

**If you paid for and/or provided reimbursement for some or all of the price of one or more of the Prescription Generic Drugs listed in Appendix A to this Notice at any time from May 1, 2009 until December 31, 2019, you could get a payment from class action settlements.**

*A federal court authorized this Notice. This is not a solicitation from a lawyer.*

PLEASE READ THIS ENTIRE NOTICE CAREFULLY. YOUR RIGHTS MAY BE AFFECTED BY THE PROCEEDINGS IN THIS ACTION WHETHER YOU ACT OR DO NOT ACT. THIS NOTICE ADVISES YOU OF YOUR RIGHTS AND OPTIONS WITH RESPECT TO THIS LITIGATION.

**Para conseguir una notificación en español, llame a 1-877-316-0171 o visite el sitio web:**  
**[www.GenericDrugsEndPayerSettlement.com](http://www.GenericDrugsEndPayerSettlement.com)**

This is to provide notice of the preliminary approval of two proposed settlements in a Lawsuit brought by End-Payers (“End-Payer Plaintiffs” or “EPPs”) of the generic drugs listed in Appendix A at the end of this Notice (the “Named Generic Drugs”). The Lawsuit is a group of class actions coordinated under the civil docket *In re Generic Pharmaceuticals Pricing Antitrust Litigation*, Case No. 2:16-MD-02724 in the United States District Court for the Eastern District of Pennsylvania. The Lawsuit claims that generic drug manufacturers, including the Settling Defendants, violated federal and state antitrust laws, consumer protection statutes, and common law, harming competition and causing the End-Payer Settlement Class – which includes Third-Party Payers (“TPPs”) (*e.g.*, entities such as insurers or employers with self-funded prescription drug plans) – to overpay for the Named Generic Drugs. The Settling Defendants deny liability. The Court has not decided who is right. No trial has been held.

- The Court has preliminarily approved two proposed settlements between the EPPs and the Settling Defendants: (1) a settlement with Heritage Pharmaceuticals Inc. (“Heritage”), Emcure Pharmaceuticals Ltd. (“Emcure”), and Satish Mehta (the “EPP Heritage Settlement” with the “Heritage Defendants”); and (2) a settlement with Apotex Corp. (the “EPP Apotex Settlement” with “Apotex”) (together, the “Settlements”). The proposed settlements do not resolve any of the claims of the Settlement Classes against the remaining Defendants, and the Lawsuit against those Non-Settling Defendants is ongoing.

- The Court has preliminarily certified a settlement class for each Settlement: (1) an EPP Heritage Settlement Class which consists of TPPs; and (2) an EPP Apotex Settlement Class which consists of TPPs and Consumers. Each of the Classes is defined below:

### **The EPP Heritage Settlement Class**

All persons and entities in the United States (except Indiana and Ohio), as well as the District of Columbia and Puerto Rico, that indirectly purchased, paid and/or provided reimbursement for some or all of the purchase price for Defendants' Named Generic Drugs for personal use by their members, and other than for resale, from March 1, 2011 through April 1, 2019.

Excluded from the EPP Heritage Settlement Class are (a) natural person consumers; (b) Defendants, their officers, directors, management, employees, subsidiaries, and affiliates; (c) all federal and state governmental entities except for cities, towns, municipalities and counties with self-funded prescription drug plans; (d) all persons or entities who purchased Defendants' Named Generic Drugs for purposes of resale or directly from Defendants; (e) fully insured health plans; and (f) pharmacy benefit managers.

### **The EPP Apotex Settlement Class**

All persons and entities in each of the 50 United States (except Indiana and Ohio), as well as the District of Columbia, Puerto Rico and the U.S. Virgin Islands, that indirectly purchased, paid and/or provided reimbursement for some or all of the purchase price for any Named Generic Drugs, other than for resale, from May 1, 2009 to December 31, 2019.

Excluded from the EPP Apotex Settlement Class are (a) Defendants, their officers, directors, management, employees, subsidiaries and affiliates; (b) all federal governmental entities; (c) all State Entities identified by the Attorneys General in Appendix B to the Apotex Settlement Agreement; (d) all State Entities of California, Connecticut, Florida, Illinois, Maine, Oregon, Pennsylvania, Washington and Wyoming – except for those States' cities, towns, municipalities, counties and other local governmental entities with self-funded prescription drug plans, all of which are included in the class (note that the exclusion of Illinois' State Entities does not apply to public corporations, including public universities and health systems.) For the avoidance of doubt, the class does not include (i) persons or entities who only purchased Drugs at Issue for purposes of resale or directly from Defendants; (ii) fully insured employers to the extent that they use fully-insured plans (*i.e.*, employers that purchased insurance covering 100% of their reimbursement obligation to members); and (iii) pharmacy benefit managers.

Where a putative class member has purchases that meet the definition of a Settlement Class, but also has purchases that fall within one or more of the exclusions above, that putative class member is included in the Settlement Class only with respect to those purchases that meet the definition of the Settlement Class.

- The proposed Settlements provide that the Heritage Defendants will pay \$10 million, and Apotex will pay \$48 million, for the benefit of TPPs. The Apotex settlement fund may be reduced under certain circumstances as explained in the Apotex Settlement Agreement. As discussed below, the costs of administering the funds and providing notice of the Settlements may be deducted from the funds, and attorneys' fees and expenses may be deducted from the funds with Court approval.
- Money will be distributed if and after the Court approves the Settlements, likely in conjunction with the proceeds of other settlements, upon Court Order and pursuant to a Court-approved plan for allocating the settlement funds to Settlement Class Members (the "Plan of Allocation"). The proposed Plan of Allocation is posted on the website [www.GenericDrugsEndPayerSettlement.com](http://www.GenericDrugsEndPayerSettlement.com) (the "EPP Settlement Website" or "Settlement Website").
- The Apotex Settlement Agreement, in addition to settling claims brought by EPPs, also settles claims brought by certain State Attorneys General (the "State AGs" and the "Apotex State Settlement"). In addition to the \$48 million to be paid for the benefit of TPPs, the Apotex Settlement Agreement provides a State Settlement Fund of \$39.1 million, of which approximately \$17.6 million is to be allocated to Consumers (*i.e.*, natural persons who purchased any of the Named Generic Drugs in a pharmacy or by mail order prescription) who are members of the EPP Apotex Settlement Class. Those consumers will be provided with separate notice regarding the Settlement. This present Notice is directed only to TPPs and describes only the benefits, rights and deadlines for TPP Settlement Class Members. Information on the Apotex State Settlement benefits, rights and deadlines for Consumers is available at [www.AGGenericDrugs.com](http://www.AGGenericDrugs.com). If you are a Consumer who has purchased any of the Named Generic Drugs from May 1, 2009 to December 31, 2019, you should visit both [www.GenericDrugsEndPayerSettlement.com](http://www.GenericDrugsEndPayerSettlement.com) and [www.AGGenericDrugs.com](http://www.AGGenericDrugs.com) to learn about and sign up for updates on other settlements in this litigation that may benefit you and affect your legal rights.
- The Court has scheduled a hearing (the "Final Fairness Hearing") to decide whether to approve the two Settlements, the Plan of Allocation, and any requests by EPPs' attorneys for fees or reimbursement of expenses out of the settlement funds. The Final Fairness Hearing is scheduled for **October 3, 2025, at 11:00 a.m.**, before Judge Cynthia M. Rufe at the United States District Court for the Eastern District of Pennsylvania, Courtroom 12-A, 601 Market Street, Philadelphia, PA 19106.
- You do not need to attend the hearing. If you wish to appear at the hearing, you must file a "Notice of Intention to Appear" with the Court and you may (but are not required to) hire your own attorney to appear in court for you at your own expense. Your Notice must be received by **July 24, 2025**.
- The deadlines in this Notice, and the date and time of the hearing, may be amended by Court Order. Check the Settlement Website for updates. You may also register on the Settlement Website to receive updates by mail or email.

## YOUR LEGAL RIGHTS AND OPTIONS

<p><b>STAY IN THE SETTLEMENT CLASSES</b></p>	<p>You do not need to do anything now to retain your right to stay in the Settlement Classes and/or seek a share of the proposed Settlements.</p> <p>You may register on the Settlement Website for settlement-related updates. Then, if the Court decides to give the proposed Settlements final approval, you will be notified by email or mail when a claim form becomes available. Once a claim form is available, you will be able to obtain it from the Settlement Website or by calling 1-877-316-0171.</p>
<p><b>EXCLUDE YOURSELF FROM THE SETTLEMENT CLASSES</b></p>	<p>You may choose to exclude yourself, or “opt out,” from either or both of the Settlement Classes. If you decide to exclude yourself from a Settlement, you will not be bound by any future decision in this Lawsuit relating to that Settling Defendant. If you choose to exclude yourself from both Settlements, you will not be bound by any future decision in this lawsuit relating to any of the Settling Defendants. This is the only option that allows you to ever be part of any lawsuit (other than this Lawsuit) against the Settling Defendants relating to the legal claims against the Settling Defendants in this case.</p> <p>You will not receive a payment from any Settlement that you elect to exclude yourself from. Details on how to submit a valid request for exclusion are explained below. Requests for exclusion must be <b>postmarked</b> by <b>July 24, 2025</b>.</p>
<p><b>STAY IN THE LAWSUIT BUT OBJECT TO THE SETTLEMENTS</b></p>	<p>If you wish to object to all or any part of one or both of the proposed Settlements, you may write to the Court about why you do not like the proposed Settlement(s). Details on how to submit an objection are explained below. Objections must be <b>received</b> by the Court by <b>July 24, 2025</b>.</p> <p>If you wish to attend and speak at the Final Fairness Hearing about your objection, then you must notify the Court that you wish to attend by filing a Notice of Intention to Appear by <b>July 24, 2025</b> (<i>see</i> instructions below).</p>
<p><b>GET MORE INFORMATION</b></p>	<p>If you would like to obtain more information about the Lawsuit or the Settlements, you can review the materials on <a href="http://www.GenericDrugsEndPayerSettlement.com">www.GenericDrugsEndPayerSettlement.com</a>, call 1-877-316-0171, send questions to the Notice Administrator at <a href="mailto:info@GenericDrugsEndPayerSettlement.com">info@GenericDrugsEndPayerSettlement.com</a>, and/or attend the Final Fairness Hearing.</p>

**THESE RIGHTS AND OPTIONS – AND THE DEADLINES TO EXERCISE THEM – ARE EXPLAINED IN THIS NOTICE.**

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## BASIC INFORMATION

### 1. WHY DID I RECEIVE NOTICE?

A federal court authorized this Notice. You received notice because you may have purchased, paid for, and/or provided reimbursement for some or all of the purchase price of one or more Named Generic Drugs at some time from May 1, 2009 until December 31, 2019, and therefore you may be a member of one or both of the Settlement Classes that were preliminarily certified by the Court. *See* Question 6 for the full class definition and details on who is excluded from the class. You may have received this Notice in error, so you should confirm from your own records that you paid for one or more Named Generic Drugs at some time from May 1, 2009 to December 31, 2019, and fall within one or both of the class definitions.

This Notice is only a summary of the Settlement Agreements and your rights. You are encouraged to carefully review the complete Settlement Agreements, which are posted on the Settlement Website.

### 2. WHAT IS THIS LAWSUIT ABOUT?

The Lawsuit is a group of proposed class actions coordinated under the docket *In re Generic Pharmaceuticals Pricing Antitrust Litigation*, Case No. 2:16-MD-02724. EPPs' class action complaints are available on the Settlement Website. Judge Cynthia M. Rufe, of the United States District Court for the Eastern District of Pennsylvania (the "Court"), is overseeing the Lawsuit and the Settlements.

The EPPs allege that Defendants engaged in an unlawful scheme or schemes to fix, maintain and stabilize prices, rig bids, and engage in market and customer allocation of the Named Generic Drugs in violation of federal and state antitrust laws, consumer protection statutes and common law. EPPs allege that Defendants' conduct harmed competition and caused Settlement Class Members to overpay for the Named Generic Drugs.

All Defendants, including the Settling Defendants, deny that any Settlement Class Member is entitled to damages or other relief. All Defendants, including the Settling Defendants, deny liability as to EPPs' claims. The Settlements between EPPs and the Settling Defendants are not an admission of wrongdoing by any Defendant, including the Settling Defendants.

Following investigation of relevant facts, substantial fact discovery, and arm's-length negotiations with the Settling Defendants, EPPs, on behalf of the Settlement Classes, entered into the Settlements with the Settling Defendants.

There has been no determination by the Court or a jury that the allegations against the Settling Defendants or the other Defendants have been proven or that, if proven, the conduct caused harm to any Settlement Class Members. No trial has been held.

### 3. WHAT IS A CLASS ACTION?

In a class action, one or more people called "Class Representatives" sue on behalf of others who have similar claims.

The EPP Heritage Settlement Class Representatives are 1199SEIU Greater New York Benefit Fund; 1199SEIU Licensed Practical Nurses Welfare Fund; 1199SEIU National Benefit Fund;

1199SEIU National Benefit Fund for Home Care Workers; American Federation of State, County and Municipal Employees District Council 37 Health & Security Plan; American Federation of State, County and Municipal Employees District Council 47 Health & Welfare Fund; City of Providence, Rhode Island; Detectives Endowment Association of the City of New York; Hennepin County; Louisiana Health Service & Indemnity Company d/b/a Blue Cross and Blue Shield of Louisiana; Philadelphia Federation of Teachers Health and Welfare Fund; Self-Insured Schools of California; Sergeants Benevolent Association of the Police Department of the City of New York Health and Welfare Fund; UFCW Local 1500 Welfare Fund; Uniformed Fire Officers Association Family Production Plan Local 854; and United Food & Commercial Workers and Employers Arizona Health & Welfare Trust.

The EPP Apotex Settlement Class Representatives are all of the above-named entities, plus Nina Diamond; Ottis McCrary; Valerie Velardi; and Robby Johnson.

The EPPs and those on whose behalf they have sued together constitute the “Settlement Classes” or “Settlement Class Members.” Their attorneys are called “EPP Settlement Class Counsel.”

In a class action lawsuit, one court resolves the issues for all Class Members, except for those who exclude themselves (*i.e.*, “opt out”) from the Class. The Court, by Orders dated June 26, 2024, and May 14, 2025, has preliminarily determined that the lawsuit between EPPs and the Settling Defendants can proceed as a class action for purposes of determining whether to approve these settlements. A copy of the Court’s Orders may be found on the Settlement Website.

Specifically, the Court has found that, for the purposes of these Settlements:

- The number of Settlement Class Members is so numerous that joining them all into one suit is impracticable;
- Members of the Settlement Classes share common legal or factual issues relating to the claims in this case;
- The claims of EPPs are typical of the claims of Settlement Class Members;
- EPPs and Settlement Class Counsel are capable of fairly and adequately protecting the interests of the Settlement Classes; and
- Common legal questions and facts predominate over questions affecting only individual members of the Settlement Classes, and certification of the Settlement Classes is superior to other available methods for the fair and efficient resolution of the claims of the Settlement Class Members.

#### 4. WHO ARE THE DEFENDANTS IN THIS LAWSUIT?

The Defendants in this lawsuit are:

- Actavis Elizabeth, LLC
- Actavis Holdco U.S., Inc.
- Actavis Pharma Inc.
- Akorn Sales, Inc.
- Akorn, Inc.
- Alvogen, Inc.
- Amneal Pharmaceuticals, Inc.
- Amneal Pharmaceuticals, LLC
- Apotex Corp.
- Ascend Laboratories, LLC
- Aurobindo Pharma USA, Inc.
- Barr Pharmaceuticals, LLC
- Bausch Health Americas, Inc.
- Bausch Health US, LLC
- Breckenridge Pharmaceutical, Inc.
- Camber Pharmaceuticals, Inc.

- Citron Pharma, LLC
- Dava Pharmaceuticals, LLC
- Dr. Reddy's Laboratories, Inc.
- Epic Pharma, LLC
- Fougera Pharmaceuticals Inc.
- G&W Laboratories, Inc.
- Generics Bidco I, LLC
- Glenmark Pharmaceuticals Inc., USA
- Glenmark Pharmaceuticals, Inc.
- Greenstone LLC
- Heritage Pharmaceuticals, Inc.
- Hikma Labs, Inc.
- Hikma Pharmaceuticals USA, Inc.
- Hi-Tech Pharmacal Co., Inc.
- Impax Laboratories, Inc.
- Impax Laboratories, LLC
- Jubilant Cadista Pharmaceuticals Inc.
- Lannett Company, Inc.
- Lupin Pharmaceuticals, Inc.
- Mallinckrodt Inc.
- Mayne Pharma Inc.
- Morton Grove Pharmaceuticals, Inc.
- Mutual Pharmaceutical Company, Inc.
- Mylan Pharmaceuticals, Inc.
- Mylan, Inc.
- Oceanside Pharmaceuticals, Inc.
- Par Pharmaceutical, Inc.
- Perrigo New York Inc.
- Pfizer, Inc.
- Pliva, Inc.
- Sandoz, Inc.
- Sun Pharmaceutical Industries, Inc.
- Taro Pharmaceuticals USA, Inc.
- Teligent, Inc.
- Teva Pharmaceuticals USA, Inc.
- Torrent Pharma Inc.
- Upsher-Smith Laboratories, LLC
- Versapharm Inc.
- West-Ward Columbus, Inc.
- West-Ward Pharmaceuticals Corp.
- Wockhardt USA LLC
- Zydus Pharmaceuticals (USA), Inc.

## 5. WHY ARE THERE SETTLEMENTS?

The Court has not decided in favor of EPPs or Settling Defendants. Instead, both sides have agreed to the Settlements. EPPs and the Settling Defendants were preparing to proceed with the litigation and eventually go to trial, but they have now agreed to the two proposed Settlements. By agreeing to these Settlements, the parties avoid the costs and uncertainty of additional discovery, motion practice, and an eventual trial, and if the Settlements are approved by the Court, Settlement Class Members will be eligible to receive a payment from the Settlements. EPPs and Settlement Class Counsel believe that the proposed Settlements are fair, reasonable, adequate and in the best interests of the Settlement Classes.

## WHO ARE IN THE SETTLEMENT CLASSES AND SETTLEMENTS

### 6. AM I PART OF THE SETTLEMENT CLASSES AND THE SETTLEMENTS?

For settlement purposes only, the Court preliminarily certified the EPP Heritage Settlement Class on June 26, 2024, and the EPP Apotex Settlement Class on May 14, 2025.

You may be a member of the EPP Heritage Settlement Class if:

You are an entity or person in the United States (except Indiana and Ohio), as well as the District of Columbia and Puerto Rico, that indirectly purchased, paid and/or provided reimbursement for some or all of the purchase price for Defendants' Named Generic Drugs for personal use by your members, and other than for resale, from March 1, 2011 through April 1, 2019.

You are **NOT** a member of the EPP Heritage Settlement Class if you are among any of the following:

- a) natural person consumers;
- b) Defendants, their officers, directors, management, employees, subsidiaries, and affiliates;
- c) all federal and state governmental entities except for cities, towns, municipalities and counties with self-funded prescription drug plans;
- d) all persons or entities who purchased Defendants' Named Generic Drugs for purposes of resale or directly from Defendants;
- e) fully insured health plans; or
- f) pharmacy benefit managers.

You may be a member of the EPP Apotex Settlement Class if:

You are in any of the 50 United States (except Indiana and Ohio), as well as the District of Columbia, Puerto Rico, and the U.S. Virgin Islands, and indirectly purchased, paid, and/or provided reimbursement for some or all of the purchase price for any Named Generic Drugs, other than for resale, from May 1, 2009 to December 31, 2019.

You are **NOT** a member of the EPP Apotex Settlement Class if you are among any of the following:

- a) Defendants, their officers, directors, management, employees, subsidiaries and affiliates;
- b) all federal governmental entities;
- c) all State Entities identified by the Attorneys General in Appendix B to the Apotex Settlement Agreement;
- d) all State Entities of California, Connecticut, Florida, Illinois, Maine, Oregon, Pennsylvania, Washington, and Wyoming – except for those States' cities, towns, municipalities, counties and other local governmental entities with self-funded prescription drug plans, all of which are included in the class (note that the exclusion of Illinois State Entities does not apply to public corporations, including public universities and health systems);
- e) all persons or entities who only purchased Defendants' Named Generic Drugs for purposes of resale or directly from Defendants;
- f) fully insured employers to the extent that they use fully-insured plans (*i.e.*, employers that purchased insurance covering 100% of their reimbursement obligation to members); or
- g) pharmacy benefit managers.

If you made payments that meet the definition of the Settlement Class, but also made payments that fall within one or more of the exclusions above, you are included in the Settlement Class only with respect to those payments that meet the definition of the Settlement Class.

The Named Generic Drugs are listed at the end of this Notice in Appendix A.

If you are not sure whether you are included in these Settlement Classes, you may call 1-877-316-0171, review the materials and information posted on the Settlement Website, or contact the

attorney or law firm identified in Question 16 below. If you wish to exclude yourself from one or more of these Settlement Classes, please refer to Question 7.

## 7. CAN I REQUEST TO BE EXCLUDED FROM THE SETTLEMENT CLASSES?

Yes, the Court has set **July 24, 2025**, as the deadline for requests for exclusion. To exclude yourself, you must send a letter via email to [info@GenericDrugsEndPayerSettlement.com](mailto:info@GenericDrugsEndPayerSettlement.com) or via First-Class U.S. Mail to:

*In re: Generic Pharmaceuticals Pricing Antitrust Litigation* – End-Payer Settlements  
c/o A.B. Data, Ltd.  
P.O. Box 173001  
Milwaukee, WI 53217

The letter must include the following:

- (i) The Settlement Class Member’s entity name, postal address, email address, phone number, and Internal Revenue Service Employer Identification Number;
- (ii) The name and title of the representative of the entity requesting exclusion;
- (iii) The name of the case: *In re Generic Pharmaceuticals Pricing Antitrust Litigation*, Case No. 2:16-MD-02724 (E.D. Pa.); and
- (iv) A statement, signed by an authorized representative of the entity, that they are a member of a Settlement Class or Classes and wish to be excluded from one or both of the Settlement Classes. **If you wish to be excluded from only one of the Settlement Classes, you must identify which one. If you do not identify the Settlement Class, then your request for exclusion will be interpreted as requesting an exclusion from both Settlement Classes.**

In addition,

- If you are a self-insured entity that seeks exclusion for its prescription drug plan(s) (or health plan(s) with prescription drug benefits), you must state the name(s) of the plan(s) with specificity.
- If you are an entity that seeks to exclude any claims that were assigned to you by another entity, you must submit documentation showing the assignment and your authority to exclude those claims.
- If you are an entity seeking to exclude another entity, *e.g.*, an insurer seeking to exclude its Administrative Services Only (“ASO”) customers, you must identify with specificity each such entity that you seek to exclude, **and** you must provide **either** (1) a declaration from each entity’s authorized representative, an example of which is set forth below, attesting to your authority to opt the entity’s claims out of the Settlement Class(es);

Date  
Declarant Name  
Declarant Address  
Declarant Telephone Number

Declarant Email Address  
Declarant EIN

Dear Notice Administrator:

I am [Name and Title of Officer or Employee of Declarant Requesting Exclusion]. [Declarant] has authorized [Submitting Entity] to request exclusion from [identify either or both the EPP Heritage Settlement Class and the EPP Apotex Settlement Class] on [Declarant]'s behalf in the case *In re Generic Pharmaceuticals Pricing Antitrust Litigation*, Case No. 2:16-MD-02724 (E.D. Pa.).

I do so declare under penalty of perjury.

\_\_\_\_\_  
Name/Title of Officer or Employee

\_\_\_\_\_  
Date Signed

or (2) a declaration that establishes your authority to opt out of the Heritage and/or Apotex Settlement Classes on behalf of that entity, based on your legal rights and obligations, *e.g.*, as detailed in an ASO contract, as to each entity you seek to exclude. For each entity, such declaration shall include the name of the entity to be excluded and the contractual language on which the right to assert exclusion is based. In the case of an ASO contract, the contractual language must establish that the entity exercised its individual right by explicitly assigning the opt-out decision to you.

A SEPARATE EXCLUSION REQUEST MUST BE SUBMITTED BY EACH TPP ELECTING TO BE EXCLUDED. ANY TPP INCLUDED IN A SETTLEMENT CLASS THAT DOES NOT SUBMIT A VALID REQUEST FOR EXCLUSION PROVIDING ALL NECESSARY INFORMATION WILL REMAIN A MEMBER OF THAT SETTLEMENT CLASS.

**Your letter requesting exclusion must be EMAILED or POSTMARKED no later than July 24, 2025.**

## 8. WHAT IS THE LEGAL SIGNIFICANCE OF EXCLUDING MYSELF?

If you exclude yourself from a Settlement Class, you cannot object to any of the terms of the related Settlement Agreement. You also will not be legally bound by anything that happens in the lawsuit between EPPs and that Settling Defendant. This means that you may be able to sue (or continue to sue) that Settling Defendant in the future about the legal issues in this case. If you intend to exclude yourself from one or both of the Settlement Classes so that you can start or continue your own lawsuit against one or more of the Settling Defendants, you should talk to your own lawyer before doing so, because your claims are subject to a statute of limitations, which means that your claims will expire at a certain time (or may already have expired).

The Apotex Settlement Agreement, in addition to settling EPPs' claims against Apotex, also settles cases and claims brought by certain State Attorneys General against Apotex, some of which claims were brought on behalf of certain members of the EPP Apotex Settlement Class. To the extent legally permissible, a valid and timely request for exclusion from the EPP Apotex Settlement Class will also be deemed to be a request for exclusion from the Apotex State

Settlement. Further details can be found in paragraph IV.E. of the Apotex Settlement Agreement, a copy of which is posted on the Settlement Website.

#### 9. IF I DON'T EXCLUDE MYSELF, CAN I SUE THE SETTLING DEFENDANTS LATER?

No. If you do not exclude yourself from one or more of the Settlement Classes, and you have a valid claim, you can share in the Settlements, but you will not be able to start a lawsuit, continue a lawsuit, or be part of any other lawsuit against the Settling Defendants arising from the claims released as part of these Settlements, including claims brought in the case by EPPs against the Settling Defendants. (*See* Question 12 for more information on the released claims.) All of the Court's Orders in the case between EPPs and the Settling Defendants will apply to you and legally bind you. If the Court grants final approval to the proposed Settlements and enters final judgment in the case between EPPs and the Settling Defendants, you will also be bound by the Settlements between EPPs and the Settling Defendants.

#### 10. WHAT HAPPENS IF I DO NOTHING?

If you are a Settlement Class Member and you do nothing, you will remain in the Settlement Classes and be eligible to participate in the Settlements as described in this Notice, if the Settlements are approved. When the time comes for distribution of the settlement funds, you will need to complete, sign, and return a Settlement claim form.

To receive updates, *e.g.*, whether the Settlements have been approved by the Court, and whether a claim form is available and the deadline for submitting it, you should complete the online registration form on the Settlement Website. When a claim form becomes available, you will be able to obtain it from the Settlement Website or by calling 1-877-316-0171.

### THE SETTLEMENTS' BENEFITS

#### 11. WHAT DO THE SETTLEMENTS PROVIDE?

The Settling Defendants have agreed to pay a total of \$58,000,000.00 in cash to interest-bearing escrow accounts for the benefit of TPP Settlement Class Members. This will come in the form of a \$10 million payment from the Heritage Defendants pursuant to the EPP Heritage Settlement Agreement; and a \$48 million payment from Apotex pursuant to the EPP Apotex Settlement Agreement. The Apotex amount may be reduced under certain circumstances as explained in the Apotex Settlement Agreement. Additionally, the following will be deducted from the settlement funds: the costs of settlement notice and administration (up to \$250,000.00 from the Heritage amount, and up to \$500,000.00 from the Apotex amount), and, if approved by the Court, attorneys' fees (up to one-third of the settlement funds plus interest), and litigation expenses incurred since January 2025, plus an additional amount for future expenses in further litigation against the remaining Defendants (up to \$5,000,000 for past and future expenses). The settlement funds shall be held in escrow pending final approval of the Settlements. The Settling Defendants have also agreed to provide substantial cooperation to EPPs in the continued litigation against the Non-Settling Defendants, which will include proffers of information and access to individuals who are likely to have information relevant to EPPs' causes of action.

A Settlement Agreement may be terminated if the Court does not approve it or if a certain percentage of Settlement Class Members opt out. If a Settlement Agreement is terminated, the

Lawsuit will proceed against the applicable Settling Defendants as if a settlement had not been reached.

The complete Settlement Agreements are available on the Settlement Website. This Notice is not meant to, and does not, alter the terms of the Settlement Agreements.

## 12. WHAT CLAIMS AM I SETTLING?

If the Settlements become final, the litigation between EPPs and the Settling Defendants will be dismissed with prejudice, and the Settlement Class Members will be releasing the Settling Defendants from all claims identified in the Settlement Agreements. Those claims include all claims that have been brought or could have been brought concerning the subject matter of or conduct alleged in EPPs' class action complaints, copies of which are available on the Settlement Website.

The Settlement Agreements specifically describe the released claims, in accurate legal terminology, so read them carefully. For the details of the releases, *see* paragraph 12 of the Heritage Settlement Agreement and paragraphs I.X. and VI of the Apotex Settlement Agreement, which are available on the Settlement Website.

The Apotex Settlement Agreement, in addition to settling claims brought by EPPs, also settles claims brought by certain State Attorneys General (the "State AGs" and the "Apotex State Settlement"), some of which were brought on behalf of certain members of the EPP Apotex Settlement Class. For details on the release of those claims, *see* paragraphs I.X, I.CC, and VI of the Apotex Settlement Agreement.

Non-Settling Defendants are **not** part of the proposed Settlements. EPPs' Lawsuit against the Non-Settling Defendants is continuing.

## 13. HOW CAN I GET A PAYMENT FROM THE SETTLEMENTS?

The claims process is not open at this time. At a later date, if the Court grants final approval to the Settlements and the proposed Plan of Allocation (*see* "The Court's Fairness Hearing" below) and any resulting appeals are resolved, EPP Settlement Class Counsel will ask the Court for permission to distribute the settlement funds pursuant to the Plan of Allocation.

**If you do not exclude yourself from the Settlement Classes, you will need to submit a claim form to request your share of the settlement funds at that time.** To receive updates on when a claim form is available, as well as other updates related to the Settlements, you should complete the online registration form on the Settlement Website. Once a claim form is available, you will be able to obtain it from the Settlement Website or by calling 1-877-316-0171.

## 14. HOW MUCH WILL MY PAYMENT BE?

If the Settlements are approved by the Court, the settlement funds, minus the costs of settlement notice and administration, and minus any court-awarded attorneys' fees and litigation expenses, will be distributed to Settlement Class Members pursuant to a Plan of Allocation that must be approved by the Court.

You will not be responsible for calculating the amount(s) you may be entitled to receive. The Plan of Allocation provides that you will be paid on a *pro rata* basis in proportion to the amount of

money you spent on the Named Generic Drugs from May 1, 2009 through December 31, 2019. In general, those who spent more money on the Named Generic Drugs will get a higher recovery than those who spent less. If less than 100% of the Settlement Class Members send in claim forms, you could get a larger *pro rata* share. Any accrued interest on settlement funds will be included, *pro rata*, in the amounts paid to Settlement Class Members. Additional details of how your recovery will be calculated can be found in the proposed Plan of Allocation, which is available on the Settlement Website.

If you exclude yourself from a Settlement Class, you will not receive a share of the related Settlement.

#### 15. WHEN WOULD I GET MY PAYMENT?

Settlement Class Counsel will ask the Court for permission to distribute the settlement funds at a later point in time, and once the Court grants permission, the claims process will commence. The timing of Settlement Class Counsel's request to the Court for permission to distribute the settlement funds depends on several factors, including whether and when the Court grants final approval of the Settlements and the proposed Plan of Allocation, whether appeals are taken and how long they take, and the timing of the approval of other settlements in the litigation. In the meantime, EPPs will continue to pursue litigation against the Non-Settling Defendants.

### THE LAWYERS REPRESENTING THE SETTLEMENT CLASSES

#### 16. DO I HAVE A LAWYER IN THIS CASE?

The Court appointed Roberta D. Liebenberg and the law firm of Fine, Kaplan and Black, R.P.C., One South Broad Street, 23<sup>rd</sup> Floor, Philadelphia, PA 19107 as lead counsel for the Settlement Classes.

#### 17. HOW WILL THE LAWYERS BE PAID?

The Settlements allow for the costs of settlement notice and administration to be deducted from the settlement funds without prior Court approval in an amount not to exceed \$750,000. In addition, the Settlements allow EPP Settlement Class Counsel to ask the Court for the following payments out of the settlement funds: (i) an award of attorneys' fees, not to exceed one-third of the settlement funds (including interest accrued thereon); (ii) reimbursement of litigation expenses; and (iii) service awards to EPP Class Representatives.

Settlement Class Counsel will move for an award of attorneys' fees not to exceed one-third of the settlement funds (including accrued interest), and litigation expenses incurred since January 2025, plus an additional amount for future expenses in further litigation against the remaining Defendants (not to exceed \$5,000,000 for past and future expenses). They will file their motion and post it on the Settlement Website no later than **June 24, 2025**. **A copy of the motion will also be available for viewing at the office of the Clerk of the United States District Court for the Eastern District of Pennsylvania, 601 Market Street, Philadelphia, PA 19106-1797, during normal business hours.**

Any payment to the attorneys will be subject to Court approval, and the Court may award less than the requested amount. If the Court grants Settlement Class Counsel's requests, the awarded amounts will be deducted from the settlement funds.

## OBJECTING TO THE SETTLEMENTS

### 18. IF I DON'T LIKE THE SETTLEMENTS, HOW DO I TELL THE COURT?

If you are a Settlement Class Member and have not excluded yourself, you can object to all or any part of the proposed Settlements, the Plan of Allocation, or the request for attorneys' fees and litigation expenses. You can give reasons why you think the Court should not approve. The Court will consider your views.

To object to the Settlement(s), you must file your objection with the Court by sending a letter via First-Class U.S. Mail to the Clerk of Court (mailing address below) with copies to the individuals and addresses listed below. (If an attorney is filing an objection on your behalf, your attorney must comply with the Court's Local Rules, including those that mandate document filings via ECF.)

The objection letter must contain:

- Your entity name, postal address, email address, and phone number;
- The name, title, and signature of your representative submitting the objection;
- The case name and number: *In re Generic Pharmaceuticals Pricing Antitrust Litigation*, Case No. 2:16-MD-02724 (E.D. Pa.);
- The name, postal address, email address, and phone number of your attorney, if you have one;
- A statement on whether you are objecting to the EPP Heritage Settlement or the EPP Apotex Settlement (or both Settlements), the proposed Plan of Allocation, and/or the request for attorneys' fees and expenses;
- The specific reasons why you object;
- Documentation demonstrating that you are a member of the Settlement Class and/or this statement, followed by your representative's signature: "I declare under penalty of perjury under the laws of the United States of America that [insert entity name] is a member of the Settlement Class."; and
- Any supporting materials, papers, or briefs that you want the Court to consider.

**Your objection must be filed with the Court so that it is received by the Court on or before July 24, 2025.**

CLERK OF COURT FOR THE U.S. DIST. CT. FOR THE EASTERN DIST. OF PA	SETTLEMENT CLASS COUNSEL	SETTLING DEFENDANTS' COUNSEL
Clerk of Court, E.D. Pa. 601 Market St. Philadelphia, PA 19106	Roberta D. Liebenberg Jeffrey S. Istvan Fine, Kaplan and Black, R.P.C. One South Broad St., 23 <sup>rd</sup> Floor Philadelphia, PA 19107	Justin P. Murphy BakerHostetler 1050 Connecticut Avenue, NW Suite 1100 Washington, D.C. 20036  April N. Williams WilmerHale 2100 Pennsylvania Avenue NW Washington, D.C. 20037  James W. Matthews Foley & Lardner LLP 111 Huntington Ave. Suite 2500 Boston, MA 02199

Please note that these instructions are for TPP objections only. If you are a Consumer and wish to object to the Apotex Settlement, please see the instructions at [www.AGGenericDrugs.com](http://www.AGGenericDrugs.com).

### THE COURT'S FAIRNESS HEARING

The Court will hold a Final Fairness Hearing to decide whether to grant final approval to the Settlements, Plan of Allocation, and request for attorneys' fees and expenses. You may attend and, if you have not excluded yourself from one or more of the Settlement Classes, you may ask to speak, but you do not have to.

#### 19. WHEN WILL THE COURT DECIDE WHETHER TO APPROVE THE SETTLEMENTS?

The Court has scheduled the Final Fairness Hearing for **October 3, 2025, at 11 a.m.**, at the United States District Court for the Eastern District of Pennsylvania, Courtroom 12-A, 601 Market Street, Philadelphia, PA 19106.

**The time and date of the Final Fairness Hearing may change without additional mailed notice. For updated information on the hearing, you may check the Settlement Website, or the Court docket in this case, for a fee, through the Court's Public Access to Court Electronic Records (PACER) system at <https://pcl.uscourts.gov>.**

At the Final Fairness Hearing, the Court will consider whether the Settlements and the Plan of Allocation are fair, reasonable and adequate. The Court may also consider the requests by Settlement Class Counsel for attorneys' fees and expenses. If there are objections, the Court will consider them. After the hearing, the Court will decide whether to give final approval to the Settlements and the other requests. It is unknown how long these decisions, or decisions on any appeals of them, will take.

Any judgment issued by the Court will be binding on the Settlement Classes. The Settlements, if approved by the Court and once appeals, if any, are resolved, will release all claims in the putative class actions against the Settling Defendants.

#### 20. DO I HAVE TO ATTEND THE HEARING?

No. Settlement Class Counsel will answer any questions the Court may have. However, you are welcome to attend the hearing at your own expense. If you send an objection, you do not have to come to Court to talk about it. As long as you filed your written objection on time, to the proper addresses, and it complies with the other requirements provided above, the Court will consider it. You may also pay your own lawyer to attend the hearing, but this is not necessary.

Attendance is not necessary to receive your share of the settlement funds.

#### 21. MAY I SPEAK AT THE HEARING?

You may ask the Court for permission to speak at the Fairness Hearing. To do so, you must file your notice by sending a letter via First-Class U.S. Mail titled “Notice of Intention to Appear in *In re: Generic Pharmaceuticals Pricing Antitrust Litigation*, No. 2:16-MD-02724 (E.D. Pa.),” to the Clerk of Court, with copies to the individuals and addresses listed in Question 18 above. (If an attorney is filing the notice on your behalf, your attorney must comply with the Court’s Local Rules, including those that mandate document filings via ECF.)

Be sure to include your name, address, email address, telephone number and signature, and state that you intend to appear at the Fairness Hearing on the EPP Heritage and EPP Apotex Settlements. If applicable, include the name, address, email address, and telephone number of your attorney (who must file a Notice of Appearance). Your Notice of Intention to Appear must be filed with the Court so that it is **received** by the Court no later than **July 24, 2025**.

You may not speak at the hearing if you excluded yourself as a Settlement Class Member or do not send a Notice of Intention to Appear.

### GETTING MORE INFORMATION

#### 22. HOW DO I GET MORE INFORMATION?

If you have questions about these Settlements or want additional information, you should first review the information posted on the Settlement Website. If you still have questions, you may call the Notice Administrator at **1-877-316-0171** or contact the attorney or law firm identified in Question 16. This Notice is only a summary of the proposed Settlements and is qualified in its entirety by the terms of the Settlement Agreements. Copies of the Settlement Agreements are on public file with the United States District Court for the Eastern District of Pennsylvania, 601 Market Street, Philadelphia, PA 19106. The Settlement Agreements are also available on the Settlement Website.

PLEASE DO NOT TELEPHONE THE COURT OR THE COURT CLERK’S OFFICE TO INQUIRE ABOUT THE SETTLEMENTS OR THE CLAIMS PROCESS.

## APPENDIX A: NAMED GENERIC DRUGS

	Molecule Name	Form	Strength
1	ACETAZOLAMIDE	TABLET	125MG
1	ACETAZOLAMIDE	TABLET	250MG
1	ACETAZOLAMIDE ER	CAPSULE	500MG
2	ADAPALENE	CREAM	0.10%
2	ADAPALENE	GEL	0.10%
2	ADAPALENE	GEL	0.30%
3	ALBUTEROL	TABLET	2MG
3	ALBUTEROL	TABLET	4MG
4	ALCLOMETASONE DIPROPIONATE	CREAM	0.05%
4	ALCLOMETASONE DIPROPIONATE	OINTMENT	0.05%
5	ALLOPURINOL	TABLET	100MG
5	ALLOPURINOL	TABLET	300MG
6	AMANTADINE HCL	CAPSULE	100MG
7	AMILORIDE HCL/HCTZ	TABLET	5-50MG
8	AMITRIPTYLINE	TABLET	10MG
8	AMITRIPTYLINE	TABLET	25MG
8	AMITRIPTYLINE	TABLET	50MG
8	AMITRIPTYLINE	TABLET	75MG
8	AMITRIPTYLINE	TABLET	100MG
8	AMITRIPTYLINE	TABLET	150MG
9	AMMONIUM LACTATE	CREAM	12%
9	AMMONIUM LACTATE	LOTION	12%
10	AMOXICILLIN/CLAVULANATE POTASSIUM	TABLET CHEWABLE	200-28.5MG
10	AMOXICILLIN/CLAVULANATE POTASSIUM	TABLET CHEWABLE	400-57MG
11	AMPHETAMINE/DEXTROAMPHETAMINE (MAS) (ADDERALL)	TABLET	5MG
11	AMPHETAMINE/DEXTROAMPHETAMINE (MAS) (ADDERALL)	TABLET	10MG
11	AMPHETAMINE/DEXTROAMPHETAMINE (MAS) (ADDERALL)	TABLET	20MG
11	AMPHETAMINE/DEXTROAMPHETAMINE (MAS) (ADDERALL)	TABLET	30MG
11	AMPHETAMINE/DEXTROAMPHETAMINE ER (MAS) (ADDERALL)	CAPSULE	5MG
11	AMPHETAMINE/DEXTROAMPHETAMINE ER (MAS) (ADDERALL)	CAPSULE	10MG
11	AMPHETAMINE/DEXTROAMPHETAMINE ER (MAS) (ADDERALL)	CAPSULE	15MG
11	AMPHETAMINE/DEXTROAMPHETAMINE ER (MAS) (ADDERALL)	CAPSULE	20MG
11	AMPHETAMINE/DEXTROAMPHETAMINE ER (MAS) (ADDERALL)	CAPSULE	25MG
11	AMPHETAMINE/DEXTROAMPHETAMINE ER (MAS) (ADDERALL)	CAPSULE	30MG
12	ATENOLOL/CHLORTHALIDONE	TABLET	50-25MG
12	ATENOLOL/CHLORTHALIDONE	TABLET	100-25MG
13	ATROPINE SULFATE	SOLUTION	1%
14	AZITHROMYCIN	ORAL SUSPENSION	100MG/5ML
14	AZITHROMYCIN	ORAL SUSPENSION	200MG/5ML
15	BACLOFEN	TABLET	10MG
15	BACLOFEN	TABLET	20MG
16	BALSALAZIDE DISODIUM	CAPSULE	750MG
17	BENZAEPRIIL HCTZ	TABLET	10-12.5MG
17	BENZAEPRIIL HCTZ	TABLET	20-12.5MG
17	BENZAEPRIIL HCTZ	TABLET	20-25MG
18	BETAMETHASONE DIPROPIONATE	CREAM	0.05%

	Molecule Name	Form	Strength
18	BETAMETHASONE DIPROPIONATE	LOTION	0.05%
18	BETAMETHASONE DIPROPIONATE	OINTMENT	0.05%
19	BETAMETHASONE DIPROPIONATE AUGMENTED	LOTION	0.05%
20	BETAMETHASONE DIPROPIONATE/CLOTRIMAZOLE	CREAM	0.05%
20	BETAMETHASONE DIPROPIONATE/CLOTRIMAZOLE	CREAM	0.10%
20	BETAMETHASONE DIPROPIONATE/CLOTRIMAZOLE	LOTION	0.05%
20	BETAMETHASONE DIPROPIONATE/CLOTRIMAZOLE	LOTION	0.10%
21	BETAMETHASONE VALERATE	CREAM	0.10%
21	BETAMETHASONE VALERATE	LOTION	0.10%
21	BETAMETHASONE VALERATE	OINTMENT	0.10%
22	BETHANECHOL CHLORIDE	TABLET	5MG
22	BETHANECHOL CHLORIDE	TABLET	10MG
22	BETHANECHOL CHLORIDE	TABLET	25 MG
22	BETHANECHOL CHLORIDE	TABLET	50 MG
23	BROMOCRIPTINE MESYLATE	TABLET	2.5MG
24	BUDESONIDE	SOLUTION	0.25MG/2ML
24	BUDESONIDE	SOLUTION	0.5MG/2ML
24	BUDESONIDE	SOLUTION	1MG/2ML
24	BUDESONIDE DR	CAPSULE	3MG
25	BUMETANIDE	TABLET	0.5MG
25	BUMETANIDE	TABLET	1MG
25	BUMETANIDE	TABLET	2MG
26	BUSPIRONE HCL	TABLET	5MG
26	BUSPIRONE HCL	TABLET	7.5MG
26	BUSPIRONE HCL	TABLET	10MG
26	BUSPIRONE HCL	TABLET	15MG
26	BUSPIRONE HCL	TABLET	30MG
27	BUTORPHANOL TARTRATE	SPRAY	10MG/ML
28	CABERGOLINE	TABLET	0.5MG
29	CALCIPOTRIENE	SOLUTION	ALL STRENGTHS
30	CALCIPOTRIENE BETHAMASONE DIPROPIONATE	OINTMENT	0.064%/0.005%
31	CAPECITABINE	TABLET	150MG
31	CAPECITABINE	TABLET	500MG
32	CAPTOPRIL	TABLET	12.5MG
32	CAPTOPRIL	TABLET	25MG
32	CAPTOPRIL	TABLET	50MG
32	CAPTOPRIL	TABLET	100MG
33	CARBAMAZEPINE	TABLET	200MG
33	CARBAMAZEPINE	TABLET CHEWABLE	100MG
33	CARBAMAZEPINE ER	TABLET	100MG
33	CARBAMAZEPINE ER	TABLET	200MG
33	CARBAMAZEPINE ER	TABLET	400MG
34	CARISOPRODOL	TABLET	350MG
35	CEFDINIR	CAPSULE	300MG
35	CEFDINIR	SOLUTION	125MG/5ML
35	CEFDINIR	SOLUTION	250MG/5ML
36	CEFPODOXIME PROXETIL	ORAL SUSPENSION	50MG/5ML
36	CEFPODOXIME PROXETIL	ORAL SUSPENSION	100MG/5ML
36	CEFPODOXIME PROXETIL	TABLET	100MG
36	CEFPODOXIME PROXETIL	TABLET	200MG
37	CEFPROZIL	TABLET	250MG
37	CEFPROZIL	TABLET	500MG
38	CEFUROXIME AXETIL	TABLET	250MG
38	CEFUROXIME AXETIL	TABLET	500MG
39	CELECOXIB	CAPSULE	50MG
39	CELECOXIB	CAPSULE	100MG
39	CELECOXIB	CAPSULE	200MG
39	CELECOXIB	CAPSULE	400MG
40	CEPHALEXIN (CEFALEXIN)	SOLUTION	125MG/5ML

	Molecule Name	Form	Strength
40	CEPHALEXIN (CEFALEXIN)	SOLUTION	250MG/5ML
41	CHLORPROMAZINE HCL	TABLET	10MG
41	CHLORPROMAZINE HCL	TABLET	25MG
41	CHLORPROMAZINE HCL	TABLET	50MG
41	CHLORPROMAZINE HCL	TABLET	100MG
41	CHLORPROMAZINE HCL	TABLET	200MG
42	CHOLESTYRAMINE	PACKET/ORAL SOLID	4G
42	CHOLESTYRAMINE	POWDER	4G
43	CICLOPIROX	CREAM	0.77%
43	CICLOPIROX	SHAMPOO	1%
43	CICLOPIROX	SOLUTION	8%
44	CIMETIDINE	TABLET	200MG
44	CIMETIDINE	TABLET	300MG
44	CIMETIDINE	TABLET	400MG
44	CIMETIDINE	TABLET	800MG
45	CIPROFLOXACIN HCL	TABLET	100MG
45	CIPROFLOXACIN HCL	TABLET	250MG
45	CIPROFLOXACIN HCL	TABLET	500MG
45	CIPROFLOXACIN HCL	TABLET	750MG
46	CLARITHROMYCIN ER	TABLET	500MG
47	CLEMASTINE FUMARATE	TABLET	1.34MG
47	CLEMASTINE FUMARATE	TABLET	2.86MG
48	CLINDAMYCIN PHOSPHATE	GEL	1%
48	CLINDAMYCIN PHOSPHATE	LOTION	1%
48	CLINDAMYCIN PHOSPHATE	SOLUTION	1%
48	CLINDAMYCIN PHOSPHATE	VAGINAL CREAM	2%
49	CLOBETASOL	CREAM	0.05%
49	CLOBETASOL	E CREAM	0.05%
49	CLOBETASOL	GEL	0.05%
49	CLOBETASOL	OINTMENT	0.05%
49	CLOBETASOL	SOLUTION	0.05%
50	CLOMIPRAMINE	CAPSULE	25MG
50	CLOMIPRAMINE	CAPSULE	50MG
50	CLOMIPRAMINE	CAPSULE	75MG
51	CLONIDINE	PATCH	0.1MG/24HR
51	CLONIDINE	PATCH	0.2MG/24HR
51	CLONIDINE	PATCH	0.3MG/24HR
52	CLOTRIMAZOLE	SOLUTION	1%
53	CYPROHEPTADINE HCL	TABLET	4MG
54	DESMOPRESSIN ACETATE	TABLET	0.1MG
54	DESMOPRESSIN ACETATE	TABLET	0.2MG
55	DESONIDE	CREAM	0.05%
55	DESONIDE	LOTION	0.05%
55	DESONIDE	OINTMENT	0.05%
56	DESOXIMETASONE	OINTMENT	0.05%
56	DESOXIMETASONE	OINTMENT	0.25%
57	DEXMETHYLPHENIDATE HCL ER (DEXMETH ER) (FOCALIN)	CAPSULE	5MG
57	DEXMETHYLPHENIDATE HCL ER (DEXMETH ER) (FOCALIN)	CAPSULE	15MG
57	DEXMETHYLPHENIDATE HCL ER (DEXMETH ER) (FOCALIN)	CAPSULE	20MG
57	DEXMETHYLPHENIDATE HCL ER (DEXMETH ER) (FOCALIN)	CAPSULE	40MG
58	DEXTROAMPHETAMINE SULFATE (DEX SULFATE)	TABLET	2.5MG
58	DEXTROAMPHETAMINE SULFATE (DEX SULFATE)	TABLET	5MG
58	DEXTROAMPHETAMINE SULFATE (DEX SULFATE)	TABLET	7.5MG
58	DEXTROAMPHETAMINE SULFATE (DEX SULFATE)	TABLET	10MG
58	DEXTROAMPHETAMINE SULFATE (DEX SULFATE)	TABLET	15MG
58	DEXTROAMPHETAMINE SULFATE (DEX SULFATE)	TABLET	20MG
58	DEXTROAMPHETAMINE SULFATE (DEX SULFATE)	TABLET	30MG
58	DEXTROAMPHETAMINE SULFATE ER (DEX SULFATE ER)	CAPSULE	5MG
58	DEXTROAMPHETAMINE SULFATE ER (DEX SULFATE ER)	CAPSULE	10MG

	Molecule Name	Form	Strength
58	DEXTROAMPHETAMINE SULFATE ER (DEX SULFATE ER)	CAPSULE	15MG
59	DICLOFENAC POTASSIUM	TABLET	50MG
60	DICLOXACILLIN SODIUM	CAPSULE	250MG
60	DICLOXACILLIN SODIUM	CAPSULE	500MG
61	DIFLUNISAL	TABLET	500MG
62	DIGOXIN	TABLET	0.125MG
62	DIGOXIN	TABLET	0.25MG
63	DILTIAZEM HCL	TABLET	120MG
63	DILTIAZEM HCL	TABLET	30MG
63	DILTIAZEM HCL	TABLET	60MG
63	DILTIAZEM HCL	TABLET	90MG
64	DIPHENOXYLATE/ATROPINE	TABLET	2.5MG;0.025MG
65	DISOPYRAMIDE PHOSPHATE	CAPSULE	100MG
65	DISOPYRAMIDE PHOSPHATE	CAPSULE	150MG
66	DIVALPROEX ER	TABLET	250MG
66	DIVALPROEX ER	TABLET	500MG
67	DOXAZOSIN MESYLATE	TABLET	1MG
67	DOXAZOSIN MESYLATE	TABLET	2MG
67	DOXAZOSIN MESYLATE	TABLET	4MG
67	DOXAZOSIN MESYLATE	TABLET	8MG
68	DOXYCYCLINE HYCLATE	CAPSULE	50MG
68	DOXYCYCLINE HYCLATE	CAPSULE	100MG
68	DOXYCYCLINE HYCLATE	TABLET	100MG
68	DOXYCYCLINE HYCLATE DR	TABLET	75MG
68	DOXYCYCLINE HYCLATE DR	TABLET	100MG
68	DOXYCYCLINE HYCLATE DR	TABLET	150MG
68	DOXYCYCLINE MONOHYDRATE	TABLET	50MG
68	DOXYCYCLINE MONOHYDRATE	TABLET	75MG
68	DOXYCYCLINE MONOHYDRATE	TABLET	100MG
68	DOXYCYCLINE MONOHYDRATE	TABLET	150MG
69	DROSPIRENONE/ETHINYL ESTRADIOL (OCELLA)	TABLET	3MG-0.02MG
69	DROSPIRENONE/ETHINYL ESTRADIOL (OCELLA)	TABLET	3MG-0.03MG
70	ECONAZOLE	CREAM	1%
71	ENALAPRIL MALEATE	TABLET	2.5MG
71	ENALAPRIL MALEATE	TABLET	5MG
71	ENALAPRIL MALEATE	TABLET	10MG
71	ENALAPRIL MALEATE	TABLET	20MG
72	ENTECAVIR	TABLET	0.5MG
72	ENTECAVIR	TABLET	1MG
73	EPLERENONE	TABLET	25MG
73	EPLERENONE	TABLET	50MG
74	ERYTHROMYCIN	SOLUTION	ALL STRENGTHS
75	ESTAZOLAM	TABLET	1MG
75	ESTAZOLAM	TABLET	2MG
76	ESTRADIOL	TABLET	0.5MG
76	ESTRADIOL	TABLET	1MG
76	ESTRADIOL	TABLET	2MG
77	ESTRADIOL/NORETHINDRONE ACETATE (MIMVEY)	TABLET	1-0.5MG
78	ETHAMBUTOL HCL	TABLET	100MG
78	ETHAMBUTOL HCL	TABLET	400MG
79	ETHINYL ESTRADIOL/DESOGESTREL [KARIVA]	TABLET	0.15/0.02-0.01MG
79	ETHINYL ESTRADIOL/DESOGESTREL [KARIVA]	TABLET	0.15-0.02-0.01MG
79	ETHINYL ESTRADIOL/DESOGESTREL [KARIVA]	TABLET	0.15-0.03MG
80	ETHINYL ESTRADIOL/LEVONORGESTREL (PORTIA,JOLESSA)	TABLET	ALL STRENGTHS
81	ETHOSUXIMIDE	CAPSULE	250MG
81	ETHOSUXIMIDE	ORAL SOLUTION	250MG/5ML
82	ETODOLAC	CAPSULE	200MG
82	ETODOLAC	CAPSULE	300MG
82	ETODOLAC	TABLET	400MG

	Molecule Name	Form	Strength
82	ETODOLAC	TABLET	500MG
82	ETODOLAC ER	TABLET	400MG
82	ETODOLAC ER	TABLET	500MG
82	ETODOLAC ER	TABLET	600MG
83	EXEMESTANE	TABLET	25MG
84	FENOFIBRATE	TABLET	48MG
84	FENOFIBRATE	TABLET	145MG
85	FLUCONAZOLE	TABLET	50MG
85	FLUCONAZOLE	TABLET	100MG
85	FLUCONAZOLE	TABLET	150MG
85	FLUCONAZOLE	TABLET	200MG
86	FLUOCINOLONE ACETONIDE	CREAM	0.01%
86	FLUOCINOLONE ACETONIDE	CREAM	0.03%
86	FLUOCINOLONE ACETONIDE	OINTMENT	0.03%
86	FLUOCINOLONE ACETONIDE	SOLUTION	0.01%
87	FLUOCINONIDE	CREAM	0.05%
87	FLUOCINONIDE	CREAM	0.10%
87	FLUOCINONIDE	E CREAM	0.05%
87	FLUOCINONIDE	GEL	0.05%
87	FLUOCINONIDE	OINTMENT	0.05%
87	FLUOCINONIDE	SOLUTION	0.05%
88	FLUOXETINE HCL	TABLET	10MG
88	FLUOXETINE HCL	TABLET	15MG
88	FLUOXETINE HCL	TABLET	20MG
88	FLUOXETINE HCL	TABLET	60MG
89	FLURBIPROFEN	TABLET	50MG
89	FLURBIPROFEN	TABLET	100MG
90	FLUTAMIDE	CAPSULE	125MG
91	FLUTICASONE PROPIONATE	SPRAY	50MCG
91	FLUTICASONE PROPIONATE	LOTION	0.05%
92	FLUVASTATIN SODIUM	CAPSULE	20MG
92	FLUVASTATIN SODIUM	CAPSULE	40MG
93	FOSINOPRIL HCTZ	TABLET	10-12.5MG
93	FOSINOPRIL HCTZ	TABLET	20-12.5MG
94	GABAPENTIN	TABLET	600MG
94	GABAPENTIN	TABLET	800MG
95	GLIMEPIRIDE	TABLET	1MG
95	GLIMEPIRIDE	TABLET	2MG
95	GLIMEPIRIDE	TABLET	4MG
96	GLIPIZIDE/METFORMIN	TABLET	2.5-250MG
96	GLIPIZIDE/METFORMIN	TABLET	2.5-500MG
96	GLIPIZIDE/METFORMIN	TABLET	5-500MG
97	GLYBURIDE	TABLET	1.25MG
97	GLYBURIDE	TABLET	2.5MG
97	GLYBURIDE	TABLET	5MG
98	GLYBURIDE/METFORMIN	TABLET	1.25-250MG
98	GLYBURIDE/METFORMIN	TABLET	2.5-500MG
98	GLYBURIDE/METFORMIN	TABLET	5-500MG
99	GRISEOFULVIN	SUSPENSION (MICROSIZE)	125MG/5ML
99	GRISEOFULVIN	MICROSIZE TABLET	250MG
99	GRISEOFULVIN	MICROSIZE TABLET	500MG
100	HALOBETASOL PROPIONATE	CREAM	0.05%
100	HALOBETASOL PROPIONATE	OINTMENT	0.05%
101	HALOPERIDOL	TABLET	0.5MG
101	HALOPERIDOL	TABLET	1MG
101	HALOPERIDOL	TABLET	2MG
101	HALOPERIDOL	TABLET	5MG
101	HALOPERIDOL	TABLET	10MG

	Molecule Name	Form	Strength
101	HALOPERIDOL	TABLET	20MG
102	HYDRALAZINE HCL		
103	HYDROCORTISONE ACETATE	SUPPOSITORIES	10MG
103	HYDROCORTISONE ACETATE	SUPPOSITORIES	25MG
103	HYDROCORTISONE ACETATE	SUPPOSITORIES	30MG
103	HYDROCORTISONE ACETATE	SUPPOSITORIES	50MG
104	HYDROCORTISONE VALERATE	CREAM	0.20%
105	HYDROXYUREA	CAPSULE	500MG
106	HYDROXYZINE PAMOATE	CAPSULE	25MG
106	HYDROXYZINE PAMOATE	CAPSULE	50MG
106	HYDROXYZINE PAMOATE	CAPSULE	100MG
107	IMIQUIMOD	CREAM	12.5MG/G
107	IMIQUIMOD	CREAM	37.5MG/G
107	IMIQUIMOD	CREAM	50MG/G
108	IRBESARTAN	TABLET	75MG
108	IRBESARTAN	TABLET	150MG
108	IRBESARTAN	TABLET	300MG
109	ISONIAZID	TABLET	100MG
109	ISONIAZID	TABLET	300MG
110	ISOSORBIDE DINITRATE	TABLET	5MG
110	ISOSORBIDE DINITRATE	TABLET	10MG
110	ISOSORBIDE DINITRATE	TABLET	20MG
110	ISOSORBIDE DINITRATE	TABLET	30MG
111	KETOCONAZOLE	CREAM	2%
111	KETOCONAZOLE	TABLET	200MG
112	KETOPROFEN	CAPSULE	50MG
112	KETOPROFEN	CAPSULE	75MG
113	KETOROLAC TROMETHAMINE	TABLET	10MG
114	LABETALOL HCL	TABLET	100MG
114	LABETALOL HCL	TABLET	200MG
114	LABETALOL HCL	TABLET	300MG
115	LAMIVUDINE/ZIDOVUDINE (COMBIVIR)	TABLET	150-300MG
115	LAMIVUDINE/ZIDOVUDINE (COMBIVIR)	TABLET	300-150MG
116	LATANOPROST	SOLUTION	0.01%
117	LEFLUNOMIDE	TABLET	10MG
117	LEFLUNOMIDE	TABLET	20MG
118	LEVOTHYROXINE	TABLET	0.025MG
118	LEVOTHYROXINE	TABLET	0.05MG
118	LEVOTHYROXINE	TABLET	0.075MG
118	LEVOTHYROXINE	TABLET	0.088MG
118	LEVOTHYROXINE	TABLET	0.1MG
118	LEVOTHYROXINE	TABLET	0.112MG
118	LEVOTHYROXINE	TABLET	0.125MG
118	LEVOTHYROXINE	TABLET	0.137MG
118	LEVOTHYROXINE	TABLET	0.15MG
118	LEVOTHYROXINE	TABLET	0.175MG
118	LEVOTHYROXINE	TABLET	0.2MG
118	LEVOTHYROXINE	TABLET	0.3MG
119	LIDOCAINE HCL	OINTMENT	5%
120	LIDOCAINE/PRILOCAINE	CREAM	2.5%-2.5%
121	LOPERAMIDE HCL	CAPSULE	2MG
122	MEDROXYPROGESTERONE ACETATE	TABLET	2.5MG
122	MEDROXYPROGESTERONE ACETATE	TABLET	5MG
122	MEDROXYPROGESTERONE ACETATE	TABLET	10MG
123	MEPROBAMATE	TABLET	200MG
123	MEPROBAMATE	TABLET	400MG
124	METFORMIN (F) ER	TABLET	500MG
124	METFORMIN (F) ER	TABLET	1000MG
125	METHADONE HCL	TABLET	10MG

	Molecule Name	Form	Strength
125	METHADONE HCL	TABLET	5MG
126	METHAZOLAMIDE	TABLET	25MG
126	METHAZOLAMIDE	TABLET	50MG
127	METHIMAZOLE		
128	METHOTREXATE	TABLET	2.5MG
129	METHYLPHENIDATE	TABLET	5MG
130	METHYLPHENIDATE	TABLET	10MG
130	METHYLPHENIDATE	TABLET	20MG
130	METHYLPHENIDATE ER	TABLET	20MG
131	METHYLPREDNISOLONE	TABLET	4MG
132	METRONIDAZOLE	TABLET	
132	METRONIDAZOLE	CREAM	0.75%
132	METRONIDAZOLE	GEL	0.75%
132	METRONIDAZOLE	GEL	1%
132	METRONIDAZOLE	GEL VAGINAL	0.75%
132	METRONIDAZOLE	LOTION	0.75%
133	MOEXIPRIL HCL	TABLET	7.5MG
133	MOEXIPRIL HCL	TABLET	15MG
134	MOEXIPRIL HCL/HCTZ	TABLET	7.5-12.5MG
134	MOEXIPRIL HCL/HCTZ	TABLET	15-12.5MG
134	MOEXIPRIL HCL/HCTZ	TABLET	15-25MG
135	MOMETASONE FUROATE	CREAM	0.10%
135	MOMETASONE FUROATE	OINTMENT	0.10%
135	MOMETASONE FUROATE	SOLUTION	0.10%
136	NABUMETONE	TABLET	500MG
136	NABUMETONE	TABLET	750MG
137	NADOLOL	TABLET	20MG
137	NADOLOL	TABLET	40MG
137	NADOLOL	TABLET	80MG
138	NAFCILLIN SODIUM	INJECTABLE VIALS	ALL STRENGTHS
139	NAPROXEN SODIUM	TABLET	275MG
139	NAPROXEN SODIUM	TABLET	550MG
140	NEOMYCIN/POLYMYXIN/HYDROCORTISONE	SOLUTION	3.5MG-10MU 1%
141	NIACIN ER	TABLET	500MG
141	NIACIN ER	TABLET	750MG
141	NIACIN ER	TABLET	1000MG
142	NIMODIPINE	CAPSULE	30MG
143	NITROFURANTOIN/MACROCRYSTALLINE	CAPSULE	25MG
143	NITROFURANTOIN/MACROCRYSTALLINE	CAPSULE	50MG
143	NITROFURANTOIN/MACROCRYSTALLINE	CAPSULE	100MG
144	NORETHINDRONE ACETATE	TABLET	5MG
145	NORETHINDRONE/ETHINYL ESTRADIOL (BALZIVA)	TABLET	0.4-0.035MG-MCG
146	NORTRIPTYLINE HCL	CAPSULE	10MG
146	NORTRIPTYLINE HCL	CAPSULE	25MG
146	NORTRIPTYLINE HCL	CAPSULE	50MG
146	NORTRIPTYLINE HCL	CAPSULE	75MG
147	NYSTATIN	CREAM	100MU
147	NYSTATIN	OINTMENT	100MU
147	NYSTATIN	TABLET	500MU
148	NYSTATIN/TRIAMCINOLONE	CREAM	0.10%
148	NYSTATIN/TRIAMCINOLONE	OINTMENT	0.10%
149	OMEGA 3 ACID ETHYL ESTERS	CAPSULE	1G
150	OXACILLIN SODIUM	INJECTABLE VIALS	ALL STRENGTHS
151	OXAPROZIN	TABLET	600MG
152	OXYBUTYNIN CHLORIDE	TABLET	5MG
153	OXYCODONE/ACETAMINOPHEN	TABLET	5-325MG
153	OXYCODONE/ACETAMINOPHEN	TABLET	7.5-325MG
153	OXYCODONE/ACETAMINOPHEN	TABLET	10-325MG
154	OXYCODONE HCL	TABLET	5MG

	Molecule Name	Form	Strength
154	OXYCODONE HCL	TABLET	15MG
154	OXYCODONE HCL	TABLET	30MG
155	PARICALCITOL	CAPSULE	1MCG
155	PARICALCITOL	CAPSULE	2MCG
155	PARICALCITOL	CAPSULE	4MCG
156	PAROMOMYCIN	CAPSULE	250MG
157	PENICILLIN V POTASSIUM	TABLET	250MG
157	PENICILLIN V POTASSIUM	TABLET	500MG
158	PENTOXIFYLLINE ER	TABLET	400MG
159	PERMETHRIN	CREAM	5%
160	PERPHENAZINE	TABLET	2MG
160	PERPHENAZINE	TABLET	4MG
160	PERPHENAZINE	TABLET	8MG
160	PERPHENAZINE	TABLET	16MG
161	PHENYTOIN SODIUM ER	CAPSULE	100MG
162	PILOCARPINE HCL	TABLET	5MG
163	PIOGLITAZONE METFORMIN HCL	TABLET	15MG/500MG
163	PIOGLITAZONE METFORMIN HCL	TABLET	15MG/850MG
164	PIROXICAM	CAPSULE	10MG
164	PIROXICAM	CAPSULE	20MG
165	POTASSIUM CHLORIDE ER	TABLET	8MEQ
165	POTASSIUM CHLORIDE ER	TABLET	10MEQ
165	POTASSIUM CHLORIDE ER	TABLET	20MEQ
166	PRAVASTATIN	TABLET	10MG
166	PRAVASTATIN	TABLET	20MG
166	PRAVASTATIN	TABLET	40MG
166	PRAVASTATIN	TABLET	80MG
167	PRAZOSIN HCL	CAPSULE	1MG
167	PRAZOSIN HCL	CAPSULE	2MG
167	PRAZOSIN HCL	CAPSULE	5MG
168	PREDNISOLONE ACETATE	SOLUTION/LIQUID EYE	1%
169	PREDNISONE	TABLET	1MG
169	PREDNISONE	TABLET	2.5MG
169	PREDNISONE	TABLET	5MG
169	PREDNISONE	TABLET	10MG
169	PREDNISONE	TABLET	20MG
170	PROCHLORPERAZINE	SUPPOSITORY	25MG
170	PROCHLORPERAZINE	TABLET	5MG
170	PROCHLORPERAZINE	TABLET	10MG
171	PROMETHAZINE	SUPPOSITORY	12.5MG
171	PROMETHAZINE	SUPPOSITORY	25MG
171	PROMETHAZINE	SUPPOSITORY	50MG
172	PROPRANOLOL	TABLET	10MG
172	PROPRANOLOL	TABLET	20MG
172	PROPRANOLOL	TABLET	40MG
172	PROPRANOLOL	TABLET	60MG
172	PROPRANOLOL	TABLET	80MG
172	PROPRANOLOL ER	CAPSULE	60MG
172	PROPRANOLOL ER	CAPSULE	80MG
172	PROPRANOLOL ER	CAPSULE	120MG
172	PROPRANOLOL ER	CAPSULE	160MG
173	RALOXIFENE HCL	TABLET	60MG
174	RANITIDINE HCL	CAPSULE	150MG
174	RANITIDINE HCL	CAPSULE	300MG
174	RANITIDINE HCL	TABLET	150MG
175	SILVER SULFADIAZINE	CREAM	1%
176	SPIRONOLACTONE/HCTZ	TABLET	25-25MG
177	TACROLIMUS	OINTMENT	0.03%
177	TACROLIMUS	OINTMENT	0.10%

	Molecule Name	Form	Strength
178	TAMOXIFEN CITRATE	TABLET	10MG
178	TAMOXIFEN CITRATE	TABLET	20MG
179	TEMOZOLOMIDE	CAPSULE	5MG
179	TEMOZOLOMIDE	CAPSULE	20MG
179	TEMOZOLOMIDE	CAPSULE	100MG
179	TEMOZOLOMIDE	CAPSULE	140MG
179	TEMOZOLOMIDE	CAPSULE	180MG
179	TEMOZOLOMIDE	CAPSULE	250MG
180	TERCONAZOLE	VAGINAL CREAM	0.40%
180	TERCONAZOLE	VAGINAL CREAM	0.80%
181	THEOPHYLLINE ER	TABLET	100MG
181	THEOPHYLLINE ER	TABLET	200MG
181	THEOPHYLLINE ER	TABLET	300MG
181	THEOPHYLLINE ER	TABLET	400MG
181	THEOPHYLLINE ER	TABLET	450MG
181	THEOPHYLLINE ER	TABLET	600MG
182	TIMOLOL MALEATE	GEL	0.25%
182	TIMOLOL MALEATE	GEL	0.50%
183	TIZANIDINE HCL	TABLET	2MG
183	TIZANIDINE HCL	TABLET	4MG
184	TOBRAMYCIN	SOLUTION	300MG/5ML
185	TOBRAMYCIN/DEXAMETHASONE	SOLUTION	0.3-0.1%
186	TOLMETIN SODIUM	CAPSULE	400MG
187	TOLTERODINE TARTRATE	TABLET	1MG
187	TOLTERODINE TARTRATE	TABLET	2MG
187	TOLTERODINE TARTRATE ER	CAPSULE	2MG
187	TOLTERODINE TARTRATE ER	CAPSULE	4MG
188	TOPIRAMATE	CAPSULE	15MG
188	TOPIRAMATE	CAPSULE	25MG
189	TRAZODONE HCL	TABLET	100MG
190	TRIAMCINOLONE ACETONIDE	CREAM	0.03%
190	TRIAMCINOLONE ACETONIDE	CREAM	0.10%
190	TRIAMCINOLONE ACETONIDE	CREAM	0.50%
190	TRIAMCINOLONE ACETONIDE	OINTMENT	0.03%
190	TRIAMCINOLONE ACETONIDE	OINTMENT	0.10%
190	TRIAMCINOLONE ACETONIDE	OINTMENT	0.50%
190	TRIAMCINOLONE ACETONIDE	PASTE	0.03%
190	TRIAMCINOLONE ACETONIDE	PASTE	0.10%
190	TRIAMCINOLONE ACETONIDE	PASTE	0.50%
191	TRIAMTERENE/HCTZ	CAPSULE	37.5-25MG
191	TRIAMTERENE/HCTZ	TABLET	37.5MG-25MG
191	TRIAMTERENE/HCTZ	TABLET	75-50MG
192	TRIFLUOPERAZINE HCL	TABLET	1MG
192	TRIFLUOPERAZINE HCL	TABLET	2MG
192	TRIFLUOPERAZINE HCL	TABLET	5MG
192	TRIFLUOPERAZINE HCL	TABLET	10MG
193	URSODIOL	CAPSULE	300MG
194	VALSARTAN HCTZ	TABLET	80-12.5MG
194	VALSARTAN HCTZ	TABLET	160-12.5MG
194	VALSARTAN HCTZ	TABLET	160-25MG
194	VALSARTAN HCTZ	TABLET	320-12.5MG
194	VALSARTAN HCTZ	TABLET	320-25MG
195	VERAPAMIL	TABLET	40MG
195	VERAPAMIL	TABLET	80MG
195	VERAPAMIL	TABLET	120MG
195	VERAPAMIL SR	CAPSULE	120MG
195	VERAPAMIL SR	CAPSULE	180MG
195	VERAPAMIL SR	CAPSULE	240MG
196	WARFARIN SODIUM	TABLET	1MG

	Molecule Name	Form	Strength
196	WARFARIN SODIUM	TABLET	2MG
196	WARFARIN SODIUM	TABLET	2.5MG
196	WARFARIN SODIUM	TABLET	3MG
196	WARFARIN SODIUM	TABLET	4MG
196	WARFARIN SODIUM	TABLET	5MG
196	WARFARIN SODIUM	TABLET	6MG
196	WARFARIN SODIUM	TABLET	7.5MG
196	WARFARIN SODIUM	TABLET	10MG
197	ZOLEDRONIC ACID	IV CONCENTRATE	4MG/5ML
197	ZOLEDRONIC ACID	IV SOLUTION	5MG/100ML