 MG PO TABS	0093-7536-56 A9270		\$2.59	\$2.54	\$2.56	\$2.39	\$2.54
Inpatient/Outpatient	ANASTROZOLE 1 MG PO TABS	68084-448-11 A9270		\$1.60	\$1.57	\$1.58	\$1.48	\$1.57
Inpatient/Outpatient	ANASTROZOLE 1 MG PO TABS	16729-035-10 A9270		\$0.47	\$0.46	\$0.47	\$0.43	\$0.46
Inpatient/Outpatient	ANASTROZOLE 1 MG PO TABS	60687-112-11 A9270		\$1.75	\$1.72	\$1.73	\$1.62	\$1.72
Inpatient/Outpatient	ANASTROZOLE 1 MG PO TABS	62559-670-30 A9270		\$241.20	\$236.38	\$238.79	\$222.63	\$236.38
Inpatient/Outpatient	GLIMEPIRIDE 1 MG PO TABS	55111-320-01 A9270		\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	GLIMEPIRIDE 1 MG PO TABS	45802-770-78 A9270		\$0.67	\$0.66	\$0.66	\$0.62	\$0.66
Inpatient/Outpatient	GLIMEPIRIDE 1 MG PO TABS	0093-7254-01 A9270		\$0.48	\$0.47	\$0.48	\$0.44	\$0.47
Inpatient/Outpatient	GLIMEPIRIDE 1 MG PO TABS	16729-001-01 A9270		\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	GLIMEPIRIDE 2 MG PO TABS	0039-0222-10 A9270		\$9.75	\$9.56	\$9.65	\$9.00	\$9.56
Inpatient/Outpatient	GLIMEPIRIDE 2 MG PO TABS	45802-822-78 A9270		\$0.22	\$0.22	\$0.22	\$0.20	\$0.22
Inpatient/Outpatient	GLIMEPIRIDE 2 MG PO TABS	0093-7255-01 A9270		\$0.83	\$0.81	\$0.82	\$0.77	\$0.81
Inpatient/Outpatient	GLIMEPIRIDE 2 MG PO TABS	68084-326-11 A9270		\$0.37	\$0.36	\$0.37	\$0.34	\$0.36
Inpatient/Outpatient	GLIMEPIRIDE 4 MG PO TABS	0039-0223-10 A9270		\$18.39	\$18.02	\$18.21	\$16.97	\$18.02
Inpatient/Outpatient	GLIMEPIRIDE 4 MG PO TABS	45802-947-78 A9270		\$1.97	\$1.93	\$1.95	\$1.82	\$1.93
Inpatient/Outpatient	GLIMEPIRIDE 4 MG PO TABS	51079-426-01 A9270		\$0.72	\$0.71	\$0.71	\$0.66	\$0.71
Inpatient/Outpatient	CEFEPIME HCL 1 G IJ SOLR	60505-0834-4 J0692		\$63.93	\$62.65	\$63.29	\$59.01	\$62.65
Inpatient/Outpatient	CEFEPIME HCL 1 G IJ SOLR	0409-0219-11 J0692		\$23.17	\$22.71	\$22.94	\$21.39	\$22.71
Inpatient/Outpatient	CEFEPIME HCL 1 G IJ SOLR	25021-121-20 J0692		\$29.16	\$28.58	\$28.87	\$26.91	\$28.58
Inpatient/Outpatient	CEFEPIME HCL 1 G IJ SOLR	60505-6146-0 J0692		\$28.09	\$27.53	\$27.81	\$25.93	\$27.53
Inpatient/Outpatient	CEFEPIME HCL 1 G IJ SOLR	25021-121-66 J0692		\$14.21	\$13.93	\$14.07	\$13.12	\$13.93
Inpatient/Outpatient	CEFEPIME HCL 1 G IJ SOLR	0409-9566-01 J0692		\$9.04	\$8.86	\$8.95	\$8.34	\$8.86
Inpatient/Outpatient	CEFEPIME HCL 2 G IJ SOLR	60505-0681-4 J0692		\$67.37	\$66.02	\$66.70	\$62.18	\$66.02
Inpatient/Outpatient	CEFEPIME HCL 2 G IJ SOLR	44567-241-10 J0692		\$44.28	\$43.39	\$43.84	\$40.87	\$43.39
Inpatient/Outpatient	CEFEPIME HCL 2 G IJ SOLR	63323-340-20 J0692		\$44.69	\$43.80	\$44.24	\$41.25	\$43.80
Inpatient/Outpatient	CEFEPIME HCL 2 G IJ SOLR	60505-0681-1 J0692		\$67.37	\$66.02	\$66.70	\$62.18	\$66.02
Inpatient/Outpatient	CEFEPIME HCL 2 G IJ SOLR	25021-122-67 J0692		\$25.80	\$25.28	\$25.54	\$23.81	\$25.28
Inpatient/Outpatient	CEFEPIME HCL 2 G IJ SOLR	60505-6147-0 J0692		\$52.20	\$51.16	\$51.68	\$48.18	\$51.16
Inpatient/Outpatient	CEFEPIME HCL 2 G IJ SOLR	71288-009-20 J0692		\$43.88	\$43.00	\$43.44	\$40.50	\$43.00
Inpatient/Outpatient	CEFEPIME HCL 2 G IJ SOLR	63323-340-21 J0692		\$48.11	\$47.15	\$47.63	\$44.41	\$47.15
Inpatient/Outpatient	CEFEPIME HCL 2 G IJ SOLR	25021-122-50 J0692		\$48.60	\$47.63	\$48.11	\$44.86	\$47.63
Inpatient/Outpatient	CEFEPIME HCL 2 G IJ SOLR	0409-9735-01 J0692		\$17.64	\$17.29	\$17.46	\$16.28	\$17.29
Inpatient/Outpatient	POTASSIUM CHLORIDE IN NAACL 20-0.9 MEQ/L-% IV SOLN	0338-0691-04 J3480		\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	RITONAVIR 100 MG PO TABS	0074-3333-30 A9270		\$40.41	\$39.60	\$40.01	\$37.30	\$39.60
Inpatient/Outpatient	RITONAVIR 100 MG PO TABS	68382-696-06 A9270		\$33.44	\$32.77	\$33.11	\$30.87	\$32.77

Inpatient/Outpatient	RITONAVIR 100 MG PO TABS	0054-0407-13	A9270	\$23.47	\$23.00	\$23.24	\$21.66	\$23.00
Inpatient/Outpatient	RITONAVIR 100 MG PO TABS	65862-687-30	A9270	\$5.12	\$5.02	\$5.07	\$4.73	\$5.02
Inpatient/Outpatient	PHENYLEPHRINE-MINERAL OIL-PET 0.25-14-74.9 % RE OINT	0904-6356-02	A9270	\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	PHENYLEPHRINE-MINERAL OIL-PET 0.25-14-74.9 % RE OINT	0904-6726-02	A9270	\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	PHENYLEPHRINE-MINERAL OIL-PET 0.25-14-74.9 % RE OINT	0536-1288-06	A9270	\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	PHENYLEPHRINE-MINERAL OIL-PET 0.25-14-74.9 % RE OINT	45802-188-16	A9270	\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	PAROXETINE HCL 10 MG PO TABS	68084-044-01	A9270	\$2.05	\$2.01	\$2.03	\$1.89	\$2.01
Inpatient/Outpatient	PAROXETINE HCL 10 MG PO TABS	68084-044-11	A9270	\$6.48	\$6.35	\$6.42	\$5.98	\$6.35
Inpatient/Outpatient	PAROXETINE HCL 10 MG PO TABS	0904-5676-61	A9270	\$1.76	\$1.72	\$1.74	\$1.62	\$1.72
Inpatient/Outpatient	PAROXETINE HCL 10 MG PO TABS	13107-154-30	A9270	\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	PAROXETINE HCL 10 MG PO TABS	60505-0097-2	A9270	\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	PAROXETINE HCL 40 MG PO TABS	13107-157-30	A9270	\$0.54	\$0.53	\$0.53	\$0.50	\$0.53
Inpatient/Outpatient	PAROXETINE HCL 40 MG PO TABS	50268-643-11	A9270	\$2.10	\$2.06	\$2.08	\$1.94	\$2.06
Inpatient/Outpatient	PAROXETINE HCL 40 MG PO TABS	0904-5679-61	A9270	\$3.39	\$3.32	\$3.36	\$3.13	\$3.32
Inpatient/Outpatient	PAROXETINE HCL 40 MG PO TABS	43547-350-09	A9270	\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	PAROXETINE HCL 40 MG PO TABS	16714-184-01	A9270	\$0.44	\$0.43	\$0.44	\$0.41	\$0.43
Inpatient/Outpatient	MELATONIN 3 MG PO TABS	0536-6412-08	A9270	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	MELATONIN 3 MG PO TABS	54458-21360	A9270	\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	MELATONIN 3 MG PO TABS	68094-110-59	A9270	\$0.79	\$0.77	\$0.78	\$0.73	\$0.77
Inpatient/Outpatient	MELATONIN 3 MG PO TABS	68094-110-61	A9270	\$0.61	\$0.60	\$0.60	\$0.56	\$0.60
Inpatient/Outpatient	MELATONIN 3 MG PO TABS	0904-5182-61	A9270	\$0.37	\$0.36	\$0.37	\$0.34	\$0.36
Inpatient/Outpatient	MELATONIN 3 MG PO TABS	57896-864-06	A9270	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	MELATONIN 3 MG PO TABS	77333-516-25	A9270	\$0.91	\$0.89	\$0.90	\$0.84	\$0.89
Inpatient/Outpatient	MELATONIN 3 MG PO TABS	10006-70031	A9270	\$0.38	\$0.37	\$0.38	\$0.35	\$0.37
Inpatient/Outpatient	MELATONIN 3 MG PO TABS	20555-03601	A9270	\$0.54	\$0.53	\$0.53	\$0.50	\$0.53
Inpatient/Outpatient	MELATONIN 3 MG PO TABS	80681-08600	A9270	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	MELATONIN 3 MG PO TABS	80681-08500	A9270	\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	METRONIDAZOLE IV SYRINGE 5 MG/ML (NICU/INFANT)	99999-4088-2	J3490	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	ANTITHROMBIN III (HUMAN) 500 UNITS IV SOLR	13533-602-50		\$19.15	\$18.77	\$18.96	\$17.68	\$18.77
Inpatient/Outpatient	ANTITHROMBIN III (HUMAN) 500 UNITS IV SOLR	13533-606-12		\$19.26	\$18.87	\$19.07	\$17.78	\$18.87
Inpatient/Outpatient	HYOSCYAMINE SULFATE ER 0.375 MG PO TB12	43199-014-01	A9270	\$2.25	\$2.21	\$2.23	\$2.08	\$2.21
Inpatient/Outpatient	HYOSCYAMINE SULFATE ER 0.375 MG PO TB12	51525-0115-1	A9270	\$1.10	\$1.08	\$1.09	\$1.02	\$1.08
Inpatient/Outpatient	BLEOMYCIN SULFATE 30 UNITS IJ SOLR	0703-3155-01	J9040	\$244.70	\$239.81	\$242.25	\$225.86	\$239.81
Inpatient/Outpatient	BLEOMYCIN SULFATE 30 UNITS IJ SOLR	71288-107-20	J9040	\$226.23	\$221.71	\$223.97	\$208.81	\$221.71
Inpatient/Outpatient	BLEOMYCIN SULFATE 30 UNITS IJ SOLR	0409-0323-20	J9040	\$196.73	\$192.80	\$194.76	\$181.58	\$192.80
Inpatient/Outpatient	BLEOMYCIN SULFATE 30 UNITS IJ SOLR	0143-9241-01	J9040	\$173.55	\$170.08	\$171.81	\$160.19	\$170.08
Inpatient/Outpatient	BLEOMYCIN SULFATE 30 UNITS IJ SOLR	61703-323-22	J9040	\$404.64	\$396.55	\$400.59	\$373.48	\$396.55
Inpatient/Outpatient	PHENYLEPHRINE INFUSION 120 MCG/ML IN NS 250 ML (PREMIX)	99999-004-25	J2370	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	HYOSCYAMINE SULFATE 0.125 MG SL SUBL	24486-601-10	A9270	\$2.46	\$2.41	\$2.44	\$2.27	\$2.41
Inpatient/Outpatient	HYOSCYAMINE SULFATE 0.125 MG SL SUBL	76439-309-10	A9270	\$0.50	\$0.49	\$0.50	\$0.46	\$0.49
Inpatient/Outpatient	HYOSCYAMINE SULFATE 0.125 MG SL SUBL	68047-253-01	A9270	\$1.04	\$1.02	\$1.03	\$0.96	\$1.02
Inpatient/Outpatient	HYOSCYAMINE SULFATE 0.125 MG SL SUBL	42192-339-01	A9270	\$0.47	\$0.46	\$0.47	\$0.43	\$0.46
Inpatient/Outpatient	HYOSCYAMINE SULFATE 0.125 MG SL SUBL	70156-105-01	A9270	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	GEMCITABINE HCL 200 MG IV SOLR	0002-7501-01	J9201	\$470.55	\$461.14	\$465.84	\$434.32	\$461.14
Inpatient/Outpatient	GEMCITABINE HCL 200 MG IV SOLR	63323-102-13	J9201	\$27.22	\$26.68	\$26.95	\$25.12	\$26.68
Inpatient/Outpatient	GEMCITABINE HCL 200 MG IV SOLR	63323-102-94	J9201	\$27.22	\$26.68	\$26.95	\$25.12	\$26.68
Inpatient/Outpatient	GEMCITABINE HCL 200 MG IV SOLR	0409-0185-01	J9201	\$44.32	\$43.88	\$43.88	\$40.91	\$43.43
Inpatient/Outpatient	GEMCITABINE HCL 1 G IV SOLR	0002-7502-01	J9201	\$2,352.80	\$2,305.74	\$2,329.27	\$2,171.63	\$2,305.74
Inpatient/Outpatient	GEMCITABINE HCL 1 G IV SOLR	0781-3283-79	J9201	\$2,455.85	\$2,406.73	\$2,431.29	\$2,266.75	\$2,406.73
Inpatient/Outpatient	CLEVIDIPINE INFUSION 0.5 MG/ML (TITRATED)	10122-610-10	C9248	\$6.81	\$6.67	\$6.74	\$6.29	\$6.67
Inpatient/Outpatient	CLEVIDIPINE INFUSION 0.5 MG/ML (TITRATED)	10122-610-01	C9248	\$6.48	\$6.35	\$6.42	\$5.98	\$6.35
Inpatient/Outpatient	CLEVIDIPINE INFUSION 0.5 MG/ML (TITRATED)	10122-611-01	C9248	\$6.48	\$6.35	\$6.42	\$5.98	\$6.35
Inpatient/Outpatient	CLEVIDIPINE INFUSION 0.5 MG/ML (TITRATED)	10122-611-10	C9248	\$6.81	\$6.67	\$6.74	\$6.29	\$6.67
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 5000 UNIT/ML - FOR IV BOLUS	0069-0059-04	J1644	\$6.15	\$6.03	\$6.09	\$5.68	\$6.03
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 5000 UNIT/ML - FOR IV BOLUS	0409-2723-01	J1644	\$4.25	\$4.17	\$4.21	\$3.92	\$4.17
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 5000 UNIT/ML - FOR IV BOLUS	63323-047-10	J1644	\$3.65	\$3.58	\$3.61	\$3.37	\$3.58
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 5000 UNIT/ML - FOR IV BOLUS	63323-262-01	J1644	\$7.37	\$7.22	\$7.30	\$6.80	\$7.22
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 5000 UNIT/ML - FOR IV BOLUS	67457-949-00	J1644	\$3.19	\$3.13	\$3.16	\$2.94	\$3.13
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 5000 UNIT/ML - FOR IV BOLUS	0641-0400-12	J1644	\$11.60	\$11.37	\$11.48	\$10.71	\$11.37
Inpatient/Outpatient	RISPERIDONE 1 MG/ML PO SOLN	50458-305-03	A9270	\$57.80	\$56.64	\$57.22	\$53.35	\$56.64
Inpatient/Outpatient	RISPERIDONE 1 MG/ML PO SOLN	13668-589-06	A9270	\$1.13	\$1.11	\$1.12	\$1.04	\$1.11
Inpatient/Outpatient	RISPERIDONE 1 MG/ML PO SOLN	50458-596-01	A9270	\$2.26	\$2.21	\$2.24	\$2.09	\$2.21
Inpatient/Outpatient	RISPERIDONE 1 MG/ML PO SOLN	0054-0063-44	A9270	\$4.86	\$4.76	\$4.81	\$4.49	\$4.76
Inpatient/Outpatient	CIDOFOVIR 75 MG/ML IV SOLN	61958-0101-1	J0740	\$479.95	\$470.35	\$475.15	\$442.99	\$470.35
Inpatient/Outpatient	CIDOFOVIR 75 MG/ML IV SOLN	23155-216-31	J0740	\$426.38	\$417.85	\$422.12	\$393.55	\$417.85
Inpatient/Outpatient	MEROPENEM 500 MG IV SOLR	0409-3505-01	J2185	\$26.25	\$25.73	\$25.99	\$24.23	\$25.73
Inpatient/Outpatient	MEROPENEM 500 MG IV SOLR	0310-0325-20	J2185	\$22.98	\$22.52	\$22.75	\$21.21	\$22.52
Inpatient/Outpatient	MEROPENEM 500 MG IV SOLR	63323-507-25	J2185	\$13.12	\$12.86	\$12.99	\$12.11	\$12.86

Inpatient/Outpatient	MEROPENEM 500 MG IV SOLR	63323-507-20	J2185	\$13.12	\$12.86	\$12.99	\$12.11	\$12.86
Inpatient/Outpatient	MEROPENEM 500 MG IV SOLR	0781-3000-94	J2185	\$12.67	\$12.42	\$12.54	\$11.69	\$12.42
Inpatient/Outpatient	MEROPENEM 1 G IV SOLR	0310-0321-30	J2185	\$46.01	\$45.09	\$45.55	\$42.47	\$45.09
Inpatient/Outpatient	MEROPENEM 1 G IV SOLR	0310-0321-65	J2185	\$291.51	\$285.68	\$288.59	\$269.06	\$285.68
Inpatient/Outpatient	MEROPENEM 1 G IV SOLR	55150-208-30	J2185	\$24.88	\$24.38	\$24.63	\$22.96	\$24.38
Inpatient/Outpatient	MEROPENEM 1 G IV SOLR	68001-324-58	J2185	\$131.58	\$128.95	\$130.26	\$121.45	\$128.95
Inpatient/Outpatient	MEROPENEM 1 G IV SOLR	63323-508-25	J2185	\$26.23	\$25.71	\$25.97	\$24.21	\$25.71
Inpatient/Outpatient	MEROPENEM 1 G IV SOLR	0069-0314-01	J2185	\$33.05	\$32.39	\$32.72	\$30.51	\$32.39
Inpatient/Outpatient	MEROPENEM 1 G IV SOLR	63323-508-30	J2185	\$26.23	\$25.71	\$25.97	\$24.21	\$25.71
Inpatient/Outpatient	MEROPENEM 1 G IV SOLR	0781-3098-94	J2185	\$127.33	\$124.78	\$126.06	\$117.53	\$124.78
Inpatient/Outpatient	MEROPENEM 1 G IV SOLR	70121-1453-1	J2185	\$50.18	\$49.18	\$49.68	\$46.32	\$49.18
Inpatient/Outpatient	MEROPENEM 1 G IV SOLR	63323-508-45	J2185	\$26.23	\$25.71	\$25.97	\$24.21	\$25.71
Inpatient/Outpatient	MEROPENEM 1 G IV SOLR	63323-508-01	J2185	\$26.23	\$25.71	\$25.97	\$24.21	\$25.71
Inpatient/Outpatient	AZITHROMYCIN 600 MG PO TABS	59762-3080-1	A9270	\$13.12	\$12.86	\$12.99	\$12.11	\$12.86
Inpatient/Outpatient	AZITHROMYCIN 600 MG PO TABS	64679-962-01	A9270	\$11.98	\$11.74	\$11.86	\$11.06	\$11.74
Inpatient/Outpatient	AZITHROMYCIN 600 MG PO TABS	0093-7147-56	A9270	\$14.29	\$14.00	\$14.15	\$13.19	\$14.00
Inpatient/Outpatient	AZITHROMYCIN 600 MG PO TABS	68084-920-33	A9270	\$21.84	\$21.40	\$21.62	\$20.16	\$21.40
Inpatient/Outpatient	AZITHROMYCIN 600 MG PO TABS	50111-789-10	A9270	\$2.08	\$2.04	\$2.06	\$1.92	\$2.04
Inpatient/Outpatient	AZITHROMYCIN 600 MG PO TABS	60687-314-95	A9270	\$20.95	\$20.53	\$20.74	\$19.34	\$20.53
Inpatient/Outpatient	FEBUXOSTAT 80 MG PO TABS	0378-3926-93	A9270	\$12.30	\$12.05	\$12.18	\$11.35	\$12.05
Inpatient/Outpatient	FEBUXOSTAT 80 MG PO TABS	62332-191-30	A9270	\$7.99	\$7.83	\$7.91	\$7.37	\$7.83
Inpatient/Outpatient	FEBUXOSTAT 80 MG PO TABS	16714-060-01	A9270	\$1.22	\$1.20	\$1.21	\$1.13	\$1.20
Inpatient/Outpatient	ETOPOSIDE PHOSPHATE 100 MG IV SOLR	0015-3404-20	J9181	\$466.18	\$456.86	\$461.52	\$430.28	\$456.86
Inpatient/Outpatient	MIRTAZAPINE 30 MG PO TABS	57664-500-83	A9270	\$0.63	\$0.62	\$0.62	\$0.58	\$0.62
Inpatient/Outpatient	MIRTAZAPINE 30 MG PO TABS	0378-3530-93	A9270	\$1.79	\$1.75	\$1.77	\$1.65	\$1.75
Inpatient/Outpatient	MIRTAZAPINE 30 MG PO TABS	65862-003-30	A9270	\$1.95	\$1.91	\$1.93	\$1.80	\$1.91
Inpatient/Outpatient	MIRTAZAPINE 30 MG PO TABS	68084-120-11	A9270	\$0.85	\$0.83	\$0.84	\$0.78	\$0.83
Inpatient/Outpatient	MIRTAZAPINE 30 MG PO TABS	51079-087-01	A9270	\$0.43	\$0.43	\$0.43	\$0.40	\$0.42
Inpatient/Outpatient	MIRTAZAPINE 30 MG PO TABS	16714-708-01	A9270	\$1.82	\$1.78	\$1.80	\$1.68	\$1.78
Inpatient/Outpatient	MIRTAZAPINE 15 MG PO TABS	0093-7206-56	A9270	\$1.44	\$1.41	\$1.43	\$1.33	\$1.41
Inpatient/Outpatient	MIRTAZAPINE 15 MG PO TABS	0378-3515-93	A9270	\$1.42	\$1.39	\$1.41	\$1.31	\$1.39
Inpatient/Outpatient	MIRTAZAPINE 15 MG PO TABS	57664-499-83	A9270	\$1.44	\$1.41	\$1.43	\$1.33	\$1.41
Inpatient/Outpatient	MIRTAZAPINE 15 MG PO TABS	51079-086-20	A9270	\$0.78	\$0.76	\$0.77	\$0.72	\$0.76
Inpatient/Outpatient	MIRTAZAPINE 15 MG PO TABS	57664-499-18	A9270	\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	MIRTAZAPINE 15 MG PO TABS	65862-031-30	A9270	\$1.54	\$1.51	\$1.52	\$1.42	\$1.51
Inpatient/Outpatient	MIRTAZAPINE 15 MG PO TABS	63739-355-10	A9270	\$0.55	\$0.54	\$0.54	\$0.51	\$0.54
Inpatient/Outpatient	MIRTAZAPINE 15 MG PO TABS	68084-119-11	A9270	\$0.58	\$0.57	\$0.57	\$0.54	\$0.57
Inpatient/Outpatient	MIRTAZAPINE 15 MG PO TABS	0904-6519-61	A9270	\$0.51	\$0.50	\$0.50	\$0.47	\$0.50
Inpatient/Outpatient	MIRTAZAPINE 15 MG PO TABS	0378-3515-01	A9270	\$0.58	\$0.57	\$0.57	\$0.54	\$0.57
Inpatient/Outpatient	MIRTAZAPINE 15 MG PO TABS	51079-086-01	A9270	\$0.67	\$0.66	\$0.66	\$0.62	\$0.66
Inpatient/Outpatient	MIRTAZAPINE 15 MG PO TABS	63739-098-10	A9270	\$0.47	\$0.46	\$0.47	\$0.43	\$0.46
Inpatient/Outpatient	CANDIDA ALBICANS SKN TST ANTGN ID SOLLN	49643-138-01		\$420.93	\$412.51	\$416.72	\$388.52	\$412.51
Inpatient/Outpatient	OMALIZUMAB 75 MG/0.5ML SC SOSY	50242-214-01	J2357	\$2,268.04	\$2,222.68	\$2,245.36	\$2,093.40	\$2,222.68
Inpatient/Outpatient	ONDANSETRON HCL 4 MG/2ML II SOLN	0409-4755-03	J2405	\$0.75	\$0.74	\$0.74	\$0.69	\$0.74
Inpatient/Outpatient	ONDANSETRON HCL 4 MG/2ML II SOLN	0781-3010-95	J2405	\$0.79	\$0.77	\$0.78	\$0.73	\$0.77
Inpatient/Outpatient	ONDANSETRON HCL 4 MG/2ML II SOLN	0703-7221-04	J2405	\$4.66	\$4.57	\$4.61	\$4.30	\$4.57
Inpatient/Outpatient	ONDANSETRON HCL 4 MG/2ML II SOLN	25021-777-02	J2405	\$3.80	\$3.72	\$3.76	\$3.51	\$3.72
Inpatient/Outpatient	ONDANSETRON HCL 4 MG/2ML II SOLN	0781-3010-72	J2405	\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	ONDANSETRON HCL 4 MG/2ML II SOLN	23155-378-31	J2405	\$0.71	\$0.70	\$0.70	\$0.66	\$0.70
Inpatient/Outpatient	ONDANSETRON HCL 4 MG/2ML II SOLN	63323-373-02	J2405	\$5.07	\$4.97	\$5.02	\$4.68	\$4.97
Inpatient/Outpatient	ONDANSETRON HCL 4 MG/2ML II SOLN	0641-6080-01	J2405	\$2.35	\$2.30	\$2.33	\$2.17	\$2.30
Inpatient/Outpatient	ONDANSETRON HCL 4 MG/2ML II SOLN	23155-548-42	J2405	\$0.89	\$0.87	\$0.88	\$0.82	\$0.87
Inpatient/Outpatient	ONDANSETRON HCL 4 MG/2ML II SOLN	23155-548-31	J2405	\$0.71	\$0.70	\$0.70	\$0.66	\$0.70
Inpatient/Outpatient	ONDANSETRON HCL 4 MG/2ML II SOLN	23155-547-31	J2405	\$0.71	\$0.70	\$0.70	\$0.66	\$0.70
Inpatient/Outpatient	ONDANSETRON HCL 4 MG/2ML II SOLN	70860-776-02	J2405	\$0.54	\$0.53	\$0.53	\$0.50	\$0.53
Inpatient/Outpatient	ONDANSETRON HCL 4 MG/2ML II SOLN	60505-6130-0	J2405	\$0.68	\$0.67	\$0.67	\$0.63	\$0.67
Inpatient/Outpatient	NYSTATIN 100000 UNIT/GM EX POWD	0832-0465-15	A9270	\$1.13	\$1.11	\$1.12	\$1.04	\$1.11
Inpatient/Outpatient	NYSTATIN 100000 UNIT/GM EX POWD	0574-2008-15	A9270	\$4.14	\$4.06	\$4.10	\$3.82	\$4.06
Inpatient/Outpatient	NYSTATIN 100000 UNIT/GM EX POWD	68308-152-30	A9270	\$1.94	\$1.90	\$1.92	\$1.79	\$1.90
Inpatient/Outpatient	NYSTATIN 100000 UNIT/GM EX POWD	16714-769-01	A9270	\$1.82	\$1.78	\$1.80	\$1.68	\$1.78
Inpatient/Outpatient	ALBUTEROL SULFATE HFA 108 (90 BASE) MCG/ACT IN AERS	0173-0682-20	A9270	\$5.26	\$5.15	\$5.21	\$4.85	\$5.15
Inpatient/Outpatient	ALBUTEROL SULFATE HFA 108 (90 BASE) MCG/ACT IN AERS	0085-1132-01	A9270	\$53.70	\$52.63	\$53.16	\$49.57	\$52.63
Inpatient/Outpatient	ALBUTEROL SULFATE HFA 108 (90 BASE) MCG/ACT IN AERS	0173-0682-24	A9270	\$12.20	\$11.96	\$12.08	\$11.26	\$11.96
Inpatient/Outpatient	ALBUTEROL SULFATE HFA 108 (90 BASE) MCG/ACT IN AERS	66993-019-68	A9270	\$8.58	\$8.41	\$8.49	\$7.92	\$8.41
Inpatient/Outpatient	ALBUTEROL SULFATE HFA 108 (90 BASE) MCG/ACT IN AERS	0093-3174-31	A9270	\$20.57	\$20.16	\$20.36	\$18.99	\$20.16
Inpatient/Outpatient	ALBUTEROL SULFATE HFA 108 (90 BASE) MCG/ACT IN AERS	45802-088-01	A9270	\$18.35	\$17.98	\$18.17	\$16.94	\$17.98
Inpatient/Outpatient	ALBUTEROL SULFATE HFA 108 (90 BASE) MCG/ACT IN AERS	0254-1007-52	A9270	\$13.15	\$12.89	\$13.02	\$12.14	\$12.89
Inpatient/Outpatient	ALBUTEROL SULFATE HFA 108 (90 BASE) MCG/ACT IN AERS	0781-7296-85	A9270	\$11.27	\$11.04	\$11.16	\$10.40	\$11.04

Inpatient/Outpatient	ALBUTEROL SULFATE HFA 108 (90 BASE) MCG/ACT IN AERS	69097-142-60	A9270	\$11.54	\$11.31	\$11.42	\$10.65	\$11.31
Inpatient/Outpatient	ALBUTEROL SULFATE HFA 108 (90 BASE) MCG/ACT IN AERS	68180-963-01	A9270	\$11.11	\$10.89	\$11.00	\$10.25	\$10.89
Inpatient/Outpatient	ALBUTEROL SULFATE HFA 108 (90 BASE) MCG/ACT IN AERS	76282-679-42	A9270	\$6.08	\$5.96	\$6.02	\$5.61	\$5.96
Inpatient/Outpatient	OLANZAPINE 5 MG PO TABS	0002-4115-33	A9270	\$59.47	\$58.28	\$58.88	\$54.89	\$58.28
Inpatient/Outpatient	OLANZAPINE 5 MG PO TABS	0002-4115-01	A9270	\$40.38	\$39.57	\$39.98	\$37.27	\$39.57
Inpatient/Outpatient	OLANZAPINE 5 MG PO TABS	0904-6377-61	A9270	\$0.52	\$0.51	\$0.51	\$0.48	\$0.51
Inpatient/Outpatient	OLANZAPINE 5 MG PO TABS	60505-3111-0	A9270	\$0.38	\$0.37	\$0.38	\$0.35	\$0.37
Inpatient/Outpatient	OLANZAPINE 5 MG PO TABS	43598-164-30	A9270	\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	OLANZAPINE 5 MG PO TABS	68084-723-11	A9270	\$2.43	\$2.38	\$2.41	\$2.24	\$2.38
Inpatient/Outpatient	OLANZAPINE 10 MG PO TABS	0002-4117-01	A9270	\$60.83	\$59.61	\$60.22	\$56.15	\$59.61
Inpatient/Outpatient	OLANZAPINE 10 MG PO TABS	0002-4117-33	A9270	\$89.62	\$87.83	\$88.72	\$82.72	\$87.83
Inpatient/Outpatient	OLANZAPINE 10 MG PO TABS	0093-5770-01	A9270	\$1.08	\$1.06	\$1.07	\$1.00	\$1.06
Inpatient/Outpatient	OLANZAPINE 10 MG PO TABS	0904-6285-61	A9270	\$1.73	\$1.70	\$1.71	\$1.60	\$1.70
Inpatient/Outpatient	OLANZAPINE 10 MG PO TABS	60505-3113-0	A9270	\$0.55	\$0.54	\$0.54	\$0.51	\$0.54
Inpatient/Outpatient	OLANZAPINE 10 MG PO TABS	0904-6376-61	A9270	\$0.68	\$0.67	\$0.67	\$0.63	\$0.67
Inpatient/Outpatient	CETIRIZINE HCL 5 MG/5ML PO SOLN	99999-630-05		\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	CETIRIZINE HCL 5 MG/5ML PO SOLN	68094-004-59		\$1.92	\$1.88	\$1.90	\$1.77	\$1.88
Inpatient/Outpatient	CETIRIZINE HCL 5 MG/5ML PO SOLN	51672-2102-8		\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	CETIRIZINE HCL 5 MG/5ML PO SOLN	54838-552-40		\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	SENNA 8.6 MG PO TABS	0904-5165-61	A9150	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	SENNA 8.6 MG PO TABS	0603-0282-21	A9150	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	SENNA 8.6 MG PO TABS	37864-00033	A9150	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	SENNA 8.6 MG PO TABS	0904-6522-61	A9150	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	SENNA 8.6 MG PO TABS	51645-851-01	A9150	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	SENNA 8.6 MG PO TABS	0904-6434-80	A9150	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	SENNA 8.6 MG PO TABS	0904-6434-59	A9150	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	SENNA 8.6 MG PO TABS	70677-0041-1	A9150	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	SENNA 8.6 MG PO TABS	67618-300-10	A9150	\$0.79	\$0.77	\$0.78	\$0.73	\$0.77
Inpatient/Outpatient	SENNA 8.6 MG PO TABS	57896-451-01	A9150	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	SENNA 8.6 MG PO TABS	57896-454-01	A9150	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	SENNA 8.6 MG PO TABS	69618-064-01	A9150	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	SENNA 8.6 MG PO TABS	10135-314-01	A9150	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	SENNA 8.6 MG PO TABS	49483-080-10	A9150	\$0.04	\$0.04	\$0.04	\$0.04	\$0.04
Inpatient/Outpatient	ROPIVACAINE HCL 2 MG/ML IJ SOLN	63323-285-64	J2795	\$1.09	\$1.07	\$1.08	\$1.01	\$1.07
Inpatient/Outpatient	ROPIVACAINE HCL 2 MG/ML IJ SOLN	63323-285-10	J2795	\$2.18	\$2.14	\$2.16	\$2.01	\$2.14
Inpatient/Outpatient	ROPIVACAINE HCL 2 MG/ML IJ SOLN	63323-285-13	J2795	\$1.48	\$1.45	\$1.47	\$1.37	\$1.45
Inpatient/Outpatient	ROPIVACAINE HCL 2 MG/ML IJ SOLN	63323-285-20	J2795	\$2.19	\$2.15	\$2.17	\$2.02	\$2.15
Inpatient/Outpatient	ROPIVACAINE HCL 2 MG/ML IJ SOLN	63323-285-23	J2795	\$2.20	\$2.16	\$2.18	\$2.03	\$2.16
Inpatient/Outpatient	ROPIVACAINE HCL 2 MG/ML IJ SOLN	63323-285-41	J2795	\$1.48	\$1.45	\$1.47	\$1.37	\$1.45
Inpatient/Outpatient	ROPIVACAINE HCL 2 MG/ML IJ SOLN	25021-671-82	J2795	\$1.38	\$1.35	\$1.37	\$1.27	\$1.35
Inpatient/Outpatient	ROPIVACAINE HCL 2 MG/ML IJ SOLN	43066-015-01	J2795	\$0.85	\$0.83	\$0.84	\$0.78	\$0.83
Inpatient/Outpatient	ROPIVACAINE HCL 2 MG/ML IJ SOLN	0409-9300-21	J2795	\$0.79	\$0.77	\$0.78	\$0.73	\$0.77
Inpatient/Outpatient	ROPIVACAINE HCL 10 MG/ML IJ SOLN	63323-288-20	J2795	\$5.15	\$5.05	\$5.10	\$4.75	\$5.05
Inpatient/Outpatient	ROPIVACAINE HCL 5 MG/ML IJ SOLN	63323-286-30	J2795	\$2.63	\$2.58	\$2.60	\$2.43	\$2.58
Inpatient/Outpatient	ROPIVACAINE HCL 5 MG/ML IJ SOLN	55150-198-30	J2795	\$0.84	\$0.82	\$0.83	\$0.78	\$0.82
Inpatient/Outpatient	ROPIVACAINE HCL 5 MG/ML IJ SOLN	63323-286-38	J2795	\$0.75	\$0.74	\$0.74	\$0.69	\$0.74
Inpatient/Outpatient	ROPIVACAINE HCL 5 MG/ML IJ SOLN	63323-286-43	J2795	\$0.75	\$0.74	\$0.74	\$0.69	\$0.74
Inpatient/Outpatient	ROPIVACAINE HCL 5 MG/ML IJ SOLN	63323-286-11	J2795	\$0.75	\$0.74	\$0.74	\$0.69	\$0.74
Inpatient/Outpatient	ROPIVACAINE HCL 5 MG/ML IJ SOLN	63323-286-31	J2795	\$1.23	\$1.21	\$1.22	\$1.14	\$1.21
Inpatient/Outpatient	ROPIVACAINE HCL 5 MG/ML IJ SOLN	70069-064-01	J2795	\$0.68	\$0.67	\$0.67	\$0.63	\$0.67
Inpatient/Outpatient	ROPIVACAINE HCL 5 MG/ML IJ SOLN	17478-081-30	J2795	\$0.87	\$0.85	\$0.86	\$0.80	\$0.85
Inpatient/Outpatient	TRACE MINERALS CRCUMNZN (MTE-4 CONCENTRATE) IV SOLN	0517-7210-25		\$11.18	\$10.96	\$11.07	\$10.32	\$10.96
Inpatient/Outpatient	TRACE MINERALS CRCUMNZN (MTE-4 CONCENTRATE) IV SOLN	0517-7201-25		\$55.70	\$54.59	\$55.14	\$51.41	\$54.59
Inpatient/Outpatient	ROPINIROLE HCL 0.5 MG PO TABS	68084-201-21	A9270	\$5.43	\$5.32	\$5.38	\$5.01	\$5.32
Inpatient/Outpatient	ROPINIROLE HCL 0.5 MG PO TABS	43547-269-10	A9270	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	ROPINIROLE HCL 0.5 MG PO TABS	68462-254-01	A9270	\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	TORSEMIDE 20 MG PO TABS	60505-0234-1	A9270	\$0.34	\$0.33	\$0.34	\$0.31	\$0.33
Inpatient/Outpatient	TORSEMIDE 20 MG PO TABS	0037-5020-01	A9270	\$9.66	\$9.47	\$9.56	\$8.92	\$9.47
Inpatient/Outpatient	TORSEMIDE 20 MG PO TABS	0054-0077-25	A9270	\$0.92	\$0.90	\$0.91	\$0.85	\$0.90
Inpatient/Outpatient	TORSEMIDE 20 MG PO TABS	50111-917-01	A9270	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	TORSEMIDE 20 MG PO TABS	31722-531-01	A9270	\$1.03	\$1.01	\$1.02	\$0.95	\$1.01
Inpatient/Outpatient	TORSEMIDE 20 MG PO TABS	50268-756-11	A9270	\$1.53	\$1.50	\$1.51	\$1.41	\$1.50
Inpatient/Outpatient	TORSEMIDE 20 MG PO TABS	68084-539-01	A9270	\$1.45	\$1.42	\$1.44	\$1.34	\$1.42
Inpatient/Outpatient	TORSEMIDE 20 MG PO TABS	50268-756-15	A9270	\$1.28	\$1.25	\$1.27	\$1.18	\$1.25
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 4.5 (4-0.5) G IV SOLR	0206-8855-16	J2543	\$40.61	\$39.80	\$40.20	\$37.48	\$39.80
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 4.5 (4-0.5) G IV SOLR	0206-8855-08	J2543	\$113.82	\$111.54	\$112.68	\$105.06	\$111.54
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 4.5 (4-0.5) G IV SOLR	63323-320-56	J2543	\$34.50	\$33.81	\$34.16	\$31.84	\$33.81
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 4.5 (4-0.5) G IV SOLR	0781-3367-95	J2543	\$80.81	\$79.19	\$80.00	\$74.59	\$79.19

Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 4.5 (4-0.5) G IV SOLR	0409-3390-04	J2543	\$55.27	\$54.16	\$54.72	\$51.01	\$54.16
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 4.5 (4-0.5) G IV SOLR	44567-803-10	J2543	\$30.76	\$30.14	\$30.45	\$28.39	\$30.14
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 4.5 (4-0.5) G IV SOLR	0781-3114-91	J2543	\$25.87	\$25.35	\$25.61	\$23.88	\$25.35
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 4.5 (4-0.5) G IV SOLR	63323-982-21	J2543	\$22.65	\$22.20	\$22.42	\$20.91	\$22.20
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 4.5 (4-0.5) G IV SOLR	67457-523-00	J2543	\$14.50	\$14.21	\$14.36	\$13.38	\$14.21
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 4.5 (4-0.5) G IV SOLR	55150-121-50	J2543	\$20.81	\$20.39	\$20.60	\$19.21	\$20.39
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 4.5 (4-0.5) G IV SOLR	64679-012-02	J2543	\$21.03	\$20.61	\$20.82	\$19.41	\$20.61
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 4.5 (4-0.5) G IV SOLR	25021-166-48	J2543	\$70.47	\$69.06	\$69.77	\$65.04	\$69.06
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 4.5 (4-0.5) G IV SOLR	60505-6159-0	J2543	\$14.74	\$14.45	\$14.59	\$13.61	\$14.45
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 4.5 (4-0.5) G IV SOLR	0409-3390-11	J2543	\$15.95	\$15.63	\$15.79	\$14.72	\$15.63
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 4.5 (4-0.5) G IV SOLR	65219-259-05	J2543	\$17.14	\$16.80	\$16.97	\$15.82	\$16.80
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 4.5 (4-0.5) G IV SOLR	65219-259-15	J2543	\$27.14	\$26.60	\$26.87	\$25.05	\$26.60
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 3.375 (3-0.375) G IV SOLR	0206-8854-08	J2543	\$78.46	\$76.89	\$77.68	\$72.42	\$76.89
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 3.375 (3-0.375) G IV SOLR	25021-165-30	J2543	\$16.97	\$16.63	\$16.80	\$15.66	\$16.63
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 3.375 (3-0.375) G IV SOLR	67457-522-00	J2543	\$67.41	\$66.06	\$66.74	\$62.22	\$66.06
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 3.375 (3-0.375) G IV SOLR	0781-3350-94	J2543	\$67.31	\$65.96	\$66.64	\$62.13	\$65.96
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 3.375 (3-0.375) G IV SOLR	0409-3385-13	J2543	\$23.25	\$22.79	\$23.02	\$21.46	\$22.79
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 3.375 (3-0.375) G IV SOLR	60505-0687-1	J2543	\$25.02	\$24.52	\$24.77	\$23.09	\$24.52
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 3.375 (3-0.375) G IV SOLR	0206-8854-16	J2543	\$41.50	\$40.67	\$41.09	\$38.30	\$40.67
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 3.375 (3-0.375) G IV SOLR	63323-300-36	J2543	\$14.69	\$14.40	\$14.54	\$13.56	\$14.40
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 3.375 (3-0.375) G IV SOLR	55150-120-30	J2543	\$12.67	\$12.42	\$12.54	\$11.69	\$12.42
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 3.375 (3-0.375) G IV SOLR	63323-983-23	J2543	\$14.75	\$14.46	\$14.60	\$13.61	\$14.46
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 3.375 (3-0.375) G IV SOLR	0781-3113-90	J2543	\$18.54	\$18.17	\$18.35	\$17.11	\$18.17
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 3.375 (3-0.375) G IV SOLR	39822-0125-3	J2543	\$45.30	\$44.39	\$44.85	\$41.81	\$44.39
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 3.375 (3-0.375) G IV SOLR	63323-983-41	J2543	\$25.89	\$25.37	\$25.63	\$23.90	\$25.37
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 3.375 (3-0.375) G IV SOLR	61990-0120-1	J2543	\$17.24	\$16.90	\$17.07	\$15.91	\$16.90
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 3.375 (3-0.375) G IV SOLR	64679-056-02	J2543	\$14.69	\$14.40	\$14.54	\$13.56	\$14.40
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 3.375 (3-0.375) G IV SOLR	60505-6157-0	J2543	\$10.41	\$10.20	\$10.31	\$9.61	\$10.20
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 2.25 (2-0.25) G IV SOLR	55150-119-30	J2543	\$26.73	\$26.20	\$26.46	\$24.67	\$26.20
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 2.25 (2-0.25) G IV SOLR	0409-3383-02	J2543	\$27.64	\$27.09	\$27.36	\$25.51	\$27.09
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 2.25 (2-0.25) G IV SOLR	25021-164-30	J2543	\$13.58	\$13.31	\$13.44	\$12.53	\$13.31
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 2.25 (2-0.25) G IV SOLR	67457-521-00	J2543	\$44.95	\$44.05	\$44.50	\$41.49	\$44.05
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 2.25 (2-0.25) G IV SOLR	63323-981-23	J2543	\$11.31	\$11.08	\$11.20	\$10.44	\$11.08
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 2.25 (2-0.25) G IV SOLR	63323-981-41	J2543	\$24.89	\$24.39	\$24.64	\$22.97	\$24.39
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 2.25 (2-0.25) G IV SOLR	0409-3374-02	J2543	\$21.03	\$20.61	\$20.82	\$19.41	\$20.61
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 2.25 (2-0.25) G IV SOLR	60505-6156-0	J2543	\$9.65	\$9.46	\$9.55	\$8.91	\$9.46
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 2.25 (2-0.25) G IV SOLR	0409-3383-11	J2543	\$9.04	\$8.86	\$8.95	\$8.34	\$8.86
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 2.25 (2-0.25) G IV SOLR	71288-002-30	J2543	\$9.55	\$9.36	\$9.45	\$8.81	\$9.36
Inpatient/Outpatient	GABAPENTIN 400 MG PO CAPS	63739-376-10	A9270	\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	GABAPENTIN 400 MG PO CAPS	68084-081-11	A9270	\$0.63	\$0.62	\$0.62	\$0.58	\$0.62
Inpatient/Outpatient	GABAPENTIN 400 MG PO CAPS	0904-6105-61	A9270	\$0.66	\$0.65	\$0.65	\$0.61	\$0.65
Inpatient/Outpatient	GABAPENTIN 400 MG PO CAPS	16714-663-01	A9270	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	GABAPENTIN 400 MG PO CAPS	63739-693-10	A9270	\$0.82	\$0.80	\$0.81	\$0.76	\$0.80
Inpatient/Outpatient	GABAPENTIN 400 MG PO CAPS	67877-224-01	A9270	\$0.66	\$0.65	\$0.65	\$0.61	\$0.65
Inpatient/Outpatient	GABAPENTIN 400 MG PO CAPS	55154-3582-7	A9270	\$0.55	\$0.54	\$0.54	\$0.51	\$0.54
Inpatient/Outpatient	GABAPENTIN 400 MG PO CAPS	0904-5633-61	A9270	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	GABAPENTIN 400 MG PO CAPS	63739-984-10	A9270	\$0.50	\$0.49	\$0.50	\$0.46	\$0.49
Inpatient/Outpatient	GABAPENTIN 400 MG PO CAPS	0904-6667-61	A9270	\$0.51	\$0.50	\$0.50	\$0.47	\$0.50
Inpatient/Outpatient	GABAPENTIN 400 MG PO CAPS	68084-774-11	A9270	\$0.68	\$0.67	\$0.67	\$0.63	\$0.67
Inpatient/Outpatient	GABAPENTIN 400 MG PO CAPS	60687-602-11	A9270	\$0.79	\$0.77	\$0.78	\$0.73	\$0.77
Inpatient/Outpatient	GABAPENTIN 400 MG PO CAPS	63739-904-10	A9270	\$0.63	\$0.62	\$0.62	\$0.58	\$0.62
Inpatient/Outpatient	GABAPENTIN 300 MG PO CAPS	68084-563-11	A9270	\$0.48	\$0.47	\$0.48	\$0.44	\$0.47
Inpatient/Outpatient	GABAPENTIN 300 MG PO CAPS	63739-375-10	A9270	\$0.52	\$0.51	\$0.51	\$0.48	\$0.51
Inpatient/Outpatient	GABAPENTIN 300 MG PO CAPS	63739-689-10	A9270	\$0.52	\$0.51	\$0.51	\$0.48	\$0.51
Inpatient/Outpatient	GABAPENTIN 300 MG PO CAPS	50268-348-15	A9270	\$0.44	\$0.43	\$0.44	\$0.41	\$0.43
Inpatient/Outpatient	GABAPENTIN 300 MG PO CAPS	0904-5632-61	A9270	\$0.41	\$0.40	\$0.41	\$0.38	\$0.40
Inpatient/Outpatient	GABAPENTIN 300 MG PO CAPS	16714-504-02	A9270	\$0.68	\$0.67	\$0.67	\$0.63	\$0.67
Inpatient/Outpatient	GABAPENTIN 300 MG PO CAPS	63739-236-10	A9270	\$0.44	\$0.43	\$0.44	\$0.41	\$0.43
Inpatient/Outpatient	GABAPENTIN 300 MG PO CAPS	0904-6666-61	A9270	\$0.44	\$0.43	\$0.44	\$0.41	\$0.43
Inpatient/Outpatient	GABAPENTIN 300 MG PO CAPS	16714-662-02	A9270	\$0.21	\$0.21	\$0.21	\$0.19	\$0.21
Inpatient/Outpatient	GABAPENTIN 300 MG PO CAPS	16714-662-01	A9270	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	GABAPENTIN 300 MG PO CAPS	60687-591-11	A9270	\$0.54	\$0.53	\$0.53	\$0.50	\$0.53
Inpatient/Outpatient	GABAPENTIN 300 MG PO CAPS	63739-903-10	A9270	\$0.51	\$0.50	\$0.50	\$0.47	\$0.50
Inpatient/Outpatient	GABAPENTIN 100 MG PO CAPS	63739-374-10	A9270	\$0.44	\$0.43	\$0.44	\$0.41	\$0.43
Inpatient/Outpatient	GABAPENTIN 100 MG PO CAPS	0904-5631-61	A9270	\$0.30	\$0.29	\$0.30	\$0.28	\$0.29
Inpatient/Outpatient	GABAPENTIN 100 MG PO CAPS	0904-6078-61	A9270	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	GABAPENTIN 100 MG PO CAPS	68084-783-11	A9270	\$0.34	\$0.33	\$0.34	\$0.31	\$0.33
Inpatient/Outpatient	GABAPENTIN 100 MG PO CAPS	68084-594-01	A9270	\$0.30	\$0.29	\$0.30	\$0.28	\$0.29

Inpatient/Outpatient	GABAPENTIN 100 MG PO CAPS	55154-3580-4	A9270	\$0.52	\$0.51	\$0.51	\$0.48	\$0.51
Inpatient/Outpatient	GABAPENTIN 100 MG PO CAPS	63739-591-10	A9270	\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	GABAPENTIN 100 MG PO CAPS	67877-222-01	A9270	\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	GABAPENTIN 100 MG PO CAPS	16714-503-02	A9270	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	GABAPENTIN 100 MG PO CAPS	0904-6665-61	A9270	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	GABAPENTIN 100 MG PO CAPS	67877-222-10	A9270	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	GABAPENTIN 100 MG PO CAPS	16714-661-01	A9270	\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	GABAPENTIN 100 MG PO CAPS	60687-580-11	A9270	\$0.48	\$0.47	\$0.48	\$0.44	\$0.47
Inpatient/Outpatient	GABAPENTIN 100 MG PO CAPS	63739-902-10	A9270	\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	RISPERIDONE 2 MG PO TABS	50458-320-01	A9270	\$86.46	\$84.73	\$85.60	\$79.80	\$84.73
Inpatient/Outpatient	RISPERIDONE 2 MG PO TABS	60505-2587-0	A9270	\$7.37	\$7.22	\$7.30	\$6.80	\$7.22
Inpatient/Outpatient	RISPERIDONE 2 MG PO TABS	50458-593-10	A9270	\$14.84	\$14.54	\$14.69	\$13.70	\$14.54
Inpatient/Outpatient	RISPERIDONE 2 MG PO TABS	0904-6360-61	A9270	\$0.64	\$0.63	\$0.63	\$0.59	\$0.63
Inpatient/Outpatient	RISPERIDONE 3 MG PO TABS	50458-330-01	A9270	\$61.73	\$60.50	\$61.11	\$56.98	\$60.50
Inpatient/Outpatient	RISPERIDONE 3 MG PO TABS	0904-6361-61	A9270	\$0.68	\$0.67	\$0.67	\$0.63	\$0.67
Inpatient/Outpatient	RISPERIDONE 1 MG PO TABS	50458-300-01	A9270	\$31.44	\$30.81	\$31.13	\$29.02	\$30.81
Inpatient/Outpatient	RISPERIDONE 1 MG PO TABS	60505-2586-0	A9270	\$4.54	\$4.45	\$4.49	\$4.19	\$4.45
Inpatient/Outpatient	RISPERIDONE 1 MG PO TABS	50458-592-10	A9270	\$8.90	\$8.72	\$8.81	\$8.21	\$8.72
Inpatient/Outpatient	RISPERIDONE 1 MG PO TABS	0904-6359-61	A9270	\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	RISPERIDONE 1 MG PO TABS	68084-272-11	A9270	\$1.40	\$1.37	\$1.39	\$1.29	\$1.37
Inpatient/Outpatient	DOBUTAMINE INFUSION 2 MG/ML IN D5W (STANDARD CONC) PREMIX	0338-1075-02	J1250	\$0.22	\$0.22	\$0.22	\$0.20	\$0.22
Inpatient/Outpatient	DOBUTAMINE INFUSION 2 MG/ML IN D5W (STANDARD CONC) PREMIX	0409-2347-32	J1250	\$0.21	\$0.21	\$0.21	\$0.19	\$0.21
Inpatient/Outpatient	DOBUTAMINE INFUSION 2 MG/ML IN D5W (STANDARD CONC) PREMIX	99999-1075-1	J1250	\$0.22	\$0.22	\$0.22	\$0.20	\$0.22
Inpatient/Outpatient	BUPROPION HCL ER (SR) 100 MG PO TB12	0185-0410-60	A9270	\$0.74	\$0.73	\$0.73	\$0.68	\$0.73
Inpatient/Outpatient	BUPROPION HCL ER (SR) 100 MG PO TB12	51079-391-01	A9270	\$2.09	\$2.05	\$2.07	\$1.93	\$2.05
Inpatient/Outpatient	BUPROPION HCL ER (SR) 100 MG PO TB12	68084-697-11	A9270	\$2.32	\$2.27	\$2.30	\$2.14	\$2.27
Inpatient/Outpatient	BUPROPION HCL ER (SR) 100 MG PO TB12	43547-288-10	A9270	\$0.24	\$0.24	\$0.24	\$0.22	\$0.24
Inpatient/Outpatient	BUPROPION HCL ER (SR) 150 MG PO TB12	68084-471-11	A9270	\$2.14	\$2.10	\$2.12	\$1.98	\$2.10
Inpatient/Outpatient	BUPROPION HCL ER (SR) 150 MG PO TB12	68084-471-01	A9270	\$1.91	\$1.87	\$1.89	\$1.76	\$1.87
Inpatient/Outpatient	BUPROPION HCL ER (SR) 150 MG PO TB12	0185-0415-60	A9270	\$0.88	\$0.86	\$0.87	\$0.81	\$0.86
Inpatient/Outpatient	BUPROPION HCL ER (SR) 150 MG PO TB12	51079-392-01	A9270	\$1.78	\$1.74	\$1.76	\$1.64	\$1.74
Inpatient/Outpatient	BUPROPION HCL ER (SR) 150 MG PO TB12	63739-714-10	A9270	\$2.65	\$2.60	\$2.62	\$2.45	\$2.60
Inpatient/Outpatient	BUPROPION HCL ER (SR) 150 MG PO TB12	0904-6585-61	A9270	\$1.84	\$1.80	\$1.82	\$1.70	\$1.80
Inpatient/Outpatient	BUPROPION HCL ER (SR) 150 MG PO TB12	0904-7214-61	A9270	\$1.84	\$1.80	\$1.82	\$1.70	\$1.80
Inpatient/Outpatient	REMIFENTANIL HCL 2 MG IV SOLR	67457-198-05		\$388.62	\$380.85	\$384.73	\$358.70	\$380.85
Inpatient/Outpatient	REMIFENTANIL HCL 2 MG IV SOLR	63323-724-01		\$360.10	\$352.90	\$356.50	\$332.37	\$352.90
Inpatient/Outpatient	REMIFENTANIL HCL 2 MG IV SOLR	67457-198-99		\$389.03	\$381.25	\$385.14	\$359.07	\$381.25
Inpatient/Outpatient	REMIFENTANIL HCL 2 MG IV SOLR	0143-9392-01		\$415.57	\$407.26	\$411.41	\$383.57	\$407.26
Inpatient/Outpatient	CARVEDILOL 3.125 MG PO TABS	0007-4139-20	A9270	\$22.21	\$21.77	\$21.99	\$20.50	\$21.77
Inpatient/Outpatient	CARVEDILOL 3.125 MG PO TABS	55111-252-01	A9270	\$0.86	\$0.84	\$0.85	\$0.79	\$0.84
Inpatient/Outpatient	CARVEDILOL 3.125 MG PO TABS	51079-771-20	A9270	\$0.36	\$0.35	\$0.36	\$0.33	\$0.35
Inpatient/Outpatient	CARVEDILOL 3.125 MG PO TABS	68084-261-11	A9270	\$0.47	\$0.46	\$0.47	\$0.43	\$0.46
Inpatient/Outpatient	CARVEDILOL 3.125 MG PO TABS	51079-771-01	A9270	\$0.49	\$0.48	\$0.49	\$0.45	\$0.48
Inpatient/Outpatient	CARVEDILOL 3.125 MG PO TABS	0904-6300-61	A9270	\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	CARVEDILOL 3.125 MG PO TABS	68084-843-11	A9270	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	CARVEDILOL 3.125 MG PO TABS	68382-092-01	A9270	\$0.08	\$0.08	\$0.08	\$0.07	\$0.08
Inpatient/Outpatient	LATANOPROST 0.005 % OP SOLN	0013-8303-04	A9270	\$405.71	\$397.60	\$401.65	\$374.47	\$397.60
Inpatient/Outpatient	LATANOPROST 0.005 % OP SOLN	61314-547-01	A9270	\$9.66	\$9.47	\$9.56	\$8.92	\$9.47
Inpatient/Outpatient	LATANOPROST 0.005 % OP SOLN	17478-625-12	A9270	\$28.13	\$27.57	\$27.85	\$25.96	\$27.57
Inpatient/Outpatient	LATANOPROST 0.005 % OP SOLN	24208-463-25	A9270	\$20.43	\$20.02	\$20.23	\$18.86	\$20.02
Inpatient/Outpatient	LATANOPROST 0.005 % OP SOLN	59762-0333-2	A9270	\$7.48	\$7.33	\$7.41	\$6.90	\$7.33
Inpatient/Outpatient	DONEPEZIL HCL 5 MG PO TABS	62856-245-41	A9270	\$52.98	\$51.92	\$52.45	\$48.90	\$51.92
Inpatient/Outpatient	DONEPEZIL HCL 5 MG PO TABS	59762-0245-3	A9270	\$0.80	\$0.78	\$0.79	\$0.74	\$0.78
Inpatient/Outpatient	DONEPEZIL HCL 5 MG PO TABS	63739-646-10	A9270	\$0.55	\$0.54	\$0.54	\$0.51	\$0.54
Inpatient/Outpatient	DONEPEZIL HCL 5 MG PO TABS	60687-292-11	A9270	\$0.44	\$0.43	\$0.44	\$0.41	\$0.43
Inpatient/Outpatient	DONEPEZIL HCL 5 MG PO TABS	43547-275-09	A9270	\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	DONEPEZIL HCL 5 MG PO TABS	0904-6477-61	A9270	\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	DONEPEZIL HCL 10 MG PO TABS	62856-246-30	A9270	\$76.58	\$75.05	\$75.81	\$70.68	\$75.05
Inpatient/Outpatient	DONEPEZIL HCL 10 MG PO TABS	59762-0246-2	A9270	\$3.23	\$3.17	\$3.20	\$2.98	\$3.17
Inpatient/Outpatient	DONEPEZIL HCL 10 MG PO TABS	62856-246-90	A9270	\$52.98	\$51.92	\$52.45	\$48.90	\$51.92
Inpatient/Outpatient	DONEPEZIL HCL 10 MG PO TABS	63739-668-10	A9270	\$0.55	\$0.54	\$0.54	\$0.51	\$0.54
Inpatient/Outpatient	DONEPEZIL HCL 10 MG PO TABS	64679-312-01	A9270	\$1.07	\$1.05	\$1.06	\$0.99	\$1.05
Inpatient/Outpatient	DONEPEZIL HCL 10 MG PO TABS	63739-678-10	A9270	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	DONEPEZIL HCL 10 MG PO TABS	60687-303-11	A9270	\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	DONEPEZIL HCL 10 MG PO TABS	43547-276-09	A9270	\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	DONEPEZIL HCL 10 MG PO TABS	0781-5275-06	A9270	\$0.52	\$0.51	\$0.51	\$0.48	\$0.51
Inpatient/Outpatient	DONEPEZIL HCL 10 MG PO TABS	0904-6478-61	A9270	\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	DONEPEZIL HCL 10 MG PO TABS	16571-779-09	A9270	\$0.15	\$0.15	\$0.15	\$0.14	\$0.15

Inpatient/Outpatient	MIDAZOLAM IV SYRINGE 0.125 MG/0.5 ML (NICU/INFANT)(DOSES < 0.1 MG)	99999-005-05	J250	\$0.75	\$0.74	\$0.74	\$0.69	\$0.74
Inpatient/Outpatient	ONDANSETRON HCL 4 MG/5ML PO SOLN	0054-0064-47	A9270	\$8.16	\$8.00	\$8.08	\$7.53	\$8.00
Inpatient/Outpatient	ONDANSETRON HCL 4 MG/5ML PO SOLN	0173-0489-00	A9270	\$21.43	\$21.00	\$21.22	\$19.78	\$21.00
Inpatient/Outpatient	ONDANSETRON HCL 4 MG/5ML PO SOLN	16714-671-02	A9270	\$0.54	\$0.53	\$0.53	\$0.50	\$0.53
Inpatient/Outpatient	ONDANSETRON HCL 4 MG/5ML PO SOLN	99999-064-12	A9270	\$8.16	\$8.00	\$8.08	\$7.53	\$8.00
Inpatient/Outpatient	ONDANSETRON HCL 4 MG/5ML PO SOLN	54838-555-50	A9270	\$2.43	\$2.38	\$2.41	\$2.24	\$2.38
Inpatient/Outpatient	NITROPRUSSIDE SODIUM 25 MG/ML IV SOLN	0409-3024-01		\$105.00	\$102.90	\$103.95	\$96.92	\$102.90
Inpatient/Outpatient	NITROPRUSSIDE SODIUM 25 MG/ML IV SOLN	25021-310-02		\$294.01	\$288.13	\$291.07	\$271.37	\$288.13
Inpatient/Outpatient	NITROPRUSSIDE SODIUM 25 MG/ML IV SOLN	14789-012-02		\$158.31	\$155.14	\$156.73	\$146.12	\$155.14
Inpatient/Outpatient	NITROPRUSSIDE SODIUM 25 MG/ML IV SOLN	70069-261-01		\$33.80	\$33.12	\$33.46	\$31.20	\$33.12
Inpatient/Outpatient	NITROPRUSSIDE SODIUM 25 MG/ML IV SOLN	72485-105-01		\$65.59	\$64.28	\$64.93	\$60.54	\$64.28
Inpatient/Outpatient	NITROPRUSSIDE SODIUM 25 MG/ML IV SOLN	67457-999-02		\$294.01	\$288.13	\$291.07	\$271.37	\$288.13
Inpatient/Outpatient	NITROPRUSSIDE SODIUM 25 MG/ML IV SOLN	67457-839-02		\$29.40	\$28.81	\$29.11	\$27.14	\$28.81
Inpatient/Outpatient	LEVOFLOXACIN 250 MG PO TABS	68084-481-11	A9270	\$3.28	\$3.21	\$3.25	\$3.03	\$3.21
Inpatient/Outpatient	LEVOFLOXACIN 250 MG PO TABS	65862-536-50	A9270	\$0.55	\$0.54	\$0.54	\$0.51	\$0.54
Inpatient/Outpatient	LEVOFLOXACIN 250 MG PO TABS	0904-6351-61	A9270	\$0.71	\$0.70	\$0.70	\$0.66	\$0.70
Inpatient/Outpatient	LEVOFLOXACIN 250 MG PO TABS	0781-5790-01	A9270	\$0.47	\$0.46	\$0.47	\$0.43	\$0.46
Inpatient/Outpatient	LEVOFLOXACIN 500 MG PO TABS	51079-035-01	A9270	\$1.51	\$1.48	\$1.49	\$1.39	\$1.48
Inpatient/Outpatient	LEVOFLOXACIN 500 MG PO TABS	0904-6250-61	A9270	\$1.26	\$1.23	\$1.25	\$1.16	\$1.23
Inpatient/Outpatient	LEVOFLOXACIN 500 MG PO TABS	68084-482-11	A9270	\$1.28	\$1.25	\$1.27	\$1.18	\$1.25
Inpatient/Outpatient	LEVOFLOXACIN 500 MG PO TABS	65862-537-50	A9270	\$0.73	\$0.72	\$0.72	\$0.67	\$0.72
Inpatient/Outpatient	LEVOFLOXACIN 500 MG PO TABS	0904-6352-61	A9270	\$0.96	\$0.94	\$0.95	\$0.89	\$0.94
Inpatient/Outpatient	LEVOFLOXACIN 500 MG PO TABS	31722-722-50	A9270	\$0.67	\$0.66	\$0.66	\$0.62	\$0.66
Inpatient/Outpatient	TOPIRAMATE 25 MG PO TABS	31722-278-60	A9270	\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	TOPIRAMATE 25 MG PO TABS	51079-726-01	A9270	\$0.60	\$0.59	\$0.59	\$0.55	\$0.59
Inpatient/Outpatient	TOPIRAMATE 25 MG PO TABS	69097-122-03	A9270	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	TOPIRAMATE 25 MG PO TABS	68084-342-11	A9270	\$1.01	\$0.99	\$1.00	\$0.93	\$0.99
Inpatient/Outpatient	TOPIRAMATE 25 MG PO TABS	0904-6928-61	A9270	\$0.89	\$0.87	\$0.88	\$0.82	\$0.87
Inpatient/Outpatient	TOPIRAMATE 100 MG PO TABS	50458-641-65	A9270	\$74.91	\$73.41	\$74.16	\$69.14	\$73.41
Inpatient/Outpatient	TOPIRAMATE 100 MG PO TABS	31722-280-60	A9270	\$0.40	\$0.39	\$0.40	\$0.37	\$0.39
Inpatient/Outpatient	TOPIRAMATE 100 MG PO TABS	62756-711-86	A9270	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	TOPIRAMATE 100 MG PO TABS	51079-728-01	A9270	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	TOPIRAMATE 100 MG PO TABS	68084-344-11	A9270	\$1.61	\$1.58	\$1.59	\$1.49	\$1.58
Inpatient/Outpatient	TOPIRAMATE 100 MG PO TABS	69097-124-03	A9270	\$0.22	\$0.22	\$0.22	\$0.20	\$0.22
Inpatient/Outpatient	TOPIRAMATE 100 MG PO TABS	0904-6929-61	A9270	\$1.58	\$1.55	\$1.56	\$1.46	\$1.55
Inpatient/Outpatient	LEVOFLOXACIN IN D5W 500 MG/100ML IV SOLN	0781-3342-09	J1956	\$0.80	\$0.78	\$0.79	\$0.74	\$0.78
Inpatient/Outpatient	LEVOFLOXACIN IN D5W 500 MG/100ML IV SOLN	0781-3342-46	J1956	\$0.53	\$0.52	\$0.52	\$0.49	\$0.52
Inpatient/Outpatient	LEVOFLOXACIN IN D5W 500 MG/100ML IV SOLN	25021-132-82	J1956	\$0.53	\$0.52	\$0.52	\$0.49	\$0.52
Inpatient/Outpatient	LEVOFLOXACIN IN D5W 500 MG/100ML IV SOLN	0143-9721-01	J1956	\$0.67	\$0.66	\$0.66	\$0.62	\$0.66
Inpatient/Outpatient	LEVOFLOXACIN IN D5W 500 MG/100ML IV SOLN	36000-295-24	J1956	\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	LEVOFLOXACIN IN D5W 500 MG/100ML IV SOLN	36000-047-24	J1956	\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	LEVOFLOXACIN IN D5W 500 MG/100ML IV SOLN	0409-0528-23	J1956	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	ATORVASTATIN CALCIUM 10 MG PO TABS	0071-0155-40	A9270	\$11.09	\$10.87	\$10.98	\$10.24	\$10.87
Inpatient/Outpatient	ATORVASTATIN CALCIUM 10 MG PO TABS	68084-097-11	A9270	\$1.21	\$1.19	\$1.20	\$1.12	\$1.19
Inpatient/Outpatient	ATORVASTATIN CALCIUM 10 MG PO TABS	51079-208-20	A9270	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	ATORVASTATIN CALCIUM 10 MG PO TABS	0591-3774-19	A9270	\$11.82	\$11.58	\$11.70	\$10.91	\$11.58
Inpatient/Outpatient	ATORVASTATIN CALCIUM 10 MG PO TABS	51079-208-01	A9270	\$1.15	\$1.13	\$1.14	\$1.06	\$1.13
Inpatient/Outpatient	ATORVASTATIN CALCIUM 10 MG PO TABS	0904-6290-61	A9270	\$0.71	\$0.70	\$0.70	\$0.66	\$0.70
Inpatient/Outpatient	ATORVASTATIN CALCIUM 10 MG PO TABS	16714-874-01	A9270	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	ATORVASTATIN CALCIUM 40 MG PO TABS	0071-0157-23	A9270	\$67.87	\$66.51	\$67.19	\$62.64	\$66.51
Inpatient/Outpatient	ATORVASTATIN CALCIUM 40 MG PO TABS	0071-0157-40	A9270	\$43.94	\$43.06	\$43.50	\$40.56	\$43.06
Inpatient/Outpatient	ATORVASTATIN CALCIUM 40 MG PO TABS	0591-3776-19	A9270	\$0.92	\$0.90	\$0.91	\$0.85	\$0.90
Inpatient/Outpatient	ATORVASTATIN CALCIUM 40 MG PO TABS	60505-2580-9	A9270	\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	ATORVASTATIN CALCIUM 40 MG PO TABS	68084-099-11	A9270	\$1.12	\$1.10	\$1.11	\$1.03	\$1.10
Inpatient/Outpatient	ATORVASTATIN CALCIUM 40 MG PO TABS	0904-6292-61	A9270	\$0.92	\$0.90	\$0.91	\$0.85	\$0.90
Inpatient/Outpatient	ATORVASTATIN CALCIUM 40 MG PO TABS	51079-210-01	A9270	\$0.83	\$0.81	\$0.82	\$0.77	\$0.81
Inpatient/Outpatient	ATORVASTATIN CALCIUM 40 MG PO TABS	16714-175-01	A9270	\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	FENTANYL CITRATE (PF) 100 MCG/2ML NASAL SOLN (PEDS)	0409-9094-22	J3010	\$1.52	\$1.49	\$1.50	\$1.40	\$1.49
Inpatient/Outpatient	WARFARIN SODIUM 3 MG PO TABS	0056-0188-75	A9270	\$10.08	\$9.88	\$9.98	\$9.30	\$9.88
Inpatient/Outpatient	WARFARIN SODIUM 3 MG PO TABS	0056-0188-01	A9270	\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	WARFARIN SODIUM 3 MG PO TABS	0832-1214-89	A9270	\$0.68	\$0.67	\$0.67	\$0.63	\$0.67
Inpatient/Outpatient	WARFARIN SODIUM 6 MG PO TABS	0056-0189-75	A9270	\$13.49	\$13.22	\$13.36	\$12.45	\$13.22
Inpatient/Outpatient	WARFARIN SODIUM 6 MG PO TABS	0056-0189-01	A9270	\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	WARFARIN SODIUM 6 MG PO TABS	0056-0189-70	A9270	\$13.39	\$13.12	\$13.26	\$12.36	\$13.12
Inpatient/Outpatient	WARFARIN SODIUM 6 MG PO TABS	0832-1217-89	A9270	\$0.93	\$0.91	\$0.92	\$0.86	\$0.91
Inpatient/Outpatient	OLOPATADINE HCL 0.1 % OP SOLN	0065-0271-05	A9270	\$263.04	\$257.78	\$260.41	\$242.79	\$257.78
Inpatient/Outpatient	OLOPATADINE HCL 0.1 % OP SOLN	61314-271-05	A9270	\$14.92	\$14.62	\$14.77	\$13.77	\$14.62
Inpatient/Outpatient	OLOPATADINE HCL 0.1 % OP SOLN	60505-0575-1	A9270	\$35.77	\$35.05	\$35.41	\$33.02	\$35.05

Inpatient/Outpatient	OLOPATADINE HCL 0.1 % OP SOLN	65862-757-05	A9270	\$10.76	\$10.54	\$10.65	\$9.93	\$10.54
Inpatient/Outpatient	OLOPATADINE HCL 0.1 % OP SOLN	0378-8023-35	A9270	\$35.73	\$35.02	\$35.37	\$32.98	\$35.02
Inpatient/Outpatient	OLOPATADINE HCL 0.1 % OP SOLN	70069-007-01	A9270	\$11.50	\$11.27	\$11.39	\$10.61	\$11.27
Inpatient/Outpatient	OLOPATADINE HCL 0.1 % OP SOLN	58602-006-40	A9270	\$6.48	\$6.35	\$6.42	\$5.98	\$6.35
Inpatient/Outpatient	OLOPATADINE HCL 0.1 % OP SOLN	51407-499-05	A9270	\$3.99	\$3.91	\$3.95	\$3.68	\$3.91
Inpatient/Outpatient	NEOMYCIN-POLYMYXIN-DEXAMETH 3.5-10000-0.1 OP SUSP	61314-630-06	A9270	\$12.21	\$11.97	\$12.09	\$11.27	\$11.97
Inpatient/Outpatient	NEOMYCIN-POLYMYXIN-DEXAMETH 3.5-10000-0.1 OP SUSP	24208-830-60	A9270	\$14.77	\$14.47	\$14.62	\$13.63	\$14.47
Inpatient/Outpatient	DESMOPRESSIN ACETATE SPRAY 0.01 % NA SOLN	69918-501-05	A9270	\$119.86	\$117.46	\$118.66	\$110.63	\$117.46
Inpatient/Outpatient	DESMOPRESSIN ACETATE SPRAY 0.01 % NA SOLN	47335-788-91	A9270	\$81.41	\$79.78	\$80.60	\$75.14	\$79.78
Inpatient/Outpatient	DESMOPRESSIN ACETATE SPRAY 0.01 % NA SOLN	68382-384-01	A9270	\$174.50	\$171.01	\$172.76	\$161.06	\$171.01
Inpatient/Outpatient	DESMOPRESSIN ACETATE SPRAY 0.01 % NA SOLN	60505-0815-0	A9270	\$19.31	\$18.92	\$19.12	\$17.82	\$18.92
Inpatient/Outpatient	BACITRACIN-POLYMYXIN B OP OINT	24208-555-55	A9270	\$6.32	\$6.19	\$6.26	\$5.83	\$6.19
Inpatient/Outpatient	BACITRACIN-POLYMYXIN B OP OINT	0574-4021-35	A9270	\$7.04	\$6.90	\$6.97	\$6.50	\$6.90
Inpatient/Outpatient	DEXAMETHASONE 0.1 % OP SUSP	0998-0615-05	A9270	\$71.63	\$70.20	\$70.91	\$66.11	\$70.20
Inpatient/Outpatient	EPINEPHRINE HCL (NASAL) 0.1 % NA SOLN	42023-103-01	A9270	\$37.63	\$36.88	\$37.25	\$34.73	\$36.88
Inpatient/Outpatient	PHENYLEPHRINE HCL 10 % OP SOLN	17478-205-10	A9270	\$2.54	\$2.49	\$2.51	\$2.34	\$2.49
Inpatient/Outpatient	PHENYLEPHRINE HCL 10 % OP SOLN	17478-206-05	A9270	\$31.89	\$31.25	\$31.57	\$29.43	\$31.25
Inpatient/Outpatient	BENZOCAINE 20 % MT AERO	0283-0679-02	A9150	\$2.33	\$2.28	\$2.31	\$2.15	\$2.28
Inpatient/Outpatient	BETAXOLOL HCL 0.25 % OP SUSP	0065-0246-10	A9270	\$147.48	\$144.53	\$146.01	\$136.12	\$144.53
Inpatient/Outpatient	CARBACHOL 0.01 % IO SOLN	0065-0023-15	A9270	\$41.43	\$40.60	\$41.02	\$38.24	\$40.60
Inpatient/Outpatient	DICLOFENAC SODIUM 0.1 % OP SOLN	24208-457-25	A9270	\$25.51	\$25.00	\$25.25	\$23.55	\$25.00
Inpatient/Outpatient	DICLOFENAC SODIUM 0.1 % OP SOLN	61314-014-25	A9270	\$5.95	\$5.83	\$5.89	\$5.49	\$5.83
Inpatient/Outpatient	FLUOROMETHOLONE 0.1 % OP OINT	0023-0316-04	A9270	\$197.52	\$193.57	\$195.54	\$182.31	\$193.57
Inpatient/Outpatient	HYDROCORTISONE ACETATE 10 % EX FOAM	0037-6830-15	A9270	\$120.13	\$117.73	\$118.93	\$110.88	\$117.73
Inpatient/Outpatient	HYDROCORTISONE ACETATE 10 % EX FOAM	68220-140-15	A9270	\$78.75	\$77.18	\$77.96	\$72.69	\$77.18
Inpatient/Outpatient	KETOROLAC TROMETHAMINE 0.5 % OP SOLN	0023-2181-05	A9270	\$249.16	\$244.18	\$246.67	\$229.97	\$244.18
Inpatient/Outpatient	KETOROLAC TROMETHAMINE 0.5 % OP SOLN	61314-126-05	A9270	\$3.51	\$3.44	\$3.47	\$3.24	\$3.44
Inpatient/Outpatient	KETOROLAC TROMETHAMINE 0.5 % OP SOLN	17478-209-10	A9270	\$29.07	\$28.49	\$28.78	\$26.83	\$28.49
Inpatient/Outpatient	KETOROLAC TROMETHAMINE 0.5 % OP SOLN	60505-1003-1	A9270	\$6.47	\$6.34	\$6.41	\$5.97	\$6.34
Inpatient/Outpatient	KETOROLAC TROMETHAMINE 0.5 % OP SOLN	17478-209-19	A9270	\$22.05	\$21.61	\$21.83	\$20.35	\$21.61
Inpatient/Outpatient	MEDROXYPROGESTERONE ACETATE 150 MG/ML IM SUSP	0703-6801-01	J1050	\$396.28	\$388.35	\$392.32	\$365.77	\$388.35
Inpatient/Outpatient	MEDROXYPROGESTERONE ACETATE 150 MG/ML IM SUSP	0703-6801-04	J1050	\$395.87	\$387.95	\$391.91	\$365.39	\$387.95
Inpatient/Outpatient	MEDROXYPROGESTERONE ACETATE 150 MG/ML IM SUSP	59762-4537-1	J1050	\$197.41	\$193.46	\$195.44	\$182.21	\$193.46
Inpatient/Outpatient	MEDROXYPROGESTERONE ACETATE 150 MG/ML IM SUSP	67457-887-99	J1050	\$84.52	\$82.83	\$83.67	\$78.01	\$82.83
Inpatient/Outpatient	MEDROXYPROGESTERONE ACETATE 150 MG/ML IM SUSP	67457-887-00	J1050	\$85.00	\$83.30	\$84.15	\$78.46	\$83.30
Inpatient/Outpatient	MEDROXYPROGESTERONE ACETATE 150 MG/ML IM SUSP	0009-0746-35	J1050	\$384.44	\$376.75	\$380.60	\$354.84	\$376.75
Inpatient/Outpatient	MEDROXYPROGESTERONE ACETATE 150 MG/ML IM SUSP	0548-5400-00	J1050	\$75.33	\$73.82	\$74.58	\$69.53	\$73.82
Inpatient/Outpatient	METRONIDAZOLE 0.75 % EX GEL	0115-1474-46	A9270	\$10.37	\$10.27	\$10.27	\$9.57	\$10.16
Inpatient/Outpatient	METRONIDAZOLE 0.75 % EX GEL	66993-962-45	A9270	\$6.94	\$6.80	\$6.87	\$6.41	\$6.80
Inpatient/Outpatient	METRONIDAZOLE 0.75 % EX GEL	0713-0637-37	A9270	\$3.88	\$3.80	\$3.84	\$3.58	\$3.80
Inpatient/Outpatient	METRONIDAZOLE 0.75 % EX GEL	51672-4116-6	A9270	\$3.89	\$3.81	\$3.85	\$3.59	\$3.81
Inpatient/Outpatient	RIVASTIGMINE 9.5 MG/24HR TD PT24	0078-0502-15	A9270	\$103.48	\$101.41	\$102.45	\$95.51	\$101.41
Inpatient/Outpatient	RIVASTIGMINE 9.5 MG/24HR TD PT24	0078-0502-61	A9270	\$36.29	\$35.56	\$35.93	\$33.50	\$35.56
Inpatient/Outpatient	RIVASTIGMINE 9.5 MG/24HR TD PT24	47781-305-03	A9270	\$21.76	\$21.32	\$21.54	\$20.08	\$21.32
Inpatient/Outpatient	RIVASTIGMINE 9.5 MG/24HR TD PT24	47781-305-11	A9270	\$35.71	\$35.00	\$35.35	\$32.96	\$35.00
Inpatient/Outpatient	RIVASTIGMINE 9.5 MG/24HR TD PT24	0781-7309-31	A9270	\$26.84	\$26.30	\$26.57	\$24.77	\$26.30
Inpatient/Outpatient	RIVASTIGMINE 9.5 MG/24HR TD PT24	0781-7309-58	A9270	\$26.77	\$26.23	\$26.50	\$24.71	\$26.23
Inpatient/Outpatient	RIVASTIGMINE 9.5 MG/24HR TD PT24	0378-9071-93	A9270	\$13.55	\$13.28	\$13.41	\$12.51	\$13.28
Inpatient/Outpatient	RIVASTIGMINE 9.5 MG/24HR TD PT24	0378-9071-16	A9270	\$12.84	\$12.58	\$12.71	\$11.85	\$12.58
Inpatient/Outpatient	RIVASTIGMINE 9.5 MG/24HR TD PT24	16714-116-01	A9270	\$12.64	\$12.39	\$12.51	\$11.67	\$12.39
Inpatient/Outpatient	RIVASTIGMINE 9.5 MG/24HR TD PT24	63629-8807-1	A9270	\$10.88	\$10.66	\$10.77	\$10.04	\$10.66
Inpatient/Outpatient	TOBRAMYCIN 0.3 % OP OINT	0065-0644-35	A9270	\$277.02	\$271.48	\$274.25	\$255.69	\$271.48
Inpatient/Outpatient	OMALIZUMAB 150 MG/ML SC SOSY	50242-215-01	J2357	\$2,268.04	\$2,222.68	\$2,245.36	\$2,093.40	\$2,222.68
Inpatient/Outpatient	COAGULATION FACTOR IX (RECOMB) 1000 UNITS IV KIT	58394-635-03	J7200	\$6.76	\$6.62	\$6.69	\$6.24	\$6.62
Inpatient/Outpatient	SERTRALINE HCL 25 MG PO TABS	51079-762-20	A9270	\$0.54	\$0.53	\$0.53	\$0.50	\$0.53
Inpatient/Outpatient	SERTRALINE HCL 25 MG PO TABS	0143-9582-09	A9270	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	SERTRALINE HCL 25 MG PO TABS	68084-180-11	A9270	\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	SERTRALINE HCL 25 MG PO TABS	51079-762-01	A9270	\$0.53	\$0.52	\$0.52	\$0.49	\$0.52
Inpatient/Outpatient	SERTRALINE HCL 25 MG PO TABS	68180-351-09	A9270	\$0.88	\$0.86	\$0.87	\$0.81	\$0.86
Inpatient/Outpatient	SERTRALINE HCL 25 MG PO TABS	60687-231-11	A9270	\$0.59	\$0.58	\$0.58	\$0.54	\$0.58
Inpatient/Outpatient	SERTRALINE HCL 25 MG PO TABS	65862-011-30	A9270	\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	SERTRALINE HCL 25 MG PO TABS	0904-6924-61	A9270	\$1.09	\$1.07	\$1.08	\$1.01	\$1.07
Inpatient/Outpatient	ITRACONAZOLE 10 MG/ML PO SOLN	50458-295-15	A9270	\$10.32	\$10.11	\$10.22	\$9.53	\$10.11
Inpatient/Outpatient	ITRACONAZOLE 10 MG/ML PO SOLN	65162-087-74	A9270	\$4.77	\$4.67	\$4.72	\$4.40	\$4.67
Inpatient/Outpatient	APREPITANT 130 MG/18ML IV EMUL	47426-201-01	J0185	\$66.02	\$64.70	\$65.36	\$60.94	\$64.70
Inpatient/Outpatient	CYTARABINE (PF) 100 MG/ML U SOLN	61703-319-22	J9100	\$4.03	\$3.95	\$3.99	\$3.72	\$3.95
Inpatient/Outpatient	CYTARABINE (PF) 100 MG/ML U SOLN	67457-452-20	J9100	\$1.80	\$1.76	\$1.78	\$1.66	\$1.76
Inpatient/Outpatient	CYTARABINE (PF) 100 MG/ML U SOLN	63323-120-20	J9100	\$2.81	\$2.75	\$2.78	\$2.59	\$2.75

Inpatient/Outpatient	ETOMIDATE 2 MG/ML IV SOLN	55390-763-20		\$2.54	\$2.49	\$2.51	\$2.34	\$2.49
Inpatient/Outpatient	ETOMIDATE 2 MG/ML IV SOLN	0409-6695-02		\$1.44	\$1.41	\$1.43	\$1.33	\$1.41
Inpatient/Outpatient	ETOMIDATE 2 MG/ML IV SOLN	67457-183-99		\$49.29	\$48.30	\$48.80	\$45.49	\$48.30
Inpatient/Outpatient	ETOMIDATE 2 MG/ML IV SOLN	0069-0006-04		\$47.04	\$46.10	\$46.57	\$43.42	\$46.10
Inpatient/Outpatient	ETOMIDATE 2 MG/ML IV SOLN	0517-0781-10		\$2.27	\$2.22	\$2.25	\$2.10	\$2.22
Inpatient/Outpatient	ETOMIDATE 2 MG/ML IV SOLN	0143-9506-01		\$1.27	\$1.24	\$1.26	\$1.17	\$1.24
Inpatient/Outpatient	ETOMIDATE 2 MG/ML IV SOLN	70860-652-20		\$0.98	\$0.96	\$0.97	\$0.90	\$0.96
Inpatient/Outpatient	ETOMIDATE 2 MG/ML IV SOLN	0409-6695-12		\$1.44	\$1.41	\$1.43	\$1.33	\$1.41
Inpatient/Outpatient	ETOMIDATE 2 MG/ML IV SOLN	0409-6695-11		\$1.44	\$1.41	\$1.43	\$1.33	\$1.41
Inpatient/Outpatient	ETOMIDATE 2 MG/ML IV SOLN	0143-9507-01		\$1.06	\$1.04	\$1.05	\$0.98	\$1.04
Inpatient/Outpatient	ETOMIDATE 2 MG/ML IV SOLN	72266-147-01		\$1.29	\$1.26	\$1.28	\$1.19	\$1.26
Inpatient/Outpatient	ETOMIDATE 2 MG/ML IV SOLN	72266-146-01		\$2.11	\$2.07	\$2.09	\$1.95	\$2.07
Inpatient/Outpatient	ETOMIDATE 2 MG/ML IV SOLN	65219-447-02		\$0.86	\$0.84	\$0.85	\$0.79	\$0.84
Inpatient/Outpatient	MAGNESIUM SULFATE 4 GM/50ML IV SOLN	0409-6730-13	J3475	\$0.65	\$0.64	\$0.64	\$0.60	\$0.64
Inpatient/Outpatient	MELOXICAM 7.5 MG PO TABS	68180-501-01	A9270	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	MELOXICAM 7.5 MG PO TABS	50268-525-15	A9270	\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	MELOXICAM 7.5 MG PO TABS	63739-701-10	A9270	\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	MELOXICAM 7.5 MG PO TABS	50268-525-11	A9270	\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	MELOXICAM 7.5 MG PO TABS	68382-050-01	A9270	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	TOBRAMYCIN FORTIFIED OPHTHALMIC DROPS 9.1 MG/ML	99999-4081-8	A9270	\$4.56	\$4.47	\$4.51	\$4.21	\$4.47
Inpatient/Outpatient	MELOXICAM 15 MG PO TABS	65862-098-01	A9270	\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	MELOXICAM 15 MG PO TABS	68180-502-01	A9270	\$0.24	\$0.24	\$0.24	\$0.22	\$0.24
Inpatient/Outpatient	MELOXICAM 15 MG PO TABS	69097-159-07	A9270	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	MELOXICAM 15 MG PO TABS	68382-051-01	A9270	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	ATORVASTATIN CALCIUM 20 MG PO TABS	51079-209-20	A9270	\$0.82	\$0.80	\$0.81	\$0.76	\$0.80
Inpatient/Outpatient	ATORVASTATIN CALCIUM 20 MG PO TABS	51079-209-01	A9270	\$1.39	\$1.36	\$1.38	\$1.28	\$1.36
Inpatient/Outpatient	ATORVASTATIN CALCIUM 20 MG PO TABS	68084-098-11	A9270	\$1.47	\$1.44	\$1.46	\$1.36	\$1.44
Inpatient/Outpatient	ATORVASTATIN CALCIUM 20 MG PO TABS	0904-6291-61	A9270	\$0.88	\$0.86	\$0.86	\$0.81	\$0.86
Inpatient/Outpatient	ATORVASTATIN CALCIUM 20 MG PO TABS	68180-636-09	A9270	\$1.46	\$1.43	\$1.45	\$1.35	\$1.43
Inpatient/Outpatient	VALPROATE SODIUM 100 MG/ML IV SOLN	55390-007-10	J3490	\$2.08	\$2.04	\$2.06	\$1.92	\$2.04
Inpatient/Outpatient	VALPROATE SODIUM 100 MG/ML IV SOLN	63323-494-05	J3490	\$1.77	\$1.73	\$1.75	\$1.63	\$1.73
Inpatient/Outpatient	VALPROATE SODIUM 100 MG/ML IV SOLN	63323-494-16	J3490	\$1.77	\$1.73	\$1.75	\$1.63	\$1.73
Inpatient/Outpatient	VALPROATE SODIUM 100 MG/ML IV SOLN	63323-494-01	J3490	\$1.77	\$1.73	\$1.75	\$1.63	\$1.73
Inpatient/Outpatient	VALPROATE SODIUM 100 MG/ML IV SOLN	63323-494-41	J3490	\$1.77	\$1.73	\$1.75	\$1.63	\$1.73
Inpatient/Outpatient	VALPROATE SODIUM 100 MG/ML IV SOLN	0074-1564-10	J3490	\$28.71	\$28.14	\$28.42	\$26.50	\$28.14
Inpatient/Outpatient	VALPROATE SODIUM 100 MG/ML IV SOLN	0143-9785-10	J3490	\$4.52	\$4.43	\$4.47	\$4.17	\$4.43
Inpatient/Outpatient	VALPROATE SODIUM 100 MG/ML IV SOLN	0143-9785-01	J3490	\$4.52	\$4.43	\$4.47	\$4.17	\$4.43
Inpatient/Outpatient	MORPHINE SULFATE ER 100 MG PO TBCR	0406-8390-01	A9270	\$3.29	\$3.22	\$3.26	\$3.04	\$3.22
Inpatient/Outpatient	MORPHINE SULFATE ER 100 MG PO TBCR	0406-8390-62	A9270	\$10.71	\$10.50	\$10.60	\$9.89	\$10.50
Inpatient/Outpatient	MORPHINE SULFATE ER 100 MG PO TBCR	0406-8390-23	A9270	\$13.84	\$13.56	\$13.70	\$12.77	\$13.56
Inpatient/Outpatient	MORPHINE SULFATE ER 15 MG PO TBCR	0406-8315-01	A9270	\$1.03	\$1.01	\$1.02	\$0.95	\$1.01
Inpatient/Outpatient	MORPHINE SULFATE ER 15 MG PO TBCR	0406-8315-62	A9270	\$2.08	\$2.04	\$2.06	\$1.92	\$2.04
Inpatient/Outpatient	MORPHINE SULFATE ER 15 MG PO TBCR	59011-260-10	A9270	\$8.85	\$8.67	\$8.76	\$8.17	\$8.67
Inpatient/Outpatient	MORPHINE SULFATE ER 15 MG PO TBCR	0904-6557-61	A9270	\$1.93	\$1.89	\$1.91	\$1.78	\$1.89
Inpatient/Outpatient	MORPHINE SULFATE ER 15 MG PO TBCR	63739-899-10	A9270	\$2.09	\$2.05	\$2.07	\$1.93	\$2.05
Inpatient/Outpatient	MORPHINE SULFATE ER 15 MG PO TBCR	0406-8315-23	A9270	\$2.03	\$1.99	\$2.01	\$1.87	\$1.99
Inpatient/Outpatient	MORPHINE SULFATE ER 30 MG PO TBCR	0406-8330-62	A9270	\$5.74	\$5.63	\$5.68	\$5.30	\$5.63
Inpatient/Outpatient	MORPHINE SULFATE ER 30 MG PO TBCR	68084-404-11	A9270	\$4.43	\$4.34	\$4.39	\$4.09	\$4.34
Inpatient/Outpatient	MORPHINE SULFATE ER 30 MG PO TBCR	0904-6558-61	A9270	\$3.70	\$3.63	\$3.66	\$3.42	\$3.63
Inpatient/Outpatient	MORPHINE SULFATE ER 30 MG PO TBCR	63739-726-10	A9270	\$3.48	\$3.41	\$3.45	\$3.21	\$3.41
Inpatient/Outpatient	MORPHINE SULFATE ER 30 MG PO TBCR	0406-8330-23	A9270	\$1.81	\$1.77	\$1.79	\$1.67	\$1.77
Inpatient/Outpatient	PRENATAL VITAMIN GUMMY/DHA/FA PO CHEW	27917-01950	A9270	\$0.40	\$0.39	\$0.40	\$0.37	\$0.39
Inpatient/Outpatient	PRENATAL VITAMIN GUMMY/DHA/FA PO CHEW	11917-17654	A9270	\$0.40	\$0.39	\$0.40	\$0.37	\$0.39
Inpatient/Outpatient	AZITHROMYCIN 250 MG PO TABS	0069-3060-86	A9270	\$9.68	\$9.49	\$9.58	\$8.93	\$9.49
Inpatient/Outpatient	AZITHROMYCIN 250 MG PO TABS	59762-3060-3	A9270	\$11.12	\$10.90	\$11.01	\$10.26	\$10.90
Inpatient/Outpatient	AZITHROMYCIN 250 MG PO TABS	0093-7146-56	A9270	\$5.29	\$5.18	\$5.24	\$4.88	\$5.18
Inpatient/Outpatient	AZITHROMYCIN 250 MG PO TABS	0781-1496-69	A9270	\$11.97	\$11.73	\$11.85	\$11.05	\$11.73
Inpatient/Outpatient	AZITHROMYCIN 250 MG PO TABS	50268-098-15	A9270	\$3.32	\$3.25	\$3.29	\$3.06	\$3.25
Inpatient/Outpatient	AZITHROMYCIN 250 MG PO TABS	64679-961-01	A9270	\$5.50	\$5.39	\$5.45	\$5.08	\$5.39
Inpatient/Outpatient	AZITHROMYCIN 250 MG PO TABS	50268-098-11	A9270	\$7.36	\$7.21	\$7.29	\$6.79	\$7.21
Inpatient/Outpatient	AZITHROMYCIN 250 MG PO TABS	0904-6010-06	A9270	\$5.56	\$5.45	\$5.50	\$5.13	\$5.45
Inpatient/Outpatient	AZITHROMYCIN 250 MG PO TABS	0904-6405-06	A9270	\$4.44	\$4.35	\$4.40	\$4.10	\$4.35
Inpatient/Outpatient	AZITHROMYCIN 250 MG PO TABS	50268-103-11	A9270	\$4.92	\$4.82	\$4.87	\$4.54	\$4.82
Inpatient/Outpatient	AZITHROMYCIN 250 MG PO TABS	60687-282-11	A9270	\$5.28	\$5.17	\$5.23	\$4.87	\$5.17
Inpatient/Outpatient	AZITHROMYCIN 250 MG PO TABS	0781-5776-69	A9270	\$16.52	\$16.19	\$16.35	\$15.25	\$16.19
Inpatient/Outpatient	AZITHROMYCIN 250 MG PO TABS	50111-787-10	A9270	\$1.91	\$1.87	\$1.89	\$1.76	\$1.87
Inpatient/Outpatient	AZITHROMYCIN 250 MG PO TABS	0781-5776-06	A9270	\$11.73	\$11.50	\$11.61	\$10.83	\$11.50
Inpatient/Outpatient	AZITHROMYCIN 250 MG PO TABS	0904-6708-06	A9270	\$2.62	\$2.57	\$2.59	\$2.42	\$2.57

Inpatient/Outpatient	AZITHROMYCIN 250 MG PO TABS	65862-641-69	A9270	\$1.69	\$1.66	\$1.67	\$1.56	\$1.66
Inpatient/Outpatient	AZITHROMYCIN 250 MG PO TABS	0069-4061-89	A9270	\$15.61	\$15.30	\$15.45	\$14.41	\$15.30
Inpatient/Outpatient	LEVOCARNITINE 200 MG/ML IV SOLN	0703-0404-02	J1955	\$10.69	\$10.48	\$10.58	\$9.87	\$10.48
Inpatient/Outpatient	LEVOCARNITINE 200 MG/ML IV SOLN	54482-147-01	J1955	\$26.96	\$26.42	\$26.69	\$24.88	\$26.42
Inpatient/Outpatient	CALCIUM + VIT D 600-5 MG-MCG (CALTRATE D) PO TAB (WRAP)	0904-5856-52	A9150	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	CALCIUM + VIT D 600-5 MG-MCG (CALTRATE D) PO TAB (WRAP)	0761-0812-32	A9150	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	CALCIUM + VIT D 600-5 MG-MCG (CALTRATE D) PO TAB (WRAP)	0904-5856-92	A9150	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	CALCIUM + VIT D 600-5 MG-MCG (CALTRATE D) PO TAB (WRAP)	80681-13800	A9150	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	CALCIUM + VIT D 600-5 MG-MCG (CALTRATE D) PO TAB (WRAP)	80681-13801	A9150	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	PATIROMER SORBITE X CALCIUM 16.8 G PO PACK	53436-168-30	A9270	\$137.82	\$135.06	\$136.44	\$127.21	\$135.06
Inpatient/Outpatient	PATIROMER SORBITE X CALCIUM 16.8 G PO PACK	53436-168-01	A9270	\$123.94	\$121.46	\$122.70	\$114.40	\$121.46
Inpatient/Outpatient	OLANZAPINE 2.5 MG PO TABS	0002-4112-01	A9270	\$34.20	\$33.52	\$33.86	\$31.57	\$33.52
Inpatient/Outpatient	OLANZAPINE 2.5 MG PO TABS	0002-4112-33	A9270	\$50.39	\$49.38	\$49.89	\$46.51	\$49.38
Inpatient/Outpatient	OLANZAPINE 2.5 MG PO TABS	0904-6283-61	A9270	\$0.51	\$0.50	\$0.50	\$0.47	\$0.50
Inpatient/Outpatient	OLANZAPINE 2.5 MG PO TABS	68084-525-11	A9270	\$1.32	\$1.29	\$1.31	\$1.22	\$1.29
Inpatient/Outpatient	OLANZAPINE 2.5 MG PO TABS	51079-152-01	A9270	\$1.32	\$1.29	\$1.31	\$1.22	\$1.29
Inpatient/Outpatient	OLANZAPINE 2.5 MG PO TABS	42292-012-01	A9270	\$1.39	\$1.36	\$1.38	\$1.28	\$1.36
Inpatient/Outpatient	OLANZAPINE 2.5 MG PO TABS	60505-3110-0	A9270	\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	OXCARBAZEPINE 300 MG PO TABS	0078-0337-05	A9270	\$39.50	\$38.71	\$39.11	\$36.46	\$38.71
Inpatient/Outpatient	OXCARBAZEPINE 300 MG PO TABS	62756-184-88	A9270	\$2.67	\$2.62	\$2.64	\$2.46	\$2.62
Inpatient/Outpatient	OXCARBAZEPINE 300 MG PO TABS	68462-138-01	A9270	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	OXCARBAZEPINE 300 MG PO TABS	68084-853-11	A9270	\$3.66	\$3.59	\$3.62	\$3.38	\$3.59
Inpatient/Outpatient	OXCARBAZEPINE 300 MG PO TABS	51991-293-01	A9270	\$0.70	\$0.69	\$0.69	\$0.65	\$0.69
Inpatient/Outpatient	CITALOPRAM HYDROBROMIDE 20 MG PO TABS	55111-343-01	A9270	\$0.79	\$0.77	\$0.78	\$0.73	\$0.77
Inpatient/Outpatient	CITALOPRAM HYDROBROMIDE 20 MG PO TABS	57664-508-88	A9270	\$0.42	\$0.41	\$0.42	\$0.39	\$0.41
Inpatient/Outpatient	CITALOPRAM HYDROBROMIDE 20 MG PO TABS	60505-2519-4	A9270	\$1.69	\$1.66	\$1.67	\$1.56	\$1.66
Inpatient/Outpatient	CITALOPRAM HYDROBROMIDE 20 MG PO TABS	60505-2519-3	A9270	\$0.83	\$0.81	\$0.82	\$0.77	\$0.81
Inpatient/Outpatient	CITALOPRAM HYDROBROMIDE 20 MG PO TABS	0093-4741-19	A9270	\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	CITALOPRAM HYDROBROMIDE 20 MG PO TABS	0093-4741-93	A9270	\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	CITALOPRAM HYDROBROMIDE 20 MG PO TABS	55111-343-30	A9270	\$0.82	\$0.80	\$0.81	\$0.76	\$0.80
Inpatient/Outpatient	CITALOPRAM HYDROBROMIDE 20 MG PO TABS	0904-6085-61	A9270	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	CITALOPRAM HYDROBROMIDE 20 MG PO TABS	0378-6232-01	A9270	\$0.56	\$0.55	\$0.55	\$0.52	\$0.55
Inpatient/Outpatient	CITALOPRAM HYDROBROMIDE 20 MG PO TABS	68084-744-11	A9270	\$0.51	\$0.50	\$0.50	\$0.47	\$0.50
Inpatient/Outpatient	CITALOPRAM HYDROBROMIDE 20 MG PO TABS	13668-010-01	A9270	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	AZITHROMYCIN 500 MG IV SOLR	0069-3150-83	J0456	\$21.71	\$21.28	\$21.49	\$20.04	\$21.28
Inpatient/Outpatient	AZITHROMYCIN 500 MG IV SOLR	10019-648-02	J0456	\$36.48	\$35.75	\$36.12	\$33.67	\$35.75
Inpatient/Outpatient	AZITHROMYCIN 500 MG IV SOLR	63323-398-10	J0456	\$9.50	\$9.31	\$9.41	\$8.77	\$9.31
Inpatient/Outpatient	AZITHROMYCIN 500 MG IV SOLR	25021-112-10	J0456	\$26.78	\$26.24	\$26.51	\$24.72	\$26.24
Inpatient/Outpatient	AZITHROMYCIN 500 MG IV SOLR	60505-6076-4	J0456	\$32.92	\$32.26	\$32.59	\$30.39	\$32.26
Inpatient/Outpatient	AZITHROMYCIN 500 MG IV SOLR	55150-174-10	J0456	\$11.91	\$11.67	\$11.79	\$10.99	\$11.67
Inpatient/Outpatient	AZITHROMYCIN 500 MG IV SOLR	70860-100-10	J0456	\$14.54	\$14.25	\$14.39	\$13.42	\$14.25
Inpatient/Outpatient	AZITHROMYCIN 500 MG IV SOLR	63323-398-14	J0456	\$9.50	\$9.31	\$9.41	\$8.77	\$9.31
Inpatient/Outpatient	AZITHROMYCIN 500 MG IV SOLR	0069-0400-01	J0456	\$18.08	\$17.72	\$17.90	\$16.69	\$17.72
Inpatient/Outpatient	AZITHROMYCIN 500 MG IV SOLR	70860-100-41	J0456	\$22.63	\$22.18	\$22.40	\$20.89	\$22.18
Inpatient/Outpatient	AZITHROMYCIN 500 MG IV SOLR	67457-860-00	J0456	\$13.17	\$12.91	\$13.04	\$12.16	\$12.91
Inpatient/Outpatient	AZITHROMYCIN 500 MG IV SOLR	70436-019-82	J0456	\$12.51	\$12.26	\$12.38	\$11.55	\$12.26
Inpatient/Outpatient	AZITHROMYCIN 500 MG IV SOLR	62756-512-40	J0456	\$10.49	\$10.28	\$10.39	\$9.68	\$10.28
Inpatient/Outpatient	SODIUM CHLORIDE BACTERIOSTATIC 0.9 % IJ SOLN	63323-924-30		\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	SODIUM CHLORIDE BACTERIOSTATIC 0.9 % IJ SOLN	0409-1966-01		\$0.21	\$0.21	\$0.21	\$0.19	\$0.21
Inpatient/Outpatient	MORPHINE IV SYRINGE 0.1 MG/ML (NICU)(DOSES < 0.05 MG)	99999-1890-2	J2274	\$2.43	\$2.38	\$2.41	\$2.24	\$2.38
Inpatient/Outpatient	OXCARBAZEPINE 600 MG PO TABS	0078-0457-35	A9270	\$38.81	\$38.03	\$38.42	\$35.82	\$38.03
Inpatient/Outpatient	OXCARBAZEPINE 600 MG PO TABS	62756-185-88	A9270	\$1.61	\$1.58	\$1.59	\$1.49	\$1.58
Inpatient/Outpatient	OXCARBAZEPINE 600 MG PO TABS	68084-867-11	A9270	\$3.27	\$3.20	\$3.24	\$3.02	\$3.20
Inpatient/Outpatient	OXCARBAZEPINE 600 MG PO TABS	51991-294-01	A9270	\$1.30	\$1.27	\$1.29	\$1.20	\$1.27
Inpatient/Outpatient	PRAMIPEXOLE DIHYDROCHLORIDE 1 MG PO TABS	0597-0190-90	A9270	\$31.70	\$31.07	\$31.38	\$29.26	\$31.07
Inpatient/Outpatient	PRAMIPEXOLE DIHYDROCHLORIDE 1 MG PO TABS	68462-333-90	A9270	\$0.20	\$0.20	\$0.20	\$0.18	\$0.20
Inpatient/Outpatient	PRAMIPEXOLE DIHYDROCHLORIDE 1 MG PO TABS	57237-184-90	A9270	\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	PRAMIPEXOLE DIHYDROCHLORIDE 1.5 MG PO TABS	0597-0191-90	A9270	\$31.70	\$31.07	\$31.38	\$29.26	\$31.07
Inpatient/Outpatient	PRAMIPEXOLE DIHYDROCHLORIDE 1.5 MG PO TABS	16714-588-01	A9270	\$0.94	\$0.92	\$0.93	\$0.87	\$0.92
Inpatient/Outpatient	PRAMIPEXOLE DIHYDROCHLORIDE 1.5 MG PO TABS	68462-334-90	A9270	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	PRAMIPEXOLE DIHYDROCHLORIDE 1.5 MG PO TABS	68382-200-16	A9270	\$0.80	\$0.78	\$0.79	\$0.74	\$0.78
Inpatient/Outpatient	PRAMIPEXOLE DIHYDROCHLORIDE 1.5 MG PO TABS	33342-035-10	A9270	\$0.29	\$0.28	\$0.29	\$0.27	\$0.28
Inpatient/Outpatient	PRAMIPEXOLE DIHYDROCHLORIDE 0.25 MG PO TABS	0597-0184-90	A9270	\$31.87	\$31.23	\$31.55	\$29.42	\$31.23
Inpatient/Outpatient	PRAMIPEXOLE DIHYDROCHLORIDE 0.25 MG PO TABS	16714-585-01	A9270	\$0.94	\$0.92	\$0.93	\$0.87	\$0.92
Inpatient/Outpatient	PRAMIPEXOLE DIHYDROCHLORIDE 0.25 MG PO TABS	68084-440-11	A9270	\$0.98	\$0.96	\$0.97	\$0.90	\$0.96
Inpatient/Outpatient	PRAMIPEXOLE DIHYDROCHLORIDE 0.25 MG PO TABS	0597-0184-61	A9270	\$27.98	\$27.42	\$27.70	\$25.83	\$27.42
Inpatient/Outpatient	PRAMIPEXOLE DIHYDROCHLORIDE 0.25 MG PO TABS	0904-6704-61	A9270	\$0.83	\$0.81	\$0.82	\$0.77	\$0.81
Inpatient/Outpatient	PRAMIPEXOLE DIHYDROCHLORIDE 0.25 MG PO TABS	68462-331-90	A9270	\$0.33	\$0.32	\$0.33	\$0.30	\$0.32

Inpatient/Outpatient	PRAMIPEXOLE DIHYDROCHLORIDE 0.25 MG PO TABS	60687-570-11	A9270	\$0.86	\$0.84	\$0.85	\$0.79	\$0.84
Inpatient/Outpatient	PENTOXIFYLLINE ER 400 MG PO TBCR	0904-5448-61	A9270	\$0.93	\$0.91	\$0.92	\$0.86	\$0.91
Inpatient/Outpatient	PENTOXIFYLLINE ER 400 MG PO TBCR	51079-889-20	A9270	\$0.89	\$0.87	\$0.88	\$0.82	\$0.87
Inpatient/Outpatient	PENTOXIFYLLINE ER 400 MG PO TBCR	60505-0033-6	A9270	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	PRAVASTATIN SODIUM 10 MG PO TABS	0904-6113-61	A9270	\$0.96	\$0.94	\$0.95	\$0.89	\$0.94
Inpatient/Outpatient	PRAVASTATIN SODIUM 10 MG PO TABS	0904-5891-61	A9270	\$1.27	\$1.24	\$1.26	\$1.17	\$1.24
Inpatient/Outpatient	PRAVASTATIN SODIUM 10 MG PO TABS	60505-0168-9	A9270	\$0.20	\$0.20	\$0.20	\$0.18	\$0.20
Inpatient/Outpatient	PRAVASTATIN SODIUM 10 MG PO TABS	60687-169-01	A9270	\$1.30	\$1.27	\$1.29	\$1.20	\$1.27
Inpatient/Outpatient	PRAVASTATIN SODIUM 10 MG PO TABS	60687-169-11	A9270	\$1.30	\$1.27	\$1.29	\$1.20	\$1.27
Inpatient/Outpatient	WARFARIN SODIUM 4 MG PO TABS	0056-0168-70	A9270	\$10.01	\$9.81	\$9.91	\$9.24	\$9.81
Inpatient/Outpatient	WARFARIN SODIUM 4 MG PO TABS	0056-0168-75	A9270	\$10.11	\$9.91	\$10.01	\$9.33	\$9.91
Inpatient/Outpatient	WARFARIN SODIUM 4 MG PO TABS	0056-0168-01	A9270	\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	WARFARIN SODIUM 4 MG PO TABS	0832-1215-89	A9270	\$0.68	\$0.67	\$0.67	\$0.63	\$0.67
Inpatient/Outpatient	MYCOPHENOLATE MOFETIL 500 MG PO TABS	0004-0260-01	J7517	\$84.82	\$83.12	\$83.97	\$78.29	\$83.12
Inpatient/Outpatient	MYCOPHENOLATE MOFETIL 500 MG PO TABS	0093-7477-01	J7517	\$0.90	\$0.88	\$0.89	\$0.83	\$0.88
Inpatient/Outpatient	MYCOPHENOLATE MOFETIL 500 MG PO TABS	0054-0166-25	J7517	\$3.20	\$3.14	\$3.17	\$2.95	\$3.14
Inpatient/Outpatient	MYCOPHENOLATE MOFETIL 500 MG PO TABS	51079-379-01	J7517	\$3.60	\$3.53	\$3.56	\$3.32	\$3.53
Inpatient/Outpatient	MYCOPHENOLATE MOFETIL 500 MG PO TABS	68084-588-11	J7517	\$7.59	\$7.44	\$7.51	\$7.01	\$7.44
Inpatient/Outpatient	MYCOPHENOLATE MOFETIL 500 MG PO TABS	68084-801-11	J7517	\$3.00	\$2.94	\$2.97	\$2.77	\$2.94
Inpatient/Outpatient	MYCOPHENOLATE MOFETIL 500 MG PO TABS	67877-225-01	J7517	\$2.22	\$2.18	\$2.20	\$2.05	\$2.18
Inpatient/Outpatient	MYCOPHENOLATE MOFETIL 500 MG PO TABS	64380-725-06	J7517	\$0.94	\$0.92	\$0.93	\$0.87	\$0.92
Inpatient/Outpatient	MYCOPHENOLATE MOFETIL 500 MG PO TABS	60687-438-11	J7517	\$2.95	\$2.89	\$2.92	\$2.72	\$2.89
Inpatient/Outpatient	MYCOPHENOLATE MOFETIL 500 MG PO TABS	16729-019-01	J7517	\$0.95	\$0.93	\$0.94	\$0.88	\$0.93
Inpatient/Outpatient	ROPINIROLE HCL 0.25 MG PO TABS	0007-4890-20	A9270	\$25.26	\$24.75	\$25.01	\$23.31	\$24.75
Inpatient/Outpatient	ROPINIROLE HCL 0.25 MG PO TABS	68462-253-01	A9270	\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	ROPINIROLE HCL 0.25 MG PO TABS	43547-268-10	A9270	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	ROPINIROLE HCL 1 MG PO TABS	0007-4892-20	A9270	\$25.26	\$24.75	\$25.01	\$23.31	\$24.75
Inpatient/Outpatient	ROPINIROLE HCL 1 MG PO TABS	68462-255-01	A9270	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	ROPINIROLE HCL 1 MG PO TABS	68084-307-11	A9270	\$0.51	\$0.50	\$0.50	\$0.47	\$0.50
Inpatient/Outpatient	ROPINIROLE HCL 1 MG PO TABS	43547-270-10	A9270	\$0.20	\$0.20	\$0.20	\$0.18	\$0.20
Inpatient/Outpatient	ROPINIROLE HCL 1 MG PO TABS	62332-032-31	A9270	\$0.58	\$0.57	\$0.57	\$0.54	\$0.57
Inpatient/Outpatient	ROPINIROLE HCL 2 MG PO TABS	0007-4893-20	A9270	\$25.26	\$24.75	\$25.01	\$23.31	\$24.75
Inpatient/Outpatient	ROPINIROLE HCL 2 MG PO TABS	68462-256-01	A9270	\$0.24	\$0.24	\$0.24	\$0.22	\$0.24
Inpatient/Outpatient	ROPINIROLE HCL 2 MG PO TABS	43547-271-10	A9270	\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	ROPINIROLE HCL 2 MG PO TABS	62332-033-31	A9270	\$1.29	\$1.26	\$1.28	\$1.19	\$1.26
Inpatient/Outpatient	FENTANYL-ROPIVACAINE-NACL 2-0.075-0.9 MCG/ML-%-% LOW DOSE EP SOLN	99999-9301-1	J3010	\$0.20	\$0.20	\$0.20	\$0.18	\$0.20
Inpatient/Outpatient	QUETIAPINE FUMARATE 25 MG PO TABS	0310-0275-39	A9270	\$17.96	\$17.60	\$17.78	\$16.58	\$17.60
Inpatient/Outpatient	QUETIAPINE FUMARATE 25 MG PO TABS	0904-6277-61	A9270	\$0.87	\$0.85	\$0.86	\$0.80	\$0.85
Inpatient/Outpatient	QUETIAPINE FUMARATE 25 MG PO TABS	0093-8161-01	A9270	\$2.69	\$2.64	\$2.66	\$2.48	\$2.64
Inpatient/Outpatient	QUETIAPINE FUMARATE 25 MG PO TABS	0054-0220-25	A9270	\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	QUETIAPINE FUMARATE 25 MG PO TABS	68084-530-11	A9270	\$1.79	\$1.75	\$1.77	\$1.65	\$1.75
Inpatient/Outpatient	QUETIAPINE FUMARATE 25 MG PO TABS	0904-6638-61	A9270	\$0.47	\$0.46	\$0.47	\$0.43	\$0.46
Inpatient/Outpatient	QUETIAPINE FUMARATE 25 MG PO TABS	60687-327-11	A9270	\$0.90	\$0.88	\$0.89	\$0.83	\$0.88
Inpatient/Outpatient	QUETIAPINE FUMARATE 25 MG PO TABS	16714-452-01	A9270	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	QUETIAPINE FUMARATE 100 MG PO TABS	0310-0271-39	A9270	\$30.81	\$30.19	\$30.50	\$28.44	\$30.19
Inpatient/Outpatient	QUETIAPINE FUMARATE 100 MG PO TABS	0904-6279-61	A9270	\$1.56	\$1.53	\$1.54	\$1.44	\$1.53
Inpatient/Outpatient	QUETIAPINE FUMARATE 100 MG PO TABS	63739-665-10	A9270	\$0.63	\$0.62	\$0.62	\$0.58	\$0.62
Inpatient/Outpatient	QUETIAPINE FUMARATE 100 MG PO TABS	0904-6640-61	A9270	\$0.62	\$0.61	\$0.61	\$0.57	\$0.61
Inpatient/Outpatient	QUETIAPINE FUMARATE 100 MG PO TABS	60687-349-11	A9270	\$1.17	\$1.15	\$1.16	\$1.08	\$1.15
Inpatient/Outpatient	QUETIAPINE FUMARATE 50 MG PO TABS	60687-338-11	A9270	\$1.40	\$1.37	\$1.39	\$1.29	\$1.37
Inpatient/Outpatient	QUETIAPINE FUMARATE 50 MG PO TABS	0904-6278-61	A9270	\$2.12	\$2.08	\$2.10	\$1.96	\$2.08
Inpatient/Outpatient	QUETIAPINE FUMARATE 50 MG PO TABS	0904-6639-61	A9270	\$0.99	\$0.97	\$0.98	\$0.91	\$0.97
Inpatient/Outpatient	ISOSORB DINITRATE-HYDRALAZINE 20-37.5 MG PO TABS	24338-010-18	A9270	\$17.17	\$16.83	\$17.00	\$15.85	\$16.83
Inpatient/Outpatient	ISOSORB DINITRATE-HYDRALAZINE 20-37.5 MG PO TABS	24338-010-09	A9270	\$17.86	\$17.50	\$17.68	\$16.48	\$17.50
Inpatient/Outpatient	ISOSORB DINITRATE-HYDRALAZINE 20-37.5 MG PO TABS	52536-006-09	A9270	\$5.19	\$5.09	\$5.14	\$4.79	\$5.09
Inpatient/Outpatient	AMPHOTERICIN B LIPOSOME 50 MG IV SUSR	0469-3051-30	J0289	\$896.73	\$878.80	\$887.76	\$827.68	\$878.80
Inpatient/Outpatient	AMPHOTERICIN B LIPOSOME 50 MG IV SUSR	62756-233-01	J0289	\$361.88	\$354.64	\$358.26	\$334.02	\$354.64
Inpatient/Outpatient	CLOPIDOGREL BISULFATE 75 MG PO TABS	63653-1171-3	A9270	\$29.79	\$29.19	\$29.49	\$27.50	\$29.19
Inpatient/Outpatient	CLOPIDOGREL BISULFATE 75 MG PO TABS	51079-557-20	A9270	\$0.71	\$0.70	\$0.70	\$0.66	\$0.70
Inpatient/Outpatient	CLOPIDOGREL BISULFATE 75 MG PO TABS	51079-557-01	A9270	\$1.46	\$1.43	\$1.45	\$1.35	\$1.43
Inpatient/Outpatient	CLOPIDOGREL BISULFATE 75 MG PO TABS	0904-6294-61	A9270	\$0.56	\$0.55	\$0.55	\$0.52	\$0.55
Inpatient/Outpatient	CLOPIDOGREL BISULFATE 75 MG PO TABS	68084-536-11	A9270	\$0.76	\$0.74	\$0.75	\$0.70	\$0.74
Inpatient/Outpatient	CLOPIDOGREL BISULFATE 75 MG PO TABS	65862-357-90	A9270	\$0.30	\$0.29	\$0.30	\$0.28	\$0.29
Inpatient/Outpatient	RALOXIFENE HCL 60 MG PO TABS	0002-4165-02	A9270	\$25.72	\$25.21	\$25.46	\$23.74	\$25.21
Inpatient/Outpatient	RALOXIFENE HCL 60 MG PO TABS	0093-7290-56	A9270	\$3.37	\$3.30	\$3.34	\$3.11	\$3.30
Inpatient/Outpatient	RALOXIFENE HCL 60 MG PO TABS	65162-057-03	A9270	\$5.98	\$5.86	\$5.92	\$5.52	\$5.86
Inpatient/Outpatient	RALOXIFENE HCL 60 MG PO TABS	16714-213-01	A9270	\$1.92	\$1.88	\$1.90	\$1.77	\$1.88
Inpatient/Outpatient	RABIES VACCINE, PCEC IM SUSR	58160-964-12	90675	\$983.82	\$964.14	\$973.98	\$908.07	\$964.14

Inpatient/Outpatient	RABIES VACCINE, PCEC IM SUSR	58160-966-01	90675	\$1,148.15	\$1,125.19	\$1,136.67	\$1,059.74	\$1,125.19
Inpatient/Outpatient	FOMEPIZOLE 1.5 GM/1.5ML IV SOLN	0781-3182-84	J1451	\$1,123.79	\$1,101.31	\$1,112.55	\$1,037.26	\$1,101.31
Inpatient/Outpatient	FOMEPIZOLE 1.5 GM/1.5ML IV SOLN	68727-200-02	J1451	\$1,961.24	\$1,922.02	\$1,941.63	\$1,810.22	\$1,922.02
Inpatient/Outpatient	FOMEPIZOLE 1.5 GM/1.5ML IV SOLN	0781-3182-73	J1451	\$950.32	\$931.31	\$940.82	\$877.15	\$931.31
Inpatient/Outpatient	FOMEPIZOLE 1.5 GM/1.5ML IV SOLN	39822-0710-1	J1451	\$2,270.56	\$2,225.15	\$2,247.85	\$2,095.73	\$2,225.15
Inpatient/Outpatient	FOMEPIZOLE 1.5 GM/1.5ML IV SOLN	0517-0710-01	J1451	\$2,722.66	\$2,668.21	\$2,695.43	\$2,513.02	\$2,668.21
Inpatient/Outpatient	FOMEPIZOLE 1.5 GM/1.5ML IV SOLN	70710-1478-1	J1451	\$1,121.37	\$1,098.94	\$1,110.16	\$1,035.02	\$1,098.94
Inpatient/Outpatient	FOMEPIZOLE 1.5 GM/1.5ML IV SOLN	67457-211-02	J1451	\$1,058.08	\$1,036.92	\$1,047.50	\$976.61	\$1,036.92
Inpatient/Outpatient	BACTERIOSTATIC WATER(BENZ ALC) IJ SOLN	0409-3977-03		\$0.22	\$0.22	\$0.22	\$0.20	\$0.22
Inpatient/Outpatient	TOBRAMYCIN FOR INHALATION 40 MG/ML	99999-412-75	J7682	\$5.41	\$5.30	\$5.36	\$4.99	\$5.30
Inpatient/Outpatient	GLUCOSE 40 % PO GEL SYRINGE 1 G CARBO/2.5 ML (INFANT)	99999-069-15	A9270	\$0.37	\$0.36	\$0.37	\$0.34	\$0.36
Inpatient/Outpatient	OFLOXACIN 0.3 % OT SOLN	60505-0363-1	A9270	\$7.47	\$7.32	\$7.40	\$6.89	\$7.32
Inpatient/Outpatient	OFLOXACIN 0.3 % OT SOLN	24208-410-05	A9270	\$45.24	\$44.34	\$44.79	\$41.76	\$44.34
Inpatient/Outpatient	OFLOXACIN 0.3 % OT SOLN	61314-015-05	A9270	\$13.25	\$12.99	\$13.12	\$12.23	\$12.99
Inpatient/Outpatient	OFLOXACIN 0.3 % OT SOLN	50383-025-05	A9270	\$11.19	\$10.97	\$11.08	\$10.33	\$10.97
Inpatient/Outpatient	OFLOXACIN 0.3 % OT SOLN	69238-1615-3	A9270	\$6.78	\$6.64	\$6.71	\$6.26	\$6.64
Inpatient/Outpatient	CEFDINIR 300 MG PO CAPS	65862-177-60	A9270	\$2.01	\$1.97	\$1.99	\$1.86	\$1.97
Inpatient/Outpatient	CEFDINIR 300 MG PO CAPS	16714-205-02	A9270	\$4.20	\$4.12	\$4.16	\$3.88	\$4.12
Inpatient/Outpatient	CEFDINIR 300 MG PO CAPS	0781-2176-60	A9270	\$1.87	\$1.83	\$1.85	\$1.73	\$1.83
Inpatient/Outpatient	CEFDINIR 300 MG PO CAPS	16714-391-02	A9270	\$2.56	\$2.51	\$2.53	\$2.36	\$2.51
Inpatient/Outpatient	CEFDINIR 300 MG PO CAPS	67877-543-60	A9270	\$1.97	\$1.93	\$1.95	\$1.82	\$1.93
Inpatient/Outpatient	CEFDINIR 125 MG/5ML PO SUSR	16714-392-01	A9270	\$0.71	\$0.70	\$0.70	\$0.66	\$0.70
Inpatient/Outpatient	CEFDINIR 125 MG/5ML PO SUSR	99999-206-05	A9270	\$2.01	\$1.97	\$1.99	\$1.86	\$1.97
Inpatient/Outpatient	CEFDINIR 125 MG/5ML PO SUSR	65862-218-60	A9270	\$1.62	\$1.59	\$1.60	\$1.50	\$1.59
Inpatient/Outpatient	CEFDINIR 125 MG/5ML PO SUSR	68180-722-05	A9270	\$1.91	\$1.87	\$1.89	\$1.76	\$1.87
Inpatient/Outpatient	BUTALBITAL-ASA-CAFFEINE 50-325-40 MG PO CAPS	0591-3219-01	A9270	\$4.17	\$4.09	\$4.13	\$3.85	\$4.09
Inpatient/Outpatient	BUTALBITAL-ASA-CAFFEINE 50-325-40 MG PO CAPS	68084-934-33	A9270	\$11.23	\$11.01	\$11.12	\$10.37	\$11.01
Inpatient/Outpatient	BUTALBITAL-ASA-CAFFEINE 50-325-40 MG PO CAPS	0527-1552-01	A9270	\$4.27	\$4.18	\$4.23	\$3.94	\$4.18
Inpatient/Outpatient	DEXAMETHASONE SODIUM PHOSPHATE 10 MG/ML IJ SOLN	0641-0367-25	J1100	\$5.82	\$5.70	\$5.76	\$5.37	\$5.70
Inpatient/Outpatient	KETOROLAC TROMETHAMINE 30 MG/ML IJ SOLN	63323-162-01	J1885	\$3.71	\$3.64	\$3.67	\$3.42	\$3.64
Inpatient/Outpatient	KETOROLAC TROMETHAMINE 30 MG/ML IJ SOLN	0409-3795-01	J1885	\$21.39	\$20.96	\$21.18	\$19.74	\$20.96
Inpatient/Outpatient	KETOROLAC TROMETHAMINE 30 MG/ML IJ SOLN	10019-030-12	J1885	\$2.40	\$2.35	\$2.38	\$2.22	\$2.35
Inpatient/Outpatient	KETOROLAC TROMETHAMINE 30 MG/ML IJ SOLN	0409-2287-31	J1885	\$8.42	\$8.25	\$8.34	\$7.77	\$8.25
Inpatient/Outpatient	KETOROLAC TROMETHAMINE 30 MG/ML IJ SOLN	0409-3795-19	J1885	\$10.44	\$10.23	\$10.34	\$9.64	\$10.23
Inpatient/Outpatient	KETOROLAC TROMETHAMINE 30 MG/ML IJ SOLN	47781-584-93	J1885	\$3.34	\$3.27	\$3.31	\$3.08	\$3.27
Inpatient/Outpatient	KETOROLAC TROMETHAMINE 30 MG/ML IJ SOLN	69543-386-30	J1885	\$10.89	\$10.67	\$10.78	\$10.05	\$10.67
Inpatient/Outpatient	KETOROLAC TROMETHAMINE 30 MG/ML IJ SOLN	0641-6042-01	J1885	\$5.46	\$5.35	\$5.41	\$5.04	\$5.35
Inpatient/Outpatient	KETOROLAC TROMETHAMINE 30 MG/ML IJ SOLN	63323-162-16	J1885	\$3.71	\$3.64	\$3.67	\$3.42	\$3.64
Inpatient/Outpatient	KETOROLAC TROMETHAMINE 30 MG/ML IJ SOLN	0338-0072-25	J1885	\$6.22	\$6.10	\$6.16	\$5.74	\$6.10
Inpatient/Outpatient	KETOROLAC TROMETHAMINE 30 MG/ML IJ SOLN	72611-722-01	J1885	\$5.06	\$4.96	\$5.01	\$4.67	\$4.96
Inpatient/Outpatient	KETOROLAC TROMETHAMINE 30 MG/ML IJ SOLN	63323-162-43	J1885	\$3.71	\$3.64	\$3.67	\$3.42	\$3.64
Inpatient/Outpatient	KETOROLAC TROMETHAMINE 30 MG/ML IJ SOLN	63323-162-00	J1885	\$2.23	\$2.19	\$2.21	\$2.06	\$2.19
Inpatient/Outpatient	MONTELUKAST SODIUM 10 MG PO TABS	55111-725-90	A9270	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	MONTELUKAST SODIUM 10 MG PO TABS	0006-9117-54	A9270	\$34.55	\$33.86	\$34.20	\$31.89	\$33.86
Inpatient/Outpatient	MONTELUKAST SODIUM 10 MG PO TABS	0603-4655-02	A9270	\$0.79	\$0.77	\$0.78	\$0.73	\$0.77
Inpatient/Outpatient	MONTELUKAST SODIUM 10 MG PO TABS	0904-6529-61	A9270	\$1.50	\$1.47	\$1.49	\$1.38	\$1.47
Inpatient/Outpatient	MONTELUKAST SODIUM 10 MG PO TABS	68084-875-11	A9270	\$1.76	\$1.72	\$1.74	\$1.62	\$1.72
Inpatient/Outpatient	MONTELUKAST SODIUM 10 MG PO TABS	65862-574-90	A9270	\$0.38	\$0.37	\$0.38	\$0.35	\$0.37
Inpatient/Outpatient	MONTELUKAST SODIUM 10 MG PO TABS	50268-575-11	A9270	\$1.22	\$1.20	\$1.21	\$1.13	\$1.20
Inpatient/Outpatient	MONTELUKAST SODIUM 10 MG PO TABS	0904-6808-61	A9270	\$1.07	\$1.05	\$1.06	\$0.99	\$1.05
Inpatient/Outpatient	MONTELUKAST SODIUM 5 MG PO CHEW	0006-0275-01	A9270	\$17.23	\$16.89	\$17.06	\$15.90	\$16.89
Inpatient/Outpatient	MONTELUKAST SODIUM 5 MG PO CHEW	0006-0275-28	A9270	\$18.94	\$18.56	\$18.75	\$17.48	\$18.56
Inpatient/Outpatient	MONTELUKAST SODIUM 5 MG PO CHEW	55111-594-30	A9270	\$6.45	\$6.32	\$6.39	\$5.95	\$6.32
Inpatient/Outpatient	MONTELUKAST SODIUM 5 MG PO CHEW	0603-4654-02	A9270	\$1.11	\$1.09	\$1.10	\$1.02	\$1.09
Inpatient/Outpatient	MONTELUKAST SODIUM 5 MG PO CHEW	68084-864-11	A9270	\$6.45	\$6.32	\$6.39	\$5.95	\$6.32
Inpatient/Outpatient	MONTELUKAST SODIUM 5 MG PO CHEW	50268-574-11	A9270	\$3.31	\$3.24	\$3.28	\$3.06	\$3.24
Inpatient/Outpatient	MONTELUKAST SODIUM 5 MG PO CHEW	31722-728-30	A9270	\$0.80	\$0.78	\$0.79	\$0.74	\$0.78
Inpatient/Outpatient	SULFAMETHOXAZOLE-TRIMETHOPRIM 200-40 MG/5ML PO SUSP	50383-823-16	A9270	\$0.38	\$0.37	\$0.38	\$0.35	\$0.37
Inpatient/Outpatient	SULFAMETHOXAZOLE-TRIMETHOPRIM 200-40 MG/5ML PO SUSP	50383-824-16	A9270	\$0.91	\$0.89	\$0.90	\$0.84	\$0.89
Inpatient/Outpatient	SULFAMETHOXAZOLE-TRIMETHOPRIM 200-40 MG/5ML PO SUSP	65862-496-47	A9270	\$1.03	\$1.01	\$1.02	\$0.95	\$1.01
Inpatient/Outpatient	TALC 3 G PL POWD	62327-333-43	A9150	\$426.25	\$417.73	\$421.99	\$393.43	\$417.73
Inpatient/Outpatient	TALC 3 G PL POWD	62327-333-03	A9150	\$426.25	\$417.73	\$421.99	\$393.43	\$417.73
Inpatient/Outpatient	BUPRENORPHINE HCL-NALOXONE HCL 4-1 MG SL FILM	47781-356-11	A9270	\$16.10	\$15.78	\$15.94	\$14.86	\$15.78
Inpatient/Outpatient	PRAMIPEXOLE DIHYDROCHLORIDE 0.5 MG PO TABS	0597-0185-90	A9270	\$31.87	\$31.23	\$31.55	\$29.42	\$31.23
Inpatient/Outpatient	PRAMIPEXOLE DIHYDROCHLORIDE 0.5 MG PO TABS	16714-586-01	A9270	\$0.94	\$0.92	\$0.93	\$0.87	\$0.92
Inpatient/Outpatient	PRAMIPEXOLE DIHYDROCHLORIDE 0.5 MG PO TABS	68462-332-90	A9270	\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	PRAMIPEXOLE DIHYDROCHLORIDE 0.5 MG PO TABS	68382-198-16	A9270	\$0.80	\$0.78	\$0.79	\$0.74	\$0.78
Inpatient/Outpatient	PRAMIPEXOLE DIHYDROCHLORIDE 0.5 MG PO TABS	33342-033-10	A9270	\$0.81	\$0.79	\$0.80	\$0.75	\$0.79

Inpatient/Outpatient	PRAMIPEXOLE DIHYDROCHLORIDE 0.5 MG PO TABS	57237-182-90	A9270	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	BUPRENORPHINE HCL-NALOXONE HCL 12-3 MG SL FILM	47781-358-11	A9270	\$31.23	\$30.61	\$30.92	\$28.83	\$30.61
Inpatient/Outpatient	CARBIDOPA-LEVODOPA-ENTACAPONE 31.25-125-200 MG PO TABS	0378-8303-01	A9270	\$5.86	\$5.74	\$5.80	\$5.41	\$5.74
Inpatient/Outpatient	CARBIDOPA-LEVODOPA-ENTACAPONE 31.25-125-200 MG PO TABS	64679-785-04	A9270	\$4.05	\$3.97	\$4.01	\$3.74	\$3.97
Inpatient/Outpatient	CARBIDOPA-LEVODOPA-ENTACAPONE 31.25-125-200 MG PO TABS	0781-5641-01	A9270	\$2.99	\$2.93	\$2.96	\$2.76	\$2.93
Inpatient/Outpatient	PAROXETINE HCL 10 MG/5ML PO SUSP	60505-0402-5	A9270	\$7.23	\$7.09	\$7.16	\$6.67	\$7.09
Inpatient/Outpatient	PAROXETINE HCL 10 MG/5ML PO SUSP	70954-319-10	A9270	\$6.99	\$6.85	\$6.92	\$6.45	\$6.85
Inpatient/Outpatient	PARICALCITOL 5 MCG/ML IV SOLN	0074-1658-01	J2501	\$44.73	\$43.84	\$44.28	\$41.29	\$43.84
Inpatient/Outpatient	AMPHOTERICIN B LIPID 5 MG/ML IV SUSP	57665-101-41	J0287	\$22.25	\$21.81	\$22.03	\$20.54	\$21.81
Inpatient/Outpatient	DORZOLAMIDE HCL-TIMOLOL MAL 22.3-6.8 MG/ML OP SOLN	0006-3628-36	A9270	\$65.05	\$63.75	\$64.40	\$60.04	\$63.75
Inpatient/Outpatient	DORZOLAMIDE HCL-TIMOLOL MAL 22.3-6.8 MG/ML OP SOLN	60505-0568-2	A9270	\$25.33	\$24.82	\$25.08	\$23.38	\$24.82
Inpatient/Outpatient	DORZOLAMIDE HCL-TIMOLOL MAL 22.3-6.8 MG/ML OP SOLN	50383-233-10	A9270	\$7.69	\$7.54	\$7.61	\$7.10	\$7.54
Inpatient/Outpatient	DORZOLAMIDE HCL-TIMOLOL MAL 22.3-6.8 MG/ML OP SOLN	0781-6054-70	A9270	\$47.61	\$46.66	\$47.13	\$43.94	\$46.66
Inpatient/Outpatient	DORZOLAMIDE HCL-TIMOLOL MAL 22.3-6.8 MG/ML OP SOLN	24208-486-10	A9270	\$22.60	\$22.15	\$22.37	\$20.86	\$22.15
Inpatient/Outpatient	DORZOLAMIDE HCL-TIMOLOL MAL 22.3-6.8 MG/ML OP SOLN	61314-030-02	A9270	\$22.59	\$22.14	\$22.36	\$20.85	\$22.14
Inpatient/Outpatient	DORZOLAMIDE HCL-TIMOLOL MAL 22.3-6.8 MG/ML OP SOLN	17478-605-10	A9270	\$94.71	\$92.82	\$93.76	\$87.42	\$92.82
Inpatient/Outpatient	DORZOLAMIDE HCL-TIMOLOL MAL 22.3-6.8 MG/ML OP SOLN	42571-147-26	A9270	\$7.29	\$7.14	\$7.22	\$6.73	\$7.14
Inpatient/Outpatient	DORZOLAMIDE HCL-TIMOLOL MAL 22.3-6.8 MG/ML OP SOLN	70069-051-01	A9270	\$4.52	\$4.43	\$4.47	\$4.17	\$4.43
Inpatient/Outpatient	GEMCITABINE HCL 2 G IV SOLR	0409-0187-01	J9201	\$293.50	\$287.63	\$290.57	\$270.90	\$287.63
Inpatient/Outpatient	CIPROFLOXACIN 250 MG/5ML (5%) PO SUSR	50419-777-01	A9270	\$5.89	\$5.77	\$5.83	\$5.44	\$5.77
Inpatient/Outpatient	CIPROFLOXACIN 250 MG/5ML (5%) PO SUSR	68180-392-01	A9270	\$4.28	\$4.19	\$4.24	\$3.95	\$4.19
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE 250-125 MG PO TABS	0781-1874-31	A9270	\$7.38	\$7.23	\$7.31	\$6.81	\$7.23
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE 250-125 MG PO TABS	43598-218-30	A9270	\$16.31	\$15.98	\$16.15	\$15.05	\$15.98
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE 250-125 MG PO TABS	16714-476-01	A9270	\$9.61	\$9.42	\$9.51	\$8.87	\$9.42
Inpatient/Outpatient	HYDROCORTISONE (PERIANAL) 1 % EX CREA	65649-501-30		\$97.93	\$95.97	\$96.95	\$90.39	\$95.97
Inpatient/Outpatient	HYDROCORTISONE (PERIANAL) 1 % EX CREA	64980-302-30		\$2.54	\$2.49	\$2.51	\$2.34	\$2.49
Inpatient/Outpatient	HYDROCORTISONE (PERIANAL) 1 % EX CREA	62559-430-01		\$2.26	\$2.21	\$2.24	\$2.09	\$2.21
Inpatient/Outpatient	BRINZOLAMIDE 1 % OP SUSP	0065-0275-10	A9270	\$154.47	\$151.38	\$152.93	\$142.58	\$151.38
Inpatient/Outpatient	BRINZOLAMIDE 1 % OP SUSP	0591-2127-79	A9270	\$96.68	\$94.75	\$95.71	\$89.24	\$94.75
Inpatient/Outpatient	BRINZOLAMIDE 1 % OP SUSP	0781-6014-70	A9270	\$94.04	\$92.16	\$93.10	\$86.80	\$92.16
Inpatient/Outpatient	BRINZOLAMIDE 1 % OP SUSP	68682-464-10	A9270	\$149.97	\$146.97	\$148.47	\$138.42	\$146.97
Inpatient/Outpatient	TOCILIZUMAB 400 MG/20ML IV SOLN	50242-137-01	J3262	\$393.14	\$385.28	\$389.21	\$362.87	\$385.28
Inpatient/Outpatient	ACYCLOVIR SODIUM 50 MG/ML IV SOLN	63323-325-20	J0133	\$1.32	\$1.29	\$1.31	\$1.22	\$1.29
Inpatient/Outpatient	ACYCLOVIR SODIUM 50 MG/ML IV SOLN	63323-325-10	J0133	\$1.32	\$1.29	\$1.31	\$1.22	\$1.29
Inpatient/Outpatient	ACYCLOVIR SODIUM 50 MG/ML IV SOLN	63323-325-24	J0133	\$1.32	\$1.29	\$1.31	\$1.22	\$1.29
Inpatient/Outpatient	ACYCLOVIR SODIUM 50 MG/ML IV SOLN	55150-154-10	J0133	\$5.09	\$4.99	\$5.04	\$4.70	\$4.99
Inpatient/Outpatient	ACYCLOVIR SODIUM 50 MG/ML IV SOLN	63323-325-14	J0133	\$1.32	\$1.29	\$1.31	\$1.22	\$1.29
Inpatient/Outpatient	ACYCLOVIR SODIUM 50 MG/ML IV SOLN	63323-325-03	J0133	\$1.32	\$1.29	\$1.31	\$1.22	\$1.29
Inpatient/Outpatient	ACYCLOVIR SODIUM 50 MG/ML IV SOLN	63323-325-09	J0133	\$1.32	\$1.29	\$1.31	\$1.22	\$1.29
Inpatient/Outpatient	DEXAMETHASONE 4 MG/ML ORAL SOLUTION	99999-4096-0	J8540	\$3.23	\$3.17	\$3.20	\$2.98	\$3.17
Inpatient/Outpatient	DEXAMETHASONE 4 MG/ML ORAL SOLUTION	99999-4095-0	J8540	\$3.21	\$3.15	\$3.18	\$2.96	\$3.15
Inpatient/Outpatient	DEXAMETHASONE 4 MG/ML ORAL SOLUTION	99999-165-15	J8540	\$3.23	\$3.17	\$3.20	\$2.98	\$3.17
Inpatient/Outpatient	DEXAMETHASONE 4 MG/ML ORAL SOLUTION	99999-4097-0	J8540	\$3.23	\$3.17	\$3.20	\$2.98	\$3.17
Inpatient/Outpatient	CIPROFLOXACIN HCL 0.3 % OP OINT	0065-0654-35	A9270	\$277.02	\$271.48	\$274.25	\$255.69	\$271.48
Inpatient/Outpatient	CIPROFLOXACIN HCL 0.3 % OP OINT	0078-0841-01	A9270	\$290.88	\$285.06	\$287.97	\$268.48	\$285.06
Inpatient/Outpatient	DEXAMETHASONE SODIUM PHOSPHATE 120 MG/30ML IJ SOLN	63323-165-30	J1100	\$1.11	\$1.09	\$1.10	\$1.02	\$1.09
Inpatient/Outpatient	DEXAMETHASONE SODIUM PHOSPHATE 120 MG/30ML IJ SOLN	55150-239-30	J1100	\$1.57	\$1.54	\$1.55	\$1.45	\$1.54
Inpatient/Outpatient	DEXAMETHASONE SODIUM PHOSPHATE 120 MG/30ML IJ SOLN	67457-421-00	J1100	\$1.46	\$1.43	\$1.45	\$1.35	\$1.43
Inpatient/Outpatient	AMOXICILLIN 875 MG PO TABS	65862-015-01	A9270	\$0.81	\$0.75	\$0.80	\$0.75	\$0.79
Inpatient/Outpatient	AMOXICILLIN 875 MG PO TABS	0143-9285-01	A9270	\$0.61	\$0.60	\$0.60	\$0.56	\$0.60
Inpatient/Outpatient	AMOXICILLIN 875 MG PO TABS	57237-029-01	A9270	\$0.34	\$0.33	\$0.34	\$0.31	\$0.33
Inpatient/Outpatient	CITALOPRAM HYDROBROMIDE 40 MG PO TABS	57664-509-88	A9270	\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	CITALOPRAM HYDROBROMIDE 40 MG PO TABS	0093-4742-19	A9270	\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	CITALOPRAM HYDROBROMIDE 40 MG PO TABS	0093-4742-93	A9270	\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	CITALOPRAM HYDROBROMIDE 40 MG PO TABS	0904-6086-61	A9270	\$0.30	\$0.29	\$0.30	\$0.28	\$0.29
Inpatient/Outpatient	CITALOPRAM HYDROBROMIDE 40 MG PO TABS	13668-011-01	A9270	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	INFLIXIMAB 100 MG IV SOLR	57894-030-01	J1745	\$2,321.05	\$2,274.63	\$2,297.84	\$2,142.33	\$2,274.63
Inpatient/Outpatient	MYCOPHENOLATE MOFETIL HCL 500 MG IV SOLR	0004-0298-09		\$357.16	\$350.02	\$353.59	\$329.66	\$350.02
Inpatient/Outpatient	MYCOPHENOLATE MOFETIL HCL 500 MG IV SOLR	42023-172-04		\$310.64	\$304.43	\$307.53	\$286.72	\$304.43
Inpatient/Outpatient	MYCOPHENOLATE MOFETIL HCL 500 MG IV SOLR	67457-386-00		\$145.87	\$142.95	\$144.41	\$134.64	\$142.95
Inpatient/Outpatient	MIDAZOLAM HCL 2 MG/ML PO SYRP	0054-3566-99	A9270	\$1.58	\$1.55	\$1.56	\$1.46	\$1.55
Inpatient/Outpatient	MIDAZOLAM HCL 2 MG/ML PO SYRP	68094-764-59	A9270	\$2.98	\$2.92	\$2.95	\$2.75	\$2.92
Inpatient/Outpatient	MIDAZOLAM HCL 2 MG/ML PO SYRP	99999-3566-5	A9270	\$1.58	\$1.55	\$1.56	\$1.46	\$1.55
Inpatient/Outpatient	MIDAZOLAM HCL 2 MG/ML PO SYRP	60687-576-40	A9270	\$4.05	\$3.97	\$4.01	\$3.74	\$3.97
Inpatient/Outpatient	ANTIVENIN LATRODECTUS MACTANS IJ KIT	0006-4084-00		\$130.98	\$128.36	\$129.67	\$120.89	\$128.36
Inpatient/Outpatient	SENNOSIDES-DOCUSATE SODIUM 8.6-50 MG PO TABS	0904-5643-60	A9150	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	SENNOSIDES-DOCUSATE SODIUM 8.6-50 MG PO TABS	67618-106-60	A9150	\$1.28	\$1.25	\$1.27	\$1.18	\$1.25
Inpatient/Outpatient	SENNOSIDES-DOCUSATE SODIUM 8.6-50 MG PO TABS	0904-5643-61	A9150	\$0.11	\$0.11	\$0.11	\$0.10	\$0.11

Inpatient/Outpatient	SENNOSIDES-DOCUSATE SODIUM 8.6-50 MG PO TABS	67618-310-60	A9150	\$1.64	\$1.61	\$1.62	\$1.51	\$1.61
Inpatient/Outpatient	SENNOSIDES-DOCUSATE SODIUM 8.6-50 MG PO TABS	63739-432-01	A9150	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	SENNOSIDES-DOCUSATE SODIUM 8.6-50 MG PO TABS	63739-432-10	A9150	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	SENNOSIDES-DOCUSATE SODIUM 8.6-50 MG PO TABS	37864-85099	A9150	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	SENNOSIDES-DOCUSATE SODIUM 8.6-50 MG PO TABS	0603-0283-21	A9150	\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	SENNOSIDES-DOCUSATE SODIUM 8.6-50 MG PO TABS	57896-455-10	A9150	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	SENNOSIDES-DOCUSATE SODIUM 8.6-50 MG PO TABS	57896-303-01	A9150	\$0.08	\$0.08	\$0.08	\$0.07	\$0.08
Inpatient/Outpatient	SENNOSIDES-DOCUSATE SODIUM 8.6-50 MG PO TABS	0904-6723-61	A9150	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	SENNOSIDES-DOCUSATE SODIUM 8.6-50 MG PO TABS	70677-0042-1	A9150	\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	SENNOSIDES-DOCUSATE SODIUM 8.6-50 MG PO TABS	57896-304-01	A9150	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	SENNOSIDES-DOCUSATE SODIUM 8.6-50 MG PO TABS	0536-1247-01	A9150	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	SENNOSIDES-DOCUSATE SODIUM 8.6-50 MG PO TABS	10135-669-01	A9150	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	SENNOSIDES-DOCUSATE SODIUM 8.6-50 MG PO TABS	0536-1248-01	A9150	\$0.08	\$0.08	\$0.08	\$0.07	\$0.08
Inpatient/Outpatient	ISOSORBIDE MONONITRATE ER 60 MG PO TB24	62175-119-37	A9270	\$2.11	\$2.07	\$2.09	\$1.95	\$2.07
Inpatient/Outpatient	ISOSORBIDE MONONITRATE ER 60 MG PO TB24	0603-4111-21	A9270	\$1.51	\$1.48	\$1.49	\$1.39	\$1.48
Inpatient/Outpatient	ISOSORBIDE MONONITRATE ER 60 MG PO TB24	68084-592-01	A9270	\$1.30	\$1.27	\$1.29	\$1.20	\$1.27
Inpatient/Outpatient	ISOSORBIDE MONONITRATE ER 60 MG PO TB24	68084-592-11	A9270	\$1.30	\$1.27	\$1.29	\$1.20	\$1.27
Inpatient/Outpatient	ISOSORBIDE MONONITRATE ER 60 MG PO TB24	13668-105-01	A9270	\$3.40	\$3.33	\$3.37	\$3.14	\$3.33
Inpatient/Outpatient	ISOSORBIDE MONONITRATE ER 60 MG PO TB24	0904-6450-61	A9270	\$1.29	\$1.26	\$1.28	\$1.19	\$1.26
Inpatient/Outpatient	NALOXONE HCL 0.04 MG/ML DILUTED IN NORMAL SALINE	99999-4089-3	J2310	\$38.90	\$38.12	\$38.51	\$35.90	\$38.12
Inpatient/Outpatient	METFORMIN HCL 1000 MG PO TABS	0093-7214-01	A9270	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	METFORMIN HCL 1000 MG PO TABS	23155-104-01	A9270	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	METFORMIN HCL 1000 MG PO TABS	60687-162-11	A9270	\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	METFORMIN HCL 1000 MG PO TABS	0904-6691-61	A9270	\$0.40	\$0.39	\$0.40	\$0.37	\$0.39
Inpatient/Outpatient	OCTREOTIDE ACETATE 30 MG IM KIT	0078-0825-81	J2353	\$9,493.78	\$9,303.90	\$9,398.84	\$8,762.76	\$9,303.90
Inpatient/Outpatient	ABACAVIR SULFATE 300 MG PO TABS	49702-221-18	A9270	\$42.14	\$41.30	\$41.72	\$38.90	\$41.30
Inpatient/Outpatient	ABACAVIR SULFATE 300 MG PO TABS	65862-073-60	A9270	\$11.35	\$11.12	\$11.24	\$10.48	\$11.12
Inpatient/Outpatient	ABACAVIR SULFATE 300 MG PO TABS	68084-021-11	A9270	\$33.36	\$32.69	\$33.03	\$30.79	\$32.69
Inpatient/Outpatient	ABACAVIR SULFATE 300 MG PO TABS	0904-6523-06	A9270	\$24.29	\$23.80	\$24.05	\$22.42	\$23.80
Inpatient/Outpatient	ABACAVIR SULFATE 300 MG PO TABS	51079-204-01	A9270	\$24.57	\$24.08	\$24.32	\$22.68	\$24.08
Inpatient/Outpatient	ABACAVIR SULFATE 300 MG PO TABS	0378-4105-91	A9270	\$3.20	\$3.14	\$3.17	\$2.95	\$3.14
Inpatient/Outpatient	OXYBUTYNIN CHLORIDE ER 5 MG PO TB24	0378-6605-01	A9270	\$11.35	\$11.12	\$11.24	\$10.48	\$11.12
Inpatient/Outpatient	OXYBUTYNIN CHLORIDE ER 5 MG PO TB24	62175-270-37	A9270	\$3.60	\$3.53	\$3.56	\$3.32	\$3.53
Inpatient/Outpatient	OXYBUTYNIN CHLORIDE ER 5 MG PO TB24	50268-627-15	A9270	\$6.67	\$6.54	\$6.60	\$6.16	\$6.54
Inpatient/Outpatient	OXYBUTYNIN CHLORIDE ER 5 MG PO TB24	0904-6570-06	A9270	\$5.70	\$5.59	\$5.64	\$5.26	\$5.59
Inpatient/Outpatient	OXYBUTYNIN CHLORIDE ER 5 MG PO TB24	50268-627-11	A9270	\$6.64	\$6.51	\$6.57	\$6.13	\$6.51
Inpatient/Outpatient	OXYBUTYNIN CHLORIDE ER 10 MG PO TB24	0378-6610-01	A9270	\$11.36	\$11.13	\$11.25	\$10.49	\$11.13
Inpatient/Outpatient	OXYBUTYNIN CHLORIDE ER 10 MG PO TB24	62175-271-37	A9270	\$1.61	\$1.58	\$1.59	\$1.49	\$1.58
Inpatient/Outpatient	OXYBUTYNIN CHLORIDE ER 10 MG PO TB24	64980-210-01	A9270	\$0.41	\$0.40	\$0.41	\$0.38	\$0.40
Inpatient/Outpatient	OXYBUTYNIN CHLORIDE ER 10 MG PO TB24	68382-256-01	A9270	\$0.39	\$0.38	\$0.39	\$0.36	\$0.38
Inpatient/Outpatient	OXYBUTYNIN CHLORIDE ER 10 MG PO TB24	68084-610-11	A9270	\$9.99	\$9.79	\$9.89	\$9.22	\$9.79
Inpatient/Outpatient	OXYBUTYNIN CHLORIDE ER 10 MG PO TB24	50268-628-11	A9270	\$9.03	\$8.85	\$8.94	\$8.33	\$8.85
Inpatient/Outpatient	CELECOXIB 100 MG PO CAPS	0025-1520-31	A9270	\$36.64	\$35.91	\$36.27	\$33.82	\$35.91
Inpatient/Outpatient	CELECOXIB 100 MG PO CAPS	0025-1520-34	A9270	\$36.64	\$35.91	\$36.27	\$33.82	\$35.91
Inpatient/Outpatient	CELECOXIB 100 MG PO CAPS	51079-199-01	A9270	\$1.80	\$1.76	\$1.78	\$1.66	\$1.76
Inpatient/Outpatient	CELECOXIB 100 MG PO CAPS	60687-436-11	A9270	\$3.63	\$3.56	\$3.59	\$3.35	\$3.56
Inpatient/Outpatient	CELECOXIB 100 MG PO CAPS	0904-6502-61	A9270	\$3.99	\$3.91	\$3.95	\$3.68	\$3.91
Inpatient/Outpatient	CELECOXIB 200 MG PO CAPS	0025-1525-31	A9270	\$57.47	\$56.32	\$56.90	\$53.04	\$56.32
Inpatient/Outpatient	CELECOXIB 200 MG PO CAPS	0025-1525-34	A9270	\$60.10	\$58.90	\$59.50	\$55.47	\$58.90
Inpatient/Outpatient	CELECOXIB 200 MG PO CAPS	68084-976-11	A9270	\$9.33	\$9.14	\$9.24	\$8.61	\$9.14
Inpatient/Outpatient	CELECOXIB 200 MG PO CAPS	51079-215-01	A9270	\$6.58	\$6.45	\$6.51	\$6.07	\$6.45
Inpatient/Outpatient	CELECOXIB 200 MG PO CAPS	16714-733-01	A9270	\$1.03	\$1.01	\$1.02	\$0.95	\$1.01
Inpatient/Outpatient	CELECOXIB 200 MG PO CAPS	0904-6503-61	A9270	\$5.37	\$5.26	\$5.32	\$4.96	\$5.26
Inpatient/Outpatient	CELECOXIB 200 MG PO CAPS	60687-447-11	A9270	\$9.19	\$9.01	\$9.10	\$8.48	\$9.01
Inpatient/Outpatient	EPOETIN ALFA 40000 UNIT/ML IJ SOLN	59676-340-01	J0885	\$1,909.41	\$1,871.22	\$1,890.32	\$1,762.39	\$1,871.22
Inpatient/Outpatient	TIMOLOL MALEATE 0.25 % OP SOLG	61314-224-05	A9270	\$143.32	\$140.45	\$141.89	\$132.28	\$140.45
Inpatient/Outpatient	TIMOLOL MALEATE 0.25 % OP SOLG	25010-816-56	A9270	\$73.12	\$71.66	\$72.39	\$67.49	\$71.66
Inpatient/Outpatient	TIMOLOL MALEATE 0.25 % OP SOLG	24208-818-25	A9270	\$156.14	\$153.02	\$154.58	\$144.12	\$153.02
Inpatient/Outpatient	TIMOLOL MALEATE 0.25 % OP SOLG	62332-545-05	A9270	\$133.18	\$130.52	\$131.85	\$122.93	\$130.52
Inpatient/Outpatient	TIMOLOL MALEATE 0.5 % OP SOLG	25010-817-56	A9270	\$105.00	\$102.90	\$103.95	\$96.92	\$102.90
Inpatient/Outpatient	TIMOLOL MALEATE 0.5 % OP SOLG	24208-819-05	A9270	\$112.86	\$110.60	\$111.73	\$104.17	\$110.60
Inpatient/Outpatient	TIMOLOL MALEATE 0.5 % OP SOLG	61314-225-05	A9270	\$127.72	\$125.17	\$126.44	\$117.89	\$125.17
Inpatient/Outpatient	TIMOLOL MALEATE 0.5 % OP SOLG	62332-546-05	A9270	\$144.94	\$142.04	\$143.49	\$133.78	\$142.04
Inpatient/Outpatient	MODAFINIL 100 MG PO TABS	63459-101-01	A9270	\$54.63	\$53.54	\$54.08	\$50.42	\$53.54
Inpatient/Outpatient	MODAFINIL 100 MG PO TABS	49884-534-11	A9270	\$51.19	\$50.17	\$50.68	\$47.25	\$50.17
Inpatient/Outpatient	MODAFINIL 100 MG PO TABS	55253-801-30	A9270	\$22.35	\$21.90	\$22.13	\$20.63	\$21.90
Inpatient/Outpatient	MODAFINIL 100 MG PO TABS	55253-801-90	A9270	\$22.30	\$21.85	\$22.08	\$20.58	\$21.85
Inpatient/Outpatient	MODAFINIL 100 MG PO TABS	62332-105-30	A9270	\$9.69	\$9.50	\$9.59	\$8.94	\$9.50

Inpatient/Outpatient	MODAFINIL 100 MG PO TABS	0904-6423-04	A9270	\$19.96	\$19.56	\$19.76	\$18.42	\$19.56
Inpatient/Outpatient	MODAFINIL 100 MG PO TABS	65862-601-30	A9270	\$0.73	\$0.72	\$0.72	\$0.67	\$0.72
Inpatient/Outpatient	MODAFINIL 100 MG PO TABS	50268-570-11	A9270	\$22.92	\$22.46	\$22.69	\$21.16	\$22.46
Inpatient/Outpatient	TACROLIMUS 0.5 MG PO CAPS	0469-0607-73	J7507	\$14.22	\$13.94	\$14.08	\$13.13	\$13.94
Inpatient/Outpatient	TACROLIMUS 0.5 MG PO CAPS	16729-041-01	J7507	\$0.62	\$0.61	\$0.61	\$0.57	\$0.61
Inpatient/Outpatient	TACROLIMUS 0.5 MG PO CAPS	51079-817-01	J7507	\$6.18	\$6.06	\$6.12	\$5.70	\$6.06
Inpatient/Outpatient	TACROLIMUS 0.5 MG PO CAPS	51079-817-20	J7507	\$4.52	\$4.43	\$4.47	\$4.17	\$4.43
Inpatient/Outpatient	TACROLIMUS 0.5 MG PO CAPS	0904-6623-61	J7507	\$3.74	\$3.67	\$3.70	\$3.45	\$3.67
Inpatient/Outpatient	TACROLIMUS 0.5 MG PO CAPS	68084-449-11	J7507	\$4.25	\$4.17	\$4.21	\$3.92	\$4.17
Inpatient/Outpatient	LEVALBUTEROL HCL 0.63 MG/3ML IN NEBU	66993-022-27	A9270	\$1.16	\$1.14	\$1.15	\$1.07	\$1.14
Inpatient/Outpatient	LEVALBUTEROL HCL 0.63 MG/3ML IN NEBU	0591-2919-23	A9270	\$6.25	\$6.13	\$6.19	\$5.77	\$6.13
Inpatient/Outpatient	LEVALBUTEROL HCL 0.63 MG/3ML IN NEBU	63402-512-24	A9270	\$12.08	\$11.84	\$11.96	\$11.15	\$11.84
Inpatient/Outpatient	LEVALBUTEROL HCL 0.63 MG/3ML IN NEBU	0093-4146-04	A9270	\$2.14	\$2.10	\$2.12	\$1.98	\$2.10
Inpatient/Outpatient	LEVALBUTEROL HCL 0.63 MG/3ML IN NEBU	0093-4146-64	A9270	\$3.30	\$3.23	\$3.27	\$3.05	\$3.23
Inpatient/Outpatient	LEVALBUTEROL HCL 0.63 MG/3ML IN NEBU	76204-800-24	A9270	\$1.39	\$1.36	\$1.38	\$1.28	\$1.36
Inpatient/Outpatient	LEVALBUTEROL HCL 0.63 MG/3ML IN NEBU	76204-800-11	A9270	\$1.93	\$1.89	\$1.91	\$1.78	\$1.89
Inpatient/Outpatient	LEVALBUTEROL HCL 1.25 MG/3ML IN NEBU	66993-023-27	A9270	\$1.16	\$1.14	\$1.15	\$1.07	\$1.14
Inpatient/Outpatient	LEVALBUTEROL HCL 1.25 MG/3ML IN NEBU	63402-513-24	A9270	\$12.08	\$11.84	\$11.96	\$11.15	\$11.84
Inpatient/Outpatient	LEVALBUTEROL HCL 1.25 MG/3ML IN NEBU	76204-900-11	A9270	\$2.08	\$2.04	\$2.06	\$1.92	\$2.04
Inpatient/Outpatient	ANTIHEM FACTOR RECOMB (RFVII) 801-1240 UNITS IV SOLR	0944-2843-10	J7192	\$8.12	\$7.96	\$8.04	\$7.49	\$7.96
Inpatient/Outpatient	PHYTONADIONE 2 MG/ML ORAL SYRINGE (NICU/INFANT/PEDS)	99999-1240-5	A9270	\$30.59	\$29.98	\$30.28	\$28.23	\$29.98
Inpatient/Outpatient	DICLOFENAC SODIUM 1 % EX GEL	69097-524-44	A9270	\$0.36	\$0.35	\$0.36	\$0.33	\$0.35
Inpatient/Outpatient	DICLOFENAC SODIUM 1 % EX GEL	0378-8750-06	A9270	\$1.74	\$1.71	\$1.72	\$1.61	\$1.71
Inpatient/Outpatient	DICLOFENAC SODIUM 1 % EX GEL	16714-976-01	A9270	\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	DICLOFENAC SODIUM 1 % EX GEL	76282-663-39	A9270	\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	DICLOFENAC SODIUM 1 % EX GEL	21922-009-09	A9270	\$0.50	\$0.49	\$0.50	\$0.46	\$0.49
Inpatient/Outpatient	DICLOFENAC SODIUM 1 % EX GEL	45802-160-00	A9270	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	MYCOPHENOLATE MOFETIL 200 MG/ML PO SUSR	0004-0261-29	J7517	\$40.69	\$39.88	\$40.28	\$37.56	\$39.88
Inpatient/Outpatient	MYCOPHENOLATE MOFETIL 200 MG/ML PO SUSR	66689-307-08	J7517	\$17.74	\$17.39	\$17.56	\$16.37	\$17.39
Inpatient/Outpatient	MYCOPHENOLATE MOFETIL 200 MG/ML PO SUSR	67877-230-22	J7517	\$17.35	\$17.00	\$17.18	\$16.01	\$17.00
Inpatient/Outpatient	MYCOPHENOLATE MOFETIL 200 MG/ML PO SUSR	0527-5160-82	J7517	\$12.85	\$12.59	\$12.72	\$11.86	\$12.59
Inpatient/Outpatient	CIPROFLOXACIN HCL 250 MG PO TABS	68084-069-11	A9270	\$1.44	\$1.41	\$1.43	\$1.33	\$1.41
Inpatient/Outpatient	CIPROFLOXACIN HCL 250 MG PO TABS	63739-700-10	A9270	\$0.68	\$0.67	\$0.67	\$0.63	\$0.67
Inpatient/Outpatient	CIPROFLOXACIN HCL 250 MG PO TABS	62135-308-01	A9270	\$13.30	\$13.03	\$13.17	\$12.28	\$13.03
Inpatient/Outpatient	CIPROFLOXACIN HCL 500 MG PO TABS	60505-1309-1	A9270	\$1.44	\$1.41	\$1.43	\$1.33	\$1.41
Inpatient/Outpatient	CIPROFLOXACIN HCL 500 MG PO TABS	68084-070-11	A9270	\$1.65	\$1.62	\$1.63	\$1.52	\$1.62
Inpatient/Outpatient	CIPROFLOXACIN HCL 500 MG PO TABS	16714-652-02	A9270	\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	CIPROFLOXACIN HCL 500 MG PO TABS	0904-6378-61	A9270	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	CIPROFLOXACIN HCL 500 MG PO TABS	0904-7083-61	A9270	\$0.85	\$0.83	\$0.84	\$0.78	\$0.83
Inpatient/Outpatient	CIPROFLOXACIN HCL 750 MG PO TABS	68084-071-11	A9270	\$0.63	\$0.62	\$0.62	\$0.58	\$0.62
Inpatient/Outpatient	CIPROFLOXACIN HCL 750 MG PO TABS	16714-653-01	A9270	\$3.36	\$3.29	\$3.33	\$3.10	\$3.29
Inpatient/Outpatient	CIPROFLOXACIN HCL 750 MG PO TABS	0143-9929-50	A9270	\$0.91	\$0.89	\$0.90	\$0.84	\$0.89
Inpatient/Outpatient	MEPIVACAINE HCL (PF) 1 % IJ SOLN	63323-260-37	J0670	\$0.92	\$0.90	\$0.91	\$0.85	\$0.90
Inpatient/Outpatient	HETASTARCH-NACL 6-0.9 % IV SOLN	0264-1965-10		\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	HETASTARCH-NACL 6-0.9 % IV SOLN	0409-7248-03		\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	HETASTARCH-NACL 6-0.9 % IV SOLN	0409-7248-13		\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	ALLOPURINOL SODIUM 500 MG IV SOLR	55390-106-01	J9999	\$1,657.12	\$1,623.98	\$1,640.55	\$1,529.52	\$1,623.98
Inpatient/Outpatient	POLYETHYLENE GLYCOL 3350 17 G PO PACK	17856-214-22	A9270	\$5.44	\$5.33	\$5.39	\$5.02	\$5.33
Inpatient/Outpatient	POLYETHYLENE GLYCOL 3350 17 G PO PACK	17856-412-20	A9270	\$5.44	\$5.33	\$5.39	\$5.02	\$5.33
Inpatient/Outpatient	POLYETHYLENE GLYCOL 3350 17 G PO PACK	51079-306-01	A9270	\$5.74	\$5.63	\$5.68	\$5.30	\$5.63
Inpatient/Outpatient	POLYETHYLENE GLYCOL 3350 17 G PO PACK	68084-430-99	A9270	\$7.47	\$7.32	\$7.40	\$6.89	\$7.32
Inpatient/Outpatient	POLYETHYLENE GLYCOL 3350 17 G PO PACK	69784-180-01	A9270	\$6.80	\$6.66	\$6.73	\$6.28	\$6.66
Inpatient/Outpatient	POLYETHYLENE GLYCOL 3350 17 G PO PACK	0904-6422-86	A9270	\$4.97	\$4.87	\$4.92	\$4.59	\$4.87
Inpatient/Outpatient	POLYETHYLENE GLYCOL 3350 17 G PO PACK	11523-7234-1	A9270	\$3.74	\$3.67	\$3.70	\$3.45	\$3.67
Inpatient/Outpatient	POLYETHYLENE GLYCOL 3350 17 G PO PACK	0904-6931-86	A9270	\$3.76	\$3.68	\$3.72	\$3.47	\$3.68
Inpatient/Outpatient	POLYETHYLENE GLYCOL 3350 17 G PO PACK	45802-868-00	A9270	\$4.66	\$4.57	\$4.61	\$4.30	\$4.57
Inpatient/Outpatient	POLYETHYLENE GLYCOL 3350 17 G PO PACK	63739-198-61	A9270	\$4.53	\$4.44	\$4.48	\$4.18	\$4.44
Inpatient/Outpatient	POLYETHYLENE GLYCOL 3350 17 G PO PACK	63739-198-62	A9270	\$4.52	\$4.43	\$4.47	\$4.17	\$4.43
Inpatient/Outpatient	POLYETHYLENE GLYCOL 3350 17 G PO PACK	11523-7268-8	A9270	\$4.74	\$4.65	\$4.69	\$4.38	\$4.65
Inpatient/Outpatient	POLYETHYLENE GLYCOL 3350 17 G PO PACK	62559-157-17	A9270	\$4.07	\$3.99	\$4.03	\$3.76	\$3.99
Inpatient/Outpatient	DOXYLAMINE-PYRIDOXINE 10-10 MG PO TBEC	0591-2132-01	A9270	\$26.90	\$26.36	\$26.63	\$24.83	\$26.36
Inpatient/Outpatient	DOXYLAMINE-PYRIDOXINE 10-10 MG PO TBEC	70505-100-10	A9270	\$19.26	\$18.87	\$19.07	\$17.78	\$18.87
Inpatient/Outpatient	DOXYLAMINE-PYRIDOXINE 10-10 MG PO TBEC	49884-186-01	A9270	\$8.44	\$8.27	\$8.36	\$7.79	\$8.27
Inpatient/Outpatient	CHLORAMPHENICOL SOD SUCCINATE 1 G IV SOLR	63323-011-15	J0720	\$176.64	\$173.11	\$174.87	\$163.04	\$173.11
Inpatient/Outpatient	RISPERIDONE 0.25 MG PO TABS	50458-301-01	A9270	\$35.66	\$34.95	\$35.30	\$32.91	\$34.95
Inpatient/Outpatient	RISPERIDONE 0.25 MG PO TABS	50458-301-04	A9270	\$44.35	\$43.46	\$43.91	\$40.94	\$43.46
Inpatient/Outpatient	RISPERIDONE 0.25 MG PO TABS	50458-590-60	A9270	\$4.95	\$4.85	\$4.90	\$4.57	\$4.85
Inpatient/Outpatient	RISPERIDONE 0.25 MG PO TABS	50458-590-10	A9270	\$7.61	\$7.46	\$7.53	\$7.02	\$7.46

Inpatient/Outpatient	RISPERIDONE 0.25 MG PO TABS	68084-270-11	A9270	\$1.04	\$1.02	\$1.03	\$0.96	\$1.02
Inpatient/Outpatient	RISPERIDONE 0.25 MG PO TABS	0904-6357-61	A9270	\$0.56	\$0.55	\$0.55	\$0.52	\$0.55
Inpatient/Outpatient	RISPERIDONE 0.5 MG PO TABS	50458-302-01	A9270	\$29.58	\$28.99	\$29.28	\$27.30	\$28.99
Inpatient/Outpatient	RISPERIDONE 0.5 MG PO TABS	50458-302-06	A9270	\$48.66	\$47.69	\$48.17	\$44.91	\$47.69
Inpatient/Outpatient	RISPERIDONE 0.5 MG PO TABS	60505-2585-0	A9270	\$1.55	\$1.52	\$1.53	\$1.43	\$1.52
Inpatient/Outpatient	RISPERIDONE 0.5 MG PO TABS	50458-591-10	A9270	\$8.38	\$8.21	\$8.30	\$7.73	\$8.21
Inpatient/Outpatient	RISPERIDONE 0.5 MG PO TABS	51079-461-01	A9270	\$2.05	\$2.01	\$2.03	\$1.89	\$2.01
Inpatient/Outpatient	RISPERIDONE 0.5 MG PO TABS	0904-5974-61	A9270	\$1.04	\$1.02	\$1.03	\$0.96	\$1.02
Inpatient/Outpatient	RISPERIDONE 0.5 MG PO TABS	68084-271-11	A9270	\$0.96	\$0.94	\$0.95	\$0.89	\$0.94
Inpatient/Outpatient	RISPERIDONE 0.5 MG PO TABS	0904-6358-61	A9270	\$0.68	\$0.67	\$0.67	\$0.63	\$0.67
Inpatient/Outpatient	PIOGLITAZONE HCL 15 MG PO TABS	64764-151-05	A9270	\$36.25	\$35.53	\$35.89	\$33.46	\$35.53
Inpatient/Outpatient	PIOGLITAZONE HCL 15 MG PO TABS	68084-878-11	A9270	\$4.11	\$4.03	\$4.07	\$3.79	\$4.03
Inpatient/Outpatient	PIOGLITAZONE HCL 15 MG PO TABS	33342-054-10	A9270	\$0.65	\$0.64	\$0.64	\$0.60	\$0.64
Inpatient/Outpatient	PIOGLITAZONE HCL 15 MG PO TABS	60687-391-11	A9270	\$3.99	\$3.91	\$3.95	\$3.68	\$3.91
Inpatient/Outpatient	PIOGLITAZONE HCL 30 MG PO TABS	64764-301-15	A9270	\$55.40	\$54.29	\$54.85	\$51.13	\$54.29
Inpatient/Outpatient	PIOGLITAZONE HCL 30 MG PO TABS	0093-2047-98	A9270	\$11.98	\$11.74	\$11.86	\$11.06	\$11.74
Inpatient/Outpatient	PIOGLITAZONE HCL 30 MG PO TABS	51079-514-01	A9270	\$9.98	\$9.78	\$9.88	\$9.21	\$9.78
Inpatient/Outpatient	PIOGLITAZONE HCL 30 MG PO TABS	33342-055-07	A9270	\$0.89	\$0.87	\$0.88	\$0.82	\$0.87
Inpatient/Outpatient	PIOGLITAZONE HCL 30 MG PO TABS	65862-513-30	A9270	\$0.80	\$0.78	\$0.79	\$0.74	\$0.78
Inpatient/Outpatient	PIOGLITAZONE HCL 45 MG PO TABS	64764-451-24	A9270	\$97.47	\$95.52	\$96.50	\$89.96	\$95.52
Inpatient/Outpatient	PIOGLITAZONE HCL 45 MG PO TABS	0093-2046-56	A9270	\$1.68	\$1.65	\$1.66	\$1.55	\$1.65
Inpatient/Outpatient	PIOGLITAZONE HCL 45 MG PO TABS	16729-022-15	A9270	\$0.53	\$0.52	\$0.52	\$0.49	\$0.52
Inpatient/Outpatient	PIOGLITAZONE HCL 45 MG PO TABS	33342-056-10	A9270	\$0.78	\$0.76	\$0.77	\$0.72	\$0.76
Inpatient/Outpatient	PANTOPRAZOLE SODIUM 20 MG PO TBEC	0008-0843-81	A9270	\$68.39	\$67.02	\$67.71	\$63.12	\$67.02
Inpatient/Outpatient	PANTOPRAZOLE SODIUM 20 MG PO TBEC	62175-180-46	A9270	\$0.68	\$0.67	\$0.67	\$0.63	\$0.67
Inpatient/Outpatient	PANTOPRAZOLE SODIUM 20 MG PO TBEC	50268-636-15	A9270	\$0.88	\$0.86	\$0.87	\$0.81	\$0.86
Inpatient/Outpatient	PANTOPRAZOLE SODIUM 20 MG PO TBEC	0378-6688-77	A9270	\$0.48	\$0.47	\$0.48	\$0.44	\$0.47
Inpatient/Outpatient	PANTOPRAZOLE SODIUM 20 MG PO TBEC	65862-559-90	A9270	\$0.36	\$0.35	\$0.36	\$0.33	\$0.35
Inpatient/Outpatient	PANTOPRAZOLE SODIUM 20 MG PO TBEC	50268-636-11	A9270	\$0.88	\$0.86	\$0.87	\$0.81	\$0.86
Inpatient/Outpatient	PANTOPRAZOLE SODIUM 20 MG PO TBEC	50268-585-11	A9270	\$0.88	\$0.86	\$0.87	\$0.81	\$0.86
Inpatient/Outpatient	PANTOPRAZOLE SODIUM 40 MG PO TBEC	0008-0841-99	A9270	\$7.52	\$7.37	\$7.44	\$6.94	\$7.37
Inpatient/Outpatient	PANTOPRAZOLE SODIUM 40 MG PO TBEC	0008-0841-81	A9270	\$68.39	\$67.02	\$67.71	\$63.12	\$67.02
Inpatient/Outpatient	PANTOPRAZOLE SODIUM 40 MG PO TBEC	0008-0607-04	A9270	\$0.93	\$0.91	\$0.92	\$0.86	\$0.91
Inpatient/Outpatient	PANTOPRAZOLE SODIUM 40 MG PO TBEC	66993-068-80	A9270	\$0.56	\$0.55	\$0.55	\$0.52	\$0.55
Inpatient/Outpatient	PANTOPRAZOLE SODIUM 40 MG PO TBEC	0904-6235-61	A9270	\$1.03	\$1.01	\$1.02	\$0.95	\$1.01
Inpatient/Outpatient	PANTOPRAZOLE SODIUM 40 MG PO TBEC	66993-068-51	A9270	\$0.98	\$0.96	\$0.97	\$0.90	\$0.96
Inpatient/Outpatient	PANTOPRAZOLE SODIUM 40 MG PO TBEC	66993-068-85	A9270	\$0.37	\$0.36	\$0.37	\$0.34	\$0.36
Inpatient/Outpatient	PANTOPRAZOLE SODIUM 40 MG PO TBEC	65862-560-90	A9270	\$0.70	\$0.69	\$0.69	\$0.65	\$0.69
Inpatient/Outpatient	PANTOPRAZOLE SODIUM 40 MG PO TBEC	63739-564-10	A9270	\$0.79	\$0.77	\$0.78	\$0.73	\$0.77
Inpatient/Outpatient	PANTOPRAZOLE SODIUM 40 MG PO TBEC	51079-051-01	A9270	\$0.61	\$0.60	\$0.60	\$0.56	\$0.60
Inpatient/Outpatient	PANTOPRAZOLE SODIUM 40 MG PO TBEC	0904-6474-61	A9270	\$0.87	\$0.85	\$0.86	\$0.80	\$0.85
Inpatient/Outpatient	PANTOPRAZOLE SODIUM 40 MG PO TBEC	62175-617-46	A9270	\$0.29	\$0.28	\$0.29	\$0.27	\$0.28
Inpatient/Outpatient	PANTOPRAZOLE SODIUM 40 MG PO TBEC	35573-428-51	A9270	\$0.56	\$0.55	\$0.55	\$0.52	\$0.55
Inpatient/Outpatient	PANTOPRAZOLE SODIUM 40 MG PO TBEC	50268-639-11	A9270	\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	PANTOPRAZOLE SODIUM 40 MG IV SOLR	0008-0923-51	C9113	\$18.69	\$18.32	\$18.50	\$17.25	\$18.32
Inpatient/Outpatient	PANTOPRAZOLE SODIUM 40 MG IV SOLR	0008-0923-55	C9113	\$22.59	\$22.14	\$22.36	\$20.85	\$22.14
Inpatient/Outpatient	PANTOPRAZOLE SODIUM 40 MG IV SOLR	0008-4001-01	C9113	\$14.05	\$13.77	\$13.91	\$12.97	\$13.77
Inpatient/Outpatient	PANTOPRAZOLE SODIUM 40 MG IV SOLR	0008-2001-01	C9113	\$24.30	\$23.81	\$24.06	\$22.43	\$23.81
Inpatient/Outpatient	PANTOPRAZOLE SODIUM 40 MG IV SOLR	55150-202-00	C9113	\$15.89	\$15.57	\$15.73	\$14.67	\$15.57
Inpatient/Outpatient	PANTOPRAZOLE SODIUM 40 MG IV SOLR	0143-9284-01	C9113	\$29.21	\$28.63	\$28.92	\$26.96	\$28.63
Inpatient/Outpatient	PANTOPRAZOLE SODIUM 40 MG IV SOLR	0008-4001-10	C9113	\$9.31	\$9.12	\$9.22	\$8.59	\$9.12
Inpatient/Outpatient	PANTOPRAZOLE SODIUM 40 MG IV SOLR	62756-129-40	C9113	\$10.16	\$9.96	\$10.06	\$9.38	\$9.96
Inpatient/Outpatient	PANTOPRAZOLE SODIUM 40 MG IV SOLR	0781-3232-95	C9113	\$12.10	\$11.86	\$11.98	\$11.17	\$11.86
Inpatient/Outpatient	PANTOPRAZOLE SODIUM 40 MG IV SOLR	0781-3232-94	C9113	\$18.42	\$18.05	\$18.24	\$17.00	\$18.05
Inpatient/Outpatient	PANTOPRAZOLE SODIUM 40 MG IV SOLR	65219-433-01	C9113	\$8.82	\$8.64	\$8.73	\$8.14	\$8.64
Inpatient/Outpatient	PANTOPRAZOLE SODIUM 40 MG IV SOLR	65219-433-15	C9113	\$8.82	\$8.64	\$8.73	\$8.14	\$8.64
Inpatient/Outpatient	CANGRELOR TETRASODIUM 50 MG IV SOLR	10122-620-10	C9460	\$2,639.36	\$2,586.57	\$2,612.97	\$2,436.13	\$2,586.57
Inpatient/Outpatient	CANGRELOR TETRASODIUM 50 MG IV SOLR	10122-620-01	C9460	\$2,370.74	\$2,323.33	\$2,347.03	\$2,188.19	\$2,323.33
Inpatient/Outpatient	CARBIDOPA-LEVODOPA ER 50-200 MG PO TBCR	51079-923-01	A9270	\$8.47	\$8.30	\$8.39	\$7.82	\$8.30
Inpatient/Outpatient	CARBIDOPA-LEVODOPA ER 50-200 MG PO TBCR	51079-923-20	A9270	\$1.77	\$1.73	\$1.75	\$1.63	\$1.73
Inpatient/Outpatient	FLUTICASONE-SALMETEROL 55-14 MCG/ACT IN AEPB	0093-3607-82		\$441.82	\$432.98	\$437.40	\$407.80	\$432.98
Inpatient/Outpatient	FLUTICASONE-SALMETEROL 55-14 MCG/ACT IN AEPB	59310-805-06		\$1,216.48	\$1,192.15	\$1,204.32	\$1,122.81	\$1,192.15
Inpatient/Outpatient	FLUTICASONE-SALMETEROL 113-14 MCG/ACT IN AEPB	0093-3608-82		\$367.85	\$360.49	\$364.17	\$339.53	\$360.49
Inpatient/Outpatient	FLUTICASONE-SALMETEROL 113-14 MCG/ACT IN AEPB	59310-812-06		\$1,216.48	\$1,192.15	\$1,204.32	\$1,122.81	\$1,192.15
Inpatient/Outpatient	OSELTAMIVIR PHOSPHATE 75 MG PO CAPS	0004-0800-85	A9270	\$68.70	\$67.33	\$68.01	\$63.41	\$67.33
Inpatient/Outpatient	OSELTAMIVIR PHOSPHATE 75 MG PO CAPS	47781-470-13	A9270	\$11.72	\$11.49	\$11.60	\$10.82	\$11.49
Inpatient/Outpatient	OSELTAMIVIR PHOSPHATE 75 MG PO CAPS	70710-1010-2	A9270	\$36.19	\$35.47	\$35.83	\$33.40	\$35.47
Inpatient/Outpatient	OSELTAMIVIR PHOSPHATE 75 MG PO CAPS	16714-819-01	A9270	\$43.25	\$42.39	\$42.82	\$39.92	\$42.39

Inpatient/Outpatient	OSELTAMIVIR PHOSPHATE 75 MG PO CAPS	33342-258-66	A9270	\$11.29	\$11.06	\$11.18	\$10.42	\$11.06
Inpatient/Outpatient	OSELTAMIVIR PHOSPHATE 75 MG PO CAPS	72205-044-11	A9270	\$3.48	\$3.41	\$3.45	\$3.21	\$3.41
Inpatient/Outpatient	OSELTAMIVIR PHOSPHATE 75 MG PO CAPS	64380-799-01	A9270	\$6.78	\$6.64	\$6.71	\$6.26	\$6.64
Inpatient/Outpatient	ENTACAPONE 200 MG PO TABS	0078-0327-05	A9270	\$35.01	\$34.31	\$34.66	\$32.31	\$34.31
Inpatient/Outpatient	ENTACAPONE 200 MG PO TABS	47335-007-88	A9270	\$18.39	\$18.02	\$18.21	\$16.97	\$18.02
Inpatient/Outpatient	ENTACAPONE 200 MG PO TABS	60687-188-11	A9270	\$12.37	\$12.12	\$12.25	\$11.42	\$12.12
Inpatient/Outpatient	ENTACAPONE 200 MG PO TABS	64679-781-02	A9270	\$2.80	\$2.74	\$2.77	\$2.58	\$2.74
Inpatient/Outpatient	ENTACAPONE 200 MG PO TABS	0378-9080-01	A9270	\$14.32	\$14.03	\$14.18	\$13.22	\$14.03
Inpatient/Outpatient	ENTACAPONE 200 MG PO TABS	0781-5578-01	A9270	\$2.95	\$2.89	\$2.92	\$2.72	\$2.89
Inpatient/Outpatient	ENTACAPONE 200 MG PO TABS	27241-049-10	A9270	\$2.75	\$2.70	\$2.72	\$2.54	\$2.70
Inpatient/Outpatient	ENTACAPONE 200 MG PO TABS	51079-273-01	A9270	\$20.55	\$20.14	\$20.34	\$18.97	\$20.14
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE 9000 MG/60ML II SOLN	63323-282-60		\$0.97	\$0.95	\$0.96	\$0.90	\$0.95
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE 9000 MG/60ML II SOLN	25021-115-51		\$1.36	\$1.33	\$1.35	\$1.26	\$1.33
Inpatient/Outpatient	LEVETIRACETAM 250 MG PO TABS	0093-7285-89	A9270	\$0.99	\$0.97	\$0.98	\$0.91	\$0.97
Inpatient/Outpatient	LEVETIRACETAM 250 MG PO TABS	0378-5613-78	A9270	\$1.73	\$1.70	\$1.71	\$1.60	\$1.70
Inpatient/Outpatient	LEVETIRACETAM 250 MG PO TABS	50474-594-40	A9270	\$29.22	\$28.64	\$28.93	\$26.97	\$28.64
Inpatient/Outpatient	LEVETIRACETAM 250 MG PO TABS	31722-536-12	A9270	\$1.39	\$1.36	\$1.38	\$1.28	\$1.36
Inpatient/Outpatient	LEVETIRACETAM 250 MG PO TABS	0904-6051-61	A9270	\$0.58	\$0.57	\$0.57	\$0.54	\$0.57
Inpatient/Outpatient	LEVETIRACETAM 500 MG PO TABS	50474-595-40	A9270	\$35.71	\$35.00	\$35.35	\$32.96	\$35.00
Inpatient/Outpatient	LEVETIRACETAM 500 MG PO TABS	0378-5615-78	A9270	\$1.99	\$1.95	\$1.97	\$1.84	\$1.95
Inpatient/Outpatient	LEVETIRACETAM 500 MG PO TABS	64376-137-12	A9270	\$0.58	\$0.57	\$0.57	\$0.54	\$0.57
Inpatient/Outpatient	LEVETIRACETAM 500 MG PO TABS	31722-537-12	A9270	\$1.59	\$1.56	\$1.57	\$1.47	\$1.56
Inpatient/Outpatient	LEVETIRACETAM 500 MG PO TABS	64376-137-90	A9270	\$0.68	\$0.67	\$0.67	\$0.63	\$0.67
Inpatient/Outpatient	LEVETIRACETAM 500 MG PO TABS	64376-137-99	A9270	\$1.65	\$1.62	\$1.63	\$1.52	\$1.62
Inpatient/Outpatient	LEVETIRACETAM 500 MG PO TABS	51079-821-01	A9270	\$1.47	\$1.44	\$1.46	\$1.36	\$1.44
Inpatient/Outpatient	LEVETIRACETAM 500 MG PO TABS	68084-337-11	A9270	\$1.08	\$1.06	\$1.07	\$1.00	\$1.06
Inpatient/Outpatient	LEVETIRACETAM 500 MG PO TABS	68084-870-11	A9270	\$1.73	\$1.70	\$1.71	\$1.60	\$1.70
Inpatient/Outpatient	LEVETIRACETAM 500 MG PO TABS	0378-5615-05	A9270	\$2.01	\$1.97	\$1.99	\$1.86	\$1.97
Inpatient/Outpatient	LEVETIRACETAM 500 MG PO TABS	63739-411-10	A9270	\$0.54	\$0.53	\$0.53	\$0.50	\$0.53
Inpatient/Outpatient	LEVETIRACETAM 500 MG PO TABS	16714-355-01	A9270	\$0.38	\$0.37	\$0.38	\$0.35	\$0.37
Inpatient/Outpatient	LEVETIRACETAM 500 MG PO TABS	0904-6052-61	A9270	\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	LEVETIRACETAM 500 MG PO TABS	65862-246-08	A9270	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	LEVETIRACETAM 500 MG PO TABS	16714-035-01	A9270	\$0.49	\$0.48	\$0.49	\$0.45	\$0.48
Inpatient/Outpatient	LEVETIRACETAM 500 MG PO TABS	0904-7124-61	A9270	\$0.63	\$0.62	\$0.62	\$0.58	\$0.62
Inpatient/Outpatient	LEVETIRACETAM 750 MG PO TABS	50474-596-40	A9270	\$48.38	\$47.41	\$47.90	\$44.65	\$47.41
Inpatient/Outpatient	LEVETIRACETAM 750 MG PO TABS	0093-7287-89	A9270	\$1.61	\$1.58	\$1.59	\$1.49	\$1.58
Inpatient/Outpatient	LEVETIRACETAM 750 MG PO TABS	31722-538-12	A9270	\$2.16	\$2.12	\$2.14	\$1.99	\$2.12
Inpatient/Outpatient	LEVETIRACETAM 750 MG PO TABS	68084-338-11	A9270	\$1.51	\$1.48	\$1.49	\$1.39	\$1.48
Inpatient/Outpatient	LEVETIRACETAM 750 MG PO TABS	0904-6002-61	A9270	\$1.67	\$1.64	\$1.65	\$1.54	\$1.64
Inpatient/Outpatient	LEVETIRACETAM 750 MG PO TABS	0904-6053-61	A9270	\$0.96	\$0.94	\$0.95	\$0.89	\$0.94
Inpatient/Outpatient	LEVETIRACETAM 750 MG PO TABS	63739-787-10	A9270	\$0.95	\$0.93	\$0.94	\$0.88	\$0.93
Inpatient/Outpatient	LETROZOLE 2.5 MG PO TABS	60505-3255-3	A9270	\$1.75	\$1.72	\$1.73	\$1.62	\$1.72
Inpatient/Outpatient	LETROZOLE 2.5 MG PO TABS	42291-374-90	A9270	\$1.51	\$1.48	\$1.49	\$1.39	\$1.48
Inpatient/Outpatient	LETROZOLE 2.5 MG PO TABS	0093-7620-56	A9270	\$0.50	\$0.49	\$0.50	\$0.46	\$0.49
Inpatient/Outpatient	LETROZOLE 2.5 MG PO TABS	59651-180-30	A9270	\$0.60	\$0.59	\$0.59	\$0.55	\$0.59
Inpatient/Outpatient	DOFETILIDE 125 MCG PO CAPS	0069-5800-43	A9270	\$50.26	\$49.25	\$49.76	\$46.39	\$49.25
Inpatient/Outpatient	DOFETILIDE 125 MCG PO CAPS	0069-5800-60	A9270	\$26.45	\$25.92	\$26.19	\$24.41	\$25.92
Inpatient/Outpatient	DOFETILIDE 125 MCG PO CAPS	0069-5800-61	A9270	\$20.15	\$19.75	\$19.95	\$18.60	\$19.75
Inpatient/Outpatient	DOFETILIDE 125 MCG PO CAPS	16714-840-01	A9270	\$7.02	\$6.88	\$6.95	\$6.48	\$6.88
Inpatient/Outpatient	DOFETILIDE 125 MCG PO CAPS	42291-411-60	A9270	\$1.30	\$1.27	\$1.29	\$1.20	\$1.27
Inpatient/Outpatient	DOFETILIDE 250 MCG PO CAPS	0069-5810-43	A9270	\$50.26	\$49.25	\$49.76	\$46.39	\$49.25
Inpatient/Outpatient	DOFETILIDE 250 MCG PO CAPS	0069-5810-61	A9270	\$20.15	\$19.75	\$19.95	\$18.60	\$19.75
Inpatient/Outpatient	DOFETILIDE 250 MCG PO CAPS	16714-841-01	A9270	\$5.67	\$5.56	\$5.61	\$5.23	\$5.56
Inpatient/Outpatient	DOFETILIDE 250 MCG PO CAPS	42291-412-60	A9270	\$1.40	\$1.37	\$1.39	\$1.29	\$1.37
Inpatient/Outpatient	DOFETILIDE 250 MCG PO CAPS	72205-040-60	A9270	\$0.83	\$0.81	\$0.82	\$0.77	\$0.81
Inpatient/Outpatient	DOFETILIDE 500 MCG PO CAPS	0069-5820-43	A9270	\$50.26	\$49.25	\$49.76	\$46.39	\$49.25
Inpatient/Outpatient	DOFETILIDE 500 MCG PO CAPS	0069-5820-61	A9270	\$20.15	\$19.75	\$19.95	\$18.60	\$19.75
Inpatient/Outpatient	DOFETILIDE 500 MCG PO CAPS	16714-842-01	A9270	\$6.29	\$6.16	\$6.23	\$5.81	\$6.16
Inpatient/Outpatient	DOFETILIDE 500 MCG PO CAPS	42291-413-60	A9270	\$1.33	\$1.30	\$1.32	\$1.23	\$1.30
Inpatient/Outpatient	DOFETILIDE 500 MCG PO CAPS	72205-041-60	A9270	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	OSELTAMIVIR PHOSPHATE 6 MG/ML PO SUSR	99999-820-09	A9270	\$11.45	\$11.22	\$11.34	\$10.57	\$11.22
Inpatient/Outpatient	OSELTAMIVIR PHOSPHATE 6 MG/ML PO SUSR	68180-678-01	A9270	\$0.77	\$0.75	\$0.76	\$0.71	\$0.75
Inpatient/Outpatient	OSELTAMIVIR PHOSPHATE 6 MG/ML PO SUSR	0004-0822-05	A9270	\$11.45	\$11.22	\$11.34	\$10.57	\$11.22
Inpatient/Outpatient	PREDNISOLONE ACETATE 0.12 % OP SUSP	11980-174-05	A9270	\$145.10	\$142.20	\$143.65	\$133.93	\$142.20
Inpatient/Outpatient	PORACTANT ALFA 120 MG/1.5ML TR SUSP	10122-510-01	A9270	\$1,074.15	\$1,052.67	\$1,063.41	\$991.44	\$1,052.67
Inpatient/Outpatient	OXCARBAZEPINE 150 MG PO TABS	62756-183-88	A9270	\$0.49	\$0.48	\$0.49	\$0.45	\$0.48
Inpatient/Outpatient	OXCARBAZEPINE 150 MG PO TABS	0078-0456-35	A9270	\$11.56	\$11.33	\$11.44	\$10.67	\$11.33
Inpatient/Outpatient	OXCARBAZEPINE 150 MG PO TABS	0054-0097-20	A9270	\$1.91	\$1.87	\$1.89	\$1.76	\$1.87

Inpatient/Outpatient	OXCARBAZEPINE 150 MG PO TABS	51991-292-01	A9270		\$0.68	\$0.67	\$0.67	\$0.63	\$0.67
Inpatient/Outpatient	OXCARBAZEPINE 150 MG PO TABS	68084-845-11	A9270		\$0.89	\$0.87	\$0.88	\$0.82	\$0.87
Inpatient/Outpatient	CANGRELOR 200 MCG/ML BOLUS FROM BAG	99999-620-25	C9460		\$13.54	\$13.27	\$13.40	\$12.50	\$13.27
Inpatient/Outpatient	CHARCOAL ACTIVATED PO LIQD	0574-0121-08	A9150		\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	CHARCOAL ACTIVATED PO LIQD	0574-0121-76	A9150		\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	CHARCOAL ACTIVATED PO LIQD	66689-201-08	A9150		\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	CHARCOAL ACTIVATED PO LIQD	66689-202-08	A9150		\$0.53	\$0.52	\$0.52	\$0.49	\$0.52
Inpatient/Outpatient	CHARCOAL ACTIVATED PO LIQD	0574-0521-76	A9150		\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	CHARCOAL ACTIVATED PO LIQD	0574-0521-08	A9150		\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	DEXMEDETOMIDINE HCL 200 MCG/2ML IV SOLN	63323-421-02			\$16.40	\$16.07	\$16.24	\$15.14	\$16.07
Inpatient/Outpatient	DEXMEDETOMIDINE HCL 200 MCG/2ML IV SOLN	63323-421-16			\$43.13	\$42.27	\$42.70	\$39.81	\$42.27
Inpatient/Outpatient	DEXMEDETOMIDINE HCL 200 MCG/2ML IV SOLN	42023-146-25			\$7.69	\$7.54	\$7.61	\$7.10	\$7.54
Inpatient/Outpatient	DEXMEDETOMIDINE HCL 200 MCG/2ML IV SOLN	0409-1638-02			\$92.19	\$90.35	\$91.27	\$85.09	\$90.35
Inpatient/Outpatient	DEXMEDETOMIDINE HCL 200 MCG/2ML IV SOLN	0781-3297-95			\$27.31	\$26.76	\$27.04	\$25.21	\$26.76
Inpatient/Outpatient	DEXMEDETOMIDINE HCL 200 MCG/2ML IV SOLN	0143-9532-25			\$4.34	\$4.25	\$4.30	\$4.01	\$4.25
Inpatient/Outpatient	DEXMEDETOMIDINE HCL 200 MCG/2ML IV SOLN	0143-9532-01			\$31.59	\$30.96	\$31.27	\$29.16	\$30.96
Inpatient/Outpatient	DEXMEDETOMIDINE HCL 200 MCG/2ML IV SOLN	70860-605-03			\$4.73	\$4.64	\$4.68	\$4.37	\$4.64
Inpatient/Outpatient	DEXMEDETOMIDINE HCL 200 MCG/2ML IV SOLN	70860-605-02			\$40.64	\$39.83	\$40.23	\$37.51	\$39.83
Inpatient/Outpatient	DEXMEDETOMIDINE HCL 200 MCG/2ML IV SOLN	16729-239-30			\$16.34	\$16.01	\$16.18	\$15.08	\$16.01
Inpatient/Outpatient	DEXMEDETOMIDINE HCL 200 MCG/2ML IV SOLN	55150-209-02			\$5.88	\$5.76	\$5.82	\$5.43	\$5.76
Inpatient/Outpatient	DEXMEDETOMIDINE HCL 200 MCG/2ML IV SOLN	70860-605-41			\$9.02	\$8.84	\$8.93	\$8.33	\$8.84
Inpatient/Outpatient	LOPERAMIDE HCL 1 MG/7.5ML PO SUSP	70677-0054-1			\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	LOPERAMIDE HCL 1 MG/7.5ML PO SUSP	0904-6836-20			\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	NIACIN ER (ANTIHYPERLIPIDEMIC) 500 MG PO TBCR	0074-3074-90	A9150		\$23.34	\$22.87	\$23.11	\$21.54	\$22.87
Inpatient/Outpatient	NIACIN ER (ANTIHYPERLIPIDEMIC) 500 MG PO TBCR	47335-539-81	A9150		\$1.79	\$1.75	\$1.77	\$1.65	\$1.75
Inpatient/Outpatient	NIACIN ER (ANTIHYPERLIPIDEMIC) 500 MG PO TBCR	65162-321-09	A9150		\$1.60	\$1.57	\$1.58	\$1.48	\$1.57
Inpatient/Outpatient	NIACIN ER (ANTIHYPERLIPIDEMIC) 500 MG PO TBCR	59651-018-90	A9150		\$1.48	\$1.45	\$1.47	\$1.37	\$1.45
Inpatient/Outpatient	NIACIN ER (ANTIHYPERLIPIDEMIC) 1000 MG PO TBCR	0074-3080-90	A9150		\$41.28	\$40.45	\$40.87	\$38.10	\$40.45
Inpatient/Outpatient	NIACIN ER (ANTIHYPERLIPIDEMIC) 1000 MG PO TBCR	65162-323-09	A9150		\$2.51	\$2.46	\$2.48	\$2.32	\$2.46
Inpatient/Outpatient	NIACIN ER (ANTIHYPERLIPIDEMIC) 1000 MG PO TBCR	47335-613-81	A9150		\$3.07	\$3.01	\$3.04	\$2.83	\$3.01
Inpatient/Outpatient	PHENOBARBITAL 60 MG PO TABS	13517-757-01	A9270		\$0.65	\$0.64	\$0.64	\$0.60	\$0.64
Inpatient/Outpatient	HEPATITIS B VAC RECOMBINANT (ENGERIX-B) 10 MCG/0.5ML IJ SUSP	58160-820-01		90744	\$153.07	\$150.01	\$151.54	\$141.28	\$150.01
Inpatient/Outpatient	HEPATITIS B VAC RECOMBINANT (ENGERIX-B) 10 MCG/0.5ML IJ SUSP	58160-820-11		90744	\$153.07	\$150.01	\$151.54	\$141.28	\$150.01
Inpatient/Outpatient	HEPATITIS B VAC RECOMBINANT (ENGERIX-B) 10 MCG/0.5ML IJ SUSP	58160-820-43		90744	\$134.65	\$131.96	\$133.30	\$124.28	\$131.96
Inpatient/Outpatient	MILRINONE LACTATE 20 MG/20ML IV SOLN	63323-617-20	J2260		\$19.20	\$18.82	\$19.01	\$17.72	\$18.82
Inpatient/Outpatient	MILRINONE LACTATE 20 MG/20ML IV SOLN	0143-9709-10	J2260		\$1.12	\$1.10	\$1.11	\$1.03	\$1.10
Inpatient/Outpatient	MILRINONE LACTATE 20 MG/20ML IV SOLN	0409-0212-11	J2260		\$1.08	\$1.06	\$1.07	\$1.00	\$1.06
Inpatient/Outpatient	OXACILLIN SODIUM 1 G IJ SOLR	0781-3099-95	J2700		\$53.98	\$52.90	\$53.44	\$49.82	\$52.90
Inpatient/Outpatient	OXACILLIN SODIUM 1 G IJ SOLR	55150-127-15	J2700		\$20.84	\$20.42	\$20.63	\$19.24	\$20.42
Inpatient/Outpatient	OXACILLIN SODIUM 1 G IJ SOLR	70655-099-85	J2700		\$50.80	\$49.78	\$50.29	\$46.89	\$49.78
Inpatient/Outpatient	OXACILLIN SODIUM 1 G IJ SOLR	64679-698-02	J2700		\$23.07	\$22.61	\$22.84	\$21.29	\$22.61
Inpatient/Outpatient	OXACILLIN SODIUM 1 G IJ SOLR	63323-813-01	J2700		\$17.82	\$17.46	\$17.64	\$16.45	\$17.46
Inpatient/Outpatient	OXACILLIN SODIUM 1 G IJ SOLR	25021-146-10	J2700		\$54.68	\$53.59	\$54.13	\$50.47	\$53.59
Inpatient/Outpatient	MINERAL OIL LIGHT OIL	63323-254-10	A9150		\$3.90	\$3.82	\$3.86	\$3.60	\$3.82
Inpatient/Outpatient	MORPHINE SULFATE 25 MG/ML IV SOLN	0409-1135-02	J2270		\$3.22	\$3.16	\$3.19	\$2.97	\$3.16
Inpatient/Outpatient	MICONAZOLE NITRATE 200 MG VA SUPP	0472-1738-03	A9150		\$54.19	\$53.11	\$53.65	\$50.02	\$53.11
Inpatient/Outpatient	PENTAMIDINE ISETHIONATE 300 MG IJ SOLR	63323-113-10	S0080		\$341.58	\$334.75	\$338.16	\$315.28	\$334.75
Inpatient/Outpatient	PENTAMIDINE ISETHIONATE 300 MG IJ SOLR	13925-515-10	S0080		\$417.96	\$409.60	\$413.78	\$385.78	\$409.60
Inpatient/Outpatient	DOXORUBICIN HCL LIPOSOMAL 2 MG/ML IV INJ	59676-960-01	Q2050		\$388.66	\$388.66	\$392.62	\$366.05	\$388.66
Inpatient/Outpatient	DOXORUBICIN HCL LIPOSOMAL 2 MG/ML IV INJ	47335-049-40	Q2050		\$126.11	\$123.59	\$124.85	\$116.40	\$123.59
Inpatient/Outpatient	DOXORUBICIN HCL LIPOSOMAL 2 MG/ML IV INJ	43598-283-35	Q2050		\$122.13	\$119.69	\$120.91	\$112.73	\$119.69
Inpatient/Outpatient	DOXORUBICIN HCL LIPOSOMAL 2 MG/ML IV INJ	59676-960-02	Q2050		\$396.59	\$388.66	\$392.62	\$366.05	\$388.66
Inpatient/Outpatient	DOXORUBICIN HCL LIPOSOMAL 2 MG/ML IV INJ	47335-050-40	Q2050		\$133.66	\$130.99	\$132.32	\$123.37	\$130.99
Inpatient/Outpatient	DOXORUBICIN HCL LIPOSOMAL 2 MG/ML IV INJ	0338-0063-01	Q2050		\$68.36	\$66.99	\$67.68	\$63.10	\$66.99
Inpatient/Outpatient	DOXORUBICIN HCL LIPOSOMAL 2 MG/ML IV INJ	0338-0067-01	Q2050		\$75.43	\$73.92	\$74.68	\$69.62	\$73.92
Inpatient/Outpatient	DOXORUBICIN HCL LIPOSOMAL 2 MG/ML IV INJ	43598-541-25	Q2050		\$36.00	\$35.28	\$35.64	\$33.23	\$35.28
Inpatient/Outpatient	ESTRADIOL 0.025 MG/24HR TD PTWK	50419-454-04	A9270		\$149.59	\$146.60	\$148.09	\$138.07	\$146.60
Inpatient/Outpatient	ESTRADIOL 0.025 MG/24HR TD PTWK	0378-3349-99	A9270		\$71.04	\$69.62	\$70.33	\$65.57	\$69.62
Inpatient/Outpatient	ESTRADIOL 0.025 MG/24HR TD PTWK	47781-204-04	A9270		\$75.26	\$73.75	\$74.51	\$69.46	\$73.75
Inpatient/Outpatient	ESTRADIOL 0.025 MG/24HR TD PTWK	0378-3349-16	A9270		\$71.61	\$70.18	\$70.89	\$66.10	\$70.18
Inpatient/Outpatient	NITROGLYCERIN 0.1 MG/HR TD PT24	0378-9102-93	A9270		\$2.33	\$2.28	\$2.31	\$2.15	\$2.28
Inpatient/Outpatient	NITROGLYCERIN 0.1 MG/HR TD PT24	47781-296-03	A9270		\$2.42	\$2.37	\$2.40	\$2.23	\$2.37
Inpatient/Outpatient	NITROGLYCERIN 0.1 MG/HR TD PT24	0378-9102-16	A9270		\$2.33	\$2.28	\$2.31	\$2.15	\$2.28
Inpatient/Outpatient	NITROGLYCERIN 0.2 MG/HR TD PT24	0378-9104-93	A9270		\$1.73	\$1.70	\$1.71	\$1.60	\$1.70
Inpatient/Outpatient	NITROGLYCERIN 0.2 MG/HR TD PT24	47781-297-03	A9270		\$3.19	\$3.13	\$3.16	\$2.94	\$3.13
Inpatient/Outpatient	NITROGLYCERIN 0.2 MG/HR TD PT24	68382-309-01	A9270		\$2.13	\$2.09	\$2.11	\$1.97	\$2.09
Inpatient/Outpatient	NITROGLYCERIN 0.2 MG/HR TD PT24	0378-9104-16	A9270		\$1.73	\$1.70	\$1.71	\$1.60	\$1.70
Inpatient/Outpatient	NITROGLYCERIN 0.3 MG/HR TD PT24	0085-3315-30	A9270		\$25.61	\$25.10	\$25.35	\$23.64	\$25.10

Inpatient/Outpatient	NITROGLYCERIN 0.3 MG/HR TD PT24	0085-3315-03	A9270		\$22.82	\$22.36	\$22.59	\$21.06	\$22.36
Inpatient/Outpatient	NITROGLYCERIN 0.3 MG/HR TD PT24	50742-515-30	A9270		\$177.55	\$174.00	\$175.77	\$163.88	\$174.00
Inpatient/Outpatient	NITROGLYCERIN 0.3 MG/HR TD PT24	50742-515-01	A9270		\$71.46	\$70.03	\$70.75	\$65.96	\$70.03
Inpatient/Outpatient	NITROGLYCERIN 0.4 MG/HR TD PT24	0378-9112-93	A9270		\$2.04	\$2.00	\$2.02	\$1.88	\$2.00
Inpatient/Outpatient	NITROGLYCERIN 0.4 MG/HR TD PT24	0904-5496-46	A9270		\$2.00	\$1.96	\$1.98	\$1.85	\$1.96
Inpatient/Outpatient	NITROGLYCERIN 0.4 MG/HR TD PT24	0089-1303-30	A9270		\$9.42	\$9.23	\$9.33	\$8.69	\$9.23
Inpatient/Outpatient	NITROGLYCERIN 0.4 MG/HR TD PT24	47781-298-03	A9270		\$3.69	\$3.62	\$3.65	\$3.41	\$3.62
Inpatient/Outpatient	NITROGLYCERIN 0.4 MG/HR TD PT24	49730-112-30	A9270		\$1.98	\$1.94	\$1.96	\$1.83	\$1.94
Inpatient/Outpatient	NITROGLYCERIN 0.4 MG/HR TD PT24	68382-310-01	A9270		\$1.98	\$1.94	\$1.96	\$1.83	\$1.94
Inpatient/Outpatient	NITROGLYCERIN 0.4 MG/HR TD PT24	0378-9112-16	A9270		\$2.04	\$2.00	\$2.02	\$1.88	\$2.00
Inpatient/Outpatient	NITROGLYCERIN 0.6 MG/HR TD PT24	0378-9116-93	A9270		\$2.73	\$2.68	\$2.70	\$2.52	\$2.68
Inpatient/Outpatient	NITROGLYCERIN 0.6 MG/HR TD PT24	0378-9116-16	A9270		\$2.73	\$2.68	\$2.70	\$2.52	\$2.68
Inpatient/Outpatient	FOSPHENYTOIN SODIUM 100 MG PE/2ML IJ SOLN	0069-6001-25	Q2009		\$82.94	\$81.28	\$82.11	\$76.55	\$81.28
Inpatient/Outpatient	FOSPHENYTOIN SODIUM 100 MG PE/2ML IJ SOLN	0069-6001-02	Q2009		\$66.51	\$65.18	\$65.84	\$61.39	\$65.18
Inpatient/Outpatient	FOSPHENYTOIN SODIUM 100 MG PE/2ML IJ SOLN	67457-516-25	Q2009		\$33.92	\$33.24	\$33.58	\$31.31	\$33.24
Inpatient/Outpatient	NISOLDIPINE ER 20 MG PO TB24	0378-2222-01	A9270		\$51.33	\$50.30	\$50.82	\$47.38	\$50.30
Inpatient/Outpatient	CLONIDINE 0.1 MG/24HR TD PTWK	0555-1009-16	A9270		\$128.91	\$126.33	\$127.62	\$118.98	\$126.33
Inpatient/Outpatient	CLONIDINE 0.1 MG/24HR TD PTWK	0597-0031-34	A9270		\$298.81	\$295.82	\$295.82	\$275.80	\$292.83
Inpatient/Outpatient	CLONIDINE 0.1 MG/24HR TD PTWK	0378-0871-16	A9270		\$160.96	\$157.74	\$159.35	\$148.57	\$157.74
Inpatient/Outpatient	CLONIDINE 0.1 MG/24HR TD PTWK	0591-3508-54	A9270		\$68.53	\$67.16	\$67.84	\$63.25	\$67.16
Inpatient/Outpatient	CLONIDINE 0.1 MG/24HR TD PTWK	51862-453-01	A9270		\$40.35	\$39.54	\$39.95	\$37.24	\$39.54
Inpatient/Outpatient	CLONIDINE 0.2 MG/24HR TD PTWK	0597-0032-34	A9270		\$353.02	\$349.96	\$349.49	\$325.84	\$349.96
Inpatient/Outpatient	CLONIDINE 0.2 MG/24HR TD PTWK	0555-1010-16	A9270		\$217.06	\$212.72	\$214.89	\$200.35	\$212.72
Inpatient/Outpatient	CLONIDINE 0.2 MG/24HR TD PTWK	0378-0872-99	A9270		\$66.17	\$64.85	\$65.51	\$61.07	\$64.85
Inpatient/Outpatient	CLONIDINE 0.2 MG/24HR TD PTWK	0555-1010-01	A9270		\$119.53	\$117.14	\$118.33	\$110.33	\$117.14
Inpatient/Outpatient	CLONIDINE 0.2 MG/24HR TD PTWK	0591-3509-54	A9270		\$119.22	\$116.84	\$118.03	\$110.04	\$116.84
Inpatient/Outpatient	CLONIDINE 0.2 MG/24HR TD PTWK	0378-0872-16	A9270		\$118.07	\$115.71	\$116.89	\$108.98	\$115.71
Inpatient/Outpatient	CLONIDINE 0.2 MG/24HR TD PTWK	51862-454-04	A9270		\$67.23	\$65.89	\$66.56	\$62.05	\$65.89
Inpatient/Outpatient	CLONIDINE 0.2 MG/24HR TD PTWK	51862-454-01	A9270		\$66.96	\$65.62	\$66.29	\$61.80	\$65.62
Inpatient/Outpatient	CLONIDINE 0.2 MG/24HR TD PTWK	0591-3509-04	A9270		\$148.08	\$145.12	\$146.60	\$136.68	\$145.12
Inpatient/Outpatient	CLONIDINE 0.3 MG/24HR TD PTWK	0597-0033-34	A9270		\$517.48	\$507.13	\$512.31	\$477.63	\$507.13
Inpatient/Outpatient	CLONIDINE 0.3 MG/24HR TD PTWK	0555-1011-16	A9270		\$301.12	\$298.10	\$298.11	\$277.93	\$298.10
Inpatient/Outpatient	CLONIDINE 0.3 MG/24HR TD PTWK	0555-1011-01	A9270		\$159.69	\$156.50	\$158.09	\$147.39	\$156.50
Inpatient/Outpatient	CLONIDINE 0.3 MG/24HR TD PTWK	0378-0873-99	A9270		\$83.03	\$81.37	\$82.20	\$76.64	\$81.37
Inpatient/Outpatient	CLONIDINE 0.3 MG/24HR TD PTWK	0378-0873-16	A9270		\$137.53	\$134.78	\$136.15	\$126.94	\$134.78
Inpatient/Outpatient	CLONIDINE 0.3 MG/24HR TD PTWK	0591-3510-54	A9270		\$135.90	\$133.18	\$134.54	\$125.44	\$133.18
Inpatient/Outpatient	OXAZEPAM 10 MG PO CAPS	0228-2067-10			\$4.43	\$4.34	\$4.39	\$4.09	\$4.34
Inpatient/Outpatient	OXAZEPAM 10 MG PO CAPS	62584-812-11			\$6.56	\$6.43	\$6.49	\$6.05	\$6.43
Inpatient/Outpatient	OXAZEPAM 15 MG PO CAPS	0228-2069-10			\$4.21	\$4.13	\$4.17	\$3.89	\$4.13
Inpatient/Outpatient	OXAZEPAM 15 MG PO CAPS	62584-813-11			\$7.06	\$6.92	\$6.99	\$6.52	\$6.92
Inpatient/Outpatient	OXAZEPAM 15 MG PO CAPS	52817-291-10			\$4.19	\$4.11	\$4.15	\$3.87	\$4.11
Inpatient/Outpatient	FILGRASTIM-AAFI 480 MCG/0.8ML IJ SOSY	0069-0292-10	Q5110		\$1,053.86	\$1,032.78	\$1,043.32	\$972.71	\$1,032.78
Inpatient/Outpatient	FILGRASTIM-AAFI 480 MCG/0.8ML IJ SOSY	0069-0292-01	Q5110		\$1,053.86	\$1,032.78	\$1,043.32	\$972.71	\$1,032.78
Inpatient/Outpatient	FILGRASTIM-AAFI 300 MCG/0.5ML IJ SOSY	0069-0291-01	Q5110		\$1,053.89	\$1,032.81	\$1,043.35	\$972.74	\$1,032.81
Inpatient/Outpatient	FILGRASTIM-AAFI 300 MCG/0.5ML IJ SOSY	0069-0291-10	Q5110		\$1,053.89	\$1,032.81	\$1,043.35	\$972.74	\$1,032.81
Inpatient/Outpatient	DIVALPROEX SODIUM 125 MG PO CSDR	0074-6114-11	A9270		\$8.12	\$7.96	\$8.04	\$7.49	\$7.96
Inpatient/Outpatient	DIVALPROEX SODIUM 125 MG PO CSDR	68084-313-11	A9270		\$2.62	\$2.57	\$2.59	\$2.42	\$2.57
Inpatient/Outpatient	DIVALPROEX SODIUM 125 MG PO CSDR	55111-532-01	A9270		\$1.52	\$1.49	\$1.50	\$1.40	\$1.49
Inpatient/Outpatient	DIVALPROEX SODIUM 125 MG PO CSDR	68382-106-01	A9270		\$1.67	\$1.64	\$1.65	\$1.54	\$1.64
Inpatient/Outpatient	CARBAMAZEPINE ER 200 MG PO CP12	54092-172-12	A9270		\$8.05	\$7.89	\$7.97	\$7.43	\$7.89
Inpatient/Outpatient	CARBAMAZEPINE ER 200 MG PO CP12	66993-408-32	A9270		\$6.26	\$6.13	\$6.20	\$5.78	\$6.13
Inpatient/Outpatient	CARBAMAZEPINE ER 200 MG PO CP12	60505-2806-7	A9270		\$7.96	\$7.80	\$7.88	\$7.35	\$7.80
Inpatient/Outpatient	CHROMIC CHLORIDE 40 MCG/10ML IV SOLN	0409-4093-01			\$8.43	\$8.26	\$8.35	\$7.78	\$8.26
Inpatient/Outpatient	ASPIRIN-DIPYRIDAMOLE ER 25-200 MG PO CP12	0597-0001-60	A9270		\$42.53	\$41.68	\$42.10	\$39.26	\$41.68
Inpatient/Outpatient	ASPIRIN-DIPYRIDAMOLE ER 25-200 MG PO CP12	0093-3040-06	A9270		\$17.30	\$16.95	\$17.13	\$15.97	\$16.95
Inpatient/Outpatient	ASPIRIN-DIPYRIDAMOLE ER 25-200 MG PO CP12	42291-116-60	A9270		\$15.59	\$15.28	\$15.43	\$14.39	\$15.28
Inpatient/Outpatient	ASPIRIN-DIPYRIDAMOLE ER 25-200 MG PO CP12	65162-596-06	A9270		\$12.41	\$12.16	\$12.29	\$11.45	\$12.16
Inpatient/Outpatient	ASPIRIN-DIPYRIDAMOLE ER 25-200 MG PO CP12	49884-007-02	A9270		\$24.23	\$23.75	\$23.99	\$22.36	\$23.75
Inpatient/Outpatient	ASPIRIN-DIPYRIDAMOLE ER 25-200 MG PO CP12	16714-964-01	A9270		\$6.00	\$5.88	\$5.94	\$5.54	\$5.88
Inpatient/Outpatient	NIFEDIPINE ER OSMOTIC RELEASE 60 MG PO TB24	59762-6691-8	A9270		\$6.92	\$6.78	\$6.85	\$6.39	\$6.78
Inpatient/Outpatient	NIFEDIPINE ER OSMOTIC RELEASE 60 MG PO TB24	51079-896-01	A9270		\$7.16	\$7.02	\$7.09	\$6.61	\$7.02
Inpatient/Outpatient	NIFEDIPINE ER OSMOTIC RELEASE 60 MG PO TB24	62175-261-37	A9270		\$2.21	\$2.17	\$2.19	\$2.04	\$2.17
Inpatient/Outpatient	NIFEDIPINE ER OSMOTIC RELEASE 60 MG PO TB24	50268-598-11	A9270		\$6.22	\$6.10	\$6.16	\$5.74	\$6.10
Inpatient/Outpatient	NIFEDIPINE ER OSMOTIC RELEASE 60 MG PO TB24	68084-598-11	A9270		\$8.99	\$8.81	\$8.90	\$8.30	\$8.81
Inpatient/Outpatient	NIFEDIPINE ER OSMOTIC RELEASE 60 MG PO TB24	0904-7081-06	A9270		\$8.15	\$7.99	\$8.07	\$7.52	\$7.99
Inpatient/Outpatient	NIFEDIPINE ER OSMOTIC RELEASE 90 MG PO TB24	51079-897-01	A9270		\$10.36	\$10.15	\$10.26	\$9.56	\$10.15
Inpatient/Outpatient	NIFEDIPINE ER OSMOTIC RELEASE 90 MG PO TB24	62175-262-37	A9270		\$2.73	\$2.68	\$2.70	\$2.52	\$2.68
Inpatient/Outpatient	NIFEDIPINE ER OSMOTIC RELEASE 90 MG PO TB24	68084-603-11	A9270		\$11.30	\$11.07	\$11.19	\$10.43	\$11.07

Inpatient/Outpatient	AZITHROMYCIN IVPB 500 MG IN D5W 250 ML PREMIX	99999-398-14	J0456	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	LANSOPRAZOLE 30 MG PO CPDR	0781-2148-01	A9270	\$6.89	\$6.75	\$6.82	\$6.36	\$6.75
Inpatient/Outpatient	SCOPOLAMINE 1 MG/3DAYS TD PT72	66758-208-58	A9270	\$82.16	\$80.52	\$81.34	\$75.83	\$80.52
Inpatient/Outpatient	SCOPOLAMINE 1 MG/3DAYS TD PT72	0378-6470-44	A9270	\$89.33	\$87.54	\$88.44	\$82.45	\$87.54
Inpatient/Outpatient	SCOPOLAMINE 1 MG/3DAYS TD PT72	10019-553-90	A9270	\$98.12	\$96.16	\$97.14	\$90.56	\$96.16
Inpatient/Outpatient	SCOPOLAMINE 1 MG/3DAYS TD PT72	45802-580-01	A9270	\$34.63	\$33.94	\$34.28	\$31.96	\$33.94
Inpatient/Outpatient	ONDANSETRON 4 MG PO TBDP	0173-0569-00	A9270	\$95.60	\$93.69	\$94.64	\$88.24	\$93.69
Inpatient/Outpatient	ONDANSETRON 4 MG PO TBDP	68462-157-13	A9270	\$0.88	\$0.86	\$0.87	\$0.81	\$0.86
Inpatient/Outpatient	ONDANSETRON 4 MG PO TBDP	62756-240-64	A9270	\$5.19	\$5.09	\$5.14	\$4.79	\$5.09
Inpatient/Outpatient	ONDANSETRON 4 MG PO TBDP	0781-5238-06	A9270	\$0.86	\$0.84	\$0.85	\$0.79	\$0.84
Inpatient/Outpatient	ONDANSETRON 4 MG PO TBDP	0378-7732-93	A9270	\$2.26	\$2.21	\$2.24	\$2.09	\$2.21
Inpatient/Outpatient	ONDANSETRON 4 MG PO TBDP	57237-077-10	A9270	\$1.13	\$1.11	\$1.12	\$1.04	\$1.11
Inpatient/Outpatient	ONDANSETRON 4 MG PO TBDP	65862-390-10	A9270	\$2.97	\$2.91	\$2.94	\$2.74	\$2.91
Inpatient/Outpatient	ONDANSETRON 4 MG PO TBDP	57237-077-30	A9270	\$1.13	\$1.11	\$1.12	\$1.04	\$1.11
Inpatient/Outpatient	ONDANSETRON 4 MG PO TBDP	68462-157-40	A9270	\$0.88	\$0.86	\$0.87	\$0.81	\$0.86
Inpatient/Outpatient	ONDANSETRON 4 MG PO TBDP	16714-200-10	A9270	\$0.80	\$0.78	\$0.79	\$0.74	\$0.78
Inpatient/Outpatient	BELLADONNA ALKALOIDS-OPUIUM 16.2-30 MG RE SUPP	0574-7045-12	A9270	\$99.57	\$97.58	\$98.57	\$91.90	\$97.58
Inpatient/Outpatient	DEXAMETHASONE 0.5 MG PO TABS	0054-8179-25	J8540	\$0.71	\$0.70	\$0.70	\$0.66	\$0.70
Inpatient/Outpatient	DESMOPRESSIN ACE SPRAY REFRIG 0.01 % NA SOLN	24208-342-05	A9270	\$143.10	\$140.24	\$141.67	\$132.08	\$140.24
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN	0338-0049-02	J7050	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN	0338-0049-03	J7050	\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN	0338-0049-10	J7050	\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN	0338-0049-31	J7050	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN	0338-0049-38	J7050	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN	0338-0049-41	J7050	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN	0338-0049-48	J7050	\$0.08	\$0.08	\$0.08	\$0.07	\$0.08
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN	0338-0553-11	J7050	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN	0338-0553-18	J7050	\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN	0264-7800-10	J7050	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN	0338-0049-04	J7030	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN	0338-0049-01		\$0.04	\$0.04	\$0.04	\$0.04	\$0.04
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN	0338-9542-01	J7050	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN	0338-9543-02	J7050	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN	0409-7983-02	J7050	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN	0338-9543-06	J7030	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN	0409-7984-23	J7050	\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN	0990-7983-61		\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN	0264-7800-20	J7050	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN	0338-9543-04	J7050	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN	0264-7800-09	J7030	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	TAMSULOSIN HCL 0.4 MG PO CAPS	0597-0058-01	A9270	\$36.26	\$35.53	\$35.90	\$33.47	\$35.53
Inpatient/Outpatient	TAMSULOSIN HCL 0.4 MG PO CAPS	0115-8211-01	A9270	\$3.37	\$3.30	\$3.34	\$3.11	\$3.30
Inpatient/Outpatient	TAMSULOSIN HCL 0.4 MG PO CAPS	0093-7338-01	A9270	\$0.64	\$0.63	\$0.63	\$0.59	\$0.63
Inpatient/Outpatient	TAMSULOSIN HCL 0.4 MG PO CAPS	63739-567-10	A9270	\$1.18	\$1.16	\$1.17	\$1.09	\$1.16
Inpatient/Outpatient	TAMSULOSIN HCL 0.4 MG PO CAPS	68084-407-11	A9270	\$1.46	\$1.43	\$1.45	\$1.35	\$1.43
Inpatient/Outpatient	TAMSULOSIN HCL 0.4 MG PO CAPS	68084-299-11	A9270	\$1.39	\$1.36	\$1.38	\$1.28	\$1.36
Inpatient/Outpatient	TAMSULOSIN HCL 0.4 MG PO CAPS	0781-2076-01	A9270	\$0.97	\$0.95	\$0.96	\$0.90	\$0.95
Inpatient/Outpatient	TAMSULOSIN HCL 0.4 MG PO CAPS	0904-6401-61	A9270	\$0.88	\$0.86	\$0.87	\$0.81	\$0.86
Inpatient/Outpatient	VENLAFAXINE HCL ER 37.5 MG PO CP24	0008-0837-21	A9270	\$59.87	\$58.67	\$59.27	\$55.26	\$58.67
Inpatient/Outpatient	VENLAFAXINE HCL ER 37.5 MG PO CP24	0093-7384-56	A9270	\$1.24	\$1.22	\$1.23	\$1.14	\$1.22
Inpatient/Outpatient	VENLAFAXINE HCL ER 37.5 MG PO CP24	59762-0180-1	A9270	\$0.61	\$0.60	\$0.60	\$0.56	\$0.60
Inpatient/Outpatient	VENLAFAXINE HCL ER 37.5 MG PO CP24	0904-6246-61	A9270	\$0.89	\$0.87	\$0.88	\$0.82	\$0.87
Inpatient/Outpatient	VENLAFAXINE HCL ER 37.5 MG PO CP24	0008-0837-02	A9270	\$40.36	\$39.55	\$39.96	\$37.25	\$39.55
Inpatient/Outpatient	VENLAFAXINE HCL ER 37.5 MG PO CP24	0904-6468-61	A9270	\$1.44	\$1.41	\$1.43	\$1.33	\$1.41
Inpatient/Outpatient	VENLAFAXINE HCL ER 37.5 MG PO CP24	68084-698-11	A9270	\$1.76	\$1.72	\$1.74	\$1.62	\$1.72
Inpatient/Outpatient	VENLAFAXINE HCL ER 37.5 MG PO CP24	65862-527-30	A9270	\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	VENLAFAXINE HCL ER 75 MG PO CP24	0008-0833-22	A9270	\$67.09	\$65.75	\$66.42	\$61.92	\$65.75
Inpatient/Outpatient	VENLAFAXINE HCL ER 75 MG PO CP24	0093-7385-98	A9270	\$1.39	\$1.36	\$1.38	\$1.28	\$1.36
Inpatient/Outpatient	VENLAFAXINE HCL ER 75 MG PO CP24	0904-6247-61	A9270	\$1.16	\$1.14	\$1.15	\$1.07	\$1.14
Inpatient/Outpatient	VENLAFAXINE HCL ER 75 MG PO CP24	0904-6469-61	A9270	\$1.46	\$1.43	\$1.45	\$1.35	\$1.43
Inpatient/Outpatient	VENLAFAXINE HCL ER 75 MG PO CP24	0008-0833-21	A9270	\$73.55	\$72.08	\$72.81	\$67.89	\$72.08
Inpatient/Outpatient	VENLAFAXINE HCL ER 75 MG PO CP24	65862-528-30	A9270	\$0.55	\$0.54	\$0.54	\$0.51	\$0.54
Inpatient/Outpatient	VENLAFAXINE HCL ER 75 MG PO CP24	68084-709-11	A9270	\$1.99	\$1.95	\$1.97	\$1.84	\$1.95
Inpatient/Outpatient	VENLAFAXINE HCL ER 75 MG PO CP24	68084-709-01	A9270	\$1.98	\$1.94	\$1.96	\$1.83	\$1.94
Inpatient/Outpatient	VENLAFAXINE HCL ER 150 MG PO CP24	0008-0836-21	A9270	\$73.07	\$71.61	\$72.34	\$67.44	\$71.61
Inpatient/Outpatient	VENLAFAXINE HCL ER 150 MG PO CP24	0008-0836-22	A9270	\$73.07	\$71.61	\$72.34	\$67.44	\$71.61
Inpatient/Outpatient	VENLAFAXINE HCL ER 150 MG PO CP24	0008-0836-02	A9270	\$20.98	\$20.56	\$20.77	\$19.36	\$20.56
Inpatient/Outpatient	VENLAFAXINE HCL ER 150 MG PO CP24	0008-0836-03	A9270	\$69.22	\$67.84	\$68.53	\$63.89	\$67.84

Inpatient/Outpatient	VENLAFAXINE HCL ER 150 MG PO CP24	0904-6248-61	A9270		\$1.27	\$1.24	\$1.26	\$1.17	\$1.24
Inpatient/Outpatient	VENLAFAXINE HCL ER 150 MG PO CP24	0904-6470-61	A9270		\$1.53	\$1.50	\$1.51	\$1.41	\$1.50
Inpatient/Outpatient	VENLAFAXINE HCL ER 150 MG PO CP24	68084-713-11	A9270		\$2.24	\$2.20	\$2.22	\$2.07	\$2.20
Inpatient/Outpatient	NICOTINE 7 MG/24HR TD PT24	0067-5124-07	A9270		\$7.85	\$7.69	\$7.77	\$7.25	\$7.69
Inpatient/Outpatient	NICOTINE 7 MG/24HR TD PT24	0067-5124-09	A9270		\$7.89	\$7.73	\$7.81	\$7.28	\$7.73
Inpatient/Outpatient	NICOTINE 7 MG/24HR TD PT24	0067-5124-14	A9270		\$6.65	\$6.52	\$6.58	\$6.14	\$6.52
Inpatient/Outpatient	NICOTINE 7 MG/24HR TD PT24	0536-5894-88	A9270		\$6.05	\$5.93	\$5.99	\$5.58	\$5.93
Inpatient/Outpatient	NICOTINE 7 MG/24HR TD PT24	43598-446-74	A9270		\$5.28	\$5.17	\$5.23	\$4.87	\$5.17
Inpatient/Outpatient	NICOTINE 7 MG/24HR TD PT24	43598-446-70	A9270		\$9.03	\$8.85	\$8.94	\$8.33	\$8.85
Inpatient/Outpatient	NICOTINE 7 MG/24HR TD PT24	60505-7061-0	A9270		\$5.62	\$5.51	\$5.56	\$5.19	\$5.51
Inpatient/Outpatient	NICOTINE 14 MG/24HR TD PT24	0067-5125-07	A9270		\$7.85	\$7.69	\$7.77	\$7.25	\$7.69
Inpatient/Outpatient	NICOTINE 14 MG/24HR TD PT24	0067-5125-14	A9270		\$6.65	\$6.52	\$6.58	\$6.14	\$6.52
Inpatient/Outpatient	NICOTINE 14 MG/24HR TD PT24	0067-5125-03	A9270		\$7.89	\$7.73	\$7.81	\$7.28	\$7.73
Inpatient/Outpatient	NICOTINE 14 MG/24HR TD PT24	0536-5895-88	A9270		\$7.91	\$7.75	\$7.83	\$7.30	\$7.75
Inpatient/Outpatient	NICOTINE 14 MG/24HR TD PT24	43598-447-74	A9270		\$5.20	\$5.10	\$5.15	\$4.80	\$5.10
Inpatient/Outpatient	NICOTINE 14 MG/24HR TD PT24	60505-7062-0	A9270		\$5.62	\$5.51	\$5.56	\$5.19	\$5.51
Inpatient/Outpatient	NICOTINE 21 MG/24HR TD PT24	43598-448-74	A9270		\$5.39	\$5.28	\$5.34	\$4.97	\$5.28
Inpatient/Outpatient	NICOTINE 21 MG/24HR TD PT24	0536-5896-88	A9270		\$5.82	\$5.70	\$5.76	\$5.37	\$5.70
Inpatient/Outpatient	NICOTINE 21 MG/24HR TD PT24	60505-7063-0	A9270		\$5.62	\$5.51	\$5.56	\$5.19	\$5.51
Inpatient/Outpatient	FENTANYL 25 MCG/HR TD PT72	0378-9121-98	A9270		\$23.23	\$22.77	\$23.00	\$21.44	\$22.77
Inpatient/Outpatient	FENTANYL 25 MCG/HR TD PT72	0591-3198-54	A9270		\$13.22	\$12.96	\$13.09	\$12.20	\$12.96
Inpatient/Outpatient	FENTANYL 25 MCG/HR TD PT72	0591-3198-72	A9270		\$11.04	\$10.82	\$10.93	\$10.19	\$10.82
Inpatient/Outpatient	FENTANYL 25 MCG/HR TD PT72	60505-7006-0	A9270		\$13.10	\$12.84	\$12.97	\$12.09	\$12.84
Inpatient/Outpatient	FENTANYL 25 MCG/HR TD PT72	47781-424-47	A9270		\$5.40	\$5.29	\$5.35	\$4.98	\$5.29
Inpatient/Outpatient	FENTANYL 25 MCG/HR TD PT72	0378-9121-16	A9270		\$28.99	\$28.41	\$28.70	\$26.76	\$28.41
Inpatient/Outpatient	FENTANYL 25 MCG/HR TD PT72	0406-9125-76	A9270		\$11.02	\$10.80	\$10.91	\$10.17	\$10.80
Inpatient/Outpatient	FENTANYL 50 MCG/HR TD PT72	60505-7002-0	A9270		\$18.85	\$18.47	\$18.66	\$17.40	\$18.47
Inpatient/Outpatient	FENTANYL 50 MCG/HR TD PT72	0378-9122-98	A9270		\$51.59	\$50.56	\$51.07	\$47.62	\$50.56
Inpatient/Outpatient	FENTANYL 50 MCG/HR TD PT72	47781-426-47	A9270		\$11.12	\$10.90	\$11.01	\$10.26	\$10.90
Inpatient/Outpatient	FENTANYL 50 MCG/HR TD PT72	0406-9050-76	A9270		\$13.89	\$13.61	\$13.75	\$12.82	\$13.61
Inpatient/Outpatient	FENTANYL 75 MCG/HR TD PT72	0378-9123-98	A9270		\$65.69	\$64.38	\$65.03	\$60.63	\$64.38
Inpatient/Outpatient	FENTANYL 75 MCG/HR TD PT72	0378-9123-16	A9270		\$81.50	\$79.87	\$80.69	\$75.22	\$79.87
Inpatient/Outpatient	FENTANYL 75 MCG/HR TD PT72	60505-7008-0	A9270		\$13.88	\$13.60	\$13.74	\$12.81	\$13.60
Inpatient/Outpatient	FENTANYL 75 MCG/HR TD PT72	47781-427-47	A9270		\$10.34	\$10.13	\$10.24	\$9.54	\$10.13
Inpatient/Outpatient	FENTANYL 75 MCG/HR TD PT72	60505-7083-0	A9270		\$13.97	\$13.69	\$13.83	\$12.89	\$13.69
Inpatient/Outpatient	FENTANYL 100 MCG/HR TD PT72	0378-9124-98	A9270		\$122.10	\$119.66	\$120.88	\$112.70	\$119.66
Inpatient/Outpatient	FENTANYL 100 MCG/HR TD PT72	0378-9124-16	A9270		\$61.34	\$60.11	\$60.73	\$56.62	\$60.11
Inpatient/Outpatient	FENTANYL 100 MCG/HR TD PT72	49884-764-52	A9270		\$124.44	\$121.95	\$123.20	\$114.86	\$121.95
Inpatient/Outpatient	FENTANYL 100 MCG/HR TD PT72	47781-428-47	A9270		\$17.05	\$16.71	\$16.88	\$15.74	\$16.71
Inpatient/Outpatient	FENTANYL 100 MCG/HR TD PT72	47781-428-11	A9270		\$17.05	\$16.71	\$16.88	\$15.74	\$16.71
Inpatient/Outpatient	FENTANYL CITRATE 200 MCG BU LPOP	0093-7865-65	A9270		\$28.55	\$27.98	\$28.26	\$26.35	\$27.98
Inpatient/Outpatient	FENTANYL CITRATE 600 MCG BU LPOP	0093-7867-65	A9270		\$43.72	\$42.85	\$43.28	\$40.35	\$42.85
Inpatient/Outpatient	OXYCODONE HCL ER 10 MG PO T12A	59011-410-20	A9270		\$16.90	\$16.56	\$16.73	\$15.60	\$16.56
Inpatient/Outpatient	OXYCODONE HCL ER 20 MG PO T12A	59011-420-20	A9270		\$40.31	\$39.50	\$39.91	\$37.21	\$39.50
Inpatient/Outpatient	OXYCODONE HCL ER 40 MG PO T12A	59011-440-20	A9270		\$53.89	\$52.81	\$53.35	\$49.74	\$52.81
Inpatient/Outpatient	LACTATED RINGERS BOLUS (INFANT/PEDS)	0338-0117-03			\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	HEPATITIS A VACCINE 1440 EL U/ML IM SUSP	58160-826-11	90632		\$291.68	\$285.85	\$288.76	\$269.22	\$285.85
Inpatient/Outpatient	HEPATITIS A VACCINE 1440 EL U/ML IM SUSP	58160-826-01	90632		\$288.76	\$282.98	\$285.87	\$266.53	\$282.98
Inpatient/Outpatient	HEPATITIS A VACCINE 1440 EL U/ML IM SUSP	58160-826-43	90632		\$308.10	\$301.94	\$305.02	\$284.38	\$301.94
Inpatient/Outpatient	CALCIUM + VIT D 250-3.125 MG-MCG (OSCAL 250+D) PO TAB (WRAP)	0904-1882-60	A9150		\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	CALCIUM + VIT D (OSCAL 500+D) 500 MG-5 MCG PO TAB (WRAP)	0536-7817-08	A9150		\$0.08	\$0.08	\$0.08	\$0.07	\$0.08
Inpatient/Outpatient	CALCIUM + VIT D (OSCAL 500+D) 500 MG-5 MCG PO TAB (WRAP)	0904-5460-52	A9150		\$0.08	\$0.08	\$0.08	\$0.07	\$0.08
Inpatient/Outpatient	CALCIUM + VIT D (OSCAL 500+D) 500 MG-5 MCG PO TAB (WRAP)	37864-08289	A9150		\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	CALCIUM + VIT D (OSCAL 500+D) 500 MG-5 MCG PO TAB (WRAP)	0904-5460-61	A9150		\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	CALCIUM + VIT D (OSCAL 500+D) 500 MG-5 MCG PO TAB (WRAP)	10006-70038	A9150		\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	CARBOXYMETHYLCELLULOSE SOD PF 0.5 % OP SOLN	0023-0403-30	A9270		\$7.77	\$7.61	\$7.69	\$7.17	\$7.61
Inpatient/Outpatient	CARBOXYMETHYLCELLULOSE SOD PF 0.5 % OP SOLN	0904-6329-46	A9270		\$0.84	\$0.82	\$0.83	\$0.78	\$0.82
Inpatient/Outpatient	CARBOXYMETHYLCELLULOSE SOD PF 0.5 % OP SOLN	0904-6329-51	A9270		\$0.81	\$0.79	\$0.80	\$0.75	\$0.79
Inpatient/Outpatient	SERTRALINE HCL 20 MG/ML PO CONC	59762-4940-1	A9270		\$3.45	\$3.38	\$3.42	\$3.18	\$3.38
Inpatient/Outpatient	SERTRALINE HCL 20 MG/ML PO CONC	16714-601-02	A9270		\$3.11	\$3.05	\$3.08	\$2.87	\$3.05
Inpatient/Outpatient	ALVIMOPAN 12 MG PO CAPS	67919-020-10	A9270		\$620.07	\$607.67	\$613.87	\$572.32	\$607.67
Inpatient/Outpatient	ALVIMOPAN 12 MG PO CAPS	0591-2312-15	A9270		\$468.73	\$459.36	\$464.04	\$432.64	\$459.36
Inpatient/Outpatient	ALVIMOPAN 12 MG PO CAPS	0591-2312-45	A9270		\$468.73	\$459.36	\$464.04	\$432.64	\$459.36
Inpatient/Outpatient	FLUOROURACIL 500 MG/10ML IV SOLN	63323-117-10	J9190		\$1.04	\$1.02	\$1.03	\$0.96	\$1.02
Inpatient/Outpatient	FLUOROURACIL 500 MG/10ML IV SOLN	0703-3015-11	J9190		\$2.76	\$2.70	\$2.73	\$2.55	\$2.70
Inpatient/Outpatient	FLUOROURACIL 500 MG/10ML IV SOLN	16729-276-68	J9190		\$5.77	\$5.65	\$5.71	\$5.33	\$5.65
Inpatient/Outpatient	FLUOROURACIL 500 MG/10ML IV SOLN	16729-276-03	J9190		\$6.20	\$6.08	\$6.14	\$5.72	\$6.08
Inpatient/Outpatient	FLUOROURACIL 500 MG/10ML IV SOLN	63323-117-18	J9190		\$1.04	\$1.02	\$1.03	\$0.96	\$1.02

Inpatient/Outpatient	BENZOCAINE-MENTHOL 20-0.5 % EX AERO	63029-8504-1	A9270	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	BENZOCAINE-MENTHOL 20-0.5 % EX AERO	75137-85520	A9270	\$0.29	\$0.28	\$0.29	\$0.27	\$0.28
Inpatient/Outpatient	BENZOCAINE-MENTHOL 20-0.5 % EX AERO	16864-68002	A9270	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	BENZOCAINE-MENTHOL 20-0.5 % EX AERO	16864-68003	A9270	\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	LIDOCAINE-EPINEPHRINE 2 %-1:200000 IJ SOLN	63323-489-21		\$1.47	\$1.44	\$1.46	\$1.36	\$1.44
Inpatient/Outpatient	LIDOCAINE-EPINEPHRINE 2 %-1:200000 IJ SOLN	63323-489-27		\$1.27	\$1.24	\$1.26	\$1.17	\$1.24
Inpatient/Outpatient	LIDOCAINE-EPINEPHRINE 2 %-1:200000 IJ SOLN	63323-489-02		\$1.28	\$1.25	\$1.27	\$1.18	\$1.25
Inpatient/Outpatient	LIDOCAINE-EPINEPHRINE 2 %-1:200000 IJ SOLN	63323-489-01		\$2.55	\$2.50	\$2.52	\$2.35	\$2.50
Inpatient/Outpatient	LIDOCAINE-EPINEPHRINE 2 %-1:200000 IJ SOLN	0409-3183-01		\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	LIDOCAINE-EPINEPHRINE 2 %-1:200000 IJ SOLN	0409-3183-11		\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	LINEZOLID 600 MG PO TABS	0009-5135-02	A9270	\$379.36	\$371.77	\$375.57	\$350.15	\$371.77
Inpatient/Outpatient	LINEZOLID 600 MG PO TABS	68462-291-11	A9270	\$23.21	\$22.75	\$22.98	\$21.42	\$22.75
Inpatient/Outpatient	LINEZOLID 600 MG PO TABS	0904-6553-04	A9270	\$8.79	\$8.61	\$8.70	\$8.11	\$8.61
Inpatient/Outpatient	LINEZOLID 600 MG PO TABS	60505-4362-3	A9270	\$15.57	\$15.26	\$15.41	\$14.37	\$15.26
Inpatient/Outpatient	LINEZOLID 600 MG PO TABS	0009-5135-03	A9270	\$345.84	\$338.92	\$342.38	\$319.21	\$338.92
Inpatient/Outpatient	LINEZOLID 600 MG PO TABS	0093-7490-19	A9270	\$14.54	\$14.25	\$14.39	\$13.42	\$14.25
Inpatient/Outpatient	LINEZOLID 600 MG PO TABS	67877-419-84	A9270	\$10.17	\$9.97	\$10.07	\$9.39	\$9.97
Inpatient/Outpatient	LINEZOLID 600 MG PO TABS	67877-419-33	A9270	\$10.25	\$10.05	\$10.15	\$9.46	\$10.05
Inpatient/Outpatient	LINEZOLID 100 MG/5ML PO SUSR	0009-5136-01	A9270	\$20.24	\$19.84	\$20.04	\$18.68	\$19.84
Inpatient/Outpatient	LINEZOLID 100 MG/5ML PO SUSR	0054-0319-50	A9270	\$8.13	\$7.97	\$8.05	\$7.50	\$7.97
Inpatient/Outpatient	LINEZOLID 100 MG/5ML PO SUSR	59762-1308-1	A9270	\$8.79	\$8.61	\$8.70	\$8.11	\$8.61
Inpatient/Outpatient	LINEZOLID 600 MG/300ML IV SOLN	0009-5140-01	J2020	\$0.84	\$0.82	\$0.83	\$0.78	\$0.82
Inpatient/Outpatient	LINEZOLID 600 MG/300ML IV SOLN	0009-7807-02	J2020	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	LINEZOLID 600 MG/300ML IV SOLN	0703-9060-31	J2020	\$0.73	\$0.72	\$0.72	\$0.67	\$0.72
Inpatient/Outpatient	LINEZOLID 600 MG/300ML IV SOLN	0009-7807-01	J2020	\$0.70	\$0.69	\$0.69	\$0.65	\$0.69
Inpatient/Outpatient	LINEZOLID 600 MG/300ML IV SOLN	0781-3433-46	J2020	\$0.58	\$0.57	\$0.57	\$0.54	\$0.57
Inpatient/Outpatient	LINEZOLID 600 MG/300ML IV SOLN	55150-242-51	J2020	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	LINEZOLID 600 MG/300ML IV SOLN	63323-713-13	J2020	\$0.32	\$0.31	\$0.32	\$0.30	\$0.31
Inpatient/Outpatient	LINEZOLID 600 MG/300ML IV SOLN	66794-219-63	J2020	\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	LINEZOLID 600 MG/300ML IV SOLN	57664-683-31	J2020	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	CITALOPRAM HYDROBROMIDE 10 MG/5ML PO SOLN	0054-0062-58	A9270	\$0.97	\$0.95	\$0.96	\$0.90	\$0.95
Inpatient/Outpatient	SALMETEROL XINAFOATE 50 MCG/DOSE IN AEPB	0173-0520-00	A9270	\$37.65	\$36.90	\$37.27	\$34.75	\$36.90
Inpatient/Outpatient	SALMETEROL XINAFOATE 50 MCG/DOSE IN AEPB	0173-0521-00	A9270	\$31.60	\$30.97	\$31.28	\$29.17	\$30.97
Inpatient/Outpatient	CARBIDOPA-LEVODOPA ER 25-100 MG PO TBCR	51079-978-20	A9270	\$0.89	\$0.87	\$0.88	\$0.82	\$0.87
Inpatient/Outpatient	CARBIDOPA-LEVODOPA ER 25-100 MG PO TBCR	68084-281-11	A9270	\$1.04	\$1.02	\$1.03	\$0.96	\$1.02
Inpatient/Outpatient	CARBIDOPA-LEVODOPA ER 25-100 MG PO TBCR	51079-978-01	A9270	\$1.31	\$1.28	\$1.30	\$1.21	\$1.28
Inpatient/Outpatient	INSULIN GLARGINE 100 UNIT/ML SC SOLN	0088-2220-33	A9270	\$38.48	\$37.71	\$38.10	\$35.52	\$37.71
Inpatient/Outpatient	PEGFILGRASTIM 6 MG/0.6ML SC PSKT	55513-192-01	J2506	\$11,202.70	\$10,978.65	\$11,090.67	\$10,340.09	\$10,978.65
Inpatient/Outpatient	HYDROCODONE-ACETAMINOPHEN 10-325 MG PO TABS	0603-3887-21	A9270	\$2.12	\$2.08	\$2.10	\$1.96	\$2.08
Inpatient/Outpatient	HYDROCODONE-ACETAMINOPHEN 10-325 MG PO TABS	68084-353-01	A9270	\$1.46	\$1.43	\$1.45	\$1.35	\$1.43
Inpatient/Outpatient	HYDROCODONE-ACETAMINOPHEN 10-325 MG PO TABS	0406-0367-62	A9270	\$1.20	\$1.18	\$1.19	\$1.11	\$1.18
Inpatient/Outpatient	HYDROCODONE-ACETAMINOPHEN 10-325 MG PO TABS	0406-0125-23	A9270	\$2.43	\$2.38	\$2.41	\$2.24	\$2.38
Inpatient/Outpatient	STERILE WATER FOR INJECTION IV SOLN	0338-0013-04		\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	ESTRADIOL 0.05 MG/24HR TD PTWK	0378-3350-99	A9270	\$54.24	\$53.16	\$53.70	\$50.06	\$53.16
Inpatient/Outpatient	ESTRADIOL 0.05 MG/24HR TD PTWK	50419-451-04	A9270	\$149.59	\$146.60	\$148.09	\$138.07	\$146.60
Inpatient/Outpatient	ESTRADIOL 0.05 MG/24HR TD PTWK	47781-206-11	A9270	\$74.35	\$72.86	\$73.61	\$68.63	\$72.86
Inpatient/Outpatient	ESTRADIOL 0.05 MG/24HR TD PTWK	0378-3350-16	A9270	\$54.24	\$53.16	\$53.70	\$50.06	\$53.16
Inpatient/Outpatient	ESTRADIOL 0.1 MG/24HR TD PTWK	0378-3352-99	A9270	\$71.26	\$69.83	\$70.55	\$65.77	\$69.83
Inpatient/Outpatient	ESTRADIOL 0.1 MG/24HR TD PTWK	50419-452-04	A9270	\$149.59	\$146.60	\$148.09	\$138.07	\$146.60
Inpatient/Outpatient	ESTRADIOL 0.1 MG/24HR TD PTWK	0378-3352-16	A9270	\$47.35	\$46.40	\$46.88	\$43.70	\$46.40
Inpatient/Outpatient	INSULIN ASPART 100 UNIT/ML SCH DOSE	0169-7501-11	A9270	\$21.73	\$21.30	\$21.51	\$20.06	\$21.30
Inpatient/Outpatient	INSULIN ASPART 100 UNIT/ML SCH DOSE	73070-100-11	A9270	\$65.44	\$64.13	\$64.79	\$60.40	\$64.13
Inpatient/Outpatient	NIFEDIPINE ER OSMOTIC RELEASE 30 MG PO TB24	68084-597-11	A9270	\$3.74	\$3.67	\$3.70	\$3.45	\$3.67
Inpatient/Outpatient	NIFEDIPINE ER OSMOTIC RELEASE 30 MG PO TB24	51079-400-01	A9270	\$4.39	\$4.30	\$4.35	\$4.05	\$4.30
Inpatient/Outpatient	NIFEDIPINE ER OSMOTIC RELEASE 30 MG PO TB24	50268-597-11	A9270	\$3.64	\$3.57	\$3.60	\$3.36	\$3.57
Inpatient/Outpatient	ATORVASTATIN CALCIUM 80 MG PO TABS	0071-0158-23	A9270	\$70.97	\$69.55	\$70.26	\$65.51	\$69.55
Inpatient/Outpatient	ATORVASTATIN CALCIUM 80 MG PO TABS	0591-3777-19	A9270	\$1.26	\$1.23	\$1.25	\$1.16	\$1.23
Inpatient/Outpatient	ATORVASTATIN CALCIUM 80 MG PO TABS	60505-2671-9	A9270	\$0.47	\$0.46	\$0.47	\$0.43	\$0.46
Inpatient/Outpatient	ATORVASTATIN CALCIUM 80 MG PO TABS	68084-590-25	A9270	\$1.50	\$1.47	\$1.49	\$1.38	\$1.47
Inpatient/Outpatient	ATORVASTATIN CALCIUM 80 MG PO TABS	62175-897-46	A9270	\$2.38	\$2.33	\$2.36	\$2.20	\$2.33
Inpatient/Outpatient	ATORVASTATIN CALCIUM 80 MG PO TABS	68084-590-95	A9270	\$4.66	\$4.57	\$4.61	\$4.30	\$4.57
Inpatient/Outpatient	ATORVASTATIN CALCIUM 80 MG PO TABS	50268-096-11	A9270	\$1.89	\$1.85	\$1.87	\$1.74	\$1.85
Inpatient/Outpatient	ATORVASTATIN CALCIUM 80 MG PO TABS	0904-6293-04	A9270	\$1.25	\$1.23	\$1.24	\$1.15	\$1.23
Inpatient/Outpatient	ATORVASTATIN CALCIUM 80 MG PO TABS	63304-830-90	A9270	\$0.38	\$0.37	\$0.38	\$0.35	\$0.37
Inpatient/Outpatient	ATORVASTATIN CALCIUM 80 MG PO TABS	51079-211-01	A9270	\$1.26	\$1.23	\$1.25	\$1.16	\$1.23
Inpatient/Outpatient	ATORVASTATIN CALCIUM 80 MG PO TABS	51079-211-03	A9270	\$1.26	\$1.23	\$1.25	\$1.16	\$1.23
Inpatient/Outpatient	TRANEXAMIC ACID-NACL 1000-0.7 MG/100ML-% IV SOLN	51754-0108-3		\$0.41	\$0.40	\$0.41	\$0.38	\$0.40
Inpatient/Outpatient	TRANEXAMIC ACID-NACL 1000-0.7 MG/100ML-% IV SOLN	51754-0108-1		\$0.41	\$0.40	\$0.41	\$0.38	\$0.40

Inpatient/Outpatient	GLYBURIDE-METFORMIN 1.25-250 MG PO TABS	0093-5710-01	A9270	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	GLYBURIDE-METFORMIN 1.25-250 MG PO TABS	0228-2751-11	A9270	\$0.47	\$0.46	\$0.47	\$0.43	\$0.46
Inpatient/Outpatient	GLYBURIDE-METFORMIN 1.25-250 MG PO TABS	57237-023-01	A9270	\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	GLYBURIDE-METFORMIN 2.5-500 MG PO TABS	0087-6073-11	A9270	\$5.86	\$5.74	\$5.80	\$5.41	\$5.74
Inpatient/Outpatient	GLYBURIDE-METFORMIN 2.5-500 MG PO TABS	0228-2752-11	A9270	\$0.48	\$0.47	\$0.48	\$0.44	\$0.47
Inpatient/Outpatient	GLYBURIDE-METFORMIN 2.5-500 MG PO TABS	0093-5711-01	A9270	\$0.38	\$0.37	\$0.38	\$0.35	\$0.37
Inpatient/Outpatient	GLYBURIDE-METFORMIN 2.5-500 MG PO TABS	0093-5711-93	A9270	\$0.62	\$0.61	\$0.61	\$0.57	\$0.61
Inpatient/Outpatient	GLYBURIDE-METFORMIN 2.5-500 MG PO TABS	65862-081-01	A9270	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	GLYBURIDE-METFORMIN 5-500 MG PO TABS	0228-2753-11	A9270	\$0.48	\$0.47	\$0.48	\$0.44	\$0.47
Inpatient/Outpatient	GLYBURIDE-METFORMIN 5-500 MG PO TABS	0093-5712-01	A9270	\$0.40	\$0.39	\$0.40	\$0.37	\$0.39
Inpatient/Outpatient	GLYBURIDE-METFORMIN 5-500 MG PO TABS	65862-082-01	A9270	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	GLYBURIDE-METFORMIN 5-500 MG PO TABS	57237-025-01	A9270	\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	METHYLPHENIDATE HCL ER (OSM) 18 MG PO TBCR	50458-585-01	A9270	\$53.49	\$52.42	\$52.96	\$49.37	\$52.42
Inpatient/Outpatient	METHYLPHENIDATE HCL ER (OSM) 18 MG PO TBCR	0591-2715-01	A9270	\$35.58	\$34.87	\$35.22	\$32.84	\$34.87
Inpatient/Outpatient	METHYLPHENIDATE HCL ER (OSM) 18 MG PO TBCR	0378-8155-01	A9270	\$29.35	\$28.76	\$29.06	\$27.09	\$28.76
Inpatient/Outpatient	METHYLPHENIDATE HCL ER (OSM) 18 MG PO TBCR	10147-0685-1	A9270	\$5.69	\$5.58	\$5.63	\$5.25	\$5.58
Inpatient/Outpatient	METHYLPHENIDATE HCL ER (OSM) 18 MG PO TBCR	16714-124-01	A9270	\$4.86	\$4.76	\$4.81	\$4.49	\$4.76
Inpatient/Outpatient	BUDESONIDE 0.25 MG/2ML IN SUSP	0186-1988-04	A9270	\$19.70	\$19.31	\$19.50	\$18.18	\$19.31
Inpatient/Outpatient	BUDESONIDE 0.25 MG/2ML IN SUSP	0093-6815-73	A9270	\$13.94	\$13.66	\$13.80	\$12.87	\$13.66
Inpatient/Outpatient	BUDESONIDE 0.25 MG/2ML IN SUSP	0487-9601-30	A9270	\$5.77	\$5.65	\$5.71	\$5.33	\$5.65
Inpatient/Outpatient	BUDESONIDE 0.25 MG/2ML IN SUSP	0781-7515-14	A9270	\$6.56	\$6.43	\$6.49	\$6.05	\$6.43
Inpatient/Outpatient	BUDESONIDE 0.25 MG/2ML IN SUSP	69097-318-87	A9270	\$6.89	\$6.75	\$6.82	\$6.36	\$6.75
Inpatient/Outpatient	BUDESONIDE 0.25 MG/2ML IN SUSP	0093-6815-19	A9270	\$17.06	\$16.72	\$16.89	\$15.75	\$16.72
Inpatient/Outpatient	BUDESONIDE 0.25 MG/2ML IN SUSP	76282-640-37	A9270	\$4.93	\$4.83	\$4.88	\$4.55	\$4.83
Inpatient/Outpatient	BUDESONIDE 0.25 MG/2ML IN SUSP	69097-318-86	A9270	\$3.30	\$3.23	\$3.27	\$3.05	\$3.23
Inpatient/Outpatient	BUDESONIDE 0.25 MG/2ML IN SUSP	16714-018-05	A9270	\$3.01	\$2.95	\$2.98	\$2.78	\$2.95
Inpatient/Outpatient	BUDESONIDE 0.25 MG/2ML IN SUSP	69097-318-32	A9270	\$6.47	\$6.34	\$6.41	\$5.97	\$6.34
Inpatient/Outpatient	BUDESONIDE 0.25 MG/2ML IN SUSP	0487-9601-01	A9270	\$9.70	\$9.51	\$9.60	\$8.95	\$9.51
Inpatient/Outpatient	BUDESONIDE 0.25 MG/2ML IN SUSP	47335-631-49	A9270	\$2.18	\$2.14	\$2.16	\$2.01	\$2.14
Inpatient/Outpatient	BUDESONIDE 0.5 MG/2ML IN SUSP	0093-6816-73	A9270	\$16.53	\$16.20	\$16.36	\$15.26	\$16.20
Inpatient/Outpatient	BUDESONIDE 0.5 MG/2ML IN SUSP	0186-1989-04	A9270	\$23.19	\$22.73	\$22.96	\$21.40	\$22.73
Inpatient/Outpatient	BUDESONIDE 0.5 MG/2ML IN SUSP	0487-9701-01	A9270	\$8.20	\$8.04	\$8.12	\$7.57	\$8.04
Inpatient/Outpatient	BUDESONIDE 0.5 MG/2ML IN SUSP	69097-319-87	A9270	\$3.18	\$3.12	\$3.15	\$2.94	\$3.12
Inpatient/Outpatient	BUDESONIDE 0.5 MG/2ML IN SUSP	69097-319-86	A9270	\$6.23	\$6.11	\$6.17	\$5.75	\$6.11
Inpatient/Outpatient	BUDESONIDE 0.5 MG/2ML IN SUSP	69097-319-32	A9270	\$3.27	\$3.20	\$3.24	\$3.02	\$3.20
Inpatient/Outpatient	BUDESONIDE 0.5 MG/2ML IN SUSP	68180-984-05	A9270	\$2.43	\$2.38	\$2.41	\$2.24	\$2.38
Inpatient/Outpatient	BUDESONIDE 0.5 MG/2ML IN SUSP	68180-984-30	A9270	\$2.43	\$2.38	\$2.41	\$2.24	\$2.38
Inpatient/Outpatient	BUDESONIDE 0.5 MG/2ML IN SUSP	0781-7516-87	A9270	\$3.28	\$3.21	\$3.25	\$3.03	\$3.21
Inpatient/Outpatient	BUDESONIDE 0.5 MG/2ML IN SUSP	0115-1689-74	A9270	\$1.88	\$1.84	\$1.86	\$1.74	\$1.84
Inpatient/Outpatient	NEOMYCIN-POLYMYXIN-HC 3.5-10000-1 OT SUSP	24208-635-62	A9270	\$24.14	\$23.66	\$23.90	\$22.28	\$23.66
Inpatient/Outpatient	NEOMYCIN-POLYMYXIN-HC 3.5-10000-1 OT SUSP	0574-4103-10	A9270	\$2.65	\$2.60	\$2.62	\$2.45	\$2.60
Inpatient/Outpatient	NEOMYCIN-POLYMYXIN-HC 3.5-10000-1 OT SUSP	61314-645-11	A9270	\$25.58	\$25.07	\$25.32	\$23.61	\$25.07
Inpatient/Outpatient	NEOMYCIN-POLYMYXIN-HC 3.5-10000-1 OT SUSP	64980-448-01	A9270	\$21.67	\$21.24	\$21.45	\$20.00	\$21.24
Inpatient/Outpatient	GLYCERIN LIQD	0395-1031-16	A9270	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	GLYCERIN LIQD	0395-1031-96	A9270	\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	HYDROCORTISONE (PERIANAL) 2.5 % EX CREA	64980-301-30	A9150	\$7.68	\$7.53	\$7.60	\$7.09	\$7.53
Inpatient/Outpatient	HYDROCORTISONE (PERIANAL) 2.5 % EX CREA	64980-324-30	A9150	\$0.94	\$0.92	\$0.93	\$0.87	\$0.92
Inpatient/Outpatient	HYDROCORTISONE (PERIANAL) 2.5 % EX CREA	62559-431-30	A9150	\$2.82	\$2.76	\$2.79	\$2.60	\$2.76
Inpatient/Outpatient	HYDROCORTISONE (PERIANAL) 2.5 % EX CREA	69315-302-30	A9150	\$10.56	\$10.35	\$10.45	\$9.75	\$10.35
Inpatient/Outpatient	HYDROCORTISONE (PERIANAL) 2.5 % EX CREA	69315-312-28	A9150	\$0.97	\$0.95	\$0.96	\$0.90	\$0.95
Inpatient/Outpatient	MAGNESIUM HYDROXIDE 400 MG/5ML PO SUSP	49348-965-44	A9150	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	MAGNESIUM HYDROXIDE 400 MG/5ML PO SUSP	0121-0431-30	A9150	\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	MAGNESIUM HYDROXIDE 400 MG/5ML PO SUSP	17856-778-03	A9150	\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	MAGNESIUM HYDROXIDE 400 MG/5ML PO SUSP	66689-053-01	A9150	\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	MAGNESIUM HYDROXIDE 400 MG/5ML PO SUSP	49348-171-38	A9150	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	CYCLOSPORINE MODIFIED 25 MG PO CAPS	0078-0246-15	J7515	\$10.20	\$10.00	\$10.10	\$9.41	\$10.00
Inpatient/Outpatient	CYCLOSPORINE MODIFIED 25 MG PO CAPS	0172-7310-46	J7515	\$6.68	\$6.55	\$6.61	\$6.17	\$6.55
Inpatient/Outpatient	CYCLOSPORINE MODIFIED 25 MG PO CAPS	0185-0932-30	J7515	\$2.42	\$2.37	\$2.40	\$2.23	\$2.37
Inpatient/Outpatient	CYCLOSPORINE MODIFIED 25 MG PO CAPS	51862-458-47	J7515	\$2.62	\$2.57	\$2.59	\$2.42	\$2.57
Inpatient/Outpatient	CYCLOSPORINE MODIFIED 25 MG PO CAPS	0185-0932-86	J7515	\$2.42	\$2.37	\$2.40	\$2.23	\$2.37
Inpatient/Outpatient	CYCLOSPORINE MODIFIED 25 MG PO CAPS	0093-5740-19	J7515	\$2.28	\$2.23	\$2.26	\$2.10	\$2.23
Inpatient/Outpatient	CYCLOSPORINE MODIFIED 25 MG PO CAPS	0074-3108-32	J7515	\$7.84	\$7.68	\$7.76	\$7.24	\$7.68
Inpatient/Outpatient	CYCLOSPORINE MODIFIED 25 MG PO CAPS	51862-458-01	J7515	\$3.48	\$3.41	\$3.45	\$3.21	\$3.41
Inpatient/Outpatient	CYCLOSPORINE MODIFIED 100 MG PO CAPS	0078-0248-15	J7502	\$38.74	\$37.97	\$38.35	\$35.76	\$37.97
Inpatient/Outpatient	CYCLOSPORINE MODIFIED 100 MG PO CAPS	0172-7312-46	J7502	\$26.71	\$26.18	\$26.44	\$24.65	\$26.18
Inpatient/Outpatient	CYCLOSPORINE MODIFIED 100 MG PO CAPS	0172-7312-00	J7502	\$7.94	\$7.78	\$7.86	\$7.33	\$7.78
Inpatient/Outpatient	CYCLOSPORINE MODIFIED 100 MG PO CAPS	0185-0933-30	J7502	\$7.40	\$7.25	\$7.33	\$6.83	\$7.25
Inpatient/Outpatient	CYCLOSPORINE MODIFIED 100 MG PO CAPS	0093-5742-65	J7502	\$7.48	\$7.33	\$7.41	\$6.90	\$7.33

Inpatient/Outpatient	CYCLOSPORINE MODIFIED 100 MG PO CAPS	0093-5742-19	J7502	\$7.20	\$7.06	\$7.13	\$6.65	\$7.06
Inpatient/Outpatient	CYCLOSPORINE MODIFIED 100 MG PO CAPS	60505-4632-3	J7502	\$6.98	\$6.84	\$6.91	\$6.44	\$6.84
Inpatient/Outpatient	CYCLOSPORINE MODIFIED 100 MG PO CAPS	0093-9020-19	J7502	\$7.27	\$7.12	\$7.20	\$6.71	\$7.12
Inpatient/Outpatient	CYCLOSPORINE MODIFIED 100 MG/ML PO SOLN	60505-0354-1	J7502	\$8.94	\$8.76	\$8.85	\$8.25	\$8.76
Inpatient/Outpatient	CYCLOSPORINE MODIFIED 100 MG/ML PO SOLN	0078-0274-22	J7502	\$44.41	\$43.52	\$43.97	\$40.99	\$43.52
Inpatient/Outpatient	HYDROCORT-PRAMOXINE (PERIANAL) 1-1 % EX FOAM	68220-142-10	A9270	\$32.32	\$31.67	\$32.00	\$29.83	\$31.67
Inpatient/Outpatient	HYDROCORT-PRAMOXINE (PERIANAL) 1-1 % EX FOAM	0037-6822-10	A9270	\$71.04	\$69.62	\$70.33	\$65.57	\$69.62
Inpatient/Outpatient	DEXTROSE 70 % IV SOLN	0409-7120-07		\$0.04	\$0.04	\$0.04	\$0.04	\$0.04
Inpatient/Outpatient	DEXTROSE 70 % IV SOLN	0338-0719-06		\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	FLUCYTOSINE 500 MG PO CAPS	0054-0428-25		\$57.06	\$55.92	\$56.49	\$52.67	\$55.92
Inpatient/Outpatient	SODIUM HYALURONATE 5.5 MG/0.55ML IO SOSY	8065-183055	A9270	\$391.54	\$387.71	\$387.62	\$361.39	\$383.71
Inpatient/Outpatient	NA CHONDRONIT SULF-NA HYALURON 20-15 MG/0.5ML IO SOSY	8065-183905		\$415.82	\$407.50	\$411.66	\$383.80	\$407.50
Inpatient/Outpatient	MENTHOL (TOPICAL ANALGESIC) 2.5 % EX GEL	74300-00539	A9150	\$0.32	\$0.31	\$0.32	\$0.30	\$0.31
Inpatient/Outpatient	MENTHOL (TOPICAL ANALGESIC) 2.5 % EX GEL	74300-08197	A9150	\$0.32	\$0.31	\$0.32	\$0.30	\$0.31
Inpatient/Outpatient	SIROLIMUS 1 MG PO TABS	0008-1041-10	J7520	\$155.81	\$152.69	\$154.25	\$143.81	\$152.69
Inpatient/Outpatient	SIROLIMUS 1 MG PO TABS	50268-718-11	J7520	\$42.66	\$41.81	\$42.23	\$39.38	\$41.81
Inpatient/Outpatient	SIROLIMUS 1 MG PO TABS	68084-915-95	J7520	\$36.34	\$35.61	\$35.98	\$33.54	\$35.61
Inpatient/Outpatient	SIROLIMUS 1 MG PO TABS	68084-915-25	J7520	\$52.50	\$51.45	\$51.98	\$48.46	\$51.45
Inpatient/Outpatient	LEVOFLOXACIN 750 MG PO TABS	0093-7293-53	A9270	\$4.98	\$4.88	\$4.93	\$4.60	\$4.88
Inpatient/Outpatient	LEVOFLOXACIN 750 MG PO TABS	68084-483-11	A9270	\$3.15	\$3.09	\$3.12	\$2.91	\$3.09
Inpatient/Outpatient	LEVOFLOXACIN 750 MG PO TABS	31722-723-20	A9270	\$1.15	\$1.13	\$1.14	\$1.06	\$1.13
Inpatient/Outpatient	LEVOFLOXACIN 750 MG PO TABS	0904-6353-61	A9270	\$1.82	\$1.78	\$1.80	\$1.68	\$1.78
Inpatient/Outpatient	LEVOFLOXACIN 750 MG PO TABS	55111-281-30	A9270	\$0.97	\$0.95	\$0.96	\$0.90	\$0.95
Inpatient/Outpatient	METFORMIN HCL ER 500 MG PO TB24	60505-0260-1	A9270	\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	METFORMIN HCL ER 500 MG PO TB24	0087-6063-13	A9270	\$4.55	\$4.46	\$4.50	\$4.20	\$4.46
Inpatient/Outpatient	METFORMIN HCL ER 500 MG PO TB24	0093-7267-01	A9270	\$0.60	\$0.59	\$0.59	\$0.55	\$0.59
Inpatient/Outpatient	METFORMIN HCL ER 500 MG PO TB24	62756-142-01	A9270	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	METFORMIN HCL ER 500 MG PO TB24	53746-178-01	A9270	\$0.39	\$0.38	\$0.39	\$0.36	\$0.38
Inpatient/Outpatient	METFORMIN HCL ER 500 MG PO TB24	0781-5503-01	A9270	\$1.37	\$1.34	\$1.36	\$1.26	\$1.34
Inpatient/Outpatient	METFORMIN HCL ER 500 MG PO TB24	0904-5794-61	A9270	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	METFORMIN HCL ER 500 MG PO TB24	70010-491-01	A9270	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	METFORMIN HCL ER 500 MG PO TB24	50268-531-11	A9270	\$0.93	\$0.91	\$0.92	\$0.86	\$0.91
Inpatient/Outpatient	METFORMIN HCL ER 500 MG PO TB24	60687-640-11	A9270	\$1.64	\$1.61	\$1.62	\$1.51	\$1.61
Inpatient/Outpatient	DEXAMETHASONE SODIUM PHOSPHATE 100 MG/10ML IJ SOLN	63323-516-10	J1100	\$1.17	\$1.15	\$1.16	\$1.08	\$1.15
Inpatient/Outpatient	FEBUXOSTAT 40 MG PO TABS	64764-918-30	A9270	\$49.76	\$48.76	\$49.26	\$45.93	\$48.76
Inpatient/Outpatient	FEBUXOSTAT 40 MG PO TABS	0378-3925-93	A9270	\$12.30	\$12.05	\$12.18	\$11.35	\$12.05
Inpatient/Outpatient	FEBUXOSTAT 40 MG PO TABS	72205-028-30	A9270	\$2.84	\$2.78	\$2.81	\$2.62	\$2.78
Inpatient/Outpatient	FEBUXOSTAT 40 MG PO TABS	62332-190-30	A9270	\$7.99	\$7.83	\$7.91	\$7.37	\$7.83
Inpatient/Outpatient	FEBUXOSTAT 40 MG PO TABS	16714-059-01	A9270	\$1.01	\$0.99	\$1.00	\$0.93	\$0.99
Inpatient/Outpatient	GABAPENTIN 250 MG/5 ML PO SOLN (300 MG/6 ML)	0071-2012-23	A9270	\$3.83	\$3.75	\$3.79	\$3.54	\$3.75
Inpatient/Outpatient	GABAPENTIN 250 MG/5 ML PO SOLN (300 MG/6 ML)	50383-311-09	A9270	\$1.51	\$1.48	\$1.49	\$1.39	\$1.48
Inpatient/Outpatient	GABAPENTIN 250 MG/5 ML PO SOLN (300 MG/6 ML)	50383-311-06	A9270	\$0.40	\$0.39	\$0.40	\$0.37	\$0.39
Inpatient/Outpatient	GABAPENTIN 250 MG/5 ML PO SOLN (300 MG/6 ML)	42192-608-16	A9270	\$0.34	\$0.33	\$0.34	\$0.31	\$0.33
Inpatient/Outpatient	GABAPENTIN 250 MG/5 ML PO SOLN (300 MG/6 ML)	99999-311-06	A9270	\$1.15	\$1.13	\$1.14	\$1.06	\$1.13
Inpatient/Outpatient	DILTIAZEM HCL ER COATED BEADS 120 MG PO CP24	60687-195-11	A9270	\$1.47	\$1.44	\$1.46	\$1.36	\$1.44
Inpatient/Outpatient	DILTIAZEM HCL ER COATED BEADS 120 MG PO CP24	62037-597-90	A9270	\$1.26	\$1.23	\$1.25	\$1.16	\$1.23
Inpatient/Outpatient	DILTIAZEM HCL ER COATED BEADS 120 MG PO CP24	68682-993-98	A9270	\$1.56	\$1.53	\$1.54	\$1.44	\$1.53
Inpatient/Outpatient	DILTIAZEM HCL ER COATED BEADS 120 MG PO CP24	10370-829-09	A9270	\$1.25	\$1.23	\$1.24	\$1.15	\$1.23
Inpatient/Outpatient	DILTIAZEM HCL ER COATED BEADS 180 MG PO CP24	60687-206-11	A9270	\$1.11	\$1.09	\$1.10	\$1.02	\$1.09
Inpatient/Outpatient	DILTIAZEM HCL ER COATED BEADS 180 MG PO CP24	63304-719-90	A9270	\$0.87	\$0.85	\$0.86	\$0.80	\$0.85
Inpatient/Outpatient	DILTIAZEM HCL ER COATED BEADS 180 MG PO CP24	42291-185-90	A9270	\$0.75	\$0.74	\$0.74	\$0.69	\$0.74
Inpatient/Outpatient	DILTIAZEM HCL ER COATED BEADS 240 MG PO CP24	60687-217-11	A9270	\$1.60	\$1.57	\$1.58	\$1.48	\$1.57
Inpatient/Outpatient	DILTIAZEM HCL ER COATED BEADS 240 MG PO CP24	62037-599-90	A9270	\$1.94	\$1.90	\$1.92	\$1.79	\$1.90
Inpatient/Outpatient	DILTIAZEM HCL ER COATED BEADS 240 MG PO CP24	63739-016-10	A9270	\$1.58	\$1.55	\$1.56	\$1.46	\$1.55
Inpatient/Outpatient	DILTIAZEM HCL ER COATED BEADS 300 MG PO CP24	62037-600-90	A9270	\$1.49	\$1.46	\$1.48	\$1.38	\$1.46
Inpatient/Outpatient	DILTIAZEM HCL ER COATED BEADS 300 MG PO CP24	60687-228-11	A9270	\$5.55	\$5.44	\$5.49	\$5.12	\$5.44
Inpatient/Outpatient	DOPAMINE INFUSION 1600 MCG/ML IN D5W (STANDARD CONC) PREMIX	0409-7809-22	J1265	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	DOPAMINE INFUSION 1600 MCG/ML IN D5W (STANDARD CONC) PREMIX	0338-1007-02	J1265	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	DOPAMINE INFUSION 1600 MCG/ML IN D5W (STANDARD CONC) PREMIX	99999-7809-5	J1265	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	PREDNISOLONE SODIUM PHOSPHATE 15 MG/5ML PO SOLN	0121-0759-08	J7510	\$0.60	\$0.59	\$0.59	\$0.55	\$0.59
Inpatient/Outpatient	PREDNISOLONE SODIUM PHOSPHATE 15 MG/5ML PO SOLN	60432-212-08	J7510	\$0.60	\$0.59	\$0.59	\$0.55	\$0.59
Inpatient/Outpatient	PREDNISOLONE SODIUM PHOSPHATE 15 MG/5ML PO SOLN	17856-759-05	J7510	\$8.44	\$8.27	\$8.36	\$7.79	\$8.27
Inpatient/Outpatient	CROTALIDAE POLYVAL IMMUNE FAB IV SOLR	50633-110-12	J0840	\$6,094.07	\$5,972.19	\$6,033.13	\$5,624.83	\$5,972.19
Inpatient/Outpatient	ZINC OXIDE 40 % EX PSTE	58232-072-11	A9150	\$0.47	\$0.46	\$0.47	\$0.43	\$0.46
Inpatient/Outpatient	BIVALIRUDIN TRIFLUOROACETATE 250 MG IV SOLR	0781-3158-94	J0583	\$355.07	\$347.97	\$351.52	\$327.73	\$347.97
Inpatient/Outpatient	BIVALIRUDIN TRIFLUOROACETATE 250 MG IV SOLR	63323-562-10	J0583	\$353.66	\$349.53	\$353.09	\$329.20	\$349.53
Inpatient/Outpatient	BIVALIRUDIN TRIFLUOROACETATE 250 MG IV SOLR	63323-562-41	J0583	\$507.61	\$497.46	\$502.53	\$468.52	\$497.46
Inpatient/Outpatient	BIVALIRUDIN TRIFLUOROACETATE 250 MG IV SOLR	16729-275-03	J0583	\$347.98	\$341.02	\$344.50	\$321.19	\$341.02

Inpatient/Outpatient	BIVALIRUDIN TRIFLUOROACETATE 250 MG IV SOLR	0409-8300-20	J0583		\$339.24	\$332.46	\$335.85	\$313.12	\$332.46
Inpatient/Outpatient	CLOTRIMAZOLE-BETAMETHASONE 1-0.05 % EX CREA	0168-0258-15	A9270		\$4.39	\$4.30	\$4.35	\$4.05	\$4.30
Inpatient/Outpatient	CLOTRIMAZOLE-BETAMETHASONE 1-0.05 % EX CREA	51672-4048-1	A9270		\$5.46	\$5.35	\$5.41	\$5.04	\$5.35
Inpatient/Outpatient	CLOTRIMAZOLE-BETAMETHASONE 1-0.05 % EX CREA	0472-0379-15	A9270		\$8.60	\$8.43	\$8.51	\$7.94	\$8.43
Inpatient/Outpatient	CLOTRIMAZOLE-BETAMETHASONE 1-0.05 % EX CREA	16714-496-01	A9270		\$1.23	\$1.21	\$1.22	\$1.14	\$1.21
Inpatient/Outpatient	CLOTRIMAZOLE-BETAMETHASONE 1-0.05 % EX CREA	66993-898-15	A9270		\$8.43	\$8.26	\$8.35	\$7.78	\$8.26
Inpatient/Outpatient	ALTEPLASE (PE) IV BOLUS DOSE - 50 MG	50242-044-13	J2997		\$8,395.26	\$8,227.35	\$8,311.31	\$7,748.82	\$8,227.35
Inpatient/Outpatient	CEFDINIR 125 MG/5ML PO SUSP CUSTOM DOSE	0781-6077-61	A9270		\$0.66	\$0.65	\$0.65	\$0.61	\$0.65
Inpatient/Outpatient	CEFDINIR 125 MG/5ML PO SUSP CUSTOM DOSE	0093-4136-64	A9270		\$3.10	\$3.04	\$3.07	\$2.86	\$3.04
Inpatient/Outpatient	CEFDINIR 125 MG/5ML PO SUSP CUSTOM DOSE	68180-722-20	A9270		\$2.01	\$1.97	\$1.99	\$1.86	\$1.97
Inpatient/Outpatient	CEFDINIR 125 MG/5ML PO SUSP CUSTOM DOSE	65862-218-60	A9270		\$1.62	\$1.59	\$1.60	\$1.50	\$1.59
Inpatient/Outpatient	TACROLIMUS 0.03 % EX OINT	0469-5201-30	A9270		\$27.09	\$26.55	\$26.82	\$25.00	\$26.55
Inpatient/Outpatient	INSULIN LISPRO (HUMAN) 100 UNIT/ML SLIDING SCALE	0002-7510-17	J1815		\$23.41	\$22.94	\$23.18	\$21.61	\$22.94
Inpatient/Outpatient	SEVELAMER CARBONATE 0.8 G PO PACK	43598-478-90	A9270		\$33.73	\$33.06	\$33.39	\$31.13	\$33.06
Inpatient/Outpatient	SEVELAMER CARBONATE 0.8 G PO PACK	43598-478-01	A9270		\$35.56	\$34.85	\$35.20	\$32.82	\$34.85
Inpatient/Outpatient	SEVELAMER CARBONATE 0.8 G PO PACK	58468-0132-1	A9270		\$76.71	\$75.18	\$75.94	\$70.80	\$75.18
Inpatient/Outpatient	SEVELAMER CARBONATE 0.8 G PO PACK	58468-0132-2	A9270		\$80.73	\$79.12	\$79.92	\$74.51	\$79.12
Inpatient/Outpatient	SEVELAMER CARBONATE 0.8 G PO PACK	0955-1052-01	A9270		\$39.54	\$38.75	\$39.14	\$36.50	\$38.75
Inpatient/Outpatient	SEVELAMER CARBONATE 0.8 G PO PACK	65862-930-08	A9270		\$27.16	\$26.62	\$26.89	\$25.07	\$26.62
Inpatient/Outpatient	FAMOTIDINE 40 MG/4ML IV SOLN	63323-738-09	J3490		\$1.83	\$1.79	\$1.81	\$1.69	\$1.79
Inpatient/Outpatient	M.V.I. PEDIATRIC IV SOLR	61703-421-53			\$54.43	\$53.34	\$53.89	\$50.24	\$53.34
Inpatient/Outpatient	ZIPRASIDONE HCL 20 MG PO CAPS	0049-3960-41	A9270		\$45.58	\$44.67	\$45.12	\$42.07	\$44.67
Inpatient/Outpatient	ZIPRASIDONE HCL 20 MG PO CAPS	68084-103-11	A9270		\$2.31	\$2.26	\$2.29	\$2.13	\$2.26
Inpatient/Outpatient	ZIPRASIDONE HCL 20 MG PO CAPS	0904-6269-45	A9270		\$8.93	\$8.75	\$8.84	\$8.24	\$8.75
Inpatient/Outpatient	ZIPRASIDONE HCL 40 MG PO CAPS	0049-3970-41	A9270		\$45.58	\$44.67	\$45.12	\$42.07	\$44.67
Inpatient/Outpatient	ZIPRASIDONE HCL 40 MG PO CAPS	0904-6270-08	A9270		\$13.28	\$13.01	\$13.15	\$12.26	\$13.01
Inpatient/Outpatient	ZIPRASIDONE HCL 40 MG PO CAPS	0904-6270-45	A9270		\$8.92	\$8.74	\$8.83	\$8.23	\$8.74
Inpatient/Outpatient	ZIPRASIDONE HCL 40 MG PO CAPS	68084-104-11	A9270		\$11.45	\$11.22	\$11.34	\$10.57	\$11.22
Inpatient/Outpatient	ESMOLOL INFUSION 10 MG/ML IN 250 ML NS PREMIX (TITRATED)	10019-055-61			\$1.84	\$1.80	\$1.82	\$1.70	\$1.80
Inpatient/Outpatient	ESMOLOL INFUSION 10 MG/ML IN 250 ML NS PREMIX (TITRATED)	10019-670-10			\$1.84	\$1.80	\$1.82	\$1.70	\$1.80
Inpatient/Outpatient	ESMOLOL INFUSION 10 MG/ML IN 250 ML NS PREMIX (TITRATED)	25021-308-84			\$6.28	\$6.15	\$6.22	\$5.80	\$6.15
Inpatient/Outpatient	GALANTAMINE HYDROBROMIDE 4 MG PO TABS	50458-396-60	A9270		\$24.23	\$23.75	\$23.99	\$22.36	\$23.75
Inpatient/Outpatient	GALANTAMINE HYDROBROMIDE 4 MG PO TABS	0555-0138-09	A9270		\$10.06	\$9.86	\$9.96	\$9.29	\$9.86
Inpatient/Outpatient	GALANTAMINE HYDROBROMIDE 4 MG PO TABS	10147-0881-6	A9270		\$1.95	\$1.91	\$1.93	\$1.80	\$1.91
Inpatient/Outpatient	GALANTAMINE HYDROBROMIDE 4 MG PO TABS	51079-852-01	A9270		\$6.91	\$6.77	\$6.84	\$6.38	\$6.77
Inpatient/Outpatient	GALANTAMINE HYDROBROMIDE 4 MG PO TABS	68084-729-11	A9270		\$11.44	\$11.21	\$11.33	\$10.56	\$11.21
Inpatient/Outpatient	GALANTAMINE HYDROBROMIDE 4 MG PO TABS	65862-458-60	A9270		\$3.17	\$3.11	\$3.14	\$2.93	\$3.11
Inpatient/Outpatient	METOPROLOL SUCCINATE ER 25 MG PO TB24	0186-1088-39	A9270		\$5.51	\$5.40	\$5.45	\$5.09	\$5.40
Inpatient/Outpatient	METOPROLOL SUCCINATE ER 25 MG PO TB24	0904-6169-61	A9270		\$4.20	\$4.12	\$4.16	\$3.88	\$4.12
Inpatient/Outpatient	METOPROLOL SUCCINATE ER 25 MG PO TB24	68084-303-11	A9270		\$4.35	\$4.26	\$4.31	\$4.02	\$4.26
Inpatient/Outpatient	METOPROLOL SUCCINATE ER 25 MG PO TB24	0904-6322-61	A9270		\$1.60	\$1.57	\$1.58	\$1.48	\$1.57
Inpatient/Outpatient	METOPROLOL SUCCINATE ER 25 MG PO TB24	60687-390-11	A9270		\$1.61	\$1.58	\$1.59	\$1.49	\$1.58
Inpatient/Outpatient	METOPROLOL SUCCINATE ER 25 MG PO TB24	51079-169-01	A9270		\$1.55	\$1.52	\$1.53	\$1.43	\$1.52
Inpatient/Outpatient	METOPROLOL SUCCINATE ER 25 MG PO TB24	16714-852-02	A9270		\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	METOPROLOL SUCCINATE ER 25 MG PO TB24	16714-852-01	A9270		\$0.87	\$0.85	\$0.86	\$0.80	\$0.85
Inpatient/Outpatient	METOPROLOL SUCCINATE ER 25 MG PO TB24	67877-590-01	A9270		\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	METOPROLOL SUCCINATE ER 25 MG PO TB24	31722-589-01	A9270		\$1.22	\$1.20	\$1.21	\$1.13	\$1.20
Inpatient/Outpatient	SODIUM CHLORIDE FLUSH 0.9 % IV SOLN	8290-306553			\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	SODIUM CHLORIDE FLUSH 0.9 % IV SOLN	8290-306550			\$0.49	\$0.48	\$0.49	\$0.45	\$0.48
Inpatient/Outpatient	SODIUM CHLORIDE FLUSH 0.9 % IV SOLN	8290-306549			\$0.92	\$0.90	\$0.91	\$0.85	\$0.90
Inpatient/Outpatient	SODIUM CHLORIDE FLUSH 0.9 % IV SOLN	8290-306546			\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	SODIUM CHLORIDE FLUSH 0.9 % IV SOLN	99999-306-05			\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	SODIUM CHLORIDE FLUSH 0.9 % IV SOLN	99999-306-10			\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	SONAFINE EX EMUL	0062-0205-02			\$3.13	\$3.07	\$3.10	\$2.89	\$3.07
Inpatient/Outpatient	SONAFINE EX EMUL	58980-960-12			\$2.31	\$2.26	\$2.29	\$2.13	\$2.26
Inpatient/Outpatient	SONAFINE EX EMUL	13811-565-45			\$1.93	\$1.89	\$1.91	\$1.78	\$1.89
Inpatient/Outpatient	METOPROLOL SUCCINATE ER 50 MG PO TB24	0186-1090-39	A9270		\$5.53	\$5.42	\$5.47	\$5.10	\$5.42
Inpatient/Outpatient	METOPROLOL SUCCINATE ER 50 MG PO TB24	68084-304-11	A9270		\$4.34	\$4.25	\$4.30	\$4.01	\$4.25
Inpatient/Outpatient	METOPROLOL SUCCINATE ER 50 MG PO TB24	51079-170-01	A9270		\$3.65	\$3.58	\$3.61	\$3.37	\$3.58
Inpatient/Outpatient	METOPROLOL SUCCINATE ER 50 MG PO TB24	0904-6323-61	A9270		\$1.52	\$1.49	\$1.50	\$1.40	\$1.49
Inpatient/Outpatient	METOPROLOL SUCCINATE ER 50 MG PO TB24	60687-402-11	A9270		\$1.61	\$1.58	\$1.59	\$1.49	\$1.58
Inpatient/Outpatient	METOPROLOL SUCCINATE ER 50 MG PO TB24	67877-591-01	A9270		\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	METOPROLOL SUCCINATE ER 100 MG PO TB24	0186-1092-39	A9270		\$8.31	\$8.14	\$8.23	\$7.67	\$8.14
Inpatient/Outpatient	METOPROLOL SUCCINATE ER 100 MG PO TB24	68084-301-11	A9270		\$5.64	\$5.53	\$5.58	\$5.21	\$5.53
Inpatient/Outpatient	METOPROLOL SUCCINATE ER 100 MG PO TB24	63739-454-10	A9270		\$4.00	\$3.92	\$3.96	\$3.69	\$3.92
Inpatient/Outpatient	METOPROLOL SUCCINATE ER 100 MG PO TB24	0904-6324-61	A9270		\$2.58	\$2.53	\$2.55	\$2.38	\$2.53
Inpatient/Outpatient	METOPROLOL SUCCINATE ER 100 MG PO TB24	60687-413-11	A9270		\$2.64	\$2.59	\$2.61	\$2.44	\$2.59
Inpatient/Outpatient	METOPROLOL SUCCINATE ER 100 MG PO TB24	16714-854-01	A9270		\$0.82	\$0.80	\$0.81	\$0.76	\$0.80

Inpatient/Outpatient	METOPROLOL SUCCINATE ER 100 MG PO TB24	67877-592-01	A9270	\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	TOLNAFTATE 1 % EX POWD	0536-5150-26		\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	TOLNAFTATE 1 % EX POWD	0536-1329-26		\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	TRACE MINERALS CRCUMNZN (MTE-4 PEDIATRIC) IV SOLN	0517-9203-25		\$15.45	\$15.14	\$15.30	\$14.26	\$15.14
Inpatient/Outpatient	INFUVITE ADULT IV INJ	54643-5649-1		\$3.94	\$3.86	\$3.90	\$3.64	\$3.86
Inpatient/Outpatient	INFUVITE ADULT IV INJ	54643-7862-1		\$0.39	\$0.38	\$0.39	\$0.36	\$0.38
Inpatient/Outpatient	LISDEXAMFETAMINE DIMESYLATE 30 MG PO CAPS	59417-103-10		\$53.03	\$51.97	\$52.50	\$48.95	\$51.97
Inpatient/Outpatient	OXCARBAZEPINE 300 MG/5ML PO SUSP	0078-0357-52	A9270	\$7.28	\$7.13	\$7.21	\$6.72	\$7.13
Inpatient/Outpatient	OXCARBAZEPINE 300 MG/5ML PO SUSP	0054-0199-59	A9270	\$2.99	\$2.93	\$2.96	\$2.76	\$2.93
Inpatient/Outpatient	OXCARBAZEPINE 300 MG/5ML PO SUSP	0781-6270-43	A9270	\$3.22	\$3.16	\$3.19	\$2.97	\$3.16
Inpatient/Outpatient	OXCARBAZEPINE 300 MG/5ML PO SUSP	65162-649-78	A9270	\$1.47	\$1.44	\$1.46	\$1.36	\$1.44
Inpatient/Outpatient	OXCARBAZEPINE 300 MG/5ML PO SUSP	50383-312-84	A9270	\$1.34	\$1.31	\$1.33	\$1.24	\$1.31
Inpatient/Outpatient	PACLITAXEL 30 MG/5ML IV CONC	0703-4764-01	J9267	\$3.85	\$3.77	\$3.81	\$3.55	\$3.77
Inpatient/Outpatient	PACLITAXEL 100 MG/16.7ML IV CONC	0703-4766-81	J9267	\$3.52	\$3.45	\$3.48	\$3.25	\$3.45
Inpatient/Outpatient	PACLITAXEL 100 MG/16.7ML IV CONC	0703-4766-01	J9267	\$3.52	\$3.45	\$3.48	\$3.25	\$3.45
Inpatient/Outpatient	PACLITAXEL 100 MG/16.7ML IV CONC	61703-342-22	J9267	\$7.37	\$7.22	\$7.30	\$6.80	\$7.22
Inpatient/Outpatient	PACLITAXEL 100 MG/16.7ML IV CONC	0703-3216-01	J9267	\$3.23	\$3.17	\$3.20	\$2.98	\$3.17
Inpatient/Outpatient	PACLITAXEL 100 MG/16.7ML IV CONC	0703-3216-81	J9267	\$3.23	\$3.17	\$3.20	\$2.98	\$3.17
Inpatient/Outpatient	BRIMONIDINE TARTRATE 0.15 % OP SOLN	0023-9177-05	A9270	\$178.60	\$175.03	\$176.81	\$164.85	\$175.03
Inpatient/Outpatient	BRIMONIDINE TARTRATE 0.15 % OP SOLN	61314-144-05	A9270	\$138.68	\$135.91	\$137.29	\$128.00	\$135.91
Inpatient/Outpatient	BRIMONIDINE TARTRATE 0.15 % OP SOLN	60505-0564-1	A9270	\$103.68	\$101.61	\$102.64	\$95.70	\$101.61
Inpatient/Outpatient	BRIMONIDINE TARTRATE 0.15 % OP SOLN	82182-773-05	A9270	\$94.19	\$92.31	\$93.25	\$86.94	\$92.31
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE 600-42.9 MG/5ML PO SUSR	0093-8675-78	A9270	\$1.87	\$1.83	\$1.85	\$1.73	\$1.83
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE 600-42.9 MG/5ML PO SUSR	0781-6139-48	A9270	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE 600-42.9 MG/5ML PO SUSR	0143-9853-24	A9270	\$0.97	\$0.95	\$0.96	\$0.90	\$0.95
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE 600-42.9 MG/5ML PO SUSR	16714-294-01	A9270	\$0.41	\$0.40	\$0.41	\$0.38	\$0.40
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE 600-42.9 MG/5ML PO SUSR	65862-535-75	A9270	\$0.32	\$0.31	\$0.32	\$0.30	\$0.31
Inpatient/Outpatient	NITROGLYCERIN 2 % TD OINT	0281-0326-08	A9270	\$9.97	\$9.77	\$9.87	\$9.20	\$9.77
Inpatient/Outpatient	NITROGLYCERIN 2 % TD OINT	0281-0326-30	A9270	\$5.13	\$5.03	\$5.08	\$4.73	\$5.03
Inpatient/Outpatient	NALOXONE HCL 4 MG/10ML IJ SOLN	17478-042-10		\$27.51	\$26.96	\$27.23	\$25.39	\$26.96
Inpatient/Outpatient	AMPICILLIN-SULBACTAM SODIUM 15 (10-5) G IV SOLR	0049-0024-28	J0295	\$93.85	\$91.97	\$92.91	\$86.62	\$91.97
Inpatient/Outpatient	AMPICILLIN-SULBACTAM SODIUM 15 (10-5) G IV SOLR	25021-188-99	J0295	\$248.93	\$243.95	\$246.44	\$229.76	\$243.95
Inpatient/Outpatient	AMPICILLIN-SULBACTAM SODIUM 15 (10-5) G IV SOLR	44567-212-01	J0295	\$340.49	\$333.68	\$337.09	\$314.27	\$333.68
Inpatient/Outpatient	AMPICILLIN-SULBACTAM SODIUM 15 (10-5) G IV SOLR	25021-144-99	J0295	\$272.16	\$266.72	\$269.44	\$251.20	\$266.72
Inpatient/Outpatient	CETIRIZINE-PSEUDOEPHEDRINE ER 5-120 MG PO TB12	50580-728-52	A9150	\$3.08	\$3.02	\$3.05	\$2.84	\$3.02
Inpatient/Outpatient	CETIRIZINE-PSEUDOEPHEDRINE ER 5-120 MG PO TB12	45802-721-62	A9150	\$2.01	\$1.97	\$1.99	\$1.86	\$1.97
Inpatient/Outpatient	CETIRIZINE-PSEUDOEPHEDRINE ER 5-120 MG PO TB12	45802-147-62	A9150	\$2.72	\$2.67	\$2.69	\$2.51	\$2.67
Inpatient/Outpatient	ALTEPLASE 2 MG IJ SOLR	50242-041-64	J2997	\$510.03	\$499.83	\$504.93	\$470.76	\$499.83
Inpatient/Outpatient	BUDESONIDE 3 MG PO CPEP	51079-020-03	A9270	\$58.58	\$58.39	\$58.98	\$54.99	\$58.39
Inpatient/Outpatient	BUDESONIDE 3 MG PO CPEP	0378-7155-01	A9270	\$19.03	\$18.65	\$18.84	\$17.56	\$18.65
Inpatient/Outpatient	BUDESONIDE 3 MG PO CPEP	49884-501-01	A9270	\$53.49	\$52.42	\$52.96	\$49.37	\$52.42
Inpatient/Outpatient	BUDESONIDE 3 MG PO CPEP	51079-020-01	A9270	\$67.23	\$65.89	\$66.56	\$62.05	\$65.89
Inpatient/Outpatient	BUDESONIDE 3 MG PO CPEP	51862-582-01	A9270	\$17.35	\$17.00	\$17.18	\$16.01	\$17.00
Inpatient/Outpatient	BUDESONIDE 3 MG PO CPEP	16714-829-01	A9270	\$2.29	\$2.24	\$2.27	\$2.11	\$2.24
Inpatient/Outpatient	BUDESONIDE 3 MG PO CPEP	51862-580-01	A9270	\$33.27	\$32.60	\$32.94	\$30.71	\$32.60
Inpatient/Outpatient	BUDESONIDE 3 MG PO CPEP	65162-778-10	A9270	\$2.39	\$2.34	\$2.37	\$2.21	\$2.34
Inpatient/Outpatient	BUDESONIDE 3 MG PO CPEP	0574-9855-10	A9270	\$2.52	\$2.47	\$2.49	\$2.33	\$2.47
Inpatient/Outpatient	AMPHETAMINE-DEXTROAMPHET ER 10 MG PO CP24	54092-383-01	A9270	\$32.24	\$31.60	\$31.92	\$29.76	\$31.60
Inpatient/Outpatient	AMPHETAMINE-DEXTROAMPHET ER 10 MG PO CP24	0555-0787-02	A9270	\$19.42	\$19.03	\$19.23	\$17.92	\$19.03
Inpatient/Outpatient	AMPHETAMINE-DEXTROAMPHET ER 10 MG PO CP24	0115-1329-01	A9270	\$29.80	\$29.20	\$29.50	\$27.51	\$29.20
Inpatient/Outpatient	AMPHETAMINE-DEXTROAMPHET ER 10 MG PO CP24	66993-595-02	A9270	\$5.27	\$5.16	\$5.22	\$4.86	\$5.16
Inpatient/Outpatient	AMPHETAMINE-DEXTROAMPHET ER 10 MG PO CP24	0115-1487-01	A9270	\$3.39	\$3.32	\$3.36	\$3.13	\$3.32
Inpatient/Outpatient	AMPHETAMINE-DEXTROAMPHET ER 10 MG PO CP24	0228-3059-11	A9270	\$4.75	\$4.66	\$4.70	\$4.38	\$4.66
Inpatient/Outpatient	AMPHETAMINE-DEXTROAMPHET ER 30 MG PO CP24	54092-391-01	A9270	\$32.34	\$31.69	\$32.02	\$29.85	\$31.69
Inpatient/Outpatient	AMPHETAMINE-DEXTROAMPHET ER 30 MG PO CP24	0555-0789-02	A9270	\$23.84	\$23.36	\$23.60	\$22.00	\$23.36
Inpatient/Outpatient	AMPHETAMINE-DEXTROAMPHET ER 30 MG PO CP24	0228-3061-11	A9270	\$4.75	\$4.66	\$4.70	\$4.38	\$4.66
Inpatient/Outpatient	AMPHETAMINE-DEXTROAMPHET ER 30 MG PO CP24	42858-930-01	A9270	\$2.92	\$2.86	\$2.89	\$2.70	\$2.86
Inpatient/Outpatient	TENOFOVIR DISOPROXIL FUMARATE 300 MG PO TABS	61958-0401-1	A9270	\$189.10	\$185.32	\$187.21	\$174.54	\$185.32
Inpatient/Outpatient	TENOFOVIR DISOPROXIL FUMARATE 300 MG PO TABS	69097-533-02	A9270	\$4.34	\$4.25	\$4.30	\$4.01	\$4.25
Inpatient/Outpatient	TENOFOVIR DISOPROXIL FUMARATE 300 MG PO TABS	16714-820-01	A9270	\$1.61	\$1.58	\$1.59	\$1.49	\$1.58
Inpatient/Outpatient	INSULIN REGULAR INFUSION 1 UNIT/ML (ED/OR) PREMIX	99999-8215-1	J1817	\$18.23	\$17.87	\$18.05	\$16.83	\$17.87
Inpatient/Outpatient	DEXMETHYLPHENIDATE HCL 5 MG PO TABS	0078-0381-05	A9270	\$4.10	\$4.06	\$4.06	\$3.78	\$4.02
Inpatient/Outpatient	OXYCODONE-ACETAMINOPHEN 7.5-325 MG PO TABS	0406-0522-62	A9270	\$7.79	\$7.63	\$7.71	\$7.19	\$7.63
Inpatient/Outpatient	OXYCODONE-ACETAMINOPHEN 7.5-325 MG PO TABS	0406-0522-01	A9270	\$2.49	\$2.44	\$2.47	\$2.30	\$2.44
Inpatient/Outpatient	OXYCODONE-ACETAMINOPHEN 7.5-325 MG PO TABS	60951-700-70	A9270	\$2.20	\$2.16	\$2.18	\$2.03	\$2.16
Inpatient/Outpatient	OXYCODONE-ACETAMINOPHEN 7.5-325 MG PO TABS	0591-0933-01	A9270	\$1.21	\$1.19	\$1.20	\$1.12	\$1.19
Inpatient/Outpatient	OXYCODONE-ACETAMINOPHEN 7.5-325 MG PO TABS	0904-6438-61	A9270	\$2.08	\$2.04	\$2.06	\$1.92	\$2.04
Inpatient/Outpatient	OXYCODONE-ACETAMINOPHEN 7.5-325 MG PO TABS	63739-636-10	A9270	\$2.24	\$2.20	\$2.22	\$2.07	\$2.20

Inpatient/Outpatient	OXYCODONE-ACETAMINOPHEN 7.5-325 MG PO TABS	0406-0522-23	A9270	\$7.79	\$7.63	\$7.71	\$7.19	\$7.63
Inpatient/Outpatient	OXYCODONE-ACETAMINOPHEN 7.5-325 MG PO TABS	0904-7094-61	A9270	\$2.04	\$2.00	\$2.02	\$1.88	\$2.00
Inpatient/Outpatient	OXYCODONE-ACETAMINOPHEN 7.5-325 MG PO TABS	50268-645-11	A9270	\$2.12	\$2.08	\$2.10	\$1.96	\$2.08
Inpatient/Outpatient	OXYCODONE-ACETAMINOPHEN 7.5-325 MG PO TABS	68084-699-11	A9270	\$6.92	\$6.78	\$6.85	\$6.39	\$6.78
Inpatient/Outpatient	OXYCODONE-ACETAMINOPHEN 10-325 MG PO TABS	0406-0523-01	A9270	\$0.68	\$0.67	\$0.67	\$0.63	\$0.67
Inpatient/Outpatient	OXYCODONE-ACETAMINOPHEN 10-325 MG PO TABS	0406-0523-62	A9270	\$6.36	\$6.23	\$6.30	\$5.87	\$6.23
Inpatient/Outpatient	OXYCODONE-ACETAMINOPHEN 10-325 MG PO TABS	0904-6439-61	A9270	\$3.07	\$3.01	\$3.04	\$2.83	\$3.01
Inpatient/Outpatient	OXYCODONE-ACETAMINOPHEN 10-325 MG PO TABS	0406-0523-23	A9270	\$9.20	\$9.02	\$9.11	\$8.49	\$9.02
Inpatient/Outpatient	OXYCODONE-ACETAMINOPHEN 10-325 MG PO TABS	68308-480-47	A9270	\$2.36	\$2.31	\$2.34	\$2.18	\$2.31
Inpatient/Outpatient	OXYCODONE-ACETAMINOPHEN 10-325 MG PO TABS	0904-7095-61	A9270	\$2.66	\$2.61	\$2.63	\$2.46	\$2.61
Inpatient/Outpatient	OXYCODONE-ACETAMINOPHEN 10-325 MG PO TABS	60951-712-70	A9270	\$2.38	\$2.33	\$2.36	\$2.20	\$2.33
Inpatient/Outpatient	ENOXAPARIN SODIUM 150 MG/ML II SOSY	0075-2915-01	J1650	\$57.84	\$56.68	\$57.26	\$53.39	\$56.68
Inpatient/Outpatient	ENOXAPARIN SODIUM 150 MG/ML II SOSY	0781-3655-05	J1650	\$54.21	\$53.13	\$53.67	\$50.04	\$53.13
Inpatient/Outpatient	ENOXAPARIN SODIUM 150 MG/ML II SOSY	0075-8025-01	J1650	\$57.87	\$56.71	\$57.29	\$53.41	\$56.71
Inpatient/Outpatient	ENOXAPARIN SODIUM 150 MG/ML II SOSY	16714-066-01	J1650	\$48.51	\$47.54	\$48.02	\$44.77	\$47.54
Inpatient/Outpatient	ERTAPENEM SODIUM 1 G II SOLR	0006-3843-71	J1335	\$408.31	\$400.14	\$404.23	\$376.87	\$400.14
Inpatient/Outpatient	ERTAPENEM SODIUM 1 G II SOLR	42023-221-01	J1335	\$405.48	\$397.37	\$401.43	\$374.26	\$397.37
Inpatient/Outpatient	ERTAPENEM SODIUM 1 G II SOLR	55150-282-20	J1335	\$341.00	\$334.18	\$337.59	\$314.74	\$334.18
Inpatient/Outpatient	ERTAPENEM SODIUM 1 G II SOLR	42023-221-85	J1335	\$113.08	\$110.82	\$111.95	\$104.37	\$110.82
Inpatient/Outpatient	ERTAPENEM SODIUM 1 G II SOLR	42023-221-89	J1335	\$363.18	\$355.92	\$359.55	\$335.22	\$355.92
Inpatient/Outpatient	ERTAPENEM SODIUM 1 G II SOLR	60505-6196-0	J1335	\$201.28	\$197.25	\$199.27	\$185.78	\$197.25
Inpatient/Outpatient	ERTAPENEM SODIUM 1 G II SOLR	55150-282-09	J1335	\$310.26	\$304.05	\$307.16	\$286.37	\$304.05
Inpatient/Outpatient	ERTAPENEM SODIUM 1 G II SOLR	16714-889-01	J1335	\$173.30	\$169.83	\$171.57	\$159.96	\$169.83
Inpatient/Outpatient	CYSTEINE HCL 50 MG/ML IV SOLN	66758-005-02		\$3.47	\$3.40	\$3.44	\$3.20	\$3.40
Inpatient/Outpatient	FONDAPARINUX SODIUM 2.5 MG/0.5ML SC SOLN	0007-3230-02	J1652	\$176.18	\$172.66	\$174.42	\$162.61	\$172.66
Inpatient/Outpatient	FONDAPARINUX SODIUM 2.5 MG/0.5ML SC SOLN	0007-3230-11	J1652	\$434.15	\$425.47	\$429.81	\$400.72	\$425.47
Inpatient/Outpatient	FONDAPARINUX SODIUM 2.5 MG/0.5ML SC SOLN	0007-3230-01	J1652	\$89.72	\$87.93	\$88.82	\$82.81	\$87.93
Inpatient/Outpatient	FONDAPARINUX SODIUM 2.5 MG/0.5ML SC SOLN	55111-678-10	J1652	\$94.94	\$93.04	\$93.99	\$87.63	\$93.04
Inpatient/Outpatient	FONDAPARINUX SODIUM 2.5 MG/0.5ML SC SOLN	67457-582-00	J1652	\$100.75	\$98.74	\$99.74	\$92.99	\$98.74
Inpatient/Outpatient	FONDAPARINUX SODIUM 2.5 MG/0.5ML SC SOLN	55150-230-00	J1652	\$84.90	\$83.20	\$84.05	\$78.36	\$83.20
Inpatient/Outpatient	FONDAPARINUX SODIUM 2.5 MG/0.5ML SC SOLN	0781-3443-95	J1652	\$78.66	\$77.66	\$77.87	\$72.60	\$77.09
Inpatient/Outpatient	PEGFILGRASTIM 6 MG/0.6ML SC SOSY	55513-190-01	J2506	\$11,202.70	\$10,978.65	\$11,090.67	\$10,340.09	\$10,978.65
Inpatient/Outpatient	EFAVIRENZ 600 MG PO TABS	0056-0510-30	A9270	\$154.10	\$151.02	\$152.56	\$142.23	\$151.02
Inpatient/Outpatient	EFAVIRENZ 600 MG PO TABS	65862-774-30	A9270	\$72.19	\$70.75	\$71.47	\$66.63	\$70.75
Inpatient/Outpatient	EFAVIRENZ 600 MG PO TABS	65862-049-30	A9270	\$47.20	\$46.26	\$46.73	\$43.57	\$46.26
Inpatient/Outpatient	EFAVIRENZ 600 MG PO TABS	69097-301-02	A9270	\$26.52	\$25.99	\$26.25	\$24.48	\$25.99
Inpatient/Outpatient	EFAVIRENZ 600 MG PO TABS	64380-889-04	A9270	\$135.33	\$132.62	\$133.98	\$124.91	\$132.62
Inpatient/Outpatient	ZOLEDRONIC ACID 4 MG IV SOLR	47335-962-41	J3489	\$1,075.00	\$1,053.50	\$1,064.25	\$992.23	\$1,053.50
Inpatient/Outpatient	LEVALBUTEROL HCL 0.31 MG/3ML IN NEBU	66993-021-27	A9270	\$1.16	\$1.14	\$1.15	\$1.07	\$1.14
Inpatient/Outpatient	LEVALBUTEROL HCL 0.31 MG/3ML IN NEBU	0591-2918-23	A9270	\$6.25	\$6.13	\$6.19	\$5.77	\$6.13
Inpatient/Outpatient	LEVALBUTEROL HCL 0.31 MG/3ML IN NEBU	0093-4145-64	A9270	\$3.30	\$3.23	\$3.27	\$3.05	\$3.23
Inpatient/Outpatient	LEVALBUTEROL HCL 0.31 MG/3ML IN NEBU	63402-511-24	A9270	\$9.55	\$9.36	\$9.45	\$8.81	\$9.36
Inpatient/Outpatient	LEVALBUTEROL HCL 0.31 MG/3ML IN NEBU	76204-700-11	A9270	\$2.08	\$2.04	\$2.06	\$1.92	\$2.04
Inpatient/Outpatient	AMPHETAMINE-DEXTROAMPHETAMINE 5 MG PO TABS	0185-0084-01	A9270	\$4.33	\$4.24	\$4.29	\$4.00	\$4.24
Inpatient/Outpatient	AMPHETAMINE-DEXTROAMPHETAMINE 5 MG PO TABS	64720-130-10	A9270	\$3.55	\$3.48	\$3.51	\$3.28	\$3.48
Inpatient/Outpatient	AMPHETAMINE-DEXTROAMPHETAMINE 5 MG PO TABS	57664-641-08	A9270	\$5.20	\$5.10	\$5.15	\$4.80	\$5.10
Inpatient/Outpatient	AMPHETAMINE-DEXTROAMPHETAMINE 5 MG PO TABS	13107-068-01	A9270	\$1.25	\$1.23	\$1.24	\$1.15	\$1.23
Inpatient/Outpatient	AMPHETAMINE-DEXTROAMPHETAMINE 5 MG PO TABS	16714-802-01	A9270	\$1.15	\$1.13	\$1.14	\$1.06	\$1.13
Inpatient/Outpatient	AMPHETAMINE-DEXTROAMPHETAMINE 5 MG PO TABS	0555-0971-02	A9270	\$3.57	\$3.50	\$3.53	\$3.30	\$3.50
Inpatient/Outpatient	AMPHETAMINE-DEXTROAMPHETAMINE 5 MG PO TABS	16714-948-01	A9270	\$1.14	\$1.12	\$1.13	\$1.05	\$1.12
Inpatient/Outpatient	AMPHETAMINE-DEXTROAMPHETAMINE 5 MG PO TABS	42806-339-01	A9270	\$1.76	\$1.72	\$1.74	\$1.62	\$1.72
Inpatient/Outpatient	ETOPOSIDE 50 MG PO CAPS	0378-3266-94	J8560	\$340.91	\$334.09	\$337.50	\$314.66	\$334.09
Inpatient/Outpatient	FLUCINOLONE ACETONIDE 0.59 MG IZ IMPL	24208-416-01	J7313	\$30,059.50	\$29,458.31	\$29,758.91	\$27,744.92	\$29,458.31
Inpatient/Outpatient	AMPICILLIN-SULBACTAM SODIUM 1.5 (1-0.5) G II SOLR	0049-0013-83	J0295	\$34.25	\$33.57	\$33.91	\$31.61	\$33.57
Inpatient/Outpatient	AMPICILLIN-SULBACTAM SODIUM 1.5 (1-0.5) G II SOLR	63323-368-20	J0295	\$17.68	\$17.33	\$17.50	\$16.32	\$17.33
Inpatient/Outpatient	AMPICILLIN-SULBACTAM SODIUM 1.5 (1-0.5) G II SOLR	0641-6116-01	J0295	\$20.41	\$20.00	\$20.21	\$18.84	\$20.00
Inpatient/Outpatient	AMPICILLIN-SULBACTAM SODIUM 1.5 (1-0.5) G II SOLR	25021-142-20	J0295	\$24.44	\$23.95	\$24.20	\$22.56	\$23.95
Inpatient/Outpatient	AMPICILLIN-SULBACTAM SODIUM 1.5 (1-0.5) G II SOLR	0049-0013-81	J0295	\$12.15	\$11.91	\$12.03	\$11.21	\$11.91
Inpatient/Outpatient	AMPICILLIN-SULBACTAM SODIUM 1.5 (1-0.5) G II SOLR	55150-116-20	J0295	\$10.41	\$10.16	\$10.31	\$9.61	\$10.20
Inpatient/Outpatient	AMPICILLIN-SULBACTAM SODIUM 1.5 (1-0.5) G II SOLR	44567-210-10	J0295	\$35.96	\$35.24	\$35.60	\$33.19	\$35.24
Inpatient/Outpatient	AMPICILLIN-SULBACTAM SODIUM 1.5 (1-0.5) G II SOLR	67457-348-15	J0295	\$6.46	\$6.33	\$6.40	\$5.96	\$6.33
Inpatient/Outpatient	AMPICILLIN-SULBACTAM SODIUM 1.5 (1-0.5) G II SOLR	71288-005-20	J0295	\$23.16	\$22.70	\$22.93	\$21.38	\$22.70
Inpatient/Outpatient	AMPICILLIN-SULBACTAM SODIUM 1.5 (1-0.5) G II SOLR	66794-206-41	J0295	\$29.37	\$28.78	\$29.08	\$27.11	\$28.78
Inpatient/Outpatient	AMPICILLIN-SULBACTAM SODIUM 1.5 (1-0.5) G II SOLR	66794-206-02	J0295	\$29.42	\$28.83	\$29.13	\$27.15	\$28.83
Inpatient/Outpatient	AMPICILLIN-SULBACTAM SODIUM 1.5 (1-0.5) G II SOLR	71288-005-21	J0295	\$23.36	\$22.89	\$23.13	\$21.56	\$22.89
Inpatient/Outpatient	DAPAGLIFLOZIN PROPANEDIOL 10 MG PO TABS	0310-6210-30		\$80.71	\$79.10	\$79.90	\$74.50	\$79.10
Inpatient/Outpatient	PAROXETINE HCL ER 12.5 MG PO TB24	0378-2003-93	A9270	\$18.17	\$17.81	\$17.99	\$16.77	\$17.81
Inpatient/Outpatient	PAROXETINE HCL ER 12.5 MG PO TB24	60505-3673-3	A9270	\$3.63	\$3.56	\$3.59	\$3.35	\$3.56

Inpatient/Outpatient	PAROXETINE HCL ER 12.5 MG PO TB24	62175-470-32	A9270		\$5.42	\$5.31	\$5.37	\$5.00	\$5.31
Inpatient/Outpatient	PAROXETINE HCL ER 12.5 MG PO TB24	60505-1316-3	A9270		\$2.85	\$2.79	\$2.82	\$2.63	\$2.79
Inpatient/Outpatient	PAROXETINE HCL ER 25 MG PO TB24	0378-2004-93	A9270		\$19.02	\$18.64	\$18.83	\$17.56	\$18.64
Inpatient/Outpatient	PAROXETINE HCL ER 25 MG PO TB24	60505-3674-3	A9270		\$6.42	\$6.29	\$6.36	\$5.93	\$6.29
Inpatient/Outpatient	PAROXETINE HCL ER 25 MG PO TB24	62175-471-32	A9270		\$5.66	\$5.55	\$5.60	\$5.22	\$5.55
Inpatient/Outpatient	PAROXETINE HCL ER 25 MG PO TB24	60505-1317-3	A9270		\$3.16	\$3.10	\$3.13	\$2.92	\$3.10
Inpatient/Outpatient	PAROXETINE HCL ER 25 MG PO TB24	68180-646-06	A9270		\$2.98	\$2.92	\$2.95	\$2.75	\$2.92
Inpatient/Outpatient	PAROXETINE HCL ER 37.5 MG PO TB24	0378-2005-93	A9270		\$19.53	\$19.14	\$19.33	\$18.03	\$19.14
Inpatient/Outpatient	PAROXETINE HCL ER 37.5 MG PO TB24	62175-472-32	A9270		\$5.83	\$5.71	\$5.77	\$5.38	\$5.71
Inpatient/Outpatient	PAROXETINE HCL ER 37.5 MG PO TB24	60505-3675-3	A9270		\$9.95	\$9.75	\$9.85	\$9.18	\$9.75
Inpatient/Outpatient	PAROXETINE HCL ER 37.5 MG PO TB24	68180-645-06	A9270		\$3.50	\$3.43	\$3.47	\$3.23	\$3.43
Inpatient/Outpatient	METHYLPHENIDATE HCL ER (OSM) 27 MG PO TBCR	50458-588-01	A9270		\$58.63	\$57.46	\$58.04	\$54.12	\$57.46
Inpatient/Outpatient	METHYLPHENIDATE HCL ER (OSM) 27 MG PO TBCR	0591-2716-01	A9270		\$36.22	\$35.50	\$35.86	\$33.43	\$35.50
Inpatient/Outpatient	METHYLPHENIDATE HCL ER (OSM) 27 MG PO TBCR	10147-0688-1	A9270		\$5.02	\$4.92	\$4.97	\$4.63	\$4.92
Inpatient/Outpatient	METHYLPHENIDATE HCL ER (OSM) 27 MG PO TBCR	16714-125-01	A9270		\$4.98	\$4.88	\$4.93	\$4.60	\$4.88
Inpatient/Outpatient	FULVESTRANT 250 MG/5ML IM SOLN	0310-0720-10	J9395		\$641.38	\$628.55	\$634.97	\$591.99	\$628.55
Inpatient/Outpatient	FULVESTRANT 250 MG/5ML IM SOLN	0781-3079-12	J9395		\$94.49	\$92.60	\$93.55	\$87.21	\$92.60
Inpatient/Outpatient	FULVESTRANT 250 MG/5ML IM SOLN	67457-311-05	J9395		\$334.36	\$327.67	\$331.02	\$308.61	\$327.67
Inpatient/Outpatient	FULVESTRANT 250 MG/5ML IM SOLN	67457-311-00	J9395		\$418.59	\$410.22	\$414.40	\$386.36	\$410.22
Inpatient/Outpatient	FULVESTRANT 250 MG/5ML IM SOLN	63323-715-05	J9395		\$93.18	\$91.32	\$92.25	\$86.01	\$91.32
Inpatient/Outpatient	FULVESTRANT 250 MG/5ML IM SOLN	63323-715-01	J9395		\$408.79	\$400.61	\$404.70	\$377.31	\$400.61
Inpatient/Outpatient	SUCRALFATE 1 GM/10ML PO SUSP	0121-0747-40	A9270		\$3.85	\$3.77	\$3.81	\$3.55	\$3.77
Inpatient/Outpatient	SUCRALFATE 1 GM/10ML PO SUSP	68094-171-59	A9270		\$3.81	\$3.73	\$3.77	\$3.52	\$3.73
Inpatient/Outpatient	SUCRALFATE 1 GM/10ML PO SUSP	0254-1011-96	A9270		\$1.21	\$1.19	\$1.20	\$1.12	\$1.19
Inpatient/Outpatient	SELENIUM 4 MCG/ML IV SOLN (CASP NICU DILUTION)	99999-048-00			\$8.05	\$7.89	\$7.97	\$7.43	\$7.89
Inpatient/Outpatient	CUPRIC CHLORIDE 0.4 MG/ML IV SOLN	0409-4092-01			\$9.25	\$9.07	\$9.16	\$8.54	\$9.07
Inpatient/Outpatient	CUPRIC CHLORIDE 0.4 MG/ML IV SOLN	0409-4092-11			\$8.41	\$8.24	\$8.33	\$7.76	\$8.24
Inpatient/Outpatient	IMATINIB MESYLATE 100 MG PO TABS	0078-0401-34	J8999		\$441.43	\$432.60	\$437.02	\$407.44	\$432.60
Inpatient/Outpatient	IMATINIB MESYLATE 100 MG PO TABS	47335-472-81	J8999		\$7.86	\$7.70	\$7.78	\$7.25	\$7.70
Inpatient/Outpatient	IMATINIB MESYLATE 100 MG PO TABS	16714-704-01	J8999		\$7.60	\$7.45	\$7.52	\$7.01	\$7.45
Inpatient/Outpatient	IMATINIB MESYLATE 100 MG PO TABS	0093-7629-98	J8999		\$4.72	\$4.63	\$4.67	\$4.36	\$4.63
Inpatient/Outpatient	VORICONAZOLE 200 MG PO TABS	0049-3180-30	A9270		\$130.95	\$128.33	\$129.64	\$120.87	\$128.33
Inpatient/Outpatient	VORICONAZOLE 200 MG PO TABS	0093-5290-56	A9270		\$70.19	\$68.79	\$69.49	\$64.79	\$68.79
Inpatient/Outpatient	VORICONAZOLE 200 MG PO TABS	16714-515-01	A9270		\$106.71	\$104.58	\$105.64	\$98.49	\$104.58
Inpatient/Outpatient	VORICONAZOLE 200 MG PO TABS	43547-378-03	A9270		\$6.67	\$6.54	\$6.60	\$6.16	\$6.54
Inpatient/Outpatient	VORICONAZOLE 200 MG PO TABS	51079-165-01	A9270		\$48.39	\$47.42	\$47.91	\$44.66	\$47.42
Inpatient/Outpatient	VORICONAZOLE 200 MG PO TABS	27241-063-03	A9270		\$6.49	\$6.36	\$6.43	\$5.99	\$6.36
Inpatient/Outpatient	VORICONAZOLE 200 MG PO TABS	68462-573-30	A9270		\$31.92	\$31.28	\$31.60	\$29.46	\$31.28
Inpatient/Outpatient	VORICONAZOLE 200 MG IV SOLR	0049-3190-28	J3465		\$76.89	\$75.35	\$76.12	\$70.97	\$75.35
Inpatient/Outpatient	VORICONAZOLE 200 MG IV SOLR	0049-4190-01	J3465		\$76.89	\$75.35	\$76.12	\$70.97	\$75.35
Inpatient/Outpatient	VORICONAZOLE 200 MG IV SOLR	0049-3190-01	J3465		\$136.18	\$133.46	\$134.82	\$125.69	\$133.46
Inpatient/Outpatient	VORICONAZOLE 200 MG IV SOLR	47781-466-71	J3465		\$128.79	\$126.21	\$127.50	\$118.87	\$126.21
Inpatient/Outpatient	VORICONAZOLE 200 MG IV SOLR	65219-190-30	J3465		\$88.21	\$86.45	\$87.33	\$81.42	\$86.45
Inpatient/Outpatient	MIDODRINE HCL 5 MG PO TABS	0185-0043-01	A9270		\$8.65	\$8.48	\$8.56	\$7.98	\$8.48
Inpatient/Outpatient	MIDODRINE HCL 5 MG PO TABS	0115-4222-01	A9270		\$2.84	\$2.78	\$2.81	\$2.62	\$2.78
Inpatient/Outpatient	MIDODRINE HCL 5 MG PO TABS	0245-0212-89	A9270		\$1.65	\$1.62	\$1.63	\$1.52	\$1.62
Inpatient/Outpatient	MIDODRINE HCL 5 MG PO TABS	51079-453-01	A9270		\$3.97	\$3.89	\$3.93	\$3.66	\$3.89
Inpatient/Outpatient	MIDODRINE HCL 5 MG PO TABS	63739-556-10	A9270		\$5.33	\$5.22	\$5.28	\$4.92	\$5.22
Inpatient/Outpatient	MIDODRINE HCL 5 MG PO TABS	68084-241-11	A9270		\$2.39	\$2.34	\$2.37	\$2.21	\$2.34
Inpatient/Outpatient	MIDODRINE HCL 5 MG PO TABS	0378-1902-01	A9270		\$1.58	\$1.55	\$1.56	\$1.46	\$1.55
Inpatient/Outpatient	MIDODRINE HCL 5 MG PO TABS	0245-0212-11	A9270		\$0.64	\$0.63	\$0.63	\$0.59	\$0.63
Inpatient/Outpatient	MIDODRINE HCL 5 MG PO TABS	0245-0212-01	A9270		\$1.86	\$1.82	\$1.84	\$1.72	\$1.82
Inpatient/Outpatient	MIDODRINE HCL 5 MG PO TABS	64980-434-01	A9270		\$2.19	\$2.15	\$2.17	\$2.02	\$2.15
Inpatient/Outpatient	MIDODRINE HCL 5 MG PO TABS	59651-247-01	A9270		\$1.63	\$1.60	\$1.61	\$1.50	\$1.60
Inpatient/Outpatient	ZINC SULFATE 1 MG/ML IV SOLN	0517-6110-25			\$7.11	\$6.97	\$7.04	\$6.56	\$6.97
Inpatient/Outpatient	ZINC SULFATE 1 MG/ML IV SOLN	0517-6101-01			\$8.18	\$8.02	\$8.10	\$7.55	\$8.02
Inpatient/Outpatient	ZIPRASIDONE MESYLATE 20 MG IM SOLR	0049-3920-83	J3486		\$247.28	\$242.33	\$244.81	\$228.24	\$242.33
Inpatient/Outpatient	ZIPRASIDONE MESYLATE 20 MG IM SOLR	0049-3920-20	J3486		\$178.33	\$174.76	\$176.55	\$164.60	\$174.76
Inpatient/Outpatient	ZIPRASIDONE MESYLATE 20 MG IM SOLR	0049-1203-01	J3486		\$178.33	\$174.76	\$176.55	\$164.60	\$174.76
Inpatient/Outpatient	ZIPRASIDONE MESYLATE 20 MG IM SOLR	43598-848-11	J3486		\$159.81	\$156.61	\$158.21	\$147.50	\$156.61
Inpatient/Outpatient	ZIPRASIDONE MESYLATE 20 MG IM SOLR	72266-160-01	J3486		\$148.32	\$145.35	\$146.84	\$136.90	\$145.35
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE 500-125 MG PO TABS	66685-1002-2	A9270		\$1.49	\$1.46	\$1.48	\$1.38	\$1.46
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE 500-125 MG PO TABS	68084-235-01	A9270		\$7.30	\$7.15	\$7.23	\$6.74	\$7.15
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE 500-125 MG PO TABS	16714-494-01	A9270		\$1.06	\$1.04	\$1.05	\$0.98	\$1.04
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE 500-125 MG PO TABS	16714-477-01	A9270		\$1.04	\$1.02	\$1.03	\$0.96	\$1.02
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE 875-125 MG PO TABS	0093-2275-34	A9270		\$8.08	\$7.92	\$8.00	\$7.46	\$7.92
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE 875-125 MG PO TABS	68084-236-01	A9270		\$12.23	\$11.99	\$12.11	\$11.29	\$11.99
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE 875-125 MG PO TABS	66685-1001-1	A9270		\$1.95	\$1.91	\$1.93	\$1.80	\$1.91

Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE 875-125 MG PO TABS	16714-297-02	A9270		\$3.47	\$3.40	\$3.44	\$3.20	\$3.40
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE 875-125 MG PO TABS	16714-478-02	A9270		\$1.46	\$1.43	\$1.45	\$1.35	\$1.43
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE 875-125 MG PO TABS	16714-014-01	A9270		\$1.35	\$1.32	\$1.34	\$1.25	\$1.32
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE 875-125 MG PO TABS	65862-503-01	A9270		\$1.79	\$1.75	\$1.77	\$1.65	\$1.75
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE 875-125 MG PO TABS	0781-1852-20	A9270		\$7.66	\$7.51	\$7.58	\$7.07	\$7.51
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE 200-28.5 MG/5ML PO SUSR	66685-1011-1	A9270		\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE 400-57 MG/5ML PO SUSR	0093-2279-73	A9270		\$2.52	\$2.47	\$2.49	\$2.33	\$2.47
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE 400-57 MG/5ML PO SUSR	0143-9982-01	A9270		\$0.38	\$0.37	\$0.38	\$0.35	\$0.37
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE 400-57 MG/5ML PO SUSR	0143-9982-50	A9270		\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE 400-57 MG/5ML PO SUSR	66685-1012-2	A9270		\$0.54	\$0.53	\$0.53	\$0.50	\$0.53
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE 400-57 MG/5ML PO SUSR	0781-6104-46	A9270		\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE 400-57 MG/5ML PO SUSR	65862-534-01	A9270		\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE 400-57 MG/5ML PO SUSR	16714-293-03	A9270		\$0.24	\$0.24	\$0.24	\$0.22	\$0.24
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE 400-57 MG/5ML PO SUSR	16714-293-01	A9270		\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	INSULIN REGULAR INFUSION 1 UNIT/ML (ADULT ORGAN DONOR) PREMIX	99999-8215-1	J1817		\$18.23	\$17.87	\$18.05	\$16.83	\$17.87
Inpatient/Outpatient	BARICITINIB 1 MG PO HALF-TABS (COVID-19)	99999-4182-5			\$392.41	\$384.56	\$388.49	\$362.19	\$384.56
Inpatient/Outpatient	ESCITALOPRAM OXALATE 10 MG PO TABS	0456-2010-11	A9270		\$12.62	\$12.37	\$12.49	\$11.65	\$12.37
Inpatient/Outpatient	ESCITALOPRAM OXALATE 10 MG PO TABS	0456-2010-63	A9270		\$35.10	\$34.40	\$34.75	\$32.40	\$34.40
Inpatient/Outpatient	ESCITALOPRAM OXALATE 10 MG PO TABS	51079-543-01	A9270		\$14.92	\$14.62	\$14.77	\$13.77	\$14.62
Inpatient/Outpatient	ESCITALOPRAM OXALATE 10 MG PO TABS	51079-543-20	A9270		\$0.51	\$0.50	\$0.50	\$0.47	\$0.50
Inpatient/Outpatient	ESCITALOPRAM OXALATE 10 MG PO TABS	0093-5851-93	A9270		\$1.34	\$1.31	\$1.33	\$1.24	\$1.31
Inpatient/Outpatient	ESCITALOPRAM OXALATE 10 MG PO TABS	0904-6314-61	A9270		\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	ESCITALOPRAM OXALATE 10 MG PO TABS	0904-6426-61	A9270		\$0.51	\$0.50	\$0.50	\$0.47	\$0.50
Inpatient/Outpatient	ESCITALOPRAM OXALATE 10 MG PO TABS	43547-281-10	A9270		\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	ESCITALOPRAM OXALATE 10 MG PO TABS	68084-617-11	A9270		\$0.88	\$0.86	\$0.87	\$0.81	\$0.86
Inpatient/Outpatient	ESCITALOPRAM OXALATE 10 MG PO TABS	65862-374-01	A9270		\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	ESCITALOPRAM OXALATE 20 MG PO TABS	0456-2020-63	A9270		\$25.52	\$25.01	\$25.26	\$23.55	\$25.01
Inpatient/Outpatient	ESCITALOPRAM OXALATE 20 MG PO TABS	0456-2020-11	A9270		\$13.17	\$12.91	\$13.04	\$12.16	\$12.91
Inpatient/Outpatient	ESCITALOPRAM OXALATE 20 MG PO TABS	51079-544-20	A9270		\$0.64	\$0.63	\$0.63	\$0.59	\$0.63
Inpatient/Outpatient	ESCITALOPRAM OXALATE 20 MG PO TABS	0093-5852-93	A9270		\$1.41	\$1.38	\$1.40	\$1.30	\$1.38
Inpatient/Outpatient	ESCITALOPRAM OXALATE 20 MG PO TABS	0904-6427-61	A9270		\$0.61	\$0.60	\$0.60	\$0.56	\$0.60
Inpatient/Outpatient	ESCITALOPRAM OXALATE 20 MG PO TABS	51079-544-01	A9270		\$0.64	\$0.63	\$0.63	\$0.59	\$0.63
Inpatient/Outpatient	RASBURICASE 1.5 MG IV SOLR	0024-5150-10	J2783		\$3,260.78	\$3,195.56	\$3,228.17	\$3,009.70	\$3,195.56
Inpatient/Outpatient	INFLUENZA VIRUS VACCINE QUADRIVALENT PF (FLUZONE) IM SUSP (SP)	49281-422-50	90686		\$179.43	\$175.84	\$177.64	\$165.61	\$175.84
Inpatient/Outpatient	INFLUENZA VIRUS VACCINE QUADRIVALENT PF (FLUZONE) IM SUSP (SP)	49281-422-88	90686		\$179.43	\$175.84	\$177.64	\$165.61	\$175.84
Inpatient/Outpatient	INSULIN ASPART PROT & ASPART (70-30) 100 UNIT/ML SC SUPN	0169-3696-19	A9270		\$26.16	\$25.64	\$25.90	\$24.15	\$25.64
Inpatient/Outpatient	INSULIN ASPART PROT & ASPART (70-30) 100 UNIT/ML SC SUPN	73070-203-10	A9270		\$84.26	\$82.57	\$83.42	\$77.77	\$82.57
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE ER 1000-62.5 MG PO TB12	0781-1943-82	A9270		\$19.45	\$19.06	\$19.26	\$17.95	\$19.06
Inpatient/Outpatient	AMOXICILLIN-POT CLAVULANATE ER 1000-62.5 MG PO TB12	0781-1943-39	A9270		\$19.52	\$19.13	\$19.32	\$18.02	\$19.13
Inpatient/Outpatient	METAXALONE 800 MG PO TABS	64720-321-10	A9270		\$13.62	\$13.35	\$13.48	\$12.57	\$13.35
Inpatient/Outpatient	METAXALONE 800 MG PO TABS	60793-136-01	A9270		\$46.16	\$45.24	\$45.70	\$42.61	\$45.24
Inpatient/Outpatient	METAXALONE 800 MG PO TABS	68084-135-21	A9270		\$17.64	\$17.29	\$17.46	\$16.28	\$17.29
Inpatient/Outpatient	METAXALONE 800 MG PO TABS	65162-553-10	A9270		\$8.75	\$8.58	\$8.66	\$8.08	\$8.58
Inpatient/Outpatient	METAXALONE 800 MG PO TABS	50268-530-11	A9270		\$21.43	\$21.00	\$21.22	\$19.78	\$21.00
Inpatient/Outpatient	METAXALONE 800 MG PO TABS	68084-135-11	A9270		\$21.16	\$20.74	\$20.95	\$19.53	\$20.74
Inpatient/Outpatient	METAXALONE 800 MG PO TABS	55111-650-01	A9270		\$3.98	\$3.90	\$3.94	\$3.67	\$3.90
Inpatient/Outpatient	METAXALONE 800 MG PO TABS	0527-1435-01	A9270		\$2.92	\$2.86	\$2.89	\$2.70	\$2.86
Inpatient/Outpatient	MISOPROSTOL HEMORRHAGE 600 MCG RE CAPS	99999-1461-3	A9270		\$13.02	\$12.76	\$12.89	\$12.02	\$12.76
Inpatient/Outpatient	LIDOCAINE HCL 2 % (UROJET) EX GEL (WRAP)	76329-3015-5	J2001		\$1.83	\$1.79	\$1.81	\$1.69	\$1.79
Inpatient/Outpatient	LIDOCAINE HCL 2 % (UROJET) EX GEL (WRAP)	76329-3012-5	J2001		\$4.07	\$3.99	\$4.03	\$3.76	\$3.99
Inpatient/Outpatient	LIDOCAINE HCL 2 % (UROJET) EX GEL (WRAP)	76329-3011-5	J2001		\$4.07	\$3.99	\$4.03	\$3.76	\$3.99
Inpatient/Outpatient	EZETIMIBE 10 MG PO TABS	66582-414-28	A9270		\$48.37	\$47.40	\$47.89	\$44.65	\$47.40
Inpatient/Outpatient	EZETIMIBE 10 MG PO TABS	66582-414-29	A9270		\$10.40	\$10.19	\$10.30	\$9.60	\$10.19
Inpatient/Outpatient	EZETIMIBE 10 MG PO TABS	66582-414-31	A9270		\$52.20	\$51.16	\$51.68	\$48.18	\$51.16
Inpatient/Outpatient	EZETIMIBE 10 MG PO TABS	60687-284-11	A9270		\$36.36	\$35.63	\$36.00	\$33.56	\$35.63
Inpatient/Outpatient	EZETIMIBE 10 MG PO TABS	0591-3713-30	A9270		\$2.20	\$2.16	\$2.18	\$2.03	\$2.16
Inpatient/Outpatient	EZETIMIBE 10 MG PO TABS	69238-1154-3	A9270		\$0.62	\$0.61	\$0.61	\$0.57	\$0.61
Inpatient/Outpatient	EZETIMIBE 10 MG PO TABS	0904-6664-04	A9270		\$38.33	\$37.56	\$37.95	\$35.38	\$37.56
Inpatient/Outpatient	EZETIMIBE 10 MG PO TABS	68382-773-06	A9270		\$1.54	\$1.51	\$1.52	\$1.42	\$1.51
Inpatient/Outpatient	EZETIMIBE 10 MG PO TABS	60687-373-11	A9270		\$29.42	\$28.83	\$29.13	\$27.15	\$28.83
Inpatient/Outpatient	EZETIMIBE 10 MG PO TABS	16714-813-03	A9270		\$0.58	\$0.57	\$0.57	\$0.54	\$0.57
Inpatient/Outpatient	EZETIMIBE 10 MG PO TABS	51660-200-30	A9270		\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	ARIPIPIRAZOLE 10 MG PO TABS	60505-2674-3	A9270		\$7.23	\$7.09	\$7.16	\$6.67	\$7.09
Inpatient/Outpatient	ARIPIPIRAZOLE 10 MG PO TABS	43598-556-30	A9270		\$1.35	\$1.32	\$1.34	\$1.25	\$1.32
Inpatient/Outpatient	ARIPIPIRAZOLE 10 MG PO TABS	48433-117-01	A9270		\$7.25	\$7.11	\$7.18	\$6.69	\$7.11
Inpatient/Outpatient	ARIPIPIRAZOLE 15 MG PO TABS	48433-118-01	A9270		\$15.28	\$14.97	\$15.13	\$14.10	\$14.97
Inpatient/Outpatient	ARIPIPIRAZOLE 15 MG PO TABS	60505-2675-3	A9270		\$7.23	\$7.09	\$7.16	\$6.67	\$7.09
Inpatient/Outpatient	DIVALPROEX SODIUM ER 250 MG PO TB24	0074-3826-13	A9270		\$14.36	\$14.07	\$14.22	\$13.25	\$14.07

Inpatient/Outpatient	DIVALPROEX SODIUM ER 250 MG PO TB24	0904-6363-61	A9270	\$3.20	\$3.14	\$3.17	\$2.95	\$3.14
Inpatient/Outpatient	DIVALPROEX SODIUM ER 250 MG PO TB24	68084-310-11	A9270	\$7.88	\$7.72	\$7.80	\$7.27	\$7.72
Inpatient/Outpatient	ATOMOXETINE HCL 10 MG PO CAPS	0002-3227-30	A9270	\$59.65	\$58.46	\$59.05	\$55.06	\$58.46
Inpatient/Outpatient	ATOMOXETINE HCL 10 MG PO CAPS	16714-755-01	A9270	\$6.68	\$6.55	\$6.61	\$6.17	\$6.55
Inpatient/Outpatient	ATOMOXETINE HCL 18 MG PO CAPS	0002-3238-30	A9270	\$59.55	\$58.36	\$58.95	\$54.96	\$58.36
Inpatient/Outpatient	ATOMOXETINE HCL 18 MG PO CAPS	16714-756-01	A9270	\$6.66	\$6.53	\$6.59	\$6.15	\$6.53
Inpatient/Outpatient	ATOMOXETINE HCL 25 MG PO CAPS	0002-3228-30	A9270	\$59.55	\$58.36	\$58.95	\$54.96	\$58.36
Inpatient/Outpatient	ATOMOXETINE HCL 25 MG PO CAPS	16714-757-01	A9270	\$6.69	\$6.56	\$6.62	\$6.17	\$6.56
Inpatient/Outpatient	ATOMOXETINE HCL 40 MG PO CAPS	0002-3229-30	A9270	\$64.70	\$63.41	\$64.05	\$59.72	\$63.41
Inpatient/Outpatient	ATOMOXETINE HCL 40 MG PO CAPS	16714-758-01	A9270	\$10.25	\$10.05	\$10.15	\$9.46	\$10.05
Inpatient/Outpatient	ATOMOXETINE HCL 40 MG PO CAPS	55111-521-30	A9270	\$4.35	\$4.26	\$4.31	\$4.02	\$4.26
Inpatient/Outpatient	ATOMOXETINE HCL 60 MG PO CAPS	0002-3239-30	A9270	\$64.81	\$63.51	\$64.16	\$59.82	\$63.51
Inpatient/Outpatient	ATOMOXETINE HCL 60 MG PO CAPS	68462-269-30	A9270	\$8.33	\$8.16	\$8.25	\$7.69	\$8.16
Inpatient/Outpatient	ATOMOXETINE HCL 60 MG PO CAPS	16714-759-01	A9270	\$10.25	\$10.05	\$10.15	\$9.46	\$10.05
Inpatient/Outpatient	HYDROCODONE-ACETAMINOPHEN 5-325 MG PO TABS	0406-0365-01	A9270	\$0.44	\$0.43	\$0.44	\$0.41	\$0.43
Inpatient/Outpatient	HYDROCODONE-ACETAMINOPHEN 5-325 MG PO TABS	0591-3202-01	A9270	\$1.23	\$1.21	\$1.22	\$1.14	\$1.21
Inpatient/Outpatient	HYDROCODONE-ACETAMINOPHEN 5-325 MG PO TABS	52544-913-01	A9270	\$6.95	\$6.81	\$6.88	\$6.41	\$6.81
Inpatient/Outpatient	HYDROCODONE-ACETAMINOPHEN 5-325 MG PO TABS	63739-384-10	A9270	\$1.17	\$1.15	\$1.16	\$1.08	\$1.15
Inpatient/Outpatient	HYDROCODONE-ACETAMINOPHEN 5-325 MG PO TABS	0406-0365-62	A9270	\$1.23	\$1.21	\$1.22	\$1.14	\$1.21
Inpatient/Outpatient	HYDROCODONE-ACETAMINOPHEN 5-325 MG PO TABS	63739-532-10	A9270	\$0.82	\$0.80	\$0.81	\$0.76	\$0.80
Inpatient/Outpatient	HYDROCODONE-ACETAMINOPHEN 5-325 MG PO TABS	0406-0123-23	A9270	\$1.23	\$1.21	\$1.22	\$1.14	\$1.21
Inpatient/Outpatient	HYDROCODONE-ACETAMINOPHEN 5-325 MG PO TABS	68084-368-11	A9270	\$0.94	\$0.92	\$0.93	\$0.87	\$0.92
Inpatient/Outpatient	HYDROCODONE-ACETAMINOPHEN 5-325 MG PO TABS	68084-895-11	A9270	\$2.44	\$2.39	\$2.42	\$2.25	\$2.39
Inpatient/Outpatient	HYDROCODONE-ACETAMINOPHEN 5-325 MG PO TABS	0904-6567-61	A9270	\$0.72	\$0.71	\$0.71	\$0.66	\$0.71
Inpatient/Outpatient	HYDROCODONE-ACETAMINOPHEN 5-325 MG PO TABS	63739-326-10	A9270	\$0.73	\$0.72	\$0.72	\$0.67	\$0.72
Inpatient/Outpatient	HYDROCODONE-ACETAMINOPHEN 5-325 MG PO TABS	0406-0123-01	A9270	\$0.37	\$0.36	\$0.37	\$0.34	\$0.36
Inpatient/Outpatient	HYDROCODONE-ACETAMINOPHEN 5-325 MG PO TABS	0904-6824-61	A9270	\$0.71	\$0.70	\$0.70	\$0.66	\$0.70
Inpatient/Outpatient	HYDROCODONE-ACETAMINOPHEN 5-325 MG PO TABS	50268-401-11	A9270	\$0.85	\$0.83	\$0.84	\$0.78	\$0.83
Inpatient/Outpatient	DOXORUBICIN HCL 50 MG IV SOLR	67457-436-50	J9000	\$835.21	\$818.51	\$826.86	\$770.90	\$818.51
Inpatient/Outpatient	DOXORUBICIN HCL 50 MG IV SOLR	0143-9277-01	J9000	\$659.80	\$646.60	\$653.20	\$609.00	\$646.60
Inpatient/Outpatient	DOXORUBICIN HCL 50 MG IV SOLR	0143-9093-01	J9000	\$793.03	\$777.17	\$785.10	\$731.97	\$777.17
Inpatient/Outpatient	HYDROCODONE-ACETAMINOPHEN 7.5-325 MG PO TABS	0591-3203-01	A9270	\$1.34	\$1.31	\$1.33	\$1.24	\$1.31
Inpatient/Outpatient	HYDROCODONE-ACETAMINOPHEN 7.5-325 MG PO TABS	52544-729-01	A9270	\$7.33	\$7.18	\$7.26	\$6.77	\$7.18
Inpatient/Outpatient	HYDROCODONE-ACETAMINOPHEN 7.5-325 MG PO TABS	0406-0366-62	A9270	\$1.29	\$1.26	\$1.28	\$1.19	\$1.26
Inpatient/Outpatient	HYDROCODONE-ACETAMINOPHEN 7.5-325 MG PO TABS	51079-778-01	A9270	\$1.67	\$1.64	\$1.65	\$1.54	\$1.64
Inpatient/Outpatient	HYDROCODONE-ACETAMINOPHEN 7.5-325 MG PO TABS	0406-0124-23	A9270	\$1.04	\$1.02	\$1.03	\$0.96	\$1.02
Inpatient/Outpatient	DTAP-HEPATITIS B RECOMB-IPV IM SUSY	58160-811-52	90698	\$555.11	\$544.01	\$549.56	\$512.37	\$544.01
Inpatient/Outpatient	DTAP-HEPATITIS B RECOMB-IPV IM SUSY	54569-5486-0	90698	\$622.11	\$609.67	\$615.89	\$574.21	\$609.67
Inpatient/Outpatient	DTAP-HEPATITIS B RECOMB-IPV IM SUSY	58160-811-43	90698	\$449.25	\$440.27	\$444.76	\$414.66	\$440.27
Inpatient/Outpatient	FENTANYL INFUSION 10 MCG/ML PREMIX	33216-2823-0	J3010	\$0.63	\$0.62	\$0.62	\$0.58	\$0.62
Inpatient/Outpatient	FENTANYL INFUSION 10 MCG/ML PREMIX	99999-2823-0	J3010	\$0.63	\$0.62	\$0.62	\$0.58	\$0.62
Inpatient/Outpatient	FENTANYL INFUSION 10 MCG/ML PREMIX	70092-1092-36	J3010	\$0.74	\$0.73	\$0.73	\$0.68	\$0.73
Inpatient/Outpatient	BELLADONNA ALKALOIDS-OPIMUM 16.2-60 MG RE SUPP	0574-7040-12	A9270	\$121.05	\$118.63	\$119.84	\$111.73	\$118.63
Inpatient/Outpatient	NICOTINE POLACRILEX 4 MG MT LOZG	0135-0511-01	A9150	\$2.14	\$2.10	\$2.12	\$1.98	\$2.10
Inpatient/Outpatient	NICOTINE POLACRILEX 4 MG MT LOZG	45802-873-05	A9150	\$1.26	\$1.23	\$1.25	\$1.16	\$1.23
Inpatient/Outpatient	NICOTINE POLACRILEX 4 MG MT LOZG	45802-873-03	A9150	\$1.26	\$1.23	\$1.25	\$1.16	\$1.23
Inpatient/Outpatient	NICOTINE POLACRILEX 4 MG MT LOZG	43598-487-72	A9150	\$1.05	\$1.03	\$1.04	\$0.97	\$1.03
Inpatient/Outpatient	NEOMYCIN-POLYMYXIN-HC 1 % OT SOLN	24208-631-10	A9270	\$35.91	\$35.19	\$35.55	\$33.14	\$35.19
Inpatient/Outpatient	NEOMYCIN-POLYMYXIN-HC 1 % OT SOLN	61314-646-10	A9270	\$20.46	\$20.05	\$20.26	\$18.88	\$20.05
Inpatient/Outpatient	NEOMYCIN-POLYMYXIN-HC 3.5-10000-1 OP SUSP	61314-641-75	A9270	\$67.07	\$65.73	\$66.40	\$61.91	\$65.73
Inpatient/Outpatient	MISOPROSTOL HEMORRHAGE 800 MCG RE CAPS	99999-1461-4	A9270	\$17.36	\$17.01	\$17.19	\$16.02	\$17.01
Inpatient/Outpatient	CYCLOBENZAPRINE HCL 5 MG PO TABS	0603-3078-21	A9270	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	CYCLOBENZAPRINE HCL 5 MG PO TABS	0378-0771-01	A9270	\$0.22	\$0.22	\$0.22	\$0.20	\$0.22
Inpatient/Outpatient	CYCLOBENZAPRINE HCL 5 MG PO TABS	10702-006-01	A9270	\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	CYCLOBENZAPRINE HCL 5 MG PO TABS	59746-211-06	A9270	\$0.80	\$0.78	\$0.79	\$0.74	\$0.78
Inpatient/Outpatient	CYCLOBENZAPRINE HCL 5 MG PO TABS	43547-399-10	A9270	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	CYCLOBENZAPRINE HCL 5 MG PO TABS	50268-190-15	A9270	\$1.60	\$1.57	\$1.58	\$1.48	\$1.57
Inpatient/Outpatient	CYCLOBENZAPRINE HCL 5 MG PO TABS	50268-190-11	A9270	\$1.60	\$1.57	\$1.58	\$1.48	\$1.57
Inpatient/Outpatient	CYCLOBENZAPRINE HCL 5 MG PO TABS	68084-753-95	A9270	\$2.18	\$2.14	\$2.16	\$2.01	\$2.14
Inpatient/Outpatient	CYCLOBENZAPRINE HCL 5 MG PO TABS	29300-413-01	A9270	\$0.08	\$0.08	\$0.08	\$0.07	\$0.08
Inpatient/Outpatient	CYCLOBENZAPRINE HCL 5 MG PO TABS	69097-845-07	A9270	\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	CYCLOSPORINE 0.05 % OP EMUL	0023-9163-30	A9270	\$48.64	\$47.67	\$48.15	\$44.89	\$47.67
Inpatient/Outpatient	CYCLOSPORINE 0.05 % OP EMUL	0378-8760-58	A9270	\$12.42	\$12.17	\$12.30	\$11.46	\$12.17
Inpatient/Outpatient	CYCLOSPORINE 0.05 % OP EMUL	60505-6202-1	A9270	\$13.05	\$12.79	\$12.92	\$12.05	\$12.79
Inpatient/Outpatient	CYCLOSPORINE 0.05 % OP EMUL	10702-808-03	A9270	\$12.41	\$12.16	\$12.29	\$11.45	\$12.16
Inpatient/Outpatient	DEXAMETHASONE SODIUM PHOSPHATE 4 MG/ML IV PUSH	55150-237-01	J1100	\$3.53	\$3.46	\$3.49	\$3.26	\$3.46
Inpatient/Outpatient	METHOTREXATE SODIUM (PF) 250 MG/10ML IJ SOLN	0703-3675-01	J9260	\$3.66	\$3.59	\$3.62	\$3.38	\$3.59
Inpatient/Outpatient	METHOTREXATE SODIUM (PF) 250 MG/10ML IJ SOLN	16729-277-03	J9260	\$2.22	\$2.18	\$2.20	\$2.05	\$2.18

Inpatient/Outpatient	RIVASTIGMINE 4.6 MG/24HR TD PT24	0078-0501-15	A9270	\$103.43	\$101.36	\$102.40	\$95.47	\$101.36
Inpatient/Outpatient	RIVASTIGMINE 4.6 MG/24HR TD PT24	0078-0501-61	A9270	\$36.29	\$35.56	\$35.93	\$33.50	\$35.56
Inpatient/Outpatient	RIVASTIGMINE 4.6 MG/24HR TD PT24	47781-304-03	A9270	\$29.92	\$29.32	\$29.62	\$27.62	\$29.32
Inpatient/Outpatient	RIVASTIGMINE 4.6 MG/24HR TD PT24	0781-7304-31	A9270	\$26.82	\$26.28	\$26.55	\$24.75	\$26.28
Inpatient/Outpatient	RIVASTIGMINE 4.6 MG/24HR TD PT24	47781-304-11	A9270	\$32.66	\$32.04	\$32.33	\$30.15	\$32.01
Inpatient/Outpatient	RIVASTIGMINE 4.6 MG/24HR TD PT24	0781-7304-58	A9270	\$35.29	\$34.58	\$34.94	\$32.57	\$34.58
Inpatient/Outpatient	RIVASTIGMINE 4.6 MG/24HR TD PT24	0378-9070-93	A9270	\$13.57	\$13.30	\$13.43	\$12.53	\$13.30
Inpatient/Outpatient	RIVASTIGMINE 4.6 MG/24HR TD PT24	0378-9070-16	A9270	\$12.87	\$12.61	\$12.74	\$11.88	\$12.61
Inpatient/Outpatient	RIVASTIGMINE 4.6 MG/24HR TD PT24	16714-115-01	A9270	\$12.62	\$12.37	\$12.49	\$11.65	\$12.37
Inpatient/Outpatient	RIVASTIGMINE 4.6 MG/24HR TD PT24	63629-2065-1	A9270	\$10.88	\$10.66	\$10.77	\$10.04	\$10.66
Inpatient/Outpatient	ZOLEDRONIC ACID 4 MG/5ML IV CONC	0078-0387-25	J3489	\$587.67	\$575.92	\$581.79	\$542.42	\$575.92
Inpatient/Outpatient	ZOLEDRONIC ACID 4 MG/5ML IV CONC	25021-801-66	J3489	\$49.79	\$48.79	\$49.29	\$45.96	\$48.79
Inpatient/Outpatient	ZOLEDRONIC ACID 4 MG/5ML IV CONC	0409-4215-01	J3489	\$6.10	\$5.98	\$6.04	\$5.63	\$5.98
Inpatient/Outpatient	ZOLEDRONIC ACID 4 MG/5ML IV CONC	0409-4215-05	J3489	\$6.10	\$5.98	\$6.04	\$5.63	\$5.98
Inpatient/Outpatient	ZOLEDRONIC ACID 4 MG/5ML IV CONC	16714-815-01	J3489	\$6.20	\$6.08	\$6.14	\$5.72	\$6.08
Inpatient/Outpatient	ZOLEDRONIC ACID 4 MG/5ML IV CONC	67457-390-54	J3489	\$6.71	\$6.58	\$6.64	\$6.19	\$6.58
Inpatient/Outpatient	MOXIFLOXACIN HCL 0.5 % OP SOLN	60505-0582-4	A9270	\$13.41	\$13.14	\$13.28	\$12.38	\$13.14
Inpatient/Outpatient	MOXIFLOXACIN HCL 0.5 % OP SOLN	68180-422-01	A9270	\$202.60	\$198.55	\$200.57	\$187.00	\$198.55
Inpatient/Outpatient	MOXIFLOXACIN HCL 0.5 % OP SOLN	0065-4013-03	A9270	\$262.43	\$257.18	\$259.81	\$242.22	\$257.18
Inpatient/Outpatient	MOXIFLOXACIN HCL 0.5 % OP SOLN	0781-7135-93	A9270	\$32.03	\$31.39	\$31.71	\$29.56	\$31.39
Inpatient/Outpatient	MOXIFLOXACIN HCL 0.5 % OP SOLN	65862-840-03	A9270	\$24.95	\$24.45	\$24.70	\$23.03	\$24.45
Inpatient/Outpatient	MOXIFLOXACIN HCL 0.5 % OP SOLN	62332-505-03	A9270	\$16.77	\$16.43	\$16.60	\$15.48	\$16.43
Inpatient/Outpatient	BORTEZOMIB 3.5 MG IJ SOLR	63020-049-01	J9041	\$3,286.15	\$3,220.43	\$3,253.29	\$3,033.12	\$3,220.43
Inpatient/Outpatient	BORTEZOMIB 3.5 MG IJ SOLR	70710-1411-1	J9044	\$144.73	\$141.84	\$143.28	\$133.59	\$141.84
Inpatient/Outpatient	KETAMINE INFUSION 2 MG/ML IN NS 250 ML PREMIX (SEDATION)	99999-9508-1		\$2.38	\$2.33	\$2.36	\$2.20	\$2.33
Inpatient/Outpatient	POTASSIUM CHLORIDE ER (KLORCON/KDUR) 20 MEQ PO TBCR (WRAP)	66758-190-13	A9270	\$2.46	\$2.41	\$2.44	\$2.27	\$2.41
Inpatient/Outpatient	POTASSIUM CHLORIDE ER (KLORCON/KDUR) 20 MEQ PO TBCR (WRAP)	68084-360-11	A9270	\$2.61	\$2.56	\$2.58	\$2.41	\$2.56
Inpatient/Outpatient	POTASSIUM CHLORIDE ER (KLORCON/KDUR) 20 MEQ PO TBCR (WRAP)	63739-447-10	A9270	\$2.43	\$2.38	\$2.41	\$2.24	\$2.38
Inpatient/Outpatient	POTASSIUM CHLORIDE ER (KLORCON/KDUR) 20 MEQ PO TBCR (WRAP)	66758-190-06	A9270	\$1.62	\$1.59	\$1.60	\$1.50	\$1.59
Inpatient/Outpatient	POTASSIUM CHLORIDE ER (KLORCON/KDUR) 20 MEQ PO TBCR (WRAP)	0781-5720-05	A9270	\$1.08	\$1.06	\$1.07	\$1.00	\$1.06
Inpatient/Outpatient	POTASSIUM CHLORIDE ER (KLORCON/KDUR) 20 MEQ PO TBCR (WRAP)	0245-5319-01	A9270	\$1.13	\$1.11	\$1.12	\$1.04	\$1.11
Inpatient/Outpatient	POTASSIUM CHLORIDE ER (KLORCON/KDUR) 20 MEQ PO TBCR (WRAP)	0245-5319-89	A9270	\$1.50	\$1.47	\$1.49	\$1.38	\$1.47
Inpatient/Outpatient	POTASSIUM CHLORIDE ER (KLORCON/KDUR) 20 MEQ PO TBCR (WRAP)	0832-5325-15	A9270	\$1.26	\$1.23	\$1.25	\$1.16	\$1.23
Inpatient/Outpatient	POTASSIUM CHLORIDE ER (KLORCON/KDUR) 20 MEQ PO TBCR (WRAP)	0832-5325-11	A9270	\$1.17	\$1.15	\$1.16	\$1.08	\$1.15
Inpatient/Outpatient	POTASSIUM CHLORIDE ER (KLORCON/KDUR) 20 MEQ PO TBCR (WRAP)	0245-5319-11	A9270	\$0.61	\$0.60	\$0.60	\$0.56	\$0.60
Inpatient/Outpatient	POTASSIUM CHLORIDE ER (KLORCON/KDUR) 20 MEQ PO TBCR (WRAP)	60219-1069-1	A9270	\$1.00	\$0.98	\$0.99	\$0.92	\$0.98
Inpatient/Outpatient	POTASSIUM CHLORIDE ER (KLORCON/KDUR) 20 MEQ PO TBCR (WRAP)	68382-398-01	A9270	\$2.03	\$1.99	\$2.01	\$1.87	\$1.99
Inpatient/Outpatient	POTASSIUM CHLORIDE ER (KLORCON/KDUR) 20 MEQ PO TBCR (WRAP)	63739-973-10	A9270	\$1.18	\$1.16	\$1.17	\$1.09	\$1.16
Inpatient/Outpatient	POTASSIUM CHLORIDE ER (KLORCON/KDUR) 20 MEQ PO TBCR (WRAP)	0245-5319-15	A9270	\$0.71	\$0.70	\$0.70	\$0.66	\$0.70
Inpatient/Outpatient	IMATINIB MESYLATE 400 MG PO TABS	0078-0649-30	J8999	\$1,116.07	\$1,093.75	\$1,104.91	\$1,030.13	\$1,093.75
Inpatient/Outpatient	IMATINIB MESYLATE 400 MG PO TABS	0078-0438-15	J8999	\$904.52	\$886.43	\$895.47	\$834.87	\$886.43
Inpatient/Outpatient	IMATINIB MESYLATE 400 MG PO TABS	47335-475-83	J8999	\$187.68	\$183.93	\$185.80	\$173.23	\$183.93
Inpatient/Outpatient	IMATINIB MESYLATE 400 MG PO TABS	16714-705-01	J8999	\$13.33	\$13.06	\$13.20	\$12.30	\$13.06
Inpatient/Outpatient	IMATINIB MESYLATE 400 MG PO TABS	51991-377-33	J8999	\$15.37	\$15.06	\$15.22	\$14.19	\$15.06
Inpatient/Outpatient	ASCORBIC ACID 500 MG/ML IJ SOLN	67457-118-50		\$8.14	\$7.98	\$8.06	\$7.51	\$7.98
Inpatient/Outpatient	ESTROGENS CONJUGATED 0.45 MG PO TABS	0046-1101-81	A9270	\$28.88	\$28.30	\$28.59	\$26.66	\$28.30
Inpatient/Outpatient	ARIPIPIRAZOLE 5 MG PO TABS	60505-2673-3	A9270	\$7.23	\$7.09	\$7.16	\$6.67	\$7.09
Inpatient/Outpatient	ARIPIPIRAZOLE 5 MG PO TABS	59148-007-13	A9270	\$134.98	\$132.28	\$133.63	\$124.59	\$132.28
Inpatient/Outpatient	ARIPIPIRAZOLE 5 MG PO TABS	48433-116-01	A9270	\$15.28	\$14.96	\$15.13	\$14.10	\$14.97
Inpatient/Outpatient	ARIPIPIRAZOLE 5 MG PO TABS	16714-784-01	A9270	\$1.26	\$1.23	\$1.25	\$1.16	\$1.23
Inpatient/Outpatient	CIPROFLOXACIN-FLUOCINOLONE PF 0.3-0.025 % OT SOLN	24338-080-14	A9270	\$79.58	\$77.99	\$78.78	\$73.45	\$77.99
Inpatient/Outpatient	CIPROFLOXACIN-FLUOCINOLONE PF 0.3-0.025 % OT SOLN	52536-080-14	A9270	\$65.87	\$64.55	\$65.21	\$60.80	\$64.55
Inpatient/Outpatient	CIPROFLOXACIN-FLUOCINOLONE PF 0.3-0.025 % OT SOLN	42195-128-14	A9270	\$71.80	\$70.36	\$71.08	\$66.27	\$70.36
Inpatient/Outpatient	LEVETIRACETAM 100 MG/ML PO SOLN	50474-001-48	A9270	\$7.07	\$6.93	\$7.00	\$6.53	\$6.93
Inpatient/Outpatient	LEVETIRACETAM 100 MG/ML PO SOLN	50383-241-05	A9270	\$3.48	\$3.41	\$3.45	\$3.21	\$3.41
Inpatient/Outpatient	LEVETIRACETAM 100 MG/ML PO SOLN	16714-358-01	A9270	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	LEVETIRACETAM 100 MG/ML PO SOLN	0121-4799-05	A9270	\$2.30	\$2.25	\$2.28	\$2.12	\$2.25
Inpatient/Outpatient	LEVETIRACETAM 100 MG/ML PO SOLN	99999-224-05	A9270	\$0.22	\$0.22	\$0.22	\$0.20	\$0.22
Inpatient/Outpatient	LEVETIRACETAM 100 MG/ML PO SOLN	63739-019-70	A9270	\$1.82	\$1.78	\$1.80	\$1.68	\$1.78
Inpatient/Outpatient	LEVETIRACETAM 100 MG/ML PO SOLN	50383-241-16	A9270	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	LEVETIRACETAM 100 MG/ML PO SOLN	0904-7060-94	A9270	\$1.87	\$1.83	\$1.85	\$1.73	\$1.83
Inpatient/Outpatient	LEVETIRACETAM 100 MG/ML PO SOLN	60687-249-40	A9270	\$2.32	\$2.27	\$2.30	\$2.14	\$2.27
Inpatient/Outpatient	PALONOSETRON HCL 0.25 MG/5ML IV SOLN	69097-927-35	J2469	\$118.03	\$115.67	\$116.85	\$108.94	\$115.67
Inpatient/Outpatient	PALONOSETRON HCL 0.25 MG/5ML IV SOLN	62856-797-01	J2469	\$181.59	\$177.96	\$179.77	\$167.61	\$177.96
Inpatient/Outpatient	PALONOSETRON HCL 0.25 MG/5ML IV SOLN	55111-694-07	J2469	\$6.41	\$6.28	\$6.35	\$5.92	\$6.28
Inpatient/Outpatient	PALONOSETRON HCL 0.25 MG/5ML IV SOLN	67457-317-25	J2469	\$15.81	\$15.49	\$15.65	\$14.59	\$15.49
Inpatient/Outpatient	PALONOSETRON HCL 0.25 MG/5ML IV SOLN	25021-783-05	J2469	\$13.10	\$12.84	\$12.97	\$12.09	\$12.84
Inpatient/Outpatient	PALONOSETRON HCL 0.25 MG/5ML IV SOLN	0703-4094-01	J2469	\$72.90	\$71.44	\$72.17	\$67.29	\$71.44

Inpatient/Outpatient	PALONOSETRON HCL 0.25 MG/5ML IV SOLN	69543-371-01	J2469	\$14.79	\$14.49	\$14.64	\$13.65	\$14.49
Inpatient/Outpatient	PALONOSETRON HCL 0.25 MG/5ML IV SOLN	36000-326-01	J2469	\$5.42	\$5.31	\$5.37	\$5.00	\$5.31
Inpatient/Outpatient	PALONOSETRON HCL 0.25 MG/5ML IV SOLN	63323-673-05	J2469	\$6.75	\$6.62	\$6.68	\$6.23	\$6.62
Inpatient/Outpatient	BUPROPION HCL ER (XL) 150 MG PO TB24	0591-3331-19	A9270	\$6.34	\$6.21	\$6.28	\$5.85	\$6.21
Inpatient/Outpatient	BUPROPION HCL ER (XL) 150 MG PO TB24	10370-101-03	A9270	\$2.26	\$2.21	\$2.24	\$2.09	\$2.21
Inpatient/Outpatient	BUPROPION HCL ER (XL) 150 MG PO TB24	51079-047-01	A9270	\$5.26	\$5.15	\$5.21	\$4.85	\$5.15
Inpatient/Outpatient	BUPROPION HCL ER (XL) 150 MG PO TB24	60687-146-11	A9270	\$5.29	\$5.18	\$5.24	\$4.88	\$5.18
Inpatient/Outpatient	BUPROPION HCL ER (XL) 150 MG PO TB24	69097-875-02	A9270	\$5.39	\$5.28	\$5.34	\$4.97	\$5.28
Inpatient/Outpatient	BUPROPION HCL ER (XL) 150 MG PO TB24	43598-655-30	A9270	\$0.43	\$0.42	\$0.43	\$0.40	\$0.42
Inpatient/Outpatient	BUPROPION HCL ER (XL) 150 MG PO TB24	68382-353-16	A9270	\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	BUPROPION HCL ER (XL) 150 MG PO TB24	68180-319-06	A9270	\$0.89	\$0.87	\$0.88	\$0.82	\$0.87
Inpatient/Outpatient	BUPROPION HCL ER (XL) 150 MG PO TB24	70436-010-04	A9270	\$4.77	\$4.67	\$4.72	\$4.40	\$4.67
Inpatient/Outpatient	BUPROPION HCL ER (XL) 150 MG PO TB24	16729-443-10	A9270	\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	BUPROPION HCL ER (XL) 150 MG PO TB24	0527-2415-32	A9270	\$0.30	\$0.29	\$0.30	\$0.28	\$0.29
Inpatient/Outpatient	BUPROPION HCL ER (XL) 300 MG PO TB24	67767-142-30	A9270	\$7.92	\$7.76	\$7.84	\$7.31	\$7.76
Inpatient/Outpatient	BUPROPION HCL ER (XL) 300 MG PO TB24	67767-142-90	A9270	\$4.26	\$4.17	\$4.22	\$3.93	\$4.17
Inpatient/Outpatient	BUPROPION HCL ER (XL) 300 MG PO TB24	51079-109-01	A9270	\$9.19	\$9.01	\$9.10	\$8.48	\$9.01
Inpatient/Outpatient	BUPROPION HCL ER (XL) 300 MG PO TB24	10370-102-03	A9270	\$2.31	\$2.26	\$2.29	\$2.13	\$2.26
Inpatient/Outpatient	BUPROPION HCL ER (XL) 300 MG PO TB24	0591-3332-30	A9270	\$7.92	\$7.76	\$7.84	\$7.31	\$7.76
Inpatient/Outpatient	BUPROPION HCL ER (XL) 300 MG PO TB24	0904-6573-04	A9270	\$4.65	\$4.56	\$4.60	\$4.29	\$4.56
Inpatient/Outpatient	BUPROPION HCL ER (XL) 300 MG PO TB24	70436-011-04	A9270	\$0.93	\$0.91	\$0.92	\$0.86	\$0.91
Inpatient/Outpatient	AMIODARONE HCL 100 MG PO TABS	0245-0144-01	A9270	\$2.07	\$2.03	\$2.05	\$1.91	\$2.03
Inpatient/Outpatient	AMIODARONE HCL 100 MG PO TABS	0245-0144-89	A9270	\$10.21	\$10.01	\$10.11	\$9.42	\$10.01
Inpatient/Outpatient	DOCUSATE SODIUM 50 MG/5ML PO LIQD	0121-0544-10	A9150	\$0.21	\$0.21	\$0.21	\$0.19	\$0.21
Inpatient/Outpatient	DOCUSATE SODIUM 50 MG/5ML PO LIQD	0121-0544-16	A9150	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	DOCUSATE SODIUM 50 MG/5ML PO LIQD	50383-349-10	A9150	\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	DOCUSATE SODIUM 50 MG/5ML PO LIQD	99999-771-10	A9150	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	DOCUSATE SODIUM 50 MG/5ML PO LIQD	0121-1870-00	A9150	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	DOCUSATE SODIUM 50 MG/5ML PO LIQD	0121-1870-10	A9150	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	MEMANTINE HCL 10 MG PO TABS	0456-3210-60	A9270	\$33.55	\$32.88	\$33.21	\$30.97	\$32.88
Inpatient/Outpatient	MEMANTINE HCL 10 MG PO TABS	0456-3210-11	A9270	\$15.94	\$15.62	\$15.78	\$14.71	\$15.62
Inpatient/Outpatient	MEMANTINE HCL 10 MG PO TABS	0591-3875-45	A9270	\$2.50	\$2.45	\$2.48	\$2.31	\$2.45
Inpatient/Outpatient	MEMANTINE HCL 10 MG PO TABS	0904-6506-61	A9270	\$1.54	\$1.51	\$1.52	\$1.42	\$1.51
Inpatient/Outpatient	THEOPHYLLINE ER 400 MG PO TB24	68462-380-01	A9270	\$6.60	\$6.47	\$6.53	\$6.09	\$6.47
Inpatient/Outpatient	PHENOL 1.4 % MT LIQD	78112-01103	A9150	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	PHENOL 1.4 % MT LIQD	78112-01104	A9150	\$17.64	\$17.29	\$17.46	\$16.28	\$17.29
Inpatient/Outpatient	PHENOL 1.4 % MT LIQD	0904-6305-21	A9150	\$0.04	\$0.04	\$0.04	\$0.04	\$0.04
Inpatient/Outpatient	PHENOL 1.4 % MT LIQD	0536-1228-58	A9150	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	PHENOL 1.4 % MT LIQD	78112-01255	A9150	\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	EPLERENONE 25 MG PO TABS	0025-1710-01	A9270	\$51.76	\$50.72	\$51.24	\$47.77	\$50.72
Inpatient/Outpatient	EPLERENONE 25 MG PO TABS	60505-2651-9	A9270	\$8.24	\$8.08	\$8.16	\$7.61	\$8.08
Inpatient/Outpatient	EPLERENONE 25 MG PO TABS	0185-5368-30	A9270	\$7.75	\$7.60	\$7.67	\$7.15	\$7.60
Inpatient/Outpatient	EPLERENONE 25 MG PO TABS	59762-1710-3	A9270	\$9.26	\$9.07	\$9.17	\$8.55	\$9.07
Inpatient/Outpatient	EPLERENONE 25 MG PO TABS	59762-1710-2	A9270	\$6.33	\$6.20	\$6.27	\$5.84	\$6.20
Inpatient/Outpatient	EPLERENONE 25 MG PO TABS	16729-293-10	A9270	\$3.47	\$3.40	\$3.44	\$3.20	\$3.40
Inpatient/Outpatient	EPLERENONE 25 MG PO TABS	51991-877-33	A9270	\$3.44	\$3.37	\$3.41	\$3.18	\$3.37
Inpatient/Outpatient	DAPTOMYCIN 500 MG IV SOLR	67919-011-01	J0878	\$1,421.15	\$1,392.73	\$1,406.94	\$1,311.72	\$1,392.73
Inpatient/Outpatient	DAPTOMYCIN 500 MG IV SOLR	67919-012-01	J0878	\$1,413.85	\$1,385.57	\$1,399.71	\$1,304.98	\$1,385.57
Inpatient/Outpatient	DAPTOMYCIN 500 MG IV SOLR	67919-012-02	J0878	\$327.03	\$320.49	\$323.76	\$301.85	\$320.49
Inpatient/Outpatient	DAPTOMYCIN 500 MG IV SOLR	0409-0106-01	J0878	\$519.21	\$508.83	\$514.02	\$479.23	\$508.83
Inpatient/Outpatient	DAPTOMYCIN 500 MG IV SOLR	67457-813-50	J0878	\$140.21	\$137.41	\$138.81	\$129.41	\$137.41
Inpatient/Outpatient	DAPTOMYCIN 500 MG IV SOLR	69097-807-37	J0878	\$144.73	\$141.84	\$143.28	\$133.59	\$141.84
Inpatient/Outpatient	DAPTOMYCIN 500 MG IV SOLR	71839-107-01	J0878	\$421.78	\$413.34	\$417.56	\$389.30	\$413.34
Inpatient/Outpatient	DAPTOMYCIN 500 MG IV SOLR	0143-9378-01	J0878	\$158.29	\$155.12	\$156.71	\$146.10	\$155.12
Inpatient/Outpatient	DAPTOMYCIN 500 MG IV SOLR	70594-034-01	J0878	\$85.15	\$83.45	\$84.30	\$78.59	\$83.45
Inpatient/Outpatient	DAPTOMYCIN 500 MG IV SOLR	60505-6229-4	J0878	\$76.79	\$75.25	\$76.02	\$70.88	\$75.25
Inpatient/Outpatient	DAPTOMYCIN 500 MG IV SOLR	43598-413-11	J0878	\$72.37	\$70.92	\$71.65	\$66.80	\$70.92
Inpatient/Outpatient	MEMANTINE HCL 5 MG PO TABS	0456-3205-60	A9270	\$33.55	\$32.88	\$33.21	\$30.97	\$32.88
Inpatient/Outpatient	MEMANTINE HCL 5 MG PO TABS	0456-3205-11	A9270	\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	MEMANTINE HCL 5 MG PO TABS	0591-3870-45	A9270	\$1.52	\$1.49	\$1.50	\$1.40	\$1.49
Inpatient/Outpatient	MEMANTINE HCL 5 MG PO TABS	55111-596-60	A9270	\$2.03	\$1.99	\$2.01	\$1.87	\$1.99
Inpatient/Outpatient	MEMANTINE HCL 5 MG PO TABS	0904-6505-61	A9270	\$1.26	\$1.23	\$1.25	\$1.16	\$1.23
Inpatient/Outpatient	TOBRAMYCIN FOR INHALATION 40 MG/ML (NICU/INFANT)	0703-9402-04	J7682	\$4.56	\$4.47	\$4.51	\$4.21	\$4.47
Inpatient/Outpatient	TOBRAMYCIN FOR INHALATION 40 MG/ML (NICU/INFANT)	63323-306-02	J7682	\$3.16	\$3.10	\$3.13	\$2.92	\$3.10
Inpatient/Outpatient	TOBRAMYCIN FOR INHALATION 40 MG/ML (NICU/INFANT)	0409-3578-01	J7682	\$5.41	\$5.30	\$5.36	\$4.99	\$5.30
Inpatient/Outpatient	TOBRAMYCIN FOR INHALATION 40 MG/ML (NICU/INFANT)	99999-412-05	J7682	\$5.41	\$5.30	\$5.36	\$4.99	\$5.30
Inpatient/Outpatient	BSS IO SOLN	0065-0795-15		\$1.66	\$1.63	\$1.64	\$1.53	\$1.63
Inpatient/Outpatient	BSS IO SOLN	0264-2514-10		\$0.06	\$0.06	\$0.06	\$0.06	\$0.06

Inpatient/Outpatient	TOPIRAMATE 50 MG PO TABS	31722-279-60	A9270	\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	TOPIRAMATE 50 MG PO TABS	0093-7540-06	A9270	\$0.55	\$0.54	\$0.54	\$0.51	\$0.54
Inpatient/Outpatient	TOPIRAMATE 50 MG PO TABS	62756-710-86	A9270	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	TOPIRAMATE 50 MG PO TABS	51079-727-01	A9270	\$0.75	\$0.74	\$0.74	\$0.69	\$0.74
Inpatient/Outpatient	TOPIRAMATE 50 MG PO TABS	50268-751-11	A9270	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	TOPIRAMATE 50 MG PO TABS	47335-710-86	A9270	\$0.44	\$0.43	\$0.44	\$0.41	\$0.43
Inpatient/Outpatient	TOPIRAMATE 50 MG PO TABS	69097-123-03	A9270	\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	SELENIUM SULFIDE 2.5 % EX LOTN	45802-040-64	A9270	\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	ESCITALOPRAM OXALATE 5 MG PO TABS	0456-2005-01	A9270	\$49.82	\$48.82	\$49.32	\$45.98	\$48.82
Inpatient/Outpatient	ESCITALOPRAM OXALATE 5 MG PO TABS	0093-5850-01	A9270	\$1.01	\$0.99	\$1.00	\$0.93	\$0.99
Inpatient/Outpatient	ESCITALOPRAM OXALATE 5 MG PO TABS	43547-280-10	A9270	\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	METOPROLOL TARTRATE 25 MG PO TABS	0378-0018-01	A9270	\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	METOPROLOL TARTRATE 25 MG PO TABS	62584-265-01	A9270	\$0.40	\$0.39	\$0.40	\$0.37	\$0.39
Inpatient/Outpatient	METOPROLOL TARTRATE 25 MG PO TABS	51079-255-01	A9270	\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	METOPROLOL TARTRATE 25 MG PO TABS	0904-6162-61	A9270	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	METOPROLOL TARTRATE 25 MG PO TABS	62584-265-11	A9270	\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	METOPROLOL TARTRATE 25 MG PO TABS	65862-062-99	A9270	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	METOPROLOL TARTRATE 25 MG PO TABS	65862-062-01	A9270	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	METOPROLOL TARTRATE 25 MG PO TABS	0904-6340-61	A9270	\$0.22	\$0.22	\$0.22	\$0.20	\$0.22
Inpatient/Outpatient	CLINDAMYCIN PALMITATE HCL 75 MG/5ML PO SOLR	0009-0760-04	A9270	\$6.19	\$6.07	\$6.13	\$5.71	\$6.07
Inpatient/Outpatient	CLINDAMYCIN PALMITATE HCL 75 MG/5ML PO SOLR	59762-0016-1	A9270	\$1.87	\$1.83	\$1.85	\$1.73	\$1.83
Inpatient/Outpatient	CLINDAMYCIN PALMITATE HCL 75 MG/5ML PO SOLR	0378-8730-35	A9270	\$1.17	\$1.15	\$1.16	\$1.08	\$1.15
Inpatient/Outpatient	CLINDAMYCIN PALMITATE HCL 75 MG/5ML PO SOLR	64980-511-10	A9270	\$2.26	\$2.21	\$2.24	\$2.09	\$2.21
Inpatient/Outpatient	CLINDAMYCIN PALMITATE HCL 75 MG/5ML PO SOLR	65162-468-19	A9270	\$1.42	\$1.39	\$1.41	\$1.31	\$1.39
Inpatient/Outpatient	CLINDAMYCIN PALMITATE HCL 75 MG/5ML PO SOLR	65862-596-01	A9270	\$0.81	\$0.79	\$0.80	\$0.75	\$0.79
Inpatient/Outpatient	CLINDAMYCIN PALMITATE HCL 75 MG/5ML PO SOLR	16714-483-01	A9270	\$0.68	\$0.67	\$0.67	\$0.63	\$0.67
Inpatient/Outpatient	PROPAFENONE HCL ER 225 MG PO CP12	49884-099-02	A9270	\$23.35	\$22.88	\$23.12	\$21.55	\$22.88
Inpatient/Outpatient	PROPAFENONE HCL ER 225 MG PO CP12	60687-185-33	A9270	\$26.45	\$26.45	\$26.19	\$24.41	\$25.92
Inpatient/Outpatient	PROPAFENONE HCL ER 225 MG PO CP12	42291-545-60	A9270	\$13.29	\$13.02	\$13.16	\$12.27	\$13.02
Inpatient/Outpatient	PROPAFENONE HCL ER 225 MG PO CP12	68462-408-60	A9270	\$8.58	\$8.41	\$8.49	\$7.92	\$8.41
Inpatient/Outpatient	PROPAFENONE HCL ER 225 MG PO CP12	16714-825-01	A9270	\$6.98	\$6.84	\$6.91	\$6.44	\$6.84
Inpatient/Outpatient	PROPAFENONE HCL ER 225 MG PO CP12	69680-130-60	A9270	\$6.08	\$5.96	\$6.02	\$5.61	\$5.96
Inpatient/Outpatient	PROPAFENONE HCL ER 325 MG PO CP12	49884-210-02	A9270	\$25.45	\$24.94	\$25.20	\$23.49	\$24.94
Inpatient/Outpatient	PROPAFENONE HCL ER 325 MG PO CP12	68462-409-60	A9270	\$10.37	\$10.16	\$10.27	\$9.57	\$10.16
Inpatient/Outpatient	PROPAFENONE HCL ER 325 MG PO CP12	16714-826-01	A9270	\$7.34	\$7.19	\$7.27	\$6.77	\$7.19
Inpatient/Outpatient	PROPAFENONE HCL ER 325 MG PO CP12	69680-131-60	A9270	\$6.89	\$6.75	\$6.82	\$6.36	\$6.75
Inpatient/Outpatient	PROPAFENONE HCL ER 425 MG PO CP12	49884-211-02	A9270	\$36.00	\$35.28	\$35.64	\$33.23	\$35.28
Inpatient/Outpatient	PROPAFENONE HCL ER 425 MG PO CP12	68462-410-60	A9270	\$11.60	\$11.37	\$11.48	\$10.71	\$11.37
Inpatient/Outpatient	PROPAFENONE HCL ER 425 MG PO CP12	16714-827-01	A9270	\$4.67	\$4.58	\$4.62	\$4.31	\$4.58
Inpatient/Outpatient	GLIPIZIDE ER 2.5 MG PO TB24	0049-1620-30	A9270	\$3.63	\$3.56	\$3.59	\$3.35	\$3.56
Inpatient/Outpatient	GLIPIZIDE ER 2.5 MG PO TB24	59762-5031-1	A9270	\$0.82	\$0.80	\$0.81	\$0.76	\$0.80
Inpatient/Outpatient	GLIPIZIDE ER 2.5 MG PO TB24	0591-0900-30	A9270	\$1.08	\$1.06	\$1.07	\$1.00	\$1.06
Inpatient/Outpatient	GLIPIZIDE ER 2.5 MG PO TB24	68084-295-21	A9270	\$4.20	\$4.12	\$4.16	\$3.88	\$4.12
Inpatient/Outpatient	GLIPIZIDE ER 2.5 MG PO TB24	68084-295-11	A9270	\$2.15	\$2.11	\$2.13	\$1.98	\$2.11
Inpatient/Outpatient	GLIPIZIDE ER 5 MG PO TB24	0591-0844-01	A9270	\$1.12	\$1.10	\$1.11	\$1.03	\$1.10
Inpatient/Outpatient	GLIPIZIDE ER 5 MG PO TB24	68084-111-11	A9270	\$2.37	\$2.32	\$2.35	\$2.19	\$2.32
Inpatient/Outpatient	GLIPIZIDE ER 10 MG PO TB24	59762-5033-1	A9270	\$1.28	\$1.25	\$1.27	\$1.18	\$1.25
Inpatient/Outpatient	GLIPIZIDE ER 10 MG PO TB24	0591-0845-01	A9270	\$2.12	\$2.08	\$2.10	\$1.96	\$2.08
Inpatient/Outpatient	GUAIFENESIN ER 600 MG PO TB12	63824-008-50	A9270	\$1.46	\$1.43	\$1.45	\$1.35	\$1.43
Inpatient/Outpatient	GUAIFENESIN ER 600 MG PO TB12	17856-008-02	A9270	\$2.62	\$2.57	\$2.59	\$2.42	\$2.57
Inpatient/Outpatient	GUAIFENESIN ER 600 MG PO TB12	68084-572-11	A9270	\$3.21	\$3.15	\$3.18	\$2.96	\$3.15
Inpatient/Outpatient	GUAIFENESIN ER 600 MG PO TB12	0904-6718-39	A9270	\$2.59	\$2.54	\$2.56	\$2.39	\$2.54
Inpatient/Outpatient	GUAIFENESIN ER 600 MG PO TB12	70677-0055-1	A9270	\$1.15	\$1.13	\$1.14	\$1.06	\$1.13
Inpatient/Outpatient	MAGNESIUM SULFATE IVPB 2 G IN 50 ML PREMIX	63323-106-26	J3475	\$0.37	\$0.36	\$0.37	\$0.34	\$0.36
Inpatient/Outpatient	MAGNESIUM SULFATE IVPB 2 G IN 50 ML PREMIX	63323-106-05	J3475	\$0.37	\$0.36	\$0.37	\$0.34	\$0.36
Inpatient/Outpatient	MAGNESIUM SULFATE IVPB 2 G IN 50 ML PREMIX	0409-6729-24	J3475	\$1.30	\$1.27	\$1.29	\$1.20	\$1.27
Inpatient/Outpatient	MAGNESIUM SULFATE IVPB 2 G IN 50 ML PREMIX	99999-106-02	J3475	\$0.37	\$0.36	\$0.37	\$0.34	\$0.36
Inpatient/Outpatient	MAGNESIUM SULFATE IVPB 2 G IN 50 ML PREMIX	63323-106-02	J3475	\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	MAGNESIUM SULFATE IVPB 2 G IN 50 ML PREMIX	63323-106-03	J3475	\$0.37	\$0.36	\$0.37	\$0.34	\$0.36
Inpatient/Outpatient	MAGNESIUM SULFATE IVPB 2 G IN 50 ML PREMIX	44567-420-24	J3475	\$0.61	\$0.60	\$0.60	\$0.56	\$0.60
Inpatient/Outpatient	MAGNESIUM SULFATE IVPB 2 G IN 50 ML PREMIX	0264-4204-52	J3475	\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	PENMETREXED DISODIUM 500 MG IV SOLR	0002-7623-01	J9305	\$7,881.88	\$7,724.24	\$7,803.06	\$7,274.98	\$7,724.24
Inpatient/Outpatient	FENTANYL CITRATE (PF) 1000 MCG/ML IJ SOLN	33216-2867-0	J3010	\$53.36	\$52.29	\$52.83	\$49.25	\$52.29
Inpatient/Outpatient	RHO D IMMUNE GLOBULIN 1500 UNIT/2ML IJ SOSY	44206-300-01	J2791	\$197.85	\$193.89	\$195.87	\$182.62	\$193.89
Inpatient/Outpatient	RHO D IMMUNE GLOBULIN 1500 UNIT/2ML IJ SOSY	44206-300-90	J2791	\$395.70	\$387.79	\$391.74	\$365.23	\$387.79
Inpatient/Outpatient	HYPROMELLOSE 2.5 % OP SOLN	17478-064-12	A9270	\$5.31	\$5.20	\$5.26	\$4.90	\$5.20
Inpatient/Outpatient	HYPROMELLOSE 2.5 % OP SOLN	17238-610-15	A9270	\$1.96	\$1.92	\$1.94	\$1.81	\$1.92
Inpatient/Outpatient	HYPROMELLOSE 2.5 % OP SOLN	59390-182-13	A9270	\$6.40	\$6.27	\$6.34	\$5.91	\$6.27

Inpatient/Outpatient	HYPROMELLOSE 2.5 % OP SOLN	54799-503-15	A9270	\$4.17	\$4.09	\$4.13	\$3.85	\$4.09
Inpatient/Outpatient	CINACALCET HCL 30 MG PO TABS	55513-073-30	J0604	\$82.40	\$80.75	\$81.58	\$76.06	\$80.75
Inpatient/Outpatient	CINACALCET HCL 30 MG PO TABS	70436-007-04	J0604	\$25.63	\$25.12	\$25.37	\$23.66	\$25.12
Inpatient/Outpatient	CINACALCET HCL 30 MG PO TABS	47335-379-83	J0604	\$12.82	\$12.56	\$12.69	\$11.83	\$12.56
Inpatient/Outpatient	CINACALCET HCL 30 MG PO TABS	69097-410-02	J0604	\$2.26	\$2.21	\$2.24	\$2.09	\$2.21
Inpatient/Outpatient	CINACALCET HCL 30 MG PO TABS	16714-078-01	J0604	\$2.08	\$2.04	\$2.06	\$1.92	\$2.04
Inpatient/Outpatient	CINACALCET HCL 30 MG PO TABS	64380-883-04	J0604	\$7.18	\$7.04	\$7.11	\$6.63	\$7.04
Inpatient/Outpatient	CINACALCET HCL 30 MG PO TABS	16729-440-10	J0604	\$1.14	\$1.12	\$1.13	\$1.05	\$1.12
Inpatient/Outpatient	LACTULOSE 10 GM/15ML PO SOLN	0121-4577-30	A9270	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	LACTULOSE 10 GM/15ML PO SOLN	50383-779-30	A9270	\$2.27	\$2.22	\$2.25	\$2.10	\$2.22
Inpatient/Outpatient	LACTULOSE 10 GM/15ML PO SOLN	0121-1154-00	A9270	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	LACTULOSE 10 GM/15ML PO SOLN	0121-1154-30	A9270	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	LACTULOSE 10 GM/15ML PO SOLN	45963-439-65	A9270	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	LACTULOSE 10 GM/15ML PO SOLN	0121-0873-16	A9270	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	LACTULOSE 10 GM/15ML PO SOLN	0527-5125-70	A9270	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	FERROUS SULFATE 75 (15 FE) MG/ML PO SOLN	54838-011-50	A9150	\$0.32	\$0.31	\$0.32	\$0.30	\$0.31
Inpatient/Outpatient	FERROUS SULFATE 75 (15 FE) MG/ML PO SOLN	50383-627-50	A9150	\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	FERROUS SULFATE 75 (15 FE) MG/ML PO SOLN	0087-0740-02	A9150	\$0.81	\$0.79	\$0.80	\$0.75	\$0.79
Inpatient/Outpatient	OLANZAPINE 10 MG IJ SOLR	0002-7597-01	J2358	\$220.74	\$216.33	\$218.53	\$203.74	\$216.33
Inpatient/Outpatient	OLANZAPINE 10 MG IJ SOLR	0517-0955-01	J2358	\$127.23	\$124.69	\$125.96	\$117.43	\$124.69
Inpatient/Outpatient	OLANZAPINE 10 MG IJ SOLR	0781-9105-72	J2358	\$68.67	\$67.30	\$67.98	\$63.38	\$67.30
Inpatient/Outpatient	OLANZAPINE 10 MG IJ SOLR	55150-308-01	J2358	\$172.24	\$168.80	\$170.52	\$158.98	\$168.80
Inpatient/Outpatient	OLANZAPINE 10 MG IJ SOLR	0781-3159-72	J2358	\$68.67	\$67.30	\$67.98	\$63.38	\$67.30
Inpatient/Outpatient	CYCLOPHOSPHAMIDE 1 G IJ SOLR	10019-956-01	J9070	\$935.57	\$916.86	\$926.21	\$863.53	\$916.86
Inpatient/Outpatient	CYCLOPHOSPHAMIDE 1 G IJ SOLR	10019-956-16	J9070	\$208.69	\$204.52	\$206.60	\$192.62	\$204.52
Inpatient/Outpatient	CYCLOPHOSPHAMIDE 1 G IJ SOLR	10019-944-50	J9070	\$1,340.16	\$1,313.36	\$1,326.76	\$1,236.97	\$1,313.36
Inpatient/Outpatient	CYCLOPHOSPHAMIDE 1 G IJ SOLR	70121-1239-1	J9070	\$682.34	\$668.69	\$675.52	\$629.80	\$668.69
Inpatient/Outpatient	CYCLOPHOSPHAMIDE 500 MG IJ SOLR	10019-955-50	J9070	\$115.91	\$113.59	\$114.75	\$106.98	\$113.59
Inpatient/Outpatient	CYCLOPHOSPHAMIDE 500 MG IJ SOLR	10019-955-01	J9070	\$559.17	\$547.99	\$553.58	\$516.11	\$547.99
Inpatient/Outpatient	RIVAROXABAN 2.5 MG PO TABS	50458-577-10	A9270	\$29.21	\$28.63	\$28.92	\$26.96	\$28.63
Inpatient/Outpatient	RIVAROXABAN 2.5 MG PO TABS	50458-577-01	A9270	\$25.42	\$24.91	\$25.17	\$23.46	\$24.91
Inpatient/Outpatient	ACETYLCYSTEINE 200 MG/ML IV SOLN	66220-107-30	J0132	\$26.92	\$26.38	\$26.65	\$24.85	\$26.38
Inpatient/Outpatient	ACETYLCYSTEINE 200 MG/ML IV SOLN	63323-963-30	J0132	\$5.52	\$5.41	\$5.46	\$5.09	\$5.41
Inpatient/Outpatient	ACETYLCYSTEINE 200 MG/ML IV SOLN	66220-207-30	J0132	\$31.32	\$30.69	\$31.01	\$28.91	\$30.69
Inpatient/Outpatient	ACETYLCYSTEINE 200 MG/ML IV SOLN	55150-259-30	J0132	\$6.55	\$6.42	\$6.48	\$6.05	\$6.42
Inpatient/Outpatient	ACETYLCYSTEINE 200 MG/ML IV SOLN	25021-812-30	J0132	\$24.30	\$23.81	\$24.06	\$22.43	\$23.81
Inpatient/Outpatient	ACETYLCYSTEINE 200 MG/ML IV SOLN	63323-963-21	J0132	\$9.72	\$9.53	\$9.62	\$8.97	\$9.53
Inpatient/Outpatient	ACETYLCYSTEINE 200 MG/ML IV SOLN	63323-963-41	J0132	\$7.36	\$7.29	\$7.29	\$6.79	\$7.21
Inpatient/Outpatient	TIOTROPIUM BROMIDE MONOHYDRATE 18 MCG IN CAPS	0597-0075-75	A9270	\$86.04	\$84.32	\$85.18	\$79.41	\$84.32
Inpatient/Outpatient	FLUTICASONE-SALMETEROL 232-14 MCG/ACT IN AEPB	0093-3609-82		\$367.08	\$359.74	\$363.41	\$338.81	\$359.74
Inpatient/Outpatient	FLUTICASONE-SALMETEROL 232-14 MCG/ACT IN AEPB	59310-822-06		\$1,216.48	\$1,192.15	\$1,204.32	\$1,122.81	\$1,192.15
Inpatient/Outpatient	FLUOXETINE HCL 20 MG/5ML PO SOLN	0121-0721-04	A9270	\$1.85	\$1.81	\$1.83	\$1.71	\$1.81
Inpatient/Outpatient	FLUOXETINE HCL 20 MG/5ML PO SOLN	60505-0352-1	A9270	\$4.79	\$4.69	\$4.74	\$4.42	\$4.69
Inpatient/Outpatient	FLUOXETINE HCL 20 MG/5ML PO SOLN	0121-4721-05	A9270	\$4.05	\$3.97	\$4.01	\$3.74	\$3.97
Inpatient/Outpatient	FLUOXETINE HCL 20 MG/5ML PO SOLN	54838-523-40	A9270	\$1.34	\$1.31	\$1.33	\$1.24	\$1.31
Inpatient/Outpatient	M.V.I. ADULT IV INJ	61703-422-82		\$2.11	\$2.07	\$2.09	\$1.95	\$2.07
Inpatient/Outpatient	NEOMYCIN-BACITRACIN ZN-POLYMYX 5-400-10000 OP OINT	24208-780-55	A9270	\$18.09	\$17.73	\$17.91	\$16.70	\$17.73
Inpatient/Outpatient	NEOMYCIN-BACITRACIN ZN-POLYMYX 5-400-10000 OP OINT	0574-4250-35	A9270	\$7.58	\$7.43	\$7.50	\$7.00	\$7.43
Inpatient/Outpatient	TEMAZEPAM 15 MG PO CAPS	0228-2076-10	A9270	\$0.44	\$0.43	\$0.44	\$0.41	\$0.43
Inpatient/Outpatient	TEMAZEPAM 15 MG PO CAPS	63739-231-10	A9270	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	TEMAZEPAM 15 MG PO CAPS	63739-877-10	A9270	\$0.40	\$0.39	\$0.40	\$0.37	\$0.39
Inpatient/Outpatient	TEMAZEPAM 15 MG PO CAPS	67877-146-01	A9270	\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	PEG 3350-KCL-NACB-NACL-NASULF 240 G PO SOLR	62175-446-01	A9270	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	PEG 3350-KCL-NACB-NACL-NASULF 240 G PO SOLR	43386-060-19	A9270	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	RIFAXIMIN 200 MG PO TABS	65649-301-03	A9270	\$43.62	\$42.75	\$43.18	\$40.26	\$42.75
Inpatient/Outpatient	RIFAXIMIN 200 MG PO TABS	65649-301-41	A9270	\$61.78	\$60.54	\$61.16	\$57.02	\$60.54
Inpatient/Outpatient	NITAZOXANIDE 500 MG PO TABS	67546-111-11	A9270	\$99.31	\$97.32	\$98.32	\$91.66	\$97.32
Inpatient/Outpatient	NITAZOXANIDE 500 MG PO TABS	67546-111-12	A9270	\$427.52	\$418.97	\$423.24	\$394.60	\$418.97
Inpatient/Outpatient	NITAZOXANIDE 500 MG PO TABS	67546-111-14	A9270	\$459.43	\$450.24	\$454.84	\$424.05	\$450.24
Inpatient/Outpatient	NITAZOXANIDE 500 MG PO TABS	43386-405-12	A9270	\$237.71	\$232.96	\$235.33	\$219.41	\$232.96
Inpatient/Outpatient	EMTRICITABINE-TENOFOVIR DF 200-300 MG PO TABS	61958-0701-1	A9270	\$289.50	\$283.71	\$286.61	\$267.21	\$283.71
Inpatient/Outpatient	EMTRICITABINE-TENOFOVIR DF 200-300 MG PO TABS	0093-7607-56	A9270	\$201.54	\$197.51	\$199.52	\$186.02	\$197.51
Inpatient/Outpatient	EMTRICITABINE-TENOFOVIR DF 200-300 MG PO TABS	0093-7704-56	A9270	\$4.07	\$3.99	\$4.03	\$3.76	\$3.99
Inpatient/Outpatient	EMTRICITABINE-TENOFOVIR DF 200-300 MG PO TABS	42385-953-30	A9270	\$4.05	\$3.97	\$4.01	\$3.74	\$3.97
Inpatient/Outpatient	CARBOPLATIN 50 MG/5ML IV SOLN (DESENSITIZATION)	0703-4244-01	J9045	\$4.27	\$4.18	\$4.23	\$3.94	\$4.18
Inpatient/Outpatient	CARBOPLATIN 150 MG/15ML IV SOLN	0703-4246-01	J9045	\$2.63	\$2.58	\$2.60	\$2.43	\$2.58
Inpatient/Outpatient	CARBOPLATIN 150 MG/15ML IV SOLN	0703-4246-81	J9045	\$2.63	\$2.58	\$2.60	\$2.43	\$2.58
Inpatient/Outpatient	CARBOPLATIN 150 MG/15ML IV SOLN	16729-295-33	J9045	\$2.58	\$2.53	\$2.55	\$2.38	\$2.53

Inpatient/Outpatient	CARBOPLATIN 450 MG/45ML IV SOLN	0703-4248-01	J9045	\$2.34	\$2.29	\$2.32	\$2.16	\$2.29
Inpatient/Outpatient	CARBOPLATIN 450 MG/45ML IV SOLN	63323-172-45	J9045	\$9.55	\$9.36	\$9.45	\$8.81	\$9.36
Inpatient/Outpatient	CARBOPLATIN 450 MG/45ML IV SOLN	25021-202-45	J9045	\$3.61	\$3.54	\$3.57	\$3.33	\$3.54
Inpatient/Outpatient	CARBOPLATIN 450 MG/45ML IV SOLN	0703-4248-81	J9045	\$1.91	\$1.87	\$1.89	\$1.76	\$1.87
Inpatient/Outpatient	CARBOPLATIN 450 MG/45ML IV SOLN	16729-295-34	J9045	\$2.70	\$2.65	\$2.67	\$2.49	\$2.65
Inpatient/Outpatient	DULOXETINE HCL 20 MG PO CPEP	0002-3235-60	A9270	\$33.53	\$32.86	\$33.19	\$30.95	\$32.86
Inpatient/Outpatient	DULOXETINE HCL 20 MG PO CPEP	57237-017-60	A9270	\$0.39	\$0.38	\$0.39	\$0.36	\$0.38
Inpatient/Outpatient	DULOXETINE HCL 20 MG PO CPEP	0904-6452-61	A9270	\$5.25	\$5.15	\$5.20	\$4.85	\$5.15
Inpatient/Outpatient	DULOXETINE HCL 20 MG PO CPEP	42292-019-01	A9270	\$5.25	\$5.15	\$5.20	\$4.85	\$5.15
Inpatient/Outpatient	DULOXETINE HCL 20 MG PO CPEP	55700-727-60	A9270	\$5.25	\$5.15	\$5.20	\$4.85	\$5.15
Inpatient/Outpatient	DULOXETINE HCL 20 MG PO CPEP	68084-675-11	A9270	\$3.70	\$3.63	\$3.66	\$3.42	\$3.63
Inpatient/Outpatient	DULOXETINE HCL 20 MG PO CPEP	0904-7043-61	A9270	\$5.25	\$5.15	\$5.20	\$4.85	\$5.15
Inpatient/Outpatient	DULOXETINE HCL 30 MG PO CPEP	0002-3240-01	A9270	\$1.94	\$1.90	\$1.92	\$1.79	\$1.90
Inpatient/Outpatient	DULOXETINE HCL 30 MG PO CPEP	0002-3240-33	A9270	\$33.57	\$32.90	\$33.23	\$30.99	\$32.90
Inpatient/Outpatient	DULOXETINE HCL 30 MG PO CPEP	0904-6453-61	A9270	\$3.39	\$3.32	\$3.36	\$3.13	\$3.32
Inpatient/Outpatient	DULOXETINE HCL 30 MG PO CPEP	57237-018-30	A9270	\$0.63	\$0.62	\$0.62	\$0.58	\$0.62
Inpatient/Outpatient	DULOXETINE HCL 30 MG PO CPEP	68084-683-01	A9270	\$3.34	\$3.27	\$3.31	\$3.08	\$3.27
Inpatient/Outpatient	DULOXETINE HCL 30 MG PO CPEP	68084-683-11	A9270	\$3.34	\$3.27	\$3.31	\$3.08	\$3.27
Inpatient/Outpatient	DULOXETINE HCL 30 MG PO CPEP	0904-7044-61	A9270	\$3.20	\$3.14	\$3.17	\$2.95	\$3.14
Inpatient/Outpatient	DULOXETINE HCL 30 MG PO CPEP	43547-380-03	A9270	\$0.42	\$0.41	\$0.42	\$0.39	\$0.41
Inpatient/Outpatient	DULOXETINE HCL 60 MG PO CPEP	0002-3237-01	A9270	\$1.94	\$1.90	\$1.92	\$1.79	\$1.90
Inpatient/Outpatient	DULOXETINE HCL 60 MG PO CPEP	0002-3270-01	A9270	\$23.91	\$23.43	\$23.67	\$22.07	\$23.43
Inpatient/Outpatient	DULOXETINE HCL 60 MG PO CPEP	68084-692-11	A9270	\$25.29	\$24.78	\$25.04	\$23.34	\$24.78
Inpatient/Outpatient	DULOXETINE HCL 60 MG PO CPEP	0002-3237-33	A9270	\$19.43	\$19.04	\$19.24	\$17.93	\$19.04
Inpatient/Outpatient	DULOXETINE HCL 60 MG PO CPEP	0904-6454-61	A9270	\$3.30	\$3.23	\$3.27	\$3.05	\$3.23
Inpatient/Outpatient	DULOXETINE HCL 60 MG PO CPEP	0904-7045-61	A9270	\$3.14	\$3.08	\$3.11	\$2.90	\$3.08
Inpatient/Outpatient	DULOXETINE HCL 60 MG PO CPEP	67877-265-90	A9270	\$0.53	\$0.52	\$0.52	\$0.49	\$0.52
Inpatient/Outpatient	HEPARIN (PORCINE) IN NAACL 1000-0.9 UT/500ML-% IV SOLN	0338-0431-03	J1644	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	HEPARIN (PORCINE) IN NAACL 1000-0.9 UT/500ML-% IV SOLN	0264-9872-10	J1644	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	HEPARIN (PORCINE) IN NAACL 1000-0.9 UT/500ML-% IV SOLN	0409-7620-13	J1644	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	HEPARIN (PORCINE) IN NAACL 1000-0.9 UT/500ML-% IV SOLN	0338-9556-20	J1644	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	HEPARIN (PORCINE) IN NAACL 1000-0.9 UT/500ML-% IV SOLN	99999-431-05	J1644	\$22.11	\$21.67	\$21.89	\$20.41	\$21.67
Inpatient/Outpatient	HEPARIN (PORCINE) IN NAACL 1000-0.9 UT/500ML-% IV SOLN	0338-0424-18	J1644	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	HEPARIN (PORCINE) IN NAACL 1000-0.9 UT/500ML-% IV SOLN	63323-519-02	J1644	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	CARBIDOPA-LEVODOPA 25-250 MG PO TBDP	0378-5053-01	A9270	\$3.39	\$3.32	\$3.36	\$3.13	\$3.32
Inpatient/Outpatient	ACAMPROSATE CALCIUM 333 MG PO TBEC	0456-3330-01	A9270	\$4.95	\$4.85	\$4.90	\$4.57	\$4.85
Inpatient/Outpatient	ACAMPROSATE CALCIUM 333 MG PO TBEC	60687-121-95	A9270	\$5.22	\$5.12	\$5.17	\$4.82	\$5.12
Inpatient/Outpatient	ACAMPROSATE CALCIUM 333 MG PO TBEC	68462-435-18	A9270	\$5.34	\$5.23	\$5.29	\$4.93	\$5.23
Inpatient/Outpatient	ACAMPROSATE CALCIUM 333 MG PO TBEC	51079-241-01	A9270	\$2.84	\$2.78	\$2.81	\$2.62	\$2.78
Inpatient/Outpatient	DIPYRIDAMOLE 25 MG PO TABS	0904-1086-61	A9270	\$0.89	\$0.87	\$0.88	\$0.82	\$0.87
Inpatient/Outpatient	DIPYRIDAMOLE 25 MG PO TABS	64980-133-01	A9270	\$5.75	\$5.64	\$5.69	\$5.31	\$5.64
Inpatient/Outpatient	DIPYRIDAMOLE 25 MG PO TABS	0115-1070-01	A9270	\$2.80	\$2.74	\$2.77	\$2.58	\$2.74
Inpatient/Outpatient	PENTAFLUOROPROP-TETRAFLUOROETH EX AERO	0386-0004-04	A9270	\$1.35	\$1.32	\$1.34	\$1.25	\$1.32
Inpatient/Outpatient	PENTAFLUOROPROP-TETRAFLUOROETH EX AERO	0386-0008-02	A9270	\$1.17	\$1.15	\$1.16	\$1.08	\$1.15
Inpatient/Outpatient	FONDAPARINUX SODIUM 5 MG/0.4ML SC SOLN	0007-3232-11	J1652	\$1,042.17	\$1,021.33	\$1,021.75	\$961.92	\$1,021.33
Inpatient/Outpatient	FONDAPARINUX SODIUM 5 MG/0.4ML SC SOLN	0007-3232-01	J1652	\$209.73	\$205.54	\$207.63	\$193.58	\$205.54
Inpatient/Outpatient	FONDAPARINUX SODIUM 5 MG/0.4ML SC SOLN	67457-583-00	J1652	\$449.15	\$440.17	\$444.66	\$414.57	\$440.17
Inpatient/Outpatient	FONDAPARINUX SODIUM 5 MG/0.4ML SC SOLN	67457-593-00	J1652	\$368.43	\$361.06	\$364.75	\$340.06	\$361.06
Inpatient/Outpatient	FONDAPARINUX SODIUM 5 MG/0.4ML SC SOLN	55111-679-02	J1652	\$346.58	\$339.65	\$343.11	\$319.89	\$339.65
Inpatient/Outpatient	FONDAPARINUX SODIUM 5 MG/0.4ML SC SOLN	55150-231-00	J1652	\$305.33	\$299.22	\$302.28	\$281.82	\$299.22
Inpatient/Outpatient	FLUCONAZOLE IV SYRINGE 2 MG/ML IN NAACL (NICU/INFANT)	99999-099-00	J1450	\$0.21	\$0.21	\$0.21	\$0.19	\$0.21
Inpatient/Outpatient	LANTHANUM CARBONATE 500 MG PO CHEW	54092-252-45	A9270	\$27.06	\$26.52	\$26.79	\$24.98	\$26.52
Inpatient/Outpatient	LANTHANUM CARBONATE 500 MG PO CHEW	54092-252-90	A9270	\$54.34	\$53.25	\$53.80	\$50.16	\$53.25
Inpatient/Outpatient	LANTHANUM CARBONATE 500 MG PO CHEW	66993-422-47	A9270	\$34.21	\$33.53	\$33.87	\$31.58	\$33.53
Inpatient/Outpatient	LANTHANUM CARBONATE 500 MG PO CHEW	68180-819-52	A9270	\$17.41	\$17.06	\$17.24	\$16.07	\$17.06
Inpatient/Outpatient	FENOFIBRATE 48 MG PO TABS	68084-635-11	A9270	\$6.16	\$6.04	\$6.10	\$5.69	\$6.04
Inpatient/Outpatient	FENOFIBRATE 48 MG PO TABS	51079-599-20	A9270	\$3.74	\$3.67	\$3.70	\$3.45	\$3.67
Inpatient/Outpatient	FENOFIBRATE 48 MG PO TABS	51079-599-01	A9270	\$3.74	\$3.67	\$3.70	\$3.45	\$3.67
Inpatient/Outpatient	FENOFIBRATE 145 MG PO TABS	0074-6123-90	A9270	\$26.94	\$26.40	\$26.67	\$24.87	\$26.40
Inpatient/Outpatient	FENOFIBRATE 145 MG PO TABS	0093-2060-98	A9270	\$20.67	\$20.26	\$20.46	\$19.08	\$20.26
Inpatient/Outpatient	FENOFIBRATE 145 MG PO TABS	68084-636-95	A9270	\$13.18	\$12.92	\$13.05	\$12.17	\$12.92
Inpatient/Outpatient	FENOFIBRATE 145 MG PO TABS	51079-608-20	A9270	\$10.07	\$9.87	\$9.97	\$9.29	\$9.87
Inpatient/Outpatient	FENOFIBRATE 145 MG PO TABS	50268-311-11	A9270	\$5.63	\$5.52	\$5.57	\$5.20	\$5.52
Inpatient/Outpatient	FENOFIBRATE 145 MG PO TABS	0378-3066-77	A9270	\$1.28	\$1.25	\$1.27	\$1.18	\$1.25
Inpatient/Outpatient	LORAZEPAM 2 MG PO TABS	0904-6009-61		\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	LORAZEPAM 2 MG PO TABS	69315-906-01		\$0.53	\$0.52	\$0.52	\$0.49	\$0.52
Inpatient/Outpatient	INSULIN REGULAR INFUSION 1 UNIT/ML (HYPERTRIGLYCERIDEMIA) PREMIX	99999-8215-1	J1817	\$18.23	\$17.87	\$18.05	\$16.83	\$17.87
Inpatient/Outpatient	GUANFACINE HCL ER 1 MG PO TB24	24979-533-01		\$1.72	\$1.69	\$1.70	\$1.59	\$1.69

Inpatient/Outpatient	GUANFACINE HCL ER 1 MG PO TB24	60505-3927-1		\$1.33	\$1.30	\$1.32	\$1.23	\$1.30
Inpatient/Outpatient	GUANFACINE HCL ER 2 MG PO TB24	24979-534-01		\$3.57	\$3.50	\$3.53	\$3.30	\$3.50
Inpatient/Outpatient	GUANFACINE HCL ER 2 MG PO TB24	0093-5961-01		\$3.33	\$3.26	\$3.30	\$3.07	\$3.26
Inpatient/Outpatient	NATALIZUMAB 300 MG/15ML IV CONC	59075-730-15	J2323	\$1,003.45	\$983.38	\$993.42	\$926.18	\$983.38
Inpatient/Outpatient	PERPHENAZINE 8 MG PO TABS	0591-4103-01	Q0175	\$2.14	\$2.10	\$2.12	\$1.98	\$2.10
Inpatient/Outpatient	UREA 40 % EX SUSP	42192-707-18	J3350	\$30.06	\$29.46	\$29.76	\$27.75	\$29.46
Inpatient/Outpatient	MESALAMINE 1000 MG RE SUPP	58914-501-56	A9270	\$175.16	\$171.66	\$173.41	\$161.67	\$171.66
Inpatient/Outpatient	MESALAMINE 1000 MG RE SUPP	69918-560-30	A9270	\$7.31	\$7.16	\$7.24	\$6.75	\$7.16
Inpatient/Outpatient	SOLIFENACIN SUCCINATE 5 MG PO TABS	51248-150-03	A9270	\$58.06	\$56.90	\$57.48	\$53.59	\$56.90
Inpatient/Outpatient	SOLIFENACIN SUCCINATE 5 MG PO TABS	51248-150-01	A9270	\$58.15	\$56.99	\$57.57	\$53.67	\$56.99
Inpatient/Outpatient	SOLIFENACIN SUCCINATE 5 MG PO TABS	51248-150-52	A9270	\$44.35	\$43.46	\$43.91	\$40.94	\$43.46
Inpatient/Outpatient	SOLIFENACIN SUCCINATE 5 MG PO TABS	0093-5263-98	A9270	\$1.97	\$1.93	\$1.95	\$1.82	\$1.93
Inpatient/Outpatient	SOLIFENACIN SUCCINATE 5 MG PO TABS	50228-427-90	A9270	\$1.16	\$1.14	\$1.15	\$1.07	\$1.14
Inpatient/Outpatient	SOLIFENACIN SUCCINATE 5 MG PO TABS	60505-4702-9	A9270	\$0.70	\$0.69	\$0.69	\$0.65	\$0.69
Inpatient/Outpatient	SOLIFENACIN SUCCINATE 5 MG PO TABS	42291-739-90	A9270	\$1.00	\$0.98	\$0.99	\$0.92	\$0.98
Inpatient/Outpatient	ATROPINE SULFATE 0.4 MG/ML IJ SOLN (PEDS)	99999-749-48	J0461	\$20.62	\$20.21	\$20.41	\$19.03	\$20.21
Inpatient/Outpatient	HYALURONIDASE OVINE 200 UNIT/ML IJ SOLN	67425-002-10	J3471	\$256.85	\$251.71	\$254.28	\$237.07	\$251.71
Inpatient/Outpatient	HYALURONIDASE OVINE 200 UNIT/ML IJ SOLN	24208-002-02	J3471	\$429.64	\$421.05	\$425.34	\$396.56	\$421.05
Inpatient/Outpatient	MOXIFLOXACIN HCL IN NACL 400 MG/250ML IV SOLN	0085-1737-01	J2280	\$0.71	\$0.70	\$0.70	\$0.66	\$0.70
Inpatient/Outpatient	PACLITAXEL PROTEIN-BOUND PART 100 MG IV SUSR	68817-134-50	J9264	\$3,141.95	\$3,079.11	\$3,110.53	\$2,900.02	\$3,079.11
Inpatient/Outpatient	RALTEGRAVIR POTASSIUM 100 MG PO PACK	0006-3603-61	A9270	\$35.78	\$35.06	\$35.42	\$33.02	\$35.06
Inpatient/Outpatient	RALTEGRAVIR POTASSIUM 100 MG PO PACK	0006-3603-01	A9270	\$35.78	\$35.06	\$35.42	\$33.02	\$35.06
Inpatient/Outpatient	MENINGOCOCCAL ACY&W-135 DIPHTH CONJ VACCINE IM SOLN	49281-589-05	90734	\$899.42	\$881.43	\$890.43	\$830.16	\$881.43
Inpatient/Outpatient	MENINGOCOCCAL ACY&W-135 DIPHTH CONJ VACCINE IM SOLN	49281-589-58	90734	\$708.68	\$694.51	\$701.59	\$654.11	\$694.51
Inpatient/Outpatient	FLUTICASONE PROPIONATE HFA 44 MCG/ACT IN AERO	0173-0718-20	A9270	\$78.77	\$77.19	\$77.98	\$72.70	\$77.19
Inpatient/Outpatient	IPRATROPIUM BROMIDE HFA 17 MCG/ACT IN AERS	0597-0087-17		\$156.02	\$152.90	\$154.46	\$144.01	\$152.90
Inpatient/Outpatient	LIDOCAINE HCL 1.5 % IJ SOLN (ANES SPINAL KIT)	99999-4776-1	J2001	\$1.50	\$1.47	\$1.49	\$1.38	\$1.47
Inpatient/Outpatient	FENTANYL 12 MCG/HR TD PT72	0378-9119-16	A9270	\$62.06	\$60.82	\$61.44	\$57.28	\$60.82
Inpatient/Outpatient	FENTANYL 12 MCG/HR TD PT72	0781-7240-55	A9270	\$73.34	\$71.87	\$72.61	\$67.69	\$71.87
Inpatient/Outpatient	FENTANYL 12 MCG/HR TD PT72	0378-9119-98	A9270	\$42.67	\$41.82	\$42.24	\$39.38	\$41.82
Inpatient/Outpatient	FENTANYL 12 MCG/HR TD PT72	47781-423-47	A9270	\$14.75	\$14.46	\$14.60	\$13.61	\$14.46
Inpatient/Outpatient	FENTANYL 12 MCG/HR TD PT72	60505-7010-0	A9270	\$14.23	\$13.95	\$14.09	\$13.13	\$13.95
Inpatient/Outpatient	FENTANYL 12 MCG/HR TD PT72	60505-7080-0	A9270	\$13.41	\$13.14	\$13.28	\$12.38	\$13.14
Inpatient/Outpatient	PARICALCITOL 1 MCG PO CAPS	0074-4317-30	A9270	\$59.06	\$57.88	\$58.47	\$54.51	\$57.88
Inpatient/Outpatient	PARICALCITOL 1 MCG PO CAPS	68382-266-06	A9270	\$40.15	\$39.35	\$39.75	\$37.06	\$39.35
Inpatient/Outpatient	PARICALCITOL 1 MCG PO CAPS	49483-687-03	A9270	\$4.52	\$4.43	\$4.47	\$4.17	\$4.43
Inpatient/Outpatient	PARICALCITOL 1 MCG PO CAPS	68382-330-06	A9270	\$43.12	\$42.26	\$42.69	\$39.80	\$42.26
Inpatient/Outpatient	PARICALCITOL 1 MCG PO CAPS	65862-936-30	A9270	\$5.97	\$5.85	\$5.91	\$5.51	\$5.85
Inpatient/Outpatient	SODIUM CHLORIDE 7 % IN NEBU	83490-207-60	A9270	\$0.83	\$0.81	\$0.82	\$0.77	\$0.81
Inpatient/Outpatient	SODIUM CHLORIDE 7 % IN NEBU	83490-307-60	A9270	\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	SODIUM CHLORIDE 7 % IN NEBU	50190-141-23	A9270	\$0.71	\$0.70	\$0.70	\$0.66	\$0.70
Inpatient/Outpatient	GLUCAGON HCL RDNA (DIAGNOSTIC) 1 MG IJ SOLR	0597-0053-01	J1610	\$463.95	\$454.67	\$459.31	\$428.23	\$454.67
Inpatient/Outpatient	GLUCAGON HCL RDNA (DIAGNOSTIC) 1 MG IJ SOLR	0548-5850-00	J1610	\$582.70	\$571.05	\$576.87	\$537.83	\$571.05
Inpatient/Outpatient	GLUCAGON HCL RDNA (DIAGNOSTIC) 1 MG IJ SOLR	0597-0053-45	J1610	\$463.95	\$454.67	\$459.31	\$428.23	\$454.67
Inpatient/Outpatient	GLUCAGON HCL RDNA (DIAGNOSTIC) 1 MG IJ SOLR	0597-0260-10	J1610	\$463.94	\$454.66	\$459.30	\$428.22	\$454.66
Inpatient/Outpatient	OXALIPLATIN 50 MG/10ML IV SOLN	0024-0590-10	J9263	\$391.41	\$383.58	\$387.50	\$361.27	\$383.58
Inpatient/Outpatient	OXALIPLATIN 50 MG/10ML IV SOLN	0703-3985-01	J9263	\$24.30	\$23.81	\$24.06	\$22.43	\$23.81
Inpatient/Outpatient	OXALIPLATIN 50 MG/10ML IV SOLN	61703-363-18	J9263	\$18.73	\$18.36	\$18.54	\$17.29	\$18.36
Inpatient/Outpatient	OXALIPLATIN 50 MG/10ML IV SOLN	67457-469-10	J9263	\$6.77	\$6.63	\$6.70	\$6.25	\$6.63
Inpatient/Outpatient	OXALIPLATIN 50 MG/10ML IV SOLN	0955-1731-10	J9263	\$22.62	\$22.17	\$22.39	\$20.88	\$22.17
Inpatient/Outpatient	OXALIPLATIN 50 MG/10ML IV SOLN	47781-591-22	J9263	\$16.34	\$16.01	\$16.18	\$15.08	\$16.01
Inpatient/Outpatient	OXALIPLATIN 50 MG/10ML IV SOLN	0955-1725-10	J9263	\$8.05	\$7.89	\$7.97	\$7.43	\$7.89
Inpatient/Outpatient	OXALIPLATIN 50 MG/10ML IV SOLN	43066-014-01	J9263	\$4.98	\$4.88	\$4.93	\$4.60	\$4.88
Inpatient/Outpatient	OXALIPLATIN 50 MG/10ML IV SOLN	71288-101-10	J9263	\$3.16	\$3.10	\$3.13	\$2.92	\$3.10
Inpatient/Outpatient	LEVOCARNITINE 1 GM/10ML PO SOLN	54482-145-08	A9270	\$1.03	\$1.01	\$1.02	\$0.95	\$1.01
Inpatient/Outpatient	LEVOCARNITINE 1 GM/10ML PO SOLN	50383-171-04	A9270	\$1.31	\$1.28	\$1.30	\$1.21	\$1.28
Inpatient/Outpatient	LEVOCARNITINE 1 GM/10ML PO SOLN	64980-503-12	A9270	\$0.87	\$0.85	\$0.86	\$0.80	\$0.85
Inpatient/Outpatient	TETANUS-DIPHTH-ACELL PERTUSSIS 5-2-15.5 LF-MCG/0.5 IM SUSP	49281-400-15	90715	\$299.67	\$293.68	\$296.67	\$276.60	\$293.68
Inpatient/Outpatient	TETANUS-DIPHTH-ACELL PERTUSSIS 5-2-15.5 LF-MCG/0.5 IM SUSP	49281-400-10	90715	\$456.66	\$447.53	\$452.09	\$421.50	\$447.53
Inpatient/Outpatient	TETANUS-DIPHTH-ACELL PERTUSSIS 5-2-15.5 LF-MCG/0.5 IM SUSP	49281-400-89	90715	\$299.67	\$293.68	\$296.67	\$276.60	\$293.68
Inpatient/Outpatient	TETANUS-DIPHTH-ACELL PERTUSSIS 5-2-15.5 LF-MCG/0.5 IM SUSP	49281-400-58	90715	\$412.69	\$404.44	\$408.56	\$380.91	\$404.44
Inpatient/Outpatient	TIGECYCLINE 50 MG IV SOLR	0008-4990-19	J3243	\$285.32	\$279.61	\$282.47	\$263.35	\$279.61
Inpatient/Outpatient	TIGECYCLINE 50 MG IV SOLR	0008-4990-20	J3243	\$84.13	\$82.45	\$83.29	\$77.65	\$82.45
Inpatient/Outpatient	TIGECYCLINE 50 MG IV SOLR	0008-4994-19	J3243	\$507.79	\$497.63	\$502.71	\$468.69	\$497.63
Inpatient/Outpatient	TIGECYCLINE 50 MG IV SOLR	0008-4990-01	J3243	\$252.60	\$247.55	\$250.07	\$233.15	\$247.55
Inpatient/Outpatient	TIGECYCLINE 50 MG IV SOLR	63323-960-10	J3243	\$495.36	\$485.45	\$490.41	\$457.22	\$485.45
Inpatient/Outpatient	TIGECYCLINE 50 MG IV SOLR	0781-3481-70	J3243	\$135.70	\$132.99	\$134.34	\$125.25	\$132.99
Inpatient/Outpatient	INSULIN REGULAR INFUSION 1 UNIT/ML (L&D) PREMIX	99999-8215-1	J1817	\$18.23	\$17.87	\$18.05	\$16.83	\$17.87

Inpatient/Outpatient	INSULIN REGULAR INFUSION 1 UNIT/ML (MED/SURG ICU) PREMIX	99999-8215-1	J1817	\$18.23	\$17.87	\$18.05	\$16.83	\$17.87
Inpatient/Outpatient	OMEGA-3-ACID ETHYL ESTERS 1 G PO CAPS	0173-0783-02	A9150	\$10.83	\$10.61	\$10.72	\$10.00	\$10.61
Inpatient/Outpatient	OMEGA-3-ACID ETHYL ESTERS 1 G PO CAPS	66993-726-32	A9150	\$7.48	\$7.33	\$7.41	\$6.90	\$7.33
Inpatient/Outpatient	OMEGA-3-ACID ETHYL ESTERS 1 G PO CAPS	49884-019-08	A9150	\$6.92	\$6.78	\$6.85	\$6.39	\$6.78
Inpatient/Outpatient	OMEGA-3-ACID ETHYL ESTERS 1 G PO CAPS	16714-660-01	A9150	\$7.69	\$7.54	\$7.61	\$7.10	\$7.54
Inpatient/Outpatient	OMEGA-3-ACID ETHYL ESTERS 1 G PO CAPS	60505-3170-7	A9150	\$1.28	\$1.25	\$1.27	\$1.18	\$1.25
Inpatient/Outpatient	OMEGA-3-ACID ETHYL ESTERS 1 G PO CAPS	0093-5401-89	A9150	\$7.48	\$7.33	\$7.41	\$6.90	\$7.33
Inpatient/Outpatient	OMEGA-3-ACID ETHYL ESTERS 1 G PO CAPS	42291-657-12	A9150	\$0.83	\$0.81	\$0.82	\$0.77	\$0.81
Inpatient/Outpatient	OMEGA-3-ACID ETHYL ESTERS 1 G PO CAPS	42806-552-12	A9150	\$0.77	\$0.75	\$0.76	\$0.71	\$0.75
Inpatient/Outpatient	MOMETASONE FUROATE 220 MCG/INH IN AEPB	0085-1341-04	A9270	\$341.61	\$334.78	\$338.19	\$315.31	\$334.78
Inpatient/Outpatient	MOMETASONE FUROATE 220 MCG/INH IN AEPB	0085-1341-06	A9270	\$334.51	\$324.82	\$331.16	\$308.75	\$327.82
Inpatient/Outpatient	MOMETASONE FUROATE 220 MCG/INH IN AEPB	78206-114-04	A9270	\$637.53	\$624.78	\$631.15	\$588.44	\$624.78
Inpatient/Outpatient	MOMETASONE FUROATE 220 MCG/INH IN AEPB	78206-114-03	A9270	\$350.75	\$343.74	\$347.24	\$323.74	\$343.74
Inpatient/Outpatient	LIDOCAINE 5 % EX OINT	0168-0204-37		\$24.52	\$24.03	\$24.27	\$22.63	\$24.03
Inpatient/Outpatient	LIDOCAINE 5 % EX OINT	52565-008-14		\$12.06	\$11.82	\$11.94	\$11.13	\$11.82
Inpatient/Outpatient	LIDOCAINE 5 % EX OINT	68462-418-20		\$2.96	\$2.90	\$2.93	\$2.73	\$2.90
Inpatient/Outpatient	LIDOCAINE 5 % EX OINT	51672-3020-9		\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	LIDOCAINE 5 % EX OINT	99999-3020-1		\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	LIDOCAINE 5 % EX OINT	16714-878-01		\$0.63	\$0.62	\$0.62	\$0.58	\$0.62
Inpatient/Outpatient	SILDENAFIL CITRATE 20 MG PO TABS	0069-4190-68	A9270	\$224.84	\$220.34	\$222.59	\$207.53	\$220.34
Inpatient/Outpatient	SILDENAFIL CITRATE 20 MG PO TABS	59762-0033-1	A9270	\$2.01	\$1.97	\$1.99	\$1.86	\$1.97
Inpatient/Outpatient	SILDENAFIL CITRATE 20 MG PO TABS	68084-869-11	A9270	\$4.52	\$4.43	\$4.47	\$4.17	\$4.43
Inpatient/Outpatient	SILDENAFIL CITRATE 20 MG PO TABS	65162-351-09	A9270	\$1.84	\$1.80	\$1.82	\$1.70	\$1.80
Inpatient/Outpatient	SILDENAFIL CITRATE 20 MG PO TABS	50268-717-11	A9270	\$3.85	\$3.77	\$3.81	\$3.55	\$3.77
Inpatient/Outpatient	SILDENAFIL CITRATE 20 MG PO TABS	0093-5517-98	A9270	\$0.50	\$0.49	\$0.50	\$0.46	\$0.49
Inpatient/Outpatient	SILDENAFIL CITRATE 20 MG PO TABS	0904-6671-06	A9270	\$2.80	\$2.74	\$2.77	\$2.58	\$2.74
Inpatient/Outpatient	DICYCLOMINE HCL 10 MG/5ML PO SOLN	58914-015-16	A9270	\$0.43	\$0.42	\$0.43	\$0.40	\$0.42
Inpatient/Outpatient	DICYCLOMINE HCL 10 MG/5ML PO SOLN	0603-1161-58	A9270	\$1.10	\$1.08	\$1.09	\$1.02	\$1.08
Inpatient/Outpatient	DICYCLOMINE HCL 10 MG/5ML PO SOLN	0054-0622-63	A9270	\$0.72	\$0.71	\$0.71	\$0.66	\$0.71
Inpatient/Outpatient	PREGABALIN 25 MG PO CAPS	0071-1012-68	A9270	\$38.84	\$38.06	\$38.45	\$35.85	\$38.06
Inpatient/Outpatient	PREGABALIN 25 MG PO CAPS	72205-011-90	A9270	\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	PREGABALIN 25 MG PO CAPS	60687-473-11	A9270	\$1.57	\$1.54	\$1.55	\$1.45	\$1.54
Inpatient/Outpatient	PREGABALIN 50 MG PO CAPS	0071-1013-68	A9270	\$37.04	\$36.30	\$36.67	\$34.19	\$36.30
Inpatient/Outpatient	PREGABALIN 50 MG PO CAPS	0071-1013-41	A9270	\$42.72	\$41.87	\$42.29	\$39.43	\$41.87
Inpatient/Outpatient	PREGABALIN 50 MG PO CAPS	59762-1344-1	A9270	\$0.40	\$0.39	\$0.40	\$0.37	\$0.39
Inpatient/Outpatient	PREGABALIN 50 MG PO CAPS	72205-012-90	A9270	\$0.29	\$0.28	\$0.29	\$0.27	\$0.28
Inpatient/Outpatient	PREGABALIN 50 MG PO CAPS	60687-484-11	A9270	\$1.19	\$1.17	\$1.18	\$1.10	\$1.17
Inpatient/Outpatient	PREGABALIN 50 MG PO CAPS	0904-6992-61	A9270	\$2.23	\$2.19	\$2.21	\$2.06	\$2.19
Inpatient/Outpatient	PREGABALIN 50 MG PO CAPS	62332-120-90	A9270	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	PREGABALIN 75 MG PO CAPS	0071-1014-68	A9270	\$38.84	\$38.06	\$38.45	\$35.85	\$38.06
Inpatient/Outpatient	PREGABALIN 75 MG PO CAPS	0071-1014-41	A9270	\$42.72	\$41.87	\$42.29	\$39.43	\$41.87
Inpatient/Outpatient	PREGABALIN 75 MG PO CAPS	59762-1346-1	A9270	\$0.40	\$0.39	\$0.40	\$0.37	\$0.39
Inpatient/Outpatient	PREGABALIN 75 MG PO CAPS	60687-495-11	A9270	\$1.46	\$1.43	\$1.45	\$1.35	\$1.43
Inpatient/Outpatient	PREGABALIN 75 MG PO CAPS	0904-7000-61	A9270	\$2.33	\$2.28	\$2.31	\$2.15	\$2.28
Inpatient/Outpatient	ZIDOVUDINE 50 MG/5ML PO SYRP	65862-048-24	A9270	\$0.68	\$0.67	\$0.67	\$0.63	\$0.67
Inpatient/Outpatient	LISDEXAMFETAMINE DIMESYLATE 10 MG PO CAPS	59417-101-10		\$53.03	\$51.97	\$52.50	\$48.95	\$51.97
Inpatient/Outpatient	DIGOXIN 0.05 MG/ML PO SOLN	0054-0057-46	A9270	\$11.15	\$10.93	\$11.04	\$10.29	\$10.93
Inpatient/Outpatient	DIGOXIN 0.05 MG/ML PO SOLN	66689-327-02	A9270	\$5.36	\$5.25	\$5.31	\$4.95	\$5.25
Inpatient/Outpatient	LITHIUM 8 MEQ/5ML PO SOLN	68094-757-62	A9270	\$0.94	\$0.92	\$0.93	\$0.87	\$0.92
Inpatient/Outpatient	LITHIUM 8 MEQ/5ML PO SOLN	68094-757-59	A9270	\$0.94	\$0.92	\$0.93	\$0.87	\$0.92
Inpatient/Outpatient	PHYTONADIONE 2.5 MG PO HALF TABS	99999-405-50	A9270	\$265.78	\$260.46	\$263.12	\$245.31	\$260.46
Inpatient/Outpatient	INSULIN DETEMIR 100 UNIT/ML SC SOLN	0169-3687-12	A9270	\$47.38	\$46.43	\$46.91	\$43.73	\$46.43
Inpatient/Outpatient	POTASSIUM & SODIUM PHOSPHATES 280-160-250 MG PO PACK	60258-006-01	A9150	\$1.13	\$1.11	\$1.12	\$1.04	\$1.11
Inpatient/Outpatient	POTASSIUM & SODIUM PHOSPHATES 280-160-250 MG PO PACK	60258-006-15	A9150	\$1.74	\$1.71	\$1.72	\$1.61	\$1.71
Inpatient/Outpatient	ABATACEPT 250 MG IV SOLR	0003-2187-10	J0129	\$2,337.62	\$2,290.87	\$2,314.24	\$2,157.62	\$2,290.87
Inpatient/Outpatient	ARIPIPIRAZOLE 2 MG PO TABS	59148-006-13	A9270	\$88.02	\$86.26	\$87.14	\$81.24	\$86.26
Inpatient/Outpatient	ARIPIPIRAZOLE 2 MG PO TABS	60505-3075-3	A9270	\$7.23	\$7.09	\$7.16	\$6.67	\$7.09
Inpatient/Outpatient	ARIPIPIRAZOLE 2 MG PO TABS	48433-115-01	A9270	\$15.28	\$14.97	\$15.13	\$14.10	\$14.97
Inpatient/Outpatient	ARIPIPIRAZOLE 2 MG PO TABS	65862-661-30	A9270	\$1.39	\$1.36	\$1.38	\$1.28	\$1.36
Inpatient/Outpatient	SULFACETAMIDE-PREDNISOLONE 10-0.23 % OP SOLN	24208-317-05	A9270	\$10.14	\$9.94	\$10.04	\$9.36	\$9.94
Inpatient/Outpatient	CALCIUM GLUCONATE 10 % IV SOLN (OVERDOSE)	63323-360-03	J0610	\$1.22	\$1.20	\$1.21	\$1.13	\$1.20
Inpatient/Outpatient	CALCIUM GLUCONATE 10 % IV SOLN (OVERDOSE)	69374-950-10	J0610	\$3.65	\$3.58	\$3.61	\$3.37	\$3.58
Inpatient/Outpatient	CALCIUM GLUCONATE 10 % IV SOLN (OVERDOSE)	63323-360-01	J0610	\$3.72	\$3.65	\$3.68	\$3.43	\$3.65
Inpatient/Outpatient	RANOLAZINE ER 500 MG PO TB12	61958-1003-1	A9270	\$31.00	\$30.38	\$30.69	\$28.61	\$30.38
Inpatient/Outpatient	RANOLAZINE ER 500 MG PO TB12	68180-354-07	A9270	\$3.24	\$3.18	\$3.21	\$2.99	\$3.18
Inpatient/Outpatient	RANOLAZINE ER 500 MG PO TB12	50228-423-60	A9270	\$1.98	\$1.94	\$1.96	\$1.83	\$1.94
Inpatient/Outpatient	RANOLAZINE ER 500 MG PO TB12	27241-125-02	A9270	\$4.86	\$4.76	\$4.81	\$4.49	\$4.76
Inpatient/Outpatient	RANOLAZINE ER 500 MG PO TB12	42291-773-60	A9270	\$1.32	\$1.29	\$1.31	\$1.22	\$1.29

Inpatient/Outpatient	RANOLAZINE ER 500 MG PO TB12	60687-549-21	A9270	\$5.43	\$5.32	\$5.38	\$5.01	\$5.32
Inpatient/Outpatient	RANOLAZINE ER 500 MG PO TB12	63304-017-60	A9270	\$1.98	\$1.94	\$1.96	\$1.83	\$1.94
Inpatient/Outpatient	FLUTICASON PROPIONATE 50 MCG/ACT NA SUSP	0054-3270-99	A9270	\$1.23	\$1.21	\$1.22	\$1.14	\$1.21
Inpatient/Outpatient	FLUTICASON PROPIONATE 50 MCG/ACT NA SUSP	60505-0829-1	A9270	\$0.90	\$0.88	\$0.89	\$0.83	\$0.88
Inpatient/Outpatient	FLUTICASON PROPIONATE 50 MCG/ACT NA SUSP	60432-264-15	A9270	\$0.98	\$0.96	\$0.97	\$0.90	\$0.96
Inpatient/Outpatient	FLUTICASON PROPIONATE 50 MCG/ACT NA SUSP	60429-195-15	A9270	\$1.33	\$1.30	\$1.32	\$1.23	\$1.30
Inpatient/Outpatient	FLUTICASON PROPIONATE 50 MCG/ACT NA SUSP	50383-700-16	A9270	\$0.90	\$0.88	\$0.89	\$0.83	\$0.88
Inpatient/Outpatient	MEPIVACAINE HCL (PF) 1.5 % IJ SOLN	0409-1041-30	J0670	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	MEPIVACAINE HCL (PF) 1.5 % IJ SOLN	63323-293-01	J0670	\$1.39	\$1.36	\$1.38	\$1.28	\$1.36
Inpatient/Outpatient	MEPIVACAINE HCL (PF) 1.5 % IJ SOLN	63323-293-37	J0670	\$1.39	\$1.36	\$1.38	\$1.28	\$1.36
Inpatient/Outpatient	INSULIN LISPRO PROT & LISPRO (75-25) 100 UNIT/ML SC SUPN	0002-8797-01	J1815	\$27.22	\$26.68	\$26.95	\$25.12	\$26.68
Inpatient/Outpatient	LEVETIRACETAM 1000 MG PO TABS	50474-597-66	A9270	\$71.43	\$70.00	\$70.72	\$65.93	\$70.00
Inpatient/Outpatient	LEVETIRACETAM 1000 MG PO TABS	68084-356-11	A9270	\$2.59	\$2.54	\$2.56	\$2.39	\$2.54
Inpatient/Outpatient	LEVETIRACETAM 1000 MG PO TABS	31722-539-60	A9270	\$3.19	\$3.13	\$3.16	\$2.94	\$3.13
Inpatient/Outpatient	LEVETIRACETAM 1000 MG PO TABS	0378-5619-91	A9270	\$2.72	\$2.67	\$2.69	\$2.51	\$2.67
Inpatient/Outpatient	LEVETIRACETAM 1000 MG PO TABS	68180-115-07	A9270	\$0.98	\$0.96	\$0.97	\$0.90	\$0.96
Inpatient/Outpatient	LEVETIRACETAM 1000 MG PO TABS	50268-475-11	A9270	\$2.66	\$2.61	\$2.63	\$2.46	\$2.61
Inpatient/Outpatient	LEVETIRACETAM 1000 MG PO TABS	16714-357-01	A9270	\$1.07	\$1.05	\$1.06	\$0.99	\$1.05
Inpatient/Outpatient	LEVETIRACETAM 1000 MG PO TABS	68084-893-11	A9270	\$2.62	\$2.57	\$2.59	\$2.42	\$2.57
Inpatient/Outpatient	DARBEOETIN ALFA 500 MCG/ML IJ SOSY	55513-032-01	J0881	\$3,462.98	\$3,393.72	\$3,428.35	\$3,196.33	\$3,393.72
Inpatient/Outpatient	SPIRONOLACTONE 12.5 MG PO HALF TABS	99999-1599-1	A9270	\$0.44	\$0.43	\$0.44	\$0.41	\$0.43
Inpatient/Outpatient	MORPHINE INFUSION 1 MG/ML PREMIX	61553-179-48	J2270	\$3.47	\$3.40	\$3.44	\$3.20	\$3.40
Inpatient/Outpatient	ACETYLCHOLINE CHLORIDE 20 MG IO SOLR	24208-539-20		\$341.76	\$334.92	\$338.34	\$315.44	\$334.92
Inpatient/Outpatient	DARUNAVIR 800 MG PO TABS	59676-566-30	A9270	\$315.38	\$309.07	\$312.23	\$291.10	\$309.07
Inpatient/Outpatient	OXYMORPHONE HCL 5 MG PO TABS	63481-612-70	A9270	\$34.34	\$33.65	\$34.00	\$31.70	\$33.65
Inpatient/Outpatient	OXYMORPHONE HCL 5 MG PO TABS	60951-794-70	A9270	\$7.12	\$6.98	\$7.05	\$6.57	\$6.98
Inpatient/Outpatient	OXYMORPHONE HCL 5 MG PO TABS	0093-5861-01	A9270	\$15.74	\$15.43	\$15.58	\$14.53	\$15.43
Inpatient/Outpatient	OXYMORPHONE HCL 5 MG PO TABS	0054-0283-25	A9270	\$12.60	\$12.35	\$12.47	\$11.63	\$12.35
Inpatient/Outpatient	OXYMORPHONE HCL 5 MG PO TABS	13107-103-01	A9270	\$1.29	\$1.26	\$1.28	\$1.19	\$1.26
Inpatient/Outpatient	OXYMORPHONE HCL 5 MG PO TABS	10702-070-01	A9270	\$2.58	\$2.53	\$2.55	\$2.38	\$2.53
Inpatient/Outpatient	IBUPROFEN LYSINE 10 MG/ML IV SOLN	67386-122-52	A9270	\$822.89	\$806.43	\$814.66	\$759.53	\$806.43
Inpatient/Outpatient	IBUPROFEN LYSINE 10 MG/ML IV SOLN	66993-490-36	A9270	\$437.97	\$429.21	\$433.59	\$404.25	\$429.21
Inpatient/Outpatient	MEGESTROL ACETATE 40 MG/ML PO SUSP (WRAP)	0121-4776-10	A9270	\$0.98	\$0.96	\$0.97	\$0.90	\$0.96
Inpatient/Outpatient	MEGESTROL ACETATE 40 MG/ML PO SUSP (WRAP)	66689-020-50	A9270	\$1.36	\$1.33	\$1.35	\$1.26	\$1.33
Inpatient/Outpatient	MEGESTROL ACETATE 40 MG/ML PO SUSP (WRAP)	66689-020-01	A9270	\$1.32	\$1.29	\$1.31	\$1.22	\$1.29
Inpatient/Outpatient	MEGESTROL ACETATE 40 MG/ML PO SUSP (WRAP)	0054-3542-58	A9270	\$0.68	\$0.67	\$0.67	\$0.63	\$0.67
Inpatient/Outpatient	MEGESTROL ACETATE 40 MG/ML PO SUSP (WRAP)	68094-361-62	A9270	\$1.20	\$1.18	\$1.19	\$1.11	\$1.18
Inpatient/Outpatient	MEGESTROL ACETATE 40 MG/ML PO SUSP (WRAP)	49884-907-61	A9270	\$0.43	\$0.42	\$0.43	\$0.40	\$0.42
Inpatient/Outpatient	MEGESTROL ACETATE 40 MG/ML PO SUSP (WRAP)	60432-126-08	A9270	\$0.30	\$0.29	\$0.30	\$0.28	\$0.29
Inpatient/Outpatient	MEGESTROL ACETATE 40 MG/ML PO SUSP (WRAP)	60432-126-16	A9270	\$0.34	\$0.33	\$0.34	\$0.31	\$0.33
Inpatient/Outpatient	MEGESTROL ACETATE 40 MG/ML PO SUSP (WRAP)	0121-0945-10	A9270	\$0.89	\$0.87	\$0.88	\$0.82	\$0.87
Inpatient/Outpatient	MEGESTROL ACETATE 40 MG/ML PO SUSP (WRAP)	50383-859-24	A9270	\$0.21	\$0.21	\$0.21	\$0.19	\$0.21
Inpatient/Outpatient	GUAIFENESIN 100 MG/5ML PO SOLN	0121-1744-10	A9150	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	GUAIFENESIN 100 MG/5ML PO SOLN	50383-063-12	A9150	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	GUAIFENESIN 100 MG/5ML PO SOLN	99999-063-10	A9150	\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	MORPHINE SULFATE (PF) 200 MG/20ML (10 MG/ML) IJ SOLN	60977-114-01	J2270	\$34.83	\$34.13	\$34.48	\$32.15	\$34.13
Inpatient/Outpatient	MORPHINE SULFATE (PF) 500 MG/20ML (25 MG/ML) IJ SOLN	60977-115-01	J2270	\$58.94	\$57.76	\$58.35	\$54.40	\$57.76
Inpatient/Outpatient	MORPHINE SULFATE (PF) 500 MG/20ML (25 MG/ML) IJ SOLN	66794-162-02	J2270	\$74.61	\$73.12	\$73.86	\$68.87	\$73.12
Inpatient/Outpatient	MORPHINE SULFATE (PF) 500 MG/20ML (25 MG/ML) IJ SOLN	0641-6040-01	J2270	\$79.18	\$77.60	\$78.39	\$73.08	\$77.60
Inpatient/Outpatient	PREDNISOLONE SODIUM PHOSPHATE 15 MG PO TBDP	59630-701-48	J7510	\$49.94	\$48.94	\$49.44	\$46.09	\$48.94
Inpatient/Outpatient	PREDNISOLONE SODIUM PHOSPHATE 15 MG PO TBDP	59212-701-48	J7510	\$116.47	\$114.14	\$115.31	\$107.50	\$114.14
Inpatient/Outpatient	PREDNISOLONE SODIUM PHOSPHATE 15 MG PO TBDP	66993-845-62	J7510	\$77.88	\$76.32	\$77.10	\$71.88	\$76.32
Inpatient/Outpatient	PREDNISOLONE SODIUM PHOSPHATE 15 MG PO TBDP	66993-845-51	J7510	\$76.10	\$74.58	\$75.34	\$70.24	\$74.58
Inpatient/Outpatient	PREDNISOLONE SODIUM PHOSPHATE 15 MG PO TBDP	59212-701-12	J7510	\$127.78	\$125.22	\$126.50	\$117.94	\$125.22
Inpatient/Outpatient	VANCOMYCIN HCL 10 G IV SOLR	0409-6510-01	J3370	\$678.42	\$664.85	\$671.64	\$626.18	\$664.85
Inpatient/Outpatient	VANCOMYCIN HCL 10 G IV SOLR	63323-314-61	J3370	\$126.65	\$124.12	\$125.38	\$116.90	\$124.12
Inpatient/Outpatient	VANCOMYCIN HCL 10 G IV SOLR	67457-342-10	J3370	\$676.89	\$663.35	\$670.12	\$624.77	\$663.35
Inpatient/Outpatient	VANCOMYCIN HCL 10 G IV SOLR	63323-314-68	J3370	\$676.85	\$663.31	\$670.08	\$624.73	\$663.31
Inpatient/Outpatient	VANCOMYCIN HCL 10 G IV SOLR	0143-9359-01	J3370	\$610.63	\$598.51	\$604.52	\$563.61	\$598.51
Inpatient/Outpatient	VANCOMYCIN HCL 10 G IV SOLR	25021-158-99	J3370	\$481.09	\$471.47	\$476.28	\$444.05	\$471.47
Inpatient/Outpatient	VANCOMYCIN HCL 10 G IV SOLR	63323-314-66	J3370	\$126.65	\$124.12	\$125.38	\$116.90	\$124.12
Inpatient/Outpatient	VANCOMYCIN HCL 10 G IV SOLR	0409-1319-01	J3370	\$678.42	\$664.85	\$671.64	\$626.18	\$664.85
Inpatient/Outpatient	LEVETIRACETAM 500 MG/5ML IV SOLN	50474-002-63	J1953	\$49.44	\$48.45	\$48.95	\$45.63	\$48.45
Inpatient/Outpatient	LEVETIRACETAM 500 MG/5ML IV SOLN	62756-513-44	J1953	\$32.29	\$31.64	\$31.97	\$29.80	\$31.64
Inpatient/Outpatient	LEVETIRACETAM 500 MG/5ML IV SOLN	0517-3605-01	J1953	\$25.18	\$24.68	\$24.93	\$23.24	\$24.68
Inpatient/Outpatient	LEVETIRACETAM 500 MG/5ML IV SOLN	0143-9673-10	J1953	\$2.81	\$2.75	\$2.78	\$2.59	\$2.75
Inpatient/Outpatient	LEVETIRACETAM 500 MG/5ML IV SOLN	63323-400-05	J1953	\$1.54	\$1.51	\$1.52	\$1.42	\$1.51
Inpatient/Outpatient	LEVETIRACETAM 500 MG/5ML IV SOLN	67457-790-00	J1953	\$2.03	\$1.99	\$2.01	\$1.87	\$1.99

Inpatient/Outpatient	LEVETIRACETAM 500 MG/5ML IV SOLN	0409-1886-15	J1953	\$3.36	\$3.29	\$3.33	\$3.10	\$3.29
Inpatient/Outpatient	LEVETIRACETAM 500 MG/5ML IV SOLN	0409-1886-22	J1953	\$1.41	\$1.38	\$1.40	\$1.30	\$1.38
Inpatient/Outpatient	LEVETIRACETAM 500 MG/5ML IV SOLN	51224-013-25	J1953	\$5.35	\$5.24	\$5.30	\$4.94	\$5.24
Inpatient/Outpatient	LEVETIRACETAM 500 MG/5ML IV SOLN	55150-177-05	J1953	\$7.78	\$7.62	\$7.70	\$7.18	\$7.62
Inpatient/Outpatient	LEVETIRACETAM 500 MG/5ML IV SOLN	0143-9673-01	J1953	\$1.05	\$1.03	\$1.04	\$0.97	\$1.03
Inpatient/Outpatient	DOBUTAMINE HCL 250 MG/20ML IV SOLN	0409-2025-20	J1250	\$1.04	\$1.02	\$1.03	\$0.96	\$1.02
Inpatient/Outpatient	DOBUTAMINE HCL 250 MG/20ML IV SOLN	0409-2344-02	J1250	\$1.22	\$1.20	\$1.21	\$1.13	\$1.20
Inpatient/Outpatient	DOBUTAMINE HCL 250 MG/20ML IV SOLN	55390-560-90	J1250	\$0.81	\$0.79	\$0.80	\$0.75	\$0.79
Inpatient/Outpatient	DOBUTAMINE HCL 250 MG/20ML IV SOLN	0409-2344-01	J1250	\$1.27	\$1.24	\$1.26	\$1.17	\$1.24
Inpatient/Outpatient	DOBUTAMINE HCL 250 MG/20ML IV SOLN	0409-2344-62	J1250	\$1.19	\$1.17	\$1.18	\$1.10	\$1.17
Inpatient/Outpatient	OXALIPLATIN 100 MG/20ML IV SOLN	0024-0591-20	J9263	\$391.42	\$387.59	\$387.51	\$361.28	\$383.59
Inpatient/Outpatient	OXALIPLATIN 100 MG/20ML IV SOLN	0703-3986-01	J9263	\$24.30	\$23.81	\$24.06	\$22.43	\$23.81
Inpatient/Outpatient	OXALIPLATIN 100 MG/20ML IV SOLN	67457-442-20	J9263	\$6.77	\$6.63	\$6.70	\$6.25	\$6.63
Inpatient/Outpatient	OXALIPLATIN 100 MG/20ML IV SOLN	0955-1733-20	J9263	\$22.62	\$22.17	\$22.39	\$20.88	\$22.17
Inpatient/Outpatient	OXALIPLATIN 100 MG/20ML IV SOLN	43066-018-01	J9263	\$4.97	\$4.87	\$4.92	\$4.59	\$4.87
Inpatient/Outpatient	OXALIPLATIN 100 MG/20ML IV SOLN	47781-592-29	J9263	\$16.34	\$16.01	\$16.18	\$15.08	\$16.01
Inpatient/Outpatient	OXALIPLATIN 100 MG/20ML IV SOLN	72266-126-01	J9263	\$5.26	\$5.15	\$5.21	\$4.85	\$5.15
Inpatient/Outpatient	OXALIPLATIN 100 MG/20ML IV SOLN	71288-149-96	J9263	\$2.72	\$2.67	\$2.69	\$2.51	\$2.67
Inpatient/Outpatient	FENTANYL CITRATE 600 MCG BU TABS	63459-546-28	A9270	\$267.12	\$261.78	\$264.45	\$246.55	\$261.78
Inpatient/Outpatient	SITAGLIPTIN PHOSPHATE 50 MG PO TABS	0006-0112-54	A9270	\$71.41	\$69.98	\$70.70	\$65.91	\$69.98
Inpatient/Outpatient	SITAGLIPTIN PHOSPHATE 50 MG PO TABS	0006-0112-28	A9270	\$78.62	\$77.05	\$77.83	\$72.57	\$77.05
Inpatient/Outpatient	SITAGLIPTIN PHOSPHATE 50 MG PO TABS	0006-0112-31	A9270	\$68.27	\$66.90	\$67.59	\$63.01	\$66.90
Inpatient/Outpatient	SITAGLIPTIN PHOSPHATE 50 MG PO TABS	0006-0112-01	A9270	\$55.80	\$54.68	\$55.24	\$51.50	\$54.68
Inpatient/Outpatient	SITAGLIPTIN PHOSPHATE 100 MG PO TABS	0006-0277-31	A9270	\$78.61	\$77.04	\$77.82	\$72.56	\$77.04
Inpatient/Outpatient	SITAGLIPTIN PHOSPHATE 100 MG PO TABS	0006-0277-28	A9270	\$78.62	\$77.05	\$77.83	\$72.57	\$77.05
Inpatient/Outpatient	SITAGLIPTIN PHOSPHATE 100 MG PO TABS	0006-0277-01	A9270	\$55.80	\$54.68	\$55.24	\$51.50	\$54.68
Inpatient/Outpatient	TRAMADOL HCL 25 MG PO HALF TABS	99999-991-25	A9270	\$0.20	\$0.20	\$0.20	\$0.18	\$0.20
Inpatient/Outpatient	METOCLOPRAMIDE HCL 5 MG/5ML PO SOLN	99999-022-90	A9270	\$0.54	\$0.53	\$0.53	\$0.50	\$0.53
Inpatient/Outpatient	METOCLOPRAMIDE HCL 5 MG/5ML PO SOLN	99999-022-95	A9270	\$0.54	\$0.53	\$0.53	\$0.50	\$0.53
Inpatient/Outpatient	METOCLOPRAMIDE HCL 5 MG/5ML PO SOLN	0121-0576-16	A9270	\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	METOCLOPRAMIDE HCL 5 MG/5ML PO SOLN	0121-1576-10	A9270	\$0.54	\$0.53	\$0.53	\$0.50	\$0.53
Inpatient/Outpatient	METOCLOPRAMIDE HCL 5 MG/5ML PO SOLN	66689-031-50	A9270	\$1.16	\$1.14	\$1.15	\$1.07	\$1.14
Inpatient/Outpatient	METOCLOPRAMIDE HCL 5 MG/5ML PO SOLN	66689-031-01	A9270	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	METOCLOPRAMIDE HCL 5 MG/5ML PO SOLN	99999-190-05	A9270	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	METOCLOPRAMIDE HCL 5 MG/5ML PO SOLN	99999-190-10	A9270	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	PREDNISOLONE SODIUM PHOSPHATE 10 MG PO TBDP	59630-700-48	J7510	\$31.59	\$30.96	\$31.27	\$29.16	\$30.96
Inpatient/Outpatient	PREDNISOLONE SODIUM PHOSPHATE 10 MG PO TBDP	0378-4710-22	J7510	\$46.87	\$45.93	\$46.40	\$43.26	\$45.93
Inpatient/Outpatient	PREDNISOLONE SODIUM PHOSPHATE 10 MG PO TBDP	66993-844-51	J7510	\$40.24	\$39.44	\$39.84	\$37.14	\$39.44
Inpatient/Outpatient	PREDNISOLONE SODIUM PHOSPHATE 30 MG PO TBDP	59630-702-48	J7510	\$71.17	\$69.75	\$70.46	\$65.69	\$69.75
Inpatient/Outpatient	PREDNISOLONE SODIUM PHOSPHATE 30 MG PO TBDP	0378-4730-22	J7510	\$100.44	\$98.43	\$99.44	\$92.71	\$98.43
Inpatient/Outpatient	PREDNISOLONE SODIUM PHOSPHATE 30 MG PO TBDP	66993-846-62	J7510	\$90.54	\$88.73	\$89.63	\$83.57	\$88.73
Inpatient/Outpatient	PREDNISOLONE SODIUM PHOSPHATE 30 MG PO TBDP	66993-846-51	J7510	\$90.54	\$88.73	\$89.63	\$83.57	\$88.73
Inpatient/Outpatient	AQUADEKS PO LIQD	58914-214-60	A9270	\$1.57	\$1.54	\$1.55	\$1.45	\$1.54
Inpatient/Outpatient	MIDODRINE HCL 10 MG PO TABS	0904-6819-07	A9270	\$3.07	\$3.01	\$3.04	\$2.83	\$3.01
Inpatient/Outpatient	MIDODRINE HCL 10 MG PO TABS	60687-409-25	A9270	\$3.78	\$3.70	\$3.74	\$3.49	\$3.70
Inpatient/Outpatient	MIDODRINE HCL 10 MG PO TABS	60687-409-95	A9270	\$3.78	\$3.70	\$3.74	\$3.49	\$3.70
Inpatient/Outpatient	ROCURONIUM BROMIDE 50 MG/5ML IV SOLN	63323-426-05		\$5.87	\$5.75	\$5.81	\$5.42	\$5.75
Inpatient/Outpatient	ROCURONIUM BROMIDE 50 MG/5ML IV SOLN	0409-9558-05		\$2.71	\$2.66	\$2.68	\$2.50	\$2.66
Inpatient/Outpatient	ROCURONIUM BROMIDE 50 MG/5ML IV SOLN	25021-662-05		\$5.43	\$5.32	\$5.38	\$5.01	\$5.32
Inpatient/Outpatient	ROCURONIUM BROMIDE 50 MG/5ML IV SOLN	67457-228-05		\$2.18	\$2.14	\$2.16	\$2.01	\$2.14
Inpatient/Outpatient	ROCURONIUM BROMIDE 50 MG/5ML IV SOLN	39822-4200-1		\$18.05	\$17.69	\$17.87	\$16.66	\$17.69
Inpatient/Outpatient	ROCURONIUM BROMIDE 50 MG/5ML IV SOLN	0781-3220-75		\$2.82	\$2.76	\$2.79	\$2.60	\$2.76
Inpatient/Outpatient	ROCURONIUM BROMIDE 50 MG/5ML IV SOLN	70860-651-05		\$3.62	\$3.55	\$3.58	\$3.34	\$3.55
Inpatient/Outpatient	ROCURONIUM BROMIDE 50 MG/5ML IV SOLN	0143-9250-01		\$1.93	\$1.89	\$1.91	\$1.78	\$1.89
Inpatient/Outpatient	ROCURONIUM BROMIDE 50 MG/5ML IV SOLN	0409-9558-11		\$7.29	\$7.14	\$7.22	\$6.73	\$7.14
Inpatient/Outpatient	ROCURONIUM BROMIDE 50 MG/5ML IV SOLN	66794-228-41		\$4.34	\$4.25	\$4.30	\$4.01	\$4.25
Inpatient/Outpatient	ROCURONIUM BROMIDE 50 MG/5ML IV SOLN	70860-651-41		\$6.32	\$6.19	\$6.26	\$5.83	\$6.19
Inpatient/Outpatient	ROCURONIUM BROMIDE 50 MG/5ML IV SOLN	63323-426-02		\$5.87	\$5.75	\$5.81	\$5.42	\$5.75
Inpatient/Outpatient	GUAIFENESIN-CODEINE 100-10 MG/5ML PO SOLN	0121-0775-04	A9270	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	GUAIFENESIN-CODEINE 100-10 MG/5ML PO SOLN	0121-1775-10	A9270	\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	GUAIFENESIN-CODEINE 100-10 MG/5ML PO SOLN	0121-1550-10	A9270	\$0.30	\$0.29	\$0.30	\$0.28	\$0.29
Inpatient/Outpatient	GUAIFENESIN-CODEINE 100-10 MG/5ML PO SOLN	50383-087-10	A9270	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	GUAIFENESIN-CODEINE 100-10 MG/5ML PO SOLN	69367-272-04	A9270	\$0.29	\$0.28	\$0.29	\$0.27	\$0.28
Inpatient/Outpatient	DIVALPROEX SODIUM ER 500 MG PO TB24	0074-7126-13	A9270	\$25.34	\$24.83	\$25.09	\$23.39	\$24.83
Inpatient/Outpatient	DIVALPROEX SODIUM ER 500 MG PO TB24	68084-317-11	A9270	\$2.43	\$2.38	\$2.41	\$2.24	\$2.38
Inpatient/Outpatient	DIVALPROEX SODIUM ER 500 MG PO TB24	64679-725-02	A9270	\$2.08	\$2.04	\$2.06	\$1.92	\$2.04
Inpatient/Outpatient	DIVALPROEX SODIUM ER 500 MG PO TB24	0904-6073-61	A9270	\$13.84	\$13.56	\$13.70	\$12.77	\$13.56
Inpatient/Outpatient	DIVALPROEX SODIUM ER 500 MG PO TB24	10370-511-10	A9270	\$3.77	\$3.69	\$3.73	\$3.48	\$3.69

Inpatient/Outpatient	DIVALPROEX SODIUM ER 500 MG PO TB24	55111-534-01	A9270		\$1.47	\$1.44	\$1.46	\$1.36	\$1.44
Inpatient/Outpatient	DIVALPROEX SODIUM ER 500 MG PO TB24	65162-757-10	A9270		\$1.77	\$1.73	\$1.75	\$1.63	\$1.73
Inpatient/Outpatient	DIVALPROEX SODIUM ER 500 MG PO TB24	16714-485-01	A9270		\$1.27	\$1.24	\$1.26	\$1.17	\$1.24
Inpatient/Outpatient	DIVALPROEX SODIUM ER 500 MG PO TB24	68084-415-11	A9270		\$5.38	\$5.27	\$5.33	\$4.97	\$5.27
Inpatient/Outpatient	DIVALPROEX SODIUM ER 500 MG PO TB24	0904-6364-61	A9270		\$4.97	\$4.87	\$4.92	\$4.59	\$4.87
Inpatient/Outpatient	GLUCOSE 40 % PO GEL	00574-06915	A9270		\$0.37	\$0.36	\$0.37	\$0.34	\$0.36
Inpatient/Outpatient	GLUCOSE 40 % PO GEL	0574-0070-15	A9270		\$0.38	\$0.37	\$0.38	\$0.35	\$0.37
Inpatient/Outpatient	GLUCOSE 40 % PO GEL	19962-62653	A9270		\$7.93	\$7.93	\$8.01	\$7.47	\$7.93
Inpatient/Outpatient	INSULIN REGULAR INFUSION 1 UNIT/ML (PORTLAND PROTOCOL) PREMIX	99999-8215-1	J1817		\$18.23	\$17.87	\$18.05	\$16.83	\$17.87
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE 600 MG/4ML IJ SOLN	63323-282-04			\$4.17	\$4.09	\$4.13	\$3.85	\$4.09
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE 600 MG/4ML IJ SOLN	0409-4051-01			\$3.34	\$3.27	\$3.31	\$3.08	\$3.27
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE 600 MG/4ML IJ SOLN	0009-0775-20			\$9.65	\$9.46	\$9.55	\$8.91	\$9.46
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE 600 MG/4ML IJ SOLN	67457-815-00			\$1.54	\$1.51	\$1.52	\$1.42	\$1.51
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE 600 MG/4ML IJ SOLN	0009-0602-04			\$2.36	\$2.31	\$2.34	\$2.18	\$2.31
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE 600 MG/4ML IJ SOLN	25021-115-04			\$2.37	\$2.32	\$2.35	\$2.19	\$2.32
Inpatient/Outpatient	VITAMIN D3 25 MCG (1000 UT) PO TABS	0904-5824-60	A9150		\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	VITAMIN D3 25 MCG (1000 UT) PO TABS	0904-5824-61	A9150		\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	VITAMIN D3 25 MCG (1000 UT) PO TABS	40985-27139	A9150		\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	VITAMIN D3 25 MCG (1000 UT) PO TABS	48433-104-01	A9150		\$0.49	\$0.48	\$0.49	\$0.45	\$0.48
Inpatient/Outpatient	VITAMIN D3 25 MCG (1000 UT) PO TABS	0536-3334-01	A9150		\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	VITAMIN D3 25 MCG (1000 UT) PO TABS	0904-5824-89	A9150		\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	VITAMIN D3 25 MCG (1000 UT) PO TABS	80681-16800	A9150		\$0.08	\$0.08	\$0.08	\$0.07	\$0.08
Inpatient/Outpatient	VITAMIN D3 25 MCG (1000 UT) PO TABS	80681-16900	A9150		\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	VITAMIN D3 25 MCG (1000 UT) PO TABS	80681-16801	A9150		\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	VITAMIN D3 25 MCG (1000 UT) PO TABS	20555-03300	A9150		\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	VITAMIN D3 25 MCG (1000 UT) PO TABS	54629-050-24	A9150		\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	DIAZEPAM 10 MG RE GEL	0187-0658-20	A9270		\$725.68	\$711.17	\$718.42	\$669.80	\$711.17
Inpatient/Outpatient	FOSPHENYTOIN SODIUM 500 MG PE/10ML IJ SOLN	67457-517-00	Q2009		\$5.36	\$5.25	\$5.31	\$4.95	\$5.25
Inpatient/Outpatient	FOSPHENYTOIN SODIUM 500 MG PE/10ML IJ SOLN	0069-6001-10	Q2009		\$6.94	\$6.80	\$6.87	\$6.41	\$6.80
Inpatient/Outpatient	HEPARIN 5000 UNITS IN NS 500 ML FOR BALLOON PUMP (INTRAOP USE ONLY)	99999-154-50	J1644		\$20.66	\$20.25	\$20.45	\$19.07	\$20.25
Inpatient/Outpatient	CISPLATIN 50 MG/50ML IV SOLN	63323-103-51	J9060		\$1.12	\$1.10	\$1.11	\$1.03	\$1.10
Inpatient/Outpatient	CISPLATIN 50 MG/50ML IV SOLN	0703-5747-11	J9060		\$1.96	\$1.92	\$1.94	\$1.81	\$1.92
Inpatient/Outpatient	CISPLATIN 50 MG/50ML IV SOLN	67457-425-51	J9060		\$2.02	\$1.98	\$2.00	\$1.86	\$1.98
Inpatient/Outpatient	CISPLATIN 50 MG/50ML IV SOLN	16729-288-11	J9060		\$0.73	\$0.72	\$0.72	\$0.67	\$0.72
Inpatient/Outpatient	CISPLATIN 50 MG/50ML IV SOLN	0143-9504-01	J9060		\$0.63	\$0.62	\$0.62	\$0.58	\$0.62
Inpatient/Outpatient	CAFFEINE CITRATE 60 MG/3ML IV SOLN	63323-407-04	J0706		\$7.58	\$7.43	\$7.50	\$7.00	\$7.43
Inpatient/Outpatient	CAFFEINE CITRATE 60 MG/3ML IV SOLN	55150-187-03	J0706		\$34.02	\$33.34	\$33.68	\$31.40	\$33.34
Inpatient/Outpatient	CAFFEINE CITRATE 60 MG/3ML IV SOLN	72485-104-01	J0706		\$15.08	\$14.78	\$14.93	\$13.92	\$14.78
Inpatient/Outpatient	CAFFEINE CITRATE 60 MG/3ML IV SOLN	63323-407-03	J0706		\$7.58	\$7.43	\$7.50	\$7.00	\$7.43
Inpatient/Outpatient	CAFFEINE CITRATE 60 MG/3ML IV SOLN	51754-0500-1	J0706		\$13.57	\$13.30	\$13.43	\$12.53	\$13.30
Inpatient/Outpatient	RALTEGRAVIR POTASSIUM 400 MG PO TABS	0006-0227-61	A9270		\$143.12	\$140.26	\$141.69	\$132.10	\$140.26
Inpatient/Outpatient	FLUCONAZOLE IVPB 100 MG IN NS 50 ML PREMIX	99999-058-00	J1450		\$0.21	\$0.21	\$0.21	\$0.19	\$0.21
Inpatient/Outpatient	TRIAMCINOLONE ACETONIDE 40 MG/ML IO SUSP	0065-0543-01	J3300		\$501.24	\$491.22	\$496.23	\$462.64	\$491.22
Inpatient/Outpatient	STERILE WATER FOR IRRIGATION IR SOLN POUR BOTTLE	0338-0004-04			\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	THROMBIN (RECOMBINANT) 5000 UNITS EX SOLR	65293-006-01			\$249.61	\$244.62	\$247.11	\$230.39	\$244.62
Inpatient/Outpatient	THROMBIN (RECOMBINANT) 5000 UNITS EX SOLR	43825-606-41			\$292.82	\$286.96	\$289.89	\$270.27	\$286.96
Inpatient/Outpatient	THROMBIN (RECOMBINANT) 5000 UNITS EX SOLR	0338-0322-01			\$291.75	\$285.92	\$288.83	\$269.29	\$285.92
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IR SOLN	0409-6138-22			\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IR SOLN	0338-0048-05			\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IR SOLN	0338-0048-03			\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IR SOLN	0338-0048-04			\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IR SOLN	0338-0048-02			\$0.04	\$0.04	\$0.04	\$0.04	\$0.04
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IR SOLN	0264-2201-00			\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IR SOLN	0990-7138-09			\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	HEPATITIS A VACCINE 50 UNIT/ML IM SUSP	0006-4841-00	90632		\$277.31	\$271.76	\$274.54	\$255.96	\$271.76
Inpatient/Outpatient	HEPATITIS B IMMUNE GLOBULIN 312 UNIT/ML IM SOLN	59730-4202-1	90371		\$464.54	\$455.25	\$459.89	\$428.77	\$455.25
Inpatient/Outpatient	HEPATITIS B IMMUNE GLOBULIN 312 UNIT/ML IM SOLN	59730-4203-1	90371		\$466.71	\$457.38	\$462.04	\$430.77	\$457.38
Inpatient/Outpatient	HEPATITIS B IMMUNE GLOBULIN 312 UNIT/ML IM SOLN	69800-4202-1	90371		\$535.92	\$525.20	\$530.56	\$494.65	\$525.20
Inpatient/Outpatient	HEPATITIS B IMMUNE GLOBULIN 312 UNIT/ML IM SOLN	69800-4203-1	90371		\$469.37	\$459.98	\$464.68	\$433.23	\$459.98
Inpatient/Outpatient	EPOPSTENOL SODIUM 1.5 MG NEB SOLR	66215-402-01	J1325		\$284.55	\$278.86	\$281.70	\$262.64	\$278.86
Inpatient/Outpatient	EPOPSTENOL SODIUM 1.5 MG NEB SOLR	62756-060-40	J1325		\$185.31	\$181.60	\$183.46	\$171.04	\$181.60
Inpatient/Outpatient	FLUCONAZOLE IVPB 50 MG IN 25 ML PREMIX	99999-059-00	J1450		\$0.21	\$0.21	\$0.21	\$0.19	\$0.21
Inpatient/Outpatient	OCTREOTIDE ACETATE 50 MCG/ML IJ SOLN	63323-365-01	J2354		\$22.84	\$22.38	\$22.61	\$21.08	\$22.38
Inpatient/Outpatient	OCTREOTIDE ACETATE 50 MCG/ML IJ SOLN	0078-0180-61	J2354		\$63.80	\$62.52	\$63.16	\$58.89	\$62.52
Inpatient/Outpatient	OCTREOTIDE ACETATE 50 MCG/ML IJ SOLN	55390-160-10	J2354		\$17.56	\$17.21	\$17.38	\$16.21	\$17.21
Inpatient/Outpatient	OCTREOTIDE ACETATE 50 MCG/ML IJ SOLN	25021-451-01	J2354		\$20.35	\$19.94	\$20.15	\$18.78	\$19.94
Inpatient/Outpatient	OCTREOTIDE ACETATE 50 MCG/ML IJ SOLN	0703-3301-01	J2354		\$20.78	\$20.36	\$20.57	\$19.18	\$20.36
Inpatient/Outpatient	OCTREOTIDE ACETATE 50 MCG/ML IJ SOLN	0641-6174-01	J2354		\$9.22	\$9.04	\$9.13	\$8.51	\$9.04

Inpatient/Outpatient	OCTREOTIDE ACETATE 50 MCG/ML IJ SOLN	0703-3301-04	J2354	\$20.32	\$19.91	\$20.12	\$18.76	\$19.91
Inpatient/Outpatient	OCTREOTIDE ACETATE 100 MCG/ML IJ SOLN	55390-161-10	J2354	\$36.05	\$35.33	\$35.69	\$33.27	\$35.33
Inpatient/Outpatient	OCTREOTIDE ACETATE 100 MCG/ML IJ SOLN	0703-3311-04	J2354	\$13.08	\$12.82	\$12.95	\$12.07	\$12.82
Inpatient/Outpatient	OCTREOTIDE ACETATE 100 MCG/ML IJ SOLN	0078-0181-01	J2354	\$126.55	\$124.02	\$125.28	\$116.81	\$124.02
Inpatient/Outpatient	OCTREOTIDE ACETATE 100 MCG/ML IJ SOLN	0703-3311-01	J2354	\$13.27	\$13.00	\$13.14	\$12.25	\$13.00
Inpatient/Outpatient	OCTREOTIDE ACETATE 100 MCG/ML IJ SOLN	0078-0181-61	J2354	\$89.02	\$87.24	\$88.13	\$82.17	\$87.24
Inpatient/Outpatient	OCTREOTIDE ACETATE 100 MCG/ML IJ SOLN	62756-349-44	J2354	\$21.72	\$21.29	\$21.50	\$20.05	\$21.29
Inpatient/Outpatient	OCTREOTIDE ACETATE 100 MCG/ML IJ SOLN	25021-452-01	J2354	\$29.40	\$28.81	\$29.11	\$27.14	\$28.81
Inpatient/Outpatient	OCTREOTIDE ACETATE 100 MCG/ML IJ SOLN	0641-6175-01	J2354	\$11.57	\$11.34	\$11.45	\$10.68	\$11.34
Inpatient/Outpatient	OCTREOTIDE ACETATE 100 MCG/ML IJ SOLN	63323-376-04	J2354	\$12.62	\$12.37	\$12.49	\$11.65	\$12.37
Inpatient/Outpatient	OCTREOTIDE ACETATE 100 MCG/ML IJ SOLN	63323-376-01	J2354	\$12.62	\$12.37	\$12.49	\$11.65	\$12.37
Inpatient/Outpatient	OCTREOTIDE ACETATE 100 MCG/ML IJ SOLN	63323-376-41	J2354	\$12.62	\$12.37	\$12.49	\$11.65	\$12.37
Inpatient/Outpatient	OCTREOTIDE ACETATE 500 MCG/ML IJ SOLN	55390-162-10	J2354	\$65.99	\$64.67	\$65.33	\$60.91	\$64.67
Inpatient/Outpatient	OCTREOTIDE ACETATE 500 MCG/ML IJ SOLN	63323-377-01	J2354	\$53.15	\$52.09	\$52.62	\$49.06	\$52.09
Inpatient/Outpatient	OCTREOTIDE ACETATE 500 MCG/ML IJ SOLN	0703-3321-01	J2354	\$70.80	\$69.38	\$70.09	\$65.35	\$69.38
Inpatient/Outpatient	OCTREOTIDE ACETATE 500 MCG/ML IJ SOLN	25021-453-01	J2354	\$158.31	\$155.14	\$156.73	\$146.12	\$155.14
Inpatient/Outpatient	OCTREOTIDE ACETATE 500 MCG/ML IJ SOLN	0641-6176-01	J2354	\$42.80	\$41.94	\$42.37	\$39.50	\$41.94
Inpatient/Outpatient	OCTREOTIDE ACETATE 500 MCG/ML IJ SOLN	63323-377-04	J2354	\$53.15	\$52.09	\$52.62	\$49.06	\$52.09
Inpatient/Outpatient	OCTREOTIDE ACETATE 500 MCG/ML IJ SOLN	63323-377-41	J2354	\$53.15	\$52.09	\$52.62	\$49.06	\$52.09
Inpatient/Outpatient	METHOCARBAMOL 500 MG PO TABS	0143-1290-01	A9270	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	METHOCARBAMOL 500 MG PO TABS	63739-166-10	A9270	\$0.59	\$0.58	\$0.58	\$0.54	\$0.58
Inpatient/Outpatient	METHOCARBAMOL 500 MG PO TABS	0603-4485-21	A9270	\$0.55	\$0.54	\$0.54	\$0.51	\$0.54
Inpatient/Outpatient	METHOCARBAMOL 500 MG PO TABS	68084-056-11	A9270	\$0.58	\$0.57	\$0.57	\$0.54	\$0.57
Inpatient/Outpatient	METHOCARBAMOL 500 MG PO TABS	31722-533-01	A9270	\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	METHOCARBAMOL 500 MG PO TABS	70010-754-01	A9270	\$0.20	\$0.20	\$0.20	\$0.18	\$0.20
Inpatient/Outpatient	METHOCARBAMOL 500 MG PO TABS	76385-123-01	A9270	\$0.37	\$0.36	\$0.37	\$0.34	\$0.36
Inpatient/Outpatient	METHOCARBAMOL 500 MG PO TABS	60687-559-11	A9270	\$0.86	\$0.84	\$0.85	\$0.79	\$0.84
Inpatient/Outpatient	DINOPROSTONE 10 MG VA INST	55566-2800-1		\$1,307.84	\$1,294.76	\$1,294.76	\$1,207.14	\$1,281.68
Inpatient/Outpatient	APIXABAN 5 MG PO TABS	0003-0894-31	A9270	\$29.91	\$29.31	\$29.61	\$27.61	\$29.31
Inpatient/Outpatient	APIXABAN 5 MG PO TABS	0003-0894-21	A9270	\$29.91	\$29.31	\$29.61	\$27.61	\$29.31
Inpatient/Outpatient	REGADENOSON 0.4 MG/5ML IV SOLN	0469-6501-89	J2785	\$210.54	\$206.33	\$208.43	\$194.33	\$206.33
Inpatient/Outpatient	CISPLATIN 200 MG/200ML IV SOLN	63323-103-64	J9060	\$0.84	\$0.82	\$0.83	\$0.78	\$0.82
Inpatient/Outpatient	CAPECITABINE 150 MG PO TABS	0004-1100-20	J8520	\$61.55	\$60.32	\$60.93	\$56.81	\$60.32
Inpatient/Outpatient	METHYLNALTREXONE BROMIDE 12 MG/0.6ML SC SOLN	65649-551-02	J2212	\$767.65	\$752.30	\$759.97	\$708.54	\$752.30
Inpatient/Outpatient	METHYLNALTREXONE BROMIDE 12 MG/0.6ML SC SOLN	65649-551-03	J2212	\$767.70	\$752.35	\$760.02	\$708.59	\$752.35
Inpatient/Outpatient	TEMAZEPAM 30 MG PO CAPS	51079-419-20	A9270	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	TEMAZEPAM 30 MG PO CAPS	0228-2077-10	A9270	\$0.56	\$0.55	\$0.55	\$0.52	\$0.55
Inpatient/Outpatient	CAPECITABINE 500 MG PO TABS	0004-1101-50	J8521	\$204.49	\$200.40	\$202.45	\$188.74	\$200.40
Inpatient/Outpatient	CAPECITABINE 500 MG PO TABS	16729-073-29	J8521	\$3.50	\$3.43	\$3.47	\$3.23	\$3.43
Inpatient/Outpatient	CAPECITABINE 500 MG PO TABS	50268-154-11	J8521	\$76.85	\$75.31	\$76.08	\$70.93	\$75.31
Inpatient/Outpatient	CAPECITABINE 500 MG PO TABS	51079-510-01	J8521	\$126.30	\$123.77	\$125.04	\$116.57	\$123.77
Inpatient/Outpatient	CAPECITABINE 500 MG PO TABS	60687-149-11	J8521	\$72.19	\$70.75	\$71.47	\$66.63	\$70.75
Inpatient/Outpatient	SUMATRIPTAN SUCCINATE 6 MG/0.5ML SC SOLN	0173-0449-02	A9270	\$1,201.08	\$1,177.06	\$1,189.07	\$1,108.60	\$1,177.06
Inpatient/Outpatient	SUMATRIPTAN SUCCINATE 6 MG/0.5ML SC SOLN	0703-7351-02	A9270	\$522.74	\$512.29	\$517.51	\$482.49	\$512.29
Inpatient/Outpatient	SUMATRIPTAN SUCCINATE 6 MG/0.5ML SC SOLN	0143-9638-05	A9270	\$60.01	\$58.81	\$59.41	\$55.39	\$58.81
Inpatient/Outpatient	SUMATRIPTAN SUCCINATE 6 MG/0.5ML SC SOLN	0781-3174-71	A9270	\$202.39	\$198.34	\$200.37	\$186.81	\$198.34
Inpatient/Outpatient	SUMATRIPTAN SUCCINATE 6 MG/0.5ML SC SOLN	0143-9638-01	A9270	\$60.05	\$58.85	\$59.45	\$55.43	\$58.85
Inpatient/Outpatient	SUMATRIPTAN SUCCINATE 6 MG/0.5ML SC SOLN	55150-173-01	A9270	\$65.14	\$63.84	\$64.49	\$60.12	\$63.84
Inpatient/Outpatient	SUMATRIPTAN SUCCINATE 6 MG/0.5ML SC SOLN	64679-728-08	A9270	\$45.24	\$44.34	\$44.79	\$41.76	\$44.34
Inpatient/Outpatient	SUMATRIPTAN SUCCINATE 6 MG/0.5ML SC SOLN	70069-804-01	A9270	\$41.12	\$40.30	\$40.71	\$37.95	\$40.30
Inpatient/Outpatient	VALPROIC ACID 250 MG/5ML PO SOLN	0121-0675-16	A9270	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	VALPROIC ACID 250 MG/5ML PO SOLN	0121-4675-05	A9270	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	VALPROIC ACID 250 MG/5ML PO SOLN	68094-193-61	A9270	\$0.43	\$0.42	\$0.43	\$0.40	\$0.42
Inpatient/Outpatient	VALPROIC ACID 250 MG/5ML PO SOLN	68094-193-59	A9270	\$0.43	\$0.42	\$0.43	\$0.40	\$0.42
Inpatient/Outpatient	VALPROIC ACID 250 MG/5ML PO SOLN	60432-621-16	A9270	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	VALPROIC ACID 250 MG/5ML PO SOLN	50383-792-16	A9270	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	VALPROIC ACID 250 MG/5ML PO SOLN	0121-0675-85	A9270	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	METHOTREXATE SODIUM (PF) 50 MG/2ML IJ SOLN	0703-3671-03	J9250	\$9.23	\$9.05	\$9.14	\$8.52	\$9.05
Inpatient/Outpatient	METHOTREXATE SODIUM (PF) 50 MG/2ML IJ SOLN	0143-9519-01	J9250	\$5.69	\$5.58	\$5.63	\$5.25	\$5.58
Inpatient/Outpatient	MESALAMINE ER 500 MG PO CPCR	54092-191-12	A9270	\$27.44	\$26.89	\$27.17	\$25.33	\$26.89
Inpatient/Outpatient	MESALAMINE ER 500 MG PO CPCR	63304-089-13	A9270	\$20.21	\$19.81	\$20.01	\$18.65	\$19.81
Inpatient/Outpatient	TRACE MINERALS CRCCUMNSEZN (MTE-5 CONCENTRATE) IV SOLN	0517-8201-25		\$54.60	\$53.51	\$54.05	\$50.40	\$53.51
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 5000 UNIT/ML - INITIAL IV BOLUS	0641-0400-12	J1644	\$11.60	\$11.37	\$11.48	\$10.71	\$11.37
Inpatient/Outpatient	MIRABEGRON ER 25 MG PO TB24	0469-2601-30	A9270	\$64.79	\$63.49	\$64.14	\$59.80	\$63.49
Inpatient/Outpatient	TORSEMIDE 100 MG PO TABS	50111-918-01	A9270	\$0.93	\$0.91	\$0.92	\$0.86	\$0.91
Inpatient/Outpatient	TORSEMIDE 100 MG PO TABS	31722-532-01	A9270	\$2.19	\$2.15	\$2.17	\$2.02	\$2.15
Inpatient/Outpatient	TORSEMIDE 100 MG PO TABS	50268-757-11	A9270	\$1.46	\$1.43	\$1.45	\$1.35	\$1.43
Inpatient/Outpatient	BICTEGRAVIR-EMTRICITAB-TENOFOV 50-200-25 MG PO TABS	61958-2501-1	A9270	\$395.14	\$387.24	\$391.19	\$364.71	\$387.24

Inpatient/Outpatient	INSULIN REGULAR INFUSION 1 UNIT/ML (NON-DKA RATE PROTOCOL) PREMIX	99999-8215-1	J1817		\$18.23	\$17.87	\$18.05	\$16.83	\$17.87
Inpatient/Outpatient	LIDOCAINE 4 % EX PTCH	0536-1202-15			\$4.39	\$4.30	\$4.35	\$4.05	\$4.30
Inpatient/Outpatient	LIDOCAINE 4 % EX PTCH	41167-05842			\$4.39	\$4.30	\$4.35	\$4.05	\$4.30
Inpatient/Outpatient	LIDOCAINE 4 % EX PTCH	71399-3884-6			\$6.97	\$6.83	\$6.90	\$6.43	\$6.83
Inpatient/Outpatient	LIDOCAINE 4 % EX PTCH	0536-1202-07			\$3.52	\$3.45	\$3.48	\$3.25	\$3.45
Inpatient/Outpatient	DILTIAZEM INFUSION 1 MG/ML IN D5W 125 ML PREMIX	99999-817-05			\$33.85	\$33.17	\$33.51	\$31.24	\$33.17
Inpatient/Outpatient	PENICILLIN G POTASSIUM IVPB 2.5 MU IN NS 100ML PREMIX	99999-4087-1	J2540		\$27.18	\$26.64	\$26.91	\$25.09	\$26.64
Inpatient/Outpatient	PENICILLIN G POTASSIUM IVPB 5 MU IN NS 100ML PREMIX	99999-520-83	J2540		\$27.18	\$26.64	\$26.91	\$25.09	\$26.64
Inpatient/Outpatient	TORSEMIDE 5 MG PO TABS	50111-915-01	A9270		\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	TORSEMIDE 5 MG PO TABS	50268-754-11	A9270		\$1.59	\$1.56	\$1.57	\$1.47	\$1.56
Inpatient/Outpatient	IBUPROFEN 100 MG PO CHEW	49348-639-04			\$0.64	\$0.63	\$0.63	\$0.59	\$0.63
Inpatient/Outpatient	IBUPROFEN 100 MG PO CHEW	0573-0179-20			\$0.70	\$0.69	\$0.69	\$0.65	\$0.69
Inpatient/Outpatient	VANCOMYCIN PO SOLN 125 MG/2.5 ML (50 MG/ML)	99999-615-46	A9270		\$11.04	\$10.82	\$10.93	\$10.19	\$10.82
Inpatient/Outpatient	GENTAMICIN FORTIFIED OPHTHALMIC DROPS 13.6 MG/ML	99999-4089-4	A9270		\$4.08	\$4.00	\$4.04	\$3.77	\$4.00
Inpatient/Outpatient	GENTAMICIN FORTIFIED OPHTHALMIC DROPS 13 MG/ML	99999-4089-6	A9270		\$4.08	\$4.00	\$4.04	\$3.77	\$4.00
Inpatient/Outpatient	TOBRAMYCIN FORTIFIED OPHTHALMIC DROPS 13 MG/ML	99999-4089-7	A9270		\$4.56	\$4.47	\$4.51	\$4.21	\$4.47
Inpatient/Outpatient	TOBRAMYCIN FORTIFIED OPHTHALMIC DROPS 13.6 MG/ML	99999-4089-8	A9270		\$4.56	\$4.47	\$4.51	\$4.21	\$4.47
Inpatient/Outpatient	REMDESIVIR 100 MG IV (WRAP)	61958-2901-1			\$1,773.20	\$1,737.74	\$1,755.47	\$1,636.66	\$1,737.74
Inpatient/Outpatient	REMDESIVIR 100 MG IV (WRAP)	61958-2902-1			\$126.36	\$123.83	\$125.10	\$116.63	\$123.83
Inpatient/Outpatient	FENTANYL-BUPIVACAINE-NACL 4-0.125-0.9 MCG/ML-% IJ	99999-214-22	J3010		\$0.55	\$0.54	\$0.54	\$0.51	\$0.54
Inpatient/Outpatient	FENTANYL-BUPIVACAINE-NACL 4-0.125-0.9 MCG/ML-% IJ	99999-215-22	J3010		\$0.55	\$0.54	\$0.54	\$0.51	\$0.54
Inpatient/Outpatient	PNEUMOCOCCAL 13-VAL CONJ VACC IM SUSP	0005-1971-02		90670	\$1,422.92	\$1,394.46	\$1,408.69	\$1,313.36	\$1,394.46
Inpatient/Outpatient	KCL IN DEXTROSE-NACL 20-5-0.2 MEQ/L-% IV SOLN	0338-0663-04			\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	KCL IN DEXTROSE-NACL 10-5-0.45 MEQ/L-% IV SOLN	0338-0669-04			\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	NA FERRIC GLUC CPLX IN SUCROSE 12.5 MG/ML IV SOLN	0024-2792-10	J2916		\$8.49	\$8.32	\$8.41	\$7.84	\$8.32
Inpatient/Outpatient	NA FERRIC GLUC CPLX IN SUCROSE 12.5 MG/ML IV SOLN	0024-2794-10	J2916		\$8.49	\$8.32	\$8.41	\$7.84	\$8.32
Inpatient/Outpatient	NA FERRIC GLUC CPLX IN SUCROSE 12.5 MG/ML IV SOLN	0143-9570-01	J2916		\$12.21	\$11.97	\$12.09	\$11.27	\$11.97
Inpatient/Outpatient	GEMCITABINE HCL 200 MG/2ML IV SOLN	16729-391-30	J9201		\$11.86	\$11.62	\$11.74	\$10.95	\$11.62
Inpatient/Outpatient	HYDROXYZINE HCL 25 MG/ML IM SOLN	0517-4201-25	J3410		\$64.41	\$63.12	\$63.77	\$59.45	\$63.12
Inpatient/Outpatient	PERPHENAZINE 2 MG PO TABS	0781-1046-13	Q0175		\$5.32	\$5.21	\$5.27	\$4.91	\$5.21
Inpatient/Outpatient	PERPHENAZINE 2 MG PO TABS	0904-6599-61	Q0175		\$7.21	\$7.07	\$7.14	\$6.65	\$7.07
Inpatient/Outpatient	PERPHENAZINE 2 MG PO TABS	0378-5350-01	Q0175		\$2.05	\$2.01	\$2.03	\$1.89	\$2.01
Inpatient/Outpatient	PERPHENAZINE 2 MG PO TABS	0591-4101-01	Q0175		\$1.56	\$1.53	\$1.54	\$1.44	\$1.53
Inpatient/Outpatient	PERPHENAZINE 2 MG PO TABS	52536-162-01	Q0175		\$1.65	\$1.62	\$1.63	\$1.52	\$1.62
Inpatient/Outpatient	PERPHENAZINE 2 MG PO TABS	68382-591-01	Q0175		\$1.63	\$1.60	\$1.61	\$1.50	\$1.60
Inpatient/Outpatient	PETROLATUM GEL/JELLY EX OINT (WRAP)	0168-0053-45	A9270		\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	MORPHINE PCA 1 MG/ML - CONSERVATIVE NAIVE	0409-2029-02	J2274		\$1.21	\$1.19	\$1.20	\$1.12	\$1.19
Inpatient/Outpatient	CYCLOPENTOLATE-PHENYLEPHRINE 0.2-1 % OP SOLN	0065-0359-05	A9270		\$45.76	\$44.84	\$45.30	\$42.24	\$44.84
Inpatient/Outpatient	CYCLOPENTOLATE-PHENYLEPHRINE 0.2-1 % OP SOLN	0065-0359-02	A9270		\$65.12	\$63.82	\$64.47	\$60.11	\$63.82
Inpatient/Outpatient	ACETIC ACID 5 % SOLN	99999-192-51	A9270		\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	ACETIC ACID 5 % SOLN	51552-055-03	A9270		\$0.58	\$0.57	\$0.57	\$0.54	\$0.57
Inpatient/Outpatient	ACETIC ACID 5 % SOLN	99999-055-03	A9270		\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	MERCAPTOPYRINE 25MG PO HALF TABS	99999-581-25	A9270		\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	MISOPROSTOL 25 MCG PO QUARTER TABS	99999-145-25	A9270		\$8.34	\$8.17	\$8.26	\$7.70	\$8.17
Inpatient/Outpatient	MISOPROSTOL 50 MCG PO HALF TABS	99999-145-50	A9270		\$8.34	\$8.17	\$8.26	\$7.70	\$8.17
Inpatient/Outpatient	DEXTROSE 5 % BOLUS	0264-7510-10			\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	DEXTROSE 5 % BOLUS	0264-7510-20			\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	DEXTROSE 5 % BOLUS	0338-0017-02			\$0.04	\$0.04	\$0.04	\$0.04	\$0.04
Inpatient/Outpatient	DEXTROSE 5 % BOLUS	0338-0017-03			\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	DEXTROSE 5 % BOLUS	0338-0017-10			\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	DEXTROSE 5 % BOLUS	0338-0017-31			\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	DEXTROSE 5 % BOLUS	0338-0017-41			\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	DEXTROSE 5 % BOLUS	0338-0017-48			\$0.08	\$0.08	\$0.08	\$0.07	\$0.08
Inpatient/Outpatient	DEXTROSE 5 % BOLUS	0338-0017-38			\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	DEXTROSE 5 % BOLUS	0338-0017-04			\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	DEXTROSE 5 % BOLUS	0264-1102-55			\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	DEXTROSE-NACL 5-0.45 % BOLUS	0409-7926-03			\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	DEXTROSE-NACL 5-0.45 % BOLUS	0338-0085-03			\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	DEXTROSE-NACL 5-0.45 % BOLUS	0338-0085-04			\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	DEXTROSE-NACL 5-0.2 % BOLUS	0338-0077-03			\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	DEXTROSE-NACL 5-0.2 % BOLUS	0338-0077-02			\$0.04	\$0.04	\$0.04	\$0.04	\$0.04
Inpatient/Outpatient	DEXTROSE-NACL 5-0.2 % BOLUS	0338-0077-04			\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	DEXTROSE IN LACTATED RINGERS 5 % BOLUS	0338-0125-04	J7121		\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	DEXTROSE-NACL 5-0.9 % BOLUS	0338-0089-03	J7042		\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	DEXTROSE-NACL 5-0.9 % BOLUS	0338-0089-04	J7042		\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	MAGNESIUM SULFATE IVPB 6 GM/150 ML PREMIX SOLN	99999-009-07	J3475		\$28.24	\$27.68	\$27.96	\$26.07	\$27.68
Inpatient/Outpatient	FERRIC SUBSULFATE (MONSELS) PASTE	48783-112-08	A9270		\$1.63	\$1.60	\$1.61	\$1.50	\$1.60
Inpatient/Outpatient	NEOSTIGMINE METHYLSULFATE 1 MG/ML IV BOLUS	0641-6149-01	J2710		\$2.70	\$2.65	\$2.67	\$2.49	\$2.65

Inpatient/Outpatient	LACTATED RINGERS BOLUS	0338-0117-04		\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	LACTATED RINGERS BOLUS	0338-0117-03		\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	SODIUM CHLORIDE 0.9% BOLUS	0338-0049-03	J7050	\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	SODIUM CHLORIDE 0.9% BOLUS	0338-0049-10	J7050	\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	SODIUM CHLORIDE 0.9% BOLUS	0338-0049-02	J7050	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	SODIUM CHLORIDE 0.9% BOLUS	0338-0049-31	J7050	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	SODIUM CHLORIDE 0.9% BOLUS	0338-0049-38	J7050	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	SODIUM CHLORIDE 0.9% BOLUS	0338-0049-41	J7050	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	SODIUM CHLORIDE 0.9% BOLUS	0338-0049-48	J7050	\$0.08	\$0.08	\$0.08	\$0.07	\$0.08
Inpatient/Outpatient	SODIUM CHLORIDE 0.9% BOLUS	0338-0553-11	J7050	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	SODIUM CHLORIDE 0.9% BOLUS	0338-0553-18	J7050	\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	SODIUM CHLORIDE 0.9% BOLUS	0264-7800-10	J7050	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	SODIUM CHLORIDE 0.9% BOLUS	0338-0049-04	J7030	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	SODIUM CHLORIDE 0.45% BOLUS	0338-0043-04		\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	BENZOIN COMPOUND EX TINC	54162-100-02	A9150	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	BENZOIN COMPOUND EX TINC	0395-0243-92	A9150	\$0.56	\$0.55	\$0.55	\$0.52	\$0.55
Inpatient/Outpatient	BENZOIN EX LIQD	8026-4070-00	A9150	\$0.78	\$0.76	\$0.77	\$0.72	\$0.76
Inpatient/Outpatient	CHLORDIAZEPOXIDE HCL 5 MG PO CAPS	51079-374-20	A9270	\$3.12	\$3.06	\$3.09	\$2.88	\$3.06
Inpatient/Outpatient	CHLORDIAZEPOXIDE HCL 5 MG PO CAPS	0555-0158-02	A9270	\$0.87	\$0.85	\$0.86	\$0.80	\$0.85
Inpatient/Outpatient	MICROFIBRILLAR COLL HEMOSTAT EX POWD	8137-001985		\$362.07	\$354.83	\$358.45	\$334.19	\$354.83
Inpatient/Outpatient	MICROFIBRILLAR COLL HEMOSTAT EX POWD	53276-1010-2		\$766.98	\$751.64	\$759.31	\$707.92	\$751.64
Inpatient/Outpatient	MICROFIBRILLAR COLL HEMOSTAT EX POWD	0998-1010-59		\$457.01	\$447.87	\$452.44	\$421.82	\$447.87
Inpatient/Outpatient	MICROFIBRILLAR COLL HEMOSTAT EX POWD	53276-1010-59		\$457.01	\$447.87	\$452.44	\$421.82	\$447.87
Inpatient/Outpatient	MORPHINE SULFATE 50 MG/ML IV SOLN	0409-1134-03	J2270	\$2.66	\$2.61	\$2.63	\$2.46	\$2.61
Inpatient/Outpatient	GELATIN ADSORBABLE OP FILM	0009-0297-03		\$713.73	\$699.46	\$706.59	\$658.77	\$699.46
Inpatient/Outpatient	GELATIN ADSORBABLE OP FILM	0009-0297-01		\$550.70	\$539.69	\$545.19	\$508.30	\$539.69
Inpatient/Outpatient	GELATIN ABSORBABLE 12-7 MM EX MISC	0009-0315-08	A9270	\$18.88	\$18.50	\$18.69	\$17.43	\$18.50
Inpatient/Outpatient	GELATIN ABSORBABLE 12-7 MM EX MISC	63713-01972	A9270	\$35.83	\$35.11	\$35.47	\$33.07	\$35.11
Inpatient/Outpatient	PEPPERMINT OIL OIL	0395-2015-91	A9150	\$2.91	\$2.85	\$2.88	\$2.69	\$2.85
Inpatient/Outpatient	SODIUM HYALURONATE 13.8 MG/0.6ML IO SOSY	8544-508321	A9270	\$358.33	\$351.16	\$354.75	\$330.74	\$351.16
Inpatient/Outpatient	INSULIN GLULISINE APIDRA FOR PUMP BASAL	0088-2500-33	J1817	\$51.38	\$50.35	\$50.87	\$47.42	\$50.35
Inpatient/Outpatient	OXIDIZED CELLULOSE (SURGICEL) 2X3 INCH (#1953)	63713-01953		\$361.01	\$353.79	\$357.40	\$333.21	\$353.79
Inpatient/Outpatient	AMIKACIN SULFATE 1 GM/4ML IJ SOLN	23155-290-32	J0278	\$16.94	\$16.60	\$16.77	\$15.64	\$16.60
Inpatient/Outpatient	AMIKACIN SULFATE 1 GM/4ML IJ SOLN	23155-290-42	J0278	\$9.05	\$8.87	\$8.96	\$8.35	\$8.87
Inpatient/Outpatient	AMIKACIN SULFATE 1 GM/4ML IJ SOLN	63323-815-04	J0278	\$26.44	\$25.91	\$26.18	\$24.40	\$25.91
Inpatient/Outpatient	AMIKACIN SULFATE 1 GM/4ML IJ SOLN	0703-9040-01	J0278	\$14.03	\$13.75	\$13.89	\$12.95	\$13.75
Inpatient/Outpatient	AMIKACIN SULFATE 1 GM/4ML IJ SOLN	0641-6166-01	J0278	\$9.56	\$9.37	\$9.46	\$8.82	\$9.37
Inpatient/Outpatient	BENZOCAINE-MENTHOL 15-3.6 MG MT LOZG	0904-6255-49	A9150	\$0.34	\$0.33	\$0.34	\$0.31	\$0.33
Inpatient/Outpatient	FENTANYL CITRATE (PF) 100 MCG/2ML IJ SOLN (NICU/INFANT)(DOSES => 5 MCG)	99999-9093-2	J3010	\$1.45	\$1.42	\$1.44	\$1.34	\$1.42
Inpatient/Outpatient	MIDAZOLAM HCL 1 MG/ML IJ SOLN (NICU/INFANT)(DOSES => 0.1 MG)	99999-6057-2	J2250	\$1.47	\$1.44	\$1.46	\$1.36	\$1.44
Inpatient/Outpatient	MIDAZOLAM HCL 1 MG/ML IJ SOLN (NICU/INFANT)(DOSES => 0.1 MG)	63323-411-15	J2250	\$2.57	\$2.52	\$2.54	\$2.37	\$2.52
Inpatient/Outpatient	TRYPAN BLUE 0.06 % OP SOLN	68803-612-10	A9270	\$194.40	\$190.51	\$192.46	\$179.43	\$190.51
Inpatient/Outpatient	LIDOCAINE 5 % EX PTCH	0591-3525-30	A9270	\$11.01	\$10.79	\$10.90	\$10.16	\$10.79
Inpatient/Outpatient	LIDOCAINE 5 % EX PTCH	0603-1880-10	A9270	\$7.79	\$7.63	\$7.71	\$7.19	\$7.63
Inpatient/Outpatient	LIDOCAINE 5 % EX PTCH	0603-1880-16	A9270	\$7.79	\$7.63	\$7.71	\$7.19	\$7.63
Inpatient/Outpatient	LIDOCAINE 5 % EX PTCH	0591-3525-11	A9270	\$11.01	\$10.79	\$10.90	\$10.16	\$10.79
Inpatient/Outpatient	LIDOCAINE 5 % EX PTCH	42858-118-30	A9270	\$10.05	\$9.85	\$9.95	\$9.28	\$9.85
Inpatient/Outpatient	LIDOCAINE 5 % EX PTCH	0378-9055-16	A9270	\$18.19	\$17.83	\$18.01	\$16.79	\$17.83
Inpatient/Outpatient	OCTREOTIDE ACETATE 20 MG IM KIT	0078-0647-81	J2353	\$6,802.84	\$6,666.78	\$6,734.81	\$6,279.02	\$6,666.78
Inpatient/Outpatient	OCTREOTIDE ACETATE 20 MG IM KIT	0078-0341-61	J2353	\$5,942.81	\$5,823.95	\$5,883.38	\$5,485.21	\$5,823.95
Inpatient/Outpatient	OCTREOTIDE ACETATE 20 MG IM KIT	0078-0818-81	J2353	\$8,395.63	\$8,227.72	\$8,311.67	\$7,749.17	\$8,227.72
Inpatient/Outpatient	BENZOCAINE 20 % EX AERO	63736-37882		\$0.29	\$0.28	\$0.29	\$0.27	\$0.28
Inpatient/Outpatient	OMALIZUMAB 150 MG SC SOLR	50242-040-62	J2357	\$2,313.38	\$2,267.11	\$2,290.25	\$2,135.25	\$2,267.11
Inpatient/Outpatient	CYCLOPHOSPHAMIDE 2 G IJ SOLR	10019-957-11	J9070	\$375.53	\$368.02	\$371.77	\$346.61	\$368.02
Inpatient/Outpatient	CYCLOPHOSPHAMIDE 2 G IJ SOLR	10019-957-01	J9070	\$1,777.74	\$1,742.19	\$1,759.96	\$1,640.85	\$1,742.19
Inpatient/Outpatient	CYCLOPHOSPHAMIDE 2 G IJ SOLR	10019-945-01	J9070	\$1,777.74	\$1,742.19	\$1,759.96	\$1,640.85	\$1,742.19
Inpatient/Outpatient	CYCLOPHOSPHAMIDE 2 G IJ SOLR	10019-945-10	J9070	\$2,088.91	\$2,047.13	\$2,068.02	\$1,928.06	\$2,047.13
Inpatient/Outpatient	CYCLOPHOSPHAMIDE 2 G IJ SOLR	70121-1240-1	J9070	\$1,603.89	\$1,571.81	\$1,587.85	\$1,480.39	\$1,571.81
Inpatient/Outpatient	CARBOPLATIN 600 MG/60ML IV SOLN	63323-172-60	J9045	\$8.15	\$7.99	\$8.07	\$7.52	\$7.99
Inpatient/Outpatient	CARBOPLATIN 600 MG/60ML IV SOLN	0703-4239-01	J9045	\$1.90	\$1.86	\$1.88	\$1.75	\$1.86
Inpatient/Outpatient	CARBOPLATIN 600 MG/60ML IV SOLN	25021-202-51	J9045	\$2.88	\$2.82	\$2.85	\$2.66	\$2.82
Inpatient/Outpatient	CARBOPLATIN 600 MG/60ML IV SOLN	47781-606-94	J9045	\$3.33	\$3.26	\$3.30	\$3.07	\$3.26
Inpatient/Outpatient	CARBOPLATIN 600 MG/60ML IV SOLN	61703-339-56	J9045	\$4.28	\$4.19	\$4.24	\$3.95	\$4.19
Inpatient/Outpatient	CARBOPLATIN 600 MG/60ML IV SOLN	0703-4239-81	J9045	\$1.90	\$1.86	\$1.88	\$1.75	\$1.86
Inpatient/Outpatient	CARBOPLATIN 600 MG/60ML IV SOLN	16729-295-12	J9045	\$3.56	\$3.49	\$3.52	\$3.29	\$3.49
Inpatient/Outpatient	CARBOPLATIN 600 MG/60ML IV SOLN	71288-100-51	J9045	\$3.31	\$3.24	\$3.28	\$3.06	\$3.24
Inpatient/Outpatient	DRONEDARONE HCL 400 MG PO TABS	0024-4142-10	A9270	\$48.59	\$47.62	\$48.10	\$44.85	\$47.62
Inpatient/Outpatient	DRONEDARONE HCL 400 MG PO TABS	0024-4142-60	A9270	\$53.47	\$52.40	\$52.94	\$49.35	\$52.40

Inpatient/Outpatient	PRASUGREL HCL 5 MG PO TABS	0002-4760-30	A9270		\$25.67	\$25.16	\$25.41	\$23.69	\$25.16
Inpatient/Outpatient	PRASUGREL HCL 5 MG PO TABS	0002-5121-30	A9270		\$69.24	\$67.86	\$68.55	\$63.91	\$67.86
Inpatient/Outpatient	PRASUGREL HCL 5 MG PO TABS	60505-4642-3	A9270		\$0.99	\$0.97	\$0.98	\$0.91	\$0.97
Inpatient/Outpatient	PRASUGREL HCL 10 MG PO TABS	0002-4759-77	A9270		\$25.67	\$25.16	\$25.41	\$23.69	\$25.16
Inpatient/Outpatient	PRASUGREL HCL 10 MG PO TABS	0002-5123-01	A9270		\$29.40	\$28.81	\$29.11	\$27.14	\$28.81
Inpatient/Outpatient	PRASUGREL HCL 10 MG PO TABS	65862-830-30	A9270		\$0.90	\$0.88	\$0.89	\$0.83	\$0.88
Inpatient/Outpatient	PRASUGREL HCL 10 MG PO TABS	65162-002-03	A9270		\$3.16	\$3.10	\$3.13	\$2.92	\$3.10
Inpatient/Outpatient	LACOSAMIDE 200 MG/20ML IV SOLN	0131-1810-67			\$13.83	\$13.55	\$13.69	\$12.77	\$13.55
Inpatient/Outpatient	LACOSAMIDE 200 MG/20ML IV SOLN	25021-791-20			\$12.44	\$12.19	\$12.32	\$11.48	\$12.19
Inpatient/Outpatient	PANCRELIPASE (LIP-PROT-AMYL) 12000-38000 UNITS PO CPEP	0032-1212-01	A9270		\$17.04	\$16.70	\$16.87	\$15.73	\$16.70
Inpatient/Outpatient	PANCRELIPASE (LIP-PROT-AMYL) 12000-38000 UNITS PO CPEP	0032-1212-07	A9270		\$17.04	\$16.70	\$16.87	\$15.73	\$16.70
Inpatient/Outpatient	SITAGLIPTIN PHOSPHATE 25 MG PO TABS	0006-0221-28	A9270		\$78.62	\$77.05	\$77.83	\$72.57	\$77.05
Inpatient/Outpatient	SITAGLIPTIN PHOSPHATE 25 MG PO TABS	0006-0221-54	A9270		\$68.27	\$66.90	\$67.59	\$63.01	\$66.90
Inpatient/Outpatient	SITAGLIPTIN PHOSPHATE 25 MG PO TABS	0006-0221-01	A9270		\$55.84	\$54.72	\$55.28	\$51.54	\$54.72
Inpatient/Outpatient	INSULIN ASPART NOVOLOG FOR PUMP BOLUS	99999-089-65	A9270		\$26.16	\$25.64	\$25.90	\$24.15	\$25.64
Inpatient/Outpatient	INSULIN ASPART NOVOLOG FOR PUMP BOLUS	0169-7501-11	A9270		\$21.73	\$21.30	\$21.51	\$20.06	\$21.30
Inpatient/Outpatient	INSULIN REGULAR HUMAN 100 UNIT/ML IV SOLN	0002-8215-17	J1815		\$7.29	\$7.14	\$7.22	\$6.73	\$7.14
Inpatient/Outpatient	INSULIN ASPART 100 UNIT/ML SLIDING SCALE	0169-7501-11	A9270		\$21.73	\$21.30	\$21.51	\$20.06	\$21.30
Inpatient/Outpatient	INSULIN ASPART 100 UNIT/ML SLIDING SCALE	73070-100-11	A9270		\$65.44	\$64.13	\$64.79	\$60.40	\$64.13
Inpatient/Outpatient	INSULIN REGULAR HUMAN 100 UNIT/ML SLIDING SCALE	0002-8215-17	J1815		\$7.29	\$7.14	\$7.22	\$6.73	\$7.14
Inpatient/Outpatient	LIDOCAINE 1% IJ SOLN - NO DOSE REQUIRED	0409-4276-01	J2001		\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	LIDOCAINE 1% IJ SOLN - NO DOSE REQUIRED	0409-4276-16	J2001		\$0.32	\$0.31	\$0.32	\$0.30	\$0.31
Inpatient/Outpatient	LIDOCAINE 1% IJ SOLN - NO DOSE REQUIRED	63323-485-01	J2001		\$0.24	\$0.24	\$0.24	\$0.22	\$0.24
Inpatient/Outpatient	LIDOCAINE 1% IJ SOLN - NO DOSE REQUIRED	0409-4279-16	J2001		\$0.44	\$0.43	\$0.44	\$0.41	\$0.43
Inpatient/Outpatient	LIDOCAINE 1% IJ SOLN - NO DOSE REQUIRED	63323-492-45	J2001		\$2.10	\$2.06	\$2.08	\$1.94	\$2.06
Inpatient/Outpatient	FLUCYTOSINE 50 MG/ML ORAL SUSPENSION	99999-043-47	A9270		\$106.15	\$104.03	\$105.09	\$97.98	\$104.03
Inpatient/Outpatient	TETANUS-DIPHTH-ACELL PERTUSSIS 5-2.5-18.5 LF-MCG/0.5 IM SUSP	58160-842-01		90715	\$390.33	\$382.52	\$386.43	\$360.27	\$382.52
Inpatient/Outpatient	TETANUS-DIPHTH-ACELL PERTUSSIS 5-2.5-18.5 LF-MCG/0.5 IM SUSP	58160-842-11		90715	\$401.44	\$393.41	\$397.43	\$370.53	\$393.41
Inpatient/Outpatient	ACETIC ACID 3% SOLN	99999-055-06	A9270		\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	PSYLLIUM 58.12 % PO PACK	37000-024-10	A9150		\$1.05	\$1.03	\$1.04	\$0.97	\$1.03
Inpatient/Outpatient	PSYLLIUM 58.12 % PO PACK	37000-024-44	A9150		\$1.68	\$1.65	\$1.66	\$1.55	\$1.65
Inpatient/Outpatient	PSYLLIUM 58.12 % PO PACK	37000-024-04	A9150		\$1.49	\$1.46	\$1.48	\$1.38	\$1.46
Inpatient/Outpatient	ANTICOAGULANT CIT DEXT SOLN A 0.8-2.45-2.2 GM/100ML VI SOLN (CARDIAC BYPASS)	0942-0641-03			\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	FERROUS SULFATE 324 (65 FE) MG PO TBEC	0574-0608-10	A9270		\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	FERROUS SULFATE 324 (65 FE) MG PO TBEC	0574-0608-01	A9270		\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	FERROUS SULFATE 324 (65 FE) MG PO TBEC	0574-0608-11	A9270		\$0.38	\$0.37	\$0.38	\$0.35	\$0.37
Inpatient/Outpatient	ISOSORBIDE MONONITRATE ER 30 MG PO TB24	0143-2230-01	A9270		\$0.95	\$0.93	\$0.94	\$0.88	\$0.93
Inpatient/Outpatient	ISOSORBIDE MONONITRATE ER 30 MG PO TB24	0603-4110-21	A9270		\$1.02	\$1.00	\$1.01	\$0.94	\$1.00
Inpatient/Outpatient	ISOSORBIDE MONONITRATE ER 30 MG PO TB24	62175-128-37	A9270		\$2.01	\$1.97	\$1.99	\$1.86	\$1.97
Inpatient/Outpatient	ISOSORBIDE MONONITRATE ER 30 MG PO TB24	68084-435-11	A9270		\$2.35	\$2.30	\$2.33	\$2.17	\$2.30
Inpatient/Outpatient	ISOSORBIDE MONONITRATE ER 30 MG PO TB24	68084-591-01	A9270		\$1.10	\$1.08	\$1.09	\$1.02	\$1.08
Inpatient/Outpatient	ISOSORBIDE MONONITRATE ER 30 MG PO TB24	68084-591-11	A9270		\$2.35	\$2.30	\$2.33	\$2.17	\$2.30
Inpatient/Outpatient	ISOSORBIDE MONONITRATE ER 30 MG PO TB24	13668-104-01	A9270		\$1.94	\$1.90	\$1.92	\$1.79	\$1.90
Inpatient/Outpatient	ISOSORBIDE MONONITRATE ER 30 MG PO TB24	23155-519-01	A9270		\$1.02	\$1.00	\$1.01	\$0.94	\$1.00
Inpatient/Outpatient	ISOSORBIDE MONONITRATE ER 30 MG PO TB24	50742-175-01	A9270		\$0.49	\$0.48	\$0.49	\$0.45	\$0.48
Inpatient/Outpatient	ISOSORBIDE MONONITRATE ER 30 MG PO TB24	0904-6449-61	A9270		\$1.09	\$1.07	\$1.08	\$1.01	\$1.07
Inpatient/Outpatient	DEXTROSE 10% BOLUS	0338-0023-02	J7060		\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	POTASSIUM CHLORIDE IVPB 20 MEQ/100ML PREMIX	0338-0705-48	J3480		\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	POTASSIUM CHLORIDE IVPB 20 MEQ/100ML PREMIX	0409-7075-26	J3480		\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	POTASSIUM CHLORIDE IVPB 20 MEQ/100ML PREMIX	0990-7075-26	J3480		\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	MOUTH KOTE MT/CAPHOSOL MT SOLN	8489-800001	A9270		\$1.30	\$1.27	\$1.29	\$1.20	\$1.27
Inpatient/Outpatient	MOUTH KOTE MT/CAPHOSOL MT SOLN	73090-8000-2	A9270		\$1.37	\$1.34	\$1.36	\$1.26	\$1.34
Inpatient/Outpatient	MOUTH KOTE MT/CAPHOSOL MT SOLN	50930-09802	A9270		\$0.40	\$0.39	\$0.40	\$0.37	\$0.39
Inpatient/Outpatient	FENTANYL-BUPIVACAINE-NACL 2-0.1-0.9 MCG/ML-% IJ SOLN	99999-473-37	J3010		\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	FENTANYL-BUPIVACAINE-NACL 2-0.1-0.9 MCG/ML-% IJ SOLN	99999-472-37	J3010		\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	FENTANYL-BUPIVACAINE-NACL 2-0.1-0.9 MCG/ML-% IJ SOLN	70092-1500-37	J3010		\$0.61	\$0.60	\$0.60	\$0.56	\$0.60
Inpatient/Outpatient	FENTANYL-BUPIVACAINE-NACL 2-0.1-0.9 MCG/ML-% IJ SOLN	70092-1160-37	J3010		\$0.61	\$0.60	\$0.60	\$0.56	\$0.60
Inpatient/Outpatient	DAKINS (1/4 STRENGTH) 0.125 % EX SOLN	0436-0672-16	A9150		\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	DAKINS (1/4 STRENGTH) 0.125 % EX SOLN	39328-064-12	A9150		\$0.08	\$0.08	\$0.08	\$0.07	\$0.08
Inpatient/Outpatient	DAKINS (FULL STRENGTH) 0.5 % EX SOLN	0436-0946-16	A9150		\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	DAKINS (FULL STRENGTH) 0.5 % EX SOLN	39328-062-50	A9150		\$0.08	\$0.08	\$0.08	\$0.07	\$0.08
Inpatient/Outpatient	DAKINS (1/2 STRENGTH) 0.25 % EX SOLN	0436-0936-16	A9150		\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	DAKINS (1/2 STRENGTH) 0.25 % EX SOLN	39328-063-25	A9150		\$0.08	\$0.08	\$0.08	\$0.07	\$0.08
Inpatient/Outpatient	PHENYLEPHRINE HCL 1 % NA SPRAY	0024-1352-02	A9150		\$1.12	\$1.10	\$1.11	\$1.03	\$1.10
Inpatient/Outpatient	PHENOL 89 % EX SWAB	0884-6297-30	A9270		\$20.55	\$20.14	\$20.34	\$18.97	\$20.14
Inpatient/Outpatient	THIAMINE HCL 100 MG/ML IM SOLN	63323-013-02	J3411		\$11.40	\$11.17	\$11.29	\$10.52	\$11.17
Inpatient/Outpatient	TOCILIZUMAB 200 MG/10ML IV SOLN	50242-136-01	J3262		\$393.14	\$385.28	\$389.21	\$362.87	\$385.28
Inpatient/Outpatient	KETAMINE HCL 50 MG/ML IJ SOLN	67457-001-10			\$1.00	\$0.98	\$0.99	\$0.92	\$0.98

Inpatient/Outpatient	KETAMINE HCL 50 MG/ML IJ SOLN	9999-0348-01		\$1.00	\$0.98	\$0.99	\$0.92	\$0.98
Inpatient/Outpatient	KETAMINE HCL 50 MG/ML IJ SOLN	0143-9508-01		\$0.99	\$0.97	\$0.98	\$0.91	\$0.97
Inpatient/Outpatient	KETAMINE HCL 50 MG/ML IJ SOLN	67457-001-00		\$1.01	\$0.99	\$1.00	\$0.93	\$0.99
Inpatient/Outpatient	KETAMINE HCL 50 MG/ML IJ SOLN	42023-114-10		\$3.12	\$3.06	\$3.09	\$2.88	\$3.06
Inpatient/Outpatient	METHADONE HCL 0.5 MG/ML PO SOLN - DILUTED (PEDS)	99999-3553-1	A9270	\$2.65	\$2.60	\$2.62	\$2.45	\$2.60
Inpatient/Outpatient	DARBEPOETIN ALFA 60 MCG/0.3ML IJ SOSY	55513-023-04	J0881	\$2,304.14	\$2,258.06	\$2,281.10	\$2,126.72	\$2,258.06
Inpatient/Outpatient	DARBEPOETIN ALFA 60 MCG/0.3ML IJ SOSY	55513-023-01	J0881	\$2,304.14	\$2,258.06	\$2,281.10	\$2,126.72	\$2,258.06
Inpatient/Outpatient	DARBEPOETIN ALFA 150 MCG/0.3ML IJ SOSY	55513-027-01	J0881	\$1,423.01	\$1,394.55	\$1,408.78	\$1,313.44	\$1,394.55
Inpatient/Outpatient	DARBEPOETIN ALFA 150 MCG/0.3ML IJ SOSY	55513-027-04	J0881	\$3,462.98	\$3,393.72	\$3,428.35	\$3,196.33	\$3,393.72
Inpatient/Outpatient	DARBEPOETIN ALFA 200 MCG/0.4ML IJ SOSY	55513-028-01	J0881	\$3,462.96	\$3,393.70	\$3,428.33	\$3,196.31	\$3,393.70
Inpatient/Outpatient	DARBEPOETIN ALFA 25 MCG/0.42ML IJ SOSY	55513-057-04	J0881	\$685.75	\$672.04	\$678.89	\$632.95	\$672.04
Inpatient/Outpatient	DARBEPOETIN ALFA 100 MCG/0.5ML IJ SOSY	55513-025-01	J0881	\$2,304.14	\$2,258.06	\$2,281.10	\$2,126.72	\$2,258.06
Inpatient/Outpatient	DARBEPOETIN ALFA 100 MCG/0.5ML IJ SOSY	55513-025-04	J0881	\$2,304.14	\$2,258.06	\$2,281.10	\$2,126.72	\$2,258.06
Inpatient/Outpatient	LIDOCAINE HCL 3.5 % OP GEL	17478-792-10	A9270	\$17.86	\$17.50	\$17.68	\$16.48	\$17.50
Inpatient/Outpatient	LIDOCAINE HCL 3.5 % OP GEL	17478-792-01	A9270	\$89.32	\$89.49	\$90.41	\$84.29	\$89.49
Inpatient/Outpatient	ARTIFICIAL TEARS 83-15 % OP OINT	0078-0473-97	A9510	\$8.43	\$8.26	\$8.35	\$7.78	\$8.26
Inpatient/Outpatient	ARTIFICIAL TEARS 83-15 % OP OINT	48102-017-35	A9510	\$8.36	\$8.19	\$8.28	\$7.72	\$8.19
Inpatient/Outpatient	ARTIFICIAL TEARS 83-15 % OP OINT	0536-1086-91	A9510	\$2.89	\$2.83	\$2.86	\$2.67	\$2.83
Inpatient/Outpatient	ARTIFICIAL TEARS 83-15 % OP OINT	0574-4025-20	A9510	\$13.45	\$13.18	\$13.32	\$12.41	\$13.18
Inpatient/Outpatient	ARTIFICIAL TEARS 83-15 % OP OINT	0574-4025-11	A9510	\$13.45	\$13.18	\$13.32	\$12.41	\$13.18
Inpatient/Outpatient	ARTIFICIAL TEARS 83-15 % OP OINT	0065-0509-35	A9510	\$10.35	\$10.14	\$10.25	\$9.55	\$10.14
Inpatient/Outpatient	ARTIFICIAL TEARS 83-15 % OP OINT	0023-0240-04	A9510	\$11.08	\$10.86	\$10.97	\$10.23	\$10.86
Inpatient/Outpatient	ARTIFICIAL TEARS 83-15 % OP OINT	0065-0518-01	A9510	\$8.39	\$8.22	\$8.31	\$7.74	\$8.22
Inpatient/Outpatient	LIDOCAINE HCL (PF) 1 % IJ SOLN	0409-4713-02	J2001	\$0.88	\$0.86	\$0.87	\$0.81	\$0.86
Inpatient/Outpatient	LIDOCAINE HCL (PF) 1 % IJ SOLN	0409-4279-02	J2001	\$0.43	\$0.42	\$0.43	\$0.40	\$0.42
Inpatient/Outpatient	LIDOCAINE HCL (PF) 1 % IJ SOLN	0409-4713-32	J2001	\$1.76	\$1.72	\$1.74	\$1.62	\$1.72
Inpatient/Outpatient	LIDOCAINE HCL (PF) 1 % IJ SOLN	63323-492-57	J2001	\$1.40	\$1.37	\$1.39	\$1.29	\$1.37
Inpatient/Outpatient	LIDOCAINE HCL (PF) 1 % IJ SOLN	63323-492-27	J2001	\$2.10	\$2.06	\$2.08	\$1.94	\$2.06
Inpatient/Outpatient	LIDOCAINE HCL (PF) 1 % IJ SOLN	55150-159-74	J2001	\$0.72	\$0.71	\$0.71	\$0.66	\$0.71
Inpatient/Outpatient	LIDOCAINE HCL (PF) 1 % IJ SOLN	63323-492-31	J2001	\$1.43	\$1.40	\$1.42	\$1.32	\$1.40
Inpatient/Outpatient	LIDOCAINE HCL (PF) 1 % IJ SOLN	63323-492-26	J2001	\$0.30	\$0.29	\$0.30	\$0.28	\$0.29
Inpatient/Outpatient	LIDOCAINE HCL (PF) 1 % IJ SOLN	63323-492-97	J2001	\$2.34	\$2.29	\$2.32	\$2.16	\$2.29
Inpatient/Outpatient	LIDOCAINE HCL (PF) 1 % IJ SOLN	63323-492-36	J2001	\$1.40	\$1.37	\$1.39	\$1.29	\$1.37
Inpatient/Outpatient	LIDOCAINE HCL (PF) 1 % IJ SOLN	0409-4713-42	J2001	\$3.52	\$3.45	\$3.48	\$3.25	\$3.45
Inpatient/Outpatient	LIDOCAINE HCL (PF) 1 % IJ SOLN	63323-492-16	J2001	\$2.10	\$2.06	\$2.08	\$1.94	\$2.06
Inpatient/Outpatient	LIDOCAINE HCL (PF) 1 % IJ SOLN	0409-4279-16	J2001	\$0.44	\$0.43	\$0.44	\$0.41	\$0.43
Inpatient/Outpatient	LIDOCAINE HCL (PF) 1 % IJ SOLN	55150-163-30	J2001	\$0.29	\$0.28	\$0.29	\$0.27	\$0.28
Inpatient/Outpatient	LIDOCAINE HCL (PF) 1 % IJ SOLN	55150-162-05	J2001	\$1.40	\$1.37	\$1.39	\$1.29	\$1.37
Inpatient/Outpatient	LIDOCAINE HCL (PF) 1 % IJ SOLN	69374-985-05	J2001	\$4.86	\$4.76	\$4.81	\$4.49	\$4.76
Inpatient/Outpatient	LIDOCAINE HCL (PF) 1 % IJ SOLN	0409-4713-75	J2001	\$0.87	\$0.85	\$0.86	\$0.80	\$0.85
Inpatient/Outpatient	LIDOCAINE HCL (PF) 1 % IJ SOLN	0143-9595-01	J2001	\$2.39	\$2.34	\$2.37	\$2.21	\$2.34
Inpatient/Outpatient	LIDOCAINE HCL (PF) 1 % IJ SOLN	63323-492-09	J2001	\$1.40	\$1.37	\$1.39	\$1.29	\$1.37
Inpatient/Outpatient	LIDOCAINE HCL (PF) 1 % IJ SOLN	63323-492-41	J2001	\$2.10	\$2.06	\$2.08	\$1.94	\$2.06
Inpatient/Outpatient	LIDOCAINE HCL (PF) 1 % IJ SOLN	63323-492-43	J2001	\$1.40	\$1.37	\$1.39	\$1.29	\$1.37
Inpatient/Outpatient	LIDOCAINE HCL (PF) 1 % IJ SOLN	63323-492-45	J2001	\$2.10	\$2.06	\$2.08	\$1.94	\$2.06
Inpatient/Outpatient	LIDOCAINE HCL (PF) 1 % IJ SOLN	63323-492-07	J2001	\$1.40	\$1.37	\$1.39	\$1.29	\$1.37
Inpatient/Outpatient	LIDOCAINE HCL (PF) 1 % IJ SOLN	0409-4713-12	J2001	\$0.88	\$0.86	\$0.87	\$0.81	\$0.86
Inpatient/Outpatient	LIDOCAINE HCL (PF) 1 % IJ SOLN	63323-492-04	J2001	\$2.10	\$2.06	\$2.08	\$1.94	\$2.06
Inpatient/Outpatient	LIDOCAINE HCL (PF) 1 % IJ SOLN	55150-158-72	J2001	\$1.58	\$1.55	\$1.56	\$1.46	\$1.55
Inpatient/Outpatient	LIDOCAINE HCL (PF) 1 % IJ SOLN	55150-161-02	J2001	\$2.51	\$2.46	\$2.48	\$2.32	\$2.46
Inpatient/Outpatient	GEMCITABINE HCL 2 GM/52.6ML IV SOLN	0409-0182-01	J9201	\$2.93	\$2.87	\$2.90	\$2.70	\$2.87
Inpatient/Outpatient	GEMCITABINE HCL 2 GM/52.6ML IV SOLN	72485-223-20	J9201	\$3.35	\$3.28	\$3.32	\$3.09	\$3.28
Inpatient/Outpatient	DICLOFENAC EPOLAMINE 1.3 % EX PTCH	59762-0411-1	A9270	\$26.12	\$25.60	\$25.86	\$24.11	\$25.60
Inpatient/Outpatient	DICLOFENAC EPOLAMINE 1.3 % EX PTCH	59762-0707-2	A9270	\$27.32	\$26.77	\$27.05	\$25.22	\$26.77
Inpatient/Outpatient	DICLOFENAC EPOLAMINE 1.3 % EX PTCH	60793-411-05	A9270	\$30.01	\$29.41	\$29.71	\$27.70	\$29.41
Inpatient/Outpatient	DICLOFENAC EPOLAMINE 1.3 % EX PTCH	60793-411-30	A9270	\$55.61	\$54.50	\$55.05	\$51.33	\$54.50
Inpatient/Outpatient	DICLOFENAC EPOLAMINE 1.3 % EX PTCH	59762-0707-1	A9270	\$25.90	\$25.38	\$25.64	\$23.91	\$25.38
Inpatient/Outpatient	DICLOFENAC EPOLAMINE 1.3 % EX PTCH	71858-0405-5	A9270	\$45.08	\$44.18	\$44.63	\$41.61	\$44.18
Inpatient/Outpatient	TESTOSTERONE CYPIONATE 200 MG/ML IM SOLN	0574-0820-10	J1071	\$8.56	\$8.39	\$8.47	\$7.90	\$8.39
Inpatient/Outpatient	TESTOSTERONE CYPIONATE 200 MG/ML IM SOLN	0781-3074-71	J1071	\$110.76	\$108.54	\$109.65	\$102.23	\$108.54
Inpatient/Outpatient	TESTOSTERONE CYPIONATE 200 MG/ML IM SOLN	0009-0520-01	J1071	\$90.49	\$88.68	\$89.59	\$83.52	\$88.68
Inpatient/Outpatient	PRENATAL VITAMIN/IRON/FA 0.8 MG PO TABS (WRAP)	54629-052-01	A9270	\$0.29	\$0.28	\$0.29	\$0.27	\$0.28
Inpatient/Outpatient	PRENATAL VITAMIN/IRON/FA 0.8 MG PO TABS (WRAP)	0536-4063-01	A9270	\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	TETANUS-DIPHThERIA TOXOIDS TD 5-2 LFU IM INJ	49281-291-83	90714	\$175.23	\$171.73	\$173.48	\$161.74	\$171.73
Inpatient/Outpatient	TETANUS-DIPHThERIA TOXOIDS TD 5-2 LFU IM INJ	49281-215-10	90714	\$343.01	\$336.15	\$339.58	\$316.60	\$336.15
Inpatient/Outpatient	TETANUS-DIPHThERIA TOXOIDS TD 5-2 LFU IM INJ	49281-215-88	90714	\$241.18	\$236.36	\$238.77	\$222.61	\$236.36
Inpatient/Outpatient	DEXAMETHASONE FOR INHALATION 4 MG/ML (NICU/INFANT)	63323-165-01		\$3.21	\$3.15	\$3.18	\$2.96	\$3.15
Inpatient/Outpatient	MORPHINE SULFATE (PF) 2 MG/ML IJ SOLN (WRAP)	0409-1890-01	J2274	\$6.78	\$6.64	\$6.71	\$6.26	\$6.64

Inpatient/Outpatient	MORPHINE SULFATE (PF) 2 MG/ML IJ SOLN (WRAP)	0409-1890-03	J2274	\$8.02	\$7.86	\$7.94	\$7.40	\$7.86
Inpatient/Outpatient	CYCLOPENTOLATE HCL 0.5 % OP SOLN	0065-0395-15	A9270	\$23.03	\$22.57	\$22.80	\$21.26	\$22.57
Inpatient/Outpatient	METRONIDAZOLE IVPB CUSTOM DOSE (PEDS)	99999-1055-2	J3490	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	ETHAMBUTOL HCL 100 MG PO TABS	61748-011-01	A9270	\$1.54	\$1.51	\$1.52	\$1.42	\$1.51
Inpatient/Outpatient	ETHAMBUTOL HCL 100 MG PO TABS	68180-280-01	A9270	\$2.23	\$2.19	\$2.21	\$2.06	\$2.19
Inpatient/Outpatient	ETHAMBUTOL HCL 100 MG PO TABS	54879-001-01	A9270	\$1.72	\$1.69	\$1.70	\$1.59	\$1.69
Inpatient/Outpatient	ALTEPLASE (STROKE) IV BOLUS DOSE - 0.09 MG/KG	50242-085-27	J2997	\$12,940.99	\$12,682.17	\$12,811.58	\$11,944.53	\$12,682.17
Inpatient/Outpatient	LACTOBACILLUS ACIDOPHILUS 500 MILLION CELLS PO CAP	43292-50022	A9150	\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	LACTOBACILLUS ACIDOPHILUS 500 MILLION CELLS PO CAP	54629-111-01	A9150	\$0.22	\$0.22	\$0.22	\$0.20	\$0.22
Inpatient/Outpatient	ENOXAPARIN SODIUM 80 MG/0.8ML IJ SOSY	0075-0622-80	J1650	\$37.27	\$36.52	\$36.90	\$34.40	\$36.52
Inpatient/Outpatient	ENOXAPARIN SODIUM 80 MG/0.8ML IJ SOSY	0075-8018-01	J1650	\$29.85	\$29.25	\$29.55	\$27.55	\$29.25
Inpatient/Outpatient	ENOXAPARIN SODIUM 80 MG/0.8ML IJ SOSY	16714-036-01	J1650	\$31.86	\$31.22	\$31.54	\$29.41	\$31.22
Inpatient/Outpatient	BETHANECHOL CHLORIDE 5 MG PO TABS	64679-965-01	A9270	\$0.49	\$0.48	\$0.49	\$0.45	\$0.48
Inpatient/Outpatient	BETHANECHOL CHLORIDE 5 MG PO TABS	57664-137-88	A9270	\$0.40	\$0.39	\$0.40	\$0.37	\$0.39
Inpatient/Outpatient	BETHANECHOL CHLORIDE 5 MG PO TABS	0832-0510-00	A9270	\$0.52	\$0.51	\$0.51	\$0.48	\$0.51
Inpatient/Outpatient	BETHANECHOL CHLORIDE 5 MG PO TABS	65162-571-10	A9270	\$0.81	\$0.79	\$0.80	\$0.75	\$0.79
Inpatient/Outpatient	MAGNESIUM SULFATE (LAXATIVE) PO GRAN	49348-018-63	A9270	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	MAGNESIUM SULFATE (LAXATIVE) PO GRAN	70677-0038-1	A9270	\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	MAGNESIUM SULFATE (LAXATIVE) PO GRAN	49348-018-75	A9270	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	AMPICILLIN SODIUM 10 G IV SOLR	0781-3409-95	J0290	\$160.30	\$157.09	\$158.70	\$147.96	\$157.09
Inpatient/Outpatient	CHLOROTHIAZIDE 250 MG/5ML PO SUSP	65649-311-12	A9270	\$1.31	\$1.28	\$1.30	\$1.21	\$1.28
Inpatient/Outpatient	ONDANSETRON HCL 4 MG/2ML IM SOLN	25021-777-02	J2405	\$3.80	\$3.72	\$3.76	\$3.51	\$3.72
Inpatient/Outpatient	DEXTROSE 5% FLUSH (NICU/INFANT)	0338-0017-10	J7060	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	DEXAMETHASONE 0.1 MG/ML ORAL SOLUTION (NICU)	99999-3177-1	J8540	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	BUPIVACAINE-EPINEPHRINE 0.25% -1:200000 IJ SOLN	0409-9043-01		\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	BUPIVACAINE-EPINEPHRINE 0.25% -1:200000 IJ SOLN	0409-1752-50		\$0.75	\$0.74	\$0.74	\$0.69	\$0.74
Inpatient/Outpatient	VANCOMYCIN HCL 100 MG/ML IV SOLR	99999-4091-0	J3370	\$72.77	\$71.31	\$72.04	\$67.17	\$71.31
Inpatient/Outpatient	OLIVE OIL OIL	49348-713-34	A9150	\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	FOSAPREPITANT DIMEGLUMINE 150 MG IV SOLR	0006-3941-01	J1453	\$847.76	\$830.80	\$839.28	\$782.48	\$830.80
Inpatient/Outpatient	FOSAPREPITANT DIMEGLUMINE 150 MG IV SOLR	0591-4385-79	J1453	\$511.09	\$500.87	\$505.98	\$471.74	\$500.87
Inpatient/Outpatient	FOSAPREPITANT DIMEGLUMINE 150 MG IV SOLR	67457-889-10	J1453	\$291.45	\$285.62	\$288.54	\$269.01	\$285.62
Inpatient/Outpatient	FOSAPREPITANT DIMEGLUMINE 150 MG IV SOLR	60505-6105-1	J1453	\$1,026.99	\$1,006.45	\$1,016.72	\$947.91	\$1,006.45
Inpatient/Outpatient	FOSAPREPITANT DIMEGLUMINE 150 MG IV SOLR	0006-3061-00	J1453	\$1,062.01	\$1,040.77	\$1,051.39	\$980.24	\$1,040.77
Inpatient/Outpatient	FOSAPREPITANT DIMEGLUMINE 150 MG IV SOLR	0006-3941-32	J1453	\$990.61	\$970.80	\$980.70	\$914.33	\$970.80
Inpatient/Outpatient	FOSAPREPITANT DIMEGLUMINE 150 MG IV SOLR	0006-3061-02	J1453	\$461.60	\$452.37	\$456.98	\$426.06	\$452.37
Inpatient/Outpatient	FOSAPREPITANT DIMEGLUMINE 150 MG IV SOLR	0006-3061-03	J1453	\$462.04	\$452.80	\$457.42	\$426.46	\$452.80
Inpatient/Outpatient	FOSAPREPITANT DIMEGLUMINE 150 MG IV SOLR	0006-3061-01	J1453	\$462.04	\$452.80	\$457.42	\$426.46	\$452.80
Inpatient/Outpatient	FOSAPREPITANT DIMEGLUMINE 150 MG IV SOLR	0338-0008-01	J1453	\$90.44	\$88.63	\$89.54	\$83.48	\$88.63
Inpatient/Outpatient	FOSAPREPITANT DIMEGLUMINE 150 MG IV SOLR	71839-104-01	J1453	\$268.66	\$263.29	\$265.97	\$247.97	\$263.29
Inpatient/Outpatient	FOSAPREPITANT DIMEGLUMINE 150 MG IV SOLR	72205-026-01	J1453	\$269.58	\$264.19	\$266.88	\$248.82	\$264.19
Inpatient/Outpatient	FOSAPREPITANT DIMEGLUMINE 150 MG IV SOLR	72205-054-01	J1453	\$85.24	\$83.54	\$84.39	\$78.68	\$83.54
Inpatient/Outpatient	FOSAPREPITANT DIMEGLUMINE 150 MG IV SOLR	43598-859-11	J1453	\$149.25	\$146.27	\$147.76	\$137.76	\$146.27
Inpatient/Outpatient	FOSAPREPITANT DIMEGLUMINE 150 MG IV SOLR	0143-9384-01	J1453	\$180.94	\$177.32	\$179.13	\$167.01	\$177.32
Inpatient/Outpatient	FOSAPREPITANT DIMEGLUMINE 150 MG IV SOLR	72205-083-01	J1453	\$85.24	\$83.54	\$84.39	\$78.68	\$83.54
Inpatient/Outpatient	FOSAPREPITANT DIMEGLUMINE 150 MG IV SOLR	16714-248-01	J1453	\$81.36	\$79.73	\$80.55	\$75.10	\$79.73
Inpatient/Outpatient	ENOXAPARIN SODIUM 300 MG/3ML IJ SOLN	0075-0626-03	J1650	\$44.11	\$43.23	\$43.67	\$40.71	\$43.23
Inpatient/Outpatient	ENOXAPARIN SODIUM 100 MG/ML IJ SOSY	0075-0623-00	J1650	\$38.74	\$37.97	\$38.35	\$35.76	\$37.97
Inpatient/Outpatient	ENOXAPARIN SODIUM 100 MG/ML IJ SOSY	0548-5605-00	J1650	\$72.90	\$71.44	\$72.17	\$67.29	\$71.44
Inpatient/Outpatient	ENOXAPARIN SODIUM 100 MG/ML IJ SOSY	0955-1010-10	J1650	\$38.74	\$37.97	\$38.35	\$35.76	\$37.97
Inpatient/Outpatient	ENOXAPARIN SODIUM 100 MG/ML IJ SOSY	0075-8020-01	J1650	\$38.76	\$37.98	\$38.37	\$35.78	\$37.98
Inpatient/Outpatient	ENOXAPARIN SODIUM 100 MG/ML IJ SOSY	0703-8580-21	J1650	\$43.46	\$42.59	\$43.03	\$40.11	\$42.59
Inpatient/Outpatient	ENOXAPARIN SODIUM 100 MG/ML IJ SOSY	16714-046-01	J1650	\$33.39	\$32.72	\$33.06	\$30.82	\$32.72
Inpatient/Outpatient	ENOXAPARIN SODIUM 100 MG/ML IJ SOSY	0781-3500-05	J1650	\$37.54	\$36.79	\$37.16	\$34.65	\$36.79
Inpatient/Outpatient	ENOXAPARIN SODIUM 120 MG/0.8ML IJ SOSY	0075-2912-01	J1650	\$56.63	\$55.50	\$56.06	\$52.27	\$55.50
Inpatient/Outpatient	ENOXAPARIN SODIUM 120 MG/0.8ML IJ SOSY	0955-1012-10	J1650	\$56.63	\$55.50	\$56.06	\$52.27	\$55.50
Inpatient/Outpatient	ENOXAPARIN SODIUM 120 MG/0.8ML IJ SOSY	0703-8610-21	J1650	\$144.89	\$141.99	\$143.44	\$133.73	\$141.99
Inpatient/Outpatient	ENOXAPARIN SODIUM 120 MG/0.8ML IJ SOSY	63323-569-90	J1650	\$134.92	\$132.22	\$133.57	\$124.53	\$132.22
Inpatient/Outpatient	ENOXAPARIN SODIUM 120 MG/0.8ML IJ SOSY	0075-8022-01	J1650	\$56.72	\$55.59	\$56.15	\$52.35	\$55.59
Inpatient/Outpatient	ENOXAPARIN SODIUM 120 MG/0.8ML IJ SOSY	0075-8022-10	J1650	\$56.63	\$55.50	\$56.06	\$52.27	\$55.50
Inpatient/Outpatient	ENOXAPARIN SODIUM 120 MG/0.8ML IJ SOSY	16714-056-01	J1650	\$50.36	\$49.35	\$49.86	\$46.48	\$49.35
Inpatient/Outpatient	ENOXAPARIN SODIUM 30 MG/0.3ML IJ SOSY	0075-0624-30	J1650	\$37.14	\$36.40	\$36.77	\$34.28	\$36.40
Inpatient/Outpatient	ENOXAPARIN SODIUM 30 MG/0.3ML IJ SOSY	0075-8013-01	J1650	\$78.09	\$76.53	\$77.31	\$72.08	\$76.53
Inpatient/Outpatient	ENOXAPARIN SODIUM 30 MG/0.3ML IJ SOSY	0548-5601-00	J1650	\$72.69	\$71.24	\$71.96	\$67.09	\$71.24
Inpatient/Outpatient	ENOXAPARIN SODIUM 30 MG/0.3ML IJ SOSY	0703-8530-21	J1650	\$96.71	\$94.78	\$95.74	\$89.26	\$94.78
Inpatient/Outpatient	ENOXAPARIN SODIUM 30 MG/0.3ML IJ SOSY	0955-1003-10	J1650	\$37.14	\$36.40	\$36.77	\$34.28	\$36.40
Inpatient/Outpatient	ENOXAPARIN SODIUM 40 MG/0.4ML IJ SOSY	0075-0620-40	J1650	\$37.69	\$36.94	\$37.31	\$34.79	\$36.94
Inpatient/Outpatient	ENOXAPARIN SODIUM 40 MG/0.4ML IJ SOSY	0075-8014-01	J1650	\$69.33	\$67.94	\$68.64	\$63.99	\$67.94
Inpatient/Outpatient	ENOXAPARIN SODIUM 40 MG/0.4ML IJ SOSY	0781-3224-02	J1650	\$55.04	\$53.94	\$54.49	\$50.80	\$53.94

Inpatient/Outpatient	ENOXAPARIN SODIUM 40 MG/0.4ML IJ SOSY	0703-8540-21	J1650		\$64.95	\$63.65	\$64.30	\$59.95	\$63.65
Inpatient/Outpatient	ENOXAPARIN SODIUM 40 MG/0.4ML IJ SOSY	0955-1004-10	J1650		\$37.69	\$36.94	\$37.31	\$34.79	\$36.94
Inpatient/Outpatient	ENOXAPARIN SODIUM 40 MG/0.4ML IJ SOSY	0548-5602-00	J1650		\$72.90	\$71.44	\$72.17	\$67.29	\$71.44
Inpatient/Outpatient	ENOXAPARIN SODIUM 40 MG/0.4ML IJ SOSY	0955-1004-01	J1650		\$37.69	\$36.94	\$37.31	\$34.79	\$36.94
Inpatient/Outpatient	ENOXAPARIN SODIUM 40 MG/0.4ML IJ SOSY	16714-016-01	J1650		\$34.46	\$33.77	\$34.12	\$31.81	\$33.77
Inpatient/Outpatient	ENOXAPARIN SODIUM 40 MG/0.4ML IJ SOSY	0781-3246-02	J1650		\$3.43	\$3.36	\$3.40	\$3.17	\$3.36
Inpatient/Outpatient	ENOXAPARIN SODIUM 60 MG/0.6ML IJ SOSY	0075-0621-60	J1650		\$38.84	\$38.06	\$38.45	\$35.85	\$38.06
Inpatient/Outpatient	ENOXAPARIN SODIUM 60 MG/0.6ML IJ SOSY	0075-0616-01	J1650		\$41.26	\$40.43	\$40.85	\$38.08	\$40.43
Inpatient/Outpatient	ENOXAPARIN SODIUM 60 MG/0.6ML IJ SOSY	0703-8560-21	J1650		\$73.22	\$71.76	\$72.49	\$67.58	\$71.76
Inpatient/Outpatient	ENOXAPARIN SODIUM 60 MG/0.6ML IJ SOSY	0955-1006-10	J1650		\$38.84	\$38.06	\$38.45	\$35.85	\$38.06
Inpatient/Outpatient	ENOXAPARIN SODIUM 60 MG/0.6ML IJ SOSY	60505-0793-0	J1650		\$35.48	\$34.77	\$35.13	\$32.75	\$34.77
Inpatient/Outpatient	ENOXAPARIN SODIUM 60 MG/0.6ML IJ SOSY	16714-026-01	J1650		\$36.85	\$36.11	\$36.48	\$34.01	\$36.11
Inpatient/Outpatient	ENOXAPARIN SODIUM 60 MG/0.6ML IJ SOSY	71288-410-84	J1650		\$34.30	\$33.61	\$33.96	\$31.66	\$33.61
Inpatient/Outpatient	BENZOCAINE-MENTHOL 15-10 MG MT LOZG	78112-01746	A9150		\$1.06	\$1.04	\$1.05	\$0.98	\$1.04
Inpatient/Outpatient	ROSUVASTATIN CALCIUM 10 MG PO TABS	0781-5401-92	A9270		\$0.77	\$0.75	\$0.76	\$0.71	\$0.75
Inpatient/Outpatient	ROSUVASTATIN CALCIUM 10 MG PO TABS	16714-989-01	A9270		\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	ROSUVASTATIN CALCIUM 10 MG PO TABS	72205-003-90	A9270		\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	ALTEPLASE 1 MG IJ SOLR	99999-041-01	J2997		\$347.64	\$340.69	\$344.16	\$320.87	\$340.69
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 100 MCG IV SOLR	63323-649-07			\$380.30	\$372.69	\$376.50	\$351.02	\$372.69
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 100 MCG IV SOLR	70860-451-10			\$361.63	\$354.40	\$358.01	\$333.78	\$354.40
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 100 MCG IV SOLR	42023-201-01			\$477.54	\$467.99	\$472.76	\$440.77	\$467.99
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 100 MCG IV SOLR	66794-649-02			\$395.97	\$388.05	\$392.01	\$365.48	\$388.05
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 100 MCG IV SOLR	63323-649-94			\$380.30	\$372.69	\$376.50	\$351.02	\$372.69
Inpatient/Outpatient	ADENOSINE 6 MG/2ML IV SOLN	67457-855-00	J0153		\$3.01	\$2.95	\$2.98	\$2.78	\$2.95
Inpatient/Outpatient	ADENOSINE 6 MG/2ML IV SOLN	63323-651-02	J0153		\$5.92	\$5.80	\$5.86	\$5.46	\$5.80
Inpatient/Outpatient	ADENOSINE 6 MG/2ML IV SOLN	17478-542-02	J0153		\$3.51	\$3.44	\$3.47	\$3.24	\$3.44
Inpatient/Outpatient	ADENOSINE 6 MG/2ML IV SOLN	63323-651-21	J0153		\$23.28	\$22.81	\$23.05	\$21.49	\$22.81
Inpatient/Outpatient	ADENOSINE 6 MG/2ML IV SOLN	63323-651-89	J0153		\$23.16	\$22.70	\$22.93	\$21.38	\$22.70
Inpatient/Outpatient	DENOSUMAB 120 MG/1.7ML SC SOLN	55513-730-01	J0897		\$3,177.95	\$3,114.39	\$3,146.17	\$2,933.25	\$3,114.39
Inpatient/Outpatient	ALTEPLASE (STEMI DOSE #1) INFUSION 1 MG/ML - 0.75 MG/KG	50242-085-27	J2997		\$12,940.99	\$12,682.17	\$12,811.58	\$11,944.53	\$12,682.17
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE 9 GM/60ML IJ SOLN	63323-282-60			\$0.97	\$0.95	\$0.96	\$0.90	\$0.95
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE 9 GM/60ML IJ SOLN	47781-465-70			\$2.10	\$2.06	\$2.08	\$1.94	\$2.06
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE 9 GM/60ML IJ SOLN	0009-0728-05			\$1.46	\$1.43	\$1.45	\$1.35	\$1.43
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE 9 GM/60ML IJ SOLN	72611-645-11			\$1.21	\$1.19	\$1.20	\$1.12	\$1.19
Inpatient/Outpatient	HEPARIN SOD (PORCINE) IN D5W 100 UNIT/ML IV SOLN	0264-9587-20	J1644		\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	FERUMOXYTOL 510 MG/17ML IV SOLN	59338-775-01	Q0138		\$110.42	\$108.21	\$109.32	\$101.92	\$108.21
Inpatient/Outpatient	FERUMOXYTOL 510 MG/17ML IV SOLN	0781-3154-01	Q0138		\$93.13	\$91.27	\$92.20	\$85.96	\$91.27
Inpatient/Outpatient	TRANEXAMIC ACID 1000 MG/10ML IH NEBU	0013-1114-01			\$5.64	\$5.53	\$5.58	\$5.21	\$5.53
Inpatient/Outpatient	DEXRAZOXANE HCL 500 MG IV SOLR	0013-8727-89	J1190		\$754.16	\$739.08	\$746.62	\$696.09	\$739.08
Inpatient/Outpatient	DEXRAZOXANE HCL 500 MG IV SOLR	47781-578-07	J1190		\$884.52	\$866.83	\$875.67	\$816.41	\$866.83
Inpatient/Outpatient	DEXRAZOXANE HCL 500 MG IV SOLR	51991-942-98	J1190		\$1,128.85	\$1,106.27	\$1,117.56	\$1,041.93	\$1,106.27
Inpatient/Outpatient	DEXRAZOXANE HCL 500 MG IV SOLR	72611-716-01	J1190		\$586.35	\$574.62	\$580.49	\$541.20	\$574.62
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE 900 MG/6ML IJ SOLN	63323-282-06			\$3.97	\$3.89	\$3.93	\$3.66	\$3.89
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE 900 MG/6ML IJ SOLN	0009-0902-11			\$2.09	\$2.05	\$2.07	\$1.93	\$2.05
Inpatient/Outpatient	CLINDAMYCIN PHOSPHATE 900 MG/6ML IJ SOLN	25021-115-06			\$2.27	\$2.22	\$2.25	\$2.10	\$2.22
Inpatient/Outpatient	FUROSEMIDE 8 MG/ML PO SOLN	0054-3298-63	A9270		\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	SODIUM CHLORIDE 1 G PO TABS	0223-1760-01	A9150		\$0.29	\$0.28	\$0.29	\$0.27	\$0.28
Inpatient/Outpatient	SODIUM CHLORIDE 1 G PO TABS	69367-220-01	A9150		\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	SODIUM CHLORIDE 1 G PO TABS	77333-835-25	A9150		\$0.97	\$0.95	\$0.96	\$0.90	\$0.95
Inpatient/Outpatient	DABIGATRAN ETEXILATE MESYLATE 75 MG PO CAPS	0597-0149-54	A9270		\$27.13	\$26.59	\$26.86	\$25.04	\$26.59
Inpatient/Outpatient	DABIGATRAN ETEXILATE MESYLATE 75 MG PO CAPS	0597-0149-60	A9270		\$27.13	\$26.59	\$26.86	\$25.04	\$26.59
Inpatient/Outpatient	DABIGATRAN ETEXILATE MESYLATE 75 MG PO CAPS	0597-0355-56	A9270		\$33.65	\$32.98	\$33.31	\$31.06	\$32.98
Inpatient/Outpatient	DABIGATRAN ETEXILATE MESYLATE 150 MG PO CAPS	0597-0135-54	A9270		\$30.31	\$29.70	\$30.01	\$27.98	\$29.70
Inpatient/Outpatient	DABIGATRAN ETEXILATE MESYLATE 150 MG PO CAPS	0597-0135-60	A9270		\$27.13	\$26.59	\$26.86	\$25.04	\$26.59
Inpatient/Outpatient	DABIGATRAN ETEXILATE MESYLATE 150 MG PO CAPS	0597-0360-82	A9270		\$33.65	\$32.98	\$33.31	\$31.06	\$32.98
Inpatient/Outpatient	INSULIN LISPRO 100 UNIT/ML FOR PUMP BOLUS	99999-4098-0	J1817		\$21.78	\$21.34	\$21.56	\$20.10	\$21.34
Inpatient/Outpatient	INSULIN LISPRO 100 UNIT/ML FOR PUMP BOLUS	0002-7510-17	J1815		\$23.41	\$22.94	\$23.18	\$21.61	\$22.94
Inpatient/Outpatient	FENTANYL IV SYRINGE 10 MCG/2 ML (NICU/INFANT)(DOSES 0.5 MCG - 4.9 MCG)	61553-339-79	J3010		\$68.91	\$67.53	\$68.22	\$63.60	\$67.53
Inpatient/Outpatient	CYPROHEPTADINE HCL 2 MG/SML PO SYRP	64980-504-48	A9270		\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	ALTEPLASE (STEMI DOSE #2) INFUSION 1 MG/ML - 0.5 MG/KG	50242-085-27	J2997		\$12,940.99	\$12,682.17	\$12,811.58	\$11,944.53	\$12,682.17
Inpatient/Outpatient	DARBEPOETIN ALFA 40 MCG/0.4ML IJ SOSY	55513-021-04	J0881		\$1,152.07	\$1,129.03	\$1,140.55	\$1,063.36	\$1,129.03
Inpatient/Outpatient	PALIVIZUMAB 50 MG/0.5ML IM SOLN	60574-4114-1		90378	\$6,006.42	\$5,886.29	\$5,946.36	\$5,543.93	\$5,886.29
Inpatient/Outpatient	PALIVIZUMAB 50 MG/0.5ML IM SOLN	66658-230-01		90378	\$6,675.95	\$6,542.43	\$6,609.19	\$6,161.90	\$6,542.43
Inpatient/Outpatient	CIPROFLOXACIN IN D5W 200 MG/100ML IV SOLN	36000-008-24	J0744		\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	CIPROFLOXACIN IN D5W 200 MG/100ML IV SOLN	0781-3239-09	J0744		\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	CIPROFLOXACIN IN D5W 200 MG/100ML IV SOLN	0409-4777-23	J0744		\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	FLUOROURACIL 1 GM/20ML IV SOLN	63323-117-20	J9190		\$0.92	\$0.90	\$0.91	\$0.85	\$0.90
Inpatient/Outpatient	FLUOROURACIL 1 GM/20ML IV SOLN	63323-117-28	J9190		\$0.92	\$0.90	\$0.91	\$0.85	\$0.90

Inpatient/Outpatient	FLUOROURACIL 1 GM/20ML IV SOLN	63323-117-41	J9190	\$0.84	\$0.82	\$0.83	\$0.78	\$0.82
Inpatient/Outpatient	DILTIAZEM HCL 125 MG/25ML IV SOLN	0641-6015-01		\$1.15	\$1.13	\$1.14	\$1.06	\$1.13
Inpatient/Outpatient	DILTIAZEM HCL 125 MG/25ML IV SOLN	0641-9219-01		\$4.37	\$4.28	\$4.33	\$4.03	\$4.28
Inpatient/Outpatient	DILTIAZEM HCL 125 MG/25ML IV SOLN	17478-937-25		\$1.97	\$1.93	\$1.95	\$1.82	\$1.93
Inpatient/Outpatient	DILTIAZEM HCL 125 MG/25ML IV SOLN	70860-301-43		\$1.77	\$1.73	\$1.75	\$1.63	\$1.73
Inpatient/Outpatient	FONDAPARINUX SODIUM 10 MG/0.8ML SC SOLN	67457-585-00	J1652	\$201.05	\$197.03	\$199.04	\$185.57	\$197.03
Inpatient/Outpatient	FONDAPARINUX SODIUM 10 MG/0.8ML SC SOLN	0781-3476-95	J1652	\$134.50	\$131.81	\$133.16	\$124.14	\$131.81
Inpatient/Outpatient	FONDAPARINUX SODIUM 7.5 MG/0.6ML SC SOLN	0007-3234-02	J1652	\$491.58	\$481.75	\$486.66	\$453.73	\$481.75
Inpatient/Outpatient	FONDAPARINUX SODIUM 7.5 MG/0.6ML SC SOLN	0007-3234-11	J1652	\$597.37	\$585.42	\$591.40	\$551.37	\$585.42
Inpatient/Outpatient	FONDAPARINUX SODIUM 7.5 MG/0.6ML SC SOLN	0007-3234-01	J1652	\$209.73	\$205.54	\$207.63	\$193.58	\$205.54
Inpatient/Outpatient	FONDAPARINUX SODIUM 7.5 MG/0.6ML SC SOLN	60505-6080-0	J1652	\$189.92	\$186.12	\$188.02	\$175.30	\$186.12
Inpatient/Outpatient	FONDAPARINUX SODIUM 7.5 MG/0.6ML SC SOLN	67457-584-00	J1652	\$268.07	\$262.71	\$265.39	\$247.43	\$262.71
Inpatient/Outpatient	FONDAPARINUX SODIUM 7.5 MG/0.6ML SC SOLN	55150-232-00	J1652	\$196.52	\$192.59	\$194.55	\$181.39	\$192.59
Inpatient/Outpatient	FONDAPARINUX SODIUM 7.5 MG/0.6ML SC SOLN	0781-3465-95	J1652	\$156.60	\$153.47	\$155.03	\$144.54	\$153.47
Inpatient/Outpatient	ROSUVASTATIN CALCIUM 5 MG PO TABS	0781-5400-92	A9270	\$0.77	\$0.75	\$0.76	\$0.71	\$0.75
Inpatient/Outpatient	ROSUVASTATIN CALCIUM 5 MG PO TABS	16714-988-01	A9270	\$0.18	\$0.18	\$0.18	\$0.17	\$0.18
Inpatient/Outpatient	ROSUVASTATIN CALCIUM 5 MG PO TABS	72205-027-90	A9270	\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	ROSUVASTATIN CALCIUM 20 MG PO TABS	0781-5402-92	A9270	\$0.77	\$0.75	\$0.76	\$0.71	\$0.75
Inpatient/Outpatient	ROSUVASTATIN CALCIUM 20 MG PO TABS	16714-990-01	A9270	\$0.21	\$0.21	\$0.21	\$0.19	\$0.21
Inpatient/Outpatient	LEVOFLOXACIN IN D5W 250 MG/50ML IV SOLN	0781-3341-09	J1956	\$0.84	\$0.82	\$0.83	\$0.78	\$0.82
Inpatient/Outpatient	LEVOFLOXACIN IN D5W 250 MG/50ML IV SOLN	25021-132-81	J1956	\$0.68	\$0.67	\$0.67	\$0.63	\$0.67
Inpatient/Outpatient	LEVOFLOXACIN IN D5W 250 MG/50ML IV SOLN	36000-046-24	J1956	\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	LEVOFLOXACIN IN D5W 250 MG/50ML IV SOLN	0409-0528-13	J1956	\$0.38	\$0.37	\$0.38	\$0.35	\$0.37
Inpatient/Outpatient	LEVOFLOXACIN IN D5W 250 MG/50ML IV SOLN	36000-294-24	J1956	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	LEVOFLOXACIN IN D5W 250 MG/50ML IV SOLN	0143-9722-01	J1956	\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	FLUOROURACIL 5 GM/100ML IV SOLN	63323-117-61	J9190	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	FLUOROURACIL 5 GM/100ML IV SOLN	0703-3019-11	J9190	\$1.39	\$1.36	\$1.38	\$1.28	\$1.36
Inpatient/Outpatient	FLUOROURACIL 5 GM/100ML IV SOLN	63323-117-68	J9190	\$0.69	\$0.68	\$0.68	\$0.64	\$0.68
Inpatient/Outpatient	FLUOROURACIL 5 GM/100ML IV SOLN	16729-276-38	J9190	\$2.49	\$2.44	\$2.47	\$2.30	\$2.44
Inpatient/Outpatient	CARBIDOPA-LEVODOPA-ENTACAPONE 18.75-75-200 MG PO TABS	0378-8301-01	A9270	\$5.86	\$5.74	\$5.80	\$5.41	\$5.74
Inpatient/Outpatient	CARBIDOPA-LEVODOPA-ENTACAPONE 18.75-75-200 MG PO TABS	64679-783-04	A9270	\$4.84	\$4.74	\$4.79	\$4.47	\$4.74
Inpatient/Outpatient	CARBIDOPA-LEVODOPA-ENTACAPONE 18.75-75-200 MG PO TABS	0781-5625-01	A9270	\$3.16	\$3.10	\$3.13	\$2.92	\$3.10
Inpatient/Outpatient	CISPLATIN 100 MG/100ML IV SOLN	63323-103-65	J9060	\$1.05	\$1.03	\$1.04	\$0.97	\$1.03
Inpatient/Outpatient	CISPLATIN 100 MG/100ML IV SOLN	0703-5748-11	J9060	\$1.96	\$1.92	\$1.94	\$1.81	\$1.92
Inpatient/Outpatient	CISPLATIN 100 MG/100ML IV SOLN	44567-510-01	J9060	\$1.36	\$1.33	\$1.35	\$1.26	\$1.33
Inpatient/Outpatient	CISPLATIN 100 MG/100ML IV SOLN	16729-288-38	J9060	\$0.62	\$0.61	\$0.61	\$0.57	\$0.61
Inpatient/Outpatient	CISPLATIN 100 MG/100ML IV SOLN	0143-9505-01	J9060	\$0.61	\$0.60	\$0.60	\$0.56	\$0.60
Inpatient/Outpatient	CEFTAROLINE FOSAMIL 400 MG IV SOLR	0456-0400-01	J0712	\$192.99	\$189.13	\$191.06	\$178.13	\$189.13
Inpatient/Outpatient	CEFTAROLINE FOSAMIL 600 MG IV SOLR	0456-0600-01	J0712	\$192.99	\$189.13	\$191.06	\$178.13	\$189.13
Inpatient/Outpatient	LIDOCAINE INFUSION 4 MG/ML (INFANT)	0338-0409-01	J2001	\$0.04	\$0.04	\$0.04	\$0.04	\$0.04
Inpatient/Outpatient	MILRINONE LACTATE IN DEXTROSE 20-5 MG/100ML-% IV SOLN	0338-6010-48	J2260	\$0.60	\$0.59	\$0.59	\$0.55	\$0.59
Inpatient/Outpatient	MILRINONE LACTATE IN DEXTROSE 20-5 MG/100ML-% IV SOLN	0409-2776-23	J2260	\$0.54	\$0.53	\$0.53	\$0.50	\$0.53
Inpatient/Outpatient	MILRINONE LACTATE IN DEXTROSE 20-5 MG/100ML-% IV SOLN	0143-9719-10	J2260	\$0.34	\$0.33	\$0.34	\$0.31	\$0.33
Inpatient/Outpatient	MILRINONE LACTATE IN DEXTROSE 20-5 MG/100ML-% IV SOLN	0143-9719-01	J2260	\$0.40	\$0.39	\$0.40	\$0.37	\$0.39
Inpatient/Outpatient	MILRINONE LACTATE IN DEXTROSE 20-5 MG/100ML-% IV SOLN	25021-313-82	J2260	\$0.74	\$0.73	\$0.73	\$0.68	\$0.73
Inpatient/Outpatient	METOPROLOL TARTRATE 12.5 MG HALF TABS	99999-506-12	A9270	\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	OXIDIZED CELLULOSE (SURGICEL) 4X8 INCH (#1952)	63713-01952		\$456.00	\$446.88	\$451.44	\$420.89	\$446.88
Inpatient/Outpatient	REMDESIVIR 100 MG IV SOLR	61958-2901-1		\$1,773.20	\$1,737.74	\$1,755.47	\$1,636.66	\$1,737.74
Inpatient/Outpatient	REMDESIVIR 100 MG IV SOLR	61958-2901-2		\$1,773.20	\$1,737.74	\$1,755.47	\$1,636.66	\$1,737.74
Inpatient/Outpatient	NALBUPHINE HCL 10 MG/ML IJ SOLN	0409-1464-01	J2300	\$13.88	\$13.60	\$13.74	\$12.81	\$13.60
Inpatient/Outpatient	NALBUPHINE HCL 10 MG/ML IJ SOLN	0409-1463-01	J2300	\$15.61	\$15.30	\$15.45	\$14.41	\$15.30
Inpatient/Outpatient	NALBUPHINE HCL 10 MG/ML IJ SOLN	49999-426-10	J2300	\$17.13	\$16.79	\$16.96	\$15.81	\$16.79
Inpatient/Outpatient	NALBUPHINE HCL 10 MG/ML IJ SOLN	0409-1463-71	J2300	\$15.61	\$15.30	\$15.45	\$14.41	\$15.30
Inpatient/Outpatient	METOPROLOL TARTRATE 6.25 MG QUARTER TABS	99999-0506-6	A9270	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	INSULIN REGULAR INFUSION 1 UNIT/ML (PEDS) PREMIX	99999-8215-1	J1817	\$18.23	\$17.87	\$18.05	\$16.83	\$17.87
Inpatient/Outpatient	CARBIDOPA-LEVODOPA 25-100 MG PO TBDP	62756-187-88	A9270	\$2.86	\$2.80	\$2.83	\$2.64	\$2.80
Inpatient/Outpatient	CARBIDOPA-LEVODOPA 25-100 MG PO TBDP	0378-5052-01	A9270	\$2.92	\$2.86	\$2.89	\$2.70	\$2.86
Inpatient/Outpatient	GLYCERIN (LAXATIVE) 1 G RE SUPP	0132-0081-12	A9150	\$0.47	\$0.46	\$0.47	\$0.43	\$0.46
Inpatient/Outpatient	GLYCERIN (LAXATIVE) 1 G RE SUPP	58980-409-12	A9150	\$1.98	\$1.94	\$1.96	\$1.83	\$1.94
Inpatient/Outpatient	FAMOTIDINE 200 MG/20ML IV SOLN	63323-738-06		\$0.88	\$0.86	\$0.87	\$0.81	\$0.86
Inpatient/Outpatient	FAMOTIDINE 200 MG/20ML IV SOLN	67457-457-00		\$0.59	\$0.58	\$0.58	\$0.54	\$0.58
Inpatient/Outpatient	OLANZAPINE 5 MG PO TBDP	0002-4453-85	A9270	\$73.59	\$72.12	\$72.85	\$67.92	\$72.12
Inpatient/Outpatient	OLANZAPINE 5 MG PO TBDP	60505-3275-3	A9270	\$1.99	\$1.95	\$1.97	\$1.84	\$1.95
Inpatient/Outpatient	OLANZAPINE 5 MG PO TBDP	0378-5510-93	A9270	\$3.30	\$3.23	\$3.27	\$3.05	\$3.23
Inpatient/Outpatient	OLANZAPINE 5 MG PO TBDP	33342-083-07	A9270	\$2.09	\$2.05	\$2.07	\$1.93	\$2.05
Inpatient/Outpatient	OLANZAPINE 5 MG PO TBDP	49884-320-52	A9270	\$20.88	\$20.46	\$20.67	\$19.27	\$20.46
Inpatient/Outpatient	OLANZAPINE 5 MG PO TBDP	50268-615-11	A9270	\$12.53	\$12.28	\$12.40	\$11.57	\$12.28
Inpatient/Outpatient	OLANZAPINE 5 MG PO TBDP	55111-262-79	A9270	\$3.02	\$2.96	\$2.99	\$2.79	\$2.96

Inpatient/Outpatient	OLANZAPINE 5 MG PO TBDP	60505-3275-0	A9270		\$1.93	\$1.89	\$1.91	\$1.78	\$1.89
Inpatient/Outpatient	OLANZAPINE 5 MG PO TBDP	0002-4453-01	A9270		\$69.54	\$68.15	\$68.84	\$64.19	\$68.15
Inpatient/Outpatient	OLANZAPINE 5 MG PO TBDP	0093-5245-19	A9270		\$8.07	\$7.91	\$7.99	\$7.45	\$7.91
Inpatient/Outpatient	OLANZAPINE 5 MG PO TBDP	13668-086-30	A9270		\$3.30	\$3.23	\$3.27	\$3.05	\$3.23
Inpatient/Outpatient	OLANZAPINE 5 MG PO TBDP	59746-306-12	A9270		\$1.47	\$1.44	\$1.46	\$1.36	\$1.44
Inpatient/Outpatient	OLANZAPINE 15 MG PO TBDP	0002-4455-85	A9270		\$147.54	\$144.59	\$146.06	\$136.18	\$144.59
Inpatient/Outpatient	OLANZAPINE 15 MG PO TBDP	62756-755-64	A9270		\$13.54	\$13.27	\$13.40	\$12.50	\$13.27
Inpatient/Outpatient	OLANZAPINE 15 MG PO TBDP	33342-085-07	A9270		\$3.04	\$2.98	\$3.01	\$2.81	\$2.98
Inpatient/Outpatient	OLANZAPINE 15 MG PO TBDP	13668-089-30	A9270		\$2.43	\$2.38	\$2.41	\$2.24	\$2.38
Inpatient/Outpatient	ALBUMIN HUMAN 5 % INFUSION (NICU)	0944-0491-01	P9045		\$1.17	\$1.15	\$1.16	\$1.08	\$1.15
Inpatient/Outpatient	ALBUMIN HUMAN 5 % INFUSION (NICU)	13533-690-20	P9041		\$2.88	\$2.82	\$2.85	\$2.66	\$2.82
Inpatient/Outpatient	MICAFUNGIN SODIUM 50 MG IV SOLR	0469-3250-10	J2248		\$422.48	\$414.03	\$418.26	\$389.95	\$414.03
Inpatient/Outpatient	MICAFUNGIN SODIUM 50 MG IV SOLR	63323-728-01	J2248		\$127.60	\$125.05	\$126.32	\$117.77	\$125.05
Inpatient/Outpatient	MICAFUNGIN SODIUM 50 MG IV SOLR	42023-229-01	J2248		\$90.46	\$88.65	\$89.56	\$83.49	\$88.65
Inpatient/Outpatient	MICAFUNGIN SODIUM 100 MG IV SOLR	0469-3211-10	J2248		\$593.48	\$581.61	\$587.55	\$547.78	\$581.61
Inpatient/Outpatient	MICAFUNGIN SODIUM 100 MG IV SOLR	63323-729-01	J2248		\$256.31	\$251.18	\$253.75	\$236.57	\$251.18
Inpatient/Outpatient	MICAFUNGIN SODIUM 100 MG IV SOLR	60505-6120-0	J2248		\$593.48	\$581.61	\$587.55	\$547.78	\$581.61
Inpatient/Outpatient	MICAFUNGIN SODIUM 100 MG IV SOLR	42023-230-01	J2248		\$174.14	\$170.66	\$172.40	\$160.73	\$170.66
Inpatient/Outpatient	MICAFUNGIN SODIUM 100 MG IV SOLR	63323-729-02	J2248		\$171.88	\$168.44	\$170.16	\$158.65	\$168.44
Inpatient/Outpatient	GENTAMICIN SULFATE 0.3 % OP SOLN	61314-633-05	A9270		\$4.80	\$4.70	\$4.75	\$4.43	\$4.70
Inpatient/Outpatient	GENTAMICIN SULFATE 0.3 % OP SOLN	24208-580-60	A9270		\$12.30	\$12.05	\$12.18	\$11.35	\$12.05
Inpatient/Outpatient	GENTAMICIN SULFATE 0.3 % OP SOLN	60758-188-05	A9270		\$3.99	\$3.91	\$3.95	\$3.68	\$3.91
Inpatient/Outpatient	MONTELUKAST SODIUM 4 MG PO CHEW	0006-0711-28	A9150		\$24.64	\$24.15	\$24.39	\$22.74	\$24.15
Inpatient/Outpatient	MONTELUKAST SODIUM 4 MG PO CHEW	0781-5554-31	A9150		\$3.39	\$3.32	\$3.36	\$3.13	\$3.32
Inpatient/Outpatient	MONTELUKAST SODIUM 4 MG PO CHEW	0603-4653-02	A9150		\$0.95	\$0.93	\$0.94	\$0.88	\$0.93
Inpatient/Outpatient	MONTELUKAST SODIUM 4 MG PO CHEW	31722-727-30	A9150		\$1.15	\$1.13	\$1.14	\$1.06	\$1.13
Inpatient/Outpatient	MONTELUKAST SODIUM 4 MG PO CHEW	50268-573-11	A9150		\$3.09	\$3.03	\$3.06	\$2.85	\$3.03
Inpatient/Outpatient	AMINO ACID (PLENAMINE) 15 % IV SOLN	0264-3200-55			\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	IOHEXOL 350 MG/ML IV SOLN	0407-1414-36			\$0.53	\$0.52	\$0.52	\$0.49	\$0.52
Inpatient/Outpatient	IOHEXOL 350 MG/ML IV SOLN	0407-1414-91			\$4.58	\$4.49	\$4.53	\$4.23	\$4.49
Inpatient/Outpatient	IOVERSOL 68 % IJ SOLN	0019-1323-16			\$1.54	\$1.51	\$1.52	\$1.42	\$1.51
Inpatient/Outpatient	DIPHThERIA-TETANUS TOXOIDS DT 25-5 LFU/0.5ML IM SUSP	49281-225-10	90702		\$399.97	\$391.97	\$395.97	\$369.17	\$391.97
Inpatient/Outpatient	IODIXANOL 320 MG/ML IV SOLN	0407-2223-16			\$1.77	\$1.73	\$1.75	\$1.63	\$1.73
Inpatient/Outpatient	IODIXANOL 320 MG/ML IV SOLN	0407-2223-19			\$4.51	\$4.42	\$4.46	\$4.16	\$4.42
Inpatient/Outpatient	IODIXANOL 320 MG/ML IV SOLN	0407-2223-66			\$4.99	\$4.89	\$4.94	\$4.61	\$4.89
Inpatient/Outpatient	IOTHALAMATE MEGLUMINE 30 % IV SOLN	0019-0952-11			\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	DIATRIZOATE MEGLUMINE & SODIUM 66-10 % PO SOLN	0019-4816-05	Q9963		\$1.23	\$1.21	\$1.22	\$1.14	\$1.21
Inpatient/Outpatient	DIATRIZOATE MEGLUMINE & SODIUM 66-10 % PO SOLN	0270-0445-40	Q9963		\$0.86	\$0.84	\$0.85	\$0.79	\$0.84
Inpatient/Outpatient	DIATRIZOATE MEGLUMINE & SODIUM 66-10 % PO SOLN	0270-0445-35	Q9963		\$2.16	\$2.12	\$2.14	\$1.99	\$2.12
Inpatient/Outpatient	REMDESIVIR 100 MG/20ML IV SOLN	61958-2902-1			\$126.36	\$123.83	\$125.10	\$116.63	\$123.83
Inpatient/Outpatient	BARIUM SULFATE 98 % PO SUSP	32909-764-01	A9270		\$0.20	\$0.20	\$0.20	\$0.18	\$0.20
Inpatient/Outpatient	POTASSIUM CHLORIDE ER (KLORCON/KDUR) 10 MEQ PO TBCR (WRAP)	0245-0041-01	J3480		\$1.74	\$1.71	\$1.72	\$1.61	\$1.71
Inpatient/Outpatient	POTASSIUM CHLORIDE ER (KLORCON/KDUR) 10 MEQ PO TBCR (WRAP)	66758-170-13	J3480		\$1.36	\$1.33	\$1.35	\$1.26	\$1.33
Inpatient/Outpatient	POTASSIUM CHLORIDE ER (KLORCON/KDUR) 10 MEQ PO TBCR (WRAP)	66758-160-13	J3480		\$1.59	\$1.56	\$1.57	\$1.47	\$1.56
Inpatient/Outpatient	POTASSIUM CHLORIDE ER (KLORCON/KDUR) 10 MEQ PO TBCR (WRAP)	68084-632-11	J3480		\$1.48	\$1.45	\$1.47	\$1.37	\$1.45
Inpatient/Outpatient	POTASSIUM CHLORIDE ER (KLORCON/KDUR) 10 MEQ PO TBCR (WRAP)	66758-170-06	J3480		\$1.47	\$1.44	\$1.46	\$1.36	\$1.44
Inpatient/Outpatient	POTASSIUM CHLORIDE ER (KLORCON/KDUR) 10 MEQ PO TBCR (WRAP)	0245-5317-89	J3480		\$1.23	\$1.21	\$1.22	\$1.14	\$1.21
Inpatient/Outpatient	AMPICILLIN-SULBACTAM SODIUM 3 (2-1) G IJ SOLR	63323-369-20	J0295		\$35.04	\$34.34	\$34.69	\$32.34	\$34.34
Inpatient/Outpatient	AMPICILLIN-SULBACTAM SODIUM 3 (2-1) G IJ SOLR	0049-0014-83	J0295		\$64.78	\$63.48	\$64.13	\$59.79	\$63.48
Inpatient/Outpatient	AMPICILLIN-SULBACTAM SODIUM 3 (2-1) G IJ SOLR	0049-0014-81	J0295		\$24.32	\$23.83	\$24.08	\$22.45	\$23.83
Inpatient/Outpatient	AMPICILLIN-SULBACTAM SODIUM 3 (2-1) G IJ SOLR	67457-349-03	J0295		\$17.88	\$17.52	\$17.70	\$16.50	\$17.52
Inpatient/Outpatient	AMPICILLIN-SULBACTAM SODIUM 3 (2-1) G IJ SOLR	71288-006-30	J0295		\$36.91	\$36.17	\$36.54	\$34.07	\$36.17
Inpatient/Outpatient	AMPICILLIN-SULBACTAM SODIUM 3 (2-1) G IJ SOLR	71288-006-31	J0295		\$37.01	\$36.27	\$36.64	\$34.16	\$36.27
Inpatient/Outpatient	AMPICILLIN-SULBACTAM SODIUM 3 (2-1) G IJ SOLR	55150-117-20	J0295		\$15.38	\$15.07	\$15.23	\$14.20	\$15.07
Inpatient/Outpatient	AMPICILLIN-SULBACTAM SODIUM 3 (2-1) G IJ SOLR	25021-143-30	J0295		\$40.71	\$39.90	\$40.30	\$37.58	\$39.90
Inpatient/Outpatient	AMPICILLIN-SULBACTAM SODIUM 3 (2-1) G IJ SOLR	66794-207-02	J0295		\$42.97	\$42.11	\$42.54	\$39.66	\$42.11
Inpatient/Outpatient	AMPICILLIN-SULBACTAM SODIUM 3 (2-1) G IJ SOLR	0641-6117-01	J0295		\$34.47	\$33.78	\$34.13	\$31.82	\$33.78
Inpatient/Outpatient	GLYCOPYRROLATE 4 MG/20ML IJ SOLN	10019-016-02			\$1.27	\$1.24	\$1.26	\$1.17	\$1.24
Inpatient/Outpatient	GLYCOPYRROLATE 4 MG/20ML IJ SOLN	60977-155-06			\$1.04	\$1.02	\$1.03	\$0.96	\$1.02
Inpatient/Outpatient	GLYCOPYRROLATE 4 MG/20ML IJ SOLN	0517-4620-25			\$18.19	\$17.83	\$18.01	\$16.79	\$17.83
Inpatient/Outpatient	PENICILLIN G BENZATHINE 2400000 UNIT/4ML IM SUSP	60793-702-10	J0561		\$482.70	\$473.05	\$477.87	\$445.53	\$473.05
Inpatient/Outpatient	PENICILLIN G BENZATHINE 2400000 UNIT/4ML IM SUSP	60793-702-04	J0561		\$399.11	\$391.13	\$395.12	\$368.38	\$391.13
Inpatient/Outpatient	PENICILLIN G BENZATHINE 1200000 UNIT/2ML IM SUSY	60793-701-10	J0561		\$471.11	\$461.69	\$466.40	\$434.83	\$461.69
Inpatient/Outpatient	PENICILLIN G BENZATHINE 1200000 UNIT/2ML IM SUSY	60793-701-02	J0561		\$241.74	\$236.91	\$239.32	\$223.13	\$236.91
Inpatient/Outpatient	IMMUNE GLOBULIN (GAMUNEX-C) 1 GM/10ML INJ SOLN	13533-800-12	J1561		\$62.57	\$61.32	\$61.94	\$57.75	\$61.32
Inpatient/Outpatient	IMMUNE GLOBULIN (GAMUNEX-C) 1 GM/10ML INJ SOLN	13533-800-13	J1561		\$40.95	\$40.13	\$40.54	\$37.80	\$40.13
Inpatient/Outpatient	IMMUNE GLOBULIN (GAMUNEX-C) 2.5 GM/25ML INJ SOLN	13533-800-15	J1561		\$62.57	\$61.32	\$61.94	\$57.75	\$61.32
Inpatient/Outpatient	IMMUNE GLOBULIN (GAMUNEX-C) 5 GM/50ML INJ SOLN	13533-800-20	J1561		\$33.73	\$33.06	\$33.39	\$31.13	\$33.06

Inpatient/Outpatient	IMMUNE GLOBULIN (GAMUNEX-C) 5 GM/50ML INJ SOLN	13533-800-21	J1561		\$33.70	\$33.03	\$33.36	\$31.11	\$33.03
Inpatient/Outpatient	IMMUNE GLOBULIN (GAMUNEX-C) 10 GM/100ML INJ SOLN	13533-800-71	J1561		\$33.73	\$33.06	\$33.39	\$31.13	\$33.06
Inpatient/Outpatient	IMMUNE GLOBULIN (GAMUNEX-C) 10 GM/100ML INJ SOLN	13533-800-72	J1561		\$33.70	\$33.03	\$33.36	\$31.11	\$33.03
Inpatient/Outpatient	IMMUNE GLOBULIN (GAMUNEX-C) 20 GM/200ML INJ SOLN	13533-800-24	J1561		\$33.73	\$33.06	\$33.39	\$31.13	\$33.06
Inpatient/Outpatient	IMMUNE GLOBULIN (GAMUNEX-C) 20 GM/200ML INJ SOLN	13533-800-25	J1561		\$38.52	\$37.75	\$38.13	\$35.55	\$37.75
Inpatient/Outpatient	NALOXONE HCL 2 MG/2ML NASAL SOLN	76329-3369-1	J2310		\$31.72	\$31.09	\$31.40	\$29.28	\$31.09
Inpatient/Outpatient	IBUTILIDE FUMARATE 1 MG/10ML IV SOLN	0009-3794-01	J1742		\$36.87	\$36.13	\$36.50	\$34.03	\$36.13
Inpatient/Outpatient	IBUTILIDE FUMARATE 1 MG/10ML IV SOLN	67457-366-10	J1742		\$36.19	\$35.47	\$35.83	\$33.40	\$35.47
Inpatient/Outpatient	NITROGLYCERIN IV SYRINGE 1 MG/10 ML (IR/CATH/CARDIAC SURGERY)	99999-1049-1			\$0.15	\$0.15	\$0.15	\$0.14	\$0.15
Inpatient/Outpatient	ALTEPLASE (STEMI) BOLUS 1 MG/ML - 15 MG	50242-085-27	J2997		\$12,940.99	\$12,682.17	\$12,811.58	\$11,944.53	\$12,682.17
Inpatient/Outpatient	METHOCARBAMOL 1000 MG/10ML IJ SOLN	0517-1825-10	J2800		\$6.94	\$6.80	\$6.87	\$6.41	\$6.80
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 5000 UNIT/ML - FOR CRRT	0409-2723-01	J1644		\$4.25	\$4.17	\$4.21	\$3.92	\$4.17
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 5000 UNIT/ML - FOR CRRT	25021-402-01	J1644		\$12.64	\$12.39	\$12.51	\$11.67	\$12.39
Inpatient/Outpatient	SODIUM CHLORIDE 0.9% FILTER PRIME FOR CRRT	0338-0049-04	J7030		\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	LACTATED RINGERS - CRRT	0338-0117-03			\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	LACTATED RINGERS - CRRT	0338-0117-04			\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	SODIUM CHLORIDE 0.9% - CRRT	0338-0049-04	J7030		\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	DIGOXIN IMMUNE FAB 40 MG IV SOLR	50633-120-11	J1162		\$7,885.49	\$7,727.78	\$7,806.64	\$7,278.31	\$7,727.78
Inpatient/Outpatient	PIPERACILLIN-TAZOBACTAM 2.25 G IN 10 ML IV SYRINGE	99999-981-53	J2543		\$9.95	\$9.75	\$9.85	\$9.18	\$9.75
Inpatient/Outpatient	VARENICLINE TARTRATE 0.5 MG PO TABS	35356-011-14	A9270		\$16.34	\$16.01	\$16.18	\$15.08	\$16.01
Inpatient/Outpatient	VARENICLINE TARTRATE 0.5 MG PO TABS	0069-0468-56	A9270		\$36.80	\$36.06	\$36.43	\$33.97	\$36.06
Inpatient/Outpatient	VARENICLINE TARTRATE 0.5 MG PO TABS	60505-4765-5	A9270		\$34.79	\$34.09	\$34.44	\$32.11	\$34.09
Inpatient/Outpatient	VARENICLINE TARTRATE 0.5 MG PO TABS	49884-155-76	A9270		\$23.61	\$23.14	\$23.37	\$21.79	\$23.14
Inpatient/Outpatient	PALIVIZUMAB 100 MG/ML IM SOLN	60574-4113-1		90378	\$5,417.68	\$5,309.33	\$5,363.50	\$5,000.52	\$5,309.33
Inpatient/Outpatient	DARBEPOETIN ALFA 300 MCG/0.6ML IJ SOSY	55513-111-01	J0881		\$3,462.96	\$3,393.70	\$3,428.33	\$3,196.31	\$3,393.70
Inpatient/Outpatient	IBUPROFEN 800 MG/8ML IV SOLN	66220-287-08	J1741		\$9.12	\$8.94	\$9.03	\$8.42	\$8.94
Inpatient/Outpatient	CISATRACURIUM BESYLATE (PF) 10 MG/5ML IV SOLN	0074-4378-05			\$14.18	\$13.90	\$14.04	\$13.09	\$13.90
Inpatient/Outpatient	CISATRACURIUM BESYLATE (PF) 10 MG/5ML IV SOLN	63323-416-05			\$8.50	\$8.33	\$8.42	\$7.85	\$8.33
Inpatient/Outpatient	CISATRACURIUM BESYLATE (PF) 10 MG/5ML IV SOLN	0074-4378-24			\$4.51	\$4.42	\$4.46	\$4.16	\$4.42
Inpatient/Outpatient	CISATRACURIUM BESYLATE (PF) 10 MG/5ML IV SOLN	0409-5547-01			\$2.90	\$2.84	\$2.87	\$2.68	\$2.84
Inpatient/Outpatient	CISATRACURIUM BESYLATE (PF) 10 MG/5ML IV SOLN	25021-668-05			\$9.16	\$8.98	\$9.07	\$8.45	\$8.98
Inpatient/Outpatient	CISATRACURIUM BESYLATE (PF) 200 MG/20ML IV SOLN	0074-4382-20			\$67.17	\$65.83	\$66.50	\$62.00	\$65.83
Inpatient/Outpatient	CISATRACURIUM BESYLATE (PF) 200 MG/20ML IV SOLN	0074-4382-91			\$28.78	\$28.20	\$28.49	\$26.56	\$28.20
Inpatient/Outpatient	CISATRACURIUM BESYLATE (PF) 200 MG/20ML IV SOLN	0703-2045-01			\$65.73	\$64.42	\$65.07	\$60.67	\$64.42
Inpatient/Outpatient	CISATRACURIUM BESYLATE (PF) 200 MG/20ML IV SOLN	70069-151-01			\$15.15	\$14.85	\$15.00	\$13.98	\$14.85
Inpatient/Outpatient	CISATRACURIUM BESYLATE (PF) 200 MG/20ML IV SOLN	0409-1103-11			\$19.99	\$19.59	\$19.79	\$18.45	\$19.59
Inpatient/Outpatient	CISATRACURIUM BESYLATE (PF) 200 MG/20ML IV SOLN	0781-3153-80			\$42.11	\$41.23	\$41.69	\$38.87	\$41.23
Inpatient/Outpatient	CISATRACURIUM BESYLATE (PF) 200 MG/20ML IV SOLN	0409-3670-10			\$12.69	\$12.44	\$12.56	\$11.71	\$12.44
Inpatient/Outpatient	CISATRACURIUM BESYLATE (PF) 200 MG/20ML IV SOLN	0409-3670-01			\$15.61	\$15.30	\$15.45	\$14.41	\$15.30
Inpatient/Outpatient	CISATRACURIUM BESYLATE (PF) 200 MG/20ML IV SOLN	71288-713-20			\$25.93	\$25.41	\$25.67	\$23.93	\$25.41
Inpatient/Outpatient	TERBUTALINE INFUSION (PEDS)	55390-101-10	J3105		\$11.09	\$10.87	\$10.98	\$10.24	\$10.87
Inpatient/Outpatient	TERBUTALINE INFUSION (PEDS)	63323-665-01	J3105		\$6.10	\$5.98	\$6.04	\$5.63	\$5.98
Inpatient/Outpatient	TERBUTALINE INFUSION (PEDS)	0143-9746-10	J3105		\$6.78	\$6.64	\$6.71	\$6.26	\$6.64
Inpatient/Outpatient	TERBUTALINE INFUSION (PEDS)	99999-9746-5	J3105		\$5.20	\$5.10	\$5.15	\$4.80	\$5.10
Inpatient/Outpatient	TERBUTALINE INFUSION (PEDS)	99999-974-10	J3105		\$5.20	\$5.10	\$5.15	\$4.80	\$5.10
Inpatient/Outpatient	TERBUTALINE INFUSION (PEDS)	99999-974-20	J3105		\$5.20	\$5.10	\$5.15	\$4.80	\$5.10
Inpatient/Outpatient	TERBUTALINE INFUSION (PEDS)	99999-974-50	J3105		\$5.20	\$5.10	\$5.15	\$4.80	\$5.10
Inpatient/Outpatient	TERBUTALINE INFUSION (PEDS)	0143-9746-01	J3105		\$5.20	\$5.10	\$5.15	\$4.80	\$5.10
Inpatient/Outpatient	ALTEPLASE (STROKE) INFUSION 1 MG/ML - 0.81 MG/KG	50242-085-27	J2997		\$12,940.99	\$12,682.17	\$12,811.58	\$11,944.53	\$12,682.17
Inpatient/Outpatient	SODIUM CHLORIDE 0.9% BOLUS (NICU)	0338-0049-03	J7050		\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	SODIUM CHLORIDE 0.9% BOLUS (NICU)	0264-7800-10	J7050		\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	POVIDONE-IODINE 5 % OP SOLN	0065-0411-30	A9270		\$1.43	\$1.40	\$1.42	\$1.32	\$1.40
Inpatient/Outpatient	AZITHROMYCIN 100 MG/5ML PO SUSR	0069-3110-19	A9270		\$44.00	\$43.12	\$43.56	\$40.61	\$43.12
Inpatient/Outpatient	DOCETAXEL 20 MG/ML IV CONC	0955-1020-01	J9171		\$140.36	\$137.55	\$138.96	\$129.55	\$137.55
Inpatient/Outpatient	DOCETAXEL 20 MG/ML IV CONC	16729-267-63	J9171		\$66.92	\$65.58	\$66.25	\$61.77	\$65.58
Inpatient/Outpatient	DOCETAXEL 20 MG/ML IV CONC	47335-323-40	J9171		\$49.91	\$48.91	\$49.41	\$46.07	\$48.91
Inpatient/Outpatient	GELATIN ABSORBABLE 4 EX MISC	0009-0396-05			\$60.56	\$59.35	\$59.95	\$55.90	\$59.35
Inpatient/Outpatient	HYDROCHLOROTHIAZIDE 1 MG/ML ORAL SOLUTION	99999-042-00	A9270		\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	PROPOFOL 10 MG/ML IV EMUL (TITRATED)	0409-4699-54	J2704		\$0.41	\$0.40	\$0.41	\$0.38	\$0.40
Inpatient/Outpatient	PROPOFOL 10 MG/ML IV EMUL (TITRATED)	0703-2859-03	J2704		\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	PROPOFOL 10 MG/ML IV EMUL (TITRATED)	25021-608-51	J2704		\$1.42	\$1.39	\$1.41	\$1.31	\$1.39
Inpatient/Outpatient	PROPOFOL 10 MG/ML IV EMUL (TITRATED)	63323-269-78	J2704		\$0.53	\$0.52	\$0.52	\$0.49	\$0.52
Inpatient/Outpatient	PROPOFOL 10 MG/ML IV EMUL (TITRATED)	63323-269-69	J2704		\$0.51	\$0.50	\$0.50	\$0.47	\$0.50
Inpatient/Outpatient	PROPOFOL 10 MG/ML IV EMUL (TITRATED)	63323-269-50	J2704		\$0.51	\$0.50	\$0.50	\$0.47	\$0.50
Inpatient/Outpatient	PROPOFOL 10 MG/ML IV EMUL (TITRATED)	63323-269-59	J2704		\$0.51	\$0.50	\$0.50	\$0.47	\$0.50
Inpatient/Outpatient	PROPOFOL 10 MG/ML IV EMUL (TITRATED)	63323-269-65	J2704		\$0.51	\$0.50	\$0.50	\$0.47	\$0.50
Inpatient/Outpatient	PROPOFOL 10 MG/ML IV EMUL (TITRATED)	0069-0248-01	J2704		\$0.48	\$0.47	\$0.48	\$0.44	\$0.47
Inpatient/Outpatient	ISOPROPYL ALCOHOL 70 % SOLN	0574-0067-16	A9150GY		\$0.02	\$0.02	\$0.02	\$0.02	\$0.02

Inpatient/Outpatient	LAMOTRIGINE 5 MG PO CHEW	0093-0688-01	A9270	\$0.87	\$0.85	\$0.86	\$0.80	\$0.85
Inpatient/Outpatient	LAMOTRIGINE 5 MG PO CHEW	62332-095-31	A9270	\$0.97	\$0.95	\$0.96	\$0.90	\$0.95
Inpatient/Outpatient	LAMOTRIGINE 5 MG PO CHEW	68462-228-01	A9270	\$1.56	\$1.53	\$1.54	\$1.44	\$1.53
Inpatient/Outpatient	LAMOTRIGINE 5 MG PO CHEW	65862-361-01	A9270	\$0.93	\$0.91	\$0.92	\$0.86	\$0.91
Inpatient/Outpatient	TRANEXAMIC ACID 1000 MG/10ML IV SOLN	63323-563-97		\$18.19	\$17.83	\$18.01	\$16.79	\$17.83
Inpatient/Outpatient	TRANEXAMIC ACID 1000 MG/10ML IV SOLN	14789-500-10		\$32.08	\$31.44	\$31.76	\$29.61	\$31.44
Inpatient/Outpatient	TRANEXAMIC ACID 1000 MG/10ML IV SOLN	0013-1114-10		\$4.26	\$4.17	\$4.22	\$3.93	\$4.17
Inpatient/Outpatient	TRANEXAMIC ACID 1000 MG/10ML IV SOLN	67457-197-10		\$3.18	\$3.12	\$3.15	\$2.94	\$3.12
Inpatient/Outpatient	TRANEXAMIC ACID 1000 MG/10ML IV SOLN	55150-188-10		\$1.08	\$1.06	\$1.07	\$1.00	\$1.06
Inpatient/Outpatient	TRANEXAMIC ACID 1000 MG/10ML IV SOLN	0517-0960-10		\$3.39	\$3.32	\$3.36	\$3.13	\$3.32
Inpatient/Outpatient	TRANEXAMIC ACID 1000 MG/10ML IV SOLN	0517-0960-01		\$5.90	\$5.78	\$5.84	\$5.45	\$5.78
Inpatient/Outpatient	TRANEXAMIC ACID 1000 MG/10ML IV SOLN	42192-605-01		\$14.58	\$14.29	\$14.43	\$13.46	\$14.29
Inpatient/Outpatient	TRANEXAMIC ACID 1000 MG/10ML IV SOLN	47781-601-91		\$2.52	\$2.47	\$2.49	\$2.33	\$2.47
Inpatient/Outpatient	TRANEXAMIC ACID 1000 MG/10ML IV SOLN	0013-1114-01		\$5.64	\$5.53	\$5.58	\$5.21	\$5.53
Inpatient/Outpatient	TRANEXAMIC ACID 1000 MG/10ML IV SOLN	23155-166-31		\$2.21	\$2.16	\$2.19	\$2.04	\$2.17
Inpatient/Outpatient	TRANEXAMIC ACID 1000 MG/10ML IV SOLN	70860-400-10		\$1.58	\$1.55	\$1.56	\$1.46	\$1.55
Inpatient/Outpatient	TRANEXAMIC ACID 1000 MG/10ML IV SOLN	23155-524-31		\$2.21	\$2.17	\$2.19	\$2.04	\$2.17
Inpatient/Outpatient	TRANEXAMIC ACID 1000 MG/10ML IV SOLN	63323-563-10		\$4.21	\$4.13	\$4.17	\$3.89	\$4.13
Inpatient/Outpatient	TRANEXAMIC ACID 1000 MG/10ML IV SOLN	23155-524-41		\$1.63	\$1.60	\$1.61	\$1.50	\$1.60
Inpatient/Outpatient	TRANEXAMIC ACID 1000 MG/10ML IV SOLN	43066-008-01		\$1.33	\$1.30	\$1.32	\$1.23	\$1.30
Inpatient/Outpatient	TRANEXAMIC ACID 1000 MG/10ML IV SOLN	61990-0611-0		\$1.34	\$1.31	\$1.33	\$1.24	\$1.31
Inpatient/Outpatient	TRANEXAMIC ACID 1000 MG/10ML IV SOLN	81284-611-00		\$1.34	\$1.31	\$1.33	\$1.24	\$1.31
Inpatient/Outpatient	TRANEXAMIC ACID 1000 MG/10ML IV SOLN	72485-107-01		\$1.27	\$1.24	\$1.26	\$1.17	\$1.24
Inpatient/Outpatient	MISOPROSTOL HEMORRHAGE 400 MCG RE CAPS	99999-1461-2	A9270	\$8.68	\$8.51	\$8.59	\$8.01	\$8.51
Inpatient/Outpatient	GEMCITABINE HCL 200 MG/5.26ML IV SOLN	0409-0183-01	J9201	\$3.87	\$3.79	\$3.83	\$3.57	\$3.79
Inpatient/Outpatient	CLONIDINE 10 MCG/ML ORAL DILUTION	99999-4089-2	A9270	\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	POTASSIUM CHLORIDE 0.2 MEQ/ML IV SYRINGE (NICU)	0338-0703-41		\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	POTASSIUM CHLORIDE 0.4 MEQ/ML IV SYRINGE (NICU)	0338-0703-41		\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	POTASSIUM CHLORIDE 0.1 MEQ/ML IV SYRINGE (NICU)	0338-0703-41		\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	METHYLPREDNISOLONE SODIUM SUCC 500 MG IJ SOLR	0009-0003-02	J2930	\$175.49	\$171.98	\$173.74	\$161.98	\$171.98
Inpatient/Outpatient	NEOMYCIN-POLYMYXIN-DEXAMETH 3.5-10000-0.1 OP OINT	0574-4160-35	A9270	\$6.93	\$6.79	\$6.86	\$6.40	\$6.79
Inpatient/Outpatient	NEOMYCIN-POLYMYXIN-DEXAMETH 3.5-10000-0.1 OP OINT	61314-631-36	A9270	\$11.12	\$10.90	\$11.01	\$10.26	\$10.90
Inpatient/Outpatient	NICARDIPINE IV SYRINGE 100 MCG/ML (CATH LAB/IR)	99999-311-10		\$2.77	\$2.71	\$2.74	\$2.56	\$2.71
Inpatient/Outpatient	NICARDIPINE IV SYRINGE 100 MCG/ML (CATH LAB/IR)	99999-311-20		\$1.96	\$1.92	\$1.94	\$1.81	\$1.92
Inpatient/Outpatient	NALOXONE HCL 0.4 MG/ML NASAL SOLN	0409-1215-01	J2310	\$69.51	\$68.12	\$68.81	\$64.16	\$68.12
Inpatient/Outpatient	LIDOCAINE HCL (PF) 1 % NASAL SOLN (PEDS)	0409-4713-32	J2001	\$1.76	\$1.72	\$1.74	\$1.62	\$1.72
Inpatient/Outpatient	ALBUTEROL SULFATE (2.5 MG/3ML) 0.083% IN NEBU	0487-9501-01	J7613	\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	ALBUTEROL SULFATE (2.5 MG/3ML) 0.083% IN NEBU	76204-200-01	J7613	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	ALBUTEROL SULFATE (2.5 MG/3ML) 0.083% IN NEBU	0487-9501-25	J7613	\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	ALBUTEROL SULFATE (2.5 MG/3ML) 0.083% IN NEBU	60687-395-79	J7613	\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	ALBUTEROL SULFATE (2.5 MG/3ML) 0.083% IN NEBU	0378-8270-55	J7613	\$0.30	\$0.29	\$0.30	\$0.28	\$0.29
Inpatient/Outpatient	PIPERACILLIN-TAZOBACTAM 3.375 G IN 15 ML IV SYRINGE	99999-983-21	J2543	\$11.31	\$11.08	\$11.20	\$10.44	\$11.08
Inpatient/Outpatient	CHLOROPROCAINE HCL (PF) 2 % IJ SOLN	63323-477-01	J2400	\$4.33	\$4.24	\$4.29	\$4.00	\$4.24
Inpatient/Outpatient	CHLOROPROCAINE HCL (PF) 2 % IJ SOLN	0143-9209-01	J2400	\$2.87	\$2.81	\$2.84	\$2.65	\$2.81
Inpatient/Outpatient	OXYTOCIN 10 UNIT/ML FOR INFUSION MIXTURE (CP OR/ANES)	0641-6114-25	J2590	\$5.10	\$5.00	\$5.05	\$4.71	\$5.00
Inpatient/Outpatient	OXYTOCIN 10 UNIT/ML FOR INFUSION MIXTURE (CP OR/ANES)	63323-012-01	J2590	\$6.70	\$6.57	\$6.63	\$6.18	\$6.57
Inpatient/Outpatient	LACOSAMIDE 50 MG PO TABS	0131-2477-35	A9270	\$48.14	\$47.18	\$47.66	\$44.43	\$47.18
Inpatient/Outpatient	LACOSAMIDE 50 MG PO TABS	0131-2477-60	A9270	\$52.95	\$51.89	\$52.42	\$48.87	\$51.89
Inpatient/Outpatient	HYDROMORPHONE HCL PF 10 MG/ML IJ SOLN	59011-445-05	J1170	\$19.96	\$19.56	\$19.76	\$18.42	\$19.56
Inpatient/Outpatient	HYDROMORPHONE HCL PF 10 MG/ML IJ SOLN	0703-0113-01	J1170	\$6.46	\$6.33	\$6.40	\$5.96	\$6.33
Inpatient/Outpatient	HYDROMORPHONE HCL PF 10 MG/ML IJ SOLN	0409-2634-50	J1170	\$8.59	\$8.42	\$8.50	\$7.93	\$8.42
Inpatient/Outpatient	HYDROMORPHONE HCL PF 10 MG/ML IJ SOLN	0703-0018-01	J1170	\$5.43	\$5.32	\$5.38	\$5.01	\$5.32
Inpatient/Outpatient	HYDROMORPHONE HCL PF 10 MG/ML IJ SOLN	63323-851-03	J1170	\$15.53	\$15.22	\$15.37	\$14.33	\$15.22
Inpatient/Outpatient	HYDROMORPHONE HCL PF 10 MG/ML IJ SOLN	0703-0110-01	J1170	\$14.94	\$14.64	\$14.79	\$13.79	\$14.64
Inpatient/Outpatient	HYDROMORPHONE HCL PF 10 MG/ML IJ SOLN	63323-851-07	J1170	\$10.96	\$10.74	\$10.85	\$10.12	\$10.74
Inpatient/Outpatient	HYDROMORPHONE HCL 1 MG/ML IJ SOLN	0409-1283-10	J1170	\$11.47	\$11.24	\$11.36	\$10.59	\$11.24
Inpatient/Outpatient	HYDROMORPHONE HCL 1 MG/ML IJ SOLN	0409-1283-31	J1170	\$8.28	\$8.11	\$8.20	\$7.64	\$8.11
Inpatient/Outpatient	HYDROMORPHONE HCL 1 MG/ML IJ SOLN	0409-1283-03	J1170	\$9.12	\$8.94	\$9.03	\$8.42	\$8.94
Inpatient/Outpatient	HYDROMORPHONE HCL 1 MG/ML IJ SOLN	0409-1283-09	J1170	\$8.94	\$8.76	\$8.85	\$8.25	\$8.76
Inpatient/Outpatient	HYDROMORPHONE HCL 1 MG/ML IJ SOLN	76045-009-01	J1170	\$15.18	\$14.88	\$15.03	\$14.01	\$14.88
Inpatient/Outpatient	HYDROMORPHONE HCL 1 MG/ML IJ SOLN	0409-1283-17	J1170	\$7.78	\$7.62	\$7.70	\$7.18	\$7.62
Inpatient/Outpatient	HYDROMORPHONE HCL 1 MG/ML IJ SOLN	76045-009-06	J1170	\$18.55	\$18.18	\$18.36	\$17.12	\$18.18
Inpatient/Outpatient	HEXAMINOLEVULINATE HCL 100 MG IS SOLR	10511-3001-1	A9589	\$2,837.12	\$2,780.38	\$2,808.75	\$2,618.66	\$2,780.38
Inpatient/Outpatient	RIVAROXABAN 10 MG PO TABS	50458-580-10	A9270	\$58.42	\$57.25	\$57.84	\$53.92	\$57.25
Inpatient/Outpatient	RIVAROXABAN 15 MG PO TABS	50458-578-10	A9270	\$58.42	\$57.25	\$57.84	\$53.92	\$57.25
Inpatient/Outpatient	RIVAROXABAN 20 MG PO TABS	50458-579-10	A9270	\$58.42	\$57.25	\$57.84	\$53.92	\$57.25
Inpatient/Outpatient	RIVAROXABAN 20 MG PO TABS	50458-579-30	A9270	\$58.42	\$57.25	\$57.84	\$53.92	\$57.25
Inpatient/Outpatient	ECULIZUMAB 300 MG/30ML IV SOLN	25682-001-01	J1300	\$752.57	\$737.52	\$745.04	\$694.62	\$737.52

Inpatient/Outpatient	PEMETREXED DISODIUM 100 MG IV SOLR	0002-7640-01	J9305	\$2,622.19	\$2,569.75	\$2,595.97	\$2,420.28	\$2,569.75
Inpatient/Outpatient	PEMETREXED DISODIUM 100 MG IV SOLR	16729-229-03	J9305	\$134.33	\$131.64	\$132.99	\$123.99	\$131.64
Inpatient/Outpatient	CHLORDIAZEPOXIDE HCL 10 MG PO CAPS	51079-375-01	A9270	\$1.69	\$1.66	\$1.67	\$1.56	\$1.66
Inpatient/Outpatient	PIPERACILLIN-TAZOBACTAM IV VIAL DILUTION 225 MG/ML (PEDS)	99999-8855-8	J2543	\$113.82	\$111.54	\$112.68	\$105.06	\$111.54
Inpatient/Outpatient	PIPERACILLIN-TAZOBACTAM IV VIAL DILUTION 225 MG/ML (PEDS)	99999-8854-8	J2543	\$78.46	\$76.89	\$77.68	\$72.42	\$76.89
Inpatient/Outpatient	PIPERACILLIN-TAZOBACTAM IV VIAL DILUTION 225 MG/ML (PEDS)	99999-8852-8	J2543	\$57.11	\$55.97	\$56.54	\$52.71	\$55.97
Inpatient/Outpatient	ACETYLCYSTEINE ORAL SOLN 20 %	0054-3026-02	A9270	\$2.02	\$1.98	\$2.00	\$1.86	\$1.98
Inpatient/Outpatient	ACETYLCYSTEINE ORAL SOLN 20 %	0517-7630-03	A9270	\$1.51	\$1.48	\$1.49	\$1.39	\$1.48
Inpatient/Outpatient	ACETYLCYSTEINE ORAL SOLN 20 %	0517-7604-25	A9270	\$6.73	\$6.60	\$6.66	\$6.21	\$6.60
Inpatient/Outpatient	ACETYLCYSTEINE ORAL SOLN 20 %	63323-690-30	A9270	\$0.90	\$0.88	\$0.89	\$0.83	\$0.88
Inpatient/Outpatient	ACETYLCYSTEINE ORAL SOLN 20 %	63323-694-04	A9270	\$4.68	\$4.59	\$4.63	\$4.32	\$4.59
Inpatient/Outpatient	MORPHINE SULFATE (PF) 4 MG/ML IJ SOLN (WRAP)	0641-6125-01	J2274	\$8.16	\$8.00	\$8.08	\$7.53	\$8.00
Inpatient/Outpatient	MORPHINE SULFATE (PF) 4 MG/ML IJ SOLN (WRAP)	0641-6125-25	J2274	\$10.17	\$9.97	\$10.07	\$9.39	\$9.97
Inpatient/Outpatient	MORPHINE SULFATE (PF) 4 MG/ML IJ SOLN (WRAP)	63323-454-00	J2274	\$11.39	\$11.16	\$11.28	\$10.51	\$11.16
Inpatient/Outpatient	MORPHINE SULFATE (PF) 4 MG/ML IJ SOLN (WRAP)	0409-1891-03	J2274	\$7.87	\$7.71	\$7.79	\$7.26	\$7.71
Inpatient/Outpatient	MORPHINE SULFATE (PF) 4 MG/ML IJ SOLN (WRAP)	76045-005-01	J2274	\$7.60	\$7.45	\$7.52	\$7.01	\$7.45
Inpatient/Outpatient	MORPHINE SULFATE (PF) 8 MG/ML IJ SOLN (WRAP)	0641-6126-01	J2270	\$9.22	\$9.04	\$9.13	\$8.51	\$9.04
Inpatient/Outpatient	MORPHINE SULFATE (PF) 8 MG/ML IJ SOLN (WRAP)	0641-6126-25	J2270	\$11.50	\$11.27	\$11.39	\$10.61	\$11.27
Inpatient/Outpatient	MORPHINE SULFATE (PF) 10 MG/ML IJ SOLN (WRAP)	0641-6127-25	J2274	\$10.37	\$10.16	\$10.27	\$9.57	\$10.16
Inpatient/Outpatient	MORPHINE SULFATE (PF) 10 MG/ML IJ SOLN (WRAP)	0641-6127-01	J2274	\$4.64	\$4.55	\$4.59	\$4.28	\$4.55
Inpatient/Outpatient	MORPHINE SULFATE (PF) 10 MG/ML IJ SOLN (WRAP)	0409-1893-03	J2274	\$5.20	\$5.10	\$5.15	\$4.80	\$5.10
Inpatient/Outpatient	MORPHINE SULFATE (PF) 10 MG/ML IJ SOLN (WRAP)	63323-451-00	J2274	\$12.01	\$11.77	\$11.89	\$11.09	\$11.77
Inpatient/Outpatient	MORPHINE SULFATE (PF) 10 MG/ML IJ SOLN (WRAP)	63323-451-01	J2274	\$13.85	\$13.57	\$13.71	\$12.78	\$13.57
Inpatient/Outpatient	IPRATROPIUM-ALBUTEROL 0.5-2.5 (3) MG/3ML IN SOLN	76204-600-01		\$0.28	\$0.27	\$0.28	\$0.26	\$0.27
Inpatient/Outpatient	IPRATROPIUM-ALBUTEROL 0.5-2.5 (3) MG/3ML IN SOLN	0487-0201-01		\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	IPRATROPIUM-ALBUTEROL 0.5-2.5 (3) MG/3ML IN SOLN	0378-9671-31		\$0.76	\$0.74	\$0.75	\$0.70	\$0.74
Inpatient/Outpatient	LANSOPRAZOLE 3 MG/ML PO SUSP (FIRST)	65628-080-03	A9270	\$2.08	\$2.04	\$2.06	\$1.92	\$2.04
Inpatient/Outpatient	LANSOPRAZOLE 3 MG/ML PO SUSP (FIRST)	65628-080-10	A9270	\$1.32	\$1.29	\$1.31	\$1.22	\$1.29
Inpatient/Outpatient	LANSOPRAZOLE 3 MG/ML PO SUSP (FIRST)	65628-080-05	A9270	\$2.63	\$2.58	\$2.60	\$2.43	\$2.58
Inpatient/Outpatient	MYCOPHENOLATE SODIUM 360 MG PO TBEC	0078-0386-66	A9270	\$51.68	\$50.65	\$51.16	\$47.70	\$50.65
Inpatient/Outpatient	MYCOPHENOLATE SODIUM 360 MG PO TBEC	51079-509-01	A9270	\$33.60	\$32.93	\$33.26	\$31.01	\$32.93
Inpatient/Outpatient	MYCOPHENOLATE SODIUM 360 MG PO TBEC	0378-4202-78	A9270	\$2.78	\$2.72	\$2.75	\$2.57	\$2.72
Inpatient/Outpatient	MYCOPHENOLATE SODIUM 360 MG PO TBEC	60505-2966-7	A9270	\$4.13	\$4.05	\$4.09	\$3.81	\$4.05
Inpatient/Outpatient	MYCOPHENOLATE SODIUM 360 MG PO TBEC	16729-189-29	A9270	\$2.14	\$2.10	\$2.12	\$1.98	\$2.10
Inpatient/Outpatient	MYCOPHENOLATE SODIUM 360 MG PO TBEC	67877-427-12	A9270	\$1.76	\$1.72	\$1.74	\$1.62	\$1.72
Inpatient/Outpatient	CARBAMAZEPINE ER 100 MG PO CP12	29033-019-12	A9270	\$7.25	\$7.11	\$7.18	\$6.69	\$7.11
Inpatient/Outpatient	CARBAMAZEPINE ER 100 MG PO CP12	66993-407-32	A9270	\$5.66	\$5.55	\$5.60	\$5.22	\$5.55
Inpatient/Outpatient	CARBAMAZEPINE ER 100 MG PO CP12	60505-2805-7	A9270	\$1.24	\$1.22	\$1.23	\$1.14	\$1.22
Inpatient/Outpatient	MANGANESE SULFATE 0.1 MG/ML IV SOLN	0517-6410-25		\$11.18	\$10.96	\$11.07	\$10.32	\$10.96
Inpatient/Outpatient	CEFAZOLIN IVPB 2 G IN D5W 50 ML PREMIX	99999-3452-2	J0690	\$6.03	\$5.91	\$5.97	\$5.57	\$5.91
Inpatient/Outpatient	RISPERIDONE MICROSPHERES ER 25 MG IM SRER	50458-306-11	J2794	\$1,738.66	\$1,703.89	\$1,721.27	\$1,604.78	\$1,703.89
Inpatient/Outpatient	RISPERIDONE MICROSPHERES ER 25 MG IM SRER	50458-306-01	J2794	\$1,508.52	\$1,493.35	\$1,493.43	\$1,392.36	\$1,478.35
Inpatient/Outpatient	METHYLCELLULOSE POWD	51552-0210-9		\$210.92	\$206.70	\$208.81	\$194.68	\$206.70
Inpatient/Outpatient	NITROGLYCERIN 0.4 MG/SPRAY TL SOLN	52536-300-65	A9270	\$124.50	\$122.01	\$123.26	\$114.91	\$122.01
Inpatient/Outpatient	EPINEPHRINE HCL 1MG/ML IJ SOLN (ANES SPINAL KIT)	99999-122-50	J0171	\$6.93	\$6.79	\$6.86	\$6.40	\$6.79
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 40.5 (36-4.5) G IV SOLR	63323-304-94	J2543	\$284.65	\$278.96	\$281.80	\$262.73	\$278.96
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 40.5 (36-4.5) G IV SOLR	63323-304-74	J2543	\$284.65	\$278.96	\$281.80	\$262.73	\$278.96
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 40.5 (36-4.5) G IV SOLR	64679-679-01	J2543	\$270.22	\$264.82	\$267.52	\$249.41	\$264.82
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 40.5 (36-4.5) G IV SOLR	64679-679-02	J2543	\$271.63	\$266.20	\$268.91	\$250.71	\$266.20
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 40.5 (36-4.5) G IV SOLR	61990-0150-1	J2543	\$180.94	\$177.32	\$179.13	\$167.01	\$177.32
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 40.5 (36-4.5) G IV SOLR	25021-181-99	J2543	\$423.69	\$415.22	\$419.45	\$391.07	\$415.22
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 40.5 (36-4.5) G IV SOLR	0781-3180-94	J2543	\$248.78	\$243.80	\$246.29	\$229.62	\$243.80
Inpatient/Outpatient	PIPERACILLIN SOD-TAZOBACTAM SO 40.5 (36-4.5) G IV SOLR	65219-256-00	J2543	\$253.11	\$248.05	\$250.58	\$233.62	\$248.05
Inpatient/Outpatient	BUPIVACAINE LIPOSOME 1.3 % IJ SUSP	65250-133-04	C9290	\$96.64	\$94.71	\$95.67	\$89.20	\$94.71
Inpatient/Outpatient	TRANEXAMIC ACID 1000 MG/10ML EX SOLN	0013-1114-01		\$5.64	\$5.53	\$5.58	\$5.21	\$5.53
Inpatient/Outpatient	TOCILIZUMAB 20MG/ML IV SOLN (COVID-19)	50242-136-01	J3262	\$393.14	\$385.28	\$389.21	\$362.87	\$385.28
Inpatient/Outpatient	CASTOR OIL OIL	0869-2452-10	A9270	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	CASTOR OIL OIL	0869-2453-10	A9270	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	CASTOR OIL OIL	0395-0515-16	A9270	\$0.20	\$0.20	\$0.20	\$0.18	\$0.20
Inpatient/Outpatient	CASTOR OIL OIL	0395-0515-92	A9270	\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	NOREPINEPHRINE INFUSION 32 MCG/ML IN D5W 250 ML (STANDARD CONC) PREMIX	33216-782-17		\$0.47	\$0.46	\$0.47	\$0.43	\$0.46
Inpatient/Outpatient	NOREPINEPHRINE INFUSION 32 MCG/ML IN D5W 250 ML (STANDARD CONC) PREMIX	70092-9036-17		\$0.97	\$0.95	\$0.96	\$0.90	\$0.95
Inpatient/Outpatient	NOREPINEPHRINE INFUSION 32 MCG/ML IN D5W 250 ML (STANDARD CONC) PREMIX	70092-1493-17		\$0.79	\$0.77	\$0.78	\$0.73	\$0.77
Inpatient/Outpatient	NOREPINEPHRINE INFUSION 32 MCG/ML IN D5W 250 ML (STANDARD CONC) PREMIX	0338-0108-20		\$0.54	\$0.53	\$0.53	\$0.50	\$0.53
Inpatient/Outpatient	OXYTOCIN 30 UNITS IN LR 500 ML PREMIX	99999-766-03	J2590	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	OXYTOCIN 30 UNITS IN LR 500 ML PREMIX	71285-6039-1	J2590	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	OXYTOCIN 30 UNITS IN LR 500 ML PREMIX POST DELIVERY	99999-766-03	J2590	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	OXYTOCIN 30 UNITS IN LR 500 ML PREMIX POST DELIVERY	61553-785-03	J2590	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10

Inpatient/Outpatient	OXYTOCIN 30 UNITS IN LR 500 ML PREMIX POST DELIVERY	61553-766-03	J2590	\$0.08	\$0.08	\$0.08	\$0.07	\$0.08
Inpatient/Outpatient	OXYTOCIN 30 UNITS IN LR 500 ML PREMIX POST DELIVERY	71019-243-03	J2590	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	OXYTOCIN 30 UNITS IN LR 500 ML PREMIX POST DELIVERY	71285-6039-1	J2590	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	ROPIVACAINE 0.375 % IN NS (ANES)	99999-286-50	J2795	\$2.63	\$2.58	\$2.60	\$2.43	\$2.58
Inpatient/Outpatient	ROPIVACAINE (PREMIX) 0.2 % EPIDURAL	99999-045-00	J2795	\$0.88	\$0.86	\$0.87	\$0.81	\$0.86
Inpatient/Outpatient	ROPIVACAINE (PREMIX) 0.2 % EPIDURAL	63323-285-64	J2795	\$1.09	\$1.07	\$1.08	\$1.01	\$1.07
Inpatient/Outpatient	ROPIVACAINE (PREMIX) 0.2 % EPIDURAL	63323-285-61	J2795	\$0.88	\$0.86	\$0.87	\$0.81	\$0.86
Inpatient/Outpatient	ROPIVACAINE (PREMIX) 0.2 % EPIDURAL	63323-285-63	J2795	\$1.75	\$1.72	\$1.73	\$1.62	\$1.72
Inpatient/Outpatient	ROPIVACAINE (PREMIX) 0.2 % EPIDURAL	63323-285-68	J2795	\$1.09	\$1.07	\$1.08	\$1.01	\$1.07
Inpatient/Outpatient	ROPIVACAINE (PREMIX) 0.2 % EPIDURAL	25021-671-66	J2795	\$1.12	\$1.10	\$1.11	\$1.03	\$1.10
Inpatient/Outpatient	DEXAMETHASONE 1 MG PO TABS	0054-8174-25		\$1.38	\$1.35	\$1.37	\$1.27	\$1.35
Inpatient/Outpatient	EPINEPHRINE 0.15 MG/0.3ML IJ SOAJ	49502-501-02	J0171	\$969.28	\$949.89	\$959.59	\$894.65	\$949.89
Inpatient/Outpatient	EPINEPHRINE 0.15 MG/0.3ML IJ SOAJ	49502-101-02	J0171	\$475.52	\$466.01	\$470.76	\$438.90	\$466.01
Inpatient/Outpatient	EPINEPHRINE 0.15 MG/0.3ML IJ SOAJ	49502-101-01	J0171	\$475.22	\$465.72	\$470.47	\$438.63	\$465.72
Inpatient/Outpatient	EPINEPHRINE 0.15 MG/0.3ML IJ SOAJ	0093-5985-19	J0171	\$475.97	\$466.45	\$471.21	\$439.32	\$466.45
Inpatient/Outpatient	TRACE MINERALS CRCUMNZN (MTE-4 NEONATAL) IV SOLN	0517-6202-25		\$22.10	\$21.66	\$21.88	\$20.40	\$21.66
Inpatient/Outpatient	IPRATROPIUM-ALBUTEROL 20-100 MCG/ACT IN AERS	0597-0024-02	A9270	\$365.97	\$358.65	\$362.31	\$337.79	\$358.65
Inpatient/Outpatient	LIDOCAINE HCL 1.5 % IJ SOLN (ANES EPIDURAL KIT)	99999-4776-5	J2001	\$1.50	\$1.47	\$1.49	\$1.38	\$1.47
Inpatient/Outpatient	EPINEPHRINE 0.3 MG/0.3ML IJ SOAJ	49502-500-02	J0171	\$966.27	\$946.94	\$956.61	\$891.87	\$946.94
Inpatient/Outpatient	EPINEPHRINE 0.3 MG/0.3ML IJ SOAJ	49502-102-01	J0171	\$460.66	\$451.45	\$456.05	\$425.19	\$451.45
Inpatient/Outpatient	EPINEPHRINE 0.3 MG/0.3ML IJ SOAJ	0115-1694-49	J0171	\$437.90	\$429.14	\$433.52	\$404.18	\$429.14
Inpatient/Outpatient	EPINEPHRINE 0.3 MG/0.3ML IJ SOAJ	60842-023-01	J0171	\$948.93	\$929.95	\$939.44	\$875.86	\$929.95
Inpatient/Outpatient	EPINEPHRINE 0.3 MG/0.3ML IJ SOAJ	49502-102-02	J0171	\$476.04	\$466.52	\$471.28	\$439.38	\$466.52
Inpatient/Outpatient	EPINEPHRINE 0.3 MG/0.3ML IJ SOAJ	0093-5986-19	J0171	\$475.97	\$466.45	\$471.21	\$439.32	\$466.45
Inpatient/Outpatient	APIXABAN 2.5 MG PO TABS	0003-0893-31	A9270	\$29.91	\$29.31	\$29.61	\$27.61	\$29.31
Inpatient/Outpatient	APIXABAN 2.5 MG PO TABS	0003-0893-21	A9270	\$29.91	\$29.31	\$29.61	\$27.61	\$29.31
Inpatient/Outpatient	BUPRENORPHINE HCL 2 MG SL SUBL	0054-0176-13	A9270	\$12.07	\$11.83	\$11.95	\$11.14	\$11.83
Inpatient/Outpatient	BUPRENORPHINE HCL 2 MG SL SUBL	0378-0923-93	A9270	\$2.30	\$2.25	\$2.28	\$2.12	\$2.25
Inpatient/Outpatient	BUPRENORPHINE HCL 2 MG SL SUBL	50383-924-93	A9270	\$3.31	\$3.24	\$3.28	\$3.06	\$3.24
Inpatient/Outpatient	BUPRENORPHINE HCL 2 MG SL SUBL	42858-501-03	A9270	\$1.39	\$1.36	\$1.38	\$1.28	\$1.36
Inpatient/Outpatient	BUPRENORPHINE HCL 2 MG SL SUBL	62756-459-83	A9270	\$2.53	\$2.48	\$2.50	\$2.34	\$2.48
Inpatient/Outpatient	OXYCODONE HCL 10 MG PO TABS	10702-056-01	A9270	\$0.45	\$0.44	\$0.45	\$0.42	\$0.44
Inpatient/Outpatient	OXYCODONE HCL 10 MG PO TABS	68084-048-11	A9270	\$2.84	\$2.78	\$2.81	\$2.62	\$2.78
Inpatient/Outpatient	OXYCODONE HCL 10 MG PO TABS	63739-177-10	A9270	\$1.76	\$1.72	\$1.74	\$1.62	\$1.72
Inpatient/Outpatient	OXYCODONE HCL 10 MG PO TABS	57664-370-88	A9270	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	OXYCODONE HCL 10 MG PO TABS	42858-002-10	A9270	\$1.65	\$1.62	\$1.63	\$1.52	\$1.62
Inpatient/Outpatient	OXYCODONE HCL 10 MG PO TABS	42806-006-01	A9270	\$1.38	\$1.35	\$1.37	\$1.27	\$1.35
Inpatient/Outpatient	OXYCODONE HCL 10 MG PO TABS	68084-968-11	A9270	\$2.97	\$2.91	\$2.94	\$2.74	\$2.91
Inpatient/Outpatient	OXYCODONE HCL 10 MG PO TABS	42858-002-01	A9270	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	COAGULATION FACTOR IX (RECOMB) 2000 UNITS IV KIT	58394-636-03	J7200	\$6.76	\$6.62	\$6.69	\$6.24	\$6.62
Inpatient/Outpatient	MEPERIDINE HCL 50 MG/5ML PO SOLN	99999-3545-5		\$0.75	\$0.74	\$0.74	\$0.69	\$0.74
Inpatient/Outpatient	MEPERIDINE HCL 50 MG/5ML PO SOLN	0054-3545-63		\$0.75	\$0.74	\$0.74	\$0.69	\$0.74
Inpatient/Outpatient	AMIODARONE IV BOLUS (150 MG/100 ML) PREMIX	43066-150-10	J0282	\$1.23	\$1.21	\$1.22	\$1.14	\$1.21
Inpatient/Outpatient	KETAMINE INFUSION 2 MG/ML IN NS 250 ML PREMIX (PAIN)	99999-9508-1		\$2.38	\$2.33	\$2.36	\$2.20	\$2.33
Inpatient/Outpatient	MORPHINE 0.4 MG/ML ORAL SOLN (PAIN) (NICU/INFANT)	99999-023-00	A9270	\$0.56	\$0.55	\$0.55	\$0.52	\$0.55
Inpatient/Outpatient	MORPHINE 0.4 MG/ML ORAL SOLN (PAIN) (NICU/INFANT)	99999-023-05	A9270	\$0.56	\$0.55	\$0.55	\$0.52	\$0.55
Inpatient/Outpatient	MORPHINE 0.4 MG/ML ORAL SOLN (PAIN) (NICU/INFANT)	99999-023-10	A9270	\$0.56	\$0.55	\$0.55	\$0.52	\$0.55
Inpatient/Outpatient	PIPERACILLIN-TAZOBACTAM 4.5 G IN 20 ML IV SYRINGE	99999-012-45	J2543	\$21.03	\$20.61	\$20.82	\$19.41	\$20.61
Inpatient/Outpatient	KETOROLAC TROMETHAMINE 15 MG/ML IJ SOLN	63323-161-16	J1885	\$3.35	\$3.28	\$3.32	\$3.09	\$3.28
Inpatient/Outpatient	KETOROLAC TROMETHAMINE 15 MG/ML IJ SOLN	63323-161-01	J1885	\$3.34	\$3.27	\$3.31	\$3.08	\$3.27
Inpatient/Outpatient	KETOROLAC TROMETHAMINE 15 MG/ML IJ SOLN	0409-3793-19	J1885	\$11.63	\$11.40	\$11.51	\$10.73	\$11.40
Inpatient/Outpatient	KETOROLAC TROMETHAMINE 15 MG/ML IJ SOLN	70860-700-02	J1885	\$8.14	\$7.98	\$8.06	\$7.51	\$7.98
Inpatient/Outpatient	KETOROLAC TROMETHAMINE 15 MG/ML IJ SOLN	72611-719-01	J1885	\$5.10	\$5.00	\$5.05	\$4.71	\$5.00
Inpatient/Outpatient	KETOROLAC TROMETHAMINE 15 MG/ML IJ SOLN	70860-700-41	J1885	\$8.17	\$8.01	\$8.09	\$7.54	\$8.01
Inpatient/Outpatient	KETOROLAC TROMETHAMINE 15 MG/ML IJ SOLN	0338-0069-10	J1885	\$3.84	\$3.76	\$3.80	\$3.54	\$3.76
Inpatient/Outpatient	KETOROLAC TROMETHAMINE 15 MG/ML IJ SOLN	63323-161-41	J1885	\$3.03	\$2.97	\$3.00	\$2.80	\$2.97
Inpatient/Outpatient	KETOROLAC TROMETHAMINE 15 MG/ML IJ SOLN	63323-161-00	J1885	\$3.03	\$2.97	\$3.00	\$2.80	\$2.97
Inpatient/Outpatient	MORPHINE SUBQ INFUSION 1 MG/ML PREMIX (TITRATED)	99999-179-10	J2270	\$0.29	\$0.28	\$0.29	\$0.27	\$0.28
Inpatient/Outpatient	FENTANYL SUBQ INFUSION 10 MCG/ML PREMIX (TITRATED)	33216-2823-0	J3010	\$0.63	\$0.62	\$0.62	\$0.58	\$0.62
Inpatient/Outpatient	TRANEXAMIC ACID 1000 MG/10ML PO SOLN	0013-1114-01		\$5.64	\$5.53	\$5.58	\$5.21	\$5.53
Inpatient/Outpatient	CALCIUM ACETATE (PHOS BINDER) 667 MG PO TABS	71321-803-20	A9150	\$0.44	\$0.43	\$0.44	\$0.41	\$0.43
Inpatient/Outpatient	FLUTICASONE-SALMETEROL 100-50 MCG/ACT IN AEPB	0173-0695-04	A9270	\$29.21	\$28.63	\$28.92	\$26.96	\$28.63
Inpatient/Outpatient	FLUTICASONE-SALMETEROL 100-50 MCG/ACT IN AEPB	0054-0326-56	A9270	\$6.34	\$6.21	\$6.28	\$5.85	\$6.21
Inpatient/Outpatient	ROPINIROLE HCL 3 MG PO TABS	68462-257-01		\$0.25	\$0.25	\$0.25	\$0.23	\$0.25
Inpatient/Outpatient	ROPINIROLE HCL 4 MG PO TABS	68462-258-01		\$0.30	\$0.29	\$0.30	\$0.28	\$0.29
Inpatient/Outpatient	THYROTROPIN ALFA 0.9 MG IM SOLR	58468-0030-2	J3240	\$7,156.30	\$7,013.17	\$7,084.74	\$6,605.26	\$7,013.17
Inpatient/Outpatient	TRYPAN BLUE 0.15 % OP SOLN	68803-672-05		\$682.00	\$668.36	\$675.18	\$629.49	\$668.36
Inpatient/Outpatient	KETAMINE INFUSION 2 MG/ML IN NS 250 ML PREMIX (STATUS EPILEPTICUS)	99999-9508-1		\$2.38	\$2.33	\$2.36	\$2.20	\$2.33

Inpatient/Outpatient	RITUXIMAB-PVVR 500 MG/50ML IV SOLN	0069-0249-01	Q5119	\$284.48	\$278.79	\$281.64	\$262.58	\$278.79
Inpatient/Outpatient	DAPSONE 100 MG PO TABS	49938-101-30	A9270	\$12.67	\$12.42	\$12.54	\$11.69	\$12.42
Inpatient/Outpatient	DAPSONE 100 MG PO TABS	47781-334-31	A9270	\$8.33	\$8.16	\$8.25	\$7.69	\$8.16
Inpatient/Outpatient	DAPSONE 100 MG PO TABS	69543-151-30	A9270	\$4.07	\$3.99	\$4.03	\$3.76	\$3.99
Inpatient/Outpatient	DAPSONE 100 MG PO TABS	70954-136-10	A9270	\$4.15	\$4.07	\$4.11	\$3.83	\$4.07
Inpatient/Outpatient	DAPSONE 100 MG PO TABS	13925-505-30	A9270	\$4.19	\$4.11	\$4.15	\$3.87	\$4.11
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IR SOLN POUR BOTTLE	0338-0048-02		\$0.04	\$0.04	\$0.04	\$0.04	\$0.04
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IR SOLN POUR BOTTLE	0338-0048-03		\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IR SOLN POUR BOTTLE	0338-0048-04		\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IR SOLN POUR BOTTLE	0338-0048-05		\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IR SOLN POUR BOTTLE	0409-6138-22		\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IR SOLN POUR BOTTLE	0264-2201-00		\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IR SOLN POUR BOTTLE	0990-6138-22		\$0.09	\$0.09	\$0.09	\$0.08	\$0.09
Inpatient/Outpatient	CALCIUM GLUCONATE IVPB 1 G IN NS 100 ML PREMIX	44567-622-01	J0610	\$0.41	\$0.40	\$0.41	\$0.38	\$0.40
Inpatient/Outpatient	MISOPROSTOL HEMORRHAGE 1000 MCG RE CAPS	99999-1461-5	A9270	\$21.70	\$21.48	\$21.48	\$20.03	\$21.27
Inpatient/Outpatient	OSELTAMIVIR PHOSPHATE 30 MG PO CAPS	0004-0802-85	A9270	\$62.96	\$61.70	\$62.33	\$58.11	\$61.70
Inpatient/Outpatient	OSELTAMIVIR PHOSPHATE 30 MG PO CAPS	47781-468-13	A9270	\$11.72	\$11.49	\$11.60	\$10.82	\$11.49
Inpatient/Outpatient	OSELTAMIVIR PHOSPHATE 30 MG PO CAPS	70710-1008-2	A9270	\$15.09	\$15.77	\$15.93	\$14.85	\$15.77
Inpatient/Outpatient	OSELTAMIVIR PHOSPHATE 30 MG PO CAPS	63739-038-07	A9270	\$28.11	\$27.55	\$27.83	\$25.95	\$27.55
Inpatient/Outpatient	OSELTAMIVIR PHOSPHATE 30 MG PO CAPS	16714-817-01	A9270	\$5.19	\$5.09	\$5.14	\$4.79	\$5.09
Inpatient/Outpatient	OSELTAMIVIR PHOSPHATE 30 MG PO CAPS	72205-042-11	A9270	\$3.35	\$3.28	\$3.32	\$3.09	\$3.28
Inpatient/Outpatient	OSELTAMIVIR PHOSPHATE 30 MG PO CAPS	64380-797-01	A9270	\$4.52	\$4.43	\$4.47	\$4.17	\$4.43
Inpatient/Outpatient	OSELTAMIVIR PHOSPHATE 30 MG PO CAPS	68180-675-11	A9270	\$18.09	\$17.73	\$17.91	\$16.70	\$17.73
Inpatient/Outpatient	FLUOROURACIL 2.5 GM/50ML IV SOLN	63323-117-58	J9190	\$1.08	\$1.06	\$1.07	\$1.00	\$1.06
Inpatient/Outpatient	FLUOROURACIL 2.5 GM/50ML IV SOLN	0703-3018-11	J9190	\$1.89	\$1.85	\$1.87	\$1.74	\$1.85
Inpatient/Outpatient	FLUOROURACIL 2.5 GM/50ML IV SOLN	16729-276-11	J9190	\$2.67	\$2.62	\$2.64	\$2.46	\$2.62
Inpatient/Outpatient	IDARUCIZUMAB 2.5 GM/50ML IV SOLN	0597-0197-05		\$170.10	\$166.70	\$168.40	\$157.00	\$166.70
Inpatient/Outpatient	STERILE WATER FOR IRRIGATION IR SOLN	0338-0004-05		\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	DOCETAXEL 160 MG/8ML IV CONC	16729-267-65	J9171	\$66.88	\$65.54	\$66.21	\$61.73	\$65.54
Inpatient/Outpatient	RITUXIMAB-PVVR 100 MG/10ML IV SOLN	0069-0238-01	Q5119	\$418.04	\$409.68	\$413.86	\$385.85	\$409.68
Inpatient/Outpatient	EPOETIN ALFA 20000 UNIT/ML SYRINGE	59676-320-04	J0885	\$954.70	\$935.61	\$945.15	\$881.19	\$935.61
Inpatient/Outpatient	EPOETIN ALFA 20000 UNIT/ML SYRINGE	59676-320-00	J0885	\$677.00	\$663.46	\$670.23	\$624.87	\$663.46
Inpatient/Outpatient	TRIAMCINOLONE ACETONIDE 10 MG/ML IJ SUSP	0003-0494-20	J3301	\$10.94	\$10.72	\$10.83	\$10.10	\$10.72
Inpatient/Outpatient	CEFOTAXIME SODIUM 500 MG IJ SOLR	0143-9930-10	J0698	\$6.77	\$6.63	\$6.70	\$6.25	\$6.63
Inpatient/Outpatient	CEFOTAXIME SODIUM 500 MG IJ SOLR	0143-9930-90	J0698	\$4.04	\$3.96	\$4.00	\$3.73	\$3.96
Inpatient/Outpatient	BIVALIRUDIN 250 MG BOLUS INJECTION (IR/CATH)	0781-3158-94	J0583	\$355.07	\$347.97	\$351.52	\$327.73	\$347.97
Inpatient/Outpatient	RALTEGRAVIR POTASSIUM 400 MG - TAKE HOME PACK	0006-0227-61		\$143.12	\$140.26	\$141.69	\$132.10	\$140.26
Inpatient/Outpatient	PROGESTERONE 200 MG PO CAPS	17478-767-10	A9270	\$4.90	\$4.80	\$4.85	\$4.52	\$4.80
Inpatient/Outpatient	ANTIHEMOPHILIC FACTOR VIII IV SOLR (WRAP) - HEMOPHILIA A	63833-617-02	J7187	\$4.54	\$4.45	\$4.49	\$4.19	\$4.45
Inpatient/Outpatient	ANTIHEMOPHILIC FACTOR VIII IV SOLR (WRAP) - HEMOPHILIA A	63833-615-02	J7187	\$4.54	\$4.45	\$4.49	\$4.19	\$4.45
Inpatient/Outpatient	ANTIHEMOPHILIC FACTOR VIII IV SOLR (WRAP) - HEMOPHILIA A	63833-616-02	J7187	\$4.54	\$4.45	\$4.49	\$4.19	\$4.45
Inpatient/Outpatient	NICARDIPINE HCL 20 MG PO CAPS	42806-501-09	A9270	\$56.06	\$54.94	\$55.50	\$51.74	\$54.94
Inpatient/Outpatient	NICARDIPINE HCL 20 MG PO CAPS	62559-205-90	A9270	\$45.28	\$44.37	\$44.83	\$41.79	\$44.37
Inpatient/Outpatient	HYDROMORPHONE HCL 4 MG PO TABS	42858-302-25	A9270	\$0.67	\$0.66	\$0.66	\$0.62	\$0.66
Inpatient/Outpatient	HYDROMORPHONE HCL 4 MG PO TABS	63739-791-10	A9270	\$0.54	\$0.53	\$0.53	\$0.50	\$0.53
Inpatient/Outpatient	HYDROMORPHONE HCL 4 MG PO TABS	0406-3244-01	A9270	\$0.34	\$0.33	\$0.34	\$0.31	\$0.33
Inpatient/Outpatient	MORPHINE 1 MG/ML BOLUS FROM INFUSION	61553-179-48	J2270	\$3.47	\$3.40	\$3.44	\$3.20	\$3.40
Inpatient/Outpatient	ETOPOSIDE 500 MG/25ML IV SOLN	0703-5656-91	J9181	\$4.83	\$4.73	\$4.78	\$4.46	\$4.73
Inpatient/Outpatient	ETOPOSIDE 500 MG/25ML IV SOLN	0703-5656-01	J9181	\$6.87	\$6.73	\$6.80	\$6.34	\$6.73
Inpatient/Outpatient	CALCIUM GLUCONATE IVPB 2 G IN NS 100 ML PREMIX	44567-621-01	J0610	\$0.82	\$0.80	\$0.81	\$0.76	\$0.80
Inpatient/Outpatient	METHOTREXATE SODIUM (PF) 1 GM/40ML IJ SOLN	66758-041-01	J9260	\$5.46	\$5.35	\$5.41	\$5.04	\$5.35
Inpatient/Outpatient	METHOTREXATE SODIUM (PF) 1 GM/40ML IJ SOLN	0703-3678-81	J9260	\$2.00	\$1.96	\$1.98	\$1.85	\$1.96
Inpatient/Outpatient	METHOTREXATE SODIUM (PF) 1 GM/40ML IJ SOLN	0703-3678-01	J9260	\$2.00	\$1.96	\$1.98	\$1.85	\$1.96
Inpatient/Outpatient	METHOTREXATE SODIUM (PF) 1 GM/40ML IJ SOLN	67457-480-40	J9260	\$1.35	\$1.32	\$1.34	\$1.25	\$1.32
Inpatient/Outpatient	METHOTREXATE SODIUM (PF) 1 GM/40ML IJ SOLN	16729-277-35	J9260	\$1.86	\$1.82	\$1.84	\$1.72	\$1.82
Inpatient/Outpatient	MORPHINE 5 MG/ML BOLUS FROM INFUSION	99999-602-50		\$1.51	\$1.48	\$1.49	\$1.39	\$1.48
Inpatient/Outpatient	TOCILIZUMAB 80 MG/4ML IV SOLN	50242-135-01	J3262	\$381.35	\$373.72	\$377.54	\$351.99	\$373.72
Inpatient/Outpatient	MORPHINE SULFATE (PF) 2 MG/ML IV SOLN (NICU)(DOSES => 0.2 MG)	0409-1890-01	J2274	\$6.78	\$6.64	\$6.71	\$6.26	\$6.64
Inpatient/Outpatient	VENELEX EX OINT	58980-780-21	A9150	\$1.70	\$1.67	\$1.68	\$1.57	\$1.67
Inpatient/Outpatient	VENELEX EX OINT	75834-139-60	A9150	\$2.18	\$2.14	\$2.16	\$2.01	\$2.14
Inpatient/Outpatient	VENELEX EX OINT	99999-780-01	A9150	\$1.70	\$1.67	\$1.68	\$1.57	\$1.67
Inpatient/Outpatient	HYDROMORPHONE 1 MG/ML BOLUS FROM INFUSION	99999-110-30		\$121.50	\$119.07	\$120.29	\$112.14	\$119.07
Inpatient/Outpatient	AMINO ACID (TROPAMINE) 10 % IV SOLN	0264-9341-55		\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	AMINO ACID (TROPAMINE) 10 % IV SOLN	0264-1933-10		\$0.38	\$0.37	\$0.38	\$0.35	\$0.37
Inpatient/Outpatient	PEGFILGRASIM 6 MG/0.6ML SQ (REPLACEMENT FOR ONPRO MALFUNCTIONS)	55513-190-01	J2506	\$11,202.70	\$10,978.65	\$11,090.67	\$10,340.09	\$10,978.65
Inpatient/Outpatient	TACROLIMUS 1 MG/ML PO SUSP	99999-657-60	J7507	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	POTASSIUM CHLORIDE IVPB 20 MEQ/50ML PREMIX	0338-0703-41	J3480	\$0.26	\$0.25	\$0.26	\$0.24	\$0.25
Inpatient/Outpatient	POTASSIUM CHLORIDE IVPB 20 MEQ/50ML PREMIX	14789-107-05	J3480	\$2.15	\$2.11	\$2.13	\$1.98	\$2.11

Inpatient/Outpatient	EMTRICITABINE-TENOFOVIR DF 200-300 MG - TAKE HOME PACK	61958-0701-1	\$289.50	\$283.71	\$286.61	\$267.21	\$283.71
Inpatient/Outpatient	EMTRICITABINE-TENOFOVIR DF 200-300 MG - TAKE HOME PACK	0093-7704-56	\$4.07	\$3.99	\$4.03	\$3.76	\$3.99
Inpatient/Outpatient	SODIUM ZIRCONIUM CYCLOSILICATE 10 G PO PACK	0310-1110-30 A9270	\$86.91	\$85.17	\$86.04	\$80.22	\$85.17
Inpatient/Outpatient	SODIUM ZIRCONIUM CYCLOSILICATE 10 G PO PACK	0310-1110-01 A9270	\$86.91	\$85.17	\$86.04	\$80.22	\$85.17
Inpatient/Outpatient	CISATRACURIUM BESYLATE 20 MG/10ML IV SOLN	0781-3152-95	\$9.31	\$9.12	\$9.22	\$8.59	\$9.12
Inpatient/Outpatient	CISATRACURIUM BESYLATE 20 MG/10ML IV SOLN	63323-417-10	\$7.49	\$7.34	\$7.42	\$6.91	\$7.34
Inpatient/Outpatient	MYCOPHENOLATE SODIUM 180 MG PO TBEC	68084-907-11 A9270	\$16.26	\$15.93	\$16.10	\$15.01	\$15.93
Inpatient/Outpatient	MYCOPHENOLATE SODIUM 180 MG PO TBEC	68084-907-21 A9270	\$13.55	\$13.28	\$13.41	\$12.51	\$13.28
Inpatient/Outpatient	MYCOPHENOLATE SODIUM 180 MG PO TBEC	0078-0385-66 A9270	\$25.84	\$25.32	\$25.58	\$23.85	\$25.32
Inpatient/Outpatient	MYCOPHENOLATE SODIUM 180 MG PO TBEC	60505-2965-7 A9270	\$2.10	\$2.06	\$2.08	\$1.94	\$2.06
Inpatient/Outpatient	MORPHINE SULFATE (PF) 0.5 MG/ML IJ SOLN	0409-3814-12 J2270	\$2.80	\$2.74	\$2.77	\$2.58	\$2.74
Inpatient/Outpatient	MORPHINE SULFATE (PF) 0.5 MG/ML IJ SOLN	0409-3814-11 J2270	\$2.79	\$2.73	\$2.76	\$2.58	\$2.73
Inpatient/Outpatient	MORPHINE SULFATE (PF) 0.5 MG/ML IJ SOLN	0641-6020-01 J2270	\$12.44	\$12.19	\$12.32	\$11.48	\$12.19
Inpatient/Outpatient	METHOTREXATE SODIUM 250 MG/10ML IJ SOLN	63323-123-10 J9250	\$4.33	\$4.24	\$4.29	\$4.00	\$4.24
Inpatient/Outpatient	NALTREXONE 380 MG IM SUSR	65757-300-01 J2315	\$2,814.30	\$2,786.01	\$2,786.16	\$2,597.60	\$2,758.01
Inpatient/Outpatient	PATIROMER SORBITEX CALCIUM 8.4 G PO PACK	53436-084-01 A9270	\$144.59	\$141.70	\$143.14	\$133.46	\$141.70
Inpatient/Outpatient	PATIROMER SORBITEX CALCIUM 8.4 G PO PACK	53436-084-04 A9270	\$184.16	\$180.48	\$182.32	\$169.98	\$180.48
Inpatient/Outpatient	PATIROMER SORBITEX CALCIUM 8.4 G PO PACK	53436-084-30 A9270	\$137.82	\$135.06	\$136.44	\$127.21	\$135.06
Inpatient/Outpatient	CALCITONIN (SALMON) 200 UNIT/ML IJ SOLN	54766-149-23 J0630	\$2,340.58	\$2,293.77	\$2,317.17	\$2,160.36	\$2,293.77
Inpatient/Outpatient	CALCITONIN (SALMON) 200 UNIT/ML IJ SOLN	67457-675-02 J0630	\$2,116.93	\$2,074.59	\$2,095.76	\$1,953.93	\$2,074.59
Inpatient/Outpatient	CALCITONIN (SALMON) 200 UNIT/ML IJ SOLN	24201-400-02 J0630	\$3,364.10	\$3,296.82	\$3,330.46	\$3,105.06	\$3,296.82
Inpatient/Outpatient	CALCITONIN (SALMON) 200 UNIT/ML IJ SOLN	42023-205-01 J0630	\$1,959.74	\$1,920.55	\$1,940.14	\$1,808.84	\$1,920.55
Inpatient/Outpatient	CLOBAZAM 20 MG PO TABS	16714-888-01	\$2.05	\$2.01	\$2.03	\$1.89	\$2.01
Inpatient/Outpatient	CUPRIC CHLORIDE 0.04 MG/ML IV SOLN (CAPS NICU DILUTION)	99999-4092-1	\$9.25	\$9.07	\$9.16	\$8.54	\$9.07
Inpatient/Outpatient	ANTIHEMOPHILIC FACTOR VIII (XYNTHA) IV SOLR (WRAP)	58394-012-01 J7185	\$7.73	\$7.58	\$7.65	\$7.13	\$7.58
Inpatient/Outpatient	ANTIHEMOPHILIC FACTOR VIII (XYNTHA) IV SOLR (WRAP)	58394-015-01 J7185	\$7.73	\$7.58	\$7.65	\$7.13	\$7.58
Inpatient/Outpatient	OCTREOTIDE ACETATE 10 MG IM KIT	0078-0646-81 J2353	\$4,949.79	\$4,850.79	\$4,900.29	\$4,568.66	\$4,850.79
Inpatient/Outpatient	OCTREOTIDE ACETATE 10 MG IM KIT	0078-0811-81 J2353	\$6,408.03	\$6,279.87	\$6,343.95	\$5,914.61	\$6,279.87
Inpatient/Outpatient	ARGININE HCL (DIAGNOSTIC) 10 % IV SOLN	0009-0436-01 J3490	\$0.61	\$0.60	\$0.60	\$0.56	\$0.60
Inpatient/Outpatient	MANGANESE SULFATE 0.01 MG/ML IV SOLN (CAPS NICU DILUTION)	99999-6410-1	\$11.18	\$10.96	\$11.07	\$10.32	\$10.96
Inpatient/Outpatient	DEXAMETHASONE 6 MG PO TABS	0054-8183-25 J8540	\$6.83	\$6.69	\$6.76	\$6.30	\$6.69
Inpatient/Outpatient	DEXAMETHASONE 6 MG PO TABS	0054-4186-25 J8540	\$6.49	\$6.36	\$6.43	\$5.99	\$6.36
Inpatient/Outpatient	DEXAMETHASONE 6 MG PO TABS	60219-2044-1 J8540	\$5.99	\$5.87	\$5.93	\$5.53	\$5.87
Inpatient/Outpatient	DANTROLENE SODIUM 250 MG IV SUSR	42367-540-32 J3490	\$5,986.51	\$5,866.78	\$5,926.64	\$5,525.55	\$5,866.78
Inpatient/Outpatient	PERMETHRIN 1 % EX LIQD	63736-12002 A9270	\$0.65	\$0.64	\$0.64	\$0.60	\$0.64
Inpatient/Outpatient	PERMETHRIN 1 % EX LIQD	63736-12003 A9270	\$0.49	\$0.48	\$0.49	\$0.45	\$0.48
Inpatient/Outpatient	PERMETHRIN 5 % EX CREA	0472-0242-60 A9270	\$1.39	\$1.36	\$1.38	\$1.28	\$1.36
Inpatient/Outpatient	PERMETHRIN 5 % EX CREA	40085-215-60 A9270	\$3.99	\$3.91	\$3.95	\$3.68	\$3.91
Inpatient/Outpatient	PERMETHRIN 5 % EX CREA	16714-897-01 A9270	\$1.62	\$1.59	\$1.60	\$1.50	\$1.59
Inpatient/Outpatient	PERMETHRIN 5 % EX CREA	45802-269-37 A9270	\$1.49	\$1.46	\$1.48	\$1.38	\$1.46
Inpatient/Outpatient	DOCETAXEL (NON-ALCOHOL) 20 MG/ML IV SOLN	42367-121-21 J9171	\$189.35	\$185.56	\$187.46	\$174.77	\$185.56
Inpatient/Outpatient	DOCETAXEL (NON-ALCOHOL) 80 MG/4ML IV SOLN	42367-121-25 J9171	\$189.34	\$185.55	\$187.45	\$174.76	\$185.55
Inpatient/Outpatient	DOCETAXEL (NON-ALCOHOL) 160 MG/8ML IV SOLN	42367-121-29 J9171	\$189.34	\$185.55	\$187.45	\$174.76	\$185.55
Inpatient/Outpatient	THEOPHYLLINE ER 100 MG PO CP24	52244-100-10	\$13.19	\$12.93	\$13.06	\$12.17	\$12.93
Inpatient/Outpatient	FERROUS GLUCONATE 324 (37.5 FE) MG PO TABS	0904-2137-61 A9150	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	FERROUS GLUCONATE 324 (37.5 FE) MG PO TABS	54629-645-01 A9150	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	FERROUS GLUCONATE 324 (37.5 FE) MG PO TABS	20555-01900 A9150	\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	ORA-SWEET SF PO SYRP	0574-0302-16 A9270	\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	ORA-SWEET SF PO SYRP	0574-0304-16 A9270	\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	LACTULOSE 10 GM/15ML RE SOLN (WRAP)	0121-0577-32 A9270	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	LACTULOSE 10 GM/15ML RE SOLN (WRAP)	60432-037-32 A9270	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	LACTULOSE 10 GM/15ML RE SOLN (WRAP)	0603-1378-59 A9270	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	LACTULOSE 10 GM/15ML RE SOLN (WRAP)	50383-795-16 A9270	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	LACTULOSE 10 GM/15ML RE SOLN (WRAP)	45963-438-64 A9270	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	LACTULOSE 10 GM/15ML RE SOLN (WRAP)	0121-0577-16 A9270	\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	LACTULOSE 10 GM/15ML RE SOLN (WRAP)	13668-574-10 A9270	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	CALCIUM ACETATE (PHOS BINDER) 667 MG/5ML PO SOLN	49230-643-31	\$1.63	\$1.60	\$1.61	\$1.50	\$1.60
Inpatient/Outpatient	MORPHINE PCA 1 MG/ML - STANDARD TOLERANT	0409-2029-02 J2274	\$1.21	\$1.19	\$1.20	\$1.12	\$1.19
Inpatient/Outpatient	SUGAMMADEX SODIUM 200 MG/2ML IV SOLN	0006-5423-02	\$218.84	\$214.46	\$216.65	\$201.99	\$214.46
Inpatient/Outpatient	SUGAMMADEX SODIUM 200 MG/2ML IV SOLN	0006-5423-12	\$261.04	\$255.82	\$258.43	\$240.94	\$255.82
Inpatient/Outpatient	SUGAMMADEX SODIUM 500 MG/5ML IV SOLN	0006-5423-15	\$157.13	\$153.99	\$155.56	\$145.03	\$153.99
Inpatient/Outpatient	SUGAMMADEX SODIUM 500 MG/5ML IV SOLN	0006-5423-05	\$160.33	\$157.12	\$158.73	\$147.98	\$157.12
Inpatient/Outpatient	SUGAMMADEX SODIUM 500 MG/5ML IV SOLN	0006-5425-15	\$191.24	\$187.42	\$189.33	\$176.51	\$187.42
Inpatient/Outpatient	SUGAMMADEX SODIUM 500 MG/5ML IV SOLN	0006-5425-05	\$173.60	\$170.13	\$171.86	\$160.23	\$170.13
Inpatient/Outpatient	THEOPHYLLINE ER 200 MG PO CP24	52244-200-10	\$16.23	\$15.91	\$16.07	\$14.98	\$15.91
Inpatient/Outpatient	POTASSIUM BICARBONATE-CITRIC ACID 20 MEQ PO TBEC	51801-011-30 A9270	\$2.26	\$2.21	\$2.24	\$2.09	\$2.21
Inpatient/Outpatient	POTASSIUM BICARBONATE-CITRIC ACID 20 MEQ PO TBEC	51801-011-01 A9270	\$2.26	\$2.21	\$2.24	\$2.09	\$2.21
Inpatient/Outpatient	CEFTAZIDIME-AVIBACTAM 2.5 (2-0.5) G IV SOLR	0456-2700-01 J0714	\$966.90	\$947.56	\$957.23	\$892.45	\$947.56

Inpatient/Outpatient	CEFTAZIDIME-AVIBACTAM 2.5 (2-0.5) G IV SOLR	0456-2700-10	J0714	\$1,138.18	\$1,115.42	\$1,126.80	\$1,050.54	\$1,115.42
Inpatient/Outpatient	HYDROCORTISONE 2.5 % EX CREA	0168-0080-31	A9150	\$0.29	\$0.28	\$0.29	\$0.27	\$0.28
Inpatient/Outpatient	HYDROCORTISONE 2.5 % EX CREA	0472-0337-30	A9150	\$0.41	\$0.40	\$0.41	\$0.38	\$0.40
Inpatient/Outpatient	HYDROCORTISONE 2.5 % EX CREA	0603-7781-78	A9150	\$0.32	\$0.31	\$0.32	\$0.30	\$0.31
Inpatient/Outpatient	HYDROCORTISONE 2.5 % EX CREA	45802-004-03	A9150	\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	HYDROCORTISONE 2.5 % EX CREA	0472-0337-20	A9150	\$0.47	\$0.46	\$0.47	\$0.43	\$0.46
Inpatient/Outpatient	HYDROCORTISONE 1 % EX CREA	0168-0154-08	A9150	\$0.76	\$0.74	\$0.75	\$0.70	\$0.74
Inpatient/Outpatient	HYDROCORTISONE 1 % EX CREA	0168-0015-31	A9150	\$0.43	\$0.42	\$0.43	\$0.40	\$0.42
Inpatient/Outpatient	HYDROCORTISONE 1 % EX CREA	0472-0321-26	A9150	\$0.40	\$0.39	\$0.40	\$0.37	\$0.39
Inpatient/Outpatient	HYDROCORTISONE 1 % EX CREA	45802-438-03	A9150	\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	SELEGILINE HCL 5 MG PO CAPS	60505-0055-1	A9270	\$6.17	\$6.05	\$6.11	\$5.69	\$6.05
Inpatient/Outpatient	SELEGILINE HCL 5 MG PO CAPS	67253-700-06	A9270	\$3.45	\$3.38	\$3.42	\$3.18	\$3.38
Inpatient/Outpatient	SELEGILINE HCL 5 MG PO CAPS	70954-504-10	A9270	\$6.10	\$5.98	\$6.04	\$5.63	\$5.98
Inpatient/Outpatient	SELEGILINE HCL 5 MG PO CAPS	16571-659-06	A9270	\$2.14	\$2.10	\$2.12	\$1.98	\$2.10
Inpatient/Outpatient	HYDROMORPHONE HCL PF 500 MG/50ML IJ SOLN	0703-0018-01	J1170	\$5.43	\$5.32	\$5.38	\$5.01	\$5.32
Inpatient/Outpatient	HYDROMORPHONE HCL PF 500 MG/50ML IJ SOLN	0409-2634-50	J1170	\$8.59	\$8.42	\$8.50	\$7.93	\$8.42
Inpatient/Outpatient	HYDROMORPHONE HCL PF 50 MG/5ML IJ SOLN	59011-445-05	J1170	\$19.96	\$19.56	\$19.76	\$18.42	\$19.56
Inpatient/Outpatient	HYDROMORPHONE HCL PF 50 MG/5ML IJ SOLN	0703-0113-01	J1170	\$6.46	\$6.33	\$6.40	\$5.96	\$6.33
Inpatient/Outpatient	HYDROMORPHONE HCL PF 50 MG/5ML IJ SOLN	0409-2634-25	J1170	\$6.92	\$6.78	\$6.85	\$6.39	\$6.78
Inpatient/Outpatient	ANTIHEMOPHILIC FACTOR VIII IV SOLR (WRAP) - VON WILLEBRAND	63833-617-02	J7187	\$4.54	\$4.45	\$4.49	\$4.19	\$4.45
Inpatient/Outpatient	ANTIHEMOPHILIC FACTOR VIII IV SOLR (WRAP) - VON WILLEBRAND	63833-615-02	J7187	\$4.54	\$4.45	\$4.49	\$4.19	\$4.45
Inpatient/Outpatient	ANTIHEMOPHILIC FACTOR VIII IV SOLR (WRAP) - VON WILLEBRAND	63833-616-02	J7187	\$4.54	\$4.45	\$4.49	\$4.19	\$4.45
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IN NEBU	0378-6985-01		\$0.57	\$0.56	\$0.56	\$0.53	\$0.56
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IN NEBU	0487-9301-02		\$0.35	\$0.34	\$0.35	\$0.32	\$0.34
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IN NEBU	76204-300-03		\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	TRICHLOROACETIC ACID 80 % EX LIQD	10481-3008-1		\$18.16	\$17.80	\$17.98	\$16.76	\$17.80
Inpatient/Outpatient	IMMUNE GLOBULIN (GAMUNEX-C) 40 GM/400ML IJ SOLN	13533-800-41	J1561	\$35.18	\$34.48	\$34.83	\$32.47	\$34.48
Inpatient/Outpatient	BUPRENORPHINE HCL-NALOXONE HCL 1.4-0.36 MG SL SUBL	54123-914-30	A9270	\$21.33	\$20.90	\$21.12	\$19.69	\$20.90
Inpatient/Outpatient	BUPRENORPHINE HCL-NALOXONE HCL 5.7-1.4 MG SL SUBL	54123-957-30	A9270	\$42.69	\$41.84	\$42.26	\$39.40	\$41.84
Inpatient/Outpatient	BUPRENORPHINE HCL-NALOXONE HCL 2.9-0.71 MG SL SUBL	54123-929-30	A9270	\$42.69	\$41.84	\$42.26	\$39.40	\$41.84
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 1000 UNIT/ML - DIALYSIS	0409-2720-03	J1644	\$0.61	\$0.60	\$0.60	\$0.56	\$0.60
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 1000 UNIT/ML - DIALYSIS	25021-400-01	J1644	\$4.11	\$4.03	\$4.07	\$3.79	\$4.03
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 1000 UNIT/ML - DIALYSIS	63323-540-01	J1644	\$8.32	\$8.15	\$8.24	\$7.68	\$8.15
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 1000 UNIT/ML - DIALYSIS	63323-540-11	J1644	\$1.48	\$1.45	\$1.47	\$1.37	\$1.45
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 1000 UNIT/ML - DIALYSIS	63323-540-31	J1644	\$0.96	\$0.94	\$0.95	\$0.89	\$0.94
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 5000 UNIT/ML - DIALYSIS	0069-0059-04	J1644	\$6.15	\$6.03	\$6.09	\$5.68	\$6.03
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 5000 UNIT/ML - DIALYSIS	0409-2723-01	J1644	\$4.25	\$4.17	\$4.21	\$3.92	\$4.17
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 5000 UNIT/ML - DIALYSIS	0641-0400-12	J1644	\$11.60	\$11.37	\$11.48	\$10.71	\$11.37
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 5000 UNIT/ML - DIALYSIS	25021-402-01	J1644	\$12.64	\$12.39	\$12.51	\$11.67	\$12.39
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 5000 UNIT/ML - DIALYSIS	25021-402-66	J1644	\$5.90	\$5.78	\$5.84	\$5.45	\$5.78
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 5000 UNIT/ML - DIALYSIS	63323-047-10	J1644	\$3.65	\$3.58	\$3.61	\$3.37	\$3.58
Inpatient/Outpatient	HEPARIN SODIUM (PORCINE) 5000 UNIT/ML - DIALYSIS	63323-262-01	J1644	\$7.37	\$7.22	\$7.30	\$6.80	\$7.22
Inpatient/Outpatient	INFLIXIMAB-DYIB 100 MG IV SOLR	0069-0809-01	Q5103	\$1,771.15	\$1,735.73	\$1,753.44	\$1,634.77	\$1,735.73
Inpatient/Outpatient	BENZOCAINE 7.5 % MT GEL	10310-03313		\$1.57	\$1.54	\$1.55	\$1.45	\$1.54
Inpatient/Outpatient	TRANEXAMIC ACID 1000 MG IN NS 100 ML IRRIGATION POUR BOTTLE	99999-960-10		\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	SACUBITRIL-VALSARTAN 24-26 MG PO TABS	0078-0659-35	A9270	\$34.52	\$33.83	\$34.17	\$31.86	\$33.83
Inpatient/Outpatient	SACUBITRIL-VALSARTAN 24-26 MG PO TABS	0078-0659-61	A9270	\$30.76	\$30.14	\$30.45	\$28.39	\$30.14
Inpatient/Outpatient	SACUBITRIL-VALSARTAN 24-26 MG PO TABS	0078-0659-20	A9270	\$47.48	\$46.53	\$47.01	\$43.82	\$46.53
Inpatient/Outpatient	SACUBITRIL-VALSARTAN 49-51 MG PO TABS	0078-0777-35	A9270	\$34.52	\$33.83	\$34.17	\$31.86	\$33.83
Inpatient/Outpatient	SACUBITRIL-VALSARTAN 49-51 MG PO TABS	0078-0777-61	A9270	\$30.76	\$30.14	\$30.45	\$28.39	\$30.14
Inpatient/Outpatient	SACUBITRIL-VALSARTAN 49-51 MG PO TABS	0078-0777-20	A9270	\$47.48	\$46.53	\$47.01	\$43.82	\$46.53
Inpatient/Outpatient	SACUBITRIL-VALSARTAN 49-51 MG PO TABS	0078-0777-67	A9270	\$47.48	\$46.53	\$47.01	\$43.82	\$46.53
Inpatient/Outpatient	SACUBITRIL-VALSARTAN 97-103 MG PO TABS	0078-0696-35	A9270	\$34.52	\$33.83	\$34.17	\$31.86	\$33.83
Inpatient/Outpatient	SACUBITRIL-VALSARTAN 97-103 MG PO TABS	0078-0696-61	A9270	\$30.76	\$30.14	\$30.45	\$28.39	\$30.14
Inpatient/Outpatient	SACUBITRIL-VALSARTAN 97-103 MG PO TABS	0078-0696-20	A9270	\$47.48	\$46.53	\$47.01	\$43.82	\$46.53
Inpatient/Outpatient	VARICELLA-ZOSTER IMMUNE GLOB 125 UNIT/1.2ML IM SOLN	53270-0126-2	90396	\$2,086.22	\$2,044.50	\$2,065.36	\$1,925.58	\$2,044.50
Inpatient/Outpatient	LACTOBACILLUS ACIDOPHILUS (FLORANEX) PO PACK	71351-013-12	A9150	\$4.29	\$4.20	\$4.25	\$3.96	\$4.20
Inpatient/Outpatient	LACTOBACILLUS ACIDOPHILUS (FLORANEX) PO PACK	71351-013-99	A9150	\$7.49	\$7.34	\$7.42	\$6.91	\$7.34
Inpatient/Outpatient	LACTOBACILLUS ACIDOPHILUS (FLORANEX) PO PACK	64980-146-98	A9150	\$7.80	\$7.64	\$7.72	\$7.20	\$7.64
Inpatient/Outpatient	LACTOBACILLUS ACIDOPHILUS (FLORANEX) PO PACK	64980-146-12	A9150	\$7.80	\$7.64	\$7.72	\$7.20	\$7.64
Inpatient/Outpatient	BUPIVACAINE HCL 0.25 % IJ SOLN	0409-1160-01		\$0.19	\$0.19	\$0.19	\$0.18	\$0.19
Inpatient/Outpatient	MIDAZOLAM HCL 5 MG/ML IJ SOLN (WRAP)	63323-412-25	J2250	\$13.90	\$13.62	\$13.76	\$12.83	\$13.62
Inpatient/Outpatient	MIDAZOLAM HCL 5 MG/ML IJ SOLN (WRAP)	63323-412-03	J2250	\$12.81	\$12.55	\$12.68	\$11.82	\$12.55
Inpatient/Outpatient	MIDAZOLAM HCL 5 MG/ML IJ SOLN (WRAP)	0409-2308-01	J2250	\$3.80	\$3.72	\$3.76	\$3.51	\$3.72
Inpatient/Outpatient	MIDAZOLAM HCL 5 MG/ML IJ SOLN (WRAP)	0641-6061-01	J2250	\$2.67	\$2.62	\$2.64	\$2.46	\$2.62
Inpatient/Outpatient	MIDAZOLAM HCL 5 MG/ML IJ SOLN (WRAP)	0409-2308-02	J2250	\$2.19	\$2.18	\$2.19	\$2.02	\$2.15
Inpatient/Outpatient	MIDAZOLAM HCL 5 MG/ML IJ SOLN (WRAP)	0409-2308-22	J2250	\$2.20	\$2.16	\$2.18	\$2.03	\$2.16
Inpatient/Outpatient	MIDAZOLAM HCL 5 MG/ML IJ SOLN (WRAP)	63323-412-18	J2250	\$12.94	\$12.68	\$12.81	\$11.94	\$12.68

Inpatient/Outpatient	POTASSIUM CHLORIDE IVPB 10 MEQ/50ML PREMIX	0338-0705-41	J3480	\$0.24	\$0.24	\$0.24	\$0.22	\$0.24
Inpatient/Outpatient	LORAZEPAM 0.5 MG PO TABS	0904-6007-61	A9270	\$0.27	\$0.26	\$0.27	\$0.25	\$0.26
Inpatient/Outpatient	LORAZEPAM 0.5 MG PO TABS	0591-0240-01	A9270	\$0.08	\$0.08	\$0.08	\$0.07	\$0.08
Inpatient/Outpatient	LORAZEPAM 0.5 MG PO TABS	69315-904-01	A9270	\$0.36	\$0.35	\$0.36	\$0.33	\$0.35
Inpatient/Outpatient	LORAZEPAM 0.5 MG PO TABS	13107-083-01	A9270	\$0.17	\$0.17	\$0.17	\$0.16	\$0.17
Inpatient/Outpatient	POTASSIUM PHOSPHATES 150 MMOLE/50ML IV SOLN	63323-086-50		\$3.56	\$3.49	\$3.52	\$3.29	\$3.49
Inpatient/Outpatient	METHYLENE BLUE 50 MG/10ML IV SOLN	0517-0374-01	Q9968	\$121.50	\$119.07	\$120.29	\$112.14	\$119.07
Inpatient/Outpatient	METHYLENE BLUE 50 MG/10ML IV SOLN	0517-0374-05	Q9968	\$111.30	\$109.07	\$110.19	\$102.73	\$109.07
Inpatient/Outpatient	OXYCODONE HCL 100 MG/5ML PO CONC	43386-920-60	A9270	\$18.14	\$17.78	\$17.96	\$16.74	\$17.78
Inpatient/Outpatient	OXYCODONE HCL 100 MG/5ML PO CONC	66689-025-30	A9270	\$4.83	\$4.73	\$4.78	\$4.46	\$4.73
Inpatient/Outpatient	OXYCODONE HCL 100 MG/5ML PO CONC	68094-801-01	A9270	\$14.25	\$13.97	\$14.11	\$13.15	\$13.97
Inpatient/Outpatient	OXYCODONE HCL 100 MG/5ML PO CONC	99999-801-01	A9270	\$14.25	\$13.97	\$14.11	\$13.15	\$13.97
Inpatient/Outpatient	HYDROMORPHONE PCA 1 MG/ML - CONSERVATIVE NAIVE	99999-510-30	J1170	\$39.59	\$38.80	\$39.19	\$36.54	\$38.80
Inpatient/Outpatient	HYDROMORPHONE PCA 1 MG/ML - CONSERVATIVE NAIVE	61553-710-68	J1170	\$2.80	\$2.74	\$2.77	\$2.58	\$2.74
Inpatient/Outpatient	MORPHINE PCA 5 MG/ML	0409-6028-04	J2274	\$1.51	\$1.48	\$1.49	\$1.39	\$1.48
Inpatient/Outpatient	MORPHINE PCA 5 MG/ML	99999-602-50	J2274	\$1.51	\$1.48	\$1.49	\$1.39	\$1.48
Inpatient/Outpatient	MORPHINE PCA 1 MG/ML (PEDS)	0409-2029-02	J2274	\$1.21	\$1.19	\$1.20	\$1.12	\$1.19
Inpatient/Outpatient	HYDROMORPHONE PCA 1 MG/ML (PEDS)	61553-710-68	J1170	\$2.80	\$2.74	\$2.77	\$2.58	\$2.74
Inpatient/Outpatient	HYDROMORPHONE PCA 1 MG/ML (PEDS)	99999-510-30	J1170	\$39.59	\$38.80	\$39.19	\$36.54	\$38.80
Inpatient/Outpatient	HYDROMORPHONE PCA 1 MG/ML (PEDS)	61553-510-69	J1170	\$105.95	\$103.83	\$104.89	\$97.79	\$103.83
Inpatient/Outpatient	HYDROMORPHONE HCL PF 10 MG/ML IJ SOLN FOR PCA 5 MG/ML	0409-2634-50	J1170	\$8.59	\$8.42	\$8.50	\$7.93	\$8.42
Inpatient/Outpatient	HYDROMORPHONE HCL PF 10 MG/ML IJ SOLN FOR PCA 5 MG/ML	0703-0018-01	J1170	\$5.43	\$5.32	\$5.38	\$5.01	\$5.32
Inpatient/Outpatient	HYDROMORPHONE HCL PF 10 MG/ML IJ SOLN FOR PCA 5 MG/ML	0703-0113-01	J1170	\$6.46	\$6.33	\$6.40	\$5.96	\$6.33
Inpatient/Outpatient	HYDROMORPHONE HCL PF 10 MG/ML IJ SOLN FOR PCA 5 MG/ML	59011-445-05	J1170	\$19.96	\$19.56	\$19.76	\$18.42	\$19.56
Inpatient/Outpatient	MORPHINE 1 MG/ML BOLUS DOSE BY PCA	0409-2029-02		\$1.21	\$1.19	\$1.20	\$1.12	\$1.19
Inpatient/Outpatient	HYDROMORPHONE 1 MG/ML BOLUS DOSE BY PCA	99999-510-30		\$39.59	\$38.80	\$39.19	\$36.54	\$38.80
Inpatient/Outpatient	MORPHINE 5 MG/ML BOLUS DOSE BY PCA	0409-6028-04		\$1.51	\$1.48	\$1.49	\$1.39	\$1.48
Inpatient/Outpatient	MORPHINE 5 MG/ML BOLUS DOSE BY PCA	99999-602-50		\$1.51	\$1.48	\$1.49	\$1.39	\$1.48
Inpatient/Outpatient	PRENATAL MULTI +DHA 27-0.8-228 MG PO CAPS	31604-02766	A9270	\$0.97	\$0.95	\$0.96	\$0.90	\$0.95
Inpatient/Outpatient	PRENATAL MULTI +DHA 27-0.8-228 MG PO CAPS	31604-02749	A9270	\$1.17	\$1.15	\$1.16	\$1.08	\$1.15
Inpatient/Outpatient	PRENATAL MULTI +DHA 27-0.8-228 MG PO CAPS	31604-03109	A9270	\$0.68	\$0.67	\$0.67	\$0.63	\$0.67
Inpatient/Outpatient	ATROPINE SULFATE 0.5 MG/5ML IJ SOSY	0409-4910-34	J0461	\$8.63	\$8.46	\$8.54	\$7.97	\$8.46
Inpatient/Outpatient	PORACTANT ALFA 240 MG/3ML TR SUSP	10122-510-03	A9270	\$894.79	\$876.89	\$885.84	\$825.89	\$876.89
Inpatient/Outpatient	SODIUM PHOSPHATES 45 MMOLE/15ML IV SOLN	63323-170-15		\$6.41	\$6.28	\$6.35	\$5.92	\$6.28
Inpatient/Outpatient	SODIUM PHOSPHATES 45 MMOLE/15ML IV SOLN	0409-7391-72		\$4.31	\$4.22	\$4.27	\$3.98	\$4.22
Inpatient/Outpatient	SODIUM PHOSPHATES 45 MMOLE/15ML IV SOLN	0409-7391-82		\$4.39	\$4.30	\$4.35	\$4.05	\$4.30
Inpatient/Outpatient	NALOXONE HCL 4 MG/0.1ML NA LIQD	69547-353-02		\$281.30	\$275.67	\$278.49	\$259.64	\$275.67
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 500 MCG IV SOLR	63323-648-10		\$1,396.84	\$1,368.90	\$1,382.87	\$1,289.28	\$1,368.90
Inpatient/Outpatient	LEVOTHYROXINE SODIUM 500 MCG IV SOLR	42023-203-01		\$1,341.02	\$1,314.20	\$1,327.61	\$1,237.76	\$1,314.20
Inpatient/Outpatient	METHYLENE BLUE 1 % IJ SOLN	17478-504-10	Q9968	\$81.25	\$79.63	\$80.44	\$74.99	\$79.63
Inpatient/Outpatient	METHYLENE BLUE 1 % IJ SOLN	0517-0301-10	Q9968	\$16.18	\$15.86	\$16.02	\$14.93	\$15.86
Inpatient/Outpatient	HYDROCHLOROTHIAZIDE 12.5 MG PO TABS	16729-182-01	A9270	\$0.22	\$0.22	\$0.22	\$0.20	\$0.22
Inpatient/Outpatient	GUANFACINE HCL 1 MG PO TABS	65162-711-10		\$1.86	\$1.82	\$1.84	\$1.72	\$1.82
Inpatient/Outpatient	EPOETIN ALFA-EPBX 20000 UNIT/ML IJ SOLN	0069-1311-10	Q5106	\$628.09	\$615.53	\$621.81	\$579.73	\$615.53
Inpatient/Outpatient	EPOETIN ALFA-EPBX 20000 UNIT/ML IJ SOLN	0069-1311-01	Q5106	\$602.97	\$590.94	\$596.94	\$556.54	\$590.94
Inpatient/Outpatient	TIROFIBAN HCL 3.75 MG/15ML IV CONC	25208-001-04	J3246	\$16.89	\$16.55	\$16.72	\$15.59	\$16.55
Inpatient/Outpatient	TIROFIBAN HCL IN NACL 12.5-0.9 MG/250ML-% IV SOLN	25208-002-02	J3246	\$4.33	\$4.24	\$4.29	\$4.00	\$4.24
Inpatient/Outpatient	TIROFIBAN HCL IN NACL 5-0.9 MG/100ML-% IV SOLN	25208-002-03	J3246	\$11.23	\$11.01	\$11.12	\$10.37	\$11.01
Inpatient/Outpatient	FIDAXOMICIN 200 MG PO TABS	52015-080-01	A9270	\$347.97	\$341.01	\$344.49	\$321.18	\$341.01
Inpatient/Outpatient	HALOPERIDOL DECANOATE 100 MG/ML IM SOLN	63323-471-01	J1631	\$132.97	\$130.31	\$131.64	\$122.73	\$130.31
Inpatient/Outpatient	HALOPERIDOL DECANOATE 100 MG/ML IM SOLN	63323-471-41	J1631	\$132.82	\$130.16	\$131.49	\$122.59	\$130.16
Inpatient/Outpatient	HALOPERIDOL DECANOATE 100 MG/ML IM SOLN	0143-9295-01	J1631	\$93.75	\$91.88	\$92.81	\$86.53	\$91.88
Inpatient/Outpatient	HALOPERIDOL DECANOATE 100 MG/ML IM SOLN	70069-383-01	J1631	\$111.73	\$109.50	\$110.61	\$103.13	\$109.50
Inpatient/Outpatient	K PHOS MONO-SOD PHOS DI & MONO 155-852-130 MG PO TABS	64980-104-01		\$1.20	\$1.18	\$1.19	\$1.11	\$1.18
Inpatient/Outpatient	K PHOS MONO-SOD PHOS DI & MONO 155-852-130 MG PO TABS	69543-268-10		\$1.53	\$1.50	\$1.51	\$1.41	\$1.50
Inpatient/Outpatient	ANTIINHIBITOR COAGULANT COMPLEX (FEIBA) IV SOLR (WRAP)	64193-424-02	J7198	\$8.89	\$8.71	\$8.80	\$8.21	\$8.71
Inpatient/Outpatient	ANTIINHIBITOR COAGULANT COMPLEX (FEIBA) IV SOLR (WRAP)	64193-425-02	J7198	\$8.89	\$8.71	\$8.80	\$8.21	\$8.71
Inpatient/Outpatient	BRIMONIDINE TARTRATE 0.2 % OP SOLN	61314-143-05		\$1.54	\$1.51	\$1.52	\$1.42	\$1.51
Inpatient/Outpatient	BRIMONIDINE TARTRATE 0.2 % OP SOLN	17478-715-10		\$14.29	\$14.00	\$14.15	\$13.19	\$14.00
Inpatient/Outpatient	BRIMONIDINE TARTRATE 0.2 % OP SOLN	24208-411-05		\$12.41	\$12.16	\$12.29	\$11.45	\$12.16
Inpatient/Outpatient	BRIMONIDINE TARTRATE 0.2 % OP SOLN	70069-231-01		\$1.90	\$1.86	\$1.88	\$1.75	\$1.86
Inpatient/Outpatient	BRIMONIDINE TARTRATE 0.2 % OP SOLN	61314-143-10		\$1.22	\$1.20	\$1.21	\$1.13	\$1.20
Inpatient/Outpatient	INFLUENZA VIRUS VACCINE QUADRIVALENT PF (FLUCELVAX) IM SUSP (SEQ)	70461-322-04	90674	\$195.66	\$191.75	\$193.70	\$180.59	\$191.75
Inpatient/Outpatient	INFLUENZA VIRUS VACCINE QUADRIVALENT PF (FLUCELVAX) IM SUSP (SEQ)	70461-322-03	90674	\$195.66	\$191.75	\$193.70	\$180.59	\$191.75
Inpatient/Outpatient	COAGULATION FACTOR VIIA RECOMB 2 MG IV SOLR	0169-7202-01	J7189	\$8,174.50	\$8,011.01	\$8,092.76	\$7,545.06	\$8,011.01
Inpatient/Outpatient	INSULIN LISPRO 100 UNIT/ML FOR PUMP BASAL	99999-4098-0	J1817	\$21.78	\$21.56	\$21.56	\$20.10	\$21.34
Inpatient/Outpatient	INSULIN LISPRO 100 UNIT/ML FOR PUMP BASAL	0002-7510-17	J1815	\$23.41	\$22.94	\$23.18	\$21.61	\$22.94
Inpatient/Outpatient	INSULIN ASPART NOVOLOG FOR PUMP BASAL	99999-089-65	A9270	\$26.16	\$25.64	\$25.90	\$24.15	\$25.64

Inpatient/Outpatient	INSULIN ASPART NOVOLOG FOR PUMP BASAL	0169-7501-11	A9270		\$21.73	\$21.30	\$21.51	\$20.06	\$21.30
Inpatient/Outpatient	INSULIN GLULISINE APIDRA FOR PUMP BOLUS	0088-2500-33	J1817		\$51.38	\$50.35	\$50.87	\$47.42	\$50.35
Inpatient/Outpatient	FENTANYL CITRATE 50 MCG/ML IJ SOLN (WRAP PCA)	0641-6030-01	J3010		\$1.52	\$1.49	\$1.50	\$1.40	\$1.49
Inpatient/Outpatient	FENTANYL CITRATE 50 MCG/ML IJ SOLN (WRAP PCA)	0409-9094-41	J3010		\$0.41	\$0.40	\$0.41	\$0.38	\$0.40
Inpatient/Outpatient	FENTANYL CITRATE 50 MCG/ML IJ SOLN (WRAP PCA)	0409-9094-61	J3010		\$0.82	\$0.80	\$0.81	\$0.76	\$0.80
Inpatient/Outpatient	HYDROMORPHONE PCA 1 MG/ML - STANDARD TOLERANT	99999-510-30	J1170		\$39.59	\$38.80	\$39.19	\$36.54	\$38.80
Inpatient/Outpatient	HYDROMORPHONE PCA 1 MG/ML - STANDARD TOLERANT	61553-710-68	J1170		\$2.80	\$2.74	\$2.77	\$2.58	\$2.74
Inpatient/Outpatient	CEFOXITIN SODIUM-DEXTROSE 1-4 GM-%(50ML) IV SOLR	0264-3123-11	J0694		\$57.39	\$56.24	\$56.82	\$52.97	\$56.24
Inpatient/Outpatient	PIPERACILLIN-TAZOBACTAM IN DEX 3-0.375 GM/50ML IV SOLN	0206-8861-02	J2543		\$0.96	\$0.94	\$0.95	\$0.89	\$0.94
Inpatient/Outpatient	PIPERACILLIN-TAZOBACTAM IN DEX 3-0.375 GM/50ML IV SOLN	0206-8861-01	J2543		\$0.96	\$0.94	\$0.95	\$0.89	\$0.94
Inpatient/Outpatient	CEFTRIAXONE SODIUM-DEXTROSE 1-3.74 GM-%(50ML) IV SOLR	0264-3153-11	J0696		\$84.16	\$82.48	\$83.32	\$77.68	\$82.48
Inpatient/Outpatient	CEFEPIME-DEXTROSE 2-5 GM-%(50ML) IV SOLR	0264-3195-11	J0692		\$127.64	\$125.09	\$126.36	\$117.81	\$125.09
Inpatient/Outpatient	CEFTRIAXONE SODIUM-DEXTROSE 2-2.22 GM-%(50ML) IV SOLR	0264-3155-11	J0696		\$110.15	\$107.95	\$109.05	\$101.67	\$107.95
Inpatient/Outpatient	NALOXONE HCL 4 MG/0.1ML NASAL LIQUID	0781-7176-06			\$137.81	\$135.05	\$136.43	\$127.20	\$135.05
Inpatient/Outpatient	NALOXONE HCL 4 MG/0.1ML NASAL LIQUID	69547-353-02			\$281.30	\$275.67	\$278.49	\$259.64	\$275.67
Inpatient/Outpatient	CALCIPOTRIENE 0.005 % EX OINT	68462-310-65	A9150		\$15.89	\$15.57	\$15.73	\$14.67	\$15.57
Inpatient/Outpatient	CALCIPOTRIENE 0.005 % EX OINT	66993-878-61	A9150		\$8.97	\$8.79	\$8.88	\$8.28	\$8.79
Inpatient/Outpatient	POTASSIUM CHLORIDE IVPB 10 MEQ IN NS 100 ML PREMIX	99999-0709-1	J3480		\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	POTASSIUM CHLORIDE IVPB 20 MEQ IN NS 100 ML PREMIX	99999-0705-1	J3480		\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	HEPARIN INFUSION 50 UNITS/ML IN 0.45 % NACL PREMIX	0409-7651-03	J1644		\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	HEPARIN INFUSION 50 UNITS/ML IN 0.45 % NACL PREMIX	63323-518-77	J1644		\$0.04	\$0.04	\$0.04	\$0.04	\$0.04
Inpatient/Outpatient	HEPARIN INFUSION 50 UNITS/ML IN 0.45 % NACL PREMIX	0409-7651-13	J1644		\$0.04	\$0.04	\$0.04	\$0.04	\$0.04
Inpatient/Outpatient	HEPARIN INFUSION 50 UNITS/ML IN 0.45 % NACL PREMIX	63323-518-01	J1644		\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	PIPERACILLIN-TAZOBACTAM IN DEX 2-0.25 GM/50ML IV SOLN	0206-8860-02	J2543		\$0.73	\$0.72	\$0.72	\$0.67	\$0.72
Inpatient/Outpatient	CEFEPIME 2 G IN 20 ML IV SYRINGE	99999-0220-2	J0692		\$1.73	\$1.70	\$1.71	\$1.60	\$1.70
Inpatient/Outpatient	CEFEPIME 1 G IN 10 ML IV SYRINGE	99999-0219-1	J0692		\$1.92	\$1.88	\$1.90	\$1.77	\$1.88
Inpatient/Outpatient	CEFAZOLIN SODIUM-DEXTROSE 2-4 GM/100ML-% IV SOLN	0338-3508-41	J0690		\$0.56	\$0.55	\$0.55	\$0.52	\$0.55
Inpatient/Outpatient	CEFOXITIN 1 G IN 10 ML IV SYRINGE	99999-0341-1	J0694		\$1.25	\$1.23	\$1.24	\$1.15	\$1.23
Inpatient/Outpatient	CEFOXITIN 2 G IN 20 ML IV SYRINGE	99999-0342-2	J0694		\$1.31	\$1.28	\$1.30	\$1.21	\$1.28
Inpatient/Outpatient	NALBUPHINE HCL 20 MG/ML IJ SOLN	0409-1465-01			\$24.61	\$24.12	\$24.36	\$22.72	\$24.12
Inpatient/Outpatient	NALBUPHINE HCL 20 MG/ML IJ SOLN	0409-1465-71			\$24.51	\$24.02	\$24.26	\$22.62	\$24.02
Inpatient/Outpatient	CEFTRIAXONE 1 G IN 10 ML IV SYRINGE	99999-3208-1	J0696		\$0.61	\$0.60	\$0.60	\$0.56	\$0.60
Inpatient/Outpatient	CEFTRIAXONE 2 G IN 20 ML IV SYRINGE	99999-3209-2	J0696		\$1.09	\$1.07	\$1.08	\$1.01	\$1.07
Inpatient/Outpatient	AZTREONAM IV SYRINGE 1 G IN 10 ML	99999-2560-1	J3490		\$12.21	\$11.97	\$12.09	\$11.27	\$11.97
Inpatient/Outpatient	AZTREONAM IV SYRINGE 2 G IN 20 ML	99999-2570-2	J3490		\$13.09	\$12.83	\$12.96	\$12.08	\$12.83
Inpatient/Outpatient	PIPERACILLIN-TAZOBACTAM IN DEX 4-0.5 GM/100ML IV SOLN	0206-8862-02	J2543		\$0.60	\$0.59	\$0.59	\$0.55	\$0.59
Inpatient/Outpatient	CEFAZOLIN 1 G IN 10 ML IV SYRINGE	99999-0805-1	J0690		\$0.46	\$0.45	\$0.46	\$0.42	\$0.45
Inpatient/Outpatient	CEFAZOLIN 2 G IN 20 ML IV SYRINGE	99999-0806-2	J0690		\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	TRACE MINERALS CR-CU-MN-SE-ZN 4-400-100-20 MCG/ML IV SOLN	0517-8510-25			\$5.96	\$5.84	\$5.90	\$5.50	\$5.84
Inpatient/Outpatient	PHENYLEPHRINE HCL 1 MG/10 ML IV SOSY (WRAP)	99999-263-10	J2370		\$2.51	\$2.46	\$2.48	\$2.32	\$2.46
Inpatient/Outpatient	PHENYLEPHRINE HCL 1 MG/10 ML IV SOSY (WRAP)	71286-6009-1	J2370		\$2.38	\$2.33	\$2.36	\$2.20	\$2.33
Inpatient/Outpatient	PHENYLEPHRINE HCL 1 MG/10 ML IV SOSY (WRAP)	69623-236-16	J2370		\$4.86	\$4.76	\$4.81	\$4.49	\$4.76
Inpatient/Outpatient	PHENYLEPHRINE HCL 1 MG/10 ML IV SOSY (WRAP)	33216-773-79	J2370		\$2.08	\$2.04	\$2.06	\$1.92	\$2.04
Inpatient/Outpatient	PHENYLEPHRINE HCL 1 MG/10 ML IV SOSY (WRAP)	62295-3322-7	J2370		\$4.86	\$4.76	\$4.81	\$4.49	\$4.76
Inpatient/Outpatient	PHENYLEPHRINE HCL 1 MG/10 ML IV SOSY (WRAP)	71449-001-15	J2370		\$1.82	\$1.78	\$1.80	\$1.68	\$1.78
Inpatient/Outpatient	PHENYLEPHRINE HCL 1 MG/10 ML IV SOSY (WRAP)	69374-957-10	J2370		\$2.43	\$2.38	\$2.41	\$2.24	\$2.38
Inpatient/Outpatient	PHENYLEPHRINE HCL 1 MG/10 ML IV SOSY (WRAP)	70092-1046-46	J2370		\$2.60	\$2.55	\$2.57	\$2.40	\$2.55
Inpatient/Outpatient	OXYTOCIN INFUSION 30 UNITS IN NS 500 ML PREMIX	99999-0116-3	J2590		\$0.04	\$0.04	\$0.04	\$0.04	\$0.04
Inpatient/Outpatient	OXYTOCIN INFUSION 30 UNITS IN NS 500 ML PREMIX	71019-253-01	J2590		\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	OXYTOCIN INFUSION 30 UNITS IN NS 500 ML PREMIX POST DELIVERY	99999-0116-3	J2590		\$0.04	\$0.04	\$0.04	\$0.04	\$0.04
Inpatient/Outpatient	OXYTOCIN INFUSION 30 UNITS IN NS 500 ML PREMIX POST DELIVERY	71019-253-01	J2590		\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	AMIKACIN FOR INHALATION 250 MG/ML	99999-9040-2	J0278		\$14.03	\$13.75	\$13.89	\$12.95	\$13.75
Inpatient/Outpatient	DILTIAZEM HCL 50 MG/10ML IV SOLN	17478-817-10	J3490		\$11.44	\$11.21	\$11.33	\$10.56	\$11.21
Inpatient/Outpatient	DILTIAZEM HCL 50 MG/10ML IV SOLN	0641-6014-01	J3490		\$1.93	\$1.89	\$1.91	\$1.78	\$1.89
Inpatient/Outpatient	DILTIAZEM HCL 50 MG/10ML IV SOLN	0409-1171-12	J3490		\$1.39	\$1.36	\$1.38	\$1.28	\$1.36
Inpatient/Outpatient	DILTIAZEM HCL 50 MG/10ML IV SOLN	17478-937-10	J3490		\$1.14	\$1.12	\$1.13	\$1.05	\$1.12
Inpatient/Outpatient	HEPATITIS B IMMUNE GLOBULIN 110 UNIT/0.5ML IM SOSY	13533-636-03		90371	\$526.57	\$516.04	\$521.30	\$486.02	\$516.04
Inpatient/Outpatient	SEVELAMER CARBONATE 800 MG PO TABS	55111-789-27	A9270		\$1.01	\$0.99	\$1.00	\$0.93	\$0.99
Inpatient/Outpatient	SEVELAMER CARBONATE 800 MG PO TABS	65862-921-27	A9270		\$1.25	\$1.23	\$1.24	\$1.15	\$1.23
Inpatient/Outpatient	SEVELAMER CARBONATE 800 MG PO TABS	0955-1050-27	A9270		\$7.54	\$7.39	\$7.46	\$6.96	\$7.39
Inpatient/Outpatient	SEVELAMER CARBONATE 800 MG PO TABS	65162-058-27	A9270		\$1.42	\$1.39	\$1.41	\$1.31	\$1.39
Inpatient/Outpatient	SEVELAMER CARBONATE 800 MG PO TABS	16714-814-01	A9270		\$1.63	\$1.60	\$1.61	\$1.50	\$1.60
Inpatient/Outpatient	DOLUTEGRAVIR SODIUM 50 MG - TAKE HOME PACK	49702-228-13			\$316.07	\$309.75	\$312.91	\$291.73	\$309.75
Inpatient/Outpatient	SUFENTANIL CITRATE 250 MCG/5ML IV SOLN	17478-050-05	J3490		\$8.58	\$8.41	\$8.49	\$7.92	\$8.41
Inpatient/Outpatient	MORPHINE SULFATE 5 MG RE SUPP	0574-7110-12			\$18.05	\$17.69	\$17.87	\$16.66	\$17.69
Inpatient/Outpatient	HYDROMORPHONE HCL 1 MG/ML PO LIQD	0054-0386-63			\$0.80	\$0.78	\$0.79	\$0.74	\$0.78
Inpatient/Outpatient	HYDROMORPHONE HCL 1 MG/ML PO LIQD	60687-566-40			\$6.33	\$6.20	\$6.27	\$5.84	\$6.20
Inpatient/Outpatient	MAGNESIUM SULFATE IVPB 1 G IN D5W 100 ML PREMIX	0409-6727-23	J3475		\$0.33	\$0.32	\$0.33	\$0.30	\$0.32

Inpatient/Outpatient	MAGNESIUM SULFATE IVPB 1 G IN D5W 100 ML PREMIX	63323-108-01	J3475		\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	MAGNESIUM SULFATE IVPB 1 G IN D5W 100 ML PREMIX	63323-108-26	J3475		\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	MAGNESIUM SULFATE IVPB 1 G IN D5W 100 ML PREMIX	63323-108-00	J3475		\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	MAGNESIUM SULFATE IVPB 1 G IN D5W 100 ML PREMIX	63323-108-02	J3475		\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	TICAGRELOR 60 MG PO TABS	0186-0776-60	A9270		\$32.06	\$31.42	\$31.74	\$29.59	\$31.42
Inpatient/Outpatient	EPHEDRINE SULFATE 50 MG/ML IV SOLN	42023-216-25			\$54.28	\$53.19	\$53.74	\$50.10	\$53.19
Inpatient/Outpatient	EPHEDRINE SULFATE 50 MG/ML IV SOLN	76014-005-25			\$103.92	\$101.84	\$102.88	\$95.92	\$101.84
Inpatient/Outpatient	EPHEDRINE SULFATE 50 MG/ML IV SOLN	0781-3269-95			\$43.20	\$42.34	\$42.77	\$39.87	\$42.34
Inpatient/Outpatient	EPHEDRINE SULFATE 50 MG/ML IV SOLN	0781-3269-71			\$103.09	\$101.03	\$102.06	\$95.15	\$101.03
Inpatient/Outpatient	EPHEDRINE SULFATE 50 MG/ML IV SOLN	17478-415-10			\$59.64	\$58.45	\$59.04	\$55.05	\$58.45
Inpatient/Outpatient	EPHEDRINE SULFATE 50 MG/ML IV SOLN	42023-216-01			\$101.57	\$99.54	\$100.55	\$93.75	\$99.54
Inpatient/Outpatient	EPHEDRINE SULFATE 50 MG/ML IV SOLN	17478-415-01			\$59.60	\$58.41	\$59.00	\$55.01	\$58.41
Inpatient/Outpatient	EPHEDRINE SULFATE 50 MG/ML IV SOLN	42023-216-89			\$57.93	\$56.77	\$57.35	\$53.47	\$56.77
Inpatient/Outpatient	EPHEDRINE SULFATE 50 MG/ML IV SOLN	76014-005-30			\$104.47	\$102.38	\$103.43	\$96.43	\$102.38
Inpatient/Outpatient	EPHEDRINE SULFATE 50 MG/ML IV SOLN	65219-257-00			\$42.97	\$42.11	\$42.54	\$39.66	\$42.11
Inpatient/Outpatient	EPHEDRINE SULFATE 50 MG/ML IV SOLN	0641-6238-01			\$45.23	\$44.33	\$44.78	\$41.75	\$44.33
Inpatient/Outpatient	EPHEDRINE SULFATE 50 MG/ML IV SOLN	51754-4200-1			\$42.52	\$41.67	\$42.09	\$39.25	\$41.67
Inpatient/Outpatient	EPHEDRINE SULFATE 50 MG/ML IV SOLN	43598-725-11			\$35.82	\$35.10	\$35.46	\$33.06	\$35.10
Inpatient/Outpatient	EPHEDRINE SULFATE 50 MG/ML IV SOLN	16714-037-25			\$33.23	\$32.57	\$32.90	\$30.67	\$32.57
Inpatient/Outpatient	CALCITRIOL 1 MCG/ML PO SOLN	63304-241-59	J0636		\$21.87	\$21.43	\$21.65	\$20.19	\$21.43
Inpatient/Outpatient	CALCITRIOL 1 MCG/ML PO SOLN	0054-3120-41	J0636		\$27.44	\$26.89	\$27.17	\$25.33	\$26.89
Inpatient/Outpatient	CALCITRIOL 1 MCG/ML PO SOLN	64980-447-15	J0636		\$23.06	\$22.60	\$22.83	\$21.28	\$22.60
Inpatient/Outpatient	ATRACURIUM BESYLATE 50 MG/5ML IV SOLN	71288-701-05			\$4.60	\$4.51	\$4.55	\$4.25	\$4.51
Inpatient/Outpatient	ATRACURIUM BESYLATE 50 MG/5ML IV SOLN	0409-1109-11			\$4.89	\$4.79	\$4.84	\$4.51	\$4.79
Inpatient/Outpatient	ATRACURIUM BESYLATE 50 MG/5ML IV SOLN	25021-659-05			\$7.78	\$7.62	\$7.70	\$7.18	\$7.62
Inpatient/Outpatient	DEXTROSE 50 % IV SOLN - INFUSION	0409-4902-34			\$0.98	\$0.96	\$0.97	\$0.90	\$0.96
Inpatient/Outpatient	DEXTROSE 50 % IV SOLN - INFUSION	0409-6648-02			\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	DEXTROSE 50 % IV SOLN - INFUSION	0409-7936-19			\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	DEXTROSE 50 % IV SOLN - INFUSION	99999-793-25			\$0.12	\$0.12	\$0.12	\$0.11	\$0.12
Inpatient/Outpatient	PHENOBARBITAL SODIUM 130 MG/ML IJ SOLN	0641-0477-25			\$239.04	\$234.26	\$236.65	\$220.63	\$234.26
Inpatient/Outpatient	PHENOBARBITAL SODIUM 130 MG/ML IJ SOLN	42494-416-25			\$189.59	\$185.80	\$187.69	\$174.99	\$185.80
Inpatient/Outpatient	PHENOBARBITAL SODIUM 130 MG/ML IJ SOLN	0641-0477-21			\$239.04	\$234.26	\$236.65	\$220.63	\$234.26
Inpatient/Outpatient	GELATIN ABSORBABLE 50 EX MISC	0009-0323-01			\$92.57	\$90.72	\$91.64	\$85.44	\$90.72
Inpatient/Outpatient	RABIES IMMUNE GLOBULIN 300 UNIT/ML IJ SOLN	13533-318-01		90375	\$2,542.60	\$2,491.75	\$2,517.17	\$2,346.82	\$2,491.75
Inpatient/Outpatient	RABIES IMMUNE GLOBULIN 300 UNIT/ML IJ SOLN	13533-318-10		90375	\$1,595.06	\$1,563.16	\$1,579.11	\$1,472.24	\$1,563.16
Inpatient/Outpatient	RABIES IMMUNE GLOBULIN 1500 UNIT/5ML IJ SOLN	13533-318-05		90375	\$1,596.64	\$1,564.71	\$1,580.67	\$1,473.70	\$1,564.71
Inpatient/Outpatient	RABIES IMMUNE GLOBULIN 1500 UNIT/5ML IJ SOLN	13533-318-50		90375	\$1,569.47	\$1,538.08	\$1,553.78	\$1,448.62	\$1,538.08
Inpatient/Outpatient	PROTHROMBIN COMPLEX CONC HUMAN IV SOLR (WRAP)	63833-387-02	J7168		\$8.61	\$8.44	\$8.52	\$7.95	\$8.44
Inpatient/Outpatient	PROTHROMBIN COMPLEX CONC HUMAN IV SOLR (WRAP)	63833-386-02	J7168		\$8.21	\$8.05	\$8.13	\$7.58	\$8.05
Inpatient/Outpatient	LOSARTAN POTASSIUM 100 MG PO TABS	0904-6389-61	A9270		\$1.79	\$1.75	\$1.77	\$1.65	\$1.75
Inpatient/Outpatient	LOSARTAN POTASSIUM 100 MG PO TABS	63739-698-10	A9270		\$1.82	\$1.78	\$1.80	\$1.68	\$1.78
Inpatient/Outpatient	LOSARTAN POTASSIUM 100 MG PO TABS	68084-348-11	A9270		\$1.99	\$1.95	\$1.97	\$1.84	\$1.95
Inpatient/Outpatient	LOSARTAN POTASSIUM 100 MG PO TABS	43547-362-09	A9270		\$1.05	\$1.03	\$1.04	\$0.97	\$1.03
Inpatient/Outpatient	LOSARTAN POTASSIUM 100 MG PO TABS	65862-203-90	A9270		\$0.64	\$0.63	\$0.63	\$0.59	\$0.63
Inpatient/Outpatient	LOSARTAN POTASSIUM 100 MG PO TABS	31722-702-90	A9270		\$0.34	\$0.33	\$0.34	\$0.31	\$0.33
Inpatient/Outpatient	LOSARTAN POTASSIUM 100 MG PO TABS	31722-702-10	A9270		\$0.23	\$0.23	\$0.23	\$0.21	\$0.23
Inpatient/Outpatient	LOSARTAN POTASSIUM 100 MG PO TABS	68180-378-09	A9270		\$0.38	\$0.37	\$0.38	\$0.35	\$0.37
Inpatient/Outpatient	LOSARTAN POTASSIUM 100 MG PO TABS	65862-203-30	A9270		\$0.49	\$0.48	\$0.49	\$0.45	\$0.48
Inpatient/Outpatient	PLASMA-LYTE A IV SOLN	0338-0221-04			\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	PLASMA-LYTE A IV SOLN	0338-0221-03			\$0.04	\$0.04	\$0.04	\$0.04	\$0.04
Inpatient/Outpatient	PLASMA-LYTE A BOLUS	0338-0221-04			\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	PLASMA-LYTE A BOLUS	0338-0221-03			\$0.04	\$0.04	\$0.04	\$0.04	\$0.04
Inpatient/Outpatient	BUMETANIDE 0.25 MG/ML IV SYRINGE (NICU)	0409-1412-10	J3490		\$1.36	\$1.33	\$1.35	\$1.26	\$1.33
Inpatient/Outpatient	BUMETANIDE 0.25 MG/ML IV SYRINGE (NICU)	0641-6008-01	J3490		\$3.01	\$2.95	\$2.98	\$2.78	\$2.95
Inpatient/Outpatient	ATRACURIUM BESYLATE 100 MG/10ML IV SOLN	71288-702-10			\$4.27	\$4.18	\$4.23	\$3.94	\$4.18
Inpatient/Outpatient	ATRACURIUM BESYLATE 100 MG/10ML IV SOLN	25021-672-10			\$7.78	\$7.62	\$7.70	\$7.18	\$7.62
Inpatient/Outpatient	ATRACURIUM BESYLATE 100 MG/10ML IV SOLN	0409-1105-22			\$2.89	\$2.83	\$2.86	\$2.67	\$2.83
Inpatient/Outpatient	FENTANYL INFUSION 10 MCG/ML PREMIX (PEDS)	33216-2823-0	J3010		\$0.63	\$0.62	\$0.62	\$0.58	\$0.62
Inpatient/Outpatient	FENTANYL INFUSION 10 MCG/ML PREMIX (PEDS)	61553-111-48	J3010		\$68.91	\$67.53	\$68.22	\$63.60	\$67.53
Inpatient/Outpatient	MELATONIN 1 MG PO TABS	0536-1114-11	A9270		\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	MELATONIN 1 MG PO TABS	10006-73051	A9270		\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	MELATONIN 1 MG PO TABS	80681-04100	A9270		\$0.06	\$0.06	\$0.06	\$0.06	\$0.06
Inpatient/Outpatient	MELATONIN 2.5 MG/10ML PO LIQD	47469-04408	A9270		\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	MELATONIN 2.5 MG/10ML PO LIQD	47469-07402	A9270		\$0.32	\$0.31	\$0.32	\$0.30	\$0.31
Inpatient/Outpatient	INFLUENZA VAC HIGH-DOSE QUAD 0.7 ML IM SUSY	49281-122-88		90662	\$413.79	\$405.51	\$409.65	\$381.93	\$405.51
Inpatient/Outpatient	INFLUENZA VAC HIGH-DOSE QUAD 0.7 ML IM SUSY	49281-122-65		90662	\$413.79	\$405.51	\$409.65	\$381.93	\$405.51
Inpatient/Outpatient	HYALURONIDASE HUMAN 150 UNIT/ML IJ SOLN	18657-117-01	J3473		\$231.80	\$227.16	\$229.48	\$213.95	\$227.16
Inpatient/Outpatient	HYALURONIDASE HUMAN 150 UNIT/ML IJ SOLN	18657-117-04	J3473		\$232.20	\$227.56	\$229.88	\$214.32	\$227.56

Inpatient/Outpatient	BENZOCAINE 10 % MT GEL	0573-0218-25		\$2.09	\$2.05	\$2.07	\$1.93	\$2.05
Inpatient/Outpatient	PEGFILGRASTIM-JMDB 6 MG/0.6ML SC SOSY	67457-833-06	Q5108	\$6,027.00	\$5,906.46	\$5,966.73	\$5,562.92	\$5,906.46
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN OB	0264-7800-10	J7050	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN OB	0338-0049-01		\$0.04	\$0.04	\$0.04	\$0.04	\$0.04
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN OB	0338-0049-02	J7050	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN OB	0338-0049-03	J7050	\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN OB	0338-0049-04	J7030	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN OB	0338-0049-10	J7050	\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN OB	0338-0049-31	J7050	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN OB	0338-0049-38	J7050	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN OB	0338-0049-41	J7050	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN OB	0338-0049-48	J7050	\$0.08	\$0.08	\$0.08	\$0.07	\$0.08
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN OB	0338-0553-11	J7050	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN OB	0338-0553-18	J7050	\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN OB	0338-9542-01	J7050	\$0.05	\$0.05	\$0.05	\$0.05	\$0.05
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN OB	0338-9543-02	J7050	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN OB	0338-9543-06	J7030	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN OB	0409-7983-02	J7050	\$0.10	\$0.10	\$0.10	\$0.09	\$0.10
Inpatient/Outpatient	SODIUM CHLORIDE 0.9 % IV SOLN OB	0409-7984-23	J7050	\$0.11	\$0.11	\$0.11	\$0.10	\$0.11
Inpatient/Outpatient	SODIUM CHLORIDE 0.9% BOLUS OB	0264-7800-10	J7050	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	SODIUM CHLORIDE 0.9% BOLUS OB	0338-0049-02	J7050	\$0.03	\$0.03	\$0.03	\$0.03	\$0.03
Inpatient/Outpatient	SODIUM CHLORIDE 0.9% BOLUS OB	0338-0049-03	J7050	\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	SODIUM CHLORIDE 0.9% BOLUS OB	0338-0049-04	J7030	\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	SODIUM CHLORIDE 0.9% BOLUS OB	0338-0049-10	J7050	\$0.33	\$0.32	\$0.33	\$0.30	\$0.32
Inpatient/Outpatient	SODIUM CHLORIDE 0.9% BOLUS OB	0338-0049-31	J7050	\$0.13	\$0.13	\$0.13	\$0.12	\$0.13
Inpatient/Outpatient	SODIUM CHLORIDE 0.9% BOLUS OB	0338-0049-38	J7050	\$0.07	\$0.07	\$0.07	\$0.06	\$0.07
Inpatient/Outpatient	SODIUM CHLORIDE 0.9% BOLUS OB	0338-0049-41	J7050	\$0.14	\$0.14	\$0.14	\$0.13	\$0.14
Inpatient/Outpatient	SODIUM CHLORIDE 0.9% BOLUS OB	0338-0049-48	J7050	\$0.08	\$0.08	\$0.08	\$0.07	\$0.08
Inpatient/Outpatient	SODIUM CHLORIDE 0.9% BOLUS OB	0338-0553-11	J7050	\$0.31	\$0.30	\$0.31	\$0.29	\$0.30
Inpatient/Outpatient	SODIUM CHLORIDE 0.9% BOLUS OB	0338-0553-18	J7050	\$0.16	\$0.16	\$0.16	\$0.15	\$0.16
Inpatient/Outpatient	LACTATED RINGERS IV SOLN OB	0338-0117-03		\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	LACTATED RINGERS IV SOLN OB	0338-0117-04		\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	LACTATED RINGERS BOLUS OB	0338-0117-03		\$0.02	\$0.02	\$0.02	\$0.02	\$0.02
Inpatient/Outpatient	LACTATED RINGERS BOLUS OB	0338-0117-04		\$0.01	\$0.01	\$0.01	\$0.01	\$0.01
Inpatient/Outpatient	SODIUM CHLORIDE 3 % IV BOLUS	0338-0054-03		0.03	0.0294	0.0297	0.02769	0.0294
Inpatient/Outpatient	VANCOMYCIN HCL 1000 MG IV SOLR	51991-941-99	J3370	27.09	26.5482	26.8191	25.00407	26.5482
Inpatient/Outpatient	VANCOMYCIN HCL 1000 MG IV SOLR	63323-284-20	J3370	11.31	11.0838	11.1969	10.43913	11.0838
Inpatient/Outpatient	VANCOMYCIN HCL 1000 MG IV SOLR	67457-340-00	J3370	71.98	70.5404	71.2602	66.43754	70.5404
Inpatient/Outpatient	VANCOMYCIN HCL 1000 MG IV SOLR	67457-340-01	J3370	9.95	9.751	9.8505	9.18385	9.751
Inpatient/Outpatient	VANCOMYCIN HCL 1000 MG IV SOLR	70860-105-20	J3370	33.94	33.2612	33.6006	31.32662	33.2612
Inpatient/Outpatient	VANCOMYCIN HCL 1000 MG IV SOLR	55150-204-20	J3370	18.1	17.738	17.919	16.7063	17.738
Inpatient/Outpatient	VANCOMYCIN HCL 1000 MG IV SOLR	0409-6533-01	J3370	72.77	71.3146	72.0423	67.16671	71.3146
Inpatient/Outpatient	VANCOMYCIN HCL 1000 MG IV SOLR	63323-284-41	J3370	14.9	14.602	14.751	13.7527	14.602
Inpatient/Outpatient	VANCOMYCIN HCL 1000 MG IV SOLR	63323-284-01	J3370	11.31	11.0838	11.1969	10.43913	11.0838
Inpatient/Outpatient	VANCOMYCIN HCL 1000 MG IV SOLR	63323-284-42	J3370	9.14	8.9572	9.0486	8.43622	8.9572
Inpatient/Outpatient	ADALIMUMAB 80 MG/0.8ML SC PNKT	0074-0124-74	J0135	9823.73	9627.2554	9725.4927	9067.30279	9627.2554
Inpatient/Outpatient	ADALIMUMAB 80 MG/0.8ML SC PNKT	0074-0124-02	J0135	9823.73	9627.2554	9725.4927	9067.30279	9627.2554
Inpatient/Outpatient	IOHEXOL 240 MG/ML IJ SOLN	0407-1412-10	Q9966	19.77	19.3746	19.5723	18.24771	19.3746
Inpatient/Outpatient	ERLOTINIB HCL 25 MG PO TABS	50242-062-01	A9270	427.48	418.9304	423.2052	394.56404	418.9304
Inpatient/Outpatient	ERLOTINIB HCL 25 MG PO TABS	51991-890-33	A9270	30.86	30.2428	30.5514	28.48378	30.2428
Inpatient/Outpatient	METAPROTERENOL SULFATE 10 MG/5ML PO SYRP	54838-507-80	A9270	0.08	0.0784	0.0792	0.07384	0.0784
Inpatient/Outpatient	TEMZOLOMIDE 100 MG IV SOLR	0085-1381-01	J9328	1605.91	1573.7918	1589.8509	1482.25493	1573.7918
Inpatient/Outpatient	BENZOCAINE-MENTHOL 6-10 MG MT LOZG	78112-01266	A9270	0.74	0.7252	0.7326	0.68302	0.7252
Inpatient/Outpatient	BENZOCAINE-MENTHOL 6-10 MG MT LOZG	0363-0700-08	A9270	0.92	0.9016	0.9108	0.84916	0.9016
Inpatient/Outpatient	CHARCOAL ACTIVATED-SORBITOL PO LIQD (WRAP)	66689-203-08	A9150	0.46	0.4508	0.4554	0.42458	0.4508